

DataPoint Reference Guide: Top 10 Reports and Dashboards

This list provides the 10 most utilized DataPoint reports, the value of each report, and where they can be located. Where possible, the report title is hyperlinked to provide ready access to relevant learning materials.

Fully-Funded Dashboard/Self-Funded Dashboard

- **What?** Provides a high level rolling 12-month review of total spend, enrollment, and service category utilization
- **Why?** To depict the past 12 months of healthcare that your employees received
- **Where?** Located within *Organizational Favorites*

Loss Ratio

- **What?** Demonstrates costs and premium comparisons of the selected fully-funded accounts
- **Why?** To understand the premiums and additional costs associated with your employees' healthcare
- **Where?** Located under the *Financial* dropdown

12 Month Claims Lag

- **What?** Provides a 12-month rolling review of medical and pharmacy claims paid for self-funded accounts
- **Why?** To be aware of your employees' medical and pharmacy costs that are paid by the health plan, to identify paid timelines, and to identify amounts of the claims
- **Where?** Located within *Organizational Favorites*

Top 20 High-Cost Claimant Listing

- **What?** Provides a detailed list of the 20 highest-cost claimants in a fully-funded or self-funded account (with information such as leading diagnosis) and breaks out of the costs by service type
- **Why?** To realize what highly utilized categories (e.g., tests, procedures, etc.) of healthcare your employees are using and being charged for
- **Where?** Located under the *Presentation Reports*

Financial Overview Dashboard

- **What?** Provides a review on paid pmpm by service categories, how total charges are being deducted for the current month, and the dollars saved by utilizing network providers
- **Why?** To identify the breakdown of paid charges by service categories for network providers
- **Where?** Located under the *Financial* dropdown

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High-Cost Claimant Overview

- **What?** Compares costs and utilization of high-cost claimants against non-high-cost claimants in the selected account
- **Why?** To be aware of the differences between your employees' cost and utilization of healthcare to determine risks of your high and non-high-cost claimants
- **Where?** Located under *High-Cost Claimants* in the *Financial* dropdown

Utilization Overview Dashboard

- **What?** Provides a tabbed overview on how services are being utilized by service categories IP, OP, Prof, and Pharmacy
- **Why?** To understand your employees' health utilization with the opportunity to identify trends and/or compare to commercial benchmarks
- **Where?** Located under the *Utilization* dropdown

Enrollment Overview Dashboard

- **What?** Provides a rolling 12-month review on enrollment/membership metrics
- **Why?** Provides you the ability to identify changes of your enrollees' demographics to monitor trends on a rolling 12-month basis
- **Where?** Located under the *Enrollment* dropdown

Emergency Room Analysis

- **What?** Provides ER utilization (paid, visits, avoidable, preventable) based on diagnosis categories
- **Why?** To depict why employees are visiting the ER and displaying payor's determination if emergent care was needed
- **Where?** Located under *Emergency Room Visit Analysis* in the *Utilization* dropdown

Network Analysis

- **What?** Provides in-network and out-of-network claims costs by service categories
- **Why?** To understand the amount of utilization and savings, as a percentage, of using network providers
- **Where?** Located under the *Financial* dropdown

