BlueCross BlueShield of Oklahoma

DATA & REPORTING
LUMINARE HEALTH®

Administrative Reporting
Supports Routine Administrative Functions

Check Registers*
Large Claim Notification
Enrollment Reporting
Stop-Loss Reporting

Delivery Method — Reports are setup and scheduled on your behalf; users receive an email when a report is generated.
Access — Reports are retrieved through a single sign-on portal.
Refresh Frequency — Eligibility is real-time; all other data is refreshed daily.
Data Characteristics — Medical claim paid dates show when a claim is processed and ready for payment. The actual date on which funds are withdrawn may vary, as some claims are additionally processed through the Blue Cross and Blue Shield of Oklahoma claims systems before withdrawal occurs. Fund withdrawal dates may also follow a set schedule, such as weekly.
Pharmacy data is loaded by Luminare Health to support stop-loss reporting and the paid date for pharmacy claims is the date the client was invoiced for claim.
Stop-loss member identification can differ from Analytics Reporting because it incorporates contract provisions, bi-weekly pharmacy files, and manual adjustments that Analytics Reporting does not receive.

Analytics Reporting
Designed for trend analysis, population insights, and strategic decision-making.

Enrollment & Financial Trends
(including Lag/IBNR)
Population Health
Top 20 Reporting

Delivery Method — Reports are available on demand and reports can be scheduled for delivery.
Access — The application is accessed through a single sign-on portal.
Refresh Frequency — Full monthly refresh with weekly incremental updates.
Data Characteristics — Medical claims paid dates align with claims processing within Luminare Health system and not necessarily BCBSOK funding dates. Luminare Health's reporting application enables in-depth analytics.
Pharmacy data for Luminare Health's Analytics Reporting is sent directly to the reporting application team. In this application, pharmacy paid dates usually match the prescription fill date or occur shortly after.
High-cost member identification may differ from Stop-Loss reporting because Analytics Reporting relies on different pharmacy paid dates and does not incorporate stop-loss contract details or manual adjustments.

**Separate from the Check Register, Invoices will be provided by BCBSOK.*

Blue Cross and Blue Shield of Oklahoma, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association

Custom Data Requests

If Luminare Health standard reports do not meet your needs, our team will work with you to understand your needs and submit a data request. Standard requests have a minimum turnaround time of three business days after our teams have worked with you to define and submit the request. Complex custom requests may incur a charge and will go through a requirements and scoping process prior to approval.

Luminare Health Benefits, Inc., a separate company, is solely responsible for its products and services, administers some products and services (e.g., Third Party Administration services) on behalf of Blue Cross and Blue Shield of Oklahoma. BCBSOK makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.