December 9, 2014

Statewide Medicaid Managed Care (SMMC) Policy Transmittal

Policy Transmittal: 14-25

Applicable to:
- Comprehensive Long-term Care (LTC) Plan
- Managed Medical Assistance Health Maintenance Organization
- Managed Medical Assistance Provider Service Network
- Managed Medical Assistance Specialty Plan
- Children’s Medical Services Network (CMSN) Plan

Re: Financial Reporting Written Policies and Procedures

The purpose of this policy transmittal is to inform managed care plans serving Long-term Care and/or Managed Medical Assistance enrollees of an ad hoc request for financial reporting policies and procedures. The managed care plans may be required to provide to the Agency or its agent information or data relative to this contract (Attachment II, Section II.D.2). In accordance with the contract, the managed care plans are required to develop and maintain written policies and procedures to implement and comply with all the provisions of this contract (Attachment II, Section II.D.3).

Managed care plans shall provide the Agency for Health Care Administration (Agency) with any written policies and procedures that are:

1. Applicable to the financial reporting for all lines of business in both quarterly and annual financial reports submitted to the Agency; and

2. Related to the reporting of administrative expenses and provide the methodology used to allocate administrative expenses across each line of business, if applicable.

These policies and procedures must be submitted to the Agency’s SMMC SFTP site and placed in the AD HOC folder by December 24, 2014. The documents must be submitted using the following naming convention: XXXP&P#, where XXX is the three-character plan identifier and # is the document number if multiple documents are submitted (e.g., 1, 2, 3) to distinguish between the documents.

If you have any questions, please contact Brian Meyer at (850) 412-4017.

Sincerely,

Beth Kidder
Assistant Deputy Secretary for Medicaid Operations

BK/sr

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