January 23, 2015

Statewide Medicaid Managed Care (SMMC) Policy Transmittal

Policy Transmittal: 15-04

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


In accordance with s. 409.967(3), F.S. and as specified in Section XIV, Reporting Requirements, of the contract and the Managed Care Plan Report Guide, managed care plans are required to submit quarterly unaudited financial statements including the Achieved Savings Rebate exhibits. (Attachment II, Section IX. B.5.a) The purpose of this policy transmittal is to notify managed care plans serving Managed Medical Assistance enrollees of a new ad hoc report requirement regarding the Achieved Savings Rebate (ASR) Financial Report.

Managed care plans must report plan financial data for the December 31, 2014 quarter, using the revised ASR Financial Report template (ASR Financial Report, Revised 121614) which is included with this policy transmittal. The data reported on the ASR Financial Report template must be prepared in accordance with the applicable instructions for each schedule, including quarters reported and paid through dates. The Actuarially-Sound Administrative Expense Maximum (Line 8.0 on the ASR Exhibit) will be provided by the Agency at a later date. This report must be submitted to the ad hoc folder on the SMMC SFTP site by February 23, 2015, using the following naming convention: ASR***YYQ#.xls, where *** is the SMMC plan’s three-character plan identifier and the YYQ# is the most recent quarter of information reported.

Managed care plans must continue to report this data on a quarterly schedule using the enclosed template. This updated report requirement will be included in a future version of the Statewide Medicaid Managed Care (SMMC) Managed Care Plan Report Guide; at that time, you may discontinue this ad hoc report submission.

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

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1 The contract citation for the CMSN Plan is Attachment I, Section X.E.
Sincerely,

Beth Kidder
Assistant Deputy Secretary for
Medicaid Operations

BK/ktd
Attachment: ASR Financial Report, Revised 121614