



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

March 4, 2016

Statewide Medicaid Managed Care (SMMC) Policy Transmittal

Policy Transmittal: 16-05

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 (CMS) Plan

Re: Ad hoc Report for Diabetes Disease Management

The Managed Care Plan may be required to provide to the Agency or its agents information or data relative to this Contract. In such instances, and at the direction of the Agency, the Managed Care Plan shall fully cooperate with such requests and furnish all data or information in a timely manner, in the format in which it is requested. The Managed Care Plan shall have at least thirty (30) days to fulfill such ad hoc requests, unless the Agency directs the Managed Care Plan to provide data or information in less than thirty (30) days. The Managed Care Plan shall verify that data and information it submits to the Agency is accurate. (Attachment II, Section II.D.2.¹) The purpose of this policy transmittal is to inform managed care plans serving Managed Medical Assistance enrollees of an ad hoc reporting requirement related to diabetes disease management. The Agency will use the information obtained from this ad hoc request to conduct a study focused on diabetes, as mandated in s. 385.203(1)(c), F.S.

To fulfil this ad hoc request managed care plans must complete an online survey at https://www.surveymonkey.com/r/AHCA_SMMCDiabetesMgtSurvey; a survey reference tool and Survey Monkey print screens are attached to this transmittal. Managed care plans must also submit the data required in the Excel file attached to this transmittal. The Excel file and an attestation, following the requirements in Chapter 2 of the [Report Guide](#), are to be emailed to Janicka.Harris@ahca.myflorida.com. The online survey, Excel file and attestation must be submitted by April 4, 2016.

If you have any questions, please contact Ms. Janicka Harris at (850) 412-4686.

Sincerely,

Beth Kidder
Assistant Deputy Secretary for
Medicaid Policy and Quality

BK/sr

Attachment 1, Excel File for Survey Data
Attachment 2, Survey Reference Sheet
Attachment 3, Survey Monkey Print Screens

¹ The citation for the CMS Plan is Attachment I, Section II.D.2.

