



RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

January 12, 2018

Statewide Medicaid Managed Care (SMMC) Policy Transmittal

Policy Transmittal: 18-1

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

Applicable to enrollees in:

- Managed Medical Assistance (MMA)
- Long-term Care (LTC)

Re: Claims Aging Report Submission Frequency Changed to Monthly

The managed care plan must comply with the Statewide Medicaid Managed Care (SMMC) Managed Care Plan Report Guide in submitting required reports, including the report formats, templates, instructions, data specifications, submission timetables and locations, and other materials contained in the guide. (Attachment II, Section XIV.A.1.b.¹) The managed care plan must submit the Claims Aging Report to the Agency on a quarterly basis, within forty-five (45) calendar days after the end of the reporting quarter, in compliance with the requirements in Chapter 6: Claims Aging Report of the SMMC Managed Care Plan Report Guide, effective October 1, 2017. (Attachment II, Section XIV.A.²) The purpose of this policy transmittal is to inform the managed care plan of the revised Claims Aging Report template, that the submission frequency will change from quarterly to monthly, and that the due date of the Claims Aging Report will change to within 30 days of the end of the calendar month, effective April 1, 2018.

The Agency has revised the Claims Aging Report template that is required in Chapter 6 of the SMMC Managed Care Plan Report Guide effective October 1, 2017. The only revision to the Claims Aging Report template is to reflect the change in submission frequency from quarterly to monthly. The attached revised Claims Aging Report template supersedes and replaces the Claims Aging Report template referenced in Chapter 6 of the Managed Care Plan Report Guide that was effective October 1, 2017. The managed care plan will submit the last quarterly Claims Aging Report to the Agency on May 15, 2018, for the calendar quarter ending March 31, 2018. The managed care plan must begin to submit a monthly Claims Aging Report to the Agency on May 30, 2018, for the month of April 2018.

If you have any questions, please contact your Agency contract manager at (850) 412-4004.

¹ The citation for the CMS plan contract is Attachment I, Section XIII.A.1.b.

² The citation for the CMS plan contract is Attachment I, Section XIII.A.3.



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Sincerely,

A handwritten signature in black ink that reads "Shevaun Harris". The signature is written in a cursive style with a prominent initial "S".

Shevaun Harris
Assistant Deputy Secretary for
Medicaid Policy and Quality

SH/sr