



**RON DESANTIS**  
**GOVERNOR**

**JASON C. WEIDA**  
**INTERIM SECRETARY**

January 5, 2023

## **Statewide Medicaid Managed Care (SMMC) Policy Transmittal: 2023-01**

Applicable to the **2018-2024 SMMC contract benefits** for:

- Managed Medical Assistance (MMA) and MMA Specialty
- Long-Term Care (LTC)
- Dental

### **Re: Ad Hoc Request for Encounter Data Validation (EDV) Study**

The managed care plan may be required to provide 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 must 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 must 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 certify that data and information it submits to the Agency is accurate, truthful, and complete in accordance with 42 CFR 438.606. (Attachment II, Section XVI.A.1.b.) The managed care plan shall cooperate with and provide all information requested by the External Quality Review Organization (EQRO). (42 CFR 438.350) (Attachment II, Section IX.A.6.) The purpose of this policy transmittal is to notify the managed care plan that provides Long-Term Care (LTC) services of an ad hoc request for an EDV study.

The Agency has contracted with the EQRO Health Services Advisory Group, Inc. (HSAG) to conduct an EDV study of long-term care encounters for calendar year 2021. The purpose of the EDV study is to assess the completeness and accuracy of encounter data submitted by the managed care plan to the Agency. During the first part of the EDV study, the EQRO will conduct a comparative analysis of the Agency's data to the managed care plans' data. The second part of the EDV study will add a medical records review component in which the EQRO will compare the encounter data to the information documented in the enrollees' LTC records.

The managed care plan must submit files that include all LTC encounter claims for dates of service January 1, 2021, through December 31, 2021. The managed care plan must comply with the requirements detailed in the attached data submission requirements document that HSAG developed for this EDV study. HSAG held a meeting on December 16, 2022, from 3:00 PM to 4:00 PM EST with the managed care plans to provide technical assistance relative to the requirements of this EDV study.

The managed care plan must request access to HSAG's secure FTP site by emailing the user's name, email address, and managed care plan affiliation to Kari Vanderslice at [KVanderslice@hsag.com](mailto:KVanderslice@hsag.com). The managed care plan must submit the requested encounter data files to HSAG's secure file transfer protocol (FTP) site **thirty (30) days from the issue date** of this policy transmittal.



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The HSAG secure **FTP** site is located at: <https://safe.hsag.com/Home>. This site can accept files up to 400MB in size. If any of the managed care plan's data files are larger than the 400MB limit, the managed care plan must split their data submission by quarter or semi-annual period or contact Ms. Melissa Branigan at (602) 575-7403, or [mbranigan@hsag.com](mailto:mbranigan@hsag.com) for alternate options. After the upload of the encounter data files are complete, the managed care plan must notify HSAG via email at: [mbranigan@hsag.com](mailto:mbranigan@hsag.com) and copy your Agency contract manager.

If you have any questions, or need technical assistance with the file uploading process, contact Melissa Branigan at [mbranigan@hsag.com](mailto:mbranigan@hsag.com). For other questions, contact Eliza Buyong at [ebuyong@hsag.com](mailto:ebuyong@hsag.com).

Sincerely,



Tom Wallace  
Deputy Secretary for Medicaid

TW/vb  
Attachment: FL SFY2022-23 EDV Study Plan Data Submission Requirements