SMMC Managed Care Plan Report Guide ER Visits for Enrollees without PCP/PDP Appointment Report Summary

02/01/2025

BENEFIT TYPE(S

The Managed Care Plan providing the following benefit type(s) must submit this report:

☐ LTC

MMA & MMA Specialty

⊠ Dental

REPORT PURPOSE:

The purpose of this report is to provide the Agency information regarding the number of emergency room visits by enrollees with MMA or Dental Plan benefits who have not had at least one appointment with their primary care provider (PCP) or primary dental provider (PDP) during the reporting year.

FREQUENCY & DUE DATES:

Report Year Type	Report Year Period	
C = Calendar	01/01 – 12/31	

Report Frequency	Reporting Data Period	
A = Annually	A = Annually	

This report is due by January 15th, for the prior calendar year.

REPORT CODE & SUBMISSION:

Report Code	0182
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Using the file naming convention described in Chapter 2, the managed care plan must submit the required documentation to the applicable SFTP site, as specified in Chapter 2:

- > ER Visits for Enrollees without PCP/PDP Appointment Report using the template provided.
- > A report attestation as described in Chapter 2.

INSTRUCTIONS:

- 1. The Managed Care Plan must use the ER Visits for Enrollees without PCP/PDP Appointment Report Template as provided below.
- 2. For the reporting year, the report must include but not be limited to:
 - Plan Name
 - Plan Medicaid ID (seven digit)
 - Reporting Year Year for which data is being reported
 - Enrollee's Full Name (Last, First, Middle Initial)
 - Enrollee's Medicaid ID
 - Date of Service
 - Enrollee's County of Residence

VARIATIONS BY MANAGED CARE PLAN TYPE:

No variations.

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REPORT TEMPLATE

The Agency templates can be found using the directions in Chapter 1. There are no additional report template instructions unique to this report chapter.

AMENDMENT HISTORY:

PLAN COMMUNICATION	DATE	RECAP OF CHANGE(S)
None	None	None

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