## SMMC Managed Care Plan Report Guide Health Risk Assessment Report Summary

02/01/2025

## **BENEFIT TYPE(S)**

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

#### REPORT PURPOSE:

The purpose of this report is to monitor completion of health risk assessments within the specified timeframe of completion (within 60 days of enrollment for enrollees who are identified by the Agency enrollment files as being pregnant, on the waitlist for or enrolled in the iBudget Waiver, diagnosed with a serious mental illness, or diagnosed with HIV/AIDS or within sixty (60) days of receipt of a claim or encounter indicating that a new enrollee is diagnosed with cancer, depression, diabetes, or asthma).

## **FREQUENCY & DUE DATES:**

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

Report Frequency	Reporting Data Period
Q = Quarterly	Two digits for quarter of data being reported (01, 02, 03, 04)

This report is due within fifteen (15) calendar days after the end of the reporting quarter.

## **REPORT CODE & SUBMISSION:**

Report Code	0201
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Using the file naming convention described in Chapter 2, the Managed Care Plan must submit the following to the applicable SFTP site:

- > Health Risk Assessment Report using the template provided.
- > A report attestation as described in Chapter 2.

#### **INSTRUCTIONS:**

The Managed Care Plan must submit the Health Risk Assessment Report in the format and layout specified in the report template.

The Managed Care Plan must report on the Health Risk Assessment completion status of all plan enrollees in the targeted populations whose 60th day of continuous enrollment falls within the reporting period.

## **VARIATIONS BY MANAGED CARE PLAN TYPE:**

No variations

### **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.

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## **AMENDMENT HISTORY:**

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

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