

**SMMC Managed Care Plan Report Guide
Non-Emergency Transportation Timeliness 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 monitor all non-emergency transportation trips, in accordance with the Statewide Managed Care Plan Contract, that were missed (the enrollee was not picked up) or were late (did not meet contractual timeliness standards) during the reporting month.

FREQUENCY & DUE DATES:

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

Report Frequency	Reporting Data Period
M = Monthly	Two-digit month of data being reported

This report is due within thirty (30) calendar days after the end of the reporting month.

REPORT CODE & SUBMISSION:

Report Code	0196
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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:

- Non-Emergency Transportation Timeliness Report using the template provided.
- A report attestation as described in Chapter 2.

INSTRUCTIONS:

1. The Managed Care Plan must submit the Non-Emergency Transportation Timeliness Report for all enrollees for whom the Managed Care Plan was aware had a non-emergency transportation service scheduled with the Managed Care Plan and the trip was late or missed. For purposes of this report, late or missed trip includes the following:
 - a. When a trip to an SMMC Contract-covered service or benefit, or other Medicaid service, is late or missed (Leg A), or
 - b. When a trip from an SMMC Contract-covered service or benefit, or other Medicaid service, was late or missed (Leg B), or

Note: The Managed Care Plan must include in this report all non-emergency transportation complaints received from the Agency for late or missed trips that occurred during the reporting month. These complaints may be received during the reporting month as well as within the 30 days after the reporting month when the Managed Care Plan is compiling the report data for submission.

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2. This report also includes unscheduled (as defined in Rule 59G-4.330) non-emergency transportation late or missed trips if:
 - a. Transport to a Contract-covered service or benefit, or other Medicaid service, was required to timely access such services in accordance with the access requirements in the SMMC Contract, or
 - b. The unscheduled non-emergency transportation trip was authorized by the Managed Care Plan (e.g., hospital discharge request, urgent care trip, etc.).
3. The Managed Care Plan must complete the Non-Emergency Transportation Timeliness Report as specified on the instructions tab(s) of, and in the format and layout of, the report template provided on the Agency website. The Managed Care Plan must complete both the NET Summary tab and the Trip Issues Detail tab.
4. Each monthly submission must include all data fields on the report template for the non-emergency late or missed trips known to the Managed Care Plan during the reporting month, including the reason for each late or missed trip, unless the report template indicates the field may be left blank.
5. For months without any non-emergency transportation late or missed trips known to the Managed Care Plan, the Managed Care Plan shall submit only the attestation specifying that there were no non-emergency transportation late or missed trips that occurred during the reporting month that were known by the Managed Care Plan during the reported month or identified within the 30 days after the reporting month when the Managed Care Plan was compiling the report for submission.

VARIATIONS BY MANAGED CARE PLAN TYPE:

No variations.

REPORT TEMPLATE:

The Agency template 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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