

**SMMC Managed Care Plan Report Guide
Chronic Disease Management Program Quarterly Report Summary**

02/20/2025

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 with results of the Chronic Disease Management Program including:

- Quantitative and qualitative data showing trends in quality indicators.
- Comparison of quality indicators to target goal.
- Comparison of quality indicators to state or national standards or benchmarks if, available.

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 the quarter of data being reported (01,02,03,04)

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

REPORT CODE & SUBMISSION:

Report Code	0214
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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:

- Chronic Disease Management Program Quarterly Report
- A report attestation as described in Chapter 2.

INSTRUCTIONS:

The Managed Care Plan must submit the Chronic Disease Management Program Quarterly Report in a format and layout selected by the plan, that clearly presents and identifies the required information.

VARIATIONS BY MANAGED CARE PLAN TYPE:

No variations.

REPORT TEMPLATE:

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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