

August 13, 2020

Statewide Medicaid Managed Care (SMMC) Policy Transmittal: 2020-44

Applicable to the **2018-2023 SMMC contract benefits** for:

Managed Medical Assistance (MMA) and MMA Specialty

Long-Term Care (LTC)

Dental

Re: Ad Hoc Request for Value-Based Payment Survey Data

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 must 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 purpose of this policy transmittal is to inform the managed care plan of an ad hoc request for value-based payment survey data.

The managed care plan must provide the information required in the Value Based Payment Models Survey Template that is attached to this policy transmittal, in accordance with the requirements in the template's instructions tab. The managed care plan must submit the completed report to the Agency's SMMC_CY18-23 secure file transfer protocol site, Port 4443, within the managed care plan's designated folder path, in the AdHoc/2020 folder. The managed care plan must use the file naming convention "ABCVBPSurveyData.xls", where ABC is the plan's three-digit identifier, and submit this report to the Agency no later than close of business August 28, 2020.

If you have questions or concerns, please contact your Agency contract manager at (850) 412-4004.

Sincerely,

Shevaun Harris
Assistant Deputy Secretary for
Medicaid Policy and Quality

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Attachment: Value Based Payment Models Survey Template

