



RON DESANTIS  
GOVERNOR

MARY C. MAYHEW  
SECRETARY

August 19, 2020

## Statewide Medicaid Managed Care (SMMC) Policy Transmittal: 2020-45

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 Interim Performance Measures Data Report

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 managed care plan must collect statewide data on enrollee performance measures (PMs), as defined by the Agency and as specified in the SMMC Performance Measure Tables in the applicable Exhibits, the Managed Care Plan Report Guide, and Performance Measures Specifications Manual. (Attachment II, Section IX.B.2.) The purpose of this policy transmittal is to inform the managed care plan of an ad hoc request for interim performance measure data.

The managed care plan must complete the attached Ad Hoc Interim Performance Measures Data Report Template in accordance with the requirements in the instructions tab, including dates of services provided in calendar year (CY) 2020, as of July 31, 2020. 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 "ABCCY2020InterimPMdata.xls", where ABC is the plan's three-digit identifier, and send this report to the Agency no later than close of business September 3, 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

SH/sar

Attachment: Ad Hoc Interim Performance Measures Data Report Template

