

January 29, 2021

## Statewide Medicaid Managed Care (SMMC) Policy Transmittal: 2021-02

Applicable to the <b>2018-2023 SMMC contract benefits</b> for:	
	Managed Medical Assistance (MMA) and MMA Specialty
$\boxtimes$	Long-Term Care (LTC)
	Dental

## Re: Update to PT 2020-70: Ad Hoc Request for Weekly Home Health Electronic Visit Verification (EVV) Reports

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 notify the managed care plan of a revised ad hoc report template.

The managed care plan must use the revised ad hoc report template attached to this policy transmittal to submit their report next Wednesday, February 4, 2021, and for all weekly submissions thereafter.

If you have any questions or concerns, please contact your Agency contract manager.

Sincerely,

Beth Kidder

Deputy Secretary for Medicaid

BK/sar

Attachment: EVV Vendor Weekly Status Report Template 01262021

