SMMC Managed Care Plan Report Guide Case Manager Caseload Report Summary

12/01/2021

BENEFIT T	YPE(S)
The Manage	ed Care Plan providing the following benefit type(s) must submit this report:
\boxtimes	LTC
	MMA & MMA Specialty
	Dental

REPORT PURPOSE:

The purpose of this report is to ensure that enrollees receiving LTC services are receiving quality case management services, by monitoring the caseload requirements.

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 fifteen (15) calendar days after the end of the reporting month.

REPORT CODE & SUBMISSION:

Report Code	0151
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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:

- Case Manager Caseload Report using the template provided.
- > A report attestation as described in Chapter 2.

INSTRUCTIONS:

The Managed Care Plan must submit the Case Manager Caseload Report in the format and layout specified in the report template.

VARIATIONS BY MANAGED CARE PLAN TYPE:

No variations.

REPORT TEMPLATE:

The Agency templates 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	No change(s) from the SMMC Report Guide 9/1/2019.