

SMMC Managed Care Plan Report Guide
Enrollee Complaints, Grievances and Plan Appeals Report Summary

12/18/2020

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 a monthly record of all complaints, grievances, and appeals in accordance with the terms of the Contract.

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	0127
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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:

- Enrollee Complaints, Grievances, and Appeals Report using the template provided. The completed enrollee template including MMA, LTC, and Dental data, as applicable on the labeled tab for the appropriate month, must be submitted as an XLSX file and named using the file naming convention as described in Chapter 2 of this guide.
- A report attestation as described in Chapter 2.

INSTRUCTIONS:

1. The Managed Care Plan must file one Enrollee Complaints, Grievances, and Plan Appeals Report for MMA, LTC, and Dental data using the template provided.
2. The Managed Care Plan must complete the Enrollee Complaints, Grievances and Plan Appeals Report as specified on the instructions tab of the report template provided on the Agency website.
3. The Managed Care Plan must only use the permissible drop down options for any column that has a drop down menu.

VARIATIONS BY MANAGED CARE PLAN TYPE:

No variations.

REPORT TEMPLATE:

The Agency's template consists of the following:

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- A workbook with 26 tabs which include the following:
 - Instructions – explains how to complete the template.
 - Codes – provides report definitions and codes explaining the types of complaints, grievances, appeals, dispositions, and county code information.
 - Jan-Dec G&A – Each month has a separate worksheet for reporting enrollee grievances and appeals received by the Managed Care Plan during the reported timeframe.
 - Jan-Dec C – Each month has a separate worksheet for reporting enrollee complaints received by the Managed Care Plan during the reporting timeframe.

The Agency templates can be found using the directions in Chapter 1.

AMENDMENT HISTORY:

PLAN COMMUNICATION	DATE	RECAP OF CHANGE(S)
None	None	No change(s) from the SMMC Report Guide 9/1/2019.

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