SMMC Managed Care Plan Report Guide Health Risk Assessment Report Summary

12/18/2020

BENEFI	T TYPE(S)
The Man	aged Care Plan providing the following benefit type(s) must submit this report:
\boxtimes	LTC
$\overline{\boxtimes}$	MMA & MMA Specialty
	Dental
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REPORT PURPOSE:

The purpose of this report is to monitor completion of health risk assessments within the specified timeframe of completion (within 60 days of enrollment).

FREQUENCY & DUE DATES:

Report Year Type	Report Year Period
C = Calendar	01/01 – 12/31

Report Frequency	Reporting Data Period
Q = Quarterly	Two digits for quarter of data being reported (01, 02, 03, 04)

This report is due within fifteen (15) calendar days after the end of the reporting quarter.

REPORT CODE & SUBMISSION:

Report Code	0201

Using the file naming convention described in Chapter 2, the Managed Care Plan must submit the following to the applicable SFTP site:

- Health Risk Assessment Report using the template provided.
- > A report attestation as described in Chapter 2.

INSTRUCTIONS:

The Managed Care Plan must submit the Health Risk Assessment Report in the format and layout specified in the report template.

The Managed Care Plan must report on the Health Risk Assessment completion status of all plan enrollees in the targeted populations whose 60th day of continuous enrollment falls within the reporting period.

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:

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

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