

**SMMC Managed Care Plan Report Guide
Inter-Rater Reliability (IRR) 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 the Agency with information regarding the health plan's quality assurance and quality improvement program. The health plan shall conduct inter-rater reliability audits of at least 1% of service authorization decisions per reviewer (nurses, therapists, physicians, etc.). Each reviewer must maintain an 85% accuracy rate.

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 thirty (30) days after the end of each quarter.

REPORT CODE & SUBMISSION:

Report Code	0200
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Using the file naming convention described in Chapter 2, the Managed Care Plan must submit the following to the applicable SFTP site:

- Report using the template provided.
- A report attestation as described in Chapter 2.

INSTRUCTIONS:

1. The Managed Care Plan must use the Inter-Rater Reliability Report Template as provided below.

2. For the reporting quarter, the report must include:

- Plan Name
- Plan Medicaid ID (seven digit)
- Date Report Submitted (MM/DD/YYYY)
- Reporting Year and Quarter (YY/Q#)
- Report Submitted by:
- Reviewer Name (First, Last)
- Reviewer Profession (e.g., RN, LMHC, MD, DDS, etc.)
- Service Types Reviewed (e.g. inpatient admission, advance imaging, physical therapy, preventive services, etc.)
- Total Authorization Decisions Made within the Reporting Quarter
- Sample Size Audited
- Percentage of Decisions Audited

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- Number of Decisions in Agreement
- Reviewer Accuracy Rate
- Comments (remediation plan)

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.

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