

**SMMC Managed Care Plan Report Guide  
Service Authorization Performance Outcome Report Summary**

03/18/2022

**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 Managed Care Plan's service authorization process, including service authorization volumes, service authorization denial data, and timeframes for service authorization decisions.

**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	0197
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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:

- Service Authorization Performance Outcome Report using the template provided.
- A report attestation as described in Chapter 2.

**INSTRUCTIONS:**

The Managed Care Plan is to report on all clinical service authorization requests completed during the reporting month, to include those service authorizations received during the preceding month and finalized during the reporting month.

The Managed Care Plan must submit the Service Authorization Performance Outcome Report in the format and layout specified in the report template.

The report template includes multiple worksheets. Managed Care Plans must complete both the Authorization Outcome worksheet and the Authorization Timeliness worksheet.

**VARIATIONS BY MANAGED CARE PLAN TYPE:**

Comprehensive LTC Plans/LTC Plus Plans complete this report only for service authorization process information for services covered under the Managed Medical Assistance Program (Attachment II, Exhibit II-A), as these plans are providing information for LTC service authorizations in the Denial, Reduction, Termination, and Suspension of Service Report Summary.

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The Specialty Plan shall complete and submit a separate report. If the Managed Care Plan has a Comprehensive Plan and Specialty Plan, separate reports shall be completed and submitted by the Comprehensive Plan and by the Specialty Plan.

**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:**

<b>PLAN COMMUNICATION</b>	<b>DATE</b>	<b>RECAP OF CHANGE(S)</b>
RCN 2022-06	03/18/2022	Updates to the 'Variations By Managed Care Plan Type' section include adding instructions inadvertently omitted.
<b>None</b>	<b>None</b>	No change(s) from the SMMC Report Guide 9/1/2019.

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