Managed Care Organizations (MCOs) are required to comply with all reporting requirements established by HSD as specified in the State’s Medicaid Managed Care Agreement, which details requirements for timely submission, formatting, completeness and accuracy of content. MCOs are provided with State-approved instructions and templates to facilitate timely, complete, and accurate reporting. A complete list of current reports is incorporated in this Manual as Appendix Q: MCO Reports.

GENERAL REQUIREMENTS

MCOs are also required to implement continuous improvement processes to identify instances and patterns of non-compliance. Identified patterns of non-compliance are addressed internally by MCOs to improve overall performance and compliance.

HSD, at its discretion, may revise existing report content. HSD may seek MCO and state staff input. Beginning the day HSD issues finalized Report Instructions and Templates, MCOs will have thirty (30) at least (14) calendar days, and additional time at HSD’s discretion, to implement existing report content changes depending on the nature of the changes.

MCO REPORTING & INTAKE

The HSD’s report management process involves the following:
• tracking Downloading MCO report submissions via Xerox secure File Transfer Protocol (FTP) site (File Transfer Protocol);
• downloading Processing MCO report submissions, resubmissions and other related documents;
• acknowledging Acknowledging receipt of reports within forty-five (45) calendar days of receipt of the report upload due date;

performing Performing the an initial review quality check by HSD Intake staff for timeliness and completeness to ensure the MCO report is timely, accurate, complete, formatted correctly, submitted on the correct template version and is accompanied by a signed and dated Attestation;
• Recording all report review information and actions into an MCO Reports Tracking Tool;
• assigning Assigning MCO reports to subject Subject matter Matter experts Experts (SMEs) who possess the knowledge and experience to conduct a thorough analysis of MCO reports and verify MCO compliance with HSD requirements and performance standards for review and analysis;
• Tracking and monitoring compiling and filing the MCO reports review and data analyses process;
• monitoring Managing HSD Report Reviewer and Contract Manager (CM) timeframes to ensure HSD staff completes timely MCO report review finalization; and
• uploading Uploading State HSD feedback (Acceptance, Rejection, or Final Review Tool etc.) to the Xerox FTP site.

MCO REPORT REJECTION

Reports can be rejected at any point during the State’s review process. Reasons for An MCO Report may be rejected, by HSD, due to the following reason(s):

1. Report contains data inaccuracies
2. Report did not include a signed Attestation
3. Report was incomplete (e.g. data missing in fields)
4. Report was not formatted correctly
5. Report is not on the correct template
6. Report has incorrect naming convention
7. Report does not include a correct reporting period, MCO name and report run date

If any of the reasons above apply, the HSD Contract Manager will determine whether a Rejection is warranted, or if a HSD Directed Report Resubmission (HDRR), Technical Assistance (TA) Call or other solution is preferred.

rejection include reports that are incomplete or missing data, improperly formatted, submitted on obsolete templates, lack of attestation and reports determined to contain inaccurate
The Intake staff upload rejection. Resubmissions are due within ten (10) business days of the date of rejection.

**MCO REPORT RESUBMISSION**

HSD management has developed and implemented several processes (Technical Assistance Call, HDRR, Self-Identified Error Report Resubmission) that continue improving the MCOs’ level of data accuracy and reporting compliance regarding report resubmissions.

### A. Technical Assistance (TA) Call Process

HSD Contract Managers are available to provide technical assistance to MCOs regarding the reporting process in the following areas:

- HSD’s review and final feedback
- Extension of report submission deadlines
- Resolution of reporting concerns

In an effort to maximize and improve MCO reporting and data efficiency levels, HSD may conduct a Technical Assistance (TA) call to address data-related questions and concerns. This process continues to create a window of opportunity for MCOs to gain valuable guidance from HSD Contract Managers and SMEs.

After a TA Call is held, the HSD Contract Manager determines whether the MCO’s report is Accepted, Rejected or if a HDRR is required.

### B. HSD Directed Report Resubmission (HDRR)

The HSD Directed Report Resubmission (HDRR) process provides a structured method to ensure accurate MCO reports are on file with HSD. There are cases, often identified in a Technical Assistance Call, in which a report contains inaccurate data but the report itself does not rise to the level of a rejection. In such cases, the Contract Manager will require the MCO to resubmit the report with corrected data. The HDRR process is applied only when a report has minor inaccuracies.

An HDRR form is generated and approved by an HSD Contract Manager and may be directed before or after a report is reviewed or a TA Call is held. The CM completes the form and forwards it to Intake staff for upload to the FTP site.

### C. Self-Identified Error Resubmission (SIER)

Per Section 4.21.1.6 of the Agreement:

- MCO submits a SIER report form to the Contract Manager for review and approval.
Contract Manager works with the MCO to ensure the SIER report form is clear and includes the agreed-upon resubmission date.

- SIER report form identifies the exact data elements that should be changed in the report resubmission.
- The SIER process does not apply to errors already identified by HSD in feedback responses to the MCO.

MCOs upload a SIER report resubmissions within the deadline specified on the rejection form by an HSD Contract Manager. MCOs are required to accurately label each subsequent report submission with the appropriate version number (v2, v3, v4).

NOTE: HSD Contract Managers approve all MCO Report Rejections, SIERs, HDRRs; manage the TA Call process; and direct the overall resubmission of MCO reports.

It is important that the MCOs accurately label each subsequent submission with the appropriate version number (Ex: v2, v3, v4)

HSD continues to evaluate its managed care reporting and resubmission processes to make certain they are effective, align with HSD policies and procedures and subsequently lead to positive MCO reporting outcomes.

**Technical Assistance**

Contract Management staff and Financial Management Bureau staff are available to provide technical assistance to MCOs regarding the reporting process in the following areas:

- State’s review and feedback
- Extension of submission deadlines
- Resolution of reporting concerns

**Report Revisions**

HSD conducts report revisions as necessary through a formal, written process in which MCOs and end users request needed changes to data reporting metrics. This process is intended to streamline managed care reporting and reduce administrative burden by limiting data collection, where possible, to meet federal and state requirements. Changes to HSD’s managed care data reporting also supports the needs of external agencies and stakeholders.
The report revision process begins with submission of a formal request to HSD. If the request is approved, the Centennial Care Contracts Bureau (CCCB) will organize a revision workgroup with subject matter experts and report reviewers to make required revisions or modifications.

When the workgroup completes this function, a draft reporting package is submitted to MCOs for comment and testing. Comments may be rejected or accepted, resulting in additional revisions to the reporting package. HSD then issues the final reporting package to MCOs for implementation.

**System Availability Reporting**

MCOs must notify HSD of MCO’s and its subcontractor’s systems availability and performance. In the event of scheduled unavailability of critical Member and provider Internet and/or telephone-based functions and information, including but not limited to Member eligibility and enrollment systems, MCOs must notify HSD in advance via email at the following address **HSD.MCOSysAvail@State.nm.us** in order to obtain approval by HSD. In the event of an unforeseen and unscheduled inaccessibility of any critical systems, MCOs must notify HSD via email to the above address as soon as possible.

Furthermore, in the event of a problem with system availability that exceeds four (4) hours, MCOs are directed to notify HSD immediately via email at the following address **HSD.MCOSysAvail@State.nm.us**. MCOs are to provide HSD via generic email address, within five (5) business days, with full written documentation that includes a Corrective Action Plan describing how MCO will prevent the problem from occurring again.

In the event of any critical systems unavailability that has been already approved and agreed upon by HSD but the amount of downtime exceeds what was initially approved by HSD, MCOs must notify HSD immediately via email at the following address **HSD.MCOSysAvail@State.nm.us**.

During Federal and/or State Holidays and weekends, the same processes included above would apply.

For any critical Member or provider system unavailability, MCOs should also immediately contact Linda Gonzales, Medical Assistance Division, Systems Bureau Chief, at (505) 629-6278 and email her at linda.gonzales@state.nm.us.

For any email notification pertaining to the above direction, MCOs must use the HSD developed template included in this section as Appendix R: Systems Availability Incident or Event Report.