

Attestation for Reports

Click or tap to enter the date

I, First Name, Last Name, as Position Title for Name of Managed Care Plan, do hereby attest and certify, based upon my best knowledge, information, and belief, that the data provided in the documents provided herein are accurate, true, and complete.

I understand that should the South Carolina Department of Health and Human Services determine the submitted information is inaccurate, untrue, or incomplete, Name of Managed Care Plan may be subject to liquidated damages, sanctions, and/or fines as outlined in the South Carolina Managed Care Contract.

X

Signature, Title

Report	Certification / Attestation
Monthly Reports	
Manual Maternity Kicker Request	
High Cost No Experience Drug (HCNE) *	
Call Center Performance	
Case Management Report	
Claims Payment Accuracy	
Key Personnel Changes *	
Encounter Submission Summary	
PCMH File	
Non-Par Template	
Psychiatric Residential Treatment Facility (PRTF)	
TPL Cost Avoidance (Facility)	
TPL Cost Avoidance (Professional)	
TPL Cost Avoidance (Rx)	
TPL Recoveries (Facility)	
TPL Recoveries (Professional)	
TPL Recoveries (Rx)	
TPL Savings (Facility)	
TPL Savings (Professional)	
TPL Savings (Rx)	
TPL Casualty Cases	

[Insert MCO logo and Healthy Connections logo. Reduce in size if necessary so attestation remains 2 pages.]

Quarterly Reports	
Graduate Medical Education (GME)	
FQHC/RHC Wrap Payments	
FQHC/RHC Wrap Payments Annual Reconciliation	
Provider Network Submission	
Member Appeal & Grievance Log *	
Provider Dispute Log	
Service Authorization	
Quarterly DOI/NAIC filing (CY to Date; FQ2=Annual)	
Single Preferred Drug List Compliance Report	
Biannual/Annual	
Organizational Chart of MCO *	
Service Authorization	
Annual Member Appeal & Grievance Log *	
Additional Services Template/ Expanded Benefits Chart *	
Annual Audited Financial Statement	

* Items in grey: If there is nothing new to report, attest as such and submit a Null report with 'No data to report at this time'.

DIRECTIONS

- 1) Fill in the bracket [] with the requested information.
- 2) Per Contract section 14.1.6.4- This certification must be made by one of the following:
The CONTRACTOR's Chief Executive Officer (CEO),
The CONTRACTOR's Chief Financial Officer (CFO),
Or an individual who reports directly to the CEO or CFO with delegated authority to sign for the CEO or CFO so that the CEO or CFO or CEO bears ultimate responsibility for the certification.
- 2) In the 'Certification/Attestation' column, mark which reports are being submitted.
- 3) For grey items with an *, these are items with the potential of having nothing new to report for a given time frame. For these reports, the submitter may submit the report template with 'No new data to report at this time' in the body of the template where the data would be.
- 4) Once completed, convert the 'Attestations List' worksheet to a pdf and upload this attestation to SharePoint in the same location as the report(s) being submitted.