MCO Reports Companion Guide Change Control Record

Date	Section(s)	Page(s)	Change
04/01/2025	Intro	3	Updates to language in introduction to include more specific guidance.
	Full Reports List	4-21	Single PDL Compliance Report added as a new quarterly report.
	Full Reports List	4-21	Non-Par Template Report added as new monthly report.
	Full Reports List	4-21	PI Reports updated and reorganized.
	Full Reports List	4-21	Added Annual Marketing Plan under Section 12
	Full Reports List	4-21	Moved PCMH and Quality Withhold reports under Section 15.
	5.4	39	Addition of intensive case management requirements to case management report.
	6.5	50-51	Addition of Non-Participating Report details.
	7.2	52	Update to due date for the MLR calculation.
	Section 7; Section 15	52-60; 73-76	Moved PCMH and Withhold report information from Section 7 to Section 15 to reflect reorganization in the MCO contract.
	Section 11	64-67	Reorganization and updates to all PI Reports.
	Appendix C	145-156	Updated monthly, quarterly, annual, and ad hoc reports list to better reflect all Managed Care reports.
10/01/2024	Full Reports List	4-20	Removed DUR Activities report; duplicative
	Full Reports List	4-20	Updated names and due dates for Network Adequacy reports
	Full Reports List	4-20	Updated Additional Servies Template Due Date
07/01/2024	Full Reports List	4-20	Removed Makena 17P; not a report/ no longer in use
	Full Reports List	4-20	Removed Deceased Members Receiving Premiums; no longer in use
	Full Reports List	4-20	Removed Fraud Notification; no longer in use
	Full Reports List	4-20	Removed MCO Payment Suspension; not a report
	Full Reports List	4-20	Removed Pharmacy Lock-In Member Letter; not a report
	Full Reports List	4-20	Removed Pharmacy Lock-In Member Removal Letter; not a report

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Date	Section(s)	Page(s)	Change
	Full Reports List	4-20	Removed Pharmacy Lock-In Pharmacy Letter; not a report
	Full Reports List	4-20	Removed Supplemental Member Satisfaction Information; duplicative
	Full Reports List	4-20	Removed Provider Network (Enrollment Broker Submission); does not come to SCDHHS; report may be found in Milliman/ Maximus reports list found on pg. 155-158
	Full Reports List	4-20	Removed Provider Directory; does not come to SCDHHS; report may be found in Milliman/ Maximus reports list found on pg. 155-158
	Full Reports List	4-20	Removed Provider Network; does not come to SCDHHS; report may be found in Milliman/ Maximus reports list found on pg. 155-158
	Full Reports List	4-20	Added Additional Services Evaluation Report
	Full Reports List	4-20	Changed name of Additional Services Chart to Expanded Benefits Chart
	Full Reports List	4-20	Added Annual Network Development Plan (Section 6.6)
	Full Reports List	4-20	All CONTRACTOR Policies and Procedures moved to Section 4.1
	Full Reports List	4-20	PI Fraud and Abuse Member changed to Provider Fraud Referral Form & Provider Waste and Abuse Referral Form
	Full Reports List	4-20	Added Vetting Form
	Full Reports List	4-20	Added FQHC/RHC Encounter Reporting
Date	**Section(s)**	**Page(s)**	**Change**
	4.3- 4.8	30-37	Updated and added to Additional Services Request Form, Additional Services Template, Expanded Benefits Chart, Additional Services Evaluation Report, and Member Incentive Form
	7.9	80-105	Moved Regulation 69-70 Annual Audited Financial Reporting Regulation to its own appendices (Appendix A)
	12.4	67-68	Added Member Material Attestation Form, including an example of the Minimal Change Attestation Form.
	Appendices		Removed Appendix B (previously) MMIS Tables. Appendix will be made into its own guide.

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Date	Section(s)	Page(s)	Change
	Appendices	145-154	Time-specific reports tables moved to newly created Appendix C
	Appendices	155-158	Added Milliman and Maximus Managed Care Reports to Appendix C
10-18-2022	Full Reports List	4	Updated section numbering of reports to match the Contract.
	Quarterly Reports List	38	Updated section numbering of reports to match the Contract.
	6.3	39	Added Provider Network to Quarterly section to match the Contract.
	Annual Reports List	48	Updated section numbering of reports to match the Contract.
	6.3	49	Removed Provider Network from Annual section to match the Contract.
7-01-2022	Full Reports List	4-5	Updated section numbering of reports to match the updated Contract.
Date	**Section(s)**	**Page(s)**	**Change**
	As Necessary Reports List	7	Updated section numbering of reports to match the updated Contract.
	3.11	8	Section numbering 3.12 was changed to 3.11 to match Contract.
	Monthly Reports List	16	Updated section numbering of reports to match the updated Contract.
	3.6	23	Section numbering 3.7 was changed to 3.6 to match Contract.

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Date	Section(s)	Page(s)	Change
	3.17	26	Section numbering 3.18 was changed to 3.17 to match Contract.
	4.2	26	Removed reference to COVID vaccine report.
	13.1	33	Added reference to PRTF report.
	Annual Reports List	42	Updated section numbering of reports to match the updated Contract.
	15.4	67	Section numbering 15.3 was changed to 15.4 to match Contract.
4-01-2022	Full Reports List	5	Edited report listing for the Grievance and Appeal Log to be one report submitted quarterly and annually.
	Quarterly Reports List	37	Edited report listing for the Grievance and Appeal Log to be one report submitted quarterly.
	9.1	39	Updated language for a single Grievance and Appeal Log and deleted the Appeal report template bullet.
Date	**Section(s)**	**Page(s)**	**Change**
	Annual Reports List	41	Edited report listing for the Grievance and Appeal Log to be one report submitted annually.
	9.1	65	Updated language for a single Grievance and Appeal Log and deleted the Appeal report template bullet.
10-01-2021	Full Reports List	5	Added BabyNet Members and BabyNet Providers reports to Appendix E of list.
	Monthly Reports List	16	Added BabyNet Members and BabyNet Providers reports to Appendix E of list.

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Date	Section(s)	Page(s)	Change
	Appendix E	33-35	Added BabyNet reports description.
07-01-2021	Full Reports List	4	Removed Autism and PRTF reports from section 4.2 list.
	Monthly Reports List	16	Removed Autism and PRTF reports from section 4.2 list.
	4.2	26	Removed Autism and PRTF reports description.
	14.10	37	Updated language for EQI and deleted the second EQI report template bullet.
	7.2	46	Updated language for MLS Calculation.
	14.10	63	Updated language for EQI.
04-01-2021	Full Reports List	4	Updated section 4.2 to include COVID-19 Vaccine Administration Report.
Date	**Section(s)**	**Page(s)**	**Change**
	Monthly Reports List	16	Updated section 4.2 to include COVID-19 Vaccine Administration Report.
	4.2	26	Added COVID-19 Vaccine Administration Report description.
01-01-2021	4.2	40	Updated the IMD report picture and definitions to reflect the current version.
10-01-2020	Full Reports List	4-5	Updated sections 4.2 and 7.3 to match the body of the guide.

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Date	Section(s)	Page(s)	Change
	Monthly Reports List	16	Updated sections 4.2 and 7.3 to match the body of the guide.
	4.2	26	Added High Cost No Experience Drug Report description.
	7.3	27	Updated Dual Medicare/Medicaid Report screen shot and added definitions.
	7.3	28-30	Updated Monthly Premium Recoupment report description. Added screen shots of templates and definitions for the three tabs of the report.
07-01-2020	4.8	10	Added detail regarding approval/denial of the Member Incentive Form.
04-01-2020	7.3	27	Updated picture of the Dual Medicare/Medicaid report to reflect the current reporting elements.
	15.5	62	Updated where the APM certification is submitted.
	Appendix A	64-69	Updated Files Exchanged between SCDHHS and MCOs to the 5-25-17 version.
Date	**Section(s)**	**Page(s)**	**Change**
	Appendix A	85	Added Choice Reason Codes 668 and 669.
	9.1	N/A	Uploaded Member Grievance Log to Excel Reports Template website at https://msp.scdhhs.gov/managedcare/site-page/excel-report-templates Revision to template includes supplied categories for Grievance Type field.