## **Attachment 13 - List of Required Reports**

## **Contractor Reports to be provided to Covered CA**

Below is a list of reports to be provided by the Contractor to Covered California on a monthly, quarterly or annual basis.

Report Name	Contract Section	Frequency	Due Date	Submit to:	
Fraud, waste and abuse detection and prevention programs and report total moneys recovered by Contractor in the most recent 12-month period in relation to Services provided to Enrollees	1.16	Annually	February 28, 2018 – Report for prior calendar year 2017.	QHP@covered.ca.gov	
Enrollment Reconciliation Comparison extract	2.1.2	Monthly	As required in 2.1.2	SFTP	
Agent of Record Exception Report	2.2.6	Monthly	Last business day of each month	outreachandsales@covered.ca.gov	
Description on Contractor's standard agent compensation program and policies	2.2.6	Annually	60 days prior to open enrollment	QHP@covered.ca.gov	
Marketing Plan	2.3	Annually	30 days prior to open enrollment	QHPMarketingMaterials@covered.ca .gov	
Marketing Plans of Retention and Renewal	2.3	Annually	30 days after open enrollment begins	QHPMarketingMaterials@covered.ca .gov	
Marketing Actualized Spend Amounts	2.3	Annually	For open enrollment – 30 days after open enrollment closes; for the special enrollment period – 30 days after calendar year ends; and for retention and renewal, 30 days after open enrollment begins	QHPMarketingMaterials@covered.ca .gov	
Reporting Requirements in Attachment 7.					
Reducing Health Disparities and Assuring Health Equity – HEDIS Reporting	Attachment 7, 3.01, 3.02	Annually	Separate Report	Submit through the Extranet	
Hospital Acquired Conditions (HACs) Report – Rates of five specified HACS by hospital	Attachment 7, 5.02	Annually	Separate Report	Submit through the Extranet	

The following Reporting Requirement	ents in Attachmen	t 14		
Customer Service Performance Standards	Attachment 14 Groups 1 & 2 Standards 2.1 - 2.4	Monthly	The 10 <sup>th</sup> of the following month	QHP@covered.ca.gov
Provider Directory and Attachment 7 EAS Data	Attachment 14 2.5 & Attachment 7 EAS Data	Monthly	As requested	Monthly Provider Data submitted to Covered California, EAS Data submitted to EAS Vendor.
Agent of Record Exception Reports	Attachment 14 Group 2 Standard 2.6	Monthly	Last business day of each month	outreachandsales@covered.ca.gov
Quality, Network Management & Delivery System Standards	Attachment 14 Group 3 Standards 3.1 - 3.2	Annually	For calendar year 2017, due date to be determined by CMS	Data submitted to CMS for review.
Quality, Network Management & Delivery System Standards	Attachment 14 Group 3 Standard 3.3	Monthly	As requested	Monthly Provider Data submitted to Covered California. (Same report as Contract Section 3.4.4 above)
Quality, Network Management and Delivery System Standards	Attachment 14 Group 3, 3.4-3.9	Quarterly	Quarterly as request	application for certification and the Extranet
Dental Quality Alliance (DQA) Pediatric Measure Set – for embedded pediatric dental	Attachment 14 Group 5	Annually	For calendar year 2017 due on April 30, 2018	QHP@covered.ca.gov

Financial Management Division – Required Reports						
Payment Reconciliation – Schedule of Notifications  Contractors participating in the individual market shall report delinquent full or partial payments of premiums to the	Monthly	Report due in the month following the payment due date.	Accounting SCRtickets@covered.ca.gov			
Exchange. The schedule shall include a record of all notifications, including phone calls and letters, to participants of delinquent accounts.	Monthly	Deport due in the month following	Accounting			
Billing Detail – Discrepancy Report  Contractors participating in the individual market shall use the PM/PM (per member, per month) member level billing detail template to communicate billing discrepancies to the Exchange. Contractor shall use the PM/PM member level billing detail, as provided by the Exchange, to compare against the Contractor's confirmed enrollment to identify discrepancies. Contractor shall use the "comments" column, on the far right of the PM/PM member level billing detail template to identify billing discrepancies such as member duplication, cancellation, termination, missing Covered CA, missing Carrier, effective date, or plan difference. Contractor shall submit the completed template in both a format and secure manner approved by the Exchange. Furthermore, Contractor understands submittal of the completed billing discrepancy template does not extend or revise the invoice due date.	Monthly	Report due in the month following the payment due date. Use FMD Issuer Billing Discrepancy Report Template.	Accounting SCRtickets@covered.ca.gov			