

**COORDINATED LONG TERM SERVICES
REPORTING REQUIREMENTS
Tribal Consultation Version 10.15.2013**

**TITLE 8 SOCIAL SERVICES
CHAPTER 307 COORDINATED LONG TERM SERVICES
PART 14 REPORTING REQUIREMENTS**

8.307.14.1 ISSUING AGENCY: Human Services Department
[8.307.14.1 NMAC - N, 8-1-08]

8.307.14.2 SCOPE: This rule applies to the general public.
[8.307.14.2 NMAC - N, 8-1-08]

8.307.14.3 STATUTORY AUTHORITY: The New Mexico medicaid program is administered pursuant to regulations promulgated by the federal department of health and human services under Title XIX of the Social Security Act, as amended, and by the state human services department pursuant to state statute. See NMSA 1978 Section 27-2-12 et. seq.
[8.307.14.3 NMAC - N, 8-1-08]

8.307.14.4 DURATION: Permanent
[8.307.14.4 NMAC - N, 8-1-08]

8.307.14.5 EFFECTIVE DATE: August 1, 2008, unless a later date is cited at the end of a section.
[8.307.14.5 NMAC - N, 8-1-08]

8.307.14.6 OBJECTIVE: The objective of these rules is to provide policies for the service portion of the New Mexico medicaid coordination of long-term services program.
[8.307.14.6 NMAC - N, 8-1-08; A, 9-1-09]

8.307.14.7 DEFINITIONS: See 8.307.1.7 NMAC.
[8.307.14.7 NMAC - N, 8-1-08]

8.307.14.8 MISSION STATEMENT: The mission of the medical assistance division is to reduce the impact of poverty on people living in New Mexico and to assure low income and disabled individuals in New Mexico equal participation in the life of their communities.
[8.307.14.8 NMAC - N, 8-1-08; A, 9-1-09]

8.307.14.9 REPORTING REQUIREMENTS: The coordination of long-term services managed care organization (CoLTS MCO) and single statewide entity (SE) shall provide to the human services department (HSD) managerial, financial, delegation, suspicious activity, utilization, and quality reports. The content, format and schedule for submission shall be determined by HSD or its designee in writing. HSD or its designee may require the CoLTS MCO/SE to prepare and submit ad hoc reports.
[8.307.14.9 NMAC - N, 8-1-08; A, 9-1-09]

8.307.14.10 REPORTING STANDARDS:

- A. Reports submitted by the CoLTS MCO/SE to HSD shall meet certain standards.
- (1) The CoLTS MCO/SE shall verify the accuracy of data and other information on reports submitted.
 - (2) Reports or other required data shall be received on or before scheduled due dates.
 - (3) Reports or other required data shall conform to HSD's defined standards as specified in writing.
 - (4) All required information shall be fully disclosed in a manner that is responsive and with no material omission.
 - (5) The CoLTS MCO/SE shall analyze all required reports internally before submitting them to HSD or its designee. The CoLTS MCO/SE shall analyze reports for any early patterns of change, identified trends, or outliers (catastrophic cases), and shall submit this analysis with the required reports. The CoLTS MCO/SE shall

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send a written narrative for specified reports with the report documenting the CoLTS MCO's/SE's interpretation of early patterns of change, identified trends, or outliers.

B. **Consequences of violation of reporting standards:** The submission of late, inaccurate or otherwise incomplete reports shall be considered failure to report. Sanctions may be imposed by HSD, or its designee, on the CoLTS MCO/SE for failure to submit accurate and timely reports.

C. **Changes in requirements:** HSD's requirements regarding reports, report content and frequency of submission may change during the term of the contract. The CoLTS MCO/SE shall comply with changes specified by HSD or its designee.

[8.307.14.10 NMAC - N, 8-1-08; A, 9-1-09]

8.307.14.11 MANAGERIAL REPORTS: Managerial reports demonstrate compliance with the operational requirements of the contract. These reports shall include, but not be limited to, information on such topics as:

- A. CoLTS MCO/SE: composition of current provider networks and capacity to take new members;
- B. CoLTS MCO/SE: changes in the composition and capacity of provider networks;
- C. CoLTS MCO: primary care provider (PCP)-to-member ratios;
- D. CoLTS MCO/SE: identification of third-party liability;
- E. CoLTS MCO/SE: grievance system activity;
- F. CoLTS MCO/SE: fraud and abuse detection activities;
- G. CoLTS MCO/SE: delegation oversight activities; and
- H. CoLTS MCO/SE: member satisfaction.

[8.307.14.11 NMAC - N, 8-1-08; A, 9-1-09]

8.307.14.12 FINANCIAL REPORTS: Financial reports demonstrate the CoLTS MCO's/SE's ability to meet its commitments under the terms of the contract. The format, content and frequency for submitting financial reports shall be determined by HSD or its designee. The CoLTS MCO/SE shall meet the following general requirements:

A. The CoLTS MCO shall submit annual audited financial statements, including, but not limited to, its income statement, a statement of changes in financial condition or cash flow and a balance sheet, and shall include an audited schedule of coordination of long-term services revenues and expenses. The SE shall submit annual audited financial statements, including, but not limited to, its income statement, a statement of changes in financial condition or cash flow and a balance sheet, and shall include an audited schedule of coordination of long-term services behavioral health revenues and expenses. The result of the CoLTS MCO's/SE's annual audit and related management letters shall be submitted no later than 150 days following the close of the CoLTS MCO's/SE's fiscal year. The audit shall be performed by an independent certified public accountant. The CoLTS MCO/SE shall submit for examination any financial reports requested by HSD or its designee.

B. The CoLTS MCO/SE and their subcontractors shall maintain their accounting systems in accordance with statutory accounting principles, generally accepted accounting principles, or other generally accepted systems of accounting. The accounting system shall clearly document all financial transactions between the CoLTS MCO/SE and their subcontractors and the CoLTS MCO/SE and HSD. These transactions shall include, but not be limited to, claim payments, refunds and adjustments of payments.

C. The CoLTS MCO/SE and their subcontractors shall make available to HSD, and other authorized state or federal agencies, all financial records required to examine compliance by the CoLTS MCO/SE, in so far as those records are related to CoLTS MCO/SE performance under the contract. The CoLTS MCO/SE and their subcontractors shall provide HSD or its designee access to their facilities for the purpose of examining, reviewing and inspecting the CoLTS MCO's/SE's records.

D. The CoLTS MCO/SE and their subcontractors shall retain all records and reports relating to agreements with HSD for a minimum of 10 years after the date of final payment. In cases involving incomplete audits and unresolved audit findings, administrative sanctions or litigation, the minimum 10-year retention period shall begin on the date such actions are resolved.

E. The CoLTS MCO/SE is mandated to notify HSD or its designee immediately when any change in ownership is anticipated. The CoLTS MCO/SE shall submit a detailed work plan to the department of insurance during the transition period no later than the date of the sale. The work plan shall identify areas of the contract that may be impacted by the change in ownership, including management and staff. The CoLTS MCO/SE shall submit records involving any business restructuring when changes in ownership interest in the CoLTS MCO/SE of five

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percent or more have occurred. These records shall include, but not be limited to, an updated list of names and addresses of all persons or entities having ownership interest in the CoLTS MCO/SE of five percent or more. These records shall be provided no later than 60 days following the change in ownership.

[8.307.14.12 NMAC - N, 8-1-08; A, 9-1-09]

8.307.14.13 UTILIZATION AND QUALITY MANAGEMENT REPORTING: Utilization and quality management reports shall demonstrate compliance with HSD's service delivery and quality standards. These reports shall include, but not be limited to:

A. regular reporting that describes critical incidents as specified by HSD or its designee; for this purpose, critical incidents contribute to a trend that has a negative impact on areas such as quality of services, access to services or service delivery as defined by HSD or its designee;

B. regular reporting of encounter data as specified by HSD or its designee;

C. regular reporting of utilization management activity; and

D. other required reports as determined by HSD or its designee, including, but not limited to, performance and tracking measures.

[8.307.14.13 NMAC - N, 8-1-08]

HISTORY OF 8.307.14 NMAC: [RESERVED]