ATTACHMENT B: REPORTING AND DELIVERABLES RFP No: DMS-18/19-054 Medicare Advantage and Prescription Drug Plans				
			Weekly	
	1	Reject Records Report	w/in 2 business days starting w/ 1st full day file is available	
	2	Duplicate Records Report	w/in 2 business days starting w/ 1st full day file is available	
	3	Address Errors Report	w/in 2 business days starting w/ 1st full day file is available	
	4	System Generated Subscriber Drop Report	w/in 2 business days starting w/ 1st full day file is available	
Monthly				
	5	Background Checks/Persons with Disqualifying Offenses	15th of following month	
	6	Paid Claims File - to Dept/HIMIS	20th of following month	
	7	Paid Claims Summary Report	25th of following month	
	8	Part C and Part D Medicare Membership report (MMR)	w/in 15 days of receipt from CMS	As received from CMS – provide data key as needed
	9	Enrollee Invoice	10th of following month	Excel format, tab 1. Must include enrollment file Member detail matching invoiced amount on subsequent tab(s)
		•	Quarterly	
	10	Executive Summary	w/in 45 days of quarter end	
	11	Performance Guarantee Report	w/in 45 days of quarter end	
	12	Key Metric Cost and Utilization Report	w/in 45 days of quarter end	
	13	Trend Analysis Report	w/in 45 days of quarter end	
	14	Network Provider Add / Delete Report	w/in 45 days of quarter end	
	15	Trend Analysis Report	w/in 45 days of quarter end	
	16	Clinical Program Report	w/in 45 days of quarter end	
		·	Annual	
	17	Subscriber Satisfaction Survey	w/in 45 days of year end	
	18	Proof of Renewal of Performance Bond and Insurance	w/in 45 days of year end	
	19	Proof of Renewal of Required Insurance	w/in 45 days of policy(ies) expiration	
	20	Part C and Part D Model Output Report (MOR)	w/in 45 days of receipt from CMS	As received from CMS – provide data key as needed