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Department of Health Care Services



GAVIN NEWSOM  
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**DATE:** October 14, 2020

ALL PLAN LETTER 20-017  
SUPERSEDES ALL PLAN LETTERS 14-013 (REVISED) AND 14-012

**TO:** ALL MEDI-CAL MANAGED CARE HEALTH PLANS

**SUBJECT:** REQUIREMENTS FOR REPORTING MANAGED CARE PROGRAM DATA

**PURPOSE:**

The purpose of this All Plan Letter (APL) is to inform Medi-Cal managed care health plans (MCPs) of changes to monthly program data reporting obligations. Specifically, MCPs will be required to report program data using standardized JavaScript Object Notation (JSON) reporting formats. This APL details additional requirements for managed care program data reporting related to grievances, appeals, monthly Medical Exemption Requests (MER) and other continuity of care requests, out-of-Network requests, and Primary Care Provider (PCP) assignments for all MCPs. MCPs are required to meet all requirements included in this APL no later than July 1, 2021.

**BACKGROUND:**

MCPs have historically met their contractual requirements for program data submissions to the Department of Health Care Services (DHCS) by utilizing various proprietary Microsoft Excel templates. MCPs have reported:

- Grievances and appeals data in an Excel template, as specified in APL 14-013;<sup>1</sup>
- Monthly MERs and other continuity of care records data in an Excel template, as specified in Attachment B of APL 17-007;
- Other types of continuity of care data in ad-hoc Excel templates; and
- Out-of-Network request data in a variety of ad-hoc Excel templates.

Program data submissions are used for monitoring the Medi-Cal managed care program and are critical to maintaining federal financial participation.

In support of Medi-Cal managed care program data quality improvement initiatives, DHCS is transitioning to standardized JSON reporting formats for grievances, appeals,

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<sup>1</sup> APLs can be found at the following link:

<https://www.dhcs.ca.gov/formsandpubs/Pages/AllPlanLetters.aspx>.

MER denial reports and other continuity of care requests, out-of-network requests, and PCP assignments program data for all MCPs.

**POLICY:**

1. Managed Care Program Data

Managed care program data includes, but is not limited to, the following:

- Grievances data must include all grievances received by the MCP for each member;
- Appeals data shall must include all appeals received by the MCP for each member;
- MER denial reports and other continuity of care data must include all continuity of care requests received by the MCP for each member;
- Out-of-Network request data must include all out-of-network requests received by the MCP for each member; and
- PCP assignment data must include all PCPs assigned to each member as of the last calendar day of the reporting month.

2. Submission Process and Format

Each MCP is required to submit complete, accurate, reasonable, and timely program data in a JSON file in compliance with the most recent “DHCS Managed Care Program Data (MCPD) Primary Care Provider Assignment (PCPA) Technical Documentation” and the associated JSON schema files on a monthly basis, as noted below.<sup>2</sup> There are two files types, the MCPD file, and the PCPA file. The data submitted will represent the MCP's program data as of the end of the previous month (i.e., files submitted at the beginning of June will contain data for the entire month of May). Each MCP is required to collect this data from all network providers and subcontractors, and include all program data in each monthly submission. Each MCP is required to submit both a MCPD and PCPA file between the 1<sup>st</sup> and 10<sup>th</sup> of each month.

DHCS has also established secure file transfer protocol (SFTP) accounts for each MCP and granted secure access to necessary MCP personnel to access and upload program data to the SFTP. Each MCP must submit its program data through the DHCS SFTP site. Each MCP has a set of two SFTP folders for test and production submissions that includes a “Submit” folder and “Response” folder. Each MCP must submit program data files by placing them in the “Submit” folder, where

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<sup>2</sup> These documents have been shared with each MCP, and are available to MCPs upon request.

DHCS' system will automatically pick up the files for processing. Once a file has been successfully processed, the files will be automatically removed from the "Submit" folder. MCPs must not change the SFTP folder structures in any way, as this will disrupt file processing.

### 3. Response Files

A Validation Response File (VRF) will be returned to each MCP's "Response" folder for each submitted program data file. The VRF will provide details on whether a file was accepted or rejected in its entirety. There will be no partial file acceptance. If a file is rejected, the VRF will include information on the errors that occurred within the file. MCPs must monitor their "Response" folders and review all response files in a timely manner.

### 4. Resubmission of Rejected Files

If a program data file submission is rejected, it must be corrected and submitted as a new file by the 10<sup>th</sup> of the month following the reporting month. The file cannot be corrected at the record level; an entirely new file must be submitted.

### 5. Submission Tracking

Each MCP is required to complete and submit a Program Data Submission Reconciliation Form (PGDSRF) to DHCS by the 15<sup>th</sup> of the month following the submission month. Each PGDSRF must contain the required information for each submission that occurred within the submission month. The PGDSRF is a document that MCPs will use to track program data file submissions. DHCS will use the information collected by the PGDSRF to validate that all transmitted files were received to ensure data completeness. By submitting the program file, the MCP attests the information is complete and accurate to the best of its knowledge.

### 6. Submission Compliance

The most recent version of the "DHCS Managed Care Program Data (MCPD) Primary Care Provider Assignment (PCPA) Technical Documentation," the associated JSON schema files, and the PGDSRF template will be distributed to each MCP via email. These documents will also be available to MCPs upon request.

Each MCP is required to submit complete, accurate, reasonable, and timely program data on a monthly basis, as noted above. Any MCP that fails to meet the program data reporting requirements set forth in this APL, and as required by contract, may

be placed under a Corrective Action Plan and be subject to sanctions for failure to comply with all program data reporting requirements.<sup>3</sup>

## 7. Communication

DHCS has designated the following electronic mailbox for communications about the program file submissions: [MCQMDProgramData@dhcs.ca.gov](mailto:MCQMDProgramData@dhcs.ca.gov). Questions or comments regarding the preparation and submission of the program data files, as well as issues related to accessing the SFTP folder, should be addressed to this mailbox. Designated DHCS staff members will monitor the mailbox daily and respond to messages.

If the requirements contained in this APL, including any updates or revisions to this APL, necessitate a change in an MCP's policies and procedures (P&P), the MCP must submit its updated P&Ps to its Managed Care Operations Division (MCP) contract manager within 90 days of the release of this APL. If an MCP determines that no changes to its P&Ps are necessary, the MCP must submit an email confirmation to its MCP contract manager within 90 days of the release of this APL, stating that the MCP's P&Ps have been reviewed and no changes are necessary. The email confirmation must include the title of this APL as well as the applicable APL release date in the subject line.

MCPs are responsible for ensuring that their subcontractors and network providers comply with all applicable state and federal laws and regulations, contract requirements, and other DHCS guidance, including APLs and Policy Letters. These requirements must be communicated by each MCP to all subcontractors and network providers.

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<sup>3</sup> See Welfare & Institutions Code (WIC) section 14197.7. WIC is searchable at: <http://leginfo.legislature.ca.gov/>.

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If you have any questions regarding the requirements in this APL, please contact your assigned MCOD contract manager or [MCQMDProgramData@dhcs.ca.gov](mailto:MCQMDProgramData@dhcs.ca.gov) for assistance.

Sincerely,

Original Signed by Nathan Nau

Nathan Nau, Chief  
Managed Care Quality and Monitoring Division