

PANKAJ BHANOT DEPUTY DIRECTOR



## STATE OF HAWAII DEPARTMENT OF HUMAN SERVICES

Med-QUEST Division Health Care Services Branch P.O. Box 700190 Kapolei, Hawaii 96709-0190

March 16, 2015

**MEMORANDUM** 

MEMO NO. CCS-1501

TO:

Community Care Services (CCS) Program

FROM:

Leslie K. Tawata
Acting Med-QUEST Division Administrator

SUBJECT:

**CCS REPORT FORMATS** 

The Department of Human Services, Med-QUEST Division (MQD) issued revised health plan report formats in November 2014 to the QUEST Integration health plans. This memorandum requires that the Community Care Services (CCS) program uses these same report formats as the QUEST Integration program.

Please utilize the revised report formats for the following reports no later than submission of July 31, 2015. CCS may use these report formats for your April 30, 2015 reports:

- Behavioral Health Services Report (BHS);
- Fraud & Abuse Summary Report (FAS);
- o Member Grievances and Appeals Report (MGA);
- Prior Authorization Denied / Deferred Report Behavior Health (PAM);
- o Prior Authorization Denied / Deferred Report Pharmacy (PAP);
- o Provider Employee Integrity Education Report (Provider Suspension & Termination) (PIE);

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- o Provider Complaints and Claims Report (PGC);
- o Provider Network Adequacy and GeoAccess Report (PNA);
- Quality Assessment and Performance Improvement Report (QAP);
- Suspected Fraud and Abuse Report (SFA);
- o Third Party Liability (TPL) Cost Avoidance Report (TPL); and
- o 1179 Summary of change of member demographics.

In addition, all reports must be submitted to the MQD in electronic format of either Word 2013 or lower (.doc or .docx) or Excel 2013 or lower (.xls or .xlsx). Health plans shall not submit reports in either Adobe format (.pdf) or with read only or protected formatting.

If you have any questions, please call Patti Bazin at 692-8083 or e-mail at pbazin@medicaid.dhs.state.hi.us.

Attachments