C.27. Contractor Reporting Requirements

a. As indicated in RFP Attachment C "Draft Medicaid Managed Care Contract and Appendices," the Department would like to leverage the contracted MCOs existing technologies and reporting capabilities to develop a comprehensive reporting package through a collaborative process. Understanding that ultimately the Department will define the reporting package, describe the Contractor's willingness to participate in such a collaboration, including a discussion of the following:

   i. Proposed reports and report templates that will result in a comprehensive, Department-accepted reporting package.

   ii. Proposed ideas for collaborating across MCOs to ensure consistent and comparable reporting using the same data definitions and specification can be achieved.

   iii. Requirement of Subcontractors to participate and or comply with this process.

b. Provide a detailed description of the Contractor's capability to produce reports required under this Contract, including an overview of the Contractor's reporting systems and capability to configure such systems to capture data according to reporting definitions and specifications as required by the Department.

c. Describe the Contractor's processes to review report accuracy and completeness prior to submission to the Department.

d. Provide examples of the Contractor's proposed:

   i. Processes for conducting comparative data analyses, interpreting trends, and summarizing findings in a manner that is easily interpreted by the Department.

   ii. Use of dashboard reporting to monitor, track, and evaluate performance metrics, including dashboard level data the Contractor proposes to submit to the Department. Provide a sample dashboard report.

   iii. Use of findings from reports to make program improvements and to identify corrective action.

e. Describe the Contractor's processes for monitoring, tracking, and validating data from Subcontractors.

f. Describe the Contractor's proposed process for the receipt, generation, interpretation, and provision of ad hoc reports requested by the Department.

Passport Highlights: Contractor Reporting Requirements

How We're Different	Why It Matters	Proof
Over the last twenty-two (22) years, Passport has gained extensive experience collecting data for, and reporting	• Long-term relationship allows greater insight into Department for Medicaid Services (DMS) needs	• DMS has solicited Passport feedback about new report implementation

How We're Different	Why It Matters	Proof

specifically on, Kentucky populations.	• We are equipped to provide informed and actionable data to DMS for performance assessment and decision-making
	• Trusted by providers, members, advocates, civic organizations, employer groups, educators and the Commonwealth
		• Passport reviewed data, developed programs and received DMS approval to pilot initiatives:
		  • Foster Care
		  • RiverValley Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)
		  • Centerstone Kentucky (Seven Counties Services) Serious Mental Illness (SMI)

Passport continues to invest in storage, servers and production web server environments to support the program	• Unprompted capital investments support DMS programs	• Within the last nine (9) months, Passport added over 124 terabytes (TB) of solid-state drive (SSD) storage, added six (6) additional servers and expanded its production web server environments. Passport adds capacity as needed.
Passport is a provider-driven health plan with a unique, provider-informed perspective to reporting	• Our provider-driven legacy brings a diverse and valuable reporting viewpoint to the table	• Passport leveraged provider relationship with Leitchfield Pediatrics to develop specific, custom reports allowing for proactive scheduling and improved health and quality outcomes.

Introduction

As a DMS partner for the past twenty-two (22) years, Passport is already compliant with the requirements set forth in this request for proposal (RFP) regarding reporting. Passport is, and will continue to be, committed to reporting innovation and thoughtful data analysis to guide quality, cost-effective care for Kentuckians. Leveraging data insights for action is ingrained into Passport's culture. We use data to inform and refine our strategy and tactics, knowing that "what gets measured gets done"—promoting transparency and accountability.

Bringing continuity and long-term experience with DMS reporting requirements, we have evolved as the program has evolved and have continually refined and improved our ability to provide the commonwealth with timely, actionable reporting and analysis. Integrated reporting systems and functionality enable us to produce reliable and compliant reports meeting DMS specifications—including submission methods and timeline requirements—while remaining flexible enough to successfully tackle future reporting needs head-on. Our extensive reporting experience and measurement focus increases the value we provide to DMS, members and providers.

C.27.a . As indicated in RFP Attachment C "Draft Medicaid Managed Care Contract and Appendices," the Department would like to leverage the contracted MCOs existing technologies and reporting capabilities to develop a comprehensive reporting package through a collaborative process. Understanding that ultimately the Department will define the reporting package, describe the Contractor's willingness to participate in such a collaboration, including a discussion of the following:

C.27.a.i. Proposed reports and report templates that will result in a comprehensive, Department-accepted reporting package.

Collaborative Development of a Comprehensive Reporting Package

Although currently compliant and working with our providers and partners, we are fully prepared to support DMS reporting requirements and time frames and are ready to serve as a collaborative partner in considering enhancements to provide meaningful insights and spur dialogue across managed care organizations (MCOs). Therefore, after contract award, Passport will participate in a collaborative process with DMS and other MCOs to establish a reporting package.

Reports and Reporting Templates for Inclusion in a Comprehensive Package

Our recommended approach to creating a comprehensive reporting package is to build from the list of scheduled reports to DMS (see **Exhibit C.27-1**) that currently meet contractual requirements, group existing reports by topic, and then identify additional needs as well as support comparison across MCOs. This could

serve as a springboard for additional report identification and both tactical discussions (template, fields, formats, values, time frame definitions, trending or snapshot, raw data or consolidated analyzed data) and strategic discussions (meaning, needs, goals) for reporting. We envision the ultimate reporting suite to include a broad range of financial, operational, clinical, population health, value-based results and medical economics reporting.

Exhibit C.27-1: List of Scheduled Reports

Functional Area	Reporting Topic
Clinical	• Authorization summary for standard, nonstandard and early and periodic screening, diagnostic and treatment (EPSDT) services • Detailed nonstandard and EPSDT services • Out-of-network visits • Utilization management (UM) response times • Pre-authorizations: Counts, approvals, denials, categories • UM analysis and intervention • Inpatient admit rates • Appeals detail: Claims • Appeals detail: UM • Grievance activity • Emergency department (ED) visit rates and reduction trending • Health risk assessments and completion rates • UM initiatives and measured impacts • Foster care and guardianship • Clinical programs, participation and impacts • Maternal and child health
Quality	• Quality summary and performance metrics • Quality improvement initiatives • Point-of-care report • Quality compliance (provider, practice and system level) • Healthcare Effectiveness Data and Information Set (HEDIS) files • National Committee for Quality Assurance (NCQA) and estimated Medicare STAR ratings

Functional Area	Reporting Topic
Provider/Network	• Provider additions: Total and by specialty • Involuntary and voluntary provider terms • Provider termination reasons • Provider directory • Practices with closed panels • Provider relations activity • Credentialing activities • Provider foreign language • Interaction turnaround times (adds, terms, changes, inquiries) • National Plan and Provider Enumeration System (NPPES) inconsistencies • Sanctions flags • Trending on provider population and growth • Denied network provider listing • Provider GEO access report
Operational	• Encounter data and submission statistics, timeliness/accuracy, completeness rate • Statutory claims report • Call center statistics, member services: Volume, Average Speed to Answer (ASA), abandonment, call types • Call center statistics, provider services: Volume, ASA, abandonment, call types • Top call driver trending and MCO comparison • Behavioral health call statistics, member and provider: Call volume, ASA, abandonment • Claims: Total paid and processed, type, speed, accuracy, per member • Auto adjudication • Claims quality rates: Financial and procedural accuracy with number and value of exceptions • Claims electronic data interchange (EDI) load rates • Prompt pay report • Coordination of benefits (COB) reporting
Member	• Membership volume/trends/category analysis • Disenrollment drivers • Regional analysis and comparisons • Member complaint detail • Satisfaction survey results • Engagement • Eligibility discrepancies/point-of-entry resolution
Audit and Compliance	• Corrective action plan updates • Senate Bill 20/independent review and associated hearing trending/monthly view • Internal audit oversight

Functional Area	Reporting Topic
Pharmacy	• Formulary management • Dispensing rates and statistics • Prescription trending
Fraud Waste Abuse (FWA)	• Member FWA • Provider FWA

In addition to this sampling of reports submitted to DMS, Passport uses numerous dashboards and preexisting data elements for internal measurement purposes, operations and quality work that could prove useful for insights to DMS. Examples of these dashboards and reports are discussed later in this section. The dashboards and reports are examples of active reporting tools Passport uses to monitor critical populations within its membership. We welcome the opportunity to collaborate with other MCOs and DMS to review these and reach agreement on a standardized reporting approach to further support the needs of our members.

Passport also prepares other reports, such as annual program evaluations, that employ both qualitative and quantitative approaches in order to develop comprehensive understanding about program outcomes, trends/patterns, gaps and barriers so we can arrive at opportunities for improvement during the upcoming review period. We propose that DMS and the MCOs review these Passport reports as well to determine if they should be included in a comprehensive standard reporting package.

C.27.a.ii. Proposed ideas for collaborating across MCOs to ensure consistent and comparable reporting using the same data definitions and specification can be achieved.

Collaborating Across MCOs to Ensure Comparability and Consistency

Passport commits to fully support a DMS-led collaborative effort to establish standard report templates for a comprehensive reporting package enabling MCO data sharing and comparison for the coming contract period. Passport offers, with DMS approval, to lead a collaborative effort with the MCOs centered specifically around fraud, waste and abuse reporting.

A possible list of other efforts leading to MCO collaboration include:

- Identifying key person(s) within each MCO who have subject matter expertise and decision-making authority to effectively participate in an active work group, which will likely require a combination of technical/analytical experts and business and operational leadership.
- Socializing and agreeing on targeted matters that a collaborative reporting suite help to improve (e.g., issues and trends such as opiate use, value-based payment, neonatal abstinence syndrome/neonatal opioid withdrawal syndrome (NAS/NOWS), tobacco cessation in adolescents, ED utilization, community engagement and preventable conditions).
- Conducting gap analysis against existing Department report sets as compared to the list of critical matters and priority areas identified in the previous bullet.
- Soliciting report concepts and format ideas for identified gaps or needed insights, including identification of meaningful data views and formats (such as granularity needed for trending).

- Creating a brief survey of the context of current metrics used within each MCO (e.g., the 22-item Clinical Development Key Performance Indicator Survey).
- Comparing and contrasting the overlapping data elements, as well as desired and captured fields.
- Consulting industry-standard definitions when building report processes that cut across MCO lines.
- Designing a benchmarking and validity check routine that also includes periodic and continuous review to ensure longevity of upholding comparability.

Collaboration with MCOs, including shared efforts to establish metric standards (e.g., routine reporting of data definitions, methods) and participation in continuous refinement of these efforts are not only of interest but are mutually beneficial and necessary.

Passport recommends the MCOs engage in ongoing conversation, specifically about the standardization of reporting, to ensure shared goals and objectives result in consistency and comparability of reporting to DMS. We undoubtedly share some similarities, as well as limitations, of metrics and data with other MCOs across the Commonwealth, and we are committed to exploring opportunities to facilitate meaningful change. We believe the first step will be establishing common ground by communicating "current state." Using common standards such as the American National Standards Institute/International Organization for Standardization (ANSI/ISO) and health care-specific guidelines (e.g., HEDIS) offers common language as a base for implementing standards without encroaching upon concerns such as proprietary technologies or trademarked methods.

Additional practical steps that can contribute to comparable reporting include sharing of definitions of the data elements, alongside the methods of how elements were sourced. Using industry standards as a basis for anchoring processes of data reports will further delineate replicability/reliability. When possible, these should be embedded in the produced report to assist version control. A brief but pointed analysis that identifies trends, patterns, outliers and significance of findings would provide a more insightful and reliable methodology, replicable across MCOs.

Passport recognizes that the long-term success of these efforts relies upon principled agreements. We are a proponent of more descriptive and detailed written plans that can be followed by all MCOs. The foundation of this should use industry guidance already in existence. Careful thought and development underpin achievable outcomes and results.

C.27.a.iii. Requirement of Subcontractors to participate and or comply with this process.

Subcontractor Participation in the Collaborative Reporting Process

Expanding on the strength of subject matter expertise brings tremendous value to the collaborative reporting process. As a provider-driven health plan, Passport brings a unique set of data, reports and perspectives to the table. Adding to our extensive subject matter expertise is that of our subcontractor partners. We maintain strong relationships and oversight of our subcontractors through our service level

agreements (SLAs) and contracts, internal auditing, and performance through daily, weekly, monthly, periodic and annual reporting that is reviewed for compliance. All subcontractors are under contract to support requirements (all future subcontractors will be as well) and are willing to support the collaborative reporting process through direct engagement, as well as through data and report deliverables. Our subcontractor agreements also require support of DMS reporting and other requirements. Throughout the effort, we will maintain clear and concise communication with all participants, including our subcontractors, to establish alignment. To ensure that subcontractor participation meets the expectations of the collaboration, we will track and document their activity as a component of our strong subcontractor oversight process. We recommend subcontractor participation in the report development and audit process to ensure data format and availability considerations are made broadly.

C.27.b. Provide a detailed description of the Contractor's capability to produce reports required under this Contract, including an overview of the Contractor's reporting systems and capability to configure such systems to capture data according to reporting definitions and specifications as required by the Department.

Passport's Report Production Capabilities

Passport complies with all current DMS reporting requirements. Passport has reviewed all reporting requirements outlined in RFP Section 37.0 of *Attachment C—Draft Medicaid Managed Care Contract and Appendices* and will comply by developing and submitting all required reports in accordance with DMS specifications and time frames, as outlined in **Attachment C.6-1_DMS Report Summary**. Our reporting infrastructure is in full place to support our compliance and is detailed below.

Passport's Report Systems

Passport's reporting philosophy focuses on two values in reporting and metrics: (1) data that is **valid,** (2) data that is **reliable,** and (3) data that is complete. As such, Passport collaboratively approaches reporting that upholds these tenets and offers visibility to non-proprietary methods and data definitions on reports and metrics supplied to DMS. Passport employs industry standards (ASQ/ANSI/ISO1, NCQA/HEDIS) that ensure reliable and valid data, and routinely referring to such standards is likely a meaningful method of collaborating across MCOs.

Passport currently uses a number of report templates that stem from multiple sources.

- **Identifi^{SM} software reporting** using the Identifi platform, a proprietary management information system, including its analytics package allowing for customizable routine and ad hoc reports that can be exported into user-friendly file formats (e.g., Microsoft Excel). These reports are often more operational in nature and focused on daily routine monitoring such as census, numbers of newly identified members and more.
- **Batch file requests incorporating Microsoft SQL Server (or similar) based reporting** (e.g., claims file data) that can also be exported into more user-friendly file formats, such as Excel. These report types often fulfill routine, regular requests involving large data sets and claims-based activity summaries.

- **Unique reports that result from database queries in an executable program language, typically Statistical Analysis System (SAS) or SQL**, and involve building unique queries with results designed to fit each unique request. The resultant report product typically is presented in widely accepted office software platforms, such as MS PowerPoint, Excel, Word or PDF.

Each of the methods and nonproprietary platforms described above will be shareable in some form and can be used to help further the discussion surrounding standardized and comparable data.

Passport is committed to full compliance with 42 C.F.R. 438.604 and uses established internal review processes for the certification and timeliness of data/reports, including delegation of signature authority by the CEO/CFO. This ensures that all certified reports are accurate, complete and truthful. We will adhere to the preliminary reporting requirements as set forth in Appendix D ("Reporting Requirements and Reporting Deliverables") of *Attachment C—Draft Medicaid Managed Care Contract and Appendices*. Passport will participate in related report activities (e.g., performance improvement projects [PIPs]) and share required reports with other agencies, such as the Department of Insurance (DOI), as requested. Should the DMS modify data and reporting requirements, we will implement the new modifications within reasonable time frames as required by DMS.

System Configuration to Ensure Data Capture as Defined and Specified

The Identifi enterprise data warehouse (EDW), used for our current DMS contract, serves as the primary source of data to support operational, financial and ad hoc reporting in compliance with DMS, CMS, and state and other federal agency requirements. The reporting stack leverages a wide range of data types that converge in the Identifi EDW for operational, financial and ad hoc reporting, including clinical data, Social Determinants of Health (SDoH), partnerships with external data sources, electronic medical records (EMR), electronic health records (EHR), third-party resources, administrative (payor) data, claims data and EDIs. Our data validation process allows all external data loading (batch or real-time messages) of the aforementioned data types to proceed through a series of loading steps, involving multiple staging tables of increasing complexity, in turn loading clean data into the final data mart for reporting purposes. This ensures that the data elements needed for required reports are captured within our EDW. Our Identifi EDW allows for automated reporting and analysis, as well as ad hoc report queries.

The reporting subsystem uses a MicroStrategy backbone that provides strong reporting and business intelligence capabilities, including advanced visualization and dashboarding for intuitive data presentation. The MicroStrategy semantic layer is connected to the Identifi EDW, allowing users to access data to create ad hoc reports, with a complete palette of graphical widgets to present the data in the most understandable manner. With this pairing of EDW integration with visual insight capability, users can segment, dice, roll up and drill down with ease. The Identifi platform's high configurability allows any necessary customization to respond to DMS-specific rules, workflows and data requirements. This includes prescribed reporting formats and frequencies as a part of a comprehensive reporting package to address all requirements of Appendix D, "Reporting Requirements and Reporting Deliverables."

Passport can provide a variety of report templates and required reports to DMS, CMS, and other state and federal agencies at the appropriate submission cadence. Passport uses (i) Identifi software's "canned" reporting, which is more operational in nature and focuses on daily routine monitoring, such as census, numbers of newly identified members and more; (ii) batch file requests, incorporating Microsoft SQL (or similar) based reporting, which are used to fulfill routine and regular requests involving large data sets and claims-based activity summaries; or (iii) unique reports that result from database queries in an executable program language, such as SAS or SQL.

Capabilities to Provide a Broad Spectrum of Reports

As noted, in addition to the various reporting templates and types of reporting platforms used, Passport can delineate its reports into qualitative, quantitative or a combination of the two. This provides DMS with powerful capabilities to discover trends and patterns to aid in decision-making and process improvement.

For financial reporting, Passport's financial services uses a combination of SAGE 50, Microsoft Excel and Microsoft Access to deliver reports to its financial management teams. The data for this reporting is generally sourced from our financial subsystem and the EDW and, as such, we generate reports to support cash management, funds flow, general ledger accounting, pro forma and financial statement generation, budget analysis and other financial requirements.

For population health and operational reporting, Passport's Data Analytics department leverages all claims and provider and eligibility data to surface insights and drive improvement via a suite of analytics services, embedded platform capabilities, and configurable business intelligence and reporting tools. As noted, our MicroStrategy business intelligence platform provides analytics capabilities. We geocode all members, providers and care sites on the Identifi platform, which allows for geospatial analytics, including maps of high-risk members and their attributed primary care providers (PCPs).

Identifi users can export reports and files in structured and unstructured formats, including Microsoft Excel, PowerPoint, Word or PDFs, as well as configure existing formats to meet presentation needs. The reports within Identifi modules provide interactive visual reports for optimal output within the module (e.g., targeted dashboards for providers in Identifi). They also can be exported in structured and unstructured formats, depending on the report.

Financial data elements corresponding to premium, capitation, incentives and so on can also be stored in the data warehouse for use in reporting and analytics. The analytics team builds financial summaries and generates reporting stacks that answer questions on plan profitability (e.g., medical loss ratio [MLR]), components of trend, drivers and opportunities. Reporting is flexible to segment data by rate cell, provider hierarchies, service delivery area and so on, and it highlights key cost and utilization metrics.

We have existing processes that will allow quick responses to new DMS requests, using key operational metrics that are already built. Any new report development adheres to the report development process steps described in Section 17 and adheres to the same rigorous quality assurance (QA) and control standards implemented across the entire reporting function.

As a provider-driven health plan, Passport possesses a unique, provider-informed perspective to reporting, allowing for improved health outcomes and workflows. For example, one of our providers, Leitchfield Pediatrics, uses an EHR that reverts all patients back to an open care gap at the start of each year, making it impossible to determine when a patient is truly due for a visit. We used claims data associated with the quality metrics from the previous year to develop reports to let Leitchfield Pediatrics know when members are eligible for the next visit. The visits can be scheduled proactively, and any patients with a care gap can be identified for outreach. Our collaboration allowed us to provide specific and custom reports to support practice operations and improve outcomes.

Data Storage Capability to Support Reporting

The Identifi Health Plan Administration (Idenfiti HPA) reporting SAS infrastructure consists of eight (8) physical server nodes, providing redundant analytical capacity. Each server has a private five (5) TB all-SSD working space on a dedicated EMC Unity 550 array. Each node also connects via redundant Strongest devices to a shared eighty-five (85) TB storage environment hosted on a NetApp all-SSD solution. There is capacity available on the NetApp solution to double the SAS shared storage, if required. The environment resides in a Tier III data center with redundant 1 GB circuits providing connectivity to both the internet and multi-protocol label switching (MPLS). The environment is kept in locked cages within a private pod in a co-location facility.

Passport's Identifi population health management component and its modules can be scaled both horizontally and vertically across the infrastructure to handle system demands and store large amounts of data for analysis, and for both standard and ad hoc reporting. Elasticsearch, Logstash, Kibana (ELK) stack log aggregation and monitoring technology monitors the system for availability, performance and load. Identifi servers are Azure Hyper-V virtual machines that allow us to scale the infrastructure if the system load exceeds current peak system capacity. There is no upper limit on number of users, lives or platform capacity. In fact, Passport recently made significant investment in the technical architecture underlying the application platform to enhance stability, improve performance and provide for data, usage growth and expansion. Within the past nine (9) months, Passport has installed a new NetApp storage platform, adding over 124 TB of SSD storage in the production data center, added six (6) additional servers (close to 3 TB in memory), and expanded the production web server environments.

The Identifi population health management platform uses a combination of Azure Cloud infrastructure and Hadoop Big Data capabilities to create a platform with elastic scaling capabilities. The Identifi platform has been tested to onboard data in the data warehouse from multiple sources and can process eligibility data related to 600,000 lives, 33 million historical and current medical claims data sets, and 8 million historical and current pharmacy claims data sets. The data warehouse is also able to process clinical data in real-time and batch processing mode, handling 22 million Admission, Discharge, and Transfer (ADT) transactions, 8 million lab transactions and 5 million Continuity of Care Document (CCD) transactions per month. The Identifi platform also runs monthly measure compliance calculations on members based on new data received, processing 6.5 million members every month to measure compliance across 1,400 measures. The

Identifi population health applications undergo performance and stress testing with every application release. This best practice has enabled the Identifi applications to support average daily transaction volume of 1.14 million transactions, peak daily transaction volume of 1.9 million, and total monthly transaction volume of 29.6 million, with an average transaction response time of 0.176 seconds.

Processing Requests for Standard and Ad Hoc Reporting

Passport employs a rigorous process that follows a desktop reference procedure and quick reference guide (**Attachment C.27-1_DMS Quick Reference Guide**), facilitating the intake of requests for standard and ad hoc reporting. As addressed in these documents, Passport's Compliance Department provides general oversight of DMS reporting requirements. All reports submitted by DMS are acknowledged through return email to the requester and logged by the compliance team, with their progress tracked daily.

A tight cross-collaboration and clear hand-offs between functional groups ensures a seamless, efficient approach to receiving requirements, reviewing and assessing the requirements, and reporting development, as well as subsequent testing and production. Standard reports can be produced using the Identifi platform by modifying just a few input variables as needed (e.g., time period, membership).

More complex ad hoc requests, requiring a unique database query in an executable program language (SAS, SQL) and follow-on analysis, are received through the Passport compliance team, prioritized and then produced. Production includes several QA cycles to ensure accuracy of the ad hoc report. The resultant report product typically is presented in widely accepted office software platforms, such as MS PowerPoint, Excel, Word or PDF.

All report requirements are documented, and ad hoc and standard reports are stored to facilitate look-backs in case of inquiries, but also allow for training and seamless knowledge transfer.

C.27.c.   Describe the Contractor's processes to review report accuracy and completeness prior to submission to the Department.

Ensuring Report Accuracy and Completeness Prior to Submission to DMS

Passport has submitted reports in compliance with reporting requirements to DMS for more than two (2) decades. Our process then, now, and in the future ensures that the submitted reports are accurate and complete and are submitted in the prescribed reporting formats and frequencies. We follow a repeatable process illustrated in **Exhibit C.27-2** and described below.

PASSPORT
HEALTH ★ PLAN

Exhibit C.27-2: Passport Report Development Process
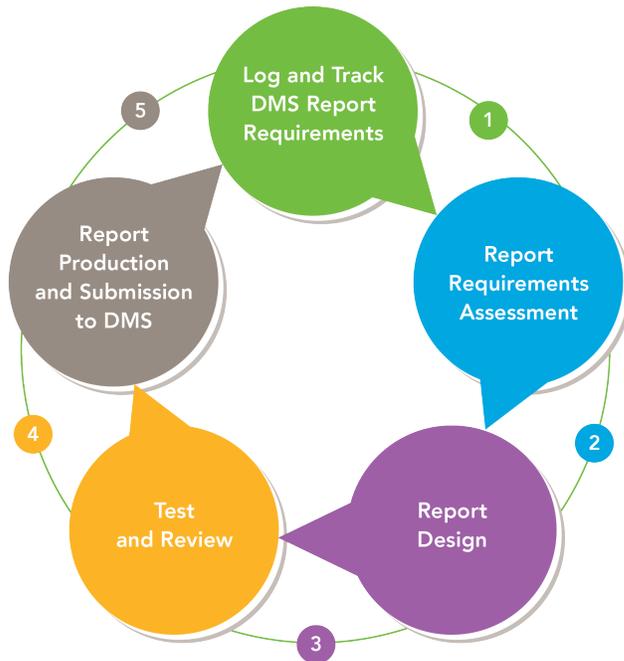
1. **Log and Track DMS Report Requirements**: General oversight of DMS reporting requirements is the responsibility of Passport's Compliance Department. Report requirements are identified through several channels, primarily through the Medicaid Managed Care Contract with the Commonwealth. Other channels include contract amendments, formal communications with DMS and reporting requests that funnel to the compliance team from Passport's functional areas, as required via our internal processes

   Every report requested by DMS is logged and tracked by Passport's compliance team. The compliance team logs the following information for each report and monitors daily progress from the point of DMS request through submission to ensure it is submitted in the required time frame.

- Report Name
- Report Frequency
- Report Purpose
- Report Requirements
- Accountable Passport Business Area
- Accountable Passport Business Owner
- Report Deadline to Compliance
- Report Received Date in Compliance
- Report Certification Received Date in Compliance
- Responsible for Approval (Vice President or Delegate)

- Date Sent for Approval
- Approved Received Date
- DMS Deadline
- Submission Method
- Date and Time of Report Submission to DMS
- Emailed To (if Submitted via Email)
- Date Compliance Returned to Business Owner
- Extended Compliance Deadline
- Reason for Return
- Final Report Received Date

- Resolution of Returned Report
- DMS Extension Requested Date
- DMS Extension Due Date
- Extension Submitted to DMS Date
- Reason for Extension
- Extension Submission Date to DMS
- Date Revised Report Is Requested by DMS or Received by Business Owner

- Source of the Request for Revised Report
- Reason for Revision
- Revision Submitted to DMS
- Extended Compliance Deadline
- Received Date in Compliance of DMS Responses to Report 200 and Report 220

2. **Report Requirements Assessment:** Passport's analytics and reporting team reviews the requirements for each report in collaboration with the accountable Passport business area (e.g., Claims, Enrollment, or Grievance and Appeals), along with any functional areas that may be involved. Together, they assess the report purpose, the data and format requirements, frequency, and deadline for either the initial report (for recurring reports) or for ad hoc reports. Passport's analytics and reporting team documents the requirements and plans and executes the report design.

3. **Report Design:** Upon confirmation of the report requirements, our analytics and reporting team develops the report structure, documents the query methods and repeatable steps, and creates the Identifi configuration necessary to query the data from the EDW to populate the report as defined by DMS. The first QA review in the process is conducted to ensure the data query successfully achieves the requirements documented in the Report Requirements Assessment phase.

4. **Test and Review:** The second QA review for initial testing output is conducted by the data and analytics team and occurs in multiple environments, both within the database and by the user. This QA step reviews the report for completeness, formatting and repeatability (for ongoing reporting). Any noted adjustments are made by the data and analytics team. The report is sent to the accountable Passport business area, the compliance team, and other Passport subject matter experts for a third QA review. The third review validates the comprehensiveness of information, format and presentation, per the DMS defined requirements.

5. **Report Production and Submission to DMS:** Upon formal approval by the accountable Passport business area, the compliance team and germane functional areas, the report moves into production. Our compliance team verifies the reports are complete and accurate and ensures they are submitted to DMS via secure file-transfer protocol (FTP). All FTP submissions are confirmed for receipt via an acknowledgment. The submission to DMS includes a report attestation identifying and explaining trends, findings, outliers or anomalies. We ensure all of the requirements listed in our internal Report Review and Certification Checklist (**Exhibit C.27-3**) are satisfied prior to submission to DMS.

Exhibit C.27-3: Report Review and Certification Checklist

Report Review Checklist Item
Is reporting time frame extension required from Passport compliance and determined two (2) days in advance of delivery?
Does the reporting format exactly match the DMS template for this report?
If reliant upon subcontractor data, has subcontractor data been received on time? If not, has escalation to Passport compliance occurred?
Is a description of trends or major data changes required and, if so, provided?
Is there an update in reporting requirements since the last submission?
Is format of report validated against previous report submission?
Is the font style and point size set the same within the report?
Is the header row correct, and does it match reporting requirements?
Is Reporting Run Date correct for reporting time frame for submission?
Are the Reporting Period To and From dates correct for submission?
Is sort order correct on the report?
Are the report calculations validated in the formula cells for accuracy?
Is subcontractor data included in the report as required?
Does the summary period provided match the data submitted in this reporting period?
Was the second-level review completed, including review of the quality checklist?
Are DMS reporting reminders set up in Outlook for ongoing reports?
Upon delivery of the report, was the attestation form sent to Passport compliance?

Report Certification Checklist Item
Is the report certification submitted with the report?
Does the date of the certification match the reporting time frame?
Does the certification document a reason if service levels were missed?
Does the certification document variations from the last submission?
Who performed the second-level review of the Report Certification form?

All three QA reviews in the Passport report development process are conducted and repeated until the report satisfies all DMS requirements and meets Passport's high-quality standards.

Recurring Report Review and Oversight

Passport places a strong emphasis on compliance. We never consider a report "canned" or completely automated. Each report, whether it is routinely recurring or a one-time ad hoc report, is subject to the same QA check for completeness and accuracy, including data validation and reliability, comprehensiveness of information, and format and presentation, per the requirements defined by DMS.

C.27.d.   Provide examples of the Contractor's proposed:

C.27.d.i.   Processes for conducting comparative data analyses, interpreting trends, and summarizing findings in a manner that is easily interpreted by the Department.

Producing Analyses, Trending and Findings for Understanding

Passport approaches comparative analysis, monitoring and improvement in various ways. By focusing on multiple facets of the program (e.g., medical economics and operational compliance), we can manage service delivery holistically.

Passport Medical Economics Approach

Passport regularly conducts medical economics reviews to elucidate existing and emerging trends, and to explore areas of interest and opportunities for improving outcomes and performance. Each review cycle includes the following steps, with findings and recommendations presented in PDF or PowerPoint.

- **Cost and Utilization Assessment**

  A detailed review at the Setting and Service Category level, as well as benchmark comparisons, provide a critical first step for opportunity identification. By isolating the impact of cost and utilization on overall trends, and accounting for the impact of high-cost claimants on observed trends, various areas of interest emerge. These areas receive deeper analyses to explain trends and highlight performance and health outcome improvement opportunities, as well as cost savings.

- **Population Assessment**

    This assessment is closely tied to the operational performance metrics that guide plan operations and strategy. Continual evaluation of demographic changes over time allows for an assessment of enrollment trends and the delineation of high-cost claimant characteristics and trends, and it includes cohort analyses. These combined efforts and analyses monitor population dynamics and behavior, and they allow for specific views, such as the measurement of chronic disease burden among population.

- **Provider Network Assessment**

    This assessment provides an overview of the per member per month (PMPM), utilization and key performance indicator (KPI) trends by provider practices/regions/provider organization—if applicable, with options to drill down on key focus areas. Other sections allow review and assessment of facility-level reporting of inpatient trend drivers.

The analytics and reporting team also has capabilities and tools to validate the success of care management workflow processes, with a focus on highlighting areas of improvement. They regularly review and prioritize UM initiatives.

Passport also compares performance not just across Kentucky provider groups and facilities, but also to providers and facilities nationwide. Putting trends into perspective both locally and nationally allows greater insight in making recommendations for performance and outcome improvement initiatives.

Finally, we can address ad hoc report requests to assist DMS with issue resolution. For example, in August 2019 DMS asked for a report from each MCO detailing the number of claims that were submitted with a Submission Clarification Code (HCPCP Field 420-DK) for the period February 1, 2019 through July 1, 2019. This was necessitated to assist DMS with the issue of encounters thresholding for emergency and vacation fills for providers not enrolled with Kentucky Medicaid. Passport supplied he report within the request timeframes to help DMS determine the extent of its issues

C.27.d.ii. Use of dashboard reporting to monitor, track, and evaluate performance metrics, including dashboard level data the Contractor proposes to submit to the Department. Provide a sample dashboard report.

Employing Dashboards for Simplified Performance Tracking

Passport has numerous dashboards and preexisting data elements currently used for internal measurement purposes, operations and quality work. The following dashboards and reports are examples of active reporting tools Passport uses to monitor critical populations within its membership.

- **Passport's Cost and Utilization Dashboard** (see **Attachment C.27-2_2019 Passport Cost Use Dashboard Sample**) focuses on important cost, utilization and enrollment metrics to help us understand and manage care. The report consists of two sections:

    - **Performance Dashboard:** Showing overall trend and key metrics

    - **Management Report:** Providing in-depth information on cost and utilization by major category, place of service, provider specialty and user-defined variables

- **Passport's Obstetrics (OB) Dashboard** (see **Attachment C.27-3_2019 Passport OB Report Sample**) helps users understand key cost and utilization dynamics of pregnant members and the resources that are required for members during pregnancy through childbirth. The report includes a high-level summary of pregnancies and deliveries with follow-on sections addressing:

  - **Pregnancy:** This section focuses on the events from conception up to but excluding delivery. Mothers are profiled for age, risk and quality metrics for prenatal care. Costs are also quantified for select risk factors and attributable primary care and OB providers.

  - **Delivery:** This section focuses on the events related to delivery, including delivery methods, birth weights, birth events, complications and costs associated with delivery.

- **Passport's Readmission Report** (see **Attachment C.27-4_2019 Passport Readmission Report Sample**) allows us a better understanding of readmission rate trends for the total or specific subsets of population. The report consists of multiple sections providing different views into the data to provide a comprehensive view of readmissions in the context of different time periods, diagnosis (medical vs. surgical), facilities and follow-up care upon discharge into the primary care setting.

- **Passport Pharmacy Dashboard** (see **Attachment C.27-5_2019_Passport Pharmacy Report Sample**) provides a detailed overview of key trend drivers associated with pharmacy utilization and spend. The report reviews drug substitution opportunities and medication adherence, and it examines specific categories of pharmacy use, such as behavioral health. Other key views include possible fraud, waste and abuse indicators and member safety data in the context of drug interactions.

The dashboards outlined above are just a few of the dashboards we generate through our Identifi platform. We propose to work with DMS after contract award to identify dashboard-level data for DMS consumption.

C.27.d.Iii.   Use of findings from reports to make program improvements and to identify corrective action.

Driving Improvements with Report Findings

Report findings are used to identify opportunities and drive actions for improvement. Passport conducts ongoing reporting oversight that includes a review of metrics for each report monitored. Reviews identify trends, findings, outliers or anomalies. Metrics identified as opportunities or that are out of expected ranges are escalated to operational area leadership for further investigation. A determination of root cause is made, and corrective actions are defined and proactively implemented.

An example of improvement from analysis is Passport's issuance of a Corrective Action Plan (CAP) related to call center SLAs that occurred in August 2018. Passport's call center experienced a sixty percent (60%) increase in call volume over a seven (7) month period that impacted our SLAs for metrics such as speed to answer and abandonment rate. The increase was driven by various external factors related to Kentucky HEALTH, as well as several internal operational items:

- The onboarding of a significant group of Passport member and provider services representatives, in conjunction with a new system implementation, increased call handle time
- Passport experienced slow system performance that negatively impacted call handle time in the first quarter of 2018
- Providers' acclimation to Passport's new provider portal generated inquiries that led to a forty-two percent (42%) increase in calls to our Provider Services Call Center

- A new Vendor implementation and systems migration caused a decrease in Passport's auto-adjudication rates and drove an increase in calls to the Provider Services Call Center
- Passport experienced eligibility load issues that resulted in a higher than anticipated number of calls to our Member and Provider Services Call Centers

Passport enacted short- and long-term actions to remediate the issues and regain compliance with the reporting SLA requirements that included:

- Providing overtime for Passport member and provider services representatives
- Staffing model refinements
- More aggressive recruiting and hiring efforts
- Provider outreach by Passport's provider relations team
- Adjustments to workflow queue policies and procedures to better address inbound provider requests and minimize follow-up phone calls to providers
- Initiatives to increase auto-adjudication rate
- System architecture and capacity improvements to increase processing speed and overall system performance

These actions resolved the identified issues, and Passport regained compliance with DMS SLA requirements.

C.27.e. Describe the Contractor's processes for monitoring, tracking, and validating data from Subcontractors.

Monitoring, Tracking and Validating Subcontractor Data

Passport's Delegation Oversight Department and Internal Audit Department each perform regular metric audits, using raw data to validate the reports provided by our DMS-approved subcontractors. The Delegation Oversight Committee reviews monthly metrics for adherence to SLA requirements and inconsistencies in trends that may require further investigation. Reports that are currently monitored and tracked are listed in **Exhibit C.27-4**.

Exhibit C.27-4: Scheduled Reports to DMS

Report Cadence	Report Title	
Weekly Reporting	• Involuntary Provider Terms • Voluntary Provider Terms • Encounter Files	
Monthly Reporting	• Provider Directory • Denied Network Provider Listing • Provider Termination Report (including Reason for Termination) • Provider Network Listing • Proprietary File • Statutory Claims Report • Encounter Activity Report • Appeals Detail Report—Monthly and Quarterly	• Member Complaint Detail and Summary—Monthly and Quarterly • Practices with Closed Panels and Written Summary to Address Providers not Meeting Contractual Standards—Monthly and Quarterly • CAP Updates (if Applicable)

Report Cadence	Report Title	
Quarterly Reporting	• Appeals Detail Report—Monthly and Quarterly • Member Complaint Detail and Summary—Monthly and Quarterly • Practices with Closed Panels and Written Summary Plan to Address Providers Not Meeting Contractual Standards—Monthly and Quarterly • Quality Summary Report • Encounter Data Submission Report • Quality Program Work Plan • UM Program Work Plan • Quality Committee Minutes • Provider Relations Activity Summary • Authorization Summary for Standard, Nonstandard and EPSDT Services	• Detailed Nonstandard and EPSDT Services • Out-of-Network Visits • UM Response Times • UM Committee Minutes • UM Analysis and Intervention • Credentialing Activities Summary • Provider Summary Report • Provider GEO Access Report • Provider Access Summary Report • Provider Foreign Language Report • Call Center Statistics—Member Services • Claims Processing Summary • Prompt Pay Report
Annual Reporting	• Quality Program Evaluation • Quality Program Description • Compliance Program Evaluation • Compliance Program Description • Fraud Program Description • UM Program Evaluation	• UM Program Description • Claims Program Evaluation • Claims Program Description • Claims Program Work Plan • HEDIS Files—Bimonthly and Annually • Quality Program Work Plan UM Program Work Plan

As documented in Passport's policy UHC-GEN-33, Delegated Entity Oversight (**Attachment C.19-10_Policy UHG.GEN.33 Delegated Entity Oversight**), Passport holds weekly and monthly operating meetings with subcontractors to ensure open communication and timely resolution of any known issues or concerns. During our regular meetings with each subcontractor, Passport ensures that all relevant DMS reporting requirements are received and acknowledged by the subcontractor. For transparency and overall compliance, the subcontractor presents current metrics and briefs Passport on any open issues. This is to ensure a healthy and productive discussion of any issues, performance on contract deliverables, and accuracy/timeliness of reports.

Passport's validation efforts include review of selected subcontractor transaction during each annual NCQA oversight audit; monitoring utilization levels that could suggest a subcontractor is providing incomplete data; and file scrubbing to ensure our necessary fields are populated and include valid data in the proper formats such as NPI numbers, diagnosis codes, etc.

In addition, the Identifi platform and operational support surrounding data migration effectively exchanges and validates data from subcontractors (e.g., pharmacy, dental/vision, behavioral health) to support Passport operations and reporting requirements. Our data migration teams work directly with each subcontractor to align data file layouts/business rules, transfer mechanisms/frequencies, historical data

expectations and expected control tools for data reconciliation. This information is then leveraged to build extract, transform and load (ETL) processes to combine the subcontractor data feeds with the medical claims data to provide a holistic financial picture for our membership.

C.27.f.   Describe the Contractor's proposed process for the receipt, generation, interpretation, and provision of ad hoc reports requested by the Department.

Producing Ad Hoc Reports for DMS, Legislative, Internal/External Quality Committees and Other Partner Requests

Passport currently fully supports DMS ad hoc reporting requirements and is transparent in communication regarding identified strengths and limitations of ad hoc reporting whenever encountered, including identified barriers and solutions with updated expected time frames. Passport places the same strict report development processes on ad hoc reporting as it does on routine reports submitted to DMS to ensure timely, accurate and complete information. As described above, this includes:

- Logging and Tracking DMS Report Requirements, including Due Dates
- Assessing and Clarifying the Report Requirements
- Developing the Report Design
- Testing and Reviewing the Data Output
- Producing the Report and Submitting It to DMS

The Identifi reporting platform uses a MicroStrategy backbone to provide robust reporting and business intelligence capabilities, including advanced visualization and dashboard capabilities that are connected to the Identifi EDW, allowing business intelligence users to access the data to create ad hoc reports.

Passport's compliance team uses a standard procedure (**Attachment C.27-6_DMS Inquiries 2018)** to track and monitor ad hoc requests. In addition, the same quality assurance reviews noted above are conducted until the ad hoc report satisfies all DMS requirements, meets Passport's quality standards and is signed off for approval by all reviewers in the process for production. Once the ad hoc report receives formal approval by all applicable reviewers, it is logged in the compliance database and securely submitted to DMS via FTP or another DMS-requested delivery method. To promote the effort to standardize comparable reporting across MCOs, we will align ad hoc reporting with the new effort of creating valid and reliable reports across MCOs as the process becomes defined and implemented.

An example of Passport's ad hoc reporting process noted above is the August 2019 DMS request for assistance with the issue of encounters thresholding for emergency and vacation fills for providers not enrolled with Kentucky Medicaid. DMS asked at that time for a report from each MCO detailing the number of claims that were submitted with a Submission Clarification Code (HCPCP Field 420-DK) for the period of February 1, 2019 through July 1, 2019. Passport supplied the report within the request timeframe to help DMS determine the extent of their issues.

To promote the effort to standardize comparable reporting across MCOs, we will align ad hoc reporting with the new effort of creating valid, reliable and complete reports across MCOs as the process becomes defined and implemented.

Conclusion

Passport brings twenty-two (22) years' worth of continuity and long-term reporting experience to ensure DMS achieves its program goals. We are already compliant with the reporting requirements contained in this RFP, and we are committed to thoughtful analysis to drive high quality, cost-effective outcomes. We are ready to support DMS efforts to standardize a suite of reports across MCOs and look forward to participating in this effort. Our focus on measurement and strong reporting capabilities increases the value we provide to DMS, members and providers.

Passport has been honored to serve the Kentucky Medicaid and foster care populations for 22 years and will continue to comply with all provisions of the Medicaid Managed Care Contract and Appendices (including Kentucky SKY) as we continue to serve them in the future.