

53862 Reporting

Each plan in a designated region shall submit to the department:

(a)

Annual reports which shall include: (1) The financial audit required by section 53340. In addition to the annual audited financial statements, the plan shall include the annual report required under section 1300.84.06, Title 10. The plan's annual report shall have a supplemental income statement, prepared in a format consistent with the annual report, reflecting the plan's various Medi-Cal contracts each as a separate line of business by designated region which come included. (2) An update of the provider listing required in section 53242(b).

(1)

The financial audit required by section 53340. In addition to the annual audited financial statements, the plan shall include the annual report required under section 1300.84.06, Title 10. The plan's annual report shall have a supplemental income statement, prepared in a format consistent with the annual report, reflecting the plan's various Medi-Cal contracts each as a separate line of business by designated region which come included.

(2)

An update of the provider listing required in section 53242(b).

(b)

Quarterly reports which shall include: (1) Each plan shall submit to the

department, within 45 days after the close of each fiscal quarter, a quarterly financial report in the format prescribed by Title 10, section 1300.84.2. The required financial reports shall have a supplemental income statement, reflecting the plan's various Medi-Cal contracts as separate business operations of the plan by designated region, which combines and correlates to the submitted income statement for the plan.

(1)

Each plan shall submit to the department, within 45 days after the close of each fiscal quarter, a quarterly financial report in the format prescribed by Title 10, section 1300.84.2. The required financial reports shall have a supplemental income statement, reflecting the plan's various Medi-Cal contracts as separate business operations of the plan by designated region, which combines and correlates to the submitted income statement for the plan.

(c)

Other reports which shall be submitted to the department shall include the following: (1) Utilization and statistical data, including detailed encounter level data, in compliance with the requirements of the contract between the plan and the department. (2) Pediatric preventive services provided in accordance with the Child Health and Disability Prevention Program reports disclosing services rendered in accordance with Health and Safety Code section 320, et seq., and Title 17, CCR, sections 6840 through 6850 as required by the contract between the plan and the department. (3) Information requested by the department to conduct medical reviews or contract monitoring in accordance with section 14457, Welfare and Institutions Code. (4) Financial reports relevant to affiliates as specified in section 53330. These reports will include at a minimum financial statements of affiliates and, if publicly traded, copies of the quarterly Form 10-Q and annual

Form 10-K as required by the Securities and Exchange Commission. (5) Copies of any financial reports submitted to other public or private organizations as specified in section 53324(d). (6) Upon request, monthly financial statements. (7) Notification of possible third-party tort liability or estate recovery situations. This information shall be submitted within ten days of discovery. (8) Reports specified in the contract between the plan and the department. (9) On a monthly basis, an updated listing of the plan's provider network, by specialty.

(1)

Utilization and statistical data, including detailed encounter level data, in compliance with the requirements of the contract between the plan and the department.

(2)

Pediatric preventive services provided in accordance with the Child Health and Disability Prevention Program reports disclosing services rendered in accordance with Health and Safety Code section 320, et seq., and Title 17, CCR, sections 6840 through 6850 as required by the contract between the plan and the department.

(3)

Information requested by the department to conduct medical reviews or contract monitoring in accordance with section 14457, Welfare and Institutions Code.

(4)

Financial reports relevant to affiliates as specified in section 53330. These reports will include at a minimum financial statements of affiliates and, if publicly traded, copies of the quarterly Form 10-Q and annual Form 10-K as required by the Securities and Exchange Commission.

(5)

Copies of any financial reports submitted to other public or private organizations as specified in section 53324(d).

(6)

Upon request, monthly financial statements.

(7)

Notification of possible third-party tort liability or estate recovery situations. This information shall be submitted within ten days of discovery.

(8)

Reports specified in the contract between the plan and the department.

(9)

On a monthly basis, an updated listing of the plan's provider network, by specialty.

(d)

Each plan shall submit to public health authorities reports required by state law.