

## SPECIAL REPORTS

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### 1.0. GENERAL

1.1. The contractor shall provide special programming reports to TMA on an “as needed” basis. The TMA Contracting Officer will not request a special programming report more than six times per contract period. The Contracting Officer will tell the contractor what information to include in the report. Examples of these reports include claims history data (either limited or complete) by provider, including one or more subidentifiers; beneficiary; specific diagnosis(es); specific procedure code(s); and/or geographic region delineated by zip code(s). The contractor shall submit the reports by means of either a hard copy, a magnetic tape, or a disc as specified by the Contracting Officer. The contractor shall provide the completed reports to the Contracting Officer at TMA-Aurora within 60 calendar days of the date on the written request from the Contracting Officer.

1.2. If special reports are requested by TMA, the contractor must inform the Contracting Officer of the cost, if any. Upon approval of the cost estimate, the contractor shall complete the special report within the time requested by TMA unless a different delivery date is approved.

### 2.0. INELIGIBILITY REPORT

2.1. The contractor shall provide an electronic report of all TFL and TSRx claims processed for which a DEERS response of 70NE was received. The report shall include the following data elements for each claim:

- Sponsor's Name (Last name, First Name, Middle Initial)
- Sponsor's Social Security Number
- Sponsor's Date of birth, if available
- Sponsor's Address, if available
- Beneficiary's Name (Last name, First Name, Middle Initial)
- Beneficiary's Social Security Number, if available
- DEERS Dependent Suffix
- Date of Birth
- Beneficiary's Address

2.2. All reports shall be electronically transmitted to Ms. Ginger Bassett at DMDC and the Contracting Officer's Representative using either FTP or e-mail. The first report shall be provided no later than February 8, 2002 and shall include all claims processed to date. An identical report including only those claims processed during the previous month shall be provided by the 10th working day of each subsequent month for the next 12 months.

### **3.0. WEEKLY AND MONTHLY TFL REPORTS**

**3.1.** *The contractor shall provide electronic reports on a weekly basis to TMA-Aurora, Managed Care Support Office. Weekly reports shall include claim volume workload for Monday through Friday of the current week, with the report due by close of business (COB) the following Monday. For instance, the report for the reporting period of March 18-22, 2002 would be due to TMA by COB on March 25, 2002. The contractor shall base cumulative reporting beginning October 1, 2002. The following data elements shall be used to report the weekly TFL claim volume:*

- *TFL Claims - Beginning Inventory*
- *TFL Claims Received - Current Week and Cumulative*
- *TFL Claims Processed- Current Week and Cumulative*
- *TFL Claims Denied - Current Week and Cumulative*
- *TFL Claims' Top 5 Denial Reasons - Volume and Percentage (%) of Total Denials*
- *TFL Claims Pended and Top 5 Reasons Pended - Current Week*
- *TFL Claims - Ending Inventory*
  
- *7ONE Claims Denied - Current Week and Cumulative*
- *7ONE Denials Processed - Current Week and Cumulative*
- *7ONE Denials Remaining*
  
- *7ONE Claims Processed - Current Week and Cumulative*
- *Dollars Paid on 7ONE Claims - Current Week and Cumulative*

**3.2.** *The contractor shall provide electronic reports on a monthly basis to TMA-Aurora, Managed Care Support Office. Monthly reports shall be due by COB on the 10th of the month. The following data elements shall be used to report monthly the TFL claim volume of:*

- *Total Number of TFL Payments Returned Because of Other Health Insurance (OHI)*
  
- *Percentage of Beneficiaries Having Updated their OHI (based on the original population taken from the Government-provided file) - Current Month and Cumulative*