## **AHCCCS DFSM TRIBAL ALTCS**

## **Chart of Report Deliverables and Due Dates for 2020-21**

| REPORT NAME            | DATE DUE   | SEND TO  |
|------------------------|--|--|
| Case Load Ratio        | 2020   |  |
|                        | 15 days after the end of each quarter  | Division of Fee for Service Management   |
|                        | 1 <sup>st</sup> Quarter (Oct-Dec) report due by January 15 <sup>th</sup> , 2020          | Assigned Tribal ALTCS Case Management Coordinator  |
|                        | 2 <sup>nd</sup> Quarter (Jan-March) report due by *June 15th, 2020                       | _  |
|                        | 3 <sup>rd</sup> Quarter (April -June) report <b>due by *August 30<sup>th</sup>, 2020</b> |  |
|                        | 4 <sup>th</sup> Quarter (July-Sept) report due by October 15 <sup>th</sup> , 2020        |  |
|                        | *denotes extension due to COVID-19   |  |
|                        | 2021   |  |
|                        | 15 days after the end of each quarter  |  |
|                        | 1 <sup>st</sup> Quarter (Oct-Dec) report due by January 15 <sup>th</sup> , 2021          |  |
|                        | 2 <sup>nd</sup> Quarter (Jan-March) report due by April 15th, 2021                       |  |
|                        | 3 <sup>rd</sup> Quarter (April -June) report due by July 15 <sup>th</sup> , 2021         |  |
|                        | 4 <sup>th</sup> Quarter (July-Sept) report due by October 15 <sup>th</sup> , 2021        |  |
| Supervisory Audit Tool | 15 days after the end of each quarter  | Division of Fee for Service Management Assigned Tribal ALTCS Case Management Coordinator |
| Program Organizational | Upon Execution of Agreement and as requested   | Division of Fee for Service Management  Assigned Tribal ALTCS                            |

| Chart                         |   | Case Management Coordinator  |
|-------------------------------|---|--|
| ALTCS Personnel<br>Changes    | Within 30 days of the change              | Division of Fee for Service Management Assigned Tribal ALTCS Case Management Coordinator |
| Quarterly Financial<br>Report | 60 calendar days after end of the quarter | Finance Manager Division of Health Care Management                                       |
| Annual Financial Audit        | 9 months after end of Tribal fiscal year  | Finance Manager Division of Health Care Management                                       |