AHCCCS DFSM TRIBAL ALTCS

Chart of Report Deliverables and Due Dates for 2024

| REPORT NAME | DATE DUE | SEND TO |
|---------------------------------|--|--|
| Case Load Ratio | 2024 | |
| and | 15 days after the end of each quarter | Division of Fee for Service Management |
| Supervisory Audit Tool | 1st Quarter (Oct-Dec) report due by January 15th, 2024 | Assigned Tribal ALTCS Case Management Coordinator |
| | 2 nd Quarter (Jan-March) report due by April 15th, 2024 | |
| | 3rd Quarter (April -June) report due by July 15th, 2024 | |
| | 4th Quarter (July-Sept) report due by October 15th, 2024 | |
| Program Organizational Chart | Upon Execution of Agreement and as requested | Division of Fee for Service Management Assigned Tribal ALTCS Case Management Coordinator |
| ALTCS Personnel Changes | Within 30 days of the change | Division of Fee for Service Management Assigned Tribal ALTCS Case Management Coordinator |
| Quarterly Financial 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 |