

CMO FLASH REPORT



The Care Management Organization (CMO) Flash Report provides a quick reference to the current status of the Georgia Families program. This report provides an overview of member enrollment, CMO financial filings with the Department of Insurance, CMO self-reported utilization data, premium capitation payments to CMOs, prior authorization performance, timely access performance and trends to watch.

ENROLLMENT

	AMERIGROUP®	Peach State®	Wellcare®	Region Totals
Atlanta Region	103,651	163,104	191,853	458,608
Central Region		48,427	75,100	123,527
East Region	25,785		35,328	61,113
North Region	47,409		87,952	135,361
Southeast Region	31,466		58,445	89,911
Southwest Region		74,977	31,842	106,819
Statewide Members	208,311	286,508	480,520	975,339

Represents total number of eligible managed care members that have been enrolled into the CMO plans as of November 2008.

CMO SELF-REPORTED DATA

	AMERIGROUP®	Peach State®	Wellcare®
ER Visits/1000	604	541.97	625
C-Section Rate	29.8%	30%	32%
Brand Fill Rates	21.8%	18.76%	14.47%
Generic Fill Rates	78.2%	81.24%	85.53%

Represents CMO self-reported utilization measures of quality performance and consistent care delivery across plans.

CMO FINANCIAL FILINGS

	AMERIGROUP® (\$ Millions)	Peach State® (\$ Millions)	Wellcare® (\$ Millions)	Total- All CMOs (\$ Millions)
Total Revenue (less 5.5% Quality Assessment Fee paid back to DCH)	\$337.5	\$508.5	\$882.5	\$1,728.5
Total Medical Expense	\$289.4	\$444.6	\$760.1	\$1494.1
Health Benefit Ratio (Medical Expense/Revenue)	85.7%	87.4%	86.1%	86.4%

Represents total CMO reported cost for medical services expenditure filed with Georgia Department of Insurance January-September 2008.

PREMIUM CAPITATION PAYMENTS TO CMOs

	AMERIGROUP®	Peach State®	Wellcare®	Total - All CMOs
Current month	\$34,247,883	\$45,826,526	\$77,806,134	\$157,880,542
Retroactive adjustments (includes OB delivery payments for prior months and retroactive enrollment activity)	\$5,245,827	\$7,511,763	\$14,813,486	\$27,571,076
Quality Assessment Fee Paid to DCH	\$(2,198,383)	\$(2,971,165)	\$(5,168,146)	\$(10,337,694)
Net Payments	\$37,295,327	\$50,367,124	\$87,451,473	\$175,113,924

Represents DCH allocated payments to the CMO for total cost of services for January 2008.



PRIOR AUTHORIZATION DATA

# Days to PA Completion	AMERIGROUP®	Peach State®	Wellcare®
≤ 14 Days (contract requirement)	99.8%	100%	99.8%
≤10 Days	82.9%	99.1%	85.3%
≤ 5 Days	66%	90.7%	64.5%

ADDITIONAL PRIOR AUTHORIZATION DATA

Denial Rates	AMERIGROUP®	Peach State®	Wellcare®
DME	3.5%	0.3%	3.1%
Medical Inpatient	5.4%	9.3%	0.3%
Medical Outpatient	4.2%	7.3%	0.7%
Therapies	4.6%	5.8%	1.1%
Total	9.3%	5.9%	5.8%

Represents the percentage of prior-authorization requests that were determined to be not medically necessary.

TIMELY ACCESS PERFORMANCE REPORT

Provider Type	AMERIGROUP®	Peach State®	Wellcare®
PCPs (routine visits)	100%	100%	100%
PCP (adult sick visit)	100%	100%	82.50%
PCP (pediatric sick visit)	100%	100%	92.86%
Specialist (OBGYN)	100%	100%	94.47%
Mental Health Providers	100%	67.18%	90.08%
Urgent Care Providers	100%	76.88%	100%

Represents CMO 3rd Quarter 2008 timely access performance survey results for the network capacity of appointment wait times.

TRENDS 2 WATCH

Opportunities	Solutions Found
<ul style="list-style-type: none"> ▪ Providers burdened with 3 different CMO forms ▪ Claims payment delays ▪ CMO Portal inconsistencies ▪ Inconsistent Policy Guidelines Among CMOs 	<ul style="list-style-type: none"> ▪ Common Synagis prior authorization form ▪ Provider Resolution Hotline ▪ Exploring implementation of a Super Portal ▪ Common prior authorization for therapy requests
Resolution Status: ■ In Progress ■ Active ■ Future	

Represents the quarterly action items of opportunities and solutions for the Managed Care and Quality Division for areas of improvement.