

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	117,450	172,051	212,497	501,998
Central Region		50,621	80,738	131,359
East Region	27,104		36,948	64,052
North Region	52,724		96,585	149,309
Southeast Region	33,991		63,096	97,087
Southwest Region		77,657	34,931	112,588
Statewide Members	231,269	300,329	524,795	1,056,393

Represents total number of eligible managed care members that have been enrolled into the CMO plans as of June 2009.

CMO SELF-REPORTED DATA			
	AMERIGROUP®	Peach State®	Wellcare®
ER Visits/1000	708.1	624.0	687
C-Section Rate	31.5%	30%	32%
Brand Fill Rates	20%	17%	13.84%
Generic Fill Rates	80%	83%	86.16%

Represents quarterly CMO self-reported utilization measures of quality performance and consistent care delivery across plans. Reported to DCH April 2009 for dates of service Oct 1, 2008 through December 31, 2008

CMO FINANCIAL FILINGS				
	AMERIGROUP (\$ Millions)	Peach State® (\$ Millions)	Wellcare® (\$ Millions)	Total- All CMOs (\$ Millions)
Total Revenue (less 6 % Quality Assessment Fee paid back to DCH)	\$125.4	\$172.9	\$321.2	\$619.5
Total Medical Expense	\$111.4	\$169.2	\$283.6	\$564.2
Health Benefit Ratio (Medical Expense/Revenue)	88.8%	97.9%	88.3%	91.1%

PREMIUM CAPITATION PAYMENTS TO CMOs				
	AMERIGROUP® (\$ Millions)	Peach State® (\$ Millions)	Wellcare® (\$ Millions)	Total - All CMOs (\$ Millions)
Current month	\$38.63	\$51.48	\$91.09	\$181.21
Retroactive adjustments (includes OB delivery payments for prior months and retroactive enrollment activity)	\$6.34	\$10.24	\$16.25	\$32.83
Quality Assessment Fee Paid to DCH	\$(2.47)	\$(3.39)	\$(5.90)	\$(11.77)
Net Payments	\$42.50	\$58.32	\$101.44	\$202.26



PRIOR AUTHORIZATION DATA

# Days to PA Completion	AMERIGROUP®	Peach State®	Wellcare®
≤ 14 Days (contract requirement)	100.0%	99.8%	100%
≤10 Days	71.1%	93.8%	81.2%
≤ 5 Days	57.6%	71.8%	71.6%

Represent the percentage of prior-authorization completed within the contract required timelines for June 2009.

ADDITIONAL PRIOR AUTHORIZATION DATA

Denial Rates	AMERIGROUP®	Peach State®	Wellcare®
DME	5.7%	1.0%	7.3%
Medical Inpatient	7.0%	14.1%	0.6%
Medical Outpatient	7.6%	6.7%	1.0%
Therapies	22.1%	10.8%	1.6%
Total	16.6%	8.1%	8.6%

Represents monthly CMO self-reported percentage of standard prior-authorization requests that were determined to be not medically necessary. Reported to DCH June 2009.

TIMELY ACCESS PERFORMANCE REPORT

Provider Type	AMERIGROUP®	Peach State®	Wellcare®
PCPs (routine visits)	100%	100%	97%
PCP (adult sick visit)	100%	100%	95.36%
PCP (pediatric sick visit)	100%	100%	100%
Specialist (OBGYN)	100%	100%	87.4%
Mental Health Providers	100%	89.47%	100%
Urgent Care Providers	100%	100%	N/A

Represents CMO 1st Quarter 2009 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.