

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	122,311	173,023	213,624	508,958
Central Region		50,796	81,785	132,581
East Region	27,194		36,448	63,642
North Region	53,061		97,289	150,350
Southeast Region	34,043		63,256	97,229
Southwest Region		77,753	35,745	113,498
Statewide Members	236,609	301,572	528,147	1,066,328

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

CMO SELF-REPORTED DATA			
	AMERIGROUP®	Peach State®	Wellcare®
ER Visits/1000	699.4	667.04	717
C-Section Rate	30.3%	31%	33%
Brand Fill Rates	19.7%	17%	15%
Generic Fill Rates	80.3%	83%	85%

Represents quarterly CMO self-reported utilization measures of quality performance and consistent care delivery across plans. Reported to DCH July 2009

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)	\$257.5	\$348.9	\$618.1	\$1,224.5
Total Medical Expense	\$225.9	\$334.0	\$541.6	\$1,101.5
Health Benefit Ratio (Medical Expense/Revenue)	87.7%	95.7%	87.6%	90.0%

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%	100.0%	100.0%
≤10 Days	77.7%	79.9%	86.3%
≤ 5 Days	57.8%	58.7%	71.1%

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

ADDITIONAL PRIOR AUTHORIZATION DATA

Denial Rates	AMERIGROUP®	Peach State®	Wellcare®
DME	11.7%	1.3%	5.0%
Medical Inpatient	3.7%	8.5%	0.0%
Medical Outpatient	12.6%	7.1%	0.9%
Therapies	29.5%	10.7%	2.1%
Total	21.2%	16.9%	10.6%

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

TIMELY ACCESS PERFORMANCE REPORT

Provider Type	AMERIGROUP®	Peach State®	Wellcare®
PCPs (routine visits)	100%	88.37%	95.5%
PCP (adult sick visit)	100%	98.84%	99.4%
PCP (pediatric sick visit)	100%	98.99%	95.5%
Specialist (OBGYN)	100%	97.37%	92.2%
Mental Health Providers	95%	93.94%	89.8%
Urgent Care Providers	100%	95.45%	83.3

Represents CMO 2nd 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.