

# CMO Monthly Flash Report - July 2012

Enrollment				
Regions	Amerigroup	Peachstate	Wellcare	Region Totals
Atlanta	150,299	171,147	233,304	554,750
Central	813	52,196	81,334	134,343
East	27,586	629	37,250	65,465
North	56,521	1,665	101,019	159,205
Southeast	33,897	993	66,847	101,737
Southwest	410	76,657	37,549	114,616
Statewide	269,526	303,287	557,303	1,130,116

GF Month-end Adjusted Process Results Summary - July 2012  
Source: Fiscal Agent, ACS

Provider Call Center Statistics			
	Amerigroup	Peachstate	Wellcare
Avg Speed of Answering	91.6%	82.67%	82.9%
Abandonment Rate	0.4%	1.25%	2.2%
Blocked Calls	0.0%	0.0%	0.0%

Represents July 2012 call center performance totals (including subcontracted vendors). Eighty percent (80%) of calls must be answered by a person within thirty (30) seconds, the Blocked Call rate must not exceed one percent (1%), and the rate of Abandoned Calls must not exceed five percent (5%).  
Source: CMO Self-Reported data.

CMO Payments to Providers			
Month	Amerigroup (\$ Millions)	Peachstate (\$ Millions)	Wellcare (\$ Millions)
January 2012	\$37,019,737	\$44,448,447	\$88,869,602
February 2012	\$44,943,222	\$55,499,962	\$108,058,571
March 2012	\$56,510,706	\$54,374,899	\$111,401,645
April 2012	\$44,731,367	\$54,137,307	\$108,932,204
May 2012	\$46,225,265	\$54,220,371	\$109,518,215
June 2012	\$49,724,999	\$48,538,896	\$112,525,909
July 2012	\$42,968,874	\$49,458,165	\$96,415,476
August 2012			
September 2012			
October 2012			
November 2012			
December 2012			

Represents CMO payments to all provider types for July 2012.  
Source: CMO "Claims Processing Report"

# CMO Quarterly Flash Report - July 2012

Emergency Room Claims Payment				
	Amerigroup	Peachstate	Wellcare	Totals
# of ER Claims Submitted	12,285	13,240	24,380	49,905
ER Claims Paid at a Reduced amount (such as the Triage Rate)	3,156	7,157	11,146	21,459
# of Appeals	343	105	242	690
# of Appeals overturned where the Reduced rate is paid at a higher rate	53	43	21	117

Source: CMO Monthly CMO self-reported number of Emergency Room claims submitted, claims paid, the number of appeals and the number of appeals overturned.  
Period - July 2012

Corrective Action/Preventative Action Plans				
	Amerigroup	Peachstate	Wellcare	Total
2005	0	0	0	0
2006	0	0	0	0
2007	9	13	9	31
2008	2	8	5	15
2009	5	5	1	11
2010	12	8	11	31
2011	8	9	8	25
2012	1	2	2	5
<b>TOTAL</b>	<b>37</b>	<b>45</b>	<b>36</b>	<b>118</b>

Note: The numbers reflect CAPA plans from the period of January-July  
Source: DCH Medicaid Division

Prior Authorization Data			
# Days to PA Completion	Amerigroup	Peachstate	Wellcare
≤ 14 Days	99.9%	100.0%	99.8%
≤ 10 Days	97.3%	97.1%	91.3%
≤ 5 Days	95.1%	80.7%	67.3%

Represents quarterly CMO self-reported percentage of prior-authorizations completed within the contract required timelines. Reported to DCH  
Source: Quarterly CMO "Prior Authorization Report"  
Based on the posting of the Quarterly Reports

CMO Financial Filings				
	Amerigroup (\$ Millions)	Peachstate (\$ Millions)	Wellcare (\$Millions)	Total - All CMOs (\$ Millions)
Total Medical Expense	\$ 280.54	\$ 333.96	\$ 632.40	\$ 1,246.90
Health Benefit Ratio (Medical Expense/Revenue)	78.76%	87.08%	83.23%	83.15%

Represents total CMO reported cost for medical services expenditure filed with Georgia Department of Insurance (DOI). Reported to DOI June 2012  
Source: Quarterly filings with Georgia DOI

## QUARTERLY REPORTING:

1Q12 (Jan-Mar) will be posted in the April 2012 Flash Report

2Q12 (Apr-Jun) will be posted in the July 2012 Flash Report

3Q12 (Jul-Sept) will be posted in the October 2012 Flash Report

4Q12 (Oct-Dec) will be posted in the January 2013 Flash Report

# CMO Quarterly Flash Report - July 2012

<b>Prior Authorization Requests Denied</b>			
	<b>Amerigroup</b>	<b>Peachstate</b>	<b>Wellcare</b>
Medical Inpatient	2.30%	5.70%	0.30%
Medical Outpatient	8.10%	13.20%	0.50%
Therapies	17.60%	18.50%	3.50%
Behavioral Health	5.20%	24.90%	3.70%
Vision	6.70%	not reported	9.30%
Dental	20.80%	24.40%	33.50%
Total	14.20%	15.30%	12.10%

Represents quarterly CMO self-reported percentage of standard prior-authorization requests that were determined to be not medically necessary. Reported to DCH  
**Source: Quarterly CMO "Prior Authorization Report"**