

CMO Monthly Flash Report - October 2012

Enrollment				
Regions	Amerigroup	Peachstate	Wellcare	Region Totals
Atlanta	151,023	170,453	230,821	552,297
Central	1,078	50,961	81,053	133,092
East	26,978	912	36,998	64,888
North	55,598	2,392	98,779	156,769
Southeast	3,332	1,415	65,577	100,324
Southwest	576	74,922	37,738	113,236
Statewide	268,585	301,055	550,966	1,120,606

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

Provider Call Center Statistics			
	Amerigroup	Peachstate	Wellcare
Avg Speed of Answering	86.5%	81.31%	81.2%
Abandonment Rate	0.8%	1.88%	3.5%
Blocked Calls	0.0%	0.0%	0.0%

Represents October 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	\$54,352,244	\$52,844,135	\$112,885,046
September 2012	\$48,097,178	\$47,584,807	\$108,801,980
October 2012	\$52,795,431	\$61,771,226	\$116,036,742
November 2012			
December 2012			

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

CMO Quarterly Flash Report - October 2012

Emergency Room Claims Payment				
	Amerigroup	Peachstate	Wellcare	Totals
# of ER Claims Submitted	15,706	15,872	29,167	60,745
ER Claims Paid at a Reduced amount (such as the Triage Rate)	3,693	8,522	13,638	25,853
# of Appeals	223	148	169	540
# of Appeals overturned where the Reduced rate is paid at a higher rate	34	56	169	259

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 - October 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	2	2	2	5
TOTAL	38	45	36	119

Note: For 2012, the numbers reflect CAPA plans from the period of January–October
Source: DCH Medicaid Division

Prior Authorization Data			
# Days to PA Completion	Amerigroup	Peachstate	Wellcare
≤ 14 Days	99.9%	99.9%	99.7%
≤ 10 Days	97.5%	97.1%	84.2%
≤ 5 Days	93.1%	82.1%	58.3%

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	\$433.01	\$506.72	\$985.93	\$1,925.66
Health Benefit Ratio (Medical Expense/Revenue)	79.04%	88.15%	88.31%	86.00%

Represents total CMO reported cost for medical services expenditure filed with Georgia Department of Insurance (DOI). Reported to DOI
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 - October 2012

Prior Authorization Requests Denied			
	Amerigroup	Peachstate	Wellcare
Medical Inpatient	2.6%	12.8%	0.2%
Medical Outpatient	10.5%	11.2%	0.8%
Therapies	24.1%	18.8%	3.5%
Behavioral Health	6.1%	13.8%	2.4%
Vision	20.4%	Not Reported	26.3%
Dental	19.1%	35.6%	41.1%
Total	14.8%	15.4%	15.9%

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"