

## April 2015 MONTHLY REPORTING:

ENROLLMENT				
REGIONS	AMERIGROUP	PEACHSTATE	WELLCARE	REGION TOTALS
Atlanta	192,079	216,687	245,563	654,329
Central	7,474	57,667	85,922	151,063
East	29,659	3,568	38,887	72,114
North	64,204	11,002	101,386	176,592
Southeast	37,320	7,105	72,099	116,524
Southwest	4,301	80,341	39,997	124,639
Statewide	335,037	376,370	583,854	1,295,261
GF Month-end Adjusted Process Results Summary - April 2015 Source: Fiscal Agent, ACS				

PROVIDER CALL CENTER STATISTICS			
	AMERIGROUP	PEACHSTATE	WELLCARE
Avg Speed of Answering	92.13%	89.64%	82.0%
Abandonment Rate	0.35. %	1.06%	0.2%
Blocked Calls	0.11%	0.06%	0.0%
Represents April 2015 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 2015	\$72,807,382	\$57,037,302	\$111,473,460
February 2015	\$ 69,995,918	\$ 59,271,618	\$ 106,012,983
March 2015	\$ 66,103,921	\$ 69,648,442	\$ 109,865,346
April 2015	\$ 74,640,132	\$ 66,450,822	\$ 114,642,156
May 2015			
June 2015			
July 2015			
August 2015			
September 2015			
October 2015			
November 2015			
December 2015			
Represents CMO payments to all provider types for April 2015. Source: CMO "Claims Processing Report"			

**April 2015 MONTHLY REPORTING:**

**EMERGENCY ROOM CLAIMS PAYMENT**

April 2015

	<b>AMERIGROUP</b>	<b>PEACHSTATE</b>	<b>WELLCARE</b>	<b>TOTALS</b>
# of ER Claims Submitted	16,812	11,508	29,100	57,420
ER Claims Paid at a Reduced amount (such as the Triage Rate)	756	6,595	12,635	19,986
# of Appeals	1,271	294	140	1,705
# of Appeals overturned where the Reduced rate is paid at a higher rate	1,027	92	0	1,119

**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 - April 2015

**CORRECTIVE ACTION/PREVENTIVE ACTION PLANS**

	<b>AMERIGROUP</b>	<b>PEACHSTATE</b>	<b>WELLCARE</b>	<b>TOTAL</b>
2008	2	8	5	<b>15</b>
2009	5	5	1	<b>11</b>
2010	12	8	11	<b>31</b>
2011	8	9	8	<b>25</b>
2012	4	5	5	<b>14</b>
2013	2	2	2	<b>6</b>
2014	0	0	0	<b>0</b>
2015	0	0	0	<b>0</b>
<b>TOTAL</b>	<b>33</b>	<b>37</b>	<b>32</b>	<b>102</b>

Note: For 2015, the numbers reflect CAPA plans for the period of April

**Source: DCH Medicaid Division**

## QUARTERLY REPORTING:

1Q15 (Jan-Mar) will be posted in the April 2015 Flash Report

2Q15 (Apr-Jun) will be posted in the July 2015 Flash Report

3Q15 (Jul-Sept) will be posted in the October 2015 Flash Report

4Q15 (Oct-Dec) will be posted in the January 2015 Flash Report

PRIOR AUTHORIZATION DATA			
# Days to PA	AMERIGROUP	PEACHSTATE	WELLCARE
≤ 14 Days (contract)	99.7%	99.2%	100.0%
≤ 10 Days	93.9%	93.1%	96.9%
≤ 5 Days	89.4%	64.1%	91.5%
Represents quarterly CMO self-reported percentage of prior-authorizations completed within the contract required timelines. Reported to DCH <b>Source: Quarterly CMO "Prior Authorization Report"</b> <b>Based on the posting of the Quarterly Reports</b>			

CMO FINANCIAL FILINGS				
	AMERIGROUP (\$ Millions)	PEACHSTATE (\$ Millions)	WELLCARE (\$ Millions)	Total- All CMOs (\$ Millions)
Total Medical Expense	\$ 900.53	\$ 997.97	\$ 1,478.45	\$ 3,376.94
Health Benefit Ratio (Medical Expense/ Revenue)	94.20%	96.84%	100.20%	97.54%
Represents total CMO reported cost for medical services expenditure filed with Georgia Department of Insurance (DOI) . Reported to DOI 2014 <b>Source: Quarterly filings with Georgia DOI</b>				

PRIOR AUTHORIZATION REQUESTS DENIED			
	AMERIGROUP	PEACHSTATE	WELLCARE
Medical Inpatient	7.3%	13.4%	1.76%
Medical Outpatient	7.4%	10.1%	4.79%
Therapies	19.9%	7.5%	1.76%
Behavioral Health	21.3%	10.0%	3.18%
Vision	0.0%	0.0%	10.02%
Dental	0.0%	12.1%	15.62%
Total	5.4%	10.2%	13.15%
Represents quarterly CMO self-reported percentage of standard prior-authorization requests that were determined to be not medically necessary. Reported to DCH <b>Source: Quarterly CMO "Prior Authorization Report"</b>			