

# CMO Performance and Oversight Update

Presentation to  
DCH CARE MANAGEMENT COMMITTEE  
November 12, 2009



# DCH Mission

## ACCESS



Access  
to affordable,  
quality health  
care in our  
communities

## RESPONSIBLE



Responsible  
health planning  
and use of  
health care  
resources

## HEALTHY



Healthy  
behaviors and  
improved  
health  
outcomes

# DCH Initiatives

## FY 2009 and FY 2010

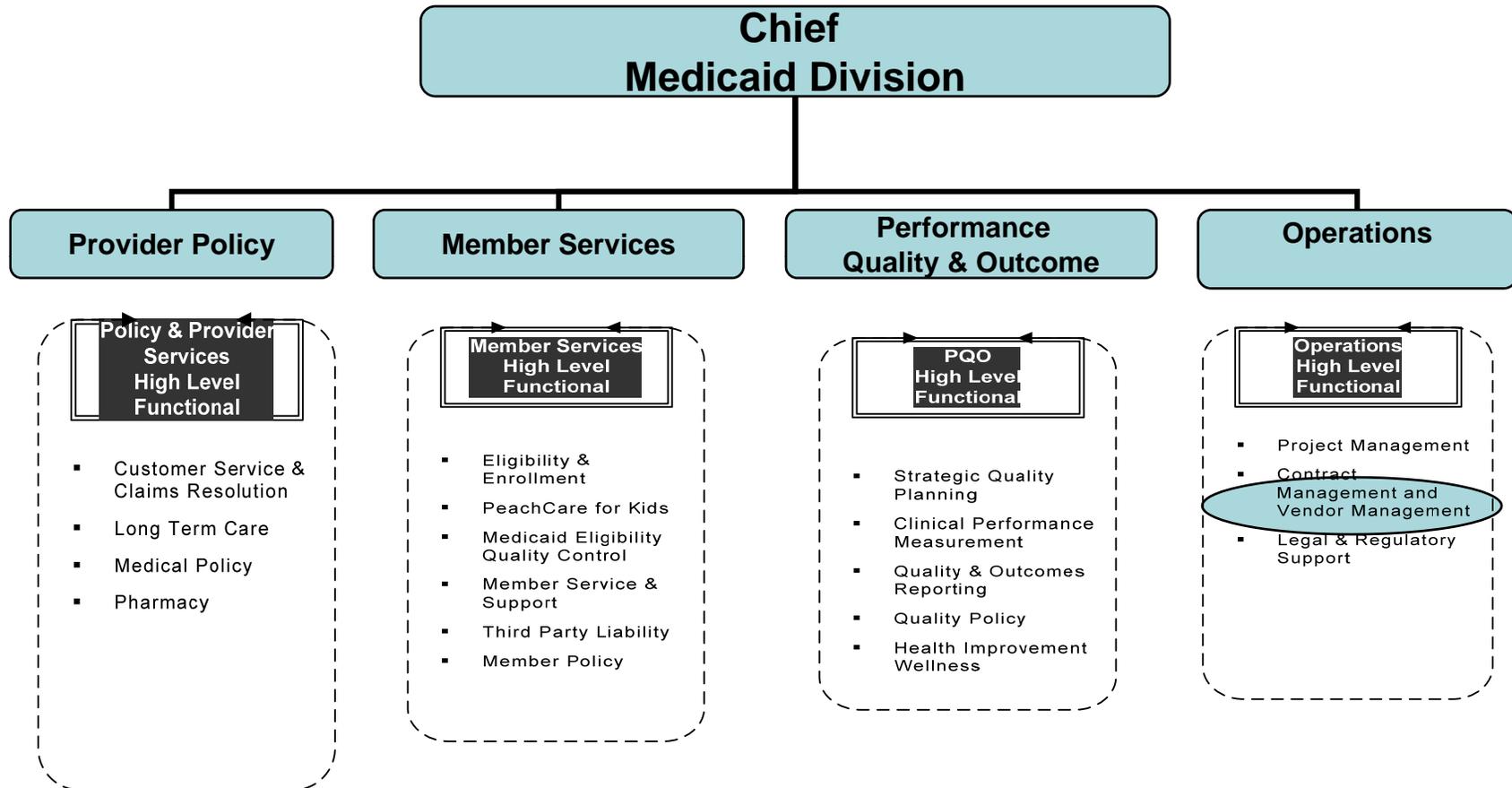
### FY 2009

- Medicaid Transformation**
- Health Care Consumerism**
- Financial & Program Integrity**
- Health Improvement**
- Solutions for the Uninsured**
- Workforce Development**
- PeachCare for Kids™ Program**
- Stability**
- Customer Service**

### FY 2010

- Medicaid Transformation**
- Health Care Consumerism**
- Financial & Program Integrity**
- Health Improvement**
- Workforce Development**
- Customer Service**
- Emergency Preparedness**

# Medicaid Division Organizational Chart



# Georgia Families



- Effective June 1, 2006, the state of Georgia implemented Georgia Families, a statewide managed care program through which health care services are delivered to members of Medicaid and PeachCare for Kids™. The program is a partnership between the Georgia Department of Community Health (DCH) and private Care Management Organizations (CMOs) to ensure accessible and quality health care services for all of the Medicaid managed care members.
- The three CMOs are responsible and accept full financial risk for providing and authorizing covered services. This also means a greater focus on case and disease management with an emphasis on preventative care to improve individual health outcomes. Georgia Families members are allowed to select a health care plan that fits their needs. The 3 CMOs are

Amerigroup Community Care

Peach State Health Plan

WellCare of Georgia, Inc.

- DCH also monitors the CMOs to ensure compliance with contractual requirement standards for contract management, member services, provider services and quality services.

# Care Management Organizations

## CMOs by REGION

Amerigroup Community Care	Peach State Health Plan	WellCare of Georgia, Inc.
ATLANTA	ATLANTA	ATLANTA
X	CENTRAL	CENTRAL
EAST	X	EAST
NORTH	X	NORTH
SOUTHEAST	X	SOUTHEAST
X	SOUTHWEST	SOUTHWEST

# DCH Oversight of CMOs

- Occurs at many levels within DCH and the Medicaid Division
- Coordinated by the DCH Contracts Compliance and Resolution Unit
  - Monitors CMO compliance with contractual requirements
  - Ensures compliance with federal and state requirements
  - Documents performance
  - Collaborates with sister agencies
- Areas for improvement are documented through Corrective Action and Preventive Action Plans
- Contractual authority to assess liquidated damages for contract violations
- Annual contract amendment process to address opportunities to enhance the contract
- Myers & Stauffer Reviews



# Member Services

Kevin Maddox



# Georgia Families Membership Summary November 2009

CMO	Previous Monthly Membership	Current Monthly Membership
<b>AMERIGROUP</b>	<b>241,621</b>	<b>243,331</b>
<b>PEACH STATE HEALTH PLAN</b>	<b>304,664</b>	<b>304,487</b>
<b>WELLCARE of GEORGIA, INC.</b>	<b>535,607</b>	<b>537,478</b>
<b>TOTAL</b>	<b>1,081,892</b>	<b>1,085,296</b>

# MAXIMUS – Enrollment Broker

The Enrollment Broker provides Enrollment Services for Georgia Families members and also provides each member and potential member with information about the Care Management Organizations (CMOs) and assist members in selecting a health plan as well as a Primary Care Provider (PCP) that will meet their individual and family healthcare needs.

## Services provided

### ✓ Customer Service Center

- Enrollments, inbound/outbound calling and broadcast messages via IVR
- Member education and enrollment opportunities via phone, mail, web, IVR and in person

### ✓ Outreach Services

- Collaborations with GF community partners, concerned citizens, stake-holders, public agencies and other program participants
- Onsite enrollment/education sessions and presentations

### ✓ Mailing

- Enrollment packages, notification letters, member reminder notices and surveys



# MAXIMUS – Enrollment Broker

## Selected Stats

Enrollment Packages Mailed Program-to-date	1,920,049
Other Mailings	4,453,788
Calls Answered	1,671,391
Average Voluntary Selection Rate	83%

## Outreach Efforts

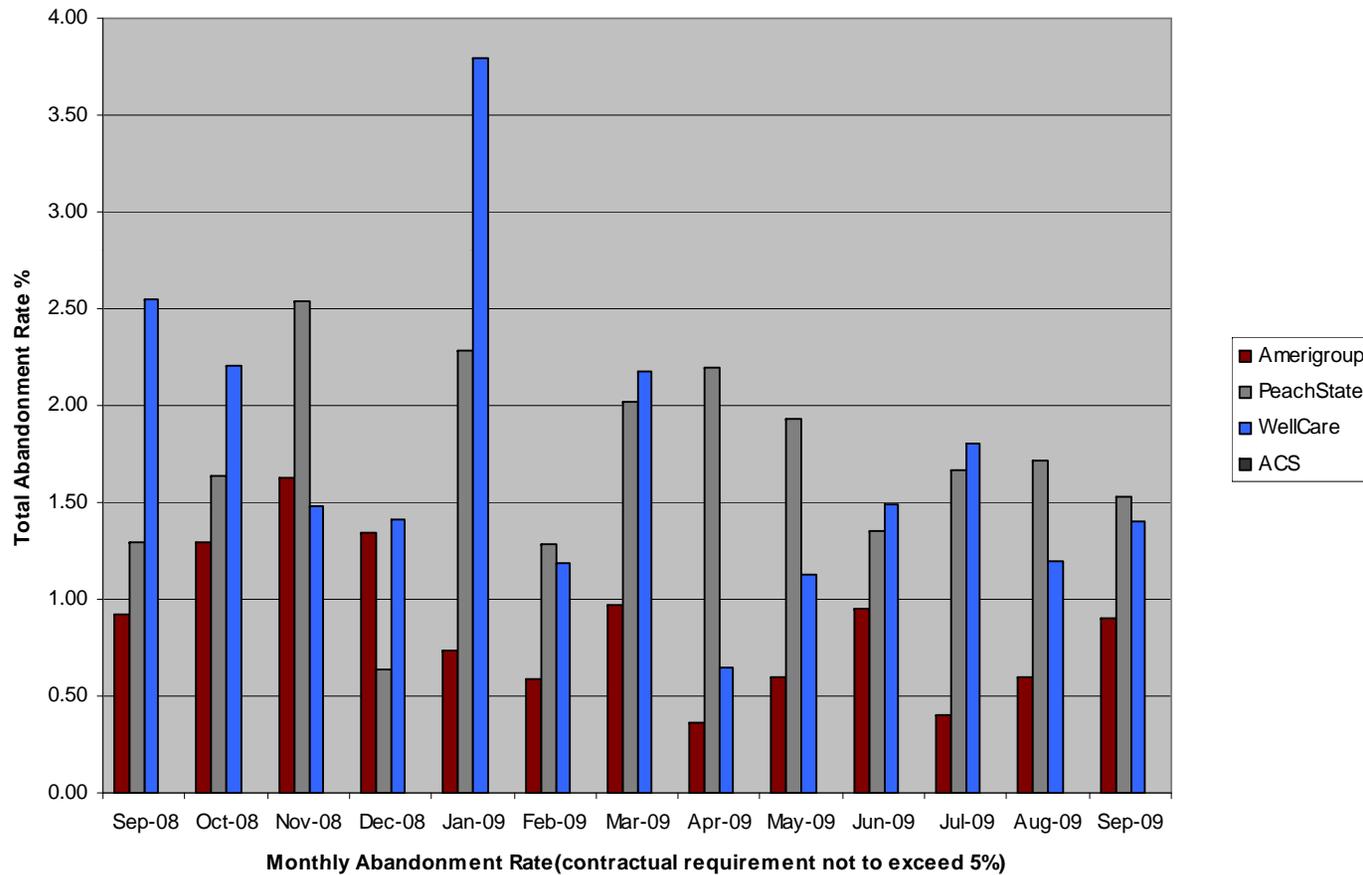
- ✓ Outreached to members in **147** of **159** counties and over **239** cities during the last fiscal year
- ✓ Provided outreach/education to over **153,000 individuals and families** last fiscal year and **over 950,000 statewide** since inception
- ✓ Partnered with over **1,400** organizations and agencies statewide
- ✓ Hosted over **3,100** member and community outreach sessions last year and have coordinated and participated in **over 10,000** sessions in nearly 4 years

# CMO Oversight & Monitoring

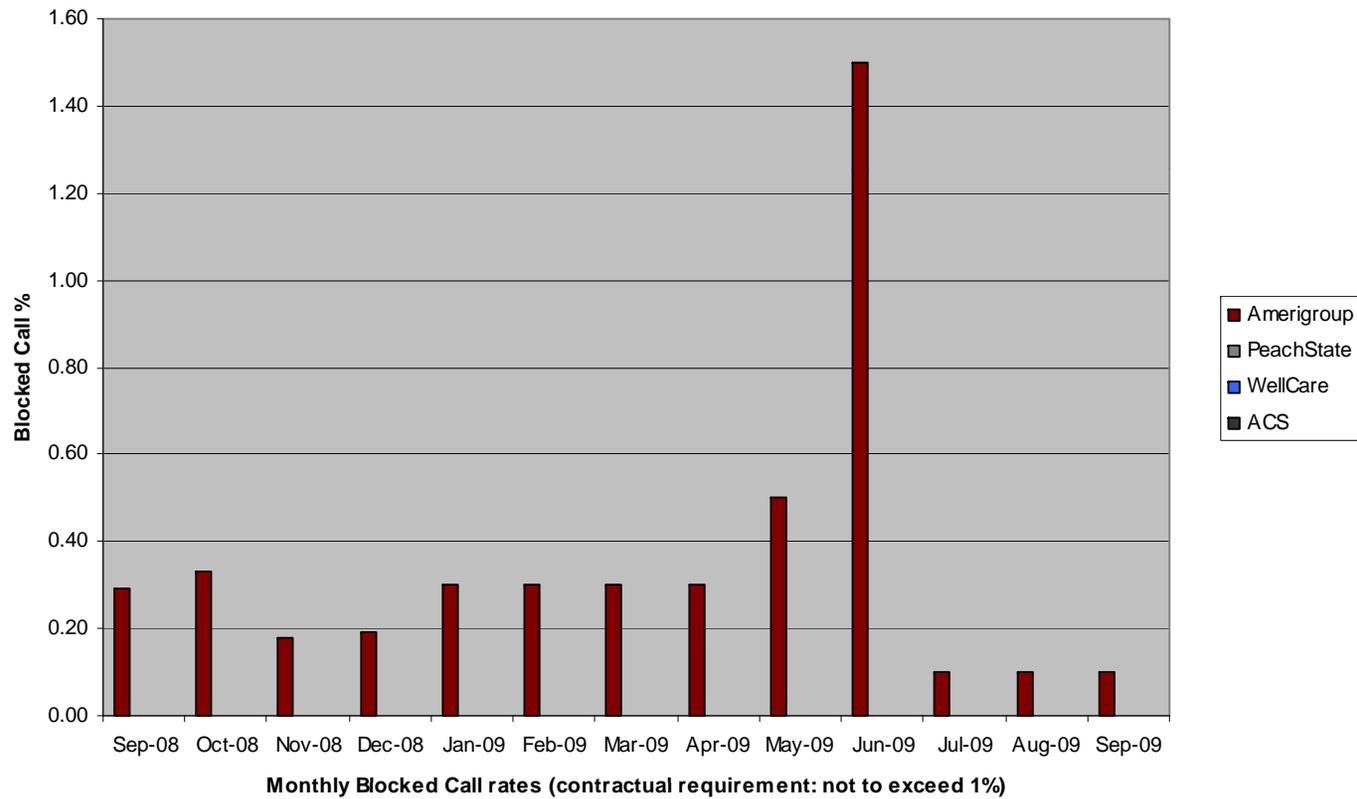
- **Member Services Oversight:**
  - CMO Member Service Call Center
  - Monthly Roster Validation
  - Monitoring of CMO Member Deliverables
  - CMO Disenrollments
  - Web Site Monitoring for Member Communications and Member Handbooks
  - End of the Month Terminations and Voids Process
  - Member Data Conflict Report



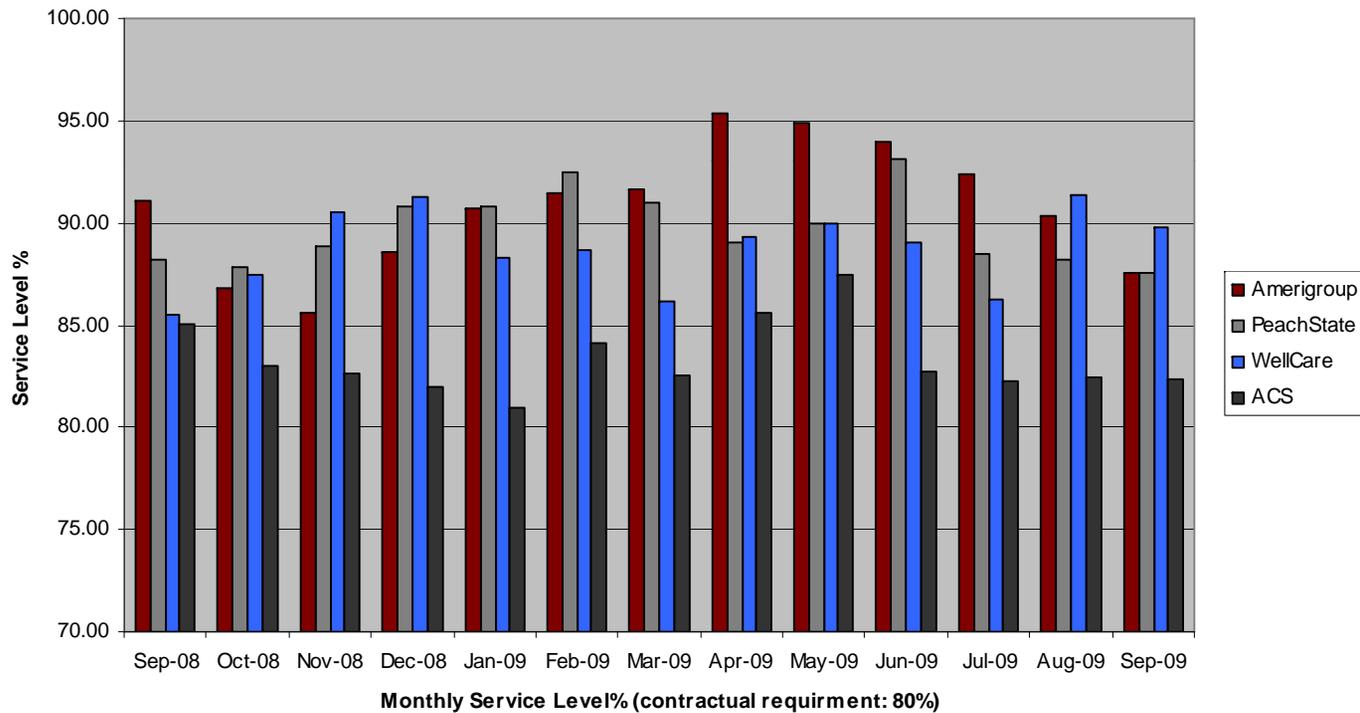
# CMO Abandonment Rates



# CMO Blocked Call Rates



# CMO Service Level %



# Financial Services

John Upchurch



# CMO Oversight & Monitoring

- **DCH Finance Oversight**
  - Letter of Credit
  - Payment Bonds
  - Federally Qualified Health Centers/Rural Health Center Providers
  - Medical Loss Ratio
  - GME
  - Hospital Statistical & Reimbursement Reports
  
- **DCH Audits Reviews**
  - SAS 70 Reporting



# CMO FINANCIAL FILINGS (QUARTERLY)

	Amerigroup (\$Millions)	PeachState (\$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%

# Contract Compliance and Resolution

Marvis Butler



# CMO Oversight & Monitoring

- **Contract Management Reviews**

Contractually Obligated Reports reviewed by each business unit:

- Monthly
- Quarterly
- Annual



Attestation Statements – required and must be signed by the CMO President or Vice President

Review of CMOs:

Staff Credentials, Hiring, & Training	System Design	Grievance Systems	Claims Management
Emergency Preparedness	System Security & Privacy Requirements	Fraud & Abuse Reporting	Corrective Actions/Liquidated Damages

# CMO Oversight & Monitoring

## CMO Subcontracted Vendors

- Requires prior written consent of DCH to perform any of the work, services, etc.;
- All Subcontractor agreements must be in writing;
- Agreements must specify the activities and responsibilities delegated to the Subcontractor.
- CMOs are responsible for monitoring the activities of their subcontractors



# CMO Oversight & Monitoring

## CMO Subcontracted Vendors

Vision	Dental	Behavioral Health
Third Party Liability	Home Health	Disease Management
Pharmacy Benefit Manager (PBM)	Language Interpretation Services	Customer Services
Occupational Therapists	Speech Therapists	Non-Emergency Transportation

# State Agency Collaboration

- **Georgia Department of Insurance**
  - Quarterly Income Statements
  - Annual Income Statements
- **Medicaid Fraud Control Unit/Georgia Bureau of Investigation**
  - Medicaid Provider - Fraud Investigations & Prosecutions
  - Member Fraud & Abuse



# Provider Services

Leticia Mayfield



# CMO Oversight & Monitoring

- **Provider Services Oversight**

- Provider Services Call Center
- Provider Network
- Provider Web Site Monitoring
- Sub Contractors Oversight Monitoring Activities and Results
- Appointment Wait Time
- Provider Services Policy and Procedures
- Contract Loading & Provider Setup Timeliness and Accuracy Issues



# CMO Oversight & Monitoring

- **Provider Services Oversight**
  - Primary Care Provider Assignment
  - Explanation of Payment Disposition Codes
  - Claim System Configuration Issues
  - Emergency Room Claims
  - 72 Hour Rule
  - Dental Access
  - Third Party Liability
  - Provider Terminations



# Network Overview

## 3<sup>rd</sup> Quarter 2009

	<u>Wellcare</u>	<u>PSHP</u>	<u>Amerigroup</u>
<b><u>Atlanta</u></b>	Urban / Rural	Urban / Rural	Urban / Rural
PCPs	97%/100%	99%/100%	98%/100%
Pediatric	97%/100%	98%/100%	98%/100%
Hospitals	100%/100%	100%/100%	100%/100%
Dental	100%/100%	100%/100%	100%/100%
<b><u>Central</u></b>			
PCPs	94%/96%	96%/99%	NA/NA
Pediatric	95%/96%	94%/95%	NA/NA
Hospitals	100%/100%	100%/100%	NA/NA
Dental	100%/100%	100%/100%	NA/NA
<b><u>North</u></b>			
PCPs	90%/99%	NA/NA	90%/99%
Pediatric	91%/99%	NA/NA	91%/99%
Hospitals	100%/100%	NA/NA	100%/100%
Dental	100%/100%	NA/NA	100%/100%



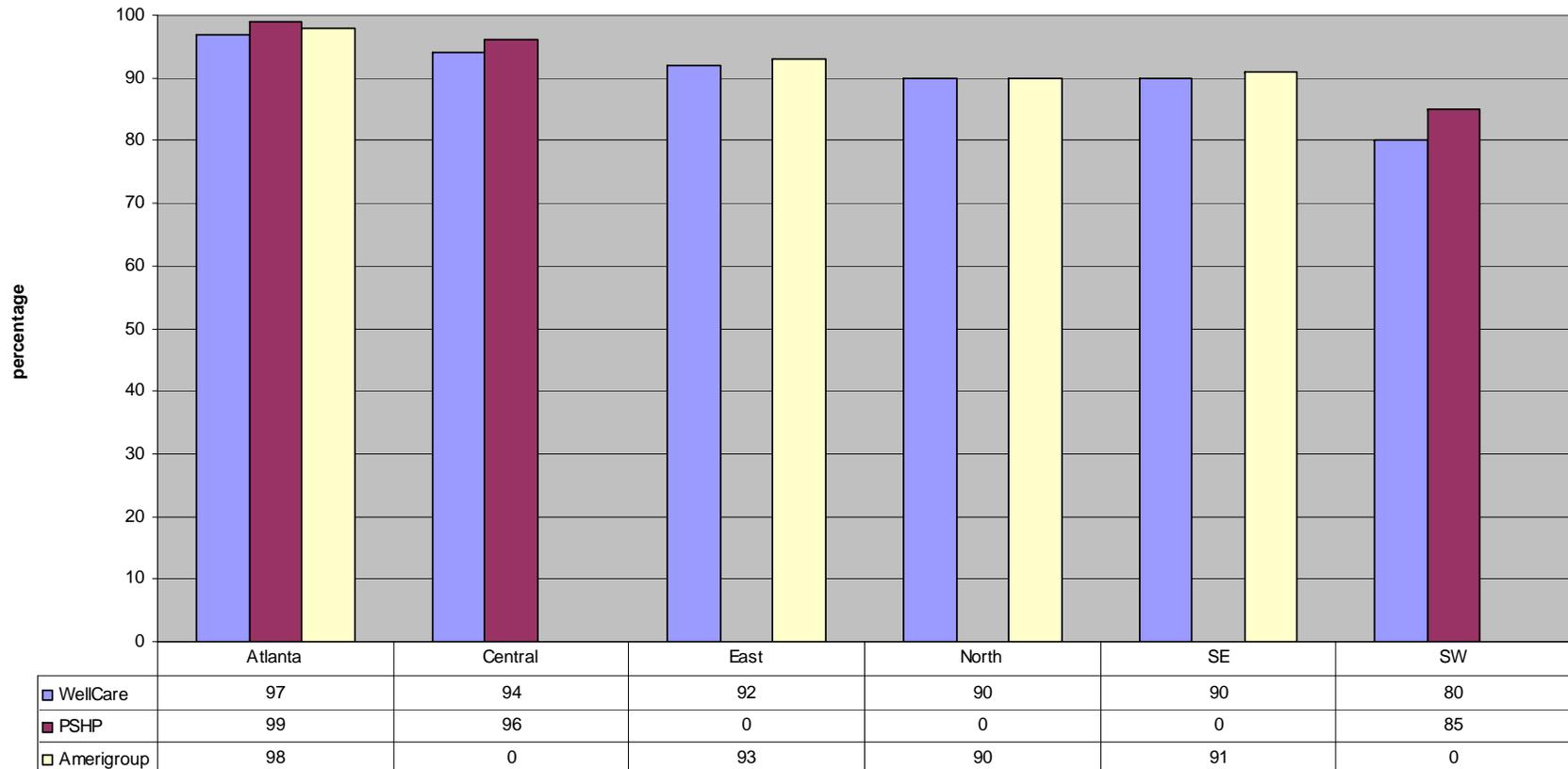
# Network Overview

## 3<sup>rd</sup> Quarter 2009

	<u>WellCare</u>	<u>PSHP</u>	<u>Amerigroup</u>
<b><u>East</u></b>	Urban / Rural	Urban / Rural	Urban / Rural
PCPs	92% / 91%	NA / NA	93% / 99%
Pediatric	90% / 99%	NA / NA	91% / 99%
Hospitals	100% / 100%	NA / NA	100% / 100%
Dental	100% / 100%	NA / NA	100% / 100%
<b><u>Southwest</u></b>			
PCPs	80% / 97%	85% / 98%	NA/ NA
Pediatric	92% / 91%	82% / 96%	NA/ NA
Hospitals	100% / 100%	100% / 100%	NA/ NA
Dental	100% / 100%	100% / 100%	NA/ NA
<b><u>Southeast</u></b>			
PCPs	90% / 93%	NA / NA	91% / 96%
Pediatric	83% / 91%	NA / NA	90% / 95%
Hospitals	100% / 100%	NA / NA	100% /100%
Dental	100% / 99%	NA / NA	100% / 99%

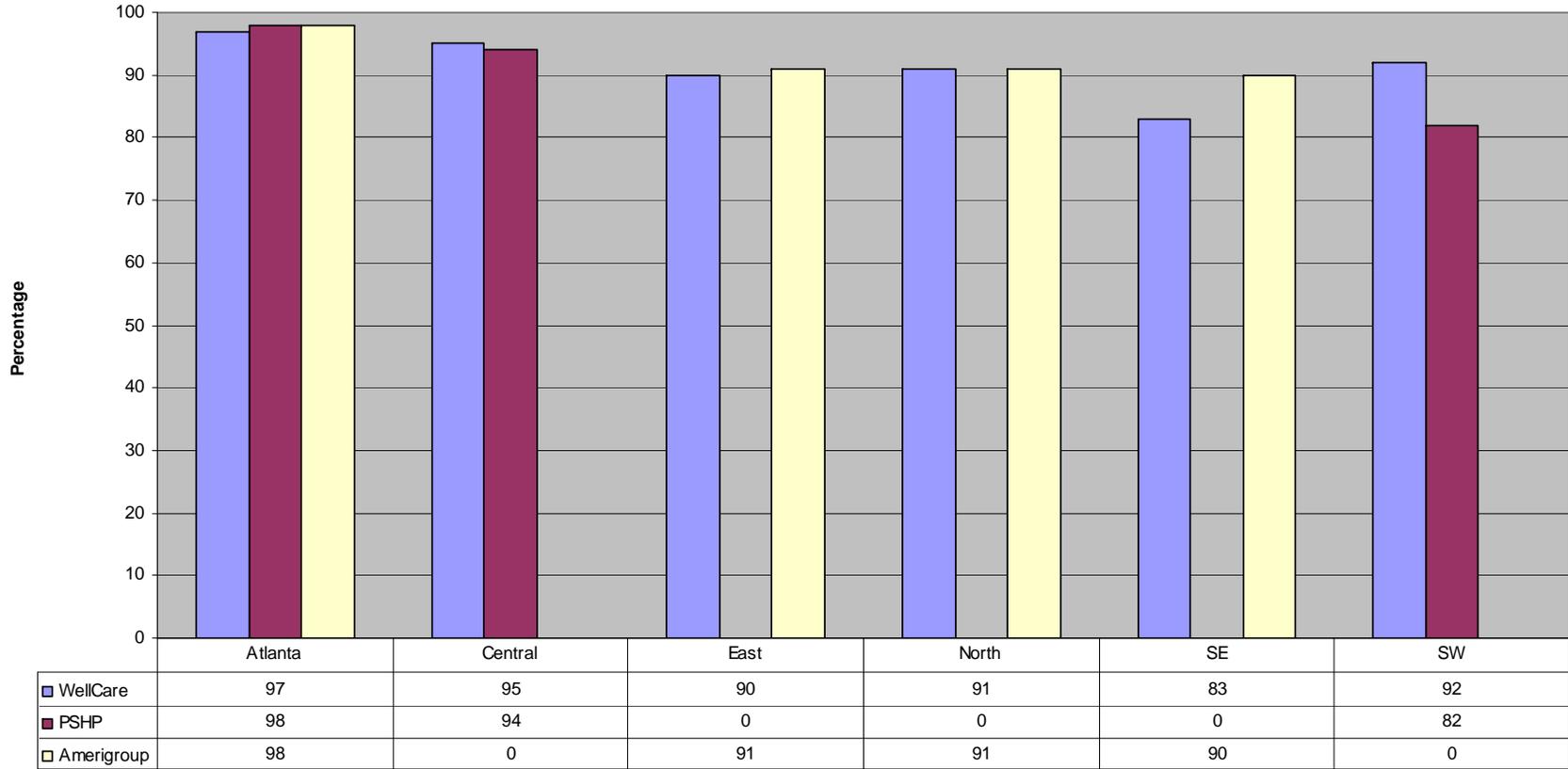


# Primary Care Provider Urban



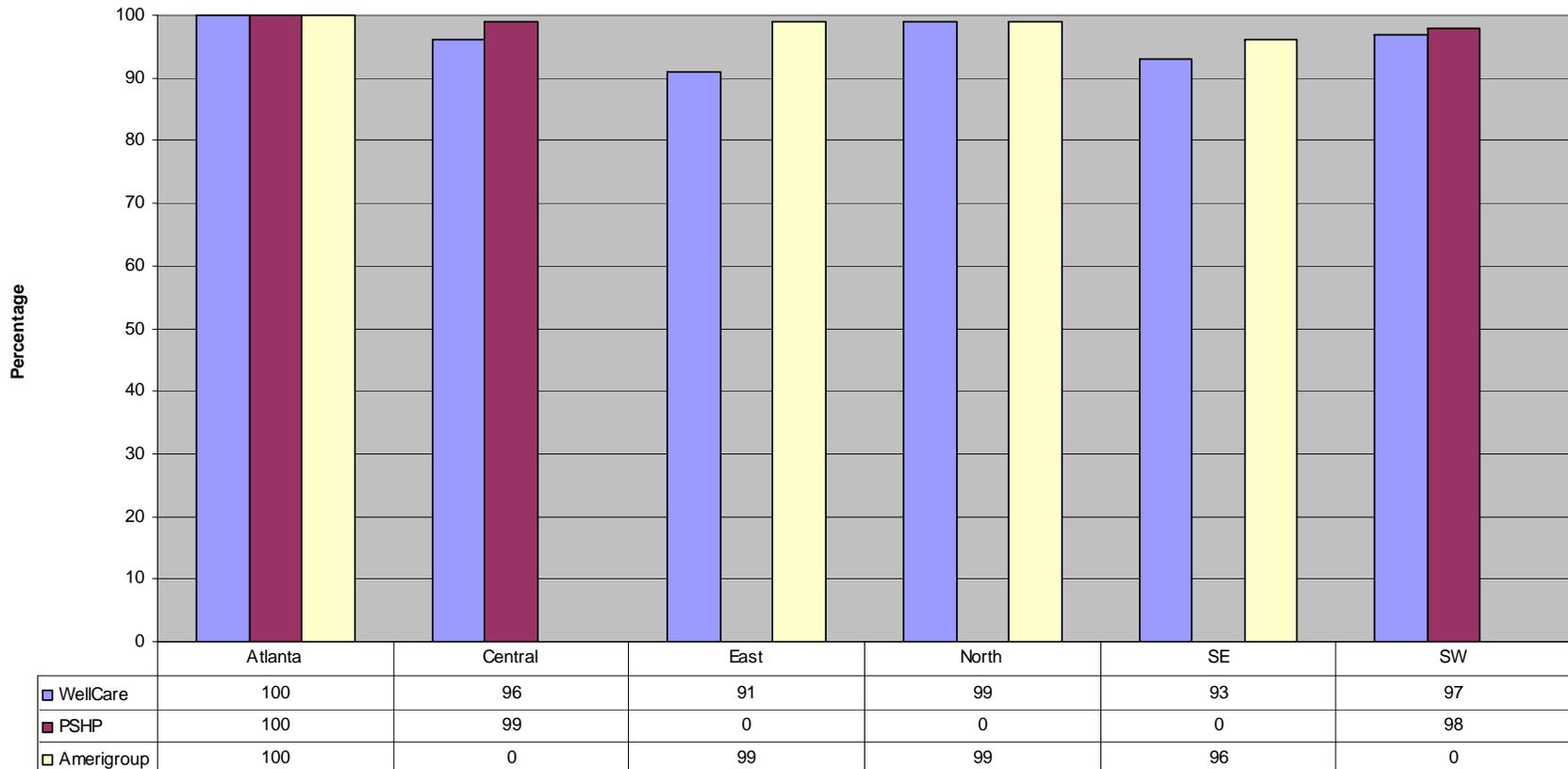
Standard: 2 Providers within 8 miles

# Pediatrics Urban



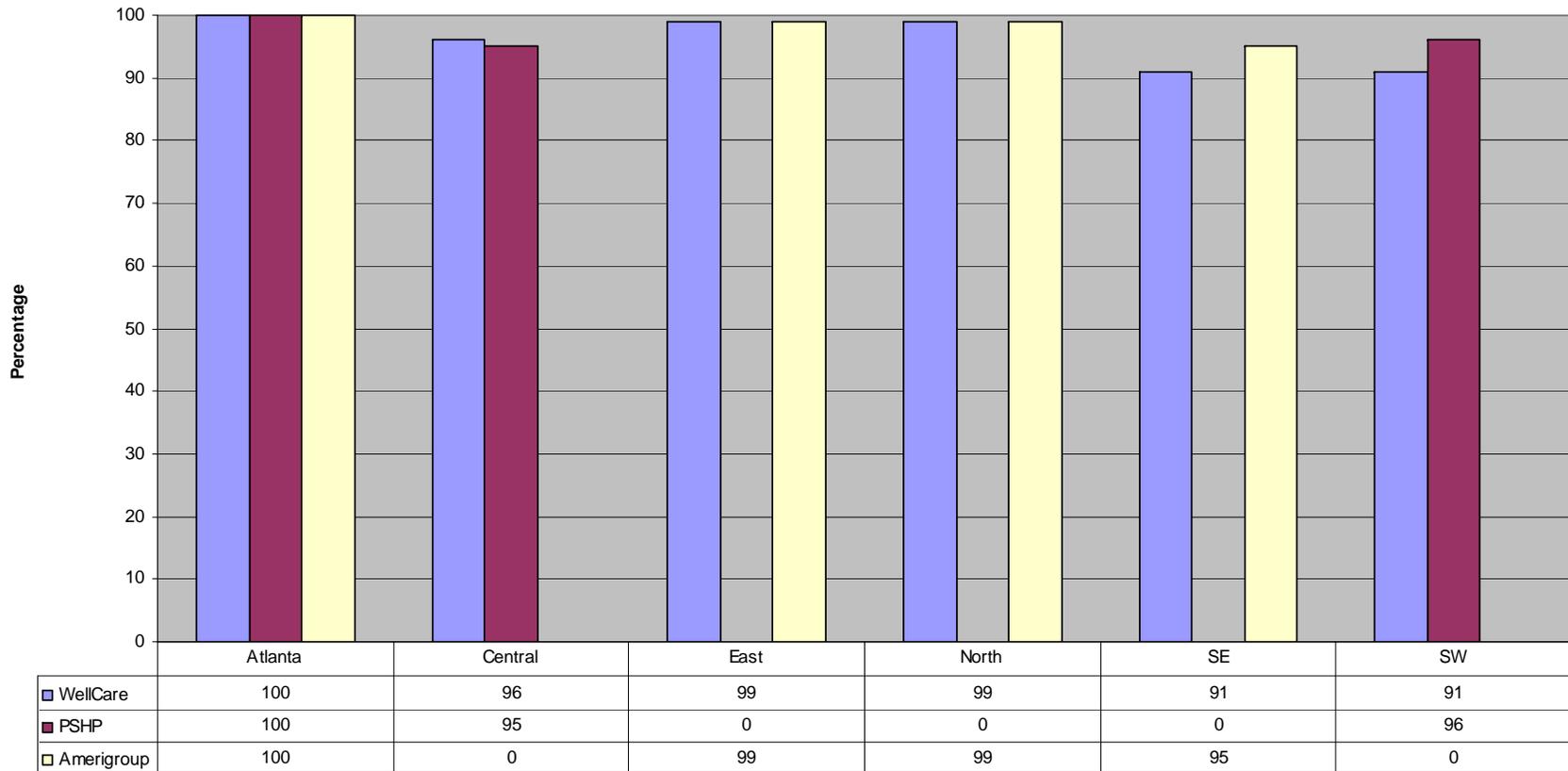
Standard: 2 Providers within 8 miles

# Primary Care Provider Rural



Standard: 2 Providers within 15 miles

# Pediatrics Rural



Standard: 2 Providers within 15 miles

# CMO Oversight & Monitoring

- **Provider Services Oversight (continued)**
  - Effective October 2009, GA Department of Audits and Accounts (DoAA) conducts audit of provider networks/rosters
    - Adds auditing expertise to the process
    - Additional systems and software to validate the provider listings
  - DCH Provider Services Staff
    - Review the results of DoAA audits
    - Assess adequacy of networks
    - Conduct “secret shopper” calls to identify
      - Timely appointments
      - Ensure the provider is accepting the plan’s members
      - Ensure the provider is accepting new members
  - DCH staff remain responsible for ensuring contractual requirements are met. This function has not been outsourced to DoAA
  - Opportunities to incorporate encounter data into the network review process are being introduced



# Performance Quality and Outcomes

Dr. Janice Carson



# CMO Oversight & Monitoring

- **Performance, Quality and Outcomes (PQO) Unit**
- **Georgia Families and Fee For Service Medicaid**
  - Assure provision of quality healthcare through:
    - Oversight of quality initiatives
    - Oversight of health care utilization
    - Oversight of medical management
  - Develop and update **Quality Strategic Plan**
  - Contract with **External Quality Review Organization** to:
    - Validate performance measures
    - Validate performance improvement projects
    - Evaluate CMO compliance with CFR and state contract requirements



# Discussion

