

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	102,242	163,817	185,282	451,341
Central Region		49,358	74,513	123,871
East Region	25,945		34,707	60,652
North Region	46,371		86,236	132,607
Southeast Region	31,227		58,074	89,301
Southwest Region		74,619	31,173	105,792
Statewide Members	205,785	287,794	469,985	963,564

Represents total number of eligible managed care members that have been enrolled into the CMO plans as of July 2008.

CMO SELF-REPORTED DATA			
	AMERIGROUP®	Peach State®	Wellcare®
ER Visits/1000	694.16	615.53	727
C-Section Rate	30.8%	0.293%	33%
Brand Fill Rates	78.6%	15.22%	15.20%
Generic Fill Rates	21.4%	64.24%	84.80%

Represents CMO self-reported utilization measures of quality performance and consistent care delivery across plans.

CMO FINANCIAL FILINGS				
	AMERIGROUP® (\$ Millions)	Peach State® (\$ Millions)	Wellcare® (\$ Millions)	Total- All CMOs (\$ Millions)
Total Revenue (less 5.5% Quality Assessment Fee paid back to DCH)	\$115.2	\$170.7	\$299.0	\$584.9
Total Medical Expense	\$103.1	\$145.6	\$234.2	\$482.9
Health Benefit Ratio (Medical Expense/Revenue)	89.5%	85.3%	78.3%	82.6%

Represents total CMO reported cost for medical services expenditure filed with Georgia Department of Insurance January-March 2008.

PREMIUM CAPITATION PAYMENTS TO CMOs				
	AMERIGROUP®	Peach State®	Wellcare®	Total - All CMOs
Current month	\$34,247,883	\$45,826,526	\$77,806,134	\$157,880,542
Retroactive adjustments (includes OB delivery payments for prior months and retroactive enrollment activity)	\$5,245,827	\$7,511,763	\$14,813,486	\$27,571,076
Quality Assessment Fee Paid to DCH	\$(2,198,383)	\$(2,971,165)	\$(5,168,146)	\$(10,337,694)
Net Payments	\$37,295,327	\$50,367,124	\$87,451,473	\$175,113,924

Represents DCH allocated payments to the CMO for total cost of services for January 2008.



PRIOR AUTHORIZATION DATA

# Days to PA Completion	AMERIGROUP®	Peach State®	Wellcare®
≤ 14 Days (contract requirement)	99.8%	99.9%	100.0%
≤10 Days	89.2%	99.0%	91.2%
≤ 5 Days	71.3%	91.5%	72.6%

Represents the percentage of prior-authorizations completed within the contract required timelines for July 2008.

ADDITIONAL PRIOR AUTHORIZATION DATA

Denial Rates	AMERIGROUP®	Peach State®	Wellcare®
DME	5.7%	0.7%	3.9%
Medical Inpatient	5.0%	10.9%	0.4%
Medical Outpatient	4.9%	3.9%	0.4%
Therapies	4.5%	7.7%	1.6%
Total	10.5%	4.5%	5.5%

Represents the percentage of prior-authorization requests that were determined to be not medically necessary.

TIMELY ACCESS PERFORMANCE REPORT

Provider Type	AMERIGROUP®	Peach State®	Wellcare®
PCPs (routine visits)	84.9%	98.86%	94.94%
PCP (adult sick visit)	83%	100%	84.49%
PCP (pediatric sick visit)	88.9%	98.70%	100%
Specialist (OBGYN)	100%	96.30%	96.72%
Mental Health Providers	97.6%	90.83%	88.92%
Urgent Care Providers	88.4%	100%	N/A

Represents CMO 2nd Quarter 2008 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.