



Robert G. (Bob) Bethell Joint
Committee on Home and Community
Based Services and KanCare Oversight
Date: 10-07-2013
Attachment: 27



Presentation to Robert G. (Bob) Bethel,
HCBS and the KanCare Oversight Committee
Laura Hopkins, CEO
Kansas Health Plan
October 7, 2013

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Who We Are: Amerigroup



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- Amerigroup, a wholly owned subsidiary of WellPoint, Inc., coordinates health care services for approximately 2.7 million members in 13 states including Kansas
- Together with WellPoint's affiliated health plans, we serve approximately 4.5 million beneficiaries of state sponsored health plans in 20 states
- We meet the health care needs of financially vulnerable Americans, seniors and people with disabilities
- We serve those on Medicaid, Medicare and other publicly funded health care programs
- We offer 17 years experience dedicated to government programs
- We build strong community relationships and alliances to support our local health plans

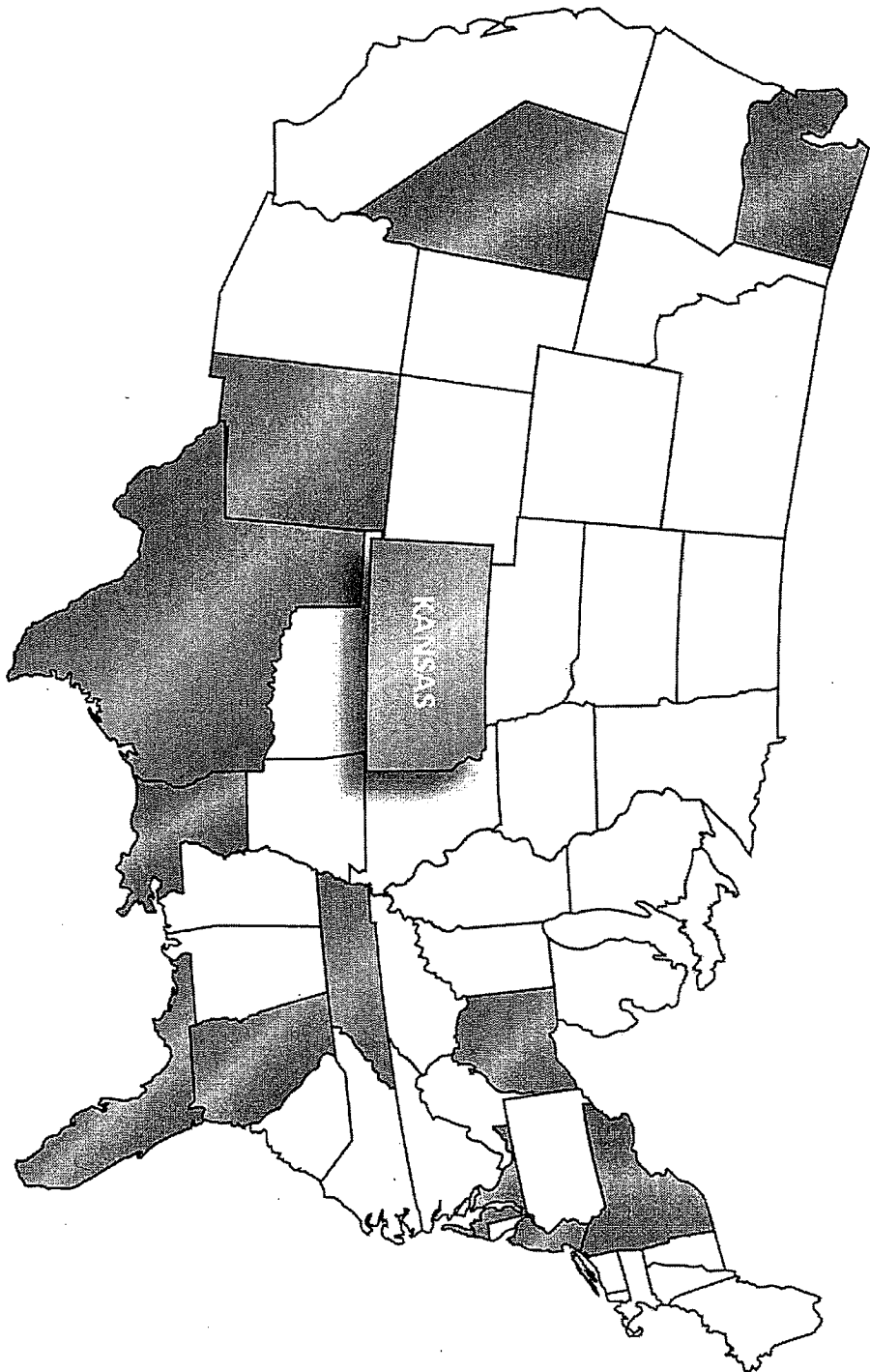
Our Mission

Provide Real Solutions for members who need a little help by making the health care system work better while keeping it more affordable for taxpayers.

**REAL SOLUTIONS mean
REAL RESULTS**

Where We Are

We coordinate health care services for approximately 2.7 million members in 13 states, including Kansas.



- Florida
- Georgia
- Kansas
- Louisiana
- Maryland
- Nevada
- New Jersey
- New Mexico
- New York
- Ohio
- Tennessee
- Texas
- Washington



The Kansas Call Center



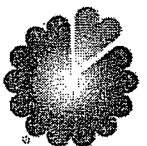
- Kansas Call Center – Cumulative through August, 2013
 - Total Member Calls: 140,212
 - Total Provider Calls: 75,557
 - Service: 97.8% (This is a performance guarantee. 95% of the calls are to be answered within 60 seconds)
- Top 3 category of calls (Member)
 - Find/change PCP – 35.3%
 - Member Benefit Inquiry – regular or VAS – 16.7%
 - Order ID card – 6.9%
- Top 3 category of calls (Provider)
 - Authorization new – 25.8%
 - Claim Status Inquiry – 23.6%
 - Authorization Status – 14.7%
- Care Management and Service Coordination Stats
 - LTSS face-to-face visits: 10,400 as of 9/1/13
 - Communicated & contracting with all 25 I/DD Pilot Providers
 - Organizing meetings with CDDO's & CSP to discuss contracting process

Claims Processing & Pay for Performance



- Over \$427.6 million paid as of October 1, 2013
- Currently, clean claims are being paid in an average of five (5) days of receipt

Access to Care



- Hospitals
 - Standard is one (1) provider within 30 miles
 - Currently meeting access standard, 100%
- Primary Care Physicians
 - Urban standard is one (1) provider within 20 miles
 - Rural standard is one (1) provider within 30 miles
 - Currently meeting access standard, 100%
- Continue to build Network and drive Provider Development

Q&A
www.amerigroup.com

Amerigroup KS

Update on Efforts with Hospitals/Providers

Amerigroup remains committed to working with all of our Kansas hospital partners to resolve outstanding issues. This commitment extends beyond immediate issues, but also to improving our business relationships with hospitals, and all KanCare providers, on an ongoing basis. Our commitment to having a strong business relationship involves improving responsiveness to provider issues and evaluating current business processes and where appropriate making adjustments to improve efficiency.

Amerigroup has been taking the following actions to improve service to providers, provide forums for discussing problems and work to resolve outstanding provider issues:

1. Conducting joint operating committee meetings with several of the larger hospitals and health systems operating in the State. These meetings are operational reviews to assess performance, clarify policies and procedures, identify payment problems and create actions plans for correction. Currently, Amerigroup conducts these with Children's Mercy Hospital, Via Christi and the University of Kansas Hospital on a monthly basis. Amerigroup will look to expand these to other providers through either on-site or telephonic means.
2. Amerigroup is evaluating business practices, system configuration and other policies on an ongoing basis to identify opportunities for improving service and reduce administrative burdens.
3. In addition to traditional provider relations visits, Amerigroup has instituted additional "Ask Amerigroup" call in forums for provider to contact Amerigroup with operational questions. These meetings are Monday, Wednesday and Thursday from 4:00-5:00 p.m. The phone number is 1-866-590-5055 and participant code 5494876. Our provider orientation calendar can be found at the following website:
https://providers.amerigroup.com/ProviderDocuments/KSKS_ProviderForumCalendarSept.pdf
4. Amerigroup is focused on identifying claims issues for small hospitals which can greatly impact cash flow. Amerigroup has performed a review of the configuration of payments for critical access hospitals with long term care units to insure these facilities are receiving proper payment.
5. Amerigroup has attempted to contract with all primary care physicians in order to create the most robust primary care network and the broadest access. Amerigroup has an open panel policy which allows members to access any in-network primary care physician without any penalty to the provider. Amerigroup believes in the core importance of primary care services for members and will work with any hospital on concepts that increase primary care access in an appropriate manner to reduce burdens on hospital emergency rooms.

6. Amerigroup is evaluating certain medical management policies to identify policies that lead to unnecessary administrative burden and are not beneficial to care management of our KanCare members. As we evaluate and identify those opportunities, we will make appropriate changes as necessary. In terms of prior authorization denials, Amerigroup has a denial rate on inpatient acute admissions of less than 1% of total IP admissions year to date. Amerigroup monitors turnaround times on prior authorizations. The following are the rates on hospital and inpatient reviews:

IP = 1.04 days

OP = 2.80 days

- i) Ninety nine percent (99%) of our inpatient reviews are done in 1 day or less. Seventy nine percent (79%) of our outpatient reviews are done in 2.8 days or less
- ii) To reiterate, Amerigroup does not require a prior authorization for any emergency room usage.

Amerigroup has a commitment to managing the KanCare program appropriately and in a sound manner on behalf of our customer, the State of Kansas. Some of these management techniques may result in friction with the providers at times, but Amerigroup will continue to focus on improving our provider service, timeliness and accuracy of payments and working collaboratively with our KS provider partners.