

MAC Binder Section 10 –Operational Status & UM Reports

Table of Contents with Document Summary

Located online at <http://chfs.ky.gov/dms/mac.htm>

1- KY MMIS Operational Status Report_AUG2016:

This report is contractual deliverable produced by the Department’s Fiscal Agent on a monthly basis which summarizes operational duties performed by the Fiscal Agent. It provides statistics related to claims, encounters loads and change orders. In addition, it provides a status update as to the inventory for FFS financial adjustments and the provider relations team activates.

2- KY MMIS Operational Status Report_SEP2016:

This report is contractual deliverable produced by the Department’s Fiscal Agent on a monthly basis which summarizes operational duties performed by the Fiscal Agent. It provides statistics related to claims, encounters loads and change orders. In addition, it provides a status update as to the inventory for FFS financial adjustments and the provider relations team activates.

3- UM Status Report Aug_2016:

This report is produced on a monthly basis and provides statistics related to the operational duties of utilization management.

4- UM Status Report Sep_2016:

This report is produced on a monthly basis and provides statistics related to the operational duties of utilization management.



Operational Status Report

Kentucky MMIS Project

*Cabinet for Health and Family Services
Department for Medicaid Services
August 2016*

Cabinet for Health and Family Services Department for Medicaid Services

<u>Role:</u>	<u>Name:</u>
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1 Executive Summary

	August	Page Number
Claims Processed	859,466	Page 17
Total Dollars Paid	\$206,457,911.79	Page 17
Claims Paid	616,006	Page 17
Claims Denied	222,286	Page 17
% Denied Claims	27.00%	Page 17
Average Claims Held in Cash Management	84,520	N/A
Average Dollars Held in Cash Management	\$14,540,156.49	N/A
Capitation Financial Transactions	3,060,310	Page 18
Capitation Financial Payments	\$597,636,042.10	Page 18
Suspended Claims	9,617	Page 23
Total Suspended Claims > 90 Days	376	Page 23
Provider Services Calls Received	10,201	Page 29
Provider Services Current Service Level %	98%	Page 29

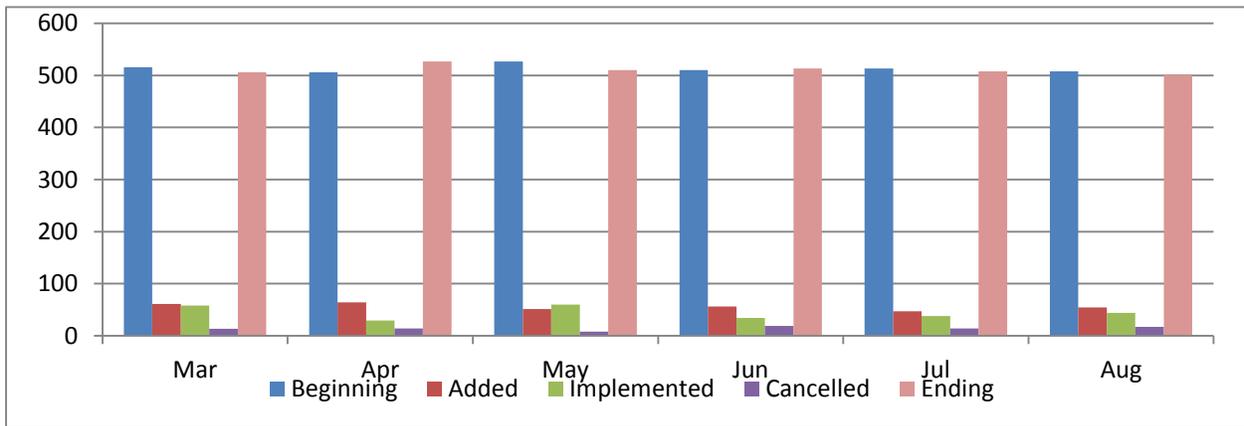
Encounter Load Statistics

Managed Care Organizations (MCOs)						
	March 2016	April 2016	May 2016	June 2016	July 2016	August 2016
Coventry	788,376	1,242,233	938,931	854,582	1,022,098	858,956
Humana	541,715	696,067	535,764	523,743	677,094	528,575
Kentucky Spirit	0	0	0	0	0	0
Passport (R03)	30	13	9	220	11	22
Passport R31	1,124,059	1,445,416	1,172,869	1,149,018	1,413,287	1,112,689
WellCare	2,235,253	2,445,720	1,819,595	2,309,758	2,191,430	1,651,544
Anthem	389,414	361,191	423,582	407,263	488,401	390,145
Other						
Transportation Encounters	525,675	13*	271,175	316,505	59,513	289,848
Magellan Pharmacy Claims	377,162	242,853	244,348	227,748	228,441	353,481
Totals	5,981,684	6,433,506	5,406,273	5,788,837	6,080,275	5,185,260

*Delay in received transportation encounters. Increases expected in May.

1.1 Change Order and Defect Statistics

Change Orders / Defects Inventory	Mar	Apr	May	Jun	Jul	Aug
Beginning	516	506	527	510	513	508
Added	61	64	51	56	47	54
Implemented	58	29	60	34	38	44
Cancelled	13	14	8	19	14	17
Ending	506	527	510	513	508	501



1.2 Change Order and Defect Statistics (continued)

August 2016	Change Orders		Defects		Total	Comments
	Open	On Hold	Open	On Hold		
DMS Priority	127	69	1	0	197	
Federally Mandated	22	0	0	0	22	23 open are included in the Priority list.
Non-Priority	216	20	46	0	282	
Totals	365	89	47	0	501	

*The priority list consists of 220 Change Orders & Defects.

August 2016	Change Orders			Defects		
	Added	Implemented	Cancelled	Added	Implemented	Cancelled
DMS Priority	18	27	7	1	1	2
Federally Mandated	1	0	3	0	0	0
Non-Priority	22	12	0	12	4	5
Totals	41	39	10	13	5	7

2 Unplanned System Outages

A Breakdown Of The Downtime		
Date	Time	Reason For Downtime
		There were no unplanned system outages in August 2016.

2.1 Billable Hours Usage Summary (Contract Year 2016)

Month	BILLABLE	UNDECIDED	CCB Approved	Need CCB Review
Dec 2015	2,272.75		2,272.75	
Jan 2016	1,114.00		1,114.00	
Feb 2016	1,575.00		1,575.00	
Mar 2016	1,528.00		1,528.00	
Apr 2016	1,311.75		1,311.75	
May 2016	1,514.00		1,514.00	
Jun 2016	1,893.75	25.50	1,893.75	25.50
Jul 2016	1,572.00	52.00	1,570.00	54.00
Aug 2016	1,683.50	213.50	1,676.75	220.25
Sep 2016				
Oct 2016				
Nov 2016				

* Time entry is finalized on the 14th day of the following month.

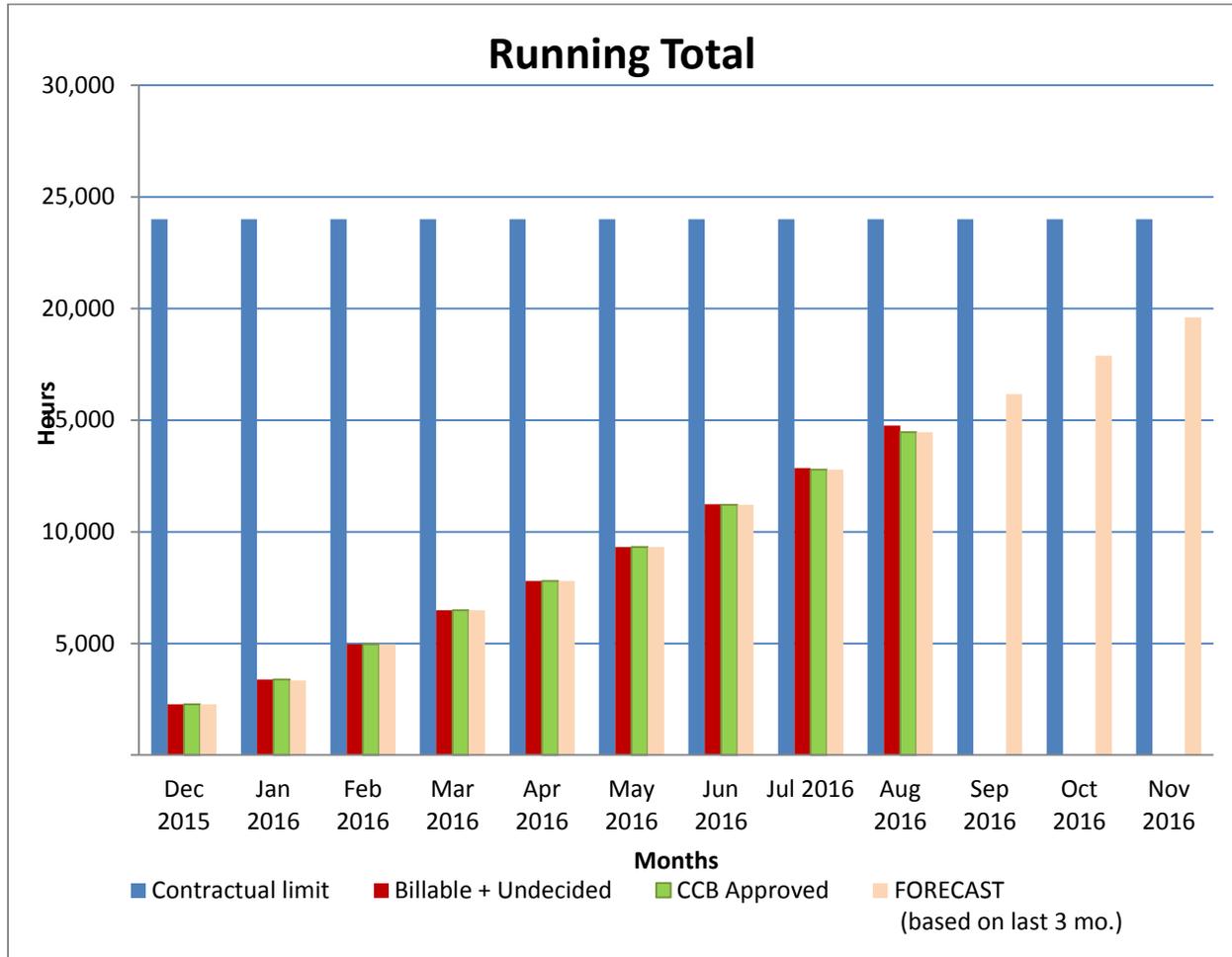
**These totals EXCLUDE hours logged against HBE - Realtime project, Provider Portal, ORP, and T-MSIS 2.0.

2.2 Running Total (Contract Year 2016)

Month	Contractual limit	Billable + Undecided	CCB Approved	Forecast (based on last 3 months)	Need CCB Review
Dec 2015	24,000.00	2,272.75	2,272.75	2,272.75	0.00
Jan 2016	24,000.00	3,386.75	3,386.75	3,350.25	0.00
Feb 2016	24,000.00	4,961.75	4,961.75	4,961.75	0.00
Mar 2016	24,000.00	6,489.75	6,489.75	6,489.75	0.00
Apr 2016	24,000.00	7,801.50	7,801.50	7,801.50	0.00
May 2016	24,000.00	9,315.50	9,315.50	9,315.50	0.00
Jun 2016	24,000.00	11,234.75	11,209.25	11,209.25	25.50
Jul 2016	24,000.00	12,858.75	12,779.25	12,779.25	79.50
Aug 2016	24,000.00	14,755.75	14,456.00	14,456.00	299.75
Sep 2016	24,000.00			16,169.50	
Oct 2016	24,000.00			17,883.00	
Nov 2016	24,000.00			19,596.50	

* Time entry is finalized on the 14th day of the following month.

**These totals EXCLUDE hours logged against HBE - Realtime project, Provider Portal, ORP, and T-MSIS 2.0.



3 Monthly Ad hoc Requests

3.1 Inventory Summary

	Beginning of Month	Received This Month	Closed This Month	DMS Hold	Ending Inventory
Type A	0	0	0	0	0
Type B	0	2	2	0	0
Type C	1	17	18	0	0
Type D	0	1	0	0	1
Type E	0	0	0	0	0
Unspecified	0	2	1	0	1
Total	1	22	21	0	2

Type A – completed correctly within twenty-four (24) hours of receipt

Type B – completed correctly and delivered within forty-eight (48) hours of request

Type C – completed correctly and delivered within seven (7) business days of request

Type D – completed correctly and delivered within time frame established by DMS (greater than seven (7) business days)

Type E – Emergency reports completed correctly within two (2) hours of submitted request.

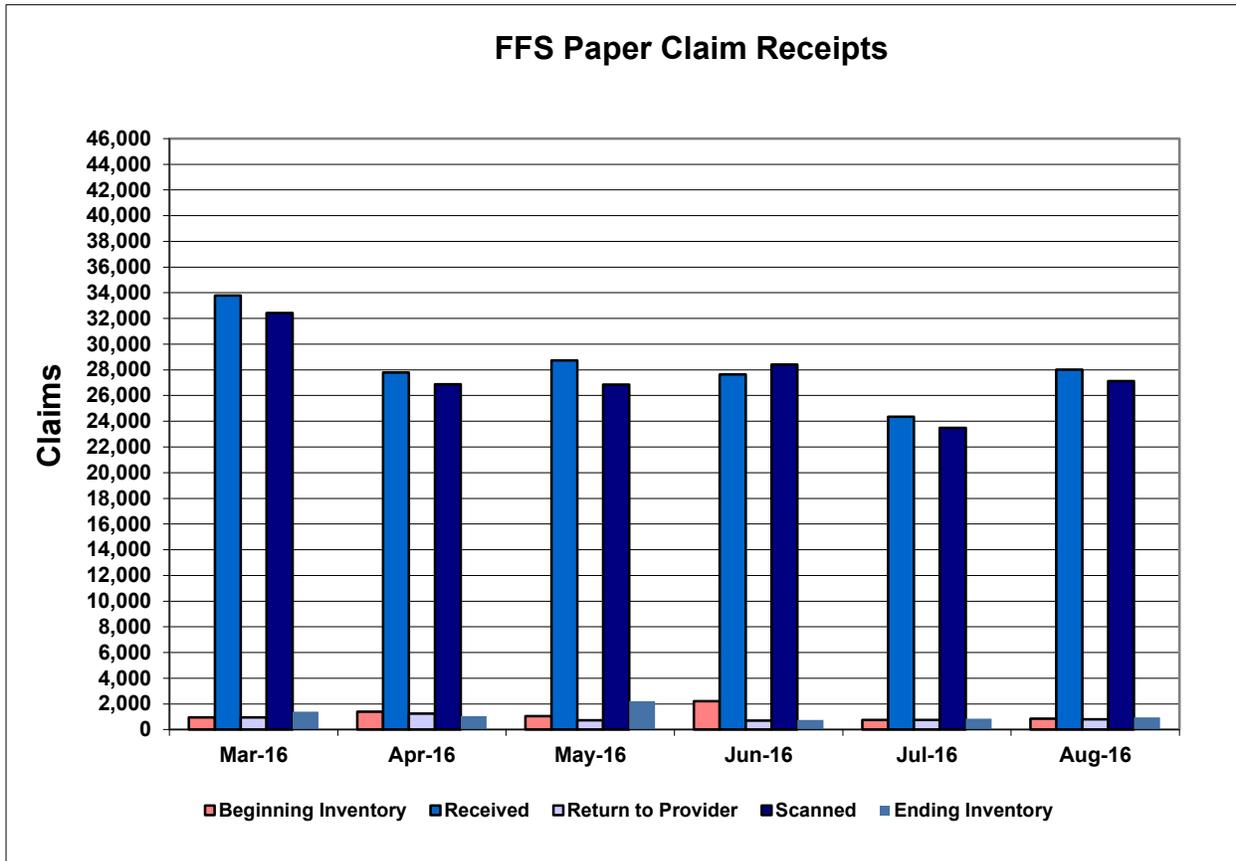
3.2 Inventory Detail

CO #	Type	Requested By	Status	Date Requested	Date Completed	Description
26877	C	Minedi, Laxmi	Completed	20160725	20160804	APA 2016 Yearly Adhoc
26891	C	Patel, Parul	Completed	20160801	20160804	Nursing Facility Report
26893	C	Keeling, Michelle	Completed	20160802	20160804	Med Ctr Albany
26894	C	Keeling, Michelle	Completed	20160802	20160804	Terri Istre
26895	C	Keeling, Michelle	Completed	20160802	20160804	James Morris
26903	C	Hawkins, Kim	Completed	20160804	20160808	Womack NO PAID DATE - PLEASE IGNORE PAID DATE
26910	D	Moccia, Don	In Progress	20160805	20160906	MCO Risk Adjusted Rates Effective 01-Oct-2016
26911	C	Wells, Phyllis	Cancelled	20160805		Escrow 10 yrs
26912	C	Kodumuri, Sudhakar	Completed	20160805	20160809	Encounter Claims with Edit 1955 for the given PROV
26918	C	Bentley, Tracy	Completed	20160808	20160809	Slaughter Brown
26937	C	Bentley, Tracy	Completed	20160811	20160811	Access 07/1/2015 - 6/30/16 Use 8/1/15
26938	C	Bentley, Tracy	Completed	20160811	20160811	Blessed Assurance 04/1/2015 - 6/30/16
26939	C	Battles, Laura	Completed	20160811	20160811	Cumberland River Homes 07/01/2015 - 6/
26940	C	Bentley, Tracy	Completed	20160812	20160812	Modern Care 090115-073116
26941		Patel, Parul	Completed	20160812	20160812	Re-run 26866

CO #	Type	Requested By	Status	Date Requested	Date Completed	Description
26942	C	Patel, Parul	Completed	20160812	20160819	RE-RUN 26941-Need ones with AR older than 1999
26955	C	Kodumuri, Sudhakar	Cancelled	20160818		Providers with Edit 1955 encounters
26956	B	Kodumuri, Sudhakar	Completed	20160818	20160818	Provider-Correspondence-address
26966	C	Bentley, Tracy	Completed	20160823	20160825	NR 09012015-08012016
26968	B	Kodumuri, Sudhakar	Completed	20160823	20160823	Provider-Taxonomy count
26973	C	Mays, Jada	Completed	20160825	20160829	Hickman Fulton
26952	C	McCarter, Barbara	Completed	20160829	20160830	Crossover Claims ORR 16-305
26989		Givens, Cassie	In Progress	20160829		Group 8 Adhoc reports

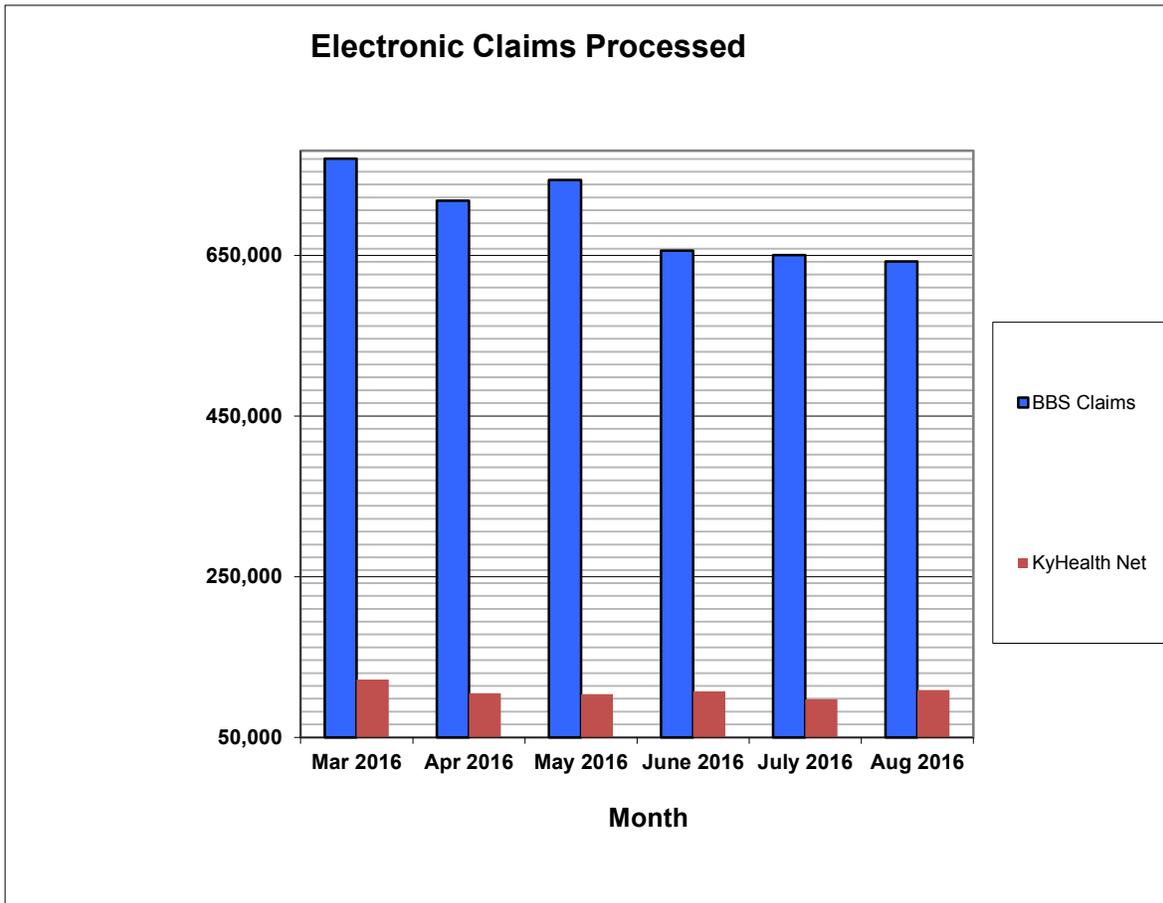
4 FFS Paper Claim Receipt Statistics

Mailroom	Beginning Inventory	Received	RTP	Scanned	Ending Inventory	Oldest Claim
March 2016	959	33,798	946	32,420	1,391	0 days
April 2016	1,391	27,789	1,244	26,889	1,047	0 days
May 2016	1,047	28,743	726	26,844	2,220	0 days
June 2016	2,220	27,643	696	28,426	741	0 days
July 2016	741	24,349	760	23,478	852	0 days
August 2016	852	28,013	793	27,120	952	0 days



5 Electronic Claims Processed

	Mar 2016	Apr 2016	May 2016	June 2016	July 2016	Aug 2016
Bulletin Board System Claims Processed	770,083	718,039	743,629	655,701	650,180	642,364
Kentucky HealthNet Claims Processed	121,767	104,911	103,534	107,095	97,321	108,698



6 Monthly FFS Claim Totals by Media

Begin Date	End Date
08/01/2016	08/31/2016

TOTAL	Denied Claims	Paid Claims		Suspense Claims
	Billed Amount	Billed Amount	Paid Amount	Billed Amount
Electronic	\$362,935,455.18	\$1,185,676,286.97	\$230,110,027.95	\$8,963,443.09
Paper	\$29,313,681.15	\$20,288,830.72	-\$23,652,116.16	\$4,979,767.55
TOTAL:	\$392,249,136.33	\$1,205,965,117.69	\$206,457,911.79	\$13,943,210.64

7 Monthly Claims Operations

7.1 FFS Monthly Financial Cycle Summary

Category	March 2016	April 2016	May 2016	June 2016	July 2016	August 2016
Paid Claims	684,806	848,209	730,509	672,745	1,020,909	616,006
Denied Claims	263,179	317,447	245,215	225,191	271,005	222,286
Total Adjudicated Claims	947,985	1,165,656	975,724	897,936	1,291,914	838,292
Adjustments	20,889	23,168	16,814	16,568	32,851	16,174
Total Claims	968,874	1,188,824	992,538	914,504	1,324,765	859,466
Suspended/Re-suspended Claims	12,179	11,450	16,594	11,401	10,534	9,617
% of Denied Claims	27.76%	27.23%	25.13%	25.08%	21.00%	27.00%
Avg \$ per Claim	\$326.13	\$267.83	\$283.63	\$279.89	\$279.53	\$335.16
Claim Payment Amount	\$223,338,783.59	\$227,175,764.20	\$207,192,377.54	\$188,295,835.02	\$285,378,473.15	\$206,457,911.79
(+) Payouts	\$364,482.35	\$209,955.22	\$683,384.24	\$5,079,983.93	\$1,851,779.05	\$2,463,244.42
(-) Recoupments	-\$9,256,804.70	-\$7,339,226.74	-\$5,975,822.44	-\$3,080,594.50	-\$7,150,658.11	-\$4,049,582.34
Check Issue	\$214,446,461.24	\$220,046,492.68	\$201,899,939.34	\$190,295,224.45	\$280,079,594.09	\$204,871,573.87
Capitation Payment	\$531,263,481.64	\$620,190,218.34	\$598,727,619.22	\$562,841,805.68	\$560,196,032.51	\$597,636,042.10
Total Paid	\$745,709,942.88	\$840,236,711.02	\$800,627,558.56	\$753,137,030.13	\$840,275,626.60	\$802,507,615.97

Note: Claim Payment Amount divided by Paid Claims = Avg \$ per Claim

Total Denied Claims divided by Total Adjudicated Claims = % of Denied Claims

Category	March 2015	April 2015	May 2015	June 2015	July 2015	August 2015
Paid Claims	599,843	624,966	789,455	618,633	827,104	640,795
Denied Claims	223,942	236,772	296,749	299,303	290,123	252,366
Total Adjudicated Claims	823,785	861,738	1,086,204	917,936	1,117,227	893,161
Adjustments/Claim Credits	41,680	30,390	27,948	23,685	23,496	16,905
Total Claims	865,465	992,128	1,114,152	941,621	1,140,723	910,066
Suspended/Resuspended Claims	7,164	6,918	5,640	3,642	6,625	7,071
% of Denied Claims	27.2%	27.5%	27.3%	32.6%	26.0%	28.3%
Avg \$ per Claim	\$323.70	\$318.16	\$287.27	\$199.94	\$375.98	\$325.46
Claim Payment Amount	\$194,170,637.57	\$198,837,220.02	\$226,788,905.99	\$123,690,963.84	\$310,971,690.66	\$208,554,580.94
(+) Payouts	\$5,740,397.70	\$23,436,110.49	\$15,775,802.87	\$101,725.98	\$3,123,573.43	\$1,063,387.11
(-) Recoupments	-\$3,209,892.21	-\$3,605,675.97	-\$4,640,725.09	-\$2,110,336.65	-\$5,879,817.10	-\$12,855,448.33
Check Issue	\$196,701,143.06	\$218,667,654.54	\$237,923,983.77	\$121,682,353.17	\$308,215,446.99	\$196,762,519.72
Capitation Payment	\$609,102,993.64	\$595,031,112.93	\$536,339,601.66	\$581,476,592.43	\$590,931,213.01	\$593,023,719.57
Total Paid	\$805,804,136.70	\$813,698,767.47	\$774,263,585.43	\$703,158,945.60	\$899,146,660.00	\$789,786,239.29

Note: Claim Payment Amount divided by Paid Claims = Avg \$ per Claim

Total Denied Claims divided by Total Adjudicated Claims = % of Denied Claims

7.2 Monthly MCO & NEMT Capitations

Begin Date	End Date
08/01/2016	08/31/2016

MCO	Regular Capitations		Reconciliation (Recoup & Payout) Capitations		Totals	
	Count	Amount	Count	Amount	Count	Amount
AETNA	261,714	\$96,787,594.49	106,431	\$8,732,226.36	368,145	\$105,519,820.85
ANTHEM	106,125	\$43,806,283.90	37,095	\$6,576,281.07	143,220	\$50,382,564.97
HUMANA	127,129	\$59,435,693.68	50,178	\$7,775,315.96	177,307	\$67,211,009.64
KENTUCKY SPIRIT						
NEMT	1,246,360	\$8,752,368.50	172,930	\$918,918.30	1,419,290	\$9,671,286.80
PASSPORT	283,301	\$134,326,369.32	92,041	\$14,629,635.59	375,342	\$148,956,004.91
WELLCARE	427,279	\$196,602,370.35	146,940	\$19,292,984.58	574,219	\$215,895,354.93
Sum:	2,451,908	\$539,710,680.24	608,402	\$57,925,361.86	3,060,310	\$597,636,042.10

7.2 Monthly MCO & NEMT Capitations (continued)

NEMT	Cap Transactions	Amount Paid
AUDUBON AREA COMMUNITY SERVICES INC/GRITS	56,344	\$445,500.72
PENNYRILE ALLIED COMSERVICES, INC	65,686	\$405,070.64
AUDUBON AREA COMMUNITY SERVICES INC	66,894	\$368,525.39
L.K.L.P. C.A.C., INC REGION 4	79,852	\$527,377.45
LKLP CAC INC REGION 5	112,073	\$1,065,147.97
FEDERATED TRANSPORTATION SERVICES	262,735	\$1,942,937.05
BLUE GRASS COMMUNITY ACTION AGENCY INC	98,212	\$486,636.49
LKLP CAP INC REGION 9	104,554	\$554,952.40
FEDERATED TRANSPORTATION SERVICES	77,716	\$438,796.90
FEDERATED TRANSPORTATION SERVICES OF THE BLUEGRASS	80,568	\$508,836.24
RURAL TRANSIT ENTERPRISES	149,279	\$1,281,684.50
LKLP COMMUNITY ACTION	99,543	\$689,390.69
SANDY VALLEY TRANSPORTATION	71,002	\$468,967.10
LKLP CAC INC REGION 15	72,961	\$351,312.03
LICKING VALLEY COMMUNITY ACTION PROGRAM INC	21,871	\$136,151.23
TOTAL	1,419,290	\$9,671,286.80

7.3 FFS Adjudicated Original Claims (By Claim)

Begin Date	End Date
08/01/2016	08/31/2016

Paper Claims	March 2016	April 2016	May 2016	June 2016	July 2016	August 2016
Paid	8,505	8,918	7,141	7,208	11,922	6,130
Denied	14,223	15,215	9,907	11,799	14,049	9,395
Total	22,728	24,133	17,048	19,007	25,971	15,525
% of Total Adjudicated Claims	2.48%	2.07%	1.75%	2.12%	2.00%	2.00%
% of Paper Denied Claims	62.58%	63.05%	58.11%	62.08%	54.00%	61.00%

Note: Total Adjudicated Paper Claims divided by Total Adjudicated Claims = % of Total Adjudicated Claims. Total Denied Paper Claims divided by Total Adjudicated Claims = % of Denied Claims.

Electronic Claims	March 2016	April 2016	May 2016	June 2016	July 2016	August 2016
Paid	656,167	839,291	723,368	665,537	1,008,987	609,876
Denied	237,128	302,232	235,308	213,392	256,956	212,891
Total	893,295	1,141,523	958,676	878,929	1,265,943	822,767
% of Total Adjudicated Claims	97.52%	97.93%	98.25%	97.88%	98.00%	98.00%
% of Electronic Denied Claims	26.55%	26.48%	24.55%	24.28%	20.00%	26.00%

Note: Total Adjudicated Electronic Claims divided by Total Adjudicated Claims = % of Total Adjudicated Claims. Total Denied electronic Claims divided by Total Adjudicated Claims = % of Denied Claims.

7.4 Monthly FFS Top Ten Procedure Codes

Begin Date	End Date
08/01/2016	08/31/2016

Procedure	Description	Member Count	Claim Count	Amount Paid
T2016	HABIL RES WAIVER PER DIEM	3,860	33,248	\$20,583,516.09
S5108	HOMECARE TRAIN PT 15 MIN	9,315	59,591	\$17,881,451.27
T1015	CLINIC SERVICE	93,216	134,614	\$11,293,714.63
99199	SPECIAL SERVICE/PROC/REPORT	4,412	4,528	\$7,764,886.08
T2021	DAY HABIL WAIVER PER 15 MIN	4,759	31,894	\$5,554,866.52
T2022	CASE MANAGEMENT, PER MONTH	14,799	17,036	\$4,619,366.30
H0004	ALCOHOL AND/OR DRUG SERVICES	3,718	10,377	\$3,709,602.31
S5100	ADULT DAYCARE SERVICES 15MIN	2,877	21,540	\$3,141,625.72
97535	SELF CARE MNGMENT TRAINING	2,046	7,583	\$2,210,048.49
T1019	PERSONAL CARE SER PER 15 MIN	601	4,193	\$2,201,689.41

7.5 Monthly FFS Top Ten Diagnosis Codes

Diagnosis	Description	Member Count	Claim Count	Amount Paid
F70	MILD INTELLECTUAL DISABILITIES	5,188	38,304	\$16,917,382.79
F71	MODERATE INTELLECTUAL DISABILITIES	4,209	31,202	\$15,115,036.88
F73	PROFOUND INTELLECTUAL DISABILITIES	624	3,214	\$11,575,925.63
F72	SEVERE INTELLECTUAL DISABILITIES	1,010	6,963	\$10,701,719.04
F840	AUTISTIC DISORDER	3,587	23,579	\$8,744,075.54
F911	CONDUCT DISOR, CHILDHOOD-ONSET TYPE	4,224	4,299	\$7,410,190.91
G309	ALZHEIMER'S DISEASE, UNSPECIFIED	1,491	2,941	\$7,150,897.58
F0390	UNSPC DEMENTIA W/O BEHAVIORAL DIST	1,850	3,518	\$6,330,967.96
G809	CEREBRAL PALSY, UNSPECIFIED	1,499	8,344	\$6,005,562.20
J449	COPD UNSPECIED	5,709	11,970	\$4,390,275.36

7.6 Monthly MCO Top Ten Procedure Codes

Begin Date	End Date
08/01/2016	08/31/2016

Procedure	Description	Member Count	Claim Count	Amount Paid
99213	OFF/OUTPATIENT VISIT	187,392	250,555	\$9,670,655.95
99284	EMERGENCY DEPT VISIT	45,596	57,081	\$8,532,645.93
99283	EMERGENCY DEPT VISIT	52,740	66,883	\$6,379,917.65
99285	EMERGENCY DEPT VISIT	24,806	30,714	\$5,512,095.49
99214	OFFICE/OUTPATIENT VISIT EST	77,605	91,929	\$5,000,931.33
T2023	TARGETED CASE MGMT PER MNTH	10,989	13,320	\$4,571,802.72
90837	PSYTX PT&/FAMILY 60 MINUTES	22,736	38,310	\$4,039,475.16
H2019	THER BEHAV SVC, PER 15 MIN	752	4,085	\$2,964,970.60
74177	CT ABD & PELV W/CONTRAST	7,236	9,219	\$2,769,108.26
A0120	NONER TRANSPORT MINI-BUS	8812	108,080	\$2,405,831.77

Note: Data taken from encounters received from the Managed Care Organizations

7.7 Monthly MCO Top Ten Diagnosis Codes

Diagnosis	Description	Member Count	Claim Count	Amount Paid
R69	ILLNESS, UNSPECIFIED	20,029	289,988	\$7,304,439.32
F1120	OPIOID DEPENDENCE, UNCOMPLICATED	12,857	45,068	\$6,289,549.97
A419	SEPSIS, UNSPECIFIED ORGANISM	916	1,833	\$4,643,181.42
Z3800	SNGL LIVEBORN INFANT, DEL VAGINALLY	2,636	4,016	\$4,499,221.44
Z3801	SNGL LIVEBORN INFANT, DEL CESAREAN	1,332	2,155	\$4,472,833.37
Z5111	ENCOUNTER ANTINEOPLASTIC CHEMO	778	1,358	\$3,774,937.36
Z00129	ENCNTR ROUTINE CHILD HLTH EXAM W/O ABNORMAL FINDINGS	33,737	36,477	\$3,340,478.39
R079	CHEST PAIN, UNSPECIFIED	12,011	18,760	\$3,107,651.91
R0789	OTHER CHEST PAIN	6,063	8,427	\$2,334,586.24
M545	LOW BACK PAIN	17,616	25,312	\$2,165,271.08

Note: Data taken from encounters received from the Managed Care Organizations

7.8 Monthly FFS Top Ten Denial Reasons (By Detail Line)

Error	Description	Number of Denials	% of Top Ten
4021	No Coverage for Billed Procedure	18,834	16.2%
1010	Rendering Prov not a Member of Billing Grp	17,701	17.1%
2017	Services Covered Under Member's MCO Plan	15,529	12.2%
4804	No Contract for Billed Rev Code	9,970	8.8%
3317	This Service was not Approved by Medicare	9,096	10.1%
2003	Member Ineligible on Detail Date of Service	8,898	7.1%
1955	Cannot Determine Medicaid NBR for Billing Prov	7,751	7.2%
4407	Bnft Plan/Aid Categ Restriction for Cov Rev Code	7,647	6.3%
5001	Exact Duplicate	6,980	8.4%
268	Billed Amount Missing	6,719	6.6%
Totals		108,495	63.1%

Total Denied Details – 171,898

Note: Total # of top ten denials (108,495) divided by total denied details (171,898) = % of top ten denials (63.1%)

7.9 Monthly FFS Top Ten Suspense Reasons (By Detail Line)

Error	Description	Number of Failures	% of Top Ten
4405	Unable to Assign Provider Contract	3,414	24.6%
2001	Member ID Number not on File Recycle	3,325	23.9%
3305	Member Requires Valid Pt Liability for DOS	1,522	11.0%
3395	Hospice Eligibility	771	5.5%
3001	PA Not Found on Database	724	5.2%
3597	MFP Assignment Plan & Program Code Conflict	363	2.6%
5001	Exact Duplicate	339	2.4%
2503	Member Covered by Medicare B	327	2.4%
4014	No Pricing Segment on File	293	2.1%
1046	Facility Provider is not Eligible	289	2.1%
Totals		11,367	81.8%

Total Suspended Details – 13,896

Note: Total # of top ten failures (11,367) divided by total suspended details (13,896) = % of top ten suspense (81.8%)

7.9 FFS Suspended Original Claims by Age (By Claim)

Category	March 2016		April 2016		May 2016		June 2016		July 2016		August 2016	
	Details	Pct.	Details	Pct.								
0-30 days	11,683	95.93	10,851	94.77	15,770	95.03	10,771	94.48	9,857	93.57	8,968	93.25
31-60 days	83	.68	106	.93	382	2.30	180	1.58	202	1.92	164	1.71
61-90 days	34	.28	76	.66	48	.30	38	.33	75	.71	109	1.13
91+ days	379	3.11	417	3.64	394	2.37	412	3.61	400	3.80	376	3.91
Total	12,179		11,450		16,594		11,401		10,534		9,617	

7.10 FFS Claims Suspense Over 30 Days by Responsible Unit (By Claim)

Category	March 2016	April 2016	May 2016	June 2016	July 2016	August 2016	Oldest Julian Date
Resolutions	7	14	196	0	6	15	16-209
Med.Review	4	13	27	41	83	107	16-113
TPL	0	0	81	0	0	0	0
Adjustments	0	0	0	0	0	0	0
Recycle	0	0	35	2	1	2	16-103
DMS	485	572	485	587	587	525	12-128
Total	496	599	824	630	677	649	

8 Monthly Third-Party Liability

8.1 FFS Third-Party Liability Monthly Activity

Third Party Liability	Begin Inv	Received	Worked	To DMS	Ending Inventory	Oldest Date
PA40-Kames/Eligibles with Other Ins.	991	3,671	3,416	0	1,246	12 days
CS40-Child Support	0	724	724	0	0	0 days
SSI-Local Offices	0	0	0	0	0	0 days
TPL Edits	327	1,443	1,375	0	395	18 days
Accident/Trauma Leads	0	0	0	0	0	0 days
DMS Attorney	0	0	0	0	0	0 days
RUSH Attorney	0	0	0	0	0	0 days
HP Attorney	28	178	169	0	37	4 days
TPL Checks	36	96	97	0	35	3 days
TPL Mail	1,127	5,716	5,799	0	1,044	14 days
KHIPP	0	371	371	0	0	0 days
Total	2,509	12,199	11,951	0	2,757	

9 Monthly Finance/Adjustments

9.1 Monthly FFS Financial – Accounts Receivable

Category	Beginning Inventory	Received	Keyed	Return to Provider	To DMS	On Hold	Ending Inventory	Age Oldest AR
Accounts Receivable Set-up	0	55	55	0	0	0	0	0 days
Payouts	0	29	29	0	0	0	0	0 days
Accounts Receivable Updates	0	50	50	0	0	0	0	0 days
Accounts Receivable Transfers	0	7	7	0	0	0	0	0 days
Total	0	141	141	0	0	0	0	0 days

9.2 Monthly FFS Financial - Checks

Category	Beginning	Received	Completed	Ending	Age Oldest Check
Provider Warrant	0	6	6	0	0 days
HP Financial	103	662	582	183	2 days
DMS Financial	52	129	119	62	2 days
Total	155	797	707	245	

9.3 Monthly FFS Financial – Adjustments

Category	Beginning Inventory	Received	Completed	Returns	Ending Inventory	Age Oldest Adj
Professional	2	109	109	2	0	0 days
Institutional	5	56	61	0	0	0 days
Voids	25	273	295	1	2	1 day
Total	32	438	465	3	2	

9.4 Monthly FFS Financial - Mass Adjustments

Category	Beginning Inventory	Received (plus)	Released (minus)	Deleted (minus)	Zero Claims Pulled (minus)	Ending Inventory	On Hold	DMS Review
Mass Adjustment (region 52)	544	71	46	358	18	193	193	193
SE Processed Adjustment (region 58)	0	0	0	0	0	0	0	0
Suppl Pymt Mass Adjustment (region 88)	4	1	5	0	0	0	0	0
Total	548	72	51	358	18	193	193	193

10 Provider Relations

10.1 Provider Field Representatives

10.1.1 Provider Visits

August 8, 2016

Kelly Gregory, HPE Provider Field Representative, conducted a virtual room visit with Trinity Support Services, Inc. on August 8, 2016. The provider requested a virtual room visit to learn how to navigate KYHealth Net. During the visit we reviewed the following panels: Provider status, member, prior authorization, RA viewer, and claims. We also reviewed kymmis.com and chfs.ky.gov/dms websites. Those who attended the virtual room visit were: Chassidy Turner

10.2 Conference Calls (Calls Greater Than 30 Minutes)

August 1, 2016

Vicky Hicks, HPE Provider Field Representative, conducted a conference call with Holly Hill Children's Services on August 1, 2016. The provider requested a conference call to discuss how to follow up on claims submission. Those who attended the conference call were: Frances.

August 16, 2016

Kelly Gregory, HPE Provider Field Representative, conducted a conference call with T.J. Samson Home Medical on August 16, 2016. The provider requested a conference call to review submitting claims timely and span dating claims. Those who attended the conference call were: Debra.

August 18, 2016

Kelly Gregory and Vicky Hicks, HPE Provider Field Representatives, conducted a conference call for Nursing Facilities on August 18, 2016. This conference call was conducted to answer questions about the upcoming changes to the nursing facility type of bill. No one attended the conference call.

August 23, 2016

Kelly Gregory and Vicky Hicks, HPE Provider Field Representatives, conducted a conference call for Nursing Facilities on August 23, 2016. This conference call was conducted to answer questions about the upcoming changes to the nursing facility type of bill. No one attended the conference call.

10.3 Conference Calls (Calls Greater Than 30 Minutes)

August 25, 2016

Kelly Gregory, HPE Provider Field Representative, conducted a conference call with Lake Cumberland Neurosurgical Clinic PSC on August 25, 2016. The provider requested a conference call to review claim denials due to taxonomy numbers. Those who attended the conference call were: Kia Wilson, Angie Maybrier, Gail Story, and Brianne Hardin

August 30, 2016

Vicky Hicks, HPE Provider Field Representative, conducted a conference call with Jennifer Millen's office on August 30, 2016. The provider requested a conference call to discuss how to access KYHealth Net and determine Medicaid member eligibility. Those who attended the conference call were: Mecca.

August 31, 2016

Vicky Hicks, HPE Provider Field Representative, conducted a conference call with Drs. Borders and Associates on August 31, 2016. The provider requested a conference call to discuss how Physician Assistants are paid and to review the Crossover Coding Sheet. Those who attended the conference call were: Alice Morgan, Teresa Walker, and CJ Jones, DMS.

10.4 Association Meetings

There were no association meetings in the month of August.

10.5 Provider Contacts

Provider Calls	160
Provider E-mails	695
Total	855

Total number of calls and e-mails between Provider Field Representatives and Providers during the month.

10.6 Provider Workshops

There were no Provider Workshops in the month of August.

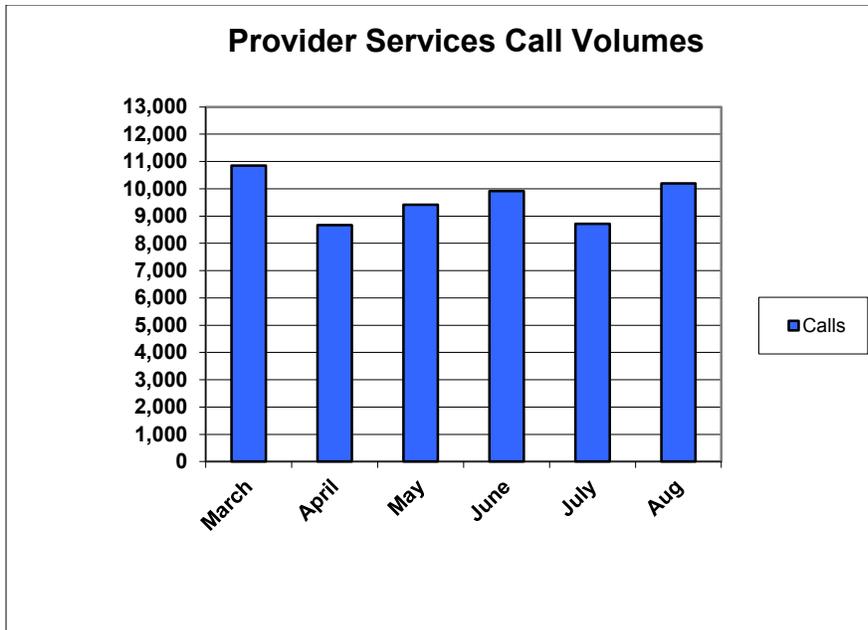
10.7 Provider Services

10.7.1 Provider Services

Category	March 2016	April 2016	May 2016	June 2016	July 2016	August 2016
% Service Level	95%	96%	95%	95%	97%	98%
Abandoned Calls	548	323	486	497	301	216
Avg Speed Ans	1.28	1.49	1.58	1.90	1.39	.42
Incoming Calls	10,845	8,671	9,418	9,912	8,720	10,201
Paper Correspondence	390	379	395	380	439	459
E-Mail Correspondence	321	225	204	210	206	246
Fax	18	4	5	0	1	5
Total*	11,574	9,279	10,022	10,502	9,366	10,911
HP Callbacks	104	125	184	136	62	80

*Total of Calls, Paper Correspondence, E-Mail Correspondence, and Faxes

Formula for % Service Level: Number of incoming calls minus abandoned calls divided by total number of incoming calls = % Service Level.



10.7.2 Top 5 Provider Calls

1. Claim Status
2. Member Services/Member Calls
3. Billing Help
4. Prior Authorizations
5. Check Amounts

10.7.3 Notable Topics

1. Reason for claim denial or suspended. How to get the MCO to void the claim in order for Medicaid to process the claim?
2. Which MCO the member has & MAP 552 questions? Calls from providers wanting to know how to get the member's file corrected to show whether the member is traditional Medicaid or managed care. Calls from members wanting to know if they are eligible for Medicaid and which MCO are they enrolled and how to change the MCO.
3. Timely filing – CMS 1500 Crossover EOMB Form (is this form completed if Medicare pays or if Medicare denies).
4. What is the PA number and how do I correct the overlapping dates?
5. Questions about the Attestation or enhanced checks and questions about payouts and recoupments. Questions about the EHR checks.

10.8 Commonwealth Training

10.8.1 Current Activities

The following instructor-led training classes were offered by HPE in August 2016:

- **Member/TPL Subsystem** (August 2, 2016) 0 attended
 - There were no attendees
- **Provider Subsystem** (August 2, 2016) 0 attended
 - There were no attendees
- **Prior Authorization Subsystem** (August 4, 2016) 3 attended
 - Amy S Perry, Division of Program Quality & Outcomes
 - Karen Mahoney, Division of Program Quality & Outcomes
 - Crystal Myatt, Division of Program Quality & Outcomes
- **Reference Subsystem** (August 4, 2016) 2 attended
 - Karen Mahoney, Division of Program Quality & Outcomes
 - Crystal Myatt, Division of Program Quality & Outcomes
- **Claims Subsystem** (August 9, 2016) 0 attended
 - There were no attendees
- **Financial Subsystem** (August 11, 2016) 0 attended
 - There were no attendees
- **OnBase Application** (August 11, 2016) 0 attended
 - There were no attendees
- **Encounters** (August 16, 2016) 0 attended
 - There were no attendees

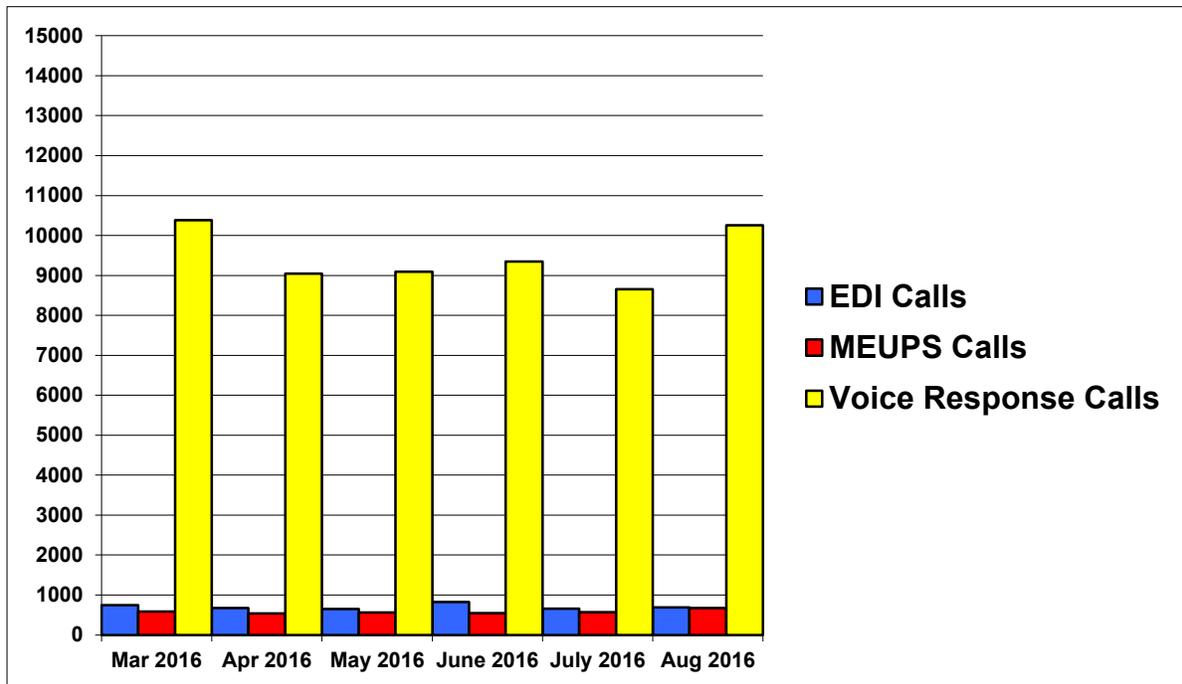
Staff members' supervisors are sent a confirmation via email of attendance.

*Effective January 1, 2016 -- Mechanics of Claims Processing and Claim Edits and Audits have been incorporated with Claims Subsystem class. Rules have been incorporated with the Reference Subsystem class.

11 EDI Customer/Provider Interaction

11.1 Electronic Data Interchange Calls Received

Category	Mar 2016	Apr 2016	May 2016	June 2016	July 2016	Aug 2016
EDI Calls	743	677	650	822	661	687
MEUPS Calls	586	535	561	550	574	672
Voice Response Calls	10,385	9,045	9,096	9,348	8,655	10,254



Expanded Call Data

Month	EDI Calls	Abandoned Calls	Avg. Speed of Answer	Avg. Talk Time	
March	743	9	:11	2:43	99%
April	677	7	:12	2:46	99%
May	650	5	:06	2:52	99%
June	822	11	:14	2:49	99%
July	661	6	:08	2:50	99%
August	687	1	:09	2:28	99%

Expanded Call Data (continued)

Month	MEUPS Calls	Abandoned Calls	Avg. Speed of Answer	Avg. Talk Time	
March	586	0	:01	2:10	100%
April	535	0	:02	2:09	100%
May	561	1	:01	2:11	99%
June	550	1	:02	2:14	99%
July	574	0	:01	2:01	100%
August	672	0	:02	2:09	100%

Month	Voice Response Calls	Abandoned Calls	Avg. Speed of Answer	Avg. Talk Time	
March	10,385	546	:01	1:57	95%
April	9,045	517	:01	2:06	95%
May	9,096	562	:01	2:01	94%
June	9,348	523	:01	1:58	94%
July	8,655	477	:01	1:56	94%
August	10,254	549	:01	1:53	95%

*Formula for % Service Level: Number of incoming calls minus abandoned calls divided by total number of incoming calls = % Service Level.

EDI Top 5 calls:

1. Request to repost 835s
2. Verify electronic file transmission
3. Request to repost 999s
4. Confirm setup of MAP 380s/246s
5. Questions about 837 file structure

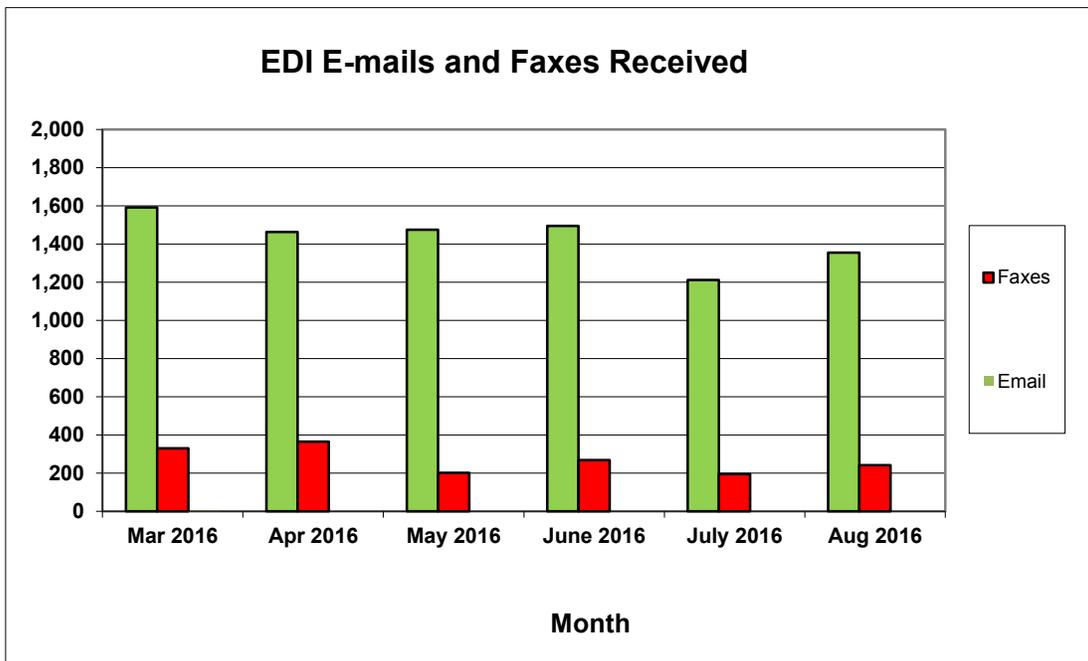
MEUPS Top 5 calls:

1. Password resets (*see table below*)
2. Request to change Administrator of account
3. PIN release request to set up new account
4. Medicaid contract has end-dated, resulting in no access to KyHealth Net
5. How to navigate member eligibility

Category	Mar 2016	Apr 2016	May 2016	June 2016	July 2016	Aug 2016
Password Resets Received via phone	370	361	366	325	346	335

11.2 EDI E-mails and Faxes Received

Category	Mar 2016	Apr 2016	May 2016	Jun 2016	Jul 2016	Aug 2016
E-mails Received	1,592	1,463	1,475	1,495	1,211	1,356
E-mails Answered	1,590	1,460	1,473	1,495	1,209	1,355
Faxes Received	329	365	201	268	195	242
Faxes Answered	326	358	201	268	194	240



EDI Top 5 E-mail Requests:

1. Password resets *(see table below)*
2. Status of MAP 380
3. Status of 835
4. Research
5. Verify electronic file transmission

Category	Mar 2016	Apr 2016	May 2016	June 2016	July 2016	Aug 2016
Password Resets Received via email	315	305	295	250	228	365

EDI Top 5 Fax Requests:

1. PIN release forms* *(see table below)*
2. Change of Administrator forms* *(see table below)*
3. MAP 380s and 246s
4. 835s
5. Trading Partner Agreements

Category	Mar 2016	Apr 2016	May 2016	Jun 2016	Jul 2016	Aug 2016
PINs Received via fax	121	179	95	115	111	108
Admins Received via fax	132	176	146	117	68	182

*All PIN release and Change of Administrator responses are outbound via e-mail only.



Operational Status Report

Kentucky MMIS Project

*Cabinet for Health and Family Services
Department for Medicaid Services
September 2016*

Cabinet for Health and Family Services Department for Medicaid Services

<u>Role:</u>	<u>Name:</u>
Author	Janet Penn
Reviewer	Donna Sims
HP Enterprise Services Management	Richard DeGise, Account Executive
Client	Commissioner Stephen P. Miller Medicaid Systems Director Stacy Fish
DELIVERABLE TITLE: Operational Status Report	DATE SUBMITTED: October 14, 2016
FILE NAME: 2016_09_KY_MMIS_Operational_Status_Report.docx	AUTHORING TOOL: Microsoft Word 2007

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1 Executive Summary

	September	Page Number
Claims Processed	1,108,989	Page 17
Total Dollars Paid	\$234,921,546.56	Page 17
Claims Paid	792,978	Page 17
Claims Denied	271,596	Page 17
% Denied Claims	25.51%	Page 17
Average Claims Held in Cash Management	83,870	N/A
Average Dollars Held in Cash Management	\$13,690,539.84	N/A
Capitation Financial Transactions	2,836,642	Page 18
Capitation Financial Payments	\$560,546,748.04	Page 18
Suspended Claims	10,289	Page 23
Total Suspended Claims > 90 Days	461	Page 23
Provider Services Calls Received	8,915	Page 30
Provider Services Current Service Level %	99%	Page 30

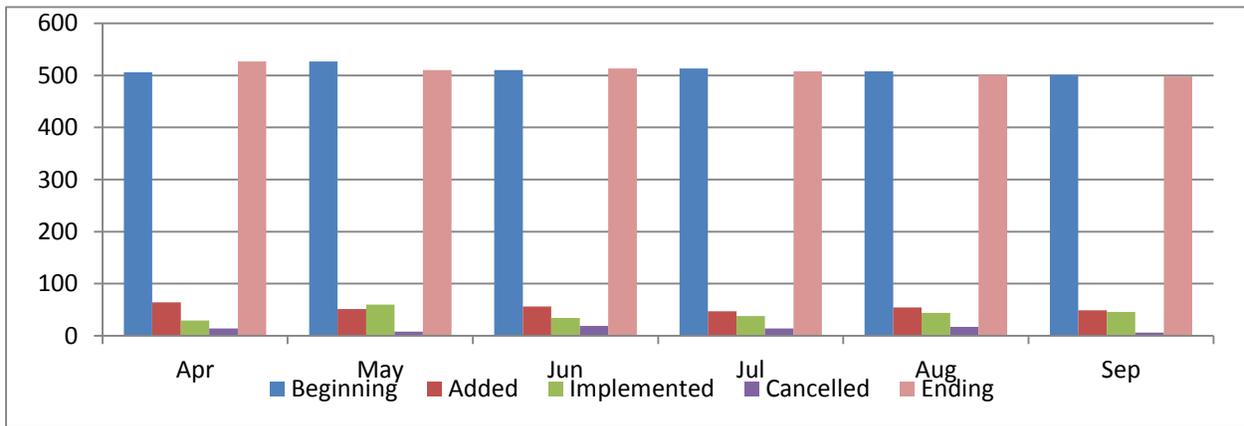
Encounter Load Statistics

Managed Care Organizations (MCOs)						
	April 2016	May 2016	June 2016	July 2016	August 2016	September 2016
Coventry	1,242,233	938,931	854,582	1,022,098	858,956	871,069
Humana	696,067	535,764	523,743	677,094	528,575	544,944
Kentucky Spirit	0	0	0	0	0	0
Passport (R03)	13	9	220	11	22	21
Passport R31	1,445,416	1,172,869	1,149,018	1,413,287	1,112,689	1,032,189
WellCare	2,445,720	1,819,595	2,309,758	2,191,430	1,651,544	1,718,587
Anthem	361,191	423,582	407,263	488,401	390,145	412,721
Other						
Transportation Encounters	13*	271,175	316,505	59,513	289,848	593,292
Magellan Pharmacy Claims	242,853	244,348	227,748	228,441	353,481	235,209
Totals	6,433,506	5,406,273	5,788,837	6,080,275	5,185,260	5,408,032

*Delay in received transportation encounters. Increases expected in May.

1.1 Change Order and Defect Statistics

Change Orders / Defects Inventory	Apr	May	Jun	Jul	Aug	Sep
Beginning	506	527	510	513	508	501
Added	64	51	56	47	54	49
Implemented	29	60	34	38	44	46
Cancelled	14	8	19	14	17	6
Ending	527	510	513	508	501	498



1.2 Change Order and Defect Statistics (continued)

September 2016	Change Orders		Defects		Total	Comments
	Open	On Hold	Open	On Hold		
DMS Priority	120	71	2	0	193	
Federally Mandated	18	0	0	0	18	17 open are included in the Priority list.
Non-Priority	216	20	51	0	287	
Totals	354	91	53	0	498	

*The priority list consists of 210 Change Orders & Defects.

September 2016	Change Orders			Defects		
	Added	Implemented	Cancelled	Added	Implemented	Cancelled
DMS Priority	21	32	1	0	0	0
Federally Mandated	1	6	2	0	0	0
Non-Priority	10	2	1	17	6	2
Totals	32	40	4	17	6	2

2 Unplanned System Outages

A Breakdown Of The Downtime		
Date	Time	Reason For Downtime
		There were no unplanned system outages in September 2016.

2.1 Billable Hours Usage Summary (Contract Year 2016)

Month	BILLABLE	UNDECIDED	CCB Approved	Need CCB Review
Dec 2015	2,273.75		2,272.75	
Jan 2016	1,114.00		1,114.00	
Feb 2016	1,575.00		1,575.00	
Mar 2016	1,528.00		1,528.00	
Apr 2016	1,311.75		1,311.75	
May 2016	1,514.00		1,514.00	
Jun 2016	1,893.75	25.50	1,893.75	25.50
Jul 2016	1,579.00	37.00	1,579.00	37.00
Aug 2016	1,717.00	184.00	1,716.50	184.50
Sep 2016	1,574.75	107.00	1,533.25	148.50
Oct 2016				
Nov 2016				

* Time entry is finalized on the 14th day of the following month.

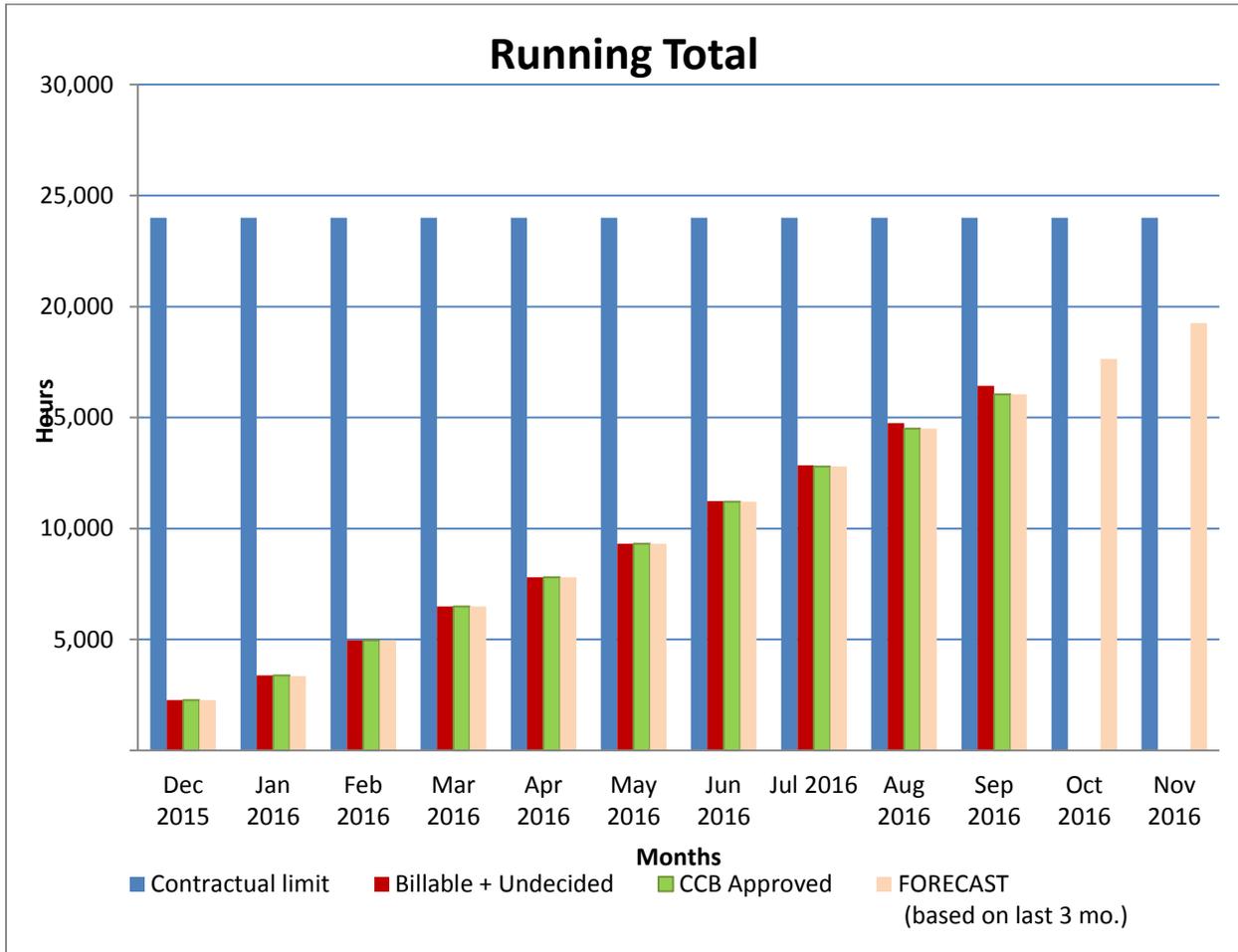
**These totals EXCLUDE hours logged against HBE - Realtime project, Provider Portal, ORP, and T-MSIS 2.0.

2.2 Running Total (Contract Year 2016)

Month	Contractual limit	Billable + Undecided	CCB Approved	Forecast (based on last 3 months)	Need CCB Review
Dec 2015	24,000.00	2,273.75	2,272.75	2,272.75	0.00
Jan 2016	24,000.00	3,387.75	3,386.75	3,350.25	0.00
Feb 2016	24,000.00	4,962.75	4,961.75	4,961.75	0.00
Mar 2016	24,000.00	6,490.75	6,489.75	6,489.75	0.00
Apr 2016	24,000.00	7,802.50	7,801.50	7,801.50	0.00
May 2016	24,000.00	9,316.50	9,315.50	9,315.50	0.00
Jun 2016	24,000.00	11,235.75	11,209.25	11,209.25	25.50
Jul 2016	24,000.00	12,851.75	12,788.25	12,788.25	62.50
Aug 2016	24,000.00	14,752.75	14,504.75	14,504.75	247.00
Sep 2016	24,000.00	16,434.50	16,038.00	16,038.00	395.50
Oct 2016	24,000.00			17,647.58	
Nov 2016	24,000.00			19,257.17	

* Time entry is finalized on the 14th day of the following month.

**These totals EXCLUDE hours logged against HBE - Realtime project, Provider Portal, ORP, and T-MSIS 2.0.



3 Monthly Ad hoc Requests

3.1 Inventory Summary

	Beginning of Month	Received This Month	Closed This Month	DMS Hold	Ending Inventory
Type A	0	2	2	0	0
Type B	0	4	4	0	0
Type C	0	7	6	0	1
Type D	1	0	1	0	0
Type E	0	1	1	0	0
Not Specified	1	0	0	0	1
Total	2	14	14	0	2

Type A – completed correctly within twenty-four (24) hours of receipt

Type B – completed correctly and delivered within forty-eight (48) hours of request

Type C – completed correctly and delivered within seven (7) business days of request

Type D – completed correctly and delivered within time frame established by DMS (greater than seven (7) business days)

Type E – Emergency reports completed correctly within two (2) hours of submitted request.

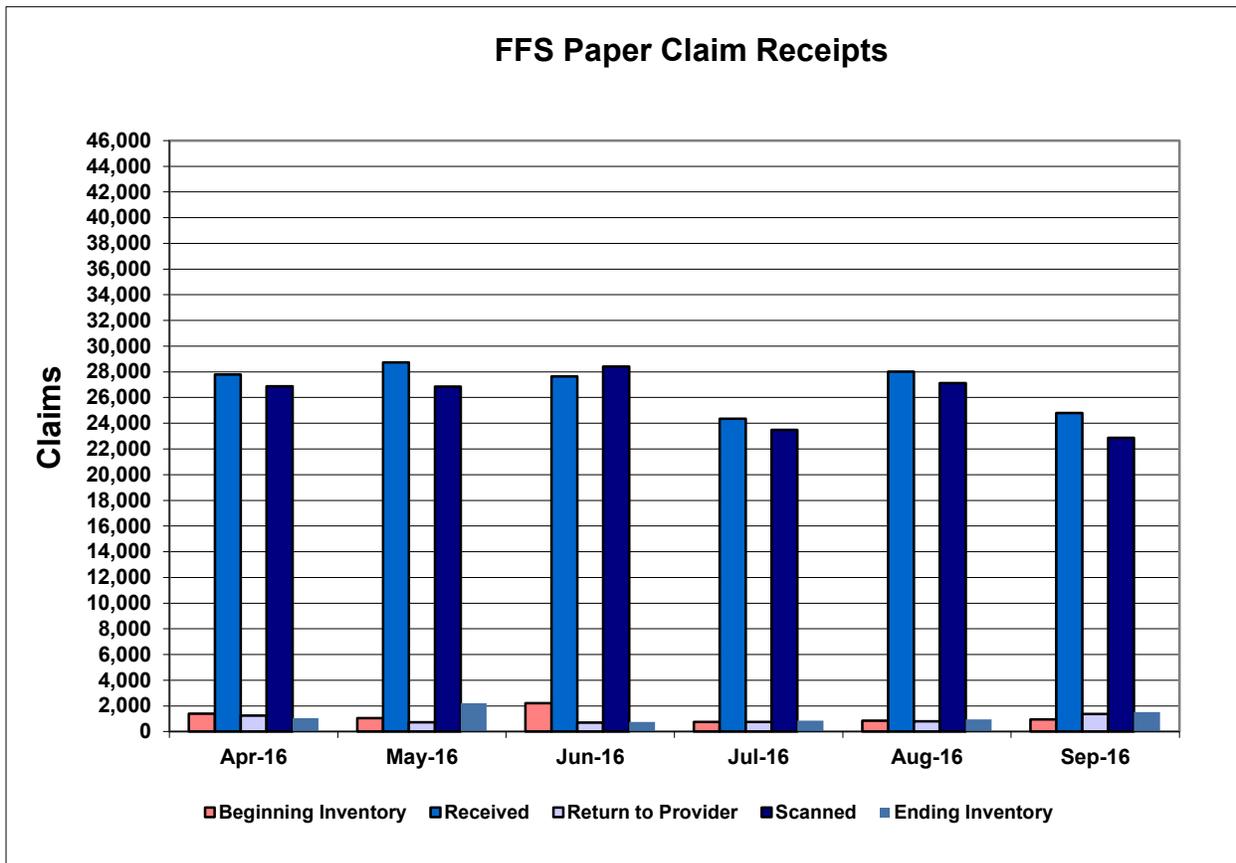
3.2 Inventory Detail

CO #	Type	Requested By	Status	Date Requested	Date Completed	Description
26910	D	Moccia, Don	Completed	20160805	20160906	MCO Risk Adjusted Rates Effective 01-Oct-2016
26989		Givens, Cassie	In Progress	20160829		Group 8 Adhoc reports
27025	B	Patel, Parul	Cancelled	20160908		Claims with Adj/DTL date greater than Paid date
27032	B	Patel, Parul	Completed	20160912	20160912	Rerun 25478 -AR > 1500
27040	E	Patel, Parul	Completed	20160914	20160914	Patient liability for members
27051	B	Patel, Parul	Completed	20160915	20160915	Active Providers:Re-run 26334 (Excluding labs)
27062	C	Patel, Parul	Completed	20160919	20160919	Missing county- rerun #25808 from July- to Current
27064	B	Patel, Parul	Completed	20160919	20160919	Re-reun 26941- DME and HH active providers
27065	C	Wells, Phyllis	Completed	20160919	20160920	DOJ - Lee County Ambulance Service
27059	C	Patel, Parul	Completed	20160920	20160922	Re-run previous adhoc(s) for owners,NPI,contract
27067	C	Mays, Jada	Completed	20160920	20160920	Fikhman
26856	A	McCarter, Barbara	Completed	20160927	20160927	Crossover Claims ORR 16-269
27077	C	Mays, Jada	Completed	20160927	20160927	Fresenius
27078	C	Mays, Jada	Completed	20160927	20160927	Specialty Psychiatric Hospital
27080	A	Minedi, Laxmi	Completed	20160928	20160928	Members with rate cell ZC103

CO #	Type	Requested By	Status	Date Requested	Date Completed	Description
27089	C	Moccia, Don	In Progress	20160930	20161007	SFY 2018 MCO Rate Setting

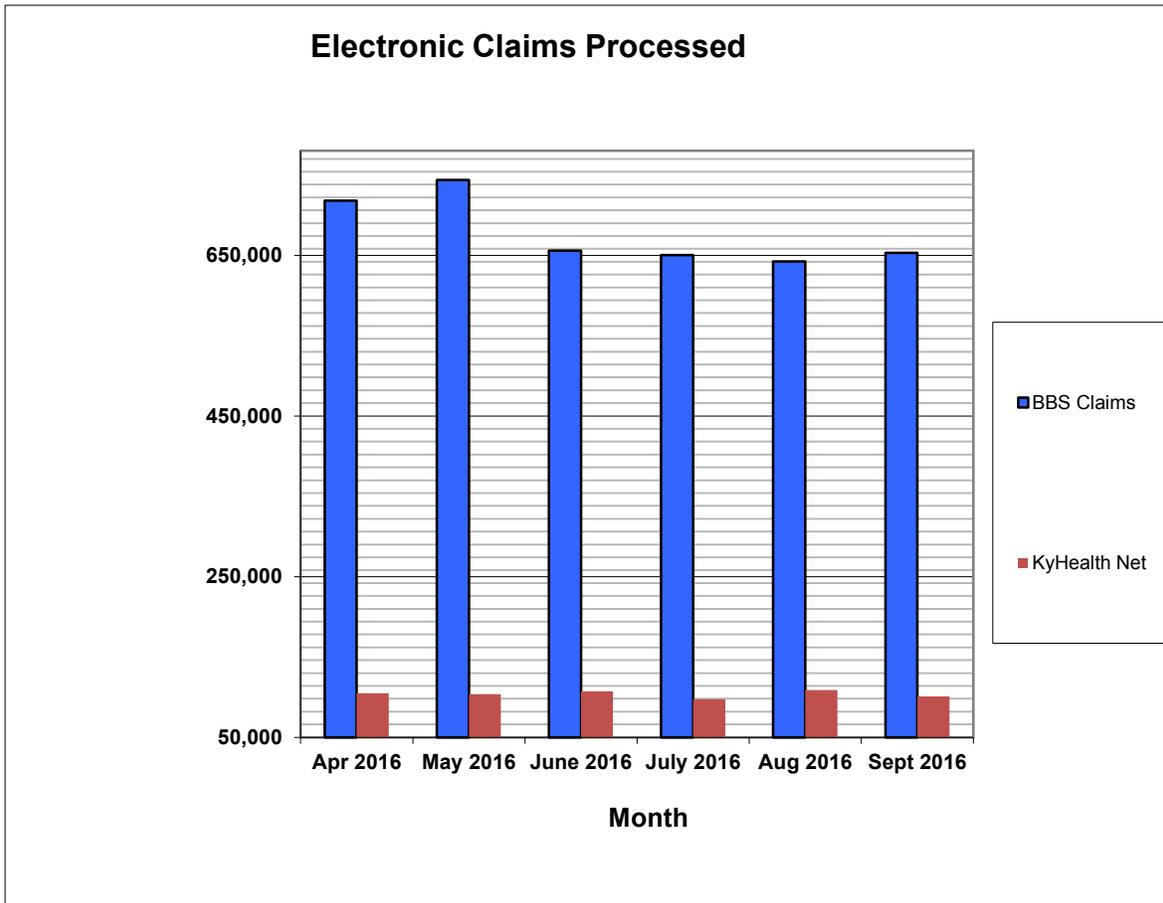
4 FFS Paper Claim Receipt Statistics

Mailroom	Beginning Inventory	Received	RTP	Scanned	Ending Inventory	Oldest Claim
April 2016	1,391	27,789	1,244	26,889	1,047	0 days
May 2016	1,047	28,743	726	26,844	2,220	0 days
June 2016	2,220	27,643	696	28,426	741	0 days
July 2016	741	24,349	760	23,478	852	0 days
August 2016	852	28,013	793	27,120	952	0 days
September 2016	952	24,806	1,367	22,870	1,521	0 days



5 Electronic Claims Processed

	Apr 2016	May 2016	June 2016	July 2016	Aug 2016	Sept 2016
Bulletin Board System Claims Processed	718,039	743,629	655,701	650,180	642,364	653,196
Kentucky HealthNet Claims Processed	104,911	103,534	107,095	97,321	108,698	100,847



6 Monthly FFS Claim Totals by Media

Begin Date	End Date
09/01/2016	09/30/2016

TOTAL	Denied Claims	Paid Claims		Suspense Claims
	Billed Amount	Billed Amount	Paid Amount	Billed Amount
Electronic	\$504,116,777.60	\$1,560,659,295.58	\$236,641,792.65	\$13,809,444.51
Paper	\$37,630,263.58	\$21,604,516.01	-\$1,720,246.09	\$3,457,265.58
TOTAL:	\$541,747,041.18	\$1,582,263,811.59	\$234,921,546.56	\$17,266,710.09

7 Monthly Claims Operations

7.1 FFS Monthly Financial Cycle Summary

Category	April 2016	May 2016	June 2016	July 2016	August 2016	September 2016
Paid Claims	848,209	730,509	672,745	1,020,909	616,006	792,978
Denied Claims	317,447	245,215	225,191	271,005	222,286	271,596
Total Adjudicated Claims	1,165,656	975,724	897,936	1,291,914	838,292	1,064,574
Adjustments	23,168	16,814	16,568	32,851	16,174	44,415
Total Claims	1,188,824	992,538	914,504	1,324,765	859,466	1,108,989
Suspended/Re-suspended Claims	11,450	16,594	11,401	10,534	9,617	10,289
% of Denied Claims	27.23%	25.13%	25.08%	21.00%	27.00%	25.51%
Avg \$ per Claim	\$267.83	\$283.63	\$279.89	\$279.53	\$335.16	\$296.25
Claim Payment Amount	\$227,175,764.20	\$207,192,377.54	\$188,295,835.02	\$285,378,473.15	\$206,457,911.79	\$234,921,546.56
(+) Payouts	\$209,955.22	\$683,384.24	\$5,079,983.93	\$1,851,779.05	\$2,463,244.42	\$25,441,580.10
(-) Recoupments	-\$7,339,226.74	-\$5,975,822.44	-\$3,080,594.50	-\$7,150,658.11	-\$4,049,582.34	-\$6,373,142.10
Check Issue	\$220,046,492.68	\$201,899,939.34	\$190,295,224.45	\$280,079,594.09	\$204,871,573.87	\$253,989,984.56
Capitation Payment	\$620,190,218.34	\$598,727,619.22	\$562,841,805.68	\$560,196,032.51	\$597,636,042.10	\$560,546,748.04
Total Paid	\$840,236,711.02	\$800,627,558.56	\$753,137,030.13	\$840,275,626.60	\$802,507,615.97	\$814,536,732.60

Note: Claim Payment Amount divided by Paid Claims = Avg \$ per Claim

Total Denied Claims divided by Total Adjudicated Claims = % of Denied Claims

Category	April 2015	May 2015	June 2015	July 2015	August 2015	September 2015
Paid Claims	624,966	789,455	618,633	827,104	640,795	512,938
Denied Claims	236,772	296,749	299,303	290,123	252,366	222,843
Total Adjudicated Claims	861,738	1,086,204	917,936	1,117,227	893,161	735,781
Adjustments/Claim Credits	30,390	27,948	23,685	23,496	16,905	15,123
Total Claims	992,128	1,114,152	941,621	1,140,723	910,066	750,904
Suspended/Resuspended Claims	6,918	5,640	3,642	6,625	7,071	2,366
% of Denied Claims	27.5%	27.3%	32.6%	26.0%	28.3%	30.3%
Avg \$ per Claim	\$318.16	\$287.27	\$199.94	\$375.98	\$325.46	\$344.32
Claim Payment Amount	\$198,837,220.02	\$226,788,905.99	\$123,690,963.84	\$310,971,690.66	\$208,554,580.94	\$176,613,542.46
(+) Payouts	\$23,436,110.49	\$15,775,802.87	\$101,725.98	\$3,123,573.43	\$1,063,387.11	\$312,480.72
(-) Recoupments	-\$3,605,675.97	-\$4,640,725.09	-\$2,110,336.65	-\$5,879,817.10	-\$12,855,448.33	-\$83,716,530.54
Check Issue	\$218,667,654.54	\$237,923,983.77	\$121,682,353.17	\$308,215,446.99	\$196,762,519.72	\$93,209,492.64
Capitation Payment	\$595,031,112.93	\$536,339,601.66	\$581,476,592.43	\$590,931,213.01	\$593,023,719.57	\$590,843,367.06
Total Paid	\$813,698,767.47	\$774,263,585.43	\$703,158,945.60	\$899,146,660.00	\$789,786,239.29	\$684,052,859.70

Note: Claim Payment Amount divided by Paid Claims = Avg \$ per Claim

Total Denied Claims divided by Total Adjudicated Claims = % of Denied Claims

7.2 Monthly MCO & NEMT Capitations

Begin Date	End Date
09/01/2016	09/30/2016

MCO	Regular Capitations		Reconciliation (Recoup & Payout) Capitations		Totals	
	Count	Amount	Count	Amount	Count	Amount
AETNA	262,344	\$97,035,416.06	65,272	\$2,267,929.36	327,616	\$99,303,345.42
ANTHEM	107,386	\$44,237,293.38	25,413	\$2,078,273.72	132,799	\$46,315,567.10
HUMANA	128,325	\$62,028,131.28	33,575	\$2,433,333.77	161,900	\$64,461,465.05
KENTUCKY SPIRIT						
NEMT	1,257,032	\$8,827,914.26	72,028	\$200,953.50	1,329,060	\$9,028,867.76
PASSPORT	285,543	\$134,900,549.22	62,192	\$4,746,193.92	347,735	\$139,646,743.14
WELLCARE	430,247	\$195,530,230.03	105,730	\$6,260,529.54	535,977	\$201,790,759.57
Sum:	2,470,877	\$542,559,534.23	365,765	\$17,987,213.81	2,836,642	\$560,546,748.04

7.2 Monthly MCO & NEMT Capitations (continued)

NEMT	Cap Transactions	Amount Paid
AUDUBON AREA COMMUNITY SERVICES INC/GRITS	54,131	\$427,156.02
PENNYRILE ALLIED COMSERVICES, INC	61,012	\$376,953.00
AUDUBON AREA COMMUNITY SERVICES INC	63,261	\$344,791.41
L.K.L.P. C.A.C., INC REGION 4	71,973	\$473,293.10
LKLP CAC INC REGION 5	104,773	\$992,488.17
FEDERATED TRANSPORTATION SERVICES	251,408	\$1,850,272.74
BLUE GRASS COMMUNITY ACTION AGENCY INC	88,812	\$432,427.88
LKLP CAP INC REGION 9	99,266	\$522,796.50
LKLP COMMUNITY ACTION	1	-\$6.00
FEDERATED TRANSPORTATION SERVICES	70,079	\$386,129.81
FEDERATED TRANSPORTATION SERVICES OF THE BLUEGRASS	72,629	\$459,213.68
LKLP COMMUNITY ACTION	1	-\$6.30
RURAL TRANSIT ENTERPRISES	140,941	\$1,211,171.90
LKLP COMMUNITY ACTION	93,944	\$647,964.09
SANDY VALLEY TRANSPORTATION	67,640	\$446,614.75
LKLP CAC INC REGION 15	68,545	\$328,680.57
LICKING VALLEY COMMUNITY ACTION PROGRAM INC	20,644	\$128,926.44
TOTAL	1,329,060	\$9,028,867.76

7.3 FFS Adjudicated Original Claims (By Claim)

Begin Date	End Date
09/01/2016	09/30/2016

Paper Claims	April 2016	May 2016	June 2016	July 2016	August 2016	September 2016
Paid	8,918	7,141	7,208	11,922	6,130	7,579
Denied	15,215	9,907	11,799	14,049	9,395	11,871
Total	24,133	17,048	19,007	25,971	15,525	19,450
% of Total Adjudicated Claims	2.07%	1.75%	2.12%	2.00%	2.00%	1.83%
% of Paper Denied Claims	63.05%	58.11%	62.08%	54.00%	61.00%	61.03%

Note: Total Adjudicated Paper Claims divided by Total Adjudicated Claims = % of Total Adjudicated Claims. Total Denied Paper Claims divided by Total Adjudicated Claims = % of Denied Claims.

Electronic Claims	April 2016	May 2016	June 2016	July 2016	August 2016	September 2016
Paid	839,291	723,368	665,537	1,008,987	609,876	785,399
Denied	302,232	235,308	213,392	256,956	212,891	259,725
Total	1,141,523	958,676	878,929	1,265,943	822,767	1,045,124
% of Total Adjudicated Claims	97.93%	98.25%	97.88%	98.00%	98.00%	98.17%
% of Electronic Denied Claims	26.48%	24.55%	24.28%	20.00%	26.00%	24.85%

Note: Total Adjudicated Electronic Claims divided by Total Adjudicated Claims = % of Total Adjudicated Claims. Total Denied electronic Claims divided by Total Adjudicated Claims = % of Denied Claims.

7.4 Monthly FFS Top Ten Procedure Codes

Begin Date	End Date
09/01/2016	09/30/2016

Procedure	Description	Member Count	Claim Count	Amount Paid
T2016	HABIL RES WAIVER PER DIEM	3,875	42,729	\$24,727,749.48
S5108	HOMECARE TRAIN PT 15 MIN	9,562	72,291	\$22,500,297.91
T1015	CLINIC SERVICE	133,841	213,718	\$16,914,588.83
99199	SPECIAL SERVICE/PROC/REPORT	4,339	4,433	\$7,601,974.38
T2021	DAY HABIL WAIVER PER 15 MIN	4,814	44,422	\$6,692,865.19
T2022	CASE MANAGEMENT, PER MONTH	15,733	19,174	\$5,173,202.12
H0004	ALCOHOL AND/OR DRUG SERVICES	3,835	11,696	\$4,232,028.26
S5100	ADULT DAYCARE SERVICES 15MIN	2,971	26,091	\$4,035,372.23
T1019	PERSONAL CARE SER PER 15 MIN	617	4,828	\$2,863,774.40
97535	SELF CARE MNGMENT TRAINING	2,167	9,608	\$2,664,894.98

7.5 Monthly FFS Top Ten Diagnosis Codes

Diagnosis	Description	Member Count	Claim Count	Amount Paid
F70	MILD INTELLECTUAL DISABILITIES	5,441	46,255	\$18,771,640.28
F71	MODERATE INTELLECTUAL DISABILITIES	4,379	37,505	\$14,141,146.70
F840	AUTISTIC DISORDER	3,780	28,130	\$9,230,536.89
G309	ALZHEIMER'S DISEASE, UNSPECIFIED	1,616	3,385	\$8,637,975.83
F73	PROFOUND INTELLECTUAL DISABILITIES	644	3,706	\$8,004,132.99
F911	CONDUCT DISOR, CHILDHOOD-ONSET	4,350	4,454	\$7,607,905.95
F0390	UNSPC DEMENTIA W/O BEHAVIORAL DIST	1,774	3,590	\$6,553,812.32
F72	SEVERE INTELLECTUAL DISABILITIES	1,003	7,812	\$6,448,722.77
J449	COPD UNSPECIED	5,981	13,837	\$5,283,760.04
F79	UNSPEC INTELLECTUA DISABILITIES	1,870	14,844	\$4,376,297.90

7.6 Monthly MCO Top Ten Procedure Codes

Begin Date	End Date
09/01/2016	09/30/2016

Procedure	Description	Member Count	Claim Count	Amount Paid
99213	OFF/OUTPATIENT VISIT	244,226	349,722	\$14,009,651.32
99284	EMERGENCY DEPT VISIT	51,967	66,236	\$9,799,260.58
99283	EMERGENCY DEPT VISIT	64,287	83,168	\$8,167,696.56
99214	OFFICE/OUTPATIENT VISIT EST	97,042	117,794	\$6,402,170.52
99285	EMERGENCY DEPT VISIT	27,526	34,507	\$6,275,166.18
90837	PSYTX PT&/FAMILY 60 MINUTES	27,160	48,355	\$4,916,976.59
A0120	NONER TRANSPORT MINI-BUS	11,048	215,956	\$4,790,280.32
A0100	NONER TRANSPORT TAXI	8,336	202,066	\$4,788,491.43
T2023	TARGETED CASE MGMT PER MNTH	11,521	13,801	\$4,769,996.74
A0130	NONER TRANSPORT WHEELCH VAN	4,524	98,250	\$3,725,491.08

Note: Data taken from encounters received from the Managed Care Organizations

7.7 Monthly MCO Top Ten Diagnosis Codes

Diagnosis	Description	Member Count	Claim Count	Amount Paid
R69	ILLNESS, UNSPECIFIED	24,979	593,416	\$14,962,182.52
Z3800	SNGL LIVEBORN INFANT, DEL VAGINALLY	3,403	5,107	\$7,618,757.37
Z3801	SNGL LIVEBORN INFANT, DEL CESAREAN	1,711	2,677	\$6,862,834.30
F1120	OPIOID DEPENDENCE, UNCOMPLICATED	14,307	57,431	\$6,584,822.85
A419	SEPSIS, UNSPECIFIED ORGANISM	1,168	2,211	\$5,364,007.32
Z5111	ENCOUNTER ANTINEOPLASTIC CHEMO	753	1,479	\$4,070,911.23
Z00129	ENCNTR ROUTINE CHILD HLTH EXAM W/O ABNORMAL FINDINGS	38,857	42,465	\$3,945,033.73
R079	CHEST PAIN, UNSPECIFIED	13,435	21,610	\$3,330,592.87
M545	LOW BACK PAIN	20,364	30,315	\$2,526,466.00
R0789	OTHER CHEST PAIN	6,729	9,708	\$2,393,206.38

Note: Data taken from encounters received from the Managed Care Organizations

7.8 Monthly FFS Top Ten Denial Reasons (By Detail Line)

Error	Description	Number of Denials	% of Top Ten
4021	No Coverage for Billed Procedure	18,129	16.2%
1010	Rendering Prov not a Member of Billing Grp	17,370	15.6%
2017	Services Covered Under Member's MCO Plan	14,190	12.7%
2003	Member Ineligible on Detail Date of Service	12,039	10.8%
4804	No Contract for Billed Rev Code	10,465	9.4%
5001	Exact Duplicate	9,133	8.2%
3317	This Service was not Approved by Medicare	8,693	7.7%
1955	Cannot Determine Medicaid NBR for Billing Prov	8,212	7.4%
4407	Bnft Plan/Aid Categ Restriction for Cov Rev Code	7,474	6.7%
268	Billed Amount Missing	5,924	5.3%
Totals		111,629	59.9%

Total Denied Details – 186,093

Note: Total # of top ten denials (111,629) divided by total denied details (186,093) = % of top ten denials (59.9%)

7.9 Monthly FFS Top Ten Suspense Reasons (By Detail Line)

Error	Description	Number of Failures	% of Top Ten
4405	Unable to Assign Provider Contract	3,406	27.1%
3305	Member Requires Valid Pt Liability for DOS	2,682	21.3%
2001	Member ID Number not on File Recycle	2,426	19.3%
3001	PA Not Found on Database	1,497	11.9%
3395	Hospice Eligibility	837	6.7%
3597	MFP Assignment Plan & Program Code Conflict	415	3.3%
5001	Exact Duplicate	403	3.2%
3003	Procedure Code Requires PA	370	2.9%
4014	No Pricing Segment on File	310	2.5%
2505	Member Covered by Private Insurance	237	1.9%
Totals		12,583	80.9%

Total Suspended Details – 15,546

Note: Total # of top ten failures (12,583) divided by total suspended details (15,546) = % of top ten suspense (80.9%)

7.9 FFS Suspended Original Claims by Age (By Claim)

Category	April 2016		May 2016		June 2016		July 2016		August 2016		September 2016	
	Details	Pct.	Details	Pct.	Details	Pct.	Details	Pct.	Details	Pct.	Details	Pct.
0-30 days	10,851	94.77	15,770	95.03	10,771	94.48	9,857	93.57	8,968	93.25	9,512	92.45
31-60 days	106	.93	382	2.30	180	1.58	202	1.92	164	1.71	189	1.84
61-90 days	76	.66	48	.30	38	.33	75	.71	109	1.13	127	1.23
91+ days	417	3.64	394	2.37	412	3.61	400	3.80	376	3.91	461	4.48
Total	11,450		16,594		11,401		10,534		9,617		10,289	

7.10 FFS Claims Suspense Over 30 Days by Responsible Unit (By Claim)

Category	April 2016	May 2016	June 2016	July 2016	August 2016	September 2016	Oldest Julian Date
Resolutions	14	196	0	6	15	2	16-235
Med.Review	13	27	41	83	107	180	16-113
TPL	0	81	0	0	0	9	16-214
Adjustments	0	0	0	0	0	0	0
Recycle	0	35	2	1	2	0	0
DMS	572	485	587	587	525	559	12-128
Total	599	824	630	677	649	720	

8 Monthly Third-Party Liability

8.1 FFS Third-Party Liability Monthly Activity

Third Party Liability	Begin Inv	Received	Worked	To DMS	Ending Inventory	Oldest Date
PA40-Kames/Eligibles with Other Ins.	1,246	3,708	3,613	0	1,341	14 days
CS40-Child Support	0	465	465	0	0	0 days
SSI-Local Offices	0	0	0	0	0	0 days
TPL Edits	395	1926	2,017	0	304	17 days
Accident/Trauma Leads	0	0	0	0	0	0 days
DMS Attorney	0	0	0	0	0	0 days
RUSH Attorney	0	0	0	0	0	0 days
HP Attorney	37	134	163	0	8	3 days
TPL Checks	35	120	115	0	40	4 days
TPL Mail	1,044	3,610	4,276	0	378	18 days
KHIPP	0	512	512	0	0	0 days
Total	2,757	10,475	11,161	0	2,071	

9 Monthly Finance/Adjustments

9.1 Monthly FFS Financial – Accounts Receivable

Category	Beginning Inventory	Received	Keyed	Return to Provider	To DMS	On Hold	Ending Inventory	Age Oldest AR
Accounts Receivable Set-up	0	45	45	0	0	0	0	0 days
Payouts	0	66	66	0	0	0	0	0 days
Accounts Receivable Updates	0	48	47	0	1	0	0	0 days
Accounts Receivable Transfers	0	3	3	0	0	0	0	0 days
Total	0	162	161	0	1	0	0	0 days

9.2 Monthly FFS Financial - Checks

Category	Beginning	Received	Completed	Ending	Age Oldest Check
Provider Warrant	0	14	13	1	2 days
HP Financial	183	515	571	127	3 days
DMS Financial	62	128	127	63	1 days
Total	245	657	711	191	

9.3 Monthly FFS Financial – Adjustments

Category	Beginning Inventory	Received	Completed	Returns	Ending Inventory	Age Oldest Adj
Professional	0	78	76	2	0	0 days
Institutional	0	101	100	1	0	0 days
Voids	0	352	290	4	58	1 day
Total	0	531	466	7	58	

9.4 Monthly FFS Financial - Mass Adjustments

Category	Beginning Inventory	Received (plus)	Released (minus)	Deleted (minus)	Zero Claims Pulled (minus)	Ending Inventory	On Hold	DMS Review
Mass Adjustment (region 52)	193	28	109	53	3	56	56	56
SE Processed Adjustment (region 58)	0	1	1	0	0	0	0	0
Suppl Pymt Mass Adjustment (region 88)	0	3	3	0	0	0	0	0
Total	193	32	113	53	3	56	56	56

10 Provider Relations

10.1 Provider Field Representatives

10.1.1 Provider Visits

September 7, 2016

Kelly Gregory, HPE Provider Field Representative, conducted an on-site provider visit with Dr. Huffman and Huffman PSC on September 7, 2016. The visit was held at Hewlett Packard Enterprise training room. The provider requested an on-site visit to review denied claims. Those who attended from the provider's office were: Janice Schantz and Amber Brown

September 16, 2016

Kelly Gregory, HPE Provider Field Representative, conducted a virtual room visit with Intercare Inc. on September 16, 2016. The provider requested a virtual room visit to learn how to navigate KYHealth Net. The provider did not have information needed to review panels in KYHealth Net therefore; we reviewed billing instructions and rescheduled the training. Those who attended the virtual room visit were: Tom Talarico and Griffin Talarico.

September 19, 2016

Kelly Gregory, HPE Provider Field Representative, conducted a virtual room visit with Intercare, Inc. on September 19, 2016. The provider requested a virtual room visit to learn how to navigate KYHealth Net. During the visit we reviewed the following panels: Provider status, member, prior authorization, RA viewer, and claims. We also reviewed kymmis.com and chfs.ky.gov/dms websites. Those who attended the virtual room visit were: Tom Talarico and Griffin Talarico

10.2 Conference Calls (Calls Greater Than 30 Minutes)

September 20, 2016

Vicky Hicks, HPE Provider Field Representative, conducted a conference call with First Urology on September 20, 2016. The provider requested a teleconference to discuss recent taxonomy requests they had sent to KY Medicaid Enrollment staff. Those who attended the teleconference were Dwana and Debbie

September 27, 2016

Vicky Hicks, HPE Provider Field Representative, conducted a conference call with Community Hospice on September 27, 2016. The provider requested a teleconference to discuss outstanding claims. Those who attended the teleconference were Susan Hunt, Jennifer Holley, Donna Sims and Robbie Eastham, DMS.

10.3 Conference Calls (Calls Greater Than 30 Minutes)

September 29, 2016

Vicky Hicks, HPE Provider Field Representative, conducted a conference call with Kentuckiana geriatric and Palliative Services on September 29, 2016. The provider requested a teleconference to discuss changes regarding their old vs. new provider ID for the group. Those who attended the teleconference were Karen Karnes

10.4 Association Meetings

September 1, 2016

Kelly Gregory and Vicky Hicks, HPE Provider Field Representatives, attended the Kentucky Medical Equipment Suppliers Association (KMESA) conference on September 1, 2016. The conference was held at the Griffin Gate Marriott Resort & Spa in Lexington, KY. DMS requested we attend to be available for provider billing questions.

10.5 Provider Contacts

Provider Calls	82
Provider E-mails	576
Total	658

Total number of calls and e-mails between Provider Field Representatives and Providers during the month.

10.6 Provider Workshops

There were no Provider Workshops in the month of September.

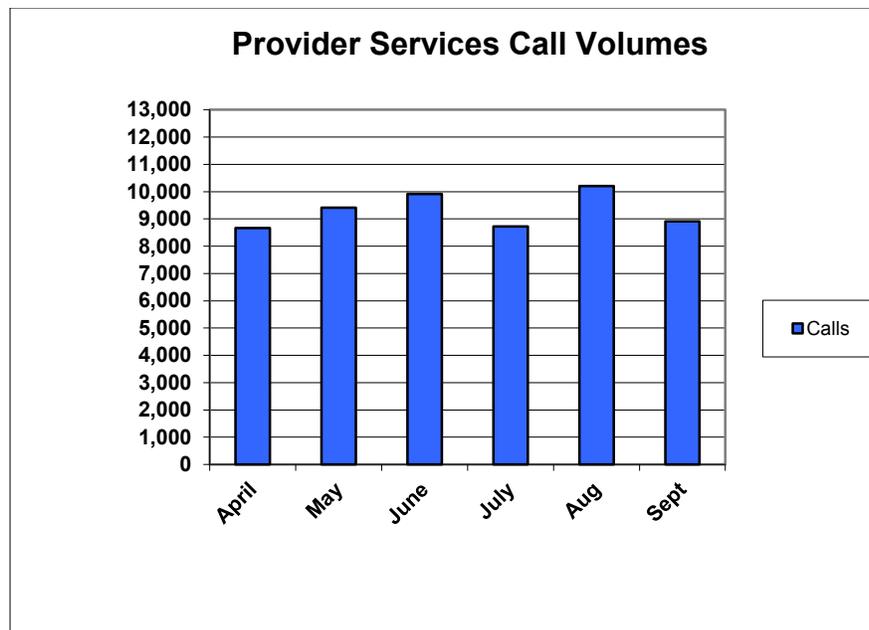
10.7 Provider Services

10.7.1 Provider Services

Category	April 2016	May 2016	June 2016	July 2016	August 2016	September 2016
% Service Level	96%	95%	95%	97%	98%	99%
Abandoned Calls	323	486	497	301	216	90
Avg Speed Ans	1.49	1.58	1.90	1.39	.42	.21
Incoming Calls	8,671	9,418	9,912	8,720	10,201	8,915
Paper Correspondence	379	395	380	439	459	444
E-Mail Correspondence	225	204	210	206	246	170
Fax	4	5	0	1	5	8
Total*	9,279	10,022	10,502	9,366	10,911	9,537
HP Callbacks	125	184	136	62	80	136

*Total of Calls, Paper Correspondence, E-Mail Correspondence, and Faxes

Formula for % Service Level: Number of incoming calls minus abandoned calls divided by total number of incoming calls = % Service Level.



10.7.2 Top 5 Provider Calls

1. Claim Status
2. Member Services/Member Calls
3. Billing Help
4. Prior Authorizations
5. Check Amounts

10.7.3 Notable Topics

1. Reason for claim denial or suspended. How to get the MCO to void the claim in order for Medicaid to process the claim?
2. Which MCO the member has & MAP 552 questions? Calls from providers wanting to know how to get the member's file corrected to show whether the member is traditional Medicaid or managed care. Calls from members wanting to know if they are eligible for Medicaid and which MCO are they enrolled and how to change the MCO.
3. Timely filing – CMS 1500 Crossover EOMB Form (is this form completed if Medicare pays or if Medicare denies).
4. What is the PA number and how do I correct the overlapping dates?
5. Questions about the Attestation or enhanced checks and questions about payouts and recoupments. Questions about the EHR checks.

10.8 Commonwealth Training

10.8.1 Current Activities

The following instructor-led training classes were offered by HPE in September 2016:

- **Member/TPL Subsystem** (September 13, 2016) 2 attended
 - Crystal Myatt, Division of Program Quality & Outcomes
 - Vaishnavi Reddy, Office of Administrative and Technology Services
- **Provider Subsystem** (September 13, 2016) 2 attended
 - Crystal Myatt, Division of Program Quality & Outcomes
 - Vaishnavi Reddy, Office of Administrative and Technology Services
- **Prior Authorization Subsystem** (September 15, 2016) 1 attended
 - Lee Guice, Division of Policy and Operations
- **Reference Subsystem** (September 15, 2016) 0 attended
 - There were no attendees
- **Claims Subsystem** (September 20, 2016) 0 attended
 - There were no attendees
- **Financial Subsystem** (September 22, 2016) 0 attended
 - There were no attendees
- **OnBase Application** (September 22, 2016) 1 attended
 - Peter Langfield, Office of Administrative and Technology Services
- **Encounters** (September 27, 2016) 0 attended
 - There were no attendees

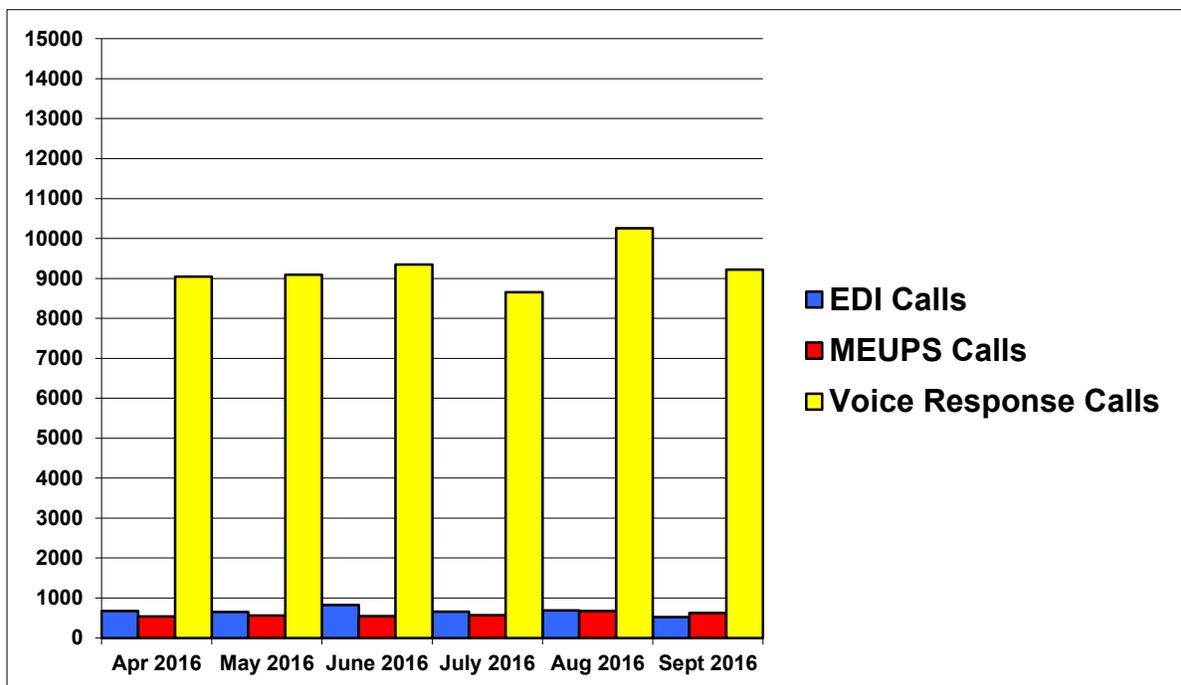
Staff members' supervisors are sent a confirmation via email of attendance.

*Effective January 1, 2016 -- Mechanics of Claims Processing and Claim Edits and Audits have been incorporated with Claims Subsystem class. Rules have been incorporated with the Reference Subsystem class.

11 EDI Customer/Provider Interaction

11.1 Electronic Data Interchange Calls Received

Category	Apr 2016	May 2016	June 2016	July 2016	Aug 2016	Sept 2016
EDI Calls	677	650	822	661	687	523
MEUPS Calls	535	561	550	574	672	628
Voice Response Calls	9,045	9,096	9,348	8,655	10,254	9,223



Expanded Call Data

Month	EDI Calls	Abandoned Calls	Avg. Speed of Answer	Avg. Talk Time	
April	677	7	:12	2:46	99%
May	650	5	:06	2:52	99%
June	822	11	:14	2:49	99%
July	661	6	:08	2:50	99%
August	687	1	:09	2:28	99%
September	523	6	:07	2:44	99%

Expanded Call Data (continued)

Month	MEUPS Calls	Abandoned Calls	Avg. Speed of Answer	Avg. Talk Time	
April	535	0	:02	2:09	100%
May	561	1	:01	2:11	99%
June	550	1	:02	2:14	99%
July	574	0	:01	2:01	100%
August	672	0	:02	2:09	100%
September	628	0	:01	2:13	100%

Month	Voice Response Calls	Abandoned Calls	Avg. Speed of Answer	Avg. Talk Time	
April	9,045	517	:01	2:06	95%
May	9,096	562	:01	2:01	94%
June	9,348	523	:01	1:58	94%
July	8,655	477	:01	1:56	94%
August	10,254	549	:01	1:53	95%
September	9,223	499	:01	1:56	95%

*Formula for % Service Level: Number of incoming calls minus abandoned calls divided by total number of incoming calls = % Service Level.

EDI Top 5 calls:

1. Request to repost 835s
2. Verify electronic file transmission
3. Request to repost 999s
4. Confirm setup of MAP 380s/246s
5. Questions about 837 file structure

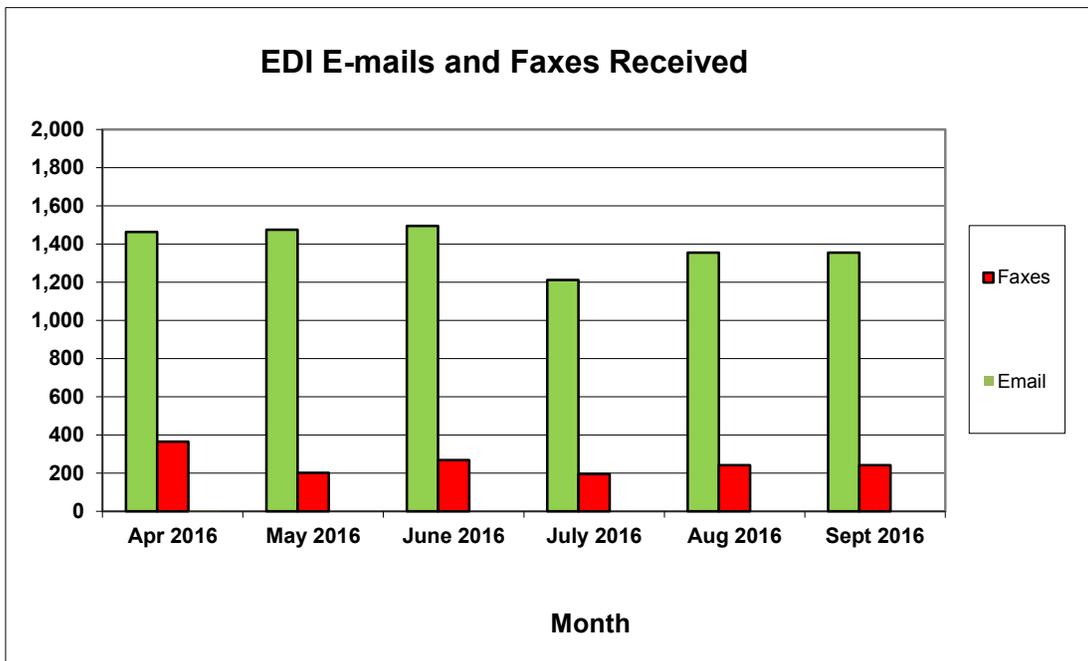
MEUPS Top 5 calls:

1. Password resets (*see table below*)
2. Request to change Administrator of account
3. PIN release request to set up new account
4. Medicaid contract has end-dated, resulting in no access to KyHealth Net
5. How to navigate member eligibility

Category	Apr 2016	May 2016	June 2016	July 2016	Aug 2016	Sept 2016
Password Resets Received via phone	361	366	325	346	335	397

11.2 EDI E-mails and Faxes Received

Category	Apr 2016	May 2016	Jun 2016	Jul 2016	Aug 2016	Sept 2016
E-mails Received	1,463	1,475	1,495	1,211	1,356	1,180
E-mails Answered	1,460	1,473	1,495	1,209	1,355	1,180
Faxes Received	365	201	268	195	242	164
Faxes Answered	358	201	268	194	240	164



EDI Top 5 E-mail Requests:

1. Password resets (*see table below*)
2. Status of MAP 380
3. Status of 835
4. Research
5. Verify electronic file transmission

Category	Apr 2016	May 2016	June 2016	July 2016	Aug 2016	Sept 2016
Password Resets Received via email	305	295	250	228	365	293

EDI Top 5 Fax Requests:

1. PIN release forms* (*see table below*)
2. Change of Administrator forms* (*see table below*)
3. MAP 380s and 246s
4. 835s
5. Trading Partner Agreements

Category	Apr 2016	May 2016	Jun 2016	Jul 2016	Aug 2016	Sept 2016
PINs Received via fax	179	95	115	111	108	53
Admins Received via fax	176	146	117	68	182	49

*All PIN release and Change of Administrator responses are outbound via e-mail only.



*Cabinet for Health and Family Services
Department for Medicaid Services*

Utilization Management Operational Status Report

Status Month: August 2016

**Report Date: August 14, 2016
Author: Carewise Health Staff**

Acute Inpatient Services

Call Metrics	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Administrative						
Abandoned Calls	42	39	18	54	46	55
Average Speed of Answer	00:35	00:39	00:19	00:51	00:35	00:45
Average Talk Time	03:19	03:27	03:09	03:28	03:09	03:16
First Call Resolution	99.4%	99.3%	98.8%	99.4%	99.5%	99.5%
Total Admin Calls	2014	1715	1775	1916	1830	2087
Clinical						
Abandoned Calls	1	0	1	3	7	13
Average Speed of Answer	00:30	00:34	00:26	00:41	02:06	02:23
Average Talk Time	06:19	06:47	06:27	05:41	05:51	05:32
First Call Resolution	98.1%	98.6%	95.2%	96.2%	91.0%	95.7%
Total Clinical Calls	255	258	271	287	253	314
Total Calls	2269	1973	2046	2203	2083	2401

Requests Processed						
Approvals	213	263	457	233	190	281
Administrative Approval	1,589	1,466	1,415	1,520	1,363	1,576
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	0	0	0	0	0	0
State Mandate	1	0	0	0	0	0
Denials	25	27	18	17	15	15
Pended	43	38	31	35	38	24
Total	1,871	1,794	1,921	1,805	1,606	1,896

Administrative Denials						
Technical (Out of Time Frame)	21	24	18	13	14	14
Medicare Primary	N/A	N/A	N/A	N/A	N/A	N/A
Lack of Information	N/A	N/A	N/A	N/A	N/A	N/A
Total Denied	21	24	18	13	14	14

MD Review						
Medical Necessity	19	17	28	27	15	23
Not Medically Necessary	4	2	0	4	1	1
Referred to MD Rate	1.23%	1.06%	1.46%	1.72%	1.00%	1.27%
Not Medically Necessary Denial Rate	17%	11%	0%	13%	6%	4%
Total MD Review	23	19	28	31	16	24

Reconsiderations						
Overtured	1	2	0	1	0	0
Upheld	0	0	0	0	0	0
Total Reconsiderations	1	2	0	1	0	0

*Reconsiderations are not included in Request Processed Total

	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Pended						
Escalated	0	0	0	0	0	0
Lack of Information	0	1	5	0	0	0
MD Review	0	0	0	0	0	0
RN Review	43	37	31	35	38	24
Total	43	38	36	35	38	24

Current Month Top 5 LOI Pended Reasons	
1.	N/A
2.	
3.	
4.	
5.	

Current Month Top 10 Diagnosis Codes			
1.	J18.9	Pneumonia, unspecified o	76
2.	A41.9	Sepsis, unspecified orga	63
3.	J44.1	Chron obstr pulm dz w/ex	55
4.	N39.0	Urinary tract infectn,si	41
5.	J96.90	Resp fail,unsp,w/hypoxia	38
6.	N17.9	Acute kidney failure, un	37
7.	J96.00	Acut resp fail,unsp w/hy	36
8.	I50.9	Heart failure, unspecifi	33
9.	K92.2	Gastrointestinal hemorrh	29
10.	O80	Encountr,full-term uncom	26

Current Month Top 5 Reasons for MD Denial		
1.	Recipient should have been cared for at a lower level of care. 907 KAR 10:012(2) and 907 KAR 3:130	1
2.		
3.		
4.		
5.		

Current Month Top 5 Reasons for Lack of Information Denial	
1.	N/A
2.	
3.	
4.	
5.	

Durable Medical Equipment

Call Metrics	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Administrative						
Abandoned Calls	7	15	7	25	22	
Average Speed of Answer	00:39	00:55	00:37	01:45	01:19	01:05
Average Talk Time	04:19	03:43	03:20	03:34	03:31	03:24
First Call Resolution	99.3%	99.0%	98.4%	99.7%	94.0%	99.7%
Total Admin Calls	499	474	497	475	503	493
Clinical						
Abandoned Calls	10	16	6	6	5	22
Average Speed of Answer	01:46	01:51	00:51	00:38	01:05	02:19
Average Talk Time	05:19	05:18	04:51	05:07	04:23	04:47
First Call Resolution	97.1%	98.6%	99.5%	96.9%	99.7%	89.2%
Total Clinical Calls	258	245	237	229	176	188
Total Calls	757	719	734	704	679	681

Requests Processed						
Approvals	1,249	1,398	1,362	1,124	1,111	1,472
Agreed Reduction	0	0	0	0	0	0
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	12	0	0	1	1	0
State Mandate	0	0	0	0	0	0
Denials	19	23	17	86	49	167
Pended	487	460	392	509	382	388
Total	1,767	1,881	1,771	1,720	1,543	2,027

Administrative Denials						
Technical (Out of Time Frame)	N/A	N/A	N/A	N/A	N/A	N/A
Medicare Primary	N/A	N/A	N/A	N/A	N/A	N/A
Lack of Information	0	0	0	70	33	159
Total Denied	0	0	0	70	33	159

MD Review						
Medical Necessity	99	114	134	77	63	84
Not Medically Necessary	19	23	17	16	16	8
Referred to MD Rate	6.68%	7.28%	8.53%	5.41%	5.12%	4.54%
Not Medically Necessary Denial Rate	16%	17%	11%	17%	20%	9%
Total MD Review	118	137	151	93	79	92

Reconsiderations						
Overturned	3	2	17	0	2	0
Upheld	6	1	1	0	0	2
Total Reconsiderations	9	3	18	0	2	2

*Reconsiderations are not included in Request Processed Total

	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Pended						
Escalated	N/A	N/A	N/A	N/A	N/A	N/A
Lack of Information	483	457	388	496	377	381
MD Review	3	3	3	6	5	5
RN Review	1	0	1	7	0	2
HP Review	0	0	0	0	0	0
Total	487	460	392	509	382	388

Current Month Top 5 LOI Pended Reasons		
1.	Lack of Information	381
2.		
3.		
4.		
5.		

Current Month Top 10 Diagnosis Codes		
1.	G80.9 Cerebral palsy, unspecif	444
2.	G80.0 Spastic quadriplegic cer	92
3.	J44.9 Chro obstruc pulm dz uns	66
4.	G82.20 Paraplegia, unspecified	52
5.	G82.50 Quadriplegia, unspecifie	43
6.	G80.1 Spastic diplegic cerebra	42
7.	G12.9 Spinal muscular atrophy,	38
8.	G80.8 Other cerebral palsy	35
9.	G47.33 Obstructive sleep apnea(33
10.	G71.0 Muscular dystrophy	32

Current Month Top 5 Reasons for MD Denial		
1.	Not medically necessary	5
2.	Item is for restraint.	1
3.	Item is not primarily and customarily used for a medical purpose. 907 KAR 1:479(6) and 907 KAR 3:130	1
4.	Item is not primarily for use in the home.	1
5.		

Current Month Top 5 Reasons for Lack of Information Denial		
1.	LOI response not received or incomplete	159
2.		
3.		
4.		
5.		

DRG

	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Target File						
Target File	250	250	250	250	250	250
On-Site Requested	37	46	44	35	41	37
In-House	213	204	206	215	209	213

Outcomes						
Total Approved	235	215	230	242	218	219

Outcomes						
Total Denied	15	35	20	8	32	31

Denial Reasons						
Not Medically Necessary	1	1	0	0	2	0
Technical	9	34	20	7	29	31
Reassignments	5	0	0	1	1	0
Billing	0	0	0	0	0	0
Total Denial Reasons	15	35	20	8	32	31

Reconsiderations						
Approved	0	3	0	0	0	0
Denied	15	1	0	0	1	0
Total Reviewed	15	4	0	0	1	0

Quality of Concern						
Severity 1 - Quality concern with minimum potential for significant effect (s) on the patient	0	0	0	0	0	0
Severity 2 - Quality problem with the potential for significant adverse effect (s) on the patient	0	0	0	0	0	0
Severity 3 - Quality problem with significant adverse affect (s) on the patient	0	0	0	0	0	0
Total Denied	0	0	0	0	0	0

EPSDT Special Services

Call Metrics	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Administrative						
Abandoned Calls	2	1	2	2	3	3
Average Speed of Answer	00:38	00:22	00:24	00:49	00:29	00:50
Average Talk Time	05:44	04:41	03:18	03:49	03:52	04:14
First Call Resolution	99.6%	98.9%	100%	100%	98.5%	99.6%
Total Admin Calls	183	135	94	136	175	173
Clinical						
Abandoned Calls	1	0	2	3	7	0
Average Speed of Answer	00:35	00:49	00:21	01:06	01:54	01:01
Average Talk Time	05:10	05:08	03:29	03:09	03:37	04:10
First Call Resolution	97.3%	93.4%	92.6%	100.0%	94.1%	42.6%
Total Clinical Calls	136	85	61	93	125	110
Total Calls	319	220	155	229	300	283

Requests Processed	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Approvals	1,574	1,172	790	1,589	1,098	947
Agreed Reduction	1	0	1	0	0	0
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	1	0	0	0	0	0
State Mandate	0	2	0	0	0	0
Denials	1	0	1	3	0	3
Pended	131	59	44	62	45	50
Total	1,708	1,233	836	1,654	1,143	1,000

Administrative Denials	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Technical (Out of Time Frame)	N/A	N/A	N/A	N/A	N/A	N/A
Medicare Primary	N/A	N/A	N/A	N/A	N/A	N/A
Lack of Information	0	0	0	0	0	0
Total Denied	0	0	0	0	0	0

MD Review	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Medical Necessity	9	3	2	6	7	3
Not Medically Necessary	1	0	1	3	0	3
Referred to MD Rate	0.59%	0.24%	0.36%	0.54%	0.61%	0.60%
Not Medically Necessary Denial Rate	10%	0%	33%	33%	0%	50%
Total MD Review	10	3	3	9	7	6

Reconsiderations	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Overtaken	0	2	0	0	2	1
Upheld	0	0	0	0	0	0
Total Reconsiderations	0	2	0	0	2	1

*Reconsiderations are not included in Request Processed Total

	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Pended						
Escalated	N/A	N/A	N/A	N/A	N/A	N/A
Lack of Information	93	55	44	57	44	47
MD Review	0	0	0	2	0	0
RN Review	38	4	0	3	1	3
Total	213	224	208	257	45	50

Current Month Top 5 LOI Pended Reasons		
1.	Lack of Information	47
2.		
3.		
4.		
5.		

Current Month Top 10 Diagnosis Codes			
1.	F84.0	Autistic disorder	276
2.	Q90.9	Down syndrome, unspecifi	102
3.	G80.9	Cerebral palsy, unspecif	93
4.	R62.50	Uns lack nrml physiologcl	33
5.	F80.2	Mixed recep-expressiv la	20
6.	G80.8	Other cerebral palsy	15
7.	758.0	DOWN'S SYNDROME	13
8.	Q90.0	Trisomy 21 nonmosaicism	12
9.	F81.9	Develop disord of schola	11
10.	G80.1	Spastic diplegic cerebra	11

Current Month Top 5 Reasons for MD Denial		
1.	Not medically necessary	3
2.		
3.		
4.		
5.		

Current Month Top 5 Reasons for Lack of Information Denial		
1.	N/A	
2.		
3.		
4.		
5.		

Home Health

Call Metrics	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Administrative						
Abandoned Calls	37	33	15	45	36	48
Average Speed of Answer	00:57	00:55	00:29	01:09	01:19	01:20
Average Talk Time	04:40	04:45	04:06	04:35	04:39	04:09
First Call Resolution	99.5%	99.8%	98.8%	99.6%	99.6%	99.4%
Total Admin Calls	1079	950	991	1045	987	979
Clinical						
Abandoned Calls	3	4	5	5	15	3
Average Speed of Answer	00:39	00:39	00:48	00:44	02:01	00:52
Average Talk Time	07:47	07:26	07:27	07:25	07:52	07:35
First Call Resolution	98.5%	99.3%	98.1%	95.8%	98.6%	98.4%
Total Clinical Calls	929	789	855	899	837	826
Total Calls	2,008	1,739	1,846	1,944	1,824	1,805

Requests Processed	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Approvals	4,348	4,306	3,968	4,492	4,424	4,077
Agreed Reduction	117	66	112	0	70	81
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	2	1	0	0	0	0
State Mandate	17	0	0	17	0	0
Denials	29	12	53	23	49	36
Pended	362	102	148	188	119	131
Total	4,875	4,487	4,281	4,720	4,662	4,325

Administrative Denials	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Lack of Information	N/A	N/A	N/A	N/A	N/A	N/A
Medicare Primary	2	1	10	0	2	2
Technical (Out of Time Frame)	19	10	31	13	41	29
Total Denied	21	11	41	13	43	31

MD Review	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Medical Necessity	42	13	33	34	81	44
Not Medically Necessary	8	1	12	10	6	5
Referred to MD Rate	1.03%	0.31%	1.05%	0.93%	1.87%	1.13%
Not Medically Necessary Denial Rate	16%	7%	27%	23%	7%	10%
Total MD Review	50	14	45	44	87	49

Reconsiderations	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Overtaken	2	1	0	6	0	0
Upheld	0	0	0	0	0	0
Total Reconsiderations	2	1	0	6	0	0

*Reconsiderations are not included in Request Processed Total

	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Pended						
Escalated	N/A	N/A	N/A	N/A	N/A	N/A
Unreviewed	58	46	46	69	47	89
MD Review	2	1	1	10	1	3
RN Review	301	55	55	109	71	39
Total	361	102	102	188	119	131

Current Month Top 5 LOI Pended Reasons	
1.	N/A
2.	
3.	
4.	
5.	

Current Month Top 10 Diagnosis Codes			
1.	G80.9	Cerebral palsy, unspecif	328
2.	R32	Unspecified urinary inco	261
3.	F79	Unspec intellectual disa	251
4.	E11.9	Type 2 DM w/o complicati	149
5.	J44.9	Chro obstruc pulm dz uns	142
6.	F84.0	Autistic disorder	130
7.	I10	Essential (primary) hype	95
8.	F72	SEVERE INTELLECTUAL DISA	79
9.	F71	Moderate intellectual di	70
10.	I50.9	Heart failure, unspecifi	67

Current Month Top 5 Reasons for MD Denial		
1.	Not medically necessary	4
2.	Frequency of services exceeds guidelines.	1
3.		
4.		
5.		

Current Month Top 5 Reasons for Lack of Information Denial	
1.	N/A
2.	
3.	
4.	
5.	

Hospice

Call Metrics	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Administrative						
Abandoned Calls	N/A	N/A	N/A	N/A	N/A	N/A
Average Speed of Answer	N/A	N/A	N/A	N/A	N/A	N/A
Average Talk Time	N/A	N/A	N/A	N/A	N/A	N/A
First Call Resolution	N/A	N/A	N/A	N/A	N/A	N/A
Total Admin Calls	N/A	N/A	N/A	N/A	N/A	N/A
Clinical						
Abandoned Calls	N/A	N/A	N/A	N/A	N/A	N/A
Average Speed of Answer	N/A	N/A	N/A	N/A	N/A	N/A
Average Talk Time	N/A	N/A	N/A	N/A	N/A	N/A
First Call Resolution	N/A	N/A	N/A	N/A	N/A	N/A
Total Clinical Calls	N/A	N/A	N/A	N/A	N/A	N/A
Total Calls	N/A	N/A	N/A	N/A	N/A	N/A

Requests Processed	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Approvals	344	177	30	130	10	281
Agreed Reduction	N/A	N/A	N/A	N/A	N/A	N/A
Client Approved/Negotiation	N/A	N/A	N/A	N/A	N/A	N/A
Split Decision	0	0	0	0	0	0
State Mandate	0	0	0	0	0	0
Denials	0	0	0	0	0	0
Pended	70	16	4	6	5	34
Total	414	193	34	136	15	315

Administrative Denials	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Lack of Information	N/A	N/A	N/A	N/A	N/A	N/A
Medicare Primary	N/A	N/A	N/A	N/A	N/A	N/A
Technical (Out of Time Frame)	N/A	N/A	N/A	N/A	N/A	N/A
Total Denied	N/A	N/A	N/A	N/A	N/A	N/A

MD Review	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Medical Necessity	0	0	0	0	0	0
Not Medically Necessary	0	0	0	0	0	0
Referred to MD Rate	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Not Medically Necessary Denial Rate	0%	0%	0%	0%	0%	0%
Total MD Review	0	0	0	0	0	0

Reconsiderations	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Overturned	0	0	0	0	0	0
Upheld	0	0	0	0	0	0
Total Reconsiderations	0	0	0	0	0	0

*Reconsiderations are not included in Request Processed Total

Pended	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Escalated	N/A	N/A	N/A	N/A	N/A	N/A
Lack of Information	15	59	15	3	5	31
MD Review	0	0	0	0	0	0
RN Review	0	11	1	3	0	3
Total	15	70	16	6	5	34

Current Month Top 5 LOI Pended Reasons		
1.	Lack of Information	31
2.		
3.		
4.		
5.		

Current Month Top 10 Diagnosis Codes		
1.	G30.9 Alzheimer's disease, uns	174
2.	I50.30 Uns diastolic(congstv)he	17
3.	J44.9 Chro obstruc pulm dz uns	14
4.	I51.9 Heart disease, unspecifi	11
5.	C34.90 Mal neo unsp part unsp b	9
6.	N19 Unspecified kidney failu	8
7.	434.91 OCLSN, CER ARTERY NOS W/	8
8.	G20 Parkinson's disease	7
9.	G21.4 Vascular parkinsonism	6
10.	I73.9 Peripheral vascular dise	6

Current Month Top 5 Reasons for MD Denial	
1.	N/A
2.	
3.	
4.	
5.	

Current Month Top 5 Reasons for Lack of Information Denial	
1.	N/A
2.	
3.	
4.	
5.	

Nursing Facility

Call Metrics	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Administrative						
Abandoned Calls	4	4	5	11	6	12
Average Speed of Answer	00:51	00:58	00:30	01:24	01:35	01:07
Average Talk Time	04:33	04:36	04:06	04:07	05:07	04:30
First Call Resolution	94.0%	93.6%	89.1%	87.7%	89.0%	97.5%
Total Admin Calls	328	261	299	336	332	403
Clinical						
Abandoned Calls	8	1	5	0	0	0
Average Speed of Answer	00:54	00:33	01:02	00:04	00:02	00:09
Average Talk Time	05:28	05:26	05:05	05:22	06:00	07:13
First Call Resolution	88.2%	85.4%	94.9%	96.0%	97.4%	95.4%
Total Clinical Calls	198	169	184	203	194	216
Total Calls	526	430	483	539	526	619

Requests Processed	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Approvals	6,204	2,989	6,179	7,516	4,521	6,724
Initial LOC Approval	2,360	2,164	2,063	2,382	2,618	2,453
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	0	0	0	0	0	0
State Mandate	2	10	4	2	0	3
Denials	8	6	7	2	3	316
Pended	227	255	219	374	302	242
Total	8,801	5,424	8,472	10,276	7,444	9,738

Administrative Denials	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Lack of Information	0	0	0	0	0	312
Non-Certified Bed	0	1	0	0	0	0
Total Denied	0	1	0	0	0	312

***Reconsiderations are not included in Request Processed Total**

MD Review	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Medical Necessity	12	9	10	8	2	15
Not Medically Necessary	8	5	7	2	3	4
Referred to MD Rate	8.81%	5.49%	7.76%	2.67%	1.66%	7.85%
Not Medically Necessary Denial Rate	40%	36%	41%	20%	60%	21%
Total MD Review	20	14	17	10	5	19

Reconsiderations	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Overtured	2	1	2	0	1	1
Upheld	0	0	0	1	0	1
Total Reconsiderations	2	1	2	1	1	2

***Reconsiderations are not included in Request Processed Total**

	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Pended						
Lack of Information	205	240	204	353	292	227
MD Review	0	0	0	0	0	0
RN Review	22	15	15	21	10	15
Total	227	255	219	374	302	242

Current Month Top 5 LOI Pended Reasons		
1.	Lack of Information	227
2.		
3.		
4.		
5.		

Current Month Top 10 Diagnosis Codes			
1.	F03.90	Unsp dementia w/o behavi	881
2.	I10	Essential (primary) hype	656
3.	J44.9	Chro obstruc pulm dz uns	594
4.	G30.9	Alzheimer's disease, uns	530
5.	E11.9	Type 2 DM w/o complicati	360
6.	I50.9	Heart failure, unspecifi	292
7.	M62.81	Muscle weakness (general	180
8.	I48.91	Unspec atrial fibrillati	176
9.	F02.80	Dem oth dzs CE w/o behav	160
10.	F02.81	Dementia othr dzs CE w b	157

Current Month Top 5 Reasons for MD Denial		
1.	Not medically necessary	3
2.	Recipient does not have a stable medical condition requiring intermittent high-intensity nursing care, continuous personal care or supervision in an institutional setting. 907 KAR 1:022(4) and 907 KAR 3:130	1
3.		
4.		
5.		

Current Month Top 5 Reasons for Lack of Information Denial		
1.	Lack of Information	312
2.		
3.		
4.		
5.		

Nursing Facility Ancillary

Call Metrics	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Administrative						
Abandoned Calls	72	39	53	37	68	73
Average Speed of Answer	01:16	00:43	00:52	00:39	01:03	01:02
Average Talk Time	04:03	03:44	03:37	03:27	03:31	03:28
First Call Resolution	99.4%	99.4%	93.6%	89.0%	89.0%	97.5%
Total Admin Calls	1085	1192	1022	1065	992	1118

Clinical						
Abandoned Calls	N/A	N/A	N/A	N/A	N/A	N/A
Average Speed of Answer	N/A	N/A	N/A	N/A	N/A	N/A
Average Talk Time	N/A	N/A	N/A	N/A	N/A	N/A
First Call Resolution	N/A	N/A	N/A	N/A	N/A	N/A
Total Clinical Calls	N/A	N/A	N/A	N/A	N/A	N/A
Total Calls	1,085	1,192	1,022	1,065	992	1,118

Requests Processed						
Approvals	2,820	2,560	2,784	3,128	2,691	3,146
Agreed Reduction	0	0	0	0	0	0
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	0	0	0	0	0	0
State Mandate	0	0	0	0	0	0
Denials	200	189	230	208	170	199
Pended	216	280	215	174	265	198
Total	3,236	3,029	3,229	3,510	3,126	3,543

RN Denials/Overturns						
FRN Criteria	178	173	211	191	153	186
FRN Reconsideration Overturned	4	7	4	9	3	5
FRN Reconsideration Upheld	13	5	9	7	10	6
Total Denied	195	185	224	207	166	197

MD Review						
Medical Necessity	1	5	4	3	2	4
Not Medically Necessary	9	10	10	10	7	7
Referred to MD Rate	0.31%	0.50%	0.43%	0.37%	0.29%	0.31%
Not Medically Necessary Denial Rate	90%	67%	71%	77%	78%	64%
Total MD Review	10	15	14	13	9	11

Reconsiderations						
Overturned	3	0	3	1	1	1
Upheld	0	2	1	0	0	1
Total Reconsiderations	3	2	4	1	1	2

*Reconsiderations are not included in Request Processed Total

	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Pended						
MD Review	1	0	0	0	0	2
RN Review	215	280	215	174	265	196
Total	216	280	215	174	265	198

Current Month Top 5 LOI Pended Reasons	
1.	N/A
2.	
3.	
4.	
5.	

Current Month Top 10 Diagnosis Codes			
1.	J44.9	Chro obstruct pulm dz uns	847
2.	M62.81	Muscle weakness (general)	291
3.	R06.02	Shortness of breath	279
4.	I50.9	Heart failure, unspecifi	150
5.	R26.2	Difficulty in walking, N	92
6.	J18.9	Pneumonia, unspecified o	80
7.	R09.02	Hypoxemia	70
8.	J44.1	Chron obstruct pulm dz w/ex	67
9.	I10	Essential (primary) hype	66
10.	496	OBSTRUCTION, CHRONIC AIR	49

Current Month Top 5 Reasons for MD Denial		
1.	Not medically necessary	4
2.	Documentation is inadequate to determine the ongoing need for the services. 907 KAR 1:023 and 907 KAR 3:130	2
3.	Oxygen therapy is not medically necessary or appropriate for the recipient's diagnosis or condition. 907 KAR 1:023 and 907 KAR 3:130	1
4.		
5.		

Current Month Top 5 Reasons for Lack of Information Denial	
1.	N/A
2.	
3.	
4.	
5.	

Orthodontia

Call Metrics	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Administrative						
Abandoned Calls	2	0	0	3	1	1
Average Speed of Answer	00:17	00:52	00:44	01:11	01:37	01:22
Average Talk Time	03:25	02:41	01:42	02:40	02:20	01:23
First Call Resolution	100%	100%	100%	100%	100%	100%
Total Admin Calls	29	19	13	30	33	28

Clinical						
Abandoned Calls	N/A	N/A	N/A	N/A	N/A	N/A
Average Speed of Answer	N/A	N/A	N/A	N/A	N/A	N/A
Average Talk Time	N/A	N/A	N/A	N/A	N/A	N/A
First Call Resolution	N/A	N/A	N/A	N/A	N/A	N/A
Total Clinical Calls	N/A	N/A	N/A	N/A	N/A	N/A
Total Calls	29	19	13	30	33	28

Requests Processed						
Approvals	9	24	6	12	20	10
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	0	0	0	0	0	0
State Mandate	0	0	0	0	0	0
Denials	0	0	0	0	0	0
Pended	3	0	0	4	0	8
Total	12	24	6	16	20	18

Administrative Denials						
Lack of Information	N/A	N/A	N/A	N/A	N/A	N/A
Medicare Primary	N/A	N/A	N/A	N/A	N/A	N/A
Technical (Out of Time Frame)	N/A	N/A	N/A	N/A	N/A	N/A
Total Denied	N/A	N/A	N/A	N/A	N/A	N/A

MD Review						
Medical Necessity	0	0	0	0	0	0
Not Medically Necessary	0	0	0	0	0	0
Referred to MD Rate	0%	0%	0%	0%	0%	0%
Not Medically Necessary Denial Rate	0%	0%	0%	0%	0%	0%
Total MD Review	0	0	0	0	0	0

Reconsiderations						
Overturned	0	0	0	0	0	0
Upheld	0	0	0	0	0	0
Total Reconsiderations	0	0	0	0	0	0

*Reconsiderations are not included in Request Processed Total

	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Pended						
Lack of Information	0	0	0	0	0	0
MD Review	3	0	0	3	0	8
RN Review	0	0	0	1	0	0
Total	3	0	0	4	0	8

Current Month Top 5 LOI Pended Reasons	
1.	N/A
2.	
3.	
4.	
5.	

Current Month Top 10 Diagnosis Codes			
1.	Z46.4	Encntr fitting&adjust or	12
2.	V58.5	ORTHODONTICS AFTERCARE	4
3.	M26.11	Maxillary asymmetry	2
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Current Month Top 5 Reasons for MD Denial	
1.	N/A
2.	
3.	
4.	
5.	

Current Month Top 5 Reasons for Lack of Information Denial	
1.	N/A
2.	
3.	
4.	
5.	

Outpatient Therapies

Call Metrics	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Administrative						
Abandoned Calls	2	3	4	10	8	5
Average Speed of Answer	00:37	00:59	01:05	02:17	00:52	00:48
Average Talk Time	04:05	03:41	03:36	04:06	03:33	03:19
First Call Resolution	99.5%	99.6%	100%	100%	100%	99%
Total Admin Calls	177	191	181	199	206	253
Clinical						
Abandoned Calls	3	2	2	2	3	5
Average Speed of Answer	00:14	00:31	00:32	00:30	01:07	00:58
Average Talk Time	03:18	03:43	03:39	04:05	03:45	03:54
First Call Resolution	95.1%	95.1%	94.2%	97.6%	100%	48%
Total Clinical Calls	143	87	102	100	125	171
Total Calls	320	278	283	299	331	424

Requests Processed						
Approvals	1,009	1,170	1,019	852	1,328	1,499
Agreed Reduction	0	0	4	0	0	0
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	0	5	0	0	0	0
State Mandate	0	0	0	0	0	0
Denials	1	0	0	15	2	22
Pended	42	40	40	53	29	56
Total	1,052	1,215	1,063	920	1,359	1,577

Administrative Denials						
Lack of Information	0	0	0	13	2	20
Medicare Primary	N/A	N/A	N/A	N/A	N/A	N/A
Technical (Out of Time Frame)	N/A	N/A	N/A	N/A	N/A	N/A
Total Denied	0	0	0	13	2	20

MD Review						
Medical Necessity	105	105	1	72	151	107
Not Medically Necessary	1	0	0	2	0	2
Referred to MD Rate	10.08%	8.64%	0.09%	8.04%	11.11%	6.91%
Not Medically Necessary Denial Rate	1%	0%	0%	3%	0%	2%
Total MD Review	106	105	1	74	151	109

Reconsiderations						
Overturned	0	0	0	0	0	0
Upheld	0	0	0	0	0	0
Total Reconsiderations	0	0	0	0	0	0

*Reconsiderations are not included in Request Processed Total

	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Pended						
Lack of Information	42	40	31	30	29	50
MD Review	0	0	1	21	0	3
RN Review	0	0	8	2	0	3
Total	42	40	40	53	29	56

Independent Therapy						
Total	232	334	373	303	481	419

Current Month Top 5 LOI Pended Reasons		
1.	Lack of Information	50
2.		
3.		
4.		
5.		

Current Month Top 10 Diagnosis Codes			
1.	F84.0	Autistic disorder	188
2.	G80.9	Cerebral palsy, unspcif	143
3.	M62.81	Muscle weakness (general	81
4.	O90.9	Down syndrome, unspcifi	64
5.	F80.2	Mixed recep-expressiv la	50
6.	S06.890A	Othr sp intracranl injry	42
7.	M62.9	Disorder of muscle, unsp	41
8.	R26.89	Oth abnormalities, gait	40
9.	F82	Specific develop disord	37
10.	M54.5	Low back pain	33

Current Month Top 5 Reasons for MD Denial		
1.	Recipient does not appear to have rehab potential.	2
2.		
3.		
4.		
5.		

Current Month Top 5 Reasons for Lack of Information Denial		
1.	LOI response not received or incomplete	20
2.		
3.		
4.		
5.		

Private Duty Nursing **

Call Metrics	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Administrative						
Abandoned Calls	N/A	N/A	N/A	N/A	N/A	N/A
Average Speed of Answer	N/A	N/A	N/A	N/A	N/A	N/A
Average Talk Time	N/A	N/A	N/A	N/A	N/A	N/A
First Call Resolution	N/A	N/A	N/A	N/A	N/A	N/A
Total Admin Calls	N/A	N/A	N/A	N/A	N/A	N/A
Clinical						
Abandoned Calls	N/A	N/A	N/A	N/A	N/A	N/A
Average Speed of Answer	N/A	N/A	N/A	N/A	N/A	N/A
Average Talk Time	N/A	N/A	N/A	N/A	N/A	N/A
First Call Resolution	N/A	N/A	N/A	N/A	N/A	N/A
Total Clinical Calls	N/A	N/A	N/A	N/A	N/A	N/A
Total Calls	N/A	N/A	N/A	N/A	N/A	N/A

Requests Processed						
Approvals				196	144	52
Agreed Reduction				0	0	0
Client Approved/Negotiation				0	0	0
Split Decision				1	4	6
State Mandate				0	0	0
Denials				13	3	0
Pended				81	35	38
Total	0	0	0	291	186	96

Administrative Denials						
Lack of Information				0	0	0
Medicare Primary				N/A	N/A	N/A
Technical (Out of Time Frame)				N/A	N/A	N/A
Total Denied				N/A	N/A	N/A

MD Review						
Medical Necessity				0	0	16
Not Medically Necessary				13	3	0
Referred to MD Rate				0.00%	0.00%	0.00%
Not Medically Necessary Denial Rate				0%	0%	0%
Total MD Review				13	3	16

Reconsiderations						
Overturned				6	0	4
Upheld				0	10	0
Total Reconsiderations				6	10	4

*Reconsiderations are not included in Request Processed Total

** Private Duty Nursing (PDN) is included on this report effective June 2016

	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Pended						
Escalated				N/A	N/A	N/A
Lack of Information				81	25	38
MD Review				0	6	0
RN Review				0	4	0
Total	0	0	0	81	35	38

Current Month Top 5 LOI Pended Reasons		
1.	Lack of Information	38
2.		
3.		
4.		
5.		

Current Month Top 10 Diagnosis Codes			
1.	Q90.9	Down syndrome, unspecifi	12
2.	G93.40	Encephalopathy, unspecif	6
3.	J98.4	Other disorders of lung	6
4.	345.91	EPILEPSY NOS W/INTRACT E	6
5.	277.02	CYSTIC FIBROSIS W/PULMON	6
6.	759.89	ANOMALY, CONGENITAL NEC	6
7.	G93.49	Other encephalopathy	6
8.	F84.0	Autistic disorder	6
9.	K91.2	Postsurgical malabsorpti	6
10.	G71.12	Myotonia congenita	6

Current Month Top 5 Reasons for MD Denial	
1.	N/A
2.	
3.	
4.	
5.	

Current Month Top 5 Reasons for Lack of Information Denial	
1.	N/A
2.	
3.	
4.	
5.	

Physician Services

Call Metrics	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Administrative						
Abandoned Calls	6	9	9	26	10	8
Average Speed of Answer	00:42	00:51	00:40	02:11	01:13	00:51
Average Talk Time	03:09	03:18	02:33	03:22	03:04	02:50
First Call Resolution	100.0%	100.0%	100.0%	98.7%	94.7%	98.8%
Total Admin Calls	358	269	304	362	290	353
Clinical						
Abandoned Calls	6	9	9	26	10	8
Average Speed of Answer	00:09	00:09	00:09	00:09	00:09	00:09
Average Talk Time	03:55	03:55	03:55	03:55	03:55	03:55
First Call Resolution	88%	100%	86%	100%	100%	100%
Total Clinical Calls	85	45	57	62	53	33
Total Calls	443	314	361	424	343	386

Requests Processed						
Approvals	58	47	49	63	41	38
Administrative Approval	5	14	6	7	9	10
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	0	0	0	0	0	0
State Mandate	0	0	0	0	0	0
Denials	2	0	0	2	0	0
Pended	15	8	11	6	12	6
Total	80	69	66	78	62	54

Administrative Denials						
Lack of Information	0	0	0	0	0	0
Medicare Primary	N/A	N/A	N/A	N/A	N/A	N/A
Technical (Out of Time Frame)	0	0	0	0	0	0
Total Denied	0	0	0	0	0	0

MD Review						
Medical Necessity	24	21	21	17	15	18
Not Medically Necessary	2	0	0	2	0	0
Referred to MD Rate	32.50%	30.43%	31.82%	24.36%	24.19%	33.33%
Not Medically Necessary Denial Rate	8%	0%	0%	11%	0%	0%
Total MD Review	26	21	21	19	15	18

Reconsiderations						
Overtured	0	0	0	0	0	0
Upheld	0	0	0	0	0	0
Total Reconsiderations	0	0	0	0	0	0

*Reconsiderations are not included in Request Processed Total

	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Pended						
Lack of Information Incomplete Data (Consent Forms)	N/A	N/A	N/A	N/A	N/A	N/A
MD Review	3	3	5	3	6	4
RN Review	0	0	0	0	0	0
	12	5	6	3	6	2
Total	15	8	11	6	12	6

Current Month Top 5 LOI Pended Reasons	
1.	N/A
2.	
3.	
4.	
5.	

Current Month Top 10 Diagnosis Codes			
1.	G47.33	Obstructive sleep apnea(7
2.	J44.9	Chro obstruc pulm dz uns	3
3.	Z30.2	Encounter for sterilizat	3
4.	M26.02	Maxillary hypoplasia	3
5.	C50.912	Mal neo unspec site lt f	2
6.	R06.83	Snoring	2
7.	K31.84	Gastroparesis	2
8.	I83.91	Asymptomatic vracs vein,r	2
9.	I87.323	Chrcn vnous HTN w/inflm,	2
10.	R10.2	Pelvic and perineal pain	2

Current Month Top 5 Reasons for MD Denial	
1.	N/A
2.	
3.	
4.	
5.	

Current Month Top 5 Reasons for Lack of Information Denial	
1.	N/A
2.	
3.	
4.	
5.	

Psychiatric Programs

Call Metrics	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Administrative						
Abandoned Calls	8	8	6	18	7	15
Average Speed of Answer	00:52	00:56	00:40	01:29	01:23	00:57
Average Talk Time	02:45	02:55	02:17	02:32	02:28	02:33
First Call Resolution	100%	100%	100%	100%	100%	100%
Total Admin Calls	270	283	217	263	228	295
Clinical						
Abandoned Calls	1	3	2	3	4	9
Average Speed of Answer	01:13	00:54	00:40	00:38	00:38	01:01
Average Talk Time	08:04	08:01	08:49	08:26	08:58	09:24
First Call Resolution	100%	100%	100%	100%	100%	100%
Total Clinical Calls	229	239	197	218	175	230
Total Calls	499	522	414	481	403	525

Requests Processed	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Approvals	212	238	210	217	183	235
Agreed Reduction	0	0	0	0	0	0
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	0	0	0	0	0	0
State Mandate	0	0	0	0	0	0
Denials	3	0	1	2	6	2
Pended	4	10	3	8	6	11
Total	219	248	214	227	195	248

Administrative Denials	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Lack of Information	N/A	N/A	N/A	N/A	N/A	N/A
Medicare Primary	N/A	N/A	N/A	N/A	N/A	N/A
Technical (Out of Time Frame)	0	0	0	0	4	0
Total Denied	0	0	0	0	4	0

MD Review	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Medical Necessity	0	0	2	1	2	2
Not Medically Necessary	3	0	1	2	2	2
Referred to MD Rate	1.37%	0.00%	1.40%	1.32%	2.05%	1.61%
Not Medically Necessary Denial Rate	100%	0%	33%	67%	50%	50%
Total MD Review	3	0	3	3	4	4

Reconsiderations	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Overtured	2	1	0	0	0	0
Upheld	2	0	0	0	0	0
Total Reconsiderations	4	1	0	0	0	0

*Reconsiderations are not included in Request Processed Total

Pended	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Lack of Information	0	0	0	0	0	0
RN Review	4	10	3	8	6	11
MD Review	0	0	0	0	0	0
Total	4	10	3	8	6	11

By Place of Service	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Distinct Part Units - Psychiatric	46	43	62	55	41	60
EPSDT	16	13	8	12	7	3
Freestanding Psychiatric Facility	19	28	27	26	25	35
Inpatient Hospital	12	8	4	1	0	2
Non-Freestanding Psychiatric Facility	128	147	110	132	120	143
Onsite EPSDT Psych	0	0	0	0	0	0
Psychiatric Residential Treatment Center	2	10	3	1	2	5
Total	223	249	214	227	195	248

Current Month Top 5 LOI Pended Reasons	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
1.	Lack of Information					N/A
2.						
3.						
4.						
5.						

Current Month Top 10 Diagnosis Codes	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
1.	F84.0	Autistic disorder				2
2.	F90.2	ADHD, combined type				1
3.	F31.31	BD, current episode depr				1
4.	F43.10	Post-traumtc stress diso				1
5.						
6.						
7.						
8.						
9.						
10.						

Current Month Top 5 Reasons for MD Denial	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
1.	Not medically necessary					2
2.						
3.						
4.						
5.						

Current Month Top 5 Reasons for Lack of Information Denial	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
1.	N/A					
2.						
3.						
4.						
5.						

Radiology

Call Metrics	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Administrative						
Abandoned Calls	12	8	17	30	12	16
Average Speed of Answer	00:32	00:49	00:52	02:13	01:16	00:58
Average Talk Time	03:30	03:22	03:20	03:32	03:31	03:26
First Call Resolution	99.5%	99.6%	100%	100%	99.8%	99.8%
Total Admin Calls	652	580	639	552	516	663
Clinical						
Abandoned Calls	0	0	0	0	0	4
Average Speed of Answer	00:15	00:10	00:16	00:21	01:17	00:42
Average Talk Time	06:19	05:55	05:51	05:50	05:47	05:31
First Call Resolution	95%	95%	94%	98%	100%	99.2%
Total Clinical Calls	430	351	385	345	314	420
Total Calls	1,082	931	1,024	897	830	1,083

Requests Processed	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Approvals	468	380	444	388	365	471
Agreed Reduction	0	0	0	0	0	0
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	0	0	0	0	0	0
State Mandate	0	0	0	0	0	0
Denials	0	0	0	2	1	5
Pended	11	6	4	13	9	14
Total	479	386	448	403	375	490

Administrative Denials	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Lack of Information	0	0	0	1	1	0
Medicare Primary	N/A	N/A	N/A	N/A	N/A	N/A
Technical (Out of Time Frame)	N/A	N/A	N/A	N/A	N/A	N/A
Total Denied	0	0	0	1	1	0

MD Review	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Medical Necessity	89	89	83	70	79	87
Not Medically Necessary	0	0	0	1	0	5
Referred to MD Rate	18.58%	23.06%	18.53%	17.62%	21.07%	18.78%
Not Medically Necessary Denial Rate	0%	0%	0%	1%	0%	5%
Total MD Review	89	89	83	71	79	92

Reconsiderations	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Overturned	0	0	0	0	0	0
Upheld	0	0	0	0	0	0
Total Reconsiderations	0	0	0	0	0	0

*Reconsiderations are not included in Request Processed Total

	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16
Pended						
Lack of Information	1	0	0	1	1	0
MD Review	4	0	0	6	0	3
RN Review	6	6	4	6	8	11
Total	11	6	4	13	9	14

Current Month Top 5 LOI Pended Reasons	
1.	N/A
2.	
3.	
4.	
5.	

Current Month Top 10 Diagnosis Codes			
1.	R07.9	Chest pain, unspecified	47
2.	M54.5	Low back pain	45
3.	M54.2	Cervicalgia	14
4.	M54.16	Radiculopathy, lumbar re	13
5.	R51	Headache	13
6.	G35	Multiple sclerosis	12
7.	I25.10	Athr hrt dz ntv cornry a	10
8.	Q05.2	Lumbar spina bifida w hy	8
9.	M54.12	Radiculopathy, cervical	8
10.	M25.511	Pain in right shoulder	7

Current Month Top 5 Reasons for MD Denial		
1.	Not medically necessary	5
2.		
3.		
4.		
5.		

Current Month Top 5 Reasons for Lack of Information Denial	
1.	N/A
2.	
4.	
5.	



KY Department for Medicaid Services Administrative Hearings Report

**Report runs off Status of In Progress for open cases.*

Report Run Date: Sep 14, 2016
 New/In Progress/Closed/All In Progress

Case Type	Primary Category	Appeal Type	Status	Appeal Start Date	Decision Required Date	Attending Physician
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	May 19, 2016	Jun 24, 2016	PELLEGRINI, ADRIAN
Waiver	Michelle P - LOC	Administrative Hearings	In Progress	Dec 15, 2015	Jan 8, 2016	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	Jan 5, 2016	Feb 12, 2016	PELLEGRINI, ADRIAN
Waiver	ABI LTC Waiver LOC	Administrative Hearings	In Progress	May 9, 2016	May 20, 2016	PELLEGRINI, ADRIAN
Waiver	Michelle P - LOC	Administrative Hearings	In Progress	Apr 9, 2015	Jun 26, 2015	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	Aug 31, 2016	Nov 15, 2016	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	Aug 11, 2016	Sep 19, 2016	PELLEGRINI, ADRIAN
Waiver	Michelle P - LOC	Administrative Hearings	In Progress	Mar 4, 2016	Mar 29, 2016	PELLEGRINI, ADRIAN
Waiver	Michelle P - LOC	Administrative Hearings	In Progress	Jul 8, 2015	Aug 18, 2015	PELLEGRINI, ADRIAN
Waiver	HCBC - LOC	Administrative Hearings	In Progress	Jun 6, 2016	Jul 13, 2016	PELLEGRINI, ADRIAN
Home Health	Home Health	Administrative Hearings	In Progress	Jun 18, 2014	Jul 30, 2014	PELLEGRINI, ADRIAN
Waiver	ABI LTC Waiver LOC	Administrative Hearings	In Progress	Jul 18, 2016	Jul 29, 2016	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	Aug 23, 2016	Sep 13, 2016	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	Aug 18, 2016	Sep 6, 2016	PELLEGRINI, ADRIAN
Waiver	Michelle P - LOC	Administrative Hearings	In Progress	May 10, 2016	May 26, 2016	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	Oct 28, 2015	Jan 28, 2016	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	Aug 4, 2016	Sep 9, 2016	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	Jul 20, 2016	Aug 4, 2016	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	Jul 18, 2016	Aug 1, 2016	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	May 31, 2016	Aug 9, 2016	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	Jul 20, 2016	Aug 4, 2016	PELLEGRINI, ADRIAN



*Cabinet for Health and Family Services
Department for Medicaid Services*

Utilization Management Operational Status Report

Status Month: September 2016

**Report Date: October 15, 2016
Author: Carewise Health Staff**

Acute Inpatient Services

Call Metrics	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Administrative						
Abandoned Calls	39	18	54	46	55	47
Average Speed of Answer	00:39	00:19	00:51	00:35	00:45	00:33
Average Talk Time	03:27	03:09	03:28	03:09	03:16	02:55
First Call Resolution	99.3%	98.8%	99.4%	99.5%	99.5%	100%
Total Admin Calls	1715	1775	1916	1830	2087	1845
Clinical						
Abandoned Calls	0	1	3	7	13	2
Average Speed of Answer	00:34	00:26	00:41	02:06	02:23	01:04
Average Talk Time	06:47	06:27	05:41	05:51	05:32	06:29
First Call Resolution	98.6%	95.2%	96.2%	91.0%	95.7%	100%
Total Clinical Calls	258	271	287	253	314	239
Total Calls	1973	2046	2203	2083	2401	2084

Requests Processed	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Approvals	263	457	233	190	281	211
Administrative Approval	1,466	1,415	1,520	1,363	1,576	1,294
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	0	0	0	0	0	0
State Mandate	0	0	0	0	0	0
Denials	27	18	17	15	15	24
Pended	38	31	35	38	24	16
Total	1,794	1,921	1,805	1,606	1,896	1,545

Administrative Denials	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Technical (Out of Time Frame)	24	18	13	14	14	22
Medicare Primary	N/A	N/A	N/A	N/A	N/A	N/A
Lack of Information	N/A	N/A	N/A	N/A	N/A	N/A
Total Denied	24	18	13	14	14	22

MD Review	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Medical Necessity	17	28	27	15	23	17
Not Medically Necessary	2	0	4	1	1	2
Referred to MD Rate	1.06%	1.46%	1.72%	1.00%	1.27%	1.23%
Not Medically Necessary Denial Rate	11%	0%	13%	6%	4%	11%
Total MD Review	19	28	31	16	24	19

Reconsiderations	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Overtured	2	0	1	0	0	0
Upheld	0	0	0	0	0	0
Total Reconsiderations	2	0	1	0	0	0

*Reconsiderations are not included in Request Processed Total

	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Pended						
Escalated	0	0	0	0	0	0
Lack of Information	1	5	0	0	0	0
MD Review	0	0	0	0	0	0
RN Review	37	31	35	38	24	16
Total	38	36	35	38	24	16

Current Month Top 5 LOI Pended Reasons	
1.	N/A
2.	
3.	
4.	
5.	

Current Month Top 10 Diagnosis Codes			
1.	J18.9	Pneumonia, unspecified o	97
2.	A41.9	Sepsis, unspecified orga	64
3.	J44.1	Chron obstr pulm dz w/ex	38
4.	J96.90	Resp fail, unsp, w/hypoxia	35
5.	I50.9	Heart failure, unspecifi	31
6.	N17.9	Acute kidney failure, un	28
7.	J96.01	Acute respiratory failur	27
8.	J96.00	Acut resp fail, unsp w/hy	26
9.	I63.9	Cerebral infarction, uns	24
10.	N39.0	Urinary tract infectn, si	22

Current Month Top 5 Reasons for MD Denial		
1.	Not medically necessary	2
2.		
3.		
4.		
5.		

Current Month Top 5 Reasons for Lack of Information Denial	
1.	N/A
2.	
3.	
4.	
5.	

Durable Medical Equipment

Call Metrics	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Administrative						
Abandoned Calls	15	7	25	22		
Average Speed of Answer	00:55	00:37	01:45	01:19	01:05	00:54
Average Talk Time	03:43	03:20	03:34	03:31	03:24	03:22
First Call Resolution	99.0%	98.4%	99.7%	94.0%	99.7%	99.5%
Total Admin Calls	474	497	475	503	493	479
Clinical						
Abandoned Calls	16	6	6	5	22	20
Average Speed of Answer	01:51	00:51	00:38	01:05	02:19	02:12
Average Talk Time	05:18	04:51	05:07	04:23	04:47	05:00
First Call Resolution	98.6%	99.5%	96.9%	99.7%	89.2%	89.0%
Total Clinical Calls	245	237	229	176	188	191
Total Calls	719	734	704	679	681	670

Requests Processed						
Approvals	1,398	1,362	1,124	1,111	1,472	1,125
Agreed Reduction	0	0	0	0	0	0
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	0	0	1	1	0	0
State Mandate	0	0	0	0	0	1
Denials	23	17	86	49	167	423
Pended	460	392	509	382	388	291
Total	1,881	1,771	1,720	1,543	2,027	1,840

Administrative Denials						
Technical (Out of Time Frame)	N/A	N/A	N/A	N/A	N/A	N/A
Medicare Primary	N/A	N/A	N/A	N/A	N/A	N/A
Lack of Information	0	0	70	33	159	408
Total Denied	0	0	70	33	159	408

MD Review						
Medical Necessity	114	134	77	63	84	120
Not Medically Necessary	23	17	16	16	8	15
Referred to MD Rate	7.28%	8.53%	5.41%	5.12%	4.54%	7.34%
Not Medically Necessary Denial Rate	17%	11%	17%	20%	9%	11%
Total MD Review	137	151	93	79	92	135

Reconsiderations						
Overtured	2	17	0	2	0	0
Upheld	1	1	0	0	2	0
Total Reconsiderations	3	18	0	2	2	0

*Reconsiderations are not included in Request Processed Total

	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Pended						
Escalated	N/A	N/A	N/A	N/A	N/A	N/A
Lack of Information	457	388	496	377	381	276
MD Review	3	3	6	5	5	4
RN Review	0	1	7	0	2	11
HP Review	0	0	0	0	0	0
Total	460	392	509	382	388	291

Current Month Top 5 LOI Pended Reasons		
1.	Lack of Information	276
2.		
3.		
4.		
5.		

Current Month Top 10 Diagnosis Codes		
1.	G80.9 Cerebral palsy, unspecif	375
2.	J44.9 Chro obstruc pulm dz uns	76
3.	G80.0 Spastic quadriplegic cer	51
4.	G47.33 Obstructive sleep apnea(49
5.	G82.50 Quadriplegia, unspecifie	36
6.	G82.20 Paraplegia, unspecified	34
7.	G80.8 Other cerebral palsy	28
8.	G71.0 Muscular dystrophy	24
9.	G80.1 Spastic diplegic cerebra	24
10.	R26.9 Uns abnormalities, gait	23

Current Month Top 5 Reasons for MD Denial		
1.	Not medically necessary	12
2.	Equipment is used primarily for the convenience of the recipient or caregiver. 907 KAR 1:479(6) and 907 KAR 3:130	1
3.	Item is not primarily and customarily used for a medical purpose. 907 KAR 1:479(6) and 907 KAR 3:130	1
4.	Item is not primarily for use in the home.	1
5.		

Current Month Top 5 Reasons for Lack of Information Denial		
1.	LOI response not received or incomplete	408
2.		
3.		
4.		
5.		

DRG

	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Target File						
Target File	250	250	250	250	250	250
On-Site Requested	46	44	35	41	37	41
In-House	204	206	215	209	213	209

Outcomes						
Total Approved	215	230	242	218	219	221

Outcomes						
Total Denied	35	20	8	32	31	29

Denial Reasons						
Not Medically Necessary	1	0	0	2	0	0
Technical	34	20	7	29	31	29
Reassignments	0	0	1	1	0	0
Billing	0	0	0	0	0	0
Total Denial Reasons	35	20	8	32	31	29

Reconsiderations						
Approved	3	0	0	0	0	0
Denied	1	0	0	1	0	0
Total Reviewed	4	0	0	1	0	0

Quality of Concern						
Severity 1 - Quality concern with minimum potential for significant effect (s) on the patient	0	0	0	0	0	0
Severity 2 - Quality problem with the potential for significant adverse effect (s) on the patient	0	0	0	0	0	0
Severity 3 - Quality problem with significant adverse affect (s) on the patient	0	0	0	0	0	0
Total Denied	0	0	0	0	0	0

EPSDT Special Services

Call Metrics	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Administrative						
Abandoned Calls	1	2	2	3	3	2
Average Speed of Answer	00:22	00:24	00:49	00:29	00:50	00:40
Average Talk Time	04:41	03:18	03:49	03:52	04:14	03:49
First Call Resolution	98.9%	100%	100%	98.5%	99.6%	99.5%
Total Admin Calls	135	94	136	175	173	127
Clinical						
Abandoned Calls	0	2	3	7	0	3
Average Speed of Answer	00:49	00:21	01:06	01:54	01:01	00:29
Average Talk Time	05:08	03:29	03:09	03:37	04:10	03:58
First Call Resolution	93.4%	92.6%	100.0%	94.1%	42.6%	67.0%
Total Clinical Calls	85	61	93	125	110	107
Total Calls	220	155	229	300	283	234

Requests Processed	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Approvals	1,172	790	1,589	1,098	947	1,454
Agreed Reduction	0	1	0	0	0	0
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	0	0	0	0	0	0
State Mandate	2	0	0	0	0	0
Denials	0	1	3	0	3	53
Pended	59	44	62	45	50	60
Total	1,233	836	1,654	1,143	1,000	1,567

Administrative Denials	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Technical (Out of Time Frame)	N/A	N/A	N/A	N/A	N/A	N/A
Medicare Primary	N/A	N/A	N/A	N/A	N/A	N/A
Lack of Information	0	0	0	0	0	53
Total Denied	0	0	0	0	0	53

MD Review	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Medical Necessity	3	2	6	7	3	2
Not Medically Necessary	0	1	3	0	3	0
Referred to MD Rate	0.24%	0.36%	0.54%	0.61%	0.60%	0.13%
Not Medically Necessary Denial Rate	0%	33%	33%	0%	50%	0%
Total MD Review	3	3	9	7	6	2

Reconsiderations	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Overtaken	2	0	0	2	1	0
Upheld	0	0	0	0	0	0
Total Reconsiderations	2	0	0	2	1	0

*Reconsiderations are not included in Request Processed Total

	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Pended						
Escalated	N/A	N/A	N/A	N/A	N/A	N/A
Lack of Information	55	44	57	44	47	54
MD Review	0	0	2	0	0	2
RN Review	4	0	3	1	3	4
Total	213	224	208	257	50	60

Current Month Top 5 LOI Pended Reasons		
1.	Lack of Information	54
2.		
3.		
4.		
5.		

Current Month Top 10 Diagnosis Codes			
1.	F84.0	Autistic disorder	493
2.	Q90.9	Down syndrome, unspecifi	155
3.	G80.9	Cerebral palsy, unspecif	126
4.	R62.50	Uns lack nrml physiologcl	55
5.	F80.2	Mixed recep-expressiv la	47
6.	Q90.0	Trisomy 21 nonmosaicism	21
7.	F81.9	Develop disord of schola	19
8.	R27.8	Other lack of coordinati	19
9.	F82	Specific develop disord	16
10.	F80.89	Oth develop disord spec	14

Current Month Top 5 Reasons for MD Denial		
1.	N/A	
2.		
3.		
4.		
5.		

Current Month Top 5 Reasons for Lack of Information Denial		
1.	LOI response not received or incomplete	53
2.		
3.		
4.		
5.		

Home Health

Call Metrics	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Administrative						
Abandoned Calls	33	15	45	36	48	29
Average Speed of Answer	00:55	00:29	01:09	01:19	01:20	00:52
Average Talk Time	04:45	04:06	04:35	04:39	04:09	04:18
First Call Resolution	99.8%	98.8%	99.6%	99.6%	99.4%	99.7%
Total Admin Calls	950	991	1045	987	979	1013
Clinical						
Abandoned Calls	4	5	5	15	3	16
Average Speed of Answer	00:39	00:48	00:44	02:01	00:52	02:10
Average Talk Time	07:26	07:27	07:25	07:52	07:35	08:06
First Call Resolution	99.3%	98.1%	95.8%	98.6%	98.4%	97.5%
Total Clinical Calls	789	855	899	837	826	846
Total Calls	1,739	1,846	1,944	1,824	1,805	1,859

Requests Processed	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Approvals	4,306	3,968	4,492	4,424	4,077	4,200
Agreed Reduction	66	112	0	70	81	84
Client Approved/Negotiation	0	0	0	0	0	1
Split Decision	1	0	0	0	0	3
State Mandate	0	0	17	0	0	0
Denials	12	53	23	49	36	35
Pended	102	148	188	119	131	83
Total	4,487	4,281	4,720	4,662	4,325	4,406

Administrative Denials	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Lack of Information	N/A	N/A	N/A	N/A	N/A	N/A
Medicare Primary	1	10	0	2	2	0
Technical (Out of Time Frame)	10	31	13	41	29	23
Total Denied	11	41	13	43	31	23

MD Review	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Medical Necessity	13	33	34	81	44	40
Not Medically Necessary	1	12	10	6	5	12
Referred to MD Rate	0.31%	1.05%	0.93%	1.87%	1.13%	1.18%
Not Medically Necessary Denial Rate	7%	27%	23%	7%	10%	23%
Total MD Review	14	45	44	87	49	52

Reconsiderations	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Overtaken	1	0	6	0	0	1
Upheld	0	0	0	0	0	0
Total Reconsiderations	1	0	6	0	0	1

*Reconsiderations are not included in Request Processed Total

Pended	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Escalated	N/A	N/A	N/A	N/A	N/A	N/A
Unreviewed	46	46	69	47	89	64
MD Review	1	1	10	1	3	1
RN Review	55	55	109	71	39	18
Total	102	102	188	119	131	83

Current Month Top 5 LOI Pended Reasons	Apr-16
1.	N/A
2.	
3.	
4.	
5.	

Current Month Top 10 Diagnosis Codes	Apr-16	
1.	G80.9 Cerebral palsy, unspecif	379
2.	F79 Unspec intellectual disa	222
3.	F84.0 Autistic disorder	177
4.	E11.9 Type 2 DM w/o complicati	169
5.	R32 Unspecified urinary inco	150
6.	J44.9 Chro obstruc pulm dz uns	131
7.	I10 Essential (primary) hype	121
8.	O90.9 Down syndrome, unspecifi	95
9.	F71 Moderate intellectual di	90
10.	F72 Severe intellectual disa	78

Current Month Top 5 Reasons for MD Denial	Apr-16	
1.	Not medically necessary	10
2.	Additional skilled nursing visits are not medically necessary.	1
3.	Recipient has already received one social service vist this plan of care.	1
4.		
5.		

Current Month Top 5 Reasons for Lack of Information Denial	Apr-16
1.	N/A
2.	
3.	
4.	
5.	

Hospice

Call Metrics	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Administrative						
Abandoned Calls	N/A	N/A	N/A	N/A	N/A	N/A
Average Speed of Answer	N/A	N/A	N/A	N/A	N/A	N/A
Average Talk Time	N/A	N/A	N/A	N/A	N/A	N/A
First Call Resolution	N/A	N/A	N/A	N/A	N/A	N/A
Total Admin Calls	N/A	N/A	N/A	N/A	N/A	N/A
Clinical						
Abandoned Calls	N/A	N/A	N/A	N/A	N/A	N/A
Average Speed of Answer	N/A	N/A	N/A	N/A	N/A	N/A
Average Talk Time	N/A	N/A	N/A	N/A	N/A	N/A
First Call Resolution	N/A	N/A	N/A	N/A	N/A	N/A
Total Clinical Calls	N/A	N/A	N/A	N/A	N/A	N/A
Total Calls	N/A	N/A	N/A	N/A	N/A	N/A

Requests Processed	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Approvals	177	30	130	10	281	39
Agreed Reduction	N/A	N/A	N/A	N/A	N/A	0
Client Approved/Negotiation	N/A	N/A	N/A	N/A	N/A	0
Split Decision	0	0	0	0	0	0
State Mandate	0	0	0	0	0	0
Denials	0	0	0	0	0	54
Pended	16	4	6	5	34	17
Total	193	34	136	15	315	110

Administrative Denials	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Lack of Information	N/A	N/A	N/A	N/A	N/A	54
Medicare Primary	N/A	N/A	N/A	N/A	N/A	N/A
Technical (Out of Time Frame)	N/A	N/A	N/A	N/A	N/A	N/A
Total Denied	N/A	N/A	N/A	N/A	N/A	N/A

MD Review	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Medical Necessity	0	0	0	0	0	0
Not Medically Necessary	0	0	0	0	0	0
Referred to MD Rate	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Not Medically Necessary Denial Rate	0%	0%	0%	0%	0%	0%
Total MD Review	0	0	0	0	0	0

Reconsiderations	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Overtured	0	0	0	0	0	0
Upheld	0	0	0	0	0	0
Total Reconsiderations	0	0	0	0	0	0

*Reconsiderations are not included in Request Processed Total

Pended	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Escalated	N/A	N/A	N/A	N/A	N/A	N/A
Lack of Information	59	15	3	5	31	17
MD Review	0	0	0	0	0	0
RN Review	11	1	3	0	3	0
Total	70	16	6	5	34	17

Current Month Top 5 LOI Pended Reasons	
1.	Lack of Information 17
2.	
3.	
4.	
5.	

Current Month Top 10 Diagnosis Codes		
1.	J44.9	Chro obstruc pulm dz uns 14
2.	429.9	DISEASE, HEART NOS 10
3.	G12.21	Amyotrophic lateral scl 8
4.	G31.83	Dementia with Lewy bodie 7
5.	C34.90	Mal neo unsp part unsp b 7
6.	I50.32	Chrc diastolc(cngstv)he 6
7.	C32.9	Malignant neopl larynx, 6
8.	C20	Malignant neoplasm of re 6
9.	332.0	PARALYSIS AGITANS 6
10.	G30.9	Alzheimer's disease, uns 5

Current Month Top 5 Reasons for MD Denial	
1.	N/A
2.	
3.	
4.	
5.	

Current Month Top 5 Reasons for Lack of Information Denial	
1.	Lack of Information 54
2.	
3.	
4.	
5.	

Nursing Facility

Call Metrics	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Administrative						
Abandoned Calls	4	5	11	6	12	5
Average Speed of Answer	00:58	00:30	01:24	01:35	01:07	00:38
Average Talk Time	04:36	04:06	04:07	05:07	04:30	03:52
First Call Resolution	93.6%	89.1%	87.7%	89.0%	97.5%	96.6%
Total Admin Calls	261	299	336	332	403	447
Clinical						
Abandoned Calls	1	5	0	0	0	0
Average Speed of Answer	00:33	01:02	00:04	00:02	00:09	00:02
Average Talk Time	05:26	05:05	05:22	06:00	07:13	07:38
First Call Resolution	85.4%	94.9%	96.0%	97.4%	95.4%	98.1%
Total Clinical Calls	169	184	203	194	216	289
Total Calls	430	483	539	526	619	736

Requests Processed	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Approvals	2,989	6,179	7,516	4,521	6,724	5,705
Initial LOC Approval	2,164	2,063	2,382	2,618	2,453	2,312
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	0	0	0	0	0	0
State Mandate	10	4	2	0	3	1
Denials	6	7	2	3	316	262
Pended	255	219	374	302	242	261
Total	5,424	8,472	10,276	7,444	9,738	8,541

Administrative Denials	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Lack of Information	0	0	0	0	312	259
Non-Certified Bed	1	0	0	0	0	0
Total Denied	1	0	0	0	312	259

*Reconsiderations are not included in Request Processed Total

MD Review	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Medical Necessity	9	10	8	2	15	7
Not Medically Necessary	5	7	2	3	4	3
Referred to MD Rate	5.49%	7.76%	2.67%	1.66%	7.85%	3.83%
Not Medically Necessary Denial Rate	36%	41%	20%	60%	21%	30%
Total MD Review	14	17	10	5	19	10

Reconsiderations	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Overturned	1	2	0	1	1	2
Upheld	0	0	1	0	1	0
Total Reconsiderations	1	2	1	1	2	2

*Reconsiderations are not included in Request Processed Total

	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Pended						
Lack of Information	240	204	353	292	227	239
MD Review	0	0	0	0	0	0
RN Review	15	15	21	10	15	22
Total	255	219	374	302	242	261

Current Month Top 5 LOI Pended Reasons		
1.	Lack of Information	239
2.		
3.		
4.		
5.		

Current Month Top 10 Diagnosis Codes			
1.	F03.90	Unsp dementia w/o behavi	731
2.	I10	Essential (primary) hype	595
3.	J44.9	Chro obstruc pulm dz uns	553
4.	G30.9	Alzheimer's disease, uns	382
5.	E11.9	Type 2 DM w/o complicati	315
6.	I50.9	Heart failure, unspecifi	261
7.	M62.81	Muscle weakness (general	170
8.	I48.91	Unspec atrial fibrillati	158
9.	F02.81	Dementia othr dzs CE w b	143
10.	F02.80	Dem oth dzs CE w/o behav	127

Current Month Top 5 Reasons for MD Denial		
1.	Not medically necessary	2
2.	Recipient does not have a stable medical condition requiring intermittent high-intensity nursing care, continuous personal care or supervision in an institutional setting. 907 KAR 1:022(4) and 907 KAR 3:130	1
3.		
4.		
5.		

Current Month Top 5 Reasons for Lack of Information Denial		
1.	Lack of Information	259
2.		
3.		
4.		
5.		

Nursing Facility Ancillary

Call Metrics	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Administrative						
Abandoned Calls	39	53	37	68	73	42
Average Speed of Answer	00:43	00:52	00:39	01:03	01:02	00:51
Average Talk Time	03:44	03:37	03:27	03:31	03:28	03:21
First Call Resolution	99.4%	93.6%	89.0%	89.0%	97.5%	96.6%
Total Admin Calls	1192	1022	1065	992	1118	1077

Clinical						
Abandoned Calls	N/A	N/A	N/A	N/A	N/A	N/A
Average Speed of Answer	N/A	N/A	N/A	N/A	N/A	N/A
Average Talk Time	N/A	N/A	N/A	N/A	N/A	N/A
First Call Resolution	N/A	N/A	N/A	N/A	N/A	N/A
Total Clinical Calls	N/A	N/A	N/A	N/A	N/A	N/A
Total Calls	1,192	1,022	1,065	992	1,118	1,077

Requests Processed	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Approvals	2,560	2,784	3,128	2,691	3,146	2,692
Agreed Reduction	0	0	0	0	0	0
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	0	0	0	0	0	0
State Mandate	0	0	0	0	0	0
Denials	189	230	208	170	199	212
Pended	280	215	174	265	198	234
Total	3,029	3,229	3,510	3,126	3,543	3,138

RN Denials/Overturns	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
FRN Criteria	173	211	191	153	186	185
FRN Reconsideration Overturned	7	4	9	3	5	3
FRN Reconsideration Upheld	5	9	7	10	6	13
Total Denied	185	224	207	166	197	201

MD Review	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Medical Necessity	5	4	3	2	4	0
Not Medically Necessary	10	10	10	7	7	14
Referred to MD Rate	0.50%	0.43%	0.37%	0.29%	0.31%	0.45%
Not Medically Necessary Denial Rate	67%	71%	77%	78%	64%	100%
Total MD Review	15	14	13	9	11	14

Reconsiderations	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Overturned	0	3	1	1	1	2
Upheld	2	1	0	0	1	0
Total Reconsiderations	2	4	1	1	2	2

*Reconsiderations are not included in Request Processed Total

Pended	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
MD Review	0	0	0	0	2	0
RN Review	280	215	174	265	196	234
Total	280	215	174	265	198	234

Current Month Top 5 LOI Pended Reasons	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
1.	N/A					
2.						
3.						
4.						
5.						

Current Month Top 10 Diagnosis Codes	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
1.	J44.9	Chro obstruc pulm dz uns				683
2.	M62.81	Muscle weakness (general)				290
3.	R06.02	Shortness of breath				228
4.	I50.9	Heart failure, unspecifi				111
5.	R26.2	Difficulty in walking, N				79
6.	R09.02	Hypoxemia				77
7.	J44.1	Chron obstr pulm dz w/ex				67
8.	J18.9	Pneumonia, unspecified o				59
9.	I10	Essential (primary) hype				47
10.	R27.8	Other lack of coordinati				44

Current Month Top 5 Reasons for MD Denial	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
1.	Not medically necessary					11
2.	Oxygen therapy is not medically necessary or appropriate for the recipient's diagnosis or condition. 907 KAR 1:023 and 907 KAR 3:130					2
3.	Documentation is inadequate to determine the ongoing need for the services. 907 KAR 1:023 and 907 KAR 3:130					1
4.						
5.						

Current Month Top 5 Reasons for Lack of Information Denial	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
1.	N/A					
2.						
3.						
4.						
5.						

Orthodontia

Call Metrics	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Administrative						
Abandoned Calls	0	0	3	1	1	1
Average Speed of Answer	00:52	00:44	01:11	01:37	01:22	01:26
Average Talk Time	02:41	01:42	02:40	02:20	01:23	03:21
First Call Resolution	100%	100%	100%	100%	100%	100%
Total Admin Calls	19	13	30	33	28	25

Clinical	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Abandoned Calls	N/A	N/A	N/A	N/A	N/A	N/A
Average Speed of Answer	N/A	N/A	N/A	N/A	N/A	N/A
Average Talk Time	N/A	N/A	N/A	N/A	N/A	N/A
First Call Resolution	N/A	N/A	N/A	N/A	N/A	N/A
Total Clinical Calls	N/A	N/A	N/A	N/A	N/A	N/A
Total Calls	19	13	30	33	28	25

Requests Processed	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Approvals	24	6	12	20	10	8
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	0	0	0	0	0	0
State Mandate	0	0	0	0	0	0
Denials	0	0	0	0	0	16
Pended	0	0	4	0	8	10
Total	24	6	16	20	18	34

Administrative Denials	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Lack of Information	N/A	N/A	N/A	N/A	N/A	N/A
Medicare Primary	N/A	N/A	N/A	N/A	N/A	N/A
Technical (Out of Time Frame)	N/A	N/A	N/A	N/A	N/A	N/A
Total Denied	N/A	N/A	N/A	N/A	N/A	N/A

MD Review	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Medical Necessity	0	0	0	0	0	0
Not Medically Necessary	0	0	0	0	0	0
Referred to MD Rate	0%	0%	0%	0%	0%	0%
Not Medically Necessary Denial Rate	0%	0%	0%	0%	0%	0%
Total MD Review	0	0	0	0	0	0

Reconsiderations	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Overturned	0	0	0	0	0	0
Upheld	0	0	0	0	0	0
Total Reconsiderations	0	0	0	0	0	0

*Reconsiderations are not included in Request Processed Total

Pended	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Lack of Information	0	0	0	0	0	0
MD Review	0	0	3	0	8	10
RN Review	0	0	1	0	0	0
Total	0	0	4	0	8	10

Current Month Top 5 LOI Pended Reasons	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
1.	N/A					
2.						
3.						
4.						
5.						

Current Month Top 10 Diagnosis Codes	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
1.	Z46.4	Encntr fitting&adjust or				27
2.	V58.5	ORTHODONTICS AFTERCARE				7
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						

Current Month Top 5 Reasons for MD Denial	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
1.	Not medically necessary					16
2.						
3.						
4.						
5.						

Current Month Top 5 Reasons for Lack of Information Denial	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
1.	N/A					
2.						
3.						
4.						
5.						

Outpatient Therapies

Call Metrics	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Administrative						
Abandoned Calls	3	4	10	8	5	4
Average Speed of Answer	00:59	01:05	02:17	00:52	00:48	00:41
Average Talk Time	03:41	03:36	04:06	03:33	03:19	03:31
First Call Resolution	99.6%	100%	100%	100%	99%	99%
Total Admin Calls	191	181	199	206	253	226
Clinical						
Abandoned Calls	2	2	2	3	5	4
Average Speed of Answer	00:31	00:32	00:30	01:07	00:58	01:21
Average Talk Time	03:43	03:39	04:05	03:45	03:54	03:57
First Call Resolution	95.1%	94.2%	97.6%	100%	48%	32%
Total Clinical Calls	87	102	100	125	171	161
Total Calls	278	283	299	331	424	387

Requests Processed	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Approvals	1,170	1,019	852	1,328	1,499	1,116
Agreed Reduction	0	4	0	0	0	0
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	5	0	0	0	0	0
State Mandate	0	0	0	0	0	0
Denials	0	0	15	2	22	63
Pended	40	40	53	29	56	50
Total	1,215	1,063	920	1,359	1,577	1,229

Administrative Denials	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Lack of Information	0	0	13	2	20	63
Medicare Primary	N/A	N/A	N/A	N/A	N/A	N/A
Technical (Out of Time Frame)	N/A	N/A	N/A	N/A	N/A	N/A
Total Denied	0	0	13	2	20	63

MD Review	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Medical Necessity	105	1	72	151	107	119
Not Medically Necessary	0	0	2	0	2	0
Referred to MD Rate	8.64%	0.09%	8.04%	11.11%	6.91%	9.68%
Not Medically Necessary Denial Rate	0%	0%	3%	0%	2%	0%
Total MD Review	105	1	74	151	109	119

Reconsiderations	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Overturned	0	0	0	0	0	0
Upheld	0	0	0	0	0	2
Total Reconsiderations	0	0	0	0	0	2

*Reconsiderations are not included in Request Processed Total

Pended	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Lack of Information	40	31	30	29	50	41
MD Review	0	1	21	0	3	5
RN Review	0	8	2	0	3	4
Total	40	40	53	29	56	50

Independent Therapy	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Total	334	373	303	481	419	162

Current Month Top 5 LOI Pended Reasons	Count
1. Lack of Information	41
2.	
3.	
4.	
5.	

Current Month Top 10 Diagnosis Codes	Count
1. F84.0 Autistic disorder	106
2. M62.81 Muscle weakness (general)	90
3. G80.9 Cerebral palsy, unspecif	86
4. F80.2 Mixed recep-expressiv la	44
5. F82 Specific develop disord	43
6. M54.5 Low back pain	38
7. Q90.9 Down syndrome, unspecifi	28
8. S06.890A Othr sp intracranl injry	26
9. S24.103A Unsp injry T7-T10 thor s	24
10. G82.50 Quadriplegia, unspecifie	23

Current Month Top 5 Reasons for MD Denial	Count
1. N/A	
2.	
3.	
4.	
5.	

Current Month Top 5 Reasons for Lack of Information Denial	Count
1. LOI response not received or incomplete	63
2.	
3.	
4.	
5.	

Physician Services

Call Metrics	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Administrative						
Abandoned Calls	9	9	26	10	8	5
Average Speed of Answer	00:51	00:40	02:11	01:13	00:51	00:37
Average Talk Time	03:18	02:33	03:22	03:04	02:50	02:58
First Call Resolution	100.0%	100.0%	98.7%	94.7%	98.8%	98.8%
Total Admin Calls	269	304	362	290	353	307
Clinical						
Abandoned Calls	9	9	26	10	8	5
Average Speed of Answer	00:09	00:09	00:09	00:09	00:09	00:09
Average Talk Time	03:55	03:55	03:55	03:55	03:55	03:55
First Call Resolution	100%	86%	100%	100%	100%	100%
Total Clinical Calls	45	57	62	53	33	34
Total Calls	314	361	424	343	386	341

Requests Processed						
Approvals	47	49	63	41	38	36
Administrative Approval	14	6	7	9	10	15
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	0	0	0	0	0	0
State Mandate	0	0	0	0	0	0
Denials	0	0	2	0	0	0
Pended	8	11	6	12	6	9
Total	69	66	78	62	54	60

Administrative Denials						
Lack of Information	0	0	0	0	0	0
Medicare Primary	N/A	N/A	N/A	N/A	N/A	N/A
Technical (Out of Time Frame)	0	0	0	0	0	0
Total Denied	0	0	0	0	0	0

MD Review						
Medical Necessity	21	21	17	15	18	14
Not Medically Necessary	0	0	2	0	0	0
Referred to MD Rate	30.43%	31.82%	24.36%	24.19%	33.33%	23.33%
Not Medically Necessary Denial Rate	0%	0%	11%	0%	0%	0%
Total MD Review	21	21	19	15	18	14

Reconsiderations						
Overturned	0	0	0	0	0	0
Upheld	0	0	0	0	0	0
Total Reconsiderations	0	0	0	0	0	0

*Reconsiderations are not included in Request Processed Total

	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Pended						
Lack of Information Incomplete Data (Consent Forms)	N/A	N/A	N/A	N/A	N/A	N/A
MD Review	3	5	3	6	4	0
RN Review	0	0	0	0	0	0
	5	6	3	6	2	9
Total	8	11	6	12	6	9

Current Month Top 5 LOI Pended Reasons	
1.	N/A
2.	
3.	
4.	
5.	

Current Month Top 10 Diagnosis Codes			
1.	G47.33	Obstructive sleep apnea(9
2.	E66.01	Morbid (sevr)obesity d/t	6
3.	R10.2	Pelvic and perineal pain	5
4.	Z30.2	Encounter for sterilizat	3
5.	L40.0	Psoriasis vulgaris	3
6.	N92.0	Excessv&frequent menstru	2
7.	T85.698D	Mech compl,oth intrn pro	2
8.	J96.12	Chrnrc respiratry failure	2
9.	D25.9	Leiomyoma of uterus, uns	2
10.	N83.51	Torsion of ovary & ovari	2

Current Month Top 5 Reasons for MD Denial	
1.	N/A
2.	
3.	
4.	
5.	

Current Month Top 5 Reasons for Lack of Information Denial	
1.	N/A
2.	
3.	
4.	
5.	

Private Duty Nursing **

Call Metrics	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Administrative						
Abandoned Calls	N/A	N/A	N/A	N/A	N/A	N/A
Average Speed of Answer	N/A	N/A	N/A	N/A	N/A	N/A
Average Talk Time	N/A	N/A	N/A	N/A	N/A	N/A
First Call Resolution	N/A	N/A	N/A	N/A	N/A	N/A
Total Admin Calls	N/A	N/A	N/A	N/A	N/A	N/A
Clinical						
Abandoned Calls	N/A	N/A	N/A	N/A	N/A	N/A
Average Speed of Answer	N/A	N/A	N/A	N/A	N/A	N/A
Average Talk Time	N/A	N/A	N/A	N/A	N/A	N/A
First Call Resolution	N/A	N/A	N/A	N/A	N/A	N/A
Total Clinical Calls	N/A	N/A	N/A	N/A	N/A	N/A
Total Calls	N/A	N/A	N/A	N/A	N/A	N/A

Requests Processed						
Approvals			196	144	52	47
Agreed Reduction			0	0	0	0
Client Approved/Negotiation			0	0	0	0
Split Decision			1	4	6	13
State Mandate			0	0	0	0
Denials			13	3	0	36
Pended			81	35	38	14
Total	0	0	291	186	96	110

Administrative Denials						
Lack of Information			0	0	0	30
Medicare Primary			N/A	N/A	N/A	N/A
Technical (Out of Time Frame)			N/A	N/A	N/A	N/A
Total Denied			N/A	N/A	N/A	N/A

MD Review						
Medical Necessity			0	0	16	2
Not Medically Necessary			13	3	0	6
Referred to MD Rate			0.00%	0.00%	0.00%	0.00%
Not Medically Necessary Denial Rate			0%	0%	0%	0%
Total MD Review			13	3	16	8

Reconsiderations						
Overturned			6	0	4	9
Upheld			0	10	0	0
Total Reconsiderations			6	10	4	9

*Reconsiderations are not included in Request Processed Total

** Private Duty Nursing (PDN) is included on this report effective June 2016

	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Pended						
Escalated			N/A	N/A	N/A	N/A
Lack of Information			81	25	38	14
MD Review			0	6	0	0
RN Review			0	4	0	0
Total	0	0	81	35	38	14

Current Month Top 5 LOI Pended Reasons		
1.	Lack of Information	14
2.		
3.		
4.		
5.		

Current Month Top 10 Diagnosis Codes			
1.	M05.10	RLD with RA of unspecifi	7
2.	G12.9	Spinal muscular atrophy,	7
3.	F89	Unspecified disorder of	7
4.	G80.9	Cerebral palsy, unspecif	7
5.	759.89	ANOMALY, CONGENITAL NEC	6
6.	R56.9	Unspecified convulsions	6
7.	742.4	ANOMALY, CONGENITAL, BRA	6
8.	F84.0	Autistic disorder	6
9.	G82.50	Quadriplegia, unspecifie	6
10.	345.91	EPILEPSY NOS W/INTRACT E	6

Current Month Top 5 Reasons for MD Denial		
1.	Not medically necessary	6
2.		
3.		
4.		
5.		

Current Month Top 5 Reasons for Lack of Information Denial		
1.	LOI response not received or incomplete	30
2.		
3.		
4.		
5.		

Psychiatric Programs

Call Metrics	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Administrative						
Abandoned Calls	8	6	18	7	15	13
Average Speed of Answer	00:56	00:40	01:29	01:23	00:57	00:51
Average Talk Time	02:55	02:17	02:32	02:28	02:33	02:30
First Call Resolution	100%	100%	100%	100%	100%	100%
Total Admin Calls	283	217	263	228	295	294
Clinical						
Abandoned Calls	3	2	3	4	9	3
Average Speed of Answer	00:54	00:40	00:38	00:38	01:01	01:53
Average Talk Time	08:01	08:49	08:26	08:58	09:24	09:46
First Call Resolution	100%	100%	100%	100%	100%	100%
Total Clinical Calls	239	197	218	175	230	224
Total Calls	522	414	481	403	525	518

Requests Processed	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Approvals	238	210	217	183	235	239
Agreed Reduction	0	0	0	0	0	0
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	0	0	0	0	0	0
State Mandate	0	0	0	0	0	0
Denials	0	1	2	6	2	0
Pended	10	3	8	6	11	8
Total	248	214	227	195	248	247

Administrative Denials	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Lack of Information	N/A	N/A	N/A	N/A	N/A	N/A
Medicare Primary	N/A	N/A	N/A	N/A	N/A	N/A
Technical (Out of Time Frame)	0	0	0	4	0	0
Total Denied	0	0	0	4	0	0

MD Review	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Medical Necessity	0	2	1	2	2	1
Not Medically Necessary	0	1	2	2	2	0
Referred to MD Rate	0.00%	1.40%	1.32%	2.05%	1.61%	0.40%
Not Medically Necessary Denial Rate	0%	33%	67%	50%	50%	0%
Total MD Review	0	3	3	4	4	1

Reconsiderations	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Overtaken	1	0	0	0	0	0
Upheld	0	0	0	0	0	1
Total Reconsiderations	1	0	0	0	0	1

*Reconsiderations are not included in Request Processed Total

Pended	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Lack of Information	0	0	0	0	0	0
RN Review	10	3	8	6	11	8
MD Review	0	0	0	0	0	0
Total	10	3	8	6	11	8

By Place of Service	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Distinct Part Units - Psychiatric	43	62	55	41	60	76
EPSDT	13	8	12	7	3	12
Freestanding Psychiatric Facility	28	27	26	25	35	39
Inpatient Hospital	8	4	1	0	2	0
Non-Freestanding Psychiatric Facility	147	110	132	120	143	116
Onsite EPSDT Psych	0	0	0	0	0	0
Psychiatric Residential Treatment Center	10	3	1	2	5	5
Total	249	214	227	195	248	248

Current Month Top 5 LOI Pended Reasons	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
1.	Lack of Information					N/A
2.						
3.						
4.						
5.						

Current Month Top 10 Diagnosis Codes	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
1.	F32.9	MDD, single episode, uns				42
2.	F20.9	Schizophrenia, unspecifi				18
3.	F84.0	Autistic disorder				17
4.	F39	Unspecified mood disorde				16
5.	F29	Unsp psych not d/t sub/k				12
6.	F25.9	Schizoaffective disorder				11
7.	F31.9	Bipolar disorder, unspec				10
8.	F63.9	Impulse disorder, unspec				9
9.	F33.2	MDD, recurrent, severe w				9
10.	F31.89	Other bipolar disorder				9

Current Month Top 5 Reasons for MD Denial	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
1.	N/A					
2.						
3.						
4.						
5.						

Current Month Top 5 Reasons for Lack of Information Denial	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
1.	N/A					
2.						
3.						
4.						
5.						

Radiology

Call Metrics	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Administrative						
Abandoned Calls	8	17	30	12	16	7
Average Speed of Answer	00:49	00:52	02:13	01:16	00:58	00:43
Average Talk Time	03:22	03:20	03:32	03:31	03:26	03:25
First Call Resolution	99.6%	100%	100%	99.8%	99.8%	99.5%
Total Admin Calls	580	639	552	516	663	614
Clinical						
Abandoned Calls	0	0	0	0	4	6
Average Speed of Answer	00:10	00:16	00:21	01:17	00:42	00:50
Average Talk Time	05:55	05:51	05:50	05:47	05:31	05:15
First Call Resolution	95%	94%	98%	100%	99.2%	99.4%
Total Clinical Calls	351	385	345	314	420	420
Total Calls	931	1,024	897	830	1,083	1,034

Requests Processed	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Approvals	380	444	388	365	471	455
Agreed Reduction	0	0	0	0	0	0
Client Approved/Negotiation	0	0	0	0	0	0
Split Decision	0	0	0	0	0	0
State Mandate	0	0	0	0	0	0
Denials	0	0	2	1	5	6
Pended	6	4	13	9	14	10
Total	386	448	403	375	490	471

Administrative Denials	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Lack of Information	0	0	1	1	0	4
Medicare Primary	N/A	N/A	N/A	N/A	N/A	N/A
Technical (Out of Time Frame)	N/A	N/A	N/A	N/A	N/A	N/A
Total Denied	0	0	1	1	0	4

MD Review	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Medical Necessity	89	83	70	79	87	86
Not Medically Necessary	0	0	1	0	5	2
Referred to MD Rate	23.06%	18.53%	17.62%	21.07%	18.78%	18.68%
Not Medically Necessary Denial Rate	0%	0%	1%	0%	5%	2%
Total MD Review	89	83	71	79	92	88

Reconsiderations	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Overturned	0	0	0	0	0	0
Upheld	0	0	0	0	0	0
Total Reconsiderations	0	0	0	0	0	0

*Reconsiderations are not included in Request Processed Total

Pended	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16
Lack of Information	0	0	1	1	0	0
MD Review	0	0	6	0	3	5
RN Review	6	4	6	8	11	5
Total	6	4	13	9	14	10

Current Month Top 5 LOI Pended Reasons	Reason	Count
1.	N/A	
2.		
3.		
4.		
5.		

Current Month Top 10 Diagnosis Codes	Code	Description	Count
1.	R07.9	Chest pain, unspecified	40
2.	M54.5	Low back pain	34
3.	G35	Multiple sclerosis	18
4.	M54.2	Cervicalgia	15
5.	R07.2	Precordial pain	13
6.	M54.16	Radiculopathy, lumbar re	10
7.	M54.12	Radiculopathy, cervical	9
8.	M25.511	Pain in right shoulder	9
9.	R56.9	Unspecified convulsions	8
10.	I25.10	Athr hrt dz ntv cornry a	8

Current Month Top 5 Reasons for MD Denial	Reason	Count
1.	Not medically necessary	2
2.		
3.		
4.		
5.		

Current Month Top 5 Reasons for Lack of Information Denial	Reason	Count
1.	LOI response not received or incomplete	4
2.		
4.		
5.		



KY Department for Medicaid Services Administrative Hearings Report

Report Run Date: Oct 1, 2016
 New/In Progress/Closed/All In Progress

Case Type	Primary Category	Appeal Type	Status	Appeal Start Date	Decision Required Date	Attending Physician
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	Jan 5, 2016	Feb 12, 2016	PELLEGRINI, ADRIAN
Waiver	Michelle P - LOC	Administrative Hearings	In Progress	Dec 15, 2015	Jan 8, 2016	PELLEGRINI, ADRIAN
Waiver	ABI LTC Waiver LOC	Administrative Hearings	In Progress	May 9, 2016	May 20, 2016	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	Aug 11, 2016	Sep 19, 2016	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	Aug 31, 2016	Nov 15, 2016	PELLEGRINI, ADRIAN
Waiver	Michelle P - LOC	Administrative Hearings	In Progress	Apr 9, 2015	Jun 26, 2015	PELLEGRINI, ADRIAN
Home Health	Home Health	Administrative Hearings	In Progress	Jun 18, 2014	Jul 30, 2014	PELLEGRINI, ADRIAN
Waiver	HCBC - LOC	Administrative Hearings	In Progress	Jun 6, 2016	Jul 13, 2016	PELLEGRINI, ADRIAN
Waiver	Michelle P - LOC	Administrative Hearings	In Progress	Jul 8, 2015	Aug 18, 2015	PELLEGRINI, ADRIAN
Waiver	Michelle P - LOC	Administrative Hearings	In Progress	Mar 4, 2016	Mar 29, 2016	PELLEGRINI, ADRIAN
Nursing Facility	Therapy	Administrative Hearings	In Progress	Sep 14, 2016	Sep 22, 2016	PELLEGRINI, ADRIAN
Waiver	ABI LTC Waiver LOC	Administrative Hearings	In Progress	Jul 18, 2016	Jul 29, 2016	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	Oct 28, 2015	Jan 28, 2016	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	Aug 23, 2016	Sep 13, 2016	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	Jul 20, 2016	Oct 4, 2016	PELLEGRINI, ADRIAN
Waiver	Michelle P - LOC	Administrative Hearings	In Progress	May 10, 2016	May 26, 2016	PELLEGRINI, ADRIAN
Waiver	ABI LTC Waiver LOC	Administrative Hearings	In Progress	Sep 26, 2016	Nov 7, 2016	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	May 31, 2016	Aug 9, 2016	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	Jul 18, 2016	Aug 1, 2016	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	Aug 4, 2016	Sep 9, 2016	PELLEGRINI, ADRIAN
Waiver	HCBCDO - LOC	Administrative Hearings	In Progress	Sep 23, 2016	Nov 3, 2016	PELLEGRINI, ADRIAN