



**CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR MEDICAID SERVICES**

Steven L. Beshear
Governor

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Audrey Tayse Haynes
Secretary

Lawrence Kissner
Commissioner

July 30, 2014

Kelly Munson
WellCare of Kentucky
13551 Triton Park Boulevard
Suite 1800
Louisville, KY 40223

Dear Ms. Munson,

Please accept this correspondence as notification from the Commonwealth of Kentucky, Department for Medicaid Services ("Department") that in order to be compliant with Section 21.5 (EQR Performance) of the Managed Care Contract ("Contract") between the Commonwealth of Kentucky and WellCare of Kentucky ("WellCare") shall submit to the Department Corrective Action Plans for each deficiency cited below. Plans shall be submitted within 60 days following the date of this notification delineating the time and manner in which each deficiency is to be corrected. WellCare's final resolution of all potential quality concerns shall be completed within six (6) months of WellCare's notification.

The 2013 Medicaid Compliance Review conducted by IPRO on behalf of the Department found WellCare Non-Compliant in the following element:

Program Integrity

Unique Identifier	Review Findings
WC2014IPRO-PI1	The Contractor shall provide identity and cover documents and information for law enforcement investigators under cover.

I understand WellCare's concerns with this issue, however in order to be fully compliant with the contract, WellCare must submit a Corrective Action Plan that addresses this problem. I am willing to have DMS staff members facilitate any necessary dialog between WellCare and the Kentucky Medicaid Fraud Waste Control Unit. I am asking that

WellCare initiate such dialog within thirty (30) days. I am also asking that WellCare give an update on the progress of resolving this issue at the Quarterly Quality Meetings.

Please note that this issue is assigned a unique identifier. This must be included in the Corrective Action Plan and in any other correspondence concerning this issue. Failure to include this will result in the Plan being rejected by the Department. I look forward to receiving WellCare's Corrective Action Plan and will be available for your questions throughout the process.

Sincerely,

A handwritten signature in cursive script that reads "Patricia Biggs".

Patricia Biggs
Director of Program Quality and Outcomes
Department for Medicaid Services

cc: Lawrence Kissner, Commissioner, Department for Medicaid Services
Christina Heavrin, General Counsel, Cabinet for Health and Family Services
Elizabeth Justus, Manager, Managed Care Oversight, Department for Medicaid Services