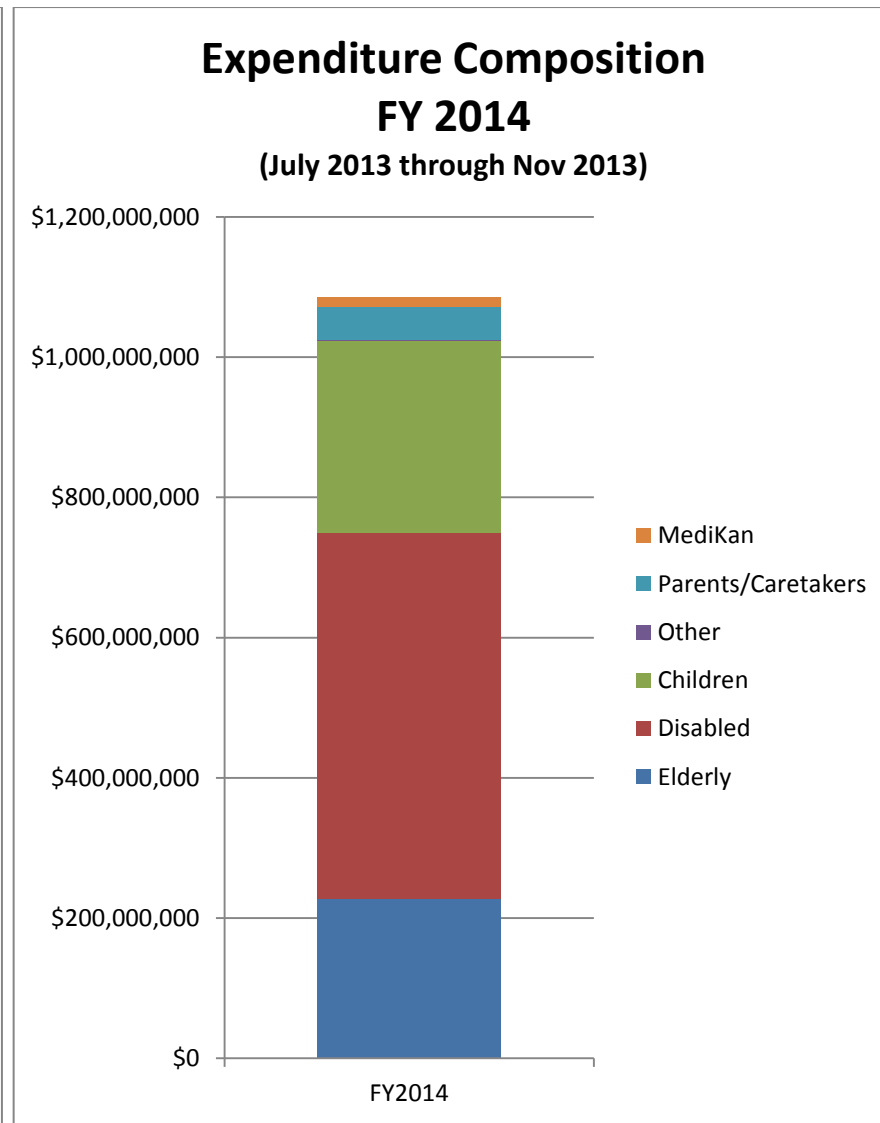
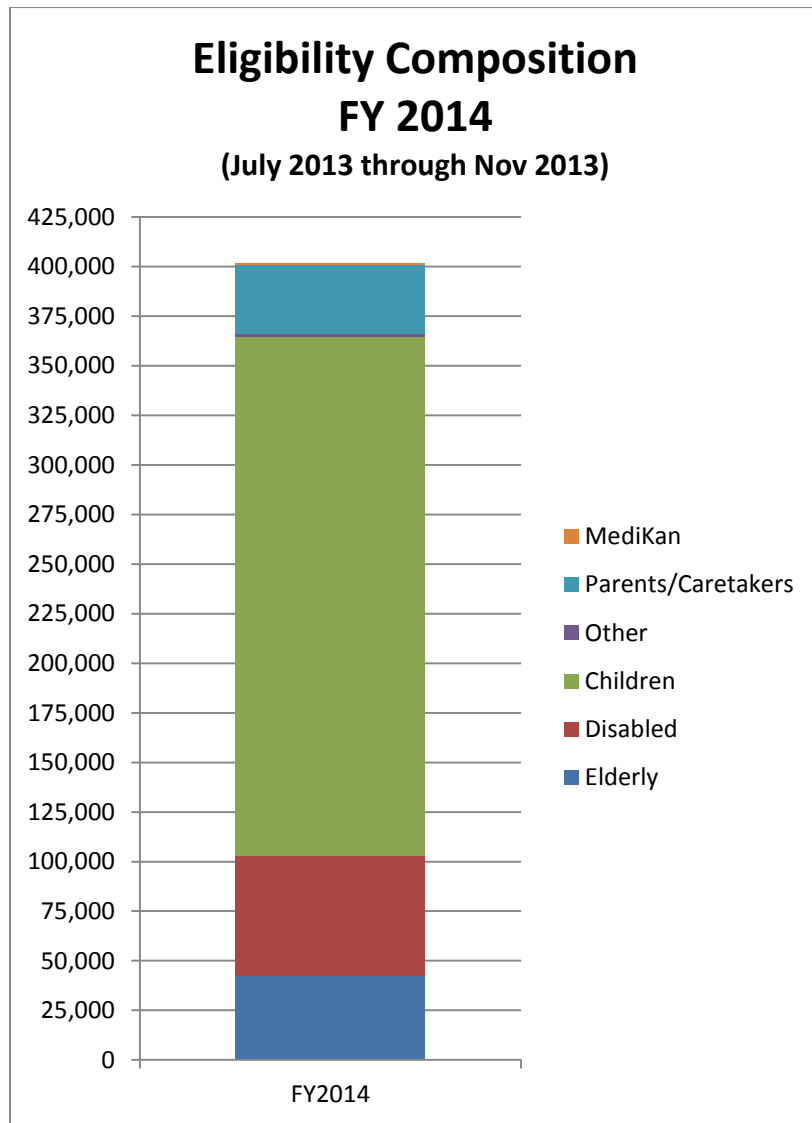


KanCare Executive Summary



Report date: 1.17.14

Member Eligibility and Expenditure Information



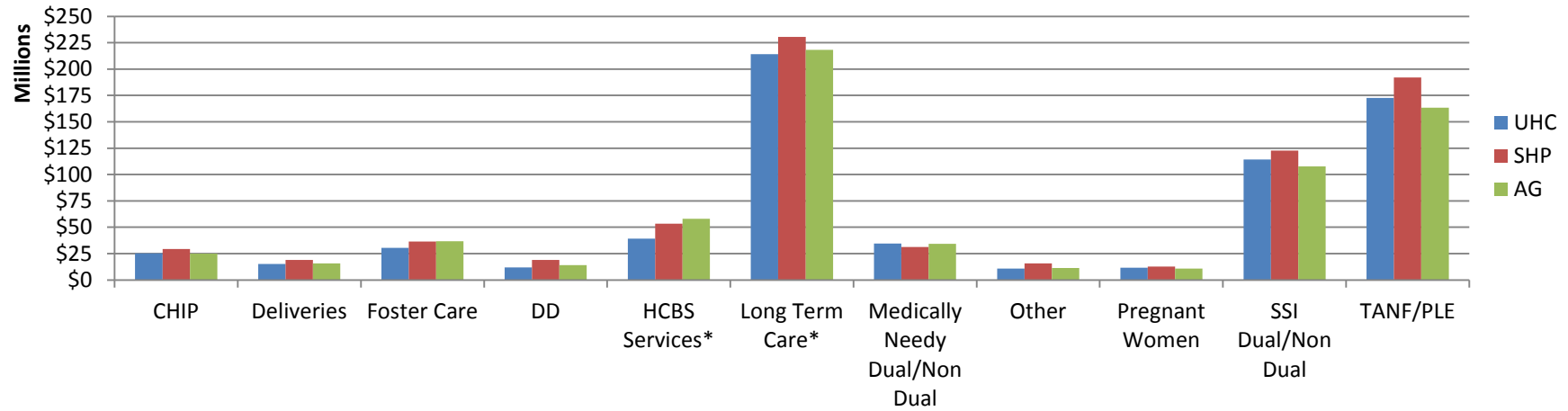
NOTES

July 2013 through November 2013 data

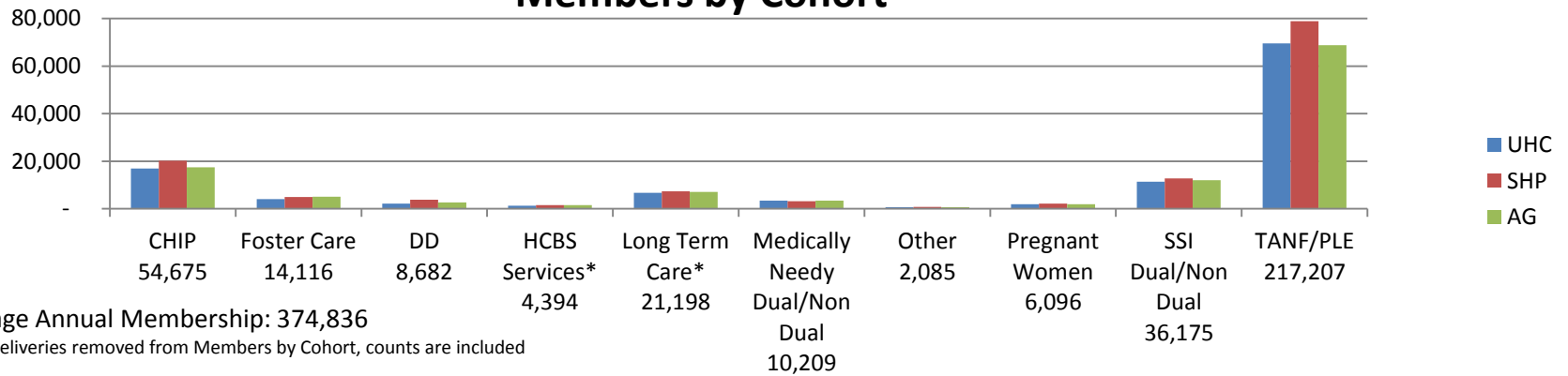
The expenditures for this graph are based on populations only.

Non-claim expenditures are excluded as they are not population specific.

Capitation Payments by Cohort



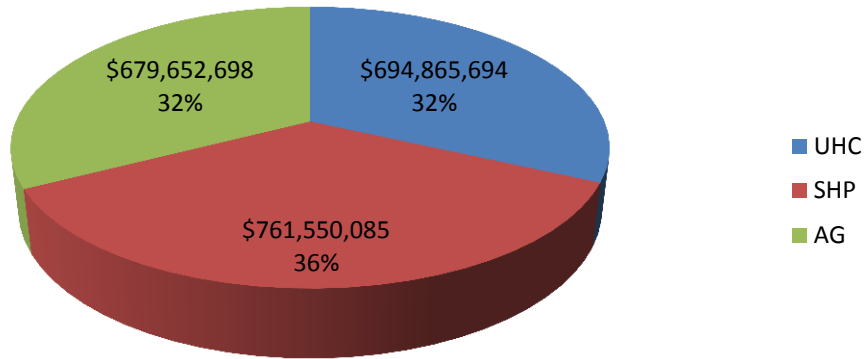
Members by Cohort



*Long Term Care includes Nursing Facilities, Money Follows the Person Frail Elderly and Physically Disabled, and the Physically Disabled and Frail Elderly Waivers

*HCBS Services includes Autism, Severe Emotional Disturbance, Technology Assisted, and Traumatic Brain Injury

Capitation Payments

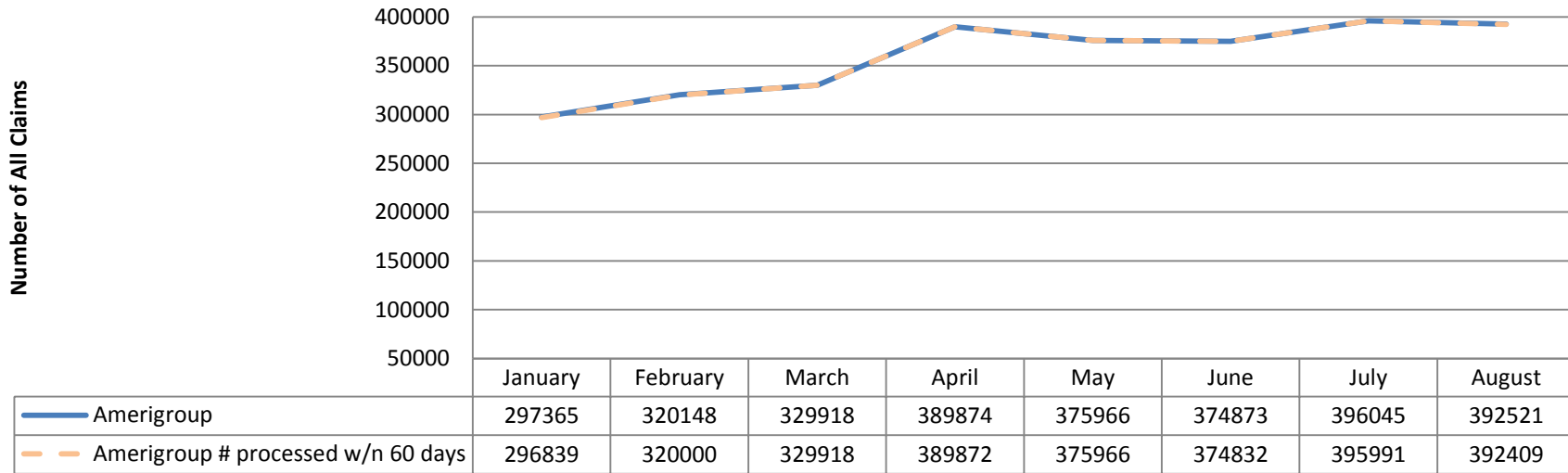


CY Grand Total:
\$2,136,068,477

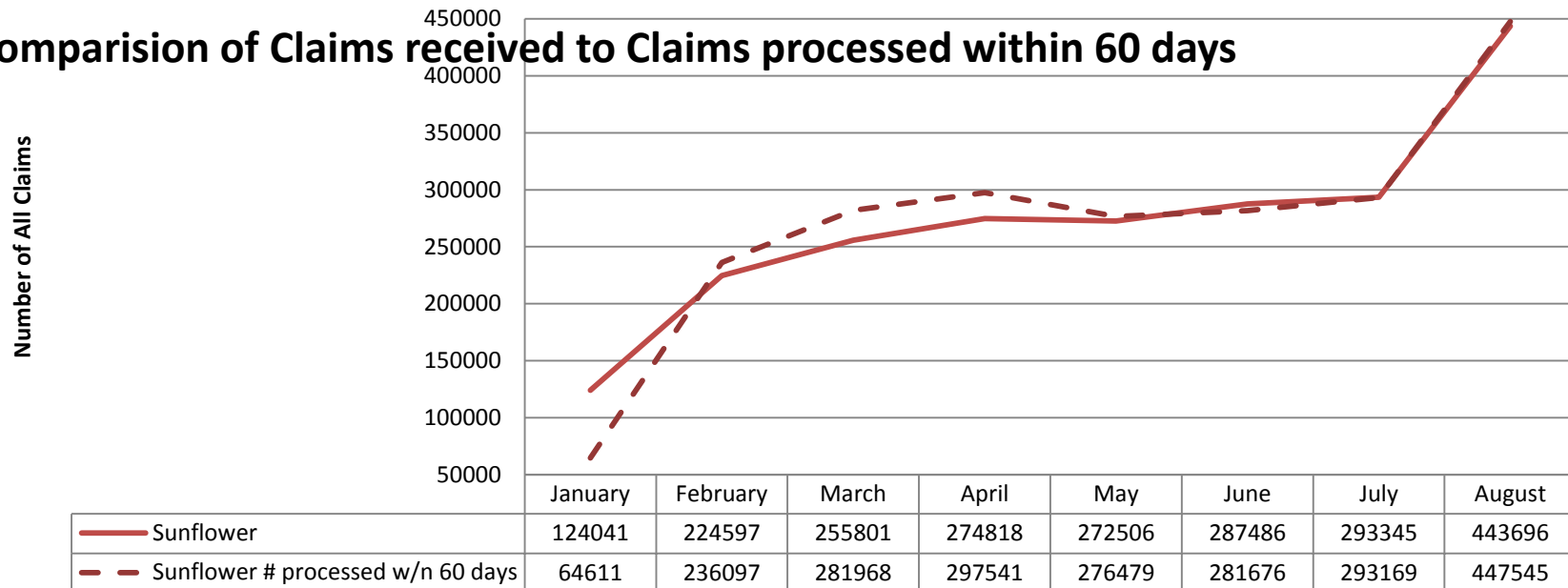
Provider Network

| KanCare MCO | # of Unique Providers as of 3/26/13 | # of Unique Providers as of 6/30/13 | # of Unique Providers as of 9/30/13 | # of Unique Providers as of 12/31/13 |
|-------------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------------------|
| Amerigroup | 11,746 | 16,706 | 16,891 | <i>Report update due 1.21.14</i> |
| Sunflower | 10,006 | 13,016 | 14,478 | <i>Report update due 1.21.14</i> |
| UHC | 11,105 | 14,738 | 15,893 | <i>Report update due 1.21.14</i> |

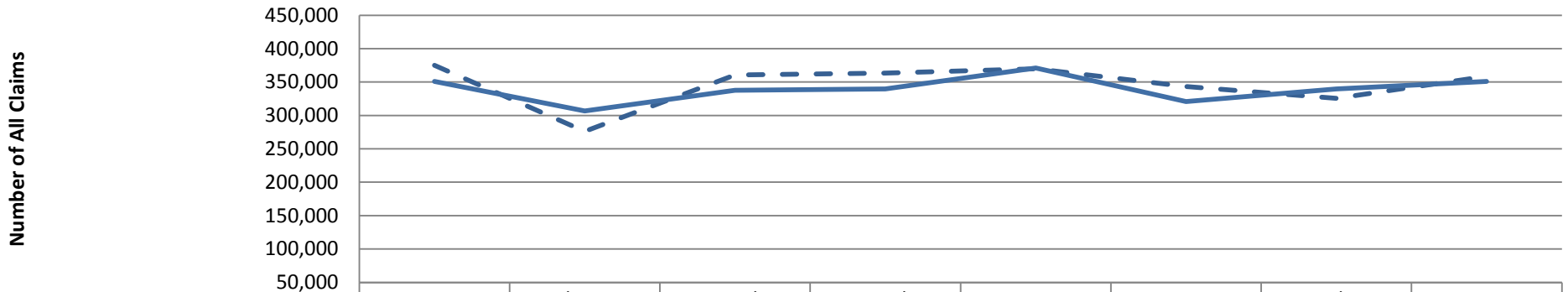
Comparison of Claims received to Claims processed within 60 days



Comparison of Claims received to Claims processed within 60 days



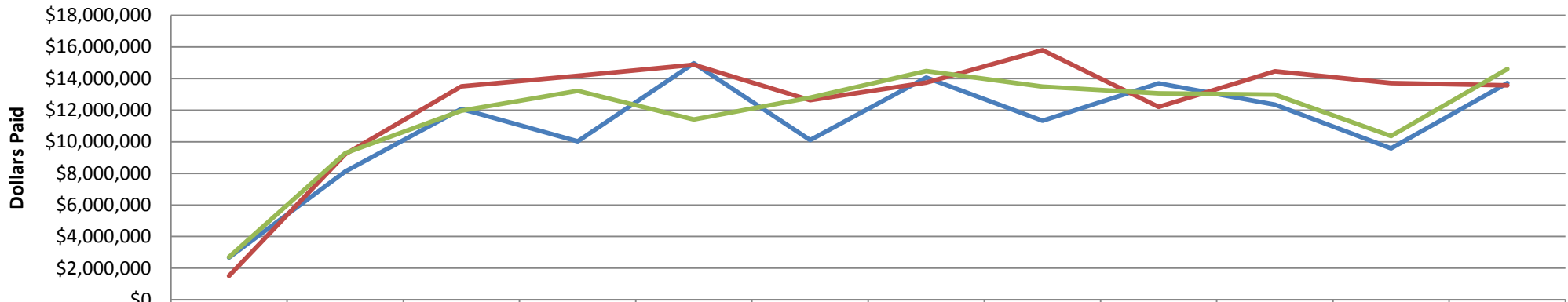
Comparison of Claims received to Claims processed within 60 days



| | January | February | March | April | May | June | July | August |
|-----------------------------|---------|----------|---------|---------|---------|---------|---------|---------|
| UHC # processed w/n 60 days | 375,060 | 276,106 | 360,694 | 363,584 | 369,714 | 343,324 | 325,659 | 358,755 |
| UHC | 351,046 | 306,905 | 337,875 | 339,570 | 370,917 | 320,886 | 339,830 | 350,824 |

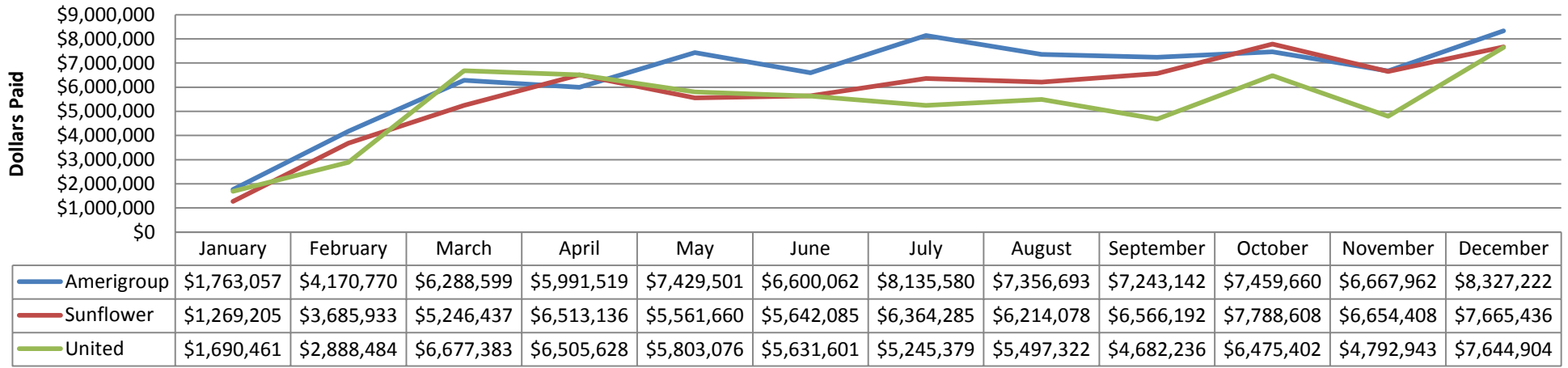
Claims Paid by Service Category Per MCO (January – December 2013)

Nursing Facility

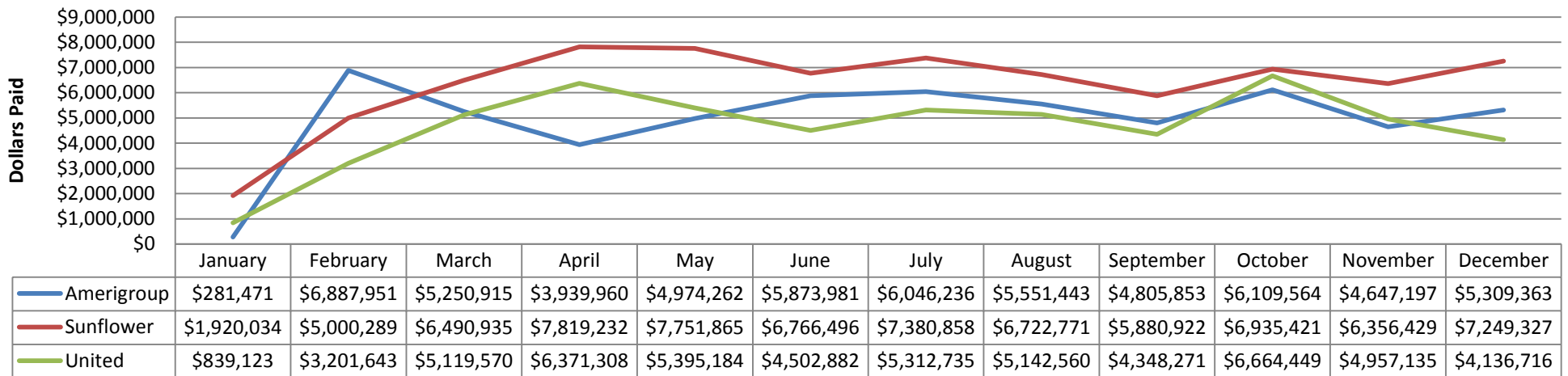


| | January | February | March | April | May | June | July | August | September | October | November | December |
|------------|-------------|-------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|
| Amerigroup | \$2,671,533 | \$8,116,519 | \$12,074,882 | \$10,030,000 | \$14,966,086 | \$10,109,592 | \$14,064,599 | \$11,332,165 | \$13,687,381 | \$12,348,467 | \$9,579,573 | \$13,703,764 |
| Sunflower | \$1,511,169 | \$9,211,967 | \$13,500,633 | \$14,172,093 | \$14,865,277 | \$12,621,280 | \$13,740,193 | \$15,792,705 | \$12,196,218 | \$14,450,591 | \$13,707,796 | \$13,560,455 |
| United | \$2,711,495 | \$9,278,213 | \$11,968,954 | \$13,213,251 | \$11,403,819 | \$12,793,058 | \$14,468,658 | \$13,490,111 | \$13,056,940 | \$12,982,883 | \$10,364,142 | \$14,604,519 |

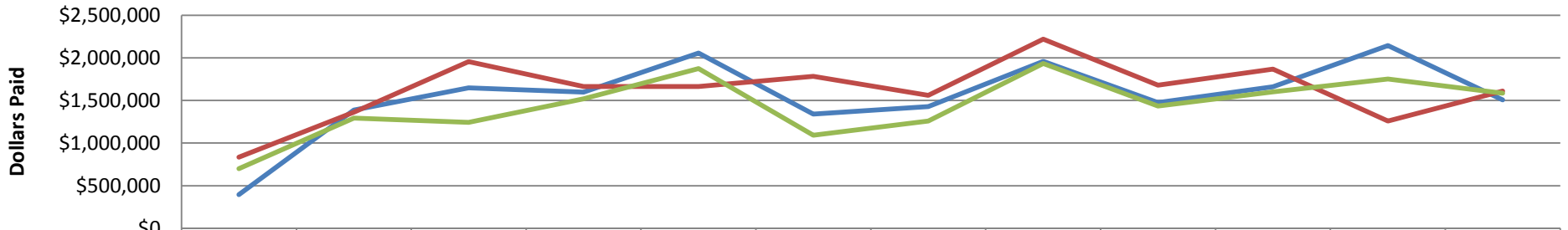
HCBS



Behavioral Health

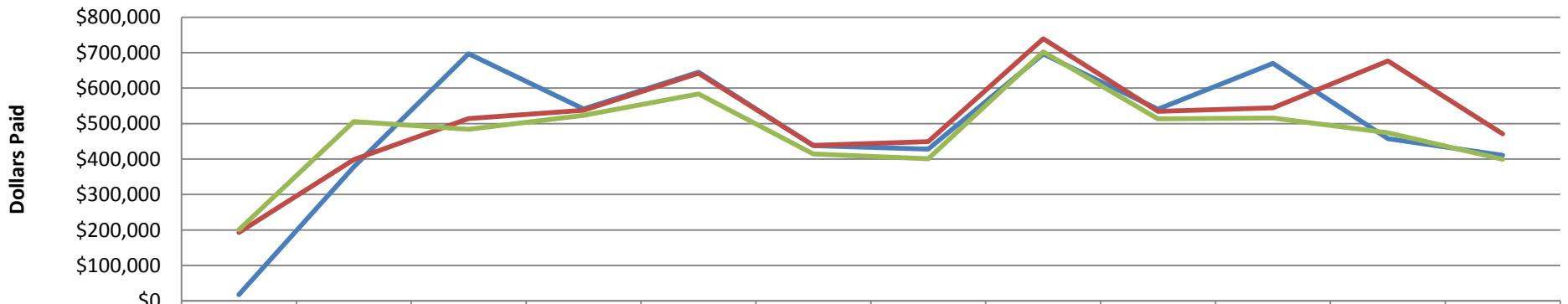


Dental



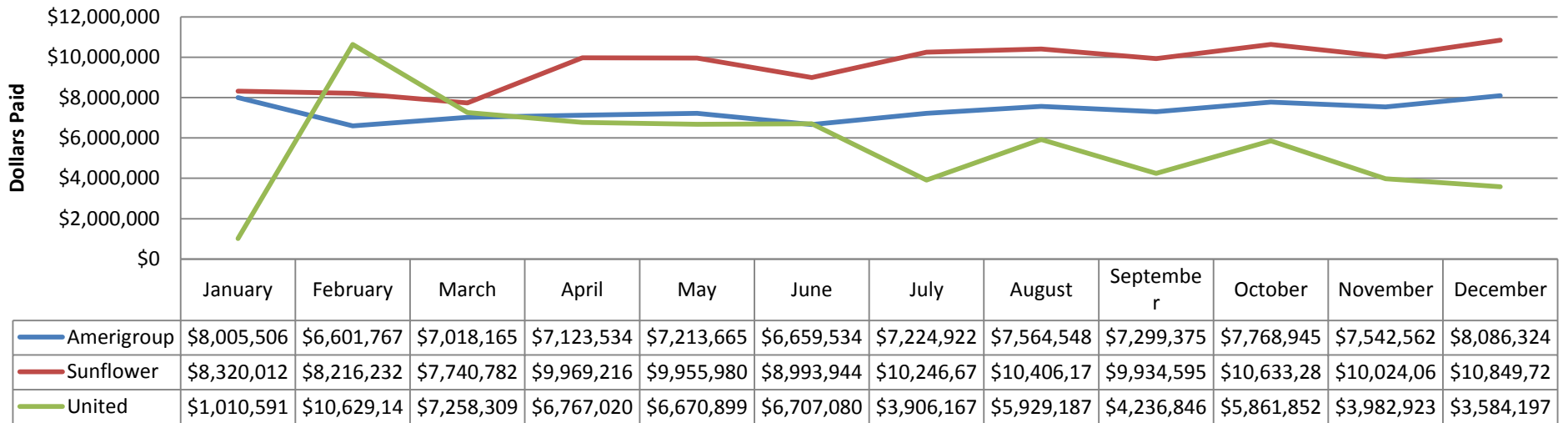
| | January | February | March | April | May | June | July | August | September | October | November | December |
|------------|-----------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| Amerigroup | \$395,276 | \$1,387,290 | \$1,648,538 | \$1,599,271 | \$2,056,177 | \$1,338,862 | \$1,427,034 | \$1,959,190 | \$1,476,767 | \$1,660,263 | \$2,142,693 | \$1,507,863 |
| Sunflower | \$836,151 | \$1,363,166 | \$1,956,541 | \$1,664,575 | \$1,664,883 | \$1,784,024 | \$1,559,496 | \$2,218,840 | \$1,678,800 | \$1,868,539 | \$1,258,931 | \$1,609,341 |
| United | \$698,688 | \$1,293,218 | \$1,244,370 | \$1,518,939 | \$1,872,959 | \$1,091,576 | \$1,257,499 | \$1,934,349 | \$1,435,456 | \$1,599,706 | \$1,750,943 | \$1,584,098 |

Vision

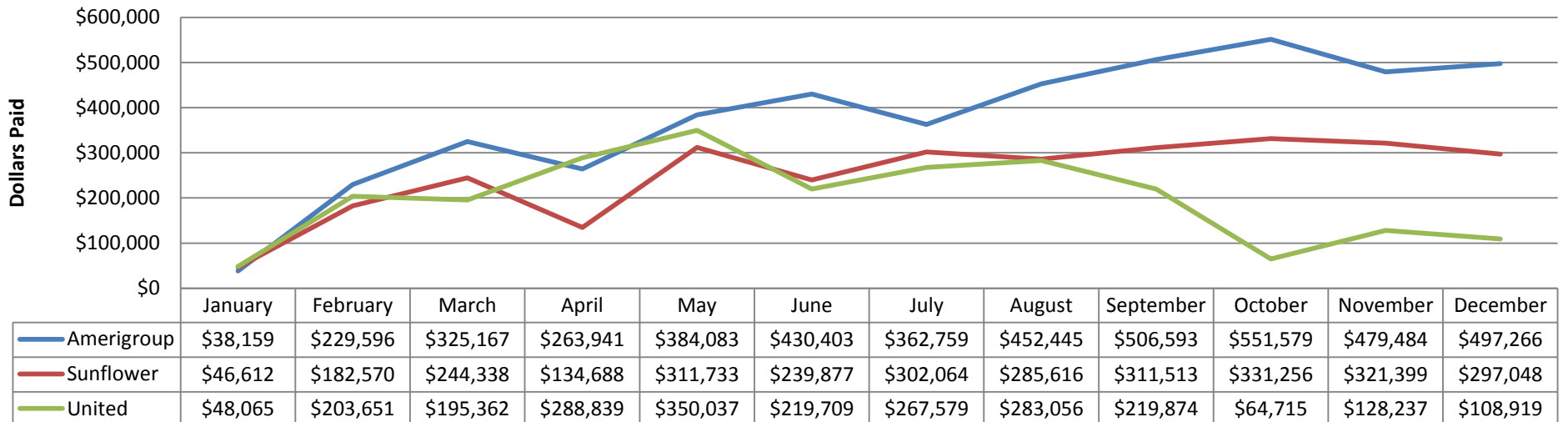


| | January | February | March | April | May | June | July | August | September | October | November | December |
|------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Amerigroup | \$17,347 | \$378,069 | \$697,292 | \$541,032 | \$645,080 | \$437,463 | \$427,867 | \$696,099 | \$540,763 | \$669,614 | \$457,545 | \$410,675 |
| Sunflower | \$192,854 | \$398,567 | \$514,218 | \$537,749 | \$642,091 | \$438,898 | \$449,279 | \$739,340 | \$534,448 | \$544,343 | \$676,498 | \$470,761 |
| United | \$200,538 | \$505,949 | \$483,929 | \$522,970 | \$583,537 | \$414,527 | \$400,785 | \$702,092 | \$513,720 | \$515,891 | \$474,105 | \$399,438 |

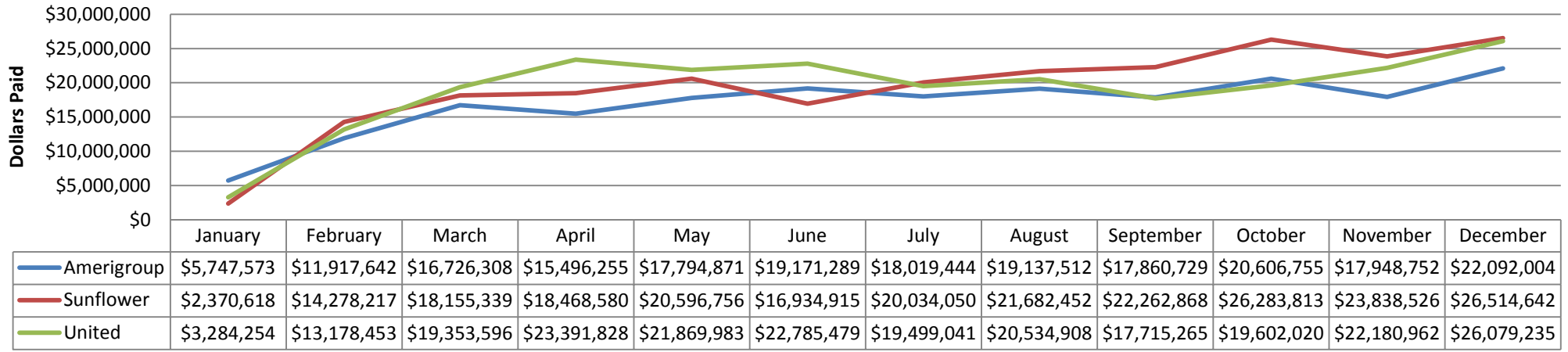
Pharmacy



NEMT



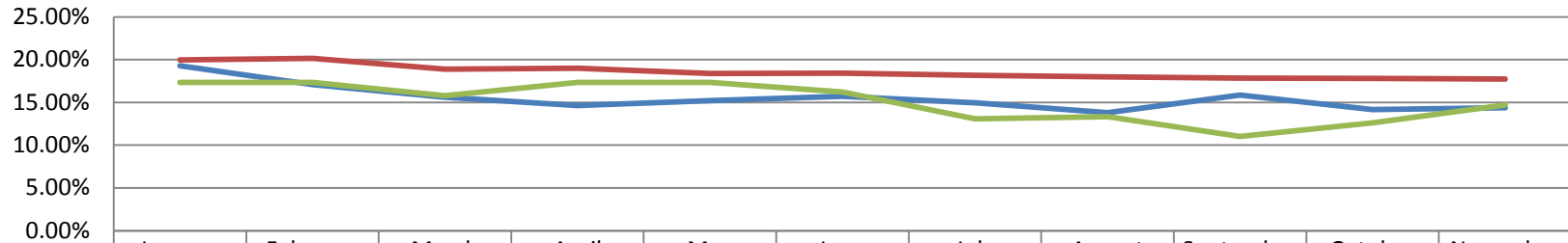
Medical (Physical Health not otherwise specified)



Denied Claims – Percentage By Month and Total Per MCO By Service Category YTD

(January-November 2013; next report due 1.21.14)

Total Percentage Denied Claims by Month 2013



| | January | February | March | April | May | June | July | August | September | October | November |
|------------|---------|----------|--------|--------|--------|--------|--------|--------|-----------|---------|----------|
| Amerigroup | 19.27% | 17.10% | 15.62% | 14.65% | 15.20% | 15.71% | 14.96% | 13.79% | 15.85% | 14.15% | 14.37% |
| Sunflower | 19.98% | 20.15% | 18.90% | 18.99% | 18.40% | 18.42% | 18.17% | 17.98% | 17.83% | 17.80% | 17.73% |
| United | 17.33% | 17.33% | 15.77% | 17.33% | 17.33% | 16.21% | 13.07% | 13.35% | 11.01% | 12.60% | 14.69% |

Amerigroup – January Through November 2013

| Service Type | Total claim count - YTD cumulative | # claims denied – YTD cumulative | % claims denied – YTD cumulative |
|---|------------------------------------|----------------------------------|----------------------------------|
| Hospital Inpatient | 29,623 | 3,950 | 13.33% |
| Hospital Outpatient | 257,708 | 23,038 | 8.94% |
| Pharmacy | 1,979,309 | 459,552 | 23.22% |
| Dental | 140,594 | 10,638 | 7.57% |
| Vision | 57,347 | 12,223 | 21.31% |
| NEMT | 142,958 | 58 | 0.04% |
| Medical (physical health not otherwise specified) | 1,554,153 | 152,930 | 9.84% |
| Nursing Facilities | 107,790 | 14,250 | 13.22% |
| NF – Hospital Based | 104,911 | 13,820 | 13.17% |
| NF – All Other | 2,879 | 430 | 14.94% |
| HCBS | 85,386 | 9,107 | 10.67% |
| Behavioral Health | 575,138 | 60,926 | 10.59% |
| Total All Services | 4,930,006 | 746,672 | 15.15% |

| Sunflower – January Through November 2013 | | | |
|---|---|---|---|
| Service Type | Total claim count - YTD cumulative | # claims denied – YTD cumulative | % claims denied – YTD cumulative |
| Hospital Inpatient | 156,026 | 23,162 | 14.84% |
| Hospital Outpatient | 513,635 | 60,295 | 11.74% |
| Pharmacy | 2,417,925 | 594,089 | 24.57% |
| Dental | 118,170 | 14,007 | 11.85% |
| Vision | 61,183 | 9,145 | 14.95% |
| NEMT | 88,427 | 379 | 0.43% |
| Medical (physical health not otherwise specified) | 1,081,952 | 174,889 | 16.16% |
| Nursing Facilities Hospital | 65,083 | 8,384 | 12.88% |
| Nursing Facilities - Other | 71,454 | 17,310 | 24.23% |
| HCBS | 194,613 | 13,272 | 6.82% |
| Behavioral Health | 644,070 | 44,851 | 6.96% |
| Total All Services | 5,412,538 | 959,783 | 17.73% |

| United – January Through November 2013 | | | |
|---|---|---|---|
| Service Type | Total claim count - YTD cumulative | # claims denied – YTD cumulative | % claims denied – YTD cumulative |
| Hospital Inpatient | 21,950 | 4,420 | 20.14% |
| Hospital Outpatient | 203,202 | 30,391 | 14.96% |
| Pharmacy | 1,262,510 | 239,534 | 18.97% |
| Dental | 151,617 | 8,365 | 5.52% |
| Vision | 51,098 | 6,078 | 11.89% |
| NEMT | 84,879 | 191 | 0.23% |
| Medical (physical health not otherwise specified) | 1,075,855 | 162,197 | 15.08% |
| Nursing Facilities | 90,799 | 12,922 | 14.23% |
| NF All Other | 88,762 | 12,554 | 14.14% |
| NF Hospital Beds | 2,037 | 368 | 18.07% |
| HCBS | 200,391 | 17,425 | 8.70% |
| Behavioral Health | 438,282 | 32,912 | 7.51% |
| Total All Services | 3,580,583 | 514,435 | 14.37% |

Value Added Services and In Lieu Of Services

Summary of 2013 Value Added Services Used By KanCare Members (January-November 2013; next report due 1.30.14)

| Amerigroup | Members | Units | Value | Sunflower | Members | Units | Value | United | Members | Units | Value |
|---|---------------|---------------|------------------|---|---------------|----------------|--------------------|--|---------------|---------------|--------------------|
| Member Incentive Program | 6878 | 9149 | \$ 267,340.00 | CentAccount debit card | 70210 | 67473 | \$1,351,138.00 | Additional vision services | 18550 | 25124 | \$1,072,682.31 |
| Adult Dental Care | 1850 | 2596 | \$ 263,444.44 | Dental visits for adults | 7102 | 18659 | \$367,293.27 | Adult dental services | 3890 | 3890 | \$505,700.00 |
| Mail Order OTC | 7543 | 6554 | \$105,828.03 | SafeLink@/ Connections Plus cell phones | 9822 | 10527 | \$503,506.41 | Incentive Payments for KAN Be Healthy Screening | 45450 | 45570 | \$455,700.00 |
| Healthy Families Program | 181 | 167 | \$81,496.36 | Travel (mileage) for specialty and inpatient care | 3694 | 839714 | \$366,829.17 | Incentive Payments for Annual A1C Exam | 5324 | 5324 | \$106,480.00 |
| Hypoallergenic Bedding | 918 | 635 | \$62,593.28 | Start Smart | 3172 | 3759 | \$112,413.74 | Podiatry visits | 388 | 634 | \$66,570.00 |
| Smoking Cessation Program | 586 | 512 | \$56,460.00 | Respite care | 30 | 27176 | \$66,474.00 | Weight Watchers classes | 512 | 502 | \$59,738.00 |
| Pest Control | 410 | 299 | \$43,750.00 | Disease and Healthy Living Coaching | 4780 | 22576 | \$58,924.96 | Adult Biometric Screening | 2437 | 2439 | \$36,585.00 |
| Additional Personal Assistant Services-DD Waiver Members | 15 | 2212 | \$15,926.21 | Smoking cessation program | 59 | 59 | \$14,160.00 | Incentive Payments for New Member Dental Exam | 2535 | 2537 | \$25,370.00 |
| Weight Watcher Vouchers | 627 | 372 | \$13,719.36 | Lodging for specialty and inpatient care | 42 | 121 | \$9,801.00 | Membership to Youth Organization | 698 | 624 | \$24,960.00 |
| GED Prep DVDs | 486 | 283 | \$7,853.25 | Community Programs for Healthy Children: Boys & Girls Clubs | 242 | 241 | \$3,615.00 | New Member Vision Exam | 2084 | 2130 | \$21,300.00 |
| Goodwill Gift Cards | 402 | 241 | \$4,820.00 | | | | | Baby Blocks | 451 | 450 | \$9,000.00 |
| Additional Personal Assistant Services for DD Waiver Population | 7 | 1136 | \$3,003.84 | | | | | Annual Vision Exam for Person with Diabetes | 349 | 350 | \$7,000.00 |
| Career Development DVDs | 313 | 191 | \$2,865.00 | | | | | Earn workout gear for finishing the program (adults) | 17 | 17 | \$850.00 |
| Caregiver Support Kit | 47 | 48 | \$2,252.91 | | | | | Join for Me | 16 | 16 | \$800.00 |
| Entertainment Book Coupons | 1260 | 762 | \$423.37 | | | | | | | | |
| Grand Totals - Amerigroup | 21,523 | 25,157 | \$931,776 | Grand Totals - Sunflower | 99,153 | 990,305 | \$2,854,156 | Grand Totals -- United | 82,701 | 89,607 | \$2,392,735 |

| Statewide Totals of Select Value Added Services | Members | Units | Value |
|--|---------|---------|-------------|
| Member Incentive Programs for Preventive/Healthy Behaviors | 131,024 | 130,425 | \$2,219,747 |
| Adult Dental Services | 12,842 | 25,145 | \$1,136,438 |

Summary of In Lieu Of Services Used By KanCare Members (January-November 2013; next report due 1.30.14)

| Amerigroup | Members | Value of Services Avoided | Sunflower | Members | Value of Services Avoided |
|---|----------------|----------------------------------|---|--|----------------------------------|
| Additional Medicaid covered services, beyond existing limitations, including personal care services, sleep cycle support, home modifications, equipment and assisted services ... in lieu of members needing to be admitted to an acute care hospital or nursing facility | 21 | \$ 66,565 | Additional personal care services, beyond existing waiver limitations ... in lieu of members needing to be admitted to a nursing facility | <i>Range of 162-240 per month (unduplicated number of members accessing this service: 338)</i> | \$2,135,000 |
| Non-Covered services including private nurse, telehealth, equipment and sleep cycle support ... in lieu of members needing to access ICU, acute hospital, or nursing facility services | 11 | \$132,366 | Non-Covered services covering a wide range of equipment, orthotics, testing, physician services and outpatient surgery ... in lieu of members needing to access acute hospital, home health, or more intensive physical or behavioral health services | 41 | \$324,367 |
| Totals | 32 | \$198,931 | Totals | 379 | \$2,459,367 |

Grievances & Appeals (Jan-Nov 2013; next due 1.30.14)

| Amerigroup | | | |
|---|------------|-----------|---------------------|
| | Grievances | Appeals | State Fair Hearings |
| Number of grievances/appeals reviewed: | 190 | 34 | 36 |
| Number of grievances/appeals resolved: | 205 | 37 | 26 |
| Number of State Fair Hearings withdrawn: | -- | -- | 0 |
| Number of grievances/appeals considered invalid: | 1 | 0 | -- |
| Average length of time to complete each grievance/appeal/State Fair Hearing: | 11.82 days | 8.97 days | 22.69 days |
| Number of overturned decisions at State Fair Hearing Level: | -- | -- | 18 |
| Number of health plan appeals reversed in the member's favor: | -- | 12 | -- |
| Percentage of appeals overturned at the State Fair Hearing level: | 0% | 0% | 69% |
| In health plan level appeals where the decision was reversed in the member's favor, what were the most common reasons? | | | |
| MEDICAL NECESSITY MET | | | |
| In State Fair Hearing cases where the decision was overturned in the member's favor, what were the most common reasons? | | | |
| Claim processing | | | |
| List the top 5 reasons that were most commonly the subject of grievances/appeals: | | | |
| 1 AVAILABILITY | | | |
| 2 ATTITUDE/SERVICE OF STAFF | | | |
| 3 BILLING AND FINANCIAL ISSUES | | | |
| 4 QUALITY OF CARE | | | |
| 5 ACCESSIBILITY OF OFFICE | | | |

| United | | | |
|---|------------|---------|---------------------|
| | Grievances | Appeals | State Fair Hearings |
| Number of grievances/appeals reviewed: | 84 | 53 | 19 |
| Number of grievances/appeals resolved: | 84 | 53 | 19 |
| Number of State Fair Hearings withdrawn: | -- | -- | 1 |
| Number of grievances/appeals considered invalid: | 0 | 0 | -- |
| Average length of time to complete each grievance/appeal/State Fair Hearing: | 7 days | 11 days | 26.4 days |
| Number of overturned decisions at State Fair Hearing Level: | -- | -- | 7 |
| Number of health plan appeals reversed in the member's favor: | -- | 8 | 7 |
| Percentage of appeals overturned at the State Fair Hearing level: | 0% | 0% | 37% |
| In health plan level appeals where the decision was reversed in the member's favor, what were the most common reasons? | | | |
| Medical necessity met | | | |
| In State Fair Hearing cases where the decision was overturned in the member's favor, what were the most common reasons? | | | |
| The provider submitted a corrected claim which was reprocessed for payment. | | | |
| List the top 5 reasons that were most commonly the subject of grievances/appeals: | | | |
| 1 Prior or Post Authorization | | | |
| 2 Timeliness | | | |
| 3 Quality of Care | | | |
| 4 Billing and Financial Issues | | | |
| 5 Clinical Criteria Not Met- Durable Medical Equipment | | | |

| Sunflower | | | |
|---|------------|---------|---------------------|
| | Grievances | Appeals | State Fair Hearings |
| Number of grievances/appeals reviewed: | 125 | 171 | N/A |
| Number of grievances/appeals resolved: | 112 | 169 | N/A |
| Number of State Fair Hearings withdrawn: | -- | -- | 35 |
| Number of grievances/appeals considered invalid: | 0 | 64 | -- |
| Average length of time to complete each grievance/appeal/State Fair Hearing: | 4.67 | 10.07 | 33 |
| Number of overturned decisions at State Fair Hearing Level: | -- | -- | 0 |
| Number of health plan appeals reversed in the member's favor: | -- | 55 | -- |
| Percentage of appeals overturned at the State Fair Hearing level: | 0% | 0% | 0 |
| In health plan level appeals where the decision was reversed in the member's favor, what were the most common reasons? | | | |
| Medical necessity met | | | |
| In State Fair Hearing cases where the decision was overturned in the member's favor, what were the most common reasons? | | | |
| N/A | | | |
| List the top 5 reasons that were most commonly the subject of grievances/appeals: | | | |
| 1 Pharmacy | | | |
| 2 Lack of Information from Provider | | | |
| 3 Availability | | | |
| 4 Attitude/Service of Staff | | | |
| 5 Clinical Criteria Not Met- Medical Procedure | | | |

Plan of Care Reductions Submitted (January – December 2013)

| Amerigroup – Summary of MCO-Initiated HCBS Waiver Plan of Care Reductions – State Review/Approval | | | | | |
|---|-----------|------------|-----------|-----------|-----------|
| Issue/Timing (current reporting period and cumulative) | PD waiver | TBI waiver | FE waiver | TA waiver | AU waiver |
| # submitted (current) | 15 | 2 | 4 | 1 | 0 |
| # submitted (cumulative) | 242 | 15 | 48 | 2 | 0 |
| # approved (current) | 4 | 0 | 5 | 1 | 0 |
| # approved (cumulative) | 155 | 8 | 43 | 3 | 0 |
| # denied (current) | 0 | 0 | 0 | 0 | 0 |
| # denied (cumulative) | 17 | 1 | 14 | 0 | 0 |
| # pending - (current) | 14 | 2 | 4 | 1 | 0 |
| # pending - (cumulative) | 21 | 4 | 6 | 1 | 0 |
| Voluntary Reductions submitted (current) | 0 | 0 | 0 | 0 | 0 |
| Voluntary Reductions submitted (cumulative) | 24 | 8 | 11 | 0 | 0 |

| Sunflower – Summary of MCO-Initiated HCBS Waiver Plan of Care Reductions – State Review/Approval | | | | | |
|--|-----------|------------|-----------|-----------|-----------|
| Issue/Timing (current reporting period and cumulative) | PD waiver | TBI waiver | FE waiver | TA waiver | AU waiver |
| # submitted (current) | 14 | 2 | 3 | 2 | 0 |
| # submitted (cumulative) | 366 | 47 | 137 | 48 | 0 |
| # approved (current) | 7 | 0 | 1 | 0 | 0 |
| # approved (cumulative) | 178 | 24 | 57 | 23 | 0 |
| # denied (current) | 1 | 0 | 0 | 0 | 0 |
| # denied (cumulative) | 10 | 4 | 8 | 2 | 0 |
| # pending - (current) | 7 | 2 | 7 | 2 | 0 |
| # pending - (cumulative) | 50 | 8 | 10 | 10 | 0 |
| Voluntary Reductions submitted (current) | 0 | 0 | 0 | 0 | 0 |
| Voluntary Reductions submitted (cumulative) | 39 | 6 | 28 | 10 | 0 |

| United – Summary of MCO-Initiated HCBS Waiver Plan of Care Reductions – State Review/Approval | | | | | |
|---|-------------|------------|-------------|-----------|-----------|
| Issue/Timing (current reporting period and cumulative) | PD waiver** | TBI waiver | FE waiver** | TA waiver | AU waiver |
| # submitted (current) | 9 | 1 | 3 | 0 | 0 |
| # submitted (cumulative) | 375 | 32 | 169 | 0 | 0 |
| # approved (current) | 0 | 0 | 2 | 0 | 0 |
| # approved (cumulative) | 345 | 26 | 159 | 0 | 0 |
| # denied * (current) | 0 | 0 | 0 | 0 | 0 |
| # denied * (cumulative) | 7 | 2 | 5 | 0 | 0 |
| # pending - (current) | 9 | 1 | 1 | 0 | 0 |
| # pending - (cumulative) | 11 | 1 | 1 | 0 | 0 |
| Voluntary Reductions submitted (current) | 2 | 0 | 7 | 0 | 0 |
| Voluntary Reductions submitted (cumulative) | 158 | 6 | 98 | 3 | 0 |

*The numbers do not total in every case because some of the reduction requests have been put into “aborted” status by the KDADS staff reviewing them.

Pay for Performance Measures – Year One

Summary of 2013 Performance Per MCO (January-September 2013; next report due 1.30.14)

Amerigroup

| Subject | P4P Metric | Measurement Period | Measures Achieved During Reporting Period | | | | | | | | | | | | | | | | | |
|-----------------------|--|--------------------|---|----------|---------|---------|---------|----------|---------|----------|---------|----------|---------|----------|---------|----------|---------|---------|---------|---------|
| | | | Jan | | Feb | | Mar | | Apr | | May | | Jun | | Jul | | Aug | | Sep | |
| Monthly | | | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Number | Percent |
| Claims Processing-AMG | - 100% of clean claims are processed within 20 days | Monthly w/reset | 284,417 | 99.762% | 308,294 | 99.501% | 317,273 | 99.798% | 385,231 | 99.948% | 372,619 | 99.658% | 371,942 | 100.000% | 392,913 | 99.999% | 389,889 | 99.971% | 381,078 | 99.932% |
| Claims Processing-AMG | -99% of all non-clean claims are processed within 45 days | Monthly w/reset | 11,744 | 100.000% | 10,158 | 98.900% | 11,982 | 99.825% | 4,439 | 100.000% | 3,347 | 100.000% | 2,890 | 100.000% | 3,053 | 100.000% | 2,520 | 100% | 2,718 | 100% |
| Claims Processing-AMG | - 100% of all claims are processed within 60 days | Monthly w/reset | 296,839 | 100.000% | 320,000 | 99.965% | 329,918 | 100.000% | 389,872 | 100.000% | 375,966 | 99.661% | 374,832 | 100.000% | 395,968 | 100.000% | 392,409 | 99.971% | 383,944 | 99.971% |
| Credentialing-AMG | 90% providers completed in 20 days | Monthly w/reset | 111 | 47% | 319 | 96% | 240 | 96% | 528 | 98% | 215 | 95% | 184 | 97% | 137 | 100% | 120 | 100% | 100 | 100% |
| Credentialing-AMG | 100% providers completed in 30 days | Monthly w/reset | 194 | 82% | 334 | 100% | 250 | 100% | 540 | 100% | 226 | 100% | 190 | 100% | 137 | 100% | 120 | 100% | 100 | 100% |
| Customer Service-AMG | -98% of all inquiries are resolved within 2 business days from receipt date -100% of all inquiries are resolved | Monthly w/reset | 41,201 | 99.985% | 23,271 | 99.991% | 23,926 | 99.996% | 23,158 | 100% | 22,289 | 99.996% | 20,566 | 100.0% | 22,296 | 99.991% | 19,560 | 99.959% | 17,303 | 99.983% |
| Quarterly | | | 1Q | | 2Q | | 3Q | | 4Q | | | | | | | | | | | |
| Grievances-AMG | -98% of grievances are resolved within 20 days | Quarterly w/reset | 220 | 100% | 206 | 100% | 190 | 100% | | | | | | | | | | | | |
| Grievances-AMG | -100% of grievances are resolved within 40 days | Quarterly w/reset | 0 | 100% | 0 | 100% | 0 | 100% | | | | | | | | | | | | |
| Appeals-AMG | Contractor sends an acknowledgement letter within 3 business days of receipt of the appeal | Quarterly w/reset | 6 | 100% | 17 | 100% | 33 | 97.1% | | | | | | | | | | | | |

Reporting Protocol and Summary-Sunflower

| Subject | P4P Metric | Measurement Period | Measures Achieved During Reporting Period | | | | | | | | | | | | | | | | | |
|-----------------------|---|--------------------|---|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| | | | Jan | | Feb | | Mar | | Apr | | May | | Jun | | Jul | | Aug | | Sep | |
| Monthly | | | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Number | Percent |
| Claims Processing-SHP | - 100% of clean claims are processed within 20 days | Monthly w/reset | 184,435 | 100% | 324,946 | 99% | 375,424 | 98% | 414,508 | 98% | 407,742 | 97% | 379,320 | 98% | 404,306 | 97% | 425,604 | 98% | 384,431 | 99% |
| Claims Processing-SHP | - 99% of all non-clean claims are processed within 45 days | Monthly w/reset | 5,795 | 100% | 24,501 | 100% | 21,970 | 91% | 12,892 | 87% | 15,461 | 95% | 14,658 | 97% | 12,051 | 94% | 14,828 | 93% | 8,518 | 76% |
| Claims Processing-SHP | - 100% of all claims are processed within 60 days | Monthly w/reset | 64,611 | 100% | 236,097 | 100% | 281,968 | 100% | 297,541 | 99% | 276,479 | 99% | 281,676 | 100% | 293,169 | 100% | 447,545 | 100% | 387,199 | 99% |
| Credentialing-SHP | 90% providers completed in 20 days | Monthly w/reset | 95 | 94% | 75 | 96% | 65 | 97% | 102 | 100% | 144 | 37% | 90 | 67% | 139 | 99% | 98 | 97% | 65 | 100% |
| Credentialing-SHP | 100% providers completed in 30 days | Monthly w/reset | 101 | 100% | 78 | 100% | 67 | 100% | 102 | 100% | 231 | 59% | 100 | 75% | 139 | 99% | 88 | 87% | 65 | 100% |
| Customer Service-SHP | - 98% of all inquiries are resolved within 2 business days from receipt date - 100% of all inquiries are resolved within 8 business days from receipt date | Monthly w/reset | 42,664 | 100% | 31,527 | 100% | 28,325 | 100% | 30,096 | 100% | 22,807 | 100% | 21,358 | 100% | 20,596 | 100% | 20,761 | 100% | 18,750 | 100% |
| Quarterly | | | 1Q | | 2Q | | 3Q | | 4Q | | | | | | | | | | | |
| Grievances-SHP | - 98% of grievances are resolved within 20 days | Quarterly w/reset | 170 | 100% | 170 | 100% | 112 | 100% | | | | | | | | | | | | |
| Grievances-SHP | - 100% of grievances are resolved within 40 days | Quarterly w/reset | 161 | 100% | 161 | 100% | 112 | 100% | | | | | | | | | | | | |
| Appeals-SHP | Contractor sends an acknowledgement letter within 3 business days of receipt of the appeal request | Quarterly w/reset | 9 | 100% | 31 | 100% | 171 | 100% | | | | | | | | | | | | |

Reporting Protocol and Summary- United Health Community Plan

| Subject | P4P Metric | Measurement Period | Measures Achieved During Reporting Period | | | | | | | | | | | | | | | | | |
|-----------------------|---|--------------------|---|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|---------|
| | | | Jan | | Feb | | Mar | | Apr | | May | | Jun | | Jul | | Aug | | Sep | |
| Monthly | | | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Number | Percent | Number | Percent |
| Claims Processing-UHC | - 100% of clean claims are processed within 20 days | Monthly w/reset | 330,461 | 92.26% | 243,951 | 96.39% | 315,844 | 91.87% | 319,201 | 92.01% | 354,002 | 99.23% | 325,313 | 99.86% | 313,315 | 99.64% | 345,355 | 100% | 301,184 | 100% |
| Claims Processing-UHC | - 99% of all non-clean claims are processed within 45 days | Monthly w/reset | 16,857 | 99.09% | 18,234 | 100.00% | 16,882 | 99.02% | 16,641 | 99.08% | 14,119 | 96.49% | 17,553 | 99.97% | 11,210 | 100% | 13,398 | 100% | 9,166 | 100% |
| Claims Processing-UHC | - 100% of all claims are processed within 60 days | Monthly w/reset | 375,060 | 99.96% | 276,106 | 100.00% | 360,694 | 99.96% | 363,584 | 99.96% | 369,714 | 99.56% | 343,324 | 100.00% | 325,659 | 100% | 358,755 | 100% | 310,351 | 100% |
| Credentialing-UHC | 90% providers completed in 20 days | Monthly w/reset | 312 | 98% | 217 | 99% | 137 | 97% | 215 | 98% | 134 | 99% | 93 | 97% | 110 | 100% | 135 | 100% | 92 | 99% |
| Credentialing-UHC | 100% providers completed in 30 days | Monthly w/reset | 317 | 100% | 220 | 100% | 141 | 100% | 219 | 100% | 135 | 100% | 96 | 100% | 110 | 100% | 135 | 100% | 93 | 100% |
| Customer Service-UHC | - 98% of all inquiries are resolved within 2 business days from receipt date - 100% of all inquiries are resolved within 8 business days from receipt date | Monthly w/reset | 36,554 | 99.78% | 16,197 | 99.17% | 17,194 | 98.84% | 16,205 | 99.04% | 13,037 | 99.03% | 11,387 | 97.95% | 12,808 | 97.61% | 12,867 | 99.89% | 12,244 | 99.82% |
| Quarterly | | | 1Q | | 2Q | | 3Q | | 4Q | | | | | | | | | | | |
| Grievances-UHC | - 98% of grievances are resolved within 20 days | Quarterly w/reset | 110 | 100% | 110 | 100% | 94 | 100% | | | | | | | | | | | | |
| Grievances-UHC | - 100% of grievances are resolved within 40 days | Quarterly w/reset | 140 | 100% | 140 | 100% | 94 | 100% | | | | | | | | | | | | |
| Appeals-UHC | Contractor sends an acknowledgement letter within 3 business days of receipt of the appeal request | Quarterly w/reset | 8 | 100% | 39 | 100% | 78 | 98% | | | | | | | | | | | | |