

Texas Healthcare Transformation and Quality Improvement Program
Section 1115 Quarterly Report for
Managed Care

Texas Health and Human Services Commission

Demonstration Reporting Period:

2016 State Fiscal Quarter 3, March - May

Demonstration Year (DY) 5 Quarter 3, April 1, 2016 - June 30, 2016

TABLE OF CONTENTS

I. Introduction	3
A. Managed Care Plans Participating in the Waiver Program	3
B. Monitoring Health Plans	4
II. Enrollment and Benefits Information.....	4
A. Eligibility and Enrollment.....	4
B. Enrollment Counts for the Quarter By Population	14
C. Medicaid Eligibility Changes	16
D. Anticipated Changes in Populations or Benefits	16
Delivery Networks and Access.....	17
A. Provider Networks	17
B. GeoAccess.....	18
C. Out-of Network Utilization.....	21
III. Outreach/Innovative Activities to Assure Access.....	23
A. Enrollment Broker and Plan Activities	24
B. Dental Stakeholder Meeting	24
C. Medicaid Managed Care Advisory Committee	25
D. Public Forum.....	25
E. Independent Consumer Supports System Plan	26
F. HHSC Managed Care Initiatives	27
IV. Collection and Verification of Encounter Data and Enrollment Data.....	27
V. Operational/Policy/Systems/Issues	27
VI. Action Plans for Addressing Any Issues Identified.....	28
VII. Consumer Issues.....	28
A. Hotline Call Volume and Performance.....	28
A. Complaints and Appeals Received by Plans.....	30
B. Complaints Received by the State	38

X. Quality Assurance/Monitoring Activity.....	41
A. DY5 Quarter 3 Update	41
Enclosures/Attachments.....	43
State Contacts.....	45
Acronym list.....	46

I. INTRODUCTION

The Texas Healthcare Transformation and Quality Improvement Program Section 1115 waiver enables the State to expand its use of Medicaid managed care to achieve program savings, while also preserving locally funded supplemental payments to hospitals. The goals of the demonstration are to:

- Expand risk-based managed care statewide;
- Support the development and maintenance of a coordinated care delivery system;
- Improve outcomes while containing cost growth;
- Protect and leverage financing to improve and prepare the healthcare infrastructure to serve a newly insured population; and
- Transition to quality-based payment systems across managed care and hospitals.

This report documents the State's progress in meeting these goals. It addresses the quarterly reporting requirements for the STAR and STAR+PLUS programs, as well as the Children's Medicaid Dental Services (Dental Program), which are found in the waiver's Special Terms and Conditions (STCs), items 20, 22, 24(e), 39(a) and (b), 40(b) and (c), and 68. These STCs require the State to report on various topics, including: enrollments and disenrollments; anticipated changes in populations or benefits; network adequacy; encounter data; operational, policy, systems, and fiscal issues; action plans for addressing identified issues; consumer issues; and quality assurance and monitoring.

The State collects performance and other data from its managed care organizations (or "plans") on a State Fiscal Quarter (SFQ) cycle; therefore, some of the quarterly information presented in this report is based on data compiled for 2016 SFQ3 (March - May) instead of Demonstration Year (DY) 5 (April 1, 2016 - June 30, 2016), Q3 ("2016 D3,"). Throughout the report, the State has identified whether the quarterly data relates to 2016 SFQ3 or 2016 D3.

A. MANAGED CARE PLANS PARTICIPATING IN THE WAIVER PROGRAM

During the 2016 SFQ3, the State contracted with 18 STAR, 5 STAR+PLUS, and 2 Dental program plans. Each health plan covers one or more of the 13 STAR service delivery areas (SDAs) and 13 STAR+PLUS SDAs while each dental plan provides statewide services. Please refer to Attachment A for a list of the STAR, STAR+PLUS, and Dental plans by area.

B. MONITORING HEALTH PLANS

The Health and Human Services Commission (HHSC) staff evaluates and routinely monitors managed care organization (MCO) and dental maintenance organization (DMO) performance reported by the MCOs and DMOs and compiled by HHSC. If an MCO or DMO fails to meet a performance expectation, standard, schedule, or other contract requirement such as the timely submission of deliverables or at the level of quality required, the managed care contracts give HHSC the authority to use a variety of remedies, including:

- Monetary damages (actual, consequential, direct, indirect, special, and/or liquidated damages (LD)),
- Corrective action plans (CAPs).

The information reflected in this document represents the most current information available at the time that it was compiled in the summer of 2016. At the time the report is submitted to the Centers for Medicare and Medicaid Services (CMS), the sanction process between HHSC and the health and dental plans may not be complete. HHSC posts the final details of any potential enforcement actions taken against a health or dental plan each quarter on the following website:

<https://hhs.texas.gov/services/health/medicaid-and-chip/provider-information/managed-care-organization-sanctions>

II. ENROLLMENT AND BENEFITS INFORMATION

This section addresses STCs 24(e), 39(a) and (b), 68 including quarterly trends and issues related to STAR, STAR+PLUS, and Dental Program eligibility and enrollment; enrollment counts for the quarter; Medicaid eligibility changes; anticipated changes in populations and benefits; and disenrollment from managed care. Unless otherwise provided, quarterly managed care data covers the 2016 SFQ3 reporting period (March - May) instead of 2016 D3 (April 1, 2016 - June 30, 2016). Supporting data are located in Attachment B.

A. ELIGIBILITY AND ENROLLMENT

This subsection addresses the quarterly reporting requirements found in STC 24(e) and 68. Attachment B includes enrollment summaries for the three managed care programs. The enrollment data in this subsection are based on prospective managed care enrollment counts in the last month of the quarter and represent a snapshot of the number of members enrolled in Texas Medicaid managed care programs and health plans.

The total enrollment in Texas Medicaid managed care programs, STAR, STAR+PLUS and Dental, decreased by -0.25% from 2016 SFQ2 to 2016 SFQ3.

1. STAR

The number of members enrolled in STAR plans decreased by -0.38% from 2,848,452 in 2016 SFQ2 to 2,837,660 in 2016 SFQ3. Eleven MCOs and ten SDAs reported a decrease in membership from SFQ2 to SFQ3 shown in the following tables. The largest enrollment decreases were reported for Christus (-5.31%) and Parkland (-4.07%). Although Christus reported the largest decrease in the enrollment percentage point change, their enrollment decrease resulted in the loss of just 321 members. Parkland reported the largest decrease in enrollment in 2016 SFQ3 with 7,046 members. Despite the decrease in enrollment, Parkland's enrollment remained stable from SFQ2 to SFQ3. This means that the values for Parkland enrollment data are still within normal range of previously reported values. From 2016 SFQ2 to 2016 SFQ3, Molina (9.17%) reported the largest enrollment increase among MCOs. The increase in Molina's membership was the result of corrections made to the 2016 SFQ3 enrollment broker files. The Medicaid Rural Service Area (MRSA) Central SDA also had the largest enrollment increase (3.87%).

Enrollment by STAR MCO (2016 SFQ2- 2016 SFQ3)

STAR	2016 Q2	2016 Q3	Total Change	Percent Change from 2016 SFQ2 to 2016 SFQ3
Statewide	2,848,452	2,837,660	-10,792	-0.38%
Aetna	70,034	69,760	(274)	-0.39%
Amerigroup	552,326	550,635	(1,691)	-0.31%
BCBS	24,053	24,026	(27)	-0.11%
CHC	231,624	231,436	(188)	-0.08%
Christus	6,040	5,719	(321)	-5.31%
Community 1st	107,074	105,866	(1,208)	-1.13%
Cook Children's	97,649	96,733	(916)	-0.94%
Driscoll	137,280	138,593	1,313	0.96%
El Paso 1st	65,470	65,970	500	0.76%
FirstCare	91,817	92,875	1,058	1.15%
Molina	89,314	97,506	8,192	9.17%
Parkland	173,026	165,980	(7,046)	-4.07%
Scott & White	42,101	42,374	273	0.65%
Sendero	12,075	12,350	275	2.28%
Seton	16,956	17,526	570	3.36%
Superior	685,062	679,721	(5,341)	-0.78%
Texas Children's	329,548	323,520	(6,028)	-1.83%
United	117,003	117,070	67	0.06%

Enrollment by SDA (2016 SFQ2 – 2016 SFQ3)

STAR	2016 Q2	2016 Q3	Total Change	Percent Change from 2016 SFQ2 to 2016 SFQ3
Statewide	2,848,452	2,837,660	-10,792	-0.38%
Bexar	243,103	241,504	-1,599	-0.66%
Dallas	392,822	385,497	-7,325	-1.86%
El Paso	122,029	119,685	-2,344	-1.92%
Harris	674,780	668,559	-6,221	-0.92%
Hidalgo	343,173	348,936	5,763	1.68%
Jefferson	73,823	73,153	-670	-0.91%
Lubbock	73,301	73,814	513	0.70%
MRSA Central	127,172	132,088	4,916	3.87%
MRSA Northeast	163,162	162,003	-1,159	-0.71%
MRSA West	148,370	150,413	2,043	1.38%
Nueces	83,054	82,862	-192	-0.23%
Tarrant	260,383	257,883	-2,500	-0.96%
Travis	143,280	141,263	-2,017	-1.41%

Market Share by STAR MCO (2016 SFQ2 - SFQ3)

The STAR market share distribution by MCOs fluctuated slightly from the prior quarter, with a maximum percentage point change from 2016 SFQ2 to 2016 SFQ3 of 0.30 percentage points reported for Molina as shown in the table below.

STAR	2015 Q4	2016Q1	2016Q2	2016Q3	Percentage Point Change from 2016 Q2 to 2016 Q3
Aetna	2.52%	2.50%	2.46%	2.46%	0.00%
Amerigroup	19.54%	19.68%	19.39%	19.40%	0.01%
BCBS	0.80%	0.81%	0.84%	0.85%	0.00%
CHC	8.06%	8.08%	8.13%	8.16%	0.02%
Christus	0.22%	0.22%	0.21%	0.20%	-0.01%
Community 1st	3.75%	3.76%	3.76%	3.73%	-0.03%
Cook Children's	3.38%	3.40%	3.43%	3.41%	-0.02%
Driscoll	4.67%	4.70%	4.82%	4.88%	0.06%
El Paso 1st	2.26%	2.26%	2.30%	2.32%	0.03%
FirstCare	3.21%	3.20%	3.22%	3.27%	0.05%
Molina	3.46%	3.45%	3.14%	3.44%	0.30%
Parkland	6.16%	6.13%	6.07%	5.85%	-0.23%
Scott & White	1.44%	1.37%	1.48%	1.49%	0.02%
Sendero	0.39%	0.42%	0.42%	0.44%	0.01%
Seton	0.59%	0.58%	0.60%	0.62%	0.02%
Superior	23.96%	23.88%	24.05%	23.95%	-0.10%
Texas Children's	11.46%	11.43%	11.57%	11.40%	-0.17%
United	4.11%	4.12%	4.11%	4.13%	0.02%

2. STAR+PLUS

The number of members enrolled in STAR+PLUS plans increased by 0.19% from 536, 476 in 2016 SFQ2 to 537,512 in 2016 SFQ3. Most STAR+PLUS plans had only slight fluctuations with Amerigroup having the largest enrollment increase (1.11%). Molina reported the largest decrease in enrollment (-0.92%) by MCO. Among SDAs, El Paso SDA (2.72%) had the largest increase in member enrollment. Bexar SDA reported the largest decrease in enrollment (-2.53%) with a decrease of 1,226 members compared to an increase reported in SFQ2 of 2,067 members. Harris SDA reported the largest total change (2,010) in enrollment in SQ3 compared to SFQ2 (1,443) members. The following tables show the change in enrollment in STAR+PLUS by MCO and SDA from 2016 SFQ2 to 2016 SFQ3.

Enrollment by STAR+PLUS MCO (2016 SFQ2 – 2016 SFQ3)

STAR+PLUS	Sum of 16Q2 Enroll	Sum of 16Q3 Enroll	Total Change	Percentage Change
Statewide	536,476	537,512	1036	0.19%
Amerigroup	136,348	137,866	1518	1.11%
Cigna-HealthSpring	50,916	50,656	-260	-0.51%
Molina	90,538	89,708	-830	-0.92%
Superior	143,920	144,057	137	0.10%
United	114,754	115,225	471	0.41%

Enrollment by SDA (2016 SFQ2 – 2016 SFQ3)

STAR+PLUS	2016 Q2	2016 Q3	Total Change	Percentage Change
Statewide	536,476	537,512	1,036	0.19%
Bexar	48,450	47,224	-1,226	-2.53%
Dallas	60,950	61,779	829	1.36%
El Paso	20,148	20,697	549	2.72%
Harris	102,337	104,347	2,010	1.96%
Hidalgo	67,171	67,777	606	0.90%
Jefferson	20,607	20,335	-272	-1.32%
Lubbock	13,943	13,732	-211	-1.51%
MRSA Central	30,014	29,593	-421	-1.40%
MRSA Northeast	46,771	46,250	-521	-1.11%
MRSA West	38,589	38,149	-440	-1.14%
Nueces	22,164	21,972	-192	-0.87%
Tarrant	39,228	39,759	531	1.35%
Travis	26,104	25,898	-206	-0.79%

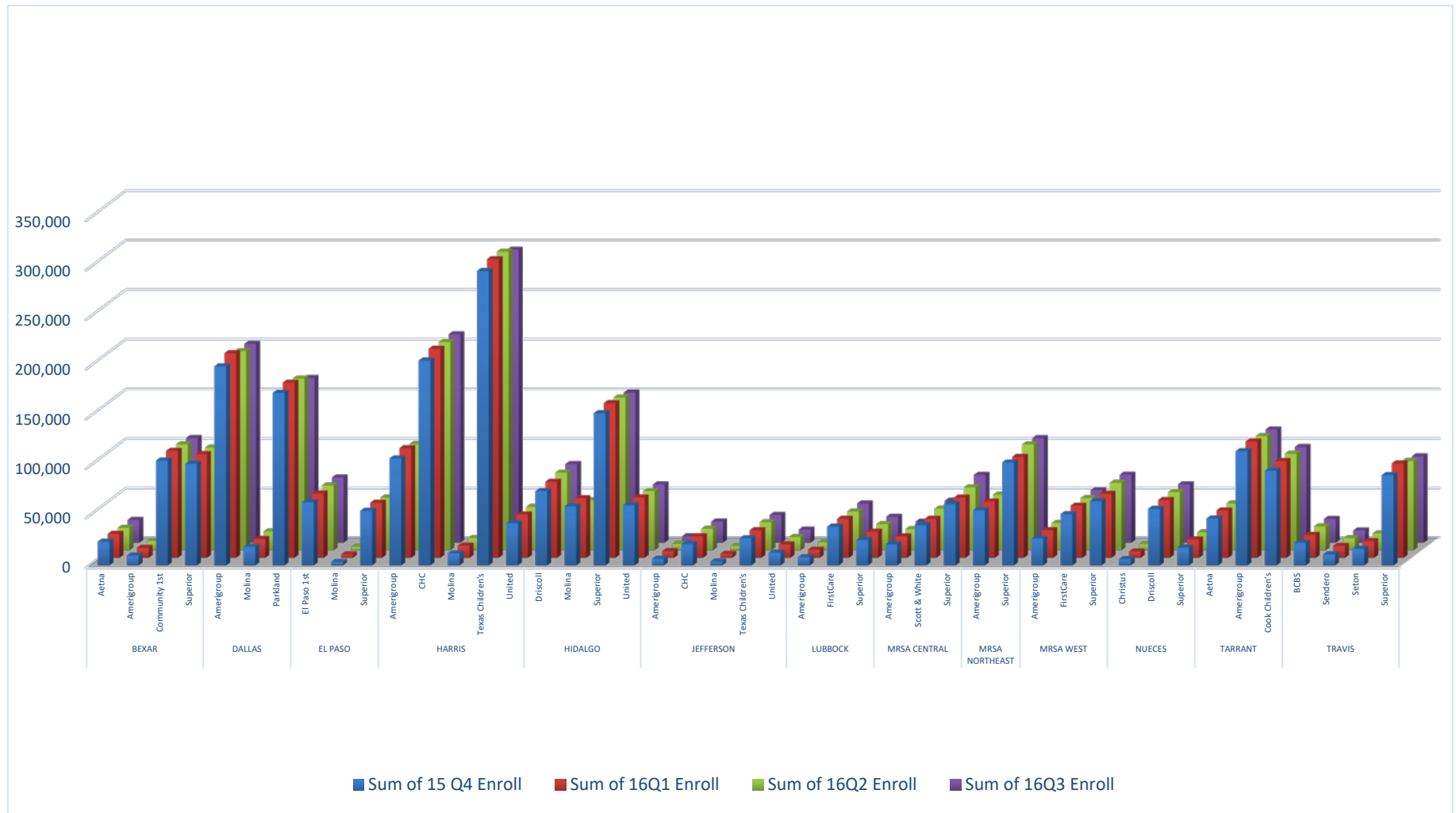
Market Share by STAR+PLUS MCO (2016 SFQ2 - SFQ3)

The STAR+PLUS market share remained relatively stable from 2016 SFQ2 to 2016 SFQ3. Amerigroup's market share reported an increase from the prior quarter (0.23%). United's market share increased from the prior quarter (0.05%). Molina, United and Cigna-Health Spring market reported smaller market shares in 2016 SFQ3. Despite these changes, the order of MCOs by market share remained consistent as shown in the table below.

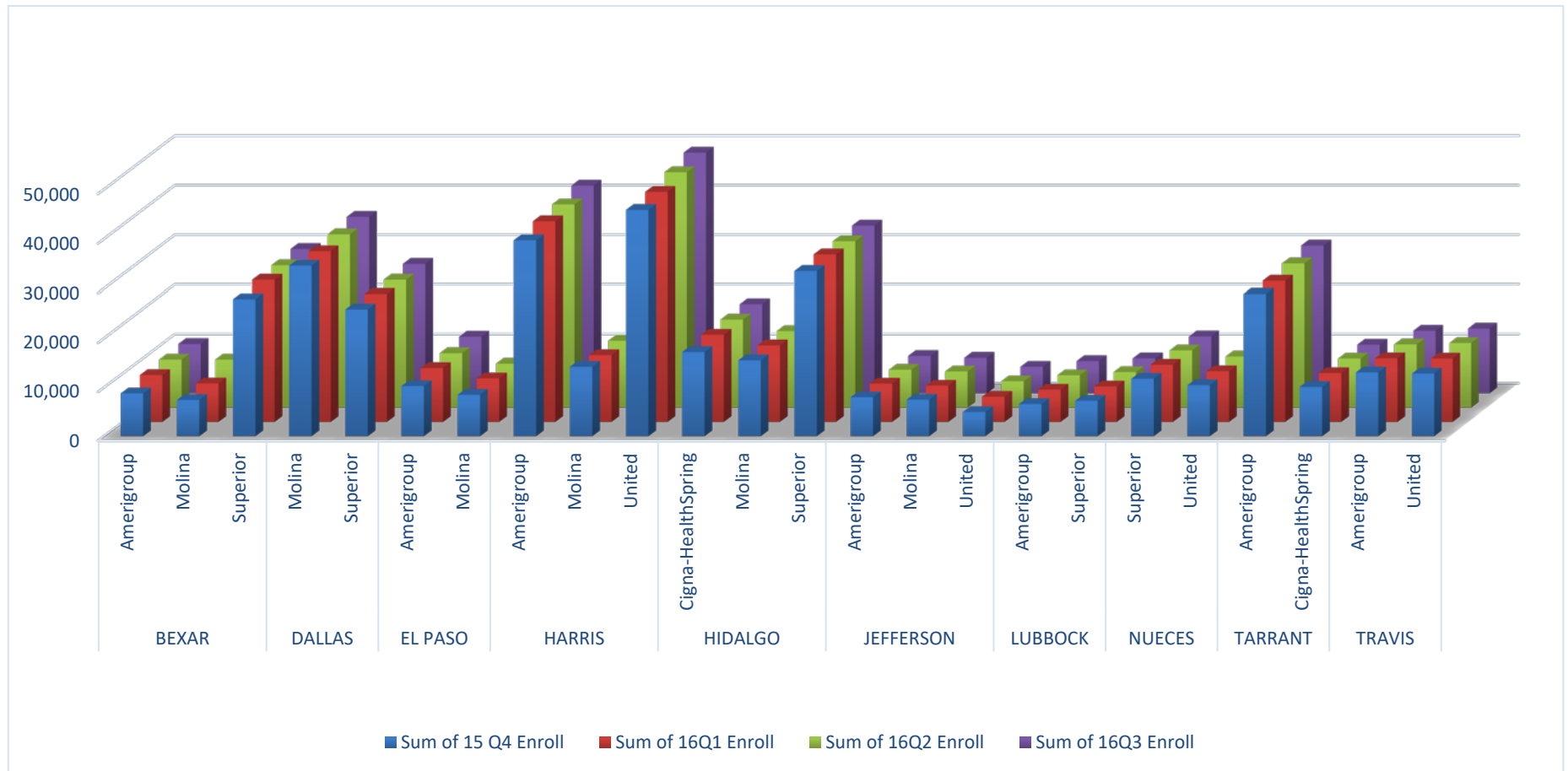
STAR+PLUS	2015 Q4	2016 Q1	2016 Q2	2016 Q3	Percentage Point Change from 2016 Q3 to 2016 Q2
Amerigroup	25.38%	25.48%	25.42%	25.65%	0.23%
Cigna- HealthSpring	9.56%	9.52%	9.49%	9.42%	-0.07%
Molina	16.71%	16.60%	16.88%	16.69%	-0.19%
Superior	27.06%	27.12%	26.83%	26.80%	-0.03%
United	21.29%	21.28%	21.39%	21.44%	0.05%

The two following graphs show STAR and STAR+PLUS quarterly enrollment by MCO and SDA from SF15Q4 to SF16Q3. The third graph shows STAR+PLUS quarterly enrollment in the MRSA SDAs by MCO.

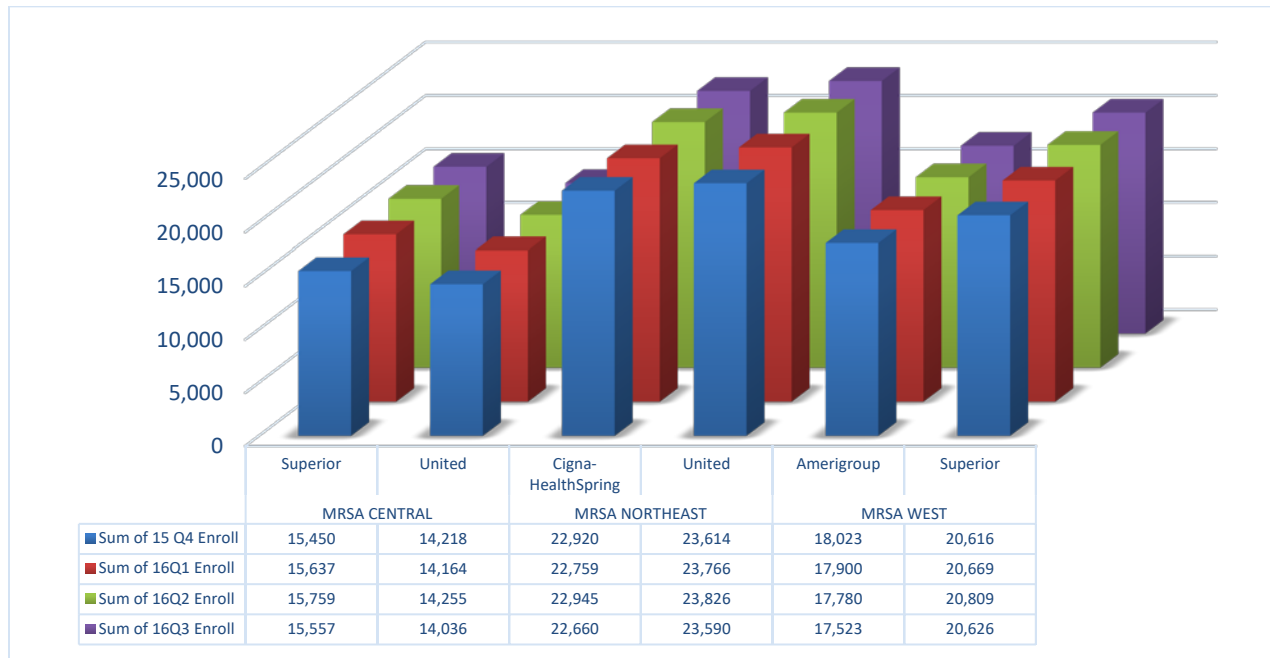
STAR Program Enrollment by MCO and Service Delivery Area (2015 SFQ4-2016 SFQ3)



STAR+PLUS Non-MRSA Program Enrollment by MCO and Service Delivery Area (2015 SFQ4 -2016 SFQ3)

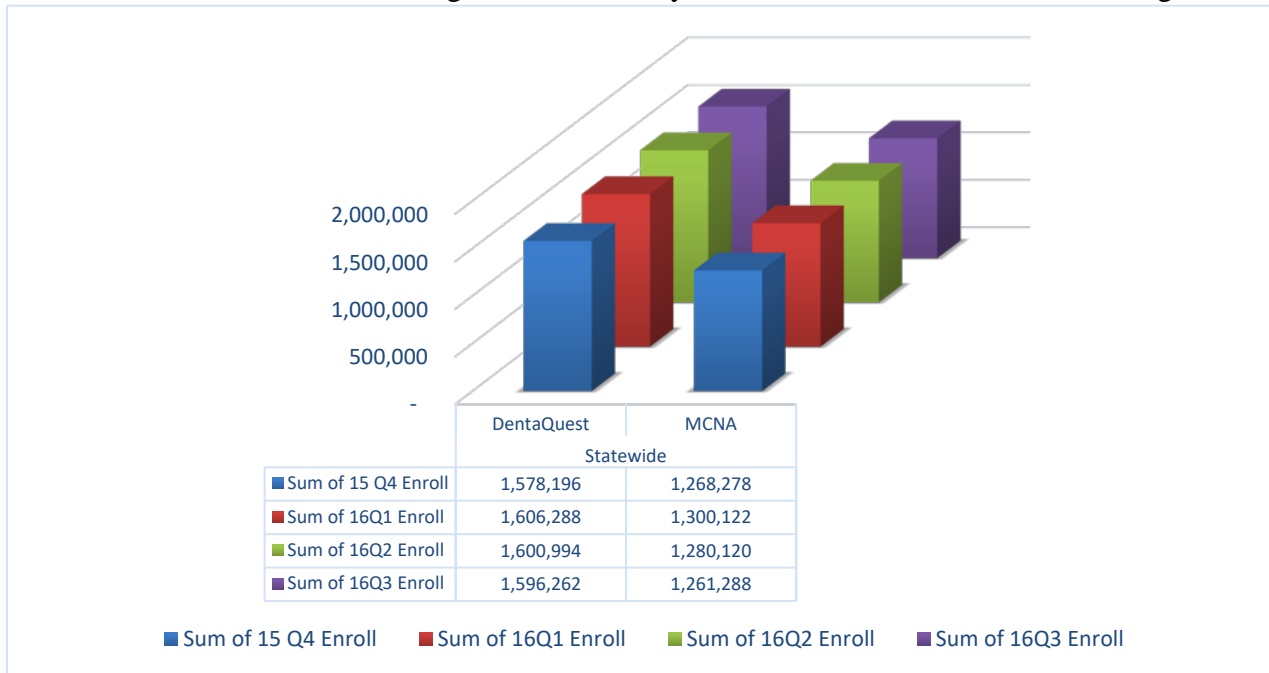


STAR+PLUS MRSA Program Enrollment by MCO and Service Delivery Area (SFY2015 Q4 through 2016 SFQ3)



Dental Program

Total enrollment in the Dental Program decreased by -0.82% to 2,857,550 members during 2016



SFQ3.

Dental Market Share Statewide (2016 SFQ2 - SFQ3)

Market share in the Dental Program remained steady (within a percentage point): As shown in the table below, DentaQuest had approximately 56% while MCNA maintained at 44%.

Dental	2015 Q4	2016 Q1	2016 Q2	2016 Q3	Percent Point Change from 2016 Q2 to 2016 Q3
DentaQuest	55.44%	55.27%	55.57%	55.86%	0.29%
MCNA	44.56%	44.73%	44.43%	44.14%	-0.29%

B. ENROLLMENT COUNTS FOR THE QUARTER BY POPULATION

This subsection includes quarterly enrollment counts as required by STC 67. Due to the time required for the data collection process, unique member counts per quarter are reported on a two quarter lag. The following table includes enrollment counts for the 2016 D1 reporting period. Enrollment counts are based on persons and not member months.

Enrollment Counts (DY5 Q1, October - December 2015)

Demonstration Populations	Total Number
Adults	331,501
Children	2,795,279
Aged and Medicare Related (AMR)	384,091
Disabled	439,869

C. MEDICAID ELIGIBILITY CHANGES

No eligibility changes were made to the 1115 waiver populations in 2016 D3.

D. ANTICIPATED CHANGES IN POPULATIONS OR BENEFITS

STAR Kids

On November 1, 2016, children and young adults under the age of 21 who are not in state conservatorship and who receive Supplemental Security Income (SSI) or SSI-related Medicaid, who reside in a community-based intermediate care facility for individuals with an intellectual disability or a related condition (ICF-IID) or a nursing facility (NF), or who are served through one of the Medicaid 1915(c) waivers will transition from traditional Medicaid FFS, STAR or STAR+PLUS Medicaid managed care to STAR Kids Medicaid managed care for the provision of their 1905(a) state plan services. Individuals will receive a continuum of services, including acute care, behavioral health, and state plan long-term services and supports (LTSS).

Children and young adults who currently receive services through the Medically Dependent Children Program (MDCP) will begin receiving their MDCP 1915(c) services from either a STAR Kids or STAR Health MCO. Other 1915(c) Home and Community Based Services (HCBS) waivers, NF services, and ICF-IID services will continue to be operated as they are today and will not be capitated services in the STAR Kids model. STAR Kids MCOs will provide service coordination for all members, including coordination with non-capitated HCBS that exist outside of this section 1115 demonstration. Children in the conservatorship of the Department of Family and Protective Services (DFPS) who have SSI or SSI-related Medicaid, or who are served through one of the 1915(c) waivers, are currently served through the STAR Health 1915(a) program and will continue in STAR Health after implementation of STAR Kids.

Medicaid Breast and Cervical Cancer, Adoption Assistance/Permanency Care Assistance

Currently, Medicaid Breast and Cervical Cancer (MBCC) and Medicaid services for individuals in Adoption Assistance (AA) and Permanency Care Assistance (PCA) are delivered through traditional Medicaid fee for service (FFS). These services will transition from Medicaid FFS to Medicaid managed care. Starting September 1, 2017, MBCC benefits will be delivered through STAR+PLUS Medicaid managed care, and Adoption Assistance and Permanency Care Assistance Medicaid benefits will be delivered through STAR Medicaid managed care.

Under managed care, about 5,000 MBCC clients will have access to unlimited prescriptions and service coordination and access to Long Term Service and Supports as needed through STAR+PLUS (services not available in Medicaid FFS). Additionally, 49,000 AA/PCA clients

will have access to enhanced service management through STAR (a service not available in Medicaid FFS).

DELIVERY NETWORKS AND ACCESS

This subsection addresses the quarterly reporting requirements found in STCs 24(e), 39(a), 40(b) and 68. Supporting data is located in Attachments C through K. HHSC routinely reviews various measures related to network adequacy, including those reported in the following section of this report: provider network counts, geo-access and out-of-network utilization. HHSC monitors these measures in combination with member complaints in order to assess the adequacy of MCO provider networks.

A. PROVIDER NETWORKS

This subsection includes quarterly healthcare and pharmacy provider counts for STAR and STAR+PLUS and dental provider counts for the Dental Program. The provider network methodology is contained in Attachment C1, provider network counts are reported in Attachment C2, and provider termination counts are reported in Attachment C3.

1. Primary Care Providers (PCPs)

MCOs are required to assign 100% of non-dual members to a PCP within 5 business days of MCO enrollment. The Managed Care Contracts require all MCOs to assign members to a PCP, and for all adult members to have access to at least one PCP and children to at least two age appropriate PCPs within established mileage standards.

Across the STAR program statewide, the MCOs reported a total of 19,008 unique PCP providers, an increase of 478 (2.58%) from the previous quarter. The MCOs reported 14,476 unique PCP providers in the STAR+PLUS program statewide, an increase of 480 (3.43%) from the previous quarter.

2. Specialists (non-pharmacy)

Across the STAR program statewide, the MCOs reported 60,525 unique specialty providers, an increase of 2,639 (4.56%) from the previous quarter. The MCOs reported 51,603 unique specialty providers in the STAR+PLUS program statewide, an increase of 2,526 (5.15%) providers from the previous quarter.

3. Provider Terminations

Attachment C3 details data reported by the MCOs regarding the number of PCPs and specialists terminated in 2016 SFQ3. The MCOs reported a variety of reasons for provider termination, including: provider integrity issues (credentialing requirements not met), providers failed to re-

credential, termination requested by provider, MCO terminated for cause, provider left group practice, and provider closed practice.

4. Pharmacy Providers

Across the STAR program statewide, the MCOs reported a total of 4,920 unique pharmacies, an increase of 61 (1.26%) pharmacies from the previous quarter. The MCOs reported 4,822 unique pharmacies in the STAR+PLUS program statewide, an increase of 238 (5.19%) pharmacies from the previous quarter. All MCOs contract with pharmacies outside their primary SDA to ensure members have access to a pharmacy if they travel outside the SDA.

5. Dental Program Provider Counts

In 2016 SFQ3, DentaQuest reported a total of 5,256 unique dental providers, an increase of 121 (2.36%) dental providers from the previous quarter. MCNA reported 4,622 unique dental providers, an increase of 57 (1.25%) dental providers from the previous quarter.

B. GEOACCESS

This subsection includes quarterly geo-access information based on geo-mapping data provided by HHSC Strategic Decision Support (SDS) and self-reported by MCOs, in accordance with STCs 24(e) and 39(a).

Attachments E, G and H show HHSC geo-mapping results by plan and SDA for the following provider types and populations:

- All STAR and STAR+PLUS members: open panel PCP and pharmacy;
- Children STAR and STAR+PLUS: otolaryngologist (ENT);
- Dental members: main dentists, endodontic, oral surgery, orthodontic, periodontist and prosthodontist

Attachments I, J, and K provide a summary of the plans' self-reported geo-mapping data by plan and SDA for several provider types. The requirements for provider types vary by program and population as described below.

- All STAR and STAR+PLUS members: open panel PCPs, obstetrician/gynecologist for female members, orthopedic surgeon, outpatient behavioral health services, acute care hospitals and pharmacy;
- Adults and children in STAR and children in STAR+PLUS: orthopedic surgery;
- Children in STAR and STAR+PLUS: ENT;
- Adults in STAR+PLUS: urology, ophthalmology, cardiovascular disease specialist;

- Dental members: main dentists, endodontic, oral surgery, orthodontic; periodontist and prosthodontist.

For all STAR and STAR+PLUS SDAs, the following benchmarks were applied for access to PCPs and specialists:

- 90% – two open panel PCPs for children and one open panel PCP for adults and
- 90% – access to at least one of all other provider types for adults and children.

If the MCO does not meet the geomapping mileage standards, it may submit a time-limited special exception request. The request must include supporting documentation explaining why the exception should be granted. HHSC staff review the special exception request and supporting documentation. HHSC staff may consider additional factors such as known marketplace issues. HHSC may grant an exception for the quarter in which the exception was submitted and up to three subsequent state fiscal quarters and plans will not be subject to remedy.

1. Access to PCPs and ENTs

Geo-access to PCPs and ENTs is reported on Attachment E. In 2016 SFQ3 across the state, the STAR and STAR+PLUS programs exceeded the State's 90% benchmarks for access to PCPs and ENTs. Based on the HHSC Geo-Mapping results, all plans met the access standard for children and adult access to a PCP with an open panel in 2016 SFQ3. Most plans met the access standard for children's access to an ENT with an open panel in 2016 SFQ3. The following plans did not meet the 90% ENT access standard:

STAR: MRSA West (Amerigroup), Nueces (Christus) and Travis (Sendero).

STAR+PLUS: MRSA West (Amerigroup)

2. Access to Specialty Care

Attachments I1 and I2 show the geo-access measures by MCO for specialty care. The attachments are separated by children and adults and by the STAR and STAR+PLUS programs.

Children

Most STAR MCOs met the geo-mapping standards for providing specialty care to child members with the exception of the following MCOs listed by SDA: MRSA West (Amerigroup) and (First Care), El Paso (Molina) and (Superior), Jefferson (Molina) and Nueces (Christus).

In the STAR+PLUS, program, the following MCOs listed by SDA experienced difficulty with achieving the geo-mapping standards for providing specialty care to children: Bexar and MRSA West (Amerigroup), El Paso and Jefferson (Molina).

Adults

In the adults' category of the STAR program, the majority of the MCOs met the geo-mapping standards for providing specialty care. However, the following STAR plans failed to meet the standards by SDA: Bexar and MRSA West (Amerigroup), Nueces (Christus), El Paso (Molina).

As mentioned in the previous quarterly report, HHSC granted special exception requests for the following STAR plans: Christus in the Nueces SDA; First Care in MRSA West through 2016 SFQ3; and Molina in the Jefferson SDA through 2016 SFQ4. In STAR+PLUS, special exception requests were granted to Amerigroup in the El Paso SDA and Molina in the Jefferson SDA through 2016 SFQ4.

3. Access to Pharmacy

Attachment G provides summaries of HHSC geo-mapping data by plan and SDA for pharmacies. For all STAR and STAR+PLUS SDAs, the following standards applied:

- 80% – access to a network pharmacy in urban counties within 2 miles
- 75% – access to a network pharmacy in suburban counties within 5 miles
- 90% – access to network pharmacy in rural counties within 15 miles
- 90% – access to a 24-hour pharmacy in all counties within 75 miles

Certain areas continued to have deficiencies in meeting access standards in 2016 SFQ3. This information is available in Attachment G. It is important to note that 100% of members have access to mail order pharmacies; this serves as an important accessibility benefit for both members who require maintenance medications to manage chronic health conditions and for members who lack access to transportation.

In addition, according to the Pharmacy Benefits Managers (PBMs) for all MCOs, Medicaid members may access any network pharmacy enrolled with the Texas Medicaid Vendor Drug Program within or outside of the distance criteria.

4. Dental Geo-mapping

Dental geo-mapping results are divided into eleven Texas regions. Within each region, HHSC generates a report on the percentage of members in urban and rural areas with access to main dentists, endodontists, oral surgeons, orthodontists, periodontists and prosthodontists.

Attachment H provides summaries of HHSC geo-mapping information for both dental plans and Attachment K provides DMO reported geo-mapping for both dental plans.

The dental contracts require plans to provide access to at least two providers within the following standards and travel distances:

- 100% – open practice main dentist in urban areas within 30 miles;
- 100% – open practice main dentist in rural areas within 75 miles; and
- 95% – specialists in urban and rural areas within 75 miles.

In 2016 SFQ3, DMO-self reported geomapping data (as depicted in Attachment K) demonstrated both DentaQuest and MCNA maintained sufficient provider networks for Main Dental Provider Home in rural and urban counties as well as pediatric dentists statewide with the exception of the Northwest and West Texas regions due in part to overall provider shortages in these areas. HHSC Dental Geomapping data (as depicted in Attachment H) demonstrated that access to dental specialty providers (periodontists, endodontists, prosthodontists and oral surgeons) continues to be limited in most parts of Texas. It should be noted that statewide data from Attachment H indicates both DMOs have extreme difficulty procuring periodontists, endodontists and prosthodontists within 75 miles. A reason for the low figures for statewide data that these particular specialties are mostly located in the Metroplex, Gulf Coast, Upper South Texas and Upper Rio Grande regions. Both DMOs report monitoring the State Licensing Board's and HHSC claims administrator's websites and utilizing other internet resources in an effort to identify potential recruitment opportunities.

C. OUT-OF NETWORK UTILIZATION

As required by Texas law,¹ the State monitors health and dental plans' use of out-of-network (OON) facilities and providers.² In each SDA, OON utilization should not exceed the following thresholds:

- 15% of inpatient hospital admissions;
- 20% of emergency room (ER) visits; and
- 20% of total dollars billed for other outpatient services.

Attachment D details the OON utilization rates by program, MCO and SDA. The following plans listed below exceeded OON utilization standards in 2016 SFQ3. HHSC approved special exception requests from MCOs listed above. The State will continue to monitor these plans and

¹ Texas Government Code §533.005(a)(11).

² 1 Texas Administrative Code §353.4(e)(2).

will require corrective action or other remedies if appropriate. A description of the special exception request process is detailed below.

STAR

- Aetna: Bexar SDA
- Amerigroup: Dallas, Harris and MRSA Central SDAs
- Molina: Dallas and Harris SDAs
- Seton: Travis SDA
- Texas Children's: Harris SDA

STAR+PLUS

- Amerigroup: Harris and Jefferson SDAs
- Cigna Health-Spring: Tarrant SDA
- Molina: Dallas and Harris SDAs
- Superior: Dallas SDA
- United: Harris and MRSA Central SDAs

Under certain circumstances, plans may request time-limited exemptions from the OON standards if the plans provide evidence warranting special exception. In order to be granted an exemption the plan must demonstrate both that admissions or visits to a single OON facility account for 25% or more of the plan's admissions or visits in a reporting period; and the plan can demonstrate that it made good faith reasonable efforts to contract with an OON facility to no avail. If the State grants the special exception, the non-contracted provider is removed from the plan's OON calculations and the plan recalculates the utilization rate. HHSC evaluates the recalculated OON rates to determine whether OON standards are met. HHSC may grant an exception for the quarter in which the exception was submitted and up to three subsequent state fiscal quarters. MCOs with approved special exceptions are not subject to remedies or assessed liquidated damages (LDs). Attachment D provides utilization data, including recalculated rates, by program, MCO, and SDA.

Dental

Dental plans continued to report OON utilization well below the 20% threshold at 0% for 2016 SFQ3. In the Dental Program, the 20% standard for "other services" applies to out-of-network dental services.

III. OUTREACH/INNOVATIVE ACTIVITIES TO ASSURE ACCESS

This section addresses the quarterly requirements for STC 68 regarding outreach and other initiatives to ensure access to care. The Dental Stakeholder Update addresses STC 40(c) and the Medicaid Managed Care Advisory Committee meeting update also addresses STC 68.

A. ENROLLMENT BROKER AND PLAN ACTIVITIES

The State's Enrollment Broker, MAXIMUS, performs various outreach efforts to educate potential clients about their medical and dental enrollment options. During the 2016 D3 Demonstration period (April - June 2016) MAXIMUS sent 323,141 enrollment mailings to potential STAR and STAR+PLUS clients, and 201,887 mailings to potential Dental Program clients. MAXIMUS field staff completed 20,619 home visit attempts for these programs and 150,849 phone call attempts. Additionally, MAXIMUS completed 6,891 field events, which included enrollment events, community contacts, presentations, and health fairs. The full report is available in Attachment L.

The State's managed care contracts also require health and dental plans to conduct provider outreach efforts and educate providers about managed care requirements. Plans must conduct training within 30 days of placing a newly contracted provider on active status. Training topics that promote access to care include:

- Covered services and the provider's responsibility for care coordination;
- The plan's policies regarding network and OON referrals;
- Texas Health Steps benefits; and
- The State's Medical Transportation Program.

To promote access to care, health and dental plans must update their provider directories on a quarterly basis and online provider directories at least twice a month. Plans also must mail member handbooks to new members no later than five days after receiving the State's enrollment file and to all members at least annually and upon request. The handbooks must describe how to access primary and specialty care.

Through the member handbooks and other educational initiatives, plans must instruct members on topics such as:

- How managed care operates;
- The role of the primary care physician or main dentist;
- How to obtain covered services;
- The value of screening and preventative care; and
- How to obtain transportation through the State's Medical Transportation Program.

B. DENTAL STAKEHOLDER MEETING

On March 11, 2016, HHSC's Dental Director attended a Texas Health Steps Regional Training in Houston. The purpose was to interact with providers and answer questions. Also on March 11,

HHSC conducted the final meeting of the main dental home workgroup with stakeholders to discuss final recommendations for operational refinements to the main dental home concept. In addition, on April 12, 2016, HHSC conducted a stakeholder workgroup to discuss craniofacial orthodontic issues and potential operational refinements to better serve those clients. Finally, HHSC attended the Texas Dental Association Texas Meeting on May 6, 2016. The session consisted of presentations by the dental maintenance organizations (DMOs) and the HHSC Inspector General. HHSC participated in a Q&A session with dental providers and staff at the meeting.

C. MEDICAID MANAGED CARE ADVISORY COMMITTEE

The State Medicaid Managed Care Advisory Committee (SMMC) serves as the central source for stakeholder input on the implementation and operation of Medicaid managed care.

The SMMC did not meet during the 2016 D3 reporting period but will reconvene in August 2016. As part of the process called for in Senate Bill. 200, approved by the 84th Texas Legislature, the HHS Transformation Office established a workgroup to review and draft rules pertaining to advisory committees that are either new or are being reestablished. HHSC posted the rules to the Texas Register April 15, 2016. From April 1st 2016 to June 30th 2016, applicants for SMMC Advisory Committee were solicited and are now awaiting approval by the Executive Commissioner.

D. PUBLIC FORUM

The Medical Care Advisory Committee (MCAC) met on May 12, 2016. The date, time and location of the MCAC were published on the HHSC website prior to the meeting. HHSC staff proposed new Texas Administrative Code (TAC) Title 1, Part 15, Chapter 353, Subchapter M, concerning Home and Community-Based Services in Managed Care and Subchapter N concerning STAR Kids. HHSC also proposed amendments to TAC Title 1, Part 15, Chapter 353, Subchapter A, concerning General Provisions; Subchapter G, concerning STAR+PLUS; and Subchapter H, concerning STAR Health.

The proposed new rules and rule revisions align with legislative direction to provide Medicaid benefits to individuals under the age of 21 who have disabilities using a mandatory, capitated STAR Kids managed care program. Texas Government Code §533.00253, enacted in 2013, directs HHSC to establish a mandatory, capitated STAR Kids managed care program tailored to provide Medicaid benefits to individuals under the age of 21 who have disabilities. HHSC intends for the STAR Kids program to improve coordination of care, access to care, health outcomes, and quality of care with an operational start date of November 1, 2016. As a part of the STAR Kids implementation, the Medically Dependent Children Program will be delivered through managed care to children receiving STAR Kids.

Members of the MCAC provided comments and questions related to the new direction for Delivery system Reform Incentive Payment (DSRIP) projects. No members of the public provided comment during the meeting.

E. INDEPENDENT CONSUMER SUPPORTS SYSTEM PLAN

The structure and operation of the Independent Consumer Supports System (ICSS) aligns with the core elements provided in STC 20. The Texas ICSS consists of the HHSC Medicaid/ CHIP Division, the Office of the Ombudsman, MAXIMUS and community support from the Aging and Disability Resource Centers (ADRCs). HHSC will provide relevant updates regarding ICSS in this section of the report each quarter.

1. Office of the Ombudsman

Compared to the second quarter of 2016, the Ombudsman Managed Care Assistance Team (OMCAT) averaged a call abandonment rate of 13% and a call volume increase of 6%, or 574 additional calls. The increase in calls received is typical due to the 3rd quarter having fewer holidays than the second quarter. The increase in calls handled and decrease in the overall abandonment rate is due to the filling of vacant positions. The unit does not anticipate a significant change in the call volume until the fall of 2016 when the STAR Kids program rolls out.

The OMCAT unit has hired additional staff to help create a support network to better coordinate assistance provided to Medicaid managed care clients as mandated by state legislature. The network of entities includes the Ombudsman Office, the Long Term Care Ombudsman, the HHSC Medicaid / CHIP Division, Area Agencies on Aging, and Aging and Disability Resource Centers). The network held its first meeting during the 3rd quarter and will hold three more meetings in the 4th quarter. The network has already begun to identify issues related to managed care and will begin working toward resolution and future prevention of those issues shortly. The unit has been working on the development of customized Medicare training and will develop Medicare certification training for the entire Ombudsman Office. Over one-third of the complaints received were related to access to prescriptions. The majority of those complaints relate to clients' enrollment in the plan not showing in the MCO's PBM or clients whose Medicaid was recently renewed and did not appear in the MCO's system at all.

2. Aging and Disability Resource Center (ADRC)

Local-level ADRC staff continue to participate in training activities about available resources and referral protocols. Training sessions conducted this quarter included sessions on the ADRC Three-Year Strategic Plan, the Community Partner Program and Your Texas

Benefits. ADRCs also received training on Changes in the Guardianship Law and the long-term services and supports (LTSS) screen. The following are the dates and training topics:

- April 25: The Aging and Disability Resource Center Three-Year Strategic Plan
- May 31: Long-term Services and Supports Screen
- June 5: Changes in Guardianship Law effective September 2015
- June 28: Community Partner Program and Your Texas Benefits

In April 2016, the ADRC Three-Year Strategic Plan received final approval from Department of Aging and Disability Services Commissioner Jon Weizenbaum. Implementation of the strategic plan began immediately, with the development of ADRC Advisory Committee bylaws and the solicitation of applicants interested in joining the ADRC Advisory Committee. The application period closed on June 24, 2016. Commissioner Weizenbaum appointed 15 voting members to the advisory committee and 12 ex officio members, from various state agencies and programs.

F. HHSC MANAGED CARE INITIATIVES

At this time, HHSC does not have any new managed care initiatives to include in the 1115 Q3 report.

IV. COLLECTION AND VERIFICATION OF ENCOUNTER DATA AND ENROLLMENT DATA.

The State manages enrollment in a 24-month window that includes one prospective month and 23 prior period adjustment months. During successive processing cycles, this allows the State to verify prior enrollments and implement adjustments to them as necessary. The types of adjustments include revisions for newborns, deaths, change of SDAs and the addition of Medicare eligibility or eligibility attributes.

The State continues to conduct the quarterly MCO encounter financial reconciliation process for 2016 SFQ3. The State will contact each plan that did not achieve the financial reconciliation threshold, and advise them of the necessary steps to achieve contract compliance and, ultimately, certification.

V. OPERATIONAL/POLICY/SYSTEMS/ISSUES

This section addresses STC 68, regarding operational issues identified during the quarter. It also addresses pending lawsuits that may potentially impact the Demonstration, and new issues identified during the reported quarter.

VI. ACTION PLANS FOR ADDRESSING ANY ISSUES IDENTIFIED

This section describes the State's action plan for addressing issues identified in the quarterly report as required by STC 68.

1. Managed Care Issues

Issues identified during the quarter have been addressed within the relevant subject matter sections of this report.

VII. CONSUMER ISSUES

This section addresses quarterly reporting requirements in STCs 22, 39(a) and 68 regarding complaints and calls to HHSC Health Plan Management (HPM) staff and the Office of the Ombudsman's Medicaid Managed Care Helpline (MMCH), as well as complaints and appeals received by plans. This section includes trends discovered and steps taken to resolve complaints and prevent future occurrences.

The State tracks customer service issues, such as member and provider hotline performance, member complaints and appeals and provider complaints through the managed care quarterly reports.

Attachments M, N, and O include supporting data for this section.

A. HOTLINE CALL VOLUME AND PERFORMANCE

This subsection includes quarterly data regarding call center volumes and plan performance. As addressed in prior quarterly reports, the State's health and dental plans consolidate all Medicaid and CHIP calls for reporting purposes.

Attachments M1 through M4 detail the total calls received as well as performance standards for all MCOs and DMOs. Calls to the MCO member hotlines decreased by -2.86% in 2016 SFQ3. Calls to the MCO provider hotlines decreased by -8.23% and calls to the behavioral health hotline increased by 12.32% in SFQ3. In the Dental Program, calls to the member hotlines increased by 2.39% in SFQ3 and calls to the provider hotline increased by 4.21%.

The following table shows the number of hotline calls received per 1,000 members in the last four quarters. The rate of member hotline calls received per 1,000 members decreased in 2016 SFQ3 across most plans.

Member Hotline Calls Received per 1,000 Members (2015 SFQ4 - 2016 SFQ3)

MCO	Member Hotline per 1,000 Members			
	SFY15	SFY16		
	Q4	Q1	Q2	Q3
Aetna*	500	479	483	529
Amerigroup*	219	182	184	192
BCBS*	282	283	300	280
CHC*	207	198	184	182
Christus*	1,039	881	651	567
Cigna-HealthSpring	832	815	558	535
Community 1st*	232	221	238	231
Cook Children's*	2	224	120	128
Dentaquest	95	72	71	77
Driscoll*	152	155	174	175
El Paso 1st*	182	163	187	128
FirstCare*	130	177	125	144
MCNA	130	111	105	105
Molina*	456	415	578	488
Parkland*	271	251	244	250
Scott & White	360	355	319	308
Sendero*	197	231	428	365
Seton*	687	616	627	455
Superior*	242	197	204	209
Texas Children's*	119	115	134	83
United*	487	407	376	381
Statewide (excludes dental program)	258	234	237	230

*Enrollment and Hotline data includes CHIP program

The majority of the MCOs and DMOs met the following hotline performance in 2016 SFQ3:

- 99% of all calls must be answered by the fourth ring;
- ≤ 1% busy signal rate for all calls (* for behavioral health no incoming calls receive a busy signal);
- 80% of all calls must be answered by a live person within 30 seconds (* N/A for provider hotlines);
- ≤ 7% call abandonment rate; and
- ≤ 2 minute average hold time.

The following MCOs failed to meet the standards listed below. HHSC will be assessing liquidated damages (LDs) related to member hotlines for the following MCOs: Driscoll and Scott & White. HHSC staff are in the process of developing appropriate remedies for the remaining MCOs listed below.

Member Hotline:

99% Calls answered by the fourth ring:

- Texas Children's - 92.18%

80% Calls answered by a live person within 30 seconds

- Driscoll - 71.91%
- Scott & White - 70.35%
- Sendero - 70.81%

Behavioral Health Hotline (BH):

0% Busy signal rate for all calls

- Community Health Choice -1.01%

80% Calls answered by a live person within 30 seconds

- Community Health Choice - 71.39%
- Cook Children's - 79.10%
- First Care - 79.48%
- Seton - 64.29%

Provider Hotline:

99% Calls answered by the fourth ring

- Community Health Choice - 97.69%

A. COMPLAINTS AND APPEALS RECEIVED BY PLANS

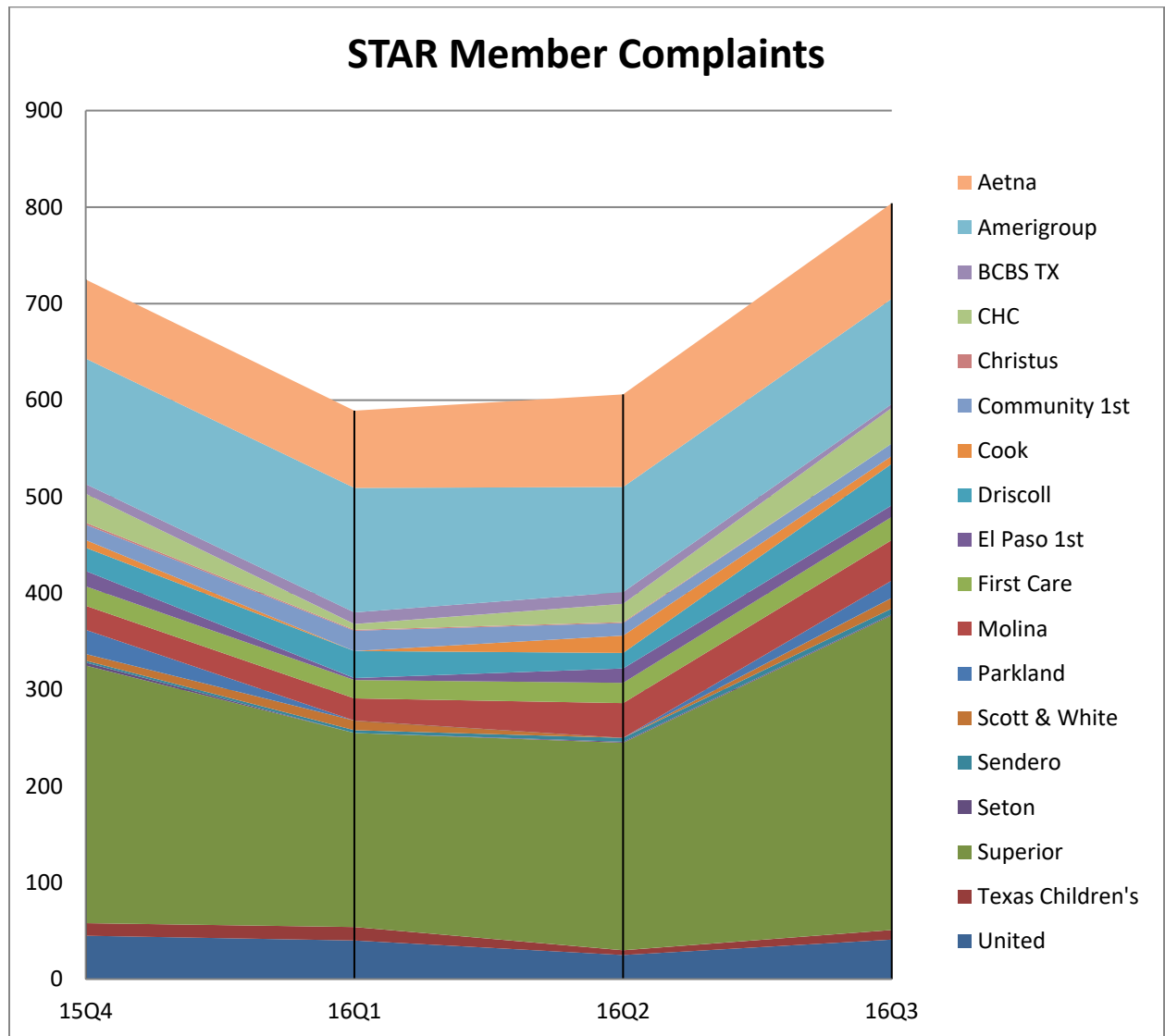
Attachment N shows the number of member complaints and appeals and provider complaints resolved by MCOs and DMOs.

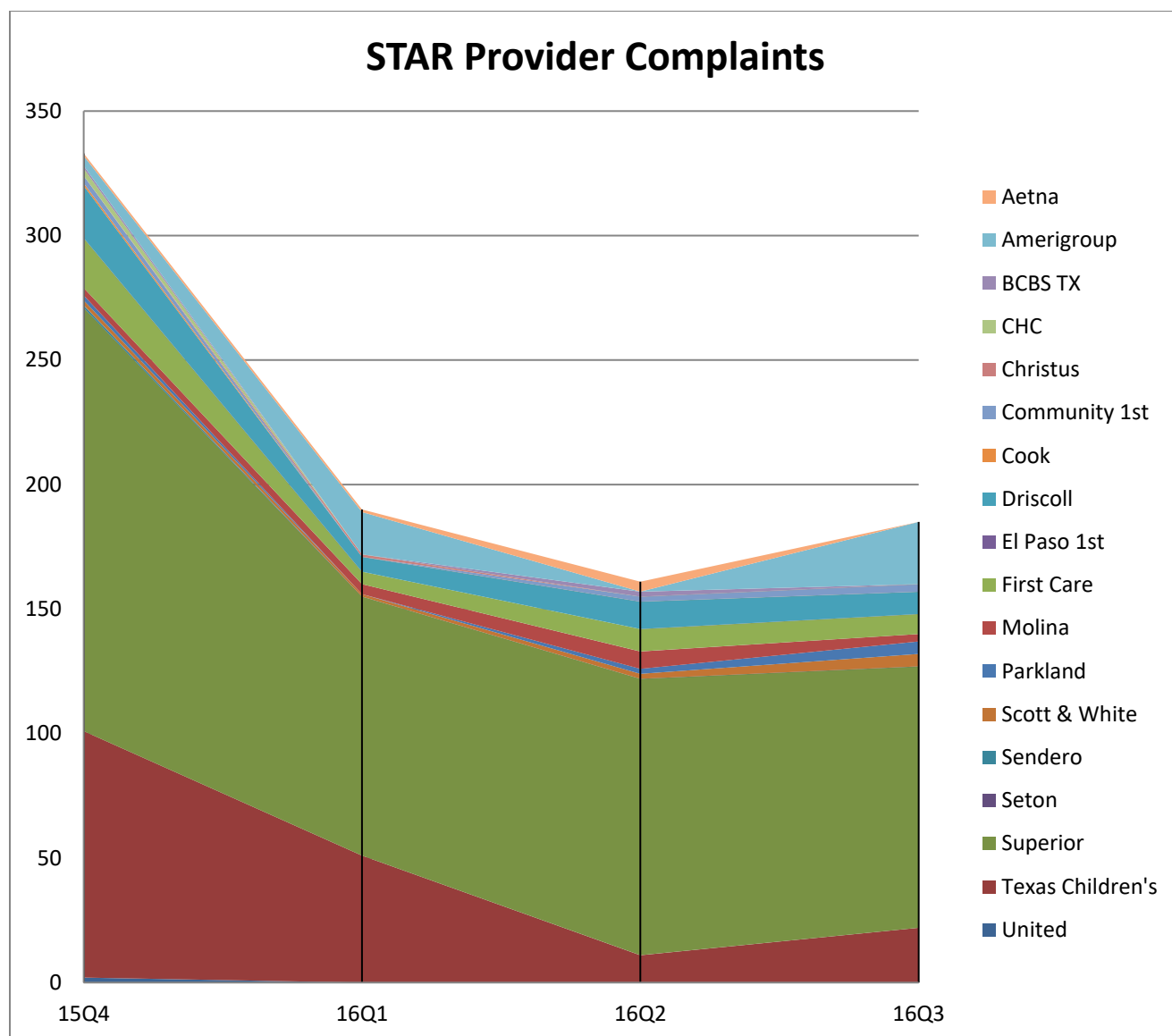
1. STAR and STAR+PLUS

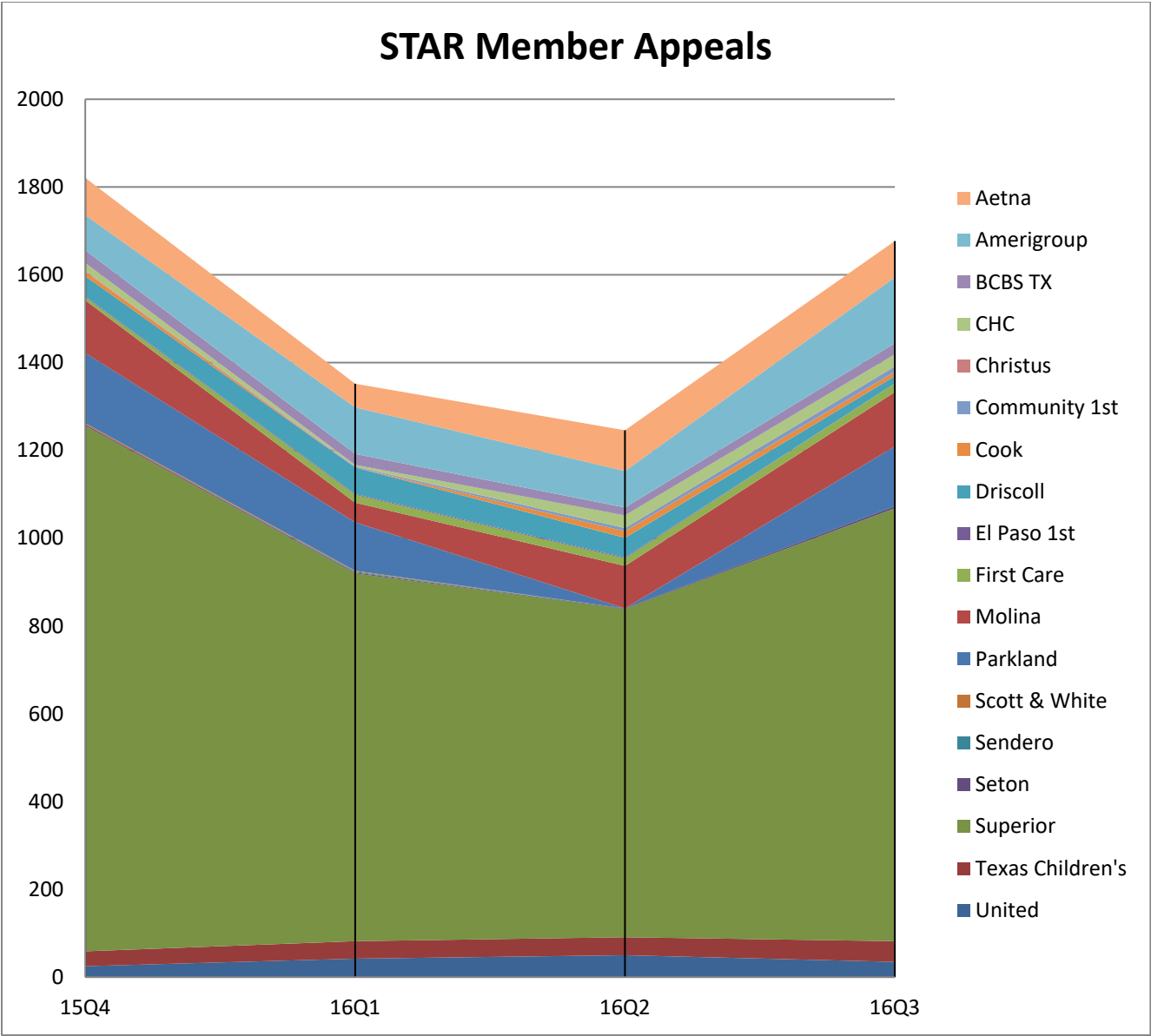
The total number of STAR complaints and appeals received by plans increased from 2,013 in 2016 SFQ2 to 2,666 in 2016 SFQ3, as shown in the following figures below. STAR plans collectively reported 804 member complaints, 1,677 member appeals and 185 provider complaints in SFQ3. The total number of STAR+PLUS complaints and appeals increased from 2,511 in 2016 SFQ2 to 3,335 in 2016 SFQ3. STAR+PLUS plans reported 1,145 member complaints, 1,557 member appeals and 633 provider complaints in SFQ3. The STAR+PLUS

MCOs received more member complaints and appeals per 1,000 members than the STAR MCOs due to the complicated medical needs of the STAR+PLUS population.

Complaints and Appeals Received by STAR MCOs (2015 SFQ4 – 2016SFQ3)

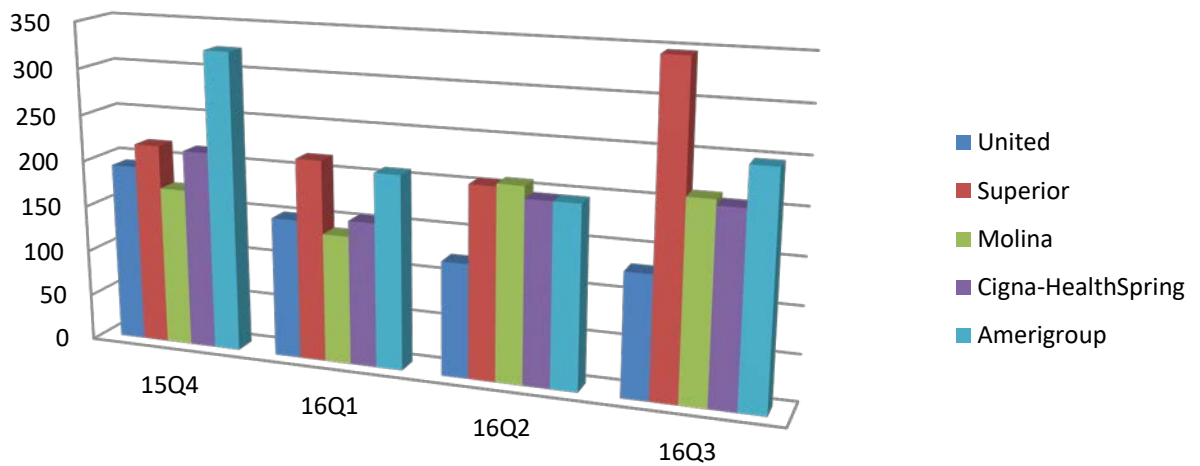




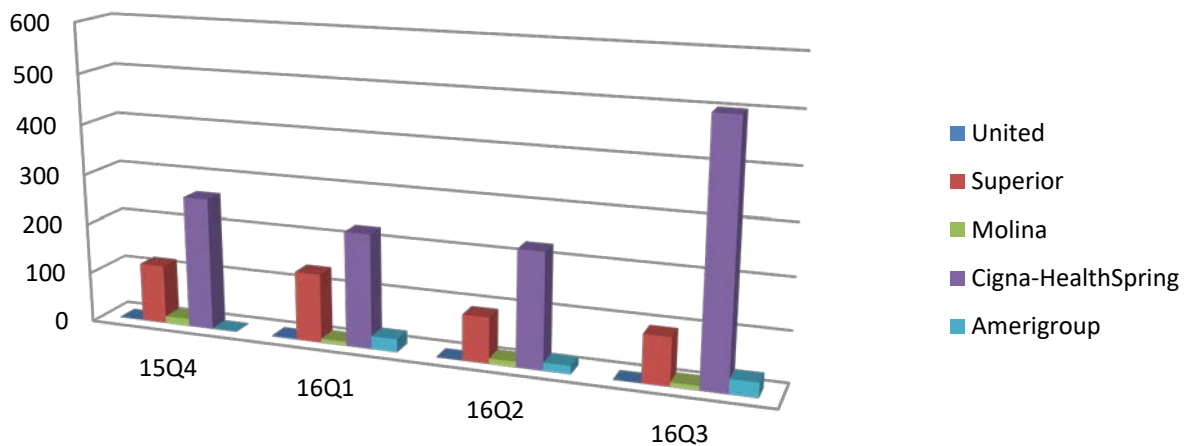


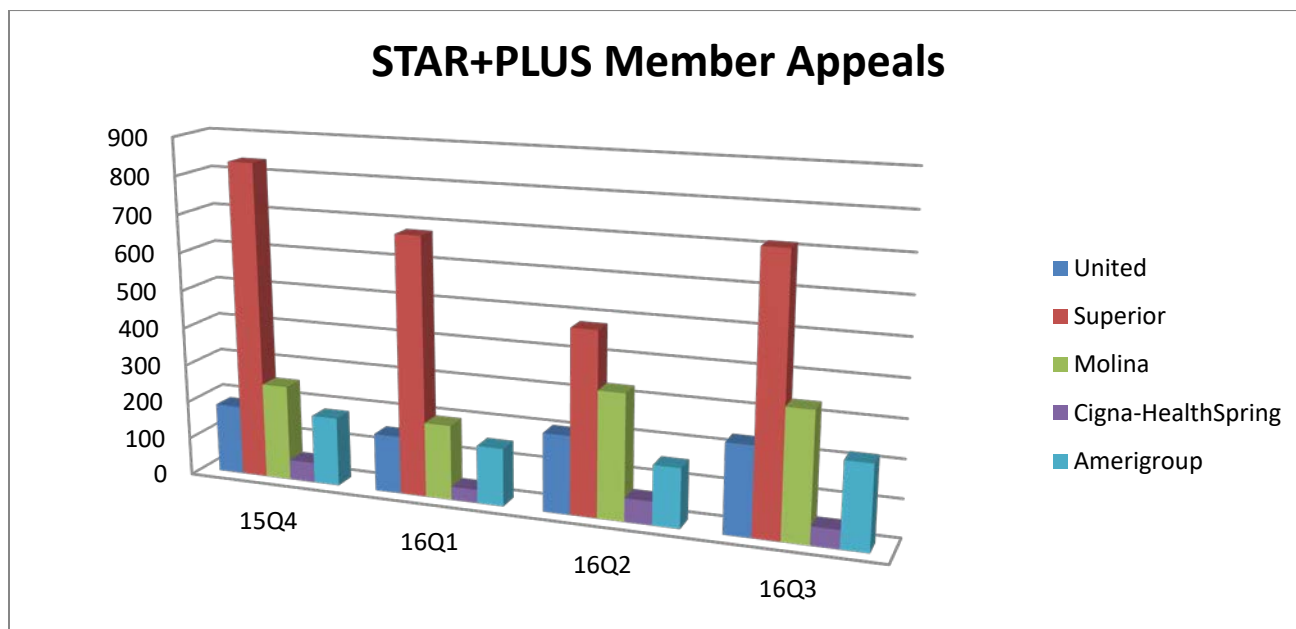
Complaints and Appeals Received by STAR+PLUS MCOs (2015 SFQ4 – 2016 SFQ3)

STAR+PLUS Member Complaints



STAR+PLUS Provider Complaints





The State's managed care contracts require plans to track and monitor the number of complaints and appeals resolved within 30-days of receipt and require that plans achieve 98% compliance with this standard in each SDA. The following MCOs failed to meet the 98% compliance standard for member complaints, provider complaints and member appeals. HHSC assessed liquidated damages for UHC Harris SDA for failing to meet the member complaints compliance standard. HHSC staff are in the process of developing appropriate remedies for the MCOs listed below that did not meet timely resolution standards for complaints and appeals.

Member Complaints

STAR+PLUS

- Superior: Dallas, Hidalgo and Lubbock SDAs
- United Health Care: Harris SDA

Provider Complaints

STAR

- Superior: Bexar SDA

STAR+PLUS

- Superior: Dallas SDA

Member Appeals

STAR

- Aetna: Bexar SDA
- BCBS TX: Travis SDA
- Superior: El Paso SDA

STAR+PLUS

Superior Bexar SDA

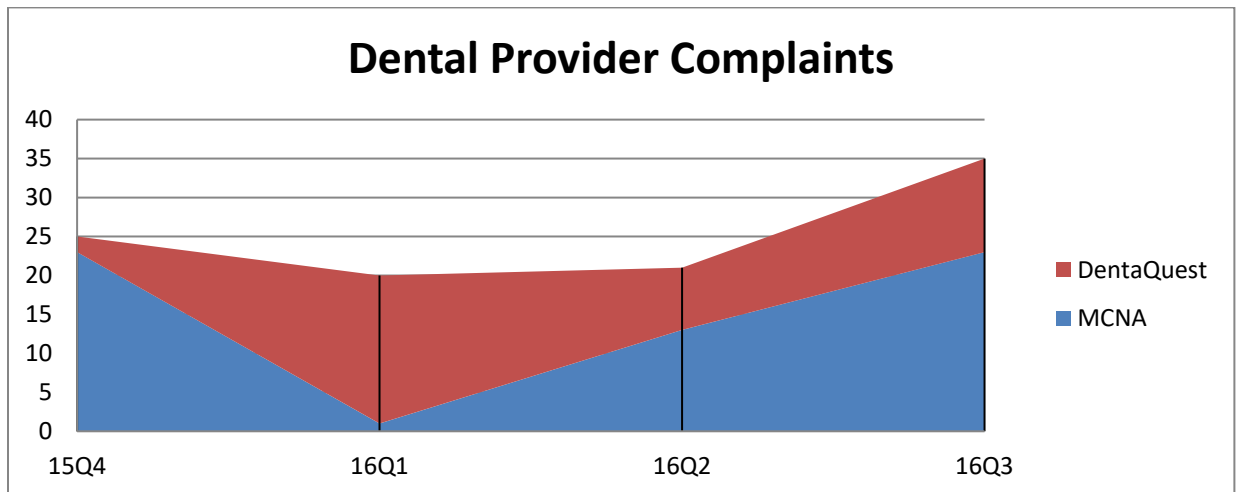
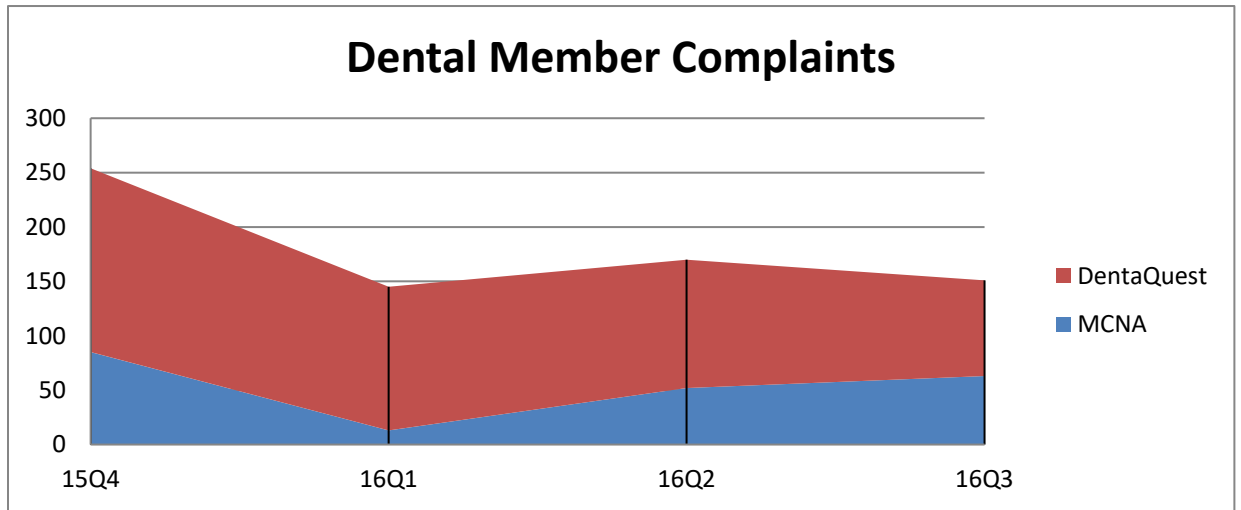
United Health Care: Harris, MRSA Central, MRSA Northeast, Nueces and Travis SDAs

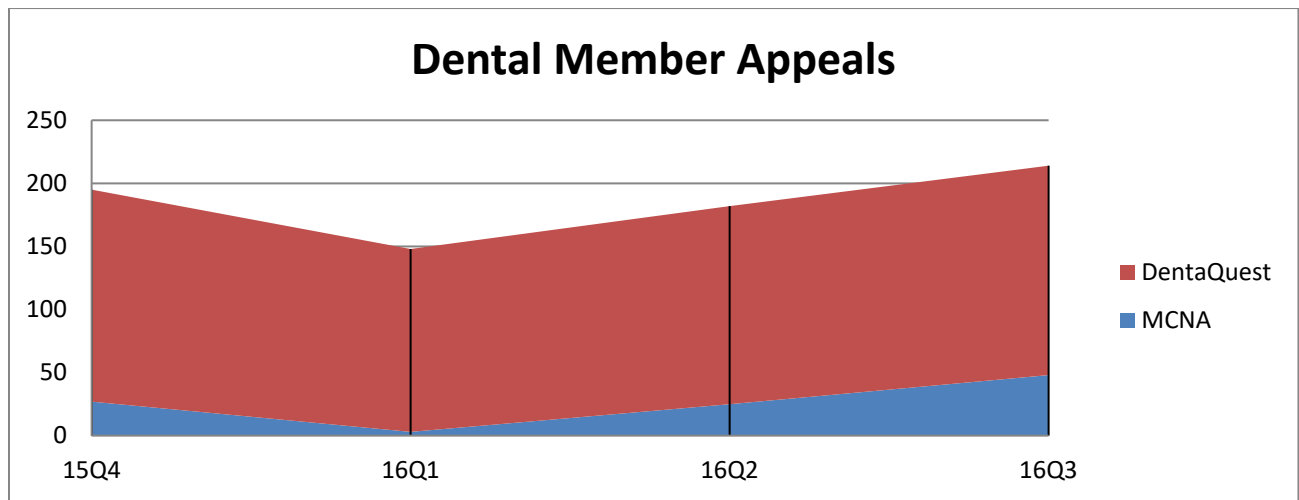
2. Dental Program

Between 2016 SFQ2 and 2016 SFQ3, dental member complaints decreased by -11.1% (from 170 in SFQ2 to 151 in SFQ3), member appeals increased by 17.5% (from 182 in SFQ2 to 214 in SFQ3) and provider complaints increased by 66.6% (from 21 in SFQ2 to 35 in SFQ3). The most common member complaint to the dental plans involved either dissatisfaction with the quality of care provided by a treating dental provider or access to or availability of services. Member appeals were primarily related to benefit denials or limitations and dental plans utilization review or management. General complaints by providers were regarding claims processing or plan administration and benefit denial or limitations related to plan administrations.

Complaints and appeals are reported in aggregate for each statewide dental plan. MCNA and DentaQuest met the performance standards for the timely resolution of complaints and appeals in 2016 SFQ3 with the exception of DentaQuest failing to meet timely resolution of member appeals.

Complaints and Appeals Received by DMOs (2015 SFQ4 – 2016SFQ3)





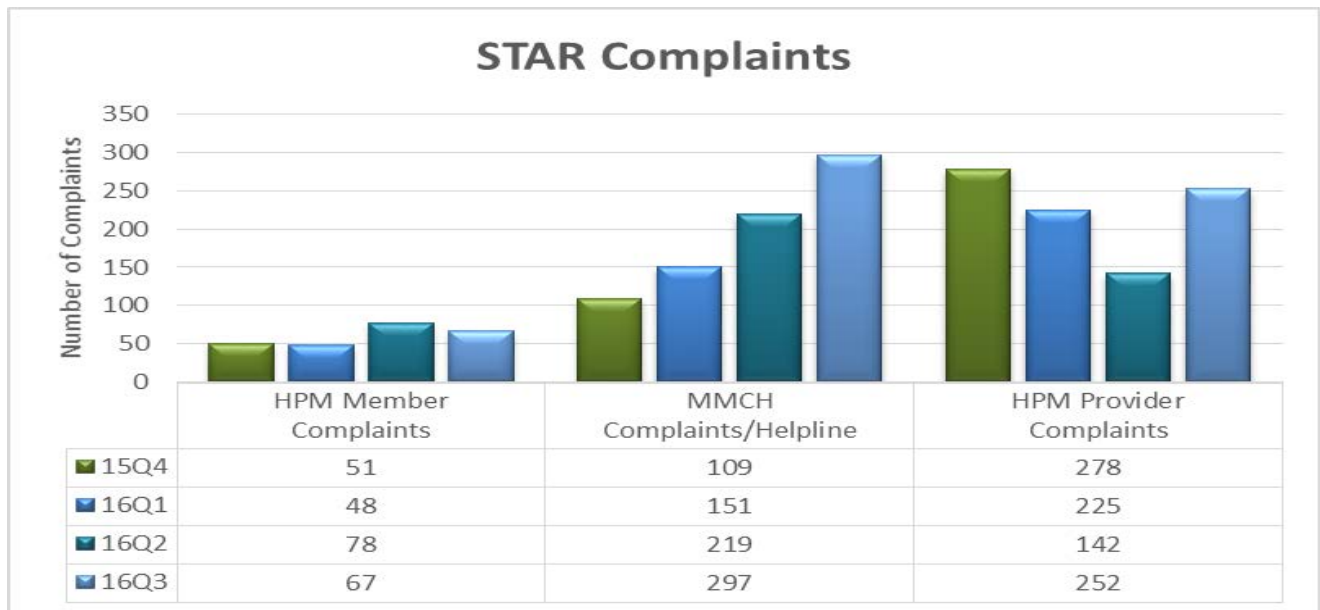
B. COMPLAINTS RECEIVED BY THE STATE

In addition to monitoring complaints received by plans, HHSC also tracks the number and types of complaints submitted to the State. Members and providers can submit complaints to the HHSC Health Plan Management (HPM) team. Members can also call in to submit complaints through the Office of the Ombudsman via the Medicaid Managed Care Helpline (MMCH). After investigating each complaint, staff determines whether or not it is substantiated. Substantiated complaints are those where there is a clear indication that agency policy was violated or agency expectations were not met (e.g., a member did not receive medically necessary benefits).

1. STAR

In the STAR program, the number of member complaints received by HPM decreased by 14.1% (from 78 to 67) and the number of member complaints received by MMCH increased by 35.6% (from 219 to 297) from 2016 SFQ2 to 2016 SFQ3. HPM received 12 contacts from legislative representatives on behalf of members. The most common member complaints received by HPM and MMCH were issues with prescription-related issues (eligibility, non-active, private authorization and private insurance), access to care, billing problems and denial of authorization of care. The number of provider complaints received by HPM increased by 77.5% (from 142 to 252) in 2016 SFQ3. The most common issue type of provider complaints received by HPM was denial of claim.

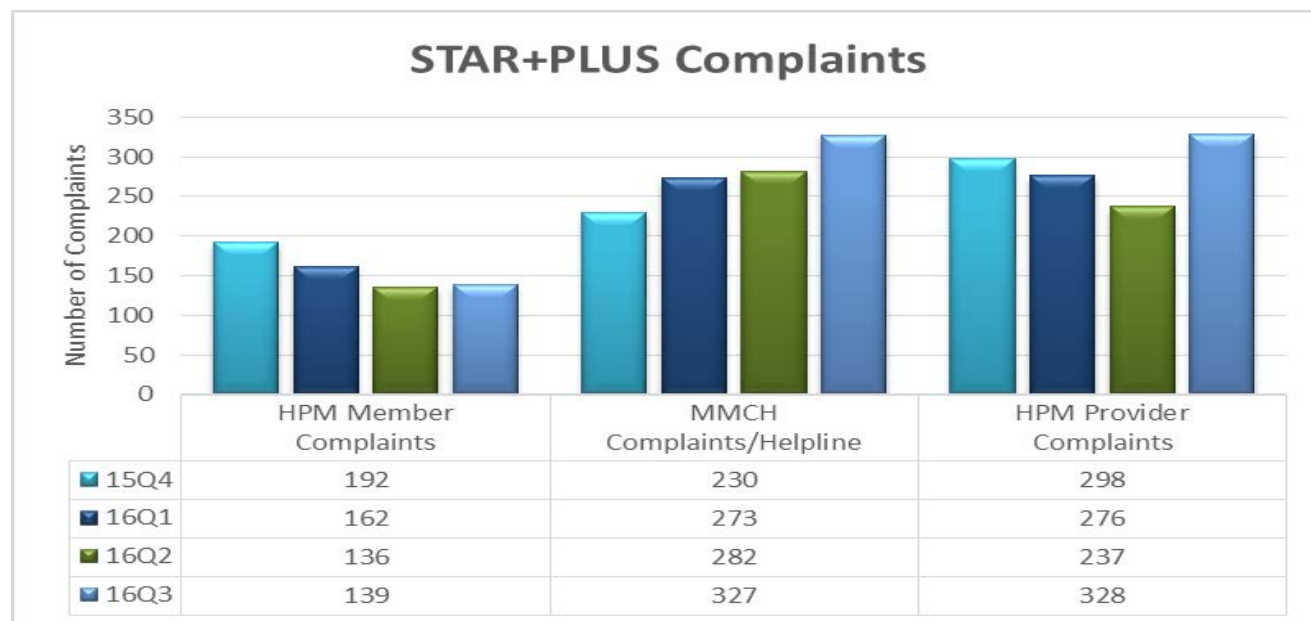
Complaints to the State Regarding STAR (2015 SFQ4 - 2016 SFQ3)



2. STAR+PLUS

Across the STAR+PLUS program, the number of member complaints received by MMCH increased by 16% (from 282 to 327) in 2016 SFQ2 to SFQ3. The member complaints received by HPM increased by 2.2% (from 136 to 139). HPM received 39 contacts from legislative representatives on behalf of members. The most common issues of member complaints received by MMCH and HPM were issues with benefits, utilization reviews, prior authorization, denial of claim and access to care. The number of provider complaints increased by 38.4% (from 237 to 328) in 2016 SFQ2 to SFQ3. The most common provider complaint issue received was related to denial or payment delays.

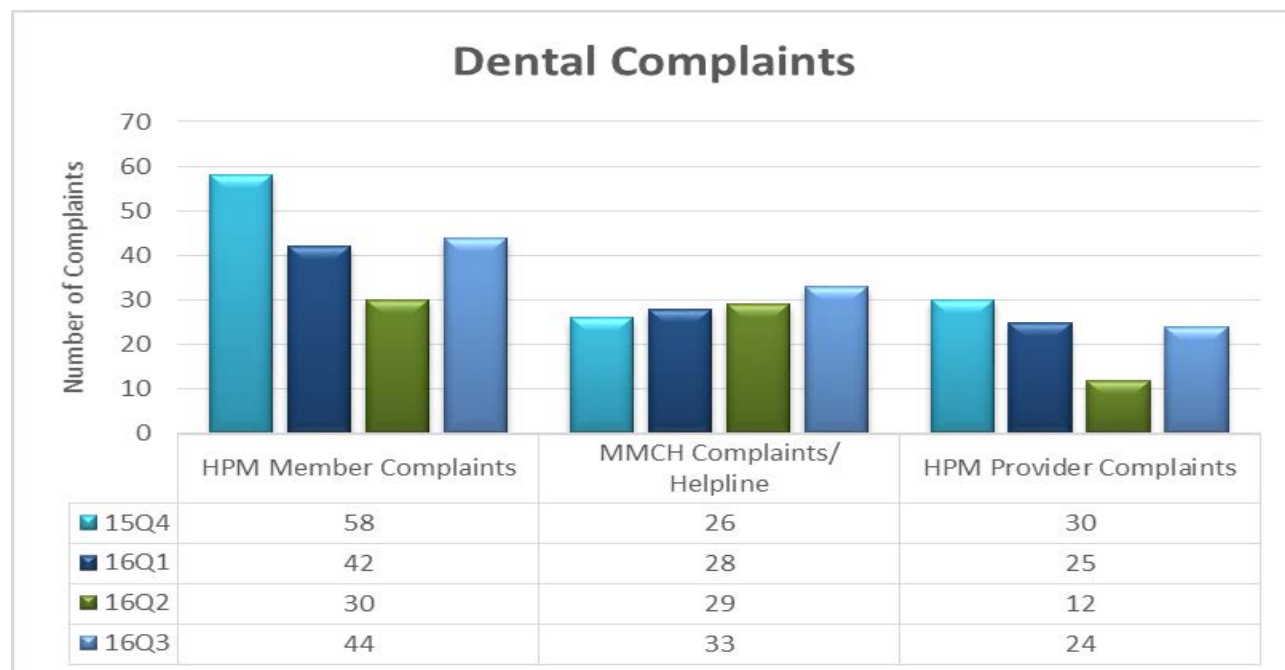
Complaints to the State Regarding STAR+PLUS (2015 SFQ4 - 2016 SFQ3)



3. Dental Program

Across the Dental Program, the number of member complaints received by MMCH increased 13.8% (from 29 to 33) in 2016 SFQ3. The number of member complaints received by HPM increased by 46.7% (from 30 to 44) in 2016 SFQ3. The most common member complaint issues received were regarding incorrect eligibility or enrollment information. Provider complaints increased by 100% (from 12 to 24) in 2016 SFQ2 to SFQ3. The most common provider complaint issue received was denied claims.

Complaints to the State Regarding the Dental Program (2015 SFQ4 - 2016 SFQ3)



X. QUALITY ASSURANCE/MONITORING ACTIVITY

This section covers quality assurance and monitoring activities that occurred in DY5 SFQ3.

A. DY5 QUARTER 3 UPDATE

This year, HHSC pulled together a workgroup of internal and external stakeholders to assist in selecting 2017 Performance Improvement Project (PIP) topics with Texas's External Quality Review Organization (EQRO) participating as a resource. Five MCOs were selected for participation based on their performance on quality improvement deliverables, their network size, programs, and service area coverage, variety of disease management programs, and prior history of robust PIP interventions at the member, provider, and systems level. The purpose of the workgroup was to:

- Obtain Managed Care Organization (MCO) and HHSC input;
- Ensure the selected topics are feasible and address issues pertinent to the State and the MCOs;
- Better coordinate initiatives;
- Enhance engagement/investment in the PIPs; and
- Ensure topics are conducive to collaboration (in particular, collaboration with DSRIP projects and providers)

Three 90 minute meetings were held in March and April 2016. Workgroup members were asked to submit two topic suggestions prior to the first meeting. Topic suggestions were aggregated, analyzed, discussed, and narrowed down. The workgroup members had positive feedback about the process and the MCOs liked having different areas of HHSC participating.

HHSC used the workgroup's suggestions and feedback to create a list of options the plans could choose from based on the areas of needed improvement for each plan. The 2017 PIP topic options (depending on the program and individual plan performance) were breast and cervical cancer screening, diabetes control, behavioral health, asthma, and well-child visits in the first 15 months of life. For the STAR Kids, STAR Health, and dental programs, health plans were allowed to propose a topic for approval by HHSC.

The National Association of States United for Aging and Disabilities (NASUAD), in collaboration with the Human Services Research Institute (HSRI) and the National Association of State Directors of Developmental Disabilities Services (NASDDDS), has developed the NCI-AD survey. The intent of this survey is to obtain feedback from older adults and individuals with physical disabilities accessing publicly funded long-term services and supports on their experience receiving those services. Texas has elected to participate in this project, which will include members of the STAR+PLUS program. During SFQ3, EQRO subcontractors completed surveying members in the sampled populations. HHSC staff provided required supplemental information, and HSRI began their analysis. A report on the survey results is expected in late 2016.

Lastly, the health plans submitted their Quality Assessment and Performance Improvement (QAPI) program summary for calendar year 2015 to Texas's EQRO.

ENCLOSURES/ATTACHMENTS

Attachment A – Managed Care Plans By Service Area. The attachment includes a table of the health and dental plans by Service Delivery Area.

Attachment B -- Enrollment Summary (15Q4-16Q3). The attachment includes annual and quarterly Dental, STAR and STAR+PLUS enrollment summaries.

Attachments C1-C3 – Network Summary and Methodology. The attachments summarize STAR and STAR+PLUS network enrollment by MCOs, SDAs, and provider types. It also includes a description of the methodology used for provider counts and terminations.

Attachments D – Out-of-Network Utilization. The attachment summarizes Dental, STAR and STAR+PLUS out-of-network utilization.

Attachment E – HHSC GeoMapping Summary PCP and ENT (2016SFQ3). The attachment shows the State’s GeoMapping analysis for STAR and STAR+PLUS plans.

Attachment G – HHSC Pharmacy GeoMapping Summary. The attachment includes the State’s pharmacy GeoMapping results.

Attachment H – HHSC Dental GeoMapping Summary. The attachment includes the results of the State’s GeoMapping analysis for dental plans.

Attachment I1-I2 –MCO GeoMapping Summary. The attachment includes the STAR and STAR+PLUS plans’ self-reported GeoMapping results for PCP and specialists.

Attachment J – MCO Pharmacy GeoMapping Summary. The attachment includes the STAR and STAR+PLUS plans’ self-reported GeoMapping results for pharmacy.

Attachment K – DMO Children’s Medicaid Dental Services GeoMapping Summary. The attachment includes the dental plans’ self-reported GeoMapping results.

Attachment L – Enrollment Broker Report. The attachment provides a summary of outreach and other initiatives to ensure access to care.

Attachments M1-M4 – Hotline Summaries. The attachments provide data regarding phone calls and performance standards of MCO and DMO Member and Provider Hotlines.

Attachments N – MCO Complaints. The attachment includes Dental, STAR and STAR+PLUS complaints and appeals received by plans.

Attachment O – Complaints to HHSC. The attachment includes information concerning Dental, STAR and STAR+PLUS complaints received by the State.

STATE CONTACTS

For questions regarding the waiver, please contact:

Rachel Clarkson,
Program Performance Specialist, Policy Development and Support
Texas Health and Human Service Commission
4900 N Lamar, MC-H600
Austin, TX 79751
(512)462-6232
Fax (512) 730-7472
Rachel.clarkson@hhsc.state.tx.us

Kathi Montalbano
Manager, Policy Development and Support
Texas Health and Human Service Commission
4900 N Lamar MC-H600
Austin, Texas 78751
(512) 730-7409
Fax (512) 730-7472
Kathi.montalbano@hhsc.state.tx.us

ACRONYM LIST

AAA	Area agency on aging
ADRC	Aging and Disability Resource Centers
APHA	American Public Health Association
BIP	Balancing Incentive Program
CAHPS	Consumer Assessment of Health Providers and Systems
CAP	Corrective action plan
CFC	Community First Choice
CMS	Centers for Medicare & Medicaid Services
DADS	Department of Aging and Disability Services
DMO	Dental managed care organization
DSH	Disproportionate Share Hospital
DSHS	Department of State Health Services
DSRIP	Delivery System Reform Incentive Payment
DY	Demonstration year
EB	Enrollment broker
EG	Evaluation goal
ENT	Otolaryngologist
EPSDT	Early and Periodic Screening, Diagnostic, and Treatment
EQRO	External Quality Review Organization
ER	Emergency room
ERS	Emergency response services
FQHC	Federally Qualified Health Center
HEDIS	Healthcare Effectiveness Data and Information Set
HHSC	Health and Human Services Commission
HPM	Health Plan Management
HSRI	Human Services Research Institute
ICF-IID	Intermediate care facility for individuals with intellectual disabilities or a related condition
ICHP	Institute for Child Health Policy
ICSS	Independent Consumer Supports System
IGT	Intergovernmental transfer
IMD	Institution for mental disease
LD	Liquidated damages
LTCO	Long-term care ombudsman
MACPAC	Medicaid and CHIP payment and Access Commission
MAGI	Modified adjusted gross income
MCO	Managed care organization

MMCH	Medicaid Managed Care Helpline
MRSA	Medicaid Rural Service Areas
NASDDDS	National Association of State Directors of Developmental Disabilities Services
NASHP	National Academy for State Health Policy
NASUAD	National Association of States United for Aging and Disabilities
NCI-AD	National Core Indicators-Aging and Disabilities
OON	Out-of-network
P4Q	Pay-For-Quality
PBM	Pharmacy Benefits Manager
PIP	Performance improvement project
PCP	Primary care provider
PFM	Program Funding and Mechanics
RHP	Regional Healthcare Partnerships
SDA	Service delivery area
SDS	HHSC Strategic Decision Support
SFQ	State Fiscal Quarterly
SMMC	State Medicaid Managed Care Advisory Committee
SPMI	Severe and persistent mental illness
STCs	Special Terms and Conditions
TCH	Texas Children's Hospital
TCHP	Texas Children's Health Plan
THSteps	Texas Health Steps
UC	Uncompensated care

Attachment A
Managed Care Plans by Service Area

Service Area	STAR	STAR+PLUS
Bexar	Aetna Better Health Amerigroup Community First Health Plans Superior HealthPlan	Amerigroup Molina Healthcare of Texas Superior HealthPlan
Dallas	Amerigroup Molina Healthcare of Texas Parkland Community Health Plan	Molina Healthcare of Texas Superior HealthPlan
El Paso	El Paso First Health Plan Molina Healthcare of Texas Superior HealthPlan	Amerigroup Molina Healthcare of Texas
Harris	Amerigroup Community Health Choice Molina Healthcare of Texas Texas Children's Health Plan UnitedHealthcare Community Plan	Amerigroup Molina Healthcare of Texas UnitedHealthcare Community Plan
Hidalgo	Driscoll Children's Health Plan Molina Healthcare of Texas Superior HealthPlan UnitedHealthcare Community Plan	HealthSpring Life & Health Ins. Co. Molina Healthcare of Texas Superior HealthPlan
Jefferson	Amerigroup Community Health Choice Molina Healthcare of Texas Texas Children's Health Plan UnitedHealthcare Community Plan	Amerigroup Molina Healthcare of Texas UnitedHealthcare Community Plan
Lubbock	Amerigroup FirstCare HealthPlans Superior HealthPlan	Amerigroup Superior HealthPlan
MRSA Central	Amerigroup Right Care from Scott & White Superior HealthPlan	Superior HealthPlan UnitedHealthcare Community Plan
MRSA Northeast	Amerigroup Superior HealthPlan	Cigna-HealthSpring UnitedHealthcare Community Plan
MRSA West	Amerigroup FirstCare HealthPlans Superior HealthPlan	Amerigroup Superior HealthPlan
Nueces	CHRISTUS Health Plan Driscoll Children's Health Plan Superior HealthPlan	Superior HealthPlan UnitedHealthcare Community Plan
Tarrant	Aetna Better Health Amerigroup Cook Children's Health Plan	Amerigroup Cigna-HealthSpring
Travis	Blue Cross and Blue Shield of Texas Sendero Health Plans Seton Health Plan Superior HealthPlan	Amerigroup UnitedHealthcare Community Plan
Service Area	Children's Medicaid Dental Services (Dental Program)	

Attachment A
Managed Care Plans by Service Area

Statewide	Denta Quest USA Insurance Company, Inc. MCNA Insurance Company
-----------	---

ATTACHMENT B
Enrollment Summary (15Q4 - 16Q3)

Program	Service Area	MCO	15Q4	16Q1	16Q2	16Q3
Dental	Statewide	DentaQuest	1,578,196	1,606,288	1,600,994	1,596,262
		MCNA	1,268,278	1,300,122	1,280,120	1,261,288
	All SDAs	All MCOs	2,846,474	2,906,410	2,881,114	2,857,550
STAR	Bexar	Aetna	23,965	24,195	22,673	23,073
		Amerigroup	9,841	10,047	9,522	9,694
		Community 1st	106,007	108,182	107,074	105,866
		Superior	102,754	104,896	103,834	102,871
	Dallas	Amerigroup	200,685	206,339	200,736	200,518
		Molina	18,843	19,134	19,060	18,999
		Parkland	174,436	176,525	173,026	165,980
	El Paso	El Paso 1st	63,869	65,129	65,470	65,970
		Molina	3,406	3,465	3,366	3,412
		Superior	55,234	55,748	53,193	50,303
	Harris	Amerigroup	108,146	110,879	107,458	105,697
		CHC	206,530	210,791	209,911	210,069
		Molina	12,135	12,322	12,288	12,373
		Texas Children's	296,961	301,276	301,277	295,522
	Hidalgo	United	42,677	43,923	43,846	44,898
		Driscoll	75,143	76,923	78,428	79,517
		Molina	59,679	60,234	50,507	58,639
		Superior	153,856	156,295	154,422	151,839
	Jefferson	United	60,813	61,080	59,816	58,941
		Amerigroup	6,581	6,703	6,405	6,474
		CHC	21,473	21,859	21,713	21,367
		Molina	3,952	4,044	4,093	4,083
	Lubbock	Texas Children's	27,447	27,880	28,271	27,998
		United	12,845	13,518	13,341	13,231
		Amerigroup	8,218	8,129	7,837	7,893
		FirstCare	39,177	39,475	39,116	39,694
	MRSA Central	Superior	25,742	26,493	26,348	26,227
		Amerigroup	21,146	21,693	21,464	21,190
		Scott & White	40,787	39,475	42,101	42,374
		Superior	62,113	60,965	63,607	68,524
	MRSA Northeast	Amerigroup	55,732	56,951	56,135	56,233
		Superior	104,063	102,080	107,027	105,770
	MRSA West	Amerigroup	27,124	27,966	27,396	28,473
		FirstCare	51,784	52,767	52,701	53,181
		Superior	64,876	64,849	68,273	68,759
	Nueces	Christus	6,222	6,330	6,040	5,719
		Driscoll	57,137	58,433	58,852	59,076
		Superior	18,006	18,591	18,162	18,067
	Tarrant	Aetna	47,364	47,889	47,361	46,687
		Amerigroup	115,443	117,702	115,373	114,463
		Cook Children's	95,647	97,897	97,649	96,733
	Travis	BCBS	22,776	23,177	24,053	24,026
		Sendero	11,128	12,063	12,075	12,350
		Seton	16,815	16,815	16,956	17,526
		Superior	91,270	95,522	90,196	87,361
STAR	All SDAs	All MCOs	2,829,848	2,876,649	2,848,452	2,837,660
STAR+PLUS	Bexar	Amerigroup	8,796	9,629	9,821	10,054
		Molina	7,447	7,910	9,821	8,021
		Superior	27,887	28,844	28,808	29,149
	Dallas	Molina	34,598	34,582	35,056	35,639
		Superior	25,827	25,997	25,894	26,140
	El Paso	Amerigroup	10,297	11,055	11,141	11,519
		Molina	8,505	8,955	9,007	9,178
		Amerigroup	39,741	40,639	41,100	41,959

ATTACHMENT B
Enrollment Summary (15Q4 - 16Q3)

Program	Service Area	MCO	15Q4	16Q1	16Q2	16Q3
	Harris	Molina	14,260	13,678	13,640	13,779
		United	45,867	46,577	47,597	48,609
	Hidalgo	Cigna-HealthSpring	17,254	17,798	17,923	18,081
		Molina	15,577	15,653	15,591	15,830
		Superior	33,529	33,944	33,657	33,866
	Jefferson	Amerigroup	7,997	7,880	7,775	7,638
		Molina	7,512	7,459	7,423	7,261
		United	4,962	5,170	5,409	5,436
	Lubbock	Amerigroup	6,605	6,634	6,642	6,588
		Superior	7,268	7,291	7,301	7,144
	MRSA Central	Superior	15,450	15,637	15,759	15,557
		United	14,218	14,164	14,255	14,036
	MRSA Northeast	Cigna-HealthSpring	22,920	22,759	22,945	22,660
		United	23,614	23,766	23,826	23,590
	MRSA West	Amerigroup	18,023	17,900	17,780	17,523
		Superior	20,616	20,669	20,809	20,626
	Nueces	Superior	11,811	11,732	11,692	11,575
		United	10,493	10,415	10,472	10,397
	Tarrant	Amerigroup	28,959	28,656	29,180	29,844
		Cigna-HealthSpring	10,135	10,033	10,048	9,915
	Travis	Amerigroup	13,120	13,042	12,909	12,741
		United	12,879	12,992	13,195	13,157
STAR+PLUS Total	All SDAs	All MCOs	526,167	531,460	536,476	537,512

PROVIDER COUNT METHODOLOGY

Data Source

HHSC relies on the provider network data supplied by the MCOs.

Primary Care Provider, Specialist, and Dental Provider Types

Primary care provider (PCP) and specialist counts are based on the provider network files submitted by MCOs. The data is validated using the Medicaid Master Provider File. Unique provider counts are generated using the National Provider Identifiers (NPIs). The NPI is the standard unique identifier for health-care providers, and is required to enroll as a Texas Medicaid provider. The provider count data represents a snapshot in time and shows the number of unique providers for the last month of the quarter.

HHSC reporting requirements for the MCOs restricts PCP validity to certain provider specialty codes. The network counts are based on all PCPs included in the MCO provider files, which includes traditional and non-traditional provider types listed in Appendix A, as well as other provider types that may have agreed to serve as a PCP for a particular member with special needs.

The specialist count includes all specialty provider types listed in Appendix B. Since a provider may be represented in both the PCP count and Specialist count, the combined total includes duplications.

Dental provider counts are broken down by main dentists and dental specialists. For DMOs, the PCP column shows the number of main dentists which includes general dentists and pedodontists. The specialist column includes endodontists, periodontists, prosthodontists, oral surgeons, orthodontists, and in limited cases dental anesthesiologists.

Pharmacy Provider Types

Pharmacy counts include the following pharmacy providers: pharmacy, public health services pharmacy, specialty pharmacy, public health services and specialty pharmacy, pharmacy – not specified.

PROVIDER TERMINATIONS

Data Source

As in prior quarters, in 16SFQ1 an annually, terminations are based on self-reported data from the MCOs.

ATTACHMENT C1
Provider Network Count Methodology 16SFQ3

APPENDIX A: PRIMARY CARE PROVIDER TYPES

- | | | |
|-------------------------------------|--------------------------------|---|
| • Cardiovascular Disease* | • Internal Medicine | • Peripheral Vascular Disease* |
| • Certified Nurse Specialist | • Multispecialty Clinic | • Physician (D.O., M.D.) |
| • E.E.N.T. (D.O.)* | • Neurology (M.D.)* | • Physician Group (D.O., M.D.) |
| • Family Practice/General Practice | • Neurosurgery* | • Pulmonary Disease* |
| • Federally Qualified Health Center | • Nuclear Medicine* | • Radiation Therapy* |
| • Gastroenterology* | • Nurse Midwife | • Rural Health Clinic (Independent, Provider) |
| • Geriatrics | • Nurse Practitioner | • Thoracic Surgery* |
| • Gynecology | • OB/GYN (D.O., M.D.) | • Urology* |
| | • Orthopedic Surgery* | |
| | • Otorhinolaryngology (E.N.T)* | |
| | • Pediatrics | |

Note: Provider types with an asterisk (*) are valid PCPs for members with special needs.

ATTACHMENT C1
Provider Network Count Methodology 16SFQ3

APPENDIX B: SPECIALIST TYPES

- Ambulance Service
- Ambulatory Surgical Services
- Audiologist
- Birthing Center
- Case Management - Mental Health ‘MH’/Mental Health Rehab “MHR”
- Case Management - Mental Retardation ‘MR’
- CCP Provider
- Certified Nurse Specialist
- Certified Registered Nurse Anesthetist (CRNA)
- Children’s Hospital
- Chiropractic
- CIDC Reserved for Future Use
- Consumer Directed Services (CDS)
- Dentist/Orthodontists (D.M.D., D.D.S.)
- E.E.N.T. (D.O.)
- EPSDT - Texas Health Steps
- EPSDT - Texas Health Steps Health DPT Mobile Units & Regional
- Family Planning Agency (Public Health)
- Freestanding Psychiatric Hospital
- Freestanding Rehabilitation Facility
- Freestanding Renal Dialysis Facility
- Gastroenterology
- Genetics
- Geriatrics
- Hand Surgery
- Home Health Agency
- Home Health DME
- Hospice
- Hospital - Long Term or Specialized Care
- Hospital - Nonprofit/Acute/101-250 Beds
- Hospital - Nonprofit/Acute/1-50 Beds
- Hospital - Nonprofit/Acute/251 Plus Beds
- Hospital - Nonprofit/Acute/51-100 Beds
- Hospital - Other/Out-of-State
- Hospital - Profit/Acute/101 Plus Beds
- Hospital - Profit/Acute/1-50 Beds
- Hospital - Profit/Acute/51-100 Beds
- Hospital - Teaching Affiliate
- In- Home Hyperalimentation Supplies
- Independent Laboratory
- Individual Certified Orthodontist
- Individual Certified Prosthetist
- Individual Physical Therapist
- Internal Medicine
- Licensed Professional Counselor (CCP)
- (LMSW-ACP) LIC MSTR Social WRKR/ADV Clinical Pract
- Manipulative Therapy(D.O.)
- Maternity Service Clinic
- Medical Supply Company with Certified Prosthetist
- Multispecialty Clinic
- Nephrology
- Neurology (M.D.)
- Neurosurgery
- Nuclear Medicine
- Nurse Practitioner
- Nurse/Nurse Midwife
- Nursing Home
- OB/GYN (D.O.)
- OB/GYN (M.D.)
- Ophthalmology
- Optometrist
- Orthopedic Surgery
- Pathology (D.O.)
- Pathology (M.D.)
- Pediatrics
- Peripheral Vascular Disease
- Personal Care Services (PCS)
- Physical Medicine and Rehabilitation
- Plastic Surgery
- Podiatry
- Portable X-Ray Supplier

ATTACHMENT C1
Provider Network Count Methodology 16SFQ3

- Proctology
- Psychiatric Hospital
- Psychiatric Hospital
Medicare Crossovers
Only
- Psychiatry
- Psychiatry (D.O.)
- Psychologist
- Pulmonary Disease
- Radiation Therapy
- Radiation Treatment
Center
- Radiology (D.O.)
- Radiology (M.D.)
- Registered Nurse
(CCP)
- Rural Health Clinic
(Independent)
- Rural Health Clinic
(Provider)
- Seating Clinic
- Social Worker (CCP)
- Speech Therapy (CCP)
- State Hospital
Physician Groups
- Tape-to-Tape
- Texas Commission for
the Blind (TCB)
- Texas Health Steps
Case Management
- Thoracic Surgery
- Tuberculosis (TB)
Clinics
- Urology

Attachment C
Provider Network Counts (2016 SFQ3)

Program	Service Delivery Area	Managed Care Organization	PCP	Specialist	Dentist	Pharmacy	Unique NPI Total
Dental	Statewide	DentaQuest	.	974	5,133	0	5,256
		MCNA Dental	.	832	4,073	0	4,622
		Unique NPI Program Count	.	1,462	5,359	0	5,574

Attachment C
Provider Network Counts (2016 SFQ3)

Program	Service Delivery Area	Managed Care Organization	PCP	Specialist	Dentist	Pharmacy	Unique NPI Total
STAR	Bexar	Aetna	741	3,976	5	4,446	9,085
		Amerigroup Texas, Inc	1,172	3,405	1	115	3,998
		Community First Health Plan	618	3,505	1	343	4,414
		Superior Health Plan	992	5,072	595	119	6,648
		Unique NPI SDA Count	2,036	7,903	596	4,460	13,896
	Dallas	Amerigroup Texas, Inc	2,186	5,555	9	357	6,857
		Molina Healthcare of Texas	605	9,197	796	966	11,450
		Parkland Community Health Plan	925	2,902	9	719	4,441
		Unique NPI SDA Count	2,754	13,362	810	1,167	16,452
	El Paso	El Paso First	366	1,111	4	103	1,541
		Molina Healthcare of Texas	212	5,212	490	73	5,946
		Superior Health Plan	361	1,700	223	30	2,245
		Unique NPI SDA Count	517	6,274	681	104	7,316
	Harris	Amerigroup Texas, Inc	2,701	5,416	11	432	7,212
		Community Health Choice	2,316	9,292	24	1,291	11,862
		Molina Healthcare of Texas	1,122	11,102	667	1,060	13,581
		Texas Children's Health Plan	939	4,580	13	1,185	6,704
		United Health Care	2,045	6,547	172	409	8,980
		Unique NPI SDA Count	4,899	18,472	805	1,374	22,033
	Hidalgo	Driscoll Children's Health Plan	872	3,490	10	265	3,849
		Molina Healthcare of Texas	596	6,255	491	228	7,380
		Superior Health Plan	904	2,405	448	95	3,717
		United Health Care	1,012	1,694	65	76	2,673
		Unique NPI SDA Count	1,726	9,275	909	293	10,870
	Jefferson	Amerigroup Texas, Inc	2,417	5,358	11	407	6,924
		Community Health Choice	2,274	9,060	24	132	10,460
		Molina Healthcare of Texas	1,131	10,515	669	931	12,894
		Texas Children's Health Plan	161	4,580	13	125	4,873
		United Health Care	900	6,933	176	142	8,084
		Unique NPI SDA Count	4,220	18,502	809	976	21,402
	Lubbock	Amerigroup Texas, Inc	621	1,365	0	36	1,684
		FirstCare	735	1,025	2	0	1,749
		Superior Health Plan	680	1,499	189	46	2,346
		Unique NPI SDA Count	1,062	2,883	191	50	3,650
	MRSA Central	Amerigroup Texas, Inc	3,989	4,232	3	224	7,556
		Scott & White RightCare	1,053	4,245	7	223	5,487
		Superior Health Plan	2,325	6,088	249	256	8,747
		Unique NPI SDA Count	5,265	10,662	256	446	15,189
	MRSA Northeast	Amerigroup Texas, Inc	3,151	2,634	5	219	5,320
		Superior Health Plan	1,182	3,578	289	264	5,222
		Unique NPI SDA Count	3,482	5,108	290	328	8,263
	MRSA West	Amerigroup Texas, Inc	3,137	3,439	3	143	5,794
		FirstCare	1,467	1,024	2	0	2,463
		Superior Health Plan	1,438	3,056	274	137	4,753
		Unique NPI SDA Count	3,962	5,852	278	182	8,966
	Nueces	Christus	230	3,052	13	2	3,121
		Driscoll Children's Health Plan	869	3,486	10	130	3,725
		Superior Health Plan	877	2,387	177	85	3,418
		Unique NPI SDA Count	1,332	6,900	197	188	7,611
	Tarrant	Aetna	945	3,214	8	4,446	8,494
		Amerigroup Texas, Inc	2,122	5,539	9	345	6,770
		Cook Children's Health Plan	726	2,303	8	2	3,028
		Unique NPI SDA Count	2,607	8,336	12	4,461	13,907
	Travis	BCBS	796	4,313	4	4,609	9,682
		Sendero	516	2,488	12	280	2,832
		Seton Health Plan	1,269	2,542	18	294	3,512
		Superior Health Plan	1,456	4,962	316	120	6,727
		Unique NPI SDA Count	2,754	8,524	336	4,617	14,996

Attachment C
Provider Network Counts (2016 SFQ3)

Program	Service Delivery Area	Managed Care Organization	PCP	Specialist	Dentist	Pharmacy	Unique NPI Total
	All SDAs	Unique NPI Program Count	19,008	60,525	3,131	4,920	74,144

Attachment C
Provider Network Counts (2016 SFQ3)

Program	Service Delivery Area	Managed Care Organization	PCP	Specialist	Dentist	Pharmacy	Unique NPI Total
STAR+PLUS	Bexar	Amerigroup Texas, Inc	884	3,092	1	115	3,652
		Molina Healthcare of Texas	394	7,801	562	334	8,953
		Superior Health Plan	994	5,188	595	119	6,764
		Unique NPI SDA Count	1,580	10,735	1,079	335	12,931
	Dallas	Molina Healthcare of Texas	653	8,567	769	965	10,842
		Superior Health Plan	1,367	5,826	1,003	511	8,605
		Unique NPI SDA Count	1,704	11,628	1,553	972	15,392
	El Paso	Amerigroup Texas, Inc	294	1,099	1	26	1,214
		Molina Healthcare of Texas	218	5,215	488	73	5,955
		Unique NPI SDA Count	359	5,673	488	73	6,341
	Harris	Amerigroup Texas, Inc	2,272	5,200	11	432	6,949
		Molina Healthcare of Texas	1,061	10,689	675	1,060	13,116
		United Health Care	1,902	6,126	225	409	8,472
		Unique NPI SDA Count	3,554	15,312	859	1,070	18,919
	Hidalgo	Cigna-HealthSpring	517	1,881	9	109	2,301
		Molina Healthcare of Texas	597	6,310	491	228	7,436
		Superior Health Plan	904	2,514	448	95	3,828
		Unique NPI SDA Count	1,091	7,619	888	243	9,187
	Jefferson	Amerigroup Texas, Inc	2,037	5,179	11	407	6,709
		Molina Healthcare of Texas	1,052	10,117	675	931	12,445
		United Health Care	855	6,543	230	142	7,688
		Unique NPI SDA Count	2,871	15,451	861	949	18,613
	Lubbock	Amerigroup Texas, Inc	647	1,393	0	36	1,731
		Superior Health Plan	668	1,713	189	46	2,550
		Unique NPI SDA Count	878	2,352	189	50	3,020
	MRSA Central	Superior Health Plan	2,306	7,333	248	256	9,974
		United Health Care	656	1,595	47	62	2,309
		Unique NPI SDA Count	2,525	7,780	265	267	10,454
	MRSA Northeast	Cigna-HealthSpring	526	2,316	5	132	2,898
		United Health Care	715	2,029	62	101	2,843
		Unique NPI SDA Count	957	3,565	65	133	4,532
	MRSA West	Amerigroup Texas, Inc	1,285	3,366	1	143	3,994
		Superior Health Plan	1,407	4,330	274	137	5,998
		Unique NPI SDA Count	2,090	6,479	275	182	8,023
	Nueces	Superior Health Plan	875	2,484	177	85	3,513
		United Health Care	309	779	13	28	1,106
		Unique NPI SDA Count	1,039	2,758	185	93	3,895
	Tarrant	Amerigroup Texas, Inc	1,625	5,415	9	345	6,488
		Cigna-HealthSpring	306	1,745	.	214	2,220
		Unique NPI SDA Count	1,759	6,402	9	422	7,612
	Travis	Amerigroup Texas, Inc	1,031	2,246	3	116	3,093
		United Health Care	531	2,123	21	63	2,649
		Unique NPI SDA Count	1,333	3,614	21	119	4,652
	All SDAs	Unique NPI Program Count	14,476	51,603	3,336	4,822	66,667

Attachment C3 - Provider Termination
(2016 SFQ3)

Program	MCO	SDA	PCP Termination	Specialist Termination
Dental	DentaQuest	Statewide	104	15
	MCNA	Statewide	110	13
STAR	Aetna	Bexar	28	54
		Tarrant	19	60
	Aetna Total		47	114
	Amerigroup	Bexar	13	92
		Dallas	2	85
		Harris	12	0
		Jefferson	0	16
		Lubbock	4	13
		MRSA Central	24	78
		MRSA NE	0	0
		MRSA West	0	0
		Tarrant	4	93
	Amerigroup Total		59	377
	BCBS	Travis	23	123
	Community Health Choice	Harris	31	65
		Jefferson	2	5
	CHC Total		33	70
	Christus	Nueces	5	4
	Community First	Bexar	10	32
	Cook	Tarrant	46	43
	Driscoll	Hidalgo	4	6
		Nueces	9	3
	Driscoll Total		13	9
	El Paso First	El Paso	0	47
	FirstCare	Lubbock	3	10
		MRSA West	6	23
	FirstCare Total		9	33
	Molina	El Paso	1	14
		Dallas	2	50
		Harris	15	106
		Hidalgo	3	17
		Jefferson	7	63
	Molina Total		28	250
	Parkland	Dallas	19	50
	Scott & White	MRSA Central	8	27
	Sendero	Travis	17	16
	Seton	Travis	9	74
	Superior	Bexar	26	114
		El Paso	11	40
		Hidalgo	16	39
		Lubbock	19	24
		MRSA Central	19	27
		MRSA NE	20	59
		MRSA West	19	44
		Nueces	3	19
		Travis	19	72
	Superior Total		152	438
	Texas Children's	Harris	10	5
		Jefferson	1	3
	Texas Children's Total		11	8
	United	Harris	19	33
		Hidalgo	3	13

Attachment C3 - Provider Termination
(2016 SFQ3)

Program	MCO	SDA	PCP Termination	Specialist Termination
		Jefferson	4	20
	United Total		26	66
STAR+PLUS	Amerigroup	Bexar	13	94
		El Paso	1	16
		Harris	14	212
		Jefferson	0	17
		Lubbock	4	13
		MRSA West	18	62
		Tarrant	4	89
		Travis	2	92
	Amerigroup Total		56	595
	Cigna-HealthSpring	Hidalgo	0	8
		MRSA NE	1	34
		Tarrant	0	34
	Cigna-HealthSpring Total		1	76
	Molina	Bexar	2	36
		Dallas	3	37
		El Paso	1	15
		Harris	15	107
		Hidalgo	3	20
		Jefferson	7	64
	Molina Total		31	279
	Superior	Bexar	22	114
		Dallas	35	98
		Hidalgo	16	41
		Lubbock	18	24
		MRSA Central	18	31
		MRSA West	20	45
		Nueces	3	20
	Superior Total		132	373
	United	Harris	18	72
		Jefferson	15	11
		MRSA NE	20	60
		MRSA Central	15	29
		Nueces	2	8
		Travis	0	23
	United Total		70	203

ATTACHMENT D
Out-of-Network Utilization (2016 Q3)

Program	MCO Name	Service Area	Inpatient (15% Standard)	Recalculated Inpatient	ER (20% Standard)	Recalculated ER	Outpatient (20% Standard)	Recalculated Outpatient
Dental	DentaQuest	StateWide	0%		0%		0%	
	MCNA	StateWide	0%		0%		0%	
STAR	Aetna	Bexar	16.31%		26.31%		17.56%	
		Tarrant	3.92%		11.97%		19.83%	
	Amerigroup	Bexar	0.00%		1.00%		12.00%	
		Dallas	11.00%		38.00%		27.00%	
		Harris	7.00%		21.00%		19.00%	
		Jefferson	4.00%		3.00%		18.00%	
		Lubbock	1.00%		1.00%		12.00%	
		MRSA Central	12.00%		21.00%		20.00%	
		MRSA NE	3.00%		4.00%		17.00%	
		MRSA West	4.00%		6.00%		20.00%	
		Tarrant	5.00%		19.00%		17.00%	
	BCBS TX	Travis	3.04%		5.65%		4.44%	
	CHC	Harris	0.48%		3.94%		4.60%	
		Jefferson	0.80%		2.72%		5.47%	
	Christus	Nueces	6.04%		2.06%		5.96%	
	Community 1st	Bexar	3.06%		2.33%		10.16%	
	Cook	Tarrant	3.26%		10.57%		4.31%	
	Driscoll	Hidalgo	2.14%		2.76%		8.08%	
		Nueces	2.42%		2.91%		6.77%	
	El Paso 1st	El Paso	1.39%		1.41%		15.75%	
	First Care	Lubbock	0.97%		4.75%		8.83%	
		MRSA West	2.80%		3.73%		16.94%	
	Molina	Dallas	25.99%		35.12%		15.54%	
		El Paso	0.00%		2.06%		9.38%	
		Harris	5.97%		26.00%		13.13%	
		Hidalgo	0.99%		0.79%		14.86%	
		Jefferson	10.08%		16.19%		19.98%	
	Parkland	Dallas	2.54%		5.33%		13.51%	
	Scott and White	MRSA Central	4.00%		19.42%		4.25%	
	Sendero	Travis	1.26%		6.48%		4.81%	
	Seton	Travis	12.08%		36.33%		7.55%	
	Superior	Bexar	2.83%		0.37%		4.77%	
		El Paso	0.34%		0.53%		4.02%	
		Hidalgo	0.44%		0.45%		3.29%	
		Lubbock	0.73%		0.70%		5.80%	
		MRSA Central	1.78%		1.61%		4.63%	

ATTACHMENT D
Out-of-Network Utilization (2016 Q3)

Program	MCO Name	Service Area	Inpatient (15% Standard)	Recalculated Inpatient	ER (20% Standard)	Recalculated ER	Outpatient (20% Standard)	Recalculated Outpatient
		MRSA NE	1.83%		1.41%		7.26%	
		MRSA West	2.21%		1.69%		7.00%	
		Nueces	1.37%		0.99%		4.98%	
		Travis	3.92%		1.43%		3.69%	
	Texas Children's	Harris	8.16%		27.63%		1.60%	
		Jefferson	2.42%		2.62%		3.69%	
	United	Harris	4.71%		11.33%		8.03%	
		Hidalgo	0.79%		1.40%		6.25%	
		Jefferson	2.00%		4.00%		9.00%	
STAR+PLUS	Amerigroup	Bexar	2.00%		2.00%		16.00%	
		El Paso	1.00%		1.00%		11.00%	
		Harris	27.00%		22.00%		15.00%	
		Jefferson	8.00%		4.00%		22.00%	
		Lubbock	8.00%		1.00%		12.00%	
		MRSA West	5.00%		5.00%		13.00%	
		Tarrant	12.00%		16.00%		19.00%	
		Travis	6.00%		7.00%		11.00%	
	Cigna-HealthSpring	Hidalgo	8.62%		18.90%		13.20%	
		MRSA NE	13.39%		10.42%		12.92%	
		Tarrant	29.82%	6.00%	46.40%	12.00%	38.92%	13.00%
	Molina	Bexar	6.57%		5.83%		9.70%	
		Dallas	42.42%	7.00%	47.37%	7.00%	13.18%	13.00%
		El Paso	0.44%		0.94%		8.18%	
		Harris	20.80%	6.00%	24.43%	3.00%	15.28%	
		Hidalgo	0.58%		0.92%		5.88%	
		Jefferson	9.28%		4.69%		15.33%	
	Superior	Bexar	8.47%		0.55%		7.92%	
		Dallas	21.79%	12%	25.16%	7.00%	15.25%	
		Hidalgo	1.59%		0.73%		5.39%	
		Lubbock	11.12%		1.18%		6.97%	
		MRSA Central	5.66%		2.77%		7.80%	
		MRSA West	6.93%		2.17%		10.00%	
		Nueces	3.50%		0.76%		11.29%	
		Harris	28.36%		38.15%		11.68%	
	United	Jefferson	8.20%		7.81%		6.24%	
		MRSA Central	11.45%		21.82%		10.56%	

ATTACHMENT D
Out-of-Network Utilization (2016 Q3)

Program	MCO Name	Service Area	Inpatient (15% Standard)	Recalculated Inpatient	ER (20% Standard)	Recalculated ER	Outpatient (20% Standard)	Recalculated Outpatient
		MRSA NE	9.44%		7.57%		9.04%	
		Nueces	4.81%		1.95%		6.44%	
		Travis	3.48%		4.13%		6.72%	

ATTACHMENT E
HHSC GeoMapping
PCP and ENT (2016SFQ3)

Program	Service Area	MCO	Plan Code	Percent of MCO Child Members Residing Within 30 Miles of 2 PCPs With an Open Panel	Percent of MCO Adult Members Residing Within 30 Miles of 2 PCPs With an Open Panel	Percent of MCO Child Members Residing Within 75 Miles of a E.N.T. Physician
STAR	BEXAR	AETNA Better Health	43	100%	100%	100%
		Amerigroup	44	100%	100%	100%
		Community First Health Plans	42	100%	100%	100%
		Superior HealthPlan	40	100%	100%	100%
	DALLAS	Amerigroup	90	100%	100%	100%
		Molina Healthcare of Texas	95	100%	100%	100%
		Parkland HEALTHfirst	93	100%	100%	100%
	EL PASO	El Paso First Premier Plan	37	100%	100%	100%
		Molina Healthcare of Texas	31	100%	100%	100%
		Superior HealthPlan	36	100%	100%	100%
	HARRIS	Amerigroup	71	100%	100%	100%
		Community Health Choice	79	100%	100%	100%
		Molina Healthcare of Texas	7G	100%	100%	100%
		Texas Children's Health Plan	72	100%	100%	100%
		UnitedHealthcare Community Plan	7H	100%	100%	100%
	HIDALGO	Driscoll Children's Health Plan	H4	100%	100%	97%
		Molina Healthcare of Texas	H3	100%	100%	98%
		Superior Healthplan	H2	100%	100%	100%
		UnitedHealthcare Community Plan	H1	100%	100%	98%
	JEFFERSON	Amerigroup	8G	100%	100%	100%
		Community Health Choice	8H	100%	100%	100%
		Molina Healthcare of Texas	8J	100%	100%	100%
		Texas Children's Health Plan	8K	100%	100%	100%
		UnitedHealthcare Community Plan	8L	100%	100%	100%
	LUBBOCK	Amerigroup	53	99.98%	100%	100%
		FirstCare STAR	50	100.00%	100%	100%
		Superior HealthPlan	52	100.00%	100%	100%
	MRSA Central	RightCare from Scott and White Health Plan	C3	100%	100%	100%
		Superior HealthPlan	C2	100%	100%	100%
		Amerigroup	C1	100%	100%	100%

ATTACHMENT E
HHSC GeoMapping
PCP and ENT (2016SFQ3)

Program	Service Area	MCO	Plan Code	Percent of MCO Child Members Residing Within 30 Miles of 2 PCPs With an Open Panel	Percent of MCO Adult Members Residing Within 30 Miles of 2 PCPs With an Open Panel	Percent of MCO Child Members Residing Within 75 Miles of a E.N.T. Physician
	MRSA Northeast	Amerigroup	N1	100%	100%	100%
		Superior HealthPlan	N2	100%	100%	100%
	MRSA West	Amerigroup	W2	99.93%	99.94%	86.6%
		FirstCare STAR (MRSA)	W4	99.29%	99.50%	92.2%
		Superior HealthPlan	W3	99.17%	99.23%	96.0%
	NUECES	CHRISTUS Health Plan	88	0.00%	0%	0%
		Driscoll Children's Health Plan	82	100.00%	100%	100%
		Superior HealthPlan	83	100.00%	100%	100%
	TARRANT	AETNA Better Health	67	100%	100%	100%
		Amerigroup	63	100%	100%	100%
		Cook Children's Health Plan	66	100%	100%	100%
	TRAVIS	Blue Cross Blue Shield of Texas	1P	100%	100%	100%
		Sendero Health Plans	1N	100%	100%	0%
		Seton Health Plan	1A	100%	100%	100%
		Superior HealthPlan	10	100%	100%	100%
STAR Plus	BEXAR	Amerigroup	45	100%	100%	100%
		Molina Healthcare of Texas	46	100%	100%	100%
		Superior HealthPlan	47	100%	100%	100%
	DALLAS	Molina Healthcare of Texas	9F	100%	100%	100%
		Superior HealthPlan	9H	100%	100%	100%
	EL PASO	Amerigroup	34	100%	100%	100%
		Molina Healthcare of Texas	33	100%	100%	100%
	HARRIS	Amerigroup	7P	100%	100%	100%
		Molina Healthcare of Texas	7S	100%	100%	100%
		UnitedHealthcare Community Plan	7R	100%	100%	100%
	HIDALGO	HealthSpring	H7	100%	99.8%	98%
		Molina Healthcare of Texas	H6	100%	99.7%	99%
		Superior HealthPlan	H5	100%	99.5%	100%
	JEFFERSON	Amerigroup	8R	100%	100%	100%
		Molina Healthcare of Texas	8T	100%	100%	100%
		UnitedHealthcare Community Plan	8S	100%	100%	100%

ATTACHMENT E
HHSC GeoMapping
PCP and ENT (2016SFQ3)

Program	Service Area	MCO	Plan Code	Percent of MCO Child Members Residing Within 30 Miles of 2 PCPs With an Open Panel	Percent of MCO Adult Members Residing Within 30 Miles of 2 PCPs With an Open Panel	Percent of MCO Child Members Residing Within 75 Miles of a E.N.T. Physician
	LUBBOCK	Amerigroup	5A	100%	100%	100%
		Superior HealthPlan	5B	100%	100%	100%
	MRSA Central	Superior HealthPlan	C4	100%	100%	100%
		UnitedHealthcare Community Plan	C5	100%	100%	98%
	MRSA Northeast	Cigna-HealthSpring	N3	100%	100%	100%
		UnitedHealthcare Community Plan	N4	100%	100%	100%
	MRSA West	Amerigroup	W5	100%	100%	82%
		Superior HealthPlan	W6	99%	99%	97%
	NUECES	Superior HealthPlan	86	100%	100%	100%
		UnitedHealthcare Community Plan	85	100%	100%	100%
	TARRANT	Amerigroup	69	100%	100%	100%
		HealthSpring	6C	100%	100%	100%
	TRAVIS	Amerigroup	19	100%	100%	100%
		UnitedHealthcare Community Plan	18	100%	100%	100%

Note:

Children are under age 21; adults are age 21 and older.

ATTACHMENT G
HHSC GeoMapping
Pharmacy (2016SFQ3)

Program	Service Area	MCO	P l a n C o d e	Percent of Child Members in Urban Counties Residing w/in 2 Miles of One Pharmacy	Percent of Child Members in Suburban Counties Residing w/in 5 Miles of One Pharmacy	Percent of Child Members in Rural Counties Residing w/in 15 Miles of One Pharmacy	Percent of Child Members in Urban Counties Residing w/in 2 Miles of Two Pharmacies	Percent of Child Members in Suburban Counties Residing w/in 5 Miles of Two Pharmacies	Percent of Child Members in Rural Counties Residing w/in 15 Miles of Two Pharmacies	Percent of Adult Members in Urban Counties Residing w/in 2 Miles of One Pharmacy	Percent of Adult Members in Suburban Counties Residing w/in 5 Miles of One Pharmacy	Percent of Adult Members in Rural Counties Residing w/in 15 Miles of One Pharmacy	Percent of Adult Members in Urban Counties Residing w/in 2 Miles of Two Pharmacies	Percent of Adult Members in Suburban Counties Residing w/in 5 Miles of Two Pharmacies	Percent of Adult Members in Rural Counties Residing w/in 15 Miles of Two Pharmacies
STAR	BEXAR	AETNA Better Health	43	93.97	71.88	NA	90.42	62.01	NA	94.07	72.22	NA	91.57	60.26	NA
		Amerigroup	44	94.23	74.72	NA	90.35	64.54	NA	94.62	63.83	NA	89.95	54.26	NA
		Community First Health Plans	42	94.30	78.95	NA	90.02	74.93	NA	95.07	73.52	NA	91.26	68.87	NA
		Superior HealthPlan	40	93.73	72.98	NA	88.04	62.65	NA	93.74	71.64	NA	88.79	61.23	NA
	DALLAS	Amerigroup	90	95.36	91.80	99.26	92.83	86.96	97.78	95.18	90.75	99.32	92.46	85.42	95.24
		Molina Healthcare of Texas	95	95.84	93.36	100.00	93.39	90.50	97.97	95.45	93.99	100.00	92.69	93.11	100.00
		Parkland HEALTHfirst	93	94.60	88.25	96.62	90.08	81.49	96.62	94.58	87.15	97.14	90.09	79.91	97.14
	EL Paso	El Paso First Premier Plan	37	84.47	0.00	NA	80.58	0.00	NA	86.23	0.00	NA	82.59	0.00	NA
		Molina Healthcare of Texas	31	88.09	0.00	NA	85.18	0.00	NA	89.34	NA	NA	87.70	NA	NA
		Superior HealthPlan	36	84.81	0.00	NA	79.08	0.00	NA	86.60	0.00	NA	80.23	0.00	NA
	HARRIS	Amerigroup	71	97.72	90.36	99.91	93.40	86.02	97.20	97.32	91.32	100.00	92.85	87.02	98.67
		Community Health Choice	79	97.21	93.40	99.70	94.07	85.37	94.97	97.53	93.99	100.00	94.14	87.22	92.98
		Molina Healthcare of Texas	76	97.87	94.22	100.00	96.36	90.10	99.55	97.38	95.11	100.00	95.05	91.74	100.00
		Texas Children's Health Plan	72	97.16	93.37	99.51	94.16	85.70	86.73	96.97	93.24	96.58	93.49	86.42	93.16
		UnitedHealthcare Community Plan	7H	91.50	85.66	81.50	79.38	79.81	22.69	90.17	83.31	90.16	76.82	76.32	26.23
	HIDALGO	Driscoll Children's Health Plan	H4	79.15	NA	99.12	74.74	NA	86.77	81.38	NA	98.80	76.54	NA	81.02
		Molina Healthcare of Texas	H3	80.82	NA	99.37	75.68	NA	95.98	83.01	NA	99.05	78.92	NA	94.29
		Superior Healthplan	H2	74.12	NA	99.21	68.81	NA	93.98	79.16	NA	99.08	73.96	NA	92.77
		UnitedHealthcare Community Plan	H1	71.23	NA	95.05	56.98	NA	56.50	72.48	NA	93.21	58.64	NA	50.57
	JEFFERSON	Amerigroup	8G	90.79	78.82	98.97	80.28	74.05	97.56	91.46	81.45	98.68	81.41	76.47	96.71
		Community Health Choice	8H	90.82	71.46	98.67	80.90	63.87	94.48	90.81	72.39	98.17	80.62	65.01	95.43
		Molina Healthcare of Texas	8J	89.01	83.08	98.83	81.90	77.54	97.86	88.39	82.93	97.96	80.65	78.86	96.94
		Texas Children's Health Plan	8K	90.81	76.64	98.01	81.06	69.34	93.42	89.19	79.62	95.61	77.04	73.14	93.42
		UnitedHealthcare Community Plan	8L	84.74	73.27	97.27	61.58	44.92	32.35	81.60	73.20	95.74	62.40	49.00	48.12
	LUBBOCK	Amerigroup	53	91.04	89.12	99.27	83.04	84.86	84.32	89.53	86.21	100.00	83.36	82.76	91.47
		FirstCare STAR	50	91.10	87.57	96.17	85.09	80.58	91.61	89.53	86.21	100.00	83.36	82.76	91.47
		Superior HealthPlan	52	90.80	91.23	95.76	83.38	86.98	78.63	90.86	92.24	96.73	85.63	86.70	79.60

**ATTACHMENT G
HHSC GeoMapping
Pharmacy (2016SFQ3)**

Program	Service Area	MCO	P l a n C o d e	Percent of Child Members in Urban Counties Residing w/in 2 Miles of One Pharmacy	Percent of Child Members in Suburban Counties Residing w/in 5 Miles of One Pharmacy	Percent of Child Members in Rural Counties Residing w/in 15 Miles of One Pharmacy	Percent of Child Members in Urban Counties Residing w/in 2 Miles of Two Pharmacies	Percent of Child Members in Suburban Counties Residing w/in 5 Miles of Two Pharmacies	Percent of Child Members in Rural Counties Residing w/in 15 Miles of Two Pharmacies	Percent of Adult Members in Urban Counties Residing w/in 2 Miles of One Pharmacy	Percent of Adult Members in Suburban Counties Residing w/in 5 Miles of One Pharmacy	Percent of Adult Members in Rural Counties Residing w/in 15 Miles of One Pharmacy	Percent of Adult Members in Urban Counties Residing w/in 2 Miles of Two Pharmacies	Percent of Adult Members in Suburban Counties Residing w/in 5 Miles of Two Pharmacies	Percent of Adult Members in Rural Counties Residing w/in 15 Miles of Two Pharmacies
	MRSA Central	Amerigroup	C1	80.62	81.24	96.39	68.73	68.89	91.19	77.29	80.00	95.24	63.29	73.60	89.80
		RightCare from Scott and White Health Plan	C3	79.46	79.43	95.63	69.84	66.19	86.17	77.85	78.40	95.39	69.68	66.50	86.70
		Superior HealthPlan	C2	81.41	77.24	93.45	70.60	49.47	89.79	78.18	75.87	93.89	66.93	55.45	89.47
	MRSA Northeast	Amerigroup	N1	75.36	60.98	99.45	64.57	53.42	94.76	74.34	60.35	99.47	63.37	51.98	94.42
		Superior HealthPlan	N2	72.10	50.71	97.30	63.02	46.06	93.50	71.10	49.88	96.54	61.98	45.14	93.16
	MRSA West	Amerigroup	W2	76.69	54.76	97.41	70.37	6.92	83.34	81.86	56.76	97.67	74.94	2.70	85.41
		FirstCare STAR (MRSA)	W4	83.62	62.94	90.07	76.20	15.96	77.93	83.16	68.18	90.37	75.24	13.64	79.75
		Superior HealthPlan	W3	79.23	59.45	91.97	71.68	17.22	78.24	81.58	57.41	92.12	73.23	12.96	79.39
	NUECES	CHRISTUS Health Plan	88	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		Driscoll Children's Health Plan	82	88.99	93.77	99.41	85.85	68.28	94.49	90.78	92.43	99.78	87.76	69.19	95.34
		Superior HealthPlan	83	90.04	87.50	96.65	82.81	55.11	94.73	89.19	86.11	97.81	82.32	66.20	95.13
	TARRANT	AETNA Better Health	67	96.86	89.88	NA	92.74	82.73	NA	96.79	88.59	NA	93.02	82.27	NA
		Amerigroup	63	96.28	92.27	NA	93.42	86.45	NA	95.67	91.28	NA	92.19	84.06	NA
		Cook Children's Health Plan	66	94.94	83.53	NA	91.85	72.79	NA	95.00	84.28	NA	91.74	75.34	NA
	TRAVIS	Blue Cross Blue Shield of Texas	1P	81.99	80.41	96.16	76.21	78.39	95.35	86.11	82.73	94.25	81.83	80.52	93.10
		Sendero Health Plans	1N	80.65	76.68	96.73	74.81	74.04	94.86	86.55	84.77	97.14	81.42	79.80	97.14
		Seton Health Plan	1A	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
		Superior HealthPlan	10	80.99	78.00	96.96	73.57	73.67	96.18	85.36	83.20	95.88	78.84	78.58	94.24
STAR Plus	BEXAR	Amerigroup	45	92.72	90.00	NA	89.40	85.00	NA	93.31	70.61	NA	89.55	60.09	NA
		Molina Healthcare of Texas	46	91.67	71.43	NA	86.11	71.43	NA	94.92	80.62	NA	93.39	76.69	NA
		Superior HealthPlan	47	92.20	73.28	NA	86.95	60.34	NA	93.55	73.74	NA	88.58	64.02	NA
	DALLAS	Molina Healthcare of Texas	9F	93.52	92.65	100.00	91.02	92.65	100.00	95.26	89.93	100.00	93.08	87.40	100.00
		Superior HealthPlan	9H	94.87	88.33	100.00	88.58	85.00	91.67	94.27	87.76	99.56	89.40	82.30	96.49
	EL Paso	Amerigroup	34	89.17	NA	NA	85.83	NA	NA	88.51	NA	NA	85.45	NA	NA
		Molina Healthcare of Texas	33	91.93	NA	NA	90.68	NA	NA	90.72	0.00	NA	88.76	0.00	NA
	HARRIS	Amerigroup	7P	97.74	93.67	100.00	94.06	88.61	100.00	97.58	90.88	99.37	93.83	86.07	92.41
		Molina Healthcare of Texas	7S	98.22	96.27	100.00	96.30	93.28	100.00	97.29	92.88	98.62	95.83	88.31	98.16
		UnitedHealthcare Community Plan	7R	91.42	87.94	88.89	78.41	83.69	33.33	92.63	86.81	85.28	80.80	80.34	27.71
	HIDALGO	HealthSpring	H7	74.39	NA	100.00	61.25	NA	93.75	79.05	NA	95.17	70.76	NA	81.82
		Molina Healthcare of Texas	H6	80.14	NA	100.00	74.83	NA	93.55	85.79	NA	99.54	82.41	NA	95.43
		Superior HealthPlan	H5	75.93	NA	97.92	70.99	NA	93.75	82.18	NA	97.96	77.56	NA	90.91
	JEFFERSON	Amerigroup	8R	95.76	84.31	100.00	83.05	78.43	97.44	90.38	83.38	98.63	77.08	75.57	96.59
		Molina Healthcare of Texas	8T	89.83	90.00	100.00	84.75	90.00	95.00	91.15	82.58	99.02	80.54	78.87	98.05
		UnitedHealthcare Community Plan	8S	88.76	76.47	100.00	62.92	52.94	29.17	84.69	68.69	97.27	65.26	40.34	52.47
	LUBBOCK	Amerigroup	5A	89.58	83.33	95.00	87.50	83.33	75.00	91.52	85.54	99.43	85.15	81.33	77.30
		Superior HealthPlan	5B	86.63	100.00	90.00	82.89	71.43	66.67	90.73	91.09	94.09	83.74	86.63	72.22
	MRSA Central	Superior HealthPlan	C4	85.12	80.00	85.94	71.90	56.00	84.38	80.66	76.84	94.79	72.01	49.69	90.87
		UnitedHealthcare Community Plan	C5	55.06	40.00	90.91	30.34	0.00	59.09	66.08	49.23	87.36	39.53	15.90	52.08
	MRSA Northeast	Cigna-HealthSpring	N3	74.53	86.67	95.29	56.60	40.00	78.82	75.13	48.49	94.45	59.82	10.67	85.74
		UnitedHealthcare Community Plan	N4	76.19	25.00	86.21	58.10	12.50	72.41	72.76	32.12	93.62	56.90	5.96	79.99
	MRSA West	Amerigroup	W5	89.80	100.00	97.92	75.51	0.00	85.42	84.77	63.33	97.93	78.81	16.67	83.60
		Superior HealthPlan	W6	84.06	62.50	93.27	76.09	0.00	82.69	83.77	54.59	90.41	75.20	17.90	75.63
	NUECES	Superior HealthPlan	86	90.91	96.00	96.92	84.09	52.00	92.31	88.79	83.78	95.46	79.25	49.06	93.32
		UnitedHealthcare Community Plan	85	79.55	66.67	61.54	72.73	0.00	46.15	81.25	81.25	64.65	66.76	22.37	29.10
	TARRANT	Amerigroup	69	96.15	91.77	NA	93.76	83.95	NA	96.22	86.07	NA	93.51	77.63	NA
		HealthSpring	6C	86.07	94.29	NA	72.95	88.57	NA	91.90	80.25	NA	80.30	72.93	NA
	TRAVIS	Amerigroup	19	83.17	91.36	100.00	72.28	86.42	100.00	86.73	77.55	94.97	79.56	73.60	92.18
		UnitedHealthcare Community Plan	18	71.85	65.91	100.00	54.07	56.82	62.50	71.29	60.57	95.81	59.61	48.54	72.56

Notes:

1 - Children are under age 21; adults are age 21 and older.

2 - NA = Not applicable, no plan members in this type of county.

**ATTACHMENT H
HHSC Dental GeoMapping
2016SFQ3**

DMO	Dental Region	Percent of Members in Rural Counties Residing w/in 75 Miles of At least 2 Main/General Dentists	Percent of Members in Urban Counties Residing w/in 30 Miles of At Least 2 Main/General Dentists	Percent of Members Within 75 Miles of At Least 1 Pediatric Dentists	Percent of Members Within 75 Miles of at Least 1 Periodontists	Percent of Members Within 75 Miles of at Least 1 Orthodontists	Percent of Members Within 75 Miles of at Least 1 Endodontists	Percent of Members Within 75 Miles of At Least 1 Prosthodontists	Percent of Members Within 75 Miles of At Least 1 Oral Surgeons
DentaQuest	High Plains	99.95%	100%	95.70%	0.00%	95.80%	50.91%	0%	95.79%
	Northwest Texas	100%	100.00%	99.76%	7.95%	99.76%	7.37%	0%	91.93%
	Metroplex	100%	100%	100%	100%	100%	100%	0%	100%
	Upper East Texas	100%	100%	100%	15.45%	100%	40%	0%	100.00%
	Southeast Texas	100%	100%	100%	67.34%	100%	74.16%	0.00%	100%
	Gulf Coast	100%	100%	100%	100%	100%	100%	0.00%	100%
	Central Texas	100%	100.0%	100%	99.61%	100%	99%	0.00%	100%
	Upper South Texas	100%	100.0%	100%	88.95%	90.01%	96.97%	0.00%	94%
	West Texas	100.00%	100.00%	99.88%	0.00%	99.28%	0%	0%	12.50%
	Upper Rio Grande	93.98%	100.00%	99.64%	99.64%	99.64%	99.64%	0%	99.64%
	Lower South Texas	100%	100%	100%	84.53%	100%	85%	69.75%	100%
	Statewide	99.98%	100.0%	99.86%	86.51%	98.84%	89.75%	9.86%	97.48%
MCNA	High Plains	99.94%	100.00%	96.56%	0.00%	96.70%	0.00%	0%	96.55%
	Northwest Texas	100%	100.00%	99.78%	6.16%	69.64%	5.99%	0%	39.32%
	Metroplex	100%	100%	100%	100%	100%	100.00%	0%	100%
	Upper East Texas	100%	100%	100%	15.43%	100%	16%	0%	100.00%
	Southeast Texas	100%	100%	100%	59.86%	96%	75.12%	0.00%	100%
	Gulf Coast	100%	100%	100%	100%	100%	99.9%	0.00%	100%
	Central Texas	100%	100.0%	100%	99.43%	100%	93%	0.00%	100%
	Upper South Texas	100%	100%	100%	90.61%	91.34%	90.32%	0.00%	100%
	West Texas	100.00%	100.00%	99.94%	0.00%	79.11%	0%	0%	5.36%
	Upper Rio Grande	91.00%	100.00%	99.64%	100%	99.64%	99.63%	0%	99.64%
	Lower South Texas	100%	100%	100%	84.15%	100%	100%	0%	100%
	Statewide	99.97%	99.99%	99.87%	86.34%	97.91%	88.09%	0.00%	97.21%

Medicaid Dental Plan Codes:

1M=DentaQuest

1J=DentaQuest

NPPES Taxonomy Codes:

122300000X, 1223G0001X, 1223 General Practice (includes pediatric dentistry)

1223P0221X Pediatric Dentistry

1223P0300X Periodontics

1223E0200X Endodontics

1223X0400X Orthodontics and Dentofacial Orthopedics

1223P0700X Prosthodontics

1223S0112X, 204E00000X, 261C Oral and Maxillofacial Surgery

ATTACHMENT I
STAR MCO GeoMapping (16SFQ3)

MCO	SDA	Percent of Child Members Residing w/in 30 Miles of Two Open Panel PCPs	Percent of Female Child Members Residing w/in 75 Miles of One Obstetrician/Gyn	Percent of Child Members Residing w/in 75 Miles of One Orthopedic Surgeon	Percent of Child Members Residing w/in 75 Miles of One ENT	Percent of Child Members in Urban Counties Residing w/in 30 Miles of One Outpatient Behavioral Health Provider	Percent of Child Members in Rural Counties Residing w/in 75 Miles of One Outpatient Behavioral Health Provider	Percent of Child Members Residing w/in 30 Miles of One Acute Care Hospital	Percent of Adult Members Residing w/in 30 Miles of One Open Panel PCP	Percent of Female Adult Members Residing w/in 75 Miles of One Obstetrician/Gynecologist	Percent of Adult Members Residing w/in 75 Miles of One Orthopedic Surgeon	Percent of Adult Members Residing w/in 75 Miles of One Cardiovascular Disease Specialist	Percent of Adult Members Residing w/in 75 Miles of One General Surgeon	Percent of Adult Members Residing w/in 75 Miles of One Ophthalmologist	Percent of Adult Members in Urban Counties Residing w/in 30 Miles of One Outpatient Behavioral Health Provider	Percent of Adult Members in Rural Counties Residing w/in 75 Miles of One Outpatient Behavioral Health Provider	Percent of Adult Members Residing w/in 30 Miles of One Acute Care Hospital
Aetna	Bear	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	97.29%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	98.05%
	Tarrant	100.00%	100.00%	100.00%	100.00%	100.00%	N/A	99.71%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	N/A	99.60%
Amerigroup	Bear	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.39%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.34%
	Tarrant	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.99%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.99%
Harris	Jefferson	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.89%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.87%
	Lubbock	99.80%	100.00%	100.00%	100.00%	100.00%	100.00%	95.27%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	94.85%
MRSA Central	MRSA Central	99.69%	100.00%	100.00%	100.00%	100.00%	100.00%	96.12%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	96.72%
	MRSA East	99.68%	100.00%	100.00%	99.80%	99.80%	100.00%	94.77%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	92.99%
MRSA West	MRSA West	95.40%	99.60%	95.20%	97.10%	99.98%	99.95%	95.92%	98.20%	99.81%	95.90%	95.90%	99.75%	95.11%	98.12%	100.00%	96.30%
	Tarrant	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.54%
BCBS	Travis	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.80%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.80%
	Nueces	100.00%	100.00%	96.20%	75.62%	97.91%	97.91%	95.81%	100.00%	100.00%	97.68%	100.00%	100.00%	80.21%	80.21%	99.76%	96.26%
CHRISTUS	Community First	99.90%	99.90%	100.00%	99.90%	100.00%	99.90%	99.90%	99.90%	100.00%	100.00%	100.00%	100.00%	100.00%	99.90%	99.90%	99.90%
	Community Health Choice	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Cash Children's	Jefferson	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.00%
	Tarrant	100.00%	100.00%	100.00%	100.00%	99.80%	N/A	95.80%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	94.60%
Driscoll Children's	Hidalgo	99.30%	99.20%	99.20%	96.40%	99.90%	100.00%	97.10%	100.00%	99.10%	99.20%	98.90%	98.10%	98.30%	100.00%	100.00%	96.30%
	Nueces	100.00%	100.00%	100.00%	99.80%	100.00%	99.90%	98.20%	100.00%	100.00%	100.00%	100.00%	100.00%	99.70%	100.00%	99.90%	98.20%
El Paso First	El Paso	99.57%	99.99%	99.97%	99.97%	99.90%	100.00%	99.90%	100.00%	100.00%	100.00%	100.00%	100.00%	99.98%	100.00%	100.00%	99.78%
	FirstCare	Lubbock	100.00%	100.00%	100.00%	100.00%	100.00%	97.40%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	97.00%
MRSA West	MRSA West	96.70%	97.30%	95.80%	86.20%	100.00%	99.80%	95.00%	98.60%	98.30%	96.70%	92.80%	98.60%	92.80%	97.40%	100.00%	91.80%
	Wolva	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	94.60%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.90%
Wolva	El Paso	99.60%	100.00%	99.90%	99.90%	100.00%	100.00%	93.60%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	93.00%
	Harris	99.70%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Hidalgo	Hidalgo	99.30%	100.00%	97.80%	99.90%	98.90%	98.90%	99.30%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.30%
	Jefferson	99.80%	99.90%	100.00%	95.10%	100.00%	100.00%	95.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.00%	100.00%	100.00%	92.40%
Packland	Albany	99.90%	100.00%	100.00%	100.00%	98.40%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
	MRSA Central	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.10%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	98.10%
Scott and White	MRSA Central	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.10%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	98.10%
	Travis	99.90%	99.70%	99.70%	99.50%	100.00%	100.00%	99.70%	99.70%	99.70%	99.70%	99.70%	99.70%	99.70%	99.70%	100.00%	97.90%
Valley	Travis	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
	Bear	100.00%	100.00%	100.00%	100.00%	100.00%	N/A	99.90%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	N/A	99.90%
Superior	El Paso	99.90%	99.90%	99.90%	99.90%	100.00%	97.80%	99.60%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	100.00%	99.90%	99.90%
	Hidalgo	99.70%	100.00%	100.00%	99.90%	100.00%	99.70%	99.70%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%
Lubbock	Lubbock	99.90%	100.00%	100.00%	100.00%	100.00%	100.00%	99.90%	100.00%	100.00%	100.00%	100.00%	100.00%	99.90%	100.00%	100.00%	99.90%
	MRSA Central	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.90%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.90%
MRSA East	MRSA East	100.00%	100.00%	100.00%	99.90%	100.00%	100.00%	99.90%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.90%
	MRSA West	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%	99.90%
Nueces	Nueces	99.90%	100.00%	100.00%	100.00%	100.00%	100.00%	97.20%	99.90%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	98.00%
	Travis	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Texas Children's	Harris	99.98%	99.90%	99.91%	99.90%	99.90%	99.90%	99.98%	99.91%	99.90%	99.98%	99.98%	99.98%	99.98%	99.91%	100.00%	99.75%
	Jefferson	99.80%	99.90%	99.90%	99.80%	99.80%	99.80%	99.81%	99.81%	99.80%	99.81%	99.81%	99.81%	99.81%	99.80%	100.00%	99.50%
United	Harris	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
	Hidalgo	99.70%	100.00%	99.90%	99.70%	100.00%	100.00%	99.70%	100.00%	100.00%	99.70%	99.70%	99.70%	99.70%	99.70%	100.00%	98.00%
Jefferson	Jefferson	100.00%	100.00%	100.00%	99.90%	100.00%	100.00%	99.90%	100.00%	100.00%	99.90%	100.00%	100.00%	99.90%	100.00%	100.00%	99.90%

ATTACHMENT I
STAR+PLUS MCO Geomapping (16SFQ3)

MCO	Service Area	Percent of Child Members Residing w/in 30 Miles of Two Open Panel PCP	Percent of Female Child Members Residing w/in 75 Miles of One Obstetrician/G ynecologist	Percent of Child Members Residing w/in 75 Miles of One Orthopedic Surgeon	Percent of Child Members Residing w/in 75 Miles of One Otolaryngologist (ENT)	Percent of Child Members residing within 30 miles of One Outpatient Behavioral Health Provider	Percent of Child Members Residing w/in 75 Miles of One Outpatient Behavioral Health Provider	Percent of Child Members Residing w/in 30 Miles of One Acute Care Hospital
Amerigroup	Bexar	100.0%	100.0%	100.0%	100.0%	100.0%	0.0%	99.6%
	El Paso	99.3%	100.0%	100.0%	100.0%	100.0%	100.0%	99.3%
	Harris	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Jefferson	100.0%	100.0%	100.0%	99.3%	100.0%	100.0%	97.5%
	Lubbock	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	97.8%
	MRSA West	95.6%	100.0%	100.0%	74.6%	100.0%	100.0%	93.9%
	Tarrant	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	99.8%
Cigna-HealthSpring	Travis	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Hidalgo	100.0%	100.0%	100.0%	94.1%	100.0%	100.0%	100.0%
	MRSA NE	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	99.6%
Molina	Tarrant	100.0%	100.0%	100.0%	100.0%	100.0%	N/A	100.0%
	Bexar	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	95.8%
	Dallas	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	99.8%
	El Paso	100.0%	99.9%	100.0%	100.0%	100.0%	0.0%	100.0%
	Harris	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Hidalgo	99.7%	99.5%	99.7%	98.7%	100.0%	94.2%	99.0%
Superior	Jefferson	100.0%	100.0%	100.0%	96.0%	100.0%	100.0%	88.7%
	Bexar	100.0%	100.0%	100.0%	100.0%	100.0%	N/A	100.0%
	Dallas	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Hidalgo	99.8%	100.0%	100.0%	100.0%	100.0%	100.0%	98.8%
	Lubbock	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	MRSA Central	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
United	MRSA West	99.7%	100.0%	99.1%	97.9%	100.0%	99.4%	97.0%
	Nueces	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	97.8%
	Harris	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Jefferson	100.0%	99.9%	100.0%	100.0%	100.0%	100.0%	99.6%
	MRSA Central	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	99.1%
	MRSA NE	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	95.5%
	Nueces	97.8%	100.0%	100.0%	100.0%	97.1%	100.0%	95.9%
	Travis	96.9%	100.0%	100.0%	100.0%	100.0%	100.0%	97.9%

ATTACHMENT I
STAR+PLUS MCO Geomapping (16SFQ3)

MCO	Service Area	Percent of Adult Members Residing w/in 30 Miles of One Open Panel PCP	Percent of Adult Members Residing w/in 75 Miles of One Obstetrician/Gynecologist	Percent of Adult Members Residing w/in 75 Miles of One Orthopedic Surgeon	Percent of Adult Members Residing w/in 75 Miles of One Cardiovascular Disease Specialist	Percent of Female Adult Members Residing w/in 75 Miles of One General Surgeon	Percent of Adult Members Residing w/in 75 Miles of One Urologist	Percent of Adult Members Residing w/in 75 Miles of One Ophthalmologist
Amerigroup	Bexar	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	El Paso	99.2%	100.0%	99.8%	99.8%	99.8%	99.8%	99.8%
	Harris	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Jefferson	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Lubbock	99.9%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	MRSA West	98.5%	98.5%	97.5%	94.1%	98.4%	93.6%	96.8%
	Tarrant	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Cigna-HealthSpring	Travis	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Hidalgo	99.6%	99.9%	93.4%	100.0%	90.4%	99.9%	99.9%
	MRSA NE	99.9%	99.9%	99.6%	99.9%	100.0%	90.3%	93.4%
Molina	Tarrant	99.9%	100.0%	99.9%	99.9%	100.0%	97.8%	97.8%
	Bexar	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Dallas	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	El Paso	99.7%	99.9%	99.9%	99.9%	99.9%	99.9%	99.9%
	Harris	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Hidalgo	99.6%	99.5%	99.6%	99.6%	99.6%	95.3%	99.6%
Superior	Jefferson	100.0%	100.0%	100.0%	100.0%	100.0%	99.4%	100.0%
	Bexar	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Dallas	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Hidalgo	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Lubbock	100.0%	100.0%	100.0%	100.0%	100.0%	99.9%	100.0%
	MRSA Central	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	MRSA West	99.5%	99.1%	99.2%	99.3%	99.3%	96.8%	96.9%
United	Nueces	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Harris	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
	Jefferson	100.0%	97.1%	100.0%	100.0%	99.8%	98.2%	99.9%
	MRSA Central	99.9%	100.0%	100.0%	97.8%	100.0%	97.7%	100.0%
	MRSA NE	100.0%	100.0%	99.8%	99.8%	100.0%	96.6%	100.0%
	Nueces	100.0%	97.5%	99.7%	100.0%	100.0%	99.7%	100.0%
	Travis	100.0%	33.8%	100.0%	100.0%	100.0%	100.0%	100.0%

ATTACHMENT I
STAR+PLUS MCO Geomapping (16SFQ3)

MCO	Service Area	Percent of Adult Members Residing w/in 75 Miles of Percent of Adult Members in Urban Counties Residing w/in 30 Miles of One Outpatient Behavioral Health Provider	Percent of Adult Members in Rural Counties Residing w/in 75 Miles of One Outpatient Behavioral Health Provider	Percent of Adult Members Residing w/in 30 Miles of One Acute Care Hospital
Amerigroup	Bexar	100.0%	99.4%	100.0%
	El Paso	100.0%	100.0%	99.1%
	Harris	100.0%	100.0%	100.0%
	Jefferson	100.0%	100.0%	94.3%
	Lubbock	100.0%	96.3%	100.0%
	MRSA West	100.0%	100.0%	84.8%
	Tarrant	100.0%	99.7%	100.0%
	Travis	100.0%	99.4%	100.0%
Cigna-HealthSpring	Hidalgo	100.0%	100.0%	99.1%
	MRSA NE	99.7%	99.9%	99.5%
	Tarrant	100.0%	96.0%	99.9%
Molina	Bexar	100.0%	100.0%	96.9%
	Dallas	100.0%	100.0%	99.7%
	El Paso	100.0%	0.0%	99.6%
	Harris	99.9%	99.9%	100.0%
	Hidalgo	100.0%	96.6%	97.7%
	Jefferson	100.0%	100.0%	92.1%
Superior	Bexar	100.0%	N/A	100.0%
	Dallas	100.0%	100.0%	100.0%
	Hidalgo	99.9%	100.0%	97.6%
	Lubbock	100.0%	100.0%	99.9%
	MRSA Central	100.0%	100.0%	99.9%
	MRSA West	99.9%	99.7%	96.7%
	Nueces	100.0%	100.0%	97.8%
United	Harris	100.0%	100.0%	100.0%
	Jefferson	99.9%	100.0%	99.2%
	MRSA Central	90.8%	92.6%	93.1%
	MRSA NE	96.5%	99.7%	95.8%
	Nueces	98.2%	100.0%	97.4%
	Travis	100.0%	100.0%	39.6%

ATTACHMENT J
Pharmacy GeoMapping
16SFQ3

MCO	Program	SDA	STAR MRSA			STAR+PLUS and Non-MRSA STAR		All Programs and SDAs
			Percent of Members in Urban Counties Residing w/in 2 Miles of One Pharmacy (75% standard)	Percent of Members in Suburban Counties Residing w/in 5 Miles of One Pharmacy (55% standard)	Percent of Members in Rural Counties Residing w/in 15 Miles of One Pharmacy (90% standard)	Percent of Members in Urban Counties Residing w/in 2 Miles of One Pharmacy (80% standard)	Percent of Members in Suburban Counties Residing w/in 5 Miles of One Pharmacy (75% standard)	Percent of Members Residing w/in 75 Miles of One 24-Hour Pharmacy (90% standard)
Aetna	STAR	Bexar	N/A	N/A	N/A	90.40%	67.10%	100.00%
	STAR	Tarrant	N/A	N/A	99.70%	94.10%	86.60%	100.00%
Amerigroup	STAR	Bexar	N/A	N/A	100.00%	89.01%	64.85%	100.00%
	STAR+PLUS	Bexar	N/A	N/A	100.00%	90.61%	72.16%	100.00%
	STAR	Dallas	N/A	N/A	97.55%	91.34%	89.01%	100.00%
	STAR+PLUS	El Paso	N/A	N/A	0.00%	83.88%	0.00%	99.71%
	STAR	Harris	N/A	N/A	96.72%	95.09%	84.79%	100.00%
	STAR+PLUS	Harris	N/A	N/A	94.96%	94.99%	86.37%	100.00%
	STAR	Jefferson	N/A	N/A	95.12%	80.94%	62.89%	99.85%
	STAR+PLUS	Jefferson	N/A	N/A	93.78%	83.30%	71.41%	99.76%
	STAR	Lubbock	N/A	N/A	93.39%	83.80%	77.43%	100.00%
	STAR+PLUS	Lubbock	N/A	N/A	91.82%	86.76%	75.96%	100.00%
	STAR	MRSA Central	68.42%	36.36%	80.71%	N/A	N/A	100.00%
	STAR	MRSA Northeast	58.97%	34.42%	98.95%	N/A	N/A	100.00%
	STAR	MRSA West	77.14%	34.37%	89.37%	N/A	N/A	79.77%
	STAR+PLUS	MRSA West	81.61%	39.17%	82.68%	N/A	N/A	65.84%
	STAR	Tarrant	N/A	N/A	98.77%	94.27%	88.42%	100.00%
	STAR+PLUS	Tarrant	N/A	N/A	98.70%	94.58%	85.43%	100.00%
	STAR+PLUS	Travis	N/A	N/A	91.77%	84.53%	79.97%	100.00%
BCBS	STAR	Travis	N/A	N/A	92.00%	79.20%	79.90%	99.90%
CHC	STAR	Harris	NA	NA	99.20%	97.10%	92.80%	99.90%
	STAR	Jefferson	NA	NA	98.10%	90.00%	75.80%	99.90%
Christus	STAR	Nueces	N/A	N/A	96.80%	84.70%	88.20%	100.00%
Cigna-HealthSpring	STAR+PLUS	Hidalgo	N/A	N/A	96.50%	82.60%	N/A	83.70%
	STAR+PLUS	MRSA Northeast	N/A	N/A	99.10%	77.70%	58.20%	100.00%
	STAR+PLUS	Tarrant	N/A	N/A	N/A	96.50%	87.40%	100.00%
Community 1st	STAR	Bexar	NA	NA	88.70%	94.00%	79.40%	99.90%
Cook Children's	STAR	Tarrant	NA	NA	99.10%	97.50%	87.10%	99.90%
Driscoll	STAR	Hidalgo	NA	NA	93.90%	80.40%	87.80%	76.60%
	STAR	Nueces	NA	NA	98.50%	87.80%	88.70%	99.90%
El Paso 1st	STAR	El Paso	NA	NA	2.30%	81.60%	100.00%	99.90%
FirstCare	STAR	Lubbock	NA	NA	95.80%	91.20%	82.20%	99.90%
	STAR	MRSA West	81.70%	56.30%	90.70%	NA	NA	87.70%
Molina	STAR+PLUS	Bexar	N/A	N/A	N/A	91.80%	70.40%	100.00%
	STAR	Dallas	N/A	N/A	97.80%	91.20%	90.30%	100.00%
	STAR+PLUS	Dallas	N/A	N/A	97.10%	90.10%	85.50%	100.00%
	STAR	El Paso	N/A	N/A	N/A	80.10%	0.00%	99.90%
	STAR+PLUS	El Paso	N/A	N/A	N/A	84.50%	0.00%	99.90%
	STAR	Harris	N/A	N/A	97.10%	96.30%	90.30%	100.00%
	STAR+PLUS	Harris	N/A	N/A	97.00%	95.70%	89.80%	100.00%
	STAR	Hidalgo	N/A	N/A	97.10%	70.30%	N/A	75.00%
	STAR+PLUS	Hidalgo	N/A	N/A	96.40%	77.00%	N/A	75.50%
	STAR	Jefferson	N/A	N/A	91.40%	82.50%	69.80%	99.70%

ATTACHMENT J
Pharmacy GeoMapping
16SFQ3

MCO	Program	SDA	STAR MRSA			STAR+PLUS and Non-MRSA STAR		All Programs and SDAs
			Percent of Members in Urban Counties Residing w/in 2 Miles of One Pharmacy (75% standard)	Percent of Members in Suburban Counties Residing w/in 5 Miles of One Pharmacy (55% standard)	Percent of Members in Rural Counties Residing w/in 15 Miles of One Pharmacy (90% standard)	Percent of Members in Urban Counties Residing w/in 2 Miles of One Pharmacy (80% standard)	Percent of Members in Suburban Counties Residing w/in 5 Miles of One Pharmacy (75% standard)	Percent of Members Residing w/in 75 Miles of One 24-Hour Pharmacy (90% standard)
	STAR+PLUS	Jefferson	N/A	N/A	96.40%	85.90%	70.30%	99.80%
Parkland	STAR	Dallas	NA	NA	96.70%	91.30%	82.70%	99.90%
Sendero	STAR	Travis	N/A	N/A	96.50%	83.20%	80.20%	99.90%
Scott & White	STAR	MRSA Central	80.50%	76.60%	98.50%	NA	NA	99.90%
Seton	STAR	Travis	NA	NA	97.90%	85.90%	85.60%	99.90%
Superior	STAR	Bexar	N/A	N/A	N/A	87.00%	63.60%	100.00%
	STAR+PLUS	Bexar	N/A	N/A	N/A	88.10%	65.90%	100.00%
	STAR+PLUS	Dallas	N/A	N/A	97.60%	84.60%	81.60%	100.00%
	STAR	El Paso	N/A	N/A	0.00%	75.60%	N/A	99.90%
	STAR	Hidalgo	N/A	N/A	94.10%	67.90%	N/A	81.70%
	STAR+PLUS	Hidalgo	N/A	N/A	89.20%	74.10%	N/A	79.10%
	STAR	Lubbock	N/A	N/A	92.80%	85.90%	82.40%	99.90%
	STAR+PLUS	Lubbock	N/A	N/A	94.20%	86.20%	83.10%	100.00%
	STAR	Nueces	N/A	N/A	96.40%	81.30%	86.00%	100.00%
	STAR+PLUS	Nueces	N/A	N/A	96.50%	81.60%	84.30%	100.00%
	STAR	MRSA Central	75.50%	71.90%	95.30%	N/A	N/A	100.00%
	STAR+PLUS	MRSA Central	74.60%	67.30%	95.40%	N/A	N/A	100.00%
	STAR	MRSA Northeast	56.90%	49.20%	96.90%	N/A	N/A	100.00%
	STAR	MRSA West	73.20%	45.60%	87.60%	N/A	N/A	82.10%
	STAR+PLUS	MRSA West	78.90%	48.20%	88.00%	N/A	N/A	87.10%
TCHP	STAR	Travis	N/A	N/A	93.50%	71.90%	75.30%	100.00%
	STAR	Harris	NA	NA	98.50%	97.60%	93.40%	99.90%
United	STAR	Jefferson	NA	NA	97.10%	90.10%	76.50%	99.90%
	STAR	Harris	N/A	N/A	96.50%	94.90%	91.00%	100.00%
	STAR+PLUS	Harris	N/A	N/A	95.30%	95.20%	89.30%	100.00%
	STAR	Hidalgo	N/A	N/A	95.10%	71.10%	N/A	83.30%
	STAR	Jefferson	N/A	N/A	96.40%	85.80%	71.90%	99.90%
	STAR+PLUS	Jefferson	N/A	N/A	96.90%	84.50%	73.50%	99.90%
	STAR+PLUS	Nueces	N/A	N/A	97.20%	88.80%	83.50%	100.00%
	STAR+PLUS	Travis	N/A	N/A	95.70%	84.70%	80.80%	100.00%
	STAR+PLUS	MRSA Central	80.70%	74.30%	96.20%	N/A	N/A	100.00%
	STAR+PLUS	MRSA Northeast	71.90%	50.80%	97.00%	N/A	N/A	100.00%

ATTACHMENT K
DMO Dental GeoMapping
16SFQ3

DMO	Dental Region	Percent of Members in Urban Counties Residing w/in 30 Miles of At Least 2 Main/General Dentists	Percent of Members in Rural Counties Residing w/in 75 Miles of At least 2 Main/General Dentists	Percent of Members Within 75 Miles of at Least 1 Endodontists	Percent of Members Within 75 Miles of At Least 1 Oral Surgeons	Percent of Members Within 75 Miles of at Least 1 Orthodontists	Percent of Members Within 75 Miles of at Least 1 Periodontists	Percent of Members Within 75 Miles of At Least 1 Prosthodontists
DentaQuest	High Plains	98.70%	85.50%	48.10%	48.60%	93.60%	85.70%	43.00%
	Northwest Texas	0.00%	100.00%	7.50%	59.80%	63.10%	5.20%	26.00%
	Metroplex	100.00%	100.00%	99.90%	99.90%	99.90%	99.90%	99.80%
	Upper East Texas	99.90%	100.00%	35.90%	99.90%	99.90%	20.40%	67.80%
	Southeast Texas	97.40%	100.00%	60.70%	100.00%	100.00%	66.30%	55.30%
	Gulf Coast	99.90%	100.00%	99.90%	100.00%	99.90%	100.00%	99.90%
	Central Texas	99.80%	100.00%	95.30%	99.90%	99.60%	99.00%	40.40%
	Upper South Texas	99.90%	99.90%	95.20%	92.10%	88.20%	90.10%	90.80%
	West Texas	0.00%	99.40%	0.10%	22.40%	73.40%	0.10%	0.00%
	Upper Rio Grande	99.70%	15.10%	98.30%	98.30%	98.30%	98.30%	0.00%
	Lower South Texas	99.80%	0.00%	85.40%	100.00%	100.00%	68.80%	85.80%
MCNA	High Plains	100.00%	99.74%	46.80%	95.13%	95.59%	0.00%	0.00%
	Northwest Texas	99.99%	99.59%	0.00%	98.95%	68.63%	0.00%	0.00%
	Metroplex	100.00%	99.99%	100.00%	100.00%	100.00%	100.00%	0.00%
	Upper East Texas	99.95%	99.62%	0.00%	99.79%	99.79%	0.00%	0.00%
	Southeast Texas	98.82%	99.55%	99.04%	99.06%	88.14%	75.28%	0.00%
	Gulf Coast	99.99%	100.00%	99.99%	99.99%	99.99%	99.99%	99.86%
	Central Texas	100.00%	99.50%	99.64%	99.92%	99.74%	99.83%	81.65%
	Upper South Texas	100.00%	99.84%	94.61%	97.13%	94.64%	90.34%	86.51%
	West Texas	100.00%	97.40%	0.00%	0.00%	83.90%	0.00%	0.00%
	Upper Rio Grande	99.96%	100.00%	98.23%	98.23%	98.23%	98.23%	0.00%
	Lower South Texas	100.00%	99.92%	99.99%	99.99%	99.99%	99.99%	0.00%

EB 744 (Q) CMS NARRATIVE SUMMARY



Helping Government Serve the People.®



April 2016 – June 2016 (CMS 2nd Calendar Quarter)

1.1.1 Operations

Enrollment Broker Medicaid Managed Care STAR and STAR+PLUS Programs reported an average of 3,401,480 unduplicated enrollments for the months of April, May, and June 2016 for May 1st, June 1st, and July 1st effective dates. Enrollment is trending within normal and seasonal fluctuations.

The Dental Program reported an average of 2,876,309 total enrollments in April, May, and June 2016 for May 1st, June 1st, and July 1st effective dates.

In April, the English Call Center queues had an AB Rate of 3.3% and an ASA of 42 seconds – meeting both performance requirements. The Spanish Call Center queues had an AB Rate of 2.6% and an ASA of 50 seconds in April, also meeting both performance requirements. The AB Rate and ASA performance standards were also met for May: the English Call Center queues had an AB Rate of 2.8% and an ASA of 36 seconds while the Spanish Call Center queues had an AB Rate of 2.3% and an ASA of 44 seconds. Finally, in June, the English Call Center queues had an AB Rate of 1.5% and an ASA of 17 seconds – meeting both performance requirements. The Spanish Call Center queues had an AB Rate of 1.2% and an ASA of 22 seconds in June, also meeting both performance requirements.

The Call Center Quality Assurance rate for the March 2016 QA sample results reported in May is 100% for EB KPR 47 and 96.4% for EB KPR 50. The Call Center Quality Assurance rate for the April 2016 QA sample results reported in June is 100% for EB KPR 47 and 97.1% for EB KPR 50. The Call Center Quality Assurance rate for the May 2016 QA sample results reported in July is 100% for EB KPR 47 and 97.3% for EB KPR 50.

The Enrollment Broker Mail House continued its efforts throughout the quarter to inform Managed Care recipients about their medical and dental enrollment options in Managed Care areas. The Enrollment Broker Mail House mailed out 323,141 enrollment mailings for the Medicaid Managed Care Program and 201,887 enrollment mailings for the Dental Program.

Throughout the quarter, outreach staff members completed a total of 20,619 home visit attempts for the Enrollment Broker Medicaid Managed Care Program. Outreach staff also completed 150,849 phone call attempts this quarter. In addition, field staff members completed a total of 6,891 field events for the Medicaid Managed Care Program in the second quarter. Field events include enrollment events, community contacts, presentations, and health fairs.

1.1.1.1 Mail Summary

Monthly Ongoing Mailings					
Mail Type	Apr-16	May-16	Jun-16	Quarterly Totals	Average per Month
Mandatory Medical Enrollment Kits/Requests (STAR, STAR+PLUS, SNS, NS, & TP40's)	95,989	92,050	95,092	283,131	94,377
STAR & STAR+PLUS Voluntary Letters	23,840	7,835	8,335	40,010	13,337
Mandatory Dental Enrollment Kits/Requests	67,293	65,896	68,698	201,887	67,296

(Table 1.1.1.1A) Mail Summary: The table shows the total and average volumes mailed during the quarter.

1.1.1.2 Field Operations Summary

Throughout the quarter, outreach staff members completed a total of 20,619 home visit attempts for the Enrollment Broker Medicaid Managed Care Program. Outreach staff also completed 150,849 phone call attempts this quarter. In addition, field staff members completed a total of 6,891 field events for the Medicaid Managed Care Program in the second quarter. Field events include enrollment events, community contacts, presentations, and health fairs.

Outreach Activities					
Task	Apr-16	May-16	Jun-16	Quarterly Totals	Avg Per Month
MMC Phone Calls	47,782	51,949	51,118	150,849	50,283
MMC Home Visits	6,667	7,563	6,389	20,619	6,873
*Enrollments processed	14,009	14,757	15,903	44,669	14,890
Plan Changes processed	841	835	838	2,514	838
MMC Enrollment Events	410	302	244	956	319
MMC Presentations (non-enrollment event)	79	59	72	210	70
MMC Community Meetings (non-enrollment event)	2,032	1,843	1,791	5,666	1,889
MMC Health Fairs (non-enrollment event)	23	19	17	59	20

(Table 1.1.1.2A) Outreach Activity: The table shows the Outreach activity for the quarter.

*These totals reflect the number of enrollment actions performed by field outreach.

1.1.1.3 Enrollments Summary

Tables 1.1.1.3A, 1.1.1.3B, 1.1.1.3C, and 1.1.1.3D give an overview of the enrollment activity in the Enrollment Broker Medicaid Managed Care and Dental Programs reported for the months of April, May, and June 2016 for May 1st, June 1st, and July 1st effective dates. This quarter, the STAR and STAR+PLUS Programs reported an average of 3,401,480 unduplicated enrollments per month.

The Dental Program reported an average of 2,876,309 total enrollments in April, May, and June 2016 for May 1st, June 1st, and July 1st effective dates.

Total Unduplicated Enrollments by Program			
State Cutoff Month	STAR	STAR + PLUS	Total Unduplicated Enrollments
Apr-16	2,839,454	537,512	3,376,966
May-16	2,875,902	540,194	3,416,096
Jun-16	2,870,029	541,348	3,411,377
Average per Month	2,861,795	539,685	3,401,480

(Table 1.1.1.3A) Total Unduplicated Enrollments by Program.

Enrollment totals are reported from the monthly Confirmed Eligibles Report.

Total Unduplicated New Monthly Enrollments by Program			
State Cutoff Month	STAR	STAR + PLUS	Total Unduplicated New Monthly Enrollments
Apr-16	181,688	14,151	195,839
May-16	208,234	16,306	224,540
Jun-16	159,792	12,984	172,776
Average per Month	183,238	14,480	197,718

(Table 1.1.1.3B) Total Unduplicated New Monthly Enrollments by Program.

Enrollment totals are reported from the monthly Confirmed Eligibles Report.

Dental Enrollments		
State Cutoff Month	New Monthly Enrollment	Total Enrollment
Apr-16	178,365	2,857,550
May-16	201,405	2,889,460
Jun-16	159,613	2,881,917
Average per Month	179,794	2,876,309

(Table 1.1.1.3C) Dental Enrollments as reported from the monthly Confirmed Eligibles Report.

Total Voluntary Choice Enrollment Rate by Program						
State Cutoff Month	STAR Choice Enrollment	Default STAR	STAR+PLUS Choice Enrollment	Default STAR+PLUS	Dental Choice Enrollment	Default Dental
Apr-16	76.1%	23.9%	69.9%	30.1%	75.3%	24.7%
May-16	78.1%	21.9%	69.0%	31.0%	77.3%	22.7%
Jun-16	77.0%	23.0%	70.0%	30.0%	77.1%	22.9%
Average per Month	77.1%	22.9%	69.6%	30.4%	76.6%	23.4%

(Table 1.1.1.3D) The table above shows an overview of the voluntary choice rates and default rates for each Program by month for the current fiscal year. The enrollment totals are reported from the monthly Confirmed Eligibles Report.

1.1.2 Call Center

The section below summarizes the Call Center performance for all English and Spanish queues for the quarter. The Average Staff on Phones for April through June 2016 was 194.

English Call Center Production									
Month	Year	Forecast Calls	Calls Offered	Calls Handled	Sys Out Calls	Average Handle Time	Average Speed of Answer	Abandon	% Abandon
April	2016	160,245	145,186	140,113	231	530	42	4,842	3.3%
May	2016	155,925	137,699	133,790	110	535	36	3,798	2.8%
June	2016	159,898	139,044	136,913	112	528	17	2,018	1.5%
AVG		158,689	140,643	136,939	151	531	32	3,553	2.5%
Totals		476,068	421,929	410,816	453			10,658	
KPR							< 90		≤ 8%

(Table 1.1.2A) English Call Center Production.

Spanish Call Center Production									
Month	Year	Forecast Calls	Calls Offered	Calls Handled	Sys Out Calls	Average Handle Time	Average Speed of Answer	Abandon	% Abandon
April	2016	53,722	48,674	47,305	119	598	50	1,250	2.6%
May	2016	49,758	43,942	42,855	77	603	44	1,010	2.3%
June	2016	49,981	43,463	42,871	86	603	22	506	1.2%
AVG		51,154	45,360	44,344	94	601	39	922	2.0%
Totals		153,461	136,079	133,031	282			2,766	
KPR							< 90		≤ 8%

(Table 1.1.2B) Spanish Call Center Production.

Attachment M
Combined Member Hotline Performance
STAR, STAR+PLUS and CHIP (2016 SFQ3)

	Member Hotline Performance								
MCO	SF2016 Q2 Total Calls	2016 SFQ3-- Total Calls2	2016 SFQ2 to 2016 SFQ3 -- Net Change	2016 SFQ2 to 2016 SFQ3 -- % Inc. or Dec.	2016 SFQ3 -- % Answered by 4th Ring (99%)	2016 SFQ3 -- % Busy Signal Rate (≤1%)	2016 SFQ3 -- % Answered by Live Person (80% w/in 30 Seconds)	2016 SFQ3 -- % Calls Abandoned (≤7%)	2016 SFQ3 -- Avg. Hold Time (≤2 Minutes)
Aetna	33,807	36,872	3,065	9.07%	100.00%	0.09%	95.71%	2.01%	0:00:08
Amerigroup	126,495	132,023	5,528	4.37%	100.00%	0.00%	90.03%	0.91%	0:00:14
BCBS TX	7,206	6,738	-468	-6.49%	100.00%	0.00%	85.13%	1.70%	0:00:15
CHC	42,687	42,113	-574	-1.34%	100.00%	0.03%	96.40%	0.74%	0:00:00
Christus	3,933	3,243	-690	-17.54%	100.00%	0.00%	90.12%	1.84%	0:00:10
Cigna-HealthSpring	28,395	27,097	-1,298	-4.57%	100.00%	0.00%	90.14%	1.47%	0:00:16
Community 1st	25,521	24,501	-1,020	-4.00%	100.00%	0.00%	90.48%	3.10%	0:00:11
Cook	11,722	12,397	675	5.76%	100.00%	0.00%	96.25%	3.47%	0:00:22
Driscoll	23,877	24,220	343	1.44%	99.89%	0.00%	71.91%	4.86%	0:00:25
El Paso 1st	12,259	8,429	-3,830	-31.24%	100.00%	0.00%	100.00%	0.51%	0:00:10
FirstCare	11,462	13,354	1,892	16.51%	100.00%	0.00%	92.82%	0.45%	0:00:16
Molina	104,037	91,337	-12,700	-12.21%	100.00%	0.00%	99.53%	0.21%	0:00:02
Parkland	42,178	41,510	-668	-1.58%	100.00%	0.07%	95.98%	1.19%	0:00:07
Scott & White	13,414	13,035	-379	-2.83%	100.00%	0.00%	70.35%	6.06%	0:00:59
Sendero	5,167	4,502	-665	-12.87%	100.00%	0.00%	70.81%	6.15%	0:01:46
Seton	10,632	7,979	-2,653	-24.95%	100.00%	0.04%	86.41%	1.55%	0:01:09
Superior	169,167	175,737	6,570	3.88%	100.00%	0.00%	92.84%	0.56%	0:00:10
Texas Children's	44,245	26,745	-17,500	-39.55%	92.18%	0.00%	92.18%	0.66%	0:00:09
United	87,116	88,512	1,396	1.60%	100.00%	0.00%	98.04%	0.34%	0:00:31
Total	803,320	780,344	-22,976	-2.86%					

Attachment M
Combined Provider Hotline Report
STAR, STAR+PLUS and CHIP (2016 SFQ2)

	Provider Hotline Performance							
MCO	2016 SFQ2 -- Total Calls	2016 SFQ3 -- Total Calls2	2016 SFQ2 to 2016 SFQ3 -- Net Change	2016 SFQ2 to 2016 SFQ3 -- % Inc. or Dec.	2016 SFQ3-- % Answered by 4th Ring (99%)	2016 SFQ3-- % Busy Signal Rate (≤1%)	2016 SFQ3-- % Calls Abandoned (≤7%)	2016 SFQ3-- Avg. Hold Time (≤2 Minutes)
Aetna	3218	10150	6,932	215.41%	100.00%	0.10%	0.70%	0:00:46
Amerigroup	102186	11984	-90,202	-88.27%	100.00%	0.00%	1.34%	0:00:25
BCBS TX	11232	12694	1,462	13.02%	100.00%	0.00%	2.29%	0:00:15
CHC	10937	13949	3,012	27.54%	97.69%	0.00%	2.24%	0:00:01
Christus	2242	2755	513	22.88%	100.00%	0.00%	1.94%	0:00:20
Cigna-HealthSpring	29462	27824	-1,638	-5.56%	100.00%	0.00%	3.20%	0:00:43
Community 1st	8579	8975	396	4.62%	100.00%	0.00%	1.12%	0:00:14
Cook	16849	17202	353	2.10%	100.00%	0.00%	2.37%	0:00:13
Driscoll	40447	39867	-580	-1.43%	100.00%	0.00%	2.31%	0:00:33
El Paso 1st	21559	15592	-5,967	-27.68%	100.00%	0.00%	0.55%	0:00:07
FirstCare	16062	17119	1,057	6.58%	100.00%	0.00%	0.32%	0:00:19
Molina	84362	87437	3,075	3.65%	100.00%	0.00%	0.66%	0:00:10
Parkland	11900	12649	749	6.29%	100.00%	0.07%	0.77%	0:00:43
Scott & White	27466	44052	16,586	60.39%	100.00%	0.00%	1.32%	0:00:44
Sendero	6193	4909	-1,284	-20.73%	100.00%	0.00%	5.23%	0:02:41
Seton	10735	6274	-4,461	-41.56%	100.00%	0.00%	1.55%	0:00:35
Superior	94717	96034	1,317	1.39%	100.00%	0.00%	4.14%	0:01:42
Texas Children's	13342	12709	-633	-4.74%	100.00%	0.00%	1.53%	0:00:14
United	98449	117581	19,132	19.43%	100.00%	0.00%	1.46%	0:00:21
Total	609,937	559,756	-50,181	-8.23%				

Attachment M
Combined Behavioral Health Crisis Hotline Performance
STAR, STAR+PLUS and CHIP (2016 SFQ2)

	Behavioral Health Hotline Performance								
Health Care MCO	2016 SFQ2 -- Total Calls	2016 SFQ3 - Total Calls2	2016 SFQ2 to 2016 SFQ3 -- Net Change	2016 SFQ2 to 2016 SFQ3 -- % Inc. or Dec.	2016 SFQ3 -- % Answered by 4th Ring (99%)	2016 SFQ3 -- % Busy Signal Rate (≤1%)	2016 SFQ3-- % Answered by Live Person (80% w/in 30 Seconds)	2016 SFQ3 -- % Calls Abandoned (≤7%)	2016 SFQ3 -- Avg. Hold Time (≤2 Minutes)
Aetna	263	547	284	107.98%	100.00%	0.00%	95.00%	3.61%	0:00:05
Amerigroup	1400	1336	-64	-4.57%	100.00%	0.00%	100.00%	0.24%	0:00:02
BCBS TX	298	116	-182	-61.07%	100.00%	0.00%	96.97%	0.00%	0:00:03
CHC	877	1192	315	35.92%	100.00%	1.01%	71.39%	2.53%	0:01:25
Christus	71	78	7	9.86%	100.00%	0.00%	100.00%	0.00%	0:00:14
Cigna-HealthSpring	324	334	10	3.09%	100.00%	0.00%	92.74%	2.36%	0:00:03
Community 1st	420	330	-90	-21.43%	100.00%	0.00%	100.00%	0.00%	0:00:02
Cook	240	240	0	0.00%	100.00%	0.00%	79.10%	2.90%	0:00:25
Driscoll	41	26	-15	-36.59%	100.00%	0.00%	100.00%	0.00%	0:00:04
El Paso 1st	66	46	-20	-30.30%	100.00%	0.00%	100.00%	0.00%	0:00:04
FirstCare	91	466	375	412.09%	100.00%	0.00%	79.48%	5.64%	0:00:26
Molina	33	33	0	0.00%	100.00%	0.00%	100.00%	0.00%	0:00:06
Parkland	NA	NA	#VALUE!	#VALUE!	NA	NA	NA	NA	NA
Scott & White	56	19	-37	-66.07%	100.00%	0.00%	83.33%	0.00%	0:00:10
Sendero	36	47	11	30.56%	100.00%	0.00%	83.33%	0.00%	0:00:00
Seton	148	79	-69	-46.62%	100.00%	0.00%	64.29%	0.00%	0:00:25
Superior	3930	4638	708	18.02%	100.00%	0.00%	98.75%	0.13%	0:00:17
Texas Children's	703	776	73	10.38%	100.00%	0.00%	100.00%	2.43%	0:00:12
United	925	841	-84	-9.08%	100.00%	0.00%	80.66%	1.22%	0:00:13
Total	9,922	11,144	1,222	12.32%					

*NA denotes no calls for that category

Attachment M
Consolidated Children's CHIP and Medicaid Dental (2016 SFQ3)

Member Hotline Performance

DMO	2016 SFQ2-- Total Calls	2016 SFQ3 -- Total Calls2	2016 SFQ2 to 2016 SFQ3 -- Net Change	2016 SFQ2 to 2016 SFQ3 -- % Inc. or Dec.	2016 SFQ3 -- % Answered by 4th Ring (99%)	2016 SFQ3 -- % Busy Signal Rate (≤1%)	2016 SFQ3-- % Answered by Live Person (80% w/in 30 Seconds)	2016 SFQ3-- % Calls Abandoned (≤7%)	2016 SFQ3 -- Avg. Hold Time (≤2 Minutes)
DentaQuest	113701	122,194	8,493	7.47%	100.00%	0.00%	89.99%	1.09%	0:00:17
MCNA	134414	131,857	-2,557	-1.90%	100.00%	0.00%	99.96%	0.03%	0:00:00
Total	248,115	254,051	5,936	2.39%					

Provider Hotline Performance

DMO	2016 SFQ2 -- Total Calls	2016 SFQ3 -- Total Calls2	2016 SFQ2 to 2016 SFQ3-- Net Change	2016 SFQ2 to 2016 SFQ3 -- % Inc. or Dec.	2016 SFQ3 -- % Answered by 4th Ring (99%)	2016 SFQ3 -- % Busy Signal Rate (≤1%)	2016 SFQ3 -- % Calls Abandoned (≤7%)	2016 SFQ3-- Avg. Hold Time (≤2 Minutes)
DentaQuest	77,909	82,162	4,253	4,253	100.00%	0.00%	2.60%	0:00:53
MCNA	23,874	23,906	32	32	100.00%	0.00%	0.04%	0:00:00
Total	101,783	106,068	4,285	4.21%				

Attachment N
MCO Complaints and Appeals (2016 SFQ3)

			Member Complaint			Member Appeal			Provider Complaint		
Program	MCO	SDA	Complaint Count	Pended	Resolved w/in 30 days	Complaint Count	Pended	Resolved w/in 30 days	Complaint Count	Pended	Resolved w/in 30 days
Dental	DentaQuest	Statewide	88	9	100.00%	166	27	96.88%	12	0	100.00%
	MCNA	Statewide	63	0	100.00%	48	7	100.00%	23	0	100.00%
STAR+PLUS	Amerigroup	Bexar	28	3	100.00%	20	2	100.00%	3	0	100.00%
		El Paso	12	0	100.00%	9	0	100.00%	4	0	100.00%
		Harris	93	0	100.00%	46	5	100.00%	6	0	100.00%
		Jefferson	12	0	100.00%	10	1	100.00%	2	0	100.00%
		Lubbock	4	1	100.00%	9	1	100.00%	3	0	100.00%
		MRSA West	71	2	100.00%	17	2	100.00%	3	0	100.00%
		Tarrant	14	1	100.00%	82	3	100.00%	7	0	100.00%
		Travis	14	0	100.00%	29	0	100.00%	1	0	100.00%
	Cigna-HealthSpring	Hidalgo	50	9	100.00%	6	1	100.00%	194	69	99.20%
		MRSA NE	74	12	100.00%	28	10	100.00%	191	67	100.00%
		Tarrant	82	13	100.00%	15	2	100.00%	116	27	100.00%
	Molina	Bexar	9	0	100.00%	37	0	100.00%	1	0	100.00%
		Dallas	108	0	100.00%	155	0	100.00%	4	0	100.00%
		El Paso	18	0	100.00%	13	0	100.00%	0	0	N/A
		Harris	39	0	100.00%	61	0	100.00%	2	0	100.00%
		Hidalgo	19	0	100.00%	45	0	100.00%	0	0	N/A
		Jefferson	19	0	100.00%	26	0	100.00%	2	0	100.00%
	Superior	Bexar	110	1	100.00%	164	0	97.92%	21	0	100.00%
		Dallas	90	0	95.56%	118	0	100.00%	25	0	92.00%
		Hidalgo	50	0	96.00%	149	0	99.31%	18	0	100.00%
		Lubbock	12	0	91.67%	44	0	100.00%	5	0	100.00%
		MRSA Central	34	0	100.00%	85	0	100.00%	9	0	100.00%
		MRSA West	28	0	100.00%	91	0	100.00%	4	0	100.00%
		Nueces	23	0	100.00%	64	0	98.08%	12	0	100.00%
	United	Harris	54	15	97.44%	104	19	90.20%	0	0	N/A
		Jefferson	14	5	100.00%	11	1	100.00%	0	0	N/A
		MRSA Central	11	4	100.00%	37	2	87.88%	0	0	N/A
		MRSA NE	14	1	100.00%	34	2	88.89%	0	0	N/A
		Nueces	14	5	100.00%	15	1	85.71%	0	0	N/A
		Travis	25	8	100.00%	33	3	84.21%	0	0	N/A
STAR	Aetna	Bexar	34	10	100.00%	38	3	97.14%	0	0	N/A
		Tarrant	65	5	100.00%	45	13	100.00%	0	0	N/A
	Amerigroup	Bexar	2	0	100.00%	2	0	100.00%	8	0	100.00%
		Dallas	41	0	100.00%	41	3	100.00%	2	0	100.00%
		Harris	21	0	100.00%	32	0	100.00%	1	0	100.00%

Attachment N
MCO Complaints and Appeals (2016 SFQ3)

			Member Complaint			Member Appeal			Provider Complaint		
Program	MCO	SDA	Complaint Count	Pended	Resolved w/in 30 days	Complaint Count	Pended	Resolved w/in 30 days	Complaint Count	Pended	Resolved w/in 30 days
		Jefferson	2	0	100.00%	0	0	N/A	1	0	100.00%
		Lubbock	1	0	100.00%	2	0	100.00%	3	0	100.00%
		MRAS WEST	5	0	100.00%	4	0	100.00%	1	0	100.00%
		MRSA Central	4	0	100.00%	25	3	100.00%	2	0	100.00%
		MRSA NE	3	0	100.00%	12	0	100.00%	6	0	100.00%
		Tarrant	30	0	100.00%	32	1	100.00%	1	0	100.00%
	BCBS TX	Travis	4	0	100.00%	25	0	93.75%	0	0	N/A
	CHC	Harris	35	0	100.00%	26	0	100.00%	0	0	N/A
		Jefferson	2	0	100.00%	2	0	100.00%	0	0	N/A
	Christus	Nueces	0	0	N/A	0	0	N/A	0	0	N/A
	Community 1st	Bexar	13	0	100.00%	12	2	100.00%	3	0	100.00%
	Cook	Tarrant	8	0	100.00%	10	0	100.00%	0	0	N/A
	Driscoll	Hidalgo	21	0	100.00%	6	0	100.00%	2	0	100.00%
		Nueces	22	0	100.00%	10	0	100.00%	7	0	100.00%
	El Paso 1st	El Paso	12	2	100.00%	0	0	N/A	0	0	N/A
	First Care	Lubbock	10	0	100.00%	7	0	100.00%	5	0	100.00%
		MRSA West	14	0	100.00%	13	0	100.00%	3	0	100.00%
	Molina	Dallas	16	0	100.00%	29	0	100.00%	2	0	100.00%
		El Paso	1	0	100.00%	5	0	100.00%	0	0	N/A
		Harris	10	0	100.00%	20	0	100.00%	0	0	N/A
		Hidalgo	14	0	100.00%	69	0	100.00%	0	0	N/A
		Jefferson	1	0	100.00%	1	0	100.00%	1	0	100.00%
	Parkland	Dallas	18	2	100.00%	136	32	99.20%	5	1	100.00%
	Scott & White	MRSA Central	11	1	100.00%	0	0	N/A	5	1	100.00%
	Sendero	Travis	6	0	100.00%	0	0	N/A	0	0	N/A
	Seton	Travis	1	0	100.00%	5	0	100.00%	0	0	N/A
	Superior	Bexar	62	0	100.00%	168	0	98.10%	24	0	95.83%
		El Paso	35	0	100.00%	48	0	96.77%	4	0	100.00%
		Hidalgo	55	0	100.00%	222	0	99.55%	29	0	100.00%
		Lubbock	13	0	100.00%	29	0	100.00%	6	0	100.00%
		MRSA Central	27	0	100.00%	91	0	100.00%	8	0	100.00%
		MRSA NE	48	0	100.00%	109	0	100.00%	12	0	100.00%
		MRSA West	28	0	100.00%	76	0	100.00%	6	0	100.00%
		Travis	15	0	100.00%	38	0	100.00%	9	0	100.00%
		Nueces	43	0	100.00%	205	0	98.40%	7	0	100.00%
	Texas Children's	Harris	10	0	100.00%	35	0	100.00%	13	0	100.00%
		Jefferson	0	0	N/A	12	0	100.00%	9	0	100.00%

Attachment N
MCO Complaints and Appeals (2016 SFQ3)

			Member Complaint			Member Appeal			Provider Complaint		
Program	MCO	SDA	Complaint Count	Pended	Resolved w/in 30 days	Complaint Count	Pended	Resolved w/in 30 days	Complaint Count	Pended	Resolved w/in 30 days
	United	Harris	26	8	100.00%	17	3	100.00%	0	0	N/A
		Hidalgo	10	0	100.00%	14	2	100.00%	0	0	N/A
		Jefferson	5	1	100.00%	4	1	100.00%	0	0	N/A

Attachment O
Complaints to HHSC (2016 SFQ2)

Quarter	16Q3
---------	------

Program / MCO	Disenroll	MMCH Member Complaints	Legislative Complaints	HPM Member Complaints	HPM Provider Complaints
Dental		33	1	44	24
DentaQuest		15		14	12
MCNA		18	1	30	12
STAR	13	296	12	67	251
Aetna		15		1	15
BCBS		1		3	11
Christus					1
FirstCare		4		1	12
Scott & White		8	1	1	3
Sendero		2	1		5
Community Health Choice		15	1	1	11
El Paso First Premier		5		2	3
Community First	1	14	1	1	7
UnitedHealthcare		17		5	14
Seton Health Plan		1	1	4	
Amerigroup Texas, Inc.	5	49		14	56
Molina Healthcare of Texas	1	9		2	11
Parkland Community Health Plan	1	8		7	18
Texas Childrens Health Plan	1	36	2	4	9
Superior Health Plan	2	78	4	14	64
Cook Children's	2	25		3	7
Driscoll Children's Health Plan		9	1	4	4
STAR+PLUS	19	327	39	139	328
Cigna-HealthSpring	1	52	4	20	110
UnitedHealthcare	2	58	5	27	47
Amerigroup Texas, Inc.	5	65	12	24	73
Molina Healthcare of Texas	5	54	7	20	30
Superior Health Plan	6	98	11	48	68