

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

Texas Health and Human Services Commission

Demonstration Reporting Period:

2017 State Fiscal Quarter 2, December 2016 - February 2017

Demonstration Year (DY) 6 Quarter 2, January 2017 - March 2017

TABLE OF CONTENTS

I. Introduction	4
A. MANAGED CARE Plans Participating in the Waiver Program	4
B. Monitoring Managed Care Plans	4
II. Enrollment and Benefits Information.....	5
A. Eligibility and Enrollment.....	5
B. Enrollment Counts for the Quarter by Population	17
C. DISENROLLMENT	17
D. ENROLLMENT OF MEMBERS WITH SPECIAL HEALTH CARE NEEDS.....	18
E. Medicaid Eligibility Changes	22
F. Anticipated Changes in Populations or Benefits	22
III. Delivery Networks and Access.....	22
A. Provider Networks	23
B. GeoAccess.....	24
C. Out-of-Network Utilization	27
IV. Outreach/Innovative Activities to Assure Access	30
A. Enrollment Broker and Plan Activities	30
B. Medicaid Managed Care Advisory Committee	31
D. Public Forum	31
E. Independent Consumer Supports System Plan	32
F. HHSC Managed Care Initiatives	33
V. Collection and Verification of Encounter Data and Enrollment Data.	35
VI. Operational/Policy/Systems/Fiscal Developments/Issues	35
A. Claims Summary.....	35
VII. Action Plans for Addressing Any Issues Identified	36
VIII. Consumer Issues	36
December 12, 2011 - December 31, 2017	2

A. Hotline Call Volume and Performance.....	37
B. Complaints and Appeals Received by Plans.....	39
C. Complaints Received by the State	47
IX. QUALITY Assurance/Monitoring Activity	49
A. DY6Q2 Quarter 2 Update	49
Enclosures/Attachments.....	51
State Contacts.....	53
Acronym list.....	54

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, STAR+PLUS, and STAR Kids programs, as well as Children's Medicaid Dental Services (Dental Program), which are found in the waiver's Special Terms and Conditions (STCs), items 14, 21, 23, 25(e), 40(a) and (b), 41(b) and (c), and 70. These STCs require the State to report on various topics, including: enrollments; 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 2017 SFQ2 (December 2016 - February 2017) instead of Demonstration Year (DY) 6, Q2 ("2017 DY6," covering January 2017 - March, 2017). Throughout the report, the State has identified whether the quarterly data relates to 2017 SFQ2 or 2017 DY6Q2.

A. MANAGED CARE PLANS PARTICIPATING IN THE WAIVER PROGRAM

During the 2017 SFQ2, the State contracted with 18 STAR, 5 STAR+PLUS, 10 STAR Kids and 2 Dental program plans. Each health plan covers one or more of the 13 service delivery areas (SDAs), for the STAR, STAR+PLUS, and STAR Kids programs while each dental plan provides statewide services. Please refer to Attachment A for a list of the STAR, STAR+PLUS, STAR Kids and Dental plans by area.

B. MONITORING MANAGED CARE PLANS

The Health and Human Services Commission (HHSC) staff evaluates and routinely monitors managed care organizations (MCOs) and dental maintenance organizations (DMOs) performance reported by the MCOs and DMOs and compiled by HHSC. If an MCO or DMO

December 12, 2011 - December 31, 2017

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 (LDs)),
- Corrective action plans (CAPs).

The information reflected in this document represents the most current information available at the time that it was compiled. 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 25(e), 40(a) and 70 including quarterly trends and issues related to STAR, STAR+PLUS, STAR Kids, 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 2017 SFQ2 reporting period (December 2016 - February 2017) instead of 2017 DY2 (January 2017 - March 2017). Supporting data are located in Attachment B.

A. ELIGIBILITY AND ENROLLMENT

This subsection addresses the quarterly reporting requirements found in STC 25(e) and 70. Attachment B includes enrollment summaries for the four 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, STAR Kids and Dental, increased by .13% from 2017 SFQ1 to SFQ2.

1. STAR

The number of members enrolled in STAR plans decreased by -.24% from 2,916,671 in 2017 SFQ1 to 2,909,684 in 2017 SFQ2. Across the STAR program, the 11 MCOs reporting a decrease experienced changes of less than 4% from SFQ1 to SFQ2 shown in the following tables. During 2017 SFQ2, the majority of the MCOs and SDAs reported slightly decreased enrollment. The largest decline in member enrollments were reported for Christus at -2.96% and for the El Paso SDA at -1.3 %. In contrast, eight MCOs reported increased membership. Scott

and White experienced an enrollment percentage change of 4.19 % making it the MCO with the highest increase in enrollment for SFQ2.

Enrollment by STAR MCO (2017 SFQ1- 2017 SFQ2)

Row Labels	Sum of 17Q1 Enroll	Sum of 17Q2 Enroll	Total Change	Percent Change from SFQ1 2017 to SFQ2 2017
Statewide	2,916,671	2,909,684	-6,987	-0.24%
Aetna	70,809	70,725	-84	-0.12%
Amerigroup	569,348	562,190	-7,158	-1.26%
BCBS	24,301	24,927	626	2.58%
CHC	241,810	240,431	-1,379	-0.57%
Christus	5,576	5,411	-165	-2.96%
Community 1st	105,857	104,105	-1,752	-1.66%
Cook Children's	100,881	101,259	378	0.37%
Driscoll	146,029	147,448	1,419	0.97%
El Paso 1st	66,394	65,167	-1,227	-1.85%
FirstCare	92,724	90,579	-2,145	-2.31%
Molina	97,963	96,562	-1,401	-1.43%
Parkland	166,708	164,592	-2,116	-1.27%
Scott & White	42,274	44,301	2,027	4.79%
Sendero	13,138	13,402	264	2.01%
Seton	18,225	17,982	-243	-1.33%
Superior	698,927	699,456	529	0.08%
Texas Children's	335,434	335,836	402	0.12%
United	120,273	125,311	5,038	4.19%

STAR Enrollment by SDA (2017 SFQ1– 2017 SFQ2)

Row Labels	Sum of 17Q1 Enroll	Sum of 17Q2 Enroll	Total Change	Percent Change from SFQ1 2017 to SFQ2 2017
Statewide	2,916,671	2,909,684	2,916,671	2,909,684
Bexar	246,517	245,397	-1,120	-0.45%
Dallas	394,829	390,042	-4,787	-1.21%
El Paso	123,265	121,660	-1,605	-1.30%
Harris	694,229	693,728	-501	-0.07%
Hidalgo	354,101	353,857	-244	-0.07%
Jefferson	75,032	75,083	51	0.07%
Lubbock	75,609	75,033	-576	-0.76%
MRSA Central	129,871	132,616	2,745	2.11%
MRSA Northeast	168,649	169,349	700	0.42%
MRSA West	156,718	156,326	-392	-0.25%

Nueces	87,159	87,648	489	0.56%
Tarrant	266,744	265,609	-1,135	-0.43%
Travis	143,948	143,336	-612	-0.43%

Market Share by STAR MCO (2016 -2017)

The STAR market share distribution by MCOs fluctuated slightly from the prior quarter. Amerigroup's percentage point change of -.20% was the largest change among MCOs between 2017 SFQ1 to 2017 SFQ2.

STAR	2016 Q3	2016 Q4	2017 Q1	2017 Q2	Percentage Point Change from SFQ1 2017 to SFQ2 2017
Aetna	2.46%	2.45%	2.43%	2.43%	0.00%
Amerigroup	19.40%	19.42%	19.52%	19.32%	-0.20%
BCBS	0.85%	0.84%	0.83%	0.86%	0.02%
CHC	8.16%	8.23%	8.29%	8.26%	-0.03%
Christus	0.20%	0.20%	0.19%	0.19%	0.00%
Community 1st	3.73%	3.69%	3.63%	3.58%	-0.05%
Cook Children's	3.41%	3.43%	3.46%	3.48%	0.02%
Driscoll	4.88%	4.97%	5.01%	5.07%	0.06%
El Paso 1st	2.32%	2.39%	2.28%	2.24%	-0.04%
FirstCare	3.27%	3.28%	3.18%	3.11%	-0.07%
Molina	3.44%	3.41%	3.36%	3.32%	-0.04%
Parkland	5.85%	5.78%	5.72%	5.66%	-0.06%
Scott & White	1.49%	1.51%	1.45%	1.52%	0.07%
Sendero	0.44%	0.45%	0.45%	0.46%	0.01%
Seton	0.62%	0.63%	0.62%	0.62%	0.00%
Superior	23.95%	23.97%	23.96%	24.04%	0.08%
Texas Children's	11.40%	11.64%	11.50%	11.54%	0.04%
United	4.13%	4.18%	4.12%	4.31%	0.19%

2. STAR+PLUS

The number of members enrolled in STAR+PLUS plans slightly decreased (by -2.05%) from 529,966 in 2017 SFQ1 to 519,105 in 2017 SFQ2. Most of the STAR+PLUS plans and service delivery areas reported decreases in enrollment. The exception was a small increase of .02% for MRSA Central.

Enrollment by STAR+PLUS SDA (2017 SFQ1– 2017 SFQ2)

STAR+PLUS	2017 Q1	2017 Q2	Total Change	Percentage Change
Statewide	529,966	519,105	-10,861	-2.05%
Bexar	46,286	44,681	-1,605	-3.47%
Dallas	62,454	60,713	-1,741	-2.79%
El Paso	21,060	20,080	-980	-4.65%
Harris	102,069	98,485	-3,584	-3.51%
Hidalgo	64,903	63,802	-1,101	-1.70%
Jefferson	19,799	19,733	-66	-0.33%
Lubbock	13,342	13,275	-67	-0.50%
MRSA Central	29,506	29,513	7	0.02%
MRSA Northeast	46,038	45,775	-263	-0.57%
MRSA West	37,781	37,482	-299	-0.79%
Nueces	21,447	21,353	-94	-0.44%
Tarrant	39,833	38,852	-981	-2.46%
Travis	25,448	25,361	-87	-0.34%

Enrollment by STAR+PLUS MCO (2017 SFQ1– 2017 SFQ2)

STAR+PLUS	Sum of 17Q1 Enroll	Sum of 17Q2 Enroll	Total Change	Percent Change from SFQ1 2017 to SFQ2 2017
Statewide	529,966	534,780	4814	0.91%
Amerigroup	136,182	131,953	-4229	-3.11%
Cigna-HealthSpring	50,324	50,294	-30	-0.06%
Molina	88,441	85,853	-2588	-2.93%
Superior	140,356	153,515	13159	9.38%
United	114,663	113,165	-1498	-1.31%

With the exception of Superior, the STAR+PLUS market share remained relatively stable with only slight changes from 2017 SFQ1 to 2017 SFQ2. Amerigroup and Cigna Health Spring market share increases of 1% were the larger shifts among the five STAR+PLUS MCO market shares in SFQ1 to SFQ2.

Market Share by STAR+PLUS MCO (2017 SFQ1– 2017 SFQ2)

S+P	2016 Q3	2016 Q4	2017Q1	2017Q2	Percentage Point Change from 2017 Q1 to 2017 Q2
Amerigroup	26%	26%	26%	25%	1%
Cigna-HealthSpring	9%	9%	9%	10%	1%
Molina	17%	17%	17%	17%	0%
Superior	27%	27%	26%	26%	0%
United	21%	21%	22%	22%	0%

3. Star Kids

The number of members enrolled in STAR Kids plans increased by 3.57% from 2017 SFQ1 (STAR Kids implemented November 1, 2016) to 2017 SFQ2 as service delivery areas and managed care organizations began providing services to participants. Among SDAs, the 30.86% increase in enrollment for El Paso SDA supported the overall increase in enrollment. There were 1,639 more members (49.19%), in the El Paso Superior plan in the second quarter of 2017 than in the first. Concerning MCO enrollment counts, out of the increase of 16.16%, United was the only MCO with an increase in enrollment above 10%. There were no decreases in enrollment of more than 4%.

Enrollment by STAR Kids SDA (2017 SFQ1– 2017 SFQ2)

Row Labels	Sum of 17Q1 Enroll	Sum of 17Q2 Enroll	Total Change	Percent Change from SFQ1 2017 to SFQ2 2017
Statewide	162,910	168,721	5,811	3.57%
Bexar	15,623	15,453	-170	-1.09%
Dallas	21,527	21,685	158	0.73%
El Paso	4,974	6,509	1,535	30.86%
Harris	36,926	36,994	68	0.18%
Hidalgo	22,618	22,420	-198	-0.88%
Jefferson	4,972	4,972	0	0.00%
Lubbock	3,240	3,237	-3	-0.09%
MRSA Central	8,641	8,702	61	0.71%
MRSA Northeast	10,987	10,953	-34	-0.31%
MRSA West	10,577	10,565	-12	-0.11%
Nueces	5,676	5,613	-63	-1.11%
Tarrant	13,920	14,094	174	1.25%
Travis	7,489	7,524	35	0.47%

Enrollment by STAR Kids MCO (2017 SFQ1– 2017 SFQ2)

Row Labels	Sum of 17Q1 Enroll	Sum of 17Q2 Enroll	Total Change	Percent Change from SFQ1 2017 to SFQ2 2017
Grand Total	162,910	168,721	5,811	3.57%
Aetna	5,497	5,366	-131	-2.38%
Amerigroup	32,559	31,952	-607	-1.86%
BCBS	8,021	7,924	-97	-1.21%
Community 1st	8,226	8,170	-56	-0.68%
Cook Children's	8,423	8,728	305	3.62%
Driscoll	11,054	10,728	-326	-2.95%
Superior	29,234	31,045	1,811	6.19%
Texas Children's	24,386	24,985	599	2.46%
United	25,910	30,098	4,188	16.16%
Children's Medical Center	9,600	9,725	125	1.30%

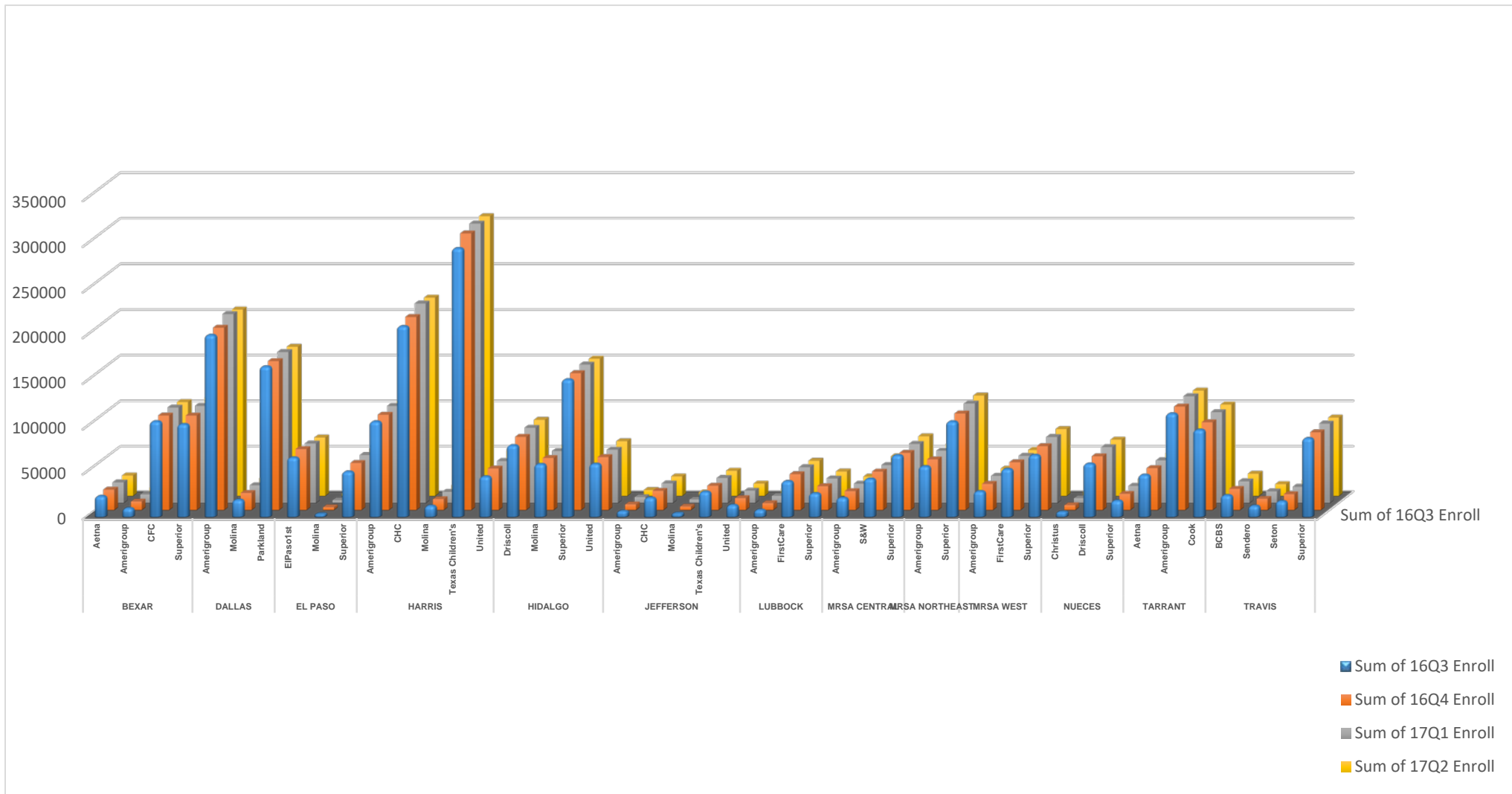
Market share differences per STAR Kids MCO between the first and second quarters of SF2017 did not exceed 2 percentages points. The Superior market share increase of 1.38% was the highest percentage point change of any MCO between SFQ1 and SFQ2 of 2017. Superior and United maintained the highest shares in both quarters while BCBS and Aetna maintained the lowest in both quarters.

Market share by STAR Kids MCO (2017 SFQ1– 2017 SFQ2)

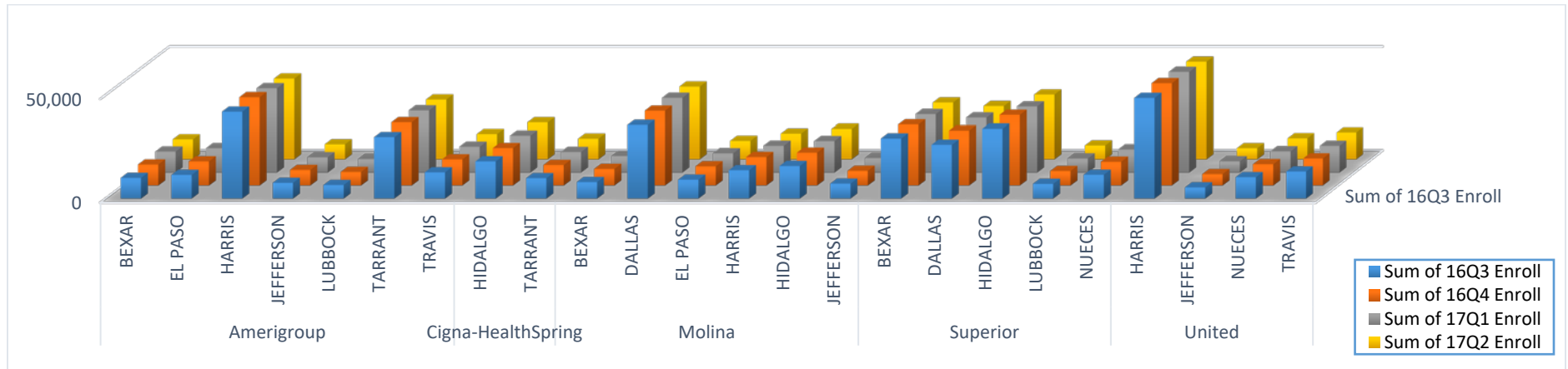
STAR Kids	2017Q1	2017Q2	Percentage Point Change from 2017 Q1 to 2017 Q2
Aetna	4.18%	4.08%	-0.10%
Amerigroup	9.06%	9.09%	0.03%
BCBS	3.25%	3.21%	-0.04%
Community 1st	6.25%	6.21%	-0.04%
Driscoll	8.40%	8.15%	-0.25%
Superior	22.22%	23.60%	1.38%
Texas Children's	16.41%	16.88%	0.47%
United	22.93%	22.88%	-0.05%
Children's Medical Center	7.30%	7.39%	0.09%

The two following graphs show STAR and STAR+PLUS quarterly enrollment by MCO and SDA from SF16Q3 to SF17Q2. The third graph shows STAR+PLUS quarterly enrollment in the MRSA SDAs by MCO since the program has been expanded to the MRSA SDAs. The fourth graph shows program enrollment by MCO and SDA from SFQ1 to SFQ2.

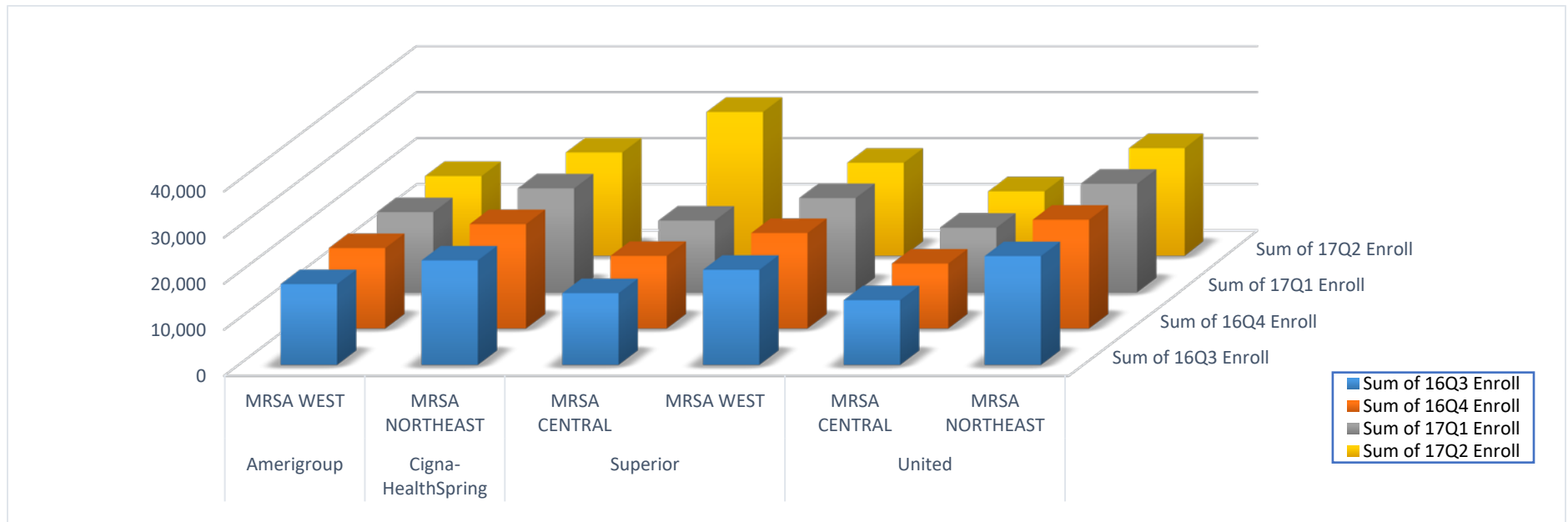
STAR Program Enrollment by MCO and Service Delivery Area (2016 SFQ3-2017 SFQ2)



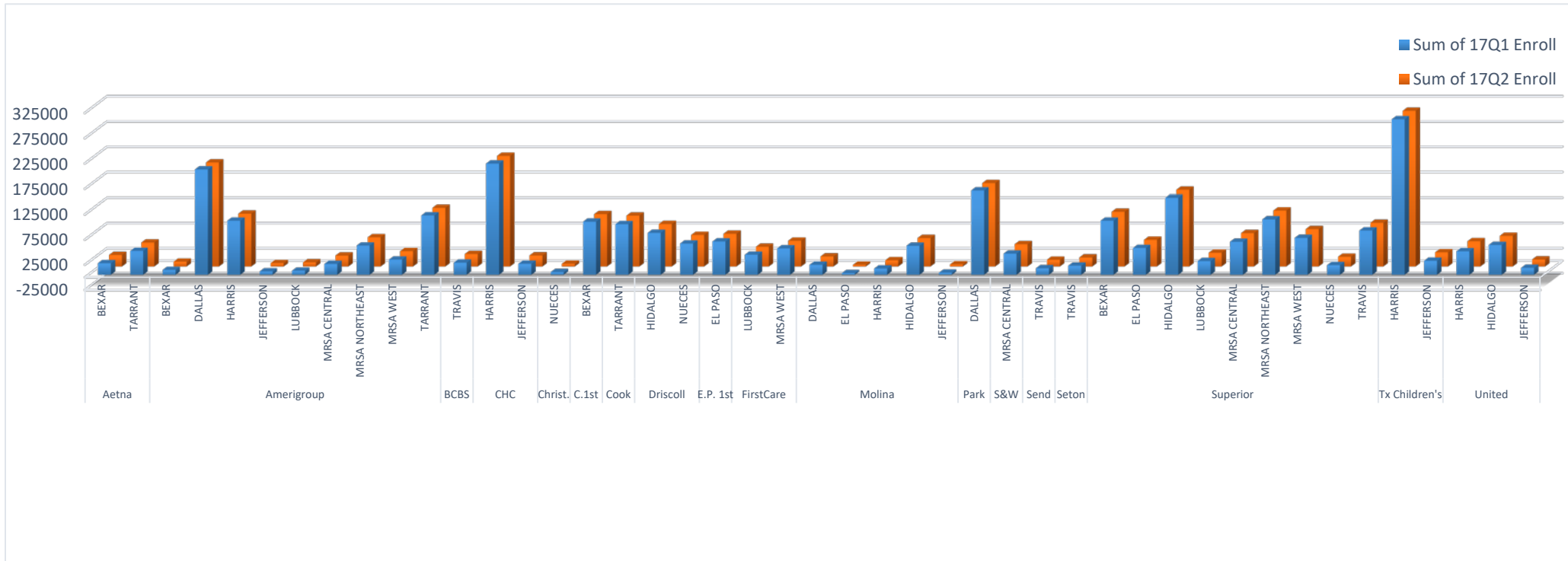
STAR+PLUS Non-MRSA Program Enrollment by MCO and Service Delivery Area (2016 SFQ3-2017 SFQ2)



STAR+PLUS MRSA Program Enrollment by MCO and Service Delivery Area (2016 SFQ3-2017 SFQ2)



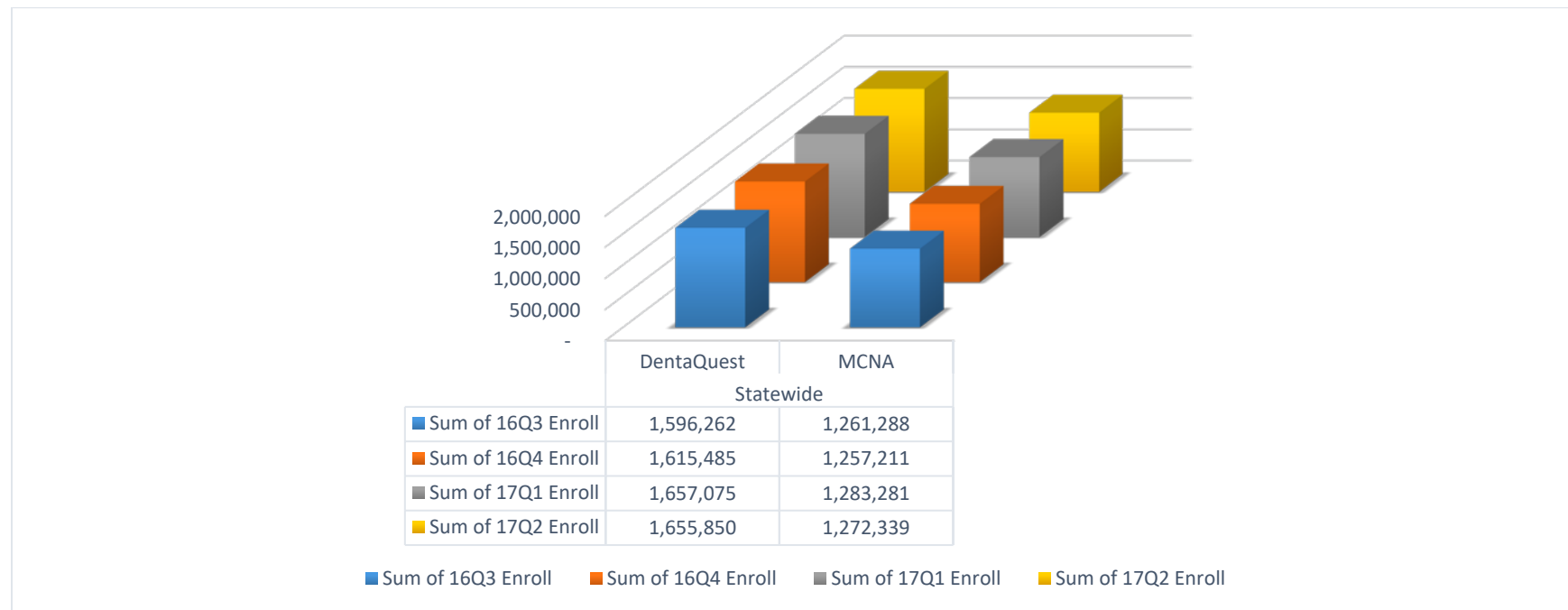
STAR Kids Program Enrollment by MCO and Service Delivery Area (2017 SFQ1-2017 SFQ2)



3. Dental Program

Total enrollment in the Dental Program decreased by -.41% from 2,940,356 members in 2017 SFQ1 to 2,928,189 members in 2017 SFQ2. Dental program enrollment numbers for MCNA have remained relatively stable from SFQ3 2016 to SFQ2 2017. DentaQuest enrollment numbers increased slightly each quarter from SFQ3 2016 to SFQ2 2017 and decreased by only .07% from SFQ1 2017 to SFQ2 2017.

Dental Program Enrollment Statewide (2016 SFQ3 -2017 SFQ2)



Dental Market Share Statewide (2016 SFQ4 - 2017 SFQ1)

Market shares in the Dental Program remained steady (within a percentage point). DentaQuest market shares increased slightly by .19 % while MCNA shares decreased at a the same rate, -.19 %

Dental	2016 Q3	2016 Q4	2017Q1	2017Q2	Percentage Point Change from 2017 Q1 to 2017 Q2
DentaQuest	55.86%	56.07%	56.36%	56.55%	0.19%
MCNA	44.14%	43.64%	43.64%	43.45%	-0.19%

B. ENROLLMENT COUNTS FOR THE QUARTER BY POPULATION

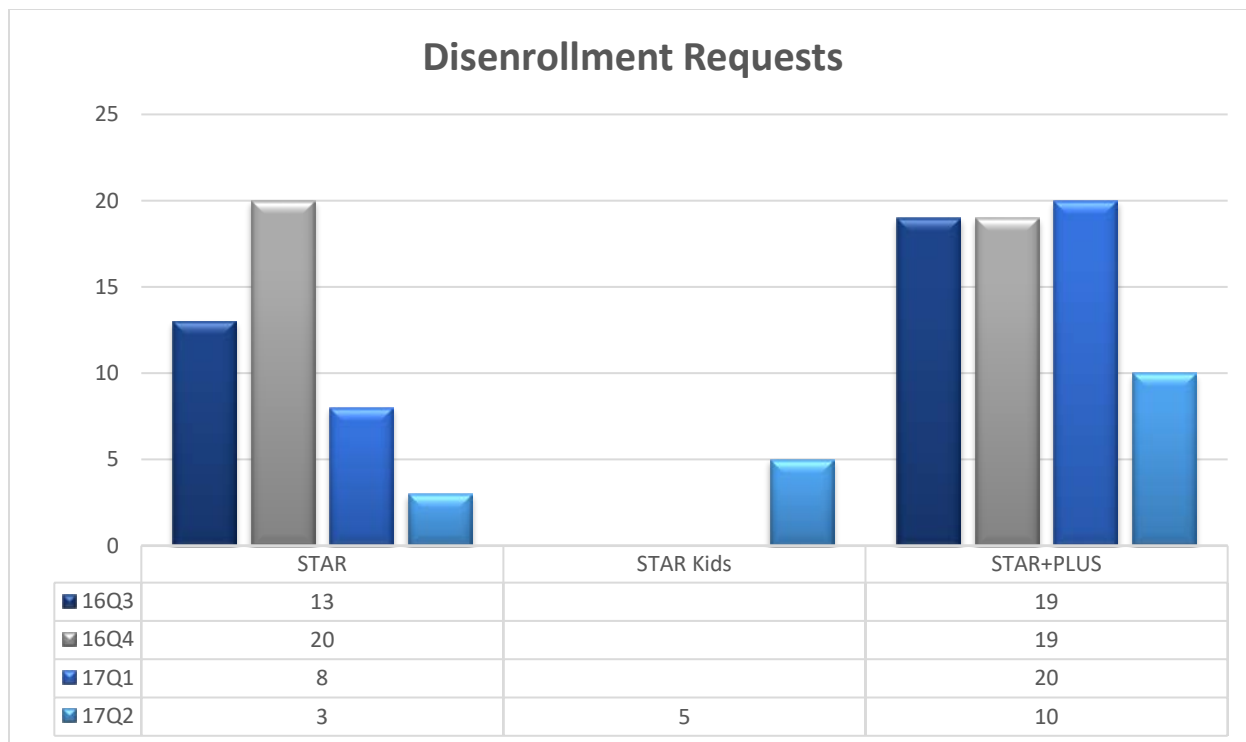
This subsection includes quarterly enrollment counts as required by STC 70. Due to the time required for the data collection process, unique member counts per quarter are reported on a two- quarter lag. The following table includes enrollment counts for the 2017 DY6Q2. Enrollment counts are based on persons and not member months.

Enrollment Counts (DY5 Q4 July - Sept. 2016)

Demonstration Populations	Total Number Served
Adults	339,169
Children	2,818,677
Aged and Medicare Related (AMR)	384,873
Disabled	439,214

C. DISENROLLMENT

This subsection of the report addresses STC 39(b). For January, February and March of 2017, the enrollment broker, MAXIMUS, reported 2,352 plan changes processed. Attachment L contains more information about enrollment outreach activities. Regarding disenrollment requests from Medicaid managed care to the fee-for-service (FFS) delivery model, the State received the following in 2017 SFQ1 and SFQ2: 3 disenrollment requests for STAR, 10 for STAR+PLUS, 5 for STAR Kids and 0 for the Dental Program. Members or their representatives initiated all disenrollment requests in SFQ1 and SFQ2.



D. ENROLLMENT OF MEMBERS WITH SPECIAL HEALTH CARE NEEDS

This subsection of the report addresses STC 39(b) regarding the enrollment into managed care for people with special healthcare needs. The State's Medicaid application asks potential enrollees to identify any family members that have special health care needs (MSHCN). MSHCN means a member including a child or children with special health care needs (CSHCN) who (1) has a serious ongoing illness, a chronic or complex condition, or a disability that has lasted or is anticipated to last for a significant period of time, and (2) requires regular, ongoing therapeutic intervention and evaluation by appropriately trained health care personnel. The State's enrollment broker conveys this and other information concerning potential MSHCN to health and dental plans, who then verify whether the members meet the plans' assessment criteria for MSHCN. All STAR+PLUS and STAR Kids members, as well as Former Foster Care Children (FFCC) enrolled in STAR are deemed to be MSHCN. STAR Kids MSHCN data will be available in appropriate subsequent quarterly reports as HHSC further incorporates STAR Kids into quarterly reporting.

Health and dental plans must also develop their own processes for identifying MSHCN, including CSHCN and others with disabilities or chronic or complex medical and behavioral health conditions.

Contract language requires managed care organizations (MCOs) to include additional populations to the groups that must be identified as MSHCN including pregnant women identified as high risk and Early Childhood Intervention (ECI) program participants. There are

also contractual requirements regarding service management and developing appropriate service plans as needed for MSHCN requiring care coordination to meet short and long-term goals.

1. Reporting

The data presented in Attachment Q of this report shows a snapshot of the total number of MSHCN for 2017 State Fiscal Quarter 2 (2017SFQ2). HHSC has established contractual requirements and a template for the MCOs to submit MSHCN data on a quarterly basis.

2. Analysis

STAR+PLUS

All STAR+PLUS plans reported 100% MSHCN, as required in the contract. STAR+PLUS plans are required to provide service coordination to all members.

STAR

In 2017 SFQ2, STAR MCOs reported a total of 24,829 children and adults identified as MSHCN, which is 0.85% of all STAR members. See Attachment Q for detail by service delivery area (SDA) and MCO.

MCOs reported 36.47% of MSHCN with service plans in 2017 SFQ2. The overall percentage of STAR MSHCN with service plans has increased since the last reporting period. Aetna, Christus, Parkland, Texas Children's and United all reported 100% of MSHCN with service plans across all SDAs. Additionally, two other plans reported more than 90% of MSHCN with service plans (Cook and Superior).

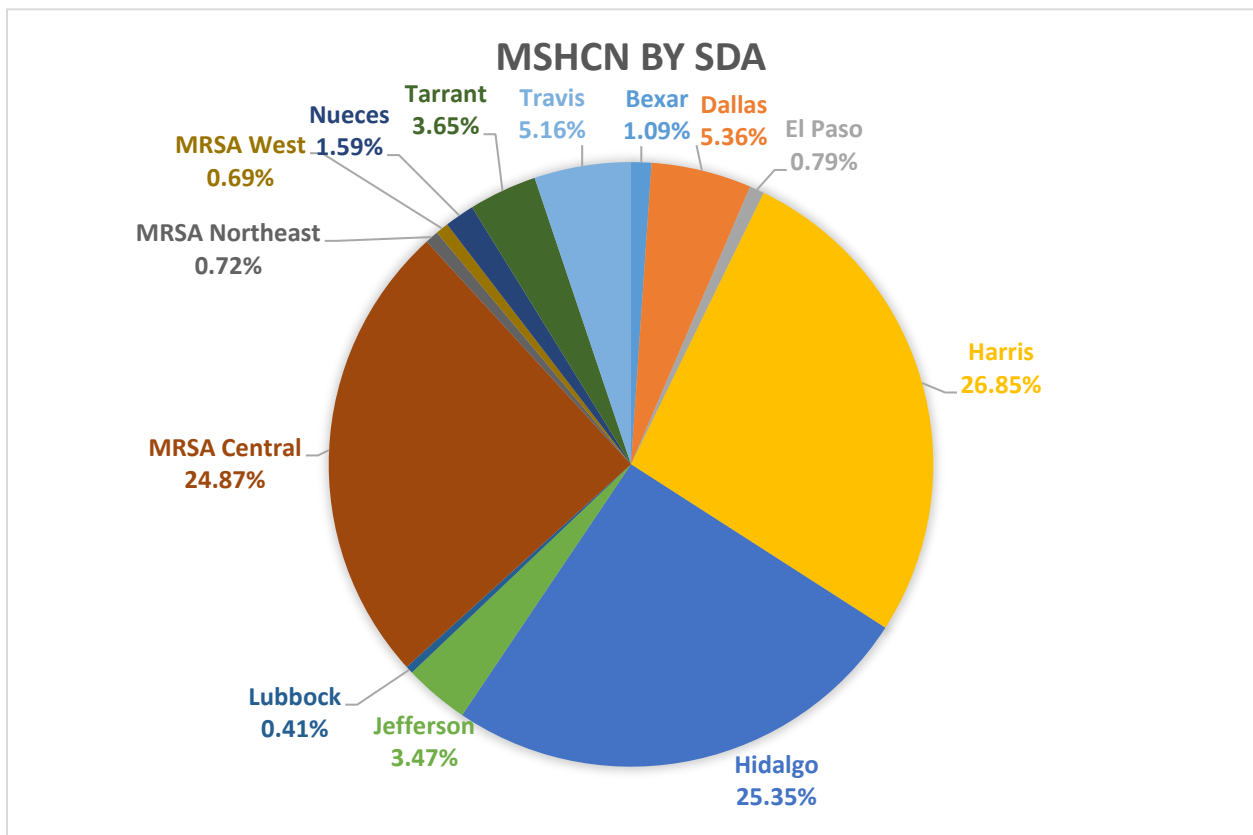
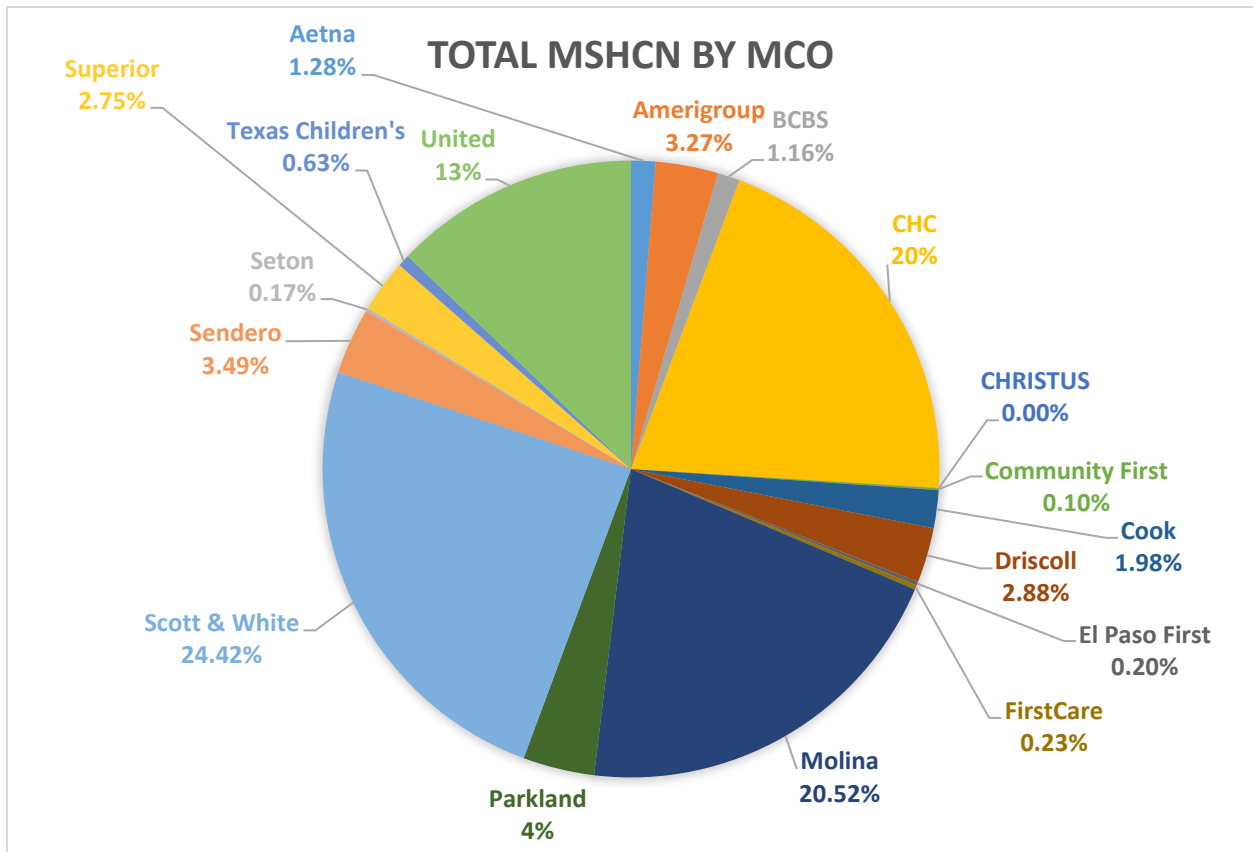
Attachment Q lists total enrollment and total MSHCN counts per SDA and MCO.

Approximately 27 % (6,667) of all STAR MSHCN are concentrated in the Harris SDA. In 2017 SFQ2, Scott & White reported the largest number (6,064) of MSHCN. Moreover Scott & White reported the highest percent of enrollment (13.69%) identified as MSHCN. Five STAR plans reported more than 2 % of members classified as MSHCN: CHC Harris (2.14%), Scott & White (13.69%), Sendero (6.47%), and United Jefferson (3.08%), United Harris (3.10%), and Molina Hidalgo (8.23%). The majority of the remaining plans reported less than 1% of members as MSHCN. The pie charts are an illustration of the total number of MSHCNs by MCOS and SDAs.

STAR MCOs rely on various mechanisms to identify and verify MSHCN in addition to member self-identification. HHSC does not provide MCOs an all-inclusive list of conditions that should be included in MSHCN criteria. Most STAR MCOs employ a combination of methods including provider referrals, risk assessments, member self-assessments, and utilization reviews. For example, Cook relies on a combination of member screening and predictive modeling to identify

members. Sendero identifies members as MSHCN if they meet specific diagnosis criteria. A small number of STAR MCOs use predictive modeling and specific diagnosis criteria.

The number of MSHCN has varied over time for some plans that have changed identification processes, and the total number of MSHCN decreased since the last reporting period. For example, some plans reported implementing member survey processes to verify MSHCN status.



E. MEDICAID ELIGIBILITY CHANGES

No eligibility changes were made to the 1115 waiver populations in 2017 DY6Q2.

F. ANTICIPATED CHANGES IN POPULATIONS OR BENEFITS

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

Currently, Medicaid for Breast and Cervical Cancer (MBCC) and Medicaid services for individuals in Adoption Assistance and Permanency Care Assistance (AAPCA) programs are delivered through traditional, FFS Medicaid. 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 Medicaid benefits for individuals in AAPCA will be delivered through STAR and STAR Kids Medicaid managed care. Clients in AAPCA who have supplemental security income (SSI) or are enrolled in Medicare will be enrolled in STAR Kids. All other clients with AAPCA will be enrolled in STAR with the exception of a few populations. Under managed care, about 5,000 MBCC clients will have access to unlimited prescriptions and service coordination and access to Long Term Services and Supports as needed through STAR+PLUS (services not available in Medicaid FFS). Additionally, 51,000 AAPCA clients will have access to enhanced service management through STAR and service coordination for those AAPCA children transitioning into STAR Kids (a service not available in Medicaid FFS).

III. DELIVERY NETWORKS AND ACCESS

This subsection addresses the quarterly reporting requirements found in STCs 25(e), 40(a), 41(b) and 70. Supporting data is located in Attachments C through K. HHSC routinely reviews various measures related to network adequacy, including those reported in the following sections 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.

As discussed during the December 2016 monthly monitoring call and in the Q1 report, HHSC continues to focus its efforts to address the new access requirements, Texas Government Code Sec. 533.0061 and 42 CFR §438.68. In order to address these new requirements, this section of the report will change for subsequent reports. Specifically, this report includes MCO self-reported geomapping data. Over the next three quarters, HHSC is ramping up reporting for distance and travel time analysis. As a result of this revised methodology, certain provider types will be reported in specific quarters as HHSC expands and refines its reporting capabilities for each provider type. For example, PCPs and Main Dental provider geomapping will be reported in 2017 Q3 and the state plans to report the remaining health specialists (Hospital-Acute care, Psychiatrist, etc.) in 2017 Q4 and 2018 Q1. The state will report MCO compliance with access time and distance standards, leading to a cumulative annual report for 2018 Q4. Ultimately, all MCO self-reported data will be replaced with an improved network adequacy analysis process

with data derived and validated at HHSC; have enhanced analysis granularity; and include an expanded number of provider types.

A. PROVIDER NETWORKS

This subsection includes quarterly healthcare and pharmacy provider counts for STAR, STAR Kids 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 for all children who are members to at least two age appropriate PCPs within established mileage standards.

The provider network counts in Attachment C2 show that across the STAR program statewide, the MCOs reported a total of 19,671 unique PCP providers, a decrease of 77 (-.39%) from the prior quarter. The MCOs reported 15,049 unique PCP providers in the STAR+PLUS program statewide, a decrease of 170 (-1.21%) from the prior quarter. There were 1,608 unique PCP providers in the STAR Kids program.

2. Specialists (non-pharmacy)

Across the STAR program statewide, the MCOs reported 57,602 unique specialty providers, a decrease of 2,734 (-4.53%) from the prior quarter. The MCOs reported 50,573 unique specialty providers in the STAR+PLUS program statewide, an increase of 1,042 (2.11%) providers from the previous quarter. The MCOs also reported 7,916 unique specialists in the STAR Kids program this quarter.

3. Provider Terminations

Attachment C3 details data reported by the MCOs regarding the number of PCPs and specialists terminated in 2017 SFQ2. The MCOs reported a variety of reasons for provider termination, including: providers failed to re-credential, termination requested by provider, MCO terminated for cause, provider left group practice, provider retired and provider closed practice.

4. Pharmacy Providers

Across the STAR program statewide, the MCOs reported a total of 4,898 unique pharmacies, a decrease of 49 (-.99%) pharmacies from the prior quarter. The MCOs reported 4,771 unique pharmacies in the STAR+PLUS program statewide, an increase of 187 (4.08%) pharmacies from the prior quarter. There were 4,557 pharmacies reported by STAR Kids MCOs. All MCOs

contract with the 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 2017 SFQ2, DentaQuest reported a total of 5,434 unique dental providers, a decrease of 157 (-2.81%) dental providers from the prior quarter at 5,591. MCNA reported 4,842 unique dental providers, an increase of 15 (.31%) dental providers from the prior quarter at 4,827.

B. GEOACCESS

This subsection includes quarterly geo-access information based on self-reported geo-mapping data provided by MCOs in accordance with STCs 25(e) and 40(a). The HHSC Strategic Decision Support (SDS) unit has provided geo-mapping for previous 1115 waiver quarterly reports and is currently working towards collecting and submitting geo-mapping that coincides with Senate Bill (SB) 760 regulations in Government Code section 533.0061. Attachments E, G and H which typically contain HHSC geo-mapping results by plan and SDA for each provider type and population, are not present in this document as SDS is developing the new geomapping reports. 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: otolaryngologist (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. STAR

STAR MCO geomapping is reported on Attachment I1. In 2017 SFQ2 across the state, all of the MCOs exceeded the State's 90% benchmarks for child access to PCPs, one obstetrician/gynecologist, one orthopedic surgeon, and one outpatient behavioral health provider. However, several MCOs failed to meet standards for the following:

- ENT access; Amerigroup - MRSA West, FirstCare - MRSA West, and Molina - Jefferson
- Outpatient behavioral health access; Molina - El Paso,
- Acute care hospital access; Amerigroup - MRSA West, Molina - Jefferson

Across MCOs, most adult STAR standards were met, with four exceptions. In the MRSA West region Amerigroup was not able to meet the standard for adults residing within 30 miles of one acute care hospital. In the same region, First Care was not able to meet standards to ensure that adult members reside within 75 miles of one urologist. Molina did not meet standards for adult rural access to an outpatient behavioral provider in El Paso SDA and did not meet the standard for adults residing within 30 miles of an acute care hospital in the Jefferson SDA.

2. STAR+PLUS

STAR+PLUS MCO geomapping is reported on Attachment I2. In 2017 SFQ2 United was the only MCO that did not meet the standards for child access in the Jefferson and Nueces SDAs. However, in all other regions, standards were met at 100%.

Standards for adult access to services were also met across most MCOs and SDAs with the following three exceptions:

- Outpatient access in urban counties: Molina - El Paso
- Rural access to outpatient behavioral health: Amerigroup - MRSA West, Molina - Jefferson

3. STAR Kids

STAR Kids MCO geomapping is reported on Attachment I3. In 2017 SFQ2, all MCOs across the state met the standards for a female child member within 75 miles of one obstetrician/gynecologist, for one outpatient behavioral health provider within 30 miles for urban counties and within 75 miles for rural counties.

The following MCOs did not meet listed access standards for STAR Kids:

- Amerigroup MRSA West - two open panel PCPs, one orthopedic surgeon, ENT, acute care hospital
- BCBS, MRSA Central - acute care hospital

4. Access to Pharmacy

Attachment J provides summaries of MCO self-reported geo-mapping data by plan and SDA for pharmacies. For all STAR and STAR+PLUS SDAs, the following benchmarks 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 2017 SFQ2. 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.

5. Dental Geo-mapping

Dental geo-mapping results are divided into eleven Texas regions. Within each region, dental managed care organizations (DMOs) reported the percentage of members in urban and rural areas with access to main dentists, endodontists, oral surgeons, orthodontists, periodontists and prosthodontists. 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 benchmarks 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 2017 SFQ2, most DentaQuest and MCNA SDAs maintained sufficient provider networks for main dentists in rural and urban counties statewide. DentaQuest did not meet the standard for provision of at least two general dentists within at least 30 miles of members in urban counties in one SDA (West Texas). In the Upper Rio Grande dental region, MCNA did not meet the standard for providing at least two main dentists within 75 miles of members in rural counties. In the first quarter of 2017, DentaQuest submitted a special exception request report to address all areas where geo-mapping standards were not met. The special exception request was received in the first quarter and was effective for the first and second quarters. Geo-mapping reporting for DentaQuest will change beginning Q3 SFY17, as a result of contract amendments.

Access to dental specialty providers (periodontists, endodontists and prosthodontists) is limited in some parts of Texas as depicted in Attachment K. It should be noted that statewide data from Attachment K indicates both DMOs have experienced extreme difficulty procuring prosthodontists within 75 miles. 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.

1. SFQ2 2017

Attachment D details the OON utilization rates by program, MCO and SDA. The following plans listed below exceeded OON utilization standards in 2017 SFQ2. The State will continue to monitor these plans and will require corrective action or other remedies if appropriate.

STAR

- Aetna: Bexar SDA
- Amerigroup: Dallas, Harris and MRSA Central SDAs
- Christus: Nueces SDA
- Molina: Dallas and Jefferson SDAs

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

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

- Seton: Travis SDA

STAR+PLUS

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

STAR Kids

- Amerigroup: Harris SDA
- Aetna: Tarrant SDA
- BCBS: MRSA Central and Travis SDAs
- Driscoll: Hidalgo and Nueces SDAs
- Superior: MRSA West SDA
- Texas Children's: Harris, Jefferson and MRSA Northeast SDAs
- United: MRSA Northeast

In the transition year for STAR Kids, MCOs were required to honor existing provider relationships and prior authorizations for certain periods of time and may account for this out-of-network utilization.

Dental

Dental plans reported OON utilization well below the 20% threshold at 0% for 2017 SFQ2. In the Dental Program, the 20% standard for "other services" applies to out-of-network dental services.

2. Special Exception Request Process

Under certain circumstances, plans may request time-limited exceptions from the OON standards if the plans provide evidence warranting special exception. In order to be granted an exception 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 monetary damages. Attachment D provides utilization data, including recalculated rates, by program, MCO, and SDA.

IV. OUTREACH/INNOVATIVE ACTIVITIES TO ASSURE ACCESS

This section addresses the quarterly requirements for STC 70 regarding outreach and other initiatives to ensure access to care. The Medicaid Managed Care Advisory Committee meeting update addresses STC 70. In previous reports, the Dental Stakeholder Updates addressed STC 41(c) which states that the state will continue to hold quarterly meetings with dental stakeholders, including dental care providers, as required under the *Frew* consent decree. However, the dental stakeholder meetings are no longer conducted on a quarterly basis as they are no longer required by *Frew v. Smith* lawsuit. Therefore this report does not contain dental stakeholder meeting information.

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 2017 DY6Q2 Q2 Demonstration period (January 2017 - March 2017) MAXIMUS sent 297,154 enrollment mailings to potential STAR, STAR Kids, and STAR+PLUS clients, and 205,591 mailings to potential Dental Program clients. MAXIMUS field staff completed 24,844 home visit attempts for these programs and 131,790 phone call attempts. Additionally, MAXIMUS completed 7,323 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. MEDICAID MANAGED CARE ADVISORY COMMITTEE

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

The Committee meeting was held on February 8, 2017. At the February 2017 meeting, HHSC provided updates on Senate Bill 760 to SMMC Advisory Committee members, HHSC MCD Transformation, and Value Based Payment Quality Improvement Advisory Committee activities. HHSC also led a discussion on enrollment as a Medicaid Provider. The Texas Association of Health Plans (TAHP) provided an overview of MCO credentialing.

The next meeting was held on May 11, 2017 as the Committee meets quarterly. The outcome of the May 2017 meeting will be outlined in the 2017 SFQ3 report.

D. PUBLIC FORUM

In accordance with STC 14, Post Award Forum, HHSC afforded the public with an opportunity to provide comments on the progress of the Demonstration. The Medical Care Advisory Committee (MCAC) met on February 16, 2017. The date, time and location of the MCAC were published on the HHSC website prior to the meeting.

During the February 16, 2017, Medical Care Advisory Committee (MCAC) meeting HHSC gave an update on the 1115 waiver. Currently, the 1115 waiver is in demonstration year six which is part of the 15-month extension. The request for continuation is with CMS. Delivery System and Provider Payment Initiative proposals for demonstrations have been developed and are concerned with outcome based reporting. There is a survey open for participants to comment on the draft “bundle”. For private hospital participation there is a regional incentive allowing 5% shift for reporting outcomes. Six areas of discussion were presented by staff representing various units across the HHS enterprise:

- General Provisions to direct Managed Care Organizations' (MCOs') payments to providers.
- Regional Uniform Rate Increases for Hospital Services*
- Quality Incentive Payment Program (QIPP) for Nursing Facilities (NF)*
- Amendments to Authorized Dentists' Services
- Life Safety Code for an Intermediate Care Facility for Individuals with an Intellectual Disability or Related Conditions (ICF/IID)

- Transition to Managed Care for Medicaid Breast and Cervical Cancer, Adoption Assistance, and Permanency Care Assistance Populations; Managed Care for Former Foster Care Children

Participants provided comments and questions on the above stated topics. The next meeting was held on June 15, 2017.

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 21. 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 first quarter of 2017, the Ombudsman Managed Care Assistance Team (OMCAT) abandoned 68% fewer calls averaging a call abandonment rate of six percent as compared to 17% in the previous quarter. The decrease in calls abandoned is due to a call volume decrease of 10%, or 994 fewer calls, and the unit being fully staffed. The office received an increase in complaints related to Superior STAR + PLUS in the Dallas service area. The complaints were regarding Access to Long Term Care services such as a decrease in or not being able to access home health provider services, problems accessing home modifications and the plan not showing accurate waiver information in their system. The OMCAT unit continued to direct a managed care support network to better coordinate assistance provided to Medicaid managed 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 and now meets quarterly.

2. Aging and Disability Resource Center (ADRC)

Local-level ADRC staff continue to participate in training activities about available resources and referral protocols. Training this quarter included sessions on how ADRCs collaborate with their community partners to enhance services, including through the Community Resource Coordination Groups and the 2-1-1 Texas Information and Referral Network. ADRCs also received training on the Texas Department of Housing and Community Affairs (TDHCA) Section 811 Project Rental Assistance Program and Housing and Services Partnership. The following are the dates and training topics:

- January 23: 2-1-1 Texas Information and Referral Network

- January 23: Community Resource Coordination Groups and Aging and Disability Resource Centers: Working Together
- February 22: Providing Assistance with Tax Credit Developer Applications
- February 22: Texas Department of Housing and Community Affairs (TDHCA) and the Corporation for Supportive Housing (CSH) Housing and Services Partnership
- February 22: Updates to the Section 811 Project Rental Assistance Program
- February 23: Medical Necessity for Nursing Home Care: Getting It, Keeping It, and Appealing its Denial

On January 23, 2017, the ADRC Advisory Committee convened and committee members received training on serving individuals with complex needs through coordination with the Community Resource Coordination Groups, as well as information about the services, types of calls, and mobile application of the 2-1-1 Texas Information and Referral Network. The committee members also received updates from the two subcommittees that were formed in October 2016, including the Funding and Person-Centered Assistance subcommittees.

F. HHSC MANAGED CARE INITIATIVES

Senate Bill 760

During the December 2016 1115 monthly monitoring call, HHSC provided CMS an overview of upcoming changes to network adequacy analysis in managed care, and how these changes (CMS rules and Senate Bill (SB) 760, 84th Legislature, Regular Session, 2015) will impact the 1115 report structure and methodology for the upcoming March - May 2017 SFQ3 1115 report.

SB 760 and new managed care rules issued by CMS require HHSC to establish minimum network access standards, including time and distance standards, for MCO provider networks for certain provider types. In response to these requirements, HHSC worked with stakeholders to develop new time and distance standards, based on geographic designations, for specific provider types. These revised standards were included in managed care contracts, effective March 1, 2017. HHSC is currently working with stakeholders to establish and implement processes for monitoring MCO compliance with the revised standards. HHSC is also working with stakeholders to develop revised network access standards for community-based long-term services and supports. These changes are expected to go into effect by September 2018 in compliance with state and federal regulations.

Mental Health Parity Regulations

The March 30, 2016 final rule applied Mental Health Parity and Addiction Equity Act (MHPAEA) to Medicaid Managed Care and Children's Health Insurance Programs. The rule requires equal treatment of behavioral health conditions (mental health and substance use disorders) and physical health conditions, which prevents managed care organizations (MCOs) from imposing less favorable benefit limitations to behavioral health conditions compared to

medical/surgical conditions. State Medicaid agencies are required to demonstrate compliance with MHPAEA by October 2, 2017.

The Health and Human Services (HHS) parity workgroup is comprised of internal stakeholders including Medicaid and CHIP policy and program staff, and staff across the agency with expertise in mental health and substance use disorders, medical policy, data analytics, managed care, and pharmacy benefits. Texas, as one of ten states selected to participate in the Substance Abuse and Mental Health Services Administration (SAMHSA) Parity Academy, has been working with the State's assigned technical assistant and participating in various Webinars and technical assistance calls. HHSC has provided status updates to external stakeholders through advisory committees, such as the Behavioral Health Advisory Committee, and is developing a communication plan for external stakeholders. HHSC has met with its MCOs on three separate occasions to outline federal parity requirements; released a non-quantitative treatment limitation (NQTL) tool to the MCOs to assess their use of processes, strategies, and evidentiary standards on NQTLs to ensure parity; and is providing technical assistance to the MCOs on completing the tool.

Medicaid and CHIP Managed Care Regulations

On May 6, 2016, CMS published final regulations intended to revise and strengthen existing Medicaid managed care rules. The rule is designed to achieve four key goals: advance state efforts to achieve delivery system reform and improve quality of care; strengthen consumer experience of care and consumer protections; strengthen program integrity, accountability, and transparency; and align rules across health insurance coverage programs. The new managed care regulations have varying effective dates, with some regulations effective immediately, and others effective over a five-year period extending through 2021. Regulations having significant impact on Texas Medicaid include requirements for network adequacy standards; screening, enrollment, and revalidation of providers; state fair hearings; contract and rate approval process; mental health parity; and care coordination of services for enrollees.

HHSC continues to analyze, develop and implement contractual and programmatic changes necessary to ensure compliance with the rule. The changes will be made on an ongoing basis based on the rule effective dates.

V. 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 continued to conduct the quarterly MCO encounter financial reconciliation process for 2017 SFQ2. The State contacted each plan that did not achieve the financial reconciliation threshold, and advised them of the necessary steps to achieve contract compliance and, ultimately, certification.

VI. OPERATIONAL/POLICY/SYSTEMS/FISCAL DEVELOPMENTS/ISSUES

This section addresses the requirements of STC 40(b) for biannual claims summary reporting, including the timeliness and accuracy of claims processing, and possible fraud and abuse detected.

A. CLAIMS SUMMARY

1. Claims Adjudication

HHSC's managed care contracts include the following claims adjudication standards for clean claims:

- 98% must be adjudicated within 30 days;
- 98% of appealed claims must be adjudicated within 30 days;
- 99% must be adjudicated within 90 days; and
- 98% of pharmacy claims must be adjudicated within 18 or 21 days for electronic and paper claims, respectively.

Attachments V1-V4 summarize health and dental plans' 2017 SFQ1 through SFQ2 claims adjudication results. For these quarters, STAR, STAR Kids and STAR+PLUS MCOs reported results for acute care, behavioral health, vision services, and pharmacy claims. STAR+PLUS MCOs also reported results for LTSS claims. Dental plans reported results for all dental claims. Both dental plans met the claim adjudication standards for clean claims in 2016 SFQ1 and SFQ2. All STAR, STAR Kids and STAR Plus plans met the 98% standard for the pharmacy claims adjudicated within 18-21 days for electronic and paper claims. STAR Kids Superior met standards but had no claims to report. Several MCOs failed to meet the claims processing standards. HHSC staff is in the process of developing an appropriate remedy for the MCOs that

December 12, 2011 - December 31, 2017

are not in compliance with the claims adjudication standards. Most MCOs failed to meet standards in at least one SDA.

2. Provider Fraud and Abuse

The State's managed care contracts require health and dental plans to form special investigative units that refer suspected cases of fraud, waste, or abuse to the HHSC Office of Inspector General (OIG). Attachments R1 and R2 are a summary of the referrals that STAR, STAR+PLUS, STAR Kids and Dental Program plans sent to the OIG during the biannual reporting period, 2017 SFQ1 and SFQ2.

In 2017 Q1 and Q2, MCOs forwarded 93 suspected cases of fraud, waste, or abuse to the OIG. Most of these referrals related to program non-compliance (54), non-appropriate billing (30) and billing for services not rendered (6). OIG returned four of the cases to the MCO for the determination of appropriate action and launched a full scale investigation for thirteen cases. Dental plans forwarded twenty eight suspected cases of fraud, waste, or abuse to the OIG. Most of these referrals related to non-appropriate billing (15) and billing for unnecessary services (8). OIG returned six of the cases to the MCO for the determination of appropriate action.

VII. 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 70.

1. Managed Care Issues

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

VIII. CONSUMER ISSUES

This section addresses quarterly reporting requirements in STCs 23, 40(a) and 70 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 increased by 4.22% in 2017 SFQ2. Calls to the MCO provider hotlines increased by 12.8% and calls to the behavioral health hotline increased by 13.35% in 2017 SFQ2. In the Dental Program, calls to the member hotlines decreased by -5.83% in 2017 SFQ2 and calls to the provider hotline decreased by -3.20%.

The following table shows the number of hotline calls received per 1,000 members in the last four quarters. STAR Kids program enrollment numbers, such as the Children's Medical Center enrollments, are included in the counts for SFY17 Q2 enrollments. The rate of member hotline calls received per 1,000 members decreased in 2017 SFQ2 across most plans.

Member Hotline Calls Received per 1,000 Members (2016 SFQ2 - 2017 SFQ1)

MCO	Hotline Enrollment Per 1,000 Members			
	SF16 Q3	SF16 Q4	SFY17 Q1	SFY18 Q2
Aetna*	529	520	523	487
Amerigroup*	192	254	240	188
BCBS*	280	242	318	293
CHC*	182	176	176	178
Children's Medical Center				536
Christus*	567	572	721	741
Cigna-HealthSpring	535	710	569	513
Community 1st*	231	234	291	308
Cook Children's*	128	211	222	246
DentaQuest	77	87	72	72
Driscoll*	175	158	159	33
El Paso 1st*	128	164	152	345
FirstCare*	144	129	141	126
MCNA	105	113	109	98
Molina*	488	885	933	63
Parkland*	250	247	246	238
Scott & White	308	312	161	151
Sendero*	365	294	281	347
Seton*	455	505	402	282
Superior*	209	252	257	225
Texas Children's*	83	137	133	126

United*	381	804	700	323
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*Enrollment and Hotline data includes CHIP program

The Majority of all MCOs and DMOs met the following hotline performance in 2017 SFQ1:

- 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.

HHSC staff reached out to Texas Children's (TCHP) to inquire the reason for non-compliance and have documented appropriate remedies in the respective remedy log. The following MCO failed to meet the standards listed above.

Member Hotline, Attachment M1

- All MCOs met member hotline call standards

Behavior Health Hotline (BH), Attachment M2

- All MCOs met standards for behavioral health hotline calls answered.

Provider Hotline, Attachment M3

- TCHP did not meet standards for an average hold time of under 2 minutes for provider hotline calls.

Behavioral Health Hotlines

- TCHP reported to HHSC that the behavioral health hotline call abandonment rate was not met because January's compliance was impacted by unplanned downtime events. Action steps were taken and compliance was back on par for February. As a solution, staff increases may be needed when Texas Children's Health plan experiences outages.

Provider Hotlines

- TCHP reported that the average hold time for Month 1, Month 2 and Month 3 standards not met because the performance gaps for the Provider Hotline report continued to exist for the second quarter. The previous issue of recycling the members back to the beginning of the call tree that was presumed corrected, still persisted. The call tree has been corrected to route

calls appropriately, and in an efficient manner. The performance gaps for the Provider Hotline report continued to exist for the second quarter.

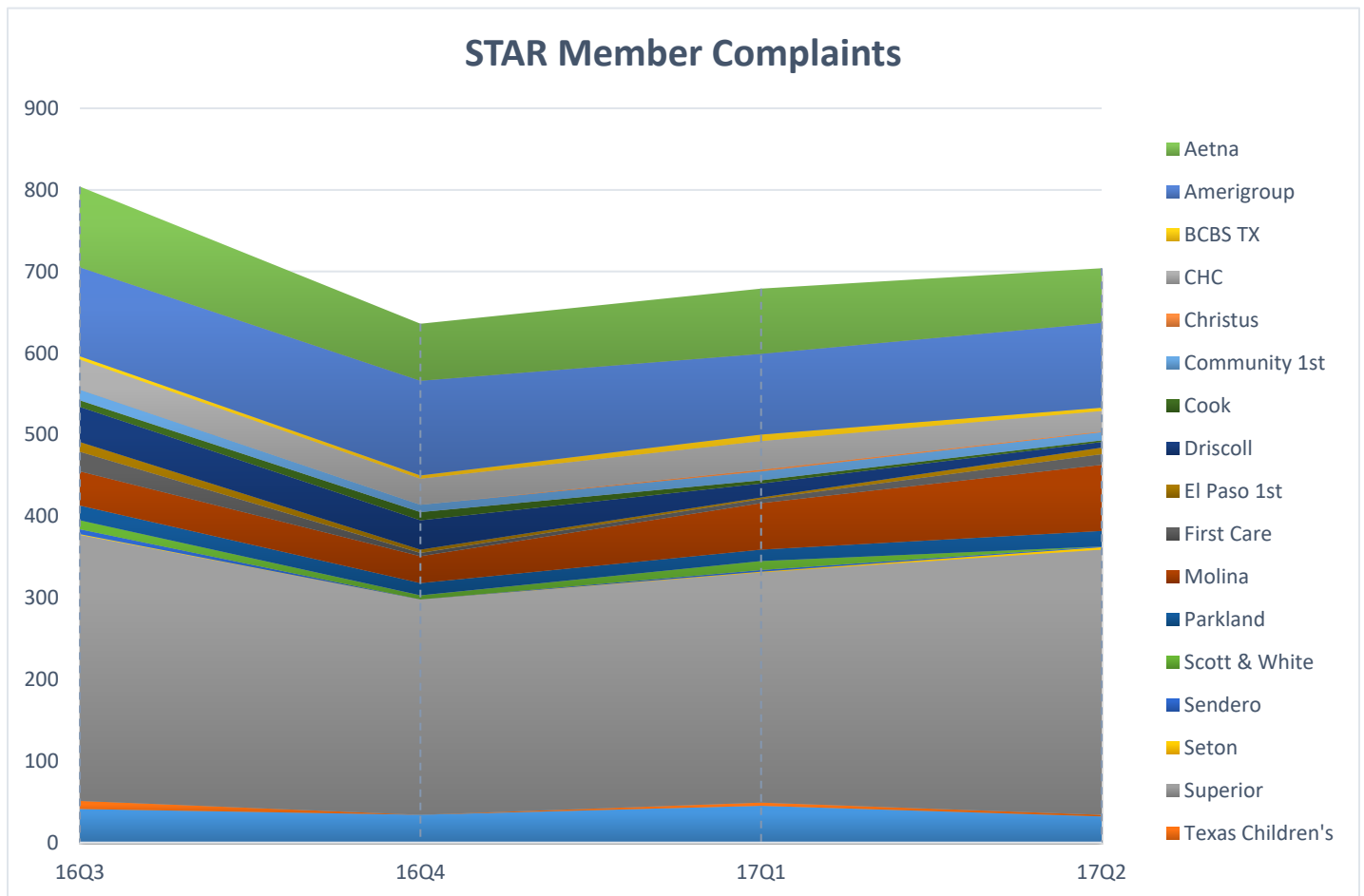
B. COMPLAINTS AND APPEALS RECEIVED BY PLANS

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

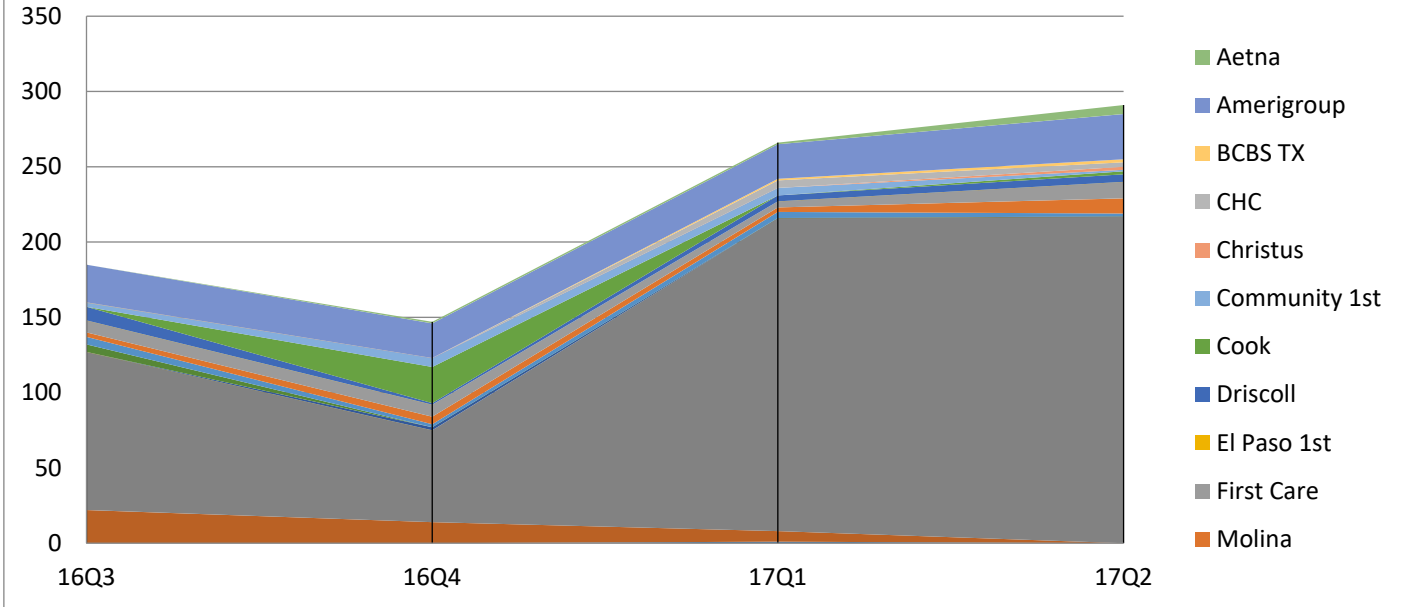
1. STAR, STAR+PLUS, and STAR Kids

The total number of STAR complaints and appeals received by plans increased from 2,045 in 2017 SFQ1 to 2,479 in 2017 SFQ2, as shown in the following figures below. STAR plans collectively reported 704 member complaints, 1,484 member appeals and 291 provider complaints in 2017 SFQ2. The total number of STAR+PLUS complaints and appeals increased from 4,002 in 2017 SFQ1 to 4,307 in 2017 SFQ2. STAR+PLUS plans reported 1,172 member complaints, 1,367 member appeals and 1,768 provider complaints in 2017 SFQ2. HHSC is following up with Cigna-HealthSpring to discuss the increases in complaints among all three SDAs. STAR Kids plans collectively reported 356 member appeals, 96 member complaints, and 41 provider complaints in SFQ2. STAR Kids comparison data and charts will be added to the report in subsequent quarters when comparison data are available.

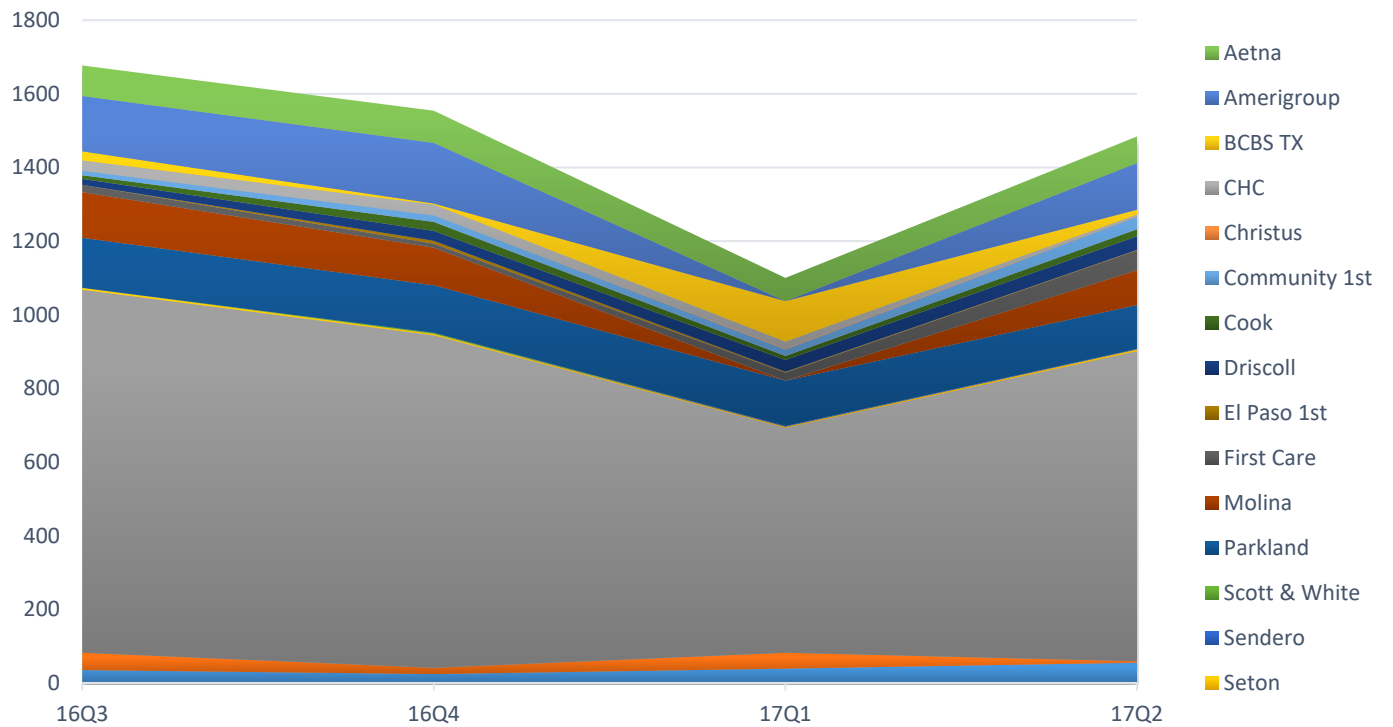
Complaints and Appeals Received by STAR MCOs (2016 SFQ3 – 2017 SFQ2)



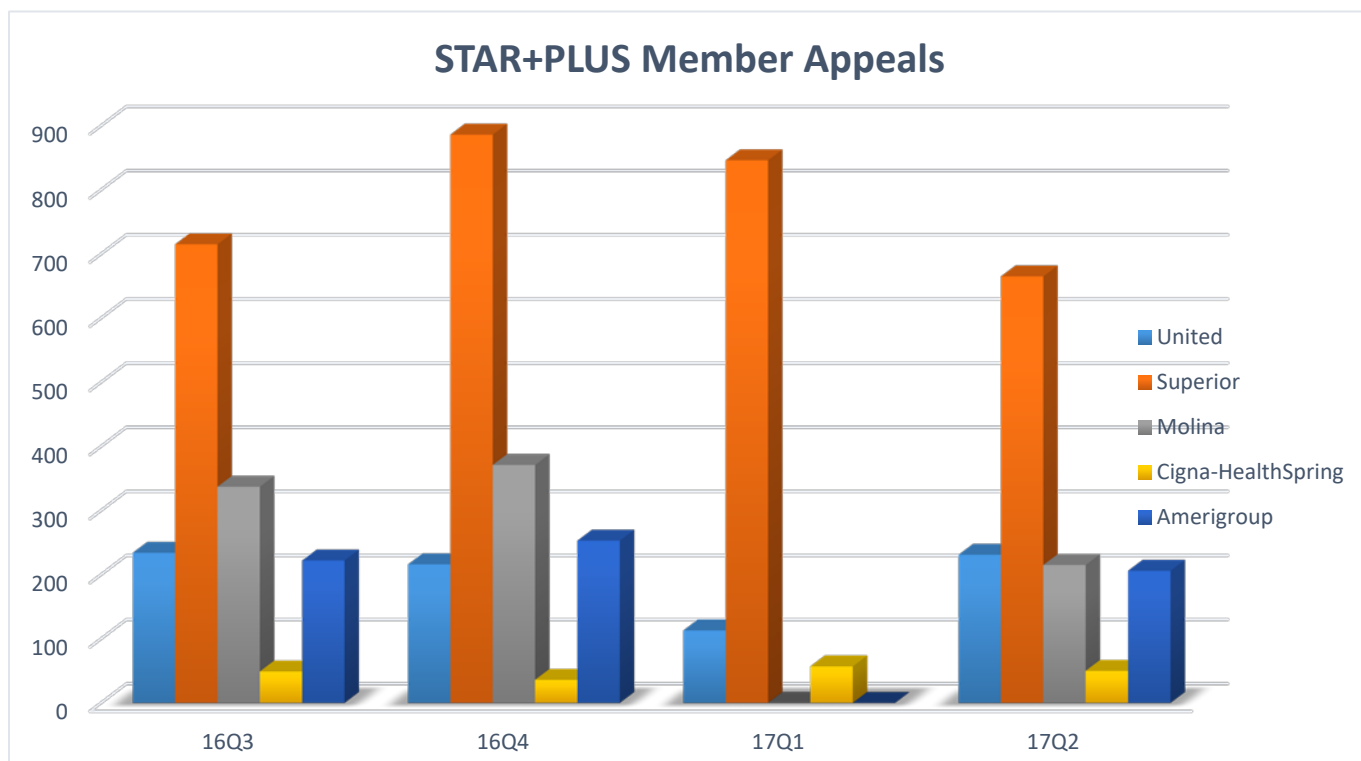
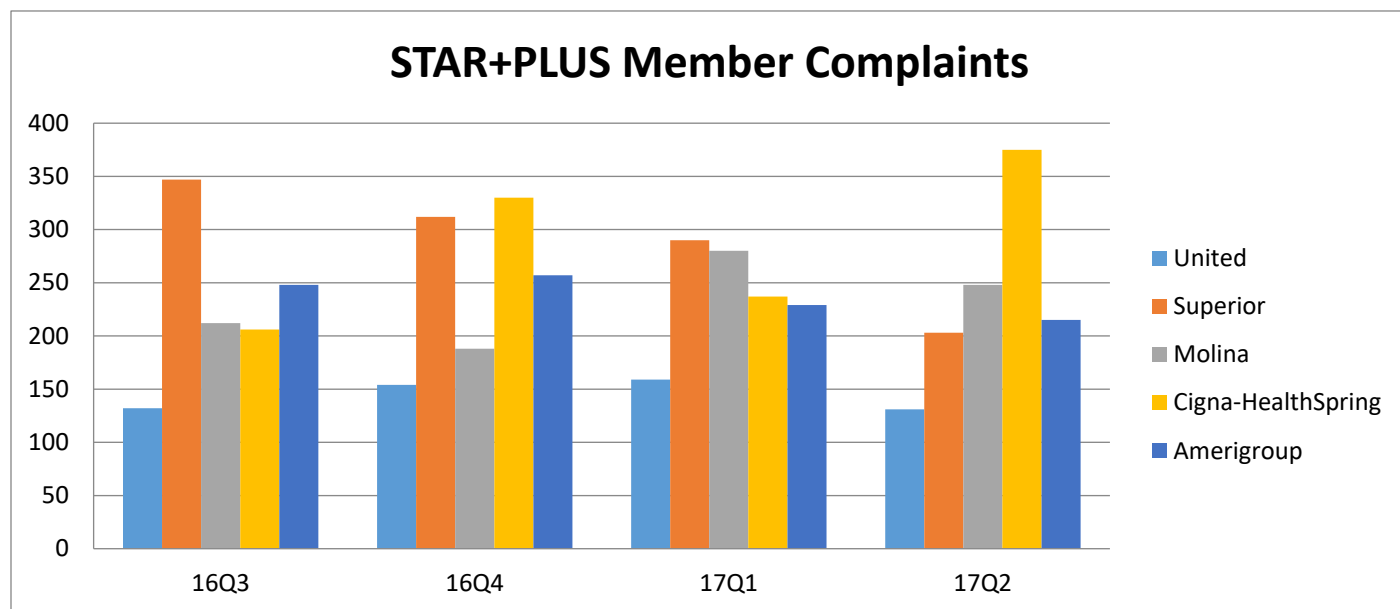
STAR Provider Complaints

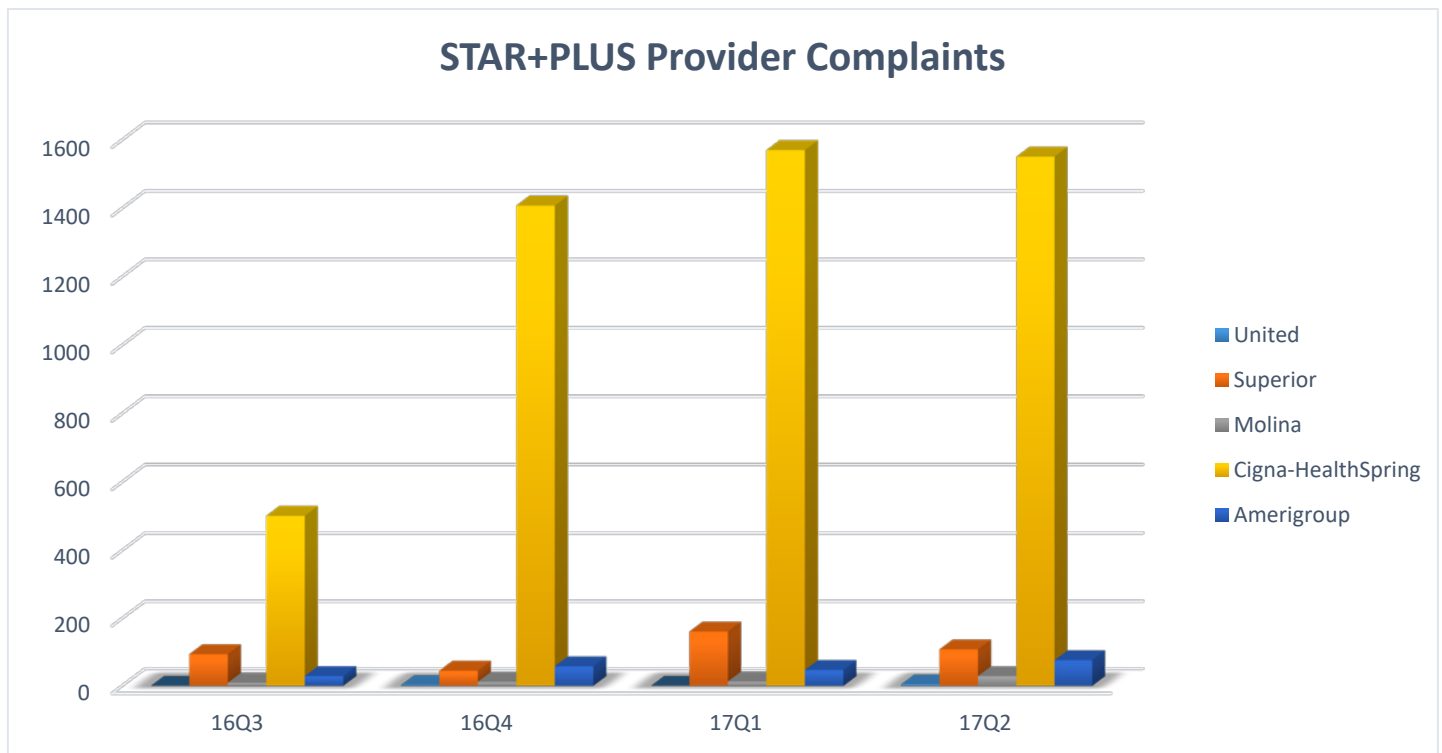


STAR Member Appeals



Complaints and Appeals Received by STAR+PLUS MCOs (2016 SFQ3 – 2017 SFQ2)





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 the plans to achieve 98% compliance with this benchmark in each SDA.

STAR

Member Complaints

STAR MCOs achieved compliance with the timely resolution of member complaints. This includes both Scott & White, and Texas Children's. The 0% compliance scores for these MCOs are present on Attachment N because there were no member complaints to report in Q2 SFY 2017.

Member Appeals

- The following six MCOs did not meet the 30-day resolution standard for member appeals: BCBS Travis SDA, Community First Health Plan (CFHP) Bexar SDA, First Care- Lubbock SDA, Superior-MRSA West SDA, and United-Harris SDA.
- HHSC is currently in discussion with BCBS concerning non-compliance.
- HHSC has contacted Community First Health Plan and they have developed additional automated processes to improve auto-adjudication. These improvements are both programmatic and configuration-based solutions.

- CFHP has developed new reporting capabilities to enhance workflows in their Claims Department.
- First Care, Lubbock SDA was out of compliance for appeals resolved within 30 days because of one appeal being resolved after 30 days. Rounding up the percentage the plan is at 97%: one point away from compliance.
- No explanations were given for the United Harris SDA score of 95.83%. HHSC responds to such scores by contacting organizations and discussing next steps towards compliance.

Provider Complaints

- Most STAR MCOs achieved compliance with provider complaints resolved 100% within 30 days with the exceptions of Parkland Dallas SDA, and Superior at MRSA West SDA. Superior explained to HHSC that issues have been identified within the internal complaints processes. The organization is streamlining processes to meet the standard in the future. No explanation was given for the Parkland score of 0% but both complaints for Q2 are pending resolution. HHSC responds to such scores by contacting organizations and discussing next steps towards compliance.

STAR+PLUS

Member Complaints

- Most STAR+PLUS MCOs achieved compliance with the timely resolution of member complaints with the exception of Molina Hidalgo SDA. Molina informed HHSC that one of the organization's teams called the Member Inquiry Research and Resolution (MIRR) team, has quality assurance processes in place to resolve member complaints and meet the timeliness requirements of resolving a complaint. Contributing issues have been addressed with the pertinent staff members to avoid any future low scores for this standard.

Member Appeals

- Most of the STAR+PLUS MCOs achieved compliance with resolution of member appeals within 30 days except Amerigroup-Harris SDA, Cigna-HealthSpring - Hidalgo and MRSA Northeast SDAs, and United Nueces SDAs. The lowest scoring appeals resolution MCO and SDA, United Nueces, missed the metric due to one appeal pending from the previous quarter that was resolved over the 30 day timeframe due to internal misrouting of the case. A total of 21 cases were resolved during the quarter. The United MRSA Central and Northeast SDAs also met standards but the scores were not reflected in time for reporting. There were 14 cases resolved during the quarter for the United MRSA Central SDA and any extensions met the contract requirement for allowed extensions. For MRSA Northeast, two cases required a 14 day extension (1) to allow the member to return the verbal appeal acknowledgement form,

and (2) to allow the member's requested rep to attend the appeal call. The extension is allowed per the contract.

Provider Complaints

- Most of the STAR+PLUS MCOs achieved compliance with the timely resolution of provider complaints. Several organizations achieved a score of 0% due to lack of complaints. United MRSA Northeast complaints are currently pending resolution while the Superior Bexar and Dallas SDA non-compliance scores are the result of issues with the organization's internal complaints processes. Superior informed HHSC that processes are being streamlined to ensure compliance in the future.

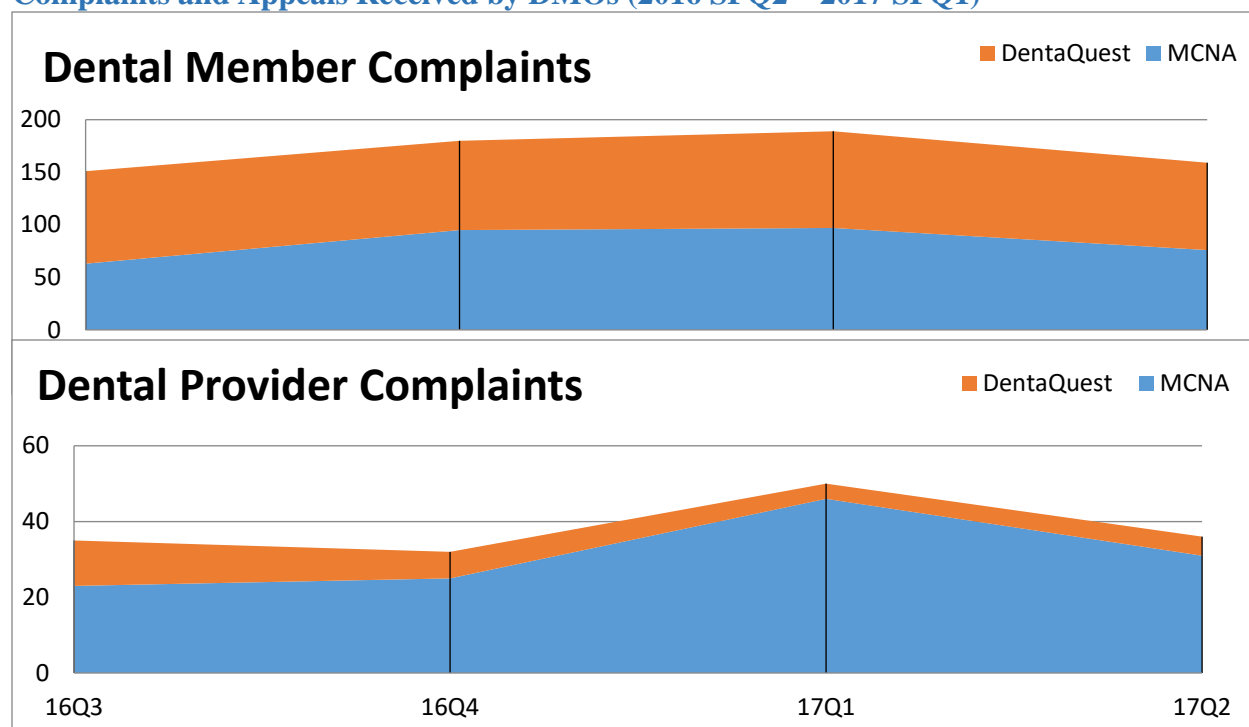
STAR KIDS

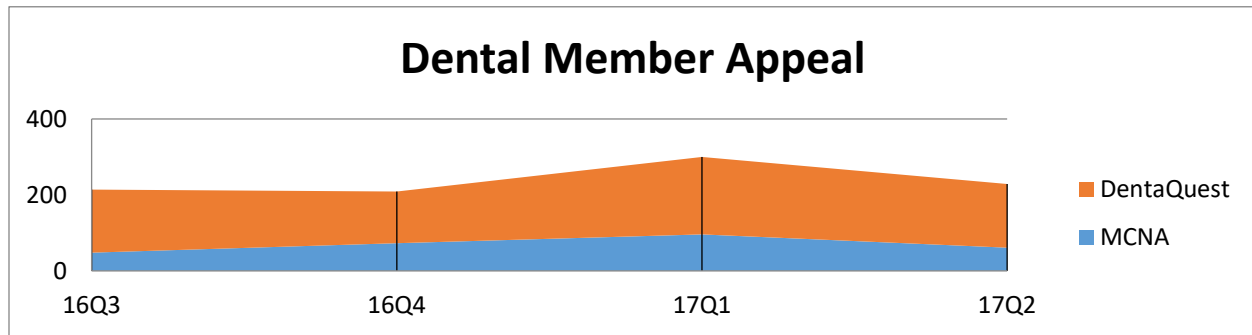
Member complaints and appeals details for STAR Kids will be included in subsequent quarterly reports as data are available.

DENTAL

Between 2017 SFQ1 and 2017 SFQ2 dental member complaints decreased by -16% (from 189 in 2017 SFQ1 to 159 in 2017 SFQ2), member appeals increased by 12% (from 204 in 2017 SFQ1 to 229 in 2017 SFQ2) and provider complaints decreased by -28% (from 50 in 2017 SFQ1 to 36 in 2017 SFQ2). Complaints and appeals are reported in aggregate for each statewide dental plan. MCNA and DentaQuest met all performance standards for the timely resolution of complaints and appeals in 2017 SFQ2.

Complaints and Appeals Received by DMOs (2016 SFQ2 – 2017 SFQ1)





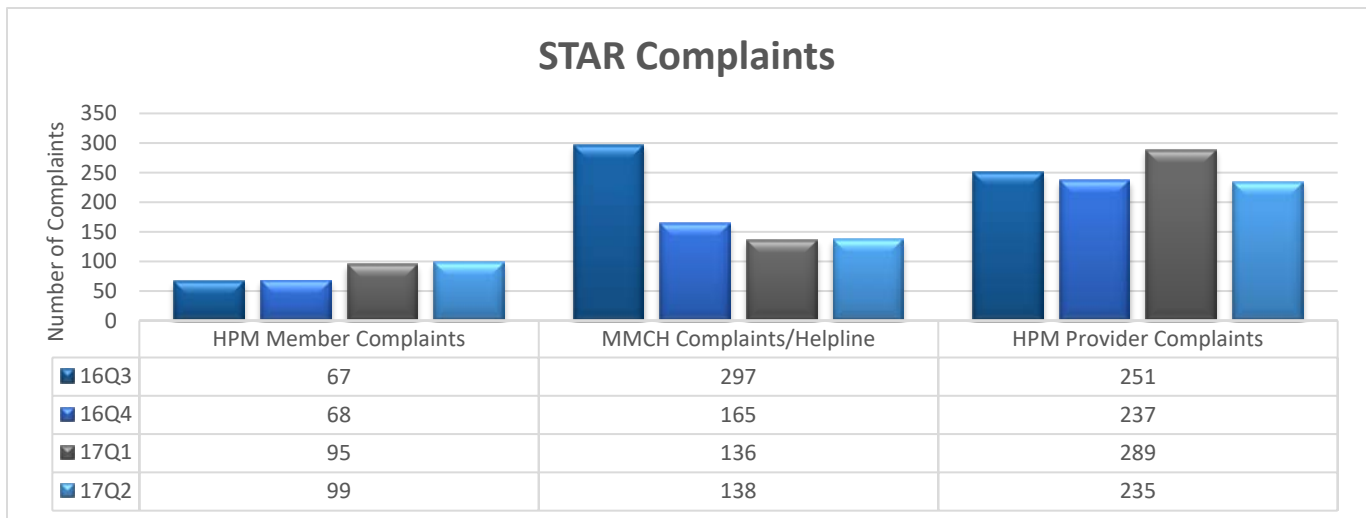
C. COMPLAINTS RECEIVED BY THE STATE

Attachment O includes information concerning Dental, STAR, STAR Kids and STAR+PLUS 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 member and provider 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 increased by 4% from (95 to 99) and the number of member complaints received by MMCH increased by 1% (from 136 to 138) from 2017 SFQ1 to 2017 SFQ2. HPM received thirteen contacts on behalf of members from legislative representatives. The three most common member complaints received by HPM and MMCH were issues related to access to care, billing, and prescriptions. The number of provider complaints received by HPM decreased by -19% (from 289 to 235) in 2017 SFQ2. The most common type of provider complaint received by HPM was denial of claim.

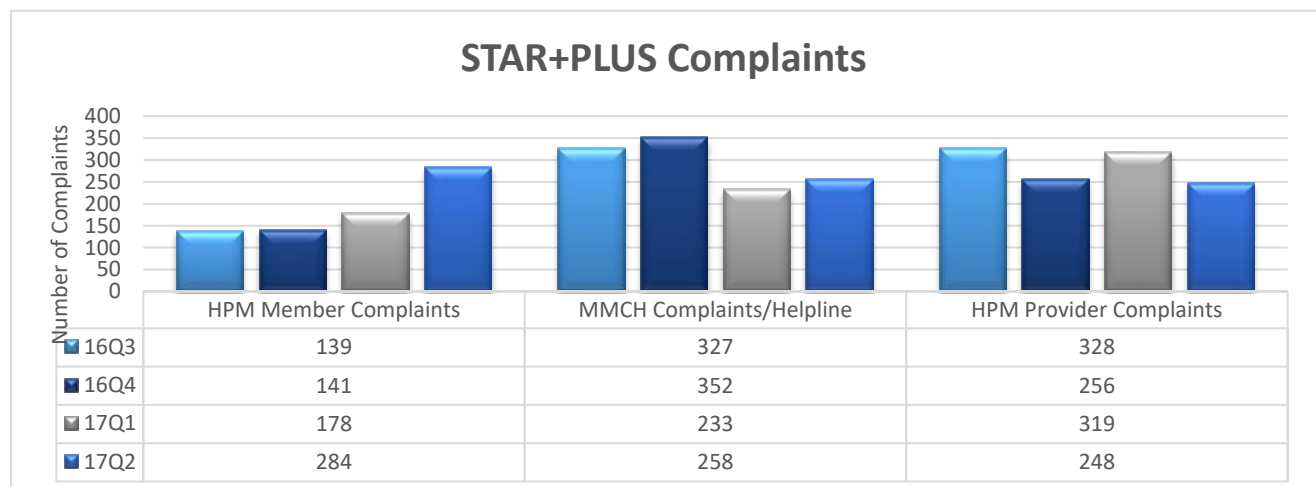
Complaints to the State Regarding STAR (2016 SFQ3 - 2017 SFQ2)



2. STAR+PLUS

Across the STAR+PLUS program, the number of member complaints received by MMCH increased by 11% (from 233 to 258) in 2017 SFQ1 to 2017 SFQ2. The member complaints received by HPM increased by 60% (from 178 to 284) in 2017 SFQ1 to 2017 SFQ2). The most common issue among member complaints received by MMCH and HPM were related to access to care, access to long term care, and benefits. The number of provider complaints decreased by -22 % (from 319 to 248) in 2017 SFQ1 to 2017 SFQ2. The most common issue among provider complaints was denial of claims.

Complaints to the State Regarding STAR+PLUS (2016 SFQ3 - 2017 SFQ2)



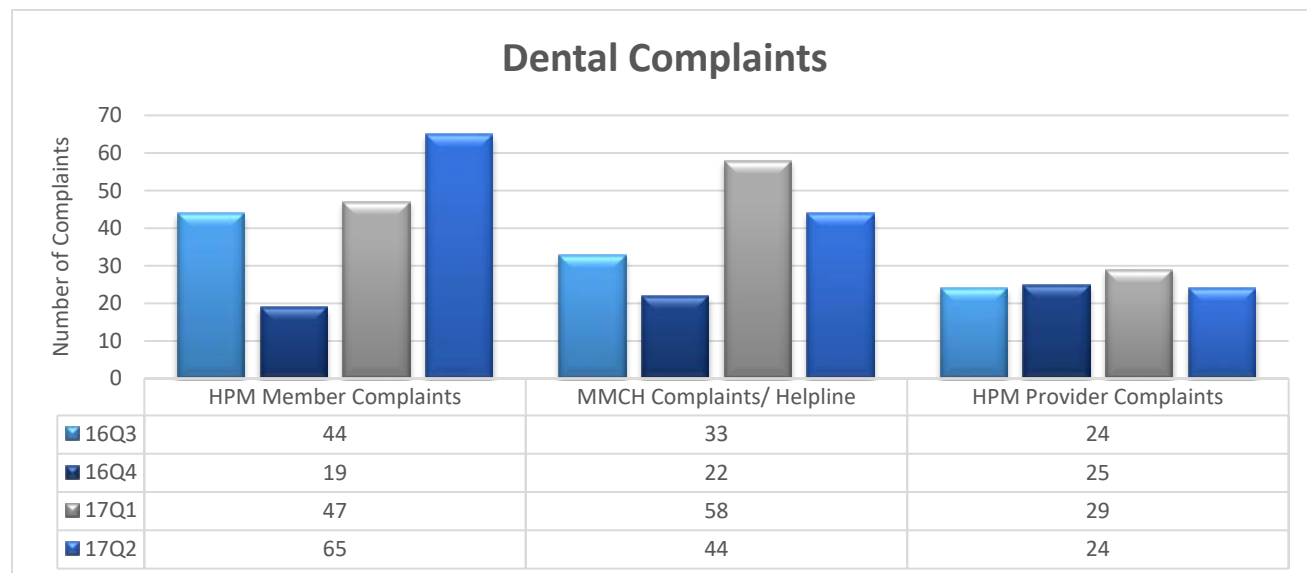
3. STAR Kids

STAR Kids complaint data was available for SFQ2. There were 123 HPM member complaints reported as well as 72 MMCH complaints and 122 HPM provider complaints. In future reports, data will be available to report STAR Kids complaints across quarters. A comparison chart will be added in the subsequent quarter when such data is available.

4. Dental Program

Across the Dental Program, the number of member complaints received by MMCH decreased by -24% from 58 in 2017 SFQ1 to 44 in 2017 SFQ2. The number of member complaints received by HPM increased from 47 to 65 (38%) from 2017 SFQ1 to 2017 SFQ2. Provider complaints decreased by -17% (from 29 to 24) in 2017 SFQ1 to 2017 SFQ2. The most common member complaint for dental programming was related to incorrect enrollment or eligibility information while the most common provider complaint regarded the denial of claims.

Complaints to the State Regarding the Dental Program (2016 SFQ2 - 2017 SFQ1)



IX. QUALITY ASSURANCE/MONITORING ACTIVITY

This section covers quality assurance and monitoring activities that occurred in DY6Q2 SFQ2.

A. DY6Q2 QUARTER 2 UPDATE

Texas's external quality review organization, the Institute for Child Health Policy at the University of Florida (ICHP), produced the calendar year 2015 quality of care results which include health plan level results on Healthcare Effectiveness Data and Information Set (HEDIS) measures and Association for Healthcare Research and Quality (AHRQ) Pediatric Quality Indicators (PDI) and Prevention Quality Indicators (PQI) measures. These results were shared with the health plans and uploaded to the Texas Healthcare Learning Collaborative portal <https://thlcportal.com>.

On December 14, ICHP held their annual Quality Forum for the health plans. Sessions included:

- Measuring Quality in Medicaid Long-Term Services and Supports: Best Practices and Future Directions
- Next Generation THLC Portal Demonstration
- Panel Discussion: Pediatric Quality Measures Program (PQMP) and Electronic Health Record Data Pilot Initiative
- Developing Interventions for Performance Improvement Projects
- STAR Kids – Results from Pre-Implementation Survey
- Transition to Medicaid Managed Care: Impact on Health Quality for Foster Youth

In January, HHSC reported federal fiscal year 2016 adult and child core measure sets results to CMS.

On January 1, the health plans began implementing their 2017 two-year performance improvement projects (PIPs). Topics vary by health plan and program and include asthma, behavioral health, diabetes control, reducing potentially preventable events, increasing the rate of breast and cervical cancer screening, improving rates of preventive dental care, and topics that utilize the STAR Kids Screening and Assessment Instrument to identify needs and enhance care for STAR Kids members.

Senate Bill 760, of the 84th Legislature, Regular Session, 2015 directed the Health and Human Services Commission (HHSC) to establish and implement a process for direct monitoring of health plan provider network and providers in the network, including the length of time a recipient must wait between scheduling an appointment with a provider and receiving treatment from the provider. ICHP is conducting appointment availability studies for the purpose of monitoring appointment access and wait times. MCOs submitted their final plans of action in February in response to the 2015 Appointment Availability Study. Fielding of the 2016 vision study began in February of this year.

The National Core Indicators for Aging and Disabilities survey gauges the experiences of individuals who are aging, have physical disabilities, and receive long term services and supports in Texas. This was the first year this survey has been used in Texas. Designed by the National Association of States United for Aging and Disabilities (NASUAD) and the Human Services Research Institute (HSRI), the survey focused on individuals enrolled in STAR+PLUS, Older Americans Act (OAA) programs, and the Program of All-Inclusive Care for the Elderly (PACE). In December, Texas received their final 2015-2016 NCI-AD state report from NASUAD/HSRI.

In January, Texas completed its first year of accumulating Community Long Term Services and Supports metrics from STAR+PLUS plans and is working to continue to refine these measures in the future. These metrics include measures related to service coordination, personal attendant services, and healthy days in the community.

ENCLOSURES/ATTACHMENTS

Find attachment descriptions listed below:

Attachment A – MCOs by Service Delivery Area. The attachment includes a table of the health and dental plans by SDA.

Attachment B – Enrollment Summary. The attachment includes annual and quarterly Dental, STAR, STAR KIDS, and STAR+PLUS enrollment summaries.

Attachments C1 – C3 – Network Summary and Methodology. The attachments summarize STAR, STAR Kids 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, STAR Kids and STAR+PLUS out-of-network utilization.

Attachment I1-I3 –MCO GeoMapping Summary. The attachment includes the STAR, STAR Kids and STAR+PLUS plans' self-reported GeoMapping results for PCP and specialists.

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

Attachment K – DMO Dental 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 – Complaints and Appeals to MCOs. The attachment includes Dental, STAR, STAR Kids and STAR+PLUS complaints and appeals received by plans.

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

Attachment Q – Members with Special Healthcare Needs (MSHCN) Report. The attachment represents total MSHCN enrollment in STAR and STAR+PLUS during the prior fiscal year.

Attachments R1-R2 – Provider Fraud and Abuse. The attachments represent a summary of the referrals that STAR, STAR+PLUS, and Dental Program plans sent to the OIG during the biannual reporting period.

Attachments V1-V4 – Claims Summary. The attachments are summaries of the MCOs' claims adjudication results.

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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	STAR Kids
Bexar	Aetna Better Health Amerigroup Community First Health Plans Superior HealthPlan	Amerigroup Molina Healthcare of Texas Superior HealthPlan	Community 1st Superior
Dallas	Amerigroup Molina Healthcare of Texas Parkland Community Health Plan	Molina Healthcare of Texas Superior HealthPlan	Amerigroup Children's Medical Center
El Paso	El Paso First Health Plan Molina Healthcare of Texas Superior HealthPlan	Amerigroup Molina Healthcare of Texas	Amerigroup Superior
Harris	Amerigroup Community Health Choice Molina Healthcare of Texas Texas Children's Health Plan UnitedHealthcare Community	Amerigroup Molina Healthcare of Texas UnitedHealthcare Community Plan	Amerigroup Texas Children's United
Hidalgo	Driscoll Children's Health Plan Molina Healthcare of Texas Superior HealthPlan UnitedHealthcare Community	HealthSpring Life & Health Molina Healthcare of Texas Superior HealthPlan	Driscoll Superior United
Jefferson	Amerigroup Community Health Choice Molina Healthcare of Texas Texas Children's Health Plan UnitedHealthcare Community	Amerigroup Molina Healthcare of Texas UnitedHealthcare Community Plan	Texas Children's United
Lubbock	Amerigroup FirstCare HealthPlans Superior HealthPlan	Amerigroup Superior HealthPlan	Amerigroup Superior
MRSA Central	Amerigroup Right Care from Scott & White Superior HealthPlan	Superior HealthPlan UnitedHealthcare Community Plan	BCBS United
MRSA Northeast	Amerigroup Superior HealthPlan	Cigna-HealthSpring UnitedHealthcare	Texas Children's United
MRSA West	Amerigroup FirstCare HealthPlans Superior HealthPlan	Amerigroup Superior HealthPlan	Amerigroup Superior
Nueces	CHRISTUS Health Plan Driscoll Children's Health Plan Superior HealthPlan	Superior HealthPlan UnitedHealthcare Community Plan	Driscoll Superior
Tarrant	Aetna Better Health Amerigroup Cook Children's Health Plan	Amerigroup Cigna-HealthSpring	Aetna Cook Children's
Travis	Blue Cross and Blue Shield of Sendero Health Plans Seton Health Plan Superior HealthPlan	Amerigroup UnitedHealthcare Community Plan	BCBS Superior

Attachment A
Managed Care Plans by Service Area

Service	Children's Medicaid Dental Services (Dental Program)
Statewide	Denta Quest USA Insurance Company, Inc. MCNA Insurance Company

ATTACHMENT B
Enrollment Summary (16Q3 - 17Q2)

Program	Service Area	MCO	16Q3	16Q4	17Q1	17Q2
Dental	Statewide	DentaQuest	1,596,262	1,615,485	1,657,075	1,655,850
		MCNA	1,261,288	1,257,211	1,283,281	1,272,339
Dental Total	All SDAs	All MCOs	2,857,550	2,872,696	2,940,356	2,928,189
STAR	Bexar	Aetna	23,073	22,902	23,164	22,975
		Amerigroup	9,694	9,728	9,750	9,539
		Community 1st	105,866	104,974	105,857	104,105
		Superior	102,871	104,930	107,746	108,778
	Dallas	Amerigroup	200,518	201,180	208,227	205,408
		Molina	18,999	19,243	19,894	20,042
		Parkland	165,980	164,597	166,708	164,592
	El Paso	El Paso 1st	65,970	67,986	66,394	65,167
		Molina	3,412	3,407	3,393	3,353
		Superior	50,303	52,566	53,478	53,140
	Harris	Amerigroup	105,697	105,832	107,683	105,033
		CHC	210,069	212,904	219,796	218,465
		Molina	12,373	12,385	12,521	12,346
		Texas Children's	295,522	304,468	307,392	307,620
		United	44,898	46,374	46,837	50,264
	Hidalgo	Driscoll	79,517	81,555	83,703	84,583
		Molina	58,639	58,057	57,952	56,728
		Superior	151,839	151,368	152,958	151,489
		United	58,941	59,104	59,488	61,057
	Jefferson	Amerigroup	6,474	6,512	6,825	6,818
		CHC	21,367	21,523	22,014	21,966
		Molina	4,083	4,100	4,203	4,093
		Texas Children's	27,998	27,234	28,042	28,216
		United	13,231	13,488	13,948	13,990
	Lubbock	Amerigroup	7,893	7,921	8,180	8,320
		FirstCare	39,694	40,103	40,004	39,294
		Superior	26,227	26,759	27,425	27,419
	MRSA Central	Amerigroup	21,190	21,206	21,720	21,762
		Scott & White	42,374	42,963	42,274	44,301
		Superior	68,524	63,834	65,877	66,553
	MRSA Northeast	Amerigroup	56,233	56,548	58,335	58,155
		Superior	105,770	107,187	110,314	111,194
	MRSA West	Amerigroup	28,473	29,343	30,410	30,555
		FirstCare	53,181	53,350	52,720	51,285
		Superior	68,759	71,273	73,588	74,486
	Nueces	Christus	5,719	5,654	5,576	5,411
		Driscoll	59,076	59,983	62,326	62,865
		Superior	18,067	18,250	19,257	19,372
	Tarrant	Aetna	46,687	46,810	47,645	47,750
		Amerigroup	114,463	114,773	118,218	116,600
		Cook Children's	96,733	97,601	100,881	101,259
	Travis	BCBS	24,026	23,793	24,301	24,927
		Sendero	12,350	12,730	13,138	13,402
		Seton	17,526	17,845	18,225	17,982
		Superior	87,361	86,612	88,284	87,025
STAR Total	All SDAs	All MCOs	2,837,660	2,860,955	2,916,671	2,909,684
STAR+PLUS	Bexar	Amerigroup	10,054	10,222	10,162	9,731
		Molina	8,021	8,075	7,997	7,574
		Superior	29,149	29,524	28,127	27,376
	Dallas	Molina	35,639	36,113	35,977	35,053
		Superior	26,140	26,639	26,477	25,660
	El Paso	Amerigroup	11,519	11,741	11,776	11,101
		Molina	9,178	9,321	9,284	8,979
	Harris	Amerigroup	41,959	42,617	40,595	38,909

ATTACHMENT B
Enrollment Summary (16Q3 - 17Q2)

Program	Service Area	MCO	16Q3	16Q4	17Q1	17Q2
Star+PLUS	Harris	Molina	13,779	13,849	12,963	12,503
		United	48,609	49,369	48,511	47,073
	Hidalgo	Cigna-HealthSpring	18,081	18,192	17,856	17,822
		Molina	15,830	15,951	15,215	14,769
		Superior	33,866	34,133	31,832	31,211
	Jefferson	Amerigroup	7,638	7,587	7,359	7,317
		Molina	7,261	7,157	7,005	6,975
		United	5,436	5,551	5,435	5,441
	Lubbock	Amerigroup	6,588	6,612	6,541	6,518
		Superior	7,144	7,066	6,801	6,757
	MRSA Central	Superior	15,557	15,750	15,525	15,536
		United	14,036	14,090	13,981	13,977
	MRSA Northeast	Cigna-HealthSpring	22,660	22,652	22,518	22,424
		United	23,590	23,608	23,520	23,351
	MRSA West	Amerigroup	17,523	17,450	17,366	17,293
		Superior	20,626	20,712	20,415	20,189
	Nueces	Superior	11,575	11,566	11,179	11,111
		United	10,397	10,362	10,268	10,242
	Tarrant	Amerigroup	29,844	30,537	29,883	28,804
		Cigna-HealthSpring	9,915	9,979	9,950	10,048
	Travis	Amerigroup	12,741	12,720	12,500	12,280
		United	13,157	13,152	12,948	13,081
STAR+PLUS Total	All SDAs	All MCOs	537,512	542,297	529,966	519,105
STAR Kids	Bexar	Community 1st	N/A	N/A	8226	8170
		Superior	N/A	N/A	7397	7283
	Dallas	Amerigroup	N/A	N/A	11927	11960
		Children's Medical C	N/A	N/A	9600	9725
	El Paso	Amerigroup	N/A	N/A	1642	1538
		Superior	N/A	N/A	3332	4971
	Harris	Amerigroup	N/A	N/A	10054	9648
		Texas Children's	N/A	N/A	17334	17959
		United	N/A	N/A	9538	9387
	Hidalgo	Driscoll	N/A	N/A	7436	7027
		Superior	N/A	N/A	7824	8065
		United	N/A	N/A	7358	7328
	Jefferson	Texas Children's	N/A	N/A	2796	2778
		United	N/A	N/A	2176	2194
	Lubbock	Amerigroup	N/A	N/A	1686	1646
		Superior	N/A	N/A	1554	1591
	MRSA Central	BCBS	N/A	N/A	4274	4218
		United	N/A	N/A	107	4484
	MRSA Northeast	Texas Children's	N/A	N/A	4256	4248
		United	N/A	N/A	6731	6705
	MRSA West	Amerigroup	N/A	N/A	7250	7160
		Superior	N/A	N/A	3327	3405
	Nueces	Driscoll	N/A	N/A	3618	3701
		Superior	N/A	N/A	2058	1912
	Tarrant	Aetna	N/A	N/A	5497	5366
		Cook Children's	N/A	N/A	8423	8728
	Travis	BCBS	N/A	N/A	3747	3706
		Superior	N/A	N/A	3742	3818
STAR Kids Total	All SDAs	All MCOs	-	-	162,910	168,721

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 17SFQ1 an annually, terminations are based on self-reported data from the MCOs.

ATTACHMENT C1
Provider Network Count Methodology 17SFQ2

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 17SFQ2

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 17SFQ2

- 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-2
Provider Network Counts (2017 SFQ2)

Program	Service Delivery Area	Managed Care Organization	PCP	Specialist	Dentist	Pharmacy	Unique NPI Total
Dental	Statewide	DentaQuest	.	960	5,340	.	5,434
		MCNA Dental	.	996	4,205	.	4,842
		Unique NPI Program Count	.	1,571	5,486	.	5,686

Attachment C-2
Provider Network Counts (2017 SFQ2)

Program	Service Delivery Area	Managed Care Organization	PCP	Specialist	Dentist	Pharmacy	Unique NPI Total
STAR	Bexar	Aetna	698	3,648	7	4,682	8,974
		Amerigroup Texas, Inc	1,246	3,847	2	2	4,382
		Community First Health Plan	636	3,465	3	359	4,408
		Superior Health Plan	923	5,029	622	406	6,848
		Unique NPI SDA Count	2,030	7,597	623	4,689	13,910
	Dallas	Amerigroup Texas, Inc	2,343	7,103	14	7	8,070
		Molina Healthcare of Texas	621	8,157	614	1,330	10,591
		Parkland Community Health Plan	978	3,920	10	714	5,483
		Unique NPI SDA Count	2,945	13,543	631	1,341	16,667
	El Paso	El Paso First	324	1,062	5	106	1,464
		Molina Healthcare of Texas	215	4,076	378	106	4,728
		Superior Health Plan	352	1,679	237	98	2,300
		Unique NPI SDA Count	496	5,138	589	108	6,089
	Harris	Amerigroup Texas, Inc	2,864	7,129	8	18	8,519
		Community Health Choice	2,325	9,536	20	1,286	12,079
		Molina Healthcare of Texas	1,136	9,717	518	1,348	12,334
		Texas Children's Health Plan	987	4,520	13	1,276	6,785
		United Health Care	2,134	6,456	177	1,181	9,779
		Unique NPI SDA Count	5,054	17,308	654	1,379	20,873
	Hidalgo	Driscoll Children's Health Plan	873	2,545	9	256	3,032
		Molina Healthcare of Texas	596	5,036	385	297	6,115
		Superior Health Plan	892	2,394	502	272	3,905
		United Health Care	1,022	1,624	56	234	2,785
		Unique NPI SDA Count	1,754	7,569	856	299	9,248
	Jefferson	Amerigroup Texas, Inc	2,576	7,099	8	15	8,274
		Community Health Choice	2,290	9,283	20	128	10,676
		Molina Healthcare of Texas	1,130	9,136	520	1,160	11,591
		Texas Children's Health Plan	191	4,520	13	128	4,849
		United Health Care	1,259	6,800	180	395	8,552
		Unique NPI SDA Count	4,450	17,268	659	1,178	20,396
	Lubbock	Amerigroup Texas, Inc	664	1,738	0	0	1,938
		FirstCare	1,293	803	2	0	2,082
		Superior Health Plan	654	1,416	205	155	2,368
		Unique NPI SDA Count	1,652	2,836	207	155	4,168
	MRSA Central	Amerigroup Texas, Inc	4,154	5,367	3	3	8,323
		Scott & White RightCare	1,040	5,248	7	226	5,563
		Superior Health Plan	2,398	6,148	285	790	9,386
		Unique NPI SDA Count	5,457	11,718	292	810	15,958
	MRSA Northeast	Amerigroup Texas, Inc	3,338	4,129	7	6	6,241
		Superior Health Plan	1,143	3,706	306	626	5,686
		Unique NPI SDA Count	3,591	5,743	307	628	8,900
	MRSA West	Amerigroup Texas, Inc	3,338	4,888	5	0	6,735
		FirstCare	1,711	803	2	0	2,494
		Superior Health Plan	1,401	3,010	286	433	4,971
		Unique NPI SDA Count	4,205	6,472	291	433	9,501
	Nueces	Christus	230	3,052	13	2	3,121
		Driscoll Children's Health Plan	871	2,521	9	120	2,871
		Superior Health Plan	843	2,487	192	287	3,684
		Unique NPI SDA Count	1,324	6,388	212	300	7,331
	Tarrant	Aetna	928	3,069	8	4,682	8,560
		Amerigroup Texas, Inc	2,280	7,067	14	7	7,980
		Cook Children's Health Plan	695	2,636	8	2	3,331
		Unique NPI SDA Count	2,721	9,297	16	4,683	15,089
	Travis	BCBS	852	5,374	4	4,552	10,714
		Sendero	527	2,599	11	300	3,001
		Seton Health Plan	1,316	1,317	1	300	2,711

Attachment C-2
 Provider Network Counts (2017 SFQ2)

Program	Service Delivery Area	Managed Care Organization	PCP	Specialist	Dentist	Pharmacy	Unique NPI Total
STAR		Superior Health Plan	1,526	5,145	353	396	7,246
		Unique NPI SDA Count	2,957	9,115	359	4,559	15,847
	All SDAs	Unique NPI Program Count	19,671	57,602	2,922	4,898	71,449

Attachment C-2
Provider Network Counts (2017 SFQ2)

Program	Service Delivery Area	Managed Care Organization	PCP	Specialist	Dentist	Pharmacy	Unique NPI Total
STAR+PLUS	Bexar	Amerigroup Texas, Inc.	950	3,896	2	2	4,316
		Molina Healthcare of Texas	378	6,651	430	431	7,758
		Superior Health Plan	926	5,149	622	406	6,972
		Unique NPI SDA Count	1,578	9,665	980	438	11,815
	Dallas	Molina Healthcare of Texas	682	7,435	600	1,330	9,922
		Superior Health Plan	1,394	7,251	1,097	1,187	10,815
		Unique NPI SDA Count	1,737	11,678	1,488	1,353	15,781
	El Paso	Amerigroup Texas, Inc.	332	1,238	1	0	1,317
		Molina Healthcare of Texas	221	4,084	377	106	4,741
		Unique NPI SDA Count	389	4,580	377	106	5,163
	Harris	Amerigroup Texas, Inc.	2,418	7,204	8	18	8,382
		Molina Healthcare of Texas	1,058	9,288	529	1,348	11,839
		United Healthcare	1,894	6,004	236	1,210	9,180
		Unique NPI SDA Count	3,688	14,621	710	1,366	18,338
	Hidalgo	Cigna-HealthSpring	426	1,632	8	261	2,096
		Molina Healthcare of Texas	597	5,072	386	297	6,153
		Superior Health Plan	889	2,547	502	272	4,056
		Unique NPI SDA Count	1,083	6,472	842	300	8,007
	Jefferson	Amerigroup Texas, Inc.	2,177	7,176	8	15	8,180
		Molina Healthcare of Texas	1,035	8,705	530	1,160	11,092
		United Healthcare	1,115	6,384	247	423	8,086
		Unique NPI SDA Count	3,117	14,706	719	1,176	17,980
	Lubbock	Amerigroup Texas, Inc.	692	1,764	0	0	1,987
		Superior Health Plan	649	1,720	205	155	2,669
		Unique NPI SDA Count	914	2,568	205	155	3,266
	MRSA Central	Superior Health Plan	2,386	7,604	284	790	10,829
		United Healthcare	933	1,794	40	215	2,878
		Unique NPI SDA Count	2,711	8,030	294	806	11,290
	MRSA Northeast	Cigna-HealthSpring	462	1,625	6	316	2,297
		United Healthcare	798	1,993	50	293	3,046
		Unique NPI SDA Count	997	3,066	52	321	4,211
	MRSA West	Amerigroup Texas, Inc.	1,650	4,654	2	0	5,011
		Superior Health Plan	1,377	4,522	286	433	6,464
		Unique NPI SDA Count	2,252	7,439	287	433	8,897
	Nueces	Superior Health Plan	842	2,616	192	287	3,810
		United Healthcare	310	704	13	112	1,120
		Unique NPI SDA Count	1,022	2,844	198	299	4,173
	Tarrant	Amerigroup Texas, Inc.	1,775	7,139	14	7	7,793
		Cigna-HealthSpring	239	1,518	0	547	2,177
		Unique NPI SDA Count	1,874	7,932	14	551	9,078
	Travis	Amerigroup Texas, Inc.	1,076	2,378	2	2	3,153
		United Healthcare	661	1,688	15	100	2,403
		Unique NPI SDA Count	1,474	3,448	16	102	4,621
	All SDAs	Unique NPI Program Count	15,049	50,537	3,208	4,771	65,080

Attachment C-2
Provider Network Counts (2017 SFQ2)

Program	Service Delivery Area	Managed Care Organization	PCP	Specialist	Dentist	Pharmacy	Unique NPI Total
STAR Kids	Bexar	Community First Health Plan	353	2,079	2	359	2,766
		Superior Health Plan	742	4,227	6	406	5,171
		Unique NPI SDA Count	851	4,926	6	427	5,956
	Dallas	Amerigroup Texas, Inc.	1,221	6,814	14	7	6,935
		Children's Medical Center	578	3,905	8	722	5,193
		Unique NPI SDA Count	1,533	8,820	18	726	9,889
	El Paso	Amerigroup Texas, Inc.	271	1,192	1	0	1,225
		Superior Health Plan	273	1,523	5	98	1,836
		Unique NPI SDA Count	426	2,032	5	98	2,255
	Harris	Amerigroup Texas, Inc.	1,484	7,085	8	18	7,296
		Texas Children's Health Plan	1,184	5,215	16	1	6,400
		United Healthcare	2,760	5,253	7	1,205	8,686
		Unique NPI SDA Count	4,013	11,762	20	1,211	14,790
	Hidalgo	Driscoll Children's Health Plan	786	2,751	9	258	3,768
		Superior Health Plan	772	2,251	11	272	3,142
		United Healthcare	1,274	1,507	5	234	2,720
		Unique NPI SDA Count	1,809	4,453	20	289	5,959
	Jefferson	Texas Children's Health Plan	232	5,215	16	1	5,462
		United Healthcare	1,581	5,547	7	423	7,424
		Unique NPI SDA Count	1,675	8,586	16	424	10,348
	Lubbock	Amerigroup Texas, Inc.	573	1,779	0	0	1,859
		Superior Health Plan	522	1,173	2	155	1,759
		Unique NPI SDA Count	744	2,192	2	155	2,503
	MRSA Central	BCBS	1,147	5,665	8	4,552	11,294
		United Healthcare	1,824	1,784	7	244	3,684
		Unique NPI SDA Count	2,603	6,548	12	4,554	13,171
	MRSA Northeast	United Healthcare	429	5,215	16	1	5,651
		Texas Children's Health Plan	1,890	2,136	8	317	3,802
		Unique NPI SDA Count	1,994	6,864	21	318	8,552
	MRSA West	Amerigroup Texas, Inc.	1,125	3,290	0	0	3,518
		Superior Health Plan	1,079	2,819	5	433	4,090
		Unique NPI SDA Count	1,562	4,676	5	433	5,567
	Nueces	Driscoll Children's Health Plan	786	2,741	9	127	3,642
		Superior Health Plan	679	2,341	8	287	3,172
		Unique NPI SDA Count	1,116	4,063	16	302	5,263
	Tarrant	Aetna	1,025	3,625	7	4,382	8,829
		Cook Children's Health Plan	429	1,850	0	558	2,833
		Unique NPI SDA Count	1,152	4,508	7	4,434	9,807
	Travis	BCBS	1,144	5,665	8	4,552	11,291
		Superior Health Plan	691	3,645	1	396	4,588
		Unique NPI SDA Count	1,608	7,916	8	4,557	13,758

Attachment C3 - Provider Termination
(2017 SFQ2)

Program	MCO	SDA	PCP Termination	Specialist Termination
Dental	DentaQuest	Statewide	257	57
	MCNA	Statewide	112	7
STAR	Aetna	Bexar	13	129
		Tarrant	6	107
	Aetna Total		19	236
	Amerigroup	Bexar	6	41
		Dallas	8	29
		Harris	8	66
		Jefferson	17	10
		Lubbock	48	52
		MRSA Central	2	23
		MRSA NE	11	28
		MRSA West	29	37
		Tarrant	10	35
	Amerigroup Total		133	280
	BCBS	Travis	90	161
	Community Health Choice	Harris	53	96
		Jefferson	23	9
	CHC Total		76	105
	Christus	Nueces	0	
	Community First	Bexar	5	17
	Cook	Tarrant	15	23
	Driscoll	Hidalgo	12	14
		Nueces	2	11
	Driscoll Total		14	25
	El Paso First	El Paso	6	68
	FirstCare	Lubbock	4	25
		MRSA West	32	144
	FirstCare Total		36	169
	Molina	El Paso	1	169
		Dallas	2	416
		Harris	1	379
		Hidalgo	2	203
		Jefferson	4	363
	Molina Total		10	1,530
	Parkland	Dallas	10	97
	Scott & White	MRSA Central	33	327
	Sendero	Travis	21	80
	Seton	Travis		
	Superior	Bexar	21	43
		El Paso	26	41
		Hidalgo	26	41
		Lubbock	26	41
		MRSA Central	21	43
		MRSA NE	17	59
		MRSA West	33	43
		Nueces	11	21
		Travis	11	21
	Superior Total		192	353
	Texas Children's	Harris	9	23
		Jefferson	9	23
	Texas Children's Total		18	46
	United	Harris	33	74
		Hidalgo	8	10

Attachment C3 - Provider Termination
(2017 SFQ2)

Program	MCO	SDA	PCP Termination	Specialist Termination
STAR	United	Jefferson	20	34
	United Total		61	118
STAR+PLUS	Amerigroup	Bexar	6	41
		El Paso	3	9
		Harris	9	65
		Jefferson	16	13
		Lubbock	51	54
		MRSA West	14	27
		Tarrant	11	36
		Travis	3	39
	Amerigroup Total		113	284
	Cigna-HealthSpring	Hidalgo	0	21
		MRSA NE	3	54
		Tarrant	2	29
	Cigna-HealthSpring Total		5	104
	Molina	Bexar	0	36
		Dallas	1	374
		El Paso	1	329
		Harris	1	374
		Hidalgo	1	201
		Jefferson	4	354
	Molina Total		8	1668
	Superior	Bexar	19	88
		Dallas	30	186
		Hidalgo	27	39
		Lubbock	36	31
		MRSA Central	20	43
		MRSA West	31	43
		Nueces	11	20
	Superior Total		174	450
	United	Harris	43	67
		Jefferson	33	24
		MRSA NE	35	14
		MRSA Central	16	14
		Nueces	14	4
		Travis	15	24
	United Total		156	147
STAR Kids	Aetna	Tarrant	0	0
	Amerigroup	Dallas	8	28
		El Paso	3	10
		Harris	8	67
		Lubbock	46	53
		MRSA West	17	25
	Amerigroup Total		82	183
	BCBS	MRSA Central	73	325
		Travis	73	332
	BCBS Total		146	657
	Children's Medical Center	Dallas	7	69
	Community 1st	Bexar	4	8
	Cook Children's	Tarrant	24	32
	Driscoll	Hidalgo	12	13
		Nueces	2	11
	Driscoll Total		14	24

Attachment C3 - Provider Termination
(2017 SFQ2)

Program	MCO	SDA	PCP Termination	Specialist Termination
STAR Kids	Superior	Bexar	0	0
		El Paso	6	18
		Hidalgo	21	29
		Lubbock	14	13
		MRSA West	16	23
		Nueces	22	35
		Travis	22	35
	Superior Total		101	153
	Texas Children's	Harris	10	22
		Jefferson	10	22
		MRSA Northeast	4	4
	Texas Children's Total		24	48
	United	Harris	21	81
		Hidalgo	11	12
		Jefferson	24	38
		MRSA Central	19	23
		MRSA Northeast	37	18
	United Total		112	172

ATTACHMENT D
Out-of-Network Utilization (2017 Q2)

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	14.08%		25.84%		16.93%	
		Tarrant	4.21%		15.46%		22.34%	
	Amerigroup	Bexar	2.00%		1.00%		6.00%	
		Dallas	10.00%		22.00%		12.00%	
		Harris	8.00%		24.00%		14.00%	
		Jefferson	3.00%		10.00%		8.00%	
		Lubbock	3.00%		1.00%		9.00%	
		MRSA Central	17.00%		20.00%		17.00%	
		MRSA NE	8.00%		8.00%		17.00%	
		MRSA West	3.00%		3.00%		15.00%	
		Tarrant	5.00%		11.00%		11.00%	
	BCBS TX	Travis	6.37%		11.29%		19.23%	
	CHC	Harris	0.47%		5.84%		3.98%	
		Jefferson	0.94%		2.50%		5.12%	
	Christus	Nueces	6.44%		1.84%		28.01%	
	Community 1st	Bexar	1.63%		2.82%		11.15%	
	Cook	Tarrant	2.95%		10.63%		4.27%	
	Driscoll	Hidalgo	0.82%		2.91%		6.32%	
		Nueces	2.04%		2.53%		4.51%	
	El Paso 1st	El Paso	0.55%		1.07%		18.37%	
	First Care	Lubbock	0.97%		4.10%		8.34%	
		MRSA West	3.52%		3%		19.91%	
	Molina	Dallas	26.71%	5%	31.26%	7.00%	14.08%	
		El Paso	4.08%		14.74%		11.19%	
		Harris	4.59%		9.75%		11.54%	
		Hidalgo	4.83%		9.96%		13.71%	
		Jefferson	6.78%		14.88%		20.44%	
	Parkland	Dallas	2.24%		12.36%		17.29%	
	Scott and White	MRSA Central	3.89%		13.04%		4.58%	
	Sendero	Travis	2.00%		5.69%		2.75%	
	Seton	Travis	13.25%		31.66%		14.00%	
	Superior	Bexar	1.40%		1.45%		6.33%	
		El Paso	0.68%		0.63%		3.06%	
		Hidalgo	0.68%		0.63%		3.06%	
		Lubbock	0.68%		0.63%		3.06%	
		MRSA Central	1.40%		1.45%		6.33%	

ATTACHMENT D
Out-of-Network Utilization (2017 Q2)

Program	MCO Name	Service Area	Inpatient (15% Standard)	Recalculated Inpatient	ER (20% Standard)	Recalculated ER	Outpatient (20% Standard)	Recalculated Outpatient
STAR	Superior	MRSA NE	2.12%		3.56%		12.03%	
		MRSA West	1.98%		0.79%		0.00%	
		Nueces	0.86%		0.52%		4.17%	
		Travis	0.86%		0.52%		4.17%	
	Texas Children's	Harris	2.83%		4.46%		0.00%	
		Jefferson	2.83%		4.46%		0.00%	
	United	Harris	3.82%		11.87%		8.71%	
		Hidalgo	2.01%		14.38%		6.78%	
		Jefferson	1.44%		5.28%		10.75%	
STAR+PLUS	Amerigroup	Bexar	2.74%		3.45%		7.24%	
		El Paso	2.00%		2.00%		6.00%	
		Harris	17.35%		20.00%		14.44%	
		Jefferson	8.00%		6.00%		11.00%	
		Lubbock	3.00%		3.00%		4.00%	
		MRSA West	13.00%		7.00%		10.00%	
		Tarrant	14.77%		12.88%		14.23%	
		Travis	5.31%		5.84%		4.49%	
	Cigna-HealthSpring	Hidalgo	15.63%	6%	17.71%		9.78%	
		MRSA NE	7.66%		8.59%		9.46%	
		Tarrant	35.16%		48.97%		39.83%	
	Molina	Bexar	3.55%		7.36%		16.91%	
		Dallas	5.61%		5.70%		16.32%	
		El Paso	0.00%		1.10%		9.23%	
		Harris	5.61%		5.70%		16.32%	
		Hidalgo	8.09%		11.34%		9.14%	
		Jefferson	1.45%		6.42%		13.62%	
	Superior	Bexar	6.20%		0.60%		8.42%	
		Dallas	25.53%	14%	33.42%	5.00%	13.61%	
		Hidalgo	8.04%		1.27%		4.17%	
		Lubbock	7.11%		1.21%		5.49%	
		MRSA Central	5.22%		1.97%		8.81%	
		MRSA West	8.04%		1.27%		0.00%	
		Nueces	3.99%		0.43%		10.99%	
	United	Harris	26.76%	4%	39.15%	8.00%	11.74%	
		Jefferson	12.01%		7.72%		14.65%	
		MRSA Central	14.61%	12%	20.40%	12.00%	9.20%	
		MRSA NE	9.31%		10.88%		9.11%	

ATTACHMENT D
Out-of-Network Utilization (2017 Q2)

Program	MCO Name	Service Area	Inpatient (15% Standard)	Recalculated Inpatient	ER (20% Standard)	Recalculated ER	Outpatient (20% Standard)	Recalculated Outpatient
STAR+PLUS	United	Nueces	2.55%		1.51%		5.38%	
		Travis	2.83%		2.48%		6.38%	
STAR Kids	Aetna	Tarrant	18.00%		15.00%		24.00%	
	Amerigroup	Dallas	9.00%		19.00%		6.00%	
		El Paso	3.00%		1.00%		6.00%	
		Harris	18.25%		15.52%		24.38%	
		Lubbock	4.00%		0.00%		3.00%	
		MRSA West	1.00%		1.00%		8.00%	
	BCBS	MRSA Central	13.26%		15.94%		21.63%	
		Travis	1.82%		1.32%		25.05%	
	Children's Medical Center	Dallas	0.00%		4.94%		2.02%	
	Community 1st	Bexar	4.64%		5.47%		6.42%	
	Cook Children's	Tarrant	0.76%		8.99%		5.40%	
	Driscoll	Hidalgo	3.77%		1.83%		85.57%	
		Nueces	10.00%		3.20%		74.54%	
	Superior	Bexar	7.83%		0.68%		6.37%	
		El Paso	0.75%		0.32%		8.32%	
		Hidalgo	3.13%		0.56%		3.09%	
		Lubbock	6.90%		12.80%		7.08%	
		MRSA West	18.92%		1.62%		0.00%	
		Nueces	4.62%		1.07%		5.36%	
		Travis	11.69%		5.96%		6.38%	
	Texas Children's	Harris	25.64%	12%	17.50%		0.00%	
		Jefferson	25.64%	12%	17.50%		0.00%	
		MRSA Northeast	20.00%	4%	23.30%	3.00%	0.00%	
	United	Harris	5.21%		14.81%		10.57%	
		Hidalgo	3.69%		1.06%		10.77%	
		Jefferson	3.13%		16.67%		9.30%	
		MRSA Central	13.01%		16.29%		11.29%	
		MRSA Northeast	21.54%		11.92%		11.69%	

ATTACHMENT I-1
STAR MCO GeoMapping (17SFQ2)

ATTACHMENT I-2
STAR+Plus MCO GeoMapping (17SFQ2)

**ATTACHMENT I-3
STAR Kids MCO GeoMapping (17SFQ2)**

MCO	SDA	% of Child Members w/in 30 Miles of Two Open Panel PCPs :	% of Female Child Members w/in 75 Miles of One Obstetrician / Gynecologist :	% of Child Members w/in 75 Miles of One Orthopedic Surgeon :	% of Child Members w/in 75 Miles of One ENT :	% of Child Members in Urban Counties w/in 30 Miles of One Outpatient BH Provider :	% of Child Members in Rural Counties w/in 75 Miles of One Outpatient BH Provider :	% of Child Members w/in 30 Miles of One Acute Care Hospital :
Aetna	Tarrant	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Amerigroup	Dallas	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
	El Paso	99.9%	100.0%	99.9%	99.9%	100.0%	100.0%	99.8%
	Harris	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%	100.0%	99.9%
	MRSA West	86.4%	94.4%	85.0%	72.1%	100.0%	99.8%	73.7%
BCBS	MRSA Central	99.40%	100.00%	99.90%	99.90%	100.00%	100.00%	80.60%
	Travis	99.90%	100.00%	99.90%	99.90%	100.00%	100.00%	94.10%
Children's Medical Center	Dallas	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Community 1st	Bexar	99.90%	99.90%	99.90%	99.90%	100.00%	99.80%	99.50%
Cook Children's	Tarrant	99.8%	99.8%	99.8%	99.8%	100.0%	100.0%	99.8%
Driscoll	Hidalgo	99.90%	99.50%	98.10%	98.10%	99.50%	100.00%	97.80%
	Nueces	99.90%	100.00%	100.00%	99.80%	99.80%	100.00%	98.90%
Superior	Bexar	100.00%	100.00%	100.00%	100.00%	100.00%	N/a	99.90%
	El Paso	99.90%	100.00%	100.00%	99.90%	100.00%	100.00%	99.70%
	Hidalgo	99.90%	100.00%	100.00%	100.00%	99.90%	100.00%	98.90%
	Lubbock	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.90%
	MRSA West	99.30%	99.10%	99.30%	97.20%	99.90%	99.90%	96.80%
	Nueces	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	97.90%
	Travis	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Texas Children's	Harris	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	Jefferson	99.90%	99.00%	99.60%	99.30%	99.50%	99.20%	99.50%
	MRSA NE	97.70%	99.40%	99.40%	96.20%	97.90%	99.80%	98.30%
United	Harris	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
	Hidalgo	100.00%	100.00%	99.10%	99.10%	100.00%	100.00%	99.00%
	Jefferson	100.00%	100.00%	99.80%	100.00%	100.00%	100.00%	93.30%
	MRSA Central	99.60%	100.00%	97.50%	100.00%	100.00%	100.00%	95.40%
	MRSA NE	99.80%	100.00%	99.90%	98.20%	100.00%	100.00%	94.40%

ATTACHMENT J
Pharmacy GeoMapping
17SFQ2

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	90.20%	66.60%	100.00%
	STAR	Tarrant	N/A	N/A	98.90%	93.50%	85.30%	100.00%
	STAR Kids	Tarrant	N/A	N/A	97.50%	92.20%	89.10%	100.00%
Amerigroup	STAR	Bexar	N/A	N/A	100.00%	89.63%	66.29%	100.00%
	STAR+PLUS	Bexar	N/A	N/A	100.00%	92.00%	74.00%	100.00%
	STAR	Dallas	N/A	N/A	97.00%	91.00%	88.00%	100.00%
	STAR+PLUS	El Paso	N/A	N/A	0.00%	84.00%	0.00%	100.00%
	STAR	Harris	N/A	N/A	94.00%	95.00%	87.00%	100.00%
	STAR+PLUS	Harris	N/A	N/A	95.00%	95.00%	88.00%	100.00%
	STAR	Jefferson	N/A	N/A	95.00%	81.00%	64.00%	100.00%
	STAR+PLUS	Jefferson	N/A	N/A	94.00%	83.00%	73.00%	100.00%
	STAR	Lubbock	N/A	N/A	92.00%	84.00%	84.00%	100.00%
	STAR+PLUS	Lubbock	N/A	N/A	92.00%	87.00%	83.00%	100.00%
	STAR	MRSA Central	78.00%	72.00%	95.00%	N/A	N/A	100.00%
	STAR	MRSA Northeast	66.00%	50.00%	97.00%	N/A	N/A	99.00%
	STAR	MRSA West	72.00%	38.00%	85.00%	N/A	N/A	79.00%
	STAR+PLUS	MRSA West	82.00%	44.00%	83.00%	N/A	N/A	75.00%
	STAR	Tarrant	N/A	N/A	96.00%	94.00%	87.00%	100.00%
	STAR+PLUS	Tarrant	N/A	N/A	99.00%	95.00%	86.00%	100.00%
BCBS	STAR+PLUS	Travis	N/A	N/A	92.00%	84.00%	81.00%	100.00%
	STAR Kids	MRSA West	N/A	N/A	96.10%	73.10%	78.90%	99.00%
	STAR	Travis	N/A	N/A	93.00%	78.70%	80.00%	99.90%
Children's Medical Center	STAR Kids	Travis	N/A	N/A	89.70%	79.20%	85.00%	99.90%
	STAR Kids	Dallas	N/A	N/A	99.20%	95.30%	89.70%	99.70%
	STAR	Harris	N/A	N/A	99.10%	96.80%	93.90%	99.90%
	STAR	Jefferson	N/A	N/A	97.80%	89.50%	74.10%	99.90%
Christus	STAR	Nueces	N/A	N/A	96.70%	84.60%	86.20%	88.90%
Cigna-HealthSpring	STAR+PLUS	Hidalgo	N/A	N/A	97.00%	82.30%	N/A	83.40%
	STAR+PLUS	MRSA Northeast	N/A	N/A	98.90%	76.60%	54.10%	98.00%
Community 1st	STAR	Bexar	N/A	N/A	93.90%	94.10%	78.60%	99.90%
	STAR Kids	Bexar	N/A	N/A	85.00%	94.00%	77.00%	99.50%
Cook Children's	STAR	Tarrant	N/A	N/A	97.80%	96.80%	84.80%	99.90%
Driscoll	STAR	Hidalgo	N/A	N/A	93.70%	81.60%	88.10%	76.20%
	STAR Kids	Hidalgo	N/A	N/A	94.40%	81.10%	83.30%	77.80%
	STAR	Nueces	N/A	N/A	98.70%	87.80%	88.50%	87.30%
	STAR Kids	Nueces	N/A	N/A	98.70%	89.70%	86.50%	86.70%
El Paso 1st	STAR	El Paso	N/A	N/A	4.30%	82.00%	100.00%	99.90%
FirstCare	STAR	Lubbock	N/A	N/A	95.70%	89.90%	82.40%	99.90%
	STAR	MRSA West	81.40%	52.60%	89.90%	N/A	N/A	87.20%
Molina	STAR+PLUS	Bexar	N/A	N/A	N/A	91.40%	66.90%	100.00%
	STAR	Dallas	N/A	N/A	98.30%	90.70%	90.90%	100.00%

ATTACHMENT J
Pharmacy GeoMapping
17SFQ2

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)
Molina	STAR+PLUS	Dallas	N/A	N/A	96.50%	89.50%	84.80%	100.00%
	STAR	El Paso	N/A	N/A	N/A	80.20%	0.00%	99.90%
	STAR+PLUS	El Paso	N/A	N/A	N/A	84.30%	0.00%	99.90%
	STAR	Harris	N/A	N/A	94.80%	95.80%	90.60%	100.00%
	STAR+PLUS	Harris	N/A	N/A	97.10%	95.50%	88.90%	100.00%
	STAR	Hidalgo	N/A	N/A	9690.00%	70.20%	N/A	74.90%
	STAR+PLUS	Hidalgo	N/A	N/A	96.70%	77.60%	N/A	77.10%
	STAR	Jefferson	N/A	N/A	91.50%	84.30%	72.40%	99.90%
	STAR+PLUS	Jefferson	N/A	N/A	96.00%	8435.00%	72.10%	100.00%
Parkland	STAR	Dallas	N/A	N/A	97.20%	91.10%	82.30%	99.90%
Sendero	STAR	Travis	N/A	N/A	97.50%	83.90%	78.70%	99.90%
Scott & White	STAR	MRSA Central	78.60%	77%	98.60%	N/A	N/A	99.90%
Seton	STAR	Travis	N/A	N/A	98.40%	85.70%	85.10%	99.90%
Superior	STAR	Bexar	N/A	N/A	N/A	85.70%	59.90%	100.00%
	STAR+PLUS	Bexar	N/A	N/A	N/A	86.80%	61.70%	100.00%
	STAR Kids	Bexar	N/A	N/A	N/A	86.30%	60.70%	100.00%
	STAR+PLUS	Dallas	N/A	N/A	97.20%	84.10%	81.40%	100.00%
	STAR	El Paso	N/A	N/A	0.00%	75.00%	N/A	99.90%
	STAR Kids	El Paso	N/A	N/A	0.00%	78.10%	N/A	100.00%
	STAR	Hidalgo	N/A	N/A	94.20%	66.20%	N/A	82.10%
	STAR+PLUS	Hidalgo	N/A	N/A	89.20%	74.30%	N/A	79.50%
	STAR Kids	Hidalgo	N/A	N/A	83.30%	69.80%	N/A	76.50%
	STAR	Lubbock	N/A	N/A	92.90%	85.60%	N/A	100.00%
	STAR+PLUS	Lubbock	N/A	N/A	94.10%	86.50%	84.10%	100.00%
	STAR Kids	Lubbock	N/A	N/A	96.00%	83.70%	80.60%	100.00%
	STAR	Nueces	N/A	N/A	95.80%	81.70%	85.60%	100.00%
	STAR+PLUS	Nueces	83.30%	N/A	95.70%	81.70%	83.30%	100.00%
	STAR Kids	Nueces	N/A	N/A	97.30%	83.40%	90.70%	100.00%
	STAR	MRSA Central	72.00%	70.00%	94.20%	N/A	N/A	100.00%
	STAR+PLUS	MRSA Central	71.70%	64.70%	94.80%	N/A	N/A	100.00%
	STAR	MRSA Northeast	55.60%	44.10%	97.40%	N/A	N/A	100.00%
	STAR	MRSA West	74.30%	46.80%	87.40%	N/A	N/A	84.00%
	STAR+PLUS	MRSA West	79.70%	42.60%	87.80%	N/A	N/A	88.40%
	STAR Kids	MRSA West	80.70%	44.20%	93.50%	N/A	N/A	86.90%
	STAR	Travis	N/A	N/A	92.90%	71.90%	75.80%	100.00%
	STAR Kids	Travis	N/A	N/A	96.70%	74.80%	80.60%	100.00%
TCHP	STAR	Harris	N/A	N/A	98.90%	97.30%	93.60%	99.90%
	STAR Kids	Harris	N/A	N/A	N/A	N/A	N/A	N/A
	STAR	Jefferson	N/A	N/A	96.60%	90.20%	75.90%	99.90%
	STAR Kids	Jefferson	N/A	N/A	100.00%	100.00%	89.80%	100.00%
	STAR Kids	MRSA Northeast	N/A	N/A	N/A	N/A	N/A	N/A

ATTACHMENT J
Pharmacy GeoMapping
17SFQ2

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)
United	STAR	Harris	N/A	N/A	97.00%	95.70%	90.70%	99.90%
	STAR+PLUS	Harris	N/A	N/A	95.90%	95.40%	90.40%	100.00%
	STAR Kids	Harris	N/A	N/A	97.50%	95.70%	91.80%	100.00%
	STAR	Hidalgo	N/A	N/A	97.00%	71.00%	N/A	84.00%
	STAR Kids	Hidalgo	N/A	N/A	96.80%	70.90%	N/A	84.30%
	STAR	Jefferson	N/A	N/A	96.90%	95.50%	72.50%	99.80%
	STAR+PLUS	Jefferson	N/A	N/A	96.30%	84.90%	71.80%	99.80%
	STAR Kids	Jefferson	N/A	N/A	96.10%	84.20%	73.10%	99.60%
	STAR+PLUS	Nueces	N/A	N/A	97.60%	88.60%	84.00%	91.40%
	STAR Kids	Travis	74.30%	79.10%	95.10%	N/A	N/A	98.20%
	STAR+PLUS	Travis	N/A	N/A	95.00%	85.00%	80.00%	100.00%
	STAR+PLUS	MRSA Central	76.40%	73.70%	96.10%	N/A	N/A	98.20%
	STAR+PLUS	MRSA Northeast	69.90%	46.40%	97.20%	N/A	N/A	92.50%
	STAR Kids	MRSA Northeast	70.90%	50.20%	97.40%	N/A	N/A	93.80%

ATTACHMENT K
DMO Dental GeoMapping
17SFQ2

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
Denta Quest	High Plains	92.80%	98.90%	47.70%	48.80%	93.80%	0.00%	42.20%
	Northwest Texas	95.50%	100.00%	53.00%	60.90%	94.60%	5.40%	4.60%
	Metroplex	100.00%	100.00%	99.80%	99.90%	100.00%	99.90%	99.70%
	Upper East Texas	100.00%	100.00%	33.80%	99.90%	99.90%	20.50%	11.90%
	Southeast Texas	100.00%	100.00%	61.00%	100.00%	99.90%	89.40%	36.10%
	Gulf Coast	99.00%	100.00%	99.00%	100.00%	99.00%	99.00%	99.00%
	Central Texas	100.00%	100.00%	99.90%	99.90%	99.50%	99.70%	34.30%
	Upper South Texas	99.90%	99.90%	94.60%	92.10%	87.80%	86.00%	89.60%
	West Texas	89.30%	98.70%	0.10%	2.00%	73.10%	0.10%	0.00%
	Upper Rio Grande	98.90%	93.90%	98.30%	98.30%	98.30%	98.30%	0.00%
	Lower South Texas	99.00%	100.00%	84.70%	99.90%	100.00%	70.10%	85.40%
MCNA	High Plains	100.00%	99.98%	46.97%	95.08%	95.33%	0.00%	0.00%
	Northwest Texas	100.00%	99.97%	8.14%	99.13%	68.73%	8.79%	4.39%
	Metroplex	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	99.22%
	Upper East Texas	100.00%	99.91%	92.52%	99.94%	99.94%	21.40%	5.54%
	Southeast Texas	99.06%	99.97%	99.32%	99.32%	93.16%	95.83%	22.57%
	Gulf Coast	99.90%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
	Central Texas	100.00%	99.82%	99.97%	99.97%	99.82%	99.81%	82.43%
	Upper South Texas	100.00%	99.90%	90.47%	94.58%	91.28%	89.17%	92.12%
	West Texas	100.00%	99.98%	0.00%	20.06%	80.85%	0.00%	0.00%
	Upper Rio Grande	100.00%	59.17%	98.28%	98.28%	98.28%	98.28%	0.00%
	Lower South Texas	99.90%	100.00%	100.00%	100.00%	100.00%	85.94%	5.54%

EB 744 (Q) CMS QUARTERLY NARRATIVE SUMMARY REPORT



Helping Government Serve the People.®



January 2017 – March 2017 (CMS 1st Quarter)

1.1.1 Operations

Enrollment Broker Medicaid Managed Care STAR, STAR+PLUS and STAR Kids Programs reported an average of 3,584,843 unduplicated enrollments for the months of January, February, and March 2017 for February 1st, March 1st, and April 1st effective dates.

The Dental Program reported an average of 2,913,807 total enrollments in January, February, and March 2017 for February 1st, March 1st, and April 1st effective dates

In January, the English Call Center queues had an AB Rate of 3.2% and an ASA of 48 seconds – meeting both performance requirements. The Spanish Call Center queues had an AB Rate of 2.7% and an ASA of 55 seconds in January, also meeting both performance requirements. In February, the English Call Center queues had an AB Rate of 2.5% and an ASA 35 seconds while the Spanish Call Center queues had an AB Rate of 2.2% and an ASA of 44 seconds. The AB Rate and ASA performance standards were met by both queues for February. In March, the English Call Center queues had an AB Rate of 1.2% and an ASA of 16 seconds – meeting both performance requirements. The Spanish Call Center queues had an AB Rate of 1.1% and an ASA of 19 seconds in March, also meeting both performance requirements.

The Call Center Quality Assurance rate for the December 2016 QA sample results reported in February is 100% for EB KPR 47 - Language Access Plan Accuracy/Quality Assurance and 97.7% for EB KPR 50 – Call Handling Accuracy. The Call Center Quality Assurance rate for the January 2017 QA sample results reported in March is 100% for EB KPR 47 and 98.2% for EB KPR 50. The Call Center Quality Assurance rate for the February 2017 QA sample results reported in April is 100% for EB KPR 47 and 98.1% 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 297,154 enrollment mailings for the Medicaid Managed Care Program and 205,591 enrollment mailings for the Dental Program.

Throughout the quarter, outreach staff members completed a total of 24,844 home visit attempts for the Enrollment Broker Medicaid Managed Care Program. Outreach staff also completed 131,790 phone call attempts this quarter. In addition, field staff members completed a total of 7,323 field events for the Medicaid Managed Care Program in the first quarter. Field events include enrollment events, community contacts, presentations, and health fairs.

1.1.1.1 Mail Summary

Monthly Ongoing Mailings					
Mail Type	Jan-17	Feb-17	Mar-17	Quarterly Totals	Average per Month
Mandatory Medical Enrollment Kits/Requests (STAR, STAR Kids, STAR+PLUS, SNS, NS, & TP40's)	95,079	94,297	107,267	296,643	98,881
STAR, STAR Kids, & STAR+PLUS Voluntary Letters	161	153	197	511	170
Mandatory Dental Enrollment Kits/Requests	68,084	63,523	73,984	205,591	68,530

(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 24,844 home visit attempts for the Enrollment Broker Medicaid Managed Care Program. Outreach staff also completed 131,790 phone call attempts this quarter. In addition, field staff members completed a total of 7,323 field events for the Medicaid Managed Care Program in the first quarter. Field events include enrollment events, community contacts, presentations, and health fairs.

Outreach Activities					
Task	Jan-17	Feb-17	Mar-17	Quarterly Totals	Avg Per Month
MMC Phone Calls	43,276	42,311	46,203	131,790	43,930
MMC Home Visits	6,657	8,793	9,394	24,844	8,281
*Enrollments processed	16,117	14,609	16,920	47,646	15,882
Plan Changes processed	815	841	696	2,352	784
MMC Enrollment Events	205	273	292	770	257
MMC Presentations (non-enrollment event)	61	66	69	196	65
MMC Community Meetings (non-enrollment event)	2,170	2,135	2,021	6,326	2,109
MMC Health Fairs (non-enrollment event)	7	11	13	31	10

(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 January, February, and March 2017 for February 1st, March 1st, and April 1st effective dates. This quarter, the STAR, STAR+PLUS, and STAR Kids Programs reported an average of 3,584,843 unduplicated enrollments per month.

The Dental Program reported an average of 2,913,807 total enrollments in January, February, and March 2017 for February 1st, March 1st, and April 1st effective dates

Total Unduplicated Enrollments by Program				
State Cutoff Month	STAR	STAR + PLUS	STAR Kids	Total Unduplicated Enrollments
Jan-17	2,917,094	519,105	163,506	3,599,705
Feb-17	2,906,734	519,440	162,334	3,588,508
Mar-17	2,882,776	520,648	162,893	3,566,317
Average per Month	2,902,201	519,731	162,911	3,584,843

*(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	STAR Kids	Total Unduplicated Enrollments
Jan-17	166,779	20,023	7,703	194,505
Feb-17	164,200	13,124	5,600	182,924
Mar-17	161,424	13,263	6,108	180,795
Average per Month	164,134	15,470	6,470	186,075

*(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
Jan-17	163,965	2,928,189
Feb-17	160,915	2,918,863
Mar-17	158,621	2,894,369
Average per Month	161,167	2,913,807

(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	STAR Kids Choice Enrollment	Default STAR Kids	Dental Choice Enrollment	Default Dental
Jan-17	73.9%	26.1%	61.6%	38.4%	55.8%	44.2%	70.4%	29.6%
Feb-17	78.6%	21.4%	71.3%	28.7%	68.5%	31.5%	77.1%	22.9%
Mar-17	77.6%	22.4%	69.9%	30.1%	70.7%	29.3%	76.5%	23.5%
Average per Month	76.7%	23.3%	67.6%	32.4%	65.0%	35.0%	74.7%	25.3%

(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. A daily average of 288 staff handled English inbound calls during the first quarter of 2017. A daily average of 164 staff handled Spanish inbound calls during the first quarter of 2017.

English Call Center Production									
Month	Year	Forecast Calls	Calls Offered	Calls Handled	Sys Out Calls	Average Handle Time	Average Speed of Answer	Abandon	% Abandon
January	2017	163,011	150,649	145,400	431	583	48	4,816	3.2%
February	2017	131,661	130,226	126,580	351	578	35	3,291	2.5%
March	2017	142,882	139,903	138,106	153	570	16	1,642	1.2%
AVG		145,851	140,259	136,695	312	577	33	3,250	2.3%
Totals		437,554	420,778	410,086	935			9,749	
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
January	2017	48,426	44,492	43,061	214	680	55	1,217	2.7%
February	2017	41,005	40,647	39,595	147	683	44	905	2.2%
March	2017	43,789	43,071	42,516	91	681	19	464	1.1%
AVG		44,407	42,737	41,724	151	681	39	862	2.0%
Totals		133,220	128,210	125,172	452			2,586	
KPR							< 90		≤ 8%

(Table 1.1.2B) Spanish Call Center Production.

Attachment M1
Combined Member Hotline Performance
STAR, STAR+PLUS and STAR Kids (2017 SFQ2)

	Member Hotline Performance								
MCO	SF2017 Q1 -- Total Calls	2017 SFQ2-- Total Calls	2017 SFQ1 to 2017 SFQ2 -- Net Change	2017 SFQ1 to 2017 SFQ1 -- % Inc. or Dec.	2017 SFQ2 -- % Answered by 4th Ring (99%)	2017 SFQ2 -- % Busy Signal Rate (≤1%)	2017 SFQ2 -- % Answered by Live Person (80% w/in 30 Seconds)	2017 SFQ2 -- % Calls Abandoned (≤7%)	2017 SFQ2 -- Avg. Hold Time (≤2 Minutes)
Aetna	37,044	37,044	0	0.00%	100.00%	0.00%	82.15%	1.29%	0:00:22
Amerigroup	136,831	136,831	0	0.00%	100.00%	0.00%	97.85%	0.43%	0:00:09
BCBS TX	7,726	9,627	1,901	24.61%	100.00%	0.14%	88.11%	3.23%	0:00:20
CHC	42,471	42,844	373	0.88%	100.00%	0.01%	90.41%	0.00%	0:00:00
Christus	4,018	4,011	-7	-0.17%	100.00%	0.00%	83.93%	2.44%	0:00:08
Cigna-HealthSpring	28,638	25,808	-2,830	-9.88%	100.00%	0.00%	91.42%	1.20%	0:00:04
Community 1st	30,846	34,545	3,699	11.99%	100.00%	0.00%	95.02%	1.06%	0:00:23
Cook	22,402	27,047	4,645	20.73%	100.00%	0.00%	98.59%	0.45%	0:00:30
CMC	N/A	5,217			100.00%	0.00%	81.34%	5.69%	1:00:24
Driscoll	23,178	22,483	-695	-3.00%	100.00%	0.00%	85.05%	2.77%	0:00:14
El Paso 1st	10095	11,380	1,285	12.73%	100.00%	0.00%	95.62%	0.11%	0:00:07
FirstCare	13,061	11,471	-1,590	-12.17%	100.00%	0.00%	95.97%	0.43%	0:00:10
Molina	91,434	94,083	2,649	2.90%	100.00%	0.00%	100.00%	0.70%	0:00:02
Parkland	40,959	39,233	-1,726	-4.21%	100.00%	0.00%	91.35%	0.56%	0:00:24
Scott & White	6,805	6,672	-133	-1.95%	100.00%	0.00%	99.04%	0.23%	0:00:32
Sendero	3695	4,652	957	25.90%	100.00%	0.13%	87.38%	2.01%	0:00:22
Seton	7,328	5,074	-2,254	-30.76%	100.00%	0.00%	9837.00%	0.41%	0:00:11
Superior	179,841	199,321	19,480	10.83%	100.00%	0.00%	90.42%	1.84%	0:00:24
Texas Children's	44,514	45,487	973	2.19%	100.00%	0.00%	90.50%	0.39%	0:00:31
United	84,203	86,641	2,438	2.90%	100.00%	0.00%	84.36%	1.40%	0:00:36
Total	815,089	849,471	34,382	4.22%	100%				

Attachment M2
Combined Behavioral Health Hotline Performance
STAR, STAR+PLUS and CHIP (2017 SFQ2)

	Behavioral Health Hotline Performance								
Health Care MCO	2017 SFQ1 -- Total Calls	2017 SFQ2 - Total Calls2	2017 SFQ1 to 2017 SFQ2 -- Net Change	2017 SFQ1 to 2017 SFQ2-- % Inc. or Dec.	2017 SFQ2 -- % Answered by 4th Ring (99%)	2017 SFQ2 -- % Busy Signal Rate (≤0%)	2017 SFQ2-- % Answered by Live Person (80% w/in 30 Seconds)	2017 SFQ2 -- % Calls Abandoned (≤7%)	2017 SFQ2 -- Avg. Hold Time (≤2 Minutes)
Aetna	636	740	104	16.35%	100.00%	0.00%	91.77%	3.35%	0:00:09
Amerigroup	1456	1484	28	1.92%	100.00%	0.00%	99.80%	0.20%	0:00:02
BCBS TX	200	218	18	9.00%	100.00%	0.00%	90.67%	0.00%	0:00:05
CHC	1217	1209	-8	-0.66%	100.00%	0.00%	86.93%	1.71%	0:00:11
Christus	122	142	20	16.39%	100.00%	0.00%	100.00%	0.00%	0:00:04
Cigna-HealthSpring	318	264	-54	-16.98%	100.00%	0.00%	82.98%	3.09%	0:00:28
Community 1st	253	87	-166	-65.61%	100.00%	0.00%	100.00%	5.75%	0:00:27
Cook	629	581	-48	-7.63%	100.00%	0.00%	87.26%	4.85%	0:00:15
CMC	N/A	370	N/A	N/A	100.00%	0.00%	87.50%	2.44%	0:00:09
Driscoll	21	14	-7	-33.33%	100.00%	0.00%	100.00%	0.00%	0:00:05
El Paso 1st	73	86	13	17.81%	100.00%	0.00%	100.00%	0.00%	0:00:04
FirstCare	442	508	66	14.93%	100.00%	0.00%	93.87%	6.32%	0:00:08
Molina	21	25	4	19.05%	100.00%	0.00%	100.00%	0.00%	0:00:05
Parkland	NA	45	N/A	N/A	1	0	1	0	0:00:10
Scott & White	15	20	5	33.33%	100.00%	0.00%	no calls recorded	0.00%	0:00:00
Sendero	41	33	-8	-19.51%	100.00%	0.00%	93.94%	2.94%	0:00:05
Seton	95	140	45	47.37%	100.00%	0.00%	100.00%	0.00%	0:00:04
Superior	3836	5592	1,756	45.78%	100.00%	0.00%	87.55%	2.19%	0:00:08
Texas Children's	798	0	-798	-100.00%	no calls recorded	0.00%	no calls recorded	0.00%	0:00:00
United	681	745	64	9.40%	100.00%	0.00%	93.52%	1.98%	0:00:07
Total	10,854	12,303	1,449	13.35%					

*NA denotes no calls for that category

Attachment M3
Combined Provider Hotline Report
STAR, STAR+PLUS and CHIP (2017 SFQ2)

	Provider Hotline Performance							
MCO	2017 SFQ1 -- Total Calls	2017 SFQ2 -- Total Calls	2016 SFQ4 to 2017 SFQ1 -- Net Change	2016 SFQ4 to 2017 SFQ1 -- % Inc. or Dec.	2017 SFQ1-- % Answered by 4th Ring (99%)	2017 SFQ1-- % Busy Signal Rate (≤1%)	2017 SFQ2-- % Calls Abandoned (≤7%)	2017 SFQ2-- Avg. Hold Time (≤2 Minutes)
Aetna	13,995	13,995	0	0.00%	100.00%	0.00%	0.00%	0:00:52
Amerigroup	106,277	117,929	11,652	10.96%	100.00%	0.00%	0.70%	0:00:20
BCBS TX	13,502	16,478	2,976	22.04%	100.00%	0.00%	1.37%	0:00:53
CHC	14,738	13,767	-971	-6.59%	100.00%	0.00%	2.80%	0:00:41
Christus	2,262	990	-1,272	-56.23%	100.00%	0.00%	4.56%	0:00:32
Cigna-HealthSpring	26,286	27,409	1,123	4.27%	100.00%	0.00%	0.44%	0:00:07
Community 1st	12,422	13,166	744	5.99%	100.00%	0.00%	2.12%	0:00:16
Cook	23,857	29,997	6,140	25.74%	100.00%	0.00%	2.35%	0:01:05
CMC	N/A	44,882	N/A	N/A	100.00%	0.00%	0.28%	0:00:20
Driscoll	33,849	36,806	2,957	8.74%	100.00%	0.00%	0.21%	0:00:10
El Paso 1st	17,171	17,356	185	1.08%	100.00%	0.00%	0.28%	0:00:05
FirstCare	14,456	14,053	-403	-2.79%	100.00%	0.00%	0.75%	0:00:14
Molina	85,444	86,773	1,329	1.56%	100.00%	0.00%	0.31%	0:00:05
Parkland	9,544	8,253	-1,291	-13.53%	100.00%	0.13%	3.06%	0:01:08
Scott & White	9,977	10,004	27	0.27%	100.00%	0.00%	0.30%	0:00:06
Sendero	4,167	4,605	438	10.51%	100.00%	0.00%	0.33%	0:00:09
Seton	4,729	6,209	1,480	31.30%	100.00%	0.00%	0.36%	0:00:13
Superior	102,043	112,421	10,378	10.17%	100.00%	0.00%	3.30%	0:00:58
Texas Children's	6,494	12,609	6,115	94.16%	100.00%	0.00%	2.54%	0:03:38
United	150,009	146,864	-3,145	-2.10%	100.00%	0.00%	1.59%	0:00:20
Total	651,222	734,566	83,344	12.80%				

Attachment M4
Consolidated Children's CHIP and Medicaid Dental (2017 SFQ2)

Member Hotline Performance

DMO	2017 SFQ1-- Total Calls	2017 SFQ2 -- Total Calls	2017 SFQ1 to 2017 SFQ2 -- Net Change	2017 SFQ1 to 2017 SFQ2 -- % Inc. or Dec.	2017 SFQ2 -- % Answered by 4th Ring (99%)	2017 SFQ2 -- % Busy Signal Rate (≤1%)	2017 SFQ2- % Answered by Live Person (80% w/in 30 Seconds)	2017 SFQ2-- % Calls Abandoned (≤7%)	2017 SFQ2-- Avg. Hold Time (≤2 Minutes)
DentaQuest	119,445	119,168	-277	-0.23%	100.00%	0.00%	82.15%	1.29%	0:00:32
MCNA	139,998	125,140	-14,858	-10.61%	100.00%	0.00%	97.85%	0.43%	0:00:03
Total	259,443	244,308	-15,135	-5.83%					

Provider Hotline Performance

DMO	2017 SFQ1 -- Total Calls	2017 SFQ2 -- Total Calls2	2017 SFQ1 to 2017 SFQ2-- Net Change	2017 SFQ1 to 2017 SFQ2 -- % Inc. or Dec.	2017 SFQ2 -- % Answered by 4th Ring (99%)	2017 SFQ2-- % Busy Signal Rate (≤1%)	2017 SFQ2 -- % Calls Abandoned (≤7%)	2017 SFQ2- Avg. Hold Time (≤2 Minutes)
DentaQuest	77141	77,141	0	0	100.00%	0.00%	2.45%	0:01:27
MCNA	27844	24,484	-3,360	-3,360	100.00%	0.00%	0.46%	0:00:06
Total	104,985	101,625	-3,360	-3.20%				

Attachment N
MCO Complaints and Appeals (2017 SFQ2)

			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	83	23	98.33%	168	23	100.00%	5	0	100.00%
	MCNA	Statewide	76	1	100.00%	61	7	100.00%	31	7	100.00%
STAR+PLUS	Amerigroup	Bexar	27	0	100.00%	13	0	100.00%	10	0	100.00%
		El Paso	7	0	100.00%	31	2	100.00%	5	0	100.00%
		Harris	73	0	100.00%	62	4	97.62%	6	0	100.00%
		Jefferson	11	0	100.00%	5	0	100.00%	2	0	100.00%
		Lubbock	6	0	100.00%	6	2	100.00%	5	0	100.00%
		MRSA West	14	0	100.00%	20	2	100.00%	15	0	100.00%
		Tarrant	57	0	100.00%	45	2	100.00%	25	0	100.00%
		Travis	20	0	100.00%	24	1	100.00%	8	0	100.00%
	Cigna-HealthSpring	Hidalgo	89	1	100.00%	24	1	96.15%	636	5	100.00%
		MRSA NE	124	1	99.19%	13	0	92.31%	590	1	99.83%
		Tarrant	162	1	99.38%	13	0	100.00%	325	2	100.00%
	Molina	Bexar	31	0	100.00%	22	0	100.00%	2	0	100.00%
		Dallas	60	0	100.00%	54	0	100.00%	6	0	100.00%
		El Paso	36	0	100.00%	26	0	100.00%	8	0	100.00%
		Harris	60	0	100.00%	54	0	100.00%	6	0	100.00%
		Hidalgo	33	0	96.97%	41	0	100.00%	5	0	100.00%
		Jefferson	28	0	100.00%	18	0	100.00%	2	0	100.00%
	Superior	Bexar	66	0	100.00%	176	0	100.00%	34	0	94.12%
		Dallas	67	0	100.00%	130	0	100.00%	47	0	93.62%
		Hidalgo	15	0	100.00%	97	0	100.00%	4	0	100.00%
		Lubbock	7	0	100.00%	36	0	100.00%	4	0	100.00%
		MRSA Central	15	0	100.00%	93	0	100.00%	3	0	100.00%
		MRSA West	15	0	100.00%	97	0	100.00%	4	0	100.00%
		Nueces	18	0	100.00%	36	0	100.00%	12	0	100.00%
	United	Harris	66	15	100.00%	122	28	97.65%	0	0	0.00%
		Jefferson	5	1	100.00%	9	2	100.00%	0	0	0.00%
		MRSA Central	13	3	100.00%	19	3	94.44%	0	0	0.00%
		MRSA NE	16	3	100.00%	34	4	92.00%	4	4	0.00%
		Nueces	10	5	100.00%	15	3	90.00%	0	0	0.00%
		Travis	21	5	100.00%	32	5	100.00%	0	0	0.00%
STAR	Aetna	Bexar	16	2	100.00%	23	4	100.00%	1	0	100.00%
		Tarrant	51	9	100.00%	49	6	100.00%	5	1	100.00%
	Amerigroup	Bexar	5	0	100.00%	0	0	100.00%	3	0	100.00%
		Dallas	43	0	100.00%	37	2	100.00%	0	0	100.00%

Attachment N
MCO Complaints and Appeals (2017 SFQ2)

			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
STAR	Amerigroup	Harris	10	0	100.00%	15	0	100.00%	1	0	100.00%
		Jefferson	4	0	100.00%	2	0	100.00%	1	0	100.00%
		Lubbock	1	0	100.00%	2	0	100.00%	1	0	100.00%
		MRAS WEST	4	0	100.00%	7	0	100.00%	3	0	100.00%
		MRSA Central	3	0	100.00%	6	0	100.00%	0	0	0.00%
		MRSA NE	8	0	100.00%	26	0	100.00%	1	0	100.00%
		Tarrant	26	0	100.00%	32	1	100.00%	20	0	100.00%
	BCBS TX	Travis	4	1	100.00%	13	8	66.67%	2	1	100.00%
	CHC	Harris	23	0	100.00%	3	0	100.00%	2	0	100.00%
		Jefferson	2	0	100.00%	2	0	100.00%	1	0	100.00%
	Christus	Nueces	1	0	100.00%	1	0	100.00%	2	0	100.00%
	Community 1st	Bexar	10	0	100.00%	34	3	97.37%	1	0	100.00%
	Cook	Tarrant	2	0	100.00%	19	1	100.00%	2	0	100.00%
	Driscoll	Hidalgo	5	1	100.00%	28	0	100.00%	2	0	100.00%
		Nueces	2	1	100.00%	9	1	100.00%	3	2	100.00%
	El Paso 1st	El Paso	8	2	100.00%	1	0	100.00%	0	0	0.00%
	First Care	Lubbock	3	0	100.00%	35	0	96.88%	4	0	100.00%
		MRSA West	10	0	100.00%	19	0	100.00%	7	0	100.00%
	Molina	Dallas	30	0	100.00%	24	0	100.00%	1	0	100.00%
		El Paso	3	0	100.00%	8	0	100.00%	1	0	100.00%
		Harris	18	0	100.00%	10	0	100.00%	2	0	100.00%
		Hidalgo	23	0	100.00%	52	0	100.00%	5	0	100.00%
		Jefferson	7	0	100.00%	1	0	100.00%	1	0	100.00%
	Parkland	Dallas	19	6	100.00%	119	20	98.18%	2	2	0.00%
	Scott & White	MRSA Central	0	0	0.00%	0	0	0.00%	0	0	0.00%
	Sendero	Travis	1	0	100.00%	1	0	100.00%	0	0	0.00%
	Seton	Travis	3	0	100.00%	5	0	100.00%	0	0	100.00%
	Superior	Bexar	36	0	100.00%	62	0	100.00%	8	0	100.00%
		El Paso	46	0	100.00%	178	0	99.43%	36	0	100.00%
		Hidalgo	46	0	100.00%	178	0	99.43%	36	0	100.00%
		Lubbock	46	0	100.00%	178	0	99.43%	36	0	100.00%
		MRSA Central	36	0	100.00%	62	0	100.00%	8	0	100.00%
		MRSA NE	64	0	100.00%	78	0	100.00%	31	0	100.00%
		MRSA West	33	0	100.00%	58	0	97.96%	18	0	94.44%
		Nueces	9	0	100.00%	24	0	100.00%	22	0	100.00%
		Travis	9	0	100.00%	24	0	100.00%	22	0	100.00%

Attachment N
MCO Complaints and Appeals (2017 SFQ2)

			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
STAR	Texas Children's	Harris	0	0	0.00%	2	0	100.00%	0	0	0.00%
		Jefferson	2	0	100.00%	2	0	100.00%	0	0	0.00%
	United	Harris	18	4	100.00%	31	6	95.83%	0	0	0.00%
		Hidalgo	12	2	100.00%	22	8	100.00%	0	0	0.00%
		Jefferson	2	0	100.00%	2	0	100.00%	0	0	0.00%

Attachment O
Complaints to HHSC (2017 SFQ1)

Quarter 17Q2

Program / MCO	Disenrollment	HPM Member Complaints	HPM Provider Complaint	Legislative Complaints	MMCH Member Complaints
Dental		65	24	2	44
DentaQuest		19	13	1	9
MCNA		46	11	1	35
STAR	3	99	235	13	138
Aetna		5	25		5
Amerigroup Texas, Inc.	2	12	48	3	25
BCBS					3
Blue Cross Blue Shield		1	15		
Christus			1		1
Community First		6	9		8
Community Health Choice		8	9	1	8
Cook Children's Health Plan		4	6		6
Driscoll Childrens Health Plan		4	7		1
El Paso First Premier		1	1		
FirstCare		1	4	1	3
Molina Healthcare of Texas		2	17		5
Parkland Community Health Plan		12	4	2	9
Scott & White			4		4
Sendero			3		
Seton Health Plan		1			1
Superior Health Plan	1	30	55	4	31
Texas Children's Health Plan		8	17	1	22
United HealthCare		4	10	1	6
STAR Kids	5	123	122	47	72
Aetna	1	6	8		2
Amerigroup Texas, Inc.		31	22	12	23
BCBS					3
Blue Cross Blue Shield	2	12	5	5	
Children's Medical Center		6	11	3	3
Community First		7	6	2	4
Cook Children's Health Plan		8	3	2	1
Driscoll Childrens Health Plan		3	4		4
Molina Healthcare of Texas					1
Superior Health Plan		23	32	11	7
Texas Children's Health Plan	1	13	15	3	19
United HealthCare	1	14	16	9	5
STAR+PLUS	10	284	248	40	258
Aetna				1	
Amerigroup Texas, Inc.		54	60	10	47
Cigna-HealthSpring		34	44	4	
Cook Children's Health Plan				1	
HealthSpring					34
Molina Healthcare of Texas	1	38	29	3	43
Superior Health Plan	6	105	75	10	89
United HealthCare	3	53	40	11	45

ATTACHMENT Q
Members with Special Health Care Needs
2017 SFQ2

Service Area	MCO	Enrollment	Total MSHCN	Total MSHCN with Service Plan	% MSHCN with Service Plan	% Enrollment Identified as MSHCN
Bexar	Aetna	22,975	92	92	100.00%	0.40%
	Amerigroup	9,539	11	4	36.36%	0.12%
	Community First	104,105	26	0	0.00%	0.02%
	Superior	108,778	141	136	96.45%	0.13%
Bexar Total		245,397	270	232	85.93%	0.11%
Dallas	Amerigroup	205,408	238	83	34.87%	0.12%
	Molina	20,042	164	36	21.95%	0.82%
	Parkland	164,592	930	930	100.00%	0.57%
Dallas Total		390,042	1,332	1,049	78.75%	0.34%
El Paso	El Paso First	65,167	50	18	36.00%	0.08%
	Molina	3,353	70	6	8.57%	2.09%
	Superior	53,140	75	72	96.00%	0.14%
El Paso Total		121,660	195	96	49.23%	0.16%
Harris	Amerigroup	105,033	146	93	63.70%	0.14%
	CHC	218,465	4,678	1,577	33.71%	2.14%
	Molina	12,346	146	18	12.33%	1.18%
	Texas Children's	307,620	140	140	100.00%	0.05%
	United	50,264	1,557	1,557	100.00%	3.10%
Harris Total		693,728	6,667	3,385	50.77%	0.96%
Hidalgo	Driscoll	84,583	336	280	83.33%	0.40%
	Molina	56,728	4,668	92	1.97%	8.23%
	Superior	151,489	79	74	93.67%	0.05%
	United	61,057	1,210	1,210	100.00%	1.98%
Hidalgo Total		353,857	6,293	1,656	26.31%	1.78%
Jefferson	Amerigroup	6,818	13	8	61.54%	0.19%
	CHC	21,966	354	147	41.53%	1.61%
	Molina	4,093	48	3	6.25%	1.17%
	Texas Children's	28,216	16	16	100.00%	0.06%
	United	13,990	431	431	100.00%	3.08%
Jefferson Total		75,083	862	605	70.19%	1.15%
Lubbock	Amerigroup	8,320	33	5	15.15%	0.40%
	FirstCare	39,294	41	12	29.27%	0.10%
	Superior	27,419	27	27	100.00%	0.10%
Lubbock Total		75,033	101	44	43.56%	0.13%
MRSA Central	Amerigroup	21,762	32	7	21.88%	0.15%
	Scott & White	44,301	6,064	352	5.80%	13.69%
	Superior	66,553	80	73	91.25%	0.12%
MRSA Central Total		132,616	6,176	432	6.99%	4.66%
MRSA Northeast	Amerigroup	58,155	82	48	58.54%	0.14%
	Superior	111,194	96	94	97.92%	0.09%
MRSA Northeast Total		169,349	178	142	79.78%	0.11%
MRSA West	Amerigroup	30,555	70	26	37.14%	0.23%
	FirstCare	51,285	16	7	43.75%	0.03%
	Superior	74,486	85	80	94.12%	0.11%
MRSA West Total		156,326	171	113	66.08%	0.11%
Nueces	CHRISTUS	5,411	1	1	100.00%	0.02%
	Driscoll	62,865	379	320	84.43%	0.60%
	Superior	19,372	16	13	81.25%	0.08%
Nueces Total		87,648	396	334	84.34%	0.45%
Tarrant	Aetna	47,750	226	226	100.00%	0.47%
	Amerigroup	116,600	188	103	54.79%	0.16%
	Cook	101,259	492	478	97.15%	0.49%
Tarrant Total		265,609	906	807	89.07%	0.34%
Travis	BCBS	24,927	289	57	19.72%	1.16%
	Sendero	13,402	867	8	0.92%	6.47%
	Seton	17,982	41	15	36.59%	0.23%
	Superior	87,025	85	81	95.29%	0.10%
Travis Total		143,336	1,282	161	12.56%	0.89%
STAR Total Statewide		2,909,684	24,829	9,056	36.47%	0.85%

ATTACHMENT R1
MCO Referrals to OIG (2017 SFQ1- SFQ2)

MCO	Sep-16	Oct-16	Nov-16	Quarter 1 SFY 2017	Dec-16	Jan-17	Feb-17	Quarter 2 SFY 2017	Q1-2 Totals
Total Referrals Received	8	2	12	22	15	31	25	71	93
Investigation Category									
Program non-compliance	1	1	5	7	5	21	21	47	54
Non-appropriate billing	3	1	4	8	9	10	3	22	30
Billing for Services not Rendered	2		2	4	1		1	2	6
Quality of Care				0				0	0
Solicitation	1			1				0	1
Upcoding				0				0	0
Billing for Services After Death				0				0	0
Billing unnecessary services	1		1	2				0	2
Failure to disclose required info				0				0	0
Disposition									
Returned to MCO to whatever action deemed appropriate	2	1		3	1			1	4
MPI Full scale investigation	1	1	3	5	1	7		8	13
Information transferred to existing full scale case				0				0	0
Preliminary Status				0				0	0
Referred to HHS-OIG(Federal)				0			1	1	1
Referred to Pharmacy Board			1	1	2	16	14	32	33
Referred to Medical Board				0				0	0
Referred to Vendor Drug				0				0	0
Closed	7	1	9	17	12	23	23	58	75
Pending Preliminary Investigation				0				0	0
Referred to MFCU	3		4	7	3		6	9	16
Transferred to IG Litigation			1	1	1	1		2	3

ATTACHMENT R2
Dental Plan Referrals to OIG (2017 SFQ1- SFQ2)

DMO	Sep-16	Oct-16	Nov-16	Quarter 1 SFY 2017	Dec-16	Jan-17	Feb-17	Quarter 2 SFY 2017	Q1-2 Totals
Total Referrals Received	7	4	7	18	4	3	3	10	28
Investigation Category									
Program non-compliance	1			1				0	1
Non-appropriate billing	4	3	1	8	2	3	2	7	15
Billing for Services not Rendered			1	1			1	1	2
Billing unnecessary services	2	1	5	8				0	8
Solicitation				0	2			2	2
Disposition									
Returned to MCO to whatever action deemed appropriate	3			3				0	3
MPI Full scale investigation	3	3	6	12	4	2	3	9	21
Information transferred to existing full scale case		1		1				0	1
Closed	3		1	4		1		1	5
Provider Education	1			1				0	1
Transferred to IG Litigation	1			1				0	1
Referred to MFCU	5	2	6	13	4	2	3	9	22

ATTACHMENT V1
STAR Claims Adjudication (2017 SFQ1-SFQ2)

MCO	Service Area	Acute Care Claims					
		% Clean Adj. w/in 30 Days		% Appealed Adj. w/in 30 Days		% Clean Adj. w/in 90 Days	
		(98% Std.)		(98% Std.)		(99% Std.)	
		17Q1	17Q2	17Q1	17Q2	17Q1	17Q2
Column1	Column2	Column5	Column4	Column3	Column6	Column7	Column8
Aetna	Bexar	99.14%	99.66%	100.00%	100.00%	99.99%	99.99%
Aetna	Tarrant	99.15%	99.30%	100.00%	100.00%	100.00%	99.98%
Amerigroup	Bexar	99.84%	99.87%	99.31%	96.36%	99.31%	96.36%
Amerigroup	Dallas	99.63%	99.72%	99.40%	99.02%	99.99%	99.98%
Amerigroup	Harris	99.83%	99.76%	99.52%	99.43%	99.97%	99.97%
Amerigroup	Jefferson	99.88%	99.53%	99.56%	94.89%	99.99%	99.98%
Amerigroup	Lubbock	99.84%	99.63%	99.65%	97.60%	100.00%	99.97%
Amerigroup	MRSA Central	99.70%	99.61%	99.37%	97.93%	99.99%	99.94%
Amerigroup	MRSA NE	99.71%	99.58%	99.40%	97.18%	99.98%	99.94%
Amerigroup	MRSA West	99.59%	99.68%	99.11%	97.38%	99.98%	99.98%
Amerigroup	Tarrant	99.59%	99.73%	97.43%	99.31%	99.98%	99.98%
BCBS TX	Travis	98.22%	99.84%	82.54%	100.00%	99.88%	99.99%
CHC	Harris	100.00%	100.00%	100.00%	0.00%	100.00%	100.00%
CHC	Jefferson	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Christus	Nueces	99.96%	99.90%	100.00%	100.00%	100.00%	99.96%
Community 1st	Bexar	99.92%	93.87%	96.17%	59.74%	100.00%	99.76%
Cook	Tarrant	99.93%	97.52%	100.00%	51.76%	99.95%	99.82%
Driscoll	Hidalgo	99.90%	99.48%	99.36%	98.59%	99.96%	99.98%
Driscoll	Nueces	99.89%	99.23%	99.60%	94.90%	99.98%	99.98%
El Paso 1st	El Paso	99.94%	99.97%	100.00%	100.00%	100.00%	100.00%
First Care	Lubbock	98.93%	99.05%	98.05%	98.23%	99.99%	99.98%
First Care	MRSA West	99.06%	99.03%	99.99%	99.99%	98.11%	98.19%
Molina	Dallas	99.60%	99.67%	99.74%	98.06%	99.92%	99.89%
Molina	El Paso	98.95%	99.75%	100.00%	97.62%	99.94%	99.93%
Molina	Harris	99.39%	99.51%	98.11%	98.07%	99.94%	99.89%
Molina	Hidalgo	99.64%	99.83%	98.25%	98.76%	99.95%	99.92%
Molina	Jefferson	99.43%	99.66%	100.00%	96.10%	99.95%	99.86%
Parkland	Dallas	98.87%	99.75%	99.91%	100.00%	100.00%	99.99%
Scott and White	MRSA Central	99.97%	99.84%	96.00%	100.00%	100.00%	99.99%
Sendero	Travis	99.98%	99.97%	100.00%	100.00%	100.00%	100.00%
Seton	Travis	99.94%	99.91%	100.00%	100.00%	100.00%	100.00%
Superior	Bexar	99.38%	99.57%	98.18%	98.21%	99.99%	99.98%
Superior	El Paso	99.50%	99.46%	100.00%	97.98%	99.99%	99.98%
Superior	Hidalgo	99.50%	99.46%	100.00%	97.98%	99.99%	99.98%
Superior	Lubbock	99.50%	99.46%	100.00%	97.98%	99.99%	99.98%
Superior	MRSA Central	99.38%	99.57%	98.18%	98.21%	99.99%	99.98%
Superior	MRSA NE	99.33%	99.52%	98.90%	98.77%	99.99%	99.97%
Superior	MRSA West	99.30%	99.58%	98.85%	100.00%	99.99%	99.98%
Superior	Nueces	99.38%	99.52%	100.00%	100.00%	99.99%	99.98%
Superior	Travis	99.38%	99.52%	100.00%	100.00%	99.99%	99.98%
Texas Children's	Harris	99.43%	99.31%	100.00%	99.49%	100.00%	100.00%
Texas Children's	Jefferson	99.43%	99.31%	100.00%	99.49%	100.00%	100.00%
United	Harris	99.57%	99.87%	99.54%	99.71%	99.89%	99.97%
United	Hidalgo	99.95%	99.80%	99.76%	99.88%	99.96%	99.92%
United	Jefferson	99.97%	99.81%	99.67%	99.57%	99.98%	99.98%

ATTACHMENT V1
STAR Claims Adjudication (2017 SFQ1-SFQ2)

MCO	Service Area	Behavioral Health Services Organization's Claims					
		% Clean Adj. w/in 30 Days		% Appealed Adj. w/in 30 Days		% Clean Adj. w/in 90 Days	
		(98% Std.)		(98% Std.)		(99% Std.)	
		17Q1	17Q2	17Q1	17Q2	17Q1	17Q2
Column1	Column2	Column9	Column10	Column11	Column12	Column13	Column14
Aetna	Bexar	99.77%	99.56%	100.00%	100.00%	100.00%	99.98%
Aetna	Tarrant	99.67%	98.86%	100.00%	100.00%	100.00%	99.91%
Amerigroup	Bexar	100.00%	99.96%	100.00%	100.00%	100.00%	100.00%
Amerigroup	Dallas	0.00%	99.87%	0.00%	99.14%	0.00%	99.97%
Amerigroup	Harris	99.87%	99.85%	100.00%	100.00%	100.00%	99.98%
Amerigroup	Jefferson	99.95%	98.80%	100.00%	100.00%	100.00%	100.00%
Amerigroup	Lubbock	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Amerigroup	MRSA Central	99.54%	99.71%	100.00%	100.00%	100.00%	99.92%
Amerigroup	MRSA NE	99.86%	99.79%	98.90%	98.96%	100.00%	99.99%
Amerigroup	MRSA West	99.92%	99.21%	100.00%	93.55%	100.00%	100.00%
Amerigroup	Tarrant	99.84%	99.84%	100.00%	100.00%	99.96%	100.00%
BCBS TX	Travis	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
CHC	Harris	99.97%	99.86%	100.00%	75.00%	100.00%	100.00%
CHC	Jefferson	100.00%	99.45%	100.00%	100.00%	100.00%	100.00%
Christus	Nueces	99.94%	99.94%	100.00%	100.00%	100.00%	100.00%
Community 1st	Bexar	99.89%	94.65%	95.92%	46.04%	100.00%	99.75%
Cook	Tarrant	99.97%	99.06%	100.00%	90.00%	100.00%	100.00%
Driscoll	Hidalgo	99.60%	98.08%	100.00%	90.00%	99.98%	100.00%
Driscoll	Nueces	99.63%	98.71%	100.00%	93.75%	100.00%	100.00%
El Paso 1st	El Paso	99.96%	100.00%	0.00%	0.00%	100.00%	100.00%
First Care	Lubbock	99.76%	99.73%	100.00%	100.00%	100.00%	100.00%
First Care	MRSA West	99.09%	99.54%	100.00%	100.00%	99.82%	100.00%
Molina	Dallas	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Molina	El Paso	99.73%	99.82%	100.00%	0.00%	100.00%	100.00%
Molina	Harris	99.29%	99.80%	100.00%	87.50%	99.95%	100.00%
Molina	Hidalgo	99.82%	99.90%	100.00%	100.00%	99.99%	99.97%
Molina	Jefferson	99.66%	99.89%	100.00%	100.00%	99.77%	100.00%
Parkland	Dallas	0.00%	99.85%	0.00%	0.00%	0.00%	100.00%
Scott and White	MRSA Central	99.97%	99.93%	96.49%	100.00%	99.99%	100.00%
Sendero	Travis	100.00%	99.92%	100.00%	0.00%	100.00%	100.00%
Seton	Travis	100.00%	99.89%	100.00%	100.00%	100.00%	100.00%
Superior	Bexar	99.87%	99.61%	0.00%	100.00%	99.98%	0.00%
Superior	El Paso	99.95%	99.64%	0.00%	0.00%	100.00%	100.00%
Superior	Hidalgo	99.95%	99.64%	0.00%	0.00%	100.00%	100.00%
Superior	Lubbock	99.95%	99.64%	0.00%	0.00%	100.00%	100.00%
Superior	MRSA Central	99.87%	99.61%	0.00%	100.00%	99.98%	99.98%
Superior	MRSA NE	99.97%	99.50%	100.00%	100.00%	100.00%	99.98%
Superior	MRSA West	99.89%	99.61%	0.00%	0.00%	100.00%	99.98%
Superior	Nueces	99.87%	99.52%	0.00%	100.00%	100.00%	100.00%
Superior	Travis	99.87%	99.52%	0.00%	100.00%	100.00%	100.00%
Texas Children's	Harris	98.94%	98.12%	100.00%	100.00%	100.00%	99.99%
Texas Children's	Jefferson	98.94%	98.12%	100.00%	100.00%	100.00%	99.99%
United	Harris	99.95%	99.98%	100.00%	100.00%	99.98%	100.00%
United	Hidalgo	99.98%	99.94%	100.00%	100.00%	100.00%	100.00%
United	Jefferson	99.87%	100.00%	100.00%	100.00%	100.00%	100.00%

ATTACHMENT V1
STAR Claims Adjudication (2017 SFQ1-SFQ2)

MCO	Service Area	Vision Services Organization's Claims					
		% Clean Adj. w/in 30 Days		% Appealed Adj. w/in 30 Days		% Clean Adj. w/in 90 Days	
		(98% Std.)		(98% Std.)		(99% Std.)	
		17Q1	17Q2	17Q1	17Q2	17Q1	17Q2
Column1	Column2	Column15	Column16	Column17	Column18	Column19	Column20
Aetna	Bexar	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Aetna	Tarrant	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Amerigroup	Bexar	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Amerigroup	Dallas	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Amerigroup	Harris	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Amerigroup	Jefferson	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Amerigroup	Lubbock	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Amerigroup	MRSA Central	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Amerigroup	MRSA NE	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Amerigroup	MRSA West	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Amerigroup	Tarrant	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
BCBS TX	Travis	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
CHC	Harris	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
CHC	Jefferson	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Christus	Nueces	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Community 1st	Bexar	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Cook	Tarrant	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Driscoll	Hidalgo	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Driscoll	Nueces	100.00%	100.00%	90.00%	100.00%	100.00%	100.00%
El Paso 1st	El Paso	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
First Care	Lubbock	99.95%	99.66%	0.00%	100.00%	100.00%	100.00%
First Care	MRSA West	99.92%	99.40%	100.00%	100.00%	100.00%	99.98%
Molina	Dallas	99.48%	99.71%	100.00%	0.00%	100.00%	99.90%
Molina	El Paso	100.00%	100.00%	100.00%	0.00%	100.00%	100.00%
Molina	Harris	98.16%	99.52%	100.00%	100.00%	99.69%	99.84%
Molina	Hidalgo	99.35%	99.90%	95.65%	87.50%	100.00%	99.97%
Molina	Jefferson	97.89%	99.41%	100.00%	100.00%	100.00%	99.41%
Parkland	Dallas	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Scott and White	MRSA Central	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Sendero	Travis	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Seton	Travis	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Superior	Bexar	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Superior	El Paso	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Superior	Hidalgo	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Superior	Lubbock	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Superior	MRSA Central	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Superior	MRSA NE	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Superior	MRSA West	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Superior	Nueces	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Superior	Travis	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Texas Children's	Harris	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Texas Children's	Jefferson	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
United	Harris	98.72%	85.77%	0.00%	0.00%	99.69%	94.04%
United	Hidalgo	99.35%	87.49%	0.00%	0.00%	99.79%	97.63%
United	Jefferson	97.61%	88.46%	0.00%	0.00%	99.90%	97.35%

ATTACHMENT V1
STAR Claims Adjudication (2017 SFQ1-SFQ2)

MCO	Service Area	Pharmacy Benefit Manager's Claims			
		% Clean Electronic Claims Adj. w/in 18 Days		% Non-Electronic Claims Adj. w/in 21 Days	
		(98% Std.)		(98% Std.)2	
		17Q1	17Q2	17Q1	17Q2
Column1	Column2	Column21	Column22	Column23	Column24
Aetna	Bexar	100.00%	100.00%	0.00%	0.00%
Aetna	Tarrant	100.00%	100.00%	100.00%	100.00%
Amerigroup	Bexar	100.00%	100.00%	0.00%	0.00%
Amerigroup	Dallas	100.00%	100.00%	100.00%	100.00%
Amerigroup	Harris	100.00%	100.00%	100.00%	100.00%
Amerigroup	Jefferson	100.00%	100.00%	0.00%	0.00%
Amerigroup	Lubbock	100.00%	100.00%	0.00%	0.00%
Amerigroup	MRSA Central	100.00%	100.00%	0.00%	0.00%
Amerigroup	MRSA NE	100.00%	100.00%	100.00%	100.00%
Amerigroup	MRSA West	100.00%	100.00%	0.00%	0.00%
Amerigroup	Tarrant	100.00%	100.00%	0.00%	0.00%
BCBS TX	Travis	100.00%	100.00%	0	100.00%
CHC	Harris	100.00%	100.00%	0.00%	100.00%
CHC	Jefferson	100.00%	100.00%	0.00%	0.00%
Christus	Nueces	100.00%	100.00%	0.00%	100.00%
Community 1st	Bexar	100.00%	100.00%	0.00%	100.00%
Cook	Tarrant	100.00%	100.00%	100.00%	100.00%
Driscoll	Hidalgo	100.00%	100.00%	0.00%	0.00%
Driscoll	Nueces	100.00%	100.00%	0.00%	0.00%
El Paso 1st	El Paso	100.00%	100.00%	0.00%	0.00%
First Care	Lubbock	100.00%	100.00%	0.00%	100.00%
First Care	MRSA West	100.00%	100.00%	0.00%	100.00%
Molina	Dallas	100.00%	100.00%	100.00%	0.00%
Molina	El Paso	100.00%	100.00%	0.00%	0.00%
Molina	Harris	100.00%	100.00%	0.00%	0.00%
Molina	Hidalgo	100.00%	100.00%	0.00%	0.00%
Molina	Jefferson	100.00%	100.00%	0.00%	0.00%
Parkland	Dallas	100.00%	100.00%	0.00%	0.00%
Scott and White	MRSA Central	100.00%	100.00%	0.00%	0.00%
Sendero	Travis	100.00%	100.00%	0.00%	0.00%
Seton	Travis	100.00%	100.00%	0.00%	0.00%
Superior	Bexar	100.00%	100.00%	0.00%	0.00%
Superior	El Paso	100.00%	100.00%	0.00%	0.00%
Superior	Hidalgo	100.00%	100.00%	0.00%	0.00%
Superior	Lubbock	100.00%	100.00%	0.00%	0.00%
Superior	MRSA Central	100.00%	100.00%	0.00%	0.00%
Superior	MRSA NE	100.00%	100.00%	0.00%	0.00%
Superior	MRSA West	100.00%	100.00%	0.00%	0.00%
Superior	Nueces	100.00%	100.00%	0.00%	0.00%
Superior	Travis	100.00%	100.00%	0.00%	0.00%
Texas Children's	Harris	100.00%	100.00%	100.00%	0.00%
Texas Children's	Jefferson	100.00%	100.00%	100.00%	0.00%
United	Harris	100.00%	100.00%	0.00%	0.00%
United	Hidalgo	100.00%	100.00%	0.00%	0.00%
United	Jefferson	100.00%	100.00%	0.00%	0.00%

ATTACHMENT V2
STAR+PLUS Claims Adjudication (2017 SFQ1-SFQ2)

MCO	Service Area	Acute Care Claims					
		% Clean Adj. w/in 30 Days		% Appealed Adj. w/in 30 Days		% Clean Adj. w/in 90 Days	
		(98% Std.)		(98% Std.)		(99% Std.)	
		17Q1	17Q2	17Q1	17Q2	17Q1	17Q2
Amerigroup	Bexar	99.30%	99.47%	98.74%	96.88%	99.72%	99.85%
Amerigroup	El Paso	99.68%	99.25%	98.77%	9846.00%	99.93%	99.79%
Amerigroup	Harris	99.47%	99.28%	98.68%	98.92%	99.83%	99.85%
Amerigroup	Jefferson	99.66%	99.62%	98.37%	96.11%	99.93%	99.98%
Amerigroup	Lubbock	99.70%	99.52%	99.16%	93.22%	99.94%	99.91%
Amerigroup	MRSA West	99.55%	99.06%	99.66%	96.83%	99.97%	99.96%
Amerigroup	Tarrant	99.56%	99.56%	96.56%	98.12%	99.93%	99.93%
Amerigroup	Travis	99.58%	99.59%	98.15%	98.03%	99.89%	99.97%
Cigna-HealthSpring	Hidalgo	99.86%	98.68%	94.88%	98.84%	100.00%	99.99%
Cigna-HealthSpring	MRSA NE	99.73%	99.13%	97.40%	97.85%	99.99%	99.99%
Cigna-HealthSpring	Tarrant	99.39%	98.47%	93.60%	98.70%	99.98%	99.98%
Molina	Bexar	99.10%	99.37%	98.29%	98.58%	99.92%	99.89%
Molina	Dallas	98.85%	98.78%	98.60%	98.02%	99.85%	99.50%
Molina	El Paso	98.29%	99.05%	98.46%	97.86%	99.75%	99.82%
Molina	Harris	98.85%	98.78%	98.60%	98.02%	99.85%	99.50%
Molina	Hidalgo	99.38%	99.14%	99.42%	97.52%	99.94%	99.81%
Molina	Jefferson	98.90%	99.10%	97.47%	98.54%	99.92%	99.68%
Superior	Bexar	99.07%	98.95%	99.09%	100.00%	99.96%	99.94%
Superior	Dallas	99.02%	99.14%	98.78%	97.59%	99.97%	99.84%
Superior	Hidalgo	99.15%	99.32%	100.00%	100.00%	99.98%	99.91%
Superior	Lubbock	98.54%	99.01%	100.00%	100.00%	99.98%	99.79%
Superior	MRSA Central	99.07%	99.31%	100.00%	97.87%	99.99%	99.90%
Superior	MRSA West	99.15%	99.32%	100.00%	100.00%	99.98%	99.91%
Superior	Nueces	98.42%	98.89%	100.00%	100.00%	99.96%	99.79%
United	Harris	99.81%	99.69%	99.86%	99.74%	99.94%	99.90%
United	Jefferson	99.88%	99.63%	100.00%	99.21%	99.97%	99.92%
United	MRSA Central	99.79%	99.66%	100.00%	99.52%	99.96%	99.93%
United	MRSA NE	99.12%	99.10%	100.00%	99.82%	99.97%	99.97%
United	Nueces	99.84%	99.81%	100.00%	99.89%	99.99%	99.94%
United	Travis	99.73%	99.67%	100.00%	99.67%	99.97%	99.89%

ATTACHMENT V2
STAR+PLUS Claims Adjudication (2017 SFQ1-SFQ2)

MCO	Service Area	Behavioral Health Services Organization's Claims					
		% Clean Adj. w/in 30 Days		% Appealed Adj. w/in 30 Days		% Clean Adj. w/in 90 Days	
		(98% Std.)		(98% Std.)		(99% Std.)	
		17Q1	17Q2	17Q1	17Q2	17Q1	17Q2
Amerigroup	Bexar	99.71%	99.58%	100.00%	93.33%	99.99%	99.92%
Amerigroup	El Paso	99.94%	99.82%	100.00%	100.00%	99.98%	99.98%
Amerigroup	Harris	99.77%	99.68%	100.00%	100.00%	99.96%	99.95%
Amerigroup	Jefferson	99.88%	99.76%	100.00%	92.31%	100.00%	100.00%
Amerigroup	Lubbock	100.00%	99.76%	100.00%	100.00%	100.00%	100.00%
Amerigroup	MRSA West	99.60%	99.64%	100.00%	92.59%	100.00%	99.97%
Amerigroup	Tarrant	99.71%	99.75%	99.07%	99.42%	99.94%	99.97%
Amerigroup	Travis	99.76%	99.66%	97.83%	100.00%	99.98%	99.97%
Cigna-HealthSpring	Hidalgo	99.88%	99.85%	0.00%	0.00%	100.00%	100.00%
Cigna-HealthSpring	MRSA NE	99.94%	99.55%	83.33%	100.00%	100.00%	100.00%
Cigna-HealthSpring	Tarrant	100.00%	99.45%	0.00%	100.00%	100.00%	100.00%
Molina	Bexar	99.59%	99.76%	90.00%	100.00%	99.98%	99.93%
Molina	Dallas	99.40%	99.78%	100.00%	100.00%	99.98%	99.92%
Molina	El Paso	99.77%	99.68%	100.00%	100.00%	100.00%	99.99%
Molina	Harris	99.40%	99.78%	100.00%	100.00%	99.98%	99.92%
Molina	Hidalgo	99.69%	99.93%	100.00%	100.00%	99.99%	100.00%
Molina	Jefferson	99.57%	99.82%	100.00%	100.00%	99.95%	99.93%
Superior	Bexar	99.75%	99.40%	100.00%	100.00%	100.00%	99.99%
Superior	Dallas	0.00%	100.00%	0.00%	0.00%	0.00%	100.00%
Superior	Hidalgo	99.95%	99.25%	100.00%	0.00%	100.00%	100.00%
Superior	Lubbock	99.63%	99.56%	100.00%	0.00%	100.00%	100.00%
Superior	MRSA Central	99.95%	99.68%	100.00%	100.00%	100.00%	99.98%
Superior	MRSA West	99.95%	99.25%	100.00%	0.00%	100.00%	100.00%
Superior	Nueces	99.74%	99.30%	100.00%	100.00%	100.00%	99.95%
United	Harris	98.86%	99.99%	100.00%	100.00%	99.44%	100.00%
United	Jefferson	99.10%	100.00%	100.00%	100.00%	99.22%	100.00%
United	MRSA Central	98.66%	99.93%	100.00%	100.00%	99.94%	100.00%
United	MRSA NE	99.50%	99.70%	100.00%	100.00%	100.00%	99.99%
United	Nueces	98.54%	100.00%	100.00%	0.00%	100.00%	100.00%
United	Travis	99.85%	99.96%	100.00%	100.00%	100.00%	100.00%

ATTACHMENT V2
STAR+PLUS Claims Adjudication (2017 SFQ1-SFQ2)

MCO	Service Area	Vision Services Organization's Claims					
		% Clean Adj. w/in 30 Days		% Appealed Adj. w/in 30 Days		% Clean Adj. w/in 90 Days	
		(98% Std.)		(98% Std.)		(99% Std.)	
		17Q1	17Q2	17Q1	17Q2	17Q1	17Q2
Amerigroup	Bexar	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Amerigroup	El Paso	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Amerigroup	Harris	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Amerigroup	Jefferson	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Amerigroup	Lubbock	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Amerigroup	MRSA West	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Amerigroup	Tarrant	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Amerigroup	Travis	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Cigna-HealthSpring	Hidalgo	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Cigna-HealthSpring	MRSA NE	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Cigna-HealthSpring	Tarrant	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%
Molina	Bexar	100.00%	98.92%	0.00%	0.00%	100.00%	100.00%
Molina	Dallas	98.81%	99.24%	100.00%	100.00%	100.00%	100.00%
Molina	El Paso	100.00%	95.93%	0.00%	100.00%	100.00%	98.93%
Molina	Harris	98.81%	99.24%	100.00%	100.00%	100.00%	100.00%
Molina	Hidalgo	99.50%	99.11%	100.00%	100.00%	99.08%	99.82%
Molina	Jefferson	98.30%	98.80%	100.00%	100.00%	100.00%	99.10%
Superior	Bexar	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Superior	Dallas	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Superior	Hidalgo	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Superior	Lubbock	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Superior	MRSA Central	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Superior	MRSA West	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Superior	Nueces	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%
United	Harris	99.44%	97.25%	0.00%	0.00%	99.90%	98.48%
United	Jefferson	99.30%	95.33%	0.00%	0.00%	99.77%	98.17%
United	MRSA Central	92.12%	81.48%	0.00%	0.00%	100.00%	92.59%
United	MRSA NE	99.43%	93.85%	0.00%	0.00%	99.57%	98.17%
United	Nueces	98.68%	97.07%	0.00%	0.00%	100.00%	99.63%
United	Travis	98.98%	96.40%	0.00%	0.00%	99.83%	97.39%

ATTACHMENT V2
STAR+PLUS Claims Adjudication (2017 SFQ1-SFQ2)

MCO	Service Area	Pharmacy Benefit Manager's Claims			
		% Clean Electronic Claims Adj. w/in 18 Days		% Non-Electronic Claims Adj. w/in 21 Days 2	
				(98% Std.)2	
		17Q1	17Q2	17Q1	17Q2
Amerigroup	Bexar	100.00%	100.00%	100.00%	0.00%
Amerigroup	El Paso	100.00%	100.00%	0.00%	0.00%
Amerigroup	Harris	100.00%	100.00%	100.00%	100.00%
Amerigroup	Jefferson	100.00%	100.00%	0.00%	0.00%
Amerigroup	Lubbock	100.00%	100.00%	0.00%	0.00%
Amerigroup	MRSA West	100.00%	100.00%	100.00%	0.00%
Amerigroup	Tarrant	100.00%	100.00%	100.00%	100.00%
Amerigroup	Travis	100.00%	100.00%	0.00%	100.00%
Cigna-HealthSpring	Hidalgo	100.00%	100.00%	0.00%	0.00%
Cigna-HealthSpring	MRSA NE	99.99%	99.98%	0.00%	0.00%
Cigna-HealthSpring	Tarrant	99.97%	99.97%	0.00%	0.00%
Molina	Bexar	100.00%	100.00%	100.00%	0.00%
Molina	Dallas	100.00%	100.00%	0.00%	100.00%
Molina	El Paso	100.00%	100.00%	0.00%	0.00%
Molina	Harris	100.00%	100.00%	0.00%	100.00%
Molina	Hidalgo	100.00%	100.00%	0.00%	0.00%
Molina	Jefferson	100.00%	100.00%	0.00%	100.00%
Superior	Bexar	100.00%	100.00%	0.00%	0.00%
Superior	Dallas	100.00%	100.00%	0.00%	0.00%
Superior	Hidalgo	100.00%	100.00%	0.00%	0.00%
Superior	Lubbock	100.00%	100.00%	0.00%	0.00%
Superior	MRSA Central	100.00%	100.00%	0.00%	0.00%
Superior	MRSA West	100.00%	100.00%	0.00%	0.00%
Superior	Nueces	100.00%	100.00%	0.00%	0.00%
United	Harris	100.00%	100.00%	0.00%	0.00%
United	Jefferson	100.00%	100.00%	0.00%	0.00%
United	MRSA Central	100.00%	100.00%	0.00%	0.00%
United	MRSA NE	100.00%	100.00%	0.00%	0.00%
United	Nueces	100.00%	100.00%	0.00%	0.00%
United	Travis	100.00%	100.00%	0.00%	0.00%

ATTACHMENT V2
STAR+PLUS Claims Adjudication (2017 SFQ1-SFQ2)

MCO	Service Area	Long Term Care Organization's Claims					
		% Clean Adj. w/in 30 Days		% Appealed Adj. w/in 30 Days		% Clean Adj. w/in 90 Days	
		(98% Std.)		(98% Std.)		(99% Std.)	
		17Q1	17Q2	17Q1	17Q2	17Q1	17Q2
Amerigroup	Bexar	99.90%	99.61%	98.64%	99.40%	99.99%	99.86%
Amerigroup	El Paso	99.82%	99.79%	96.67%	99.51%	99.95%	99.97%
Amerigroup	Harris	99.89%	99.96%	99.66%	99.72%	99.99%	99.78%
Amerigroup	Jefferson	99.96%	99.76%	100.00%	100.00%	99.99%	99.97%
Amerigroup	Lubbock	99.91%	99.61%	93.10%	100.00%	99.96%	99.97%
Amerigroup	MRSA West	99.96%	99.71%	100.00%	99.43%	99.99%	99.98%
Amerigroup	Tarrant	99.74%	99.76%	100.00%	99.59%	99.82%	99.98%
Amerigroup	Travis	99.93%	99.75%	98.82%	100.00%	100.00%	99.97%
Cigna-HealthSpring	Hidalgo	99.97%	99.78%	99.08%	98.57%	100.00%	99.98%
Cigna-HealthSpring	MRSA NE	99.99%	99.16%	100.00%	100.00%	100.00%	100.00%
Cigna-HealthSpring	Tarrant	99.85%	99.76%	100.00%	100.00%	99.99%	100.00%
Molina	Bexar	99.83%	99.71%	100.00%	90.91%	99.95%	99.90%
Molina	Dallas	99.04%	99.31%	100.00%	96.23%	99.96%	99.86%
Molina	El Paso	99.92%	99.71%	100.00%	91.67%	99.99%	99.99%
Molina	Harris	99.04%	99.31%	100.00%	96.23%	99.96%	99.86%
Molina	Hidalgo	99.84%	99.92%	82.35%	84.68%	99.98%	100.00%
Molina	Jefferson	99.60%	99.30%	100.00%	98.08%	99.86%	99.91%
Superior	Bexar	99.51%	99.58%	0.00%	0.00%	100.00%	99.95%
Superior	Dallas	99.28%	99.12%	0.00%	100.00%	99.99%	99.84%
Superior	Hidalgo	99.29%	99.59%	100.00%	0.00%	99.99%	99.92%
Superior	Lubbock	99.63%	99.71%	0.00%	0.00%	99.99%	99.98%
Superior	MRSA Central	99.70%	99.72%	0.00%	100.00%	100.00%	99.98%
Superior	MRSA West	99.29%	99.59%	100.00%	0.00%	99.99%	99.92%
Superior	Nueces	99.54%	99.77%	0.00%	100.00%	100.00%	99.92%
United	Harris	99.36%	99.29%	99.76%	99.75%	99.97%	99.92%
United	Jefferson	99.93%	99.91%	100.00%	100.00%	99.94%	100.00%
United	MRSA Central	99.88%	98.66%	100.00%	99.52%	99.99%	99.52%
United	MRSA NE	99.93%	99.92%	99.62%	99.69%	99.96%	99.97%
United	Nueces	99.78%	99.99%	0.00%	99.80%	99.80%	100.00%
United	Travis	99.94%	99.93%	99.57%	99.33%	99.98%	100.00%

ATTACHMENT V3
Dental Claims Adjudication (2017 SFQ1-SFQ2)

DMO	Service Area	Dental Claims					
		% Clean Adj. w/in 30 Days		% Appealed Adj. w/in 30 Days		% Clean Adj. w/in 90 Days	
		(98% Std.)		(98% Std.)		(99% Std.)	
		Q1	Q2	Q1	Q2	Q1	Q2
Dentaquest	Statewide	99.94%	99.90%	99.92%	99.91%	100.00%	99.91%
MCNA	Statewide	99.95%	99.96%	99.80%	100.00%	100.00%	100.00%

Attachment V4
STAR Claims Adjudication (2017 SFQ1-SFQ2)

MCO	Service Area	Acute Care Claims					
		% Clean Adj. w/in 30 Days		% Clean Adj. w/in 90 Days		% Appealed Adj. w/in 30 Days	
		(98% Std.)		(99% Std.)		(98% Std.)	
		17Q1	17Q2	17Q1	17Q2	17Q1	17Q2
Aetna	Tarrant	100.00%	98.79%	100.00%	99.98%	0.00%	100.00%
Amerigroup	Dallas	100.00%	99.63%	100.00%	100.00%	100.00%	98.41%
	El Paso	100.00%	99.85%	100.00%	100.00%	0.00%	98.36%
	Harris	100.00%	99.90%	100.00%	100.00%	0.00%	100.00%
	Lubbock	100.00%	99.92%	100.00%	100.00%	0.00%	98.72%
	MRSA West	100.00%	99.79%	100.00%	100.00%	0.00%	93.48%
BCBS	MRSA Central	100.00%	99.75%	100.00%	100.00%	0.00%	100.00%
	Travis	100.00%	99.88%	100.00%	100.00%	0.00%	100.00%
Children's Medical Center	Dallas	100.00%	80.77%	100.00%	99.96%	0.00%	0.00%
Community 1st	Bexar	100.00%	78.80%	100.00%	99.86%	0.00%	59.59%
Cook Children's	Tarrant	100.00%	98.76%	100.00%	100.00%	0.00%	100.00%
Driscoll	Hidalgo	100.00%	98.53%	100.00%	100.00%	0.00%	100.00%
	Nueces	100.00%	96.68%	100.00%	100.00%	0.00%	95.24%
Superior	Bexar	0.00%	96.72%	0.00%	99.97%	0.00%	100.00%
	El Paso	0.00%	95.90%	0.00%	99.97%	0.00%	100.00%
	Hidalgo	100.00%	96.13%	100.00%	99.97%	0.00%	100.00%
	Lubbock	100.00%	96.12%	100.00%	99.92%	0.00%	100.00%
	MRSA West	100.00%	96.31%	100.00%	99.94%	0.00%	0.00%
	Nueces	100.00%	96.76%	100.00%	99.95%	0.00%	100.00%
	Travis	100.00%	96.45%	100.00%	99.91%	0.00%	100.00%
Texas Children's	Harris	100.00%	95.68%	100.00%	100.00%	0.00%	100.00%
	Jefferson	100.00%	95.68%	100.00%	100.00%	0.00%	100.00%
	MRSA NE	0.00%	91.30%	0.00%	100.00%	0.00%	100.00%
United	Harris	100.00%	99.21%	100.00%	100.00%	0.00%	100.00%
	Hidalgo	100.00%	99.46%	100.00%	100.00%	0.00%	100.00%
	Jefferson	100.00%	99.36%	100.00%	100.00%	0.00%	100.00%
	MRSA Central	100.00%	99.15%	100.00%	100.00%	0.00%	100.00%
	MRSA NE	100.00%	99.15%	100.00%	99.99%	0.00%	100.00%

Attachment V4
STAR Claims Adjudication (2017 SFQ1-SFQ2)

MCO	Service Area	Behavioral Health Services Organization's Claims					
		% Clean Adj. w/in 30 Days		% Clean Adj. w/in 90 Days		% Appealed Adj. w/in 30 Days	
		(98% Std.)		(99% Std.)		(98% Std.)	
		17Q1	17Q2	17Q1	17Q2	17Q1	17Q2
Aetna	Tarrant	100.00%	99.03%	100.00%	100.00%	0.00%	100.00%
Amerigroup	Dallas	100.00%	99.38%	100.00%	100.00%	0.00%	100.00%
	El Paso	100.00%	99.97%	100.00%	100.00%	0.00%	100.00%
	Harris	100.00%	99.93%	100.00%	100.00%	0.00%	100.00%
	Lubbock	100.00%	100.00%	100.00%	100.00%	0.00%	100.00%
	MRSA West	100.00%	99.87%	100.00%	100.00%	0.00%	100.00%
BCBS	MRSA Central	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
	Travis	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
Children's Medical Center	Dallas	0.00%	97.01%	0.00%	100.00%	0.00%	0.00%
Community 1st	Bexar	100.00%	80.60%	100.00%	99.99%	0.00%	37.31%
Cook Children's	Tarrant	100.00%	99.39%	100.00%	100.00%	0.00%	100.00%
Driscoll	Hidalgo	100.00%	98.46%	100.00%	100.00%	0.00%	100.00%
	Nueces	100.00%	99.10%	100.00%	100.00%	0.00%	100.00%
Superior	Bexar	0.00%	99.06%	0.00%	99.98%	0.00%	0.00%
	El Paso	0.00%	95.79%	0.00%	99.96%	0.00%	0.00%
	Hidalgo	100.00%	98.67%	100.00%	100.00%	0.00%	0.00%
	Lubbock	100.00%	95.69%	100.00%	100.00%	0.00%	0.00%
	MRSA West	0.00%	97.13%	0.00%	100.00%	0.00%	0.00%
	Nueces	100.00%	97.64%	100.00%	100.00%	0.00%	0.00%
	Travis	100.00%	96.36%	100.00%	99.96%	0.00%	0.00%
Texas Children's	Harris	100.00%	97.52%	100.00%	100.00%	0.00%	100.00%
	Jefferson	100.00%	97.52%	100.00%	100.00%	0.00%	100.00%
	MRSA NE	0.00%	91.67%	0.00%	100.00%	0.00%	100.00%
United	Harris	100.00%	99.94%	100.00%	100.00%	100.00%	0.00%
	Hidalgo	100.00%	99.95%	100.00%	100.00%	100.00%	0.00%
	Jefferson	100.00%	99.37%	100.00%	100.00%	100.00%	0.00%
	MRSA Central	100.00%	99.43%	100.00%	100.00%	100.00%	0.00%
	MRSA NE	100.00%	99.69%	100.00%	99.96%	100.00%	0.00%

Attachment V4
STAR Claims Adjudication (2017 SFQ1-SFQ2)

MCO	Service Area	Vision Services Organization's Claims					
		% Clean Adj. w/in 30 Days		% Clean Adj. w/in 90 Days		% Appealed Adj. w/in 30 Days	
		(98% Std.)		(99% Std.)		(98% Std.)	
		17Q1	17Q2	17Q1	17Q2	17Q1	17Q2
Aetna	Tarrant	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
Amerigroup	Dallas	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
	El Paso	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
	Harris	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
	Lubbock	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
	MRSA West	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
BCBS	MRSA Central	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
	Travis	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
Children's Medical Center	Dallas	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
Community 1st	Bexar	0.00%	100.00%	0.00%	100.00%	0.00%	0.00%
Cook Children's	Tarrant	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
Driscoll	Hidalgo	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
	Nueces	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
Superior	Bexar	0.00%	100.00%	0.00%	100.00%	0.00%	100.00%
	El Paso	0.00%	100.00%	0.00%	100.00%	0.00%	0.00%
	Hidalgo	100.00%	100.00%	100.00%	100.00%	0.00%	100.00%
	Lubbock	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
	MRSA West	100.00%	100.00%	100.00%	100.00%	0.00%	100.00%
	Nueces	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
	Travis	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
Texas Children's	Harris	0.00%	100.00%	0.00%	100.00%	0.00%	0.00%
	Jefferson	0.00%	100.00%	0.00%	100.00%	0.00%	0.00%
	MRSA NE	0.00%	100.00%	0.00%	100.00%	0.00%	0.00%
United	Harris	100.00%	97.92%	100.00%	100.00%	0.00%	0.00%
	Hidalgo	100.00%	98.15%	100.00%	100.00%	0.00%	0.00%
	Jefferson	100.00%	96.17%	100.00%	100.00%	0.00%	0.00%
	MRSA Central	100.00%	95.34%	100.00%	99.64%	0.00%	0.00%
	MRSA NE	100.00%	97.47%	100.00%	100.00%	0.00%	0.00%

Attachment V4
STAR Claims Adjudication (2017 SFQ1-SFQ2)

MCO	Service Area	Long Term Care Organization's Claims					
		% Clean Adj. w/in 30 Days		% Clean Adj. w/in 90 Days		% Appealed Adj. w/in 30 Days	
		(98% Std.)		(99% Std.)		(98% Std.)	
		17Q1	17Q2	17Q1	17Q2	17Q1	17Q2
Aetna	Tarrant	0.00%	97.42%	0.00%	100.00%	0.00%	0.00%
Amerigroup	Dallas	100.00%	99.90%	100.00%	100.00%	0.00%	100.00%
	El Paso	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
	Harris	100.00%	99.90%	100.00%	100.00%	0.00%	100.00%
	Lubbock	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
	MRSA West	100.00%	100.00%	100.00%	100.00%	0.00%	0.00%
BCBS	MRSA Central	100.00%	96.88%	100.00%	100.00%	0.00%	0.00%
	Travis	100.00%	98.72%	100.00%	100.00%	0.00%	0.00%
Children's Medical Center	Dallas	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Community 1st	Bexar	83.31%	78.56%	100.00%	99.76%	100.00%	45.80%
Cook Children's	Tarrant	100.00%	98.24%	100.00%	99.98%	0.00%	0.00%
Driscoll	Hidalgo	100.00%	98.71%	100.00%	100.00%	0.00%	100.00%
	Nueces	100.00%	98.61%	100.00%	100.00%	0.00%	100.00%
Superior	Bexar	0.00%	92.89%	0.00%	99.96%	0.00%	0.00%
	El Paso	0.00%	96.07%	0.00%	99.90%	0.00%	0.00%
	Hidalgo	100.00%	98.73%	100.00%	99.95%	0.00%	0.00%
	Lubbock	100.00%	96.89%	100.00%	100.00%	0.00%	0.00%
	MRSA West	100.00%	94.27%	100.00%	100.00%	0.00%	0.00%
	Nueces	100.00%	96.84%	100.00%	100.00%	0.00%	0.00%
	Travis	0.00%	90.75%	0.00%	100.00%	0.00%	0.00%
Texas Children's	Harris	100.00%	99.45%	100.00%	100.00%	0.00%	100.00%
	Jefferson	100.00%	99.45%	100.00%	100.00%	0.00%	100.00%
	MRSA NE	0.00%	99.73%	0.00%	100.00%	0.00%	100.00%
United	Harris	100.00%	99.55%	100.00%	100.00%	0.00%	0.00%
	Hidalgo	100.00%	99.65%	100.00%	100.00%	0.00%	0.00%
	Jefferson	100.00%	99.90%	100.00%	100.00%	0.00%	0.00%
	MRSA Central	100.00%	99.46%	100.00%	100.00%	0.00%	0.00%
	MRSA NE	100.00%	99.59%	100.00%	100.00%	0.00%	0.00%

Attachment V4
STAR Claims Adjudication (2017 SFQ1-SFQ2)

MCO	Service Area	Pharmacy Benefit Manager's Claims			
		% Clean Electronic Claims Adj. w/in 18 Days		% Non-Electronic Claims Adj. w/in 21 Days 2 (98% Std.)2	
		17Q1	17Q2	17Q1	17Q2
Aetna	Tarrant	100.00%	100.00%	0.00%	0.00%
Amerigroup	Dallas	100.00%	100.00%	0.00%	100.00%
	El Paso	100.00%	100.00%	0.00%	0.00%
	Harris	100.00%	100.00%	0.00%	0.00%
	Lubbock	100.00%	100.00%	0.00%	0.00%
	MRSA West	100.00%	100.00%	0.00%	0.00%
BCBS	MRSA Central	100.00%	100.00%	0.00%	100.00%
	Travis	100.00%	100.00%	0.00%	0.00%
Children's Medical Center	Dallas	100.00%	100.00%	0.00%	0.00%
Community 1st	Bexar	100.00%	100.00%	0.00%	0.00%
Cook Children's	Tarrant	100.00%	100.00%	0.00%	0.00%
Driscoll	Hidalgo	100.00%	100.00%	0.00%	0.00%
	Nueces	100.00%	100.00%	0.00%	0.00%
Superior	Bexar	0.00%	100.00%	0.00%	0.00%
	El Paso	0.00%	100.00%	0.00%	0.00%
	Hidalgo	100.00%	100.00%	0.00%	0.00%
	Lubbock	100.00%	100.00%	0.00%	0.00%
	MRSA West	100.00%	100.00%	0.00%	0.00%
	Nueces	100.00%	100.00%	0.00%	0.00%
	Travis	100.00%	100.00%	0.00%	0.00%
Texas Children's	Harris	100.00%	100.00%	0.00%	0.00%
	Jefferson	100.00%	100.00%	0.00%	0.00%
	MRSA NE	100.00%	100.00%	0.00%	0.00%
United	Harris	100.00%	100.00%	0.00%	0.00%
	Hidalgo	100.00%	100.00%	0.00%	0.00%
	Jefferson	100.00%	100.00%	0.00%	0.00%
	MRSA Central	100.00%	100.00%	0.00%	0.00%
	MRSA NE	100.00%	100.00%	0.00%	0.00%