

**QExA Dashboard Report
Health Plan Comparison
SFY 2014 Monthly Trend Analysis**

	July '14		August '14		September '14	
	Ohana	United	Ohana	United	Ohana	United
# Members						
Medicaid	10,242	7,026	10,346	7,036	10,418	7,117
Duals	15,539	15,982	15,440	15,965	15,481	16,037
Total Members	25,781	23,008	25,786	23,001	25,899	23,154
# Network Providers						
PCPs	554	753	559	753	550	755
PCPs - # in Clinics (e.g. FQHC, CHC, etc.)		41	67	41	67	41
Specialists	2136	2,548	2151	2,562	2149	2,573
Facilities (Hosp./NF)	63	46	63	46	63	46
Foster Homes (FH) (CCFHH only; no E-ARCH)	1010	931	1012	936	1018	937
HCBS Providers (All LTC, except CCFHH and NF)	157	386	157	390	157	390
Ancillary & Other (All provider types not listed above; incl Phcy, Lab, BH, Allied, Hospice, HHA)	1,640	743	1,651	742	1,672	749
Total # of providers	5,560	5,448	5,660	5,470	5,676	5,491
Call Center						
# Member Calls	9,657	3,485	8,521	3,422	9,375	3,759
Avg. time until phone answered	0:00:11	00:24	0:00:09	00:14	0:00:16	00:10
Avg. time on phone with member	0:07	06:20	0:07	05:38	0:07	05:14
% of member calls abandoned	5%	2.7%	3%	1.8%	3%	1.1%
# Provider Calls	4,973	2,822	4,661	2,346	4,526	2,743
Avg. time until phone answered	0:00:13	00:04	0:00:11	00:00	0:00:22	00:01
Avg. time on phone with provider	0:08	06:47	0:08	07:52	0:08	07:22
% of provider calls abandoned	1%	0.6%	1%	0.0%	2%	0.3%
Medical Claims- Electronic						
# Submitted, not able to get into system	2,157	2,276	2,565	2,078	2,566	1,863
# Received	53,056	45,522	55,380	41,569	53,823	37,277
# Paid	38,901	35,696	48,522	32,393	39,876	33,108
# In Process	10,308	801	8,372	885	7,261	1,114
# Denied	8,665	11,066	14,255	9,579	11,574	8,446
Avg time for processing claim in days	11	10	12	9	10	10
* unable to break out (month to date)						
Medical Claims- Paper						
# Submitted, not able to get into system	747	1,288	657	1,224	537	1,620
# Received	16,863	25,765	15,197	24,496	15,885	32,401
# Paid	9,976	20,121	12,448	18,174	10,441	16,929
# In Process	5,496	1,770	4,746	4,100	4,444	4,744
# Denied	3,593	7,559	5,472	7,255	4,388	6,560
Avg time for processing claim in days (month-to-date)	13	10	15	7	15	8
Prior Authorization (PA)- Electronic						
# Received	33	34	29	47	45	53
# In Process	1	0	0	3	0	18
# Approved	32	33	29	43	44	35
# Denied	0	1	0	1	1	0
Avg time for PA in days (month to date)	1	6	1	6	1	6
Prior Authorization (PA)- Paper and Telephone						
# Received	659	3,918	572	3,446	713	3,491
# In Process	24	117	27	113	50	159
# Approved	619	3,551	535	3,098	646	3,081
# Denied	16	250	10	235	17	251
Avg time for PA in days (month-to-date)	5	3	5	3	5	3
# Non-Emergency Transports						
Ground	9,745	8,071	9,034	7,357	9,411	7737
Air	617	147	502	129	569	131
* round trip						
# Member Grievance						
# Received	74	70	70	44	81	72
# Resolved	91	83	86	39	71	47
# Outstanding	74	16	58	21	68	46
# Provider Grievance						
# Received	2	3	0	0	1	0
# Resolved	3	3	3	0	2	0
# Outstanding	6	0	3	0	2	0
# Member Appeals						
# Received	2	3	2	7	3	4
# Resolved	3	3	3	2	3	7
# Outstanding	3	3	2	8	2	5
# Provider Appeals						
# Received	29	42	62	51	47	53
# Resolved	26	49	12	32	37	63
# Outstanding	43	30	93	49	103	39
Utilization - based on Auth (A) or Claims (C)						
Inpatient Acute Admits * (A) - per 1,000	273	259	270	211	262	219
Inpatient Acute Days * (A) - per 1,000	1,837	1,486	1,903	1,229	1,643	1,297
Readmissions within 30 days* (A)	73	29	60	25	55	17
ER Visits * (C) - per 1,000**	1,189	967	1,038	951	1,117	900
# Prescriptions (C) - per 1,000	20,934	20,342	20,303	19,464	20,795	19,500
Waitlisted Days * (A) - per 1,000	334	49	270	100	157	146
NF Admits * (A)	1	1	3	3	4	3
# Members in NF (non-Medicare paid days) (C)**	1,383	1,222	1,224	1,180	1,296	1,165
# Members in HCBS **(C)- note: member can be included in more than one category listed below	2,191	2,574	2,146	2,451	2,235	2,518
# Members in FH **(C)	694	1,049	671	1,013	676	1,026
# Members in Self-Direction **(C)	858	908	829	879	876	882
# Members receiving other HCBS **(C)	1,333	984	1,317	895	1,359	955
NF Days (non-Medicare covered days) (C)						
(* non-Medicare) (**lag in data of two months)						

Legend:

ER= Emergency Room
 FH=Foster Home
 HCBS= Home and Community Based Services
 Hosp= Hospital
 NF=Nursing Facility
 PCP= Primary Care Provider
 CMS 1500- physicians, case management agencies, RACCP homes, home health, etc.
 CMS UB04- nursing facilities, FQHC, hospitals

Many health plans report utilization or frequency of services on a per 1000 members basis. This allows for a consistent statistical comparison across health plans and time periods. It is the use or occurrence (of a service, procedure, or benefit) for every 1,000 members on an annualized basis.

* Duplicates included

as of: September 30, 2014

OHANA

# Network Providers by Island	Oahu	Maui	Molokai	Lanai	Kauai	Hawaii	Hawaii	Totals
PCPs - (Traditional)	341	53	5	3	44	72	32	550
PCPs - (accepting new members)	172	20	3	1	18	20	10	244
PCPs - Clinics (e.g. FQHC, CHC, etc.)	38	2	1	1	2	10	13	67
PCPs - Clinics (accepting new members)	38	2	1	1	2	10	13	67
Specialists	1732	113	14	0	102	108	80	2,149
Specialists (accepting new members)	1561	103	14	0	98	94	70	1,940
Foster Homes (FH) (CCFFH only; no ARCH)	855	41	0	0	14	81	27	1,018
HCBS Providers (All LTC, except CCFFH and NF)	109	9	2	0	6	23	8	157
Facilities (Hosp./NF)	36	5	2	1	7	4	8	63
Ancillary & Other (All provider types not listed above; incl Phcy, Lab, Allied, Hospice, HHA)	1073	169	18	6	117	154	135	1,672
Totals	4,184	392	42	11	292	452	303	5,676

# Members by Island	Oahu	Maui	Molokai	Lanai	Kauai	East Hawaii	West Hawaii	Totals
Members	17,014	2,443	386	88	957	3,530	1,481	25,899

# Members per PCP by Island	Oahu	Maui	Molokai	Lanai	Kauai	East Hawaii	West Hawaii	Totals
Members per PCP	45	44	64	22	21	43	33	42

Note: RFP requirement is 600 members for every PCP

UNITED HEALTHCARE

# Network Providers by Island	Oahu	Maui	Molokai	Lanai	Kauai	East Hawaii	West Hawaii	Totals
PCPs (incl FQHC)	611	73	0	0	78	58	46	866
PCPs (accepting new members)	511	63	0	0	74	36	36	720
PCPs - # in Clinics (e.g. FQHC)	19	0	0	0	6	17	1	43
PCPs (in Clinic, accepting new members)	19	0	0	0	6	17	1	43
Specialists	2,532	257	0	0	218	161	157	3,325
Specialist (accepting new members)	2,356	253	0	0	215	128	155	3,107
Facilities (Hosp./NF)	58	18	0	0	7	18	8	109
Foster Homes (FH) (xARCH)	787	30	0	0	16	89	21	943
HCBS Providers (All LTC, xFH & NF)	319	25	0	0	11	30	8	393
Ancillary & Other (All not listed above)	603	112	0	0	81	80	68	944
Totals	4,948	515	0	0	423	470	310	6,666

# Members by Island	Oahu	Maui	Molokai	Lanai	Kauai	East Hawaii	West Hawaii	Totals
Members	15,343	1,551	0	0	1,318	3,600	1,342	23,154

# Members per PCP by Island	Oahu	Maui	Molokai	Lanai	Kauai	East Hawaii	West Hawaii	Totals
Members per PCP	25	21	#DIV/0!	#DIV/0!	17	62	29	27

as of: September 30, 2014

OHANA

Summary of Calls by Island	Oahu	Maui	Molokai	Lanai	Kauai	East Hawaii	West Hawaii	Totals
Pharmacy - (claim, coverage, access)	589	99	11	3	39	152	44	937
Network (provider look up, access)	59	17	3	0	2	16	6	103
Primary Care Physician Assignment or Change	276	51	10	3	29	70	42	481
NEMT (inquiry, scheduling) - <i>monthly report</i>	876	34	3	1	7	58	0	979
Authorization/Notification (prior auth status)	48	40	15	0	12	46	36	197
Eligibility (general plan eligiblity, change request)	140	19	1	1	7	28	22	218
Benefits (coverage inquiry)	199	44	8	0	12	58	30	351
Enrollment (ID card request, update member information)	509	84	16	1	41	141	65	857
Service Coordination Inquiry or request (contact FSC, assessment, plan of care)	260	61	12	1	12	52	25	423
Billing/Payment/Claims	103	15	2	0	1	16	10	147
Appeals	2	1	0	0	0	0	0	3
Complaints and Grievances	41	5	2	0	2	11	1	62
Other	1064	210	38	7	78	214	125	1736
Totals	4,166	680	121	17	242	862	406	6,494

UnitedHealthcare

Summary of Calls by Island	Oahu	Maui	Kauai	Lanai	Molokai	East Hawaii	West Hawaii	Totals
Pharmacy - (claim, coverage, access)	8	1	4	0	1	1	2	17
Network (provider look up, access)	47	7	18	2	12	11	4	101
Primary Care Physician Assignment or Change	113	17	56	7	9	34	12	248
NEMT (inquiry, scheduling) - <i>monthly report*</i>	3,353	365	193	14	9	702	568	5,204
Authorization/Notification (prior auth status)	99	25	42	8	19	48	23	264
Eligibility (general plan eligiblity, change request)	994	120	291	20	86	258	98	1,867
Benefits (coverage inquiry)	63	19	7	1	10	23	13	136
Enrollment (ID card request, update member information)	419	62	78	12	24	132	63	790
Service Coordination Inquiry or request (contact FSC, assessment, plan of care)	172	14	48	3	14	53	11	315
Billing/Payment/Claims	990	97	524	48	108	228	24	2,019
Appeals	0	0	0	0	0	0	0	0
Complaints and Grievances	0	0	0	0	0	0	0	0
Other	271	33	118	10	33	89	30	584
Totals	6,529	760	1,379	125	325	1,579	848	11,545

*Calls logged via Logisticare call center