

Provider Complaint & Appeal Summary Report

BAYOU HEALTH Reporting

Health Plan ID: 2162519
 Health Plan Name: Amerigroup Louisiana, Inc.
 Health Plan Contact: ***
 Contact Email: ***
 Report Period Start Date: 20120701
 Report Period End Date: 20120731

Document ID: PI182
 Document Name: **PROVIDER COMPLAINT & APPEAL SUMMARY REPORT**
 Reporting Frequency: Monthly
 Report Due Date: 15th of the month following end of reporting period
 File Type: Excel
 Subject Matter: Informatics (I)

Summary of Appeal Decisions	By Health Plan	By Arbitration
Total # Decisions		
% Upheld		
% Overturned		
% Withdrawn		

Reporting Period	COMPLAINT STATUS	Total # of Provider Complaints	# of COMPLAINTS by ISSUE CATEGORY							# Complaints Pending or Closed 31 to 90 Days Post File Date ¹	# Complaints Pending or Closed >90 Days Post File Date ¹	Total Provider Appeals	By Appeal Type		# Appeals Pending or Closed 31 to 90 Days Post File Date ²	# Appeals Pending or Closed >90 Days Post File Date ²
			Claims / Payments	Covered Services	PAs/Referrals	PCP Auto-Assign/ Linkages	Provider Registry/ Directory	Lack of Information /Response	Other				Pre-Service Denial	Payment Denial		
Jul-2012	Received this Month	666	249	3	36	18	55	8	297							
	Total Closed this Month	544														
	Withdrawn by Provider															
	Per Internal Plan Action/Decision		4		8	2	3	2	257							
	Per Independent Arbitration															
	Per DHH Review		1													
	Other (Per Provider Request)		195	3	24	10	23	4	8							
	Total Pending (cumulative as of month end)	122	49		4	6	29	2	32							
	Information needed from Provider		7				3	2	17							
	Internal Plan Review		25						3							
	Independent Arbitration															
	DHH Review								1							
Other		17		4	6	26		11								
2012 Year to Date (YTD)	Total Complaints Received YTD															
	Total Closed YTD															
	Withdrawn by Provider															
	Per Internal Plan Decision/Correction															
	Per Independent Arbitration															
	Per DHH Decision															
Other																

¹You must submit Attachment 1 - Complaint Summary Listing detailing all pending or closed (A1) complaints not resolved within 30 to 90 days

²You must submit Attachment 2 - Appeal Summary Listing detailing all pending or closed (A1) appeals not resolved within 30 to 90 days.

Note for DHH: Amerigroup Louisiana, Inc. has included in this report those items that we have previously considered to be routine inquiries in order to comply with DHH's definition of a complaint as we understood DHH to articulate during the June 14, 2012 reporting meeting - to include any expression of displeasure that cannot be resolved immediately at the time reported to the CCN. Please note that the numbers reflected in this report may include duplication counts of complaints as the complaint is often received by multiple sources. Amerigroup is working to better automate this report and hopes to have a solution in place for future reporting that will eliminate any duplicate counts.

PI 182 - Attachment 1: Summary listing of Complaints Pending or Closed in Current Reporting Month that were closed 30 to 90 or more days after Original Date Filed

Health Plan Name: Amerigroup Louisiana, Inc.

Reporting Period: Jul-12

Status Category Codes	
Pending	Closed
P1-Information needed from Provider	C1-Withdrawn by Provider
P2-Internal Plan Review	C2-Per Internal Plan Action/Decision
P3-Per Independent Arbitration	C3-Per Independent Arbitration
P4-Referred to DHH	C4-Per DHH Review
P5-Other	C5-Other

Date Filed (YYYYMMDD)	Name of Person Filing Complaint	Organization	Summary of Complaint	Summary of Attempts to Resolve Complaint	Date Closed (YYYYMMDD)	# of Days Pending or to Close	Status Category
6/25/2012	***	Lahari Eye Center	Provider credentialing	1. Researched found credentialing application 2. requested expedited review of documents 3. credentialing review determined there was missing information. 4. Both SRPR and credentialing coordinator reached out to provider via email and telephone 5. Still awaiting response from provider		40	P1

PI 182 - Attachment 2: Summary listing of Appeals Pending or Closed in Current Reporting Month that were closed 30 to 90 or more days after Original Date Filed

Health Plan Name: Amerigroup Louisiana, Inc.
Reporting Period: Jul-12

Status Category Codes	
Pending	Closed
P1-Information needed from Provider	C1-Withdrawn by Provider
P2-Internal Plan Review	C2-Per Internal Plan Action/Decision
P3-Per Independent Arbitration	C3-Per Independent Arbitration
P5-Other	C5-Other

Date Filed (YYYYMMDD)	Name of Person Filing Appeal	Organization	Summary of Complaint	Date Closed (YYYYMMDD)	# of Days Pending or to Close	Status Category