

# Prompt Payment Report

Health Plan ID: 2162934  
 Health Plan Name: AmeriHealth Caritas Louisiana  
 Health Plan Contact: \*\*\*  
 Contact Email: \*\*\*  
 Report Period Start Date: 20131001  
 Report Period End Date: 20131231

# BAYOU HEALTH Reporting

Document ID: PI221  
 Document Name: Prompt Payment Report  
 Reporting Frequency: Quarterly  
 Report Due Date: 20140130  
 File Type: Excel  
 Subject Matter: Informatics (I)

Clean Claim Information						# of Claims Processed In Reporting Period/Percentage							
Claim Type	Description	Claims Received	\$ Amount Paid	Avg Days Cycle <sup>1</sup>	Claims Processed	Business Days		Calendar Days					
						01-15	%	1-30	%	31-90	%	>90	%
01	Inpatient Hospital	5,846	\$23,962,972.96	6.4	5,516	5,514	99.96%	5,514	99.96%	2	0.04%	0	0.00%
03	Outpatient Hospital	72,175	\$10,835,273.98	2.12	69,160	69,153	99.99%	69,153	99.99%	0	0.00%	7	0.01%
04	Professional	309,532	\$25,691,518.18	3.34	296,495	296,307	99.94%	296,472	99.99%	5	0.00%	18	0.01%
05	Rehab	27	\$39,959.40	31.0	27	25	92.59%	25	92.59%	0	0.00%	2	7.41%
06	Home Health	757	\$194,641.39	5.25	699	699	100.00%	699	100.00%	0	0.00%	0	0.00%
07	EMT(Transportation)	3,195	\$1,178,406.26	2.07	3,057	3,057	100.00%	3,057	100.00%	0	0.00%	0	0.00%
08	NEMT(Transportation)	19,243	\$804,922.43	12.53	19,245	16,102	83.67%	19,245	100.00%	0	0.00%	0	0.00%
09	DME	3,556	\$652,848.55	5.15	3,424	3,424	100.00%	3,424	100.00%	0	0.00%	0	0.00%
<b>Totals</b>		414,331	\$63,360,543.15	3.6	397,623	394,281	99.16%	397,589	99.99%	7	0.00%	27	0.01%