

Period of Performance July 2013 – June 2014

PROGRAM AREA	AmeriHealth					MedStar					Trusted				
	Q1	Q2	Q3	Q4	Overall	Q1	Q2	Q3	Q4	Overall	Q1	Q2	Q3	Q4	Overall
Financial Condition															
Risk-Based Capital Level	A	A	B+	B+	A-	A	A	A	B+	A-	D	D	C	B	C-
Reserve Capacity	--	--	A-	A-	A-	--	--	A	A	A	--	--	B-	B	B-
Administrative Performance															
Provider Network	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
Claims Payment	A-	A	A	A	A-	A	A	A	A	A	D-	C+	A	A	C+
Utilization of Physician Care															
Adults	A	A	B+	B	B+	B+	C+	C	C-	C+	C-	C-	D+	D+	C
Children	A	A	A	A	A	B+	B+	B	B-	B	A	A	A-	B+	A-
Care Coordination															
Managing ER	D-	D-	D-	D-	D	D-	D-	D-	D-	D	D	D	D	D-	D
Avoidable Hospital Admissions	--	--	B-	B-	B-	--	--	C-	C-	C-	--	--	C+	C+	C+
Reducing Hospital Readmissions	--	--	C+	D+	C	--	--	C-	C-	C-	--	--	C-	D+	D+
Overall Grade Year One	B+					B-					C+				

Performance Area Descriptions

Financial Condition

- **Risk-Based Capital Level:** Measures if the MCO has the minimum amount of capital to pay claims
- **Reserve Capacity:** A reserve to pay for services that have been provided but not yet reimbursed

Administrative Performance

- **Provider Network:** A network of providers that is sufficient to provide adequate access to all covered services. Sufficient in numbers, service mix (e.g. primary care, specialty care, and dental etc.) and geographic location to meet the needs of the beneficiaries
- **Claims Payment:** Ability to timely pay clean claims within 30 days

Utilization of Physician Care

- **Adults:** 21 years of age & above
- **Children & Adolescents:** 0 through 20 years of age
- **"Well-Child":** A child receiving "well-child" care services according to the District's Periodicity Schedule

Care Coordination

- **Managing ER:** Low acuity non-emergency (LANE) room visits
- **Avoidable Hospital Admissions:** Hospital admissions identified as potentially preventable if appropriately managed
- **Reducing Hospital Readmissions:** All cause 30-day hospital readmission



District of Columbia's Managed Care Program End-of Year Performance Report Card

Contract Year 1 July 2013 – June 2014



DC Medicaid Managed Care Overview

The DC Department of Health Care Finance (DHCF) administers the Medicaid Program to eligible District residents and the DC Healthcare Alliance Program (Alliance) to residents who do not qualify for Medicaid. Approximately 240,000 people – about one in three District residents receive health coverage through Medicaid and Alliance.

Mission

To improve health outcomes by providing access to comprehensive, cost efficient and quality health care services for residents of the District of Columbia. One of the ways DHCF seeks to fulfill its mission is through the Managed Care program.

The goals of the Managed Care program are to:

- Increase access to a full range of primary, clinic based, hospital, mental health and specialty care services for Managed Care beneficiaries;
- Ensure proper management and coordination of care as a means of improving beneficiaries health outcomes while promoting efficiency in service utilization; and
- Establish greater control and predictability over the District's spending on health care costs.

DHCF Currently contracts with three (3) full-risk Managed Care Organizations (MCOs):

- MedStar Family Choice
- Trusted Health Plan
- AmeriHealth DC

DHCF implemented a performance review project to assess and evaluate the performance of its MCOs. The goal of this project is three (3)-fold:

- Evaluate the DHCF's three (3) risk-based health plans ability to ensure beneficiary access to an adequate network of providers while managing the appropriate utilization of health care services;
- Provide objective data on the performance of the health plans across a number of domains; and
- Facilitate an annual report card evaluation of each MCO that will help to guide decisions regarding contract renewals for the MCOs.

The Report Card shows how the DC Medicaid MCOs compare to each other in key performance areas.*



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