

Prompt Payment Report

Health Plan ID:	2162845
Health Plan Name:	Louisiana Healthcare Connecti
Health Plan Contact:	
Contact Email:	
Report Period Start Date:	4/1/2013
Report Period End Date:	6/30/2013

BAYOU HEALTH Reporting

Document ID:	PI221
Document Name:	Prompt Payment Report
Reporting Frequency:	Quarterly
Report Due Date:	30th of the month following end of reporting period
File Type:	Excel
Subject Matter:	Informatics (I)

Clean Claim Information						# of Claims Processed In Reporting Period/Percentage							
						Business Days		Calendar Days					
Claim Type	Description	Claims Received	Amount Paid	Avg Days Cycle	Claims Processed	0-15	%	1-30	%	31-90	%	>90	%
01	Inpatient Hospital	6003	\$21,595,251.77	10.65	6073	5856	96.43%	6042	99.49%	31	0.51%	0	0.00%
03	Outpatient Hospital	90888	\$14,352,136.94	7.59	92494	91691	99.13%	92373	99.87%	121	0.13%	0	0.00%
04	Professional	359814	\$25,178,820.07	7.43	351761	348691	99.13%	350535	99.65%	1226	0.35%	0	0.00%
05	Rehab	1017	\$68,980.29	7.63	1003	988	98.50%	1000	99.70%	3	0.30%	0	0.00%
06	Home Health	1490	\$275,610.17	8.98	1573	1546	98.28%	1566	99.55%	7	0.45%	0	0.00%
07	EMT(Transportation)	4378	\$1,353,256.81	7.71	4331	4297	99.21%	4319	99.72%	12	0.28%	0	0.00%
08	NEMT(Transportation)	11359	\$158,904.70	5.36	11359	11359	100.00%	11359	100.00%	0	0.00%	0	0.00%
09	DME	5521	\$1,226,126.46	9.08	5647	5559	98.44%	5620	99.52%	27	0.48%	0	0.00%
12	Pharmacy	859,873	\$22,432,475.72	1	859,873	859,873	100.00%	859,873	100.00%	0	0.00%	0	0.00%
Total		1340343	\$86,641,562.93	7.382007029	1334114	1329860	99.68%	1332687	99.89%	1427	0.11%	0	0.00%

This report was based on LA Healthcare Connections' understanding of the current report specifications provided by DHH. The report programming is still under review, thus any changes may result in resubmission of the report. This report should not be used for comparative purposes until all reporting format and specifications have been finalized.