

Provider Complaint & Appeal Summary Report

Health Plan ID: 2162519
 Health Plan Name: Amerigroup Louisiana, Inc.
 Health Plan Contact: ***
 Contact Email:
 Report Period Start Date: 20130901
 Report Period End Date: 20130930

BAYOU HEALTH Reporting

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	654	
% 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% Withdrawn		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		
Sep-2013	Received this Month	221	32	1	2	19	0	9	6			600	0	600		
	Total Closed this Month	252	212	2	3	19	1	9	6			654	0	654		
	Withdrawn by Provider	0	0	0	0	0	0	0	0			0	0	0		
	Per Internal Plan Action/Decision	234	206	1	2	19	0	0	6			654	0	654		
	Per Independent Arbitration	0										0	0	0		
	Per DHH Review	0	0	0	0	0	0	0	0							
	Other	18	6	1	1	0	1	9	0			0	0	0		
	Total Pending (cumulative as of month end)	96	94	0	0	0	0	0	2			113	0	113		
	Information needed from Provider	0	0	0	0	0	0	0	0			0	0	0		
	Internal Plan Review	96	94	0	0	0	0	0	2			113	0	113		
	Independent Arbitration	0										0	0	0		
	DHH Review	0	0	0	0	0	0	0	0							
Other	0	0	0	0	0	0	0	0			0	0	0			
2013 Year to Date (YTD)	Total Complaints Received YTD	7087	6363	69	77	58	22	65	94			5461	0	5461		
	Total Closed YTD	7992	7659	67	65	56	18	58	69			4425	0	4425		
	Withdrawn by Provider	39	4	9	23	1	2	0	0			0	0	0		
	Per Internal Plan Decision/Correction	7743	7550	38	31	45	16	5	58			4425	0	4425		
	Per Independent Arbitration	0										0	0	0		
	Per DHH Decision	5	2	0	1	0	0	0	2							
Other	205	103	20	10	10	0	53	9			0	0	0			

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.