



AUTOMATED HEALTH SYSTEMS

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Ohio Consumer Hotline Monthly Report January 2014

“The Enlightened Choice in Health Service Management”

Call Center Analysis

Provider Calls: There were 4,612 calls from providers this month through the provider queue.

The number of providers who called the Hotline and elected not to enter the Provider queue in order to reach a CSR was 75. Subsequently, CSRs continue to refer these providers to the appropriate phone numbers for Provider Relations (or ACS for pharmacy issues).

Provider Directory:

OMH manages a database of Medicaid providers so that consumers may call and get information on available providers (including specialists) in their area. CSR staff are able to search for options for callers based on their zip code, county, city, type and specialty of the provider desired. ODM provides the data for this file daily. The most recent update was received on Monday, February 03, 2014.

Additionally, OMH staff are actively encouraging the use of the ODJFS website for direct access to the Medicaid FFS provider listings.

Insure Kids Now/Governor's Hotline: There were a total of 466 calls coming in through this queue for this month.

Activity Summary

- 201,954 total calls for the Ohio Medicaid Consumer Hotline. The breakdown of this total is:
 - 196,876 Total Calls (inbound and outbound)
 - 4,612 Provider Calls
 - 466 Insure Kids Now/Governor's Hotline
- 6% abandonment rate
- 6:40 minutes average talk time
- 2:16 minute average speed to answer
- 60 average CSR inbound calls per day

Ohio Consumer Hotline
January 2014
Call Center Activity Report

Day of the week	Date	Bus Hrs Calls Received (#)	Bus Hrs Calls Answered (#)	Call-Backs Bus Hrs (#)	Call-Backs Non-Bus Hrs (#)	Total Calls & Call-Backs Answered (#)	Total Calls Abandoned (#)	Abandon Rate (%)	Total Outbound Calls (#)	Total Call Activity (Inbound-Outbound)	Maximum Queue Time	Avg. Time to Abandon (Minutes)	Avg. Calls Per FTE Inbound (#)	Avg. Speed to Answer (ASA) (Minutes)	Avg Talk Time (ATT) (Minutes)
Mon	12/30/13	5924	5034	2841	25	5949	890	15%	2882	8831	:21:58	:03:28	58	:04:26	:07:18
Tue	12/31/13	3760	3398	1465	28	3788	362	10%	1535	5323	:13:42	:02:11	54	:02:49	:06:58
Wed	01/01/14	0	0	0	93	93	0	0%	0	93	:00:00	:00:00	0	:00:00	:00:00
Thurs	01/02/14	5697	5165	1240	38	5735	532	9%	758	6493	:21:29	:06:15	65	:03:59	:05:14
Fri	01/03/14	5661	5183	1114	30	5691	478	8%	1584	7275	:26:59	:03:56	69	:02:47	:05:12
Sat	01/04/14	1242	1207	615	14	1256	35	3%	1351	2607	:11:27	:02:03	42	:00:51	:07:08
Sun	01/05/14	0	0	0	92	92	0	0%	0	92	:00:00	:00:00	0	:00:00	:00:00
	Week end	22284	19987	7275	320	22604	2297	10%	5228	27832	:26:59	:04:37	58	:02:58	:06:08
	Jan Only	12600	11555	2969	267	12867	1045	8%	3693	16560	:26:59	:04:56	59	2:32	:05:24
Mon	01/06/14	6117	5553	3107	30	6147	564	9%	2627	8774	:24:35	:04:00	62	:04:01	:06:13
Tues	01/07/14	5720	5193	2733	24	5744	527	9%	2990	8734	:23:49	:03:26	56	:03:55	:07:33
Wed	01/08/14	6034	5522	2715	30	6064	512	8%	2211	8275	:22:07	:3:07	62	:03:16	:07:00
Thurs	01/09/14	6280	5869	2870	29	6309	411	7%	2357	8666	:24:29	:03:19	61	:03:09	:06:53
Fri	01/10/14	5395	5183	2460	33	5428	212	4%	2583	8011	:21:19	:03:15	60	:02:20	:07:25
Sat	01/11/14	1023	1014	515	10	1033	9	1%	1188	2221	:17:09	:02:19	41	:00:58	:07:31
Sun	01/12/14	0	0	0	94	94	0	0%	567	661	:00:00	:00:00	0	:00:00	:00:00
	Week end	30569	28334	14400	250	30819	2235	7%	14523	45342	:24:35	:03:24	57	:02:54	:07:01
Mon	01/13/14	6391	5828	2987	29	6420	563	9%	2022	8442	:24:24	:03:28	62	:03:38	:06:56
Tues	01/14/14	6372	5841	2946	42	6414	531	8%	2281	8695	:24:14	:03:23	60	:03:21	:07:06
Wed	01/15/14	6426	5975	2895	31	6457	451	7%	2613	9070	:23:54	:03:12	60	:03:05	:06:57
Thurs	01/16/14	6043	5595	2851	35	6078	448	7%	2962	9040	:22:45	:03:40	61	:02:44	:07:14
Fri	01/17/14	5913	5539	2563	16	5929	374	6%	2276	8205	:18:22	:02:43	60	:02:31	:07:10
Sat	01/18/14	1156	1143	629	14	1170	13	1%	950	2120	:16:01	:03:37	48	:00:45	:07:11
Sun	01/19/14	0	0	0	127	127	0	0%	831	958	:00:00	:00:00	0	:00:00	:00:00
	Week end	32301	29921	14871	294	32595	2380	7%	13935	46530	:24:24	:03:18	59	:02:40	:07:05
Mon	01/20/14	0	0	0	638	638	0	0%	1363	2001	:00:00	:00:00	0	:00:00	:00:00
Tues	01/21/14	6243	5831	3099	34	6277	412	7%	1711	7988	:24:06	:04:27	62	:03:03	:06:53
Wed	01/22/14	7790	7349	3522	43	7833	441	6%	1621	9454	:19:02	:03:24	64	:02:38	:06:45
Thurs	01/23/14	7644	7293	3543	25	7669	351	5%	1914	9583	:16:03	:02:01	65	:01:47	:06:50
Fri	01/24/14	6854	6616	2975	18	6872	238	3%	1825	8697	:17:01	:02:10	60	:01:39	:07:06
Sat	01/25/14	1158	1147	502	21	1179	11	1%	535	1714	:16:38	:02:00	45	:00:48	:06:51
Sun	01/26/14	0	0	0	97	97	0	0%	445	542	:00:00	:00:00	0	:00:00	:00:00
	Week end	29689	28236	13641	876	30565	1453	5%	9414	39979	:24:06	:02:57	59	:01:59	:06:54
Mon	01/27/14	8267	7803	3127	25	8292	464	6%	2050	10342	:15:14	:01:52	61	:01:26	:06:45
Tue	01/28/14	6907	6659	3276	22	6929	248	4%	1761	8690	:13:13	:02:21	62	:01:35	:07:05
Wed	01/29/14	7331	7023	3513	25	7356	308	4%	1881	9237	:15:28	:02:28	60	:01:10	:06:51
Thu	01/30/14	7792	7443	3265	53	7845	349	4%	2096	9941	:16:24	:02:35	62	:01:05	:06:54
Fri	01/31/14	7438	7054	2991	35	7473	384	5%	2782	10255	:11:23	:03:36	60	:01:06	:07:05
	Month End	142894	134028	62053	1847	144741	8866	6%	52135	196876	:26:59	:03:25	60	:02:16	:06:40

Call Center Busy Hour Report

January 2014

Calls Received During Business Hours

Day of the Week	Date	Total Calls Received	7-8 AM	8-9 AM	9-10 AM	10-11 AM	11-12 AM	12-1 PM	1-2 PM	2-3 PM	3-4 PM	4-5 PM	5-6 PM	6-7 PM	7-8 PM
Wed	01/01/14	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Thurs	01/02/14	5697	83	321	574	731	720	539	519	584	520	391	323	216	176
Fri	01/03/14	5661	111	373	558	622	575	620	621	709	579	423	240	138	92
Sat	01/04/14	1242	0	99	112	121	123	182	170	156	143	136	0	0	0
Sun	01/05/14	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Week Ending	12600	194	793	1244	1474	1418	1341	1310	1449	1242	950	563	354	268
Mon	01/06/13	6117	103	319	614	640	683	661	646	624	610	544	334	203	136
Tues	01/07/13	5720	81	317	566	680	625	603	655	570	606	529	255	151	82
Wed	01/08/13	6034	121	363	563	745	655	654	656	625	580	555	284	150	83
Thurs	01/09/13	6280	105	348	572	666	676	670	699	682	730	543	274	169	146
Fri	01/10/13	5395	105	332	536	663	598	629	540	605	524	468	199	117	79
Sat	01/11/13	1023	0	95	82	121	134	117	114	130	113	117	0	0	0
Sun	01/12/13	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Week Ending	30569	515	1774	2933	3515	3371	3334	3310	3236	3163	2756	1346	790	526
Mon	01/13/14	6391	117	479	703	702	673	623	657	643	583	595	319	175	122
Tues	01/14/14	6372	157	442	697	730	831	660	576	567	523	588	277	178	146
Wed	01/15/14	6426	128	440	663	739	726	639	623	611	573	633	321	200	130
Thurs	01/16/14	6043	127	430	567	654	633	582	671	651	553	578	287	186	124
Fri	01/17/14	5913	129	387	593	639	638	633	634	638	635	547	236	134	70
Sat	01/18/14	1156	0	77	112	145	143	152	147	156	126	98	0	0	0
Sun	01/19/14	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Week Ending	32301	658	2255	3335	3609	3644	3289	3308	3266	2993	3039	1440	873	592
Mon	01/20/14	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Tues	01/21/14	6243	154	497	696	632	609	606	540	562	600	565	411	207	164
Wed	01/22/14	7790	188	489	665	724	751	929	876	928	879	724	313	206	118
Thurs	01/23/14	7644	129	369	666	817	839	817	896	903	877	642	346	203	140
Fri	01/24/14	6854	105	364	632	811	843	813	787	767	731	555	249	120	77
Sat	01/25/14	1158	0	72	110	159	143	152	147	140	112	123	0	0	0
Sun	01/26/14	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Week Ending	29689	576	1791	2769	3143	3185	3317	3246	3300	3199	2609	1319	736	499
Mon	01/27/14	8267	123	546	793	926	985	894	927	921	825	653	388	190	96
Tue	01/28/14	6907	83	311	590	738	842	733	805	812	822	610	297	177	87
Wed	01/29/14	7331	100	354	577	795	727	775	787	822	908	668	377	268	173
Thu	01/30/14	7792	136	443	665	778	745	792	838	811	856	668	498	339	223
Fri	01/31/14	7438	105	517	718	821	814	811	806	893	816	602	272	174	89
	Month Total	142894	2490	8784	13624	15799	15731	15286	15337	15510	14824	12555	6500	3901	2553
	Cumulative Percent		2%	6%	10%	11%	11%	11%	11%	11%	10%	9%	5%	3%	2%
	Eastern Time		7-8 AM	8-9 AM	9-10 AM	10-11 AM	11-12 AM	12-1 PM	1-2 PM	2-3 PM	3-4 PM	4-5 PM	5-6 PM	6-7 PM	7-8 PM

Ohio Consumer Hotline - Activity Summary Report

Calls made from 1/1/2014 to 1/31/2014

Type	Sub Type	Total
<i>ABD Medicaid</i>	Application / Eligibility	1689
	Benefit Package / Covered Services	276
	Billing Number	140
	Card	434
	Certificate of Coverage	68
	Change	167
	Citizenship Verification Questions	0
	Estate Recovery	26
	Hearing	5
	Patient Liability	11
	Program Information	561
	Under 21 Inquiry	9
	Total	3386
<i>BCCP</i>	Application / Eligibility	11
	Benefit Package / Covered Services	5
	Card	1
	Change	3
	Estate Recovery	0
	Hearing	0
	Participating Site Information	0
	Program Information	8
	Total	28
<i>Consumer Guide</i>	Questions From Consumer Guide	3
	Total	3
<i>EOMB</i>	General Information	1
	Questions About Letter	0
	Total	1

FFS Billing	Billing Number	459
	Claims Request	23
	General Billing Questions	583
	Received Bill (Needs Letter)	17
	Total	1082
General Benefits	Dental	399
	Equipment	110
	Family Planning	40
	Healthchek Services	7
	Inquiry on Covered Services	1405
	Medicaid Expansion	5127
	Medicaid School Program	7
	Medlist Assist	14
	Pregnancy Related Services	8
	Prescriptions	894
	Transportation	371
	Vision	169
Total	8551	
Healthy Start	Application / Eligibility	3156
	Benefit Package / Covered Services	286
	Billing Number	365
	Card	448
	Certificate of Coverage	140
	Change	248
	Citizenship Verification Questions	3
	Estate Recovery	3
	Hearing	9
	Program Information	1174
	Total	5832
HIPAA	Complaint	1
	Information	1
	Request for Accounting for Disclosure	0

HIPAA	Request for Amendment	0
	Request for Restriction	0
	Send PHI Brochure	0
	Total	2
Home Health Care	Application / Eligibility	15
	Benefit Package / Covered Services	10
	BHCS Complaint	0
	BHCS Questions	2
	Card	2
	Hearing	1
	HSFA Questions	0
	Passport	1
	Program Information	14
	Provider	5
	Status	0
	Total	50
Incident Report	Billing Inquiry	78
	Reimbursement Inquiry	10
	Total	88
Information	Cash Assistance	12
	CDJFS	446
	Customer Survey	0
	Food Stamps	92
	Hotline	223
	Medicare	212
	Social Security	27
Total	1012	
Inquiry	029 Error	0
	574 Error - Not Eligible	3
	Already Selected	2063
	Called to Check on Doctors	360
	Called to Check on Just Cause Status	73
	Case Addition	22
	Case Closed	137

<i>Inquiry</i>	Case Pending	730
	Category Closed	138
	Change in Name	41
	Change in Phone Number / Address	276
	CIC - Do Not Assign	2
	Consumer Needs To Be Auto Re-Enrolled	3
	Failed Eligibility	338
	General Questions	9016
	Open Enrollment Questions	681
	Person Calling Not PIP / AG Head	139
	Referred Consumer to County Worker	1472
	Returned NME / Notice	3
	Transferred in Error	0
	Wanted Phone Number of MCP	174
	Total	15671
<i>Issue / Concern</i>	Issue / Concern about MCP	8
	Issue / Concern about Provider	0
	Issue / Concern with Caseworker	0
	Issue / Concern with ODM	1
	Total	9
<i>Limited Family Planning Services</i>	Application / Eligibility	372
	Benefit Package / Covered Services	481
	Billing Number	15
	Card	106
	Certificate of Coverage	9
	Change	33
	Hearing	5
	Program Information	618
	Total	1639
<i>Long Term Care</i>	Application / Eligibility	13

Long Term Care	Benefit Package / Covered Services	5
	Card	1
	Community Spouse	0
	Estate Recovery	4
	Hearing	0
	Ohio Access Success Project	0
	Patient Liability	7
	Program Information	18
	Total	48
Mailings	"Getting Long Term Care" Pamphlet	5
	ABD Application Letter - 7200	595
	ABD EMP Enrollment Packet	56
	ABD Pamphlet - Spanish	0
	Approved Letter	68
	BCCP Brochure	3
	Billing Incident Letter	73
	Call Me Letter	0
	CFC EMP Enrollment Packet	123
	Citizenship Verification Brochure	1
	CPA Letter	1
	CPA Letter - Blank	479
	Enrollment Error Letter	0
	Healthy Start Brochure	19
	HIPAA Notice	4
	HS/HF Information	6
	ICDS Enrollment Letter	0
	Immigrants Medicaid - Somali	1
	JC Approval Change MCP	280
	JC Approval Change MCP - Requestor	19
JC Approval FFS	0	

Mailings	JC Approval FFS - Requestor	0
	Lead Poisoning Pamphlet	0
	Mandatory ABD Enrolled	1
	Mandatory ABD Not Yet Enrolled	1
	Mandatory CFC Enrolled Child	0
	Mandatory Enrolling CFC Adult	0
	MBI Program Brochure	3
	MBI-WD Application	9
	Medicaid Program Enrollment & Benefit Information	88
	N1 Reminder Letter	19294
	N3 ABD Reminder Letter	1905
	No Contact	1
	OH Partnership for LTC	1
	Ohio Medicaid Pamphlet - Spanish	1
	Patient Liability Lbl	0
	PHI Brochure	1
	QMB - Blank	458
	Reimbursement Letter	7
	Rejected - General	227
	Rejected - General ABD	67
	Rejected - SSI-BCMHCIC	15
	Residential Treatment Letter	4
	Resolution	0
	Resolution Declined	0
	Spend Down Approval	2
Spend Down Denial	0	
TPL Approval	1	
TPL Verification Needed	1	
Total	23820	
Managed Care Info & Referral	Benefit Package	437
	Billing Number	118

Managed Care Info & Referral	Card	739
	Information	3439
	Just Cause Status	56
	Payment	6
	Phone Numbers	624
	Provider Name	351
	Transfer Request - Bureau of Managed Care	5
	Total	5775
MBI-WD	AG Collections Questions	8
	Application / Eligibility	21
	Benefit Package / Covered Services	6
	Billing Number	1
	Card	3
	Certificate of Coverage	0
	Premium Collection Issue - Needs Follow-Up	2
	Program Information	47
	Questions About Premiums	42
	Total	130
Medicaid Medicaid Correspondence	Consumer Reached - Resolved	91
	Unable to Reach - Letter Sent - Resolved	158
	Total	249
Medicare Part D	Application / Eligibility	56
	Information	370
	Questions About Letter	12
	Total	438
Medicare Premium Assistance	Application / Eligibility	792
	Benefit Package / Covered Services	315
	Billing Number	10
	Card	180
	Certificate of Coverage	21
	Change	45
	Estate Recovery	3

Medicare Premium Assistance	Hearing	1
	Patient Liability	7
	Program Information	738
	Total	2112
Mental Health Services	Questions About Letter	0
	Referred to MCP for MH Access	1
	Referred to MH Provider	0
	Request Benefits Balance - Needs Follow-Up	0
	Total	1
MyCare Ohio	General Information	616
	Total	616
ODM Survey	Managed Care Survey	0
	Total	0
Ohio Benefits Self Service Portal	Access my Benefits	159
	Account Creation/Management	29
	Account Lock Out	20
	Application Assistance	1267
	Apply for Benefits	2120
	County Office Location/Hours	156
	Electronic Verification	29
	Forgot Password Link	28
	Forgot User Name Link	18
	Frequently Asked Questions	1635
	General Navigation	414
	How to use this Site	186
	Internet Browser Issue	73
	Message Center	12
	Provided Link to Website	2385
	Submit Error Issue	68
	Transfer Call to Tier 2/3	116
	Total	8715

Ohio Integrated Eligibility System (OIES)	After Hours (After 4 pm) Telephone Application Intake	1211
	Business Hours (8am to 4pm) Telephone Application Intake	4090
	Case Inquiry/Case Status	5600
	Contact CDJS	844
	Electronic Verification Process	236
	Journal Creation & Management	6
	MAGI (Modified Adjusted Gross Income) Program Information	1340
	Notice of Action Explanation	17
	Total	13344
Ohio's Best RX	Program Information	7
	Referred Caller	7
	Total	14
Other Medicaid Program	Application / Eligibility	516
	Benefit Package / Covered Services	117
	Billing Number	83
	Card	78
	Certificate of Coverage	17
	Change	42
	Citizenship Verification Questions	1
	Estate Recovery	8
	Hearing	2
	Program Information	245
	Total	1109
PACT	Card	1
	Hearing	0
	Initial 30 Day Provider Change	0
	Program Information	0
	Provider	1

PACT	Transfer Request	0
	Total	2
Prior Authorization	How to Obtain	333
	Letter	13
	Program Information	302
	Status	206
	Transfer Request - Needs Follow-Up	0
	Total	854
Provider	Fee-For-Service Provider Names	245
	Referred to MCP For Provider List	21
	Referred to ODM Website For Provider List	64
	Referred to State Board To File Complaint Against Provider	3
	Total	333
Reimbursement	Decision	14
	Information	380
	State Hearing	1
	Total	395
Spend Down	Amount	946
	Card	369
	Certificate of Coverage	55
	Hearing	11
	Problem	162
	Program Information	1466
	Total	3009
State Hearings	How to Request	39
	Program Information	65
	Status	9
	Total	113
Surveys	Call Center Survey	0
	Total	0

Third Party Liability	Cannot Resolve with CDJFS - Needs Follow-Up	5
	General Information	121
	Need Medications Now	21
	Referral to Case Worker	116
	Referral to TPL Vendor	26
	Total	289
Tort	General Information	10
	Provided Number to Tort Unit	12
	Total	22
Waiver	Application / Eligibility	246
	Benefit Package / Covered Services	95
	Billing Number	14
	Card	109
	Certificate of Coverage	5
	Change	12
	Estate Recovery	6
	Hearing	4
	Independent Provider	3
	Patient Evaluation	2
	Patient Liability	13
	Program Information	206
	Waiting List	5
	Total	720
Grand Total All Categories		99462

**Ohio Consumer Hotline -
Total Number of Calls by Referral**

Calls made from 1/1/2014 to 1/31/2014

Type	Sub Type	Total Calls
<i>Referral</i>	1-800-MEDICARE Hotline	253
	ACS / First Health	200
	ADAMH	13
	Area Agency on Aging	38
	BCCP Regional Agency	9
	BCMh	12
	Bureau of Home and Community Services	2
	Case Management Agency	22
	Caseworker	1011
	Child Support Enforcement Agency	9
	Complaint Department	16
	County Department of Job & Family Services	2123
	Enrollment Administration Services (EAS)	0
	First Link	13
	Food Stamp Hotline	8
	Golden Buckeye Hotline	1
	Help Me Grow Hotline	0
	HomeHealthAgency	6
	Info & Refer	25
	In-House	1
	Legal Aid	5
	Managed Care Enrollment Center	9
	Managed Care Plan	386
	Managed Care Section	13
	MR / DD Board	0
	ODM	98
Ohio Department of Insurance	51	
Ohio Hospice	0	

Referral	Ohio's Best Rx	14
	Ombudsman	8
	OSHIIP	93
	Other Medical Services Agency	41
	Other Social Services Agency	29
	Out-of-State Medicaid Hotline	30
	PACT	0
	Pharmacy	95
	Prescription Drug Plan (PDP)	100
	Provider	395
	Provider Services Call Center	399
	Public Children's Services	19
	Social Security Administration	70
	StateHearingDivision	73
	StateMedicalBoard	7
	Supervisor	47
	Tort Unit	6
	Website - ODM	238
	Welfare Fraud Hotline	2
	WIC Office	1
Total		5991

AGED, BLIND, DISABLED (ABD)
STATEWIDE HEALTH CARE PLAN ENROLLMENT BY METHOD BY TYPE
 Method as a Percentage of Type
 Effective Date: 2/1/2014

ENROLLMENT METHOD	ENROLLMENT TYPE							
	FFS TO MCP		MCP TO MCP		MCP TO FFS		TOTAL	
Call	991	92.88%	461	96.04%	21	100.00%	1473	93.94%
Call Campaign	2	0.19%	2	0.42%	0	0.00%	4	0.26%
Face-To-Face	0	0.00%	0	0.00%	0	0.00%	0	0.00%
Mail	1	0.09%	0	0.00%	0	0.00%	1	0.06%
Website	73	6.84%	17	3.54%	0	0.00%	90	5.74%
TOTAL	1067	100%	480	100%	21	100%	1568	100%

AGED, BLIND, DISABLED (ABD)
STATEWIDE HEALTH CARE PLAN ENROLLMENT BY METHOD BY TYPE
 Type as a Percentage of Method
 Effective Date: 2/1/2014

ENROLLMENT METHOD	ENROLLMENT TYPE							
	FFS TO MCP		MCP TO MCP		MCP TO FFS		TOTAL	
Call	991	67.28%	461	31.30%	21	1.43%	1473	100%
Call Campaign	2	50.00%	2	50.00%	0	0.00%	4	100%
Face-To-Face	0	0.00%	0	0.00%	0	0.00%	0	100%
Mail	1	100.00%	0	0.00%	0	0.00%	1	100%
Website	73	81.11%	17	18.89%	0	0.00%	90	100%

**AGED, BLIND, DISABLED (ABD)
HEALTH CARE PLAN ENROLLMENT TYPE BY
BY MANAGED CARE PLAN
Region and MCP as a Percentage of Type
Effective Date: 2/1/2014**

MCP	Region	FFS To MCP		MCP To MCP		MCP To FFS	
Buckeye	Central/South East	16		3		1	
	North East	68		18		1	
	West	40		22		1	
	Total	124	11.62%	43	8.96%	3	14.29%
Caresource	Central/South East	152		60		5	
	North East	271		113		3	
	West	212		101		2	
	Total	635	59.51%	274	57.08%	10	47.62%
Molina	Central/South East	60		31		2	
	North East	9		7		1	
	West	49		25		1	
	Total	118	11.06%	63	13.13%	4	19.05%
Paramount	Central/South East	2		3		0	
	North East	9		1		0	
	West	54		30		2	
	Total	65	6.09%	34	7.08%	2	9.52%
United	Central/South East	38		20		1	
	North East	64		30		0	
	West	23		16		1	
	Total	125	11.72%	66	13.75%	2	9.52%
Total Mandatory		1067	100.00%	480	100.00%	21	100.00%

**AGED, BLIND, DISABLED (ABD)
HEALTH CARE PLAN ENROLLMENT TYPE
BY REGION**

Region and MCP as a Percentage of Type
Effective Date: 2/1/2014

Region	MCP	FFS To MCP		MCP To MCP		MCP To FFS	
Central/South East	Buckeye	16	5.97%	3	2.56%	1	11.11%
	Caresource	152	56.72%	60	51.28%	5	55.56%
	Molina	60	22.39%	31	26.50%	2	22.22%
	Paramount	2	0.75%	3	2.56%	0	0.00%
	United	38	14.18%	20	17.09%	1	11.11%
	Total	268	100.00%	117	100.00%	9	100.00%
North East	Buckeye	68	16.15%	18	10.65%	1	20.00%
	Caresource	271	64.37%	113	66.86%	3	60.00%
	Molina	9	2.14%	7	4.14%	1	20.00%
	Paramount	9	2.14%	1	0.59%	0	0.00%
	United	64	15.20%	30	17.75%	0	0.00%
	Total	421	100.00%	169	100.00%	5	100.00%
West	Buckeye	40	10.58%	22	11.34%	1	14.29%
	Caresource	212	56.08%	101	52.06%	2	28.57%
	Molina	49	12.96%	25	12.89%	1	14.29%
	Paramount	54	14.29%	30	15.46%	2	28.57%
	United	23	6.08%	16	8.25%	1	14.29%
	Total	378	100.00%	194	100.00%	7	100.00%
Total Mandatory		1067		480		21	

**AGED, BLIND, DISABLED (ABD)
ASSIGNMENT BY REGION**
Effective Date: 2/1/2014

Region	Voluntary MCP Enrollment	Assignments	Total For Region
Central/South East	385	564	949
North East	590	802	1392
West	572	689	1261
Total For All Regions	1547	2055	3602

AGED, BLIND, DISABLED (ABD)
VOLUNTARY ENROLLMENTS AND ASSIGNMENTS BY REGION BY MCP
 Effective Date: 2/1/2014

Region	MCP	FFS To MCP	MCP To MCP	Total Voluntary Enrollments	Assignments	Total	Percentage
Central/South East	Buckeye	16	3	19	100	119	12.54%
	Caresource	152	60	212	242	454	47.84%
	Molina	60	31	91	106	197	20.76%
	Paramount	2	3	5	52	57	6.01%
	United	38	20	58	64	122	12.86%
	Total	268	117	385	564	949	100.00%
North East	Buckeye	68	18	86	188	274	19.68%
	Caresource	271	113	384	171	555	39.87%
	Molina	9	7	16	213	229	16.45%
	Paramount	9	1	10	129	139	9.99%
	United	64	30	94	101	195	14.01%
	Total	421	169	590	802	1392	100.00%
West	Buckeye	40	22	62	129	191	15.15%
	Caresource	212	101	313	242	555	44.01%
	Molina	49	25	74	150	224	17.76%
	Paramount	54	30	84	90	174	13.80%
	United	23	16	39	78	117	9.28%
	Total	378	194	572	689	1261	100.00%
Total Mandatory		1067	480	1547	2055	3602	

COVERED FAMILY AND CHILDREN (CFC)
STATEWIDE HEALTH CARE PLAN ENROLLMENT BY METHOD BY TYPE
 Method as a Percentage of Type
 Effective Date: 2/1/2014

ENROLLMENT METHOD	ENROLLMENT TYPE							
	FFS TO MCP		MCP TO MCP		MCP TO FFS		TOTAL	
Call	7878	79.58%	2494	90.30%	12	100.00%	10384	81.93%
Call Campaign	36	0.36%	8	0.29%	0	0.00%	44	0.35%
Face-To-Face	1	0.01%	0	0.00%	0	0.00%	1	0.01%
Mail	3	0.03%	1	0.04%	0	0.00%	4	0.03%
Website	1982	20.02%	259	9.38%	0	0.00%	2241	17.68%
TOTAL	9900	100%	2762	100%	12	100%	12674	100%

COVERED FAMILY AND CHILDREN (CFC)
STATEWIDE HEALTH CARE PLAN ENROLLMENT BY METHOD BY TYPE
Type as a Percentage of Method
Effective Date: 2/1/2014

ENROLLMENT METHOD	ENROLLMENT TYPE							
	FFS TO MCP		MCP TO MCP		MCP TO FFS		TOTAL	
Call	7878	75.87%	2494	24.02%	12	0.12%	10384	100%
Call Campaign	36	81.82%	8	18.18%	0	0.00%	44	100%
Face-To-Face	1	100.00%	0	0.00%	0	0.00%	1	100%
Mail	3	75.00%	1	25.00%	0	0.00%	4	100%
Website	1982	88.44%	259	11.56%	0	0.00%	2241	100%

**COVERED FAMILY AND CHILDREN (CFC)
HEALTH CARE PLAN ENROLLMENT TYPE BY
BY MANAGED CARE PLAN**

Region and MCP as a Percentage of Type
Effective Date: 2/1/2014

MCP	Region	FFS To MCP		MCP To MCP		MCP To FFS	
Buckeye	Central/South East	106		8		0	
	North East	345		147		1	
	West	347		92		1	
	Total	798	8.06%	247	8.94%	2	5.88%
Caresource	Central/South East	1649		512		0	
	North East	1848		619		4	
	West	2306		640		10	
	Total	5803	58.62%	1771	64.12%	14	41.18%
Molina	Central/South East	832		176		2	
	North East	83		13		3	
	West	289		79		0	
	Total	1204	12.16%	268	9.70%	5	14.71%
Paramount	Central/South East	40		15		1	
	North East	54		31		0	
	West	599		188		8	
	Total	693	7.00%	234	8.47%	9	26.47%
United	Central/South East	608		94		3	
	North East	478		111		1	
	West	316		37		0	
	Total	1402	14.16%	242	8.76%	4	11.76%
Total Mandatory		9900	100.00%	2762	100.00%	34	100.00%

**COVERED FAMILY AND CHILDREN (CFC)
HEALTH CARE PLAN ENROLLMENT TYPE
BY REGION**

Region and MCP as a Percentage of Type
Effective Date: 2/1/2014

Region	MCP	FFS To MCP		MCP To MCP		MCP To FFS	
Central/South East	Buckeye	106	3.28%	8	0.99%	0	0.00%
	Caresource	1649	50.97%	512	63.60%	0	0.00%
	Molina	832	25.72%	176	21.86%	2	33.33%
	Paramount	40	1.24%	15	1.86%	1	16.67%
	United	608	18.79%	94	11.68%	3	50.00%
	Total	3235	100.00%	805	100.00%	6	100.00%
North East	Buckeye	345	12.29%	147	15.96%	1	11.11%
	Caresource	1848	65.81%	619	67.21%	4	44.44%
	Molina	83	2.96%	13	1.41%	3	33.33%
	Paramount	54	1.92%	31	3.37%	0	0.00%
	United	478	17.02%	111	12.05%	1	11.11%
	Total	2808	100.00%	921	100.00%	9	100.00%
West	Buckeye	347	9.00%	92	8.88%	1	5.26%
	Caresource	2306	59.79%	640	61.78%	10	52.63%
	Molina	289	7.49%	79	7.63%	0	0.00%
	Paramount	599	15.53%	188	18.15%	8	42.11%
	United	316	8.19%	37	3.57%	0	0.00%
	Total	3857	100.00%	1036	100.00%	19	100.00%
Total Mandatory		9900		2762		34	

**COVERED FAMILY AND CHILDREN (CFC)
ASSIGNMENT BY REGION**
Effective Date: 2/1/2014

Region	Voluntary MCP Enrollment	Assignments	Total For Region
Central/South East	4040	4083	8123
North East	3729	4418	8147
West	4893	4665	9558
Total For All Regions	12662	13166	25828

**COVERED FAMILY AND CHILDREN (CFC)
VOLUNTARY ENROLLMENTS AND ASSIGNMENTS BY REGION BY MCP**
Effective Date: 2/1/2014

Region	MCP	FFS To MCP	MCP To MCP	Total Voluntary Enrollments	Assignments	Total	Percentage
Central/South East	Buckeye	106	8	114	835	949	11.68%
	Caresource	1649	512	2161	1057	3218	39.62%
	Molina	832	176	1008	881	1889	23.25%
	Paramount	40	15	55	637	692	8.52%
	United	608	94	702	673	1375	16.93%
	Total	3235	805	4040	4083	8123	100.00%
North East	Buckeye	345	147	492	1061	1553	19.06%
	Caresource	1848	619	2467	561	3028	37.17%
	Molina	83	13	96	1061	1157	14.20%
	Paramount	54	31	85	906	991	12.16%
	United	478	111	589	829	1418	17.41%
	Total	2808	921	3729	4418	8147	100.00%
West	Buckeye	347	92	439	1047	1486	15.55%
	Caresource	2306	640	2946	1078	4024	42.10%
	Molina	289	79	368	986	1354	14.17%
	Paramount	599	188	787	839	1626	17.01%
	United	316	37	353	715	1068	11.17%
	Total	3857	1036	4893	4665	9558	100.00%
Total Mandatory		9900	2762	12662	13166	25828	