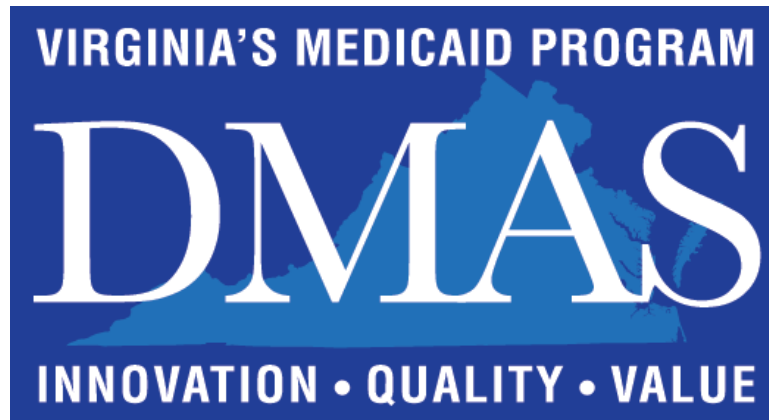


Monthly MCO Compliance Report

Medallion 4.0 May 2023 Deliverables



Health Care Services Division

June 21, 2023

Monthly MCO Compliance Report

Medallion 4.0 May 2023 Deliverables

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Compliance Points Overview

MCO	Prior Month Point Balance	Point(s) Incurred for Current Month*	Point(s) Expiring from April 2022	Final Point Balance*	Area of Violation: Finding or Concern
<u>Aetna</u>	4	0	1	3	FINDINGS NONE CONCERNS DATA SUBMISSION ERROR CMHRS SA
<u>Anthem</u>	6	0	1	5	FINDINGS NONE CONCERNS CMHRS SA
<u>Molina</u>	4	5	1	8	FINDINGS CALL CENTER STATS CONCERNS LATE SUBMISSIONS CMHRS SA
<u>Optima</u>	2	0	0	2	FINDINGS NONE CONCERNS DATA SUBMISSION ERROR PHARMACY PA
<u>United</u>	3	0	1	2	FINDINGS NONE CONCERNS DATA SUBMISSION ERROR
<u>VA Premier</u>	8	0	1	7	FINDINGS NONE CONCERNS PHARMACY PA CMHRS SA

**All listed point infractions are pending until the expiration of the 15-day comment period.*

Notes:

Findings – Area(s) of violation; point(s) issued.

Concerns – Area(s) of concern that could lead to potential findings; no points issued.

Expired Points – Compliance points expire 365 days after issuance. Thus, all points issued in April 2022 (Issue date: 5/15/2022) expire on 5/15/2023 and are subtracted from the final point balance.

Summary

The **Compliance Review Committee (CRC)** met on June 7, 2023, to review deliverables measuring performance for April 2023. The meeting's agenda covered all identified and referred issues of non-compliance, including late submissions, reporting errors, and failure to meet contract thresholds related to call center statistics and service authorizations.

The CRC consists of five managers and supervisors from the Health Care Services Division who vote on what, if any, compliance enforcement actions should be taken in response to identified compliance issues.

The CRC voted to issue twelve enforcement letters to the impacted Managed Care Organizations (MCOs), consisting of eleven Notices of Non-Compliance (NONC) and one Warning Letter with associated points.

Each MCO's compliance findings and concerns are further detailed below. Data related to the Health Care Services Division's compliance activities are also included. The Department communicated the findings of its review of April's compliance issues in letters and emails issued to the MCOs on June 12, 2023.

Aetna Better Health of Virginia

Findings:

- No findings (i.e., no compliance issues severe enough to necessitate the issuance of compliance points).

Concerns:

- **Data Submission Error:** The Department timely received the Providers Failing Accreditation/Credentialing & Terminations Quarterly Report deliverable from Aetna Better Health. Upon review, a DMAS subject matter expert discovered that Aetna failed to include seven (7) providers on the Q1 (January – March 2023 data) Providers Failing Accreditation/Credentialing & Terminations report.

The Compliance Team recommended that in response to the issue identified above, Aetna be issued a **Notice of Non-Compliance (NONC)**. The CRC agreed with the Compliance Team's recommendation and voted to issue a **Notice of Non-Compliance (NONC)**. (CES # 5475)

- **Contract Adherence:** Aetna Better Health failed to process all Community Mental Health Rehabilitation Services (CMHRS) Service Authorizations within the required timeframe. Per the April 2023 data, there was one (1) expedited service authorization request that did not require supplemental information and was not processed within 72 hours. Aetna's overall timeliness for processing CMHRS Service Authorization requests for the month of April was 99.91%.

The Compliance Team recommended that in response to the issue identified above, Aetna be issued a **Notice of Non-Compliance (NONC)**. The CRC agreed with the Compliance Team's recommendation and voted to issue a **Notice of Non-Compliance (NONC)**. (CES # 5477)

MIP/CAP Update:

- No updates

Request for Reconsideration:

- No requests for reconsideration

Expiring Points:

- **Case #4994:** April 2022 – Appeals and Grievances Issue. 1 point was removed from Aetna's total by closing CES # 4994

Financial Sanctions Update:

- No outstanding sanctions

Summary:

- For deliverables measuring performance for April 2023, Aetna showed a moderate level of compliance. Aetna timely submitted all 16 required monthly reporting deliverables. One contract deliverable included a reporting error and one failed to meet contract adherence requirements for the timely processing of CMHRS Service Authorizations (as addressed above in **CES # 5475 & 5477**). In summation, Aetna complied with most applicable regulatory and contractual requirements.

Anthem HealthKeepers Plus

Findings:

- No findings (i.e., no compliance issues severe enough to necessitate the issuance of compliance points).

Concerns:

- **Contract Adherence:** Anthem HealthKeepers Plus failed to process all Community Mental Health Rehabilitation Services (CMHRS) Service Authorizations within the required timeframe. Per the April 2023 data, there were two (2) standard service authorization requests that did not require supplemental information and were not processed within 14 days. Anthem's overall timeliness for processing CMHRS Service Authorization requests for the month of April was 99.76%.

The Compliance Team recommended that in response to the issue identified above, Anthem be issued a **Notice of Non-Compliance (NONC)**. The CRC agreed with the Compliance Team's recommendation and voted to issue a **Notice of Non-Compliance (NONC)**. (CES # 5478)

MIP/CAP Update:

- No updates

Request for Reconsideration:

- No requests for reconsideration

Expiring Points:

- **Case #4995:** April 2022 – Appeals and Grievances Issue. 1 point was removed from Anthem's total by closing **CES # 4995**.

Financial Sanctions Update:

- No outstanding sanctions

Summary:

- For deliverables measuring performance for April 2023, Anthem showed a moderate level of compliance. Anthem timely submitted all 16 required monthly reporting deliverables. One contract deliverable failed to meet contract adherence requirements for the timely processing of CMHRS Service Authorizations (as addressed above in **CES # 5478**). In summation, Anthem complied with most applicable regulatory and contractual requirements.

Molina Complete Care

Findings:

- **Call Center Statistics:** DMAS timely received the April 2023 MCO Member Call Center Statistics report from Molina Complete Care. Upon review, the Compliance Unit discovered Molina did not meet the required contract thresholds for call center statistics.

Section 7.15.C.b of the Medallion 4.0 contract requires that an MCO's member call abandonment rates shall be less than five percent (5%) for all incoming calls each month. Molina failed to answer at least 95% of incoming member calls as required by the Medallion 4.0 contract – answering only 94.13% of all incoming member calls in the month of April 2023.

The Compliance Team recommended that in response to the issue identified above, Molina be issued a **Warning Letter and five (5) compliance points** with no financial penalty, MIP, or CAP. The CRC agreed with the Compliance Team's recommendation and voted to issue a **Warning Letter and five (5) compliance points** with no financial penalty, MIP, or CAP in response to this issue. **(CES # 5476)**

Concerns:

- **Untimely Deliverable Submission:** Molina Complete Care failed to timely submit the quarterly Provider File - MCO Network by the due date of April 30, 2023. Molina submitted the missing report to the Department on May 3, 2023, following an email from the Compliance Unit.

The Compliance Team recommended that in response to the issue identified above, Molina be issued a **Notice of Non-Compliance (NONC)**. The CRC agreed with the Compliance Team's recommendation and voted to issue a **Notice of Non-Compliance (NONC)**. **(CES # 5473)**

- **Untimely Deliverable Submission:** Molina Complete Care failed to timely submit the quarterly Providers Failing Accreditation/Credentialing & Terminations by the due date of April 30, 2023. Molina submitted the missing report to the Department on May 4, 2023, following an email from the Compliance Unit.

The Compliance Team recommended that in response to the issue identified above, Molina be issued a **Notice of Non-Compliance (NONC)**. The CRC agreed with the Compliance Team's recommendation and voted to issue a **Notice of Non-Compliance (NONC)**. **(CES # 5474)**

- **Contract Adherence:** Molina Complete Care failed to process all Community Mental Health Rehabilitation Services (CMHRS) Service Authorizations within the required timeframe. Per the April 2023 data, there were two (2) standard service authorization requests that did not require supplemental information and were not processed within 14 days and one (1) expedited service authorization request that did not require supplemental information and was not processed within 72 hours. Molina’s overall timeliness for processing CMHRS Service Authorization requests for the month of April was 99.13%.

The Compliance Team recommended that in response to the issue identified above, Molina be issued a **Notice of Non-Compliance (NONC)**. The CRC agreed with the Compliance Team’s recommendation and voted to issue a **Notice of Non-Compliance (NONC)**. (CES # 5479)

MIP/CAP Update:

- No updates

Request for Reconsideration:

- Molina submitted a request for reconsideration regarding **CES #5476** on June 13, 2023. Molina requested that DMAS reconsider the assessment of a warning letter and 5 points because Molina had notified DMAS of the issues with their transportation vendor that led to an overall increase in call volume. After carefully reviewing the request, DMAS leadership upheld the initial enforcement action – as notifying DMAS of an issue that may potentially lead to non-compliance does not relieve an MCO of its obligations under the contract. Molina was notified of this decision on June 20, 2023.

Expiring Points:

- **Case #4996:** April 2022 – Appeals and Grievances Issue. 1 point was removed from Molina’s total by closing **CES # 4996**

Financial Sanctions Update:

- No outstanding sanctions

Summary:

- For deliverables measuring performance for April 2023, Molina showed a moderate level of compliance. Molina timely submitted all 16 required monthly reporting deliverables but failed to timely submit two quarterly deliverables (as addressed above in **CES # 5473 & 5474**). Molina also failed to meet contract adherence requirements for member call center statistics and the timely processing of CMHRS Service Authorization requests (as addressed above in **CES # 5476 & 5479**). In summation, Molina complied with most applicable regulatory and contractual requirements.

Optima Family Care

Findings:

- No findings (i.e., no compliance issues severe enough to necessitate the issuance of compliance points).

Concerns:

- **Data Submission Error:** The Department timely received the Providers Failing Accreditation/Credentialing & Terminations Quarterly Report deliverable from Optima Family Care. Upon review, a DMAS subject matter expert discovered that Optima failed to include four (4) providers on the Q1 (January – March 2023 data) Providers Failing Accreditation/Credentialing & Terminations report.

The Compliance Team recommended that in response to the issue identified above, Optima be issued a **Notice of Non-Compliance (NONC)**. The CRC agreed with the Compliance Team's recommendation and voted to issue a **Notice of Non-Compliance (NONC)**. (CES # 5454)

- **Contract Adherence:** Optima Family Care failed to timely process all Pharmacy Prior Authorization requests within the required timeframe. Per the April 2023 data, there was one (1) Pharmacy Prior Authorization request processed past 24 hours. The overall timeliness of Pharmacy Prior Authorizations processing was 99.97%.

Section 8.7.N of the Medallion 4.0 contract requires the MCOs to provide a response by telephone or other telecommunication within 24 hours of a service authorization request. If the Contractor denies a request for service authorization, the Contractor must issue a Notice of Action within twenty-four (24) hours of the denial to the prescriber and the member. Thus, Optima violated the terms of the Medallion 4.0 contract in the deliverable submission addressed above.

The Compliance Team recommended that in response to the issue identified above, Optima be issued a **Notice of Non-Compliance (NONC)**. The CRC agreed with the Compliance Team's recommendation and voted to issue a **Notice of Non-Compliance (NONC)**. (CES # 5494)

MIP/CAP Update:

- No updates

Request for Reconsideration:

- No requests for reconsideration

Expiring Points:

- No points

Financial Sanctions Update:

- No outstanding sanctions

Summary:

- For deliverables measuring performance for April 2023, Optima showed a moderate level of compliance. Optima timely submitted all 16 required monthly reporting deliverables. One contract deliverable included a data submission error and one deliverable failed to meet contract adherence requirements for the timely processing of Pharmacy Prior Authorizations (as addressed above in **CES # 5454 & 5494**). In summation, Optima complied with most applicable regulatory and contractual requirements.

UnitedHealthcare

Findings:

- No findings (i.e., no compliance issues severe enough to necessitate the issuance of compliance points).

Concerns:

- **Data Submission Error:** The Department timely received the Providers Failing Accreditation/Credentialing & Terminations Quarterly Report deliverable from UnitedHealthcare. Upon review, a DMAS subject matter expert discovered that UnitedHealthcare failed to include five (5) providers on the Q1 (January – March 2023 data) Providers Failing Accreditation /Credentialing & Terminations report.

The Compliance Team recommended that in response to the issue identified above, UnitedHealthcare be issued a **Notice of Non-Compliance (NONC)**. The CRC agreed with the Compliance Team’s recommendation and voted to issue a **Notice of Non-Compliance (NONC)**. (CES # 5453)

MIP/CAP Update:

- No updates

Request for Reconsideration:

- No requests for reconsideration

Expiring Points:

- **Case #4993:** April 2022 – Appeals and Grievances Issue. 1 point was removed from UnitedHealthcare’s total by closing **CES # 4993**

Financial Sanctions Update:

- No outstanding sanctions

Summary:

- For deliverables measuring performance for April 2023, UnitedHealthcare showed a moderate level of compliance. UnitedHealthcare timely submitted all 16 required monthly reporting deliverables. One contract deliverable contained a data submission error (as addressed above in **CES # 5453**). In summation, UnitedHealthcare complied with most applicable regulatory and contractual requirements.

Virginia Premier

Findings:

- No findings (i.e., no compliance issues severe enough to necessitate the issuance of compliance points).

Concerns:

- **Contract Adherence:** Virginia Premier failed to timely process all Pharmacy Prior Authorization requests within the required timeframe. Per the April 2023 data, there were six (6) Pharmacy Prior Authorization requests processed past 24 hours. The overall timeliness of Pharmacy Prior Authorizations processing was 99.85%.

Section 8.7.N of the Medallion 4.0 contract requires the MCOs to provide a response by telephone or other telecommunication within 24 hours of a service authorization request. If the Contractor denies a request for service authorization, the Contractor must issue a Notice of Action within twenty-four (24) hours of the denial to the prescriber and the member. Thus, Virginia Premier violated the terms of the Medallion 4.0 contract in the deliverable submission addressed above.

The Compliance Team recommended that in response to the issue identified above, Virginia Premier be issued a **Notice of Non-Compliance (NONC)**. The CRC agreed with the Compliance Team's recommendation and voted to issue a **Notice of Non-Compliance (NONC)**. (CES # 5495)

- **Contract Adherence:** Virginia Premier failed to process all Community Mental Health Rehabilitation Services (CMHRS) Service Authorizations within the required timeframe. Per the April 2023 data, there was one (1) expedited service authorization request that did not require supplemental information and was not processed within 72 hours. Virginia Premier's overall timeliness for processing CMHRS Service Authorization requests for the month of April was 99.91%.

The Compliance Team recommended that in response to the issue identified above, Virginia Premier be issued a **Notice of Non-Compliance (NONC)**. The CRC agreed with the Compliance Team's recommendation and voted to issue a **Notice of Non-Compliance (NONC)**. (CES # 5493)

MIP/CAP Update:

- No updates

Request for Reconsideration:

- No requests for reconsideration

Expiring Points:

- **Case #4953:** April 2022 – Provider Call Center Stats Issue. 1 point was removed from Virginia Premier’s total by closing **CES # 4953**

Financial Sanctions Update:

- No outstanding sanctions

Summary:

- For deliverables measuring performance for April 2023, Virginia Premier showed a moderate level of compliance. Virginia Premier timely submitted all 16 required monthly reporting deliverables. Two contract deliverables failed to meet contract adherence requirements for the timely processing of Pharmacy Prior Authorizations and CMHRS Service Authorizations (as addressed above in **CES # 5495 & 5493**). In summation, Virginia Premier complied with most applicable regulatory and contractual requirements.

Next Steps

The Health Care Services Compliance Unit will continue to host monthly Compliance Review Committee meetings, track and monitor compliance issues and points, and communicate with the MCOs regarding identified issues. The HCS Compliance Unit will also continue to collaborate with other DMAS units and divisions to investigate and resolve potential compliance issues.

The Compliance Unit will continue its enforcement efforts to ensure the timely processing of internal member appeals, service authorizations and claims. The Compliance Unit will also remain focused on overall compliance with Medallion 4.0 contractual requirements - especially those with an impact on members and providers.

Where appropriate, the HCS Compliance Unit will work closely with the Integrated Care Compliance Unit to align enforcement actions between the two contracts.