

Bayou Health – LHC Contract Amendment Attachment A-2

Exhibit/ Attachment	Document	Change From	Change To	Justification
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	11.10.5.8. Members who do not proactively choose a PCP will be auto-assigned to a PCP by the CCN.	11.10.5.9. <u>Members, for whom a CCN is the primary payor, who do not proactively choose a PCP will be auto-assigned to a PCP by the CCN. Members, for whom a CCN is a secondary payor, will not be assigned to a PCP by the CCN, unless the members request that the CCN do so.</u>	To limit auto-assignment of PCPs to enrollees for whom a Bayou Health Plan is the primary payor.
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	11.10.5.9. The CCN shall have written policies and procedures for handling the assignment of its members to a PCP. The CCN is responsible for linking all assigned CCN members to a PCP.	11.10.5.9. The CCN shall have written policies and procedures for handling the assignment of its members to a PCP. The CCN is responsible for linking <u>to a PCP all assigned CCN members for whom the CCN is the primary payor</u> to a PCP.	To limit auto-assignment of PCPs to enrollees for whom a Bayou Health Plan is the primary payor.
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	11.11.1. The CCN is responsible for developing a PCP automatic assignment methodology in collaboration with DHH to assign an enrollee to a PCP when the enrollee:	11.11.1. The CCN is responsible for developing a PCP automatic assignment methodology in collaboration with DHH to assign <u>to a PCP an enrollee for whom the CCN is the primary payor</u> to a PCP when the enrollee:	To limit auto-assignment of PCPs to enrollees for whom a Bayou Health Plan is the primary payor.

Bayou Health – LHC Contract Amendment Attachment A-2

Exhibit/ Attachment	Document	Change From	Change To	Justification																																												
Exhibit E, Attachment 3	RFP 305 PUR- DHHRFP- CCN-P- MVA	<p>(Table on Page 1)</p> <table border="1"> <thead> <tr> <th>Contract Year</th> <th>Anticipated Member Months</th> <th>Average PMPM</th> <th>Maximum Contract Amount</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>1,717,891</td> <td>\$172.04</td> <td>\$295,545,967</td> </tr> <tr> <td>2</td> <td>1,752,248</td> <td>\$174.10</td> <td>\$305,066,376</td> </tr> <tr> <td>3</td> <td>1,787,293</td> <td>\$181.94</td> <td>\$325,180,088</td> </tr> <tr> <td colspan="3" style="text-align: right;">Total</td> <td>\$925,792,432</td> </tr> </tbody> </table>	Contract Year	Anticipated Member Months	Average PMPM	Maximum Contract Amount	1	1,717,891	\$172.04	\$295,545,967	2	1,752,248	\$174.10	\$305,066,376	3	1,787,293	\$181.94	\$325,180,088	Total			\$925,792,432	<p>(Replace Table on Page 1)</p> <table border="1"> <thead> <tr> <th>Contract Year</th> <th>Anticipated Member Months</th> <th>Average PMPM</th> <th>Maximum Contract Amount</th> </tr> </thead> <tbody> <tr> <td>1 Jan-Jun</td> <td>651,248</td> <td>\$172.04</td> <td>\$112,040,706</td> </tr> <tr> <td>1 Jul-Dec</td> <td>1,041,552</td> <td>* \$165.67</td> <td>\$172,553,920</td> </tr> <tr> <td>2</td> <td>2,114,351</td> <td>** \$165.67</td> <td>\$350,284,457</td> </tr> <tr> <td>3</td> <td>2,146,066</td> <td>** \$165.67</td> <td>\$355,538,724</td> </tr> <tr> <td colspan="3" style="text-align: right;">Total</td> <td>\$990,417,807</td> </tr> </tbody> </table> <p>* Based on projected Bayou Health enrollment for this period of 910,000. Assumes enrollment increase for the entire period. ** Based on projected Bayou Health enrollment for this period 1.5% over previous period. Assumes enrollment increase for the entire period.</p>	Contract Year	Anticipated Member Months	Average PMPM	Maximum Contract Amount	1 Jan-Jun	651,248	\$172.04	\$112,040,706	1 Jul-Dec	1,041,552	* \$165.67	\$172,553,920	2	2,114,351	** \$165.67	\$350,284,457	3	2,146,066	** \$165.67	\$355,538,724	Total			\$990,417,807	Reduces PMPMs in accordance with FY 2013 budget.
Contract Year	Anticipated Member Months	Average PMPM	Maximum Contract Amount																																													
1	1,717,891	\$172.04	\$295,545,967																																													
2	1,752,248	\$174.10	\$305,066,376																																													
3	1,787,293	\$181.94	\$325,180,088																																													
Total			\$925,792,432																																													
Contract Year	Anticipated Member Months	Average PMPM	Maximum Contract Amount																																													
1 Jan-Jun	651,248	\$172.04	\$112,040,706																																													
1 Jul-Dec	1,041,552	* \$165.67	\$172,553,920																																													
2	2,114,351	** \$165.67	\$350,284,457																																													
3	2,146,066	** \$165.67	\$355,538,724																																													
Total			\$990,417,807																																													
Exhibit E, Appendix G	RFP 305 PUR- DHHRFP- CCN-P- MVA	(Letter from Mercer to Ruth Kennedy dated “January 25, 2012” and entitled “Addendum to Actuarial Certification of BAYOY HEALTH Capitation Rates for Periods Ending December 31, 2012.”)	(Letter from Mercer to Ruth Kennedy dated “July 11, 2012” and entitled “REVISED Louisiana BAYOU HEALTH Plans – Prepaid Program Rate Development and Actuarial Certification for the period July 1 through December 31, 2012.” See attached.)	To include new Mercer certification letter to lower PMPMs.																																												
Exhibit E, Appendix M	RFP 305 PUR- DHHRFP- CCN-P- MVA	(Appendix M is OMB Form No. 0937-0166.)	(Change Appendix M from OMB Form No. 0937-0166 to this text.) <u>Providers are to use the current version of OMB Form No. 0937-0166.</u>	To reference OMB Form No. 0937-0166.																																												

Bayou Health – LHC Contract Amendment Attachment A-2

Exhibit/ Attachment	Document	Change From	Change To	Justification
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	10.6.3.2. The CCN provider shall file all appeals for the denial, reduction or suspension of medically necessary services through the state fair hearing process. See §13 of the RFP for notice of grievance and state fair hearing procedures.	(Delete 10.6.3.2. entirely.) 10.6.3.2. The CCN provider shall file all appeals for the denial, reduction or suspension of medically necessary services through the state fair hearing process. See §13 of the RFP for notice of grievance and state fair hearing procedures.	This corrects the RFP. Bayou Health's contract is with the Health Plans and not with providers. Thus the RFP should not have indicated that providers can avail themselves of the state fair hearing process.
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	10.6.3.3. Within fifteen (15) business days of the mailing of the Notice of Adverse Action, the aggrieved provider may request an administrative hearing with the Division of Administrative Law (DAL) by filing a request for administrative hearing with the DAL. After a decision is rendered by the DAL, the aggrieved provider may seek judicial review of the DAL decision within thirty (30) days of the date the final decision is mailed to the parties, pursuant to La. R.S. 49:964. The judicial review petition shall be filed with the 19th Judicial District Court. The District Court's judgment may be appealed, by an aggrieved party within the appeal time delays set forth in the Louisiana Code of Civil Procedure.	(Delete 10.6.3.3. entirely.) 10.6.3.3. Within fifteen (15) business days of the mailing of the Notice of Adverse Action, the aggrieved provider may request an administrative hearing with the Division of Administrative Law (DAL) by filing a request for administrative hearing with the DAL. After a decision is rendered by the DAL, the aggrieved provider may seek judicial review of the DAL decision within thirty (30) days of the date the final decision is mailed to the parties, pursuant to La. R.S. 49:964. The judicial review petition shall be filed with the 19th Judicial District Court. The District Court's judgment may be appealed, by an aggrieved party within the appeal time delays set forth in the Louisiana Code of Civil Procedure.	This corrects the RFP. Bayou Health's contract is with the Health Plans and not with providers. Thus the RFP should not have indicated that providers can avail themselves of the state fair hearing process.

Bayou Health – LHC Contract Amendment Attachment A-2

Exhibit/ Attachment	Document	Change From	Change To	Justification
Exhibit E	RFP 305 PUR- DHHRFP- CCN-P- MVA	<p>8.5.1.6 Exceptions to Requirements (Last Bullet) The CCN may request to be notified by the provider, but shall not deny claims payment based solely on lack of notification, for the following:</p> <ul style="list-style-type: none"> o Inpatient emergency admissions within forty-eight (48) hours of admission; o Obstetrical care (at first visit); and o Obstetrical admissions exceeding forty-eight (48) hours after vaginal delivery and ninety-six (96) hours after caesarean section. 	<p>8.5.1.6 Exceptions to Requirements (Last Bullet) The CCN may request to be notified by the provider, but shall not deny claims payment based solely on lack of notification, for the following:</p> <ul style="list-style-type: none"> o Inpatient emergency admissions within forty-eight (48) hours <u>one (1) business day of admission (Failure of admission notification after one business day may result in claim denial)</u>; o Obstetrical care (at first visit); and o Obstetrical admissions exceeding forty-eight (48) hours after vaginal delivery and ninety-six (96) hours after caesarean section. 	To align with Medicaid Fee-for-Service. The intent is to allow the Health Plans to deny claims for the sole reason that the provider has failed to notify the plan within one business day.