

SFY 2011 New and Existing Member Incentive and Disincentive Totals

Health Plan Name	New Members		Existing Members		Total Incentives	Total Disincentives
	Incentive	Disincentive	Incentive	Disincentive		
STAR Program						
Aetna Better Health	\$-	\$185,180	\$-	\$197,670	\$-	\$382,850
AMERIGROUP	\$-	\$762,860	\$-	\$-	\$-	\$762,860
Community First Health Plans	\$-	\$37,460	\$-	\$-	\$-	\$37,460
Community Health Choice	\$-	\$-	\$-	\$-	\$-	\$-
Cook Children's Health Plan	\$-	\$171,360	\$-	\$470,820	\$-	\$642,180
Driscoll Health Plan	\$49,066	\$-	\$-	\$-	\$49,066	\$-
El Paso First Health Plans, Inc.	\$-	\$27,370	\$-	\$-	\$-	\$27,370
FirstCare	\$8,623	\$10,690	\$-	\$111,560	\$8,623	\$122,250
Molina Healthcare of Texas, Inc.	\$-	\$19,320	\$-	\$-	\$-	\$19,320
Parkland Community Health Plan	\$-	\$136,230	\$-	\$-	\$-	\$136,230
Superior HealthPlan	\$17,898	\$110,990	\$-	\$87,320	\$17,898	\$198,310
Texas Children's Health Plan	\$-	\$253,770	\$-	\$-	\$-	\$253,770
UnitedHealthcare Community Plan	\$-	\$117,150	\$-	\$-	\$-	\$117,150
STAR+PLUS Program						
AMERIGROUP	\$-	\$15,000	\$-	\$1,300	\$-	\$16,300
Cigna-HealthSpring	\$-	\$240	N/A	N/A	\$-	\$240
Molina Healthcare of Texas, Inc.	\$-	\$7,990	\$-	\$200	\$-	\$8,190
Superior HealthPlan	\$-	\$7,000	\$-	\$-	\$-	\$7,000
UnitedHealthcare Community Plan	\$-	\$3,380	\$-	\$6,370	\$-	\$9,750
STAR Health Program						
Superior HealthPlan Network	\$125,926	\$-	\$-	\$-	\$125,926	\$-

Note 1: The incentives and disincentives are based on each MCO's timely checkup participation rate percentages. The incentives and disincentives methodology is described in the Uniform Managed Care Manual, Chapter 12.18 Frew Incentives and Disincentives Methodology located at <http://www.hpsc.state.tx.us/medicaid/managed-care/umcm/Ch12/12-18.pdf>.

Note 2: UNICARE Health Plans of Texas, Inc. was not included in the incentive and disincentive calculations. Their contract ended prior to the submission deadline for the annual timely checkup reports used to calculate existing member checkup participation rates.

Note 3: Per the Primary Care Case Management contract, Texas Medicaid & Healthcare Partnership (TMHP) was paid as each report was submitted. For SFY 2011, the total incentive amount TMHP could earn was \$5 million. TMHP was required to meet the same thresholds as those established in SFY 2010. TMHP exceeded the incentive cap of \$5 million with the new member quarterly reports and, thus, was paid the maximum amount of \$5 million in incentives. The TMHP contract ended prior to the submission deadline for the annual timely checkup reports used to calculate existing member checkup participation rates.

Note 4: The STAR+PLUS MCOs, Amerigroup (Tarrant), Molina Healthcare of Texas, Inc. (Dallas), and Superior HealthPlan (Dallas), began operations in February 2011. Cigna-HealthSpring (Tarrant) began operations in May 2011. All members enrolled in these MCO service areas were new members in SFY 2011. An N/A is shown in the table for existing member incentives and disincentives for Cigna-HealthSpring. Any existing member incentives and disincentives shown for Amerigroup, Molina, or Superior represent their incentives and disincentives for the other service areas in which they operate in the STAR+PLUS program.

Note 5: Amerigroup STAR, Amerigroup STAR+PLUS, Cigna-HealthSpring, Molina Healthcare of Texas, Inc. STAR+PLUS, and UnitedHealthcare Community Plan STAR+PLUS did not pass either validation and/or reconciliation with their initial checkup report resubmissions and, thus, were determined not eligible to receive any potential incentives earned for SFY 2011. Of these MCOs, only Amerigroup STAR would have qualified to earn incentives at a total amount of \$653,811 with \$51,372 for new member incentives and \$602,439 for existing member incentives. The other MCOs did not meet the required checkup participation rates for incentives.

All of these MCOs validated and/or reconciled their reports through additional resubmissions with the exception of Cigna-HealthSpring. Due to Cigna-HealthSpring having only four months of reporting data (their operations began May 2011) as well as a low total number of members (less than 30 for the denominator), HHSC determined it was not realistic to expect Cigna-HealthSpring to meet the required 8% variance and accepted the report at a variance of 9.09%.

Note 6: In SFY 2011, UnitedHealthcare Community Plan (STAR+PLUS) was known as Evercare of Texas. This MCO is represented in the table under their current name.