







































**HEALTH PLAN OF SAN MATEO
ORGANIZATIONAL REPORT CARD
2009/2010**

Guiding Principle	Key Performance Indicator	Measure	2011 Target	Actual				Status of most recent Q	Trend	Comments
				Q3 10	Q4 10	Q1 11	Q2 11			
Access to Care										
	Market Share - CareAdvantage	Percent Market Share	60%	60%	60%	61%	59%			
	Market Share - Healthy Families	Percent Market Share	60%	58%	58%	58%	58%			
	Enrollment - Medi-Cal	Number of members in Medi-Cal	58,234	57,383	58,244	58,735	59,689			
	Enrollment - CareAdvantage	Number of members in CareAdvantage	8,138	7,955	8,006	8,087	8,172			
	Enrollment - Healthy Families	Number of members in Healthy Families	6,022	5,963	5,998	5,925	5,981			
	Enrollment - HealthWorx	Number of members in HealthWorx	1,043	1,019	1,037	1,036	1,029			
	Enrollment - Healthy Kids	Number of members in Healthy Kids	5,242	5,371	5,265	5,185	5,178			
	Enrollment - ACE	Number of members in ACE	24,122	23,365	24,164	25,151	26,867			
	Timeliness of Pharmacy Authorizations	Number of auths within timeframe / total number of auths	100%	99.0%	99.6%	99.2%	99.6%			
	Timeliness of Treatment Authorizations Approval - CareAdvantage	Average number of days for final approval decision on routine authorizations	14 days	4.68	6.37	6.35	7.3			
	Timeliness of Treatment Authorizations Approval - Medi-Cal and H-lines	Average number of days for final approval decision on prospective authorizations	5 business days	2.19	2.55	2.18	4.3			





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Quality Care										
	Timely recredentialing of Providers	Percent of Recredentialings conducted on time for the current quarter	100%	14%	5.6%	85.7%	100%			
	Admissions / 1000 - CareAdvantage	Admissions / 1000 - CareAdvantage Monthly Average	349	341.2	334.2	385	328			
	Bed days / 1000 Medi-Cal	Bed days / 1000 - Medi-Cal Monthly Average	490	486.6	459.6	440.6	415			
	LTC Medi-Cal Aid Code Changes	# of Medi-Cal members changed to LTC aid code (QTD)		77	62	38	51			
Personal Attention	Provider Call Answer Time	% of Calls Answered within 60 seconds	80%	97.4%	97.6%	97%	92.3%			
	Member Call Answer Time	% of Calls Answered within 60 seconds	80%	74.8%	78.8%	71%	56%			Performance fell below the threshold service level due to a staff vacancy, as well as an increase in call volume associated with the conversion to HEALTHsuite (from providers and pharmacies).
	CareAdvantage Member Call Answer Time	% of Calls Answered within 30 seconds	80%	98.2%	96.6%	97%	96.8%			

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ORGANIZATIONAL REPORT CARD
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Guiding Principle	Key Performance Indicator	Measure	2011 Target	Actual				Status of most recent Q	Trend	Comments
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	Claims Call Answer Time	% of Calls Answered within 60 seconds	80%	90.6%	88.4%	91%	68.6%		↓	Performance fell below the threshold service level due to an increase in call volume associated with the conversion to HEALTHsuite.
	Percent returned mail	# of pieces of returned mail / # pieces of mail sent out	5%	2.6%	4.2%	2%	2.5%		↔	
	Timely acknowledgment of Complaint Receipt	% of Members who receive notification of receipt of complaint within 5 business days of receipt	100%	96.0%	94.1%	96%	98%		↑	
	Timely Processing of Member Complaint	% of Members whose complaint was processed within 30 days of receipt	100%	99.0%	96.7%	97%	96%		↔	
	CareAdvantage Transportation On-Time Performance	Average Monthly On-Time Performance (arriving before the appt time and within 1 hr of a will-call return)	92%			94.7%	95.1%		↑	
	CareAdvantage Transportation Grievances	Average Monthly Grievances (Grievances per 100 rides)	<= 1%			0.10%	0.0%		↓	
Provider Support	Timeliness of Claim Payment	% of Claims Paid within 30 Days	95%			97.8%	92.0%			

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ORGANIZATIONAL REPORT CARD
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	Timeliness of processing Provider Dispute resolutions (PDRs)	Percent of PDRs whose process is completed within 45 calendar days of receipt	95%	42.0%	58.5%	70%	27%			The decrease in the timeliness of processing PDRs was due to the conversion to HEALTHsuite on April 1st. Staff has been dealing with numerous issues regarding converted claims which has impacted the resolution of PDRs.
Culture and Linguistic Diversity	Use of the telephone interpreter service to address linguistic diversity	Number of calls to Member Services and CareAdvantage using the telephone interpreter service / Number of Calls		1.8%	2.8%	3.2%	2.7%			
	Use of the telephone interpreter service to address linguistic diversity	Number of languages accessed by Member Services and CareAdvantage via the telephone interpreter service		24	22	23	21			
	HPSM bi-lingual proficient staff	# of HPSM Staff who are bi-lingual proficient		41	42	44	45			
	HPSM languages	# of languages HPSM staff are proficient in		5	5	5	5			

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ORGANIZATIONAL REPORT CARD
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Positive Work Atmosphere	Availability of Phone System	Number of Hours of Unplanned System Downtime - Phone	0	0	0	0	0		↔	
	Availability of E-Mail System	Number of Hours of Unplanned System Downtime - E-mail	0	0	8	0	0		↔	
	Availability of Web	Number of Hours of Unplanned System Downtime - Web Access	0	0	8	0	5		↑	A server's license was renewed promptly, but was not updated in a timely manner. Problem was addressed and resolved.
	Availability of Claims System	Number of Hours of Unplanned System Downtime - Claims system	0	1.5	0	3	9		↑	A recurring issue occurred regarding the server memory. Troubleshooting occurred with the vendor each time, but it took several instances before we were able to completely resolve.
	Prompt Response to MIS Trouble Ticket	Average Number of Hours between receipt of ticket and ticket closure	24	9.28	16.81	16.61	14.2		↓	
Effectiveness and Efficiency	Net Equity as a Percent of TNE	Percent at End of Quarter	250%	273.7%	345.9%	265%	279.6%		↑	
	Net Income Percentage	Surplus(Deficit)/ Total Revenue	3%	-0.4%	3.1%	-11.8%	-4.6%		↑	This deficit is due to reserving monies for the likely possibility of the State retroactively applying 2009 provider cuts.

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	Medical Loss Ratio - CareAdvantage	Total HealthCare Costs / Total Revenue - QTD	85%	87.2%	87.0%	94.8%	92.2%	●	↓	It is expected that our Medical Loss Ratio will be higher for 2011 as CMS lowered the benchmark premium thus reducing our capitation.
	Medical Loss Ratio - Medi-Cal	Total HealthCare Costs / Total Revenue - QTD	90%	96.7%	91.7%	160.5%	100.9%	●	↓	This deficit is due to reserving monies for the likely possibility of the State retroactively applying 2009 provider cuts.
	Medical Loss Ratio - Healthy Families	Total HealthCare Costs / Total Revenue - QTD	85%	91.6%	87.3%	92.1%	94.2%	●	↑	HF continues to experience some high cost med expenses. We have received an 8% rate increase effective 10/1/11.
	Medical Loss Ratio - Healthy Kids	Total HealthCare Costs / Total Revenue - QTD	85%	112.8%	122.0%	87.2%	86.2%		↓	
	Medical Loss Ratio - HealthWorx	Total HealthCare Costs / Total Revenue - QTD	85%	109.8%	103.1%	132.8%	107.3%	●	↓	There are several members with high medical costs. This greatly impacts the bottom line since this line of business has low membership.
	Administrative Expenses	Net Administrative Expense / Total Revenue	5.57%	5.4%	5.2%	6.0%	5.8%		↓	