

# AMERIHEALTH CARITAS

Louisiana Medicaid Managed Care Non-Compliance Actions

January 1, 2020 to December 31, 2022

Tracking Number	Failed Deliverable or Non-Compliance with Contract Requirements	Notice of Action	Deadline to Cure	Notice of Monetary Penalty	Monetary Penalty Amount	Dispute or Appeal	Responses or Related Correspondence	Closure Date
ACLA2-16	[Provider Network] Failure to validate provider directory data and maintain an accuracy rate of at least 75% or 50% with 2% improvement.			<a href="#">1/10/2020</a>	\$50,000		<a href="#">1/30/2020 (MCO Response)</a> <a href="#">3/11/2020 LDH Response</a>	
ACLA2-17	[Program Integrity] Failure to void encounters associated with fraud, waste, and abuse.	<a href="#">2/7/2020</a>						<a href="#">4/14/2020</a>
ACLA2-18	[Quality Management] Failure to demonstrate full compliance in an external quality review.	<a href="#">2/14/2020</a>						<a href="#">7/31/2020</a>
ACLA2-19	[Services and Benefits] Failure to provide non-emergency medical transportation to eligible enrollees.	<a href="#">2/24/2020</a>		<a href="#">9/4/2020</a> <a href="#">11/19/2021</a> <a href="#">3/16/2022</a> <a href="#">9/30/2022</a> <a href="#">11/1/2022</a> <a href="#">12/29/2022</a> <a href="#">2/8/2023</a> <a href="#">4/13/2023</a>	\$5,000 \$5,000 \$5,000 \$20,000 \$5,000 \$10,000 \$15,000 \$15,000			
ACLA2-20	[Program Integrity] Failure to meet the requirements of provider disclosure of Ownership Information	<a href="#">5/6/2020</a> <a href="#">6/16/2020</a>						
ACLA2-21	[Claims and Encounter Management] Fail to follow an LDH directive related to the implementation of pharmacy claim programming edits to address reducing member exposure to COVID-19.	<a href="#">8/10/2020</a>						

<b>ACLA2-22</b>	[Provider Network] Failure to validate provider directory data and maintain an accuracy rate of at least 75% or 50% with 2% improvement.			<a href="#">10/16/2020</a>	\$50,000			
<b>ACLA2-23</b>	[Provider Network] Failure to validate provider directory data and maintain an accuracy rate of at least 75% or 50% with 2% improvement.	<a href="#">2/4/2021</a>						
<b>ACLA2-24</b>	[Program Integrity] Failure to Timely Void Encounters - FWA	<a href="#">3/10/2021</a>						
<b>ACLA2-26</b>	[Provider Network] Failure to validate provider directory data and maintain an accuracy rate of at least 75% or 50% with 2% improvement.			<a href="#">4/27/2021</a>	\$50,000			
<b>ACLA2-27</b>	[Provider Network] Failure to validate provider directory data and maintain an accuracy rate of at least 75% or 50% with 2% improvement.	<a href="#">9/29/2021</a>						
<b>ACLA2-28</b>	[Provider Services] Failure to timely address provider complaints .	<a href="#">10/1/2021</a>						
<b>ACLA2-29</b>	[Provider Network] Failure to validate provider directory data and maintain an accuracy rate of at least 75% or 50% with 2% improvement.			<a href="#">10/6/2021</a>	\$50,000			
<b>ACLA2-30</b>	[Quality Management] Failure to demonstrate full compliance in an external quality review.	<a href="#">10/15/2021</a>						<a href="#">12/23/2021</a>

<b>ACLA2-31</b>	[Claims and Encounters] Failure to implement pharmacy diagnosis codes per LDH directives.	<a href="#">11/10/2021</a>						
<b>ACLA2-32</b>	[Claims and Encounters] Failure to meet prior authorization determination timelines.	<a href="#">11/18/2021</a>						
<b>ACLA2-33</b>	[Services and Benefits] Failure to adhere to directives associated with community case management implementation.			<a href="#">12/16/2021</a>	\$165,000 \$66,000	<a href="#">12/28/2021</a> <a href="#">4/13/2022</a>	<a href="#">3/3/2022</a> <a href="#">5/5/2022</a>	
<b>ACLA2-34</b>	[Provider Network] Failure to validate provider directory data and maintain an accuracy rate of at least 75% or 50% with 2% improvement.			<a href="#">12/22/2021</a> <a href="#">3/22/2022</a>	\$50,000 \$1,000			
<b>ACLA2-35</b>	[Claims and Encounter Management] Failure to program denials of 340B claims for Hepatitis C direct acting anti-viral agents.			<a href="#">12/28/2021</a>	\$25,000			
<b>ACLA2-37</b>	[Reporting] Failure to timely submit required reports.	<a href="#">12/29/2021</a>						
<b>ACLA2-38</b>	[Provider Network] Failure to validate provider directory data and maintain an accuracy rate of at least 75% or 50% with 2% improvement.	<a href="#">4/22/2022</a>						
<b>ACLA2-39</b>	[Services and Benefits] Failure to provide medically necessary NEMT timely.	<a href="#">5/23/2022</a>						
<b>ACLA2-40</b>	[Provider Network] Failure to validate provider directory data and maintain an accuracy rate of			<a href="#">6/15/2022</a>	\$50,000			

	at least 75% or 50% with 2% improvement.							
<b>ACLA2-41</b>	[Services and Benefits] Failure to provide MCO Member ID cards timely.			<a href="#">6/21/2022</a>	\$1,000			
<b>ACLA2-42</b>	[Services and Benefits] Failure to provide MCO Member ID cards timely.			<a href="#">7/22/2022</a>	\$1,000			
<b>ACLA2-43</b>	[Services and Benefits] Failure to provide MCO Member ID cards timely.			<a href="#">9/8/2022</a>	\$500			
<b>ACLA2-44</b>	[Provider Network] Failure to validate provider directory data and maintain an accuracy rate of at least 75% or 50% with 2% improvement.			<a href="#">10/18/2022</a>	\$50,000			
<b>ACLA2-45</b>	[Claims and Encounters] Failure to meet the brand-over-generic PDL compliance rate.	<a href="#">11/1/2022</a>						
<b>ACLA2-46</b>	[Provider Network] Failure to validate provider directory data and maintain an accuracy rate of at least 75% or 50% with 2% improvement.			<a href="#">2/2/2023</a>	\$50,000			
<b>ACLA2-47</b>	[Quality Management] Failure to demonstrate full compliance in an external quality review.	<a href="#">3/17/2023</a>						
<b>ACLA2-48</b>	[Enrollee Services] Failure to provide MCO Member ID cards timely.			<a href="#">4/19/2023</a>	\$2,500			

<b>ACLA2-49</b>	[Quality Management] Failure to Apply Claim System Edits	<a href="#">7/20/2023</a>	9/20/2023					<a href="#">10/18/2023</a>
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*Note: Blank cells represent fields that are not applicable as of publication.*

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