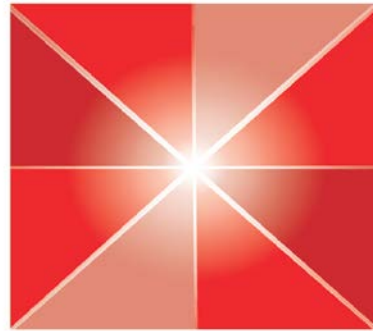


Office of Health Care Ombudsman and Bill of Rights (OHCOBR)
FY2015 Summary of Cases
October 1, 2014 through September 30, 2015

DISTRICT OF
COLUMBIA



HEALTH CARE
OMBUDSMAN

“The Knowledge to Guide You”

Office of Health Care Ombudsman and Bill of Rights (OHCOCR)

Highlights - FY2015 Contact Summary

- *In FY2015, the Office of Health Care Ombudsman and Bill of Rights opened a grand total of (8,438) Non-Commercial and Commercial cases - (See Pages 4-5);*
- *Of the (8,438) cases opened - (8,241) cases were Non-Commercial - (See Pages 4-5);*
- *Percentage of resolved/closed Non-Commercial cases was (97% or 7,953 resolved/closed cases) out of a total of (8,241) Non-Commercial cases opened) – (See Pages 6-7);*
- *In FY2015, the Average Number of Days for the Office of Health Care Ombudsman and Bill of Rights to resolve/close Non-Commercial cases was (1.4) days -(See Pages 49-50);*
- *Of the (8,241) Non-Commercial cases opened in FY2015, the Office of Health Care Ombudsman and Bill of Rights resolved/closed (7,350) cases on same day that cases were opened - (See Page 50);*

- *Of the grand total of (8,438) cases opened by the Office of Health Care Ombudsman and Bill of Rights – (197) cases were among the Commercial Health Plan Members – (See Pages 4-5);*
- *Percentage of resolved/closed Commercial-Appeals/Grievances cases was (75% or 148 resolved/closed cases) out of a total of (197) commercial-appeals/grievances cases opened - (See Pages 8-9);*
- *In FY2015, the Average Number of Days for the Office of Health Care Ombudsman and Bill of Rights to resolve/close Commercial-Appeals/Grievances cases was (81.3) days - (See Pages 51-52);*
- *Of the (197) Commercial-Appeals/Grievances cases opened in FY2015, the Office of Health Care Ombudsman and Bill of Rights resolved/closed (10) cases on same day that cases were opened - (See Page 52);*

- *On behalf of consumers, the Office of Health Care Ombudsman and Bill of Rights saved consumers a total dollar amount of (\$627,681.41). Of the total dollar amount saved, \$471,963.02 (75%) was from Commercial-Appeals/Grievances cases; \$8,995.70 (1%) was removed from beneficiaries' accounts for QMB (Co-Pays); \$8,413.90 (1%) was for reimbursements to beneficiaries due to non-payment of Medicare Part B Premiums; and \$138,308.79 (23%) was for Other-(Money saved or recouped for Fee-for-Service, MCO and Alliance beneficiaries - (See Pages 47-48);*

- *Of the (180) Administrative/Fair Hearing cases filed by the Office of Health Care Ombudsman and Bill of Rights (20% or 119 cases) were filed on behalf of EPD Waiver beneficiaries - (See Pages 18-19 and 43-44);*

- *Most consumers utilized the telephone to contact the Office of Health Care Ombudsman and Bill of Rights—(95% or 8,011 contacts) (See Pages 10-11);*

- *Most contacts made to the Office of Health Care Ombudsman and Bill of Rights' were by Medicare Part A; Part B; Part A/B or Part A/B (QMB) beneficiaries - (31% or 2,595 contacts) - (See Pages 12 -13);*

- *Consumers from all Wards and States located within and outside of the DC Metropolitan Area contacted the Office of Health Care Ombudsman and Bill of Rights-- (Ward (7) had the highest number of contacts (17% or 1,459 contacts, followed by Ward (5), and Ward (8) - (See Pages 14-15);*

- *Eligibility issues represented the largest category of issues encountered by all consumers – (41% or 3,492 issues) - (See Pages 18-19);*

- *Eligibility issues represented the largest category of issues encountered by MCOs and Alliance beneficiaries – (See Pages 31-32 and 33-34);*

- *Access/Coverage issues (to include denials of services) represented the largest category of issues encountered by Medicaid (Fee-for-Service) - (See Pages 27-28);*

- *Other issues represented the largest category of issues encountered by Medicare Part A; Part B; Part A/B or Part A/B (QMB) beneficiaries - (See Pages 29-30);*

- *In FY2015, the Office of Health Care Ombudsman and Bill of Rights opened a total of (122) Transportation Cases versus the (148) Transportation cases opened in FY2014 – (See Pages 39-40);*

- *The Office of Health Care Ombudsman and Bill of Rights opened a total of (595) EPD Waiver Cases in FY2015 versus the (678) EPD Waiver cases opened in FY2014 – (See Pages 41-42); and*

- *In FY 2015, the Office of Health Care Ombudsman and Bill of Rights opened a total of (376) DC Health Link cases versus the (252) DC Health Link cases opened in FY2014 - (See Pages 45-46).*

Office of Health Care Ombudsman and Bill of Rights (OHCOBR) FY2015

Summary of Activities

During Fiscal Year 2015, the OHCOBR has tracked all communications, or contacts received. The OHCOBR classified all contacts as “cases” which the OHCOBR investigated and strived to bring closure. The OHCOBR staff recorded all contacts in a specially designed database system – Ombudsman In-Take Data System (OIDS) that has specific categories for classifying different cases. These findings summarize data from the In-Take Tracking Log for the Fiscal Year 2015 (October 1, 2014 through September 30, 2015).

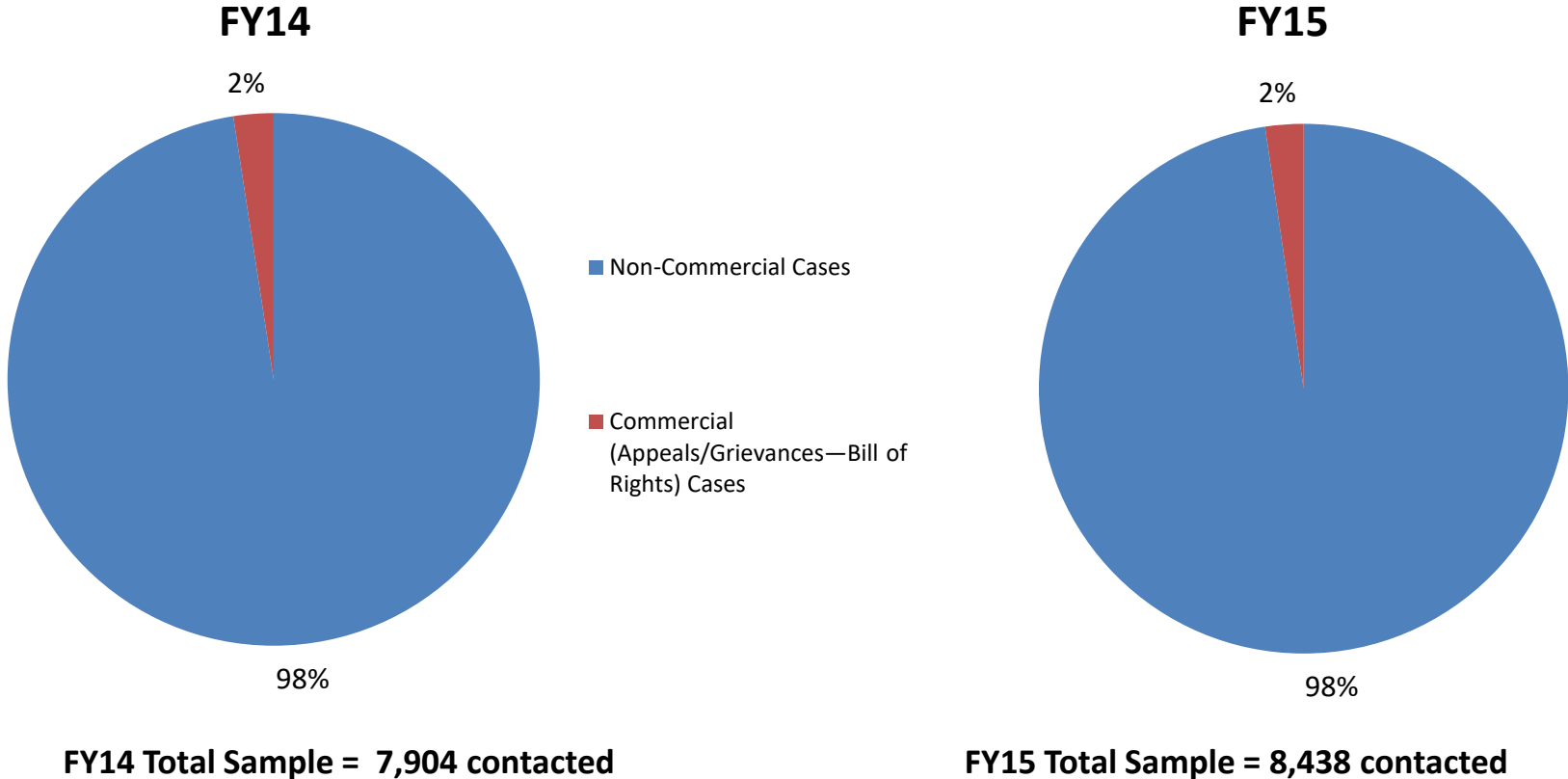
In summarizing the activities from the Ombudsman In-Take Data System (OIDS), the OHCOBR sought to answer the following key questions:

- *How do DC residents contact the Office of Health Ombudsman and Bill of Rights?*
- *Who contacts the Office of Health Care Ombudsman and Bill of Rights?*
- *What are the most common issues experienced by the community?*
- *During Fiscal Year 2015, the OHCOBR received a total of (454) contacts by individuals (consumers) who were repeat users versus (556) contacts in FY2014;*

The following sections present findings from the Health Care Ombudsman’s In-Take Tracking Log, specifically:

- *Number and Percentage of Opened Cases Among All Contacts—(Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights);*
- *Number and Percentage of Resolved/Closed Cases Among (Non-Commercial) Contacts;*
- *Number and Percentage of Resolved/Closed Cases Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts;*
- *Methods of Contacting OHCOBR;*
- *Categories of Contacts by Insurance Type;*
- *Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area;*
- *Breakdown of Types of Issues Encountered by All Contacts—(Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights);*
- *Breakdown of Types of Issues Encountered by (Non-Commercial) Contacts;*
- *Breakdown of Types of Issues Encountered by (Commercial-Appeals/Grievances-Bill of Rights) Contacts;*
- *Breakdown of Dispositions Among All (Commercial-Appeals/Grievances-Bill of Rights) Contacts;*
- *Breakdown of Types of Issues Encountered by Dual Eligible (Medicare and Medicaid) Contacts;*
- *Breakdown of Types of Issues Encountered by Medicaid (FFS) Contacts;*
- *Breakdown of Types of Issues Encountered by Medicare Part A; Part B; Part A/B; Part A/B (QMB) Contacts;*
- *Breakdown of Types of Issues Encountered by Medicaid Managed Care (MCO) Contacts;*
- *Breakdown of Types of Issues Encountered by Alliance Contacts;*
- *Breakdown of Types of Issues Encountered by Uninsured Contacts;*
- *Breakdown of Transportation Contacts by Insurance Type and Issues Encountered by Contacts;*
- *Breakdown of EPD Waiver Contacts by Insurance Type and Issues Encountered by EPD Waiver Contacts;*
- *Breakdown of Types of Issues Encountered by DC Health Link and Health Exchange Marketplace Contacts;*
- *Dollar Amount of Savings on Behalf of (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) Contacts;*
- *Average Number of Days to Resolve/Close (Non-Commercial) Cases;*
- *Average Number of Days to Resolve/Close (Commercial-Appeals/Grievances-Bill of Rights) Cases;*
- *Breakdown of Number and Percentage of How (Non-Commercial) Cases Were Resolved/Closed by the OHCOBR; and*
- *Breakdown of Number and Percentage of How (Commercial-Appeals/Grievances-Bill of Rights) Cases Were Resolved/Closed by the OHCOBR.*

Figure 1. Total Number and Percentage of Opened Cases Among All Contacts--(Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) Contacts FY14 and FY15



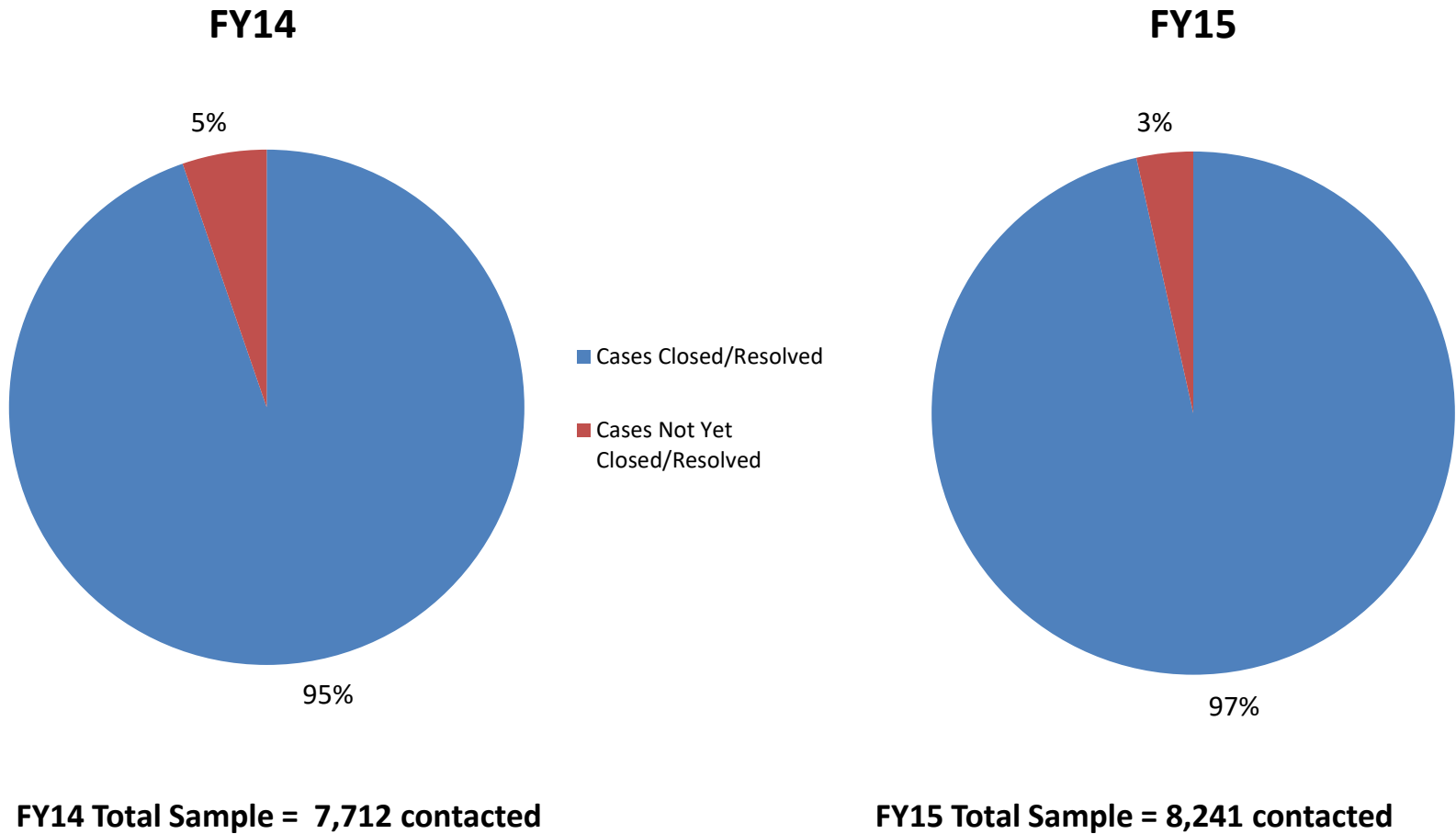
Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

**Table 1. Total Number and Percentage of Opened Cases Among All Contacts--(Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) Contacts
FY14 and FY15**

Opened Cases Among All Contacts	FY14 Totals	FY14 Percent (%)	FY15 Totals	FY15 Percent (%)
Non-Commercial Cases	7,712	98%	8,241	98%
Commercial (Appeals/Grievances—Bill of Rights) Cases	192	2%	197	2%
Total (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) Opened Cases	7,904	100%	8,438	100%

Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

Figure 2. Number and Percentage of Resolved/Closed Cases and Cases Not Resolved/Closed Among (Non-Commercial) Contacts FY14 and FY15



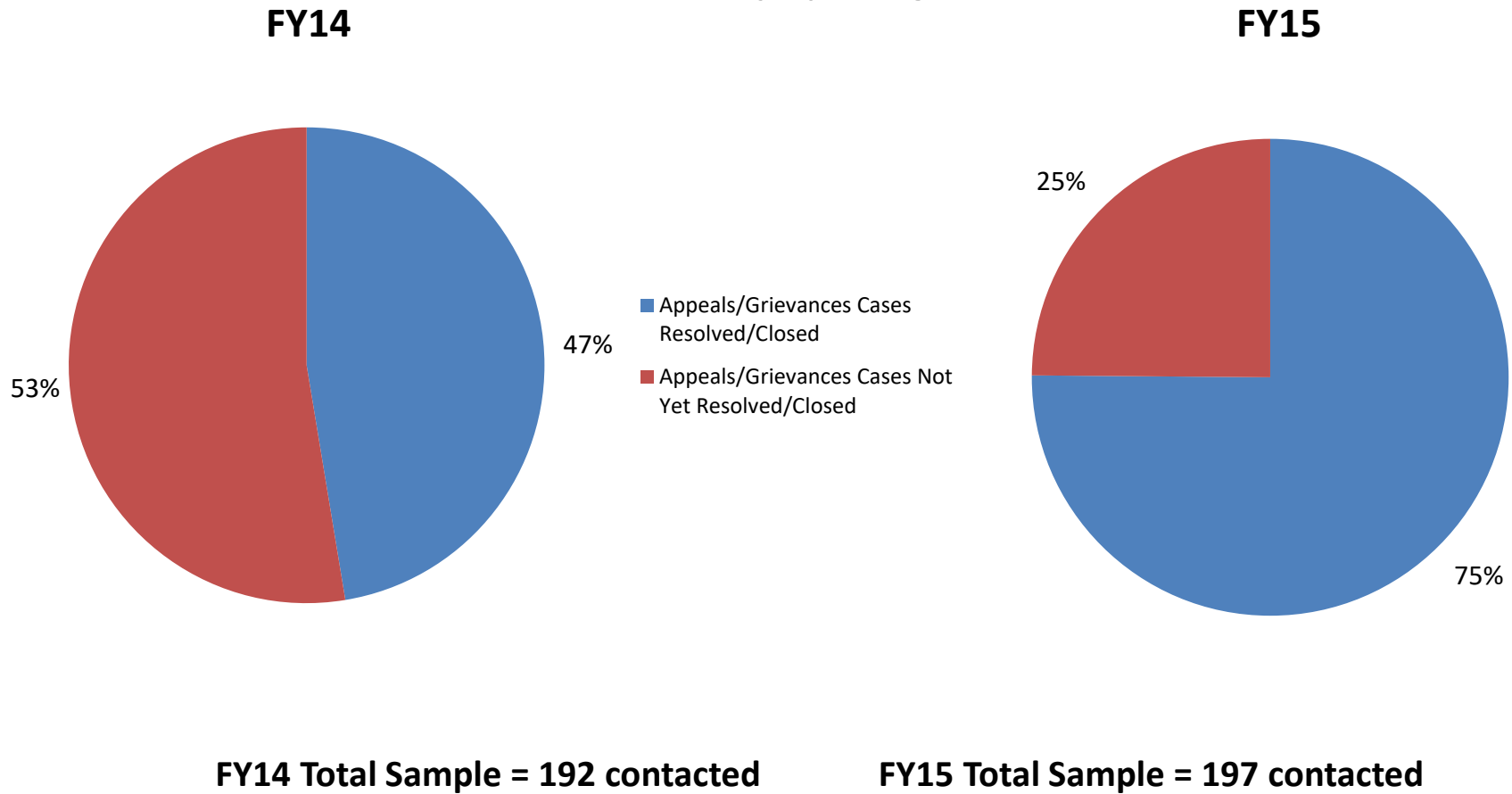
Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

**Table 2. Number and Percentage of Resolved/Closed Cases and
Cases Not Resolved/Closed
Among (Non-Commercial) Contacts
FY14 and FY15**

Resolved/Closed Cases (Non-Commercial)	FY14 Totals	FY14 Percent (%)	FY15 Totals	FY15 Percent (%)
Cases Resolved/Closed	7,304	95%	7,960	97%
Cases Not Yet Resolved/Closed	408	5%	281	3%
Total (Non-Commercial) Contacts/Cases	7,712	100%	8,241	100%

Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

Figure 3. Number and Percentage of Resolved/Closed Cases and Cases Not Resolved/Closed Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts FY14 and FY15



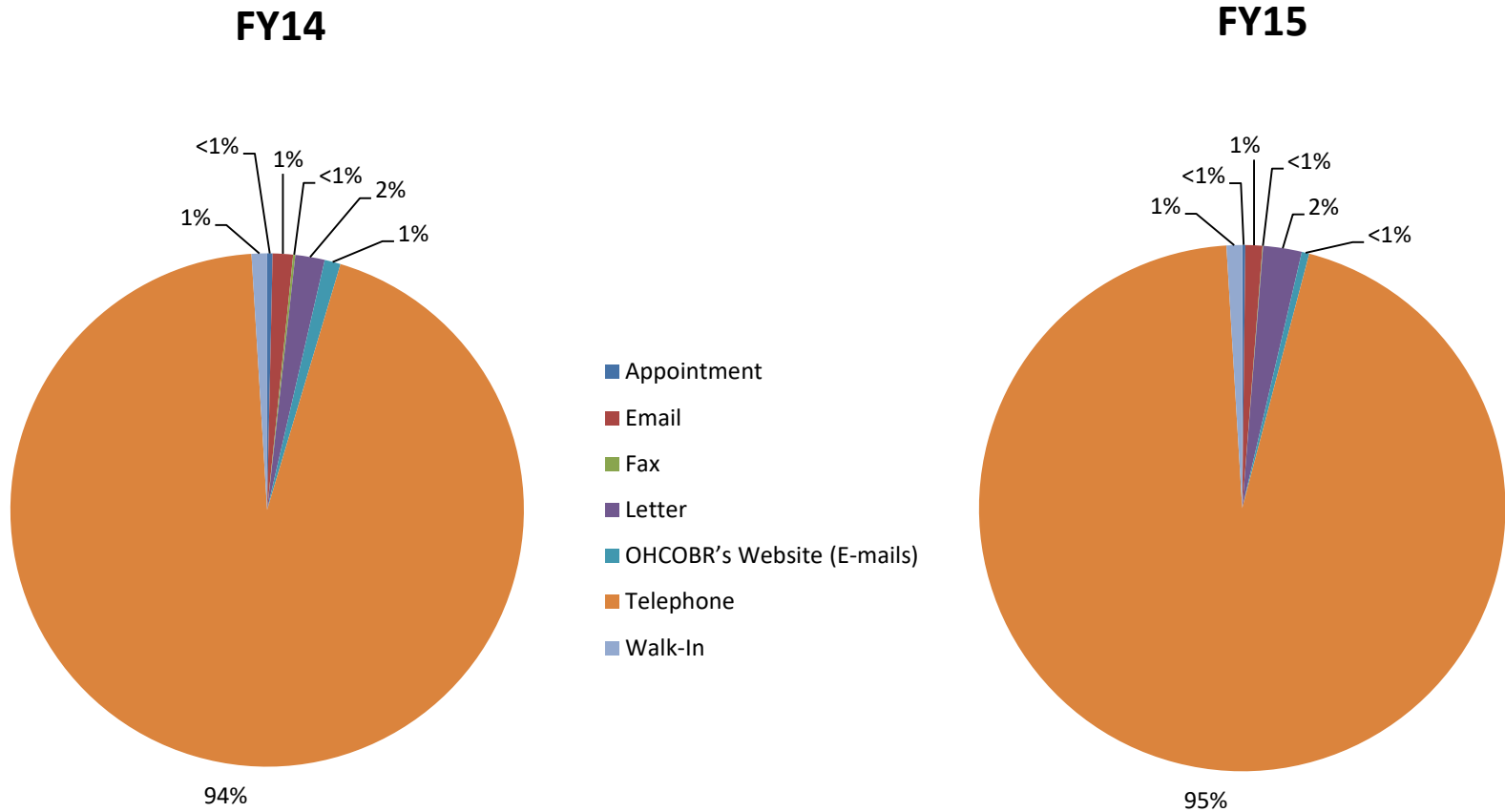
Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

Table 3. Number and Percentage of Resolved/Closed Cases and Cases Not Resolved/Closed Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts FY14 and FY15

Resolved/Closed Cases (Commercial-Appeals/Grievances-Bill of Rights)	FY14 Totals	FY14 Percent (%)	FY15 Totals	FY15 Percent (%)
Appeals/Grievances Cases Resolved/Closed	91	47%	148	75%
Appeals/Grievances Cases Not Yet Resolved/Closed	101	53%	49	25%
Total (Commercial-Appeals/Grievances-Bill of Rights) Contacts/Cases	192	100%	197	100%

Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

Figure 4. Methods of Contacting the Office of Health Care Ombudsman and Bill of Rights (OHCOBR) FY14 and FY15



FY14 Total Sample = 7,904 contacted

FY15 Total Sample = 8,438 contacted

Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

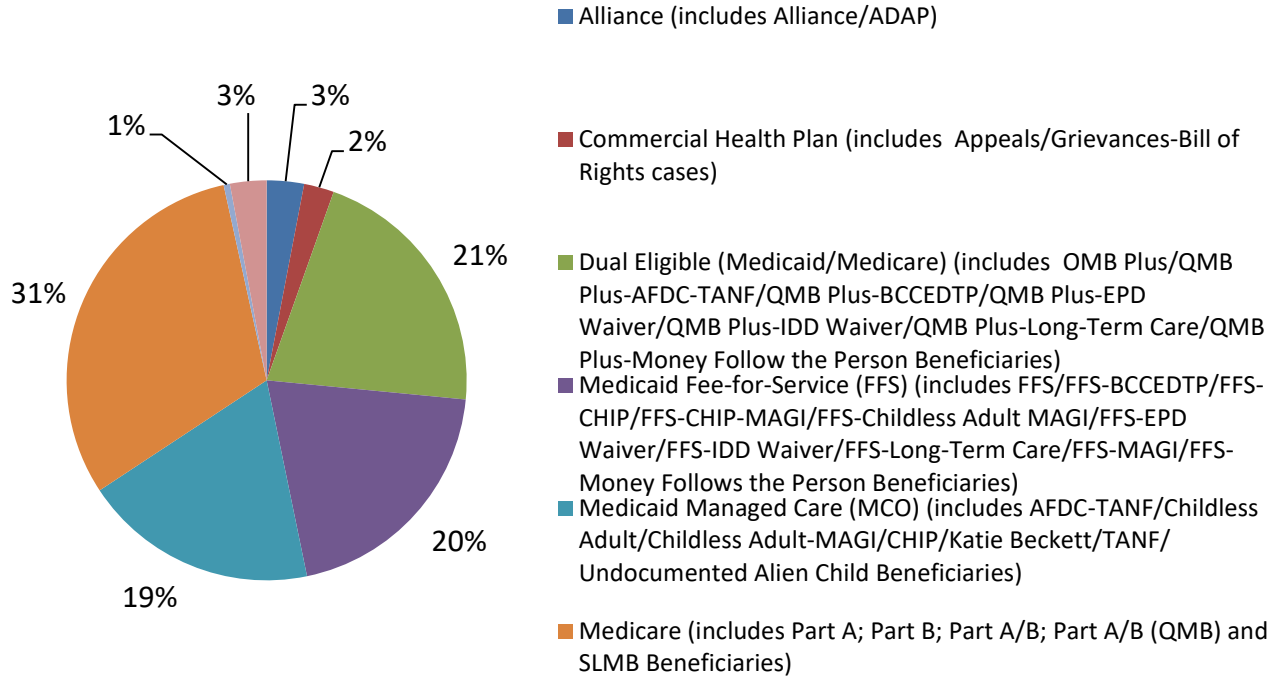
**Table 4. Methods of Contacting the Office of Health Care Ombudsman
and Bill of Rights (OHCOBR)
FY14 and FY15**

Methods of Contacting OHCOBR	FY14 Totals	FY14 Contacts (%)	FY15 Totals	FY15 Contacts (%)
Appointment	27	<1%	16	<1%
Email	101	1%	88	1%
Fax	11	<1%	3	<1%
Letter	146	2%	200	2%
OHCOBR's Website (E-mails)	80	1%	39	<1%
Telephone	7,462	94%	8,011	95%
Walk-In	77	1%	81	1%
Total Methods of Contacting OHCOBR	7,904	100%	8,438	100%

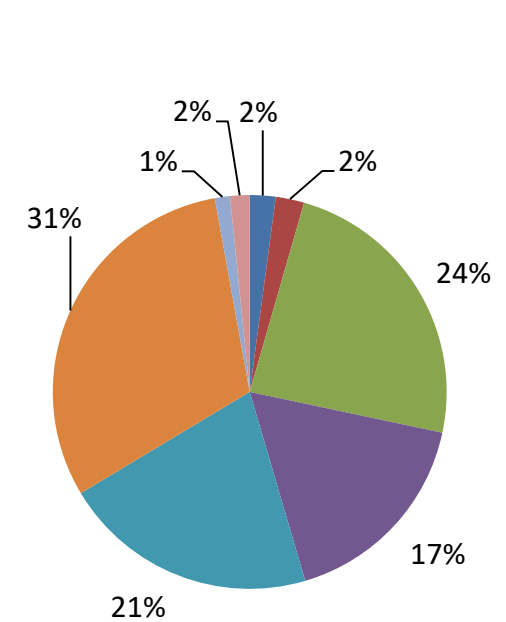
Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

Figure 5. Categories of Contacts by Insurance Type FY14 and FY15

FY14



FY15



FY14 Total Sample = 7,904 contacted

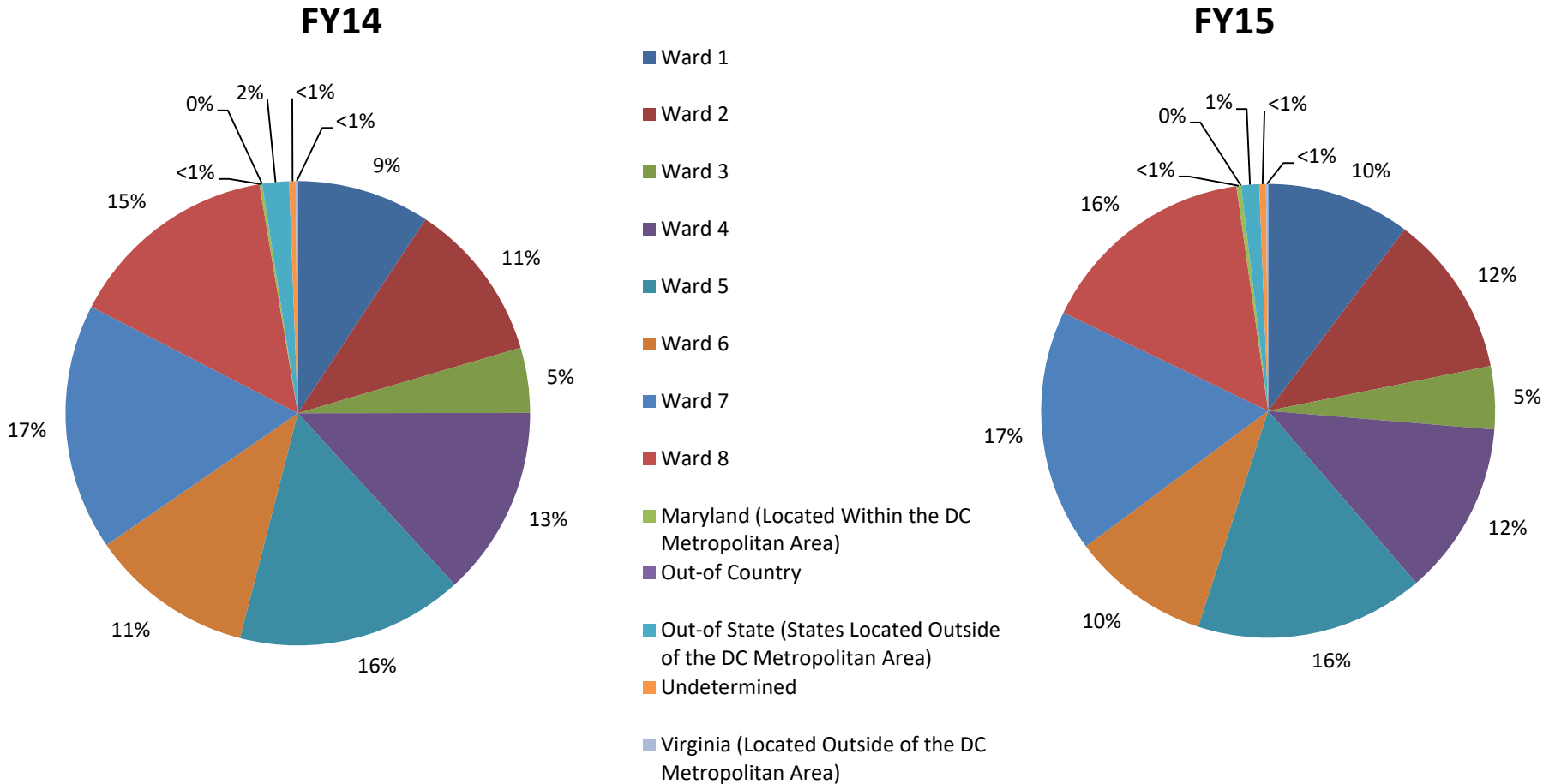
FY15 Total Sample = 8,438 contacted

Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

**Table 5. Categories of Contacts by Insurance Type
FY14 and FY15**

Categories of Insurance Type	FY14 Totals	FY14 Contacts (%)	FY15 Totals	FY15 Contacts (%)
Alliance (includes Alliance/ADAP)	238	3%	179	2%
Commercial Health Plan (includes Appeals/Grievances-Bill of Rights cases)	192	2%	197	2%
Dual Eligible (Medicaid/Medicare) (includes OMB Plus/QMB Plus-AFDC-TANF/QMB Plus-BCCEDTP/QMB Plus-EPD Waiver/QMB Plus-IDD Waiver/QMB Plus-Long-Term Care/QMB Plus-Money Follow the Person Beneficiaries)	1,667	21%	2,014	24%
Medicaid Fee-for-Service (FFS) (includes FFS/FFS-BCCEDTP/FFS-CHIP/FFS-CHIP-MAGI/FFS-Childless Adult MAGI/FFS-EPD Waiver/FFS-IDD Waiver/FFS-Long-Term Care/FFS-MAGI/FFS-Money Follows the Person Beneficiaries)	1,599	20%	1,445	17%
Medicaid Managed Care (MCO) (includes AFDC-TANF/Childless Adult/Childless Adult-MAGI/CHIP/Katie Beckett/TANF/ Undocumented Alien Child Beneficiaries)	1,499	19%	1,768	21%
Medicare (includes Part A; Part B; Part A/B; Part A/B (QMB) and SLMB Beneficiaries)	2,436	31%	2,595	31%
Other (includes ADAP/Deceased/Limited/Restricted Coverage/Limited/Restricted-Childless Adult-Incarcerated/Out-of-State Medicaid Coverage/Spend-Down/Undetermined)	40	1%	105	1%
Uninsured	233	3%	135	2%
Total Contacts by Insurance Type	7,904	100%	8,438	100%

Figure 6. Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area FY14 and FY15



FY14 Total Sample = 7,904 contacted

FY15 Total Sample = 8,438 contacted

**Table 6. Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area
FY14 and FY15**

Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area	FY14 Totals	FY14 Contacts (%)	FY15 Totals	FY15 Contacts (%)
Ward 1	733	9%	867	10%
Ward 2	883	11%	975	11%
Ward 3	358	5%	378	4%
Ward 4	1,046	13%	1,045	12%
Ward 5	1,249	16%	1,375	16%
Ward 6	900	11%	830	11%
Ward 7	1,358	17%	1,459	17%
Ward 8	1,168	15%	1,320	16%
Maryland (Located Within the DC Metropolitan Area)	15	<1%	28	<1%
Out-of Country	0	0%	0	0%
Out-of State (States Located Outside of the DC Metropolitan Area)	147	2%	108	1%
Undetermined	35	<1%	40	1%
Virginia (Located Outside of the DC Metropolitan Area)	12	<1%	13	<1%
Total Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area	7,904	100%	8,438	100%

Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

Types of Issues Encountered

The following issues were encountered by Consumers:

Access/Coverage (includes denials of services):

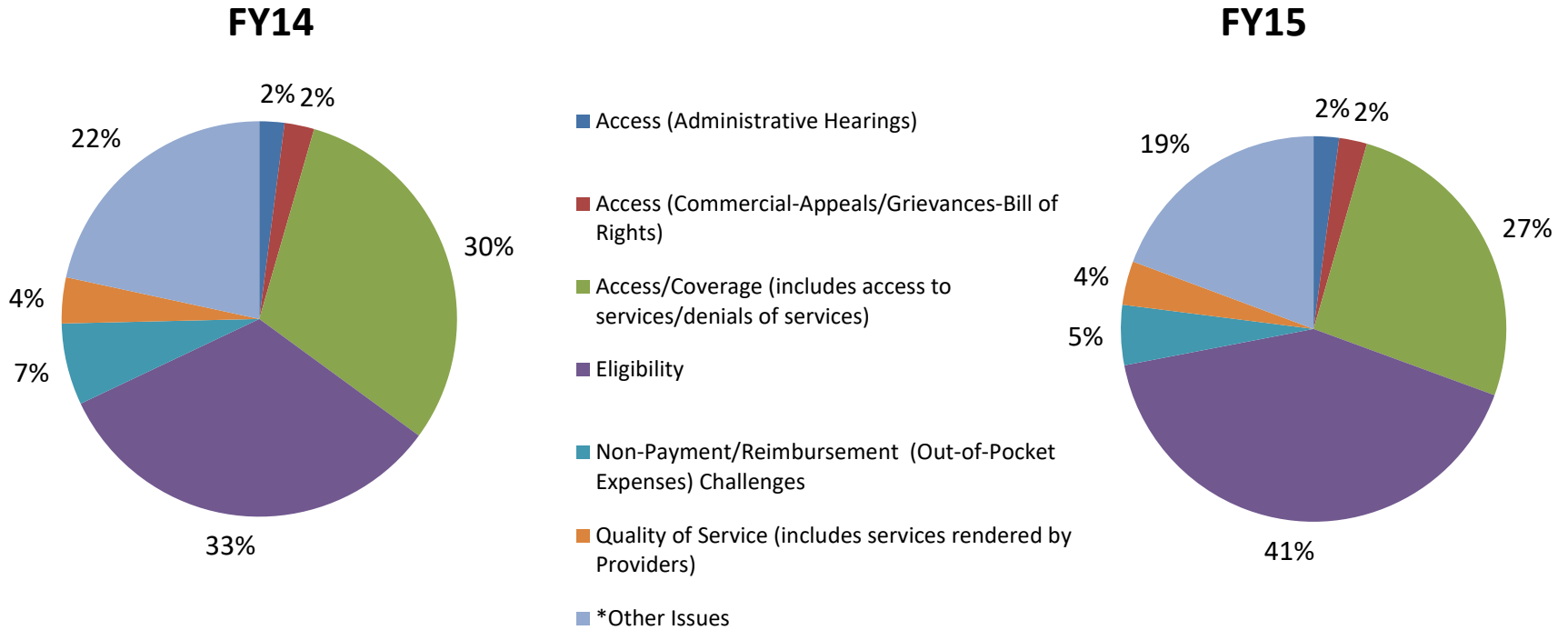
- ❖ **Access to Administrative Hearings:** to include denials of Breast Augmentation/Dental Services/, DME Services/ In-Patient Services (Hospital)/Medicaid Coverage/Medical Assistance/Food Stamps/Optical Services/Prescription Services/Increase in PCA Hours (EPD Waiver)/Home Health Services (EPD Waiver & State Plan)/Health Services/Non-Payment of Medical Bills/Spend-Down Program.
- ❖ **Access:** Appeals/Grievances (Bill of Rights).
- ❖ **Access to health care benefits/coverage:** to include Applications for Insurance Coverage via DC Health Link, Health Exchange Market and/or ESA or Broker (Alliance/Commercial Insurance/Buy-In (Part A and/or Part B)/Disability/Food Stamps/Disability/Home Health Agency Services (EPD and State Waiver Plan)/MCO Enrollment/Medicaid/Qualified Medicare Beneficiary Program (QMB)/Part D Prescription Plan/Retroactive Medicaid Coverage.
- ❖ **Access to Services:** to include Assisted Living Services/ Beneficiary PCP Assignment/ Case Management Services/ Cheaper Health Care Coverage/Cheaper Prescription Plan/ Chemotherapy/ Chiropractor Services/ Claim Form/ Complaint Form/ Continuation of PCA Services/Dental Appointment/ Dental Services/ Dentists/ Dialysis Services/ Disability Form/ DME (Seating/Mobility) Services/ DME Services/ EPD Waiver Program/EPD Waiver Program (Waiting List)/Endodontist Services/ Enrollment (Plan Selection)/ Fertility Treatment/ Food Stamps Recertification Date/Food Stamps Services/ Free Mobile Telephone/ Group Home/ Hearings Aid Services/ Home Health Services (Face-to-Face Assessment)/ Hospice Services/HSCSN Services/IDA Form/ In-Patient Services (Hospital)/Increase in PCA Hours/Increase in Speech Therapy Hours/ Legal Services/ Level of Care Form/Linet Program/Link to Life/Long-Term Care (Nursing Home)/ Lung Transplant Services/MCO Providers/MCO Services/Meals for Homebound/Meals on Wheels/Medicaid Continuation Form/Medicaid Physicians/Medical Appointment/Medical Examination Report/Medical Marijuana/Medical Review Form/Medical Services/Medicare Part A & B Services/Mental Health Services (Behavioral Health)/Optical Appointment/Optical Services/Part D Prescription Plan/Pharmacy Services/Physical Therapy Services/Prescription Services/Transportation Services (Non-Emergency).
- ❖ **Access to Prior Authorizations:** to include Chemotherapy Treatment-Out-Patient (Clinic)/CT/PET Scan-Out-Patient (Clinic)/Dental Services/ Hip Replacement Surgery/Home Health Services-EPD Waiver/Home Health Services-State Plan/Hospital Transfer/Increase in PCA Hours/Infusion Service-Out-Patient (Clinic)/Injections/In-Patient Services (Hospital)/Long-Term Care (Nursing Home)/ Medical Services/Optical Services/Out-Patient Services (Clinic)/Pain Management Services/ PET Scan/Physical Therapy Services/Prescription Services/Rehabilitation Facility/Sleep Study Test/Surgery-In-Patient (Hospital)/Transgender Surgery-In-Patient (Hospital)/**DME Services to include** Artificial Eye Cleaned, Baseline Machine, Blood Pressure Monitor/Compression Machine/Diabetic Test Strips/Eyeglasses/Hospital Bed/Knee Brace/Manual and Power Wheelchairs/Portable Oxygen/Seating Clinic Appointment/ Prosthetic Eyeball/Stair Lift/Air Pressure Mattress/Repair of Manual and Power Wheelchairs.

Types of Issues Encountered (continued)

The following issues were encountered by Consumers (continued):

- ❖ **Access to Lists of Providers:** to include Dentists/Dermatologists/DME Billing Providers/Ear, Nose & Throat Physicians/GYN/OB Physicians/Hematologists/Home Health Agencies-EPD Waiver and State Plan/Lung Surgeon/Medicaid Primary Care Physicians/Medicaid Specialists/ Medicare Physicians/Medicare Primary Care Physicians/Medicare Providers/Mental Health Services (Behavioral Health)/Nursing Homes/Oncologists/Opticians/Orthodontists/Orthopedic Physicians/Pain Management/Podiatrist/Psychologists.
- ❖ **Coverage (Denials of Health related services):** to include Acute Care Rehab Services/Cancer Treatment Services/Dental Services/DME Services/Egg Harvesting/Emergency Room Services/Experimental Procedure/Home Health Services-Assessment (Face-to-Face)-EPD Waiver Program/Home Health Services-EPD Waiver Program/Increase in PCA Hours-EPD Waiver and State Plan/In-Patient Services (Hospital)/Medicaid Coverage/Medical Services/Medical Tests/Medicare Services/MRI Services/Optical Services/Out-Patient Services (Clinic)/PET Scan/Physician Services/Prescription Services/Transportation Services (Non-Emergency).
- ❖ **Eligibility-(Alliance, Buy-In (Part A/B), EDP Waiver Program, Medicaid, Medicaid MCO, Qualified Medicare Beneficiary (QMB) -** Determining eligibility in health care programs such as status of eligibility/status of recertification/verification of eligibility/verification of coverage/termination of coverage/enrollment into Medicaid (MCO)/ Alliance/status of recertification; status of applications submitted to DC Health and/or Economic Security Administration (ESA). Explanation of Alliance/Buy-In (Part A/B)/EDP Waiver Program/Fee-For-Service/Dual Eligible/Medicaid MCO/Qualified Medicare Beneficiary (QMB/Prescription Plan (Part D).
- ❖ **Quality of Service Rendered by Providers:** DME/Dental/In-Patient (Hospital)/Out-Patient (Clinic)/Home Health Agencies/ PCAs/Long-Term Care (Nursing Homes)/Medicaid (MCO)/Pharmacy, Primary Care Physician/Transportation (Non-Emergency)/ DC Health Link/Economic Security Administration (ESA) services, etc.
- ❖ **Non-Payment/Reimbursement Issues:** to include Non-payment of bills (medical, dental, hospital, emergency room bills, and co-pays, QMB co-pays, and Part B premiums, etc.); reimbursement of out-of-pocket expenses (medical, hospital, dental bills, co-pays, QMB co-pays, Part B premiums, etc.)
- ❖ **Other Issues:** Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicaid MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance, incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicaid MCO/QMB/ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicaid MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance and Rights of Home Health Agencies.

Figure 7. Breakdown of Types of Issues Encountered by All Contacts – (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) FY14 and FY15



FY14 Total Sample = 7,904 contacted

FY15 Total Sample = 8,438 contacted

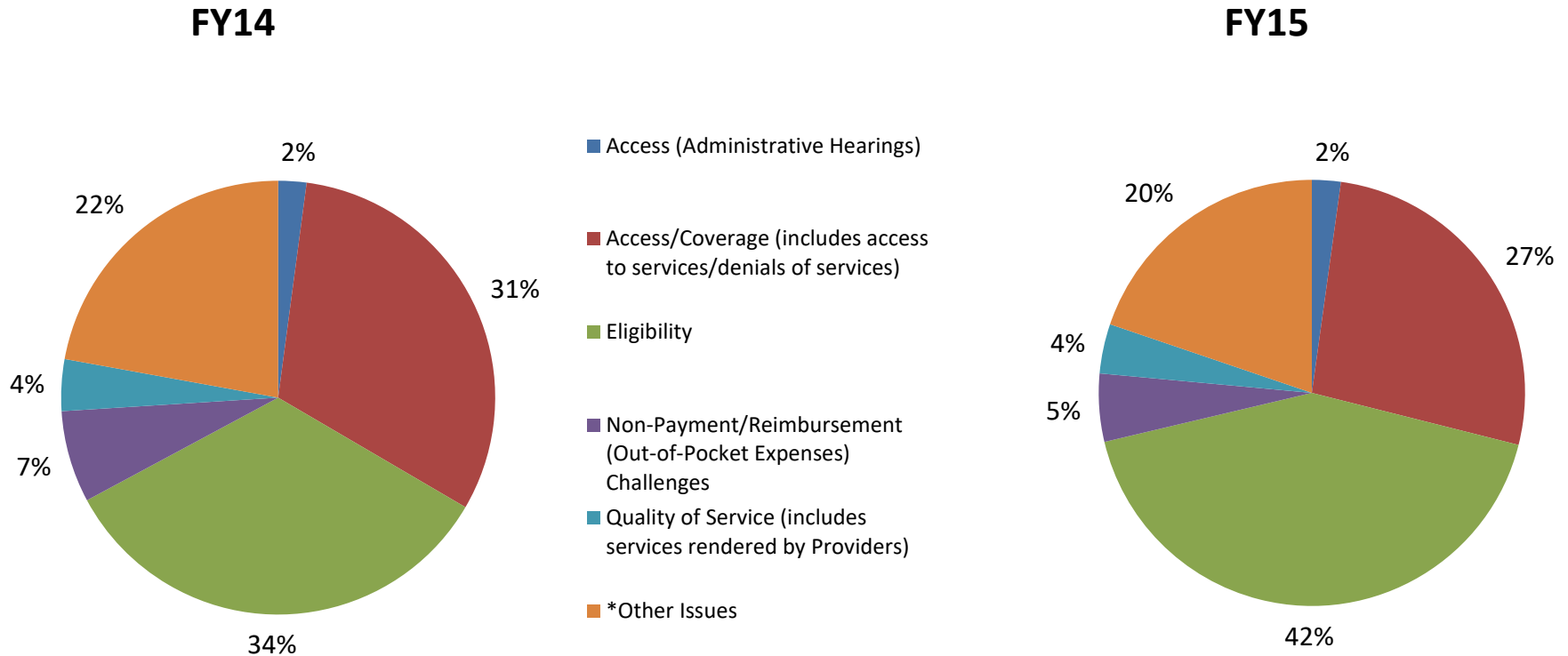
**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance for completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicaid MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance, incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicaid MCO/QMB/ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicaid MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.*

Table 7. Breakdown of Types of Issues Encountered by All Contacts – (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) FY14 and FY15

Types of Issues Encountered by All Contacts (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights)	FY14 Totals	FY14 Contacts (%)	FY15 Totals	FY15 Contacts (%)
Access (Administrative Hearings)	162	2%	180	2%
Access (Commercial-Appeals/Grievances-Bill of Rights)	192	3%	197	2%
Access/Coverage (includes Access to services and Coverage includes denials of services)	2,416	30%	2,204	27%
Eligibility/Recertication (status of eligibility/verification of coverage)	2,601	33%	3,492	41%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	528	7%	425	5%
*Other Issues	1,708	21%	1,630	19%
Quality of Service (includes services rendered by Providers)	297	4%	310	4%
Total Types of Issues (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) Contacts	7,904	100%	8,438	100%

**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicare MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance, incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicare MCO/QMB/ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicare MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.*

Figure 8. Breakdown of Types of Issues Encountered by (Non-Commercial) Contacts FY14 and FY15



FY14 Total Sample = 7,712 contacted

FY15 Total Sample = 8,241 contacted

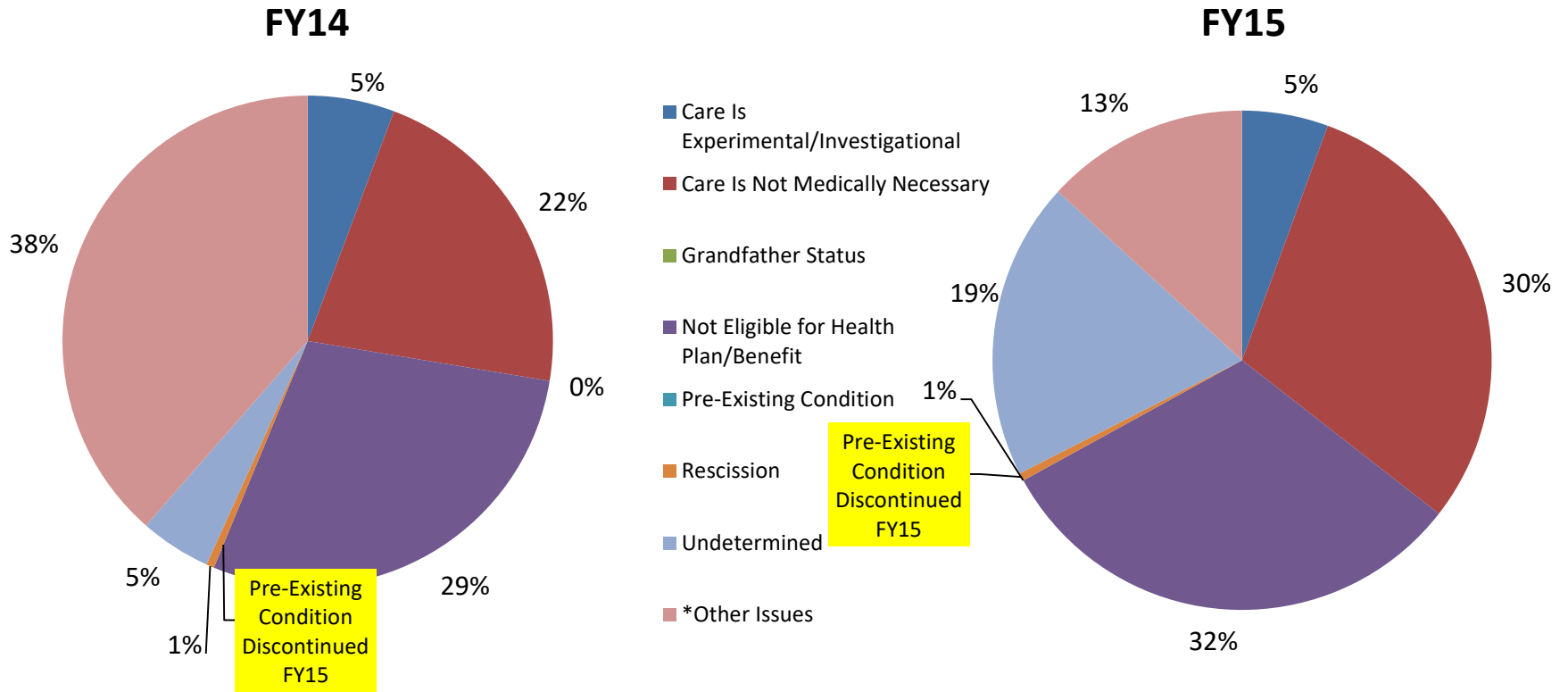
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**Table 8. Breakdown of Types of Issues Encountered by
(Non-Commercial) Contacts
FY14 and FY15**

Types of Issues (Non-Commercial) Contacts	FY14 Totals	FY14 Contacts (%)	FY15 Totals	FY15 Contacts (%)
Access (Administrative Hearings)	162	2%	180	2%
Access/Coverage (includes Access to services and Coverage includes denials of services)	2,416	31%	2,204	27%
Eligibility/Recertification (status of eligibility/verification of coverage)	2,601	34%	3,492	42%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	528	7%	425	5%
*Other Issues	1,708	22%	1,630	20%
Quality of Service (includes services rendered by Providers)	297	4%	310	4%
Total Types of Issues-(Non-Commercial) Contacts	7,712	100%	8,241	100%

**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicaid MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance, incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicaid MCO/QMB/ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicaid MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.*

Figure 9. Breakdown of Types of Issues Encountered by (Commercial-Appeals/Grievances-Bill of Rights) Contacts FY14 and FY15



FY14 Total Sample = 192 contacted

FY15 Total Sample = 197 contacted

***Other Issues:** Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicaid MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance; incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicaid MCO/QMB/ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicaid MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.

Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

**Table 9. Breakdown of Types of Issues Encountered by
(Commercial-Appeals/Grievances Bill of Rights) Contacts
FY14 and FY15**

Types of Issues (Commercial-Appeals/Grievances-Bill of Rights)	FY14 Totals	FY14 Contacts (%)	FY15 Totals	FY15 Contact (%)
Care Is Experimental/Investigational	11	5%	11	5%
Care Is Not Medically Necessary	42	22%	59	30%
Grandfather Status	0	0%	0	0%
Not Eligible for Health Plan/Benefit	55	29%	62	32%
*Other Issues	74	38%	26	13%
Pre-Existing Condition	Discontinued	Discontinued	Discontinued	Discontinued
Rescission	1	1%	1	1%
Undetermined	9	5%	38	19%
Total Types of Issues-(Commercial-Appeals/Grievances-Bill of Rights) Contacts	192	100%	197	100%

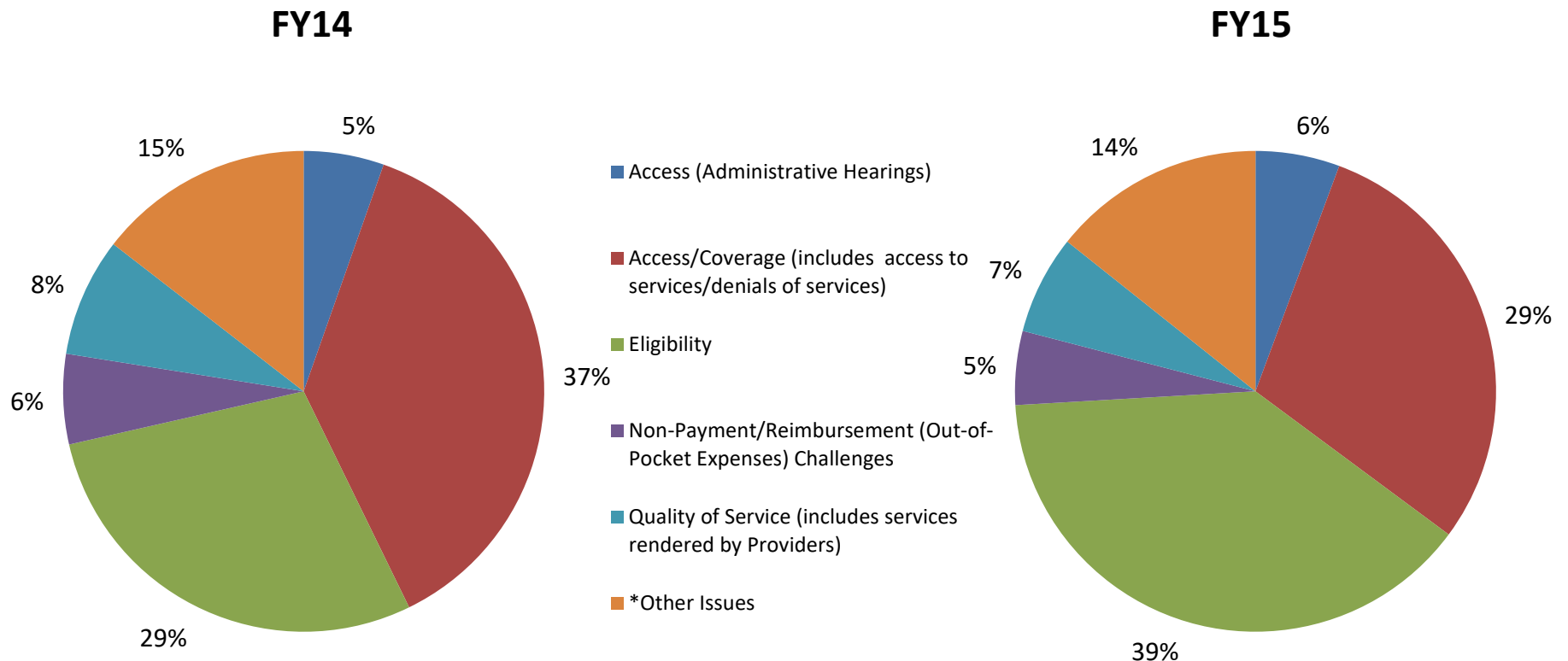
Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

**Table 9(a). Breakdown of Dispositions of All Cases Among
(Commercial-Appeals/Grievances-Bill of Rights) Contacts
FY14 and FY15**

Dispositions of All Cases Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts	FY14 Totals	FY14 Percent (%)	FY15 Totals	FY15 Percent (%)
Adjusted (case closed)	Not Tracked	Not Tracked	4	2%
Administratively Closed (case closed-due to no action)	3	2%	1	<1%
Consumer Unresponsive (case closed)	Not Tracked	Not Tracked	2	1%
On-Hold in Abeyance (case closed)	Not Tracked	Not Tracked	0	0%
Overtured (case closed-insurance company changed the denial)	20	10%	33	16%
Partial Payment (case closed-insurance company paid a portion of claim)	Not Tracked	Not Tracked	2	1%
Partially Overtured (case closed-insurance company changed a portion of the denial)	3	2%	3	2%
Pending (case is still opened)	60	31%	49	25%
Referred to DISB (case closed-referred to DISB for policy interpretation or benefit issues)	2	1%	5	3%
Referred to DOL (case closed-referred to DOL-self-funded insurance plans)	0	0%	3	2%
Referred to OPM (case closed-referred to OPM-federal employee plans)	0	0%	4	2%
Referred-Out-of-State (case closed-lack of jurisdiction)	0	0%	2	1%
Referred-Other Issues (case closed-issues not listed)	Not Tracked	Not Tracked	0	0%
Rejected (case closed-lack of evidence)	4	2%	1	<1%
Resolved (case closed-resolved without use of full process)	59	31%	67	34%
Reversed (case closed-IRO changed the insurance company's denial)	10	5%	5	3%
Upheld (case closed-IRO agreed with the insurance company's denial)	7	3%	12	6%
Upheld (case closed-insurer upheld denial)	Not Tracked	Not Tracked	0	0%
Untimely Filing (case closed-member filed appeal after the filing date)	Not Tracked	Not Tracked	2	1%
Withdrawn (case closed-member decided not to proceed with appeal)	23	12%	1	<1%
Write-Off (case closed-provider agreed to write-off balance due)	1	1%	1	<1%
Total Dispositions of All Cases Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts	192	100%	197	100%

Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

Figure 10. Breakdown of Types of Issues Encountered by Dual Eligible (Medicare and Medicaid) Contacts FY14 and FY15



FY14 Total Sample = 1,667 contacted

FY15 Total Sample = 2,014 contacted

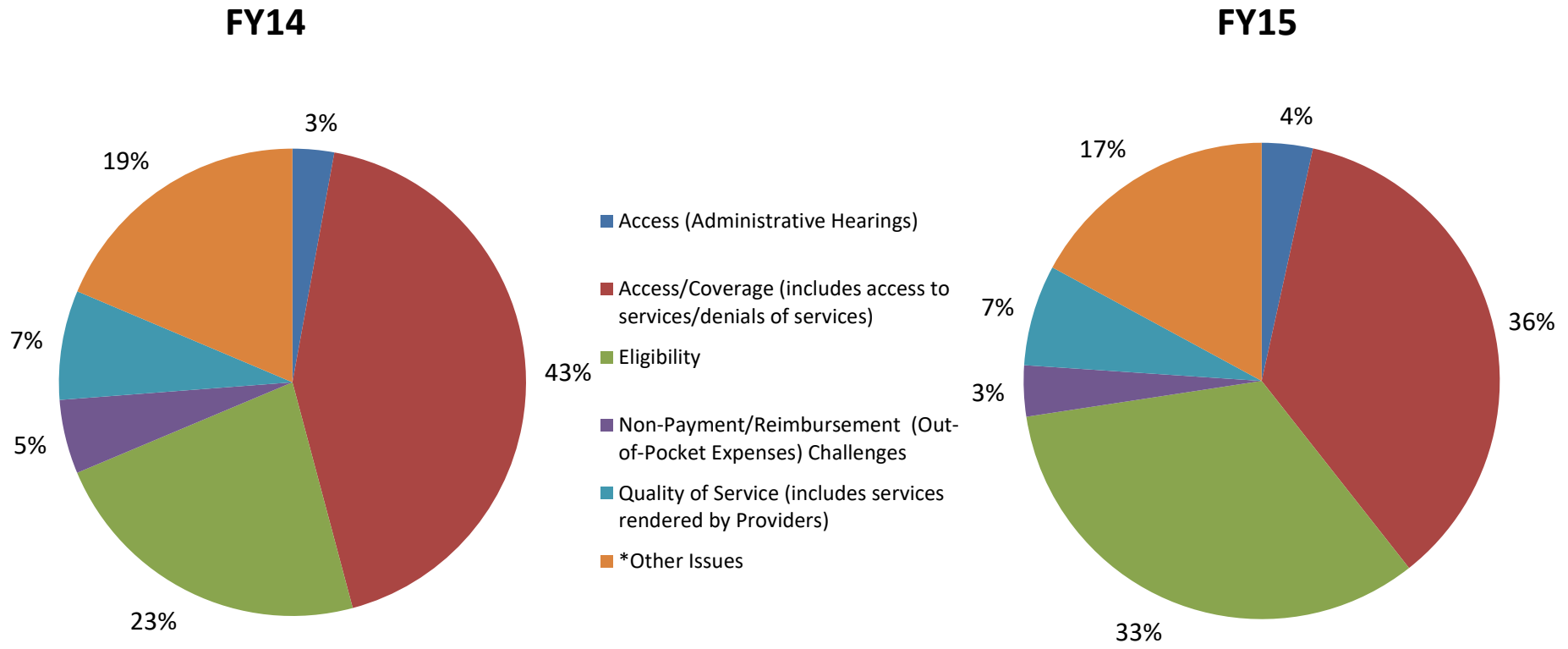
***Other Issues:** Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicare MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance, incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicare MCO/QMB/ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicare MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.

Table 10. Breakdown of Types Issues Encountered by Dual Eligible (Medicare and Medicaid) Contacts FY14 and FY15

Types of Issues Encountered by Dual Eligible (Medicare and Medicaid) Contacts	FY14 Totals	FY14 Contacts (%)	FY15 Totals	FY15 Contacts (%)
Access (Administrative Hearings)	90	5%	114	6%
Access/Coverage (includes Access to services and Coverage includes denials of services)	623	37%	594	29%
Eligibility/Recertication (status of eligibility/verification of coverage)	478	29%	784	39%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	101	6%	100	5%
*Other Issues	242	15%	288	14%
Quality of Service (includes services rendered by Providers)	133	8%	134	7%
Total Types of Issues-Dual Eligible (Medicare and Medicaid) Contacts	1,667	100%	2,014	100%

**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicaid MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance; incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicaid MCO/QMB ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicaid MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.*

Figure 11. Breakdown of Types of Issues Encountered by Medicaid Fee-for-Service (FFS) Contacts FY14 and FY15



FY14 Total Sample = 1,599 contacted

FY15 Total Sample = 1,445 contacted

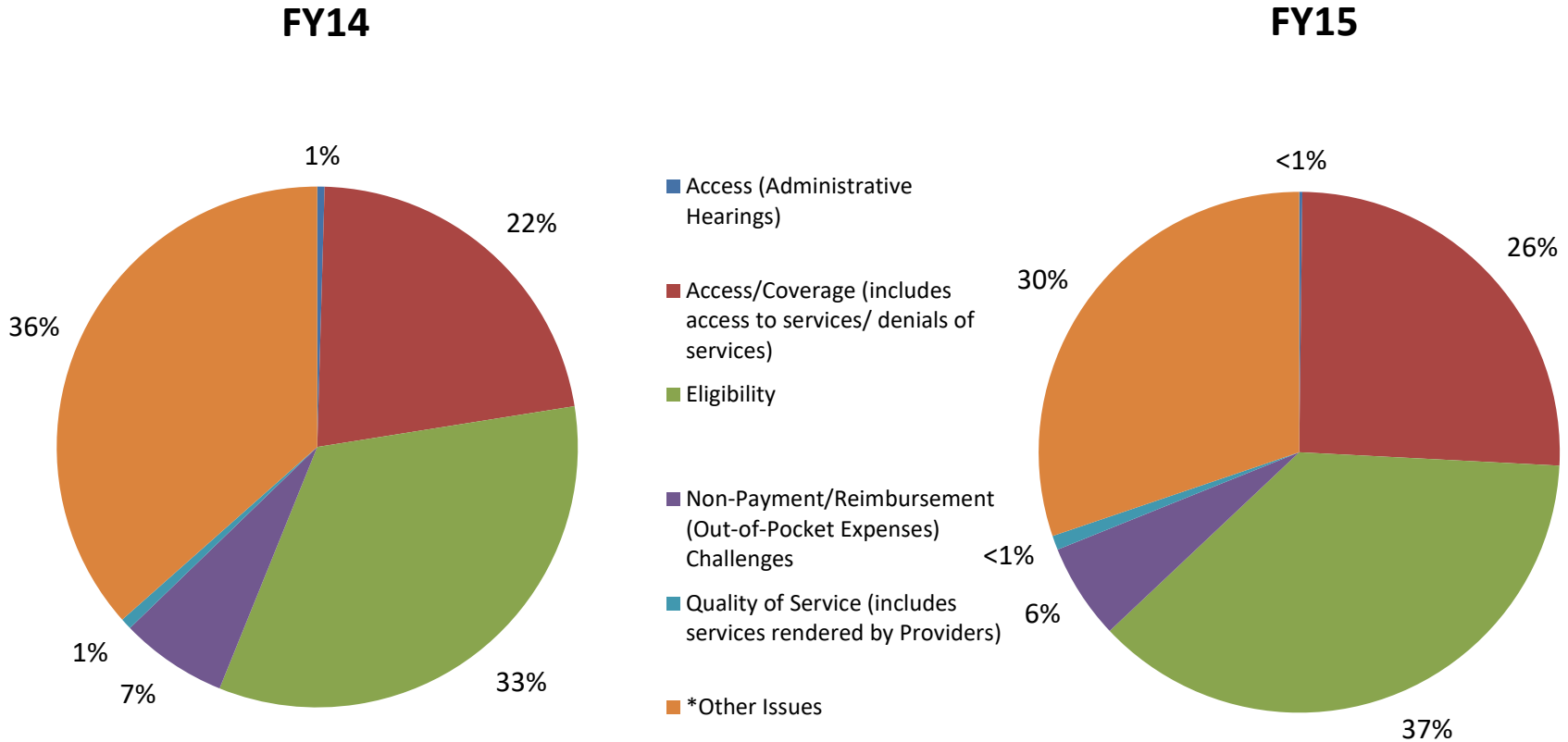
***Other Issues:** Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicare MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance; incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicare MCO/QMB/ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicare MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.

**Table 11. Breakdown of Types of Issues Encountered by
Medicaid Fee-for-Service (FFS) Contacts
FY14 and FY15**

Types of Issues Encountered by Medicaid Fee-for-Service (FFS) Contacts	FY14 Totals	FY14 Contacts (%)	FY15 Totals	FY15 Contacts (%)
Access (Administrative Hearings)	46	3%	50	3%
Access/Coverage (includes Access to services and Coverage includes denials of services)	687	43%	519	36%
Eligibility/Recertification (status of eligibility/verification of coverage)	365	23%	480	33%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	82	5%	50	4%
*Other Issues	298	19%	247	17%
Quality of Service (includes services rendered by Providers)	121	7%	99	7%
Total Types of Issues-Medicaid Fee-for-Service Contacts	1,599	100%	1,445	100%

**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicare MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance; incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicare MCO/QMB/ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicare MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HCP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re assignment assistance; location of child given up for adoption assistance; and rights of HHA.*

Figure 12. Breakdown of Types of Issues Encountered by Medicare Part A; Part B; Part A/B; Part A/B (QMB) Contacts FY14 and FY15



FY14 Total Sample = 2,436 contacted

FY15 Total Sample = 2,595 contacted

**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicare MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance; incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicare MCO/QMB/ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicare MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicare MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.*

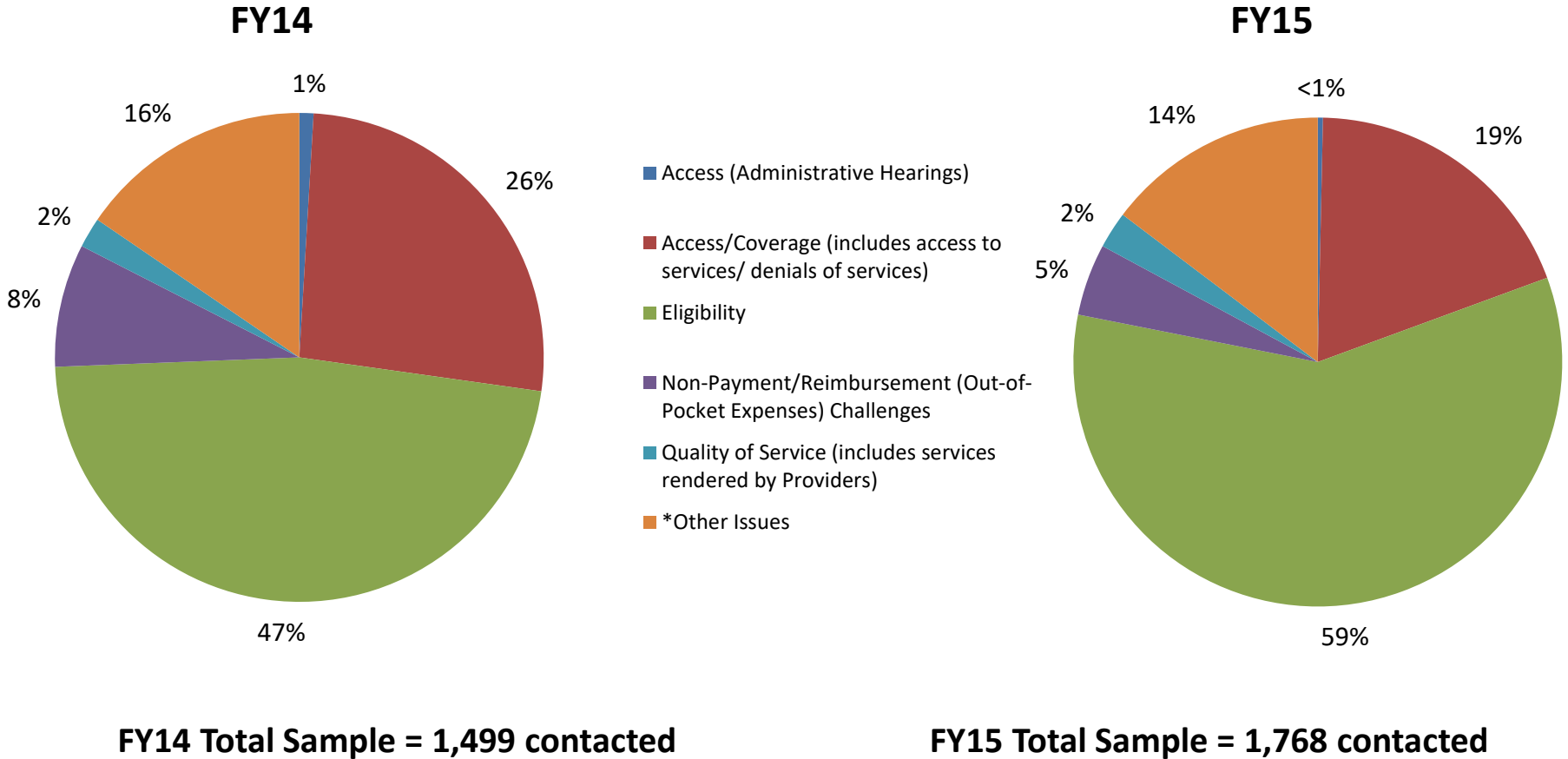
Table 12. Breakdown of Types of Issues Encountered by Medicare Part A; Part B; Part A/B; Part A/B (QMB) Contacts FY14 and FY15

Types of Issues Encountered by Medicare Part A; Part B; Part A/B; Part A/B (QMB) Contacts	FY14 Totals	FY14 Contacts (%)	FY15 Totals	FY15 Contacts (%)
Access (Administrative Hearings)	11	1%	5	<1%
Access/Coverage (includes Access to services and Coverage includes denials of services)	537	22%	665	26%
Eligibility/Recertification (status of eligibility/verification of coverage)	819	33%	964	37%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	162	7%	154	6%
*Other Issues	890	36%	784	30%
Quality of Service (includes services rendered by Providers)	17	1%	23	<1%
Total Types of Issues-Medicare Part A; Part B; Part A;/B; Part A/B (QMB) Contacts	2,436	100%	2,595	100%

**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicare MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance, incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicare MCO/QMB/ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicare MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.*

Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

Figure 13. Breakdown of Types of Issues Encountered by Medicaid Managed Care (MCO) Contacts FY14 and FY15



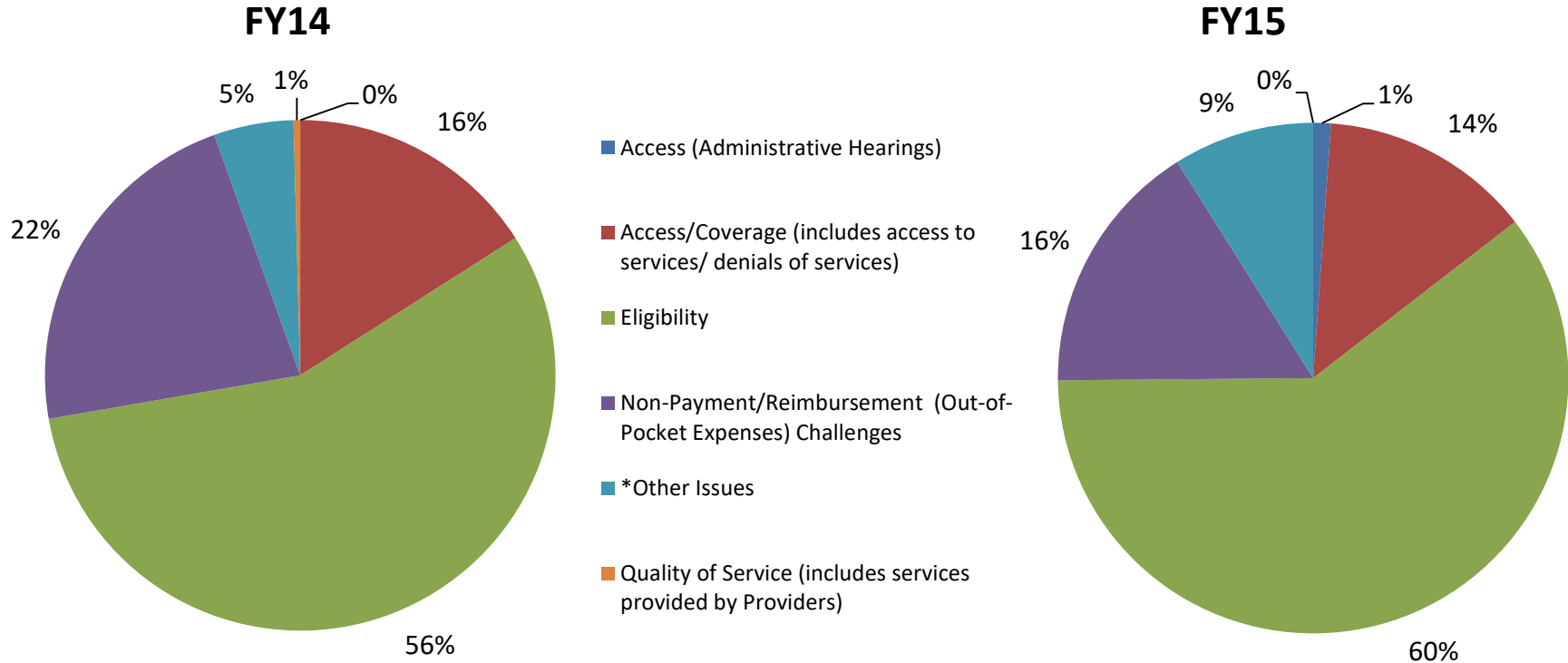
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**Table 13. Breakdown of Types Issues Encountered by
Medicaid Managed Care (MCO) Contacts
FY14 and FY15**

Types of Issues Encountered by Medicaid Managed Care (MCO) Contacts	FY14 Totals	FY14 Contacts (%)	FY15 Totals	FY15 Contacts (%)
Access (Administrative Hearings)	14	1%	6	<1%
Access/Coverage (includes Access to services and Coverage includes denials of services)	394	26%	337	19%
Eligibility/Recertication (status of eligibility/verification of coverage)	707	47%	1038	59%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	122	8%	84	5%
*Other Issues	232	16%	260	14%
Quality of Service (includes services rendered by Providers)	30	2%	43	2%
Total Types of Issues-Medicaid Managed Care (MCO) Contacts	1,499	100%	1,768	100%

**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicare MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance, incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicare MCO/QMB/ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicare MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.*

Figure 14. Breakdown of Types of Issues Encountered by Alliance Contacts FY14 and FY15



FY14 Total Sample = 238 contacted

FY15 Total Sample = 179 contacted

***Other Issues:** Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicare MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance; incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicare MCO/QMB/ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicare MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.

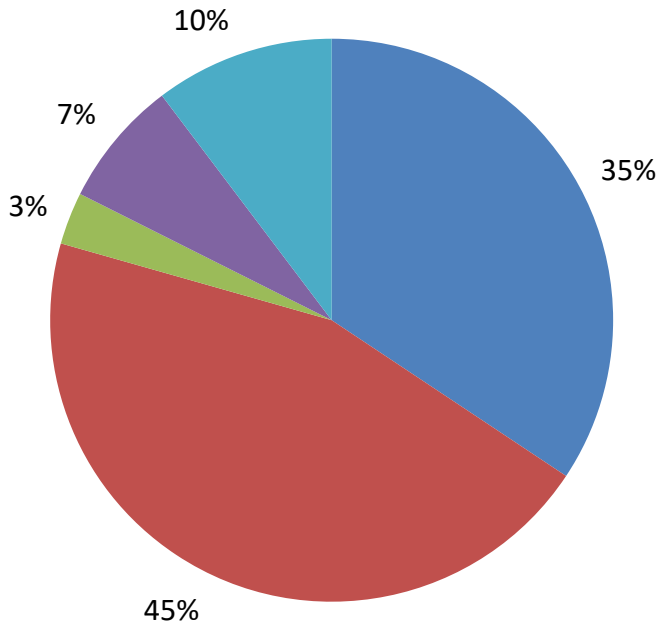
**Table 14. Breakdown of Types of Issues Encountered by Alliance Contacts
FY14 and FY15**

Types of Issues Encountered by Alliance Contacts	FY14 Totals	FY14 Contacts (%)	FY15 Totals	FY15 Contacts (%)
Access (Administrative Hearings)	0	0%	2	1%
Access/Coverage (includes Access to services and Coverage includes denials of services)	38	16%	24	14%
Eligibility/Recertication (status of eligibility/verification of coverage)	134	56%	108	60%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	53	22%	29	16%
*Other Issues	12	5%	16	9%
Quality of Service (includes services provided by Providers)	1	1%	0	0%
Total Types of Issues-Alliance Contacts	238	100%	179	100%

**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicare/MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance; incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicare/MCO/QMB ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicare/MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.*

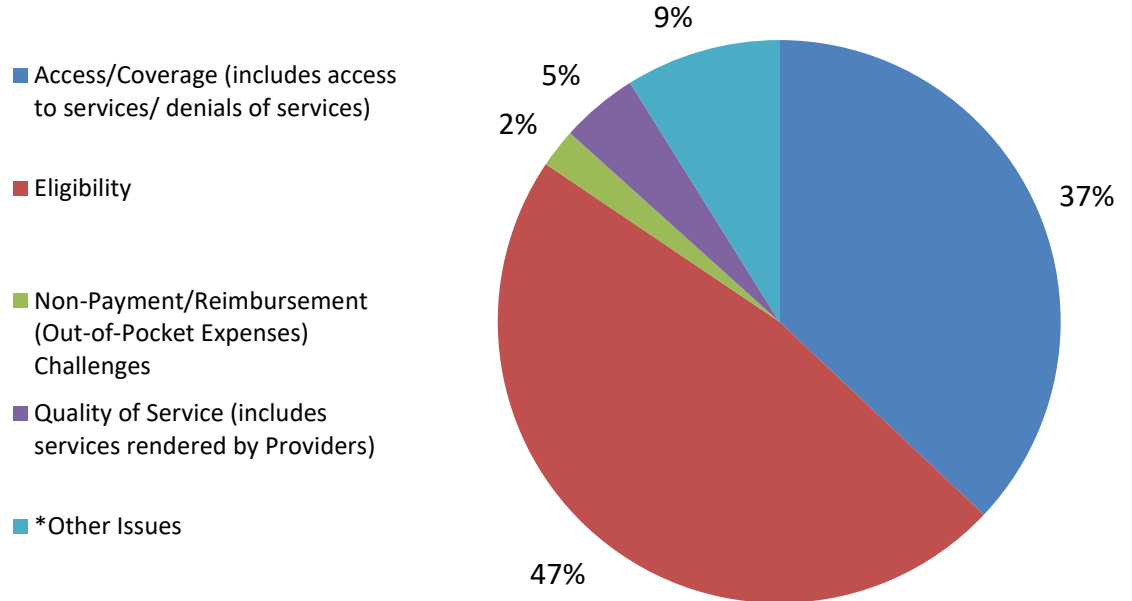
Figure 15. Breakdown of Types of Issues Encountered by Uninsured Contacts FY14 and FY15

FY14



FY14 Total Sample = 233 contacted

FY15



FY15 Total Sample = 135 contacted

**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicaid MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance, incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicaid MCO/QMB/ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicaid MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.*

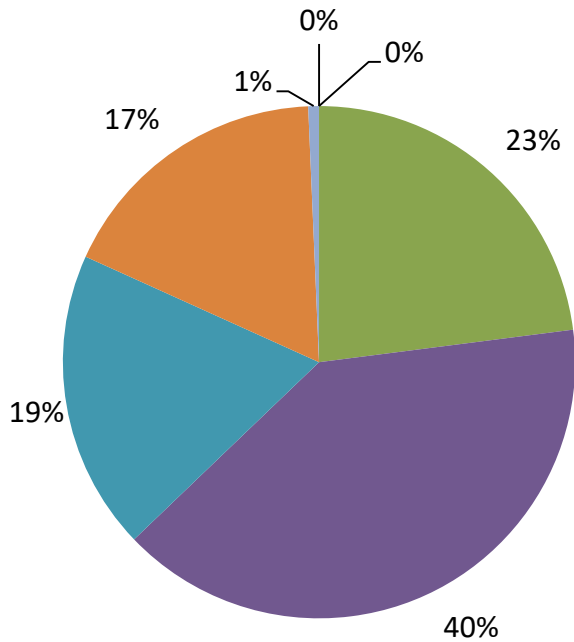
**Table 15. Breakdown of Issues Encountered by Uninsured Contacts
FY14 and FY15**

Types of Issues Encountered by Uninsured Contacts	FY14 Totals	FY14 Contact s (%)	FY15 Totals	FY15 Contacts (%)
Access/Coverage (includes access to services and Coverage includes denials of services)	80	35%	50	37%
Eligibility/Recertication (status of eligibility/verification of coverage)	105	45%	64	47%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	7	3%	3	2%
*Other Issues	24	10%	12	9%
Quality of Service (includes services rendered by Providers)	17	7%	6	5%
Total Types of Issues-Uninsured Contacts	233	100%	135	100%

**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicaid MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance; incorrect address in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicaid MCO/QMB ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicaid MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.*

Figure 16. Breakdown of Transportation Contacts by Insurance Type FY14 and FY15

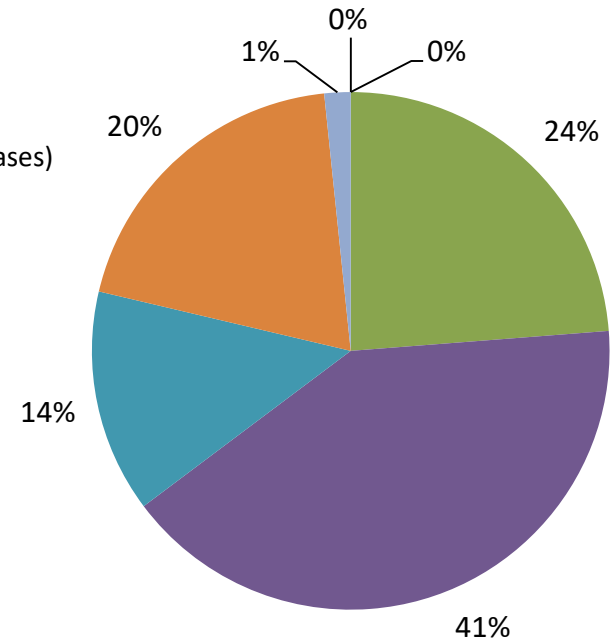
FY14



FY14 Total Sample = 148 contacted

FY15

- Alliance (includes Alliance/ADAP)
- Commercial Health Plan (includes Appeals/Grievances-Bill of Rights cases)
- Dual Eligible (Medicaid/Medicare)
- Medicaid Fee-for-Service (FFS)
- Medicaid Managed Care (MCO)
- Medicare
- Uninsured



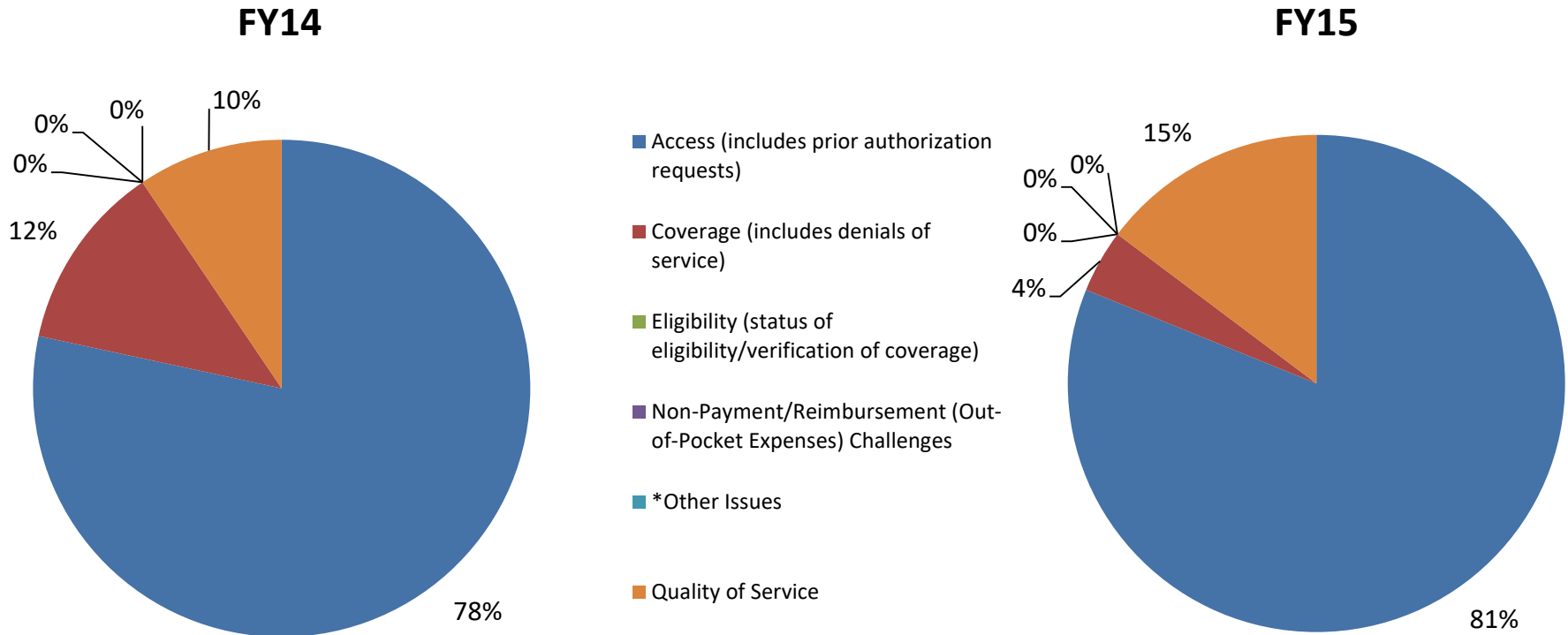
FY15 Total Sample = 122 contacted

Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

**Table 16. Breakdown of Transportation Contacts by Insurance Type
FY14 and FY15**

Transportation Contacts by Insurance Type	FY14 Totals	FY14 Contacts (%)	FY15 Totals	FY15 Contacts (%)
Alliance (includes Alliance/ADAP)	0	0%	0	0%
Commercial Health Plan (includes Appeals/Grievances-Bill of Rights cases)	0	0%	0	0%
Dual Eligible (Medicaid/Medicare) (includes OMB Plus/QMB Plus-AFDC-TANF/QMB Plus-BCCEDTP/QMB Plus-EPD Waiver/QMB Plus-IDD Waiver/QMB Plus-Long-Term Care/QMB Plus-Money Follow the Person Beneficiaries)	34	23%	29	24%
Medicaid Fee-for-Service (FFS) (includes FFS/FFS-BCCEDTP/FFS-CHIP/FFS-CHIP-MAGI/FFS-Childless Adult MAGI/FFS-EPD Waiver/FFS-IDD Waiver/FFS-Long-Term Care/FFS-MAGI/FFS-Money Follows the Person Beneficiaries)	59	40%	50	41%
Medicaid Managed Care (MCO) (includes AFDC-TANF/Childless Adult/Childless Adult-MAGI/CHIP/Katie Beckett/TANF/ Undocumented Alien Child Beneficiaries)	28	19%	17	14%
Medicare (includes Part A; Part B; Part A/B; Part A/B (QMB) and SLMB Beneficiaries)	26	17%	24	20%
Uninsured	1	1%	2	1%
Total Contacts by Insurance Type	148	100%	122	100%

Figure 17. Breakdown of Types of Issues Encountered by Transportation Contacts FY14 and FY15



FY14 Total Sample = 148 contacted

FY15 Total Sample = 122 contacted

**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicaid MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance; incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicaid MCO/QMB/ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicaid MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.*

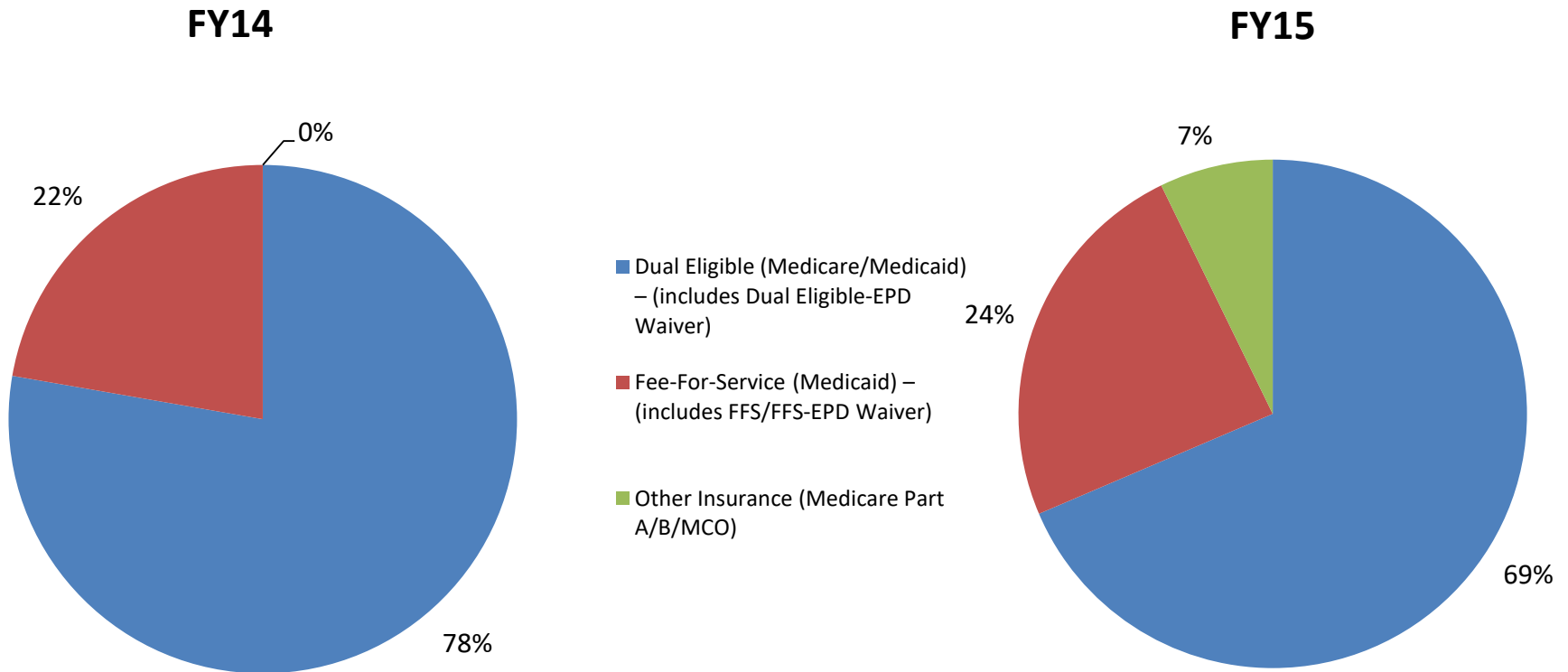
**Table 17. Breakdown of Types of Issues Encountered by
Transportation Contacts
FY14 and FY15**

Types of Issues Encountered by Transportation Contacts	FY14 Totals	FY14 Contacts (%)	FY15 Totals	FY15 Contacts (%)
Access (includes prior authorization requests)	116	78%	99	81%
Coverage (includes denials of service)	18	12%	5	4%
Eligibility/Recertication (status of eligibility/verification of coverage)	0	0%	0	0%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	0	0%	0	0%
*Other Issues	0	0%	0	0%
Quality of Service (includes services rendered by the Providers)	14	10%	18	15%
Total Types of Issues-Transportation Contacts	148	100%	122	100%

**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicare MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance; incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicare MCO/QMB ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicare MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.*

Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

Figure 18. Breakdown of EPD Waiver Contacts by Insurance Type FY14 and FY15



FY14 Total Sample = 678 contacted

FY15 Total Sample = 595 contacted

Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

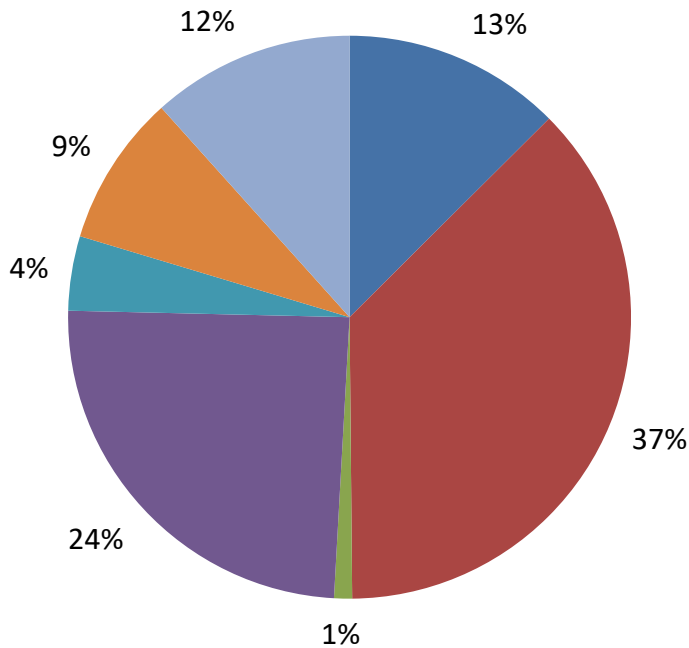
**Table 18. Breakdown of EPD Waiver Contacts by Insurance Type
FY14 and FY15**

EPD Waiver Contacts by Insurance Type	FY14 Totals	FY14 Contacts (%)	FY15 Totals	FY15 Contacts (%)
Dual Eligible (Medicare/Medicaid) – (includes Dual Eligible-EPD Waiver)	527	78%	408	69%
Fee-For-Service (Medicaid) – (includes FFS/FFS-EPD Waiver)	151	22%	144	24%
Other (Medicare Part A/B/MCO/Undetermined/Uninsured/Limited/Restricted Coverage)	0	0%	43	7%
Total EPD Waiver Contacts by Insurance Type	678	100%	595	100%

Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

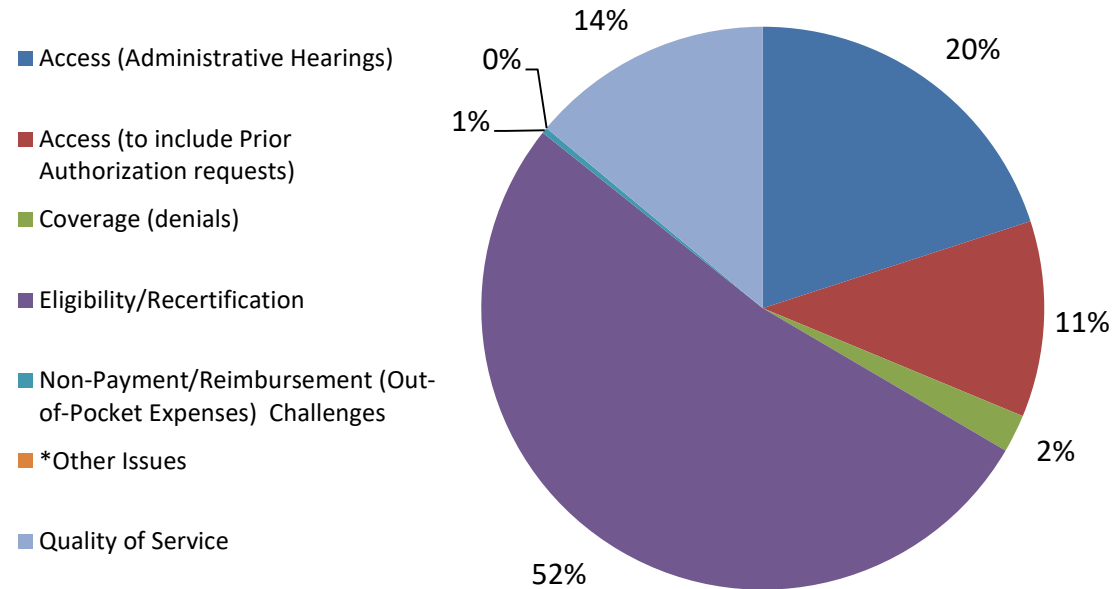
Figure 19. Breakdown of Types of Issues Encountered by EPD Waiver Contacts FY14 and FY15

FY14



FY14 Total Sample = 678 contacted

FY15



FY15 Total Sample = 595 contacted

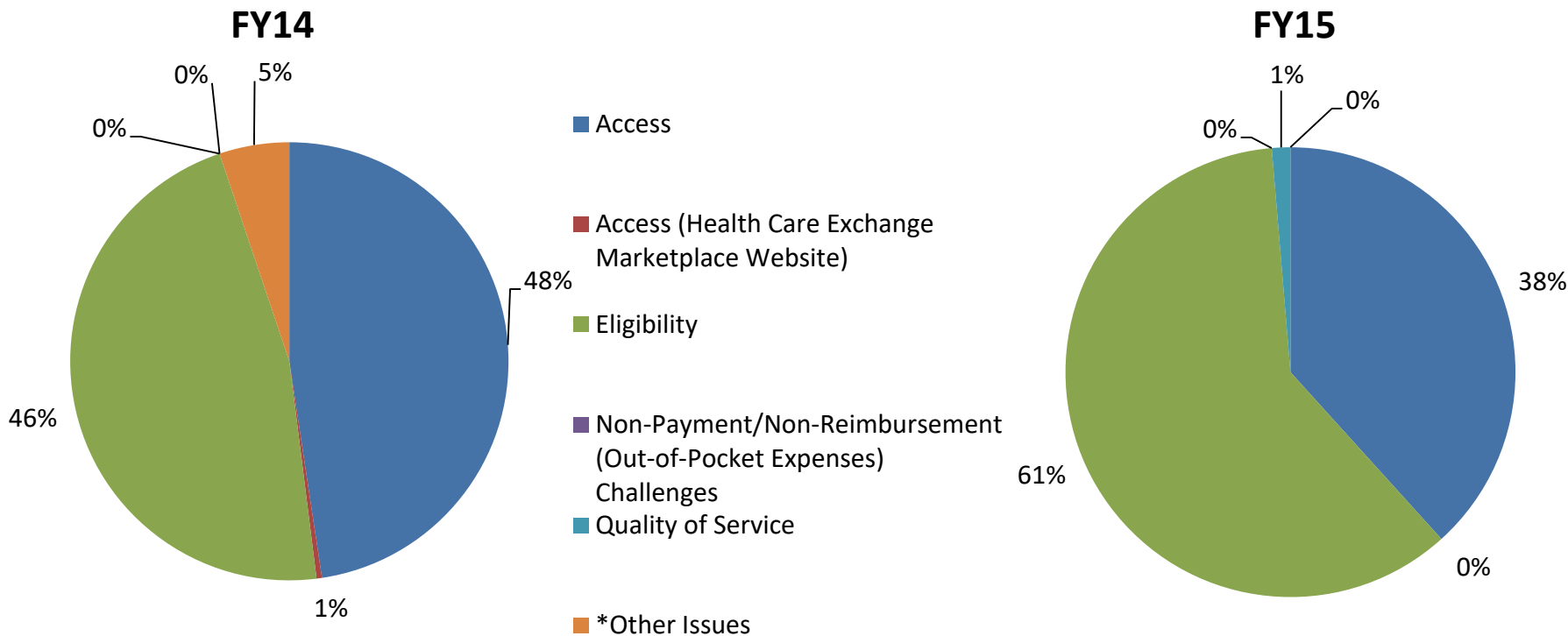
***Other Issues:** Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicare MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance; incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicare MCO/QMB/ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicare MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicare MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.

**Table 19. Breakdown of Types of Issues Encountered by
EPD Waiver Contacts
FY14 and FY15**

Types of Issues Encountered by EPD Waiver Contacts	FY14 Totals	FY14 Contacts (%)	FY15 Totals	FY15 Contacts (%)
Access (Administrative Hearings)	85	13%	119	20%
Access (includes Access to services to include Prior Authorization requests)	253	37%	67	11%
Coverage (denials of services)	7	1%	13	2%
Eligibility/Recertification (status of eligibility/verification of coverage)	166	24%	311	52%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	29	4%	2	1%
*Other Issues	59	9%	0	0%
Quality of Service (services rendered by Providers)	79	12%	83	14%
Total Types of Issues-EPD Waiver Contacts	678	100%	595	100%

*. *Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicaid MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance, incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicaid MCO/QMB/ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicaid MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.*

Figure 20. Breakdown of Types of Issues Encountered by DC Health Link and Health Exchange Marketplace Contacts FY14 and FY15



FY14 Total Sample = 252 contacted

FY15 Total Sample = 376 contacted

**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicaid MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance; incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicaid MCO/QMB/ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicaid MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICF telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.*

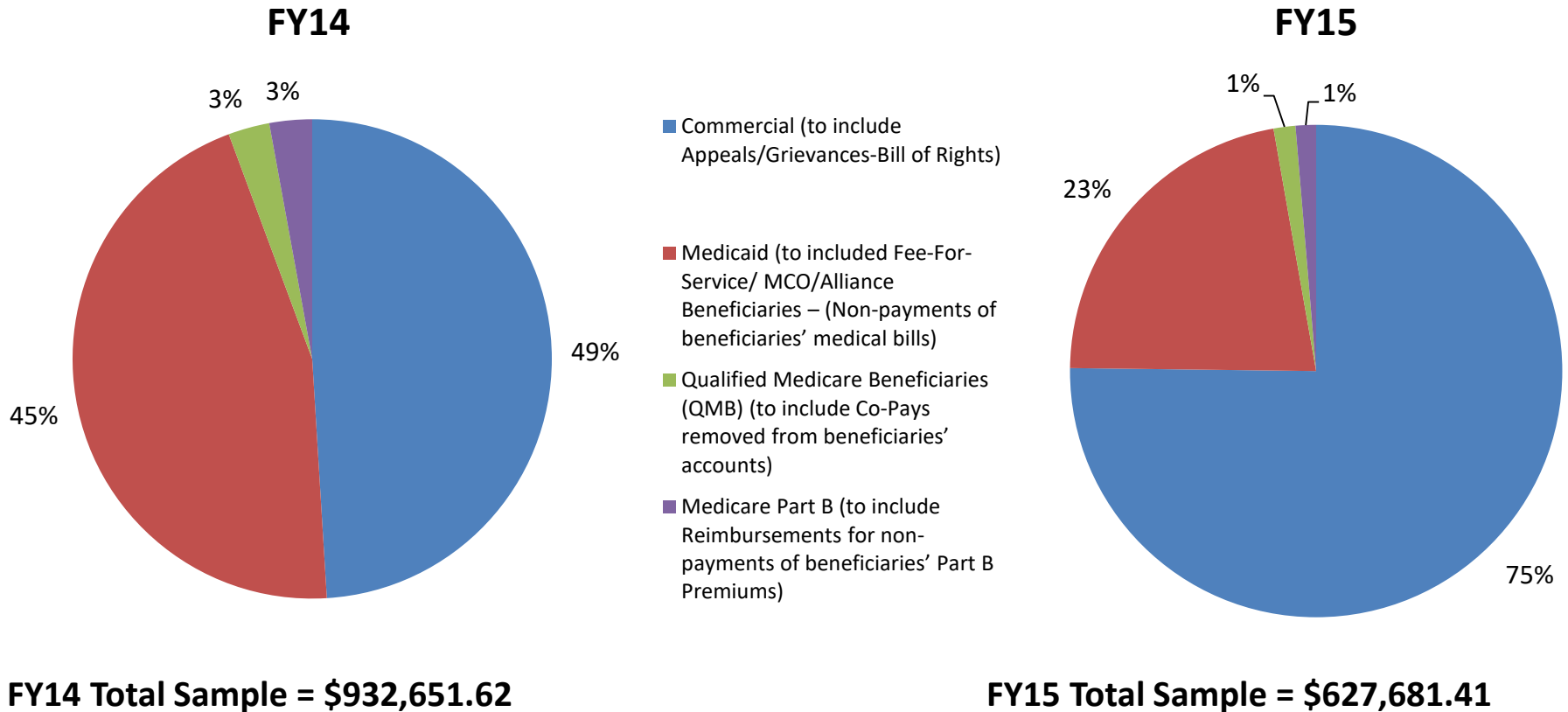
Table 20. Breakdown of Types of Issues Encountered by DC Health Link and Health Care Exchange Marketplace Contacts FY14 and FY15

Types of Issues Encountered by DC Health Link and Health Care Exchange Marketplace Contacts	FY14 Totals	FY14 Contacts (%)	FY15 Totals	FY15 Contacts %
Access (includes applications for insurance coverage/applications for retroactive Medicaid/recertification application/1095-A Forms/1095-B Correction Request Forms)	120	48%	144	38%
Access (Health Care Exchange Marketplace Website)	1	1%	0	0%
Eligibility (includes status of application for insurance coverage and recertification applications submitted to DC Health Link via fax and/or website/explanation of DC Health Link Services)	118	46%	227	61%
Non-Payment/Non-Reimbursement (Out-of-Pocket Expenses) Challenges (includes members' paid premiums to insurers)	0	0%	0	0%
*Other Issues	13	5%	0	0%
Quality of Service (includes DC Health Link's lack of response to applications submitted by applicants; lack of follow-through on applications submitted by applicants via the website; delay in answering telephones; lost on-line submissions; and lack of processing paid premiums to insurers in a timely manner)	0	0%	5	1%
Total Types of Issues-DC Health Link/Health Care Exchange Marketplace Contacts	252	100%	376	100

**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicaid MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance; incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicaid MCO/QMB ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicaid MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for POF information; request for x-rays to be transferred; request to not be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.*

Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

Figure 21. Dollar Amount of Savings on Behalf of (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) Contacts FY14 and FY15



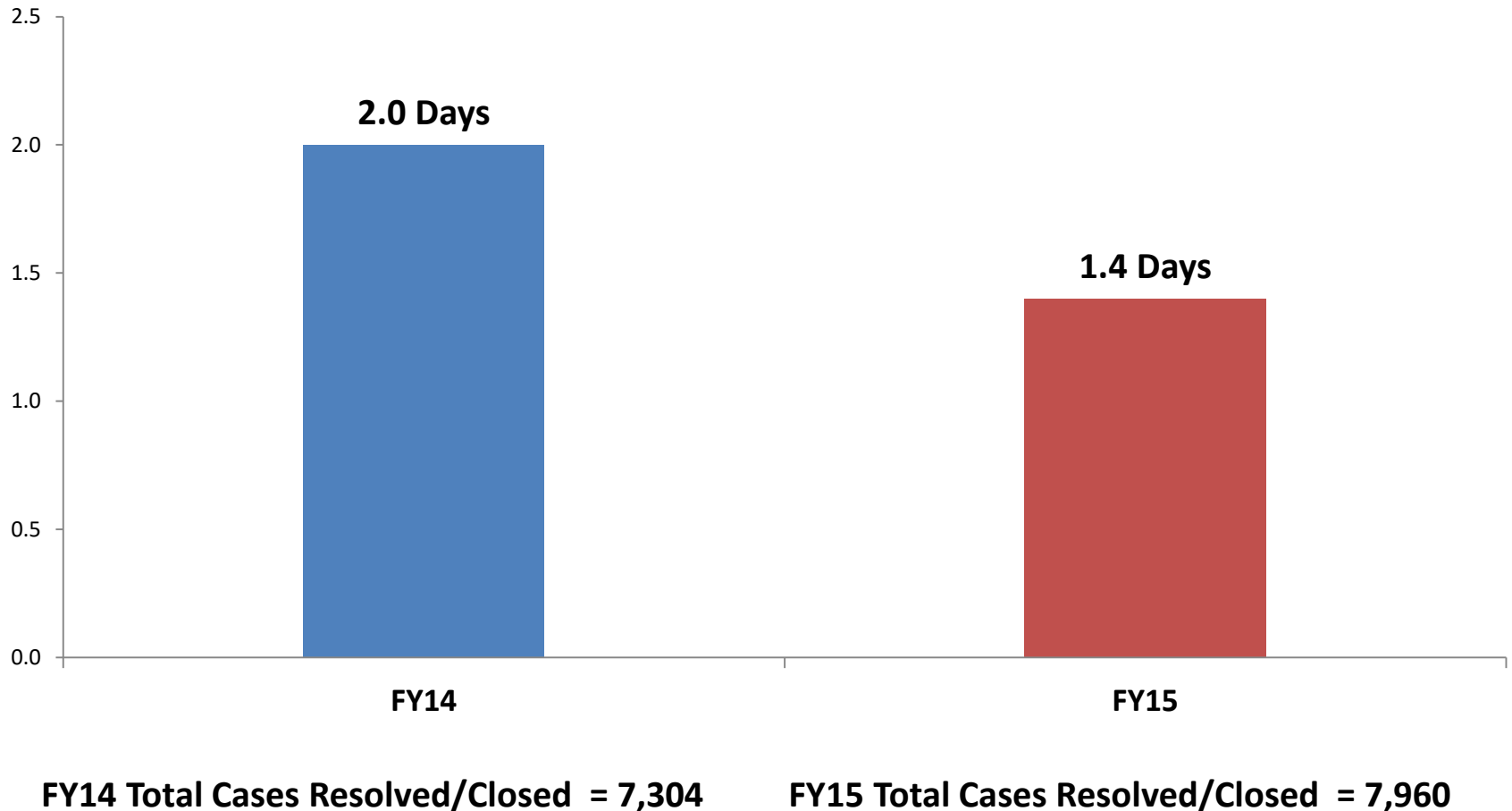
Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

**Table 21. Dollar Amount of Savings on Behalf of (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) Contacts
FY14 and FY15**

Dollar Amount of Savings on Behalf of (Non-Commercial); (Commercial-Appeals/Grievances-Bill-Rights) Contacts	FY14 Totals	FY14 Percent (%)	FY15 Totals	FY15 Percent (%)
Commercial (to include Appeals/Grievances-Bill of Rights)	\$457,240.56	49%	471,963.02	75%
Medicaid (to include Fee-For-Service/MCO/Alliance Beneficiaries) – (Non-payments of beneficiaries’ medical bills)	\$422,616.56	45%	138,308.79	23%
Qualified Medicare Beneficiaries (QMB) - (Co-Pays removed from beneficiaries’ accounts)	\$25,991.07	3%	8,995.70	1%
Medicare (to Include Part B/Dual Eligible) – (Reimbursements for non-payments of beneficiaries’ Part B Premiums)	\$26,803.43	3%	8,413.90	1%
Total Dollar Amount of Savings on Behalf of All Consumers	\$932,651.62	100%	\$627,681.41	100%

Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

**Figure 22. Average Number of Days to Resolve/Close
(Non-Commercial) Cases
FY14 and FY15**



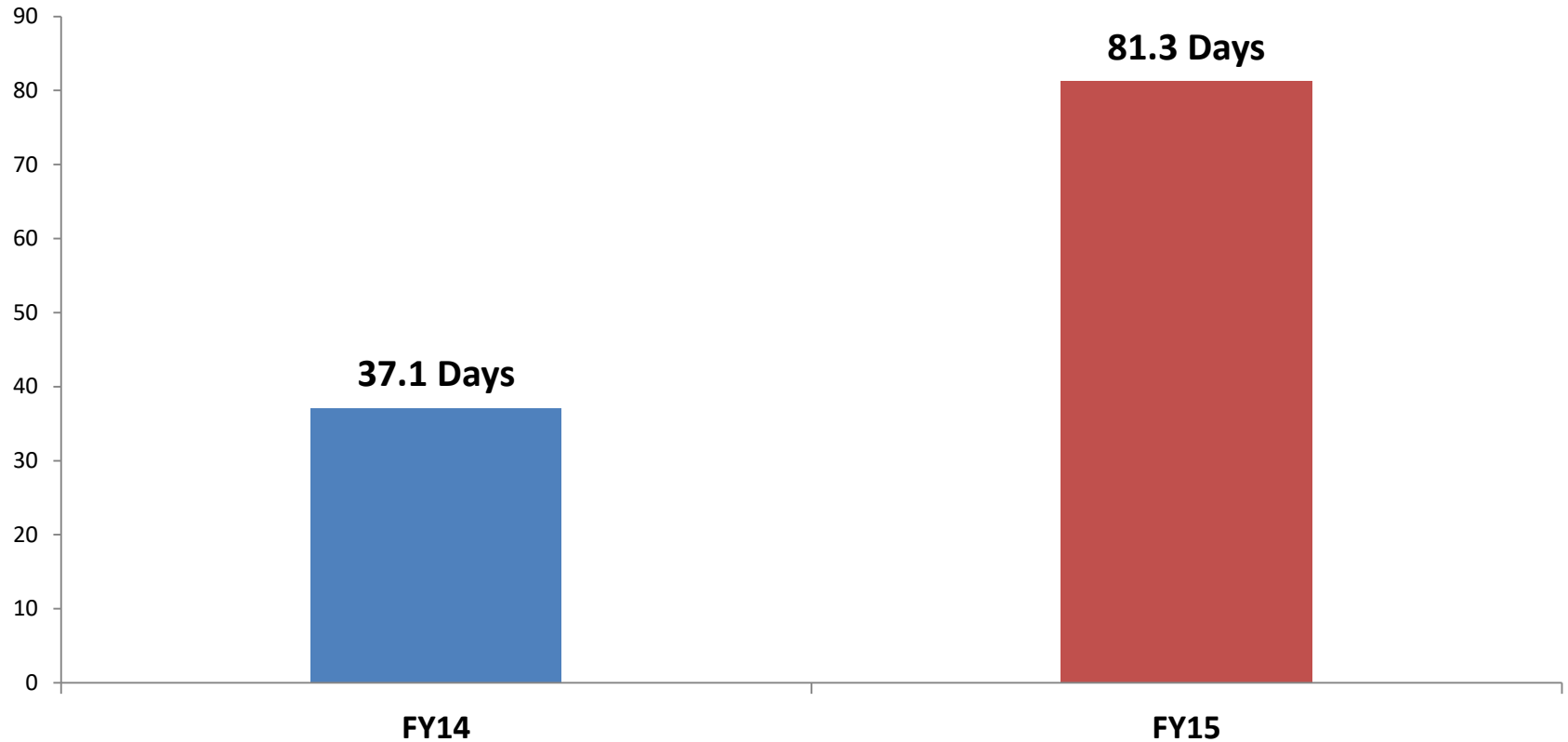
Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

**Table 22. Average Number of Days to Resolve/Close
(Non-Commercial) Cases
FY14 and FY15**

FY14 Average Number of Days to Resolve/Close (Non-Commercial) Cases	FY14 Total	FY15 Average Number of Days to Resolve/Close (Non-Commercial) Cases	FY15 Total
Average Number of Days It Took to Resolve/Close (7,304) (Non-Commercial) cases	2.0 days	Average Number of Days It Took to Resolve/Close (7,960) (Non-Commercial) cases	1.4 days
Note: Of the (7,712) (Non-Commercial) cases opened, the OHCOBR resolved/closed (6,472) cases on same day that cases were opened		Note: Of the (8,241) (Non-Commercial) cases opened, the OHCOBR resolved/closed (7,350) cases on same day that cases were opened	

Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

**Figure 23. Average Number of Days to Resolve/Close
(Commercial-Appeals/Grievances-Bill of Rights) Cases
FY14 and FY15**



FY14 Total Cases Resolved/Closed = 91

FY15 Total Cases Resolved/Closed = 148

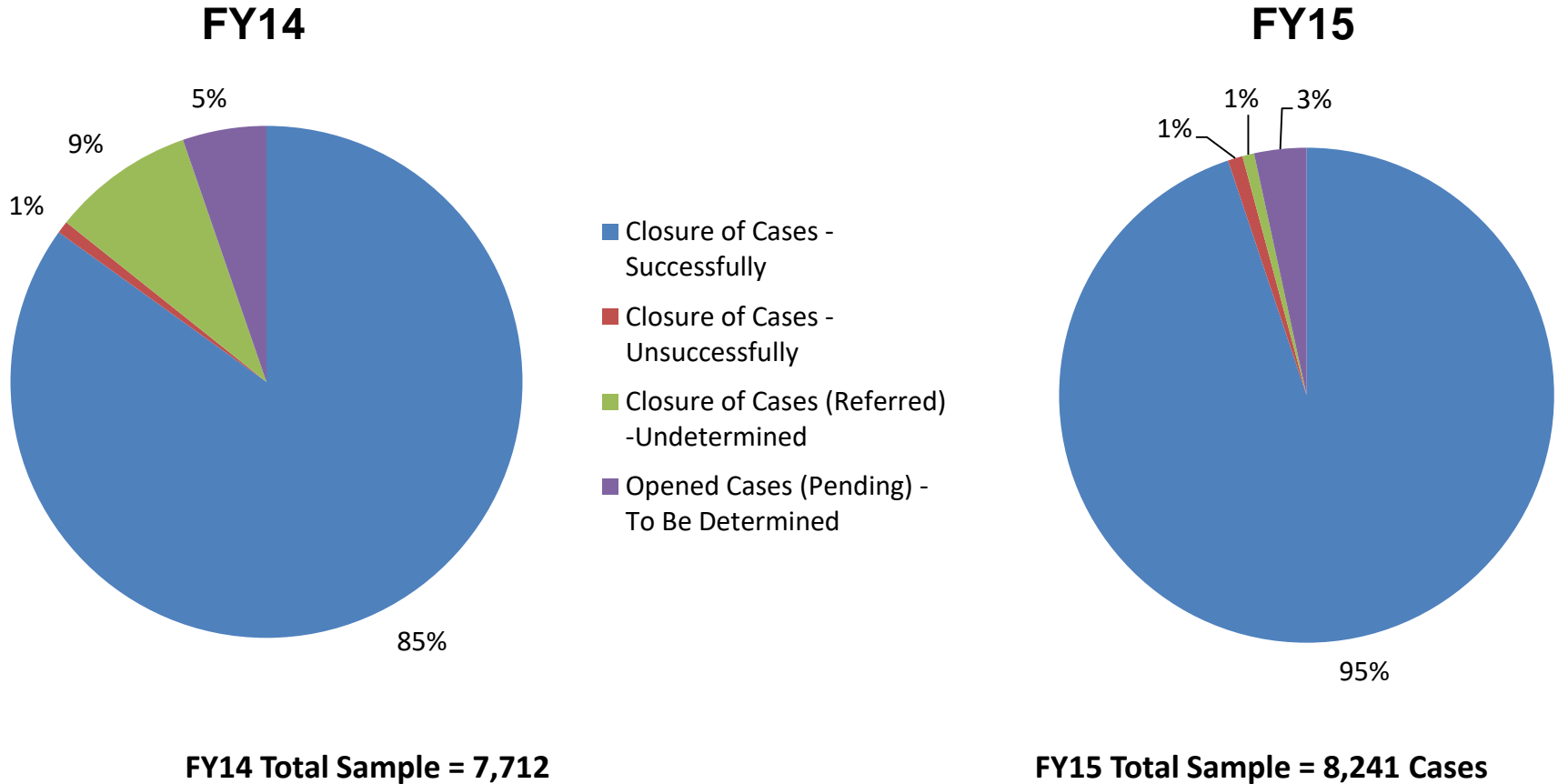
Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

**Table 23. Average Number of Days to Resolve/Close
(Commercial-Appeals/Grievances-Bill of Rights) Cases
FY14 and FY15**

FY14 Average Number of Days to Resolve/Close (Commercial-Appeals/Grievances- Bill of Rights) Cases	FY14 Total	FY15 Average Number of Days to Resolve/Close (Commercial-Appeals/Grievances- Bill of Rights) Cases	FY15 Total
Average Number of Days It Took to Resolve/Close (91) (Commercial- Appeals/Grievances-Bill of Rights) Cases	37.1 days	Average Number of Days It Took to Resolve/Close (148) (Commercial- Appeals/Grievances-Bill of Rights) Cases	81.3 days
Note: Of the (192) (Commercial- Appeals/Grievances-Bill of Rights) cases opened, the OHCOBR resolved/closed (53) cases on same day that cases were opened		Note: Of the (197) (Commercial- Appeals/Grievances-Bill of Rights) cases opened, the OHCOBR resolved/closed (10) cases on same day that cases were opened	

Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

Figure 24. Breakdown of Number and Percentage of How (Non-Commercial) Cases Were Resolved/Closed and Cases Not Resolved/Closed by the OHCOBR FY14 and FY15



Source data captured between October 1, 2013 through September 30, 2014 through October 1, 2014 through September 30, 2015

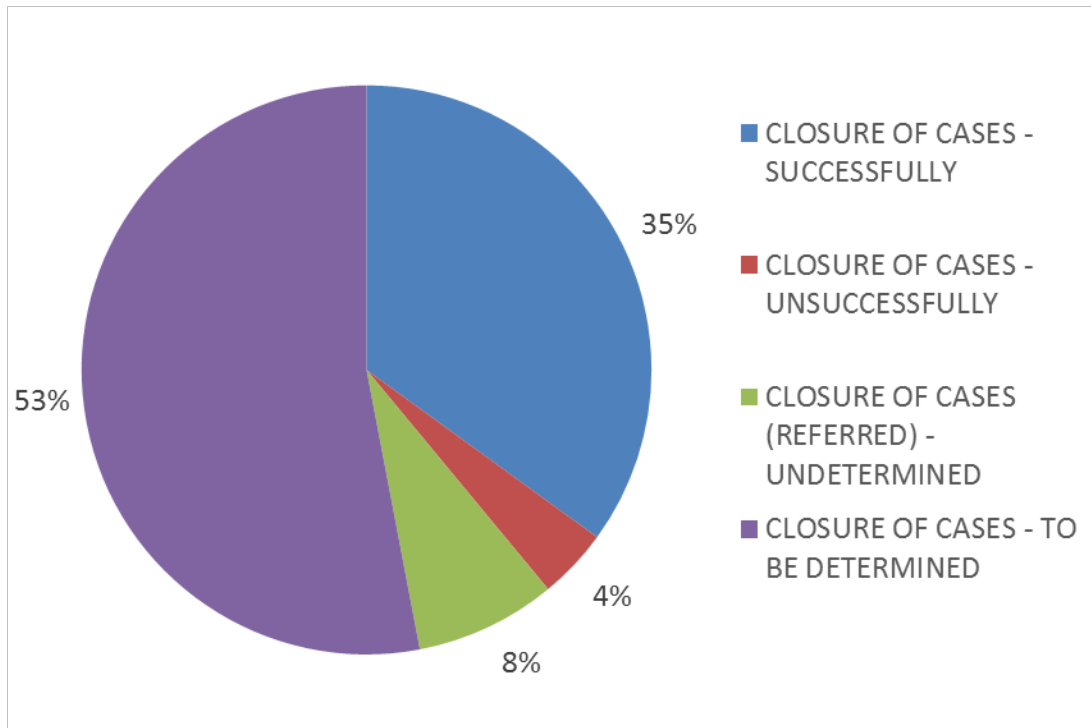
**Table 24. Breakdown of Number and Percentage of How
(Non-Commercial) Cases Were Resolved/Closed and
Cases Not Resolved/Closed by the OHCOBR
FY14 and FY15**

How (Non-Commercial) Cases were Resolved/Closed and Cases Not Resolved/ Closed	FY14 Totals	FY14 Percent (%)	FY15 Totals	FY15 Percent (%)
Closure of Cases - Successfully	6,550	85%	7,814	95%
Closure of Cases -Unsuccessfully	60	1%	80	1%
Closure of Cases (Referred) -Undetermined	694	9%	66	1%
Opened Cases (Pending) - To Be Determined	408	5%	281	3%
Total Number and Percentage of (Non- Commercial) Cases	7,712	100%	8,241	100%

Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

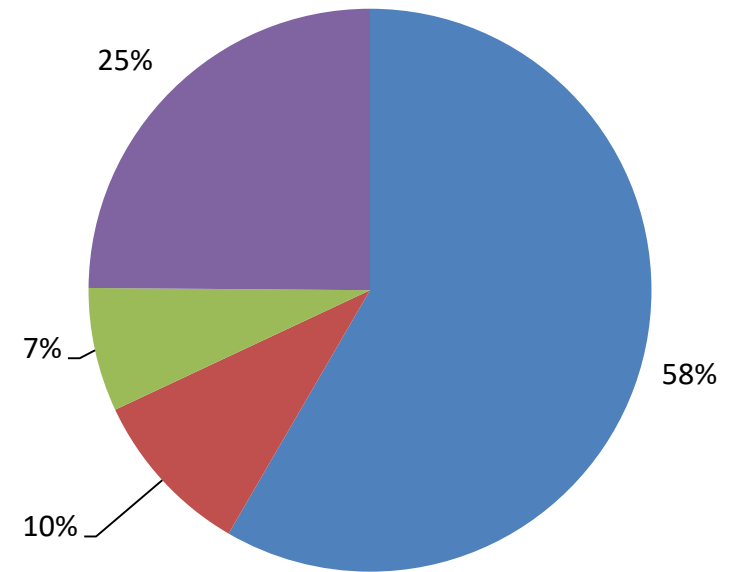
Figure 25. Breakdown of Number and Percentage of How (Commercial-Appeals/Grievances-Bill of Rights) Cases Were Resolved/Closed and Cases Not Resolved/Closed by the OHCOCR FY14 and FY15

FY14



FY14 Total Sample = 192 Cases

FY15



FY15 Total Sample = 197 Cases

Source data captured between October 1, 2013 through September 30, 2014 through October 1, 2014 through September 30, 2015

**Table 25. Breakdown of Number and Percentage of How
(Commercial-Appeals/Grievances-Bill of Rights) Cases
Were Resolved/Closed and Cases Not Resolved/Closed by the OHCOBR
FY14 and FY15**

How (Commercial-Appeals/Grievances-Bill of Rights) Cases were Resolved/Closed and Cases Not Resolved/Closed	FY14 Totals	FY14 Percent (%)	FY15 Totals	FY15 Percent (%)
Closure of Cases - Successfully	68	35%	115	58%
Closure of Cases -Unsuccessfully	7	4%	19	10%
Closure of Cases (Referred) - Undetermined	16	8%	14	7%
Opened Cases (Pending) - To Be Determined	101	53%	49	25%
Total Number and Percentage of (Commercial-Appeals/Grievances-Bill of Rights) Cases	192	100%	197	100%

Source data captured between October 1, 2013 through September 30, 2014 and October 1, 2014 through September 30, 2015

Moving Forward

Office of Health Care Ombudsman and Bill of Rights intends to continue:

- Capturing data for each contact
- Tracking types of calls received to identify changes over time
- Keep updated and add new features to new Ombudsman In-Take Log Data System (OIDS)
 - Expanding data analysis capability