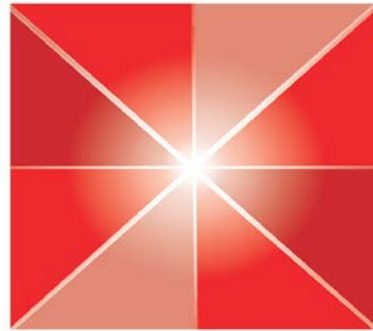


Office of Health Care Ombudsman and Bill of Rights (OHCOBR)
FY2016 Summary of Cases
October 1, 2015 through September 30, 2016

DISTRICT OF
COLUMBIA



HEALTH CARE
OMBUDSMAN

“The Knowledge to Guide You”

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

Highlights - FY2016 Contact Summary

- *In FY2016, the Office of Health Care Ombudsman and Bill of Rights opened a grand total of (8,420) Non-Commercial and Commercial cases - (See Pages 4-5);*
- *Of the (8,420) cases opened - (8,164) cases were Non-Commercial - (See Pages 4-5);*
- *Percentage of resolved/closed Non-Commercial cases was (97% or 7,901 resolved/closed cases) out of a total of (8,164) Non-Commercial cases opened – (See Pages 6-7);*
- *In FY2016, the Average Number of Days for the Office of Health Care Ombudsman and Bill of Rights to resolve/close (7,901) Non-Commercial cases was (0.6) days -(See Pages 49-50);*
- *Of the (8,164) Non-Commercial cases opened in FY2016, the Office of Health Care Ombudsman and Bill of Rights resolved/closed (6,999) cases on same day that cases were opened - (See Page 50);*

- *Of the grand total of (8,420) cases opened by the Office of Health Care Ombudsman and Bill of Rights – (256) cases were among the Commercial Health Plan Members – (See Pages 4-5);*
- *Percentage of resolved/closed Commercial-Appeals/Grievances cases was (83% or 213 resolved/closed cases) out of a total of (256) commercial-appeals/grievances cases opened - (See Pages 8-9);*
- *In FY2016, the Average Number of Days for the Office of Health Care Ombudsman and Bill of Rights to resolve/close Commercial-Appeals/Grievances cases was (110.4) days - (See Pages 51-52);*
- *Of the (256) Commercial-Appeals/Grievances cases opened in FY2016, the Office of Health Care Ombudsman and Bill of Rights resolved/closed (8) 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 (\$715,553.11). Of the total dollar amount saved (100%) was from Commercial-Appeals/Grievances cases. (See Pages 47-48);*

- *Of the (164) Administrative/Fair Hearing cases filed by the Office of Health Care Ombudsman and Bill of Rights (12% or 100 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—(94% or 7,961 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 - (29% or 2,486 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 (5) had the highest number of contacts (16% or 1,386 contacts, followed by Ward (7), and Ward (8) - (See Pages 14-15);*

- *Eligibility issues represented the largest category of issues encountered by all consumers – (47% or 3,903 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);*

- *Eligibility issues represented the largest category of issues encountered by Medicaid (Fee-for-Service) - (See Pages 27-28);*

- *Eligibility 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 FY2016, the Office of Health Care Ombudsman and Bill of Rights opened a total of (105) Transportation Cases versus the (122) Transportation cases opened in FY2015 – (See Pages 39-40);*

- *The Office of Health Care Ombudsman and Bill of Rights opened a total of (861) EPD Waiver Cases in FY2016 versus the (595) EPD Waiver cases opened in FY2015 – (See Pages 41-42); and*

- *In FY 2016, the Office of Health Care Ombudsman and Bill of Rights opened a total of (328) DC Health Link cases versus the (376) DC Health Link cases opened in FY2015 - (See Pages 45-46).*

Office of Health Care Ombudsman and Bill of Rights (OHCOBR) FY2016

Summary of Activities

During Fiscal Year 2016, 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 2016 (October 1, 2015 through September 30, 2016).

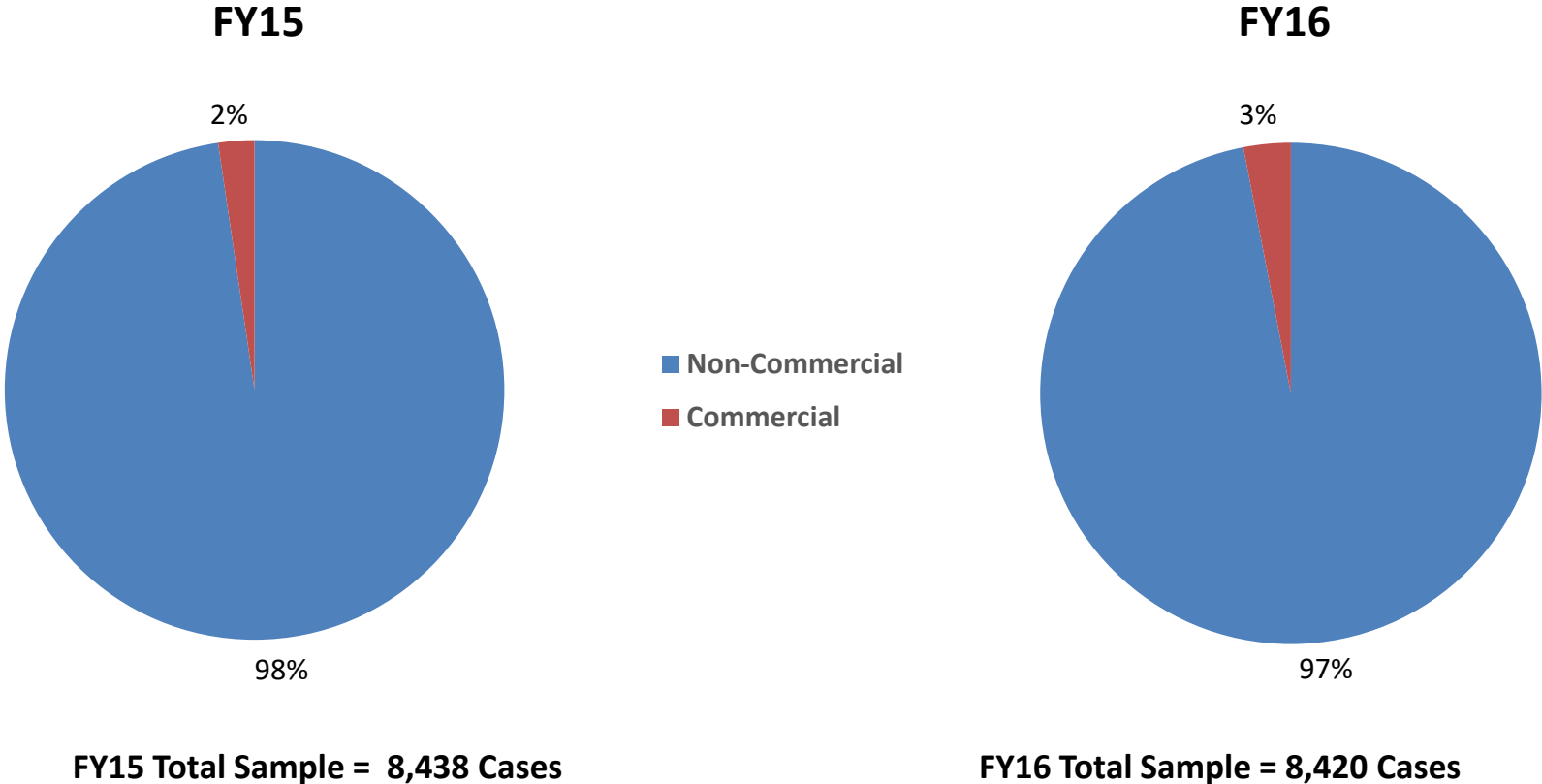
In summarizing the activities from the Ombudsman In-Take Data System (OIDS), the OHCOBR sought to answer the following key questions:

- *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 2016, the OHCOBR received a total of (707) contacts by individuals (consumers) who were repeat users versus (454) contacts in FY2015;*

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 FY15 and FY16



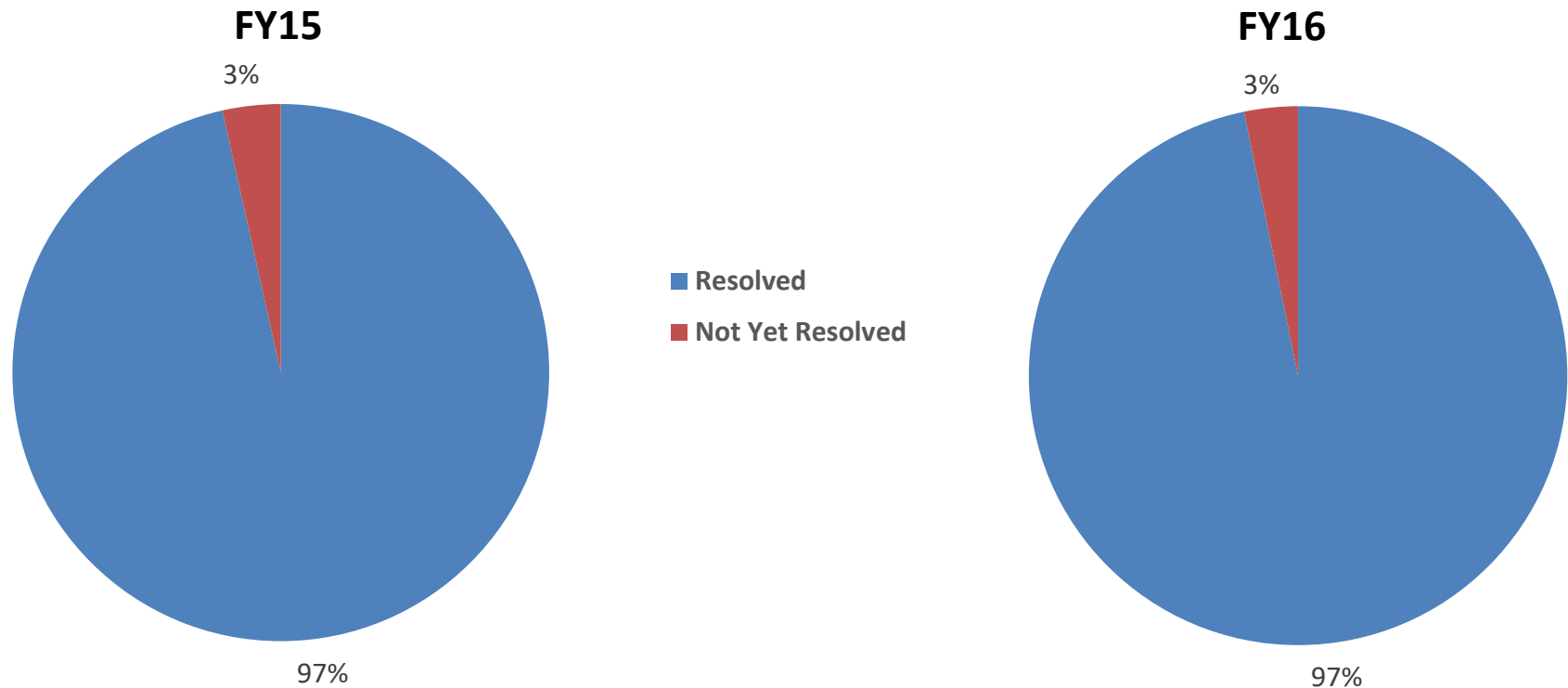
Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

**Table 1. Total Number and Percentage of Opened Cases Among All Contacts--(Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) Contacts
FY15 and FY16**

Opened Cases Among All Contacts	FY15 Totals	FY15 Percent (%)	FY16 Totals	FY16 Percent (%)
Non-Commercial Cases	8,241	98%	8,164	97%
Commercial (Appeals/Grievances—Bill of Rights) Cases	197	2%	256	3%
Total (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) Opened Cases	8,438	100%	8,420	100%

Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

Figure 2. Number and Percentage of Resolved/Closed Cases and Cases Not Resolved/Closed Among (Non-Commercial) Contacts FY15 and FY16



FY15 Total Sample = 8,241 Cases

FY16 Total Sample = 8,164 Cases

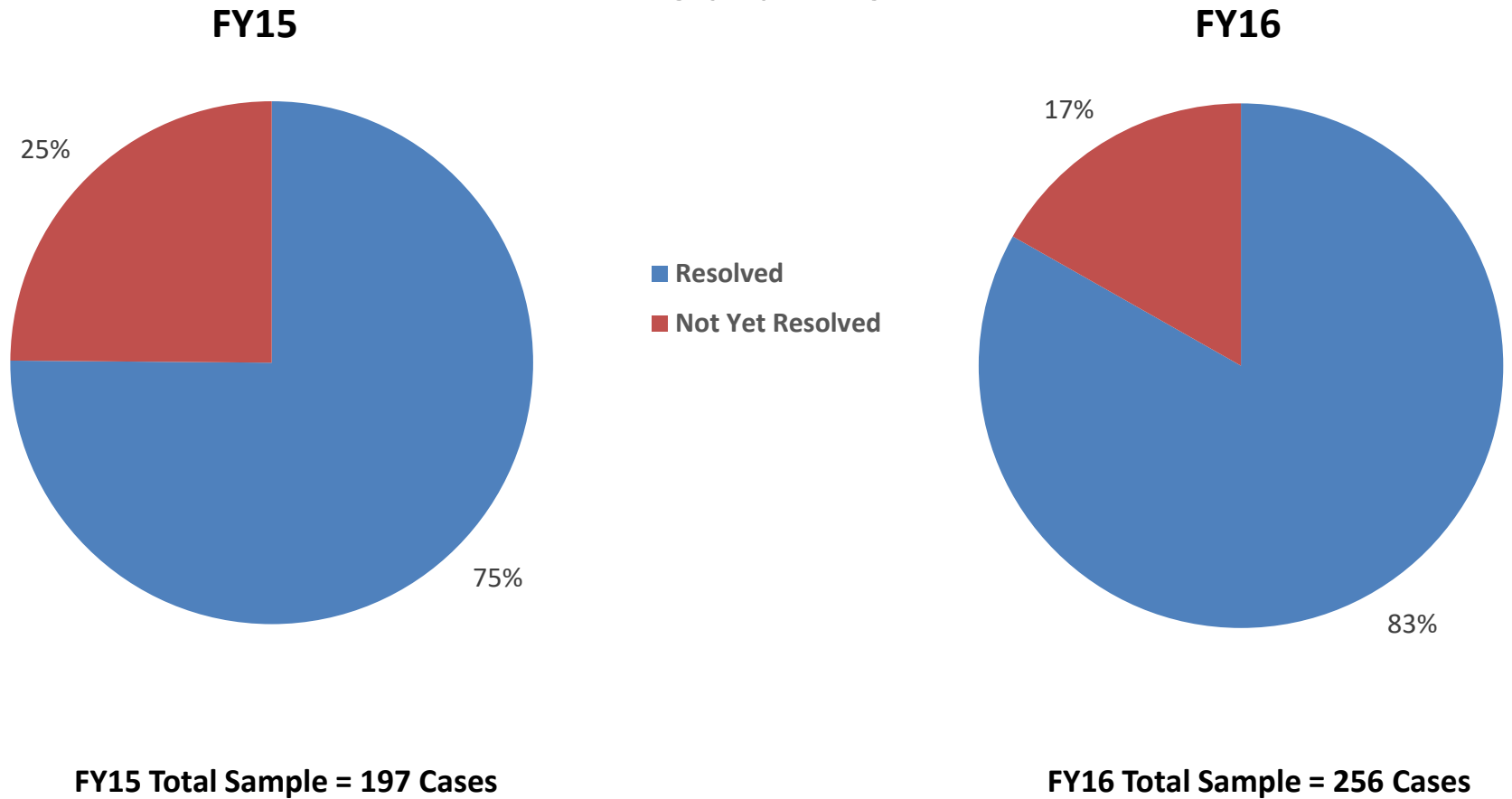
Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

**Table 2. Number and Percentage of Resolved/Closed Cases and
Cases Not Resolved/Closed
Among (Non-Commercial) Contacts
FY15 and FY16**

Resolved/Closed Cases (Non-Commercial)	FY15 Totals	FY15 Percent (%)	FY16 Totals	FY16 Percent (%)
Cases Resolved/Closed	7,960	97%	7,901	97%
Cases Not Yet Resolved/Closed	281	3%	263	3%
Total (Non-Commercial) Contacts/Cases	8,241	100%	8,164	100%

Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

Figure 3. Number and Percentage of Resolved/Closed Cases and Cases Not Resolved/Closed Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts FY15 and FY16



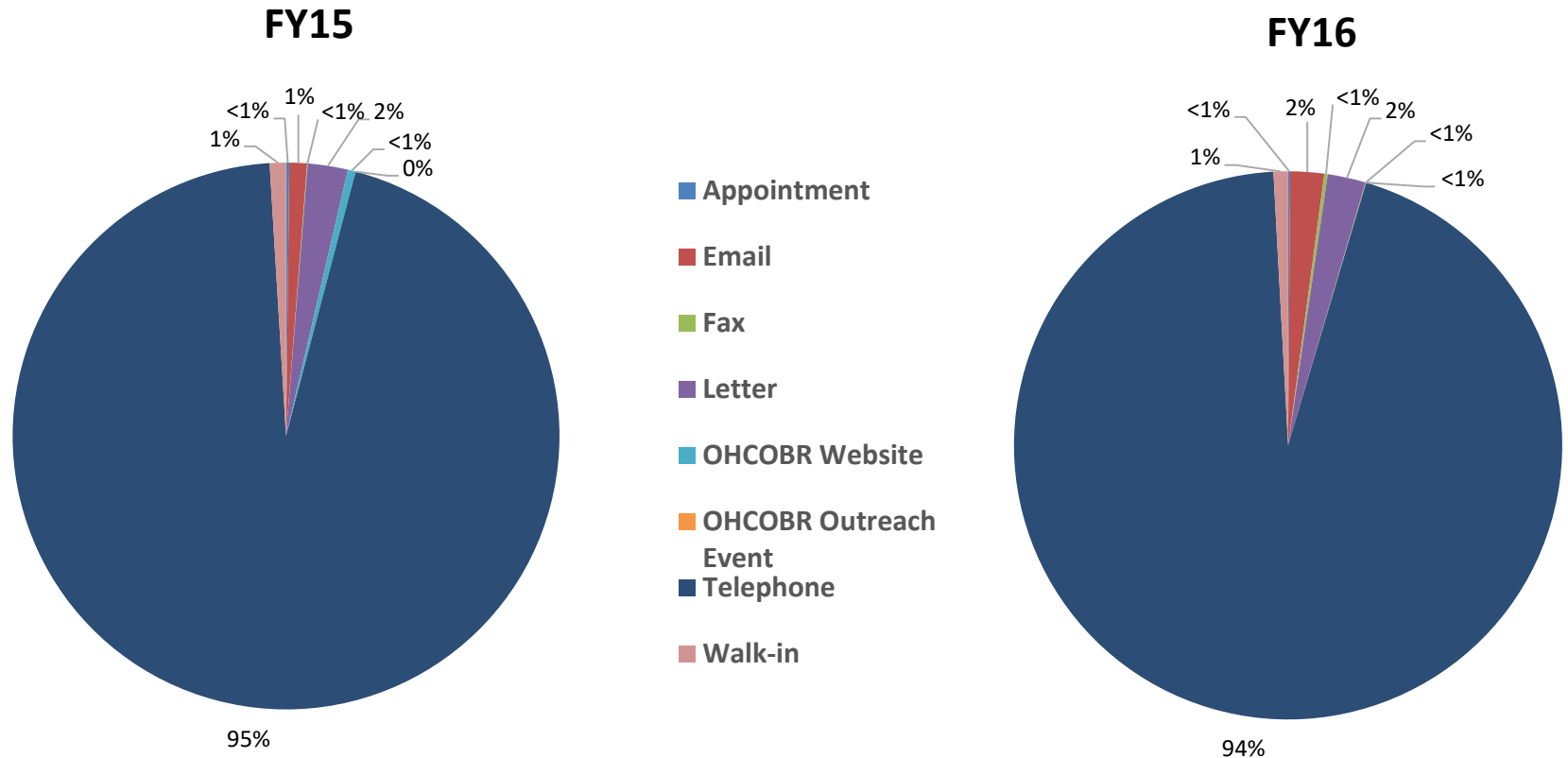
Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

Table 3. Number and Percentage of Resolved/Closed Cases and Cases Not Resolved/Closed Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts FY15 and FY16

Resolved/Closed Cases (Commercial-Appeals/Grievances-Bill of Rights)	FY15 Totals	FY15 Percent (%)	FY16 Totals	FY16 Percent (%)
Appeals/Grievances Cases Resolved/Closed	148	75%	213	83%
Appeals/Grievances Cases Not Yet Resolved/Closed	49	25%	43	17%
Total (Commercial-Appeals/Grievances-Bill of Rights) Contacts/Cases	197	100%	256	100%

Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

Figure 4. Methods of Contacting the Office of Health Care Ombudsman and Bill of Rights (OHCOBR) FY15 and FY16



FY15 Total Sample = 8,438 Cases

FY16 Total Sample = 8,420 Cases

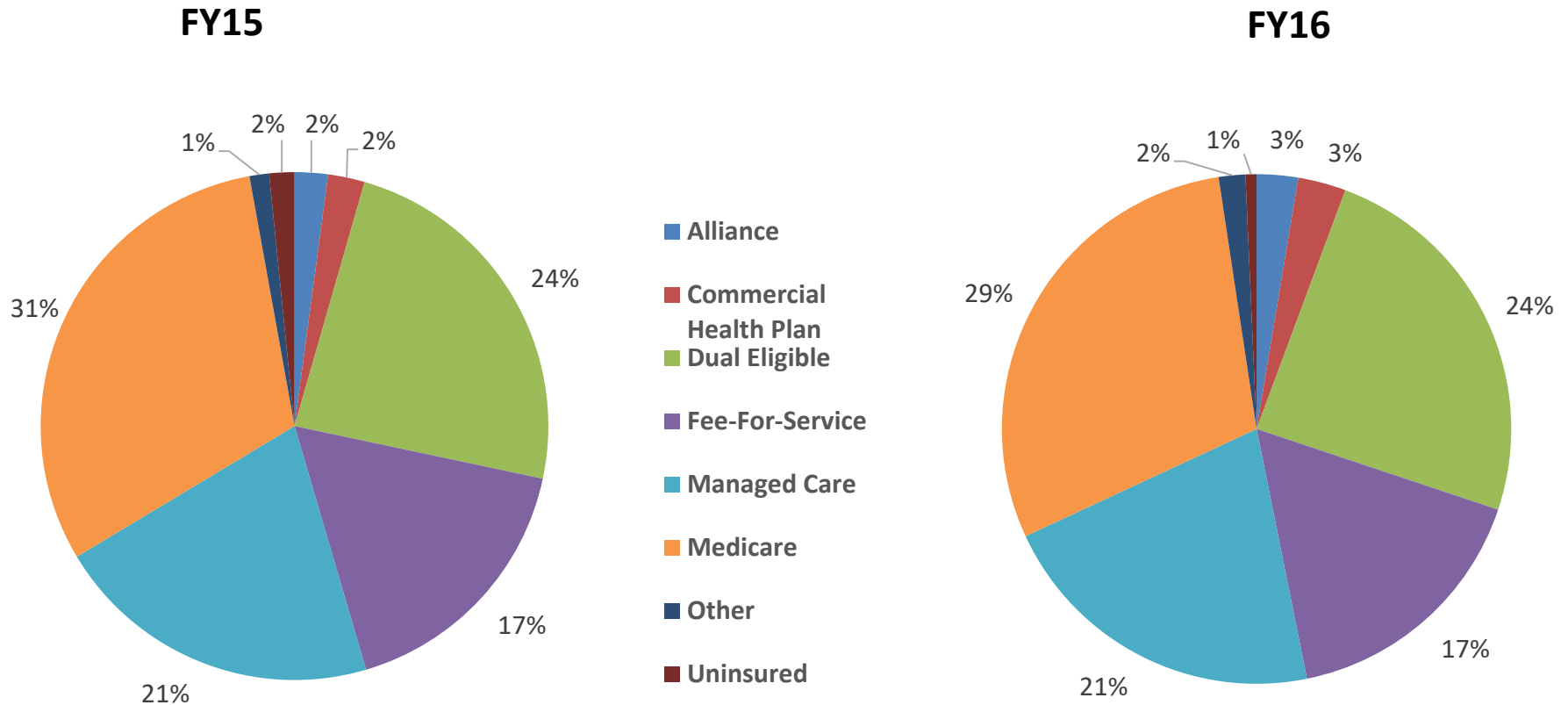
Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

**Table 4. Methods of Contacting the Office of Health Care Ombudsman
and Bill of Rights (OHCOBR)
FY15 and FY16**

Methods of Contacting OHCOBR	FY15 Totals	FY15 Contacts (%)	FY16 Totals	FY16 Contacts (%)
Appointment	16	<1%	10	<1%
Email	88	1%	168	2%
Fax	3	<1%	17	<1%
Letter	200	2%	189	2%
OHCOBR's Website (E-mails)	39	<1%	1	<1%
OHCOBR's Outreach Events	0	0%	2	<1%
Telephone	8,011	95%	7,961	94%
Walk-In	81	1%	72	1%
Total Methods of Contacting OHCOBR	8,438	100%	8,420	100%

Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

Figure 5. Categories of Contacts by Insurance Type FY15 and FY16



FY15 Total Sample = 8,438 Contacts

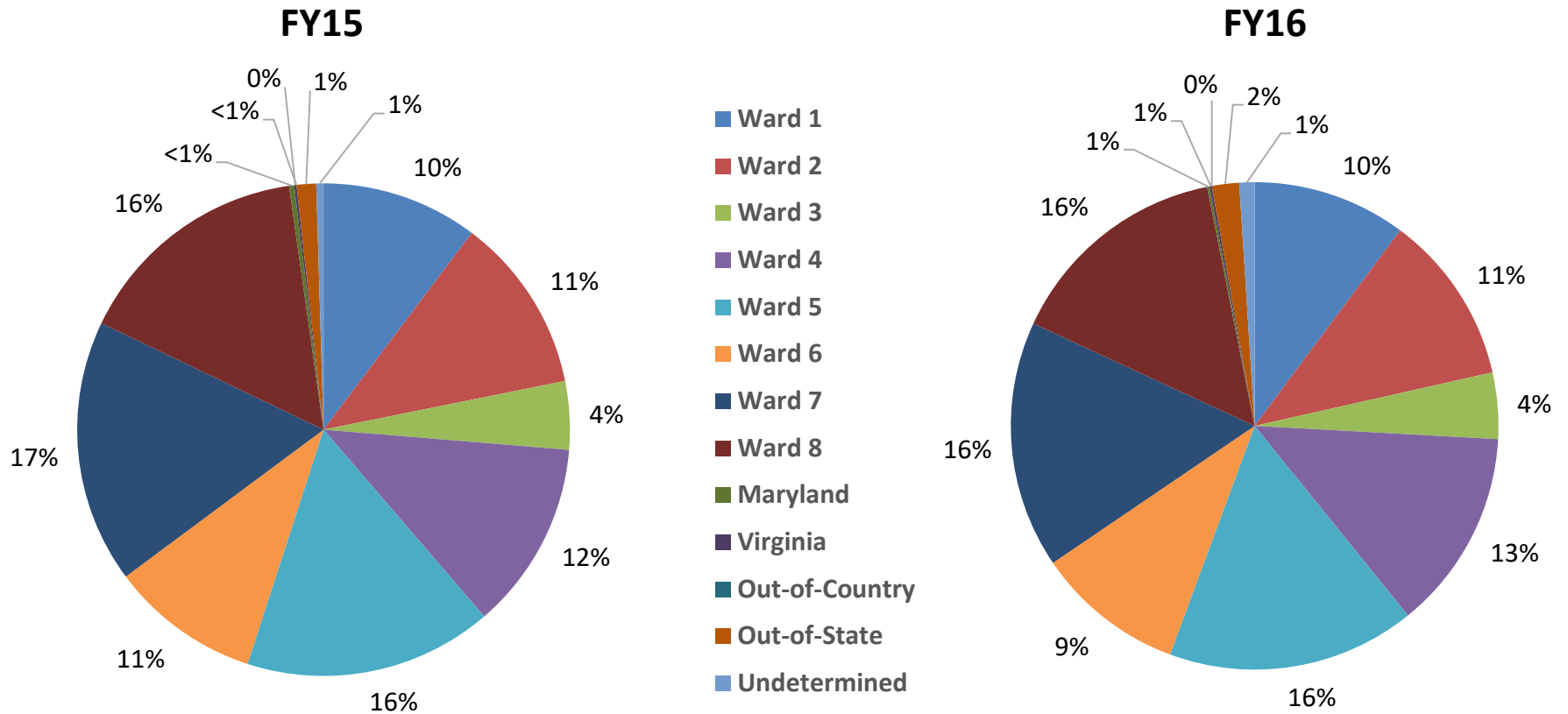
FY16 Total Sample = 8,420 Contacts

Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

**Table 5. Categories of Contacts by Insurance Type
FY15 and FY16**

Categories of Insurance Type	FY15 Totals	FY15 Contacts (%)	FY16 Totals	FY16 Contacts (%)
Alliance (includes Alliance/ADAP)	179	2%	221	3%
Commercial Health Plan (includes Appeals/Grievances-Bill of Rights cases)	197	2%	256	3%
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)	2,014	24%	2,060	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)	1,445	17%	1,406	17%
Medicaid Managed Care (MCO) (includes AFDC-TANF/Childless Adult/Childless Adult-MAGI/CHIP/Katie Beckett/TANF/ Undocumented Alien Child Beneficiaries)	1,768	21%	1,790	21%
Medicare (includes Part A; Part B; Part A/B; Part A/B (QMB) and SLMB Beneficiaries)	2,595	31%	2,486	29%
Other (includes ADAP/Deceased/Limited/Restricted Coverage/Limited/Restricted-Childless Adult-Incarcerated/Out-of-State Medicaid Coverage/Spend-Down/Undetermined)	105	1%	142	2%
Uninsured	135	2%	59	1%
Total Contacts by Insurance Type	8,438	100%	8,420	100%

Figure 6. Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area FY15 and FY16



FY15 Total Sample = 8,438 Contacts

FY16 Total Sample = 8,420 Contacts

**Table 6. Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area
FY15 and FY16**

Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area	FY15 Totals	FY15 Contacts (%)	FY16 Totals	FY16 Contacts (%)
Ward 1	867	10%	857	10%
Ward 2	975	11%	951	11%
Ward 3	378	4%	370	4%
Ward 4	1,045	12%	1,121	13%
Ward 5	1,375	16%	1,386	16%
Ward 6	830	11%	830	10%
Ward 7	1,459	17%	1,381	16%
Ward 8	1,320	16%	1,261	15%
Maryland (Located Within the DC Metropolitan Area)	28	<1%	13	1%
Out-of Country	0	0%	0	0%
Out-of State (States Located Outside of the DC Metropolitan Area)	108	1%	152	2%
Undetermined	40	1%	85	1%
Virginia (Located Outside of the DC Metropolitan Area)	13	<1%	13	1%
Total Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area	8,438	100%	8,420	100%

Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

Types of Issues Encountered

The following issues were encountered by Consumers:

Access/Coverage (includes denials of services):

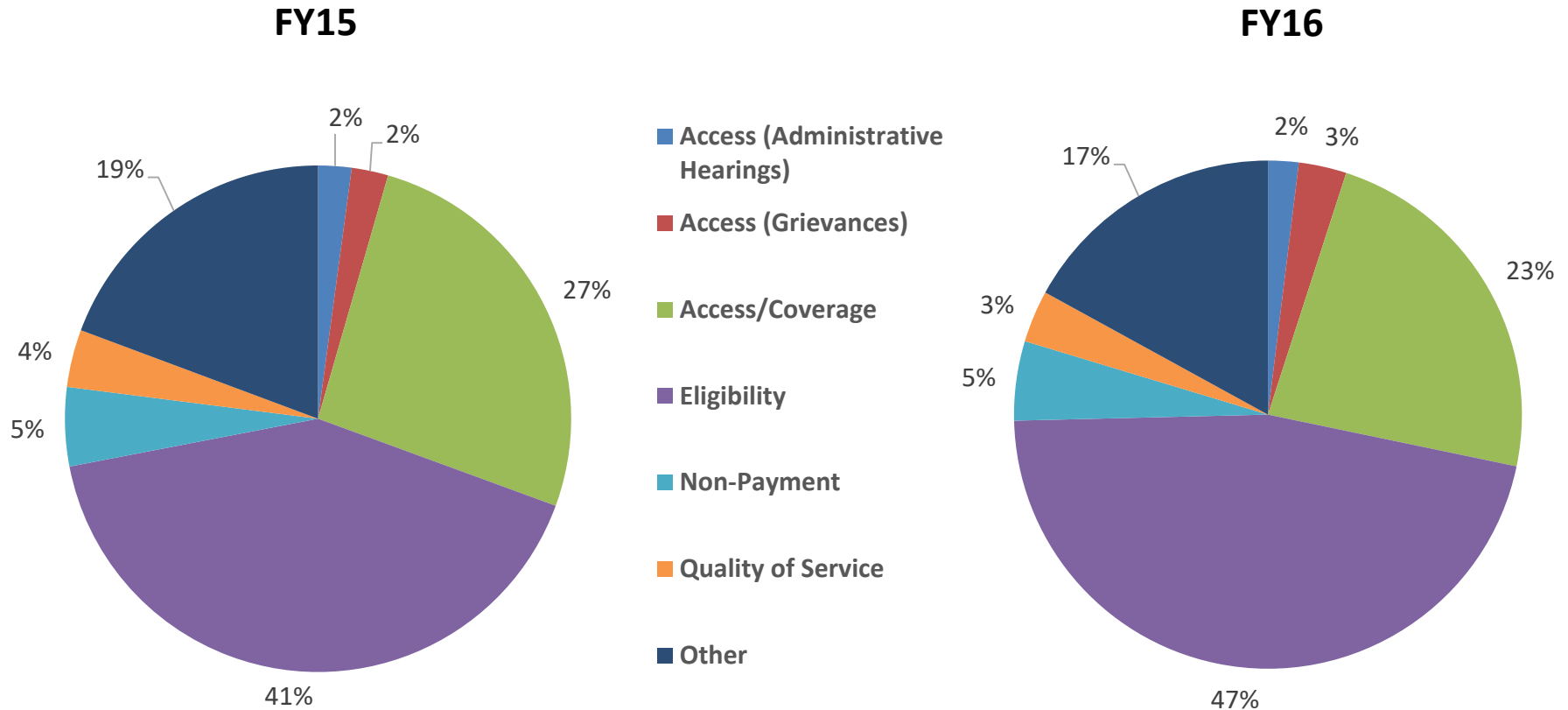
- ❖ **Access to Administrative Hearings:** to include denials of Breast Augmentation/Dental Services/, DME Services/ In-Patient Services (Hospital)/Medicaid Coverage/Medical Assistance/Food Stamps/Optical Services/Prescription Services/Increase in PCA Hours (EPD Waiver)/Home Health Services (EPD Waiver & 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) FY15 and FY16



FY15 Total Sample = 8,438 Contacts

FY16 Total Sample = 8,420 Contacts

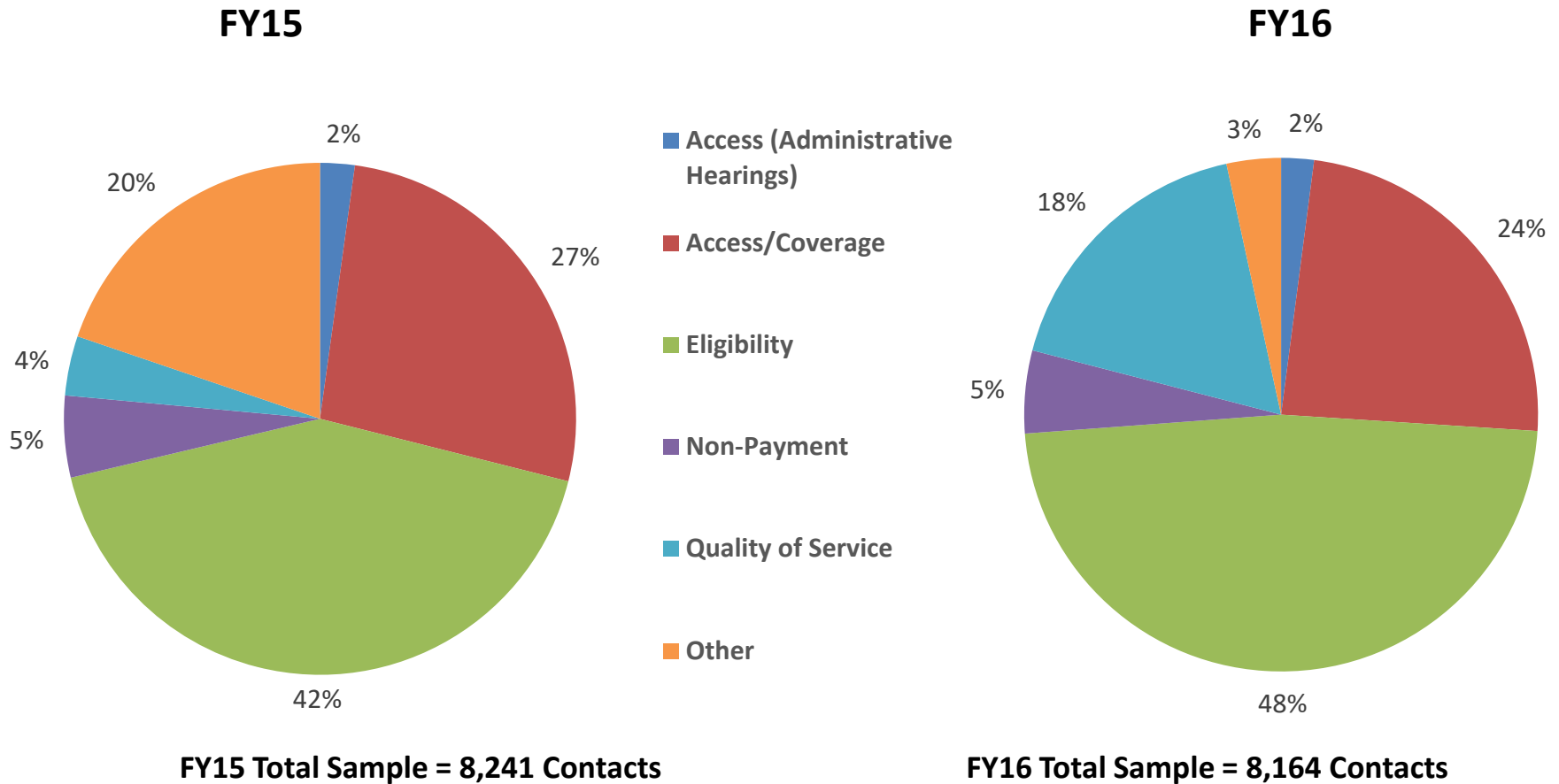
**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction 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 7. Breakdown of Types of Issues Encountered by All Contacts – (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) FY15 and FY16

Types of Issues Encountered by All Contacts (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights)	FY15 Totals	FY15 Contacts (%)	FY16 Totals	FY16 Contacts (%)
Access (Administrative Hearings)	180	2%	164	2%
Access (Commercial-Appeals/Grievances-Bill of Rights)	197	2%	256	3%
Access/Coverage (includes Access to services and Coverage includes denials of services)	2,204	27%	1,960	23%
Eligibility/Recertication (status of eligibility/verification of coverage)	3,492	41%	3,903	47%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	425	5%	425	5%
*Other Issues	1,630	19%	1,433	17%
Quality of Service (includes services rendered by Providers)	310	4%	279	3%
Total Types of Issues (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) Contacts	8,438	100%	8,420	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 FY15 and FY16



***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.

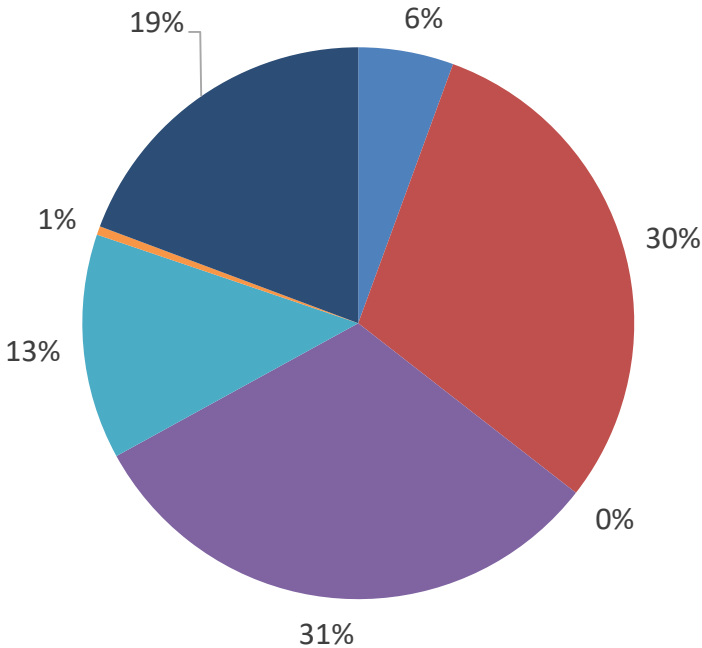
**Table 8. Breakdown of Types of Issues Encountered by
(Non-Commercial) Contacts
FY15 and FY16**

Types of Issues (Non-Commercial) Contacts	FY15 Totals	FY15 Contacts (%)	FY16 Totals	FY16 Contacts (%)
Access (Administrative Hearings)	180	2%	164	2%
Access/Coverage (includes Access to services and Coverage includes denials of services)	2,204	27%	1960	24%
Eligibility/Recertication (status of eligibility/verification of coverage)	3,492	42%	3,903	48%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	425	5%	425	5%
*Other Issues	1,630	20%	1,433	18%
Quality of Service (includes services rendered by Providers)	310	4%	279	3%
Total Types of Issues-(Non-Commercial) Contacts	8,241	100%	8,164	100%

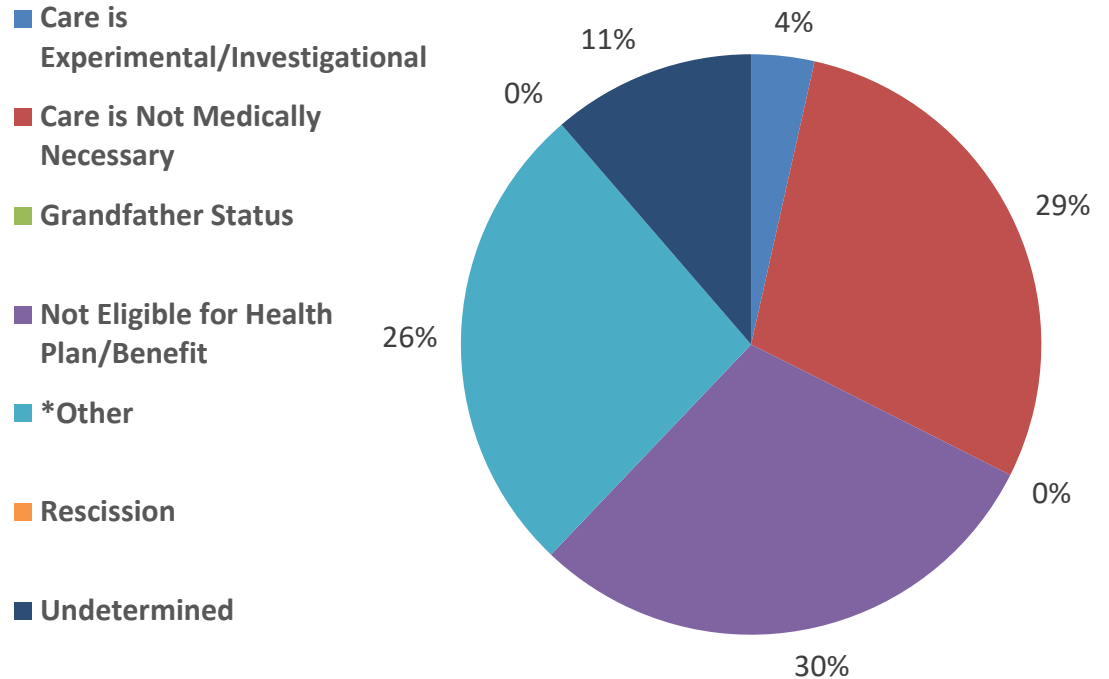
**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction 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 FY15 and FY16

FY15



FY16



FY15 Total Sample = 197 Contacts

FY16 Total Sample = 256 Contacts

***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, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

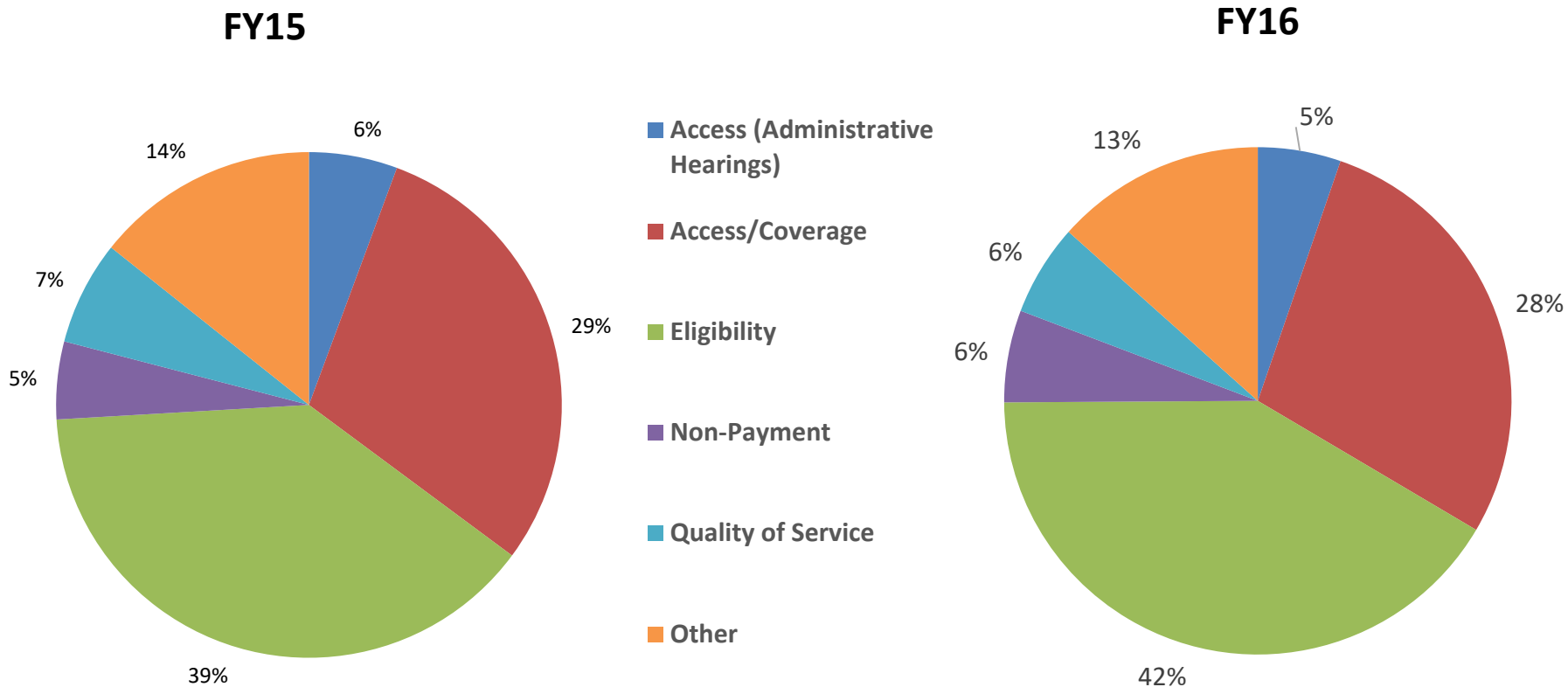
**Table 9. Breakdown of Types of Issues Encountered by
(Commercial-Appeals/Grievances Bill of Rights) Contacts
FY15 and FY16**

Types of Issues (Commercial-Appeals/Grievances-Bill of Rights)	FY15 Totals	FY15 Contacts (%)	FY16 Totals	FY16 Contact (%)
Care Is Experimental/Investigational	11	6%	9	4%
Care Is Not Medically Necessary	59	30%	74	29%
Grandfather Status	0	0%	0	0%
Not Eligible for Health Plan/Benefit	62	31%	76	30%
*Other Issues	26	13%	68	26%
Rescission	1	1%	0	0%
Undetermined	38	19%	29	11%
Total Types of Issues-(Commercial-Appeals/Grievances-Bill of Rights) Contacts	197	100%	256	100%

**Table 9(a). Breakdown of Dispositions of All Cases Among
(Commercial-Appeals/Grievances-Bill of Rights) Contacts
FY15 and FY16**

Dispositions of All Cases Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts	FY15 Totals	FY15 Percent (%)	FY16 Totals	FY16 Percent (%)
Adjusted (case closed)	4	2%	7	3
Administratively Closed (case closed-due to no action)	1	<1%	1	<1%
Consumer Unresponsive (case closed)	2	1%	16	6%
On-Hold in Abeyance (case closed)	0	0%	0	0%
Overtured (case closed-insurance company changed the denial)	33	16%	55	22%
Partial Payment (case closed-insurance company paid a portion of claim)	2	1%	11	4%
Partially Overtured (case closed-insurance company changed a portion of the denial)	3	2%	0	0%
Pending (case is still opened)	49	25%	43	17%
Referred to DISB (case closed-referred to DISB for policy interpretation or benefit issues)	5	3%	7	3%
Referred to DOL (case closed-referred to DOL-self-funded insurance plans)	3	2%	0	0%
Referred to OPM (case closed-referred to OPM-federal employee plans)	4	2%	6	2%
Referred-Out-of-State (case closed-lack of jurisdiction)	2	1%	4	2%
Referred-Other Issues (case closed-issues not listed)	0	0%	7	3%
Rejected (case closed-lack of evidence)	1	<1%	9	4%
Resolved (case closed-resolved without use of full process)	67	34%	26	10%
Reversed (case closed-IRO changed the insurance company's denial)	5	3%	19	7%
Upheld (case closed-IRO agreed with the insurance company's denial)	12	6%	13	5%
Upheld (case closed-insurer upheld denial)	0	0%	18	7%
Untimely Filing (case closed-member filed appeal after the filing date)	2	1%	2	<1%
Withdrawn (case closed-member decided not to proceed with appeal)	1	<1%	10	4%
Write-Off (case closed-provider agreed to write-off balance due)	1	<1%	2	<1%
Total Dispositions of All Cases Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts	197	100%	256	100%

Figure 10. Breakdown of Types of Issues Encountered by Dual Eligible (Medicare and Medicaid) Contacts FY15 and FY16



FY15 Total Sample = 2,014 Contacts

FY16 Total Sample = 2,060 Contacts

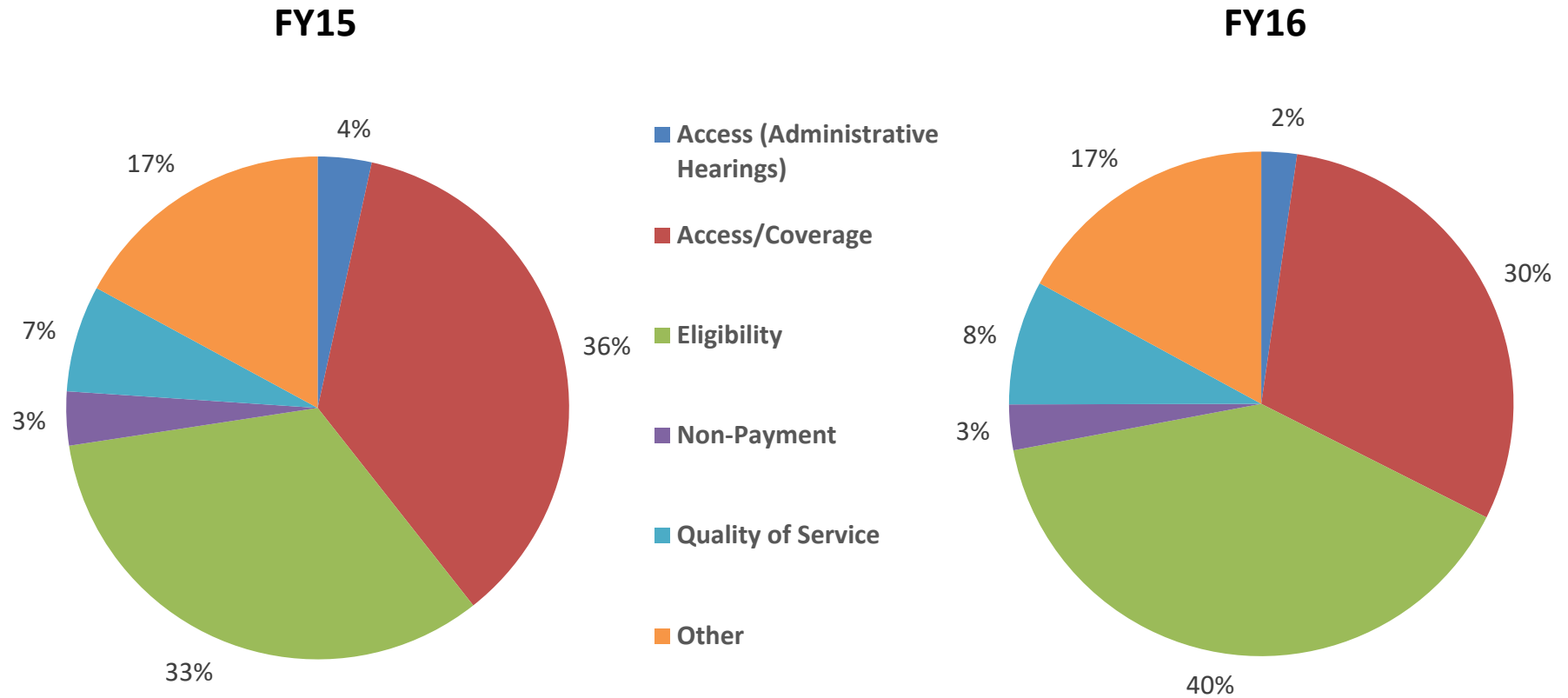
**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction 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 10. Breakdown of Types Issues Encountered by Dual Eligible (Medicare and Medicaid) Contacts FY15 and FY16

Types of Issues Encountered by Dual Eligible (Medicare and Medicaid) Contacts	FY15 Totals	FY15 Contacts (%)	FY16 Totals	FY16 Contacts (%)
Access (Administrative Hearings)	114	6%	109	5%
Access/Coverage (includes Access to services and Coverage includes denials of services)	594	29%	581	28%
Eligibility/Recertication (status of eligibility/verification of coverage)	784	39%	853	42%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	100	5%	121	6%
*Other Issues	288	14%	276	13%
Quality of Service (includes services rendered by Providers)	134	7%	120	6%
Total Types of Issues-Dual Eligible (Medicare and Medicaid) Contacts	2,014	100%	2,060	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 for not to 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 FY15 and FY16



FY15 Total Sample = 1,445 Contacts

FY16 Total Sample = 1,406 Contacts

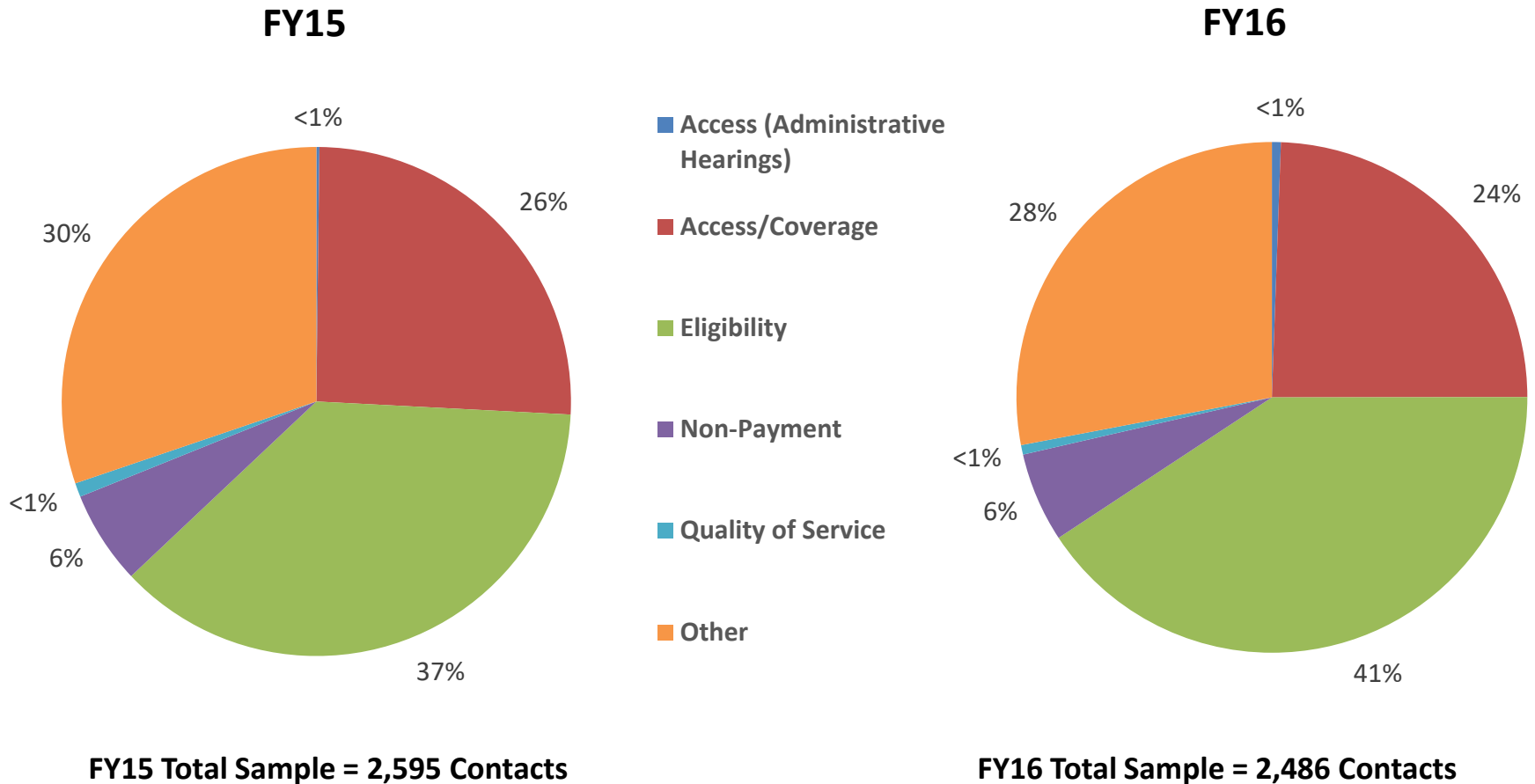
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**Table 11. Breakdown of Types of Issues Encountered by
Medicaid Fee-for-Service (FFS) Contacts
FY15 and FY16**

Types of Issues Encountered by Medicaid Fee-for-Service (FFS) Contacts	FY15 Totals	FY15 Contacts (%)	FY16 Totals	FY16 Contacts (%)
Access (Administrative Hearings)	50	3%	32	2%
Access/Coverage (includes Access to services and Coverage includes denials of services)	519	36%	424	30%
Eligibility/Recertification (status of eligibility/verification of coverage)	480	33%	557	40%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	50	4%	41	3%
*Other Issues	247	17%	240	17%
Quality of Service (includes services rendered by Providers)	99	7%	112	8%
Total Types of Issues-Medicaid Fee-for-Service Contacts	1,445	100%	1,406	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 FY15 and FY16



***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 for not to 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.

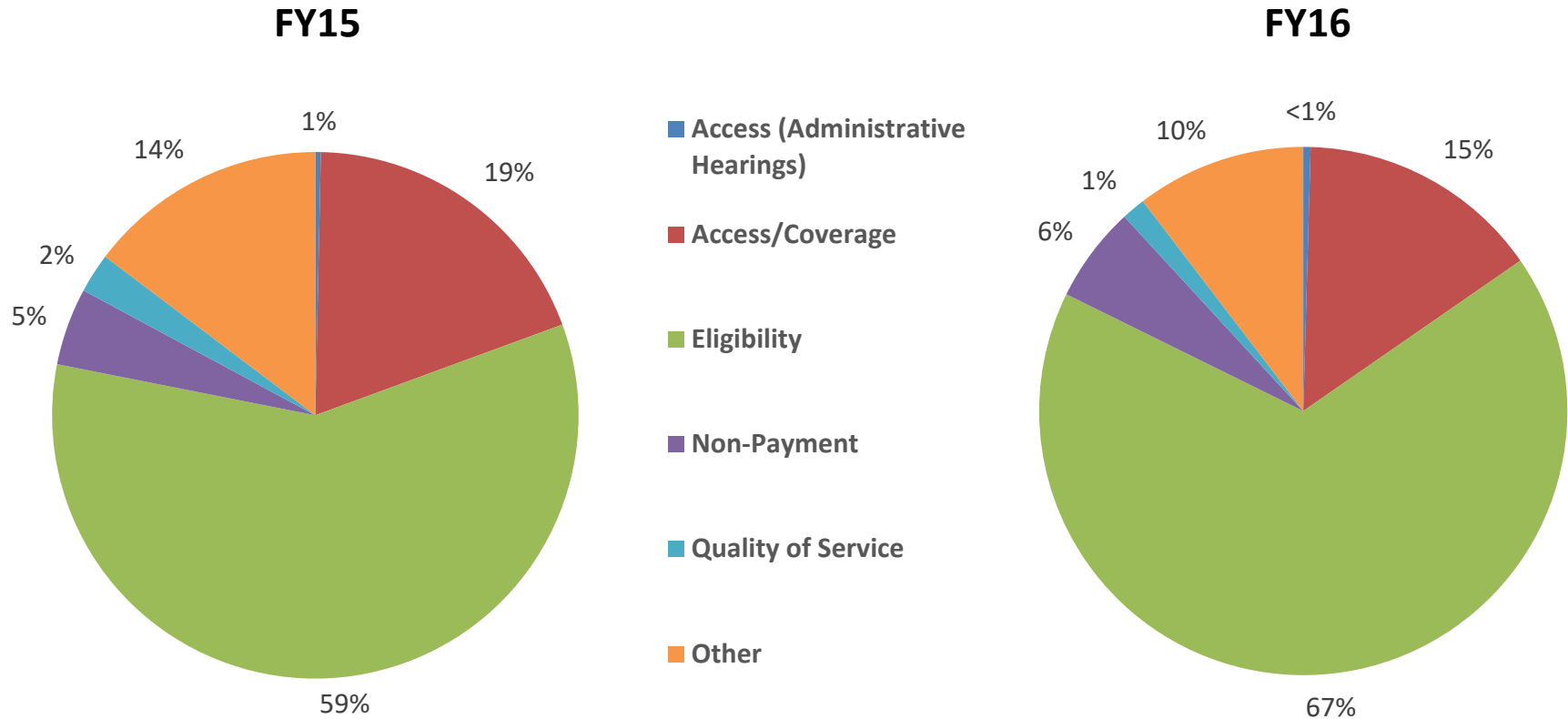
Table 12. Breakdown of Types of Issues Encountered by Medicare Part A; Part B; Part A/B; Part A/B (QMB) Contacts FY15 and FY16

Types of Issues Encountered by Medicare Part A; Part B; Part A/B; Part A/B (QMB) Contacts	FY15 Totals	FY15 Contacts (%)	FY16 Totals	FY16 Contacts (%)
Access (Administrative Hearings)	5	<1%	14	<1%
Access/Coverage (includes Access to services and Coverage includes denials of services)	665	26%	607	24%
Eligibility/Recertification (status of eligibility/verification of coverage)	964	37%	1,013	41%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	154	6%	141	6%
*Other Issues	784	30%	696	28%
Quality of Service (includes services rendered by Providers)	23	<1%	15	<1%
Total Types of Issues-Medicare Part A; Part B; Part A;/B; Part A/B (QMB) Contacts	2,595	100%	2,486	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, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

Figure 13. Breakdown of Types of Issues Encountered by Medicaid Managed Care (MCO) Contacts FY15 and FY16



FY15 Total Sample = 1,768 Contacts

FY16 Total Sample = 1,790 Contacts

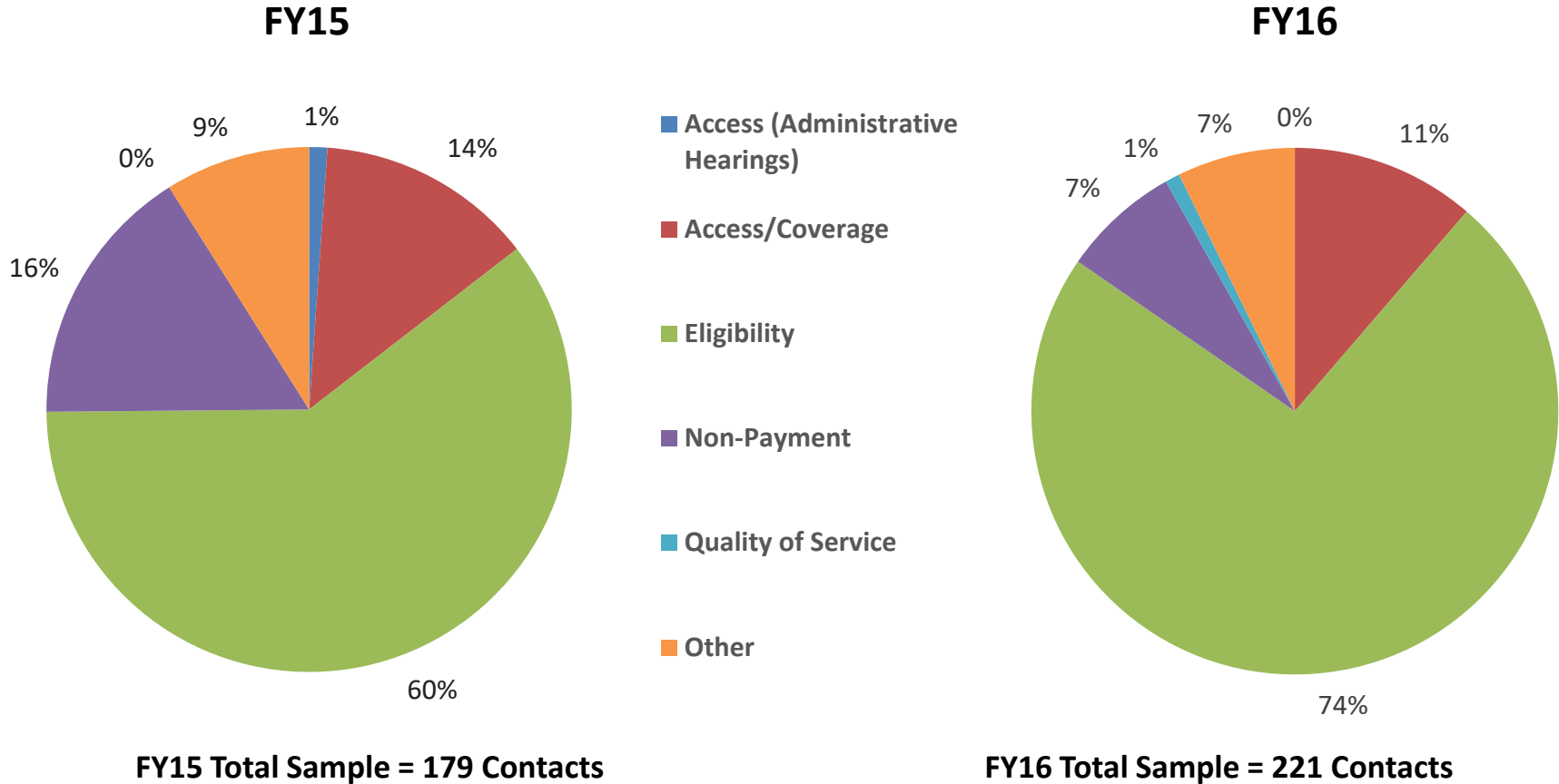
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Table 13. Breakdown of Types Issues Encountered by Medicaid Managed Care (MCO) Contacts FY15 and FY16

Types of Issues Encountered by Medicaid Managed Care (MCO) Contacts	FY15 Totals	FY15 Contacts (%)	FY16 Totals	FY16 Contacts (%)
Access (Administrative Hearings)	6	1%	8	<1%
Access/Coverage (includes Access to services and Coverage includes denials of services)	337	19%	267	15%
Eligibility/Recertication (status of eligibility/verification of coverage)	1,038	59%	1,198	67%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	84	5%	105	6%
*Other Issues	260	14%	186	10%
Quality of Service (includes services rendered by Providers)	43	2%	26	1%
Total Types of Issues-Medicaid Managed Care (MCO) Contacts	1,768	100%	1,790	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 FY15 and FY16



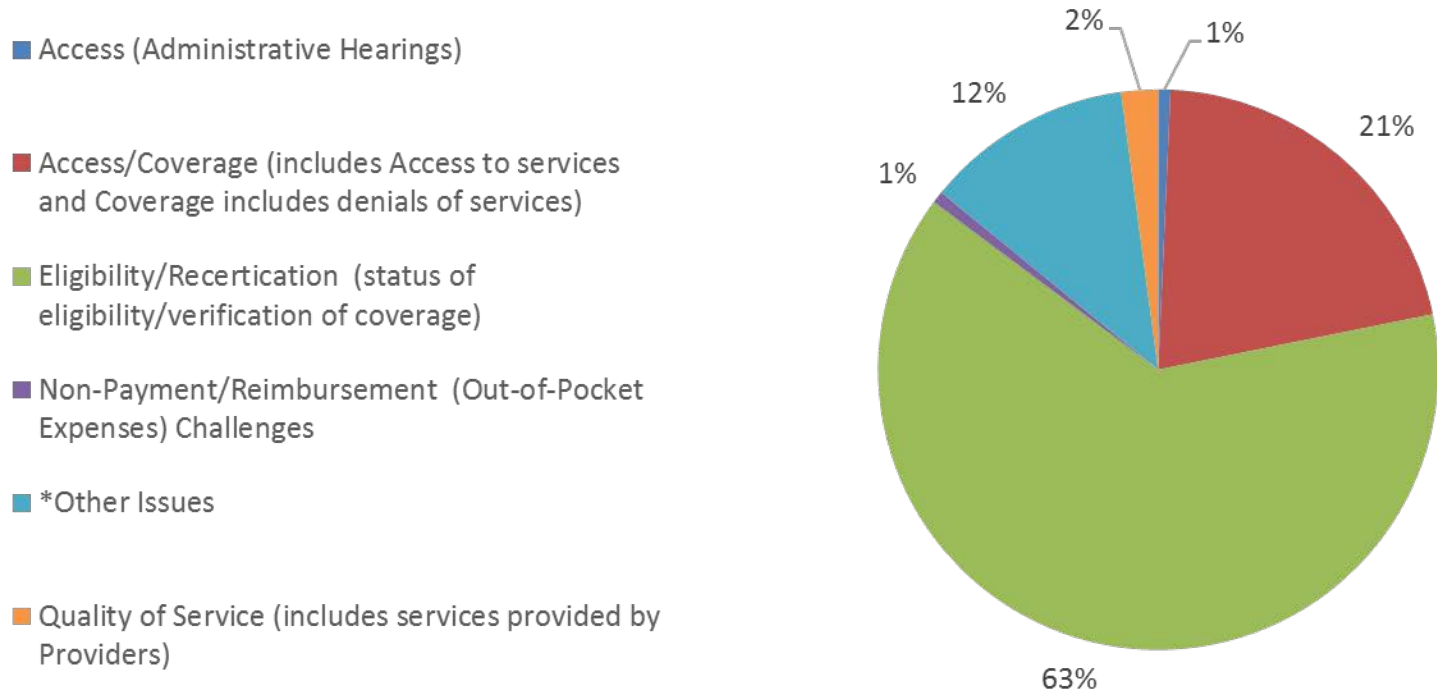
***Other Issues:** Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf 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 14. Breakdown of Types of Issues Encountered by Alliance Contacts
FY15 and FY16**

Types of Issues Encountered by Alliance Contacts	FY15 Totals	FY15 Contacts (%)	FY16 Totals	FY16 Contacts (%)
Access (Administrative Hearings)	2	1%	0	0%
Access/Coverage (includes Access to services and Coverage includes denials of services)	24	14%	25	11%
Eligibility/Recertication (status of eligibility/verification of coverage)	108	60%	162	74%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	29	16%	16	7%
*Other Issues	16	9%	16	7%
Quality of Service (includes services provided by Providers)	0	0%	2	1%
Total Types of Issues-Alliance Contacts	179	100%	221	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 Other Contacts (ADAP/Deceased/Limited/Restricted Coverage to include Spend-Down/Out-of-State Insurance/Coverage Undetermined) FY15 and FY16



•FY15 Total Sample = **DID NOT TRACK**

FY16 Total Sample = 142 Contacts

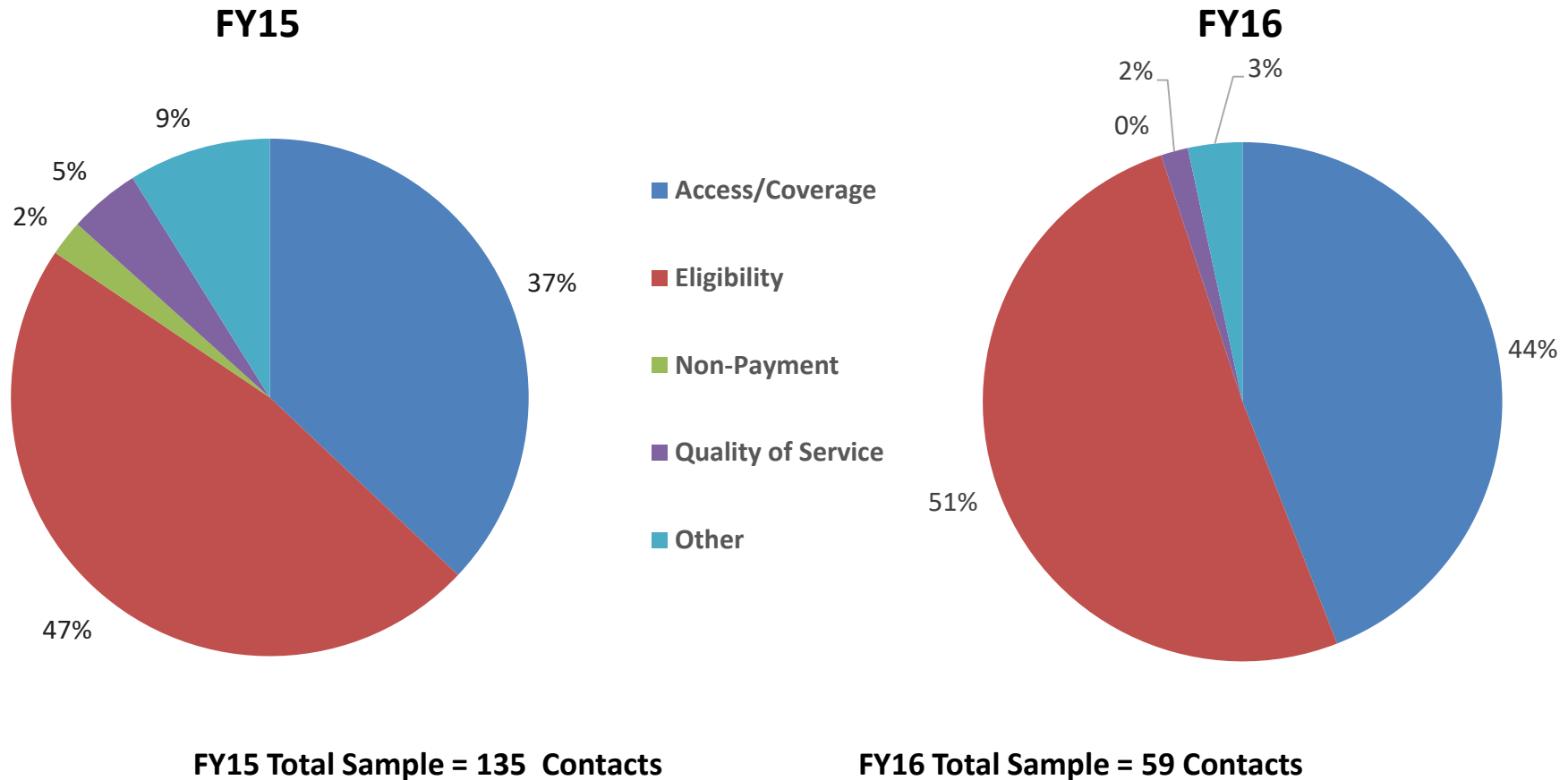
—*Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction 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 Types of Issues Encountered by Other Contacts (ADAP/Deceased/Limited/Restricted Coverage to include Spend-Down/Out-of-State Insurance/Coverage Undetermined) FY15 and FY16

Types of Issues Encountered by Other Contacts	FY15 Totals	FY15 Contacts (%)	FY16 Totals	FY16 Contacts (%)
Access (Administrative Hearings)	DID NOT TRACK	DID NOT TRACK	1	1%
Access/Coverage (includes Access to services and Coverage includes denials of services)	DID NOT TRACK	DID NOT TRACK	30	21%
Eligibility/Recertification (status of eligibility/verification of coverage)	DID NOT TRACK	DID NOT TRACK	90	63%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	DID NOT TRACK	DID NOT TRACK	1	1%
*Other Issues	DID NOT TRACK	DID NOT TRACK	17	12%
Quality of Service (includes services provided by Providers)	DID NOT TRACK	DID NOT TRACK	3	2%
Total Types of Issues-Alliance Contacts	DID NOT TRACK	DID NOT TRACK	142	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 16. Breakdown of Types of Issues Encountered by Uninsured Contacts FY15 and FY16



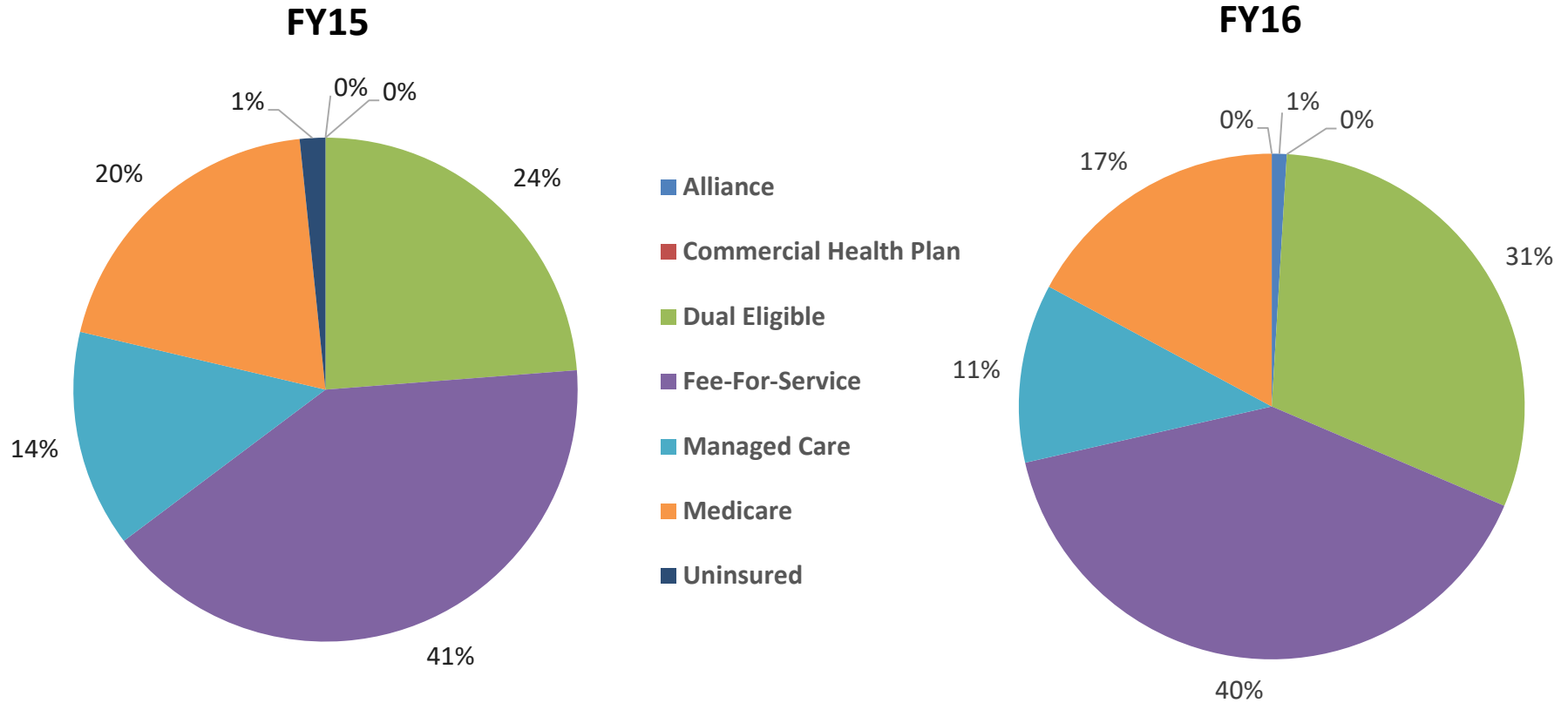
***Other Issues:** Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF 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 16. Breakdown of Issues Encountered by Uninsured Contacts
FY15 and FY16**

Types of Issues Encountered by Uninsured Contacts	FY15 Totals	FY15 Contacts (%)	FY16 Totals	FY16 Contacts (%)
Access/Coverage (includes access to services and Coverage includes denials of services)	50	37%	26	44%
Eligibility/Recertication (status of eligibility/verification of coverage)	64	47%	30	51%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	3	2%	0	0%
*Other Issues	12	9%	2	3%
Quality of Service (includes services rendered by Providers)	6	5%	1	2%
Total Types of Issues-Uninsured Contacts	135	100%	59	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 17. Breakdown of Transportation Contacts by Insurance Type FY15 and FY16



FY15 Total Sample = 122 Contacts

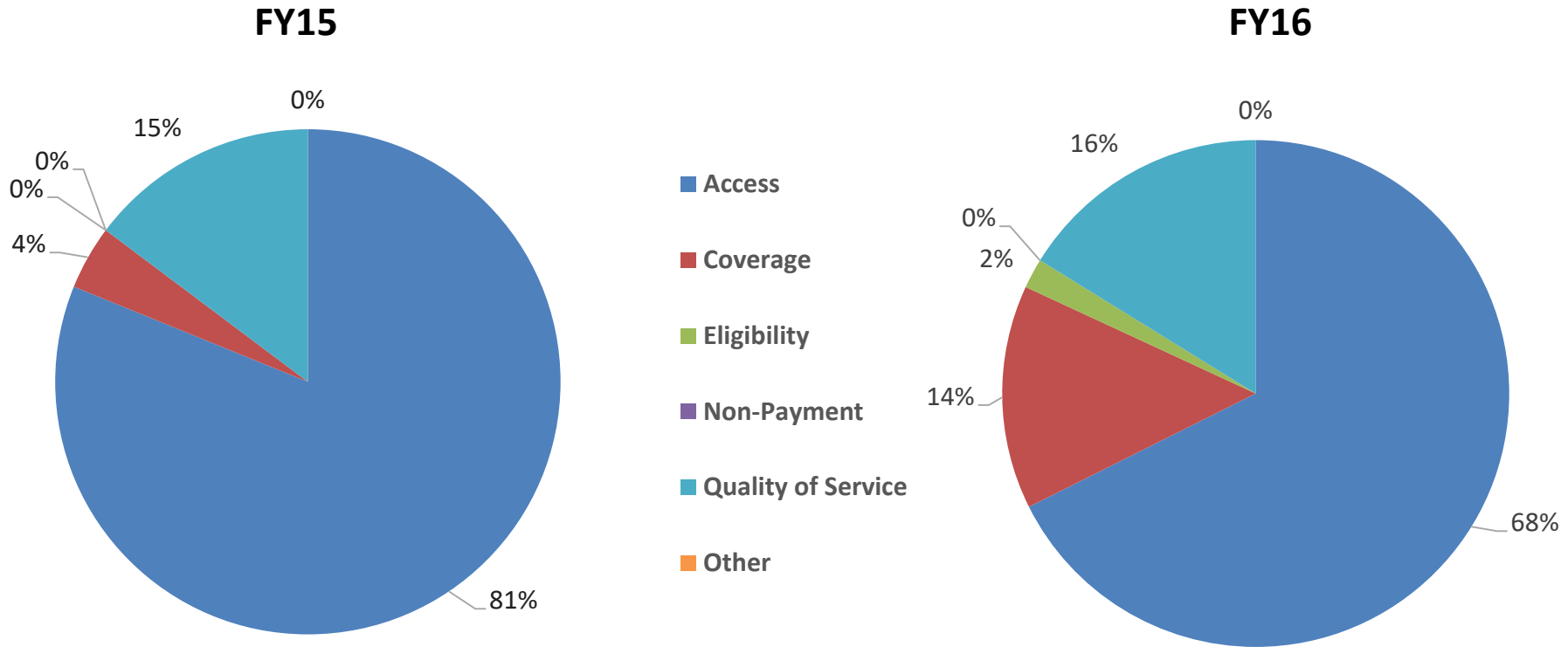
FY16 Total Sample = 105 Contacts

Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

**Table 17. Breakdown of Transportation Contacts by Insurance Type
FY15 and FY16**

Transportation Contacts by Insurance Type	FY15 Totals	FY15 Contacts (%)	FY16 Totals	FY16 Contacts (%)
Alliance (includes Alliance/ADAP)	0	0%	1	1%
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)	29	24%	32	31%
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)	50	41%	42	40%
Medicaid Managed Care (MCO) (includes AFDC-TANF/Childless Adult/Childless Adult-MAGI/CHIP/Katie Beckett/TANF/ Undocumented Alien Child Beneficiaries)	17	14%	12	11%
Medicare (includes Part A; Part B; Part A/B; Part A/B (QMB) and SLMB Beneficiaries)	24	20%	18	17%
Uninsured	2	1%	0	0%
Total Contacts by Insurance Type	122	100%	105	100%

Figure 18. Breakdown of Types of Issues Encountered by Transportation Contacts FY15 and FY16



FY15 Total Sample = 122 Contacts

FY16 Total Sample = 105 Contacts

***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; DHCFLetters-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 18. Breakdown of Types of Issues Encountered by
Transportation Contacts
FY15 and FY16**

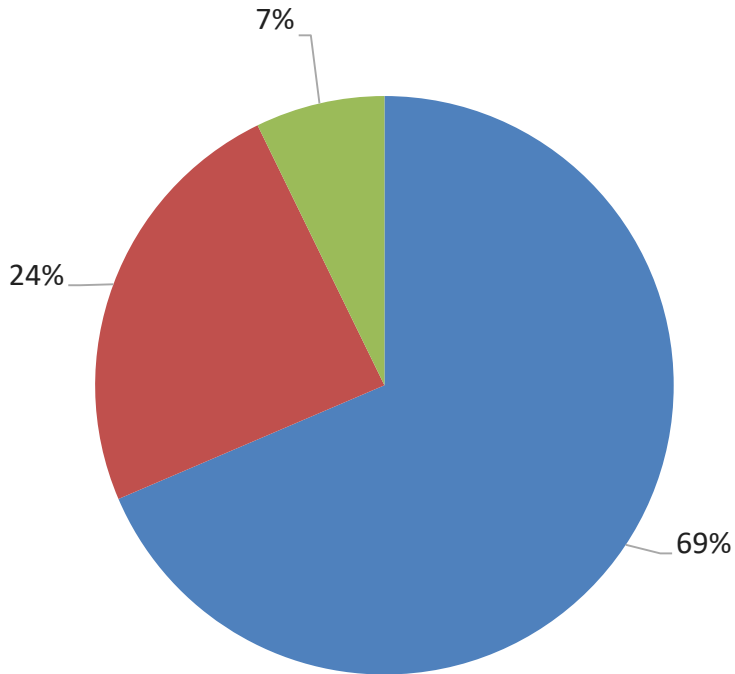
Types of Issues Encountered by Transportation Contacts	FY15 Totals	FY15 Contacts (%)	FY16 Totals	FY16 Contacts (%)
Access (includes prior authorization requests)	99	81%	71	68%
Coverage (includes denials of service)	5	4%	15	14%
Eligibility/Recertication (status of eligibility/verification of coverage)	0	0%	2	2%
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)	18	15%	17	16%
Total Types of Issues-Transportation Contacts	122	100%	105	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.*

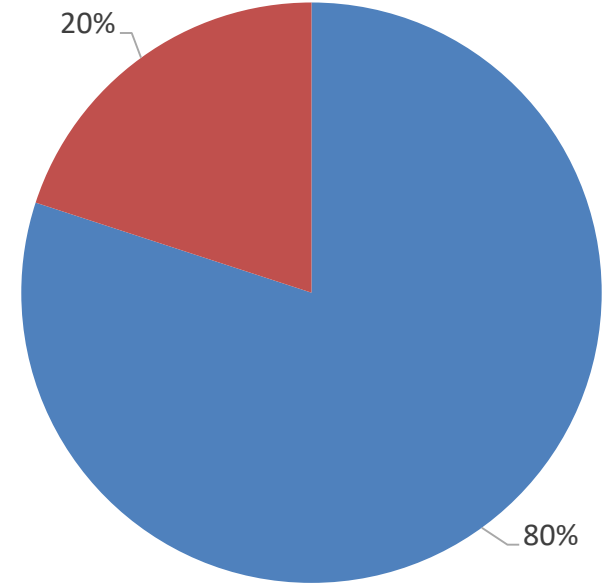
Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

Figure 19. Breakdown of EPD Waiver Contacts by Insurance Type FY15 and FY16

FY15



FY16



■ Dual Eligible
■ Fee-For-Service
■ Other

FY15 Total Sample = 595 Contacts

FY16 Total Sample = 861 Contacts

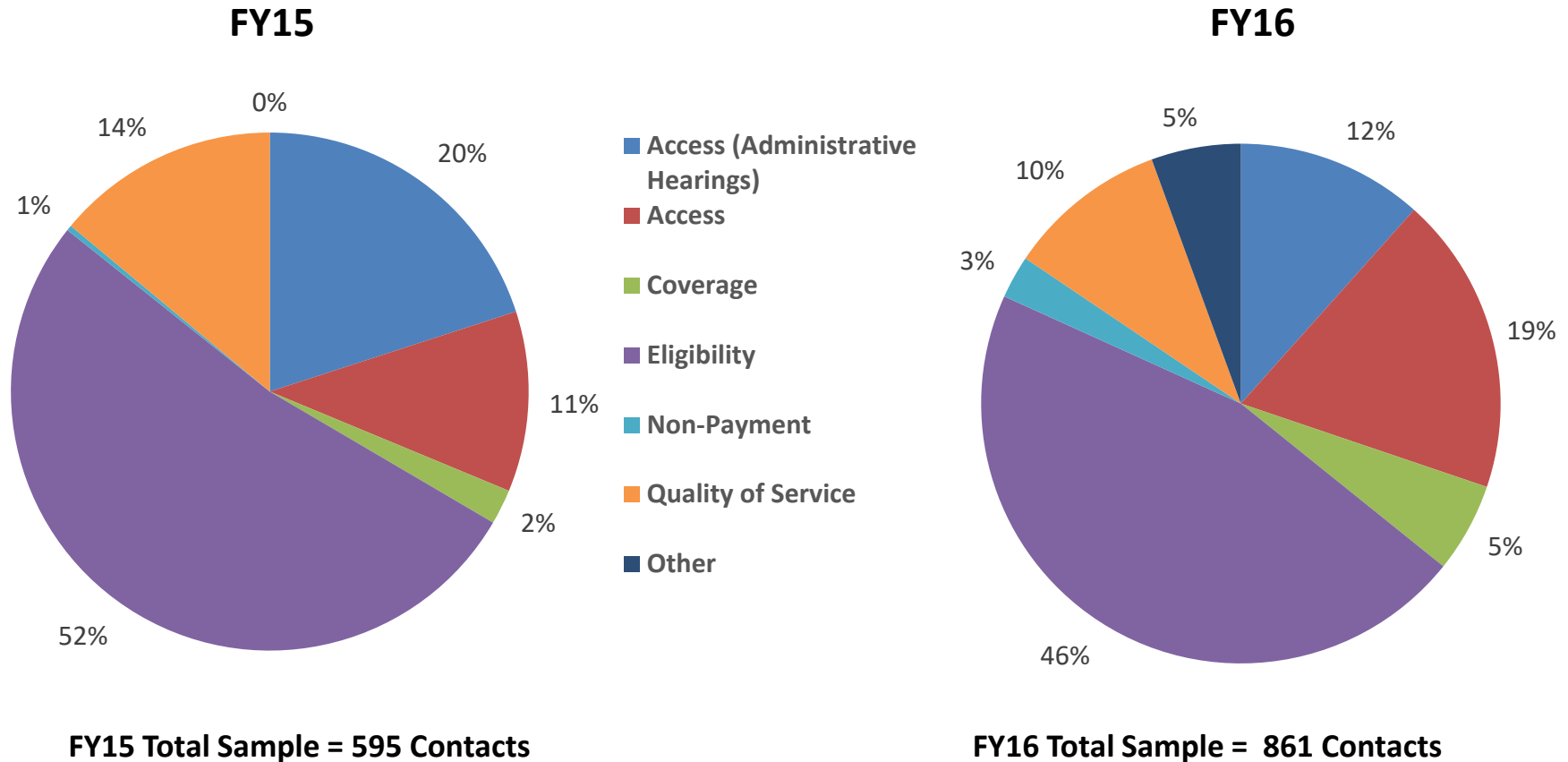
Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

**Table 19. Breakdown of EPD Waiver Contacts by Insurance Type
FY15 and FY16**

EPD Waiver Contacts by Insurance Type	FY15 Totals	FY15 Contacts (%)	FY16 Totals	FY16 Contacts (%)
Dual Eligible (Medicare/Medicaid) – (includes Dual Eligible-EPD Waiver)	408	69%	689	80%
Fee-For-Service (Medicaid) – (includes FFS/FFS-EPD Waiver)	144	24%	172	20%
Other (Medicare Part A/B/MCO/Undetermined/Uninsured/Limited/Restricted Coverage)	43	7%	0	0%
Total EPD Waiver Contacts by Insurance Type	595	100%	861	100%

Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

Figure 20. Breakdown of Types of Issues Encountered by EPD Waiver Contacts FY15 and FY16



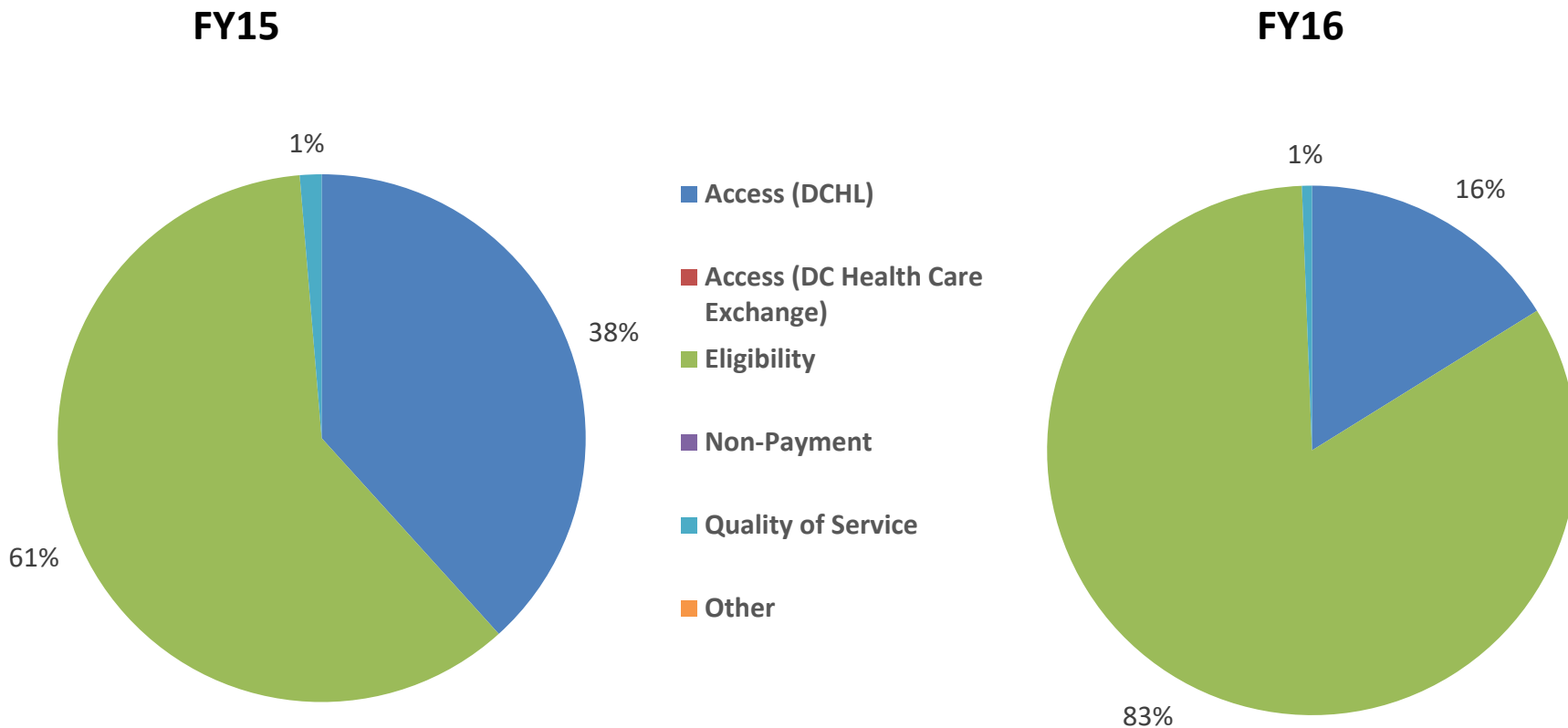
***Other Issues:** Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF 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 for 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
EPD Waiver Contacts
FY15 and FY16**

Types of Issues Encountered by EPD Waiver Contacts	FY15 Totals	FY15 Contacts (%)	FY16 Totals	FY16 Contacts (%)
Access (Administrative Hearings)	119	20%	100	12%
Access (includes Access to services to include Prior Authorization requests)	67	11%	160	19%
Coverage (denials of services)	13	2%	48	5%
Eligibility/Recertification (status of eligibility/verification of coverage)	311	52%	396	46%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	2	1%	23	3%
*Other Issues	0	0%	48	5%
Quality of Service (services rendered by Providers)	83	14%	86	10%
Total Types of Issues-EPD Waiver Contacts	595	100%	861	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 21. Breakdown of Types of Issues Encountered by DC Health Link and Health Exchange Marketplace Contacts FY15 and FY16



FY15 Total Sample = 376 Contacts

FY16 Total Sample = 328 Contacts

**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; DHC 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.*

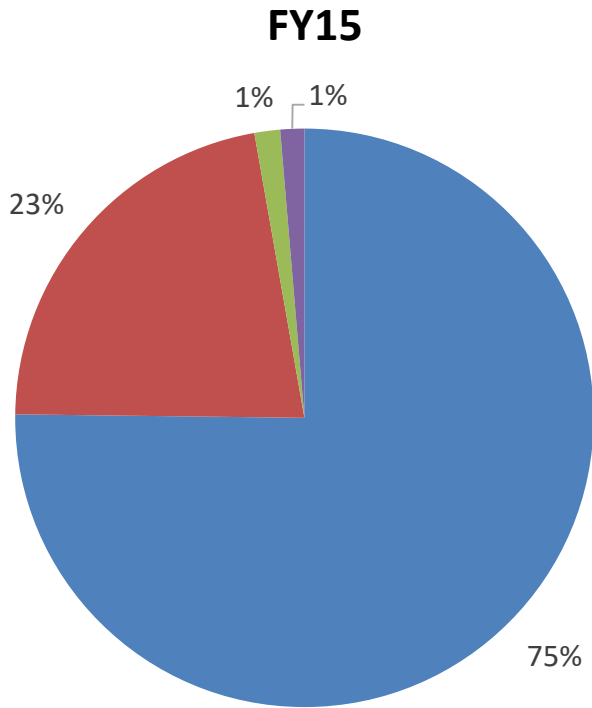
Table 21. Breakdown of Types of Issues Encountered by DC Health Link and Health Care Exchange Marketplace Contacts FY15 and FY16

Types of Issues Encountered by DC Health Link and Health Care Exchange Marketplace Contacts	FY15 Totals	FY15 Contacts (%)	FY16 Totals	FY16 Contacts (%)
Access (includes applications for insurance coverage/applications for retroactive Medicaid/recertification application/1095-A Forms/1095-B Correction Request Forms)	144	38%	53	16%
Access (Health Care Exchange Marketplace Website)	0	0%	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)	227	61%	273	83%
Non-Payment/Non-Reimbursement (Out-of-Pocket Expenses) Challenges (includes members' paid premiums to insurers)	0	0%	0	0%
*Other Issues	0	0%	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)	5	1%	2	1%
Total Types of Issues-DC Health Link/Health Care Exchange Marketplace Contacts	376	100	328	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 lens; 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.

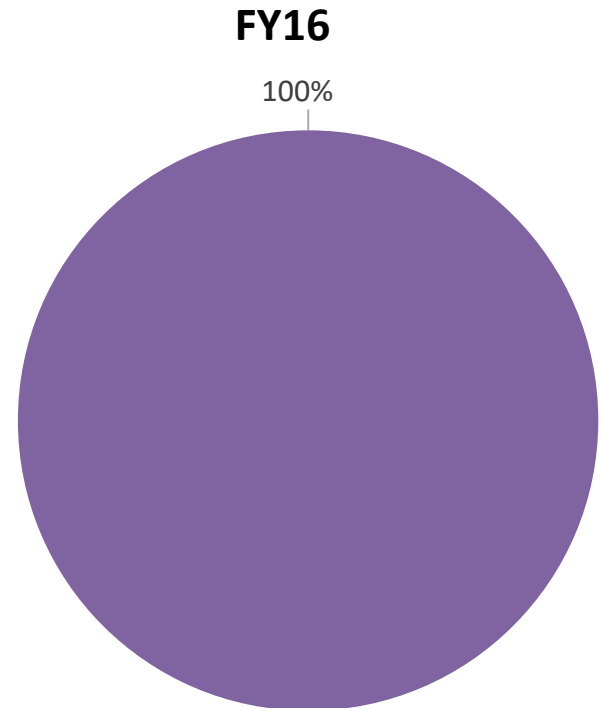
Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

**Figure 22. Dollar Amount of Savings on Behalf of (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) Contacts
FY15 and FY16**



FY15 Total Sample = \$627,681.41

- Commercial
- Medicaid
- QMB
- Medicare



FY16 Total Sample = \$715,553.11

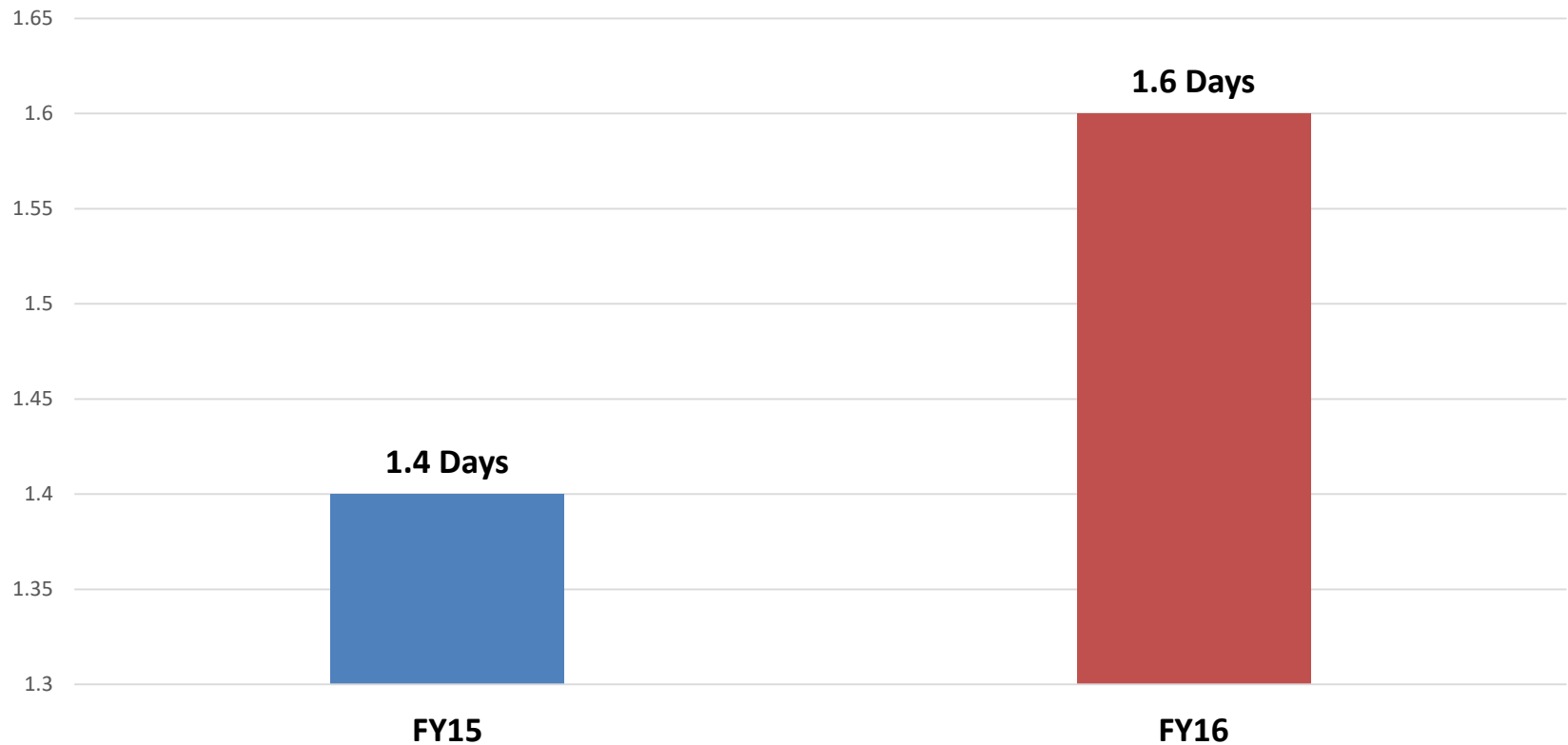
Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

Table 22. Dollar Amount of Savings on Behalf of (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) Contacts FY15 and FY16

Dollar Amount of Savings on Behalf of (Non-Commercial); (Commercial-Appeals/Grievances-Bill-Rights) Contacts	FY15 Totals	FY15 Percent (%)	FY16 Totals	FY16 Percent (%)
Commercial (to include Appeals/Grievances-Bill of Rights)	471,963.02	75%	\$715,553.11	100%
Medicaid (to include Fee-For-Service/MCO/Alliance Beneficiaries) – (Non-payments of beneficiaries’ medical bills)	138,308.79	23%	DID NOT TRACK	DID NOT TRACK
Qualified Medicare Beneficiaries (QMB) - (Co-Pays removed from beneficiaries’ accounts)	8,995.70	1%	DID NOT TRACK	DID NOT TRACK
Medicare (to Include Part B/Dual Eligible) – (Reimbursements for non-payments of beneficiaries’ Part B Premiums)	8,413.90	1%	DID NOT TRACK	DID NOT TRACK
Total Dollar Amount of Savings on Behalf of All Consumers	\$627,681.41	100%	\$715,553.11	100%

Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

**Figure 23. Average Number of Days to Resolve/Close
(Non-Commercial) Cases
FY15 and FY16**



FY15 Total Cases Resolved/Closed = 7,960 Cases

FY16 Total Cases Resolved/Closed = 7,901 Cases

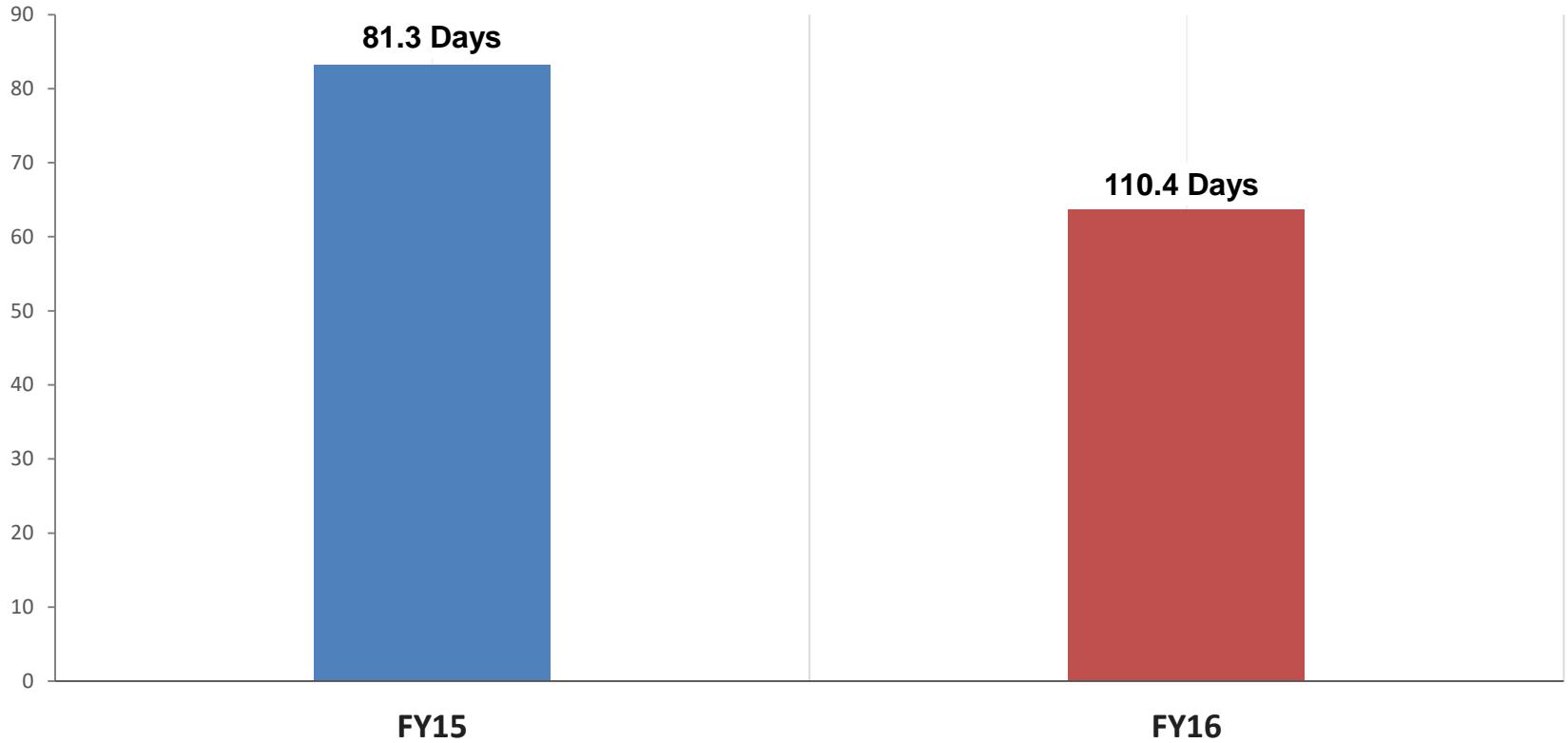
Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

**Table 23. Average Number of Days to Resolve/Close
(Non-Commercial) Cases
FY15 and FY16**

FY15 Average Number of Days to Resolve/Close (Non-Commercial) Cases	FY15 Total	FY16 Average Number of Days to Resolve/Close (Non-Commercial) Cases	FY16 Total
Average Number of Days It Took to Resolve/Close (7,960) (Non-Commercial) cases	1.4 days	Average Number of Days It Took to Resolve/Close (7,901) (Non-Commercial) cases	1.6 days
Note: Of the (8,241) (Non-Commercial) cases opened, the OHCOBR resolved/closed (7,350) cases on same day that cases were opened		Note: Of the (8,164) (Non-Commercial) cases opened, the OHCOBR resolved/closed (6,999) cases on same day that cases were opened	

Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

**Figure 24. Average Number of Days to Resolve/Close
(Commercial-Appeals/Grievances-Bill of Rights) Cases
FY15 and FY16**



FY15 Total Cases Resolved/Closed = 148 Cases

FY16 Total Cases Resolved/Closed = 213 Cases

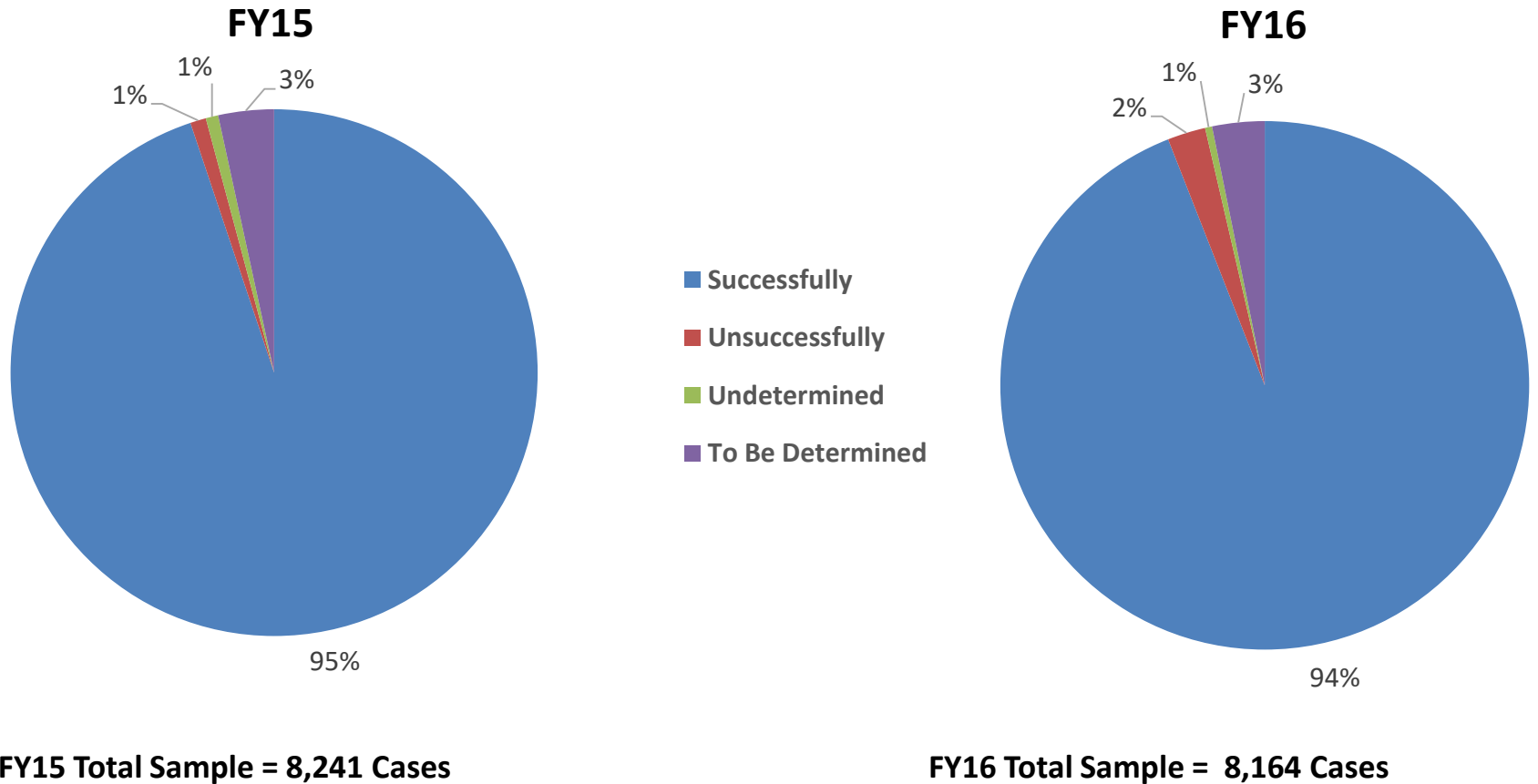
Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

**Table 24. Average Number of Days to Resolve/Close
(Commercial-Appeals/Grievances-Bill of Rights) Cases
FY15 and FY16**

FY15 Average Number of Days to Resolve/Close (Commercial-Appeals/Grievances- Bill of Rights) Cases	FY15 Total	FY16 Average Number of Days to Resolve/Close (Commercial-Appeals/Grievances- Bill of Rights) Cases	FY16 Total
Average Number of Days It Took to Resolve/Close (148) (Commercial- Appeals/Grievances-Bill of Rights) Cases	81.3 days	Average Number of Days It Took to Resolve/Close (213) Commercial- Appeals/Grievances-Bill of Rights) Cases	110.4 days
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		Note: Of the (256) (Commercial- Appeals/Grievances-Bill of Rights) cases opened, the OHCOBR resolved/closed (8) cases on same day that cases were opened	

Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

Figure 25. Breakdown of Number and Percentage of How (Non-Commercial) Cases Were Resolved/Closed and Cases Not Resolved/Closed by the OHCOBR FY15 and FY16



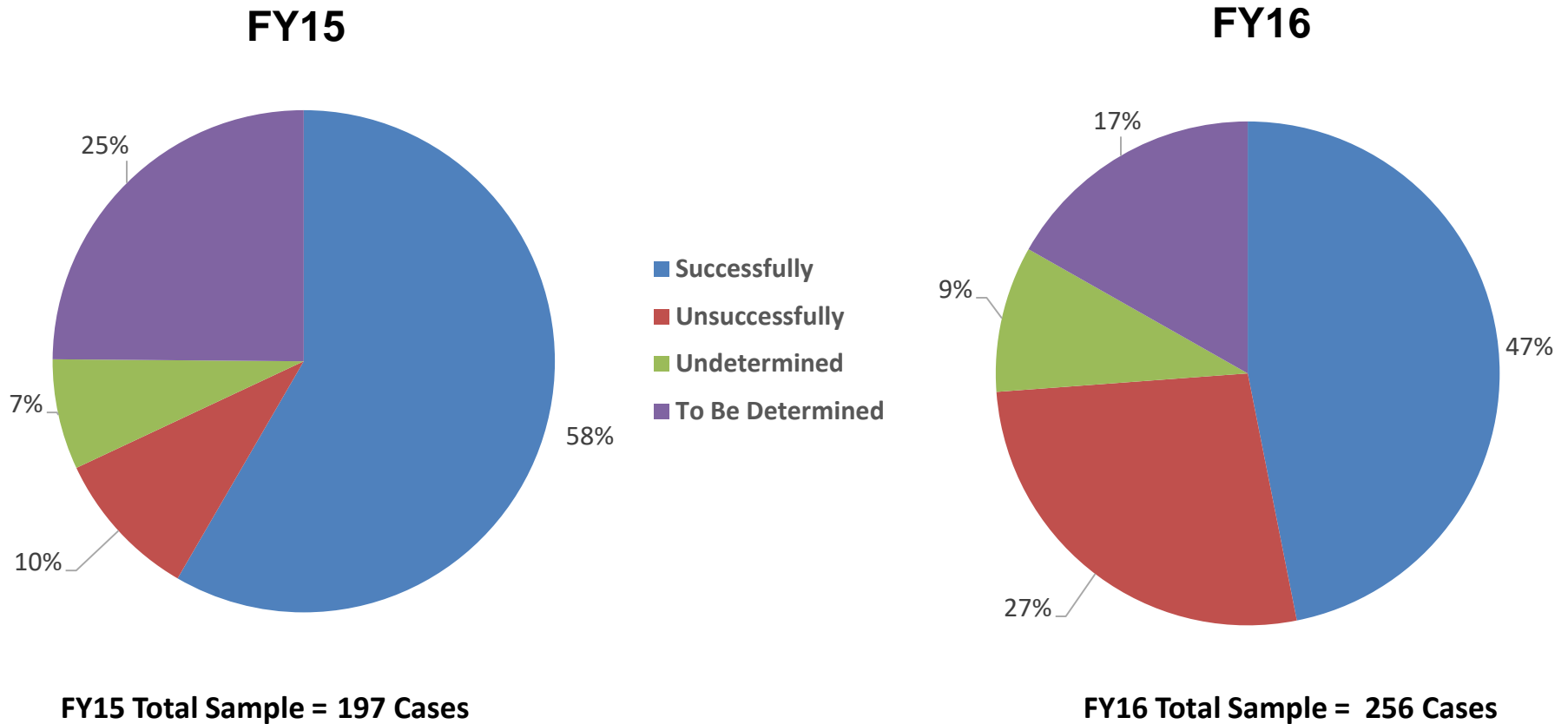
Source data captured between October 1, 2014 through September 30, 2015 through October 1, 2015 through September 30, 2016

**Table 25. Breakdown of Number and Percentage of How
(Non-Commercial) Cases Were Resolved/Closed and
Cases Not Resolved/Closed by the OHCOBR
FY15 and FY16**

How (Non-Commercial) Cases were Resolved/Closed and Cases Not Resolved/ Closed	FY15 Totals	FY15 Percent (%)	FY16 Totals	FY16 Percent (%)
Closure of Cases - Successfully	7,814	95%	7,676	94%
Closure of Cases -Unsuccessfully	80	1%	190	2%
Closure of Cases (Referred) -Undetermined	66	1%	35	1%
Opened Cases (Pending) - To Be Determined	281	3%	263	3%
Total Number and Percentage of (Non- Commercial) Cases	8,241	100%	8,164	100%

Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

Figure 26. 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 FY15 and FY16



Source data captured between October 1, 2014 through September 30, 2015 through October 1, 2015 through September 30, 2016

**Table 26. 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
FY15 and FY16**

How (Commercial-Appeals/Grievances-Bill of Rights) Cases were Resolved/Closed and Cases Not Resolved/Closed	FY15 Totals	FY15 Percent (%)	FY16 Totals	FY16 Percent (%)
Closure of Cases - Successfully	115	58%	120	47%
Closure of Cases -Unsuccessfully	19	10%	69	27%
Closure of Cases (Referred) - Undetermined	14	7%	24	9%
Opened Cases (Pending) - To Be Determined	49	25%	43	17%
Total Number and Percentage of (Commercial-Appeals/Grievances-Bill of Rights) Cases	197	100%	256	100%

Source data captured between October 1, 2014 through September 30, 2015 and October 1, 2015 through September 30, 2016

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