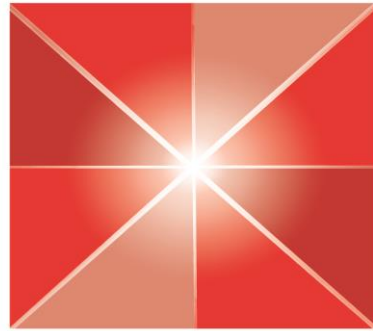


**Office of Health Care Ombudsman and Bill of Rights (OHCOCR)**  
**FY2019 Summary of Cases**  
**October 1, 2018 through September 30, 2019**

DISTRICT OF  
COLUMBIA



HEALTH CARE  
OMBUDSMAN

***“The Knowledge to Guide You”***

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

## Highlights - FY2019 Contact Summary

- In FY2019, the Office of Health Care Ombudsman and Bill of Rights opened a grand total of (11,654) Non-Commercial and Commercial cases - (See Pages 4-5);
- Of the (11,654) cases opened - (11,395) cases were Non-Commercial - (See Pages 4-5);
- Percentage of resolved/closed Non-Commercial cases was (100% or 11,654 resolved/closed cases) out of a total of (11,654) Non-Commercial cases opened – (See Pages 6-7);
- In FY2019, the Average Number of Days for the Office of Health Care Ombudsman and Bill of Rights to resolve/close (11,395) Non-Commercial cases was (1.5) days -(See Pages 51-52);
- Of the (11,395) Non-Commercial cases opened in FY2019, the Office of Health Care Ombudsman and Bill of Rights resolved/closed (9,360) cases on same day that cases were opened - (See Page 52);
- Of the grand total of (11,654) cases opened by the Office of Health Care Ombudsman and Bill of Rights – (259) cases were among the Commercial Health Plan Members – (See Pages 4-5);
- Percentage of resolved/closed Commercial-Appeals/Grievances cases was (93% or 242 resolved/closed cases) out of a total of (259) commercial-appeals/grievances cases opened - (See Pages 8-9);
- In FY2019, the Average Number of Days for the Office of Health Care Ombudsman and Bill of Rights to resolve/close Commercial-Appeals/Grievances cases was (112.3) days - (See Pages 53-54);
- Of the (259) Commercial-Appeals/Grievances cases opened in FY2019, the Office of Health Care Ombudsman and Bill of Rights resolved/closed (7) cases on same day that cases were opened - (See Page 54);
- On behalf of consumers, the Office of Health Care Ombudsman and Bill of Rights saved consumers a total dollar amount of (\$2,971,024.99). Of the total dollar amount saved (84%) was from Commercial-Appeals/Grievances cases. (See Pages 49-50);
- Of the (911) Administrative/Fair Hearing cases filed by the Office of Health Care Ombudsman and Bill of Rights (58% or 532 cases) were filed on behalf of EPD Waiver beneficiaries - (See Pages 18-19 and 45-46);
- Most consumers utilized the telephone to contact the Office of Health Care Ombudsman and Bill of Rights—(91% or 10,656 contacts) (See Pages 10-11);
- Most contacts made to the Office of Health Care Ombudsman and Bill of Rights were by Dual Eligible (Medicare/Medicaid) beneficiaries - (28% or 3,254 contacts) - (See Pages 12 -13);
- Consumers from all Wards and States located within and outside of the DC Metropolitan Area contacted the Office of Health Care Ombudsman and Bill of Rights-- (Ward (7) had the highest number of contacts (18% or 2,187 contacts, followed by Ward (8), and Ward (5) - (See Pages 14-15);
- Eligibility issues represented the largest category of issues encountered by all consumers – (45% or 5,186 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 FY2019, the Office of Health Care Ombudsman and Bill of Rights opened a total of (121) Transportation Cases versus the (134) Transportation cases opened in FY2019 – (See Pages 39-40);
- The Office of Health Care Ombudsman and Bill of Rights opened a total of (1,287) EPD Waiver Cases in FY2019 versus the (968) EPD Waiver cases opened in FY2018 – (See Pages 43-44); and
- In FY2019, the Office of Health Care Ombudsman and Bill of Rights opened a total of (748) DC Health Link cases versus the (797) DC Health Link cases opened in FY2018 - (See Pages 47-48).

# Office of Health Care Ombudsman and Bill of Rights (OHCOBR) FY2019

## Summary of Activities

*During Fiscal Year 2019, 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 2019 (October 1, 2018 through September 30, 2019).*

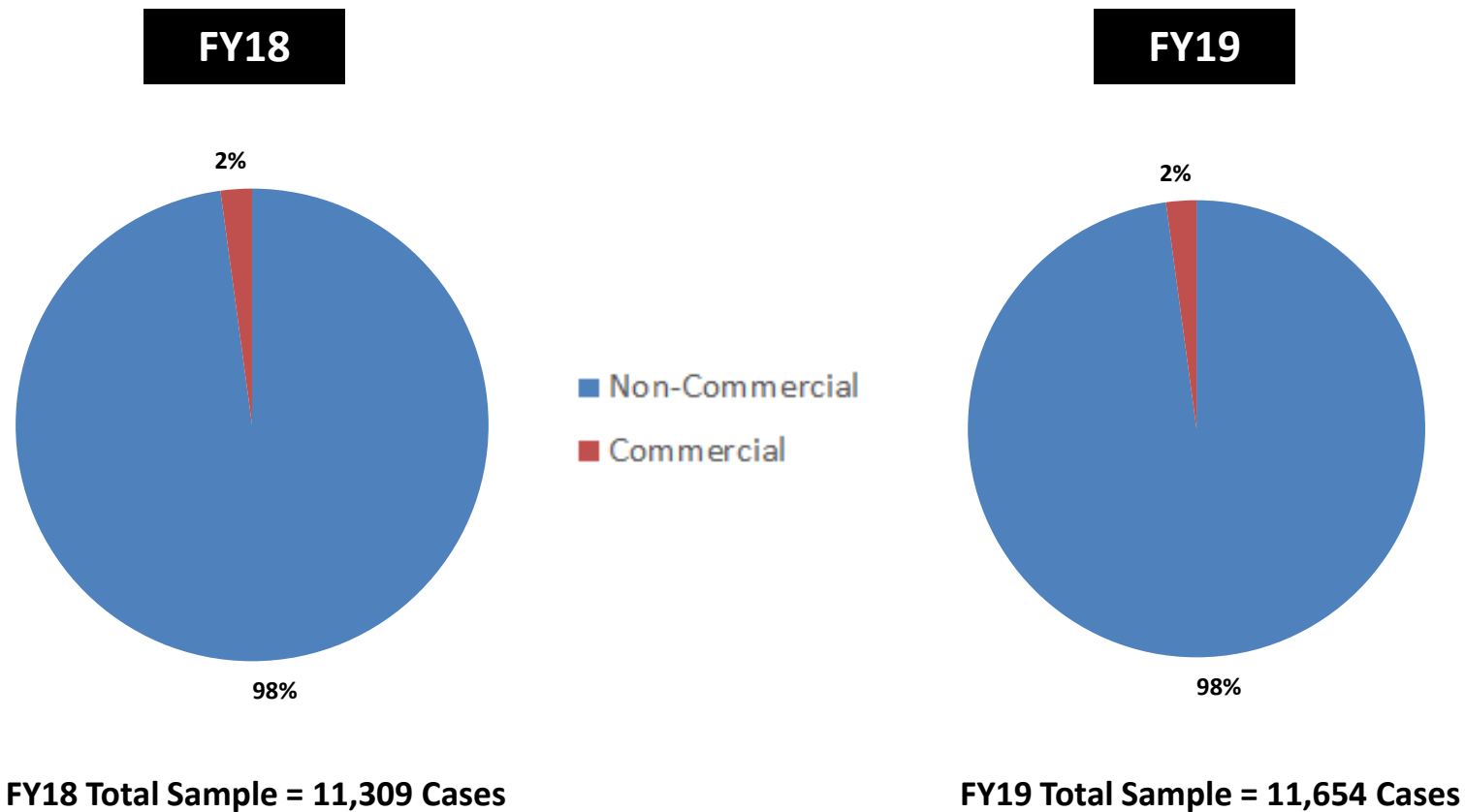
*In summarizing the activities from the Ombudsman In-Take Data System (OIDS), the OHCOBR sought to answer the following key questions:*

- *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 2019, the OHCOBR received a total of (2,472) contacts by individuals (consumers) who were repeat users versus (3,031) contacts in FY 2018;*

*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.*

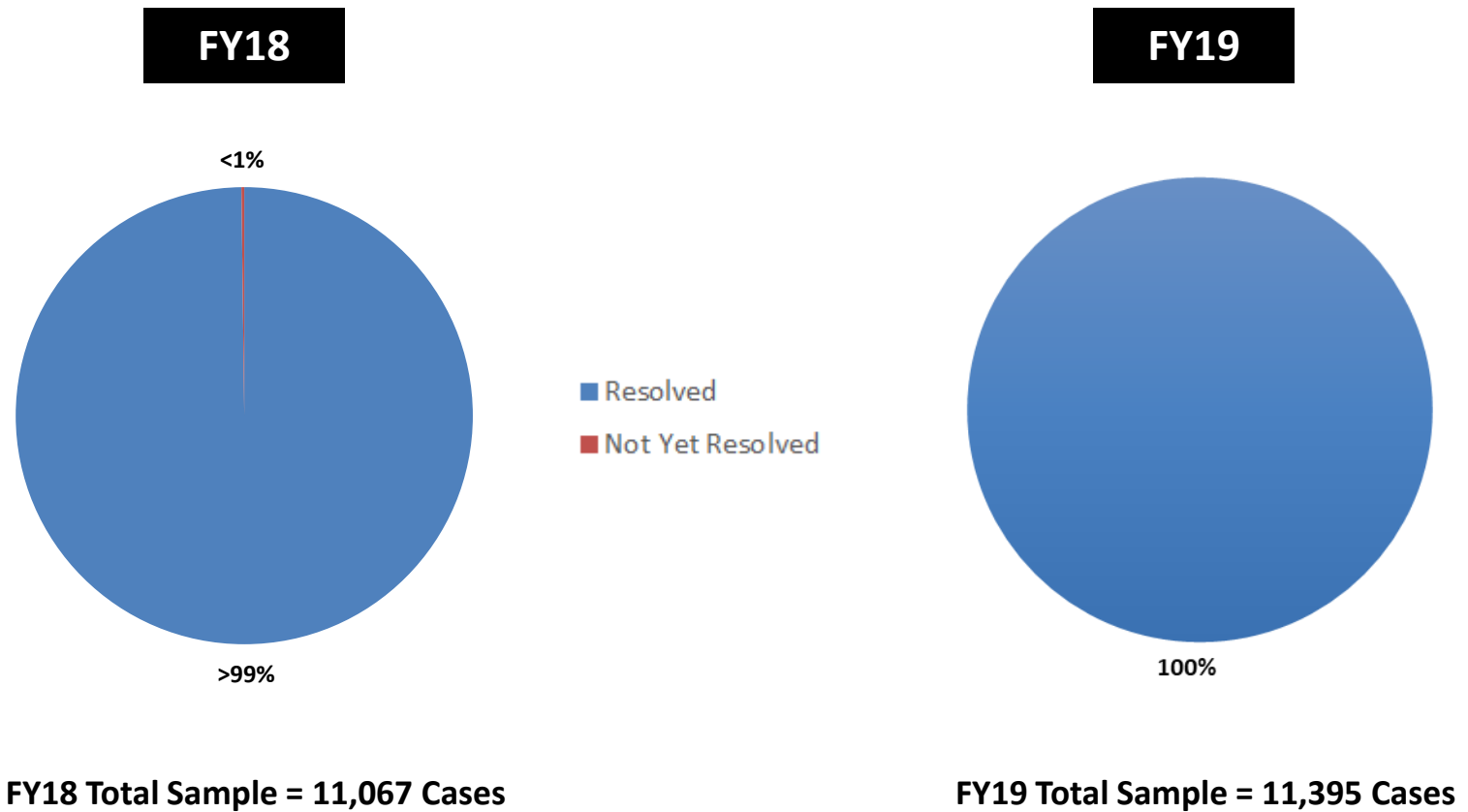
# Figure 1. Total Number and Percentage of Opened Cases Among All Contacts (Non-Commercial and Commercial Appeals/Grievances-Bill of Rights) FY18 and FY19



**Table 1. Total Number and Percentage of Opened Cases Among All Contacts  
(Non-Commercial and Commercial Appeals/Grievances-Bill of Rights)  
FY18 and FY19**

<b>Opened Cases (All Contacts)</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Non-Commercial Cases	11,067	98%	11,395	98%
Commercial (Appeals/Grievances— Bill of Rights) Cases	242	2%	259	2%
<b>Total (Non-Commercial) and (Commercial-Appeals/Grievances- Bill of Rights) Opened Cases</b>	<b>11,309</b>	<b>100%</b>	<b>11,654</b>	<b>100%</b>

**Figure 2. Number and Percentage of Resolved/Closed Cases and Cases Not Resolved/Closed Among (Non-Commercial) Contacts  
FY18 and FY19**



**Table 2. Number and Percentage of Resolved/Closed Cases and Cases Not Resolved/Closed Among (Non-Commercial) Contacts FY18 and FY19**

<b>Resolved/Closed Cases (Non-Commercial)</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Cases Resolved/Closed	11,045	>99%	11,395	100%
Cases Not Yet Resolved/Closed	22	<1%	0	0%
<b>Total (Non-Commercial) Contacts/Cases</b>	<b>11,067</b>	<b>100%</b>	<b>11,395</b>	<b>100%</b>

**Figure 3. Number and Percentage of Resolved/Closed Cases and Cases Not Resolved/Closed Among (Commercial-Appeals/Grievances-Bill of Rights) FY18 and FY19**



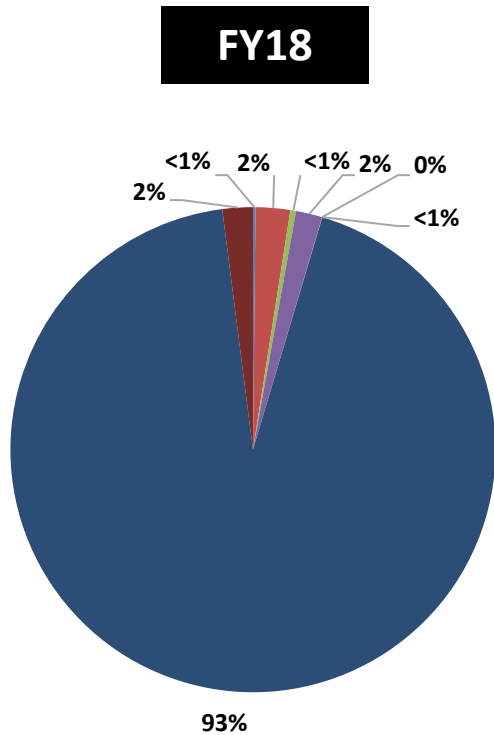
Source data captured between October 1, 2017 through September 30, 2018 and October 1, 2018 through September 30, 2019



**Table 3. Number and Percentage of Resolved/Closed Cases and Cases Not Resolved/Closed Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts FY18 and FY19**

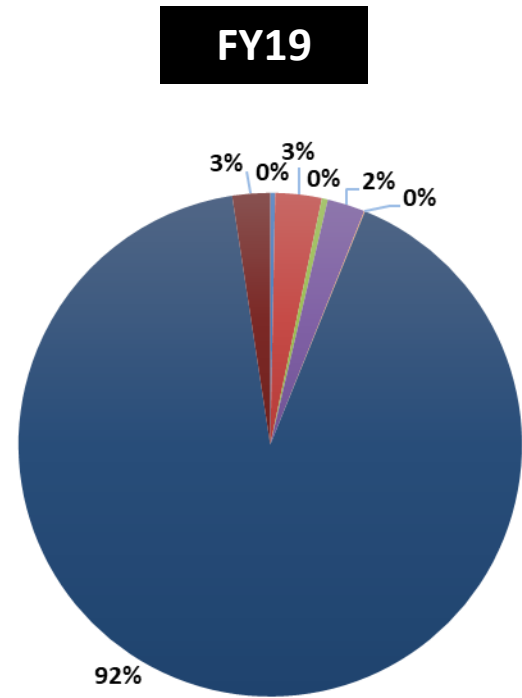
<b>Resolved/Closed Cases (Commercial-Appeals/Grievances-Bill of Rights)</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Appeals/Grievances Cases Resolved/Closed	175	74%	242	93%
Appeals/Grievances Cases Not Yet Resolved/Closed	67	26%	17	7%
<b>Total (Commercial-Appeals/Grievances-Bill of Rights) Contacts/Cases</b>	<b>242</b>	<b>100%</b>	<b>259</b>	<b>100%</b>

# Figure 4. Methods of Contacting the Office of Health Care Ombudsman and Bill of Rights (OHCOBR) FY18 and FY19



FY18 Total Sample = 11,309 Cases

- Appointment
- Email
- Fax
- Letter
- OHCOBR Website
- OHCOBR Outreach Event
- Telephone
- Walk-in

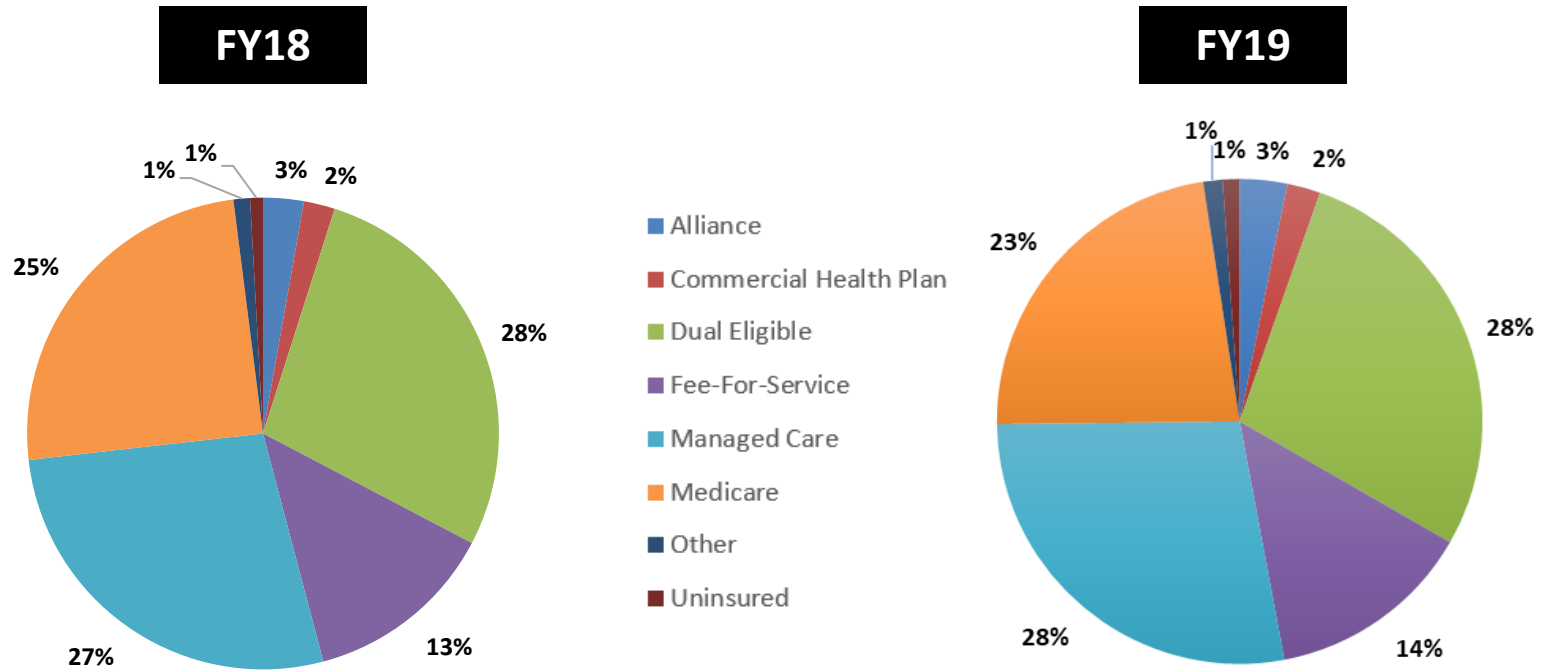


FY19 Total Sample = 11,654 Cases

**Table 4. Methods of Contacting the Office of Health Care Ombudsman  
and Bill of Rights (OHCOBR)  
FY18 and FY19**

<b>Methods of Contacting OHCOBR</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Appointment	19	<1%	37	<1%
Email	260	2%	347	3%
Fax	43	<1%	45	<1%
Letter	198	2%	281	2%
OHCOBR's Website (E-mails)	0	0%	0	0%
OHCOBR's Outreach Events	2	<1%	6	<1%
Telephone	10,558	93%	10,656	91%
Walk-In	229	2%	282	2%
<b>Total Methods of Contacting OHCOBR</b>	<b>11,309</b>	<b>100%</b>	<b>11,654</b>	<b>100%</b>

## Figure 5. Categories of Contacts by Insurance Type FY18 and FY19



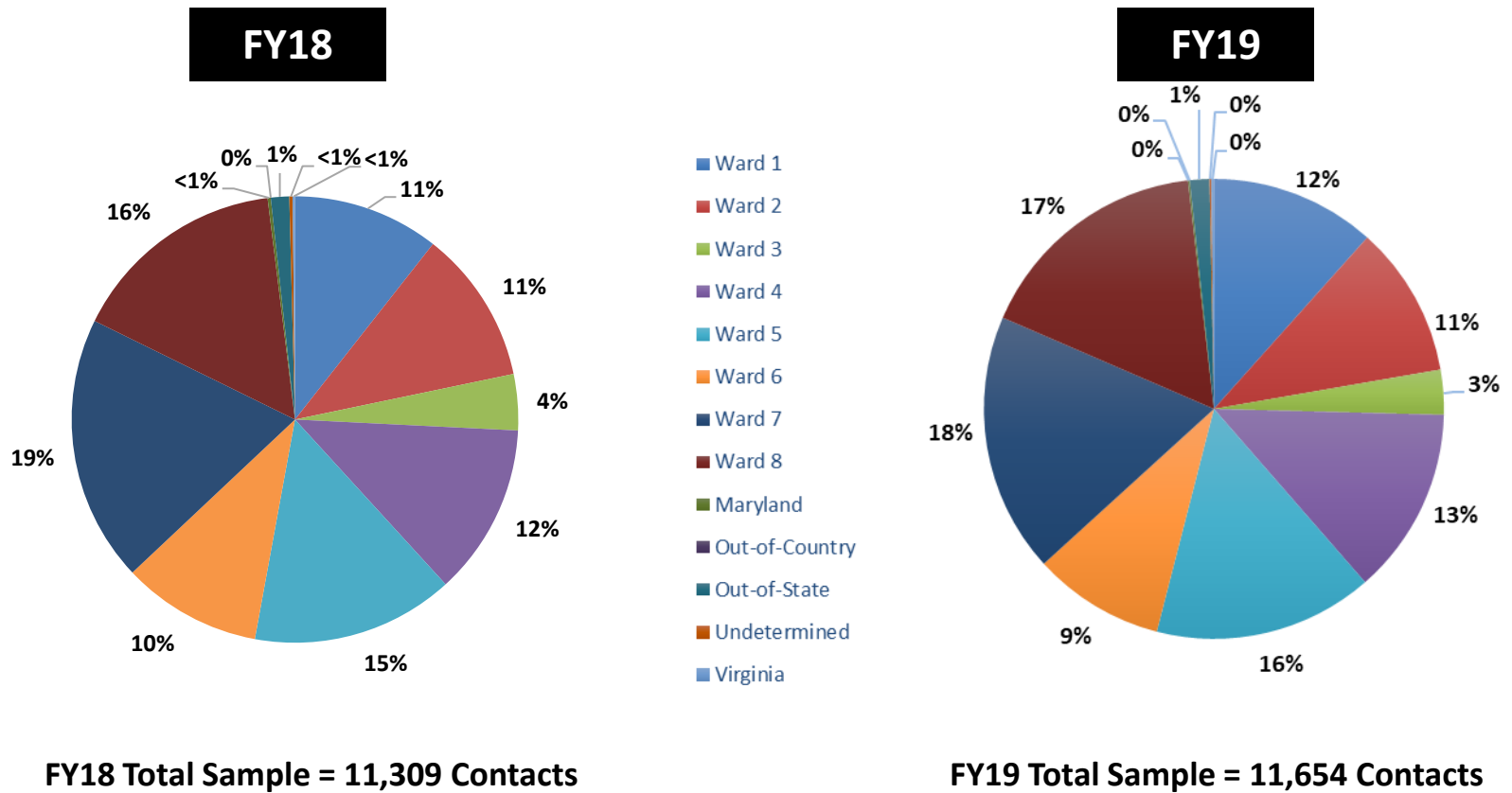
**FY18 Total Sample = 11,309 Contacts**

**FY19 Total Sample = 11,654 Contacts**

**Table 5. Categories of Contacts by Insurance Type  
FY18 and FY19**

<b>Categories of Insurance Type</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Alliance (includes Alliance/ADAP and and Immigrant Children beneficiaries)	315	3%	368	3%
Commercial Health Plan (includes Medicare/Commercial Part D Prescription Plans -- Appeals/Grievances-Bill of Rights cases)	241	2%	259	2%
Dual Eligible (Medicaid/Medicare) (includes QMB 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)	3,141	28%	3,254	28%
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)	1,492	15%	1,602	14%
Medicaid Managed Care (MCO) (includes AFDC-TANF/Childless Adult/Childless Adult-MAGI/CHIP/Katie Beckett/TANF/Special Needs Beneficiaries)	3,090	22%	3,237	28%
Medicare (includes Part A; Part B; Part A/B; Part A/B (QMB) and SLMB Beneficiaries)	2,803	27%	2,653	23%
Other (includes ADAP/Deceased/Limited/Restricted Coverage/Limited/Restricted-Childless Adult-Incarcerated/Out-of-State Medicaid Coverage/Spend-Down/Undetermined)	128	2%	150	1%
Uninsured	99	<1%	131	1%
<b>Total Contacts by Insurance Type</b>	<b>11,309</b>	<b>100%</b>	<b>11,654</b>	<b>100%</b>

# Figure 6. Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area FY18 and FY19



Source data captured between October 1, 2017 through September 30, 2018 and October 1, 2018 through September 30, 2019

**Table 6. Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area  
FY18 and FY19**

<b>Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Ward 1	1,199	11%	1,354	12%
Ward 2	1,258	11%	1,240	11%
Ward 3	459	4%	367	3%
Ward 4	1,406	12%	1,536	13%
Ward 5	1,658	15%	1,796	15%
Ward 6	1,142	10%	1,077	9%
Ward 7	2,183	19%	2,127	18%
Ward 8	1,782	16%	1,946	17%
Maryland (Located Within the DC Metropolitan Area)	26	<1%	16	<1%
Out-of-Country	0	0%	0	0%
Out-of-State (States Located Outside of the DC Metropolitan Area)	150	1%	159	1%
Undetermined	27	<1%	15	<1%
Virginia (Located Outside of the DC Metropolitan Area)	19	<1%	21	<1%
<b>Total Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area</b>	<b>11,309</b>	<b>100%</b>	<b>11,654</b>	<b>100%</b>

# 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.



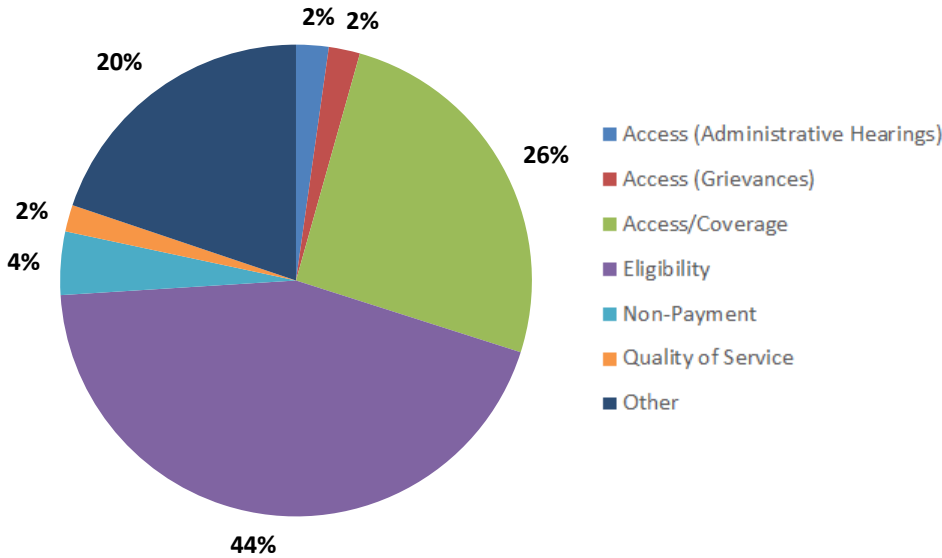
# Types of Issues Encountered (continued)

*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), EPD 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.

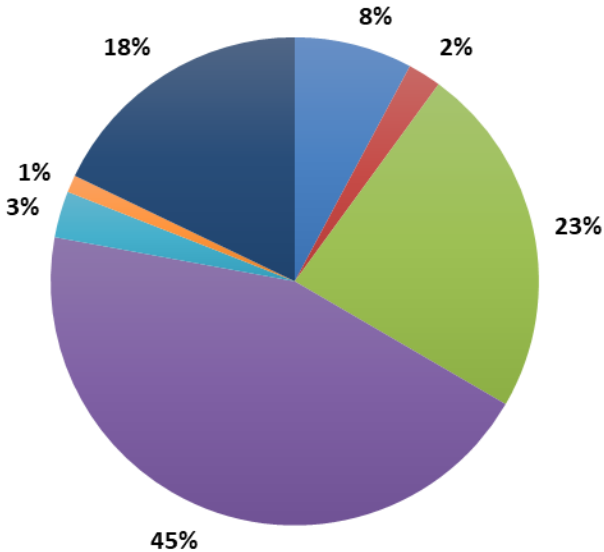
# Figure 7. Breakdown of Types of Issues Encountered by All Contacts (Non-Commercial) and (Commercial-Appeals/Grievances-Bill of Rights) FY18 and FY19

**FY18**



**FY18 Total Sample = 11,309 Contacts**

**FY19**



**FY19 Total Sample = 11,654 Contacts**

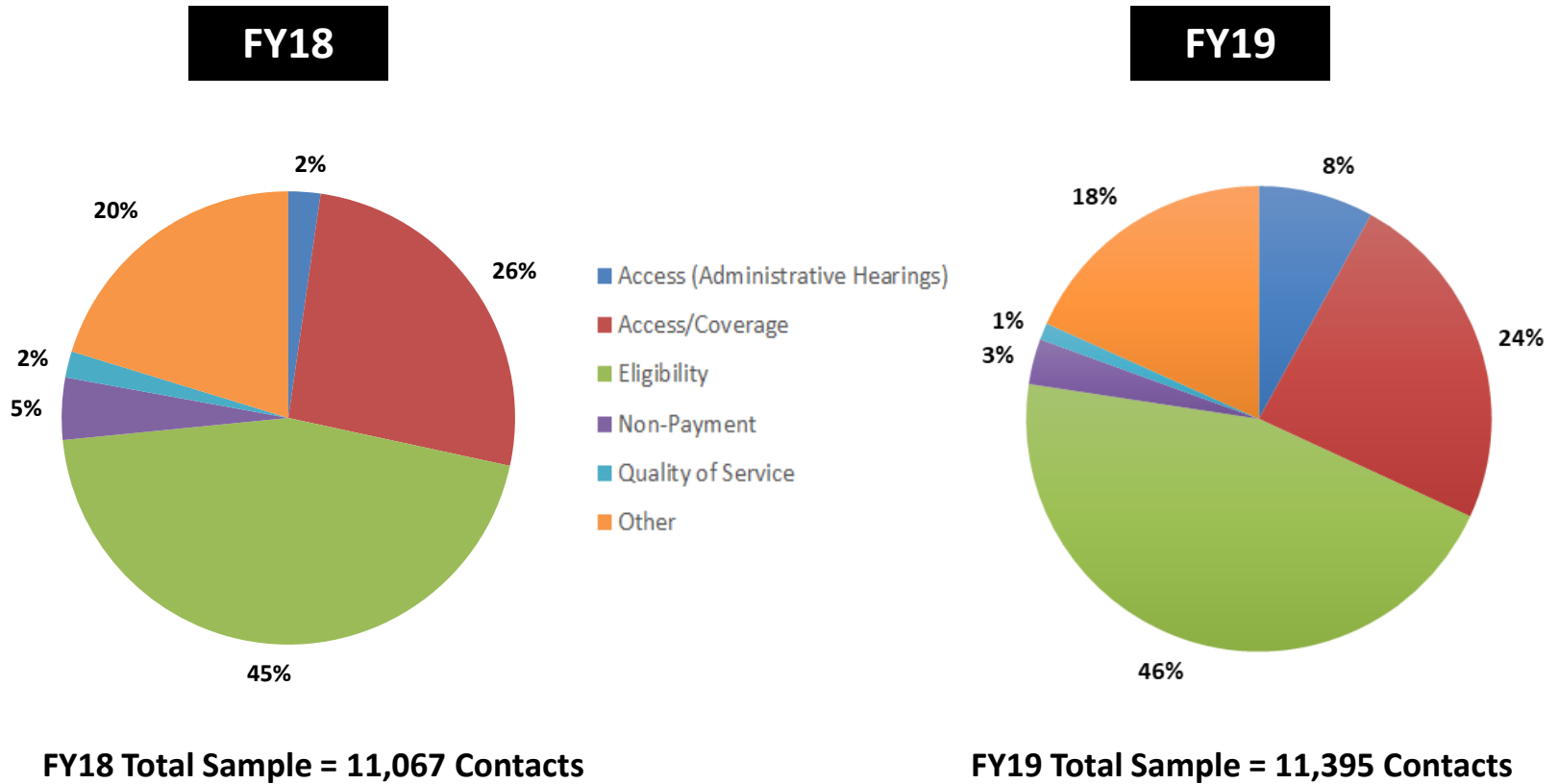
Source data captured between October 1, 2017 through September 30, 2018 and October 1, 2018 through September 30, 2019

**Table 7. Breakdown of Types of Issues Encountered by All Contacts –  
(Non-Commercial) and (Commercial-Appeals/Grievances-Bill of Rights)  
FY18 and FY19**

<b>Types of Issues Encountered by All Contacts (Non-Commercial); and (Commercial- Appeals/Grievances-Bill of Rights)</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Access (Administrative Hearings)	252	2%	911	8%
Access (Commercial-Appeals/Grievances-Bill of Rights)	242	2%	259	2%
Access/Coverage (includes Access to services and Coverage includes denials of services)	2,890	26%	2,722	23%
Eligibility/Recertification (status of eligibility/verification of coverage)	4,986	44%	5,186	45%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	490	4%	359	3%
Quality of Service (includes services rendered by Providers)	207	2%	134	1%
*Other Issues	2,242	20%	2,083	18%
<b>Total Types of Issues (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) Contacts</b>	<b>11,309</b>	<b>100%</b>	<b>11,654</b>	<b>100%</b>

*\*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.*

## Figure 8. Breakdown of Types of Issues Encountered by (Non-Commercial) Contacts FY18 and FY19



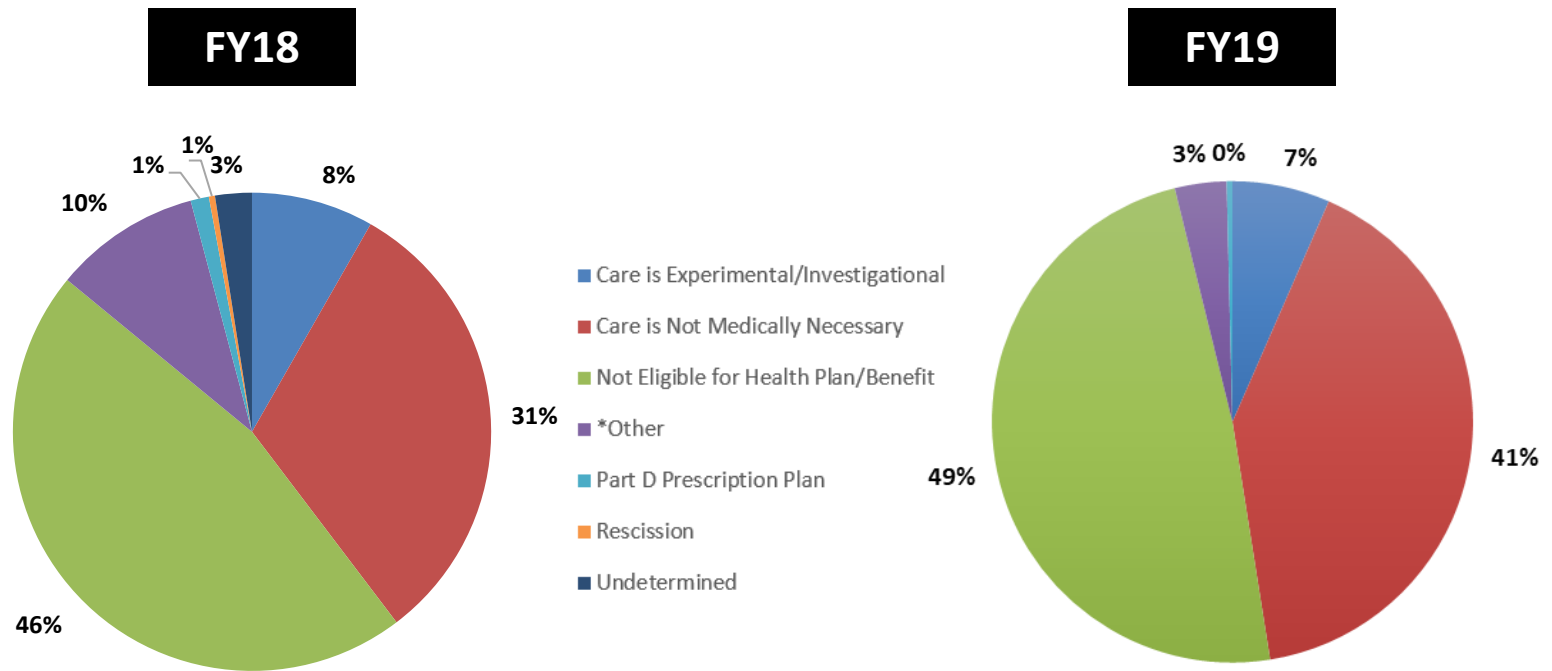
*\*Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction 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  
FY18 and FY19**

<b>Types of Issues (Non-Commercial) Contacts</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Access (Administrative Hearings)	252	2%	911	8%
Access/Coverage (includes Access to services and Coverage includes denials of services)	2,890	26%	2,722	24%
Eligibility/Recertification (status of eligibility/verification of coverage)	4,986	45%	5,186	46%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	490	5%	359	3%
Quality of Service (includes services rendered by Providers)	207	2%	134	1%
*Other Issues	2,242	20%	2,083	18%
<b>Total Types of Issues-(Non-Commercial) Contacts</b>	<b>11,067</b>	<b>100%</b>	<b>11,395</b>	<b>100%</b>

*\*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 9a. Breakdown of Types of Issues Encountered by (Commercial-Appeals/Grievances-Bill of Rights) Contacts FY18 and FY19



FY18 Total Sample = 242 Contacts

FY19 Total Sample = 259 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.

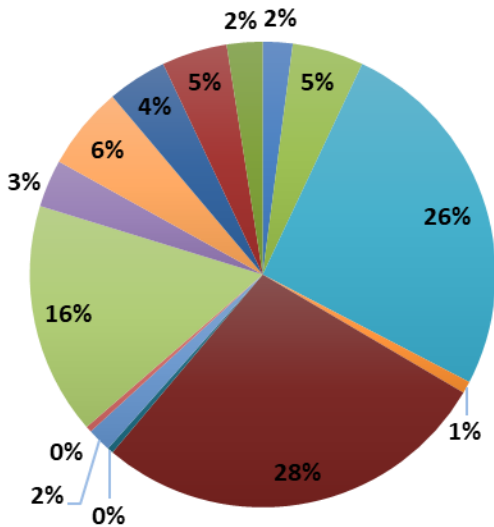
**Table 9a. Breakdown of Types of Issues Encountered by  
(Commercial-Appeals/Grievances Bill of Rights) Contacts  
FY18 and FY19**

<b>Types of Issues (Commercial-Appeals/Grievances-Bill of Rights)</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Care Is Experimental/Investigational	20	8%	17	>6%
Care Is Not Medically Necessary	76	31%	106	41%
Not Eligible for Health Plan/Benefit	112	46%	126	49%
*Other Issues	24	10%	9	3%
Part D Prescription Plan	3	1%	1	<1%
Rescission	1	1%	0	0%
Undetermined	6	3%	0	0%
<b>Total Types of Issues-(Commercial-Appeals/Grievances-Bill of Rights) Contacts</b>	<b>242</b>	<b>100%</b>	<b>259</b>	<b>100%</b>

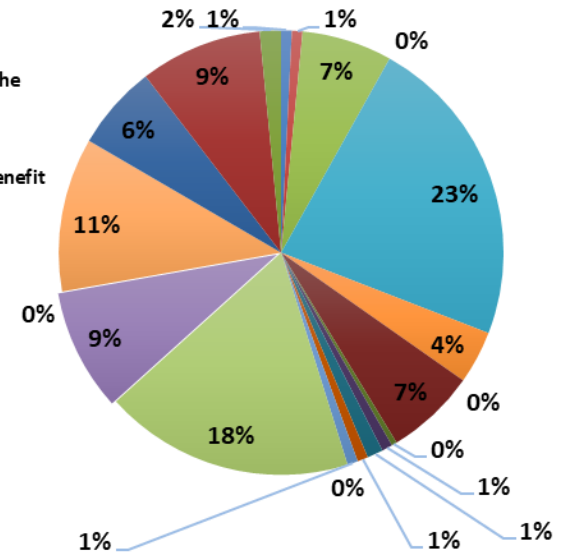
# Figure 9b. Breakdown of Dispositions of All Cases Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts FY18 and FY19

- Adjusted (case closed)
- Administratively Closed (case closed-due to no action)
- Consumer Unresponsive (case closed)
- On-Hold in Abeyance (case closed)
- Overtured (case closed-insurance company changed the denial)
- Partial Payment (case closed-insurance company paid a portion of claim)
- Partially Overtured (case closed-insurance company changed a portion of the denial)
- Pending (case is still opened)
- Referred to DISB (case closed-referred to DISB for policy interpretation or benefit issues)
- Referred to DOL (case closed-referred to DOL-self-funded insurance plans)
- Referred to OPM (case closed-referred to OPM-federal employee plans)
- Referred-Other Issues (case closed-issues not listed)
- Referred-Out-of-State (case closed-lack of jurisdiction)
- Rejected (case closed-lack of evidence)
- Resolved (case closed-resolved without use of full process)
- Reversed (case closed-IRO changed the insurance company's denial)
- Untimely Filing (case closed-member filed appeal after the filing date)
- Upheld (case closed-insurer upheld denial)
- Upheld (case closed-IRO agreed with the insurance company's denial)
- Withdrawn (case closed-member decided not to proceed with appeal)
- Write-Off (case closed-provider agreed to write-off balance due)

**FY18**



**FY19**



Source data captured between October 1, 2017 through September 30, 2018 and October 1, 2018 through September 30, 2019

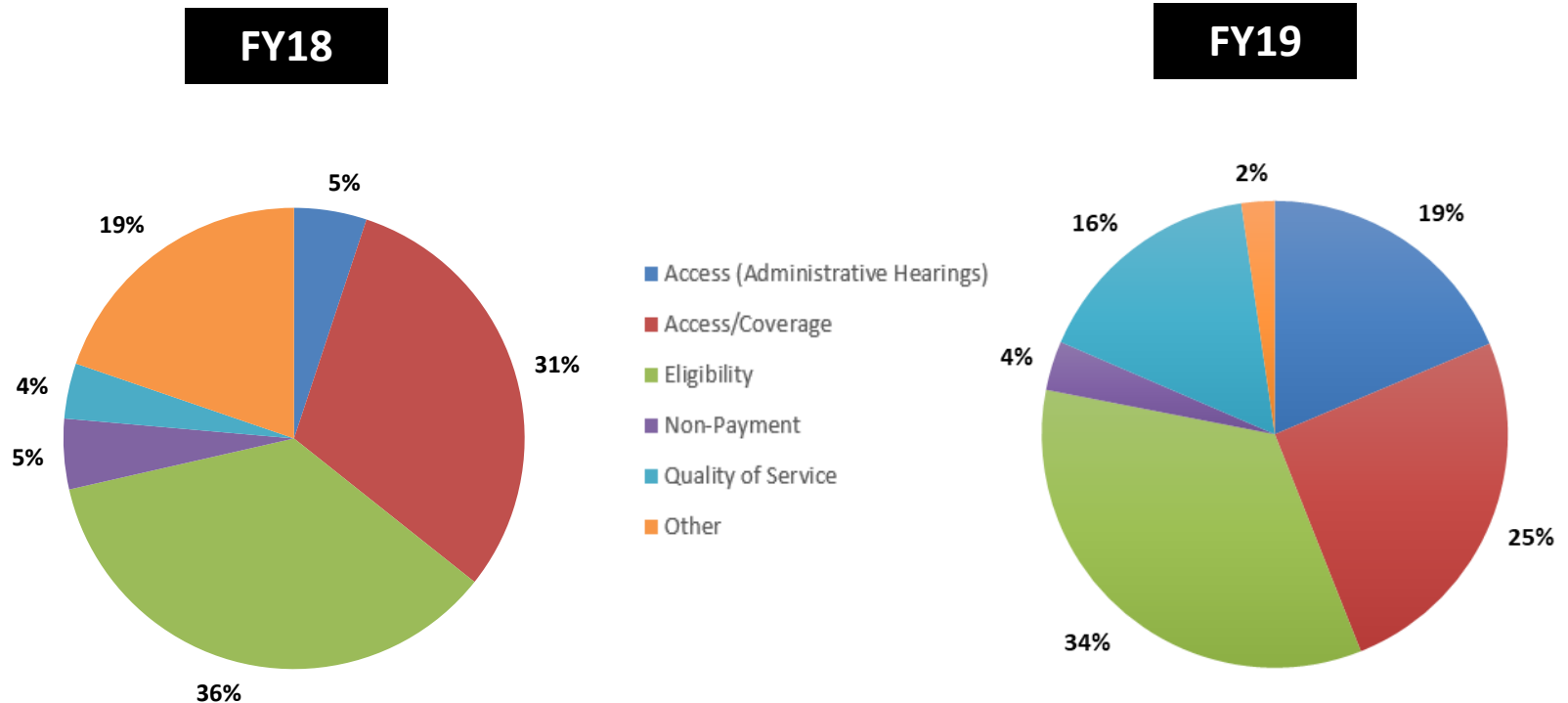


**Table 9b. Breakdown of Dispositions of All Cases Among  
(Commercial-Appeals/Grievances-Bill of Rights) Contacts  
FY18 and FY19**

<b>Dispositions of All Cases Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Adjusted (case closed)	5	2%	2	1%
Administratively Closed (case closed-due to no action)	0	0%	2	1%
Consumer Unresponsive (case closed)	12	5%	17	>6%
On-Hold in Abeyance (case closed)	0	0%	0	0%
Overtured (case closed-insurance company changed the denial)	62	26%	59	23%
Partial Payment (case closed-insurance company paid a portion of claim)	2	1%	10	4%
Partially Overtured (case closed-insurance company changed a portion of the denial)	0	0%	0	0%
Pending (case is still opened)	67	28%	17	>6%
Referred to DISB (case closed-referred to DISB for policy interpretation or benefit issues)	0	0%	1	<1%
Referred to DOL (case closed-referred to DOL-self-funded insurance plans)	0	0%	2	1%
Referred to OPM (case closed-referred to OPM-federal employee plans)	1	<1%	3	1%
Referred-Other Issues (case closed-issues not listed)	0	0%	2	1%
Referred-Out-of-State (case closed-lack of jurisdiction)	4	2%	2	1%
Rejected (case closed-lack of evidence)	1	<1%	0	0%
Resolved (case closed-resolved without use of full process)	39	16%	47	18%
Reversed (case closed-IRO changed the insurance company's denial)	8	3%	23	9%
Untimely Filing (case closed-member filed appeal after the filing date)	0	0%	0	0%
Upheld (case closed-insurer upheld denial)	14	6%	29	11%
Upheld (case closed-IRO agreed with the insurance company's denial)	10	4%	16	6%
Withdrawn (case closed-member decided not to proceed with appeal)	11	4%	23	9%
Write-Off (case closed-provider agreed to write-off balance due)	6	2%	4	>1%
<b>Total Dispositions of All Cases Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts</b>	<b>242</b>	<b>100%</b>	<b>259</b>	<b>100%</b>

Source data captured between October 1, 2017 through September 30, 2018 and October 1, 2018 through September 30, 2019

# Figure 10. Breakdown of Types of Issues Encountered by Dual Eligible (Medicare and Medicaid) Contacts FY18 and FY19



**FY18 Total Sample = 3,141 Contacts**

**FY19 Total Sample = 3,254 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 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.

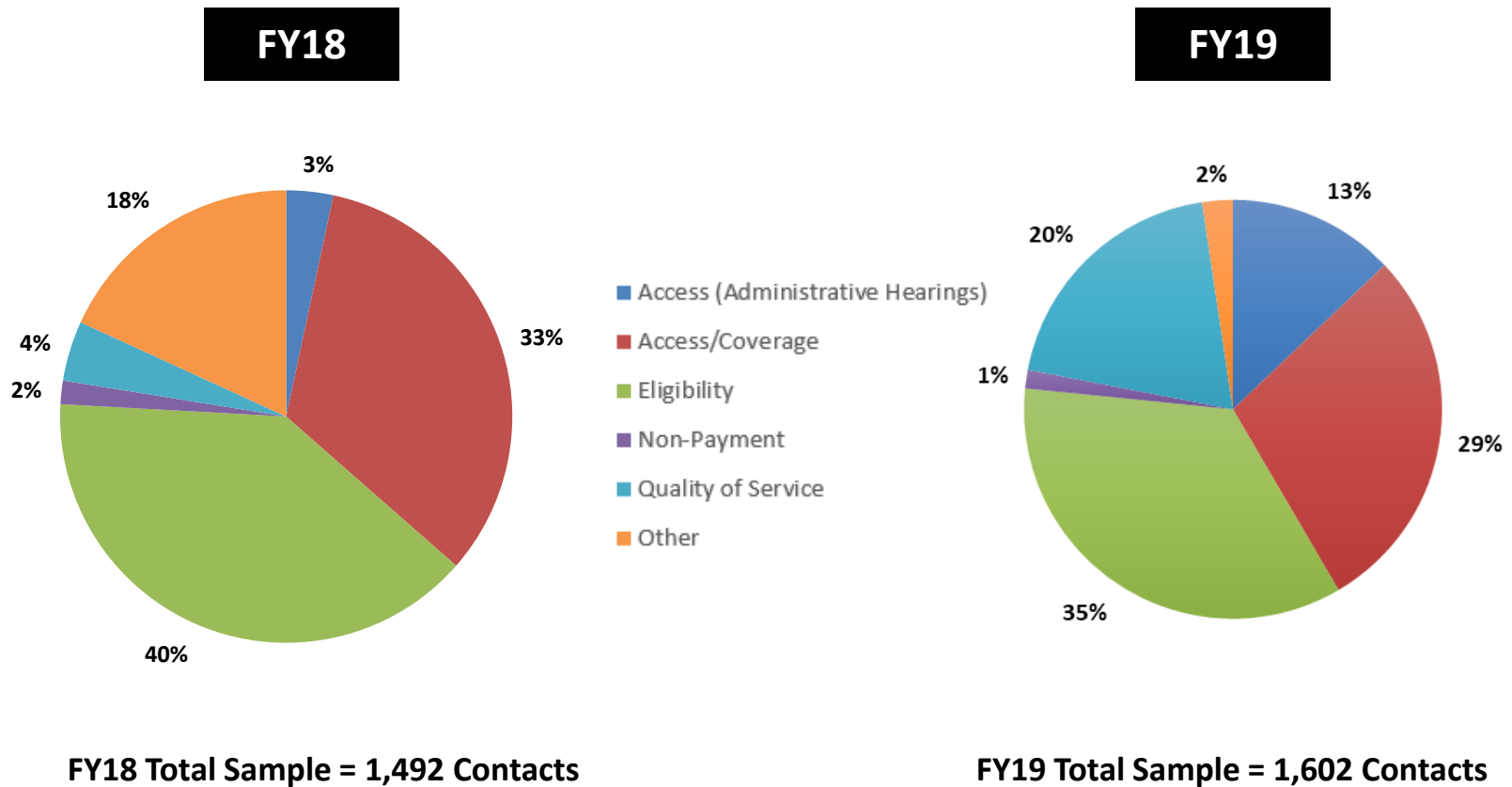
**Table 10. Breakdown of Types Issues Encountered by Dual Eligible (Medicare and Medicaid) Contacts FY18 and FY19**

<b>Types of Issues Encountered by Dual Eligible (Medicare and Medicaid) Contacts</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Access (Administrative Hearings)	160	5%	607	19%
Access/Coverage (includes Access to services and Coverage includes denials of services)	961	31%	824	25%
Eligibility/Recertication (status of eligibility/verification of coverage)	1,123	36%	1,109	34%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	155	5%	111	4%
*Other Issues	122	4%	528	16%
Quality of Service (includes services rendered by Providers)	620	19%	75	2%
<b>Total Types of Issues-Dual Eligible (Medicare and Medicaid) Contacts</b>	<b>3,141</b>	<b>100%</b>	<b>3,254</b>	<b>100%</b>

*\*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 Omnicare; incorrect date of birth in Omnicare; incorrect gender in Omnicare; incorrect name in Omnicare; incorrect social security number in Omnicare; 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 Omnicare; non-receipt-Medicaid/Medicare MCO/QMB ID cards; NPI number incorrect in Omnicare; 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, 2017 through September 30, 2018 and October 1, 2018 through September 30, 2019

# Figure 11. Breakdown of Types of Issues Encountered by Medicaid Fee-for-Service (FFS) Contacts FY18 and FY19



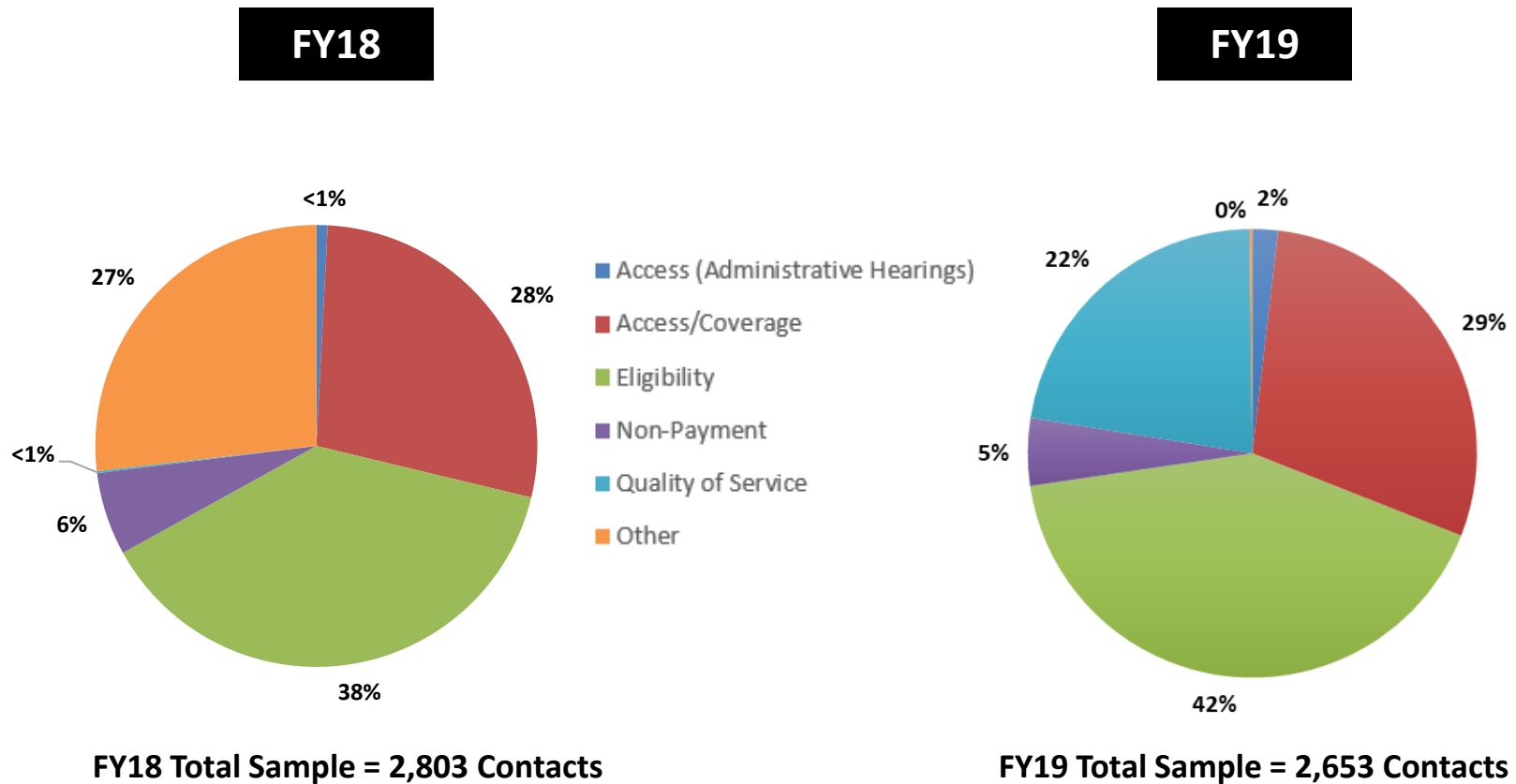
**\*Other Issues:** Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicare MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps 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 11. Breakdown of Types of Issues Encountered by Medicaid Fee-for-Service (FFS) Contacts FY18 and FY19**

<b>Types of Issues Encountered by Medicaid Fee-for-Service (FFS) Contacts</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Access (Administrative Hearings)	50	3%	207	13%
Access/Coverage (includes Access to services and Coverage includes denials of services)	494	33%	459	29%
Eligibility/Recertification (status of eligibility/verification of coverage)	588	40%	561	35%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	25	2%	23	1%
*Other Issues	271	18%	314	20%
Quality of Service (includes services rendered by Providers)	64	4%	38	2%
<b>Total Types of Issues-Medicaid Fee-for-Service Contacts</b>	<b>1,492</b>	<b>100%</b>	<b>1,602</b>	<b>100%</b>

*\*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 12. Breakdown of Types of Issues Encountered by Medicare Part A, Part B, Part A/B and Part A/B (QMB) Contacts FY18 and FY19



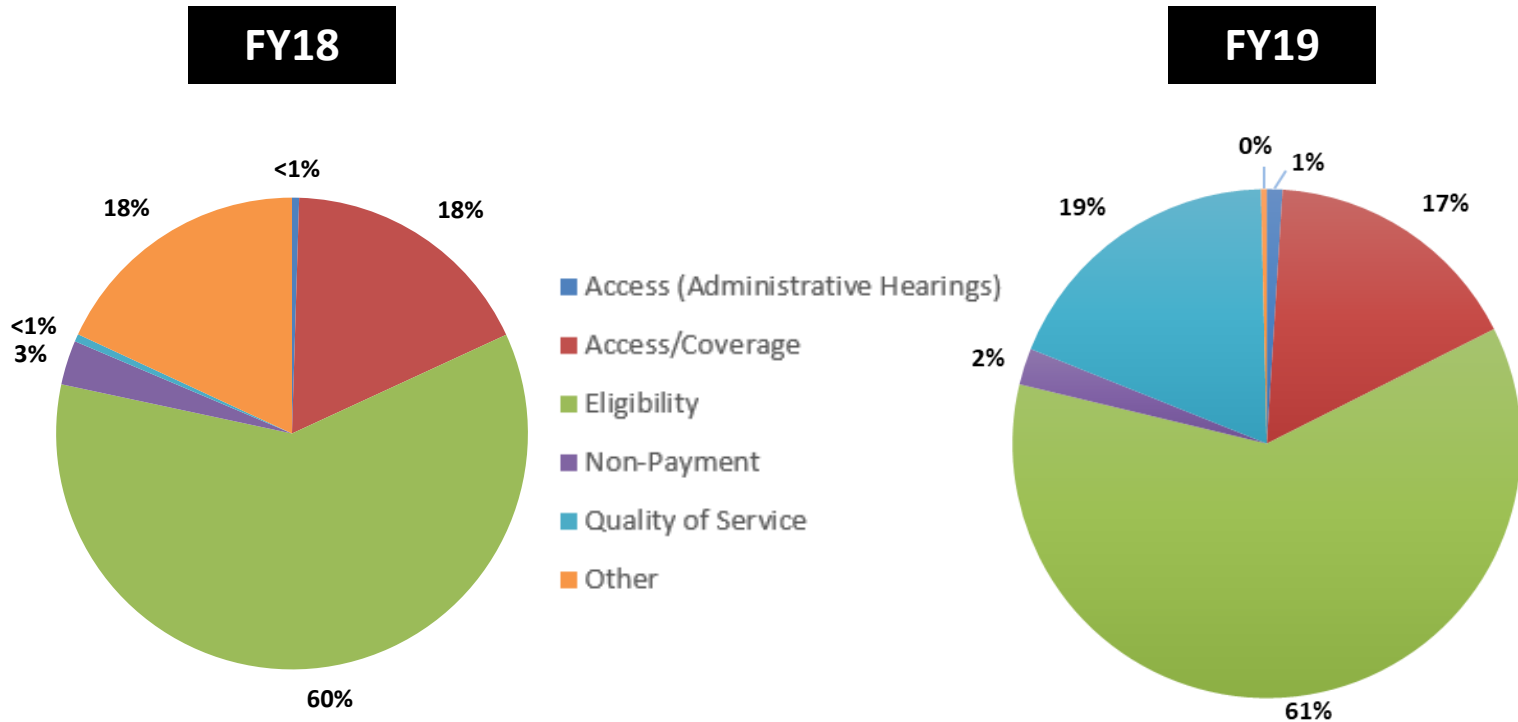
**\*Other Issues:** Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf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

**Table 12. Breakdown of Types of Issues Encountered by Medicare Part A; Part B; Part A/B; Part A/B (QMB) Contacts FY18 and FY19**

<b>Types of Issues Encountered by Medicare Part A; Part B; Part A/B; Part A/B (QMB) Contacts</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Access (Administrative Hearings)	23	<1%	49	2%
Access/Coverage (includes Access to services and Coverage includes denials of services)	783	28%	773	29%
Eligibility/Recertification (status of eligibility/verification of coverage)	1,071	38%	1,106	>41%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	170	6%	129	5%
*Other Issues	752	27%	591	22%
Quality of Service (includes services rendered by Providers)	4	<1%	5	<1%
<b>Total Types of Issues-Medicare Part A; Part B; Part A;/B; Part A/B (QMB) Contacts</b>	<b>2,803</b>	<b>100%</b>	<b>2,653</b>	<b>100%</b>

*\*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.*

# Figure 13. Breakdown of Types of Issues Encountered by Medicaid Managed Care (MCO) Contacts FY18 and FY19



**FY18 Total Sample = 3,090 Contacts**

**FY19 Total Sample = 3,237 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 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.

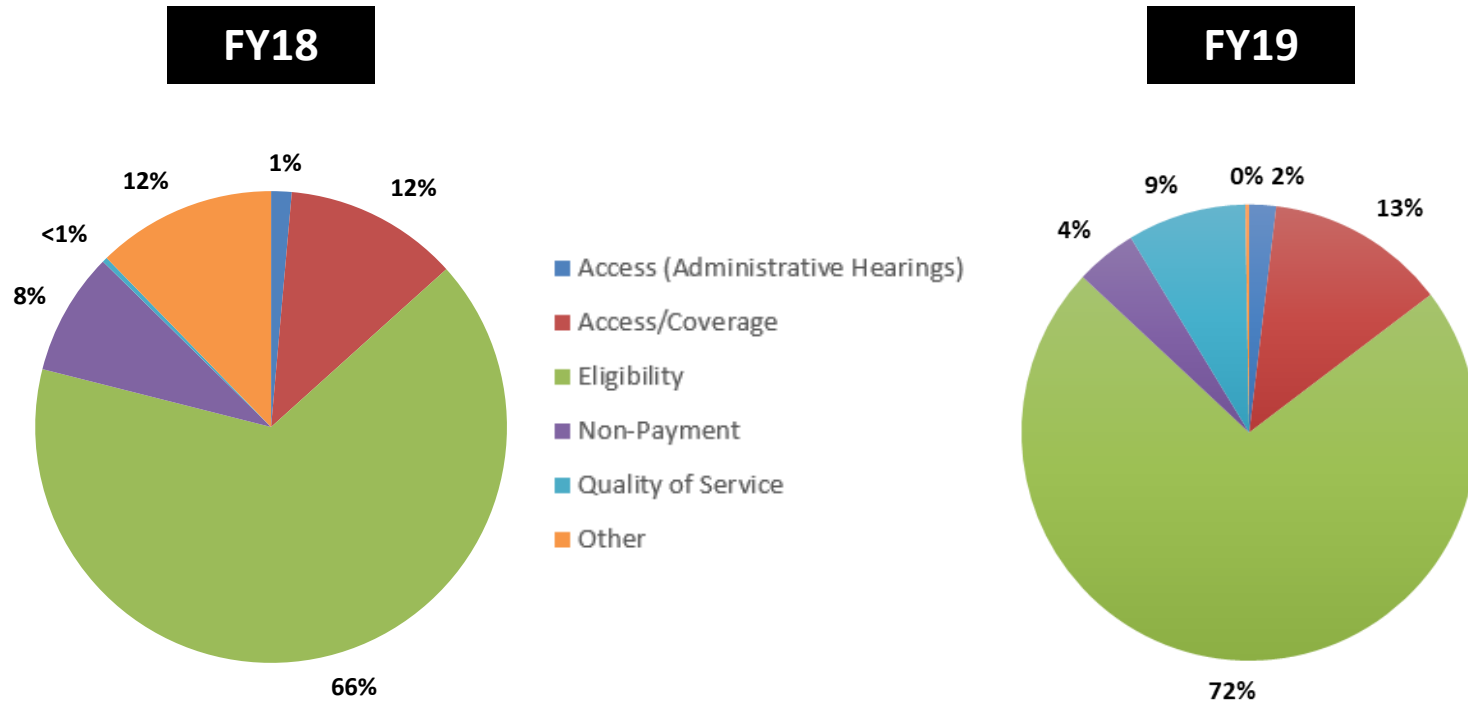


**Table 13. Breakdown of Types Issues Encountered by  
Medicaid Managed Care (MCO) Contacts  
FY18 and FY19**

<b>Types of Issues Encountered by Medicaid Managed Care (MCO) Contacts</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Access (Administrative Hearings)	15	<1%	32	1%
Access/Coverage (includes Access to services and Coverage includes denials of services)	545	18%	537	17%
Eligibility/Recertication (status of eligibility/verification of coverage)	1,861	60%	1,980	61%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	94	3%	75	2%
*Other Issues	559	18%	601	>18%
Quality of Service (includes services rendered by Providers)	16	<1%	12	<1%
<b>Total Types of Issues-Medicaid Managed Care (MCO) Contacts</b>	<b>3,090</b>	<b>100%</b>	<b>3,237</b>	<b>100%</b>

*. \*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 FY18 and FY19



**FY18 Total Sample = 315 Contacts**

**FY19 Total Sample = 368 Contacts**

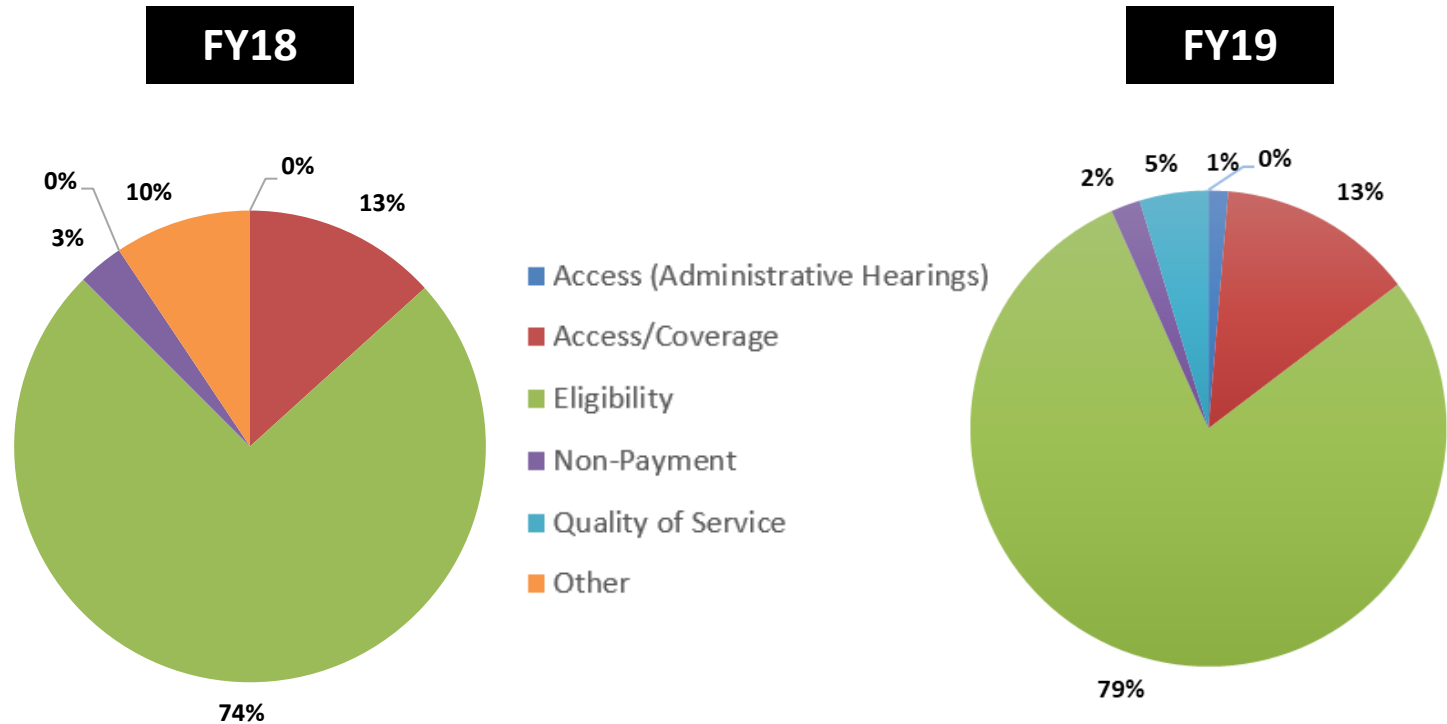
**\*Other Issues:** Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicare MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps 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 14. Breakdown of Types of Issues Encountered by Alliance Contacts  
FY18 and FY19**

<b>Types of Issues Encountered by Alliance Contacts</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Access (Administrative Hearings)	2	1%	7	2%
Access/Coverage (includes Access to services and Coverage includes denials of services)	46	15%	47	13%
Eligibility/Recertication (status of eligibility/verification of coverage)	209	66%	266	72%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	41	13%	16	4%
*Other Issues	17	5%	31	8%
Quality of Service (includes services provided by Providers)	0	0%	1	1%
<b>Total Types of Issues-Alliance Contacts</b>	<b>315</b>	<b>100%</b>	<b>368</b>	<b>100%</b>

*\*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 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.*

# 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) FY18 and FY19



**FY18 Total Sample = 128 Contacts**

**FY19 Total Sample = 150 Contacts**

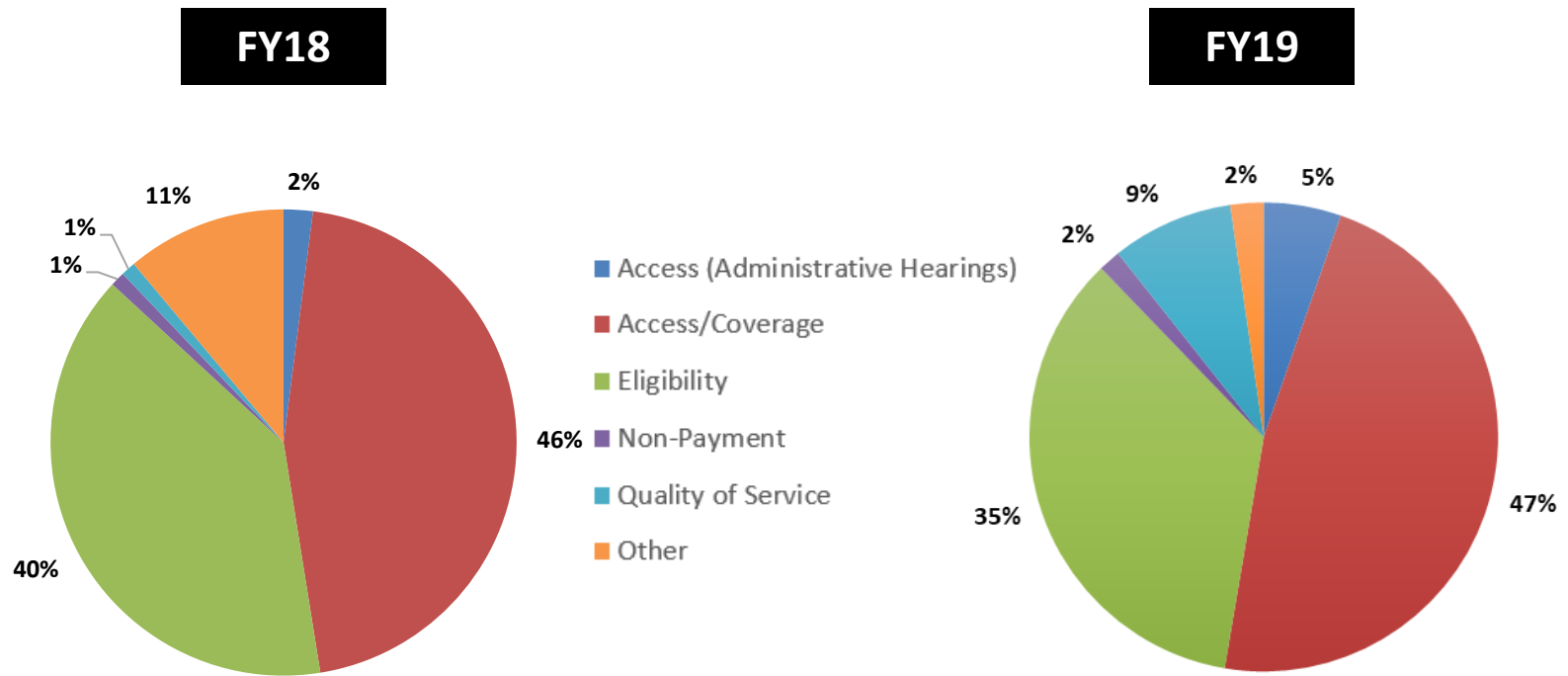
*\*Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicare MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps 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 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) FY18 and FY19**

<b>Types of Issues Encountered by Other Contacts</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Access (Administrative Hearings)	0	0%	2	1%
Access/Coverage (includes Access to services and Coverage includes denials of services)	17	13%	20	13%
Eligibility/Recertication (status of eligibility/verification of coverage)	95	74%	118	79%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	4	3%	3	2%
*Other Issues	12	10%	7	5%
Quality of Service (includes services provided by Providers)	0	0%	0	0%
<b>Total Types of Issues-Alliance Contacts</b>	<b>128</b>	<b>100%</b>	<b>150</b>	<b>100%</b>

*\*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 PDF 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 FY18 and FY19



**FY18 Total Sample = 99 Contacts**

**FY19 Total Sample = 131 Contacts**

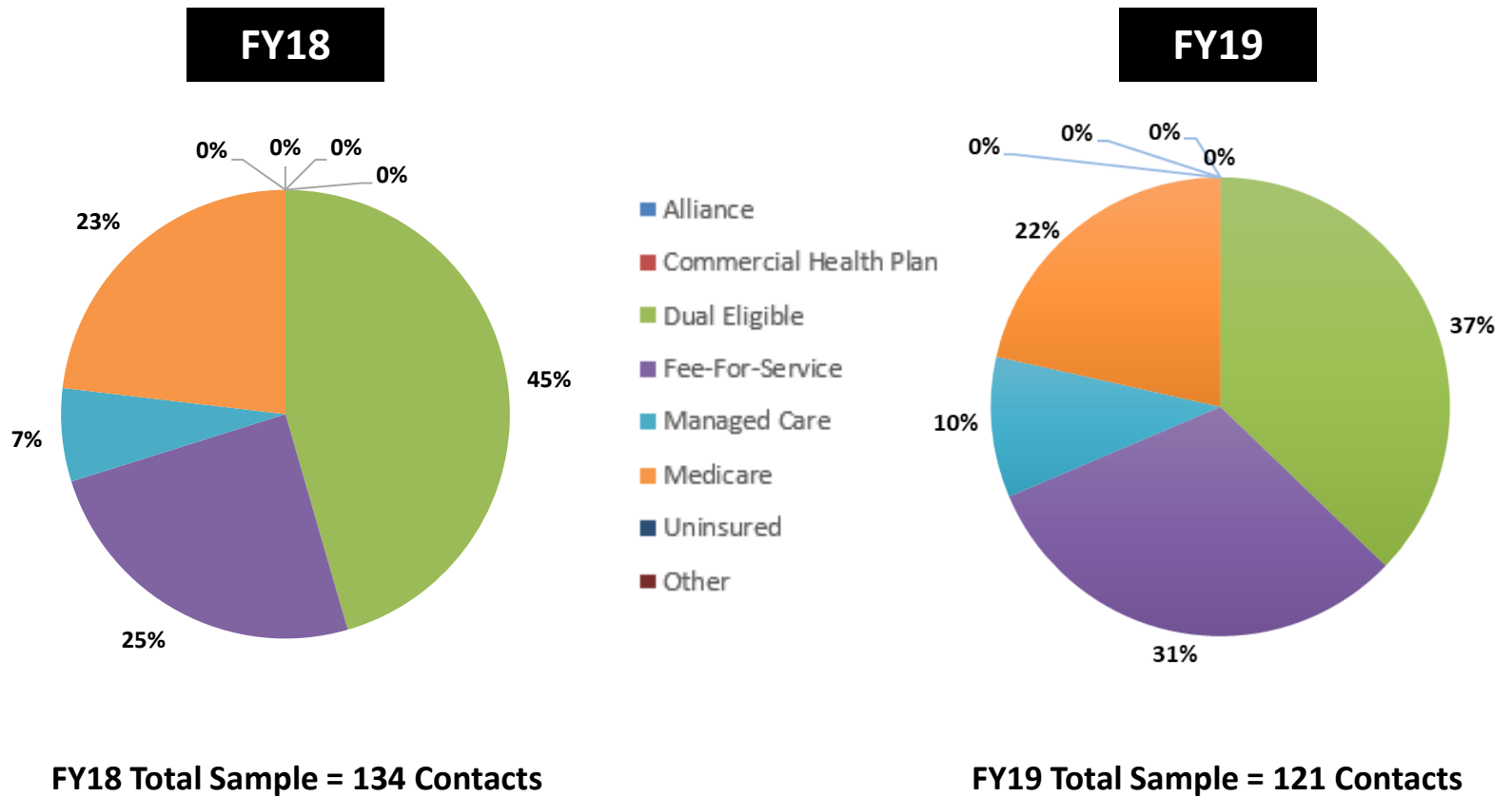
**\*Other Issues:** Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicare MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps 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 16. Breakdown of Issues Encountered by Uninsured Contacts  
FY18 and FY19**

<b>Types of Issues Encountered by Uninsured Contacts</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Access (Administrative Hearings)	2	2%	7	5%
Access/Coverage (includes access to services and Coverage includes denials of services)	45	46%	62	47%
Eligibility/Recertification (status of eligibility/verification of coverage)	39	39%	46	35%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	1	1%	2	2%
*Other Issues	11	11%	11	9%
Quality of Service (includes services rendered by Providers)	1	1%	3	2%
<b>Total Types of Issues-Uninsured Contacts</b>	<b>99</b>	<b>100%</b>	<b>131</b>	<b>100%</b>

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

# Figure 17. Breakdown of Transportation Contacts by Insurance Type FY18 and FY19



Source data captured between October 1, 2017 through September 30, 2018 and October 1, 2018 through September 30, 2019

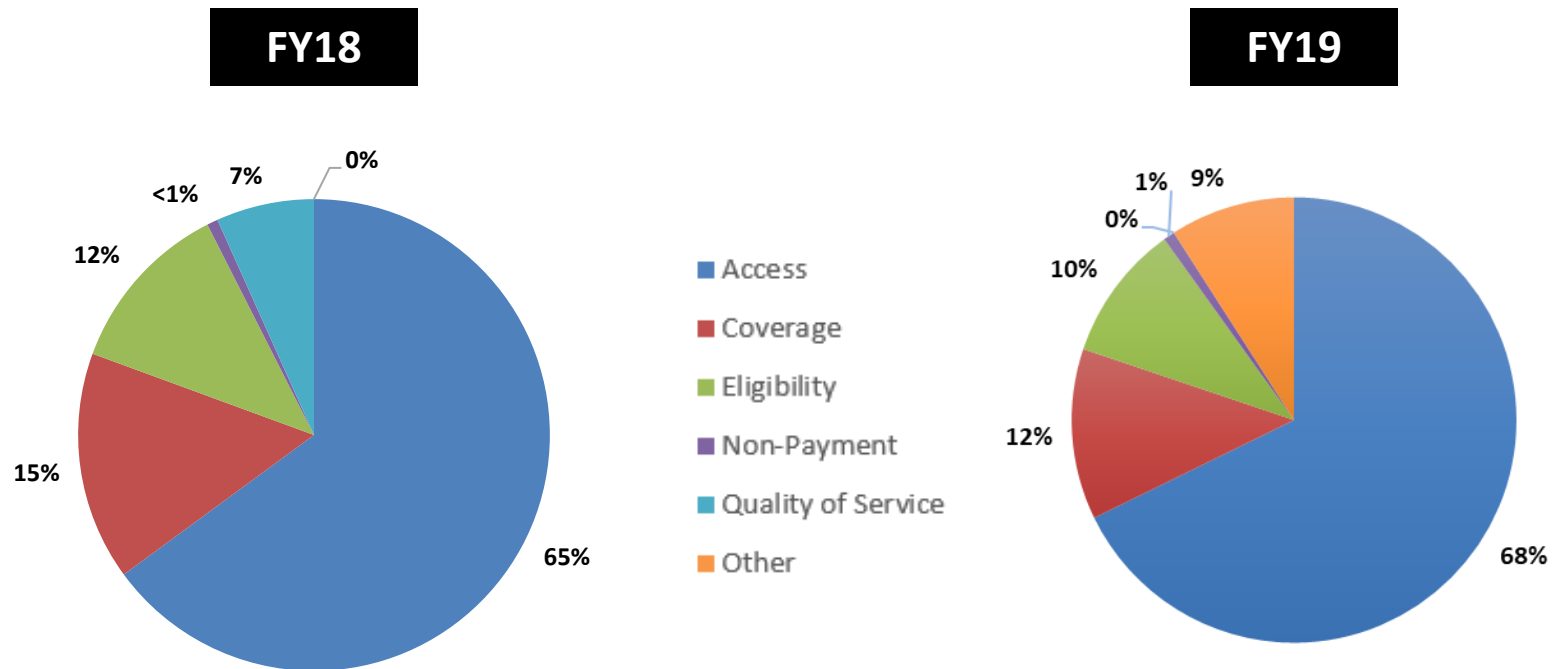


**Table 17. Breakdown of Transportation Contacts by Insurance Type  
FY18 and FY19**

<b>Transportation Contacts by Insurance Type</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
<b>Alliance</b> (includes Alliance/ADAP and Undocumented Alien Child Beneficiaries )	0	0%	0	0%
<b>Commercial Health Plan</b> (includes Appeals/Grievances-Bill of Rights cases)	0	0%	0	0%
<b>Dual Eligible (Medicaid/Medicare)</b> (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)	61	45%	45	37%
<b>Medicaid Fee-for-Service (FFS)</b> (includes FFS/FFS-BCCEDTP/FFS-CHIP/FFS-CHIP- <b>MAGI</b> /FFS-Childless Adult <b>MAGI</b> /FFS-EPD Waiver/FFS-IDD Waiver/FFS-Long-Term Care/FFS- <b>MAGI</b> /FFS-Money Follows the Person Beneficiaries)	33	25%	38	31%
<b>Medicaid Managed Care (MCO)</b> (includes AFDC-TANF/Childless Adult/Childless <b>Adult-MAGI</b> /CHIP/Katie Beckett/TANF/ Special Needs Beneficiaries)	9	7%	12	10%
<b>Medicare</b> (includes Part A; Part B; Part A/B; Part A/B (QMB) and SLMB Beneficiaries)	31	23%	26	22%
<b>Other</b> (includes ADAP/Deceased/Limited/Restricted Coverage/Limited/Restricted-Childless Adult-Incarcerated/Out-of-State Medicaid Coverage/Spend-Down/Undetermined)	0	0%	0	0%
<b>Uninsured</b>	0	0%	0	0%
<b>Total Contacts by Insurance Type</b>	<b>134</b>	<b>100%</b>	<b>121</b>	<b>100%</b>

Source data captured between October 1, 2017 through September 30, 2018 and October 1, 2018 through September 30, 2019

# Figure 18. Breakdown of Types of Issues Encountered by Transportation Contacts FY18 and FY19



**FY18 Total Sample = 134 Contacts**

**FY19 Total Sample = 121 Contacts**

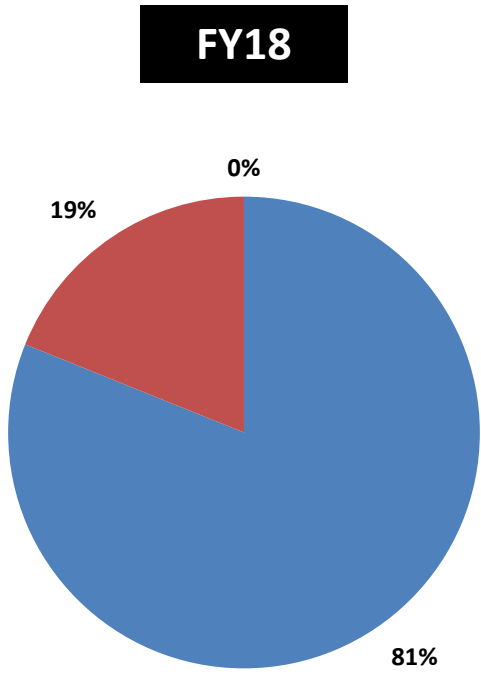
*\*Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction 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 18. Breakdown of Types of Issues Encountered by  
Transportation Contacts  
FY18 and FY19**

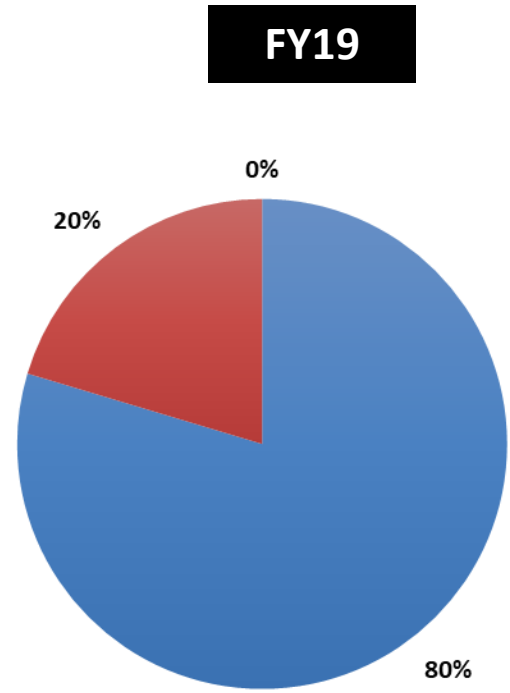
<b>Types of Issues Encountered by Transportation Contacts</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Access (includes prior authorization requests)	87	65%	82	68%
Coverage (includes denials of service)	21	15%	15	12%
Eligibility/Recertification (status of eligibility/verification of coverage)	16	12%	12	10%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	1	1%	1	1%
*Other Issues	0	0%	0	0%
Quality of Service (includes services rendered by the Providers)	9	7%	11	9%
<b>Total Types of Issues-Transportation Contacts</b>	<b>134</b>	<b>100%</b>	<b>121</b>	<b>100%</b>

*\*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 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 19. Breakdown of EPD Waiver Contacts by Insurance Type FY18 and FY19



**FY18 Total Sample = 968 Contacts**



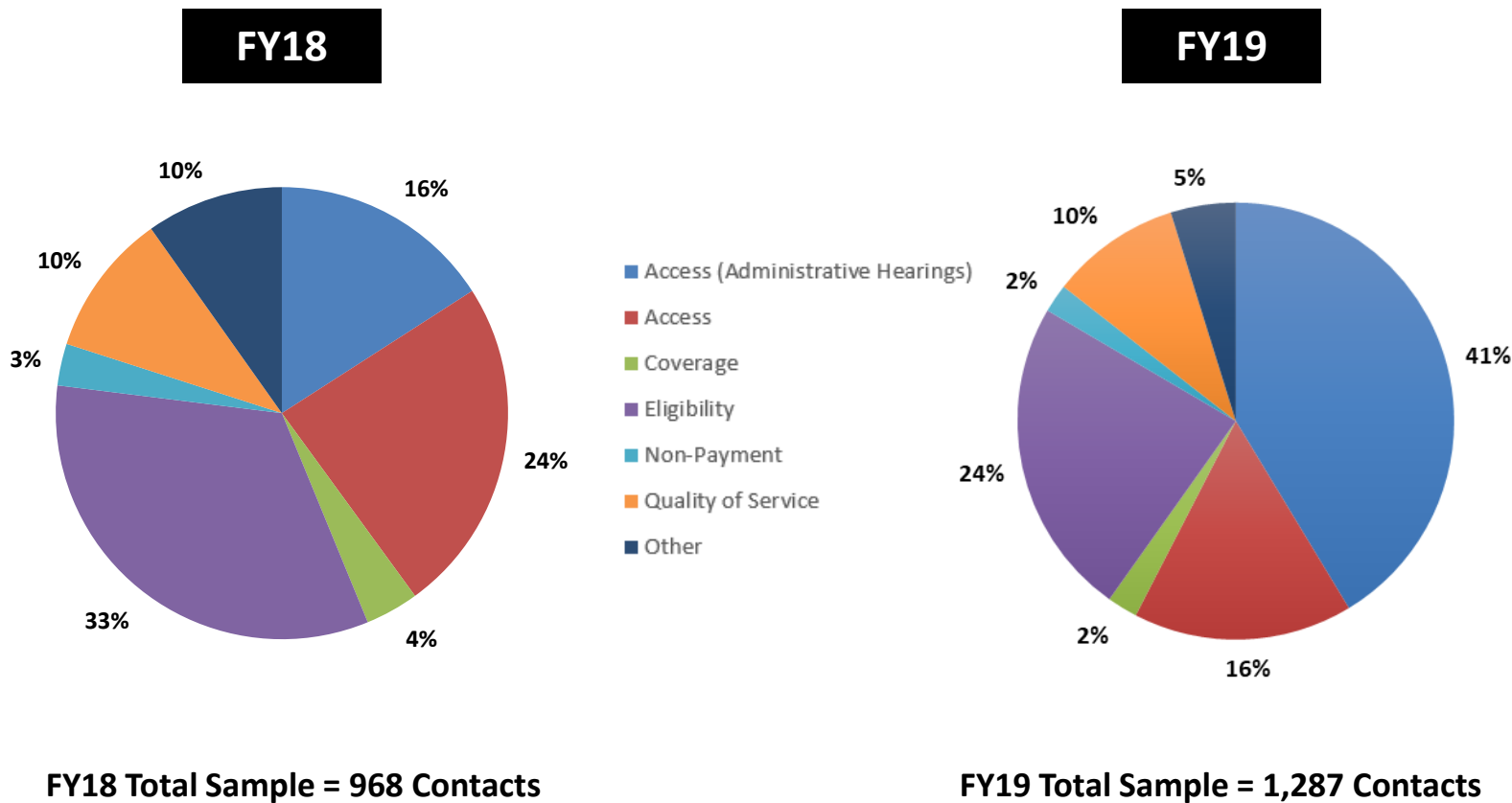
**FY19 Total Sample = 1,287 Contacts**

*\*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 19. Breakdown of EPD Waiver Contacts by Insurance Type  
FY18 and FY19**

<b>EPD Waiver Contacts by Insurance Type</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Dual Eligible (Medicare/Medicaid) – (includes Dual Eligible-EPD Waiver)	785	81%	1,025	80%
Fee-For-Service (Medicaid) – (includes FFS/FFS-EPD Waiver)	183	19%	262	20%
Other (Undetermined/Uninsured/Limited/Restricted Coverage)	0	0%	0	0%
<b>Total EPD Waiver Contacts by Insurance Type</b>	<b>968</b>	<b>100%</b>	<b>1,287</b>	<b>100%</b>

# Figure 20. Breakdown of Types of Issues Encountered by EPD Waiver Contacts FY18 and FY19



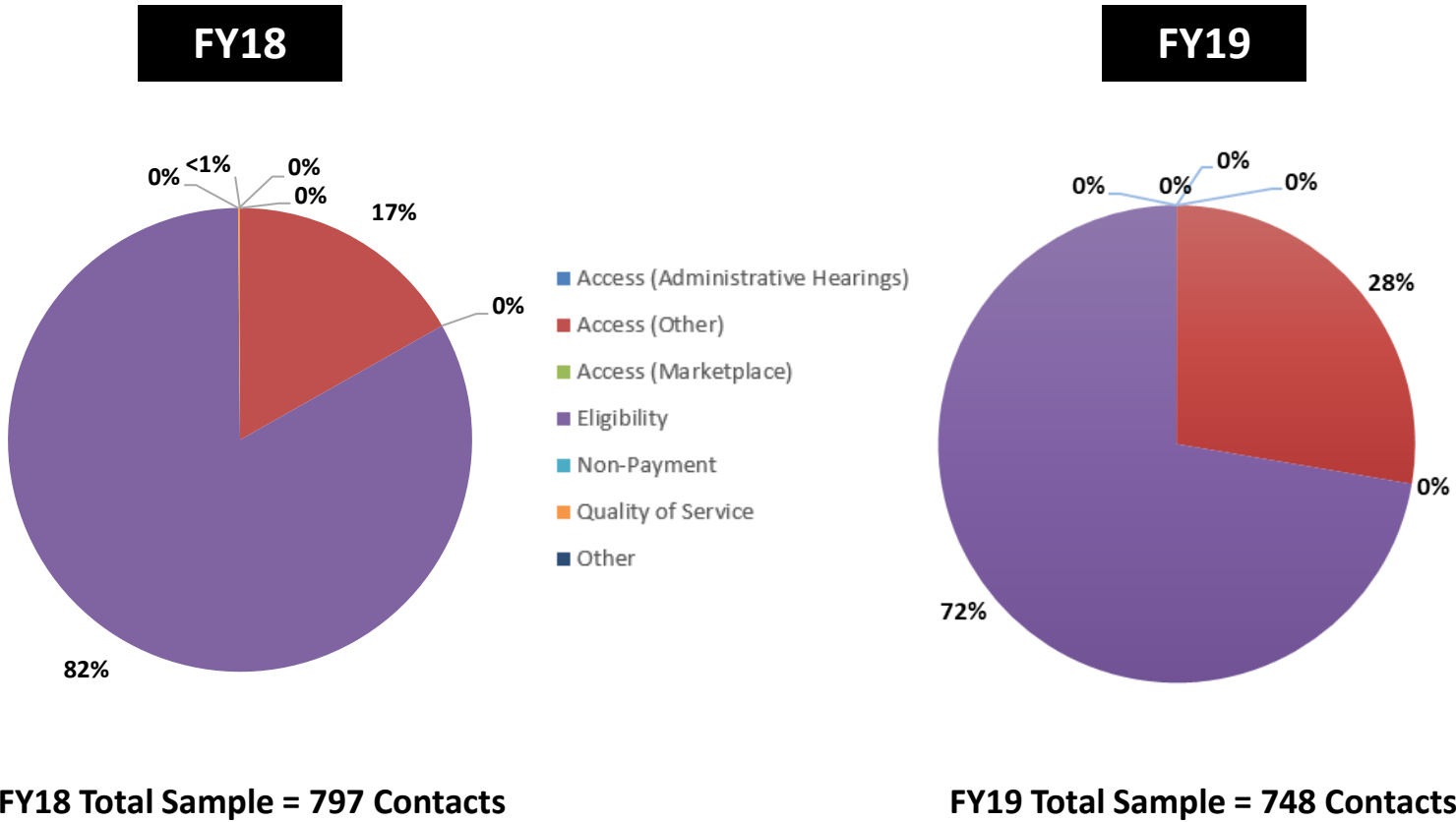
*\*Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction 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 20. Breakdown of Types of Issues Encountered by  
EPD Waiver Contacts  
FY18 and FY19**

<b>Types of Issues Encountered by EPD Waiver Contacts</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Access (Administrative Hearings)	154	16%	532	41%
Access (includes Access to services to include Prior Authorization requests)	233	24%	209	16%
Coverage (denials of services)	37	4%	29	2%
Eligibility/Recertification ( status of eligibility/verification of coverage)	321	33%	304	24%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	29	3%	27	2%
*Other Issues	99	10%	124	10%
Quality of Service (services rendered by Providers)	95	10%	62	5%
<b>Total Types of Issues-EPD Waiver Contacts</b>	<b>968</b>	<b>100%</b>	<b>1,287</b>	<b>100%</b>

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

# Figure 21. Breakdown of Types of Issues Encountered by DC Health Link and Health Exchange Marketplace Contacts FY18 and FY19



*\*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.*

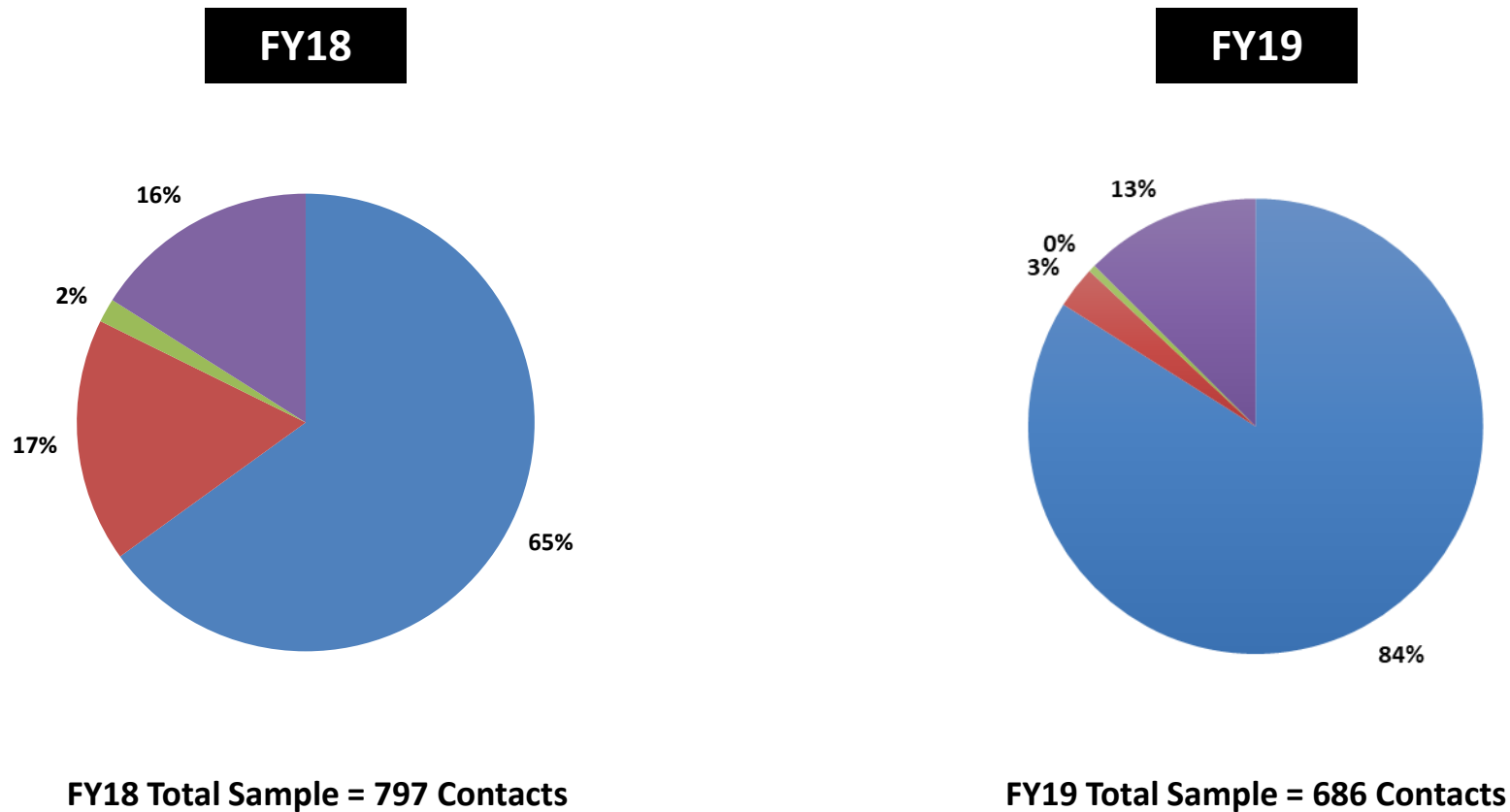


**Table 21. Breakdown of Types of Issues Encountered by DC Health Link and Health Care Exchange Marketplace Contacts FY18 and FY19**

<b>Types of Issues Encountered by DC Health Link and Health Care Exchange Marketplace Contacts</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Access (Administrative Hearings)	0	0%	0	0%
Access (includes applications for insurance coverage/applications for retroactive Medicaid/recertification application and DC Health Link Services)	134	>16%	207	28%
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)	662	83%	541	72%
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)	1	<1%	0	0%
<b>Total Types of Issues-DC Health Link/Health Care Exchange Marketplace Contacts</b>	<b>797</b>	<b>100</b>	<b>748</b>	<b>100%</b>

*\*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.*

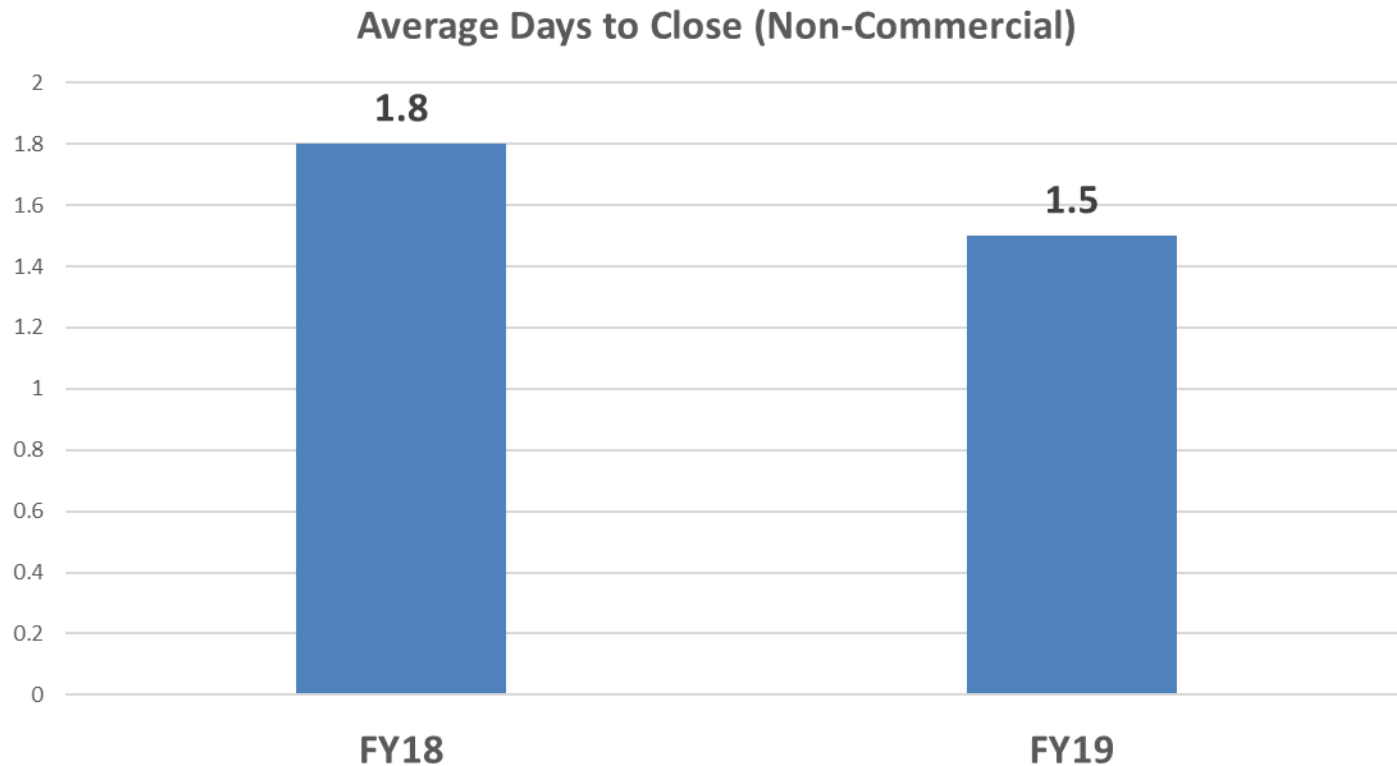
**Figure 22. Dollar Amount of Savings on Behalf of (Non-Commercial) and (Commercial-Appeals/Grievances-Bill of Rights) Contacts FY18 and FY19**



**Table 22. Dollar Amount of Savings on Behalf of (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) Contacts FY18 and FY19**

Dollar Amount of Savings on Behalf of (Non-Commercial); (Commercial-Appeals/Grievances-Bill-Rights) Contacts	FY18 Totals	FY18 Percent (%)	FY19 Totals	FY19 Percent (%)
Commercial (to include Appeals/Grievances-Bill of Rights)	\$1,272,470.26	65%	2,495,165.85	84%
Medicaid (to include Fee-For-Service/MCO/Alliance Beneficiaries) – (Non-payments of beneficiaries’ medical bills)	\$337,576.36	17%	\$88,424.46	3%
Qualified Medicare Beneficiaries (QMB) - (Co-Pays)	\$32,960.85	2%	\$15,288.78	<1%
Medicare (to Include Part B/Dual Eligible) – (Reimbursements for non-payments of beneficiaries’ Part B Premiums)	\$313,299.30	16%	\$372,145.90	>12%
<b>Total Dollar Amount of Savings on Behalf of All Consumers</b>	<b>\$1,956,306.77</b>	<b>100%</b>	<b>\$2,971,024.99</b>	<b>100%</b>

**Figure 23. Average Number of Days to Resolve/Close  
(Non-Commercial) Cases  
FY18 and FY19**



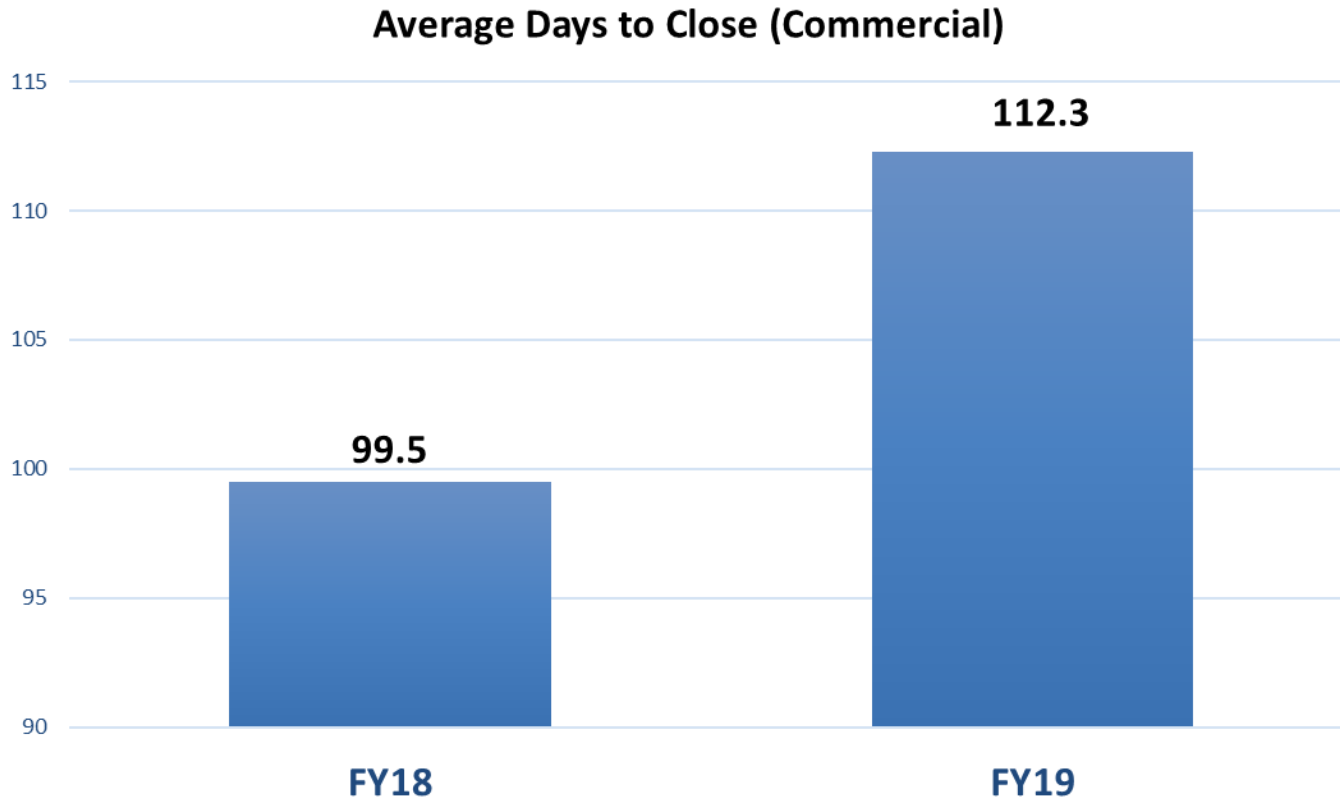
**FY18 Total Cases Resolved/Closed = 11,045 Cases**

**FY19 Total Cases Resolved/Closed = 11,395 Cases**

**Table 23. Average Number of Days to Resolve/Close  
(Non-Commercial) Cases  
FY18 and FY19**

<b>FY18 Average Number of Days to Resolve/Close (Non-Commercial) Cases</b>	<b>FY18 Total</b>	<b>FY19 Average Number of Days to Resolve/Close (Non-Commercial) Cases</b>	<b>FY19 Total</b>
<b>Average Number of Days It Took to Resolve/Close (11,045) (Non-Commercial) cases</b>	<b>1.8 days</b>	<b>Average Number of Days It Took to Resolve/Close (11,395) (Non-Commercial) cases</b>	<b>1.5 days</b>
<b>Note: Of the (11,067) (Non-Commercial) cases opened, the OHCOBR resolved/closed (9,393) cases on same day that cases were opened</b>		<b>Note: Of the (11,395) (Non-Commercial) cases opened, the OHCOBR resolved/closed (9,360) cases on same day that cases were opened</b>	

**Figure 24. Average Number of Days to Resolve/Close  
(Commercial-Appeals/Grievances-Bill of Rights) Cases  
FY18 and FY19**



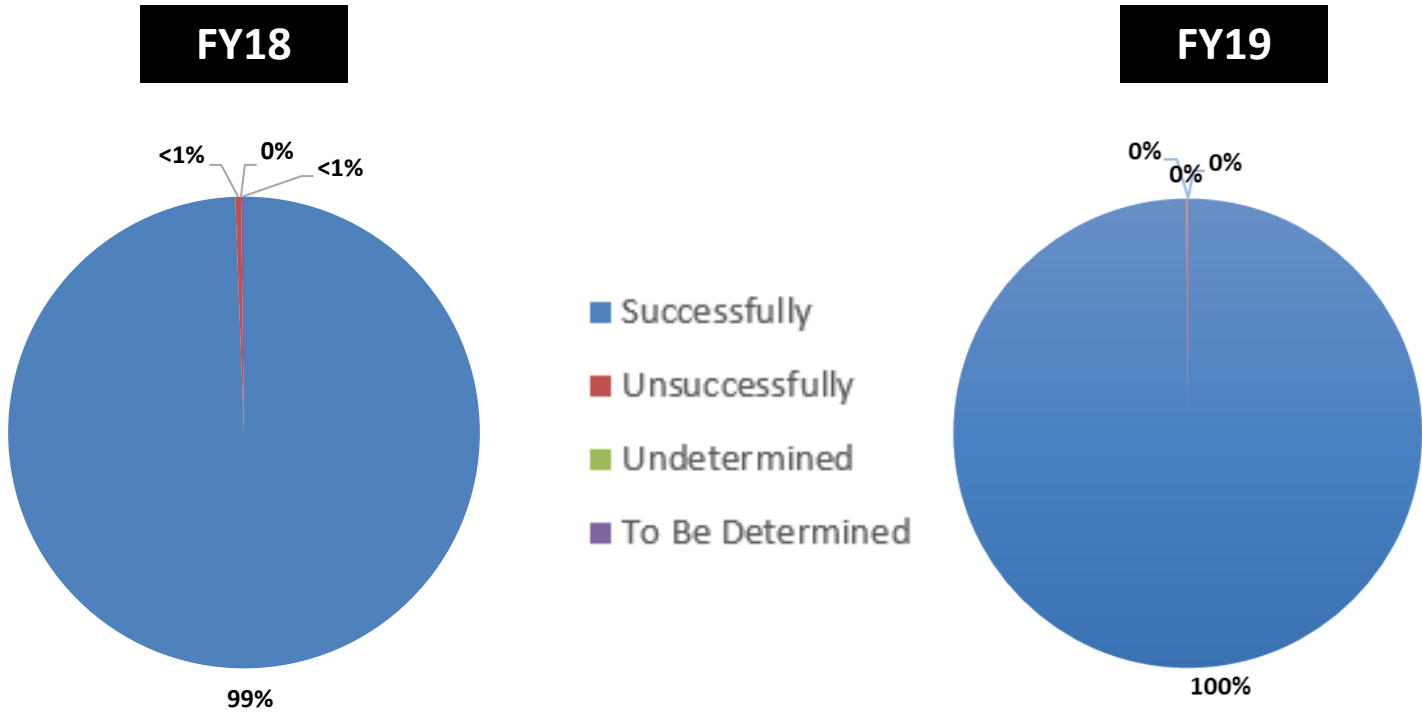
**FY18 Total Cases Resolved/Closed = 175 Cases**

**FY19 Total Cases Resolved/Closed = 242 Cases**

**Table 24. Average Number of Days to Resolve/Close  
(Commercial-Appeals/Grievances-Bill of Rights) Cases  
FY18 and FY19**

<b>FY18 Average Number of Days to Resolve/Close (Commercial-Appeals/Grievances- Bill of Rights) Cases</b>	<b>FY18 Total</b>	<b>FY19 Average Number of Days to Resolve/Close (Commercial-Appeals/Grievances- Bill of Rights) Cases</b>	<b>FY19 Total</b>
<b>Average Number of Days It Took to Resolve/Close (175) (Commercial- Appeals/Grievances-Bill of Rights) Cases</b>	<b>99.5 days</b>	<b>Average Number of Days It Took to Resolve/Close (242) Commercial- Appeals/Grievances-Bill of Rights) Cases</b>	<b>112.3 days</b>
<b>Note: Of the (242) (Commercial- Appeals/Grievances-Bill of Rights) cases opened, the OHCOBR resolved/closed (6) cases on same day that cases were opened</b>		<b>Note: Of the (259) (Commercial- Appeals/Grievances-Bill of Rights) cases opened, the OHCOBR resolved/closed (7) cases on same day that cases were opened</b>	

**Figure 25. Breakdown of Number and Percentage of How (Non-Commercial) Cases Were Resolved/Closed and Cases Not Resolved/Closed by the OHCOBR FY18 and FY19**



**FY18 Total Sample = 11,067 Cases**

**FY19 Total Sample = 11,395 Cases**

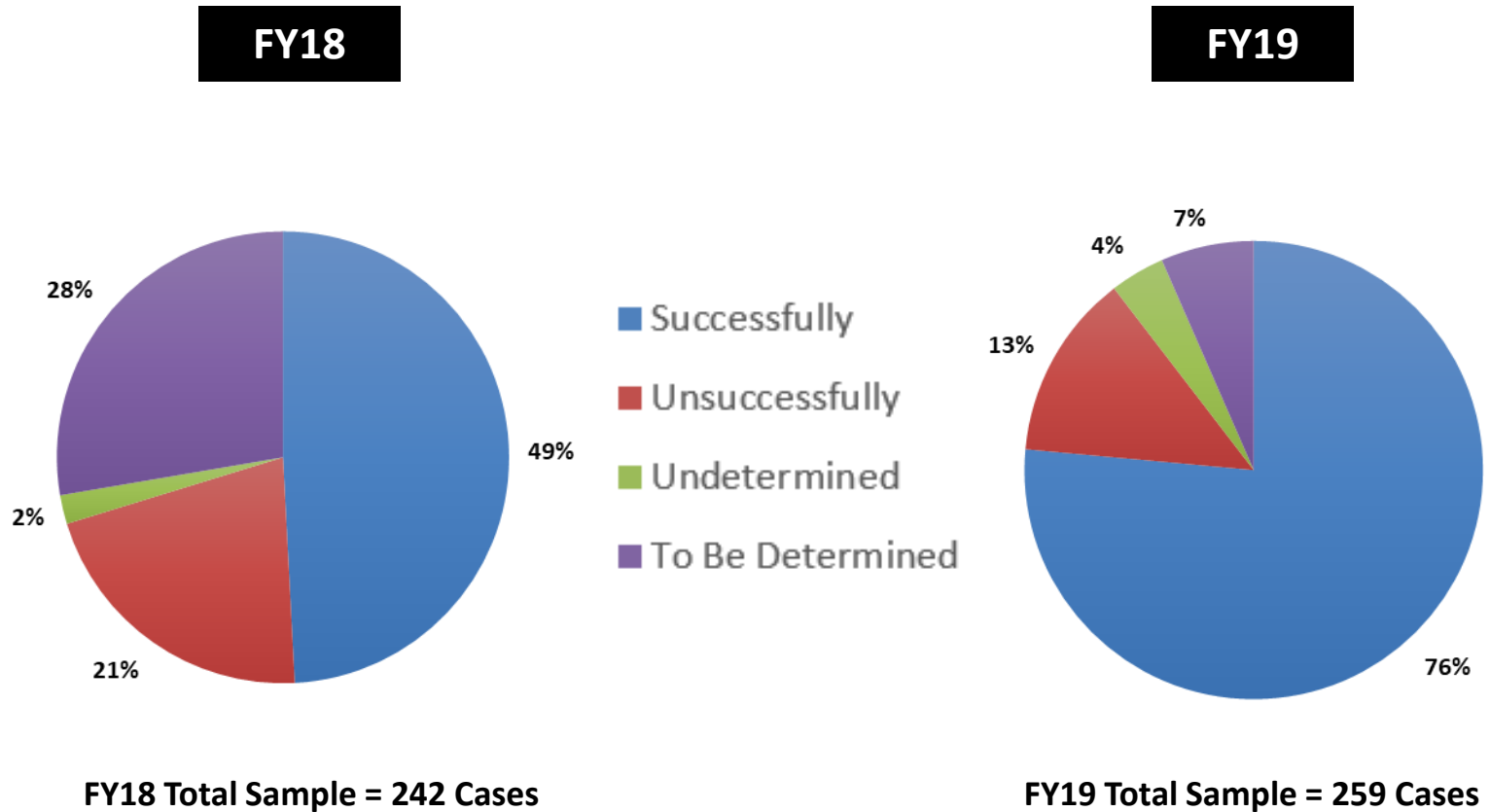
Source data captured between October 1, 2017 through September 30, 2018 and October 1, 2018 through September 30, 2019



**Table 25. Breakdown of Number and Percentage of How  
(Non-Commercial) Cases Were Resolved/Closed and  
Cases Not Resolved/Closed by the OHCOBR  
FY18 and FY19**

<b>How (Non-Commercial) Cases were Resolved/Closed and Cases Not Resolved/ Closed</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Closure of Cases - Successfully	11,001	99%	11,384	>99%
Closure of Cases -Unsuccessfully	44	<1%	11	<1%
Closure of Cases (Referred) -Undetermined	0	0%	0	0%
Opened Cases (Pending) - To Be Determined	22	<1%	0	0%
<b>Total Number and Percentage of (Non- Commercial) Cases</b>	<b>11,067</b>	<b>100%</b>	<b>11,395</b>	<b>100%</b>

**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 FY18 and FY19**



Source data captured between October 1, 2017 through September 30, 2018 and October 1, 2018 through September 30, 2019

**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  
FY18 and FY19**

<b>How (Commercial-Appeals/Grievances-Bill of Rights) Cases were Resolved/Closed and Cases Not Resolved/Closed</b>	<b>FY18 Totals</b>	<b>FY18 Percent (%)</b>	<b>FY19 Totals</b>	<b>FY19 Percent (%)</b>
Closure of Cases - Successfully	124	51%	208	80%
Closure of Cases - Unsuccessfully	51	21%	34	13%
Closure of Cases (Referred) - Undetermined	0	0%	0	0%
Opened Cases (Pending) - To Be Determined	67	28%	17	7%
<b>Total Number and Percentage of (Commercial-Appeals/Grievances-Bill of Rights) Cases</b>	<b>242</b>	<b>100%</b>	<b>259</b>	<b>100%</b>

# 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