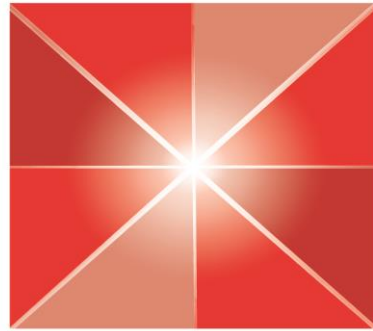


**Office of Health Care Ombudsman and Bill of Rights (OHCOBR)
FY2020 Summary of Cases
October 1, 2019 through September 30, 2020**

DISTRICT OF
COLUMBIA



HEALTH CARE
OMBUDSMAN

“The Knowledge to Guide You”

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

Highlights - FY2020 Contact Summary

- In FY2020, the Office of Health Care Ombudsman and Bill of Rights opened a grand total of (11,905) Non-Commercial and Commercial cases - (See Pages 4-5);
- Of the (11,905) cases opened - (11,616) cases were Non-Commercial - (See Pages 4-5);
- Percentage of resolved/closed Non-Commercial cases was (>99% or 11,566 resolved/closed cases) out of a total of (11,616) Non-Commercial cases opened – (See Pages 6-7);
- In FY2020, the Average Number of Days for the Office of Health Care Ombudsman and Bill of Rights to resolve/close (11,566) Non-Commercial cases was (2.1) days -(See Pages 51-52);
- Of the (11,616) Non-Commercial cases opened in FY2020, the Office of Health Care Ombudsman and Bill of Rights resolved/closed (9,372) cases on same day that cases were opened - (See Page 52);
- Of the grand total of (11,905) cases opened by the Office of Health Care Ombudsman and Bill of Rights – (289) cases were among the Commercial Health Plan Members – (See Pages 4-5);
- Percentage of resolved/closed Commercial-Appeals/Grievances cases was (>99% or 288) resolved/closed cases) out of a total of (289) commercial-appeals/grievances cases opened - (See Pages 8-9);
- In FY2020, the Average Number of Days for the Office of Health Care Ombudsman and Bill of Rights to resolve/close Commercial-Appeals/Grievances cases was (75.7) days - (See Pages 53-54);
- Of the (289) Commercial-Appeals/Grievances cases opened in FY2020, the Office of Health Care Ombudsman and Bill of Rights resolved/closed (9) 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 (\$2,454,019.38). Of the total dollar amount saved (74%) was from Commercial-Appeals/Grievances cases. (See Pages 49-50);
- Of the (380) Administrative/Fair Hearing cases filed by the Office of Health Care Ombudsman and Bill of Rights (72% or 272 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—(69% or 8,234 contacts) (See Pages 10-11);
- Consumers from all Wards and States located within and outside of the DC Metropolitan Area contacted the Office of Health Care Ombudsman and Bill of Rights-- (Ward (7) had the highest number of contacts (17% or 2,058 contacts), followed by Ward (4), and Ward (8) - (See Pages 14-15);
- Most contacts made to the Office of Health Care Ombudsman and Bill of Rights were by Medicaid Managed Care (MCO) beneficiaries - (35% or 4,187 contacts) - (See Pages 12 -13);
- Eligibility issues represented the largest category of issues encountered by all consumers – (47% or 5,639 issues) - (See Pages 18-19);
- Eligibility issues represented the largest category of issues encountered by Dual Eligible (Medicare and Medicaid);
- Eligibility issues represented the largest category of issues encountered by 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 FY2020, the Office of Health Care Ombudsman and Bill of Rights opened a total of (96) Transportation Cases versus the (121) Transportation cases opened in FY2019 – (See Pages 39-40);
- The Office of Health Care Ombudsman and Bill of Rights opened a total of (821) EPD Waiver Cases in FY2020 versus the (1,287) EPD Waiver cases opened in FY2019 – (See Pages 43-44); and
- In FY2020, the Office of Health Care Ombudsman and Bill of Rights opened a total of (980) DC Health Link cases versus the (748) DC Health Link cases opened in FY2019 - (See Pages 47-48).

Office of Health Care Ombudsman and Bill of Rights (OHCOBR) FY2020

Summary of Activities

During Fiscal Year 2020, 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 2020 (October 1, 2019 through September 30, 2020).

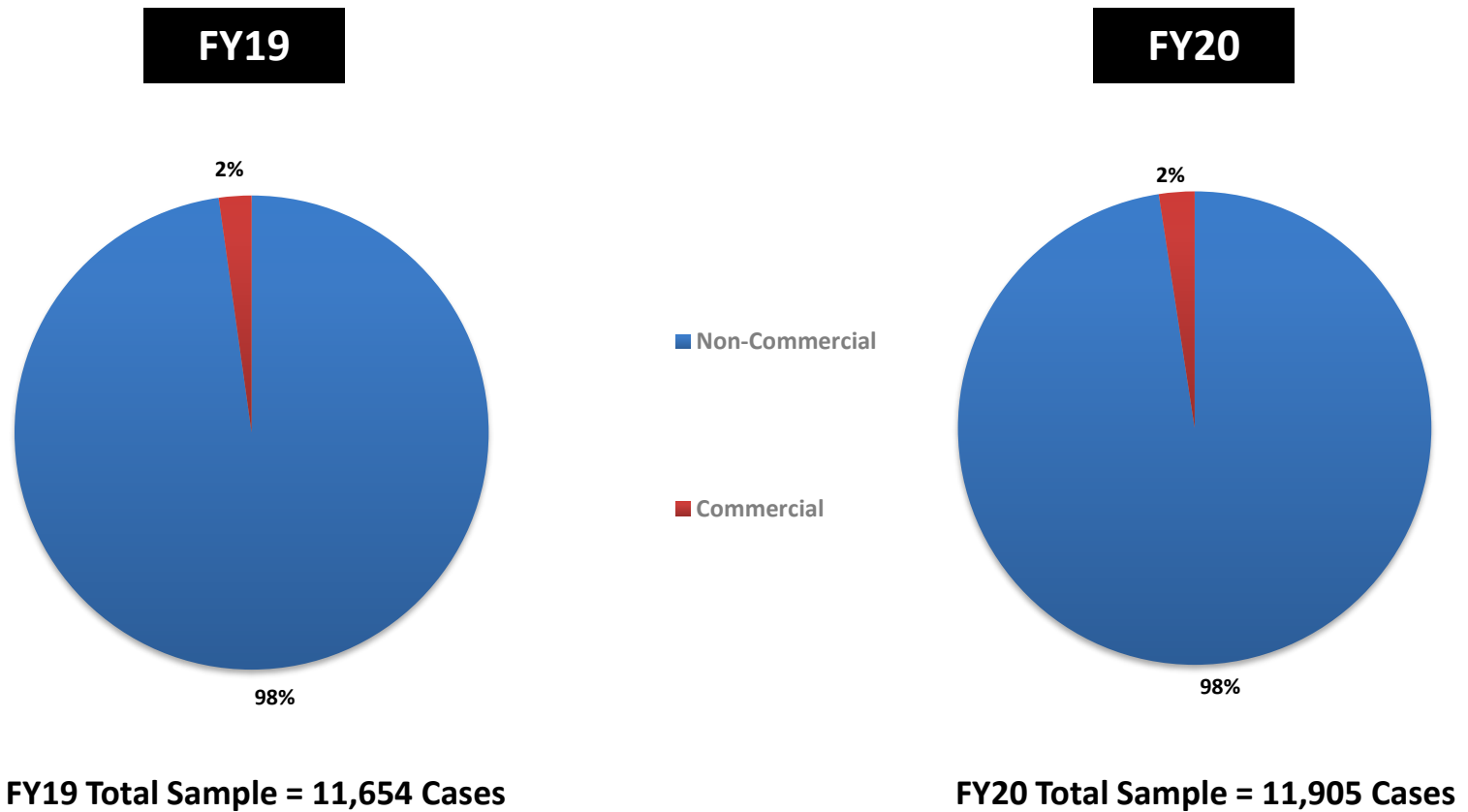
In summarizing the activities from the Ombudsman In-Take Data System (OIDS), the OHCOBR sought to answer the following key questions:

- *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 2020, the OHCOBR received a total of (1,754) contacts by individuals (consumers) who were repeat users versus (2,472) contacts in FY2019;*

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.*

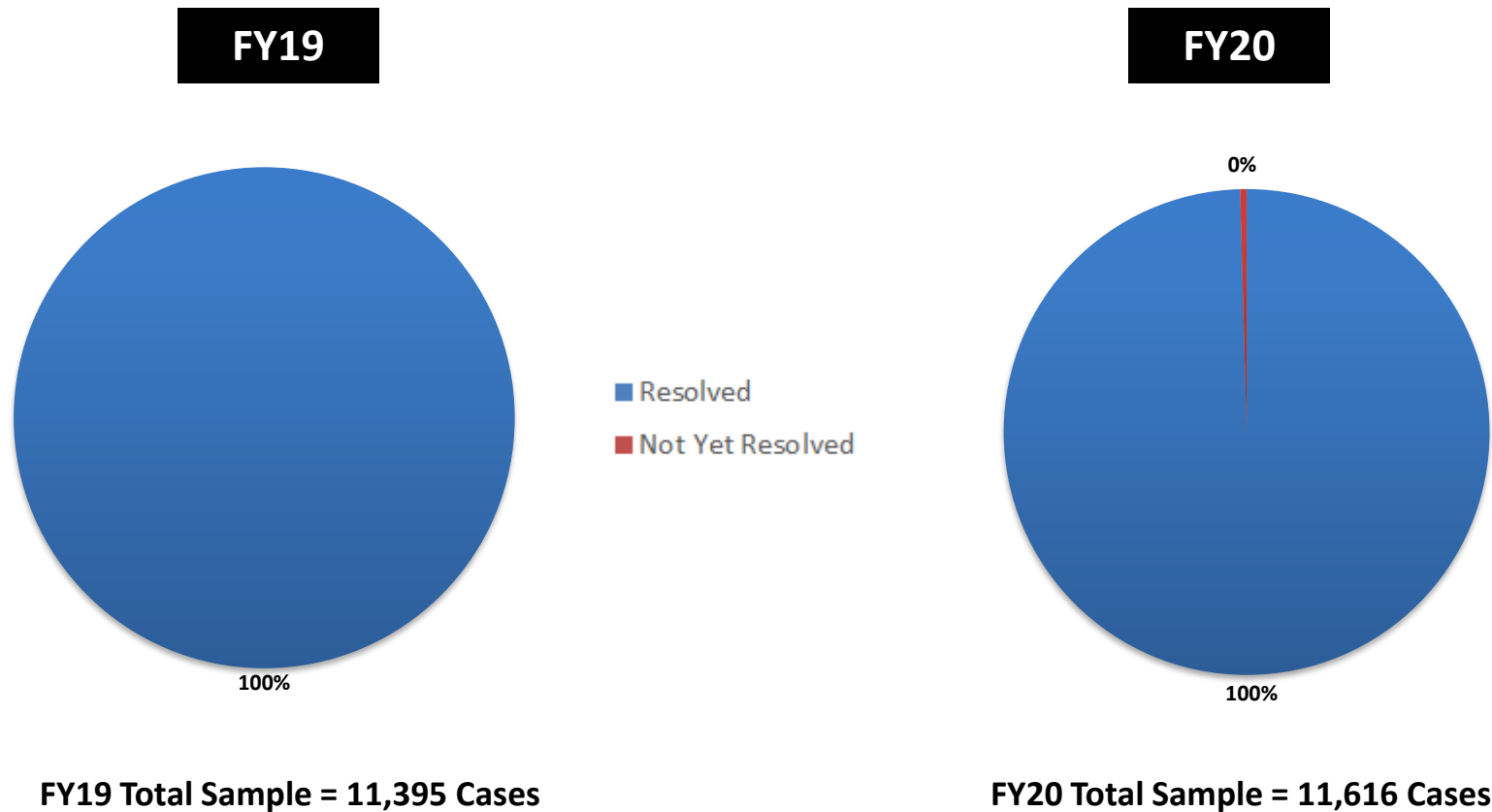
Figure 1. Total Number and Percentage of Opened Cases Among All Contacts (Non-Commercial and Commercial Appeals/Grievances-Bill of Rights) FY19 and FY20



**Table 1. Total Number and Percentage of Opened Cases Among All Contacts
(Non-Commercial and Commercial Appeals/Grievances-Bill of Rights)
FY19 and FY20**

Opened Cases (All Contacts)	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Non-Commercial Cases	11,395	98%	11,616	98%
Commercial (Appeals/Grievances— Bill of Rights) Cases	259	2%	289	2%
Total (Non-Commercial) and (Commercial-Appeals/Grievances- Bill of Rights) Opened Cases	11,654	100%	11,905	100%

**Figure 2. Number and Percentage of Resolved/Closed Cases and Cases Not Resolved/Closed Among (Non-Commercial) Contacts
FY19 and FY20**

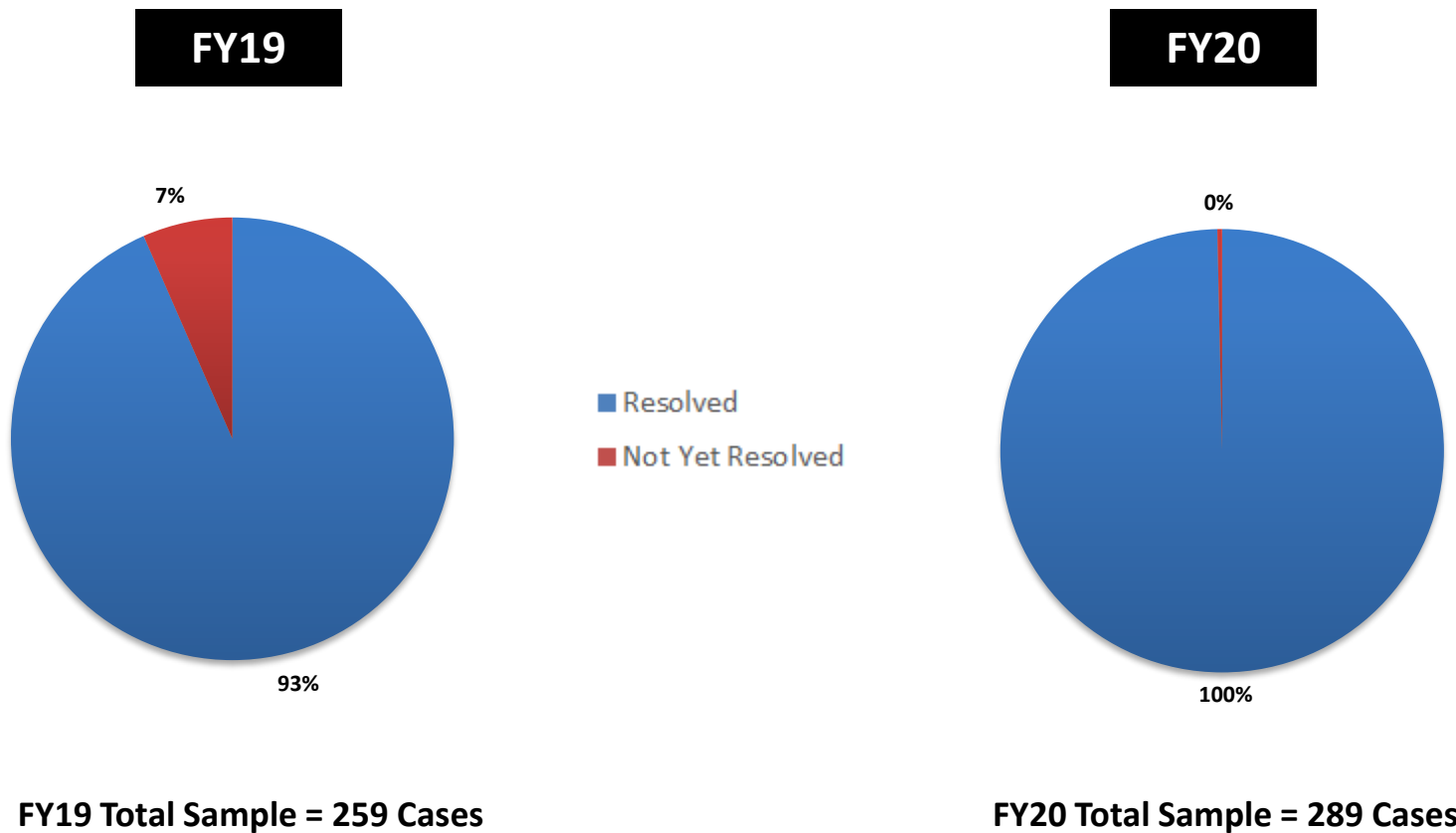


Source data captured between October 1, 2018 through September 30, 2019 and October 1, 2019 through September 30, 2020

Table 2. Number and Percentage of Resolved/Closed Cases and Cases Not Resolved/Closed Among (Non-Commercial) Contacts FY19 and FY20

Resolved/Closed Cases (Non-Commercial)	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Cases Resolved/Closed	11,395	100%	11,566	>99%
Cases Not Yet Resolved/Closed	0	0%	50	<1%
Total (Non-Commercial) Contacts/Cases	11,395	100%	11,616	100%

Figure 3. Number and Percentage of Resolved/Closed Cases and Cases Not Resolved/Closed Among (Commercial-Appeals/Grievances-Bill of Rights) FY19 and FY20

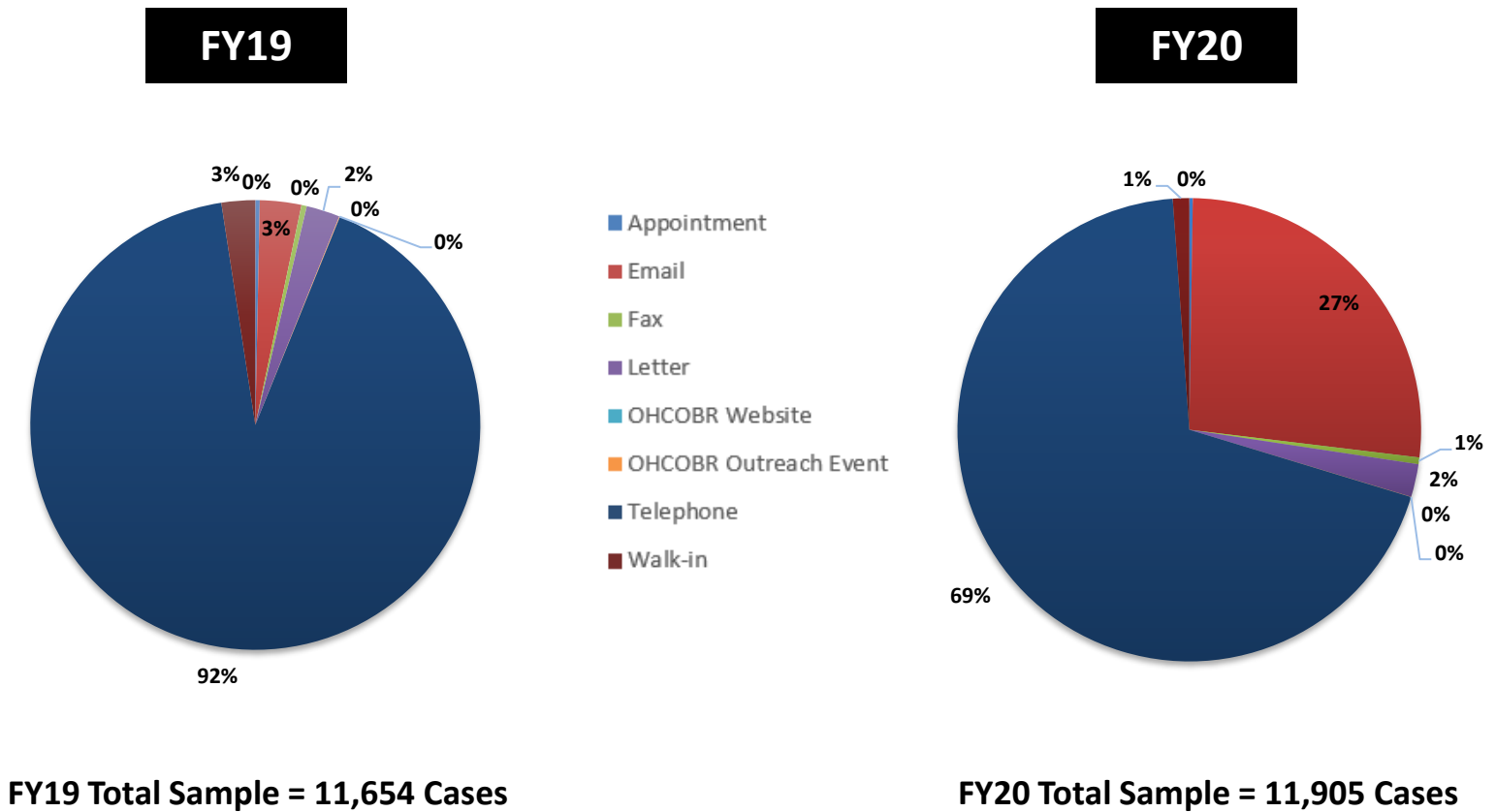


Source data captured between October 1, 2018 through September 30, 2019 and October 1, 2019 through September 30, 2020

Table 3. Number and Percentage of Resolved/Closed Cases and Cases Not Resolved/Closed Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts FY19 and FY20

Resolved/Closed Cases (Commercial-Appeals/Grievances-Bill of Rights)	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Appeals/Grievances Cases Resolved/Closed	240	93%	288	>99%
Appeals/Grievances Cases Not Yet Resolved/Closed	19	7%	1	<1%
Total (Commercial-Appeals/Grievances-Bill of Rights) Contacts/Cases	259	100%	289	100%

Figure 4. Methods of Contacting the Office of Health Care Ombudsman and Bill of Rights (OHCOBR) FY19 and FY20

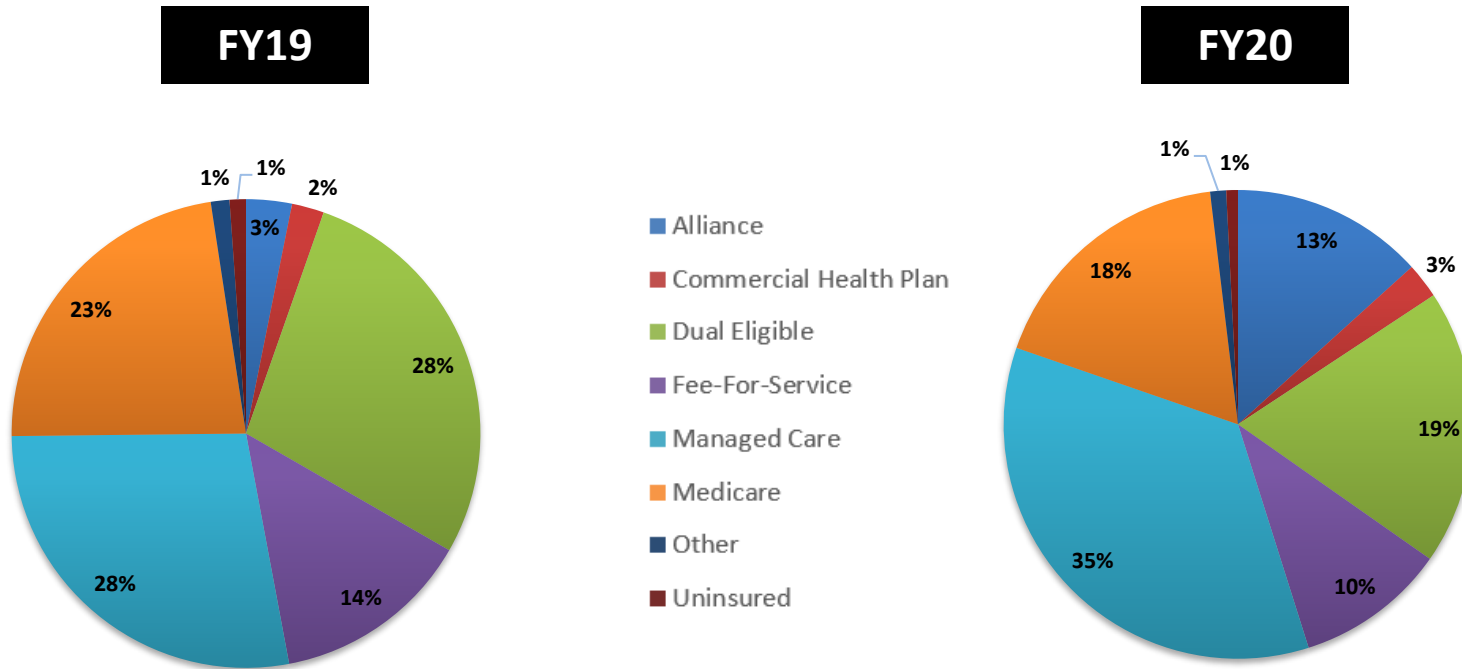


Source data captured between October 1, 2018 through September 30, 2019 and October 1, 2019 through September 30, 2020

**Table 4. Methods of Contacting the Office of Health Care Ombudsman
and Bill of Rights (OHCOBR)
FY19 and FY20**

Methods of Contacting OHCOBR	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Appointment	37	<1%	29	<1%
Email	347	3%	3,175	27%
Fax	45	<1%	56	<1%
Letter	281	2%	273	2%
OHCOBR's Website (E-mails)	0	0%	0	0%
OHCOBR's Outreach Events	6	<1%	2	<1%
Telephone	10,656	91%	8,234	69%
Walk-In	282	2%	136	1%
Total Methods of Contacting OHCOBR	11,654	100%	11,905	100%

Figure 5. Categories of Contacts by Insurance Type FY19 and FY20



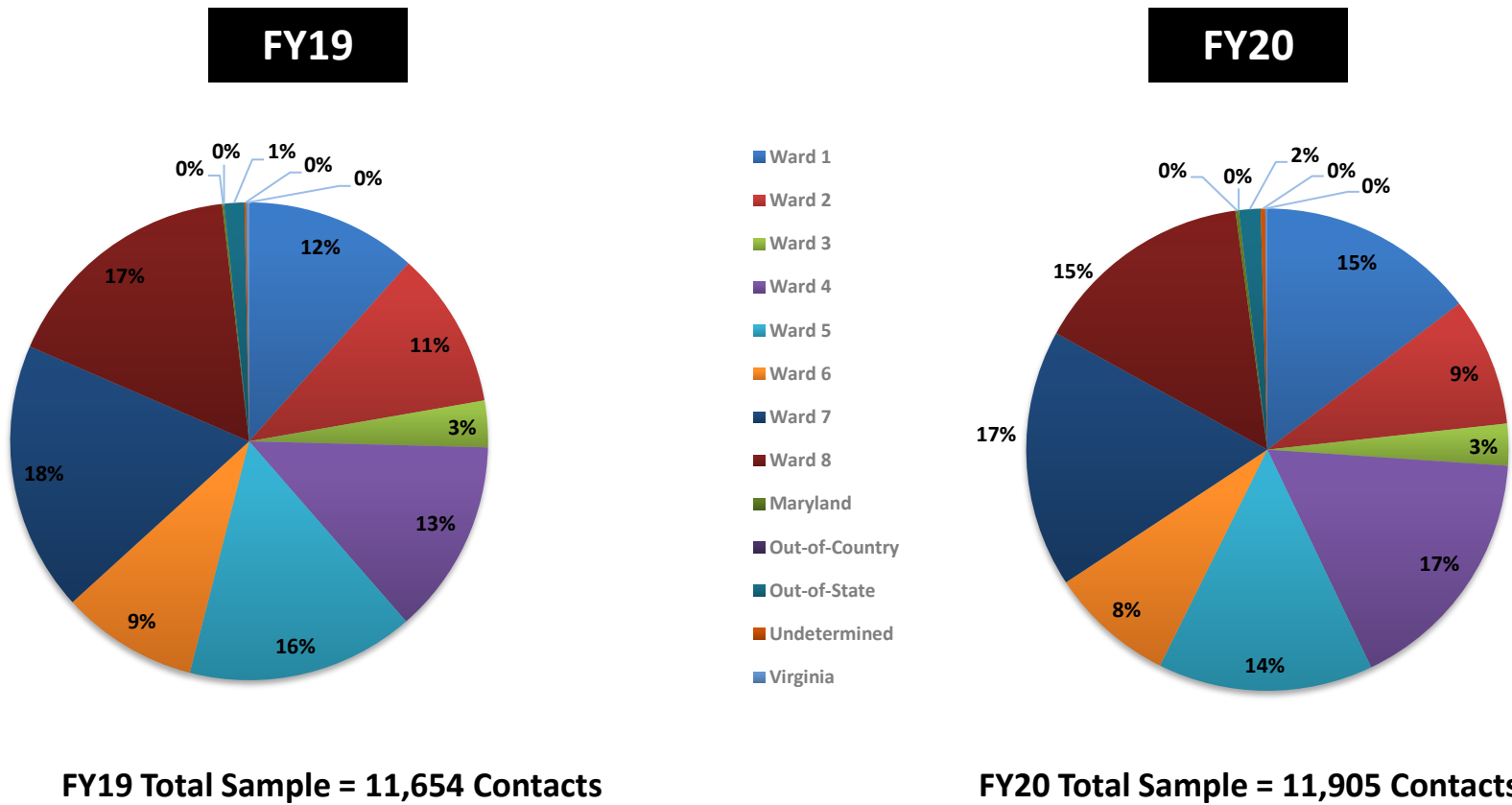
FY19 Total Sample = 11,654 Contacts

FY20 Total Sample = 11,905 Contacts

**Table 5. Categories of Contacts by Insurance Type
FY19 and FY20**

Categories of Insurance Type	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Alliance (includes Alliance/ADAP and Immigrant Children beneficiaries)	368	3%	1,582	13%
Commercial Health Plan (includes Medicare/Commercial Part D Prescription Plans -- Appeals/Grievances-Bill of Rights cases)	259	2%	289	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)	3,254	28%	2,264	19%
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)	1,602	14%	1,237	11%
Medicaid Managed Care (MCO) (includes AFDC-TANF/Childless Adult/Childless Adult-MAGI/CHIP/Katie Beckett/TANF/Special Needs Beneficiaries)	3,237	28%	4,187	35%
Medicare (includes Part A; Part B; Part A/B; Part A/B (QMB) and SLMB Beneficiaries)	2,653	23%	2,119	18%
Other (includes ADAP/Deceased/Limited/Restricted Coverage/Limited/Restricted-Childless Adult-Incarcerated/Out-of-State Medicaid Coverage/Spend-Down/Undetermined)	150	1%	131	1%
Uninsured	131	1%	96	1%
Total Contacts by Insurance Type	11,654	100%	11,905	100%

Figure 6. Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area FY19 and FY20



Source data captured between October 1, 2018 through September 30, 2019 and October 1, 2019 through September 30, 2020

**Table 6. Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area
FY19 and FY20**

Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Ward 1	1,354	12%	1,744	15%
Ward 2	1,240	11%	1,026	9%
Ward 3	367	3%	333	3%
Ward 4	1,536	13%	2,006	17%
Ward 5	1,796	15%	1,718	14%
Ward 6	1,077	9%	998	8%
Ward 7	2,127	18%	2,058	17%
Ward 8	1,946	17%	1,770	15%
Maryland (Located Within the DC Metropolitan Area)	16	<1%	27	<1%
Out-of-Country	0	0%	0	0%
Out-of-State (States Located Outside of the DC Metropolitan Area)	159	1%	172	1%
Undetermined	15	<1%	37	<1%
Virginia (Located Outside of the DC Metropolitan Area)	21	<1%	16	<1%
Total Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area	11,654	100%	11,905	100%

Types of Issues Encountered

The following issues were encountered by Consumers:

Access/Coverage (includes denials of services):

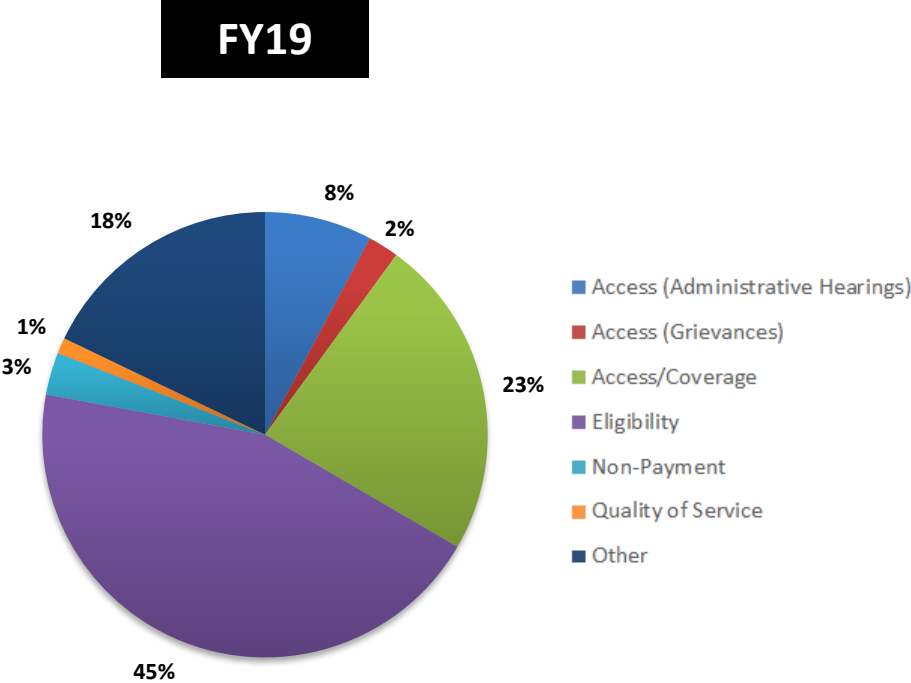
- ❖ **Access to Administrative Hearings:** to include denials of Breast Augmentation/Dental Services/, DME Services/ In-Patient Services (Hospital)/Medicaid Coverage/Medical Assistance/Food Stamps/Optical Services/Prescription Services/Increase in PCA Hours (EPD Waiver)/Home Health Services (EPD Waiver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

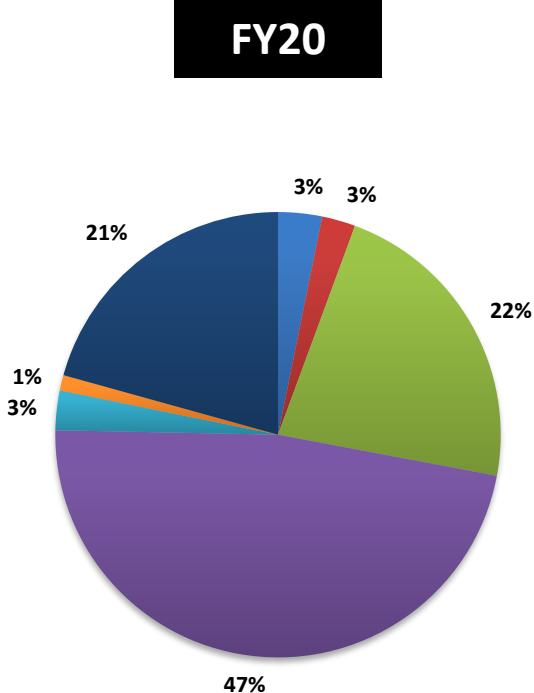
The following issues were encountered by Consumers (continued):

- ❖ **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) FY19 and FY20



FY19 Total Sample = 11,654 Contacts



FY20 Total Sample = 11,905 Contacts

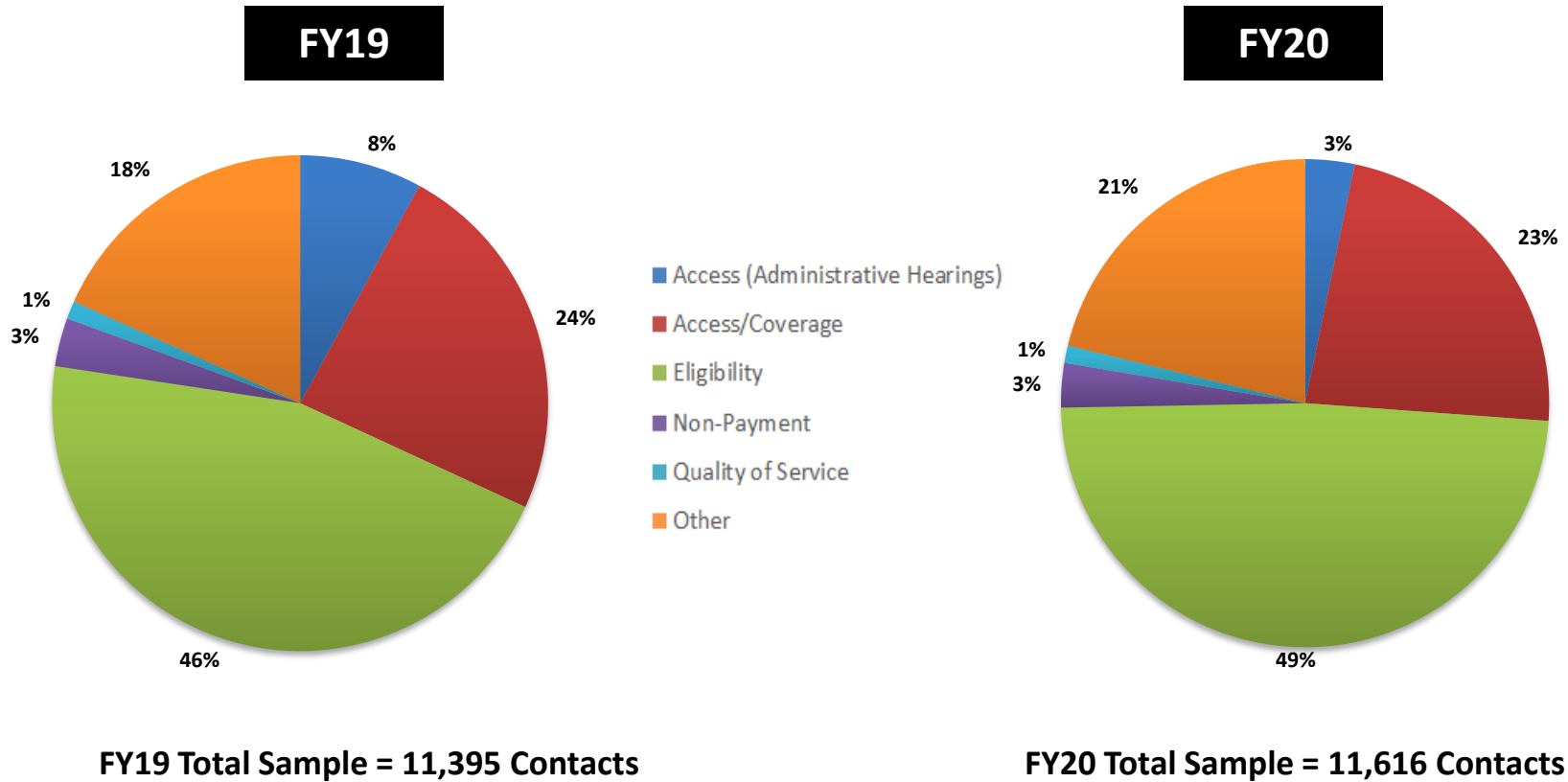
Source data captured between October 1, 2018 through September 30, 2019 and October 1, 2019 through September 30, 2020

**Table 7. Breakdown of Types of Issues Encountered by All Contacts –
(Non-Commercial) and (Commercial-Appeals/Grievances-Bill of Rights)
FY19 and FY20**

Types of Issues Encountered by All Contacts (Non-Commercial); and (Commercial- Appeals/Grievances-Bill of Rights)	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Access (Administrative Hearings)	911	8%	380	3%
Access (Commercial-Appeals/Grievances-Bill of Rights)	259	2%	289	2%
Access/Coverage (includes Access to services and Coverage includes denials of services)	2,722	23%	2,659	22%
Eligibility/Recertification (status of eligibility/verification of coverage)	5,186	45%	5,639	48%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	359	3%	341	3%
Quality of Service (includes services rendered by Providers)	134	1%	134	1%
*Other Issues	2,083	18%	2,463	21%
Total Types of Issues (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) Contacts	11,654	100%	11,905	100%

**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicare MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance, incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicare MCO/QMB ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicare MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/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 FY19 and FY20



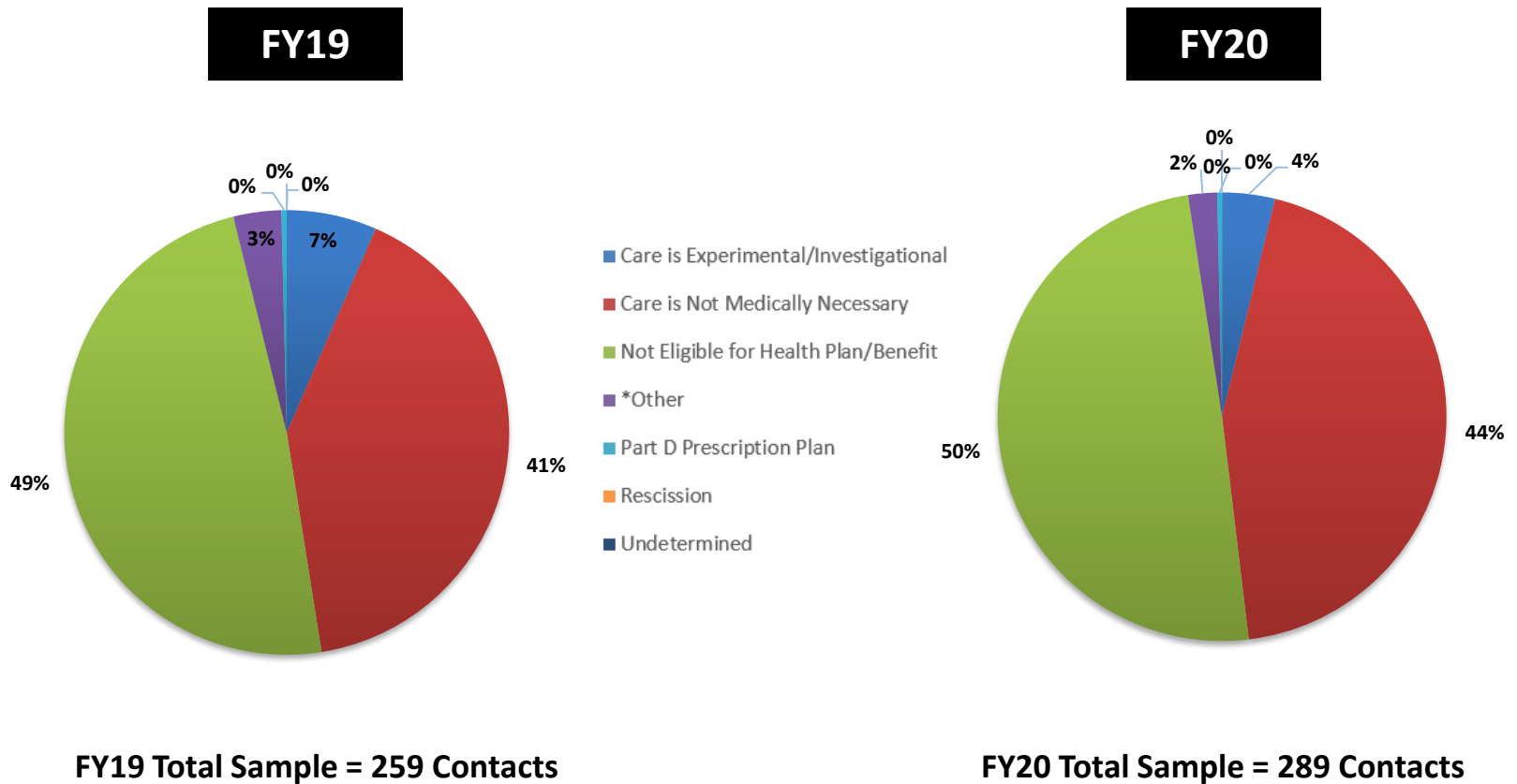
**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction 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
FY19 and FY20**

Types of Issues (Non-Commercial) Contacts	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Access (Administrative Hearings)	911	8%	380	3%
Access/Coverage (includes Access to services and Coverage includes denials of services)	2,722	24%	2,659	23%
Eligibility/Recertification (status of eligibility/verification of coverage)	5,186	46%	5,639	49%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	359	3%	341	3%
Quality of Service (includes services rendered by Providers)	134	1%	134	1%
*Other Issues	2,083	18%	2,463	21%
Total Types of Issues-(Non-Commercial) Contacts	11,395	100%	11,616	100%

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

Figure 9a. Breakdown of Types of Issues Encountered by (Commercial-Appeals/Grievances-Bill of Rights) Contacts FY19 and FY20

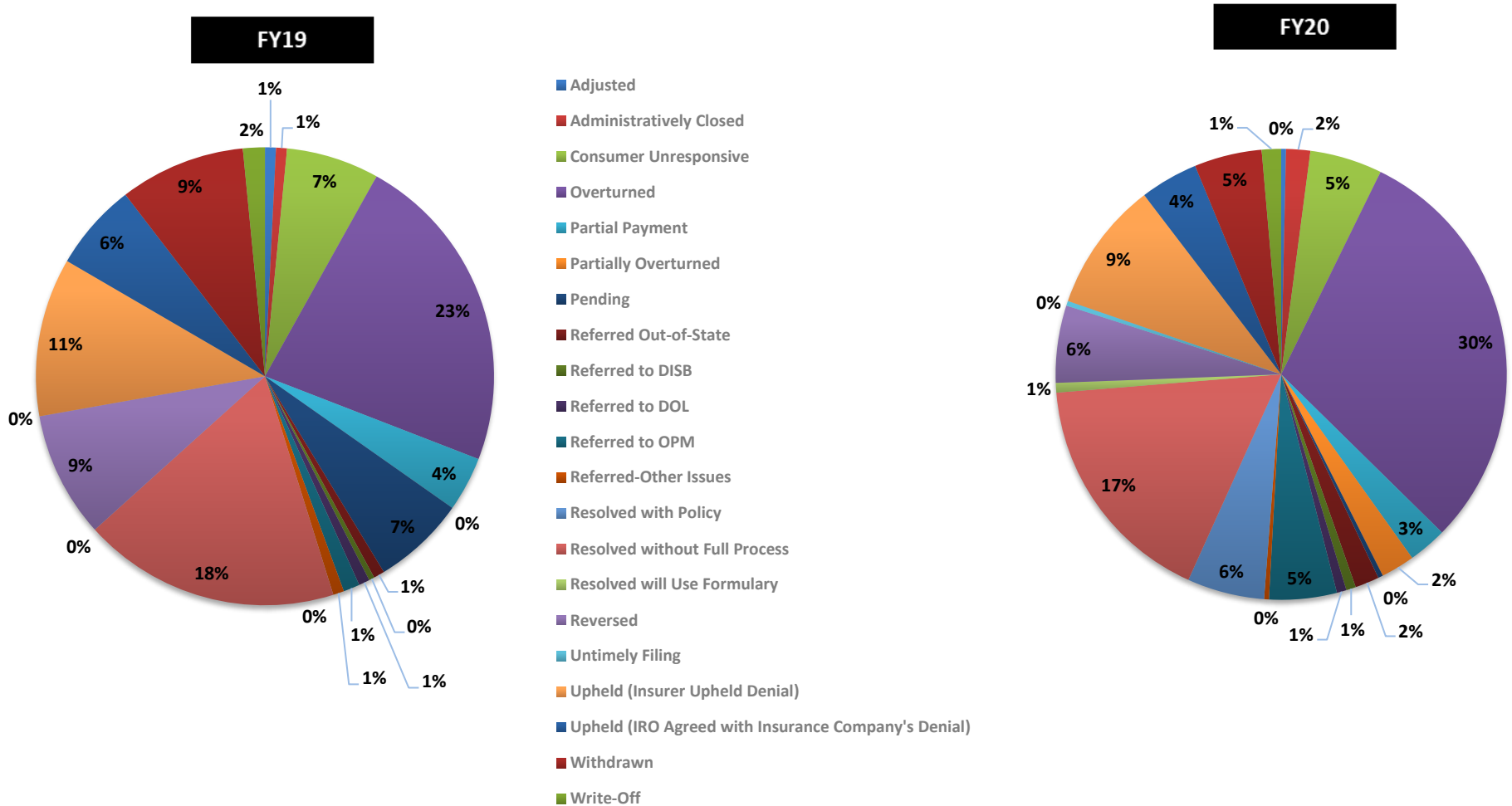


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**Table 9a. Breakdown of Types of Issues Encountered by
(Commercial-Appeals/Grievances Bill of Rights) Contacts
FY19 and FY20**

Types of Issues (Commercial-Appeals/Grievances-Bill of Rights)	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Care Is Experimental/Investigational	17	>6%	11	4%
Care Is Not Medically Necessary	106	41%	128	44%
Not Eligible for Health Plan/Benefit	126	49%	143	>49%
*Other Issues	9	3%	6	2%
Part D Prescription Plan	1	<1%	1	<1%
Rescission	0	0%	0	0%
Undetermined	0	0%	0	0%
Total Types of Issues-(Commercial-Appeals/Grievances-Bill of Rights) Contacts	259	100%	289	100%

Figure 9b. Breakdown of Dispositions of All Cases Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts FY19 and FY20



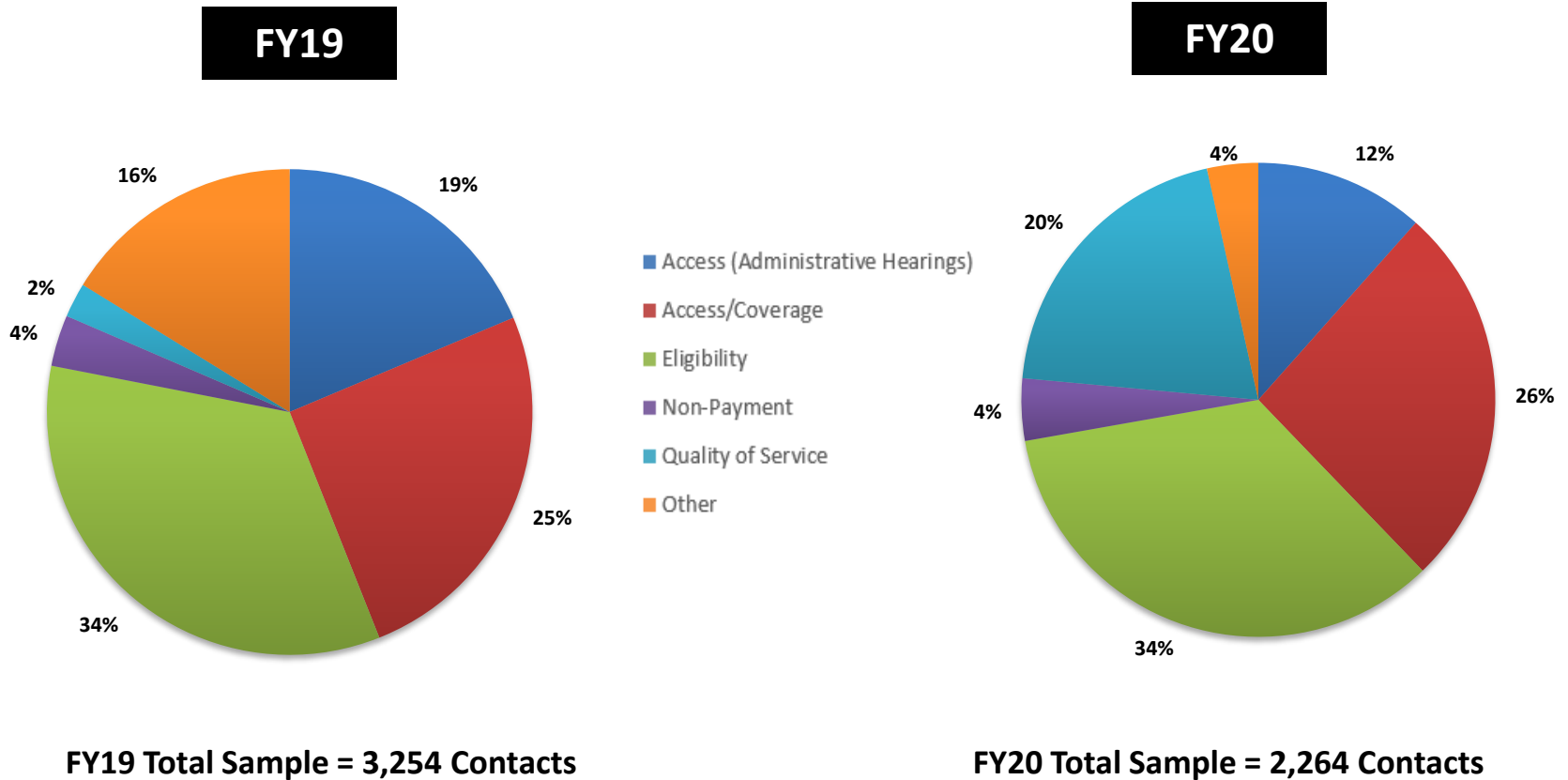
Source data captured between October 1, 2018 through September 30, 2019 and October 1, 2019 through September 30, 2020

**Table 9b. Breakdown of Dispositions of All Cases Among
(Commercial-Appeals/Grievances-Bill of Rights) Contacts
FY19 and FY20**

Dispositions of All Cases Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Adjusted (case closed)	2	1%	1	<1%
Administratively Closed (case closed-due to no action)	1	<1%	5	2%
Consumer Unresponsive (case closed)	17	7%	15	5%
On-Hold in Abeyance (case closed)	0	0%	0	0%
Overtured (case closed-insurance company changed the denial)	59	23%	87	30%
Partial Payment (case closed-insurance company paid a portion of claim)	9	3%	8	3%
Partially Overtured (case closed-insurance company changed a portion of the denial)	0	0%	7	2%
Pending (case is still opened)	19	7%	1	<1%
Referred to DISB (case closed-referred to DISB for policy interpretation or benefit issues)	1	<1%	2	1%
Referred to DOL (case closed-referred to DOL-self-funded insurance plans)	2	1%	2	1%
Referred to OPM (case closed-referred to OPM-federal employee plans)	3	1%	14	5%
Referred-Other Issues (case closed-issues not listed)	2	1%	1	<1%
Referred-Out-of-State (case closed-lack of jurisdiction)	2	1%	5	2%
Resolved (case closed-resolved in accordance with policy)	0	0%	16	6%
Resolved (case closed-resolved without use of full process)	47	18%	49	17%
Resolved (case closed-will use formulary alternative)	0	0%	2	1%
Reversed (case closed-IRO changed the insurance company's denial)	23	9%	16	5%
Untimely Filing (case closed-member filed appeal after the filing date)	0	0%	1	<1%
Upheld (case closed-insurer upheld denial)	29	11%	27	9%
Upheld (case closed-IRO agreed with the insurance company's denial)	16	6%	12	4%
Withdrawn (case closed-member decided not to proceed with appeal)	23	9%	14	5%
Write-Off (case closed-provider agreed to write-off balance due)	4	1%	4	1%
Total Dispositions of All Cases Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts	259	100%	289	100%

Source data captured between October 1, 2018 through September 30, 2019 and October 1, 2019 through September 30, 2020

Figure 10. Breakdown of Types of Issues Encountered by Dual Eligible (Medicare and Medicaid) Contacts FY19 and FY20



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

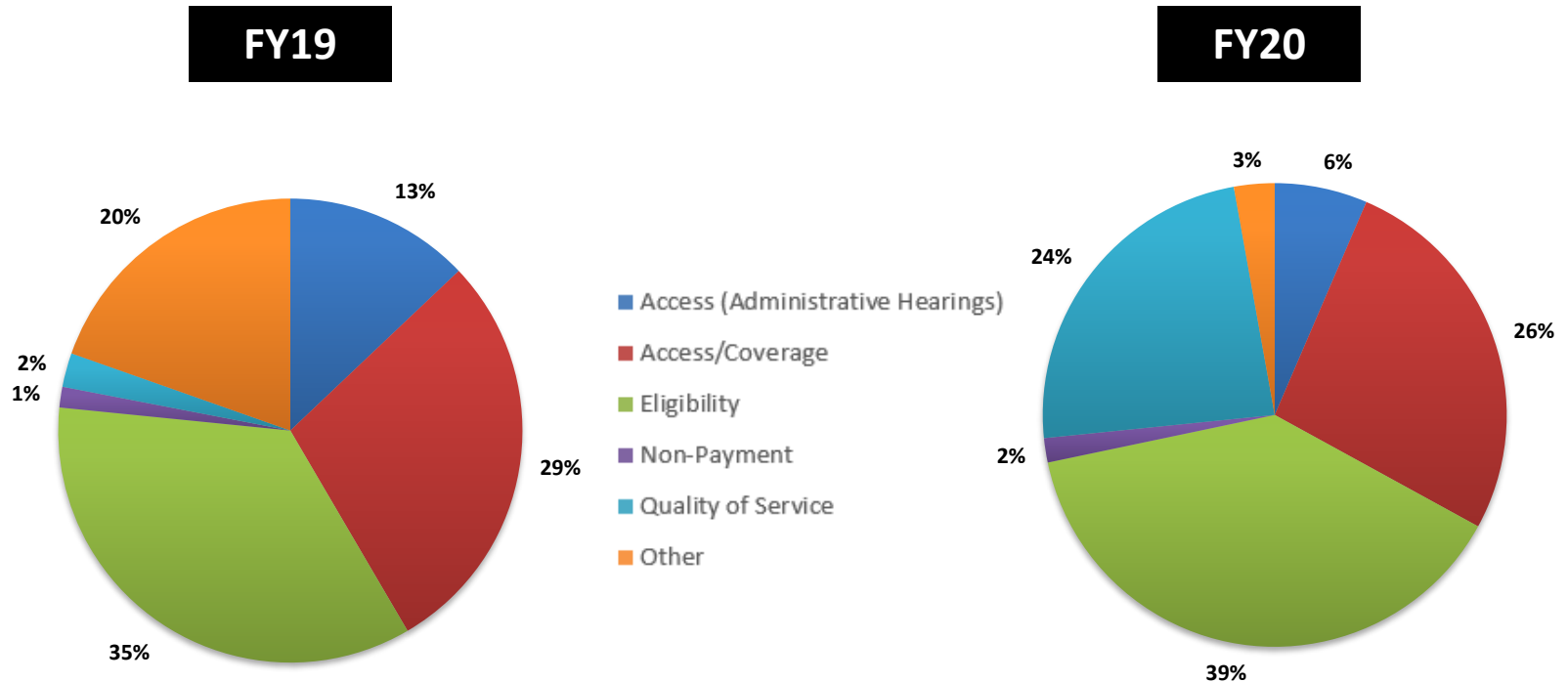
Table 10. Breakdown of Types Issues Encountered by Dual Eligible (Medicare and Medicaid) Contacts FY19 and FY20

Types of Issues Encountered by Dual Eligible (Medicare and Medicaid) Contacts	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Access (Administrative Hearings)	607	19%	262	12%
Access/Coverage (includes Access to services and Coverage includes denials of services)	824	25%	594	26%
Eligibility/Recertication (status of eligibility/verification of coverage)	1,109	34%	779	34%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	111	4%	96	4%
*Other Issues	528	16%	454	20%
Quality of Service (includes services rendered by Providers)	75	2%	79	4%
Total Types of Issues-Dual Eligible (Medicare and Medicaid) Contacts	3,254	100%	2,264	100%

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

Source data captured between October 1, 2018 through September 30, 2019 and October 1, 2019 through September 30, 2020

Figure 11. Breakdown of Types of Issues Encountered by Medicaid Fee-for-Service (FFS) Contacts FY19 and FY20



FY19 Total Sample = 1,602 Contacts

FY20 Total Sample = 1,237 Contacts

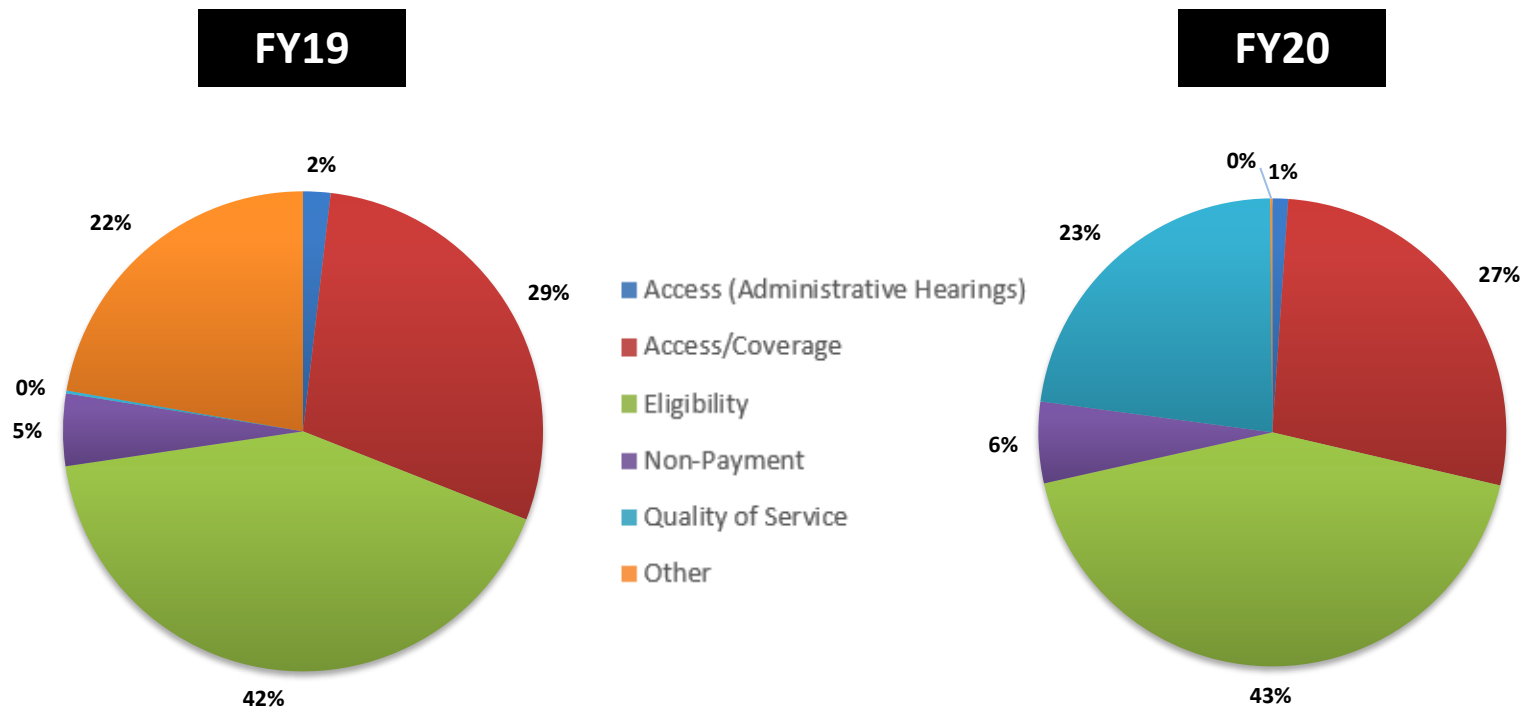
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**Table 11. Breakdown of Types of Issues Encountered by
Medicaid Fee-for-Service (FFS) Contacts
FY19 and FY20**

Types of Issues Encountered by Medicaid Fee-for-Service (FFS) Contacts	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Access (Administrative Hearings)	207	13%	80	6%
Access/Coverage (includes Access to services and Coverage includes denials of services)	459	29%	328	26%
Eligibility/Recertification (status of eligibility/verification of coverage)	561	35%	479	39%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	23	1%	21	2%
*Other Issues	314	20%	294	24%
Quality of Service (includes services rendered by Providers)	38	2%	35	3%
Total Types of Issues-Medicaid Fee-for-Service Contacts	1,602	100%	1,237	100%

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

Figure 12. Breakdown of Types of Issues Encountered by Medicare Part A, Part B, Part A/B and Part A/B (QMB) Contacts FY19 and FY20



FY19 Total Sample = 2,653 Contacts

FY20 Total Sample = 2,119 Contacts

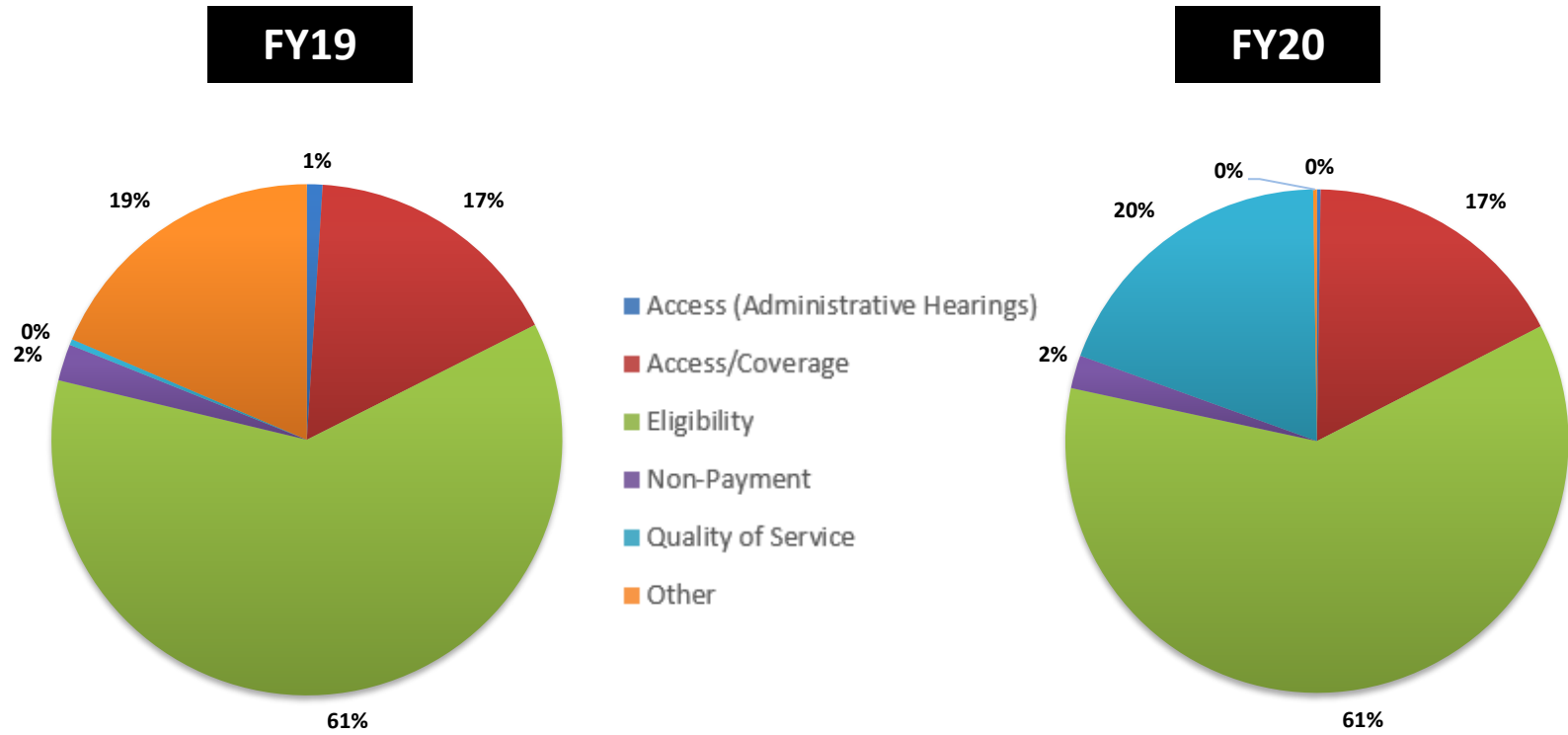
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Table 12. Breakdown of Types of Issues Encountered by Medicare Part A; Part B; Part A/B; Part A/B (QMB) Contacts FY19 and FY20

Types of Issues Encountered by Medicare Part A; Part B; Part A/B; Part A/B (QMB) Contacts	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Access (Administrative Hearings)	49	2%	23	1%
Access/Coverage (includes Access to services and Coverage includes denials of services)	773	29%	584	>27%
Eligibility/Recertification (status of eligibility/verification of coverage)	1,106	>41%	908	43%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	129	5%	119	>5%
*Other Issues	591	22%	482	23%
Quality of Service (includes services rendered by Providers)	5	<1%	3	<1%
Total Types of Issues-Medicare Part A; Part B; Part A;/B; Part A/B (QMB) Contacts	2,653	100%	2,119	100%

**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; 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 FY19 and FY20



FY19 Total Sample = 3,237 Contacts

FY20 Total Sample = 4,187 Contacts

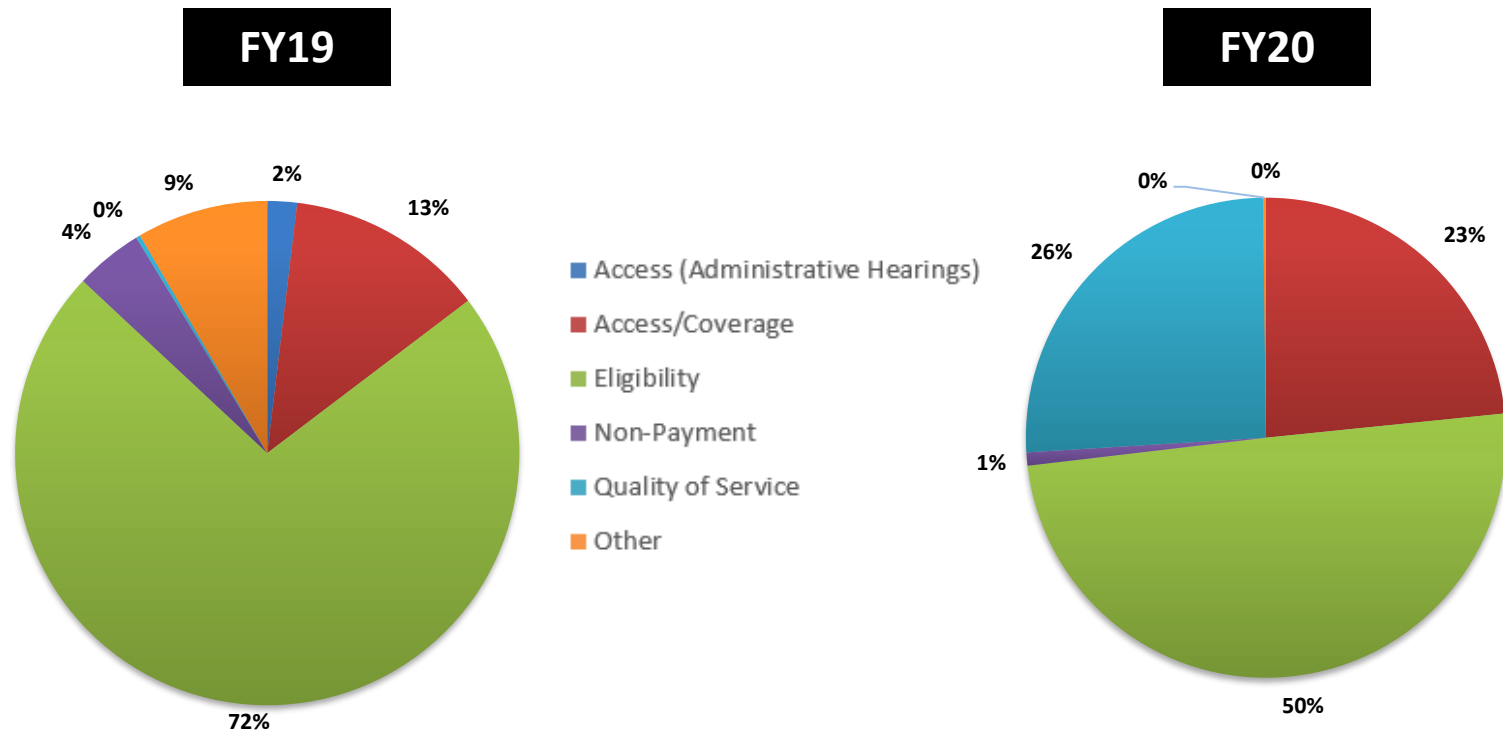
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**Table 13. Breakdown of Types Issues Encountered by
Medicaid Managed Care (MCO) Contacts
FY19 and FY20**

Types of Issues Encountered by Medicaid Managed Care (MCO) Contacts	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Access (Administrative Hearings)	32	1%	10	<1%
Access/Coverage (includes Access to services and Coverage includes denials of services)	537	17%	721	17%
Eligibility/Recertication (status of eligibility/verification of coverage)	1,980	61%	2,551	61%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	75	2%	89	2%
*Other Issues	601	>18%	806	19%
Quality of Service (includes services rendered by Providers)	12	<1%	10	<1%
Total Types of Issues-Medicaid Managed Care (MCO) Contacts	3,237	100%	4,187	100%

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

Figure 14. Breakdown of Types of Issues Encountered by Alliance Contacts FY19 and FY20



FY19 Total Sample = 368 Contacts

FY20 Total Sample = 1,582 Contacts

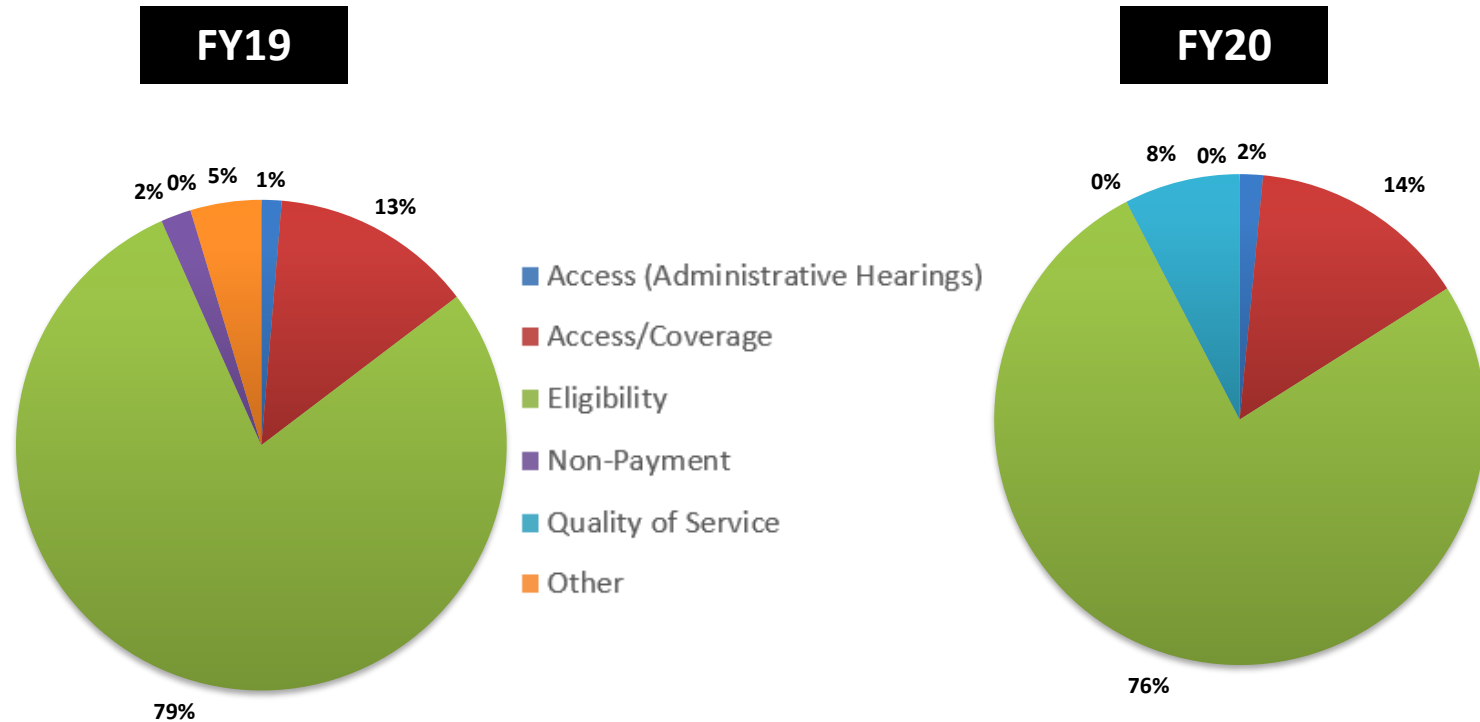
***Other Issues:** Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf 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
FY19 and FY20**

Types of Issues Encountered by Alliance Contacts	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Access (Administrative Hearings)	7	2%	0	0%
Access/Coverage (includes Access to services and Coverage includes denials of services)	47	13%	370	23%
Eligibility/Recertication (status of eligibility/verification of coverage)	266	72%	787	50%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	16	4%	14	<1%
*Other Issues	31	8%	408	26%
Quality of Service (includes services provided by Providers)	1	1%	3	<1%
Total Types of Issues-Alliance Contacts	368	100%	1,582	100%

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

Figure 15. Breakdown of Types of Issues Encountered by Other Contacts (ADAP/Deceased/Limited/Restricted Coverage to include Spend-Down/Out-of-State Insurance/Coverage Undetermined) FY19 and FY20



FY19 Total Sample = 150 Contacts

FY20 Total Sample = 131 Contacts

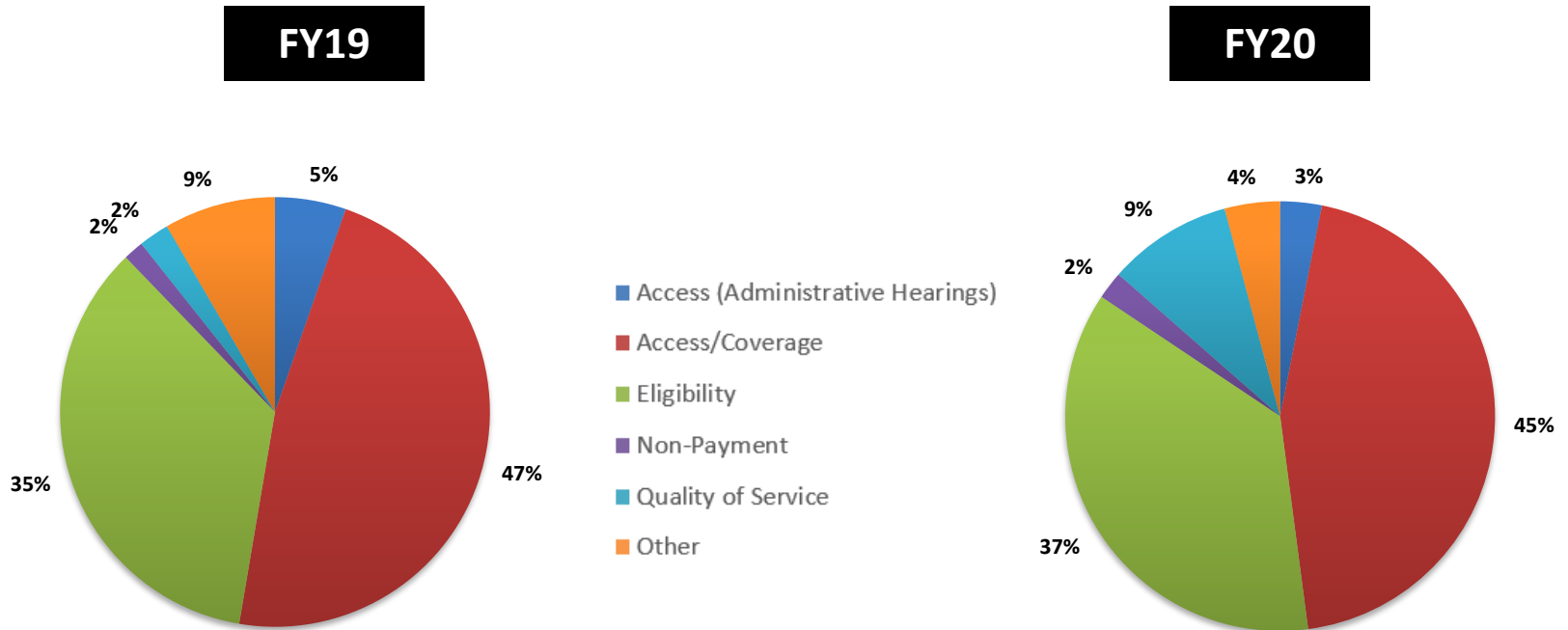
**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction 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 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) FY19 and FY20

Types of Issues Encountered by Other Contacts	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Access (Administrative Hearings)	2	1%	2	>1%
Access/Coverage (includes Access to services and Coverage includes denials of services)	20	13%	19	>14%
Eligibility/Recertication (status of eligibility/verification of coverage)	118	79%	100	76%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	3	2%	0	0%
*Other Issues	7	5%	10	8%
Quality of Service (includes services provided by Providers)	0	0%	0	0%
Total Types of Issues-Alliance Contacts	150	100%	131	100%

**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicaid MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance, incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicaid MCO/QMB ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicaid MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/Medicaid MCO/QMB ID cards; request for assistance with relocation; request for contact telephone number for HHA; request for copy of medical transcripts; request for GW/HICP telephone number; request for beneficiary's information; request for out-of-state Ombudsman's telephone number; request for 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 FY19 and FY20



FY19 Total Sample = 131 Contacts

FY20 Total Sample = 96 Contacts

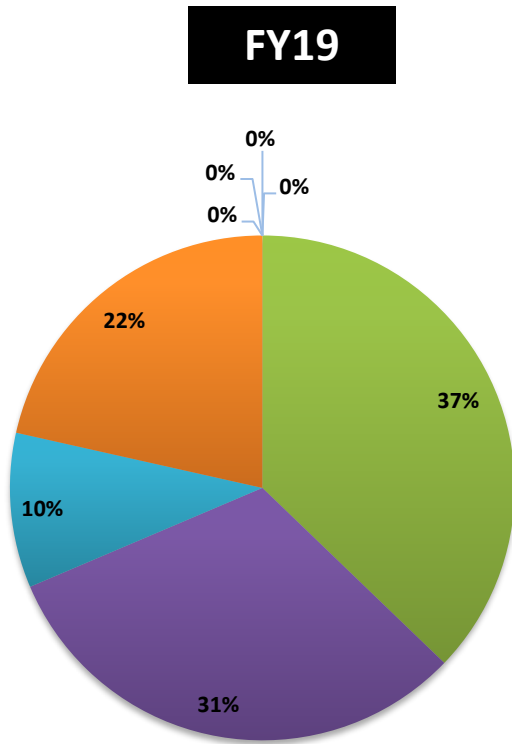
**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction 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
FY19 and FY20**

Types of Issues Encountered by Uninsured Contacts	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Access (Administrative Hearings)	7	5%	3	3%
Access/Coverage (includes access to services and Coverage includes denials of services)	62	47%	43	45%
Eligibility/Recertification (status of eligibility/verification of coverage)	46	35%	35	>36%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	2	2%	2	2%
*Other Issues	11	9%	9	>9%
Quality of Service (includes services rendered by Providers)	3	2%	4	4%
Total Types of Issues-Uninsured Contacts	131	100%	96	100%

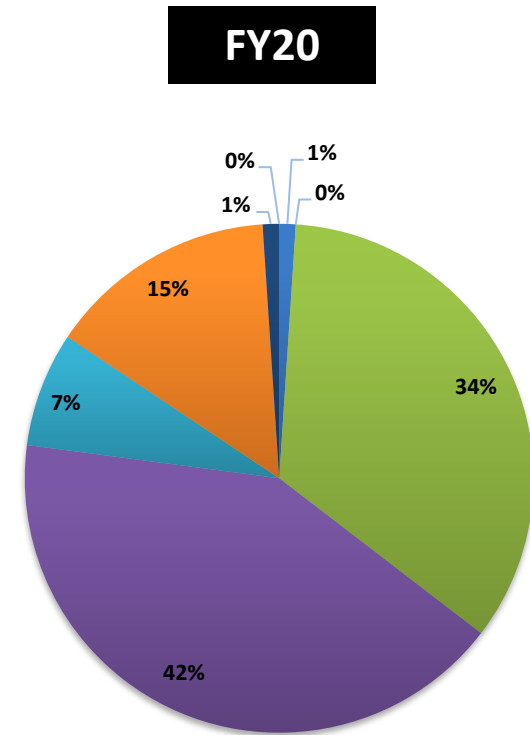
**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction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

Figure 17. Breakdown of Transportation Contacts by Insurance Type FY19 and FY20



FY19 Total Sample = 121 Contacts

- Alliance
- Commercial Health Plan
- Dual Eligible
- Fee-For-Service
- Managed Care
- Medicare
- Uninsured
- Other



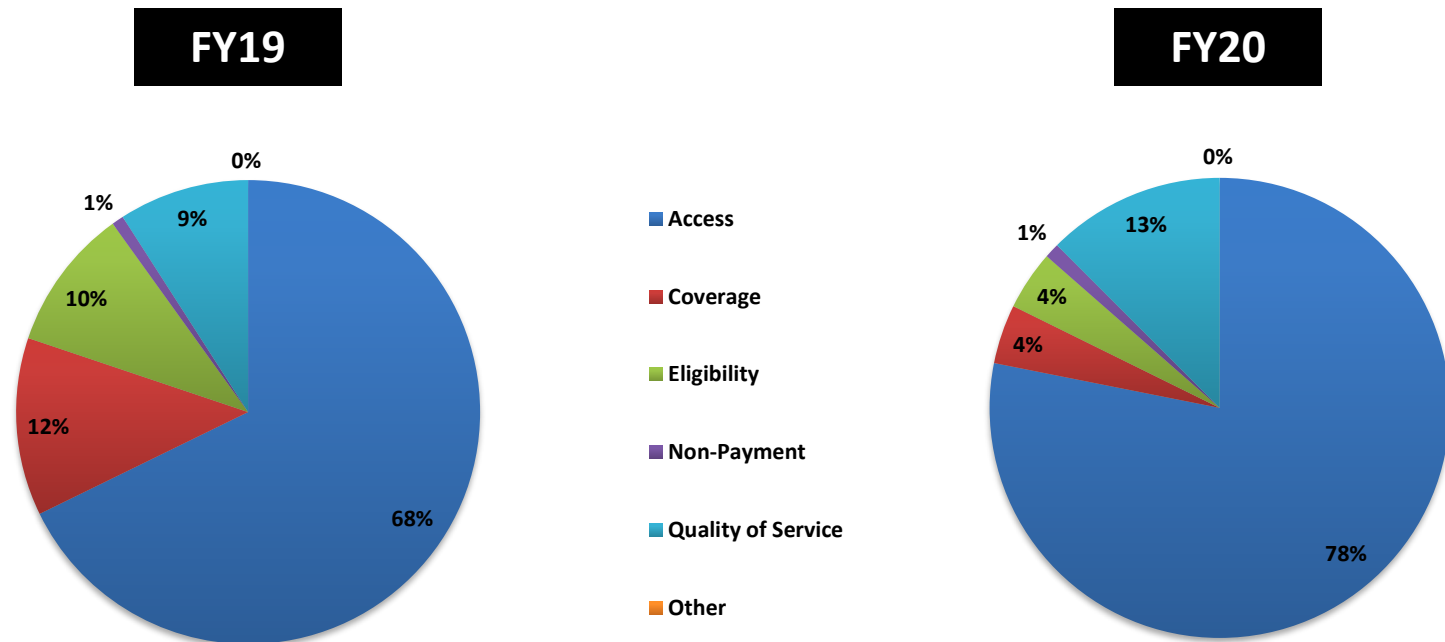
FY20 Total Sample = 96 Contacts

**Table 17. Breakdown of Transportation Contacts by Insurance Type
FY19 and FY20**

Transportation Contacts by Insurance Type	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Alliance (includes Alliance/ADAP and Undocumented Alien Child Beneficiaries)	0	0%	1	1%
Commercial Health Plan (includes Appeals/Grievances-Bill of Rights cases)	0	0%	0	0%
Dual Eligible (Medicaid/Medicare) (includes OMB Plus/QMB Plus-AFDC-TANF/QMB Plus-BCCEDTP/QMB Plus-EPD Waiver/QMB Plus-IDD Waiver/QMB Plus-Long-Term Care/QMB Plus-Money Follow the Person Beneficiaries)	45	37%	33	36%
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)	38	31%	37	40%
Medicaid Managed Care (MCO) (includes AFDC-TANF/Childless Adult/Childless Adult-MAGI /CHIP/Katie Beckett/TANF/ Special Needs Beneficiaries)	12	10%	7	8%
Medicare (includes Part A; Part B; Part A/B; Part A/B (QMB) and SLMB Beneficiaries)	26	22%	13	14%
Other (includes ADAP/Deceased/Limited/Restricted Coverage/Limited/Restricted-Childless Adult-Incarcerated/Out-of-State Medicaid Coverage/Spend-Down/Undetermined)	0	0%	0	0%
Uninsured	0	0%	1	1%
Total Contacts by Insurance Type	121	100%	92	100%

Source data captured between October 1, 2018 through September 30, 2019 and October 1, 2019 through September 30, 2020

Figure 18. Breakdown of Types of Issues Encountered by Transportation Contacts FY19 and FY20



FY19 Total Sample = 121 Contacts

FY20 Total Sample = 96 Contacts

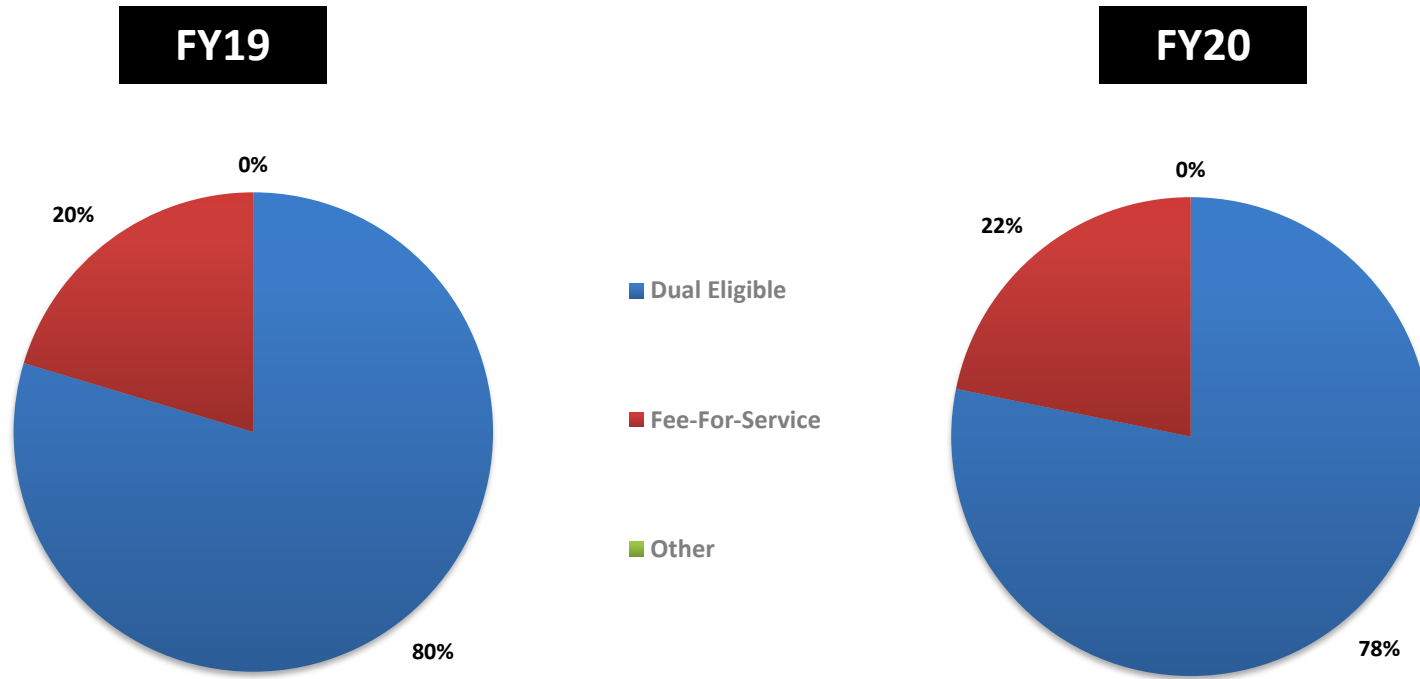
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**Table 18. Breakdown of Types of Issues Encountered by
Transportation Contacts
FY19 and FY20**

Types of Issues Encountered by Transportation Contacts	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Access (includes prior authorization requests)	82	68%	75	78%
Coverage (includes denials of service)	15	12%	4	4%
Eligibility/Recertification (status of eligibility/verification of coverage)	12	10%	4	4%
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)	11	9%	12	13%
Total Types of Issues-Transportation Contacts	121	100%	96	100%

**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicare MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps 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 19. Breakdown of EPD Waiver Contacts by Insurance Type FY19 and FY20



FY19 Total Sample = 1,287 Contacts

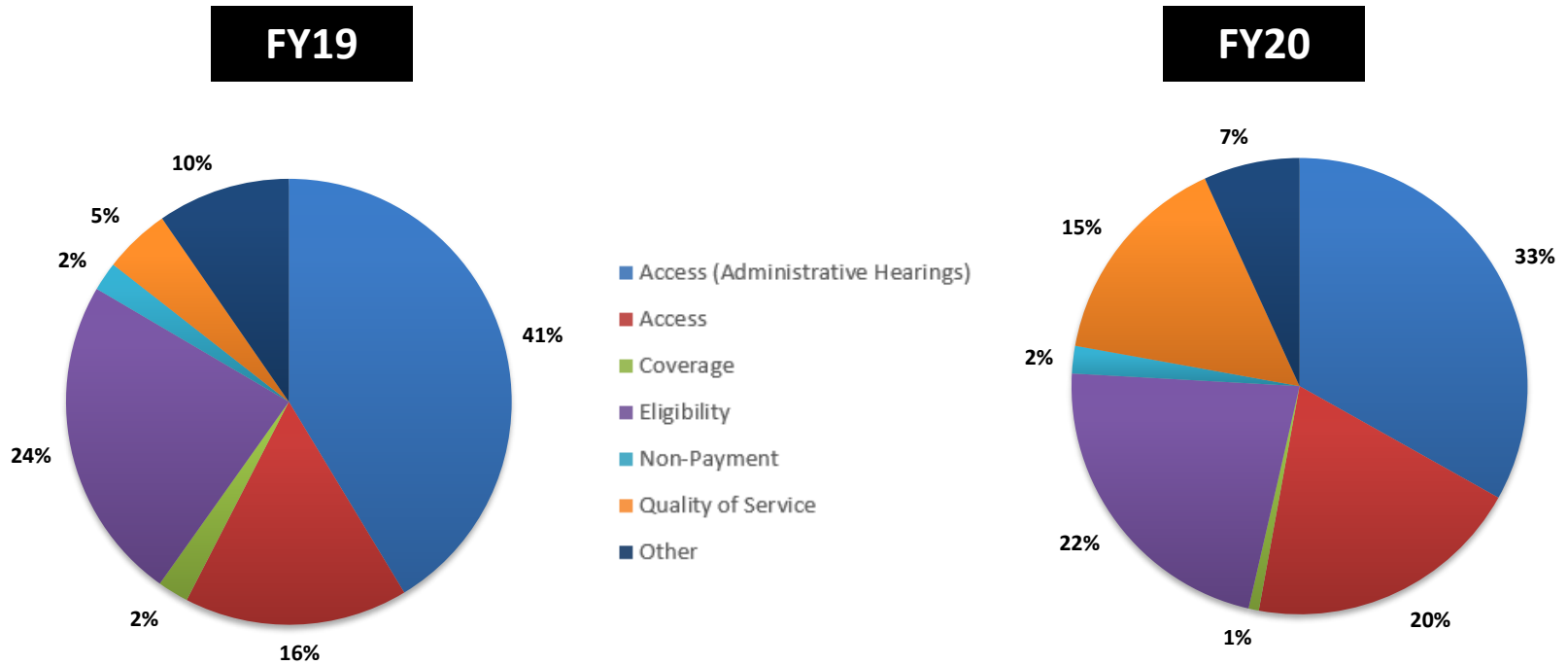
FY20 Total Sample = 821 Contacts

**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
FY19 and FY20**

EPD Waiver Contacts by Insurance Type	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Dual Eligible (Medicare/Medicaid) – (includes Dual Eligible-EPD Waiver)	1,025	80%	642	78%
Fee-For-Service (Medicaid) – (includes FFS/FFS-EPD Waiver)	262	20%	179	22%
Other (Undetermined/Uninsured/Limited/Restricted Coverage)	0	0%	0	0%
Total EPD Waiver Contacts by Insurance Type	1,287	100%	821	100%

Figure 20. Breakdown of Types of Issues Encountered by EPD Waiver Contacts FY19 and FY20



FY19 Total Sample = 1,287 Contacts

FY20 Total Sample = 821 Contacts

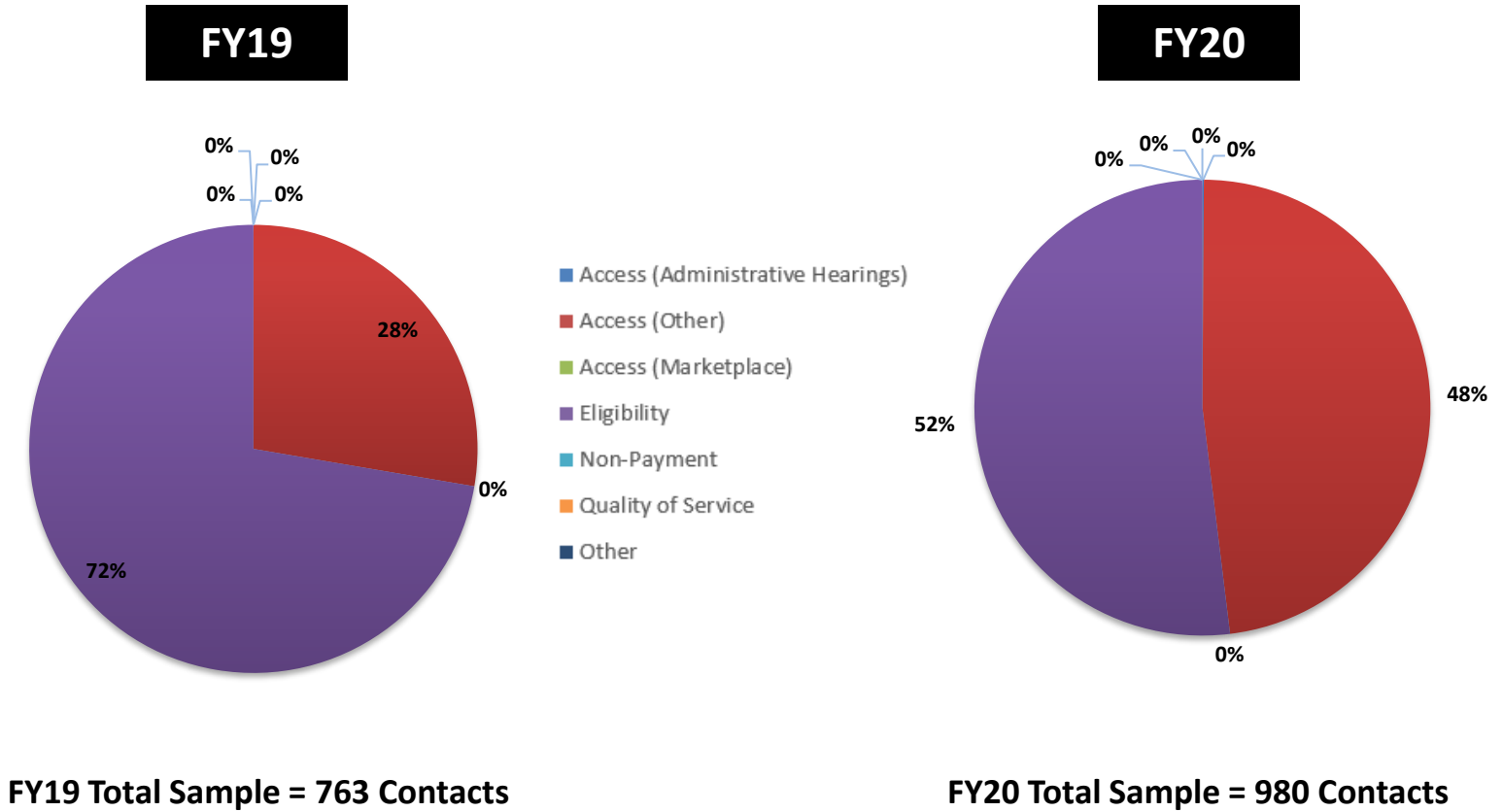
**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF Letters-reduction 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 20. Breakdown of Types of Issues Encountered by
EPD Waiver Contacts
FY19 and FY20**

Types of Issues Encountered by EPD Waiver Contacts	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Access (Administrative Hearings)	532	41%	272	33%
Access (includes Access to services to include Prior Authorization requests)	209	16%	162	20%
Coverage (denials of services)	29	2%	6	1%
Eligibility/Recertification (status of eligibility/verification of coverage)	304	24%	183	22%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	27	2%	16	2%
*Other Issues	124	10%	126	15%
Quality of Service (services rendered by Providers)	62	5%	56	7%
Total Types of Issues-EPD Waiver Contacts	1,287	100%	821	100%

. *Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicare MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps; food stamps reduction; fraud-Medicaid/Medicare; homeless assistance; housing assistance; ethics assistance; ID number request; immigration assistance, incorrect address in Omnicaid; incorrect date of birth in Omnicaid; incorrect gender in Omnicaid; incorrect name in Omnicaid; incorrect social security number in Omnicaid; JD Nursing closure letter; kidnapped mother; legal guardian pay; legal services; lost ID card; MCO provider payment; MCO-reimbursement letter; Medicaid liens; Medicaid Beneficiary Manual; mortality notification; name/address change; name misspelled on ID card; name not listed in Omnicaid; non-receipt-Medicaid/Medicare MCO/QMB/ID cards; NPI number incorrect in Omnicaid; Opt out of Medicaid/Medicare MCO; PCA-non-payment; preparing patient for relocation assistance; proof of identity; provider enrollment/credentialing (Medicaid-MCO); refund check from provider; repaying DC Medicaid; replacement of Medicaid/Medicare/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 FY19 and FY20



**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/H/ICP 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.*

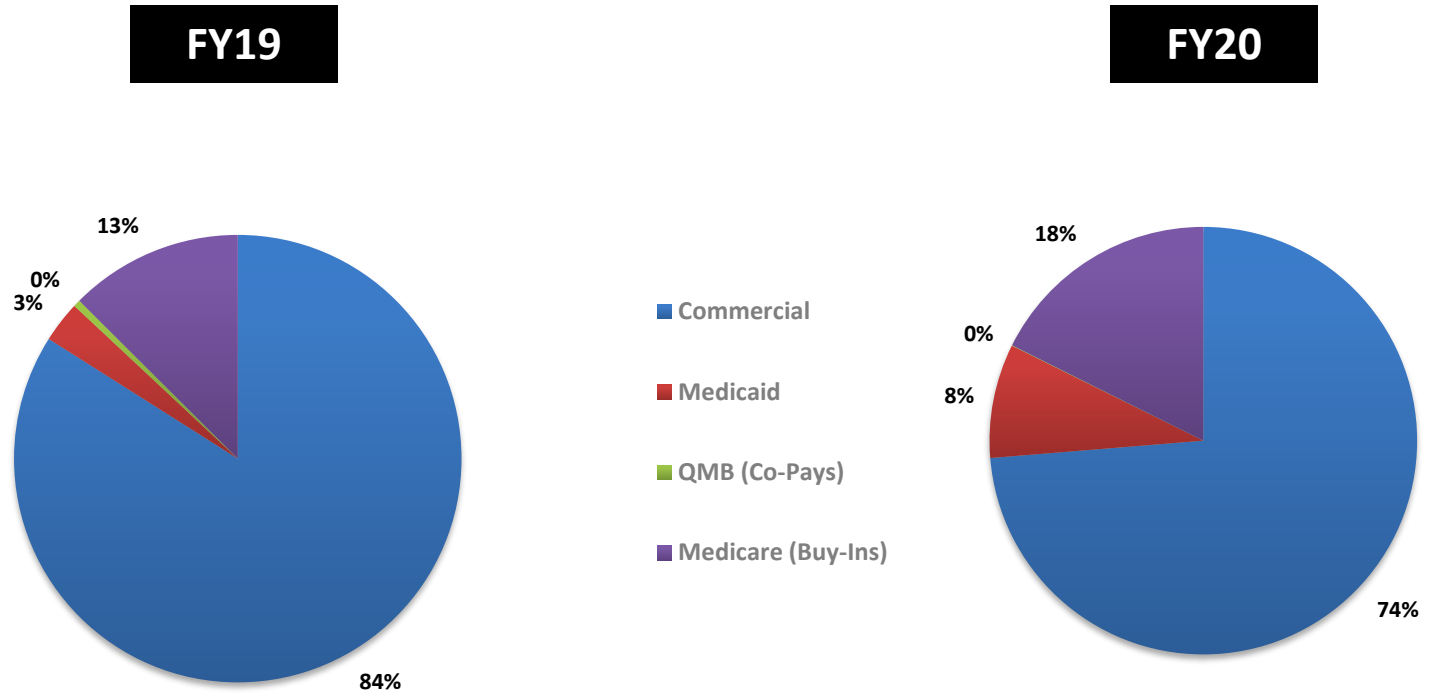
Table 21. Breakdown of Types of Issues Encountered by DC Health Link and Health Care Exchange Marketplace Contacts FY19 and FY20

Types of Issues Encountered by DC Health Link and Health Care Exchange Marketplace Contacts	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Access (Administrative Hearings)	0	0%	1	<1%
Access (includes applications for insurance coverage/applications for retroactive Medicaid/recertification application and DC Health Link Services)	217	28%	470	<48%
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)	546	72%	509	<52%
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)	0	0%	0	0%
Total Types of Issues-DC Health Link/Health Care Exchange Marketplace Contacts	763	100	980	100%

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

Source data captured between October 1, 2018 through September 30, 2019 and October 1, 2019 through September 30, 2020

**Figure 22. Dollar Amount of Savings on Behalf of (Non-Commercial) and (Commercial-Appeals/Grievances-Bill of Rights) Contacts
FY19 and FY20**



FY19 Total Sample = 686 Contacts

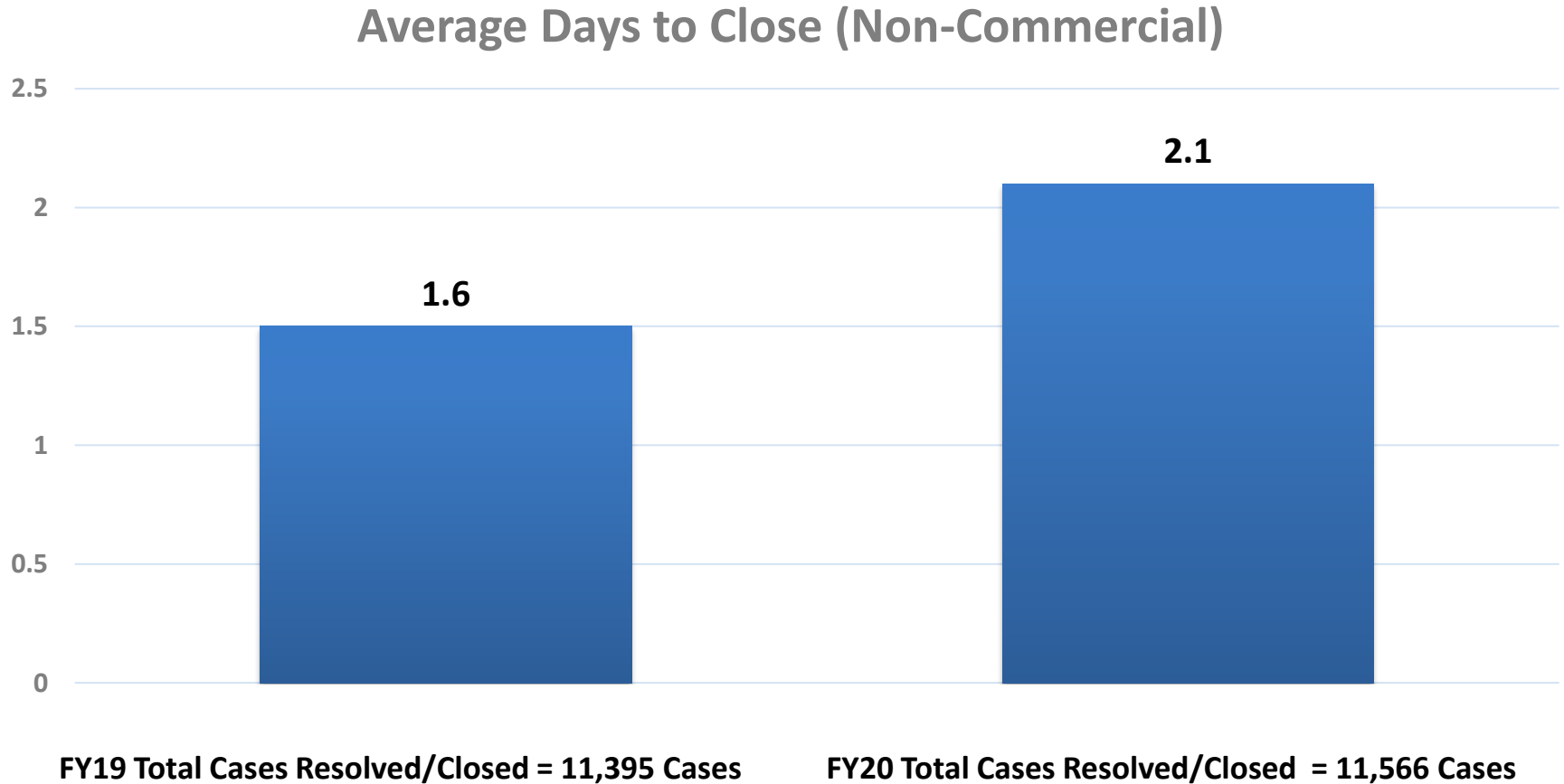
FY20 Total Sample = 661 Contacts

**Table 22. Dollar Amount of Savings on Behalf of (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) Contacts
FY19 and FY20**

Dollar Amount of Savings on Behalf of (Non-Commercial); (Commercial-Appeals/Grievances-Bill-Rights) Contacts	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Commercial (to include Appeals/Grievances-Bill of Rights)	2,495,165.85	84%	1,808,692.82	74%
Medicaid (to include Fee-For-Service/MCO/Alliance Beneficiaries) – (Non-payments of beneficiaries’ medical bills)	\$88,424.46	3%	\$211,683.79	>8%
Qualified Medicare Beneficiaries (QMB) - (Co-Pays)	\$15,288.78	<1%	\$861.97	<1%
Medicare (to Include Part B/Dual Eligible) – (Reimbursements for non-payments of beneficiaries’ Part B Premiums)	\$372,145.90	>12%	\$432,780.80	18%
Total Dollar Amount of Savings on Behalf of All Consumers	\$2,971,024.99	100%	\$2,454,019.38	100%

Source data captured between October 1, 2018 through September 30, 2019 and October 1, 2019 through September 30, 2020

**Figure 23. Average Number of Days to Resolve/Close
(Non-Commercial) Cases
FY19 and FY20**

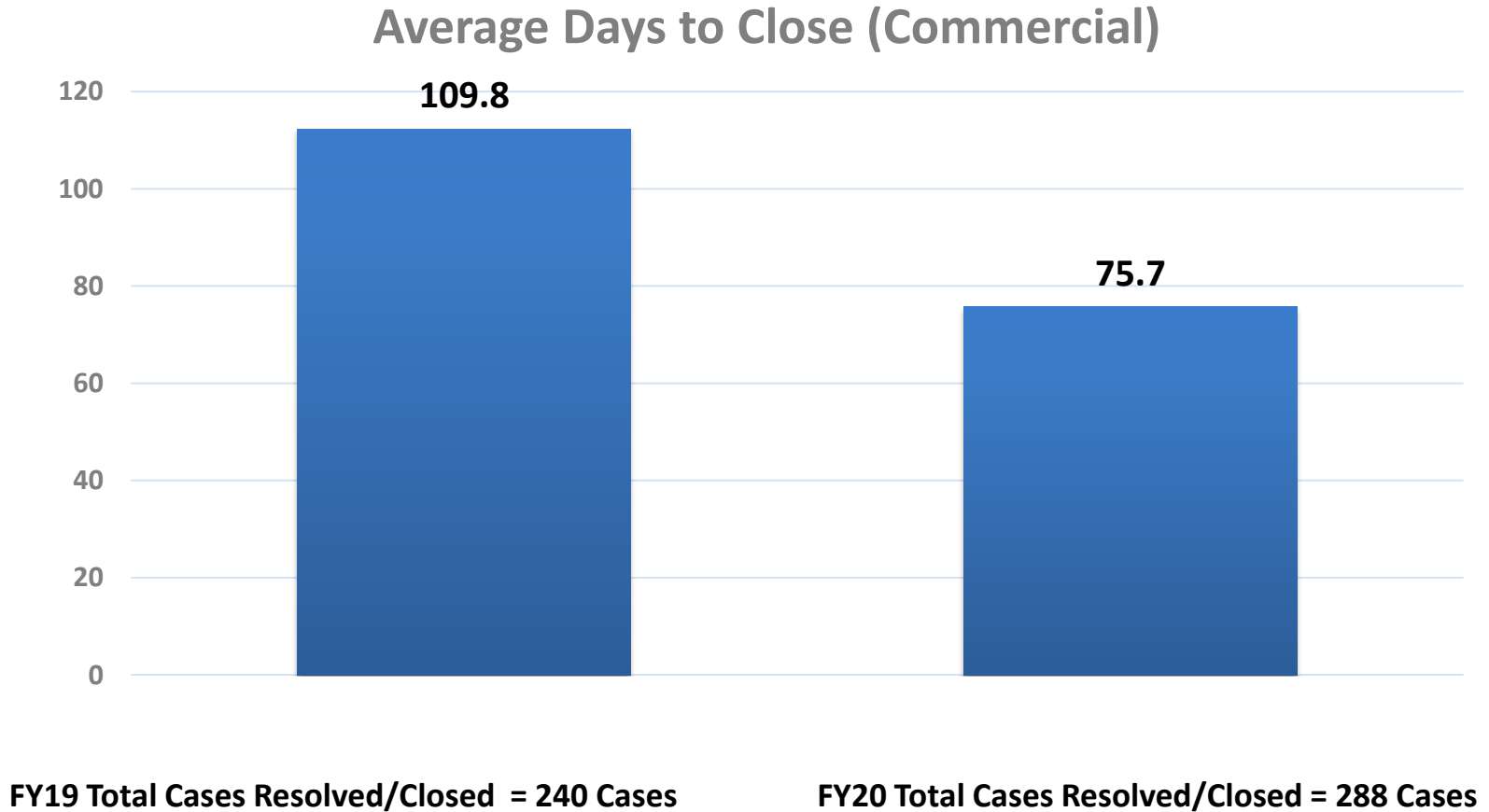


Source data captured between October 1, 2018 through September 30, 2019 and October 1, 2019 through September 30, 2020

**Table 23. Average Number of Days to Resolve/Close
(Non-Commercial) Cases
FY19 and FY20**

FY19 Average Number of Days to Resolve/Close (Non-Commercial) Cases	FY19 Total	FY20 Average Number of Days to Resolve/Close (Non-Commercial) Cases	FY20 Total
Average Number of Days It Took to Resolve/Close (11,395) (Non-Commercial) cases	1.6 days	Average Number of Days It Took to Resolve/Close (11,566) (Non-Commercial) cases	2.1 days
Note: Of the (11,395) (Non-Commercial) cases opened, the OHCOBR resolved/closed (9,359) cases on same day that cases were opened		Note: Of the (11,616) (Non-Commercial) cases opened, the OHCOBR resolved/closed (9,372) cases on same day that cases were opened	

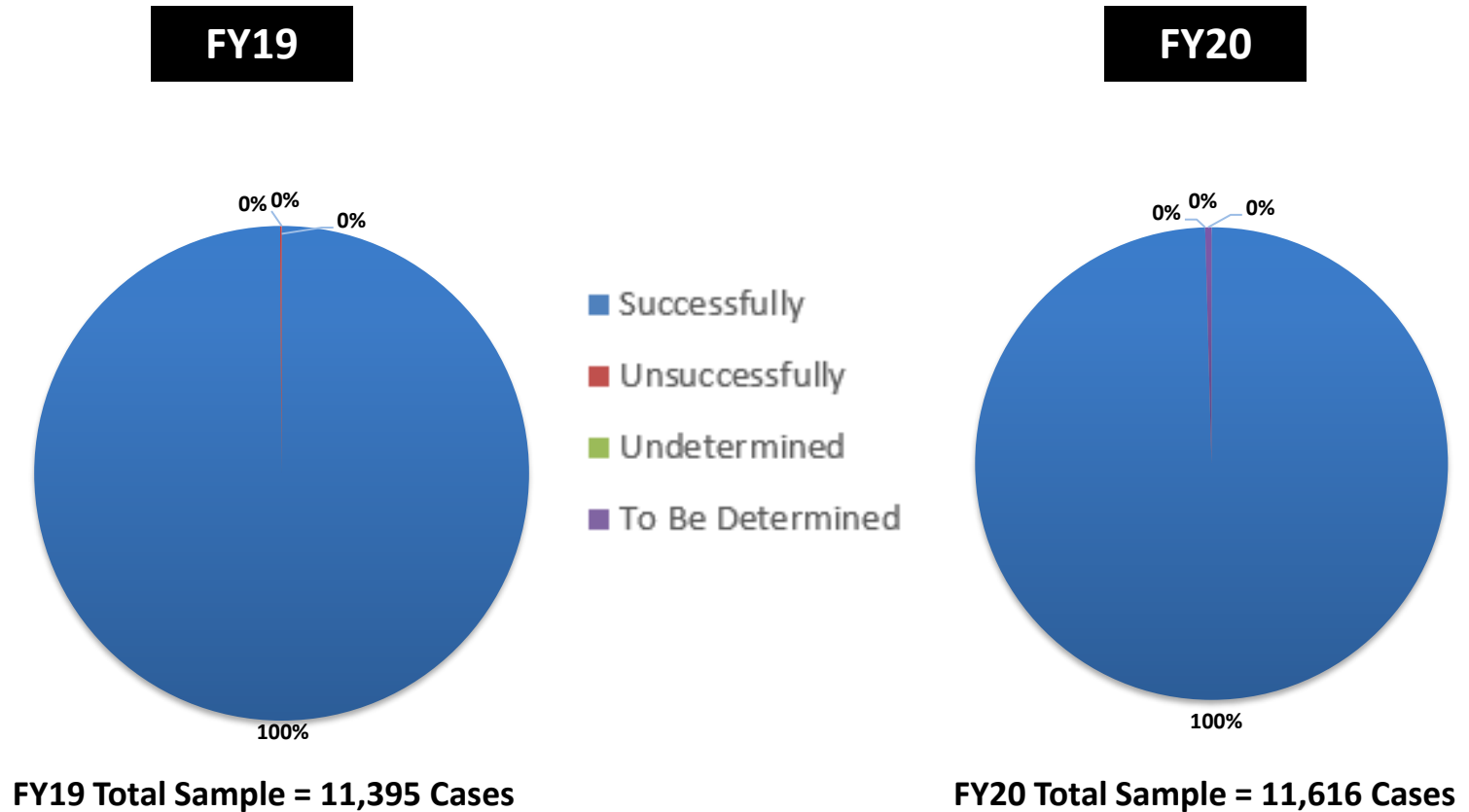
**Figure 24. Average Number of Days to Resolve/Close
(Commercial-Appeals/Grievances-Bill of Rights) Cases
FY19 and FY20**



**Table 24. Average Number of Days to Resolve/Close
(Commercial-Appeals/Grievances-Bill of Rights) Cases
FY19 and FY20**

FY19 Average Number of Days to Resolve/Close (Commercial-Appeals/Grievances- Bill of Rights) Cases	FY19 Total	FY20 Average Number of Days to Resolve/Close (Commercial-Appeals/Grievances- Bill of Rights) Cases	FY20 Total
Average Number of Days It Took to Resolve/Close (240) (Commercial- Appeals/Grievances-Bill of Rights) Cases	109.8 days	Average Number of Days It Took to Resolve/Close (288) Commercial- Appeals/Grievances-Bill of Rights) Cases	75.7 days
Note: Of the (259) (Commercial- Appeals/Grievances-Bill of Rights) cases opened, the OHCOBR resolved/closed (8) cases on same day that cases were opened		Note: Of the (289) (Commercial- Appeals/Grievances-Bill of Rights) cases opened, the OHCOBR resolved/closed (9) cases on same day that cases were opened	

Figure 25. Breakdown of Number and Percentage of How (Non-Commercial) Cases Were Resolved/Closed and Cases Not Resolved/Closed by the OHCOBR FY19 and FY20

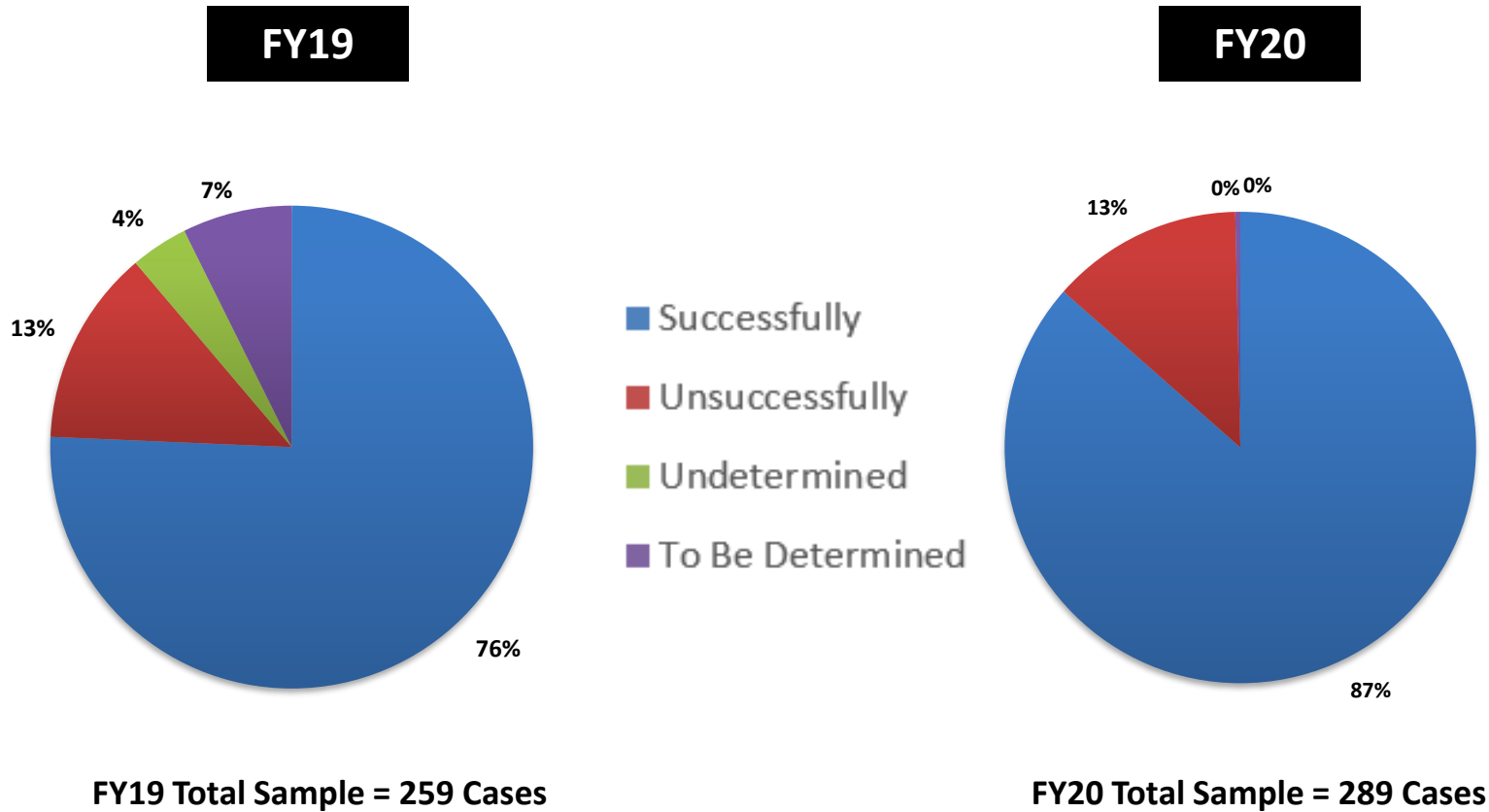


Source data captured between October 1, 2018 through September 30, 2019 and October 1, 2019 through September 30, 2020

**Table 25. Breakdown of Number and Percentage of How
(Non-Commercial) Cases Were Resolved/Closed and
Cases Not Resolved/Closed by the OHCOBR
FY19 and FY20**

How (Non-Commercial) Cases were Resolved/Closed and Cases Not Resolved/ Closed	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Closure of Cases - Successfully	11,384	>99%	11,566	>99%
Closure of Cases -Unsuccessfully	11	<1%	0	0%
Closure of Cases (Referred) -Undetermined	0	0%	0	0%
Opened Cases (Pending) - To Be Determined	0	0%	50	<1%
Total Number and Percentage of (Non- Commercial) Cases	11,395	100%	11,616	100%

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 OHCOBR FY19 and FY20



Source data captured between October 1, 2018 through September 30, 2019 and October 1, 2019 through September 30, 2020

**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
FY19 and FY20**

How (Commercial-Appeals/Grievances-Bill of Rights) Cases were Resolved/Closed and Cases Not Resolved/Closed	FY19 Totals	FY19 Percent (%)	FY20 Totals	FY20 Percent (%)
Closure of Cases - Successfully	196	76%	250	>86%
Closure of Cases - Unsuccessfully	34	13%	38	13%
Closure of Cases (Referred) - Undetermined	10	4%	0	0%
Opened Cases (Pending) - To Be Determined	19	7%	1	<1%
Total Number and Percentage of (Commercial-Appeals/Grievances-Bill of Rights) Cases	259	100%	289	100%

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