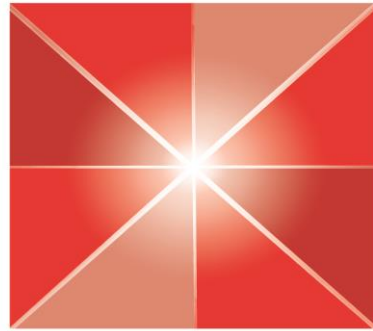


Office of Health Care Ombudsman and Bill of Rights (OHCOBR)
FY21 Summary of Cases
October 1, 2020 through September 30, 2021

DISTRICT OF
COLUMBIA



HEALTH CARE
OMBUDSMAN

“The Knowledge to Guide You”

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

Highlights - FY21 Contact Summary

- In FY21, the Office of Health Care Ombudsman and Bill of Rights opened a grand total of (15,394) Non-Commercial and Commercial cases - (See Pages 4-5);
- Of the (15,394) cases opened - (15,087) cases were Non-Commercial - (See Pages 4-5);
- Percentage of resolved/closed Non-Commercial cases was (99% or 15,047 resolved/closed cases) out of a total of (15,087) Non-Commercial cases opened – (See Pages 6-7);
- In FY21, the Average Number of Days for the Office of Health Care Ombudsman and Bill of Rights to resolve/close (15,047) Non-Commercial cases was (2.3) days - (See Pages 51-52);
- Of the (15,087) Non-Commercial cases opened in FY21, the Office of Health Care Ombudsman and Bill of Rights resolved/closed (12,406) cases on same day that cases were opened - (See Page 52);
- Of the grand total of (15,394) cases opened by the Office of Health Care Ombudsman and Bill of Rights – (307) cases were among the Commercial Health Plan Members – (See Pages 4-5);
- Percentage of resolved/closed Commercial-Appeals/Grievances cases was (93% or 287 resolved/closed cases) out of a total of (307) commercial-appeals/grievances cases opened - (See Pages 8-9);
- In FY21, the Average Number of Days for the Office of Health Care Ombudsman and Bill of Rights to resolve/close Commercial-Appeals/Grievances cases was (53.4) days - (See Pages 53-54);
- Of the (307) Commercial-Appeals/Grievances cases opened in FY21, the Office of Health Care Ombudsman and Bill of Rights resolved/closed (5) 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 (\$3,458,682.09). Of the total dollar amount saved (83%) was from Commercial-Appeals/Grievances cases. (See Pages 49-50);
- Of the (81) Administrative/Fair Hearing cases filed by the Office of Health Care Ombudsman and Bill of Rights (38% or 31 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—(59% or 9,076 contacts) (See Pages 10-11);
- Most contacts made to the Office of Health Care Ombudsman and Bill of Rights were by MCO beneficiaries - (42% or 6,523 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 (4) had the highest number of contacts (20% or 3,109 contacts), followed by Ward (1), and Ward (8) - (See Pages 14-15);
- Eligibility issues represented the largest category of issues encountered by all consumers – (40% or 6,107 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 FY21, the Office of Health Care Ombudsman and Bill of Rights opened a total of (76) Transportation Cases versus the (92) Transportation cases opened in FY20 – (See Pages 39-40);
- The Office of Health Care Ombudsman and Bill of Rights opened a total of (1,287) EPD Waiver Cases in FY21 versus the (968) EPD Waiver cases opened in FY20 – (See Pages 43-44); and
- In FY21, the Office of Health Care Ombudsman and Bill of Rights opened a total of (858) DC Health Link cases versus the (677) DC Health Link cases opened in FY20 - (See Pages 47-48).

Office of Health Care Ombudsman and Bill of Rights (OHCOBR) FY20

Summary of Activities

During Fiscal Year 2021, 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 2021 (October 1, 2020 through September 30, 2021).

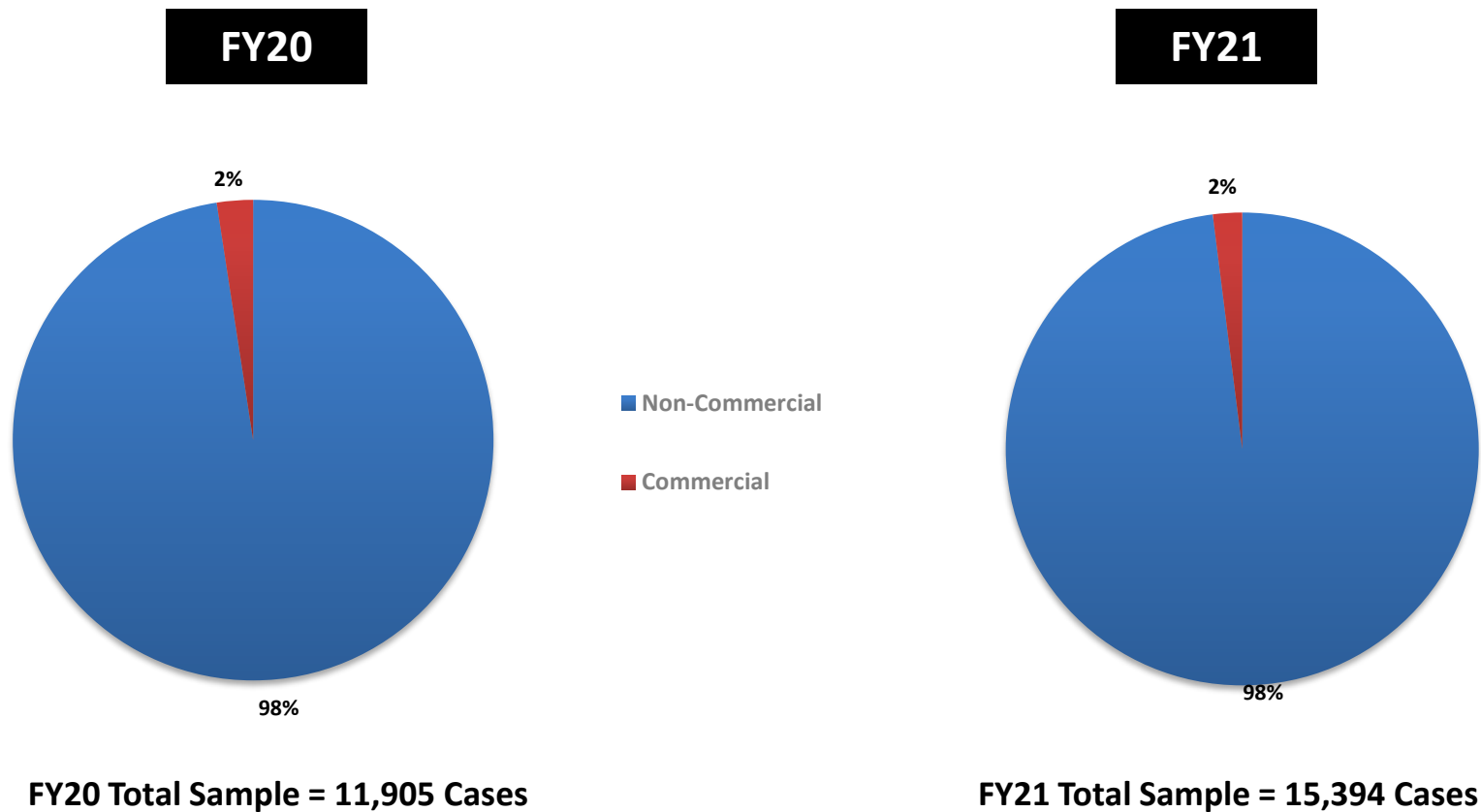
In summarizing the activities from the Ombudsman In-Take Data System (OIDS), the OHCOBR sought to answer the following key questions:

- *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 2021, the OHCOBR received a total of (613) contacts by individuals (consumers) who were repeat users versus (1,754) contacts in FY 2020;*

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.*

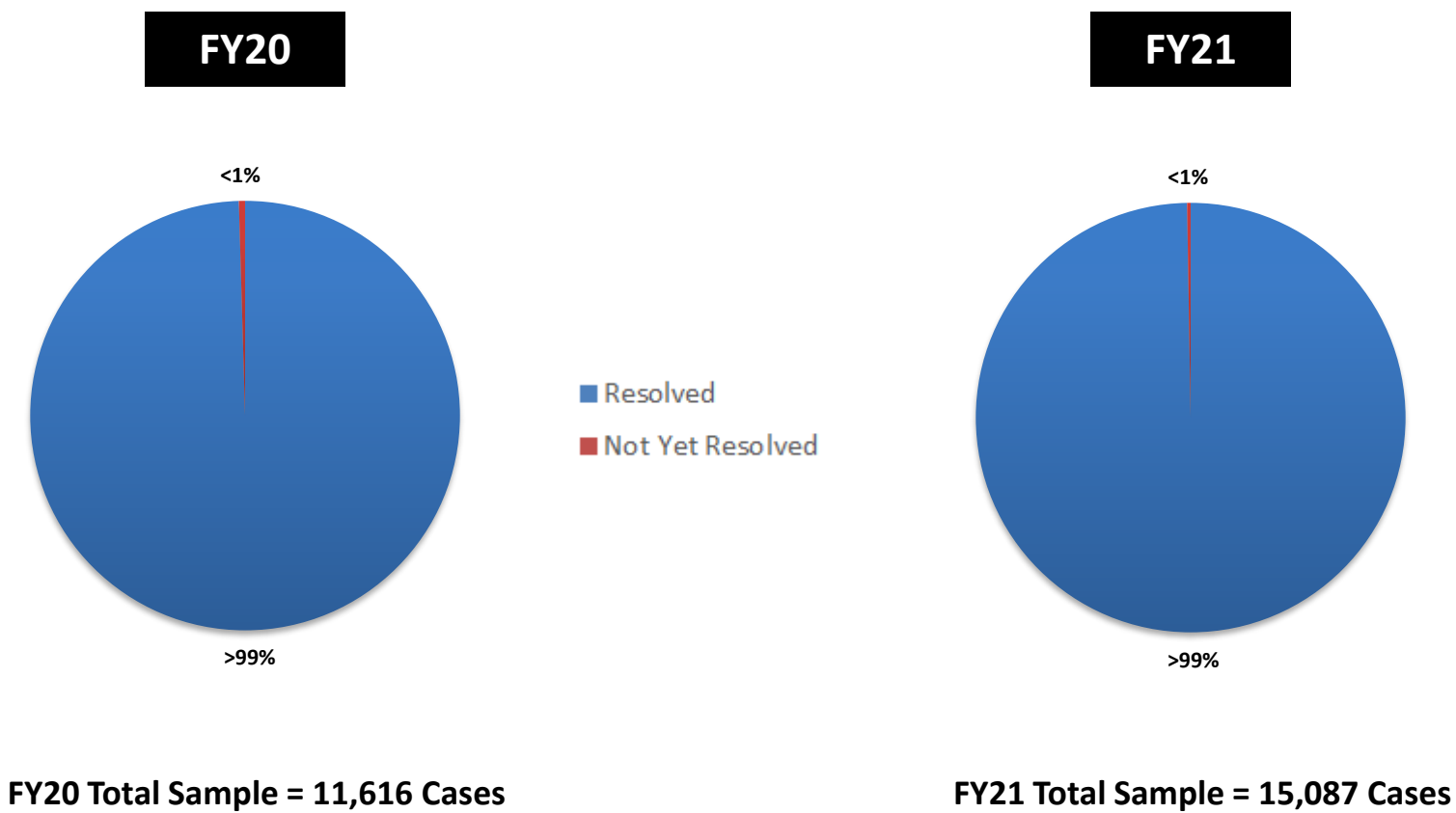
**Figure 1. Total Number and Percentage of Opened Cases Among All Contacts
(Non-Commercial and Commercial Appeals/Grievances-Bill of Rights)
FY20 and FY21**



**Table 1. Total Number and Percentage of Opened Cases Among All Contacts
(Non-Commercial and Commercial Appeals/Grievances-Bill of Rights)
FY20 and FY21**

Opened Cases (All Contacts)	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Non-Commercial Cases	11,616	98%	15,087	98%
Commercial (Appeals/Grievances— Bill of Rights) Cases	289	2%	307	2%
Total (Non-Commercial) and (Commercial-Appeals/Grievances- Bill of Rights) Opened Cases	11,905	100%	15,394	100%

Figure 2. Number and Percentage of Resolved/Closed Cases and Cases Not Resolved/Closed Among (Non-Commercial) Contacts FY20 and FY21

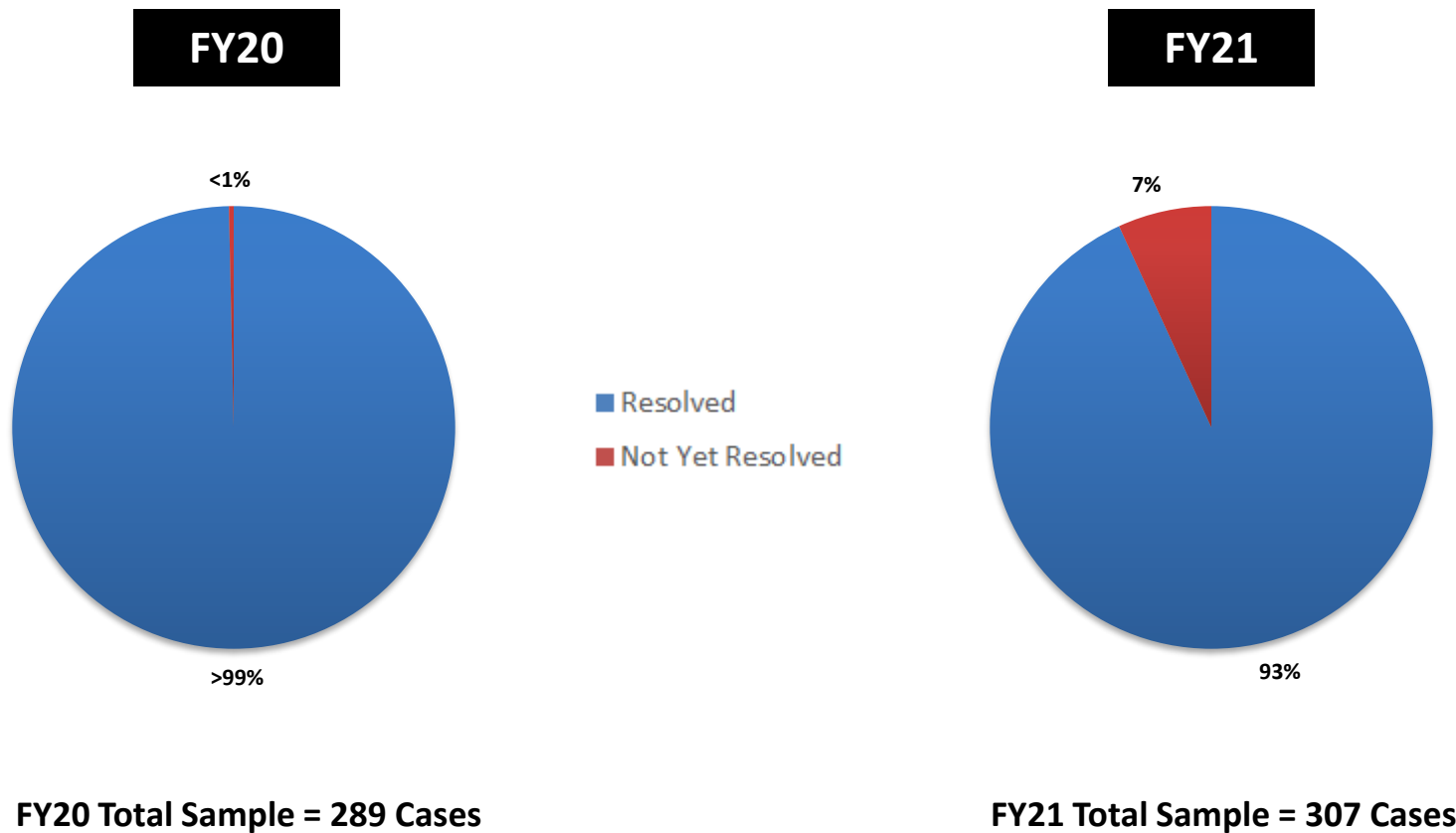


Source data captured between October 1, 2019 through September 30, 2020 and October 1, 2020 through September 30, 2021

Table 2. Number and Percentage of Resolved/Closed Cases and Cases Not Resolved/Closed Among (Non-Commercial) Contacts FY20 and FY21

Resolved/Closed Cases (Non-Commercial)	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Cases Resolved/Closed	11,566	>99%	15,047	>99%
Cases Not Yet Resolved/Closed	50	<1%	40	<1%
Total (Non-Commercial) Contacts/Cases	11,616	100%	15,087	100%

Figure 3. Number and Percentage of Resolved/Closed Cases and Cases Not Resolved/Closed Among (Commercial-Appeals/Grievances-Bill of Rights) FY20 and FY21

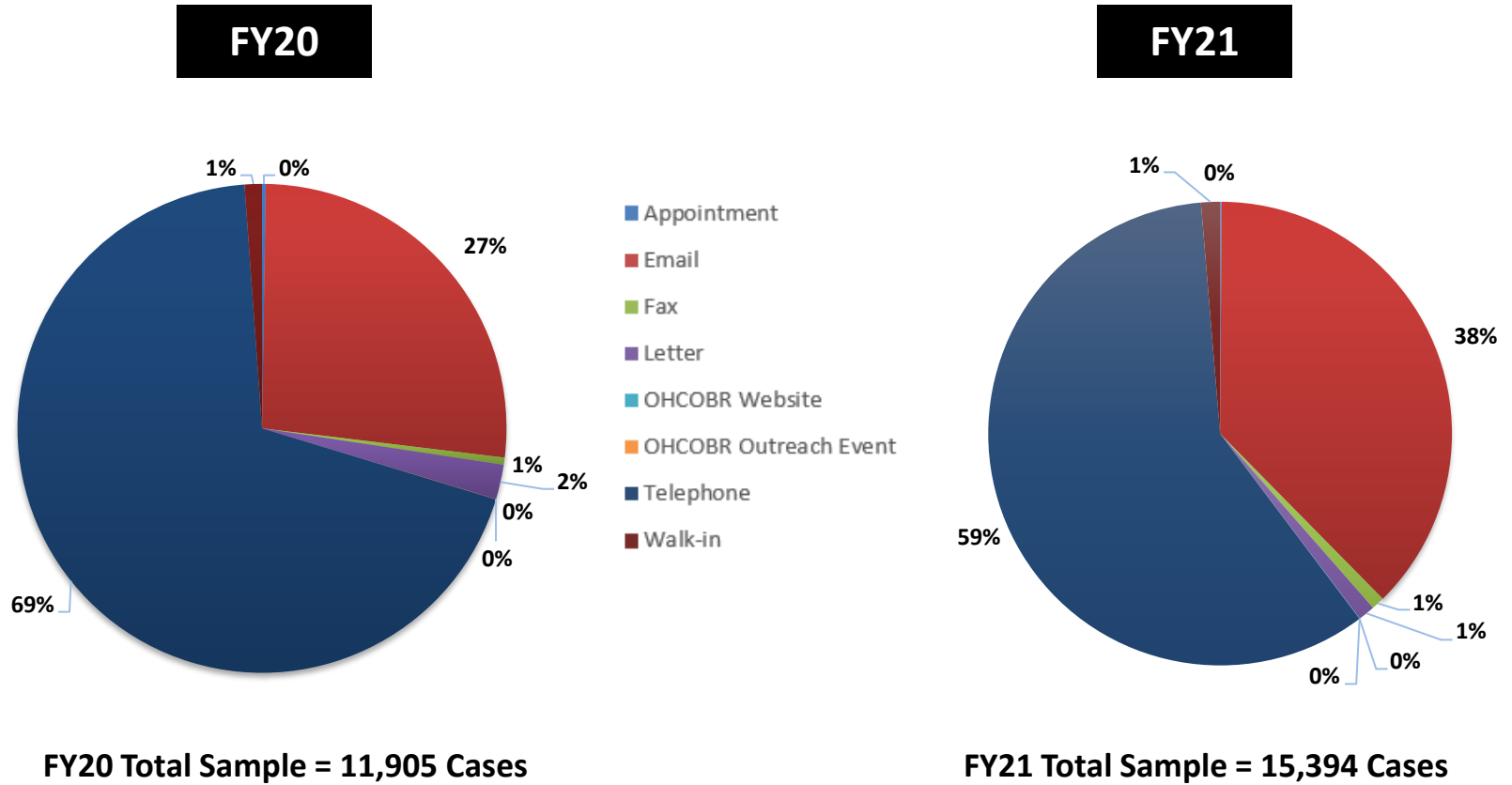


Source data captured between October 1, 2019 through September 30, 2020 and October 1, 2020 through September 30, 2021

Table 3. Number and Percentage of Resolved/Closed Cases and Cases Not Resolved/Closed Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts FY20 and FY21

Resolved/Closed Cases (Commercial-Appeals/Grievances-Bill of Rights)	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Appeals/Grievances Cases Resolved/Closed	288	>99%	287	93%
Appeals/Grievances Cases Not Yet Resolved/Closed	1	<1%	20	7%
Total (Commercial-Appeals/Grievances-Bill of Rights) Contacts/Cases	289	100%	307	100%

Figure 4. Methods of Contacting the Office of Health Care Ombudsman and Bill of Rights (OHCOBR) FY20 and FY21

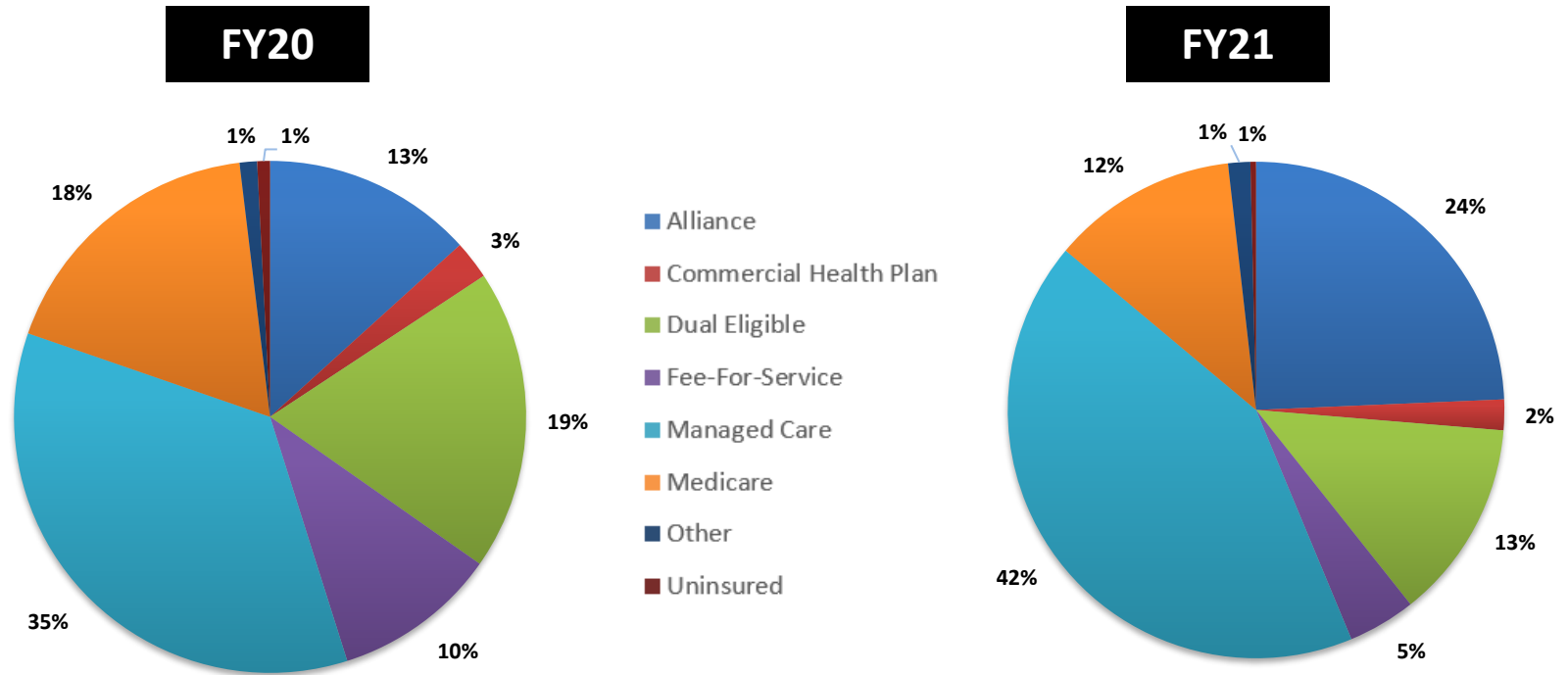


Source data captured between October 1, 2019 through September 30, 2020 and October 1, 2020 through September 30, 2021

**Table 4. Methods of Contacting the Office of Health Care Ombudsman
and Bill of Rights (OHCOBR)
FY20 and FY21**

Methods of Contacting OHCOBR	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Appointment	29	<1%	17	<1%
Email	3,175	27%	5,775	38%
Fax	56	<1%	139	1%
Letter	273	2%	181	1%
OHCOBR's Website (E-mails)	0	0%	3	<1%
OHCOBR's Outreach Events	2	<1%	0	0%
Telephone	8,234	69%	9,076	59%
Walk-In	136	1%	203	1%
Total Methods of Contacting OHCOBR	11,905	100%	15,394	100%

Figure 5. Categories of Contacts by Insurance Type FY20 and FY21



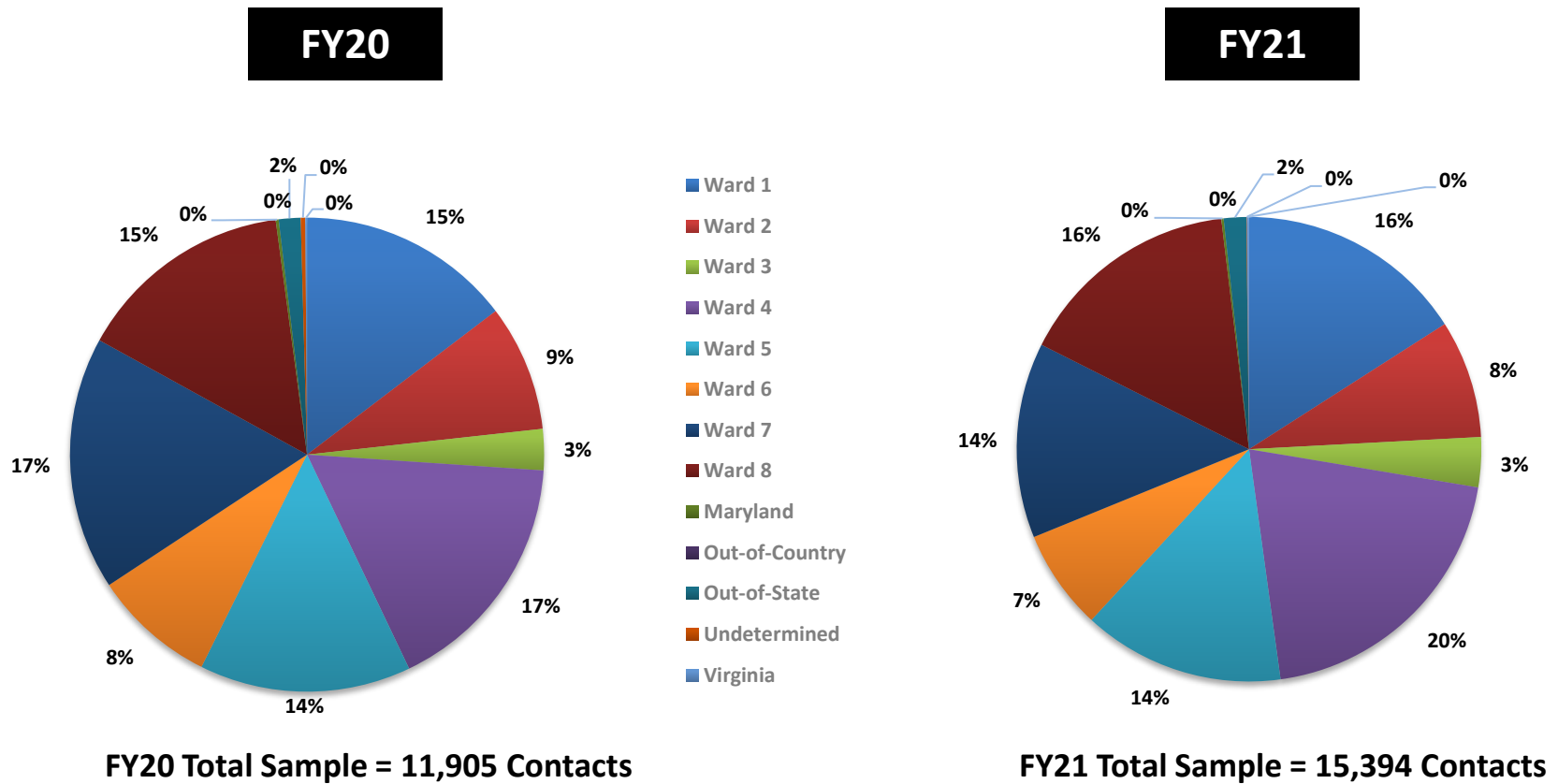
FY20 Total Sample = 11,905 Contacts

FY21 Total Sample = 15,394 Contacts

**Table 5. Categories of Contacts by Insurance Type
FY20 and FY21**

Categories of Insurance Type	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Alliance (includes Alliance/ADAP and Immigrant Children beneficiaries)	1,582	13%	3,744	24%
Commercial Health Plan (includes Medicare/Commercial Part D Prescription Plans -- Appeals/Grievances-Bill of Rights cases)	289	2%	307	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)	2,264	19%	2,001	13%
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)	1,237	11%	679	5%
Medicaid Managed Care (MCO) (includes AFDC-TANF/Childless Adult/Childless Adult-MAGI/CHIP/Katie Beckett/TANF/Special Needs Beneficiaries)	4,187	35%	6,523	42%
Medicare (includes Part A; Part B; Part A/B; Part A/B (QMB) and SLMB Beneficiaries)	2,119	18%	1,862	12%
Other (includes ADAP/Deceased/Limited/Restricted Coverage/Limited/Restricted-Childless Adult-Incarcerated/Out-of-State Medicaid Coverage/Spend-Down/Undetermined)	131	1%	222	1%
Uninsured	96	1%	56	1%
Total Contacts by Insurance Type	11,905	100%	15,394	100%

Figure 6. Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area FY20 and FY21



Source data captured between October 1, 2019 through September 30, 2020 and October 1, 2020 through September 30, 2021

**Table 6. Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area
FY20 and FY21**

Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Ward 1	1,744	15%	2,455	16%
Ward 2	1,026	9%	1,264	8%
Ward 3	333	3%	535	3%
Ward 4	2,006	17%	3,109	20%
Ward 5	1,718	14%	2,160	14%
Ward 6	998	8%	1,073	7%
Ward 7	2,058	17%	2,092	14%
Ward 8	1,770	15%	2,412	16%
Maryland (Located Within the DC Metropolitan Area)	27	<1%	25	<1%
Out-of-Country	0	0%	0	0%
Out-of-State (States Located Outside of the DC Metropolitan Area)	177	1%	241	1%
Undetermined	37	<1%	6	<1%
Virginia (Located Outside of the DC Metropolitan Area)	17	<1%	22	<1%
Total Contacts by Wards and States Located Within the DC Metropolitan Area and States Located Outside of the DC Metropolitan Area	11,905	100%	15,394	100%

Types of Issues Encountered

The following issues were encountered by Consumers:

Access/Coverage (includes denials of services):

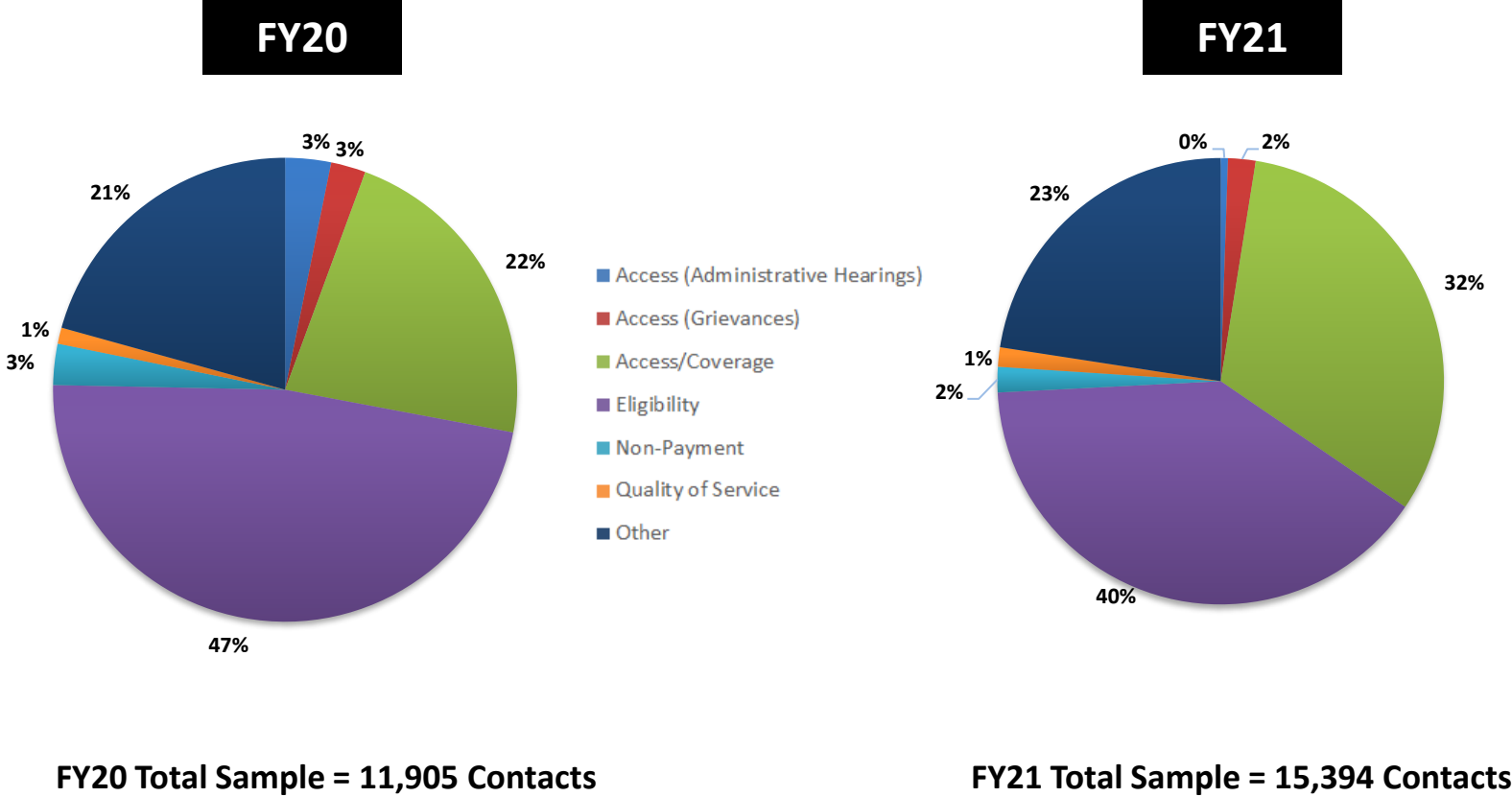
- ❖ **Access to Administrative Hearings:** to include denials of Breast Augmentation/Dental Services/, DME Services/ In-Patient Services (Hospital)/Medicaid Coverage/Medical Assistance/Food Stamps/Optical Services/Prescription Services/Increase in PCA Hours (EPD Waiver)/Home Health Services (EPD Waiver & 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) FY20 and FY21



Source data captured between October 1, 2019 through September 30, 2020 and October 1, 2020 through September 30, 2021

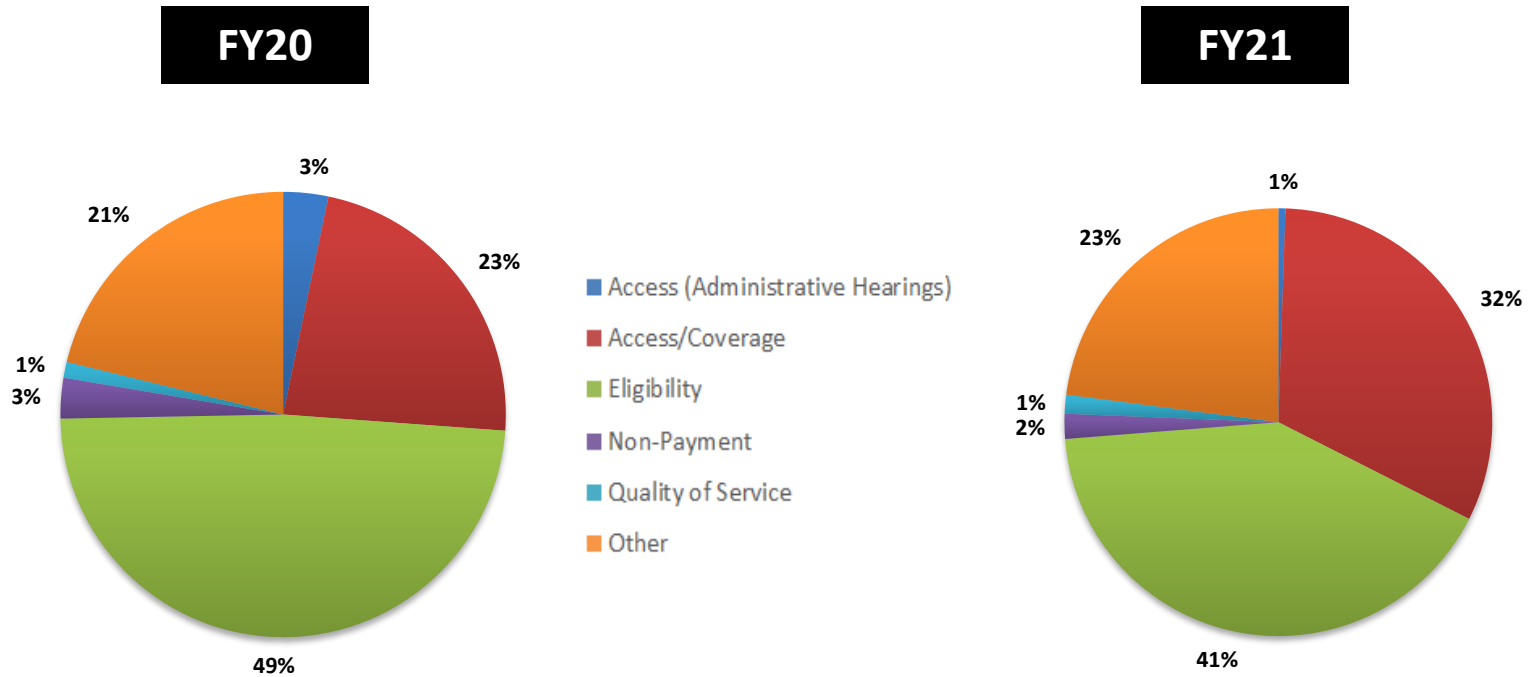
**Table 7. Breakdown of Types of Issues Encountered by All Contacts –
(Non-Commercial) and (Commercial-Appeals/Grievances-Bill of Rights)
FY20 and FY21**

Types of Issues Encountered by All Contacts (Non-Commercial); and (Commercial- Appeals/Grievances-Bill of Rights)	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Access (Administrative Hearings)	380	3%	81	1%
Access (Commercial-Appeals/Grievances-Bill of Rights)	289	2%	307	2%
Access/Coverage (includes Access to services and Coverage includes denials of services)	2,659	22%	4,926	32%
Eligibility/Recertification (status of eligibility/verification of coverage)	5,639	48%	6,107	40%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	341	3%	284	2%
Quality of Service (includes services rendered by Providers)	134	1%	216	1%
*Other Issues	2,463	21%	3,473	22%
Total Types of Issues (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) Contacts	11,905	100%	15,394	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.*

Source data captured between October 1, 2019 through September 30, 2020 and October 1, 2020 through September 30, 2021

Figure 8. Breakdown of Types of Issues Encountered by (Non-Commercial) Contacts FY20 and FY21



FY20 Total Sample = 11,616 Contacts

FY21 Total Sample = 15,087 Contacts

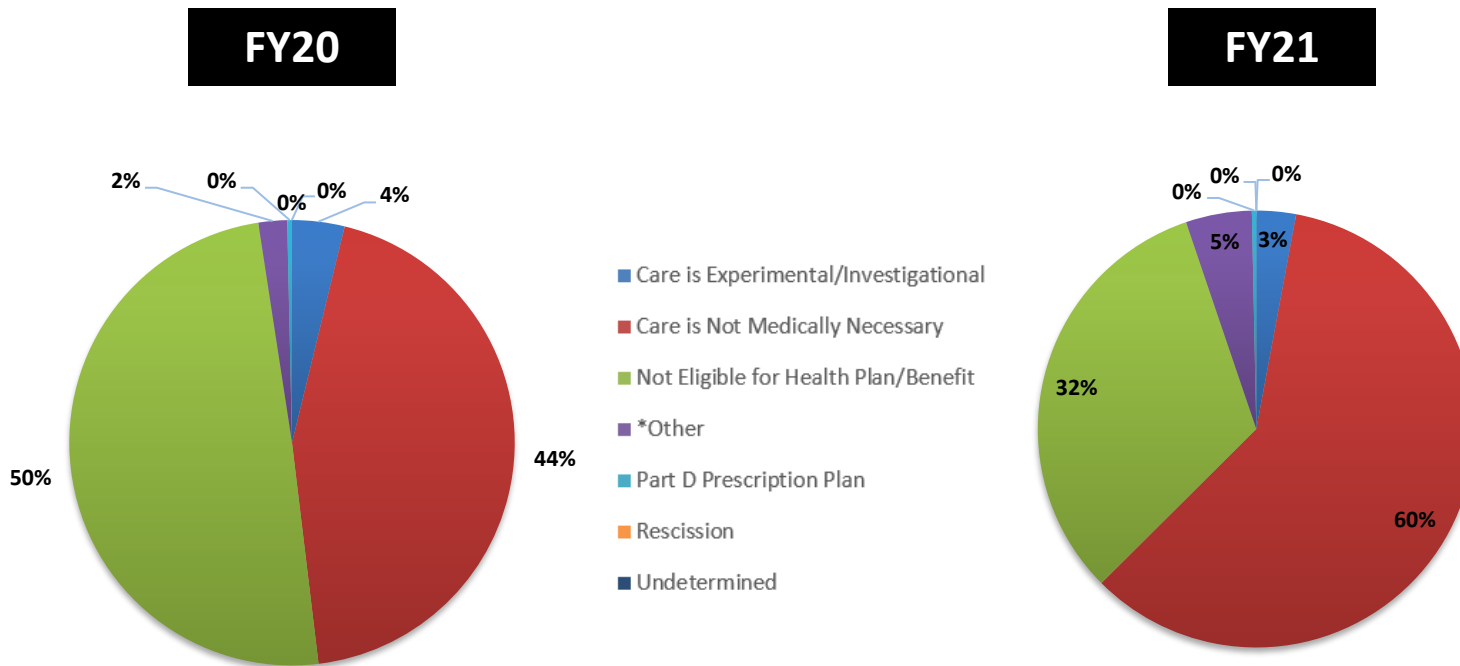
**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction 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 8. Breakdown of Types of Issues Encountered by
(Non-Commercial) Contacts
FY20 and FY21**

Types of Issues (Non-Commercial) Contacts	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Access (Administrative Hearings)	380	3%	81	1%
Access/Coverage (includes Access to services and Coverage includes denials of services)	2,659	23%	4,926	32%
Eligibility/Recertification (status of eligibility/verification of coverage)	5,639	49%	6,107	41%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	341	3%	284	2%
Quality of Service (includes services rendered by Providers)	134	1%	216	1%
*Other Issues	2,463	21%	3,473	23%
Total Types of Issues-(Non-Commercial) Contacts	11,616	100%	15,087	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 FY20 and FY21



FY20 Total Sample = 289 Contacts

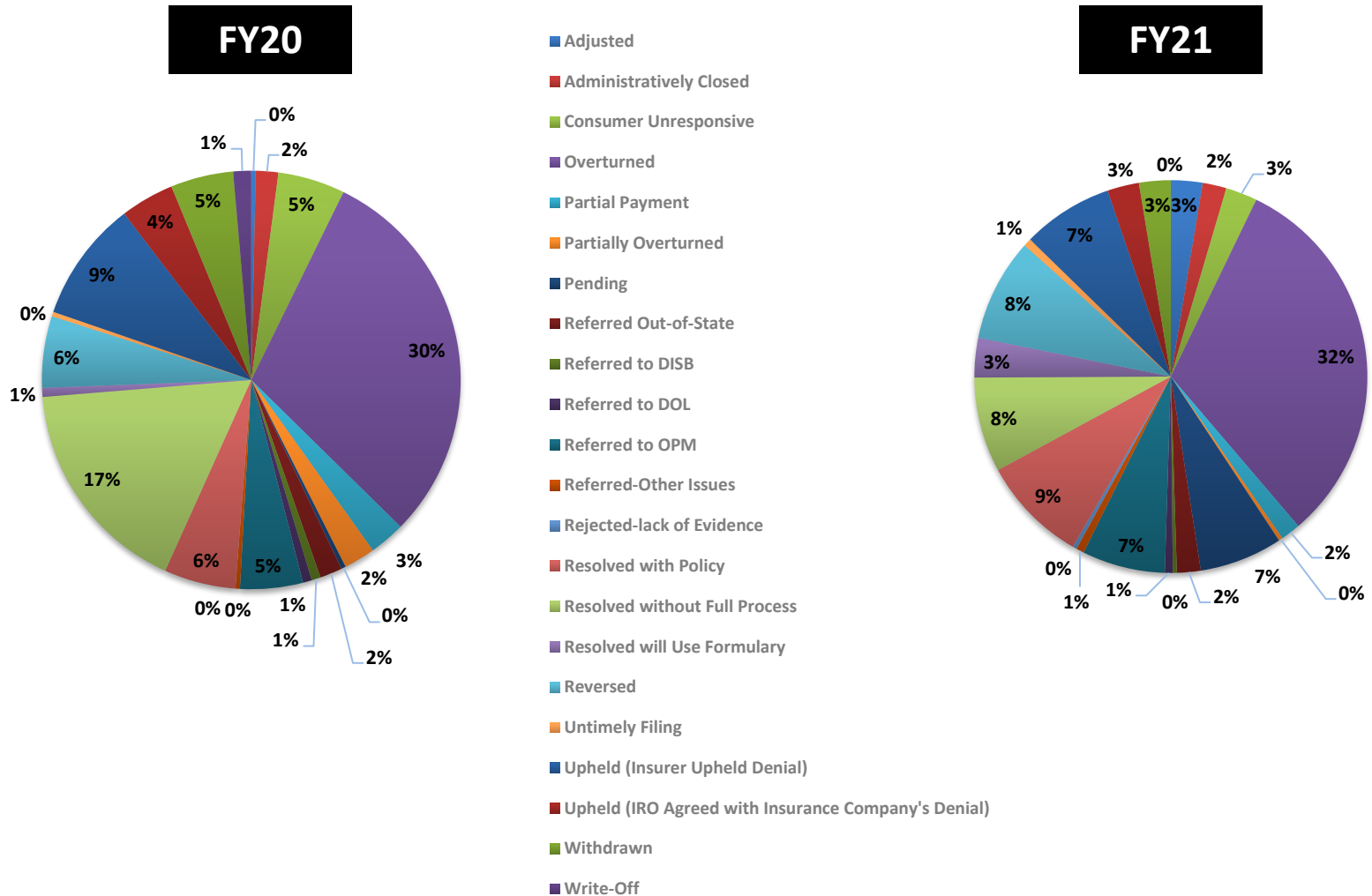
FY21 Total Sample = 307 Contacts

***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
FY20 and FY21**

Types of Issues (Commercial-Appeals/Grievances-Bill of Rights)	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Care Is Experimental/Investigational	11	4%	9	3%
Care Is Not Medically Necessary	128	44%	183	<60%
Not Eligible for Health Plan/Benefit	143	>49%	99	32%
*Other Issues	6	2%	15	5%
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	289	100%	307	100%

Figure 9b. Breakdown of Dispositions of All Cases Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts FY20 and FY21

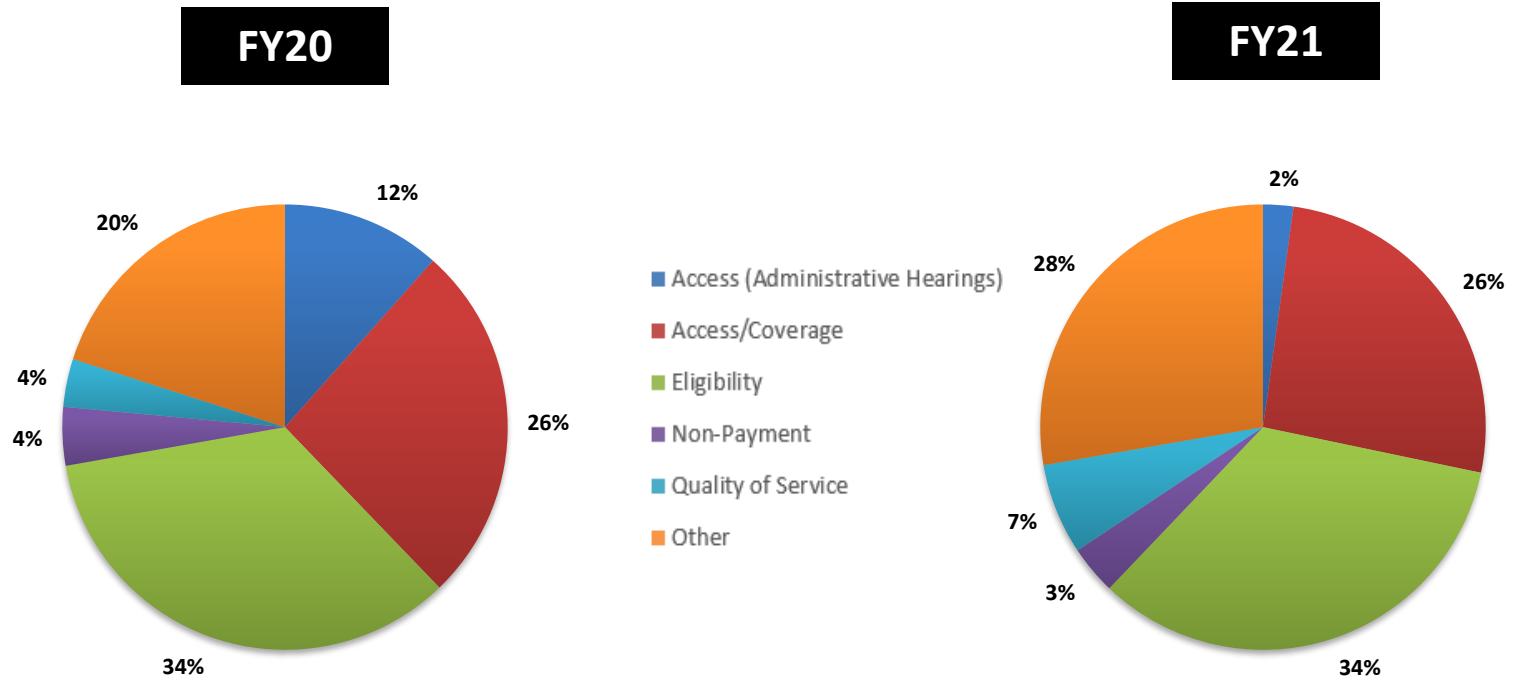


Source data captured between October 1, 2019 through September 30, 2020 and October 1, 2020 through September 30, 2021

**Table 9b. Breakdown of Dispositions of All Cases Among
(Commercial-Appeals/Grievances-Bill of Rights) Contacts
FY20 and FY21**

Dispositions of All Cases Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Adjusted (case closed)	1	<1%	8	3%
Administratively Closed (case closed-due to no action)	5	2%	6	2%
Consumer Unresponsive (case closed)	15	5%	8	3%
On-Hold in Abeyance (case closed)	0	0%	0	0%
Overtured (case closed-insurance company changed the denial)	87	30%	97	32%
Partial Payment (case closed-insurance company paid a portion of claim)	8	3%	5	2%
Partially Overtured (case closed-insurance company changed a portion of the denial)	7	2%	1	<1%
Pending (case is still opened)	1	<1%	20	7%
Referred to DISB (case closed-referred to DISB for policy interpretation or benefit issues)	2	1%	1	<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)	14	5%	21	7%
Referred-Other Issues (case closed-issues not listed)	1	<1%	2	<1%
Referred-Out-of-State (case closed-lack of jurisdiction)	5	2%	6	2%
Rejected (case closed-lack of evidence)	0	0%	1	<1%
Resolved (case closed-resolved without use of full process)	16	6%	24	8%
Resolved (in accordance with policy)	49	17%	27	9%
Resolved (will use formulary alternative)	2	1%	10	3%
Reversed (case closed-IRO changed the insurance company's denial)	16	5%	26	8%
Untimely Filing (case closed-member filed appeal after the filing date)	1	<1%	2	<1%
Upheld (case closed-insurer upheld denial)	27	9%	23	7%
Upheld (case closed-IRO agreed with the insurance company's denial)	12	4%	9	3%
Withdrawn (case closed-member decided not to proceed with appeal)	14	5%	8	3%
Write-Off (case closed-provider agreed to write-off balance due)	4	1%	0	0%
Total Dispositions of All Cases Among (Commercial-Appeals/Grievances-Bill of Rights) Contacts	289	100%	307	100%

Figure 10. Breakdown of Types of Issues Encountered by Dual Eligible (Medicare and Medicaid) Contacts FY20 and FY21



FY20 Total Sample = 2,264 Contacts

FY21 Total Sample = 2,001 Contacts

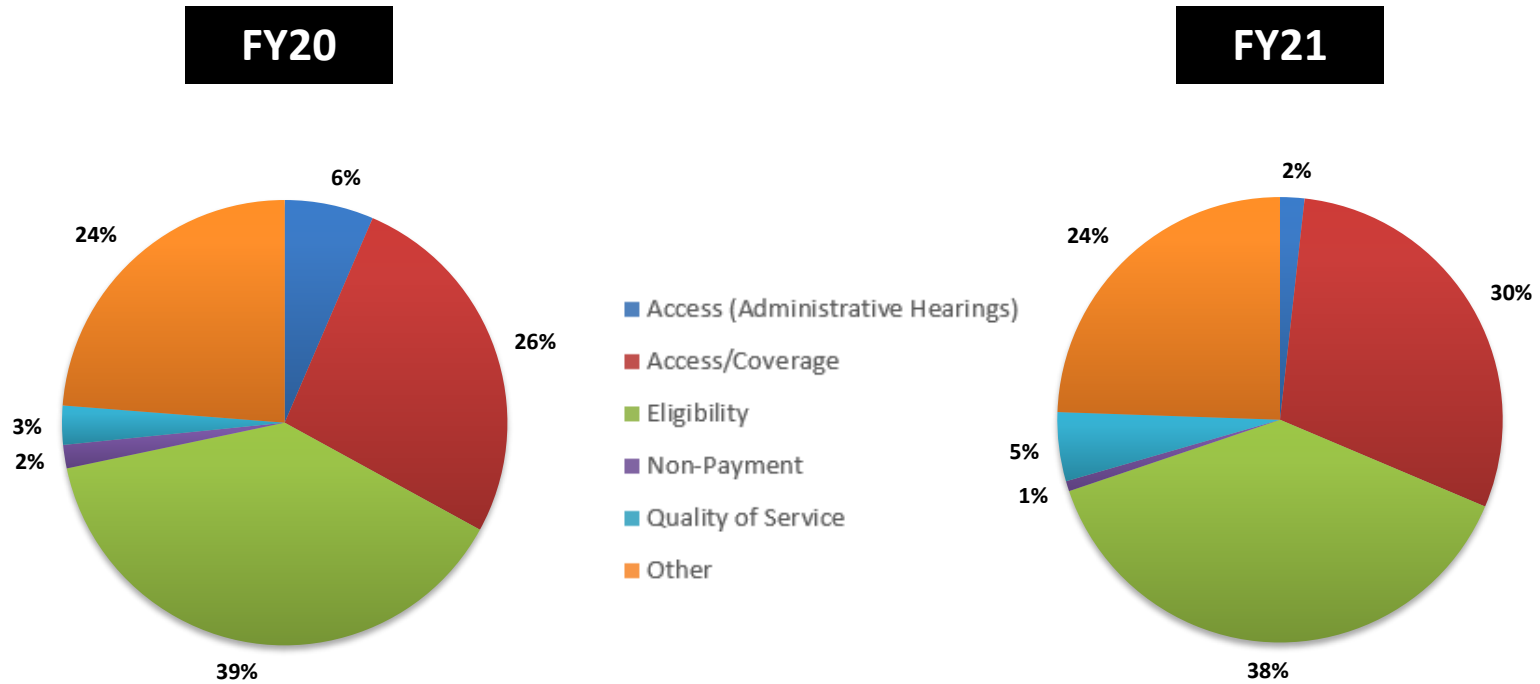
**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction 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 FY20 and FY21

Types of Issues Encountered by Dual Eligible (Medicare and Medicaid) Contacts	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Access (Administrative Hearings)	262	12%	44	2%
Access/Coverage (includes Access to services and Coverage includes denials of services)	594	26%	528	26%
Eligibility/Recertication (status of eligibility/verification of coverage)	779	34%	671	34%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	96	4%	71	>3%
*Other Issues	454	20%	555	28%
Quality of Service (includes services rendered by Providers)	79	4%	132	>6%
Total Types of Issues-Dual Eligible (Medicare and Medicaid) Contacts	2,264	100%	2,001	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 11. Breakdown of Types of Issues Encountered by Medicaid Fee-for-Service (FFS) Contacts FY20 and FY21



FY20 Total Sample = 1,237 Contacts

FY21 Total Sample = 679 Contacts

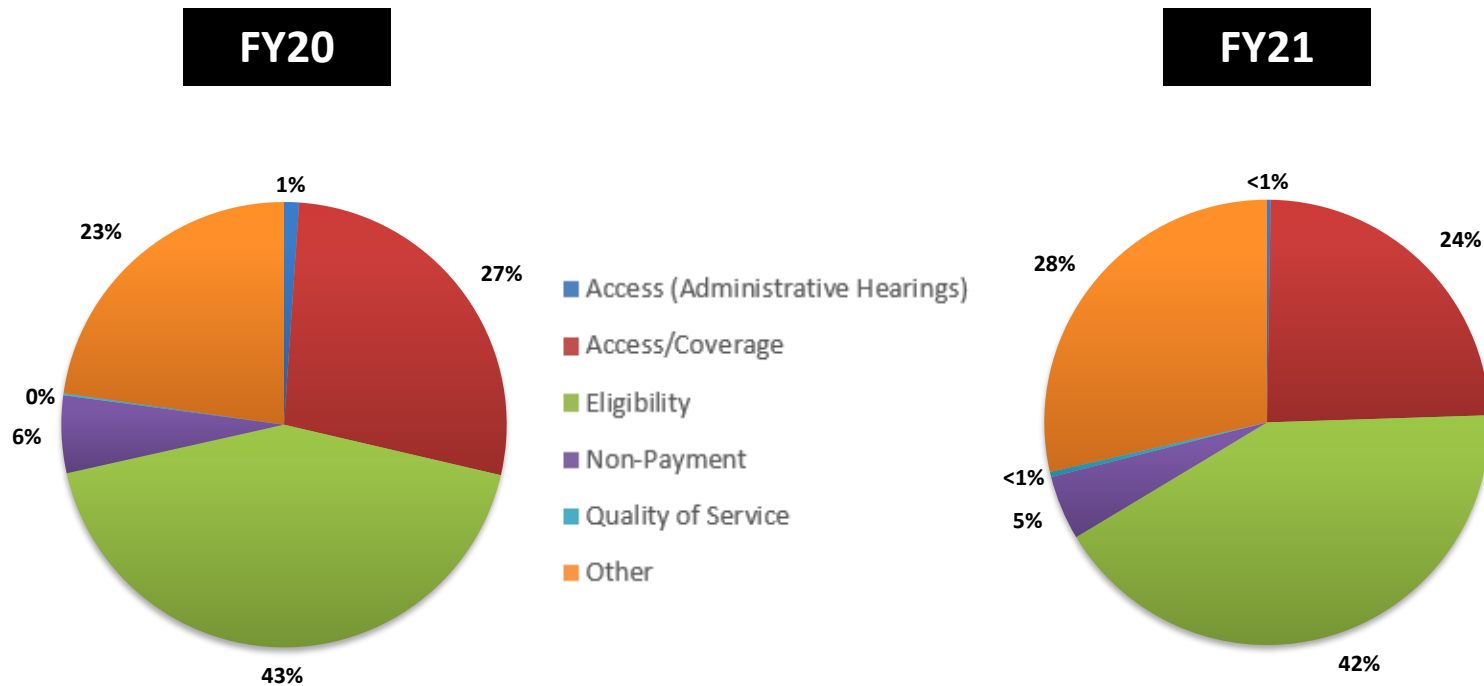
***Other Issues:** Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction in PCA hours; death certificates; duplicate Medicaid/Medicaid MCO/QMB ID cards; emergency room coverage (out-of-state); food stamps 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 11. Breakdown of Types of Issues Encountered by Medicaid Fee-for-Service (FFS) Contacts FY20 and FY21

Types of Issues Encountered by Medicaid Fee-for-Service (FFS) Contacts	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Access (Administrative Hearings)	80	6%	12	2%
Access/Coverage (includes Access to services and Coverage includes denials of services)	328	26%	208	30%
Eligibility/Recertification (status of eligibility/verification of coverage)	479	39%	257	38%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	21	2%	5	1%
*Other Issues	294	24%	163	24%
Quality of Service (includes services rendered by Providers)	35	3%	34	5%
Total Types of Issues-Medicaid Fee-for-Service Contacts	1,237	100%	679	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 FY20 and FY21



FY20 Total Sample = 2,119 Contacts

FY21 Total Sample = 1,862 Contacts

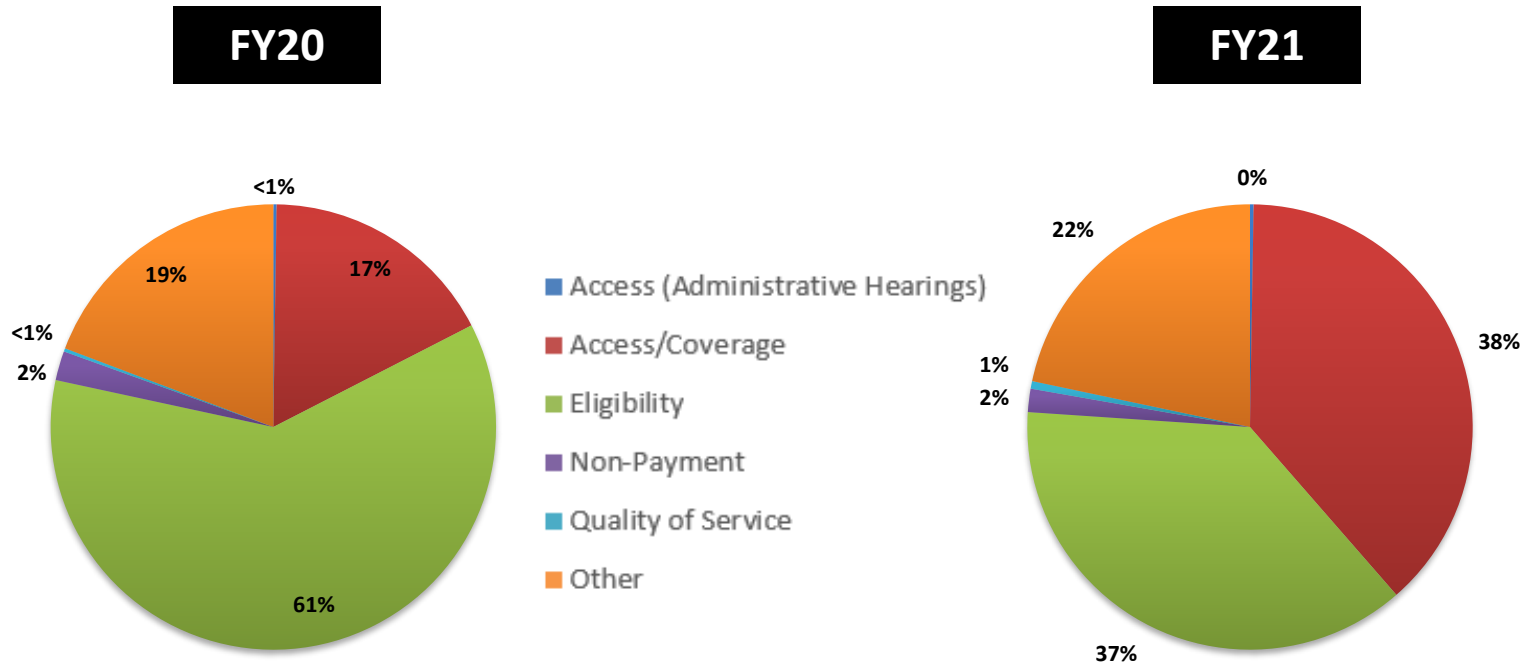
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Table 12. Breakdown of Types of Issues Encountered by Medicare Part A; Part B; Part A/B; Part A/B (QMB) Contacts FY20 and FY21

Types of Issues Encountered by Medicare Part A; Part B; Part A/B; Part A/B (QMB) Contacts	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Access (Administrative Hearings)	23	1%	5	<1%
Access/Coverage (includes Access to services and Coverage includes denials of services)	584	>27%	457	24%
Eligibility/Recertification (status of eligibility/verification of coverage)	908	43%	775	42%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	119	>5%	87	5%
*Other Issues	482	23%	531	28%
Quality of Service (includes services rendered by Providers)	3	<1%	7	<1%
Total Types of Issues-Medicare Part A; Part B; Part A;/B; Part A/B (QMB) Contacts	2,119	100%	1,862	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 FY20 and FY21



FY20 Total Sample = 4,187 Contacts

FY21 Total Sample = 6,523 Contacts

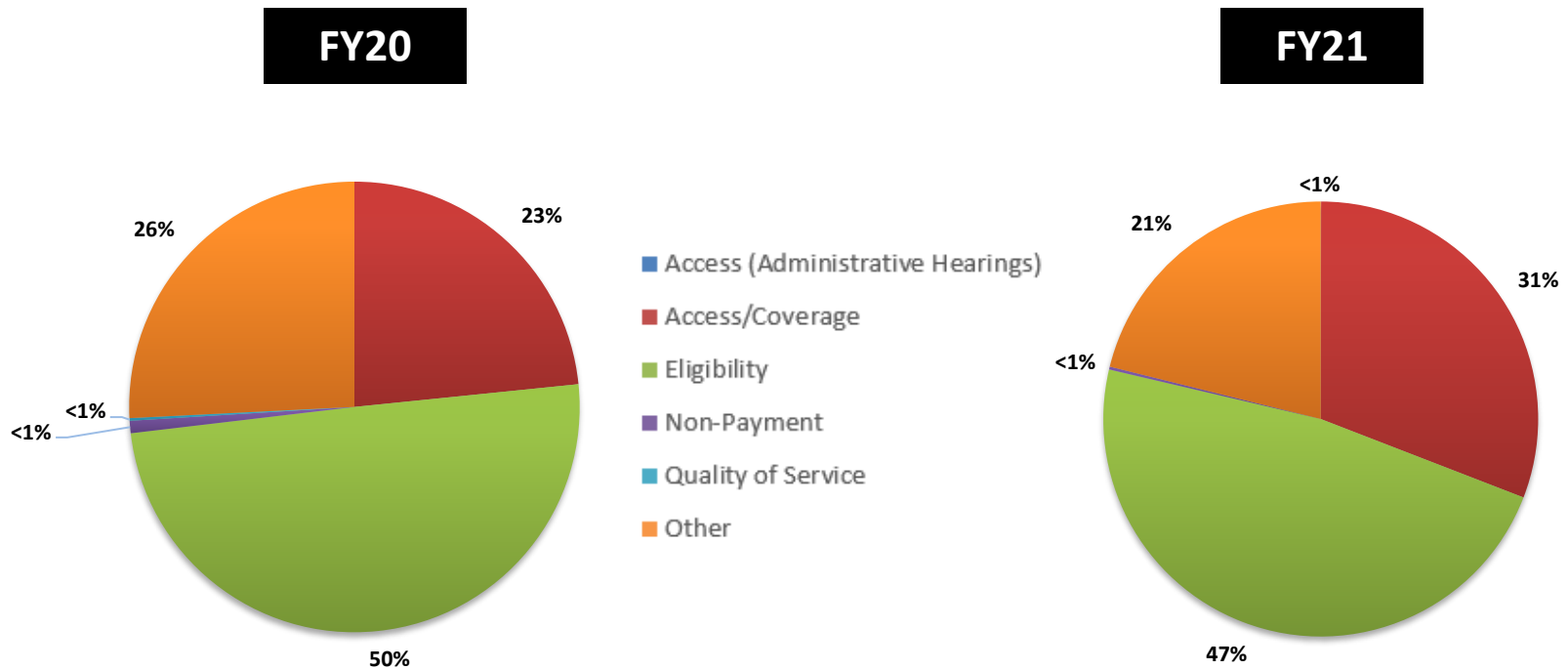
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**Table 13. Breakdown of Types Issues Encountered by
Medicaid Managed Care (MCO) Contacts
FY20 and FY21**

Types of Issues Encountered by Medicaid Managed Care (MCO) Contacts	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Access (Administrative Hearings)	10	<1%	17	<1%
Access/Coverage (includes Access to services and Coverage includes denials of services)	721	17%	2,500	37%
Eligibility/Recertication (status of eligibility/verification of coverage)	2,551	61%	2,445	39%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	89	2%	110	2%
*Other Issues	806	19%	1,415	21%
Quality of Service (includes services rendered by Providers)	10	<1%	36	<1%
Total Types of Issues-Medicaid Managed Care (MCO) Contacts	4,187	100%	6,523	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 FY20 and FY21



FY20 Total Sample = 1,582 Contacts

FY21 Total Sample = 3,744 Contacts

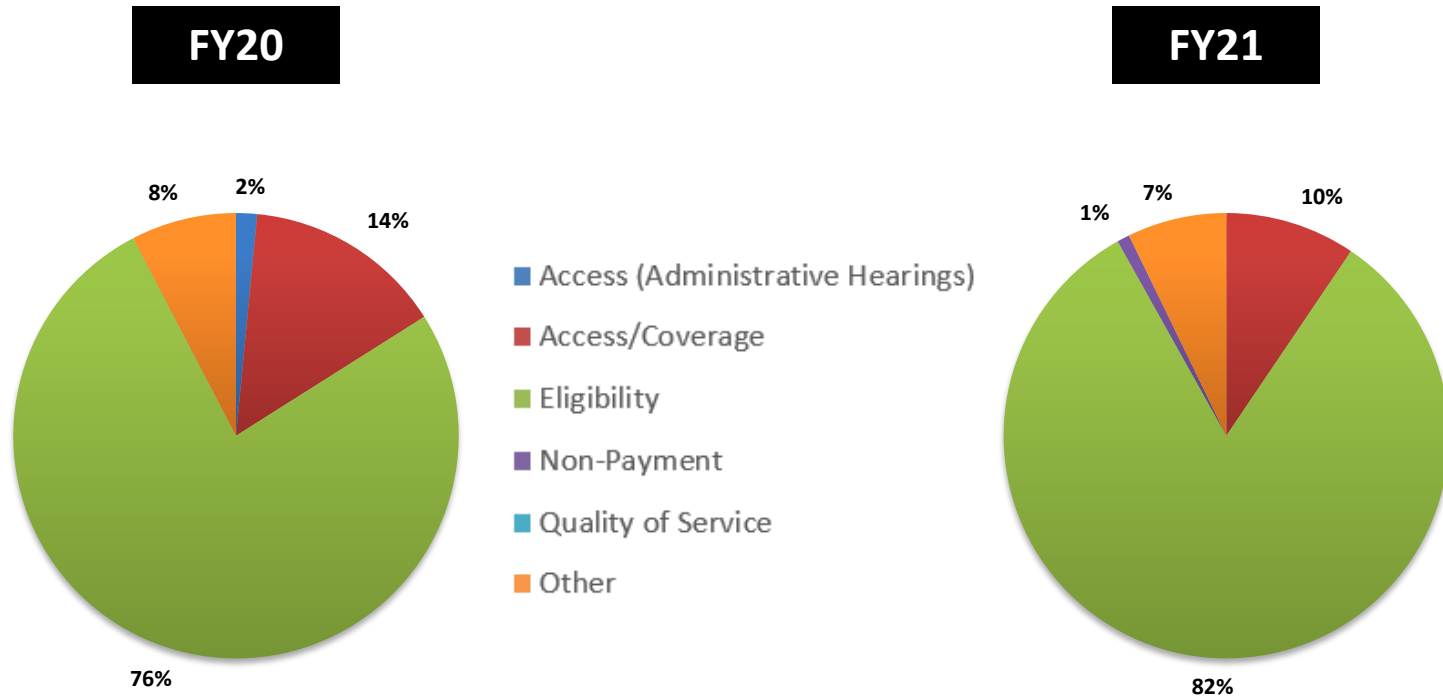
**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHC Letters-reduction 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 14. Breakdown of Types of Issues Encountered by Alliance Contacts
FY20 and FY21**

Types of Issues Encountered by Alliance Contacts	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Access (Administrative Hearings)	0	0%	1	<1%
Access/Coverage (includes Access to services and Coverage includes denials of services)	370	23%	1,181	31%
Eligibility/Recertication (status of eligibility/verification of coverage)	787	50%	1,764	47%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	14	<1%	8	<1%
*Other Issues	408	26%	790	21%
Quality of Service (includes services provided by Providers)	3	<1%	0	0%
Total Types of Issues-Alliance Contacts	1,582	100%	3,744	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 for not to be discharged from hospital; stolen wallet assistance; stop payment to HHA; tattoo removal assistance; third party insurance assistance; transfer from DC Medicaid to Maryland Medicaid; transgender re-assignment assistance; location of child given up for adoption assistance; and rights of HHA.*

Figure 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) FY20 and FY21



FY20 Total Sample = 131 Contacts

FY21 Total Sample = 222 Contacts

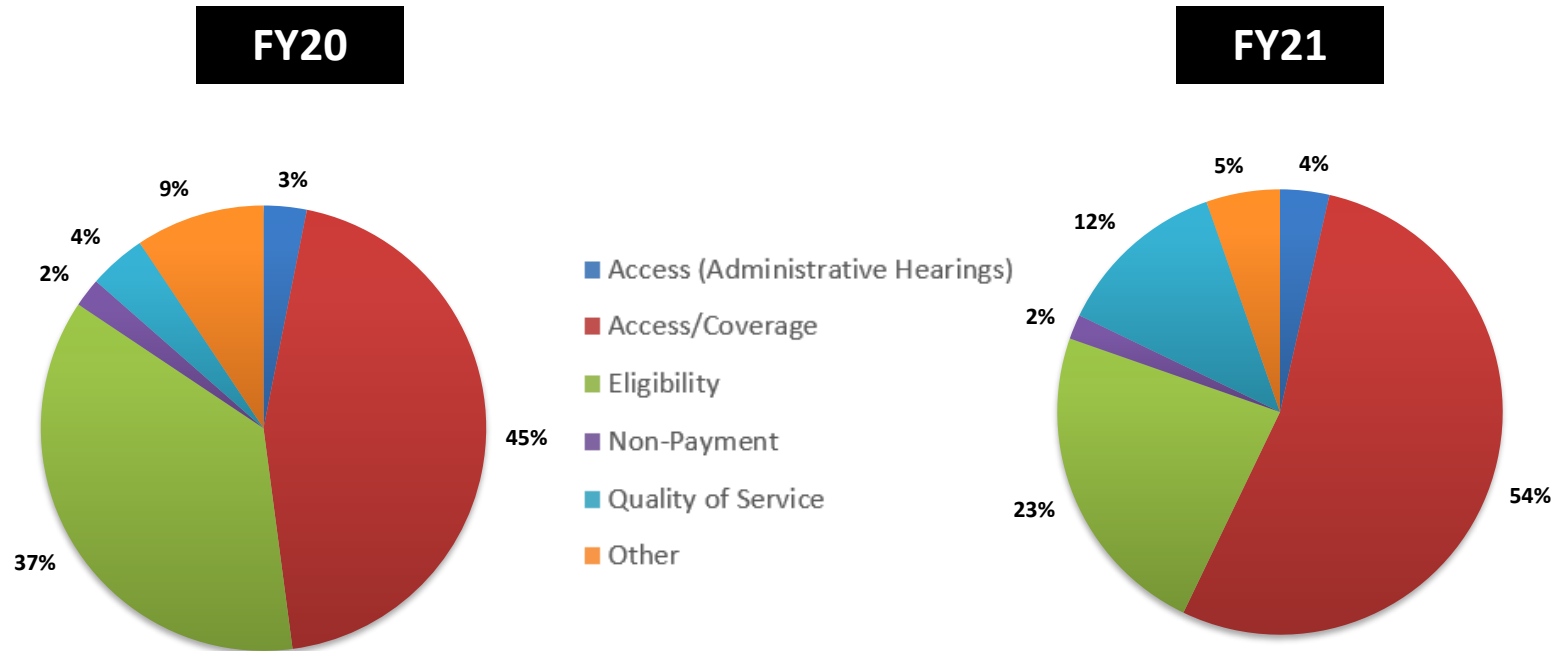
**Other Issues: Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCf Letters-reduction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

Table 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) FY20 and FY21

Types of Issues Encountered by Other Contacts	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Access (Administrative Hearings)	2	2%	0	0%
Access/Coverage (includes Access to services and Coverage includes denials of services)	19	14%	21	10%
Eligibility/Recertication (status of eligibility/verification of coverage)	100	76%	183	82%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	0	0%	2	1%
*Other Issues	10	8%	16	7%
Quality of Service (includes services provided by Providers)	0	0%	0	0%
Total Types of Issues-Alliance Contacts	131	100%	222	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 FY20 and FY21



FY20 Total Sample = 96 Contacts

FY21 Total Sample = 56 Contacts

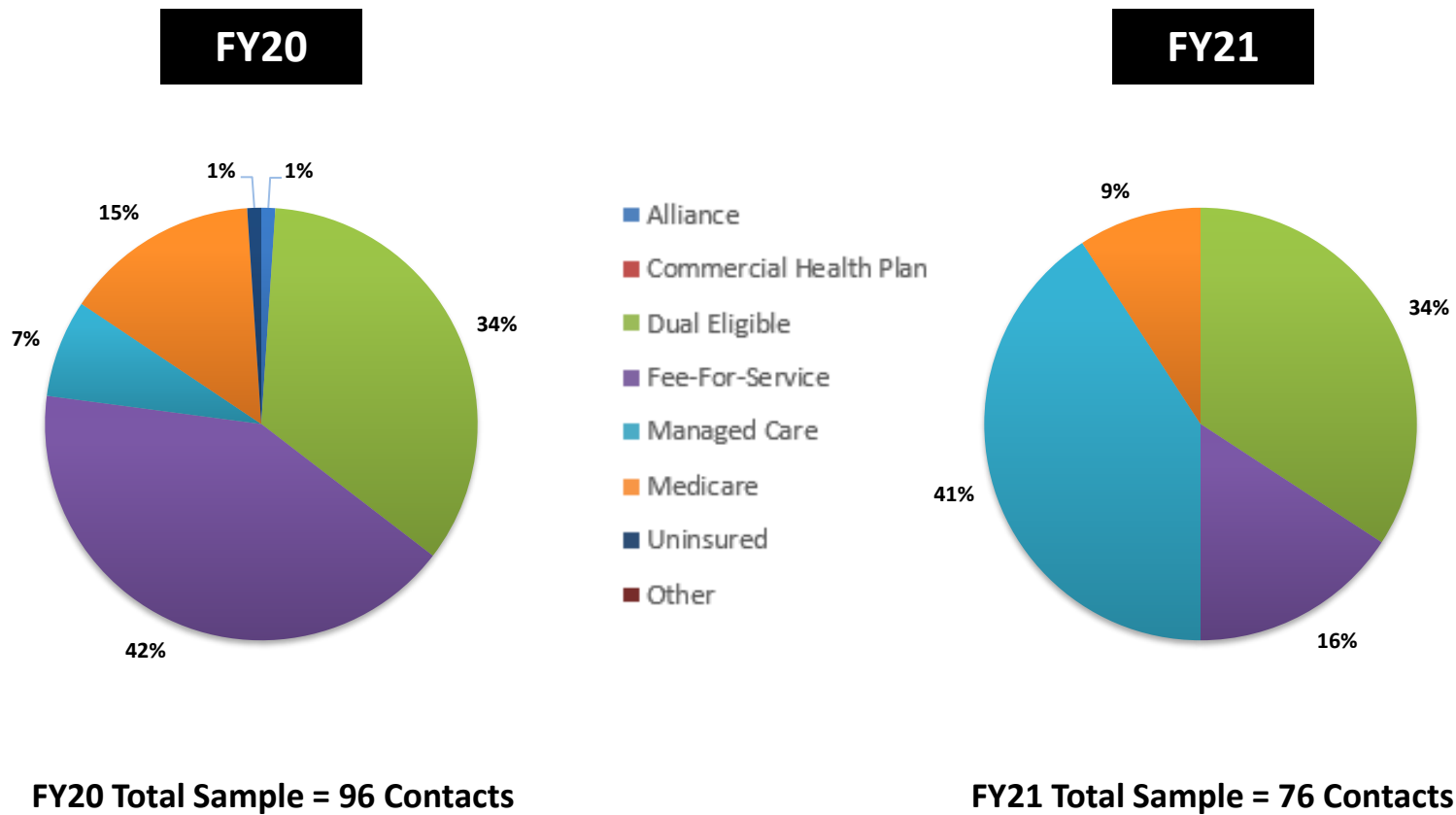
***Other Issues:** Anomalous and generic complaints/issues to include accessible housing; address change; assistance for paying bills; assistance with completing applications for insurance coverage; billing address for Xerox; auto repairs; banking issues; burial assistance; caregiver assistance; DHCF 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
FY20 and FY21**

Types of Issues Encountered by Uninsured Contacts	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Access (Administrative Hearings)	3	3%	2	4%
Access/Coverage (includes access to services and Coverage includes denials of services)	43	45%	31	54%
Eligibility/Recertification (status of eligibility/verification of coverage)	35	>36%	12	23%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	2	2%	1	2%
*Other Issues	9	>9%	3	5%
Quality of Service (includes services rendered by Providers)	4	4%	7	12%
Total Types of Issues-Uninsured Contacts	96	100%	56	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 FY20 and FY21



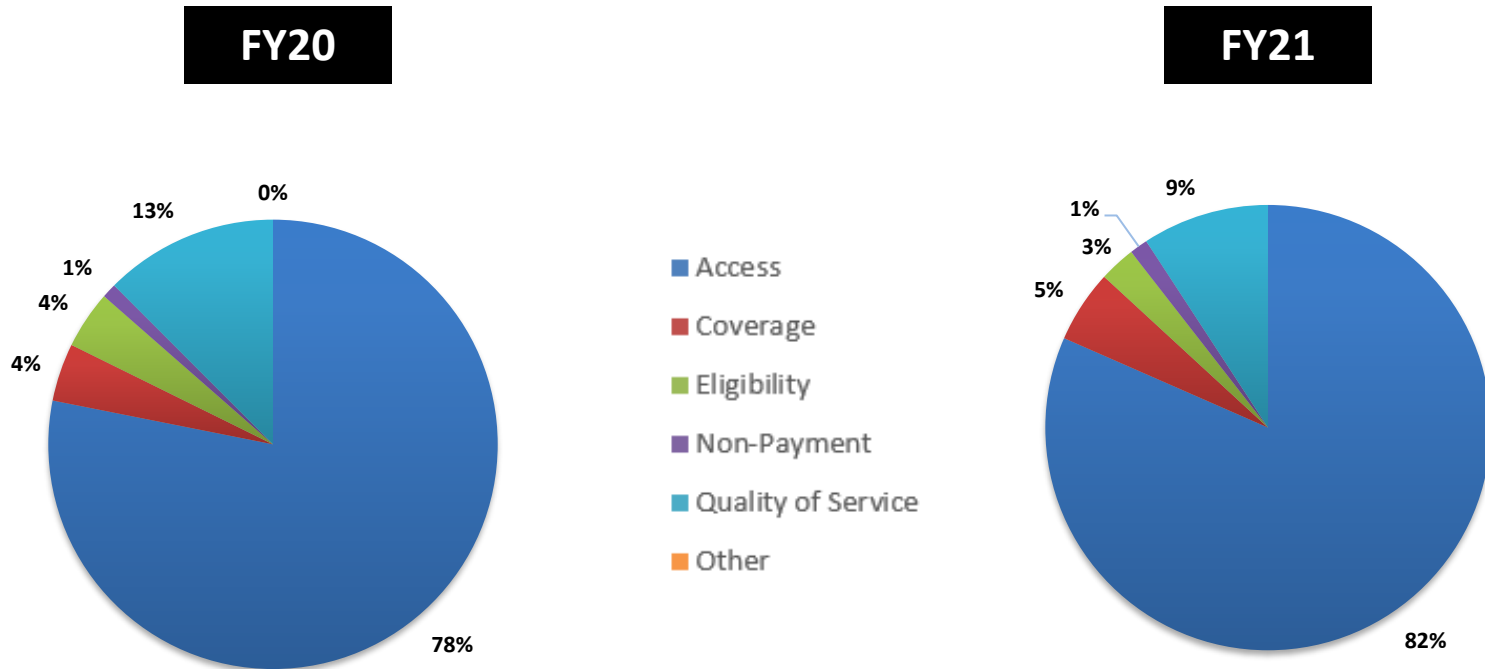
Source data captured between October 1, 2019 through September 30, 2020 and October 1, 2020 through September 30, 2021

**Table 17. Breakdown of Transportation Contacts by Insurance Type
FY20 and FY21**

Transportation Contacts by Insurance Type	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Alliance (includes Alliance/ADAP and Undocumented Alien Child Beneficiaries)	1	1%	0	0%
Commercial Health Plan (includes Appeals/Grievances-Bill of Rights cases)	0	0%	0	0%
Dual Eligible (Medicaid/Medicare) (includes OMB Plus/QMB Plus-AFDC-TANF/QMB Plus-BCCEDTP/QMB Plus-EPD Waiver/QMB Plus-IDD Waiver/QMB Plus-Long-Term Care/QMB Plus-Money Follow the Person Beneficiaries)	33	34%	26	34%
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)	40	42%	12	16%
Medicaid Managed Care (MCO) (includes AFDC-TANF/Childless Adult/Childless Adult-MAGI /CHIP/Katie Beckett/TANF/ Special Needs Beneficiaries)	7	8%	31	41%
Medicare (includes Part A; Part B; Part A/B; Part A/B (QMB) and SLMB Beneficiaries)	14	14%	7	9%
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	1	1%	0	0%
Total Contacts by Insurance Type	96	100%	76	100%

Source data captured between October 1, 2019 through September 30, 2020 and October 1, 2020 through September 30, 2021

Figure 18. Breakdown of Types of Issues Encountered by Transportation Contacts FY20 and FY21



FY20 Total Sample = 96 Contacts

FY21 Total Sample = 76 Contacts

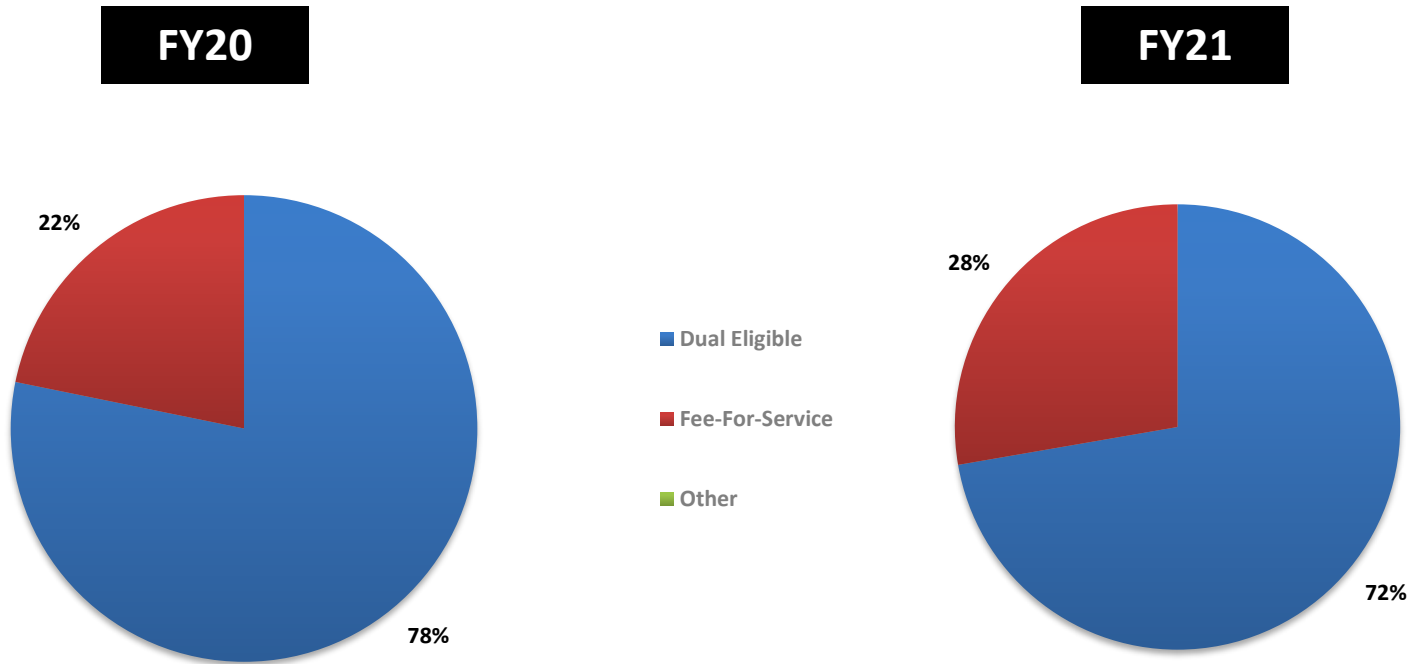
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**Table 18. Breakdown of Types of Issues Encountered by
Transportation Contacts
FY20 and FY21**

Types of Issues Encountered by Transportation Contacts	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Access (includes prior authorization requests)	75	78%	62	82%
Coverage (includes denials of service)	4	4%	4	5%
Eligibility/Recertification (status of eligibility/verification of coverage)	4	4%	2	3%
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)	12	13%	7	9%
Total Types of Issues-Transportation Contacts	96	100%	76	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 FY20 and FY21



FY20 Total Sample = 821 Contacts

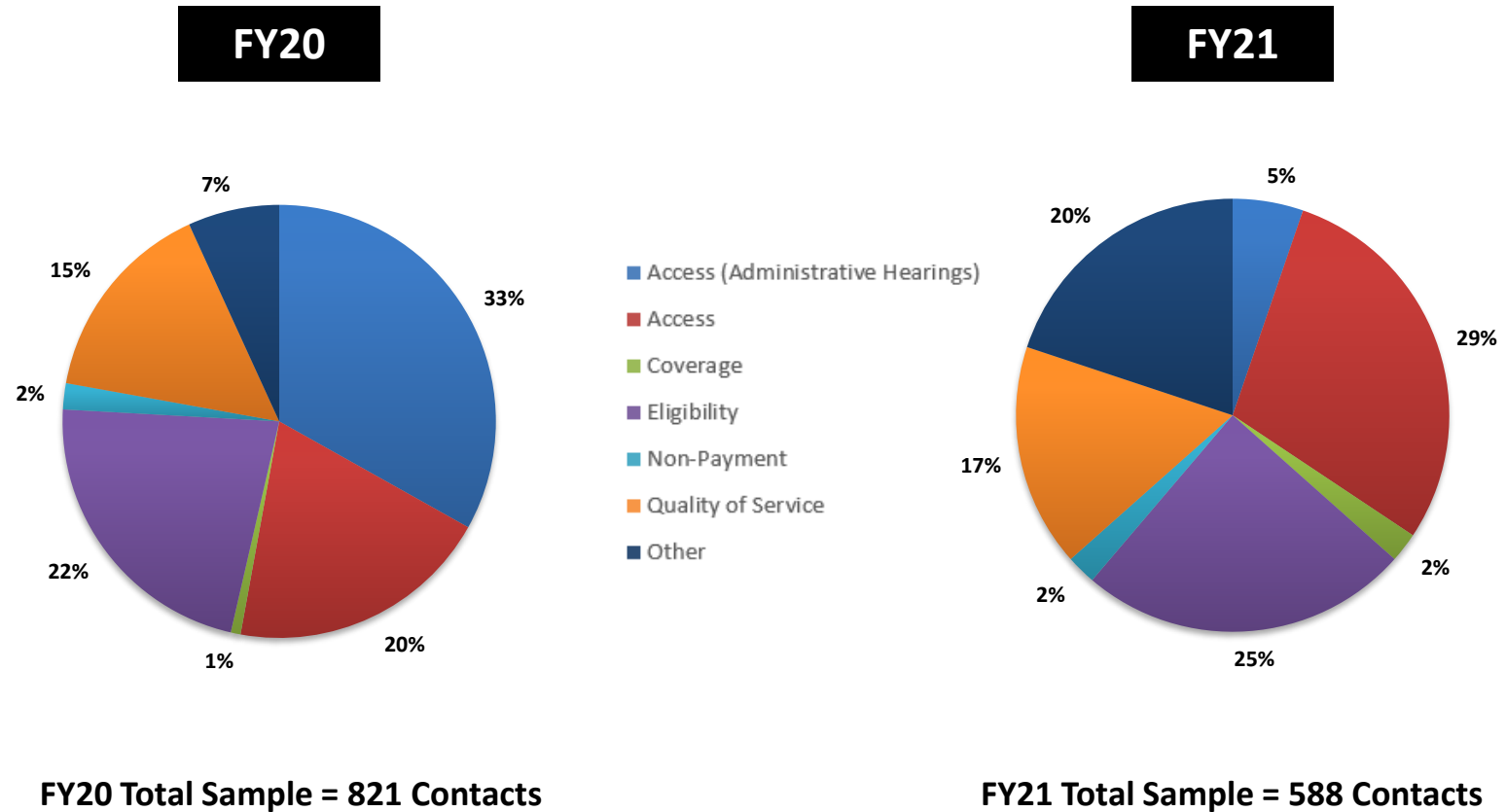
FY21 Total Sample = 588 Contacts

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

**Table 19. Breakdown of EPD Waiver Contacts by Insurance Type
FY20 and FY21**

EPD Waiver Contacts by Insurance Type	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Dual Eligible (Medicare/Medicaid) – (includes Dual Eligible-EPD Waiver)	642	78%	425	72%
Fee-For-Service (Medicaid) – (includes FFS/FFS-EPD Waiver)	179	22%	163	28%
Other (Undetermined/Uninsured/Limited/Restricted Coverage)	0	0%	0	0%
Total EPD Waiver Contacts by Insurance Type	821	100%	588	100%

Figure 20. Breakdown of Types of Issues Encountered by EPD Waiver Contacts FY20 and FY21



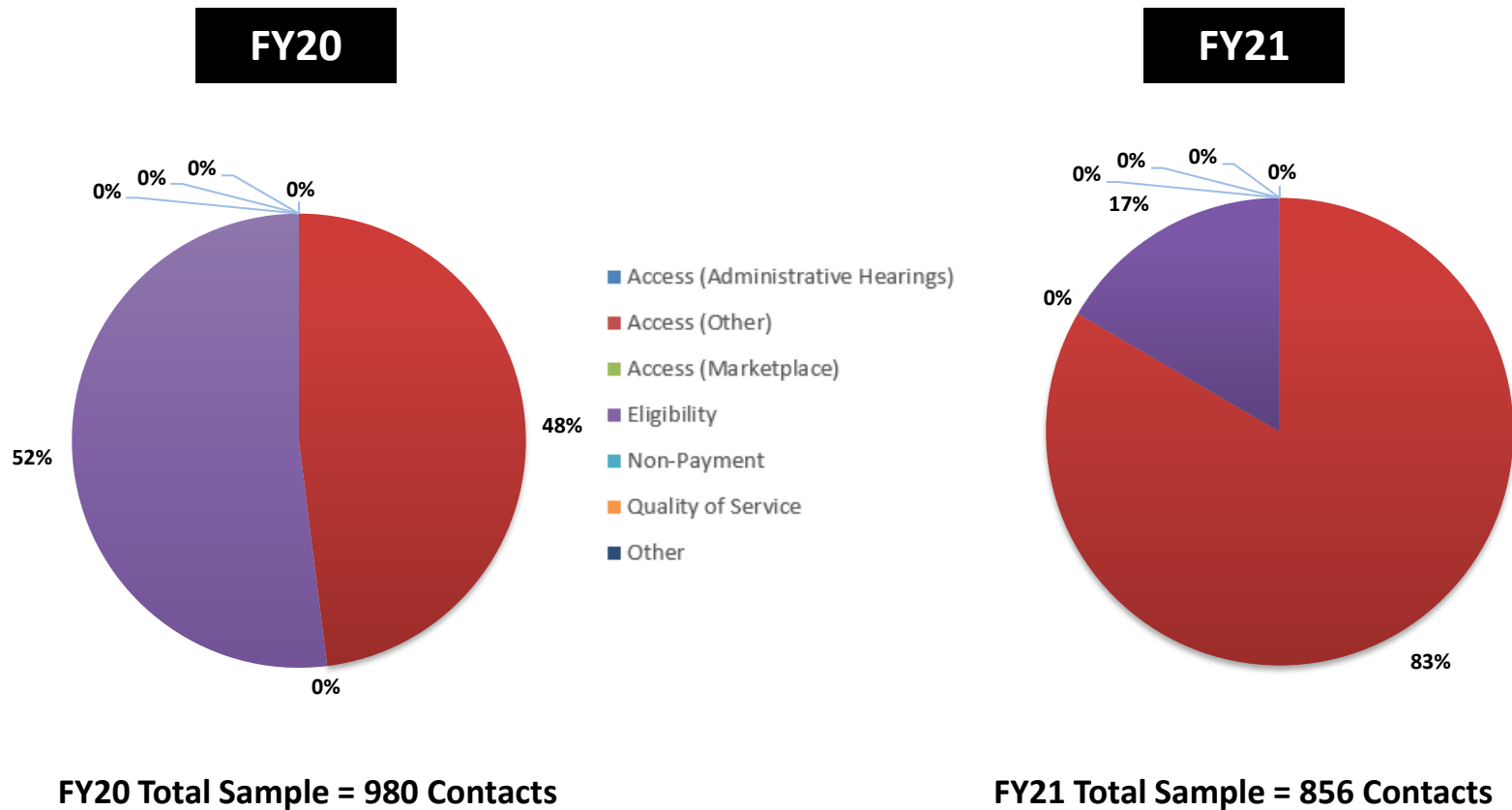
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**Table 20. Breakdown of Types of Issues Encountered by
EPD Waiver Contacts
FY20 and FY21**

Types of Issues Encountered by EPD Waiver Contacts	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Access (Administrative Hearings)	272	33%	31	5%
Access (includes Access to services to include Prior Authorization requests)	162	20%	173	29%
Coverage (denials of services)	6	1%	13	2%
Eligibility/Recertification (status of eligibility/verification of coverage)	183	22%	144	25%
Non-Payment/Reimbursement (Out-of-Pocket Expenses) Challenges	16	2%	13	2%
*Other Issues	126	15%	116	20%
Quality of Service (services rendered by Providers)	56	7%	98	17%
Total Types of Issues-EPD Waiver Contacts	821	100%	588	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 FY20 and FY21



**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.*

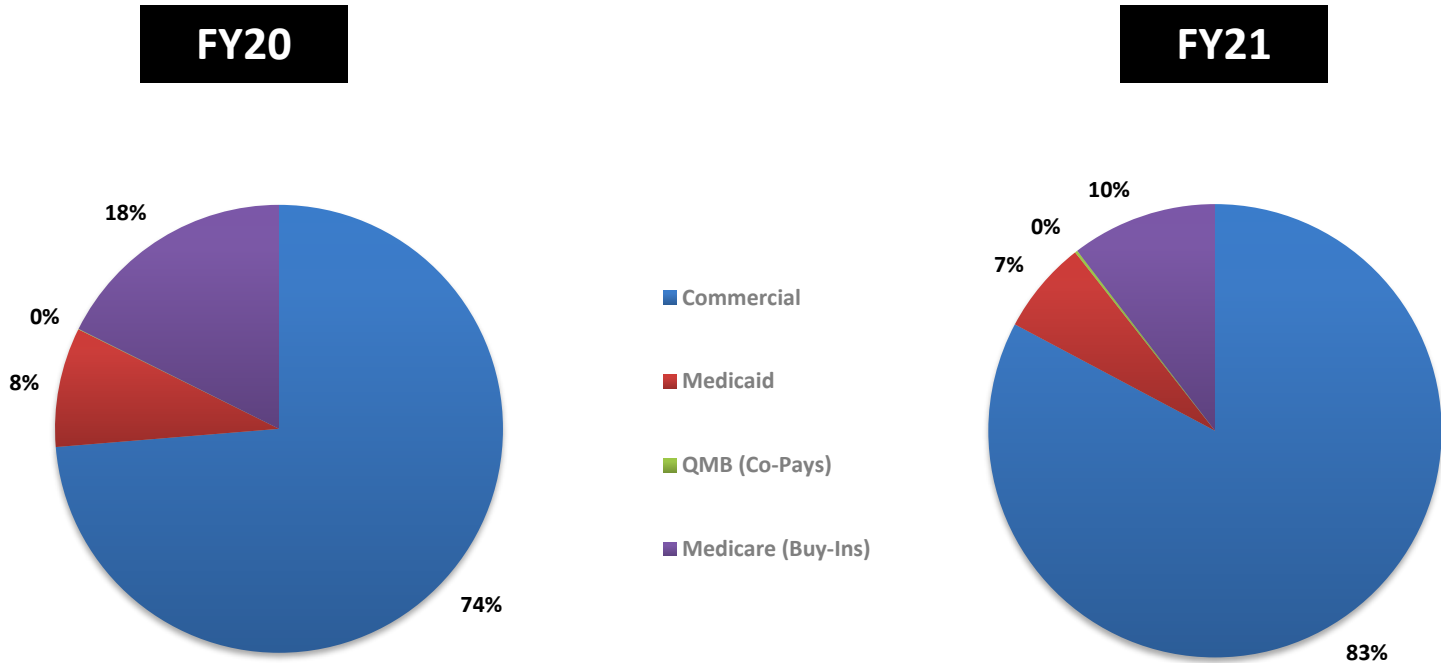
Table 21. Breakdown of Types of Issues Encountered by DC Health Link and Health Care Exchange Marketplace Contacts FY20 and FY21

Types of Issues Encountered by DC Health Link and Health Care Exchange Marketplace Contacts	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Access (Administrative Hearings)	1	<1%	0	0%
Access (includes applications for insurance coverage/applications for retroactive Medicaid/recertification application and DC Health Link Services)	470	<48%	715	83%
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)	509	<52%	143	17%
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	980	100%	858	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, 2019 through September 30, 2020 and October 1, 2020 through September 30, 2021

**Figure 22. Dollar Amount of Savings on Behalf of (Non-Commercial) and (Commercial-Appeals/Grievances-Bill of Rights) Contacts
FY20 and FY21**



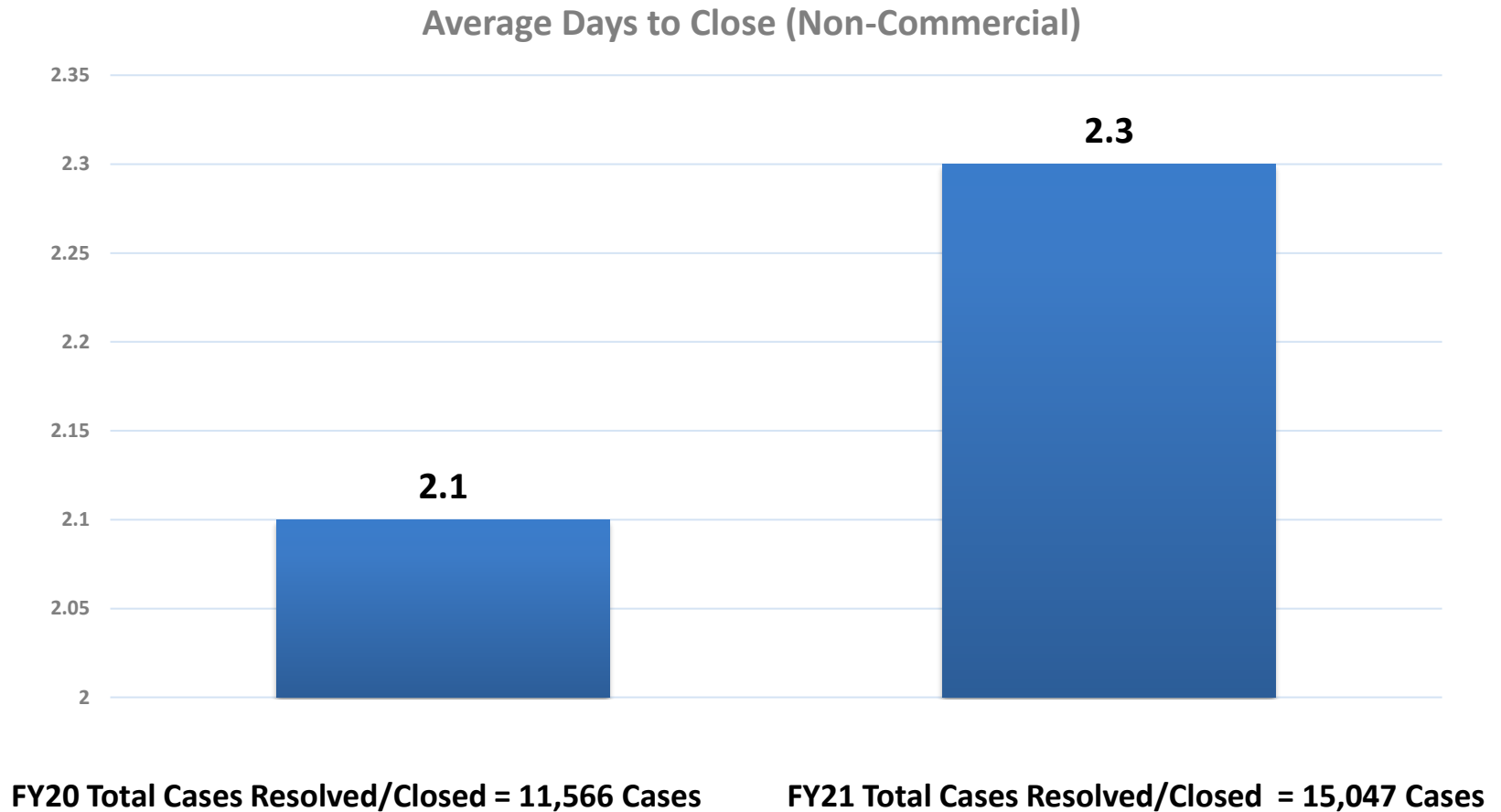
FY20 Total Sample = 661 Contacts

FY21 Total Sample = 511 Contacts

Table 22. Dollar Amount of Savings on Behalf of (Non-Commercial); and (Commercial-Appeals/Grievances-Bill of Rights) Contacts FY20 and FY21

Dollar Amount of Savings on Behalf of (Non-Commercial); (Commercial-Appeals/Grievances-Bill-Rights) Contacts	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Commercial (to include Appeals/Grievances-Bill of Rights)	\$1,808,692.82	74%	2,862,972.96	83%
Medicaid (to include Fee-For-Service/MCO/Alliance Beneficiaries) – (Non-payments of beneficiaries’ medical bills)	\$211,683.79	>8%	\$229,655.01	>7%
Qualified Medicare Beneficiaries (QMB) - (Co-Pays)	\$861.97	<1%	\$6,486.72	<1%
Medicare (to Include Part B/Dual Eligible) – (Reimbursements for non-payments of beneficiaries’ Part B Premiums)	\$432,780.80	18%	\$359,567.40	10%
Total Dollar Amount of Savings on Behalf of All Consumers	\$2,454,019.38	100%	\$3,458,567.09	100%

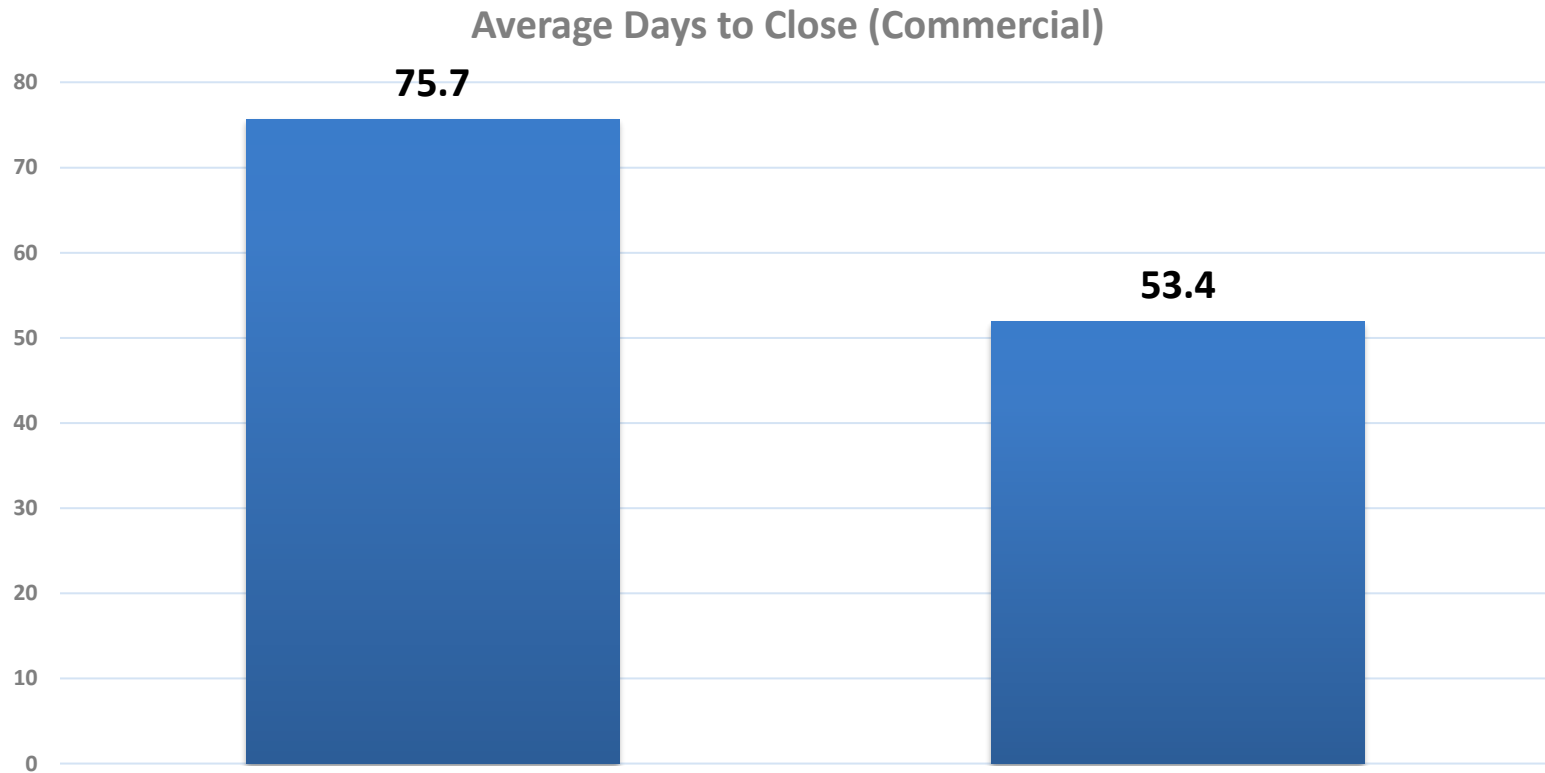
**Figure 23. Average Number of Days to Resolve/Close
(Non-Commercial) Cases
FY20 and FY21**



**Table 23. Average Number of Days to Resolve/Close
(Non-Commercial) Cases
FY20 and FY21**

FY20 Average Number of Days to Resolve/Close (Non-Commercial) Cases	FY20 Total	FY21 Average Number of Days to Resolve/Close (Non-Commercial) Cases	FY21 Total
Average Number of Days It Took to Resolve/Close (11,566) (Non-Commercial) cases	2.1 days	Average Number of Days It Took to Resolve/Close (15,047) (Non-Commercial) cases	2.3 days
Note: Of the (11,616) (Non-Commercial) cases opened, the OHCOBR resolved/closed (9,372) cases on same day that cases were opened		Note: Of the (15,087) (Non-Commercial) cases opened, the OHCOBR resolved/closed (12,406) cases on same day that cases were opened	

**Figure 24. Average Number of Days to Resolve/Close
(Commercial-Appeals/Grievances-Bill of Rights) Cases
FY20 and FY21**



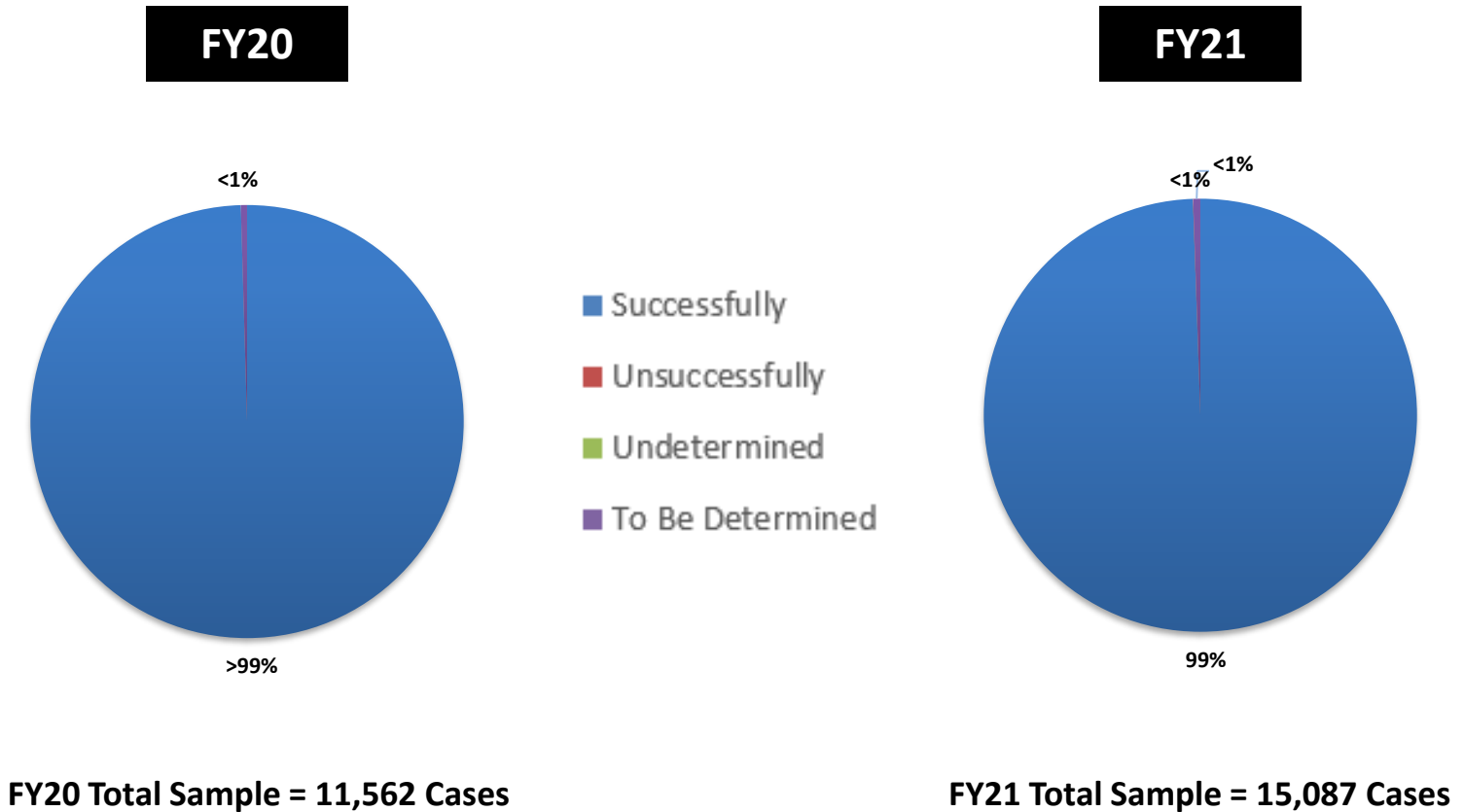
FY20 Total Cases Resolved/Closed = 288 Cases

FY21 Total Cases Resolved/Closed = 287 Cases

**Table 24. Average Number of Days to Resolve/Close
(Commercial-Appeals/Grievances-Bill of Rights) Cases
FY20 and FY21**

FY20 Average Number of Days to Resolve/Close (Commercial-Appeals/Grievances- Bill of Rights) Cases	FY20 Total	FY21 Average Number of Days to Resolve/Close (Commercial-Appeals/Grievances- Bill of Rights) Cases	FY21 Total
Average Number of Days It Took to Resolve/Close (288) Commercial- Appeals/Grievances-Bill of Rights) Cases	75.7 days	Average Number of Days It Took to Resolve/Close (287) Commercial- Appeals/Grievances-Bill of Rights) Cases	53.4 days
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		Note: Of the (307) (Commercial- Appeals/Grievances-Bill of Rights) cases opened, the OHCOBR resolved/closed (5) cases on same day that cases were opened	

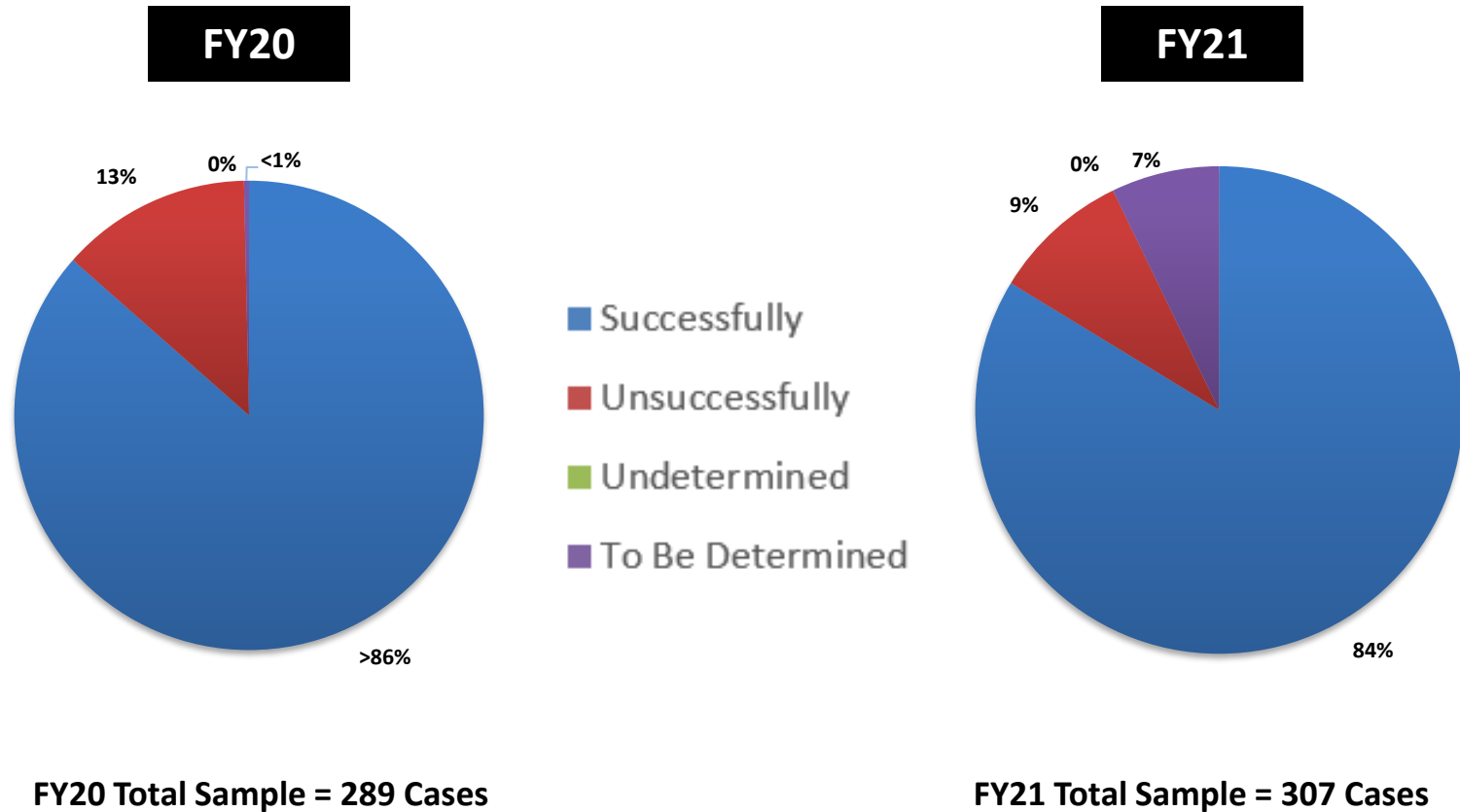
Figure 25. Breakdown of Number and Percentage of How (Non-Commercial) Cases Were Resolved/Closed and Cases Not Resolved/Closed by the OHCOBR FY20 and FY21



**Table 25. Breakdown of Number and Percentage of How
(Non-Commercial) Cases Were Resolved/Closed and
Cases Not Resolved/Closed by the OHCOBR
FY20 and FY21**

How (Non-Commercial) Cases were Resolved/Closed and Cases Not Resolved/ Closed	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Closure of Cases - Successfully	11,566	>99%	15,045	99%
Closure of Cases -Unsuccessfully	0	0%	2	<1%
Closure of Cases (Referred) -Undetermined	0	0%	0	0%
Opened Cases (Pending) - To Be Determined	50	<1%	40	<1%
Total Number and Percentage of (Non- Commercial) Cases	11,616	100%	15,087	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 OHCOCR FY20 and FY21



**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
FY20 and FY21**

How (Commercial-Appeals/Grievances-Bill of Rights) Cases were Resolved/Closed and Cases Not Resolved/Closed	FY20 Totals	FY20 Percent (%)	FY21 Totals	FY21 Percent (%)
Closure of Cases - Successfully	250	>86%	257	84%
Closure of Cases - Unsuccessfully	38	13%	30	9%
Closure of Cases (Referred) - Undetermined	0	0%	0	0%
Opened Cases (Pending) - To Be Determined	1	<1%	20	7%
Total Number and Percentage of (Commercial-Appeals/Grievances-Bill of Rights) Cases	289	100%	307	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