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**TO:** Iowa Department of Human Services  
**CC:** Centers for Medicare and Medicaid Services  
**FROM:** Cynthia Pederson, State Long-Term Care Ombudsman  
**SUBJECT:** Managed Care Ombudsman Program Monthly Report for November 2019  
**DATE:** Friday, January 10, 2020

The Office of the State Long-Term Care Ombudsman reports data from the Managed Care Ombudsman Program on a monthly basis. Attached is the November 2019 Report.

As was explained in the Year 4, Quarter 2 Quarterly Report a federally mandated change in the reporting system for the long-term care ombudsman program caused issues with the data collection and subsequent reporting for the Managed Care Ombudsman Program. That is why the report for November 2019 has not been able to be issued until now.

The Managed Care Ombudsman Program serves as the independent advocate for Medicaid managed care members receiving care in a health care facility as well as members enrolled in one of the seven home and community-based services (HCBS) waivers.

**Cases and Complaints:**

During the month of November 2019, the Managed Care Ombudsman Program received 21 new complaints from the managed care members we serve. The complaints resulted in new investigations and advocacy for 9 managed care members during the month of November. The top three complaints addressed in November 2019 were:

1. Access to Services/Benefits
2. Case Management
3. Services reduced, denied or terminated

**Medicaid Programs:**

Most of the complaints received from the managed care members were related to the Health and Disability Waiver, Intellectual Disability Waiver and Elderly Waiver.

Additional information can be found in the attached November 2019 Report. For further information, please contact the Managed Care Ombudsman Program, by phone at 866-236-1430 or email [managedcareombudsman@iowa.gov](mailto:managedcareombudsman@iowa.gov).

## Managed Care Ombudsman Program Monthly Report

DATE: 11/2019 \_\_\_\_\_

<b>Members per MCO<sup>1</sup></b> in process November 2019	Amerigroup Iowa	34
	Iowa Total Care	18
	UnitedHealthcare Plan of the River Valley	1
	Fee for Service	1
<b>Referrals per Entity<sup>2</sup></b>	Department of Human Services	1
	Department of Inspections and Appeals	-
	Disability Rights Iowa	2
	Iowa Compass	-
	Iowa Legal Aid	-
	LifeLong Links	-
	MCO	1
	Medicaid Fraud Control Unit	-
	Provider	1
	Senior Health Insurance Information Program	-
	State Ombudsman Office	1
Other	-	
<b>Grievances/Appeals/Fair Hearings</b>	Grievance assistance	3
	Appeals assistance	1
	Fair Hearing assistance	1

### Complaints by Member

In November the Managed Care Ombudsman Program worked on complaints from 55 individual members. Out of the 38 active cases, 7 are newly opened. One case will not be captured in the following grids due to eligibility not determined at that time. The top complaint from managed care members in November was in regard to Access to Services/Benefits (29 members). Additional complaints include:

#### All open cases:

- Case Management (16 members)
- Access to Services/Benefits (20 members)
- Services reduced, denied or terminated (14 members)
- CCO & CDAC (11 members)
- Transition services/coverage gap, inadequate or inaccessible (8 members)
- Member Rights (10 members)
- Level of Care (8 members)
- NOD, Appeals, Fair Hearing (5 members)
- Complaints against provider (3 members)
- Eligibility & Enrollment (6 members)
- Care Planning (15 members)
- Access to durable medical equipment and medications (8 members)
- Discharge (4 members)
- Transportation (4 members)
- Home and vehicle modifications (1 member)
- Member Relations & Grievances (7 members)
- Guardianship (0 members)
- Network adequacy (4 members)
- Prior Authorization (3 members)
- Exception to Policy (1 member)

#### Closed cases:

- Case Management (6 members)
- Access to Services/Benefits (9 members)
- Services reduced, denied or terminated (1 member)
- CCO & CDAC (1 member)
- Transition services/coverage gap, inadequate or inaccessible (1 member)
- Member Rights (3 members)
- Level of Care (4 members)
- NOD, Appeals, Fair Hearing (0 members)
- Complaints against provider (0 members)
- Eligibility & Enrollment (4 members)
- Care Planning (4 members)
- Access to durable medical equipment and medications (4 members)
- Discharge (0 members)
- Transportation (4 members)
- Home and vehicle modifications (0 members)
- Member Relations & Grievances (1 members)
- Guardianship (1 member)
- Network adequacy (1 member)
- Prior Authorization (1 member)
- Exception to Policy (1 member)

<sup>1</sup> Members per MCO: Due to the transition some of the managed care members are duplicated.

<sup>2</sup> Referrals per Entity: Referrals made to external organizations that provide services beyond the scope of the program. *Managed Care Ombudsman Monthly Report | Page 1 of 3*

## Complaint(s) Resolution by Program Type

Amerigroup Iowa	Fully or partially resolved to Member's satisfaction	Not resolved to Member's satisfaction	No action needed or appropriate	Open	Total
AIDS/HIV Waiver		-			
Brain Injury Waiver		-			
Children's Mental Health Waiver		-	-		
Dental			-		
Duals					
Elderly Waiver	16	1	4	2	23
Habilitation		-	-		
Health & Disability Waiver		-	-	4	4
HIPP		-	-		
Institutional Care					
Iowa Health & Wellness		-	-		
Intellectual Disability Waiver	3	-	-	5	8
Medicare		-	-		
PACE					
Physical Disability Waiver		-	-		
QMB or SLMB					
Traditional Medicaid		-	-		
Other	1			1	2
N/A					
Unknown					
<b>TOTAL:</b>	20	1	4	12	37

UnitedHealthcare Plan of the River Valley	Fully or partially resolved to Member's satisfaction	Not resolved to Member's satisfaction	No action needed or appropriate	Open	Total
AIDS/HIV Waiver		-		-	
Brain Injury Waiver		-	-	-	
Children's Mental Health Waiver		-	-	-	
Dental				-	
Duals		-	-	-	
Elderly Waiver		-	-	-	
Habilitation		-	-	-	
Health & Disability Waiver		-	-	-	
HIPP		-	-	-	
Institutional Care					
Iowa Health & Wellness		-		-	
Intellectual Disability Waiver				-	
Medicare		-	-	-	
PACE				-	
Physical Disability Waiver		-	-	-	
QMB or SLMB				-	
Traditional Medicaid			-		
Other		-		-	
N/A			-	-	
Unknown				-	
<b>TOTAL:</b>	0	0	0	0	1

## Complaint(s) Resolution by Program Type

Fee for Service	Fully or partially resolved to Member's satisfaction	Not resolved to Member's satisfaction	No action needed or appropriate	Open	Total
AIDS/HIV Waiver		-	-	-	
Brain Injury Waiver		-	-	-	
Children's Mental Health Waiver		-	-	-	
Dental					
Duals		-	-		
Elderly Waiver		-	-		
Habilitation		-	-		
Health & Disability Waiver		-	-		
HIPP		-	-	-	
Institutional Care				-	
Iowa Health & Wellness		-	-		
Intellectual Disability Waiver		-	-	3	
Medicare		-	-	-	
PACE				-	
Physical Disability Waiver		-	-		
QMB or SLMB				-	
Traditional Medicaid		-	-	-	
Other					
N/A				-	
Unknown			-	-	
<b>TOTAL:</b>	0	0	0	3	3

Iowa Total Care	Fully or partially resolved to Member's satisfaction	Not resolved to Member's satisfaction	No action needed or appropriate	Open	Total
AIDS/HIV Waiver		-	-		
Brain Injury Waiver	4	-	-		4
Children's Mental Health Waiver		-	-		
Dental					
Duals		-	-		
Elderly Waiver	3	-	-		3
Habilitation	2	-	-		2
Health & Disability Waiver		-	-	1	1
HIPP		-	-		
Institutional Care					
Iowa Health & Wellness	1	-	-	1	2
Intellectual Disability Waiver		-	-	3	3
Medicare		-	-		
PACE					
Physical Disability Waiver		-	-		
QMB or SLMB					
Traditional Medicaid		-	-		
Other	9				9
N/A					
Unknown			-		
<b>TOTAL:</b>	19	0	0	5	24