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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 February 2019
DATE: Friday, March 29, 2019

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

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.

Beginning with the Managed Care Ombudsman Program report for January 2019, the report is reformatted and contains only information on complaints and cases for which the Managed Care Ombudsman Program undertook advocacy efforts for the LTSS managed care population the program serves.

The report now contains information on LTSS Medicaid member complaints received by the office versus contacts to the office. In order to accurately reflect member issues, the Managed Care Ombudsman Program report captures member issues by waiver program and managed care organization as well as the resolution of those complaints.

Cases and Complaints:

During the month of February 2019, the Managed Care Ombudsman Program received 29 complaints from the managed care members we serve. Out of the 11 open cases 1 case will not be captured in the following grids due to eligibility not determined at that time. The complaints resulted in investigation and advocacy for 11 managed care members. The top three complaints addressed in February 2019 were:

1. Access to Services/Benefits
2. Services reduced, denied or terminated
3. Transition services/coverage gap, inadequate or inaccessible

Medicaid Programs:

Most of the complaints received from the managed care members in February 2019 were related to the Elderly Waiver, the Intellectual Disability Waiver, and the Health & Disability/Physical Disability Waiver.

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

Managed Care Ombudsman Program Monthly Report

DATE: 02/2019

Members per MCO¹ in process February 2019	Amerigroup Iowa	6
	AmeriHealth Caritas	-
	UnitedHealthcare Plan of the River Valley	17
	Fee for Service	1
Referrals per Entity²	Department of Human Services	2
	Department of Inspections and Appeals	-
	Disability Rights Iowa	4
	Iowa Compass	-
	Iowa Legal Aid	1
	LifeLong Links	-
	MCO	-
	Medicaid Fraud Control Unit	-
	Provider	1
	Senior Health Insurance Information Program	-
	State Ombudsman Office	1
Other	1	
Grievances/Appeals/Fair Hearings	Grievance assistance	1
	Appeals assistance	4
	Fair Hearing assistance	1

Complaints by Member

The managed Care Ombudsman Program worked on complaints from 25 individual members. Out of the 11 open cases 1 case will not be captured in the following grids due to eligibility not determined at that time. The top complaint was in regard to access to services and benefits (6 members). Additional complaints include:

Open Cases:

Care Planning (2 members)
 Services reduced, denied or terminated (4 members)
 Member Rights (1 member)
 CCO & CDAC (3 members)
 Member Relations & Grievances (1 member)
 Case Management (1 member)
 Level of Care (2 members)
 Access to durable medical equipment (0 members)
 Access to Services/Benefits (4 members)
 Transportation (0 members)
 Guardianship (1 member)
 Discharge (3 members)
 Eligibility & Enrollment (2 members)
 NOD, Appeals, Fair Hearing (0 members)
 Transition services/coverage gap, inadequate or inaccessible (4 members)

Closed Cases:

Care Planning (1 member)
 Services reduced, denied or terminated (1 member)
 Member Rights (1 member)
 CCO & CDAC (1 member)
 Member Relations & Grievances (1 member)
 Case Management (1 member)
 Level of Care (0 members)

¹Contacts per MCO: Contacts received regarding the respective MCO.

²Referrals per Entity: Referrals made to external organizations that provide services beyond the scope of the program.

Complaints by Member

Access to durable medical equipment (3 members)

Access to Services/Benefits (2 members)

Transportation (0 members)

Guardianship (0 members)

Discharge (0 members)

Eligibility & Enrollment (0 members)

NOD, Appeals, Fair Hearing (1 member)

Transition services/coverage gap, inadequate or inaccessible (1 member)

Amerigroup Iowa Complaint(s) Resolution by Program Type	Resolved to Member's satisfaction	Partially resolved to Member's satisfaction	Not resolved to Member's satisfaction	No action needed or appropriate	Open	Total
AIDS/HIV Waiver		-	-		-	0
Brain Injury Waiver		-	-	-	-	0
Children's Mental Health Waiver		-	-	-	-	0
Dental		-	-	-	-	0
Duals		-			-	0
Elderly Waiver		2	-	-	5	7
Habilitation		-	-	-	-	0
Health & Disability Waiver		-	1	-	-	1
HIPP		-	-	-	-	0
Institutional Care					-	0
Iowa Health & Wellness		-	-	-	-	0
Intellectual Disability Waiver		-	-	-	4	4
Medicare		-	-	-	-	0
PACE					-	0
Physical Disability Waiver		-	-	-	-	0
QMB or SLMB					-	0
Traditional Medicaid		-	-	-	-	0
Other					-	0
N/A					-	0
Unknown					-	0
TOTAL:		2	1	0	9	12

UnitedHealthcare Plan of the River Valley Complaint(s) Resolution by Program Type	Resolved to Member's satisfaction	Partially resolved to Member's satisfaction	Not resolved to Member's satisfaction	No action needed or appropriate	Open	Total
AIDS/HIV Waiver	-	-	-	-	-	0
Brain Injury Waiver	1	-	-	-	-	1
Children's Mental Health Waiver	-	-	-	-	-	0
Dental	-	-			-	0
Duals	-	-	-	-	3	3
Elderly Waiver	2	-	-	1	4	7
Habilitation	-	-	-	-	-	0
Health & Disability Waiver	1	-	-	-	1	2
HIPP	-	-	-	-	-	0
Institutional Care	1					1
Iowa Health & Wellness	-	-	-		-	0
Intellectual Disability Waiver	4	-	-	-	1	5
Medicare	-	-	-	-	-	0
PACE	-				-	0
Physical Disability Waiver	3	-	-	-	3	6
QMB or SLMB	-				-	0
Traditional Medicaid	-	-	-	-	-	0
Other	-				4	4
N/A	-				-	0
Unknown	-				-	0
TOTAL:	12	0	0	1	16	29

Fee for Service Complaint(s) Resolution by Program Type	Resolved to Member's satisfaction	Partially resolved to Member's satisfaction	Not resolved to Member's satisfaction	No action needed or appropriate	Open	Total
AIDS/HIV Waiver	-	-	-	-	-	0
Brain Injury Waiver	-	-	-	-	-	0
Children's Mental Health Waiver	-	-	-	-	-	0
Dental	-	-	-	-	-	0
Duals	-	-	-	-	-	0
Elderly Waiver	-	-	-	-	-	0
Habilitation	-	-	-	-	-	0
Health & Disability Waiver	-	-	-	-	-	0
HIPP	-	-	-	-	-	0
Institutional Care	-	-	-	-	-	0
Iowa Health & Wellness	-	-	-	-	-	0
Intellectual Disability Waiver	-	-	-	-	-	0
Medicare	-	-	-	-	-	0
PACE	-	-	-	-	-	0
Physical Disability Waiver	-	-	-	-	-	0
QMB or SLMB	-	-	-	-	-	0
Traditional Medicaid	-	-	-	-	3	3
Other	-	-	-	-	-	0
N/A	-	-	-	-	-	0
Unknown	-	-	-	-	-	0
TOTAL:	0	0	0	0	3	3