



## KanCare Ombudsman Quarterly Report

**Kerrie J. Bacon, KanCare Ombudsman**  
**3<sup>rd</sup> Quarter, 2014**

### ***Accessibility***

The KanCare Ombudsman was available to members and potential members of KanCare (Medicaid) through the phone, email, letters and in person during the third quarter of 2014. There were 526 contacts through these various means, 256 of which were related to an MCO issue. Third quarter had an increase in contacts compared 2<sup>nd</sup> quarter and to last year.

3 <sup>rd</sup> Qtr Contacts		MCO related	
July	182	Amerigroup	77
August	174	Sunflower	134
September	170	United Health	45
<b>Total</b>	<b>526</b>	<b>Total</b>	<b>256</b>

Contacts	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Comments
2013	615	456	436	341	this year does not include emails
2014	545	474	526		

The KanCare Ombudsman website (<http://www.kancare.ks.gov/ombudsman.htm>) has information regarding the Ombudsman contact information, resources for and information about applying for KanCare, contact information for the three Managed Care Organizations, the grievance process, the appeal process and state fair hearing process, the three managed care company handbook links, and quarterly and annual reports by the Ombudsman. A new resource added to the website during the third quarter is a 4 page resource with medical, prescription, vision and dental assistance for those without insurance or with high spend downs ([http://www.kancare.ks.gov/download/Medical\\_Assistance.pdf](http://www.kancare.ks.gov/download/Medical_Assistance.pdf)).



**Outreach**

- Provided a vendor booth for the Conference on Poverty in Topeka, July 16-18, 2014
- Provided testimony to the Bob Bethell KanCare Oversight Committee regarding the Ombudsman second quarter activities, August 12, 2014.
- Coordinated a dozen trainings with disability, agency, and community partnering organizations as part of orientation for the ombudsman volunteer coordinator training; used this as an opportunity for outreach for the Ombudsman office.
- The Ombudsman’s office sponsors the KanCare (I/DD) Friends and Family Advisory Council which met once during third quarter.
- Hosted the HCBS Lunch-and-Learn bi-weekly conference calls for all HCBS members, parents, guardians and other consumers. Calls addressed topics of interest and emerging issues and included a guided question and answer time with a panel from the three Managed Care Organizations. One call during the third quarter was on the appeals and grievance process. MCO’s shared their information and the Ombudsman shared about the state fair hearing process.

**Data**

Contact Method	
phone	432
email	90
letter	2
in person	2
<b>Total</b>	<b>526</b>

Caller Type	
Provider	92
Consumer	412
MCO employee	1
Other	21
<b>Total</b>	<b>526</b>

Sub-Caller Type	
HCBS Related	107
Long Term Care	48
Other	371
<b>Total</b>	<b>526</b>

**Contact Information for 3<sup>rd</sup> Qtr**

Open	Contact date entered, but no response or closed	2
Responded	Contact date entered and first response, but not closed.	73
Closed	Closed dated is entered.	451
<b>Total</b>		<b>526</b>
% closed		86.0%

The average number of days to resolve an issue was 9 days. 246 files were resolved in one day or less.

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There are 20 issue categories. The top four concerns for 3<sup>rd</sup> quarter are Appeals/Grievances, HCBS General Issues, Medicaid eligibility issues, and Billing issues. Of the Appeals/Grievance issues, only one was a grievance, 3 were calls for Amerigroup, 31 were calls for Sunflower, 5 were calls for United, 7 were calls that were not identified to a company. Many callers were provided the detailed written information about the appeal and/or state fair hearing process and a discussion about how to prepare for a hearing.

Issue Category	total
Appeals / Grievances	46
HCBS General Issues	45
Medical Services	41
Billing	40
Durable Medical Equipment	25
Pharmacy	20
HCBS Waiting List	19
Care Coordinator Issues	18
Transportation	18
Nursing Facility Issues	16
HCBS Reduction in hours of service	15
Questions for Conference Calls/Sessions	15
Housing Issues	12
Change MCO	10
HCBS Eligibility issues	10
Dental	8
Access to Providers (usually Medical)	6
Guardianship	1
Medicaid Eligibility Issues	90
X-Other	103
Z Thank you.	10
Z Unspecified	33
Total	600

In comparing issue categories over the last three quarters, three have stayed consistently in the top six as issues: durable medical equipment, billing, and appeals/grievances. Note: The Issue Category number equals more than the total number of callers because we are able to choose more than one issue category. Members often have more than one issue when they call.

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Resource Category shows what resources were used in resolving an issue.

Resource Category	total
QUESTION/ISSUE RESOLVED	118
USED RESOURCES/ISSUE RESOLVED	177
KDHE RESOURCES	107
DCF RESOURCES	22
MCO RESOURCES	98
HCBS TEAM	57
CSP MH TEAM	2
OTHER KDADS RESOURCES	38
PROVIDED RESOURCES TO MEMBER	23
REFERRED TO STATE/COMMUNITY AGENCY	20
REFERRED TO DRC AND/OR KLS	27
CLOSED	55
<b>Total</b>	<b>744</b>

Waiver Related	total
PD	43
I/DD	42
FE	16
AUTISM	4
SED	5
TBI	19
TA	8
MFP	6
BEHAVIOR HEALTH	4
NURSING FACILITY	10
<b>Total</b>	<b>157</b>

Notes: 1. The Resource Category number equals more than the total number of callers because we are able to provide more than one Resource to members when they call.  
 2. Closed means the file was closed without being able to make further contact with member. The usual reasons are: messages are too garbled to get a phone number, a wrong phone number is left, or messages are not returned.

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