



KanCare Ombudsman Quarterly Report

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1st 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 first quarter of 2014. There were 545 contacts through these various means.

1st Qtr. Contacts	
January	153
February	195
March	197
Total	545

MCO related	
Amerigroup	67
Sunflower	96
United Health	51
Total	214

The KanCare Ombudsman website was completely revised to include educational resources for members and potential members seeking information.

<http://www.kancare.ks.gov/ombudsman.htm>

- KanCare Ombudsman's contact information at the top of the page
- The Role of the Ombudsman (revised based on the Center for Medicaid direction)
- Resource Information
 - KanCare Medicaid Contact Information (how to apply, didn't get an enrollment packet, didn't get an ID card)
 - MCO contact information
 - Frequently Asked Questions
 - Grievance/Complaint Process
 - MCO Appeal Process
 - State Fair Hearing/Appeal Process
 - Continuation of Services
 - MCO Member Resources on-line
- Reports
- Meet the KanCare Ombudsman

A link for the Ombudsman page was put on the KanCare Main page in the Consumer section to make it easier for people to locate.



Outreach

- The Ombudsman’s brochure was updated and is in the process of being printed at the state printer. The new brochures will be mailed in packages of 25 along with an introductory letter to Centers for Independent Living, Aging and Disability Resource Centers, Community and Developmental Disability Centers, Community Mental Health Centers, along with others as they are provided to the office.
- The Ombudsman attended the I/DD listening tour sessions across Kansas (March 18, Salina; March 19, Wichita; March 20, Pittsburg; March 21, Topeka).
- Attended and presented at the KanCare Advisory Council meeting, March 26 in Topeka.
- Attended and presented at the Consumer Specialized Issues (CSI) committee meeting, March 28, 2014 in Clay Center.
- The Ombudsman’s office sponsors the KanCare (I/DD) Friends and Family Advisory Council which met three times during first quarter and had several conference calls.
- Hosted Lunch-and-Learn weekly conference calls for the Intellectual/Developmental Disability (I/DD) parents, guardians and other consumers providing a guided question and answer time with a panel from the three Managed Care organizations and the I/DD team from Kansas Department on Aging and Disability Services (KDADS).

Future Outreach

- Ombudsman’s office is in the process of hiring a Volunteer Coordinator to create a volunteer program across Kansas to assist members with questions and issues.

Data

Current Data Info

Contact Method	
phone	342
email	194
letter	5
in person	1
on-line	1
other	1
Total	544

Caller Type	
Provider	135
Consumer	384
MCO employee	4
Other	22
Total	545

(Emails are not posted in the log individually they are filed by quarter and by MCO for reference.)



The issue categories have increased from twelve to twenty from the 4th quarter of 2013 to the 1st quarter of 2014 in order to decrease the number of issues in the “other” category and to better identify the concerns about which people are contacting the Ombudsman’s office. The top four concerns for 1st quarter are: Medicaid Eligibility, HCBS Eligibility, and Billing and Pharmacy.

Issues	
Medicaid Eligibility Issues	81
HCBS Eligibility issues	55
Billing	51
Pharmacy	38
Durable Medical Equipment	25
Appeals, Grievances	22
HCBS Reduction in hours of service	22
Access to Providers	16
Dental	16
Guardianship Issues	16
Medicaid Service Issues	14
Questions for Conf Calls/sessions	13
HCBS General Issues	11
Transportation	11
Care Coordinators	10
Nursing Facility Issues	8
Change MCO	6
HCBS Waiting List issues	3
Housing issues	3
Other	49
Unspecified	73
Thank you	2
Total	545



Future Data Info

Since the 4th quarter of 2014, the Ombudsman's office has changed its record-keeping process. The data log is undergoing a major overhaul, to be completed during second quarter, and now will be used to:

- date the incoming request, modifications and when the request is closed
- calculate time required for assistance
- increase the number of issues to track from 12 to 20
- add three caller types under Consumer (HCBS, long-term care and other)
- add tracking for waiver-related types of services: physical disability (PD), intellectual/developmental disability (I/DD), frail elderly (FE), autism, severe emotional disability (SED), traumatic brain injury (TBI), money follows the person (MFP), program of all-inclusive care for the elderly (PACE), mental health (MH), behavioral health (BH), nursing facility (NF)
- add: Resources/How resolved category:
 - Question/Issue resolved
 - Used Resource/Issue Resolved
 - KDHE resources
 - DCF resources
 - MCO resources
 - HCBS team
 - CSP MH team
 - Other KDADS resources
 - Referred to State/Community Agency
 - Referred to DRC and/or KLS