

**Oregon Health Authority Ombuds  
2022 Quarter One Report  
January 1 – March 31, 2022**

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EXTERNAL RELATIONS DIVISION  
Ombuds Program  
September 2022

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## Introduction

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Oregon Revised Statute (ORS) 414.712 directs the Oregon Health Authority (OHA) Ombuds Program to serve as the advocate for Oregon Health Plan (OHP - Medicaid and Children's Health Insurance Program) members for:

- Access to care;
- Quality of care; and
- Channeling member experience into recommendations for systems improvement.

The Ombuds Program, as established by legislation, is independent of Medicaid program implementation, operations or compliance. The program provides recommendations and oversight internally to OHA Medicaid programs and externally to Medicaid contractors.

Ombuds complaints and concerns data are based in the understanding that:

- Individuals come to the Ombuds Program because they realize others also experience their concerns and they have not been able to obtain adequate support elsewhere.
- OHA should at times act on concerns even without larger amounts of data, particularly for concerns impacting health equity.

In this and future OHA Ombuds reports, quarter one and three of each calendar year will focus on Ombuds data. Six month and annual reporting will include data and focus on emerging trends and concerns. Beginning in 2021, OHA's Health Systems Division began treating the year-end Ombuds report as a formal audit with responses and action plans. This [response](#) can be found on the Ombuds [web page](#). Health Systems Division will continue to treat year-end reports as formal audits. Six-month reports will include status updates of progress made by the Health Systems Division.

## Ombuds Program Data: Jan. 1 through March 31 2022

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[Appendix A](#) provides Ombuds data in table form. Below is a brief narrative description of these data.

### *All Ombuds concerns*

The Ombuds Program received a total of 564 concerns during the first quarter of 2022. In alignment with the Ombuds Program's legislative mandate to advocate for OHP members, 74 percent (417) of first quarter concerns were Medicaid-related.

Twenty-six percent (147) of concerns coming to the Ombuds Program were non-Medicaid related. For these, the Ombuds Program ensures a person-centered approach and serves as the right door to the right program. These areas include other OHA programs and other state and local government agencies. Often OHP/Medicaid members have social determinant of health concerns that CCOs can support through care coordination, Health Related Served, and interconnectivity with other state and local government services.

### *Medicaid concerns*

All Medicaid-related concerns fall into one of eight categories highlighted below. Because Access to Care concerns make up almost half of all Medicaid concerns, greater detail about these concerns is provided.

## **Narrative summary**

Includes overall percent and number of all Medicaid-related concerns received Jan. 1 – March 31, 2022

### ***Top Access to care concerns 45% (188)***

1. Eligibility 30% (55). When individuals have concerns about eligibility they often do not seek care, hence addressing eligibility concerns is a critical first step.
2. Provider not available to give necessary care 9.6% (18). This included because providers were closed to new patients, challenges scheduling, providers too far away and no timely access.
3. Unable to schedule appointment in a timely manner 9.0% (17). This included speciality care (neurologist and cardiologist), primary care providers, diagnostic studies, dental and mental health.
4. Verbal denial of service by provider 7% (13). Oregon Health Plan members have the right to appeal or request a hearing when they receive a written denial. Verbal denials do not have this right.

### ***Interaction with provider or plan 13% (55)***

These included lack of communication and coordination among providers (often resolved with the engagement of a care coordinator); provider or plan explanations inadequate or incomplete, and dismissal by provider or clinic.

### ***OHA Medicaid operations 12% (51)***

These concerns are about implementation and operation of Medicaid policies and programs. These included concerns related to the Traditional Health Worker (THW) Program and THW certifications including delayed program response, OHP/Medicaid policies, provider billing questions, requests for continuity of care and changing CCOs, queries about flex funds, OHA data, questions about the COVID-19 public health emergency and accessing 1915(i) in-home supports for individuals experiencing mental health disability.

### ***Client billing issues 8% (35)***

These included both in-state and out of state billing concerns. All Oregon providers must have a signed client agreement to pay from an OHP-enrolled member who is billed for provider services; concerns included lack of this agreement on file and request for copays within pharmacy settings.

### ***Quality of care 8% (33)***

These included problems with a prosthesis, lack of appropriate individualized treatment for dentures, and concerns about unsanitary office conditions.

### ***Consumer rights 6% (24)***

Almost half of these concerns related to dissatisfaction with treatment plan.

### ***Quality of services 4% (18)***

This included concerns related to quality of dentures and delays in obtaining dentures, gender-affirming care including facial feminization, and dental implants not covered.

### ***CCO operations 3% (12)***

These included questions about Community Advisory Councils, use of correct gender pronouns and OHP member lack of awareness of care coordination supports.

## Concerns by service type

Medicaid complaint categories and service types are independent of each other. An individual may have access to care complaints related to mental health or any other service type. Vice versa, a mental health service concern may be about any complaint category. This allows CCOs and the Ombuds Program to track the types of service that members bring concerns about. The OHP services most frequently involved in Ombuds Program concerns during the first quarter of 2022 were:

- 1) Non-emergency medical transportation (NEMT) 14.6% (61);
- 2) Dental care 7.9% (33);
- 3) Pharmacy 7.9% (33);
- 4) Speciality care 7.4% (31);
- 5) Primary care provider 6.7% (28)
- 6) Mental health 6% (25)

## Appendices

### Appendix A: Ombuds Program data (Jan. 1, 2022 – March 31, 2022)

#### All concerns received

	Q1	Q2	Q3	Q4	2022 YTD Total
<b>Total Ombuds concerns</b>	564				564

#### Medicaid vs. Non-Medicaid concerns

	Q1	Q2	Q3	Q4	2022 YTD Total and Percent
Medicaid	417				73.9% (417)
Non-Medicaid	147				26.1% (147)

#### Event

	Q1	Q2	Q3	Q4	2022 YTD Total and Percent
COVID	30				30
COVID Medicaid					60 % (18)
COVID Non-Medicaid					40% (12)

#### Medicaid concerns

##### Total work by complaint category

	Q1	Q2	Q3	Q4	2022 YTD Total and Percent
<b>Total Medicaid concerns</b>	417				417
Access	188				45.1% (188)

	Q1	Q2	Q3	Q4	2022 YTD Total and Percent
Interaction with provider or plan	55				13.2% (55)
Oregon Health Authority Medicaid operations	51				12.2% (51)
Client billing issues	35				8.4% (35)
Quality of care	33				5.3% (33)
Consumer rights	24				5.8% (24)
Quality of service	18				4.3% (18)
CCO operations	12				2.9% (12)

### ***Top access concerns***

	Q1	Q2	Q3	Q4	2022 YTD Total and Percent
<b>Top access concerns</b>	188				188
Eligibility issues	55				29.3% (55)
Provider not available to give necessary care	18				9.6% (17)
Unable to schedule appointment in a timely manner	17				9.0% (16)
Verbal denial of service by provider	13				6.9% (13)
Unable to be seen in a timely manner for urgent/emergent care	9				4.8% (9)
Plan unresponsive, not available, difficult to contact for appointment or information	7				3.7% (7)
Provider's office unresponsive, not available, difficult to contact for appointment or information	5				2.7% (5)
Verbal denial of service by plan	4				2.1% (4)
Referral or 2 <sup>nd</sup> opinion denied/refused by plan	4				2.1% (4)

### ***Total concerns by service type***

Medicaid complaint categories and service types are independent of each other. An individual may have access to care complaints related to Mental Health or any other service type. Vice versa, a mental health service concern may be about any complaint category.

	Q1	Q2	Q3	Q4	2022 YTD Total and Percent
<b>Total service type concerns</b>	417				
All other Medicaid (majority eligibility and OHP Operations concerns)	120				28.8% (120)
NEMT	61				14.6% (61)
Dental	33				7.9% (33)
Pharmacy	33				7.9% (33)
Specialty care	31				7.4% (31)
Primary care provider	28				6.7% (28)
Mental health	25				6.0% (25)
CCO/plan	22				5.3% (22)

	Q1	Q2	Q3	Q4	2022 YTD Total and Percent
Hospital	13				3.1% (13)
Residential rehabilitation	7				1.7% (7)
Durable medical equipment	6				1.4% (6)
Long term care	6				1.4% (6)
Pain management	6				1.4% (6)
Other	5				1.2% (5)
Emergency room	4				1.0% (4)
Alcohol and drug/substance use disorder	4				1.0% (4)
Outpatient	3				0.7% (3)
Diagnostic studies	3				0.7% (3)
Ambulance/medical transportation	2				0.5% (2)
Physical therapy	2				0.5% (2)
Occupational therapy	1				0.2% (1)
Chiropractic	1				0.2% (1)
Acupuncture	1				0.2% (1)
Vision	0				0% (0)

#### ***Demographics and populations served***

	Q1	Q2	Q3	Q4	2022 YTD Total and Percent
<b>Total Medicaid concerns</b>	417				
Dual eligible members	65				15.6% (65)
Limited English proficiency	13				3.1% (13)
Provider concerns	43				10.3% (43)
Tribal	3				0.7% (3)
Individuals with identified unstable housing	18				4.3% (18)
Age: Under 19	27				6.5% (27)
Age: Over 64	65				15.6% (65)

#### **Non-Medicaid concerns**

##### ***OHA concerns***

	Q1	Q2	Q3	Q4	2022 YTD Total and Percent
<b>Total OHA concerns (Non-Medicaid)</b>	54				54
Public Health Division concerns	23				42.6% (23)
Other OHA general concerns	9				16.7% (9)
Licensing: Public Health (hospital air, water food, pool, lodging, etc.)	8				14.8% (8)
Licensing: Other	6				11.1% (6)
Civil rights or ADA violation	3				5.6% (3)
Licensing: Behavioral Health (DUI, outpatient, etc.)	2				3.7% (2)

	Q1	Q2	Q3	Q4	2022 YTD Total and Percent
Oregon State Hospital concerns	2				3.7% (2)
OEI - interpreter and translation (non-member access)	1				1.9% (1)
Human resources	0				0.0% (0)
Public records request	0				0.0% (0)

***Other government agencies concerns***

	Q1	Q2	Q3	Q4	2022 YTD Total and Percent
<b>Total concerns</b>	93				93
Other (included housing and medical licensing board complaints)	37				39.8% (37)
Oregon Department of Human Services (ODHS)	24				25.8% (24)
Local government issue (includes social determinants of health concerns such as food, water quality, wildfire impacts, public space access for local parks all best suited to local governmental supports)	13				14.0% (13)
Medicare	11				11.8% (11)
Department of Consumer and Business Services (DCBS) (private insurance concerns)	8				8.6% (8)
Veterans' Affairs	0				0.0% (0)
HIPAA violation – Health and Human Services (HHS)	0				0.0% (0)