

Disenrollment for Cause Report

June 2015

Summary

The Disenrollment for Cause process is regulated by 907 KAR 17:010, Section 2 and 42 CFR438.56. Disenrollment requests information is based on members written requests and investigations conducted by staff in the Disease and Case Management Branch, Division of Program Quality and Outcomes. Investigation techniques include: interviewing the members/families who submit the requests, communicating with the health care providers, communicating with MCO (Managed Care Organization) representatives, conducting online research, as well as consulting with other medical professionals in DMS.

General Review Procedures

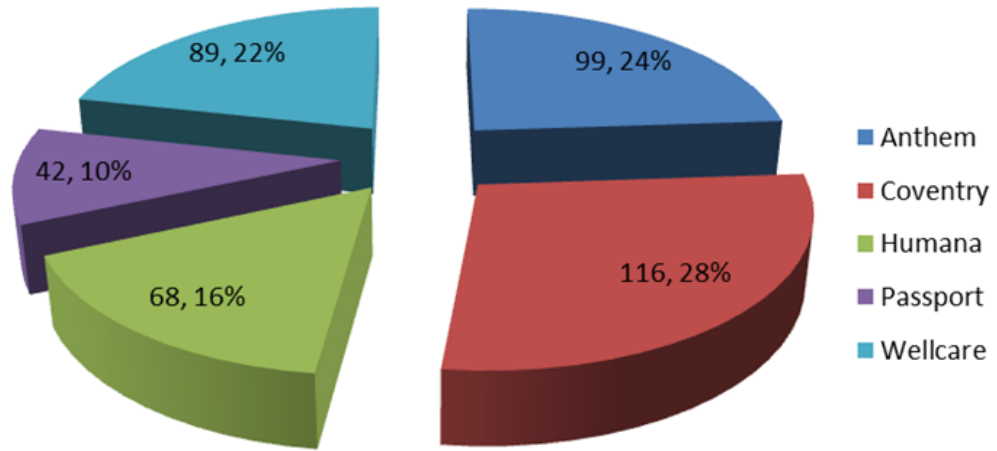
- All cases with valid signatures were investigated by DMS medical professionals.
- DMS medical professionals issued an initial inquiry email for each case to the member's current MCO as soon as the cases were assigned to them.
- MCOs were given appropriate timeframe to respond to DMS' inquiries.
- MCOs were given opportunities to resolve the problems before decisions for disenrollment requests were rendered.
- Physicians' offices were contacted to verify their participation in the MCO network(s).
- Members were contacted by DMS medical professionals for further information.
- All documentation was scanned and archived.
- All correspondence between DMS, providers, and members was documented and archived.
- An approval/denial letter was mailed to the member when a decision was made.
- Members with complicated medical needs were referred to members' MCO for case management services.

Statewide Data

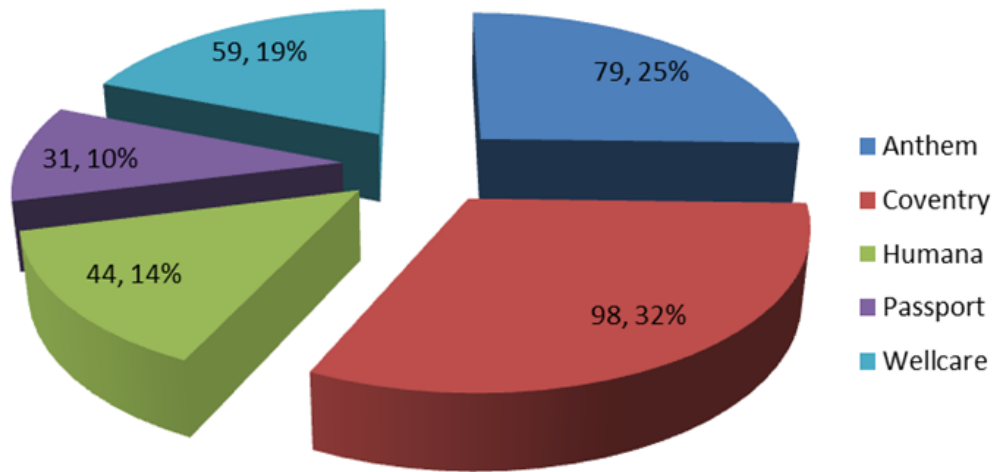
- Total Disenrollment for Cause requests received during the month of June 2015 was 414.
- Of the 414 requests received, 75.12% (311) were approved, 103 were denied.
- Each MCO had less than 1% of their total membership submit a Disenrollment for Cause request during the month of June 2015.
- Highest percentage – Anthem, approx. 0.1% of total membership requesting disenrollment.
- The requests to disenroll from the member's current MCO were as follows:

	Number of Requests From	Number of Approval	Percentage of Approval
Anthem	99	79	79.80%
Coventry	116	98	84.48%
Humana	68	44	64.71%
Passport	42	31	73.81%
Wellcare	89	59	66.29%
Total	414	311	75.12%

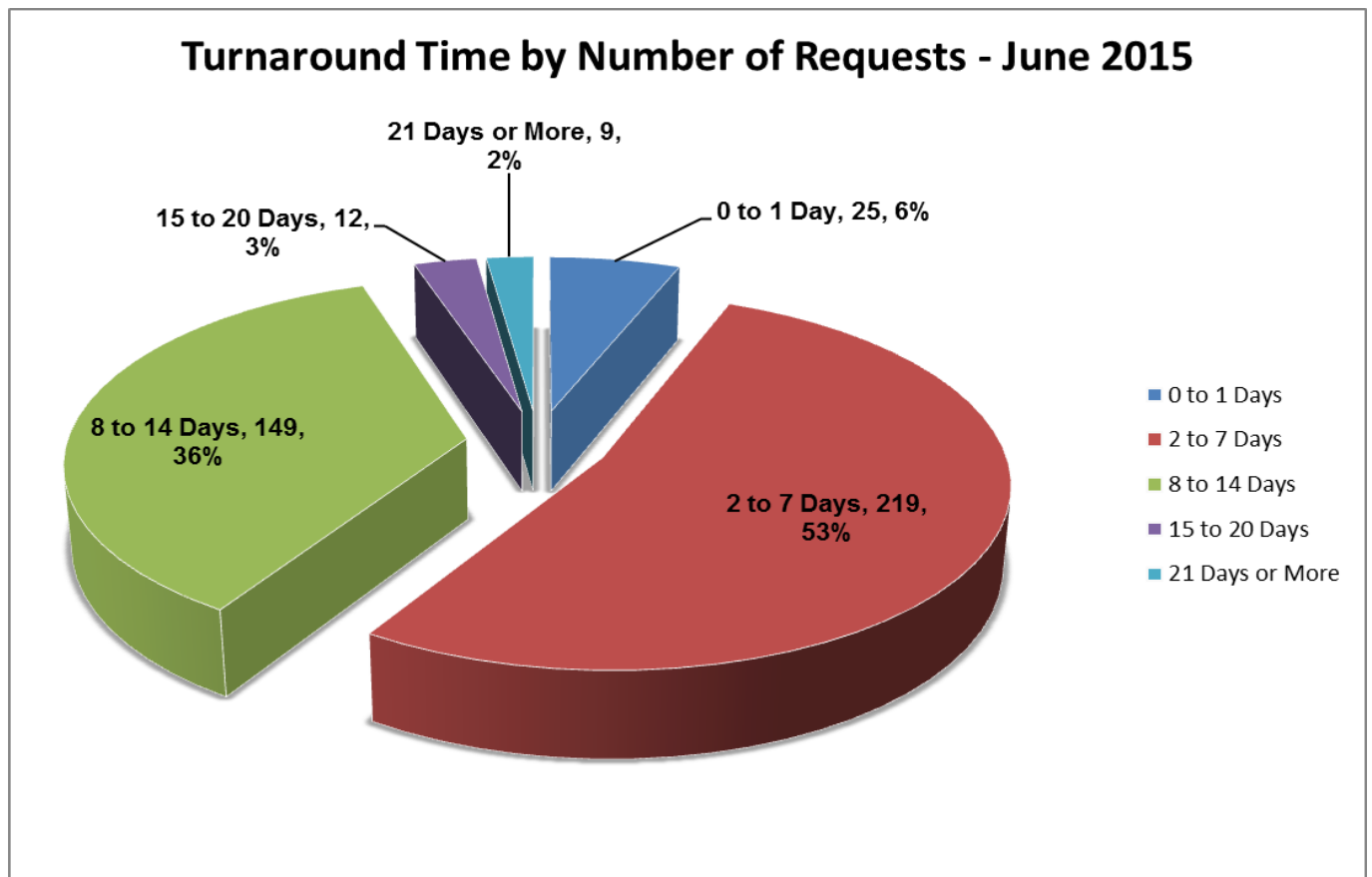
Disenrollment Requests from MCO June 2015



Approved Disenrollment Requests from MCO June 2015

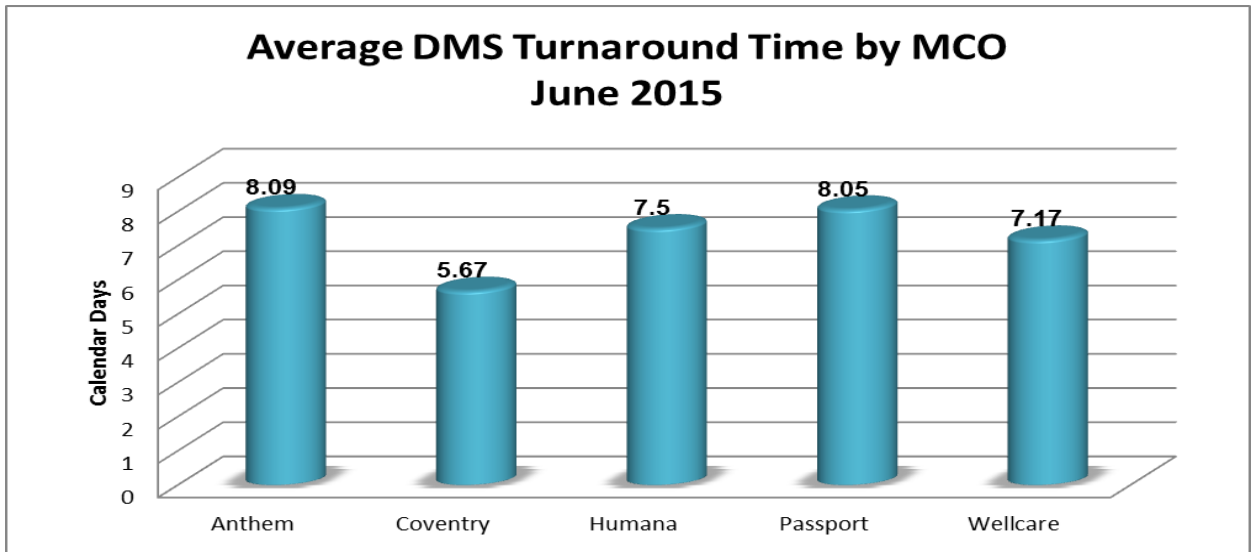


Turnaround time

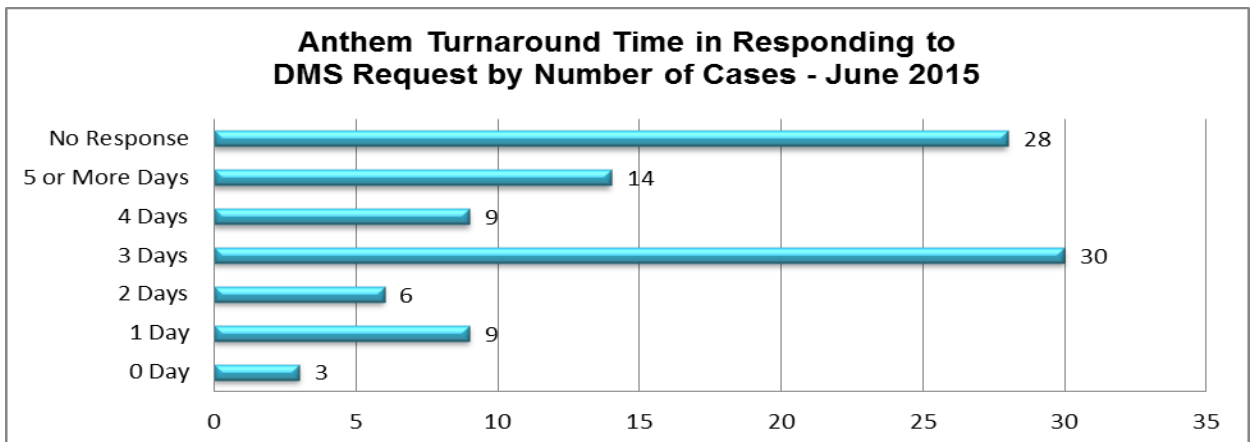


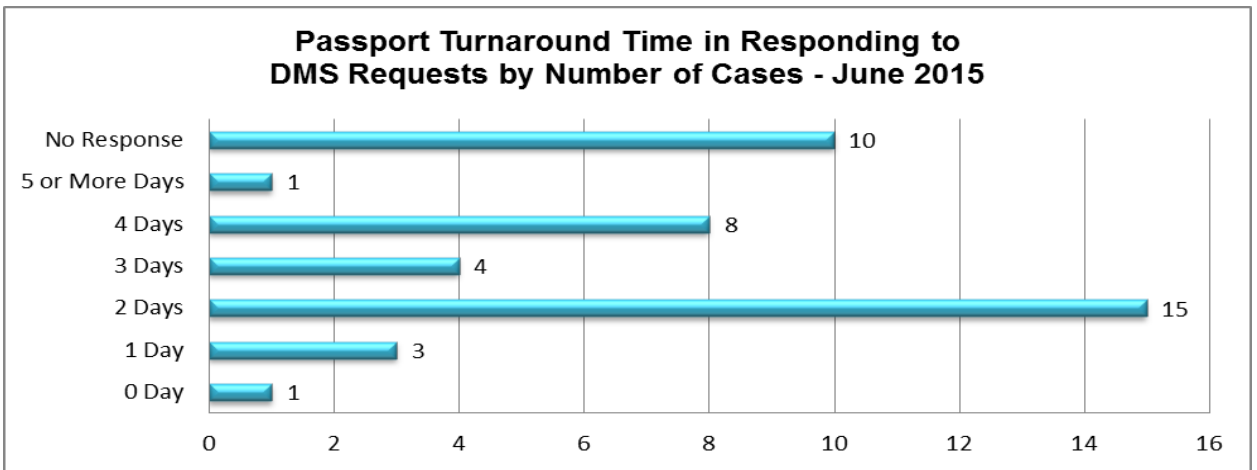
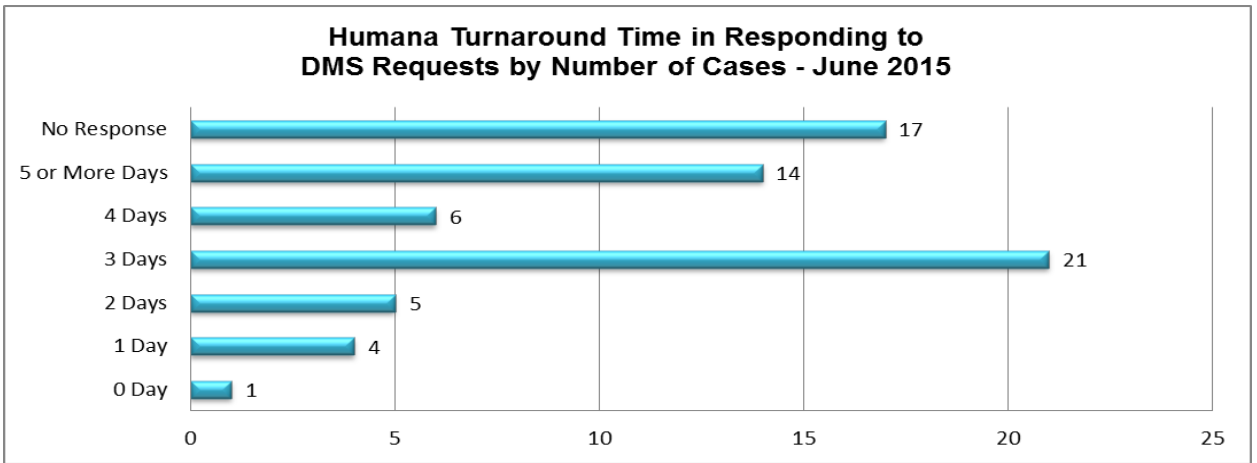
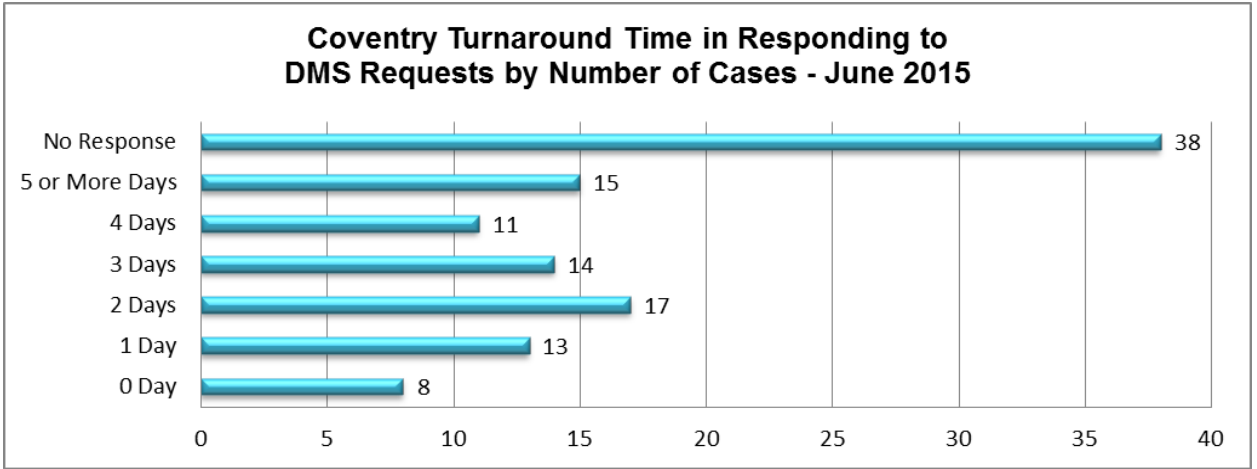
- Near 60% of the disenrollment requests submitted in June 2015 were processed and disposed within 7 calendar days by DMS.
- Only 5% of the cases required more than 2 weeks to process, i.e., 95% of the cases were closed in 2 weeks.
- Possible factors that determine turnaround time
 - Dire need nature of the case.
 - The time it takes MCO to respond to State requests

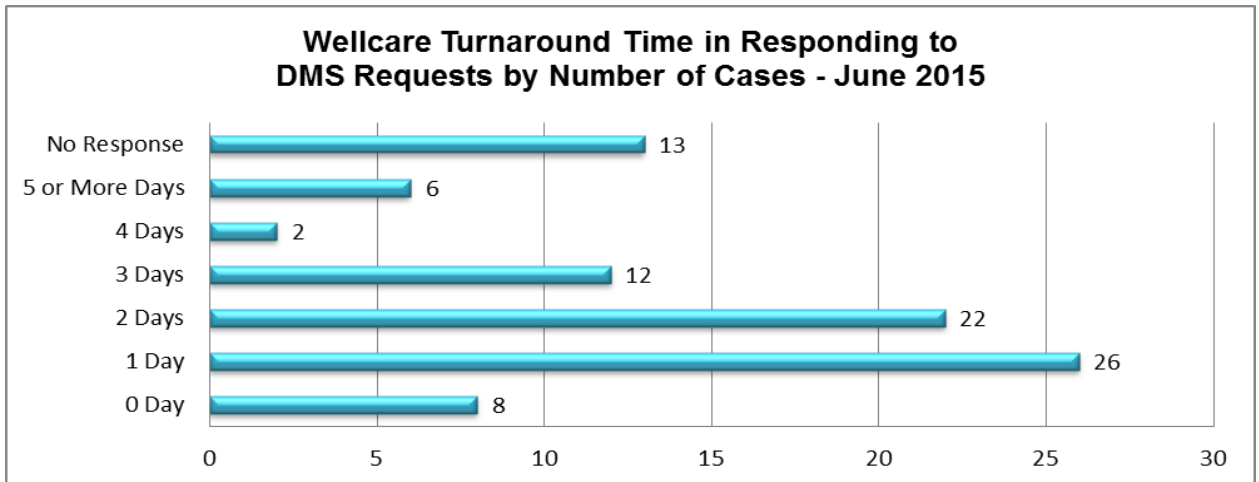
- If the required responses from MCO are not received within the given timeframe, the decision of approval or denial will be rendered based on the information given to DMS at the time of decisions.
- Some cases that are automatically approved or denied due to pre-determined and agreed factors such as a regional big provider changing policy related to a certain MCO, as investigation is not necessary to approve or deny the cases.



- Cases to disenroll from Coventry have the shortest average turnaround time (5.67 days) in June 2015. Many factors determine turnaround times, such as how soon the MCO responds to DMS, the urgency of the cases, etc.
- Turnaround time from each MCO in responding to DMS requests in June 2015:

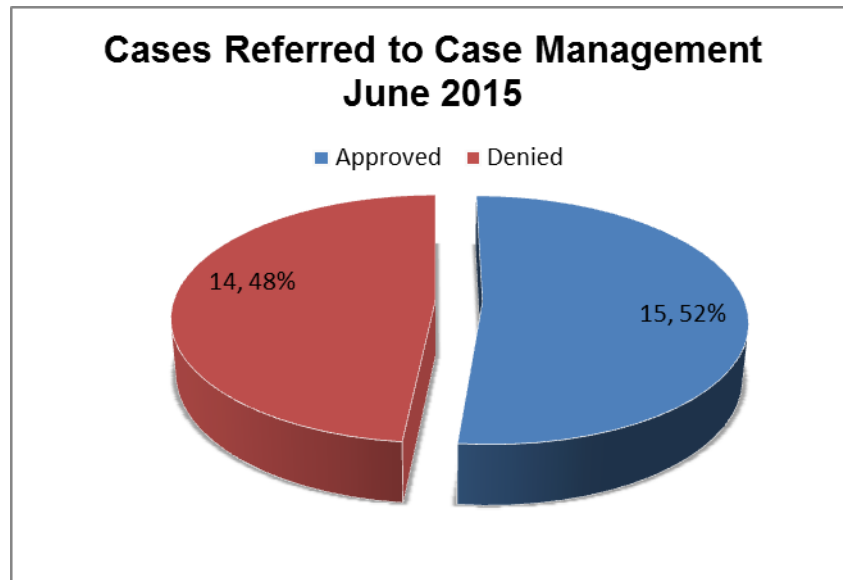






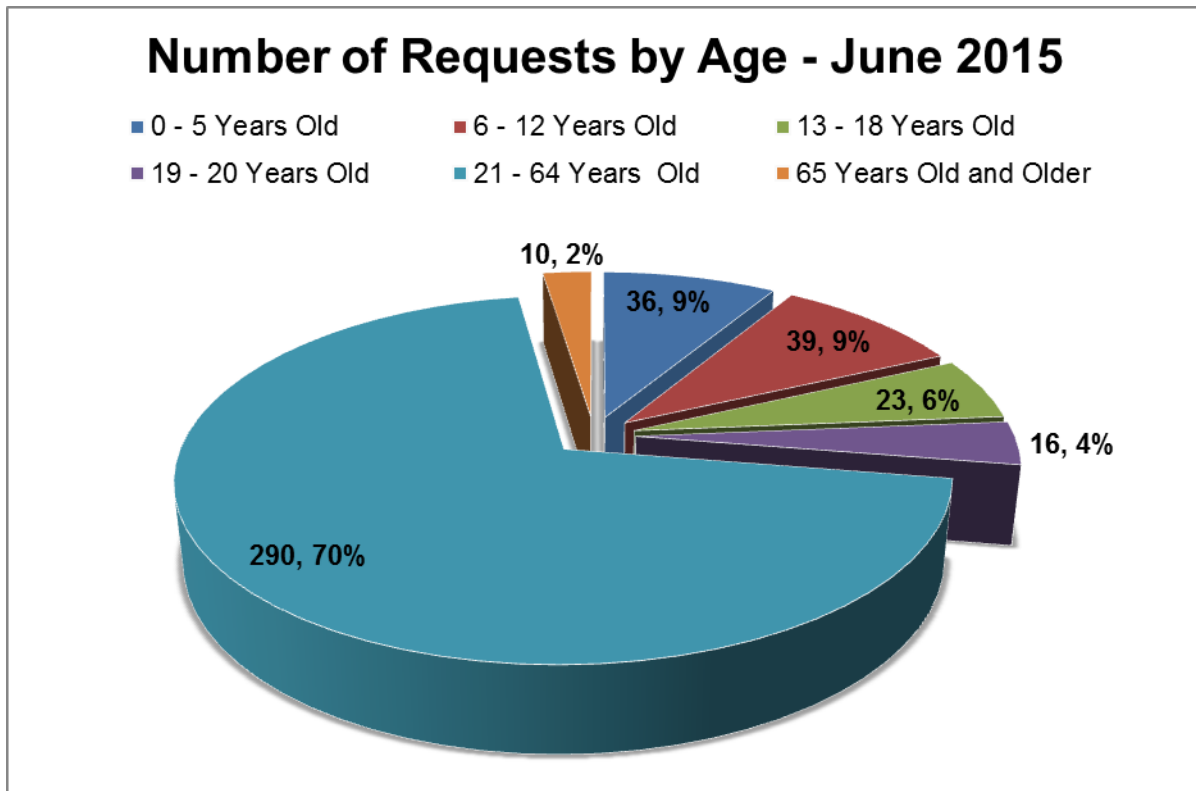
- Typical timeframe given to MCO to respond to DMS request is 3 days.
- MCO Responding to DMS requests by the end of the same day or next business day is often required for dire need cases.
- Decisions for disenrollment requests might be rendered without MCO input if the requested responses are not received by DMS within the given timeframe.
- A couple of reasons for no response from MCO:
 - Response from MCO is not required for cases approved or denied automatically due to pre-determined factors, such as DMS policies, system error, in-network providers' changes, etc.
 - MCO companies failed to respond to DMS requests.

Case Management Referral



- Twenty-nine (29) cases were referred to case management services. Cases that were approved (15 cases) to switch, referrals were sent to the members' new MCO. For the cases that were denied for disenrollment but needed case management assistance, members' current MCO was notified.
- Six of the referred cases are associated with pain management services.

Age Distribution



- Of 414 disenrollment requests submitted in June 2015, 98 cases are from population of age 18 or younger, approximately 23.7% of the requests submitted in June 2015.
- One hundred sixteen (116) members age 20 or younger who requested disenrollment in June 2015 are also eligible for EPSDT Special Services Program.
- Ten members requesting disenrollment in June 2015 are also receiving services from Medicare.

Reasons for Disenrollment – Numbers for Approved Cases in June 2015

Reason for Request	Anthem	Coventry	Humana	Passport	Wellcare	Total
Provider is not accepting member's MCO	41	32	21	12	22	128
Specialist not in provider network	21	25	8	10	6	70
Provider left network	13	16	7	5	9	50
Medications prescribed by physician not covered	0	6	4	2	17	29
Amount of co-pays	0	11	0	0	0	11
Closest Hospital does not participate with MCO	3	2	2	1	0	8
Family needs to be enrolled in same MCO	0	3	1	1	2	7
Services ordered by physician not covered	0	1	0	0	2	3
Denial of behavioral health service	0	2	0	0	0	2
Change in enrollment error	1	0	1	0	0	2
Physician/Pharmacy recommended the switch	0	0	0	0	1	1
Service ordered by dentist not covered	0	0	0	0	0	0
Member within 90 day change period	0	0	0	0	0	0
Other reason	0	0	0	0	0	0
Total Requests Approved	79	98	44	31	59	311
Total Members Enrolled in MCO	71,675	293,368	115,965	253,520	427,819	1,162,347
Percentage of Total Membership Approved to Disenroll from MCO	0.11022%	0.03341%	0.03794%	0.01223%	0.01379%	0.02676%

- Only one main cause was included in the above statistics for each disenrollment case, although some members addressed multiple reasons in their disenrollment requests.
- About 82% of the approved requests in June 2015 are related to provider issues, i.e., the providers are not accepting the member's current MCO, provider left network, specialist not in provider network, and closest hospital not in the network.
 - The major reason for denial are:
 - The providers are still in-network.
 - Alternative providers within reasonable distance are available.
 - Member's current MCO has outreached to the member to assist the member to locate providers/arrange appointments.
 - Fifty-one (51) members addressed difficulty to access dental health care, including oral surgery (14 cases). Forty (40) cases were approved.
 - Anthem – 26 cases

- Coventry – 3 cases
 - Humana – 10 cases
 - Passport – 1 case
- Specialists needed/not in MCO network in the members' local areas are:
 - Cardiologist
 - Dermatologist
 - Geneticist
 - Neurologist (rehab specialist)
 - Neurosurgeon
 - Obstetrician/Gynecologist
 - Oncologist
 - Ophthalmologist/Optomtrist
 - Oral surgeon
 - Orthopedics/Orthopedic Surgeon
 - Pain management specialist
 - Psychiatrist
 - Psychologist
 - Pulmonologist
 - Substance abuse therapist
- Co-Pay issue – 11 members addressed their inability to afford co-pay; 11 have been approved. The members of all of these cases were with Coventry.
 - Fifty-six (56) disenrollment requests were submitted in June 2015 due to the coverage for Suboxone or Subutex, or Suboxone providers not in the network.
 - Anthem – 4 cases (4 approved)
 - Coventry – 8 cases (5 approved)
 - Humana – 7 cases (4 approved)
 - Passport – 8 cases (5 approved)
 - Wellcare – 29 cases (17 approved)

Summary of MCO Movements

MCO Movement	
Anthem	-66
Coventry	-51
Humana	-8
Passport	+57
Wellcare	+68

Total Disenrollment for Cause Requests Submitted in June 2015 --- 414 Cases						
	Disenroll from Anthem	Disenroll from Coventry	Disenroll from Humana	Disenroll from Passport	Disenroll from WellCare	Total
Disenroll to Anthem	*	4	4	5	6	19
Disenroll to Coventry	26	*	13	8	9	56
Disenroll to Humana	6	9	*	6	31	52
Disenroll to Passport	6	36	20	*	43	105
Disenroll to Wellcare	60	63	31	23	*	177
Total	98	112	68	42	89	

** Total number does not add up 414, as the requests without indicating desired MCO are not included in the chart above.

Approved Disenrollment for Cause Requests Submitted in June 2015 --- 313 Cases						
	Disenroll from Anthem	Disenroll from Coventry	Disenroll from Humana	Disenroll from Passport	Disenroll from WellCare	Total
Disenroll to Anthem	*	4	3	3	3	13
Disenroll to Coventry	23	*	12	7	5	47
Disenroll to Humana	4	8	*	5	19	36
Disenroll to Passport	5	36	15	*	32	88
Disenroll to Wellcare	47	50	14	16	*	127
Total	79	98	44	31	59	311

Anthem

- Anthem had a net loss of 66 members during the month of June 2015 due to the Disenrollment for Cause process.

From	Number Requesting Disenrollment to Anthem	Number Approved	Number Denied
Coventry	4	4	0
Humana	4	3	1
Passport	5	3	2
Wellcare	6	3	3
Total	19	13	6

Region	Number Requesting Disenrollment from Anthem	Number Approved	Number Denied
1	8	6	2
2	28	23	5
3	0	0	0
4	7	4	3
5	29	26	3
6	8	8	0
7	8	6	2
8	11	6	5
Totals	99	79	20

- Dental care access issue – 26 approved cases due to dentists/oral surgeons left network, or members' dentists/oral surgeons are not in the Anthem network.
- Three members were approved to disenroll from Anthem in order to receive services from Owensboro ARH.
- Three approved disenrollment requests for members receiving services from Addiction Recovery Care (a Suboxone clinic) in order to continue receiving

services from ARC. However, all three cases requested to switch to Wellcare which does not cover Suboxone. Members stated they understood the policy.

- Specialists/services needed/not in Anthem network in the members' areas:
 - Cardiologist
 - Ear, Nose, Throat Specialist
 - Obstetrician/Gynecologist
 - Oral surgeon
 - Ophthalmologist/Optomtrist
 - Orthopedics
 - Psychologist

Coventry Cares of Kentucky

- Coventry had a net loss of 51 members during the month of June 2015 due to the Disenrollment for Cause process.

From	Number Requesting Disenrollment to Coventry	Number Approved	Number Denied
Anthem	26	23	3
Humana	13	12	1
Passport	8	7	1
Wellcare	9	5	4
Total	56	47	9

Region	Number Requesting Disenrollment from Coventry	Number Approved	Number Denied
1	1	1	0
2	8	7	1
3	27	26	1
4	13	10	3
5	25	21	4
6	1	1	0
7	10	9	1
8	31	23	8
Totals	116	98	18

- Co-Pay issue – 11 approved cases.
- Closest Hospitals not accepting Coventry – 2 approved cases for ARH and King's Daughters Medical Center.
- Dental care access issue – 3 approved cases due to members' dentists/oral surgeons not in Coventry network.

- Of 6 approved medication not covered cases, 2 are associated with the denied coverage of Suboxone film.
- Kidz Club related disenrollment requests – 3 approved cases.
- Bluegrass Pain Consultants related cases – 4 approved cases.
- Specialists/services needed/not in Coventry network in the members' area:
 - Cardiologist
 - Dermatologist
 - Obstetrician/Gynecologist
 - Oral surgeon
 - Pain management specialist
 - Psychiatrist
 - Psychologist
 - Neurologist (rehab specialist)
 - Genetic testing specialist
 - Orthopedic Surgeon
 - Ophthalmologist
 - Rheumatologist
 - Nephrologist
 - Gastroenterologist

Humana CareSource

- Humana CareSource had a net loss of 8 members for the month of June 2015 due to the Disenrollment for Cause process.

From	Number Requesting Disenrollment to Humana	Number Approved	Number Denied
Anthem	6	4	2
Coventry	9	8	1
Passport	6	5	1
Wellcare	31	19	12
Total	52	36	16

Region	Number Requesting Disenrollment from Humana	Number Approved	Number Denied
1	5	2	3
2	12	10	2
3	18	13	5
4	5	2	3
5	10	6	4
6	7	6	1
7	2	2	0
8	9	3	6
Totals	68	44	24

- Dental care access issue – 10 approved disenrollment requests stated difficulty getting appropriate dental care (including oral surgery) in Humana network.
- Seven disenrollment cases approved due to providers left Humana network. Three of them are patients of Addiction Recovery Care (a Suboxone clinic). The members requested to switch in order to continue receiving services from ARC. However, all three cases requested to switch to Wellcare which does not cover Suboxone. Members stated they understood the policy.

- Specialists/services needed/not in Humana network in the members' areas
 - Obstetrician/Gynecologist
 - Orthopedics
 - Pain management specialist
 - Oral surgeon
 - Orthopedic
 - Orthopedic surgeon
 - Substance abuse inpatient rehab services

Passport Health Plans

- Passport Health Plan had a net gain of 57 members for the month of June 2015 due to the Disenrollment for Cause process.

From	Number Requesting Disenrollment to Passport	Number Approved	Number Denied
Anthem	6	5	1
Coventry	36	36	0
Humana	20	15	5
Wellcare	43	32	11
Total	105	88	17

Region	Number Requesting Disenrollment from Passport	Number Approved	Number Denied
1	2	1	1
2	3	2	1
3	13	12	1
4	3	1	2
5	9	6	3
6	2	2	0
7	6	4	2
8	4	3	1

- Dental care (including oral surgery) access issue – 1 cases
- Five members requested to disenroll from Passport so they could continue receiving services from Addiction Recovery Care (a Suboxone clinic). All five requested to switch to Wellcare which does not cover Suboxone. Members stated they understood the policy.

- Specialists/services needed/not in Passport network in the members' area
 - Dermatologist
 - Neurologist
 - Pain Management Specialist
 - Oral Surgeon
 - Allergy specialist
 - Orthopedics/Orthopedics Surgeon
 - Obstetrician/Gynecologist
 - Substance abuse inpatient rehab services

Wellcare of Kentucky

- Wellcare of Kentucky had a net gain of 68 members for the month of June 2015 due to the Disenrollment for Cause process.

From	Number Requesting Disenrollment to Wellcare	Number Approved	Number Denied
Anthem	60	47	13
Coventry	63	50	13
Humana	31	14	17
Passport	23	16	7
Total	177	127	50

Region	Number Requesting Disenrollment from Wellcare	Number Approved	Number Denied
1	0	0	0
2	0	0	0
3	21	19	2
4	11	5	6
5	23	13	10
6	3	3	0
7	5	2	3
8	26	17	9
Totals	89	59	30

- Four members requested to disenroll from Wellcare in order to receive services from Lexington Clinic.
- Seventeen (17) members requested to disenroll from Wellcare due to no coverage for Suboxone.
- Providers left network – 9 approved cases (5 for Bluegrass Pain Consultant; 1 for Kidz Club).

- Suboxone (Subutex) related cases (including Suboxone providers not in the Wellcare network) – 17 approval (out of 29 cases).
 - One of the main reasons of approval is that members were unable to take Zubsolv, a Wellcare preferred medication to substitute Suboxone.
 - Another reason is that the providers that the members are familiar with do not accept Wellcare insurance.
 - One of the main reasons of denial for Suboxone cases is that there is no evidence showing that the member has experienced adverse effect from Zubsolv. Another reason is that there is no evidence showing that the member has tried Zubsolv.

- Specialists/services needed/not in Wellcare network in the members' area
 - Ophthalmologist/Optometrlist
 - Dermatologist
 - Psychiatrist
 - Obstetrician/Gynecologist
 - Orthopedics
 - Pain management specialist
 - Rheumatologist

Disenrollment for Cause Requests - June 2014 to June 2015

