

Disenrollment for Cause Report

July 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 the nurses at The Disease and Case Management Branch, Division of 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

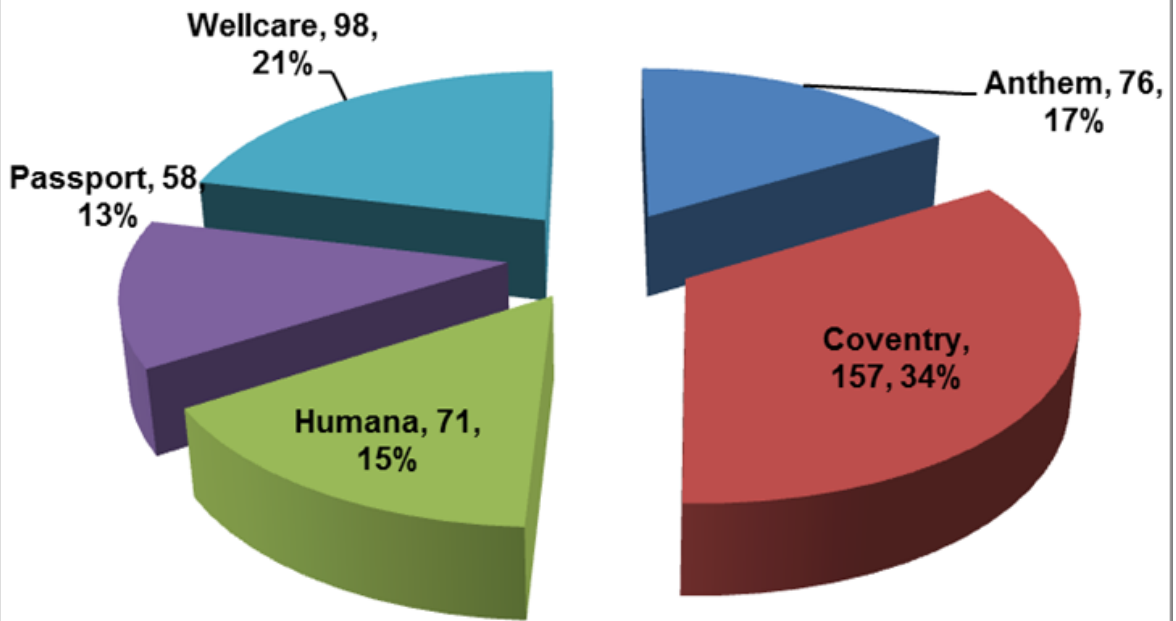
- All cases with valid signatures were investigated by DMS medical professionals.
- DMS medical professionals issued an initial inquiry email for each case to the member's current MCO as soon as the cases were assigned to them.
- MCOs were given appropriate timeframe to respond to DMS' inquiries.
- MCOs 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

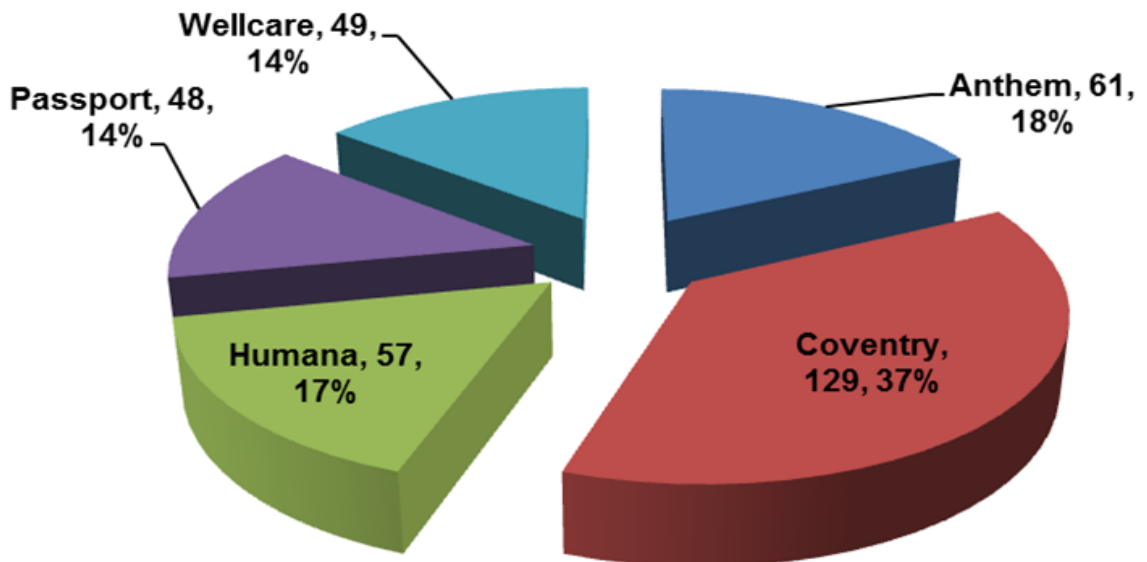
- Total Disenrollment for Cause requests received during the month of July 2015 was 460.
- Of the 460 requests received, 74.78% (344) were approved, 116 were denied.
- Each MCO had less than 1% of their total membership submit a Disenrollment for Cause request during the month of July 2015.
- Highest 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	76	61	80.26%
Coventry	157	129	82.17%
Humana	71	57	80.28%
Passport	58	48	82.76%
Wellcare	98	49	50.00%
Total	460	344	74.78%

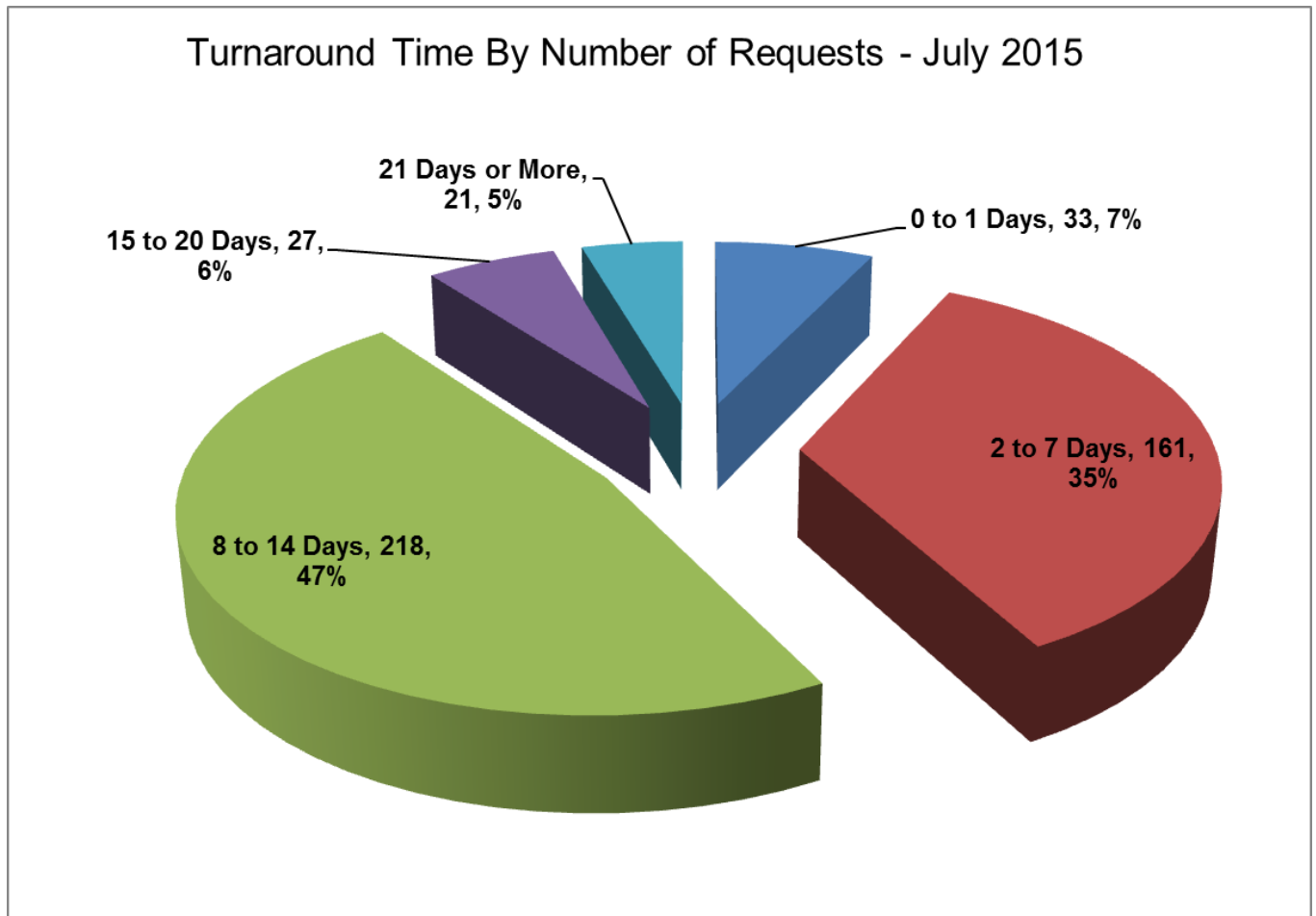
Disenrollment Requests from MCO July 2015



Approved Disenrollment Requests from MCO July 2015

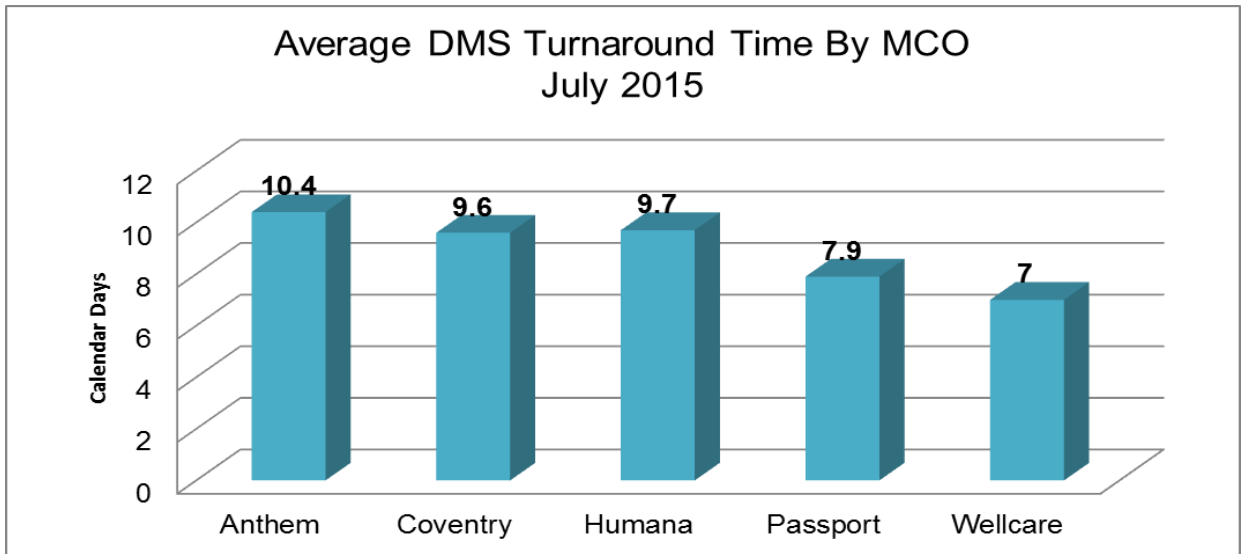


Turnaround time



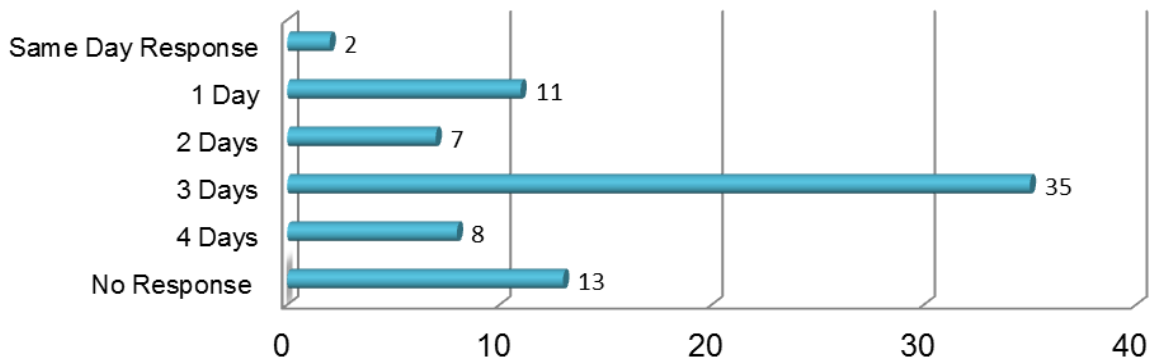
- About 42% of the disenrollment requests submitted in July 2015 were processed and disposed within 7 calendar days by DMS.
- Only 10.4% of the cases required more than 2 weeks to process, i.e., near 90% of the cases were closed in 2 weeks.
- Possible factors that determine turnaround time
 - Dire need nature of the case.

- Time required obtaining documentation from other State agencies, such as Department of Community Based Services (DCBS) and Guardianship at Department of Aging and Independent Living (DAIL).
- The time it takes for the MCO to respond to State requests
- The time it takes for the members to submit additional document
- 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, require shorter turnaround time, as investigation is not necessary to approve or deny the cases.

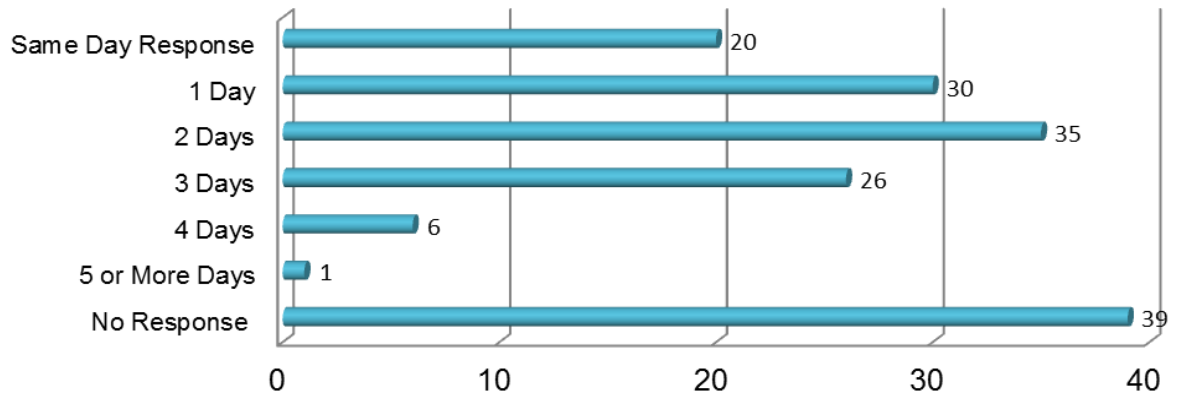


- Cases to disenroll from Wellcare have the shortest average turnaround time (7 days) in July 2015. Many factors determine turnaround times, such as how soon the MCO responds to DMS, the urgency of the cases, etc.
- Turnaround time from each MCO in responding to DMS requests in July 2015:

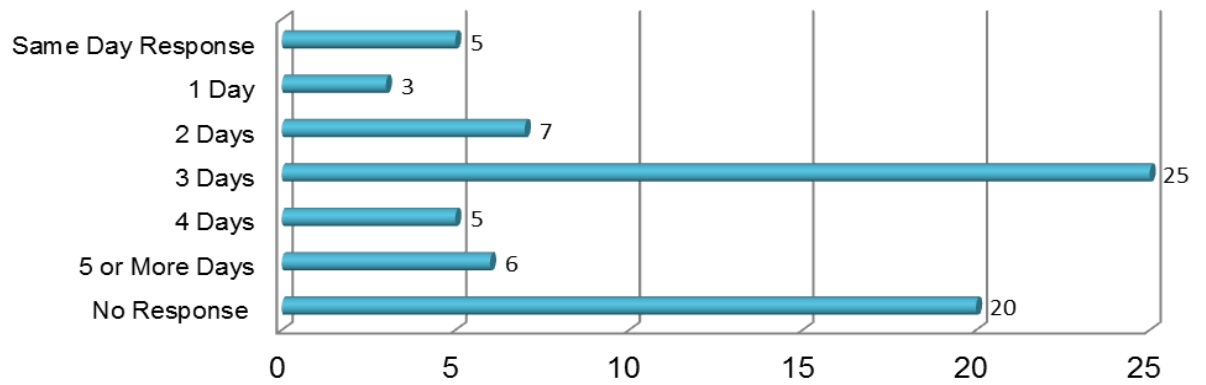
Anthem Turnaround Time in Responding to DMS Request by Number of Cases - July 2015

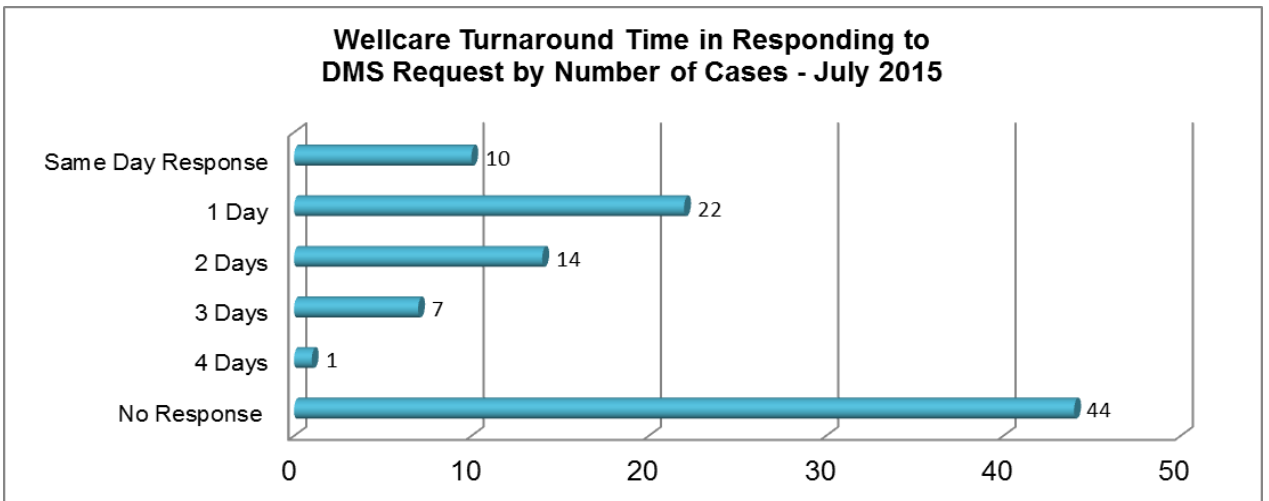
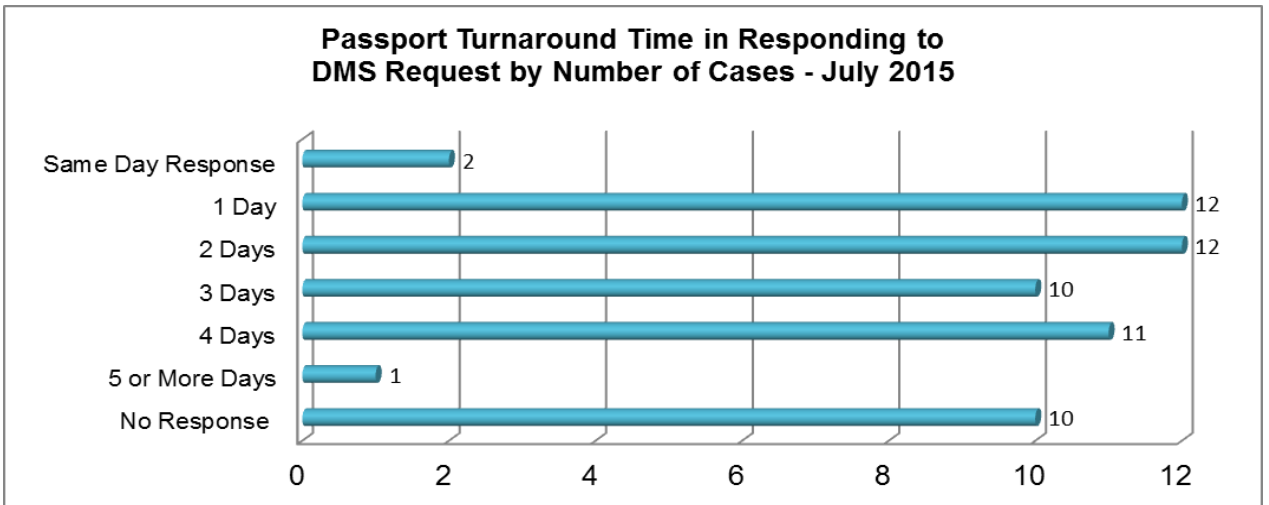


Coventry Turnaround Time in Responding to DMS Request by Number of Cases - July 2015



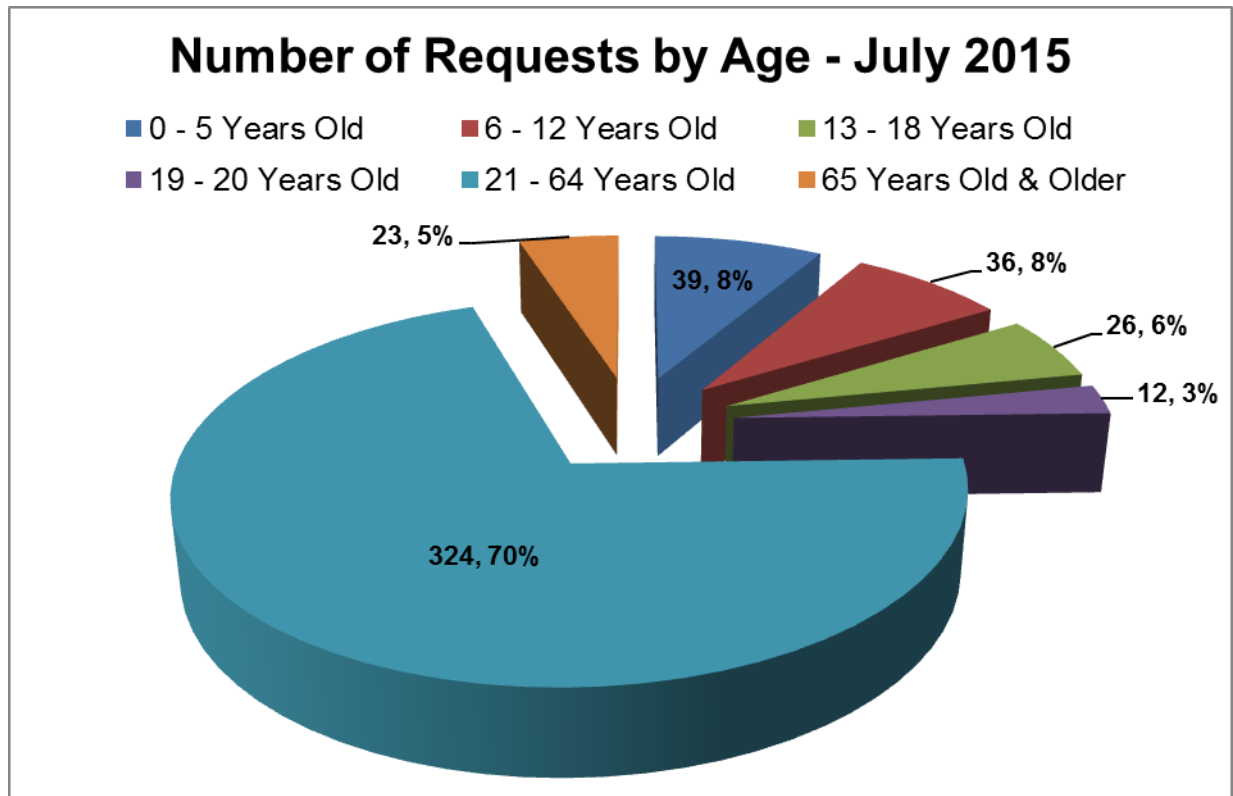
Humana Turnaround Time in Responding to DMS Request by Number of Cases - July 2015





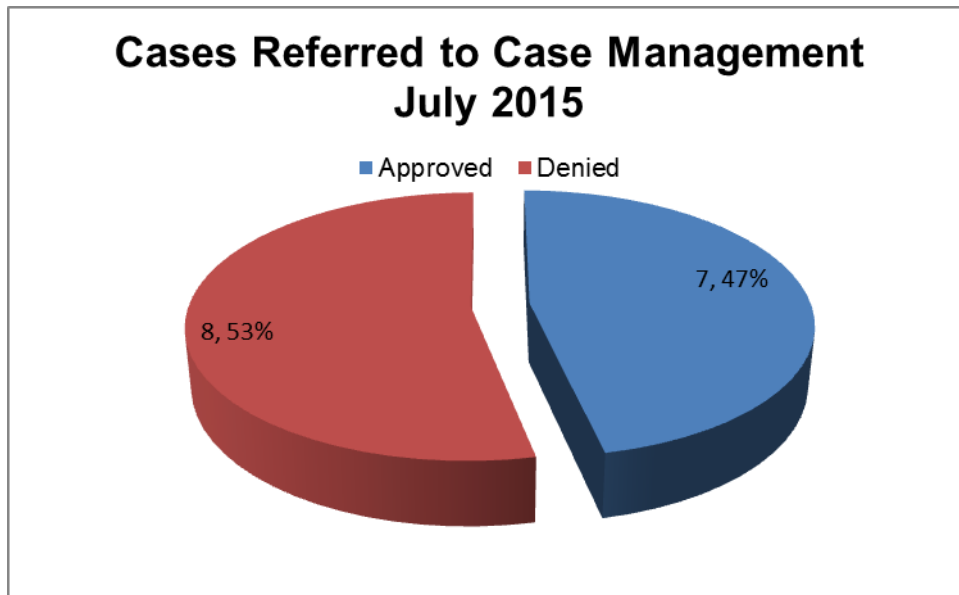
- Typical timeframe given to MCO to respond to DMS request is 3 days.
- MCO Responding to DMS requests by the end of the same day or next business day is often required for dire need cases.
- Decisions for disenrollment requests might be rendered without MCO input if the requested responses are not received 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.

Age Distribution



- Of 460 disenrollment requests submitted in July 2015, 101 cases are from population of age 18 or younger, approximately 22% of the requests submitted in July 2015.
- One hundred thirteen (113) members age 20 or younger who requested disenrollment in July 2015 are also eligible for EPSDT Special Services Program.
- Twenty-three members requesting disenrollment in July 2015 are also receiving services from Medicare.

Case Management Referral



- Fifteen (15) cases were referred to case management services. Cases that were approved (7 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 were notified.
- Wellcare received the highest number (7 cases) of case management referrals in July 2015.

Number of Case Management Referral Recived by MCO	
Anthem	2
Coventry	4
Passport	2
Wellcare	7

Reasons for Disenrollment – Numbers for Approved Cases in July 2015

Reason for Request	Anthem	Coventry	Humana	Passport	Wellcare	Total
Provider is not accepting member's MCO	39	34	30	21	19	143
Specialist not in provider network	10	44	14	20	7	95
Closest Hospital does not participate with MCO	4	22	0	1	0	27
Medications prescribed by physician not covered	1	4	3	1	12	21
Services ordered by physician not covered	0	7	2	2	2	13
Family needs to be enrolled in same MCO	2	3	0	1	4	10
Provider left network	2	3	0	1	3	9
Change in enrollment error	1	0	6	0	1	8
Amount of co-pays	0	7	0	0	0	7
Member dissatisfied with quality of services	0	2	2	0	0	4
Service ordered by dentist not covered	2	1	0	0	0	3
Physician/Pharmacy recommended the switch	0	1	0	0	1	2
Denial of behavioral health service	0	1	0	0	0	1
Member within 90 day change period	0	0	0	1	0	1
Total Requests Approved	61	129	57	48	49	344
Total Members Enrolled in MCO	74,072	291,689	117,336	257,907	427,480	1,168,484
Percentage of Total Membership Approved to Disenroll from MCO	0.08235%	0.04423%	0.04858%	0.01861%	0.01146%	0.02944%

- 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 80% of the approved requests in July 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.

- Forty-eight (48) members addressed difficulty to access dental health care, including oral surgery; 41 cases were approved.
 - Anthem – 22 cases
 - Coventry – 3 cases
 - Humana – 14 cases
 - Passport – 2 case

- Sixty-nine (69) disenrollment requests are related to substance abuse rehab services, including requests for Suboxone (57 cases), Subutex, inpatient rehab services. Providers related to most of these cases:
 - Second Chances
 - Addiction Recovery Care
 - Dr. Fernandez
 - Beth Blessings
 - Renewed You Clinic
 - Recovery Richmond

- Twenty (20) members requested to disenroll from their MCO due to unable to receive services from their obstetrician/gynecologist; 17 were approved.

- Ten (10) stated their psychiatrists are not accepting their MCO; 7 of them are Dr. Andre Fernandez's patients.

- Ten (10) members receiving services from Bluegrass Pain Consultants requested disenrollment due to the provider's change of insurance policy.

- Specialists needed/not in MCO network in the members' local areas are:
 - Cardiologist
 - Dermatologist
 - Ear, nose, throat specialist
 - Endocrinologist
 - Gastroenterologist
 - Nephrologist
 - Neurologist
 - Neurosurgeon
 - Obstetrician/Gynecologist
 - Occupational therapist
 - Oncologist
 - Ophthalmologist/Optometrlist

- Oral surgeon
 - Orthopedics/Orthopedic Surgeon
 - Pain management specialist
 - Psychiatrist
 - Rheumatologist
 - Speech pathologist
 - Substance abuse specialist
- Co-Pay issue – 7 members addressed their inability to afford co-pay; all have been approved. The members of all of these cases were with Coventry.

Summary of MCO Movements

MCO Movement	
Anthem	-44
Coventry	-92
Humana	-26
Passport	44
Wellcare	118

Total Disenrollment for Cause Requests Submitted in July 2015 --- 460 Cases						
	Disenroll from Anthem	Disenroll from Coventry	Disenroll from Humana	Disenroll from Passport	Disenroll from WellCare	Total
Disenroll to Anthem	*	4	4	3	9	20
Disenroll to Coventry	16	2	10	8	10	46
Disenroll to Humana	2	16	*	8	17	43
Disenroll to Passport	7	41	27	*	44	119
Disenroll to Wellcare	49	91	30	39	15	224
Total	74	154	71	58	95	

** Total number does not add up 460, as the requests without indicating desired MCO are not included in the chart above.

** One of the cases requesting to disenroll from Wellcare was related to system glitch. Correction was made, and the member was re-enrolled to Wellcare. It is marked as switching from Wellcare to Wellcare.

Approved Disenrollment for Cause Requests Submitted in July 2015 --- 344 Cases						
	Disenroll from Anthem	Disenroll from Coventry	Disenroll from Humana	Disenroll from Passport	Disenroll from WellCare	Total
Disenroll to Anthem	*	3	4	3	7	17
Disenroll to Coventry	14	*	10	8	5	37
Disenroll to Humana	2	15	*	5	9	31
Disenroll to Passport	5	37	23	*	27	92
Disenroll to Wellcare	40	74	20	32	1	167
Total	61	129	57	48	49	344

Anthem

- Anthem had a net loss of 44 members during the month of July 2015 due to the Disenrollment for Cause process.

From	Number Requesting Disenrollment to Anthem	Number Approved	Number Denied
Coventry	4	3	1
Humana	4	4	0
Passport	3	3	0
Wellcare	9	7	2
Total	20	17	3

Region	Number Requesting Disenrollment from Anthem	Number Approved	Number Denied
1	6	5	1
2	18	18	0
3	0	0	0
4	11	9	2
5	14	11	3
6	3	2	1
7	4	4	0
8	20	12	8
Totals	76	61	15

- 22 complaints related to dental care issue from Anthem members were approved to disenroll, due to dentists/oral surgeons left Anthem network, or the members' preferred dentists/oral surgeons are not in the Anthem network.
- 16 members were approved to disenroll from Anthem in order to receive services from their local hospitals.

- Three approved disenrollment requests due to lack of access to substance abuse rehab programs.
- Addiction Recovery Care related cases – 2 approved cases
- 16 members requested to disenroll from Anthem due to Anthem not accepted by their closest hospital.
- Specialists/services needed/not in Anthem network in the members' areas:
 - Substance Abuse Treatment Program
 - Ear, Nose, Throat Specialist
 - Dentist/Oral Surgeon
 - Obstetrician/Gynecologist
 - Occupational Therapist
 - Oral surgeon
 - Ophthalmologist/Optometrlist
 - Psychiatrist
 - Speech Pathologist

Coventry Cares of Kentucky

- Coventry had a net loss of 92 members during the month of July 2015 due to the Disenrollment for Cause process.

From	Number Requesting Disenrollment to Coventry	Number Approved	Number Denied
Anthem	16	14	2
Coventry	2	0	2
Humana	10	10	0
Passport	8	8	0
Wellcare	10	5	5
Total	46	37	9

Region	Number Requesting Disenrollment from Coventry	Number Approved	Number Denied
1	8	5	3
2	3	2	1
3	34	31	3
4	13	10	3
5	20	18	2
6	5	2	3
7	18	16	2
8	56	45	11
Totals	157	129	28

- Co-Pay issue – 7 approved cases.
- 37 approved cases indicate that members' closest hospitals do not accept Coventry – ARH and King's Daughters Hospital.
- Dental care access issue – 3 approved cases due to members' dentists/oral surgeons not in Coventry network.

- Sixteen (16) cases are associated with the denied coverage of Suboxone film or other substance abuse medication, and/or the lack of access to substance abuse treatment provider.
- Kidz Club related disenrollment requests – 2 approved cases
- Dr. Andre Fernandez related cases – 5 approved cases
- Second Chances related cases – 5 approved cases
- Addiction Recovery Care related cases – 2 approved cases
- Bluegrass Pain Consultants related cases – 8 approved cases.
- Closest hospital does not accept member's MCO – 15 approved cases.
- Specialists/services needed/not in Coventry network in the members' area:
 - Cardiologist
 - Dermatologist
 - Obstetrician/Gynecologist (6)
 - Oral surgeon
 - Pain management specialist
 - Psychiatrist (7)
 - Psychologist
 - Neurologist
 - Genetic testing specialist
 - Orthopedic Surgeon
 - Ophthalmologist
 - Rheumatologist
 - Substance abuse rehab program (13)
 - Nephrologist
 - Gastroenterologist
 - Endocrinologist

Humana CareSource

- Humana CareSource had a net loss of 26 members for the month of July 2015 due to the Disenrollment for Cause process.

From	Number Requesting Disenrollment to Humana	Number Approved	Number Denied
Anthem	2	2	0
Coventry	16	15	1
Passport	8	5	3
Wellcare	17	9	8
Total	43	31	12

Region	Number Requesting Disenrollment from Humana	Number Approved	Number Denied
1	1	0	1
2	5	5	0
3	23	23	0
4	4	2	2
5	7	6	1
6	7	7	0
7	5	4	1
8	19	10	9
Totals	71	57	14

- Dental care access issue – 14 approved disenrollment requests stated difficulty getting appropriate dental care (including oral surgery and orthodontist) in Humana network.

- Twelve (12) cases are associated with the denied coverage of Suboxone film or other substance abuse medication, and/or the lack of access to substance abuse treatment provider.
- Addiction Recovery Care related cases – 4 approved cases
- Specialists/services needed/not in Humana network in the members' areas
 - Obstetrician/Gynecologist
 - Orthopedics
 - Pain management specialist
 - Oral surgeon/Orthodontist
 - Psychiatrist
 - Substance abuse rehab services (10)

Passport Health Plans

- Passport Health Plan had a net gain of 44 members for the month of July 2015 due to the Disenrollment for Cause process.

From	Number Requesting Disenrollment to Passport	Number Approved	Number Denied
Anthem	7	5	2
Coventry	41	37	4
Humana	27	23	4
Wellcare	44	27	17
Total	119	92	27

Region	Number Requesting Disenrollment from Passport	Number Approved	Number Denied
1	6	6	0
2	6	5	1
3	7	6	1
4	9	8	1
5	14	11	3
6	2	1	1
7	5	3	2
8	9	8	1
Totals	58	48	10

- Two Passport members complained about not having appropriate access to dental care, and were approved to disenroll from Passport.
- Thirteen (13) cases are associated with the denied coverage of Suboxone film or other substance abuse medication, and/or the lack of access to substance abuse treatment provider.

- Second Chances related cases – 4 approved cases
- Addiction Recovery Care related cases – 6 approved cases
- Specialists/services needed/not in Passport network in the members' area
 - Dermatologist
 - Neurologist
 - Neurosurgeon
 - Pain Management Specialist
 - Oral Surgeon
 - Allergy specialist
 - Orthopedics/Orthopedics Surgeon
 - Obstetrician/Gynecologist
 - Surgeon
 - Substance abuse inpatient rehab services (12)

Wellcare of Kentucky

- Wellcare of Kentucky had a net gain of 118 members for the month of July 2015 due to the Disenrollment for Cause process.

From	Number Requesting Disenrollment to Wellcare	Number Approved	Number Denied
Anthem	49	40	9
Coventry	91	74	17
Humana	30	20	10
Passport	39	32	7
Wellcare	15	1	0
Total	224	167	43

Region	Number Requesting Disenrollment from Wellcare	Number Approved	Number Denied
1	2	1	1
2	1	1	0
3	18	14	4
4	11	3	8
5	24	15	9
6	3	2	1
7	2	2	0
8	37	11	26
Totals	98	49	49

- Twenty-three (23) cases are associated with the denied coverage of Suboxone film or other substance abuse medication, and/or the lack of access to substance abuse treatment provider.
- Kidz Club related cases – 8 approved cases

- Bluegrass Pain Consultants related cases – 3 approved cases
- 14 Suboxone (Subutex) related cases – 11 approval
 - 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 (5)
 - Orthopedics
 - Pain management specialist
 - Rheumatologist

Disenrollment for Cause Requests - July 2014 to July 2015

