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Health and Human
Services

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DOCUMENT HISTORY LOG

STATUS ¹	DOCUMENT REVISION ²	EFFECTIVE DATE	DESCRIPTION ³
Baseline	2.0	01/10/2022	Initial version Uniform Managed Care Manual Chapter 3.28.1, "Escalation Help Line Calls" per MCO notices sent 03/25/2020 and 09/24/20. Accessibility approved version.

1 Status should be represented as "Baseline" for initial issuances, "Revision" for changes to the Baseline version, and "Cancellation" for withdrawn versions.

2 Revisions should be numbered according to the version of the issuance and sequential numbering of the revision—e.g., "1.2" refers to the first version of the document and the second revision.

3 Brief description of the changes to the document made in the revision.

I. Applicability of Chapter 3.28.1

Chapter 3.28.1 applies to MCOs participating in STAR Health or STAR Kids.

HHSC has established an escalation help line in accordance with Texas Government Code Section 533.00253, STAR Kids Managed Care Program. Section 533.00253(f) requires HHSC to operate a Medicaid escalation help line that is dedicated to assisting families of Medicaid recipients receiving benefits under the Medically Dependent Children Program (MDCP) or the Deaf Blind with Multiple Disabilities (DBMD) waiver program in navigating and resolving issues related to the STAR Kids managed care program. HHSC has expanded the escalation help line to assist STAR Health Members receiving benefits under the MDCP or DBMD waiver program.

Section 533.00253(i) states that a Medicaid managed care organization (MCO) must, to the extent feasible, provide information, including information related to Service Coordination and prior authorization denials, that will enable HHSC staff operating the escalation help line to assist Members.

II. Escalation Help Line

This chapter describes an MCO's responsibilities related to the HHSC escalation help line.

A. Designation of MCO Staff

An MCO must:

- designate two MCO staff members to serve as the primary point of contact and back-up point of contact (POCs);



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- enter the names, phone numbers, and email addresses of the POCs in the TexConnect portal by selecting “MDCP-DBMD escalation help line”;
- Email the names, phone numbers, and email addresses of the POCs to MDCP_DBMD_Escalation@hhsc.state.tx.us.
- ensure that a POC responds to all telephone calls or emails from an HHSC staff member operating the escalation help line as required by this chapter; and
- authorize the POCs to take action to resolve issues identified by HHSC staff operating the escalation help line.

B. Time to Respond to HHSC Staff Operating the Escalation Help Line

The POC must respond by email to MDCP_DBMD_Escalation@hhsc.state.tx.us acknowledging receipt of an HHSC voicemail or email within one hour of the voicemail or email being sent.

If an HHSC staff member requests information from the POC, the POC must provide information that is responsive to the request by 5:00 p.m. on the first Business Day after the HHSC staff member’s request. If the POC will not have the requested information by the 5:00 p.m. deadline, the POC must, by 2:00 p.m. that day, ask HHSC staff operating the escalation help line for an extension to obtain the information. MCOs must submit an extension request by email to MDCP_DBMD_Escalation@hhsc.state.tx.us. The POC must provide the reason the extension is needed. HHSC has sole discretion to grant extensions.

If the HHSC staff person requests resolution of an issue, the POC must provide to HHSC, by 5:00 p.m. on the first Business Day after the HHSC staff member telephoned or emailed, a response explaining:

- how the MCO has resolved the issue; or
- how and by what date the MCO will resolve the issue.

If the MCO has not resolved the issue by 5:00 p.m., the POC must provide a final response to HHSC describing how the issue was resolved within one Business Day after resolution.

C. Responding to an HHSC Staff Member

When responding to an HHSC staff member operating the escalation help line, a POC must:

- respond by secure email;



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- provide information that is requested, including information regarding Service Coordination and prior authorization denials;
- if attempting to resolve an issue:
 - restate and address all issues identified in the HHSC staff member’s communication;
 - state whether the issue affects multiple STAR Kids or STAR Health Members or providers and, if so, state the estimated number of Members or providers affected;
 - if applicable, include a list of providers with name and assumed name, National Provider Identifier (NPI), Texas Provider Identifier (TPI), Atypical Provider Identification (API), and contact information;
 - describe any communications with a Member or Member’s representative in chronological order, and include the date, and the name, title, and phone number of the MCO representative (Service Coordinator, Member advocate, etc.) who had the communication;
 - when an issue is resolved, describe how the MCO resolved the issue and the date it was resolved;
 - if an issue is not resolved, describe the plan to resolve the complaint and the expected resolution date; and
 - explain the steps the MCO will take to ensure that the issue will not occur again.

E. Responding to a Member

- Unless otherwise directed, if an HHSC staff person operating the escalation help line requests resolution of an issue, an MCO representative must contact the Member or Member’s representative to discuss the issue. When the issue is resolved, the MCO representative must notify the Member or Member’s representative of the resolution by the HHSC case due date.
- If the MCO representative cannot reach the Member or Member’s representative to resolve the issue by the specific due date for the HHSC assigned case, the MCO may request HHSC establish a three-way call with an HHSC staff member operating the



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escalation help line, the MCO representative, and the Member before the deadline or request an extension from HHSC.