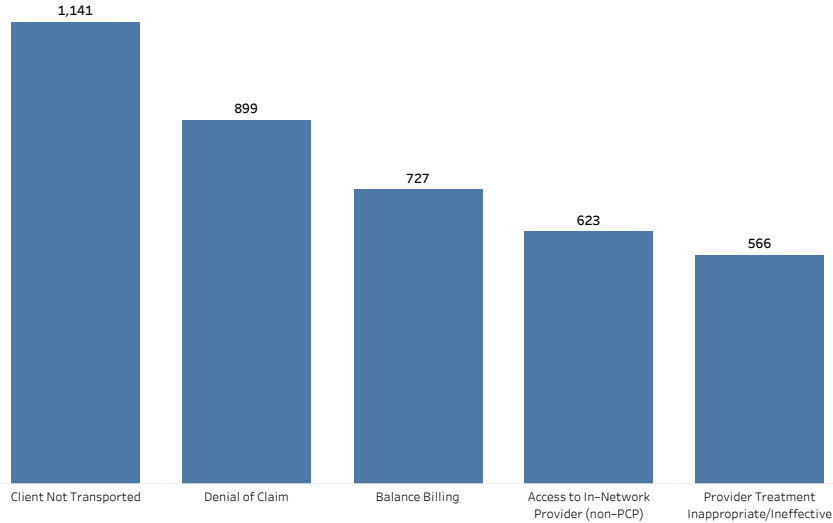


HHSC - SFY 2024 Q3

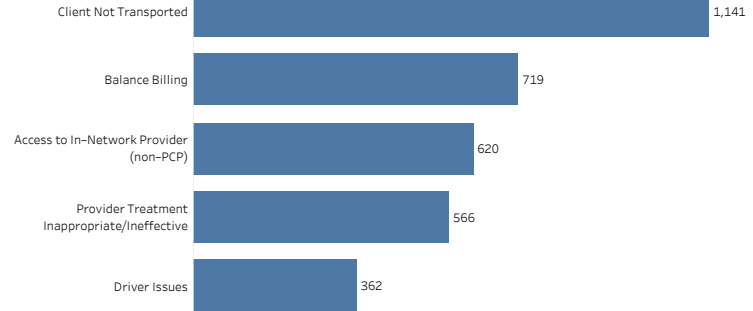
Total Resolved Complaints in SFY 2024 Q3: 8,281

Top 5 Complaints

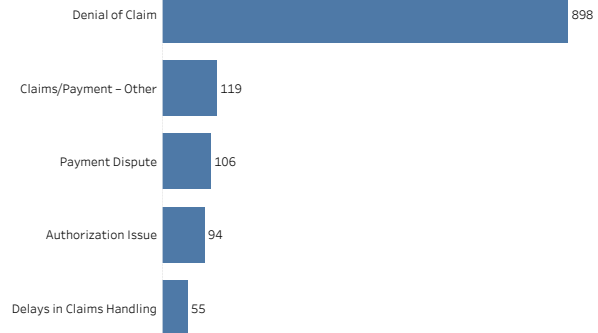


Withdrawn and pending complaints, CHIP complaints, and complaints from inactive health plans are excluded from this report. Eighty-two (82) % of total complaints reported were client complaints.
 Data Sources: MCCO Quarterly Complaints Report, HHS Office of the Ombudsman Quarterly Report, MCO Self-Reported Complaints from TexConnect. Medicaid Enrollment information is from Point in Time eligibility data ([Med_ID].[dbo].[Med_ID_201909_YYYYMM], where YYYYMM represents the latest eligibility month loaded into the table).
 Count of Complaints by Source: Ombudsman - 745 Complaints, MCS - 679 Complaints, MCO Self-Reported - 6,857 Complaints

Top 5 Complaints for Members



Top 5 Complaints for Providers



HHSC - SFY 2024 Q3

Top 5 Complaints by Program per 10,000 Members

Program	Complaint Category	Rate per 10,000 Members
MMP	Balance Billing	35.87
	Correspondence (Incorrect, unclear, or not received)	12.69
	Client Not Transported	7.44
	Claims/Payment - Other	6.12
	Customer Service - Other	4.37
STAR+PLUS	Client Not Transported	17.98
	Provider Treatment Inappropriate/Ineffective	6.87
	Access to In-Network Provider (non-PCP)	5.76
	Driver Issues	4.69
	MCO Customer Service/Staff Behavior	3.93
STAR Kids	Individual Transportation Participant (ITP) claims	6.56
	Client Not Transported	5.85
	Denial of Claim	5.22
	Balance Billing	3.39
	Provider Treatment Inappropriate/Ineffective	2.96
STAR	Denial of Claim	1.88
	Balance Billing	1.24
	Access to In-Network Provider (non-PCP)	.94
	Provider Treatment Inappropriate/Ineffective	.43
	Client Not Transported	.35
STAR Health	Denial of Claim	9.56
	Client Not Transported	3.19
	Provider Treatment Inappropriate/Ineffective	2.73
	Access to Care - Other	2.28
	Quality of Care - Other	1.37
Medicaid Dental	Denial of Claim	.11
	Access to Dental Services (adult)	.09
	Provider Treatment Inappropriate/Ineffective	.09
	Claims/Payment - Other	.05
	Authorization Issue	.04

Programs are sorted in descending order from highest rate of complaints to lowest. Ties are sorted in descending order alphabetically.

Average Monthly Medicaid Members by Program for SFY 2024 Q1

MMP	22,860
STAR+PLUS	513,850
STAR Kids	141,775
STAR	3,122,725
STAR Health	21,963
Medicaid Dental	2,949,790

Total Average Monthly Medicaid Members for 2024 Q3 (excluding Dental): 3,823,173

Enrollment numbers do not equal a distinct count of members as members in Dental can also be enrolled in other programs.

Rate of complaints for every 10,000 enrolled members. (Complaint Volume / Total Medicaid Enrollment for SFY 24 Q3) * 10,000 = Complaints per 10,000.

Count of Complaints by Source: Ombudsman - 745 Complaints, MCS - 679 Complaints, MCO Self-Reported - 6,857 Complaints

Percentage of Complaints Substantiated - Ombudsman Data

Resolution	MMP	STAR+PLUS	STAR Kids	STAR	STAR Health	Medicaid Dental
Substantiated	0%	11%	8%	5%	20%	7%
Unsubstantiated	43%	31%	40%	31%	0%	28%
Unable to Substantiate	57%	58%	52%	64%	80%	66%

Substantiated - a complaint where research clearly indicates agency policy was violated or agency expectations were not met.

Unsubstantiated - a complaint where research clearly indicates agency policy was not violated or agency expectations were met.

Unable to Substantiate - a complaint where research does not clearly indicate if agency policy was violated or agency expectations were met.

Percentages may not add up to 100% due to rounding. Complaint outcomes are discrete and do not overlap.

Percentage of Complaints Confirmed - MCS and MCO Self-Reported Data

Resolution	MMP	STAR+PLUS	STAR Kids	STAR	STAR Health	Medicaid Dental
Confirmed	82%	62%	67%	62%	73%	22%
Not Confirmed	14%	31%	31%	35%	26%	69%
Unable to Determine	4%	8%	2%	3%	1%	9%

Confirmed - resolved or partially resolved in Complainant's favor.

Not Confirmed - resolved or partially resolved in MCO's favor.

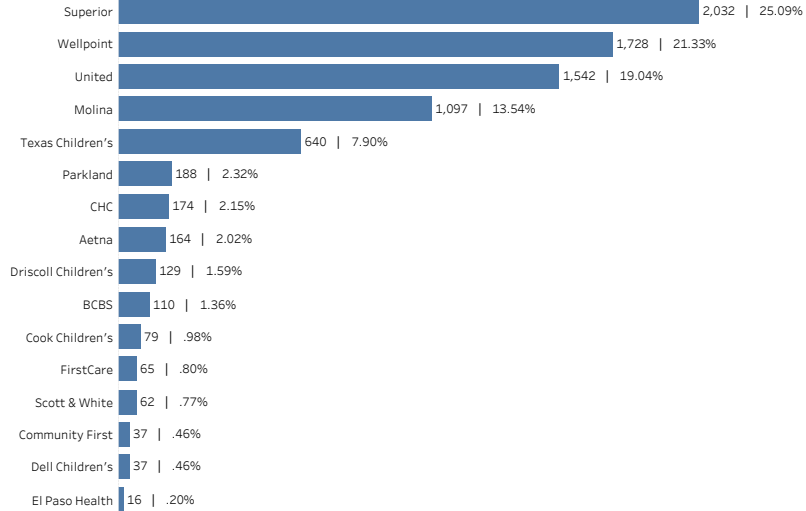
Unable to Determine - not able to confirm if a complaint is confirmed or not confirmed and complaints not related to MCO actions.

Percentages may not add up to 100% due to rounding. Complaint outcomes are discrete and do not overlap.

HHSC - SFY 2024 Q3

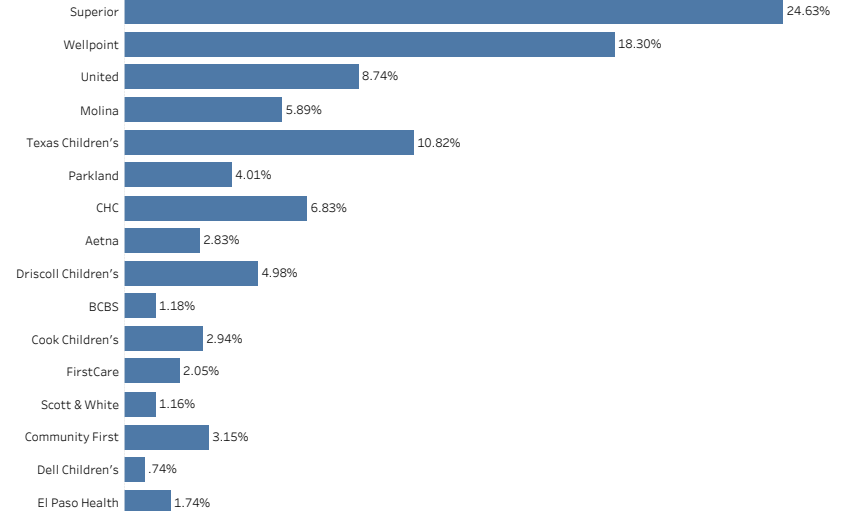
Complaint Volume by MCO

Percentages may not add up to 100% due to rounding.



Total Complaints / Percent of Total Complaints

Total Enrollment by MCO



% of Total Enrollment

Complaint Volume by DMO



Total Enrollment by DMO



Count of Complaints by Source: Ombudsman - 745 Complaints, MCS - 679 Complaints, MCO Self-Reported - 6,857 Complaints

HHSC - SFY 2024 Q3

Top 5 Complaints by MCO/DMO per 10,000 Members

Aetna	Denial of Claim	7.12
	Balance Billing	3.88
	Claims/Payment - Other	.55
	Prescription Services - Other	.28
	Home Health	.28
BCBS	Denial of Claim	3.10
	Balance Billing	3.10
	Access to In-Network Provider (non-PCP)	2.88
	Driver Issues	1.99
	Access to PCP	1.99
CHC	Denial of Claim	1.46
	Driver Issues	.73
	Authorization Issue	.54
	Balance Billing	.42
	Customer Service - Other	.31
Community First	Client Not Transported	.50
	Access to Care - Other	.50
	Service Coordination/Service Management	.17
	Scheduling error	.17
	NEMT - Other	.17
Cook Children's	Provider Treatment Inappropriate/Ineffective	1.96
	Denial of Claim	.45
	Client Not Transported	.45
	Vehicle issues	.36
	Scheduling error	.36
Dell Children's	Claims/Payment - Other	1.77
	Balance Billing	1.42
	Denial of Claim	1.06
	Access to Out-of-Network Provider	1.06
	Scheduling error	.71
DentaQuest	Denial of Claim	.20
	Access to Dental Services (adult)	.17
	Provider Treatment Inappropriate/Ineffective	.12
	Authorization Issue	.08
	Service Coordination/Service Management	.06
Driscoll Children's	NEMT - Other	1.68
	Provider Treatment Inappropriate/Ineffective	.74
	Denial of Claim	.58
	Utilization Review Referrals	.47
	Client Not Transported	.37
El Paso Health	Balance Billing	1.35
	Provider Treatment Inappropriate/Ineffective	.45
	MCO Customer Service/Staff Behavior	.15
	Driver Issues	.15
	Access to PCP	.15
FirstCare	Denial of Claim	3.83
	Access to Care - Other	1.02
	Claims/Payment - Other	.77
	Access to Out-of-Network Provider	.64
	Claim Recoupment	.38
MCNA	Claims/Payment - Other	.07
	Provider Treatment Inappropriate/Ineffective	.06
	Customer Service - Other	.04
	Denial of Services	.03
	Access to Dental Services (adult)	.02
Molina	Client Not Transported	5.24
	Denial of Claim	4.53
	Scheduling error	3.64
	Customer Service - Other	3.38
	Driver Issues	3.33
Parkland	Denial of Claim	4.17
	Balance Billing	2.80
	Customer Service - Other	.59
	Payment Dispute	.46
	Provider Treatment Inappropriate/Ineffective	.39
Scott & White	Denial of Claim	6.07
	Claims/Payment - Other	2.02
	Access to Care - Other	1.12
	Delays in Claims Handling	.67
	Balance Billing	.67
Superior	Client Not Transported	2.46
	Denial of Claim	2.25
	Driver Issues	1.85
	NEMT - Other	1.57
	Provider Treatment Inappropriate/Ineffective	1.49
Texas Children's	Individual Transportation Participant (ITP) claims	2.85
	Balance Billing	2.34
	Denial of Claim	2.03
	Client Not Transported	1.47
	Claims/Payment - Other	.80
United	Client Not Transported	19.18
	Provider Treatment Inappropriate/Ineffective	8.17
	Balance Billing	4.46
	MCO Customer Service/Staff Behavior	3.14
	Denial of Claim	2.07
United Dental	Correspondence (Incorrect, unclear, or not received)	.07
	Provider Treatment Inappropriate/Ineffective	.05
	MCO Customer Service/Staff Behavior	.05
	Access to PCP	.05
	Access to In-Network Provider (non-PCP)	.02
Wellpoint	Access to In-Network Provider (non-PCP)	6.92
	Balance Billing	2.71
	Quality of Care - Other	2.69
	Access to Care - Other	2.36
	Denial of Claim	1.86

Rate of complaints for every 10,000 enrolled members. (Complaint Volume / Total Medicaid Enrollment for SFY 24 Q3) * 10,000 = Complaints per 10,000.

Count of Complaints by Source: Ombudsman - 745 Complaints, MCS - 679 Complaints, MCO Self-Reported - 6,857 Complaints

MCOs/DMOs are sorted in alphabetical order. Ties are sorted in descending order alphabetically.

HHSC - SFY 2024 Q3

Percentage of Complaints Substantiated - Ombudsman Data

Resolution	Aetna	BCBS	CHC	Community First	Cook Children's	Dell Children's	DentaQuest	Driscoll Children's	El Paso Health	FirstCare	MCNA	Molina	Parkland	Scott & White	Superior	Texas Children's	United	United Dental	Wellpoint
Substantiated	9%	12%	11%	18%	0%	0%	0%	0%	0%	13%	0%	12%	0%	25%	9%	0%	10%	50%	8%
Unsubstantiated	27%	29%	32%	55%	11%	20%	35%	36%	33%	25%	25%	30%	33%	25%	27%	34%	33%	0%	38%
Unable to Substantiate	64%	59%	57%	27%	89%	80%	65%	64%	67%	63%	75%	58%	67%	50%	64%	66%	57%	50%	54%

Substantiated - a complaint where research clearly indicates agency policy was violated or agency expectations were not met.

Unsubstantiated - a complaint where research clearly indicates agency policy was not violated or agency expectations were met.

Unable to Substantiate - a complaint where research does not clearly indicate if agency policy was violated or agency expectations were met.

Percentages may not add up to 100% due to rounding. Complaint outcomes are discrete and do not overlap.

Percentage of Complaints Confirmed - MCS and MCO Self-Reported Data

Resolution	Aetna	BCBS	CHC	Community First	Cook Children's	Dell Children's	DentaQuest	Driscoll Children's	El Paso Health	FirstCare	MCNA	Molina	Parkland	Scott & White	Superior	Texas Children's	United	United Dental	Wellpoint
Confirmed	42%	99%	62%	46%	66%	91%	21%	41%	69%	63%	35%	40%	72%	64%	69%	58%	68%	0%	68%
Not Confirmed	58%	1%	37%	8%	33%	9%	79%	51%	23%	35%	18%	39%	19%	29%	25%	39%	30%	0%	32%
Unable to Determine	0%	0%	1%	46%	1%	0%	0%	8%	8%	2%	47%	21%	10%	7%	6%	3%	2%	100%	0%

Confirmed - resolved or partially resolved in Complainant's favor.

Not Confirmed - resolved or partially resolved in MCO's favor.

Unable to Determine - not able to confirm if a complaint is confirmed or not confirmed and complaints not related to MCO actions.

Percentages may not add up to 100% due to rounding. Complaint outcomes are discrete and do not overlap.

Count of Complaints by Source: Ombudsman - 745 Complaints, MCS - 679 Complaints, MCO Self-Reported - 6,857 Complaints

HHSC - SFY 2024 Q3

Overall Rate of Complaints per 10,000 Members by MCO and Quarter

2024 Q3		2024 Q2		2024 Q1		2023 Q4		2023 Q3		2023 Q2	
Molina	48.75	BCBS	45.21	Molina	50.43	Molina	59.32	Molina	66.49	Molina	57.37
United	46.15	Molina	42.76	United	43.99	United	37.77	BCBS	30.19	United	30.82
Wellpoint	24.69	United	38.23	BCBS	30.63	BCBS	26.09	United	29.30	BCBS	21.15
BCBS	24.38	Wellpoint	23.29	Wellpoint	19.12	Dell Children's	16.83	Superior	17.80	Dell Children's	15.94
Superior	21.58	Superior	20.05	Superior	18.63	Superior	16.83	Wellpoint	15.63	Wellpoint	14.90
Texas Children's	15.47	Aetna	15.33	Aetna	14.60	Wellpoint	16.64	Dell Children's	12.51	Aetna	14.67
Aetna	15.16	Texas Children's	15.10	Dell Children's	14.60	Texas Children's	14.59	Texas Children's	12.25	Superior	13.94
Scott & White	13.93	Dell Children's	12.45	Texas Children's	12.08	Aetna	10.27	Scott & White	9.85	Texas Children's	12.32
Dell Children's	13.09	Parkland	12.32	Scott & White	10.01	Scott & White	9.58	Aetna	9.37	Scott & White	6.91
Parkland	12.25	Scott & White	12.29	FirstCare	8.62	Parkland	9.28	Parkland	8.88	FirstCare	6.79
FirstCare	8.29	FirstCare	10.47	Driscoll Children's	8.32	FirstCare	7.82	FirstCare	6.93	Driscoll Children's	6.52
Cook Children's	7.03	Driscoll Children's	8.47	Parkland	8.30	Cook Children's	7.14	Cook Children's	6.80	Cook Children's	4.81
Driscoll Children's	6.78	Cook Children's	8.33	Cook Children's	6.25	Driscoll Children's	5.53	Driscoll Children's	5.65	Parkland	4.57
CHC	6.66	CHC	4.93	CHC	4.76	CHC	4.79	El Paso Health	4.22	El Paso Health	4.41
Community First	3.08	El Paso Health	3.60	El Paso Health	3.02	El Paso Health	3.91	CHC	3.78	Community First	3.48
El Paso Health	2.40	Community First	1.99	Community First	2.29	Community First	2.23	Community First	2.56	CHC	3.22
Grand Total	21.19	Grand Total	19.74	Grand Total	18.59	Grand Total	17.42	Grand Total	16.64	Grand Total	15.04

Overall Rate of Complaints per 10,000 Members by DMO and Quarter

2024 Q3		2024 Q2		2024 Q1		2023 Q4		2023 Q3		2023 Q2	
DentaQuest	.96	DentaQuest	1.04	DentaQuest	1.02	DentaQuest	.85	DentaQuest	.70	DentaQuest	.51
United Dental	.23	United Dental	.17	United Dental	.20	United Dental	.36	United Dental	.27	United Dental	.25
MCNA	.25	MCNA	.14	MCNA	.26	MCNA	.29	MCNA	.22	MCNA	.17
Grand Total	.61	Grand Total	.61	Grand Total	.65	Grand Total	.59	Grand Total	.48	Grand Total	.36

Rate of complaints for every 10,000 enrolled members. (Complaint Volume / Total Medicaid Enrollment for SFY 24 Q3) * 10,000 = Complaints per 10,000.
 Count of Complaints by Source: Ombudsman - 745 Complaints, MCS - 679 Complaints, MCO Self-Reported - 6,857 Complaints