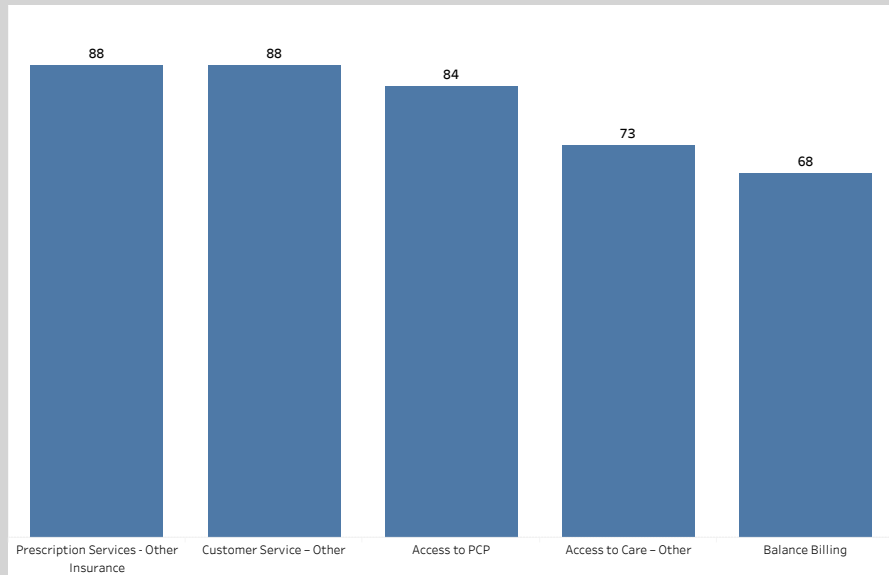


HHSC Initial Contact Complaints - SFY 2024 Q3

Total Resolved Initial Contact Complaints in SFY 2024 Q3: 985

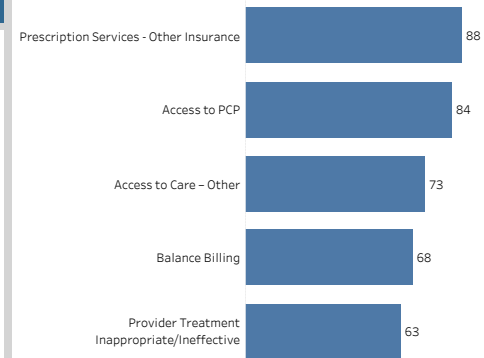
Top 5 Initial Contact Complaints



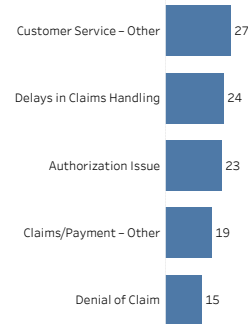
Initial Contact Complaint is defined as any complaint resolved by the business day following the day it was received. Withdrawn and pending complaints, CHIP complaints, and complaints from inactive health plans are excluded from this report. Eighty-five (85) % of total initial contact complaints reported were member complaints.

Data Sources: MCO Self-Reported Complaints extracted 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.

Top 5 Initial Contact Complaints for Members



Top 5 Initial Contact Complaints for Providers



HHSC Initial Contact Complaints - SFY 2024 Q3

Top 5 Initial Contact Complaints by Program per 10,000 Members

MMP	Prescription Services - Other	3.50
	Prescription Services - Clinical Prior Authorization	2.19
	Access to Care - Other	2.19
	Customer Service - Other	1.75
	Correspondence (Incorrect, unclear, or not received)	1.75
STAR Kids	Access to Care - Other	1.06
	Customer Service - Other	.92
	Prescription Services - Other Insurance	.71
	Access to PCP	.56
	Access to DME	.49
	STAR+PLUS	Provider Treatment Inappropriate/Ineffective
Authorization Issue		.23
MCO Customer Service/Staff Behavior		.16
Customer Service - Other		.16
NEMT - Other		.14
STAR	Prescription Services - Other Insurance	.25
	Access to PCP	.21
	Balance Billing	.19
	Customer Service - Other	.16
	Claims/Payment - Other	.14
	STAR Health	Access to Care - Other
Incorrect Information or Guidance from MCO		1.37
MCO Customer Service/Staff Behavior		.91
Disagree with MCO Policy		.91
Provider Information Outdated/Directory		.46
Medicaid Dental	Customer Service - Other	.04
	Incorrect Information or Guidance from MCO	.02
	Claims/Payment - Other	.02
	Value-Added Services Issues	.01
	Provider Treatment Inappropriate/Ineffective	.01

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

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

Average Monthly Medicaid Members by Program for SFY 2024 Q2



Total Average Monthly Medicaid Members for 2024 Q1 (excluding Dental): 4,532,186

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

Percentage of Initial Contact Complaints Confirmed - MCO Self-Reported Data

Resolution	MMP	STAR Kids	STAR+PLUS	STAR	STAR Health	Medicaid Dental
Confirmed	83%	85%	52%	70%	26%	50%
Not Confirmed	11%	13%	10%	22%	16%	5%
Unable to Determine	6%	2%	39%	8%	58%	45%

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

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

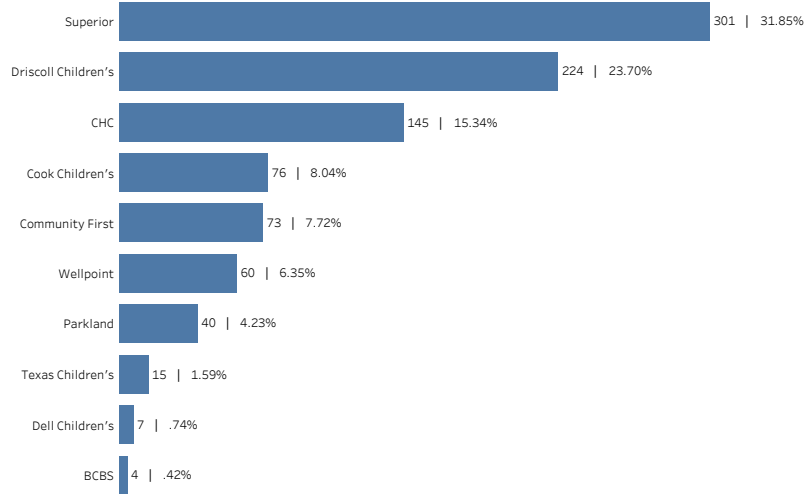
Unable to Determine - not able to confirm if a complaint is confirmed or not confirmed and complaints not related to MCO actions.

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

HHSC Initial Contact Complaints - SFY 2024 Q3

Initial Contact Complaint Volume by MCO

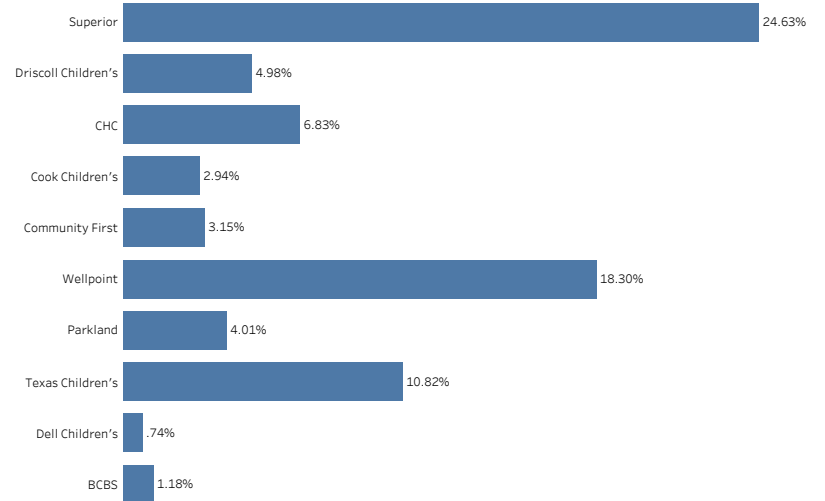
Percentages may not add up to 100% due to rounding.



Total Complaints / Percent of Total Complaints

Total Enrollment by MCO

MCOs/DMOs without initial contact complaints are omitted from this table so percentage may not add up to 100%.



% of Total Enrollment

Initial Contact Complaint Volume by DMO



Total Enrollment by DMO



HHSC Initial Contact Complaints - SFY 2024 Q3

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

BCBS	Prescription Services - Clinical Prior Authorization	.22			MCNA	Customer Service - Other	.05			
	Incorrect Information or Guidance from MCO	.22				Value-Added Services Issues	.03			
	Balance Billing	.22				Parkland	Balance Billing	1.63		
	Access to Out-of-Network Provider	.22					Customer Service - Other	.20		
CHC	Customer Service - Other	.96			Disagree with MCO Policy	.13				
	Authorization Issue	.73			Delays in Claims Handling	.13				
	Access to PCP	.54			Claims/Payment - Other	.13				
	Denial of Claim	.38			Superior	Claims/Payment - Other	.33			
	Delays in Claims Handling	.38				Balance Billing	.32			
Community First	Prescription Services - Other Insurance	4.74				Access to Care - Other	.29			
	Prescription Services - Clinical Prior Authorization	.42				Provider Treatment Inappropriate/Ineffective	.25			
	Prescription Services - Formulary	.33				Access to PCP	.22			
	Prescription Services - Refill Too Soon	.25			Texas Children's	Balance Billing	.12			
	Prescription Services - Other	.08				Delays in Claims Handling	.07			
Cook Children's	Prescription Services - Other Insurance	2.14				Claims/Payment - Other	.05			
	Provider Treatment Inappropriate/Ineffective	1.34				Prescription Services - Other	.02			
	Access to PCP	1.16				NEMT - Other	.02			
	Customer Service - Other	.36			United Dental	Incorrect Information or Guidance from MCO	.14			
	Access to In-Network Provider (non-PCP)	.27				Customer Service - Other	.12			
Dell Children's	Access to PCP	.71				Authorization Issue	.05			
	Prescription Services - Formulary	.35				Claims/Payment - Other	.02			
	Delays in Claims Handling	.35				Access to PCP	.02			
	Authorization Issue	.35			Wellpoint	Prescription Services - Other	.13			
	DentaQuest	Claims/Payment - Other	.04				Access to Care - Other	.11		
Provider Treatment Inappropriate/Ineffective		.02				Prescription Services - Clinical Prior Authorization	.07			
Customer Service - Other		.02				Customer Service - Other	.06			
MCO Staff Not Responding		.01				Correspondence (Incorrect, unclear, or not received)	.06			
MCO Customer Service/Staff Behavior		.01			Driscoll Children's	Access to Care - Other	1.89			
Driscoll Children's	Access to Care - Other	1.89				Access to PCP	1.68			
	Access to PCP	1.68				Customer Service - Other	1.00			
	Customer Service - Other	1.00				Provider Treatment Inappropriate/Ineffective	.74			
	Provider Treatment Inappropriate/Ineffective	.74				Incorrect Information or Guidance from MCO	.68			
	Incorrect Information or Guidance from MCO	.68								

Rate of complaints for every 10,000 enrolled members. (Complaint Volume / Total Medicaid Enrollment for SFY 24 Q3) * 10,000 = Complaints per 10,000.
MCOs/DMOs are sorted in alphabetical order. Ties are sorted in descending order alphabetically.

HHSC Initial Contact Complaints - SFY 2024 Q3

Percentage of Initial Contact Complaints Confirmed - MCO Self-Reported Data

Resolution	BCBS	CHC	Community First	Cook Children's	Dell Children's	DentaQuest	Driscoll Children's	MCNA	Parkland	Superior	Texas Children's	United Dental	Wellpoint
Confirmed	100%	83%	97%	86%	100%	88%	53%	0%	13%	64%	53%	38%	85%
Not Confirmed	0%	15%	0%	5%	0%	13%	44%	0%	15%	10%	33%	0%	13%
Unable to Determine	0%	2%	3%	9%	0%	0%	3%	100%	73%	26%	13%	63%	2%

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 Initial Contact Complaints - SFY 2024 Q3

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

2024 Q3			2024 Q2			2024 Q1			2023 Q4			2023 Q3			2023 Q2		
Driscoll Children's	11.77		BCBS	22.60		BCBS	27.15		BCBS	27.02		BCBS	19.65		BCBS	19.98	
Cook Children's	6.77		Driscoll Children's	14.13		Driscoll Children's	12.90		Driscoll Children's	9.72		Driscoll Children's	10.92		Driscoll Children's	19.34	
Community First	6.07		Cook Children's	9.04		Cook Children's	10.33		Cook Children's	7.62		Cook Children's	9.32		Cook Children's	8.10	
CHC	5.55		Community First	7.14		CHC	7.31		Dell Children's	6.16		Community First	6.83		Superior	5.60	
Superior	3.20		Superior	5.05		Superior	5.87		CHC	4.53		El Paso Health	5.57		El Paso Health	4.61	
Parkland	2.61		CHC	4.97		Community First	5.35		Community First	4.23		CHC	3.49		Community First	4.46	
Dell Children's	2.48		Dell Children's	3.11		Dell Children's	2.53		Superior	3.46		Superior	3.22		CHC	3.74	
BCBS	.89		Parkland	1.89		Parkland	1.24		Parkland	1.89		Parkland	1.47		Parkland	3.71	
Wellpoint	.86		Dell Children's	3.11		Wellpoint	1.03		Wellpoint	1.22		Texas Children's	.90		Dell Children's	1.44	
Texas Children's	.36		Parkland	1.89		Texas Children's	.29		Texas Children's	1.08		Dell Children's	.85		Wellpoint	1.23	
Overall Rate	2.47		Wellpoint	1.30		El Paso Health	.13		El Paso Health	.11		Molina	.17		Texas Children's	.75	
			Texas Children's	1.11		FirstCare	.11		FirstCare	.09		Scott & White	.14		Parkland	.09	
			Overall Rate	3.49		Molina	.08		Molina	.07		United	.09		United	.09	
						Overall Rate	3.68		Overall Rate	2.83		Overall Rate	2.90		Overall Rate	3.77	
No initial contact complaints reported for Aetna, El Paso Health, FirstCare, Molina, Scott & White, or United in SFY 24 Q3.			No initial contact complaints reported for Aetna, El Paso Health, Molina, Scott & White, or United in SFY 24 Q4.			No initial contact complaints reported for Aetna, Scott & White, or United in SFY 24 Q1.			No initial contact complaints reported for Aetna, Scott & White, or United in SFY 23 Q4.			No initial contact complaints reported for Aetna and FirstCare in SFY 23 Q3.			No initial contact complaints reported for Aetna, FirstCare, Molina, or Scott & White in SFY 23 Q2.		

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

United Dental	.37		United Dental	.15		United Dental	.11		United Dental	.06		United Dental	.04		United Dental	.10	
DentaQuest	.11		DentaQuest	.08		DentaQuest	.07		DentaQuest	.05		DentaQuest	.04		DentaQuest	.07	
MCNA	.08		MCNA	.08		MCNA	.07		MCNA	.05		MCNA	.03		MCNA	.02	
Overall Rate	.14		Overall Rate	.09		Overall Rate	.07		Overall Rate	.05		Overall Rate	.04		Overall Rate	.05	

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

*MCO/DMOs with no initial contact complaints for the quarter are not shown but are included in the overall denominator.

The Cigna-HealthSpring Health Plan is inactive as of 12/31/2021.