

Office of the Healthcare Advocate



Office of the
Healthcare
Advocate
STATE OF CONNECTICUT

At a Glance

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Established - 2001

Statutory authority - Conn. Gen. Statutes Sec. 38a-1041 et seq.

Central office - P.O. Box 1543, Hartford, CT 06144,

450 Capitol Avenue, Hartford, CT 06106

Number of employees - 17

Recurring operating expenses - FY 15 budget \$6,872,101

Organizational structure - Central office—includes State Innovation Model Initiative Program Management Office and Connecticut Commission on Health Equity

Mission

OHA is an independent state agency with a three-fold mission: assuring managed care consumers have access to medically necessary healthcare by providing one-to-one assistance with grievances and appeals; educating consumers about their rights and responsibilities under health insurance plans and; informing you and other policymakers of problems consumers are facing in accessing care and proposing solutions to those problems.

Statutory Responsibilities

OHA helps Connecticut residents navigate the healthcare system: through outreach and educational activities on consumer healthcare rights, direct consumer assistance appealing denials of coverage for services by all types of health plans, including individual and employer

plans, TriCare, Medicare and HUSKY coverage, and by advocating for consumers on larger health policy issues through public comment, legislative activity and administrative remedies. OHA's work benefits individual consumers by ensuring access to medically necessary healthcare, relieving consumers of unnecessary out of pocket spending. OHA's policy work benefits consumers as a whole through broad-based collaborative efforts, convening consumers, advocates, providers and health plans to discuss issues related to mental health parity.

OHA is also named by statute to multiple committees, board and working groups, and is responsible for activities under statute including:

- Connecticut Health Insurance Exchange d/b/a Access Health CT – Conn. Gen. Statutes Sec. 38a-1081;
- OHA to accept referrals for complaints and referrals from the Exchange and from Navigators Conn. Gen. Statutes Sec. 38a-1084(19)(D) and 38a-1086;
- All-Payer Claims Database Advisory Group membership - Conn. Gen. Statutes Sec. 19a-724a;
- Connecticut Clearinghouse - Conn. Gen. Statutes Sec. 38a-556;
- Behavioral Health Clearinghouse – Conn. Gen. Statutes Sec. 38a-1041(g);
- Public outreach campaign on health insurance rights – Conn. Gen. Statutes Sec. 38a-472d;
- Grievances and External reviews – notice requirement with OHA contact information Conn. Gen. Statutes Sec. 38a-591a et seq.;
- Observation status – notice requirement with OHA contact information, Conn. Gen. Statutes Sec. 19a-508b;
- Connecticut Commission on Health Equity - Conn. Gen. Statutes Sec. 38a-1051;
- CHOICES reporting on Medicare organizations' reporting - Conn. Gen. Statutes Sec. 17b-427;
- Personal Care Attendant Workforce Council - Conn. Gen. Statutes Sec. 17b-706a;
- Hospital Community Benefits Programs reporting - Conn. Gen. Statutes Sec. 19a-127k;
- Healthcare Cabinet membership and support - Conn. Gen. Statutes Sec. 19a-724;
- Advisory committee on Healthcare Associated Infections – Conn. Gen. Statutes Sec. 19a-490n Connecticut Family Support Council Board of Directors – Conn. Gen. Statutes Sec.17a-219c – to assist families and children with complex healthcare needs
- Health Information Technology Advisory Council – PA 15-146 , Section 25
- Working Group on rising costs of healthcare, including price and healthcare reimbursement variations, PA 15-146, Section 19
- Working Group to Develop recommendations for uniform behavioral health utilization and quality measures data collection PA 15-5 , Special Session, Section 353
- Children's Mental, Emotional, and Behavioral Health Plan Implementation Advisory Board, PA 15-27
- Behavioral Health Partnership Oversight Council – PA 15-242, Section 30

Public Service

OHA continually seeks to identify means to improve its services to consumers and promote effective consumer engagement in healthcare, including collaborative work with other state agencies and community organizations. OHA measures success of its efforts with a variety of methods, including consumer satisfaction through consumer feedback surveys, requests for participation in activities, passage of legislation proposed by and advocated for by OHA, robust data analytics to identify trends, including, but not limited to, appeal success rate, consumer savings, call and case volume, and feedback from community and state agency collaborators. This level of analysis allows OHA to identify areas for improvement, topics of customer concern that may require additional stakeholder and consumer engagement (i.e. the impact of a new law), and then to monitor implementation of any new initiatives.

Improvements/Achievements FY 2014-2015

CASE DATA for FY 15

Savings \$8,526,876.17
758 Outreach Events
7, 926 cases

Case volume and mix:

- Case volume increased from 7,926 cases opened in FY 15 from 7,646 cases opened in FY 14 r.
- OHA opened the highest number of cases (n=3,005) in any quarter of our operations in the fourth quarter of FY 15 (April 1st to June 30th). This surpasses the previous highest number of cases in each of two quarters (3rd and 4th Quarters FY 2014 = 2,594 and 2294, respectively.)
- Personal referrals, referrals from providers and referrals based on denial letters from health plans that contain OHA's contact information, remain the most frequent referral categories. There were 232 cases referred to OHA as part of OHA's collaboration with DCF. .
- Not surprisingly because of the initial enrollment period of Access Health CT and the Medicaid expansion, the predominant issue categories raised by consumers in FY 15 were related enrollment/eligibility (3,296)) and education/counseling (525).

In FY 15, OHA recovered over \$8.3 million for consumers through overturned denials of coverage, resolution of billing disputes and ensuring enrollment into healthcare coverage.

In FY 15, over 94% of consumers reported they would refer a family or friend to OHA.

Outreach/Education:

- OHA staff conducted 758 outreach and education events.
- OHA visited every town hall, introducing our services to mayors, town selectmen, and city managers, social and youth services, health departments/districts,

schools/superintendents, senior centers, social clubs, Boys and Girls clubs, and other advocacy organizations.

- OHA provides information on our services in 23 languages, including Braille. Free materials (handbills, brochures, and posters) are available upon request. OHA established a dedicated e-mail address to handle outreach [requests, OHA.outreach@ct.gov](mailto:OHA.outreach@ct.gov).
- OHA produced and ran English and Spanish language television and radio spots in underserved communities to expand OHA's reach. These spots aired in all areas of Connecticut.
- OHA also increased its social media presence through targeted improvements in its YouTube, Twitter¹ and Facebook² sites.
- The Healthcare Advocate has appeared on radio/television programs to provide information on OHA's services and to discuss the ACA and the SIM.
- OHA also maintains a quarterly newsletter to inform stakeholders of OHA's activities, provide useful tips, and to highlight its collaborations with other agencies and community organizations. See OHA's publications on www.ct.gov/oha, under "Resources."
- OHA collaborated with CT AIDS and the Department of Public Health in outreach efforts to the HIV/AIDS community on coverage under the Affordable Care Act.
- OHA assisted Access Health CT in reaching out to the non-profit community through development of a Healthy Non-Profit Chat series in partnership with Access Health CT and the Governor's Non-Profit Liaison.
- OHA was featured numerous Print/Radio/Television media in FY 15: , *Wall Street Journal*, *Kaiser Health News*, *AP*, *Reuters*, *Hartford Business Journal*, *Hartford Courant*, *CT News Junkie*, *CTMirror*, *Connecticut Health Investigative Team*, *Connecticut Law Tribune*, *New Haven Register*, *Journal Inquirer*, *Norwich Bulletin* , *WNPR*, *WLAT 910AM*, *WNEZ 1230AM*, *WRCH 100.5*, *WZMX*, *New Haven: WYBC*; *Bridgeport: Radio Cumbre*; *Statewide: Comcast Interconnect* (includes *BET*, *FAM*, *Food*, *Lifetime*, *MSNBC*), *Connecticut Radio Network (CRN)*, *WTIC*, *NBC30*, *WTNH*

Stakeholder Collaboration:

OHA partners with the Department of Children and Families (DCF) on a project to maximize utilization of commercial health plan benefits to prevent unnecessary state expenditures.

OHA initiated a project collaborating with the Court Support Services Division of the Connecticut Judicial branch to identify opportunities to maximize utilization of commercial health plan benefits to prevent unnecessary state expenditures.

OHA initiated a project collaborating with the Family Services Division of the Connecticut Judicial branch to review opportunities to maximize utilization of commercial health plan benefits for court ordered behavioral health interventions.

¹ https://twitter.com/State_of_CT_OHA

² <https://www.facebook.com/pages/State-of-Connecticut-Office-of-the-Healthcare-Advocate/301102456997>

OHA partners with the Department of Developmental Services (DDS) on a project to facilitate the referral to OHA of consumers in need of services, with an emphasis on those with Autism Spectrum Disorder (ASD), to maximize utilization of commercial health plan benefits as well as identify alternate resources, where applicable.

OHA partnered with the Connecticut State Comptroller to recruit and train one position to perform clinical reviews of pending applications with the Disability Retirement Unit so that these records would be as complete as possible prior to consideration by the Medical Examining Board, reducing time to resolution for applicants and streamlining internal processes.

OHA furthers its public service commitment by participation or expanded participation in the following activities/groups:

- Healthcare Advocate is Vice-Chair of the Access Health CT Board of Directors and Committees and Advisory Committees:
 - Consumer Advisory Committee (co-chair)
 - Finance Committee
 - Human Resources Committee
 - Strategy Committee
- All Payer Claims Database Advisory Council Committees:
 - Data Privacy & Security committee
 - Policy & Procedures Committee
- Connecticut Partners for Health (CPH) Board of Directors--mission is to align healthcare quality improvement and patient safety initiatives in Connecticut to assure efficient, cost-effective and coordinated efforts among its healthcare providers and stakeholders.”³
- Connecticut Partnership for Patient Safety—founding board member of organization to with a mission to create a culture of patient safety across the healthcare continuum through a statewide collaboration that provides education and consultation
- Children's Behavioral Health implementation plan under PA 13-178 to develop a comprehensive children's behavioral health plan (prior to passage of PA 15-27)
- Connecticut Three Branch Home Team to advance our collective efforts to improve well-being for children across mental health, permanency and housing.
- Department of Public Health Healthy Connecticut 2020 coalition
 - Mental Health and Substance Use Action Team
 - Health Systems Action Team
- Department of Public Health National Standards for Culturally and Linguistically Appropriate Services in Health and Healthcare
- Council on Medical Assistance Program Oversight
 - Complex Care Committee
 - Care Management Committee
- Behavioral Health Partnership Oversight Council
 - Coordination of Care Committee
- CT Strong Grant – State Level Transition Team
- Connecticut Campaign for paid family leave

³ <http://www.ctpartnersforhealth.org/>, accessed on August 20, 2015.

- UConn School of Business Healthcare Management Advisory Board
- Connecticut Choosing Wisely Collaborative – Founding partner—to collectively develop and advance specific goals and projects, and to work to promote the adoption of *Choosing Wisely*® through their own individual efforts to their constituents and partners where appropriate
- Covering Kids and Families Steering committee—led by CT Voices for Children - help local communities increase enrollment in and access to the HUSKY health insurance program for eligible children and parents.
- Covering Kids and Families Quarterly meetings
- State of Connecticut Open Data Portal
- Executive branch state agency LEAN initiative and LEAN Leadership Training Certification
- State Innovation Model (SIM) Initiative Healthcare Innovation Steering Committee,
- National Parity Implementation Coalition – collaboration with state and national partners to monitor implementation of the Mental Health Parity and Addiction Equity Act of 2008, identify non-compliance and advance regulatory or policy change to promote compliance
- Kennedy Forum Parity Legal Working Group - partnership with mental health and addiction advocates, policymakers, and business leaders to identify and promote opportunities to improve access to quality behavioral health services
- Medicare-Medicaid Eligible Individuals Ombudsman Program --in planning—partnership with the Department of Social Services to provide independent advocacy of dually eligible individuals.

1. SIM - State Innovation Model Initiative (SIM) –

- Awarded \$45 Million SIM Model Test Grant from the Centers for Medicare and Medicaid Innovation
- Mark Schaefer, PhD, directs the model test phase of the SIM as the Director of Healthcare Innovation, heading the SIM Project Management Office (SIM PMO), which sits inside OHA for administrative purposes.
- The Healthcare Advocate provides assistance with the SIM:
 - Significant advisory role for SIM PMO
 - Committee membership:
 - Steering Committee
 - Equity and Access Committee
 - Behavioral Health Design group

2. Legislative Activities

OHA testified on 33 and actively tracked 215 bills during the 2015 legislative session; 14 of those bills became law.

- OHA advocated for P.A. 15-5 of the June 2015 Special Session, the 2015 budget implementer, which included key provisions from several bills drafted or championed by OHA, including SB 418, requiring coverage of off-label medications for certain plans;

P.A. 15-226, requiring health plan coverage of a series of behavioral health services; HB 6847, which expanded required coverage of services for autism spectrum disorder; HB 6932, requiring the development of procedures to implement a statewide paid, family leave program;

- P.A. 15-110 – requires ambulance companies to seek payment from a consumer’s health plan prior to billing for services;
- P.A. 15-88 – establishes requirements for the delivery of and payment by insurers for the utilization of telehealth services;
- P.A. 15-146 – is the culmination of a significant healthcare reform initiative stemming from the Bipartisan Hospital Task Force’s inquiry into current issues in healthcare. This Act combines several proposed bills, and enhances consumer notice requirements, increases transparency in healthcare, classifies surprise medical bills as CUPTA violations, imposes limits to facility fees, promotes of a statewide health information exchange, requires a comprehensive study of the trends and basis for healthcare costs, and more.

3. DCF Collaboration

As part of its project with DCF, OHA staff:

- Opened 232 cases under the DCF Voluntary Services Project in FY 15
- Counseled families on their rights under the insurance plans, including the right to appeal denials of coverage
- Educated DCF regional office supervisors, workers about the proper use of primary healthcare coverage to prevent unnecessary state spending
- Met with DCF leadership periodically to refine the project to ensure continuous quality improvement of the project
- Ensured that planning for children who need out of home placement on a temporary basis is done concurrently by a provider and the Connecticut Behavioral Health Partnership
- Conducted internal and external appeals for medically necessary services for all types of healthcare coverage for referred families
- Saved the state and consumers nearly \$1.1 million

4. Other Projects

- OHA continued its collaboration with Court Support Services Division to ensure proper utilization of commercial coverage in the court system and expanded this initiative to include a review of options for court ordered evaluations in the Family Court division.
- OHA continued working with an ad hoc work group to discuss the Explanation of Benefits (EOBs) confidentiality
- Continues to work with the Congressional delegation and stakeholders on federal issues related to protection of consumer healthcare rights, including the Mental Health Parity and Equity Addiction Act (MHPAEA) of 2008, consumer assistance program funding and enforcement of the Affordable Care Act
- OHA negotiated with the Connecticut Insurance Department concerning the health insurance rate review hearing process, culminating in a letter agreement agreeing to up to

four hearings per calendar year when requested by the Healthcare Advocate, for individual, HMO and small group health plan rate increases of at least 10 % or more, and granting the Healthcare Advocate Intervenor status upon request to intervene.

5. Information Reported as Required by State Statute

OHA is required to prepare calendar year report of its activities pursuant to Conn. Gen. Statutes Sec. 38a-1050. This CY report is available at

http://www.ct.gov/oha/lib/oha/documents/publications/oha_2014_annual_report_final_-2.pdf