



MEDI-CAL MANAGED CARE
OFFICE OF THE OMBUDSMAN
OCTOBER - DECEMBER 2017

TABLE 1

Number of Contacts Received by Phone and Email	Oct-17	Percentage	Nov 17	Percentage	Dec-17	Percentage
Phone Call	9,616	95%	8,659	96%	8,411	96%
Emails	498	5%	401	4%	361	4%
Total	10,114	100%	9,060	100%	8,772	100%

TABLE 2

Average Talk Time and Wait Time For Beneficiaries To Answer	Oct-17		Nov 17		Dec-17	
Average Talk Time	9		8		8	
Average Wait Time	6		6		6	

TABLE 3

Spoken Language	Oct-17	Percentage	Nov 17	Percentage	Dec-17	Percentage
English	8,290	86%	7,529	87%	7,378	88%
Spanish	1,123	12%	930	11%	814	10%
Other	203	2%	200	2%	219	3%
Total	9,616	100%	8,659	100%	8,411	100%

TABLE 4

Number and Rate of Calls Abandoned	Oct-17	Percentage	Nov 17	Percentage	Dec-17	Percentage
Total Number of Calls Handled by the Ombudsman	9,616	56%	8,659	55%	8,411	56%
Caller Selected to Transfer To A Different Organization	6,688	39%	6,017	38%	5,620	37%
Abandoned Calls	968	6%	1,016	6%	1,114	7%
Total Number of Calls Placed to Ombudsman	17,272	100%	15,692	100%	15,145	100%



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TABLE 5

Results of Contacts, Including Destination of Referred Calls	Oct-17	Percentage	Nov 17	Percentage	Dec-17	Percentage
Coordination of Care	76	0.8%	77	0.8%	98	1.17%
Education	2,091	21.7%	2,353	25.3%	2,425	28.83%
Enrollment/Disenrollment	5,173	53.6%	4,808	51.6%	4,077	48.47%
Plan Changes	480	5.0%	428	4.6%	385	4.58%
Referrals	1,725	17.9%	1,549	16.6%	1,330	15.81%
No Answer/Left Voicemail	103	1.1%	94	1.0%	96	1.14%
Total	9,648	100.00%	9,309	100.00%	8,411	100.00%

TABLE 6

Number of Calls Referred to Another Entity	Oct-17	Percentage	Nov 17	Percentage	Dec-17	Percentage
Total Ombudsman Calls Handled	9,616	58.98%	8,659	59.00%	8,411	59.95%
Non-Ombudsman Selection Interactive Voice Response (IVR 1-8) Category Selections						
(1) County Offices	4,210	62.95%	3,901	64.83%	3,583	63.75%
(2) Covered California	325	4.86%	255	4.24%	277	4.93%
(3) Health Care Options (HCO)	587	8.78%	452	7.51%	518	9.22%
(4) Denti-Cal	142	2.12%	132	2.19%	112	1.99%
(5) Mental Health	169	2.53%	122	2.03%	131	2.33%
(6) Medicare	374	5.59%	343	5.70%	310	5.52%
(7) State Fair Hearing	121	1.81%	99	1.65%	105	1.87%
(8) Medi-Cal Fee-For-Service	760	11.36%	713	11.85%	584	10.39%
Total	6,688	41.02%	6,017	41.00%	5,620	40.05%
Total Calls	16,304	100.00%	14,676	100.00%	14,031	100.00%



**MEDI-CAL MANAGED CARE
OFFICE OF THE OMBUDSMAN
DEFINITION OF TABLES**

	Definition	
Table 1	This data represents the number of live calls and emails that the Office of the Ombudsman (OMB) received and assisted beneficiaries with.	
Table 2	This data represents the average time OMB spent on the phone assisting beneficiaries, and the average length of time a beneficiary was on hold to speak to a live agent.	
Table 3	This data represents the calls that were sorted through the Interactive Voice Response (IVR) system into three categories: English, Spanish and Other Language. Beneficiaries choose the language they prefer to speak with the OMB agent in. For those calls in the Other category the OMB agent utilizes the language assistance line to better assist the beneficiary.	
Table 4	This data represents the number of calls handled by the OMB agent, the number of calls where the beneficiary selected to transfer to a different organization (see Table 6), and the number of calls that were in queue but the caller chose to end the call before any conversation occurred.	
Table 5	This data represents the reasons beneficiaries contact the OMB Call Center. This is the initial reason for the call into the Call Center, though each call could result in multiple issues being addressed.	
	Initial Reason For Call	
	<i>Coordination of Care</i>	<i>Represents the number of beneficiaries in need of assistance with navigating Managed Care Plan (MCP) benefits or services.</i>
	<i>Education</i>	<i>Represents the number of calls involving the need for assistance or education on the beneficiary's next steps on various subjects, including access care.</i>
	<i>Enrollment / Disenrollment</i>	<i>Represents the number of calls received from beneficiaries in need of assistance with current month MCP enrollments or disenrollment.</i>
	<i>Plan Changes</i>	<i>Represents the number of calls received from beneficiaries in need of assistance changing from one MCP to another.</i>
	<i>Referrals</i>	<i>Represents the number of beneficiaries who were referred to a more appropriate Department/Unit for assistance.</i>
	<i>No Answer / Left Voicemail</i>	<i>Represents the number of callers who requested a call back but were unable to answer the phone at the callback time. OMB agents leave a message whenever there is a voicemail or answering machine available identifying that the call was returned and the phone number for OMB if assistance is still required.</i>



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Table 6	This data represents the eight (8) self-service IVR options available to the beneficiaries. There is a ninth (9) option (not shown) which will transfer the caller to an OMB agent. Each self-service option has information on each department and offers both the phone number and to transfer the call through the beneficiary's selected option for service.
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