



COMMONWEALTH of VIRGINIA

Department of Medical Assistance Services

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January 26, 2022

Tameeka L. Smith
Chief Executive Officer, Virginia Community & State
United Healthcare Community Plan of Virginia
9020 Stony Point Parkway, Suite 400
Richmond, VA 23235

Re: Commonwealth Coordinated Care Plus (CCC Plus) – Corrective Action Plan (CAP) – UHC agent call to Maximus – Case ID # 20127

Dear Ms. Smith,

The Department of Medical Assistance Services (DMAS) continually monitors compliance with the Commonwealth Coordinated Care Plus (CCC Plus) Contract. As part of this process, DMAS is particularly sensitive to the vulnerability of the CCC Plus population and the assurance that Members' rights and protections are respected and maintained. Section 11.3 of the CCC Plus contract provides details regarding each of these including a Member's right to participate in decisions regarding his or her health care. This includes during contact with call centers, Member services, and the Enrollment Broker (Maximus).

In March 2021, it was identified that representatives associated with United Healthcare (UHC) were contacting Maximus to assist members in changing their Medicaid CCC Plus plan to UHC to align with their UHC Dual Special Needs Plan (DSNP). A second occurrence was identified in April 2021. These representatives were heard responding to questions directed at members and refusing to disconnect from the call. As a result, DMAS had conversations with you and UHC staff to discuss the role of the independent Enrollment Broker and the need to ensure members understand the request being made and are making their own decisions. UHC expressed understanding and implemented strategies to ensure individuals representing UHC would assist members in changing plans at the member's request by connecting the member with Maximus via a warm transfer and disconnect the call. UHC committed to conducting training with all representatives, drafting new scripts to improve the process for Members, and updating protocols.

Case ID # 20127

On October 27, 2021, a call was placed to Maximus. An individual who identified herself as a UHC agent remained on the line after a different UHC representative disconnected and requested a Member's CCC Plus plan be changed to UHC. The Maximus customer services representative informed the UHC representative that she could not be on the call and would need to disconnect so Maximus could speak with the Member. The UHC representative used profanity and ended the call without allowing the Member to participate in the call or be provided any services.

Section 11.1.4 clearly states that UHC is responsible for implementing protocols "to ensure calls to the Member services information line that should be transferred/referred to other Contractor staff, including but not limited to a Member services supervisor, a Care Coordinator, or to an external entity (including but not limited to the F/EA) are transferred/referred appropriately." The call was not transferred according to protocols and the Member was disconnected by the individual claiming to be a UHC agent.

DMAS Executive Leadership held a call with you and other UHC leadership team members on December 2, 2021 to discuss these concerns. You informed DMAS that the individual was an independent contractor and measures had been taken to ensure she will not interact with UHC members in the future. While DMAS appreciates the steps you have taken towards the issue, because this is the third incident involving similar circumstances, DMAS is requesting a more global response.

DMAS expects a response to this issue no later than February 25, 2022. UHC shall conduct a thorough review into the incidents mentioned in this letter that occurred in March, April, and October of 2021, and provide a summary of the events and actions you will be taking to prevent future occurrences. This report must include: 1) an assessment of what actions/improvements have been implemented to determine the root cause of what may have led to a reoccurrence and 2) a practicable project plan to ensure incidents such as this do not occur again. This plan must specifically address additional strategies that UHC will take to ensure all individuals representing UHC, including employees and contractors/agents, adhere to the requirements within the CCC Plus contract. DMAS will need a specific training plan, identifying the dates training has been or will be provided, the target audience, and the expected or actual number of attendees. Additionally, the plan must include UHC's quality monitoring activities to ensure protocols are followed. The plan for these quality activities must identify the methodology by which UHC will determine sampling and the strategies being employed to confirm requirements were met.

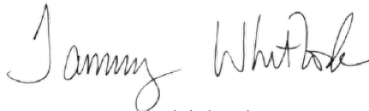
UHC will be issued a 5 point violation pursuant to Section 18.2.3.2 of the CCC Plus contract. Assessment of these points are pending. If you have additional information and/or documentation that will affect this determination, please provide this information to Jason A. Rachel, Ph.D., Division Director, within 15 calendar days from the date of this letter ("Comment Period"). Point violations will be finalized upon the expiration of the Comment Period. After this time, no additional communication will be provided by DMAS regarding the point issuance.

While DMAS appreciates that UHC has addressed each issue as they have arisen, since this is the third occurrence, DMAS is prepared to suspend enrollment and marketing activities for

UHC's CCC Plus plan if further incidents are identified. Failure to come into compliance may result in other additional compliance actions as well.

If you have any questions regarding these concerns, contract standards or CAP requirements, please contact the CCC Plus Compliance Team at cccpluscompliance@dmas.virginia.gov. Please sign, date, and return acknowledging receipt to cccpluscompliance@dmas.virginia.gov no later than 15 calendar days from the date of this letter.

Sincerely,

A handwritten signature in cursive script that reads "Tammy Whitlock".

Tammy Whitlock, MSHA
Deputy Director of Complex Care and Services

Exhibit 1 – UHC – 2021 Point Schedule

<u>MCO</u>	<u>Area(s) of Violation</u>	<u>Previous Balance</u>	<u>Point(s) Expired</u>	<u>Point(s) Incurred</u>	<u>Current Balance</u>	<u>Sanctions pursuant to 18.2.2</u>
United Healthcare Community Plan of VA	11.1.4 11.3 18.2.3.2	30	0	5	35	\$10,000.00

Acknowledge agreement via signature below to address the issue regarding Members' rights and protections and call center protocols detailed in this compliance action (Case ID # 20127).

Tameeka Smith / Date