



Participant Advisory Committee/LC
September 30, 2020

Internal Attendance Record (Quorum, if applicable = [# needed or NA]
 (X = phone conference, P = in person attendance)

Sept	PHW Staff/Observers	Title
X	Greg Hershberger	Community Outreach Specialist - Chairperson
X	Marci Kramer	Director, Quality Improvement
	Jim Amato	Supervisor of Resolutions/Supervisor for Transportation
	Melinda Clesca	Envolve Dental
	Linzi Driver	Envolve Dental PA Contract Manager
X	Shirley A. Stahler	Quality Improvement Specialist I
	Vicki Durkin	Director, Grievance & Appeals
	Heather Eilert	Manager, HEDIS Operations (Non-Clinical)
	Mollie Lewis	Provider Engagement Communications & Training Specialist
	Angela F. Lucente-Prokop	Vice President – Operations
	Gary Law	Manager, Operations
	Jessica Muldowney	Manager, Operations Medicare
	Julia Prine	HEDIS Coordinator
	Olivia Martin	Director, Service Coordination
	Lauren Mujic	Manager, Provider Relations
	Rachel Donington	Community Outreach Specialist
	Robena Spangler	Community Advocate
	Malik Haynes	Director, Quality Program Strategy
	Kay Gore	Manager, Community Relations & Outreach
Sept	ADHOC	Title



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External Attendance Record

(X = phone conference, P = in person attendance)

Sept	Name	Title
	RAB	LTSS
	PEB	LTSS
X	KCY	ALLWELL
X	KC	LTSS
	JJ	LTSS

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Agenda Item	Discussion	Decision (Approved or Denied)	Follow-up Action Needed (Date)	Responsible Party
I. Call to Order	Greg Hershberger called the meeting to order at 2:10 PM.	N/A	N/A	Greg Hershberger
II. Announcements +	Roll call was conducted.	N/A	N/A	Greg Hershberger
III. Review/Approval of the Minutes *	This was the first meeting for the Lehigh Capital Region.	N/A	N/A	N/A
V. New Business A. Overview of the PAC	<p>Greg Hershberger, Community Outreach Specialist, informed the Participants that this meeting is going to be an orientation. He explained that we usually meet in person but with the circumstances now, we have to meet virtually. Our December meeting will be virtual also.</p> <p>He told them that the goal of the meeting is to make sure that we get their input into the quality management program based on their experiences. We also want to get your perspective on the quality of care and services offered by PHW.</p> <p>He informed the Participants that we review the satisfaction surveys, Member Services review, and we provide education material. We want to hear what we can do better and they will be the voice of other Participants as well.</p> <p>Greg explained that they are part of what we call the Lehigh Capital Region but we have four other regions so we hear what is going on in each region. We typically have behavioral health,</p>	N/A	N/A	N/A

+Informational or Old Business

*Action Required

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<p>B. Assessment of Healthcare Providers & Systems (CAHPS) Survey</p>	<p>physical health, and dental representatives on the meeting as well. We also have PHW staff from different departments represented in this meeting. The committee will be 60% Participants and out of those Participants, 25% will be LTSS.</p> <p>KCY informed all that he received a letter telling him that he can get his false teeth and someone from PHW helped to find a dentist for him that is close. He takes the Medical transport and sometimes he needs to give them a call to make sure they pick him up. Greg informed them that transportation will be in the December meeting. At that time they can discuss their transportation issues.</p> <p>Greg gave the Participants a rundown of the agenda items that will be discussed in the quarterly meetings. He also told them that Marci Kramer, Director of Quality Improvement, will discuss quality improvement. We will discuss any issues or questions the Participants may have.</p> <p>Marci explained that one of the things we are required to do annually is a customer satisfaction survey. This is called CAHPS, which stands for Consumer Assessment of Healthcare Providers and systems.</p> <p>The reason we do these surveys is because we want the Participants feedback. We are also required to do them by contract with the State Medicaid Agency, and it helps us to determine where we are doing well and where we need to make</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>

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<p>C. Complaints & Grievances 2nd Quarter Results</p>	<p>improvements.</p> <p>She informed them that there are several categories that are collected. We look at getting care quickly, which would be ease of getting appointments with your PCP or specialist. It is also getting the needed care as soon as you need it. Another thing we look at is how satisfied you are with the Customer Service Department.</p> <p>We also want to know how well your doctors communicate with you. We ask you to rate your overall health care from Pa Health and Wellness as well as your PCP and specialist if you have one. Finally, we want you to rate the health plan overall.</p> <p>We will look at the areas we did well but more important, we will look at the areas we did not do well. We will come to the Participants and ask for suggestions on how we can improve.</p> <p>Another survey we do is the home and community based service CAHPS. This survey is more specific to folds in the community getting home and community based services. This survey is scheduled for late in the fall and is done by mail and phone. This will be discussed further in the December meeting.</p> <p>Marci told the Participants that we will bring complaints and grievances data to them on a quarterly basis. We are always a quarter behind with the statistics.</p> <p>In the other regions the major complaints and grievances category</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>

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<p>D. Customer Service Report Q2</p>	<p>is access and availability. The majority of the complaints are lack of providers, wait times which could be the length of time it takes to get an appointment or the wait time once you are in the office for your appointment.</p> <p>Other categories under access and availability is non-emergency medical transport, non-medical transport, and communication barriers which could be not having a doctor that speaks your language if your primary language is not English and also any other communication issues between the Participants and the office staff.</p> <p>KC told Marci that he already has a grievance in. Marci told him that one of the things we can do is help him get set up with his service coordinator to help navigate through the system. We know that some things are just not running as smooth as we would hope.</p> <p>Marci said that this would be their opportunity to help us identify those processes that need work on. We take the information back to the department and it could just be a training issue with the customer service staff not knowing how to process the call or where to transfer it. The only way we will know is by getting feedback from the Participants.</p> <p>Marci presented the customer service report for quarter 2. She explained that we will report this on a quarterly basis. We report on the average speed to answer which is the time you get</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>

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	<p>connected until the time you reach a live agent. The speed of answer is to be less than 30 seconds. Across all of the regions we have met that goal at a rate of 93%.</p> <p>We look at the abandonment rate which is any call that was dropped. An example would be if you felt you were on hold too long and you hung up. The lower the rate for this is better. We want the rate to be less than 5%. Year to date we are coming in at 1.71% so we are well below the benchmark. These calls are the same across all regions because we are unable to separate the calls by zip code. We will give you the information every quarter.</p>			
VII. Next Meeting Date +	TBD	N/A	N/A	N/A
VIII. Adjournment *	Greg adjourned the meeting at 2:34 PM.	Adjourned	N/A	N/A

Respectively submitted,

Minutes prepared by (name & title): Shirley A. Stahler, Quality Improvement Specialist I	Signature:	Date: 10/8/20
Minutes approved by (name & title):	Signature:	Date: