

**December 8, 2020** 

#### Internal Attendance Record (Quorum, if applicable = [# needed or NA]

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

Sept	Dec	PHW Staff/Observers	Title
Χ	Χ	Greg Hershberger	Community Outreach Specialist - Chairperson
Χ	Χ	Marci Kramer	Director, Quality Improvement
	Χ	Jim Amato	Supervisor of Resolutions/Supervisor for Transportation
	Χ	Melinda Clesca	Envolve Dental
Χ	Χ	Shirley A. Stahler	Quality Improvement Specialist I
	Χ	Heather Eilert	Manager, HEDIS Operations (Non-Clinical)
	Χ	Mollie Lewis	Provider Engagement Communications & Training Specialist
	Х	Gary Law	Manager, Operations
	Χ	Tanika Taylor	Director of Operations
	Χ	Jay Pagni	Senior Director, External Relations – Complaints and Grievances
	Х	Auren Weinberg, MD	Chief Medical Officer

#### External Attendance Record

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

Sept	Dec	Name	Title
Χ	Х	CC	LTSS Participant
Χ		JW	LTSS Participant
Χ	Х	TS	LTSS Participant
		DH	LTSS Participant
Χ	Χ	MG	LTSS Participant
	Х	JR	LTSS Participant



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Agenda Item	Discussion	Decision (Approve d or Denied)	Follow-up Action Needed (Date)	Responsible Party
I. Call to Order	Greg Hershberger called the meeting to order at 2:05 PM.	N/A	N/A	Greg Hershberger
II. Announcements +	Greg conducted the roll call.	N/A	N/A	Greg Hershberger
III. Old Business  A. Review/Approval  of the Minutes *	Meeting minutes were accepted without any changes.	Accepted	N/A	N/A
<b>B.</b> Transportation Updates	Jim Amato, Supervisor for Transportation, gave an update on transportation. He told the Participants that this was an unusual year and transportation handled rides to the best of their ability. He informed them that MATP was not providing rides for everything because of COVID 19.  He told them that they are working with the transportation provider to try to streamline the process. He said that if the ride is for a medical appointment they should utilize MATP first. If MATP cannot accommodate the Participant then MTM should be contacted.  PHW is able to help Participants book rides with the MATP service if needed.	N/A	N/A	N/A
IV. New Business  A. Complaints & Grievances (C&G) 3 <sup>rd</sup>	Jay Pagni, Senior Director, External Relations – Complaints and Grievances, presented the results of the Complaints and Grievances for 3 <sup>rd</sup> Quarter. He informed the committee that			

<sup>+</sup>Informational or Old Business



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<b>Discussion</b> the level of activity is high working through during COVID 19.	Decision (Approve d or Denied)	Follow-up Action Needed (Date)	Responsible Party
<ul> <li>He told the committee that there was an increase in C &amp; G filed. This is attributed to three factors: <ul> <li>The Northeast was a new program for the year</li> <li>Continuity of Care was in place but ended at the end of June</li> <li>They were not allowed to revise care plans until the end of June</li> </ul> </li> <li>The Access and Availability (A&amp;A) category had the highest number of complaints filed. This category includes complaints filed due to a reduction in services or access to a provider. Quality of Care (QOC) complaints are about receiving of care or issues with the site. Attitude and Service are complaints about the staff or the service that was provided.</li> <li>For the third quarter (Q3) there were 11 complaints in the Access and Availability category. For all three quarters combined, 90% of all complaints fell into the A&amp;A category.</li> </ul>			
TS informed Jay that she filed a grievance before she went into the hospital for COVID 19 and she has not heard anything. Jay asked Greg to give him her information so he could follow up with her.  Jay informed the committee that A&A was the category with	N/A	Give Jay Pagni information for Tina so he can follow up with her on grievance.	Greg Hershberger
T n fi C o a F A c C T ir a c C	<ul> <li>The Northeast was a new program for the year</li> <li>Continuity of Care was in place but ended at the end of June</li> <li>They were not allowed to revise care plans until the end of June</li> <li>the Access and Availability (A&amp;A) category had the highest umber of complaints filed. This category includes complaints led due to a reduction in services or access to a provider. Quality of Care (QOC) complaints are about receiving of care r issues with the site. Attitude and Service are complaints bout the staff or the service that was provided.</li> <li>or the third quarter (Q3) there were 11 complaints in the ccess and Availability category. For all three quarters ombined, 90% of all complaints fell into the A&amp;A category.</li> <li>S informed Jay that she filed a grievance before she went not the hospital for COVID 19 and she has not heard nything. Jay asked Greg to give him her information so he ould follow up with her.</li> </ul>	<ul> <li>The Northeast was a new program for the year</li> <li>Continuity of Care was in place but ended at the end of June</li> <li>They were not allowed to revise care plans until the end of June</li> <li>he Access and Availability (A&amp;A) category had the highest umber of complaints filed. This category includes complaints led due to a reduction in services or access to a provider. Quality of Care (QOC) complaints are about receiving of care rissues with the site. Attitude and Service are complaints bout the staff or the service that was provided.</li> <li>or the third quarter (Q3) there were 11 complaints in the ccess and Availability category. For all three quarters ombined, 90% of all complaints fell into the A&amp;A category.</li> <li>S informed Jay that she filed a grievance before she went not the hospital for COVID 19 and she has not heard nything. Jay asked Greg to give him her information so he ould follow up with her.</li> <li>Ay informed the committee that A&amp;A was the category with</li> </ul>	led. This is attributed to three factors:  The Northeast was a new program for the year  Continuity of Care was in place but ended at the end of June  They were not allowed to revise care plans until the end of June  he Access and Availability (A&A) category had the highest umber of complaints filed. This category includes complaints led due to a reduction in services or access to a provider. tuality of Care (QOC) complaints are about receiving of care rissues with the site. Attitude and Service are complaints bout the staff or the service that was provided.  or the third quarter (Q3) there were 11 complaints in the ccess and Availability category. For all three quarters ombined, 90% of all complaints fell into the A&A category.  Sinformed Jay that she filed a grievance before she went to the hospital for COVID 19 and she has not heard nything. Jay asked Greg to give him her information so he ould follow up with her.  By informed the committee that A&A was the category with



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	The A&A category had the highest volume of grievances for all three quarters in 2020 with 98.6% of the total grievance volume.	Denied)		
	MG and CC asked Jay Pagni about the status of their grievances. Greg Hershberger will provide Jay with their information so he can follow-up.	N/A	Provide Jay with Participants' contact information to follow-up.	Greg Hershberger
B. Customer Service Report 3 <sup>rd</sup> Quarter	Gary Law, Manager Operations, presented the third quarter Customer Service results. He explained that they had over 51,000 Participant calls. The average speed of answer was 16 seconds, which is 88% of calls, were answered within the goal of 30 seconds. The goal was met.	N/A	N/A	N/A
	The abandoned rate was 3.25% with a goal of less than 5%. This goal was also met.			
	In the third quarter, they answered over 26,000 calls from providers. The average speed to answer was 17 seconds, which is 89%, were answered within 30 seconds. This goal was met.			
	The abandoned rate was 3.08% with a goal of less than 5%. This goal was also met.			
	Gary explained that there was an uptick for Quarter three because there was a call routing failure for 2 ½ to 3 days. Calls			

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C. Provider Training Topics for 2021	were dropped so the Participant had to call back.  Mollie Lewis, Provider Engagement Communications and Training Specialist, asked the Participants if they had any suggestions for trainings to the provider for 2021. Some of the trainings that have been completed in 2020 were Compliance, Cultural Competency, Dementia, Administrative Processes, Behavioral Health 101, Provider communicating with patients (this will be offered two times in 2021), COVID Training, and Behavioral Health and Physical Health.  A suggestion was made to train physical health providers on	N/A	N/A	N/A
V. Next Meeting Date +	how to identify mental health problems such as depression during their visits.  Next meeting will be in March 2021 – exact date and time to be determined. The 2021 meeting schedule will be distributed with the Q1 2021 meeting packet.	N/A	N/A	N/A
VI. Adjournment *	Greg adjourned the meeting at 2:41 PM.	Adjourned	N/A	N/A

#### Respectively submitted,

Minutes prepared by (name & title):	Signature:	Date:
Shirley A. Stahler, Quality Improvement Specialist I		12/11/20
Minutes approved by (name & title):	Signature:	Date: