



Participant Advisory Committee/SW
September 8, 2020

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

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

Mar	Jun	Sept	PHW Staff/Observers	Title
P	X	X	Greg Hershberger	Community Outreach Specialist, Committee Chairperson
P	X	X	Marci Kramer	Director, Quality Improvement
P			Jim Amato	Supervisor of Resolutions/Supervisor for Transportation
X	X	X	Shirley A. Stahler	Quality Improvement Specialist I
X	X		Vicki Durkin	Director, Grievance & Appeals
P			Tanika Taylor	Director, Operations
P	X	X	Heather Eilert	Manager, HEDIS Operations (Non-Clinical)
X			Mollie Lewis	Provider Engagement Communications & Training Specialist
X		X	Jessica Muldowney	Manager, Operations Medicare
P			Crystal Martin	Supervisor of Rapid Response Team
	X		Olivia Martin	Director, Service Coordination
	X		Felicia Alexander	Community Outreach Specialist
	X	X	Gary Law	Manager, Operations
	X		Julia Prine	HEDIS Coordinator
		X	Laurie Moraca	HEDIS Coordinator
		X	Rebecca Nissley	Grievance & Appeals Coordinator II
		X	Linzi Driver	Involve Vision Account Manager
		X	Dr. Auren Weinberg	Chief Medical Director
		X	Malik Haynes	Director, Quality Program Strategy
		X	Heather Eilert	

External Attendance Record

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

+Informational or Old Business

*Action Required



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Mar	Jun	Sept	Community Observers	Title/Program
			Brenda Dare	Community Partner
Mar	Jun	Sept	Name	Title
X	X	X	MM	LTSS Participant
P	X	X	KK	LTSS Participant
P	X	X	GL	Participant
P	X	X	PL	LTSS Participant
P	X	X	LA	LTSS Participant
	X	X	CJ	Participant
P			CJO	TRIPIL
			LB	Participant
			AH	BH Provider
			MC	Involve Dental
P	X	X	SM	Service Access and Management
			MS	PH Provider
P	X		MP	CEO from Service Coordination Unlimited
P			JP	Service Access and Management

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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 10:08 AM.	N/A	N/A	Greg Hershberger
II. Announcements +	Roll call was conducted.	N/A	N/A	Greg Hershberger
III. Review/Approval of the Minutes *	Greg Hershberger requested a motion to approve the meeting minutes from June 9, 2020. PF made the motion to approve the minutes and MM seconded the motion.	Approved as written	N/A	All
IV. New Business + A. CAHPS Survey Results	<p>Malik Haynes, Director of Quality Program Strategy, presented the results for the Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey for the Medicaid program. He explained that this is an annual survey sent to an anonymous group of Participants that asks about their experiences with health plans and related programs.</p> <p>The information is used to improve the Participant experience, for accreditation for our CMS Stars measure, and for our Quality Rating System (QRS). The survey is comprised of about 50 questions and they are grouped into eight measures that the healthplan is scored on.</p> <p>The first group is Getting Care Quickly which assesses the ease of getting an appointment with a specialist. It also assesses getting the care, tests or treatment they need through their health plan.</p> <p>The second group is Getting Needed Care. This is to assess how often they got care as soon as needed when sick or injured. It</p>	N/A	N/A	N/A

+Informational or Old Business
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	<p>also assesses if they got non-urgent appointments as soon as needed.</p> <p>The third group is the Plans Customer Service. This is to find out how often the plan’s Customer Service explained things clearly, listened carefully, showed respect, and spent enough time with the Participant.</p> <p>The fourth group is How Well Doctors Communicate. This is to determine how often the Participants personal doctor explained things clearly, listened carefully, showed respect, and spent enough time with them.</p> <p>The fifth group is Rating of Health Care. The Participant is given several ratings on a scale of 0 to 10. With 0 being the worst and 10 being the best.</p> <p>The sixth group is Rating their Personal Doctor. The Participant is again given several ratings on a scale of 0 to 10. With 0 being the worst and 10 being the best.</p> <p>The seventh group is Rating of Specialists. The Participant is again given several ratings on a scale of 0 to 10. With 0 being the worst and 10 being the best.</p> <p>The eighth and last group is Rating the Health Plan. The Participant is again given several ratings on a scale of 0 to 10. With 0 being the worst and 10 being the best.</p>			

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<p>B. Complaints & Grievances 2nd Quarter Results</p>	<p>He presented the findings for the survey. For the Participants who have our Medicaid but another plans Medicare (Non-Aligned), we scored high for all questions.</p> <p>For the Participants who have both our Medicaid and Medicare (Aligned), we scored low. It was determined that we need to understand the higher scores of Non-Aligned Duals. Determine why Participants are not getting the needed care, determine why the doctors are not communicating well with the Participants, improve on the Customer Service, and determine why the rating of health care is low.</p> <p>The strategy is to present the findings to leadership, continue working with a Workgroup that is comprised of different stakeholders, and get Participant and provider feedback.</p> <p>Rebecca Nissley, Grievance & Appeals Coordinator II, presented the results for the 2nd quarter of 2020 Complaints and Grievances. She explained that the complaints for the 2nd quarter were reduced. This is being attributed to some of the transportation issues that have been corrected.</p> <p>She explained that Access and Availability consists of several issues. The issues are lack of providers, wait times, non-emergency medical transportation, non-medical transportation, and communication barriers with provider staff or with the health plan.</p>	<p>N/A</p>	<p>N/A</p>	<p>N/A</p>

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<p>C. Customer Service Report Q2</p>	<p>A grievance is started when a Member disagrees with a denial for services. For grievances, the Access & Availability is at 89. These include the personal assistance services, pharmacy, home adaptation, durable medical equipment not related to dental and dental.</p> <p>A breakdown of the grievances for 2020 shows that the personal assistance services is number one with 93 grievances. Pharmacy is second with 67 grievances.</p> <p>The transportation issues have been lower due to COVID 19. There were several issues related to transportation and Jim Amato, who handles transportation was unable to be at this meeting. Greg Hershberger said he will try to get Jim on the next meeting in December.</p> <p>Gary Law, Manager of Operations, presented the second quarter Customer Service report. He informed the committee that they took over 44,000 calls on the Participant line with the average speed of answer of 13 seconds. There were 93 % of the calls answered within 30 seconds or less. The goal is 85% so this goal was met. The abandoned rate was 2.24% with a goal of 5%. This goal was also met.</p> <p>Customer Service took just under 26,000 provider calls in the second quarter. The average speed of answer was 13 seconds. There was 94% of the calls answered within 30 seconds or less. The goal is 85%, which met the goal. The abandoned rate was</p>			

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	<p>1.88% with a goal of 5%. This goal was also met.</p> <p>GL informed PHW that she still has people calling her to remind her that her colonoscopy is due. She has been asking for 2 ½ years to have the reminder stopped but she is still getting the calls. She asked how she could get that stopped.</p> <p>Gary informed her that they are working with the IT partners to assure that when someone wants opted out that they are taken out of the system. It works in most cases but there are issues in other cases. They continue to work on this issue and are hoping to get this resolved.</p>	N/A	Continue working with IT to get the opted out issue resolved so people who want opted out of calls will be.	Gary Law
VII. Next Meeting Date +	December 8, 2020 @ 10:00 am.	N/A	N/A	N/A
VIII. Adjournment *	Greg adjourned the meeting at 10:43 pm.	Adjourned	N/A	N/A

Respectively submitted,

Minutes prepared by (name & title): Shirley A. Stahler, Quality Improvement Specialist I	Signature:	Date: 9/9/20
Minutes approved by (name & title):	Signature:	Date: