



Participant Advisory Committee/LC
December 9, 2020

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

Sept	Dec	PHW Staff/Observers	Title
X	X	Greg Hershberger	Community Outreach Specialist - Chairperson
X	X	Marci Kramer	Director, Quality Improvement
	X	Jim Amato	Supervisor of Resolutions/Supervisor for Transportation
	X	Melinda Clesca	Envolve Dental
X	X	Shirley A. Stahler	Quality Improvement Specialist I
	X	Heather Eilert	Manager, HEDIS Operations (Non-Clinical)
	X	Mollie Lewis	Provider Engagement Communications & Training Specialist
	X	Gary Law	Manager, Operations
	X	Robena Spangler	Community Advocate
	X	Kay Gore	Manager, Community Relations & Outreach
	X	Auren Weinberg, MD	Chief Medical Officer

External Attendance Record
 (X = phone conference, P = in person attendance)

Sept	Dec	Name	Title
	X	RB	LTSS Participant
		PB	LTSS Participant
X	X	KY	LTSS Participant
X	X	KC	LTSS Participant
		JJ	LTSS Participant

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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 10:45 AM.	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 * B. Transportation Updates	<p>Meeting minutes were accepted without any changes.</p> <p>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.</p> <p>He told them that they are working with the transportation provider to try to streamline the process. He said that if the Participant is 65 or older and needs transport 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 schedule with the MATP service if needed.</p>	Accepted	N/A	N/A
IV. New Business A. Complaints & Grievances 3 rd Quarter Results	<p>Marci Kramer, Director of QI, presented the complaints and grievances results for the third quarter. She informed the Participants that Jay Pagni is providing oversight of the Complaints & Grievances (C&G) Department.</p>	N/A	N/A	N/A

+Informational or Old Business

*Action Required

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<p>B. Customer Service Report 3rd Quarter</p>	<p>Marci stated that out of the five NCQA complaint categories, Access and Availability has the most complaints in the 3rd quarter. Additionally, for all three quarters of 2020, for all five regions of PA, Access and Availability (A&A) was the category with the most complaints. Attitude and Service was the second highest, with Billing and Financial as the third highest. Access and Availability is also the top grievance for the 3rd quarter.</p> <p>Marci described the Quality of Care (QOC) process and how QOC grievances are investigated and reported. This review process may include the use of the Peer Review Subcommittee of the Quality Management Committee.</p> <p>The Lehigh Capitol Region had 208 grievances in the A&A category in the 3rd quarter. There were 1337 grievances across all regions for the 3rd quarter. This made up 99.8% of the total grievances for the quarter.</p> <p>KY said that he had shots that were denied. He did not file a grievance. KC stated that he has filed a grievance and has not received a response. Greg will collect all of the Participants' information and forward to Jay Pagni.</p> <p>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</p>	<p>N/A</p> <p>N/A</p>	<p>Provide Jay with KY and KC's information so he can follow-up.</p> <p>N/A</p>	<p>Greg Hershberger & Jay Pagni</p> <p>N/A</p>

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C. Provider Training Topics for 2021	<p>seconds, which is 88% of calls, were answered within the goal of 30 seconds. The goal was met. The abandoned rate was 3.25% with a goal of less than 5%. This goal was also met.</p> <p>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.</p> <p>Gary explained that there was an uptick for Quarter three because there was a call routing failure for 2 ½ to 3 days. Calls were dropped so the Participant had to call back.</p> <p>Mollie Lewis, Provider Engagement Communications and Training Specialist, asked the Participants if they had any suggestions for provider trainings for 2021. Some of the trainings that were conducted 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.</p> <p>RB suggested training on isolation and depression. Mollie said that they had a meeting the next day and she is hoping to get this information out right away.</p>	N/A	N/A	N/A

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VII. Next Meeting Date +	Next meeting will be in March 2021. Exact time and date to be determined. PHW will send the annual meeting schedule prior to the next meeting in the Q1 2021 meeting package.	N/A	N/A	N/A
VIII. Adjournment *	Greg adjourned the meeting at 11:27 AM.	Adjourned	N/A	N/A

Respectively submitted,

Minutes prepared by (name & title): Shirley A. Stahler, Quality Improvement Specialist I	Signature:	Date: 12/14/20
Minutes approved by (name & title):	Signature:	Date: