

Participant Advisory Committee/LC
September 28, 2021

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

Mar	June	Sept	PHW Staff/Observers	Title
X	X	X	Greg Hershberger	Community Outreach Specialist - Chairperson
X	X		Marci Kramer	Director, Quality Improvement
X	X	X	Shirley A. Stahler	Quality Improvement Specialist I
X	X		Heather Eilert	Manager, HEDIS Operations (Non-Clinical)
X			Tanika Taylor	Director, Operations
X	X	X	Joanna Lewis	Manager, Operations
X			Jay Pagni	Senior Director, External Relations & Business Development
		X	Dr. Venkateswara Davuluri	Acting Chief Medical Director – Senior Medical Director
	X	X	Anthony Balouris	Manager, Grievance & Appeals
Mar	June	Sept	ADHOC	Title
X	X	X	Hollie Worthington	Quality Improvement Project Manager
	X		Keri Harmicar	Director, Marketing & Communications
	X		Olivia Martin	Director, Service Coordination

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

Mar	June	Sept	Name	Title
X	X	X	RB	LTSS Participant
			PB	LTSS Participant
		X	KY	LTSS Participant
	X		KC	LTSS Participant
			JJ	LTSS Participant
		X	RM	LTSS Participant
	X		Melanie Westfall	CHC Care Manager, Magellan Behavioral Health



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Mar	June	Sept	Name	Title
	X		Jane Alwalah, RN	Adult Day Program Director Westminster Village Allentown
	X	X	Bailey Carey	PA Health Management



LC PAC Agenda
9.28.21.docx



LC PAC Slides
September 2021.pptx

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 10:51 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 *	Meeting minutes were accepted without any changes.	Accepted	N/A	N/A
IV. New Business A. Complaints and Grievances Quarter 2, 2021	Anthony Balouris presented the second quarter (Q2) 2021 Complaints & Grievances (C&G). He stated that the Quality of Care (QOC) category had the highest volume of complaints in Q2. In the past, the Access and Availability (A&A) category had the highest volume. The C&G team collaborated with the Training and Resolutions Team to address the A&A concerns.	N/A	N/A	N/A

+Informational or Old Business

*Action Required

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<p>B. Customer Service 1st Quarter results</p> <p>C. CAHPS Medicaid 2020 vs 2021 Results</p>	<p>They are now able to address/resolve many concerns before they become complaints, which has reduced the volume of complaints in this category.</p> <p>Anthony noted that the Access & Availability category had the highest volume for grievances. Most of the grievances are related to home health and Personal Assistance Service (PAS) providers. For the Quality of Care category, the C&G team is working through the QOC cases pre-grievance to get a resolution, which in turn will reduce the number of grievances.</p> <p>The complete C&G statistics are on slides 4-7 of the slide deck inserted in the minutes.</p> <p>Joanna Lewis presented the Customer Service results for the second quarter of 2021. She informed the Committee that there were 37,240 calls answered in the second quarter. PHW answered all call within 15 seconds or less in Q2. This met the goal of 85% with a score of 90%. The abandoned rate was 1.28%, which met the goal of < 5%.</p> <p>Customer service metrics are included in slide nine in the slide deck.</p> <p>Hollie Worthington presented the Consumer Assessment of Healthcare Providers and Systems (CAHPS) results, comparing 2020 to 2021. She explained that the CAHPS survey assesses Participant experience with PHW, our systems, and providers.</p>	<p>N/A</p> <p>N/A</p>	<p>N/A</p> <p>N/A</p>	<p>N/A</p> <p>N/A</p>

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	<p>The rating scale is 1-5 with five being the highest rating.</p> <p>For the results of the non-dual and aligned dual Participants, the ratings remained relatively constant, except for the rating of Specialist and Flu Vaccination Rate. Rating of Specialist increased from 3 stars to 5 stars from 2020 to 2021. The Flu Vaccination rate decreased from 59.4% to 55.3% from 2020 to 2021. The final overall CAHPS score increased from 3.14 stars in 2020 to 3.43 stars in 2021.</p> <p>The results for the non-aligned duals decreased from 5 stars in four areas over 2020. The Flu Vaccination rate increased from 61.96% to 65.60% from 2020 to 2021. The final overall CAHPS score decreased from 5 stars in 2020 to 4.29 stars in 2021.</p> <p>There are opportunities to put interventions in place to improve CAHPS survey results. PHW will be developing and implementing interventions to increase the scores.</p> <p>The Dental Visit rating has been increasing slightly year over year. The biggest issues identified for Participants are not getting dental care at this time because of fear of going to the office due to the pandemic and transportation issues. PHW sent dental kits to Participants.</p> <p>For CAHPS survey results, refer to slides 11 – 15 in the slide deck inserted in the minutes.</p>			

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VII. Next Meeting Date +	Next meeting will be held on December 8, 2021.	N/A	N/A	N/A
VIII. Adjournment *	Greg adjourned the meeting at 4:12 PM.	Adjourned	N/A	N/A

Respectively submitted,

Minutes prepared by (name & title): Shirley A. Stahler, Quality Improvement Specialist I	Signature:	Date: 9/30/21
Minutes approved by (name & title):	Signature:	Date: