

June 16, 2020

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

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

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

External Attendance Record

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

Mar	Jun	Name Title	
Х	X CC Participant & Your Destiny Home Care		Participant & Your Destiny Home Care
Х	Х	WK Caregiver for LTSS Participant	
X		ЈНК	LTSS Participant (Won Kim Caregiver)



Х		JP	Caregiver for LTSS Participant
Х	Х	ADD	LTSS Participant
Х	Х	RH	LTSS Participant
Х		ZL	LTSS Participant
Х	Х	Fermina Maddox	Executive Director Liberty Resources Home Choices
Х	х	OR	LTSS Participant



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 10:04 AM.	N/A	N/A	Greg Hershberger
II. Announcements +	Roll call was conducted and all attendees made introductions.	N/A	N/A	Greg Hershberger
III. Review/Approval of the Minutes *	Greg Hershberger asked for a motion to approve the minutes from the last meeting. WK made the motion and RH seconded the motion.	Approved as written	N/A	N/A
V. New Business + A. Complaints & Grievances 1st Quarter Results	 Vicki Durkin presented the first quarter complaints and grievances numbers. She informed the committee that she wanted to show all of the zones so the southeast could compare to the rest of the regions. All regions show access and availability as their highest complaint. This can be interpreted in various ways such as the Participant wasn't able to get to their PCP appointment because of the transportation vendor, not having access to their adult daycare during the COVID 19 pandemic, and other various reasons. At this time they do not have the reasons broken down to see what may be the biggest issues. They are working on getting a report to break this down further. The southeast is the largest of the five zones for grievances for access and availability. Previously, the department was using a different system to track their complaints and grievances. Now they are utilizing the system that the plan utilizes so if someone needs to see what is going on 	N/A	N/A	N/A



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	with the complaint or grievance, they are able to access the information in real time.			
B. Customer Service Report Q1	Gary Law presented the Customer Service Report for the first quarter of 2020. He explained there was just under 80,000 Participant calls in the first quarter and all their goals were met.			
	There were just under 31,000 Provider calls in the first quarter. All goals were met for these calls also.			
	Gary informed the committee that in the second quarter of 2020, they have started the Participant post call survey. This survey is offered to the Participant at the end of their call. The survey is an opportunity to rate the call. The caller is asked four questions. They are:			
	 Were you treated with courtesy and respect? What was the reason you called and was the issue resolved? Was this the first time you called about this particular issue? Would you recommend PHW to a friend or relative? 			
	The Participant is also offered an opportunity for a call back and they can leave a verbal message. Gary told the committee that he listens to all of the messages received. Of the surveys offered approximately 20% of the callers have taken the survey.			
C. LTSS Active Participation	Olivia Martin explained the abbreviations that she would be using in her presentation so the committee members would understand what she was talking about. The list is being provided with the			



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	meeting minutes. See attached list. Olivia presented the Long Term Services and Supports (LTSS) Active Participation Monitoring for 2019. The goal is 85% or better for Participants who have completed the LTSS within 5 days of enrollment with the plan. For quarter one and quarter three the goal was not met. For quarter two and quarter four the goal			
	was met. For Participants who have had a completed Person Centered Service Plan (PCSP) within 30 days of enrollment, the goal is also 85%. In quarter one the goal was not met. For quarters two, three, and four the goal was met.			
	Olivia stated that they put four measures in place to improve the process. CC stated that in our previous meeting they discussed sending a form out to Participants to let them know what is covered. He wanted to know if that is happening.			
	Olivia responded that the handbook outlines 32 different services that we offer as benefits under the COC program. She wanted to know if CC was referring to more specific items. CC said that when he is talking to the consumer they are			
	confused on what is specifically covered and he is not sure sometimes. Olivia explained that her Service Coordinators (SC) would not know the information for medications, however they do			



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	educate them in the 32 services and what is covered. She said that they could reach out to their SC if necessary.					
	Olivia also said that she could discuss a document with Greg Hershberger and Marci Kramer. They could see what is needed and see if something can be developed to get out to the Participants.		Have a discussion about developing a document listing the	Olivia Martin		
	CC also wanted to discuss Olivia's statement about rallying the number of outside coordinators. He asked if this would limit the number of coordinators and if PHW would add more internal coordinators to balance it out. He asked how that would benefit the Participant and provider.		services that are covered.			
	Olivia explained that we look at the quality of service coordination they are providing, timeliness, and meeting their contractual obligations through their documentation. They have to meet what we are contractually required to meet for the state. We start looking at them in April or May each year and start auditing through the fall.					
	If big discrepancies are found and remediation needs to occur, we do that. If there is no improvement after multiple trainings and coaching provided, Corrective Action Plans are issued. We look at the best choices for our Participants and may have to discontinue using them. This is completed seamlessly as possible.					
VII. Next Meeting Date	September 15, 2020 @ 10:00 am.	N/A	N/A	N/A		
VIII. Adjournment *	Greg ask for a motion to adjourn. WK made the motion and CC seconded the motion. Meeting adjourned at 11:08 am.	Adjourned	N/A	N/A		



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 Minutes prepared by (name & title):
 Signature:
 Date:

 Shirley A. Stahler, Quality Improvement Specialist I
 6/17/20

 Minutes approved by (name & title):
 Signature:
 Date:

Active Participation Report glossary

PCSP: Person-Centered Service Plan

+Informational or Old Business *Action Required

Privileged and Confidential



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interRAI: A comprehensive needs assessment designed to highlight issues related to functioning and quality of life for community residing individuals. It assesses persons with chronic and post-acute care needs and helps to guide service planning.

TruCare: PA Health and Wellness electronic health record

PDF: Portable Document Format similar to a Word document

COC: Continuity of Care period is the period after a region began the CHC program. This lasts 180 days. The Southwest Zone, Southeast Zone and Zone 3 each had a COC period. Zone 3 is currently in the COC period until June 30, 2020.

NPO: New Participant Orientation. The very first assessment done by PHW. For COC Participants, there is 180 days to complete this since a service plan is already in place. For new Participants, there is 5 days to complete this series of assessments.

LTSS: Long-term Services and Supports

SC: Service Coordinator

NCQA: National Committee for Quality Assurance.