



Participant Advisory Committee/SW
September 7, 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, Committee Chairperson
X	X	X	Marci Kramer	Director, Quality Improvement
X	X	X	Shirley A. Stahler	Quality Improvement Specialist I
X	X	X	Joanna Lewis	Manager, Operations
X	X		Heather Eilert	Manager, HEDIS Operations (Non-Clinical)
X			Malik Haynes	Director, Quality Program Strategy
	X	X	Dr. Venkateswara Davuluri	Acting Chief Medical Director
	X	X	Kay Gore	Manager, Community Relations, G&A-Marketing
	X		Jennifer Burnett	Senior Director Operations
		X	Michael Zimage	Quality Improvement Coordinator
		X	Keri Harmicar	Director, Marketing & Communications
		X	Tanika Taylor	Director, Grievance & Appeals

ADHOC ATTENDEES

Mar	June	Sept	PHW Staff/Observers	Title
X	X	X	Hollie Worthington	Quality Improvement Project Manager
	X		Samantha Kater	HEDIS Coordinator
	X		Brendin Tupta	HEDIS Coordinator

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

Mar	June	Sept	Name	Title
X			MM	LTSS Participant
X	X	X	KK	LTSS Participant
		X	GL	Participant

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Mar	June	Sept	Name	Title
X	X	X	PF	LTSS Participant
X		X	LA	LTSS Participant
			CJ	Participant
X			Carol Jones	TRIPIL
X			Isaac Perry	TRIPIL
X	X	X	Sarah McElhattan	Service Access and Management
			Marsha Simonds	PH Provider
			Matt Perkins	CEO from Service Coordination Unlimited
	X		Linzi Driver	Account Manager Envolve Vision
		X	Beverly A. Feragotti, MLS, MBA, BA, R.T.(R)(ARRT)	Director of Reimbursement, Lutheran SeniorLife
		X	Yaasmiyn White	OLTL
		X	Maureen Hager	OLTL



PAC Slides
9.7.21.pptx

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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 1:48 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
IV. New Business A. Complaints & Grievances Quarter 2, 2021	<p>Tanika Taylor presented the second quarter (Q2) 2021 Complaints & Grievances (C&G). She 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 partnered with the Training and Resolutions Team to address the A&A concerns. 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>Tanika 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>GL stated she files complaints and never hears about them. In</p>	N/A	Send GL's contact information to Tanika.	Greg Hershberger

+Informational or Old Business
 *Action Required

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<p align="center">B. Customer Service Quarter 2, 2021</p>	<p>July and August she called because MTM does not call her until they get to her home and it takes time for her to get down to their vehicle.</p> <p>She stated that for six months she has tried to have a conversation with the Head of C & G. She left numerous messages but he did not reach out to her. Tanika stated she will contact her on September 8, to discuss her issues.</p> <p>GL stated she received three pages of referrals for Chefs for Seniors for Homecare however they were out of her area.</p> <p>LA asked if the statistics are actual or manipulated. Tanika responded that they are actual and factual. The numbers have to be reported to OLTL and Corporate.</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 calls 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>KK stated he has been on the phone for one hour to one and one half hour. He had to hang up because of the wait. He also</p>			

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<p>C. CAHPS Medicaid 2020 vs 2021 Results</p>	<p>stated that they have hung up on him because they can't understand him. Greg informed him that he could reach out to him anytime so he does not have to wait that long.</p> <p>PF asked if there are enough employees to answer the phones. She has noticed long holds to get to a representative. She also asked if there is a way to leave a message for a call back. Joanna stated that there is no way during the day but after hours a message can be left.</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 the PHW, our systems, and providers. 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>			

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	<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>			
VII. Next Meeting Date +	Next meeting will be December 7, 2021.	N/A	N/A	N/A
VIII. Adjournment *	Greg adjourned the meeting at 2:10 pm.	Adjourned	N/A	N/A

Respectively submitted,

Minutes prepared by (name & title): Shirley A. Stahler, Quality Improvement Specialist I	Signature:	Date: 9/13/21
Minutes approved by (name & title):	Signature:	Date: