

June 18, 2024

PA Health & Wellness Southwest Participant Advisory Committee Meeting June 18, 2024

Center for Independent Living Central Pennsylvania Harrisburg, PA

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

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

June	PHW Staff/Observers	Title
Р	Greg Hershberger	Community Outreach Specialist, Committee Chairperson
Χ	Kayla Stadelman	Community Health Services Representative
Χ	Dr. Craig Butler	Medical Director
Χ	Heather Mosley	Program Manager II
Р	Susan Foster	Supervisor, Case Management
Χ	John Savidge	HEDIS Operations Manager
Р	Tina McCullough	Health Equity Specialist
Р	Kay Gore	LTSS and Community Outreach Manager
Χ	Nicole Myers	Compliance Manager
Χ	Taylor Lovett	Quality Improvement Coordinator I
Χ	Dawn Blake	HEDIS Operations Manager
Χ	Theresia Kody	Employment and Vocational Specialist
Χ	Regina Hightman	Accreditation Specialist II
Χ	Joseph Elliot	Long Term Care and Support Director
Χ	Athena Aardweg	Program Manager II
Χ	Brendin Tupta	Project Manager I
Χ	Danii Cyrus	Grievances and Appeals Supervisor
Χ	Paula Joshua-Williams	Accreditation Specialist II



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External Attendance Record

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

June	Name	Title	
Р	Genesis Williams	CIL Partner – CILCP	
Р	Brittany Chisholm	CIL Partner – CEO	
Χ	Yaasmiyn White	OLTL Representative	
Χ	Kristen Richard	OLTL Representative	
Х	Keeley Anglin	OLTL Representative	
Х	Rickey Banks	Participant	
Х	Heather Ferry	Greyhawk Representative	
Р	Pam Auer	CIP Partner	
Р	Mike Grier	CIL Partner	
Х	Patrine Buckley	Bayada Representative	
Р	Leslie Dowell	Participant	
Р	Kim Blatt	Caregiver	
Р	Evelyn Parker	Participant	
Р	Vivian Parker	Caregiver	
Х	Linda Larguedas	MTM Representative	
Х	Will Courtney	MTM Representative	

	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 1:06 PM	N/A	N/A	Greg Hershberger
II.	Announcements +	Roll call was conducted.	N/A	N/A	Greg Hershberger



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III. Review/Approval of the Minutes	Greg Hershberger discussed that minutes are posted on our website and reviewed.	N/A	N/A	All
IV. New Business +				
A. MD Update	Presented by Dr. Craig Butler.			
B. Health Education	Managing Diabetes – there are two types: Type I and Type II. Type I is no longer called Juvenile Diabetes because it can occur later in life. Also, Type II can occur earlier in life. Diabetes can go undetected for a long time, so it is important to know the symptoms and call your PCP if you have any questions or concerns. Diabetes symptoms: Feeling more thirsty than usual. Urinating often. Losing weight without trying. Presence of ketones in the urine. Ketones are byproduct of breakdown of muscle and fat when not enough insulin. Feeling tired and weak. Feeling irritable or having other mood changes. Having blurry vision. Having slow-healing sores. Getting a lot of infections, such as gum, skin and vaginal infections. Preventative Screening and Stress Management: Exams, shots, lab tests, and screenings are all very important to preventative care.	N/A	N/A	
	Depression screening is now included in most doctor office exams			



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		Decision	Follow-up Action Needed	Responsible
Agenda Item	Discussion	(Approved	(Date)	Party
		or Denied)		,
	as a series of questions.			
	Skin Cancer:			
	Check full body regularly in a full-length mirror. Reach out to PCP			
	with any concerns.			
	Heart Health:			
	Symptoms:			
	Arrhythmia – Irregular heartbeat			
	 Heart Attack – chest pain, shortness of breath 			
	 Heart Failure – chest congestion, fluid retention 			
	Risk factors:			
	 High blood pressure 			
	 High cholesterol 			
	Smoking			
	o Diabetes			
	Obesity			
	Excessive alcohol use			
	Low activity levels			
	Q: Recommendations for an obese patient to lose weight?			
	A (Dr. Butler): Work with your PCP for a customized plan that is			
	tailored to you. Get blood labs checked. Weight loss medications			
	are an option and are covered by CHC. But start the conversation			
	with you PCP.			
	with you rer.			
B. Fluvention	Presented by Susan Foster. The campaign ended end of 03/2024.	N/A	N/A	
b. Fluvelition	· · · ·	IN/A	IN/A	
	Purpose is to decrease Flu, increase vaccination rates and reduce			

⁺Informational or Old Business



Agenda Item	Discussion	Decision (Approved or Denied)	Follow-up Action Needed (Date)	Responsible Party
	hospitalizations. Focus on high-risk groups.			
	Flu Activity: PA is in the minimal category as of end of April 2024.			
	End of August is when Flu Vaccinations will begin to be			
	encouraged for next upcoming Flu season. Flu season will be			
	October 2024-March 2025. Just because Flu season is over does			
	not mean that you still cannot contract the Flu. CDC goal is to			
	collect data from 9 sources. This helps them to determine what kind of Flu vaccine will work for the upcoming Flu season. PA's			
	overall vaccination rate is 38.5% - 3x higher than the national			
	average.			
	Vaccination preventable diseases: Shingles and Hep. B			
	Shingles (2 dose vaccine)- mostly affects the older population but			
	can affect anyone at age if you had the chickenpox virus. Usually			
	starts as blisters on the chest and then back and spine area.			
	Blisters on the face can result in vision loss. Once you have had			
	shingles you are at a higher risk of getting it again. Vaccine			
	recommended age is 50+ but discuss risk factors with your PCP if			
	you are younger and feel this vaccine may be right for you.			
	Hepatitis B (3-4 dose vaccine)- easily prevented, infection of the			
	liver. Can stay in your liver for the rest of your life. 820,000			
	deaths/year. Leading cause of Liver cancer. There is no cure but			
	there are treatments available to reduce serious liver disease and			
	liver cancer.			
	To see the vaccine schedule, go to			
	cdc.gov/vaccines/tool/adult.html			
C. HEDIS Operations	HEDIS measures Q2 prevented by John Savidge.	N/A	N/A	
	Controlling Blood Pressure – sometimes referred to as "The Silent			

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	Killer." 120/80 is a normal blood pressure. The top number "systolic" is the pressure when your heart is contracting. The bottom number "diastolic" is the pressure when your heart is a rest. Higher blood pressure can result in higher risk for heart attacks and strokes. Lose extra weight, lower salt intake, and increase general activity. Get an at-home blood pressure monitor device to check BP regularly. Check with SC or PCP. Sometimes blood pressure can be higher at the beginning of a doctor appointment, don't be afraid to ask them to check it a 2 nd or 3 rd time before you leave your appointment. Q: What is the correct way to put on a blood pressure cuff? A (John Savidge): Follow the directions in the manual. Make sure the cuff fits correctly and is not too big or small because that can alter the reading. Greg H. – Take the monitor with you to your doctor appointment to check its calibration and accuracy.			
D. Marketing Materials	Tina presented on Spring Wellness. Allergy Season is here. Get testing done at doctor's office. Check pollen levels in your area. Take shower or bath before bed to keep bed sheets allergen-free. Keep an eye on food intake – certain foods like wheat, sugar and dairy can makes allergies worse. Drink plenty of water to flush your system and stay hydrated. Health Education Advisory Committee Concluded at 1:44 PM	N/A	N/A	

⁺Informational or Old Business



Agenda Item	Discussion	Decision (Approved or Denied)	Follow-up Action Needed (Date)	Responsible Party
	Participant Advisory Committee Started at 1:44 PM Greg Hershberger stated that we will be reviewing PHW 32 services. Introduced Yaasmiyn White, Kristen Richard and Keeley Anglin.			
A. Complaints and Grievances Q3 2023	Danii Cyrus reviewed the Q1 information for 2024. Home Health has the highest complaints in Q1. Home health also has the highest grievances for Q1. Q: What are the basic complaints/grievances for home health? A (Danii Cyrus): Grievances is normally for PAS hours approved – usually a decrease in hours. Q: How many cases normally get appealed? A (Danii Cyrus): I do not have that data but can get it to you.	N/A	Get Mike the data for appealed home health cases.	
B. Customer Service	Greg Hershberger presented on Customer Service. Participant and Provider incoming calls - PHW met the metrics for Q1 2024: 18 seconds average speed to answer PTPs, 13 seconds average speed to answer providers. Abandoned rate for calls Q1 2024 was 1.18% for participants and 0.57% for providers. All goals met.	N/A	N/A	

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^{*}Action Required



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		or Denied)		Party
C. Transportation	PHW presented on Transportation.	N/A	N/A.	
	Service #16 Non-medical Transportation: This service provides eligible participants with tickets, passes, tokens, single rides, and mileage reimbursement to help a participant get to community and other activities (Note: Tokens are not always a guaranteed option). This service increases socialization and independence as well as preventing isolation. Will Courtney (MTM – Vendor Account Manager) – makes sure NMT trips get set. They see more volume in certain areas of the state. Have contracts with Lyft and Uber. Complaint ratios are low in PA. They have bi-weekly meetings with Centene and go over stats and complaints. Try to address issues in a timely fashion. Q: I have to move by 6/30 but cannot transfer to a caregiver's car. What should I do? A (Will Courtney): NMT can help with that - contact PHW member services to get MTM to get that scheduled. The earlier the better.			
D. Employment	Theresia Kody presented on benefits counseling, employment opportunities and being employed. PA is an Employment First state. You CAN work and have a Community Health Choices waiver. Benefits counseling helps you make an informed decision about work and planning once already working. When it comes to employment assistance or benefit counseling assistance, participants must attempt to connect to the programs below and PA Health & Wellness will support if	N/A	Greg – get Theresia the ptp contact info, SC, SCE Theresia K. – get data for PHW employment to Mike	

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	needed: Office of Vocational Rehabilitation (OVR) Ticket to Work Helpline (WIPA program) Gained written clarification from OLTL re: Ticket to Work Helpline as it relates to benefits counseling referrals. This enables quicker authorization, as appropriate, for HCBS Benefits Counseling. Updated internal processes to assist with the referral requirements and assisting with ensuring you receive a call from Work Incentive Planning & Assistance program as applicable. Benefits Counseling Guide — approved by OLTL in April and accessible on our website: https://www.pahealthwellness.com/community/SocialDeterminantsofHealth/EmploymentResources/employment-journeyhtml Make sure that participants are talking to their Service Coordinator if they want to be employed and follow up on the process. Can also send an e-mail to Information@PAHealthWellness.com . Asking for accommodations at work for a disability is allowed, i.e., a task list. Carrie: VFI is now in partnership with PHW and are accepting referrals. Theresia K: Not just an employment provider but provides Benefits Counseling as well.			

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E. Assistive Technology and TeleCare	Presented by Joe Elliot. Service #31 Assistive Technology - Assistive Technology consists of devices and services that are intended to increase, maintain or improve a participant's functioning in communication, selfhelp, independence, life supports, or adaptive capabilities to ensure the health, welfare, and safety of the participant. This service allows one to perform tasks that they might not otherwise be able to do. It equips a person to have more autonomy and independence by helping them to work around challenges to learn, communicate or function better. Service #32 Telecare presented by Joe Elliot. Telecare services use technology to help a participant be as independent as possible. Example: Medication dispenser/reminder, nonskilled service such as monitoring motion sensor to cut down on PAS hours so a DCW does not need to be there throughout the night. Q: Is there a way to get a service dog trained? A (Joe Elliot): We would have to look into that. Start with SC. Q: Trouble getting a hold of SC. A (Joe Elliot): Greg and I will look into making sure there is communication with PTP and SC.	N/A	Check with SC about PTP having trouble getting a hold her SC.	
F. Home Delivered Meals and Nutritional	Presented by PHW Team Service #19 Home Delivered Meals (HDM) This service provides nutritional meals directly to the participants	N/A	N/A	

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Consultation	home, when the participant is unable to prepare their own meal. Participants may receive up to two home delivered meals per day. The meal may be hot, cold, frozen, dried, canned, fresh or supplemental foods. Meals may include special dietary and nutritional needs.			
	Service #28 Nutritional Counseling Nutritional Consultation services help the participant and a paid and unpaid caregiver in planning meals that meet the participant's nutritional needs and avoid any problem foods. Eating nutritional food helps the participant's health and wellbeing. Example: A participant visits a dietician to discuss what foods will help to maintain their blood sugar and not complicate their diabetes.			
G. Home Adaptations/Pest Eradications/Vehicle Modifications	Presented by PHW Team Service #9 Home Adaptations This service provides physical changes /modifications to a participant's home, such as ramps, handrails, and grab bars, to make the home safe and enable the participant to be more independent in the home. This includes repairs to existing Home Adaptations as well. HA does not include home improvement, maintenance, or cosmetic requests, but focuses on modifying the current living situation.			

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	Example: HA may include walk-in showers, grab bars, handrails or door widening. Metal ramps, stair glides, ceiling track lifts and wheelchair lifts fall under the HADME benefit and are executed by our HA team.	N/A	N/A	
	Service #15 Pest Eradications The Pest Eradication Service removes insects and other pests from a participant's home that, if not treated, would prevent the participant from staying in the community due to a risk of health and safety. Deep cleaning may be required to facilitate this request. Multiple treatments may be needed in preparation of extermination. Example: Participant receives treatment in their home to exterminate bed bugs, rodents, roaches, etc.			
	Service #18 Vehicle Modifications Vehicle Modifications are modifications or alterations to an automobile or van that is the participant's means of transportation which accommodates any disability access issues of the participant. The vehicle that is modified may be owned by the participant, a family member who provides primary support, or a non-relative who provides primary support to the participant and is not a paid provider agency of services. The vehicle cannot exceed 5 calendar years old and must have less than 50,000 miles for vehicle modification requests over \$5,000. This service allows the participant to maintain independence without having to rely on other transportation sources while increasing independence.			

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	Example: A lift is added to a van to make it accessible for the participant. Theresia Kody: OVR can assist with purchasing a vehicle if it is needed to get back and forth to work.			
H. Community Relations and Outreach	 Tina presented. Community Connect is available on PHW's website, is a free website to find resources in your area by searching your zip code. Tangled Title/Heirs Property Assistance: A tangled title exists when the current occupant of the house is not on the deed but believes that themselves to be the owner. If you find yourself in this situation and need assistance, please reach out to your Service Coordinator or Health Equity Specialist. Upcoming events in Central/Lehigh PA: Tri County OIC and GCF Global For information on Community Events please e-mail PHWCommunityOutreach@PAHealthWellness.com. You can also follow PA Health and Wellness on Facebook. This concluded the Participant Advisory Committee Meeting at 2:59 PM. 	N/A	N/A	

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7.8eaa 10e	2.0000.0	or Denied)	(2015)	Party
A. Performance Improvement Project (PIP) – non- clinical	Transitioning Participants from the Nursing Facility to the Community Non-Clinical PIP presented by Brendin Tupta. Final Annual Report submitted to IPRO on 3/29/2024 (due 3/31/2024). • Final report is Project Year 5 with data through measurement year 2023. • CHC MCO's are working with OLTL and IPRO on revisions for both PIPs. Key points: • PHW will implement an LTSS enhanced Service Coordination program to improve the percentage of Participants who remain in the community post-discharge. • Overall, PHW has increased the number of Participants being discharged from the NF and managed to perform well with keeping the Participant within the community post discharge. Community Transition Services: The next two services provide support for individuals transitioning from an institution or another provider operated living arrangement who wish to transition into the community and are in need of additional supports and funds to successfully live independently in the community.	N/A	N/A	

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B. Performance Improvement Project (PIP) – clinical	 Community Integration Community Transition Services This service offers one-time expenses, such as security deposits, moving expenses, and household products, for participants who move from an institution to their own home, apartment or other living arrangement. Transitioning Participants from the Hospital to the Community Clinical PIP presented by Paula Joshua-Williams. Strengthening Care Coordination Final Report submitted March 31, 2024 CHC MCO's are working with OLTL and IPRO on revisions for both PIPs. Why: Rationale for Project Reduce errors Reduce readmissions Support the participant What did we aim for: Increase rates for project indicators across all regions by end of 2023 What were our objectives: Implement an LTSS enhances Service Coordination program to improve the transition of care process for our participants. Project Proposal due July 31, 2024 Most information will be shared at Q3 meeting. 	N/A	N/A	

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C. CLAS: Culturally and Linguistically Appropriate Services	Gina Hightman presented. Focus is to make sure unique needs of our members are met. Continually improving diversity of staff and providers. Closing care gaps. Making sure we have providers that align with the community they serve. This concluded the Board Committee meeting at 3:27 PM with a		N/A	
	reminder that the next meeting will be September 2024.	N/A	N/A	
VII. Next Meeting Date +	September 2024	N/A	N/A	N/A
VIII. Adjournment *	Greg asked for a motion to adjourn at 3:27 PM.	Adjourned	N/A	N/A

Respectively submitted,

Minutes prepared by (name & title):	Signature:	Date:
Kayla Stadelman, Community Health Services Representative		6/18/2024