

June 12, 2024

# PA Health & Wellness Northwest Participant Advisory Committee Meeting June 12, 2024 Voice for Independence Erie, 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 |  |
| Х    | Kayla Stadelman       | Community Health Services Representative             |  |
| Х    | Dr. Craig Butler      | Medical Director                                     |  |
| Х    | Dr. Davuluri          | Medical Director                                     |  |
| Χ    | Susan Foster          | Supervisor, Case Management                          |  |
| Χ    | John Savidge          | HEDIS Operations Manager                             |  |
| Χ    | Felicia Alexander     | Health Equity Specialist                             |  |
| Χ    | Kay Gore              | LTSS and Community Outreach Manager                  |  |
| Х    | 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    | Tamra Nakamura        | Senior Accreditation Specialist                      |  |
| Χ    | Gina Hightman         | Accreditation Specialist II                          |  |
| Χ    | Paula Joshua-Williams | Accreditation Specialist II                          |  |
| Χ    | Susan Foster          | Supervisor, Case Management                          |  |
| Χ    | Dr. Craig Butler      | Medical Director                                     |  |



June 12, 2024

#### External Attendance Record

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

| June | Name                               | Title                                 |
|------|------------------------------------|---------------------------------------|
| Χ    | Sarah McElhatten                   | External Service Coordination Partner |
| Х    | Yaasmiyn White OLTL Representative |                                       |
| Х    | Kristen Richard                    | OLTL Representative                   |
| Χ    | Will Courtney                      | Transportation Vendor                 |
| Р    | Carrie Bach                        | CIL Partner                           |
| Р    | Aaron Guarino                      | Participant                           |
| Р    | Kyra Dusch                         | Caregiver                             |
| Р    | Holly Kooken                       | Participant                           |

| Agenda Item   | Discussion  | Decision<br>(Approved<br>or Denied) | Follow-up Action Needed<br>(Date) | Responsible<br>Party |
|---|---|-------------------------------------|-----------------------------------|----------------------|
| I. Call to Order                                    | Greg Hershberger called the meeting to order at 1:06 PM   | N/A                                 | N/A                               | Greg<br>Hershberger  |
| II. Announcements +                                 | Roll call was conducted.  | N/A                                 | N/A                               | Greg<br>Hershberger  |
| 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 B. Health Education | Presented by Dr. Craig Butler.  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 | N/A                                 | N/A                               |                      |

<sup>+</sup>Informational or Old Business



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|-------------|--|-------------------------------------|-----------------------------------|----------------------|
|             | 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.  Depression screening is now included in most doctor office exams as a series of questions.  Q: What happened to primary care when they used to answer general questions? Now, they just send you to a specialist for everything i.e., "my foot hurts" they respond with "go see a Podiatrist."  A (Dr. Butler): The span of medicine has taken off over the past few years. It's a reflection of our medical and legal system. Get a specialist involved early, they can usually detect and diagnose things earlier. |                                     |                                   |                      |



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|---------------|---|-------------------------------------|-----------------------------------|----------------------|
|               | Skin Cancer: Check full body regularly in a full-length mirror. Reach out to PCP with any concerns. Heart Health: Symptoms:   |                                     |                                   |                      |
|               | <ul> <li>High blood pressure</li> <li>High cholesterol</li> <li>Smoking</li> <li>Diabetes</li> <li>Obesity</li> <li>Excessive alcohol use</li> <li>Low activity levels</li> </ul>   |                                     |                                   |                      |
| B. Fluvention | Presented by Susan Foster. The campaign ended end of 03/2024. Purpose is to decrease Flu, increase vaccination rates and reduce 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 | N/A                                 | N/A                               |                      |

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|---------------------|--|-------------------------------------|---|----------------------|
|                     | 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. Controlling Blood Pressure – sometimes referred to as "The Silent 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  | N/A                                 | Discuss low blood pressure at next meeting? |                      |

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|------------------------|--|-------------------------------------|-----------------------------------|----------------------|
| D. Marketing Materials | 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 <sup>nd</sup> or 3 <sup>rd</sup> time before you leave your appointment.  Q: How can you tell if your BP device is reading accurately?  A (John Savidge): Check/change the batteries or check the diagnostic guide if you are noticing big fluctuations in the numbers, make sure the cuff is applied correctly, take the device with you to your doctor appointments to see if the number on your device matched up with the number at the doctor. Make sure you are getting a monitor that is clinically tested.  Greg Hershberger 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 2:00 PM | N/A                                 | N/A                               |                      |
|                        | Greg Hershberger introduced Yaasmiyn White from OLTL – PHW Monitoring Team.  |                                     |                                   |                      |

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| Agenda Ite                   | em     | Discussion  | Decision<br>(Approved<br>or Denied) | Follow-up Action Needed<br>(Date)   | Responsible<br>Party |
|------------------------------|--------|---|-------------------------------------|---|----------------------|
| A. Complaints a Grievances ( |        | 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.   | N/A                                 | N/A   |                      |
| B. Customer Se               | ervice | Joanna Lewis 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. Penny (PTP): Praised Customer Service   | N/A                                 | N/A   |                      |
| C. Transportati              | ion    | Joanna Lewis presented on Transportation.  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.  Q: Aaron reports paying \$3.30/each way for NMT. Would PHW pay for those rides? He is also paying upwards of \$85 one way for | N/A                                 | Greg H. needs to give Joanna L. Aaron's contact information to go over his transportation benefits. |                      |

<sup>+</sup>Informational or Old Business

<sup>\*</sup>Action Required



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|               | some medical rides.  A (Greg Hershberger): The PAC will reimburse you for your ride here today for the meeting.  A (Joanna Lewis): Greg, give Joanna Aaron's contact information and she will call him to go over his benefits.  |                                     |                                   |                      |
|               | 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: Crossing County lines can be difficult to navigate because a lot of transportation companies will not cross county lines.   |                                     |                                   |                      |
|               | Aaron: Lyft does take 1 bus/day outside of county lines but that needs to be scheduled 30-45 days in advance.  |                                     |                                   |                      |
|               | A (Will Courtney): We do have the flexibility with NMT, MATP has less flexibility.   |                                     |                                   |                      |
| 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 HealthChoices 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 | N/A                                 | N/A                               |                      |

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|             | assistance, participants must attempt to connect to the programs below and PA Health & Wellness will support if 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/SocialDeterm inantsofHealth/EmploymentResources/employment-journey_html  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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| Agenda Item                          | Discussion   | Decision<br>(Approved<br>or Denied) | Follow-up Action Needed<br>(Date) | Responsible<br>Party |
|--------------------------------------|--|-------------------------------------|-----------------------------------|----------------------|
| E. Assistive                         | PHW Team presentation.   | N/A                                 | N/A                               |                      |
| E. Assistive Technology and TeleCare | PHW Team presentation.  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.  Penny presents on how she uses Assistive Technology in her everyday life:  She is physically blind from birth. Everybody needs assistive technology to survive. You need community – whether it's just going to a restaurant or a concert. Enjoys tandem biking but limited in finding people to do it with. Uses smart devices such as an iPhone/ iPad and computers to play games and socialize. Puts money aside to play the games. Uses an Alexa device. All of this is good for Mental Health. Has a money identifier. Utilizes a bidet on her toilet. Enjoys essential oil diffusers and foot massagers. | N/A                                 | N/A                               |                      |
|                                      | Bought herself a sauna that she sits in for 20-40 minutes. Uses an app called "Be My Eyes" that helps her match her outfits for the day.  Aaron: showed a signature block that he uses to help make  |                                     |                                   |                      |
|                                      | signing his signature easier.  |                                     |                                   |                      |

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|  | Service #32 Telecare presented by Greg Hershberger. 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.   |                                     |                                   |                      |
| F. Home Delivered Meals and Nutritional Consultation | Presented by PHW Team Service #19 Home Delivered Meals (HDM) This service provides nutritional meals directly to the participants 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.  Example: A participant receives frozen meals delivered to their home that they can heat up in the microwave.  Aaron: What about food trucks that sell fresh fruits and vegetables, would they be eligible for the Farmer's Market vouchers?  Felicia A: You mean a mobile Farmer's Market? If they are approved by the state and can accept the vouchers, then you can use your voucher there. It is \$50/month per person. | N/A                                 | N/A                               |                      |
|  | Service #28 Nutritional Counseling Nutritional Consultation services help the participant and a paid  |                                     |                                   |                      |

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|   | 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.  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.  Service #15 Pest Eradications | N/A                                 | N/A                               |                      |
|   | 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   |                                     |                                   |                      |

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| Agenda Item                         | Discussion  | Decision<br>(Approved<br>or Denied) | Follow-up Action Needed<br>(Date) | Responsible<br>Party |
|-------------------------------------|---|-------------------------------------|-----------------------------------|----------------------|
|                                     | 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.  Example: A lift is added to a van to make it accessible for the participant. |                                     |                                   |                      |
| H. Community Relations and Outreach | Kay Gore 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   | N/A                                 | N/A                               |                      |

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| Agenda Item          | Discussion  | Decision<br>(Approved<br>or Denied) | Follow-up Action Needed<br>(Date) | Responsible<br>Party |
|----------------------|---|-------------------------------------|-----------------------------------|----------------------|
|                      | house is not on the deed but believes that themselves to                        |                                     |                                   |                      |
|                      | be the owner.   |                                     |                                   |                      |
|                      | <ul> <li>If you find yourself in this situation and need assistance,</li> </ul> |                                     |                                   |                      |
|                      | please reach out to your Service Coordinator or Health                          |                                     |                                   |                      |
|                      | Equity Specialist.  |                                     |                                   |                      |
|                      | Upcoming events in NW PA:   |                                     |                                   |                      |
|                      | 36 <sup>th</sup> Annual Panegyri Greek Festival and Pride on the Bay            |                                     |                                   |                      |
|                      | For information on Community Events please e-mail                               |                                     |                                   |                      |
|                      | PHWCommunityOutreach@PAHealthWellness.com.                                      |                                     |                                   |                      |
|                      | You can also follow PA Health and Wellness on Facebook.                         |                                     |                                   |                      |
|                      | Will be discussing DCW at September PAC. Greg mentioned that                    |                                     |                                   |                      |
|                      | all three MCO's have been working closely with OLTL and that a                  |                                     |                                   |                      |
|                      | rate structure for PDO should be out and will discuss next PAC.                 |                                     |                                   |                      |
|                      |   |                                     |                                   |                      |
|                      | This concluded the Participant Advisory Committee Meeting at                    |                                     |                                   |                      |
|                      | 3:18 PM.  |                                     |                                   |                      |
|                      | The Board Advisory Committee meeting started at 3:18 PM.                        |                                     |                                   |                      |
|                      |   | N/A                                 | N/A                               |                      |
| A. Performance       | Transitioning Participants from the Nursing Facility to the                     |                                     |                                   |                      |
| Improvement          | Community Non-Clinical PIP presented by Brendin Tupta.                          |                                     |                                   |                      |
| Project (PIP) – non- | Final Annual Report submitted to IPRO on 3/29/2024 (due                         |                                     |                                   |                      |
| clinical             | 3/31/2024).   |                                     |                                   |                      |
|                      | Final report is Project Year 5 with data through                                |                                     |                                   |                      |

<sup>+</sup>Informational or Old Business



| Agenda Item                                      | Discussion  | Decision<br>(Approved<br>or Denied) | Follow-up Action Needed<br>(Date) | Responsible<br>Party |
|--|---|-------------------------------------|-----------------------------------|----------------------|
|  | <ul> <li>measurement year 2023.</li> <li>CHC MCO's are working with OLTL and IPRO on revisions for both PIPs.</li> <li>Key points:         <ul> <li>PHW will implement an LTSS enhanced Service Coordination program to improve the percentage of Participants who remain in the community post-discharge.</li> <li>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.</li> </ul> </li> <li>Community Transition Services:         <ul> <li>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.</li></ul></li></ul> |                                     |                                   |                      |
| B. Performance<br>Improvement<br>Project (PIP) – | Transitioning Participants from the Hospital to the Community<br>Clinical PIP presented by Paula Joshua-Williams.<br>Strengthening Care Coordination  | N/A                                 | N/A                               |                      |

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|--|---|-------------------------------------|-----------------------------------|----------------------|
| clinical   | <ul> <li>Final Report submitted March 31, 2024</li> <li>CHC MCO's are working with OLTL and IPRO on revisions for both PIPs.</li> <li>Why: Rationale for Project         <ul> <li>Reduce errors</li> <li>Reduce readmissions</li> <li>Support the participant</li> <li>What did we aim for:                 <ul> <li>Increase rates for project indicators across all regions by end of 2023</li> <li>What were our objectives:</li></ul></li></ul></li></ul> |                                     |                                   |                      |
| C. CLAS: Culturally and<br>Linguistically<br>Appropriate<br>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.  | N/A                                 | N/A                               |                      |
|  | This concluded the Board Committee meeting at 3:45 PM with a reminder that the next meeting will be September 2024.   |                                     |                                   |                      |

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June 12, 2024

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|--------------------------|--|-------------------------------------|-----------------------------------|----------------------|
|                          |  |                                     |                                   |                      |
| VII. Next Meeting Date + | September 2024                                 | N/A                                 | N/A                               | N/A                  |
| VIII. Adjournment *      | Greg asked for a motion to adjourn at 3:45 PM. | Adjourned                           | N/A                               | N/A                  |

Respectively submitted,

| Minutes prepared by (name & title):                       | Signature: | Date:     |  |
|---|------------|-----------|--|
| Kayla Stadelman, Community Health Services Representative |            | 6/12/2024 |  |