

# South Carolina Department of Health and Human Services Transportation Advisory Committee

## Quarterly Meeting Minutes

September 23, 2010 - 10:00 am

1801 Main Street, Columbia SC – 10<sup>th</sup> Floor Conference Room

### Committee Members in Attendance:

Lynn Stockman, Scott Lesiak, Angel Hechanova, Keith Guest, Jonathon Teeter, Valorie Williams, Scott Jones, Chuck DeZearn

### DHHS Staff Facilitating the Transportation Advisory Committee:

Sheila Platts, Mike Benecke, David Giesen, Beverly Hamilton, Vicki Johnson

### Public Attendees:

Chad (Community Pastor Care), James (Community Pastor Care), Steve Buckner, Paula Bundy, Candace Knight, Janice Baroodly, Joseph Saleeby, Neal Glomb

#### I. Welcome and Introductions

Committee Chairman, Scott Jones, welcomed everyone to the meeting.

#### II. Purpose of Transportation Advisory Committee (TAC)

A Proviso was established to create a committee of members that are involved or affected by the transportation services that are offered to Medicaid beneficiaries. This creates a forum to provide input to the Department of Health and Human Services (DHHS) and give advice on how the transportation services are handled.

#### III. Procurement Update

The RFP has been posted through the Materials Management Office (MMO). This can be found on their website ([www.mmo.sc.gov](http://www.mmo.sc.gov)). Direct any questions related to this RFP to the MMO Procurement Manager, Daniel Covey.

#### IV. CMS Site Visit

CMS performed an unofficial site visit during the last week of August/first week of September. In addition to visiting with other service areas, they wanted to observe the Transportation Broker services. Due to the location of offices for the brokers, CMS chose to visit LogistiCare's Regional office in Columbia. CMS was able to visit the local office and observe a "mini" transportation inspection blitz. The agency received good feedback. As this was not an official visit, CMS will not give a written report.

#### V. Program Monitoring Tools / Activities

- a. Transportation Broker Performance Reports (April – June 2010) – Trips, Denials, and Complaints By Region (SFY 2010, SFY 2009 Final, SFY 2008 Restated)

Valorie Williams, MTM – We have seen an increase in members. The average answer speed has increased. This is due to a turnover in our

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office. We have hired new staff; however it takes them a while to feel comfortable with calls and procedures. Provider No-Shows have increased. To improve this, we are continuing provider trainings and performing site visits.

Chuck DeZearn, LogistiCare – Over the past couple of months, we have seen about a 15% increase in the number of phone calls. We have had some turnover. To get back up to full staff, we have people in training now and another class to follow. About 85% of the incomplete information denials are re-booked within 24 hours.

While looking at the denials for Incomplete Information for MTM and LogistiCare, you will notice that MTM does not indicate this in the monthly report because they can complete the initial information within their system. The MTM system does not report a partial trip where LogistiCare's does; thus, the number of denials showing in the LogistiCare reports. With MTM's system they are able to save a partial trip and edit the trip when the member calls back. DHHS program staff have thoroughly reviewed this issue and are comfortable with the reporting difference.

#### **b. Transportation Provider Performance Reports**

These reports were distributed and reviewed by TAC members.

#### **c. Transportation Accounts Payable Aging Reports**

Valorie Williams, MTM – There are 4 companies that have some significant outstanding balances. Our accounting and reconciliation departments have been working with a specific provider to send in specific information to us so the trip can be paid. If information is missing the payment is suspended. We have also been working with a provider to determine if money is owed. According to the provider no money is owed, our systems show that money is owed.

Chuck DeZearn, LogistiCare – 92% of invoices received are paid within 20 days of receipt.

#### **d. DHHS Internal Complaint Tracking**

This report shows the number of complaints received by Health and Human Services staff. Please note that a large percentage of these complaints continue to come from one member.

#### **e. Report Of Injuries / Incidents**

At the last meeting, the significance of injuries and incidents was brought up by the committee. The agency discussed the possibility of having committee members present during the monthly review of injuries/incidents. It was determined that having a committee member present during the agency's review would be a HIPAA violation. The

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agency has proposed to prepare a Summary of Reported Rider Injury and Incidents. (See handout) Initial review by the TAC members was positive; further discussion will be held at subsequent meetings.

### **f. Report Of Meetings**

See handout.

### **g. Program Review and Field Observation Site Visits**

See handout.

## **VI. Reporting Review**

The agency asked for input on the reports that are provided to the committee. Are they useful, need changes, etc.? Does DHHS need to continue with the distribution?

Keith Guest – Is there a standardized way to for each broker to score their providers for the Provider Report Cards?

Valorie Williams and Chuck DeZearn agreed to discuss and see if this is something that can be done.

## **VII. SC Medicaid Transportation Program - 2010 Goals**

### **a. More Comprehensive Program Oversight**

The agency is performing site visits, meeting with the brokers to review their call centers and reviewing operations to see how they are servicing our beneficiaries. Performing call calibration sessions where the brokers send us actual calls and we review and rate them independently and together with the broker. We review complaints and resolutions and as a result we are seeing more detailed and better reporting of resolutions from the brokers.

### **b. Beneficiary and Family Member Interaction**

While performing site visits, agency staff members are able to talk with the beneficiaries and their family members to determine their satisfaction/issues of concern about the Broker system and specific transportation providers. Much insight has been gained to help continue improvements in this system.

### **c. Service Delivery Reporting**

The agency and brokers are working to establish a uniform method for calculating on time performance.

### **d. Overall Reduction in Injury and Incidents**

Brokers are utilizing information from the provider site visits to increase training of direct service providers to continually improve rider safety and decrease incidents and/or injuries.

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**VIII. Advisory Committee – Current Issues/Concerns**

Committee members requested more information regarding the incidents and injuries; specifically looking for details around the injuries. Are they related to seat belts, getting scratched entering/exiting the vehicle, etc.?

Keith Guest – With the increase in trips for each broker, has the general Medicaid population increased?

Beverly Hamilton – Yes. There have been about 5,000-7,000 members coming on to Medicaid per month for the past few months. As the recession has hit in the economy, enrollment numbers with South Carolina Healthy Connections has gone up. For more specific budget information, please visit the agency website ([scdhhs.gov](http://scdhhs.gov)) and review the “Budget Sustainability Project” information. The agency anticipates declaring a deficit by the spring of 2011.

Keith Guest – Due to the change in email addresses, would it be possible to transcribe the sign in sheet and send this information out with the minutes?

Beverly Hamilton – Yes, as long as the sign in sheet is legible.

Next Meeting – Thursday, December 16, 2010 at 10:00am, 1801 Main Street, Columbia, SC

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Broker Report Card - MTM



Transportation Metrics	April 2019 Final	May 2019 Final	June 2019 Final	SPY 2019 Of Totals	SPY 2018 Totals
<b>Total trips provided by type of transportation</b>	<b>51,044</b>	<b>49,339</b>	<b>51,552</b>	<b>151,935</b>	<b>591,259</b>
• Non-Emergency Ambulatory Sedan/Van Trips	35,008	33,991	35,143	104,142	413,397
• Wheelchair Trips	6,643	6,408	6,614	19,665	79,334
• Stretcher Trips	834	792	886	2,512	9,466
• Individual Transportation Gas Trip	8,422	8,054	8,729	25,205	88,269
• Non-Emergency Ambulance/BLS (Broker Sponsored)	1	0	0	1	13
• Public Transportation Bus Trip	136	94	180	410	780
• Extra Passenger - Not Added To Total Trips	3,653	3,428	3,790	10,871	41,786
<b>Actual number of calls</b>	<b>18,279</b>	<b>16,643</b>	<b>18,981</b>	<b>53,903</b>	<b>215,526</b>
• Average phone calls daily	609	537	633	593	591
• Average Answer Speed	01:17	00:42	00:35	00:51	00:46
• Average Talk Time	04:09	03:52	03:49	03:57	03:41
• Average Time On Hold	03:09	03:01	02:45	02:58	03:23
• Average time on hold before abandonment	03:43	02:45	03:20	03:16	03:02
• Average number of calls abandoned daily	55	27	31	38	43
<b>Total number of complaints by type</b>	<b>240</b>	<b>113</b>	<b>171</b>	<b>524</b>	<b>1,796</b>
• Provider No-Show	126	24	60	210	704
• Timeliness	64	51	53	168	595
• Internal Complaint	23	16	19	58	189
• Call Center Operator	0	0	0	0	0
• Driver Behavior	18	14	22	54	194
• Provider Service Quality	4	3	9	16	38
• Miscellaneous	1	0	0	1	11
• Rider Injury / Incident	4	5	8	17	65
• Complaints as percentage of total trips	0.47%	0.23%	0.33%	0.34%	0.30%
<b>Total number of denials by type</b>	<b>686</b>	<b>848</b>	<b>960</b>	<b>2,494</b>	<b>6,736</b>
• Non-Urgent / Under Days of Notice	369	546	559	1,474	3,144
• Non-Covered Service	98	105	120	323	1,037
• Ineligible For Transport	28	35	84	147	644
• Unable to Confirm Medical Appointment w/ Provider	37	17	29	83	223
• Does Not Meet Transportation Protocols	39	45	48	132	486
• Alternate Forms Of Transportation Available	0	0	0	0	0
• Not a Medicaid Enrolled Provider	27	26	25	78	284
• Incomplete Information	0	0	0	0	0
• Wrong Level Of Service And Ambulance	20	13	14	47	162
• Beneficiary Has Medicare Part B	68	61	81	210	758
• Denials as percentage of total trips	1.34%	1.72%	1.86%	1.64%	1.14%

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Broker Report Card - Logisticare



	2018	2019	2020	2021	2022
<b>Total trips provided by type of transportation</b>	<b>105,380</b>	<b>98,763</b>	<b>106,147</b>	<b>310,290</b>	<b>1,221,396</b>
• Non-Emergency Ambulatory Sedan/Van Trips	86,233	80,873	87,781	254,887	1,008,969
• Wheelchair Trips	14,970	14,024	14,187	43,181	166,682
• Stretcher Trips	1,307	1,224	1,431	3,962	15,526
• Individual Transportation Gas Trip	2,522	2,318	2,414	7,254	28,064
• Non-Emergency Ambulance/BLS (Broker Sponsored)	0	0	0	0	0
• Public Transportation Bus Trip	348	324	334	1,006	4,155
• Extra Passenger - Not Added To Total Trips	0	0	0	0	0
<b>Actual number of calls</b>	<b>39,928</b>	<b>37,250</b>	<b>42,382</b>	<b>119,580</b>	<b>467,593</b>
• Average phone calls daily	1,536	1,490	1,630	1,552	1,523
• Average Answer Speed	00:34	00:55	00:59	00:49	00:36
• Average Talk Time	03:49	03:56	03:51	03:52	03:47
• Average Time On Hold	00:59	01:03	00:47	00:56	00:53
• Average time on hold before abandonment	00:44	00:52	00:59	00:52	00:50
• Average number of calls abandoned daily	38	61	74	58	41
<b>Total number of complaints by type</b>	<b>779</b>	<b>570</b>	<b>683</b>	<b>2,032</b>	<b>7,425</b>
• Provider No-Show	116	111	122	349	1,413
• Timeliness	467	323	383	1,173	4,018
• Internal Complaint	89	57	50	196	798
• Call Center Operator	21	4	10	35	239
• Driver Behavior	5	1	3	9	43
• Provider Service Quality	2	4	5	11	78
• Miscellaneous	58	55	79	192	638
• Rider Injury / Incident	21	15	31	67	200
• Complaints as percentage of total trips	0.74%	0.58%	0.64%	0.65%	0.61%
<b>Total number of denials by type</b>	<b>3,123</b>	<b>3,033</b>	<b>3,108</b>	<b>9,264</b>	<b>34,232</b>
• Non-Urgent / Under Days of Notice	371	374	319	1,064	4,685
• Non-Covered Service	354	328	368	1,050	4,312
• Ineligible For Transport	107	119	115	341	1,677
• Unable to Confirm Medical Appointment w/ Provider	27	31	89	147	491
• Does Not Meet Transportation Protocols	0	2	0	2	20
• Alternate Forms Of Transportation Available	0	0	0	0	3
• Not a Medicaid Enrolled Provider	0	0	0	0	0
• Incomplete Information	1,066	980	1,033	3,079	10,562
• Wrong Level Of Service And Ambulance	1,198	1,199	1,184	3,581	12,482
• Beneficiary Has Medicare Part B	0	0	0	0	0
• Denials as percentage of total trips	2.96%	3.07%	2.93%	2.99%	2.80%