



**South Carolina Department of Health and Human Services  
1801 Main Street, Columbia, South Carolina, 29201-8206  
10<sup>th</sup> Floor Conference Room**

**Transportation Advisory Committee  
Meeting Minutes  
September 26, 2013**

**Committee members in attendance:** Coretta Bedsole, Doug Wright, Jim Spearman

**Committee members via telephone:** Lydia Hennick, Gloria Prevost, Crystal Hart  
Scott Lesiak

**Others in attendance:** Denise Rivers, Krista Martin, Dayna Holford, Jill Holt, Lisa  
Firmender

**DHHS staff:** Michael Benecke, Martha Mitchell, Audrey Williams

**I. Welcome and Introductions**

Coretta Bedsole, Chairperson called the meeting to order.

**II. Purpose of the Transportation Advisory Committee (TAC)**

The purpose of the TAC meetings is to meet quarterly to review performance reports and to make recommendations to resolve issues or complaints.

**III. Meeting Minutes Approval**

The committee approved the meeting minutes for June 27, 2013.

**IV. Transportation Provider Survey - Review Top 10 Recommendations**

Michael Benecke gave an update of the top recommendations. Four TAC members sent in their top ten recommendations. DHHS received 49 recommendations that were consolidated to form the top ten. The first recommendation on the top-ten list was "DHHS should really listen and follow through on patient and provider complaints and hold the Broker accountable for deficiencies". It was noted that the recommendation was very high level and that it would be helpful to develop more specific actionable tasks that could be implemented and tracked for progress.

The TAC discussed how complaints are handled and if all complaints received through the Broker or DHHS were followed up on and if the person that registered the complaint is notified. The person registering a complaint is notified by either DHHS and or the Broker. The TAC committee gets a summary of complaints in their quarterly reports.

Mr. Benecke suggested an actionable task that may address the recommendation for DHHS to really listen and follow through on patient and provider complaints would be to develop a formal grievance process at DHHS. The TAC committee agreed to support DHHS effort to set-up a formalized grievance process.

Coretta Bedsole asked the TAC members to review the top 12 recommendations and send detailed suggestions to Mr. Benecke by close of business, Friday, October 18<sup>th</sup>.

The TAC committee also discussed the recommendation for consumer choice. Krista Martin explained that the Broker does honor the member's request for a particular transportation provider, however it is not guarantee. Mr. Benecke wanted to further discuss consumer choice because of the conflicting understanding of consumer choice by committee members. One comment was to remove it from the list because the consumer can already request a provider and the other comment was consumers may have a choice, but the Broker does not honor the request. Mr. Benecke said consumer's choice is important. If a consumer or client requests a specific provider and there are no issues with that driver or company LogistiCare will generally honor the consumer's or client request, again it is not guaranteed all the time.

There were comments made concerning why consumers are not guaranteed the requested provider. Using the lowest cost provider was mentioned as a possible reason for the member not to get the provider requested. Transportation provider performance is also a factor in trip assignment. Krista Martin stated that it is the goal of the Broker to make sure every consumer gets top performing transportation providers.

The committee also discussed the possibility that communication and the lack of training may be contributing to some of the issues. Coretta Bedsole stated based on some of the discussion, that information may or may not be shared with the transportation provider's staff and that sounds like a communication problem. The committee discussed the possibility of developing a communication mechanism such as a webinar that could be made available to a wider audience including drivers. At a recent broker regional advisory committee meeting held in Charleston, there was also discussion about healthcare providers not understanding all the requirements and the NEMT program. Several recommendations were discussed including:

- Creating printed material in notebook for each of the facilities that can be used for reference.
- Conduct webinars and put information on a website so anyone can access the training 24/ 7.

The availability of the web based training may also be helpful for drivers. The TAC agreed to support the training as discussed.

Doug Wright with Senior Solution has a driver video produced by his company that he will send to Mr. Benecke for review and possible use as a starting point for the development of a South Carolina specific NEMT driver training video. Mr.

Benecke asked committee members to send him any other related training videos. DHHS has a training department that may be able to assist in developing some training resources.

**V. Transportation Provider Performance Reports- Sub Committee Update**

Krista Martin distributed a draft of the new transportation provider performance report. The new report is intended to be easily understood without explanation. The committee reviewed the report and determined it would be beneficial to have a footer added to the report and to eliminate the column "Provider Cancellation Percentage". The next quarterly reports will be submitted in the new format.

**VI. Member Survey Update**

There was no new information to share about the member survey. The survey results will be posted to the DHHS website when available. Coretta Bedsole requested on behalf of the TAC members, that DHHS create a web page on the DHHS website specifically for the TAC. Mr. Benecke will initiate the request.

**VII. Regional Advisory Committee Updates**

- a. Provider No-Shows
- b. Member No- shows

At the request of DHHS, the LogistiCare regional advisory committees for each region are focusing on issues to work on that are impacting the program. The provider no-shows and member no-shows are issues that continue to negatively impact the efficiency of the program and are possibly causing members to miss their health care appointments.

Lydia Hennick provided an overview of the transportation provider no-shows and the member no-shows. The transportation providers that have made marked improvements in achieving the performance standards shared best practices at the meetings. To help address member no-shows, LogistiCare is planning to implement an outreach program to facilities where members are constantly no-shows. The Broker is tracking member no-shows and working on a way to automate the creation of a complaint based on the no-shows. Mr. Benecke asked that LogistiCare present the recommendations and best practices for addressing the no-shows at the next TAC meeting.

Based on the information available, about 3.5 percent of all trips end up as member no-shows. Mr. Benecke stated that DHHS is working to assist with outreach and education. The real concern is we don't know if members are getting health care services if they no-show for transportation.

**VIII. Stakeholder Input-Procurement Update**

No update.

A question was asked regarding the current contract end dates. In Region 1, it is a three year contract with two one year options with option years beginning in

May of 2014. For Regions 2 and 3, the contract is an emergency procurement with the contract end date in May 2014.

**IX. Program Monitoring Tools/ Activities**

The TAC members were asked to review the reports for question or concerns.

**X. Advisory Committee- Current Issues/ Concerns**

Doug Wright asked Krista to walk through a typical complaint for a "Where is my ride" call.

- If the Broker is aware of a failed service they are required to enter a complaint.
- On-time complaints are entered, if for example the A-leg pick-up time is 10:00 (the drivers have 30 minutes before and 30 minutes after pick-up time) and the client is a picked 10:35. It is considered a complaint because it did not meet the contractual requirement.
- When a client wants to enter a complaint.

The committee discussed repeat re-routes as an issue that the providers feel needs to be resolved. The providers are being penalized for re-routing trips they are not able to take. It was recommended by Mr. Benecke that the providers and the Broker work together to document what the specific issues are and potential solutions to those issues and present them to the group in the next TAC meeting. Doug Wright, Krista Martin and Scott Lesiak were appointed to a sub-committee to document issues and possible solutions regarding repeat re-routes.

The committee discussed emergency room discharges for people that use self-administered oxygen. This is a problem when a person is transported by EMS to the emergency room for treatment and they did not take their portable oxygen tank. When they are discharged they are prescribed to have self-administered oxygen and they don't have it with them. Self-administered oxygen is a Durable Medical Equipment (DME) item and the manual needs to be changed to allow payment for the temporary oxygen to be given to a member leaving the emergency room. According to the current policy and the provider manual, DHHS will pay for the portable oxygen supply to go to a facility, but not from a facility. DHHS is in the process of working on the policy change and the corresponding bulletin to have "from a facility" added to the manual. The policy change will ensure there are no issues with dispatching the trip at the appropriate level of service.

Meeting adjourned at 12:00 pm

Next meeting is scheduled for December 12, 2013

1801 Main Street, Columbia, South Carolina, 10:00 a.m.

11<sup>th</sup> Floor Conference Room