

Question & Answer (Q&A): Gathering and Using Member Feedback in Plan Governance

Webinar participants asked these questions during the March 2019 Gathering and Using Member Feedback in Plan Governance webinar. We have edited speakers' responses for clarity. The webinar recording, slides, and transcript can be found on the Resources for Integrated Care website:

<https://www.resourcesforintegratedcare.com/MemberEngagement/2019 ME Webinar Series/Gathering and Using Member Feedback in Plan Governance>

Featured Speakers:

- Matt Magnuson, Director of Membership and Program Development, PrimeWest Health
- Elizabeth Haskins, PrimeWest Health Member
- Tina Davis, Director of Outreach and Advocacy, First Choice VIP Care Plus
- Charmal Hill, Executive Assistant, First Choice VIP Care Plus
- Gwen Jackson, First Choice VIP Care Plus Member Advisory Council Participant and Administrator, Total Home Health Care of South Carolina

Gathering Member Feedback

Q1: What are some of the steps that you take to make sure that members' voices do not get overshadowed by community stakeholder participation?

Matt Magnuson: To keep meetings focused on member voices, we build time into every agenda for members to share their concerns and suggestions. While our stakeholders attend meetings and provide valuable feedback, we make it clear that meetings focus on members first.

Tina Davis: During the first year of our initial meetings, we noticed that we were not hearing from our plan members as much as we hoped to. We realized that there were as many committee stakeholders and plan associates as plan members, so we decreased the number of staff attending meetings and went on a campaign to recruit more members and caregivers for the meetings. This made a difference in our member engagement and helped members feel like they were the focal point at meetings.

Q2: Do you provide training, onboarding, or orientation to ensure you are getting feedback that is helpful?

Matt Magnuson: When we have new members join our meetings, we give an overview of PrimeWest and explain the PrimeWest departments and staff in the room. When members see PrimeWest staff in the room who are listening to member feedback firsthand, it helps convey

the value we place on their feedback. We also go through introductions at every meeting so that everybody knows who is in the room.

It is not necessarily a formal process. At every meeting with new members, we provide resources, including a printed PowerPoint training on member and enrollment services, utilization management, care management, and plan communications. When multiple new members are present in a meeting, we review the entire PowerPoint training during the meeting to ensure everyone is up to speed.

Our contact center specialists and coordinators, as well as representatives from other departments, also attend the meetings. They will often sit next to new members and assist them through their first meeting by making sure they have the agenda, as well as any paperwork they might need for reimbursement if they drove to the meeting.

Charmal Hill: We run a full orientation during our first meeting of the year. However, we hold a mini-orientation for 30 minutes before the start of regular meetings for new members who join throughout the year. During this time, we go over the focus, purpose, responsibilities, and privacy issues of the member advisory committee (MAC).

Q3: Tina, you mentioned implementing smaller breakout groups in your MAC meetings. This has helped you gather input from members who may feel more comfortable in a smaller group setting. Do you have any recommendations for facilitating successful breakout discussions? How many breakout groups do you have for each meeting?

Tina Davis: Each of our three meeting locations hosts a breakout session. We hold the breakout sessions simultaneously, and we make sure to have a representative from either leadership or from the MAC staff to facilitate the discussion. When we get back on the phone together as a group, one member from each breakout group is assigned to share the results of their conversation. We get to see who has the best ideas from their breakout discussion. It is fun because it often turns into a competition. Overall, it is important to have someone there to facilitate the discussion and appoint someone to share the results when you come back together.

Q4: Matt, what have you found helpful about holding combined meetings with members from all six of PrimeWest's programs?

Matt Magnuson: We initially started with separate member stakeholders committee meetings for each of our programs, and we would get stuck on specific topics. Once we combined our six programs into one meeting, we had a broader membership group and we heard new ideas and realized how much the programs actually have in common. It helps us focus on our entire population rather than trying to keep everybody separate and thinking about one program for older adults, one program for people with disabilities, and one program for our children and family members. It puts the discussions more into a community perspective.

Q5: Tina, you mentioned hosting caregiver focus groups to gather additional feedback on how your plan can better support members and their caregivers. Does the plan conduct these caregiver focus groups, or do you contract with a vendor? How do you identify caregivers? How many people turn out for the caregiver focus groups?

Tina Davis: The plan, as well as other plans within our parent company, hold caregiver focus groups in several states. Each plan generates a report to identify caregivers and we typically have 15 to 17 caregivers in each focus group.

Encouraging Member Participation

Q6: Tina, what are some of the strategies you have used to encourage attendance at your new member orientation?

Tina Davis: One way that we incentivize our new members to attend the new member orientation is by giving them a \$15 gift card. We send new members an invitation that explains the purpose and content of the orientation, and serves as a big, warm welcome to our plan. Our member services team, as well as the community relations coordinator, calls members directly and invites them to the meeting and lets them know what to expect. We also started having meetings during the day and in different counties based on where new members live.

Q7: Elizabeth and Gwen, what are some things that have been helpful in making you feel welcome or comfortable speaking up in meetings?

Elizabeth Haskins: One thing that helps is going around the room and giving introductions. This creates a feeling of openness and being in a safe environment, which encourages us to share our experiences and if we have any concerns.

Gwen Jackson: Those who are spearheading the meeting make the participants feel very relaxed. They want people to enjoy the meetings and share some of the things that they have experienced. Meetings are fun and informal, and create a space for open dialogue. Sometimes, people will even tell jokes during meetings. Participants know they are welcome to come in and share whatever they would like to. It is important to help them understand that everything they share is important-that no matter how trivial it might seem-it is important to First Choice VIP Care Plus.

Communicating and Incorporating Member Feedback

Q8: Matt and Charmal, what are the typical timelines from when members provide initial feedback on a benefit during a council meeting to when you make changes?

Matt Magnuson: It depends on what the issue is and how long it will take to implement. When it is a plan or benefit change, there are certain regulatory rules that must be followed for when those can be implemented. Some of them have to be included in bids. Other types of feedback,

such as member letters, can be implemented right away. For example, we made changes to our website right after receiving feedback. To provide another example, members brought up feedback on the wheelchair cushions at a time that we were adding a new program. We knew we could make plan changes at that time. Feedback was received at the end of 2008 and the change was implemented at the beginning of 2009.

Charmal Hill: There is a certain time each year that we can change our benefits. For the example we provided on adding a vision benefit, we discussed new benefit changes in the third quarter of 2016 and implemented the new benefit in 2017.

Agenda Items

Q9: Elizabeth, are there agenda items that you have found particularly interactive, personally engaging, or engaging to other members from the meetings you have attended?

Elizabeth Haskins: In addition to the website improvement discussion, other examples include discussions about dental benefits, and getting coverage of vitamins for older members who regularly take a lot of vitamins. These kinds of discussions are helpful because they help make members feel like they are not alone in their experiences. It validates that other people are in similar situations and going through the same things.

Q10: Do you have any advice for running a first committee meeting? Are there agenda topics you recommend?

Matt Magnuson: I recommend going through the member materials that you have. It is easy to walk through during the first committee meeting and listen to their feedback to determine if the materials are easy to use and come across the way they are intended to. It is a good area for members to provide feedback on, because we can easily make changes to member materials, instead of taking on a larger task, such as a benefit-related question that will take time to address. It is a good way to get feedback, make a change quickly, and show the committee their feedback is valuable.

Tina Davis: During the first meeting each year, we work with members to review benefits, services, the role of the care team, communication protocol, and plan relationships with state and federal government. In order to help familiarize new members with meeting discussion topics, we discuss our revolving action plan. The revolving action plan consists of several broad categories that we base our agendas on, including topics like health education and outreach programs, health screenings, and health plan communication materials. This gives members a chance to think about the specific topics and the type of feedback they want to give. Most importantly, we ask for feedback from members on the information shared during this first meeting, which helps inform and improve our efforts moving forward.