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Questions Following Presentations

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1. Currently, directing the care planning process and goal setting as well as navigating the health care system is dependent upon the ability of the person to reach out. What if the person for various reasons cannot advocate for themselves?
2. What is the “caseload” For care coordinator /care partner and how is it determined? What is the turnover rate? Are there problems with recruitment and retention?
3. What is in place to insure access for people who are deaf?
4. For BH needs – how are medical necessity issues resolved?
5. People tend not to reach out due to negative past experiences. What is being done to supporting a person to feel comfortable in speaking out?
6. Existing transportation systems don’t work (eg. RIDE) and should not be relied on. What are some of the initiatives to address transportation issues?
7. What is the approval process and access to alternative remedies (pain management)?
8. What do we need to do to improve provision of care to individuals with complex needs?
 - a. What can I get transportation to?
 - b. What is the preauthorization process? Is it member friendly and clearly understood?
 - c. What is and can be done to assist people who can’t get to appointments, due to depression or for another reason?
9. How can information of what is covered be more accessible and easier to understand? Very time consuming for person and care partner.
10. What is the process rationale for denials?
11. What is the connection between what is approved and what is needed (for example, walker type)?
12. What is the availability and access to flexible dollars to respond to a critical need for a member?
13. DME need that is connected to medical needs, which can limit the approval for assistive technology that is critical for daily life. What can be changed to make DME more available?
14. What is training for direct contact staff? Staff have a lot of responsibilities and some of the responsibilities take away from their focus on the person.
15. How do we prevent issues from happening?
 - a. What is done proactively?
 - b. From care coordinator?
16. How do we improve member experience on all fronts?
17. How do the plan address “outliers” to ensure that all peoples needs are addressed?
18. How can technology be viewed as more than medical and helps us survive?
 - a. How can staff be trained to understand this? There needs to be education on technology and how to use.
19. There needs to be clearer paths that are more easily understood on how identified concern is addressed. How can this be accomplished?