WEBVTT

1
00:00:00.000 --> 00:00:03.298
Recording.

2
00:00:03.298 --> 00:00:07.860
All right, we still have people joining us, but we're going to go ahead
and get started.

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00:00:07.860 --> 00:00:14.968
Um, as cat said, my name is Wanda Crocker, and I am the division state
lead for provider relations.

4
00:00:14.968 --> 00:00:29.039
And we're meeting today to talk about the divisions, organizational
efficiency, and specifically relates to provider relations. Most of you
have probably heard a little bit about organizational efficiency, but
many of you have not.

5
00:00:29.394 --> 00:00:44.064
So, including in the presentation today are some intro slides as to what
organizational efficiency is and why the division is on this journey of
examining how we do things and how we can do things better.

6
00:00:48.810 --> 00:01:02.520
So, organizational efficiency is basically a way of aligning the way we
do business we're reshaping the culture of the division to align efforts
across all levels to promote efficient and effective work practices.

7
00:01:02.520 --> 00:01:06.870
1 of our goals is to improve the support to our provider network.

8
00:01:06.870 --> 00:01:16.260
Which is what we're going to talk about today. We want to promote
outstanding customer service, the individuals with intellectual and
development disabilities, and their families.

9
00:01:16.260 --> 00:01:25.469
Some of our goals for realigning the functions within the division are
the regional structure to address local issues and built capacity.

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00:01:25.469 --> 00:01:39.775

Centralizing the functions that make sense for efficiency and consistency can be improved, established statewide workloads to minimize employees responsible for more than 1 job role or an equal amount of load.

11
00:01:39.805 --> 00:01:42.444
Then perhaps someone in a different region has.

12
00:01:42.780 --> 00:01:46.799
We want to utilize data to measure progress to make decisions.

13
00:01:46.799 --> 00:01:52.980
Established performance measures at the staff unit, regional office and division level.

14
00:01:52.980 --> 00:01:59.280
And we're planning to reshape our work culture to promote problem solving rooted and inner divisional teamwork.

15
00:01:59.280 --> 00:02:05.459
And obviously to make all of that possible, we have to secure the technology to support efficient work practices.

16
00:02:06.480 --> 00:02:14.669
So, why are we looking to change the some of these things are absolutely no shock to any of you because you live it every day.

17
00:02:14.669 --> 00:02:21.240
Our regulatory requirements increase while our resources and manpower remain and changed.

18
00:02:23.280 --> 00:02:32.219
We need to improve our consistency and every function we need to improve our job performance and our set job satisfaction.

19
00:02:32.219 --> 00:02:43.710
Managing reactively is not efficient or effective, so learning how to manage differently and more efficient is key and reacting does not resolve systemic issues.

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00:02:43.710 --> 00:02:55.949
Why now we think everyone's probably heard of connection by now, but it's our new information management system that we're building, and it is going to modernize how the division conducts business.

21
00:02:55.949 --> 00:03:06.870
We're looking at streamlined practices and communication methods that
this system is going to create and so we need to make sure we have the
structure in place that accommodates and compliments.

22
00:03:06.870 --> 00:03:14.699
The system we're building, we want to be progressive, so we cannot carry
inefficient or ineffective practices into the new system.

23
00:03:14.699 --> 00:03:26.219
We need to break down existing silos that stand in the way of our
progress. So that's something that we look at as we look at org
efficiency as what are our barriers. And how do we break those down?

24
00:03:27.389 --> 00:03:30.719
So, right now we have 3 phases.

25
00:03:30.719 --> 00:03:40.710
Of implementation outlined phase 1 was provider relations, community,
living coordinators, the behavior services and self directed services.

26
00:03:40.710 --> 00:03:46.620
Phase 1 has been approved and we are.

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00:03:46.620 --> 00:04:00.389
Fast implementing in fact, you might have participated in the tier 2 risk
prevention team presentation in June that team previously known as
coordinators.

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00:04:00.389 --> 00:04:04.469
And so, in June, they held an event to discuss.

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00:04:04.469 --> 00:04:15.629
The changes that they have made through org efficiency and how it impacts
providers and families. If you missed that event, you can find that on
our website under webinars.

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00:04:15.629 --> 00:04:20.490
Under previous webinars, so that you can learn more about the specific.

31
00:04:20.490 --> 00:04:27.028
Activities related to community, living coordinators and their transition
into a tier to risk prevention team.

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00:04:27.028 --> 00:04:31.528
Um, the phase 2 planning is underway.

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00:04:31.528 --> 00:04:44.184
Um, the presentations have been made before the resource referral on the
TCM technical assistance, and we, there's no start data implementation at
this time for those.

34
00:04:44.483 --> 00:04:52.163
And then we do have a phase 3 where we're starting to look at all of
those functions. The goal is to reexamine every function of the division.

35
00:04:52.913 --> 00:05:06.954
And look out what makes sense for that function and how can we organize
it to work better so, when approve the teams develop transition plans and
set target implementation date and we'll talk about the implementation
targets for phase 1 here in a little bit.

36
00:05:08.184 --> 00:05:16.283
We'll do presentations to stakeholder groups to explain the new
structure. Hence the June presentation from the tier 2 risk prevention
team and the presentation. Now.

37
00:05:16.588 --> 00:05:23.908
From provider relations and we'll monitor implementation review. What's
working and not working and implement solutions.

38
00:05:24.533 --> 00:05:36.144
We recognize that what we're undertaking is huge and and I think when we
really started digging into provider relations, it really became so much
more apparent.

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00:05:37.014 --> 00:05:45.144
Just how big an undertaking it is to look at how to create efficiencies
in a single unit much less as an entire state.

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00:05:45.624 --> 00:05:55.223
So, there's no saying that we have figured everything out perfectly on
the 1st, try what we can promise to you what we've promised to our staff
and to ourselves. Is that.

41
00:05:55.528 --> 00:06:06.028

We're dedicated to examining and reexamine what we've implemented and if we didn't get it right the 1st time, let's come back to the table and let's Relook at.

42
00:06:06.028 --> 00:06:09.569
An alternate plan to see if it'll work.

43
00:06:09.569 --> 00:06:15.028
So we want to talk with you obviously about provider relations so I'll dig right into it.

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00:06:15.028 --> 00:06:23.249
And I'm going to share with you, the 1st slide is the provider relations structure, as you've known it prior to this date.

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00:06:23.574 --> 00:06:35.303
What many people did not realize is when they think provider relations, they think the vendor service coordinator who works with providers. So that actually was not the entirety of the provider relations unit.

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00:06:35.574 --> 00:06:38.934
The provider relations unit was 3 separate functions.

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00:06:39.209 --> 00:06:42.689
It was vendor service coordinators who are.

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00:06:42.689 --> 00:06:54.238
Basically, the equivalent for providers, what support coordinators are for individuals, or what TCM tax are for CCM entities. It also includes a community living coordinator.

49
00:06:54.238 --> 00:06:58.439
And it also included the self directed supports coordinator.

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00:06:58.439 --> 00:07:04.738
So, within 1 unit called provider relations, we had 3 very distinct separate functions.

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00:07:05.004 --> 00:07:13.793
And then, as we'll talk about later, even within each 1 of those functions, there were sub functions. And so that's what we looked at.

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00:07:14.093 --> 00:07:20.574

You can see from our existing map that the provider relations that, you know, today has 11 leads.

53
00:07:21.088 --> 00:07:24.238
Posted at different regional and satellite offices.

54
00:07:24.238 --> 00:07:29.639
They currently supervise vendor service corner.

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00:07:29.639 --> 00:07:36.178
Um, and so that's 1 supervisor supervising 3 distinct functions uh, some team's.

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00:07:36.178 --> 00:07:41.129
Some supervisors are supervising 8 people, some supervisors are supervising 1.

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00:07:41.129 --> 00:07:49.108
And then those PR leads were supervised by 8 different supervisors.

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00:07:49.108 --> 00:07:53.759
Across regional directors and assistant regional directors.

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00:07:53.759 --> 00:07:59.098
And so, um, so we really took a look at that. And what makes sense.

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00:07:59.098 --> 00:08:03.088
And how can we create expertise.

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00:08:03.088 --> 00:08:07.588
And specialist in the function.

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00:08:07.588 --> 00:08:19.379
If their supervisor isn't a specialist, or can't be, because there are over so many functions. So that's part of what we did. So I share with you what we're.

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00:08:19.379 --> 00:08:25.559
Transitioning to you. So the transition plan.

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00:08:25.559 --> 00:08:31.499

And what we're already in the movement towards, we decided to separate the self directors.

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00:08:31.499 --> 00:08:37.558
Support teams and the community living coordinators into their own unit.

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00:08:37.558 --> 00:08:47.129
With their own specialized supervisors underneath the lead, the state lead or director for that specific program. So the.

67
00:08:47.129 --> 00:09:01.644
Um, are all moving underneath 2 specific specialized supervisors who only specialize in self directed services and they are supervised by the director of community living or self directed services.

68
00:09:03.474 --> 00:09:14.903
So the are all transitioning into their own unit under 3 CLC supervisors who specialize in that function and guiding those staff and their function and they are,

69
00:09:15.203 --> 00:09:19.254
those supervisors are supervised by the tier 2 state lead.

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00:09:20.369 --> 00:09:26.399
Who specializes in that function and then she is supervised by the chief behavior analyst.

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00:09:26.399 --> 00:09:36.058
So that leaves us with the way we wound up constructing it. We were able to create.

72
00:09:36.058 --> 00:09:39.298
Create the supervisors.

73
00:09:39.298 --> 00:09:47.399
From within the specialized unit so the 2 supervisors are actually previously.

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00:09:47.724 --> 00:10:00.264
Not so what we chose to do was reallocate some vacant to be able to create the supervisors from the specialist that were performing the work.

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00:10:00.653 --> 00:10:09.833

So that was super exciting because then, who know the work, the best are creating are supervising and likewise for the CLC.

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00:10:11.153 --> 00:10:25.494
And so that meant that provider relations as we know it as we're growing and changing into it's keeping all 11 of the PR leads, but we're going to separate into specialized function. So.

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00:10:25.859 --> 00:10:32.339
The PR leads that you are most familiar with and work with are the purely supervised vendor service coordinators.

78
00:10:32.339 --> 00:10:37.109
And so instead of 11 there will be 6.

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00:10:37.109 --> 00:10:43.109
And as 6 leads supervising 19 vendor service coordinators.

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00:10:43.109 --> 00:10:48.719
That will be a supervisory load of no less than 3 and no greater than 5.

81
00:10:49.283 --> 00:11:00.953
So, we won't have the extreme highs and extreme loads of supervision there anymore. It does create some challenges because that means PR leaves are crossing over into regions that they haven't worked before.

82
00:11:02.063 --> 00:11:16.433
But the vendor service coordinator is the constant. They're the 1 that you all work with the most often. So so you've probably asking I see some little other little circles there. And so what did you do with the other 5?

83
00:11:16.433 --> 00:11:17.903
Pr leads? Well.

84
00:11:18.239 --> 00:11:21.509
We are really, really excited.

85
00:11:21.509 --> 00:11:30.719
So these 2 things that the remaining 1, we are creating or have created and enrollment and contract and rate team.

86
00:11:30.719 --> 00:11:43.798

So, what that team does, that's all 3 of those people are provider relations leads, or were supervisors of vendor service coordinators, and they are going to specialize in New provider enrollments.

87
00:11:44.813 --> 00:11:48.984
And I'm going to get into a little more detail of their specialization here in a minute on a different slide.

88
00:11:48.984 --> 00:12:00.203
So, I don't want to get too carried away, but I get excited when I talk about them and the other 2 PR leads are going to become dedicated assistive, technology and universal design.

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00:12:00.538 --> 00:12:11.879
Team members, and that will be a team of 3 because there was a vendor service coordinator who you see community living coordinator. You has a passion for.

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00:12:11.879 --> 00:12:19.229
Um, universal design and modifications, and he's joining that team. So by examining.

91
00:12:19.229 --> 00:12:27.538
What we had, and where we could move with it, we were able to create specialized units or sub units.

92
00:12:28.494 --> 00:12:39.474
So that what that does is the remaining PR leads in the vendor service course, were previously doing everything that the enrollment and contracts specialists are going to do their previously doing everything.

93
00:12:39.474 --> 00:12:47.543
The assistive technology universal design team did does, or parts of it. So, it's going to allow each function to separate.

94
00:12:47.879 --> 00:12:52.408
And focus on a smaller task at hand, a smaller structure.

95
00:12:52.408 --> 00:12:59.489
That we're hoping to create better knowledge, more consistencies and answers and, and just.

96
00:12:59.489 --> 00:13:03.989
And just, you know, when you're when we've all done more.

97
00:13:03.989 --> 00:13:18.658
With exactly what we had 10 years ago, we've all done more and so I think people are really excited about being able to say, I don't have to know that anymore because there's a specialist for that. So, um, we've had a lot of fun with.

98
00:13:18.658 --> 00:13:26.938
Um, I'd like to introduce you to the new enrollment team to answer your question. So you've had a lot of fun with that in the last few weeks of.

99
00:13:26.938 --> 00:13:35.068
Of referring that to our new specialists. So now I'm going to share with you. Exactly what those functions look like.

100
00:13:35.068 --> 00:13:39.208
So, I want to look at the provider enrollment and rate team. 1st.

101
00:13:39.208 --> 00:13:46.259
So, again, this is 3 PR, leads who previously supervised vendor service coordinators.

102
00:13:46.259 --> 00:13:50.188
They are going to man all new provider enrollment.

103
00:13:50.188 --> 00:13:55.589
Contacts I'll review all applications that come in.

104
00:13:55.589 --> 00:14:09.208
Do all of the initial truck with that provider and policy and procedure and design set up working through certification, if necessary, et cetera, all the way through them actually having.

105
00:14:09.208 --> 00:14:12.599
The capacity to Bill and Seymour, at which time?

106
00:14:12.599 --> 00:14:17.519
Well, they'll transition to a vendor service coordination team does that, um.

107
00:14:17.519 --> 00:14:22.558
We get on average 80 to a 100 inquiries a month.

108
00:14:22.558 --> 00:14:29.278
For community members, he wants to become provider providers for a
division, a developmental disabilities.

109
00:14:29.278 --> 00:14:33.869
We get lots of applications that.

110
00:14:33.869 --> 00:14:44.668
Are not approved and we get applications that are so this team is going
to man that it's going to create an efficiency in that right now we have
40 people meaning that process.

111
00:14:44.668 --> 00:14:48.328
And when they're meaning it, it then touches.

112
00:14:48.328 --> 00:14:56.879
4 people, so now we're going to have 3 people Manning that process and
it's going to touch 2 people or route through the hands of 2 different
people.

113
00:14:56.879 --> 00:15:00.028
So that's a huge efficiency.

114
00:15:00.533 --> 00:15:02.994
Contract service additions you as an existing provider,

115
00:15:02.994 --> 00:15:05.033
want to add a service to your contract,

116
00:15:05.033 --> 00:15:17.394
you'll start with your local vendor service coordinator who's going to
gather information get make sure everybody at the regional offices on
target and then the enrollment team is actually going to work with you
through,

117
00:15:17.604 --> 00:15:19.344
do I need new certification?

118
00:15:19.344 --> 00:15:28.073
Am I good with certification? Do I have qualified staff? And then they
will add that to your contract when you have everything that any in
place.

119
00:15:28.349 --> 00:15:36.119
We have 4 to 5 ownership changes or name changes in a year recently. It's been an uptick.

120
00:15:36.119 --> 00:15:48.509
If any of you have gone through that it's providers, you know, that that is a very squarely process. It's very challenging. There's no to exact same situations. And when you have 40 people statewide.

121
00:15:49.254 --> 00:15:56.453
Trying to do that who may not have touched that subject for 5 years that's a challenge. So we're narrowing it down.

122
00:15:56.453 --> 00:16:09.053
And now these 3 people are going to facilitate those processes to get consistent answers, consistent processes written so that we can help providers move through that change a lot quicker and smoother.

123
00:16:09.629 --> 00:16:16.408
Um, the other thing we're super excited about this team is also going to be processing all rate allocations score.

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00:16:16.408 --> 00:16:29.729
Communications so previously, again, 40 provider relations team members across the state involved with communicating, whether a person receives an and necessitates the rate change or doesn't.

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00:16:29.729 --> 00:16:35.609
And what that rate is so effective July 1 the.

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00:16:35.609 --> 00:16:39.958
Provider enrollment team started processing those communications.

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00:16:39.958 --> 00:16:43.678
So, that has streamlined it quite a bit.

128
00:16:43.678 --> 00:16:52.979
What's really exciting for you all I know is providers. Consistency is always something that is an issue.

129
00:16:52.979 --> 00:17:05.608

And in concerning, and sometimes things get missed when there's so many hands trying to accomplish something. Um, so this 3, man team is streamlining the process. We've worked with the assessment.

130
00:17:05.608 --> 00:17:16.888
Or the assessment team to create a more streamlined process of communication, and it's going to eliminate the need for support coordinators and providers to submit additional documentation.

131
00:17:16.888 --> 00:17:22.318
For obvious changes for and group homes unless.

132
00:17:22.794 --> 00:17:37.253
You have temporary staffing, adjustments, authorized, because that's that's not something that we can not see budgetarily or fix for you in the billing system, but all of the and standard group homes that they can adjust.

133
00:17:37.253 --> 00:17:52.013
And so we're working with the business office as well to create a system where the enrollment team, and the business office modify those authorizations and budgets, and make those changes without any additional paperwork from a support coordinator provider.

134
00:17:53.003 --> 00:17:53.513
So,

135
00:17:53.544 --> 00:17:59.273
I think that's a huge enhancement that no one's going to be chasing paperwork to,

136
00:18:00.114 --> 00:18:09.894
to get a rate changed and things will happen be part of the process and happen immediately instead of waiting a week or 2 weeks for another part of the process to happen.

137
00:18:09.894 --> 00:18:13.584
Through paperwork, so we're hoping that you all will see that.

138
00:18:13.858 --> 00:18:17.999
Um, enhancements and feel that relatively quickly.

139
00:18:17.999 --> 00:18:23.429
They do have their own mailbox because new provider applicants.

140
00:18:23.429 --> 00:18:33.388
Have to know who to call if they're interested in becoming a provider
when connection is on board provider enrollment will completely be done
online.

141
00:18:33.388 --> 00:18:43.169
And they'll apply through connection, it'll all be reviewed and processed
through connection and they won't need this email box. But until then we
need that email box. Um.

142
00:18:43.169 --> 00:18:57.239
And just to reiterate, even though they're doing these things, I'll
existing providers who want to add services to their contract that
communication is still starts with your local vendor service coordinator
because the regional office needs to know.

143
00:18:57.239 --> 00:19:00.868
What's happening? And then they'll route you um.

144
00:19:00.868 --> 00:19:05.578
To, you know, to the next step so we're really excited about those
changes.

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00:19:05.578 --> 00:19:16.048
The next specialized team is a system technology, universal design, their
responsibilities is going to be onboarding assistive, technology and
homepod providers.

146
00:19:16.048 --> 00:19:21.689
They'll be doing consultation with the port coordinators utilization
reviews.

147
00:19:21.689 --> 00:19:25.409
Regional offices and the stakeholders in general.

148
00:19:25.409 --> 00:19:31.888
They are already working towards training and resources for onboarding
and ongoing purposes.

149
00:19:31.888 --> 00:19:40.078
They're going to carry a dedicated case load of assistive technology and
Oman providers so that to support their vendor service coordinators at
the local level.

150
00:19:40.078 --> 00:19:47.308
Won't have to maintain the knowledge about these 2 services. Um, this
specialized unit is going to do that.

151
00:19:47.308 --> 00:19:57.114
Um, we have website development and maintenance that they're going to be
responsible for we have an interstate consortium that we participate with
other states are pursuing technology.

152
00:19:57.114 --> 00:20:05.693
1st, and we're currently collaborating with Missouri Department of health
and senior services to expand their assistive technology effort and share
resources.

153
00:20:06.028 --> 00:20:09.509
We currently have 3 different.

154
00:20:09.509 --> 00:20:23.969
Technology or housing related contracts with outside entities, and that
station empty housing and shift and this team will be the holders or
owners of those contracts and point persons for communications.

155
00:20:23.969 --> 00:20:30.419
And only as we started working through or efficiency, did we really start
finding out.

156
00:20:30.419 --> 00:20:43.739
You know, when you start specializing and you start looking at data, just
on 1 thing that maybe nobody has looked at before you really find out a
lot of information about how things.

157
00:20:43.739 --> 00:20:47.939
Are not consistently understood about a service and.

158
00:20:47.939 --> 00:20:57.118
Whole modifications as 1 of those services that we are finding just in
the last few weeks that we've started transitioning that there are.

159
00:20:57.118 --> 00:21:01.949
There's so much more need for education for technical assistance.

160
00:21:01.949 --> 00:21:09.388

Where we're finding, you know, that we've not done a great job of communicating with home OD providers what our expectations are.

161
00:21:09.388 --> 00:21:13.108
And that their work will be held to standard.

162
00:21:13.644 --> 00:21:19.703
And will be inspected, so to say, for satisfaction at the end of it.

163
00:21:19.703 --> 00:21:33.834
So those are things that we're really hoping to do from the onboarding process and to have ongoing efforts with existing home modification providers to, to get a better system of service delivery for the individuals. We served.

164
00:21:35.368 --> 00:21:41.818
The super cool stuff happening. We finally have the resources for 2 initiatives.

165
00:21:41.818 --> 00:21:55.169
So that leaves and I put vendor service query last not because they're leading not because they're less than but I wanted you to see how we're pulling responsibilities out of vendor, service coordination, world.

166
00:21:55.169 --> 00:22:10.019
So that they can focus on provider systems so they can spend more time focusing on the key things of their, their core things of their duties. And now they don't have to remember.

167
00:22:10.019 --> 00:22:22.884
Great allocation scores now, they don't have to remember and provider enrollment or does the service need certification or doesn't it you know, is this staff qualified for a new service provider or not?

168
00:22:23.453 --> 00:22:30.294
So it is narrowing down their window of focus. So, they can focus on those other services that.

169
00:22:30.628 --> 00:22:37.169
Or functions that we have that we don't have specialists and so they are going to.

170
00:22:37.169 --> 00:22:45.959

These are the things they do, they provide technical assistance on service definitions, all service definitions. Well, now they won't have to versus the technology and home on.

171
00:22:45.959 --> 00:22:50.278
So that's a little piece waiver requirements budget.

172
00:22:50.278 --> 00:22:56.669
Staff requirements, educational exceptions. All of those things are still vendor service coordinators.

173
00:22:56.993 --> 00:23:09.683
They'll still be provider relations reviews. They're still responsible for facilitating corrective action plans. There's still your contact for maintaining your Seymour provider contract information, like removing services.

174
00:23:09.683 --> 00:23:19.284
You don't want to provide anymore, updating your contact information or services you want to discontinue. That will also follow through vendor service coordinators.

175
00:23:19.588 --> 00:23:26.398
They're still your point person for see more access for new employees, or just continuing for employees to blast.

176
00:23:26.398 --> 00:23:30.209
And they support the regional operations.

177
00:23:30.209 --> 00:23:35.818
Regional offices, or as we start calling, the vendor Service Card is domiciled.

178
00:23:35.818 --> 00:23:40.318
They need people, they still have to have people to participate utilization review.

179
00:23:40.318 --> 00:23:50.548
Mortality review, variance reporting there's all kinds of functions that are regional office that need support and these team members are that support from the provider relations unit.

180
00:23:50.548 --> 00:24:02.459

So, it might take us a little while we're so used to answering every service definition. It might take a little while for vendors are going to get used to saying, hey.

181
00:24:02.459 --> 00:24:08.068
That's an assisted technology or universal design question. Let me refer you to our specialist.

182
00:24:08.068 --> 00:24:20.578
Um, but I, I don't think it's gonna take that long because they're really enjoying using that phrase. So so I don't think it's going to take that long. And I really think people are excited about being able to focus.

183
00:24:20.578 --> 00:24:23.759
Um, fewer things, so they can excel it more.

184
00:24:23.759 --> 00:24:28.648
And that's our goal here. So, um, the impact.

185
00:24:28.648 --> 00:24:43.493
We have consistent structure and supervision. I'm going to show you an outline of what our supervision looks like and tiered supports are centralized and they have supervisors and leaders focused on their areas of expertise, which they've never had before.

186
00:24:45.179 --> 00:24:58.888
Our enrollment specialists, our enrollment rate team focuses on enrollment and rate processes do we are streamlining enrollment and we're centralizing enrollment rates and the processes.

187
00:24:58.888 --> 00:25:06.449
Our assistant or assistant technology, universal design specialist will focus on initiative related services.

188
00:25:06.449 --> 00:25:11.759
For the 1st time, we're going to have dedicated division staff on initiatives.

189
00:25:11.759 --> 00:25:25.528
That we have not had before and in focus on making those services stronger and better for people and growing them and our vendor service coordinators are going to be able to focus on provider systems.

190
00:25:25.528 --> 00:25:32.788

So 1 of the things about that is, I was saying earlier, just as vendor service coordinator, supervisors.

191
00:25:32.788 --> 00:25:36.269
Have different numbers of.

192
00:25:36.269 --> 00:25:48.898
People that is supervised our vendor service coordination caseload. So to say our provider case load is equal as well. We have some vendor service coordinators.

193
00:25:48.898 --> 00:25:53.638
Um, carrying 60 providers and others carrying.

194
00:25:53.638 --> 00:25:59.729
40, so that's 1 of the things that we're working on, distributing those case loads.

195
00:25:59.729 --> 00:26:13.709
Equally as we can across all of the vendor service coordinators in the state, um, working remotely has taught us that we can work remotely. So if we can work remotely, then why does the vendor service coordinator for.

196
00:26:13.709 --> 00:26:24.269
A specialized medical equipment provider need to be in the same town that that provider is. And so there are some types of service delivery that we have left.

197
00:26:24.269 --> 00:26:32.249
Exposure interaction with service providers and so we're really looking at how can we distribute the provider.

198
00:26:32.249 --> 00:26:41.429
Network that we have across our 19 vendor service coordinators and equitable fashion. So, 1 of the things that we're going to try.

199
00:26:41.429 --> 00:26:50.278
Industry workloads is the vendor service coordinators are going to be assigned to work with providers and work with that provider state wide.

200
00:26:50.278 --> 00:26:59.098
So, if your vendor service coordinator is in St Louis, and you are in St Louis and.

201
00:26:59.098 --> 00:27:05.669
That vendor service coordinator is going to work with you on all issues in St Louis and.

202
00:27:05.669 --> 00:27:09.088
Not just so what that does.

203
00:27:09.088 --> 00:27:13.074
Is right now some of you not many of you.

204
00:27:13.134 --> 00:27:27.804
Surprisingly, there's not a lot of providers who cross multiple regions, but some of you are are 567 different regions and you're working with a different vendor service coordinator and supervisor in every 1 of those regions right now.

205
00:27:29.394 --> 00:27:37.163
So, we're going to change that, and now there's still will be a few providers who have more than 1 vendor service Square because of the sheer size.

206
00:27:37.523 --> 00:27:50.574
If you're a provider that offers every service we have, and you're serving over 3000 people that's a little much for 1 vendor service coordinator. So you might have 2 or 3, but you won't have 7.

207
00:27:50.574 --> 00:27:54.324
so we're trying to decrease that interaction that.

208
00:27:56.009 --> 00:28:07.528
That potential for getting different answers from different people through streamline our caseload, streamline our supervision and we focusing.

209
00:28:07.528 --> 00:28:11.189
On consistency of application.

210
00:28:12.144 --> 00:28:12.473
So,

211
00:28:12.473 --> 00:28:13.344
in essence,

212
00:28:13.344 --> 00:28:14.124
right now,

213
00:28:14.334 --> 00:28:14.784
you know,

214
00:28:14.784 --> 00:28:16.733
that you have a primary region office,

215
00:28:16.763 --> 00:28:17.544
and then you think,

216
00:28:17.933 --> 00:28:20.094
and then I have secondary regional offices,

217
00:28:20.094 --> 00:28:21.834
because I'm in Rolla,

218
00:28:21.864 --> 00:28:26.574
and I'm in 500 resources for intensive purposes providers will work with
1 vendor,

219
00:28:26.574 --> 00:28:27.233
service coordinator.

220
00:28:27.233 --> 00:28:29.394
I think we identified 5.

221
00:28:30.419 --> 00:28:39.929
Only 5 providers who would have more than 1 vendor service coordinator so
we're working right now to get all of our vendor service Square,
statewide access.

222
00:28:39.929 --> 00:28:53.878
To all of see more billing information, authorization information so that
when their provider contacts them with issues in another region, they
have all the same resources that they do at their own office.

223
00:28:53.878 --> 00:29:05.788

So, I think everyone's really excited about that. We hope that's really going to change the conversation that we have of providers and we hope it will make it easier for providers to.

224
00:29:05.788 --> 00:29:10.078
Get answers and remediation no matter where they're at.

225
00:29:10.078 --> 00:29:14.459
So, um, so that's what we are working on there.

226
00:29:14.459 --> 00:29:19.679
So this is our new provider relations structure.

227
00:29:19.679 --> 00:29:24.269
So here are the regions across the top.

228
00:29:24.269 --> 00:29:30.568
And then the, next, the next row is the supervisor or Co supervisor.

229
00:29:30.568 --> 00:29:40.288
And then we have the provider, the 11 provider relations leads by their function, and then the vendor service score is assigned to each 1. so, for example.

230
00:29:40.288 --> 00:29:45.959
Jane Alexander and Steve was, are the vendor service winner supervisors.

231
00:29:45.959 --> 00:29:51.148
Who are going to be assigned to vendor service coordinators who work in St. Louis.

232
00:29:51.148 --> 00:29:55.709
Hannibal and Kirk, so so, um.

233
00:29:55.709 --> 00:30:06.179
So, we are also implementing a whole different kind of approach to PR, those of you who work in St. Louis probably already have a little bit of feel for that right now.

234
00:30:06.179 --> 00:30:11.848
Because, you know, that the current PR leads Jane and Holly do everything together.

235
00:30:11.848 --> 00:30:14.939
Um, they tag team, they, you know, they, they worked.

236
00:30:14.939 --> 00:30:21.088
All of the provider information together they're always together they
sign their E mails together. We are trying to take that approach.

237
00:30:21.088 --> 00:30:26.759
I'm on a wider basis, so that every Geographic.

238
00:30:26.759 --> 00:30:38.098
Area which tends to line up for the most part with the districts, even
though there is some deviations. So that the leads and those districts
being Jane and Steve.

239
00:30:38.098 --> 00:30:43.769
Suzanne and Natalie for Central and Heidi and choice for Western. They
work as a team.

240
00:30:43.769 --> 00:30:50.278
So, they can back each other up when the other is out. So that, um.

241
00:30:50.278 --> 00:30:57.239
You know, in St Louis cannibals parksville if Steve goes on vacation for
3 weeks.

242
00:30:57.743 --> 00:31:09.653
Which you are not, but it's passive. Jane knows enough about his, the
people, he supervises, she knows enough about his providers that she can
step in and cover for him while he's on leave.

243
00:31:09.923 --> 00:31:14.544
So that PR always has a PR lead plan for coverage.

244
00:31:15.719 --> 00:31:24.509
Previously, under the previous structure, as a was out at their domiciled
the assistant director or director was covering for that PR lead.

245
00:31:24.509 --> 00:31:32.128
So, we're part of org efficiency is centralization. So, the supervisors
back each other up.

246

00:31:32.128 --> 00:31:37.138
If there is a provider relations, we get.

247
00:31:37.138 --> 00:31:40.828
Promoted then.

248
00:31:40.828 --> 00:31:47.189
The other remaining provider relations lead absorbed there was for their
responsibilities until that's backfill.

249
00:31:47.189 --> 00:31:54.778
Instead of someone acting as a provider relations lead or someone who's
not provided relations temporarily.

250
00:31:54.778 --> 00:31:59.098
Providing that support, so we're really trying to look at things in a
different way.

251
00:31:59.098 --> 00:32:12.058
You'll notice for supervisor is a little different, so 4 to 6 vendor
service coordination. Supervisors. James Steve Suzanne Natalie Heidi and
Troy.

252
00:32:12.058 --> 00:32:17.338
They are going to be Co supervised by the regional director and by
myself.

253
00:32:17.338 --> 00:32:23.548
So, we have implemented a CO supervision strategy with the divisions.

254
00:32:23.548 --> 00:32:27.898
We felt that the provider relations lead functions.

255
00:32:28.134 --> 00:32:35.903
Is just integral to what occurs at a regional office. They are a part of
improvement playing. They're part of quality assurance planning.

256
00:32:36.804 --> 00:32:47.483
They're part of inquiries, investigations, plans of corrections and so
they work really, really closely with that regional director and we want
to continue that relationship and foster that.

257
00:32:48.864 --> 00:32:52.673

But what they're also asking of us is they're, they're asking.

258
00:32:53.009 --> 00:32:58.858
Asking to ensure that not just purely, but myself that I'm accountable.

259
00:32:58.858 --> 00:33:05.459
For making sure that these staff understand what PR is and what those responsibilities are.

260
00:33:05.459 --> 00:33:11.759
So, um, so we are going to do some Co supervising.

261
00:33:11.759 --> 00:33:16.828
We'll start officially starts next month.

262
00:33:16.828 --> 00:33:25.019
So so we'll, we'll let, you know how that goes the beauty of this is, we are going from 11 PR, leads supervising.

263
00:33:25.019 --> 00:33:29.548
Vendor service coordinators, being supervised by.

264
00:33:29.548 --> 00:33:32.759
I think 7.

265
00:33:32.759 --> 00:33:36.028
7 regional directors, assistant directors.

266
00:33:36.028 --> 00:33:40.709
Decreasing it to 6 PR leads being supervised by 5 regional directors.

267
00:33:40.709 --> 00:33:55.433
And myself, so hopefully, we're hoping for some more consistency, we're going to collaborate more together and I think that the 2 leads in each area, working closely together by itself is going to bring consistency.

268
00:33:56.729 --> 00:34:02.308
So, we'll be doing things a little differently. If you scroll on over the enrollments.

269
00:34:02.308 --> 00:34:09.239

Amendment rates and US team and the technology 1st and universal design team are solely supervised by me.

270
00:34:09.239 --> 00:34:14.489
So, just by the contract, if you know.

271
00:34:14.724 --> 00:34:25.614
Have worked have been on boarded as any provider recently. You know, that process is very different and, like I mentioned earlier, we're streamlining that.

272
00:34:25.643 --> 00:34:34.974
So, right now a provider application goes from a vendor service coordinator to their PR, lead to the regional director, or assistant director. And then to me.

273
00:34:35.278 --> 00:34:40.409
And then back, so now it's going to go to the enrollment specialists.

274
00:34:40.409 --> 00:34:49.648
And then to me, and then back, so we're streamlining, we're cutting down and and not only does this allow PR to focus.

275
00:34:49.648 --> 00:34:59.849
It allows regional directors to focus on just a little bit less because they have so many hats and so many subject matter that.

276
00:34:59.849 --> 00:35:03.898
That they're responsible for that might taking on.

277
00:35:03.898 --> 00:35:15.478
This is completely doable and it's been in my wheelhouse all along. It's just something that we work together on. So I, I'm really excited about the possibility of.

278
00:35:15.478 --> 00:35:22.588
Of just, I think everyone that's touched being impacted in a positive way by this change.

279
00:35:24.293 --> 00:35:37.764
So, but to get there, we'll need some feedback. Right? And so hopefully not just our internal stakeholders, but we hope to implement some new processes where we can get feedback from.

280
00:35:38.099 --> 00:35:49.949
Providers, we really don't have a good method today to get feedback from providers on how we're doing. We like you, sometimes only time you hear when something's not working.

281
00:35:49.949 --> 00:35:54.809
And so we need a better way of communicating when things are good.

282
00:35:54.809 --> 00:36:09.719
So we have a balance or receiving your recommendations for enhancements. We need a better way. So that's 1 of the things that we'll be looking at trying to accomplish, maybe through a 360 degree feedback or.

283
00:36:09.719 --> 00:36:15.239
Some sort of survey process in some method about our actual performance.

284
00:36:15.239 --> 00:36:18.778
So, to share with you, our transition timeline.

285
00:36:18.778 --> 00:36:32.639
The and tiered unit otherwise known as a senior living coordinator, their transition actually start in June. So they did a presentation in June, June 1, their supervision.

286
00:36:32.994 --> 00:36:44.123
Changed and then they were spinning that month working on processes working with a previous supervisor to transition the person that was being supervised and to transition that knowledge.

287
00:36:44.844 --> 00:36:51.083
So, as of July 1, all and tiered units or tier 2.

288
00:36:51.478 --> 00:37:02.938
Um, but previously knows, Katie living coordinators are officially on their own specialized unit. So, as of July 1.

289
00:37:02.938 --> 00:37:17.338
That's when the remainder of PR started transitioning. So that's when our vendor service Claire teams transition to new supervisors, our enrollment and rate team started fielding the rate allocation score, communication and enrollment calls.

290
00:37:17.338 --> 00:37:21.719

On July 1, because they were.

291
00:37:21.719 --> 00:37:23.753
We changed our rate allocations,

292
00:37:23.753 --> 00:37:28.704
core methodology and so although they're not officially completely on
board until August 1,

293
00:37:29.753 --> 00:37:41.784
they felt that it was important to go ahead and implement because then
they could implement consistently from the 1st point in time that we
switch to a 5 scale system instead of trying to train 40 people.

294
00:37:42.088 --> 00:37:47.579
How to communicate and do that for 1 month so.

295
00:37:47.579 --> 00:38:02.278
The enrollment and rights, and the universal design team are building
processes. They will we're building parameters around. At what point do
we really, really, really want to see people reach out.

296
00:38:02.278 --> 00:38:09.838
When they have a home, and we tend to see more problems with a larger
home modification projects.

297
00:38:10.914 --> 00:38:24.684
So, we're spending some time doing resources, but we also want to create
a referral process for support coordinators for you are for anyone to
say, hey, I need someone to look this over. Or could you walk through
this? With me? You know, those kinds of things.

298
00:38:25.019 --> 00:38:25.469
So,

299
00:38:25.465 --> 00:38:26.635
on July 16th,

300
00:38:26.635 --> 00:38:27.655
just 3 days from now,

301
00:38:27.655 --> 00:38:29.094
the enrollment and rate team,

302
00:38:29.094 --> 00:38:32.574
and these system technology and universal design team will transition to me,

303
00:38:32.574 --> 00:38:43.105
officially for supervision what we're spending the month of July working on processes that also will repeat the same pattern from the June transition where we meet with the previous supervisors,

304
00:38:43.105 --> 00:38:44.094
the transition,

305
00:38:44.094 --> 00:38:46.344
our processes and knowledge.

306
00:38:47.250 --> 00:38:56.789
So, as of August 1, all of the remaining provider relations team members are officially under their new supervisor and in their new function.

307
00:38:56.789 --> 00:39:07.860
But we won't be done yet because redesigning a distributing caseload for our vendor service coordinators with over 600 providers.

308
00:39:07.860 --> 00:39:09.295
Is a Super challenge,

309
00:39:10.074 --> 00:39:21.264
especially in July when people like to take vacations and they want to relax and and we all deserve that and so to not add any undue,

310
00:39:21.414 --> 00:39:29.425
unnecessary additional stressors on top of all the supervision changes that we were making and the structural changes.

311
00:39:30.114 --> 00:39:33.025
We decided that we would give us a little bit more time.

312
00:39:33.360 --> 00:39:39.539
To make sure we really evaluate our distributed case loads for vendor service coordinators. Well.

313

00:39:39.539 --> 00:39:49.260
And that we don't rush that process. So it's our goal to have our vendors service coronation provider teams distributed by August 15th.

314
00:39:49.704 --> 00:39:57.655
And so, once we have that distributed, and everybody knows what they're doing, then we'll start communicating a consistent message out to each provider.

315
00:39:57.655 --> 00:40:05.784
Each provider will get an email saying, even if it's the same vendor service coordinator you've always had, because chances are.

316
00:40:06.150 --> 00:40:15.960
The majority of you aren't going, you're going to know the person you're assigned to. And so, even if it's the same person that you're assigned to, you'll be getting email saying.

317
00:40:16.585 --> 00:40:30.655
I am your vendor service coordinator? Here's how you contact me. This is my supervisor. Here's how you contact them if you are 1 of those providers, who have, who will have more than 1 vendor, service coordinator because of your size, and your reach.

318
00:40:31.644 --> 00:40:35.125
That email will also explain on your vendor service coordinator.

319
00:40:35.429 --> 00:40:40.889
For this geographical area, this person is your vendor service plan for this geographical area.

320
00:40:40.889 --> 00:40:44.730
And here's our supervisors name and contact.

321
00:40:44.730 --> 00:40:54.869
So, we plan to have that completely accomplished by the end of August so that we are truly, truly move forward and incomplete.

322
00:40:54.869 --> 00:41:00.780
Um, by the end of August, so.

323
00:41:02.369 --> 00:41:13.380

So that is I know that was just a lot of information and hopefully, I didn't talk too horribly fast. I had, I don't think I've seen any questions come through the chat.

324
00:41:13.380 --> 00:41:19.170
I know that was a lot thrown out there at you but do you have any questions about what I just shared with? You?

325
00:41:20.369 --> 00:41:28.380
So, Kimberly asked anything change with TCM tax. So TCM packs are a part of phase 2.

326
00:41:28.380 --> 00:41:33.329
They have met, they have presented their.

327
00:41:33.329 --> 00:41:48.114
Proposal to the, the administration, but nothing has been approved nothing has been finalized from which to share. So when when that is finalized, they will do the same thing and they will have an event like this and share that with everybody.

328
00:41:54.869 --> 00:42:04.170
While people are thinking about potential questions, I wanted to share that 1 of the other things that we are doing is we are changing the way we do provider meetings.

329
00:42:04.170 --> 00:42:13.199
So, what I mean, by that is, you all are used to having a quarterly provider meeting at each regional office.

330
00:42:13.199 --> 00:42:17.130
So, we are changing that and we are going to have.

331
00:42:17.130 --> 00:42:24.389
In the 1st, and 3rd quarters of the year, we're gonna have statewide virtual provider meetings.

332
00:42:24.389 --> 00:42:29.099
Our 1st, virtual statewide provider meeting is August 12 at 1 o'clock.

333
00:42:29.099 --> 00:42:32.789
There there will be.

334

00:42:33.989 --> 00:42:45.809
There will be a registration link distributed through the email blast
system that we have next week and we're going to really excited about.
That's going to be a little different.

335
00:42:45.809 --> 00:42:59.460
This will be statewide. This will be representation from central office
presenting on different subject matters. So Dwayne will come and talk
about employment. I'm sure we'll have the.

336
00:42:59.460 --> 00:43:10.855
A specific technology team come on and do some recognition for some
providers who are doing some great stuff. I'm sure There'll be right.
Stuff involved and changes and so be looking for that.

337
00:43:11.094 --> 00:43:14.965
So, that means the local offices will be having, um.

338
00:43:15.300 --> 00:43:20.489
Regional provider meetings in the 2nd and 4th quarters of the year.

339
00:43:20.489 --> 00:43:27.054
So, we'll do 2 a year statewide for all providers to hear from the bigger
picture at large.

340
00:43:27.054 --> 00:43:40.974
And then There'll be 2 at the 2 a year at the local areas to talk about
region, specific data or other highlights that they want to share with
you. So, we're excited about that as well. So see that you'll be seeing
that come out.

341
00:43:41.280 --> 00:43:49.769
Well, do we do have a question? Yeah, if I was trying to scroll back up.

342
00:43:49.769 --> 00:44:04.074
Um, okay, so someone asked to confirm our contact to renew the TCM
contract with our local vendor service. So TCM entities work with TCM tax
on contracts.

343
00:44:04.889 --> 00:44:11.519
So, I don't know if you're working in a region that maybe doesn't have
attack. And so that's why the vendor service printer is doing it.

344
00:44:11.519 --> 00:44:26.039

Um, but TCM contracts are usually managed by the TC and tack. Um, then, I don't know I don't know if there's any changes to that or not, but it's not the vendor service Square is not the point person for that.

345
00:44:27.269 --> 00:44:34.530
So, um, and then someone asked who are the tech 1st and universal design specialist.

346
00:44:34.824 --> 00:44:39.385
And our text 1st is Holly rice super excited.

347
00:44:39.385 --> 00:44:50.815
She's awesomely passionate about technology and our universal design specialist is the amazing Shelley brown from the Albany satellite office.

348
00:44:51.119 --> 00:45:03.630
And, um, although they are all those, they carry a tag for the specific assistive technology or universal design. The reality is those people are going to work in both worlds.

349
00:45:03.630 --> 00:45:09.809
Just 1 of them to a point person, but both worlds. The 3rd person on that team is Jason Omar.

350
00:45:09.809 --> 00:45:14.670
Who is from Pre sale regional office.

351
00:45:14.670 --> 00:45:24.449
And he was previously community living coordinator and so now he is, and it's just a technology and universal design specialist and all 3 of those staff are.

352
00:45:24.449 --> 00:45:28.949
Shift accredited, it says it's a new training or a movement.

353
00:45:28.949 --> 00:45:35.670
To obtain credentials for a staffing for technology, and all 3 of them are obtaining that credential.

354
00:45:36.869 --> 00:45:40.440
So, we're super excited about that.

355
00:45:40.440 --> 00:45:44.010

Okay, why do we have 2 more questions?

356
00:45:44.010 --> 00:45:54.030
The 1st 1 is sorry if you covered this, if a current provider expands to
new regional area well, they say with the same PR. Rep.

357
00:45:55.289 --> 00:45:59.489
Yes, so if you're currently a provider.

358
00:45:59.489 --> 00:46:13.889
And let's say you're currently a provider and central Missouri, regional
office, and you expand into Kansas City. That's your vendor Service card
that you work with. The was Dolby, the vendor service coroner you work
with in Kansas City.

359
00:46:16.344 --> 00:46:26.664
Okay, and the next is, we all know, change the cards, so I plugged the
division for seeking to improve efficiency and service quality through
this process. I may have missed this.

360
00:46:26.664 --> 00:46:35.844
But will there be a method to evaluate the outcomes of this transition?
Compared to our current situation, satisfaction, surveys, et cetera.

361
00:46:37.135 --> 00:46:47.844
Sure, so we are in the process of developing well, 1 for we do have to
have outcomes we do have to be able to measure our performance and that's
still in development.

362
00:46:48.264 --> 00:46:52.344
But yes, right now there is none but 1, and I had spoken to this.

363
00:46:52.710 --> 00:46:56.309
I would like to design.

364
00:46:56.309 --> 00:47:03.539
Some ways to be able to obtain stakeholder feedback. The stakeholder is
not just providers. It's also division staff.

365
00:47:03.539 --> 00:47:15.389
So, we currently have a quarterly pull survey for divisions staff, but
that's not a function specific kind of thing like this. So, I'm a big
believer in 360 degree feedback.

366
00:47:15.389 --> 00:47:24.389
When I was the supervisor at Rolla, I used that at the regional office
when evaluating my vendor service coordination performance.

367
00:47:24.389 --> 00:47:38.130
And and we used to have a survey that, after provider relations went out
and completed a PR review providers were given a link to a survey where
they could provide feedback. And that.

368
00:47:38.130 --> 00:47:43.500
Surveys long defunct it stopped working. It wasn't reinvented.

369
00:47:43.500 --> 00:47:48.840
And I would like to embrace something like that again.

370
00:47:48.840 --> 00:47:51.929
Um, because I think consistent feedback.

371
00:47:51.929 --> 00:47:56.610
And in live feedback where you can actually take action in a moment.

372
00:47:56.610 --> 00:48:02.820
And as well as do a look behind is really helpful, and we don't have a
good way to do that right now. So it is something we're looking at.

373
00:48:10.739 --> 00:48:16.829
If you have any more questions out there.

374
00:48:16.829 --> 00:48:24.960
No, I don't see any more that have come up. I've answered all the ones
that I have in my chat box.

375
00:48:25.704 --> 00:48:27.264
Well, that was a lot of information.

376
00:48:28.585 --> 00:48:43.465
It said, this event is being recorded, it will be posted online and
available for you to review or to share with anyone that, you know, that
was unable to attend this session. So we really appreciate your time.

377
00:48:43.704 --> 00:48:45.295
We're really excited about.

378
00:48:45.630 --> 00:48:52.320
The changes that were undergoing, we hope you'll see a difference and
we're really looking forward to your feedback and.

379
00:48:52.320 --> 00:48:58.800
And again, we'll look at a way to design that until then you guys know
where I'm at.

380
00:48:58.800 --> 00:49:09.119
You have all the players involved with our provider relations redesign
and just as always just encourage you to reach out with your concerns.

381
00:49:09.119 --> 00:49:13.019
We really do want to grow and change and we can only do that with great
feedback.

382
00:49:13.019 --> 00:49:21.000
So, thank you for attending today. I hope you get as excited to Diane, or
at least about some part of that and that it.

383
00:49:21.000 --> 00:49:25.590
Makes me feel like maybe there will be a change and maybe something can
be made better.

384
00:49:25.590 --> 00:49:30.119
So, appreciate your time and look for the recording.

385
00:49:30.119 --> 00:49:31.440
Thank you.