



Freedom Focus



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About Liberty Healthcare NC

Liberty Healthcare of North Carolina is the DMA's partner in administering the Independent Assessment program for Medicaid beneficiaries who may be eligible for Personal Care Services (PCS) As the Independent Assessment Entity (IAE), we'll be conducting the eligibility assessment to determine if the individual meets specific Medicaid criteria for personal care services. The actual PCS services will be provided by state approved personal health care providers.

[Liberty Healthcare of NC](#)

Freedom Focus Publication
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Jana Allen,
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Personal Care Services – Angst & Rewards

Todd Graybill | Operations Vice President, LHC

What does the future hold for all stake holders in the Personal Care Services industry? There is no question that as the aging population grows, with increased life expectancy; the demand for PCS will continue to grow dramatically. A recent issue of Time Magazine is devoted to the issue of longevity. As life expectancy increases; so does the number of years past retirement, hence the likelihood of greater years of physical decline.

For those experiencing physical decline, there is a profound sense of loss. The attributes of freedom, dignity,

independence and future aspirations are all challenged. By providing much needed supports for activities of daily living; we offer comfort for the present and hope for the future. NCIA plays a critical role in the process, as we work with consumers and providers to best determine who needs what and how much in services. For many patients, my parents included; they simply could not enjoy the quality of life, in the absence of personal care services. For others, it would necessitate a higher level of care, resulting in further loss of autonomy and independence.

You at NCIA should be proud of the contribution you make in the lives of many. When you stop to consider that, thanks to your work, nearly 55,000 assessments are completed each year. Each of these assessments represents one life that you have enriched, by providing access to a service that restores confidence, comfort, and improved health outcomes for fellow North Carolinians.



2015 Milestones – Lacey Barnes

Lacey Barnes | Executive Director, LHC-NC

Here we are at the beginning of a new year. So much has been accomplished since we began our work for North Carolina's PCS Program in 2013. Think about it, since September 1, 2013 we've handled 829,736 telephone calls, processed 84,502 requests scheduled 118,773 appointments, conducted 118,229 assessments and conducted 11,370 mediations! That's amazing!

This is work that our team has

accomplished together. There have been many challenges along the way; we are working through some challenges now that will serve to make us stronger and better.

Our job is to administer the Independent Assessment Program, acting as agent and representative of the State of North Carolina's Medicaid program, and to deliver highly professional services to the beneficiaries and other

customers who participate in the PCS program. We have and will continue to do that with pride and dedication each day. I am proud of what we have accomplished and how we have served our customers and look forward to continuing to meet whatever challenges come our way with the same commitment to excellence and service that has been the hallmark of our program thus far. We are Liberty Healthcare – thanks to you for making all of it possible.

Bridging the Gap in Healthcare Literacy

Jana Allen | Freedom Focus Editor, Office Services Assistant

Liberty's business *is* customer service.

We provide care through ongoing assessments, education through training and analysis for beneficiaries. Customer service for our beneficiaries is increasingly becoming a diverse patient population that is challenged with a triad of cultural, linguistic, and health barriers. We are in an ideal position to facilitate these interconnections in order to improve health outcomes for those we serve.

Outside of the basic 5 ADL's, one must be health literate in order to effectively apply a variety of skills to accomplish health-related tasks that are often very demanding. Skills like reading, writing, speaking, listening, critical thinking and decision-making enter in when relating to our customers. These are vital skills that one needs to possess with some comfort between one's own cultural values and beliefs, and those of the dominant healthcare system, which in this case is the U.S. healthcare system; not an easy task even for the native born.

So what *can we do* to help give the highest level of customer service and yet have effective communication with those we serve that have cultural and linguistic barriers?

From its inception, LHC-NC, has utilized the *Pacific Language Line* to assist in

translating languages from English to the customers native language. It is a resourceful language tool used in our call center and mostly used for languages such as Nepali, Vietnamese, and Russian. Seldom is the Spanish line necessary because we have Spanish speaking representatives to help translate PCS

"It is really up to the Call Center Rep to make them feel comfortable by talking to them about the [PCS] program, the information we need and assure them of confidentiality in healthcare practices that are regulated." Erica Luicano, LHC-NC Quality Assurance Reviewer

information on the customer's behalf. However, even when an interpreter is used to facilitate understanding, whether through Pacific or a call center representative, cultural issues may still interfere with the effectiveness of communication between the patient and a representative or a healthcare provider. *"It is really up to the Call Center Rep to make them feel comfortable by talking to them about the [PCS] program, the information we need and assure them of confidentiality in healthcare practices that are regulated."* Erica Luciano, LHC-NC Quality Assurance Reviewer, stated. Erica is a bilingual Spanish speaking native and former call center representative that understands first-hand how valuable understanding is when language or

culture present possible barriers. She also added some helpful considerations for us as well:

- First and foremost, we all can continue to develop cultural self-awareness.
- Promote and expand a deeper understanding of cultural & linguistic barriers in healthcare literacy with our Operations teams, Quality Training and possible mentor training.
- Provide assessment forms and PCS educational brochures on our website that are written in Spanish and that are appropriate from cultural, linguistic and literacy standpoints.

We can begin to make a difference by working to integrate daily efforts to effectively communicate with culturally diverse customers. It is important to recognize though, that over the coming years, quality care will not merely be the inclusion of health literacy rather it will be an expanded paradigm that involves the substantive integration of all three in ways; cultural, linguistic and health. These can be easily implemented and make a difference in the beneficiary experience.

Reflections of 2015

Penny Waters | Quality Assurance Assessment Manager/Regional Manager Region 6

We have certainly accomplished a lot since February of 2015 beginning with our roll out of the Online Assessment Tool. While the tool packed lots of enhanced features of capability and performance, we also had some challenges to manage. While some things cannot be reconciled due to tablet capability, software restrictions or maintaining internet connections this is a work in progress in the online assessment tool utilization for the first quarter of 2016.

June of 2015 paved the way for the Service Plan Project. This implementation generated a service plan which detailed the tasks identified in the Independent Assessment that represented the beneficiary needs captured in the assessment. With this in place it enabled the providers to quickly manage the aide's daily time allowance and specifically identify the beneficiary ADL needs. The provider's ability to complete the service plan is directly related to their ability to be reimbursed as it's crucial on many levels. We quickly learned that random errors such as weekend boxes being checked yes or no in error created issues for the provider world that had to be corrected on our end. We created a work plan to handle assessments that contained miscellaneous errors to allow the problem to be corrected and the provider to move forward with the completion of the plan. This process is now seamless, stabilized and running smoothly into 2016.

October was perhaps the biggest month for us all at Liberty with the transition from ICD 9 to ICD 10. Understanding and developing workflows surrounding the October 1st 'go live date' for ICD 9 to ICD 10 conversions was a hurdle we overcame. Recognizing that the assessments could no longer be submitted with ICD 9 codes we had to ensure we had considered all the variables when it came to troubleshooting any possible problems. All assessments that were conducted prior to October 1st had to complete the review cycle

Given the magnitude of this undertaking, we did experience a few minor setbacks but with good planning, early intervention and swift execution we were back on top.

and be released. It was imperative to have a plan that would not compromise the integrity of the conversion and the release date. With the many efforts of support staff and regional managers we were successful with getting these assessments reviewed/rejected and returned prior to October 1st and thus allowing only a small percentage to carry over to the October 1st review date. Given the magnitude of this undertaking, we did experience a few minor setbacks but with good planning, early intervention and swift execution we were back on top. The field assessors did a phenomenal job being proactive in reporting issues and being patient with triaging the problems. So proud of them all!

The value in reflection is that it allows us to look at where we have been, where we are and where we are going. Some of our obstacles did not have an easy fix and some we are still working on, however we will rise to the occasion and find a solution. Our focused goal of our management team in 2016 is to continue to evaluate these challenges/obstacles that each of us face and strategically seek new opportunities to improve the quality of our work.

I am reminded that sometimes we get caught in the storm of life and the issues of the moment but we don't fully comprehend the magnitude of what we have accomplished. My hope is that this year, we not only see where we are going but *celebrate the success of where we have been*. Thanks to you and what you do *every day* to make us what we are in the world of PCS care.

Getting to Know You

Jana Allen | Freedom Focus Editor,
Offices Services Assistant



I sat down with our Business Analyst, Fahima Yasmin, to ask her about her job, partly because I'm curious but also, because I love to analyze too. I have to admit she's the expert though.

Jana: Overall, each day, what is the objective of your job/position here at Liberty?

Fahima: There are many layers to what I do but to put in a nutshell it would be reporting, data analysis, quality assurance and vendor management.

Jana: What are your biggest day to day challenges?

Fahima: I would have to say ensuring the accuracy of the information I provide to the leadership team. This is a constant challenge for me because it not only requires me to know about the operation processes for every department but it also requires that I report protocol deviations, which may have detrimental impact on an employee's career here at LHC-NC.

Jana: What's the best part of your job?

Fahima: When someone says, that because of me they were able to get their tasks accomplished or when someone from the leadership team says that I've done a good job on my deliverables.

Jana: If you had a crystal ball and could look into the future a bit, what kind of healthcare trends in the IT world do you see on the horizon and specifically for LHC-NC?

Fahima: A more robust reporting system. We are currently using SAS Visual Analytics for certain things but we have not yet started to use it to its full potential. SAS Visual Analytics has immense power in providing a great deal of information within a very short period of time and once we get to use it on a more regular basis, I feel that we'll be able to make more realistic data driven decisions, which will not only be beneficial for us in the IT/Reporting Team but also the LHC-NC organization as a whole.

Jana: Thanks, Fahima for the role you play and your analogy!

The Making of a Good Leader

Beth Oakley | Training and Development Manager

“Select Leaders with strong people skills...working across the aisle.”



In this most volatile and topsy-turvy political year,

it seems an excellent time for all of us to pause and ponder on the questions of leadership. Many of our opinions about leadership are based on subjective experiences rather than a full understanding of the psychological research that has been conducted on the subject. Ironically, we may think we know what qualities we value in those who lead us – and why – but companies and entire countries keep selecting – and electing – subpar leaders into positions of power. Why is that?

It seems there is a mismatch between what people actually value in leaders and what they should value in leaders. In a quantitative study, Tim Judge, PhD., University of Notre Dame, found that disagreeable people – those who are more likely to be self-centered, confrontational, and antisocial – have a higher probability of becoming leaders. More agreeable people – those who are empathetic, altruistic, and sociable – tend to make better leaders, but are less frequently chosen to lead.

This implies that qualities linked to effective leadership are negatively related to the emergence of a leader. Getting decision-makers to understand the distinction between emerging as a leader and actually being an effective leader could increase the number of competent leaders out in the real world.

So what can be done to get better leaders? At the very least, voters and organizations should select leaders with strong people skills. A number of studies have shown that a leader's interpersonal skills are an important predictor of team engagement and, in the case of politics, “working together across the aisle”. That finding is consistent with other research pointing to the importance of emotional intelligence for leadership, which is the ability to use emotional information to guide thinking and behavior. It does not mean a leader doesn't need the traits of decisiveness, vision, and firm integrity. But, too often, people are promoted to leadership positions simply on the basis of their technical competence and expertise, even when they lack the “soft skills” to build good relationships with direct reports and boost team morale – especially in difficult times.

When we look forward in making decisions and choices for choosing the best leader, perhaps we should pay attention to the science and choose leaders who are actually right for what we need them to accomplish.

This article was adapted from "What You Think Makes A Good Leader Probably Doesn't" by Dr. Tomas Chamorro-Premuzic, an international authority in psychological profiling, people analytics, and talent management.

Caring for aging

parents can bring families together, lead to sibling conflict, or both. Even when siblings are close, they might disagree on what's best for Mom and Dad. Sibling relationships expert, Ingrid Connidis, Ph.D., has developed a program to help siblings overcome conflict and better share the care of their parents.



The Forgotten Kettle

Encouragement for Caregivers

- **Have a family meeting.** ideally before you're in a caregiving crisis. Use a video calling app like Skype for siblings who don't live nearby. Discuss your parents' needs and what each person can contribute in time and money. Talk regularly.
- **Be flexible.** Parents' needs change as do your and your siblings' lives. Don't insist on splitting tasks equally. Work toward a division of labor that takes into account each family member's skills and availability.
- **Let go of old roles and rivalries.** Try to focus on what your parents need in the here and now.
- **Communicate clearly.** If you're the primary caregiver, be specific in asking for help. Do you want someone to take Dad to doctor's appointments? Do the grocery shopping? Sit with Mom while you go to the gym? Help Pay for respite care? Use "I need..." not "You should..." If you live far away,

talk with your siblings and ask how you can be more involved. You might coordinate your parents' If you're considering hiring someone to provide in-home care, contact a provider to assist with this. They are typically free consultations.

- **Get professional help.** Clergy, social workers or geriatric-care managers can give an objective view of your parents' condition and needs. They can also facilitate family meetings and defuse emotionally charged situations.
- **Stay connected.** Parents tell kids different things because their relationship with each child is different. Share information so you can have a full picture of Mom and Dad's health. Use online tools like lotsahelpinghands.com to keep everyone in the loop.

For more tips and resources for family caregivers visit:

caregiverstress.com

2015 Angel Tree Growing – Rico Arriola | Database Systems Analyst



Rico Arriola, Breanni Gill and Beth Oakley pointing out the collection of gifts from LHC-NC

The Events Team

was given a unique opportunity to serve a family in the Raleigh area that was in need during the holiday season.

Typically, we gather gifts given by our generous co-workers, wrap them and invite the family to our office to present the bounty with love and good cheer.

However, this year our adopted family did not have access to transportation and so, we loaded the sleigh and delivered the gifts ourselves, giving us the chance to peer into the lives of those less fortunate.

The Events Team sincerely thanks everyone that gave to the 2015 Angel Tree Project, making a huge difference in this family's life. No one can really measure the impact but what may be even better is receiving the satisfaction of doing your part.

This year, we are recruiting new team members to help with events, volunteering their time and skills in community service. In hopes that you'll join us in this rewarding experience, please contact Rico Arriola if you would like to participate at: rariola@libertyhealth.com



Laurie Patton and Lacey Barnes, Executive Director of LHC-NC

Annual R.A.I.S.E. Award Winner, Laurie Patton!

We are pleased to announce that **Laurie Patton, Operations Department Manager at the North Carolina Independent Assessments Program** is Liberty Healthcare's first ever R.A.I.S.E. Customer Service Annual Award recipient. Laurie was nominated 4 times in 2015 by not only her coworkers, but also by program beneficiaries and their families for going above and beyond to provide excellent customer service. Laurie was recognized as the 2015 Q2 quarterly award winner for her exemplary demonstration of those R.A.I.S.E. qualities that represent the character, values, and integrity of Liberty Healthcare.

Congratulations Laurie!