

# BAYOU HEALTH REPORTING

## REPORT INFORMATION

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## Definitions and instructions:

- **Reporting quarter**

3rd Quarter, September, 2022

- **Agenda topics**

- Introductions
- Health plan updates
- Cultural competency
- Group discussion – takeaways

- **Introductions**

- **Attendees:**

- Matthew Pham with Christian Outreach of Baton Rouge; Rashad Bristo, Community Relations Rep for Healthy Blue Louisiana; Robert Blue, Tribal Liaison for Healthy Blue Louisiana; Peter Lambousy, Marketing Director for Healthy Blue Louisiana; Daphne Woodly, Marketing Coordinator for Healthy Blue Louisiana; Cassie Sibenaller, Marketing Coordinator Senior for Healthy Blue Louisiana; Monette Kilburn, Community Relations Rep for Healthy Blue Louisiana; XXXXXXXXXXX with the Food Bank of North West Louisiana and a member; Lisa Ellsworth, Community Relations Rep for Healthy Blue Louisiana; Riichi Torres-Oyama, Accreditation Consultant for Elevance Health; XXXXXXXXXXX, member; Nasheika Malbreaux with Southwest Louisiana Center for Health Services; Tonya Hoover with The Family Tree-Healthy Start Program; Aleksandra Richardson, Accreditation Manager for Elevance Health; Damiane Ricks with the Louisiana Department of Health (LDH); XXXXXXXXXXX mother of XXXXXXXXXXX, member; Michelle McInnis with Alliance of Southwest Louisiana; Pashion Norman, Behavioral Health Liaison for Healthy Blue Louisiana; Kathy Tran, Clinical Quality Program Manager for Healthy Blue Louisiana; XXXXXXXXXXX, member; XXXXXXXXXXX, member since 2012 or 2013; Denise Malecki, Public Relations Director for Elevance Health; and Karen Kosinski, Health Equity Director for Healthy Blue Louisiana

- Damiane Ricks, with the LDH, stated to the members who joined the meeting, “I would like to encourage all the members to check in with us and make sure your contact information is up to date. Check to make sure we have your correct address and phone number for you or your family member with Medicaid. You can check by calling our customer service hotline at **888-342-6207**, or you can check online through our self-service portal at [mymedicaid.la.gov](https://mymedicaid.la.gov).”
  - Peter Lambousy, Director of Marketing, thanked everyone for taking time to join the meeting, especially the members.
  - XXXXXXXXXX, who is a member, stated in her introduction that she is very glad she has Medicaid; it does such wonders. “If it weren’t for that, I wouldn’t be getting the proper healthcare I need. I’m an educator. So even though I’m employed as a substitute teacher, it pays me, but not enough for private insurance. So Medicaid has been absolutely wonderful to me. I’m so glad that we have this service here in Louisiana.”
- **Health plan updates**
    - Our current total membership: 366,180
    - We are still under the COVID-19 public health emergency (PHE). It has been extended to October 15, 2022.
    - On March 17, 2020, when the COVID-19 PHE was declared, the federal and state governments put a freeze on Medicaid renewals so members would not lose needed healthcare during a public health crisis.
    - When the PHE ends, the renewal processes will begin again. It will take about two months from the time the public health emergency ends because there is a 60-day notification period. No Medicaid recipient would lose coverage without notification from the state saying that they must renew their coverage. That would be a proactive. The member would be required to go in to the Medicaid system, and they can do that online as well as with their phone numbers. Online is the best way. If they don’t do this, they would lose coverage. The Healthy Blue Member Service phone number, **844-521-6941**, was provided in the chat.
    - Healthy Blue is entering into a new contract with the state of Louisiana beginning January 1, 2023. There are some updates that will be coming in the next few months. We are following the lead of the Louisiana Department of Health (LDH). When more information becomes available, we will notify everyone. We are excited about the new contract. It has a lot of new services and protections for members.
    - **Peter asked if there were questions or comments anyone would like to make before Robert Blue starts the presentation.**
    - XXXXXXXXXX, member, stated that the physical health aspect of Medicaid has been excellent in the Ouachita Parish area. “As I said before, I’m a substitute teacher, and we only get paid when there’s an absent teacher. So obviously, on the days teachers aren’t absent we don’t get paid, and that’s why I’m on Medicaid. My question is on the mental health services side, I do have PTSD for private reasons. Having to work during the pandemic didn’t help any. A very nice, wonderful lady sent me a list of Medicaid providers for mental health services. Unfortunately, I feel the list is not updated because one person on the list is deceased, and that’s Dr. Ebert. The physical aspect, I’m more than grateful because I’ve taken care of very important health prescreenings and colonoscopy, which is a preventative care, which I’m so happy it’s provided. But as far as mental health services, maybe someone needs to check up on the northeast Louisiana area and see who currently provides services, and maybe update that list.”
    - Peter apologized to the member for receiving a list that wasn’t updated. He told her that if she feels like she needs additional help and feels like she’s having trouble locating somebody or the list is too long, to privately provide her contact information either to him or in the email she received the invite in for a case manager to contact her to find someone. He reassured the member she can always contact us to help her get the care that she needs.
    - Peter stated to all the members in the meeting that it was their right to get the care that they deserve. “If you’re not getting it, you can file a grievance or complaint with Healthy Blue, or you can call the State and file a complaint or grievance. There are very strict timeframes in getting that done. Your care and your health are important to us.

- **Cultural competency**
- **Robert Blue, Cultural Competency Facilitator** – These are trainings that we do for our behavioral health providers, and as Peter said, it might expand to the physical health providers. The training is anywhere from one to three hours. Any of you that would like a one-hour presentation for you or your company, we offer that at no charge. Just let us know, and we can give you a great one-hour presentation.
  - **What is the American way (culture)?**
  - Some of you might remember in the 1960s, there was a black and white afternoon television show called “The Adventures of Superman.” They said truth, justice, and the American way.
  - So what they were trying to teach our children was how to be truthful and “just.” But what was the American way? Because they didn’t say truth, justice, the American way. They said truth, justice AND the American way, so what was the American way?
  - The training is more of a self-reflection that our providers need to look more at themselves and why they believe the beliefs that they have and why they think what they think and feel how they feel. “I can teach you about certain groups, gender, religion, or race, but everybody is an individual. We want our providers and everyone to basically look at each other as an individual, not just a person in a group, and this is how you treat a certain person in a certain group. It’s all about the individual and trying to get people to understand. So instead of using cultural competency, I like to use cultural awareness. Because if you’re aware, then you’ve become competent.”
  - American culture includes both conservative and liberal elements, scientific and religious competitiveness, political structures, risk taking and free expression, and materialist and moral elements. (Source: Wikipedia, the free encyclopedia)
  - Blind spot – Robert asked what picture everyone first saw when they looked at the slide. He asked that the attendees participate.
  - Some people responded that they saw a duck, and some responded that they saw a rabbit.
  - Robert asked that everyone go back and make sure they can see both.
  - “Do you see what I see?”
  - “If you don’t see what I see, doesn’t mean I’m wrong?”
  - Unconscious bias – A hidden or implicit — preference, inclination for or against a person, thing, or group held without deliberation.
  - Deliberation:
    1. Long and careful consideration or discussion
    2. Slow and careful movement or thought
  - Ignoring biases – Assuming your decisions are completely correct
    - Not understanding you have an automatic bias in every decision
    - Thinking your decision always applies to a certain situation
  - Acknowledging and working on your biases – Recognizing that decisions have unconscious, automatic influences
    - Identifying critical decisions that can be derailed by bias
    - Identifying the kind of bias most likely to impact your thinking
  - Three levels of racism – institutional, personal, and internalized
  - Institutional – Institutional racism is “differential access to the goods and services of a society based upon race.”  
In a sense, this is the discrimination and racism that are embedded in social structures, irrespective of the attitudes and views of the leaders of those institutions.
  - Personal – Personal racism is either prejudice — judging another person’s abilities on the basis of race.
    - or—
    - Discrimination – Acting and behaving differently towards people on the basis of race.

- Internalized – Internalized racism is the way in which members of the stigmatized group begin to accept the negative messages about themselves that they see in the world and to reflect that negativity in their behavior. (Jones 2000)
- Break the programming – "To be yourself in a world that is constantly trying to make you something else is the greatest accomplishment." (Ralph Waldo Emerson)
- Cultural Awareness – Taking a moment to see something beyond what you think.
- Think – Have you ever thought about, what you are thinking about? **Think about it.**
- Knowledge itself; however, is not enough if it isn't managed and applied effectively.
- Parting thought – Our background and circumstances may have influenced who we are, but we are responsible for who we become.

- **Takeaways**

- Karen Kosinski (in chat) – Wondered if we could include references for personal follow up/further development books, podcasts, etc.
- Peter Lambousy – Asked Robert if there are tools or resources that you provide in the presentation for people to further their education.
- Robert Blue – There are national and federal sites that give different aspects and more in depth information that you can take the time to read.
- Peter Lambousy shared a personal experience – My father was experiencing shortness of breath and chest pains, so he went in to have it checked. He kept waiting for the results, and they were being slow and he finally called. The nurse told him, "You probably had pneumonia or something, but you're alright." He kept experiencing shortness of breath. A family member kept encouraging him to go to someone different and get a second opinion, and he did. They discovered he had lung cancer and three months later he passed on. You know your body, and you are well within your rights to demand a second or third opinion however many times you need to go. There is no limitation on how many times you can go see a provider here. If you don't feel you're getting the help you need or you need help advocating, we would be that voice for you.
- XXXXXXXXXXX – "I can share about an experience that's kind of about what Robert's presentation was about. I've had a few experiences with various PCPs, where as a gay person, I would go in there to do annual visits and the second they found out I'm gay, they would immediately treat me like I need to get an sexually transmitted disease (STD) test. I need to get an HIV test. I always find that really odd when they do that because obviously, I've been married for over 15 years in a monogamist relationship. But they almost seem to not be able to fathom that a gay person can go in there and be in a monogamist relationship. So they would always sort of stigmatize you in a way that is always uncomfortable. You really can't say anything because then it makes them feel some kind of way. That kind of treatment makes you not want to go."
- Peter Lambousy thanked XXXXXXXXXXX for sharing. Whether it's a good intent or not, it hurts to make assumptions about people.
- XXXXXXXXXXX, member – "I thought that the PowerPoint was really good. I'm glad that Medicaid chooses to say it's only individuals. Me, as an individual, I was adopted out as a baby. I was always considered white, but now that I have some of my adoption records, I am multicultural. I'm glad that Medicaid considers that it's on an individual basis; it's not just a group. I remember I went to a predominately white school but didn't have your standard typical blonde hair, blue eyes, and pale skin. I had the black hair, black eyes and really deep rich tone skin. I paid a very heavy price for that. I was told I was too dark, ugly, and stupid. Even until this day, I have people asking do I speak English. I would say, yes, I was born here. I am very glad you'll consider the individual because that's something that on my adopted birth certificate it's white, but on the biological paperwork it says white and Indian. That's something that really resonates with me. My entire life, I was considered white, but now I know as an adult, I'm brown."
- Peter Lambousy – "Thanks for sharing your experience. I grew up in an immigrant family from Greece. I remember some choice words told to me in the small suburbs I lived in when I was a child. We want to make sure everybody knows there is no place for any form of discrimination in the

Medicaid plan or at Healthy Blue. Every individual, regardless of race, physical or mental status, deserves the utmost and highest form of care that's available to them. If you don't feel like you're getting it, again, you can contact us or file a complaint with Healthy Blue or with the State. Hopefully, it won't escalate to that point, but if that is the case, it is within everyone's rights to demand that of the health plan and with the State. The State would address that with the health plan."

- XXXXXXXXXX, member – "I haven't had any bad experiences with Medicaid at all."