



## State of Louisiana Department of Health

### Healthy Louisiana 2019–2020 Provider Satisfaction Survey

FINAL

June 22, 2020



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## Background

The Louisiana Department of Health (LDH) is the state agency responsible for state policy and oversight of the Medicaid program in Louisiana. In its contract with the five Medicaid managed care organizations (MCOs), LDH requires that each MCO conduct a provider survey annually to assess providers' satisfaction with the managed care program and to evaluate their experience with the MCOs. The proprietary nature of these MCO surveys makes it difficult to compare provider responses among MCOs and to gain an overall provider perspective of the Healthy Louisiana program. The MCO survey items, protocols, and modes of delivery vary among the five MCOs. In order to provide LDH with the capability of making direct comparisons among the MCOs, IPRO was tasked initially with designing and conducting a provider satisfaction survey in 2018 using standard items and a consistent protocol and survey mode of delivery. In 2019, IPRO was tasked with and conducted the same survey for the behavioral health (BH) facilities that serve Healthy Louisiana members. The 2019–2020 survey was conducted using two separate survey tools—one survey tool for BH facilities and individual BH providers and the other survey tool for primary care practice providers and physical health (PH) physician specialists; each survey tool was modified by IPRO in consultation with LDH. In addition, to improve the likelihood of survey participation by selecting active providers, more stringent criteria to limit the samples to providers with a minimum number of claims were applied. As with prior year surveys, each MCO was provided with file layout instructions regarding submission of provider listings to IPRO for unique allocations of providers to each MCO.

The five MCOs from which IPRO obtained provider listings for the 2019–2020 Healthy Louisiana Provider Satisfaction Survey were the same as for the prior year and included the following:

- Aetna Better Health
- AmeriHealth Caritas (ACLA)
- Healthy Blue
- Louisiana Healthcare Connections (LHCC)
- UnitedHealthcare Community (UHC)

The primary objectives of the 2019–2020 Healthy Louisiana survey were to assess providers' experience and satisfaction with a specific MCO, and to compare findings by MCO, as well as by provider type.

## Target Populations and Samples

The target population of the Healthy Louisiana survey comprised providers currently in the network of at least one of the five Medicaid MCOs serving Medicaid members in Louisiana. Providers were uniquely allocated to each MCO so that each provider completed the survey with regard to their experience and satisfaction with that single MCO. Four target provider populations were identified for the 2019–2020 Provider Satisfaction survey: 1) BH facilities (primary contact for each MCO), 2) BH individual providers, 3) primary care physicians (PCPs), and 4) individual PH specialist physicians. All BH facilities were targeted, whereas individual providers were restricted to those who did not submit a satisfaction survey last year.

In order to obtain the target population files necessary to create the survey samples, IPRO instructed each plan to submit one file comprising individual PCPs, individual PH specialist physicians and individual BH providers, and a separate file for BH facilities. IPRO distributed a separate set of file layout instructions to the MCOs for the individual provider file and for the BH facility file. Source data elements were specified based on the Healthy Louisiana Medicaid Managed Care Organization System Companion Guide, Version 46, February 2019. For the individual provider file, the MCOs were instructed to include the number of visit claims between 9/1/2018 and 8/31/2019. For the BH facility file, MCOs were instructed to include the primary contact person for each facility. Upon receipt of each MCO's files, IPRO conducted validation checks for unique National Provider Identifiers, data completeness, and correct formatting. As needed, IPRO requested MCOs to resubmit files to ensure data integrity.

In order to increase the likelihood of individual provider participation, the study design utilized a purposive sample that aimed to include individual providers with at least 30 visit claims during the period between 9/1/2018 and 8/31/2019. Due to an insufficient number of PCPs with at least 30 visit claims, however, the minimum number of visit claims for PCPs was reduced to 1 in order to maximize the sample size. Once all validation checks were met, IPRO allocated to each MCO a unique sample that aimed to include 600 PCPs with at least 1 visit claims, 300 PH specialist physicians with at

least 30 visit claims, and 300 individual BH providers with at least 30 visit claims. Participants in the 2018 Individual Provider Survey were excluded. All BH facilities were included and were allocated uniquely to each MCO.

## Survey Instrument Design and Format

Last year, the survey contained common elements and key items that were used statewide to assess provider satisfaction, draw comparisons among MCOs, and provide a summary of provider satisfaction with Medicaid managed care (MMC). This year, two surveys were created for the four target populations using the 2018 survey as a starting point: one survey tool for BH facilities and individual BH providers (hereafter referred to as the BH Survey), and a similar survey for individual PCPs and PH specialist physicians (hereafter referred to as the Non-BH Survey). The surveys are similar, with 19 of the 22 total content items in common. As an example of the content items not in common between the two surveys, the BH Survey asks two questions about coordination of behavioral and medical services that the Non-BH Survey does not ask.

The survey items were formatted as either multiple-choice items or Likert-type rating scales to make it easier for providers to respond. Realizing the limited time and busy schedules of providers, attention was given to streamlining the survey as much as possible. To capture responses that require elaboration, a minimal number of open-ended response items were incorporated to avoid the subjective process of coding responses and to reduce the time to complete the survey. IPRO avoided using questions that are double-barreled (i.e., combine two or more issues in one item), contain double negatives, are loaded or leaning, are too long or complex in structure, and that produce little or no variability.

## Data Collection Process, Data Cleaning and Survey Tracking

In order to achieve the highest possible response rate, IPRO employed the following protocols: 1) targeting the sample to providers with actual encounters with an expectation that providers actively participating in MMC and providing services are most likely to give feedback through completing a survey; 2) utilizing an industry standard Zip+4 sorting and mailing service which allows automatic mail forwarding for respondents with mail forwarding; 3) utilizing 6" x 9" mailing envelopes which allow the survey packet to stand out from other mail received by the providers; and 4) targeting a second mailing to providers who did not respond to the first mailing.

IPRO built in checkpoints throughout the process to monitor quality, from procurement of provider lists from each MCO through survey mailing and receipt. The mailing list was "seeded" with the names and addresses of IPRO survey team members as a check to ensure that the mail was being delivered.

IPRO reviewed returned questionnaires for legibility, completeness, and consistency. Response data were cleaned and optically scanned into the Survey Management Database weekly. All mail data collection activities were managed and tracked by the database. The database processed incoming completed questionnaires and generated lists of providers who required a follow-up mailing.

IPRO took appropriate steps to ensure the confidentiality of responders' data, including assigning a unique identification number to each provider selected for the study. All data collected were properly secured, password-protected, and accessible only by staff assigned to the Louisiana EQRO project. All sample pieces with identifying information were stored in a locked file cabinet.

## Data Analysis and Presentation of Findings

Presentation of findings is organized by survey domain for each survey type (i.e., BH Survey and Non-BH Survey), with separate tables that include BH facility and individual BH provider responders for the BH Survey, as well as separate tables for PCP and PH specialist physician responders for the Non-BH Survey. Where appropriate, responses were aggregated into dichotomous categories of "favorable" and "neutral or unfavorable" (e.g., "favorable" includes responses of "somewhat satisfied" and "very satisfied," or "excellent," "very good," and "good"). Responses categorized as "neutral or unfavorable" include neutral responses (e.g., "neither" or "fair"), as well as unfavorable responses (e.g., "somewhat dissatisfied," "very dissatisfied," and "poor"). This approach minimizes small cell counts and maximizes meaningful interpretation of actionable findings. For example, those survey items with statistically significant findings regarding associations between the favorability proportion and MCOs are highlighted by presenting the lowest proportion in red-shaded cells and the highest proportion in green-shaded cells.



### Comparisons with 2018 Provider Survey

Overall satisfaction includes comparisons with 2018 Provider Survey findings. In addition, findings are evaluated for changes in response rates. Findings of improvement are interpreted quantitatively, based on the percentage point increases from the 2018 survey to the 2019–2020 survey.

### Report Structure

Findings are organized into the following sections and an appendix:

- Survey Response Rates and Descriptive Statistics
- Survey Findings by Survey Type, Domain, and MCO
- BH Survey Findings by Provider/Service Type
- Comparison of Individual Behavioral Health Providers to PCPs and Physical Health Specialist Physicians
- Discussion
- Appendix A: Key Findings Dashboard
- Appendix B: Survey Instruments

## Survey Response Rates and Descriptive Statistics

### BH Survey Response Rates

The individual BH provider sample consisted of 1,500 individual BH providers and, of those 1,500 providers, there were 58 survey responders, for a response rate of 3.9% (**Table 1**). The BH facility sample consisted of 1,158 BH facility providers and, of those 1,158 providers, there were 95 responders, for a response rate of 8.2%. Overall, the response rate for the BH Survey was 5.8%. The results for the BH Survey total responder sample are statistically significant within +/- 8 percentage points.

Table 1: BH Survey Sample and Response Rates by Provider Service Type

Provider and Service Type	Initial Sample Size	Exclusions	Adjusted Sample Size	Completed Surveys	Response Rate
Individual BH provider	1,500	1	1,499	58	3.9%
BH facilities by service type					
Addiction services outpatient	51	0	51	9	17.6%
Coordinated system of care crisis stabilization	2	0	2	0	0.0%
Outpatient therapy	974	0	974	75	7.7%
Psychiatric inpatient	87	0	87	7	8.0%
Psychiatric residential treatment facility	6	0	6	1	16.7%
Substance use residential	31	0	31	3	9.7%
Therapeutic group home	7	0	7	0	0.0%
BH facilities subtotal	1,158	0	1,158	95	8.2%
Total	1,158	1	1,157	153	5.8%

BH: behavioral health.

MCO BH Survey response rates ranged from 4.4% (HB) to 9.1% (ACLA; **Table 2**).

Table 2: BH Survey Sample and Response Rates by MCO

MCO	Initial Sample Size	Exclusions	Adjusted Sample Size	Completed Surveys	Response Rate
ACLA	570	0	570	52	9.1%
Aetna	569	1	568	28	4.9%
HB	572	0	572	25	4.4%
LHCC	571	0	571	28	4.9%
UHC	376	0	376	20	5.3%
Total	2,658	1	2,657	153	5.8%

BH: behavioral health; MCO: managed care organization; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community.

## Non-BH Survey Response Rates

The Non-BH Survey sample consisted of 4,190 non-BH providers, both PCPs and physical health specialist providers and, of those 4,190 non-BH providers, there were 83 survey responders, for a response rate of 2.0% (**Table 3** and **Table 4**).

MCO response rates ranged from 0.9% (Aetna) to 3.5% (LHCC; **Table 3**). The response rates by provider type were 2.3% for PCPs and 1.3% for physical health specialists (**Table 4**). The results for the Non-BH Survey total responder sample are statistically significant within +/- 11 percentage points.

Table 3: Non-BH Survey Sample and Response Rates by MCO

MCO	Initial Sample Size	Exclusions	Adjusted Sample Size	Completed Surveys	Response Rate
ACLA	759	1	758	22	2.9%
Aetna	877	1	876	8	0.9%
HB	898	2	896	17	1.9%
LHCC	756	4	752	26	3.5%
UHC	900	5	895	10	1.1%
Total	4,190	13	4,177	83	2.0%

BH: behavioral health; MCO: managed care organization; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community.

Table 4: Non-BH Survey Sample and Response Rates by Provider Type

Provider Type	Initial Sample Size	Exclusions	Adjusted Sample Size	Completed Surveys	Response Rate
PCP	2,690	7	2,683	63	2.3%
Specialist	1,500	6	1,494	20	1.3%
Total	4,190	13	4,177	83	2.0%

BH: behavioral health; PCP: primary care physician.

## Descriptive Statistics

### BH Surveys

The provider specialty type that composed the greatest proportion of BH Survey responders were BH rehabilitation agencies (22.9%), followed by licensed professional counselors (12.4%) and non-licensed BH staff (10.5%; **Table 5**).

Table 5: BH Survey Responses by Provider Type

Provider Type <sup>1</sup>	n	%
Advanced practice registered nurse – nurse practitioner	1	0.7%
Behavioral health rehab agency (non-legacy mental health clinic [MHR])	35	22.9%
Distinct part psychiatric unit	2	1.3%
Doctor of osteopathic medicine/psychiatry	1	0.7%
Federally qualified health center	9	5.9%
Free-standing psychiatric hospital	5	3.3%
Licensed clinical social worker	10	6.5%
Licensed marriage and family therapist	1	0.7%
Licensed professional counselor	19	12.4%
Mental health clinic (legacy MHC) – reserved for local governing entities [LGEs]	7	4.6%
Mental health rehabilitation agency (legacy MHR)	15	9.8%
Multi-systemic therapy agency (MST services)	1	0.7%

Provider Type <sup>1</sup>	n	%
Non-licensed behavioral health staff	16	10.5%
Psychiatric residential treatment facility	1	0.7%
Psychiatrist – psychiatry	7	4.6%
Psychologist	3	2.0%
Rural health clinic (independent)	4	2.6%
Rural health clinic (provider-based)	3	2.0%
School-based health center	1	0.7%
Substance abuse and alcohol abuse center (outpatient)	9	5.9%
Substance use residential treatment facility	3	2.0%
Total	153	100.0%

<sup>1</sup>“Provider Description” is the field name in Appendix AD of the Healthy Louisiana Medicaid Managed Care Organization System Companion Guide (Revised 01.15.2019).

BH: behavioral health; n: number; MHR: mental health clinic; LGEs: local governing entities; MST: multi-systemic therapy.

The practice setting that composed the greatest proportion of BH Survey responders was the BH outpatient facility/agency setting (66.7%), followed by individual practice (17.6%) and the BH residential setting (5.2%; **Table 6**). Primary care was the predominant Area of Medicine or Service (72.5%; **Table 6**).

**Table 6: BH Survey Responses by Practice Setting and Areas of Medicine or Service**

Practice Setting	n	%
Individual practice	27	17.6%
Behavioral health residential	8	5.2%
Behavioral health outpatient facility/agency	102	66.7%
Hospital	3	2.0%
Psychiatric hospital	6	3.9%
Missing	7	4.6%
Total	153	100.0%
Area of Medicine or Service	n	%
Primary care	111	72.5%
Specialist	9	5.9%
Psychiatrist	6	3.9%
Licensed mental health practitioner (LMHP)	21	13.7%
Total	153	100.0%

BH: behavioral health; n: number.

Most of the BH Survey responders were practices/agencies/facilities with between two and five physicians (45.8%) and solo practices (26.8%), as well as solo licensed mental health practitioners (LMHPs; 52.4%; **Table 7**). Managed care volume represented between 1% and 5% of practice/agency/facility volume for 43.8% of BH survey responders and between 26% and 50% of practice/agency/facility volume for 26.1% of BH Survey responders (**Table 8**). The largest proportion of BH Survey responders were in their practice/agency/facility for between 3 and 7 years (39.9%), followed by 15 or more years (24.2%), and between 8 and 14 years (21.6%; **Table 9**). Office administrators completed the greatest proportion of BH Surveys (42.5%; **Table 10**).

Table 7: BH Survey: Number of Physicians and Licensed Mental Health Practitioners

Practice/Agency/Facility Size	Physicians		LMHPs	
	n	%	n	%
Solo	41	26.8%	11	52.4%
2–5	70	45.8%	4	19.0%
6–10	6	3.9%	0	0%
More than 10	9	5.9%	0	0%
None	23	15.0%	6	28.6%
Missing	4	2.6%	0	0%
Total	153	100.0%	21	100.0%

BH: behavioral health; n: number; LMHP: licensed mental health practitioner.

Table 8: Portion of Managed Care Volume Represented by Plan

Percent MC	n	%
None	6	3.9%
1–25%	67	43.8%
26–50%	40	26.1%
51–75%	18	11.8%
76–100%	12	7.8%
Missing	10	6.5%
Total <sup>1</sup>	153	100.0%

<sup>1</sup> Percentages may not add up to 100.0% due to rounding.

Note: Providers who selected “None” may be referring to their current volume, as opposed to the volume actually seen during the sample selection claims period of 9/1/2018 to 8/31/2019.

MC: managed care; n: number.

Table 9: Number of Years You Have Been in this Practice

Number of Years	n	%
Less than 3 years	19	12.4%
3–7 years	61	39.9%
8–14 years	33	21.6%
15 years or more	37	24.2%
Missing	3	2.0%
Total <sup>1</sup>	153	100.0%

<sup>1</sup> Percentages may not add up to 100.0% due to rounding.

n = number.

Table 10: Who is Completing this BH Survey?

Completed By	n	%
Physician	9	5.9%
Nurse	3	2.0%
Office administrator	65	42.5%
Receptionist	4	2.6%
LMHP	32	20.9%
Other	35	22.9%
Missing	5	3.3%
Total <sup>1</sup>	153	100.0%

<sup>1</sup> Percentages may not add up to 100.0% due to rounding.  
n: number; LMHP: licensed mental health professional.

### Non-BH Survey

Most of the Non-BH Survey responders were solo practices (42.2%), followed by practices with more than 10 physicians (26.5%), and practices with two to five physicians (25.3%; **Table 11**). Managed care volume represented between 1% and 25% of practice volume for 63.9% of Non-BH Survey responders and between 26% and 50% of practice volume for 19.3% of Non-BH Survey responders (**Table 12**). Physicians completed the largest proportion of Non-BH Surveys (45.8%), followed by office administrators (38.6%; **Table 13**).

Table 11: How Many Physicians are in Your Practice?

Practice Size	n	%
Solo	35	42.2%
2–5 physicians	21	25.3%
6–10 physicians	5	6.0%
More than 10 physicians	22	26.5%
Total	83	100.0%

n: number.

Table 12: Portion of Managed Care Volume Represented by Plan

Percent MC	n	%
None	3	3.6%
1–25%	53	63.9%
26–50%	16	19.3%
51–75%	9	10.8%
Missing	2	2.4%
Total	83	100.0%

MC: managed care; n: number.

Table 13: Who is Completing this Non-BH Survey?

Completed By	n	%
Physician	38	45.8%
Nurse	2	2.4%
Office administrator	32	38.6%
Receptionist	3	3.6%
Other	3	3.6%
Missing	5	6.0%
Total	83	100.0%

n: number.

## Survey Findings by Survey Type, Domain and MCO

### BH Survey Findings

#### Provider Enrollment

Each responder was asked to rate satisfaction with the provider enrollment contracting process. There were a total of 144 responders to this question (Q8, **Table 14**). The statewide favorability proportion was 61.1%, with MCO proportions ranging from 54.0% (ACLA) to 76.0% (HB).

Table 14: Q8, Satisfaction with Provider Enrollment Contracting Process

Q8	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	27	54.0%	16	59.3%	19	76.0%	16	61.5%	10	62.5%	88	61.1%
Neutral/Not favorable	23	46.0%	11	40.7%	6	24.0%	10	38.5%	6	37.5%	56	38.9%
Total	50	100.0%	27	100.0%	25	100.0%	26	100.0%	16	100.0%	144	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

#### Provider Resources

Each responder was asked to rate the quality and effectiveness of each of the following MCO materials: provider manuals, provider newsletters, general provider communications, and the provider directory.

For provider manuals, among the 143 responders, the statewide favorability proportion was 75.5%, with MCO proportions ranging from 65.2% (ACLA) to 89.5% (UHC; Q9a, **Table 15**).

Table 15: Q9a, Satisfaction with Provider Manuals

Q9a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	30	65.2%	22	81.5%	17	70.8%	22	81.5%	17	89.5%	108	75.5%
Neutral/Not favorable	16	34.8%	5	18.5%	7	29.2%	5	18.5%	2	10.5%	35	24.5%
Grand total	46	100.0%	27	100.0%	24	100.0%	27	100.0%	19	100.0%	143	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

For provider newsletters, among the 141 responders, the statewide favorability proportion was 75.9%, with MCO proportions ranging from 64.4% (ACLA) to 84.2% (UHC; Q9b, **Table 16**).

Table 16: Q9b, Satisfaction with Provider Newsletters

Q9b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	29	64.4%	21	80.8%	19	79.2%	22	81.5%	16	84.2%	107	75.9%
Neutral/Not favorable	16	35.6%	5	19.2%	5	20.8%	5	18.5%	3	15.8%	34	24.1%
Grand total	45	100.0%	26	100.0%	24	100.0%	27	100.0%	19	100.0%	141	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.



For general provider communications, among the 141 responders, the statewide favorability proportion was 72.3%, with MCO proportions ranging from 62.2% (ACLA) to 84.2% (UHC; Q9c, **Table 17**).

**Table 17: Q9c, Satisfaction with General Provider Communications**

Q9c	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	28	62.2%	19	73.1%	18	75.0%	21	77.8%	16	84.2%	102	72.3%
Neutral/Not favorable	17	37.8%	7	26.9%	6	25.0%	6	22.2%	3	15.8%	39	27.7%
Grand total	45	100.0%	26	100.0%	24	100.0%	27	100.0%	19	100.0%	141	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

For the provider directory, among the 148 responders, the statewide favorability proportion was 71.6%, with MCO proportions ranging from 61.2% (ACLA) to 89.5% (UHC; Q9d, **Table 18**).

**Table 18: Q9d, Satisfaction with Provider Directory**

Q9d	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	30	61.2%	21	77.8%	17	68.0%	21	75.0%	17	89.5%	106	71.6%
Neutral/Not favorable	19	38.8%	6	22.2%	8	32.0%	7	25.0%	2	10.5%	42	28.4%
Grand total	49	100.0%	27	100.0%	25	100.0%	28	100.0%	19	100.0%	148	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Based on interactions with non-Claims staff, each responder was asked to rate their practice's experience with responses to their telephone inquiries with regard to staff knowledge, accuracy, and helpfulness.

Regarding the knowledge of non-Claims staff, among the 146 responders, the statewide favorability proportion was 71.2%, with MCO proportions ranging from 65.0% (UHC) to 83.3% (HB; Q10a, **Table 19**).

**Table 19: Q10a, Knowledge of Non-Claims Staff Responses to Telephone Inquiries**

Q10a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	33	67.3%	19	70.4%	20	83.3%	19	73.1%	13	65.0%	104	71.2%
Neutral/Not favorable	16	32.7%	8	29.6%	4	16.7%	7	26.9%	7	35.0%	42	28.8%
Grand total	49	100.0%	27	100.0%	24	100.0%	26	100.0%	20	100.0%	146	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the accuracy of non-Claims staff, among the 145 responders, the statewide favorability proportion was 67.6%, with MCO proportions ranging from 58.3% (ACLA) to 83.3% (HB; Q10b, **Table 20**).

Table 20: Q10b, Accuracy of Non-Claims Staff Responses to Telephone Inquiries

Q10b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	28	58.3%	17	65.4%	20	83.3%	20	74.1%	13	65.0%	98	67.6%
Neutral/Not favorable	20	41.7%	9	34.6%	4	16.7%	7	25.9%	7	35.0%	47	32.4%
Grand total	48	100.0%	26	100.0%	24	100.0%	27	100.0%	20	100.0%	145	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the helpfulness of non-Claims staff, among the 148 responders, the statewide favorability proportion was 66.2%, with MCO proportions ranging from 58.0% (ACLA) to 79.2% (HB; Q10c, **Table 21**).

Table 21: Q10c, Helpfulness of Non-Claims Staff Responses to Telephone Inquiries

Q10c	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	29	58.0%	18	66.7%	19	79.2%	19	70.4%	13	65.0%	98	66.2%
Neutral/Not favorable	21	42.0%	9	33.3%	5	20.8%	8	29.6%	7	35.0%	50	33.8%
Grand total	50	100.0%	27	100.0%	24	100.0%	27	100.0%	20	100.0%	148	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Based on interactions with Claims staff, each responder was asked to rate their practice's experience with responses to their telephone inquiries with regard to staff knowledge, accuracy, helpfulness, and timeliness of resolving claims payment issues.

Regarding the knowledge of Claims staff, among the 142 responders, the statewide favorability proportion was 67.6%, with MCO proportions ranging from 52.0% (Aetna) to 87.5% (HB; Q11a, **Table 22**).

Table 22: Q11a, Knowledge of Claims Staff Responses to Telephone Inquiries

Q11a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	32	66.7%	13	52.0%	21	87.5%	17	68.0%	13	65.0%	96	69.6%
Neutral/Not favorable	16	33.3%	12	48.0%	3	12.5%	8	32.0%	7	35.0%	46	32.4%
Grand total	48	100.0%	25	100.0%	24	100.0%	25	100.0%	20	100.0%	142	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the accuracy of Claims staff, among the 141 responders, the statewide favorability proportion was 70.2%, with MCO proportions ranging from 54.2% (Aetna) to 80.0% (LHCC; Q11b, **Table 23**).

**Table 23: Q11b, Accuracy of Claims Staff Responses to Telephone Inquiries**

Q11b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	33	68.8%	13	54.2%	19	79.2%	20	80.0%	14	70.0%	99	70.2%
Neutral/Not favorable	15	31.3%	11	45.8%	5	20.8%	5	20.0%	6	30.0%	42	29.8%
Grand total <sup>1</sup>	48	100.0%	24	100.0%	24	100.0%	25	100.0%	20	100.0%	141	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

<sup>1</sup> Percentages may not add up to 100.0% due to rounding.

Regarding the helpfulness of Claims staff, among the 142 responders, the statewide favorability proportion was 69.7%, with MCO proportions ranging from 60.0% (Aetna) to 80.0% (LHCC; Q11c, **Table 24**).

**Table 24: Q11c, Helpfulness of Claims Staff Responses to Telephone Inquiries**

Q11c	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	32	66.7%	15	60.0%	18	75.0%	20	80.0%	14	70.0%	99	69.7%
Neutral/Not favorable	16	33.3%	10	40.0%	6	25.0%	5	20.0%	6	30.0%	43	30.3%
Grand total	48	100.0%	25	100.0%	24	100.0%	25	100.0%	20	100.0%	142	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the timeliness of Claims staff in resolving claims payment issues, among the 143 responders, the statewide favorability proportion was 64.3%, with MCO proportions ranging from 56.0% (Aetna) to 75.0% (HB; Q11d, **Table 25**).

**Table 25: Q11d, Timeliness of Claims Staff in Resolving Claims Payment Issues**

Q11d	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	31	63.3%	14	56.0%	18	75.0%	17	68.0%	12	60.0%	92	64.3%
Neutral/Not favorable	18	36.7%	11	44.0%	6	25.0%	8	32.0%	8	40.0%	51	35.7%
Grand total	49	100.0%	25	100.0%	24	100.0%	25	100.0%	20	100.0%	143	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Each responder was asked to rate the plan provider portal with regard to finding member eligibility information, claims payments/invoices information, and the Member Gaps in Care Report, as well as submitting prior authorization requests and receiving determinations, accessing plan reports, and overall experience with the provider portal.

Regarding finding member eligibility information, among the 139 responders, the statewide favorability proportion was 80.6%, with a statistically significant difference in proportions across MCOs. MCO favorability proportions ranged from 68.8% (ACLA) to 96.2% (LHCC; Q12a, **Table 26**).

**Table 26: Q12a, Provider Portal: Finding Member Eligibility Information**

Q12a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	33	68.8%	17	73.9%	20	90.9%	25	96.2%	17	85.0%	112	80.6%
Neutral/Not favorable	15	31.3%	6	26.1%	2	9.1%	1	3.8%	3	15.0%	27	19.4%
Grand total <sup>1</sup>	48	100.0%	23	100.0%	22	100.0%	26	100.0%	20	100.0%	139	100.0%

BH: behavioral health; Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

<sup>1</sup> Percentages may not add up to 100.0% due to rounding.

Regarding finding claim payments/ invoices, among the 139 responders, the statewide favorability proportion was 79.1%, with a statistically significant difference in proportions across MCOs. MCO favorability proportions ranged from 61.7% (ACLA) to 92.6% (LHCC; Q12b, **Table 27**).

**Table 27: Q12b, Provider Portal: Finding Claim Payments/Invoices Information**

Q12b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	29	61.7%	19	82.6%	20	90.9%	25	92.6%	17	85.0%	110	79.1%
Neutral/Not favorable	18	38.3%	4	17.4%	2	9.1%	2	7.4%	3	15.0%	29	20.9%
Grand total	47	100.0%	23	100.0%	22	100.0%	27	100.0%	20	100.0%	139	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding finding the Member Gaps in Care Report, among the 138 responders, the statewide favorability proportion was 71.0%, with MCO proportions ranging from 59.6% (ACLA) to 86.4% (HB; Q12c, **Table 28**).

**Table 28: Q12c, Provider Portal: Finding the Member Gaps in Care Report**

Q12c	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	28	59.6%	14	63.6%	19	86.4%	23	85.2%	14	70.0%	98	71.0%
Neutral/Not favorable	19	40.4%	8	36.4%	3	13.6%	4	14.8%	6	30.0%	40	29.0%
Grand total	47	100.0%	22	100.0%	22	100.0%	27	100.0%	20	100.0%	138	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding submitting prior authorization requests and receiving determinations, among the 138 responders, the statewide favorability proportion was 73.9%, with MCO proportions ranging from 63.0% (ACLA) to 88.9% (LHCC; Q12d, **Table 29**).

**Table 29: Q12d, Provider Portal: Submitting Prior Authorization Requests and Receiving Determinations**

Q12d	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	29	63.0%	15	65.2%	19	86.4%	24	88.9%	15	75.0%	102	73.9%
Neutral/Not favorable	17	37.0%	8	34.8%	3	13.6%	3	11.1%	5	25.0%	36	26.1%
Grand total	46	100.0%	23	100.0%	22	100.0%	27	100.0%	20	100.0%	138	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding accessing plan reports, among the 138 responders, the statewide favorability proportion was 70.3%, with MCO proportions ranging from 58.3% (ACLA) to 84.6% (LHCC; Q12e, **Table 30**).

**Table 30: Q12e, Provider Portal: Accessing Plan Reports**

Q12e	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	28	58.3%	14	63.6%	17	77.3%	22	84.6%	16	80.0%	97	70.3%
Neutral/Not favorable	20	41.7%	8	36.4%	5	22.7%	4	15.4%	4	20.0%	41	29.7%
Grand total	48	100.0%	22	100.0%	22	100.0%	26	100.0%	20	100.0%	138	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the overall experience with the provider portal, among the 143 responders, the statewide favorability proportion was 73.4%, with a statistically significant difference in proportions across MCOs. MCO favorability proportions ranged from 56.0% (ACLA) to 88.9% (LHCC; Q12f, **Table 31**).

**Table 31: Q12f, Provider Portal: Overall Experience with Provider Portal**

Q12f	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	28	56.0%	18	75.0%	19	86.4%	24	88.9%	16	80.0%	105	73.4%
Neutral/Not favorable	22	44.0%	6	25.0%	3	13.6%	3	11.1%	4	20.0%	38	26.6%
Grand total	50	100.0%	24	100.0%	22	100.0%	27	100.0%	20	100.0%	143	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Each responder was asked to rate overall satisfaction with communication from the plan. There were a total of 147 responders to this question (Q15, Table 32). The statewide favorability proportion was 76.2%, with MCO proportions ranging from 70.4% (Aetna) to 83.3% (HB; Q13, **Table 32**).

**Table 32: Q13, Overall Satisfaction with Communication from Plan**

Q13	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	36	73.5%	19	70.4%	20	83.3%	21	77.8%	16	80.0%	112	76.2%
Neutral/Not favorable	13	26.5%	8	29.6%	4	16.7%	6	22.2%	4	20.0%	35	23.8%
Grand total	49	100.0%	27	100.0%	24	100.0%	27	100.0%	20	100.0%	147	100.0%

BH: behavioral health; Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

### Access to Linguistic Assistance

There were a total of 12 responders that reported use of the plan language assistance service. Of these 12 responders, the statewide favorability proportion was 83.3% (Q15, **Table 33**).

**Table 33: Q15, Satisfaction with Plan Language Assistance Service**

Q15	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	5	100.0%	1	100.0%	2	66.7%	2	100.0%		0.0%	10	83.3%
Neutral/Not favorable		0.0%		0.0%	1	33.3%		0.0%	1	100.0%	2	16.7%
Grand total	5	100.0%	1	100.0%	3	100.0%	2	100.0%	1	100.0%	12	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

### Provider Education and Training (Including Cultural Competency Trainings)

Each responder was asked to rate their satisfaction with the provider orientation and training process, educational trainings by the plan, the web-based provider portal, cultural competency training materials and sessions, accessibility of state-required BH training, and education provided by the plan on data collection and reporting to maximize Healthcare Effectiveness Data and Information Set (HEDIS®) performance.

Regarding the provider orientation and training process, among the 141 responders, the statewide favorability proportion was 56.0%, with MCO proportions ranging from 50.0% (Aetna) to 68.0% (LHCC; Q16a, **Table 34**).

**Table 34: Q16a, Provider Orientation and Training Process**

Q16a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	28	59.6%	13	50.0%	10	43.5%	17	68.0%	11	55.0%	79	56.0%
Neutral/Not favorable	19	40.4%	13	50.0%	13	56.5%	8	32.0%	9	45.0%	62	44.0%
Grand total	47	100.0%	26	100.0%	23	100.0%	25	100.0%	20	100.0%	141	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the educational trainings by the plan, among the 141 responders, the statewide favorability proportion was 56.7%, with MCO proportions ranging from 48.9% (ACLA) to 84.0% (LHCC; Q16b, **Table 35**).

**Table 35: Q16b, Educational Trainings by Plan**

Q16b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	23	48.9%	13	50.0%	12	52.2%	21	84.0%	11	55.0%	80	56.7%
Neutral/Not favorable	24	51.1%	13	50.0%	11	47.8%	4	16.0%	9	45.0%	61	43.3%
Grand total	47	100.0%	26	100.0%	23	100.0%	25	100.0%	20	100.0%	141	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the web-based provider portal, among the 141 responders, the statewide favorability proportion was 58.9%, with MCO proportions ranging from 54.3% (ACLA) to 69.2% (LHCC; Q16c, **Table 36**).

**Table 36: Q16c, Web-Based Provider Portal**

Q16c	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	25	54.3%	15	57.7%	14	60.9%	18	69.2%	11	55.0%	83	58.9%
Neutral/Not favorable	21	45.7%	11	42.3%	9	39.1%	8	30.8%	9	45.0%	58	41.1%
Grand total	46	100.0%	26	100.0%	23	100.0%	26	100.0%	20	100.0%	141	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the cultural competency training materials and session, among the 140 responders, the statewide favorability proportion was 55.7%, with MCO proportions ranging from 48.1% (Aetna) to 69.2% (LHCC; Q16d, **Table 37**).

**Table 37: Q16d, Cultural Competency Training Materials and Sessions**

Q16d	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	23	53.5%	13	48.1%	11	45.8%	18	69.2%	13	65.0%	78	55.7%
Neutral/Not favorable	20	46.5%	14	51.9%	13	54.2%	8	30.8%	7	35.0%	62	44.3%
Grand total	43	100.0%	27	100.0%	24	100.0%	26	100.0%	20	100.0%	140	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the accessibility of state-required BH training, among the 140 responders, the statewide favorability proportion was 57.1%, with MCO proportions ranging from 48.9% (ACLA) to 72.0% (LHCC; Q16e, **Table 38**).

**Table 38: Q16e, Accessibility of State-Required Behavioral Health Trainings**

Q16e	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	22	48.9%	15	57.7%	13	54.2%	18	72.0%	12	60.0%	80	57.1%
Neutral/Not favorable	23	51.1%	11	42.3%	11	45.8%	7	28.0%	8	40.0%	60	42.9%
Grand total	45	100.0%	26	100.0%	24	100.0%	25	100.0%	20	100.0%	140	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the education on HEDIS collection and reporting, among the 139 responders, the statewide favorability proportion was 51.1%, with MCO proportions ranging from 45.7% (ACLA) to 62.5% (LHCC; Q16f, **Table 39**).

**Table 39: Q16f, Education Provided to You by Plan on HEDIS Collection and Reporting**

Q16f	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	21	45.7%	13	52.0%	12	50.0%	15	62.5%	10	50.0%	71	51.1%
Neutral/Not favorable	25	54.3%	12	48.0%	12	50.0%	9	37.5%	10	50.0%	68	48.9%
Grand total	46	100.0%	25	100.0%	24	100.0%	24	100.0%	20	100.0%	139	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

### Claims Processing/Reimbursement/Resolution of Provider Complaints

Each responder was asked to rate their experience with the plan's performance in each of the following areas: timeliness of claims processing, accuracy of claims processing, claims reimbursement fees with contract rates, timeliness of claims appeals process, resolution of claims payment problems or disputes, communication of the outcome of claims appeals, and the overall complaint and appeals process.

Regarding the timeliness of claims processing, among the 145 responders, the statewide favorability proportion was 73.8%, with MCO proportions ranging from 60.8% (ACLA) to 87.0% (HB; Q17a, **Table 40**).

**Table 40: Q17a, Timeliness of Claims Processing**

Q17a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	31	60.8%	19	73.1%	20	87.0%	20	80.0%	17	85.0%	107	73.8%
Neutral/Not favorable	20	39.2%	7	26.9%	3	13.0%	5	20.0%	3	15.0%	38	26.2%
Grand total	51	100.0%	26	100.0%	23	100.0%	25	100.0%	20	100.0%	145	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the accuracy of claims processing, among the 145 responders, the statewide favorability proportion was 70.3%, with MCO proportions ranging from 62.7% (ACLA) to 80.0% (LHCC and UHC; Q17b, **Table 41**).

**Table 41: Q17b, Accuracy of Claims Processing**

Q17b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	32	62.7%	19	73.1%	15	65.2%	20	80.0%	16	80.0%	102	70.3%
Neutral/Not favorable	19	37.3%	7	26.9%	8	34.8%	5	20.0%	4	20.0%	43	29.7%
Grand total	51	100.0%	26	100.0%	23	100.0%	25	100.0%	20	100.0%	145	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.



Regarding the claims reimbursement fees with contract rates, among the 143 responders, the statewide favorability proportion was 78.3%, with MCO proportions ranging from 70.0% (ACLA) to 90.9% (HB; Q17c, **Table 42**).

**Table 42: Q17c, Claims Reimbursement Fees with Contract Rates**

Q17c	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	35	70.0%	21	80.8%	20	90.9%	20	80.0%	16	80.0%	112	78.3%
Neutral/Not favorable	15	30.0%	5	19.2%	2	9.1%	5	20.0%	4	20.0%	31	21.7%
Grand total	50	100.0%	26	100.0%	22	100.0%	25	100.0%	20	100.0%	143	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the timeliness of the claims appeals process, among the 144 responders, the statewide favorability proportion was 62.5%, with MCO proportions ranging from 54.9% (ACLA) to 80.0% (UHC; Q17d, **Table 43**).

**Table 43: Q17d, Timeliness of Claims Appeals Process**

Q17d	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	28	54.9%	15	60.0%	14	60.9%	17	68.0%	16	80.0%	90	62.5%
Neutral/Not favorable	23	45.1%	10	40.0%	9	39.1%	8	32.0%	4	20.0%	54	37.5%
Grand total	51	100.0%	25	100.0%	23	100.0%	25	100.0%	20	100.0%	144	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the resolution of claims payment problems or disputes, among the 143 responders, the statewide favorability proportion was 61.5%, with MCO proportions ranging from 54.9% (ACLA) to 70.0% (UHC; Q17e, **Table 44**).

**Table 44: Q17e, Resolution of Claims Payment Problems or Disputes**

Q17e	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	28	54.9%	16	64.0%	14	63.6%	16	64.0%	14	70.0%	88	61.5%
Neutral/Not favorable	23	45.1%	9	36.0%	8	36.4%	9	36.0%	6	30.0%	55	38.5%
Grand total	51	100.0%	25	100.0%	22	100.0%	25	100.0%	20	100.0%	143	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the communication of the outcome of claims appeals, among the 143 responders, the statewide favorability proportion was 64.3%, with MCO proportions ranging from 54.4% (HB) to 76.0% (LHCC; Q17f, **Table 45**).

**Table 45: Q17f, Communication of the Outcome of Claims Appeals**

Q17f	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	30	58.8%	16	64.0%	12	54.5%	19	76.0%	15	75.0%	92	64.3%
Neutral/Not favorable	21	41.2%	9	36.0%	10	45.5%	6	24.0%	5	25.0%	51	35.7%
Grand total	51	100.0%	25	100.0%	22	100.0%	25	100.0%	20	100.0%	143	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the overall complaint and appeals process, among the 141 responders, the statewide favorability proportion was 64.5%, with MCO proportions ranging from 58.3% (Aetna) to 75.0% (UHC; Q17g, **Table 46**).

**Table 46: Q17g, Overall Complaint and Appeals Process**

Q17g	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	30	60.0%	14	58.3%	14	63.6%	18	72.0%	15	75.0%	91	64.5%
Neutral/Not favorable	20	40.0%	10	41.7%	8	36.4%	7	28.0%	5	25.0%	50	35.5%
Grand total	50	100.0%	24	100.0%	22	100.0%	25	100.0%	20	100.0%	141	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

### Network/Coordination of Care/Case Management

Each responder was asked to rate the plan in the following service areas: number of specialists in the provider network; availability of medical specialists to accommodate referrals within a reasonable number of days; coordination of step-down services; ability to address the needs of members with special health care needs; ability to coordinate alcohol and/or substance use services, inclusive of residential or inpatient, when needed; ability to coordinate rehabilitation services, when needed; ability to arrange for non-emergency hospital admission, when needed; ability to make referrals to specialists and ancillary services, when needed; and ability to prescribe medications that provide for the best possible care.

Regarding the number of specialists in the plan provider network, among the 139 responders, the statewide favorability proportion was 69.8%, with a statistically significant difference in proportions across MCOs. MCO favorability proportions ranged from 56.0% (Aetna) to 95.7% (HB; Q18a, **Table 47**).

**Table 47: Q18a, Number of Specialists in the Plan Provider Network**

Q18a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	27	56.3%	14	56.0%	22	95.7%	18	78.3%	16	80.0%	97	69.8%
Neutral/Not favorable	21	43.8%	11	44.0%	1	4.3%	5	21.7%	4	20.0%	42	30.2%
Grand total <sup>1</sup>	48	100.0%	25	100.0%	23	100.0%	23	100.0%	20	100.0%	139	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

<sup>1</sup> Percentages may not add up to 100.0% due to rounding.

Regarding the availability of medical specialists to accommodate referrals, among the 137 responders, the statewide favorability proportion was 68.6%, with a statistically significant difference in proportions across MCOs. MCO favorability proportions ranged from 52.2% (Aetna) to 87.0% (LHCC; Q18b, **Table 48**).

**Table 48: Q18b, Availability of Medical Specialists to Accommodate Referrals within a Reasonable Number of Days**

Q18b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	28	58.3%	13	54.2%	16	72.7%	20	87.0%	17	85.0%	94	68.6%
Neutral/Not favorable	20	41.7%	11	45.8%	6	27.3%	3	13.0%	3	15.0%	43	31.4%
Grand total	48	100.0%	24	100.0%	22	100.0%	23	100.0%	20	100.0%	137	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the coordination of step-down services, among the 137 responders, the statewide favorability proportion was 64.2%, with MCO proportions ranging from 53.1% (ACLA) to 72.7% (HB and LHCC; Q18c, **Table 49**).

Table 49: Q18c, Coordination of Step-Down Services

Q18c	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	26	53.1%	16	66.7%	16	72.7%	16	72.7%	14	70.0%	88	64.2%
Neutral/Not favorable	23	46.9%	8	33.3%	6	27.3%	6	27.3%	6	30.0%	49	35.8%
Grand total	49	100.0%	24	100.0%	22	100.0%	22	100.0%	20	100.0%	137	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the ability to address the needs of members with special health care needs, among the 138 responders, the statewide favorability proportion was 69.6%, with MCO proportions ranging from 60.0% (Aetna) to 81.8% (HB; Q18d, **Table 50**).

Table 50: Q18d, Ability to Address the Needs of Members with Special Health Care Needs

Q18d	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	30	62.5%	15	60.0%	18	81.8%	17	73.9%	16	80.0%	96	69.6%
Neutral/Not favorable	18	37.5%	10	40.0%	4	18.2%	6	26.1%	4	20.0%	42	30.4%
Grand total	48	100.0%	25	100.0%	22	100.0%	23	100.0%	20	100.0%	138	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the ability to coordinate alcohol and/or substance use services, among the 138 responders, the statewide favorability proportion was 69.6%, with a statistically significant difference in proportions across MCOs. MCO favorability proportions ranged from 57.4% (ACLA) to 85.7% (HB; Q18e, **Table 51**).

Table 51: Q18e, Ability to Coordinate Alcohol and/or Substance Use Services, When Needed

Q18e	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	27	57.4%	15	57.7%	18	85.7%	19	79.2%	17	85.0%	96	69.6%
Neutral/Not favorable	20	42.6%	11	42.3%	3	14.3%	5	20.8%	3	15.0%	42	30.4%
Grand total	47	100.0%	26	100.0%	21	100.0%	24	100.0%	20	100.0%	138	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the ability to coordinate rehabilitation services, among the 135 responders, the statewide favorability proportion was 67.4%, with a statistically significant difference in proportions across MCOs. MCO favorability proportions ranged from 54.2% (ACLA) to 81.8% (LHCC; Q18f, **Table 52**).

**Table 52: Q18f, Ability to Coordinate Rehabilitation Services, When Needed**

Q18f	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	26	54.2%	14	58.3%	17	81.0%	18	81.8%	16	80.0%	91	67.4%
Neutral/Not favorable	22	45.8%	10	41.7%	4	19.0%	4	18.2%	4	20.0%	44	32.6%
Grand total	48	100.0%	24	100.0%	21	100.0%	22	100.0%	20	100.0%	135	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the ability to arrange for non-emergency hospital admissions, among the 134 responders, the statewide favorability proportion was 72.4%, with a statistically significant difference in proportions across MCOs. MCO favorability proportions ranged from 57.4% (ACLA) to 90.5% (HB; Q18g, **Table 53**).

**Table 53: Q18g, Ability to Arrange for Non-emergency Hospital Admissions, When Needed**

Q18g	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	27	57.4%	15	62.5%	19	90.5%	18	81.8%	18	90.0%	97	72.4%
Neutral/Not favorable	20	42.6%	9	37.5%	2	9.5%	4	18.2%	2	10.0%	37	27.6%
Grand total	47	100.0%	24	100.0%	21	100.0%	22	100.0%	20	100.0%	134	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the ability to make referrals to specialists and ancillary services when needed, among the 132 responders, the statewide favorability proportion was 68.9%, with MCO proportions ranging from 63.8% (ACLA) to 88.9% (UHC; Q18h, **Table 54**).

**Table 54: Q18h, Ability to Make Referrals to Specialists and Ancillary Services, When Needed**

Q18h	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	30	63.8%	12	52.2%	18	81.8%	15	68.2%	16	88.9%	91	68.9%
Neutral/Not favorable	17	36.2%	11	47.8%	4	18.2%	7	31.8%	2	11.1%	41	31.1%
Grand total	47	100.0%	23	100.0%	22	100.0%	22	100.0%	18	100.0%	132	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

With regard to ability to prescribe medications that provide for the best possible care, among the 133 responders, the statewide favorability proportion was 69.9%, with MCO proportions ranging from 56.0% (Aetna) to 94.4% (UHC; Q18i, **Table 55**).

**Table 55: Q18i, Ability to Prescribe Medications that Provide for the Best Possible Care**

Q18i	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	30	66.7%	14	56.0%	17	77.3%	15	65.2%	17	94.4%	93	69.9%
Neutral/Not favorable	15	33.3%	11	44.0%	5	22.7%	8	34.8%	1	5.6%	40	30.1%
Grand total	45	100.0%	25	100.0%	22	100.0%	23	100.0%	18	100.0%	133	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

### Network/Coordination of Care/Case Management—Medical Health Care Services

Each responder was asked to rate their experience with the plan's coordination of medical health care services in the areas of timeliness, accuracy, clarity, and sufficiency of information to coordinate care.

Regarding the timeliness of the plan's information to coordinate medical health care services, among the 133 responders, the statewide favorability proportion was 49.6%, with MCO proportions ranging from 38.5% (Aetna) to 61.9% (LHCC; Q19a, **Table 56**).

**Table 56: Q19a, Timeliness**

Q19a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	21	44.7%	10	38.5%	11	52.4%	13	61.9%	11	61.1%	66	49.6%
Neutral/Not favorable	26	55.3%	16	61.5%	10	47.6%	8	38.1%	7	38.9%	67	50.4%
Grand total	47	100.0%	26	100.0%	21	100.0%	21	100.0%	18	100.0%	133	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the accuracy of the plan's information to coordinate medical health care services, among the 133 responders, the statewide favorability proportion was 50.4%, with MCO proportions ranging from 44.7% (ACLA) to 61.9% (LHCC; Q19b, **Table 57**).

**Table 57: Q19b, Accuracy**

Q19b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	21	44.7%	12	46.2%	11	52.4%	13	61.9%	10	55.6%	67	50.4%
Neutral/Not favorable	26	55.3%	14	53.8%	10	47.6%	8	38.1%	8	44.4%	66	49.6%
Grand total	47	100.0%	26	100.0%	21	100.0%	21	100.0%	18	100.0%	133	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the clarity of the plan's information to coordinate medical health care services, among the 131 responders, the statewide favorability proportion was 46.6%, with MCO proportions ranging from 39.1% (ACLA) to 57.1% (LHCC; Q19c, **Table 58**).

**Table 58: Q19c, Clarity**

Q19c	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	18	39.1%	11	44.0%	10	47.6%	12	57.1%	10	55.6%	61	46.6%
Neutral/Not favorable	28	60.9%	14	56.0%	11	52.4%	9	42.9%	8	44.4%	70	53.4%
Grand total	46	100.0%	25	100.0%	21	100.0%	21	100.0%	18	100.0%	131	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the sufficiency of the plan's information to coordinate medical health care services, among the 134 responders, the statewide favorability proportion was 49.3%, with MCO proportions ranging from 40.4% (ACLA) to 61.1% (UHC; Q19d, **Table 59**).

**Table 59: Q19d, Sufficiency of Information to Coordinate Care**

Q19d	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	19	40.4%	13	48.1%	11	52.4%	12	57.1%	11	61.1%	66	49.3%
Neutral/Not favorable	28	59.6%	14	51.9%	10	47.6%	9	42.9%	7	38.9%	68	50.7%
Grand total	47	100.0%	27	100.0%	21	100.0%	21	100.0%	18	100.0%	134	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

### Network/Coordination of Care/Case Management—Behavioral Health Care Services

Each responder was asked to rate their experience with the plan's coordination of BH care services in the areas of timeliness, accuracy, clarity, and sufficiency of information to coordinate care.

Regarding the timeliness of the plan's information to coordinate BH care services, among the 142 responders, the statewide favorability proportion was 57.0%, with MCO proportions ranging from 47.1% (ACLA) to 70.8% (LHCC; Q20a, **Table 60**).

**Table 60: Q20a, Timeliness**

Q20a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	24	47.1%	13	52.0%	14	60.9%	17	70.8%	13	68.4%	81	57.0%
Neutral/Not favorable	27	52.9%	12	48.0%	9	39.1%	7	29.2%	6	31.6%	61	43.0%
Grand total	51	100.0%	25	100.0%	23	100.0%	24	100.0%	19	100.0%	142	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the accuracy of the plan's information to coordinate BH care services, among the 142 responders, the statewide favorability proportion was 57.0%, with MCO proportions ranging from 47.1% (ACLA) to 70.8%(LHCC; Q20b, **Table 61**).

Table 61: Q20b, Accuracy

Q20b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	24	47.1%	14	58.3%	14	58.3%	17	70.8%	12	63.2%	81	57.0%
Neutral/Not favorable	27	52.9%	10	41.7%	10	41.7%	7	29.2%	7	36.8%	61	43.0%
Grand total	51	100.0%	24	100.0%	24	100.0%	24	100.0%	19	100.0%	142	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the clarity of the plan's information to coordinate BH care services, among the 141 responders, the statewide favorability proportion was 57.4%, with MCO proportions ranging from 44.0% (ACLA) to 73.7% (UHC; Q20c, **Table 62**).

Table 62: Q20c, Clarity

Q20c	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	22	44.0%	15	60.0%	14	60.9%	16	66.7%	14	73.7%	81	57.4%
Neutral/Not favorable	28	56.0%	10	40.0%	9	39.1%	8	33.3%	5	26.3%	60	42.6%
Grand total	50	100.0%	25	100.0%	23	100.0%	24	100.0%	19	100.0%	141	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the sufficiency of the plan's information to coordinate BH care services, among the 141 responders, the statewide favorability proportion was 56.0%, with MCO proportions ranging from 46.0% (ACLA) to 68.4% (UHC; Q20d, **Table 63**).

Table 63: Q20d, Sufficiency of Information to Coordinate Care

Q20d	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	23	46.0%	14	56.0%	13	56.5%	16	66.7%	13	68.4%	79	56.0%
Neutral/Not favorable	27	54.0%	11	44.0%	10	43.5%	8	33.3%	6	31.6%	62	44.0%
Grand total	50	100.0%	25	100.0%	23	100.0%	24	100.0%	19	100.0%	141	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

## No-Show Appointments

Each responder was asked whether they have an issue with members not showing up to their appointments, as well as reminder methods used.

Among the 146 responders, more than half (53.4%) answered in the affirmative, with MCO proportions ranging from 19.6% (Aetna) to 83.3% (LHCC; Q21, **Table 64**). Phone calls were the most cited reminder method (41.5%), followed by text messages (27.1%; Q22, **Table 65**).

Table 64: Q21, Do You Have an Issue with Members not Showing up to their Appointments?

Q21	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%

Yes	27	52.9%	10	19.6%	13	54.2%	20	83.3%	8	40.0%	78	53.4%
No	24	47.1%	17	33.3%	11	45.8%	4	16.7%	12	60.0%	68	46.6%
Total	51	100.0%	27	52.9%	24	100.0%	24	100.0%	20	100.0%	146	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Table 65: Q22, Reminder Methods Used

Q22	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Phone call	29	50.0%	10	17.2%	10	33.3%	20	51.3%	9	25.0%	78	41.5%
Text	18	31.0%	10	17.2%	10	33.3%	9	23.1%	4	11.1%	51	27.1%
Email	5	8.6%	3	5.2%	5	16.7%	2	5.1%	1	2.8%	16	8.5%
U.S. mail	4	6.9%	1	1.7%	4	13.3%	4	10.3%	2	5.6%	15	8.0%
Other	2	3.4%	1	1.7%	1	3.3%	4	10.3%	20	55.6%	28	14.9%
All methods	58	100.0%	25	100.0%	30	100.0%	39	100.0%	36	100.0%	188	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

### Customer Service/Provider Relations

Each responder was asked whether they have a Provider Relations (PR) representative, and those who responded affirmatively were asked to rate their experience with the PR representative's ability to answer questions and resolve problems, responsiveness, and courtesy, accessibility, and helpfulness.

Regarding the PR representative's ability to answer questions and resolve problems, among the 91 responders, the statewide favorability rating was 37.4%, with MCO proportions ranging from 18.2% (Aetna) to 47.1% (HB; Q24a, **Table 66**).

Table 66: Q24a, Provider Relations Representative's Ability to Answer Questions and Resolve Problems

Q24a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	15	41.7%	2	18.2%	8	47.1%	5	27.8%	4	44.4%	34	37.4%
Neutral/Not favorable	21	58.3%	9	81.8%	9	52.9%	13	72.2%	5	55.6%	57	62.6%
Grand total	36	100.0%	11	100.0%	17	100.0%	18	100.0%	9	100.0%	91	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the PR representative's responsiveness and courtesy, among the 90 responders, the statewide favorability rating was 25.6%, with MCO proportions ranging from 10.0% (Aetna) to 44.4% (UHC; Q24b, **Table 67**).



Table 67: Q24b, Responsiveness and Courtesy of Your Provider Relations Representative

Q24b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	11	30.6%	1	10.0%	5	29.4%	2	11.1%	4	44.4%	23	25.6%
Neutral/Not favorable	25	69.4%	9	90.0%	12	70.6%	16	88.9%	5	55.6%	67	74.4%
Grand total	36	100.0%	10	100.0%	17	100.0%	18	100.0%	9	100.0%	90	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding access to the PR staff, among the 90 responders, the statewide favorability rating was 30.0%, with MCO proportions ranging from 22.2% (LHCC) to 44.4% (UHC; Q24c; **Table 68**).

Table 68: Q24c, Access to Provider Relations Staff

Q24c	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	11	30.6%	3	30.0%	5	29.4%	4	22.2%	4	44.4%	27	30.0%
Neutral/Not favorable	25	69.4%	7	70.0%	12	70.6%	14	77.8%	5	55.6%	63	70.0%
Grand total	36	100.0%	10	100.0%	17	100.0%	18	100.0%	9	100.0%	90	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the PR representative's helpfulness, among the 91 responders, the statewide favorability proportion was 28.6%, with MCO proportions ranging from 23.5% (HB) to 44.4% (UHC; Q24d, **Table 69**).

Table 69: Q24d, Helpfulness of Provider Relations Staff

Q24d	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	12	33.3%	3	27.3%	4	23.5%	3	16.7%	4	44.4%	26	28.6%
Neutral/Not favorable	24	66.7%	8	72.7%	13	76.5%	15	83.3%	5	55.6%	65	71.4%
Grand total	36	100.0%	11	100.0%	17	100.0%	18	100.0%	9	100.0%	91	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

### Utilization Management (Including Medical Reviews and Support towards Patient-Centered Medical Home Implementation)

Each responder was asked to rate their experience with utilization management (UM, including medical reviews and support towards patient-centered medical home implementation). Specific questions addressed the process and timeliness of obtaining pre-certifications/referral/authorization information; the extent to which UM staff share review criteria and reasons for adverse determinations; peer-to-peer review process; access to case/care managers from the health plan; and the plan UM process overall.

Regarding the process of obtaining pre-certification/referral/authorization information, among the 138 responders, the statewide favorability proportion was 73.9%, with MCO proportions ranging from 67.3% (ACLA) to 86.4% (HB; Q25a, **Table 70**).

**Table 70: Q25a, Process of Obtaining Pre-Certification/Referral/Authorization Information**

Q25a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	33	67.3%	16	69.6%	19	86.4%	20	80.0%	14	73.7%	102	73.9%
Neutral/Not favorable	16	32.7%	7	30.4%	3	13.6%	5	20.0%	5	26.3%	36	26.1%
Grand total	49	100.0%	23	100.0%	22	100.0%	25	100.0%	19	100.0%	138	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the timeliness of obtaining pre-certification/referral/authorization information, among the 136 responders, the statewide favorability proportion was 74.3%, with MCO proportions ranging from 63.2% (UHC) to 87.5% (LHCC; Q25b, **Table 71**).

**Table 71: Q25b, Timeliness of Obtaining Pre-Certification/Referral/Authorization Information**

Q25b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	34	69.4%	16	72.7%	18	81.8%	21	87.5%	12	63.2%	101	74.3%
Neutral/Not favorable	15	30.6%	6	27.3%	4	18.2%	3	12.5%	7	36.8%	35	25.7%
Grand total	49	100.0%	22	100.0%	22	100.0%	24	100.0%	19	100.0%	136	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the extent to which UM staff share review criteria and reasons for adverse determinations, among the 135 responders, the statewide favorability proportion was 70.4%, with MCO proportions ranging from 62.5% (ACLA) to 83.3% (LHCC; Q25c, **Table 72**).

**Table 72: Q25c, Extent to which UM Staff Share Review Criteria and Reasons for Adverse Determinations**

Q25c	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	30	62.5%	14	63.6%	17	77.3%	20	83.3%	14	73.7%	95	70.4%
Neutral/Not favorable	18	37.5%	8	36.4%	5	22.7%	4	16.7%	5	26.3%	40	29.6%
Grand total	48	100.0%	22	100.0%	22	100.0%	24	100.0%	19	100.0%	135	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the peer-to-peer review process, among the 134 responders, the statewide favorability proportion was 68.7%, with MCO proportions ranging from 59.1% (Aetna) to 81.0% (HB; Q25d, **Table 73**).

Table 73: Q25d, Peer-to-Peer Review Process

Q25d	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	30	62.5%	13	59.1%	17	81.0%	19	79.2%	13	68.4%	92	68.7%
Neutral/Not favorable	18	37.5%	9	40.9%	4	19.0%	5	20.8%	6	31.6%	42	31.3%
Grand total	48	100.0%	22	100.0%	21	100.0%	24	100.0%	19	100.0%	134	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding access to Health Plan Case/Care Managers, among the 135 responders, the statewide favorability proportion was 71.9%, with MCO proportions ranging from 63.3% (ACLA) to 83.3% (UHC; Q25e, **Table 74**).

Table 74: Q25e, Access to Case/Care Managers from this Health Plan

Q25e	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	31	63.3%	16	72.7%	17	77.3%	18	75.0%	15	83.3%	97	71.9%
Neutral/Not favorable	18	36.7%	6	27.3%	5	22.7%	6	25.0%	3	16.7%	38	28.1%
Grand total	49	100.0%	22	100.0%	22	100.0%	24	100.0%	18	100.0%	135	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the Health Plan UM process overall, among the 137 responders, the statewide favorability proportion was 69.3%, with MCO proportions ranging from 60.9% (Aetna) to 84.0% (LHCC; Q25f, **Table 75**).

Table 75: Q25f, Plan UM Process Overall

Q25f	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	30	62.5%	14	60.9%	17	77.3%	21	84.0%	13	68.4%	95	69.3%
Neutral/Not favorable	18	37.5%	9	39.1%	5	22.7%	4	16.0%	6	31.6%	42	30.7%
Grand total	48	100.0%	23	100.0%	22	100.0%	25	100.0%	19	100.0%	137	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

## Call Center

Each responder was asked to rate their overall satisfaction with the Health Plan Call Center. Among the 144 responders, the statewide favorability proportion was 50.7%, with MCO proportions ranging from 44.4% (UHC) to 64.3% (LHCC; Q26, **Table 76**).

Table 76: Q26, Overall Satisfaction with Plan Call Center Services

Q26	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	23	46.0%	12	48.0%	12	52.2%	18	64.3%	8	44.4%	73	50.7%
Neutral/Not favorable	27	54.0%	13	52.0%	11	47.8%	10	35.7%	10	55.6%	71	49.3%
Grand total	50	100.0%	25	100.0%	23	100.0%	28	100.0%	18	100.0%	144	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

## Overall Satisfaction with the Plan

Each responder was asked to rate their overall satisfaction with the plan. Among the 142 responders, the statewide favorability proportion was 76.1%, with MCO proportions ranging from 68.0% (Aetna) to 85.7% (LHCC; Q27, **Table 77**).

Table 77: Q27, Overall Satisfaction with the Plan

Q27	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	34	70.8%	17	68.0%	19	79.2%	24	85.7%	14	82.4%	108	76.1%
Neutral/Not favorable	14	29.2%	8	32.0%	5	20.8%	4	14.3%	3	17.6%	34	23.9%
Grand total	48	100.0%	25	100.0%	24	100.0%	28	100.0%	17	100.0%	142	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Each responder was asked to indicate their satisfaction with each plan (all five plans; not restricted to the plan identified as the subject of the responder's survey).

The resultant MCO-specific favorability proportions, from highest to lowest favorability proportion, were Aetna (66.4%), LHCC (65.7%), HB (63.6%), UHC (61.8%), and ACLA (54.9%; Q28, **Table 78**).

Table 78: Q28, Please Rank Plans from Satisfied to Dissatisfied

Q28	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	78	54.9%	95	66.4%	91	63.6%	90	65.7%	84	61.8%	438	62.5%
Neutral/Not favorable	64	45.1%	48	33.6%	52	36.4%	47	34.3%	52	38.2%	263	37.5%
Grand total	142	100.0%	143	100.0%	143	100.0%	137	100.0%	136	100.0%	701	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Each responder was asked whether they would recommend the health plan to others.

Among the total of 153 responders, the statewide proportion that answered in the affirmative was 66.0%, with MCO proportions ranging from 50.0% (Aetna) to 75.0% (LHCC and UHC; Q29, **Table 79**).

Table 79: Q29, Would You Recommend this Plan to Others?

Q29	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Yes	33	63.5%	14	50.0%	18	72.0%	21	75.0%	15	75.0%	101	66.0%
No	15	28.8%	8	28.6%	3	12.0%	4	14.3%	4	20.0%	34	22.2%
Grand total <sup>1</sup>	52	100.0%	28	100.0%	25	100.0%	28	100.0%	20	100.0%	153	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

<sup>1</sup> Percentages may not add up to 100.0% due to rounding.

## Non-BH Survey Findings

### Provider Enrollment, Provider Resources and Access to Linguistic Assistance

Each responder was asked to rate satisfaction with the provider enrollment contracting process. There were a total of 79 responders to this question (Q5, **Table 80**). The statewide favorability proportion was 57.0%, with MCO proportions ranging from 43.8% (HB) to 80.0% (Aetna).

Table 80: Q5, Satisfaction with Your Provider Enrollment Contracting Process

Q5	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	14	63.6%	4	80.0%	7	43.8%	14	53.8%	6	60.0%	45	57.0%
Neutral/Not favorable	8	36.4%	1	20.0%	9	56.3%	12	46.2%	4	40.0%	34	43.0%
Grand total	22	100.0%	5	100.0%	16	100.0%	26	100.0%	10	100.0%	79	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

### Provider Resources

Each responder was asked to rate the quality and effectiveness of each of the following MCO materials: provider manuals, provider newsletters, general provider communications, and the provider directory.

For provider manuals, among the 69 responders, the statewide favorability proportion was 79.7%, with MCO proportions ranging from 50.0% (Aetna) to 95.7% (LHCC; Q6a, **Table 81**).

Table 81: Q6a, Provider Manual

Q6a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	14	77.8%	2	50.0%	11	68.8%	22	95.7%	6	75.0%	55	79.7%
Neutral/Not favorable	4	22.2%	2	50.0%	5	31.3%	1	4.3%	2	25.0%	14	20.3%
Grand total <sup>1</sup>	18	100.0%	4	100.0%	16	100.0%	23	100.0%	8	100.0%	69	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

<sup>1</sup> Percentages may not add up to 100.0% due to rounding.

For provider newsletters, among the 68 responders, the statewide favorability proportion was 79.4%, with MCO proportions ranging from 50.0% (Aetna) to 95.7% (LHCC; Q6b, **Table 82**).

Table 82: Q6b, Provider Newsletters

Q6b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	13	76.5%	2	50.0%	10	66.7%	22	95.7%	7	77.8%	54	79.4%
Neutral/Not favorable	4	23.5%	2	50.0%	5	33.3%	1	4.3%	2	22.2%	14	20.6%
Grand total	17	100.0%	4	100.0%	15	100.0%	23	100.0%	9	100.0%	68	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

For general provider communications, among the 69 responders, the statewide favorability proportion was 76.8%, with MCO proportions ranging from 50.0% (Aetna) to 91.3% (LHCC; Q6c, **Table 83**).

**Table 83: Q6c, General Provider Communications**

Q6c	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	14	77.8%	2	50.0%	10	66.7%	21	91.3%	6	66.7%	53	76.8%
Neutral/Not favorable	4	22.2%	2	50.0%	5	33.3%	2	8.7%	3	33.3%	16	23.2%
Grand total	18	100.0%	4	100.0%	15	100.0%	23	100.0%	9	100.0%	69	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

For the provider directory, among the 73 responders, the statewide favorability proportion was 65.8%, with MCO proportions ranging from 46.7% (HB) to 80.0% (ACLA; Q6d, **Table 84**).

**Table 84: Q6d, Provider Directory**

Q6d	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	16	80.0%	3	60.0%	7	46.7%	15	62.5%	7	77.8%	48	65.8%
Neutral/Not favorable	4	20.0%	2	40.0%	8	53.3%	9	37.5%	2	22.2%	25	34.2%
Grand total	20	100.0%	5	100.0%	15	100.0%	24	100.0%	9	100.0%	73	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Based on interactions with non-Claims staff, each responder was asked to rate their practice's experience with responses to their telephone inquiries with regard to staff accuracy and helpfulness.

Regarding non-Claims staff accuracy, among the 76 responders, the statewide favorability proportion was 71.1%, with MCO proportions ranging from 56.3% (HB) to 79.2% (LHCC; Q7a, **Table 85**).

**Table 85: Q7a, Accuracy of Non-Claims Staff Responses**

Q7a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	16	76.2%	3	60.0%	9	56.3%	19	79.2%	7	70.0%	54	71.1%
Neutral/Not favorable	5	23.8%	2	40.0%	7	43.8%	5	20.8%	3	30.0%	22	28.9%
Grand total <sup>1</sup>	21	100.0%	5	100.0%	16	100.0%	24	100.0%	10	100.0%	76	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

<sup>1</sup> Percentages may not add up to 100.0% due to rounding.

Regarding non-Claims staff helpfulness, among the 76 responders, the statewide favorability proportion was 67.1%, with MCO proportions ranging from 40.0% (HB) to 76.2% (ACLA; Q7b, **Table 86**).

**Table 86: Q7b, Helpfulness of Non-Claims Staff Responses**

Q7b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	16	76.2%	3	60.0%	6	40.0%	19	76.0%	7	70.0%	51	67.1%
Neutral/Not favorable	5	23.8%	2	40.0%	9	60.0%	6	24.0%	3	30.0%	25	32.9%
Grand total	21	100.0%	5	100.0%	15	100.0%	25	100.0%	10	100.0%	76	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

### Provider Enrollment, Provider Resources and Access to Linguistic Assistance

Based on interactions with Claims staff, each responder was asked to rate their practice's experience with responses to their telephone inquiries with regard to staff knowledge, accuracy, helpfulness, and timely communication of changes in policies/procedures.

Regarding Claims staff knowledge, among the 74 responders, the statewide favorability proportion was 64.9%, with MCO proportions ranging from 40.0% (HB) to 82.6% (LHCC; Q8a, **Table 87**).

**Table 87: Q8a, Knowledge of Claims Staff**

Q8a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	14	66.7%	3	60.0%	6	40.0%	19	82.6%	6	60.0%	48	64.9%
Neutral/Not favorable	7	33.3%	2	40.0%	9	60.0%	4	17.4%	4	40.0%	26	35.1%
Grand total	21	100.0%	5	100.0%	15	100.0%	23	100.0%	10	100.0%	74	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding Claims staff accuracy, among the 75 responders, the statewide favorability proportion was 66.7%, with MCO proportions ranging from 50.0% (HB) to 78.3% (LHCC; Q8b, **Table 88**).

**Table 88: Q8b, Accuracy of Claims Staff Responses**

Q8b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	15	71.4%	3	60.0%	8	50.0%	18	78.3%	6	60.0%	50	66.7%
Neutral/Not favorable	6	28.6%	2	40.0%	8	50.0%	5	21.7%	4	40.0%	25	33.3%
Grand total	21	100.0%	5	100.0%	16	100.0%	23	100.0%	10	100.0%	75	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding Claims staff helpfulness, among the 75 responders, the statewide favorability proportion was 66.7%, with MCO proportions ranging from 43.8% (HB) to 82.6% (LHCC; Q8c, **Table 89**).

**Table 89: Q8c, Helpfulness of Claims Staff Responses**

Q8c	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	15	71.4%	3	60.0%	7	43.8%	19	82.6%	6	60.0%	50	66.7%
Neutral/Not favorable	6	28.6%	2	40.0%	9	56.3%	4	17.4%	4	40.0%	25	33.3%
Grand total <sup>1</sup>	21	100.0%	5	100.0%	16	100.0%	23	100.0%	10	100.0%	75	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

<sup>1</sup>Percentages may not add up to 100.0% due to rounding.

Regarding timely communication of changes in policies/procedures, among the 76 responders, the statewide favorability proportion was 53.9%, with MCO proportions ranging from 37.5% (HB) to 66.7% (ACLA; Q8d, **Table 90**).

**Table 90: Q8d, Timely Communication of Changes in Policies/Procedures**

Q8d	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	14	66.7%	3	60.0%	6	37.5%	13	54.2%	5	50.0%	41	53.9%
Neutral/Not favorable	7	33.3%	2	40.0%	10	62.5%	11	45.8%	5	50.0%	35	46.1%
Grand total	21	100.0%	5	100.0%	16	100.0%	24	100.0%	10	100.0%	76	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

### Provider Enrollment, Provider Resources and Access to Linguistic Assistance

Each responder was asked to rate the plan provider portal with regard to finding member eligibility information, claims payments/invoices information, and the Member Gaps in Care Report, as well as submitting prior authorization requests and receiving determinations, accessing plan reports, and overall experience with the provider portal.

Regarding finding member eligibility information, among the 69 responders, the statewide favorability proportion was 82.6%, with MCO proportions ranging from 60.0% (Aetna) to 100% (UHC; Q9a, **Table 91**).

**Table 91: Q9a, Provider Portal—Finding Member Eligibility Information**

Q9a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	15	78.9%	3	60.0%	10	66.7%	21	95.5%	8	100.0%	57	82.6%
Neutral/Not favorable	4	21.1%	2	40.0%	5	33.3%	1	4.5%		0.0%	12	17.4%
Grand total	19	100.0%	5	100.0%	15	100.0%	22	100.0%	8	100.0%	69	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.



Regarding finding claim payments/invoices, among the 71 responders, the statewide favorability proportion was 74.6%, with MCO proportions ranging from 40.0% (Aetna) to 90.9% (LHCC; Q9b, **Table 92**).

**Table 92: Q9b, Provider Portal—Finding Claim Payments/Invoices Information**

Q9b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	15	75.0%	2	40.0%	10	66.7%	20	90.9%	6	66.7%	53	74.6%
Neutral/Not favorable	5	25.0%	3	60.0%	5	33.3%	2	9.1%	3	33.3%	18	25.4%
Grand total	20	100.0%	5	100.0%	15	100.0%	22	100.0%	9	100.0%	71	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding finding the Member Gaps in Care Report, among the 67 responders, the statewide favorability proportion was 70.1%, with MCO proportions ranging from 46.7% (HB) to 81.8% (LHCC; Q9c, **Table 93**).

**Table 93: Q9c, Provider Portal—Finding the Member Gaps in Care Report**

Q9c	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	15	78.9%	2	50.0%	7	46.7%	18	81.8%	5	71.4%	47	70.1%
Neutral/Not favorable	4	21.1%	2	50.0%	8	53.3%	4	18.2%	2	28.6%	20	29.9%
Grand total	19	100.0%	4	100.0%	15	100.0%	22	100.0%	7	100.0%	67	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding submitting prior authorization requests and receiving determinations, among the 69 responders, the statewide favorability proportion was 56.5%, with MCO proportions ranging from 40.0% (Aetna) to 85.7% (UHC; Q9d, **Table 94**).

**Table 94: Q9d, Provider Portal—Submitting Prior Authorization Requests and Receiving Determinations**

Q9d	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	13	65.0%	2	40.0%	8	53.3%	10	45.5%	6	85.7%	39	56.5%
Neutral/Not favorable	7	35.0%	3	60.0%	7	46.7%	12	54.5%	1	14.3%	30	43.5%
Grand total	20	100.0%	5	100.0%	15	100.0%	22	100.0%	7	100.0%	69	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding accessing plan reports, among the 67 responders, the statewide favorability proportion was 71.6%, with MCO proportions ranging from 50.0% (Aetna) to 81.8% (LHCC; Q9e, **Table 95**).

**Table 95: Q9e, Provider Portal—Accessing Plan Reports**

Q9e	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	13	72.2%	2	50.0%	9	60.0%	18	81.8%	6	75.0%	48	71.6%
Neutral/Not favorable	5	27.8%	2	50.0%	6	40.0%	4	18.2%	2	25.0%	19	28.4%
Grand total	18	100.0%	4	100.0%	15	100.0%	22	100.0%	8	100.0%	67	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding overall experience with the provider portal, among the 70 responders, the statewide favorability proportion was 72.9%, with MCO proportions ranging from 46.7% (HB) to 87.0% (LHCC; Q9f, **Table 96**).

**Table 96: Q9f, Overall Experience with Provider Portal**

Q9f	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	14	77.8%	3	60.0%	7	46.7%	20	87.0%	7	77.8%	51	72.9%
Neutral/Not favorable	4	22.2%	2	40.0%	8	53.3%	3	13.0%	2	22.2%	19	27.1%
Grand total	18	100.0%	5	100.0%	15	100.0%	23	100.0%	9	100.0%	70	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Each responder was asked to rate overall satisfaction with communication from the plan. There were a total of 73 responders to this question (Q10, **Table 97**). The statewide favorability proportion was 65.8%, with MCO proportions ranging from 40.0% (HB) to 82.6% (LHCC).

**Table 97: Q10, Overall Satisfaction with the Communication Received from Plan**

Q10	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	12	60.0%	3	60.0%	6	40.0%	19	82.6%	8	80.0%	48	65.8%
Neutral/Not favorable	8	40.0%	2	40.0%	9	60.0%	4	17.4%	2	20.0%	25	34.2%
Grand total	20	100.0%	5	100.0%	15	100.0%	23	100.0%	10	100.0%	73	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

### Access to Linguistic Assistance

Each responder was asked whether their practice uses any of the plan's interpreter services for non-English-speaking patients.

There were a total of 83 responders to this question, and the majority (88.0%) indicated that they did not use any of the plan's interpreters (Q11, **Table 98**).

**Table 98: Q11, Use of Plan's Language Assistance Service for Non-English-Speaking Patients**

Q11	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Yes	2	2.4%	0	0.0%	0	0.0%	2	2.4%	0	0.0%	4	4.8%
No	19	22.9%	5	6.0%	16	19.3%	23	27.7%	10	12.0%	73	88.0%
Missing/No response	62	74.7%	78	94.0%	67	80.7%	58	69.9%	73	88.0%	6	7.2%
Total <sup>1</sup>	83	100.0%	83	100.0%	83	100.0%	83	100.0%	83	100.0%	83	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

<sup>1</sup> Percentages may not add up to 100.0% due to rounding.

Each responder was asked to rate their satisfaction with the provider orientation and training process, educational trainings by the plan, the web-based provider portal, and cultural competency training materials and sessions.

Regarding the provider orientation and training process, among the 66 responders, the statewide favorability proportion was 47.0%, with MCO proportions ranging from 37.5% (UHC) to 60.0% (HB; Q13a, **Table 99**).

**Table 99: Q13a, Provider Orientation and Training Process (Including Cultural Competency Training)**

Q13a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	9	47.4%	2	50.0%	9	60.0%	8	40.0%	3	37.5%	31	47.0%
Neutral/Not favorable	10	52.6%	2	50.0%	6	40.0%	12	60.0%	5	62.5%	35	53.0%
Grand total	19	100.0%	4	100.0%	15	100.0%	20	100.0%	8	100.0%	66	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the educational trainings by the plan, among the 66 responders, the statewide favorability rating was 40.9%, with MCO proportions ranging from 25.0% to 47.4%; Q13b, **Table 100**).

**Table 100: Q13b, Educational Trainings by Plan**

Q13b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	9	47.4%	1	25.0%	7	46.7%	8	40.0%	2	25.0%	27	40.9%
Neutral/Not favorable	10	52.6%	3	75.0%	8	53.3%	12	60.0%	6	75.0%	39	59.1%
Grand total	19	100.0%	4	100.0%	15	100.0%	20	100.0%	8	100.0%	66	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the web-based provider portal, among the 68 responders, the statewide favorability rating was 50.0%, with MCO proportions ranging from 40.0% (HB) to 63.2% (ACLA; Q13c, **Table 101**).

**Table 101: Q13c, Web-Based Provider Portal**

Q13c	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	12	63.2%	3	60.0%	6	40.0%	9	42.9%	4	50.0%	34	50.0%
Neutral/Not favorable	7	36.8%	2	40.0%	9	60.0%	12	57.1%	4	50.0%	34	50.0%
Grand total	19	100.0%	5	100.0%	15	100.0%	21	100.0%	8	100.0%	68	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the cultural competency training materials and session, among the 65 responders, the statewide favorability rating was 33.8%, with MCO proportions ranging from 23.1% (HB) to 47.4% (ACLA; Q13d, **Table 102**).

**Table 102: Q13d, Cultural Competency Training Materials and Sessions**

Q13d	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	9	47.4%	2	40.0%	3	23.1%	5	25.0%	3	37.5%	22	33.8%
Neutral/Not favorable	10	52.6%	3	60.0%	10	76.9%	15	75.0%	5	62.5%	43	66.2%
Grand total	19	100.0%	5	100.0%	13	100.0%	20	100.0%	8	100.0%	65	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

## Claims Processing/Reimbursement/Complaint Resolution

Each responder was asked to rate their experience with the plan's performance in each of the following areas: timeliness of claims processing, accuracy of claims processing, claims reimbursement fees with contract rates, complaint and appeals process, timeliness of claims appeals process, resolution of claims payment problems or disputes, communication of the outcome of claims appeals, and the education provided by the plan on data collection and reporting to maximize HEDIS performance.

Regarding timeliness of claims processing, among the 72 responders, the statewide favorability proportion was 77.8%, with MCO proportions ranging from 60.0% (Aetna) to 85.7% (ACLA; Q14a, **Table 103**).

**Table 103: Q14a, Timeliness of Claims Processing**

Q14a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	18	85.7%	3	60.0%	9	69.2%	20	83.3%	6	66.7%	56	77.8%
Neutral/Not favorable	3	14.3%	2	40.0%	4	30.8%	4	16.7%	3	33.3%	16	22.2%
Grand total	21	100.0%	5	100.0%	13	100.0%	24	100.0%	9	100.0%	72	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding accuracy of claims processing, among the 71 responders, the statewide favorability proportion was 67.6%, with MCO proportions ranging from 54.2% (LHCC) to 90.5% (ACLA; Q14b, **Table 104**).

**Table 104: Q14b, Accuracy of Claims Processing**

Q14b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	19	90.5%	3	60.0%	8	61.5%	13	54.2%	5	62.5%	48	67.6%
Neutral/Not favorable	2	9.5%	2	40.0%	5	38.5%	11	45.8%	3	37.5%	23	32.4%
Grand total	21	100.0%	5	100.0%	13	100.0%	24	100.0%	8	100.0%	71	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding claims reimbursement rates with contract rates, among the 71 responders, the statewide favorability proportion was 74.6%, with MCO proportions ranging from 60.0% (Aetna) to 83.3% (LHCC; Q14c, **Table 105**).

**Table 105: Q14c, Claims Reimbursement Fees with Contract Rates**

Q14c	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	16	76.2%	3	60.0%	8	61.5%	20	83.3%	6	75.0%	53	74.6%
Neutral/Not favorable	5	23.8%	2	40.0%	5	38.5%	4	16.7%	2	25.0%	18	25.4%
Grand total	21	100.0%	5	100.0%	13	100.0%	24	100.0%	8	100.0%	71	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the complaint and appeals process, among the 72 responders, the statewide favorability proportion was 65.3%, with MCO proportions ranging from 42.9% (HB) to 81.0% (ACLA; Q14d; **Table 106**).

**Table 106: Q14d, Complaint and Appeals Process**

Q14d	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	17	81.0%	2	50.0%	6	42.9%	17	70.8%	5	55.6%	47	65.3%
Neutral/Not favorable	4	19.0%	2	50.0%	8	57.1%	7	29.2%	4	44.4%	25	34.7%
Grand total	21	100.0%	4	100.0%	14	100.0%	24	100.0%	9	100.0%	72	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the timeliness of the claims appeals process, among the 73 responders, the statewide favorability proportion was 58.9%, with MCO proportions ranging from 40.0% (Aetna) to 81.0% (ACLA; Q14e, **Table 107**).

**Table 107: Q14e, Timeliness of Claims Appeals Process**

Q14e	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	17	81.0%	2	40.0%	6	42.9%	13	54.2%	5	55.6%	43	58.9%
Neutral/Not favorable	4	19.0%	3	60.0%	8	57.1%	11	45.8%	4	44.4%	30	41.1%
Grand total	21	100.0%	5	100.0%	14	100.0%	24	100.0%	9	100.0%	73	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the resolution of claims payment problems or disputes, among the 72 responders, the statewide favorability proportion was 68.1%, with MCO proportions ranging from 42.9% (HB) to 81.0% (ACLA; Q14f, **Table 108**).

**Table 108: Q14f, Resolution of Claims Payment Problems or Disputes**

Q14f	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	17	81.0%	3	60.0%	6	42.9%	19	79.2%	4	50.0%	49	68.1%
Neutral/Not favorable	4	19.0%	2	40.0%	8	57.1%	5	20.8%	4	50.0%	23	31.9%
Grand total	21	100.0%	5	100.0%	14	100.0%	24	100.0%	8	100.0%	72	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding communication of the outcome of claims appeals, among the 73 responders, the statewide favorability proportion was 68.5%, with MCO proportions ranging from 44.4% (UHC) to 81.0% (ACLA; Q14g; **Table 109**).

**Table 109: Q14g, Communication of the Outcome of Claims Appeals**

Q14g	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	17	81.0%	3	60.0%	8	57.1%	18	75.0%	4	44.4%	50	68.5%
Neutral/Not favorable	4	19.0%	2	40.0%	6	42.9%	6	25.0%	5	55.6%	23	31.5%
Grand total	21	100.0%	5	100.0%	14	100.0%	24	100.0%	9	100.0%	73	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding education provided by the plan on data collection and reporting to maximize HEDIS performance, among the 72 responders, the statewide favorability proportion was 63.9%, with MCO proportions ranging from 33.3% (Aetna) to 80.0% (ACLA; Q14h; **Table 110**).

**Table 110: Q14h, Education Provided by Plan on Data Collection and Reporting to Maximize Your HEDIS Performance**

Q14h	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	16	80.0%	1	33.3%	7	50.0%	15	60.0%	7	70.0%	46	63.9%
Neutral/Not favorable	4	20.0%	2	66.7%	7	50.0%	10	40.0%	3	30.0%	26	36.1%
Grand total	20	100.0%	3	100.0%	14	100.0%	25	100.0%	10	100.0%	72	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

### Network/Coordination of Care/Case Management

Each responder was asked to rate the plan in the following service areas: number of specialists in the provider network; availability of medical specialists to accommodate referrals within a reasonable number of days; coordination of step-down services; ability to coordinate alcohol and/or substance use services, inclusive of residential or inpatient; ability to coordinate rehabilitation services; ability to arrange for non-emergency hospital admission, when needed; ability to make referrals to specialists and ancillary services ; and ability to prescribe medications that provide for the best possible care.

Regarding the number of specialists in the plan provider network, among the 74 responders, the statewide favorability proportion was 44.6%, with MCO proportions ranging from 33.3% (LHCC) to 80.0% (Aetna; Q15a, **Table 111**).

**Table 111: Q15a, Number of Specialists in Plan Provider Network**

Q15a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	11	52.4%	4	80.0%	6	37.5%	8	33.3%	4	50.0%	33	44.6%
Neutral/Not favorable	10	47.6%	1	20.0%	10	62.5%	16	66.7%	4	50.0%	41	55.4%
Grand total	21	100.0%	5	100.0%	16	100.0%	24	100.0%	8	100.0%	74	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the availability of medical specialists to accommodate referrals, among the 75 responders, the statewide favorability proportion was 45.3%, with MCO proportions ranging from 37.5% (HB) to 57.1% (ACLA; Q15b, **Table 112**).

**Table 112: Q15b, Availability of Medical Specialists to Accommodate Your Referrals within a Reasonable Number of Days**

Q15b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	12	57.1%	2	50.0%	6	37.5%	10	40.0%	4	44.4%	34	45.3%
Neutral/Not favorable	9	42.9%	2	50.0%	10	62.5%	15	60.0%	5	55.6%	41	54.7%
Grand total	21	100.0%	4	100.0%	16	100.0%	25	100.0%	9	100.0%	75	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding coordination of step-down services, among the 65 responders, the statewide favorability proportion was 55.4%, with MCO proportions ranging from 33.3% (Aetna) to 83.3% (UHC; Q15c, **Table 113**).

**Table 113: Q15c, Coordination of Step-Down Services**

Q15c	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	13	68.4%	1	33.3%	7	50.0%	10	43.5%	5	83.3%	36	55.4%
Neutral/Not favorable	6	31.6%	2	66.7%	7	50.0%	13	56.5%	1	16.7%	29	44.6%
Grand total	19	100.0%	3	100.0%	14	100.0%	23	100.0%	6	100.0%	65	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the ability to coordinate alcohol and/or substance use services, among the 59 responders, the statewide favorability proportion was 45.8%, with MCO proportions ranging from 33.3% (Aetna) to 80.0% (UHC; Q15d, **Table 114**).

**Table 114: Q15d, Ability to Coordinate Alcohol and/or Substance Use Services, Inclusive of Residential or Inpatient**

Q15d	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	8	50.0%	1	33.3%	6	42.9%	8	38.1%	4	80.0%	27	45.8%
Neutral/Not favorable	8	50.0%	2	66.7%	8	57.1%	13	61.9%	1	20.0%	32	54.2%
Grand total	16	100.0%	3	100.0%	14	100.0%	21	100.0%	5	100.0%	59	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the ability to coordinate rehabilitation services, among the 64 responders, the statewide favorability proportion was 46.9%, with MCO proportions ranging from 33.3% (Aetna) to 66.7% (UHC; Q15e, **Table 115**).

**Table 115: Q15e, Ability to Coordinate Rehabilitation Services**

Q15e	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	9	52.9%	1	33.3%	6	40.0%	10	43.5%	4	66.7%	30	46.9%
Neutral/Not favorable	8	47.1%	2	66.7%	9	60.0%	13	56.5%	2	33.3%	34	53.1%
Grand total	17	100.0%	3	100.0%	15	100.0%	23	100.0%	6	100.0%	64	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the ability to arrange for non-emergency hospital admissions, among the 65 responders, the statewide favorability proportion was 52.3%, with MCO proportions ranging from 33.3% (Aetna) to 71.4% (UHC; Q15f, **Table 116**).

**Table 116: Q15f, Ability to Arrange for Non-emergency Hospital Admissions**

Q15f	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	11	61.1%	1	33.3%	6	42.9%	11	47.8%	5	71.4%	34	52.3%
Neutral/Not favorable	7	38.9%	2	66.7%	8	57.1%	12	52.2%	2	28.6%	31	47.7%
Grand total	18	100.0%	3	100.0%	14	100.0%	23	100.0%	7	100.0%	65	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.



Regarding the ability to make referrals to specialists and ancillary services, among the 70 responders, the statewide favorability proportion was 50.0%, with MCO proportions ranging from 39.1% (LHCC) to 71.4% (UHC; Q15g, **Table 117**).

**Table 117: Q15g, Ability to Make Referrals to Specialists and Ancillary Services**

Q15g	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	12	60.0%	2	50.0%	7	43.8%	9	39.1%	5	71.4%	35	50.0%
Neutral/Not favorable	8	40.0%	2	50.0%	9	56.3%	14	60.9%	2	28.6%	35	50.0%
Grand total <sup>1</sup>	20	100.0%	4	100.0%	16	100.0%	23	100.0%	7	100.0%	70	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

<sup>1</sup> Percentages may not add up to 100.0% due to rounding.

Regarding the ability to prescribe medications that provide for the best possible care, among the 73 responders, the statewide favorability proportion was 50.7%, with MCO proportions ranging from 43.8% (HB) to 85.7% (UHC; Q15h, **Table 118**).

**Table 118: Q15h, Ability to Prescribe Medications that Provide for the Best Possible Care**

Q15h	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	11	52.4%	2	50.0%	7	43.8%	11	44.0%	6	85.7%	37	50.7%
Neutral/Not favorable	10	47.6%	2	50.0%	9	56.3%	14	56.0%	1	14.3%	36	49.3%
Grand total <sup>1</sup>	21	100.0%	4	100.0%	16	100.0%	25	100.0%	7	100.0%	73	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

<sup>1</sup> Percentages may not add up to 100.0% due to rounding.

## No-Show Appointments

Each responder was asked whether they have an issue with members not showing up to their appointments, as well as reminder methods used. Among the 78 responders statewide, almost three-fourths (74.4%) answered in the affirmative, with MCO proportions ranging from 40.0% (Aetna) to 92.3% (LHCC; Q16, **Table 119**). Phone calls were the most cited reminder method (62.1%), followed by text messages (16.5%; Q18, **Table 119**).

**Table 119: Q16, Members not Showing up to their Appointments, and Q18, Reminder Methods Used**

Q16	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Yes	17	77.3%	2	40.0%	10	62.5%	24	92.3%	5	55.6%	58	74.4%
No	5	22.7%	3	60.0%	6	37.5%	2	7.7%	4	44.4%	20	25.6%
Total	22	100.0%	5	100.0%	16	100.0%	26	100.0%	9	100.0%	78	100.0%
Q18	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Phone call	17	58.6%	4	66.7%	14	53.8%	20	76.9%	9	56.3%	54	62.1%
Text	5	17.2%	1	16.7%	6	23.1%	1	3.8%	4	25.0%	17	16.5%
Email	2	6.9%	0	0.0%	4	15.4%	1	3.8%	3	18.8%	10	9.7%
U.S. mail	3	10.3%	0	0.0%	1	3.8%	2	7.7%	0	0.0%	6	5.8%
Other	2	6.9%	1	16.7%	1	3.8%	2	7.7%	0	0.0%	6	5.8%
All methods	29	100.0%	6	100.0%	26	100.0%	16	100.0%	16	100.0%	103	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.



## Customer Service/Provider Relations

Each responder was asked whether they have a PR representative and those who responded affirmatively were asked to rate their experience with the PR representative's ability to answer questions and resolve problems, responsiveness, and courtesy, accessibility, and helpfulness.

Regarding the PR representative's ability to answer questions and resolve problems, among the 43 responders, the statewide favorability proportion was 74.4%, with MCO proportions ranging from 50.0% (Aetna, HB) to 100% (UHC; Q20a, **Table 120**).

**Table 120: Q20a, Provider Relations Representative's Ability to Answer Questions and Resolve Problems**

Q20a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	7	77.8%	1	50.0%	5	50.0%	14	82.4%	5	100.0%	32	74.4%
Neutral/Not favorable	2	22.2%	1	50.0%	5	50.0%	3	17.6%		0.0%	11	25.6%
Grand total	9	100.0%	2	100.0%	10	100.0%	17	100.0%	5	100.0%	43	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the PR representative's responsiveness and courtesy, among the 44 responders, the statewide favorability proportion was 75.0%, with MCO proportions ranging from 50.0% (Aetna) to 83.3% (LHCC; Q20b, **Table 121**).

**Table 121: Q20b, Provider Relations Representative's Responsiveness and Courtesy**

Q20b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	7	77.8%	1	50.0%	6	60.0%	15	83.3%	4	80.0%	33	75.0%
Neutral/Not favorable	2	22.2%	1	50.0%	4	40.0%	3	16.7%	1	20.0%	11	25.0%
Grand total	9	100.0%	2	100.0%	10	100.0%	18	100.0%	5	100.0%	44	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding access to the PR staff, among the 43 responders, the statewide favorability proportion was 81.4%, with MCO proportions ranging from 50.0% (Aetna) to 100% (UHC; Q20c, **Table 122**).

**Table 122: Q20c, Access to Provider Relations Staff**

Q20c	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	7	77.8%	1	50.0%	8	80.0%	15	83.3%	4	100.0%	35	81.4%
Neutral/Not favorable	2	22.2%	1	50.0%	2	20.0%	3	16.7%		0.0%	8	18.6%
Grand total	9	100.0%	2	100.0%	10	100.0%	18	100.0%	4	100.0%	43	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the PR representative's helpfulness, among the 44 responders, the statewide favorability proportion was 77.3%, with MCO proportions ranging from 33.3% (Aetna) to 100% (UHC; Q20d, **Table 123**).

**Table 123: Q20d, Helpfulness of Provider Relations Staff**

Q20d	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	6	75.0%	1	33.3%	7	70.0%	16	84.2%	4	100.0%	34	77.3%
Neutral/Not favorable	2	25.0%	2	66.7%	3	30.0%	3	15.8%		0.0%	10	22.7%
Grand total	8	100.0%	3	100.0%	10	100.0%	19	100.0%	4	100.0%	44	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

## Utilization Management

Each responder was asked to rate their experience with UM. Specific questions addressed the process and timeliness of obtaining pre-certifications/referral/authorization information; the extent to which UM staff share review criteria and reasons for adverse determinations; peer-to-peer review process; and the plan UM process overall.

Regarding the process of obtaining pre-certification/referral/authorization information, among the 76 responders, the statewide favorability proportion was 71.1%, with MCO proportions ranging from 60.0% (ACLA and Aetna) to 80.0% (LHCC; Q21a, **Table 124**).

**Table 124: Q21a, Obtaining Pre-Certification/Referral/Authorization Information**

Q21a	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	12	60.0%	3	60.0%	13	76.5%	20	80.0%	6	66.7%	54	71.1%
Neutral/Not favorable	8	40.0%	2	40.0%	4	23.5%	5	20.0%	3	33.3%	22	28.9%
Grand total	20	100.0%	5	100.0%	17	100.0%	25	100.0%	9	100.0%	76	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding timeliness of obtaining pre-certification/referral/authorization information, among the 76 responders, the statewide favorability proportion was 73.7%, with MCO proportions ranging from 60.0% (Aetna) to 77.8% (UHC; Q21b, **Table 125**).

**Table 125: Q21b, Timeliness of Obtaining Pre-Certification/Referral/Authorization Information**

Q21b	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	14	70.0%	3	60.0%	13	76.5%	19	76.0%	7	77.8%	56	73.7%
Neutral/Not favorable	6	30.0%	2	40.0%	4	23.5%	6	24.0%	2	22.2%	20	26.3%
Grand total	20	100.0%	5	100.0%	17	100.0%	25	100.0%	9	100.0%	76	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the extent to which UM staff share review criteria and reasons for adverse determinations, among the 74 responders, the statewide favorability proportion was 56.8%, with MCO proportions ranging from 41.7% (LHCC) to 77.8% (UHC; Q21c, **Table 126**).

**Table 126: Q21c, UM Staff Share Review Criteria and Reasons for Adverse Determinations**

Q21c	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	13	68.4%	3	60.0%	9	52.9%	10	41.7%	7	77.8%	42	56.8%
Neutral/Not favorable	6	31.6%	2	40.0%	8	47.1%	14	58.3%	2	22.2%	32	43.2%
Grand total	19	100.0%	5	100.0%	17	100.0%	24	100.0%	9	100.0%	74	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the peer-to-peer review process, among the 75 responders, the statewide favorability proportion was 58.7%, with MCO proportions ranging from 50.0% (HB) to 70.0% (ACLA; Q21d, **Table 127**).

**Table 127: Q21d, Peer-to-Peer Process**

Q21d	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	14	70.0%	3	60.0%	8	50.0%	13	52.0%	6	66.7%	44	58.7%
Neutral/Not favorable	6	30.0%	2	40.0%	8	50.0%	12	48.0%	3	33.3%	31	41.3%
Grand total	20	100.0%	5	100.0%	16	100.0%	25	100.0%	9	100.0%	75	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Regarding the UM process overall, among the 75 responders, the statewide favorability proportion was 73.3%, with MCO proportions ranging from 60.0% (Aetna) to 84.0% (LHCC; Q21e, **Table 128**).

**Table 128: Q21e, Overall Plan Utilization Management Process**

Q21e	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	13	68.4%	3	60.0%	11	64.7%	21	84.0%	7	77.8%	55	73.3%
Neutral/Not favorable	6	31.6%	2	40.0%	6	35.3%	4	16.0%	2	22.2%	20	26.7%
Grand total	19	100.0%	5	100.0%	17	100.0%	25	100.0%	9	100.0%	75	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

## Call Center

Each responder was asked to rate their overall satisfaction with the Health Plan Call Center. Among the 75 responders, the statewide favorability proportion was 65.3%, with a statistically significant difference in proportions across MCOs. MCO favorability proportions ranged from 28.6% (HB) to 80.8% (LHCC; Q22, **Table 129**).

**Table 129: Q22, Rate Your Overall Satisfaction with Plan Call Center Services**

Q22	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	14	70.0%	3	60.0%	4	28.6%	21	80.8%	7	70.0%	49	65.3%
Neutral/Not favorable	6	30.0%	2	40.0%	10	71.4%	5	19.2%	3	30.0%	26	34.7%
Grand total	20	100.0%	5	100.0%	14	100.0%	26	100.0%	10	100.0%	75	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

## Overall Satisfaction

Each responder was asked to rate their overall satisfaction with the health plan. Among the 69 responders, the statewide favorability proportion was 42.0%, with MCO proportions ranging from 25.0% (UHC) to 60.0% (Aetna; Q23, **Table 130**).

**Table 130: Q23, Rate Your Overall Satisfaction with the Plan**

Q23	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	8	42.1%	3	60.0%	5	35.7%	11	47.8%	2	25.0%	29	42.0%
Neutral/Not favorable	11	57.9%	2	40.0%	9	64.3%	12	52.2%	6	75.0%	40	58.0%
Grand total	19	100.0%	5	100.0%	14	100.0%	23	100.0%	8	100.0%	69	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

Each responder was asked whether they would recommend the plan to others. Among the 69 responders, the statewide favorability rating was 69.6 %, with MCO proportions ranging from 35.7% (HB) to 83.3 % (LHCC; Q25, **Table 131**).

**Table 131: Q25, Would You Recommend this Plan to Others?**

Q25	ACLA		Aetna		HB		LHCC		UHC		Statewide	
	n	%	n	%	n	%	n	%	n	%	n	%
Favorable	14	73.7%	4	80.0%	5	35.7%	20	83.3%	5	71.4%	48	69.6%
Neutral/Not favorable	5	26.3%	1	20.0%	9	64.3%	4	16.7%	2	28.6%	21	30.4%
Grand total	19	100.0%	5	100.0%	14	100.0%	24	100.0%	7	100.0%	69	100.0%

Q: question; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community; n: number.

### Overall Satisfaction: Comparison of 2019/2020 to 2018 Survey Results

The 2019/2020 BH facility survey sample's statewide favorability proportion for overall satisfaction with the health plan was 76.1%, representing a 1.8 percentage point increase from the 2018 BH facility survey sample (**Table 132**). LHCC showed the largest percentage point increase for BH facility overall satisfaction (15.4 percentage points; 85.7%), followed by Healthy Blue (3.3 percentage point increase; 70.0%) and UHC (1.1 percentage point increase; 85.7%), whereas Aetna and ACLA showed 8.8 and 3.7 percentage point declines, respectively (**Table 132**). The statewide favorability proportion for the 2019 individual provider sample (BH individual providers, PCPs and physical health specialist physicians) was 65.5%, representing a 5.1 percentage point increase over the 2018 individual provider sample. LHCC showed the largest percentage point increase for individual provider overall satisfaction (20.2 percentage point increase; 80.6%), followed by UHC (15.8 percentage point increase; 72.7%), whereas Healthy Blue, Aetna and ACLA showed declines of 7.0, 6.4 and 4.5 percentage points, respectively (**Table 132**).

**Table 132: Overall Satisfaction by MCO and Provider Type**

Survey Item	ACLA	Aetna	Healthy Blue	LHC	UHC	Statewide
Please rate overall satisfaction with plan	Total # responders to survey item (% with favorable response)	Total # responders to survey item (% with favorable response)	Total # responders to survey item (% with favorable response)	Total # responders to survey item (% with favorable response)	Total # responders to survey item (% with favorable response)	Total # responders to survey item (% with favorable response)
2018 BH facility survey sample	21 (71.4%)	15 (86.6%)	21 (66.7%)	27 (70.3%)	13 (84.6%)	97 (74.3%)
2019/20 BH facility survey sample	21 (67.7%)	14 (77.8%)	7 (70.0%)	18 (85.7%)	7 (85.7%)	67 (76.1%)
Percentage point change	-3.7	-8.8	3.3	15.4	1.1	1.8
2018 individual provider sample (BH Individual Providers, PCPs and Specialist Physicians)	135 (66.0%)	85 (56.4%)	124 (60.5%)	106 (60.4%)	116 (56.9%)	566 (60.4%)
2019/20 individual provider sample (BH Individual Providers, PCPs and Specialist Physicians)	24 (61.5%)	7 (50.0%)	15 (53.5%)	29 (80.6%)	16 (72.7%)	91 (65.5%)
Percentage point change	-4.5	-6.4	-7.0	20.2	15.8	5.1

MCO: managed care organization; BH: behavioral health; ACLA: AmeriHealth Caritas; HB: Healthy Blue; LHCC: Louisiana Healthcare Connections; UHC: UnitedHealthcare Community.

From 2018 to 2019/2020, among BH individual providers, overall health plan satisfaction increased from 57.7% to 75.9% (+18.2 percentage points), whereas physical health individual providers showed a 19.9 percentage point decrease from 61.9% to 42.0% (**Table 133**).

**Table 133: Overall Satisfaction by Individual Behavioral Health Providers Compared to Physical Health Providers**

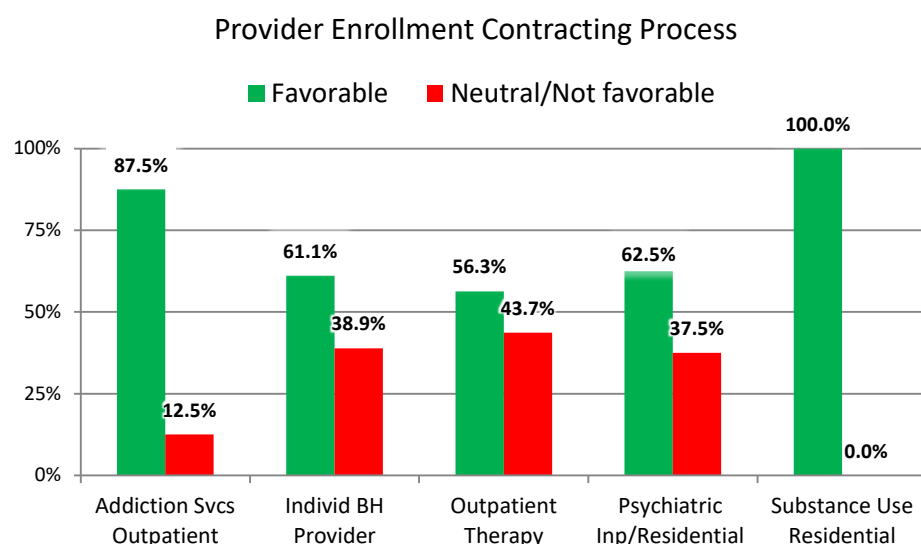
Survey Item	Physical Health Individual Providers (PCPs and Physical Health Specialist Physicians)	Behavioral Health Individual Providers (Does Not Include Behavioral Health Facilities)
Please rate overall satisfaction with plan.	% of responders with favorable response	% of responders with favorable response
2018 Individual Provider Sample	61.9%	57.7%
2019/2020 Individual Provider Sample	42.0%	75.9%
Percentage point change	-19.9%	18.2%

## BH Survey Findings by Provider/Service Type

The following figures present BH Survey findings by provider/service type. Green bars indicate the percentage of favorable responses and red bars indicate the percentage of neutral and not favorable responses. The number of responders by provider/service type for each survey item is indicated below each chart. Facility service types were grouped as follows: “Addiction Svcs Outpatient” includes addiction services outpatient; “Outpatient Therapy” includes outpatient therapy; “Psychiatric Inp/Residential” includes Psychiatric inpatient facilities and psychiatric residential treatment facilities; “Substance Use Residential” includes substance use residential facilities.

### Provider Enrollment

Each responder was asked to rate satisfaction with the provider enrollment contracting process. All three of the substance use residential facilities responded favorably, and 87.5% of the 8 addiction services outpatient facilities also responded favorably (**Figure 1**). Outpatient therapy services showed the lowest favorability proportion (56.3%; n = 71). Favorability proportions were similar for individual BH providers (61.1%; n = 54) and for psychiatric inpatient and residential treatment facilities (62.5%; n = 8).

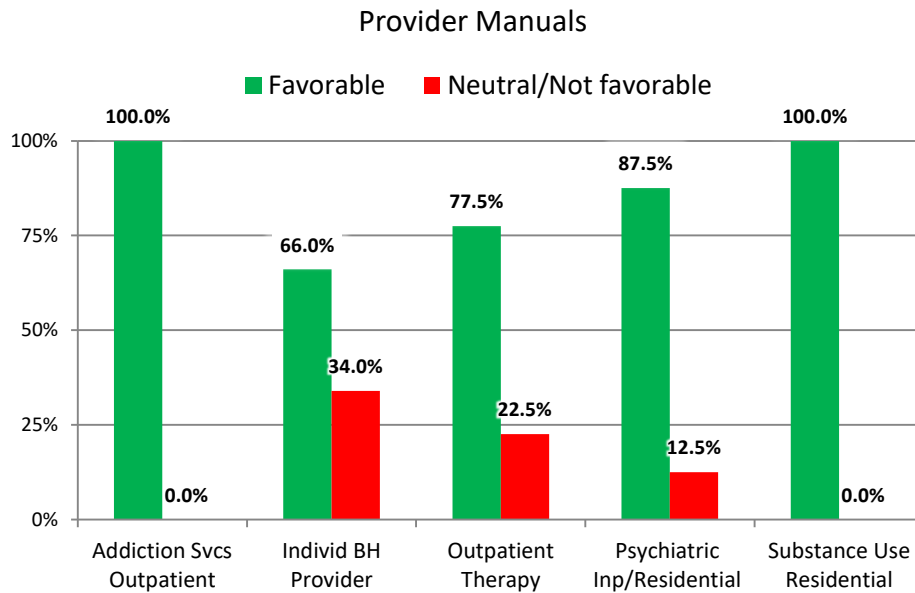


**Figure 1: Q8, Satisfaction with Provider Enrollment Contracting Process.** Responses to Q8, “Please rate your satisfaction with the provider enrollment contracting process,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Individ BH Provider: n = 54; Outpatient Therapy: n = 71; Psychiatric Inp/Residential: n = 8; Substance Use Residential: n = 3.

### Provider Resources

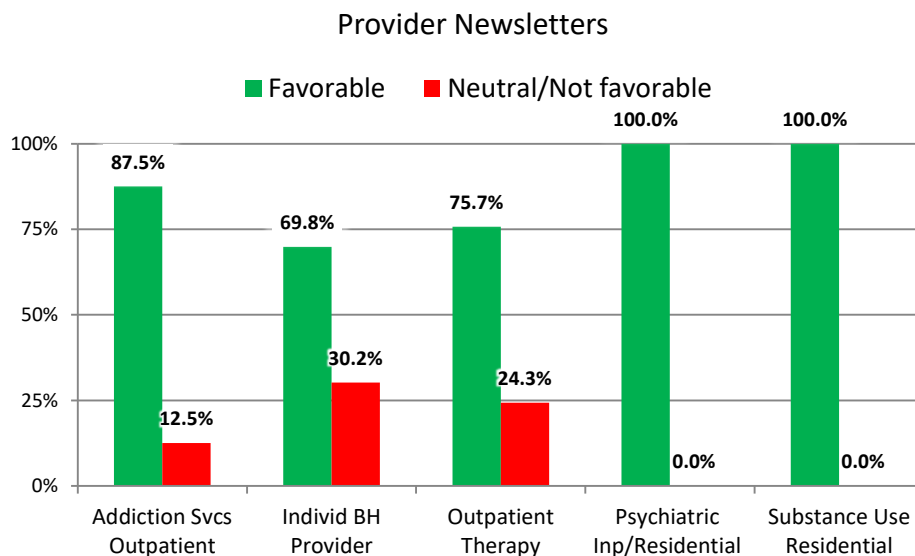
Each responder was asked to rate the quality and effectiveness of each of the following MCO materials: provider manuals, provider newsletters, general provider communications, and the provider directory.

For provider manuals, both of the substance use residential use facilities responded favorably, as did all nine of the addiction services outpatient facilities (**Figure 2**). Individual BH providers showed the lowest favorability proportion (66.0%; n = 53).



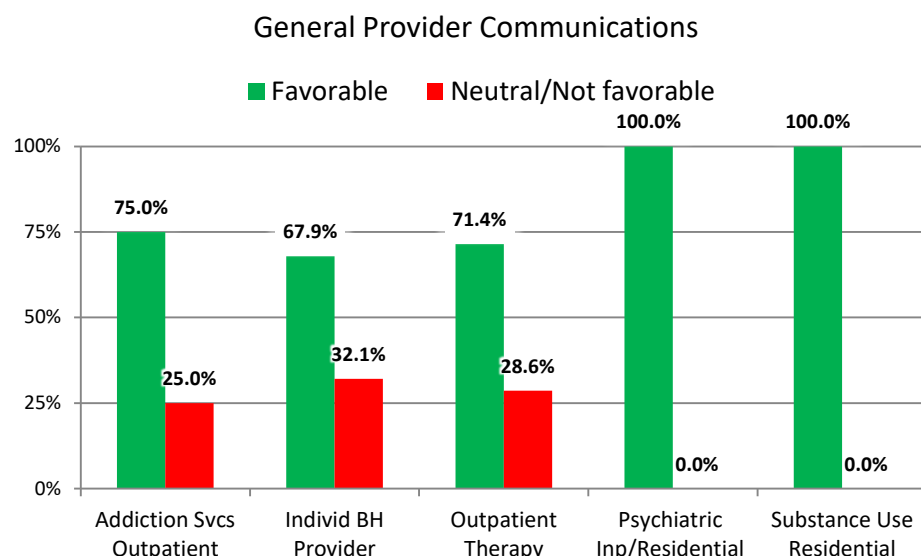
**Figure 2: Q9a, Satisfaction with Provider Manuals.** Responses to Q9a, “Please rate the quality and effectiveness of the following: Provider Manuals,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 53; Outpatient Therapy: n = 71; Psychiatric Inp/Residential: n = 8; Substance Use Residential: n = 2.

For provider newsletters, the favorability proportions were 100% for the psychiatric inpatient and psychiatric residential treatment facilities (n = 8) and for both substance use residential facilities (**Figure 3**). Individual BH providers showed the lowest favorability proportion (69.8%; n = 53).



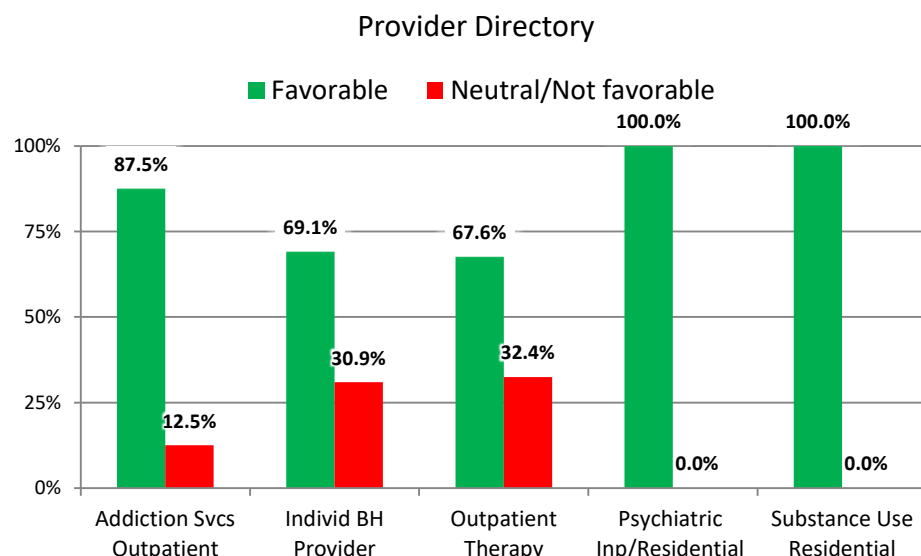
**Figure 3: Q9b, Satisfaction with Provider Newsletters.** Responses to Q9b, “Please rate the quality and effectiveness of the following: Provider Newsletters,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Individ BH Provider: n = 53; Outpatient Therapy: n = 70; Psychiatric Inp/Residential: n = 8; Substance Use Residential: n = 2.

For general provider communications, the favorability proportions were 100% for the psychiatric inpatient and psychiatric residential treatment facilities (n = 8) and for both substance use residential facilities (**Figure 4**). Individual BH providers showed the lowest favorability proportion (67.9%; n = 53).



**Figure 4: Q9c, Satisfaction with General Provider Communications.** Responses to Q9c, “Please rate the quality and effectiveness of the following: General Provider Communications,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Individ BH Provider: n = 53; Outpatient Therapy: n = 70; Psychiatric Inp/Residential: n = 8; Substance Use Residential: n = 2.

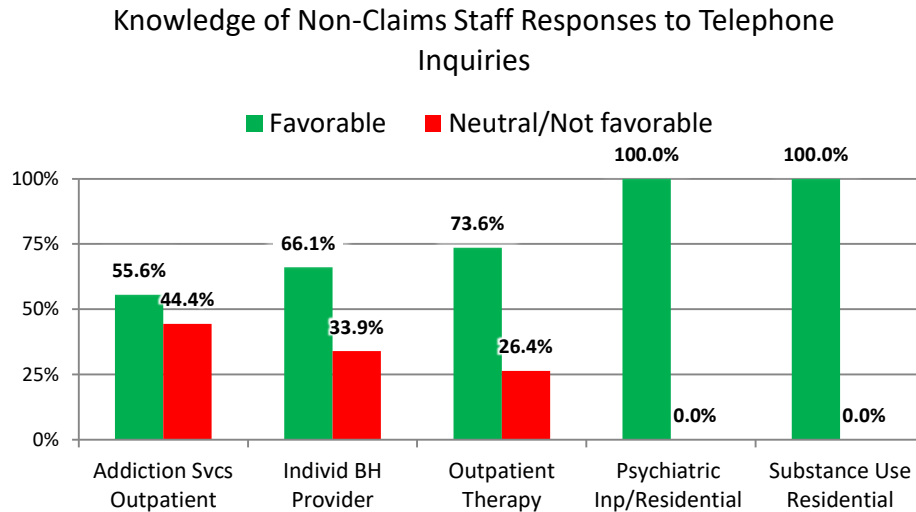
For the provider directory, all eight of the psychiatric inpatient and psychiatric residential treatment facilities and three of the substance use residential facilities responded favorably, whereas the lowest favorability proportions were observed among the individual BH providers (69.1%; n = 55) and outpatient therapy services (67.6%; n = 74; **Figure 5**).



**Figure 5: Q9d, Satisfaction with Provider Directory** Responses to Q9d, “Please rate the quality and effectiveness of the following: Provider Directory,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Individ BH Provider: n = 55; Outpatient Therapy: n = 74; Psychiatric Inp/Residential: n = 8; Substance Use Residential: n = 3.

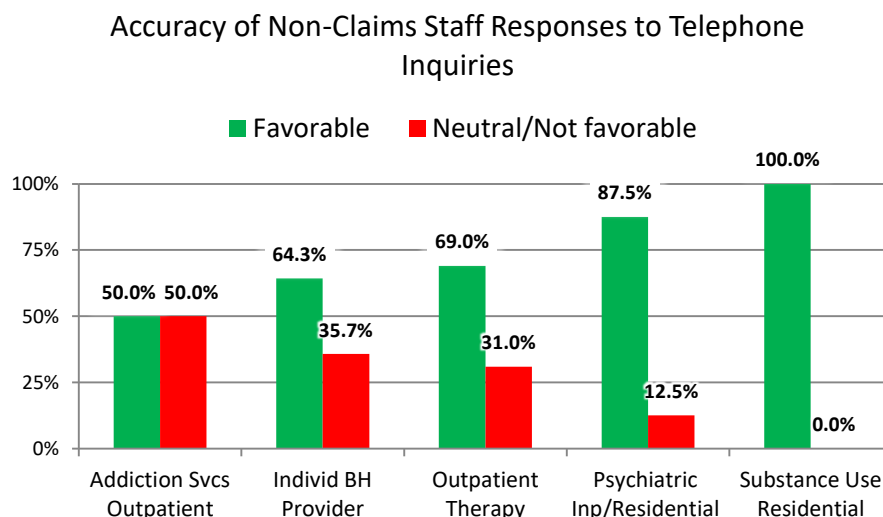


Based on interactions with non-Claims staff, each responder was asked to rate their practice's experience with responses to their telephone inquiries with regard to staff knowledge, accuracy, and helpfulness. Regarding non-Claims staff knowledge, all seven of the Psychiatric inpatient and psychiatric residential treatment facilities and both substance use residential facilities responded favorably, whereas the lowest favorability proportions were observed among the individual BH providers (66.1%; n = 56) and addiction services outpatient facilities (55.6%; n = 56) and addiction services outpatient facilities (55.6%; n = 9; **Figure 6**).



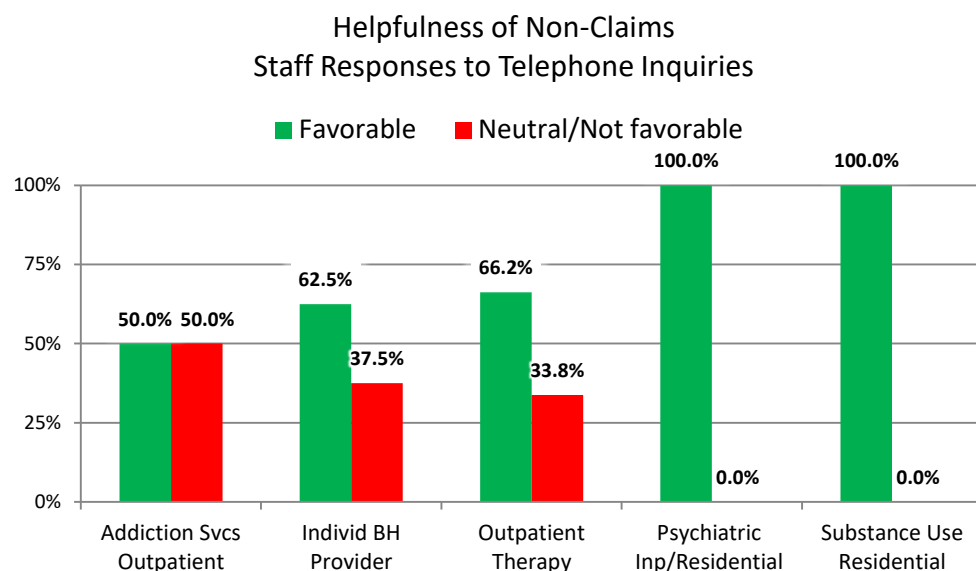
**Figure 6: Q10a, Knowledge of Non-Claims Staff Responses to Telephone Inquiries.** Responses to Q10a, “Based on your practice's interaction with plan non-Claims staff, please rate your experience with the following: Knowledge of Non-Claims Staff Responses to Telephone Inquiries,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 56; Outpatient Therapy: n = 72; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 2.

Regarding non-Claims staff accuracy, both substance use residential facilities responded favorably, whereas the lowest favorability proportions were observed among the individual BH providers (64.3%; n = 56) and addiction services outpatient facilities (50.0%; n = 8; **Figure 7**).



**Figure 7: Q10b, Accuracy of Non-Claims Staff Responses to Telephone Inquiries.** Responses to Q10b, “Based on your practice's interaction with plan non-Claims staff, please rate your experience with the following: Accuracy of Non-Claims Staff Responses to Telephone Inquiries,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Individ BH Provider: n = 56; Outpatient Therapy: n = 71; Psychiatric Inp/Residential: n = 8; Substance Use Residential: n = 2.

Regarding non-Claims staff helpfulness, all seven of the psychiatric inpatient and psychiatric residential treatment facilities and all three substance use residential facilities responded favorably, whereas the lowest favorability proportions were observed among the individual BH providers (62.5%; n = 56) and addiction services outpatient facilities (55.0%; n = 8; **Figure 8**).

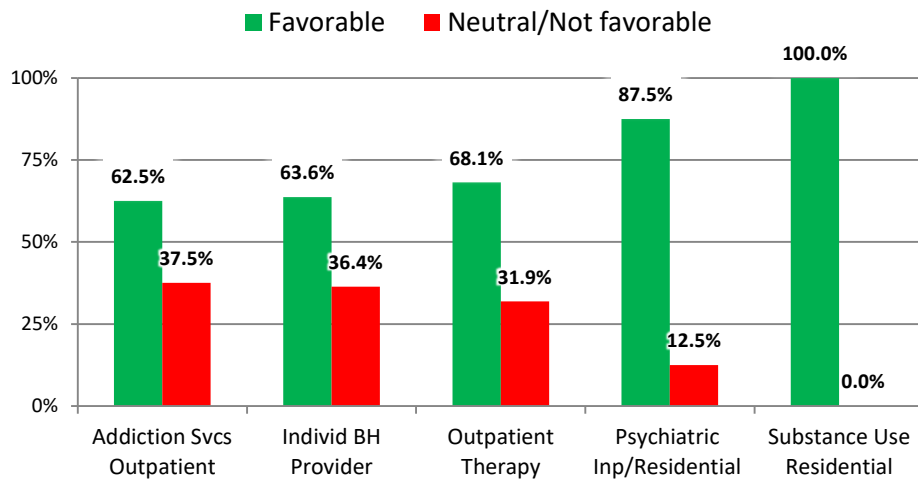


**Figure 8: Q10c, Helpfulness of Non-Claims Staff Responses to Telephone Inquiries.** Responses to Q10c, “Based on your practice's interaction with plan non-Claims staff, please rate your experience with the following: Helpfulness of Non-Claims Staff Responses to Telephone Inquiries,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Individ BH Provider: n = 56; Outpatient Therapy: n = 74; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 3.

Based on interactions with Claims staff, each responder was asked to rate their practice’s experience with responses to their telephone inquiries with regard to staff knowledge, accuracy, helpfulness, and timeliness of resolving claims payment issues.

Regarding Claims staff knowledge, both substance use residential facilities responded favorably, as did 87.5% of psychiatric inpatient and psychiatric residential treatment facilities (n = 8), whereas the lowest favorability proportions were observed among the individual BH providers (63.6%; n = 55) and addiction services outpatient facilities (62.5%; n = 8; **Figure 9**).

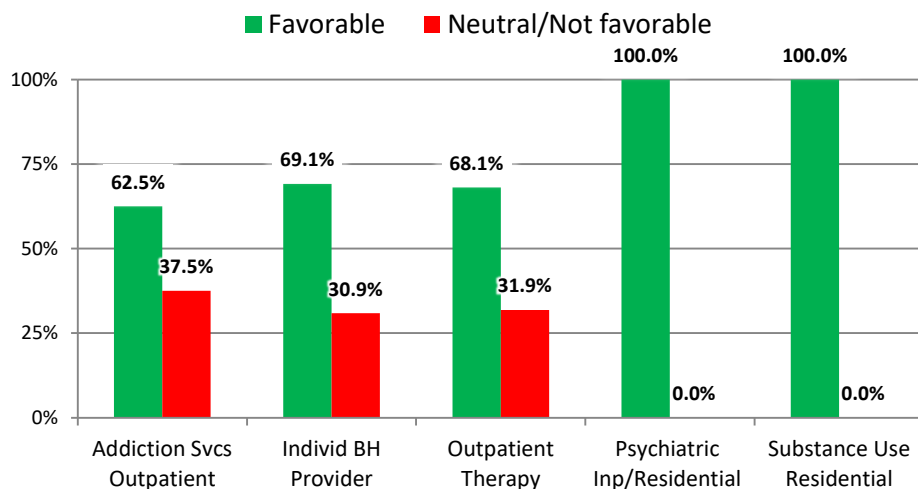
### Knowledge of Claims Staff Responses to Telephone Inquiries



**Figure 9: Q11a, Knowledge of Claims Staff Responses to Telephone Inquiries.** Responses to Q11a, “Based on your practice’s interaction with plan Claims staff, please rate your experience with the following: Knowledge of Claims Staff Responses to Telephone Inquiries,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Individ BH Provider: n = 55; Outpatient Therapy: n = 69; Psychiatric Inp/Residential: n = 8; Substance Use Residential: n = 2.

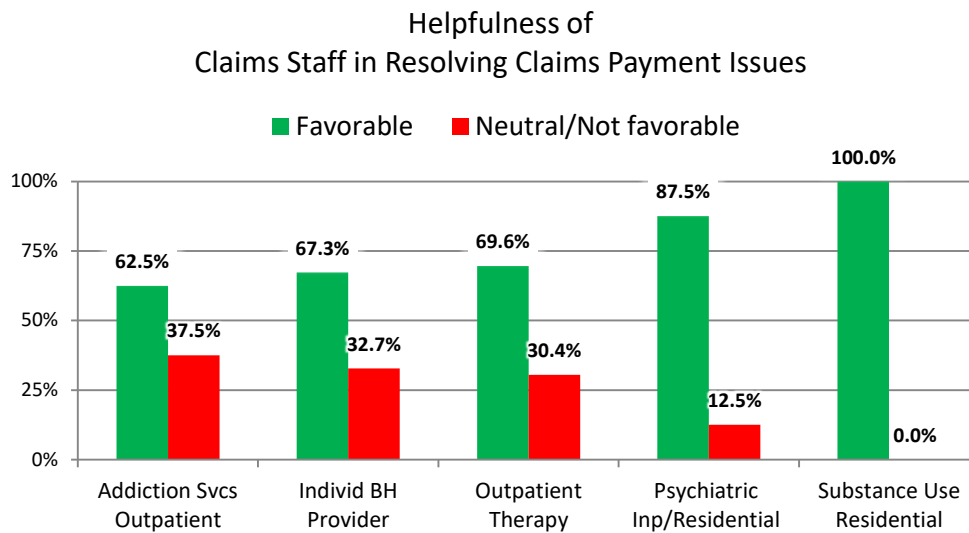
Regarding Claims staff accuracy, both substance use residential facilities responded favorably, as did 100.0% of psychiatric inpatient and psychiatric residential treatment facilities (n = 7), whereas the lowest favorability proportion was observed among the addiction services outpatient facilities (62.5%; n = 8; **Figure 10**).

### Accuracy of Claims Staff Responses to Telephone Inquiries



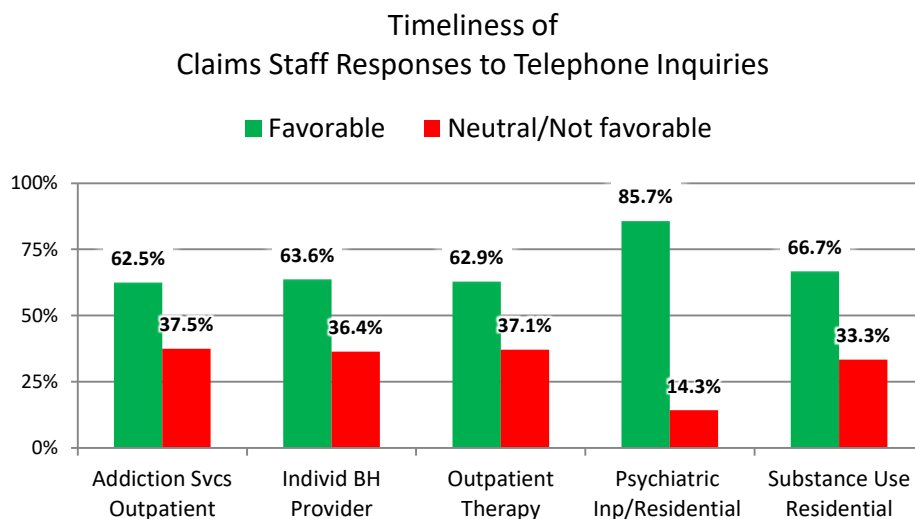
**Figure 10: Q11b, Accuracy of Claims Staff Responses to Telephone Inquiries.** Responses to Q11b, “Based on your practice’s interaction with plan Claims staff, please rate your experience with the following: Accuracy of Claims Staff Responses to Telephone Inquiries,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Individ BH Provider: n = 55; Outpatient Therapy: n = 69; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 2.

Regarding Claims staff helpfulness, both substance use residential facilities responded favorably, whereas the lowest favorability proportions were observed among individual BH providers (67.3%; n = 55) and addiction services outpatient facilities (62.5%; n = 8; **Figure 11**).



**Figure 11: Q11c, Helpfulness of Claims Staff Responses to Telephone Inquiries.** Responses to Q11c, “Based on your practice’s interaction with plan Claims staff, please rate your experience with the following: Helpfulness of Claims Staff Responses to Telephone Inquiries,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Indiv BH Provider: n = 55; Outpatient Therapy: n = 69; Psychiatric Inp/Residential: n = 8; Substance Use Residential: n = 2.

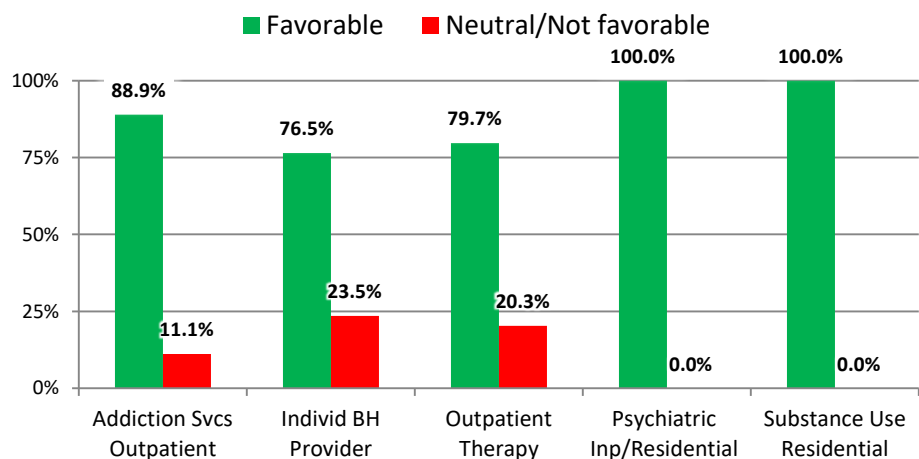
Regarding Claims staff timeliness in resolving claims payment issues, the favorability proportion was highest for psychiatric inpatient and psychiatric residential treatment facilities (85.7%; n = 7), and lowest for addiction services outpatient facilities (62.5%; n = 8), outpatient therapy services (62.9%; n = 70), and individual BH providers (63.6%; n = 55; **Figure 12**).



**Figure 12: Q11d, Timeliness of Claims Staff in Resolving Claims Payment Issues.** Responses to Q11d, “Based on your practice’s interaction with plan Claims staff, please rate your experience with the following: Timeliness of Claims Staff Responses to Telephone Inquiries,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Indiv BH Provider: n = 55; Outpatient Therapy: n = 70; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 3.

Each responder was asked to rate the plan provider portal with regard to finding member eligibility information, claims payments/invoices information, and the Member Gaps in Care Report, as well as submitting prior authorization requests and receiving determinations, accessing plan reports, and overall experience with the provider portal. Regarding finding member eligibility information, all seven of the psychiatric inpatient and psychiatric residential treatment facilities and all three substance use residential facilities responded favorably, whereas the lowest favorability proportions were observed among the individual BH providers (76.5%; n = 51) and outpatient therapy services (79.7%; n = 69; **Figure 13**).

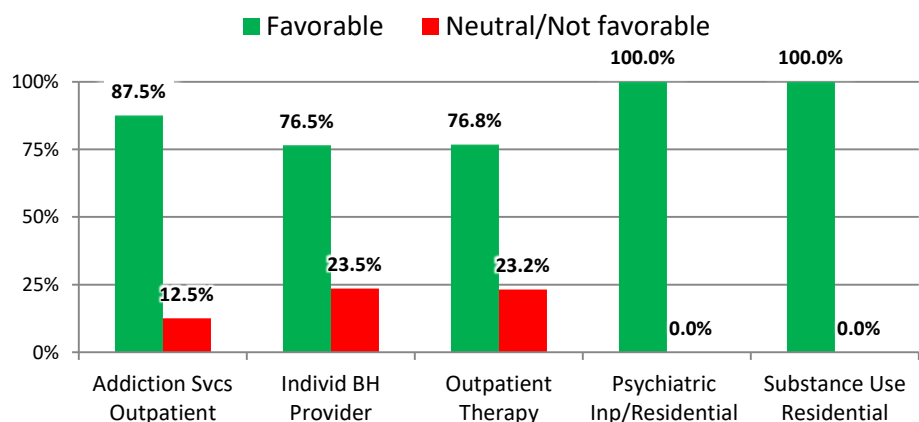
#### Provider Portal: Finding Member Eligibility Information



**Figure 13: Q12a, Provider Portal: Finding Member Eligibility Information.** Responses to Q12a, “Please rate the plan provider portal in the following service areas: Finding Member Eligibility Information,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Indiv BH Provider: n = 51; Outpatient Therapy: n = 69; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 3.

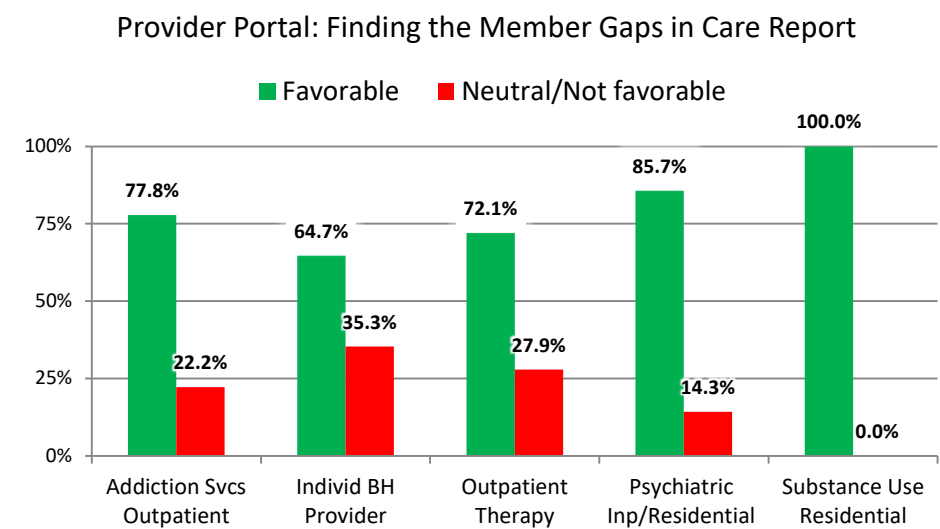
Regarding finding claim payments/ invoices, all eight of the psychiatric inpatient and psychiatric residential treatment facilities and all three substance use residential facilities responded favorably, whereas the lowest favorability proportions were observed among the individual BH providers (76.5%; n = 51) and outpatient therapy services (76.8%; n = 69; **Figure 14**).

#### Provider Portal: Finding Claim Payments/Invoices Information



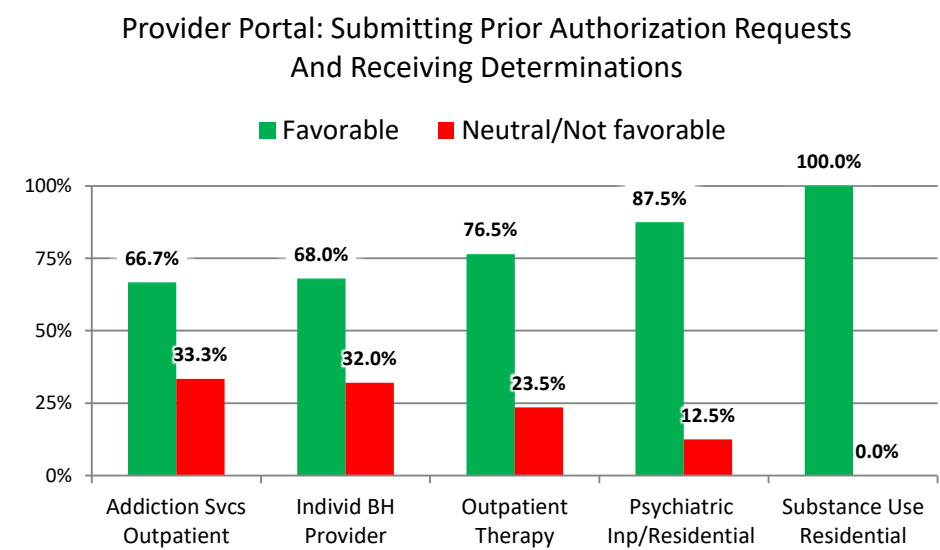
**Figure 14: Q12b, Provider Portal: Finding Claim Payments/Invoices Information.** Responses to Q12b, “Please rate the plan provider portal in the following service areas: Finding Claim Payments/Invoices Information,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Indiv BH Provider: n = 51; Outpatient Therapy: n = 69; Psychiatric Inp/Residential: n = 8; Substance Use Residential: n = 3.

Regarding finding the Member Gaps in Care Report, all three substance use residential facilities responded favorably, whereas the lowest favorability proportions were observed among the individual BH providers (64.7%; n = 51) and outpatient therapy services (72.1%; n = 68; **Figure 15**).



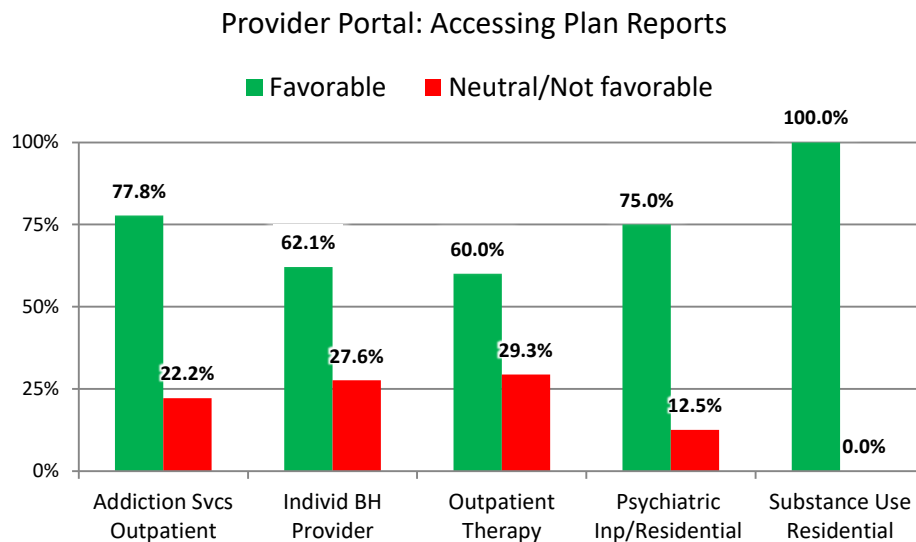
**Figure 15: Q12c, Provider Portal: Finding the Member Gaps in Care Report.** Responses to Q12c, “Please rate the plan provider portal in the following service areas: Finding the Member Gaps in Care Report,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Indiv BH Provider: n = 51; Outpatient Therapy: n = 68; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 3.

Regarding submitting prior authorization requests and receiving determinations, all three substance use residential facilities responded favorably, whereas the lowest favorability proportions were observed among the individual BH providers (68.0%; n = 50) and addiction services outpatient (66.7%; n = 9; **Figure 16**).



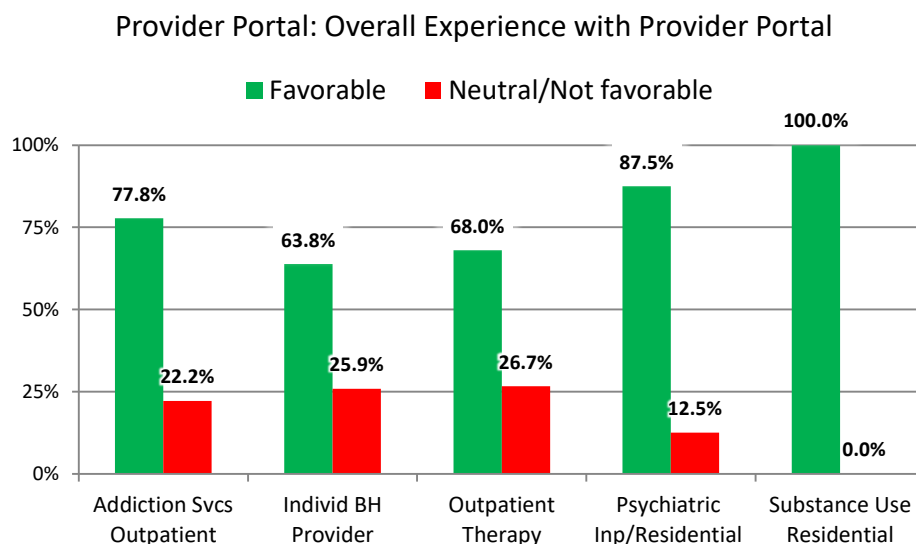
**Figure 16: Q12d, Provider Portal: Submitting Prior Authorization Requests and Receiving Determinations** Responses to Q12d, “Please rate the plan provider portal in the following service areas: Submitting Prior Authorization Requests and Receiving Determinations,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Indiv BH Provider: n = 50; Outpatient Therapy: n = 68; Psychiatric Inp/Residential: n = 8; Substance Use Residential: n = 3.

Regarding accessing plan reports, all three substance use residential facilities responded favorably, whereas the lowest favorability proportions were observed among the individual BH providers (62.1%; n = 52) and outpatient therapy facilities (60.0%; n = 67; **Figure 17**).



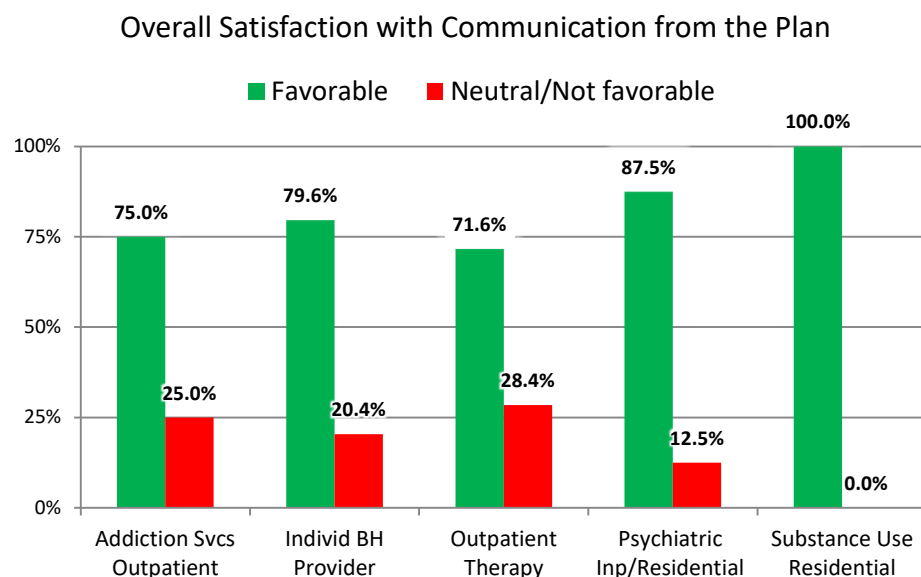
**Figure 17: Q12e, Provider Portal: Accessing Plan Reports.** Responses to Q12e, “Please rate the plan provider portal in the following service areas: Accessing Plan Reports,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 52; Outpatient Therapy: n = 67; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 3.

Regarding overall experience with the provider portal, all three substance use residential facilities responded favorably, whereas the lowest favorability proportions were observed among the individual BH providers (63.8%; n = 52) and outpatient therapy facilities (68.0%; n = 71; **Figure 18**).



**Figure 18: Q12f, Provider Portal: Overall Experience with Provider Portal** Responses to Q12f, “Please rate the plan provider portal in the following service areas: Overall Experience with Provider Portal,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 52; Outpatient Therapy: n = 71; Psychiatric Inp/Residential: n = 8; Substance Use Residential: n = 3.

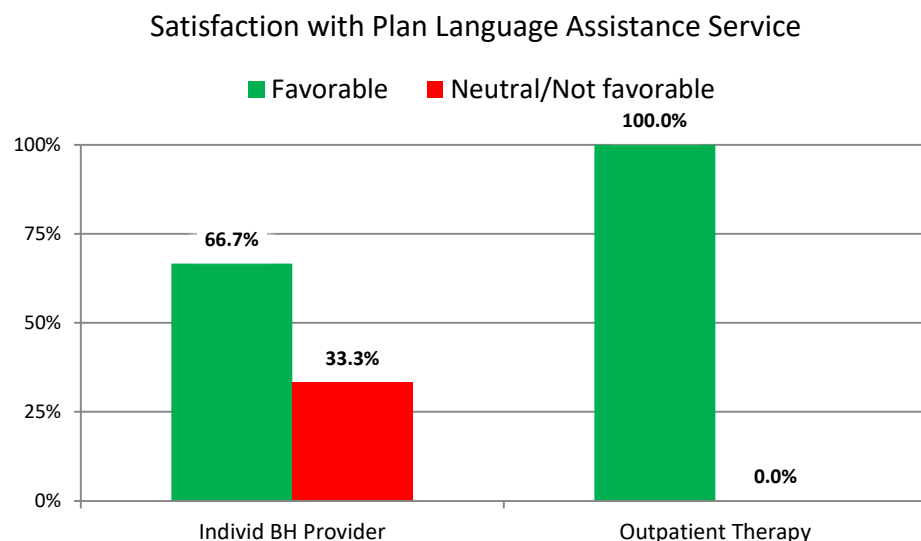
Each responder was asked to rate overall satisfaction with communication from the plan. All three substance use residential facilities responded favorably, whereas the lowest favorability proportions were observed among the outpatient therapy facilities (71.6%; n = 74) and addiction services outpatient facilities (75.0%; n = 8; **Figure 19**).



**Figure 19: Q13, Overall Satisfaction with Communication from the Plan.** Responses to Q13, “Overall, how satisfied are you with the communication you receive from the plan?” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Indiv BH Provider: n = 54; Outpatient Therapy: n = 74; Psychiatric Inp/Residential: n = 8; Substance Use Residential: n = 3.

### Access to Linguistic Assistance

The only responders to this survey item were six individual BH providers and six outpatient therapy facilities. All six of the outpatient therapy facilities responded favorably, whereas 66.7% of the individual BH providers responded favorably (**Figure 19**).

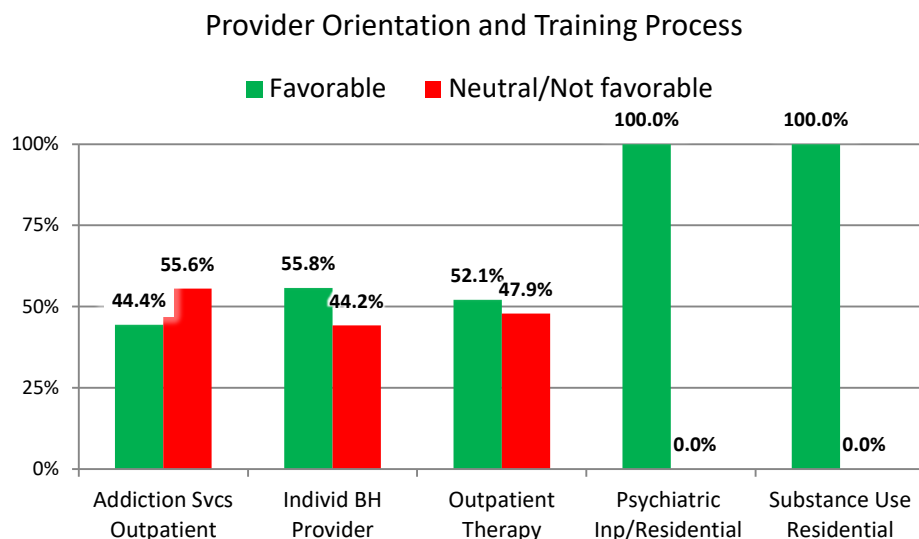


**Figure 19: Q15, Satisfaction with Plan Language Assistance Service.** Responses to Q15, “How satisfied are you with the plan language assistance Service?” shown as favorable (green) and neutral or not favorable (red). Indiv BH Provider: n = 6; Outpatient Therapy: n = 6.



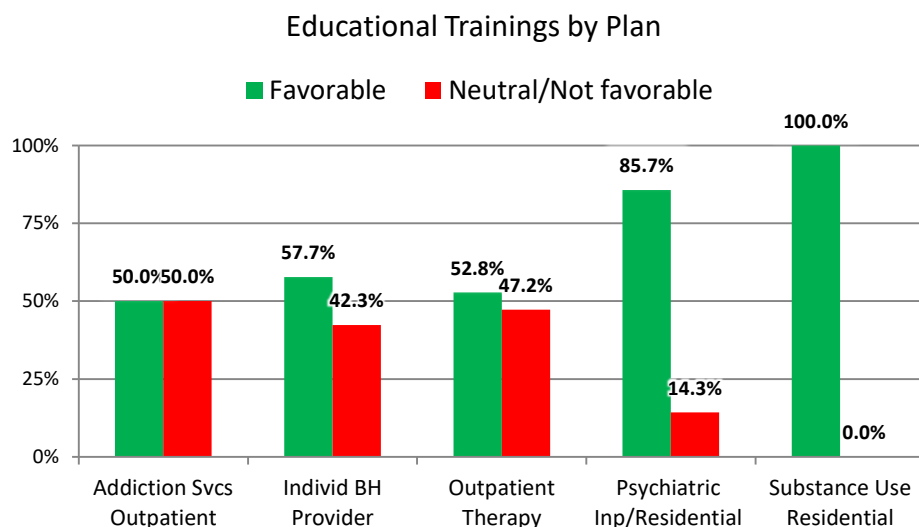
## Provider Education and Training, Including Cultural Competency Trainings

Each responder was asked to rate their satisfaction with the provider orientation and training process, educational trainings by the plan, the web-based provider portal, cultural competency training materials and sessions, accessibility of state-required BH training, and education provided by the plan on data collection and reporting to maximize HEDIS performance. Regarding the provider orientation and training process, all seven of the psychiatric inpatient and psychiatric residential facilities responded favorably, as did both of the substance use residential facilities, whereas the lowest favorability proportion was observed among the addiction services outpatient facilities (44.4%; n = 9; **Figure 20**).



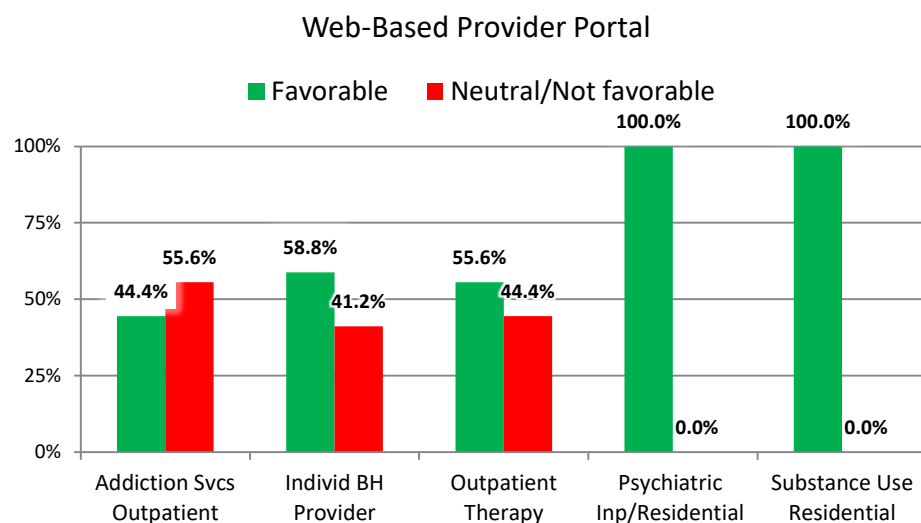
**Figure 20: Q16a, Provider Orientation and Training Process.** Responses to Q16a, “How satisfied are you with the following: Provider Orientation and Training Process?” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 52; Outpatient Therapy: n = 71; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 2.

Regarding the educational trainings by the plan, both substance use residential facilities responded favorably, whereas the lowest favorability proportions were observed among the addiction services outpatient facilities (50.0%; n = 8) and the outpatient therapy facilities (52.8%; n = 72; **Figure 21**).



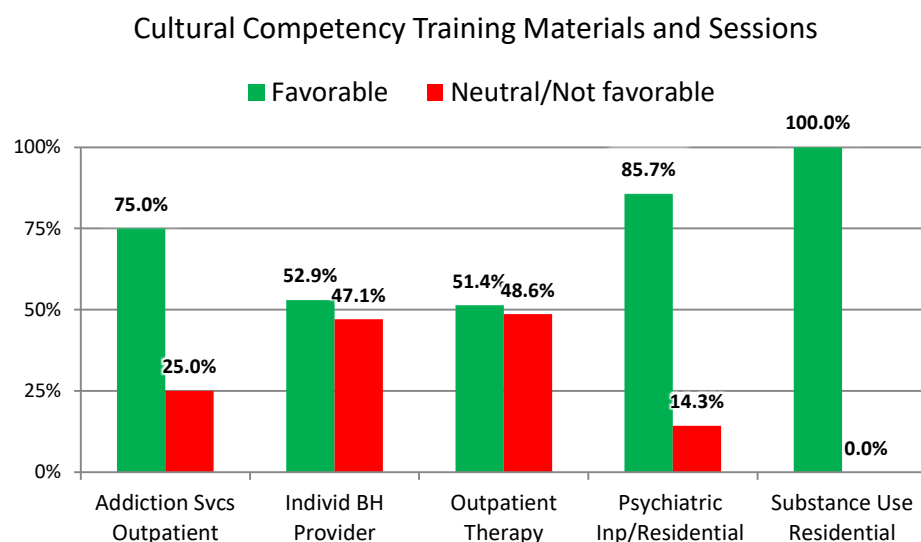
**Figure 21: Q16b, Educational Trainings by Plan.** Responses to Q16b, “How satisfied are you with the following: Educational Trainings by Plan?” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Individ BH Provider: n = 52; Outpatient Therapy: n = 72; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 2.

Regarding the web-based provider portal, all seven of the psychiatric inpatient and psychiatric residential facilities responded favorably, as did both of the substance use residential facilities, whereas the lowest favorability proportion was observed among the addiction services outpatient facilities (44.4%; n = 9; **Figure 22**).



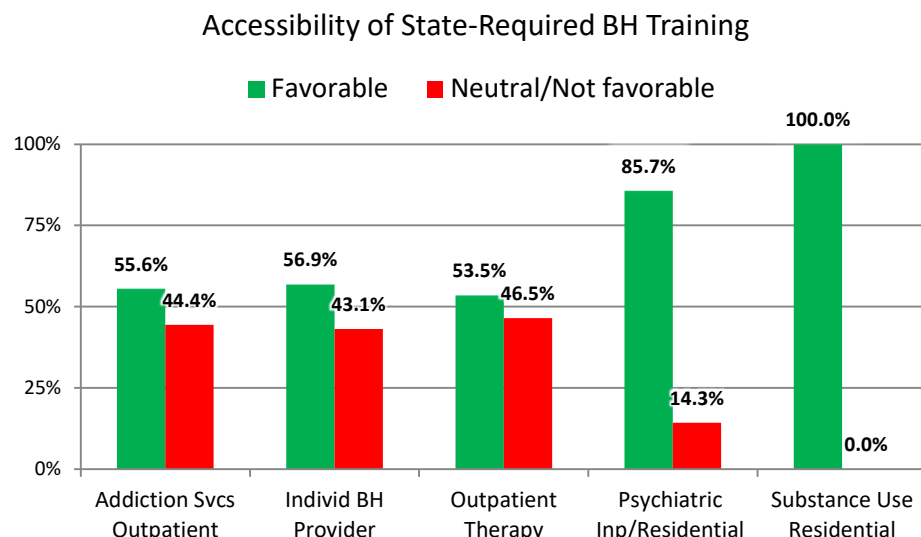
**Figure 22: Q16c, Web-Based Provider Portal.** Responses to Q16c, “How satisfied are you with the following: Web-Based Provider Portal?” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 51; Outpatient Therapy: n = 72; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 2.

Regarding the cultural competency training materials and sessions, both of the substance use residential facilities responded favorably, and 85.7% of the seven psychiatric inpatient and psychiatric residential facilities responded favorably, whereas the lowest favorability proportions were observed among the outpatient therapy facilities (51.4%; n = 72) and individual BH providers (52.9%; n = 51; **Figure 23**).



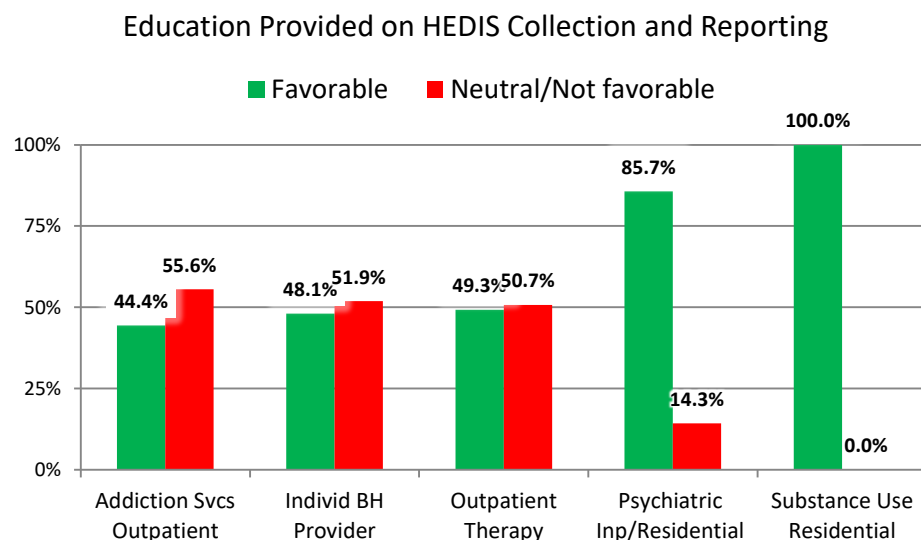
**Figure 23: Q16d, Cultural Competency Training Materials and Sessions.** Responses to Q16d, “How satisfied are you with the following: Cultural Competency Training Materials and Sessions?” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Individ BH Provider: n = 51; Outpatient Therapy: n = 72; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 2.

Regarding accessibility of state-required BH training, both of the substance use residential facilities responded favorably, and 85.7% of the seven psychiatric inpatient and psychiatric residential facilities responded favorably, whereas considerably lower favorability proportions were observed among the outpatient therapy facilities (53.5%; n = 71), addiction services outpatient facilities (55.6%; n = 9) and individual BH providers (56.9%; n = 51; **Figure 24**).



**Figure 24: Q16e, Accessibility of State-Required Behavioral Health Training.** Responses to Q16e, “How satisfied are you with the following: Accessibility of State-Required Behavioral Health Training?” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 51; Outpatient Therapy: n = 71; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 2.

Regarding education on HEDIS collection and reporting, both of the substance use residential facilities responded favorably, and 85.7% of the seven psychiatric inpatient and psychiatric residential facilities responded favorably, whereas the considerably lower favorability proportions were observed among the outpatient therapy facilities (49.3%; n = 69), addiction services outpatient facilities (44.4%; n = 9) and individual BH providers (48.1%; n = 52; **Figure 25**).

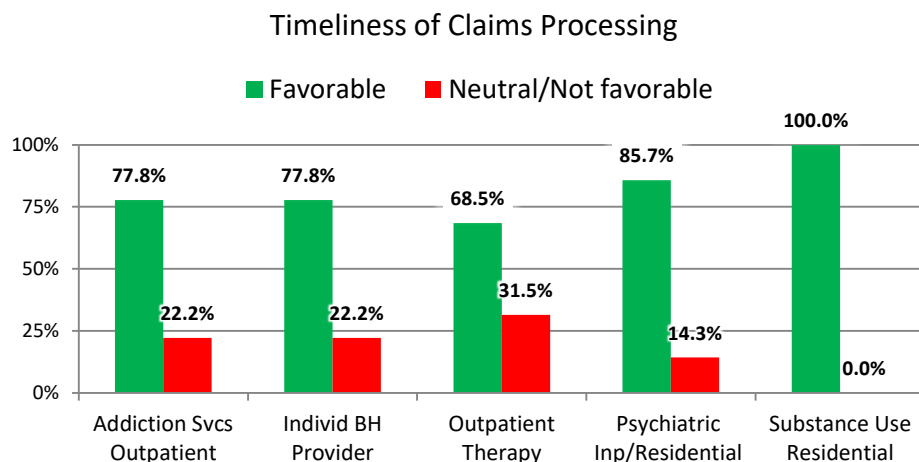


**Figure 25: Q16f, Education Provided on HEDIS Collection and Reporting.** Responses to Q16f, “How satisfied are you with the following: Education Provided to You by Plan on HEDIS Collection and Reporting?” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 52; Outpatient Therapy: n = 69; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 2.

## Claims Processing, Claims Reimbursement, Finance Issues, and Resolution of Provider Complaints

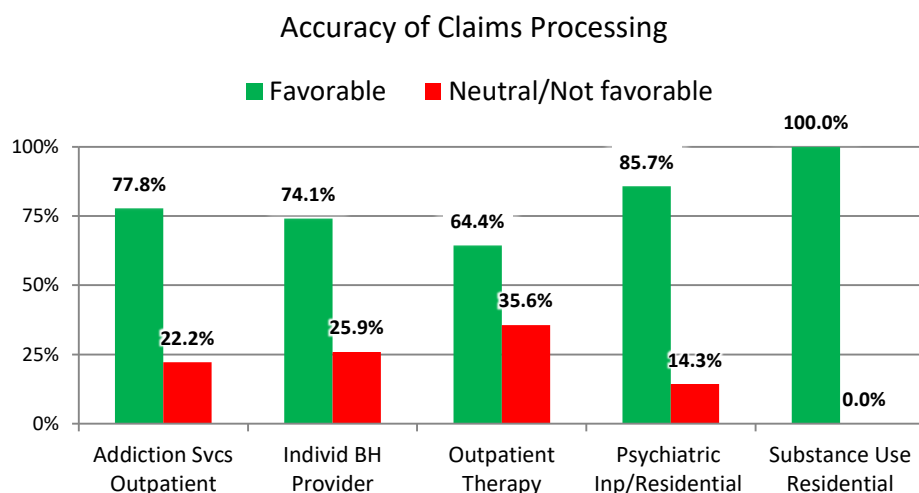
Each responder was asked to rate their experience with the plan's performance in each of the following areas: timeliness of claims processing, accuracy of claims processing, claims reimbursement fees with contract rates, timeliness of claims appeals process, resolution of claims payment problems or disputes, communication of the outcome of claims appeals, and the overall complaint and appeals process.

Regarding timeliness of claims processing, both of the substance use residential facilities responded favorably, and 85.7% of the seven psychiatric inpatient and psychiatric residential facilities responded favorably, whereas the lowest favorability proportion was observed among the outpatient therapy facilities (68.5%; n = 73; **Figure 26**).



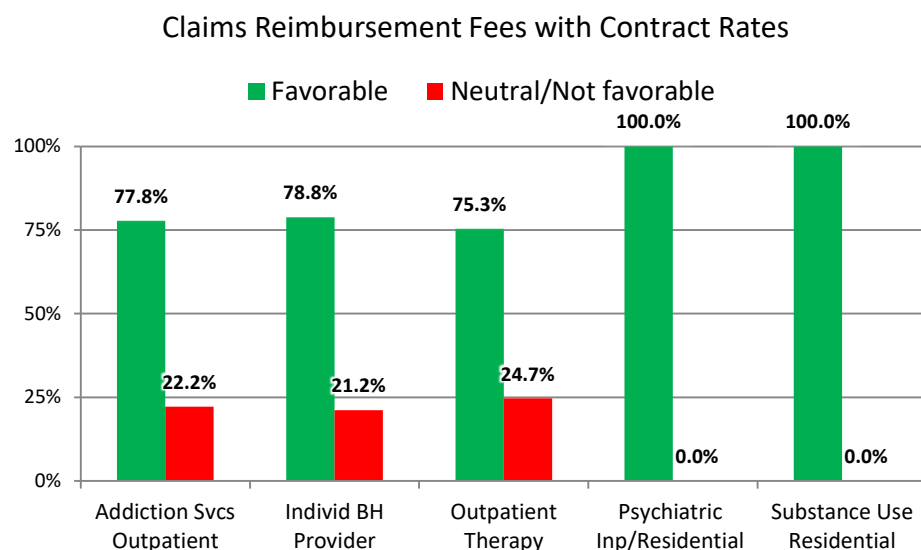
**Figure 26: Q17a, Timeliness of Claims Processing.** Responses to Q17a, "Please rate your experience with the performance of the plan in the following areas: Timeliness of Claims Processing," shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 54; Outpatient Therapy: n = 73; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 2.

Regarding accuracy of claims processing, both of the substance use residential facilities responded favorably, and 85.7% of the seven psychiatric inpatient and psychiatric residential facilities responded favorably, whereas the lowest favorability proportion was observed among the outpatient therapy facilities (64.4%; n = 73; **Figure 27**).



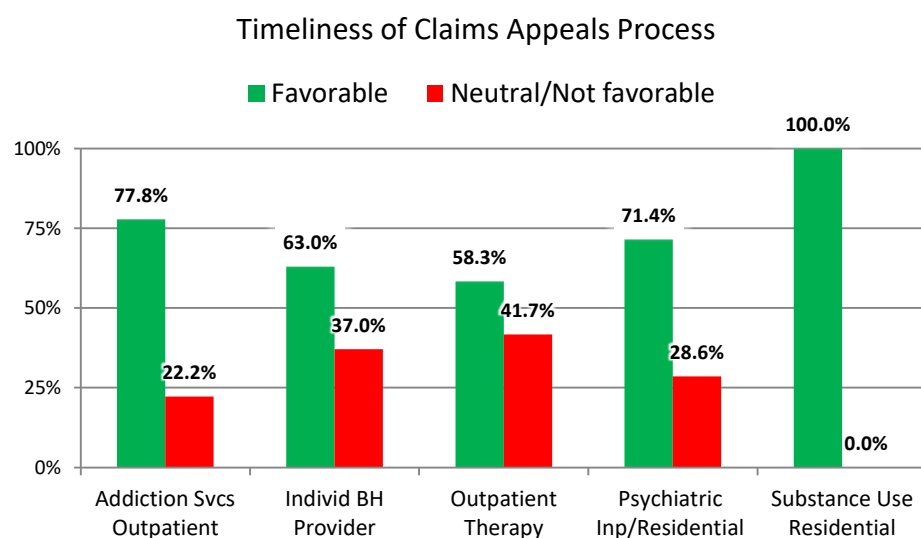
**Figure 27: Q17b, Accuracy of Claims Processing.** Responses to Q17b, "Please rate your experience with the performance of the plan in the following areas: Accuracy of Claims Processing," shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 54; Outpatient Therapy: n = 73; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 2.

Regarding claims reimbursement rates with contract rates, both of the substance use residential facilities and all seven of the psychiatric inpatient and psychiatric residential facilities responded favorably, whereas the lowest favorability proportion was observed among the outpatient therapy facilities (75.3%; n = 73; **Figure 28**).



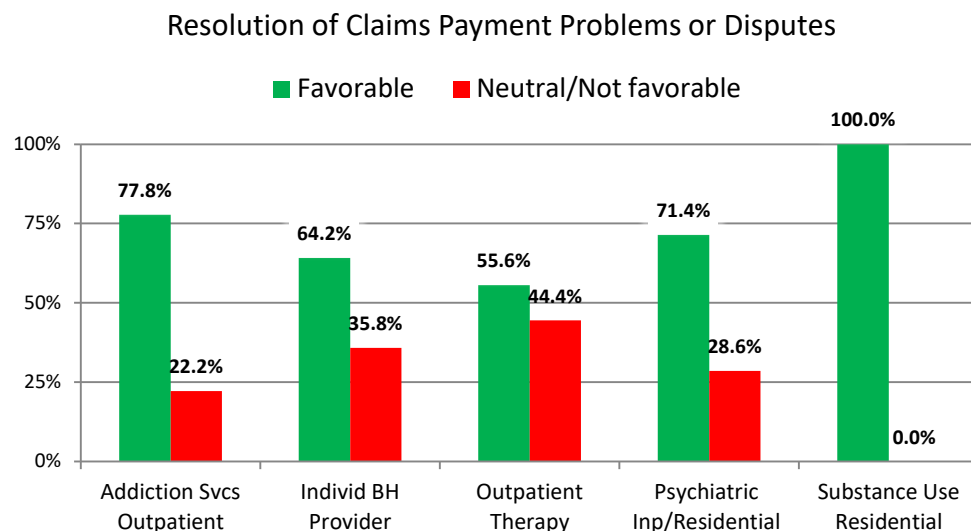
**Figure 28: Q17c, Claims Reimbursement Fees with Contract Rates.** Responses to Q17c, “Please rate your experience with the performance of the plan in the following areas: Claims Reimbursement Fees with Your Contract Rates,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 52; Outpatient Therapy: n = 73; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 2.

Regarding timeliness of the claims appeals process, both of the substance use residential facilities responded favorably, followed by the addiction services outpatient facilities (77.8%; n = 9) and the psychiatric inpatient and psychiatric residential facilities (71.4%; n = 7), whereas the lowest favorability proportions were observed among outpatient therapy facilities (58.3%; n = 72) and individual BH providers (63.0%; n = 54; **Figure 29**).



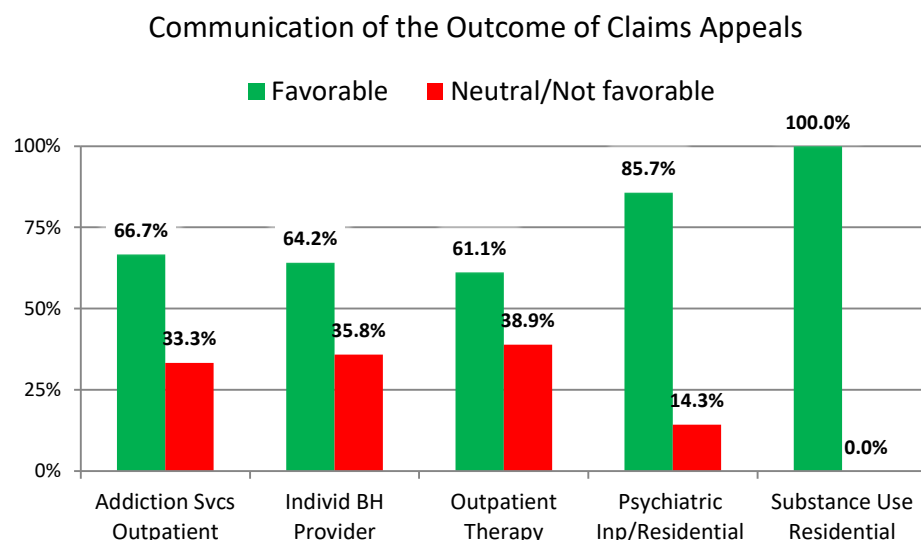
**Figure 29: Q17d, Timeliness of Claims Appeals Process.** Responses to Q17d, “Please rate your experience with the performance of the plan in the following areas: Timeliness of Claims Appeals Process,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 54; Outpatient Therapy: n = 72; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 2.

Regarding the resolution of claims payment problems or disputes, both of the substance use residential facilities responded favorably, followed by the addiction services outpatient facilities (77.8%; n = 9) and the psychiatric inpatient and psychiatric residential facilities (71.4%; n = 7), whereas the lowest favorability proportions were observed among outpatient therapy facilities (55.6%; n = 72) and individual BH providers (64.2%; n = 53; **Figure 30**).



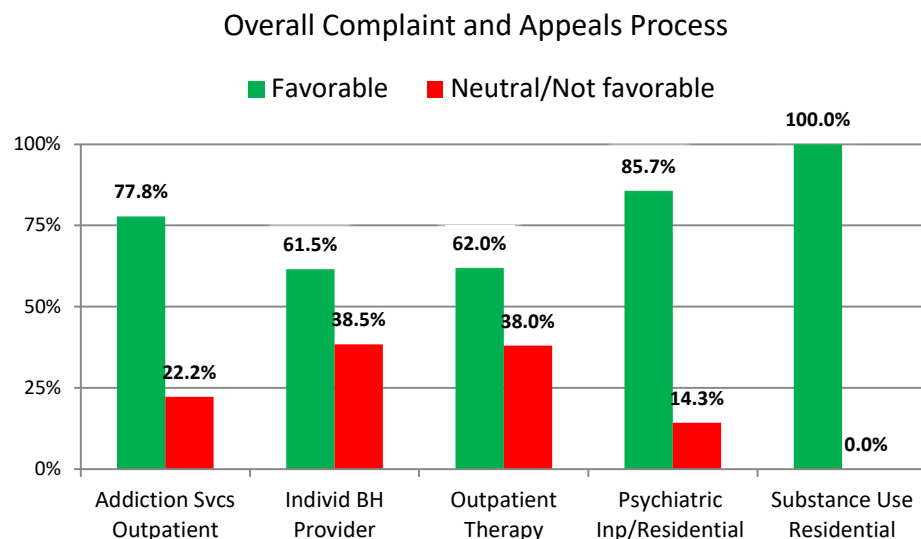
**Figure 30: Q17e, Resolution of Claims Payment Problems or Disputes.** Responses to Q17e, “Please rate your experience with the performance of the plan in the following areas: Resolution of Claims Payment Problems or Disputes,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 53; Outpatient Therapy: n = 72; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 2.

Regarding communication of the outcome of claims appeals, both of the substance use residential facilities responded favorably, and 85.7% of the seven psychiatric inpatient and psychiatric residential facilities responded favorably, while the lowest favorability proportion was observed among the outpatient therapy facilities (61.1%; n = 72; **Figure 27**).



**Figure 31: Q17f, Communication of the Outcome of Claims Appeals.** Responses to Q17f, “Please rate your experience with the performance of the plan in the following areas: Communication of the Outcome of Claims Appeals,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 53; Outpatient Therapy: n = 72; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 2.

Regarding the overall complaint and appeals process, both of the substance use residential facilities responded favorably, followed by the psychiatric inpatient and psychiatric residential facilities (85.7%; n = 7) and addiction services outpatient facilities (77.8%; n = 9), whereas the lowest favorability proportions were observed among and individual BH providers (61.5%; n = 52) and outpatient therapy facilities (62.0%; n = 71).



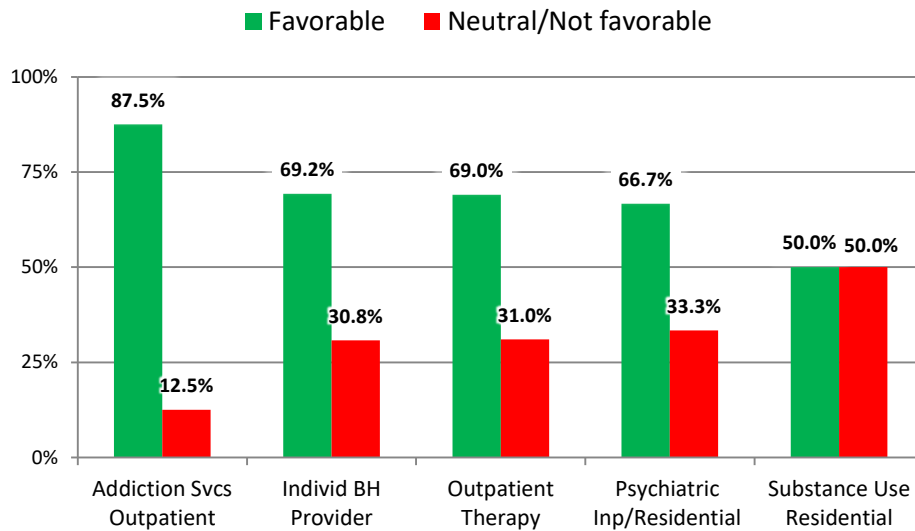
**Figure 32: Q17g, Overall Complaint and Appeals Process.** Responses to Q17g, “Please rate your experience with the performance of the plan in the following areas: Overall Complaint and Appeals Process,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 52; Outpatient Therapy: n = 71; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 2.

### Provider Network, and Coordination of Care and Case Management

Each responder was asked to rate the plan in the following service areas: number of specialists in the provider network; availability of medical specialists to accommodate referrals within a reasonable number of days; coordination of step-down services; ability to address the needs of members with special health care needs; ability to coordinate alcohol and/or substance use services, inclusive of residential or inpatient, when needed; ability to coordinate rehabilitation services, when needed; ability to arrange for non-emergency hospital admission, when needed; ability to make referrals to specialists and ancillary services, when needed; and ability to prescribe medications that provide for the best possible care.

Regarding the number of specialists in the plan provider network, the highest favorability proportion was observed among the addiction services outpatient facilities (87.5%; n = 8) and the lowest favorability proportion was observed among the substance use residential facilities (50.0%; n = 2; **Figure 33**).

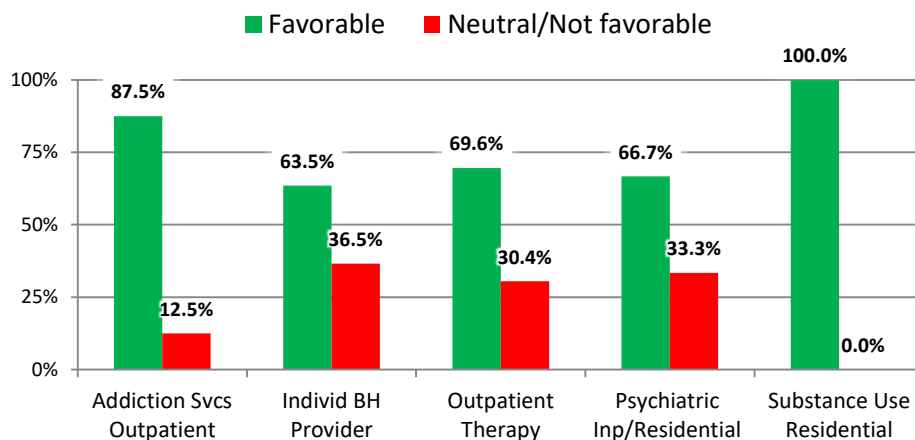
### The Number of Specialists In the Plan Provider Network



**Figure 33: Q18a, Number of Specialists in the Plan Provider Network.** Responses to Q18a, “Please rate the plan in the following areas: Number of Specialists in the Plan Provider Network,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Individ BH Provider: n = 52; Outpatient Therapy: n = 71; Psychiatric Inp/Residential: n = 6; Substance Use Residential: n = 2.

Regarding the availability of medical specialists to accommodate referrals, both of the substance use residential facilities responded favorably, as did 87.5% of the eight addiction services outpatient facilities, with the lowest favorability proportion observed among the individual BH providers (63.5% n = 52; **Figure 34**).

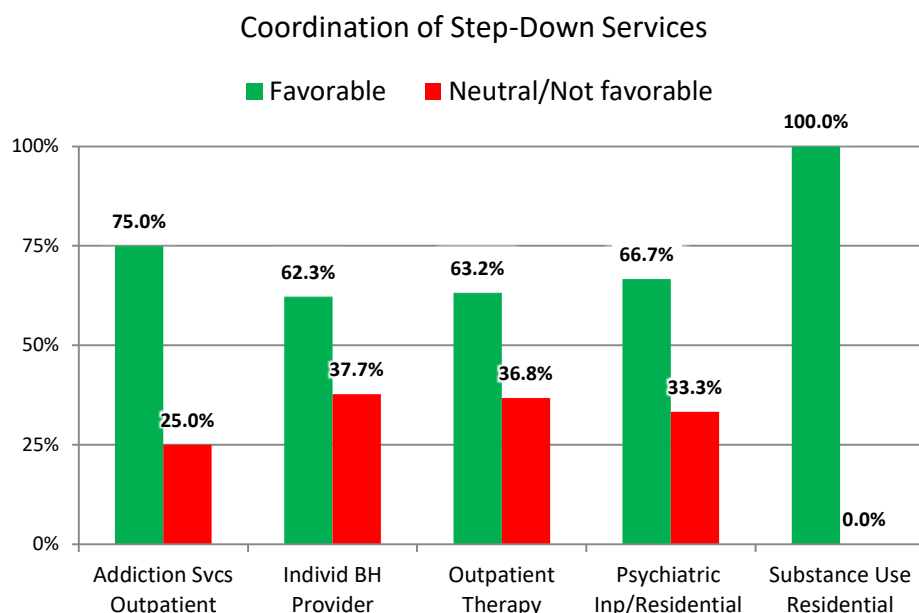
### Availability of Medical Specialists to Accommodate Referrals Within a Reasonable Number of Days



**Figure 34: Q18b, Availability of Medical Specialists to Accommodate Referrals Within a Reasonable Number of Days.** Responses to Q18b, “Please rate the plan in the following areas: Availability of Medical Specialists to Accommodate Your Referrals Within a Reasonable Number of Days,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Individ BH Provider: n = 52; Outpatient Therapy: n = 69; Psychiatric Inp/Residential: n = 6; Substance Use Residential: n = 2.

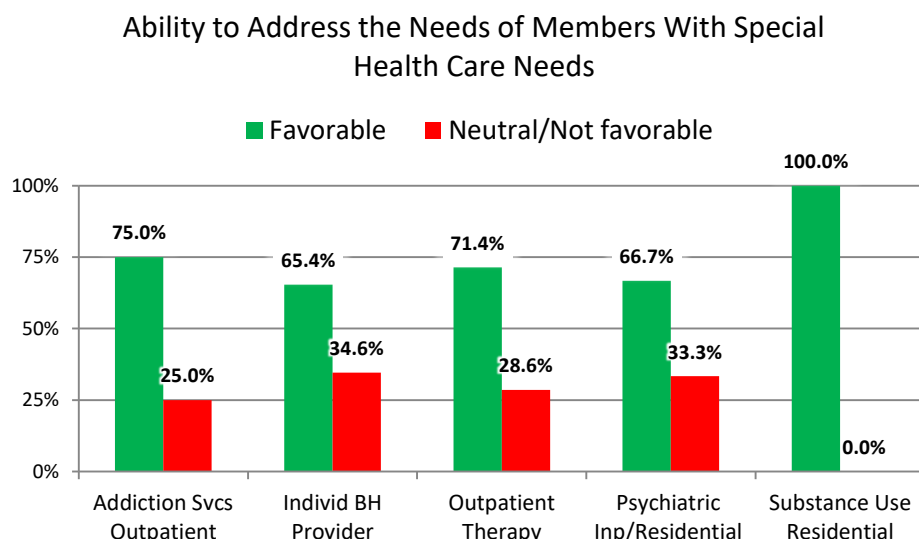


Regarding coordination of step-down services, both of the substance use residential facilities responded favorably, as did 75.0% of the eight addiction services outpatient facilities, with the lowest favorability proportion observed among the individual BH providers (62.3%; n = 53; **Figure 35**).



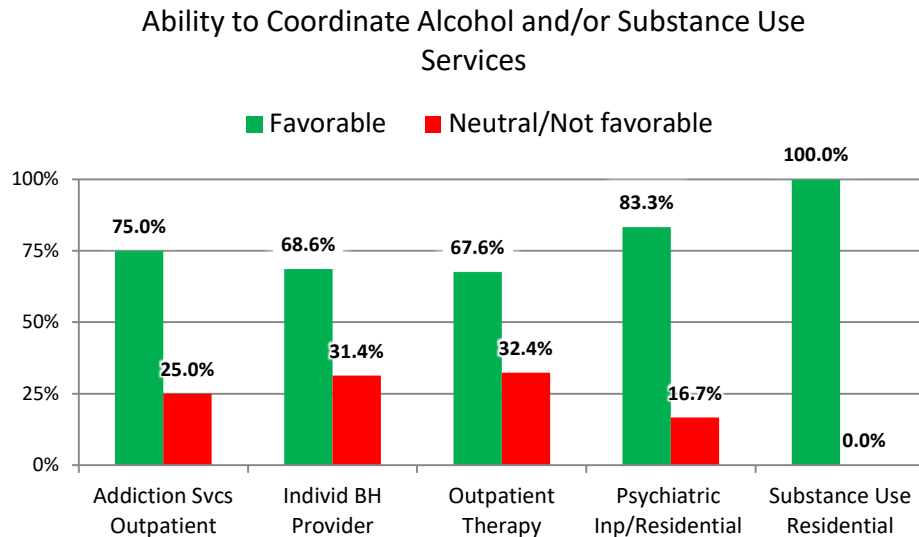
**Figure 35: Q18c, Coordination of Step-Down Services.** Responses to Q18c, “Please rate the plan in the following areas: Coordination of Step-Down Services,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Individ BH Provider: n = 53; Outpatient Therapy: n = 68; Psychiatric Inp/Residential: n = 6; Substance Use Residential: n = 2.

Regarding the ability to address the needs of members with special health care needs, both of the substance use residential facilities responded favorably, as did 75.0% of the eight addiction services outpatient facilities, with the lowest favorability proportion observed among the individual BH providers (65.4%; n = 52; **Figure 36**).



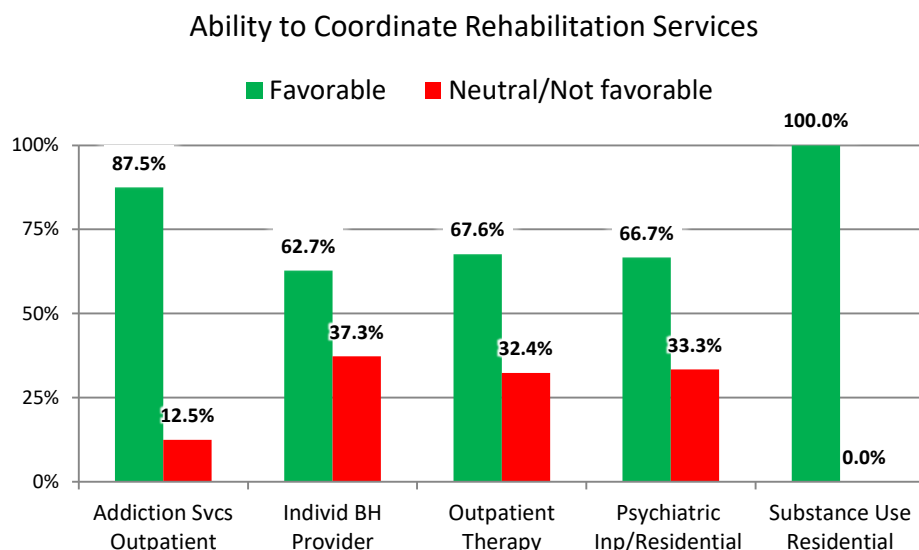
**Figure 36: Q18d, Ability to Address the Needs of Members with Special Health Care Needs.** Responses to Q18d, “Please rate the plan in the following areas: Ability to Address the Needs of Members with Special Health Care Needs,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Individ BH Provider: n = 52; Outpatient Therapy: n = 70; Psychiatric Inp/Residential: n = 6; Substance Use Residential: n = 2.

Regarding the ability to coordinate alcohol and/or substance use services (inclusive of residential or inpatient), both of the substance use residential facilities responded favorably, as did 75.0% of the eight addiction services outpatient facilities, with the lowest favorability proportion observed among the outpatient therapy services (67.6%; n = 71; **Figure 37**).



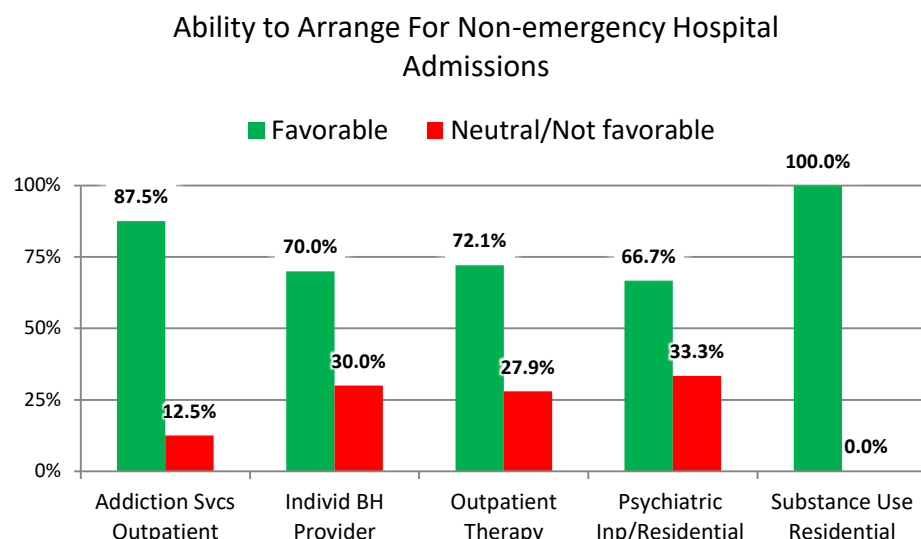
**Figure 37: Q18e, Ability to Coordinate Alcohol and/or Substance Use Services.** Responses to Q18e, “Please rate the plan in the following areas: Ability to Coordinate Alcohol and/or Substance Use Services, When Needed,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Individ BH Provider: n = 51; Outpatient Therapy: n = 71; Psychiatric Inp/Residential: n = 6; Substance Use Residential: n = 2.

Regarding the ability to coordinate rehabilitation services, both of the substance use residential facilities responded favorably, as did 87.5% of the eight addiction services outpatient facilities, with the lowest favorability proportion observed among the individual BH providers (62.7%; n = 51; **Figure 38**).



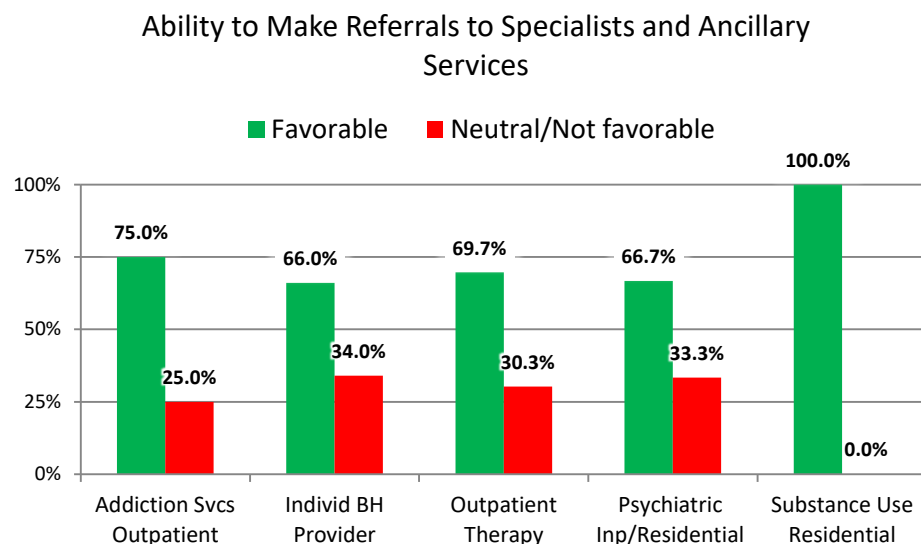
**Figure 38: Q18f, Ability to Coordinate Rehabilitation Services.** Responses to Q18f, “Please rate the plan in the following areas: Ability to Coordinate Rehabilitation Services, When Needed,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Individ BH Provider: n = 51; Outpatient Therapy: n = 68; Psychiatric Inp/Residential: n = 6; Substance Use Residential: n = 2.

Regarding the ability to arrange for non-emergency hospital admissions, both of the substance use residential facilities responded favorably, as did 87.5% of the eight addiction services outpatient facilities, with the lowest favorability proportion observed among the psychiatric inpatient and psychiatric residential facilities (66.7%; n = 6; **Figure 39**).



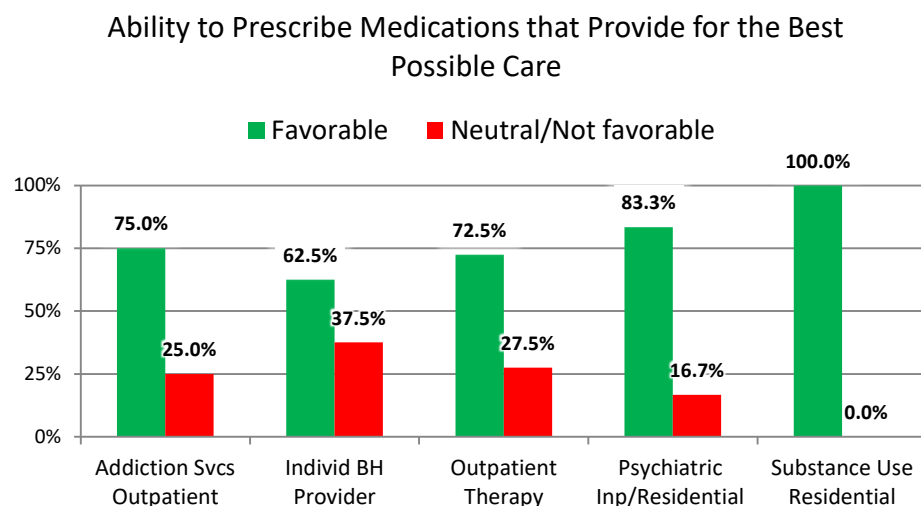
**Figure 39: Q18g, Ability to Arrange for Non-emergency Hospital Admissions.** Responses to Q18g, “Please rate the plan in the following areas: Ability to Arrange for Non-emergency Hospital Admissions, When Needed,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Individ BH Provider: n = 50; Outpatient Therapy: n = 68; Psychiatric Inp/Residential: n = 6; Substance Use Residential: n = 2.

Regarding the ability to make referrals to specialists and ancillary services when needed, both of the substance use residential facilities responded favorably, as did 75.0% of the eight addiction services outpatient facilities, with the lowest favorability proportion observed among the individual BH providers (66.0%; n = 50; **Figure 40**).



**Figure 40: Q18h, Ability to Make Referrals to Specialists and Ancillary Services.** Responses to Q18h, “Please rate the plan in the following areas: Ability to Make Referrals to Specialists and Ancillary Services, When Needed,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Individ BH Provider: n = 50; Outpatient Therapy: n = 66; Psychiatric Inp/Residential: n = 6; Substance Use Residential: n = 2.

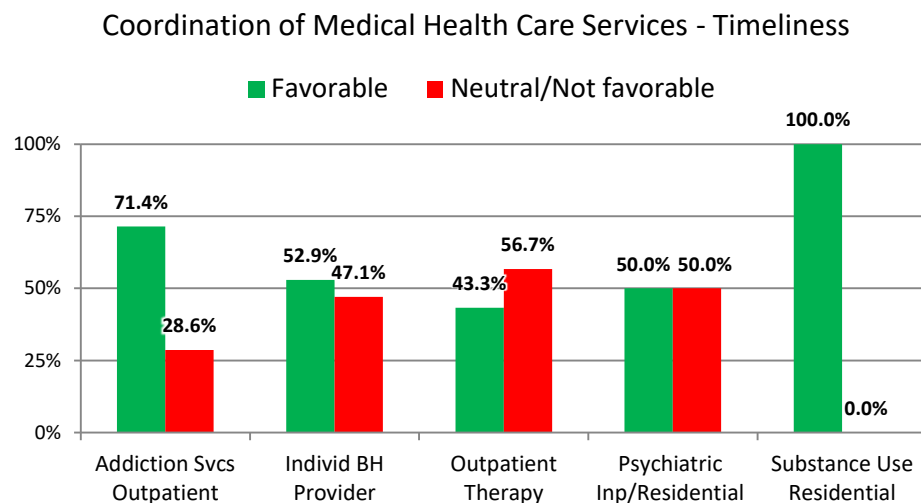
Regarding the ability to prescribe medications that provide for the best possible care, both of the substance use residential facilities responded favorably, as did 75.0% of the eight addiction services outpatient facilities, with the lowest favorability proportion observed among the individual BH providers (62.5%; n = 48; **Figure 41**).



**Figure 41: Q18i, Ability to Prescribe Medications that Provide for the Best Possible Care.** Responses to Q18i, “Please rate the plan in the following areas: Ability to Prescribe Medications that Provide for the Best Possible Care,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Indiv BH Provider: n = 48; Outpatient Therapy: n = 69; Psychiatric Inp/Residential: n = 6; Substance Use Residential: n = 2.

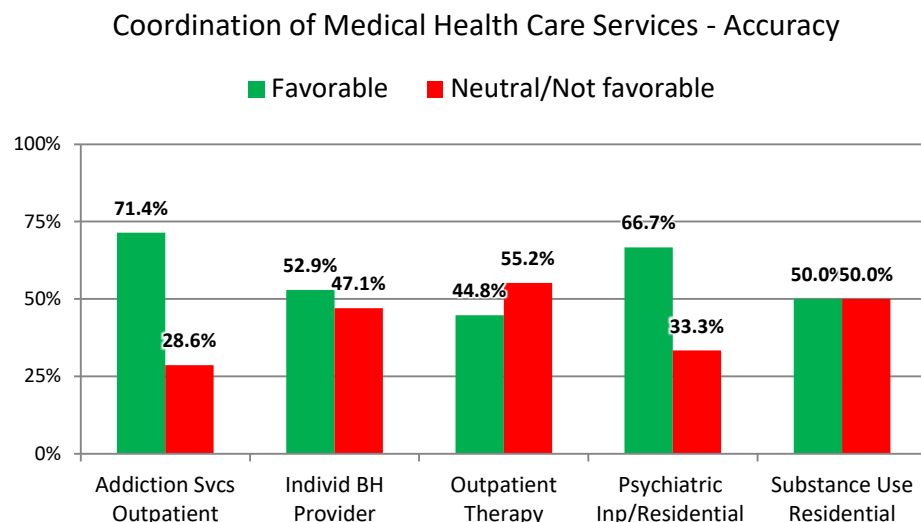
### Provider Network, and Coordination of Care and Case Management – Medical Health Care Services

Each responder was asked to rate their experience with the plan’s coordination of medical health care services in the areas of timeliness, accuracy, clarity, and sufficiency of information to coordinate care. Regarding the timeliness of the plan’s information to coordinate medical health care services, both of the substance use residential facilities responded favorably, as did 71.4% of the seven addiction services outpatient facilities, with the lowest favorability proportion observed among the outpatient therapy services (43.3%; n = 67; **Figure 42**).



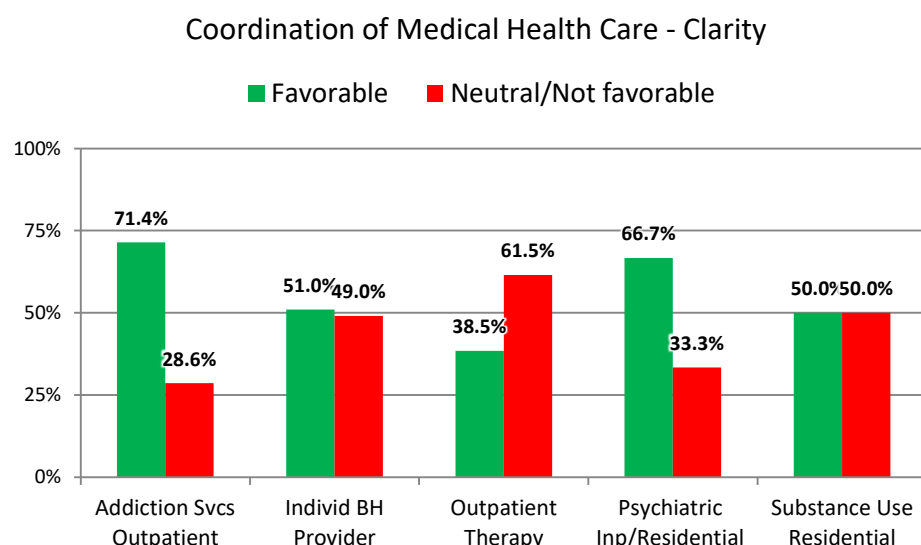
**Figure 42: Q19a, Coordination of Medical Health Care Services – Timeliness.** Responses to Q19a, “Please Rate Your Experience with Plan’s Coordination of Medical Health Care Services in the Following Areas: Timeliness,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 7; Indiv BH Provider: n = 51; Outpatient Therapy: n = 67; Psychiatric Inp/Residential: n = 6; Substance Use Residential: n = 2.

Regarding the accuracy of the plan’s information to coordinate medical health care services, the highest favorability proportion was observed among the seven addiction services outpatient facilities (71.4%), followed by the psychiatric inpatient and psychiatric residential facilities (66.7%; n = 6), with the lowest favorability proportion observed among the outpatient therapy services (44.8%; n = 67; **Figure 43**).



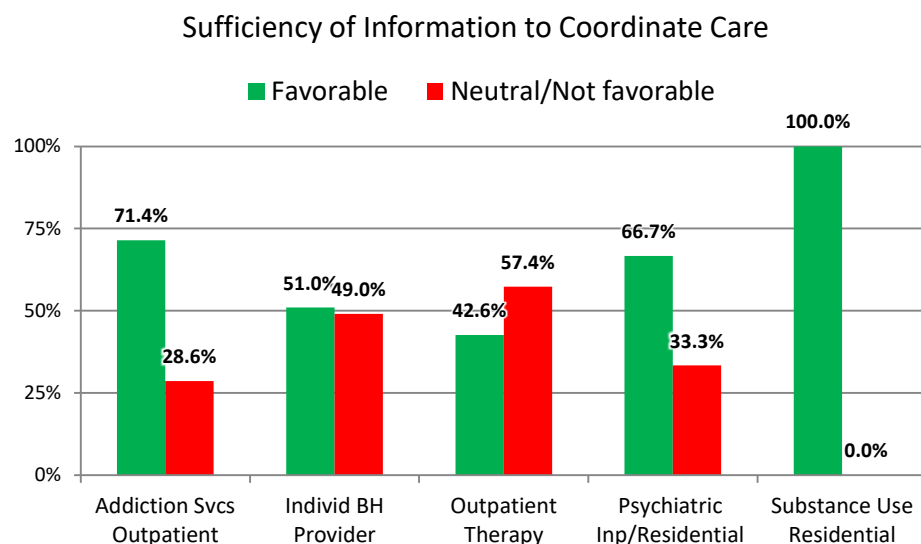
**Figure 43: Q19b, Coordination of Medical Health Care Services – Accuracy.** Responses to Q19b, “Please Rate Your Experience with Plan’s Coordination of Medical Health Care Services in the Following Areas: Accuracy,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 7; Individ BH Provider: n = 51; Outpatient Therapy: n = 67; Psychiatric Inp/Residential: n = 6; Substance Use Residential: n = 2.

Regarding the clarity of the plan’s information to coordinate medical health care services, the highest favorability proportion was observed among the seven addiction services outpatient facilities (71.4%), followed by the six psychiatric inpatient and psychiatric residential facilities (66.7%), with the lowest favorability proportion observed among the outpatient therapy services (38.5%; n = 65; **Figure 44**).



**Figure 44: Q19c, Coordination of Medical Health Care – Clarity.** Responses to Q19c, “Please Rate Your Experience with Plan’s Coordination of Medical Health Care Services in the Following Areas: Clarity,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 7; Individ BH Provider: n = 51; Outpatient Therapy: n = 65; Psychiatric Inp/Residential: n = 6; Substance Use Residential: n = 2.

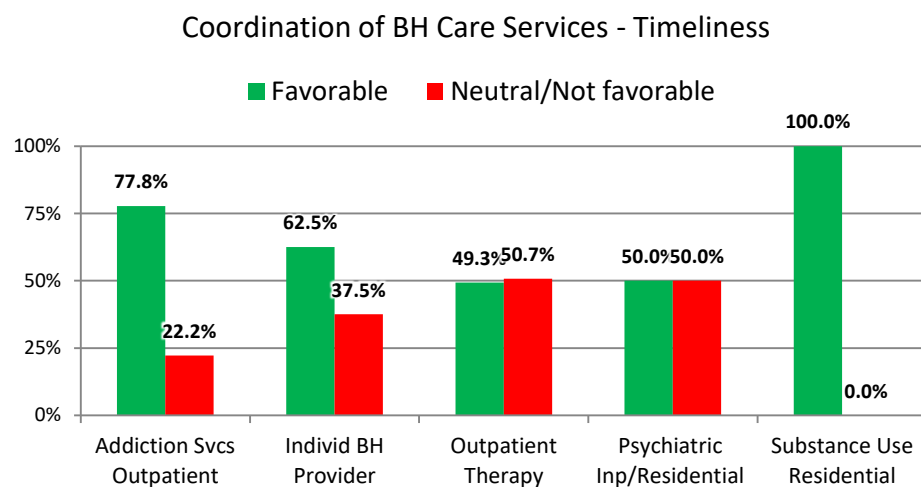
Regarding the sufficiency of the plan’s information to coordinate medical health care services, both of the substance use residential facilities responded favorably, as did 71.4% of the seven addiction services outpatient facilities, with the lowest favorability proportion observed among the outpatient therapy services (42.6%; n = 68; **Figure 45**).



**Figure 45: Q19d, Sufficiency of Information to Coordinate Care.** Responses to Q19d, “Please Rate Your Experience with Plan’s Coordination of Medical Health Care Services in the Following Areas: Sufficiency of Information to Coordinate Care,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 7; Individ BH Provider: n = 51; Outpatient Therapy: n = 68; Psychiatric Inp/Residential: n = 6; Substance Use Residential: n = 2.

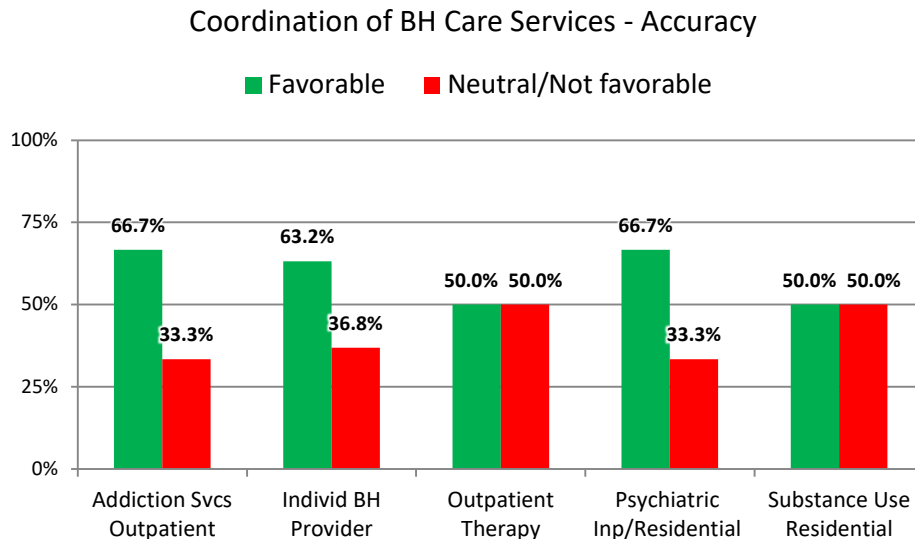
### Provider Network, and Coordination of Care and Case Management – Behavioral Health Care Services

Each responder was asked to rate their experience with the plan’s coordination of BH care services in the areas of timeliness, accuracy, clarity, and sufficiency of information to coordinate care. Regarding the timeliness of the plan’s information to coordinate BH care services, both of the substance use residential facilities responded favorably, as did 77.8% of the nine addiction services outpatient facilities, with the lowest favorability proportion observed among the outpatient therapy facilities (49.3%; n = 69; **Figure 46**).



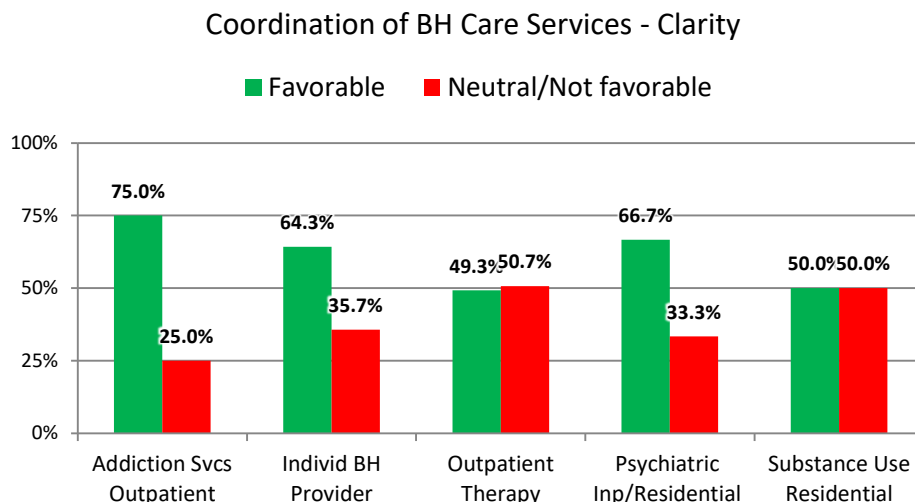
**Figure 46: Q20a, Coordination of BH Care Services – Timeliness.** Responses to Q20a, “Please Rate Your Experience with Plan’s Coordination of Behavioral Health Care Services in the Following Areas: Timeliness,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 56; Outpatient Therapy: n = 69; Psychiatric Inp/Residential: n = 6; Substance Use Residential: n = 2.

Regarding the accuracy of the plan’s information to coordinate BH care services, the highest favorability proportions were observed among the nine addiction services outpatient facilities and the six psychiatric inpatient and psychiatric residential facilities (66.7%), with the lowest favorability proportions observed among the 68 outpatient therapy facilities and the two substance use residential facilities (50.0%; **Figure 47**).



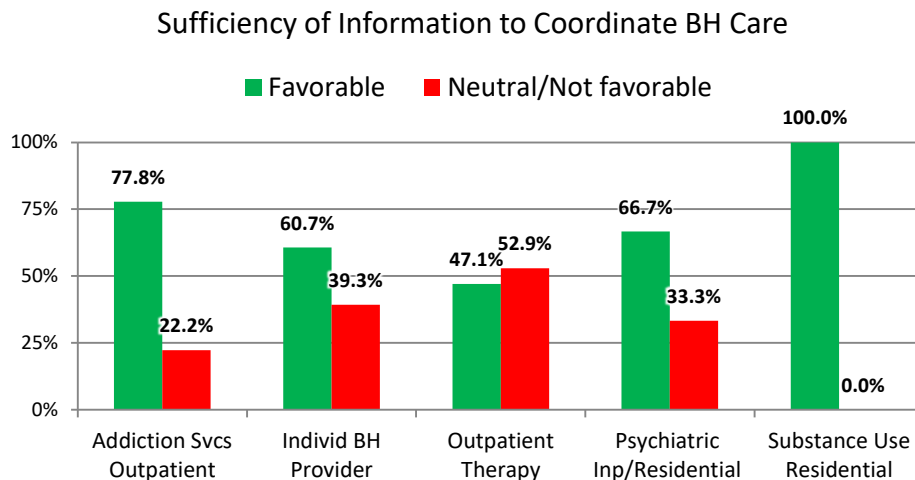
**Figure 47: Q20b, Coordination of BH Care Services – Accuracy.** Responses to Q20b, “Please Rate Your Experience with Plan’s Coordination of Behavioral Health Care Services in the Following Areas: Accuracy,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Indiv BH Provider: n = 57; Outpatient Therapy: n = 68; Psychiatric Inp/Residential: n = 6; Substance Use Residential: n = 2.

Regarding the clarity of the plan’s information to coordinate BH care services, the highest favorability proportion was observed among the eight addiction services outpatient facilities (75.0%), followed by the six psychiatric inpatient and psychiatric residential facilities (66.7%), with the lowest favorability proportion observed among the 69 outpatient therapy facilities (49.3%; **Figure 48**).



**Figure 48: Q20c, Coordination of BH Care Services – Clarity.** Responses to Q20c, “Please Rate Your Experience with Plan’s Coordination of Behavioral Health Care Services in the Following Areas: Clarity,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Indiv BH Provider: n = 56; Outpatient Therapy: n = 69; Psychiatric Inp/Residential: n = 6; Substance Use Residential: n = 2.

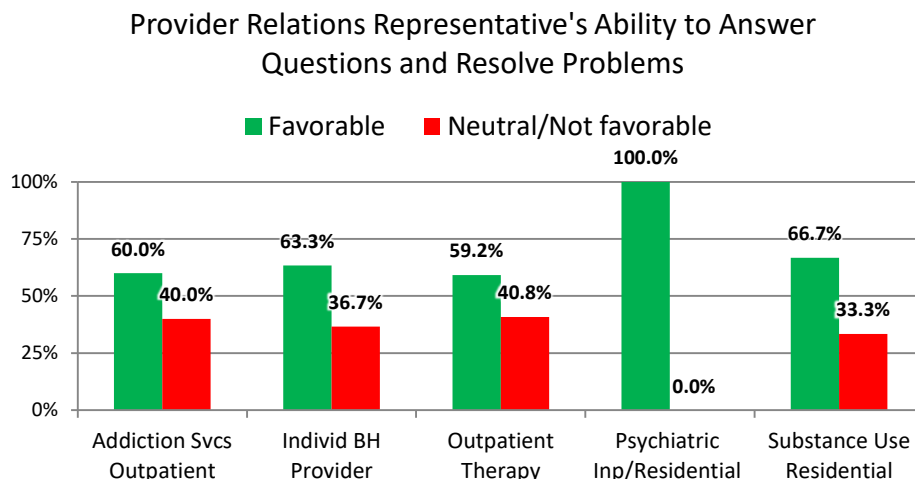
Regarding the sufficiency of the plan’s information to coordinate BH care services, both substance use residential facilities responded favorably, as did 77.8% of the nine addiction services outpatient facilities, with the lowest favorability proportion observed among the 68 outpatient therapy facilities (47.1%; **Figure 49**).



**Figure 49: Q20d, Sufficiency of Information to Coordinate BH Care.** Responses to Q20d, “Please Rate Your Experience with Plan’s Coordination of Behavioral Health Care Services in the Following Areas: Sufficiency of Information to Coordinate Care,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 56; Outpatient Therapy: n = 68; Psychiatric Inp/Residential: n = 6; Substance Use Residential: n = 2.

### Customer Service and Provider Relations

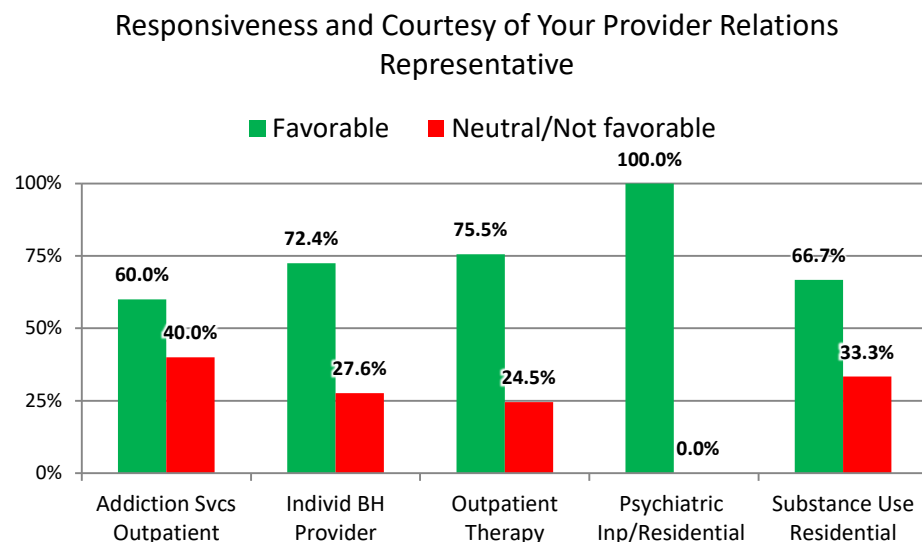
Each responder was asked whether they have a PR representative, and those who responded affirmatively were asked to rate their experience with the PR representative’s ability to answer questions and resolve problems, responsiveness, and courtesy, accessibility, and helpfulness. Regarding the PR representative’s ability to answer questions and resolve problems, all four psychiatric inpatient and psychiatric residential facilities responded favorably, followed by 66.7% of the three substance use residential facilities, with the lowest favorability proportion observed among the 49 outpatient therapy facilities (59.2%; **Figure 50**).



**Figure 50: Q24a, Provider Relations Representative’s Ability to Answer Questions and Resolve Problems.** Responses to Q24a, “Please Rate Your Experience with the Following: Provider Relations Representative’s Ability to Answer Questions and Resolve Problems,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 5; Individ BH Provider: n = 30; Outpatient Therapy: n = 49; Psychiatric Inp/Residential: n = 4; Substance Use Residential: n = 3.

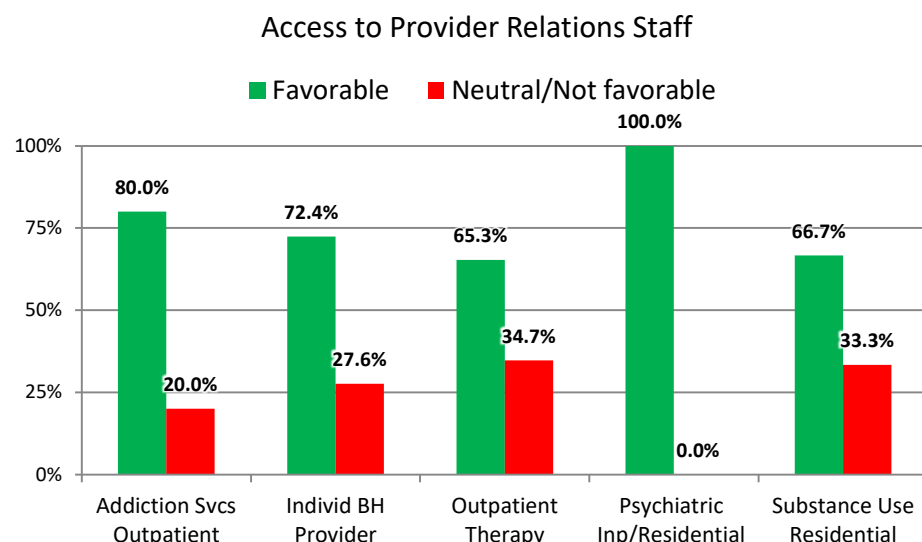


Regarding the PR representative’s responsiveness and courtesy, all four psychiatric inpatient and psychiatric residential facilities responded favorably, followed by 75.5% of the outpatient therapy facilities (n = 49), with the lowest favorability proportion observed among the five addiction services outpatient facilities (60.0%; **Figure 51**).



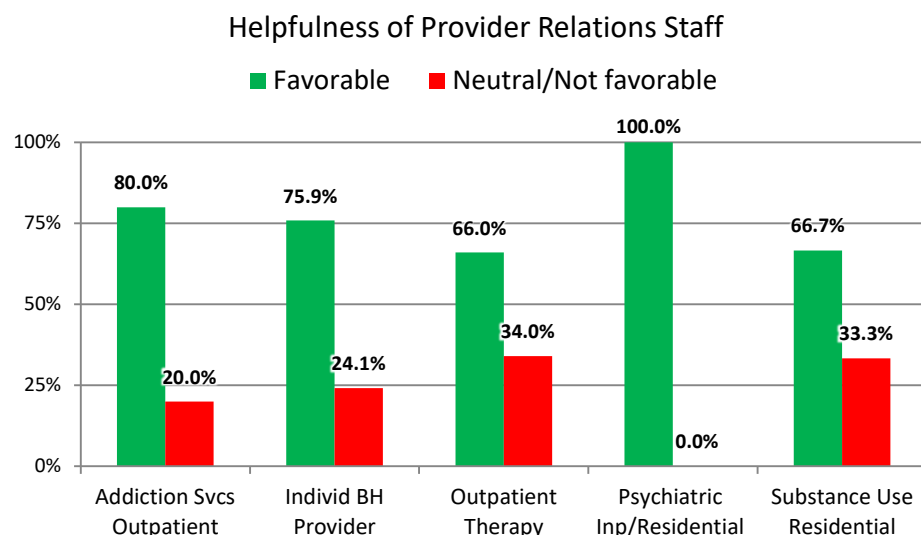
**Figure 51: Q24b, Responsiveness and Courtesy of Your Provider Relations Representative.** Responses to Q24b, “Please Rate Your Experience with the Following: Responsiveness and Courtesy of Your Provider Relations Representative,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 5; Individ BH Provider: n = 29; Outpatient Therapy: n = 49; Psychiatric Inp/Residential: n = 4; Substance Use Residential: n = 3.

Regarding access to the PR staff, all four psychiatric inpatient and psychiatric residential facilities responded favorably, followed by 80.0% of the addiction services outpatient facilities (n = 5), with the lowest favorability proportion observed among the outpatient therapy facilities (65.3%; n = 49; **Figure 52**).



**Figure 52: Q24c, Access to Provider Relations Staff.** Responses to Q24c, “Please Rate Your Experience with the Following: Access to Provider Relations Staff,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 5; Individ BH Provider: n = 29; Outpatient Therapy: n = 49; Psychiatric Inp/Residential: n = 4; Substance Use Residential: n = 3.

Regarding the PR staff’s helpfulness, all four psychiatric inpatient and psychiatric residential facilities responded favorably, followed by 80.0% of the addiction services outpatient facilities (n = 5), with the lowest favorability proportion observed among the outpatient therapy facilities (66.0%; n = 50; **Figure 53**).



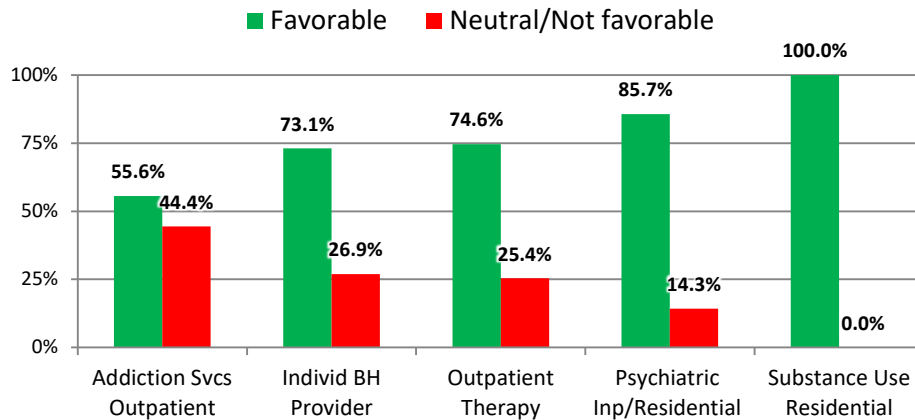
**Figure 53: Q24d, Helpfulness of Provider Relations Staff.** Responses to Q24d, “Please Rate Your Experience with the Following: Helpfulness of Provider Relations Staff,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 5; Individ BH Provider: n = 29; Outpatient Therapy: n = 50; Psychiatric Inp/Residential: n = 4; Substance Use Residential: n = 3.

### Utilization Management, Including Medical Reviews and support Towards Patient-Centered Medical Home Implementation

Each responder was asked to rate their experience with UM, which included medical reviews and support towards patient-centered medical home implementation. Specific questions addressed the process and timeliness of obtaining pre-certifications/referral/authorization information; the extent to which UM staff share review criteria and reasons for adverse determinations; peer-to-peer review process; access to case/care managers from the health plan; and the plan UM process overall.

Regarding the process of obtaining pre-certification/referral/authorization information, all three substance use residential facilities responded favorably, followed by 85.7% of the seven psychiatric inpatient and psychiatric residential facilities, with the lowest favorability proportion observed among the addiction services outpatient facilities (55.6%; n = 9; **Figure 54**).

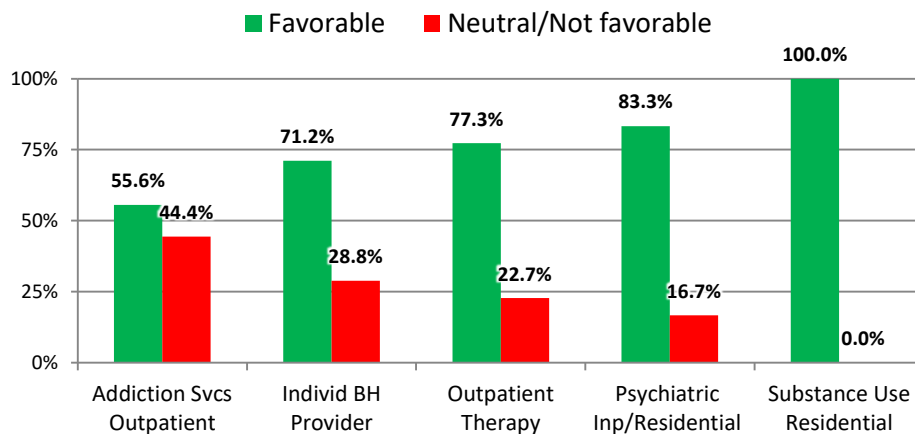
### Process of Obtaining Pre-certification/ Referral/Authorization Information



**Figure 54: Q25a, Process of Obtaining Pre-certification/Referral/Authorization Information.** Responses to Q25a, “Please Rate Your Experience with the Following: Process of Obtaining Pre-certification/Referral/Authorization Information,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 52; Outpatient Therapy: n = 67; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 3.

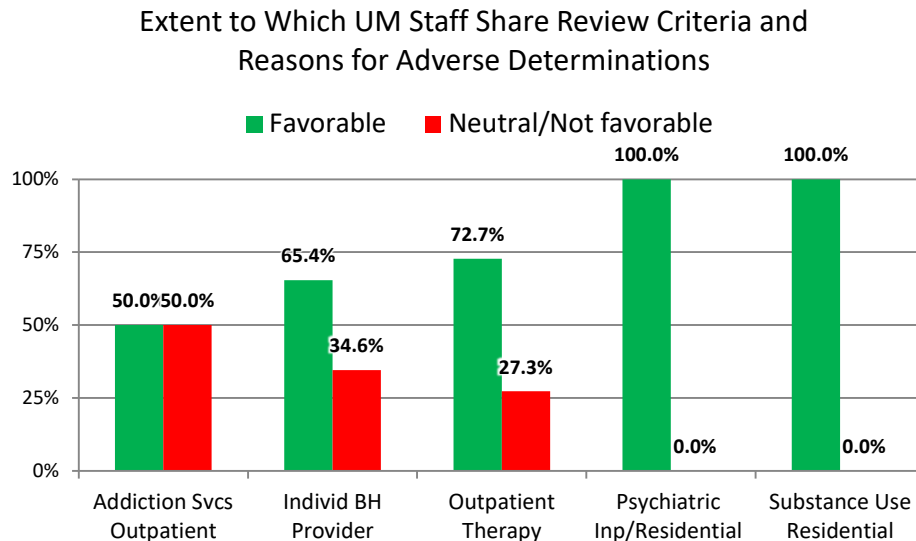
Regarding the timeliness of obtaining pre-certification/referral/authorization information, all three substance use residential facilities responded favorably, followed by 83.3% of the six psychiatric inpatient and psychiatric residential facilities, with the lowest favorability proportion observed among the addiction services outpatient facilities (55.6%; n = 9; **Figure 55**).

### Timeliness of Obtaining Pre-certification/ Referral/Authorization Information



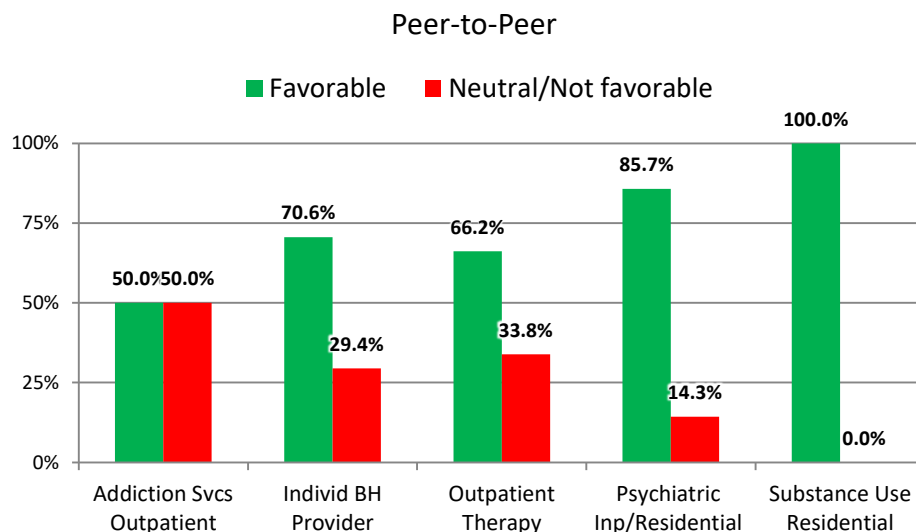
**Figure 55: Q25b, Timeliness of Obtaining Pre-certification/Referral/Authorization Information.** Responses to Q25b, “Please Rate Your Experience with the Following: Timeliness of Obtaining Pre-certification/Referral/Authorization Information,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 52; Outpatient Therapy: n = 66; Psychiatric Inp/Residential: n = 6; Substance Use Residential: n = 3.

Regarding the extent to which UM staff share review criteria and reasons for adverse determinations, all three substance use residential facilities and all six psychiatric inpatient and psychiatric residential facilities responded favorably, with the lowest favorability proportion observed among the addiction services outpatient facilities (50.0%; n = 8; **Figure 56**).



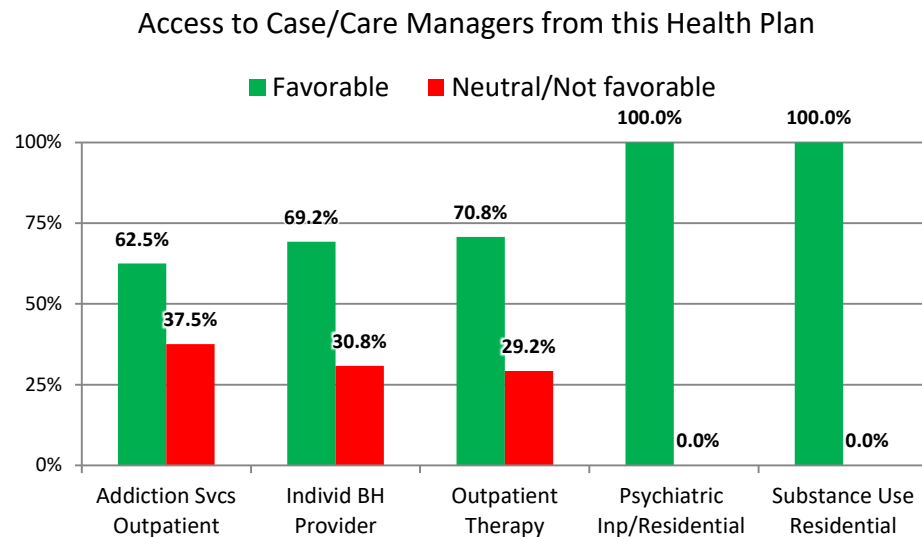
**Figure 56: Q25c, Extent to Which UM Staff Share Review Criteria and Reasons for Adverse Determinations.** Responses to Q25c, “Please Rate Your Experience with the Following: Extent to Which UM Staff Share Review Criteria and Reasons for Adverse Determinations,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Indivd BH Provider: n = 52; Outpatient Therapy: n = 66; Psychiatric Inp/Residential: n = 6; Substance Use Residential: n = 3.

Regarding the peer-to-peer review process, all three substance use residential facilities responded favorably, followed by 85.7% of the seven psychiatric inpatient and psychiatric residential facilities, with the lowest favorability proportion observed among the addiction services outpatient facilities (55.6%; n = 8; **Figure 57**).



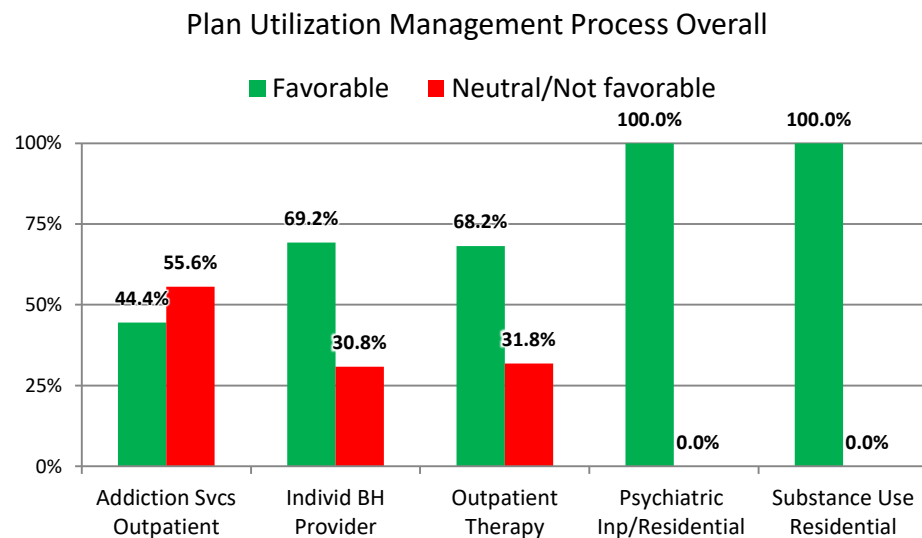
**Figure 57: Q25d, Peer-to-Peer Review Process.** Responses to Q25d, “Please Rate Your Experience with the Following: Peer-to-Peer,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Indivd BH Provider: n = 51; Outpatient Therapy: n = 65; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 3.

Regarding access to health plan case/care managers, all three substance use residential facilities and all seven psychiatric inpatient and psychiatric residential facilities responded favorably, with the lowest favorability proportion observed among the addiction services outpatient facilities (62.5%; n = 8; **Figure 58**).



**Figure 58: Q25e, Access to Case/Care Managers from this Health Plan.** Responses to Q25e, “Please Rate Your Experience with the Following: Access to Case/Care Managers from this Health Plan,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 8; Individ BH Provider: n = 52; Outpatient Therapy: n = 65; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 3.

Regarding the health plan UM process overall, all three substance use residential facilities and all seven psychiatric inpatient and psychiatric residential facilities responded favorably, with the lowest favorability proportion observed among the addiction services outpatient facilities (44.4%; n = 9; **Figure 59**).

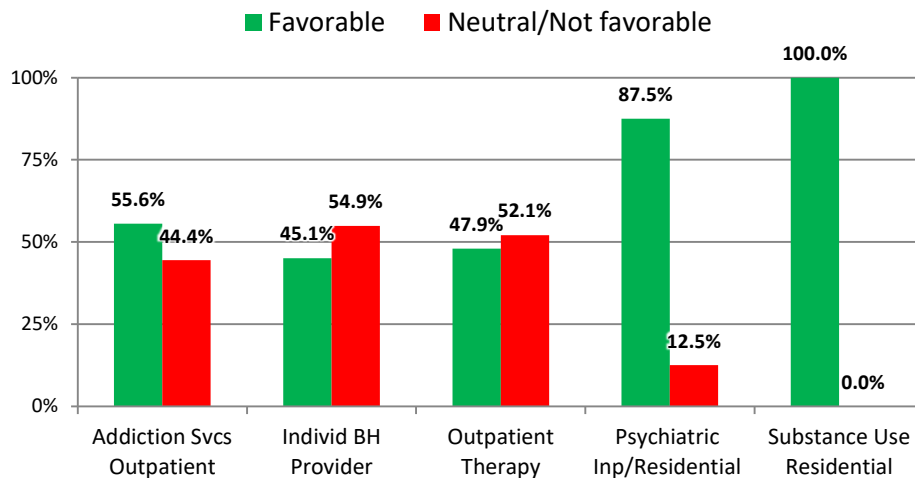


**Figure 59: Q25f, Plan Utilization Management Process Overall.** Responses to Q25f, “Please Rate Your Experience with the Following: Plan UM Process Overall,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Individ BH Provider: n = 52; Outpatient Therapy: n = 66; Psychiatric Inp/Residential: n = 7; Substance Use Residential: n = 3.

## Call Center

Each responder was asked to rate their overall satisfaction with the health plan's call center. All three substance use residential facilities responded favorably, followed by 87.5% of the eight psychiatric inpatient and psychiatric residential facilities, with the lowest favorability proportion observed among the individual BH providers (45.1%; n = 51; **Figure 60**).

Overall Satisfaction with Plan Call Center Services

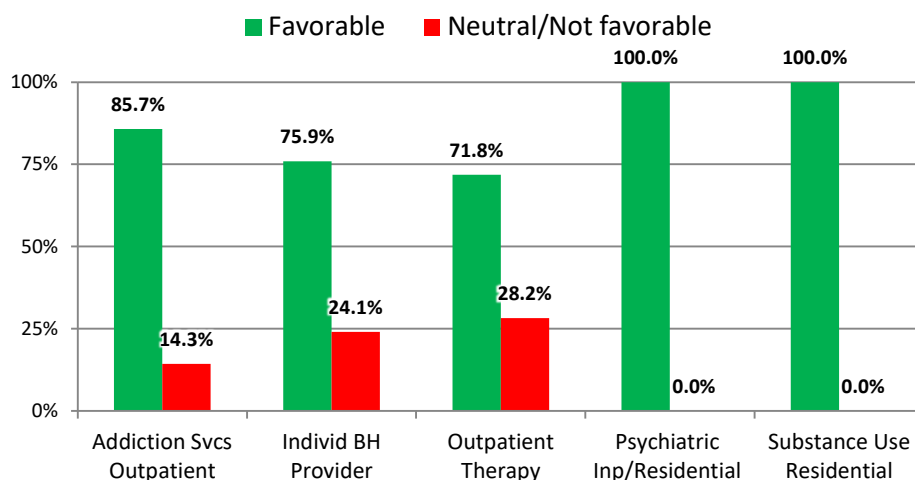


**Figure 60: Q26, Overall Satisfaction with Plan Call Center Services.** Responses to Q26, “Please Rate: Overall Satisfaction with Plan Call Center Services,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 9; Indiv BH Provider: n = 51; Outpatient Therapy: n = 73; Psychiatric Inp/Residential: n = 8; Substance Use Residential: n = 3.

## Overall Satisfaction

Each responder was asked to rate their overall satisfaction with the health plan. Both substance use residential facilities and all eight psychiatric inpatient and psychiatric residential facilities responded favorably, with the lowest favorability proportion observed among the outpatient therapy facilities (71.8%; n = 71; **Figure 61**).

Overall Satisfaction with the Plan

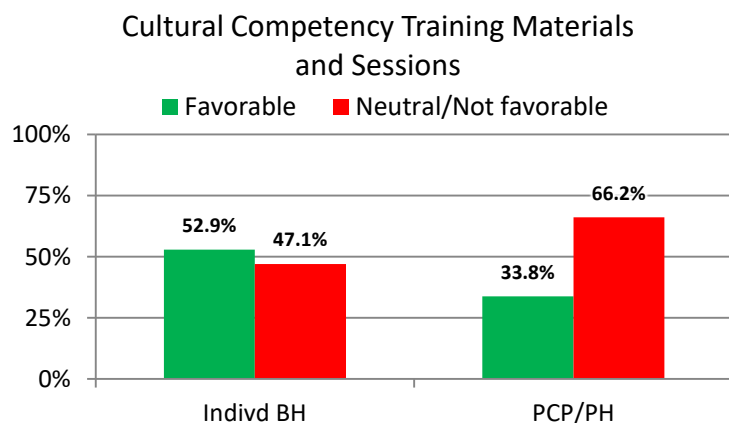


**Figure 61: Q27, Overall Satisfaction with the Plan.** Responses to Q27, “Please Rate: Overall Satisfaction with the Plan,” shown as favorable (green) and neutral or not favorable (red). Addiction Svcs Outpatient: n = 7; Indiv BH Provider: n = 54; Outpatient Therapy: n = 71; Psychiatric Inp/Residential: n = 8; Substance Use Residential: n = 2.

## Comparison of Individual Behavioral Health Providers to PCPs and Physical Health Specialist Physicians

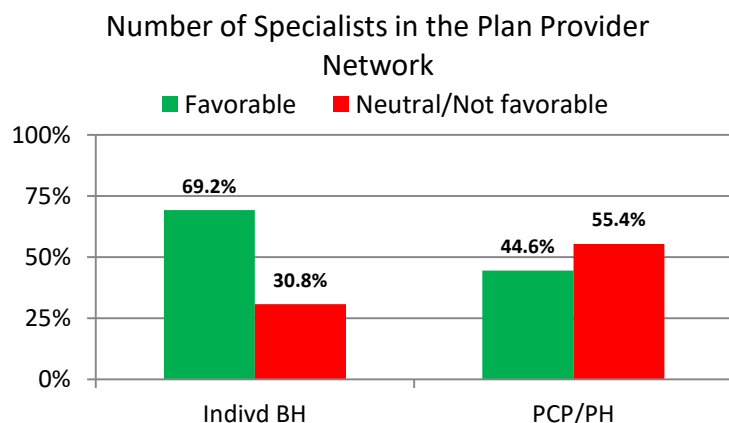
The following figures present findings for survey items with favorability/neutral or not favorable proportions that were significantly associated (*chi-squared test*,  $P < 0.05$ ) with provider type, i.e., individual BH providers compared to PCPs and physical health specialist physicians (collectively referred to as “PCPs and specialists” hereafter).

Regarding the cultural competency training materials and sessions, 52.9% of individual BH providers ( $n = 51$ ) responded favorably compared to 33.8% of PCPs and specialists ( $n = 65$ ; **Figure 62**).



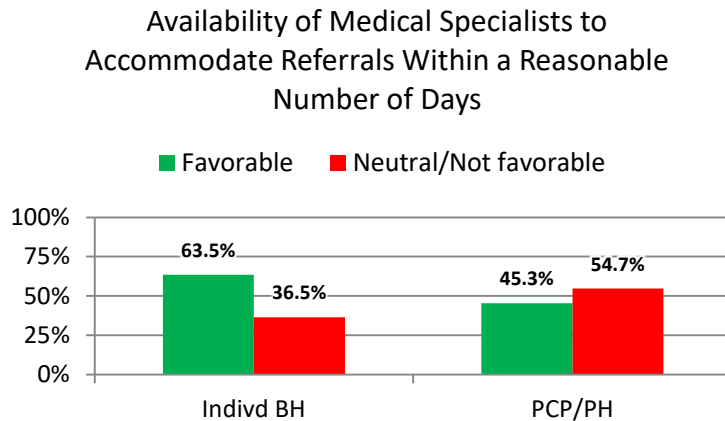
**Figure 62: BH Providers vs. PCPs and Specialists – Cultural Competency Training Materials and Sessions.** Comparison of favorable (green) and neutral/not favorable (red) responses from individual behavioral health providers (Individ BH;  $n = 51$ ) and primary care providers and physical health specialist physicians (PCP/PH;  $n = 65$ ) to the question “How satisfied are you with the following: Cultural Competency Training Materials and Sessions?”

Regarding the number of specialists in the plan provider network, 69.2% of individual BH providers ( $n = 52$ ) responded favorably compared to 44.6% of PCPs and specialists ( $n = 74$ ; **Figure 63**).



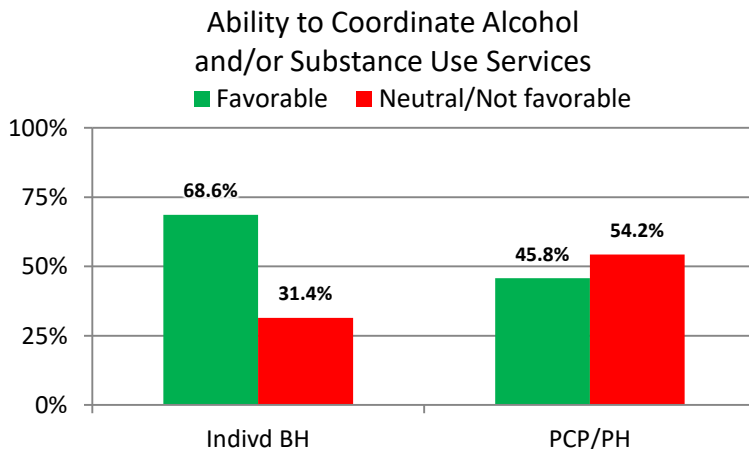
**Figure 63: BH Providers vs. PCPs and Specialists – Number of Specialists in the Plan Provider Network.** Comparison of favorable (green) and neutral/not favorable (red) responses from individual behavioral health providers (Individ BH;  $n = 52$ ) and primary care providers and physical health specialist physicians (PCP/PH;  $n = 74$ ) to the question, “Please rate the plan in the following areas: Number of Specialists in the Plan Provider Network.”

Regarding the availability of medical specialists to accommodate referrals within a reasonable number of days, 63.5% of individual BH providers (n = 52) responded favorably compared to 45.3% of PCPs and specialists (n = 75; **Figure 64**).



**Figure 64: BH Providers vs. PCPs and Specialists – Availability of Medical Specialists to Accommodate Referrals Within a Reasonable Number of Days.** Comparison of favorable (green) and neutral/not favorable (red) responses from individual behavioral health providers (Indivd BH; n = 52) and primary care providers and physical health specialist physicians (PCP/PH; n = 75) to the question, “Please rate the plan in the following areas: Availability of Medical Specialists to Accommodate Your Referrals Within a Reasonable Number of Days.”

Regarding the ability to coordinate alcohol/substance use services (inclusive of residential or inpatient), 68.6% of individual BH providers (n = 51) responded favorably compared to 45.8% of PCPs and specialists (n = 59; **Figure 65**).



**Figure 65: BH Providers vs. PCPs and Specialists – Ability to Coordinate Alcohol and/or Substance Use Services (Inclusive of Residential or Inpatient).** Comparison of favorable (green) and neutral/not favorable (red) responses from individual behavioral health providers (Indivd BH; n = 51) and primary care providers and physical health specialist physicians (PCP/PH; n = 59) to the question, “Please rate the plan in the following areas: Ability to Coordinate Alcohol and/or Substance Use Services (Inclusive of Residential or Inpatient), When Needed.”



## Discussion

The response rate for the 2019/2020 Behavioral Health (BH) Survey, which included both individual BH providers and BH facility providers, was considerably lower (5.8%) compared to the response rate for both the prior year BH Facility Survey (14.7%) and individual BH providers (14.9%), with a margin of error of +/- 8 percentage points. The margin of error for the 2019/2020 Non-BH Survey was considerably greater, at +/-11 percentage points. The response rate for the 2019/2020 Non-BH Survey, which included PCPs and specialists, was also considerably lower (2.0%) compared to the prior year PCP (10.6%) and physical health specialist (6.9%) response rates; a difference likely attributable, in large part, to the increased clinical demands on providers due to the coronavirus pandemic (Brooks, 2020; Kacik & Meyer, 2020). Therefore, findings for both 2019/2020 surveys should be interpreted with caution.

The large gap in overall satisfaction with the health plan between BH survey responders (76.1%) and Non-BH Survey responders (42.0%), as well as between individual BH providers (75.9%) and physical health providers (42.0%), warrants further research and action by health plans to address the concerns of PCPs and specialists.

Comparing the statewide 2019/2020 BH facility to 2018 BH facility satisfaction rates, overall satisfaction with the health plan improved by 1.8 percentage points; this increase was attributable to LHCC, with an increase of 15.4 percentage points, Healthy Blue (+3.3 percentage points) and UHC (+1.1 percentage points). The remaining two plans showed declines in BH facility provider satisfaction. LHCC and UHC showed the highest BH facility provider satisfaction rate (85.7%). Statewide, individual provider satisfaction showed a 5.1 percentage point increase from the prior year survey (60.4%) to the current year survey (65.5%); this increase was attributable to LHCC, with an increase of 20.2 percentage points and UHC (+15.8 percentage points). The remaining three plans showed declines in individual provider satisfaction.

Several statistically significant associations between the health plan and favorability ratings are notable among BH Survey responders. First, there was statistically significant variability across health plans with regard to favorability proportions for several provider portal survey items, including overall experience with the provider portal, as well as finding member eligibility information and claim payment information. Statistically significant variability among health plan favorability proportions was also observed for the domain of network/coordination of care/case management. Specific survey items that showed statistically significant associations between health plan and the favorability rating were the following: number of specialists in the plan provider network; availability of medical specialists; ability to coordinate alcohol and/or substance use services; ability to coordinate rehabilitation services; and ability to arrange for non-emergency hospital admissions. Significant variability among MCO favorability ratings in these areas provides evidence to suggest opportunities for individual MCOs to improve provider satisfaction, as well as quality of care.

Comparisons of individual BH providers to PCPs and specialists revealed statistically significant associations between provider type and favorability ratings for select survey items. Specifically, individual BH providers showed higher favorability proportions compared to PCPs and specialists for the following survey items: cultural competency training materials and sessions, number of specialists in the plan provider network, availability of medical specialists to accommodate referrals within a reasonable number of days, and ability to coordinate alcohol and/or substance use services (inclusive of residential or inpatient).

**Appendix A: Key Findings Dashboard** presents a dashboard of the survey items indicated in the preceding discussion as significantly associated with the health plan and/or provider type, as well as for overall satisfaction with the health plan.

Although the small MCO sample sizes for the Non-BH Survey preclude findings of statistically significant associations between health plan and favorability rating, descriptive data provide notable findings with regard to survey items with statewide favorability proportions at or below 50%. Of note, most of these survey items did show significant associations between provider type and favorability proportions (**Appendix A**).

Applying the 50% or lower favorability proportion criterion, the provider education domain showed several opportunities for improvement. Cultural competency training showed the lowest favorability proportion (33.8%), followed by health plan-provided educational training (40.9%). The favorability proportion for provider orientation and training was also low at (47.0%). Furthermore, the statewide favorability proportion was 44.6% for the number of

specialists in the network and was 45.3% for availability of medical specialists, thus highlighting opportunities to improve access to and availability of specialist providers. Favorability proportions pertinent to care coordination and case management suggest additional opportunities to improve quality of care. Coordination of alcohol and/or substance use services was favorably rated by only 45.8% of Non-BH Survey responders, and coordination of rehabilitation services was rated favorably by 46.9%; these findings shine a spotlight on opportunities to improve care for enrollees with substance use disorders by enhanced coordination between addiction specialists and PCPs, as well as physical health specialists.

Applying the 50% criterion to the BH provider-stratified analysis highlights the following targeted opportunities for improvement:

- The addiction services outpatient facilities showed the most survey items with 50% or less favorability proportions, and included the following survey items: Non-Claims staff accuracy and helpfulness; provider orientation and training process, educational trainings by plan, web-based provider portal and HEDIS education, UM sharing of review criteria for adverse determinations, peer-to-peer review process, and the UM process overall. Targeted efforts to improve individual BH provider satisfaction should address HEDIS education and the plan call center service.
- Outpatient therapy facilities showed 50% or less satisfaction with the following survey items: HEDIS education and satisfaction with the plan call center service, as well as several care coordination survey items, including clarity of the plan's coordination of medical health services, clarity of the plan's coordination of BH care services, and timeliness and accuracy of the plan's coordination of medical health services.
- Psychiatric and inpatient residential facilities showed 50% or lower favorability ratings for timeliness of the plan's coordination of BH care services. Targeted efforts to improve substance use residential facilities' satisfaction should address clarity of the plan's coordination of medical and BH care services, as well as accuracy of the plan's coordination of BH care services.

## Limitations

The low response rates and consequent small sample sizes limit the power of this study to detect statistically significant differences among health plans, particularly for the Non-BH Survey sample. The COVID-19 crisis likely played a role in the low response rate; however, survey response rates have declined in recent years. Some of the reluctance to completing surveys may be linked to privacy issues and concerns about how the information will be used, as well as time constraints. Also, the rise in Internet-based surveys has resulted in "over-surveying," which has crowded out mail surveys. Therefore, any generalizations from the findings reported herein should be considered in light of the less than 6% response rate observed, even though the response sample was sufficiently large to conduct the analyses. In addition, it is important to address the low denominators for individual questions. As such, rates for items with denominators of less than 20 responses should be interpreted with caution.

Disclaimer Statement: Due to the low response rate for both the Behavioral Health Survey (5.8%) and the Non-Behavioral Health Survey (2.0%), the margin of error exceeded the targeted +/- 5 percentage point margin of error for both surveys. Therefore, findings should be interpreted with caution with regard to the exactness of the favorability proportions, and thus, the precision of the sample estimates of the true population proportions. Comparison of current to prior year overall satisfaction proportions similarly calls for cautious interpretation. Last year's survey response rates were slightly less than 15% (data not shown). The reduction in survey response rates from the prior year occurred despite implementing several approaches to improve response rates, such as reducing the number of survey items and restricting the sample frame to providers with an active claims history. As with last year's survey, a second wave of mailings was undertaken; however, contrary to the response rate boost this action generated last year, this year's second mailing coincided with Governor John Bel Edwards' stay-at-home order in response to the COVID-19 pandemic. Consequently, it is highly likely that providers' increased clinical demands minimized their time available for survey completion.

Despite these limitations, the Behavioral Health Survey sample was sufficient to show variability among MCOs, particularly for survey items with statistically significant associations with MCO favorability ratings; these findings are highlighted in the preceding **Discussion** section. Further, sample size was sufficient to show variability between the individual BH providers and the combined group of PCPs and specialists for survey items with statistically significant associations with these provider type favorability ratings; these findings are also highlighted in the preceding **Discussion**

section. In addition, the **Discussion** section highlights descriptive statistics for Non-Behavioral Health Survey items with statewide favorability ratings below 50%. The recommendations are based upon these actionable data, and so, provide evidence-based guidance for MCOs to improve provider satisfaction. In recognition of front line providers' limited non-clinical time, future provider surveys will incorporate improvements to streamline survey design and enhance the survey completion process.

## Recommendations

The survey findings highlight opportunities for health plans to improve provider education, particularly cultural competency training, as well as the provider portal, access to and availability of medical specialists, and coordination of care and case management, particularly for members with substance use disorder. If providers perceive health plans as partners that can help them to case-manage patients with complex needs and connect them to specialists when needed, both provider and member satisfaction would be enhanced. In consideration of health plan performance with regard to provider education, health plans should engage in discussions with providers to gain insights for improved cultural competency training, as well as provider-identified educational needs. The Healthy Louisiana Performance Improvement Project for Improving Rates for (1) Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment (IET) and (2) Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence is an example of a current opportunity for such collaboration.

One strategy to increase the response rate is to use a shorter survey. A systematic review of randomized controlled trials of strategies to improve responses to postal questionnaires found that the odds of survey response were 86% greater when short questionnaires were used (Edwards et al., 2002). Another strategy is to enhance the content so that it is of greater interest to the survey participant (Edwards et al., 2002). MCO provider relations staff might consider meeting with providers to solicit input regarding survey items of most interest. Another consideration is that the exclusion of the prior year's individual provider survey responders limited the pool of willing survey responders. Omitting this exclusion in future surveys would enhance the representativeness of the sample and, possibly, contribute to an improved response rate, as well.

Another approach for future consideration would be to conduct a streamlined, online survey using SurveyMonkey, or similar software. A study of response rates in surveys of pre-recruited U.S. PCPs within networks that responded to 3-6 surveys found that the response rate was consistently higher for internet compared to mailed questionnaires (Brtnikova et al., 2018). Although there does not appear to be a repository of provider email addresses readily available, in the future, the collection of email addresses should become more commonplace, and an online survey may prove to yield a higher response rate. Online survey formats could also be shared via provider portals by providing a link for providers to easily access and complete the survey. This would provide a convenient and personalized way to contact participants prior to sending the survey; personalized contact was found to increase the odds of response by 54% (Edwards et al., 2002).

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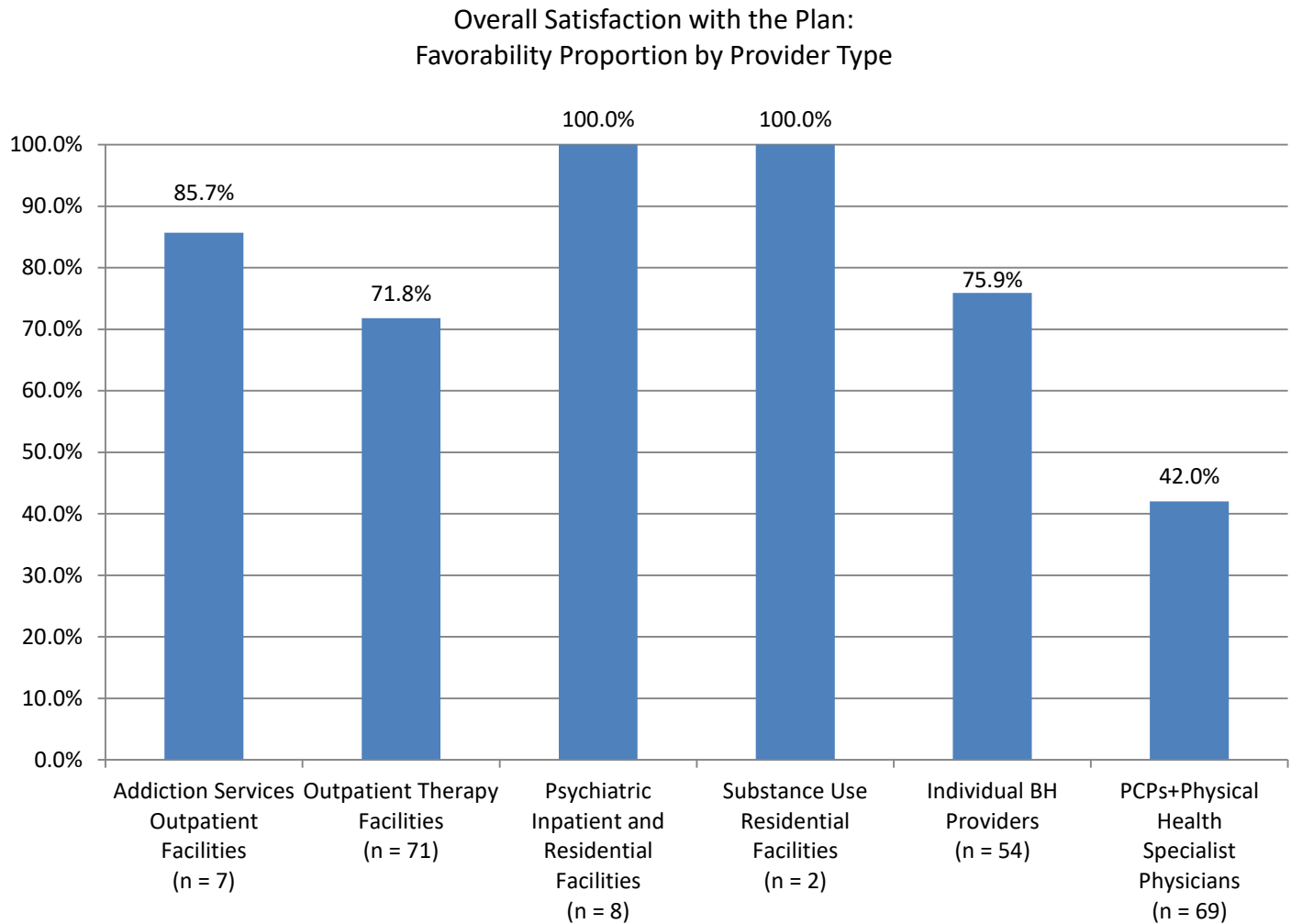
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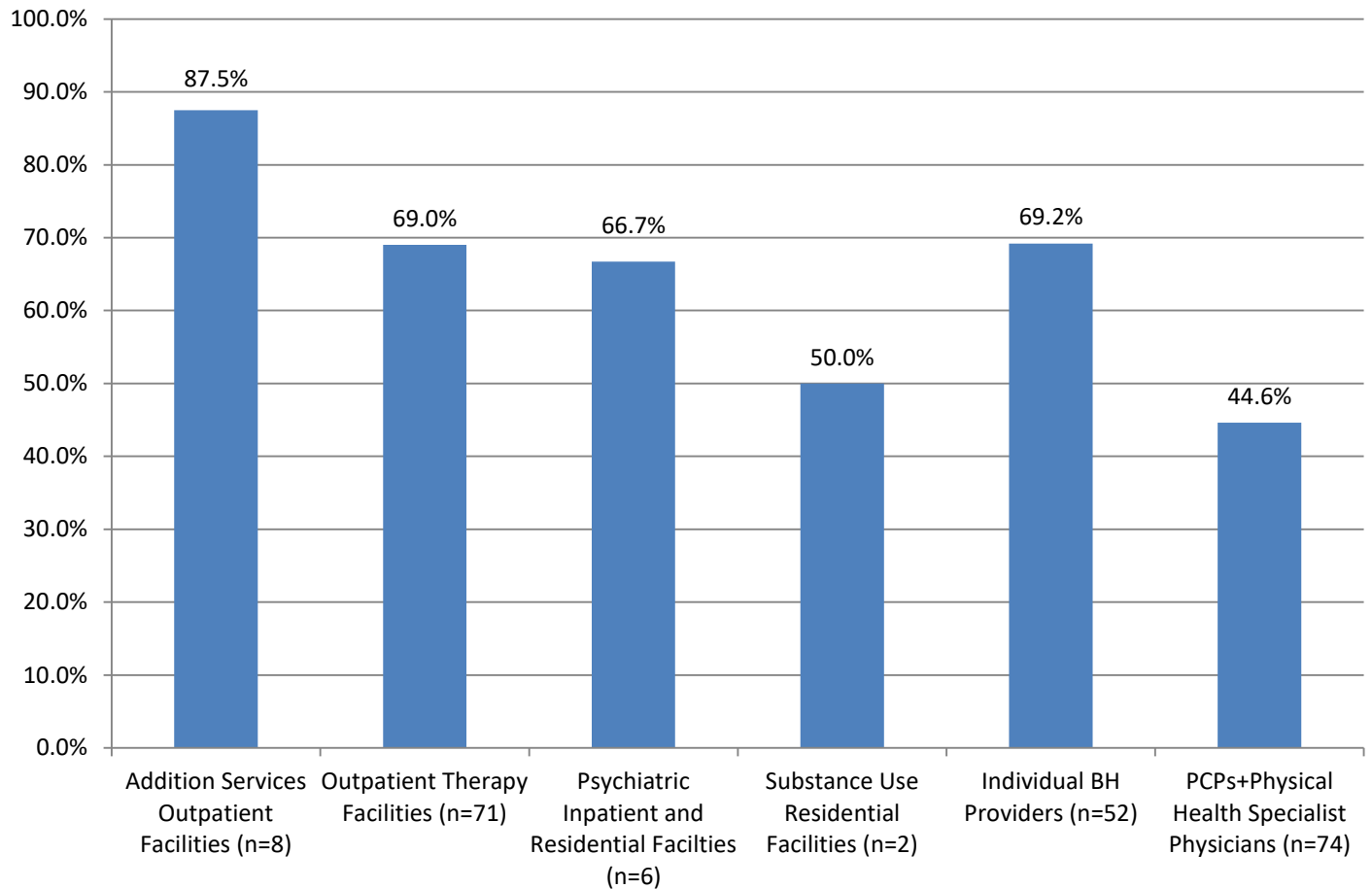
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## Appendix A: Key Findings Dashboard



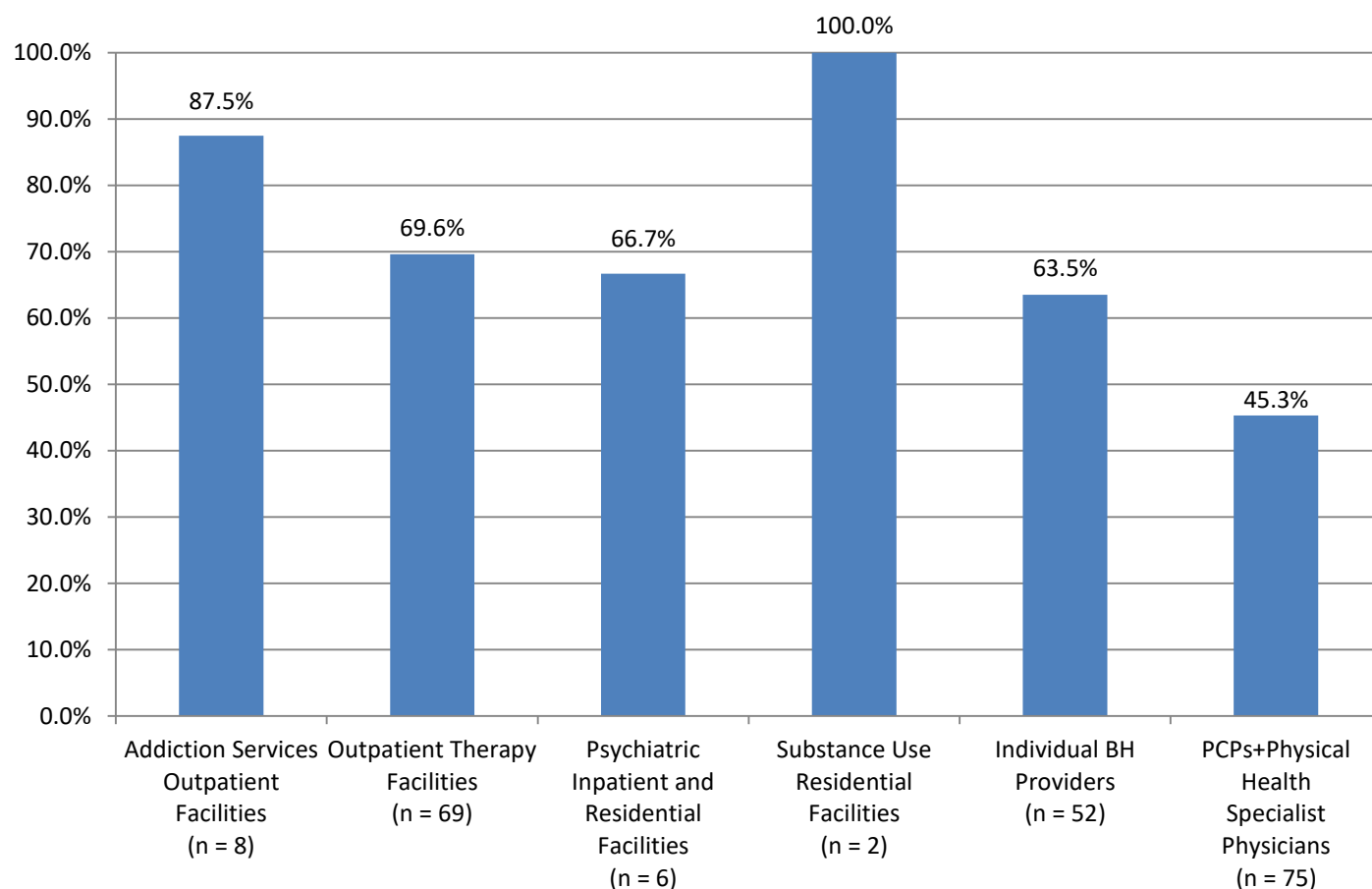
**Figure A1: Overall Satisfaction with the Plan: Favorability Proportion by Provider Type.** Favorability proportion for overall satisfaction with the plan for addiction services outpatient facilities (n = 7), outpatient therapy facilities (n = 71), psychiatric inpatient and residential facilities (n = 8), substance use residential facilities (n = 2), individual behavioral health (BH) providers (n = 54), and primary care providers (PCPs) and physical health specialist physicians (n = 69).

### Number of Specialists in the Provider Network: Favorability Proportion by Provider Type



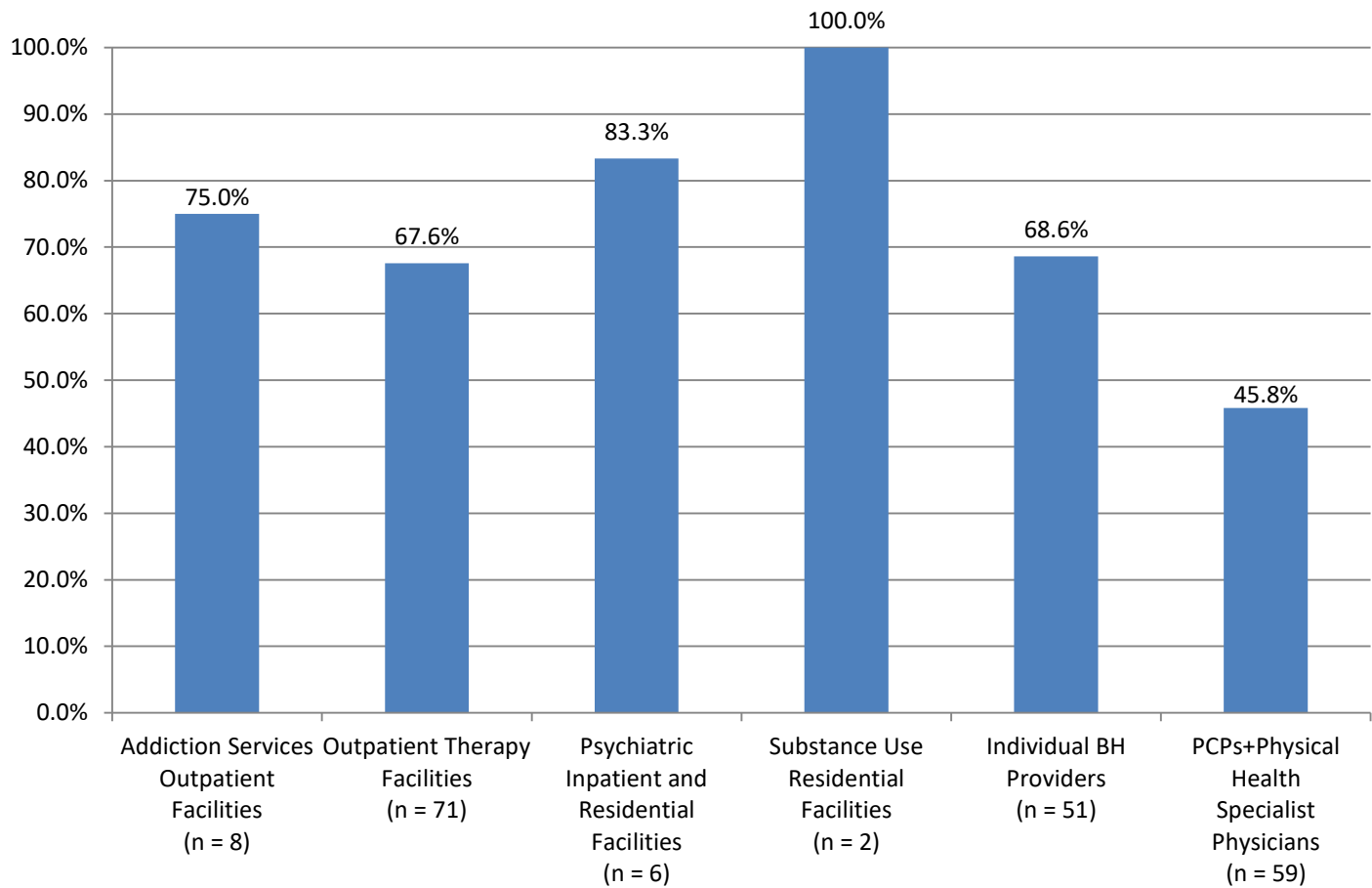
**Figure A2: Number of Specialists in the Provider Network: Favorability Proportion by Provider Type.** Favorability proportion for number of specialists in the provider network for addition services outpatient facilities (n = 8), outpatient therapy facilities (n = 71), psychiatric inpatient and residential facilities (n = 6), substance use residential facilities (n = 2), individual behavioral health (BH) providers (n = 52), and primary care providers (PCPs) and physical health specialist physicians (n = 74).

### Availability of Medical Specialists: Favorability Proportion by Provider Type



**Figure A3: Availability of Medical Specialists: Favorability Proportion by Provider Type.** Favorability proportion for availability of medical specialists for addiction services outpatient facilities (n = 8), outpatient therapy facilities (n = 69), psychiatric inpatient and residential facilities (n = 6), substance use residential facilities (n = 2), individual behavioral health (BH) providers (n = 52), and primary care providers (PCPs) and physical health specialist physicians (n = 75).

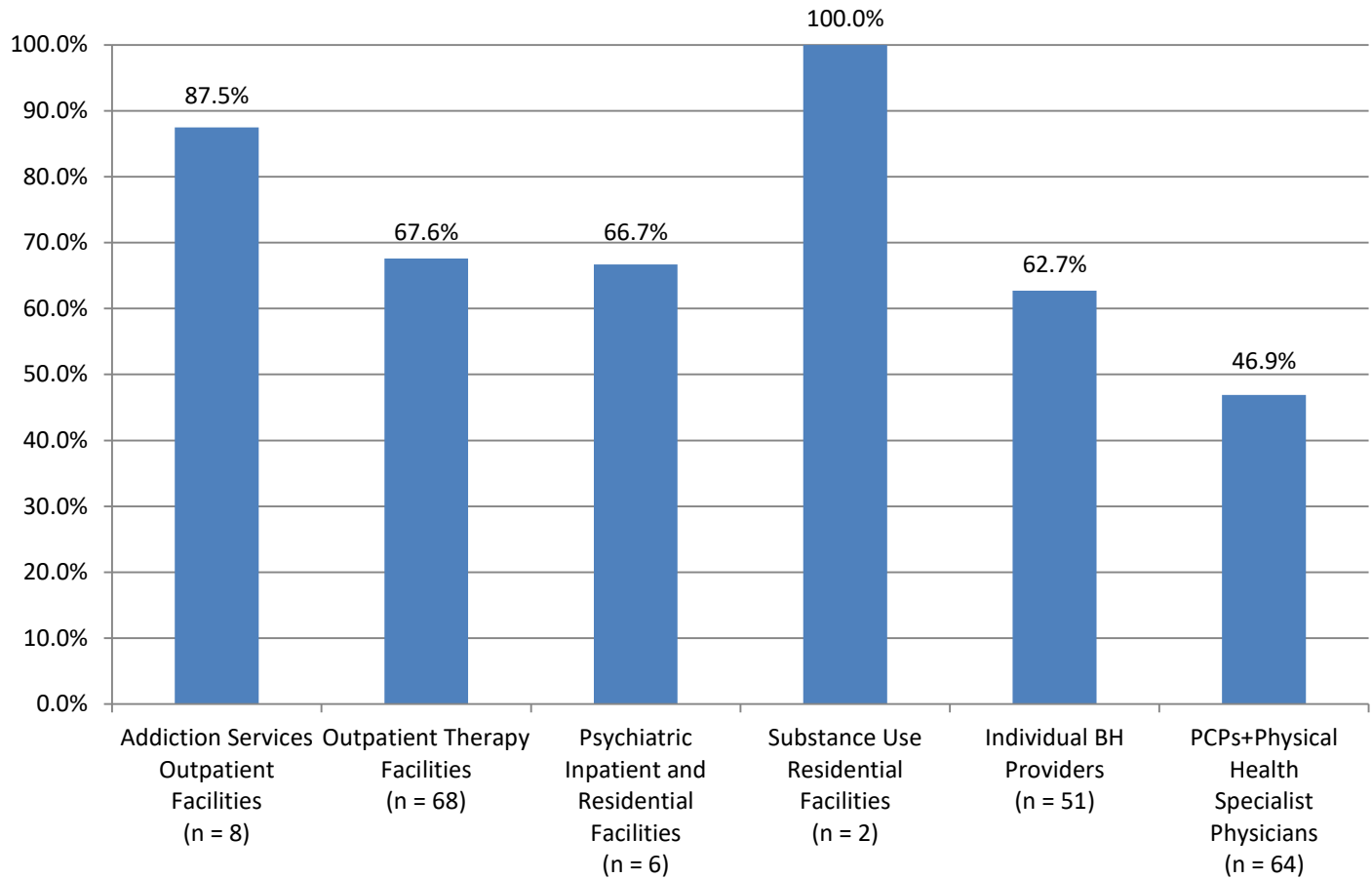
### Ability to Coordinate Alcohol and/or Substance Use Services: Favorability Proportion by Provider Type



**Figure A4: Ability to Coordinate Alcohol and/or Substance Use Services: Favorability Proportion by Provider Type.** Favorability proportion for ability to coordinate alcohol and/or substance use services for addiction services outpatient facilities (n = 8), outpatient therapy facilities (n = 71), psychiatric inpatient and residential facilities (n = 6), substance use residential facilities (n = 2), individual behavioral health (BH) providers (n = 51), and primary care providers (PCPs) and physical health specialist physicians (n = 59).

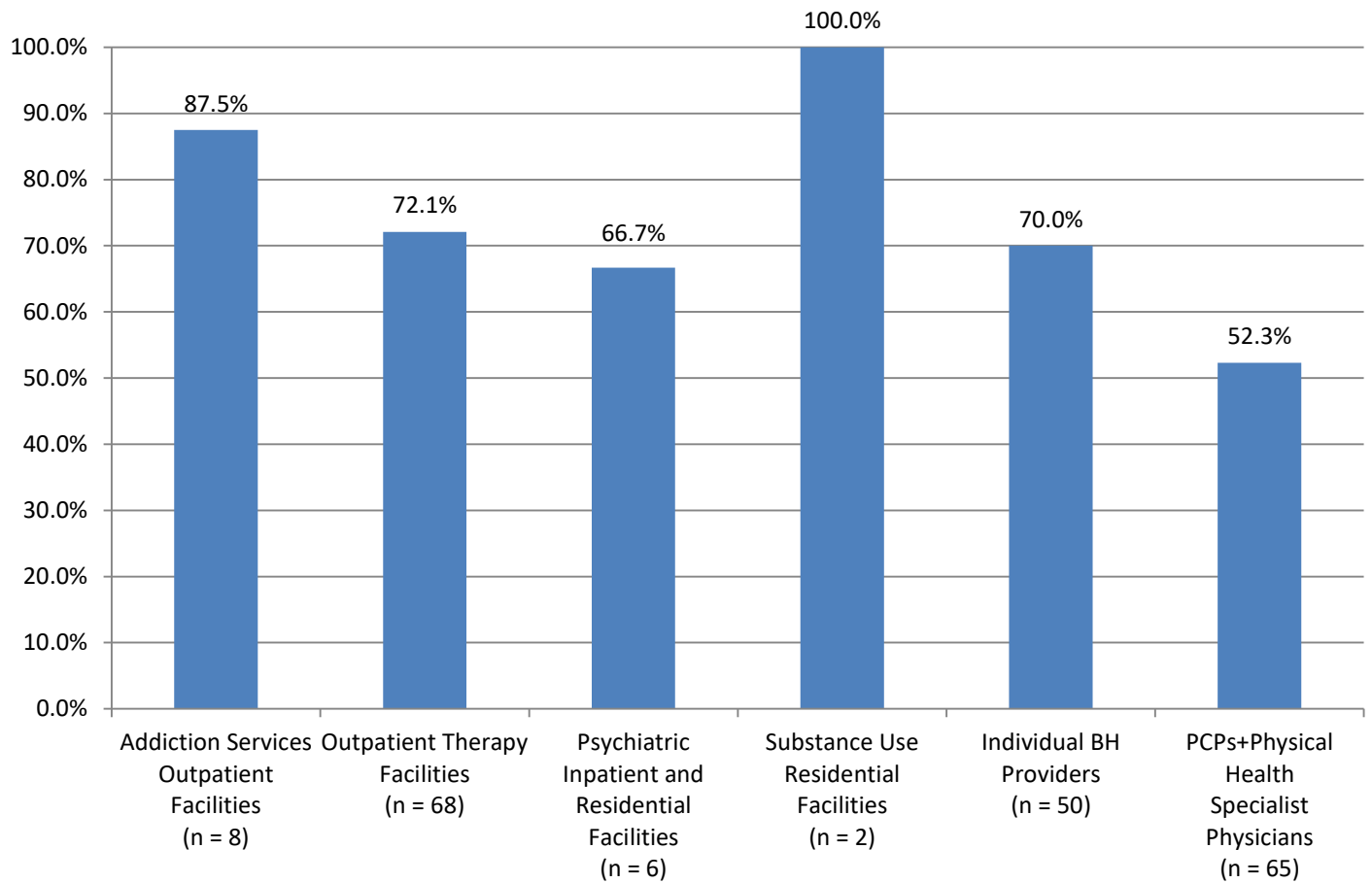


### Ability to Coordinate Rehabilitation Services: Favorability Proportion by Provider Type



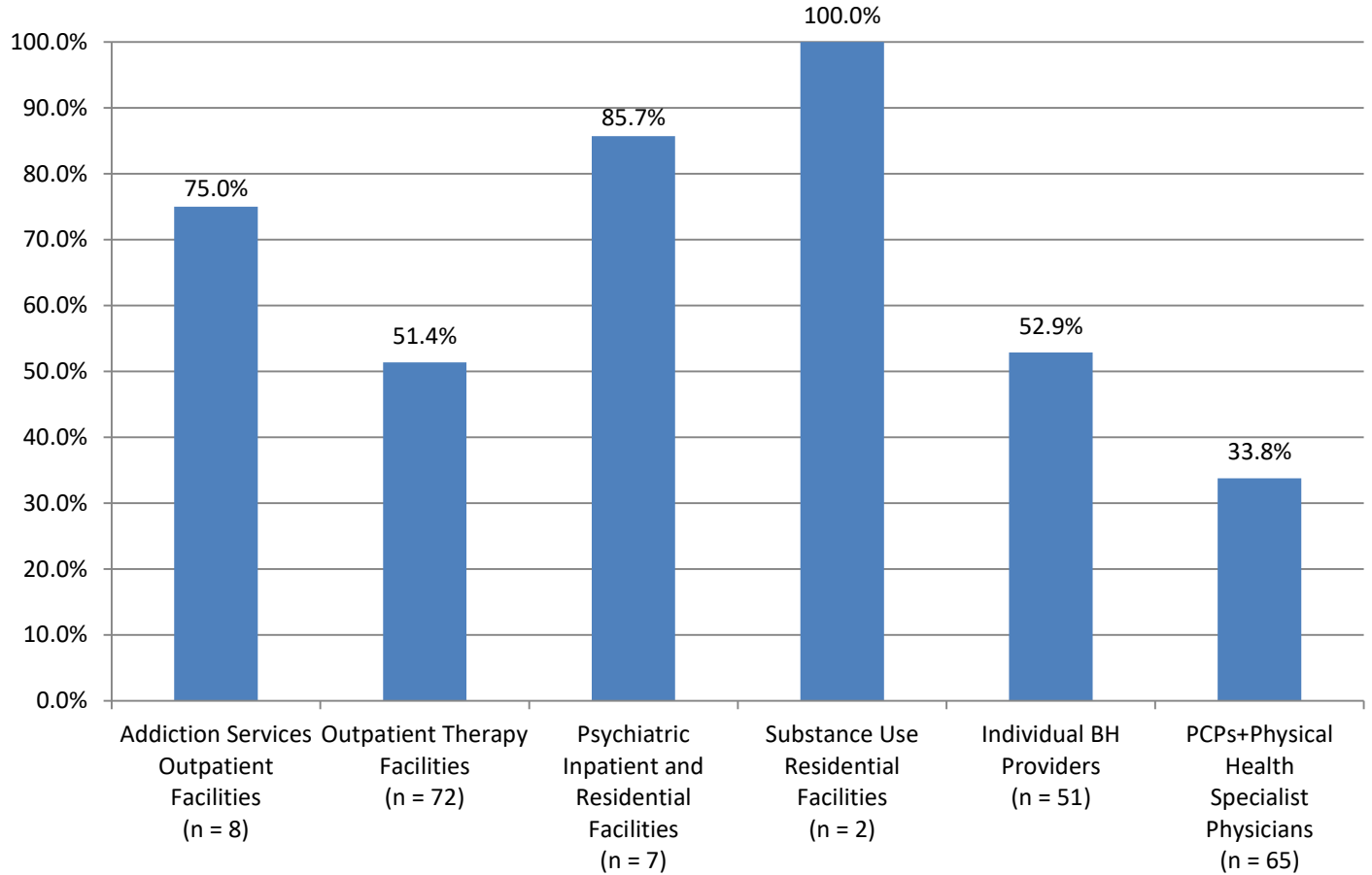
**Figure A5: Ability to Coordinate Rehabilitation Services: Favorability Proportion by Provider Type.** Favorability proportion for ability to coordinate rehabilitation services for addiction services outpatient facilities (n = 8), outpatient therapy facilities (n = 68), psychiatric inpatient and residential facilities (n = 6), substance use residential facilities (n = 2), individual behavioral health (BH) providers (n = 51), and primary care providers (PCPs) and physical health specialist physicians (n = 64).

### Ability to Arrange for Non-emergency Hospital Admissions: Favorability Proportion by Provider Type



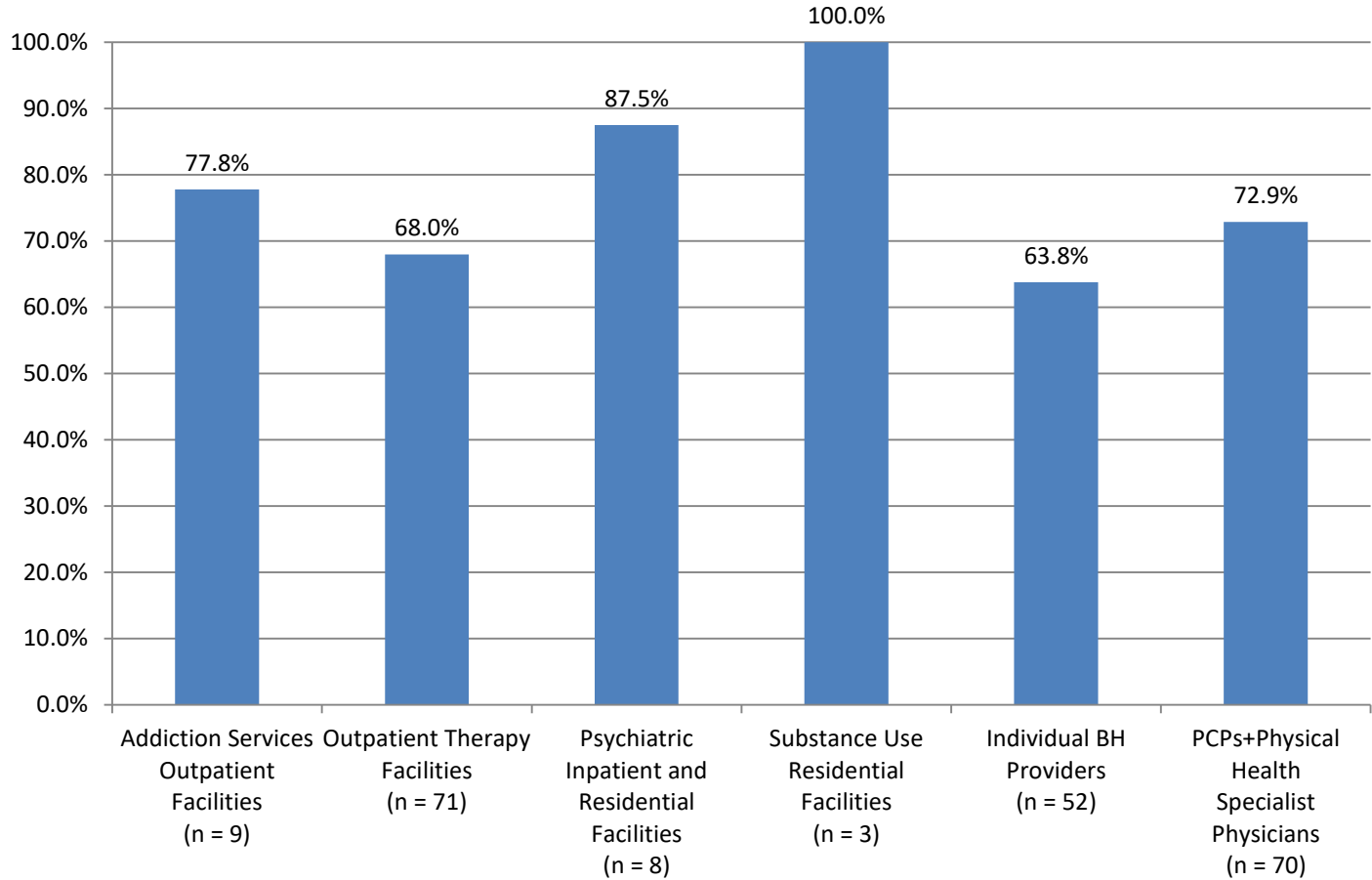
**Figure A6: Ability to Arrange for Non-emergency Hospital Admissions: Favorability Proportion by Provider Type.** Favorability proportion for ability to arrange for non-emergency hospital admissions for addiction services outpatient facilities (n = 8), outpatient therapy facilities (n = 68), psychiatric inpatient and residential facilities (n = 6), substance use residential facilities (n = 2), individual behavioral health (BH) providers (n = 50), and primary care providers (PCPs) and physical health specialist physicians (n = 65).

Cultural Competency Training:  
Favorability Proportions by Provider Type



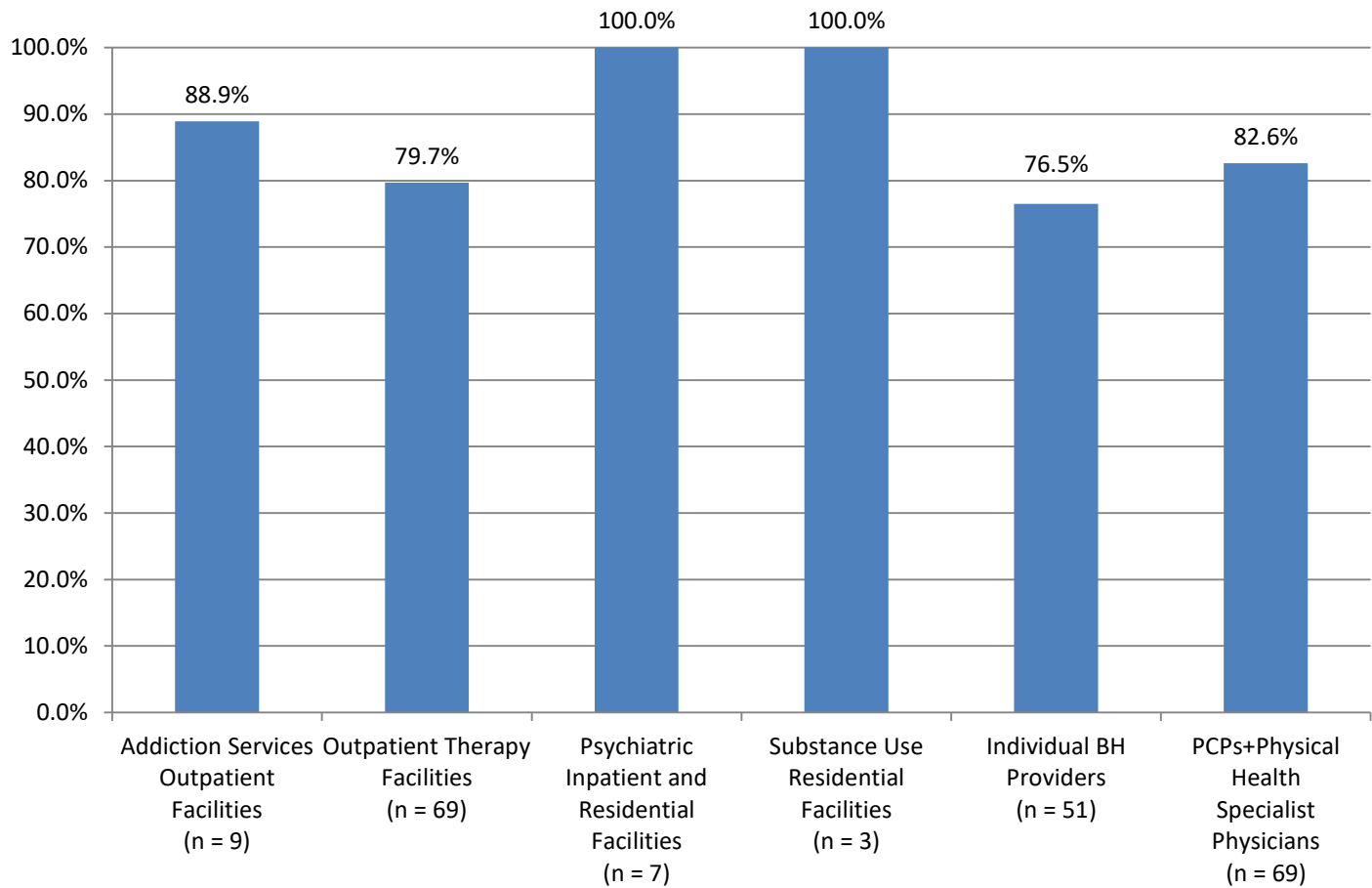
**Figure A7: Cultural Competency Training: Favorability Proportion by Provider Type.** Favorability proportion for cultural competency training for addiction services outpatient facilities (n = 8), outpatient therapy facilities (n = 72), psychiatric inpatient and residential facilities (n = 7), substance use residential facilities (n = 2), individual behavioral health (BH) providers (n = 51), and primary care providers (PCPs) and physical health specialist physicians (n = 65).

### Overall Experience with the Provider Portal: Favorability Proportion by Provider Type



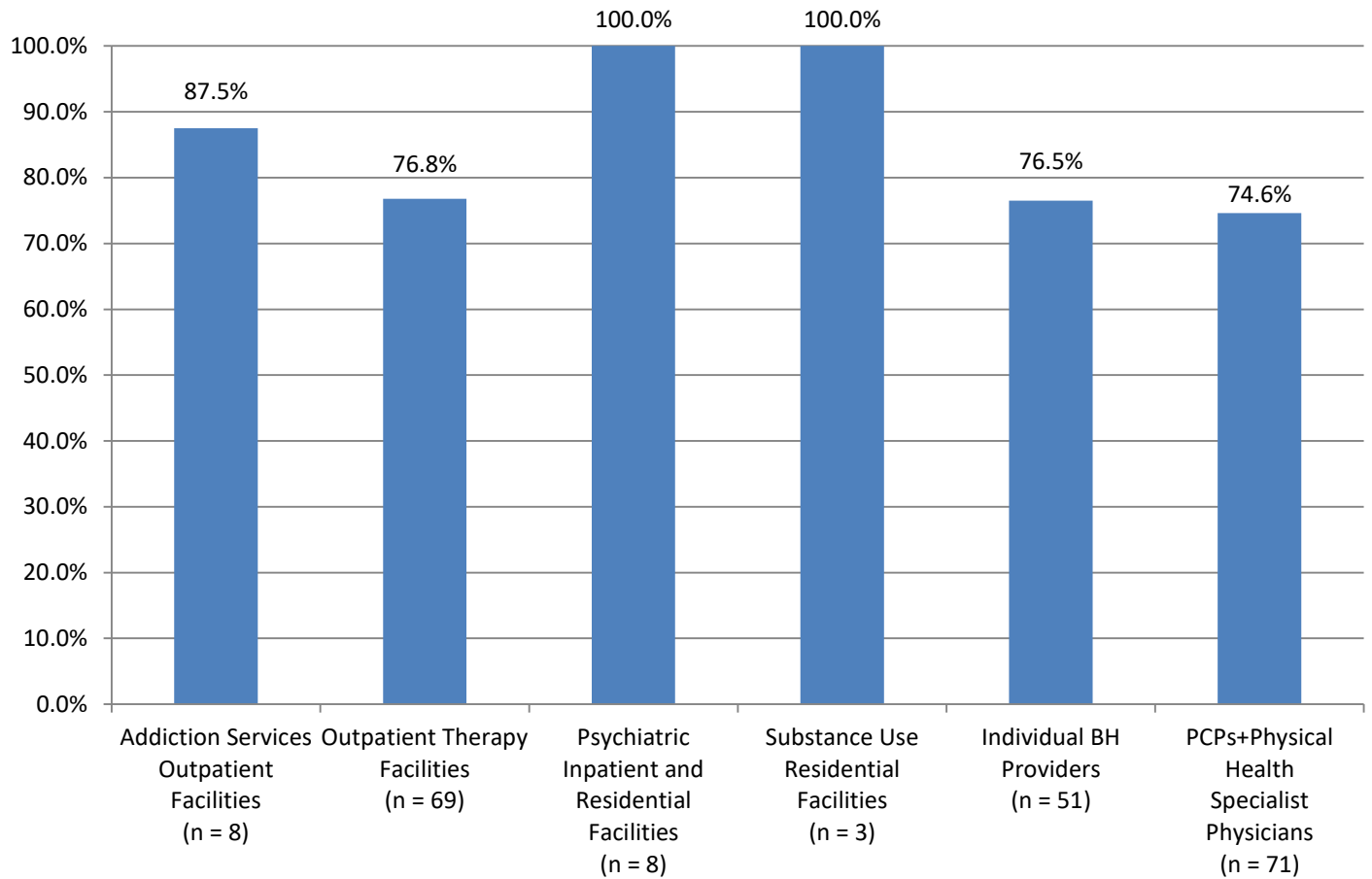
**Figure A8: Overall Experience with the Provider Portal: Favorability Proportion by Provider Type.** Favorability proportion for overall experience with the provider portal for addiction services outpatient facilities (n = 9), outpatient therapy facilities (n = 71), psychiatric inpatient and residential facilities (n = 8), substance use residential facilities (n = 3), individual behavioral health (BH) providers (n = 52), and primary care providers (PCPs) and physical health specialist physicians (n = 70).

Finding Member Eligibility Information:  
Favorability Proportion by Provider Type



**Figure A9: Finding Member Eligibility Information: Favorability Proportion by Provider Type.** Favorability proportion for finding member eligibility information for addiction services outpatient facilities (n = 9), outpatient therapy facilities (n = 69), psychiatric inpatient and residential facilities (n = 7), substance use residential facilities (n = 3), individual behavioral health (BH) providers (n = 51), and primary care providers (PCPs) and physical health specialist physicians (n = 69).

### Finding Claim Payment Information: Favorability Proportion by Provider Type



**Figure A10: Finding Claim Payment Information: Favorability Proportion by Provider Type.** Favorability proportion for finding claim payment information for addiction services outpatient facilities (n = 8), outpatient therapy facilities (n = 69), psychiatric inpatient and residential facilities (n = 8), substance use residential facilities (n = 3), individual behavioral health (BH) providers (n = 51), and primary care providers (PCPs) and physical health specialist physicians (n = 71).

## Appendix B: Survey Instruments

Behavioral Health Facilities and Individual Providers		
Domain	Item #	Question
About You	1	Please indicate the service setting in which you practice
	2	Please indicate the area of medicine or service in which you practice.
	3	How many physicians are in your practice/agency/facility?
	4	How many Licensed Mental Health Practitioners are in your practice/agency/facility?
	5	What portion of your managed care volume is represented by [PLAN]?
	6	How many years have you been in this practice?
	7	Please indicate who is completing this survey
Provider Enrollment	8	Please rate your satisfaction with the provider enrollment contracting process
Provider Resources	9	Please rate the quality and effectiveness of the following [PLAN] materials <ul style="list-style-type: none"> <li>- Provider Manuals</li> <li>- Provider Newsletter</li> <li>- General provider communications</li> <li>- Provider directory</li> </ul>
	10	Based on your practice's interactions with [PLAN] non-claims staff, please rate your experience with the following: <ul style="list-style-type: none"> <li>- Knowledge of staff responses to telephone inquiries</li> <li>- Accuracy of staff responses to telephone inquiries</li> <li>- Helpfulness of staff responses to telephone inquiries</li> </ul>
	11	Based on your practice's interactions with [PLAN] claims staff, please rate your experience with the following <ul style="list-style-type: none"> <li>- Knowledge of staff responses to telephone inquiries</li> <li>- Accuracy of staff responses to telephone inquiries</li> <li>- Helpfulness of staff responses to telephone inquiries</li> <li>- Timeliness of staff in resolving claims payment issues</li> </ul>

Individual PCPs and Specialists		
Domain	Item #	Question
About You	1	Please indicate the area of medicine or service in which you practice
	2	How many physicians are in your practice/agency
	3	What portion of your managed care volume is represented by [PLAN]?
	4	Please indicate who is completing this survey.
Provider Resources	5	Please rate your satisfaction with the provider enrollment contracting process
	6	Please rate the quality and effectiveness of the following [PLAN] materials <ul style="list-style-type: none"> <li>- Provider Manuals</li> <li>- Provider Newsletter</li> <li>- General provider communications</li> <li>- Provider directory</li> </ul>
	7	Based on your practice's interactions with [PLAN] non-claims staff, please rate your experience with the following: <ul style="list-style-type: none"> <li>- Accuracy of staff responses</li> <li>- Helpfulness of staff responses</li> </ul>
	8	Based on your practice's interactions with [PLAN] claims staff, please rate your experience with the following <ul style="list-style-type: none"> <li>- Knowledge of staff responses to telephone inquiries</li> <li>- Accuracy of staff responses to telephone inquiries</li> <li>- Helpfulness of staff responses to telephone inquiries</li> <li>- Timeliness of staff in resolving claims payment issues</li> </ul>

Behavioral Health Facilities and Individual Providers		
Domain	Item #	Question
	12	Please rate the [PLAN] Provider Portal in the following service areas <ul style="list-style-type: none"> <li>- Finding member eligibility information</li> <li>- Finding claim payments/invoices information</li> <li>- Finding the member Gaps in Care Report</li> <li>- Submitting prior authorization requests and receiving determinations</li> <li>- Accessing plan reports</li> <li>- Overall experience with provider portal</li> </ul>
	13	Overall, how satisfied are you with the communication you receive from [PLAN]?
Access to Linguistic Assistance	14	Does your practice use any of [PLAN] interpreter services for non-English speaking patients?
	15	How satisfied are you with the [PLAN] language assistance service?
Provider Education and Training	16	How satisfied are you with the following: <ul style="list-style-type: none"> <li>- Provider orientation and training process</li> <li>- Educational trainings</li> <li>- Web-based provider portal</li> <li>- Cultural Competency training materials and sessions</li> <li>- Accessibility of state-required behavioral health training</li> <li>- Education provided to you on data collection and reporting to maximize your HEDIS performance</li> </ul>
Claims Processing/Claims Reimbursement/Finance Issues/Resolution to Provider Complaints/Disputes	17	Please rate your experience with the performance of [PLAN] in the following areas <ul style="list-style-type: none"> <li>- Timeliness of claims processing</li> <li>- Accuracy of claims processing</li> <li>- Claims reimbursement fees with your contract rates</li> <li>- Timeliness of claims appeals process</li> <li>- Resolution of claims payment problems or disputes</li> <li>- Communication of the outcome of claims appeals</li> <li>- Overall complaint and appeals process</li> </ul>

Individual PCPs and Specialists		
Domain	Item #	Question
	9	Please rate the [PLAN] Provider Portal in the following service areas. <ul style="list-style-type: none"> <li>- Finding member eligibility information</li> <li>- Finding claim payments/invoices information</li> <li>- Finding the member Gaps in Care Report</li> <li>- Submitting prior authorization requests and receiving determinations</li> <li>- Accessing plan reports</li> <li>- Overall experience with provider portal</li> </ul>
	10	Overall, how satisfied are you with the communication you receive from [PLAN]?
	11	Does your practice use any of [PLAN] interpreter services for non-English speaking patients?
	12	If so, how satisfied are you with [PLAN] language assistance service?
	13	How satisfied are you with the following: <ul style="list-style-type: none"> <li>- Provider orientation and training process</li> <li>- Educational trainings by [PLAN]</li> <li>- Web-based provider portal</li> <li>- Cultural Competency training materials and sessions</li> </ul>
Claims Processing/Claims Reimbursement/Finance Issues/Resolution to Provider Complaints/Disputes	14	Please rate your experience with the performance of [PLAN] in the following areas <ul style="list-style-type: none"> <li>- Timeliness of claims processing</li> <li>- Accuracy of claims processing</li> <li>- Claims reimbursement fees with your contract rates</li> <li>- Complaint and appeals process</li> <li>- Timeliness of complaint and appeals process</li> <li>- Resolution of claims payment problems or disputes</li> <li>- Communication of the outcome of claims appeals</li> </ul> How would you describe the education provided by [PLAN] on data collection and reporting to maximize your HEDIS performance?



Behavioral Health Facilities and Individual Providers		
Domain	Item #	Question
Network / Coordination of Care / Case Management	18	<p>Please rate [PLAN] in following service areas:</p> <ul style="list-style-type: none"> <li>- The number of specialists in the [PLAN] provider network</li> <li>- Availability of medical specialists to accommodate your referrals within a reasonable number of days</li> <li>- Coordination of step-down services</li> <li>- Ability to address the needs of members with special health care needs</li> <li>- Ability to coordinate alcohol and/or substance use services, inclusive of residential or inpatient, when needed</li> <li>- Ability to coordinate rehabilitation services when needed</li> <li>- Ability to arrange for non-emergency hospital admissions when needed</li> <li>- Ability to make referrals to specialists and ancillary services when needed</li> <li>- Ability to prescribe medications that provide for the best possible care</li> </ul>
	19	<p>Please rate your experience with [PLAN] coordination of medical health care services in the following areas:</p> <ul style="list-style-type: none"> <li>- Timeliness</li> <li>- Accuracy</li> <li>- Clarity</li> <li>- Sufficiency of information to coordinate care</li> </ul>
	20	<p>Please rate your experience with [PLAN] coordination of behavioral health care services in the following areas:</p> <ul style="list-style-type: none"> <li>- Timeliness</li> <li>- Accuracy</li> <li>- Clarity</li> <li>- Sufficiency of information to coordinate care</li> </ul>
No-Show Appointments	21	Do you have an issue with members not showing up for their appointments?
	22	What method do you use to remind members of their appointments?

Behavioral Health Facilities and Individual Providers		
Domain	Item #	Question

Individual PCPs and Specialists		
Domain	Item #	Question
Network / Coordination of Care / Case Management	15	<p>Please rate [PLAN] in the following service areas:</p> <ul style="list-style-type: none"> <li>- The number of specialists in the [PLAN] provider network</li> <li>- Availability of medical specialists to accommodate your referrals within a reasonable number of days</li> <li>- Ability to coordinate alcohol and/or substance use services, inclusive of residential or inpatient, when needed</li> <li>- Ability to coordinate rehabilitation services when needed</li> <li>- Ability to arrange for non-emergency hospital admissions when needed</li> <li>- Ability to make referrals to specialists and ancillary services when needed</li> <li>- Ability to prescribe medications that provide for the best possible care</li> </ul>
No-Show Appointments	16	Do you have an issue with members not showing up for their appointments?
	17	Do you remind members prior to their appointments to minimize no-show appointments?
	18	What method do you use to remind members of their appointments?

Individual PCPs and Specialists		
Domain	Item #	Question

Customer Service/Provider Relations	23	Do you have a Provider Relations representative from [PLAN] assigned to your organization?
	24	Please rate your experience with the following: <i>- Provider Relations representative's ability to answer questions and resolve problems</i> <i>- Responsiveness and courtesy of your Provider Relations representative</i> <i>- Access to Provider Relations staff</i> <i>- Helpfulness of Provider Relations staff</i>
Utilization Management	25	Please rate your experience with the following <i>- Process of obtaining pre-certification/referral/authorization information</i> <i>- Timeliness of obtaining pre-certification/referral/authorization information</i> <i>- Extent to which UM staff share review criteria and reasons for adverse determinations</i> <i>- Peer to peer</i> <i>- Access to Case/Care Managers from this health plan</i> <i>- Utilization Management process overall</i>
Call Center	26	Please rate overall satisfaction with [PLAN] call center service
Overall Satisfaction	27	Please rate overall satisfaction with [PLAN]
	28	Please rank plans from satisfied to dissatisfied <i>- Aetna</i> <i>- AmeriHealth Caritas</i> <i>- Healthy Blue Louisiana</i> <i>- Louisiana Healthcare Connections</i> <i>- United Healthcare</i> Would you recommend [PLAN] to other practitioners? What can [PLAN] do to improve its service to your organization or better meet your needs?

Customer Service/Provider Relations	19	Do you have a Provider Relations representative from [PLAN] assigned to your organization?
	20	Please rate your experience with the following: <i>- Provider Relations representative's ability to answer questions and resolve problems</i> <i>- Provider Relations representative's responsiveness and courtesy</i> <i>- Access to Provider Relations staff</i> <i>- Helpfulness of Provider Relations staff</i>
Utilization Management	21	Please rate your experience with the following <i>- Process of obtaining pre-certification/referral/authorization information</i> <i>- Timeliness of obtaining pre-certification/referral/authorization information</i> <i>- Extent to which UM staff share review criteria and reasons for adverse determinations</i> <i>- Peer to peer process</i> <i>- Utilization Management process overall</i>
Call Center	22	Please rate your overall satisfaction with [PLAN] call center service
Overall Satisfaction	23	Please rate overall satisfaction with [PLAN]
	24	Please rank plans from satisfied to dissatisfied (Leave blank for plans in whose networks you do not participate) <i>- Aetna</i> <i>- AmeriHealth Caritas</i> <i>- Healthy Blue Louisiana</i> <i>- Louisiana Healthcare Connections</i> <i>- United Healthcare</i>
	25	Would you recommend [PLAN] to other practitioners?
	26	What can [PLAN] do to improve its service to your organization or better meet your needs?