2013 Provider Satisfaction Report



Louisiana Healthcare Connections

Project Number: 916007



Introduction

Your Account Executive is Steve Brightwell (770-978-3173 ext. 1353), and your Project Manager is Melisa Bradica (770-978-3173 ext. 1335). Should you have any questions or comments regarding any aspect of the survey or reporting process, please feel free to call either your Account Executive or Project Manager. You may also contact Joy Jones, Manager, Project Management, at 770-978-3173, ext. 1319.

NCQA Standard UM 11 (satisfaction with the Utilization Management Process) currently directs that at least annually, managed care organizations gather information regarding provider satisfaction with the UM process. The 2013 TMG Provider Satisfaction Survey supports this requirement.

The Provider Satisfaction Survey targets providers to measure their satisfaction with Louisiana Healthcare Connections. For comparison purposes, results are presented by Summary Rates. The Summary Rate is the sum of the proportion of respondents who selected the most positive response options ('Well above average' or 'Somewhat above average;' 'Yes;' and 'Completely satisfied' or 'Somewhat satisfied') for the attribute.

Composite scores are calculated by taking the average Summary Rates of the attributes in the specified section. The following composites are included in the Louisiana Healthcare Connections survey:

- ✓ Overall Satisfaction
- ☑ All Other Plans (Comparative Rating)
- ☑ Finance Issues
- ☑ Utilization and Quality Management
- ☑ Network/Coordination of Care
- ✓ Pharmacy
- ☑ Health Plan Call Center Service Staff
- Provider Relations

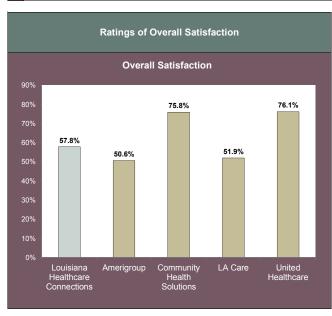
Chart 1 highlights key results from Louisiana Healthcare Connections' Provider Satisfaction Survey.

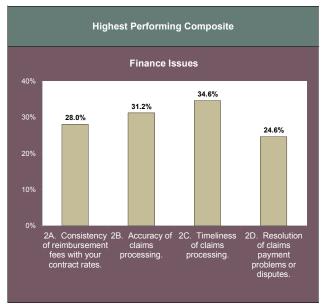
Chart 1

Provider Satisfaction Report Highlights

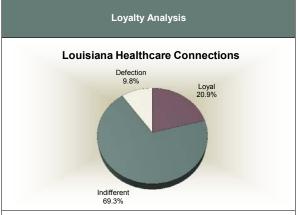
Louisiana Healthcare Connections

			2013	2013 Mea	n Scores**	2012 TMG B.o.B.***	
	Highest and Lowest Performing Questions	n*	SRS*	Louisiana	TMG B.o.B.	Medicaid	Aggregate
S	Highest Scoring Questions						
Score	8A. Would you recommend Louisiana Healthcare Connections to other physicians' practices?	166	72.3%	NA	NA	92.0%	91.9%
ate .	8B. Please rate your overall satisfaction with Louisiana Healthcare Connections.	180	57.8%	3.41	4.14	78.0%	78.5%
ary Ra	7B. Provider Relations representative's ability to answer questions and resolve problems.	99	35.4%	3.32	4.10	72.1%	68.8%
nm	Lowest Scoring Questions						
Sun	5C. Variety of branded drugs on the formulary.	155	15.5%	2.65	3.36	35.4%	37.0%
	4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.	109	14.7%	2.99	NA	NA	NA
	5A. Consistency of the formulary over time.	156	14.1%	2.81	3.43	37.1%	39.9%





Priority	Priority Matrix							
Composite	Correlation****	Percentile						
Strength								
No composites are considered Strengths.								
Top Priority								
All Other Plans (Comparative Rating)	0.696	<10th						
Finance Issues	0.599	<10th						
Pharmacy	0.581	<10th						
Utilization and Quality Management 0.580 <10th								
Strength: Composite is highly correlated with overall satisfaction and ranks at or above the 75th percentile when compared to the TMG Book of Business benchmark.								
Top Priority: Composite is highly correlated with overall satisfaction and ranks below the 75th percentile when compared to the TMG Book of Business benchmark.								



A loyal provider is completely satisfied with the plan and would recommend the plan to other physicians' practices. A provider in the defection zone is completely dissatisfied with the plan and would not recommend the plan to other physicians' practices. All other providers are considered indifferent.

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; cells highlighted in green denote current year plan percentage is significantly higher when compared to benchmark data; no shading denotes that there was no significant difference between the percentages, there is no comparable data, or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

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^{*} The Valid in represents the number of responses to the question. Summary Rate Scores (SRS) represent the top two response percentages ("Well above average" and "Somewhat above average," "Yes," and "Completely satisfied" and "Somewhat satisfied").

^{**} Mean scores are the average of all responses. TMG B.o.B. is represented by the Medicaid Book of Business.

^{***} The Myers Group's 2012 Medicaid Book of Business benchmark consists of data from 8 plans representing 700 respondents, while the Aggregate Book of Business benchmark consists of data from 8 plans representing 1524 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine.

^{****} A correlation coefficient approaching a value of +/- 1.000 represents an increasing association of the composite with overall satisfaction.



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1. Executive Summary

The Myers Group (TMG), a National Committee for Quality Assurance (NCQA) Certified Survey Vendor, was selected by Louisiana Healthcare Connections to conduct its 2013 Provider Satisfaction Survey. Information obtained from these surveys allows plans to measure how well they are meeting their providers' expectations and needs. Based on the data collected, this report summarizes the results and assists in identifying plan strengths and opportunities.

TMG followed a two-wave mail and Internet¹ with phone follow-up survey methodology to administer the Provider Satisfaction Survey from August to October of 2013. A total of 217 surveys were completed (70 mail, 14 Internet, and 133 phone), yielding a response rate of 6.2% for the mail/Internet data component and 21.9% for the phone data component. Please refer to the *Methodology* (Section 2) for further detail on the calculation of response rates.

The chart below presents 2013 Summary Rates² for Louisiana Healthcare Connections' composites and key attributes.

Composites/Key Attributes	2013 Summary Rates	2012 TMG Medicaid BoB Summary Rates ³	*
Overall Satisfaction with Louisiana Healthcare Connections	57.8%	78.0%	\
All Other Plans (Comparative Rating)	23.2%	56.3%	1
Finance Issues	29.6%	49.9%	\
Utilization and Quality Management	20.4%	50.8%	\
Network/Coordination of Care	17.8%	51.8%	\
Pharmacy	16.4%	36.3%	\
Health Plan Call Center Service Staff	27.2%	60.1%	\
Provider Relations	29.5%	53.2%	1
Recommend to Other Physicians' Practices	72.3%	92.0%	\

^{*↓↑} Indicates a significant difference when compared to the 2012 TMG Medicaid Book of Business.

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¹ Both waves of mail included the web address, along with a user ID and password, to complete the survey online.

² The Summary Rate represents the most favorable response percentage(s).

³ The Myers Group's 2012 Medicaid Book of Business consists of data from 4 plans representing 700 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine.



Presentation of Results

- Summary Rate is the proportion of respondents who selected the most positive response options ('Well above average' or 'Somewhat above average;' 'Yes;' and 'Completely satisfied' or 'Somewhat satisfied') for the attribute.
- Attributes are the individual questions that focus on specific characteristics of the health plan.
- Composites are calculated by taking the average of the Summary Rates of the attributes in the specified section.
- 2012 TMG Medicaid Book of Business consists of data from 4 plans representing 700 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine.
- 2012 TMG Aggregate Book of Business consists of data from 8 plans representing 1,524 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine.

2013 Provider Satisfaction Composites

All Other Plans (Comparative Rating)

This item asks the respondent to rate Louisiana Healthcare Connections compared to all other plans with which the provider contracts.

Finance Issues

This composite addresses the consistency of reimbursement fees with contract rates, accuracy and timeliness of claims processing, and resolution of claims payment problems or disputes.

Utilization and Quality Management

This composite measures access to knowledgeable Utilization Management staff, procedures and timeliness for obtaining pre-certification/referral/authorization information, the health plan's facilitation/support of appropriate clinical care for patients, access to Case/Care Managers from this health plan, and the degree to which the plan covers and encourages preventive care and wellness. Additionally, the survey tool includes two custom questions within this composite that allow providers to evaluate the extent to which UM staff share review criteria and reasons for adverse determinations and the consistency of review decisions. The custom questions (3G and 3H) are not included in the composite score calculations as they do not have a benchmark in the TMG Book of Business.

Network/Coordination of Care

This composite addresses the number and quality of specialists, as well as the timeliness of feedback/reports from specialists, in this health plan's provider network. Additionally, the survey tool includes three custom questions within this composite that allow providers to evaluate the frequency of feedback and reports from specialists and Behavioral Health Clinicians for patients in their care and the timeliness of feedback and

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reports from Behavioral Health Clinicians for patients in their care. The custom questions (4D through 4F) are not included in the composite score calculations as they do not have a benchmark in the TMG Book of Business.

Pharmacy

This composite assesses the consistency of the formulary over time, the extent to which the formulary reflects current standards of care, the variety of branded drugs on the formulary, the ease of prescribing preferred medications within formulary guidelines, and the availability of comparable drugs to substitute those not included in the formulary.

Health Plan Call Center Service Staff

This composite measures the ease of reaching health plan call center staff over the phone, the process of obtaining member information (eligibility, benefit coverage, co-pay amounts), the helpfulness of health plan call center staff in obtaining referrals for patients in their care, and overall satisfaction with the health plan's call center service.

Provider Relations

This composite addresses the quality of the provider orientation process and of written communications, policy bulletins, and manuals. If a Provider Relations representative from the health plan is assigned to the practice, providers are also asked about the representative's ability to answer questions and resolve problems.

Overall Satisfaction

Respondents are asked if they would recommend Louisiana Healthcare Connections to other physicians' practices. They are also asked to rate their overall satisfaction with:

- Louisiana Healthcare Connections
- Amerigroup
- Community Health Solutions
- LA Care
- United Healthcare

There are two open-ended questions on the survey tool. The first open-ended question (F) allows respondents to provide an e-mail address if that is there preferred method of communication. The second open-ended question (9) allows respondents to comment on what Louisiana Healthcare Connections can do to improve its service to their organization.

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2. Methodology

TMG utilized a two-wave mail and Internet⁴ with phone follow-up survey methodology to administer the Provider Satisfaction Survey:

Survey Administration Tasks	Date
First questionnaire, including the web address to complete the survey online, is sent to each provider's office.	8/21/2013
Second questionnaire, including the web address to complete the survey online, is sent to each provider's office.	8/22/2013
Telephone calls by CATI (computer-assisted telephone interviews) are conducted for non-respondents.	9/23/2013
Data collection ends.	10/25/2013

Sampling Methodology

Centene provided TMG with a database consisting of 142,099 providers. Louisiana Healthcare Connections providers were eligible for inclusion in the sample based on plan code, specialty, and provider type criteria. TMG cleaned the database by removing duplicate providers from the database according to the provider's National Provider ID. A sample of 1,500 providers was pulled according to the stratification instructions given by Louisiana Healthcare Connections. A total of 70 mail, 14 Internet, and 133 phone surveys were completed.

Response Rate

Louisiana Healthcare Connections' sample size is 1,500. The Myers Group collected 217 surveys (70 mail, 14 Internet, and 133 phone) from the eligible provider population from August to October of 2013. After adjusting for ineligible members, your mail/Internet survey response rate is 6.2%, and your phone survey response rate is 21.9%. A response rate is only calculated for those providers who are eligible and able to respond.

The mail/Internet survey was distributed to a sample of 1,500 providers, and a total of 152 surveys were considered ineligible. Mail surveys are considered ineligible if returned for the following reasons: bad address with no forwarding information, provider is deceased, or if the provider no longer participates with the health plan. The chart on the following page shows the number of ineligible mail surveys for these disposition categories.

At the pre-determined date, follow-up phone calls were made to office managers of non-respondent practices by means of the CATI system. As a result, 838 office managers were included in the database for the phone follow-up data collection component. From this sample of office managers, 133 surveys were completed. Phone surveys are

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⁴ Both waves of mail included the web address, along with a user ID and password, to complete the survey online.



considered ineligible if they meet one of the disposition categories listed in the table below.

Survey Methodology	Ineligible Disposition	N
Mail/Internet Component	Bad Address with no forwarding information	151
Mail/Internet Component	Deceased, Not Eligible	1
ТО	152	

Survey Methodology	Survey Methodology Ineligible Disposition	
	Deceased	
	No Eligible Respondent	72
	Wrong Number	101
Dhone Component	Fax/Pager/Modem/Data Line	8
Phone Component	Not in Service	0
	Disconnected	30
	Number Changed	19
	Cell Phone	
	232	

To calculate the response rate, ineligible surveys are subtracted from the sample size:

Using the final figures from Louisiana Healthcare Connections' Provider Satisfaction Survey, the numerators and denominators used to compute your response rates are as follows:

Mail/Internet Component

Phone Component

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Profile of Survey Respondents

The demographic characteristics of surveyed respondents should be representative of your provider population. Page 2A illustrates the percentage of respondents by demographic category within your respondent group:

- ✓ Area of Medicine (A)
- ☑ Physicians in Practice (B)
- ✓ Years in Practice (C)
- ☑ Portion of Managed Care Volume Represented by Health Plan (D)
- ✓ Survey Respondent (E)
- ✓ Insurance Participation (G)

Page 2B provides the percentage of respondents by demographic category and is compared to the 2012 TMG Medicaid Book of Business. This page also includes the overall satisfaction (8B) Summary Rate Score for both Louisiana Healthcare Connections and the 2012 TMG Medicaid Book of Business for each demographic category.

A *z-test* determines significant differences between the percentages, which are highlighted to help identify how your plan's population compares to the benchmark. See the *Technical Notes* for more information on this topic.

Charts 2A - 2B

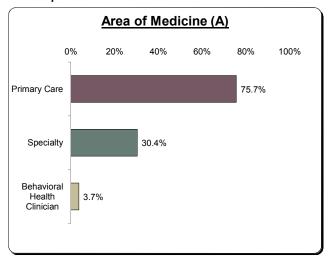
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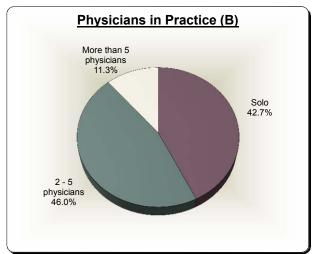
Profile of Survey Respondents

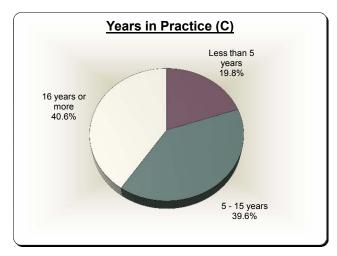
Survey Demographics

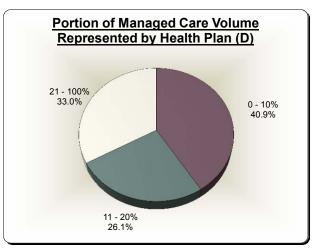
Louisiana Healthcare Connections Provider Satisfaction Survey

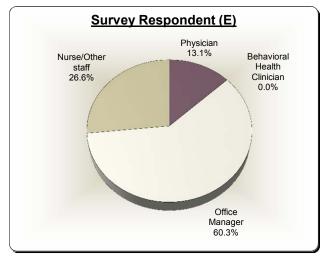
217 Total Respondents

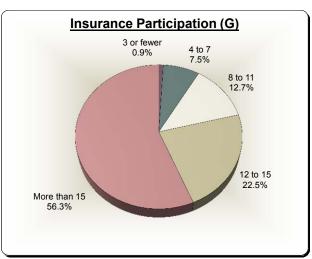












Note: The sum of responses for Area of Medicine may be greater than 100% as respondents are able to choose multiple response options.

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Profile of Survey Respondents

Benchmark Comparisons

Louisiana Healthcare Connections

Provider Satisfaction Survey

217 To	otal Respondents		Current					
Demographic		Category	2013	2012 TMG Book of Business Benchmark*	Significance Testing**	Overall Satisfaction Summary Rates		
				Medicaid	Plan to Medicaid Benchmark	Plan	Medicaid Benchmark	
	Area of Medicine (A)	Primary Care Specialty Behavioral Health Clinician	75.7% 30.4% 3.7%	54.2% 38.7% 10.0%	↑ ↓ ↓	61.5% 52.7% 42.9%	77.8% 72.2% 91.5%	
	Physicians in Practice (B)	Solo 2 - 5 physicians More than 5 physicians	42.7% 46.0% 11.3%	33.2% 37.2% 29.5%	↑ ↑ ↓	61.8% 58.8% 40.0%	79.9% 73.4% 77.9%	
aphics	Years in Practice (C)	Less than 5 years 5 - 15 years 16 years or more	19.8% 39.6% 40.6%	20.3% 32.9% 46.8%	← ← ← ←	58.8% 61.1% 52.9%	70.9% 80.4% 77.3%	
Survey Demographics	Portion of Managed Care Volume Represented by Health Plan (D)	0 - 10% 11 - 20% 21 - 100%	40.9% 26.1% 33.0%	32.8% 27.9% 39.3%	↑ ↔ ↔	53.0% 59.6% 59.3%	69.5% 77.4% 83.2%	
S	Survey Respondent (E)	Physician Behavioral Health Clinician Office Manager Nurse/Other staff	13.1% NA 60.3% 26.6%	31.6% 5.7% 38.4% 24.3%	↓ NA ↑ ↔	34.6% NA 64.2% 57.8%	73.4% 88.2% 78.6% 76.0%	
	Insurance Participation (G)	3 or fewer 4 to 7 8 to 11 12 to 15 More than 15	0.9% 7.5% 12.7% 22.5% 56.3%	2.0% 9.7% 16.9% 19.0% 52.4%	-	50.0% 85.7% 50.0% 61.0% 53.0%	75.0% 83.3% 77.0% 76.6% 76.4%	

^{*} The Myers Group's 2012 Medicaid Book of Business (B.o.B.) consists of data from 4 plans representing 700 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information.

The Myers Group 2B

^{**} Significance Testing - \(\psi \) denotes plan percentage is significantly lower when compared to benchmark; \(\psi \) denotes plan percentage is significantly higher when compared to benchmark; \(\psi \) denotes that there was no significant difference between the percentages; \(-\psi \) denotes that there was insufficient sample size to conduct the statistical test or there is no benchmark. All significance testing is performed at the 95% significance level.

Note 1: The sum of responses for Area of Medicine may be greater than 100% as respondents are able to choose multiple response options.

Note 2: There were no respondents who identified themselves as a Behavioral Health Clinician (E). As such, NA is displayed.



3. Summary of Benchmark Comparisons

Questions are combined into composite categories comprising a particular service area managed by your plan. These composites, the questions that make up the composites (attributes), and rating questions are shown on the following benchmark pages.

Page 3A Summary of Benchmark Comparisons

Displays a comparison of Louisiana Healthcare Connections' Summary Rates to the Summary Rates of the 2012 TMG Medicaid and Aggregate Books of Business. Significant differences are highlighted.

<u>Page 3B</u> <u>Benchmark Comparisons – Percentiles</u>

Displays a comparison of Louisiana Healthcare Connections' Summary Rates to the Summary Rate Percentiles of the 2012 TMG Medicaid Book of Business Percentiles. Attributes at or above the 75th percentile are shaded green, attributes at or above the 50th percentile but below the 75th percentile are shaded yellow, and attributes below the 25th percentile are shaded red. Attributes at or above the 25th percentile but below the 50th percentile and those attributes without a comparable benchmark are not shaded.

Page 3C

Benchmark Comparisons – Physician and Office Manager Respondents The chart on page 3C compares Louisiana Healthcare Connections' Summary Rates from Physician and Office Manager respondents as defined by question E, 'Please mark who is completing this survey' (response options: Physician, Behavioral Health Clinician, Office Manager, Nurse, Other staff) to the Summary Rates of Physician and Office Manager respondents from the 2012 TMG Medicaid Respondent-Level Benchmark. Significant differences are highlighted.

Page 3D

Benchmark Comparisons – Primary Care and Specialty Respondents
The chart on page 3D compares Louisiana Healthcare Connections'
Summary Rates from respondents in the Primary Care and Specialty
areas of medicine as defined by question A, *'Please indicate your area of medicine'* (response options: Primary Care, Specialty, and Behavioral
Health Clinician) to the Summary Rates of Primary Care and Specialty
area of medicine respondents from the 2012 TMG Medicaid RespondentLevel Benchmark. Significant differences are highlighted.

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A brief description of each benchmark is included in the below table:

Benchmark	Definition	Contains Data From
2012 TMG Medicaid Book of Business	Contains data from all eligible Medicaid Provider Satisfaction pilot surveys for which TMG collected data. Calculated on the plan level.	• 4 plans
2012 TMG Medicaid Respondent-Level Benchmark	Contains data from all eligible Medicaid Provider Satisfaction pilot surveys for which TMG collected data. Calculated on the respondent level.	• 700 respondents
2012 TMG Aggregate Book of Business	Contains data from all eligible Aggregate Provider Satisfaction pilot surveys for which TMG collected data. Calculated on the plan level.	8 plans 1,524 respondents

Charts 3A - 3D

The Myers Group 3-2

Composites and Attributes - Summary Rate Scores

Provider Satisfaction Survey

217 Total Respondents	(Current			
Composites and Key Questions		2013		TMG Book of Business Benchmarks**	
	Valid n	Summary Rate*	Medicaid	Aggregate	
Overall Satisfaction		57.8%	78.0%	78.5%	
8A. Would you recommend Louisiana Healthcare Connections to other physicians' practices?	166	72.3%	92.0%	91.9%	
8B. Please rate your overall satisfaction with Louisiana Healthcare Connections.	180	57.8%	78.0%	78.5%	
8C. Please rate your overall satisfaction with Amerigroup.	156	50.6%	NA	NA	
8D. Please rate your overall satisfaction with Community Health Solutions.	153	75.8%	NA	NA	
8E. Please rate your overall satisfaction with LA Care.	154	51.9%	NA	NA	
8F. Please rate your overall satisfaction with United Healthcare.	163	76.1%	NA	NA	
All Other Plans (Comparative Rating)					
1A. How would you rate Louisiana Healthcare Connections compared to all other health plans you contract with?	207	23.2%	56.3%	56.1%	
Finance Issues		29.6%	49.9%	52.4%	
2A. Consistency of reimbursement fees with your contract rates.	189	28.0%	44.1%	48.1%	
2B. Accuracy of claims processing.	186	31.2%	52.6%	57.7%	
2C. Timeliness of claims processing.	188	34.6%	52.9%	53.6%	
2D. Resolution of claims payment problems or disputes.	175	24.6%	50.1%	50.2%	
Utilization and Quality Management		20.4%	50.8%	49.6%	
3A. Access to knowledgeable UM staff.	178	20.8%	49.7%	48.2%	
3B. Procedures for obtaining pre-certification/referral/authorization information.	182	19.8%	47.1%	47.4%	
3C. Timeliness of obtaining pre-certification/referral/authorization information.	184	17.9%	49.6%	48.0%	
3D. The health plan's facilitation/support of appropriate clinical care for patients.	176	18.8%	50.8%	49.6%	
3E. Access to Case/Care Managers from this health plan.	166	18.1%	51.3%	49.3%	
3F. Degree to which the plan covers and encourages preventive care and wellness.	177	27.1%	56.2%	55.0%	
3G. Extent to which UM staff share review criteria and reasons for adverse determinations.	154	18.2%	NA	NA	
3H. Consistency of review decisions.	156	17.9%	NA	NA	
Network/Coordination of Care		17.8%	51.8%	52.0%	
4A. The number of specialists in this health plan's provider network.	170	17.1%	50.9%	49.6%	
4B. The quality of specialists in this health plan's provider network.	164	20.7%	57.4%	57.5%	
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	159	15.7%	47.1%	49.0%	
4D. The frequency of feedback/reports from specialists for patients in your care.	157	16.6%	NA	NA	
4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.	118	16.1%	NA	NA	
4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.	109	14.7%	NA	NA	
Pharmacy		16.4%	36.3%	38.3%	
5A. Consistency of the formulary over time.	156	14.1%	37.1%	39.9%	
5B. Extent to which formulary reflects current standards of care.	159	17.0%	38.5%	40.6%	
5C. Variety of branded drugs on the formulary.	155	15.5%	35.4%	37.0%	
5D. Ease of prescribing your preferred medications within formulary guidelines.	151	18.5%	36.5%	38.3%	
5E. Availability of comparable drugs to substitute those not included in the formulary.	147	17.0%	34.0%	35.4%	
Health Plan Call Center Service Staff		27.2%	60.1%	60.3%	
6A. Ease of reaching health plan call center staff over the phone.	173	24.3%	59.0%	59.9%	
6B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	177	31.6%	60.0%	61.1%	
6C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	163	22.7%	58.8%	58.4%	
6D. Overall satisfaction with health plan's call center service.	175	30.3%	62.6%	61.6%	
Provider Relations		29.5%	53.2%	51.0%	
7A. Do you have a Provider Relations representative from this health plan assigned to your practice?	148	73.0%	46.2%	40.5%	
7B. Provider Relations representative's ability to answer questions and resolve problems.	99	35.4%	72.1%	68.8%	
7C. Quality of provider orientation process.	149	26.8%	43.4%	40.9%	
7D. Quality of written communications, policy bulletins, and manuals.	164	26.2%	44.0%	43.4%	

 $^{^{\}star}\,$ Summary Rates represent the most favorable response percentage(s).

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^{**} The Myers Group's 2012 Medicaid Book of Business consists of data from 4 plans representing 700 respondents, while the Aggregate Book of Business consists of data from 8 plans representing 1524 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information.

Note 1: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; Cells highlighted ingreen denote current year plan percentage is significantly higher when compared to benchmark data; No shading denotes that there was no significant difference between the percentages, there is no benchmark, or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Note 2: The Overall Satisfaction Summary Rate includes only 8B.

Note 3: The Provider Relations composite is the average of 7B through 7D. It does not include 7A.

Note 4: The Utilization and Quality Management composite is the average of 3A through 3F and does not include custom questions 3G or 3H. The Network/Coordination of Care composite is the average of 4A through 4C and does not include custom questions 4D through 4F.

Provider Satisfaction Survey

Benchmark Comparisons

2012 TMG Medicaid Book of Business Percentiles

217 Total Respondents

217 Total Respondents								
Composites and Key Questions	2013 Louisiana Summary	Percentile Ranking	2012 TMG B.o.B. Summary	2012	2012 TMG Medicaid B.o.B. Percentiles			
	Rate Score*	Ranking	Rate**	25th	50th	75th	90th	
Overall Satisfaction	57.8%	<10th	78.0%	74.0%	77.6%	81.6%	82.7%	
8A. Would you recommend Louisiana Healthcare Connections to other physicians' practices?	72.3%	<10th	92.0%	91.0%	91.4%	92.4%	93.9%	
8B. Please rate your overall satisfaction with Louisiana Healthcare Connections.	57.8%	<10th	78.0%	74.0%	77.6%	81.6%	82.7%	
8C. Please rate your overall satisfaction with Amerigroup.	50.6%	NA	NA	NA	NA	NA	NA	
8D. Please rate your overall satisfaction with Community Health Solutions.	75.8%	NA	NA	NA	NA	NA	NA	
8E. Please rate your overall satisfaction with LA Care.	51.9%	NA	NA	NA	NA	NA	NA	
8F. Please rate your overall satisfaction with United Healthcare.	76.1%	NA	NA	NA	NA	NA	NA	
All Other Plans (Comparative Rating)								
1A. How would you rate Louisiana Healthcare Connections compared to all other health plans you contract with?	23.2%	<10th	56.3%	50.0%	55.8%	62.1%	64.6%	
Finance Issues	29.6%	<10th	49.9%	45.2%	53.4%	58.2%	60.4%	
2A. Consistency of reimbursement fees with your contract rates.	28.0%	<10th	44.1%	39.1%	46.0%	51.0%	55.0%	
2B. Accuracy of claims processing.	31.2%	<10th	52.6%	47.5%	57.4%	62.6%	63.0%	
2C. Timeliness of claims processing.	34.6%	<10th	52.9%	48.9%	55.9%	59.8%	63.6%	
2D. Resolution of claims payment problems or disputes.	24.6%	<10th	50.1%	45.2%	54.5%	59.3%	59.9%	
Utilization and Quality Management	20.4%	<10th	50.8%	42.7%	50.2%	58.3%	60.5%	
3A. Access to knowledgeable UM staff.	20.8%	<10th	49.7%	46.5%	48.8%	52.0%	56.4%	
3B. Procedures for obtaining pre-certification/referral/authorization information.	19.8%	<10th	47.1%	39.5%	47.6%	55.2%	56.2%	
3C. Timeliness of obtaining pre-certification/referral/authorization information.	17.9%	<10th	49.6%	41.0%	49.6%	58.3%	60.0%	
3D. The health plan's facilitation/support of appropriate clinical care for patients.	18.8%	<10th	50.8%	43.4%	51.0%	58.4%	60.9%	
3E. Access to Case/Care Managers from this health plan.	18.1%	<10th	51.3%	41.1%	51.7%	61.9%	62.9%	
3F. Degree to which the plan covers and encourages preventive care and wellness.	27.1%	<10th	56.2%	47.8%	52.8%	61.3%	68.9%	
3G. Extent to which UM staff share review criteria and reasons for adverse determinations.	18.2%	NA	NA	NA	NA	NA	NA	
3H. Consistency of review decisions.	17.9%	NA	NA	NA	NA	NA	NA	
Network/Coordination of Care	17.8%	<10th	51.8%	44.7%	53.1%	60.2%	62.7%	
4A. The number of specialists in this health plan's provider network.	17.1%	<10th	50.9%	42.8%	49.8%	57.9%	61.0%	
4B. The quality of specialists in this health plan's provider network.	20.7%	<10th	57.4%	49.6%	59.1%	66.8%	69.8%	
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	15.7%	<10th	47.1%	41.7%	50.5%	55.9%	57.4%	
4D. The frequency of feedback/reports from specialists for patients in your care.	16.6%	NA	NA	NA	NA	NA	NA	
4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.	16.1%	NA	NA	NA	NA	NA	NA	
4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.	14.7%	NA	NA	NA	NA	NA	NA	
Pharmacy	16.4%	<10th	36.3%	27.6%	36.2%	44.9%	47.2%	
5A. Consistency of the formulary over time.	14.1%	<10th	37.1%	27.6%	36.4%	45.9%	47.9%	
5B. Extent to which formulary reflects current standards of care.	17.0%	<10th	38.5%	29.6%	38.8%	47.7%	49.9%	
5C. Variety of branded drugs on the formulary.	15.5%	<10th	35.4%	27.4%	36.2%	44.2%	45.1%	
5D. Ease of prescribing your preferred medications within formulary guidelines.	18.5%	<10th	36.5%	28.1%	35.7%	44.0%	47.2%	
5E. Availability of comparable drugs to substitute those not included in the formulary.	17.0%	<10th	34.0%	25.3%	33.9%	42.6%	45.7%	
Health Plan Call Center Service Staff	27.2%	<10th	60.1%	57.2%	60.7%	63.6%	67.7%	
6A. Ease of reaching health plan call center staff over the phone.	24.3%	<10th	59.0%	52.6%	57.9%	64.4%	69.2%	
6B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	31.6%	<10th	60.0%	56.8%	60.7%	63.9%	66.6%	
6C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	22.7%	<10th	58.8%	56.4%	60.1%	62.6%	66.5%	
6D. Overall satisfaction with health plan's call center service.	30.3%	<10th	62.6%	58.6%	64.0%	68.0%	70.5%	
Provider Relations	29.5%	<10th	53.2%	51.2%	52.8%	54.8%	56.2%	
7A. Do you have a Provider Relations representative from this health plan assigned to your practice?	73.0%	99th	46.2%	38.8%	44.2%	51.6%	57.4%	
7B. Provider Relations representative's ability to answer questions and resolve problems.	35.4%	<10th	72.1%	66.4%	73.6%	79.3%	80.4%	
7C. Quality of provider orientation process.	26.8%	<10th	43.4%	40.1%	44.0%	47.4%	51.4%	
7D. Quality of written communications, policy bulletins, and manuals.	26.2%	<10th	44.0%	41.9%	45.5%	47.7%	47.8%	

At or above the 75th percentile.

At or above the 50th percentile, but below the 75th percentile.

At or above the 25th percentile, but below the 50th percentile; or no benchmark.

Below the 25th percentile.

The Myers Group 3B

 $^{^{\}star}\,$ Summary Rate Scores represent the most favorable response percentage(s).

^{**} The Myers Group's 2012 Medicaid Book of Business consists of data from 4 plans representing 700 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information. Note 1: The Overall Satisfaction Summary Rate includes only 8B.

Note 2: The Provider Relations composite is the average of 7B through 7D. It does not include 7A.

Note 3: The Utilization and Quality Management composite is the average of 4A through 3F and does not include custom questions 3G or 3H. The Network/Coordination of Care composite is the average of 4A through 4C and does not include custom questions 4D through 4F.

Benchmark Comparisons

2012 TMG Medicaid Respondent-Level Benchmark

Survey Respondent (E)

28 Total Physician Respondents

129 Total Office Manager Respondents								
Composites and Key Questions				ouisiana ans Only	2012 TMG Medicaid Respondent- Level Benchmark** (Physicians	Office N	ouisiana Managers nly	2012 TMG Medicaid Respondent- Level Benchmark** (Office
	Valid n	SRS*	Valid n	SRS*	Only) SRS*	Valid n	SRS*	Managers Only) SRS*
Overall Satisfaction		57.8%		34.6%	73.4%		64.2%	78.6%
8A. Would you recommend Louisiana Healthcare Connections to other physicians' practices?	166	72.3%	23	47.8%	86.3%	96	76.0%	92.3%
8B. Please rate your overall satisfaction with Louisiana Healthcare Connections.	180	57.8%	26	34.6%	73.4%	106	64.2%	78.6%
8C. Please rate your overall satisfaction with Amerigroup.	156	50.6%	23	21.7%	NA	89	56.2%	NA
8D. Please rate your overall satisfaction with Community Health Solutions.	153	75.8%	24	66.7%	NA	84	77.4%	NA
8E. Please rate your overall satisfaction with LA Care.	154	51.9%	21	33.3%	NA	86	55.8%	NA
8F. Please rate your overall satisfaction with United Healthcare.	163	76.1%	24	58.3%	NA	94	78.7%	NA
All Other Plans (Comparative Rating)								
1A. How would you rate Louisiana Healthcare Connections compared to all other health plans you contract with?	207	23.2%	27	11.1%	61.6%	122	26.2%	45.5%
Finance Issues		29.6%		18.9%	56.7%		29.6%	35.3%
2A. Consistency of reimbursement fees with your contract rates.	189	28.0%	24	16.7%	54.1%	110	29.1%	28.2%
2B. Accuracy of claims processing.	186	31.2%	24	16.7%	58.2%	109	32.1%	38.1%
2C. Timeliness of claims processing.	188	34.6%	24	25.0%	60.4%	110	34.5%	38.6%
2D. Resolution of claims payment problems or disputes.	175	24.6%	23	17.4%	54.2%	101	22.8%	36.4%
Utilization and Quality Management		20.4%		14.9%	59.0%		19.3%	40.0%
3A. Access to knowledgeable UM staff.	178	20.8%	24	16.7%	53.4%	106	18.9%	40.3%
3B. Procedures for obtaining pre-certification/referral/authorization information.	182	19.8%	23	17.4%	54.6%	108	17.6%	37.3%
3C. Timeliness of obtaining pre-certification/referral/authorization information.	184	17.9%	23	13.0%	57.2%	110	19.1%	40.3%
3D. The health plan's facilitation/support of appropriate clinical care for patients.	176	18.8%	25	12.0%	60.1%	100	19.0%	38.3%
3E. Access to Case/Care Managers from this health plan.	166	18.1%	23	8.7%	61.8%	95	18.9%	39.3%
3F. Degree to which the plan covers and encourages preventive care and wellness.	177	27.1%	23	21.7%	66.9%	102	22.5%	44.5%
3G. Extent to which UM staff share review criteria and reasons for adverse determinations.	154	18.2%	24	12.5%	NA	86	20.9%	NA
3H. Consistency of review decisions.	156	17.9%	23	17.4%	NA	87	16.1%	NA
Network/Coordination of Care		17.8%		29.6%	60.8%		13.8%	41.1%
4A. The number of specialists in this health plan's provider network.	170	17.1%	24	25.0%	60.7%	100	12.0%	37.0%
4B. The quality of specialists in this health plan's provider network.	164	20.7%	23	34.8%	66.1%	97	17.5%	45.2%
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	159	15.7%	24	29.2%	55.6%	92	12.0%	41.0%
4D. The frequency of feedback/reports from specialists for patients in your care.	157	16.6%	24	29.2%	NA	88	10.2%	NA
4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.	118	16.1%	17	35.3%	NA	65	9.2%	NA
4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.	109	14.7%	17	35.3%	NA	58	5.2%	NA
Pharmacy		16.4%		26.2%	45.6%		12.0%	22.5%
5A. Consistency of the formulary over time.	156	14.1%	24	25.0%	48.7%	91	8.8%	22.9%
5B. Extent to which formulary reflects current standards of care.	159	17.0%	26	26.9%	48.3%	91	12.1%	24.4%
5C. Variety of branded drugs on the formulary.	155	15.5%	26	26.9%	42.2%	89	9.0%	21.5%
5D. Ease of prescribing your preferred medications within formulary guidelines.	151	18.5%	25	24.0%	46.3%	85	16.5%	22.8%
5E. Availability of comparable drugs to substitute those not included in the formulary.	147	17.0%	25	28.0%	42.4%	81	13.6%	20.9%
Health Plan Call Center Service Staff		27.2%		25.3%	57.1%		25.8%	61.3%
6A. Ease of reaching health plan call center staff over the phone.	173	24.3%	23	26.1%	58.4%	103	23.3%	61.1%
6B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	177	31.6%	24	29.2%	53.7%	105	30.5%	61.6%
6C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	163	22.7%	24	20.8%	60.0%	97	20.6%	59.0%
6D. Overall satisfaction with health plan's call center service.	175	30.3%	24	25.0%	56.3%	104	28.8%	63.4%
Provider Relations		29.5%		31.3%	54.5%		29.9%	50.0%
7A. Do you have a Provider Relations representative from this health plan assigned to your practice?	148	73.0%	21	61.9%	40.9%	87	73.6%	51.8%
7B. Provider Relations representative's ability to answer questions and resolve problems.	99	35.4%	12	41.7%	71.7%	58	37.9%	72.4%
7C. Quality of provider orientation process.	149	26.8%	21	28.6%	45.3%	87	26.4%	37.0%
7D. Quality of written communications, policy bulletins, and manuals.	164	26.2%	21	23.8%	46.5%	95	25.3%	40.7%

The Myers Group 3C

^{*} Summary Rate Scores (SRS) represent the most favorable response option(s).

** The 2012 TMG Medicaid Book of Business Benchmark consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians. These benchmark comparisons are based on respondent-level results. Please see the Technical Notes for further detail.

Note 1: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; Cells highlighted in green denote current year plan percentage is significantly higher when compared to benchmark data; No shading denotes that there was no significant difference between the percentages, there is no benchmark, or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Note 2: The Overall Satisfaction Summary Rate includes only 8B.

Note 3: The Provider Relations composite is the average of 7B through 7D. It does not include 7A.

Note 4: The Utilization and Quality Management composite is the average of 3A through 3F and does not include custom questions 3G or 3H. The Network/Coordination of Care composite is the average of 4A through 4C and does not include custom questions 4D through 4F.

Benchmark Comparisons

2012 TMG Medicaid Respondent-Level Benchmark

Area of Medicine (A)

162 Total Primary Care Respondents

65 Total Specialty Respondents								
Composites and Key Questions	2013 Louisiana Summary Rate Score*		mmary Rate Primar		2012 TMG Medicaid Respondent- Level Benchmark** (Primary Care		ouisiana lity Only	2012 TMG Medicaid Respondent- Level Benchmark** (Specialty
	Valid n	SRS*	Valid n	SRS*	Only) SRS*	Valid n	SRS*	Only) SRS*
Overall Satisfaction		57.8%		61.5%	77.2%		52.7%	73.0%
8A. Would you recommend Louisiana Healthcare Connections to other physicians' practices?	166	72.3%	124	72.6%	91.5%	48	77.1%	89.1%
8B. Please rate your overall satisfaction with Louisiana Healthcare Connections.	180	57.8%	135	61.5%	77.2%	55	52.7%	73.0%
8C. Please rate your overall satisfaction with Amerigroup.	156	50.6%	116	52.6%	NA	49	46.9%	NA
8D. Please rate your overall satisfaction with Community Health Solutions.	153	75.8%	118	78.0%	NA	47	74.5%	NA
8E. Please rate your overall satisfaction with LA Care.	154	51.9%	117	54.7%	NA	47	40.4%	NA
8F. Please rate your overall satisfaction with United Healthcare.	163	76.1%	121	76.9%	NA	51	72.5%	NA
All Other Plans (Comparative Rating)								
1A. How would you rate Louisiana Healthcare Connections compared to all other health plans you contract with?	207	23.2%	155	25.8%	56.8%	61	23.0%	45.3%
Finance Issues		29.6%		33.3%	42.6%		22.2%	43.6%
2A. Consistency of reimbursement fees with your contract rates.	189	28.0%	144	31.9%	38.7%	53	18.9%	36.1%
2B. Accuracy of claims processing.	186	31.2%	140	34.3%	44.5%	54	22.2%	48.3%
2C. Timeliness of claims processing.	188	34.6%	141	39.7%	44.6%	55	25.5%	48.5%
2D. Resolution of claims payment problems or disputes.	175	24.6%	129	27.1%	42.7%	54	22.2%	41.5%
Utilization and Quality Management		20.4%		20.4%	46.7%		21.0%	46.1%
3A. Access to knowledgeable UM staff.	178	20.8%	129	22.5%	45.6%	57	19.3%	43.3%
3B. Procedures for obtaining pre-certification/referral/authorization information.	182	19.8%	140	17.9%	39.9%	50	26.0%	44.1%
3C. Timeliness of obtaining pre-certification/referral/authorization information.	184	17.9%	143	14.7%	45.0%	49	28.6%	45.2%
3D. The health plan's facilitation/support of appropriate clinical care for patients.	176	18.8%	132	19.7%	46.5%	52	17.3%	47.1%
3E. Access to Case/Care Managers from this health plan.	166	18.1%	127	19.7%	47.1%	45	13.3%	47.4%
3F. Degree to which the plan covers and encourages preventive care and wellness.	177	27.1%	143	28.0%	56.3%	42	21.4%	49.7%
3G. Extent to which UM staff share review criteria and reasons for adverse determinations.	154	18.2%	121	19.8%	NA	39	17.9%	NA
3H. Consistency of review decisions.	156	17.9%	122	18.9%	NA	41	14.6%	NA
Network/Coordination of Care		17.8%		17.8%	51.6%		17.4%	47.6%
4A. The number of specialists in this health plan's provider network.	170	17.1%	136	16.9%	50.5%	42	16.7%	45.2%
4B. The quality of specialists in this health plan's provider network.	164	20.7%	132	20.5%	57.0%	40	22.5%	54.0%
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	159	15.7%	130	16.2%	47.4%	38	13.2%	43.8%
4D. The frequency of feedback/reports from specialists for patients in your care.	157	16.6%	130	16.2%	NA	36	16.7%	NA
4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.	118	16.1%	103	17.5%	NA	20	10.0%	NA
4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.	109	14.7%	95	15.8%	NA	19	10.5%	NA
Pharmacy		16.4%		16.0%	33.5%		20.2%	32.3%
5A. Consistency of the formulary over time.	156	14.1%	119	14.3%	34.4%	44	18.2%	33.7%
5B. Extent to which formulary reflects current standards of care.	159	17.0%	122	15.6%	36.8%	44	22.7%	33.7%
5C. Variety of branded drugs on the formulary.	155	15.5%	121	14.9%	32.3%	41	17.1%	31.6%
5D. Ease of prescribing your preferred medications within formulary guidelines.	151	18.5%	118	18.6%	33.6%	41	22.0%	32.3%
5E. Availability of comparable drugs to substitute those not included in the formulary.	147	17.0%	116	16.4%	30.6%	38	21.1%	30.5%
Health Plan Call Center Service Staff		27.2%		27.8%	57.1%		27.0%	60.0%
6A. Ease of reaching health plan call center staff over the phone.	173	24.3%	131	25.2%	58.8%	51	23.5%	57.7%
6B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	177	31.6%	134	32.1%	57.4%	52	32.7%	61.1%
6C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	163	22.7%	126	22.2%	54.5%	47	25.5%	60.9%
6D. Overall satisfaction with health plan's call center service.	175	30.3%	132	31.8%	57.6%	53	26.4%	60.5%
Provider Relations		29.5%		33.4%	52.2%		27.3%	51.7%
7A. Do you have a Provider Relations representative from this health plan assigned to your practice?	148	73.0%	113	76.1%	55.8%	43	62.8%	42.3%
7B. Provider Relations representative's ability to answer questions and resolve problems.	99	35.4%	80	40.0%	71.2%	24	37.5%	73.5%
7C. Quality of provider orientation process.	149	26.8%	113	30.1%	43.5%	43	20.9%	38.8%
7D. Quality of written communications, policy bulletins, and manuals.	164	26.2%	126	30.2%	41.9%	47	23.4%	42.9%

 $^{^{\}ast}\,$ Summary Rate Scores (SRS) represent the most favorable response option(s).

The Myers Group 3D

^{**} The 2012 TMG Medicaid Book of Business Benchmark consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians. These benchmark comparisons are based on respondent-level results. Please see the Technical Notes for further detail.

Note 1: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; Cells highlighted in green denote current year plan percentage is significantly higher when compared to benchmark data; No shading denotes that there was no significant difference between the percentages, there is no benchmark, or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Note 2: The Overall Satisfaction Summary Rate includes only 8B.

Note 3: The Provider Relations composite is the average of 7B through 7D. It does not include 7A.

Note 4: The Utilization and Quality Management composite is the average of 3A through 3F and does not include custom questions 3G or 3H. The Network/Coordination of Care composite is the average of 4A through 4C and does not include custom questions 4D through 4F.



4. Composite Analyses

The *Composite Analyses* section provides in-depth examination of the following composite features:

- Response Level Percentages graphical display of composite responses. This graph provides a breakdown of the composite response distributions, namely, 'Well above average,' 'Somewhat above average,' 'Average,' and 'Somewhat/Well below average' for all composites except for overall satisfaction (8B), which is broken down by 'Completely satisfied,' 'Somewhat satisfied,' 'Neither dissatisfied nor satisfied,' and 'Completely/Somewhat dissatisfied.'
- ☑ Composite Level (Summary Rate) graphical display of the composite and benchmark Summary Rate Scores. This graph plots where the composite Summary Rate Score falls in relation to the 2012 Medicaid and Aggregate benchmark Summary Rate Scores.
- ☑ Top Box Scores displays the top response percentages. Top Box Scores and valid n's for 2013 are compared to the 2012 Medicaid and Aggregate benchmark Top Box Scores.
- ✓ Summary Rate Scores displays the top two response percentages. Summary Rate Scores and valid n's for 2013 are compared to the 2012 Medicaid and Aggregate benchmark Summary Rate Scores.
- ✓ Summary Rate and Top Box Scores for 2013 are compared to the 2012 TMG Medicaid Book of Business percentile scores. Percentile threshold rankings are displayed for the average, 25th percentile, 50th percentile, 75th percentile, and 90th percentile. Plan scores are displayed as they emerge along the percentile continuum with an explanation of findings.

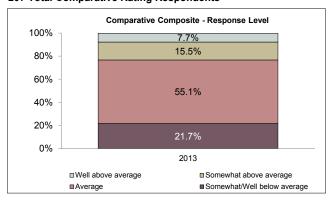
Charts 4A - 4H

The Myers Group 4-1

Comparative Rating - Top Box and Summary Rate Scores

207 Total Comparative Rating Respondents

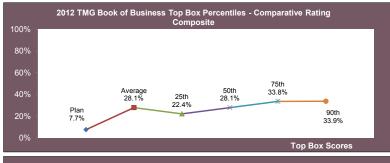
Louisiana Healthcare Connections Provider Satisfaction Survey





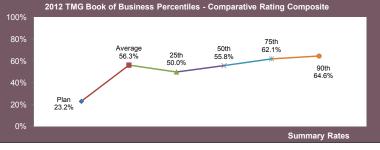
*	Attribute		2013	2012 TMG Book of Business**	
Score	Attribute	n	Top Box Score*	Medicaid	Aggregate
Вох	Comparative Rating				
Top	1A. How would you rate Louisiana Healthcare Connections compared to all other health plans you contract with?	207	7.7%	28.1%	27.6%

ore*	\$		2013	2012 TMG Book of Business**		
ate Sc	Attribute	n	SRS*	Medicaid	Aggregate	
y Re	Comparative Rating					
Summai	How would you rate Louisiana Healthcare Connections compared to all other health plans you contract with?	207	23.2%	56.3%	56.1%	





Your 2013 Top Box Summary Rate for the Comparative Rating composite is 7.7%, which is significantly below TMG's 2012 Medicaid Book of Business Top Box Summary Rate Score of 28.1%.





Your 2013 Summary Rate for the Comparative Rating composite is 23.2%, which is significantly below TMG's 2012 Medicaid Book of Business Summary Rate Score of 56.3%.

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; cells highlighted ingreen denote current year plan percentage is significantly higher when compared to benchmark data; no shading denotes that there was no significant difference between the percentages, there is no benchmark, or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

The Myers Group 4A

^{*} Top Box Scores represent the top response percentage ("Well above average"). Summary Rate Scores (SRS) represent the top two response percentages ("Well above average" and "Somewhat above average").

^{**} The Myers Group's 2012 Medicaid Book of Business consists of data from 4 plans representing 700 respondents, while the Aggregate Book of Business consists of data from 8 plans representing 1524 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information.

Finance Issues - Top Box and Summary Rate Scores

189 Total Finance Issues Respondents

■ Well above average

■ Average

40%

20%

0%

Finance Issues Composite - Response Level 100% 9.1% 80% 20.5% 60%

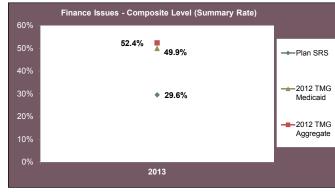
53.1%

2013

■ Somewhat above average

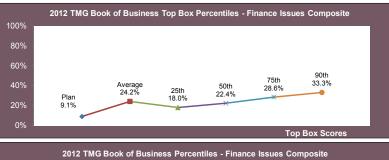
■ Somewhat/Well below average





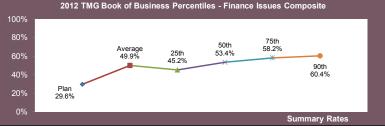
	Composite and Attributes		2013 2012 TMG Book		k of Business**
2	Composite and Attributes	n	Top Box Score	Medicaid	Aggregate
ore	Finance Issues		9.1%	24.2%	26.0%
x Sc	2A. Consistency of reimbursement fees with your contract rates.	189	9.5%	21.9%	25.0%
p Bo	2B. Accuracy of claims processing.	186	9.1%	24.8%	26.7%
70	2C. Timeliness of claims processing.	188	9.6%	24.3%	26.5%
	2D. Resolution of claims payment problems or disputes.	175	8.0%	25.8%	25.8%

*	Composite and Attributes	2013 2012 TMG Book of Bus		k of Business**	
ores*	Composite and Attributes	n	SRS*	Medicaid	Aggregate
Sc	Finance Issues		29.6%	49.9%	52.4%
Rate	2A. Consistency of reimbursement fees with your contract rates.	189	28.0%	44.1%	48.1%
nary	2B. Accuracy of claims processing.	186	31.2%	52.6%	57.7%
Summary	2C. Timeliness of claims processing.	188	34.6%	52.9%	53.6%
S	2D. Resolution of claims payment problems or disputes.	175	24.6%	50.1%	50.2%





Your 2013 Top Box Summary Rate for the Finance Issues composite is 9.1%, which is significantly below TMG's 2012 Medicaid Book of Business Top Box Summary Rate Score of 24.2%.





Your 2013 Summary Rate for the Finance Issues composite is 29.6%, which is significantly below TMG's 2012 Medicaid Book of Business Summary Rate Score of 49.9%.

The Myers Group 4B

^{*} Top Box Scores represent the top response percentage ("Well above average"). Summary Rate Scores (SRS) represent the top two response percentages ("Well above average" and "Somewhat

^{**} The Myers Group's 2012 Medicaid Book of Business consists of data from 4 plans representing 700 respondents, while the Aggregate Book of Business consists of data from 8 plans representing 1524 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information.

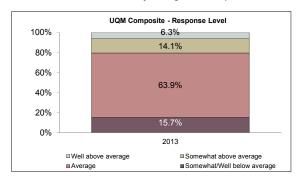
Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; cells highlighted ingreen denote current year plan percentage is significantly higher when compared to benchmark data; no shading denotes that there was no significant difference between the percentages, there is no benchmark, or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

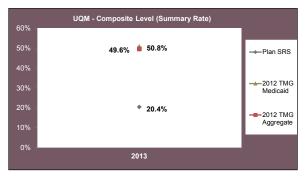
Louisiana Healthcare Connections

Provider Satisfaction Survey

Utilization and Quality Management - Top Box and Summary Rate Scores

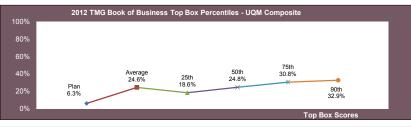
184 Total Utilization and Quality Management Respondents





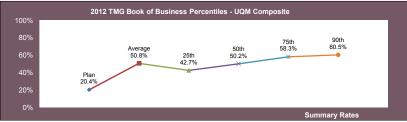
	Composite and Attributes		2013	2012 TMG Book of Business**	
	Composite and Attributes	n	Top Box Score*	Medicaid	Aggregate
*5	Utilization and Quality Management		6.3%	24.6%	23.9%
ore:	3A. Access to knowledgeable UM staff.	178	5.6%	24.5%	23.5%
Sc	3B. Procedures for obtaining pre-certification/referral/authorization information.	182	7.1%	22.6%	22.2%
Вох	3C. Timeliness of obtaining pre-certification/referral/authorization information.	184	4.9%	23.7%	22.9%
D B	3D. The health plan's facilitation/support of appropriate clinical care for patients.	176	5.7%	24.9%	24.5%
70	3E. Access to Case/Care Managers from this health plan.	166	3.6%	23.1%	23.1%
	3F. Degree to which the plan covers and encourages preventive care and wellness.	177	10.7%	28.7%	27.1%
	3G. Extent to which UM staff share review criteria and reasons for adverse determinations.	154	5.2%	NA	NA
	3H. Consistency of review decisions.	156	5.1%	NA	NA

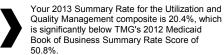
Composite and Attributes		2013	2012 TMG Book of Business**	
Composite and Attributes	n	SRS*	Medicaid	Aggregate
Utilization and Quality Management		20.4%	50.8%	49.6%
3A. Access to knowledgeable UM staff.	178	20.8%	49.7%	48.2%
3B. Procedures for obtaining pre-certification/referral/authorization information.	182	19.8%	47.1%	47.4%
3C. Timeliness of obtaining pre-certification/referral/authorization information.	184	17.9%	49.6%	48.0%
3D. The health plan's facilitation/support of appropriate clinical care for patients.	176	18.8%	50.8%	49.6%
3E. Access to Case/Care Managers from this health plan.	166	18.1%	51.3%	49.3%
3F. Degree to which the plan covers and encourages preventive care and wellness.	177	27.1%	56.2%	55.0%
3G. Extent to which UM staff share review criteria and reasons for adverse determinations.	154	18.2%	NA	NA
3H. Consistency of review decisions.	156	17.9%	NA	NA



Yo Ut 6. M

Your 2013 Top Box Summary Rate for the Utilization and Quality Management composite is 6.3%, which is significantly below TMG's 2012 Medicaid Book of Business Top Box Summary Rate Score of 24.6%.





^{*} Top Box Scores represent the top response percentage ("Well above average"). Summary Rate Scores (SRS) represent the top two response percentages ("Well above average" and "Somewhat above average").

Note 1: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; cells highlighted in green denote current year plan percentage is significantly higher when compared to benchmark, or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Note 2: The Utilization and Quality Management composite is the average of 3A through 3F. It does not include custom questions 3G through 3H. As such, the Top Box and Summary Rate percentile graphs do not include the custom questions as they do not have a benchmark in the TMG Book of Business.

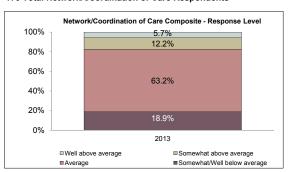
The Myers Group 4C

^{**} The Myers Group's 2012 Medicaid Book of Business consists of data from 4 plans representing 700 respondents, while the Aggregate Book of Business consists of data from 8 plans representing 1524 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information.

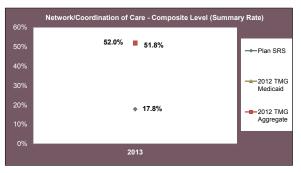
Louisiana Healthcare Connections

Provider Satisfaction Survey

170 Total Network/Coordination of Care Respondents

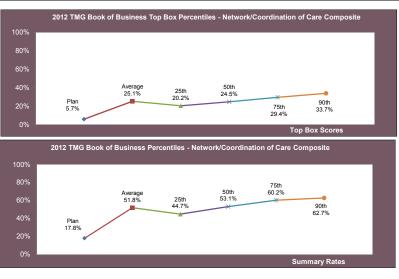


Network/Coordination of Care - Top Box and Summary Rate Scores



Composite and Attributes		2013	2012 TMG Book of Business**	
		Top Box Score*	Medicaid	Aggregate
Network/Coordination of Care		5.7%	25.1%	25.7%
4A. The number of specialists in this health plan's provider network.	170	7.1%	24.1%	24.2%
4B. The quality of specialists in this health plan's provider network.	164	4.9%	29.0%	29.8%
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	159	5.0%	22.2%	23.0%
4D. The frequency of feedback/reports from specialists for patients in your care.	157	7.0%	NA	NA
4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.	118	7.6%	NA	NA
4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.	109	6.4%	NA	NA

Composite and Attributes		2013	2012 TMG Book of Business**	
* Composite and Attributes	n	SRS*	Medicaid	Aggregate
Network/Coordination of Care		17.8%	51.8%	52.0%
4A. The number of specialists in this health plan's provider network.	170	17.1%	50.9%	49.6%
4B. The quality of specialists in this health plan's provider network.	164	20.7%	57.4%	57.5%
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	159	15.7%	47.1%	49.0%
4D. The frequency of feedback/reports from specialists for patients in your care.	157	16.6%	NA	NA
4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.	118	16.1%	NA	NA
4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.	109	14.7%	NA	NA





Your 2013 Top Box Summary Rate for the Network/Coordination of Care composite is 5.7%, which is significantly below TMG's 2012 Medicaid Book of Business Top Box Summary Rate Score of 25.1%.



Your 2013 Summary Rate for the Network/Coordination of Care composite is 17.8%, which is significantly below TMG's 2012 Medicaid Book of Business Summary Rate Score of 51.8%.

Note 1: Significance Testing - Cells highlighted irred denote current year plan percentage is significantly lower when compared to benchmark data; cells highlighted irred denote current year plan percentage is significantly higher when compared to benchmark data; no shading denotes that there was no significant difference between the percentages, there is no benchmark, or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Note 2: The Network/Coordination of Care composite is the average of 4A through 4C. It does not include custom questions 4D through 4F. As such, the Top Box and Summary Rate percentile graphs do not include the custom questions as they do not have a benchmark in the TMG Book of Business.

The Myers Group 4D

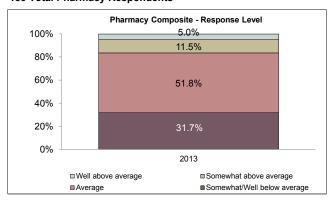
^{*} Top Box Scores represent the top response percentage ("Well above average"). Summary Rate Scores (SRS) represent the top two response percentages ("Well above average" and "Somewhat above average").

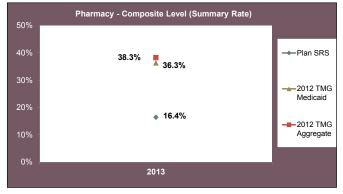
^{**} The Myers Group's 2012 Medicaid Book of Business consists of data from 4 plans representing 700 respondents, while the Aggregate Book of Business consists of data from 8 plans representing 1524 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information.

Pharmacy - Top Box and Summary Rate Scores

159 Total Pharmacy Respondents

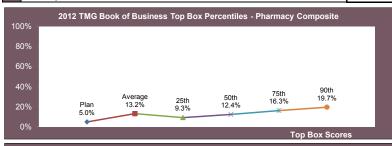
Louisiana Healthcare Connections Provider Satisfaction Survey





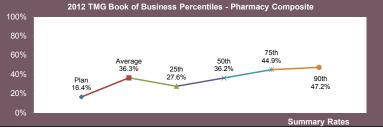
*	Composite and Attributes		2013	2012 TMG Book of Business**		
	Composite and Attributes	n	Top Box Score*	Medicaid	Aggregate	
res*	Pharmacy		5.0%	13.2%	15.1%	
Scc	5A. Consistency of the formulary over time.	156	3.8%	14.3%	15.7%	
Вох	5B. Extent to which formulary reflects current standards of care.	159	5.7%	13.2%	16.3%	
Top E	5C. Variety of branded drugs on the formulary.	155	4.5%	12.9%	14.3%	
F	5D. Ease of prescribing your preferred medications within formulary guidelines.	151	5.3%	13.5%	15.1%	
	5E. Availability of comparable drugs to substitute those not included in the formulary.	147	5.4%	11.9%	14.0%	

ores*	Composite and Attributes		2013	2012 TMG Book of Business**		
	Composite and Attributes	n	SRS*	Medicaid	Aggregate	
Sco	Pharmacy		16.4%	36.3%	38.3%	
Rate	5A. Consistency of the formulary over time.	156	14.1%	37.1%	39.9%	
	5B. Extent to which formulary reflects current standards of care.	159	17.0%	38.5%	40.6%	
mary	5C. Variety of branded drugs on the formulary.	155	15.5%	35.4%	37.0%	
Sumi	5D. Ease of prescribing your preferred medications within formulary guidelines.	151	18.5%	36.5%	38.3%	
Ŋ	 Availability of comparable drugs to substitute those not included in the formulary. 	147	17.0%	34.0%	35.4%	





Your 2013 Top Box Summary Rate for the Pharmacy composite is 5.0%, which is significantly below TMG's 2012 Medicaid Book of Business Top Box Summary Rate Score of 13.2%.





Your 2013 Summary Rate for the Pharmacy composite is 16.4%, which is significantly below TMG's 2012 Medicaid Book of Business Summary Rate Score of 36.3%.

The Myers Group 4E

^{*} Top Box Scores represent the top response percentage ("Well above average"). Summary Rate Scores (SRS) represent the top two response percentages ("Well above average" and "Somewhat above average").

^{**} The Myers Group's 2012 Medicaid Book of Business consists of data from 4 plans representing 700 respondents, while the Aggregate Book of Business consists of data from 8 plans representing 1524 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information.

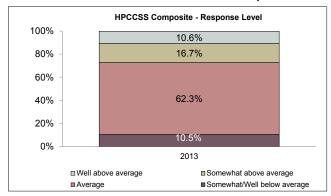
Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; cells highlighted ingreen denote current year plan percentage is significantly higher when compared to benchmark data; no shading denotes that there was no significant difference between the percentages, there is no benchmark, or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

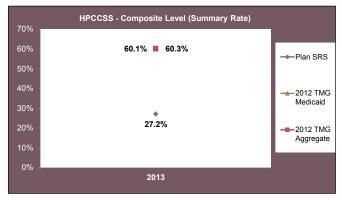
Louisiana Healthcare Connections

Health Plan Call Center Service Staff - Top Box and Summary Rate Scores

Provider Satisfaction Survey

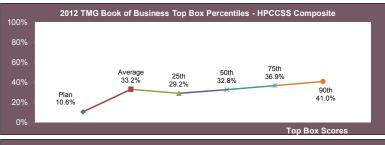
177 Total Health Plan Call Center Service Staff Respondents



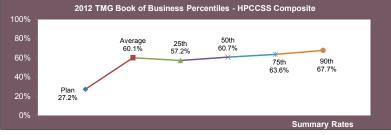


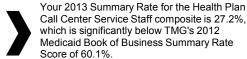
*8	Composite and Attributes		2013 2012 TMG Book of Busi		k of Business**
	Composite and Attributes	n	Top Box Score*	Medicaid	Aggregate
ore	Health Plan Call Center Service Staff		10.6%	33.2%	32.9%
k St	6A. Ease of reaching health plan call center staff over the phone.	173	10.4%	31.9%	32.7%
o Box	6B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	177	11.9%	35.4%	33.8%
To	6C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	163	8.6%	32.1%	31.6%
	6D. Overall satisfaction with health plan's call center service.	175	11.4%	33.4%	33.4%

es*	Composite and Attributes		2013	2012 TMG Book of Business**			
ores	Composite and Attributes	n	SRS*	Medicaid	Aggregate		
	Health Plan Call Center Service Staff		27.2%	60.1%	60.3%		
Rate	6A. Ease of reaching health plan call center staff over the phone.	173	24.3%	59.0%	59.9%		
ary I	6B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	177	31.6%	60.0%	61.1%		
	6C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	163	22.7%	58.8%	58.4%		
0,	6D. Overall satisfaction with health plan's call center service.	175	30.3%	62.6%	61.6%		



Your 2013 Top Box Summary Rate for the Health Plan Call Center Service Staff composite is 10.6%, which is significantly below TMG's 2012 Medicaid Book of Business Top Box Summary Rate Score of 33.2%.





^{*} Top Box Scores represent the top response percentage ("Well above average"). Summary Rate Scores (SRS) represent the top two response percentages ("Well above average" and "Somewhat above average").

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; cells highlighted ingreen denote current year plan percentage is significantly lower when compared to benchmark data; no shading denotes that there was no significant difference between the percentages, there is no benchmark, or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

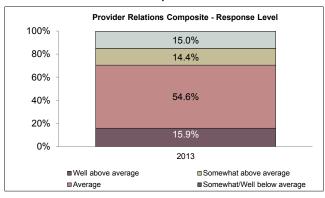
The Myers Group 4F

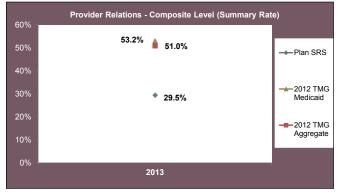
^{**} The Myers Group's 2012 Medicaid Book of Business consists of data from 4 plans representing 700 respondents, while the Aggregate Book of Business consists of data from 8 plans representing 1524 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information.

Provider Relations - Top Box and Summary Rate Scores

164 Total Provider Relations Respondents

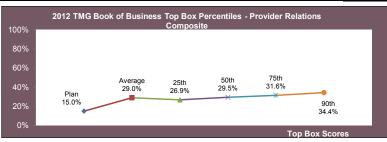
Louisiana Healthcare Connections Provider Satisfaction Survey





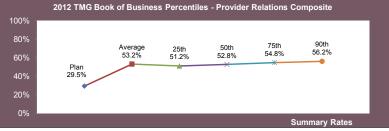
es*	Composite and Attributes		2013 2012 TMG Book of Busines				
	Composite and Attributes	n	Top Box Score*	Medicaid	Aggregate		
6	Provider Relations		15.0%	29.0%	28.6%		
ox Sc	7A. Do you have a Provider Relations representative from this health plan assigned to your practice?	148	73.0%	46.2%	40.5%		
	7B. Provider Relations representative's ability to answer questions and resolve problems.	99	20.2%	41.4%	41.8%		
1	7C. Quality of provider orientation process.	149 12.8%		21.8%	22.1%		
	7D. Quality of written communications, policy bulletins, and manuals.	164	12.2%	23.9%	22.0%		

es*	Composite and Attributes		2013 2012 TMG Book of Business				
ores	Composite and Attributes	n	SRS*	Medicaid	Aggregate		
	Provider Relations		29.5%	53.2%	51.0%		
' Rate	7A. Do you have a Provider Relations representative from this health plan assigned to your practice?	148	73.0%	46.2%	40.5%		
ımary	7B. Provider Relations representative's ability to answer questions and resolve problems.	99	35.4%	72.1%	68.8%		
m	7C. Quality of provider orientation process.	149	26.8%	43.4%	40.9%		
υ,	7D. Quality of written communications, policy bulletins, and manuals.	164	26.2%	44.0%	43.4%		





Your 2013 Top Box Summary Rate for the Provider Relations composite is 15.0%, which is significantly below TMG's 2012 Medicaid Book of Business Top Box Summary Rate Score of 29.0%.





Your 2013 Summary Rate for the Provider Relations composite is 29.5%, which is significantly below TMG's 2012 Medicaid Book of Business Summary Rate Score of 53.2%.

Note 2: The Provider Relations composite is the average of 7B through 7D. It does not include 7A.

The Myers Group 4G

^{*} Top Box Scores represent the top response percentage ("Yes;" "Well above average"). Summary Rate Scores (SRS) represent the top two response percentages ("Yes;" "Well above average" and "Somewhat above average").

^{**} The Myers Group's 2012 Medicaid Book of Business consists of data from 4 plans representing 700 respondents, while the Aggregate Book of Business consists of data from 8 plans representing 1524 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information.

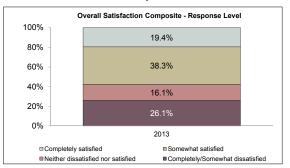
Note 1: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; cells highlighted ingreen denote current year plan percentage is significantly higher when compared to benchmark data; no shading denotes that there was no significant difference between the percentages, there is no benchmark, or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

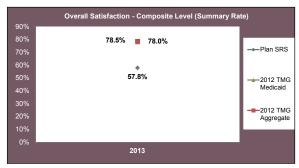
Overall Satisfaction - Top Box and Summary Rate Scores

180 Total Overall Satisfaction Respondents

Louisiana Healthcare Connections

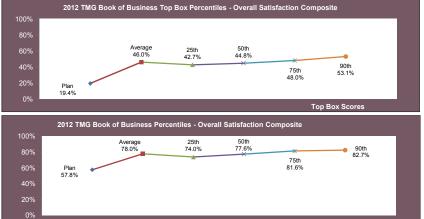
Provider Satisfaction Survey





	Companies and Attributes		2013	2012 TMG Book of Business**		
*	Composite and Attributes	n	Top Box Score*	Medicaid	Aggregate	
ores	Overall Satisfaction		19.4%	46.0%	46.1%	
Sc	8A. Would you recommend Louisiana Healthcare Connections to other physicians' practices?	166	72.3%	92.0%	91.9%	
XO	8B. Please rate your overall satisfaction with Louisiana Healthcare Connections.	180	19.4%	46.0%	46.1%	
D B	8C. Please rate your overall satisfaction with Amerigroup.	156	13.5%	NA	NA	
70	8D. Please rate your overall satisfaction with Community Health Solutions.	153	35.9%	NA	NA	
	8E. Please rate your overall satisfaction with LA Care.	154	20.8%	NA	NA	
	8F. Please rate your overall satisfaction with United Healthcare.	163	39.3%	NA	NA	

*	Composite and Attributes		2013	2012 TMG Book of Business**			
res*	Composite and Attributes	n	SRS*	Medicaid	Aggregate		
Scc	Overall Satisfaction		57.8%	78.0%	78.5%		
ate	8A. Would you recommend Louisiana Healthcare Connections to other physicians' practices?	166	72.3%	92.0%	91.9%		
/R	8B. Please rate your overall satisfaction with Louisiana Healthcare Connections.	180	57.8%	78.0%	78.5%		
ar)	8C. Please rate your overall satisfaction with Amerigroup.	156	50.6%	NA	NA		
mn	8D. Please rate your overall satisfaction with Community Health Solutions.	153	75.8%	NA	NA		
Su	8E. Please rate your overall satisfaction with LA Care.	154	51.9%	NA	NA		
	8F. Please rate your overall satisfaction with United Healthcare.	163	76.1%	NA	NA		





Your 2013 Top Box Summary Rate for the Overall Satisfaction composite is 19.4%, which is significantly below TMG's 2012 Medicaid Book of Business Top Box Summary Rate Score of 46.0%.



Your 2013 Summary Rate for the Overall Satisfaction composite is 57.8%, which is significantly below TMG's 2012 Medicaid Book of Business Summary Rate Score of 78.0%.

Note 1: Significance Testing - Cells highlighted irred denote current year plan percentage is significantly lower when compared to benchmark data; cells highlighted irred denote current year plan percentage is significantly higher when compared to benchmark data; no shading denotes that there was no significant difference between the percentages, there is no benchmark, or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Note 2: The Overall Satisfaction Summary Rate includes only 8B.

The Myers Group 4H

^{*} Top Box Scores represent the top response percentage ("Yes," "Completely satisfied"). Summary Rate Scores (SRS) represent the top two response percentages ("Yes," "Completely satisfied" and "Somewhat satisfied").

^{**} The Myers Group's 2012 Medicaid Book of Business consists of data from 4 plans representing 700 respondents, while the Aggregate Book of Business consists of data from 8 plans representing 1524 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information.



5. Global Proportions

Pages 5A through 5C provide a graphical presentation of the percentage of providers who chose each response option. The charts present the composite percentages, as well as the percentages for each attribute that make up the composite.

Global proportions are a useful tool to understand a provider's satisfaction, dissatisfaction, or neutrality when they rate a particular service or service area. Summary Rate Scores alone are not as complete an indication of performance given that they do not show a distribution of responses across all response categories.

		Summary Ra	te Score	
	Well above average	Somewhat above average	Somewhat/Well below average	
Case 1	65%	10%	20%	5%
Case 2	15%	60%	15%	10%

The above chart demonstrates two cases in which a high Summary Rate becomes less revealing. In Case 1, a relatively large percentage of providers are found to be very satisfied ('Well above average'). In Case 2, a large proportion of the Summary Rate responses are 'Somewhat above average,' rather than the more favorable response of 'Well above average.' When reviewing cases one and two, the first case shows a higher average rating than the second, even though the Summary Rates are equal (both 75%).

Charts 5A - 5C

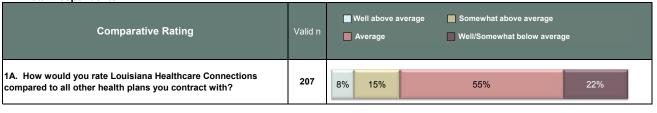
The Myers Group 5-1

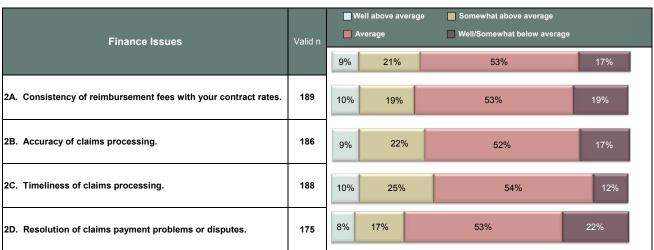
Global Proportions

Composite/Attribute Response Distributions

Louisiana Healthcare Connections Provider Satisfaction Survey

217 Total Respondents





Utilization and Quality Management	Valid n	■ Well above average ■ Average	Somewhat above average Well/Somewhat below averag	e
		6% 14%	64%	16%
3A. Access to knowledgeable UM staff.	178	6% 15%	63%	16%
3B. Procedures for obtaining pre- certification/referral/authorization information.	182	7% 13%	59%	21%
3C. Timeliness of obtaining pre-certification/referral/authorization information.	184	5% 13%	61%	21%
3D. The health plan's facilitation/support of appropriate clinical care for patients.	176	6% 13%	67%	14%
3E. Access to Case/Care Managers from this health plan.	166	4% 14%	69%	13%
3F. Degree to which the plan covers and encourages preventive care and wellness.	177	11% 16%	64%	9%
3G. Extent to which UM staff share review criteria and reasons for adverse determinations.	154	5% 13%	68%	14%
3H. Consistency of review decisions.	156	5% 13%	72%	10%

Note 1: Percentages may not add to 100% due to rounding.

Note 2: The Utilization and Quality Mangement composite scores include 3A through 3F.

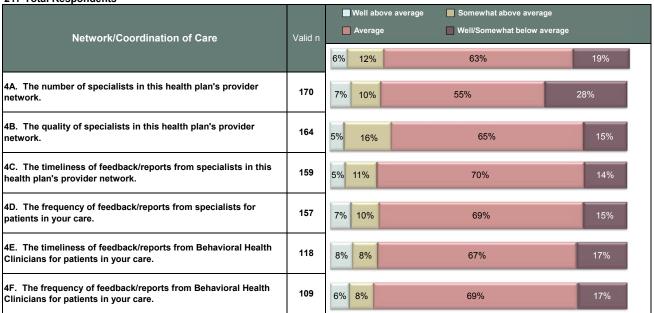
The Myers Group 5A

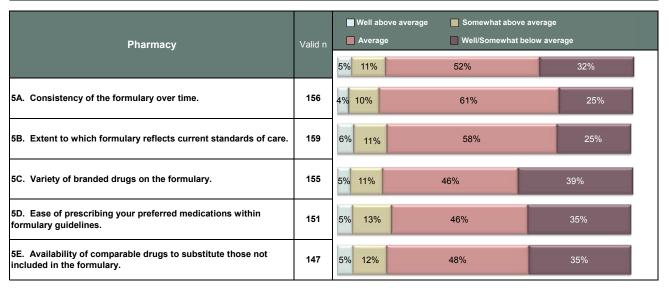
Global Proportions

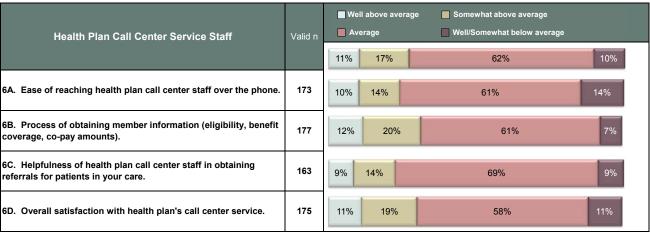
Composite/Attribute Response Distributions

Louisiana Healthcare Connections Provider Satisfaction Survey

217 Total Respondents







Note 1: Percentages may not add to 100% due to rounding.

Note 2: The Network/Coordination of Care Composite scores include 4A through 4C.

The Myers Group 5B

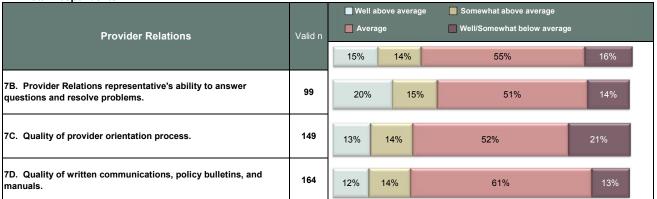
Global Proportions

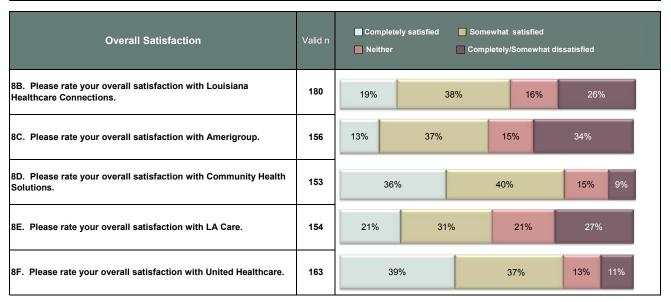
Composite/Attribute Response Distributions

Louisiana Healthcare Connections

Provider Satisfaction Survey

217 Total Respondents





Note: Percentages may not add to 100% due to rounding.

The Myers Group 5C



6. Segmentation Analyses

The database provided by Louisiana Healthcare Connections includes demographic information, and the Provider Satisfaction Survey asks demographic questions about the respondent's medical practice, which facilitates a market segmentation of the providers. The charts beginning on page 6A present Summary Rate Scores organized across the following demographics:

- ✓ Area of Medicine (A)
- ✓ Physicians in Practice (B)
- ✓ Years in Practice (C)
- ✓ Portion of Managed Care Volume Represented by Health Plan (D)
- ✓ Survey Respondent (E)
- ✓ Insurance Participation (G)
- ✓ Preferred Method of Communication (F)
- ✓ Survey Methodology

The percentages represent the Summary Rate for each segment of the demographic category. For example, in the table below, the Summary Rate for 8B, 'Please rate your overall satisfaction with Louisiana Healthcare Connections,' is the percentage of respondents who selected 'Completely satisfied' or 'Somewhat satisfied.'

The interpretation of this example would be, "Of the respondents who have been in practice less than five years, 58.8% are 'Completely satisfied' or 'Somewhat satisfied' with Louisiana Healthcare Connections, while 61.1% of respondents who have been in practice five to 15 years and 52.9% of respondents who have been in practice 16 years or more are 'Completely satisfied' or 'Somewhat satisfied' with Louisiana Healthcare Connections."

Years in Practice (C)	Less than 5 years	5 – 15 years	16 years or more
8B. Please rate your overall satisfaction with Louisiana Healthcare Connections.	58.8%	61.1%	52.9%

Results on the following pages are provided for individual attributes and for each composite. Caution is recommended when making comparisons between segments with a small valid n (less than 30), as the results may not be representative of the population.

Charts 6A - 6H

The Myers Group 6-1

Segmentation Analysis

Plan Summary Rates by Area of Medicine (A)

Louisiana Healthcare Connections
Provider Satisfaction Survey

217 Total Respondents

217 Total Respondents							
	Prim	Primary Care		ecialt <u>y</u>		<u>avioral</u> ealth	
Composite/Attribute					Cli	nician	Range*
	Valid n**	%	Valid n**	%	Valid n**	%	
Overall Satisfaction		61.5%		52.7%		42.9%	8.8%
8A. Would you recommend Louisiana Healthcare Connections to other physicians' practices?	124	72.6%	48	77.1%	6	66.7%	4.5%
8B. Please rate your overall satisfaction with Louisiana Healthcare Connections.	135	61.5%	55	52.7%	7	42.9%	8.8%
8C. Please rate your overall satisfaction with Amerigroup.	116	52.6%	49	46.9%	7	57.1%	5.6%
8D. Please rate your overall satisfaction with Community Health Solutions.	118	78.0%	47	74.5%	6	83.3%	3.5%
8E. Please rate your overall satisfaction with LA Care.	117	54.7%	47	40.4%	7	71.4%	14.3%
8F. Please rate your overall satisfaction with United Healthcare.	121	76.9%	51	72.5%	7	42.9%	4.3%
All Other Plans (Comparative Rating)							
1A. How would you rate Louisiana Healthcare Connections compared to all other health plans you contract	t 155	25 00/	61	22.00/	7	E7 10/	2.9%
with?	100	25.8%	61	23.0%	′	57.1%	2.9%
Finance Issues		33.3%		22.2%		47.6%	11.1%
2A. Consistency of reimbursement fees with your contract rates.	144	31.9%	53	18.9%	7	57.1%	13.1%
2B. Accuracy of claims processing.	140	34.3%	54	22.2%	7	42.9%	12.1%
2C. Timeliness of claims processing.	141	39.7%	55	25.5%	7	57.1%	14.3%
2D. Resolution of claims payment problems or disputes.	129	27.1%	54	22.2%	6	33.3%	4.9%
Utilization and Quality Management		20.4%		21.0%		26.9%	0.6%
3A. Access to knowledgeable UM staff.	129	22.5%	57	19.3%	6	33.3%	3.2%
3B. Procedures for obtaining pre-certification/referral/authorization information.	140	17.9%	50	26.0%	6	0.0%	8.1%
3C. Timeliness of obtaining pre-certification/referral/authorization information.	143	14.7%	49	28.6%	6	33.3%	13.9%
3D. The health plan's facilitation/support of appropriate clinical care for patients.	132	19.7%	52	17.3%	4	25.0%	2.4%
3E. Access to Case/Care Managers from this health plan.	127	19.7%	45	13.3%	5	20.0%	6.4%
3F. Degree to which the plan covers and encourages preventive care and wellness.	143	28.0%	42	21.4%	6	50.0%	6.5%
3G. Extent to which UM staff share review criteria and reasons for adverse determinations.	121	19.8%	39	17.9%	5	20.0%	1.9%
3H. Consistency of review decisions.	122	18.9%	41	14.6%	5	0.0%	4.2%
Network/Coordination of Care		17.8%		17.4%		46.7%	0.4%
4A. The number of specialists in this health plan's provider network.	136	16.9%	42	16.7%	4	75.0%	0.2%
4B. The quality of specialists in this health plan's provider network.	132	20.5%	40	22.5%	4	25.0%	2.0%
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	130	16.2%	38	13.2%	5	40.0%	3.0%
4D. The frequency of feedback/reports from specialists for patients in your care.	130	16.2%	36	16.7%	5	40.0%	0.5%
4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.	103	17.5%	20	10.0%	5	20.0%	7.5%
4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.	95	15.8%	19	10.5%	5	20.0%	5.3%
Pharmacy		16.0%		20.2%		20.0%	4.2%
5A. Consistency of the formulary over time.	119	14.3%	44	18.2%	6	16.7%	3.9%
5B. Extent to which formulary reflects current standards of care.	122	15.6%	44	22.7%	6	33.3%	7.2%
5C. Variety of branded drugs on the formulary.	121	14.9%	41	17.1%	6	16.7%	2.2%
5D. Ease of prescribing your preferred medications within formulary guidelines.	118	18.6%	41	22.0%	6	16.7%	3.3%
5E. Availability of comparable drugs to substitute those not included in the formulary.	116	16.4%	38	21.1%	6	16.7%	4.7%
Health Plan Call Center Service Staff		27.8%		27.0%		36.3%	0.8%
6A. Ease of reaching health plan call center staff over the phone.	131	25.2%	51	23.5%	8	0.0%	1.7%
6B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	134	32.1%	52	32.7%	8	62.5%	0.6%
6C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	126	22.2%	47	25.5%	5	40.0%	3.3%
6D. Overall satisfaction with health plan's call center service.	132	31.8%	53	26.4%	7	42.9%	5.4%
Provider Relations		33.4%		27.3%		38.9%	6.1%
7A. Do you have a Provider Relations representative from this health plan assigned to your practice?	113	76.1%	43	62.8%	7	71.4%	13.3%
7B. Provider Relations representative's ability to answer questions and resolve problems.	80	40.0%	24	37.5%	4	50.0%	2.5%
7C. Quality of provider orientation process.	113	30.1%	43	20.9%	6	16.7%	9.2%
7D. Quality of written communications, policy bulletins, and manuals.	126	30.2%	47	23.4%	8	50.0%	6.8%

^{*} Range is the difference between Summary Rates shown. Due to the small sample size of Behavioral Health Clinician respondents, this segment is excluded from range calculations.

The Myers Group 6A

^{**} Valid n refers to the total number of respondents answering the item within the subgroup under the column heading.

Note 1: The Overall Satisfaction Summary Rate includes only 8B.

Note 2: The Provider Relations composite is the average of 7B through 7D. It does not include 7A.

Note 3: The Utilization and Quality Management composite is the average of 3A through 3F and does not include custom questions 3G or 3H. The Network/Coordination of Care composite is the average of 4A through 4C and does not include custom questions 4D through 4F.

Louisiana Healthcare Connections Provider Satisfaction Survey

217 Total Respondents

217 Total Respondents							
Composite/Attribute	<u> </u>	<u>Solo</u>		2 - 5 sicians		than 5	Range*
	Valid n**	%	Valid n**	%	Valid n**	%	
Overall Satisfaction		61.8%		58.8%		40.0%	3.1%
8A. Would you recommend Louisiana Healthcare Connections to other physicians' practices?	69	73.9%	76	75.0%	17	52.9%	1.1%
8B. Please rate your overall satisfaction with Louisiana Healthcare Connections.	76	61.8%	80	58.8%	20	40.0%	3.1%
8C. Please rate your overall satisfaction with Amerigroup.	63	52.4%	70	50.0%	19	47.4%	2.4%
8D. Please rate your overall satisfaction with Community Health Solutions.	64	81.3%	69	75.4%	16	68.8%	5.9%
8E. Please rate your overall satisfaction with LA Care.	64	53.1%	68	51.5%	18	55.6%	1.7%
8F. Please rate your overall satisfaction with United Healthcare.	66	83.3%	74	73.0%	20	70.0%	10.4%
All Other Plans (Comparative Rating)							
1A. How would you rate Louisiana Healthcare Connections compared to all other health plans you contract	87	25.3%	93	24.7%	23	8.7%	0.6%
with?	07	25.5%	93	24.770	23	0.770	0.076
Finance Issues		30.1%		30.7%		21.7%	0.6%
2A. Consistency of reimbursement fees with your contract rates.	83	30.1%	87	27.6%	17	23.5%	2.5%
2B. Accuracy of claims processing.	80	33.8%	86	32.6%	17	11.8%	1.2%
2C. Timeliness of claims processing.	80	32.5%	87	37.9%	18	27.8%	5.4%
2D. Resolution of claims payment problems or disputes.	71	23.9%	85	24.7%	17	23.5%	0.8%
Utilization and Quality Management		21.6%		19.6%		18.9%	1.9%
3A. Access to knowledgeable UM staff.	73	21.9%	80	20.0%	21	19.0%	1.9%
3B. Procedures for obtaining pre-certification/referral/authorization information.	80	21.3%	79	19.0%	19	15.8%	2.3%
3C. Timeliness of obtaining pre-certification/referral/authorization information.	80	18.8%	81	17.3%	19	15.8%	1.5%
3D. The health plan's facilitation/support of appropriate clinical care for patients.	74	18.9%	80	18.8%	18	16.7%	0.2%
3E. Access to Case/Care Managers from this health plan.	69	20.3%	74	16.2%	19	21.1%	4.1%
3F. Degree to which the plan covers and encourages preventive care and wellness.	78	28.2%	79	26.6%	16	25.0%	1.6%
3G. Extent to which UM staff share review criteria and reasons for adverse determinations.	67	16.4%	69	20.3%	16	18.8%	3.9%
3H. Consistency of review decisions.	68	14.7%	69	20.3%	17	23.5%	5.6%
Network/Coordination of Care		13.8%		19.6%		31.1%	5.8%
4A. The number of specialists in this health plan's provider network.	77	14.3%	75	16.0%	15	33.3%	1.7%
4B. The quality of specialists in this health plan's provider network.	76	14.5%	70	24.3%	15	40.0%	9.8%
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	71	12.7%	70	18.6%	15	20.0%	5.9%
4D. The frequency of feedback/reports from specialists for patients in your care.	71	14.1%	70	15.7%	14	28.6%	1.6%
4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.	51	13.7%	54	14.8%	11	36.4%	1.1%
4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.	46	15.2%	52	11.5%	9	33.3%	3.7%
Pharmacy		14.2%		19.6%		15.9%	5.4%
5A. Consistency of the formulary over time.	69	11.6%	67	16.4%	16	18.8%	4.8%
5B. Extent to which formulary reflects current standards of care.	69	15.9%	69	18.8%	17	17.6%	2.9%
5C. Variety of branded drugs on the formulary.	68	14.7%	67	17.9%	17	11.8%	3.2%
5D. Ease of prescribing your preferred medications within formulary guidelines.	68	13.2%	65	24.6%	16	18.8%	11.4%
5E. Availability of comparable drugs to substitute those not included in the formulary.	65	15.4%	64	20.3%	16	12.5%	4.9%
Health Plan Call Center Service Staff	- 00	22.7%	<u> </u>	31.6%	10	26.1%	8.9%
6A. Ease of reaching health plan call center staff over the phone.	76	19.7%	76	30.3%	17	17.6%	10.5%
6B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	75	25.3%	80	37.5%	18	27.8%	12.2%
6C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	73	19.2%	71	23.9%	16	31.3%	4.8%
6D. Overall satisfaction with health plan's call center service.	75	26.7%	78	34.6%	18	27.8%	7.9%
	7.5	35.2%	70	24.5%	10	26.2%	10.8%
Provider Relations 7A Do you have a Provider Relations representative from this health plan assigned to your practice?	65		65	76.9%	14		
7A. Do you have a Provider Relations representative from this health plan assigned to your practice?	65	72.3%	65		14	64.3%	4.6%
7B. Provider Relations representative's ability to answer questions and resolve problems.	43	39.5%	46	30.4%	8	37.5%	9.1%
7C. Quality of provider orientation process.	66	36.4%	66	21.2%	13	7.7%	15.2%
7D. Quality of written communications, policy bulletins, and manuals.	67	29.9%	78	21.8%	15	33.3%	8.1%

^{*} Range is the difference between Summary Rates shown. Due to the small sample size of More than 5 respondents, this segment is excluded from range calculations.

The Myers Group 6B

^{**} Valid n refers to the total number of respondents answering the item within the subgroup under the column heading.

Note 1: The Overall Satisfaction Summary Rate includes only 8B.

Note 2: The Provider Relations composite is the average of 7B through 7D. It does not include 7A.

Note 3: The Utilization and Quality Management composite is the average of 3A through 3F and does not include custom questions 3G or 3H. The Network/Coordination of Care composite is the average of 4A through 4C and does not include custom questions 4D through 4F.

Segmentation Analysis

Plan Summary Rates by Years in Practice (C)

Louisiana Healthcare Connections
Provider Satisfaction Survey

217 Total Respondents

217 Total Respondents							
Composite/Attribute		Less than 5 years		<u>5 - 15 years</u>		ears or nore	Range*
	Valid n**	%	Valid n**	%	Valid n**	%	95
Overall Satisfaction		58.8%		61.1%		52.9%	8.3%
8A. Would you recommend Louisiana Healthcare Connections to other physicians' practices?	32	71.9%	68	72.1%	62	72.6%	0.7%
8B. Please rate your overall satisfaction with Louisiana Healthcare Connections.	34	58.8%	72	61.1%	70	52.9%	8.3%
8C. Please rate your overall satisfaction with Amerigroup.	27	51.9%	63	57.1%	63	46.0%	11.1%
8D. Please rate your overall satisfaction with Community Health Solutions.	29	79.3%	62	87.1%	58	63.8%	23.3%
8E. Please rate your overall satisfaction with LA Care.	31	51.6%	62	64.5%	57	38.6%	25.9%
8F. Please rate your overall satisfaction with United Healthcare.	33	75.8%	65	86.2%	61	67.2%	18.9%
All Other Plans (Comparative Rating)							
1A. How would you rate Louisiana Healthcare Connections compared to all other health plans you contract with?	42	26.2%	79	24.1%	81	21.0%	5.2%
Finance Issues		33.9%		31.8%		26.1%	7.9%
2A. Consistency of reimbursement fees with your contract rates.	36	33.3%	71	31.0%	78	23.1%	10.3%
2B. Accuracy of claims processing.	35	31.4%	70	35.7%	77	27.3%	8.4%
2C. Timeliness of claims processing.	35	42.9%	71	38.0%	77	28.6%	14.3%
2D. Resolution of claims payment problems or disputes.	32	28.1%	71	22.5%	67	25.4%	5.6%
Utilization and Quality Management		22.5%		23.6%		17.6%	5.9%
3A. Access to knowledgeable UM staff.	31	29.0%	68	22.1%	74	17.6%	11.5%
3B. Procedures for obtaining pre-certification/referral/authorization information.	33	21.2%	71	21.1%	73	19.2%	2.0%
3C. Timeliness of obtaining pre-certification/referral/authorization information.	35	17.1%	71	19.7%	74	17.6%	2.6%
3D. The health plan's facilitation/support of appropriate clinical care for patients.	31	22.6%	71	23.9%	69	13.0%	10.9%
3E. Access to Case/Care Managers from this health plan.	29	17.2%	64	18.8%	68	19.1%	1.9%
3F. Degree to which the plan covers and encourages preventive care and wellness.	36	27.8%	70	35.7%	67	19.4%	16.3%
3G. Extent to which UM staff share review criteria and reasons for adverse determinations.	26	19.2%	63	22.2%	62	14.5%	7.7%
3H. Consistency of review decisions.	28	14.3%	62	22.6%	62	16.1%	8.3%
Network/Coordination of Care		21.9%		15.8%		18.9%	6.1%
4A. The number of specialists in this health plan's provider network.	32	21.9%	67	13.4%	67	19.4%	8.4%
4B. The quality of specialists in this health plan's provider network.	30	26.7%	66	18.2%	65	21.5%	8.5%
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	29	17.2%	63	15.9%	64	15.6%	1.6%
4D. The frequency of feedback/reports from specialists for patients in your care.	30	20.0%	63	17.5%	61	14.8%	5.2%
4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.	24	20.8%	45	13.3%	46	17.4%	7.5%
4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.	23	17.4%	41	12.2%	43	16.3%	5.2%
Pharmacy		20.6%		17.9%		12.7%	7.9%
5A. Consistency of the formulary over time.	34	17.6%	62	14.5%	57	12.3%	5.4%
5B. Extent to which formulary reflects current standards of care.	35	22.9%	66	18.2%	56	12.5%	10.4%
5C. Variety of branded drugs on the formulary.	35	17.1%	62	17.7%	56	12.5%	5.2%
5D. Ease of prescribing your preferred medications within formulary guidelines.	33	24.2%	63	22.2%	54	11.1%	13.1%
5E. Availability of comparable drugs to substitute those not included in the formulary.	33	21.2%	60	16.7%	53	15.1%	6.1%
Health Plan Call Center Service Staff		30.1%		31.0%		22.8%	8.2%
6A. Ease of reaching health plan call center staff over the phone.	31	29.0%	71	25.4%	68	22.1%	7.0%
6B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	31	32.3%	72	37.5%	70	25.7%	11.8%
6C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	31	25.8%	65	29.2%	63	15.9%	13.4%
6D. Overall satisfaction with health plan's call center service.	30	33.3%	72	31.9%	69	27.5%	5.8%
Provider Relations		32.1%		31.9%		26.1%	6.0%
7A. Do you have a Provider Relations representative from this health plan assigned to your practice?	27	66.7%	58	69.0%	59	79.7%	13.0%
7B. Provider Relations representative's ability to answer questions and resolve problems.	14	42.9%	39	38.5%	44	27.3%	15.6%
7C. Quality of provider orientation process.	29	27.6%	60	30.0%	58	24.1%	5.9%
7D. Quality of written communications, policy bulletins, and manuals.	31	25.8%	66	27.3%	63	27.0%	1.5%
2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2							

^{*} Range is the difference between Summary Rates shown. The larger the number, the greater the difference in Summary Rates between segment groups for any given question/composite.

The Myers Group 6C

^{**} Valid n refers to the total number of respondents answering the item within the subgroup under the column heading.

Note 1: The Overall Satisfaction Summary Rate includes only 8B.

Note 2: The Provider Relations composite is the average of 7B through 7D. It does not include 7A.

Note 3: The Utilization and Quality Management composite is the average of 3A through 3F and does not include custom questions 3G or 3H. The Network/Coordination of Care composite is the average of 4A through 4C and does not include custom questions 4D through 4F.

Segmentation Analysis

Louisiana Healthcare Connections

Provider Satisfaction Survey

Plan Summary Rates by Portion of Managed Care Volume Represented by Health Plan (D)

217 Total Respondents

217 Total Respondents	spondents						
Composite/Attribute	<u>0 - 10%</u> Composite/Attribute		<u>11</u>	<u>- 20%</u>	21 - 100%		Range*
	Valid n**	%	Valid n**	%	Valid n**	%	ŭ
Overall Satisfaction		53.0%		59.6%		59.3%	6.5%
8A. Would you recommend Louisiana Healthcare Connections to other physicians' practices?	59	69.5%	42	71.4%	58	75.9%	6.4%
8B. Please rate your overall satisfaction with Louisiana Healthcare Connections.	66	53.0%	47	59.6%	59	59.3%	6.5%
8C. Please rate your overall satisfaction with Amerigroup.	57	52.6%	41	51.2%	52	48.1%	4.6%
8D. Please rate your overall satisfaction with Community Health Solutions.	51	72.5%	40	77.5%	54	77.8%	5.2%
8E. Please rate your overall satisfaction with LA Care.	55	50.9%	40	60.0%	52	44.2%	15.8%
8F. Please rate your overall satisfaction with United Healthcare.	58	74.1%	43	76.7%	54	75.9%	2.6%
All Other Plans (Comparative Rating)							
1A. How would you rate Louisiana Healthcare Connections compared to all other health plans you contract with?	78	20.5%	52	23.1%	64	29.7%	9.2%
Finance Issues		31.2%		29.4%		29.4%	1.8%
2A. Consistency of reimbursement fees with your contract rates.	70	31.4%	50	28.0%	63	25.4%	6.0%
2B. Accuracy of claims processing.	70	31.4%	48	33.3%	62	30.6%	2.7%
2C. Timeliness of claims processing.	71	38.0%	47	34.0%	63	33.3%	4.7%
2D. Resolution of claims payment problems or disputes.	63	23.8%	45	22.2%	60	28.3%	6.1%
Utilization and Quality Management		17.8%		20.1%		25.1%	7.3%
3A. Access to knowledgeable UM staff.	72	18.1%	43	18.6%	58	27.6%	9.5%
3B. Procedures for obtaining pre-certification/referral/authorization information.	73	17.8%	44	15.9%	58	25.9%	10.0%
3C. Timeliness of obtaining pre-certification/referral/authorization information.	74	14.9%	45	20.0%	58	20.7%	5.8%
3D. The health plan's facilitation/support of appropriate clinical care for patients.	69	20.3%	42	16.7%	58	19.0%	3.6%
3E. Access to Case/Care Managers from this health plan.	68	13.2%	39	15.4%	54	27.8%	14.5%
3F. Degree to which the plan covers and encourages preventive care and wellness.	66	22.7%	44	34.1%	60	30.0%	11.4%
3G. Extent to which UM staff share review criteria and reasons for adverse determinations.	61	13.1%	39	23.1%	50	22.0%	10.0%
3H. Consistency of review decisions.	58	17.2%	40	17.5%	53	20.8%	3.5%
Network/Coordination of Care		14.5%		16.3%		24.0%	9.6%
4A. The number of specialists in this health plan's provider network.	60	15.0%	44	13.6%	59	23.7%	10.1%
4B. The quality of specialists in this health plan's provider network.	58	17.2%	42	19.0%	58	27.6%	10.3%
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	54	11.1%	43	16.3%	58	20.7%	9.6%
4D. The frequency of feedback/reports from specialists for patients in your care.	54	14.8%	43	18.6%	56	17.9%	3.8%
4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.	38	7.9%	27	14.8%	49	24.5%	16.6%
4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.	35	8.6%	25	8.0%	46	23.9%	15.9%
Pharmacy		18.4%		11.4%		20.3%	8.9%
5A. Consistency of the formulary over time.	51	17.6%	41	4.9%	56	19.6%	14.8%
5B. Extent to which formulary reflects current standards of care.	52	19.2%	41	9.8%	59	22.0%	12.3%
5C. Variety of branded drugs on the formulary.	50	20.0%	40	10.0%	58	17.2%	10.0%
5D. Ease of prescribing your preferred medications within formulary guidelines.	49	18.4%	38	21.1%	57	19.3%	2.7%
5E. Availability of comparable drugs to substitute those not included in the formulary.	48	16.7%	36	11.1%	56	23.2%	12.1%
Health Plan Call Center Service Staff	10	19.2%		24.9%		39.2%	20.0%
6A. Ease of reaching health plan call center staff over the phone.	64	18.8%	45	24.4%	57	28.1%	9.3%
6B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	65	20.0%	47	27.7%	59	49.2%	29.2%
6C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	60	16.7%	43	20.9%	53	34.0%	17.3%
6D. Overall satisfaction with health plan's call center service.	65	21.5%	45	26.7%	59	45.8%	24.2%
Provider Relations		25.4%		17.5%		44.1%	26.5%
7A. Do you have a Provider Relations representative from this health plan assigned to your practice?	55	70.9%	39	64.1%	50	80.0%	15.9%
7B. Provider Relations representative's ability to answer questions and resolve problems.	36	33.3%	23	17.4%	38	50.0%	32.6%
7C. Quality of provider orientation process.	51	21.6%	41	17.1%	51	41.2%	24.1%
7D. Quality of written communications, policy bulletins, and manuals.	56	21.4%	44	18.2%	56	41.1%	22.9%
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^{*} Range is the difference between Summary Rates shown. The larger the number, the greater the difference in Summary Rates between segment groups for any given question/composite.

The Myers Group 6D

^{**} Valid n refers to the total number of respondents answering the item within the subgroup under the column heading.

Note 1: The Overall Satisfaction Summary Rate includes only 8B.

Note 2: The Provider Relations composite is the average of 7B through 7D. It does not include 7A.

Note 3: The Utilization and Quality Management composite is the average of 3A through 3F and does not include custom questions 3G or 3H. The Network/Coordination of Care composite is the average of 4A through 4C and does not include custom questions 4D through 4F.

217 Total Respondents

217 Total Respondents							
Composite/Attribute	<u>Ph</u>	<u>ysician</u>		ffice nager		urse/ er staff	Range*
	Valid n**	%	Valid n**	%	Valid n**	%	
Overall Satisfaction		34.6%		64.2%		57.8%	6.4%
8A. Would you recommend Louisiana Healthcare Connections to other physicians' practices?	23	47.8%	96	76.0%	44	77.3%	1.2%
8B. Please rate your overall satisfaction with Louisiana Healthcare Connections.	26	34.6%	106	64.2%	45	57.8%	6.4%
8C. Please rate your overall satisfaction with Amerigroup.	23	21.7%	89	56.2%	41	56.1%	0.1%
8D. Please rate your overall satisfaction with Community Health Solutions.	24	66.7%	84	77.4%	42	81.0%	3.6%
8E. Please rate your overall satisfaction with LA Care.	21	33.3%	86	55.8%	44	56.8%	1.0%
8F. Please rate your overall satisfaction with United Healthcare.	24	58.3%	94	78.7%	43	81.4%	2.7%
All Other Plans (Comparative Rating)							
1A. How would you rate Louisiana Healthcare Connections compared to all other health plans you contract	07	44.40/	400	00.00/		04.40/	4.00/
with?	27	11.1%	122	26.2%	56	21.4%	4.8%
Finance Issues		18.9%		29.6%		33.1%	3.5%
2A. Consistency of reimbursement fees with your contract rates.	24	16.7%	110	29.1%	53	32.1%	3.0%
2B. Accuracy of claims processing.	24	16.7%	109	32.1%	50	34.0%	1.9%
2C. Timeliness of claims processing.	24	25.0%	110	34.5%	51	37.3%	2.7%
2D. Resolution of claims payment problems or disputes.	23	17.4%	101	22.8%	48	29.2%	6.4%
Utilization and Quality Management		14.9%		19.3%		26.3%	7.0%
3A. Access to knowledgeable UM staff.	24	16.7%	106	18.9%	46	28.3%	9.4%
3B. Procedures for obtaining pre-certification/referral/authorization information.	23	17.4%	108	17.6%	48	27.1%	9.5%
3C. Timeliness of obtaining pre-certification/referral/authorization information.	23	13.0%	110	19.1%	48	18.8%	0.3%
3D. The health plan's facilitation/support of appropriate clinical care for patients.	25	12.0%	100	19.0%	48	22.9%	3.9%
3E. Access to Case/Care Managers from this health plan.	23	8.7%	95	18.9%	45	22.2%	3.3%
3F. Degree to which the plan covers and encourages preventive care and wellness.	23	21.7%	102	22.5%	49	38.8%	16.2%
3G. Extent to which UM staff share review criteria and reasons for adverse determinations.	24	12.5%	86	20.9%	42	16.7%	4.3%
3H. Consistency of review decisions.	23	17.4%	87	16.1%	44	22.7%	6.6%
Network/Coordination of Care		29.6%		13.8%		21.2%	7.3%
4A. The number of specialists in this health plan's provider network.	24	25.0%	100	12.0%	44	25.0%	13.0%
4B. The quality of specialists in this health plan's provider network.	23	34.8%	97	17.5%	42	21.4%	3.9%
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	24	29.2%	92	12.0%	41	17.1%	5.1%
4D. The frequency of feedback/reports from specialists for patients in your care.	24	29.2%	88	10.2%	43	23.3%	13.0%
4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.	17	35.3%	65	9.2%	35	20.0%	10.8%
4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.	17	35.3%	58	5.2%	33	21.2%	16.0%
Pharmacy		26.2%		12.0%		21.0%	9.0%
5A. Consistency of the formulary over time.	24	25.0%	91	8.8%	39	20.5%	11.7%
5B. Extent to which formulary reflects current standards of care.	26	26.9%	91	12.1%	40	22.5%	10.4%
5C. Variety of branded drugs on the formulary.	26	26.9%	89	9.0%	38	23.7%	14.7%
5D. Ease of prescribing your preferred medications within formulary guidelines.	25	24.0%	85	16.5%	39	20.5%	4.0%
5E. Availability of comparable drugs to substitute those not included in the formulary.	25	28.0%	81	13.6%	39	17.9%	4.4%
Health Plan Call Center Service Staff		25.3%	01	25.8%	- 55	29.9%	4.0%
6A. Ease of reaching health plan call center staff over the phone.	23	26.1%	103	23.3%	44	22.7%	0.6%
6B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	24	29.2%	105	30.5%	45	33.3%	2.9%
6C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	24	20.8%	97	20.6%	41	29.3%	8.6%
	24	25.0%	104		44		5.2%
6D. Overall satisfaction with health plan's call center service.	24		104	28.8%	44	34.1% 24.2%	5.2%
Provider Relations 7A. Do you have a Provider Relations representative from this health plan assigned to your practice?	21	31.3% 61.0%	07	29.9%	27		
7B. Provider Relations representative's ability to answer questions and resolve problems.	21	61.9%	87	73.6%	37	78.4%	4.8%
	12	41.7%	58	37.9%	27	22.2%	15.7%
7C. Quality of provider orientation process.	21	28.6%	87	26.4%	38	23.7%	2.8%
7D. Quality of written communications, policy bulletins, and manuals.	21	23.8%	95	25.3%	45	26.7%	1.4%

^{*} Range is the difference between Summary Rates shown. Due to the small sample size of Physician respondents, this segment is excluded from range calculations.

The Myers Group 6E

^{**} Valid n refers to the total number of respondents answering the item within the subgroup under the column heading.

Note 1: The Overall Satisfaction Summary Rate includes only 8B.

Note 2: The Provider Relations composite is the average of 7B through 7D. It does not include 7A.

Note 3: The Utilization and Quality Management composite is the average of 3A through 3F and does not include custom questions 3G or 3H. The Network/Coordination of Care composite is the average of 4A through 4C and does not include custom questions 4D through 4F.

Note 4: There were no respondents in the Behavioral Health Clinician segment. As such, this segment is excluded from this analysis.

Provider Satisfaction Survey

217 Total Respondents

217 Total Respondents											
	<u>3 o</u>	r fewer	<u>4</u>	1 to 7	8	<u>to 11</u>	<u>12 to 15</u>		More than 15		Barrant
Composite/Attribute	Valid n**	%	Valid n**	%	Valid n**	%	Valid n**	%	Valid n**	%	Range*
Overall Satisfaction		50.0%		85.7%		50.0%		61.0%		53.0%	8.0%
8A. Would you recommend Louisiana Healthcare Connections to other physicians' practices?	2	50.0%	14	85.7%	19	57.9%	35	77.1%	94	71.3%	5.9%
8B. Please rate your overall satisfaction with Louisiana Healthcare Connections.	2	50.0%	14	85.7%	20	50.0%	41	61.0%	100	53.0%	8.0%
8C. Please rate your overall satisfaction with Amerigroup.	1	0.0%	10	60.0%	19	47.4%	35	51.4%	88	48.9%	2.6%
8D. Please rate your overall satisfaction with Community Health Solutions.	1	100.0%	14	78.6%	18	72.2%	36	86.1%	81	70.4%	15.7%
8E. Please rate your overall satisfaction with LA Care.	1	100.0%	11	72.7%	18	44.4%	39	53.8%	83	48.2%	5.7%
8F. Please rate your overall satisfaction with United Healthcare.	2	100.0%	12	83.3%	19	68.4%	37	81.1%	90	73.3%	7.7%
All Other Plans (Comparative Rating)											
1A. How would you rate Louisiana Healthcare Connections compared to all other health plans you contract with?	2	50.0%	16	37.5%	25	24.0%	45	26.7%	116	19.8%	6.8%
Finance Issues		100.0%		39.6%		25.7%		21.9%		30.3%	8.3%
2A. Consistency of reimbursement fees with your contract rates.	2	100.0%	14	42.9%	23	26.1%	43	18.6%	106	28.3%	9.7%
2B. Accuracy of claims processing.	1	100.0%	15	46.7%	22	31.8%	40	22.5%	107	30.8%	8.3%
2C. Timeliness of claims processing.	2	100.0%	15	33.3%	23	30.4%	40	30.0%	107	35.5%	5.5%
2D. Resolution of claims payment problems or disputes.	1	100.0%	14	35.7%	21	14.3%	36	16.7%	102	26.5%	9.8%
Utilization and Quality Management		58.3%		38.2%		21.6%		18.5%		17.2%	1.3%
3A. Access to knowledgeable UM staff.	2	50.0%	14	42.9%	20	30.0%	41	22.0%	98	14.3%	7.7%
3B. Procedures for obtaining pre-certification/referral/authorization information.	2	0.0%	12	50.0%	21	28.6%	42	14.3%	103	15.5%	1.2%
3C. Timeliness of obtaining pre-certification/referral/authorization information.	2	0.0%	12	33.3%	20	15.0%	42	11.9%	106	17.9%	6.0%
3D. The health plan's facilitation/support of appropriate clinical care for patients.	1	100.0%	14	21.4%	21	19.0%	40	20.0%	97	16.5%	3.5%
3E. Access to Case/Care Managers from this health plan.	2	100.0%	11	36.4%	18	11.1%	39	12.8%	93	17.2%	4.4%
3F. Degree to which the plan covers and encourages preventive care and wellness.	2	100.0%	11	45.5%	23	26.1%	40	30.0%	100	22.0%	8.0%
3G. Extent to which UM staff share review criteria and reasons for adverse determinations.	1	100.0%	11	27.3%	19	26.3%	33	18.2%	90	14.4%	3.7%
3H. Consistency of review decisions.	2	0.0%	10	50.0%	18	16.7%	34	11.8%	90	16.7%	4.9%
Network/Coordination of Care		66.7%		27.2%		23.1%		7.7%		18.0%	10.3%
4A. The number of specialists in this health plan's provider network.	2	100.0%	15	20.0%	19	10.5%	39	10.3%	93	18.3%	8.0%
4B. The quality of specialists in this health plan's provider network.	2	100.0%	13	30.8%	17	35.3%	39	12.8%	91	17.6%	4.8%
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	2	0.0%	13	30.8%	17	23.5%	37	0.0%	88	18.2%	18.2%
4D. The frequency of feedback/reports from specialists for patients in your care.	2	0.0%	12	33.3%	19	21.1%	36	5.6%	86	18.6%	13.0%
4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.	2	100.0%	9	44.4%	15	20.0%	30	3.3%	61	14.8%	11.4%
4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your leare.	1	100.0%	9	44.4%	15	20.0%	27	3.7%	57	12.3%	8.6%
Pharmacy		50.0%		32.6%		16.6%		11.9%		14.7%	2.7%
5A. Consistency of the formulary over time.	2	50.0%	14	28.6%	22	9.1%	37	10.8%	79	13.9%	3.1%
5B. Extent to which formulary reflects current standards of care.	2	100.0%	15	33.3%	21	19.0%	39	7.7%	79	15.2%	7.5%
5C. Variety of branded drugs on the formulary.	2	50.0%	14	28.6%	20	20.0%	38	7.9%	78	14.1%	6.2%
5D. Ease of prescribing your preferred medications within formulary guidelines.	2	0.0%	13	30.8%	20	20.0%	36	19.4%	77	15.6%	3.9%
5E. Availability of comparable drugs to substitute those not included in the formulary.	2	50.0%	12	41.7%	20	15.0%	36	13.9%	75	14.7%	0.8%
Health Plan Call Center Service Staff		75.0%		50.0%		13.9%		24.0%		26.4%	2.4%
6A. Ease of reaching health plan call center staff over the phone.	1	0.0%	14	42.9%	20	10.0%	38	23.7%	97	22.7%	1.0%
6B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	2	100.0%	13	46.2%	19	15.8%	39	28.2%	101	32.7%	4.5%
6C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	2	100.0%	13	53.8%	20	15.0%	38	18.4%	88	20.5%	2.0%
6D. Overall satisfaction with health plan's call center service.		100.0%	14	57.1%	20	15.0%	39	25.6%	97	29.9%	4.3%
Provider Relations	2	83.3%		44.9%		12.8%		34.5%		27.0%	7.5%
7A. Do you have a Provider Relations representative from this health plan assigned to your practice?	2	100.0%	11	81.8%	17	52.9%	29	72.4%	88	75.0%	2.6%
7B. Provider Relations representative's ability to answer questions and resolve problems.	2	100.0%	9	55.6%	8	12.5%	20	35.0%	59	33.9%	1.1%
7C. Quality of provider orientation process.	2	50.0%	11	36.4%	15	13.3%	36	36.1%	82	24.4%	11.7%
7D. Quality of provider orientation process.	2	100.0%	14	42.9%	16	12.5%	37	32.4%	92	22.8%	9.6%
7D. Quality of written communications, policy bulletins, and manuals.		100.0%	14	42.3/0	10	12.5/0	31	JZ. 4 /0	32	22.070	9.070

^{*} Range is the difference between Summary Rates shown. Due to the small sample size of respondents with 11 or fewer, these segments are excluded from range calculations.

** Valid n refers to the total number of respondents answering the item within the subgroup under the column heading.

Note 1: The Overall Satisfaction Summary Rate includes only 8B.

The Myers Group 6F

Note 2: The Provider Relations composite is the average of 7B through 7D. It does not include 7A.

Note 3: The Utilization and Quality Management composite is the average of 3A through 3F and does not include custom questions 3G or 3H. The Network/Coordination of Care composite is the average of 4A through 4C and does not include custom questions 4D through 4F.

Plan Summary Rates by Preferred Method of Communication (F)

217 Total Respondents

Composite/Attribute		<u>Mail</u>	Tele	<u>phone</u>	E	a <u>x</u>	Online	e Portal	<u>E-mail</u>		In Person with Provider Other Representative		Range*		
	Valid n**	%	Valid n**	%	Valid n**	%	Valid n**	%	Valid n**	* %	Valid n**	%	Valid n**	%	
Overall Satisfaction		53.8%		66.7%		66.7%		50.0%		61.0%		50.0%		50.0%	12.8%
BA. Would you recommend Louisiana Healthcare Connections to other physicians' practices?	70	70.0%	6	66.7%	40	70.0%	4	75.0%	37	83.8%	2	50.0%	3	33.3%	13.8%
BB. Please rate your overall satisfaction with Louisiana Healthcare Connections.	78	53.8%	6	66.7%	42	66.7%	4	50.0%	41	61.0%	2	50.0%	2	50.0%	12.8%
BC. Please rate your overall satisfaction with Amerigroup.	67	49.3%	5	60.0%	35	57.1%	2	50.0%	37	51.4%	2	50.0%	3	33.3%	7.9%
BD. Please rate your overall satisfaction with Community Health Solutions.	63	74.6%	5	100.0%	36	83.3%	3	66.7%	36	69.4%	2	50.0%	3	100.0%	13.9%
BE. Please rate your overall satisfaction with LA Care.	64	51.6%	5	40.0%	36	55.6%	3	33.3%	36	55.6%	2	50.0%	3	100.0%	4.0%
BF. Please rate your overall satisfaction with United Healthcare.	71	76.1%	5	100.0%	41	82.9%	2	50.0%	36	66.7%	1	100.0%	3	100.0%	16.3%
All Other Plans (Comparative Rating)															
1A. How would you rate Louisiana Healthcare Connections compared to all other health plans you contract with?	87	18.4%	7	14.3%	50	22.0%	6	16.7%	47	38.3%	2	0.0%	3	0.0%	19.9%
Finance Issues		28.7%		21.9%		18.9%		35.7%		42.7%		25.0%		0.0%	23.8%
2A. Consistency of reimbursement fees with your contract rates.	75	30.7%	7	14.3%	44	13.6%	7	42.9%	49	40.8%	2	0.0%	2	0.0%	27.2%
2B. Accuracy of claims processing.	75	32.0%	6	0.0%	41	17.1%	7	28.6%	50	46.0%	2	50.0%	2	0.0%	28.9%
2C. Timeliness of claims processing.	76	30.3%	6	33.3%	43	27.9%	7	42.9%	49	46.9%	2	50.0%	2	0.0%	19.0%
2D. Resolution of claims payment problems or disputes.	73	21.9%	5	40.0%	41	17.1%	7	28.6%	43	37.2%	2	0.0%	2	0.0%	20.1%
Utilization and Quality Management		21.3%		5.6%		16.6%		28.2%		26.2%		0.0%		0.0%	9.6%
3A. Access to knowledgeable UM staff.	77	18.2%	6	0.0%	42	23.8%	7	28.6%	39	28.2%	2	0.0%	2	0.0%	10.0%
3B. Procedures for obtaining pre-certification/referral/authorization information.	74	21.6%	6	0.0%	41	17.1%	6	33.3%	48	22.9%	2	0.0%	2	0.0%	5.8%
3C. Timeliness of obtaining pre-certification/referral/authorization information.	72	22.2%	6	0.0%	43	11.6%	7	14.3%	48	22.9%	2	0.0%	2	0.0%	11.3%
BD. The health plan's facilitation/support of appropriate clinical care for patients.	74	21.6%	5	0.0%	40	7.5%	6	33.3%	44	27.3%	1	0.0%	2	0.0%	19.8%
BE. Access to Case/Care Managers from this health plan.	66	18.2%	6	33.3%	39	15.4%	6	16.7%	41	22.0%	2	0.0%	2	0.0%	6.6%
3F. Degree to which the plan covers and encourages preventive care and wellness.	73	26.0%	5	0.0%	37	24.3%	7	42.9%	47	34.0%	2	0.0%	2	0.0%	9.7%
3G. Extent to which UM staff share review criteria and reasons for adverse determinations.	64	17.2%	5	0.0%	37	10.8%	5	20.0%	37	32.4%	2	0.0%	2	0.0%	21.6%
3H. Consistency of review decisions.	64	21.9%	5	20.0%	37	10.8%	6	16.7%	38	21.1%	2	0.0%	2	0.0%	11.1%
Network/Coordination of Care		19.1%		24.4%		8.2%		16.7%		24.0%	_	83.3%	_	0.0%	15.9%
4A. The number of specialists in this health plan's provider network.	70	18.6%	6	33.3%	41	9.8%	6	16.7%	41	19.5%	2	50.0%	2	0.0%	9.8%
4B. The quality of specialists in this health plan's provider network.	68	19.1%	5	40.0%	41	7.3%	6	16.7%	38	34.2%	2	100.0%	2	0.0%	26.9%
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	66	19.7%	5	0.0%	40	7.5%	6	16.7%	38	18.4%	1	100.0%	2	0.0%	12.2%
4D. The frequency of feedback/reports from specialists for patients in your care.	66	19.7%	5	0.0%	38	7.9%	6	33.3%	38	18.4%	1	100.0%	2	0.0%	11.8%
4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.	46	17.4%	5	0.0%	25	16.0%	5	20.0%	32	15.6%	1	100.0%	2	0.0%	1.8%
4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.	44	18.2%	5	0.0%	22	9.1%	5	20.0%	29	13.8%	1	100.0%	2	0.0%	9.1%
Pharmacy		19.2%		12.0%		7.0%		20.0%		20.8%		0.0%		0.0%	13.8%
5A. Consistency of the formulary over time.	64	15.6%	5	0.0%	38	10.5%	5	20.0%	36	13.9%	2	0.0%	2	0.0%	5.1%
5B. Extent to which formulary reflects current standards of care.	68	23.5%	5	20.0%	38	10.5%	5	20.0%	34	11.8%	2	0.0%	3	0.0%	13.0%
5C. Variety of branded drugs on the formulary.	66	21.2%	5	20.0%	36	5.6%	5	20.0%	34	14.7%	2	0.0%	3	0.0%	15.7%
5D. Ease of prescribing your preferred medications within formulary guidelines.	63	15.9%	5	20.0%	36	8.3%	5	20.0%	33	33.3%	2	0.0%	3	0.0%	25.0%
5E. Availability of comparable drugs to substitute those not included in the formulary.	61	19.7%	5	0.0%	34	0.0%	5	20.0%	33	30.3%	2	0.0%	3	0.0%	30.3%
Health Plan Call Center Service Staff		24.2%		16.7%		20.4%		25.0%		42.1%		25.0%		0.0%	21.7%
6A. Ease of reaching health plan call center staff over the phone.	75	24.0%	6	0.0%	40	22.5%	5	20.0%	39	33.3%	2	0.0%	2	0.0%	10.8%
6B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	75	26.7%	6	33.3%	40	20.0%	5	40.0%	43	48.8%	2	100.0%	2	0.0%	28.8%
6C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	70	20.0%	6	0.0%	42	19.0%	5	20.0%	33	36.4%	2	0.0%	2	0.0%	17.3%
6D. Overall satisfaction with health plan's call center service.	77	26.0%	6	33.3%	40	20.0%	5	20.0%	40	50.0%	2	0.0%	2	0.0%	30.0%
Provider Relations		23.5%		0.0%		29.8%		32.8%	1.0	39.9%	_	33.3%	_	33.3%	16.4%
7A. Do you have a Provider Relations representative from this health plan assigned to your practice?	63	69.8%	3	66.7%	34	61.8%	3	100.0%	36	83.3%	2	100.0%	2	100.0%	21.6%
7B. Provider Relations representative's ability to answer questions and resolve problems.	41	26.8%	2	0.0%	19	42.1%	3	33.3%	28	46.4%	2	50.0%	2	0.0%	19.6%
7C. Quality of provider orientation process.	66	24.2%	5	0.0%	34	20.6%	5	40.0%	34	35.3%	2	50.0%	2	50.0%	14.7%
7D. Quality of written communications, policy bulletins, and manuals.	67	19.4%	4	0.0%	41	26.8%	1	25.0%	42	38.1%	2	0.0%	2	50.0%	18.7%

^{*} Range is the difference between Summary Rates shown. Due to the small sample size of respondents with Telephone, Online Portal, In Person with Provider Representative, and Other, these segments are excluded from range calculations.

The Myers Group 6G

^{**} Valid n refers to the total number of respondents answering the item within the subgroup under the column heading.

Note 1: The Overall Satisfaction Summary Rate includes only 8B.

Note 2: The Provider Relations composite is the average of 7B through 7D. It does not include 7A.

Note 3: The Utilization and Quality Management composite is the average of 3A through 3F and does not include custom questions 4D through 4F.

Segmentation Analysis

Plan Summary Rates by Survey Methodology

Louisiana Healthcare Connections

Provider Satisfaction Survey

217 Total Respondents

217 Total Respondents	ents						
Composite/Attribute	!	<u>Mail</u>	P	<u>hone</u>	<u>Internet</u>		Range*
	Valid n**	%	Valid n**	%	Valid n**	%	
Overall Satisfaction		47.1%		68.4%		35.7%	21.3%
8A. Would you recommend Louisiana Healthcare Connections to other physicians' practices?	61	68.9%	93	75.3%	12	66.7%	6.4%
8B. Please rate your overall satisfaction with Louisiana Healthcare Connections.	68	47.1%	98	68.4%	14	35.7%	21.3%
8C. Please rate your overall satisfaction with Amerigroup.	65	36.9%	80	63.8%	11	36.4%	26.8%
8D. Please rate your overall satisfaction with Community Health Solutions.	64	67.2%	77	83.1%	12	75.0%	15.9%
8E. Please rate your overall satisfaction with LA Care.	63	34.9%	81	67.9%	10	30.0%	33.0%
8F. Please rate your overall satisfaction with United Healthcare.	67	64.2%	85	84.7%	11	81.8%	20.5%
All Other Plans (Comparative Rating)							
1A. How would you rate Louisiana Healthcare Connections compared to all other health plans you	66	20.20/	107	10.10/	4.4	25.70/	10.00/
contract with?	66	30.3%	127	18.1%	14	35.7%	12.2%
Finance Issues		42.9%		21.7%		29.1%	21.3%
2A. Consistency of reimbursement fees with your contract rates.	65	40.0%	110	20.9%	14	28.6%	19.1%
2B. Accuracy of claims processing.	65	46.2%	107	22.4%	14	28.6%	23.7%
2C. Timeliness of claims processing.	64	48.4%	110	27.3%	14	28.6%	21.2%
2D. Resolution of claims payment problems or disputes.	62	37.1%	100	16.0%	13	30.8%	21.1%
Utilization and Quality Management		24.1%		18.4%		19.6%	5.7%
3A. Access to knowledgeable UM staff.	57	21.1%	109	20.2%	12	25.0%	0.9%
3B. Procedures for obtaining pre-certification/referral/authorization information.	61	26.2%	108	17.6%	13	7.7%	8.6%
3C. Timeliness of obtaining pre-certification/referral/authorization information.	61	24.6%	110	14.5%	13	15.4%	10.0%
3D. The health plan's facilitation/support of appropriate clinical care for patients.	62	24.2%	101	14.9%	13	23.1%	9.3%
3E. Access to Case/Care Managers from this health plan.	59	20.3%	97	17.5%	10	10.0%	2.8%
3F. Degree to which the plan covers and encourages preventive care and wellness.	64	28.1%	102	25.5%	11	36.4%	2.6%
3G. Extent to which UM staff share review criteria and reasons for adverse determinations.	56	23.2%	87	16.1%	11	9.1%	7.1%
3H. Consistency of review decisions.	59	27.1%	85	12.9%	12	8.3%	14.2%
Network/Coordination of Care	- 00	22.3%		14.2%		26.1%	8.1%
4A. The number of specialists in this health plan's provider network.	60	18.3%	100	15.0%	10	30.0%	3.3%
4B. The quality of specialists in this health plan's provider network.	58	25.9%	96	16.7%	10	30.0%	9.2%
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	57	22.8%	91	11.0%	11	18.2%	11.8%
4D. The frequency of feedback/reports from specialists for patients in your care.	58	22.4%	87	12.6%	12	16.7%	9.8%
4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.	37	16.2%	72	15.3%	9	22.2%	0.9%
4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.	35	17.1%	65	12.3%	9	22.2%	4.8%
Pharmacy SA Consistency of the formular over time		24.8%	00	11.2%	40	15.0%	13.7%
5A. Consistency of the formulary over time.	54	20.4%	90	10.0%	12	16.7%	10.4%
5B. Extent to which formulary reflects current standards of care.	56	23.2%	91	12.1%	12	25.0%	11.1%
5C. Variety of branded drugs on the formulary.	58	24.1%	85	11.8%	12	0.0%	12.4%
5D. Ease of prescribing your preferred medications within formulary guidelines.	56	28.6%	83	12.0%	12	16.7%	16.5%
5E. Availability of comparable drugs to substitute those not included in the formulary.	54	27.8%	81	9.9%	12	16.7%	17.9%
Health Plan Call Center Service Staff		32.4%		23.4%		30.2%	9.0%
6A. Ease of reaching health plan call center staff over the phone.	62	30.6%	99	21.2%	12	16.7%	9.4%
6B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	65	30.8%	99	30.3%	13	46.2%	0.5%
6C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	60	28.3%	92	18.5%	11	27.3%	9.9%
6D. Overall satisfaction with health plan's call center service.	65	40.0%	97	23.7%	13	30.8%	16.3%
Provider Relations		39.2%		22.8%		33.9%	16.4%
7A. Do you have a Provider Relations representative from this health plan assigned to your practice?	57	68.4%	77	77.9%	14	64.3%	9.5%
7B. Provider Relations representative's ability to answer questions and resolve problems.	36	47.2%	55	27.3%	8	37.5%	19.9%
7C. Quality of provider orientation process.	53	34.0%	84	21.4%	12	33.3%	12.5%
7D. Quality of written communications, policy bulletins, and manuals.	55	36.4%	96	19.8%	13	30.8%	16.6%

^{*} Range is the difference between Summary Rates shown. Due to the small sample size of Internet respondents, this segment is excluded from range calculations.

The Myers Group 6H

^{**} Valid n refers to the total number of respondents answering the item within the subgroup under the column heading.

Note 1: The Overall Satisfaction Summary Rate includes only 8B.

Note 2: The Provider Relations composite is the average of 7B through 7D. It does not include 7A.

Note 3: The Utilization and Quality Management composite is the average of 3A through 3F and does not include custom questions 3G or 3H. The Network/Coordination of Care composite is the average of 4A through 4C and does not include custom questions 4D through 4F.



7. Correlation Analysis

The provider's overall satisfaction with the plan (8B) is an important measure of how well the plan is meeting the needs and expectations of the provider network. Thus, the collection and review of data related to the provider's rating of Louisiana Healthcare Connections could provide your plan with the fundamental information needed to help maintain or even improve the overall caliber of your plan.

Not all plan services impact providers' overall rating of the plan to the same degree. A correlation analysis was run to determine which attributes have the strongest relationship with overall satisfaction with the plan (8B). The correlation analysis produces the Pearson correlation coefficient, which illustrates the strength of the relationship between each attribute and overall satisfaction. A correlation coefficient of '1' represents the strongest relationship (a perfect positive correlation), while a coefficient of '0' represents the weakest relationship (no correlation). A correlation coefficient approaching a value of +/- 1.000 represents an increasing association of the attribute with overall satisfaction.

The attributes with the highest correlation coefficients are noted below. Attributes are listed in descending order of correlation coefficient.

Attribute	Correlation Coefficient
3G. Extent to which UM staff share review criteria and reasons for adverse determinations.	0.660
2D. Resolution of claims payment problems or disputes.	0.636
3D. The health plan's facilitation/support of appropriate clinical care for patients.	0.589
3H. Consistency of review decisions.	0.582
2B. Accuracy of claims processing.	0.580
3A. Access to knowledgeable UM staff.	0.569
5C. Variety of branded drugs on the formulary.	0.569
3E. Access to Case/Care Managers from this health plan.	0.553
5D. Ease of prescribing your preferred medications within formulary guidelines.	0.530

The correlation analysis presented on page 7A lists each applicable attribute and the corresponding Pearson correlation coefficient. Summary Rates for Louisiana Healthcare Connections are displayed. Summary Rates for the 2012 TMG Medicaid Book of Business 25th and 75th percentiles are provided where applicable to help identify how Louisiana Healthcare Connections performs for each attribute. Attributes identified as highly correlated with overall satisfaction are highlighted in tan.

Chart 7A

Correlation Analysis

Attribute Correlations to Overall Satisfaction with Louisiana Healthcare Connections (8B)

Provider Satisfaction Survey

217 Total Respondents

Attributes	Correlation	2013 Louisiana		Medicaid ercentiles
Attributes	Coefficient**	Summary Rate Score*	25th Percentile	75th Percentile
Finance Issues				
2A. Consistency of reimbursement fees with your contract rates.	0.467	28.0%	39.1%	51.0%
2B. Accuracy of claims processing.	0.580	31.2%	47.5%	62.6%
2C. Timeliness of claims processing.	0.497	34.6%	48.9%	59.8%
2D. Resolution of claims payment problems or disputes.	0.636	24.6%	45.2%	59.3%
Utilization and Quality Management				
3A. Access to knowledgeable UM staff.	0.569	20.8%	46.5%	52.0%
3B. Procedures for obtaining pre-certification/referral/authorization information.	0.507	19.8%	39.5%	55.2%
3C. Timeliness of obtaining pre-certification/referral/authorization information.	0.510	17.9%	41.0%	58.3%
3D. The health plan's facilitation/support of appropriate clinical care for patients.	0.589	18.8%	43.4%	58.4%
3E. Access to Case/Care Managers from this health plan.	0.553	18.1%	41.1%	61.9%
3F. Degree to which the plan covers and encourages preventive care and wellness.	0.428	27.1%	47.8%	61.3%
3G. Extent to which UM staff share review criteria and reasons for adverse determinations.	0.660	18.2%	NA	NA
3H. Consistency of review decisions.	0.582	17.9%	NA	NA
Network/Coordination of Care				
4A. The number of specialists in this health plan's provider network.	0.380	17.1%	42.8%	57.9%
4B. The quality of specialists in this health plan's provider network.	0.389	20.7%	49.6%	66.8%
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	0.323	15.7%	41.7%	55.9%
4D. The frequency of feedback/reports from specialists for patients in your care.	0.357	16.6%	NA	NA
4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.	0.467	16.1%	NA	NA
4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.	0.397	14.7%	NA	NA
Pharmacy				
5A. Consistency of the formulary over time.	0.473	14.1%	27.6%	45.9%
5B. Extent to which formulary reflects current standards of care.	0.500	17.0%	29.6%	47.7%
5C. Variety of branded drugs on the formulary.	0.569	15.5%	27.4%	44.2%
5D. Ease of prescribing your preferred medications within formulary guidelines.	0.530	18.5%	28.1%	44.0%
5E. Availability of comparable drugs to substitute those not included in the formulary.	0.514	17.0%	25.3%	42.6%
Health Plan Call Center Service Staff				
6A. Ease of reaching health plan call center staff over the phone.	0.497	24.3%	52.6%	64.4%
6B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	0.349	31.6%	56.8%	63.9%
6C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	0.439	22.7%	56.4%	62.6%
6D. Overall satisfaction with health plan's call center service.	0.491	30.3%	58.6%	68.0%
Provider Relations				
7B. Provider Relations representative's ability to answer questions and resolve problems.	0.456	35.4%	66.4%	79.3%
7C. Quality of provider orientation process.	0.434	26.8%	40.1%	47.4%
7D. Quality of written communications, policy bulletins, and manuals.	0.396	26.2%	41.9%	47.7%

 $^{^{\}star}\,$ Summary Rate Scores are the sum of the most favorable response options.

Note: Attributes with a strong relationship with 8B (Overall satisfaction with Louisiana Healthcare Connections) are shown in tan.

At or above the 75th percentile.

At or above the 25th percentile, but below the 75th percentile; or no benchmark.

Below the 25th percentile.

The Myers Group 7A

^{**} A correlation coefficient approaching a value of +/- 1.000 represents an increasing association of the attribute with overall satisfaction. See Technical Notes for a thorough explanation of the correlation analysis.



8. Priority Matrix

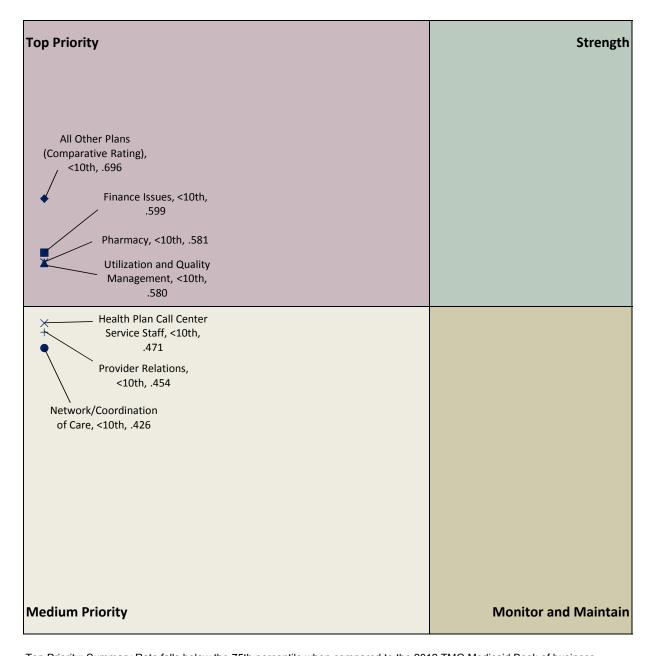
TMG offers a graphical display of relative performance of survey composites, along with each composite's relative 'importance' as it relates to overall satisfaction with Louisiana Healthcare Connections. The matrix on page 8A is divided into four sections. A composite's placement in the matrix is determined by its correlation with overall satisfaction and its percentile ranking as compared to the 2012 TMG Medicaid Book of Business⁵ percentile scores.

Composites highly correlated with overall satisfaction as determined by the Correlation Analysis and scoring at or above the 75th percentile are considered plan *Strengths* and are placed in the top right cell. Composites highly correlated with overall satisfaction but scoring below the 75th percentile are considered *Top Priority* and are placed in the top left cell. *Monitor and Maintain* includes those composites in the bottom right cell, which are not highly correlated with overall satisfaction but rank at or above the 75th percentile. Composites that are not highly correlated with overall satisfaction and rank below the 75th percentile are considered *Medium Priority* and are placed in the bottom left cell.

 Top Priority Highly correlated with overall satisfaction 	Strength Highly correlated with overall satisfaction
Summary Rate Score falls below the 75 th percentile	Summary Rate Score is at or above the 75 th percentile
Medium Priority	Monitor and Maintain
Summary Rate Score falls below the 75 th percentile	Summary Rate Score is at or above the 75 th percentile

Chart 8A

⁵ The Myers Group's 2012 Medicaid Book of Business consists of data from 4 plans representing 700 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine.



Top Priority: Summary Rate falls below the 75th percentile when compared to the 2012 TMG Medicaid Book of business benchmark on composites that are moderately or highly correlated with Overall Satisfaction with Louisiana Healthcare Connections.

Strength: Summary Rate at or above the 75th percentile when compared to the 2012 TMG Medicaid Book of business benchmark on composites that are moderately or highly correlated with Overall Satisfaction with Louisiana Healthcare Connections.

Medium Priority: Summary Rate falls below the 75th percentile when compared to the 2012 TMG Medicaid Book of business benchmark on composites that are slightly associated with Overall Satisfaction with Louisiana Healthcare Connections.

Monitor and Maintain: Summary Rate at or above the 75th percentile when compared to the 2012 TMG Medicaid Book of business benchmark on composites that are slightly associated with Overall Satisfaction with Louisiana Healthcare Connections.

The Myers Group 8A



9. Loyalty Analysis

Provider loyalty develops when the health plan consistently meets or exceeds the expectations of its providers. A loyal provider is very satisfied with the plan and willing to recommend the plan to other physicians' practices.

Page 9A presents an assessment of provider loyalty with Louisiana Healthcare Connections. Provider loyalty is based upon responses to question 8B, ('Please rate your overall satisfaction with Louisiana Healthcare Connections') and question 8A, ('Would you recommend Louisiana Healthcare Connections to other physicians' practices?').

The different zones within the analysis are defined as follows:

Loyal Zone: Providers are completely satisfied and would recommend the plan to other physicians' practices.

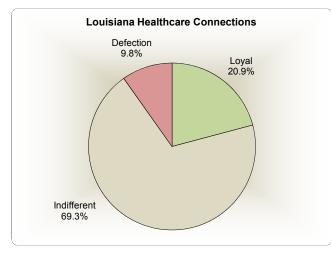
Defection Zone: Providers are completely dissatisfied and would not recommend the plan to other physicians' practices.

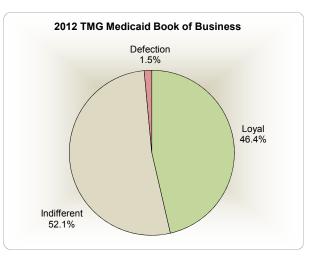
Indifferent Zone: Providers are mixed as to whether they are satisfied or whether they would recommend the plan to other physicians' practices.

Chart 9A

Provider Satisfaction Survey

163 Eligible Respondents*





Zone Definitions

	Recommend Health Plan to other physicians' practices? (8A)		Overall satisfaction with Health Plan? (8B)			
Loyal	"Yes"	And	"Completely satisfied"			
Indifferent		All other responses				
Defection	"No"	And	"Completely dissatisfied"			

Loyalty Scores & Comparison

Zone	201:	3 Loyalty	2012 TMG Medicaid Book of Business	Significance Testing**
Zone	Valid n	Percent	Percent	Significance resumg
Loyal	34	20.9%	46.4%	Significantly lower
Indifferent	113	69.3%	52.1%	Significantly higher
Defection	16	9.8%	1.5%	Unable to Test

^{*} Eligible Respondents are those answering both questions.

The Myers Group 9A

^{**} Significance Testing - "Significantly lower" denotes the result that would be found if a hypothesis test were conducted to determine if the percentage is lower. "Significantly higher" denotes the result that would be found if a hypothesis test were conducted to determine if the percentage is higher. "Not significant" denotes that there was insufficient support to conclude that there was a significant difference in percentages. "Unable to Test" denotes that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.



10. Technical Notes

Presented alphabetically by subject area

Composite Categories

The Louisiana Healthcare Connections Provider Satisfaction Survey includes eight composite categories. Each composite category represents an overall aspect of plan quality and is comprised of similar questions. For each composite, an overall score is computed. The composite score is the average of the Summary Rates of the questions comprising a composite. For example, the *Finance Issues* composite is the average of the Summary Rates of questions 2A through 2D.

Correlation Analysis

Correlation analysis is run between attributes and the overall satisfaction variable as measured by question 8B, *Please rate your overall satisfaction with Louisiana Healthcare Connections.* The Pearson's product moment correlation coefficient, *r*, is used to measure the strength of the linear association between each attribute and the overall satisfaction variable. These scores can range from –1 (perfect negative relationship) to +1 (perfect positive relationship).

The correlation analysis is designed to compare continuous variables. As such, not every survey attribute, such as those with dichotomous response options ("Yes" or "No"), is applicable for use within the correlation analysis.

Demographic Categories

TMG collapses several of the practice characteristic variables into fewer segments than those defined by the survey. The consolidation of these categories with small samples allows for more valid between-group statistical comparisons.

Mean Score

Mean Scores are an average of all responses. They are calculated by assigning a value of five to the most favorable response option, a four to the next most favorable response option, and so on until a value of one is reached. These values are assuming that there are five response options. If there are a different number of response options, the most favorable response option receives a value equal to the total number of response options. When every response receives a value, the values are averaged to give the Mean Score.

Multiple Mark Response

Some questions allow for respondents to mark multiple response options. As a result, response options to these questions typically add up to more than 100%. Also note that Multiple Mark Responses contain an extra row of information in the Banner Tables called 'Total Valid Responses,' which displays the total number of responses given.



Response Rate

The formula for determining the response rate is:

For a mail and Internet with phone follow-up survey methodology, the following dispositions are considered ineligible: deceased, not eligible, bad address, wrong number, fax/pager/modem/data line, not in service, number changed, cell phone, and disconnected.

Rounding of Data

For many survey questions, you will often see listed response distribution percentages that do not add to exactly 100%. In some cases, they may add to 99.9% and in others to 100.1%. This tends to cause some concern, as it gives the appearance of a valid response being omitted or even counted twice. The following explanation is provided as a means to understanding how rounding affects the percentages shown in the report.

The key to understanding how rounding affects listed percentages is to know that the survey question's entire valid response set is being accounted for. That is, although the percentages do not add to exactly 100%, the entire response set is represented in the percentages shown.

In many cases, dividing a number of responses by the total number of valid responses provides a percentage that will go out to an infinite number of decimal places. An example of this is dividing one by three: No matter how many decimal places this quotient is taken out, it will always be a continuous string of three's. As a result, we see the following when adding each of the item response percentages:

Response 1:	n = 1	.3	.33	.333	.3333
Response 2:	n = 1	.3	.33	.333	.3333
Response 3:	<u>n = 1</u>	<u>.3</u>	<u>.33</u>	<u>.333</u>	<u>.3333</u>
	3	.9	.99	.999	.9999

It is evident that no matter how many decimal places we take our quotient out, we will never be able to add the results to exactly '1' (or 100%), even though all '3' responses are included in the percentage calculation. Through consultation with a number of our clients, TMG has determined that using a single decimal place in the reporting of percentages provides an adequate level of detail. Typically, when percentages are calculated in our report applications, all decimal places are computed, but only the first decimal place is actually shown. As such, adding rounded single-digit decimals may not equal 100%. If the same figures were taken out an additional decimal place, however, they might then add to exactly 100%. Or, as the example above shows, they may never equal an even 100%. Finally, when rounding, TMG employs the standard practice of rounding down any number from one to four and rounding up any number from five to nine.



Sampling Error

Sampling error can be thought of as the extent to which survey results may differ from what would be obtained if every eligible member in the sample had been surveyed. The size of such error depends largely on the percentage distributions (i.e., the number of respondents selecting each answer category) and the number of members surveyed. The more disproportionate the percentage distributions or the larger the sample size is, the smaller the error.

The following tables may be used in estimating approximate sampling error. The first table shows the range (plus or minus the figure shown) within which the population percentage could be expected to lay **95** out of 100 times a sample of that size and percentage distribution would be selected. The second table shows the range (plus or minus the figure shown) within which the population percentage could be expected to lay **90** out of 100 times a sample of that size and percentage distribution would be selected.

95% Confidence Interval Approximate Half Width (+/-) for Population Percent										
Valid		Perc	entage Distribu	tion						
Responses	50/50	50/50 60/40 70/30 80/20 90/10								
50	13.9	13.6	12.7	11.1	8.3					
100	9.8	9.6	9.0	7.8	5.9					
200	6.9	6.8	6.4	5.5	4.2					
300	5.7	5.5	5.2	4.5	3.4					
400	4.9	4.8	4.5	3.9	2.9					
500	4.4	4.3	4.0	3.5	2.6					
750	3.6	3.5	3.3	2.9	2.1					
850	3.4	3.3	3.1	2.7	2.0					

90% Confidence Interval Approximate Half Width (+/-) for Population Percent									
Valid		Perc	entage Distribu	tion					
Responses	50/50	60/40	70/30	80/20	90/10				
50	11.6	11.4	10.7	9.3	7.0				
100	8.2	8.1	7.5	6.6	4.9				
200	5.8	5.7	5.3	4.7	3.5				
300	4.7	4.7	4.4	3.8	2.8				
400	4.1	4.0	3.8	3.3	2.5				
500	3.7	3.6	3.4	2.9	2.2				
750	3.0	2.9	2.8	2.4	1.8				
850	2.8	2.8	2.6	2.3	1.7				

The sampling error table is used in the following manner. Assume that 'Overall satisfaction with the health plan' received a Summary Rate of seventy percent (70.0%)



from a sample of 500 valid responses. For a 95% confidence interval, look at the table where the sample size of 500 intersects the percentage distribution of 70/30. The margin of error for this sample size is four percentage points (4.0%). Therefore, on average, in 95 out of 100 similar samples, the 95% confidence interval (e.g., 66.0% to 74.0%) will span the true unknown population percentage.

Statistical Significance

A statistically significant hypothesis testing result means that — based on the sample(s), conditions/assumptions, and level of significance — there is sufficient evidence to conclude the alternate hypothesis. For example, when testing for a difference between a population Summary Rate and a set constant score (The Myers Group Book of Business), statistical significance would mean that there is sufficient support for the statement that there is a difference between the population Summary Rate and the set constant score.

Summary Rates

All survey questions have specific response options designated for inclusion in Summary Rate scoring. These scores are computed as the proportion of favorable responses to the total number of valid responses for each question. For example, the rating questions' Summary Rates are computed using the following proportion:

Well above average + Somewhat above average + Well above average + Somewhat above average + Average + Somewhat below average + Well below average

The overall satisfaction questions use the following scale specifically asking about the respondent's level of satisfaction:

Completely satisfied + Somewhat satisfied

Completely satisfied + Somewhat satisfied + Neither dissatisfied nor satisfied + Somewhat dissatisfied + Completely dissatisfied

The Myers Group Aggregate Book of Business (2012)

The 2012 TMG Aggregate Book of Business is a benchmark that is comprised of data from 8 plans representing 1,524 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine.

The Myers Group Medicaid Book of Business (2012)

The 2012 TMG Medicaid Book of Business is a benchmark that is comprised of data from 4 plans representing 700 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine.

The Myers Group Medicaid Respondent-Level Benchmark (2012)

The 2012 TMG Medicaid Respondent-Level Benchmark contains respondent-level data from 4 plans representing 700 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. This benchmark segments results by Survey Respondent



(Physician and Office Manager) and Area of Medicine (Primary Care and Specialty) and is shown on the respondent-level, meaning that ratings from the respondents are averaged to compute the Summary Rate.

Valid n

The term valid n is used to show the number of respondents giving a valid response to a particular question. It gives information only on the question it refers to and no others. Valid responses are those that actually rate an attribute. They do not include responses such as 'N/A' because a response of 'N/A' does not rate an attribute. The difference in value between the valid n and the total number of respondents completing the survey is a result of removing invalid responses and respondents submitting a survey but not answering that particular question.

Z-Test

To test for true differences in population score(s), statistical inference methods are applied. In particular, hypothesis testing is done to draw conclusions about differences in scores between a population and a set constant (e.g., a Summary Rate versus The Myers Group Book of Business score). The hypothesis of no difference is rejected if the absolute value of the test statistic exceeds a critical value corresponding to a level of significance. The test statistic used depends on which of these types of hypothesis tests are performed.

When checking for a statistically significant difference between a Summary Rate for a population and a set constant score—with various conditions/assumptions—TMG uses the statistic test that follows:

$$z = \frac{\hat{p} - p_0}{\sqrt{\frac{p_0 q_0}{n}}}$$

 $z = \frac{\hat{p} - p_0}{\sqrt{\frac{p_0 q_0}{n}}}$ $\hat{p} = \text{Summary Rate from the sample}$ $p_0 = \text{Set constant score for comparison}$ $q_0 = 1 - (\text{Set constant score}) = (1 - p_0)$

For hypothesis testing of composites, n equals the maximum denominator of the composite questions. With a large sample size (generally n>30, technically $np_0 \ge 5$ and $nq_0 \ge 5$), the z-statistic has a distribution that can be treated as the standard normal distribution. Thus, the hypothesis that the population 'Summary Rate' equals the set constant score, p_0 , is rejected at a 0.05 level of significance when the absolute value of the z-statistic exceeds 1.96 (obtained from cumulative standard normal distribution table).



11. Louisiana Healthcare Connections Survey Tool

Overall Satisfaction (Cont.)
What can Louisiana Healthcare Connections do to improve its service to your organization?

Thank You	L
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Please return the completed survey in the postage-paid envelope to:



The Myers Group Attn: Survey Processing Department PO Box 100072

Duluth, GA 30096-9805 Toll-Free: 1-800-692-0041

For Internal Purposes Only: 916007

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PHYSICIAN SATISFACTION SURVEY

Answer all the questions by shading the circle with blue or black ink. Like this

With the exception of Question F, all responses to the survey are kept confidential and only The Myers Group has access to them. If you want to know more about this study, please call The Myers Group at 1-800-692-0041.

Demographics

Please answer the following questions about you and your practice.

- A. Please indicate your area of medicine. (Mark all that apply)
 - O₄ Primary Care
 - O_B Specialty
 - Oc Behavioral Health Clinician
- B. How many physicians are in your practice?

 - O_2 2-5 physicians O_3 More than 5 physicians
- C. How many years have you been in this practice?
 - O₁ Less than 5 years
 - O₂ 5-15 years
 - O₃ 16 years or more
- D. What portion of your managed care volume is represented by Louisiana Healthcare Connections?
 - O₁ None
 - O₂ 10% or less
 - O₃ 11-20%
 - O₄ 21-30% O₅ 31-50%
 - O₆ 51-75%
 - O₇ 76-100%

- Please mark who is completing this survey. (Mark only one)
 - O₁ Physician
 - O₂ Behavioral Health Clinician
 - O₃ Office Manager
 - O₄ Nurse
 - O₅ Other staff
- What is your preferred method of receiving communications from this health plan?
 - O₁ Mail
 - O₂ Telephone
 - O₃ Fax
 - O₄ Online portal
 - O₅ E-mail (Please indicate vour e-mail address):
 - O₆ In person from your Provider Representative
 - O₇ Other
- Please indicate the number of insurance companies with which you or your practice participates.
 - O₁ 3 or fewer
 - O₂ 4 to 7
 - O₃ 8 to 11
 - O₄ 12 to 15 O₅ More than 15
- **Comparative Rating**

This first question asks you to think about Louisiana Healthcare Connections in comparison to all of the other health plans that vou work with.

	Well <u>below</u> average	Somewhat <u>below</u> average	Average	Somewhat <u>above</u> averago	Well <u>above</u> average	010000000000000000000000000000000000000
you	>	S	⋖	S	>	-
,	O_1	O_2	Оз	\bigcirc_4	O ₅	(

Please continue inside

1A. How would you rate Louisiana Healthcare Connections compared to all other health plans contract with?

no compared to all early meant plane year	O_1 O_2 O_3 O_4 O_4

|--|

These questions ask about Finance Issues. Please rate Louisiana Healthcare Connections in the following service areas when compared to your experience with other health plans you work with.

- 2A. Consistency of reimbursement fees with your contract rates. O_1 O_2 O_3 O_4 O_5 O_6 2B. Accuracy of claims processing. O_1 O_2 O_3 O_4 O_5 O_6
- 2C. Timeliness of claims processing. $O_1 \ O_2 \ O_3 \ O_4 \ O_5 \ O_6$
- $O_1 \ O_2 \ O_3 \ O_4 \ O_5 \ O_6$ 2D. Resolution of claims payment problems or disputes.

Utilization and Quality Management

These questions ask about Utilization and Quality Management. Please rate Louisiana Healthcare Connections in the following service areas when compared to your experience with other health plans you work with.

		Well <u>below</u> average Somewhat <u>below</u> average Average Somewhat <u>above</u> average Well <u>above</u> average
3A.	Access to knowledgeable UM staff.	O_1 O_2 O_3 O_4 O_5 O_6
3B.	Procedures for obtaining pre-certification/referral/authorization information.	$O_1 \ O_2 \ O_3 \ O_4 \ O_5 \ O_6$
3C.	Timeliness of obtaining pre-certification/referral/authorization information.	\bigcirc_1 \bigcirc_2 \bigcirc_3 \bigcirc_4 \bigcirc_5 \bigcirc_6
3D.	The health plan's facilitation/support of appropriate clinical care for patients.	O_1 O_2 O_3 O_4 O_5 O_6
3E.	Access to Case/Care Managers from this health plan.	$O_1 \ O_2 \ O_3 \ O_4 \ O_5 \ O_6$
3F.	Degree to which the plan covers and encourages preventive care and wellness.	$O_1 \ O_2 \ O_3 \ O_4 \ O_5 \ O_6$
3G.	Extent to which UM staff share review criteria and reasons for adverse determinations.	$O_1 \ O_2 \ O_3 \ O_4 \ O_5 \ O_6$
3H.	Consistency of review decisions.	O ₁ O ₂ O ₃ O ₄ O ₅ O ₆

Network/Coordination of Care

These questions ask about Louisiana Healthcare Connections' network providers. Please rate Louisiana Healthcare Connections in the following service areas when compared to your experience with other health plans you work with.

4A. The number of specialists in this health plan's provider network.	$O_1 \ O_2 \ O_3 \ O_4 \ O_5 \ O_6$
4B. The quality of specialists in this health plan's provider network.	O_1 O_2 O_3 O_4 O_5 O_6
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	$O_1 \ O_2 \ O_3 \ O_4 \ O_5 \ O_6$
4D. The frequency of feedback/reports from specialists for patients in your care.	O ₁ O ₂ O ₃ O ₄ O ₅ O ₆
4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.	O ₁ O ₂ O ₃ O ₄ O ₅ O ₆
4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.	$O_1 \ O_2 \ O_3 \ O_4 \ O_5 \ O_6$

Pharmacy Pharmacy

These questions ask about Louisiana Healthcare Connections' formulary. Please rate Louisiana Healthcare Connections in the following service areas when compared to your experience with other health plans you work with.

5A.	Consistency of the formulary over time.	O_1 O_2 O_3 O_4 O_5 O_6
5B.	Extent to which formulary reflects current standards of care.	$O_1 \ O_2 \ O_3 \ O_4 \ O_5 \ O_6$
5C.	Variety of branded drugs on the formulary.	$O_1 \ O_2 \ O_3 \ O_4 \ O_5 \ O_6$
5D.	Ease of prescribing your preferred medications within formulary guidelines.	$O_1 \ O_2 \ O_3 \ O_4 \ O_5 \ O_6$
5E.	Availability of comparable drugs to substitute those not included in the formulary.	O_1 O_2 O_3 O_4 O_5 O_6

Health Plan Call Center Service Staff

These questions ask about your experiences when calling Louisiana Healthcare Connections' call center. Please rate Louisiana Healthcare Connections in the following service areas when compared to your experience with other health plans you work with.

		Well <u>below</u> average Somewhat <u>below</u> avera; Average Somewhat <u>above</u> avera
6A.	Ease of reaching health plan call center staff over the phone.	O_1 O_2 O_3 O_4 O_5 O_6
6B.	Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	O_1 O_2 O_3 O_4 O_5 O_6
6C.	Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	$O_1 \ O_2 \ O_3 \ O_4 \ O_5 \ O_6$
6D.	Overall satisfaction with health plan's call center service.	$O_1 \ O_2 \ O_3 \ O_4 \ O_5 \ O_6$

Provider Relations

These questions ask about your experiences with Louisiana Healthcare Connections' Provider Relations department. Please rate Louisiana Healthcare Connections in the following service areas when compared to your experience with other health plans you work with.

7. Do you have a Provider Relations representative from this health plan assigned to your.

/A.	practice?				-		
	O ₁ Yes	Well <u>below</u> average	Somewhat <u>below</u> average	Average	Somewhat above average	Well <u>above</u> average	Not applicable
7B.	Provider Relations representative's ability to answer questions and resolve problems.	O ₁	O_2	Оз	O_4	05	O 6
7C.	Quality of provider orientation process.	O ₁	O ₂	Оз	04	05	, O ₆
7D.	Quality of written communications, policy bulletins, and manuals.	O ₁	O ₂	Оз	04	05	O 6

Overall Satisfaction

These questions ask about your overall satisfaction with Louisiana Healthcare Connections. Additionally, please rate your satisfaction with the other plans listed and provide feedback on how Louisiana Healthcare Connections can improve.

8A. Would you recommend Louisiana Healthcare Connections to other physicians' practices?
O ₁ Yes
O_2 No
Please rate your overall satisfaction with each of the following health plans:

		Complete Somewh Neither Somewh Complete
8B.	Louisiana Healthcare Connections	$O_1 O_2 O_3 O_4 O_5 O_6$
8C.	Amerigroup	O_1 O_2 O_3 O_4 O_5 O_6
8D.	Community Health Solutions	O_1 O_2 O_3 O_4 O_5 O_6
8E.	LA Care	\bigcirc_1 \bigcirc_2 \bigcirc_3 \bigcirc_4 \bigcirc_5 \bigcirc_6
8F.	United Health Care	\bigcirc_1 \bigcirc_2 \bigcirc_3 \bigcirc_4 \bigcirc_5 \bigcirc_6



12. Comments

Open-ended questions often provide valuable insight into topics not specifically addressed on the survey tool. Respondents can give feedback regarding issues, concerns, compliments, and praise based upon their interaction with the health plan or simply provide additional demographic information. The 2013 Louisiana Healthcare Connections survey tool includes two open-ended questions:

- ✓ Question F. What is your preferred method of receiving communications from this health plan? E-mail address.
- ✓ Question 9. What can Louisiana Healthcare Connections do to improve its service to your organization?

Verbatim comments from this question are included within an Excel data file (916007 Comments Report). These responses are indexed by key questions and demographics to provide more information about the individual respondent and include the following:

- ✓ Willingness to recommend Louisiana Healthcare Connections to other physicians' practices (8A)
- ✓ Overall Satisfaction with Louisiana Healthcare Connections (8B)
- ✓ Area of Medicine (A)
- ✓ Physicians in Practice (B)
- √ Years in Practice (C)
- ✓ Portion of Managed Care Volume Represented by Health Plan (D)
- ✓ Survey Respondent (E)
- ✓ Preferred Method of Communication (F)
- ✓ Insurance Participation (G)
- ✓ Survey Methodology



13. Banner Tables

The tables in the following section show detailed results for each question in your survey. Responses are organized across the banner table by various practice characteristics. In order to aid you in viewing the data contained in these tables, the following explanation is provided.

The different categories by which the data are 'sliced' are presented as column headers. Each category has a set of possible response choices that are listed immediately below the headers. The left-most column in each table is labeled 'Total' and shows results for the entire set of valid responses.

On the left side of the page, you will see three row headers: 'Total,' 'Total Answering,' and 'No Answer.' 'Total' represents the number of possible responses that meet the criteria for inclusion into the given question. For questions that are asked of all respondents, this figure will typically equal the valid number of responses to the current survey. 'Total Answering' shows how many of the total respondents provided valid answers to the given question. Finally, 'No Answer' is the number of individuals who did not respond to the question, even though they were eligible to do so.

You will notice that, in some cases, a survey response choice shows only the number of respondents providing that answer with no percentage. These response options are not considered valid responses by standard analytical practice and are therefore omitted from the percentage calculations.

In some tables, an additional row is added to show Summary Rates and is labeled 'Summary Rate.' These scores are a single question response or combination of question responses considered to be favorable. It is included at the bottom of each of these tables and is shown with the response option or options that make up the score listed beside it.

Information regarding the statistical testing of results is shown in the lower left corner of each table. The first line displays the Comparison Groups. These are the columns (denoted by uppercase letters and separated by a slash (/)) in which statistical tests are run. Columns (B) and (C), for example, show results for the Primary Care and Specialty groups. These columns are compared in the statistical test to each other, but not to any other columns. If a letter is present, whether uppercase or lowercase, its corresponding percentage is significantly higher than the specified percentages within its comparison group.

The second line shows the type or types of statistical tests that are included in the table. The last two lines define the meaning of the uppercase and lowercase letters. If a percentage has an uppercase letter beneath it, a significant difference exists at the 95% level of confidence. A lowercase letter denotes a significant difference at the 90% level of confidence. A banner table example is presented on the following page with key points noted.



AREA	\cap E	MED	
AKEA	OF.	MED	ICIIVE

		-	
	Total	Primary Care	Specialty
	(A)	(B)	(C)
Total	433 ¹	22	407
Total Answering	429 ² 100.0%	22 100.0%	403 100.0%
No Answer	4 ³	-	4
Yes	198 46.2%	6 27.3%	189 46.9% B ⁴
No	231 53.8%	16 72.7 C ⁵	214 53.1%

- 1. For the given question, 433 respondents were eligible to answer. For questions asked of all respondents, this figure will equal the number of complete surveys. In other cases, it will equal the number of appropriate responses to a gate question. Gate questions are those that filter out respondents who would not logically be able to answer follow-up questions. For example, respondents who say that they do not have a personal doctor would not be able to provide a doctor rating, and so they are filtered out of the response set for the rating question.
- 2. Of those who were eligible to answer this question, 429 provided a valid response.
- 3. Four respondents all Specialists who were eligible to answer the question did not provide an answer.
- 4. Specialists provided a significantly higher percentage of 'Yes' responses than PCPs. The 'B' below the percentage refers to the group in column B in this case, PCPs and signifies that the 46.9% is significantly higher than the 27.3%. Because the 'B' is capitalized, we know that the difference is significant at the 95% level.
- 5. PCPs provided a significantly higher percentage of 'No' responses. As in the previous note, the 'C' refers to the group in column C Specialists and is significant at 95%.

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Demographics 1

	_	
		Please indicate your area of medicine. (Mark all that apply)
		How many physicians are in your practice?
Page 3		How many years have you been in this practice?
Page 4	D.	What portion of your managed care volume is represented by Louisiana Healthcare Connections?
Page 5	E.	Please mark who is completing this survey. (Mark only one)
Page 6	F.	What is your preferred method of receiving communications from this health plan?
Page 7		Please indicate the number of insurance companies with which you or your practice participates.
Page 8	1A.	How would you rate Louisiana Healthcare Connections compared to all other health plans you contract with?
Page 9	2A.	Consistency of reimbursement fees with your contract rates.
Page 1	.02в.	Accuracy of claims processing.
Page 1	.12C.	Timeliness of claims processing.
Page 1	.22D.	Resolution of claims payment problems or disputes.
Page 1	.33A.	Access to knowledgeable UM staff.
Page 1	.43в.	Procedures for obtaining pre-certification/referral/authorization information.
Page 1	.53C.	Timeliness of obtaining pre-certification/referral/authorization information.
Page 1	.63D.	The health plan's facilitation/support of appropriate clinical care for patients.
Page 1	.73E.	Access to Case/Care Managers from this health plan.
Page 1	.83F.	Degree to which the plan covers and encourages preventive care and wellness.
Page 1	.94A.	The number of specialists in this health plan's provider network.
Page 2	04B.	The quality of specialists in this health plan's provider network.
Page 2	214C.	The timeliness of feedback/reports from specialists in this health plan's provider network.
Page 2	25A.	Consistency of the formulary over time.
Page 2	.з5в.	Extent to which formulary reflects current standards of care.
Page 2	45C.	Variety of branded drugs on the formulary.
Page 2	.55D.	Ease of prescribing your preferred medications within formulary guidelines.
Page 2	65E.	Availability of comparable drugs to substitute those not included in the formulary.
Page 2	76A.	Ease of reaching health plan call center staff over the phone.
Page 2	86в.	Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).
Page 2	96C.	Helpfulness of health plan call center staff in obtaining referrals for patients in your care.
Page 3	06D.	Overall satisfaction with health plan's call center service.
Page 3	317A.	Do you have a Provider Relations representative from this health plan assigned to your practice?

Page 32.....7B. Provider Relations representative's ability to answer questions and resolve problems.

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Page	33	.7C.	Quality	of	provider	orientation	process.
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Page 347D	Quality of	written	communications	nolicy	hulleting	and	manuale

Page 358A.	Would you recommend	Louisiana Healthcare	Connections to	ther physicians!	practices?

Page 368B.	Please rate	your overall	satisfaction '	with	Louisiana	Healthcare	Connections.
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- Page 37.....8C. Please rate your overall satisfaction with Amerigroup.
- Page 38......8D. Please rate your overall satisfaction with Community Health Solutions.
- Page 39.....8E. Please rate your overall satisfaction with LA Care.
- Page 40.....8F. Please rate your overall satisfaction with United Healthcare.
- Page 41.....3G. Extent to which UM staff share review criteria and reasons for adverse determinations.
- Page 42.....3H. Consistency of review decisions.
- Page 43.....4D. The frequency of feedback/reports from specialists for patients in your care.
- Page 44.....4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.
- Page 45......4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.

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Demographics 2

		Please indicate your area of medicine. (Mark all that apply)
Page 47	в.	How many physicians are in your practice?
Page 48	c.	How many years have you been in this practice?
Page 49	D.	What portion of your managed care volume is represented by Louisiana Healthcare Connections?
Page 50	E.	Please mark who is completing this survey. (Mark only one)
Page 51	F.	What is your preferred method of receiving communications from this health plan?
Page 52	G.	Please indicate the number of insurance companies with which you or your practice participates.
Page 53	1A.	How would you rate Louisiana Healthcare Connections compared to all other health plans you contract with?
Page 54	2A.	Consistency of reimbursement fees with your contract rates.
Page 55	2в.	Accuracy of claims processing.
Page 56	2C.	Timeliness of claims processing.
Page 57	2D.	Resolution of claims payment problems or disputes.
Page 58	ЗА.	Access to knowledgeable UM staff.
Page 59	3в.	Procedures for obtaining pre-certification/referral/authorization information.
Page 60	3C.	Timeliness of obtaining pre-certification/referral/authorization information.
Page 61	3D.	The health plan's facilitation/support of appropriate clinical care for patients.
Page 62	3E.	Access to Case/Care Managers from this health plan.
Page 63	3F.	Degree to which the plan covers and encourages preventive care and wellness.
Page 64	4A.	The number of specialists in this health plan's provider network.
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Page 67	5A.	Consistency of the formulary over time.
Page 68	5в.	Extent to which formulary reflects current standards of care.
Page 69	5C.	Variety of branded drugs on the formulary.
Page 70	5D.	Ease of prescribing your preferred medications within formulary guidelines.
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A. Please indicate your area of medicine. (Mark all that apply)

	Total Answering	Primary	: Medicine =	вн	i	n Pract 2-5		===== 1 <5	Practic 5-15	e ===== 16 or	=====			Physician	вн		Nurse/ Other		4 to	======	icipatio ======= 12 to 15	
Total Eligible	21'	7 162	65	8	91	98	24	42	84	86	83	53	67	7 28		129	57		16	27	48	120
local Eligible	21	/ 102	. 65	•	91	30	24	42	04	. 00	03	55		20	_	129	31		. 10	21	40	120
Total Valid Responses	23!	5 182	84	19	93	109	29	45	96	89	86	57	7 76	5 28	-	145	59) 2	17	29	56	126
Total Respondents	214	4 162	65	8	90	97	23	42	83	84	82	51	67	7 28	_	127	56	. 2	16	26	48	118
-	100.09	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.09	100.0%		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Primary Care	16:	2 162	14	6	75	72	12	31	66	62	57	40) 54	1 23	_	100	36	. 2	11	19	39	88
•	75.79	100.09	21.5%	75.0%	83.3%	74.2%	52.2%	73.8%	79.5%	73.8%	69.5%	78.4%	80.69	82.1%		78.7%	64.3%	100.0%	68.8%	73.1%	81.2%	74.6%
Specialty	6!	5 14	65	5	16	33	15	12	25	26	27	15	5 19	9 5	-	39	21		6	10	14	33
	30.49	8.6%	100.0%	62.5%	17.8%	34.0%	65.2%	28.6%	30.1%	31.0%	32.9%	29.4%	28.49	17.9%		30.7%	37.5%	5	37.5%	38.5%	29.2%	28.0%
Behavioral Health		3 6	5	8	2	4	2	2	5	1	2	2	2 3	3 -	-	6	2		-	-	3	5
Clinician	3.79	8 3.79	7.7%	100.0%	2.2%	4.1%	8.7%	4.8%	6.0%	1.2%	2.4%	3.9%	4.59	is a		4.7%	3.6%	5			6.2%	4.2%

B. How many physicians are in your practice?

														====== Su		spondent		=====	Insurand	ce Part	icipati	on ====
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager		3 or fewer		8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D) (E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	;	8 91	98	24	42	84	86	83	53	67	28		129	57	2	16	27	48	120
Total Answering	213 100.09				8 91 % 100.0%	98 100.0%										128 100.0%			16 100.0%			119 100.0%
No Answer	4	1 3	1				-	-	3	1	1	2	1	. 1		1	1	-	-	1	2	. 1
Solo	91 42.79				2 91 % 100.0%		-	15 35.7%		46 54.1% HI	47.6%				-	60 46.9% N		1 50.0%	7 43.8%	14 53.8%		
2 - 5 physicians	98 46.09			50.0	4 - %	- 98 100.0%				27 31.8%						54 42.2%			8 50.0%		19 41.3%	
More than 5 physicians	24 11.3%			25.0	2 - %	-	24 100.0%	_	7 8.6%	12 14.1%		8 15.7%	8 12.1%	22.2%		14 10.9%		1 50.0%	1 6.2%	2 7.7%	6 13.0%	13 10.9%

C. How many years have you been in this practice?

														====== Su					Insuranc	e Part	icipati ======	on =====
	Total Answering	Primary Care	Specialty	BH Clin.	Solo		>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager		3 or fewer		8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	. 86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	212 100.0%	159 100.0%			90 100.0%	95 100.0%	23 100.0%									126 100.0%			15 100.0%	26 100.0%		118 100.0%
No Answer	5	3	2	-	1	3	1	-	-	-	2	1	2	-	-	3	2	-	1	1	1	2
Less than 5 years	42 19.8%				15 16.7%	23 24.2%	4 17.4%	42 100.0%		-	12 14.8%		16 24.6% L			21 16.7%	14 25.5%		3 20.0%	5 19.2%	10 21.3%	
5 - 15 years	84 39.6%				29 32.2%	45 47.4% E	7 30.4%	-	84 100.0%		35 43.2%		22 33.8%			49 38.9%	24 43.6%		8 53.3%	10 38.5%	18 38.3%	
16 years or more	86 40.6%		41.3%	12.5%	46 51.1% F	27 28.4%	12 52.2% F	-	-	86 100.0%	34 42.0%					56 44.4% q		1 50.0%	4 26.7%	11 42.3%		

D. What portion of your managed care volume is represented by Louisiana Healthcare Connections?

														====== Su								
	_				1												Nurse/					
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.		<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager			4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)			(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	3 67	28	-	129	57	2	16	27	48	120
Total Answering	203 100.0%			7 100.0%	86 100.0%	90 100.0%										120 100.0%	52 100.0%		14 100.0%	26 100.0%		
No Answer	14	. 11	. 4	1	5	8	1	9	4	1	-	-		-	-	. 9	5	-	2	1	2	6
None	5 2.5%	_		-	3 3.5%	2 2.2%		1 3.0%	3.8%	1.2%	_	-		3.6%	-	2.5%	1 1.9%	-	-	1 3.8%	1 2.2%	3 2.6%
10% or less	78 38.4%			2 28.6%	36 41.9%	34 37.8%		11 33.3%						28.6%		40.8%			3 21.4%	7 26.9%	15 32.6%	
11 - 20%	53 26.1%			2 28.6%	22 25.6%	21 23.3%	8 34.8%	5 15.2%	23 28.8% h	28.2%		53 100.0%		21.4%		28.3%			1 7.1%	8 30.8% S	12 26.1% S	28.1%
21 - 30%	34 16.7%			1 14.3%	18 20.9% g	14 15.6%	2 8.7%	7 21.2%	9 11.2%	18 21.2% i		-	- 34 50.7%	-	-	15.8%		1 50.0%	5 35.7% tv	3 11.5%	12 26.1% V	11.4%
31 - 50%	22 10.8%			2 28.6%	6 7.0%	12 13.3%		8 24.2% iJ	8 10.0%	6 7.1%	-	-	- 22 32.8%			10 8.3%		-	3 21.4%	3 11.5%	5 10.9%	11 9.6%
51 - 75%	8 3.9%	5 3.3%	_	-	-	6 6.7%	1 4.3%	-	5 6.2% j	1 1.2%	-	-	- 8 11.9%			3.3%	1 1.9%	-	1 7.1%	4 15.4% uv	1 2.2%	1.8%
76 - 100%	3 1.5%	2.0%	-	-	1 1.2%	1 1.1%	1 4.3%	1 3.0%	-	2.4%	-	-	- 3 4.5%	7.1%		0.8%	-	1 50.0%	1 7.1%	-	-	1 0.9%

E. Please mark who is completing this survey. (Mark only one)

														====== Su								
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager		3 or fewer	4 to 7		12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	. 98	24	42	84	. 86	83	53	67	2 28	3 -	129	57	2	16	27	48	120
Total Answering	214 100.0%				90 100.0%			41 100.0%								129 100.0%		_	16 100.0%		48 100.0%	117 100.0%
No Answer	3	3	-	-	1	. 1	-	1	1	. 1	. 1	. 1	. 1	-	-	-	-	-	-	-	-	3
Physician	28 13.1%				7.8%	14 14.4%		6 14.6%	10 12.0%			11.5%	13 19.7%			-	-	-	4 25.0%	3 11.1%	7 14.6%	14 12.0%
Behavioral Health Clinician	-	_	-	_	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Office Manager	129 60.3%				60.7%			21 51.2%							- -	129 100.0%		2 100.0% STUV	5 31.2%	14 51.9%	30 62.5% S	63.2%
Nurse	11 5.1%		_	. -	3.3%	7.2%	-	-	9.6% J	2.4%	2.4%	5.89	6.1%	i -	-	-	11 19.3%		3 18.8% u	4 14.8% uv	1 2.1%	3 2.6%
Other staff	46 21.5%				20 22.2%			14 34.1% ij	19.3%				15 22.7%		-	-	46 80.7%		4 25.0%	6 22.2%	10 20.8%	

F. What is your preferred method of receiving communications from this health plan?

														===== Su								
			: Medicine :		: ==== <u>1</u>	n Pract:	ice ===	===== 1	Practic	e =====		Volume					Nurse/					
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician		Office Manager	Other	3 or fewer		8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)		(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	212 100.0%				88 100.0%	97 100.0%	23 100.0%		83 100.0%		80 100.0%					126 100.0%	56 100.0%		16 100.0%	26 100.0%		118 100.0%
No Answer	5	5 4	1	1	. 3	1	1	1	1	3	3	-	1	1	-	3	1	-	-	1	2	2
Mail	90 42. 5%			14.3%	41 46.6%	35 36.1%	12 52.2%		33 39.8%		45 56.2% LM	37.7%				51 40.5%	22 39.3%	1 50.0%	4 25.0%	13 50.0% s		54 45.8% s
Telephone	7 3.3%	7 5 4.4%		-	2.3%	5 5.2%	-	2 4.9%	1 1.2%	4 4.8%	3 3.8%	3 5.7%	1 1.5%	_		3.2%	1 1.8%	-	-	-	3 6.5%	4 3.4%
Fax	50 23.6%			_	23 26.1%	22 22.7%		10 24.4%	22 26.5%		12 15.0%		15 22.7%	_		32 25.4% N	26.8%	50.0%	7 43.8% V	7 26.9%	12 26.1%	21 17.8%
Online portal	7 3.3%	7 5 4.4%	_	1 14.3%	. 3 3.4%	4 4.1%	-	2 4.9%	3 3.6%	2 2.4%	1 1.2%	2 3.8%	4 6.1%	_		1.6%	4 7.1%	-	1 6.2%	-	2 4.3%	4 3.4%
E-mail	53 25.0%			_		28 28.9%	5 21.7%	11 26.8%	21 25.3%		17 21.2%		22 33.3%			35 27.8% N			4 25.0%	6 23.1%	11 23.9%	31 26.3%
In person from your Provider Representative	2 0.9%	_	1.6%	-	-	2 2.1%	-	-	1 1.2%	1 1.2%	1 1.2%	-	1 1.5%	_		0.8%	-	-	-	-	-	2 1.7%
Other	3 1.4%	1.3%	-	-	. 1 1.1%	1 1.0%	1 4.3%	-	2 2.4%	1 1.2%	1 1.2%	-	2 3.0%	_		1 0.8%	1 1.8%	-	-	-	1 2.2%	2 1.7%

G. Please indicate the number of insurance companies with which you or your practice participates.

														====== Su								
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years		0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager		3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	3 -	129	57	2	16	27	48	120
Total Answering	213 100.0%						23 100.0%	41 100.0%								125 100.0%						120 100.0%
No Answer	4	3	2	-	-	3	1	1	3	-	1	-	-	-	-	4	-	-	-	-		-
3 or fewer	2 0.9%	_		-	1.1%	-	1 4.3%	1 2.4%	-	1 1.2%	-	-	3.0%			1.6%	-	2 100.0%	-	-	-	-
4 to 7	16 7.5%				7.7%	8 8.4%	1 4.3%	3 7.3%	9.9%	_	_	-	10 14.9% KL	14.3%	i -	4.0%			16 100.0%		-	-
8 to 11	27 12.7%				14 15.4%	10 10.5%		5 12.2%		11 12.8%		15.1%	3 10 5 14.9%			14 11.2%			-	27 100.0%		-
12 to 15	48 22.5%				3 21 5 23.1%		6 26.1%	10 24.4%								30 24.0%			-	-	- 48 100.0%	
More than 15	120 56.3%						13 56.5%	22 53.7%			55 67.1% M		40.3%			74 59.2%			-	-	-	120 100.0%

1A. How would you rate Louisiana Healthcare Connections compared to all other health plans you contract with?

		====== Area of ====== === Physicians ==== ==== Years in ==== === Managed Care === == ====== Medicine ====== === in Practice === ==== Practice ==== ===== Volume ====== ==																				
		======	Medicine	======	==== 11	n Pract	ıce ===	=====]	Practic	e ====	=====	Volume	. =====	. =======		======	====== Nurse/	=====	======	======		======
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager	Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(8)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	207 100.0%	155 100.0%			87 100.0%	93 100.0%										122 100.0%			16 100.0%			116 100.0%
No Answer	4	. 3	1	-	2	1	1	-	3	1	2	1		. 1		3	-	-	-	2	1	-
Well below average	22 10.6%			_	5 5.7%	9 9.7%	7 30.4% EF		7 8.9%	8 9.9%	6 7.7%	5 9.6%	10 15.6%		5	6 4.9%	4 7.1%	1 50.0%	2 12.5%	3 12.0%	3 6.7%	13 11.2%
Somewhat below average	23 11.1%				11 12.6%	10 10.8%	1 4.3%	2 4.8%	8 10.1%	12 14.8% h	12.8%		′ 6 5 9.4%	i 1 i 3.7%		17 13.9% N		-	1 6.2%	4 16.0%	4 8.9%	14 12.1%
Average	114 55.1%				49 56.3%	51 54.8%	13 56.5%									67 54.9%	35 62.5% n		7 43.8%	12 48.0%		
Somewhat above average	32 15.5%			_	15 17.2% G			•	10 12.7%				i 14 i 21.9% l			20 16.4% N		1 50.0%	3 18.8%	_	10 22.2%	
Well above average	16 7.7%			1 14.3%	7 8.0%	7 7.5%	1 4.3%	4 9.5%	9 11.4% j	3 3.7%	4 5.1%	7 13.5%	′ 5 5 7.8%	i 2 i 7.49		12 9.8% Q		-	3 18.8%	1 4.0%	2 4.4%	
Not Applicable	6	5 4	3	1	2	4	-	-	2	4	3	-	. 3	-		4	1	-	-	-	2	4
Summary Rate - Well above average/Somewhat above average	48 23.2%			4 57.1% bc	22 25.3% G			11 26.2%	19 24.1%	17 21.0%	16 20.5%	12 23.1%				32 26.2% N	21.4%	1 50.0%	6 37.5%	6 24.0%	12 26.7%	

2A. Consistency of reimbursement fees with your contract rates.

														: ===== Su								
																	Nurse/					
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager		3 or fewer			12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(8)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	3 -	129	57	2	16	27	48	120
Total Answering	189 100.0%				83 100.0%		17 100.0%	36 100.0%		78 100.0%						110 100.0%	53 100.0%		14 100.0%	23 100.0%	43 100.0%	106 100.0%
No Answer	14	. 9	5	-	6	4	4	4	4	5	7	-	3	3	3 -	8	3	-	-	3	4	6
Well below average	16 8.5%			1 14.3%	4.8%	11 12.6% e	1 5.9%	2 5.6%	8 11.3%	6 7.7%	7 10.0%	3 6.0%	5 7.9%	-	i -	7.3%	4 7.5%	-	1 7.1%	1 4.3%	-	14 13.2% t
Somewhat below average	19 10.1%			-	7 8.4%	7 8.0%	4 23.5%	2 5.6%	3 4.2%	13 16.7% hI	11.4%	6 12.0%	-		5	14 12.7% Q	1 1.9%	-	1 7.1%	1 4.3%	6 14.0%	11 10.4%
Average	101 53.4%				47 56.6%	45 51.7%	8 47.1%	20 55.6%	38 53.5%	41 52.6%	33 47.1%	27 54.0%				56 50.9%			6 42.9%	15 65.2%	29 67.4% V	51 48.1%
Somewhat above average	35 18.5%		11.3%	3 42.9%	18 21.7%		3 17.6%	9 25.0%	12 16.9%	13 16.7%			9 14.3%	_	-	21 19.1% N		50.0%	3 21.4%	5 21.7%	6 14.0%	19 17.9%
Well above average	18 9.5%			1 14.3%	7 8.4%	10 11.5%	1 5.9%	3 8.3%	10 14.1%	5 6.4%	6 8.6%	5 10.0%	7 11.1%	12.5%	•	11 10.0%	4 7.5%	1 50.0%	3 21.4%	1 4.3%	2 4.7%	11 10.4%
Not Applicable	14	. 9	7	1	. 2	7	3	2	9	3	6	3	1	. 1	-	11	1	-	2	1	1	8
Summary Rate - Well above average/Somewhat above average	53 28.0%		18.9%				4 23.5%	12 33.3%	22 31.0%	18 23.1%		14 28.0%			i -	32 29.1%		2 100.0% STUV	6 42.9% u	6 26.1%	8 18.6%	30 28.3%

2B. Accuracy of claims processing.

														====== Su								
			Medicine	======	==== 1	n Practi	ice ===	===== F	Practic	e =====	=====	Volume					Nurse/					
	Total Answering	Primary Care	Specialty	BH Clin.	Solo		>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office	Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	186 100.0%				80 100.0%	86 100.0%	17 100.0%	35 100.0%	70 100.0%		70 100.0%					109 100.0%	50 100.0%		15 100.0%	22 100.0%		107 100.0%
No Answer	14	. 9	5	-	6	4	4	3	4	6	7	1	3	3	-	8	3	-	-	3	4	6
Well below average	13 7.0%		5 9.3%	1 14.3%	3.8%	8 9.3%	2 11.8%	2 5.7%	3 4.3%	7 9.1%	5 7.1%	3 6.2%	5 8.1%	_	5	2 1.8%	3 6.0%	-	1 6.7%	-	1 2.5%	11 10.3% U
Somewhat below average	18 9.79			-	4 5.0%	9 10.5%	3 17.6%	4 11.4%	6 8.6%	8 10.4%	7 10.0%	6 12.5%	4 6.5%	3 12.5%		12 11.0%	3 6.0%	-	1 6.7%	2 9.1%	4 10.0%	11 10.3%
Average	97 52.2१				46 57.5%	41 47.7%	10 58.8%	18 51.4%	36 51.4%		36 51.4%					60 55.0%	27 54.0%		6 40.0%	13 59.1%	26 65.0% sv	52 48.6%
Somewhat above average	41 22.0%			28.6%	19 23.8%	20 23.3%	2 11.8%	7 20.0%	17 24.3%	16 20.8%	18 25.7%		13 21.0%			27 24.8% N	12 24.0% N	100.0%	6 40.0%	4 18.2%	9 22.5%	20 18.7%
Well above average	17 9.1%			1 14.3%	8 10.0%	8 9.3%	-	4 11.4%	8 11.4%	5 6.5%	4 5.7%	7 14.6%	6 9.7%	-		8 7.3%	5 10.0%	-	1 6.7%	3 13.6%	-	13 12.1%
Not Applicable	17	13	6	1	. 5	8	3	4	10	3	6	4	2	. 1		12	4	1	1	2	4	7
Summary Rate - Well above average/Somewhat above average	58 31.2%		22.2%		27 33.8% G		2 11.8%	11 31.4%	25 35.7%	21 27.3%	22 31.4%					35 32.1% n	17 34.0% n	1 100.0% STUV	7 46.7% u	7 31.8%	9 22.5%	33 30.8%

2C. Timeliness of claims processing.

														====== Su								
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager	Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)) (B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	7 162	65	8	91	98	24	42	84	86	83	53	67	28	3 -	129	57	2	16	27	48	120
Total Answering	188 100.09				80 100.0%		18 100.0%									110 100.0%	51 100.0%		15 100.0%	23 100.0%		107 100.0%
No Answer	15	5 10	5	-	7	4	4	4	. 6	5	7	2	3	3	3 -	9	3	-	-	3	4	7
Well below average	11 5.99		_	1 14.3%	3 3.8%	6.9%	1 5.6%	2 5.7%	4.2%	6 7.8%	4 5.6%	2 4.3%	5 7.9%	-	5	3 2.7%	2 3.9%	-	-	1 4.3%	2 5.0%	8 7.5%
Somewhat below average	11 5.9%				2 2.5%	5 5.7%	4 22.2% E		2.8%	4 5.2%	2 2.8%	5 10.6%	4 6.3%	_		6 5.5%	3 5.9%		1 6.7%	1 4.3%	2 5.0%	7 6.5%
Average	101 53.79				49 61.2%	43 49.4%		16 45.7%								63 57.3%	27 52.9%	-	9 60.0%	14 60.9%	24 60.0%	54 50.5%
Somewhat above average	45 25.09				18 22.5%	24 27.6%	5 27.8%	10 28.6%							-	30 27.3%	12 23.5%	2 100.0% STUV	3 20.0%	4 17.4%	12 30.0%	25 23.4%
Well above average	18 9.69			1 14.3%	8 10.0%	9 10.3%	-	5 14.3%	9 12.7%	4 5.2%	4 5.6%	6 12.8%	7 11.1%	8.3%		8 7.3%	7 13.7%	-	2 13.3%	3 13.0%	-	13 12.1%
Not Applicable	14	11	. 5	1	4	7	2	3	7	4	5	4	1	1	-	10	3	-	1	1	4	6
Summary Rate - Well above average/Somewhat above average	65 34.69		25.5%	_	26 32.5%	33 37.9%	5 27.8%	15 42.9%				16 34.0%				38 34.5%		2 100.0% STUV	5 33.3%	7 30.4%	12 30.0%	38 35.5%

2D. Resolution of claims payment problems or disputes.

			= Area of =		==== P	hysicia	ns ====	?	Years i	n =====	=== Ma	naged C	are ===	====== Su	rvey Re	spondent		:	Insuran	e Part	icipati	on =====
		======	= Medicine		==== i	n Pract	ice ===	=====]	Practio	e ====		Volume	=====				 Nurse/	=====				
	Total Answering	Primary Care	y Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager	Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	2 65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	175 100.0%								71 100.0%	67 100.0%	63 100.0%					101 100.0%			14 100.0%	21 100.0%	36 100.0%	
No Answer	15	5 11	L 4	1	. 7	3	4	4	5	6	7	3	3 2	4	-	. 8	3	-	-	3	5	6
Well below average	21 12.0%			16.7%	8.5%	11 12.9%	-	4 12.5%	8.5%	10 14.9%	9 14.3%	4 8.9%	. 7 : 11.7%		i	6.9%	6 12.5%	-	2 14.3%	2 9.5%	2 5.6%	15 14.7% u
Somewhat below average	18 10.3%			-	6 8.5%	8 9.4%	4 23.5%	2 6.2%	6 8.5%	9 13.4%	4 6.3%	8 17.8% k	6 5 10.0%	1 4.3%		14 13.9% n			1 7.1%	4 19.0%	3 8.3%	10 9.8%
Average	93 53.1%			_	42 59.2% g		6 35.3%	17 53.1%	43 60.6% j	31 46.3%	35 55.6%					56.4%			6 42.9%	12 57.1%	25 69.4% sV	49.0%
Somewhat above average	29 16.6%			2 33.3%	11 15.5%	14 16.5%		5 15.6%	11.3%	15 22.4% i	11 17.5%					18 17.8% N	18.8%	1 100.0% STUV	4 28.6%	2 9.5%	4 11.1%	17 16.7%
Well above average	14 8.0%			-	6 8.5%	7 8.2%	-	4 12.5%	8 11.3% j	2 3.0%	4 6.3%	5 11.1%	5 8.3%	13.0%		5.0%	5 10.4%	-	1 7.1%	1 4.8%	2 5.6%	10 9.8%
Not Applicable	27	22	2 7	1	13	10	3	6	8	13	13	5	5	1		20	6	1	2	3	7	12
Summary Rate - Well above average/Somewhat above average	43 24.6%				17 23.9%	21 24.7%	4 23.5%	9 28.1%	16 22.5%	17 25.4%	15 23.8%				-	22.8%		1 100.0% STUV	5 35.7%	3 14.3%	6 16.7%	27 26.5%

3A. Access to knowledgeable UM staff.

														====== Su								
	Total Answering	Primary Care		вн		2-5	>5 phys.	<5	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	вн	Office	Nurse/ Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	178 100.0%			6 100.0%	73 100.0%	80 100.0%	21 100.0%	31 100.0%			72 100.0%					106 100.0%	46 100.0%	2 100.0%	14 100.0%			98 100.0%
No Answer	15	12	3	-	7	6	2	4	6	5	5	3	2	2	-	. 9	4	-	1	3	5	5
Well below average	13 7.3%		4 7.0%	-	1 1.4%	10 12.5% E	2 9.5%	3 9.7%	3 4.4%	6 8.1%	5 6.9%	7.0%	6.9%	25.0%		. 5 4.7%	2 4.3%	-	3 21.4%	1 5.0%	-	9 9.2%
Somewhat below average	16 9.0%			-	9 12.3%	4 5.0%	2 9.5%	1 3.2%	7 10.3%	7 9.5%	7 9.7%	5 11.6%	6.9%	5 20.8%		7.5%	2 4.3%	-	-	3 15.0%	4 9.8%	9 9.2%
Average	112 62.9%			4 66.7%	47 64.4%	50 62.5%	13 61.9%	18 58.1%	43 63.2%		47 65.3%					73 68.9% N	29 63.0% N	1 50.0%	5 35.7%	10 50.0%	28 68.3% S	
Somewhat above average	27 15.2%	22 17.1%		-	13 17.8%	10 12.5%	3 14.3%	6 19.4%	9 13.2%	12 16.2%	10 13.9%	-	11 19.0%			16 15.1%	-	1 50.0%	5 35.7% V	5 25.0% V	7 17.1%	8 8.2%
Well above average	10 5.6%		5 8.8%	2 33.3%	3 4.1%	6 7.5%	1 4.8%	3 9.7%	6 8.8% J	1 1.4%	3 4.2%	2 4.7%	8.6%	8.3%		3.8%	4 8.7%	-	1 7.1%	1 5.0%	2 4.9%	6.1%
Not Applicable	24	21	5	2	11	12	1	7	10	7	6	7	7	2	-	14	7	-	1	4	2	17
Summary Rate - Well above average/Somewhat above average	37 20.8%			2 33.3%	16 21.9%	16 20.0%	4 19.0%	9 29.0%	15 22.1%	13 17.6%	13 18.1%	8 18.6%	16 27.6%			20 18.9%	13 28.3%	1 50.0%	6 42.9% V	6 30.0%	9 22.0%	14 14.3%

3B. Procedures for obtaining pre-certification/referral/authorization information.

														===== Su								
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years		16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager		3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)		(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	182 100.0%			-	80 100.0%				71 100.0%		73 100.0%		58 100.0%			108 100.0%	48 100.0%	_	12 100.0%	21 100.0%		
No Answer	18	13	6	-	7	8	3	5	5	8	7	4	. 2	2	-	11	5	-	1	4	5	7
Well below average	14 7.7%				5 6.2%	6 7.6%	2 10.5%	2 6.1%	6 8.5%	6 8.2%	6 8.2%	_	6.9%	-	i	7 6.5%	1 2.1%		1 8.3%	2 9.5%	3 7.1%	8 7.8%
Somewhat below average	25 13.7%				9 11.2%	11 13.9%	4 21.1%	7 21.2% j	11 15.5% j		10 13.7%		9 15.5%	-		17 15.7% q		1 50.0%	1 8.3%	2 9.5%	7 16.7%	14 13.6%
Average	107 58.8%			_	49 61.2%	47 59.5%	10 52.6%		39 54.9%	48 65.8%	44 60.3%		30 51.7%			65 60.2%	31 64.6% n		4 33.3%	11 52.4%		
Somewhat above average	23 12.6%			-	13 16.2% g	8 10.1%	1 5.3%	4 12.1%	9 12.7%	10 13.7%	8 11.0%	9.1%	10 17.2%	_		14 13.0%	-	-	5 41.7% UV	4 19.0%	4 9.5%	9 8.7%
Well above average	13 7.1%		6 12.0%	-	4 5.0%	7 8.9%	2 10.5%	3 9.1%	6 8.5%	4 5.5%	5 6.8%	6.8%	5 8.6%	_		5 4.6%	6 12.5%	-	1 8.3%	2 9.5%	2 4.8%	-
Not Applicable	17	9	9	2	4	11	2	4	8	5	3	5	7	3	-	10	4	-	3	2	1	10
Summary Rate - Well above average/Somewhat above average	36 19.8%				17 21.2%	15 19.0%	3 15.8%	7 21.2%	15 21.1%	14 19.2%	13 17.8%		15 25.9%			19 17.6%	13 27.1%		6 50.0% UV	6 28.6%	6 14.3%	16 15.5%

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

3C. Timeliness of obtaining pre-certification/referral/authorization information.

														====== Su								
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager		3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)) (B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	7 162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	184 100.09			-	80 100.0%	81 100.0%		35 100.0%								110 100.0%		_	12 100.0%			106 100.0%
No Answer	18	3 12	7	-	6	9	3	5	5	7	6	4	3	. 2	-	10	6	-	1	5	5	6
Well below average	6.09		-		3.8%	5 6.2%	2 10.5%	2 5.7%	5 7.0%	4 5.4%	6 8.1%	3 6.7%	2 3.4%	-		3.6%	2 4.2%	-	1 8.3%	2 10.0%	1 2.4%	7 6.6%
Somewhat below average	27 14.79			_	10 12.5%	12 14.8%	4 21.1%	9 25.7% j	9 12.7%	8 10.8%	8 10.8%	6 13.3%	11 19.0%			18 16.4%		1 50.0%	1 8.3%	3 15.0%	7 16.7%	15 14.2%
Average	113 61.49				52 65.0%	50 61.7%	10 52.6%	18 51.4%		49 66.2%		27 60.0%				67 60.9%	32 66.7%	1 50.0%	6 50.0%	12 60.0%		
Somewhat above average	13.09			33.3%	12 15.0%	10 12.3%	1 5.3%	3 8.6%	10 14.1%	11 14.9%	7 9.5%	7 15.6%	9 15.5%	_	. -	17 15.5% N	12.5%	-	3 25.0%	2 10.0%	3 7.1%	
Well above average	4.99	-	_	-	3 3.8%	4 4.9%	2 10.5%	3 8.6%	4 5.6%	2 2.7%	4 5.4%	2 4.4%	3 5.2%			4 3.6%	3 6.2%	-	1 8.3%	1 5.0%	2 4.8%	5 4.7%
Not Applicable	15	5 7	9	2	5	8	2	2	8	5	3	4	6	; 3	-	9	3	-	3	2	1	. 8
Summary Rate - Well above average/Somewhat above average	33 17.99			33.3%	15 18.8%	14 17.3%	3 15.8%	6 17.1%	14 19.7%	13 17.6%		9 20.0%	12 20.7%			21 19.1%		-	4 33.3%	3 15.0%	5 11.9%	19 17.9%

3D. The health plan's facilitation/support of appropriate clinical care for patients.

														====== Su								
			Medicine :		==== i	n Practi	ice ===	=====]	Practic	e ====		Volume					======= Nurse/					
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager	Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	176 100.0%	132 100.0%			74 100.0%	80 100.0%	18 100.0%		71 100.0%	69 100.0%						100 100.0%			14 100.0%	21 100.0%	40 100.0%	97 100.0%
No Answer	23	16	8	1	. 9	11	3	6	7	10	9	5	4	. 2	-	14	7	-	1	5	6	10
Well below average	10 5.7%		_	-	2 2.7%	5 6.2%	2 11.1%	2 6.5%	5 7.0%	3 4.3%	3 4.3%	3 7.1%	4 6.9%		;	2 2.0%	_	-	1 7.1%	2 9.5%	-	7 7.2%
Somewhat below average	15 8.5%			-	7 9.5%	5 6.2%	2 11.1%	1 3.2%	5 7.0%	8 11.6% h		3 7.1%	4 6.9%			8 8.0%			1 7.1%	3 14.3%	4 10.0%	7 7.2%
Average	118 67.0%				51 68.9%	55 68.8%	11 61.1%	21 67.7%	44 62.0%	49 71.0%						71 71.0% n	66.7%		9 64.3%	12 57.1%	28 70.0%	
Somewhat above average	23 13.1%			1 25.0%	10 13.5%	10 12.5%	2 11.1%	2 6.5%	13 18.3% h	8 11.6%	11 15.9%	_	6 10.3%	_		16.0% N	12.5%	1 100.0% STUV	1 7.1%	2 9.5%	6 15.0%	12 12.4%
Well above average	10 5.7%			-	4 5.4%	5 6.2%	1 5.6%	5 16.1% J	4 5.6%	1 1.4%	3 4.3%	2 4.8%	5 8.6%	_		3.0%	5 10.4%	-	2 14.3%	2 9.5%	2 5.0%	
Not Applicable	18	14	5	3	8	7	3	5	6	7	5	6	5	. 1		15	2	1	1	1	2	13
Summary Rate - Well above average/Somewhat above average	33 18.8%			1 25.0%	14 18.9%	15 18.8%	3 16.7%	7 22.6%	17 23.9% j	9 13.0%	14 20.3%	-	11 19.0%			19 19.0%		1 100.0% STUV	3 21.4%	4 19.0%	8 20.0%	16 16.5%

3E. Access to Case/Care Managers from this health plan.

														===== Su								
			Medicine =		==== 1	n Pract:	ice ===	===== I	Practic	e =====		Volume				======	====== Nurse/	=====				
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager	Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	166 100.0%			5 100.0%	69 100.0%		19 100.0%	29 100.0%	64 100.0%		68 100.0%		54 100.0%			95 100.0%			11 100.0%	18 100.0%		93 100.0%
No Answer	19	14	6	-	7	9	3	5	7	7	7	4	3	3	-	11	5	-	2	4	5	7
Well below average	10 6.0%		_	-	2 2.9%	4 5.4%	2 10.5%	1 3.4%	5 7.8%	4 5.9%	4 5.9%	5 12.8% m	1 1.9%	-		3 3.2%	1 2.2%	-	-	2 11.1%	1 2.6%	7 7.5%
Somewhat below average	11 6.6%		_	-	3 4.3%	5 6.8%	3 15.8%	2 6.9%	3 4.7%	5 7.4%	7 10.3% 1	1 2.6%	3 5.6%			4 4.2%	3 6.7%		-	1 5.6%	4 10.3%	6 6.5%
Average	115 69.3%			4 80.0%	50 72.5%	53 71.6%	10 52.6%	21 72.4%	44 68.8%		48 70.6%		35 64.8%			70 73.7% n			7 63.6%	13 72.2%	29 74.4%	
Somewhat above average	24 14.5%			1 20.0%	13 18.8%		3 15.8%	4 13.8%	8 12.5%	12 17.6%	9 13.2%	5 12.8%	10 18.5%		-	18 18.9%	6 13.3%	2 100.0% STUV		2 11.1%	4 10.3%	13 14.0%
Well above average	6 3.6%		_	-	1 1.4%	4 5.4%	1 5.3%	1 3.4%	4 6.2%	1 1.5%	-	1 2.6%	5 9.3%	_		-	4 8.9%	-	2 18.2%		1 2.6%	3 3.2%
Not Applicable	32	21	14	3	15	15	2	8	13	11	8	10	10	2	-	23	7	-	3	5	4	20
Summary Rate - Well above average/Somewhat above average	30 18.1%			1 20.0%	14 20.3%	12 16.2%	4 21.1%	5 17.2%	12 18.8%		9 13.2%	6 15.4%	15 27.8% K	8.7%		18 18.9%	10 22.2%	2 100.0% STUV		2 11.1%	5 12.8%	16 17.2%

3F. Degree to which the plan covers and encourages preventive care and wellness.

														====== Su								
																	Nurse/					
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager		3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)		(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	177 100.0%							36 100.0%	70 100.0%	67 100.0%	66 100.0%					102 100.0%	49 100.0%		11 100.0%	23 100.0%	40 100.0%	100 100.0%
No Answer	21	13	8	1	7	10	4	5	8	8	8	4	4	4	-	11	6	-	2	4	6	8
Well below average	7 4.0%	_	_	=	1 1.3%	5 6.3% e	1 6.2%	2 5.6%	2 2.9%	3 4.5%	2 3.0%	1 2.3%	4 6.7%	5 21.7% PQ		1 1.0%	1 2.0%	-	1 9.1%	1 4.3%	-	5 5.0%
Somewhat below average	9 5.1%			1 16.7%	5 6.4%	4 5.1%	-	-	4 5.7%	4 6.0%	3 4.5%	3 6.8%	3 5.0%	1 4.3%	-	6 5.9%	2 4.1%	-	-	3 13.0%	2 5.0%	
Average	113 63.8%			33.3%	50 64.1%		11 68.8%	24 66.7%	39 55.7%	47 70.1% i	46 69.7%					72 70.6% q	27 55.1%		5 45.5%	13 56.5%	26 65.0%	
Somewhat above average	29 16.4%			33.3%	15 19.2%		3 18.8%	4 11.1%	14 20.0%	11 16.4%	11 16.7%	9 20.5%	9 15.0%	3 13.0%	-	15 14.7%	11 22.4%	1 50.0%	3 27.3%	3 13.0%	9 22.5%	
Well above average	19 10.7%			1 16.7%	7 9.0%	10 12.7%	1 6.2%	6 16.7% J	11 15.7% J	2 3.0%	4 6.1%	6 13.6%	9 15.0%	2 8.7%	-	8 7.8%	8 16.3%	1 50.0%	2 18.2%	3 13.0%	3 7.5%	
Not Applicable	19	6	15	1	6	9	4	1	6	11	9	5	3	1	-	16	2	-	3	-	2	12
Summary Rate - Well above average/Somewhat above average	48 27.1%			3 50.0%	22 28.2%		4 25.0%	10 27.8%	25 35.7% J	13 19.4%		15 34.1%			-	23 22.5%	19 38.8% P	2 100.0% STUV	5 45.5%	6 26.1%	12 30.0%	

4A. The number of specialists in this health plan's provider network.

														====== Su								
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager		3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	170 100.09					75 100.0%	15 100.0%	32 100.0%		67 100.0%						100 100.0%			15 100.0%		39 100.0%	93 100.0%
No Answer	31	21	. 11	2	11	13	6	6	10	14	14	6	6	3	-	20	7	-	1	6	8	15
Well below average	10.09			=	7 9.1%	8 10.7%	1 6.7%	3 9.4%	5 7.5%	9 13.4%	10 16.7% Lm	4.5%	_	-		11 11.0%			1 6.7%	-	4 10.3%	12 12.9%
Somewhat below average	30 17.69			-	16 20.8%	11 14.7%	3 20.0%	6 18.8%	9 13.4%	14 20.9%			9 15.3%	_		22 22.0%	11.4%	-	1 6.7%	2 10.5%	9 23.1% s	18 19.4% s
Average	94 55.39				43 55.8%	44 58.7%	6 40.0%	16 50.0%	44 65.7% J		26 43.3%					55.0%			10 66.7%		22 56.4%	
Somewhat above average	10.09			2 50.0%	7 9.1%	7 9.3%	3 20.0%	3 9.4%	4 6.0%	10 14.9% i		4 9.1%	13.6%	_		8.0%	-	1 50.0%	1 6.7%	2 10.5%	3 7.7%	9 9.7%
Well above average	12 7.19			1 25.0%	4 5.2%	5 6.7%	2 13.3%	4 12.5%	5 7.5%	3 4.5%	4 6.7%	2 4.5%	10.2%	-		4.0%	5 11.4%	1 50.0%	2 13.3%	-	1 2.6%	8 8.6%
Not Applicable	16	5 5	12	2	3	10	3	4	7	5	9	3	2	. 1		. 9	6	-	-	2	1	12
Summary Rate - Well above average/Somewhat above average	25 17.19			75.0% BC			5 33.3%	7 21.9%	9 13.4%	13 19.4%	_	6 13.6%	14 23.7%			12.0%		2 100.0% STUV	3 20.0%	2 10.5%	4 10.3%	17 18.3%

4B. The quality of specialists in this health plan's provider network.

														===== Su								
	Total Answering		Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager	Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)		(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	164 100.0%				76 100.0%		15 100.0%	30 100.0%	66 100.0%							97 100.0%			13 100.0%	17 100.0%	39 100.0%	91 100.0%
No Answer	34	23	12	2	12	15	6	6	11	15	15	8	6	4	-	20	9	-	2	7	8	16
Well below average	10 6.1%			-	6.6%	4 5.7%	-	1 3.3%	6 9.1%	3 4.6%	7 12.1% Lm		2 3.4%	2 8.7%		7.2%	1 2.4%	-	-	1 5.9%	3 7.7%	
Somewhat below average	14 8.5%			-	6.6%	8 11.4%	1 6.7%	6 20.0% iJ	4 6.1%	3 4.6%	5 8.6%	2 4.8%	5 8.6%	2 8.7%		8.2%	4 9.5%	-	-	1 5.9%	5 12.8%	8 8.8%
Average	106 64.6%			75.0%	55 72.4% f		8 53.3%	15 50.0%	44 66.7%	45 69.2% h						65 67.0% n	66.7%		9 69.2%	9 52.9%	26 66.7%	
Somewhat above average	26 15.9%			1 25.0%	. 9 11.8%	14 20.0%	3 20.0%	7 23.3%	9 13.6%	10 15.4%	-	6 14.3%	11 19.0%			13 13.4%		-	4 30.8%	6 35.3% Uv	4 10.3%	11 12.1%
Well above average	4.9%			-	2.6%	3 4.3%	3 20.0% e	1 3.3%	3 4.5%	4 6.2%	1 1.7%	2 4.8%	5 8.6% k	2 8.7%		4.1%	2 4.8%	2 100.0% UV	-	-	1 2.6%	5 5.5%
Not Applicable	19	7	13	2	3	13	3	6	7	6	10	3	3	1		12	6	-	1	3	1	13
Summary Rate - Well above average/Somewhat above average	34 20.7%			1 25.0%	. 11 s 14.5%	17 24.3%	6 40.0% e	8 26.7%	12 18.2%	14 21.5%	10 17.2%	8 19.0%	16 27.6%		-	17 17.5%	9 21.4%	2 100.0% STUV	4 30.8%	6 35.3% u	5 12.8%	16 17.6%

4C. The timeliness of feedback/reports from specialists in this health plan's provider network.

														====== Su								
	Total Answering	Primary Care	, Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager		3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	2 65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	159 100.09			5 100.0%	71 100.0%	70 100.0%		29 100.0%	63 100.0%							92 100.0%	41 100.0%	2 100.0%	13 100.0%			88 100.0%
No Answer	34	22	13	3	12	15	6	7	12	13	15	7	6	3	-	21	9	-	2	6	8	17
Well below average	4.49	-		-	2 2.8%	4 5.7%	1 6.7%	2 6.9%	2 3.2%	3 4.7%	2 3.7%		4 6.9%	3 12.5%		3 3.3%	1 2.4%	-	-	1 5.9%	1 2.7%	5 5.7%
Somewhat below average	16 10.19			-	9 12.7%	5 7.1%	1 6.7%	4 13.8%	5 7.9%	6 9.4%	7 13.0%	5 11.6%	4 6.9%	_		9 9.8%	3 7.3%	-	1 7.7%	2 11.8%	5 13.5%	8 9.1%
Average	111 69.8%			3 60.0%	51 71.8%	48 68.6%	10 66.7%	18 62.1%	46 73.0%	45 70.3%	39 72.2%					69 75.0% N	30 73.2% N	2 100.0% STUV	8 61.5%	10 58.8%		59 67.0%
Somewhat above average	17 10.79			1 20.0%	7 9.9%	7 10.0%	3 20.0%	3 10.3%	6 9.5%	8 12.5%	5 9.3%	9.3%	8 13.8%	4 16.7%	-	8 8.7%	5 12.2%	-	4 30.8% V	23.5%	-	8 9.1%
Well above average	5.09		_	1 20.0%	2 2.8%	6 8.6%	=	2 6.9%	4 6.3%	2 3.1%	1 1.9%	7.0%	4 6.9%	3 12.5%	-	3 3.3%	2 4.9%	-	-	-	-	8 9.1%
Not Applicable	24	10	14	-	8	13	3	6	9	9	14	. 3	3	1	-	16	7	-	1	4	3	15
Summary Rate - Well above average/Somewhat above average	25 15.79			40.0%	9 12.7%	13 18.6%	3 20.0%	5 17.2%	10 15.9%	10 15.6%	6 11.1%	7 16.3%	12 20.7%			11 12.0%	7 17.1%	-	4 30.8%	4 23.5%	-	16 18.2%

5A. Consistency of the formulary over time.

														====== Su								
		======	: Medicine :	=====	==== 1	n Pract:	ice ===	=====)	Practic	e =====		Volume					Nurse/					
	Total Answering	Primary Care	Specialty	BH Clin.	Solo		>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician		Office Manager	Other	3 or fewer	-	8 to 11	15	More than 15
	(A)) (B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)			(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	7 162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	156 100.0%				0,5		16 100.0%	34 100.0%	62 100.0%		51 100.0%					91 100.0%	39 100.0%	2 100.0%	14 100.0%			
No Answer	36	5 25	11	-	14	17	5	6	13	16	16	7	8	. 2	: -	22	11	-	2	4	5	23
Well below average	19 12.2%			-	4 5.8%	11 16.4% E	3 18.8%	3 8.8%	8 12.9%	7 12.3%	6 11.8%	5 12.2%	8 14.3%	9 37.5% PÇ	5	6 6.6%	4 10.3%	-	2 14.3%	4 18.2% u		12 15.2% U
Somewhat below average	20 12.8%	-		_	10 14.5%	8 11.9%	1 6.2%	5 14.7%	10 16.1%	-	4 7.8%	6 14.6%	7 12.5%		-	16 17.6% q	3 7.7%	-	2 14.3%	3 13.6%	5 13.5%	10 12.7%
Average	95 60.98			_	47 68.1%	37 55.2%	9 56.2%	20 58.8%	35 56.5%		32 62.7%			-		61 67.0% N	24 61.5% n		6 42.9%	13 59.1%		58.2%
Somewhat above average	16 10.39			1 16.7%	7 10.1%	7 10.4%	2 12.5%	4 11.8%	6 9.7%	6 10.5%	7 13.7%	2 4.9%	7 12.5%	-		6 6.6%	6 15.4%	-	3 21.4%	2 9.1%	4 10.8%	7 8.9%
Well above average	3.89			-	1 1.4%	4 6.0%	1 6.2%	2 5.9%	3 4.8%	1 1.8%	2 3.9%	-	4 7.1%	_		2 2.2%	2 5.1%	1 50.0%	1 7.1%	-	-	4 5.1%
Not Applicable	25	5 18	10	2	8	14	3	2	9	13	16	5	3	. 2	: -	16	7	-	-	1	6	18
Summary Rate - Well above average/Somewhat above average	22 14.19			1 16.7%	8 11.6%	11 16.4%	3 18.8%	6 17.6%	9 14.5%	7 12.3%	9 17.6% L		11 19.6% L	25.0%	5	8 8.8%	8 20.5% p		4 28.6%	9.1%	4 10.8%	11 13.9%

5B. Extent to which formulary reflects current standards of care.

														===== Su								
	_						_	_			_						Nurse/			_		
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	100%	Physician	BH Clin.	Office Manager		3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	159 100.0%			6 100.0%	69 100.0%	69 100.0%	17 100.0%	35 100.0%	66 100.0%	56 100.0%	52 100.0%		59 100.0%			91 100.0%	40 100.0%		15 100.0%	21 100.0%	39 100.0%	79 100.0%
No Answer	37	27	11	-	16	16	5	6	10	19	17	9	6	1	-	25	10	-	1	5	6	24
Well below average	19 11.9%			1 16.7%	5 7.2%	9 13.0%	4 23.5%	2 5.7%	10 15.2%	6 10.7%	5 9.6%	5 12.2%	9 15.3%	-		7 7.7%	3 7.5%		1 6.7%	4 19.0%	2 5.1%	12 15.2% u
Somewhat below average	21 13.2%			-	9 13.0%	10 14.5%	1 5.9%	5 14.3%	8 12.1%	8 14.3%	10 19.2%	4 9.8%	5 8.5%	-		14 15.4% Q			2 13.3%	2 9.5%	5 12.8%	12 15.2%
Average	92 57.9%			3 50.0%	44 63.8%	37 53.6%	9 52.9%	20 57.1%	36 54.5%	35 62.5%	27 51.9%	28 68.3%	32 54.2%			59 64.8% N	65.0%		7 46.7%	11 52.4%	29 74.4% stV	43 54.4%
Somewhat above average	18 11.3%			2 33.3%	8 11.6%	8 11.6%	2 11.8%	4 11.4%	9 13.6%	5 8.9%	7 13.5%	4 9.8%	7 11.9%	5 19.2%		7 7.7%	6 15.0%	-	4 26.7%	2 9.5%	3 7.7%	8 10.1%
Well above average	9 5.7%			-	3 4.3%	5 7.2%	1 5.9%	4 11.4%	3 4.5%	2 3.6%	3 5.8%	-	6 10.2%			4 4.4%	3 7.5%	2 100.0% STV	1 6.7%	2 9.5%	-	4 5.1%
Not Applicable	21	. 13	10	2	6	13	2	1	8	11	14	3	2	1	-	13	7	-	-	1	3	17
Summary Rate - Well above average/Somewhat above average	27 17.0%			2 33.3%	11 15.9%	13 18.8%	3 17.6%	8 22.9%	12 18.2%	7 12.5%	10 19.2%	4 9.8%	13 22.0% 1		=	11 12.1%		2 100.0% STUV	5 33.3% U	4 19.0%	3 7.7%	12 15.2%

5C. Variety of branded drugs on the formulary.

														====== Su								
			Medicine :		: ==== i	n Pract	ice ===	===== 1	Practic	e =====		Volume	=====				====== Nurse/	=====		======	=====	
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager		3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(8)	(T)	(ប)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	155 100.0%			100.0%			17 100.0%	35 100.0%			50 100.0%					89 100.0%	38 100.0%	2 100.0%				
No Answer	34	24	11	-	13	16	5	6	11	16	15	8	6	1	_	23	9	-	1	4	5	23
Well below average	25 16.1%				. 9 s 13.2%	9 13.4%	6 35.3% ef	4 11.4%	10 16.1%		5 10.0%	-	12 20.7%			11 12.4%	4 10.5%	1 50.0%	3 21.4%	4 20.0%	4 10.5%	13 16.7%
Somewhat below average	35 22.6%			1 16.7%	. 16 3 23.5% G	25.4%	5.9%	7 20.0%	14 22.6%		15 30.0% m	22.5%	9 5 15.5%	4 15.4%		23 25.8%	7 18.4%	-	3 21.4%	4 20.0%	10 26.3%	
Average	71 4 5.8%			3 50.0%	33 48.5%		8 47.1%	18 51.4%	27 43.5%		20 40.0%		27 46.6%			. 47 52.8% N	18 47.4% N		4 28.6%	8 40.0%	21 55.3% s	36 46.2%
Somewhat above average	17 11.0%			1 16.7%	. 6 8.8%	9 13.4%	2 11.8%	4 11.4%	8 12.9%	5 8.9%	8 16.0%	3 7.5%	6 10.3%	5 19.2% p		5.6%	7 18.4% P	1 50.0%	3 21.4%	3 15.0%	3 7.9%	6 7.7%
Well above average	7 4.5%	-	_	-	. 4 5.9%	3 4.5%	-	2 5.7%	3 4.8%	2 3.6%	2 4.0%	1 2.5%	. 4 6.9%	2 7.7%		3.4%	2 5.3%	-	1 7.1%	1 5.0%	-	5 6.4%
Not Applicable	28	17	13	2	10	15	2	1	11	14	18	5	3	1	-	17	10	-	1	3	5	19
Summary Rate - Well above average/Somewhat above average	24 15.5%			1 16.7%	. 10 5 14.7%			6 17.1%	11 17.7%	7 12.5%	10 20.0%		10 17.2%			9.0%	9 23.7% P		4 28.6%	4 20.0%	3 7.9%	11 14.1%

5D. Ease of prescribing your preferred medications within formulary guidelines.

														====== Su								
	Total Answering	Primary Care		вн	Solo	2-5	>5	<5 years	5-15	16 or more	0- 10%	11- 20%	21- 100%	Physician	вн		Nurse/ Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(8)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	151 100.0%				68 100.0%				63 100.0%		49 100.0%					85 100.0%	39 100.0%	2 100.0%	13 100.0%	20 100.0%		
No Answer	37	25	12	-	15	16	5	6	11	17	16	9	7	2	-	23	11	-	2	5	7	22
Well below average	24 15.9%			1 16.7%	. 8 : 11.8%	9 13.8%	6 37.5% Ef		8 12.7%	9 16.7%	4 8.2%	6 15.8%	13 22.8% K	36.0%		10 11.8%	4 10.3%	1 50.0%	3 23.1%	5 25.0%	4 11.1%	11 14.3%
Somewhat below average	29 19.2%			1 16.7%	. 12 : 17.6%	16 24.6% G	6.2%	3 9.1%	16 25.4% H	18.5%	14 28.6% L	10.5%	11 19.3%			20 23.5% N	7 17.9%	-	-	3 15.0%	5 13.9%	21 27.3% u
Average	70 46.4%			-	39 57.4% F	24 36.9%	-	16 48.5%	25 39.7%		22 44.9%					41 48.2%	20 51.3%	1 50.0%	6 46.2%	8 40.0%	20 55.6%	
Somewhat above average	20 13.2%			1 16.7%	. 6 8.8%	11 16.9%	3 18.8%	•	10 15.9% j		6 12.2%	7 18.4%	7 12.3%	12.0%		11 12.9%	6 15.4%	-	4 30.8% t	1 5.0%	7 19.4% t	
Well above average	5.3%			-	4.4%	5 7.7%	-	1 3.0%	4 6.3%	3 5.6%	3 6.1%	1 2.6%	7.0%	12.0%		3 3.5%	2 5.1%	-	-	3 15.0%	-	5 6.5%
Not Applicable	29	19	12	2	8	17	3	3	10	15	18	6	3	1		21	7	-	1	2	5	21
Summary Rate - Well above average/Somewhat above average	28 18.5%			1 16.7%	. 9 : 13.2%	16 24.6% e	18.8%	8 24.2%	14 22.2%		9 18.4%	8 21.1%	11 19.3%			14 16.5%	8 20.5%	-	4 30.8%	4 20.0%	7 19.4%	12 15.6%

5E. Availability of comparable drugs to substitute those not included in the formulary.

														====== Su								
			Medicine :		==== i	n Pract	ice ===	===== I	Practic	e =====		Volume					Nurse/					
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.		<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician		_	Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)		(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)		(N)				(R)	(S)	(T)	(U)	
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	147 100.0%			6 100.0%	65 100.0%	64 100.0%		33 100.0%	60 100.0%							81 100.0%			12 100.0%		36 100.0%	75 100.0%
No Answer	41	. 28	14	-	16	19	5	7	13	18	18	10	7	2	: -	27	11	-	3	5	7	24
Well below average	28 19.0%			-	11 16.9%	11 17.2%	5 31.2%	7 21.2%	10 16.7%				12 21.4%		5	12 14.8%		1 50.0%	3 25.0%	5 25.0%	5 13.9%	
Somewhat below average	23 15.6%			2 33.3%	11 16.9%	11 17.2%	1 6.2%	1 3.0%	12 20.0% H		20.8%	4 11.1%	8 14.3%			15 18.5% N	17.9%		1 8.3%	2 10.0%	6 16.7%	14 18.7%
Average	71 48.3%			_	33 50.8%	29 45.3%	8 50.0%	18 54.5%	28 46.7%							43 53.1% N	51.3%		3 25.0%	10 50.0%	20 55.6% S	48.0%
Somewhat above average	17 11.6%			1 16.7%	5 7.7%	10 15.6%	2 12.5%	6 18.2%	7 11.7%	4 7.5%	5 10.4%	3 8.3%	9 16.1%	_		8.6%	6 15.4%	-	5 41.7% TuV	2 10.0%	5 13.9%	5 6.7%
Well above average	5.4%		1 2.6%	-	5 7.7%	3 4.7%	-	1 3.0%	3 5.0%	4 7.5%	3 6.2%	1 2.8%	7.1%			4.9%		1 50.0%	-	1 5.0%	-	6 8.0%
Not Applicable	29	18	13	2	10	15	3	2	11	15	17	7	4	. 1		21	7	-	1	2	5	21
Summary Rate - Well above average/Somewhat above average	25 17.0%			1 16.7%	10 15.4%	13 20.3%	2 12.5%	7 21.2%	10 16.7%	8 15.1%	8 16.7%	4 11.1%	13 23.2%			11 13.6%		1 50.0%	5 41.7% uv		5 13.9%	11 14.7%

6A. Ease of reaching health plan call center staff over the phone.

														====== Su								
		======	Medicine :		==== i	n Pract	ice ===	=====	Practic	e =====		Volume				======	====== Nurse/	=====				
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager	Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(ប)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	173 100.0%				76 100.0%				71 100.0%							103 100.0%			14 100.0%	20 100.0%		97 100.0%
No Answer	32	21	11	-	12	14	6	7	10	14	15	5	6	3	-	20	9	-	2	5	8	16
Well below average	11 6.4%		-		2 2.6%	5 6.6%	3 17.6%	2 6.5%	3 4.2%	6 8.8%	_	3 6.7%	5 8.8%	-	5	3 2.9%	_		1 7.1%	2 10.0%	2 5.3%	6 6.2%
Somewhat below average	14 8.1%			1 12.5%	3 3.9%	9 11.8% e	2 11.8%	_	4 5.6%	5 7.4%	-	4 8.9%	4 7.0%	-		3 2.9%	5 11.4% p	-	-	2 10.0%	4 10.5%	8 8.2%
Average	106 61.3%	62.6%		-		51.3%			46 64.8%							73 70.9% N	61.4%	100.0%	7 50.0%	14 70.0%		
Somewhat above average	24 13.9%				8 10.5%	14 18.4%	2 11.8%	5 16.1%	9 12.7%	10 14.7%		6 13.3%	10 17.5%	_		15 14.6%		-	28.6% t	1 5.0%	5 13.2%	12 12.4%
Well above average	18 10.4%			-	7 9.2%	9 11.8%	1 5.9%	4 12.9%	9 12.7%	5 7.4%	6 9.4%	5 11.1%	6 10.5%	4 17.4%		9 8.7%	4 9.1%	-	2 14.3%	1 5.0%	4 10.5%	10 10.3%
Not Applicable	12	10	3	-	3	8	1	4	3	4	4	3	4	2	: -	6	4	1	-	2	2	7
Summary Rate - Well above average/Somewhat above average	42 24.3%				15 19.7%	23 30.3%	3 17.6%	9 29.0%	18 25.4%	15 22.1%						24 23.3%			6 42.9% T	2 10.0%	9 23.7%	22 22.7%

6B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).

														====== Su								
	Total Answering	Primary Care		вн		2-5	>5	<5	5-15 years		0- 10%	11- 20%	21- 100%	Physician	вн	Office Manager	Nurse/ Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	177 100.0%			100.0%	75 100.0%		18 100.0%	31 100.0%	72 100.0%		65 100.0%		59 100.0%	24 100.0%		105 100.0%	45 100.0%	2 100.0%	13 100.0%	19 100.0%	39 100.0%	
No Answer	34	23	11	-	14	14	6	8	10	15	17	5	6	3	-	22	9	-	2	6	8	17
Well below average	5 2.8%	_	_	-	-	3 3.8%	2 11.1%	1 3.2%	2 2.8%	2 2.9%	4 6.2%	1 2.1%	-	1 4.2%		2 1.9%	2 4.4%	-	-	1 5.3%	1 2.6%	3 3.0%
Somewhat below average	8 4.5%	_	_	-	4.0%	3 3.8%	1 5.6%	1 3.2%	2 2.8%	4 5.7%	1 1.5%	5 10.6% k		4 16.7% P		2 1.9%	2 4.4%	-	-	2 10.5%	2 5.1%	4 4.0%
Average	108 61.0%			37.5%	53 5 70.7% F	44 55.0%	10 55.6%	19 61.3%	41 56.9%	46 65.7%	47 72.3% M			12 50.0%		69 65.7%	26 57.8%		7 53.8%	13 68.4%	25 64.1%	
Somewhat above average	35 19.8%			50.0% bo	14 18.7%	19 23.8% G	1 5.6%	6 19.4%	14 19.4%		10 15.4%	-	18 30.5% KL	3 12.5%		22 21.0%	9 20.0%	1 50.0%	3 23.1%	2 10.5%	7 17.9%	21 20.8%
Well above average	21 11.9%			1 12.5%	. 5 6.7%	11 13.8%	4 22.2%	4 12.9%	13 18.1% J		3 4.6%	7 14.9% k			. -	10 9.5%	6 13.3%	1 50.0%	3 23.1%	1 5.3%	4 10.3%	12 11.9%
Not Applicable	6	5	2	-	. 2	4	-	3	2	1	1	1	2	1		2	3	-	1	2	1	2
Summary Rate - Well above average/Somewhat above average	56 31.6%			5 62.5% h		30 37.5% e	5 27.8%	10 32.3%	27 37.5%	18 25.7%	13 20.0%		29 49.2% KL		_	32 30.5%	15 33.3%	2 100.0% STUV	6 46.2% t	3 15.8%	11 28.2%	33 32.7% t

6C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.

														:====== Su								
		======	Medicine =		==== i	n Pract	ice ===	===== I	Practic	9 =====		Volume	=====			======		=====				
	Total Answering	Primary Care	Specialty	BH Clin.	Solo			<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager		3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)		(0)	(P)	(Q)	(R)	(8)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	163 100.0%			5 100.0%	73 100.0%		16 100.0%	31 100.0%	65 100.0%	63 100.0%		43 100.0%				97 100.0%			13 100.0%		38 100.0%	88 100.0%
No Answer	39	28	11	-	16	17	6	9	12	17	19	5	9	3	-	24	11	-	2	6	8	21
Well below average	5 3.1%	_		-	3 4.1%	1 1.4%	1 6.2%	-	1 1.5%	4 6.3%	1 1.7%	1 2.3%	3 5.7%	_		2.1%	_	-	-	1 5.0%	2 5.3%	
Somewhat below average	9 5.5%			-	-	6 8.5%	2 12.5%	2 6.5%	2 3.1%	4 6.3%	3 5.0%	4 9.3%	2 3.8%		5	2.1%	_		1 7.7%	1 5.0%	2 5.3%	5 5.7%
Average	112 68.7%			3 60.0%	56 76.7% G		8 50.0%	21 67.7%	43 66.2%	45 71.4%		29 67.4%				73 75.3% N	65.9%		5 38.5%	15 75.0% S	27 71.1% S	
Somewhat above average	23 14.1%			2 40.0%	10 13.7%		2 12.5%	4 12.9%	12 18.5%	7 11.1%	9 15.0%	5 11.6%	9 17.0%			13.4%		-	5 38.5% uv	3 15.0%	4 10.5%	11 12.5%
Well above average	14 8.6%			-	4 5.5%	7 9.9%	3 18.8%	4 12.9%	7 10.8%	3 4.8%	1 1.7%	4 9.3%	9 17.0% K			7.2%	9.8%	2 100.0% SUV	2 15.4%	-	3 7.9%	7 8.0%
Not Applicable	15	8	7	3	2	10	2	2	7	6	4	5	5	. 1		. 8	5	-	1	1	2	11
Summary Rate - Well above average/Somewhat above average	37 22.7%			2 40.0%	14 19.2%	17 23.9%	5 31.2%	8 25.8%	19 29.2% j	10 15.9%		9 20.9%	18 34.0% K	20.8%	-	20 20.6%		2 100.0% STUV	7 53.8% TUV	3 15.0%	7 18.4%	18 20.5%

6D. Overall satisfaction with health plan's call center service.

														====== Su								
	Total Answering	Primary Care		вн	Solo	2-5 phys.	>5	<5	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	вн	Office Manager	Nurse/ Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	175 100.0%			7 100.0%	75 100.0%	78 100.0%	18 100.0%	30 100.0%	72 100.0%		65 100.0%					104 100.0%	44 100.0%		14 100.0%			
No Answer	35	5 24	11	-	14	15	6	9	11	14	17	6	6	3	-	22	10	-	2	6	8	18
Well below average	8 4.6%			-	2 2.7%	4 5.1%	2 11.1%		3 4.2%	4 5.8%	3 4.6%	_	3 5.1%	_		2 1.9%	2 4.5%		1 7.1%	2 10.0%	1 2.6%	4.1%
Somewhat below average	12 6.9%		-	-	3 4.0%	6 7.7%	2 11.1%	4 13.3% i	1 1.4%	6 8.7% I	4 6.2%	4 8.9%	4 6.8%	7 29.2% PQ		2 1.9%	3 6.8%	-	-	2 10.0%	3 7.7%	7 7.2%
Average	102 58.3%			4 57.1%	50 66.7% £	41 52.6%	9 50.0%	15 50.0%	45 62.5%		44 67.7% M		25 42.4%	-	-	70 67.3% N	24 54.5% N		5 35.7%	13 65.0% s		
Somewhat above average	33 18.9%			3 42.9%	16 21.3%		2 11.1%	4 13.3%	13 18.1%		12 18.5%		15 25.4%			22 21.2%	7 15.9%	1 50.0%	5 35.7% T	1 5.0%	7 17.9% t	18 18.6% T
Well above average	20 11.4%			-	4 5.3%	12 15.4% E		6 20.0% j	10 13.9%		2 3.1%	6 13.3% k	12 20.3%			8 7.7%	8 18.2% p	1 50.0%	3 21.4%	2 10.0%	3 7.7%	11 11.3%
Not Applicable	7	7 6	1	1	2	5	-	3	1	3	1	2	2	1	-	3	3	-	-	1	1	. 5
Summary Rate - Well above average/Somewhat above average	53 30.3%			3 42.9%	20 26.7%	27 34.6%	5 27.8%	10 33.3%	23 31.9%	19 27.5%	14 21.5%	12 26.7%		25.0%		30 28.8%	15 34.1%	2 100.0% STUV			10 25.6%	

7A. Do you have a Provider Relations representative from this health plan assigned to your practice?

														====== Su								
	m-+-1	D		вн		2-5		<5	5-15	16	0	11-	21-		D.17	Office	Nurse/	3 or	4	8 to	12 to	W
	Total Answering	Primary Care	Specialty		Solo			years		16 or more	10%	20%	100%	Physician	BH Clin.			fewer		11	15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(8)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	148 100.0%	113 100.0%			65 100.0%	65 100.0%	14 100.0%	27 100.0%	58 100.0%	59 100.0%						87 100.0%	37 100.0%	_	11 100.0%	17 100.0%	29 100.0%	88 100.0%
No Answer	69	49	22	1	26	33	10	15	26	27	28	14	17	7	-	42	20	-	5	10	19	32
Yes	108 73.0%			5 71.4%	47 72.3%	50 76.9%	9 64.3%	18 66.7%	40 69.0%	47 79.7%	39 70.9%	25 64.1%				64 73.6%	29 78.4%		9 81.8% t	9 52.9%	21 72.4%	66 75.0% t
No	40 27.0%				18 27.7%	15 23.1%	5 35.7%	9 33.3%	18 31.0%	12 20.3%					-	23 26.4%	8 21.6%	-	2 18.2%	8 47.1% sv	8 27.6%	22 25.0%
Summary Rate - Yes	108 73.0%			5 71.4%	47 72.3%	50 76.9%	9 64.3%	18 66.7%	40 69.0%	47 79.7%	39 70.9%	25 64.1%	40 80.0%			64 73.6%	29 78.4%		9 81.8% t	9 52.9%	21 72.4%	66 75.0% t

Annual Physicians --- Very in ---- Warrand Care --- Currey Degradant ----- Ingurance Darkigination ----

7B. Provider Relations representative's ability to answer questions and resolve problems.

														====== Su								
	Total Answering	Primary Care		вн		2-5	>5	<5 years	5-15	16 or	0- 10%	11- 20%	21- 100%	Physician	вн		Nurse/ Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(s)	(T)	(U)	(V)
Total	108	86	27	5	47	50	9	18	40	47	39	25	40	13	-	64	29	2	9	9	21	66
Total Answering	99 100.0%	80 100.0%			43 100.0%	46 100.0%			39 100.0%	44 100.0%	36 100.0%					58 100.0%	27 100.0%		9 100.0%	8 100.0%	20 100.0%	59 100.0%
No Answer	5	2	3	-	2	2	1	1	1	2	2	2	1	. 1		. 3	1	-	-	1	1	3
Well below average	9 9. 1%	_	3 12.5%	1 25.0%	2 4.7%	5 10.9%	2 25.0%	1 7.1%	2 5.1%	6 13.6%	5 13.9%	1 4.3%	7.9%	16.7%		3.4%	5 18.5% P		-	1 12.5%	1 5.0%	7 11.9%
Somewhat below average	5.1%				1 2.3%	1 2.2%	2 25.0%	-	2 5.1%	3 6.8%	-	2 8.7%	3 7.9%	_		6.9%	-	-	-	1 12.5%	1 5.0%	3 5.1%
Average	50.5%		33.3%	_	23 53.5% G	26 56.5% G		7 50.0%	20 51.3%	23 52.3%	19 52.8%		34.2%			30 51.7%	16 59.3%		4 44.4%	5 62.5%	11 55.0%	
Somewhat above average	15.2%			2 50.0%	8 18.6%	6 13.0%	1 12.5%	2 14.3%	5 12.8%	6 13.6%	9 25.0%	-	6 15.8%	_		12 20.7% Q	1 3.7%	-	1 11.1%	-	5 25.0%	9 15.3%
Well above average	20 20.2%			-	9 20.9%	8 17.4%	2 25.0%	4 28.6%	10 25.6%	6 13.6%	3 8.3%	4 17.4%	13 34.2% K	33.3%		10 17.2%	5 18.5%	2 100.0% STUV			2 10.0%	11 18.6%
Not Applicable	4	. 4	-	1	2	2	-	3	-	1	1	-	1		-	3	1	-	-	-	-	4
Summary Rate - Well above average/Somewhat above average	35. 4 %			2 50.0%	17 39.5%	14 30.4%	3 37.5%	6 42.9%	15 38.5%	12 27.3%	12 33.3%		19 50.0% L	41.7%		22 37.9%	6 22.2%	2 100.0% STUV		1 12.5%	7 35.0%	20 33.9%

7C. Quality of provider orientation process.

														====== Su								
	Total Answering	Primary Care		вн	Solo	2-5 phys.	>5	<5	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	вн	Office Manager	Nurse/ Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(ប)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	149 100.0%			6 100.0%	66 100.0%	66 100.0%		29 100.0%			51 100.0%		51 100.0%			87 100.0%	38 100.0%	2 100.0%	11 100.0%	15 100.0%		
No Answer	45	31	14	-	20	16	9	9	15	20	23	7	9) 4	-	29	12	-	2	10	8	24
Well below average	15 10.1%			-	2 3.0%	9 13.6% E	3 23.1% e	4 13.8%	4 6.7%	7 12.1%	8 15.7%	3 7.3%	4 7.8%	5 23.8%		6.9%	4 10.5%	-	-	2 13.3%	3 8.3%	10 12.2%
Somewhat below average	16 10.7%		9 20.9% B	-	7 10.6%	7.6%	3 23.1%	1 3.4%	7 11.7%	7 12.1%	2 3.9%	5 12.2%	9 17.6% K			8 9.2%	5 13.2%	-	2 18.2%	4 26.7% u	2 5.6%	9.8%
Average	78 52.3%			5 83.3% bC		38 57.6%	6 46.2%	16 55.2%	31 51.7%	30 51.7%	30 58.8% M		33.3%		-	50 57.5%	20 52.6%	1 50.0%	5 45.5%	7 46.7%	18 50.0%	
Somewhat above average	21 14.1%		7.0%	1 16.7%	16 24.2% F	_	-	4 13.8%	8 13.3%	9 15.5%	8 15.7%	3 7.3%	9 17.6%	9.5%		15 17.2%	3 7.9%	-	-	1 6.7%	10 27.8% Tv	12.2%
Well above average	19 12.8%			=	8 12.1%	9 13.6%	1 7.7%	4 13.8%	10 16.7%		3 5.9%	4 9.8%	12 23.5% Kl	19.0%		8 9.2%	6 15.8%	1 50.0%	4 36.4% tu	1 6.7%	3 8.3%	10 12.2%
Not Applicable	23	18	8	2	5	16	2	4	9	8	9	5	7	, 3	-	13	7	-	3	2	4	14
Summary Rate - Well above average/Somewhat above average	40 26.8%			1 16.7%	24 36.4% fG		_	8 27.6%	18 30.0%	14 24.1%	11 21.6%	7 17.1%	21 41.2% KL	28.6%		23 26.4%	9 23.7%	1 50.0%	4 36.4%	2 13.3%	13 36.1% t	24.4%

7D. Quality of written communications, policy bulletins, and manuals.

														===== Su								
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager		3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	164 100.09							31 100.0%	66 100.0%		56 100.0%					95 100.0%			14 100.0%	16 100.0%		
No Answer	47	31	. 16	-	22	17	8	10	16	20	24	7	10	6	-	30	11	-	2	10	10	24
Well below average	5.5%		_	-	3.0%	6 7.7%	1 6.7%	2 6.5%	3.0%	5 7.9%	4 7.1%	1 2.3%	. 4 5 7.1%	_		3.2%	2 4.4%	-	-	-	1 2.7%	
Somewhat below average	12 7.3%			1 12.5%	6.0%	6 7.7%	1 6.7%	1 3.2%	4 6.1%	5 7.9%	1 1.8%	5 11.4% k	6 6 5 10.7%			6.3%	4 8.9%	-	-	3 18.8%	3 8.1%	6 6.5%
Average	100 61.0%			_	41 61.2%	49 62.8%	8 53.3%	20 64.5%	42 63.6%		39 69.6% M	68.2%	41.1%			62 65.3%	27 60.0%	-	8 57.1%	11 68.8%	21 56.8%	57 62.0%
Somewhat above average	23 14.0%			50.0% bo		8 10.3%	2 13.3%	3 9.7%	10 15.2%		10 17.9%		9 6 16.1%	-		17 17.9% N	_	-	2 14.3%	-	8 21.6%	13 14.1%
Well above average	20 12.2%				7 10.4%	9 11.5%	3 20.0%	5 16.1%	8 12.1%	7 11.1%	2 3.6%	4 9.1%	14 25.0% KL	19.0%		7.4%	8 17.8% P	2 100.0% STUV	4 28.6%	2 12.5%	4 10.8%	8 8.7%
Not Applicable	6	5 5	5 2	-	. 2	3	1	1	2	3	3	2	. 1	. 1		4	1	-	-	1	1	4
Summary Rate - Well above average/Somewhat above average	43 26.29			50.0%	20 29.9%		5 33.3%	8 25.8%	18 27.3%		12 21.4%		23 41.1% KL	23.8%		24 25.3%	12 26.7%	2 100.0% STUV		2 12.5%	12 32.4% t	22.8%

8A. Would you recommend Louisiana Healthcare Connections to other physicians' practices?

														====== Su								
	Total Answering	Primary Care	Specialty	BH Clin.	solo		>5 phys.		5-15 years	16 or more		11- 20%	21- 100%	Physician	BH Clin.	Office Manager		3 or fewer			12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(8)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	166 100.09	5 124 5 100.0%		-	69 100.0%	76 100.0%		32 100.0%								96 100.0%		_	14 100.0%	19 100.0%	35 100.0%	94 100.0%
No Answer	51	. 38	17	2	22	22	7	10	16	24	24	11	. 9) 5	; -	33	13	-	2	8	13	26
Yes	120 72.3%				51 73.9%	57 75.0% g	9 52.9%	23 71.9%								73 76.0% N		_	12 85.7% t	11 57.9%	27 77.1%	
No	46 27.7%			_	18 26.1%	19 25.0%	8 47.1% f	9 28.1%	19 27.9%	17 27.4%	18 30.5%				5	23 24.0%		_	2 14.3%	8 42.1% s	8 22.9%	27 28.7%
Summary Rate - Yes	120 72.3%			_	51 73.9%	57 75.0%		23 71.9%		45 72.6%						73 76.0% N		50.0%	12 85.7% t	11 57.9%	27 77.1%	

8B. Please rate your overall satisfaction with Louisiana Healthcare Connections.

														====== Su								
			Medicine =		==== 1	n Pract	ice ===	=====]	Practic	e =====	=====	Volume	=====				====== Nurse/	=====				
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager	Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	180 100.0%			7 100.0%	76 100.0%	80 100.0%	20 100.0%		72 100.0%							106 100.0%			14 100.0%		41 100.0%	100 100.0%
No Answer	36	26	10	1	15	17	4	8	12	15	17	5	8	3 2	-	22	12	-	2	7	7	19
Completely dissatisfied	18 10.0%			1 14.3%	5 6.6%	9 11.2%	3 15.0%	2 5.9%	7 9.7%	9 12.9%	_	4 8.5%	9 15.3%	-		5 4.7%	_		1 7.1%	3 15.0%	2 4.9%	
Somewhat dissatisfied	29 16.1%			1 14.3%		12 15.0%	6 30.0%		10 13.9%			9 19.1%	_			17 16.0%		1 50.0%	-	5 25.0%	9 22.0%	
Neither dissatisfied nor satisfied	29 16.1%			2 28.6%	13 17.1%	12 15.0%		5 14.7%	11 15.3%							16 15.1%			1 7.1%	2 10.0%	5 12.2%	21 21.0% s
Somewhat satisfied	69 38.3%		32.7%	1 14.3%	31 40.8% G	41.2%	4 20.0%	12 35.3%	28 38.9%	26 37.1%		16 34.0%			- :	48 45.3% N	35.6%	1 50.0%	7 50.0%	8 40.0%	18 43.9%	
Completely satisfied	35 19.4%			2 28.6%	16 21.1%	14 17.5%	4 20.0%	8 23.5%	16 22.2%	11 15.7%		12 25.5% k	23.7%	15.4%	-	20 18.9%			5 35.7% t	2 10.0%	7 17.1%	20 20.0%
Does not apply	1	1	-	-	-	1	-	-	-	1	-	1		-	-	1	-	-	-	-	-	1
Summary Rate - Completely satisfied/ Somewhat satisfied	104 57.8%			3 42.9%	47 61.8% g	47 58.8%	8 40.0%	20 58.8%	44 61.1%	37 52.9%	35 53.0%	28 59.6%				68 64.2% N	57.8%	50.0%	12 85.7% TUV	10 50.0%	25 61.0%	

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

8C. Please rate your overall satisfaction with Amerigroup.

														: ===== Su								
	Total Answering	Primary Care	, Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager		3 or fewer	4 to 7	11	12 to 15	More than 15
	(A)) (B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(s)	(T)	(U)	(V)
Total	217	7 162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	156 100.09			7 100.0%	63 100.0%			27 100.0%	63 100.0%			41 100.0%				89 100.0%		_	10 100.0%		35 100.0%	88 100.0%
No Answer	41	L 31	. 11	1	19	18	4	9	13	18	17	9	8	3	-	24	14	-	2	7	8	23
Completely dissatisfied	20 12.89			-	10 15.9%	8 11.4%	1 5.3%	2 7.4%	6 9.5%	12 19.0% h	9 15.8%	4 9.8%	7 13.5%	-		6 6.7%	9 22.0% P		-	2 10.5%	4 11.4%	14 15.9%
Somewhat dissatisfied	33 21.29			1 14.3%	12 19.0%			5 18.5%	13 20.6%			8 19.5%				20 22.5%		1 100.0% STUV	1 10.0%	4 21.1%	9 25.7%	18 20.5%
Neither dissatisfied nor satisfied	24 15.49			28.6%	•	11 15.7%	_	6 22.2%	8 12.7%	10 15.9%	-	8 19.5%	8 15.4%	6 26.1%		13 14.6%	4 9.8%	-	3 30.0%	4 21.1%	4 11.4%	13 14.8%
Somewhat satisfied	58 37.29							11 40.7%	25 39.7%							41 46.1% N			5 50.0%	5 26.3%	15 42.9%	
Completely satisfied	21 13.59			1 14.3%	9 14.3%	9 12.9%	2 10.5%	3 11.1%	11 17.5%		5 8.8%	7 17.1%	8 15.4%	3 3 13.0%		9 10.1%	8 19.5%		1 10.0%	4 21.1%	3 8.6%	12 13.6%
Does not apply	20) 15	5 5	-	9	10	1	6	8	5	9	3	7	. 2	-	16	2	1	4	1	5	9
Summary Rate - Completely satisfied/ Somewhat satisfied	79 50.69			4 57.1%	33 52.4%	35 50.0%	9 47.4%	14 51.9%	36 57.1%	29 46.0%	30 52.6%	21 51.2%				50 56.2% N			6 60.0%	9 47.4%	18 51.4%	

8D. Please rate your overall satisfaction with Community Health Solutions.

														====== Su								
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager	Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	153 100.0%			6 100.0%	64 100.0%	69 100.0%	16 100.0%	29 100.0%	62 100.0%		51 100.0%					84 100.0%	42 100.0%	100.0%	14 100.0%	18 100.0%		
No Answer	42	30	13	1	18	19	5	8	13	20	19	9	8	3	-	26	13	-	2	7	9	23
Completely dissatisfied	4 2.6%	2.5%	_	-	1 1.6%	2 2.9%	1 6.2%	1 3.4%	-	3 5.2%	1 2.0%	1 2.5%	2 3.7%			-	1 2.4%	-	-	-	-	4 4.9%
Somewhat dissatisfied	10 6.5%			-	5 7.8%	2 2.9%	1 6.2%	1 3.4%	2 3.2%	6 10.3%	4 7.8%	2 5.0%	3 5.6%	_		5 6.0%	3 7.1%	-	-	2 11.1%	3 8.3%	5 6.2%
Neither dissatisfied nor satisfied	23 15.0%			1 16.7%	6 9.4%	13 18.8%	3 18.8%	4 13.8%	6 9.7%	12 20.7% i	9 17.6%	6 15.0%	7 13.0%	-		14 16.7%	4 9.5%	-	3 21.4%	3 16.7%	2 5.6%	15 18.5% U
Somewhat satisfied	61 39.9%			2 33.3%	27 42.2%	26 37.7%	7 43.8%	15 51.7%	24 38.7%		25 49.0% m	37.5%				35 41.7%		100.0%	4 28.6%	7 38.9%	18 50.0%	29 35.8%
Completely satisfied	55 35.9%		23.4%	3 50.0%	25 39.1%	26 37.7%	4 25.0%	8 27.6%	30 48.4% HJ		12 23.5%		44.4%	41.7%		30 35.7%	15 35.7%		7 50.0%	6 33.3%	13 36.1%	28 34.6%
Does not apply	22	14	5	1	9	10	3	5	9	8	13	4	5	1	-	19	2	1	-	2	3	16
Summary Rate - Completely satisfied/ Somewhat satisfied	116 75.8%			5 83.3%	52 81.2%	52 75.4%	11 68.8%	23 79.3%	54 87.1% J		37 72.5%					65 77.4%	34 81.0%	1 100.0% sTUV	11 78.6%	13 72.2%		57 70.4%

8E. Please rate your overall satisfaction with LA Care.

														====== Su								
	Total	Primary		вн		2-5	>5	<5			0-	11-	21-		вн	Office	Nurse/		4 to	8 to	12 to	More
	Answering	Care	Specialty		Solo			years			10%	20%	100%	Physician		Manager		fewer	7	11	15	than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	154			7	64		18	31	62		55					86	44	_	11	18	39	83
	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
No Answer	42	31	12	1	19	19	4	8	13	20	18	10	8	3	-	26	13	-	2	7	9	23
Completely dissatisfied	9		_	-	2	5	1	2	3	4	2	_	5	_		2	3		-	1	1	7
	5.8%	6.8%	4.3%		3.1%	7.4%	5.6%	6.5%	4.8%	7.0%	3.6%	5.0%	9.6%	9.5%		2.3%	6.8%	5		5.6%	2.6%	8.4%
Somewhat dissatisfied	32				13	14	4	5	12		13		11		-	15	10		2	3	12	15
	20.8%	17.1%	36.2% B	14.3%	20.3%	20.6%	22.2%	16.1%	19.4%	24.6%	23.6%	20.0%	21.2%	33.3%		17.4%	22.7%	i	18.2%	16.7%	30.8%	18.1%
Neither dissatisfied nor	33	25	9	1	15	14	3	8	7	17	12	6	13	5	_	21	6	-	1	6	5	21
satisfied	21.4%	21.4%	19.1%	14.3%	23.4%	20.6%	16.7%	25.8%	11.3%	29.8% I	21.8%	15.0%	25.0%	23.8%		24.4%	13.6%	i	9.1%	33.3% su	12.8%	25.3% u
Somewhat satisfied	48	37	11	2	21	21	5	9	23	14	17	15	12	1	-	31	16	-	6	6	13	22
	31.2%	31.6%	23.4%	28.6%	32.8%	30.9%	27.8%	29.0%	37.1%	24.6%	30.9%	37.5%	23.1%	4.8%		36.0% N			54.5% v	33.3%	33.3%	26.5%
Completely satisfied	32	27	8	3	13	14	5	7	17	8	11	. 9	11	. 6	_	17	9	1	2	2	8	18
	20.8%	23.1%	17.0%	42.9%	20.3%	20.6%	27.8%	22.6%	27.4% j	14.0%	20.0%	22.5%	21.2%	28.6%		19.8%	20.5%	100.0% STUV	18.2%	11.1%	20.5%	21.7%
Does not apply	21	14	6	-	8	11	2	3	9	9	10	3	7	4	-	17	-	. 1	3	2	-	14
Summary Rate -	80			5	34	35	10	16	40	22	28				-	48	25	1	8	8	21	40
Completely satisfied/ Somewhat satisfied	51.9%	54.7% c		71.4% c		51.5%	55.6%	51.6%	64.5% J	38.6%	50.9%	60.0%	44.2%	33.3%		55.8% n		100.0% STUV	72.7% V	44.4%	53.8%	48.2%

8F. Please rate your overall satisfaction with United Healthcare.

														====== Su								
		======	Medicine =		==== 1	n Practi	ce ===	===== }	ractic	e ====	=====	volume	=====		======		Nurse/	=====	======			======
	Total	Primary		вн		2-5	>5	<5	5-15	16 or	0-	11-	21-		вн	Office			4 to	8 to	12 to	More
	Answering	Care	Specialty	Clin.	Solo	phys.	phys.	years	years	more	10%	20%	100%	Physician	Clin.	Manager	staff	fewer	7	11	15	than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	163	121	51	7	66	74	20	33	65	61	58	43	54	24	_	94	43	2	12	19	37	90
	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
No Answer	42	31	12	1	18	19	4	8	13	20	18	10	8	3	-	25	13	-	2	7	9	23
Completely dissatisfied	7	6	3	1	1	4	2	2	1	4	2	1	4	3	-	1	2	-	1	1	1	4
	4.3%	5.0%	5.9%	14.3%	1.5%	5.4%	10.0%	6.1%	1.5%	6.6%	3.4%	2.3%	7.4%	12.5% p		1.1%	4.7%		8.3%	5.3%	2.7%	4.4%
Somewhat dissatisfied	11	5	6	1	3	4	2	2	1	7	5	3	3	3	_	. 5	3	_	_	2	2	7
	6.7%	4.1%	11.8%	14.3%	4.5%	5.4%	10.0%	6.1%	1.5%	11.5% I	8.6%	7.0%	5.6%	12.5%		5.3%	7.0%			10.5%	5.4%	7.8%
Neither dissatisfied nor	21	17	5	2	7	12	2	4	7	9	8	6	6	4	_	14	3	_	1	3	4	13
satisfied	12.9%		9.8%	28.6%	10.6%		10.0%	12.1%	10.8%	14.8%	13.8%	14.0%	11.1%	16.7%		14.9%			8.3%	15.8%	10.8%	
Somewhat satisfied	60		22	1	28		5	13	24			14				36			4	6	14	33
	36.8%	35.5%	43.1% d	14.3%	42.4%	36.5%	25.0%	39.4%	36.9%	34.4%	48.3% M	32.6%	27.8%	25.0%		38.3%	39.5%	50.0%	33.3%	31.6%	37.8%	36.7%
Completely satisfied	64	50	15	2	27	27	9	12	32	20	15	19	26	8	_	38	18	1	6	7	16	33
	39.3%	41.3%	29.4%	28.6%	40.9%	36.5%	45.0%	36.4%	49.2% j	32.8%	25.9%	44.2% k				40.4%	41.9%	50.0%	50.0%	36.8%	43.2%	36.7%
Does not apply	12	10	2	-	7	5	-	1	6	5	7	-	5	1	-	10	1	-	2	1	2	7
Summary Rate -	124	93	37	3	55	54	14	25	56	41	43	33	41	14	_	74	35	2	10	13	30	66
Completely satisfied/	76.1%			42.9%	83.3%	73.0%	70.0%	75.8%			74.1%	76.7%	75.9%	58.3%		78.7%		100.0%		68.4%	81.1%	73.3%
Somewhat satisfied		d							J							n	. N	TUV				

3G. Extent to which UM staff share review criteria and reasons for adverse determinations.

														====== Su								
	Total Answering		Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager	Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)		(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)		(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	154 100.0%					69 100.0%	16 100.0%		63 100.0%							86 100.0%			11 100.0%	19 100.0%	33 100.0%	90 100.0%
No Answer	27	7 18	10	-	. 9	13	5	7	9	10	10	5	6	3	-	16	8	-	1	5	8	11
Well below average	13 8.4%		-	-	7.5%	5 7.2%	2 12.5%	2 7.7%	4 6.3%	7 11.3%	3 4.9%	4 10.3%	12.0%	_	· •	4.7%	1 2.4%	-	1 9.1%	2 10.5%	2 6.1%	
Somewhat below average	5.8%	_	_	-	7.5%	2 2.9%	2 12.5%	-	3 4.8%	6 9.7%	4 6.6%	4 10.3%	2.0%			7.0%	_		-	3 15.8%	1 3.0%	5 5.6%
Average	104 67.5%				46 68.7%	48 69.6%	9 56.2%	19 73.1%	42 66.7%							58 67.4%			7 63.6%	9 47.4%	24 72.7% t	71.1%
Somewhat above average	20 13.0%			20.09	. 9 13.4%	9 13.0%	2 12.5%	4 15.4%	8 12.7%	8 12.9%	7 11.5%	6 15.4%	7 14.0%	-		14 16.3% N	11.9%	1 100.0% STUV	2 18.2%	3 15.8%	5 15.2%	9 10.0%
Well above average	5.2%			-	3.0%	5 7.2%	1 6.2%	1 3.8%	6 9.5% J	1 1.6%	1 1.6%	3 7.7%	8.0%			4.7%	2 4.8%		1 9.1%	2 10.5%	1 3.0%	4 4.4%
Not Applicable	36	5 23	16	3	15	16	3	9	12	14	12	9	11	. 1		27	7	1	4	3	7	19
Summary Rate - Well above average/Somewhat above average	28 18.2%			1 20.09	. 11 5 16.4%	14 20.3%	3 18.8%	5 19.2%	14 22.2%	9 14.5%	8 13.1%	9 23.1%	11 22.0%			18 20.9%		1 100.0% STUV	3 27.3%	5 26.3%	6 18.2%	13 14.4%

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

3H. Consistency of review decisions.

														====== Su								
	Total Answering	Primary Care		вн		2-5	>5	<5 years	5-15	16 or more	0- 10%	11-	21- 100%	Physician	BH Clin.	Office	Nurse/ Other		4 to 7	8 to 11	12 to 15	More than 15
	(A)		(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)					(P)	(Q)	(R)	(S)	(T)	(U)	
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	156 100.0%				68 100.0%			28 100.0%	62 100.0%		58 100.0%					87 100.0%			10 100.0%	18 100.0%		
No Answer	23	15	8	-	10	9	4	6	7	10	10	4	4	. 4	-	13	6	-	1	5	7	9
Well below average	10 6.4%		2 4.9%		4 5.9%	3 4.3%	3 17.6%	2 7.1%	3 4.8%	5 8.1%	3 5.2%	-	4 7.5%	_		4.6%	1 2.3%	1 50.0%	-	3 16.7%	1 2.9%	5 5.6%
Somewhat below average	6 3.8%	_	_		1 1.5%	3 4.3%	1 5.9%	1 3.6%	-	4 6.5%	-	2 5.0%	4 7.5%	3.0%		1.1%	2 4.5%	-	-	1 5.6%	1 2.9%	4.4%
Average	112 71.8%					49 71.0%	9 52.9%	21 75.0%	45 72.6%		45 77.6%					68 78.2% N	31 70.5% n	50.0%	5 50.0%	11 61.1%	28 82.4% s	
Somewhat above average	20 12.8%	17 13.9%			7 10.3%	10 14.5%		1 3.6%	10 16.1% H	-	9 15.5%	6 15.0%	9.4%	8.7%		11 12.6%	7 15.9%	-	3 30.0%	3 16.7%	4 11.8%	9 10.0%
Well above average	8 5.1%	6 4.9%	3 7.3%	-	3 4.4%	4 5.8%	1 5.9%	3 10.7%	4 6.5%	1 1.6%	1 1.7%	1 2.5%	6 11.3% Kl			3 3.4%	3 6.8%	-	2 20.0%	-	-	6 6.7%
Not Applicable	38	25	16	3	13	20	3	8	15	14	15	9	10	1		29	7	-	5	4	7	21
Summary Rate - Well above average/Somewhat above average	28 17.9%				10 14.7%	14 20.3%	4 23.5%	4 14.3%	14 22.6%		10 17.2%		11 20.8%			14 16.1%	10 22.7%		5 50.0% tUV	3 16.7%	4 11.8%	15 16.7%

4D. The frequency of feedback/reports from specialists for patients in your care.

														====== Su								
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager		3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(8)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	157 100.0%					70 100.0%		30 100.0%	63 100.0%		54 100.0%					88 100.0%	43 100.0%	2 100.0%	12 100.0%	19 100.0%		
No Answer	32	19	14	2	10	14	7	6	10	14	15	6	6	3	-	20	8	-	2	5	8	16
Well below average	7 4.5%	-	2 5.6%	-	2 2.8%	4 5.7%	1 7.1%	2 6.7%	2 3.2%	3 4.9%	2 3.7%	_	3 5.4%	4 16.7% pq		2.3%	1 2.3%	-	-	-	1 2.8%	6 7.0%
Somewhat below average	16 10.2%			-	8 11.3%	7 10.0%	1 7.1%	5 16.7%	6 9.5%	4 6.6%	8 14.8% 1	2 4.7%	6 10.7%	3 12.5%		8 9.1%	5 11.6%	-	1 8.3%	2 10.5%	5 13.9%	8 9.3%
Average	108 68.8%			3 60.0%	51 71.8%	48 68.6%	8 57.1%	17 56.7%	44 69.8%		36 66.7%			10 41.7%		69 78.4% Nq	27 62.8% n	2 100.0% STUV	7 58.3%	13 68.4%		56 65.1%
Somewhat above average	15 9.6%			1 20.0%	6 8.5%	4 5.7%	4 28.6% f	2 6.7%	6 9.5%	7 11.5%	6 11.1%	5 11.6%	4 7.1%	4 16.7%		5.7%	6 14.0%	-	2 16.7%	3 15.8%	2 5.6%	8 9.3%
Well above average	11 7.0%			1 20.0%	4 5.6%	7 10.0%	-	4 13.3%	5 7.9%	2 3.3%	2 3.7%	3 7.0%	6 10.7%	3 12.5%		4.5%	4 9.3%	-	2 16.7%	1 5.3%	-	8 9.3%
Not Applicable	28	13	15	1	10	14	3	6	11	11	14	4	5	1		21	6	-	2	3	4	18
Summary Rate - Well above average/Somewhat above average	26 16.6%			40.0%	10 14.1%	11 15.7%	4 28.6%	6 20.0%	11 17.5%	9 14.8%	8 14.8%	8 18.6%	10 17.9%			9 10.2%	10 23.3% p	-	4 33.3% U		2 5.6%	16 18.6% U

4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.

														====== Su								
		======	Medicine =		: ==== 1:	n Pract	ıce ===	=====)	Practic	e ====		Volume					====== Nurse/	======				
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager	Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(8)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	118 100.0%			100.0%	51 100.0%	54 100.0%	11 100.0%									65 100.0%	35 100.0%	2 100.0%	9 100.0%	15 100.0%	30 100.0%	61 100.0%
No Answer	34	. 22	13	1	. 13	13	7	6	10	16	17	6	6	5	-	21	7	-	3	6	7	17
Well below average	7 5.9%	-	1 5.0%	=	3.9%	4 7.4%	1 9.1%	2 8.3%	2 4.4%	3 6.5%	3 7.9%	_	3 6.1%	-		1.5%	_	-	-	-	2 6.7%	5 8.2%
Somewhat below average	13 11.0%			-	5.9%	8 14.8%	-	3 12.5%	7 15.6% j	2 4.3%	3 7.9%	4 14.8%	6 12.2%	5.9%		10.8%	5 14.3%	-	1 11.1%	2 13.3%	4 13.3%	6 9.8%
Average	79 66.9%			4 80.0%	39 76.5%	34 63.0%	6 54.5%	14 58.3%	30 66.7%	33 71.7%		66.7%				51 78.5% N			4 44.4%	10 66.7%	23 76.7% s	41 67.2%
Somewhat above average	10 8.5%		2 10.0%	-	3.9%	4 7.4%	4 36.4% Ef		3 6.7%	5 10.9%	2 5.3%	7.4%	6 12.2%	_		3.1%	5 14.3% P	1 50.0%	3 33.3% uv	2 13.3%	1 3.3%	3 4.9%
Well above average	9 7.6%		-	1 20.0%	. 5 9.8%	4 7.4%	=	3 12.5%	3 6.7%	3 6.5%	1 2.6%	7.4%	6 12.2% k			6.2%	2 5.7%	1 50.0%	1 11.1%	1 6.7%	-	6 9.8%
Not Applicable	65	37	32	2	27	31	6	12	29	24	28	20	12	6	-	43	15	-	4	6	11	42
Summary Rate - Well above average/Somewhat above average	19 16.1%			1 20.0%	. 7 : 13.7%	8 14.8%	4 36.4%	5 20.8%	6 13.3%	8 17.4%	3 7.9%	4 14.8%	12 24.5% K	35.3%	:	9.2%	7 20.0%	2 100.0% STUV	4 44.4% Uv	3 20.0%	1 3.3%	9 14.8% U

4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.

														====== Su								
			Medicine		==== i	n Pract	ice ===	===== 1	Practic	e =====	=====	Volume					====== Nurse/					
	Total Answering	Primary Care	Specialty	BH Clin.	Solo	2-5 phys.	>5 phys.	<5 years	5-15 years	16 or more	0- 10%	11- 20%	21- 100%	Physician	BH Clin.	Office Manager	Other	3 or fewer	4 to 7	8 to 11	12 to 15	More than 15
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(0)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	217	162	65	8	91	98	24	42	84	86	83	53	67	28	-	129	57	2	16	27	48	120
Total Answering	109 100.0%	95 100.0%			5 46 5 100.0%			23 100.0%		43 100.0%						58 100.0%		_	9 100.0%	15 100.0%		7 57 5 100.0%
No Answer	35	23	12	-	- 15	13	7	6	9	17	19	5	6	4		24	7	-	2	5	7	19
Well below average	6 5.5%	_	_	=	2.2%	5 9.6%	=	2 8.7%	2 4.9%	2 4.7%	-	1 4.0%	2 4.3%	-	- :	3.4%	_	-	-	=	· -	- 6 10.5%
Somewhat below average	12 11.0%				- 4 8.7%	8 15.4%	-	3 13.0%	7 17.1% J	1 2.3%	2 5.7%	3 12.0%	7 15.2%	1 5.9%		8 13.8%	3 9.1%		1 11.1%	3 20.0%	3 11.1%	, ,
Average	75 68.8%			_	1 34 5 73.9%		6 66.7%	14 60.9%	27 65.9%	33 76.7%		19 76.0% m	56.5%		-	45 77.6% N	66.7%		4 44.4%	60.0%	23 85.2% Stv	68.4%
Somewhat above average	9 8.3%			1 20.0%	4 8.7%	3 5.8%	2 22.2%	3 13.0%	3 7.3%	3 7.0%	2 5.7%	1 4.0%	6 13.0%	3 17.6% p		1 1.7%	5 15.2% P		4 44.4% tV	2 13.3%	- :	- 3 5.3%
Well above average	7 6.4%	6.3%		-	- 3 6.5%	3 5.8%	1 11.1%	1 4.3%	2 4.9%	4 9.3%	1 2.9%	1 4.0%	5 10.9%	3 17.6%	-	3.4%	2 6.1%	1 100.0% TUV	-	1 6.7%	. 1 3.7%	
Not Applicable	73	44	34	3	3 30	33	8	13	34	26	29	23	15	7	-	47	17	1	5	7	14	44
Summary Rate - Well above average/Somewhat above average	16 14.7%			-	7 5 15.2%	6 11.5%	3 33.3%	4 17.4%	5 12.2%	7 16.3%	3 8.6%	2 8.0%	11 23.9% kl	35.3%		3 5.2%	7 21.2% P	1 100.0% STUV	4 44.4% Uv		3.7%	7 s 12.3%

A. Please indicate your area of medicine. (Mark all that apply)

							In person				
	Total Answering	Mail	Phone	Fax	Online Portal	E-mail	w/Provider Rep.	Other	Mail	Phone	Internet
Total Eligible	217	90	7	50	7	53	2	3	70	133	14
Total Valid Responses	235	91	7	57	9	61	2	2	72	146	17
Total Respondents	214 100.0%		7 100.0%		7 100.0%	53 100.0%	_	_		131 100.0%	14 100.0%
Primary Care	162 75.7%		7 100.0%		7 100.0%			2 100.0%			10 71.4%
Specialty	65 30.4%	31 34.8%		16 32.7%					20 29.0%		6 42.9%
Behavioral Health Clinician	8 3.7%	_	-	1 2.0%				-	-	7 5.3%	1 7.1%

B. How many physicians are in your practice?

							In person				
	Total Answering	Mail	Phone	Fax	Online Portal	E-mail	w/Provider Rep.	Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	213 100.0%	88 100.0%	7 100.0%	50 100.0%		51 100.0%		-	69 100.0%	130 100.0%	14 100.0%
No Answer	4	2	-	-	-	2	-	-	1	3	-
Solo	91 42.7%	41 46.6%	2 28.6%		3 42.9%	18 35.3%		1 33.3%	32 46.4%	53 40.8%	6 42.9%
2 - 5 physicians	98 46.0%		5 71.4% b				100.0%	_	31 44.9%	60 46.2%	7 50.0%
More than 5 physicians	24 11.3%	12 13.6%		5 10.0%	-	5 9.8%		1 33.3%		17 13.1%	1 7.1%

C. How many years have you been in this practice?

		Preferred Method										
	Total Answering	O		Online		In person w/Provider Rep. Other				Internet		
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	
Total	217	90	7	50	7	53	2	3	70	133	14	
Total Answering	212 100.0%	89 100.0%	7 100.0%		7 100.0%	51 100.0%		-		131 100.0%	14 100.0%	
No Answer	5	1	-	2	-	2	-	-	3	2	-	
Less than 5 years	42 19.8%	16 18.0%	2 28.6%			11 21.6%		-	11 16.4%	29 22.1%	2 14.3%	
5 - 15 years	84 39.6%		1 14.3%	22 45.8% C		21 41.2% c	1 50.0%	_	26 38.8%		6 42.9%	
16 years or more	86 40.6%	40 44.9%	4 57.1%	16 33.3%	2 28.6%	19 37.3%		_	30 44.8%	50 38.2%	6 42.9%	

D. What portion of your managed care volume is represented by Louisiana Healthcare Connections?

		====== of C			Communi	cation =	In person		== ====== Survey ====== == ==== Methodology =====			
	Total Answering	Mail	Phone	Fax	Online Portal		w/Provider Rep.	Other	Mail	Phone	Internet	
	(A)	(B)	(C)		(E)					(J)	(K)	
	(A)			(1)	(12)			(11)	(1)	(0)		
Total	217	90	7	50	7	53	2	3	70	133	14	
Total Answering	203	86	7						70			
	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
No Answer	14	4	-	6	-	3	-	-	-	14	-	
None	_	2		-	-	2		_	_	3		
	2.5%	2.3%				4.0%		33.3%	2.9%	2.5%		
10% or less	78				1				30		_	
	38.4%	50.0% DEF	42.9%	27.3%	14.3%	30.0%	50.0%		42.9%	37.0%	28.6%	
11 - 20%	53				2		-	-	16			
	26.1%	23.3%	42.9%	38.6% bf	28.6%	22.0%			22.9%	28.6%	21.4%	
21 - 30%		8			4			2		16		
	16.7%	9.3%		20.5%	57.1% BdF	18.0%	50.0%	66.7% Bdf	18.6%	13.4%	35.7% j	
31 - 50%	22							-	3		_	
	10.8%	5.8%	14.3%	9.1%		24.0% BD			4.3%	14.3% I		
51 - 75%	8			2		1		-	4	_	-	
	3.9%	5.8%		4.5%		2.0%			5.7%	3.4%		
76 - 100%	3			-	-	-	-	-	2		-	
	1.5%	3.5%							2.9%	0.8%		

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level. Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

E. Please mark who is completing this survey. (Mark only one)

						ogy =====					
	Total Answering	Mail	Phone	Fax	Online Portal	E-mail	In person w/Provider Rep.	Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	214 100.0%	90 100.0%	7 100.0%	49 100.0%	7 100.0%					132 100.0%	14 100.0%
No Answer	3	-	-	1	-	2	-	-	2	1	-
Physician	28 13.1%	17 18.9% DF	2 28.6%			-		_	19 27.9% J		6 42.9% J
Behavioral Health Clinician	-	-	-	-	-	-	-	-	-	-	-
Office Manager	129 60.3%	51 56.7%	4 57.1%		2 28.6%	35 68.6% E	50.0%	_	36 52.9%	88 66.7% iK	5 35.7%
Nurse	11 5.1%	3 3.3%		7 14.3% BF	-	1 2.0%		-	1 1.5%	10 7.6% I	-
Other staff	46 21.5%	19 21.1%	1 14.3%	8 16.3%	4 57.1% bcDf			1 33.3%	12 17.6%	31 23.5%	3 21.4%

Independent Z-Test for Percentages (unpooled proportions)
Uppercase letters indicate significance at the 95% level.
Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

F. What is your preferred method of receiving communications from this health plan?

	_				== ===== Survey ====== == ==== Methodology =====						
	Total Answering	Mail	Phone	Fax	Online Portal	E-mail	w/Provider Rep.	Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	212 100.0%	90 100.0%	7 100.0%	50 100.0%	7 100.0%		100.0%			132 100.0%	14 100.0%
No Answer	5	-	-	-	-	-	-	-	4	1	-
Mail	90 42. 5%	90 100.0%	-	-	-	-	-	-	39 59.1% JK	47 35.6%	4 28.6%
Telephone	7 3.3%	-	7 100.0%	-	-	-	-	-	1 1.5%	6 4.5%	-
Fax	50 23.6%	-	-	50 100.0%	-	-	-	-	9 13.6%	40 30.3% IK	1 7.1%
Online portal	7 3.3%	-	-	-	7 100.0%	-	-	-	1 1.5%	6 4.5%	-
E-mail	53 25.0%	-	-	-	-	53 100.0%	-	-	14 21.2%	31 23.5%	8 57.1% IJ
In person from your Provider Representative	2 0.9%	-	-	-	-	-	2 100.0%	-	-	1 0.8%	1 7.1%
Other	3 1.4%	-	-	-	-	-	-	3 100.0%	2 3.0%	1 0.8%	-

Comparison Groups: BCDEFGH/IJK

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level.

Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

Presented by The Myers Group 770-978-3173

G. Please indicate the number of insurance companies with which you or your practice participates.

									=== ====== Survey ====== === ==== Methodology =====			
		=====		==== of	Communio	cation =			===== 1	Methodol	ogy =====	
	Total Answering	Mail Phone Fax		Online Portal	E-mail	In person w/Provider Rep.	Other	Mail	Phone	Internet		
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	
Total	217	90	7	50	7	53	2	3	70	133	14	
Total Answering	213 100.0%	89 100.0%	7 100.0%		7 100.0%					130 100.0%	14 100.0%	
No Answer	4	1	-	2	-	1		-	1	3	-	
3 or fewer	2 0.9%	_		1 2.1%	-	-	-	-	-	2 1.5%	-	
4 to 7	16 7.5%			7 14.6% b	1 14.3%			-	3 4.3%	11 8.5%	2 14.3%	
8 to 11	27 12.7%	13 14.6%	-	7 14.6%	-	6 11.5%		-	9 13.0%		1 7.1%	
12 to 15	48 22.5%	17 19.1%						1 33.3%	14 20.3%		6 42.9%	
More than 15	120 56.3%	54 60.7% d	_		4 57.1%	31 59.6%			43 62.3% k	72 55.4%	5 35.7%	

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level. Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

1A. How would you rate Louisiana Healthcare Connections compared to all other health plans you contract with?

		======		=== Pre	eferred 1	Method =			======	Survey	
				=== of	Communio	cation =			===== 1	Methodol	ogy =====
							In person				
	Total				Online		w/Provider				
	Answering	Mail	Phone	Fax	Portal	E-mail	Rep.	Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	207	87	7	50	6	47	2	3	66	127	14
	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
No Answer	4	2	-	-	-	2	-	-	2	2	-
Well below average	22	8	2	4	_	4	1	2	9	9	4
	10.6%	9.2%	28.6%	8.0%		8.5%	50.0%	66.7% BDF	13.6%	7.1%	28.6% j
Somewhat below average	23	13	1	4	1	4	_	_	6	16	1
-	11.1%	14.9%	14.3%	8.0%	16.7%	8.5%			9.1%	12.6%	7.1%
Average	114	50	3	31	4	21	1	1	31	79	4
	55.1%	57.5%	42.9%	62.0%	66.7%	44.7%	50.0%	33.3%	47.0%	62.2%	28.6%
				£						IK	
Somewhat above average	32	10	1	10	1	9	_	_	12	17	3
	15.5%	11.5%	14.3%	20.0%	16.7%	19.1%			18.2%	13.4%	21.4%
Well above average	16	6	_	1	_	9	_	_	8	6	2
	7.7%	6.9%		2.0%		19.1%			12.1%	4.7%	14.3%
						bD			j		
Not Applicable	6	1	-	-	1	4	-	-	2	4	-
Summary Rate - Well	48		1	11	1	18	-	-	20	23	
above average/Somewhat	23.2%	18.4%	14.3%	22.0%	16.7%	38.3%			30.3%	18.1%	35.7%
above average						Bd			j		

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level. Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

2A. Consistency of reimbursement fees with your contract rates.

	Total Answering	Mail			Portal	E-mail	Rep.	Other		Phone	Internet
	(A)	(B)	(C)	(D)	(E)		(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	189 100.0%		7 100.0%		7 100.0%		2 100.0%			110 100.0%	14 100.0%
No Answer	14	8	-	1	-	3	-	1	4	10	-
Well below average	16 8.5%		2 28.6%		1 14.3%			1 50.0%		10 9.1%	1 7.1%
Somewhat below average	19 10.1%	10 13.3%		3 6.8%				-	4 6.2%		3 21.4%
Average	101 53.4%	38 50.7%	4 57.1%		2 28.6%			1 50.0%	30 46.2%	65 59.1% i	6 42.9%
Somewhat above average	35 18.5%	18 24.0% D	1 14.3%	_	3 42.9% D			-	18 27.7% JK	16 14.5%	1 7.1%
Well above average	18 9.5%			4 9.1%	-	9 18.4% b		-	8 12.3%		
Not Applicable	14	7	-	5	-	1	-	-	1	13	-
Summary Rate - Well above average/Somewhat above average	53 28.0%	23 30.7% D	1 14.3%	6 13.6%	3 42.9%			-	26 40.0% J	23 20.9%	4 28.6%

Comparison Groups: BCDEFGH/IJK

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level.

Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

2B. Accuracy of claims processing.

		======================================										
	Total				Online		In person w/Provider					
	Answering	Mail	Phone	Fax	Portal		-	Other	Mail	Phone	Internet	
	(A)	(B)	(C)	(D)	(E)	(F)		(H)	(I)	(J)	(K)	
Total	217	90	7	50	7	53	2	3	70	133	14	
Total Answering	186 100.0%			41 100.0%	7 100.0%					107 100.0%	14 100.0%	
No Answer	14	7	1	1	-	3	-	1	4	10	-	
Well below average	13 7.0%		2 33.3%	_	=	2 4.0%		1 50.0%	-	4 3.7%	3 21.4%	
Somewhat below average	18 9.7%	9 12.0% D	-	1 2.4%	1 14.3%	-		-	4 6.2%	13 12.1%	1 7.1%	
Average	97 52.2%		4 66.7%	31 75.6% BF	4 57.1%			1 50.0%	25 38.5%	66 61.7% I	6 42.9%	
Somewhat above average	41 22.0%	19 25.3% d		5 12.2%	1 14.3%		50.0%	-	22 33.8% Jk	17 15.9%	2 14.3%	
Well above average	17 9.1%		-	2 4.9%	1 14.3%	9 18.0% bD		-	8 12.3%	7 6.5%	2 14.3%	
Not Applicable	17	8	-	8	-	-	-	-	1	16	-	
Summary Rate - Well above average/Somewhat above average	58 31.2%	24 32.0% d		7 17.1%	2 28.6%		50.0%	-	30 46.2% J	24 22.4%		

Comparison Groups: BCDEFGH/IJK

Independent Z-Test for Percentages (unpooled proportions)
Uppercase letters indicate significance at the 95% level.

Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

2C. Timeliness of claims processing.

	======================================												
	Total Answering	Mail	Phone	Fax	Online Portal	E-mail	w/Provider Rep.	Other	Mail	Phone	Internet		
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)		
Total	217	90	7	50	7	53	2	3	70	133	14		
Total Answering	188 100.0%		6 100.0%		7 100.0%	49 100.0%	2 100.0%		64 100.0%				
No Answer	15	6	1	2	-	4	-	1	5	10	=		
Well below average	11 5.9%		1 16.7%	_	-	2 4.1%		1 50.0%					
Somewhat below average	11 5.9%	-	-	2 4.7%	1 14.3%	_		-	4 6.2%	-			
Average	101 53.7%		3 50.0%	27 62.8%	3 42.9%	23 46.9%	-	1 50.0%	23 35.9%	. –	50.0%		
Somewhat above average	47 25.0%		2 33.3%	8 18.6%	3 42.9%	16 32.7%	-	-	21 32.8% j		-		
Well above average	18 9.6%		-	4 9.3%	-	7 14.3%	-	-	10 15.6% j				
Not Applicable	14	8	-	5	-	-	-	-	1	13	-		
Summary Rate - Well above average/Somewhat above average	65 34.6%		2 33.3%		3 42.9%			-	31 48.4% J	27.3%			

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level.

Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

2D. Resolution of claims payment problems or disputes.

		======================================										
	Total Answering	Mail	Phone	Fax		E-mail		Other	Mail	Phone	Internet	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	
Total	217	90	7	50	7	53	2	3	70	133	14	
Total Answering	175 100.0%		5 100.0%		7 100.0%	43 100.0%				100 100.0%	13 100.0%	
No Answer	15	6	1	2	-	4	-	1	4	11	-	
Well below average	21 12.0%	-	2 40.0%	-	1 14.3%	-	_	_	7 11.3%		3 23.1%	
Somewhat below average	18 10.3%	8 11.0%	-	3 7.3%					6 9.7%			
Average	93 53.1%	43 58.9% CF	1 20.0%		3 42.9%			1 50.0%	26 41.9%		38.5%	
Somewhat above average	29 16.6%	9 12.3%	1 20.0%					-	12 19.4%			
Well above average	14 8.0%		1 20.0%	_	_	3 7.0%	-	-	11 17.7% J	2.0%		
Not Applicable	27	11	1	7	-	6	-	-	4	22	1	
Summary Rate - Well above average/Somewhat above average	43 24.6%	16 21.9%	2 40.0%		28.6%			-	23 37.1% J			

Comparison Groups: BCDEFGH/IJK

Independent Z-Test for Percentages (unpooled proportions)
Uppercase letters indicate significance at the 95% level.
Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

Presented by The Myers Group 770-978-3173 2013

3A. Access to knowledgeable UM staff.

							In person				
	Total Answering	Mail	Phone	Fax	Online Portal	E-mail	w/Provider Rep.	Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	178 100.0%		6 100.0%	42 100.0%	7 100.0%		2 100.0%	_		109 100.0%	12 100.0%
No Answer	15	5	1	4	-	4	-	1	3	12	-
Well below average	13 7.3%		2 33.3%		-	3 7.7%		1 50.0%		6 5.5%	2 16.7%
Somewhat below average	16 9.0%	12 15.6% Df		2 4.8%	-	2 5.1%		-	9 15.8% J	4 3.7%	3 25.0% j
Average	112 62.9%	49 63.6%	4 66.7%	27 64.3%	5 71.4%	23 59.0%			31 54.4%	77 70.6% IK	
Somewhat above average	27 15.2%	8 10.4%	-	9 21.4%	1 14.3%	9 23.1% b		-	7 12.3%	19 17.4%	1 8.3%
Well above average	10 5.6%	-	-	1 2.4%	1 14.3%	_		-	5 8.8%	3 2.8%	2 16.7%
Not Applicable	24	8	-	4	-	10	-	-	10	12	2
Summary Rate - Well above average/Somewhat above average	37 20.8%	14 18.2%		10 23.8%	2 28.6%			-	12 21.1%	22 20.2%	

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level.

Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

3B. Procedures for obtaining pre-certification/referral/authorization information.

	Total Answering	Mail	Phone	Fax	Online Portal	E-mail	w/Provider Rep.	Other	Mail	Phone	Internet		
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)		
Total	217	90	7	50	7	53	2	3	70	133	14		
Total Answering	182 100.0%			41 100.0%	6 100.0%	48 100.0%	2 100.0%			108 100.0%	13 100.0%		
No Answer	18	7	1	4	-	4	-	1	3	15	-		
Well below average	14 7.7%	_	1 16.7%	5 12.2% f	-	1 2.1%		1 50.0%	-	-	2 15.4%		
Somewhat below average	25 13.7%	9 12.2%		-	-	7 14.6%		-	10 16.4%		-		
Average	107 58.8%	44 59.5%							29 47.5%		10 76.9% I		
Somewhat above average	23 12.6%	8 10.8%	-	6 14.6%	1 16.7%	-	-	-	8 13.1%	14 13.0%	1 7.7%		
Well above average	13 7.1%	8 10.8% d		1 2.4%	_	3 6.2%	-	-	8 13.1% j		-		
Not Applicable	17	9	-	5	1	1	-	-	6	10	1		
Summary Rate - Well above average/Somewhat above average	36 19.8%	16 21.6%	-	7 17.1%				-	16 26.2% K	17.6%	1 7.7%		

Comparison Groups: BCDEFGH/IJK

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level. Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

Presented by The Myers Group 770-978-3173

3C. Timeliness of obtaining pre-certification/referral/authorization information.

	======================================											
		Mail	Phone		Portal	E-mail	Rep.	Other	Mail	Phone	Internet	
	(A)	(B)	(C)	(D)	(E)	(F)		(H)	(I)	(J)	(K)	
Total	217	90	7	50	7	53	2	3	70	133	14	
Total Answering	184 100.0%				7 100.0%	48 100.0%			61 100.0%	110 100.0%	13 100.0%	
No Answer	18	8	1	4	-	4	-	1	3	15	-	
Well below average	11 6.0%	_		4 9.3%	-	1 2.1%		1 50.0%	5 8.2%	_	_	
Somewhat below average	27 14.7%			9 20.9%		-		-	7 11.5%		1 7.7%	
Average	113 61.4%			25 58.1%	5 71.4%			50.0%	34 55.7%	. –	-	
Somewhat above average	24 13.0%	9 12.5%		4 9.3%				-	8 13.1%		_	
Well above average	9 4.9%			1 2.3%	-	1 2.1%		-	7 11.5% J	1.8%	-	
Not Applicable	15	10	-	3	-	1	-	-	6	8	1	
Summary Rate - Well above average/Somewhat above average	33 17.9%	16 22.2%		5 11.6%	1 14.3%			-	15 24.6%		2 15.4%	

Comparison Groups: BCDEFGH/IJK

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level. Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

Presented by The Myers Group 770-978-3173

3D. The health plan's facilitation/support of appropriate clinical care for patients.

		======================================										
	Total Answering	Mail	Phone	Fax	Online Portal	E-mail	w/Provider	Other	Mail	Phone	Internet	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	
Total	217	90	7	50	7	53	2	3	70	133	14	
Total Answering	176 100.0%			40 100.0%	6 100.0%					101 100.0%	13 100.0%	
No Answer	23	9	1	4	-	7	1	1	3	19	1	
Well below average	10 5.7%		-	3 7.5%	-	1 2.3%		1 50.0%		2 2.0%	3 23.1% j	
Somewhat below average	15 8.5%	9 12.2%	-	2 5.0%	-	3 6.8%		-	7 11.3%	7 6.9%	1 7.7%	
Average	118 67.0%	46 62.2%	5 100.0% BDeF		4 66.7%			1 50.0%	35 56.5%	77 76.2% IK		
Somewhat above average	23 13.1%	9 12.2%	-	2 5.0%	1 16.7%			-	9 14.5%	12 11.9%	2 15.4%	
Well above average	10 5.7%		-	1 2.5%	1 16.7%	_		-	6 9.7%	3 3.0%	1 7.7%	
Not Applicable	18	7	1	6	1	2	-	-	5	13	-	
Summary Rate - Well above average/Somewhat above average	33 18.8%	16 21.6% D	-	3 7.5%	2 33.3%			-	15 24.2%	15 14.9%	3 23.1%	

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level. Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

3E. Access to Case/Care Managers from this health plan.

		======================================										
	Total Answering	Mail	Phone	Fax	Online Portal	E-mail	w/Provider Rep.	Other	Mail	Phone	Internet	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	
Total	217	90	7	50	7	53	2	3	70	133	14	
Total Answering	166 100.0%		6 100.0%		6 100.0%	41 100.0%				97 100.0%	10 100.0%	
No Answer	19	7	1	6	-	4	-	1	2	16	1	
Well below average	10 6.0%		2 33.3%	_	-	1 2.4%		1 50.0%	_	4 4.1%	1 10.0%	
Somewhat below average	11 6.6%	-	1 16.7%		-	2 4.9%		-	4 6.8%	_	2 20.0%	
Average	115 69.3%	45 68.2% C	1 16.7%		5 83.3% C	70.7%		1 50.0%	38 64.4%	. –	6 60.0%	
Somewhat above average	24 14.5%	9 13.6%	2 33.3%		-	9 22.0%	-	-	9 15.3%	14 14.4%	1 10.0%	
Well above average	6 3.6%		-	2 5.1%	1 16.7%	-	-	-	3 5.1%	3 3.1%	-	
Not Applicable	32	17	-	5	1	8	-	-	9	20	3	
Summary Rate - Well above average/Somewhat above average	30 18.1%	12 18.2%	2 33.3%	-	1 16.7%	-	-	-	12 20.3%		1 10.0%	

Lowercase letters indicate significance at the 90% level.

Independent Z-Test for Percentages (unpooled proportions)
Uppercase letters indicate significance at the 95% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

3F. Degree to which the plan covers and encourages preventive care and wellness.

		======================================									
	Total Answering	Mail		Fax	Portal	E-mail	w/Provider Rep.			Phone	Internet
	(A)	(B)	(C)							(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	177 100.0%						2 100.0%				
No Answer	21	8	1	6	-	4	-	1	3	17	1
Well below average	7 4.0%	3 4.1%		1 2.7%	-	-	1 50.0%	_	6 9.4%		1 9.1%
Somewhat below average		5 6.8%		1 2.7%	1 14.3%	1 2.1%			4 6.2%		
Average	113 63.8%		_		3 42.9%	30 63.8%	-	1 50.0%	36 56.2%	. –	_
Somewhat above average		12 16.4%			2 28.6%			=	9 14.1%	18 17.6%	
Well above average	19 10.7%	7 9.6%		3 8.1%		7 14.9%		-	9 14.1%	-	_
Not Applicable	19	9	1	7	-	2	-	-	3	14	2
Summary Rate - Well above average/Somewhat	48 27.1%				3 42.9%	16 34.0%		-	18 28.1%	26 25.5%	4 36.4%

above average

Independent Z-Test for Percentages (unpooled proportions)
Uppercase letters indicate significance at the 95% level.
Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

4A. The number of specialists in this health plan's provider network.

		======================================										
	Total Answering	Mail	Phone	Fax	Online Portal	E-mail	w/Provider Rep.	Other	Mail	Phone	Internet	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	
Total	217	90	7	50	7	53	2	3	70	133	14	
Total Answering	170 100.0%		6 100.0%		6 100.0%	41 100.0%		_		100 100.0%	10 100.0%	
No Answer	31	10	1	8	1	8	-	1	4	27	-	
Well below average	17 10.0%	9 12.9% F		-		_		1 50.0%	7 11.7%		-	
Somewhat below average	30 17.6%	13 18.6%	-	10 24.4%	-	6 14.6%			13 21.7%		2 20.0%	
Average	94 55.3%	35 50.0%							29 48.3%		5 50.0%	
Somewhat above average	17 10.0%	7 10.0%			-	5 12.2%			4 6.7%		3 30.0%	
Well above average	12 7.1%		-	2 4.9%		-		-	7 11.7%		-	
Not Applicable	16	10	-	1	-	4	-	-	6	6	4	
Summary Rate - Well above average/Somewhat above average	29 17.1%	13 18.6%	2 33.3%					-	11 18.3%		3 30.0%	

Comparison Groups: BCDEFGH/IJK

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level. Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

Presented by The Myers Group 770-978-3173 2013

4B. The quality of specialists in this health plan's provider network.

	Total	======================================								== ==== Methodology =====			
	Answering	Mail	Phone	Fax		E-mail	Rep.	Other	Mail	Phone	Internet		
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)		
Total	217	90	7	50	7	53	2	3	70	133	14		
Total Answering	164 100.0%		5 100.0%		6 100.0%	38 100.0%	2 100.0%		58 100.0%		10 100.0%		
No Answer	34	12	1	8	1	9	-	1	6	28	-		
Well below average	10 6.1%		-	3 7.3%	-	-	-	1 50.0%	_	_			
Somewhat below average	14 8.5%			5 12.2%	-	5 13.2%	-	-	7 12.1%	-			
Average	106 64.6%		3 60.0%	30 73.2% f	5 83.3% f	52.6%		1 50.0%	31 53.4%				
Somewhat above average	26 15.9%	9 13.2% D	2 40.0% d	2.4%	1 16.7%		100.0%		10 17.2%				
Well above average	8 4.9%			2 4.9%	-	2 5.3%		-	5 8.6%				
Not Applicable	19	10	1	1	-	6	-	-	6	9	4		
Summary Rate - Well above average/Somewhat above average	34 20.7%	13 19.1% d	2 40.0%		1 16.7%		100.0%		15 25.9%				

Independent Z-Test for Percentages (unpooled proportions)
Uppercase letters indicate significance at the 95% level.

Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

4C. The timeliness of feedback/reports from specialists in this health plan's provider network.

	Total Answering	Mail	Phone	Fax	Online Portal	E-mail	w/Provider Rep.	Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	159 100.0%		5 100.0%		6 100.0%					91 100.0%	11 100.0%
No Answer	34	11	1	8	1	8	1	1	5	29	-
Well below average	7 4.4%			2 5.0%	-	-	-	1 50.0%	_	_	-
Somewhat below average	16 10.1%		1 20.0%	5 12.5%	-	4 10.5%		-	7 12.3%		1 9.1%
Average	111 69.8%	43 65.2%	4 80.0%		5 83.3%			1 50.0%	32 56.1%	. –	
Somewhat above average	17 10.7%	10 15.2%	-	3 7.5%	1 16.7%	_		=	8 14.0%	8 8.8%	1 9.1%
Well above average	8 5.0%		-	-	-	4 10.5%			5 8.8%	2 2.2%	1 9.1%
Not Applicable	24	13	1	2	-	7	-	-	8	13	3
Summary Rate - Well above average/Somewhat above average	25 15.7%	13 19.7% d	-	3 7.5%	1 16.7%				13 22.8% j	10 11.0%	2 18.2%

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level. Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

5A. Consistency of the formulary over time.

					== Preferred Method ====================================							
	Total Answering	Mail	Phone	Fax	Online Portal	E-mail		Other	Mail	Phone	Internet	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	
Total	217	90	7	50	7	53	2	3	70	133	14	
Total Answering	156 100.0%				5 100.0%				54 100.0%		12 100.0%	
No Answer	36	16	1	7	2	10	-	-	7	29	-	
Well below average	19 12.2%	9 14.1%	-	4 10.5%		_	_		10 18.5% J		3 25.0%	
Somewhat below average	20 12.8%	7 10.9%	-	7 18.4%	-	6 16.7%		-	6 11.1%	13 14.4%	1 8.3%	
Average	95 60.9%	38 59.4%	5 100.0% BDeF		3 60.0%			1 50.0%	27 50.0%		6 50.0%	
Somewhat above average	16 10.3%		-	3 7.9%	1 20.0%	_		-	6 11.1%	8 8.9%	2 16.7%	
Well above average	6 3.8%	-	-	1 2.6%	-	-	-	-	5 9.3% J	1.1%	-	
Not Applicable	25	10	1	5	-	7	-	1	9	14	2	
Summary Rate - Well above average/Somewhat above average	22 14.1%	10 15.6%	-	4 10.5%		_		-	11 20.4%		2 16.7%	

Comparison Groups: BCDEFGH/IJK

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level. Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, $n \ge 30$)

Presented by The Myers Group 770-978-3173 2013

5B. Extent to which formulary reflects current standards of care.

									==== ===== Survey ====== ==== Methodology =====			
	Total				Online		In person					
	Total Answering	Mod 1	Dhone	For	Portal	E moil	w/Provider	Other	Mod 1	Phone	Internet	
	Allswering	maii	Phone	rax	POICAL	E-Mail	kep.	other	Maii	Phone	Internet	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	
Total	217	90	7	50	7	53	2	3	70	133	14	
Total Answering	159	68	5	38	5	34	2	3	56	91	12	
	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	
No Answer	37	15	1	8	2	11	-	-	6	31	-	
Well below average	19	7	-	4	1	3	1	2	10	6	3	
	11.9%	10.3%		10.5%	20.0%	8.8%	50.0%	66.7% BDF	17.9% J	6.6%	25.0%	
Somewhat below average	21	10	_	7	_	3	1	_	8	12	1	
	13.2%	14.7%		18.4%		8.8%	50.0%		14.3%	13.2%	8.3%	
Average	92		4		3	24	-	1	25	62	5	
	57.9%	51.5%	80.0%	60.5%	60.0%	70.6% b		33.3%	44.6%	68.1% Ik		
Somewhat above average	18	9	1	3	1	3	_	_	8	8	2	
		13.2%	_			_			14.3%			
Well above average	9	7	-	1	-	1	-	-	5	3	1	
	5.7%	10.3% d		2.6%		2.9%			8.9%	3.3%	8.3%	
Not Applicable	21	7	1	4	-	8	-	-	8	11	2	
Summary Rate - Well	27	16	1	4	1	4	-	-	13	11	3	
above average/Somewhat above average	17.0%	23.5% d	20.0%	10.5%	20.0%	11.8%			23.2% j	12.1%	25.0%	

Independent Z-Test for Percentages (unpooled proportions)
Uppercase letters indicate significance at the 95% level.

Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

5C. Variety of branded drugs on the formulary.

	======================================										
	Answering	Mail	Phone		Portal	E-mail		Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	155 100.0%				5 100.0%					85 100.0%	
No Answer	34	13	1	8	2	10	-	-	4	30	-
Well below average	25 16.1%	10 15.2%		8 22.2% F					12 20.7%	10 11.8%	
Somewhat below average	35 22.6%	12 18.2%			-	8 23.5%			13 22.4%		8.3%
Average	71 45.8%	30 45.5%				19 55.9%		1 33.3%	19 32.8%		66.7%
Somewhat above average	17 11.0%	11 16.7% df	20.0%	_	-	2 5.9%	-	-	10 17.2%	-	
Well above average	7 4.5%	_		-	1 20.0%			-	4 6.9%		
Not Applicable	28	11	1	6	-	9	-	-	8	18	2
Summary Rate - Well above average/Somewhat above average	24 15.5%	14 21.2% D	20.0%	_	1 20.0%	_	-	-	14 24.1% j	11.8%	

Comparison Groups: BCDEFGH/IJK

Independent Z-Test for Percentages (unpooled proportions)
Uppercase letters indicate significance at the 95% level.
Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

Presented by The Myers Group 770-978-3173

5D. Ease of prescribing your preferred medications within formulary guidelines.

					Communi		In person		== ====== Survey ====== == ==== Methodology =====				
	Total Answering	Mail	Phone	Fax	Online Portal	E-mail	w/Provider Rep.	Other	Mail	Phone	Internet		
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)		
Total	217	90	7	50	7	53	2	3	70	133	14		
Total Answering	151 100.0%		5 100.0%	36 100.0%	5 100.0%	33 100.0%	2 100.0%			83 100.0%			
No Answer	37	15	1	9	2	10	-	-	6	31	-		
Well below average	24 15.9%	11 17.5%	-	5 13.9%	-	4 12.1%		2 66.7% bdF		9.6%	4 33.3% j		
Somewhat below average	29 19.2%	12 19.0%		9 25.0%	1 20.0%	-			11 19.6%				
Average	70 46.4%	30 47.6%				13 39.4%		1 33.3%	17 30.4%		41.7%		
Somewhat above average	20 13.2%		1 20.0%	3 8.3%	1 20.0%	-		-	11 19.6% j	8.4%	2 16.7%		
Well above average	8 5.3%			-	-	4 12.1%		-	5 8.9%				
Not Applicable	29	12	1	5	-	10	-	-	8	19	2		
Summary Rate - Well above average/Somewhat above average	28 18.5%	10 15.9%	1 20.0%	3 8.3%	1 20.0%	11 33.3% bD		-	16 28.6% J				

Comparison Groups: BCDEFGH/IJK

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level.

Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

Presented by The Myers Group 770-978-3173

5E. Availability of comparable drugs to substitute those not included in the formulary.

					n ====================================						
	Total				Online		w/Provider				
	Answering	Mail	Phone			E-mail	Rep.	Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	147	61	5	34	5	33	2	3	54	81	12
	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
No Answer	41	16	1	10	2	12	-	-	8	33	-
Well below average	28	12	-	8	1	3	1	2	13	11	4
	19.0%	19.7%		23.5%	20.0%	9.1%	50.0%	66.7% bF	24.1%	13.6%	33.3%
Somewhat below average	23	9	2	7	_	4	1	_	5	18	_
	15.6%	14.8%				12.1%			9.3%	22.2% I	
Average	71	28	3	19	3	16	_	1	21	44	6
	48.3%				60.0%				38.9%		50.0%
Somewhat above average	17	7	_	_	1	7	_	_	10	5	2
	11.6%	11.5%			20.0%	21.2%			18.5% J		16.7%
Well above average	8	5	_	_	_	3	_	_	5	3	_
	5.4%					9.1%			9.3%		
Not Applicable	29	13	1	6	-	8	-	-	8	19	2
Summary Rate - Well	25	12	-	-	1	10	-	-	15	8	2
above average/Somewhat above average	17.0%	19.7%			20.0%	30.3%			27.8% J		16.7%

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level. Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

6A. Ease of reaching health plan call center staff over the phone.

		======================================									
	Total Answering	Mail	Phone	Fax	Online Portal	E-mail	w/Provider Rep.	Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	173 100.0%				5 100.0%					99 100.0%	12 100.0%
No Answer	32	12	1	7	2	8	-	1	3	29	-
Well below average	11 6.4%	_	2 33.3%	_	-	2 5.1%		1 50.0%	_	_	3 25.0% j
Somewhat below average	14 8.1%		1 16.7%					=	5 8.1%		3 25.0%
Average	106 61.3%	48 64.0%			2 40.0%				34 54.8%		4 33.3%
Somewhat above average	24 13.9%	9 12.0%		5 12.5%	1 20.0%	-		-	9 14.5%	14 14.1%	1 8.3%
Well above average	18 10.4%	9 12.0%		4 10.0%	-	4 10.3%		-	10 16.1% j	7 7.1%	1 8.3%
Not Applicable	12	3	-	3	-	6	-	-	5	5	2
Summary Rate - Well above average/Somewhat above average	42 24.3%	18 24.0%		9 22.5%	1 20.0%			-	19 30.6%	21 21.2%	2 16.7%

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level. Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

6B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).

	Total Answering	Mail	Phone	Fax	Online Portal	E-mail	w/Provider Rep.	Other	Mail	Phone	Internet		
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)		
Total	217	90	7	50	7	53	2	3	70	133	14		
Total Answering	177 100.0%		6 100.0%		5 100.0%	43 100.0%	_			99 100.0%			
No Answer	34	13	1	7	2	9	-	1	4	30	-		
Well below average	5 2.8%		1 16.7%		-	1 2.3%		1 50.0%	_	_			
Somewhat below average	8 4.5%		-	2 5.0%	-	1 2.3%		-	5 7.7% j	1.0%	_		
Average	108 61.0%	48 64.0% f	3 50.0%	30 75.0% F	3 60.0%			1 50.0%	37 56.9%		38.5%		
Somewhat above average	35 19.8%	11 14.7%							11 16.9%				
Well above average	21 11.9%	9 12.0%	-	5 12.5%	-	7 16.3%		-	9 13.8%	-	_		
Not Applicable	6	2	-	3	-	1	-	-	1	4	1		
Summary Rate - Well above average/Somewhat above average	56 31.6%		2 33.3%	8 20.0%	2 40.0%		100.0%		20 30.8%				

Comparison Groups: BCDEFGH/IJK

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level.

Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

Presented by The Myers Group 770-978-3173

6C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.

		Preferred Method									
				==== 01	Communi	cation =	In person		===== 1	Methodor	ogy =====
	Total				Online		w/Provider				
	Answering	Mail	Phone	Fax	Portal	E-mail	Rep.	Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	163	70	6	42	5	33	2	2	60	92	11
	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
No Answer	39	14	1	7	2	13	-	1	7	32	-
Well below average	5	2	_	-	_	1	_	1	3	1	1
	3.1%	2.9%				3.0%		50.0%	5.0%	1.1%	9.1%
Somewhat below average	9			3	-	-	-	-	5	2	2
	5.5%	5.7%	33.3%	7.1%					8.3%	2.2%	18.2%
Average	112		4	31	4	20	2	1	35	72	5
	68.7%	71.4%	66.7%	73.8%	80.0%	60.6%	100.0% BcDF	50.0%	58.3%	78.3% IK	
Somewhat above average	23	6	_	5	1	9	_	_	10	11	2
	14.1%	8.6%		11.9%	20.0%	27.3% Bd			16.7%	12.0%	18.2%
Well above average	14	8	_	3	_	3	_	_	7	6	1
	8.6%	11.4%		7.1%		9.1%			11.7%	6.5%	
Not Applicable	15	6	-	1	-	7	-	-	3	9	3
Summary Rate - Well	37	14	_	8	1	12	-	-	17	17	3
above average/Somewhat above average	22.7%	20.0%		19.0%	20.0%	36.4% bd			28.3%	18.5%	27.3%

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level.

Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

6D. Overall satisfaction with health plan's call center service.

		============== Preferred Method ====================================											
		=====		==== of	Communi	cation =			===== 1	Methodol	ogy =====		
							In person						
	Total Answering	36-23	Phone		Online Portal		w/Provider	Other	35-23	Dh	T		
	Answering	Mall	Phone	rax	POFTAL		-	Other	Mall	Phone	Internet		
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)		
Total	217	90	7	50	7	53	2	3	70	133	14		
Total Answering	175	77	6	40	5	40	2	2	65	97	13		
	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%		
No Answer	35	12	1	8	2	10	-	1	4	31	-		
Well below average	8	1	2	1	_	2	-	1	3	3	2		
	4.6%	1.3%	33.3% b	2.5%		5.0%		50.0%	4.6%	3.1%	15.4%		
Somewhat below average	12	7	1	2	_	2	-	_	7	2	3		
	6.9%	9.1%	16.7%	5.0%		5.0%			10.8%	2.1%			
									J		j		
Average	102	49								69	4		
	58.3%	63.6%	16.7%			40.0%		50.0%	44.6%	71.1%			
		CF		CF	CF		BCDF			IK			
Somewhat above average	33	11	1	5	_	14	-	_	18	13	2		
	18.9%	14.3%	16.7%	12.5%		35.0%			27.7%	13.4%	15.4%		
						BD			J				
Well above average	20	9	1	3	1	6	-	_	8	10	2		
	11.4%	11.7%	16.7%	7.5%	20.0%	15.0%			12.3%	10.3%	15.4%		
Not Applicable	7	1	-	2	-	3	-	-	1	5	1		
Summary Rate - Well	53	20	2	8	1	20	-	-	26	23	4		
above average/Somewhat	30.3%	26.0%	33.3%	20.0%	20.0%	50.0%			40.0%	23.7%	30.8%		
above average						BD			J				

Comparison Groups: BCDEFGH/IJK

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level. Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

Presented by The Myers Group 770-978-3173

7A. Do you have a Provider Relations representative from this health plan assigned to your practice?

		======================================									
		=====		==== of	Communi	cation =			===== 1	Methodol	ogy =====
	Total Answering	Mail	Phone	Fax	Online Portal	E-mail	In person w/Provider Rep.	Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	148 100.0%					36 100.0%	100.0%	2 100.0%		77 100.0%	
No Answer	69	27	4	16	4	17	-	1	13	56	-
Yes	108 73.0%				3 100.0% BDF		100.0%	2 100.0% BDF		60 77.9%	-
No	40 27.0%			13 38.2% F		6 16.7%		-	18 31.6%		5 35.7%
Summary Rate - Yes	108 73.0%				3 100.0% BDF		2 100.0% BDF				-

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

7B. Provider Relations representative's ability to answer questions and resolve problems.

		======================================												
		=====		==== of	Communi	cation =		======	===== 1	Methodol	ogy =====			
							In person							
	Total				Online		w/Provider							
	Answering	Mail	Phone	Fax	Portal	E-mail	Rep.	Other	Mail	Phone	Internet			
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)			
Total	108	44	2	21	3	30	2	2	39	60	9			
Total Answering	99	41	2	19	3	28	2	2	36	55	8			
•	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%			
No Answer	5	2	-	1	-	1	-	-	2	2	1			
Well below average	9	1	_	_	1	5	1	1	2	5	2			
-	9.1%	2.4%			33.3%	17.9% B		50.0%	5.6%	9.1%	25.0%			
Somewhat below average	5	2	_	_	_	3	_	_	1	4	_			
Somewhat Delow average	5.1%					10.7%			2.8%					
Average	50	27	2	11	1	7	_	1	16	31	3			
	50.5%	65.9%	100.0%	57.9%	33.3%	25.0%		50.0%	44.4%	56.4%	37.5%			
		F	BDEF	F										
Somewhat above average	15	3	-	4	-	8	-	-	9	5	1			
	15.2%	7.3%		21.1%		28.6%			25.0%		12.5%			
						В			j					
Well above average	20	8	_	4	1	5	1	_	8	10	2			
	20.2%	19.5%		21.1%	33.3%	17.9%	50.0%		22.2%	18.2%	25.0%			
Not Applicable	4	1	-	1	-	1	-	-	1	3	-			
Summary Rate - Well	35	11	_	8	1	13	1	-	17	15	3			
above average/Somewhat	35.4%	26.8%		42.1%	33.3%	46.4%	50.0%		47.2%	27.3%	37.5%			
above average						b			j					

Comparison Groups: BCDEFGH/IJK

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level.

Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

7C. Quality of provider orientation process.

		======================================									
	Total				Online		In person w/Provider				
	Answering	Mail	Phone	Fax	Portal	E-mail		Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	149		5	34	5	34	_	_			12
	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
No Answer	45	18	1	8	2	12	-	1	11	34	-
Well below average	15	6	1	1	1	4		_	_	8	2
	10.1%	9.1%	20.0%	2.9%	20.0%	11.8%	50.0%	50.0%	9.4%	9.5%	16.7%
Somewhat below average	16	9	_	2	_	5	-	-	5	9	2
	10.7%	13.6%		5.9%		14.7%			9.4%	10.7%	16.7%
Average	78	35	4	24	2	13	_	_	25	49	4
-	52.3%	53.0%	80.0% F	70.6% bF	40.0%	38.2%			47.2%	58.3% k	33.3%
Somewhat above average	21	. 8	_	4	1	6	_	1	12	8	1
Some made above average		12.1%		11.8%	20.0%			_	22.6% J		8.3%
Well above average	19	8	_	3	1	6	1	_	6	10	3
morr above average		12.1%		8.8%	20.0%	-	_		11.3%		25.0%
Not Applicable	23	6	1	8	-	7	-	-	6	15	2
Summary Rate - Well	40	16	_	7	2	12	1	1	18	18	4
above average/Somewhat above average	26.8%	24.2%		20.6%	40.0%	35.3%	50.0%	50.0%	34.0%	21.4%	33.3%

Comparison Groups: BCDEFGH/IJK

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level. Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

Presented by The Myers Group 770-978-3173

7D. Quality of written communications, policy bulletins, and manuals.

		======================================									
	Total				Online		In person w/Provider				
	Answering	Mail	Phone	Fax	Portal	E-mail		Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	164		4		4	42		_		96	13
	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
No Answer	47	20	1	8	3	11	-	1	14	33	-
Well below average	9			1	-	2		_	_	-	2
	5.5%	6.0%		2.4%		4.8%	50.0%	50.0%	7.3%	3.1%	15.4%
Somewhat below average	12		1	2	-	3		-	6	6	-
	7.3%	9.0%	25.0%	4.9%		7.1%			10.9%	6.2%	
Average	100		-	27	3	21			25	68	7
	61.0%	65.7%	75.0%	65.9%	75.0%	50.0%	50.0%		45.5%	70.8% I	
Somewhat above average	23	4	_	6	_	11	-	1	14	8	1
	14.0%	6.0%		14.6%		26.2% B		50.0%	25.5% Jk	8.3%	7.7%
Well above average	20		_	5	1	5	-	-	6	11	3
	12.2%	13.4%		12.2%	25.0%	11.9%			10.9%	11.5%	23.1%
Not Applicable	6	3	2	1	-	-	-	-	1	4	1
Summary Rate - Well	43				1	16		1	20	19	4
above average/Somewhat above average	26.2%	19.4%		26.8%	25.0%	38.1% B		50.0%	36.4% J	19.8%	30.8%

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level.

Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

8A. Would you recommend Louisiana Healthcare Connections to other physicians' practices?

		Preferred Method Survey Survey										
		=====		==== of	Communi	cation =			===== 1	Methodolo	ogy =====	
	Total Answering	Mail Phone Fax P			Online Portal	E-mail	In person w/Provider Rep.	Other	Mail	Phone	Internet	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	
Total	217	90	7	50	7	53	2	3	70	133	14	
Total Answering	166 100.0%	70 100.0%	-		4 100.0%	37 100.0%					12 100.0%	
No Answer	51	20	1	10	3	16	-	-	9	40	2	
Yes	120 72.3%	49 70.0%	4 66.7%				50.0%		42 68.9%		8 66.7%	
No	46 27.7%	21 30.0% f	2 33.3%						19 31.1%		4 33.3%	
Summary Rate - Yes	120 72.3%	49 70.0%	4 66.7%				50.0%	_	42 68.9%		8 66.7%	

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

8B. Please rate your overall satisfaction with Louisiana Healthcare Connections.

	Total				==== Survey ====================================						
	Answering	Mail	Phone	Fax	Portal	E-mail	Rep.	Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	180 100.0%		6 100.0%		4 100.0%		_	2 100.0%		98 100.0%	14 100.0%
No Answer	36	12	1	7	3	12	-	1	2	34	-
Completely dissatisfied	18 10.0%		2 33.3%					1 50.0%		5 5.1%	3 21.4%
Somewhat dissatisfied	29 16.1%	16 20.5%	-	5 11.9%	1 25.0%			-	11 16.2%	16 16.3%	2 14.3%
Neither dissatisfied nor satisfied	29 16.1%	14 17.9%	-	6 14.3%	-	7 17.1%		-	15 22.1% J	10 10.2%	4 28.6%
Somewhat satisfied	69 38.3%	26 33.3%	3 50.0%		1 25.0%		_	1 50.0%			
Completely satisfied	35 19.4%	16 20.5%	1 16.7%	-	1 25.0%	-		-	10 14.7%	22 22.4%	3 21.4%
Does not apply	1	-	-	1	-	-	-	-	-	1	-
Summary Rate - Completely satisfied/ Somewhat satisfied	104 57.8%	42 53.8%	4 66.7%		2 50.0%			1 50.0%		67 68.4% IK	5 35.7%

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level.

Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

8C. Please rate your overall satisfaction with Amerigroup.

	Total	======================================										
	Answering	Mail	Phone	Fax		E-mail	Rep.	Other	Mail	Phone	Internet	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	
Total	217	90	7	50	7	53	2	3	70	133	14	
Total Answering	156 100.0%				2 100.0%	37 100.0%	2 100.0%	3 100.0%		80 100.0%	11 100.0%	
No Answer	41	15	1	9	4	12	-	-	2	38	1	
Completely dissatisfied	20 12.8%	10 14.9%		2 5.7%	-	5 13.5%	1 50.0%		15 23.1% J	3.8%	2 18.2%	
Somewhat dissatisfied	33 21.2%	13 19.4%	_	-	1 50.0%	-	-	2 66.7% bd	15 23.1%		2 18.2%	
Neither dissatisfied nor satisfied	24 15.4%	11 16.4%		7 20.0%	-	5 13.5%	-	-	11 16.9%		3 27.3%	
Somewhat satisfied	58 37.2%	26 38.8%			1 50.0%	13 35.1%			16 24.6%	40 50.0% IK		
Completely satisfied	21 13.5%	7 10.4%			-	6 16.2%	-	1 33.3%	8 12.3%	11 13.8%	2 18.2%	
Does not apply	20	8	1	6	1	4	-	-	3	15	2	
Summary Rate - Completely satisfied/ Somewhat satisfied	79 50.6%	33 49.3%			1 50.0%	19 51.4%		1 33.3%			4 36.4%	

Comparison Groups: BCDEFGH/IJK

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level. Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

Presented by The Myers Group 770-978-3173 2013

8D. Please rate your overall satisfaction with Community Health Solutions.

	Total	======================================							==== ==== Methodology =====		
	Answering	Mail	Phone	Fax		E-mail		Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	153 100.0%			36 100.0%	3 100.0%	36 100.0%		3 100.0%		77 100.0%	12 100.0%
No Answer	42	16	1	9	4	12	-	-	1	40	1
Completely dissatisfied	4 2.6%			1 2.8%	-	2 5.6%		-	4 6.2%	-	-
Somewhat dissatisfied	10 6.5%	-	-	-	1 33.3%	_		-	5 7.8%	4 5.2%	1 8.3%
Neither dissatisfied nor satisfied	23 15.0%	9 14.3%	-	5 13.9%	-	7 19.4%	_		12 18.8%	9 11.7%	2 16.7%
Somewhat satisfied	61 39.9%	24 38.1%	_		2 66.7%			1 33.3%		36 46.8% K	2 16.7%
Completely satisfied	55 35.9%	23 36.5%	_	12 33.3%	-	12 33.3%		2 66.7%	20 31.2%	28 36.4%	7 58.3% i
Does not apply	22	11	1	5	-	5	-	-	5	16	1
Summary Rate - Completely satisfied/ Somewhat satisfied	116 75.8%	47 74.6%	_	30 83.3%	2 66.7%			3 100.0% BDF		64 83.1% I	9 75.0%

Independent Z-Test for Percentages (unpooled proportions)
Uppercase letters indicate significance at the 95% level.

Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

8E. Please rate your overall satisfaction with LA Care.

	Total				Online		In person w/Provider				
	Answering	Mail	Phone		Portal		Rep.	Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)		(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	154 100.0%			36 100.0%	3 100.0%				63 100.0%	81 100.0%	10 100.0%
No Answer	42	17	1	8	4	12	-	-	2	39	1
Completely dissatisfied	9 5.8%		1 20.0%	_	-	4 11.1% b		-	5 7.9%	4 4.9%	-
Somewhat dissatisfied	32 20.8%		40.0%					-	18 28.6% J	11 13.6%	3 30.0%
Neither dissatisfied nor satisfied	33 21.4%	13 20.3%		8 22.2%	-	9 25.0%		-	18 28.6% J	11 13.6%	4 40.0% j
Somewhat satisfied	48 31.2%		1 20.0%		-	14 38.9%		1 33.3%		35 43.2% IK	1 10.0%
Completely satisfied	32 20.8%		1 20.0%	8 22.2%	1 33.3%	6 16.7%		2 66.7% f	10 15.9%	20 24.7%	2 20.0%
Does not apply	21	9	1	6	-	5	-	-	5	13	3
Summary Rate - Completely satisfied/ Somewhat satisfied	80 51.9%		2 40.0%	20 55.6%	1 33.3%	20 55.6%		3 100.0% BCDEF	22 34.9%	55 67.9% IK	3 30.0%

Comparison Groups: BCDEFGH/IJK

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level. Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

Presented by The Myers Group 770-978-3173

8F. Please rate your overall satisfaction with United Healthcare.

	Total						In person				
	Answering	Mail	Phone	Fax		E-mail		Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	163 100.0%	71 100.0%		41 100.0%	2 100.0%	36 100.0%		3 100.0%		85 100.0%	11 100.0%
No Answer	42	16	1	8	4	13	-	-	1	40	1
Completely dissatisfied	7 4.3%	_		2 4.9%	-	3 8.3%		-	6 9.0% J	1 1.2%	-
Somewhat dissatisfied	11 6.7%	_		1 2.4%	1 50.0%	-		-	7 10.4%	4 4.7%	-
Neither dissatisfied nor satisfied	21 12.9%	10 14.1%		4 9.8%	-	6 16.7%		-	11 16.4%	8 9.4%	2 18.2%
Somewhat satisfied	60 36.8%	25 35.2%		16 39.0%	1 50.0%	14 38.9%		1 33.3%	24 35.8%		4 36.4%
Completely satisfied	64 39.3%	29 40.8%	3 60.0%	18 43.9%	-	10 27.8%		_	19 28.4%	40 47.1% I	5 45.5%
Does not apply	12	3	1	1	1	4	1	-	2	8	2
Summary Rate - Completely satisfied/ Somewhat satisfied	124 76.1%		5 100.0% BDF	34 82.9% f	1 50.0%	24 66.7%	_	3 100.0% BDF	43 64.2%	72 84.7% I	9 81.8%

Comparison Groups: BCDEFGH/IJK

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level.

Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

Presented by The Myers Group 770-978-3173

3G. Extent to which UM staff share review criteria and reasons for adverse determinations.

							In person				
	Total Answering	Mail	Phone	Fax	Online Portal	E-mail	w/Provider Rep.	Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	154 100.0%				5 100.0%	37 100.0%				87 100.0%	11 100.0%
No Answer	27	12	1	5	1	6	-	1	5	22	-
Well below average	13 8.4%			3 8.1%	-	1 2.7%		_	8 14.3% J	1.1%	4 36.4% J
Somewhat below average	9 5.8%			=	=	2 5.4%			4 7.1%	-	-
Average	104 67.5%		5 100.0% BDF		4 80.0%			1 50.0%	31 55.4%		6 54.5%
Somewhat above average	20 13.0%	7 10.9%		2 5.4%	1 20.0%			-	9 16.1%	10 11.5%	1 9.1%
Well above average	8 5.2%			2 5.4%	-	2 5.4%		-	4 7.1%	_	-
Not Applicable	36	14	1	8	1	10	-	-	9	24	3
Summary Rate - Well above average/Somewhat above average	28 18.2%	11 17.2%		4 10.8%	1 20.0%	12 32.4% bD		-	13 23.2%		

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level.

Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

3H. Consistency of review decisions.

					Communi		In person				
	Total Answering	Mail	Phone	Fax	Online Portal	E-mail	w/Provider Rep.	Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	156 100.0%	64 100.0%	_		6 100.0%			2 100.0%		85 100.0%	
No Answer	23	11	1	5	1	3	-	1	4	19	=
Well below average	10 6.4%	3 4.7%	-	3 8.1%	-	1 2.6%		1 50.0%	_	_	_
Somewhat below average	6 3.8%	5 7.8%	-	-	-	1 2.6%		-	5 8.5% j	1 1.2%	
Average	112 71.8%	42 65.6%	_	30 81.1% b	5 83.3%		_	1 50.0%		. –	
Somewhat above average	20 12.8%	8 12.5%	1 20.0%	_	-	7 18.4%		-	11 18.6%	_	1 8.3%
Well above average	8 5.1%	6 9.4%	=	=	1 16.7%	_		=	5 8.5%	3 3.5%	
Not Applicable	38	15	1	8	-	12	-	-	7	29	2
Summary Rate - Well above average/Somewhat above average	28 17.9%	14 21.9%	1 20.0%	4 10.8%		-	-	-	16 27.1% Jk	12.9%	_

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level. Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, $n \ge 30$)

4D. The frequency of feedback/reports from specialists for patients in your care.

					Communi		In person				
	Total Answering	Mail	Phone	Fax	Online Portal	E-mail	w/Provider Rep.	Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	157 100.0%	66 100.0%	5 100.0%		6 100.0%	38 100.0%	1 100.0%			87 100.0%	12 100.0%
No Answer	32	10	1	8	1	8	1	1	4	28	-
Well below average	7 4.5%		1 20.0%	_	-	-	-	1 50.0%	_	2 2.3%	-
Somewhat below average	16 10.2%	5 7.6%	2 40.0%	6 15.8%	1 16.7%		-	-	7 12.1%	8 9.2%	1 8.3%
Average	108 68.8%	44 66.7%		28 73.7%	3 50.0%		-	1 50.0%	33 56.9%		
Somewhat above average	15 9.6%	9 13.6%	-	3 7.9%	1 16.7%		-	-	7 12.1%	7 8.0%	1 8.3%
Well above average	11 7.0%	4 6.1%	-	-	1 16.7%		1 100.0% BEF		6 10.3%	4 4.6%	1 8.3%
Not Applicable	28	14	1	4	-	7	-	-	8	18	2
Summary Rate - Well above average/Somewhat above average	26 16.6%	13 19.7% d	-	3 7.9%	2 33.3%		1 100.0% BDEF	-	13 22.4%	11 12.6%	2 16.7%

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level. Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.

							In person				
	Total				Online		w/Provider				
	Answering	Mail	Phone	Fax	Portal	E-mail	Rep.	Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	118	46	5	25	5	32	1	2	37	72	9
	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
No Answer	34	14	1	9	1	7	-	1	8	26	-
Well below average	7	2	1	1	-	1	-	1	5	1	1
	5.9%	4.3%	20.0%	4.0%		3.1%		50.0%	13.5% J	1.4%	11.1%
Somewhat below average	13	5	1	3	1	3	_	_	5	8	_
bomoninae bozon average	11.0%	_	_	12.0%	20.0%				13.5%	_	
Average	79	31	3	17	3	23	-	1	21	52	6
-	66.9%	67.4%	60.0%	68.0%	60.0%	71.9%		50.0%	56.8%	72.2%	66.7%
Somewhat above average	10	5	-	4	-	1	-	-	3	6	1
	8.5%	10.9%		16.0%		3.1%			8.1%	8.3%	11.1%
Well above average	9	3	-	-	1	4	1	-	3	5	1
	7.6%	6.5%			20.0%	12.5%	100.0% BEF		8.1%	6.9%	11.1%
Not Applicable	65	30	1	16	1	14	1	-	25	35	5
Summary Rate - Well	19	8	_	4	1	5	1	_	6	11	2
above average/Somewhat above average	16.1%	17.4%		16.0%	20.0%	15.6%	100.0% BDEF		16.2%	15.3%	22.2%

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level.

Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.

		=====		==== of	Communi	cation =		=====	===== 1	Methodol	ogy =====
							In person				
	Total				Online		w/Provider				
	Answering	Mail	Phone	Fax	Portal	E-mail	Rep.	Other	Mail	Phone	Internet
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
_			_		_		_				
Total	217	90	7	50	7	53	2	3	70	133	14
Total Answering	109	44	5	22	5	29	1	2	35	65	9
		100.0%	100.0%		100.0%					100.0%	100.0%
No Answer	35	14	1	8	1	8	-	1	9	26	-
	_	_	_	_				1	4	_	
Well below average	6		1	_	-	-	-	_	_	_	
	5.5%	6.8%	20.0%	4.5%				50.0%	11.4%	3.1%	
Somewhat below average	12	3	_	4	1	4	_	_	4	7	1
	11.0%			18.2%	20.0%	13.8%			11.4%		
Average	75	30	4	15	3	21	-	1	21	48	6
	68.8%	68.2%	80.0%	68.2%	60.0%	72.4%		50.0%	60.0%	73.8%	66.7%
Somewhat above average	9		-	1				-	3	5	
	8.3%	11.4%		4.5%	20.0%	6.9%			8.6%	7.7%	11.1%
Well above average	7	3	_	1	_	2	1	_	3	3	1
Well above average	6.4%	-		4.5%		6.9%			8.6%	-	_
	0.10	0.00		1.50		0.50	BDF		0.00	1.00	11.10
							DDI				
Not Applicable	73	32	1	20	1	16	1	_	26	42	5
Summary Rate - Well	16		-	2			_		6	8	_
above average/Somewhat	14.7%	18.2%		9.1%	20.0%	13.8%	100.0%		17.1%	12.3%	22.2%
above average							BDEF				

Comparison Groups: BCDEFGH/IJK

Independent Z-Test for Percentages (unpooled proportions) Uppercase letters indicate significance at the 95% level. Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >= 30)

Presented by The Myers Group 770-978-3173



14. Glossary of Terms

Attributes are the individual questions that relate to specific characteristics of the health plan.

Composites are the mean of the Summary Rates of attributes with similar question topics.

Rating questions use a scale of 'Well below average' to 'Well above average' to assess overall experience with Louisiana Healthcare Connections.

Summary Rates are single statistics generated for a survey question. Summary Rates represent the percentage of respondents who chose the most favorable response option(s) ('Well above average' or 'Somewhat above average;' 'Yes;' and 'Completely satisfied' or 'Somewhat satisfied').

The Myers Group Aggregate Book of Business (2012)

The 2012 TMG Aggregate Book of Business is a benchmark containing data from 8 plans representing 1,524 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine.

The Myers Group Medicaid Book of Business (2012)

The 2012 TMG Medicaid Book of Business is a benchmark containing data from 4 plans representing 700 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine.

The Myers Group 14-1



15. Appendix A: Question Summaries

The proportion of respondents who fall into each response category for all questions is shown beginning on page A.1. Each question addresses the provider's rating of Louisiana Healthcare Connections. The Question Summary pages are broken down into several sections, which are described below.

Valid n & Category Responses

The Valid n column shows the number of respondents who chose to answer the question. This number may be lower than the total number of respondents who completed the survey because respondents either chose not to answer the question (left the question blank on the survey tool) or selected 'Not Applicable.' The Category Responses section provides the percentage of respondents who selected each response option.

Summary Rates

The Summary Rates section provides benchmark comparisons to Louisiana Healthcare Connections' Summary Rates. The Summary Rate is the proportion of respondents choosing the most positive response option(s) for each question. Typically, it is the sum of the proportion of respondents who selected 'Well above average' or 'Somewhat above average.' For all other questions, the Summary Rate is the sum of the bold category responses.

Mean Scores

The Mean Scores section provides further analysis of your results. While Summary Rates are very helpful in that they highlight areas where your plan scores well, they are not a complete indication of performance.

Mean Scores provide an average of responses. The score is calculated by assigning a value of one to five to each response option. For example, 'Well above average' receives a score of 5, while 'Well below average' receives a score of 1. Therefore, higher Mean Scores indicate more favorable responses, while lower Mean Scores indicate unfavorable responses.

For example, the Mean Score for Louisiana Healthcare Connections in the example below is 3.11, meaning that the average response option chosen is between 'Average' and 'Somewhat above average.'

Survey Item	Plan Mean	2012 TMG B.o.B Mean
2A. Consistency of reimbursement fees with your contract rates.	3.11	3.52

Charts A.1 - A.9

The Myers Group 15-1

Demographics

217 Total Respondents

Survey Item	Valid n			Categ	ory Respo	nses		
A. Please indicate your area of medicine. (Mark all that	214	<u>Primary Care</u>	<u>Specialty</u>	Behavioral Health Clinician				
apply)	211	75.7%	30.4%	3.7%				
B. How many physicians are in your practice?	213	<u>Solo</u>	2 - 5 physicians	More than 5 physicians				
b. How many physicians are in your practice:	213	42.7%	46.0%	11.3%				
C. How many years have you been in this practice?	212	Less than 5 years	<u>5 - 15 years</u>	16 years or more				
C. How many years have you been in this practice?	212	19.8%	39.6%	40.6%				
D. What portion of your managed care volume is	203	<u>None</u>	10% or less	<u>11 - 20%</u>	<u>21 - 30%</u>	<u>31 - 50%</u>	<u>51 - 75%</u>	<u>76 - 100%</u>
represented by Louisiana Healthcare Connections?	203	2.5%	38.4%	26.1%	16.7%	10.8%	3.9%	1.5%
E. Please mark who is completing this survey. (Mark only	214	<u>Physician</u>	Behavioral Health Clinician	Office Manager	<u>Nurse</u>	Other staff		
one)	214	13.1%	0.0%	60.3%	5.1%	21.5%		
F. What is your preferred method of receiving	212	<u>Mail</u>	<u>Telephone</u>	<u>Fax</u>	Online portal	<u>E-mail</u>	In person from your Provider Representative	<u>Other</u>
communications from this health plan?	212	42.5%	3.3%	23.6%	3.3%	25.0%	0.9%	1.4%
G. Please indicate the number of insurance companies	213	3 or fewer	<u>4 to 7</u>	<u>8 to 11</u>	<u>12 to 15</u>	More than 15		
with which you or your practice participates.	213	0.9%	7.5%	12.7%	22.5%	56.3%		

Note: The sum of responses for Area of Medicine may be greater than 100% as respondents are able to choose multiple response options.

217 Total Respondents

This first question asks you to think about Louisiana Healthcare Connections in comparison to all of the other health plans that you work with.			Ca	ry Rate res*	Mean Scores**						
Survey Item	Valid n	Well above average	Somewhat above average	<u>Average</u>	Somewhat below average	Well below average	Not Applicable	2013	Medicaid BoB***	2013	Medicaid BoB***
1A. How would you rate Louisiana Healthcare Connections compared to all other health plans you contract with?	207	7.7%	15.5%	55.1%	11.1%	10.6%	n = 6	23.2%	56.3%	2.99	3.74

^{*} Summary Rate Scores represent the most favorable response options ("Well above average" & "Somewhat above average").

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; Cells highlighted ingreen denote current year plan percentage is significantly higher when compared to benchmark data; No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

^{**} Mean scores are the average of all responses.

^{***} B.o.B. represents the 2012 TMG Medicaid Book of Business Benchmark, which consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians.

Finance Issues

217 Total Respondents

These questions ask about Finance Issues. Please rate Louisiana Healthcare Connections in the following service areas when compared to your experience with other health plans you work with.			Ca	ry Rate res*	Mean Scores**						
Survey Item	Valid n	Well above average	Somewhat above average	<u>Average</u>	Somewhat below average	Well below average	Not Applicable	2013	Medicaid BoB***	2013	Medicaid BoB***
2A. Consistency of reimbursement fees with your contract rates.	189	9.5%	18.5%	53.4%	10.1%	8.5%	n = 14	28.0%	44.1%	3.11	3.52
2B. Accuracy of claims processing.	186	9.1%	22.0%	52.2%	9.7%	7.0%	n = 17	31.2%	52.6%	3.17	3.66
2C. Timeliness of claims processing.	188	9.6%	25.0%	53.7%	5.9%	5.9%	n = 14	34.6%	52.9%	3.27	3.65
2D. Resolution of claims payment problems or disputes.	175	8.0%	16.6%	53.1%	10.3%	12.0%	n = 27	24.6%	50.1%	2.98	3.63

^{*} Summary Rate Scores represent the most favorable response options ("Well above average" & "Somewhat above average").

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; Cells highlighted ingreen denote current year plan percentage is significantly higher when compared to benchmark data; No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

^{**} Mean scores are the average of all responses.

^{***} B.o.B. represents the 2012 TMG Medicaid Book of Business Benchmark, which consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians.

Utilization and Quality Management

217 Total Respondents

217 Total Respondents											
These questions ask about Utilization and Quality Management. Please rate Louisiana Healthcare Connections in the following service areas when compared to your experience with other health plans you work with.			Ca	tegory	Response		ry Rate res*	Mean Scores**			
Survey Item	Valid n	Well above average	Somewhat above average	<u>Average</u>	Somewhat below average	Well below average	Not Applicable	2013	Medicaid BoB***	2013	Medicaid BoB***
3A. Access to knowledgeable UM staff.	178	5.6%	15.2%	62.9%	9.0%	7.3%	n = 24	20.8%	49.7%	3.03	3.66
3B. Procedures for obtaining precertification/referral/authorization information.	182	7.1%	12.6%	58.8%	13.7%	7.7%	n = 17	19.8%	47.1%	2.98	3.59
3C. Timeliness of obtaining precertification/referral/authorization information.	184	4.9%	13.0%	61.4%	14.7%	6.0%	n = 15	17.9%	49.6%	2.96	3.64
3D. The health plan's facilitation/support of appropriate clinical care for patients.	176	5.7%	13.1%	67.0%	8.5%	5.7%	n = 18	18.8%	50.8%	3.05	3.68
3E. Access to Case/Care Managers from this health plan.	166	3.6%	14.5%	69.3%	6.6%	6.0%	n = 32	18.1%	51.3%	3.03	3.68
3F. Degree to which the plan covers and encourages preventive care and wellness.	177	10.7%	16.4%	63.8%	5.1%	4.0%	n = 19	27.1%	56.2%	3.25	3.78
3G. Extent to which UM staff share review criteria and reasons for adverse determinations.	154	5.2%	13.0%	67.5%	5.8%	8.4%	n = 36	18.2%	NA	3.01	NA
3H. Consistency of review decisions.	156	5.1%	12.8%	71.8%	3.8%	6.4%	n = 38	17.9%	NA	3.06	NA

^{*} Summary Rate Scores represent the most favorable response options ("Well above average" & "Somewhat above average").

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; Cells highlighted in green denote current year plan percentage is significantly higher when compared to benchmark data; No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

^{**} Mean scores are the average of all responses.

^{***} B.o.B. represents the 2012 TMG Medicaid Book of Business Benchmark, which consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians.

217 Total Respondents

211 Total Respondence											
These questions ask about Louisiana Healthcare Connections' network providers. Please rate Louisiana Healthcare Connections in the following service areas when compared to your experience with other health plans you work with.			Ca	tegory	Response	Summary Rate Scores*		Mean Scores**			
Survey Item	Valid n	Well above average	Somewhat above average	<u>Average</u>	Somewhat below average	Well below average	Not Applicable	2013	Medicaid BoB***	2013	Medicaid BoB***
4A. The number of specialists in this health plan's provider network.	170	7.1%	10.0%	55.3%	17.6%	10.0%	n = 16	17.1%	50.9%	2.86	3.59
4B. The quality of specialists in this health plan's provider network.	164	4.9%	15.9%	64.6%	8.5%	6.1%	n = 19	20.7%	57.4%	3.05	3.80
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	159	5.0%	10.7%	69.8%	10.1%	4.4%	n = 24	15.7%	47.1%	3.02	3.61
4D. The frequency of feedback/reports from specialists for patients in your care.	157	7.0%	9.6%	68.8%	10.2%	4.5%	n = 28	16.6%	NA	3.04	NA
4E. The timeliness of feedback/reports from Behavioral Health Clinicians for patients in your care.	118	7.6%	8.5%	66.9%	11.0%	5.9%	n = 65	16.1%	NA	3.01	NA
4F. The frequency of feedback/reports from Behavioral Health Clinicians for patients in your care.	109	6.4%	8.3%	68.8%	11.0%	5.5%	n = 73	14.7%	NA	2.99	NA

^{*} Summary Rate Scores represent the most favorable response options ("Well above average" & "Somewhat above average").

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; Cells highlighted ingreen denote current year plan percentage is significantly higher when compared to benchmark data; No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

^{**} Mean scores are the average of all responses.

^{***} B.o.B. represents the 2012 TMG Medicaid Book of Business Benchmark, which consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians.

217 Total Respondents

These questions ask about Louisiana Healthcare Connections' formulary. Please rate Louisiana Healthcare Connections in the following service areas when compared to your experience with other health plans you work with.			Ca	tegory	Response		ary Rate res*	Mean Scores**			
Survey Item	Valid n	Well above average	Somewhat above average	<u>Average</u>	Somewhat below average	Well below average	Not Applicable	2013	Medicaid BoB***	2013	Medicaid BoB***
5A. Consistency of the formulary over time.	156	3.8%	10.3%	60.9%	12.8%	12.2%	n = 25	14.1%	37.1%	2.81	3.43
5B. Extent to which formulary reflects current standards of care.	159	5.7%	11.3%	57.9%	13.2%	11.9%	n = 21	17.0%	38.5%	2.86	3.44
5C. Variety of branded drugs on the formulary.	155	4.5%	11.0%	45.8%	22.6%	16.1%	n = 28	15.5%	35.4%	2.65	3.36
5D. Ease of prescribing your preferred medications within formulary guidelines.	151	5.3%	13.2%	46.4%	19.2%	15.9%	n = 29	18.5%	36.5%	2.73	3.40
5E. Availability of comparable drugs to substitute those not included in the formulary.	147	5.4%	11.6%	48.3%	15.6%	19.0%	n = 29	17.0%	34.0%	2.69	3.36

^{*} Summary Rate Scores represent the most favorable response options ("Well above average" & "Somewhat above average").

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; Cells highlighted in green denote current year plan percentage is significantly higher when compared to benchmark data; No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

^{**} Mean scores are the average of all responses.

^{***} B.o.B. represents the 2012 TMG Medicaid Book of Business Benchmark, which consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians.

Health Plan Call Center Service Staff

217 Total Respondents

These questions ask about your experiences when calling Louisiana Healthcare Connections' call center. Please rate Louisiana Healthcare Connections in the following service areas when compared to your experience with other health plans you work with.			Ca	tegory	Response	Summary Rate Scores*		Mean Scores**			
Survey Item	Valid n	Well above average	Somewhat above average	<u>Average</u>	Somewhat below average	Well below average	Not Applicable	2013	Medicaid BoB***	2013	Medicaid BoB***
6A. Ease of reaching health plan call center staff over the phone.	173	10.4%	13.9%	61.3%	8.1%	6.4%	n = 12	24.3%	59.0%	3.14	3.82
6B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	177	11.9%	19.8%	61.0%	4.5%	2.8%	n = 6	31.6%	60.0%	3.33	3.90
6C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	163	8.6%	14.1%	68.7%	5.5%	3.1%	n = 15	22.7%	58.8%	3.20	3.83
6D. Overall satisfaction with health plan's call center service.	175	11.4%	18.9%	58.3%	6.9%	4.6%	n = 7	30.3%	62.6%	3.26	3.90

^{*} Summary Rate Scores represent the most favorable response options ("Well above average" & "Somewhat above average").

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; Cells highlighted ingreen denote current year plan percentage is significantly higher when compared to benchmark data; No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

^{**} Mean scores are the average of all responses.

^{***} B.o.B. represents the 2012 TMG Medicaid Book of Business Benchmark, which consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians.

Provider Satisfaction Survey

Provider Relations

217 Total Respondents

These questions ask about your experiences with Louisiana Healthcare Connections' Provider Relations department. Please rate Louisiana Healthcare Connections in the following service areas when compared to your experience with other health plans you work with.			Ca	tegory	Response		ry Rate res*	Mean Scores**			
Survey Item	Valid n	<u>Yes</u>	<u>No</u>					2013	Medicaid BoB***	2013	Medicaid BoB***
7A. Do you have a Provider Relations representative from this health plan assigned to your practice?	148	73.0%	27.0%					73.0%	46.2%	NA	NA
Survey Item	Valid n	Well above average	Somewhat above average	<u>Average</u>	Somewhat below average	Well below average	Not Applicable	2013	Medicaid BoB***	2013	Medicaid BoB***
7B. Provider Relations representative's ability to answer questions and resolve problems.	99	20.2%	15.2%	50.5%	5.1%	9.1%	n = 4	35.4%	72.1%	3.32	4.10
7C. Quality of provider orientation process.	149	12.8%	14.1%	52.3%	10.7%	10.1%	n = 23	26.8%	43.4%	3.09	3.52
7D. Quality of written communications, policy bulletins, and manuals.	164	12.2%	14.0%	61.0%	7.3%	5.5%	n = 6	26.2%	44.0%	3.20	3.60

^{*} Summary Rate Scores represent the most favorable response options ("Yes;" "Well above average" & "Somewhat above average").

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; Cells highlighted in green denote current year plan percentage is significantly higher when compared to benchmark data; No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

^{**} Mean scores are the average of all responses.

^{***} B.o.B. represents the 2012 TMG Medicaid Book of Business Benchmark, which consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians.

Overall Satisfaction Provider Satisfaction Survey

217 Total Respondents

These questions ask about your overall satisfaction with Louisiana Healthcare Connections. Additionally, please rate your satisfaction with the other plans listed and provide feedback on how Louisiana Healthcare Connections can improve.		Category Responses							Summary Rate Scores*		Mean Scores**	
Survey Item	Valid n	<u>Yes</u>	<u>No</u>					2013	Medicaid BoB***	2013	Medicaid BoB***	
8A. Would you recommend Louisiana Healthcare Connections to other physicians' practices?	166	72.3%	27.7%					72.3%	92.0%	NA	NA	
Survey Item	Valid n	Completely satisfied	Somewhat satisfied	<u>Neither</u> dissatisfied nor <u>satisfied</u>	Somewhat dissatisfied	Completely dissatisfied	<u>Does not apply</u>	2013	Medicaid BoB***	2013	Medicaid BoB***	
8B. Please rate your overall satisfaction with Louisiana Healthcare Connections.	180	19.4%	38.3%	16.1%	16.1%	10.0%	n = 1	57.8%	78.0%	3.41	4.14	
8C. Please rate your overall satisfaction with Amerigroup.	156	13.5%	37.2%	15.4%	21.2%	12.8%	n = 20	50.6%	NA	3.17	NA	
8D. Please rate your overall satisfaction with Community Health Solutions.	153	35.9%	39.9%	15.0%	6.5%	2.6%	n = 22	75.8%	NA	4.00	NA	
8E. Please rate your overall satisfaction with LA Care.	154	20.8%	31.2%	21.4%	20.8%	5.8%	n = 21	51.9%	NA	3.40	NA	
8F. Please rate your overall satisfaction with United Healthcare.	163	39.3%	36.8%	12.9%	6.7%	4.3%	n = 12	76.1%	NA	4.00	NA	

^{*} Summary Rate Scores represent the most favorable response options ("Yes;" "Completely satisfied" & "Somewhat satisfied").

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; Cells highlighted ingreen denote current year plan percentage is significantly higher when compared to benchmark data; No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

^{**} Mean scores are the average of all responses.

^{***} B.o.B. represents the 2012 TMG Medicaid Book of Business Benchmark, which consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians.