



## 2015 Practitioner Satisfaction Survey

### ***Overview***

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AmeriHealth Caritas Louisiana serves the Medicaid population in the state of Louisiana. The purpose of the annual Practitioner Satisfaction Survey is to assess the strength of the Plan's relationship with contracting practitioners in order to identify opportunities for improvement, and drivers behind practitioners' satisfaction or dissatisfaction with the Plan's processes, people and systems with which the physicians and providers interact, and to compare their performance with other Medicaid plans. The results enable the Plan to develop and implement interventions to increase practitioners' satisfaction and evaluate the effectiveness of those interventions.

Practitioners in the network are surveyed for satisfaction in the following areas:

- Overall Satisfaction and Loyalty
- Provider Relations/Network Management
- Provider Services Staff
- Claims Reimbursement Process
- Utilization and Quality Management
- Case Management
- Pharmacy Services
- Additional Topics (Network, Provider Self-Service, Cultural Competency, Provider Training Formats)

### ***Methodology***

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Morpace was selected by the Plan to conduct its 2015 Practitioner Satisfaction Survey. This year the survey questionnaire was written in English, with categories designed to collect quantifiable data to measure the satisfaction of practitioners with the health plan.

A two-wave mail methodology with phone follow-up was used for 2015. Questionnaires were mailed to the selected practitioners, followed by a second questionnaire to non-responders.

Both mailings included a four-page survey accompanied by a one-page cover letter and a business reply envelope. The cover letter included an Internet website for those who preferred to complete the survey online. Unique user names and passwords were provided for each selected practitioner. Non-responders to both mail and Internet were contacted by phone.

Data collection was conducted August 20, 2015 through October 9, 2015.

The survey questions utilize the following Likert scale:

- |                |                |
|----------------|----------------|
| 1) = Excellent | 2) = Very Good |
| 3) = Good      | 4) = Fair      |
| 5) = Poor      | 6) = N/A       |

There were also questions answerable by "YES" or "NO" or "mark all that apply".

**The Format for Calculating Total Sample Response Rate for 2014 is:**

$$\text{Response Rate} = \frac{\text{Completed Surveys}}{\text{Total Mailed} - \text{Undeliverable}}$$

Morpace was successful in obtaining a 31% response rate for Practitioner (276 completed surveys). The summary of response rates are presented in Figure 1.

**Figure 1: Summary of Response Rate, 2015**

Sample and Response Rate Summary	
	<u>Practitioner</u>
	2015
Total Mailed	1,000
Undeliverable/Unusable	115
Total Completes	276
Mail Completes	113
Internet Completes	13
Phone Completes	150
Response Rate	31%

Figure 2 provides survey completion rates by practitioner type comparing 2015 rates to the prior year. In 2015, the Plan saw an increase in completion rates among practitioners and a decrease in completion rates by receptionists and nurses while rates among office managers remained the same.

**Figure 2: Practitioner Type, 2015**

Completed Survey		
	<u>Practitioner</u>	
	2015 (n=262)	2014 (n=254)
Office Manager	69%	69%
Receptionist	16%	17%
Practitioner	8%	7%
Nurse	6%	7%
Other	0%	0%

Figure 3a provides survey completion rates by practice type comparing 2015 rates to the prior year. In 2015, the Plan's survey completion rates by practice type increased among primary care and decreased among specialists. Based on the size of the practice, response rates increased among 2 to 5 as well as more than 5 physicians while decreasing among solo practices compared to 2014.

**Figure 3a: Practice Profile, 2015**

<b>Practitioner</b>		
	<b>2015</b>	<b>2014</b>
<b>Practice Type</b>	(n=268)	(n=267)
Specialist	13%	29%
Primary Care	87%	71%
<b>Size of Practice</b>	(n=266)	(n=271)
Solo	50%	56%
2 - 5 Physicians	42%	37%
More than 5 Physicians	8%	7%

Figure 3b provides survey completion rates based on practitioner volume when comparing 2015 rates to the prior year. Compared to the prior year, practitioners responding to the survey have demonstrated an increase in the following managed care volume areas: 11-20%, 31-50%, and 76-100% while rates decreased among none, 1-10%, and 21-30%.

**Figure 3b: Practitioner Volume, 2015**

<b>Managed Care Volume Represented by Plan</b>		
	<b>Practitioner</b>	
	<b>2015</b>	<b>2014</b>
	(n=260)	(n=256)
None	0%	1%
1 - 10%	37%	42%
11 - 20%	31%	28%
21 - 30%	16%	19%
31 - 50%	12%	7%
51 - 75%	2%	2%
76 - 100%	2%	1%

**2015 Results & Analysis**

This report compares the Plan’s 2015 practitioner survey results to the prior year (2014) in order to assess the strength of its relationships with contracting practitioners, identify opportunities for improvement, and compare its performance with other Medicaid plans.

**Overall Results**

The individual questions were pooled into categories specific to various areas within the organization in order to create composite scores. Each composite category represents an overall aspect of plan quality and was comprised of questions impacting that specific area of focus. The Plan’s Practitioner Satisfaction Survey includes the following composite categories:

- Provider Relations/Network Management
- Provider Services Staff
- Claims Reimbursement Process
- Utilization and Quality Management
- Case Management
- Pharmacy Services

Figure 4 outlines the Plan’s performance among the composite categories. The composite measure “Utilization and Quality Management” is rated significantly higher in 2015 compared to 2014. Composite measures and related attributes for AmeriHealth Caritas Louisiana are rated slightly higher or on par with all other Medicaid plans. Case Management (85%) and Claims Reimbursement Process (85%) earn the highest composite ratings while Pharmacy Services is the lowest rated composite area (58%).

**Figure 4: Overall Practitioner Satisfaction Rates and Composite Scores, 2015**

<b>Composite Summary</b> (% Excellent/Very Good/Good)				
	<b>Practitioner</b>			
	2015		2014	
	ACLA	All Others	ACLA	All Others
<b>Provider Relations/Network Management</b>	81%	78%	81%	80%
<b>Provider Services Staff</b>	80%	78%	74%	75%
<b>Claims Reimbursement Process</b>	85%	84%	78%	79%
<b>Utilization and Quality Management</b>	79%↑	75%	69%	67%
<b>Case Management</b>	85%	81%	80%	78%
<b>Pharmacy Services</b>	58%	53%	52%	52%

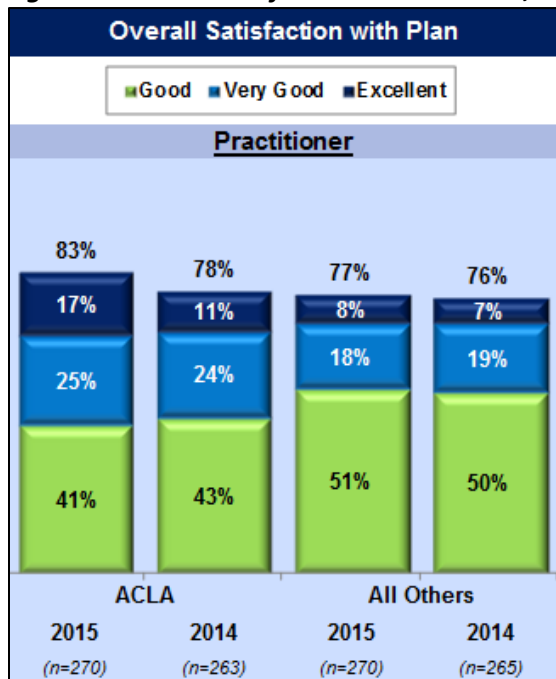
○ / □ = “Plan” results significantly higher/lower than “All Others” results

↑/↓ = 2015 results significantly higher/lower than 2014 results

**Detailed Findings**

Among practitioners, more than eight in ten are satisfied with AmeriHealth Caritas Louisiana, which is directionally higher than in 2014.

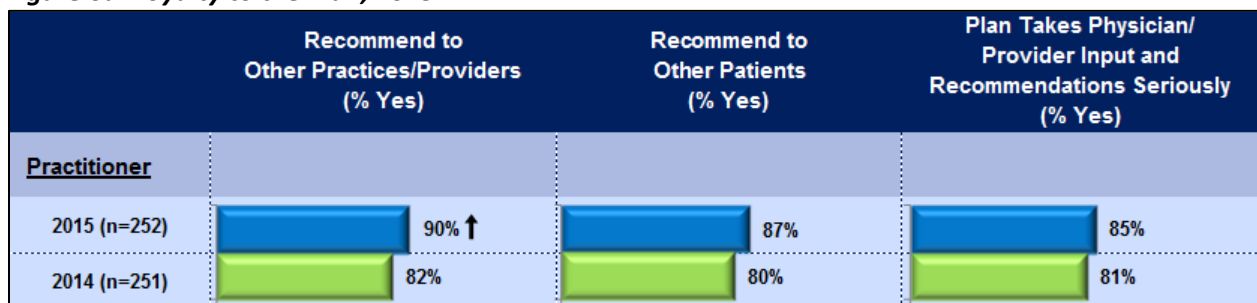
**Figure 5: Overall Satisfaction with the Plan, 2015**



↑/↓ = 2015 results significantly higher/lower than 2014 results  
○ / □ = "Plan" results significantly higher/lower than "All Others" results

Figures 6a and 6b highlight practitioner loyalty to the Plan. Nine in ten practitioners would recommend AmeriHealth Caritas Louisiana to other practices/providers, which is significantly higher than 2014 results. Ratings are directionally higher than in 2014 for "recommend AmeriHealth Caritas Louisiana to other patients" and "taking provider input and recommendations seriously."

**Figure 6a: Loyalty to the Plan, 2015**



↑/↓ = 2015 results significantly higher/lower than 2014 results  
○ / □ = "Plan" results significantly higher/lower than "All Others" results

According to Figure 6b, practitioner loyalty increases over 2014 with three in four falling in the “Loyal” category, while “Defection” has declined.

**Figure 6b: Loyalty to the Plan, 2015**

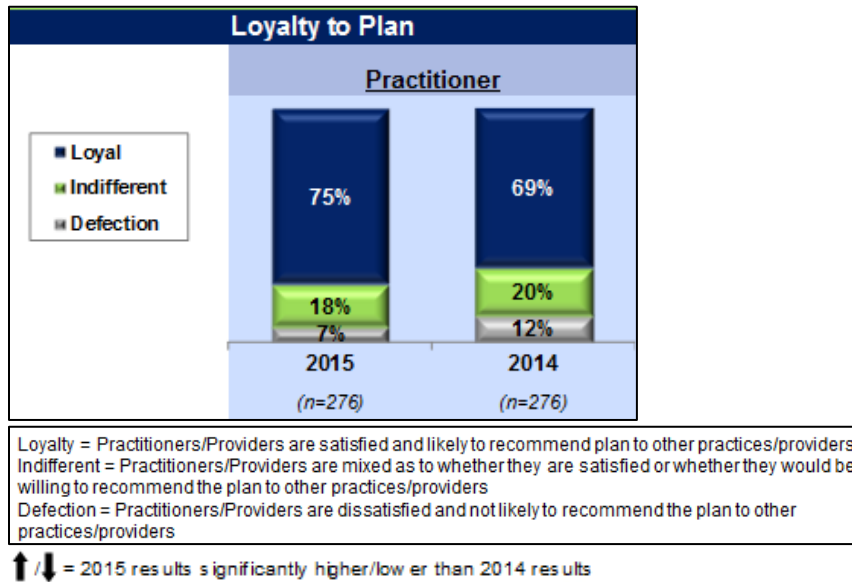


Figure 7 demonstrates that AmeriHealth Caritas Louisiana rates slightly higher than all other plans on all Provider Relations/Network Management measures and receives comparable ratings to 2014.

**Figure 7: Provider Relations/Network Management, 2015**

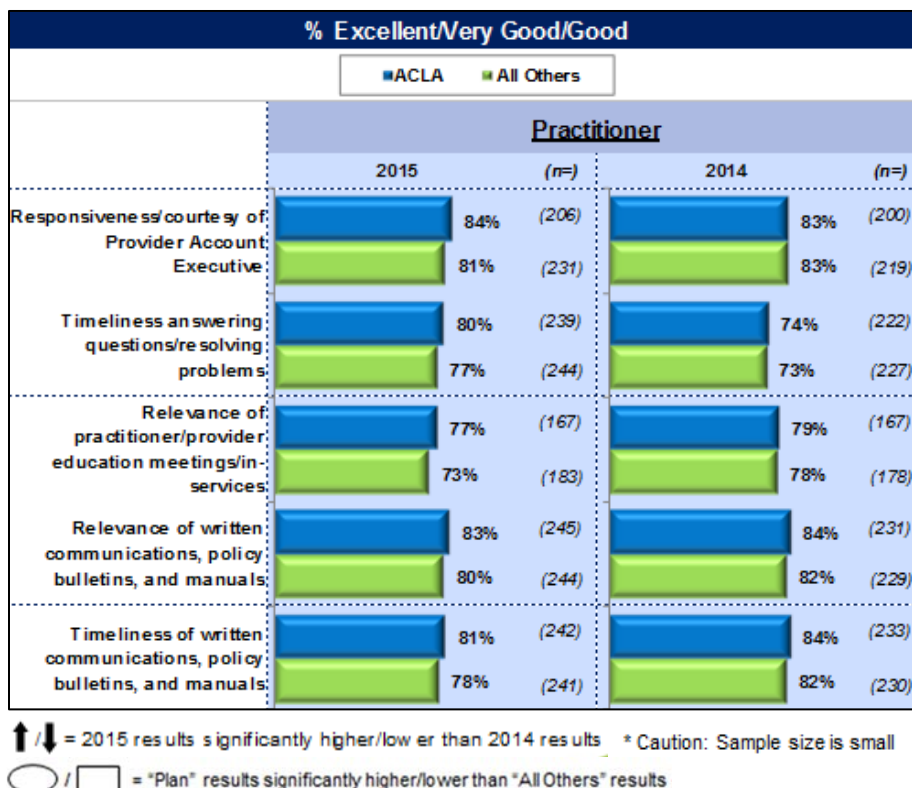
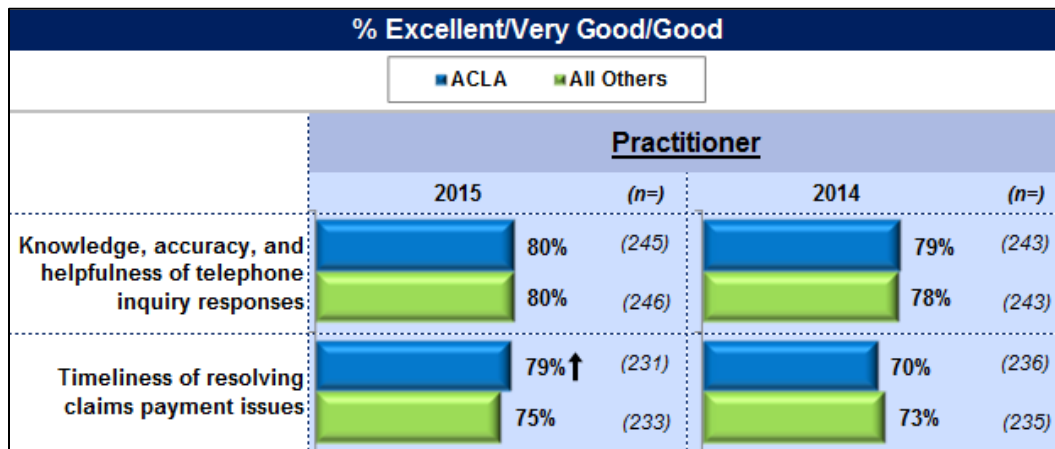


Figure 8 displays that, among practitioners, AmeriHealth Caritas Louisiana is rated significantly higher than in 2014 for “Timeliness of resolving claims payment issues.”

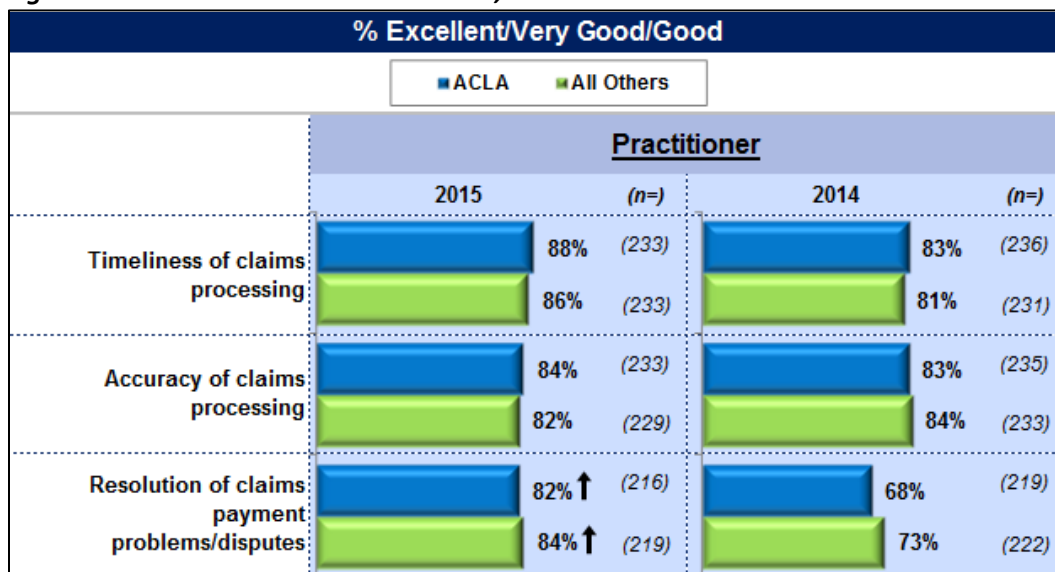
**Figure 8: Provider Services Staff, 2015**



↑/↓ = 2015 results significantly higher/lower than 2014 results ○/□ = "Plan" results significantly higher/lower than "All Others" results

According to Figure 9, among practitioners, AmeriHealth Caritas Louisiana is rated significantly higher in 2015 than in 2014 for “Resolution of claims payment problems/disputes.”

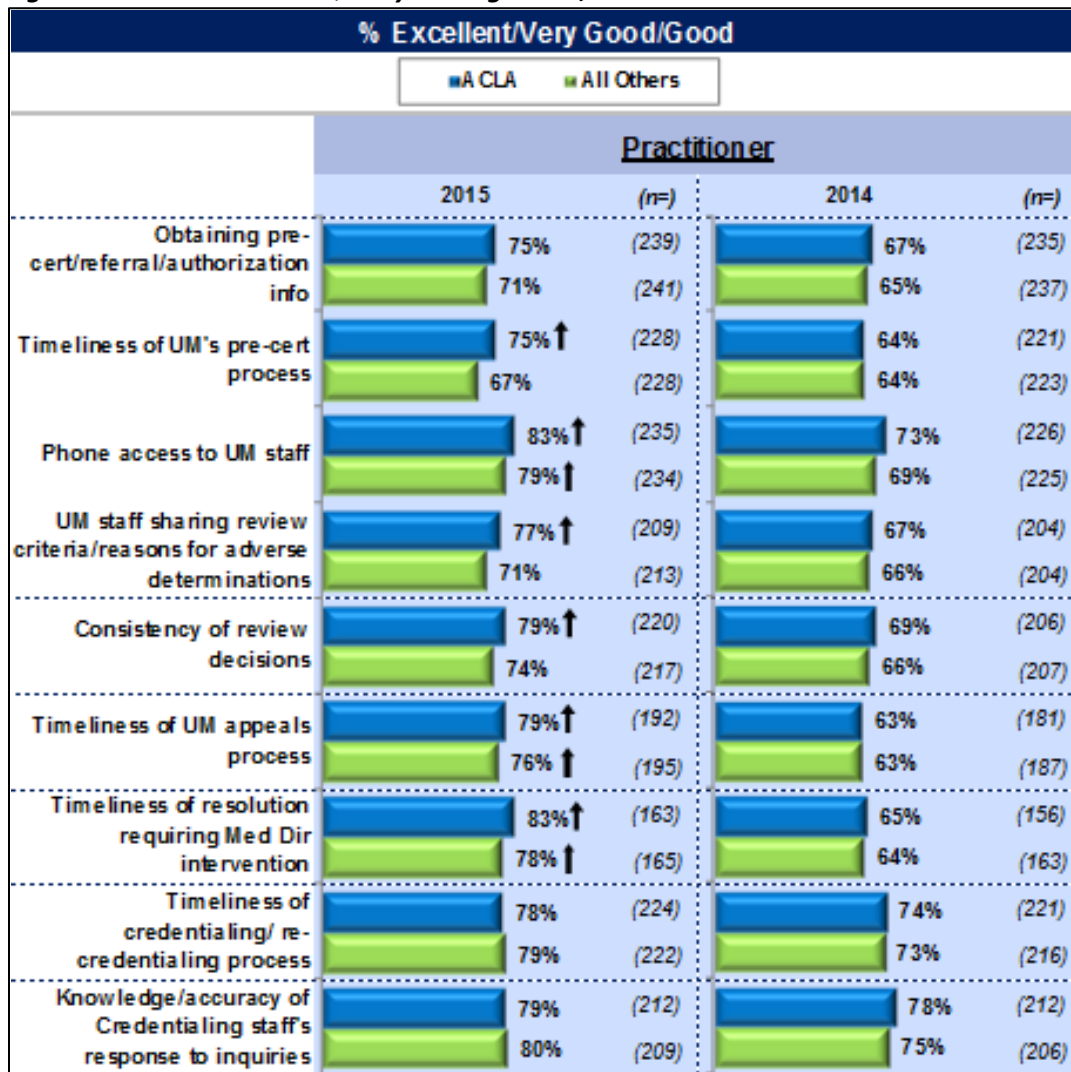
**Figure 9: Claims Reimbursement Process, 2015**



↑/↓ = 2015 results significantly higher/lower than 2014 results ○/□ = "Plan" results significantly higher/lower than "All Others" results

Figure 10 demonstrates that practitioners rate AmeriHealth Caritas Louisiana significantly higher in 2015 than in 2014 on six out of nine Utilization and Quality Management measures.

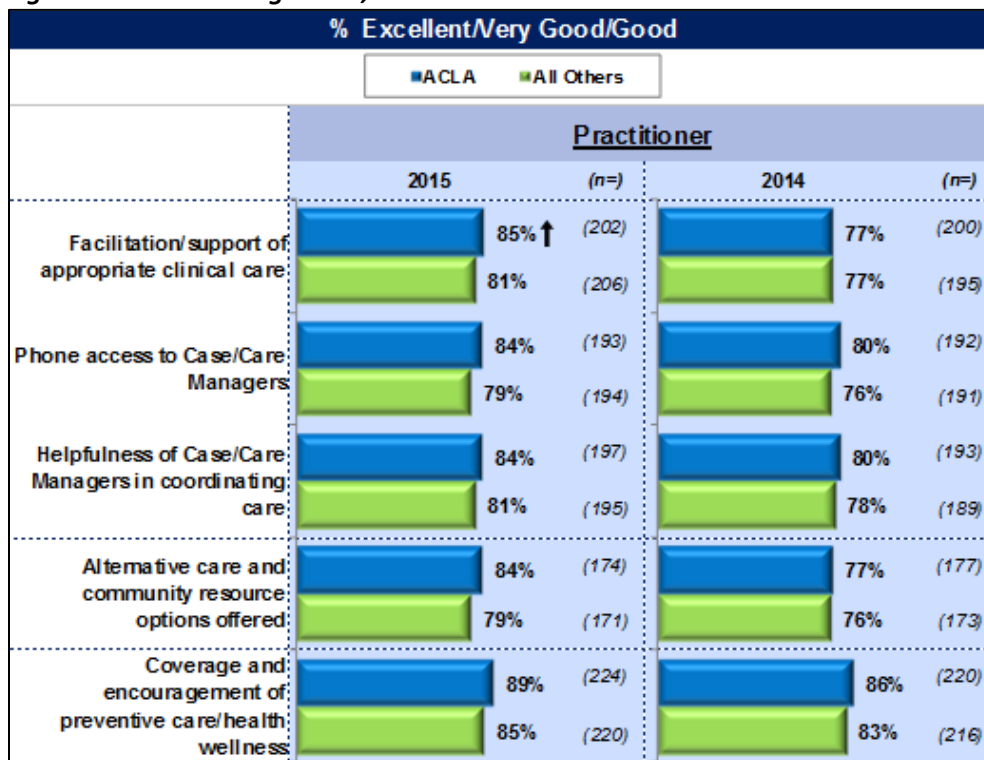
**Figure 10: Utilization and Quality Management, 2015**



↑ / ↓ = 2015 results significantly higher/lower than 2014 results    ○ / □ = "Plan" results significantly higher/lower than "All Others" results

Based on Figure 11, practitioners rate AmeriHealth Caritas Louisiana significantly higher than 2014 for “Facilitation/support of appropriate clinical care.” Practitioners also rate AmeriHealth Caritas Louisiana higher on all Case Management measures compared to all other Medicaid plans.

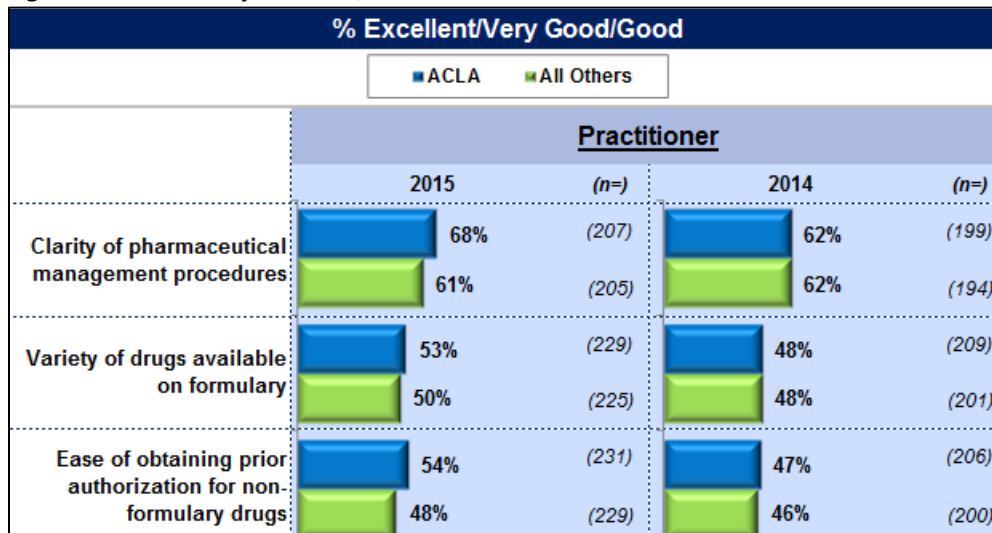
**Figure 11: Case Management, 2015**



↑/↓ = 2015 results significantly higher/lower than 2014 results ○ / □ = "Plan" results significantly higher/lower than "All Others" results

Figure 12 demonstrates that among practitioners, AmeriHealth Caritas Louisiana is rated directionally higher in 2015 than in 2014 for all Pharmacy Services measures and in comparison to all other Medicaid plans.

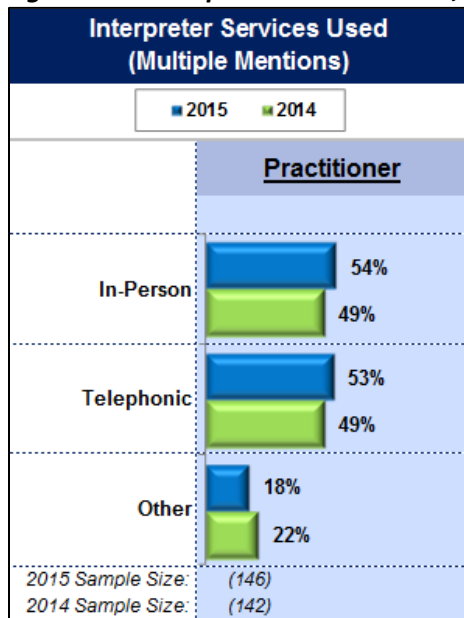
**Figure 12: Pharmacy Services, 2015**



↑/↓ = 2015 results significantly higher/lower than 2014 results ○ / □ = "Plan" results significantly higher/lower than "All Others" results

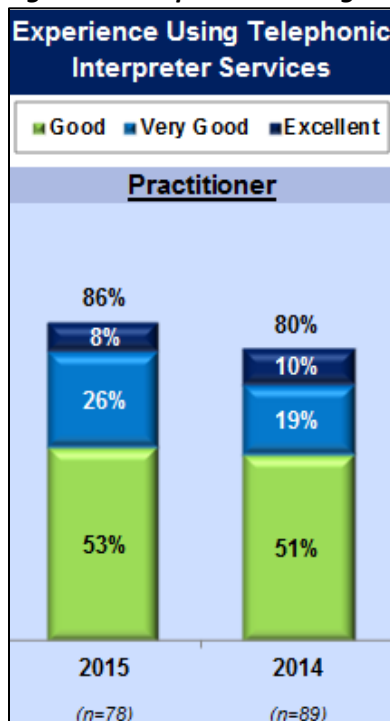
Figures 13a and 13b demonstrates that among practitioners, a nearly equal proportion of Practitioners use in-person interpreter services and telephonic services. Additionally, more than eight in ten practitioners are satisfied with their experience using telephonic interpreter services.

**Figure 13a: Interpreter Services Used, 2015**



↑/↓ = 2015 results significantly higher/lower than 2014 results

**Figure 13b: Experience Using Telephonic Interpreter Services, 2015**



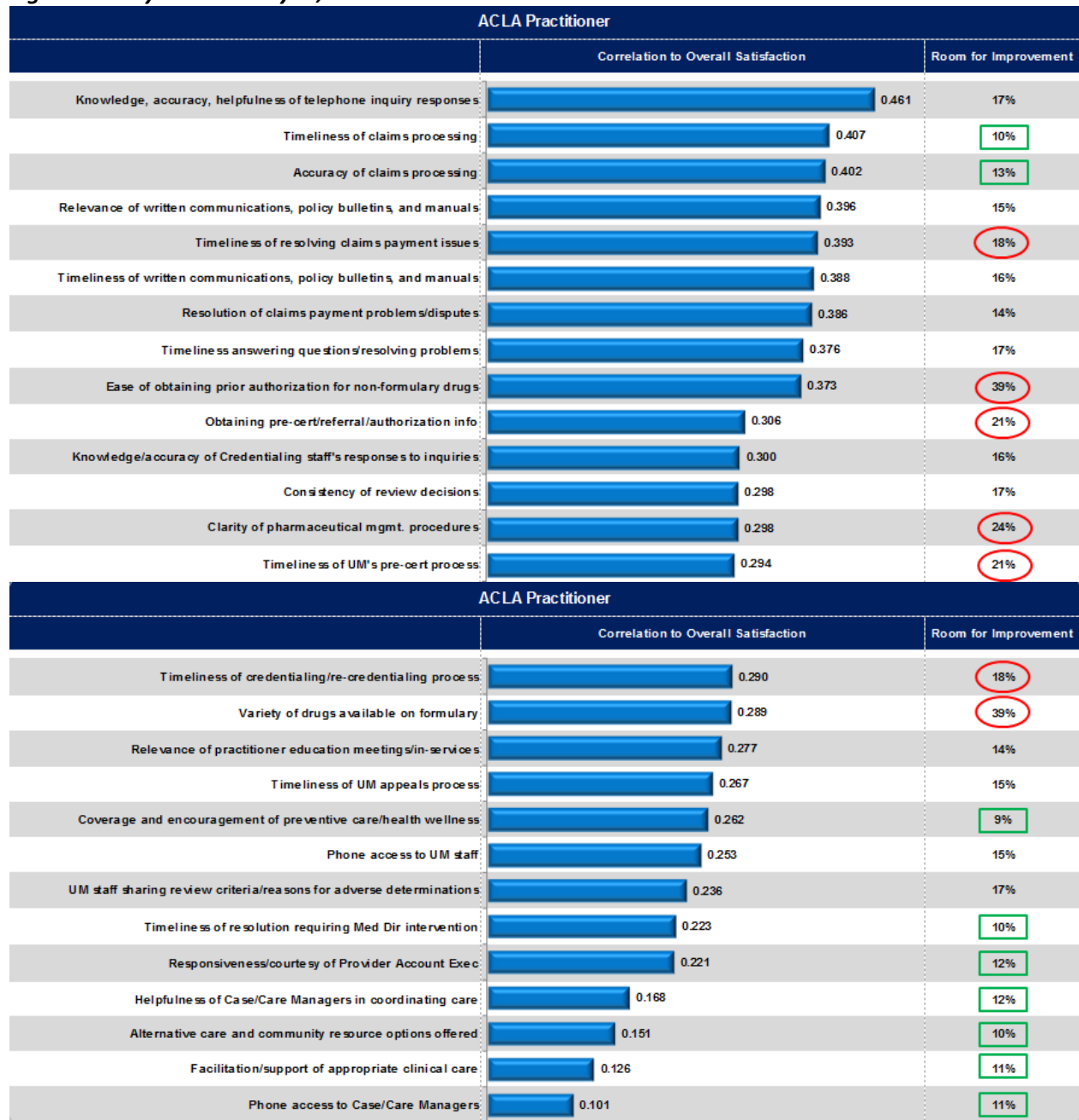
↑/↓ = 2015 results significantly higher/lower than 2014 results

**Key Driver Analysis:**

A Key Driver Analysis was conducted by Morpace to understand the impact that administrative services have on overall satisfaction with the service provided by the Plan. The information from the Key Driver Analysis can be used by the organization to prioritize and focus its efforts on those issues that are of higher importance and have lower performance levels.

Figure 14 illustrates the correlation to overall satisfaction along with the room for improvement percentages based on Morpace’s Key Driver Analysis.

**Figure 14: Key Driver Analysis, 2015**



Note: Room for Improvement is calculated by taking the frequency of respondents who answered "Fair" or "Poor," divided by the total practitioners answering the survey (n=227). This approach yields the percentage of the total sample that is affected by an attribute, allowing comparison across attributes that previously had varying percentage bases.

Red Circle = High Room for Improvement  
 No Notation = Moderate Room for Improvement  
 Green Square = Low Room for Improvement

## ***Conclusions***

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- Among practitioners, more than eight in ten are satisfied with AmeriHealth Caritas Louisiana (83% Excellent/Very Good/Good), which is higher than ratings in 2014 at 78%. Practitioners are more satisfied with AmeriHealth Caritas Louisiana compared to all other Medicaid plans at 77%.
- Nine in ten practitioners would recommend AmeriHealth Caritas Louisiana to other practices/providers, and nearly the same proportion (87%) would recommend ACLA to other patients.
- More than eight in ten practitioners agree AmeriHealth Caritas Louisiana takes physician/provider input and recommendations seriously.
- The Composite measure “Utilization and Quality Management” is rated significantly higher than in 2014. Composite measures and related attributes for AmeriHealth Caritas Louisiana are rated slightly higher or on par with all other Medicaid plans. Case Management (85%) and Claims Reimbursement Process (85%) earn the highest composite ratings. Pharmacy Services is the lowest rated composite area (58%).
- Almost two-thirds of practitioners surveyed say that there is an adequate number of specialists in the network, which is significantly higher than in 2014.
- The vast majority of practitioners are aware of the services available through NaviNet. The NaviNet service most utilized is “Member benefits/eligibility verification,” followed by “Claims Status.”
- The top two methods for practitioners for using interpreter services are in-person (54%) followed closely by telephonic (53%). Of those practitioners who use telephonic services, more than eight in ten practitioners give high ratings to their experience with the service.
- More than eight in ten practitioners find Provider Training Formats useful, which is significantly higher than 2014 ratings, while about the same proportion mentioned they would find similar webinars with the same type of information useful as well.

## ***Recommendations***

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Based on the 2015 survey results, Morpace provides the plans with recommendations to foster ongoing improvement among practitioner satisfactions. Morpace’s recommendations are as follows:

1. Within the Provider Services Staff composite changes made within “Timeliness of resolving claims payment issues” could make an impact on overall satisfaction, as this is identified as a key driver classified as “call to action.” On a related note, “Knowledge, accuracy, helpfulness of telephone inquiry responses” is identified as a key driver and categorized as an “Improve performance” area.
  - a. Monitor the phone center staff responses to inquiries and timeliness of resolving claims to assess where the process breaks down.
  - b. Develop training sessions with staff on the claims payment process and combine with customer service training that will assist staff in their job.
  - c. Determine if any other factors are contributing to staff effectiveness such as number of open positions, number of new hires, etc.

2. Within Pharmacy Services, “Ease of obtaining prior authorization for non-formulary drugs” was a key driver identified as a “call to action” area.
  - a. Define the obstacles or barriers making it difficult to obtain prior authorization for non-formulary drugs in order to make necessary changes to the process. Seek feedback from practitioners to gain further insight.
  - b. Interview practitioners and staff to inquire into and to identify confusing areas in current pharmaceutical management procedures in order to add clarity and to provide further direction.