



## 2020 Provider Experience (Satisfaction) Report

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<b>Subject</b>	MY2020 Provider Experience (Satisfaction) Report

### **INTRODUCTION**

Valley Health Plan (VHP) is a provider-oriented managed care organization that consists of a diverse and talented network of practitioners. VHP is committed to maintaining and improving the practitioner’s satisfaction with the health plan. To better meet the needs of our practitioners including Primary Care Physicians (PCPs), Specialists (Endocrinologists, Gastroenterologists and Cardiologists) and Behavioral Health Practitioners (BH), VHP conducts a Provider Satisfaction Survey (PSS) on an annual basis. VHP contracted with an external vendor, Center for the Study of Services (CSS), to administer the 2020 PSS. VHP and CSS developed a comprehensive methodology and questionnaire to meet the plan’s requirements and Department of Managed Health Care (DMHC) and National Committee for Quality Assurance (NCQA) regulations. This report provides an overview and analysis of VHP’s practitioner experience for reporting measurement year (MY) 2020. Based on the data collected, this report summarizes the results and assists VHP in identifying plan’s strengths and opportunities.

As directed by DMHC, health plans were not permitted to utilize the Industry Collaborative Effort (ICE), ICE vendor Call Logic, Inc. and/or other vendors previously used by or coordinated through ICE in connection with surveying providers, data gathering, analysis, validation, report preparation or submission and/or other compliance activities pertaining to Timely Access Compliance Report. Since MY 2017, VHP contracted with a different external vendor, as identified above, and will continue to be the survey administer for VHP’s MY 2020 survey. The plan introduced a new questionnaire for MY 2020, so prior year comparison is limited to Patients’ Timely Access, Language Assistance Program, and Overall Satisfaction items.

### **PROGRAM GOALS**

To ensure that VHP practitioners have a positive experience with health plan services.

### **PROGRAM OBJECTIVES**

- Measure practitioners experience (satisfaction) at least annually.
- Evaluate practitioner’s satisfaction with performance measures.
- Identify any areas for improving practitioners experience with the health plan services.
- Develop interventions as appropriate to address gaps in service.



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### **STANDARDS AND THRESHOLDS FOR PRACTITIONER EXPERIENCE (Satisfaction)**

- 80% of practitioners will be satisfied.
- 70% of primary care physicians will be satisfied with authorization/referral process.

### **METHODOLOGY:**

In MY 2020, VHP utilized Center for the Study of Services (CSS) as the survey vendor to administer the PSS. The survey was administered with a fax and email methodology to all the PCPs (1366), Specialists (469), and BH practitioners (418 psychiatrists: 449 non-physician providers). VHP provided CSS a practitioner's contact roster list consisted of 7,054 records. CSS identified a total of 570 unique fax numbers and 198 unique emails to administer the survey. Since the same email addresses and fax numbers were shared among multiple practitioners in the same medical groups and community health clinics, one unique survey was sent to each distinct fax number and email address and the results were attributed to all practitioners sharing the piece of contact information.

Initial outreach was conducted with email and followed by fax. Email outreach consisted of three email waves for providers with email addresses. The email invitations contained a link to complete the survey online. The initial email was sent to the entire email sample. Subsequent email waves were limited to non-respondents from the previous wave. Following the third email wave, subsequent outreach was conducted with a fax survey utilizing four waves. The first fax wave was limited to a fax number associated with a provider who either did not have an email address or did not respond to the online survey; if a fax number was only associated with providers who had already responded to the online survey, this fax number was omitted from the first fax wave. Subsequent fax waves were limited to non-respondents from the previous wave. The practitioners were instructed to complete the survey by providing feedback on various service areas of VHP. The returned fax surveys were captured using manual data entry. Each returned survey was identified by the original tracking ID number that was created by CSS. Responses were deduplicated to use the first response associated with a provider.

### **PROGRAM PERFORMANCE:**

The tables below show the overall provider experience (satisfaction) from the 2020 survey comparing those results to the satisfaction levels emanating from the 2019 survey.

### **RESPONSE RATE:**

VHP's provider database consisted of 2,702 providers. From the database of unique providers, all records were sampled. A total of 329 surveys were completed (34 NPMH, 22 SPECS, 5 Psychiatrists, and 268 PCPs). There was a total of 0 records considered ineligible and 2,373 records were non-respondents. After adjusting for the number of ineligible providers, the survey response rate was 12 %. A response rate was calculated for those providers who were eligible and able to respond and complete the survey.



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

$$\frac{(329) \text{ Completed Surveys}}{(2702) \text{ Sample Size} - (0) \text{ Ineligible}} = 12\% \text{ (Response Rate)}$$

**Table 1: Response Rate by Provider type (2 Year Comparison)**

Measurement Year	Completed Surveys	Ineligible	Non-respondents	Response Rate
2020 (2,702)	329	0	2,373	12%
2019 (2,595)	260	385	1,950	12%

**Analysis:**

- The above table indicates the response rate for all provider types for two consecutive years.
- The overall number of provider responses increased from MY 2019. Consecutively, the number of non-responses was considerably higher due pandemic. Therefore, the rate remains the same for MY 2020.
- VHP believes that the COVID-19 stay-at-home order had a significant impact in provider operations, which impacted their response rate.

**Table 2. Overall satisfaction for all provider types (N=354) comparison for 2020 from 2019**

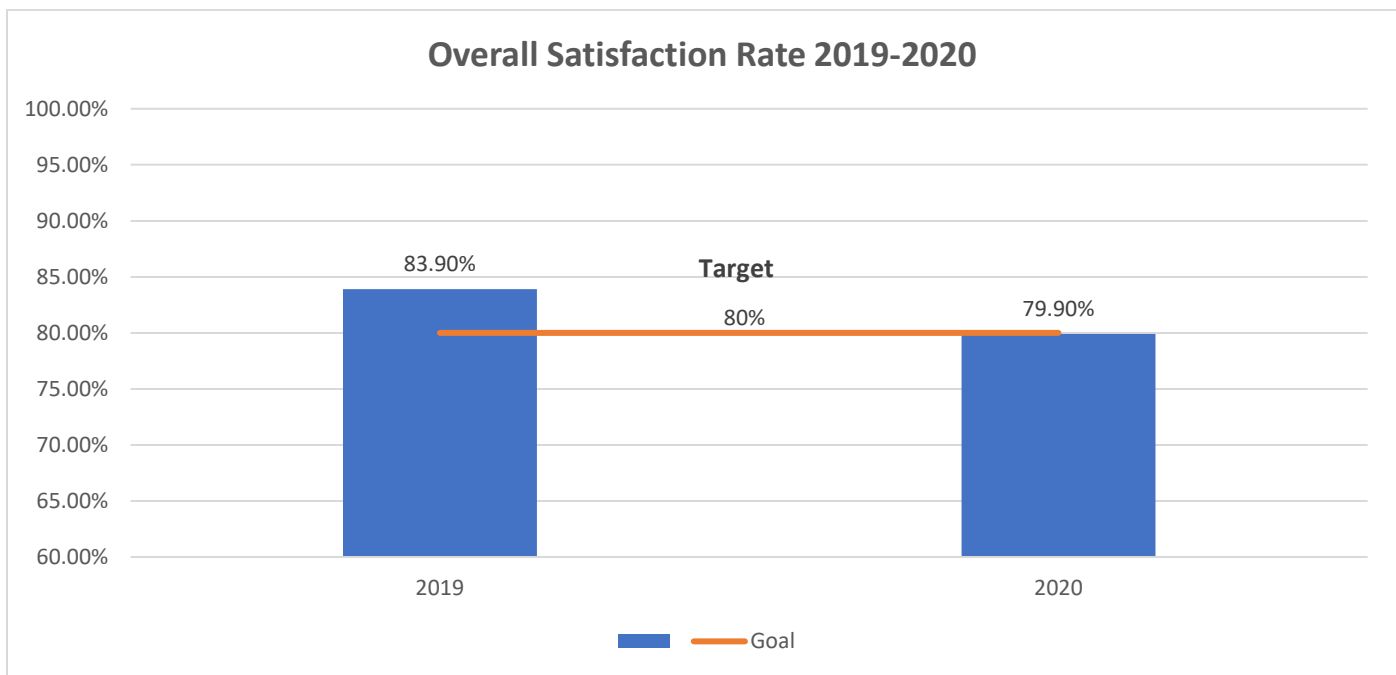
Question	Goal	Goal Met (Y/N)	Very Satisfied/ Satisfied (1&2) 2020	Very Satisfied/ Satisfied (1&2) 2019	Change from 2019
1. Utilization Management	70%	Y	77.7%	NA	NA
2. Patients' Timely Access	70%	Y	82.2%	85.8%	-3.6%
3. Claims Customer Service	70%	Y	77.6%	NA	NA
4. Appeals	70%	N	69.6%	NA	NA
5. Provider Relations Staff	70%	N	67.3%	NA	NA
6. VHP's Language Assistance Program	70%	Y	94.0%	78.4%	15.6%
7. Overall Satisfaction	70%	Y	79.9%	83.9%	-4.0%

\* Note: The change from the prior year was calculated prior to rounding.

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**Table 3. Overall Satisfaction Comparison from 2019 to 2020**

Overall Satisfaction with VHP Services 2020	Goal	Goal Met (Y/N)	Very Satisfied/ Satisfied (1&2)		Dissatisfied/ Very Dissatisfied (3&4)	
			MY 2020	MY 2019	MY 2020	MY 2019
PCPs (268)	80%	N	79.5%	81.4%	20.5%	18.6%
Specialists (22)	80%	Y	90.9%	91.9%	9.1%	8.1%
Psychiatrists (5)	80%	Y	100.0%	100.0%	0.0%	0.0%
NPMH Practitioners (34)	80%	N	73.5%	81.3 %	26.5%	18.8%
<b>Total</b>	<b>80%</b>	<b>N</b>	<b>79.9%</b>	<b>83.9%</b>	<b>20.1%</b>	<b>16.1%</b>

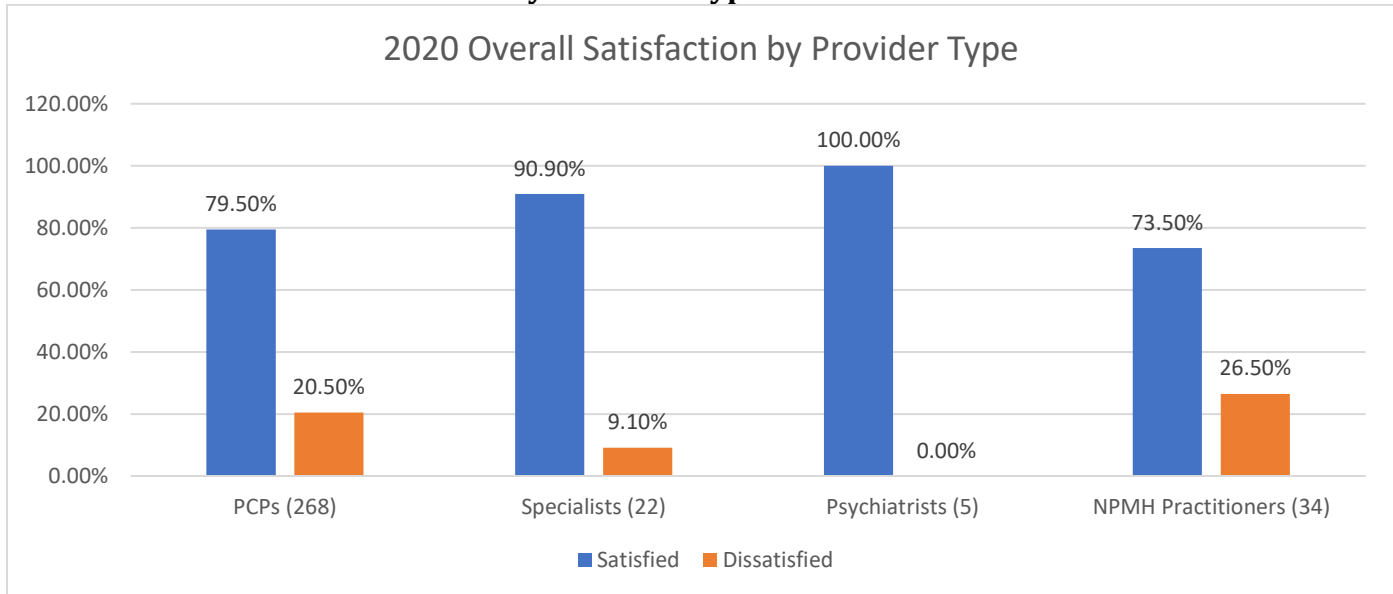


**Quantitative Analysis:**

The overall provider’s satisfaction for MY2020 was missed by a margin of 0.1%. In MY2020 the Plan’s aggregate satisfaction rate across the four providers types was not met and there was a 4 % reduction in overall satisfaction

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**Table 4: 2020 Overall Satisfaction by Provider Type**



**Quantitative Analysis:**

- Psychiatrists experienced the highest rate of satisfaction exceeding the goal at 100%. The SPECS satisfaction rate exceeded the goal of 80% by 10.9% margin. However, the satisfaction rates for NPMH and PCP dropped to 73.5% and 79.5% respectively.

**Table 5. Overall PCP (N=286) Satisfaction Comparison for 2020 from 2019**

Question	Goal	Goal Met (Y/N)	Very Satisfied/ Satisfied (1&2) 2020	Very Satisfied/ Satisfied (1&2) 2019	Change from 2019
1. Utilization Management	70%	Y	76.9%	NA	NA
2. Patients' Timely Access	70%	Y	80.6%	81.1%	↓0.5%
3. Claims Customer Service	70%	Y	76.9%	NA	NA
4. Appeals	70%	N	68.2%	NA	NA
5. Provider Relations Staff	70%	N	65.3%	NA	NA
6. VHP's Language Assistance Program	70%	Y	93.7%	77.2%	↑16.5%
7. Overall Satisfaction	70%	Y	79.5%	81.4%	↓1.9%

\* Note: The change from the prior year was calculated prior to rounding.



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### Quantitative Analysis:

The PCP rate for overall satisfaction with the Plan was not met and dropped by 1.9%. The satisfaction rates for all departments exceeded the 70% goal, except for Appeals and Provider Relations Departments.

### Qualitative Analysis:

VHP's language assistance Program met a high satisfaction rate of 16.5% higher than MY 2019. This indicated that VHP's Language Assistance Program has been working successfully. VHP will strive to continually improve in the other department areas where the goal has not been met.

**Table 6. Overall Specialist (N=27) Satisfaction Comparison for 2020 from 2019**

Question	Goal	Goal Met (Y/N)	Very Satisfied/ Satisfied (1&2) 2020	Very Satisfied/ Satisfied (1&2) 2019	Change from 2019
1. Utilization Management	70%	Y	90.0%	NA	NA
2. Patients' Timely Access	70%	Y	88.7%	96.8%	↓8.1%
3. Claims Customer Service	70%	Y	96.7%	NA	NA
4. Appeals	70%	Y	96.3%	NA	NA
5. Provider Relations Staff	70%	Y	93.0%	NA	NA
6. VHP's Language Assistance Program	70%	Y	95.8%	100.0%	↓4.2%
7. Overall Satisfaction	70%	Y	90.9%	91.9%	↓1.0%

\* Note: The change from the prior year was calculated prior to rounding.

### Quantitative Analysis:

The Specialist rate for overall satisfaction with the Plan was met in all departments and exceeded the goal. However, there was a significant decrease in satisfaction rate for Patient's Timely Access by 8.1%. VHP is expanding the network to service more patients in more areas.

### Qualitative Analysis:

The rates dropped compared to MY 2019 rates for Patient's Timely Access, VHP's Language Assistance and Overall Satisfaction. COVID-19 served as a barrier to patient access and Language Assistance. VHP will continually strive to improve the satisfaction rates for the department areas where the rates have dropped from MY 2019.

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**Table 7. Overall satisfaction by Psychiatrists (N=6) comparison for 2020 from 2019**

Question	Goal	Goal Met (Y/N)	Very Satisfied/ Satisfied (1&2) 2020	Very Satisfied/ Satisfied (1&2) 2019	Change from 2019
1. Utilization Management	70%	Y	100.0%	NA	NA
2. Patients' Timely Access	70%	Y	100.0%	100.0%	0.0%
3. Claims Customer Service	70%	Y	100.0%	NA	NA
4. Appeals	70%	Y	100.0%	NA	NA
5. Provider Relations Staff	70%	Y	100.0%	NA	NA
6. VHP's Language Assistance Program	70%	NA	NA	NA	NA
7. Overall Satisfaction	70%	Y	100.0%	100.0%	0.0%

\* Note: The change from the prior year was calculated prior to rounding.

### Quantitative Analysis:

The Psychiatrist rate of satisfaction in all departments was met and exceeded the goal 100%. The satisfaction rate for MY2020 remained the same as the results for MY2019 in similar areas of survey performed last year.

### Qualitative Analysis:

The result of MY2020 will serve as a baseline for MY2021.

**Table 8. Overall satisfaction by Non-Physician Mental Health Practitioners (N=35) comparison for 2020 from 2019**

Question	Goal	Goal Met (Y/N)	Very Satisfied/ Satisfied (1&2) 2020	Very Satisfied/ Satisfied (1&2) 2019	Change from 2019
1. Utilization Management	70%	Y	74.9%	NA	NA
2. Patients' Timely Access	70%	Y	100.0%	99.0%	↑1.0%
3. Claims Customer Service	70%	N	68.4%	NA	NA
4. Appeals	70%	N	52.2%	NA	NA
5. Provider Relations Staff	70%	N	63.7%	NA	NA
6. VHP's Language Assistance Program	70%	Y	94.4%	0.0%	↑94.4%
7. Overall Satisfaction	70%	Y	73.5%	81.3%	↓7.7%

\* Note: The change from the prior year was calculated prior to rounding.



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### Quantitative Analysis:

VHP exceeded the goal for Patient’s Timely Access for NPMH Practitioner by 100%. Although overall satisfaction goal was met and exceeded by 3.5%, there was a decreased satisfaction rate of 9.59% change from previous year.

### Qualitative Analysis:

VHP will focus on areas like Claims Customer Service, Appeals and Provider Relations Staff where the performance was poor and did not meet the goal.

**Table 9. Opportunities for Improvement**

Description of Intervention for My2020	Barrier Addressed	Time Frame	Expected Outcome
Gather information related to provider and department specific dissatisfaction regarding patients’ access to care and then work with surveyed departments to develop improvement tactics	Low satisfaction rate to Provider Satisfaction Survey	8 months	10% improvement from PY
<p>Identify ways to increase the number of respondents to the Satisfaction survey for all provider types, including PCPs, SCPs, Psychiatry, and Non-Physician Mental Health Providers.</p> <ol style="list-style-type: none"> <li>1. Communicate to the providers in advance of the survey, educating them on the importance of their response to the survey, the limited time frames allowed for responses to be counted, and the standards set-forth by DMHC.               <ol style="list-style-type: none"> <li>a. Education through Joint Operating Committees</li> <li>b. Sharing information at Quality Management Oversight Committee</li> <li>c. Publishing articles in the Provider Bulletin</li> <li>d. Ensuring we address concerns during orientations and re-orientations</li> <li>e. On-site provider visits, emails, and phone calls</li> </ol> </li> <li>2. Inform the providers who refused to participate in the MY2020 survey of</li> </ol>	Improve low response rate to Provider Satisfaction Survey	8 months	10% improvement from PY





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Description of Intervention for My2020	Barrier Addressed	Time Frame	Expected Outcome
<p>the importance of their participation and remind providers about their contractual obligations related to timely access to appointments.</p> <ol style="list-style-type: none"> <li>3. Take survey data that identifies providers who were not able to be reached due to inaccurate contact information and have Provider Relations staff contact provider to ensure VHP has correct telephone number for the survey, as well as correct email and mailing address.               <ol style="list-style-type: none"> <li>a. Once corrected information is identified, provider contact information will be updated in VHP provider source data.</li> </ol> </li> <li>4. VHP is also conducting a provider data clean-up project which is intended to validate, standardize naming conventions, and ensure completeness/accuracy.</li> <li>5. Include non-responsive providers on the first wave of the 2021 Satisfaction survey to ensure they are compliant, and if not, re-educating and re-surveying those same providers in the second wave of the 2021 Satisfaction survey.</li> </ol>			
<p>Educate providers on how they can access Language Assistance Program for Psychiatry providers to determine more targeted approach.</p> <ol style="list-style-type: none"> <li>1. Education through Joint Operating Committees.</li> <li>2. Ensuring we address concerns during orientations and re-orientations.</li> <li>3. On-line provider visits, emails, and phone calls.</li> </ol>	Overall Low response with LAP	8 months	10% improvement from PY



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Description of Intervention for My2020	Barrier Addressed	Time Frame	Expected Outcome
4. Identify Provider Relations specialist dedicated to Behavioral Health providers who can provide this targeted outreach.			

**Conclusion:**

Although VHP met and exceeded goals in certain specialties and certain areas, VHP did not meet the goals for all Physician Overall Satisfaction. Language Assistance Program is a very strong contender in exceeding the goal expectations. The survey tools were revised with new and different survey questions for MY2020 to align more closely with the requirement from Department of Managed Health Care (DMHC). Therefore, the results from the MY2020 survey will be used as baseline data for comparison purposes in the future. VHP believes that the COVID-19 stay-at-home order had a significant impact in provider operations, which impacted their response rate.

The survey results reveal some opportunities for improvement. As stated in Table 8, VHP will collaborate with VHP’s operational departments (e.g., Quality, Utilization Management, Member Services, etc.) to improve provider’s satisfaction as well as improve satisfaction strategies within Provider Relations, including communications and provider meetings. VHP values its providers and wants to create a positive, collegial working relationship with them. The interventions outlined above will be the focus for VHP for MY2020.