

**The Advocacy Alliance
Executive Summary
Annual Provider Survey Report
2012-2013**

Introduction

The Advocacy Alliance is contracted with Northeast Behavioral Health Care Consortium (NBHCC) to facilitate the required Annual Provider Satisfaction Survey in Lackawanna, Susquehanna, Luzerne, and Wyoming Counties. During fiscal year 2012 – 2013 the Alliance is contracted to conduct surveys with Providers who provided Behavioral Health Services through Community Care Behavioral Health Care Organization (CCBHO).

Survey Tool and Administration

The survey tool was used with permission from CCBHO to evaluate CCBHO's services from the provider's perspective. The Alliance, in conjunction with NBHCC, developed a database of providers who provided services under CCBHO at the time the sample was drawn. One hundred and fifty-one unduplicated providers were identified to receive surveys. Providers were also given the option of completing the survey on a secure website. User IDs and Passcodes were included in the cover letter sent with the survey and six Providers completed the survey using the website. Providers who did not respond to the survey received a second survey and cover letter.

The following report includes survey results from providers who chose to participate in the Annual Provider Survey process. From January 2013 through April 2013, the Alliance collected 56 surveys.

Survey Results

Authorization and Pre-certification Questions

Providers were given a definition of Authorization and Pre-certification (terms that refer to the way a provider contacts CCBHO to get approval for services) and were instructed to consider the level(s) of care they provide and answer accordingly.

The following data shown is based solely on the number of responses to each question and does not include non-responses (i.e., Not Applicable, No Experience and No Reply).

Overall, providers who responded reported satisfaction with the Authorization and Pre-certification processes through CCBHO. Regarding the credentialing process, 72% of providers rated the process as Very Good (33%) or Good (39%); regarding the authorization process for outpatient, mental health intensive outpatient, intensive case management and resource coordination services, 86% of providers rated it as Very Good (39%) or Good (47%); regarding the authorization process for behavioral health rehabilitation services, residential treatment facilities, school based and family based treatment, 58% of providers rated it as Very Good (27%) or Good (31%) (see tables pages 3-4).

When asked to compare the current authorization process for outpatient, mental health intensive outpatient, intensive case management and resource coordination services with last year's process, 31% of providers reported the process as Much Better (8%) or Somewhat Better (23%). When asked to compare the current authorization process for behavioral health rehabilitation services, residential treatment facilities, school based and family based treatment with last year's process, 24% of providers reported the process as Much Better (8%) or Somewhat Better (16%) (see tables pages 4-5).

When asked to rate their level of satisfaction with the current pre-certification process as it relates to all inpatient levels of care, 96% of providers who responded were Very Satisfied (23%) or Satisfied (73%). When asked to identify an area where the provider has had problems with the authorization or pre-certification process, 68% of the providers reported having Little or No Problems. Additionally, there were four topics identified by providers that they feel should be added to the Provider Manual to make issues more clear (see tables pages 5-6 and comments page 7).

General Satisfaction

Providers who responded continued to report being satisfied with CCBHO, with 94% of providers Very Satisfied (46%) or Satisfied (48%) with the courtesy of the Provider Relations staff; 98% Very Satisfied (52%) or Satisfied (46%) with their most recent meeting/interaction with the Provider Relations staff; 78% reporting being Very Satisfied (14%) or Satisfied (64%) with CCBHO's provider dispute/member grievance process related to utilization management; 82% Very Satisfied (9%) or Satisfied (73%) with the provider complaint process; 96% were Very Satisfied (47%) or Satisfied (49%) with the courtesy extended to them by CCBHO's Care Management staff; and 96% were Very Satisfied (48%) or Satisfied (48%) with the courtesy extended to them by CCBHO's Customer Service Representative's (see tables pages 7-9).

Eighty-six percent of Providers responding reported that CCBHO's Provider Relations staff Always (39%) or Often (47%) provide them with consistent and accurate information; 84% reported that CCBHO's Provider Relations staff Always (40%) or Often (44%) answer their questions to their satisfaction; 82% reported that CCBHO's Care Management Staff Always (39%) or Often (43%) answer their questions to their satisfaction; and 80% reported that CCBHO's Customer Service Representatives Always (46%) or Often (34%) answer their questions to their satisfaction (see tables pages 10-11).

Consumer/Family Satisfaction Team (C/FST) Satisfaction

Providers rated the C/FST process as Very Good (35%) or Good (35%) (see tables pages 12-13).

Satisfaction with CCBHO's Behavioral Health Rehabilitation Services (BHRS) for Children and Adolescents

Sixteen providers who responded reported being a BHRS provider, with 43% reporting being Very Satisfied (7%) or Satisfied (36%) with CCBHO's BHRS clinical decision-making process; 64% reported being Very Satisfied (14%) or Satisfied (50%) with the accuracy and consistency of information provided by CCBHO's staff regarding BHRS services; 71% reported being Very Satisfied (7%) or Satisfied (64%) with the authorization process for BHRS services (see tables and comments pages 14-16).

Satisfaction with CCBHO's Claims Process

Eighty-one percent of providers who responded reported that the accuracy of claims payments was Very Good (26%) or Good (55%); 73% reported that the timeliness of claims payments was Very Good (30%) or Good (43%); 24% of providers reported that the current claims process is Much Better (4%) or Somewhat Better (20%) than last year's process; and compared to other insurance companies, 56% of providers rated CCBHO as Much Better (16%) or Somewhat Better (40%) than other insurance companies with which they work (see tables pages 16-17).

Ninety percent of providers who responded reported that they were Always (40%) or Often (50%) provided with consistent and accurate information by CCBHO's Claims Representatives; 86% reported being Very Satisfied (23%) or Satisfied (63%) with the length of time required to resolve their claims concerns; 94% reported being Very Satisfied (24%) or Satisfied (70%) with CCBHO's Claims Remittance advice; 94% reported being Very Satisfied (26%) or Satisfied (68%) with CCBHO's Quality Improvement Program as it relates to sharing information with them as a Network Provider; 89% reported being Very Satisfied (24%) or Satisfied (65%) with CCBHO's Quality Service Management; and 88% reported being Very Satisfied (19%) or Satisfied (69%) with CCBHO's provider benchmarking practices as compared to others in the network (see tables pages 18-20).

Overall Satisfaction

Ninety-six percent of providers who responded were Very Satisfied (51%) or Satisfied (45%) with being a provider for CCBHO; 74% were Very Satisfied (19%) or Satisfied (55%) with the Member Grievance Process; and 93% were Very Satisfied (19%) or Satisfied (74%) with the Member Complaint Process (see tables pages 21-22).

Conclusion

Providers show satisfaction in all areas, with little correlation evident in any of the data. The data collected during this year will primarily be used identify emerging trends.