



Annual Satisfaction Surveys 2015

Better Health (BET) conducts annual satisfaction surveys of our providers and members as part of our continuous quality improvement activities.

Member Satisfaction Survey - CAHPS

The Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey asks our members to rate their experiences with their doctors, specialists and health plan. BET contracted a third party National Committee for Quality Assurance (NCQA) certified vendor to conduct the CAHPS survey. Two versions of the survey, the adult and the child, were fielded in Spring 2015.

We rate our CAHPS performance against benchmarks set by the NCQA. NCQA's Quality Compass percentiles are derived from the scores of all HMO plans, across the nation, which perform the CAHPS survey.

We wanted to share these results with you, since you and your staff have a direct impact on our members', your patients', satisfaction.

- The highest scoring measure for both the adult and child survey was "Satisfaction with personal doctor."
- Overall, our adult members appear happier with our services and the services provided by our network of providers: Our members were very satisfied with "How Well Doctors Communicate".

What can provider offices do?

- Communicate thoroughly and completely using language the patient can understand.
- Efficiently process referrals and authorizations as appropriate.
- Provide appointments convenient to patients.
- Assist patients in scheduling appointments with a specialist.
- Ask patients if they have seen any other doctor or received any other services since they were last seen. If they have, request their records.
- Discuss and encourage preventive care, such as influenza vaccines.
- Make use of patient education materials provided by Better Health and federal/state entities, such as ahrq.gov or healthfinder.gov.



Provider Satisfaction Survey

Better Health conducts an annual Provider Satisfaction survey of a random sample of primary care offices in their network.

The survey was distributed to 440 PCPs in a 2-part mailing. The initial mailing, in March 2015, consisted of a cover letter and survey. A second survey was mailed in April 2015 to all providers who had not returned the original survey. Sixty-nine completed surveys were returned for a response rate of 16%. The plan established a minimum threshold of 85% satisfaction on each survey item. Items that did not meet the 85% threshold were addressed in action plans.

Here are some key findings from the surveys.

Strengths:

- The quality of the Plan's health education and wellness promotion services for members.
- The Plan's credentialing process.
- The information provided in the Provider Manual as well as communication provided via letters and faxes from the Health Plan.
- The authorization and appeals processes.

Areas of Improvement:

- The time it took to resolve a complaint (any type).
- The number of high-quality specialists available for referrals.

Thank you for providing us your feedback. We can only improve if you let us know how we are doing. If your office is randomly selected for next year's survey please advise us of your experiences.