



ValueOptions-Kansas

Fiscal Year 2014
Provider Satisfaction Survey

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OBJECTIVES

The survey questionnaire was developed collaboratively between ValueOptions and Fact Finders. A primary objective in designing this questionnaire was to incorporate questions about each aspect of ValueOptions' services that providers may consider when deciding to join or remain in the ValueOptions provider network.

SAMPLE DESIGN

The population surveyed in this research is comprised of VO-KS providers who were in the SAPT Block Grant network at any point during fiscal year 2014; July 1, 2013 – June 30, 2014. Providers also had to be active in the network at the time the survey was conducted.

QUESTIONNAIRE DEVELOPMENT

The questionnaire development involves collaboration between Fact Finders, Inc. and the ValueOptions National office. Questions were then customized to the Kansas contract. In FY 2011, a question regarding the type of employee completing the survey was added. Specifically, "Are you currently: 1) in management at your facility, 2) not in management at your facility, or 3) do not know / do not want to answer".

In addition, VO-KS incorporated Independent Assessor recommendations regarding the rating scales. The rating scales were revised to have a more clear change from the top two ratings (Very Good and Good) to the bottom two ratings (Poor and Very Poor).

DATA COLLECTION

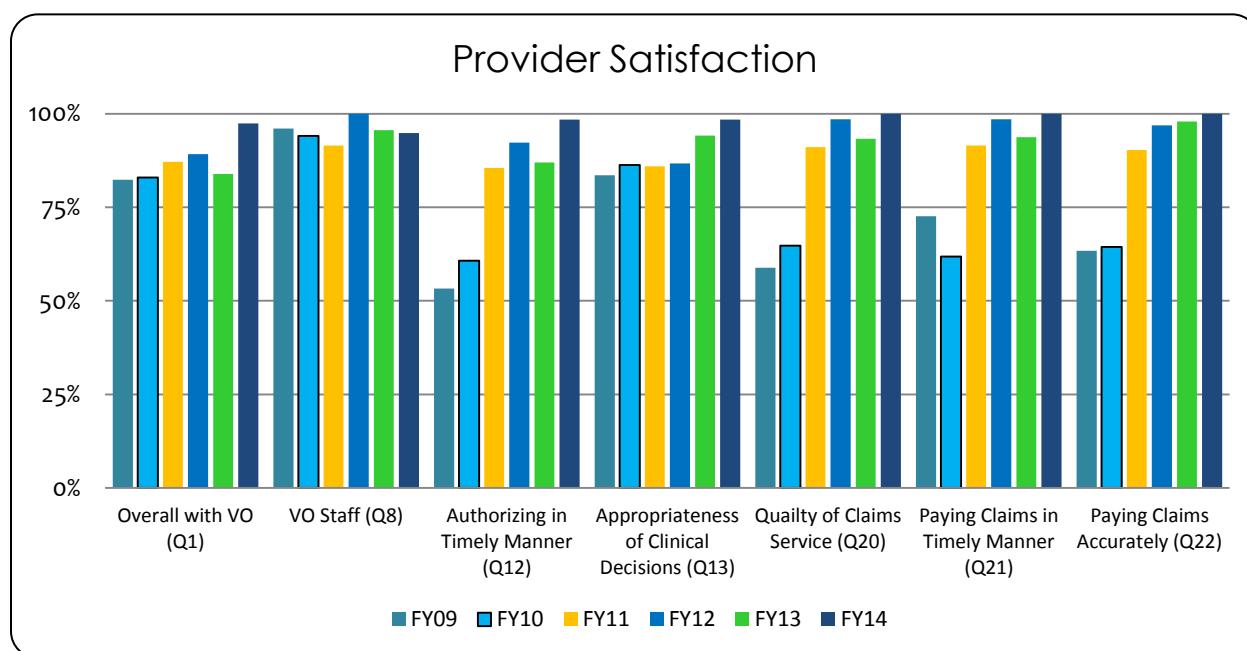
An online survey tool called SurveyMonkey was utilized to collect the data for the survey. An e-mail with a link to the survey was sent to at least one person in every provider location on June 23, 2014. Then, a reminder e-mail was sent to the same provider email distribution group on June 30, 2014. There were a total of 14 calendar days to complete the survey. During that time, there were 77 responses completed. In order to elicit an unbiased response, no provider identifiable information was collected.

ANALYSIS

This is the seventh annual provider satisfaction survey conducted for the VO-KS network. Other than where noted in the questionnaire development section above, data collection procedures and survey tool were consistent for the past six years. It is noteworthy to mention that FY 2014 is the first year that only BHS Block Grant providers were surveyed regarding their satisfaction with VO-KS services.

Of the 77 providers that responded, 97.4% were satisfied with VO-KS. This is an increase over last year's response of 13.5 percentage points. In addition, 96.8% of respondents indicated that VO-KS has gotten much better or gotten better over last year.

Seven indicators of provider satisfaction have been tracked and trended over the past six years. Provider satisfaction scores with six indicators increased from FY 2013 to FY 2014, whereas one indicator decreased slightly. See the charts below for details.



Provider Satisfaction Survey	FY09	FY10	FY11	FY12	FY13	FY14
Overall with VO (Q1)	82.4%	83.0%	87.1%	89.2%	83.9%	97.4%
VO Staff (Q8)	96.0%	94.0%	91.5%	100.0%	95.6%	94.8%
Authorizing in Timely Manner (Q12)	53.2%	60.7%	85.5%	92.3%	87.0%	98.5%
Appropriateness of Clinical Decisions (Q13)	83.6%	86.3%	85.9%	86.7%	94.1%	98.4%
Quality of Claims Service (Q20)	58.8%	64.7%	91.0%	98.6%	93.3%	100.0%
Paying Claims in Timely Manner (Q21)	72.6%	61.8%	91.5%	98.5%	93.8%	100.0%
Paying Claims Accurately (Q22)	63.3%	64.4%	90.3%	96.9%	97.9%	100.0%

In addition, providers were asked open-ended questions in the survey. Question 14 asked providers for suggestions for “improving the authorization procedure”. There were 19 responses and nearly half indicated they had no suggestions for improving the authorization procedure. Some responses included frustration with denial reasons, authorization delays when members transition from Medicaid to Block Grant, and there was one request for new ASAM criteria training.

Question 27 asked providers for suggestions to “improve the services”. There were 17 responses, 8 of which were comments such as “They do a great job” and “None, you’re awesome”. Some suggestions for improvement included improve denial of services process, claims processing for SB67 clients, more communication with providers about contract

addendum and allocation process, and reducing time on phone with VO-KS Clinicians clarifying information and answer questions when authorize services.

Question 28 asked providers about what area of VO-KS services they were most satisfied with. There were 24 responses including comments such as “VO staff is great to work with”. Respondents also included things such as appreciating prompt responses to inquiries, claims assistance, VO-KS staff knowledge of the KCPC, and willingness to assist with problem solving. One provider even commented that “compared to other MCOs I am extremely pleased and actually enjoy working with VO staff and services”.