

Children's Medical Services Network
Provider Satisfaction Report

Contract Period 2014-2015

Report Prepared by the Institute for Child Health Policy at the University of
Florida

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1. Executive Summary

The Children's Medical Services Network (CMSN) is Florida's Title V program for children with special health care needs (CSHCN). CMSN's unique delivery system focuses on providing the highest quality of care to CSHCN. The delivery of care is conducted by two separate Integrated Care Systems (ICS): Ped-I-Care and South Florida Community Care Network (SFCCN). CMSN providers are an integral part of a network of local community providers, hospitals, and university medical centers around the state of Florida that provide quality care to children who need it most.

The Agency for Health Care Administration (AHCA) requires that all health plans participating in the provision of Medicaid care conduct a survey to assess provider satisfaction. All health care providers with valid contact information were included in the sample. Contact information was provided by CMSN. In order to limit survey administration to valid providers, the following criteria were used for exclusion: 1) hospitals, clinics, and pharmacies; and 2) individuals without valid contact information. This resulted in a total of 3,364 providers [2,120 from Ped-I-Care and 1,244 from SFCCN].

A multi-modal methodology was utilized where providers were contacted by both email [if available] and mailed surveys. Study data were collected and managed using Research Electronic Data Capture (REDCap) hosted at the University of Florida.¹ REDCap is a secure, web-based application designed to support data capture for research studies. Providers were surveyed in March 2015. This report presents the findings from the 264 providers who completed the satisfaction survey.

Key Findings include:

- A total of 87 percent of providers are currently accepting new patients, which increased from 2013. However, the majority of providers noted their CMSN caseload was less than 25 percent.
- Agreement levels for all survey items exceeded 60 percent indicating high levels of satisfaction with both the ICS and CMSN.
- The greatest level of disagreement noted by providers was in regards to claims being processed in a timely manner (36 percent) and without errors (36 percent), followed by the helpfulness of complaint resolution representatives (31 percent).

¹ Paul A. Harris, Robert Taylor, Robert Thielke, Jonathon Payne, Nathaniel Gonzalez, Jose G. Conde, Research electronic data capture (REDCap) - A metadata-driven methodology and workflow process for providing translational research informatics support, J Biomed Inform. 2009 Apr;42(2):377-81.

Introduction

The Children's Medical Services Network (CMSN) provides a comprehensive system of care for eligible children with health care needs. Effective August 1, 2014, CMSN began operating a statewide specialty plan for children with special health care needs (CSHCN) under the Managed Medical Assistance (MMA) component of this new Medicaid program. CMSN partners with two Integrated Care Systems (ICSs) to provide quality health care services to CMSN members. Ped-I-Care provides care to the central and northern parts of the state and South Florida Community Care Network (SFCCN) to the southern part. CMSN strives to provide accessible, comprehensive, and family-centered care in a medical home setting. Additionally, they provide intervention, prevention and other specialty programs that provide community-based services in the natural environment and other appropriate settings.

This report presents the satisfaction of providers in the CMSN. The CMSN provider satisfaction survey was approved by AHCA in September 2014 and mailed and/or e-mailed to the CMSN providers in March 2015.

Purposes

The purposes of this report are to describe provider satisfaction within the following categories:

- Relations and Communication and Clinical Management Processes with the ICS
- ICS Authorization Processes
- ICS Complaint Resolution Process
- CMSN Clinical Management Processes
- CMSN Claims Payment and Processing
- CMSN Care Coordination and Care Management

Data Collection and Evaluation Methods

A list of providers within both Ped-I-Care and SFCCN were supplied by CMSN in January 2015. The Institute for Child Health Policy (IHP) was e-mailed an Excel file containing the provider contact information [including ICS] from CMSN. From the directory provided, each entry was checked for validity. Entries with the following were eliminated:

- Non-named provider
- Health Practices

After removing the invalid entries, remaining provider listings were assessed for quality. Any address that was listed as a PO box was evaluated and corrected. Any provider with multiple addresses was further evaluated for duplication. When necessitated, health practices were contacted to verify provider mailing addresses. Following data quality

checks, providers with e-mail contacts were entered into REDCap. Dummy e-mail addresses were created for providers with no e-mail on file to facilitate the generation of a unique link to the online survey modem.

In March 2015, 3,364 providers [2,120 from Ped-I-Care and 1,244 from SFCCN] were sent a satisfaction survey [by mail and e-mail]. A total of 264 were returned resulting in a response rate of eight percent.

Survey Findings

Demographic information provided by respondents are shown in Table 1. The majority of providers were female (52 percent), White (69 percent), non-Hispanic (76 percent), had practiced more than 20 years (46 percent), and practiced in an urban setting (48 percent). Most respondents practiced within a solo or two physician practice (43 percent) followed by pediatric group practice (27 percent) and an academic health center (13 percent). Forty-three percent of providers contracted with one to five managed care organizations. The majority of respondents (32 percent) have been Medicaid providers for more than twenty years.

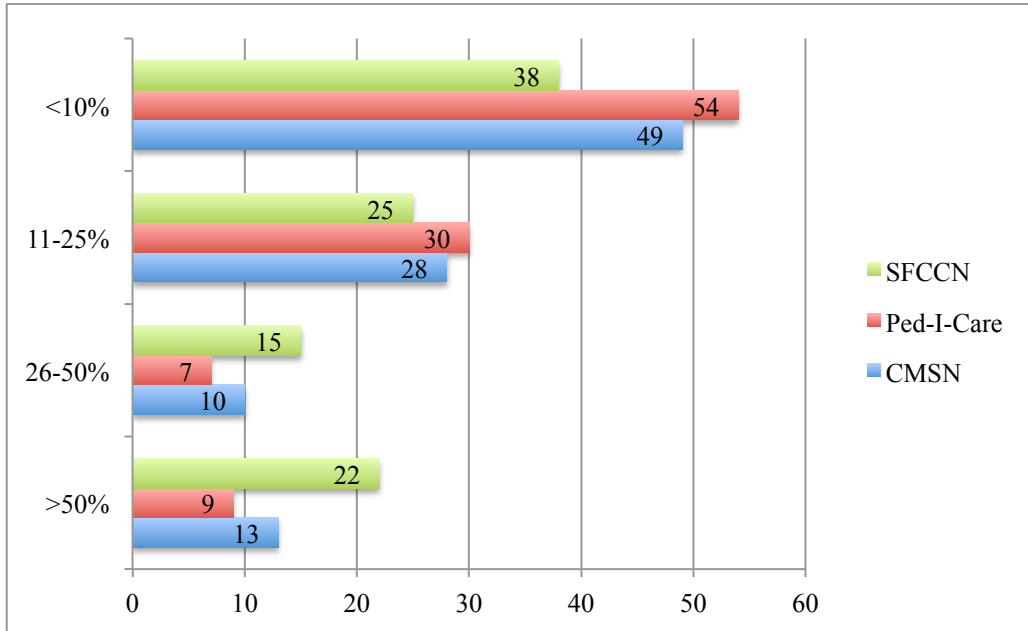
Table 1. Respondent Demographics

All Providers	
Gender	
Male	48%
Female	52%
Race	
White	69%
Black	6%
Asian/Pacific Islander	13%
American Indian	1%
Other	11%
Ethnicity	
Hispanic	24%
Non-Hispanic	76%
Years in Practice	
1 to 10 years	23%
11 to 20 years	32%
More than 20 years	46%
Practitioner Type	
Pediatric Specialist	31%
General Pediatrician	48%
Family Physician	4%
Other	18%
Practice Type	
Solo/Two Physician Practice	43%
Pediatric Group Practice	27%
Academic Health Center	13%
Children's Hospital	4%
Other	13%
Managed Care Organization Contracts	
None, I only contract with CMSN	5%
1 to 5 MCOs	43%
6 to 10 MCOs	33%
More than 10 MCOs	18%
Years as a Medicaid Provider	
1 to 5 years	15%
6 to 10 years	23%
11 to 15 years	14%
16 to 20 years	16%
20+ years	32%
Patient Centered Medical Home (PCMH)	
17%	
Community Type	
Urban	48%
Suburban	42%
Rural	11%

Note: The percentages within individual categories may not sum to 100% due to rounding.

A total of 98 percent of responding providers are currently a CMSN provider, with 87 percent currently accepting new enrollees. This is an increase from 2013 when only 70 percent of providers indicated they were accepting new enrollees. The majority of respondents noted that less than 25 percent of their caseload was comprised of CMSN-enrolled children (Figure 1).

Figure 1. Percentage of CMSN-enrolled children in provider caseload



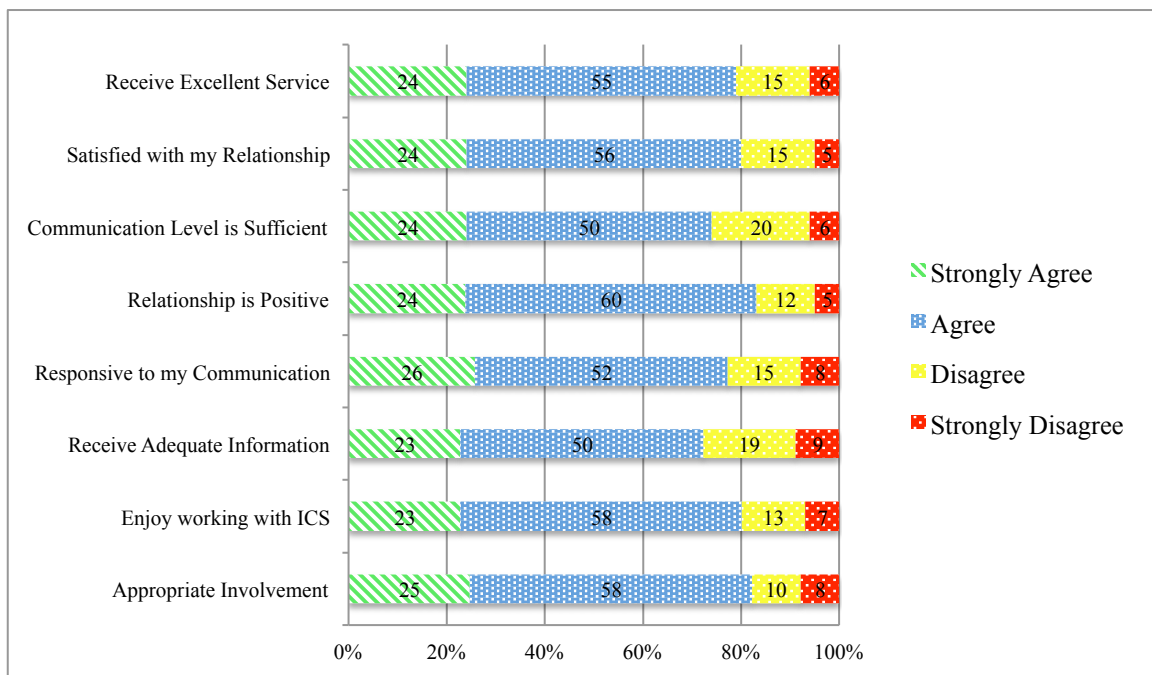
1.Satisfaction with the Integrated Care System

1.1 Relations and Communication and Clinical Management Processes with the ICS

The first survey section assessed provider satisfaction with the relationship and interactions they have with the ICS in multiple capacities. Questions were designed to assess providers' views on the relationship they have with their ICS, the communication processes between them and the ICS, as well as the involvement the ICS has with the clinical management of patients.

Figure 2 shows that providers were satisfied with their relationship with the ICS as well as the clinical management processes. Respondents particularly agreed that their relationship with the ICS is positive (84 percent), and that the ICS involvement with patient clinical management is appropriate (83 percent). The two areas with higher levels of disagreement were the receipt of adequate information (28 percent) and sufficient communication levels (26 percent). Overall, from Figure 2, providers had a positive outlook on relations and communication and clinical management process with the ICS.

Figure 2. Findings for Relations and Communication and Clinical Management Process with the ICS

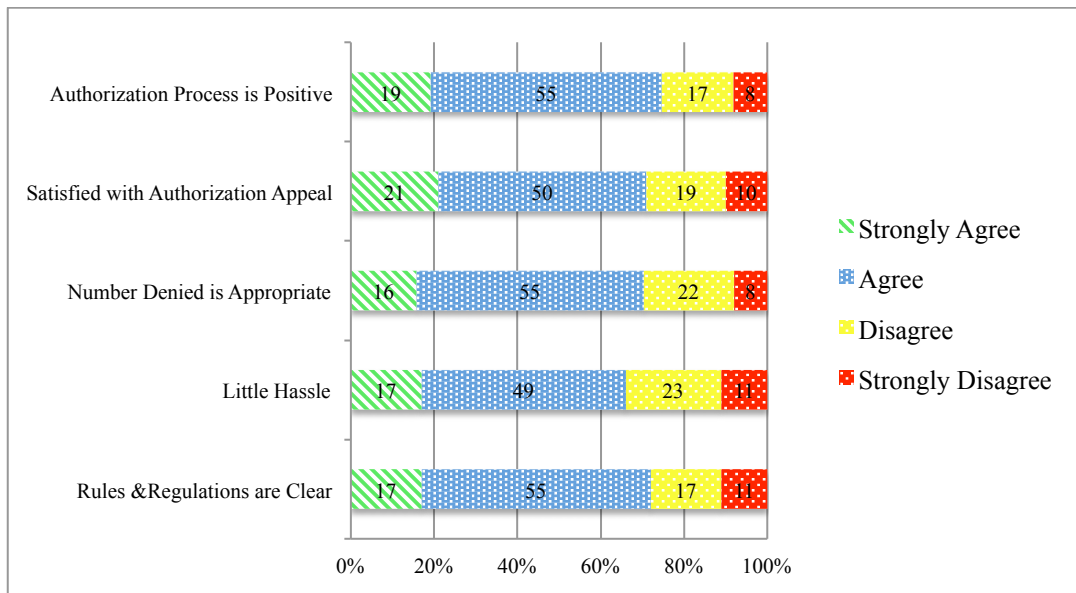


1.2 ICS Authorization Processes

The next section regarding provider satisfaction with respect to the ICS examined the authorization processes. Items were designed with the intent of further elucidating the provider viewpoint surrounding the authorization process as a whole, the appeal process, and the rules and regulations in place.

As a whole, providers were satisfied with the ICS authorization processes (73-84 percent agreement) (Figure 3). Overwhelmingly, providers agreed that the authorization process as a whole is a positive experience (84 percent), and strongly agreed that they were satisfied with authorization appeal process (26 percent strongly agreed, 78 percent agreed as a whole). While providers were satisfied with the authorization process, there was disagreement that the number of authorizations denied is appropriate (28 percent).

Figure 3. Satisfaction with ICS Authorization Processes

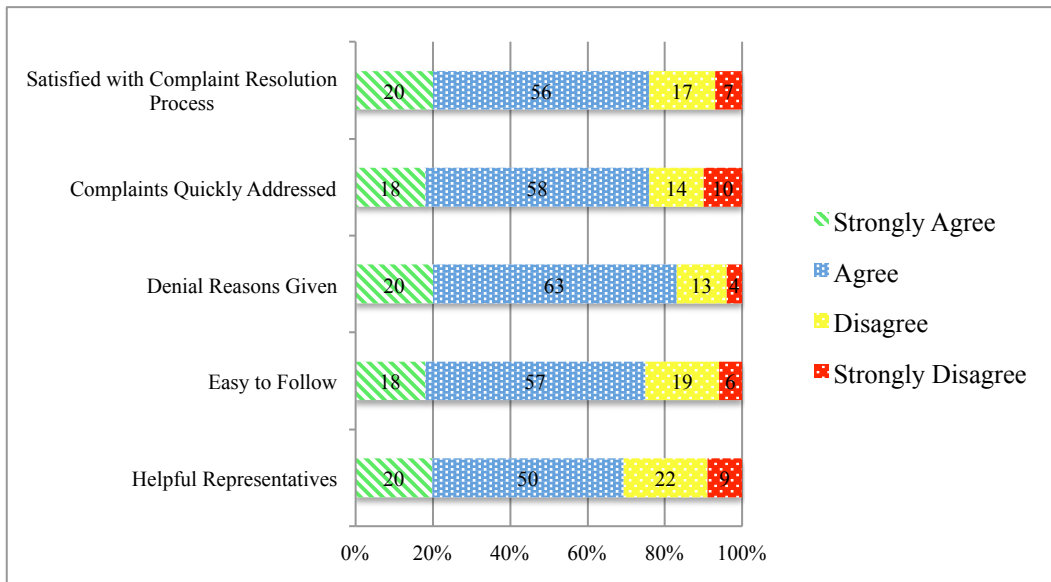


1.3 ICS Complaint Resolution Process

The final section to evaluate provider satisfaction with the ICS is focused on assessing the complaint resolution process. Question content centered on provider satisfaction with complaint resolution, timeliness, and the helpfulness of resolution representatives.

The complaint resolution process was viewed positively by responding providers. Levels of agreement regarding statements ranged from seventy to eighty-three percent. Respondents reported highest agreement about consistently receiving denial reasons when denial notifications were given (Figure 4). Providers were also satisfied with the complaint resolution process (76 percent) and how quickly complaints are addressed (76 percent). While the speed and information provided were amenable, providers noted that they were somewhat dissatisfied with the helpfulness of complaint resolution representatives (31 percent).

Figure 4. Satisfaction with the Complaint Resolution Process



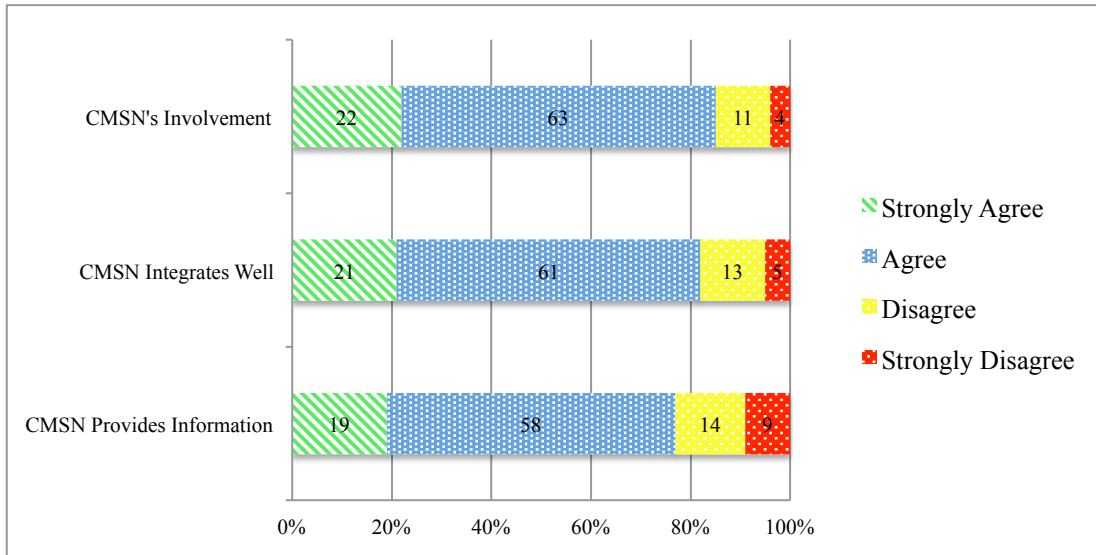
2. Satisfaction with Children’s Medical Services Network (CMSN)

2.1 CMSN Clinical Management Processes

The second section of survey evaluation focused on provider satisfaction with CMSN in relation to clinical management processes. The three questions within this item set are related to the clinical management of providers’ patients as well as the clinical guidelines.

Providers had a positive viewpoint on the CMSN clinical management processes as a whole (range 77-85 percent). The highest level of agreement providers had was that CMSN’s involvement with patients’ clinical management is appropriate. While providers were satisfied overall, there was some disagreement with CMSN providing information about clinical guidelines that are useful for patient management (23 percent).

Figure 5. Overall Satisfaction with CMSN Clinical Management Processes

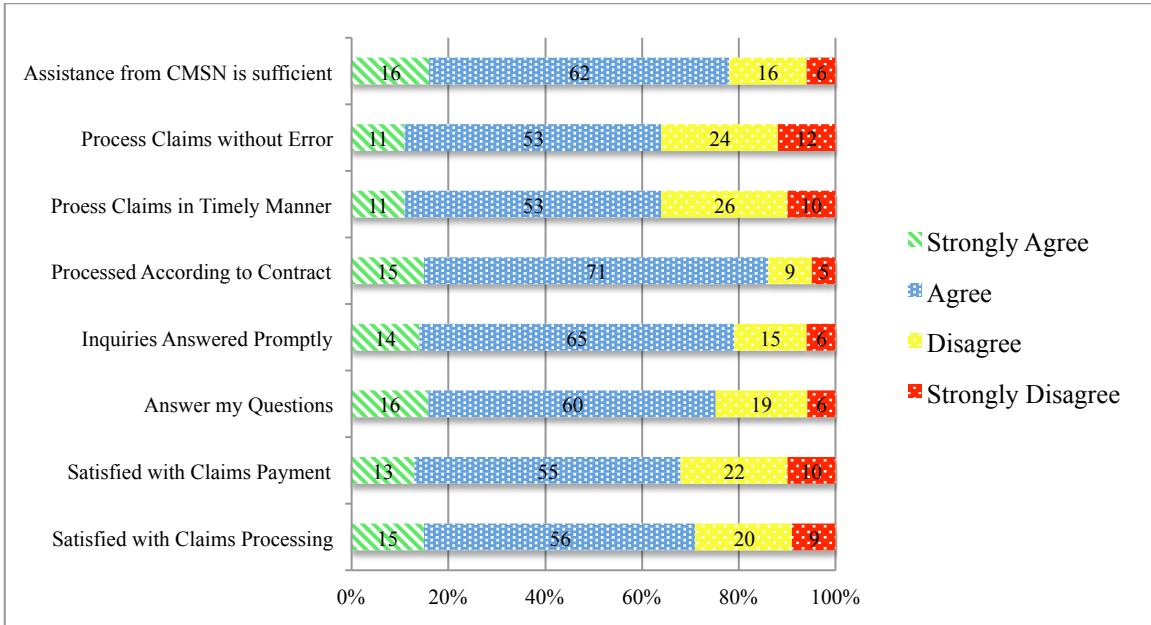


2.2 CMSN Claims Payment and Processing

The next subset of questions focused on the claims payment and processing experience offered by CMSN. Providers were asked to give their level of agreement with statements regarding the assistance provided by CMSN and the processing of claims, inquiries, and payments.

Of all sections within the survey, claims payment and processing had the lowest levels of agreement (range 64-86 percent). Providers were mostly in agreement that claims were processed according to the contract (86 percent), that inquiries were answered promptly (79 percent), and that providers received sufficient assistance with claims processing (78 percent). However, a number of respondents expressed disagreement with claims being processed in a timely manner (36 percent) and the processing of claims without errors (36 percent).

Figure 6. Provider Satisfaction with CMSN Claims Payment and Processing

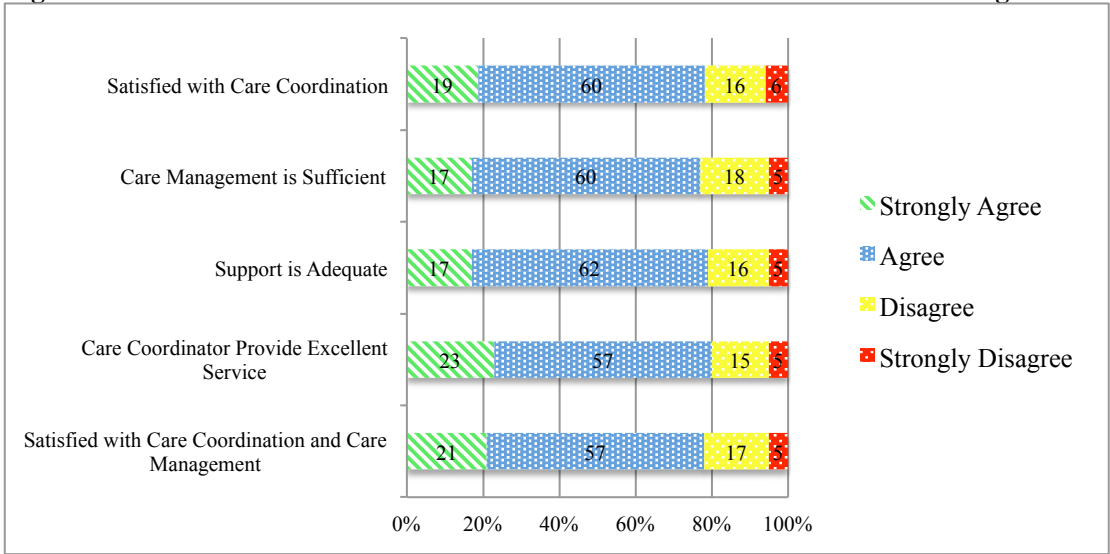


2.3 CMSN Care Coordination and Care Management

The final line of inquiry centered on care coordination and care management. Providers were asked to provide their level of satisfaction with care coordination services as well as the management of care provided by CMSN.

Providers noted a high level of agreement in regards to their satisfaction with care coordination and care management (range: 77-80 percent). Providers strongly agreed that care coordinators provide excellent service (23 percent), and strongly agreed that they are satisfied with care coordination overall (19 percent). The level of disagreement for all items was very similar (range 20-23 percent). The highest level of disagreement was whether care management for patients offered from CMSN is sufficient (23 percent).

Figure 7. Provider Satisfaction with CMSN Care Coordination and Care Management



3. Summary and Recommendations

This survey was conducted as a requirement for the Agency for Health Care Administration (AHCA). All health care providers with valid contact information were included in the sample. As a means of providing respondents with multiple methods by which to respond, providers were given the choice of completing the survey using a unique link, sending it back in the mail, or faxing the completed document. Regardless of the methods that were provided, the response rate was just eight percent. This is lower than response rates in 2009 (22 percent), 2010 (11 percent), or 2013 (19 percent). Moving forward, other methods should be considered to improve the response rate. Fewer surveys could be mailed out to a randomized group with multiple reminders (i.e. postcard, additional survey packet).

As a whole, providers are satisfied with their experiences with the Integrated Care System (ICS) and the Children's Medical Services Network (CMSN). Agreement levels for all survey items exceeded 60 percent indicating high levels of satisfaction with both the ICS and CMSN. The greatest level of disagreement noted by providers was in regards to claims being processed in a timely manner (36 percent) and without errors (36 percent), followed by the helpfulness of complaint resolution representatives (31 percent). Dissatisfaction with claims processing is consistent with findings from other studies regarding Medicaid reimbursement where reimbursement times were associated with lower physician participation in Medicaid.²

In summary, while response rates were low, providers showed a strong level of satisfaction with the care from both the ICS and CMSN. In order to improve overall satisfaction, attention should be focused on claims payment and processing as well as the complaint resolution process.

² Cunningham, P. J., & O'Malley, A. S. (2009). Do reimbursement delays discourage Medicaid participation by physicians?. *Health Affairs*, 28(1), w17-w28.

Abbreviations

CMSN – Children’s Medical Services Network

CSHCN – Children with Special Health Care Needs

SFCCN – South Florida Community Care Network

AHCA – Agency for Health Care Administration

REDCap - Research Electronic Data Capture

ICS – Integrated Care System

ICHP – Institute for Child Health Policy