

## Survey Says: Listening to Providers

To provide quality services to beneficiaries, ValueOptions recognizes that it is imperative to maintain cooperative relationships with its participating providers.

“We strongly believe in the concept of ‘partnership’ with those who deliver services to ValueOptions’ members,” says Deb Adler, executive vice president of National Network Operations for ValueOptions.

One way we gauge the health of these partnerships is through the ValueOptions Provider Satisfaction Survey conducted each year by Fact Finders Inc., an independent opinion research firm specializing in health care and health care policy. The research is designed and conducted to provide representative and reliable measurement of providers’ experiences with, attitudes toward and suggestions for ValueOptions.

Because ValueOptions’ members access providers through individual service centers throughout the United States, the 2003 interviews included a representative sample of providers who serve the geographic area for each of the service centers. The questionnaire incorporated questions about each aspect of ValueOptions’ services that providers may consider when deciding to join or remain in the ValueOptions provider network. It measured key indicators of satisfaction with ValueOptions, such as:

- **Satisfaction with ValueOptions:** The majority (89 percent) of providers are satisfied with ValueOptions.
- **Customer service**, in such important areas as:
  - **Helpfulness.** More than half of the providers think the staff at the ValueOptions toll-free telephone number are very helpful, and few (3 percent) of the providers think the staff are not helpful.
  - **Confidence in ValueOptions staff.** Most (87 percent) providers are confident that the ValueOptions staff will follow through on resolving their question or problem.
- **Claims.** Almost three-quarters of the providers rate claims service positively.
- **Certification of care.** Measures include:
  - **Ease of certification.** Almost all of the providers seek certification for outpatient care, and most (81 percent) think the ValueOptions procedure to certify this care is easy. Fewer than one in 10 providers seek certification for inpatient care, and more than half (59 percent) think it is easy to certify inpatient care.
  - **Care management.** About nine in 10 providers think the ValueOptions clinical care managers are consistent in their application of clinical criteria (88 percent) and generally make coverage decisions that are appropriate for the clinical condition of their clients (89 percent).
- **Credentialing.** Ninety-three (93) percent of the providers and 96 percent of the administrative office staff report that the credentialing process is timely. This is a 7 percent improvement over results from last year. The improvement is attributed to changes made to streamline the credentialing process for providers.

## PUTTING PEOPLE FIRST

For any areas that don't meet established quality performance standards, the provider relations department works with other appropriate departments and functional areas to recommend an update to the existing Provider Survey Performance Improvement Plan. Each service center is responsible for reviewing service center-specific data and formulating performance improvement plans as appropriate. These plans are presented to and monitored by the respective service center Quality Management Committee.

Perhaps the ultimate testament to provider sentiments: Eight in 10 providers have been in the ValueOptions network for four or more years.