



September 21, 2022

# Provider Experience Survey Results

The 2022 Provider Survey was distributed to understand the value and usability of provider data such as EHR, pharmacy and population health. The survey also collected information regarding the use of website materials, the provider portal and newsletter usability and content. This data will be utilized across all of our Commercial, Exchange, Medicare, Medicaid and CHP+ lines of business to gauge the perception of providers as it relates to data sharing, website resources and overall satisfaction. The data was analyzed to highlight strengths and identify opportunities for improvement.

# You can view a detailed report of these results in the PDF attached.



Provider Survey 2022 Line(s) of Business: Commercial, Exchange, Medicare, Medicaid, CHP+ Survey Period: June 27, 2022 – July 18, 2022 Date: August 19, 2022 Prepared By: Provider Relations and Contracting

## Purpose

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## Method and Methodology

In order meet NCQA requirements Q13A and Q14A, a survey was sent to over 1400 contracted Providers from DHHA, Children's, SCL and UCHealth. The *Survey Monkey* based questionnaire was sent to Provider's professional emails and left open for 3 weeks from June 27, 2022-July 18, 2022. This enhanced survey is a collaborative effort between DHMP Provider Relations, Case Management and Utilization Management. The Provider Relations questions focused on Provider satisfaction with the DHMP network. The CM/UM teams contributed questions to measure satisfaction with data sharing capabilities.

## **Performance Goal**

The NCQA goal was to disseminate a Provider Survey to network providers to understand areas of strength and areas of opportunity as it relates to EHR, population health, pharmacy data sharing as well as claims processing, website resource usage and access to care standards.

### Data

In June of 2022, survey notification was sent to DHHA, SCL, UCH and Children's Hospital Providers. **Of the 1400+ Providers sent the survey; 8 surveys were completed.** Please see below table for a list of the surveys 21 questions.

Question
1. Which Practitioner Group are you affiliated with?
2. What type of setting do you work in?
3.Based on the setting that you work in, what Electronic Health Record do you use?
4. How satisfied are you with the sharing of provider-generated (e.g., medical visit records) data between Denver Health's EHR and your practice?
5. How satisfied are you with the sharing of patient-generated (e.g., wellness, fitness, demographic, and socioeconomic) data between Denver Health's
EHR and your practice?
6. How satisfied are you with the sharing pharmacy-generated data (e.g., prescription information) between Denver Health and your practice?
7.How satisfied are you with the sharing of key data (i.e., lab results, medications, clinical notes) between Denver Health and your practice when a
patient is transferred during an episode of care?
8. How satisfied are you with the sharing of data related to prior authorizations from Denver Health Medical Plan?
9. How satisfied are you with the sharing of population health data from Denver Health Medical Plan for shared patient populations?
10.For items 4-9, what is your biggest challenge regarding data sharing?
11. How often do you reference the Provider Forms and Material posted on the Denver Health Medical Plan website?
12. How often do you use the Provider Manual/Billing Guide?
13. Does the Provider Newsletter demonstrate quality content published?
14. Are you aware of the Provider Portal?
15. How often are you meeting the Access to Care Standards by Line of Business as a Provider?
16. How would you rate your claims being processed timely and payment received on a scale of 0-10? (0= never and 10=always)
17. How often are your claims issues resolved without issues reoccurring?
18. How would you rate the quality of DHMP Providers in Network? (Specialists/Ancillary)
19. Would you recommend DHMP to patients?
20. Would you recommend DHMP to other physicians?



#### 21. What is your overall satisfaction with DHMP?

# Analysis

Due to low survey participation responses, it is challenging to determine deficiencies per the Provider Survey to support necessary enhancement. Most responses were from DHHA staff (50% of responses) in the outpatient and behavioral health setting (33.3% from UCH, 16.67% from Children's and 0% from SCL.)

<u>Data Sharing</u>: Satisfaction with the EHR system is low at 50% "satisfied" and 50% "unsatisfied/neutral." Respondent satisfaction with data sharing (population health and pharmacy data) is also low at 75% responses say "neutral" and "unsatisfied." (50% of the responses for pharmacy and pop health data sharing are neutral. Perhaps the "neutral" respondents do not know where/how to access population health and /or pharmacy data data.) Respondent satisfaction with data sharing (lab results, medications, clinical notes) and prior authorization data is high at 62.5% and 75 % of responses received. The largest challenge regarding data sharing is that the "data is hard to obtain."

<u>Website Resources</u>: Providers do not seem to reference the website materials and provider manual/billing guide frequently, with 75% saying "not often" or "never." The Provider Newsletter is well regarded with 75% of respondents saying it demonstrates quality content. Most (75%) respondents are not aware of the Provider Portal. Access to Care standards are met 50% of the time.

<u>Claims</u>: There seems to be concerns regarding claims processing correctly, timely and that issues are resolved without reoccurrence with 75% of respondents stating that claims issues are sometimes to rarely resolved without reoccurrence.

<u>Overall Observations</u>: 80% believe that DHMP Providers provide quality care and would recommend to patients/other physicians. The responded also expressed 80% very satisfied to satisfaction with DHMP.

# Barriers

The following barriers were identified:

- Low return rate of the survey.
- Respondents skipped questions.
- Freeform type areas were not populated/ Additional explanation was not provided for those "unsatisfied" responses.
- Understanding who received the survey and is that who needs to fill it out. How do we get it to the correct person?

## Interventions

- During the initial outreach to Providers regarding the survey, share information on the history, purpose and how the data will be used for process improvements
- Mid timeline reminders to complete the survey and reiterate the value add to the Providers.
- Send a provider newsletter to pre-market the survey
- Send a direct letter from DHMP Med Director to pre-market the survey
- Create incentives for responses through gift card distribution
- Messaging on the provider portal link or pop-up regarding completion of the survey



• Collaboration with Claims team to explore claims responses and understand root cause.

# **Opportunities for Improvement**

Based on the aforementioned barriers, the following opportunities for improvement have been identified:

- Improve pharmacy and population health data sharing with contracted providers. We will consider including the DHMP Pharmacy and/the Population Health teams in future discussions.
- Improve the use of Cornerstone Training Platform to assign Providers the survey for completion. Discussions and research will be performed by UM and CM teams to understand if the Cornerstone training platform can be used for survey dissemination and tracking.

# **Regulatory References/Citations**

• 2022 National Committee for Quality Assurance (NCQA) Standards and Guidelines for the Accreditation of Health Plans, Q13A and Q14A