

# North Carolina Medicaid

## 2021 Provider Satisfaction Survey Results

May 2022



<b>Using This Report</b> . . . . .	1
<b>Methodology</b> . . . . .	2
Survey Milestones	
Sampling Frame	
Selection of Cases for Analysis	
Questionnaire	
Definition of Achievement Scores	
Definition of Top Box Scores and Hollow Bars	
Weighted Totals	
Statistical Testing	
Response Rates . . . . .	4
<b>Trend Analysis</b> . . . . .	5
<b>Single Items</b> . . . . .	6
LME/MCO staff are easily accessible for information, referrals, and scheduling of appointments . . . . .	7
LME/MCO staff are referring consumers whose clinical needs match the service(s) my practice/agency provides . . . . .	8
LME/MCO staff respond quickly to provider needs . . . . .	9
When I speak with LME-MCO staff about claims issues I am given consistent and accurate information . . . . .	10
LME-MCO's communications to its provider network are informative and helpful . . . . .	11
The LME-MCO Network Department keeps providers informed of changes that affect my local Provider Network . . . . .	12
The LME-MCO Network Department staff are knowledgeable and answer questions consistently and accurately . . . . .	13
The LME/MCO staff conduct fair and thorough investigations . . . . .	14
LME/MCO requests for corrective action plans and other supporting materials are fair and reasonable . . . . .	15
Trainings are informative and meet our needs as a provider/agency . . . . .	16
Denials for treatment and services are explained . . . . .	17
My agency is satisfied with the appeals process for denial, reduction, or suspension of service(s) . . . . .	18
The LME/MCO's website is a useful tool for helping my agency find the tools and materials needed to provide services . . . . .	19
I receive appropriate notice on the need to recredential. . . . .	20
The credentialing/recredentialing process occurs in a timely manner. . . . .	21
Provider Relations Credentialing Staff are friendly and knowledgeable. . . . .	22
Overall satisfaction with the LME/MCO . . . . .	23
<b>Responses by Question</b> . . . . .	24
<b>Appendix: Sample Web Questionnaire</b>	

## Using This Report

Results from the Provider Satisfaction Survey of North Carolina providers participating in the 1915(b)/(c) Medicaid Waiver program provides a tool for assessing how well the State and the health plans are meeting providers' expectations and needs. DataStat, Inc., conducted the survey on behalf of North Carolina Medicaid (NC Medicaid) and the Carolinas Center for Medical Excellence (CCME).

This report is designed to allow NC Medicaid and the health plans to identify key opportunities for improving providers' experiences. Provider responses to survey questions are summarized as achievement scores. Responses that indicate a positive experience are labeled as achievements, and an achievement score is computed as the proportion of responses qualifying as achievements. In general, somewhat positive responses are included with positive responses as achievements. For example, a provider response of "Strongly Agree" or "Agree" to the statement "LME/MCO staff respond quickly to provider needs" is considered an achievement, and the achievement score for this question is equal to the proportion of respondents who answered the question with "Strongly Agree" or "Agree". Because achievement scores for survey questions are computed as the proportion of providers who indicate a positive experience, the lower the achievement score, the greater the need for the health plan to improve.

The purpose of the survey is to assess provider perceptions of the six LME/MCOs in North Carolina. The results from this survey allow NC Medicaid to assess the LME/MCOs' ability in the following three areas:

1. Interacting with their network providers.
2. Providing training and support to their providers.
3. Providing Medicaid Waiver materials to help their providers strengthen their practice.

Statistical significance tests are run comparing NC Provider overall scores with each health plan score. Comparisons are presented in the *Single Items* section of the report.

## Methodology

The survey drew as potential respondents active providers participating in the 1915(b)/(c) Medicaid Waiver program. Respondents were surveyed in English.

An active provider was defined as a Medicaid Waiver provider that had at least five 1915(b)/(c) Waiver encounters between July 1, 2021 and December 31, 2021. The survey was administered over a six-week period using a web survey protocol. Reminder calls to any non-responding provider offices were also used to encourage providers to participate. Email requests for non-responders to complete the survey went out twice a week during the field period. The reminder calls to non-responding providers' offices began during the third week of the field period and continued until the end of data collection.

### Survey Milestones

1	First email request:	February 25, 2022
2	Follow-up email requests began:	March 4, 2022
3	Reminder calls began:	March 18, 2022
4	Data collection terminated:	April 8, 2022

### Sampling Frame

The six participating health plans contributed a total of 5,974 provider records for inclusion in the survey. A provider record was considered ineligible for the survey if the provider's email address was missing. Duplicate records sharing an email address and provider name were removed, and duplicate email address records were limited to five providers per address, in order to reduce respondent burden and message rejection. After these checks, a final total of 3,934 provider records were included in the survey.

### Selection of Cases for Analysis

Surveys were considered complete if a respondent provided a valid response to at least one question in the survey. Completed usable surveys were obtained from 1,623 Medicaid Waiver providers, and the overall usable response rate was 43.6%.

### Questionnaire

The instrument selected for the survey was provided by NC Medicaid and included 27 questions. A copy of the web survey is included in the appendix of this report.

### Definition of Achievement Scores

Provider responses to survey questions are summarized as achievement scores. Responses that indicate a positive experience are labeled as achievements, and an achievement score is computed equal to the proportion of responses qualifying as achievements. In general, somewhat positive responses are included with positive responses as achievements. For example, a provider response of "Strongly Agree" or "Agree" to the statement "LME/MCO staff respond quickly to provider needs" is considered an achievement, and responses of "Extremely Satisfied" or "Satisfied" to the overall satisfaction questions are also considered achievements. Because achievement scores for survey questions are computed as the proportion of providers who indicate a positive experience, the lower the achievement score, the greater the need for the health plan to improve. See the *Responses by Question* section for assignment of achievement responses for each question.

## Definition of Top Box Scores and Hollow Bars

Top Box scoring means only responses that indicate the most positive experience are labeled as achievements. For example a response of "Strongly Agree" to the statement "LME/MCO staff respond quickly to provider needs" is considered an achievement. A response of "Extremely Satisfied" to the overall satisfaction questions is also considered an achievement. Top Box scores are presented as alternate scores throughout this report and are visually displayed in the *Single Items* section as hollow bars.

## Weighted Totals

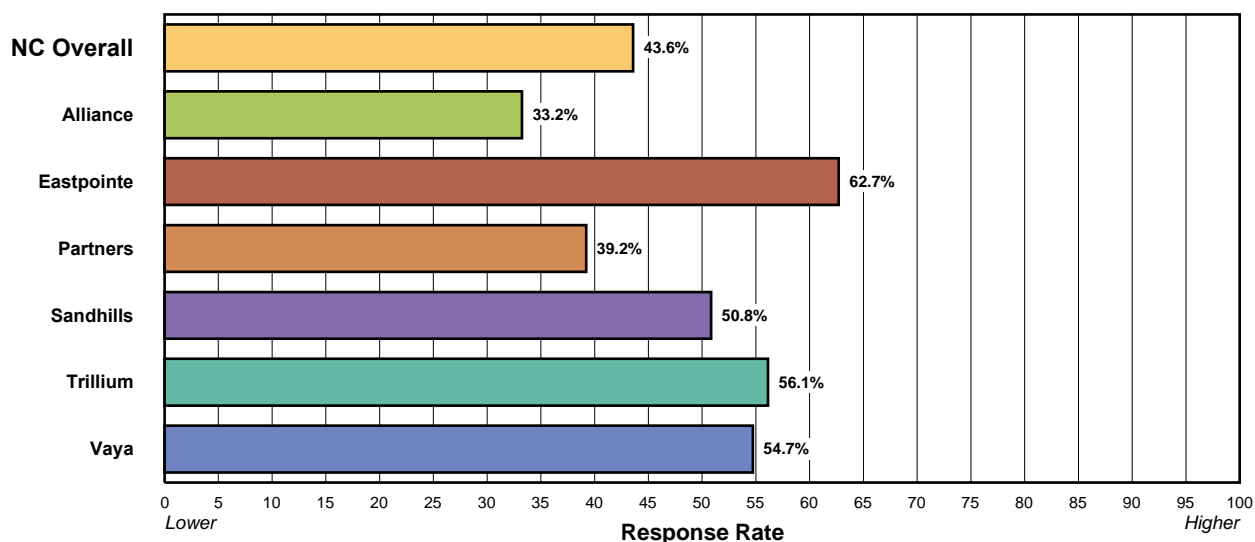
The NC Overall scores presented throughout this report and used for all significance testing are weighted. Weighting for the survey adjusts the NC Overall scores such that each of the six plans is represented in equal proportions in the final set of responses. In the *Responses by Question* section, response frequencies for the NC Overall are weighted data. Although the number of weighted cases for each response option in that section has been scaled to represent as closely as possible the unweighted number of responses, rounding rules and skip patterns may affect some of the totals. The reader is advised to consider the number totals as approximate and to focus on the percentages, which are the better representation of response frequency.

## Statistical Testing

Statistically significant differences between scores were determined using binomial and t-tests. If the test was valid, a significance level of .05 or less was considered statistically significant and "↑" or "↓" was placed at the end/top of the appropriate bar. Tests were considered valid when the number of cases used to compute each score was 30 or greater, and there was non-zero variation in the tested groups.

## Response Rates

### Variation Across Plans



	NC Overall	Alliance	Eastpointe	Partners	Sandhills	Trillium	Vaya
Initial Email Invitation - sent	3934	1466	251	886	506	442	383
†Email bounce back with non-delivery message	209	103	7	52	26	9	12
*Completed usable surveys	1623	453	153	327	244	243	203
<b>Response Rate</b>	<b>43.6%</b>	<b>33.2%</b>	<b>62.7%</b>	<b>39.2%</b>	<b>50.8%</b>	<b>56.1%</b>	<b>54.7%</b>

\*Included in response rate numerator

†Excluded from response rate denominator

Note: *Response Rate = Completed usable Surveys / Total Eligible Cases*

The six participating health plans contributed a total of 5,974 provider records for inclusion in the survey. A provider record was considered ineligible for the survey if the provider's email address was missing. Duplicate records sharing an email address and provider name were removed, and duplicate email address records were limited to five providers per address, in order to reduce respondent burden and message rejection. After these checks, a final total of 3,934 provider records were included in the survey.

The survey was administered over a six-week period using a web survey protocol. Reminder calls to any non-responding provider offices were also used to encourage providers to participate. Email requests for non-responders to complete the survey went out twice a week during the field period. The reminder calls to non-responding providers offices began during the third week of the field period and continued until the end of data collection.

## Trend Analysis - 2021 vs. 2020

The table below provides a snapshot of the items with the greatest point change, positive or negative, since 2020. All performance-related items in the questionnaire that were trendable were listed in descending order of point change, and testing was conducted to determine which trends were statistically significant. Shown below are the ten items at the top of the list and the ten items at the bottom, with their 2020 and 2021 scores and results of significance testing.

In the table presented below, differences over time may be readily apparent. However, where these differences are not statistically significant they should be evaluated accordingly.

Question	NC Provider 2021 Score	NC Provider 2020 Score	Point Change
Q7. LME/MCO staff are referring consumers whose clinical needs match the service(s) my practice/agency provides	85.2%	81.1%	+ 4.0 ▲
Q19. The LME/MCO's website is a useful tool for helping my agency find the tools and materials needed to provide services	87.4%	86.6%	+ 0.8
Q23. Overall satisfaction with the LME/MCO	92.0%	91.3%	+ 0.7
Q14. LME/MCO requests for corrective action plans and other supporting materials are fair and reasonable	93.2%	93.3%	- 0.1
Q13. The LME/MCO staff conduct fair and thorough investigations	92.2%	92.5%	- 0.4
Q10. LME-MCO's communications to its provider network are informative and helpful	91.2%	92.0%	- 0.9
Q22. Provider Relations Credentialing Staff are friendly and knowledgeable.	95.0%	96.0%	- 1.1
Q15. Trainings are informative and meet our needs as a provider/agency	90.2%	91.4%	- 1.2
Q6. LME/MCO staff are easily accessible for information, referrals, and scheduling of appointments	86.9%	88.2%	- 1.3
Q18. My agency is satisfied with the appeals process for denial, reduction, or suspension of service(s)	85.7%	87.1%	- 1.4
Q17. Denials for treatment and services are explained	86.4%	88.0%	- 1.7
Q20. I receive appropriate notice on the need to recredential.	93.0%	94.7%	- 1.7 ▼
Q11. The LME-MCO Network Department keeps providers informed of changes that affect my local Provider Network	90.4%	92.7%	- 2.3 ▼
Q12. The LME-MCO Network Department staff are knowledgeable and answer questions consistently and accurately	86.3%	88.9%	- 2.6 ▼
Q9. When I speak with LME-MCO staff about claims issues I am given consistent and accurate information	85.7%	88.6%	- 3.0 ▼
Q8. LME/MCO staff respond quickly to provider needs	82.0%	86.7%	- 4.7 ▼
Q21. The credentialing/recredentialing process occurs in a timely manner.	85.3%	90.4%	- 5.0 ▼

Better

Worse

▲ ▼ Statistically significantly higher/lower than 2020 score.

---

## Single Items

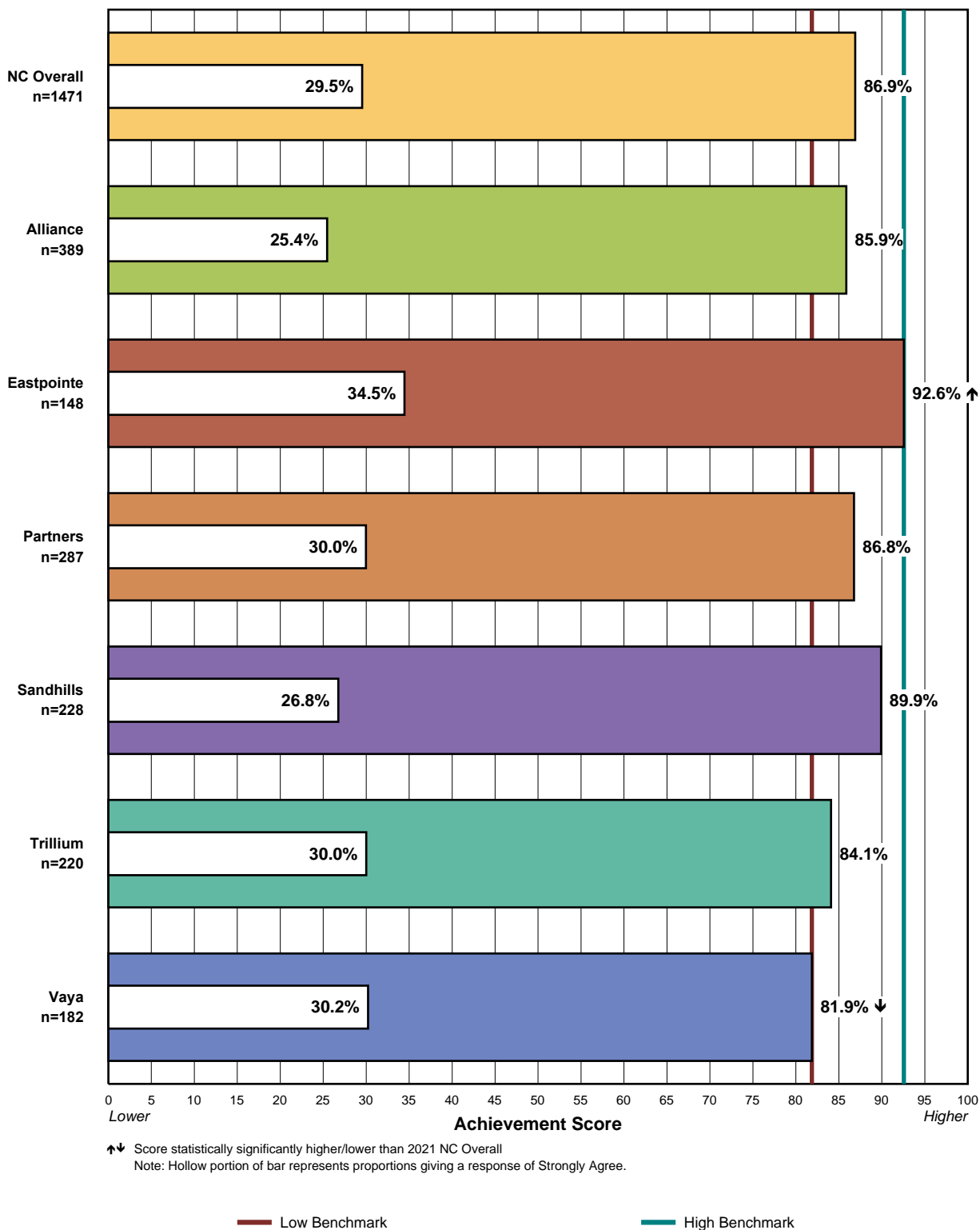
Each achievement-related question from the survey is presented here. The achievement scores presented on the following pages reflect responses of "Strongly Agree" or "Agree" to the questions, except for Q23. For Q23 (Overall Satisfaction with LME/MCO) "Extremely Satisfied" or "Satisfied" are considered achievements. Alternate top box scoring is presented when applicable as hollow bars.

The weighted NC Overall score is compared to the each plan's score. Statistical testing is run between the plan score data and the NC Overall data, with an arrow beside the bar if applicable. For full detail of response options for each question and which responses qualify as achievements, please refer to the *Responses by Question* section.



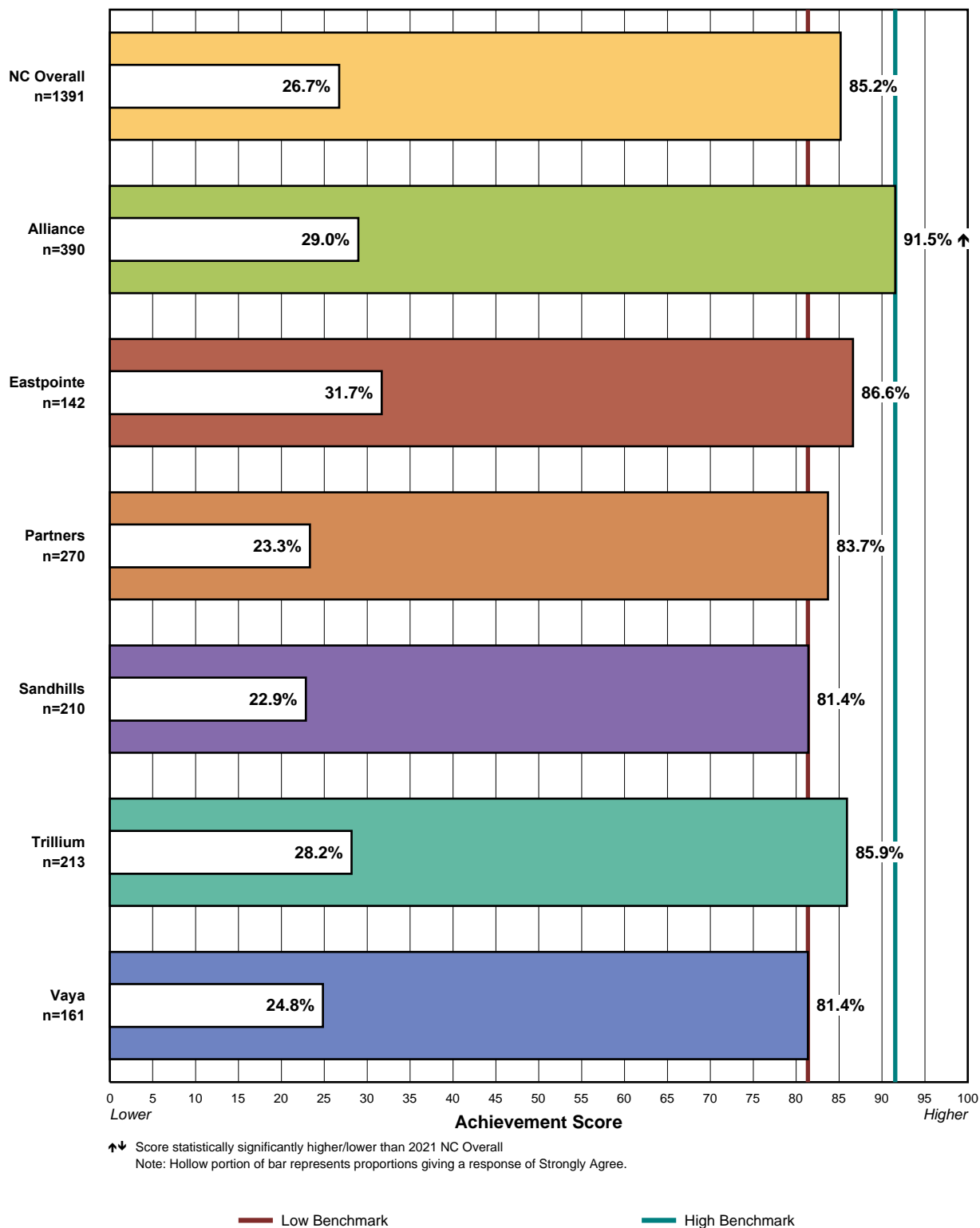
## Single Items

### Q6. LME/MCO staff are easily accessible for information, referrals, and scheduling of appointments



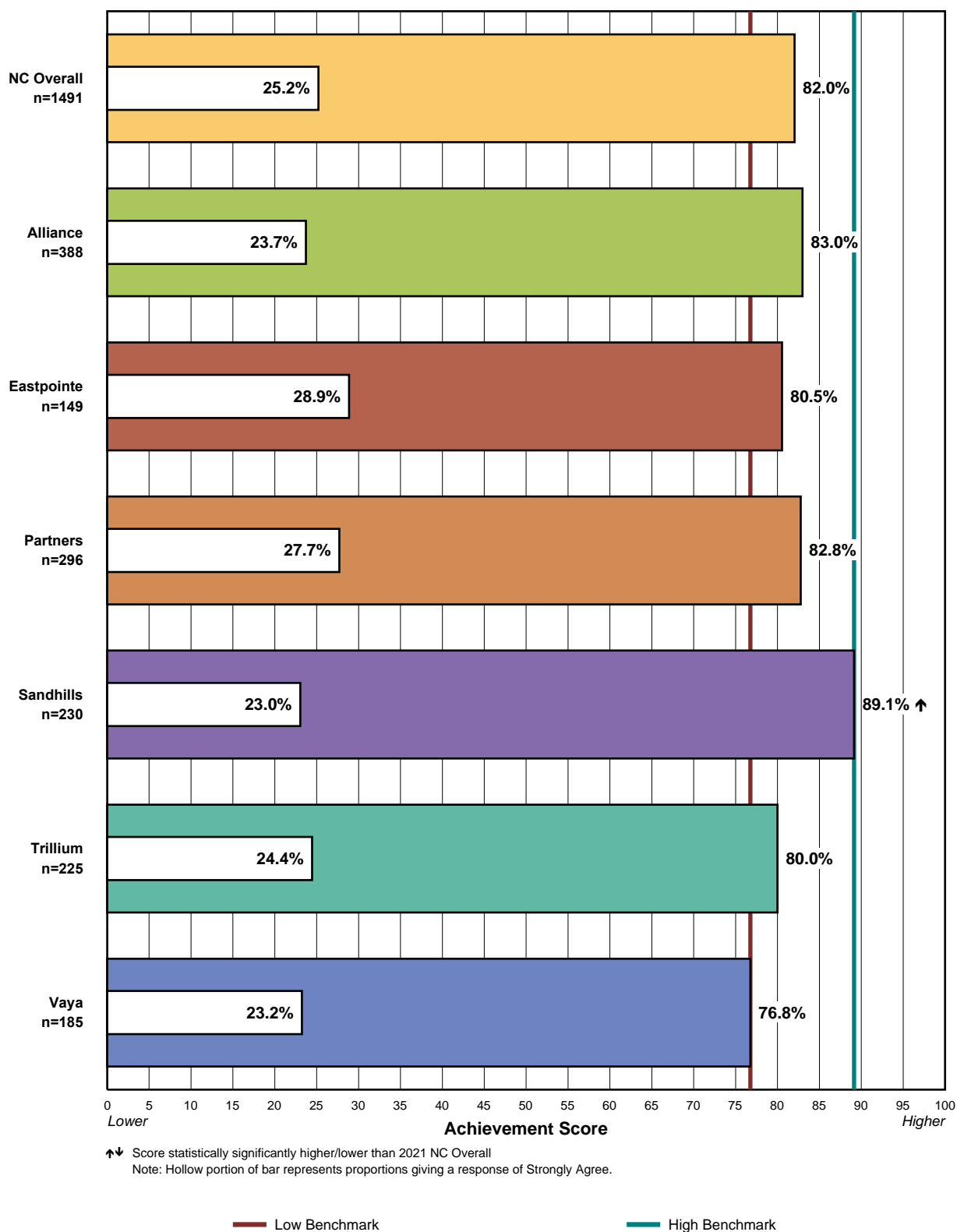
## Single Items

### Q7. LME/MCO staff are referring consumers whose clinical needs match the service(s) my practice/agency provides



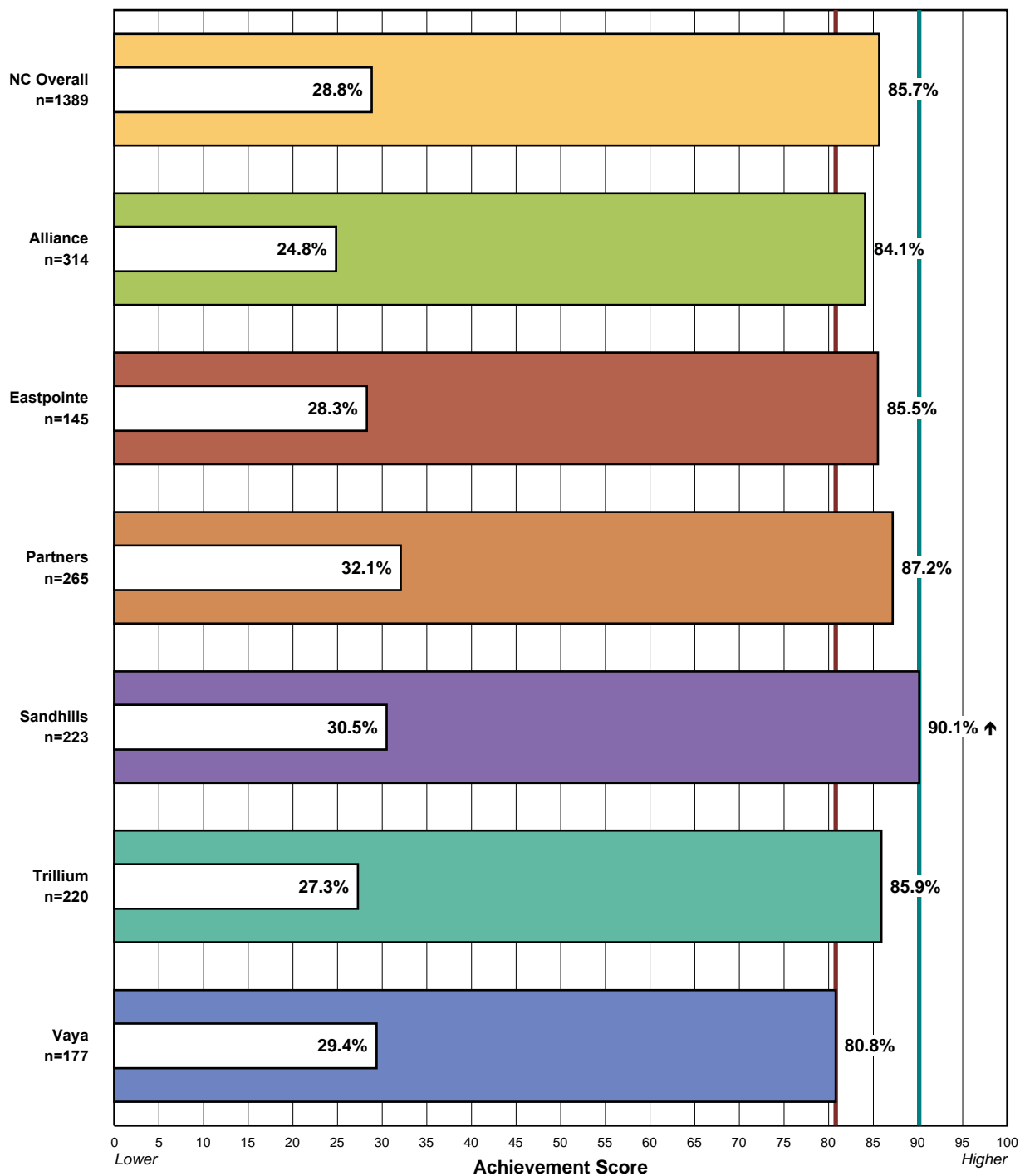
## Single Items

## Q8. LME/MCO staff respond quickly to provider needs



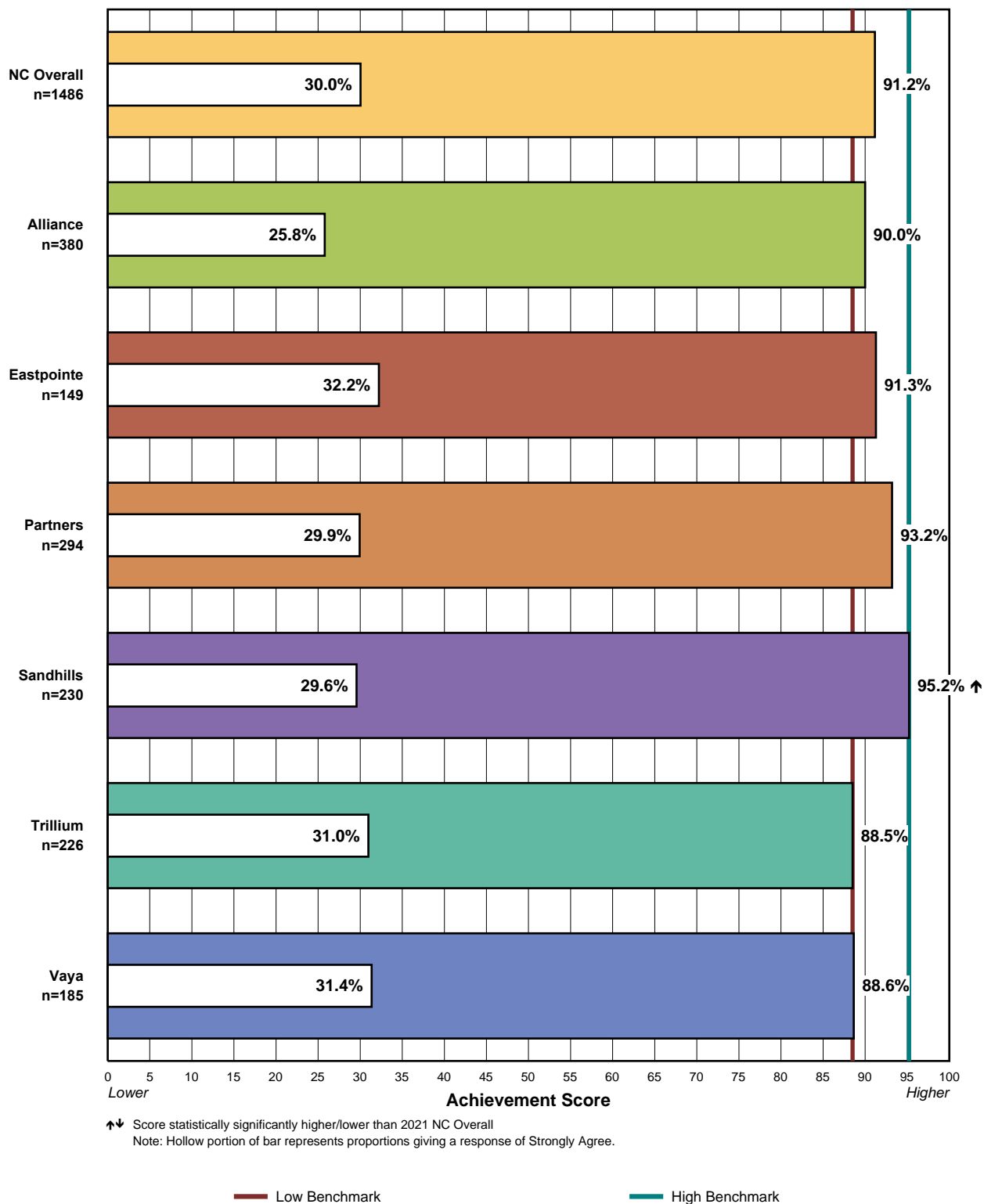
## Single Items

## Q9. When I speak with LME-MCO staff about claims issues I am given consistent and accurate information



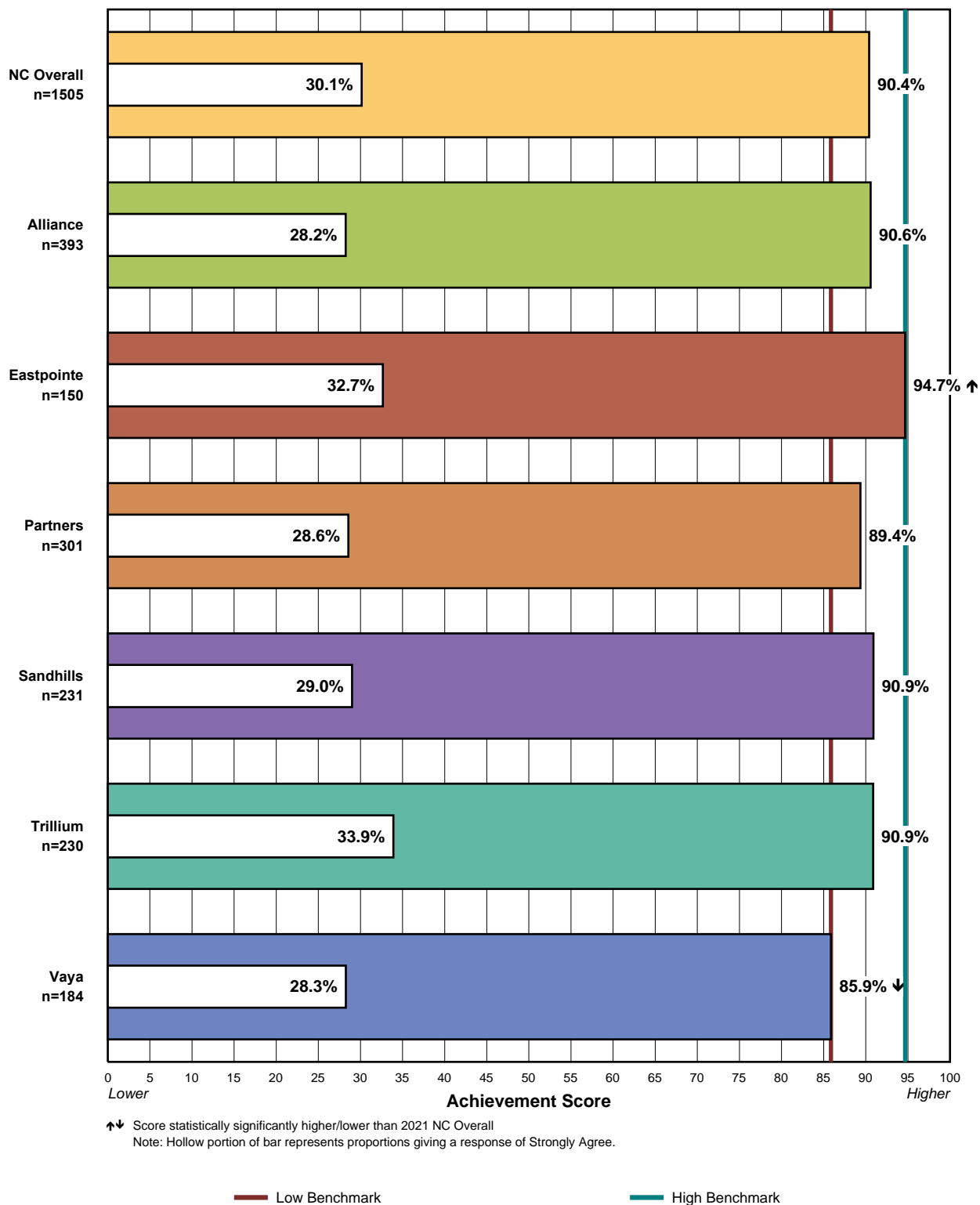
## Single Items

## Q10. LME-MCO's communications to its provider network are informative and helpful



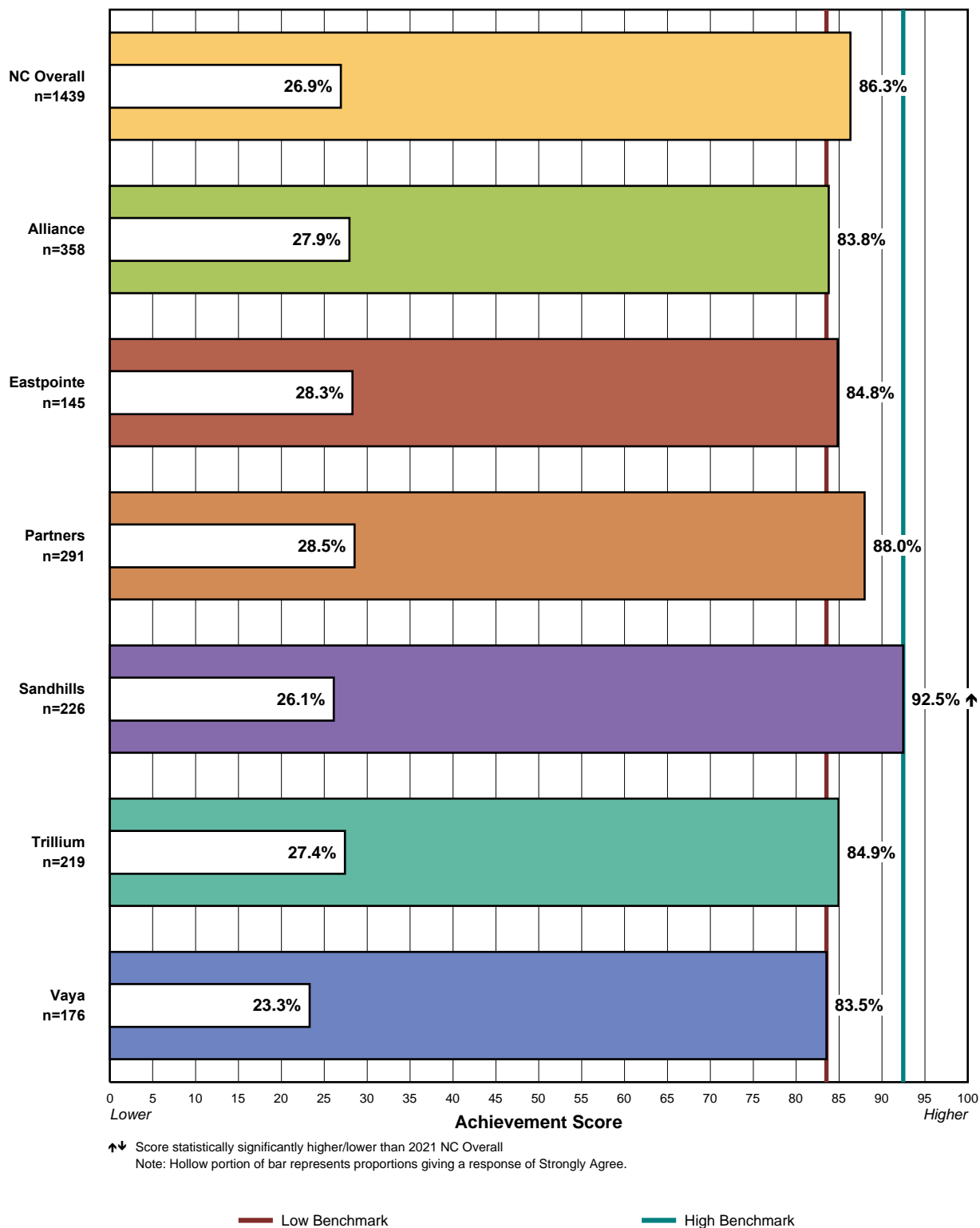
## Single Items

# Q11. The LME-MCO Network Department keeps providers informed of changes that affect my local Provider Network



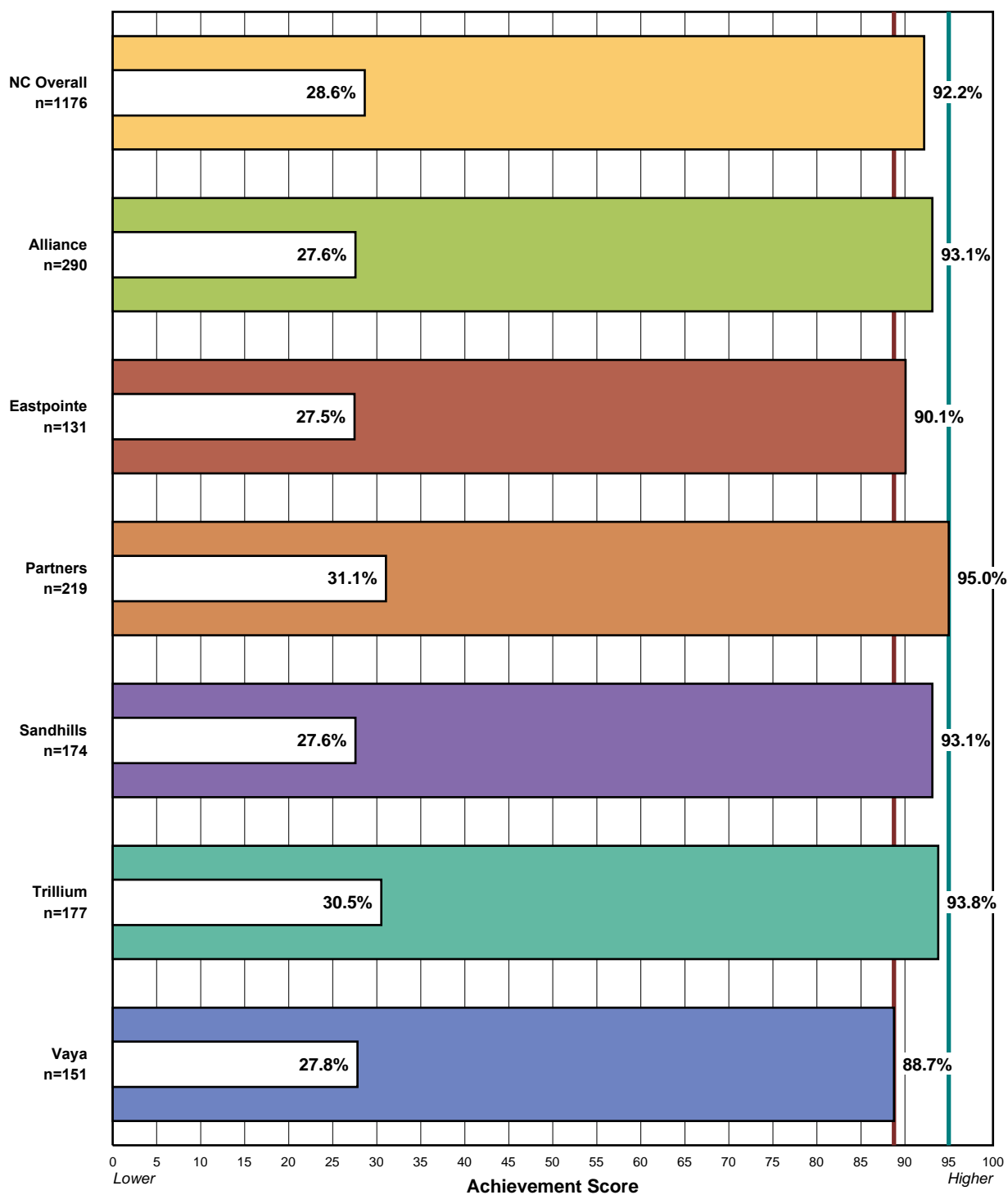
## Single Items

## Q12. The LME-MCO Network Department staff are knowledgeable and answer questions consistently and accurately



## Single Items

## Q13. The LME/MCO staff conduct fair and thorough investigations



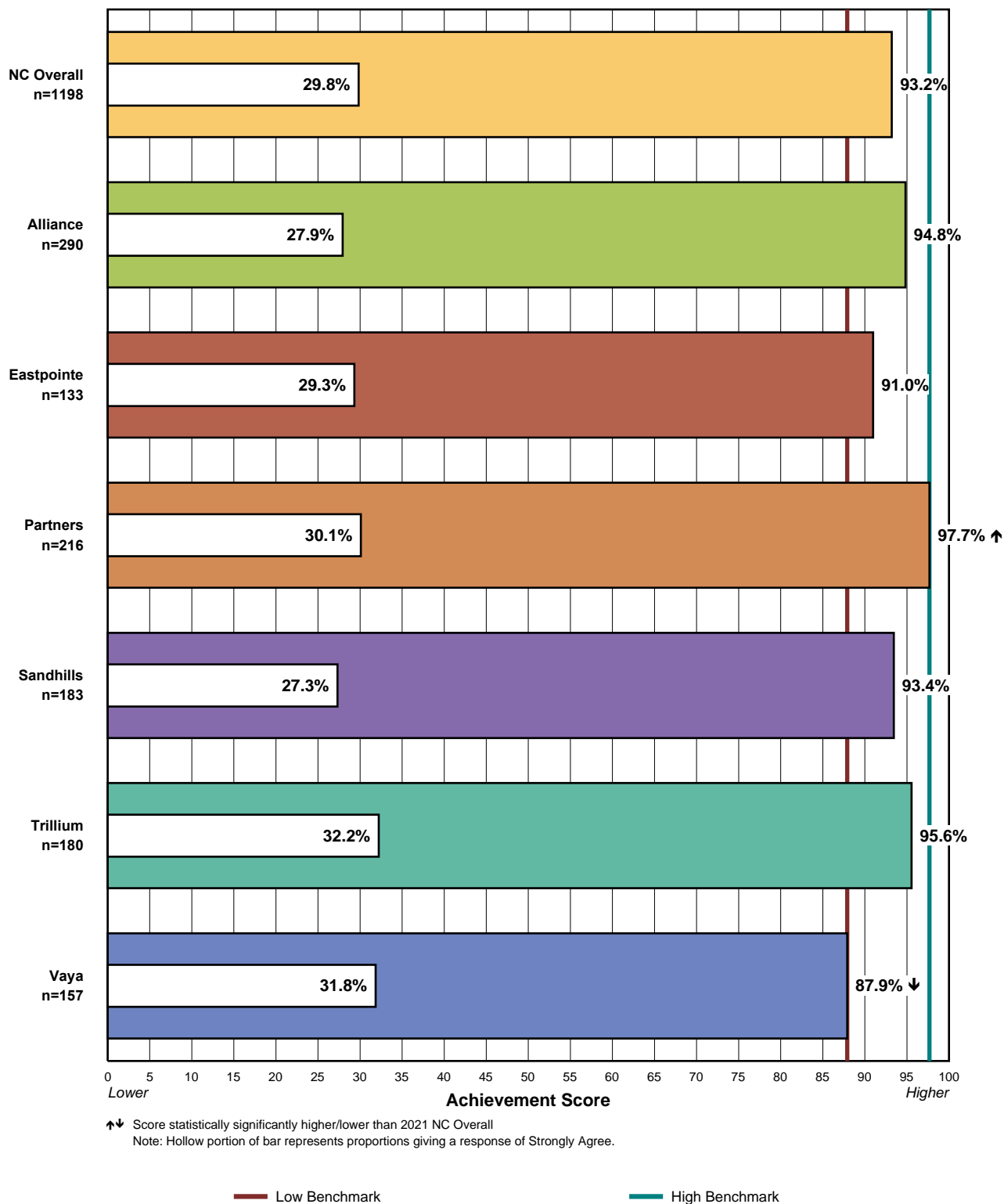
— Low Benchmark

— High Benchmark



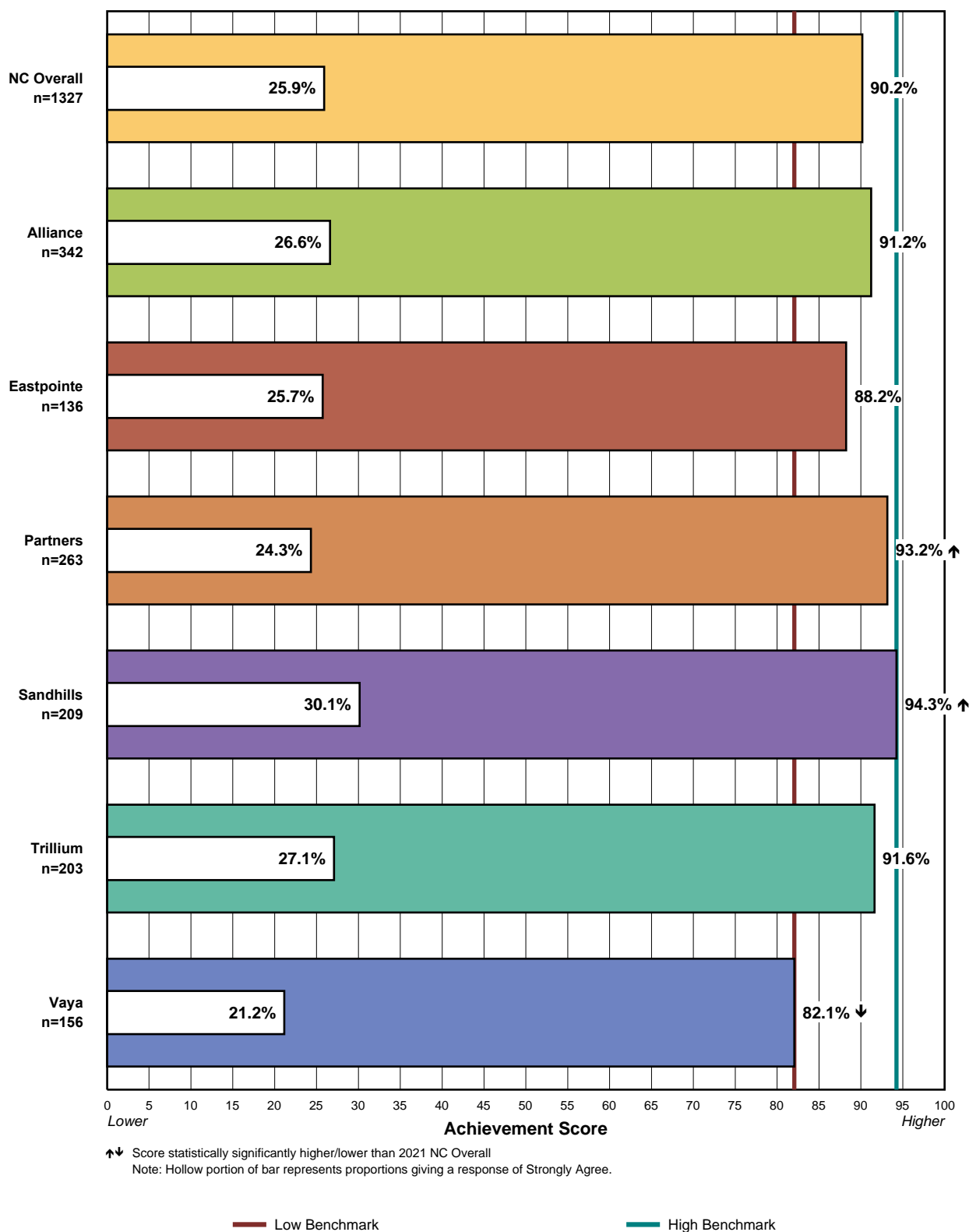
## Single Items

## Q14. LME/MCO requests for corrective action plans and other supporting materials are fair and reasonable



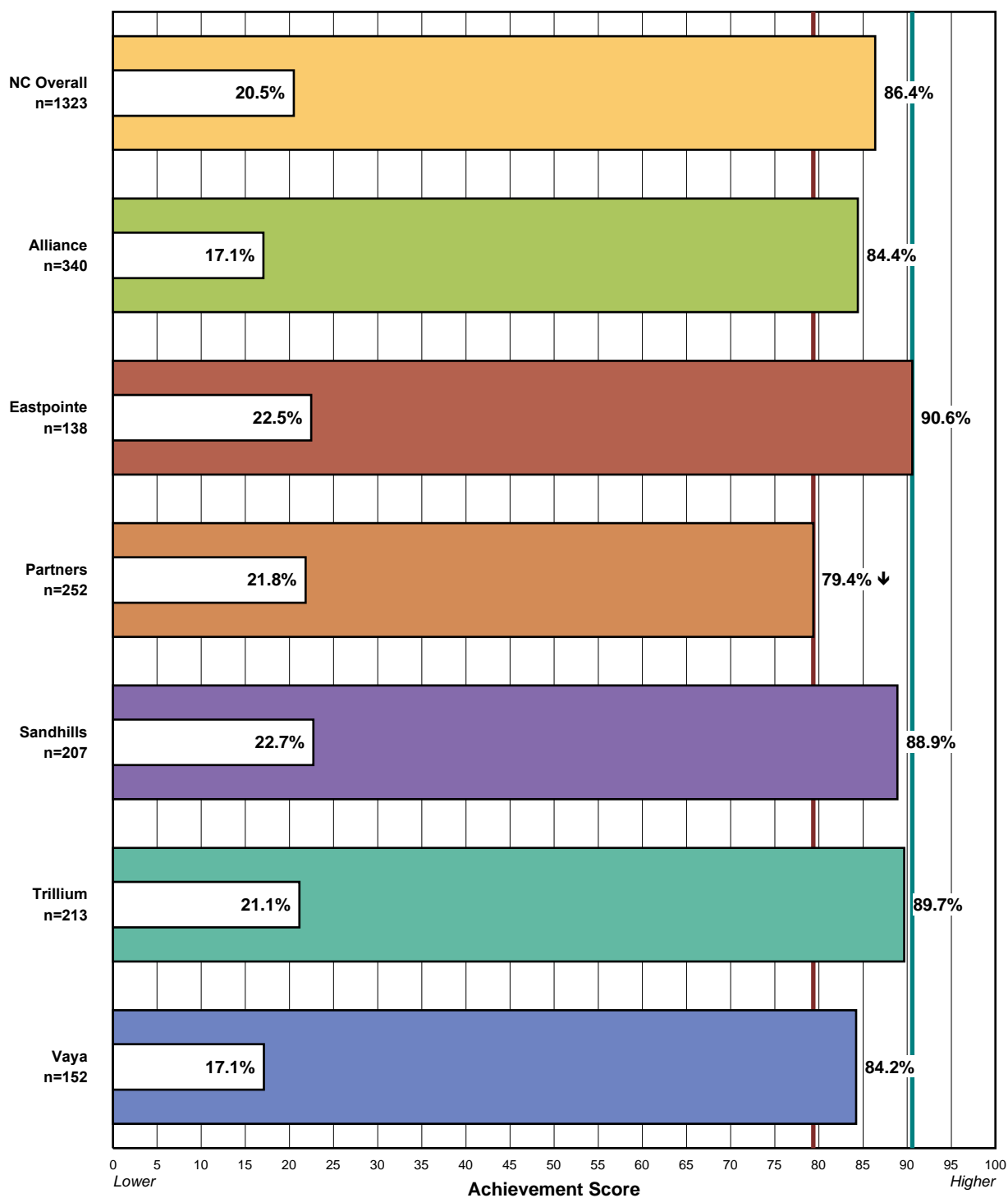
## Single Items

## Q15. Trainings are informative and meet our needs as a provider/agency



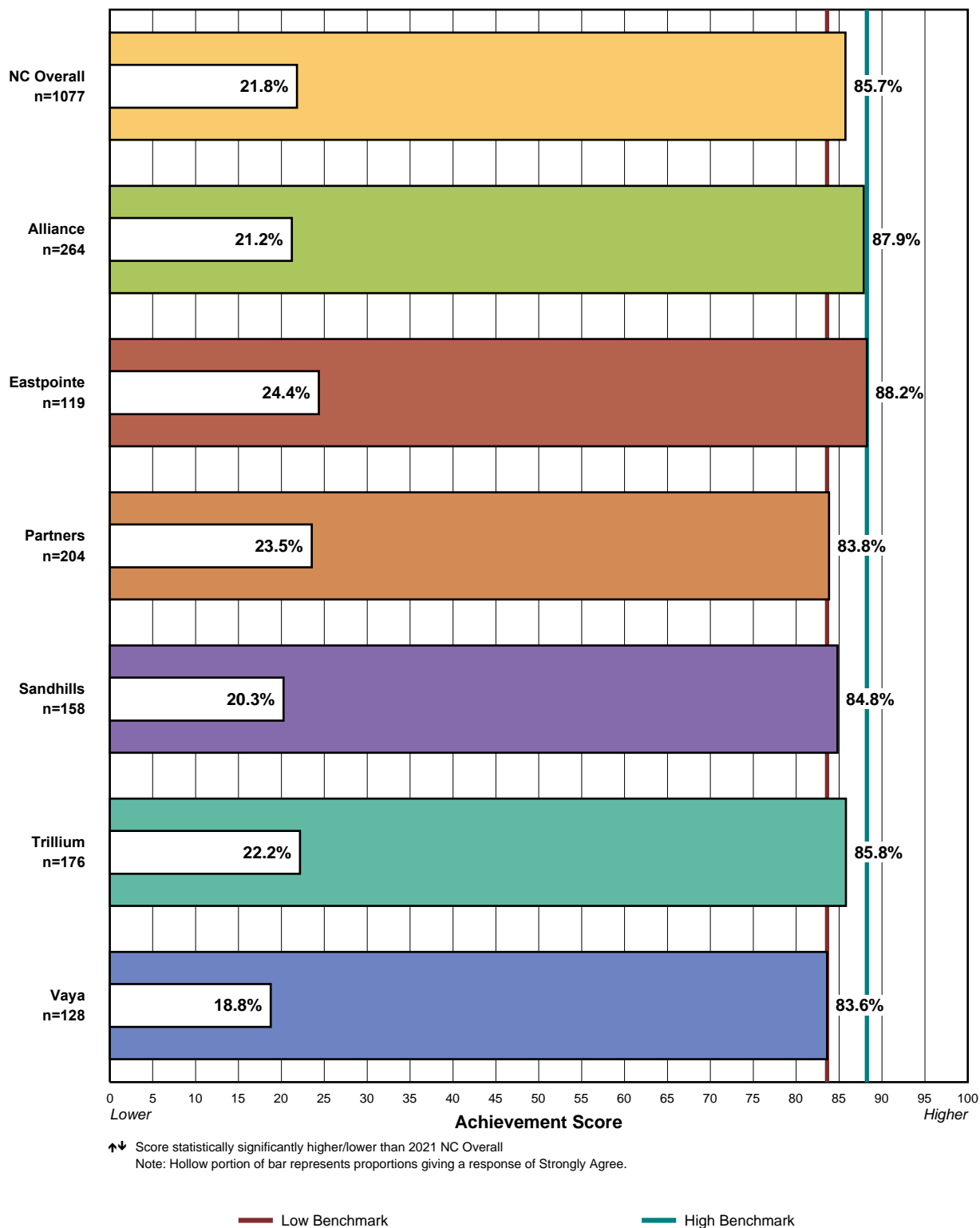
## Single Items

## Q17. Denials for treatment and services are explained



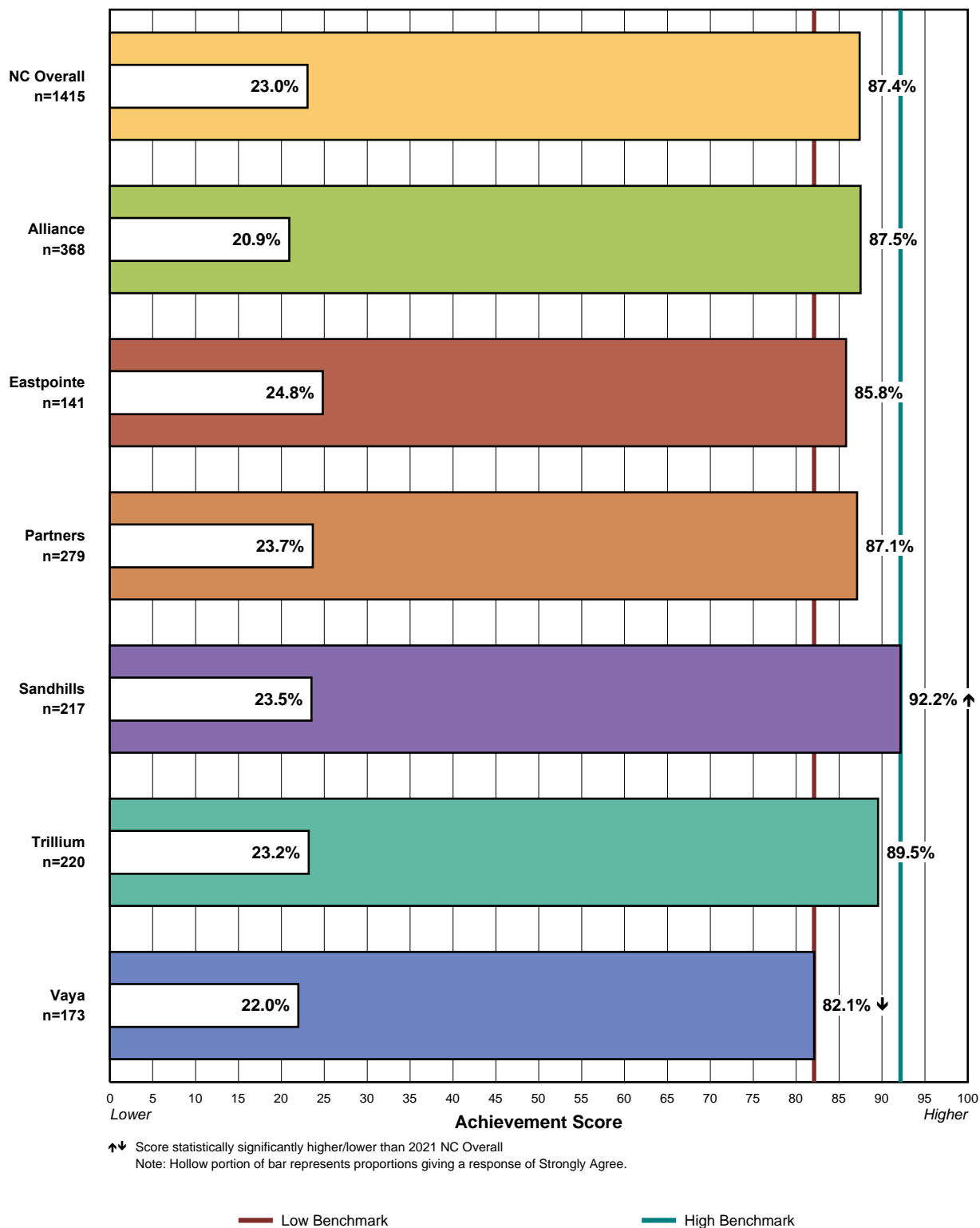
## Single Items

## Q18. My agency is satisfied with the appeals process for denial, reduction, or suspension of service(s)



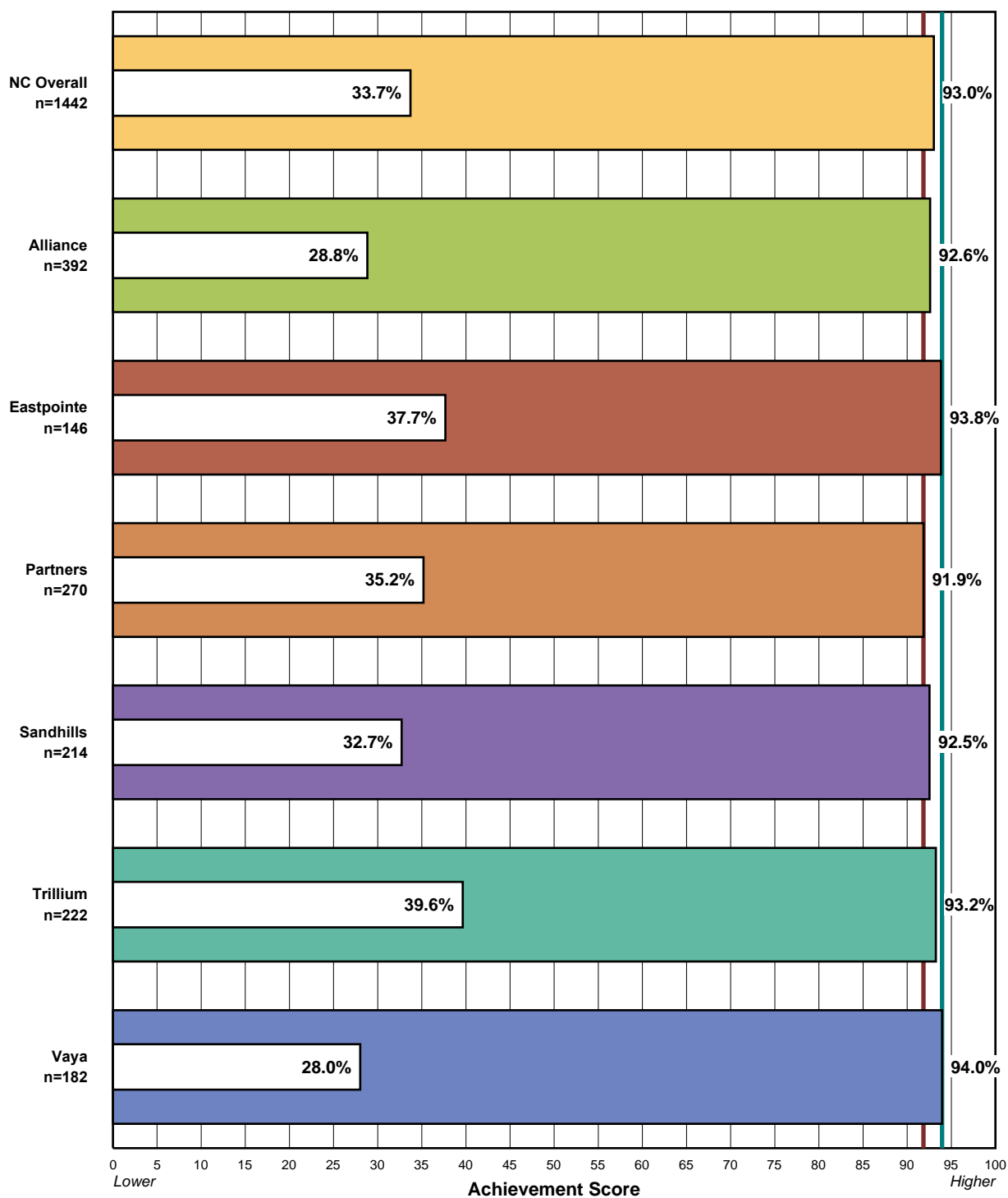
## Single Items

# Q19. The LME/MCO's website is a useful tool for helping my agency find the tools and materials needed to provide services



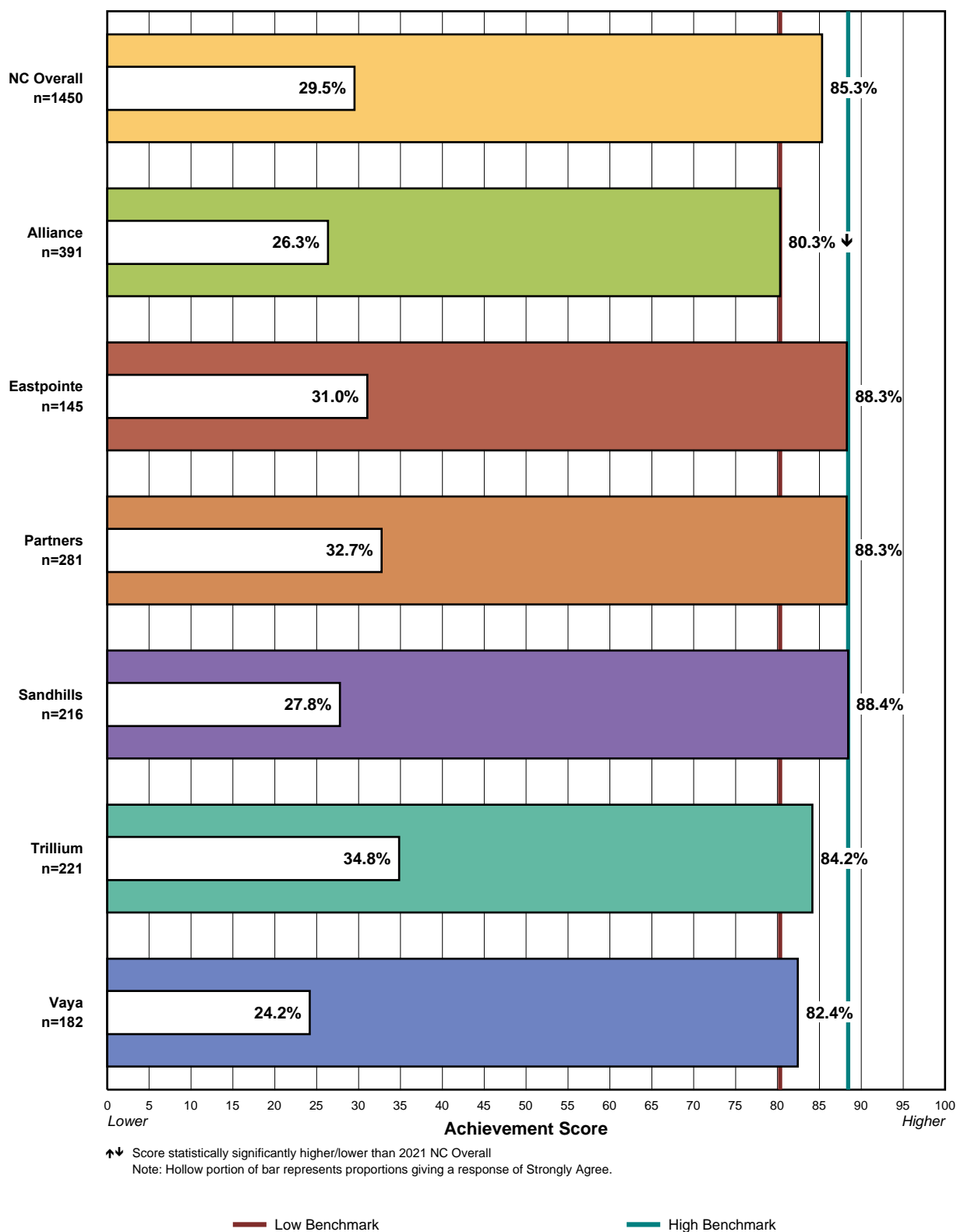
## Single Items

## Q20. I receive appropriate notice on the need to recredential.



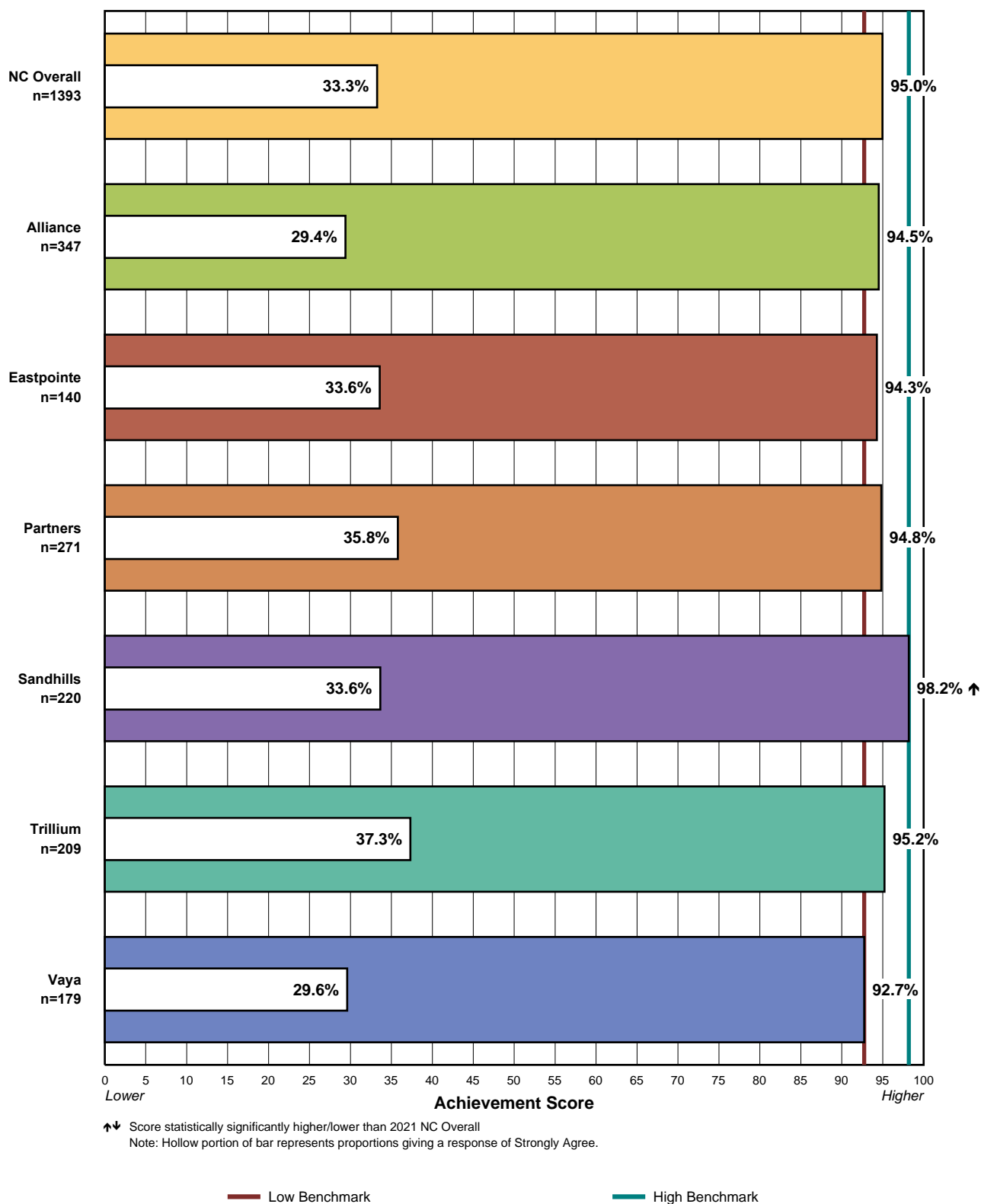
## Single Items

**Q21. The credentialing/recredentialing process occurs in a timely manner.**



## Single Items

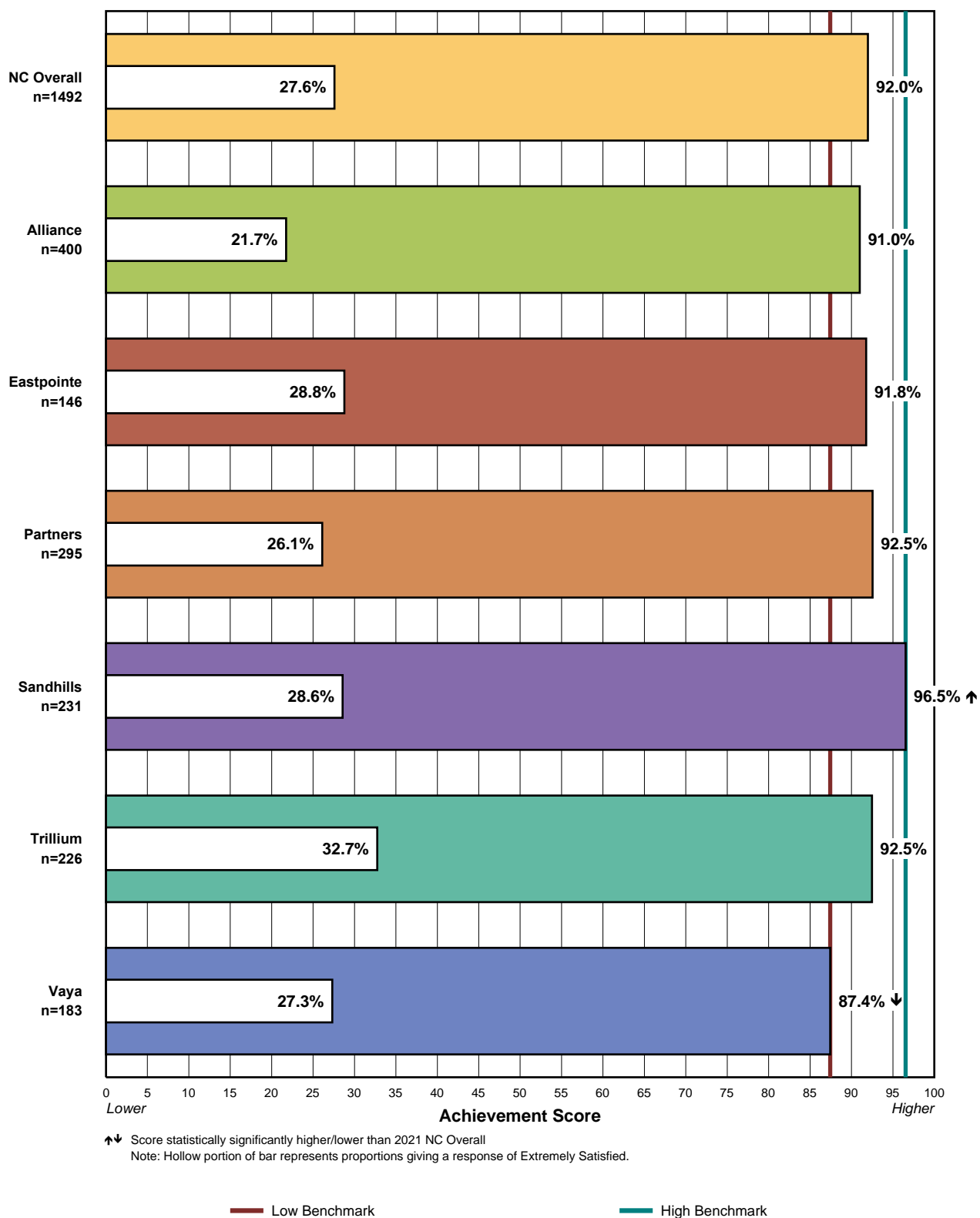
## Q22. Provider Relations Credentialing Staff are friendly and knowledgeable.





## Single Items

### Q23. Overall satisfaction with the LME/MCO



## Responses by Question

### Q1. How long have you been a Medicaid provider enrolled with an LME-MCO?

	NC Overall		Alliance		Eastpointe		Partners		Sandhills		Trillium		Vaya	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Less than 6 months	37	2.3%	23	5.1%	2	1.3%	14	4.3%	5	2.0%	1	0.4%	1	0.5%
1 - 2 years	148	9.1%	96	21.2%	3	2.0%	38	11.6%	11	4.5%	12	5.0%	20	9.9%
3 - 5 years	198	12.2%	89	19.6%	7	4.6%	56	17.1%	18	7.4%	30	12.4%	24	11.8%
6 years or more	1239	76.4%	245	54.1%	141	92.2%	219	67.0%	210	86.1%	199	82.2%	158	77.8%
<b>Total</b>	1622	100.0%	453	100.0%	153	100.0%	327	100.0%	244	100.0%	242	100.0%	203	100.0%
Not Answered	1		0		0		0		0		1		0	

### Q2. How many Medicaid beneficiaries did you serve in the last 12 months? (Please estimate to the best of your ability)

	NC Overall		Alliance		Eastpointe		Partners		Sandhills		Trillium		Vaya	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
1-50	698	43.3%	211	46.6%	44	28.8%	151	46.5%	116	47.7%	106	44.0%	91	46.0%
51-100	326	20.2%	93	20.5%	30	19.6%	75	23.1%	53	21.8%	41	17.0%	38	19.2%
101-250	265	16.5%	81	17.9%	32	20.9%	48	14.8%	35	14.4%	45	18.7%	24	12.1%
251-500	140	8.7%	38	8.4%	18	11.8%	28	8.6%	17	7.0%	21	8.7%	15	7.6%
More than 500	183	11.4%	30	6.6%	29	19.0%	23	7.1%	22	9.1%	28	11.6%	30	15.2%
<b>Total</b>	1611	100.0%	453	100.0%	153	100.0%	325	100.0%	243	100.0%	241	100.0%	198	100.0%
Not Answered	12		0		0		2		1		2		5	

### Q3. What's your provider type?

	NC Overall		Alliance		Eastpointe		Partners		Sandhills		Trillium		Vaya	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Provider Agency	1168	72.6%	326	72.1%	127	83.0%	215	66.6%	173	71.2%	163	67.6%	149	75.6%
Licensed Independent Practitioner (LIP) or LIP group	409	25.4%	123	27.2%	25	16.3%	99	30.7%	63	25.9%	74	30.7%	42	21.3%
Community Hospital	31	1.9%	3	0.7%	1	0.7%	9	2.8%	7	2.9%	4	1.7%	6	3.0%
<b>Total</b>	1608	100.0%	452	100.0%	153	100.0%	323	100.0%	243	100.0%	241	100.0%	197	100.0%
Not Answered	15		1		0		4		1		2		6	

**Q4. Please select the services you provide. Please check all that apply. (Note: Percents may add to > 100%)**

	NC Overall		Alliance		Eastpointe		Partners		Sandhills		Trillium		Vaya	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Enhanced Behavioral Health Services	559	34.9%	133	29.4%	81	52.9%	102	31.6%	72	29.9%	88	36.7%	57	29.1%
Outpatient	956	59.6%	347	76.8%	86	56.2%	222	68.7%	124	51.5%	137	57.1%	91	46.4%
Residential	459	28.6%	68	15.0%	54	35.3%	64	19.8%	79	32.8%	74	30.8%	76	38.8%
Inpatient (Include psychiatric, detoxification, and/or crisis)	63	3.9%	16	3.5%	6	3.9%	10	3.1%	11	4.6%	8	3.3%	10	5.1%
Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID)	108	6.7%	13	2.9%	14	9.2%	12	3.7%	22	9.1%	18	7.5%	16	8.2%
Innovations Waiver Services	487	30.4%	71	15.7%	62	40.5%	68	21.1%	93	38.6%	83	34.6%	64	32.7%
TBI Waiver Services	50	3.1%	13	2.9%	8	5.2%	6	1.9%	8	3.3%	7	2.9%	5	2.6%
<b>Total</b>	1603	100.0%	452	100.0%	153	100.0%	323	100.0%	241	100.0%	240	100.0%	196	100.0%
Not Answered	20		1		0		4		3		3		7	

**Q5. What are the primary populations you serve? Please check all that apply. (Note: Percents may add to > 100%)**

	NC Overall		Alliance		Eastpointe		Partners		Sandhills		Trillium		Vaya	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Adult Intellectual/Developmental Disability	667	41.7%	128	28.4%	75	49.0%	103	31.9%	118	49.0%	108	45.4%	93	47.2%
Child Intellectual/Developmental Disability	476	29.7%	101	22.4%	54	35.3%	86	26.6%	78	32.4%	84	35.3%	53	26.9%
Adult Mental Health	918	57.3%	317	70.3%	89	58.2%	200	61.9%	130	53.9%	134	56.3%	84	42.6%
Child Mental Health	917	57.3%	274	60.8%	95	62.1%	193	59.8%	120	49.8%	141	59.2%	102	51.8%
Adult Substance Abuse	489	30.6%	161	35.7%	56	36.6%	97	30.0%	73	30.3%	66	27.7%	45	22.8%
Child Substance Abuse	259	16.1%	52	11.5%	36	23.5%	46	14.2%	43	17.8%	40	16.8%	26	13.2%
<b>Total</b>	1602	100.0%	451	100.0%	153	100.0%	323	100.0%	241	100.0%	238	100.0%	197	100.0%
Not Answered	21		2		0		4		3		5		6	

**Q6. LME/MCO staff are easily accessible for information, referrals, and scheduling of appointments.**

	NC Overall N %	Alliance N %	Eastpointe N %	Partners N %	Sandhills N %	Trillium N %	Vaya N %
● Strongly Agree	434 29.5%	99 25.4%	51 34.5%	86 30.0%	61 26.8%	66 30.0%	55 30.2%
● Agree	844 57.4%	235 60.4%	86 58.1%	163 56.8%	144 63.2%	119 54.1%	94 51.6%
● Disagree	149 10.1%	44 11.3%	7 4.7%	30 10.5%	22 9.6%	27 12.3%	23 12.6%
● Strongly Disagree	44 3.0%	11 2.8%	4 2.7%	8 2.8%	1 0.4%	8 3.6%	10 5.5%
No Response	130	63	5	36	14	18	13
<b>Total</b>	1471 100.0%	389 100.0%	148 100.0%	287 100.0%	228 100.0%	220 100.0%	182 100.0%
Not Answered	22	1	0	4	2	5	8
<b>Reporting Category</b> Single Items							
Achievement Score	86.90%	85.86%	92.57%	86.76%	89.91%	84.09%	81.87%
2021 vs. 2020: +/- Chg (↗ Stat. sig.)	-1.3	-2.8	+7.0	-8.3↓	-3.0	-0.8	-2.1

**Q7. LME/MCO staff are referring consumers whose clinical needs match the service(s) my practice/agency provides.**

	NC Overall N %	Alliance N %	Eastpointe N %	Partners N %	Sandhills N %	Trillium N %	Vaya N %
● Strongly Agree	372 26.7%	113 29.0%	45 31.7%	63 23.3%	48 22.9%	60 28.2%	40 24.8%
● Agree	813 58.4%	244 62.6%	78 54.9%	163 60.4%	123 58.6%	123 57.7%	91 56.5%
● Disagree	148 10.6%	27 6.9%	11 7.7%	36 13.3%	32 15.2%	16 7.5%	22 13.7%
● Strongly Disagree	58 4.2%	6 1.5%	8 5.6%	8 3.0%	7 3.3%	14 6.6%	8 5.0%
No Response	210	61	11	53	32	25	35
<b>Total</b>	1391 100.0%	390 100.0%	142 100.0%	270 100.0%	210 100.0%	213 100.0%	161 100.0%
Not Answered	22	2	0	4	2	5	7
<b>Reporting Category</b> Single Items							
Achievement Score	85.18%	91.54%	86.62%	83.70%	81.43%	85.92%	81.37%
2021 vs. 2020: +/- Chg (↗ Stat. sig.)	+4.0↑	+1.2	+3.1	+6.1	-2.6	+5.6	+2.8

○ **Response scored as:** ● Room for Improvement ● Achievement

**Q8. LME/MCO staff respond quickly to provider needs.**

	NC Overall N %	Alliance N %	Eastpointe N %	Partners N %	Sandhills N %	Trillium N %	Vaya N %
● Strongly Agree	376 25.2%	92 23.7%	43 28.9%	82 27.7%	53 23.0%	55 24.4%	43 23.2%
● Agree	847 56.8%	230 59.3%	77 51.7%	163 55.1%	152 66.1%	125 55.6%	99 53.5%
● Disagree	215 14.5%	53 13.7%	23 15.4%	41 13.9%	25 10.9%	35 15.6%	32 17.3%
● Strongly Disagree	53 3.5%	13 3.4%	6 4.0%	10 3.4%	0 0.0%	10 4.4%	11 5.9%
No Response	110	63	4	27	12	13	11
<b>Total</b>	1491 100.0%	388 100.0%	149 100.0%	296 100.0%	230 100.0%	225 100.0%	185 100.0%
Not Answered	22	2	0	4	2	5	7
<b>Reporting Category</b> Single Items							
Achievement Score	82.03%	82.99%	80.54%	82.77%	89.13%	80.00%	76.76%
2021 vs. 2020: +/- Chg (↕ Stat. sig.)	-4.7↓	-2.5	-5.8	-8.9↓	-0.8	-6.7	-7.8

**Q9. When I speak with LME-MCO staff about claims issues I am given consistent and accurate information.**

	NC Overall N %	Alliance N %	Eastpointe N %	Partners N %	Sandhills N %	Trillium N %	Vaya N %
● Strongly Agree	400 28.8%	78 24.8%	41 28.3%	85 32.1%	68 30.5%	60 27.3%	52 29.4%
● Agree	790 56.8%	186 59.2%	83 57.2%	146 55.1%	133 59.6%	129 58.6%	91 51.4%
● Disagree	141 10.1%	31 9.9%	15 10.3%	24 9.1%	20 9.0%	22 10.0%	22 12.4%
● Strongly Disagree	59 4.2%	19 6.1%	6 4.1%	10 3.8%	2 0.9%	9 4.1%	12 6.8%
No Response	208	137	8	57	17	17	19
<b>Total</b>	1389 100.0%	314 100.0%	145 100.0%	265 100.0%	223 100.0%	220 100.0%	177 100.0%
Not Answered	26	2	0	5	4	6	7
<b>Reporting Category</b> Single Items							
Achievement Score	85.66%	84.08%	85.52%	87.17%	90.13%	85.91%	80.79%
2021 vs. 2020: +/- Chg (↕ Stat. sig.)	-3.0↓	-3.8	-6.9	-4.7	-1.3	-2.2	-4.8

**Q10. LME-MCO's communications to its provider network are informative and helpful.**

	NC Overall N %	Alliance N %	Eastpointe N %	Partners N %	Sandhills N %	Trillium N %	Vaya N %
● Strongly Agree	446 30.0%	98 25.8%	48 32.2%	88 29.9%	68 29.6%	70 31.0%	58 31.4%
● Agree	908 61.1%	244 64.2%	88 59.1%	186 63.3%	151 65.7%	130 57.5%	106 57.3%
● Disagree	115 7.7%	29 7.6%	12 8.1%	16 5.4%	8 3.5%	25 11.1%	20 10.8%
● Strongly Disagree	16 1.1%	9 2.4%	1 0.7%	4 1.4%	3 1.3%	1 0.4%	1 0.5%
No Response	109	69	4	28	10	10	11
<b>Total</b>	1486 100.0%	380 100.0%	149 100.0%	294 100.0%	230 100.0%	226 100.0%	185 100.0%
Not Answered	28	4	0	5	4	7	7
<b>Reporting Category</b> Single Items							
Achievement Score	91.16%	90.00%	91.28%	93.20%	95.22%	88.50%	88.65%
2021 vs. 2020: +/- Chg (↕ Stat. sig.)	-0.9	-1.5	-2.3	-1.6	+0.6	-3.2	-1.4

○ Response scored as: ● Room for Improvement ● Achievement

**Q11. The LME-MCO Network Department keeps providers informed of changes that affect my local Provider Network.**

	NC Overall		Alliance		Eastpointe		Partners		Sandhills		Trillium		Vaya	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
🟢 Strongly Agree	454	30.1%	111	28.2%	49	32.7%	86	28.6%	67	29.0%	78	33.9%	52	28.3%
🟢 Agree	907	60.3%	245	62.3%	93	62.0%	183	60.8%	143	61.9%	131	57.0%	106	57.6%
🔴 Disagree	118	7.8%	30	7.6%	6	4.0%	25	8.3%	18	7.8%	16	7.0%	23	12.5%
🔴 Strongly Disagree	26	1.8%	7	1.8%	2	1.3%	7	2.3%	3	1.3%	5	2.2%	3	1.6%
No Response	91		56		3		21		9		7		12	
<b>Total</b>	1505	100.0%	393	100.0%	150	100.0%	301	100.0%	231	100.0%	230	100.0%	184	100.0%
Not Answered	27		4		0		5		4		6		7	
<b>Reporting Category</b>														
Single Items														
Achievement Score	90.41%		90.59%		94.67%		89.37%		90.91%		90.87%		85.87%	
2021 vs. 2020: +/- Chg (↕ Stat. sig.)	-2.3↓		-0.5		+0.2		-5.6↓		-3.7		-3.1		-3.5	

**Q12. The LME-MCO Network Department staff are knowledgeable and answer questions consistently and accurately.**

	NC Overall		Alliance		Eastpointe		Partners		Sandhills		Trillium		Vaya	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
🟢 Strongly Agree	387	26.9%	100	27.9%	41	28.3%	83	28.5%	59	26.1%	60	27.4%	41	23.3%
🟢 Agree	855	59.4%	200	55.9%	82	56.6%	173	59.5%	150	66.4%	126	57.5%	106	60.2%
🔴 Disagree	170	11.8%	49	13.7%	22	15.2%	29	10.0%	16	7.1%	27	12.3%	23	13.1%
🔴 Strongly Disagree	26	1.8%	9	2.5%	0	0.0%	6	2.1%	1	0.4%	6	2.7%	6	3.4%
No Response	157		90		8		31		14		18		20	
<b>Total</b>	1439	100.0%	358	100.0%	145	100.0%	291	100.0%	226	100.0%	219	100.0%	176	100.0%
Not Answered	28		5		0		5		4		6		7	
<b>Reporting Category</b>														
Single Items														
Achievement Score	86.33%		83.80%		84.83%		87.97%		92.48%		84.93%		83.52%	
2021 vs. 2020: +/- Chg (↕ Stat. sig.)	-2.6↓		-4.3		-4.2		-5.7↓		-0.2		-4.9		-1.9	

○ Response scored as: ● Room for Improvement ● Achievement

**Q13. The LME/MCO staff conduct fair and thorough investigations.**

	NC Overall N %	Alliance N %	Eastpointe N %	Partners N %	Sandhills N %	Trillium N %	Vaya N %
● Strongly Agree	337 28.6%	80 27.6%	36 27.5%	68 31.1%	48 27.6%	54 30.5%	42 27.8%
● Agree	747 63.5%	190 65.5%	82 62.6%	140 63.9%	114 65.5%	112 63.3%	92 60.9%
● Disagree	67 5.7%	10 3.4%	9 6.9%	9 4.1%	9 5.2%	8 4.5%	14 9.3%
● Strongly Disagree	25 2.1%	10 3.4%	4 3.1%	2 0.9%	3 1.7%	3 1.7%	3 2.0%
No Response	420	158	22	103	66	60	45
<b>Total</b>	1176 100.0%	290 100.0%	131 100.0%	219 100.0%	174 100.0%	177 100.0%	151 100.0%
Not Answered	28	5	0	5	4	6	7
<b>Reporting Category</b> Single Items							
Achievement Score	92.18%	93.10%	90.08%	94.98%	93.10%	93.79%	88.74%
2021 vs. 2020: +/- Chg (▲ Stat. sig.)	-0.4	+2.3	-4.6	-0.6	-0.8	+0.9	-2.2

**Q14. After the audit, investigation, or provider monitoring, LME/MCO requests for corrective action plans and other supporting materials are fair and reasonable.**

	NC Overall N %	Alliance N %	Eastpointe N %	Partners N %	Sandhills N %	Trillium N %	Vaya N %
● Strongly Agree	357 29.8%	81 27.9%	39 29.3%	65 30.1%	50 27.3%	58 32.2%	50 31.8%
● Agree	759 63.4%	194 66.9%	82 61.7%	146 67.6%	121 66.1%	114 63.3%	88 56.1%
● Disagree	61 5.1%	8 2.8%	8 6.0%	5 2.3%	10 5.5%	6 3.3%	15 9.6%
● Strongly Disagree	21 1.7%	7 2.4%	4 3.0%	0 0.0%	2 1.1%	2 1.1%	4 2.5%
No Response	397	157	20	106	57	57	39
<b>Total</b>	1198 100.0%	290 100.0%	133 100.0%	216 100.0%	183 100.0%	180 100.0%	157 100.0%
Not Answered	28	6	0	5	4	6	7
<b>Reporting Category</b> Single Items							
Achievement Score	93.20%	94.83%	90.98%	97.69%	93.44%	95.56%	87.90%
2021 vs. 2020: +/- Chg (▲ Stat. sig.)	-0.1	+3.4	-2.8	+0.8	+0.2	-1.3	-0.8

○ Response scored as: ● Room for Improvement ● Achievement

**Q15. Trainings are informative and meet our needs as a provider/agency.**

	NC Overall N %	Alliance N %	Eastpointe N %	Partners N %	Sandhills N %	Trillium N %	Vaya N %
● Strongly Agree	344 25.9%	91 26.6%	35 25.7%	64 24.3%	63 30.1%	55 27.1%	33 21.2%
● Agree	853 64.3%	221 64.6%	85 62.5%	181 68.8%	134 64.1%	131 64.5%	95 60.9%
● Disagree	118 8.9%	22 6.4%	16 11.8%	18 6.8%	11 5.3%	17 8.4%	23 14.7%
● Strongly Disagree	13 1.0%	8 2.3%	0 0.0%	0 0.0%	1 0.5%	0 0.0%	5 3.2%
No Response	267	105	17	59	31	33	40
<b>Total</b>	1327 100.0%	342 100.0%	136 100.0%	263 100.0%	209 100.0%	203 100.0%	156 100.0%
Not Answered	29	6	0	5	4	7	7
<b>Reporting Category</b>							
Single Items							
Achievement Score	90.17%	91.23%	88.24%	93.16%	94.26%	91.63%	82.05%
2021 vs. 2020: +/- Chg (↗ Stat. sig.)	-1.2	-0.5	-5.6	-2.8	0.0	+0.4	-4.7

**Q16. For which of the following topics would you like to see more training and education materials? Please check all that apply. (Note: Percents may add to > 100%)**

	NC Overall N %	Alliance N %	Eastpointe N %	Partners N %	Sandhills N %	Trillium N %	Vaya N %
Claims Processing Information	480 30.2%	117 26.2%	45 29.6%	97 30.4%	69 28.7%	81 34.3%	63 32.1%
Technology	260 16.3%	67 15.0%	34 22.4%	35 11.0%	38 15.8%	43 18.2%	31 15.8%
Payment Policy and Reimbursement	355 22.3%	104 23.3%	32 21.1%	66 20.7%	53 22.1%	59 25.0%	43 21.9%
Provider Appeals	213 13.4%	56 12.6%	20 13.2%	31 9.7%	38 15.8%	39 16.5%	25 12.8%
Member Appeals	94 5.9%	27 6.1%	12 7.9%	10 3.1%	18 7.5%	13 5.5%	11 5.6%
Audit and Corrective Action Processes	303 19.0%	91 20.4%	18 11.8%	44 13.8%	54 22.5%	54 22.9%	45 23.0%
Quality Management and Reporting	398 25.1%	106 23.8%	43 28.3%	60 18.8%	61 25.4%	61 25.8%	56 28.6%
Clinical Coverage Policies/ Evidence Based Practices	588 37.0%	195 43.7%	52 34.2%	108 33.9%	87 36.2%	88 37.3%	72 36.7%
Provider Monitoring	390 24.5%	107 24.0%	39 25.7%	62 19.4%	63 26.2%	59 25.0%	53 27.0%
Other	119 7.5%	17 3.8%	15 9.9%	21 6.6%	22 9.2%	12 5.1%	21 10.7%
No additional materials needed	422 26.5%	125 28.0%	43 28.3%	94 29.5%	60 25.0%	67 28.4%	39 19.9%
<b>Total</b>	1589 100.0%	446 100.0%	152 100.0%	319 100.0%	240 100.0%	236 100.0%	196 100.0%
Not Answered	34	7	1	8	4	7	7

○ Response scored as: ● Room for Improvement ● Achievement



**Q17. Denials for treatment and services are explained.**

	NC Overall N %	Alliance N %	Eastpointe N %	Partners N %	Sandhills N %	Trillium N %	Vaya N %
● Strongly Agree	271 20.5%	58 17.1%	31 22.5%	55 21.8%	47 22.7%	45 21.1%	26 17.1%
● Agree	872 65.9%	229 67.4%	94 68.1%	145 57.5%	137 66.2%	146 68.5%	102 67.1%
● Disagree	141 10.7%	45 13.2%	12 8.7%	39 15.5%	18 8.7%	17 8.0%	16 10.5%
● Strongly Disagree	39 3.0%	8 2.4%	1 0.7%	13 5.2%	5 2.4%	5 2.3%	8 5.3%
No Response	266	107	14	67	33	23	44
<b>Total</b>	1323 100.0%	340 100.0%	138 100.0%	252 100.0%	207 100.0%	213 100.0%	152 100.0%
Not Answered	34	6	1	8	4	7	7
<b>Reporting Category</b> Single Items							
Achievement Score	86.38%	84.41%	90.58%	79.37%	88.89%	89.67%	84.21%
2021 vs. 2020: +/- Chg (↗ Stat. sig.)	-1.7	-2.3	+0.4	-9.1↓	-1.9	+2.1	-5.7

**Q18. My agency is satisfied with the appeals process for denial, reduction, or suspension of service(s).**

	NC Overall N %	Alliance N %	Eastpointe N %	Partners N %	Sandhills N %	Trillium N %	Vaya N %
● Strongly Agree	235 21.8%	56 21.2%	29 24.4%	48 23.5%	32 20.3%	39 22.2%	24 18.8%
● Agree	689 63.9%	176 66.7%	76 63.9%	123 60.3%	102 64.6%	112 63.6%	83 64.8%
● Disagree	118 11.0%	22 8.3%	12 10.1%	28 13.7%	20 12.7%	19 10.8%	13 10.2%
● Strongly Disagree	35 3.3%	10 3.8%	2 1.7%	5 2.5%	4 2.5%	6 3.4%	8 6.3%
No Response	512	182	33	115	82	60	68
<b>Total</b>	1077 100.0%	264 100.0%	119 100.0%	204 100.0%	158 100.0%	176 100.0%	128 100.0%
Not Answered	34	7	1	8	4	7	7
<b>Reporting Category</b> Single Items							
Achievement Score	85.74%	87.88%	88.24%	83.82%	84.81%	85.80%	83.59%
2021 vs. 2020: +/- Chg (↗ Stat. sig.)	-1.4	+3.7	-4.7	-8.1↓	-3.0	-3.2	-2.5

**Q19. The LME/MCO's website is a useful tool for helping my agency find the tools and materials needed to provide services.**

	NC Overall N %	Alliance N %	Eastpointe N %	Partners N %	Sandhills N %	Trillium N %	Vaya N %
● Strongly Agree	326 23.0%	77 20.9%	35 24.8%	66 23.7%	51 23.5%	51 23.2%	38 22.0%
● Agree	911 64.3%	245 66.6%	86 61.0%	177 63.4%	149 68.7%	146 66.4%	104 60.1%
● Disagree	154 10.9%	33 9.0%	18 12.8%	29 10.4%	17 7.8%	21 9.5%	27 15.6%
● Strongly Disagree	25 1.8%	13 3.5%	2 1.4%	7 2.5%	0 0.0%	2 0.9%	4 2.3%
No Response	171	78	10	39	23	16	23
<b>Total</b>	1415 100.0%	368 100.0%	141 100.0%	279 100.0%	217 100.0%	220 100.0%	173 100.0%
Not Answered	37	7	2	9	4	7	7
<b>Reporting Category</b> Single Items							
Achievement Score	87.39%	87.50%	85.82%	87.10%	92.17%	89.55%	82.08%
2021 vs. 2020: +/- Chg (↗ Stat. sig.)	+0.8	+1.4	-5.2	-2.7	+3.3	+0.7	+3.0

○ Response scored as: ● Room for Improvement ● Achievement

**Q20. I receive appropriate notice on the need to recredential.**

	NC Overall N %	Alliance N %	Eastpointe N %	Partners N %	Sandhills N %	Trillium N %	Vaya N %
● Strongly Agree	486 33.7%	113 28.8%	55 37.7%	95 35.2%	70 32.7%	88 39.6%	51 28.0%
● Agree	855 59.3%	250 63.8%	82 56.2%	153 56.7%	128 59.8%	119 53.6%	120 65.9%
● Disagree	82 5.7%	23 5.9%	8 5.5%	16 5.9%	13 6.1%	12 5.4%	10 5.5%
● Strongly Disagree	18 1.3%	6 1.5%	1 0.7%	6 2.2%	3 1.4%	3 1.4%	1 0.5%
No Response	144	54	5	47	26	14	14
<b>Total</b>	1442 100.0%	392 100.0%	146 100.0%	270 100.0%	214 100.0%	222 100.0%	182 100.0%
Not Answered	38	7	2	10	4	7	7
<b>Reporting Category</b> Single Items							
Achievement Score	93.02%	92.60%	93.84%	91.85%	92.52%	93.24%	93.96%
2021 vs. 2020: +/- Chg (↕ Stat. sig.)	-1.7↓	+1.2	-2.9	-2.8	-5.3↓	-1.2	+2.1

**Q21. The credentialing/recredentialing process occurs in a timely manner.**

	NC Overall N %	Alliance N %	Eastpointe N %	Partners N %	Sandhills N %	Trillium N %	Vaya N %
● Strongly Agree	428 29.5%	103 26.3%	45 31.0%	92 32.7%	60 27.8%	77 34.8%	44 24.2%
● Agree	809 55.8%	211 54.0%	83 57.2%	156 55.5%	131 60.6%	109 49.3%	106 58.2%
● Disagree	141 9.7%	54 13.8%	12 8.3%	17 6.0%	19 8.8%	24 10.9%	19 10.4%
● Strongly Disagree	72 5.0%	23 5.9%	5 3.4%	16 5.7%	6 2.8%	11 5.0%	13 7.1%
No Response	136	55	6	36	24	15	14
<b>Total</b>	1450 100.0%	391 100.0%	145 100.0%	281 100.0%	216 100.0%	221 100.0%	182 100.0%
Not Answered	38	7	2	10	4	7	7
<b>Reporting Category</b> Single Items							
Achievement Score	85.31%	80.31%	88.28%	88.26%	88.43%	84.16%	82.42%
2021 vs. 2020: +/- Chg (↕ Stat. sig.)	-5.0↓	-2.3	-2.0	-4.5	-6.0↓	-4.8	-8.0↓

**Q22. Provider Relations Credentialing Staff are friendly and knowledgeable.**

	NC Overall N %	Alliance N %	Eastpointe N %	Partners N %	Sandhills N %	Trillium N %	Vaya N %
● Strongly Agree	463 33.3%	102 29.4%	47 33.6%	97 35.8%	74 33.6%	78 37.3%	53 29.6%
● Agree	860 61.7%	226 65.1%	85 60.7%	160 59.0%	142 64.5%	121 57.9%	113 63.1%
● Disagree	50 3.6%	13 3.7%	8 5.7%	8 3.0%	1 0.5%	6 2.9%	10 5.6%
● Strongly Disagree	20 1.5%	6 1.7%	0 0.0%	6 2.2%	3 1.4%	4 1.9%	3 1.7%
No Response	191	99	11	46	20	27	16
<b>Total</b>	1393 100.0%	347 100.0%	140 100.0%	271 100.0%	220 100.0%	209 100.0%	179 100.0%
Not Answered	39	7	2	10	4	7	8
<b>Reporting Category</b> Single Items							
Achievement Score	94.97%	94.52%	94.29%	94.83%	98.18%	95.22%	92.74%
2021 vs. 2020: +/- Chg (↕ Stat. sig.)	-1.1	-0.3	+2.5	-3.6↓	+0.4	-1.6	-3.6

○ **Response scored as:** ● Room for Improvement ● Achievement

**Q23. Please rate your overall satisfaction with the LME/MCO.**

	NC Overall N %	Alliance N %	Eastpointe N %	Partners N %	Sandhills N %	Trillium N %	Vaya N %
● Extremely Satisfied	411 27.6%	87 21.7%	42 28.8%	77 26.1%	66 28.6%	74 32.7%	50 27.3%
● Satisfied	961 64.4%	277 69.3%	92 63.0%	196 66.4%	157 68.0%	135 59.7%	110 60.1%
● Dissatisfied	96 6.5%	27 6.7%	10 6.8%	21 7.1%	8 3.5%	11 4.9%	18 9.8%
● Extremely Dissatisfied	23 1.5%	9 2.2%	2 1.4%	1 0.3%	0 0.0%	6 2.7%	5 2.7%
No Response	92	45	5	22	9	10	12
<b>Total</b>	1492 100.0%	400 100.0%	146 100.0%	295 100.0%	231 100.0%	226 100.0%	183 100.0%
Not Answered	40	8	2	10	4	7	8
<b>Reporting Category</b>							
Single Items							
Achievement Score	91.99%	91.00%	91.78%	92.54%	96.54%	92.48%	87.43%
2021 vs. 2020: +/- Chg (↕ Stat. sig.)	+0.7	+0.0	+2.3	-3.4	+0.9	+2.1	-1.5

**Q24. Please identify any of areas below where you think the LME/MCO needs to improve. (Check all that apply):**

(Note: Percents may add to &gt; 100%)

	NC Overall N %	Alliance N %	Eastpointe N %	Partners N %	Sandhills N %	Trillium N %	Vaya N %
Communication with Providers and Members	386 25.0%	110 25.3%	36 24.2%	65 21.4%	49 20.9%	60 26.2%	61 32.1%
Customer Service Responsiveness	268 17.4%	84 19.4%	28 18.8%	50 16.4%	24 10.2%	42 18.3%	40 21.1%
Website	180 11.7%	58 13.4%	14 9.4%	36 11.8%	26 11.1%	21 9.2%	29 15.3%
None of the areas above need improvement	980 63.6%	272 62.7%	96 64.4%	203 66.8%	165 70.2%	142 62.0%	105 55.3%
<b>Total</b>	1542 100.0%	434 100.0%	149 100.0%	304 100.0%	235 100.0%	229 100.0%	190 100.0%
Not Answered	81	19	4	23	9	14	13

**Q25. Would you like to be contacted regarding your responses to this survey?**

	NC Overall N %	Alliance N %	Eastpointe N %	Partners N %	Sandhills N %	Trillium N %	Vaya N %
Yes	99 6.3%	22 5.0%	10 6.7%	26 8.3%	17 7.1%	14 6.0%	9 4.6%
No	1476 93.7%	420 95.0%	140 93.3%	288 91.7%	222 92.9%	221 94.0%	186 95.4%
<b>Total</b>	1575 100.0%	442 100.0%	150 100.0%	314 100.0%	239 100.0%	235 100.0%	195 100.0%
Not Answered	48	11	3	13	5	8	8

○ Response scored as: ● Room for Improvement ● Achievement



**Your agency has been identified as a provider of Behavioral Health, Substance Use Disorder, Intellectual and Developmental Disabilities, and Traumatic Brain Injury services enrolled in an LME-MCO network. NC Medicaid surveys agencies on a yearly basis and over the next few months the 2022 DHHS Provider Satisfaction Survey will be conducted for all providers that have contracted with the LME/MCOs to provide services under 1915(b)/(c) Medicaid Waiver. NC Medicaid is very interested in receiving your responses to this survey.**

**The purpose of the survey is to assess provider perceptions of LME/MCO provider supports for NC Medicaid. This survey is important to NC Medicaid because it helps them to assess the LME/MCOs ability to 1) interact with their network of providers, and 2) provide training and support to all enrolled provider agencies.**

**This survey will take between 10 and 15 minutes to complete and all questions are required. All information captured in the survey is confidential and will not be shared with your LME/MCO. The only information that will be shared with the LME/MCOs will be de-identified results. If you have any questions related to this survey please contact DataStat by email at [pss.support@datastat.com](mailto:pss.support@datastat.com) or toll free at 1-866-387-9013.**

**1. How long have you been a Medicaid provider enrolled with an LME-MCO?**

- ☐ Less than 6 months
- ☐ 1 - 2 years
- ☐ 3 - 5 years
- ☐ 6 years or more

**2. How many Medicaid beneficiaries did you serve in the last 12 months? (Please estimate to the best of your ability)**

- ☐ 1-50
- ☐ 51-100
- ☐ 101-250
- ☐ 251-500
- ☐ More than 500

**3. What's your provider type?**

- ☐ Provider Agency
- ☐ Licensed Independent Practitioner (LIP) or LIP group
- ☐ Community Hospital

**4. Please select the services you provide. Please check all that apply.**

- ☐ Enhanced Behavioral Health Services
- ☐ Outpatient
- ☐ Residential
- ☐ Inpatient (Include psychiatric, detoxification, and/or crisis)
- ☐ Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID)
- ☐ Innovations Waiver Services
- ☐ TBI Waiver Services

**5. What are the primary populations you serve? Please check all that apply.**

- ☐ Adult Intellectual/Developmental Disability
- ☐ Child Intellectual/Developmental Disability
- ☐ Adult Mental Health
- ☐ Child Mental Health
- ☐ Adult Substance Abuse
- ☐ Child Substance Abuse

For each of the statements below, please indicate whether you Strongly Agree, Agree, Disagree, or Strongly Disagree. If the statement is not applicable, please select No Response.

	Strongly Agree	Agree	Disagree	Strongly Disagree	No Response
6. LME/MCO staff are easily accessible for information, referrals, and scheduling of appointments.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. LME/MCO staff are referring consumers whose clinical needs match the service(s) my practice/agency provides.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. LME/MCO staff respond quickly to provider needs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. When I speak with LME-MCO staff about claims issues I am given consistent and accurate information.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. LME-MCO's communications to its provider network are informative and helpful.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. The LME-MCO Network Department keeps providers informed of changes that affect my local Provider Network.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. The LME-MCO Network Department staff are knowledgeable and answer questions consistently and accurately.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. The LME/MCO staff conduct fair and thorough investigations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. After the audit, investigation, or provider monitoring, LME/MCO requests for corrective action plans and other supporting materials are fair and reasonable.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. Trainings are informative and meet our needs as a provider/agency.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**16. For which of the following topics would you like to see more training and education materials? Please check all that apply.**

- ☐ Claims Processing Information
- ☐ Technology
- ☐ Payment Policy and Reimbursement
- ☐ Provider Appeals
- ☐ Member Appeals
- ☐ Audit and Corrective Action Processes
- ☐ Quality Management and Reporting
- ☐ Clinical Coverage Policies/Evidence Based Practices
- ☐ Provider Monitoring
- ☐ Other (please specify)

- ☐ No additional materials needed

**For each of the statements below, please indicate whether you Strongly Agree, Agree, Disagree, or Strongly Disagree. If the statement is not applicable, please select No Response.**

	Strongly Agree	Agree	Disagree	Strongly Disagree	No Response
<b>17. Denials for treatment and services are explained.</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>18. My agency is satisfied with the appeals process for denial, reduction, or suspension of service(s).</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>19. The LME/MCO's website is a useful tool for helping my agency find the tools and materials needed to provide services.</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>20. I receive appropriate notice on the need to recredential.</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>21. The credentialing/recredentialing process occurs in a timely manner.</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>22. Provider Relations Credentialing Staff are friendly and knowledgeable.</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**23. Please rate your overall satisfaction with the LME/MCO.**

- ☐ Extremely Satisfied
- ☐ Satisfied
- ☐ Dissatisfied
- ☐ Extremely Dissatisfied
- ☐ No Response

**24. Please identify any of areas below where you think the LME/MCO needs to improve. (Check all that apply):**

- ☐ **Communication with Providers and Members**

Please describe your specific concerns / issues (optional)

- ☐ **Customer Service Responsiveness**

Please describe your specific concerns / issues (optional)

- ☐ **Website**

Please describe your specific concerns / issues (optional)

- ☐ **None of the areas above need improvement**

**25. Would you like to be contacted regarding your responses to this survey?**

- ☐ Yes  
☐ No

**If you would like to be contacted by the health plan regarding your responses to this survey, please provide your name, phone number, and your specific concerns or issues below.**

**26. Optional Contact Information**

Name

Phone number

**27. Please state your specific concerns / issues if not noted above.**

**Thank you for completing the 2022 Provider Satisfaction Survey. Please go ahead and close your browser window.**