

2016 Provider Satisfaction Report



Mercy Maricopa Integrated Care

Project Number(s): 9116143

Introduction

Your Sales Executive is John DiCesare (770-299-1406), and your Account Project Manager is Bridgette Boston (770-978-3173 ext. 1335). Should you have any questions or comments regarding any aspect of the survey or reporting process, please feel free to call either your Sales Executive or Account Project Manager.

Many organizations conduct the SPHA Provider Satisfaction Survey to monitor provider satisfaction levels and to respond to one or more NCQA Health Plan Accreditation Standards. The 2016 SPHA Provider Satisfaction Survey template was designed to support the following NCQA standards.

- ✓ NCQA Standard QI 4 (Member Experience) currently directs managed care organizations, at least annually, to assess the practitioner's experience with the UM process. Organizations are expected to collect and analyze data and provider feedback in an effort to drive quality improvements.
- ✓ NCQA Standard QI 8 (Continuity and Coordination of Medical Care) looks to managed care organizations to gather information, at least annually, to assess and identify opportunities to improve coordination of medical care across its delivery system. This includes conducting quantitative analysis of data and feedback.

The Provider Satisfaction Survey targets providers to measure their satisfaction with Mercy Maricopa Integrated Care. For comparison purposes, results are presented by Summary Rates. The Summary Rate is the sum of the proportion of respondents who selected the most positive response options ('Well above average' or 'Somewhat above average;' 'Yes;' 'Completely satisfied' or 'Somewhat satisfied;' and '8' '9' or '10') for the attribute.

Composite scores are calculated by taking the average Summary Rates of the attributes in the specified section. The following composites are included in the Mercy Maricopa Integrated Care survey:

- All Other Plans (Comparative Rating)
- Finance Issues
- Utilization and Quality Management
- Network/Coordination of Care
- Health Plan Call Center Service Staff
- Provider Relations

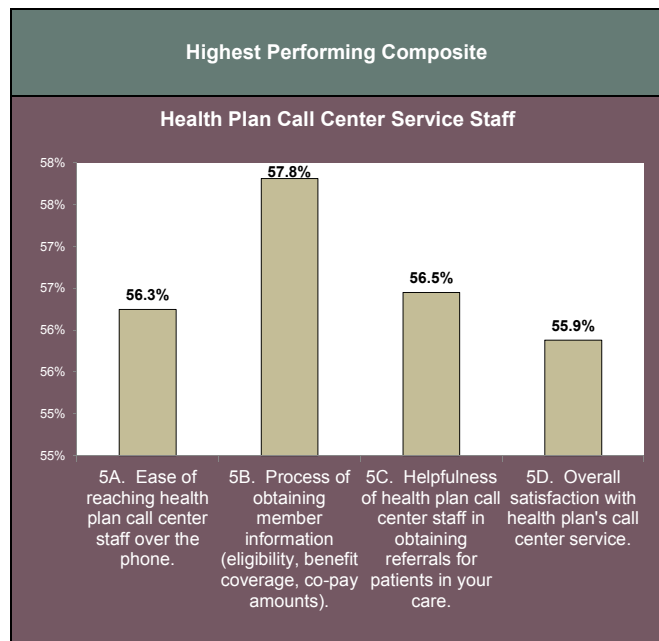
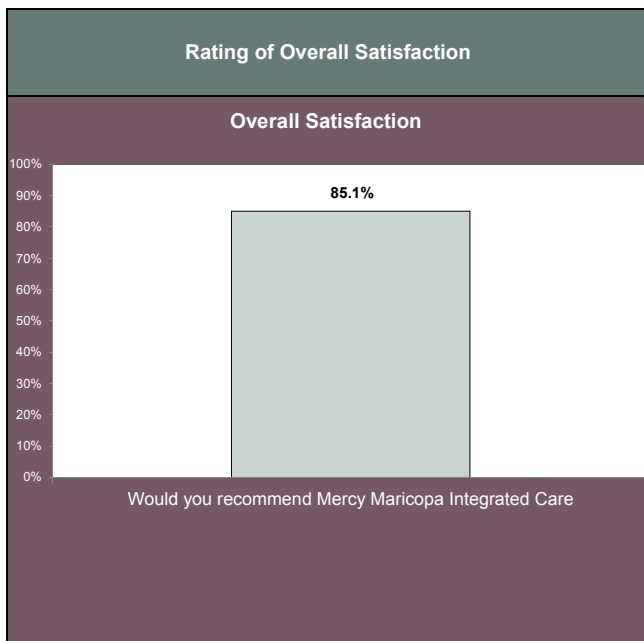
Chart 1 highlights key results from Mercy Maricopa Integrated Care's Provider Satisfaction Survey.

Chart 1

Provider Satisfaction Report Highlights

Mercy Maricopa Integrated Care

Highest and Lowest Performing Questions	2016		2016 Mean Scores**		2015 SPHA B.o.B.***	
	n*	SRS*	Mercy Maricopa	SPHA B.o.B.	Medicaid	Aggregate
Highest Scoring Questions						
6D. Quality of written communications, policy bulletins, and manuals.	76	60.5%	3.75	3.35	33.2%	33.4%
2A. Consistency of reimbursement fees with your contract rates.	73	58.9%	3.78	3.19	30.5%	31.3%
5B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	64	57.8%	3.83	3.55	43.4%	44.2%
Lowest Scoring Questions						
4A. The number of specialists in this health plan's provider network.	59	44.1%	3.58	3.10	27.0%	28.0%
4B. The quality of specialists in this health plan's provider network.	59	39.0%	3.47	3.34	32.9%	34.3%
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	56	32.1%	3.38	3.26	27.0%	28.1%



* The Valid n represents the number of responses to the question. Summary Rate Scores (SRS) represent the top two response percentages ("Well above average" and "Somewhat above average," "Yes;" and "Completely satisfied" and "Somewhat satisfied").

** Mean scores are the average of all responses. SPHA B.o.B. is represented by the Medicaid Book of Business.

*** SPH Analytics's 2015 Medicaid Book of Business benchmark consists of data from 46 plans representing 13436 respondents, while the Aggregate Book of Business benchmark consists of data from 55 plans representing 17370 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine.

**** A correlation coefficient approaching a value of 1.000 represents an increasing association of the composite with overall satisfaction.

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; cells highlighted in green denote current year plan percentage is significantly higher when compared to benchmark data; no shading denotes that there was no significant difference between the percentages, there is no comparable data, or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

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1. Executive Summary

SPH Analytics (SPHA), a National Committee for Quality Assurance (NCQA) Certified Survey Vendor, was selected by Mercy Maricopa Integrated Care to conduct its 2016 Provider Satisfaction Survey. Information obtained from these surveys allows plans to measure how well they are meeting their providers' expectations and needs. Based on the data collected, this report summarizes the results and assists in identifying plan strengths and opportunities.

SPHA followed a two-wave mail and Internet¹ with phone follow-up survey methodology to administer the Provider Satisfaction Survey from September to November of 2016. A total of 86 surveys were completed (32 mail, 15 Internet, and 39 phone), yielding a response rate of 12.8% for the mail/Internet data component and 16.0% for the phone data component. Please refer to the *Methodology* (Section 2) for further detail on the calculation of response rates.

The chart below presents 2016 Summary Rates² for Mercy Maricopa Integrated Care's composites and key attributes. Data and significance testing for trend years (if applicable) and the 2015 SPH Analytics Medicaid Book of Business are also provided for comparison.

Composites/Attributes	2016 Summary Rates	2015 SPHA Medicaid BoB Summary Rates ³	*
All Other Plans (Comparative Rating)	55.6%	35.9%	↑
Finance Issues	51.4%	32.7%	↑
Utilization and Quality Management	48.8%	32.6%	↑
Network/Coordination of Care	38.4%	29.0%	
Health Plan Call Center Service Staff	56.6%	40.3%	↑
Provider Relations	52.3%	37.7%	↑
Recommend to Other Physicians' Practices	85.1%	84.0%	

*↓↑ Indicates a significant difference when compared to the 2015 SPH Analytics Medicaid Book of Business.

¹ Both waves of mail included the web address, along with a user ID and password, to complete the survey online.

² The Summary Rate represents the most favorable response percentage(s).

³ SPH Analytics' 2015 Medicaid Book of Business consists of data from 46 plans representing 13,436 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine.

Presentation of Results

- Summary Rate is the proportion of respondents who selected the most positive response options ('Well above average' or 'Somewhat above average,' 'Yes,' 'Completely satisfied' or 'Somewhat satisfied,' and '8' '9' or '10') for the attribute.
- Attributes are the individual questions that focus on specific characteristics of the health plan.
- Composites are calculated by taking the average of the Summary Rates of the attributes in the specified section.
- 2015 SPH Analytics Medicaid Book of Business consists of data from 46 plans representing 13,436 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine.
- 2015 SPH Analytics Aggregate Book of Business consists of data from 55 plans representing 17,370 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine.

2016 Provider Satisfaction Composites

All Other Plans (Comparative Rating)

This item asks the respondent to rate Mercy Maricopa Integrated Care compared to all other plans with which the provider contracts.

Finance Issues

This composite addresses the consistency of reimbursement fees with contract rates, accuracy and timeliness of claims processing, and resolution of claims payment problems or disputes.

Utilization and Quality Management

This composite measures access to knowledgeable Utilization Management staff, procedures and timeliness for obtaining pre-certification/referral/authorization information, the health plan's facilitation/support of appropriate clinical care for patients, access to Case/Care Managers from this health plan, and the degree to which the plan covers and encourages preventive care and wellness.

Network/Coordination of Care

This composite addresses the number and quality of specialists, as well as the timeliness of feedback/reports from specialists, in this health plan's provider network.

Health Plan Call Center Service Staff

This composite measures the ease of reaching health plan call center staff over the phone, the process of obtaining member information (eligibility, benefit coverage, co-pay amounts), the helpfulness of health plan call center staff in obtaining referrals for patients in their care, and overall satisfaction with the health plan's call center service.

Provider Relations

This composite addresses the quality of the provider orientation process and of written communications, policy bulletins, and manuals. If a Provider Relations representative

from the health plan is assigned to the practice, providers are also asked about the representative's ability to answer questions and resolve problems.

Overall Satisfaction

Respondents are asked if they would recommend Mercy Maricopa Integrated Care to other physicians' practices. One open-ended question allows respondents to comment on what Mercy Maricopa Integrated Care can do to improve its service to their organization.

2. Methodology

SPHA utilized a two-wave mail and Internet⁴ with phone follow-up survey methodology to administer the Provider Satisfaction Survey:

Survey Administration Tasks	Date
First questionnaire, including the web address to complete the survey online, is sent to each provider's office.	9/12/2016
Second questionnaire, including the web address to complete the survey online, is sent to each provider's office.	10/3/2016
Telephone calls by CATI (computer-assisted telephone interviews) are conducted for non-respondents.	10/24/2016
Data collection ends.	11/28/2016

Sampling Methodology

Mercy Maricopa Integrated Care provided SPHA with a database consisting of 406 Mercy Maricopa Integrated Care providers. SPHA then cleaned the database by removing any records with duplicate names or NPIs. From the database of unique providers, all records were sampled. A total of 86 mail, Internet, and phone surveys were completed.

Response Rate

Mercy Maricopa Integrated Care's sample size is 406. SPH Analytics collected 86 surveys (32 mail, 15 Internet, and 39 phone) from the eligible provider population from September to November of 2016. After adjusting for ineligible members, your mail/Internet survey response rate is 12.8%, and your phone survey response rate is 16.0%. A response rate is only calculated for those providers who are eligible and able to respond.

The mail/Internet survey was distributed to a sample of 406 providers, and a total of 39 surveys were considered ineligible. Mail surveys are considered ineligible if returned for the following reasons: bad address with no forwarding information, provider is deceased, or if the provider no longer participates with the health plan. The chart on the following page shows the number of ineligible mail surveys for these disposition categories.

At the pre-determined date, follow-up phone calls were made to office managers of non-respondent practices by means of the CATI system. As a result, 282 office managers were included in the database for the phone follow-up data collection component. From this sample of office managers, 39 surveys were completed. Phone surveys are considered ineligible if they meet one of the disposition categories listed in the table on the following page.

⁴ Both waves of mail included the web address, along with a user ID and password, to complete the survey online.

Survey Methodology	Ineligible Disposition	N
Mail/Internet Component	Bad Address with no forwarding information	39
	Deceased, Not Eligible	0
TOTAL MAIL/INTERNET INELIGIBLE SURVEYS		39

Survey Methodology	Ineligible Disposition	N
Phone Component	Deceased	0
	No Eligible Respondent	6
	Wrong Number	5
	Fax/Pager/Modem/Data Line	5
	Not in Service	0
	Disconnected	11
	Number Changed	11
	Cell Phone	0
TOTAL PHONE INELIGIBLE SURVEYS		38

To calculate the response rate, ineligible surveys are subtracted from the sample size:

$$\frac{\text{Completed surveys}}{\text{Sample size} - \text{Ineligible surveys}} = \text{Response rate}$$

Using the final figures from Mercy Maricopa Integrated Care's Provider Satisfaction Survey, the numerators and denominators used to compute your response rates are as follows:

Mail/Internet Component

$$\frac{32 \text{ (mail)} + 15 \text{ (Internet)}}{406 \text{ (sample)} - 39 \text{ (ineligible)}} = 12.8\%$$

Phone Component

$$\frac{39 \text{ (phone)}}{282 \text{ (sample)} - 38 \text{ (ineligible)}} = 16.0\%$$

Profile of Survey Respondents

The demographic characteristics of surveyed respondents should be representative of your provider population. Page 2A illustrates the percentage of respondents by demographic category within your respondent group:

- Area of Medicine (A)
- Physicians in Practice (B)
- Years in Practice (C)
- Portion of Managed Care Volume Represented by Health Plan (D)
- Survey Respondent (E)
- Insurance Participation (G)

Page 2B provides the demographic proportions for Mercy Maricopa Integrated Care compared to trend data (if applicable) while page 2C provides the percentage of respondents by demographic category and is compared to the 2015 SPH Analytics Medicaid Book of Business.

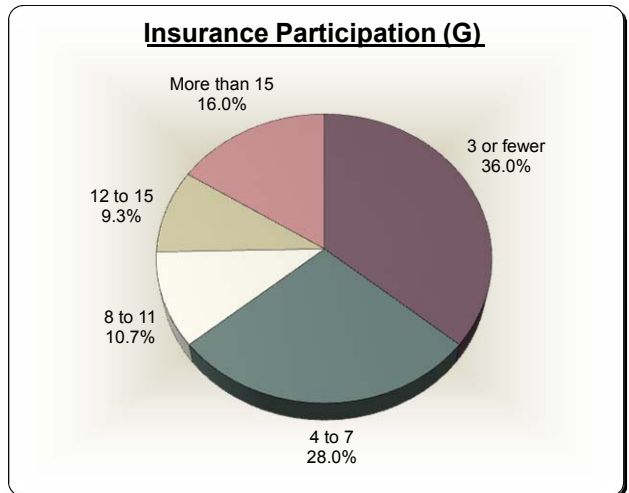
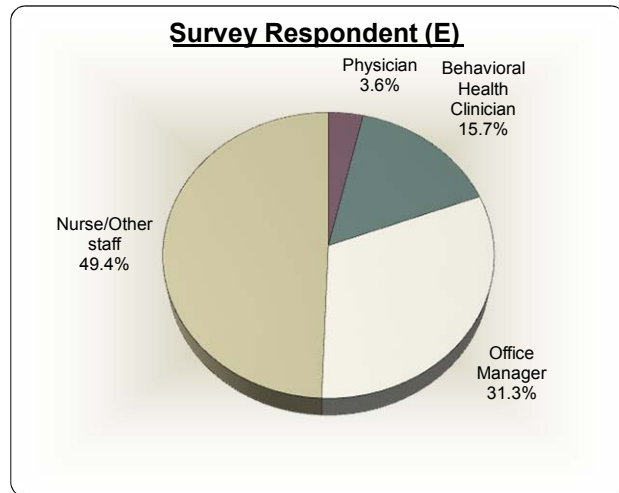
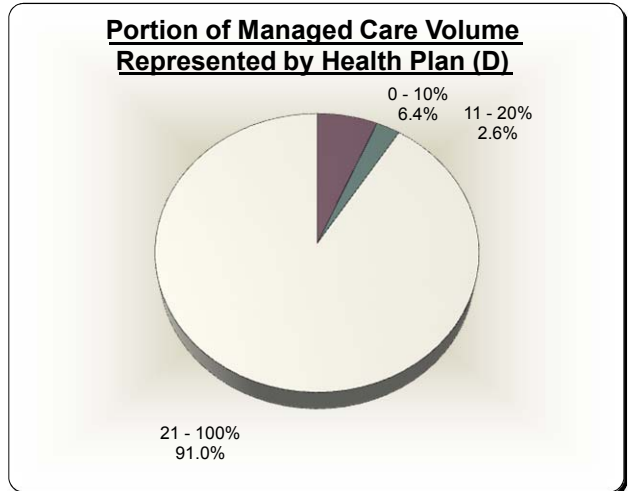
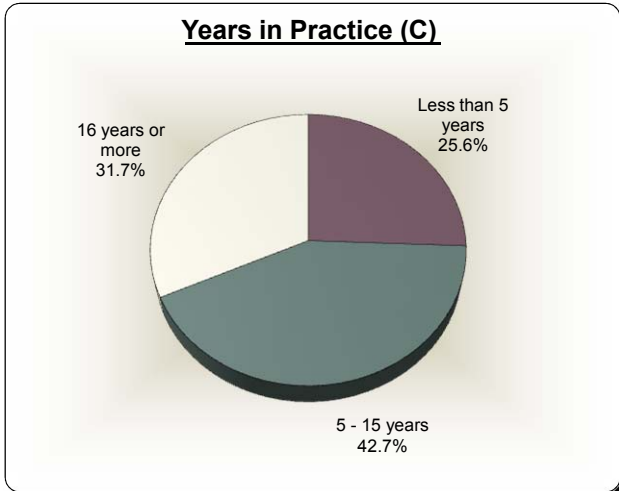
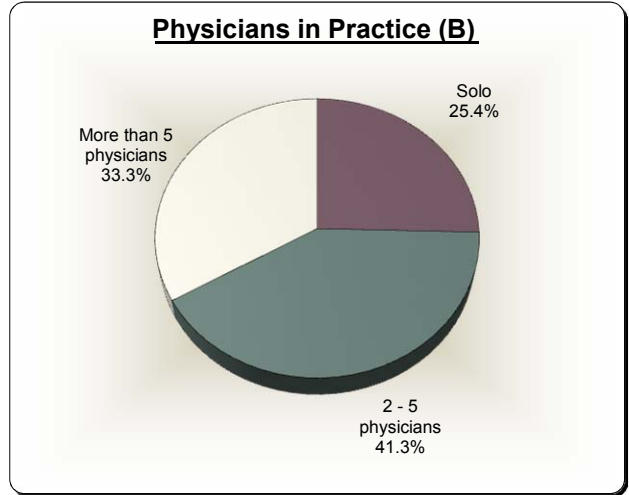
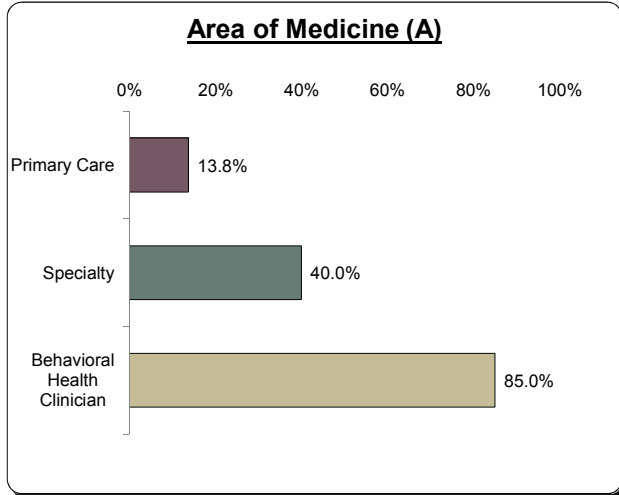
A *z-test* determines significant differences between the percentages, which are highlighted to help identify how your plan's population compares to the benchmark. See the *Technical Notes* for more information on this topic.

Charts 2A – 2C

Profile of Survey Respondents

Survey Demographics

86 Total Respondents



Note: The sum of responses for Area of Medicine may be greater than 100% as respondents are able to choose multiple response options.

Profile of Survey Respondents

Demographic Trending

Mercy Maricopa Integrated Care
Provider Satisfaction Survey

86 Total Respondents

		Current			
Demographic	Category	2016	2015	2014	
Survey Demographics	Area of Medicine (A)	Primary Care Specialty Behavioral Health Clinician	13.8% 40.0% 85.0%		
	Physicians in Practice (B)	Solo 2 - 5 physicians More than 5 physicians	25.4% 41.3% 33.3%		
	Years in Practice (C)	Less than 5 years 5 - 15 years 16 years or more	25.6% 42.7% 31.7%		
	Portion of Managed Care Volume Represented by Health Plan (D)	0 - 10% 11 - 20% 21 - 100%	6.4% 2.6% 91.0%		
	Survey Respondent (E)	Physician Behavioral Health Clinician Office Manager Nurse/Other staff	3.6% 15.7% 31.3% 49.4%		
	Insurance Participation (G)	3 or fewer 4 to 7 8 to 11 12 to 15 More than 15	36.0% 28.0% 10.7% 9.3% 16.0%		

Note: The sum of responses for Area of Medicine may be greater than 100% as respondents are able to choose multiple response options.

Profile of Survey Respondents

Benchmark Comparisons

Mercy Maricopa Integrated Care Provider Satisfaction Survey

86 Total Respondents

		Current			
Demographic	Category	2016	2015 SPHA Book of Business Benchmark*	Significance Testing**	
			Medicaid	Plan to Medicaid Benchmark	
Survey Demographics	Area of Medicine (A)	Primary Care	13.8%	59.8%	↓
		Specialty	40.0%	44.5%	↔
		Behavioral Health Clinician	85.0%	9.7%	↑
	Physicians in Practice (B)	Solo	25.4%	37.4%	↓
		2 - 5 physicians	41.3%	39.7%	↔
		More than 5 physicians	33.3%	22.9%	↑
	Years in Practice (C)	Less than 5 years	25.6%	20.5%	↔
		5 - 15 years	42.7%	35.4%	↔
		16 years or more	31.7%	44.1%	↓
	Portion of Managed Care Volume Represented by Health Plan (D)	0 - 10%	6.4%	43.2%	↓
		11 - 20%	2.6%	22.1%	↓
		21 - 100%	91.0%	34.7%	↑
	Survey Respondent (E)	Physician	3.6%	15.7%	↓
		Behavioral Health Clinician	15.7%	3.3%	—
		Office Manager	31.3%	48.0%	↓
		Nurse/Other staff	49.4%	33.0%	↑
	Insurance Participation (G)	3 or fewer	36.0%	2.0%	—
		4 to 7	28.0%	9.1%	↑
		8 to 11	10.7%	17.1%	↔
12 to 15		9.3%	15.5%	↔	
More than 15		16.0%	56.3%	↓	

* SPH Analytics's 2015 Medicaid Book of Business (B.o.B.) consists of data from 46 plans representing 13436 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information.

** Significance Testing - ↓ denotes plan percentage is significantly lower when compared to benchmark; ↑ denotes plan percentage is significantly higher when compared to benchmark; ↔ denotes that there was no significant difference between the percentages; — denotes that there was insufficient sample size to conduct the statistical test or there is no benchmark. All significance testing is performed at the 95% significance level.

Note: The sum of responses for Area of Medicine may be greater than 100% as respondents are able to choose multiple response options.

3. Summary of Benchmark Comparisons

Questions are combined into composite categories comprising a particular service area managed by your plan. These composites, the questions that make up the composites (attributes), and rating questions are shown on the following benchmark pages.

- Page 3A Summary of Benchmark Comparisons
Displays a comparison of Mercy Maricopa Integrated Care's Summary Rates to the Summary Rates of the 2015 SPH Analytics Medicaid and Aggregate Books of Business. Significant differences are highlighted.
- Page 3B Trend Comparisons – Graphical Representation
Graphical presentation comparing Mercy Maricopa Integrated Care's 2016 composite Summary Rates to trend results (if applicable).
- Page 3C Benchmark Comparisons – Percentiles
Displays a comparison of Mercy Maricopa Integrated Care's Summary Rates to the Summary Rate Percentiles of the 2015 SPH Analytics Medicaid Book of Business Percentiles. Attributes at or above the 75th percentile are shaded green, attributes at or above the 50th percentile but below the 75th percentile are shaded yellow, and attributes below the 25th percentile are shaded red. Attributes at or above the 25th percentile but below the 50th percentile and those attributes without a comparable benchmark are not shaded.
- Page 3D Benchmark Comparisons – Physician and Office Manager Respondents
The chart on page 3D compares Mercy Maricopa Integrated Care's Summary Rates from Physician and Office Manager respondents as defined by question E, *'Please mark who is completing this survey'* (response options: Physician, Behavioral Health Clinician, Office Manager, Nurse, Other staff) to the Summary Rates of Physician and Office Manager respondents from the 2015 SPH Analytics Medicaid Respondent-Level Benchmark. Significant differences are highlighted.
- Page 3E Benchmark Comparisons – Primary Care and Specialty Respondents
The chart on page 3E compares Mercy Maricopa Integrated Care's Summary Rates from respondents in the Primary Care and Specialty areas of medicine as defined by question A, *'Please indicate your area of medicine'* (response options: Primary Care, Specialty, and Behavioral Health Clinician) to the Summary Rates of Primary Care and Specialty area of medicine respondents from the 2015 SPH Analytics Medicaid Respondent-Level Benchmark. Significant differences are highlighted.

A brief description of each benchmark is included in the below table:

Benchmark	Definition	Contains Data From
2015 SPH Analytics Medicaid Book of Business	Contains data from all eligible Medicaid Provider Satisfaction surveys for which SPHA collected data. Calculated on the plan level.	<ul style="list-style-type: none"> • 46 plans
2015 SPH Analytics Medicaid Respondent-Level Benchmark	Contains data from all eligible Medicaid Provider Satisfaction surveys for which SPHA collected data. Calculated on the respondent level.	<ul style="list-style-type: none"> • 13,436 respondents
2015 SPH Analytics Aggregate Book of Business	Contains data from all eligible Aggregate Provider Satisfaction surveys for which SPHA collected data. Calculated on the plan level.	<ul style="list-style-type: none"> • 55 plans • 17,370 respondents

Charts 3A – 3E

Summary of Benchmark Comparisons

Composites and Attributes - Summary Rate Scores

Mercy Maricopa Integrated Care

Provider Satisfaction Survey

86 Total Respondents

Composites and Key Questions	Current		2015		2014		2015 SPHA Book of Business Benchmarks**	
	Valid n	Summary Rate*	Valid n	Summary Rate*	Valid n	Summary Rate	Medicaid	Aggregate
Overall Satisfaction								
7A. Would you recommend Mercy Maricopa Integrated Care to other physicians' practices?	74	85.1%					84.0%	84.4%
All Other Plans (Comparative Rating)								
1A. How would you rate Mercy Maricopa Integrated Care compared to all other health plans you contract with?	81	55.6%					35.9%	37.0%
Finance Issues		51.4%					32.7%	33.3%
2A. Consistency of reimbursement fees with your contract rates.	73	58.9%					30.5%	31.3%
2B. Accuracy of claims processing.	73	46.6%					35.1%	35.7%
2C. Timeliness of claims processing.	71	47.9%					35.1%	35.4%
2D. Resolution of claims payment problems or disputes.	71	52.1%					30.0%	30.9%
Utilization and Quality Management		48.8%					32.6%	33.4%
3A. Access to knowledgeable UM staff.	72	51.4%					30.9%	32.0%
3B. Procedures for obtaining pre-certification/referral/authorization information.	61	47.5%					31.5%	32.3%
3C. Timeliness of obtaining pre-certification/referral/authorization information.	59	45.8%					32.0%	33.0%
3D. The health plan's facilitation/support of appropriate clinical care for patients.	68	47.1%					31.1%	31.9%
3E. Access to Case/Care Managers from this health plan.	67	49.3%					30.8%	31.4%
3F. Degree to which the plan covers and encourages preventive care and wellness.	66	51.5%					39.6%	39.7%
Network/Coordination of Care		38.4%					29.0%	30.1%
4A. The number of specialists in this health plan's provider network.	59	44.1%					27.0%	28.0%
4B. The quality of specialists in this health plan's provider network.	59	39.0%					32.9%	34.3%
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	56	32.1%					27.0%	28.1%
Health Plan Call Center Service Staff		56.6%					40.3%	41.4%
5A. Ease of reaching health plan call center staff over the phone.	64	56.3%					38.7%	40.0%
5B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	64	57.8%					43.4%	44.2%
5C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	62	56.5%					38.2%	39.2%
5D. Overall satisfaction with health plan's call center service.	68	55.9%					41.0%	42.1%
Provider Relations		52.3%					37.7%	38.2%
6A. Do you have a Provider Relations representative from this health plan assigned to your practice?	70	85.7%					53.1%	49.1%
6B. Provider Relations representative's ability to answer questions and resolve problems.	58	50.0%					49.9%	51.3%
6C. Quality of provider orientation process.	67	46.3%					30.1%	29.9%
6D. Quality of written communications, policy bulletins, and manuals.	76	60.5%					33.2%	33.4%

* Summary Rates represent the most favorable response percentage(s).

** SPH Analytics's 2015 Medicaid Book of Business consists of data from 46 plans representing 13436 respondents, while the Aggregate Book of Business consists of data from 55 plans representing 17370 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information.

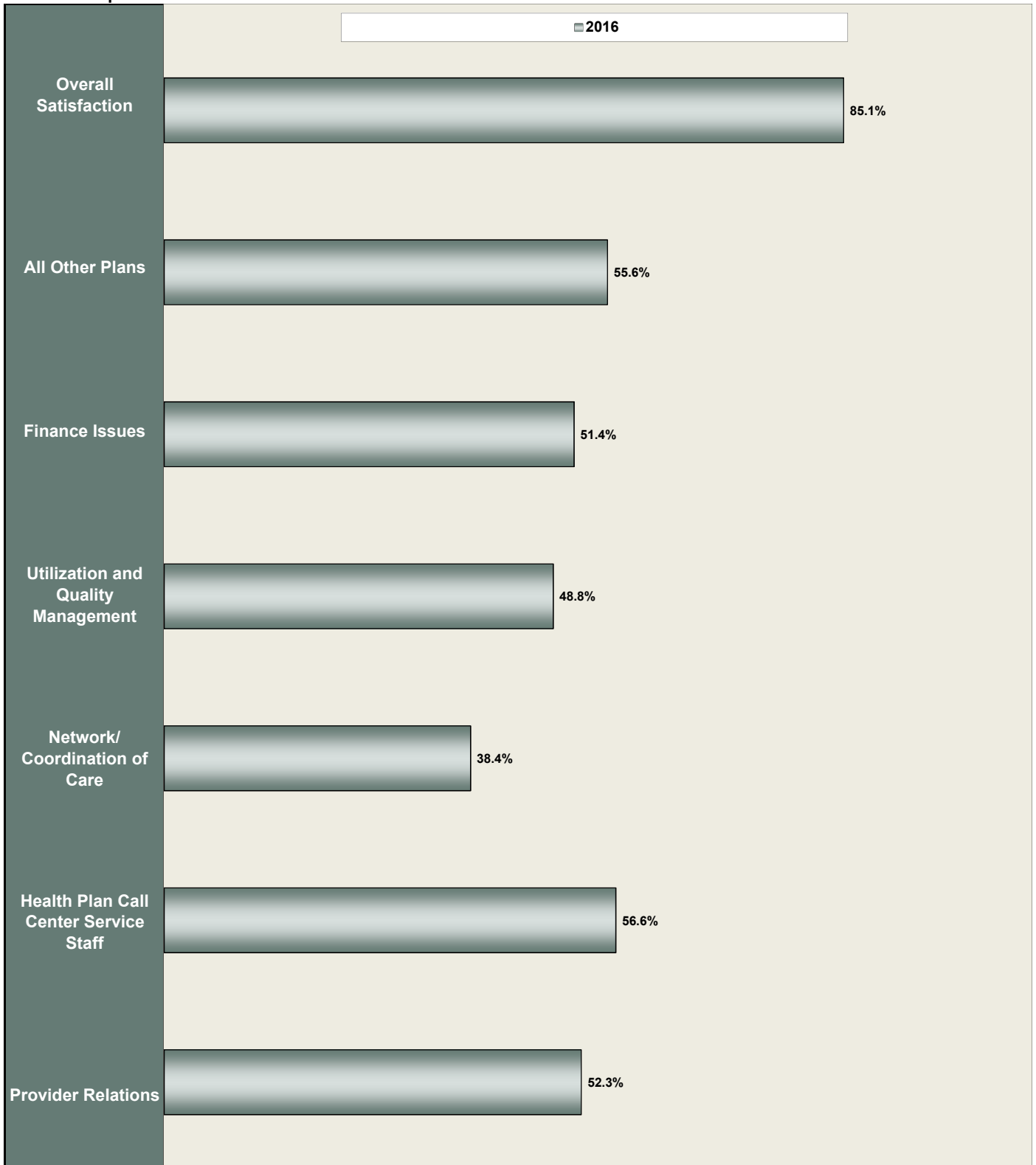
Note 1: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to trend or benchmark data; Cells highlighted in green denote current year plan percentage is significantly higher when compared to trend or benchmark data; No shading denotes that there was no significant difference between the percentages, there is no benchmark, or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Note 2: The Provider Relations composite is the average of 6B through 6D. It does not include 6A.

Trend Comparisons

Composites

86 Total Respondents



Note 1: The Overall Satisfaction composite represents only Q7A, 'Would you recommend Mercy Maricopa Integrated Care' to other physicians' practices.
Note 2: The Provider Relations composite is the average of Q6B through Q6D. It does not include Q6A, 'Do you have a Provider Relations representative from this health plan assigned to your practice?'

Benchmark Comparisons


2015 SPH Analytics Medicaid Book of Business Percentiles

Mercy Maricopa Integrated Care


Provider Satisfaction Survey


86 Total Respondents

Composite/Attribute	2016 Mercy Maricopa Summary Rate Score*	Percentile Ranking	2015 SPHA B.o.B. Summary Rate**	2015 SPHA Medicaid B.o.B. Percentiles			
				25th	50th	75th	90th
Overall Satisfaction							
7A. Would you recommend Mercy Maricopa Integrated Care to other physicians' practices?	85.1%	47th	84.0%	78.4%	85.2%	91.7%	94.8%
All Other Plans (Comparative Rating)							
1A. How would you rate Mercy Maricopa Integrated Care compared to all other health plans you contract with?	55.6%	88th	35.9%	26.7%	33.7%	44.2%	56.1%
Finance Issues	51.4%	97th	32.7%	26.4%	30.1%	38.9%	49.7%
2A. Consistency of reimbursement fees with your contract rates.	58.9%	99th	30.5%	22.5%	28.5%	37.9%	46.9%
2B. Accuracy of claims processing.	46.6%	79th	35.1%	27.8%	32.0%	40.4%	53.6%
2C. Timeliness of claims processing.	47.9%	85th	35.1%	27.4%	32.5%	40.6%	51.8%
2D. Resolution of claims payment problems or disputes.	52.1%	97th	30.0%	22.8%	28.6%	35.4%	45.4%
Utilization and Quality Management	48.8%	88th	32.6%	24.1%	30.8%	40.6%	49.6%
3A. Access to knowledgeable UM staff.	51.4%	94th	30.9%	21.9%	29.0%	38.1%	48.0%
3B. Procedures for obtaining pre-certification/referral/authorization information.	47.5%	88th	31.5%	23.4%	29.6%	39.3%	50.2%
3C. Timeliness of obtaining pre-certification/referral/authorization information.	45.8%	87th	32.0%	24.2%	30.7%	39.5%	49.3%
3D. The health plan's facilitation/support of appropriate clinical care for patients.	47.1%	90th	31.1%	23.1%	29.5%	39.1%	46.9%
3E. Access to Case/Care Managers from this health plan.	49.3%	94th	30.8%	22.4%	30.2%	38.4%	46.1%
3F. Degree to which the plan covers and encourages preventive care and wellness.	51.5%	81st	39.6%	30.6%	38.0%	46.4%	56.0%
Network/Coordination of Care	38.4%	75th	29.0%	21.4%	26.3%	37.5%	42.7%
4A. The number of specialists in this health plan's provider network.	44.1%	89th	27.0%	18.4%	23.2%	34.9%	44.2%
4B. The quality of specialists in this health plan's provider network.	39.0%	67th	32.9%	24.3%	30.0%	42.3%	47.4%
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	32.1%	79th	27.0%	22.1%	25.2%	31.3%	39.4%
Health Plan Call Center Service Staff	56.6%	90th	40.3%	30.3%	38.1%	50.9%	56.5%
5A. Ease of reaching health plan call center staff over the phone.	56.3%	91st	38.7%	29.8%	36.2%	48.3%	55.2%
5B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	57.8%	87th	43.4%	35.2%	43.5%	50.5%	58.9%
5C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	56.5%	90th	38.2%	28.1%	35.5%	47.3%	56.1%
5D. Overall satisfaction with health plan's call center service.	55.9%	83rd	41.0%	31.3%	39.6%	49.2%	59.1%
Provider Relations	52.3%	81st	37.7%	27.3%	35.9%	45.5%	57.4%
6A. Do you have a Provider Relations representative from this health plan assigned to your practice?	85.7%	94th	53.1%	41.9%	52.3%	62.3%	78.7%
6B. Provider Relations representative's ability to answer questions and resolve problems.	50.0%	45th	49.9%	38.0%	51.6%	63.0%	66.6%
6C. Quality of provider orientation process.	46.3%	83rd	30.1%	20.8%	27.4%	36.5%	50.3%
6D. Quality of written communications, policy bulletins, and manuals.	60.5%	96th	33.2%	23.2%	30.1%	40.8%	54.6%

 At or above the 75th percentile.

 At or above the 50th percentile, but below the 75th percentile.

 At or above the 25th percentile, but below the 50th percentile; or no benchmark.

 Below the 25th percentile.

* Summary Rate Scores represent the most favorable response percentage(s).

** SPH Analytics's 2015 Medicaid Book of Business consists of data from 46 plans representing 13436 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information.

Note 1: The Provider Relations composite is the average of 6B through 6D. It does not include 6A.

Benchmark Comparisons

2015 SPH Analytics Medicaid Respondent-Level Benchmark

Survey Respondent (E)

3 Total Physician Respondents
26 Total Office Manager Respondents

Composite/Attribute	2016 Mercy Maricopa Physicians Only		2015 SPHA Medicaid Respondent-Level Benchmark** (Physicians Only) SRS*	2016 Mercy Maricopa Office Managers Only		2015 SPHA Medicaid Respondent-Level Benchmark** (Office Managers Only) SRS*
	Valid n	SRS*		Valid n	SRS*	
Overall Satisfaction						
7A. Would you recommend Mercy Maricopa Integrated Care to other physicians' practices?	2	100.0%	80.2%	25	92.0%	86.6%
All Other Plans (Comparative Rating)						
1A. How would you rate Mercy Maricopa Integrated Care compared to all other health plans you contract with?	3	100.0%	48.7%	23	69.6%	36.8%
Finance Issues		62.5%	45.3%		47.8%	34.0%
2A. Consistency of reimbursement fees with your contract rates.	2	0.0%	42.8%	19	63.2%	32.1%
2B. Accuracy of claims processing.	2	100.0%	47.8%	19	31.6%	36.2%
2C. Timeliness of claims processing.	2	100.0%	47.5%	19	31.6%	36.9%
2D. Resolution of claims payment problems or disputes.	2	50.0%	43.3%	20	65.0%	30.8%
Utilization and Quality Management		83.3%	43.3%		49.3%	33.6%
3A. Access to knowledgeable UM staff.	2	100.0%	41.7%	23	52.2%	32.1%
3B. Procedures for obtaining pre-certification/referral/authorization information.	2	100.0%	41.1%	21	47.6%	32.7%
3C. Timeliness of obtaining pre-certification/referral/authorization information.	2	100.0%	41.5%	21	47.6%	32.5%
3D. The health plan's facilitation/support of appropriate clinical care for patients.	2	100.0%	43.6%	23	43.5%	31.4%
3E. Access to Case/Care Managers from this health plan.	2	100.0%	42.3%	23	47.8%	31.9%
3F. Degree to which the plan covers and encourages preventive care and wellness.	2	0.0%	49.6%	21	57.1%	41.3%
Network/Coordination of Care		66.7%	41.8%		37.4%	28.7%
4A. The number of specialists in this health plan's provider network.	2	50.0%	39.2%	19	42.1%	27.0%
4B. The quality of specialists in this health plan's provider network.	2	50.0%	46.4%	19	36.8%	32.4%
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	2	100.0%	40.0%	18	33.3%	26.7%
Health Plan Call Center Service Staff		62.5%	46.5%		75.4%	42.2%
5A. Ease of reaching health plan call center staff over the phone.	2	50.0%	44.7%	23	69.6%	40.1%
5B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	2	50.0%	47.5%	21	76.2%	46.5%
5C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	2	50.0%	46.5%	21	81.0%	39.9%
5D. Overall satisfaction with health plan's call center service.	2	100.0%	47.0%	24	75.0%	42.3%
Provider Relations		66.7%	49.3%		60.0%	41.1%
6A. Do you have a Provider Relations representative from this health plan assigned to your practice?	2	50.0%	49.3%	22	95.5%	62.2%
6B. Provider Relations representative's ability to answer questions and resolve problems.	1	0.0%	60.7%	21	57.1%	54.9%
6C. Quality of provider orientation process.	1	100.0%	42.4%	20	55.0%	33.0%
6D. Quality of written communications, policy bulletins, and manuals.	2	100.0%	44.7%	25	68.0%	35.3%

* Summary Rate Scores (SRS) represent the most favorable response option(s).

** The 2015 SPH Analytics Medicaid Book of Business Benchmark consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians. These benchmark comparisons are based on respondent-level results. Please see the Technical Notes for further detail.

Note 1: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; Cells highlighted in green denote current year plan percentage is significantly higher when compared to benchmark data; No shading denotes that there was no significant difference between the percentages, there is no benchmark, or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Note 2: The Provider Relations composite is the average of 6B through 6D. It does not include 6A.

Benchmark Comparisons

2015 SPH Analytics Medicaid Respondent-Level Benchmark

Area of Medicine (A)

11 Total Primary Care Respondents

32 Total Specialty Respondents

Composite/Attribute	2016 Mercy Maricopa Primary Care Only		2015 SPHA Medicaid Respondent-Level Benchmark** (Primary Care Only) SRS*	2016 Mercy Maricopa Specialty Only		2015 SPHA Medicaid Respondent-Level Benchmark** (Specialty Only) SRS*
	Valid n	SRS*		Valid n	SRS*	
Overall Satisfaction						
7A. Would you recommend Mercy Maricopa Integrated Care to other physicians' practices?	7	71.4%	86.2%	28	78.6%	83.8%
All Other Plans (Comparative Rating)						
1A. How would you rate Mercy Maricopa Integrated Care compared to all other health plans you contract with?	11	45.5%	38.8%	29	58.6%	36.8%
Finance Issues		56.3%	35.7%		45.4%	32.2%
2A. Consistency of reimbursement fees with your contract rates.	8	62.5%	33.2%	27	55.6%	29.9%
2B. Accuracy of claims processing.	8	50.0%	38.1%	27	33.3%	34.1%
2C. Timeliness of claims processing.	8	50.0%	38.2%	27	40.7%	34.8%
2D. Resolution of claims payment problems or disputes.	8	62.5%	33.4%	27	51.9%	30.1%
Utilization and Quality Management		45.2%	35.3%		38.2%	33.8%
3A. Access to knowledgeable UM staff.	7	28.6%	33.5%	28	50.0%	32.4%
3B. Procedures for obtaining pre-certification/referral/authorization information.	8	50.0%	33.1%	22	31.8%	34.2%
3C. Timeliness of obtaining pre-certification/referral/authorization information.	8	50.0%	33.3%	22	31.8%	34.3%
3D. The health plan's facilitation/support of appropriate clinical care for patients.	7	57.1%	33.6%	23	34.8%	32.1%
3E. Access to Case/Care Managers from this health plan.	7	42.9%	33.4%	23	39.1%	32.3%
3F. Degree to which the plan covers and encourages preventive care and wellness.	7	42.9%	45.0%	24	41.7%	37.4%
Network/Coordination of Care		56.7%	30.9%		25.8%	30.3%
4A. The number of specialists in this health plan's provider network.	5	60.0%	29.8%	22	27.3%	27.9%
4B. The quality of specialists in this health plan's provider network.	5	60.0%	34.6%	22	27.3%	34.3%
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	6	50.0%	28.3%	22	22.7%	28.7%
Health Plan Call Center Service Staff		29.8%	42.5%		53.5%	42.2%
5A. Ease of reaching health plan call center staff over the phone.	7	28.6%	40.9%	22	45.5%	40.5%
5B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	7	28.6%	46.6%	20	55.0%	45.5%
5C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	6	33.3%	40.2%	21	57.1%	40.5%
5D. Overall satisfaction with health plan's call center service.	7	28.6%	42.2%	23	56.5%	42.2%
Provider Relations		52.4%	44.1%		57.0%	38.2%
6A. Do you have a Provider Relations representative from this health plan assigned to your practice?	6	66.7%	66.1%	24	83.3%	52.8%
6B. Provider Relations representative's ability to answer questions and resolve problems.	4	50.0%	56.4%	20	55.0%	52.3%
6C. Quality of provider orientation process.	6	50.0%	36.9%	25	48.0%	29.2%
6D. Quality of written communications, policy bulletins, and manuals.	7	57.1%	39.1%	28	67.9%	32.9%

* Summary Rate Scores (SRS) represent the most favorable response option(s).

** The 2015 SPH Analytics Medicaid Book of Business Benchmark consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians. These benchmark comparisons are based on respondent-level results. Please see the Technical Notes for further detail.

Note 1: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to benchmark data; Cells highlighted in green denote current year plan percentage is significantly higher when compared to benchmark data; No shading denotes that there was no significant difference between the percentages, there is no benchmark, or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Note 2: The Provider Relations composite is the average of 6B through 6D. It does not include 6A.

4. *Composite Analyses*

The *Composite Analyses* section provides in-depth examination of the following composite features:

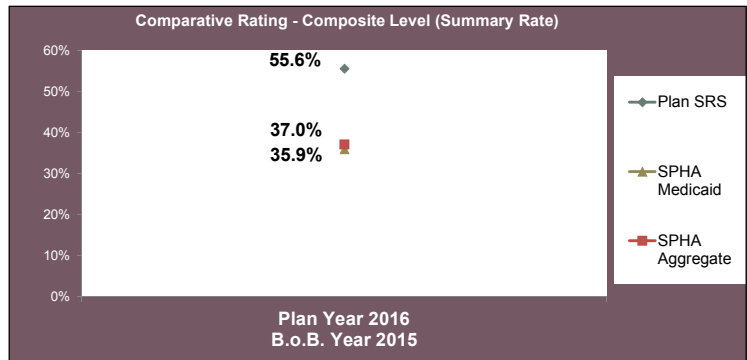
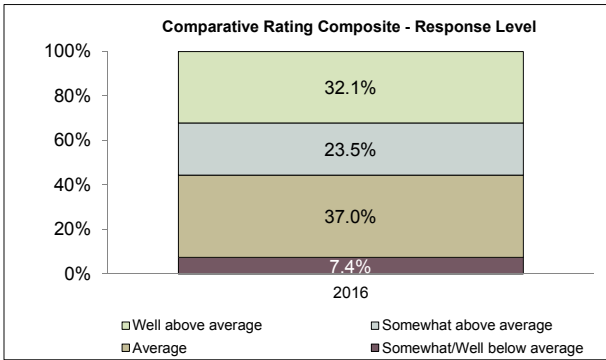
- ☑ Response Level Percentages – graphical display of composite responses. This graph provides a breakdown of the composite response distributions for current and trend data (if applicable), namely, ‘Well above average,’ ‘Somewhat above average,’ ‘Average,’ and ‘Somewhat/Well below average’ for all composites.
- ☑ Composite Level (Summary Rate) – graphical display of the composite and benchmark Summary Rate Scores. This graph plots where the composite Summary Rate Score falls in relation to trend data (if applicable) and the 2015 Medicaid and Aggregate benchmark Summary Rate Scores.
- ☑ Top Box Scores – displays the top response percentages. Top Box Scores and valid n’s for 2016 are compared to trend data (if applicable) and the 2015 Medicaid and Aggregate benchmark Top Box Scores.
- ☑ Summary Rate Scores – displays the top two response percentages. Summary Rate Scores and valid n’s for 2016 are compared to trend data (if applicable) and the 2015 Medicaid and Aggregate benchmark Summary Rate Scores.
- ☑ Summary Rate and Top Box Scores for 2016 are compared to the 2015 SPH Analytics Medicaid Book of Business percentile scores. Percentile threshold rankings are displayed for the average, 25th percentile, 50th percentile, 75th percentile, and 90th percentile. Plan scores are displayed as they emerge along the percentile continuum with an explanation of findings.

Charts 4A – 4F

Composite Analysis

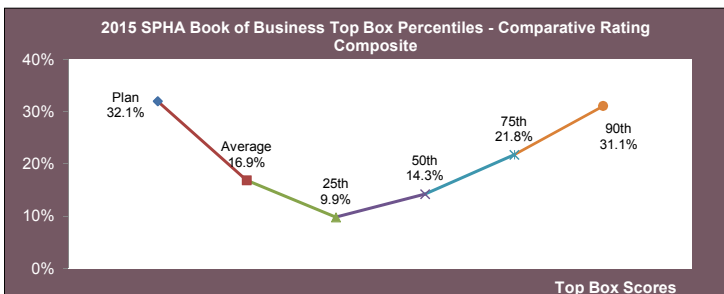
Comparative Rating - Top Box and Summary Rate Scores

81 Total Comparative Rating Respondents

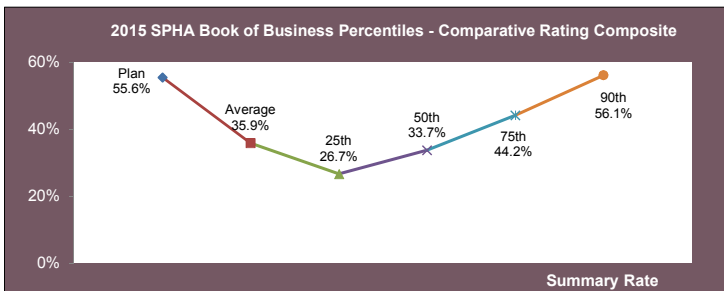


Top Box Score*	Attribute	2016		2015		2014		2015 SPHA Book of Business**	
		n	Top Box Score*	n	Top Box Score*	n	Top Box Score*	Medicaid	Aggregate
Comparative Rating									
	1A. How would you rate Mercy Maricopa Integrated Care compared to all other health plans you contract with?	81	32.1%					16.9%	17.0%

Summary Rate Score*	Attribute	2016		2015		2014		2015 SPHA Book of Business**	
		n	SRS*	n	SRS*	n	SRS*	Medicaid	Aggregate
Comparative Rating									
	1A. How would you rate Mercy Maricopa Integrated Care compared to all other health plans you contract with?	81	55.6%					35.9%	37.0%



Your 2016 Top Box Summary Rate for the Comparative Rating composite is 32.1%, which is significantly above SPHA's 2015 Medicaid Book of Business Top Box Summary Rate Score of 16.9%.



Your 2016 Summary Rate for the Comparative Rating composite is 55.6%, which is significantly above SPHA's 2015 Medicaid Book of Business Summary Rate Score of 35.9%.

* Top Box Scores represent the top response percentage ("Well above average"). Summary Rate Scores represent the top two response percentages ("Well above average" and "Somewhat above average").

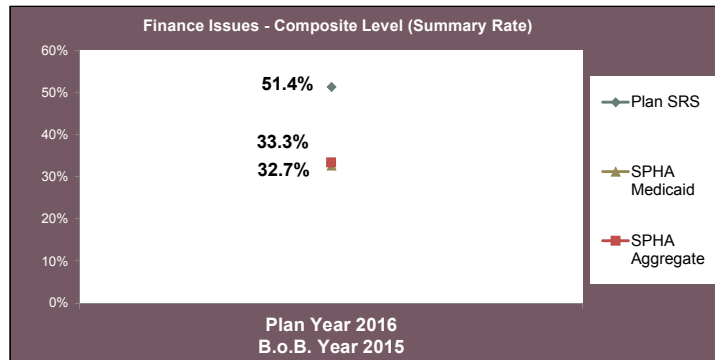
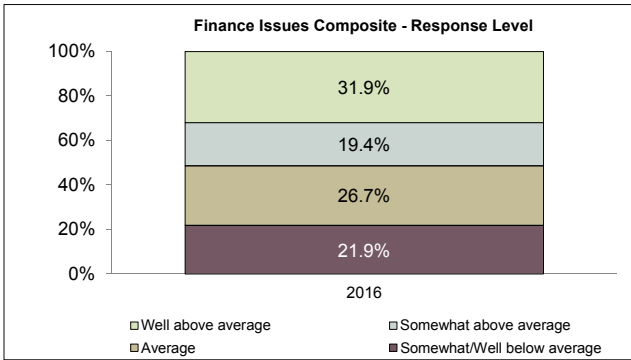
** SPH Analytics's 2015 Medicaid Book of Business consists of data from 46 plans representing 13436 respondents, while the Aggregate Book of Business consists of data from 55 plans representing 17370 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information.

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to trend or benchmark data; cells highlighted in green denote current year percentage is significantly higher when compared to trend or benchmark data; no shading denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Composite Analysis

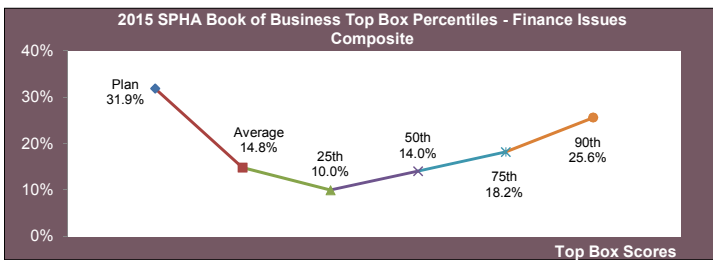
Finance Issues - Top Box and Summary Rate Scores

73 Total Finance Issues Respondents

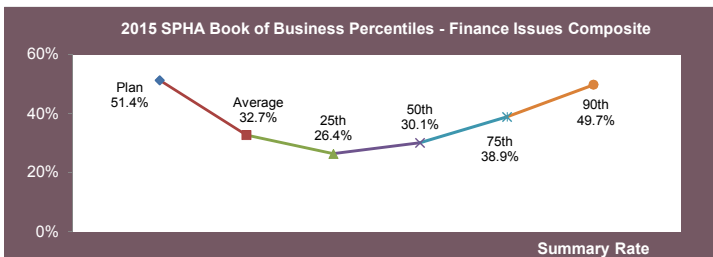


Top Box Scores*	Composite and Attributes		2016		2015		2014		2015 SPHA Book of Business**	
	n	Top Box Score*	n	Top Box Score*	n	Top Box Score*	Medicaid	Aggregate		
Finance Issues		31.9%					14.8%	15.2%		
2A. Consistency of reimbursement fees with your contract rates.	73	39.7%					13.6%	14.0%		
2B. Accuracy of claims processing.	73	24.7%					15.8%	16.4%		
2C. Timeliness of claims processing.	71	29.6%					16.4%	16.4%		
2D. Resolution of claims payment problems or disputes.	71	33.8%					13.6%	14.0%		

Summary Rate Scores*	Composite and Attributes		2016		2015		2014		2015 SPHA Book of Business**	
	n	SRS*	n	SRS*	n	SRS*	Medicaid	Aggregate		
Finance Issues		51.4%					32.7%	33.3%		
2A. Consistency of reimbursement fees with your contract rates.	73	58.9%					30.5%	31.3%		
2B. Accuracy of claims processing.	73	46.6%					35.1%	35.7%		
2C. Timeliness of claims processing.	71	47.9%					35.1%	35.4%		
2D. Resolution of claims payment problems or disputes.	71	52.1%					30.0%	30.9%		



Your 2016 Top Box Summary Rate for the Finance Issues composite is 31.9%, which is significantly above SPHA's 2015 Medicaid Book of Business Top Box Summary Rate Score of 14.8%.



Your 2016 Summary Rate for the Finance Issues composite is 51.4%, which is significantly above SPHA's 2015 Medicaid Book of Business Summary Rate Score of 32.7%.

* Top Box Scores represent the top response percentage ("Well above average"). Summary Rate Scores represent the top two response percentages ("Well above average" and "Somewhat above average").

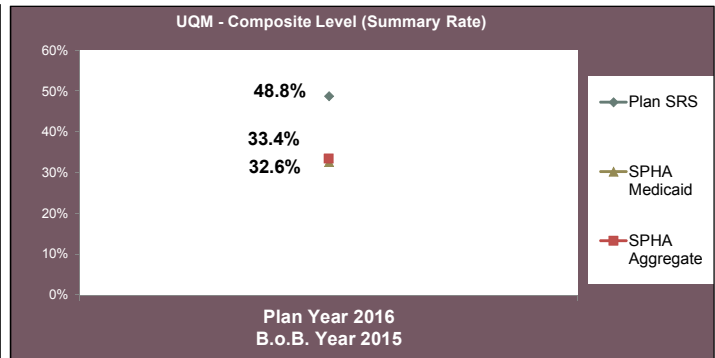
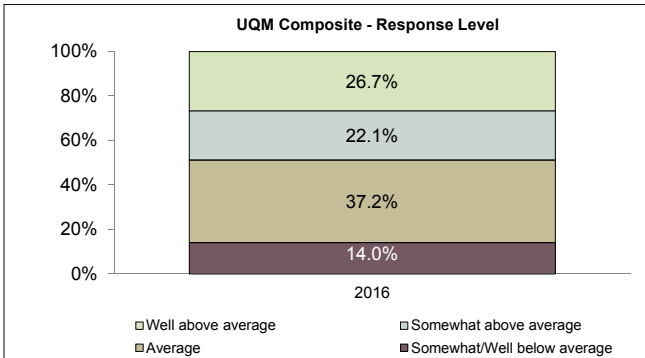
** SPH Analytics's 2015 Medicaid Book of Business consists of data from 46 plans representing 13436 respondents, while the Aggregate Book of Business consists of data from 55 plans representing 17370 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information.

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to trend or benchmark data; cells highlighted in green denote current year plan percentage is significantly higher when compared to trend or benchmark data; no shading denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Composite Analysis

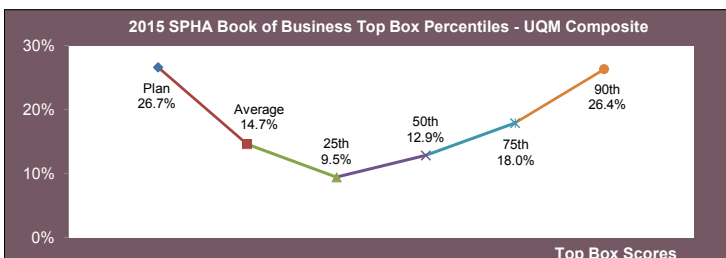
Utilization and Quality Management - Top Box and Summary Rate Scores

72 Total Utilization and Quality Management Respondents

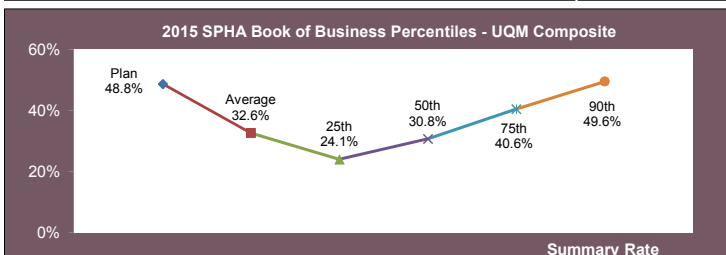


Top Box Scores*	Composite and Attributes		2016		2015		2014		2015 SPHA Book of Business**	
	n	Top Box Score*	n	Top Box Score*	n	Top Box Score*	Medicaid	Aggregate		
Utilization and Quality Management		26.7%					14.7%	15.1%		
3A. Access to knowledgeable UM staff.	72	26.4%					13.4%	14.0%		
3B. Procedures for obtaining pre-certification/referral/authorization information.	61	21.3%					13.7%	14.3%		
3C. Timeliness of obtaining pre-certification/referral/authorization information.	59	16.9%					14.2%	14.7%		
3D. The health plan's facilitation/support of appropriate clinical care for patients.	68	32.4%					13.8%	14.1%		
3E. Access to Case/Care Managers from this health plan.	67	32.8%					13.9%	14.3%		
3F. Degree to which the plan covers and encourages preventive care and wellness.	66	30.3%					19.0%	19.1%		

Summary Rate Scores*	Composite and Attributes		2016		2015		2014		2015 SPHA Book of Business**	
	n	SRS*	n	SRS*	n	SRS*	Medicaid	Aggregate		
Utilization and Quality Management		48.8%					32.6%	33.4%		
3A. Access to knowledgeable UM staff.	72	51.4%					30.9%	32.0%		
3B. Procedures for obtaining pre-certification/referral/authorization information.	61	47.5%					31.5%	32.3%		
3C. Timeliness of obtaining pre-certification/referral/authorization information.	59	45.8%					32.0%	33.0%		
3D. The health plan's facilitation/support of appropriate clinical care for patients.	68	47.1%					31.1%	31.9%		
3E. Access to Case/Care Managers from this health plan.	67	49.3%					30.8%	31.4%		
3F. Degree to which the plan covers and encourages preventive care and wellness.	66	51.5%					39.6%	39.7%		



Your 2016 Top Box Summary Rate for the Utilization and Quality Management composite is 26.7%, which is significantly above SPHA's 2015 Medicaid Book of Business Top Box Summary Rate Score of 14.7%.



Your 2016 Summary Rate for the Utilization and Quality Management composite is 48.8%, which is significantly above SPHA's 2015 Medicaid Book of Business Summary Rate Score of 32.6%.

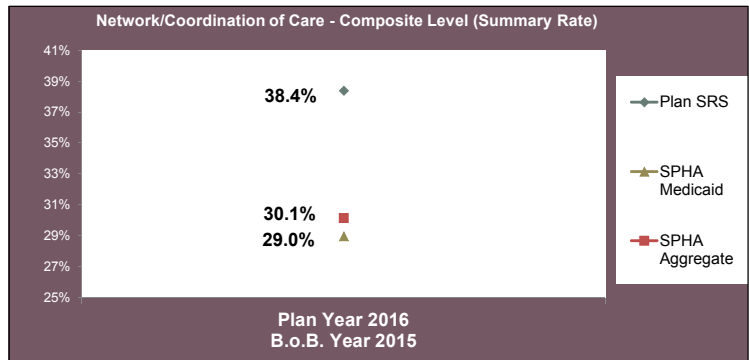
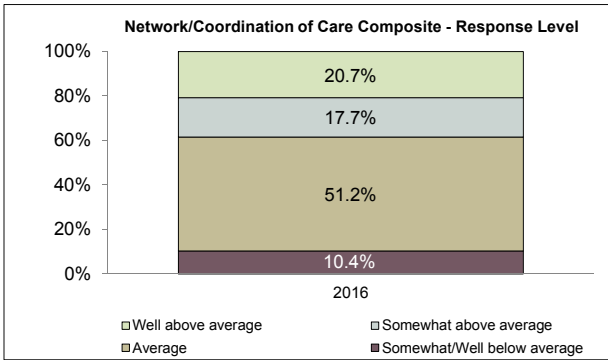
* Top Box Scores represent the top response percentage ("Well above average"). Summary Rate Scores represent the top two response percentages ("Well above average" and "Somewhat above average").
 ** SPH Analytics's 2015 Medicaid Book of Business consists of data from 46 plans representing 13436 respondents, while the Aggregate Book of Business consists of data from 55 plans representing 17370 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information.
 Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to trend or benchmark data; cells highlighted in green denote current year plan percentage is significantly higher when compared to trend or benchmark data; no shading denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Composite Analysis

Network/Coordination of Care - Top Box and Summary Rate Scores

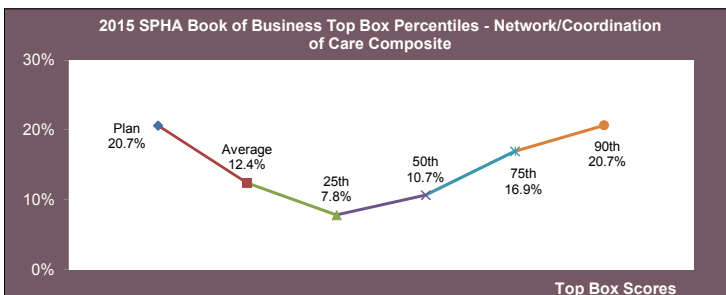
Provider Satisfaction Survey

59 Total Network/Coordination of Care Respondents

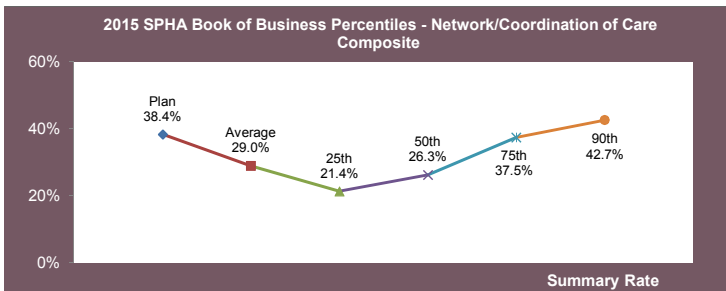


Top Box Scores*	Composite and Attributes		2016		2015		2014		2015 SPHA Book of Business**	
	n	Top Box Score*	n	Top Box Score*	n	Top Box Score*	Medicaid	Aggregate		
		20.7%					12.4%	12.9%		
4A. The number of specialists in this health plan's provider network.	59	22.0%					11.5%	11.9%		
4B. The quality of specialists in this health plan's provider network.	59	20.3%					14.5%	15.2%		
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	56	19.6%					11.2%	11.5%		

Summary Rate Scores*	Composite and Attributes		2016		2015		2014		2015 SPHA Book of Business**	
	n	SRS*	n	SRS*	n	SRS*	Medicaid	Aggregate		
		38.4%					29.0%	30.1%		
4A. The number of specialists in this health plan's provider network.	59	44.1%					27.0%	28.0%		
4B. The quality of specialists in this health plan's provider network.	59	39.0%					32.9%	34.3%		
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	56	32.1%					27.0%	28.1%		



Your 2016 Top Box Summary Rate for the Network/Coordination of Care composite is 20.7%, which is not significantly different from SPHA's 2015 Medicaid Book of Business Top Box Summary Rate Score of 12.4%.



Your 2016 Summary Rate for the Network/Coordination of Care composite is 38.4%, which is not significantly different from SPHA's 2015 Medicaid Book of Business Summary Rate Score of 29.0%.

* Top Box Scores represent the top response percentage ("Well above average"). Summary Rate Scores represent the top two response percentages ("Well above average" and "Somewhat above average").

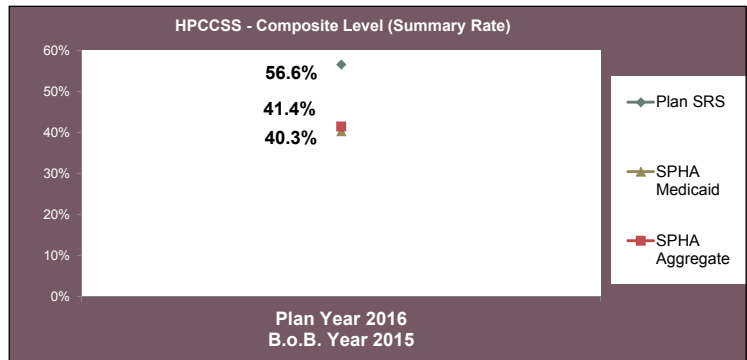
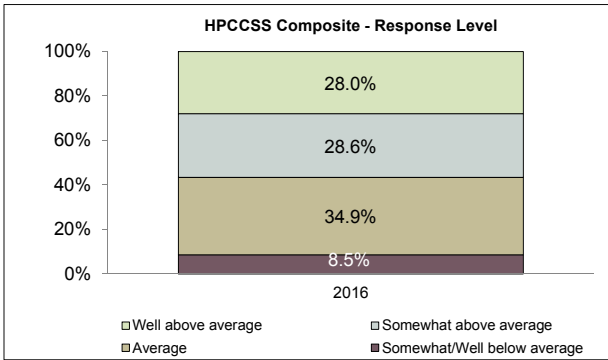
** SPH Analytics's 2015 Medicaid Book of Business consists of data from 46 plans representing 13436 respondents, while the Aggregate Book of Business consists of data from 55 plans representing 17370 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information.

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to trend or benchmark data; cells highlighted in green denote current year plan percentage is significantly higher when compared to trend or benchmark data; no shading denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Composite Analysis

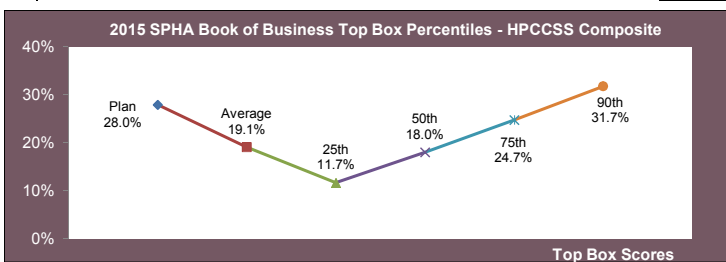
Health Plan Call Center Service Staff - Top Box and Summary Rate Scores

68 Total Health Plan Call Center Service Staff Respondents

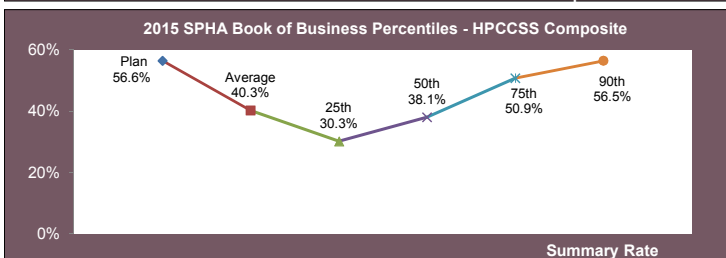


Top Box Scores*	Composite and Attributes		2016		2015		2014		2015 SPHA Book of Business**	
	n	Top Box Score*	n	Top Box Score*	n	Top Box Score*	Medicaid	Aggregate		
Health Plan Call Center Service Staff		28.0%					19.1%	20.0%		
5A. Ease of reaching health plan call center staff over the phone.	64	23.4%					18.3%	19.3%		
5B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	64	34.4%					21.4%	21.9%		
5C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	62	29.0%					17.7%	18.8%		
5D. Overall satisfaction with health plan's call center service.	68	25.0%					19.1%	20.0%		

Summary Rate Scores*	Composite and Attributes		2016		2015		2014		2015 SPHA Book of Business**	
	n	SRS*	n	SRS*	n	SRS*	Medicaid	Aggregate		
Health Plan Call Center Service Staff		56.6%					40.3%	41.4%		
5A. Ease of reaching health plan call center staff over the phone.	64	56.3%					38.7%	40.0%		
5B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	64	57.8%					43.4%	44.2%		
5C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	62	56.5%					38.2%	39.2%		
5D. Overall satisfaction with health plan's call center service.	68	55.9%					41.0%	42.1%		



Your 2016 Top Box Summary Rate for the Health Plan Call Center Service Staff composite is 28.0%, which is not significantly different from SPHA's 2015 Medicaid Book of Business Top Box Summary Rate Score of 19.1%.



Your 2016 Summary Rate for the Health Plan Call Center Service Staff composite is 56.6%, which is significantly above SPHA's 2015 Medicaid Book of Business Summary Rate Score of 40.3%.

* Top Box Scores represent the top response percentage ("Well above average"). Summary Rate Scores represent the top two response percentages ("Well above average" and "Somewhat above average").

** SPH Analytics's 2015 Medicaid Book of Business consists of data from 46 plans representing 13436 respondents, while the Aggregate Book of Business consists of data from 55 plans representing 17370 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information.

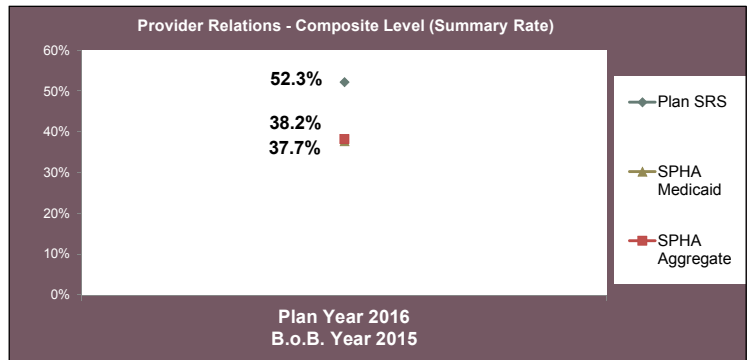
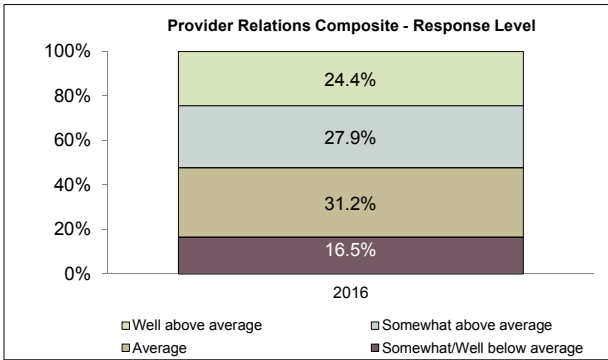
Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to trend or benchmark data; cells highlighted in green denote current year plan percentage is significantly higher when compared to trend or benchmark data; no shading denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Composite Analysis

Provider Relations - Top Box and Summary Rate Scores

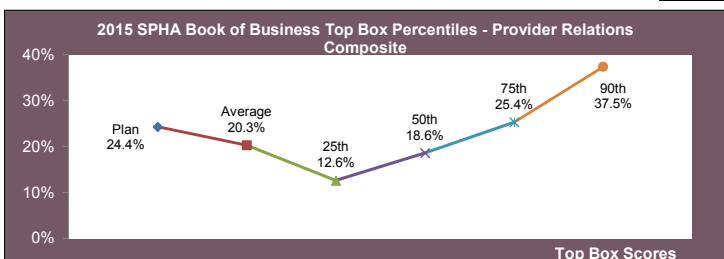
Provider Satisfaction Survey

76 Total Provider Relations Respondents

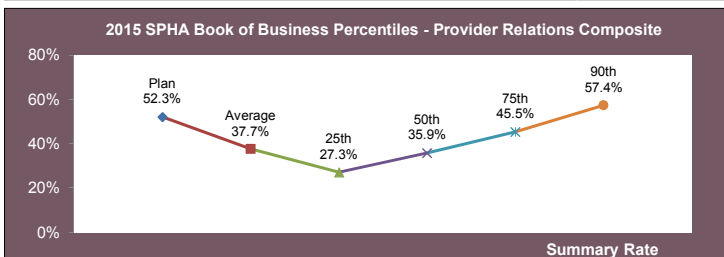


Top Box Scores*	Composite and Attributes		2016		2015		2014		2015 SPHA Book of Business**	
	n	Top Box Score*	n	Top Box Score*	n	Top Box Score*	Medicaid	Aggregate		
Provider Relations		24.4%					20.3%	20.6%		
6A. Do you have a Provider Relations representative from this health plan assigned to your practice?	70	85.7%					53.1%	49.1%		
6B. Provider Relations representative's ability to answer questions and resolve problems.	58	27.6%					28.6%	29.6%		
6C. Quality of provider orientation process.	67	17.9%					15.7%	15.7%		
6D. Quality of written communications, policy bulletins, and manuals.	76	27.6%					16.7%	16.4%		

Summary Rate Scores*	Composite and Attributes		2016		2015		2014		2015 SPHA Book of Business**	
	n	SRS*	n	SRS*	n	SRS*	Medicaid	Aggregate		
Provider Relations		52.3%					37.7%	38.2%		
6A. Do you have a Provider Relations representative from this health plan assigned to your practice?	70	85.7%					53.1%	49.1%		
6B. Provider Relations representative's ability to answer questions and resolve problems.	58	50.0%					49.9%	51.3%		
6C. Quality of provider orientation process.	67	46.3%					30.1%	29.9%		
6D. Quality of written communications, policy bulletins, and manuals.	76	60.5%					33.2%	33.4%		



Your 2016 Top Box Summary Rate for the Provider Relations composite is 24.4%, which is not significantly different from SPHA's 2015 Medicaid Book of Business Top Box Summary Rate Score of 20.3%.



Your 2016 Summary Rate for the Provider Relations composite is 52.3%, which is significantly above SPHA's 2015 Medicaid Book of Business Summary Rate Score of 37.7%.

* Top Box Scores represent the top response percentage ("Yes;" "Well above average"). Summary Rate Scores represent the top two response percentages ("Yes;" "Well above average" and "Somewhat above average").
 ** SPH Analytics's 2015 Medicaid Book of Business consists of data from 46 plans representing 13436 respondents, while the Aggregate Book of Business consists of data from 55 plans representing 17370 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. See Technical Notes for more information.
 Note 1: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to trend or benchmark data; cells highlighted in green denote current year plan percentage is significantly higher when compared to trend or benchmark data; no shading denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.
 Note 2: The Provider Relations composite is the average of 6B through 6D. It does not include 6A.

5. Global Proportions

Pages 5A through 5C provide a graphical presentation of the percentage of providers who chose each response option.⁵ The charts present the composite percentages, as well as the percentages for each attribute that make up the composite.

Global proportions are a useful tool to understand a provider’s satisfaction, dissatisfaction, or neutrality when they rate a particular service or service area. Summary Rate Scores alone are not as complete an indication of performance given that they do not show a distribution of responses across all response categories.

	Summary Rate Score			
	Well above average	Somewhat above average	Average	Somewhat/Well below average
Case 1	65%	10%	20%	5%
Case 2	15%	60%	15%	10%

The above chart demonstrates two cases in which a high Summary Rate becomes less revealing. In Case 1, a relatively large percentage of providers are found to be very satisfied (‘Well above average’). In Case 2, a large proportion of the Summary Rate responses are ‘Somewhat above average,’ rather than the more favorable response of ‘Well above average.’ When reviewing cases one and two, the first case shows a higher average rating than the second, even though the Summary Rates are equal (both 75%).

Charts 5A – 5C

⁵ Response distributions are also provided in the Question Summaries, which are located in section 15, *Appendix A*.

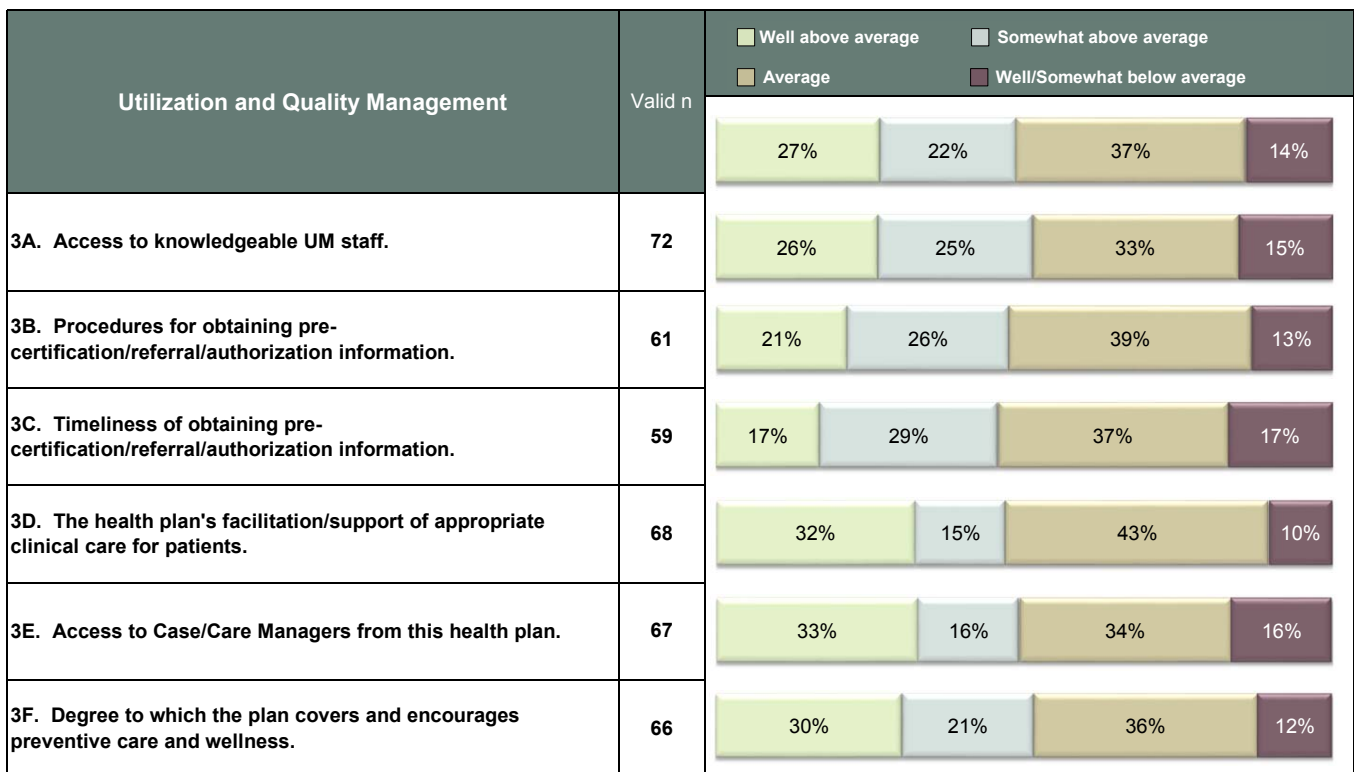
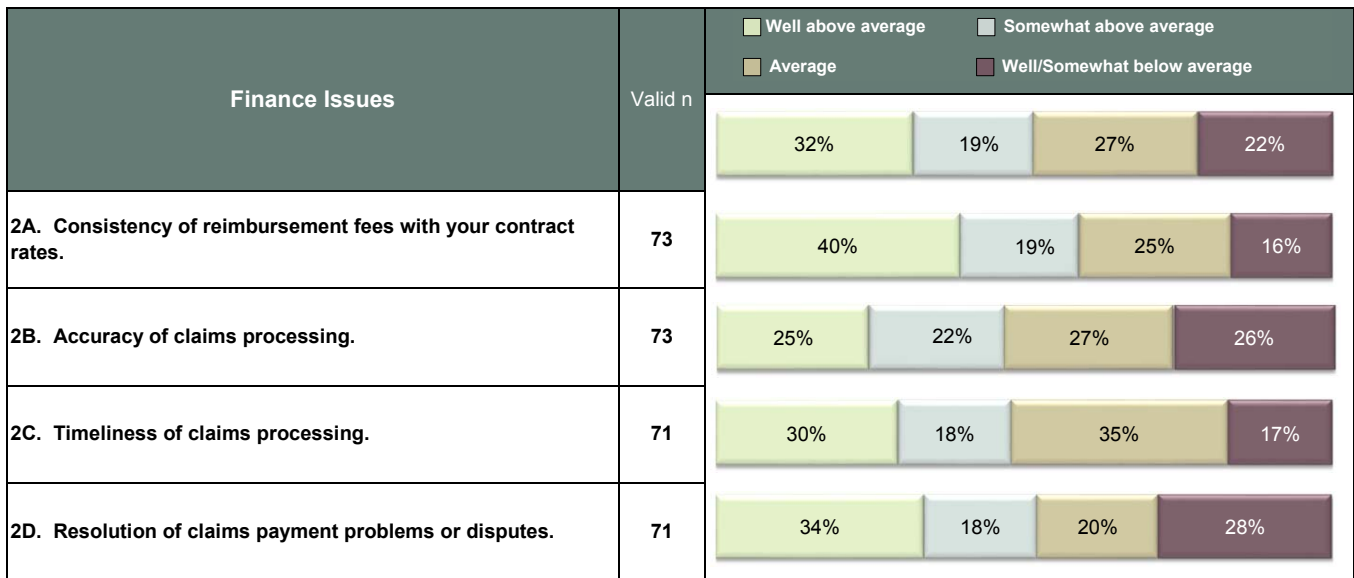
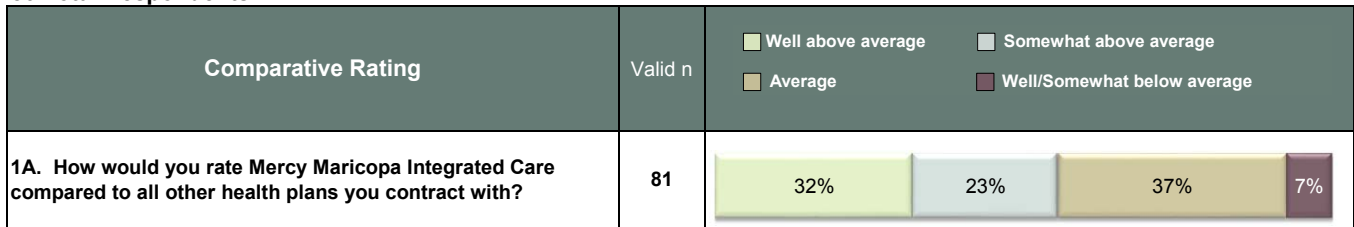
Global Proportions

Composite/Attribute Response Distributions

Mercy Maricopa Integrated Care

Provider Satisfaction Survey

86 Total Respondents



Note: Percentages may not add to 100% due to rounding.

Global Proportions

Composite/Attribute Response Distributions

Mercy Maricopa Integrated Care

Provider Satisfaction Survey

86 Total Respondents

Network/Coordination of Care		Valid n	Well above average	Somewhat above average	Average	Well/Somewhat below average
			21%	18%	51%	10%
4A. The number of specialists in this health plan's provider network.		59	22%	22%	47%	8%
4B. The quality of specialists in this health plan's provider network.		59	20%	19%	51%	10%
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.		56	20%	13%	55%	13%

Health Plan Call Center Service Staff		Valid n	Well above average	Somewhat above average	Average	Well/Somewhat below average
			28%	29%	35%	9%
5A. Ease of reaching health plan call center staff over the phone.		64	23%	33%	36%	8%
5B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).		64	34%	23%	34%	8%
5C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.		62	29%	27%	34%	10%
5D. Overall satisfaction with health plan's call center service.		68	25%	31%	35%	9%

Note: Percentages may not add to 100% due to rounding.

Global Proportions

Composite/Attribute Response Distributions

Mercy Maricopa Integrated Care

Provider Satisfaction Survey

86 Total Respondents

Provider Relations	Valid n	■ Well above average ■ Somewhat above average ■ Average ■ Well/Somewhat below average			
				24%	28%
6B. Provider Relations representative's ability to answer questions and resolve problems.	58	28%	22%	29%	21%
6C. Quality of provider orientation process.	67	18%	28%	33%	21%
6D. Quality of written communications, policy bulletins, and manuals.	76	28%	33%	32%	8%

Note: Percentages may not add to 100% due to rounding.

6. Segmentation Analyses

The database provided by Mercy Maricopa Integrated Care includes demographic information, and the Provider Satisfaction Survey asks demographic questions about the respondent’s medical practice, which facilitates a market segmentation of the providers. The charts beginning on page 6A present Summary Rate Scores organized across the following demographics:

- Area of Medicine (A)
- Physicians in Practice (B)
- Years in Practice (C)
- Portion of Managed Care Volume Represented by Health Plan (D)
- Survey Respondent (E)
- Insurance Participation (G)

The percentages represent the Summary Rate for each segment of the demographic category. For example, in the table below, the Summary Rate for 7A, *Would you recommend Mercy Maricopa Integrated Care to other physicians' practices?,'* is the percentage of respondents who selected ‘Yes.’

The interpretation of this example would be, “Of the respondents who have been in practice less than five years, 94.1% would recommend Mercy Maricopa Integrated Care, while 77.4% of respondents who have been in practice five to 15 years and 87.5% of respondents who have been in practice 16 years or more would recommend with Mercy Maricopa Integrated Care.”

Years in Practice	Less than 5 years	5 – 15 years	16 years or more
7A. Would you recommend Mercy Maricopa Integrated Care to other physicians' practices?	94.1%	77.4%	87.5%

Results on the following pages are provided for individual attributes and for each composite. Caution is recommended when making comparisons between segments with a small valid n (less than 30), as the results may not be representative of the population.

Charts 6A – 6F

Segmentation Analysis

Plan Summary Rates by Area of Medicine (A)

Mercy Maricopa Integrated Care

Provider Satisfaction Survey

86 Total Respondents

Composite/Attribute	Primary Care		Specialty		Behavioral Health Clinician		Range*
	Valid n**	%	Valid n**	%	Valid n**	%	
Overall Satisfaction							
7A. Would you recommend Mercy Maricopa Integrated Care to other physicians' practices?	7	71.4%	28	78.6%	60	86.7%	NA
All Other Plans (Comparative Rating)							
1A. How would you rate Mercy Maricopa Integrated Care compared to all other health plans you contract with?	11	45.5%	29	58.6%	65	55.4%	NA
Finance Issues		56.3%		45.4%		54.4%	NA
2A. Consistency of reimbursement fees with your contract rates.	8	62.5%	27	55.6%	57	59.6%	NA
2B. Accuracy of claims processing.	8	50.0%	27	33.3%	57	54.4%	NA
2C. Timeliness of claims processing.	8	50.0%	27	40.7%	56	51.8%	NA
2D. Resolution of claims payment problems or disputes.	8	62.5%	27	51.9%	56	51.8%	NA
Utilization and Quality Management		45.2%		38.2%		52.4%	NA
3A. Access to knowledgeable UM staff.	7	28.6%	28	50.0%	59	47.5%	NA
3B. Procedures for obtaining pre-certification/referral/authorization information.	8	50.0%	22	31.8%	50	54.0%	NA
3C. Timeliness of obtaining pre-certification/referral/authorization information.	8	50.0%	22	31.8%	48	52.1%	NA
3D. The health plan's facilitation/support of appropriate clinical care for patients.	7	57.1%	23	34.8%	56	53.6%	NA
3E. Access to Case/Care Managers from this health plan.	7	42.9%	23	39.1%	55	52.7%	NA
3F. Degree to which the plan covers and encourages preventive care and wellness.	7	42.9%	24	41.7%	53	54.7%	NA
Network/Coordination of Care		56.7%		25.8%		42.7%	NA
4A. The number of specialists in this health plan's provider network.	5	60.0%	22	27.3%	47	46.8%	NA
4B. The quality of specialists in this health plan's provider network.	5	60.0%	22	27.3%	47	42.6%	NA
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	6	50.0%	22	22.7%	44	38.6%	NA
Health Plan Call Center Service Staff		29.8%		53.5%		54.1%	NA
5A. Ease of reaching health plan call center staff over the phone.	7	28.6%	22	45.5%	52	53.8%	NA
5B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	7	28.6%	20	55.0%	52	55.8%	NA
5C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	6	33.3%	21	57.1%	50	54.0%	NA
5D. Overall satisfaction with health plan's call center service.	7	28.6%	23	56.5%	55	52.7%	NA
Provider Relations		52.4%		57.0%		49.6%	NA
6A. Do you have a Provider Relations representative from this health plan assigned to your practice?	6	66.7%	24	83.3%	59	83.1%	NA
6B. Provider Relations representative's ability to answer questions and resolve problems.	4	50.0%	20	55.0%	49	49.0%	NA
6C. Quality of provider orientation process.	6	50.0%	25	48.0%	52	42.3%	NA
6D. Quality of written communications, policy bulletins, and manuals.	7	57.1%	28	67.9%	61	57.4%	NA

* Range is the difference between Summary Rates shown. Due to the small sample size of these segments, range calculations are not included.

** Valid n refers to the total number of respondents answering the item within the subgroup under the column heading.

Note 1: The Provider Relations composite is the average of 6B through 6D. It does not include 6A.

Segmentation Analysis

Plan Summary Rates by Physicians in Practice (B)

Mercy Maricopa Integrated Care

Provider Satisfaction Survey

86 Total Respondents

Composite/Attribute	Solo		2 - 5 physicians		More than 5 physicians		Range*
	Valid n**	%	Valid n**	%	Valid n**	%	
Overall Satisfaction							
7A. Would you recommend Mercy Maricopa Integrated Care to other physicians' practices?	16	87.5%	23	78.3%	17	88.2%	NA
All Other Plans (Comparative Rating)							
1A. How would you rate Mercy Maricopa Integrated Care compared to all other health plans you contract with?	15	73.3%	25	60.0%	20	40.0%	NA
Finance Issues		63.6%		46.3%		50.5%	NA
2A. Consistency of reimbursement fees with your contract rates.	15	80.0%	21	47.6%	18	61.1%	NA
2B. Accuracy of claims processing.	15	46.7%	21	52.4%	18	50.0%	NA
2C. Timeliness of claims processing.	15	46.7%	20	45.0%	18	55.6%	NA
2D. Resolution of claims payment problems or disputes.	16	81.3%	20	40.0%	17	35.3%	NA
Utilization and Quality Management		53.3%		49.6%		39.5%	NA
3A. Access to knowledgeable UM staff.	15	66.7%	22	54.5%	17	29.4%	NA
3B. Procedures for obtaining pre-certification/referral/authorization information.	16	50.0%	20	50.0%	11	36.4%	NA
3C. Timeliness of obtaining pre-certification/referral/authorization information.	14	42.9%	20	50.0%	11	45.5%	NA
3D. The health plan's facilitation/support of appropriate clinical care for patients.	15	46.7%	23	52.2%	15	40.0%	NA
3E. Access to Case/Care Managers from this health plan.	15	53.3%	22	50.0%	14	42.9%	NA
3F. Degree to which the plan covers and encourages preventive care and wellness.	15	60.0%	22	40.9%	14	42.9%	NA
Network/Coordination of Care		50.0%		38.0%		26.7%	NA
4A. The number of specialists in this health plan's provider network.	15	53.3%	17	47.1%	14	28.6%	NA
4B. The quality of specialists in this health plan's provider network.	15	46.7%	16	37.5%	15	26.7%	NA
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	14	50.0%	17	29.4%	12	25.0%	NA
Health Plan Call Center Service Staff		83.1%		51.1%		40.0%	NA
5A. Ease of reaching health plan call center staff over the phone.	15	80.0%	22	45.5%	12	50.0%	NA
5B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	14	85.7%	22	54.5%	14	42.9%	NA
5C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	15	80.0%	21	52.4%	13	38.5%	NA
5D. Overall satisfaction with health plan's call center service.	15	86.7%	23	52.2%	14	28.6%	NA
Provider Relations		76.6%		54.8%		39.3%	NA
6A. Do you have a Provider Relations representative from this health plan assigned to your practice?	13	84.6%	23	82.6%	16	93.8%	NA
6B. Provider Relations representative's ability to answer questions and resolve problems.	10	70.0%	19	52.6%	15	40.0%	NA
6C. Quality of provider orientation process.	14	78.6%	20	45.0%	16	25.0%	NA
6D. Quality of written communications, policy bulletins, and manuals.	16	81.3%	24	66.7%	17	52.9%	NA

* Range is the difference between Summary Rates shown. Due to the small sample size of these segments, range calculations are not included.

** Valid n refers to the total number of respondents answering the item within the subgroup under the column heading.

Note 1: The Provider Relations composite is the average of 6B through 6D. It does not include 6A.

Segmentation Analysis

Plan Summary Rates by Years in Practice (C)

Mercy Maricopa Integrated Care

Provider Satisfaction Survey

86 Total Respondents

Composite/Attribute	Less than 5 years		5 - 15 years		16 years or more		Range*
	Valid n**	%	Valid n**	%	Valid n**	%	
Overall Satisfaction							
7A. Would you recommend Mercy Maricopa Integrated Care to other physicians' practices?	17	94.1%	31	77.4%	24	87.5%	NA
All Other Plans (Comparative Rating)							
1A. How would you rate Mercy Maricopa Integrated Care compared to all other health plans you contract with?	21	66.7%	33	54.5%	24	50.0%	NA
Finance Issues		53.3%		51.6%		50.0%	NA
2A. Consistency of reimbursement fees with your contract rates.	15	53.3%	32	59.4%	23	60.9%	NA
2B. Accuracy of claims processing.	15	60.0%	32	43.8%	23	43.5%	NA
2C. Timeliness of claims processing.	15	53.3%	31	48.4%	23	43.5%	NA
2D. Resolution of claims payment problems or disputes.	15	46.7%	31	54.8%	23	52.2%	NA
Utilization and Quality Management		60.8%		38.1%		50.5%	NA
3A. Access to knowledgeable UM staff.	15	60.0%	31	48.4%	24	45.8%	NA
3B. Procedures for obtaining pre-certification/referral/authorization information.	15	60.0%	27	37.0%	18	50.0%	NA
3C. Timeliness of obtaining pre-certification/referral/authorization information.	15	60.0%	26	38.5%	17	41.2%	NA
3D. The health plan's facilitation/support of appropriate clinical care for patients.	15	60.0%	29	34.5%	23	52.2%	NA
3E. Access to Case/Care Managers from this health plan.	16	68.8%	28	35.7%	22	50.0%	NA
3F. Degree to which the plan covers and encourages preventive care and wellness.	16	56.3%	26	34.6%	22	63.6%	NA
Network/Coordination of Care		56.2%		23.6%		42.1%	NA
4A. The number of specialists in this health plan's provider network.	13	61.5%	26	26.9%	19	52.6%	NA
4B. The quality of specialists in this health plan's provider network.	14	50.0%	26	23.1%	18	50.0%	NA
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	14	57.1%	24	20.8%	17	23.5%	NA
Health Plan Call Center Service Staff		60.0%		56.9%		56.3%	NA
5A. Ease of reaching health plan call center staff over the phone.	14	57.1%	27	59.3%	22	54.5%	NA
5B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	16	62.5%	25	52.0%	22	63.6%	NA
5C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	14	64.3%	27	55.6%	20	55.0%	NA
5D. Overall satisfaction with health plan's call center service.	16	56.3%	28	60.7%	23	52.2%	NA
Provider Relations		67.7%		45.4%		49.5%	NA
6A. Do you have a Provider Relations representative from this health plan assigned to your practice?	16	62.5%	29	93.1%	22	90.9%	NA
6B. Provider Relations representative's ability to answer questions and resolve problems.	10	60.0%	27	44.4%	19	47.4%	NA
6C. Quality of provider orientation process.	12	66.7%	31	38.7%	21	42.9%	NA
6D. Quality of written communications, policy bulletins, and manuals.	17	76.5%	32	53.1%	24	58.3%	NA

* Range is the difference between Summary Rates shown. Due to the small sample size of these segments, range calculations are not included.

** Valid n refers to the total number of respondents answering the item within the subgroup under the column heading.

Note 1: The Provider Relations composite is the average of 6B through 6D. It does not include 6A.

Segmentation Analysis

Plan Summary Rates by Portion of Managed Care Volume Represented by Health Plan (D)

Mercy Maricopa Integrated Care
Provider Satisfaction Survey

86 Total Respondents

Composite/Attribute	0 - 10%		11 - 20%		21 - 100%		Range*
	Valid n**	%	Valid n**	%	Valid n**	%	
Overall Satisfaction							
7A. Would you recommend Mercy Maricopa Integrated Care to other physicians' practices?	5	80.0%	2	100.0%	63	85.7%	NA
All Other Plans (Comparative Rating)							
1A. How would you rate Mercy Maricopa Integrated Care compared to all other health plans you contract with?	4	50.0%	2	50.0%	68	58.8%	NA
Finance Issues		37.5%		0.0%		53.1%	NA
2A. Consistency of reimbursement fees with your contract rates.	4	50.0%	1	0.0%	64	60.9%	NA
2B. Accuracy of claims processing.	4	50.0%	1	0.0%	64	48.4%	NA
2C. Timeliness of claims processing.	4	25.0%	1	0.0%	63	49.2%	NA
2D. Resolution of claims payment problems or disputes.	4	25.0%	1	0.0%	63	54.0%	NA
Utilization and Quality Management		55.0%		0.0%		49.6%	NA
3A. Access to knowledgeable UM staff.	5	60.0%	2	0.0%	62	51.6%	NA
3B. Procedures for obtaining pre-certification/referral/authorization information.	4	50.0%	1	0.0%	53	49.1%	NA
3C. Timeliness of obtaining pre-certification/referral/authorization information.	4	50.0%	1	0.0%	51	47.1%	NA
3D. The health plan's facilitation/support of appropriate clinical care for patients.	4	50.0%	1	0.0%	60	48.3%	NA
3E. Access to Case/Care Managers from this health plan.	5	60.0%	1	0.0%	58	50.0%	NA
3F. Degree to which the plan covers and encourages preventive care and wellness.	5	60.0%	1	0.0%	56	51.8%	NA
Network/Coordination of Care		11.1%		0.0%		39.6%	NA
4A. The number of specialists in this health plan's provider network.	3	33.3%	2	0.0%	51	45.1%	NA
4B. The quality of specialists in this health plan's provider network.	2	0.0%	2	0.0%	52	40.4%	NA
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	2	0.0%	2	0.0%	48	33.3%	NA
Health Plan Call Center Service Staff		41.7%		0.0%		60.0%	NA
5A. Ease of reaching health plan call center staff over the phone.	3	33.3%	2	0.0%	55	61.8%	NA
5B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	3	33.3%	1	0.0%	56	62.5%	NA
5C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	3	66.7%	1	0.0%	55	56.4%	NA
5D. Overall satisfaction with health plan's call center service.	3	33.3%	2	0.0%	59	59.3%	NA
Provider Relations		93.3%		0.0%		51.8%	NA
6A. Do you have a Provider Relations representative from this health plan assigned to your practice?	3	66.7%	2	100.0%	61	85.2%	NA
6B. Provider Relations representative's ability to answer questions and resolve problems.	2	100.0%	2	0.0%	51	49.0%	NA
6C. Quality of provider orientation process.	4	100.0%	2	0.0%	57	43.9%	NA
6D. Quality of written communications, policy bulletins, and manuals.	5	80.0%	2	0.0%	64	62.5%	NA

* Range is the difference between Summary Rates shown. Due to the small sample size of these segments, range calculations are not included.

** Valid n refers to the total number of respondents answering the item within the subgroup under the column heading.

Note 1: The Provider Relations composite is the average of 6B through 6D. It does not include 6A.

Segmentation Analysis

Plan Summary Rates by Survey Respondent (E)

Mercy Maricopa Integrated Care

Provider Satisfaction Survey

86 Total Respondents

Composite/Attribute	Physician		Behavioral Health Clinician		Office Manager		Nurse/Other staff		Range*
	Valid n**	%	Valid n**	%	Valid n**	%	Valid n**	%	
Overall Satisfaction									
7A. Would you recommend Mercy Maricopa Integrated Care to other physicians' practices?	2	100.0%	11	100.0%	25	92.0%	35	74.3%	NA
All Other Plans (Comparative Rating)									
1A. How would you rate Mercy Maricopa Integrated Care compared to all other health plans you contract with?	3	100.0%	12	75.0%	23	69.6%	40	40.0%	NA
Finance Issues		62.5%		64.6%		47.8%		47.5%	NA
2A. Consistency of reimbursement fees with your contract rates.	2	0.0%	12	66.7%	19	63.2%	38	57.9%	NA
2B. Accuracy of claims processing.	2	100.0%	12	58.3%	19	31.6%	38	47.4%	NA
2C. Timeliness of claims processing.	2	100.0%	12	66.7%	19	31.6%	37	45.9%	NA
2D. Resolution of claims payment problems or disputes.	2	50.0%	12	66.7%	20	65.0%	36	38.9%	NA
Utilization and Quality Management		83.3%		62.0%		49.3%		41.4%	NA
3A. Access to knowledgeable UM staff.	2	100.0%	12	58.3%	23	52.2%	34	47.1%	NA
3B. Procedures for obtaining pre-certification/referral/authorization information.	2	100.0%	9	55.6%	21	47.6%	28	39.3%	NA
3C. Timeliness of obtaining pre-certification/referral/authorization information.	2	100.0%	7	42.9%	21	47.6%	28	42.9%	NA
3D. The health plan's facilitation/support of appropriate clinical care for patients.	2	100.0%	11	54.5%	23	43.5%	31	41.9%	NA
3E. Access to Case/Care Managers from this health plan.	2	100.0%	10	70.0%	23	47.8%	31	41.9%	NA
3F. Degree to which the plan covers and encourages preventive care and wellness.	2	0.0%	11	90.9%	21	57.1%	31	35.5%	NA
Network/Coordination of Care		66.7%		63.3%		37.4%		26.3%	NA
4A. The number of specialists in this health plan's provider network.	2	50.0%	10	70.0%	19	42.1%	27	33.3%	NA
4B. The quality of specialists in this health plan's provider network.	2	50.0%	10	60.0%	19	36.8%	27	29.6%	NA
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	2	100.0%	10	60.0%	18	33.3%	25	16.0%	NA
Health Plan Call Center Service Staff		62.5%		63.9%		75.4%		39.6%	NA
5A. Ease of reaching health plan call center staff over the phone.	2	50.0%	10	60.0%	23	69.6%	27	44.4%	NA
5B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	2	50.0%	10	80.0%	21	76.2%	29	37.9%	NA
5C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	2	50.0%	9	55.6%	21	81.0%	28	39.3%	NA
5D. Overall satisfaction with health plan's call center service.	2	100.0%	10	60.0%	24	75.0%	30	36.7%	NA
Provider Relations		66.7%		65.0%		60.0%		43.1%	NA
6A. Do you have a Provider Relations representative from this health plan assigned to your practice?	2	50.0%	11	81.8%	22	95.5%	33	84.8%	NA
6B. Provider Relations representative's ability to answer questions and resolve problems.	1	0.0%	9	55.6%	21	57.1%	27	44.4%	NA
6C. Quality of provider orientation process.	1	100.0%	11	72.7%	20	55.0%	33	33.3%	NA
6D. Quality of written communications, policy bulletins, and manuals.	2	100.0%	12	66.7%	25	68.0%	35	51.4%	NA

* Range is the difference between Summary Rates shown. Due to the small sample size of these segments, range calculations are not included.

** Valid n refers to the total number of respondents answering the item within the subgroup under the column heading.

Note 1: The Provider Relations composite is the average of 6B through 6D. It does not include 6A.

Segmentation Analysis

Plan Summary Rates by Insurance Participation (G)

Mercy Maricopa Integrated Care

Provider Satisfaction Survey

86 Total Respondents

Composite/Attribute	3 or fewer		4 to 7		8 to 11		12 to 15		More than 15		Range*
	Valid n**	%	Valid n**	%	Valid n**	%	Valid n**	%	Valid n**	%	
Overall Satisfaction											
7A. Would you recommend Mercy Maricopa Integrated Care to other physicians' practices?	24	83.3%	21	100.0%	6	83.3%	6	83.3%	9	77.8%	NA
All Other Plans (Comparative Rating)											
1A. How would you rate Mercy Maricopa Integrated Care compared to all other health plans you contract with?	27	63.0%	19	68.4%	8	50.0%	7	28.6%	11	36.4%	NA
Finance Issues		52.8%		55.0%		45.2%		54.2%		40.3%	NA
2A. Consistency of reimbursement fees with your contract rates.	23	56.5%	20	65.0%	7	71.4%	6	66.7%	9	33.3%	NA
2B. Accuracy of claims processing.	23	47.8%	20	55.0%	7	42.9%	6	50.0%	9	33.3%	NA
2C. Timeliness of claims processing.	23	52.2%	20	40.0%	6	50.0%	6	50.0%	8	50.0%	NA
2D. Resolution of claims payment problems or disputes.	22	54.5%	20	60.0%	6	16.7%	6	50.0%	9	44.4%	NA
Utilization and Quality Management		57.2%		51.2%		21.7%		34.4%		47.1%	NA
3A. Access to knowledgeable UM staff.	24	58.3%	21	61.9%	6	16.7%	5	40.0%	8	25.0%	NA
3B. Procedures for obtaining pre-certification/referral/authorization information.	20	50.0%	20	55.0%	3	0.0%	4	25.0%	8	62.5%	NA
3C. Timeliness of obtaining pre-certification/referral/authorization information.	18	44.4%	20	50.0%	3	0.0%	4	25.0%	8	62.5%	NA
3D. The health plan's facilitation/support of appropriate clinical care for patients.	23	52.2%	20	50.0%	5	40.0%	6	50.0%	7	42.9%	NA
3E. Access to Case/Care Managers from this health plan.	21	61.9%	20	45.0%	5	40.0%	6	33.3%	8	50.0%	NA
3F. Degree to which the plan covers and encourages preventive care and wellness.	21	76.2%	20	45.0%	6	33.3%	6	33.3%	5	40.0%	NA
Network/Coordination of Care		36.3%		35.2%		26.7%		71.7%		35.6%	NA
4A. The number of specialists in this health plan's provider network.	19	42.1%	18	38.9%	5	40.0%	4	75.0%	6	50.0%	NA
4B. The quality of specialists in this health plan's provider network.	19	31.6%	18	38.9%	5	40.0%	4	100.0%	6	16.7%	NA
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	17	35.3%	18	27.8%	4	0.0%	5	40.0%	5	40.0%	NA
Health Plan Call Center Service Staff		60.1%		76.3%		35.0%		40.8%		32.1%	NA
5A. Ease of reaching health plan call center staff over the phone.	21	57.1%	17	82.4%	5	40.0%	5	40.0%	8	25.0%	NA
5B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	21	66.7%	16	68.8%	5	60.0%	6	50.0%	8	37.5%	NA
5C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	20	60.0%	17	76.5%	5	20.0%	5	40.0%	7	28.6%	NA
5D. Overall satisfaction with health plan's call center service.	23	56.5%	18	77.8%	5	20.0%	6	33.3%	8	37.5%	NA
Provider Relations		60.5%		66.3%		22.2%		55.6%		35.4%	NA
6A. Do you have a Provider Relations representative from this health plan assigned to your practice?	23	87.0%	19	78.9%	6	100.0%	5	80.0%	8	87.5%	NA
6B. Provider Relations representative's ability to answer questions and resolve problems.	19	63.2%	15	60.0%	6	16.7%	4	75.0%	7	28.6%	NA
6C. Quality of provider orientation process.	24	58.3%	19	57.9%	6	16.7%	4	25.0%	6	33.3%	NA
6D. Quality of written communications, policy bulletins, and manuals.	25	60.0%	21	81.0%	6	33.3%	6	66.7%	9	44.4%	NA

* Range is the difference between Summary Rates shown. Due to the small sample size of these segments, range calculations are not included.

** Valid n refers to the total number of respondents answering the item within the subgroup under the column heading.

Note 1: The Provider Relations composite is the average of 6B through 6D. It does not include 6A.

7. Technical Notes

Presented alphabetically by subject area

Composite Categories

The Mercy Maricopa Integrated Care Provider Satisfaction Survey includes eight composite categories. Each composite category represents an overall aspect of plan quality and is comprised of similar questions. For each composite, an overall score is computed. The composite score is the average of the Summary Rates of the questions comprising a composite. For example, the *Finance Issues* composite is the average of the Summary Rates of questions 2A through 2D.

Demographic Categories

SPHA collapses several of the practice characteristic variables into fewer segments than those defined by the survey. The consolidation of these categories with small samples allows for more valid between-group statistical comparisons.

Mean Score

Mean Scores are an average of all responses. They are calculated by assigning a value of five to the most favorable response option, a four to the next most favorable response option, and so on until a value of one is reached. These values are assuming that there are five response options. If there are a different number of response options, the most favorable response option receives a value equal to the total number of response options. When every response receives a value, the values are averaged to give the Mean Score.

Multiple Mark Response

Some questions allow for respondents to mark multiple response options. As a result, response options to these questions typically add up to more than 100%. Also note that Multiple Mark Responses contain an extra row of information in the Banner Tables called 'Total Valid Responses,' which displays the total number of responses given.

Response Rate

The formula for determining the response rate is:

$$\frac{\text{Completed surveys}}{\text{Final sample size} - \text{Ineligible surveys}} = \text{Response rate}$$

For a mail and Internet with phone follow-up survey methodology, the following dispositions are considered ineligible: deceased, not eligible, bad address, wrong number, fax/pager/modem/data line, not in service, number changed, cell phone, and disconnected.

Rounding of Data

For many survey questions, you will often see listed response distribution percentages that do not add to exactly 100%. In some cases, they may add to 99.9% and in others to 100.1%. This tends to cause some concern, as it gives the appearance of a valid

response being omitted or even counted twice. The following explanation is provided as a means to understanding how rounding affects the percentages shown in the report.

The key to understanding how rounding affects listed percentages is to know that the survey question's entire valid response set is being accounted for. That is, although the percentages do not add to exactly 100%, the entire response set is represented in the percentages shown.

In many cases, dividing a number of responses by the total number of valid responses provides a percentage that will go out to an infinite number of decimal places. An example of this is dividing one by three: No matter how many decimal places this quotient is taken out, it will always be a continuous string of three's. As a result, we see the following when adding each of the item response percentages:

Response 1:	n = 1	.3	.33	.333	.3333
Response 2:	n = 1	.3	.33	.333	.3333
Response 3:	<u>n = 1</u>	<u>.3</u>	<u>.33</u>	<u>.333</u>	<u>.3333</u>
	3	.9	.99	.999	.9999

It is evident that no matter how many decimal places we take our quotient out, we will never be able to add the results to exactly '1' (or 100%), even though all '3' responses are included in the percentage calculation. Through consultation with a number of our clients, SPHA has determined that using a single decimal place in the reporting of percentages provides an adequate level of detail. Typically, when percentages are calculated in our report applications, all decimal places are computed, but only the first decimal place is actually shown. As such, adding rounded single-digit decimals may not equal 100%. If the same figures were taken out an additional decimal place, however, they might then add to exactly 100%. Or, as the example above shows, they may never equal an even 100%. Finally, when rounding, SPHA employs the standard practice of rounding down any number from one to four and rounding up any number from five to nine.

Sampling Error

Sampling error can be thought of as the extent to which survey results may differ from what would be obtained if every eligible member in the sample had been surveyed. The size of such error depends largely on the percentage distributions (i.e., the number of respondents selecting each answer category) and the number of members surveyed. The more disproportionate the percentage distributions or the larger the sample size is, the smaller the error.

The following tables may be used in estimating approximate sampling error. The first table shows the range (plus or minus the figure shown) within which the population percentage could be expected to lay **95** out of 100 times a sample of that size and percentage distribution would be selected. The second table shows the range (plus or minus the figure shown) within which the population percentage could be expected to lay **90** out of 100 times a sample of that size and percentage distribution would be selected.

95% Confidence Interval Approximate Half Width (+/-) for Population Percent					
Valid Responses	Percentage Distribution				
	50/50	60/40	70/30	80/20	90/10
50	13.9	13.6	12.7	11.1	8.3
100	9.8	9.6	9.0	7.8	5.9
200	6.9	6.8	6.4	5.5	4.2
300	5.7	5.5	5.2	4.5	3.4
400	4.9	4.8	4.5	3.9	2.9
500	4.4	4.3	4.0	3.5	2.6
750	3.6	3.5	3.3	2.9	2.1
850	3.4	3.3	3.1	2.7	2.0

90% Confidence Interval Approximate Half Width (+/-) for Population Percent					
Valid Responses	Percentage Distribution				
	50/50	60/40	70/30	80/20	90/10
50	11.6	11.4	10.7	9.3	7.0
100	8.2	8.1	7.5	6.6	4.9
200	5.8	5.7	5.3	4.7	3.5
300	4.7	4.7	4.4	3.8	2.8
400	4.1	4.0	3.8	3.3	2.5
500	3.7	3.6	3.4	2.9	2.2
750	3.0	2.9	2.8	2.4	1.8
850	2.8	2.8	2.6	2.3	1.7

The sampling error table is used in the following manner. Assume that ‘*Willingness to recommend health plan*’ received a Summary Rate of seventy percent (70.0%) from a sample of 500 valid responses. For a 95% confidence interval, look at the table where the sample size of 500 intersects the percentage distribution of 70/30. The margin of error for this sample size is four percentage points (4.0%). Therefore, on average, in 95 out of 100 similar samples, the 95% confidence interval (e.g., 66.0% to 74.0%) will span the true unknown population percentage.

Statistical Significance

A statistically significant hypothesis testing result means that — based on the sample(s), conditions/assumptions, and level of significance — there is sufficient evidence to conclude the alternate hypothesis. For example, when testing for a difference between a population Summary Rate and a set constant score (SPH Analytics Book of Business), statistical significance would mean that there is sufficient support for the statement that there is a difference between the population Summary Rate and the set constant score. As another example, when testing to see if there is a difference between last year’s population Summary Rate and this year’s population Summary Rate—statistical significance would mean that there is sufficient evidence for the statement that the population Summary Rates are different.

Throughout the report, statistically significant results are denoted through green and red highlighted cells. Green cells indicate that the current year score has significantly increased compared to previous years or is significantly above the SPHA benchmark. Red cells indicated that the current year score has significantly decreased compared to previous years or is significantly below the SPHA benchmark.

Summary Rates

All survey questions have specific response options designated for inclusion in Summary Rate scoring. These scores are computed as the proportion of favorable responses to the total number of valid responses for each question. For example, the rating questions' Summary Rates are computed using the following proportion:

$$\frac{\text{Well above average} + \text{Somewhat above average}}{\text{Well above average} + \text{Somewhat above average} + \text{Average} + \text{Somewhat below average} + \text{Well below average}}$$

SPH Analytics Aggregate Book of Business (2015)

The 2015 SPH Analytics Aggregate Book of Business is a benchmark that is comprised of data from 55 plans representing 17,370 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine.

SPH Analytics Medicaid Book of Business (2015)

The 2015 SPH Analytics Medicaid Book of Business is a benchmark that is comprised of data from 46 plans representing 13,436 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine.

SPH Analytics Medicaid Respondent-Level Benchmark (2015)

The 2015 SPH Analytics Medicaid Respondent-Level Benchmark contains respondent-level data from 46 plans representing 13,436 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine. This benchmark segments results by Survey Respondent (Physician and Office Manager) and Area of Medicine (Primary Care and Specialty) and is shown on the *respondent-level*, meaning that ratings from the respondents are averaged to compute the Summary Rate.

Valid n

The term valid n is used to show the number of respondents giving a valid response to a particular question. It gives information only on the question it refers to and no others. Valid responses are those that actually rate an attribute. They do not include responses such as 'N/A' because a response of 'N/A' does not rate an attribute. The difference in value between the valid n and the total number of respondents completing the survey is a result of removing invalid responses and respondents submitting a survey but not answering that particular question.

Z-Test

To test for true differences in population score(s), statistical inference methods are applied. In particular, hypothesis testing is done to draw conclusions about differences

in scores between a population and a set constant (e.g., a Summary Rate versus SPH Analytics Book of Business score). The hypothesis of no difference is rejected if the absolute value of the test statistic exceeds a critical value corresponding to a level of significance. The test statistic used depends on which of these types of hypothesis tests are performed.

When checking for a statistically significant difference between a Summary Rate for a population and a set constant score—with various conditions/assumptions—SPHA uses the statistic test that follows:

$$z = \frac{\hat{p} - p_0}{\sqrt{\frac{p_0 q_0}{n}}}$$

\hat{p} = Summary Rate from the sample
 p_0 = Set constant score for comparison
 $q_0 = 1 - (\text{Set constant score}) = (1 - p_0)$
 n = Sample size

For hypothesis testing of composites, n equals the maximum denominator of the composite questions. With a large sample size (generally $n > 30$, technically $np_0 \geq 5$ and $nq_0 \geq 5$), the z-statistic has a distribution that can be treated as the standard normal distribution. Thus, the hypothesis that the population ‘Summary Rate’ equals the set constant score, p_0 , is rejected at a 0.05 level of significance when the absolute value of the z-statistic exceeds 1.96 (obtained from cumulative standard normal distribution table).

The second hypothesis-testing situation involves testing for statistically significant differences between two population percents (or proportions), e.g., two population Summary Rates. When comparing the population percentages (or proportions)—with various conditions/ assumptions—the appropriate test statistic is the z-statistic as follows:

$$z = \frac{\hat{p}_1 - \hat{p}_2}{\sqrt{\hat{p}\hat{q}\left(\frac{1}{n_1} + \frac{1}{n_2}\right)}}$$

\hat{p}_1 = Summary Rate from the 1st sample
 \hat{p}_2 = Summary Rate from the 2nd sample
 n_1 = Size of the sample from the 1st population
 n_2 = Size of the sample from the 2nd population
 \hat{p} = Pooled Summary Rate, $\hat{p} = \frac{n_1\hat{p}_1 + n_2\hat{p}_2}{n_1 + n_2}$
 $\hat{q} = 1 - (\text{Pooled Summary Rate})$

For hypothesis testing of composites, n equals the maximum denominator of the composite questions. With large sample sizes ($n_1\hat{p}_1 \geq 5$, $n_1(1 - \hat{p}_1) \geq 5$, $n_2\hat{p}_2 \geq 5$, and

$n_2(1 - \hat{p}_2) \geq 5$) the z-statistic has a distribution that can be treated as the standard normal distribution. Thus, the hypothesis that the populations under comparison have equal population Summary Rates is rejected at a 0.05 level of significance when the absolute value of the z-statistic exceeds 1.96 (obtained from cumulative standard normal distribution table).

8. Mercy Maricopa Integrated Care Survey Tool

91. What can Aetna do to improve your experience with the Provider Portal?



PHYSICIAN SATISFACTION SURVEY

Answer **all** the questions by marking the box with blue or black ink. Like this
 If you want to know more about this study, please call SPH Analytics at 1-877-499-2538.

Demographics

Please answer the following questions about you and your practice.

- A. Please indicate your area of medicine. (Mark all that apply)
 A Primary Care
 B Specialty
 C Behavioral Health Clinician
- B. How many physicians are in your practice?
 1 Solo
 2 2-5 physicians
 3 More than 5 physicians
- C. How many years have you been in this practice?
 1 Less than 5 years
 2 5-15 years
 3 16 years or more
- D. What portion of your managed care volume is represented by **Mercy Maricopa Integrated Care**?
 1 None
 2 10% or less
 3 11-20%
 4 21-30%
 5 31-50%
 6 51-75%
 7 76-100%
- E. Please mark who is completing this survey. (Mark only one)
 1 Physician
 2 Behavioral Health Clinician
 3 Office Manager
 4 Nurse
 5 Other staff
- F. What is your preferred method of receiving communications from this health plan?
 1 Mail
 2 Telephone
 3 Fax
 4 Online portal
 5 E-mail (Please indicate your e-mail address):

 6 In person from your Provider Representative
 7 Other
- G. Please indicate the number of insurance companies with which you or your practice participates.
 1 3 or fewer
 2 4 to 7
 3 8 to 11
 4 12 to 15
 5 More than 15

Comparative Rating

This first question asks you to think about **Mercy Maricopa Integrated Care** in comparison to all of the other health plans that you work with.

- | | | | | | | |
|--|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| | Well below average | Somewhat below average | Average | Somewhat above average | Well above average | Not applicable |
| 1A. How would you rate Mercy Maricopa Integrated Care compared to all other health plans you contract with? | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> 6 |

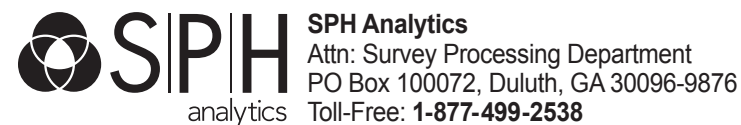
Finance Issues

These questions ask about Finance Issues.

Please rate **Mercy Maricopa Integrated Care** in the following service areas when compared to your experience with other health plans you work with.

- | | | | | | | |
|---|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| 2A. Consistency of reimbursement fees with your contract rates..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> 6 |
| 2B. Accuracy of claims processing. | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> 6 |
| 2C. Timeliness of claims processing. | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> 6 |
| 2D. Resolution of claims payment problems or disputes. | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> 6 |

Thank you. Please return the completed survey in the postage-paid envelope.



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Utilization and Quality Management

These questions ask about Utilization and Quality Management.

Please rate **Mercy Maricopa Integrated Care** in the following service areas when compared to your experience with other health plans you work with.

	Well below average	Somewhat below average	Average	Somewhat above average	Well above average	Not applicable
3A. Access to knowledgeable UM staff.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
3B. Procedures for obtaining pre-certification/referral/authorization information.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
3C. Timeliness of obtaining pre-certification/referral/authorization information.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
3D. The health plan's facilitation/support of appropriate clinical care for patients.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
3E. Access to Case/Care Managers from this health plan.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
3F. Degree to which the plan covers and encourages preventive care and wellness.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

Network/Coordination of Care

These questions ask about **Mercy Maricopa Integrated Care's** network providers.

Please rate **Mercy Maricopa Integrated Care** in the following service areas when compared to your experience with other health plans you work with.

4A. The number of specialists in this health plan's provider network.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
4B. The quality of specialists in this health plan's provider network.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

Health Plan Call Center Service Staff

These questions ask about your experiences when calling

Mercy Maricopa Integrated Care's call center.

Please rate **Mercy Maricopa Integrated Care** in the following service areas when compared to your experience with other health plans you work with.

5A. Ease of reaching health plan call center staff over the phone.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
5B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
5C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
5D. Overall satisfaction with health plan's call center service.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

Provider Relations

These questions ask about your experiences with **Mercy Maricopa Integrated Care's** Provider Relations department.

Please rate **Mercy Maricopa Integrated Care** in the following service areas when compared to your experience with other health plans you work with.

	Well below average	Somewhat below average	Average	Somewhat above average	Well above average	Not applicable
6A. Do you have a Provider Relations representative from this health plan assigned to your practice? <input type="checkbox"/> 1 Yes Go to Question 6B <input type="checkbox"/> 2 No Go to Question 6C						
6B. Provider Relations representative's ability to answer questions and resolve problems.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
6C. Quality of provider orientation process.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
6D. Quality of written communications, policy bulletins, and manuals.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6

Overall Satisfaction

These questions ask about your overall satisfaction with **Mercy Maricopa Integrated Care**.

Additionally, please rate your satisfaction with the other plans listed and provide feedback on how **Mercy Maricopa Integrated Care** can improve.

7A. Would you recommend **Mercy Maricopa Integrated Care** to other physicians' practices?
1 Yes
2 No

8. What can **Mercy Maricopa Integrated Care** do to improve its service to your organization?

Provider Portal

These questions ask about Aetna's Provider Portal. This is the secure site that you access with a username and password. Please rate Aetna in the following service areas when compared to your experience with other health plans you work with.

9A. Have you logged into and used the Aetna Provider Portal?
1 Yes **Go to Question 9B**
2 No **Thank you. Please return the completed survey in the postage-paid envelope.**

Thinking of your experiences with Aetna's Provider Portal, please rate your satisfaction with the following:

	Completely dissatisfied	Somewhat dissatisfied	Neither dissatisfied nor satisfied	Somewhat satisfied	Completely satisfied
9B. Finding information you needed regarding member eligibility.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
9C. Finding information you needed regarding claim payments or remittance advices.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
9D. Finding information you needed regarding the patient (member) Gaps in Care Report. <input type="checkbox"/> 1 Completely dissatisfied <input type="checkbox"/> 2 Somewhat dissatisfied <input type="checkbox"/> 3 Neither dissatisfied nor satisfied <input type="checkbox"/> 4 Somewhat satisfied <input type="checkbox"/> 5 Completely satisfied <input type="checkbox"/> 6 N/A because we are not a PCP (Primary Care Provider) practice and/or not yet available from my health plan					
9E. The portal's prior authorization, requirement submissions, and confirmations functions.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
9F. The portal's reporting functions.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
9G. Are there any functions that you would like to see added to the Provider Portal? _____ _____ _____					
9H. Using any number from 0 to 10, where 0 is the worst experience and 10 is the best experience, what number would you use to rate your overall experience with the Provider Portal? 0 1 2 3 4 5 6 7 8 9 10 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					

9. Comments

Open-ended questions often provide valuable insight into topics not specifically addressed on the survey tool. Respondents can give feedback regarding issues, concerns, compliments, and praise based upon their interaction with the health plan or simply provide additional demographic information. The 2016 Mercy Maricopa Integrated Care survey tool includes four open-ended questions:

- ✓ QF. What is your preferred method of receiving communications from this health plan? E-mail address.
- ✓ Q8. What can Mercy Maricopa Integrated Care do to improve its service to your organization?
- ✓ Q9G. Are there any functions that you would like to see added to the Provider Portal?
- ✓ Q9I. What can Aetna do to improve your experience with the Provider Portal?

Verbatim comments for open-ended questions are included within an Excel data file (9116143 Comments Report). To preserve confidentiality, these comments are separated into two tabs. The first tab of the Excel file includes response for QF and is indexed by the following database fields provided by Mercy Maricopa Integrated Care:

- Provider NPI
- Title
- Practice Name

The second tab of the Excel file includes responses to Q8, Q9G, and Q9I, and is indexed by the following key questions and demographics to provide more information about the individual respondent:

- ✓ Area of Medicine (A)
- ✓ Physicians in Practice (B)
- ✓ Years in Practice (C)
- ✓ Portion of Managed Care Volume Represented by Health Plan (D)
- ✓ Survey Respondent (E)
- ✓ Insurance Participation (G)

10. Banner Tables

The tables in the following section show detailed results for each question in your survey. Responses are organized across the banner table by various practice characteristics. In order to aid you in viewing the data contained in these tables, the following explanation is provided.

The different categories by which the data are 'sliced' are presented as column headers. Each category has a set of possible response choices that are listed immediately below the headers. The left-most column in each table is labeled 'Total' and shows results for the entire set of valid responses.

On the left side of the page, you will see three row headers: 'Total,' 'Total Answering,' and 'No Answer.' 'Total' represents the number of possible responses that meet the criteria for inclusion into the given question. For questions that are asked of all respondents, this figure will typically equal the valid number of responses to the current survey. 'Total Answering' shows how many of the total respondents provided valid answers to the given question. Finally, 'No Answer' is the number of individuals who did not respond to the question, even though they were eligible to do so.

You will notice that, in some cases, a survey response choice shows only the number of respondents providing that answer with no percentage. These response options are not considered valid responses by standard analytical practice and are therefore omitted from the percentage calculations.

In some tables, an additional row is added to show Summary Rates and is labeled 'Summary Rate.' These scores are a single question response or combination of question responses considered to be favorable. It is included at the bottom of each of these tables and is shown with the response option or options that make up the score listed beside it.

Information regarding the statistical testing of results is shown in the lower left corner of each table. The first line displays the Comparison Groups. These are the columns (denoted by uppercase letters and separated by a slash (/)) in which statistical tests are run. Columns (B) and (C), for example, show results for the Primary Care and Specialty groups. These columns are compared in the statistical test to each other, but not to any other columns. If a letter is present, whether uppercase or lowercase, its corresponding percentage is significantly higher than the specified percentages within its comparison group.

The second line shows the type or types of statistical tests that are included in the table. The last two lines define the meaning of the uppercase and lowercase letters. If a percentage has an uppercase letter beneath it, a significant difference exists at the 95% level of confidence. A lowercase letter denotes a significant difference at the 90% level of confidence. A banner table example is presented on the following page with key points noted.

	AREA OF MEDICINE		
	Total	Primary Care	Specialty
	(A)	(B)	(C)
Total	433 ¹	22	407
Total Answering	429 ² 100.0%	22 100.0%	403 100.0%
No Answer	4 ³	-	4
Yes	198 46.2%	6 27.3%	189 46.9% B ⁴
No	231 53.8%	16 72.7% C ⁵	214 53.1%

1. For the given question, 433 respondents were eligible to answer. For questions asked of all respondents, this figure will equal the number of complete surveys. In other cases, it will equal the number of appropriate responses to a gate question. Gate questions are those that filter out respondents who would not logically be able to answer follow-up questions. For example, respondents who say that they do not have a personal doctor would not be able to provide a doctor rating, and so they are filtered out of the response set for the rating question.

2. Of those who were eligible to answer this question, 429 provided a valid response.

3. Four respondents – all Specialists – who were eligible to answer the question did not provide an answer.

4. Specialists provided a significantly higher percentage of ‘Yes’ responses than PCPs. The ‘B’ below the percentage refers to the group in column B – in this case, PCPs – and signifies that the 46.9% is significantly higher than the 27.3%. Because the ‘B’ is capitalized, we know that the difference is significant at the 95% level.

5. PCPs provided a significantly higher percentage of ‘No’ responses. As in the previous note, the ‘C’ refers to the group in column C – Specialists – and is significant at 95%.

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Demographics

Page 1	A. Please indicate your area of medicine. (Mark all that apply)
Page 2	B. How many physicians are in your practice?
Page 3	C. How many years have you been in this practice?
Page 4	D. What portion of your managed care volume is represented by Mercy Maricopa Integrated Care?
Page 5	E. Please mark who is completing this survey. (Mark only one)
Page 6	F. What is your preferred method of receiving communications from this health plan?
Page 7	G. Please indicate the number of insurance companies with which you or your practice participates.
Page 8	1A. How would you rate Mercy Maricopa Integrated Care compared to all other health plans you contract with?
Page 9	2A. Consistency of reimbursement fees with your contract rates.
Page 10	2B. Accuracy of claims processing.
Page 11	2C. Timeliness of claims processing.
Page 12	2D. Resolution of claims payment problems or disputes.
Page 13	3A. Access to knowledgeable UM staff.
Page 14	3B. Procedures for obtaining pre-certification/referral/authorization information.
Page 15	3C. Timeliness of obtaining pre-certification/referral/authorization information.
Page 16	3D. The health plan's facilitation/support of appropriate clinical care for patients.
Page 17	3E. Access to Case/Care Managers from this health plan.
Page 18	3F. Degree to which the plan covers and encourages preventive care and wellness.
Page 19	4A. The number of specialists in this health plan's provider network.
Page 20	4B. The quality of specialists in this health plan's provider network.
Page 21	4C. The timeliness of feedback/reports from specialists in this health plan's provider network.
Page 22	5A. Ease of reaching health plan call center staff over the phone.
Page 23	5B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).
Page 24	5C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.
Page 25	5D. Overall satisfaction with health plan's call center service.
Page 26	6A. Do you have a Provider Relations representative from this health plan assigned to your practice?
Page 27	6B. Provider Relations representative's ability to answer questions and resolve problems.
Page 28	6C. Quality of provider orientation process.
Page 29	6D. Quality of written communications, policy bulletins, and manuals.
Page 30	7A. Would you recommend Mercy Maricopa Integrated Care to other physicians' practices?
Page 31	9A. Have you logged into and used the Aetna Provider Portal?
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Page 36	9F. The portal's reporting functions.
Page 37	9H. What number would you use to rate your overall experience with the Provider Portal?

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A. Please indicate your area of medicine. (Mark all that apply)

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	BH Spclty Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+	
Total Eligible	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Valid Responses	111	27	59	99	16	35	33	32	41	36	6	3	92	4	16	38	52	32	25	10	10	21
Total Respondents	80	11	32	68	15	26	20	21	32	25	5	2	67	3	13	26	37	26	20	7	6	11
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100%	100.0%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%
Primary Care	11	11	6	10	1	4	4	6	1	4	-	-	8	1	-	3	7	1	1	-	2	4
	13.8%	100.0%	18.8%	14.7%	6.7%	15.4%	20.0%	28.6%	3.1%	16.0%			11.9%	33.3%		11.5%	18.9%	3.8%	5.0%		33.3%	36.4%
Specialty	32	6	32	21	4	9	10	8	15	8	3	1	26	1	4	14	13	8	9	4	2	7
	40.0%	54.5%	100.0%	30.9%	26.7%	34.6%	50.0%	38.1%	46.9%	32.0%	60.0%	50.0%	38.8%	33.3%	30.8%	53.8%	35.1%	30.8%	45.0%	57.1%	33.3%	63.6%
Behavioral Health Clinician	68	10	21	68	11	22	19	18	25	24	3	2	58	2	12	21	32	23	15	6	6	10
	85.0%	90.9%	65.6%	100%	73.3%	84.6%	95.0%	85.7%	78.1%	96.0%	60.0%	100.0%	86.6%	66.7%	92.3%	80.8%	86.5%	88.5%	75.0%	85.7%	100.0%	90.9%

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B. How many physicians are in your practice?

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	BH Spclty	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	63	9	23	52	16	26	21	15	30	18	2	1	58	3	10	20	30	18	16	7	7	10
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100%	100.0%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%
No Answer	23	2	9	16	-	-	-	6	5	8	3	1	13	-	3	6	11	9	5	1	-	2
Solo	16	1	4	11	16	-	-	1	10	5	-	-	16	-	4	8	4	8	7	-	-	1
	25.4%	11.1%	17.4%	21.2%	100%			6.7%	33.3%	27.8%			27.6%		40.0%	40.0%	13.3%	44.4%	43.8%			10.0%
								H	H	h						Q	V	V				
2 - 5 physicians	26	4	9	22	-	26	-	11	10	5	1	1	22	3	3	8	12	6	7	4	4	1
	41.3%	44.4%	39.1%	42.3%		100%		73.3%	33.3%	27.8%	50.0%	100.0%	37.9%	100%	30.0%	40.0%	40.0%	33.3%	43.8%	57.1%	57.1%	10.0%
								IJ				M		OPQ			V	V	V			
More than 5 physicians	21	4	10	19	-	-	21	3	10	8	1	-	20	-	3	4	14	4	2	3	3	8
	33.3%	44.4%	43.5%	36.5%			100%	20.0%	33.3%	44.4%	50.0%		34.5%		30.0%	20.0%	46.7%	22.2%	12.5%	42.9%	42.9%	80.0%
																P						RS

Comparison Groups: BCD/EFG/HIJ/KLM/NOQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (n >=30)

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C. How many years have you been in this practice?

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	BH Spclty	Solo Clin.	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	82	11	31	67	16	26	21	21	35	26	4	2	71	3	12	26	40	27	20	8	7	11
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%
No Answer	4	-	1	1	-	-	-	-	-	-	1	-	-	-	1	-	1	-	1	-	-	1
Less than 5 years	21	6	8	18	1	11	3	21	-	-	1	-	16	3	2	7	9	6	6	2	2	1
	25.6%	54.5%	25.8%	26.9%	6.3%	42.3%	14.3%	100%			25.0%		22.5%	100%	16.7%	26.9%	22.5%	22.2%	30.0%	25.0%	28.6%	9.1%
		cd				EG								OPQ								
5 - 15 years	35	1	15	25	10	10	10	-	35	-	1	-	34	-	5	10	20	12	9	4	2	5
	42.7%	9.1%	48.4%	37.3%	62.5%	38.5%	47.6%		100%		25.0%		47.9%		41.7%	38.5%	50.0%	44.4%	45.0%	50.0%	28.6%	45.5%
			B	B																		
16 years or more	26	4	8	24	5	5	8	-	-	26	2	2	21	-	5	9	11	9	5	2	3	5
	31.7%	36.4%	25.8%	35.8%	31.3%	19.2%	38.1%			100%	50.0%	100.0%	29.6%		41.7%	34.6%	27.5%	33.3%	25.0%	25.0%	42.9%	45.5%
													KM									

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (n >=30)

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D. What portion of your managed care volume is represented by Mercy Maricopa Integrated Care?

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	78	8	30	63	16	24	21	17	35	25	5	2	71	3	12	24	38	26	21	8	6	11
No Answer	8	3	2	5	-	2	-	4	-	1	-	-	-	-	1	2	3	1	-	-	1	1
None	2	-	1	2	-	-	-	1	-	-	2	-	-	-	-	-	2	-	2	-	-	-
10% or less	3	-	2	1	-	1	1	-	1	2	3	-	-	-	-	1	2	2	-	-	-	1
11 - 20%	2	-	1	2	-	1	-	-	-	2	-	2	-	-	-	1	1	1	1	-	-	-
21 - 30%	3	-	-	2	1	-	1	-	2	1	-	-	3	-	-	1	2	-	1	-	1	1
31 - 50%	8	1	3	7	-	1	3	-	5	3	-	-	8	-	1	3	4	4	1	2	-	1
51 - 75%	13	5	10	12	1	2	9	1	7	5	-	-	13	-	3	2	8	3	1	2	1	6
76 - 100%	47	2	13	37	14	19	7	15	20	12	-	-	47	3	8	16	19	16	15	4	4	2
	60.3%	25.0%	43.3%	58.7%	87.5%	79.2%	33.3%	88.2%	57.1%	48.0%			66.2%	100%	66.7%	66.7%	50.0%	61.5%	71.4%	50.0%	66.7%	18.2%
				B	G	G		IJ						OPQ			V	V			V	

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

E. Please mark who is completing this survey. (Mark only one)

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	83	11	32	67	16	26	21	21	35	25	5	2	70	3	13	26	41	27	20	8	7	11
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100%	100.0%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%
No Answer	3	-	-	1	-	-	-	-	-	1	-	-	1	-	-	-	-	-	1	-	-	1
Physician	3	1	1	2	-	3	-	3	-	-	-	-	3	3	-	-	-	-	2	-	-	-
	3.6%	9.1%	3.1%	3.0%		11.5%		14.3%					4.3%	100%					10.0%			
Behavioral Health Clinician	13	-	4	12	4	3	3	2	5	5	-	-	12	-	13	-	-	8	1	1	1	1
	15.7%		12.5%	17.9%	25.0%	11.5%	14.3%	9.5%	14.3%	20.0%			17.1%		100.0%			29.6%	5.0%	12.5%	14.3%	9.1%
																		Sv				
Office Manager	26	3	14	21	8	8	4	7	10	9	1	1	22	-	-	26	-	8	8	1	3	4
	31.3%	27.3%	43.8%	31.3%	50.0%	30.8%	19.0%	33.3%	28.6%	36.0%	20.0%	50.0%	31.4%			100.0%		29.6%	40.0%	12.5%	42.9%	36.4%
																		t				
Nurse	2	1	2	1	-	-	2	-	1	1	1	-	1	-	-	-	2	-	-	-	-	2
	2.4%	9.1%	6.3%	1.5%			9.5%		2.9%	4.0%	20.0%		1.4%				4.9%					18.2%
Other staff	39	6	11	31	4	12	12	9	19	10	3	1	32	-	-	-	39	11	9	6	3	4
	47.0%	54.5%	34.4%	46.3%	25.0%	46.2%	57.1%	42.9%	54.3%	40.0%	60.0%	50.0%	45.7%				95.1%	40.7%	45.0%	75.0%	42.9%	36.4%
																		rv				

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

F. What is your preferred method of receiving communications from this health plan?

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	78	11	25	65	13	23	21	19	30	26	5	2	64	2	12	21	40	24	17	8	7	12
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100.0%	100%	100.0%	100.0%	100%	100%	100.0%	100.0%	100.0%	100.0%
No Answer	8	-	7	3	3	3	-	2	5	-	-	-	7	1	1	5	1	3	4	-	-	-
Mail	15	3	4	9	3	5	3	5	6	4	3	-	9	1	1	3	10	4	3	1	3	1
	19.2%	27.3%	16.0%	13.8%	23.1%	21.7%	14.3%	26.3%	20.0%	15.4%	60.0%		14.1%	50.0%	8.3%	14.3%	25.0%	16.7%	17.6%	12.5%	42.9%	8.3%
Telephone	3	-	2	1	1	1	1	1	1	1	-	-	3	-	1	2	-	-	2	-	1	-
	3.8%		8.0%	1.5%	7.7%	4.3%	4.8%	5.3%	3.3%	3.8%			4.7%		8.3%	9.5%			11.8%		14.3%	
Fax	6	3	3	6	1	-	2	4	1	1	-	-	5	-	1	2	3	2	-	1	-	1
	7.7%	27.3%	12.0%	9.2%	7.7%		9.5%	21.1%	3.3%	3.8%			7.8%		8.3%	9.5%	7.5%	8.3%		12.5%		8.3%
Online portal	7	-	2	6	-	4	2	2	5	-	-	-	7	-	1	1	5	3	1	-	-	1
	9.0%		8.0%	9.2%		17.4%	9.5%	10.5%	16.7%				10.9%		8.3%	4.8%	12.5%	12.5%	5.9%			8.3%
E-mail	41	2	11	39	8	11	11	7	15	18	2	2	36	1	8	13	18	15	11	5	2	6
	52.6%	18.2%	44.0%	60.0%	61.5%	47.8%	52.4%	36.8%	50.0%	69.2%	40.0%	100.0%	56.3%	50.0%	66.7%	61.9%	45.0%	62.5%	64.7%	62.5%	28.6%	50.0%
In person from your Provider Representative	6	3	3	4	-	2	2	-	2	2	-	-	4	-	-	-	4	-	-	1	1	3
	7.7%	27.3%	12.0%	6.2%		8.7%	9.5%		6.7%	7.7%			6.3%			10.0%			12.5%	14.3%	25.0%	
Other	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

G. Please indicate the number of insurance companies with which you or your practice participates.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	75	8	30	60	16	22	20	17	32	24	5	2	65	2	12	24	35	27	21	8	7	12
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100%	100.0%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%
No Answer	11	3	2	8	-	4	1	4	3	2	-	-	6	1	1	2	6	-	-	-	-	-
3 or fewer	27	1	8	23	8	6	4	6	12	9	2	1	23	-	8	8	11	27	-	-	-	-
	36.0%	12.5%	26.7%	38.3%	50.0%	27.3%	20.0%	35.3%	37.5%	37.5%	40.0%	50.0%	35.4%		66.7%	33.3%	31.4%	100%				
				b		g									PQ							
4 to 7	21	1	9	15	7	7	2	6	9	5	2	1	18	2	1	8	9	-	21	-	-	-
	28.0%	12.5%	30.0%	25.0%	43.8%	31.8%	10.0%	35.3%	28.1%	20.8%	40.0%	50.0%	27.7%	100%	8.3%	33.3%	25.7%		100.0%			
				G		g								OPQ		O						
8 to 11	8	-	4	6	-	4	3	2	4	2	-	-	8	-	1	1	6	-	-	8	-	-
	10.7%		13.3%	10.0%		18.2%	15.0%	11.8%	12.5%	8.3%			12.3%		8.3%	4.2%	17.1%			100.0%		
																	p					
12 to 15	7	2	2	6	-	4	3	2	2	3	-	-	6	-	1	3	3	-	-	-	7	-
	9.3%	25.0%	6.7%	10.0%		18.2%	15.0%	11.8%	6.3%	12.5%			9.2%		8.3%	12.5%	8.6%				100.0%	
More than 15	12	4	7	10	1	1	8	1	5	5	1	-	10	-	1	4	6	-	-	-	-	12
	16.0%	50.0%	23.3%	16.7%	6.3%	4.5%	40.0%	5.9%	15.6%	20.8%	20.0%		15.4%		8.3%	16.7%	17.1%					100.0%
		d					EF															

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

1A. How would you rate Mercy Maricopa Integrated Care compared to all other health plans you contract with?

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	81	11	29	65	15	25	20	21	33	24	4	2	68	3	12	23	40	27	19	8	7	11
No Answer	4	-	2	2	1	-	1	-	1	2	1	-	2	-	1	2	1	-	1	-	-	1
Well below average	3	1	2	2	-	1	1	-	2	1	1	-	2	-	-	1	2	1	-	-	1	1
Somewhat below average	3	1	1	2	-	1	2	-	1	2	-	1	2	-	-	-	3	-	1	-	1	1
Average	30	4	9	25	4	8	9	7	12	9	1	-	24	-	3	6	19	9	5	4	3	5
Somewhat above average	19	1	10	13	5	3	4	4	10	5	-	1	18	-	3	10	5	9	8	-	-	1
Well above average	26	4	7	23	6	12	4	10	8	7	2	-	22	3	6	6	11	8	5	4	2	3
Not Applicable	1	-	1	1	-	1	-	-	1	-	-	-	1	-	-	1	-	-	1	-	-	-
Summary Rate - Well above average/Somewhat above average	45	5	17	36	11	15	8	14	18	12	2	1	40	3	9	16	16	17	13	4	2	4

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

2A. Consistency of reimbursement fees with your contract rates.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	73	8	27	57	15	21	18	15	32	23	4	1	64	2	12	19	38	23	20	7	6	9
No Answer	9	2	3	7	1	4	2	4	2	2	1	-	5	1	1	4	2	2	-	1	1	3
Well below average	3	2	3	3	-	-	2	-	1	2	-	-	2	-	-	1	2	-	-	-	-	2
Somewhat below average	9	-	2	7	2	4	1	1	6	1	-	1	7	1	-	-	7	3	2	1	-	1
Average	18	1	7	13	1	7	4	6	6	6	2	-	16	1	4	6	7	7	5	1	2	3
Somewhat above average	14	3	5	11	1	4	6	4	4	4	2	-	10	-	2	1	11	2	3	3	2	1
Well above average	29	2	10	23	11	6	5	4	15	10	-	-	29	-	6	11	11	11	10	2	2	2
Not Applicable	4	1	2	4	-	1	1	2	1	1	-	1	2	-	-	3	1	2	1	-	-	-
Summary Rate - Well above average/Somewhat above average	43	5	15	34	12	10	11	8	19	14	2	-	39	-	8	12	22	13	13	5	4	3

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

2B. Accuracy of claims processing.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Behav. Hlth. Phys.	Office Clin. Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	73	8	27	57	15	21	18	15	32	23	4	1	64	2	12	19	38	23	20	7	6	9
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100%	100.0%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%
No Answer	9	2	3	7	1	4	2	4	2	2	1	-	5	1	1	4	2	2	-	1	1	3
Well below average	6	3	5	4	-	2	2	-	3	3	-	-	5	-	-	1	5	1	-	1	1	2
	8.2%	37.5%	18.5%	7.0%		9.5%	11.1%		9.4%	13.0%			7.8%			5.3%	13.2%	4.3%		14.3%	16.7%	22.2%
Somewhat below average	13	-	7	8	5	4	2	-	10	2	-	1	11	-	1	6	6	4	5	-	1	-
	17.8%		25.9%	14.0%	33.3%	19.0%	11.1%		31.3%	8.7%		100.0%	17.2%		8.3%	31.6%	15.8%	17.4%	25.0%		16.7%	
Average	20	1	6	14	3	4	5	6	5	8	2	-	17	-	4	6	9	7	4	3	1	4
	27.4%	12.5%	22.2%	24.6%	20.0%	19.0%	27.8%	40.0%	15.6%	34.8%	50.0%		26.6%		33.3%	31.6%	23.7%	30.4%	20.0%	42.9%	16.7%	44.4%
Somewhat above average	16	-	4	15	3	5	6	4	8	3	2	-	14	2	4	1	9	4	6	1	1	2
	21.9%		14.8%	26.3%	20.0%	23.8%	33.3%	26.7%	25.0%	13.0%	50.0%		21.9%	100%	33.3%	5.3%	23.7%	17.4%	30.0%	14.3%	16.7%	22.2%
Well above average	18	4	5	16	4	6	3	5	6	7	-	-	17	-	3	5	9	7	5	2	2	1
	24.7%	50.0%	18.5%	28.1%	26.7%	28.6%	16.7%	33.3%	18.8%	30.4%			26.6%		25.0%	26.3%	23.7%	30.4%	25.0%	28.6%	33.3%	11.1%
Not Applicable	4	1	2	4	-	1	1	2	1	1	-	1	2	-	-	3	1	2	1	-	-	-
Summary Rate - Well above average/Somewhat above average	34	4	9	31	7	11	9	9	14	10	2	-	31	2	7	6	18	11	11	3	3	3
	46.6%	50.0%	33.3%	54.4%	46.7%	52.4%	50.0%	60.0%	43.8%	43.5%	50.0%		48.4%	100%	58.3%	31.6%	47.4%	47.8%	55.0%	42.9%	50.0%	33.3%

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

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2C. Timeliness of claims processing.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	71	8	27	56	15	20	18	15	31	23	4	1	63	2	12	19	37	23	20	6	6	8
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100%	100.0%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%
No Answer	11	2	3	8	1	4	2	4	3	2	1	-	6	1	1	3	4	2	-	2	-	4
Well below average	6	2	3	3	-	3	2	-	4	2	-	-	6	-	-	1	5	1	-	1	3	1
	8.5%	25.0%	11.1%	5.4%		15.0%	11.1%		12.9%	8.7%			9.5%			5.3%	13.5%	4.3%		16.7%	50.0%	12.5%
																						R
Somewhat below average	6	-	2	6	1	3	1	-	4	2	-	1	4	-	-	1	5	2	1	-	-	-
	8.5%		7.4%	10.7%	6.7%	15.0%	5.6%		12.9%	8.7%		100.0%	6.3%			5.3%	13.5%	8.7%	5.0%			
																						M
Average	25	2	11	18	7	5	5	7	8	9	3	-	22	-	4	11	10	8	11	2	-	3
	35.2%	25.0%	40.7%	32.1%	46.7%	25.0%	27.8%	46.7%	25.8%	39.1%	75.0%		34.9%		33.3%	57.9%	27.0%	34.8%	55.0%	33.3%		37.5%
																						m
Somewhat above average	13	1	4	11	2	2	7	1	8	4	1	-	12	-	1	2	9	3	2	3	1	3
	18.3%	12.5%	14.8%	19.6%	13.3%	10.0%	38.9%	6.7%	25.8%	17.4%	25.0%		19.0%		8.3%	10.5%	24.3%	13.0%	10.0%	50.0%	16.7%	37.5%
							eF		h											rs		
Well above average	21	3	7	18	5	7	3	7	7	6	-	-	19	2	7	4	8	9	6	-	2	1
	29.6%	37.5%	25.9%	32.1%	33.3%	35.0%	16.7%	46.7%	22.6%	26.1%			30.2%	100%	58.3%	21.1%	21.6%	39.1%	30.0%		33.3%	12.5%
														OPQ	PQ			v				
Not Applicable	4	1	2	4	-	2	1	2	1	1	-	1	2	-	-	4	-	2	1	-	1	-
Summary Rate - Well above average/Somewhat above average	34	4	11	29	7	9	10	8	15	10	1	-	31	2	8	6	17	12	8	3	3	4
	47.9%	50.0%	40.7%	51.8%	46.7%	45.0%	55.6%	53.3%	48.4%	43.5%	25.0%		49.2%	100%	66.7%	31.6%	45.9%	52.2%	40.0%	50.0%	50.0%	50.0%
														OPQ	P							

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
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2D. Resolution of claims payment problems or disputes.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	71	8	27	56	16	20	17	15	31	23	4	1	63	2	12	20	36	22	20	6	6	9
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%	100.0%
No Answer	12	3	3	9	-	5	3	5	3	2	1	-	6	1	1	3	5	3	-	2	1	3
Well below average	6	1	3	3	-	2	2	-	5	1	-	-	5	-	-	2	4	1	-	1	2	1
	8.5%	12.5%	11.1%	5.4%		10.0%	11.8%		16.1%	4.3%			7.9%			10.0%	11.1%	4.5%		16.7%	33.3%	11.1%
Somewhat below average	14	1	5	12	2	7	3	2	7	5	-	1	13	1	2	1	10	4	3	3	-	2
	19.7%	12.5%	18.5%	21.4%	12.5%	35.0%	17.6%	13.3%	22.6%	21.7%			100.0%	20.6%	50.0%	16.7%	5.0%	27.8%	18.2%	15.0%	50.0%	22.2%
						e							M				P					
Average	14	1	5	12	1	3	6	6	2	5	3	-	11	-	2	4	8	5	5	1	1	2
	19.7%	12.5%	18.5%	21.4%	6.3%	15.0%	35.3%	40.0%	6.5%	21.7%	75.0%		17.5%		16.7%	20.0%	22.2%	22.7%	25.0%	16.7%	16.7%	22.2%
							E	I					M									
Somewhat above average	13	-	4	11	3	2	3	2	7	3	1	-	11	1	1	5	5	2	4	1	-	2
	18.3%		14.8%	19.6%	18.8%	10.0%	17.6%	13.3%	22.6%	13.0%	25.0%		17.5%	50.0%	8.3%	25.0%	13.9%	9.1%	20.0%	16.7%		22.2%
Well above average	24	5	10	18	10	6	3	5	10	9	-	-	23	-	7	8	9	10	8	-	3	2
	33.8%	62.5%	37.0%	32.1%	62.5%	30.0%	17.6%	33.3%	32.3%	39.1%			36.5%		58.3%	40.0%	25.0%	45.5%	40.0%		50.0%	22.2%
		d			FG										Q							
Not Applicable	3	-	2	3	-	1	1	1	1	1	-	1	2	-	-	3	-	2	1	-	-	-
Summary Rate - Well above average/Somewhat above average	37	5	14	29	13	8	6	7	17	12	1	-	34	1	8	13	14	12	12	1	3	4
	52.1%	62.5%	51.9%	51.8%	81.3%	40.0%	35.3%	46.7%	54.8%	52.2%	25.0%		54.0%	50.0%	66.7%	65.0%	38.9%	54.5%	60.0%	16.7%	50.0%	44.4%
					FG										q	q		T	T			

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

3A. Access to knowledgeable UM staff.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	72	7	28	59	15	22	17	15	31	24	5	2	62	2	12	23	34	24	21	6	5	8
No Answer	12	3	3	8	1	3	4	5	3	2	-	-	8	1	1	2	6	2	-	2	1	4
Well below average	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Somewhat below average	11	1	4	9	2	5	2	1	5	5	1	-	9	-	2	2	6	2	1	1	3	1
	15.3%	14.3%	14.3%	15.3%	13.3%	22.7%	11.8%	6.7%	16.1%	20.8%	20.0%		14.5%		16.7%	8.7%	17.6%	8.3%	4.8%	16.7%	60.0%	12.5%
							EF					KM									RSv	
Average	24	4	10	22	3	5	10	5	11	8	1	2	21	-	3	9	12	8	7	4	-	5
	33.3%	57.1%	35.7%	37.3%	20.0%	22.7%	58.8%	33.3%	35.5%	33.3%	20.0%	100.0%	33.9%	25.0%	39.1%	35.3%	33.3%	33.3%	33.3%	66.7%		62.5%
Somewhat above average	18	-	8	13	5	4	4	4	10	4	-	-	18	1	1	7	9	4	6	1	2	2
	25.0%		28.6%	22.0%	33.3%	18.2%	23.5%	26.7%	32.3%	16.7%			29.0%	50.0%	8.3%	30.4%	26.5%	16.7%	28.6%	16.7%	40.0%	25.0%
Well above average	19	2	6	15	5	8	1	5	5	7	3	-	14	1	6	5	7	10	7	-	-	-
	26.4%	28.6%	21.4%	25.4%	33.3%	36.4%	5.9%	33.3%	16.1%	29.2%	60.0%		22.6%	50.0%	50.0%	21.7%	20.6%	41.7%	33.3%			
					G	G					m				pq							
Not Applicable	2	1	1	1	-	1	-	1	1	-	-	-	1	-	-	1	1	1	-	-	1	-
Summary Rate - Well above average/Somewhat above average	37	2	14	28	10	12	5	9	15	11	3	-	32	2	7	12	16	14	13	1	2	2
	51.4%	28.6%	50.0%	47.5%	66.7%	54.5%	29.4%	60.0%	48.4%	45.8%	60.0%		51.6%	100%	58.3%	52.2%	47.1%	58.3%	61.9%	16.7%	40.0%	25.0%
					G									OPQ			Tv	TV				

Comparison Groups: BCD/EFG/HIJ/KLM/NO PQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

3B. Procedures for obtaining pre-certification/referral/authorization information.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	61	8	22	50	16	20	11	15	27	18	4	1	53	2	9	21	28	20	20	3	4	8
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%
No Answer	14	3	5	9	-	2	5	5	3	3	1	-	8	1	2	1	8	2	1	2	1	3
Well below average	1	-	-	1	-	1	-	-	1	-	-	-	1	-	-	1	-	-	-	-	1	-
	1.6%			2.0%		5.0%			3.7%				1.9%			4.8%					25.0%	
Somewhat below average	7	-	3	6	1	2	2	-	6	1	1	-	5	-	-	1	6	2	1	-	-	1
	11.5%		13.6%	12.0%	6.3%	10.0%	18.2%		22.2%	5.6%	25.0%		9.4%			4.8%	21.4%	10.0%	5.0%			12.5%
									j								p					
Average	24	4	12	16	7	7	5	6	10	8	1	1	21	-	4	9	11	8	8	3	2	2
	39.3%	50.0%	54.5%	32.0%	43.8%	35.0%	45.5%	40.0%	37.0%	44.4%	25.0%	100.0%	39.6%		44.4%	42.9%	39.3%	40.0%	40.0%	100.0%	50.0%	25.0%
			d									KM								RSUV		
Somewhat above average	16	3	4	16	5	6	3	4	7	5	1	-	14	1	2	6	6	5	6	-	-	4
	26.2%	37.5%	18.2%	32.0%	31.3%	30.0%	27.3%	26.7%	25.9%	27.8%	25.0%		26.4%	50.0%	22.2%	28.6%	21.4%	25.0%	30.0%			50.0%
Well above average	13	1	3	11	3	4	1	5	3	4	1	-	12	1	3	4	5	5	5	-	1	1
	21.3%	12.5%	13.6%	22.0%	18.8%	20.0%	9.1%	33.3%	11.1%	22.2%	25.0%		22.6%	50.0%	33.3%	19.0%	17.9%	25.0%	25.0%		25.0%	12.5%
Not Applicable	11	-	5	9	-	4	5	1	5	5	-	1	10	-	2	4	5	5	-	3	2	1
Summary Rate - Well above average/Somewhat above average	29	4	7	27	8	10	4	9	10	9	2	-	26	2	5	10	11	10	11	-	1	5
	47.5%	50.0%	31.8%	54.0%	50.0%	50.0%	36.4%	60.0%	37.0%	50.0%	50.0%		49.1%	100%	55.6%	47.6%	39.3%	50.0%	55.0%		25.0%	62.5%
				c											OPQ							

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

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3C. Timeliness of obtaining pre-certification/referral/authorization information.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	59	8	22	48	14	20	11	15	26	17	4	1	51	2	7	21	28	18	20	3	4	8
No Answer	14	3	5	9	-	2	5	5	3	3	1	-	8	1	2	1	8	2	1	2	1	3
Well below average	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Somewhat below average	10 16.9%	1 12.5%	4 18.2%	9 18.8%	1 7.1%	3 15.0%	3 27.3%	-	7 26.9%	3 17.6%	1 25.0%	-	8 15.7%	-	-	2 9.5%	7 25.0%	2 11.1%	2 10.0%	-	1 25.0%	2 25.0%
Average	22 37.3%	3 37.5%	11 50.0%	14 29.2%	7 50.0%	7 35.0%	3 27.3%	6 40.0%	9 34.6%	7 41.2%	1 25.0%	1 100.0%	19 37.3%	-	4 57.1%	9 42.9%	9 32.1%	8 44.4%	8 40.0%	3 100.0%	2 50.0%	1 12.5%
Somewhat above average	17 28.8%	3 37.5%	4 18.2%	16 33.3%	3 21.4%	7 35.0%	4 36.4%	6 40.0%	8 30.8%	3 17.6%	1 25.0%	-	15 29.4%	2 100%	-	6 28.6%	9 32.1%	3 16.7%	7 35.0%	-	-	4 50.0%
Well above average	10 16.9%	1 12.5%	3 13.6%	9 18.8%	3 21.4%	3 15.0%	1 9.1%	3 20.0%	2 7.7%	4 23.5%	1 25.0%	-	9 17.6%	-	3 42.9%	4 19.0%	3 10.7%	5 27.8%	3 15.0%	-	1 25.0%	1 12.5%
Not Applicable	13	-	5	11	2	4	5	1	6	6	-	1	12	-	4	4	5	7	-	3	2	1
Summary Rate - Well above average/Somewhat above average	27 45.8%	4 50.0%	7 31.8%	25 52.1%	6 42.9%	10 50.0%	5 45.5%	9 60.0%	10 38.5%	7 41.2%	2 50.0%	-	24 47.1%	2 100%	3 42.9%	10 47.6%	12 42.9%	8 44.4%	10 50.0%	-	1 25.0%	5 62.5%

Comparison Groups: BCD/EFG/HIJ/KLM/NOQP/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

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3D. The health plan's facilitation/support of appropriate clinical care for patients.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	68	7	23	56	15	23	15	15	29	23	4	1	60	2	11	23	31	23	20	5	6	7
No Answer	13	3	5	8	-	2	5	6	3	1	1	-	7	1	2	1	7	2	1	2	1	3
Well below average	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Somewhat below average	7	-	2	6	-	4	1	-	6	1	-	-	7	-	1	2	4	2	-	2	1	-
	10.3%		8.7%	10.7%		17.4%	6.7%		20.7%	4.3%			11.7%		9.1%	8.7%	12.9%	8.7%		40.0%	16.7%	
Average	29	3	13	20	8	7	8	6	13	10	2	1	24	-	4	11	14	9	10	1	2	4
	42.6%	42.9%	56.5%	35.7%	53.3%	30.4%	53.3%	40.0%	44.8%	43.5%	50.0%	100.0%	40.0%		36.4%	47.8%	45.2%	39.1%	50.0%	20.0%	33.3%	57.1%
Somewhat above average	10	2	3	10	1	6	1	3	2	5	1	-	9	1	-	4	4	3	4	-	1	2
	14.7%	28.6%	13.0%	17.9%	6.7%	26.1%	6.7%	20.0%	6.9%	21.7%	25.0%		15.0%	50.0%		17.4%	12.9%	13.0%	20.0%		16.7%	28.6%
Well above average	22	2	5	20	6	6	5	6	8	7	1	-	20	1	6	6	9	9	6	2	2	1
	32.4%	28.6%	21.7%	35.7%	40.0%	26.1%	33.3%	40.0%	27.6%	30.4%	25.0%		33.3%	50.0%	54.5%	26.1%	29.0%	39.1%	30.0%	40.0%	33.3%	14.3%
Not Applicable	5	1	4	4	1	1	1	-	3	2	-	1	4	-	-	2	3	2	-	1	-	2
Summary Rate - Well above average/Somewhat above average	32	4	8	30	7	12	6	9	10	12	2	-	29	2	6	10	13	12	10	2	3	3
	47.1%	57.1%	34.8%	53.6%	46.7%	52.2%	40.0%	60.0%	34.5%	52.2%	50.0%		48.3%	100%	54.5%	43.5%	41.9%	52.2%	50.0%	40.0%	50.0%	42.9%

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
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3E. Access to Case/Care Managers from this health plan.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	67	7	23	55	15	22	14	16	28	22	5	1	58	2	10	23	31	21	20	5	6	8
No Answer	11	3	3	7	1	2	4	4	3	2	-	-	7	1	2	-	6	2	-	2	1	3
Well below average	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Somewhat below average	11 16.4%	1 14.3%	5 21.7%	6 10.9%	5 33.3%	4 18.2%	-	-	8 28.6%	3 13.6%	-	-	11 19.0%	-	1 10.0%	4 17.4%	5 16.1%	1 4.8%	5 25.0%	2 40.0%	1 16.7%	-
Average	23 34.3%	3 42.9%	9 39.1%	20 36.4%	2 13.3%	7 31.8%	8 57.1%	5 31.3%	10 35.7%	8 36.4%	2 40.0%	1 100.0%	18 31.0%	-	2 20.0%	8 34.8%	13 41.9%	7 33.3%	6 30.0%	1 20.0%	3 50.0%	4 50.0%
Somewhat above average	11 16.4%	-	2 8.7%	9 16.4%	2 13.3%	5 22.7%	2 14.3%	4 25.0%	6 21.4%	1 4.5%	1 20.0%	-	10 17.2%	-	3 30.0%	4 17.4%	4 12.9%	7 33.3%	2 10.0%	-	-	1 12.5%
Well above average	22 32.8%	3 42.9%	7 30.4%	20 36.4%	6 40.0%	6 27.3%	4 28.6%	7 43.8%	4 14.3%	10 45.5%	2 40.0%	-	19 32.8%	2 100%	4 40.0%	7 30.4%	9 29.0%	6 28.6%	7 35.0%	2 40.0%	2 33.3%	3 37.5%
Not Applicable	8	1	6	6	-	2	3	1	4	2	-	1	6	-	1	3	4	4	1	1	-	1
Summary Rate - Well above average/Somewhat above average	33 49.3%	3 42.9%	9 39.1%	29 52.7%	8 53.3%	11 50.0%	6 42.9%	11 68.8%	10 35.7%	11 50.0%	3 60.0%	-	29 50.0%	2 100%	7 70.0%	11 47.8%	13 41.9%	13 61.9%	9 45.0%	2 40.0%	2 33.3%	4 50.0%

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

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3F. Degree to which the plan covers and encourages preventive care and wellness.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	66	7	24	53	15	22	14	16	26	22	5	1	56	2	11	21	31	21	20	6	6	5
No Answer	12	3	5	8	-	3	4	4	5	1	-	-	8	1	1	2	6	2	-	2	1	4
Well below average	7	1	2	7	1	4	2	2	4	1	-	-	7	2	-	-	5	2	2	-	-	1
Somewhat below average	1	-	1	1	-	1	-	-	1	-	-	-	1	-	-	-	1	-	-	1	-	-
Average	24	3	11	16	5	8	6	5	12	7	2	1	19	-	1	9	14	3	9	3	4	2
Somewhat above average	14	1	5	11	2	4	2	5	4	4	1	-	12	-	5	3	5	7	5	-	-	-
Well above average	20	2	5	18	7	5	4	4	5	10	2	-	17	-	5	9	6	9	4	2	2	2
Not Applicable	8	1	3	7	1	1	3	1	4	3	-	1	7	-	1	3	4	4	1	-	-	3
Summary Rate - Well above average/Somewhat above average	34	3	10	29	9	9	6	9	9	14	3	-	29	-	10	12	11	16	9	2	2	2

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

4A. The number of specialists in this health plan's provider network.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys. Clin.	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	59	5	22	47	15	17	14	13	26	19	3	2	51	2	10	19	27	19	18	5	4	6
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%
No Answer	15	5	5	11	-	5	5	6	5	2	-	-	10	1	2	4	6	4	-	2	2	4
Well below average	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Somewhat below average	5	-	1	5	-	3	-	1	2	2	-	-	5	-	3	-	2	2	-	1	-	-
	8.5%		4.5%	10.6%		17.6%		7.7%	7.7%	10.5%			9.8%		30.0%		7.4%	10.5%		20.0%		
Average	28	2	15	20	7	6	10	4	17	7	2	2	23	1	-	11	16	9	11	2	1	3
	47.5%	40.0%	68.2%	42.6%	46.7%	35.3%	71.4%	30.8%	65.4%	36.8%	66.7%	100.0%	45.1%	50.0%		57.9%	59.3%	47.4%	61.1%	40.0%	25.0%	50.0%
			D				F		HJ			M										
Somewhat above average	13	1	1	10	5	3	2	3	5	5	-	-	13	-	2	4	6	4	5	2	-	2
	22.0%	20.0%	4.5%	21.3%	33.3%	17.6%	14.3%	23.1%	19.2%	26.3%			25.5%		20.0%	21.1%	22.2%	21.1%	27.8%	40.0%		33.3%
			C																			
Well above average	13	2	5	12	3	5	2	5	2	5	1	-	10	1	5	4	3	4	2	-	3	1
	22.0%	40.0%	22.7%	25.5%	20.0%	29.4%	14.3%	38.5%	7.7%	26.3%	33.3%		19.6%	50.0%	50.0%	21.1%	11.1%	21.1%	11.1%		75.0%	16.7%
							I								Q						RSV	
Not Applicable	12	1	5	10	1	4	2	2	4	5	2	-	10	-	1	3	8	4	3	1	1	2
Summary Rate - Well above average/Somewhat above average	26	3	6	22	8	8	4	8	7	10	1	-	23	1	7	8	9	8	7	2	3	3
	44.1%	60.0%	27.3%	46.8%	53.3%	47.1%	28.6%	61.5%	26.9%	52.6%	33.3%		45.1%	50.0%	70.0%	42.1%	33.3%	42.1%	38.9%	40.0%	75.0%	50.0%
							I		i						Q							

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

4B. The quality of specialists in this health plan's provider network.

	Area of Medicine			Physicians in Practice			Years in Practice				Managed Care Volume			Survey Respondent			Insurance Participation					
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	59	5	22	47	15	16	15	14	26	18	2	2	52	2	10	19	27	19	18	5	4	6
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%
No Answer	14	4	5	10	-	4	4	4	5	3	-	-	10	1	2	3	6	3	-	2	1	4
Well below average	1	-	-	1	-	1	-	1	-	-	-	-	1	1	-	-	-	-	1	-	-	-
	1.7%			2.1%		6.3%		7.1%					1.9%	50.0%					5.6%			
Somewhat below average	5	-	2	4	1	2	-	2	1	2	-	-	5	-	3	-	2	3	-	2	-	-
	8.5%		9.1%	8.5%	6.7%	12.5%		14.3%	3.8%	11.1%			9.6%		30.0%		7.4%	15.8%		40.0%		
Average	30	2	14	22	7	7	11	4	19	7	2	2	25	-	1	12	17	10	10	1	-	5
	50.8%	40.0%	63.6%	46.8%	46.7%	43.8%	73.3%	28.6%	73.1%	38.9%	100%	100.0%	48.1%		10.0%	63.2%	63.0%	52.6%	55.6%	20.0%		83.3%
							f		HJ		M	M			O	O	O	t				T
Somewhat above average	11	2	1	9	3	3	1	3	4	4	-	-	11	-	1	2	7	3	4	1	2	-
	18.6%	40.0%	4.5%	19.1%	20.0%	18.8%	6.7%	21.4%	15.4%	22.2%			21.2%		10.0%	10.5%	25.9%	15.8%	22.2%	20.0%	50.0%	
				C																		
Well above average	12	1	5	11	4	3	3	4	2	5	-	-	10	1	5	5	1	3	3	1	2	1
	20.3%	20.0%	22.7%	23.4%	26.7%	18.8%	20.0%	28.6%	7.7%	27.8%			19.2%	50.0%	50.0%	26.3%	3.7%	15.8%	16.7%	20.0%	50.0%	16.7%
									i						Q	Q						
Not Applicable	13	2	5	11	1	6	2	3	4	5	3	-	9	-	1	4	8	5	3	1	2	2
Summary Rate - Well above average/Somewhat above average	23	3	6	20	7	6	4	7	6	9	-	-	21	1	6	7	8	6	7	2	4	1
	39.0%	60.0%	27.3%	42.6%	46.7%	37.5%	26.7%	50.0%	23.1%	50.0%			40.4%	50.0%	60.0%	36.8%	29.6%	31.6%	38.9%	40.0%	100.0%	16.7%
							i		i						q						RSTV	

Comparison Groups: BCD/EPG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

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4C. The timeliness of feedback/reports from specialists in this health plan's provider network.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	56	6	22	44	14	17	12	14	24	17	2	2	48	2	10	18	25	17	18	4	5	5
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%
No Answer	14	4	5	10	-	4	4	4	5	3	-	-	10	1	2	3	6	3	-	2	1	4
Well below average	1	-	-	-	-	-	-	-	1	-	-	-	1	-	-	-	1	-	-	1	-	-
	1.8%								4.2%				2.1%				4.0%			25.0%		
Somewhat below average	6	-	2	5	-	4	-	-	4	2	-	-	6	-	1	1	3	2	1	1	-	-
	10.7%		9.1%	11.4%		23.5%			16.7%	11.8%			12.5%		10.0%	5.6%	12.0%	11.8%	5.6%	25.0%		
Average	31	3	15	22	7	8	9	6	14	11	2	2	25	-	3	11	17	9	12	2	3	3
	55.4%	50.0%	68.2%	50.0%	50.0%	47.1%	75.0%	42.9%	58.3%	64.7%	100%	100.0%	52.1%		30.0%	61.1%	68.0%	52.9%	66.7%	50.0%	60.0%	60.0%
											M	M				O	O					
Somewhat above average	7	2	2	7	3	3	1	4	3	-	-	-	7	1	1	3	2	3	2	-	1	1
	12.5%	33.3%	9.1%	15.9%	21.4%	17.6%	8.3%	28.6%	12.5%				14.6%	50.0%	10.0%	16.7%	8.0%	17.6%	11.1%		20.0%	20.0%
Well above average	11	1	3	10	4	2	2	4	2	4	-	-	9	1	5	3	2	3	3	-	1	1
	19.6%	16.7%	13.6%	22.7%	28.6%	11.8%	16.7%	28.6%	8.3%	23.5%			18.8%	50.0%	50.0%	16.7%	8.0%	17.6%	16.7%		20.0%	20.0%
															PQ							
Not Applicable	16	1	5	14	2	5	5	3	6	6	3	-	13	-	1	5	10	7	3	2	1	3
Summary Rate - Well above average/Somewhat above average	18	3	5	17	7	5	3	8	5	4	-	-	16	2	6	6	4	6	5	-	2	2
	32.1%	50.0%	22.7%	38.6%	50.0%	29.4%	25.0%	57.1%	20.8%	23.5%			33.3%	100%	60.0%	33.3%	16.0%	35.3%	27.8%		40.0%	40.0%
								IJ							OPQ	Q						

Comparison Groups: BCD/EFG/HIJ/KLM/NO/PQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

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5A. Ease of reaching health plan call center staff over the phone.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	64	7	22	52	15	22	12	14	27	22	3	2	55	2	10	23	27	21	17	5	5	8
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100.0%	100%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%
No Answer	14	4	7	10	-	2	6	5	4	3	1	-	9	1	3	1	8	2	2	2	2	3
Well below average	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Somewhat below average	5	2	2	5	1	3	1	-	3	2	-	-	5	-	-	1	4	-	-	-	1	2
	7.8%	28.6%	9.1%	9.6%	6.7%	13.6%	8.3%		11.1%	9.1%			9.1%			4.3%	14.8%				20.0%	25.0%
Average	23	3	10	19	2	9	5	6	8	8	2	2	16	1	4	6	11	9	3	3	2	4
	35.9%	42.9%	45.5%	36.5%	13.3%	40.9%	41.7%	42.9%	29.6%	36.4%	66.7%	100.0%	29.1%	50.0%	40.0%	26.1%	40.7%	42.9%	17.6%	60.0%	40.0%	50.0%
						E	e					M					s	s		s		
Somewhat above average	21	1	9	14	7	4	5	3	13	5	-	-	21	1	2	10	7	4	12	2	-	2
	32.8%	14.3%	40.9%	26.9%	46.7%	18.2%	41.7%	21.4%	48.1%	22.7%			38.2%	50.0%	20.0%	43.5%	25.9%	19.0%	70.6%	40.0%		25.0%
					f			h	h	j									RV			
Well above average	15	1	1	14	5	6	1	5	3	7	1	-	13	-	4	6	5	8	2	-	2	-
	23.4%	14.3%	4.5%	26.9%	33.3%	27.3%	8.3%	35.7%	11.1%	31.8%	33.3%		23.6%		40.0%	26.1%	18.5%	38.1%	11.8%		40.0%	
				C	g			i	i	i							S	S				
Not Applicable	8	-	3	6	1	2	3	2	4	1	1	-	7	-	-	2	6	4	2	1	-	1
Summary Rate - Well above average/Somewhat above average	36	2	10	28	12	10	6	8	16	12	1	-	34	1	6	16	12	12	14	2	2	2
	56.3%	28.6%	45.5%	53.8%	80.0%	45.5%	50.0%	57.1%	59.3%	54.5%	33.3%		61.8%	50.0%	60.0%	69.6%	44.4%	57.1%	82.4%	40.0%	40.0%	25.0%
					Fg										q	v	rtu	v				

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
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5B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	64	7	20	52	14	22	14	16	25	22	3	1	56	2	10	21	29	21	16	5	6	8
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%	100.0%
No Answer	13	4	7	9	-	2	5	5	4	2	1	-	8	1	3	1	7	2	2	2	1	3
Well below average	1	-	-	1	-	1	-	-	1	-	-	-	1	-	-	1	-	-	-	-	1	-
	1.6%			1.9%		4.5%			4.0%				1.8%			4.8%					16.7%	
Somewhat below average	4	2	2	4	-	2	2	1	1	2	-	-	4	1	-	-	3	1	1	-	1	1
	6.3%	28.6%	10.0%	7.7%		9.1%	14.3%	6.3%	4.0%	9.1%			7.1%	50.0%			10.3%	4.8%	6.3%		16.7%	12.5%
Average	22	3	7	18	2	7	6	5	10	6	2	1	16	-	2	4	15	6	4	2	1	4
	34.4%	42.9%	35.0%	34.6%	14.3%	31.8%	42.9%	31.3%	40.0%	27.3%	66.7%	100.0%	28.6%	20.0%	19.0%	51.7%	28.6%	25.0%	40.0%	16.7%	50.0%	
						e						M				OP						
Somewhat above average	15	1	7	9	5	4	4	4	7	4	-	-	15	-	3	6	5	4	7	3	1	-
	23.4%	14.3%	35.0%	17.3%	35.7%	18.2%	28.6%	25.0%	28.0%	18.2%			26.8%	30.0%	28.6%	17.2%	19.0%	43.8%	60.0%	16.7%		
																			r			
Well above average	22	1	4	20	7	8	2	6	6	10	1	-	20	1	5	10	6	10	4	-	2	3
	34.4%	14.3%	20.0%	38.5%	50.0%	36.4%	14.3%	37.5%	24.0%	45.5%	33.3%		35.7%	50.0%	50.0%	47.6%	20.7%	47.6%	25.0%		33.3%	37.5%
				c	G										q	Q						
Not Applicable	9	-	5	7	2	2	2	-	6	2	1	1	7	-	-	4	5	4	3	1	-	1
Summary Rate - Well above average/Somewhat above average	37	2	11	29	12	12	6	10	13	14	1	-	35	1	8	16	11	14	11	3	3	3
	57.8%	28.6%	55.0%	55.8%	85.7%	54.5%	42.9%	62.5%	52.0%	63.6%	33.3%		62.5%	50.0%	80.0%	76.2%	37.9%	66.7%	68.8%	60.0%	50.0%	37.5%
						FG									Q	Q						

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

5C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	62	6	21	50	15	21	13	14	27	20	3	1	55	2	9	21	28	20	17	5	5	7
No Answer	14	4	7	10	-	2	6	5	4	3	1	-	9	1	3	2	7	2	2	2	1	4
Well below average	1	-	-	1	-	1	-	-	1	-	-	-	1	-	-	1	-	-	-	-	1	-
Somewhat below average	5	1	1	5	1	3	1	-	3	2	-	-	5	-	-	-	5	2	-	-	1	-
Average	21	3	8	17	2	6	7	5	8	7	1	1	18	1	4	3	12	6	4	4	1	5
Somewhat above average	17	1	8	11	6	4	4	4	11	2	-	-	16	1	1	8	6	4	10	1	-	-
Well above average	18	1	4	16	6	7	1	5	4	9	2	-	15	-	4	9	5	8	3	-	2	2
Not Applicable	10	1	4	8	1	3	2	2	4	3	1	1	7	-	1	3	6	5	2	1	1	1
Summary Rate - Well above average/Somewhat above average	35	2	12	27	12	11	5	9	15	11	2	-	31	1	5	17	11	12	13	1	2	2

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

5D. Overall satisfaction with health plan's call center service.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	68	7	23	55	15	23	14	16	28	23	3	2	59	2	10	24	30	23	18	5	6	8
No Answer	13	4	7	9	-	2	5	5	4	2	1	-	8	1	3	1	7	2	2	2	1	3
Well below average	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Somewhat below average	6	2	2	6	-	5	1	-	3	3	-	1	5	-	-	1	5	-	1	-	2	1
Average	24	3	8	20	2	6	9	7	8	8	2	1	19	-	4	5	14	10	3	4	2	4
Somewhat above average	21	1	10	14	7	6	3	4	13	4	-	-	20	2	2	10	6	5	12	1	-	1
Well above average	17	1	3	15	6	6	1	5	4	8	1	-	15	-	4	8	5	8	2	-	2	2
Not Applicable	5	-	2	4	1	1	2	-	3	1	1	-	4	-	-	1	4	2	1	1	-	1
Summary Rate - Well above average/Somewhat above average	38	2	13	29	13	12	4	9	17	12	1	-	35	2	6	18	11	13	14	1	2	3

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

6A. Do you have a Provider Relations representative from this health plan assigned to your practice?

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	70	6	24	59	13	23	16	16	29	22	3	2	61	2	11	22	33	23	19	6	5	8
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100%	100.0%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%
No Answer	16	5	8	9	3	3	5	5	6	4	2	-	10	1	2	4	8	4	2	2	2	4
Yes	60	4	20	49	11	19	15	10	27	20	2	2	52	1	9	21	28	20	15	6	4	7
	85.7%	66.7%	83.3%	83.1%	84.6%	82.6%	93.8%	62.5%	93.1%	90.9%	66.7%	100.0%	85.2%	50.0%	81.8%	95.5%	84.8%	87.0%	78.9%	100.0%	80.0%	87.5%
									H	H		M								rS		
No	10	2	4	10	2	4	1	6	2	2	1	-	9	1	2	1	5	3	4	-	1	1
	14.3%	33.3%	16.7%	16.9%	15.4%	17.4%	6.3%	37.5%	6.9%	9.1%	33.3%		14.8%	50.0%	18.2%	4.5%	15.2%	13.0%	21.1%		20.0%	12.5%
								IJ														
Summary Rate - Yes	60	4	20	49	11	19	15	10	27	20	2	2	52	1	9	21	28	20	15	6	4	7
	85.7%	66.7%	83.3%	83.1%	84.6%	82.6%	93.8%	62.5%	93.1%	90.9%	66.7%	100.0%	85.2%	50.0%	81.8%	95.5%	84.8%	87.0%	78.9%	100.0%	80.0%	87.5%
									H	H		M								rS		

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

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6B. Provider Relations representative's ability to answer questions and resolve problems.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	60	4	20	49	11	19	15	10	27	20	2	2	52	1	9	21	28	20	15	6	4	7
Total Answering	58	4	20	49	10	19	15	10	27	19	2	2	51	1	9	21	27	19	15	6	4	7
No Answer	2	-	-	-	1	-	-	-	-	1	-	-	1	-	-	-	1	1	-	-	-	-
Well below average	4	-	1	3	-	2	-	-	3	1	-	-	3	-	-	1	3	-	-	1	-	-
Somewhat below average	8	-	4	6	-	4	2	1	5	2	-	-	8	-	3	2	3	2	2	3	1	-
Average	17	2	4	16	3	3	7	3	7	7	-	2	15	1	1	6	9	5	4	1	-	5
Somewhat above average	13	1	6	11	1	4	4	2	5	5	-	-	12	-	3	2	8	6	3	1	2	-
Well above average	16	1	5	13	6	6	2	4	7	4	2	-	13	-	2	10	4	6	6	-	1	2
Not Applicable	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Summary Rate - Well above average/Somewhat above average	29	2	11	24	7	10	6	6	12	9	2	-	25	-	5	12	12	12	9	1	3	2
	50.0%	50.0%	55.0%	49.0%	70.0%	52.6%	40.0%	60.0%	44.4%	47.4%	100%		49.0%		55.6%	57.1%	44.4%	63.2%	60.0%	16.7%	75.0%	28.6%
																		Tv	T		Tv	

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

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6C. Quality of provider orientation process.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	67	6	25	52	14	20	16	12	31	21	4	2	57	1	11	20	33	24	19	6	4	6
No Answer	12	5	5	9	-	4	4	5	4	2	-	-	8	1	1	3	6	2	-	2	2	4
Well below average	8	2	3	7	1	4	1	-	6	2	-	-	7	-	-	2	6	1	-	1	2	1
Somewhat below average	6	-	2	5	-	2	1	1	2	3	-	-	6	-	1	-	4	1	2	2	-	1
Average	22	1	8	18	2	5	10	3	11	7	-	2	19	-	2	7	12	8	6	2	1	2
Somewhat above average	19	2	10	11	7	5	3	4	10	4	1	-	17	-	4	7	8	7	8	1	-	2
Well above average	12	1	2	11	4	4	1	4	2	5	3	-	8	1	4	4	3	7	3	-	1	-
Not Applicable	7	-	2	7	2	2	1	4	-	3	1	-	6	1	1	3	2	1	2	-	1	2
Summary Rate - Well above average/Somewhat above average	31	3	12	22	11	9	4	8	12	9	4	-	25	1	8	11	11	14	11	1	1	2

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

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6D. Quality of written communications, policy bulletins, and manuals.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	76	7	28	61	16	24	17	17	32	24	5	2	64	2	12	25	35	25	21	6	6	9
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100%	100.0%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%
No Answer	10	4	4	7	-	2	4	4	3	2	-	-	7	1	1	1	6	2	-	2	1	3
Well below average	4	1	1	3	-	2	1	-	4	-	-	-	4	-	-	-	4	-	-	1	-	1
	5.3%	14.3%	3.6%	4.9%		8.3%	5.9%		12.5%				6.3%				11.4%			16.7%		11.1%
Somewhat below average	2	-	1	2	-	1	1	-	1	1	-	1	1	-	-	-	2	1	1	-	-	-
	2.6%		3.6%	3.3%		4.2%	5.9%		3.1%	4.2%		50.0%	1.6%				5.7%	4.0%	4.8%			
Average	24	2	7	21	3	5	6	4	10	9	1	1	19	-	4	8	11	9	3	3	2	4
	31.6%	28.6%	25.0%	34.4%	18.8%	20.8%	35.3%	23.5%	31.3%	37.5%	20.0%	50.0%	29.7%		33.3%	32.0%	31.4%	36.0%	14.3%	50.0%	33.3%	44.4%
																	s					s
Somewhat above average	25	3	13	16	7	8	6	6	13	5	1	-	23	1	3	8	12	6	11	1	2	3
	32.9%	42.9%	46.4%	26.2%	43.8%	33.3%	35.3%	35.3%	40.6%	20.8%	20.0%		35.9%	50.0%	25.0%	32.0%	34.3%	24.0%	52.4%	16.7%	33.3%	33.3%
			d						j										Rt			
Well above average	21	1	6	19	6	8	3	7	4	9	3	-	17	1	5	9	6	9	6	1	2	1
	27.6%	14.3%	21.4%	31.1%	37.5%	33.3%	17.6%	41.2%	12.5%	37.5%	60.0%		26.6%	50.0%	41.7%	36.0%	17.1%	36.0%	28.6%	16.7%	33.3%	11.1%
								I		I							v					
Not Applicable	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Summary Rate - Well above average/Somewhat above average	46	4	19	35	13	16	9	13	17	14	4	-	40	2	8	17	18	15	17	2	4	4
	60.5%	57.1%	67.9%	57.4%	81.3%	66.7%	52.9%	76.5%	53.1%	58.3%	80.0%		62.5%	100%	66.7%	68.0%	51.4%	60.0%	81.0%	33.3%	66.7%	44.4%
					g			i						OPQ					Tv			

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

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7A. Would you recommend Mercy Maricopa Integrated Care to other physicians' practices?

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	74	7	28	60	16	23	17	17	31	24	5	2	63	2	11	25	35	24	21	6	6	9
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100.0%	100%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%
No Answer	12	4	4	8	-	3	4	4	4	2	-	-	8	1	2	1	6	3	-	2	1	3
Yes	63	5	22	52	14	18	15	16	24	21	4	2	54	2	11	23	26	20	21	5	5	7
	85.1%	71.4%	78.6%	86.7%	87.5%	78.3%	88.2%	94.1%	77.4%	87.5%	80.0%	100.0%	85.7%	100%	100.0%	92.0%	74.3%	83.3%	100.0%	83.3%	83.3%	77.8%
								i					M	Q	Q	q			R			
No	11	2	6	8	2	5	2	1	7	3	1	-	9	-	-	2	9	4	-	1	1	2
	14.9%	28.6%	21.4%	13.3%	12.5%	21.7%	11.8%	5.9%	22.6%	12.5%	20.0%		14.3%			8.0%	25.7%	16.7%		16.7%	16.7%	22.2%
									h								p					
Summary Rate - Yes	63	5	22	52	14	18	15	16	24	21	4	2	54	2	11	23	26	20	21	5	5	7
	85.1%	71.4%	78.6%	86.7%	87.5%	78.3%	88.2%	94.1%	77.4%	87.5%	80.0%	100.0%	85.7%	100%	100.0%	92.0%	74.3%	83.3%	100.0%	83.3%	83.3%	77.8%
								i					M	Q	Q	q			R			

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

9A. Have you logged into and used the Aetna Provider Portal?

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	75	7	28	60	16	24	17	17	31	24	5	2	64	3	12	25	33	25	21	5	6	9
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%
No Answer	11	4	4	8	-	2	4	4	4	2	-	-	7	-	1	1	8	2	-	3	1	3
Yes	49	3	18	38	12	13	13	7	21	19	3	2	42	-	7	19	22	16	12	4	4	7
	65.3%	42.9%	64.3%	63.3%	75.0%	54.2%	76.5%	41.2%	67.7%	79.2%	60.0%	100.0%	65.6%	58.3%	76.0%	66.7%	64.0%	57.1%	80.0%	66.7%	77.8%	
No	26	4	10	22	4	11	4	10	10	5	2	-	22	3	5	6	11	9	9	1	2	2
	34.7%	57.1%	35.7%	36.7%	25.0%	45.8%	23.5%	58.8%	32.3%	20.8%	40.0%	-	34.4%	100%	41.7%	24.0%	33.3%	36.0%	42.9%	20.0%	33.3%	22.2%
							iJ							OPQ								
Summary Rate - Yes	49	3	18	38	12	13	13	7	21	19	3	2	42	-	7	19	22	16	12	4	4	7
	65.3%	42.9%	64.3%	63.3%	75.0%	54.2%	76.5%	41.2%	67.7%	79.2%	60.0%	100.0%	65.6%	58.3%	76.0%	66.7%	64.0%	57.1%	80.0%	66.7%	77.8%	
								h	H			kM										

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.

Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

9B. Finding information you needed regarding member eligibility.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	49	3	18	38	12	13	13	7	21	19	3	2	42	-	7	19	22	16	12	4	4	7
No Answer	37	8	14	30	4	13	8	14	14	7	2	-	29	3	6	7	19	11	9	4	3	5
Completely dissatisfied	1	-	1	1	-	-	-	-	-	1	-	-	-	-	-	1	-	-	-	-	-	-
Somewhat dissatisfied	1	-	-	1	-	1	-	-	1	-	-	-	1	-	-	1	-	-	-	-	1	-
Neither dissatisfied nor satisfied	8	1	3	7	1	4	1	-	7	1	-	-	8	-	1	2	5	3	-	-	-	2
Somewhat satisfied	26	1	11	18	6	6	8	4	11	10	2	2	22	-	2	8	15	9	9	3	1	3
Completely satisfied	13	1	3	11	5	2	4	3	2	7	1	-	11	-	4	7	2	4	3	1	2	2
Summary Rate -	39	2	14	29	11	8	12	7	13	17	3	2	33	-	6	15	17	13	12	4	3	5
Completely satisfied/ Somewhat satisfied	79.6%	66.7%	77.8%	76.3%	91.7%	61.5%	92.3%	100%	61.9%	89.5%	100%	100.0%	78.6%	85.7%	78.9%	77.3%	81.3%	100.0%	100.0%	75.0%	71.4%	
					f	F	I	I	I	M	M							rv	rv			

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

9C. Finding information you needed regarding claim payments or remittance advices.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	46	3	16	35	12	12	12	6	20	18	3	1	40	-	7	16	22	14	12	4	4	6
No Answer	40	8	16	33	4	14	9	15	15	8	2	1	31	3	6	10	19	13	9	4	3	6
Completely dissatisfied	1 2.2%	-	1 6.3%	1 2.9%	-	-	-	-	-	1 5.6%	-	-	-	-	-	1 6.3%	-	-	-	-	-	-
Somewhat dissatisfied	6 13.0%	-	1 6.3%	4 11.4%	2 16.7%	4 33.3%	-	1 16.7%	3 15.0%	2 11.1%	-	-	6 15.0%	-	1 14.3%	-	5 22.7%	2 14.3%	-	2 50.0%	-	-
Neither dissatisfied nor satisfied	9 19.6%	2 66.7%	4 25.0%	7 20.0%	-	3 25.0%	5 41.7%	-	6 30.0%	3 16.7%	-	-	9 22.5%	-	1 14.3%	1 6.3%	7 31.8%	4 28.6%	1 8.3%	1 25.0%	1 25.0%	2 33.3%
Somewhat satisfied	19 41.3%	1 33.3%	8 50.0%	13 37.1%	5 41.7%	3 25.0%	5 41.7%	4 66.7%	8 40.0%	5 27.8%	2 66.7%	1 100.0%	15 37.5%	-	2 28.6%	7 43.8%	9 40.9%	4 28.6%	9 75.0%	-	1 25.0%	3 50.0%
Completely satisfied	11 23.9%	-	2 12.5%	10 28.6%	5 41.7%	2 16.7%	2 16.7%	1 16.7%	3 15.0%	7 38.9%	1 33.3%	-	10 25.0%	-	3 42.9%	7 43.8%	1 4.5%	4 28.6%	2 16.7%	1 25.0%	2 50.0%	1 16.7%
Summary Rate - Completely satisfied/ Somewhat satisfied	30 65.2%	1 33.3%	10 62.5%	23 65.7%	10 83.3%	5 41.7%	7 58.3%	5 83.3%	11 55.0%	12 66.7%	3 100%	1 100.0%	25 62.5%	-	5 71.4%	14 87.5%	10 45.5%	8 57.1%	11 91.7%	1 25.0%	3 75.0%	4 66.7%

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

9D. Finding information you needed regarding the patient (member) Gaps in Care Report.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	26	2	8	20	4	10	6	6	10	9	3	1	22	-	3	7	15	8	7	2	2	3
No Answer	43	9	20	32	7	14	9	14	18	8	2	-	34	3	7	11	20	11	12	4	3	7
Completely dissatisfied	3	-	1	2	-	1	1	1	-	1	1	-	2	-	1	-	2	-	1	1	1	-
Somewhat dissatisfied	4	1	1	4	1	1	2	-	2	2	-	-	4	-	1	-	3	2	-	1	-	1
Neither dissatisfied nor satisfied	7	-	2	6	-	5	1	1	4	2	-	1	6	-	-	3	4	3	1	-	-	1
Somewhat satisfied	9	1	3	6	3	2	2	3	3	3	1	-	8	-	-	3	5	1	4	-	1	1
Completely satisfied	3	-	1	2	-	1	-	1	1	1	1	-	2	-	1	1	1	2	1	-	-	-
N/A because we are not a PCP (Primary Care Provider) practice and/or not yet available from my health plan	17	-	4	16	5	2	6	1	7	9	-	1	15	-	3	8	6	8	2	2	2	2
Summary Rate - Completely satisfied/Somewhat satisfied	12	1	4	8	3	3	2	4	4	4	2	-	10	-	1	4	6	3	5	-	1	1
	46.2%	50.0%	50.0%	40.0%	75.0%	30.0%	33.3%	66.7%	40.0%	44.4%	66.7%		45.5%		33.3%	57.1%	40.0%	37.5%	71.4%		50.0%	33.3%

Comparison Groups: BCD/EFG/HIJ/KLM/NOQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

9E. The portal's prior authorization, requirement submissions, and confirmations functions.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	39	2	11	29	12	12	9	7	18	12	3	1	34	-	6	13	19	13	12	3	2	5
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100.0%	100.0%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%
No Answer	47	9	21	39	4	14	12	14	17	14	2	1	37	3	7	13	22	14	9	5	5	7
Completely dissatisfied	1	-	-	1	-	1	-	-	-	1	-	-	1	-	1	-	-	-	-	1	-	-
	2.6%			3.4%		8.3%				8.3%			2.9%		16.7%					33.3%		
Somewhat dissatisfied	7	-	4	3	5	2	-	-	6	1	-	1	6	-	-	6	1	1	5	-	1	-
	17.9%		36.4%	10.3%	41.7%	16.7%			33.3%	8.3%		100.0%	17.6%			46.2%	5.3%	7.7%	41.7%		50.0%	
				d					j			M				Q		R				
Neither dissatisfied nor satisfied	12	1	3	10	2	6	4	2	7	3	-	-	12	-	1	2	9	3	3	2	-	2
	30.8%	50.0%	27.3%	34.5%	16.7%	50.0%	44.4%	28.6%	38.9%	25.0%			35.3%		16.7%	15.4%	47.4%	23.1%	25.0%	66.7%		40.0%
						e											P					
Somewhat satisfied	11	1	2	8	4	-	3	1	4	4	2	-	8	-	3	-	7	4	3	-	-	2
	28.2%	50.0%	18.2%	27.6%	33.3%		33.3%	14.3%	22.2%	33.3%	66.7%		23.5%		50.0%		36.8%	30.8%	25.0%			40.0%
Completely satisfied	8	-	2	7	1	3	2	4	1	3	1	-	7	-	1	5	2	5	1	-	1	1
	20.5%		18.2%	24.1%	8.3%	25.0%	22.2%	57.1%	5.6%	25.0%	33.3%		20.6%		16.7%	38.5%	10.5%	38.5%	8.3%		50.0%	20.0%
								I								q		s				
Summary Rate - Completely satisfied/Somewhat satisfied	19	1	4	15	5	3	5	5	5	7	3	-	15	-	4	5	9	9	4	-	1	3
	48.7%	50.0%	36.4%	51.7%	41.7%	25.0%	55.6%	71.4%	27.8%	58.3%	100%		44.1%		66.7%	38.5%	47.4%	69.2%	33.3%		50.0%	60.0%
								I		i	M							s				

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30)

Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

9F. The portal's reporting functions.

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+	
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	42	2	13	32	12	11	11	7	17	16	3	1	36	-	5	16	20	12	12	4	3	5
	100.0%	100.0%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%	100.0%	100.0%	100.0%	100.0%	100%	100.0%	100.0%	100.0%	100.0%
No Answer	44	9	19	36	4	15	10	14	18	10	2	1	35	3	8	10	21	15	9	4	4	7
Completely dissatisfied	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Somewhat dissatisfied	5	-	2	3	1	3	-	1	1	3	-	-	4	-	1	2	2	1	-	2	1	-
	11.9%		15.4%	9.4%	8.3%	27.3%		14.3%	5.9%	18.8%			11.1%		20.0%	12.5%	10.0%	8.3%		50.0%	33.3%	
Neither dissatisfied nor satisfied	17	1	6	12	7	4	5	-	11	6	-	1	16	-	-	8	9	4	6	1	1	2
	40.5%	50.0%	46.2%	37.5%	58.3%	36.4%	45.5%		64.7%	37.5%			100.0%			50.0%	45.0%	33.3%	50.0%	25.0%	33.3%	40.0%
													M									
Somewhat satisfied	11	1	2	9	1	2	4	3	3	3	2	-	8	-	1	1	8	2	5	-	-	2
	26.2%	50.0%	15.4%	28.1%	8.3%	18.2%	36.4%	42.9%	17.6%	18.8%	66.7%		22.2%		20.0%	6.3%	40.0%	16.7%	41.7%			40.0%
							e										P					
Completely satisfied	9	-	3	8	3	2	2	3	2	4	1	-	8	-	3	5	1	5	1	1	1	1
	21.4%		23.1%	25.0%	25.0%	18.2%	18.2%	42.9%	11.8%	25.0%	33.3%		22.2%		60.0%	31.3%	5.0%	41.7%	8.3%	25.0%	33.3%	20.0%
															Q	Q	S					
Summary Rate - Completely satisfied/Somewhat satisfied	20	1	5	17	4	4	6	6	5	7	3	-	16	-	4	6	9	7	6	1	1	3
	47.6%	50.0%	38.5%	53.1%	33.3%	36.4%	54.5%	85.7%	29.4%	43.8%	100%		44.4%		80.0%	37.5%	45.0%	58.3%	50.0%	25.0%	33.3%	60.0%
								IJ							Pq							

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
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 Lowercase letters indicate significance at the 90% level.
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Mercy Maricopa Integrated Care
 Provider Satisfaction Survey (9116143)

9H. What number would you use to rate your overall experience with the Provider Portal?

	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Total Answering	Primry Care	Spclty	BH Clin.	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys.	Behav. Hlth. Clin.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)
Total	86	11	32	68	16	26	21	21	35	26	5	2	71	3	13	26	41	27	21	8	7	12
Total Answering	48	2	17	37	12	13	12	7	21	18	3	2	41	-	7	19	21	16	12	4	4	6
No Answer	38	9	15	31	4	13	9	14	14	8	2	-	30	3	6	7	20	11	9	4	3	6
0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2	1 2.1%	-	1 5.9%	1 2.7%	-	-	-	-	-	1 5.6%	-	-	-	-	-	1 5.3%	-	-	-	-	-	-
3	1 2.1%	-	-	1 2.7%	-	1 7.7%	-	-	1 4.8%	-	-	-	1 2.4%	-	-	1 5.3%	-	-	-	-	1 25.0%	-
4	4 8.3%	-	-	3 8.1%	1 8.3%	3 23.1%	-	-	2 9.5%	2 11.1%	-	-	4 9.8%	-	1 14.3%	-	3 14.3%	1 6.3%	-	1 25.0%	-	-
5	4 8.3%	-	2 11.8%	3 8.1%	1 8.3%	2 15.4%	-	-	3 14.3%	1 5.6%	-	1 50.0%	3 7.3%	-	1 14.3%	1 5.3%	2 9.5%	4 25.0%	-	-	-	-
6	3 6.3%	-	1 5.9%	3 8.1%	-	1 7.7%	1 8.3%	1 14.3%	2 9.5%	-	-	-	3 7.3%	-	-	1 5.3%	2 9.5%	2 12.5%	1 8.3%	-	-	-
7	15 31.3%	1 50.0%	8 47.1%	9 24.3%	4 33.3%	4 30.8%	6 50.0%	2 28.6%	9 42.9%	4 22.2%	1 33.3%	1 50.0%	13 31.7%	-	-	7 36.8%	8 38.1%	1 6.3%	6 50.0%	2 50.0%	1 25.0%	3 50.0%
8	8 16.7%	1 50.0%	3 17.6%	6 16.2%	1 8.3%	-	2 16.7%	3 42.9%	1 4.8%	3 16.7%	-	-	7 17.1%	-	2 28.6%	1 5.3%	4 19.0%	4 25.0%	2 16.7%	-	-	1 16.7%
9	8 16.7%	-	2 11.8%	8 21.6%	3 25.0%	2 15.4%	2 16.7%	1 14.3%	2 9.5%	4 22.2%	2 66.7%	-	6 14.6%	-	2 28.6%	5 26.3%	1 4.8%	4 25.0%	1 8.3%	1 25.0%	1 25.0%	1 16.7%
10	4 8.3%	-	-	3 8.1%	2 16.7%	-	1 8.3%	-	1 4.8%	3 16.7%	-	-	4 9.8%	-	1 14.3%	2 10.5%	1 4.8%	-	2 16.7%	-	1 25.0%	1 16.7%

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30) [BANNERS]
 Presented by SPH Analytics
 770-978-3173
 2016

Mercy Maricopa Integrated Care
Provider Satisfaction Survey (9116143)

9H. What number would you use to rate your overall experience with the Provider Portal?

Total Answering	Area of Medicine			Physicians in Practice			Years in Practice			Managed Care Volume			Survey Respondent			Insurance Participation						
	Primry Care	BH Spclty	Clin. Solo	Solo	2-5	>5	<5 yrs	5-15 yrs	16 yrs+	0-10%	11-20%	21-100%	Phys. Clin.	Behav. Hlth. Mgr.	Office Mgr.	Nurse/Other staff	3 or fewer	4 to 7	8 to 11	12 to 15	15+	
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)	
Summary Rate - 8-10	20	1	5	17	6	2	5	4	4	10	2	-	17	-	5	8	6	8	5	1	2	3
	41.7%	50.0%	29.4%	45.9%	50.0%	15.4%	41.7%	57.1%	19.0%	55.6%	66.7%	41.5%	71.4%	42.1%	28.6%	50.0%	41.7%	25.0%	50.0%	50.0%		
					F			i		I				Q								

Comparison Groups: BCD/EFG/HIJ/KLM/NOPQ/RSTUV
 Independent Z-Test for Percentages (unpooled proportions)
 Uppercase letters indicate significance at the 95% level.
 Lowercase letters indicate significance at the 90% level.
 Note: When comparing groups the Z-Test is only valid for large sample sizes (generally, n >=30) [BANNERS]
 Presented by SPH Analytics
 770-978-3173
 2016

11. Glossary of Terms

Attributes are the individual questions that relate to specific characteristics of the health plan.

Composites are the mean of the Summary Rates of attributes with similar question topics.

Summary Rates are single statistics generated for a survey question. Summary Rates represent the percentage of respondents who chose the most favorable response option(s) ('Well above average' or 'Somewhat above average;' 'Yes;' 'Completely satisfied' or 'Somewhat satisfied;' and '8' '9' or '10').

SPH Analytics Aggregate Book of Business (2015)

The 2015 SPH Analytics Aggregate Book of Business is a benchmark containing data from 55 plans representing 17,370 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine.

SPH Analytics Medicaid Book of Business (2015)

The 2015 SPH Analytics Medicaid Book of Business is a benchmark containing data from 46 plans representing 13,436 respondents in Primary Care, Specialty, and Behavioral Health areas of medicine.

12. Appendix A: Question Summaries

The proportion of respondents who fall into each response category for all questions is shown beginning on page A.1. Each question addresses the provider’s rating of Mercy Maricopa Integrated Care. The Question Summary pages are broken down into several sections, which are described below.

Valid n & Category Responses

The Valid n column shows the number of respondents who chose to answer the question. This number may be lower than the total number of respondents who completed the survey because respondents either chose not to answer the question (left the question blank on the survey tool) or selected ‘Not Applicable.’ The Category Responses section provides the percentage of respondents who selected each response option.

Summary Rates

The Summary Rates section provides trend (if applicable) and benchmark comparisons of Mercy Maricopa Integrated Care’s Summary Rates. The Summary Rate is the proportion of respondents choosing the most positive response option(s) for each question. Typically, it is the sum of the proportion of respondents who selected ‘Well above average’ or ‘Somewhat above average.’ For all other questions, the Summary Rate is the sum of the bold category responses.

Mean Scores

The Mean Scores section provides further analysis of your results. While Summary Rates are very helpful in that they highlight areas where your plan scores well, they are not a complete indication of performance.

Mean Scores provide an average of responses. The score is calculated by assigning a value of one to five to each response option. For example, ‘Well above average’ receives a score of 5, while ‘Well below average’ receives a score of 1. Therefore, higher Mean Scores indicate more favorable responses, while lower Mean Scores indicate unfavorable responses.

For example, the Mean Score for Mercy Maricopa Integrated Care in the example below is 3.78, meaning that the average response option chosen is between ‘Average’ and ‘Somewhat above average.’

Question	Plan	Plan Mean	2015 SPHA B.o.B Mean
2A. Consistency of reimbursement fees with your contract rates.	Mercy Maricopa	3.78	3.19

Charts A.1 – A.10

Question Summaries

Demographics

86 Total Respondents

Survey Item	Valid n	Category Responses						
A. Please indicate your area of medicine. (Mark all that apply)	80	<u>Primary Care</u> 13.8%	<u>Specialty</u> 40.0%	<u>Behavioral Health Clinician</u> 85.0%				
B. How many physicians are in your practice?	63	<u>Solo</u> 25.4%	<u>2 - 5 physicians</u> 41.3%	<u>More than 5 physicians</u> 33.3%				
C. How many years have you been in this practice?	82	<u>Less than 5 years</u> 25.6%	<u>5 - 15 years</u> 42.7%	<u>16 years or more</u> 31.7%				
D. What portion of your managed care volume is represented by Mercy Maricopa Integrated Care?	78	<u>None</u> 2.6%	<u>10% or less</u> 3.8%	<u>11 - 20%</u> 2.6%	<u>21 - 30%</u> 3.8%	<u>31 - 50%</u> 10.3%	<u>51 - 75%</u> 16.7%	<u>76 - 100%</u> 60.3%
E. Please mark who is completing this survey. (Mark only one)	83	<u>Physician</u> 3.6%	<u>Behavioral Health Clinician</u> 15.7%	<u>Office Manager</u> 31.3%	<u>Nurse</u> 2.4%	<u>Other staff</u> 47.0%		
F. What is your preferred method of receiving communications from this health plan?	78	<u>Mail</u> 19.2%	<u>Telephone</u> 3.8%	<u>Fax</u> 7.7%	<u>Online portal</u> 9.0%	<u>E-mail</u> 52.6%	<u>In person from your Provider Representative</u> 7.7%	<u>Other</u> 0.0%
G. Please indicate the number of insurance companies with which you or your practice participates.	75	<u>3 or fewer</u> 36.0%	<u>4 to 7</u> 28.0%	<u>8 to 11</u> 10.7%	<u>12 to 15</u> 9.3%	<u>More than 15</u> 16.0%		

Note: The sum of responses for Area of Medicine may be greater than 100% as respondents are able to choose multiple response options.

Question Summaries

Comparative Rating

86 Total Respondents

This first question asks you to think about Mercy Maricopa Integrated Care in comparison to all of the other health plans that you work with.		Category Responses						Summary Rate Scores*				Mean Scores**	
Survey Item	Valid n	<u>Well above average</u>	<u>Somewhat above average</u>	<u>Average</u>	<u>Somewhat below average</u>	<u>Well below average</u>	<u>Not Applicable</u>	2016	2015	2014	Medicaid BoB***	2016	Medicaid BoB***
1A. How would you rate Mercy Maricopa Integrated Care compared to all other health plans you contract with?	81	32.1%	23.5%	37.0%	3.7%	3.7%	n = 1	55.6%			35.9%	3.77	3.33

* Summary Rate Scores represent the most favorable response options ("Well above average" & "Somewhat above average").

** Mean scores are the average of all responses.

*** B.o.B. represents the 2015 SPH Analytics Medicaid Book of Business Benchmark, which consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians.

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to trend or benchmark data; Cells highlighted in green denote current year plan percentage is significantly higher when compared to trend or benchmark data; No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Question Summaries

Finance Issues

86 Total Respondents

These questions ask about Finance Issues. Please rate Mercy Maricopa Integrated Care in the following service areas when compared to your experience with other health plans you work with.		Category Responses						Summary Rate Scores*				Mean Scores**	
Survey Item	Valid n	Well above average	Somewhat above average	Average	Somewhat below average	Well below average	Not Applicable	2016	2015	2014	Medicaid BoB***	2016	Medicaid BoB***
2A. Consistency of reimbursement fees with your contract rates.	73	39.7%	19.2%	24.7%	12.3%	4.1%	n = 4	58.9%			30.5%	3.78	3.19
2B. Accuracy of claims processing.	73	24.7%	21.9%	27.4%	17.8%	8.2%	n = 4	46.6%			35.1%	3.37	3.34
2C. Timeliness of claims processing.	71	29.6%	18.3%	35.2%	8.5%	8.5%	n = 4	47.9%			35.1%	3.52	3.36
2D. Resolution of claims payment problems or disputes.	71	33.8%	18.3%	19.7%	19.7%	8.5%	n = 3	52.1%			30.0%	3.49	3.18

* Summary Rate Scores represent the most favorable response options ("Well above average" & "Somewhat above average").

** Mean scores are the average of all responses.

*** B.o.B. represents the 2015 SPH Analytics Medicaid Book of Business Benchmark, which consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians.

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to trend or benchmark data; Cells highlighted in green denote current year plan percentage is significantly higher when compared to trend or benchmark data; No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Question Summaries

Utilization and Quality Management

86 Total Respondents

These questions ask about Utilization and Quality Management. Please rate Mercy Maricopa Integrated Care in the following service areas when compared to your experience with other health plans you work with.		Category Responses						Summary Rate Scores*				Mean Scores**	
Survey Item	Valid n	Well above average	Somewhat above average	Average	Somewhat below average	Well below average	Not Applicable	2016	2015	2014	Medicaid BoB***	2016	Medicaid BoB***
3A. Access to knowledgeable UM staff.	72	26.4%	25.0%	33.3%	15.3%	0.0%	n = 2	51.4%			30.9%	3.63	3.30
3B. Procedures for obtaining pre-certification/referral/authorization information.	61	21.3%	26.2%	39.3%	11.5%	1.6%	n = 11	47.5%			31.5%	3.54	3.25
3C. Timeliness of obtaining pre-certification/referral/authorization information.	59	16.9%	28.8%	37.3%	16.9%	0.0%	n = 13	45.8%			32.0%	3.46	3.27
3D. The health plan's facilitation/support of appropriate clinical care for patients.	68	32.4%	14.7%	42.6%	10.3%	0.0%	n = 5	47.1%			31.1%	3.69	3.32
3E. Access to Case/Care Managers from this health plan.	67	32.8%	16.4%	34.3%	16.4%	0.0%	n = 8	49.3%			30.8%	3.66	3.30
3F. Degree to which the plan covers and encourages preventive care and wellness.	66	30.3%	21.2%	36.4%	1.5%	10.6%	n = 8	51.5%			39.6%	3.59	3.48

* Summary Rate Scores represent the most favorable response options ("Well above average" & "Somewhat above average").

** Mean scores are the average of all responses.

*** B.o.B. represents the 2015 SPH Analytics Medicaid Book of Business Benchmark, which consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians.

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to trend or benchmark data; Cells highlighted in green denote current year plan percentage is significantly higher when compared to trend or benchmark data; No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Question Summaries

Network/Coordination of Care

86 Total Respondents

These questions ask about Mercy Maricopa Integrated Care's network providers. Please rate Mercy Maricopa Integrated Care in the following service areas when compared to your experience with other health plans you work with.		Category Responses						Summary Rate Scores*				Mean Scores**	
Survey Item	Valid n	<u>Well above average</u>	<u>Somewhat above average</u>	<u>Average</u>	<u>Somewhat below average</u>	<u>Well below average</u>	<u>Not Applicable</u>	2016	2015	2014	Medicaid BoB***	2016	Medicaid BoB***
4A. The number of specialists in this health plan's provider network.	59	22.0%	22.0%	47.5%	8.5%	0.0%	n = 12	44.1%			27.0%	3.58	3.10
4B. The quality of specialists in this health plan's provider network.	59	20.3%	18.6%	50.8%	8.5%	1.7%	n = 13	39.0%			32.9%	3.47	3.34
4C. The timeliness of feedback/reports from specialists in this health plan's provider network.	56	19.6%	12.5%	55.4%	10.7%	1.8%	n = 16	32.1%			27.0%	3.38	3.26

* Summary Rate Scores represent the most favorable response options ("Well above average" & "Somewhat above average").

** Mean scores are the average of all responses.

*** B.o.B. represents the 2015 SPH Analytics Medicaid Book of Business Benchmark, which consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians.

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to trend or benchmark data; Cells highlighted in green denote current year plan percentage is significantly higher when compared to trend or benchmark data; No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Question Summaries

Health Plan Call Center Service Staff

86 Total Respondents

Survey Item	Valid n	Category Responses						Summary Rate Scores*				Mean Scores**	
		Well above average	Somewhat above average	Average	Somewhat below average	Well below average	Not Applicable	2016	2015	2014	Medicaid BoB***	2016	Medicaid BoB***
5A. Ease of reaching health plan call center staff over the phone.	64	23.4%	32.8%	35.9%	7.8%	0.0%	n = 8	56.3%			38.7%	3.72	3.40
5B. Process of obtaining member information (eligibility, benefit coverage, co-pay amounts).	64	34.4%	23.4%	34.4%	6.3%	1.6%	n = 9	57.8%			43.4%	3.83	3.55
5C. Helpfulness of health plan call center staff in obtaining referrals for patients in your care.	62	29.0%	27.4%	33.9%	8.1%	1.6%	n = 10	56.5%			38.2%	3.74	3.42
5D. Overall satisfaction with health plan's call center service.	68	25.0%	30.9%	35.3%	8.8%	0.0%	n = 5	55.9%			41.0%	3.72	3.47

* Summary Rate Scores represent the most favorable response options ("Well above average" & "Somewhat above average").

** Mean scores are the average of all responses.

*** B.o.B. represents the 2015 SPH Analytics Medicaid Book of Business Benchmark, which consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians.

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to trend or benchmark data; Cells highlighted in green denote current year plan percentage is significantly higher when compared to trend or benchmark data; No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Question Summaries

Provider Relations

86 Total Respondents

These questions ask about your experiences with Mercy Maricopa Integrated Care's Provider Relations department. Please rate Mercy Maricopa Integrated Care in the following service areas when compared to your experience with other health plans you work with.		Category Responses						Summary Rate Scores*				Mean Scores**	
Survey Item	Valid n	Yes	No					2016	2015	2014	Medicaid BoB***	2016	Medicaid BoB***
6A. Do you have a Provider Relations representative from this health plan assigned to your practice?	70	85.7%	14.3%					85.7%			53.1%	NA	NA
Survey Item	Valid n	Well above average	Somewhat above average	Average	Somewhat below average	Well below average	Not Applicable	2016	2015	2014	Medicaid BoB***	2016	Medicaid BoB***
6B. Provider Relations representative's ability to answer questions and resolve problems.	58	27.6%	22.4%	29.3%	13.8%	6.9%	n = 0	50.0%			49.9%	3.50	3.58
6C. Quality of provider orientation process.	67	17.9%	28.4%	32.8%	9.0%	11.9%	n = 7	46.3%			30.1%	3.31	3.24
6D. Quality of written communications, policy bulletins, and manuals.	76	27.6%	32.9%	31.6%	2.6%	5.3%	n = 0	60.5%			33.2%	3.75	3.35

* Summary Rate Scores represent the most favorable response options ("Yes;" "Well above average" & "Somewhat above average").

** Mean scores are the average of all responses.

*** B.o.B. represents the 2015 SPH Analytics Medicaid Book of Business Benchmark, which consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians.

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to trend or benchmark data; Cells highlighted in green denote current year plan percentage is significantly higher when compared to trend or benchmark data; No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Question Summaries

Overall Satisfaction

86 Total Respondents

These questions ask about your overall satisfaction with Mercy Maricopa Integrated Care. Additionally, please rate your satisfaction with the other plans listed and provide feedback on how Mercy Maricopa Integrated Care can improve.		Category Responses		Summary Rate Scores*				Mean Scores**	
Survey Item	Valid n	Yes	No	2016	2015	2014	Medicaid BoB***	2016	Medicaid BoB***
7A. Would you recommend Mercy Maricopa Integrated Care to other physicians' practices?	74	85.1%	14.9%	85.1%			84.0%	NA	NA

* Summary Rate Scores represent the most favorable response options ("Yes").

** Mean scores are the average of all responses.

*** B.o.B. represents the 2015 SPH Analytics Medicaid Book of Business Benchmark, which consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians.

Note: Significance Testing - Cells highlighted in red denote current year plan percentage is significantly lower when compared to trend or benchmark data; Cells highlighted in green denote current year plan percentage is significantly higher when compared to trend or benchmark data; No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Question Summaries

Provider Portal

86 Total Respondents

These questions ask about your Aetna's Provider Portal. This is the secure site that you access with a username and password. Please rate Aetna in the following service areas when compared to your experience with other health plans you work with.		Category Responses						Summary Rate Scores*				Mean Scores**	
Survey Item	Valid n	Yes	No					2016	2015	2014	Medicaid BoB***	2016	Medicaid BoB***
9A. Have you logged into and used the Aetna Provider Portal?	75	65.3%	34.7%					65.3%			NA	NA	NA
Survey Item	Valid n	Completely satisfied	Somewhat satisfied	Neither dissatisfied nor satisfied	Somewhat dissatisfied	Completely dissatisfied	N/A	2016	2015	2014	Medicaid BoB***	2016	Medicaid BoB***
9B. Finding information you needed regarding member eligibility.	49	26.5%	53.1%	16.3%	2.0%	2.0%		79.6%			NA	4.00	NA
9C. Finding information you needed regarding claim payments or remittance advices.	46	23.9%	41.3%	19.6%	13.0%	2.2%		65.2%			NA	3.72	NA
9D. Finding information you needed regarding the patient (member) Gaps in Care Report.	26	11.5%	34.6%	26.9%	15.4%	11.5%	n = 17	46.2%			NA	3.19	NA
9E. The portal's prior authorization, requirement submissions, and confirmations functions.	39	20.5%	28.2%	30.8%	17.9%	2.6%		48.7%			NA	3.46	NA
9F. The portal's reporting functions.	42	21.4%	26.2%	40.5%	11.9%	0.0%		47.6%			NA	3.57	NA

* Summary Rate Scores represent the most favorable response options ("Yes;" "Completely satisfied" & "Somewhat satisfied").

** Mean scores are the average of all responses.

*** B.o.B. represents the 2015 SPH Analytics Medicaid Book of Business Benchmark, which consists of Primary Care Physicians, Specialists, and Behavioral Health Clinicians.

Question Summaries

Provider Portal Continued

Mercy Maricopa Integrated Care

Provider Satisfaction Survey

86 Total Respondents

Survey Item	Valid n	Category Responses			Summary Rate Scores*				Mean Scores**	
		<u>0 - 3</u>	<u>4 - 7</u>	<u>8 - 10</u>	2016	2015	2014	Medicaid BoB***	2016	Medicaid BoB***
9H. What number would you use to rate your overall experience with the Provider Portal?	48	4.2%	54.2%	41.7%	41.7%			NA	NA	NA

* Summary Rate Scores represent the most favorable response options ("8 - 10").

** Mean scores are the average of all responses.

Consulting Services

SPH Analytics Can Help You Identify Opportunities to Improve Performance

SPH Analytics (SPHA) Consulting Services help evaluate initiatives for potential improvement based on the data provided and best industry practices through consultation with your organization's team members. An in-depth analysis can help organizations identify strengths and weaknesses to improve performance.

Harnessing the Power of Information

SPHA Consulting Services help organizations develop initiatives and solutions for improved performance, patient/member satisfaction, and improvement in scores and ratings.

Action Plans for Improvement

SPHA consultants work with you to develop action plans for improvement. Our experienced consultants have extensive backgrounds in quality improvement, healthcare research, and program evaluation and development. Consultants have worked with and for leading healthcare organizations to implement process improvements and strategic initiatives.



Stars/Scores Improvement

We understand Star Ratings and scores improvement is important to your organization. As a leader in healthcare transformation, SPHA helps you evaluate your organization's performance to develop a realistic plan for improvement. SPHA looks beyond typical measures to help you gain a more meaningful understanding of patient and member sentiment. SPHA consultants help guide your performance improvement initiatives.

The answers are not always easy to find. However, there are steps you can take to bring you closer to your goals. SPHA's knowledgeable consultants help you develop plans that empower long-term success in the rapidly changing healthcare environment.

Benefits of SPHA's Consulting Services:

- Gain insight and information based on overall findings
- Examine organizational strengths and weaknesses and their impact on performance
- Identify common themes, best practices, and calls to action
- Develop action plans for improvement
- Improve ratings and scores

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