

2017 UnitedHealthcare Community & State Physician Satisfaction Results

MARKETSTRATEGIES

UnitedHealthcare C&S Arizona Health Plan Scorecard, Key Measures (0-10 Rating Scale)

Legend:		
Individual blank cells indicate questions with extremely small base sizes (n<10).	All Physician (Top Box %8-10)	All Physician (%6-10)
Individual blank cells indicate questions with extremely small base sizes (n<10). * Indicates data not sig tested due to small base size (n<30).		
** Indicates small base size (n<50); interpret with caution.	UHC C&S	UHC C&S
*** Indicates extremely small group base size (n<10); data not displayed (column will be blank).	National UHC C&S AZ Health Plan	National UHC C&S AZ Health Plan
	2017 2017 2016 2015	2017 2017 2016 2015
Indicates questions without comparable trend data.	n= 3328 159 102 111	3328 159 102 111
	△▽ Y1 Δ Y2 Δ	△∇ Y1 Δ Y2 Δ
Overall Measures		
Overall satisfaction with UnitedHealthcare Community Plan (Q5)	40 46 +4 +4 42 42	64 70 +5 -1 65 71
Extent to which would like to see more UnitedHealthcare Community Plan patients in practice (Q7) Likelihood to renew contract (Q8)	47 ∇ 66 +6 +9 60 57 75 ∇ 87 +7 +7 80 80	63
Relationship with UHC	75 \ 87 +7 +7 80 80	85 V 93 +4 +4 89 89
Helps me take care of my patients (Q10)	42 51 🛦 +14 37 -	63 ▽ 72 +11 61 -
Attentiveness to my overall needs (Q11)	38 40 +6 +2 34 38	59 63 +8 +9 55 54
Helps me be successful in my role at my practice (Q12)	39 46 +12 34 -	59 65 +8 57 -
Clinical Practice Consultant Likelihood to recommend services and support provided by CPC (Q14)	63 75*	79 83*
CPC's support on population health management quality and utilization goals (Q15)	61 75*	77 83*
CPC's support on quality improvement goals measured by HEDIS or related metrics (Q16)	63 75*	77 83*
Customer Service		
Assistance provided by toll free IVR (Q17) Assistance provided by Provider Service Call Center (Q18)	40 45 +12 +1 33 44 43 ∇ 55 ▲ +15 +5 40 50	63 69 +6 +10 63 59 66 73 +10 +4 63 69
Helpfulness of the Provider Administrative Guide/Manual (Q19)	39 44 +4 +4 40 40	60 62 +7 +2 55 60
Claims Processing	00 11 11 10 10	00 02 11 12 00 00
Timeliness of claims processing (Q20)	50 ∇ 60 +14 +9 46 51	73 77 A +16 +11 61 66
Accuracy of claims processing (Q21)	47 50 +9 +7 41 43	69 71 +5 +11 66 60
Timeliness of the claims appeals process (Q22) Communication of the determination of claims appeals (Q23)	40 46 +11 +8 35 38 40 47 +13 +9 34 38	63 63 +7 +5 56 58 62 60 +5 +1 55 59
Care Management (notification/prior authorization processes)	40 47 +13 +9 34 36	62 60 +5 +1 55 59
Ease of prior authorization process (excluding radiology services) (Q28)	38 ▽ 50 +5 +4 45 46	62 V 71 +10 +6 61 65
Timeliness of prior authorization process (excluding radiology services) (Q29)	40 ∇ 50 +5 +9 45 41	64 ∇ 73 A +15 +8 58 65
Ease of the notification/prior authorization process for radiology services (Q30)	40 ∇ 51 +8 +9 43 42 40 ∇ 55 +11 +12 44 43	64 71 +12 +9 59 62 64 71 +11 +7 60 64
Timeliness of the notification/prior authorization process for radiology services (Q31) Ease of the pharmaceutical prior authorization process (Q32)	40	64 71 +11 +7 60 64 58 62 +7 +0 55 62
Clinical appropriateness of utilization review decisions (Q33)	37 43 +7 +1 36 42	59 64 +13 -1 51 65
Effectiveness of care management programs for members (Q34)	41 50 +10 +2 40 48	64 66 +11 -3 55 69
Assistance provided by care management staff in facilitating treatment coordination (Q35)	42 ∇ 54 +11 +7 43 47	64 70 +11 +3 59 67
Availability of disease management and health education programs for members (Q36) Timeliness of Exchange of Information	43 53 +8 +6 45** 47	65 73 +8 +2 65** 71
Primary Care Physicians (Q42a)	58 64 +9 +15 55 49	79 81 +4 +1 77 80
Specialists/Consulting Physicians (Q42b)	54 57 -2 +10 59 47	78 82 +3 +4 79 78
Inpatient Hospitals (Q42c)	51 49 -4 +8 53 41	74 73 -3 +1 76 72
Emergency Department/Urgent Care Centers (Q42d) Behavioral Health Practitioners (Q42e)	49 48 -4 +9 52 39 40 43 +0 -3 43 46	73 74 -1 +5 75 69 62 70 +5 +0 65 70
Usefulness of Exchange of Information	40 43 +0 -3 43 46	62 70 +5 +0 65 70
Primary Care Physicians (Q43a)	61 ▽ 75 +8 ▲ +22 67 53	82 89 +8 +6 81 83
Specialists/Consulting Physicians (Q43b)	62 ∇ 77 +9 ▲ +13 68 64	84 V 92 +9 +3 83 89
Inpatient Hospitals (Q43c)	59 ∇ 71 +6 ▲ +15 65 56	81
Emergency Department/Urgent Care Centers (Q43d) Behavioral Health Practitioners (Q43e)	57 66 +8 +15 58 51 51 59 +2 +7 57 52	79 85 +5 +8 80 77 72 77 +5 +5 72 72
Credentialing Process	01 00 12 17 07 02	12 11 10 10 12 12
Ease of initiating the credentialing process (Q24)	53 59 +15 +7 44 52	72 72 +10 -3 62 75
Ease of completing the credentialing process (Q25)	52 56 +14 +7 42 49	72 70 +13 -3 57 73
Claims Satisfaction Satisfaction with the processing of initial claims (Q37)	32 32 ▲ +13 ▲ +19 19 13	74 74 +8 +5 66 69
Satisfaction with the processing of initial claims (Q37)	24 24 +9 🛦 +12 15 12	62 62 +4 +6 58 56
Satisfaction with the timeliness of the resolution of claims issues (Q39)	22 22 +7 +10 15 12	57 57 +3 +6 54 51
Satisfaction with the Claims Customer Service department (Q40)	24 24 +7 🛦 +11 17 13	61 61 +4 +8 57 53
Satisfaction with the Provider Services staff (Q41) Specialty Network	23 23 +4 +6 19 17	63 63 +7 +7 56 56
Quality of specialists in the referral network (Q26)	48 ∇ 59 +6 +5 53 54	72
Availability of medical specialists to accommodate your referrals within a reasonable number of days (Q27)	44 ∇ 57 +3 +7 54 50	67 \(\nabla\) 79 +7 +8 72 71
<u>Image</u>		
UHC Community Plan is trustworthy (Q44) UHC Community Plan is easy to do business with (Q45)	55 58 +0 +7 58 51 47 54 +3 +10 51 44	74 77 +11 +6 66 71 67 70 +8 +5 62 65
Like UHC Community Plan as a company and feel good about doing business with them (Q46)	50 ∇ 60 +11 ▲ +15 49 45	67 70 +8 +5 62 65 68 75 +10 +6 65 69
UHC Community Plan demonstrates social responsibility in the community (Q47)	52 59 +9 +4 50 55	69 74 ▲ +16 -1 58 75
UHC Community Plan is leading the insurance industry in simplifying health care (Q48)	45 52 +14 +5 38 47	63 66 +15 +5 51 61