



Department of Human Services Med-QUEST Division

2015 HAWAII PROVIDER SURVEY REPORT

October 2015

Draft Copy for Review



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Introduction

In calendar year (CY) 2015, the State of Hawaii, Department of Human Services, Med-QUEST Division (the MQD) required the administration of surveys to health care providers who serve QUEST Integration (QI) members through one or more QI health plan and/or the 'Ohana Community Care Services (CCS). The MQD contracted with Health Services Advisory Group, Inc. (HSAG) to administer and report the results of the Hawaii Provider Survey. The goal of the Provider Survey is to supply feedback to the MQD as it relates to providers' perceptions of the health plans (listed in Table 1-1).

Table 1-1—Participating Health Plans					
Plan Name	Plan Abbreviation				
AlohaCare QUEST Integration	AlohaCare QI				
Hawaii Medical Service Association QUEST Integration	HMSA QI				
Kaiser Permanente Hawaii QUEST Integration	Kaiser QI				
'Ohana Health Plan QUEST Integration	'Ohana QI				
'Ohana Community Care Services	'Ohana CCS				
UnitedHealthcare Community Plan QUEST Integration	UHC CP QI				

HSAG and the MQD developed a survey instrument designed to acquire meaningful provider information and gain providers' insight as it relates to the health plans' performance and potential areas of performance improvement. The survey covered topics for primary care and behavioral health providers, including impact of the plans' prior authorization and formulary on the providers' abilities to provide quality care, satisfaction with reimbursement, and formulary. A total of 1,500 providers were randomly sampled for inclusion in the survey administration: 400 Kaiser providers and 1,100 non-Kaiser providers (i.e., AlohaCare QI, HMSA QI, 'Ohana QI, 'Ohana CCS, and/or UHC CP QI providers). Providers completed the surveys from May to July 2015.



Current Status of Health Care in Hawaii

HSAG recognizes the current issues regarding the state of health care in Hawaii. The provider responses in the survey are impacted by these health care issues. Reports indicate that there is a continued shortage of primary care providers and mental health professionals in the state. This resonates with the latest findings from the Hawaii Physician Workforce Assessment Project that physician workforce in Hawaii has decreased from 2013 to 2014 by nearly 100 physicians. Researchers believe this decrease is associated with physician retirement and the increasing clinical care requirements due to changes in the healthcare system (e.g., requirements for electronic health records, transitioning to ICD-10, ePrescribing, etc.). According to the latest update to the 2014 estimates, Hawaii currently has approximately 655 fewer physicians than it needs, and this deficit will continue to increase given the increased demand for health care. The shortage affects all islands and extends across nearly every specialty area.¹⁻¹

However, there are promising trends in the state of Hawaii to improve patient access to health services. One such trend is federally qualified community health centers. Committed to serving all patients in their community, regardless of an individual's ability to pay, these rural and urban clinics are located in areas with limited access to medical services. Most have expanded their health services to include behavioral health, dental, and vision care. Is it estimated that the number of patients served by federally qualified community health centers has more than doubled over the past 10 years.¹⁻² Reports also estimate that of the patients served at these clients, approximately 50 percent are Medicaid patients and 25 percent uninsured patients.¹⁻³ Additionally, according to a 2013 report by the University of Hawaii'i, innovative solutions to the increasing physician shortage have included adoption of a comprehensive team approach to health care, leveraging the skills and knowledge of other health professionals including nurse practitioners and physician assistants. Other efforts include expanding rural training opportunities, continued funding for the Hawaii State Loan Repayment Program, and initiatives to recruit Hawaii medical training graduates to practice in the State of Hawaii.¹⁻⁴

¹⁻¹ Withy K. Amended Report to the 2015 Hawai'i State Legislature: Findings from the 2014 Hawai'i Physician Workforce Assessment Project. University of Hawai'i. January 2015. Available at: http://www.ahec.hawaii.edu/wpcontent/uploads/sites/3/2015/03/Final-1.22.2015-Revised-Physician-Workforce-Assessment-report-to-the-2015-Legislature-1.pdf. Accessed on: September 18, 2015.

 ¹⁻² Look M.A., Trask-Batti M.K., Agres R., et al. Assessment and Priorities for Health & Well-being in Native Hawaiians & other Pacific Peoples. University of Hawai'i, Center for Native and Pacific Health Disparities Research. 2013. Available at: http://blog.hawaii.edu/uhmednow/files/2013/09/AP-Hlth-REPORT-2013.pdf. Accessed on: September 15, 2015.

¹⁻³ State of Hawai'i, Department of Health. *Family Health Services Division Profiles 2014*. 2014. Available at: http://health.hawaii.gov/about/files/2015/01/FHSD_Profiles-2014.pdf. Accessed on: September 18, 2015.

¹⁻⁴ Withy K. Amended Report to the 2015 Hawai'i State Legislature: 2014 Findings from the Hawai'i Physician Workforce Assessment Project. University of Hawai'i. January 2015. Available at: http://www.ahec.hawaii.edu/wpcontent/uploads/sites/3/2015/03/Final-1.22.2015-Revised-Physician-Workforce-Assessment-report-to-the-2015-Legislature-1.pdf. Accessed on: September 18, 2015.



Summary of Results

Plan Comparisons

Where applicable, HSAG conducted tests of statistical significance to determine if significant differences in performance existed between the health plans' 2015 top-box rates. Table 1-2 presents a summary of these results.

Table 1-2—Plan Comparisons						
	AlohaCare QI	HMSA QI	Kaiser QI	'Ohana QI	'Ohana CCS	UHC CP QI
General Positions ¹⁻⁵						
Compensation Satisfaction	_			▼	▼	▼
Timeliness of Claims Payments	—			▼	•	▼
Providing Quality Care						
Prior Authorization Process	—			▼		▼
Formulary				_		▼
Formulary						
Adequate Access to Non- Formulary Drugs	•	_		▼	•	▼
Service Coordinators						
Helpfulness of Service Coordinators	—			▼	•	▼
Specialists						
Adequacy of Specialists	▼			▼		▼
Adequacy of Behavioral Health Specialists	_	_		_	_	
Behavioral Health	· · ·					
Adequacy of Licensed Behavioral Health Providers	_			▼	•	▼
▲ indicates the plan's performance is s	significantly higher t	han the aggregat	e performance of	the other plans.	1	

▲ indicates the plan's performance is significantly higher than the aggregate performance of the other plans.

— indicates the plan's performance is not significantly different than the aggregate performance of the other plans.

▼ indicates the plan's performance is significantly lower than the aggregate performance of the other plans.

¹⁻⁵ For purposes of the Compensation Satisfaction and Timeliness of Claims Payments plan comparisons, the plans' results were compared to the aggregate performance of the other Medicaid health plans and contracted commercial managed care health plans.



The following is a summary of the health plans' performance on the nine measures evaluated for statistical differences:

- AlohaCare QI's performance was significantly lower than the aggregate performance of the other plans on two measures.
- HMSA QI's performance was significantly higher than the aggregate performance of the other plans on five measures.
- Kaiser QI's performance was significantly higher than the aggregate performance of the other plans on eight measures.
- 'Ohana QI's performance was significantly lower than the aggregate performance of the other plans on seven measures.
- 'Ohana CCS' performance was significantly lower than the aggregate performance of the other plans on five measures.
- UHC CP QI's performance was significantly lower than the aggregate performance of the other plans on eight measures.

Trend Analysis

In order to evaluate trends in provider satisfaction, HSAG compared each health plan's 2015 Provider Survey results to its corresponding 2013 Provider Survey results, where applicable.^{1-6,1-7,1-8} Comparison of the plans' 2015 top-box rates to their corresponding 2013 top-box rates on the seven measures evaluated for statistically significant differences revealed that none of the health plans scored significantly higher or lower in 2015 than in 2013.

More detailed discussion of the plan comparisons and trend analysis results can be found in the Results Section beginning on page 3-1.

¹⁻⁶ The Provider Survey was not administered in 2014.

¹⁻⁷ It should be noted that a trend analysis could not be performed for the Helpfulness of Service Coordinators and Adequacy of Licensed Behavioral Health Providers measures, since these are new measures for 2015.

¹⁻⁸ This was the first year 'Ohana CCS providers were surveyed; therefore, the 2015 results are baseline results and trending could not be performed.



Recommendations

The Provider Survey revealed that there is an opportunity to improve provider satisfaction. HSAG has detailed some quality improvement suggestions that may potentially improve provider satisfaction with the domains evaluated.

HSAG also has included recommendations for the MQD aimed at increasing the provider response rates to the survey. HSAG recommends the continued administration of the Provider Survey every two years. Re-measuring the provider survey domains every two years will continue to provide trending information to the MQD, health plans, and providers. HSAG also recommends that the MQD increase the sample size for non-Kaiser providers in future years to accommodate the increase in the sample of providers evaluated through the survey (i.e., to accommodate inclusion of 'Ohana CCS providers) in order to increase the number of providers that participate in the survey.

More detailed discussion of recommendations can be found in the Recommendations Section beginning on page 4-1.





Survey Administration and Response Rates

Survey Administration

The survey administration process consisted of mailing a survey questionnaire, cover letter, and business reply envelope to a random sample of 1,500 providers (400 Kaiser providers and 1,100 non-Kaiser providers). For providers with available email addresses, an electronic reminder was sent via email communication.

Providers were given two options by which they could complete the surveys: (1) complete the paper-based survey and return it using the pre-addressed, postage-paid return envelope, or (2) complete the Web-based survey by logging on to the survey website with a designated provider-specific login. Additional information on the survey protocol is included in the Reader's Guide Section of this report beginning on page 5-1.

Response Rates

The response rate is the total number of completed surveys divided by all eligible providers within the sample. Eligible providers included the entire random sample minus ineligible surveys, which included any providers that could not be surveyed due to incorrect or incomplete mailing address information or had no current contracts with any of the health plans. A total of 260 Hawaii providers completed the survey, including 94 providers from the Kaiser sample and 166 providers from the non-Kaiser sample. Table 2-1 depicts the sample distribution of surveys and response rates.

Table 2-1—Provider Sample Distribution and Response Rate								
SampleIneligibleEligibleTotalResponseSampleSample SizeSurveysSampleRespondentsRate								
Kaiser	400	44	356	94	26.4%			
Non-Kaiser	1,100	131	969	166	17.1%			
Hawaii Provider Total	1,500	175	1,325	260	19.6%			

The response rate for the non-Kaiser sample was considerably lower than the Kaiser sample (17.1 percent and 26.4 percent, respectively).

Due to the low response rates, caution should be exercised when interpreting the health plans' results given the increased potential for non-response bias and likelihood that provider responses are not reflective of all providers serving QI members.



Provider Demographics

The following section presents the demographic characteristics of providers who completed the survey. Table 2-2 presents the provider type demographics at the sample level (i.e., Kaiser and non-Kaiser).

Table 2-2—Provider Demographics: Provider Type						
Provider Type Kaiser Non-Kaiser						
Primary Care Provider	30.8%	36.1%				
Specialist	69.2%	63.9%				

Figure 2-1 depicts the frequency of providers acceptance of new patients at the health plan level for providers who completed the survey.

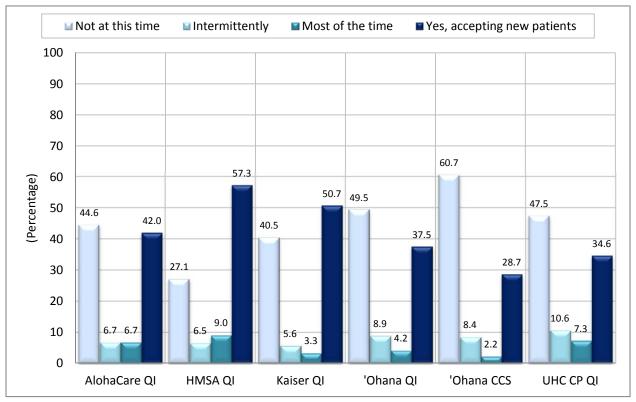


Figure 2-1—Provider Demographics: Accepting New Patients

Note: Percentages may not total 100.00% due to rounding.



The following section presents the 2015 Hawaii Provider Survey results. The results of the 2015 Hawaii Provider Survey questions are presented by the following six domains of satisfaction:

- **General Positions**—presents providers' level of satisfaction with the reimbursement rate (pay schedule) or compensation and timeliness of claims payments.
- **Providing Quality Care**—presents providers' level of satisfaction with the health plans' prior authorization process and formulary, in terms of having an impact on providers' abilities to deliver quality care.
- Formulary—presents providers' level of satisfaction with access to non-formulary drugs.
- Service Coordinators—presents providers' level of satisfaction with the help provided by service coordinators.
- **Specialists**—presents providers' level of satisfaction with the health plans' number of specialists and number of behavioral health specialists.
- **Behavioral Health**—presents providers' satisfaction ratings with the number of licensed behavioral health providers.



Provider Survey Analysis

Response options to each question within six domains were classified into one of three response categories: satisfied, neutral, and dissatisfied. For each question, the percentage of respondents in each response category was calculated. Health plan survey responses were not limited to those providers who indicated they were currently accepting new patients for that health plan in Question 1 of the survey. For example, if a provider indicated that he/she was not at this time accepting new patients for AlohaCare in Question 1, his/her responses would be included in the results pertaining to AlohaCare, if a response had been provided. Therefore, providers may have rated a health plan on a survey question even if they were not currently accepting new patients for that plan. Furthermore, if a provider was associated with more than one health plan, he/she may have answered a question for multiple health plans.

Bar graphs depict the health plans' results for each response category. Standard tests of statistical significance were conducted, where applicable, to determine if statistically significant differences in health plan performance exist. As is standard in most survey implementations, a "top-box" rate is defined by a positive or satisfied response. Statistically significant differences between the health plans' top-box responses are noted with directional triangles. A health plan's top-box rate that was significantly higher than the aggregate of the other health plans is noted with an upward (\blacktriangle) triangle. A health plan's top-box rate that was significantly lower than the aggregate of the other health plan's top-box rate that was not significantly different than the aggregate of the other health plans is denoted with no triangle.

Further, each health plan's 2015 Provider Survey results were compared to its corresponding 2013 Provider Survey results, where applicable, to determine if there were statistically significant differences.^{3-1,3-2} The results of the trend analysis revealed that there were no statistically significant differences between the health plans' 2013 and 2015 top-box rates.

For additional information on the methodology, please refer to the Reader's Guide Section of the report beginning on page 5-3.

³⁻¹ The Provider Survey was not administered in 2014.

³⁻² 2015 represents the first year 'Ohana CCS providers were surveyed; therefore, the 2015 results are baseline results and trending could not be performed.



Findings

General Positions

Providers were asked to rate their satisfaction with the rate of reimbursement or compensation they receive from their contracted health plans. Responses were classified into the three response categories as follows:

- Satisfied—Very Satisfied/Satisfied
- Neutral—Neutral
- **Dissatisfied**—Very Dissatisfied/Dissatisfied

Figure 3-1 depicts the response category proportions for each health plan and commercial managed care health plans.

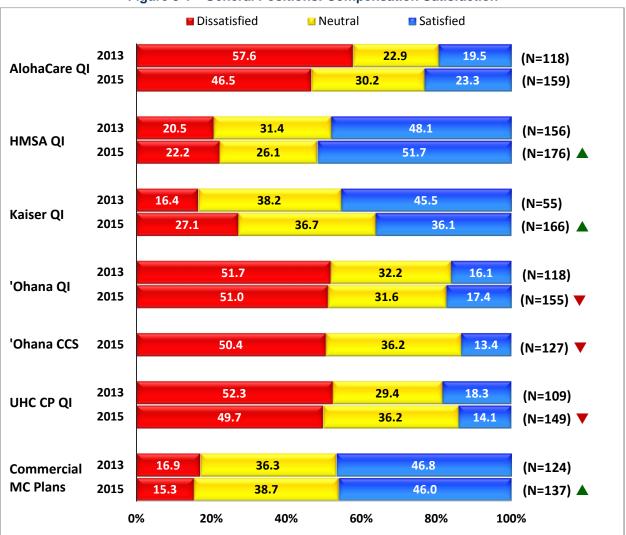


Figure 3-1—General Positions: Compensation Satisfaction

Note: Percentages may not total 100.0% due to rounding.

▲ indicates the health plan's top-box rate is significantly higher than the aggregate of the other health plans.



- AlohaCare QI's 2015 top-box rate for reimbursement/compensation (23.3 percent) was not significantly higher or lower than the aggregate of the other health plans.
- HMSA QI's 2015 top-box rate for reimbursement/compensation (51.7 percent) was significantly higher than the aggregate of the other health plans.
- Kaiser QI's 2015 top-box rate for reimbursement/compensation (36.1 percent) was significantly higher than the aggregate of the other health plans.
- 'Ohana QI's 2015 top-box rate for reimbursement/compensation (17.4 percent) was significantly lower than the aggregate of the other health plans.
- 'Ohana CCS' 2015 top-box rate for reimbursement/compensation (13.4 percent) was significantly lower than the aggregate of the other health plans.
- UHC CP QI's 2015 top-box rate for reimbursement/compensation (14.1 percent) was significantly lower than the aggregate of the other health plans.
- Providers' satisfaction with commercial managed care health plans' reimbursement/ compensation (46.0 percent) was significantly higher than the aggregate of the other health plans.



Providers were asked to rate their satisfaction with the timeliness of claims payments from their contracted health plans. Responses were classified into the three response categories as follows:

- Satisfied—Very Satisfied/Satisfied
- Neutral—Neutral
- Dissatisfied—Very Dissatisfied/Dissatisfied

Figure 3-2 depicts the response category proportions for each health plan and commercial managed care health plans.

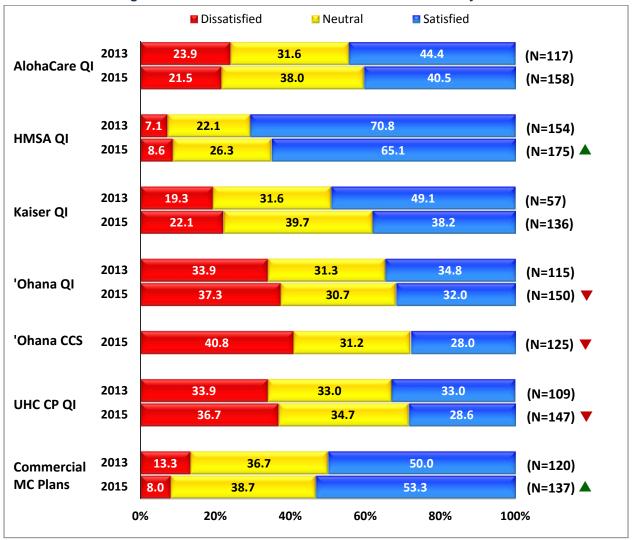


Figure 3-2—General Positions: Timeliness of Claims Payments

Note: Percentages may not total 100.0% due to rounding.

▲ indicates the health plan's top-box rate is significantly higher than the aggregate of the other health plans.



- AlohaCare QI's 2015 top-box rate for timeliness of claims payments (40.5 percent) was not significantly higher or lower than the aggregate of the other health plans.
- HMSA QI's 2015 top-box rate for timeliness of claims payments (65.1 percent) was significantly higher than the aggregate of the other health plans.
- Kaiser QI's 2015 top-box rate for timeliness of claims payments (38.2 percent) was not significantly higher or lower than the aggregate of the other health plans.
- 'Ohana QI's 2015 top-box rate for timeliness of claims payments (32.0 percent) was significantly lower than the aggregate of the other health plans.
- 'Ohana CCS' 2015 top-box rate for timeliness of claims payments (28.0 percent) was significantly lower than the aggregate of the other health plans.
- UHC CP QI's 2015 top-box rate for timeliness of claims payments (28.6 percent) was significantly lower than the aggregate of the other health plans.
- Providers' satisfaction with commercial managed care health plans' timeliness of claims payments (53.3 percent) was significantly higher than the aggregate of the other health plans.



Providing Quality Care

Providers were asked what methods they use to complete prior authorizations. Response options included: electronic, paper, and by phone. Table 3-1 presents a comparison of the distribution of prior authorization methods utilized by providers in 2013 and 2015.

Table 3-1—Prior Authorization Methods						
Method	2013	2015				
Electronic	44.8%	56.4%				
Paper	73.0%	58.3%				
By Phone	49.7%	40.8%				
Note: Providers may have may h	5	for prior authorization;				

Providers were also asked two questions focusing on the impact health plans have on their ability to provide quality care. Areas rated included: prior authorization process and formulary. Responses were classified into the three response categories as follows:

- Positive Impact—Strong Positive Impact/Positive Impact
- Neutral Impact—Little or No Impact
- **Negative Impact**—Strong Negative Impact/Negative Impact

Figure 3-3 and Figure 3-4, on the following pages, depict the response category proportions for each health plan.



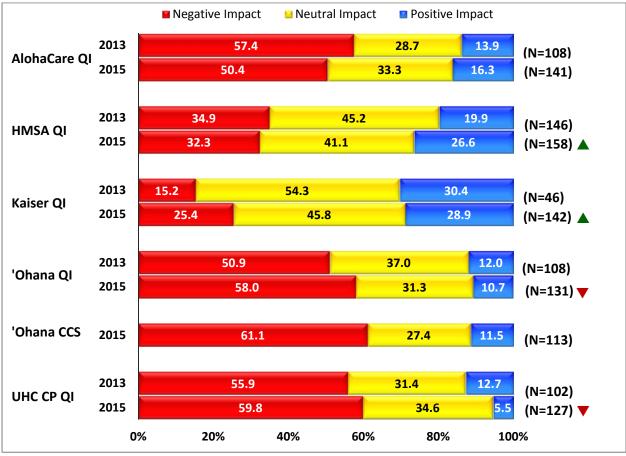


Figure 3-3—Providing Quality Care: Prior Authorization Process

Note: Percentages may not total 100.0% due to rounding.

▲ indicates the health plan's top-box rate is significantly higher than the aggregate of the other health plans.



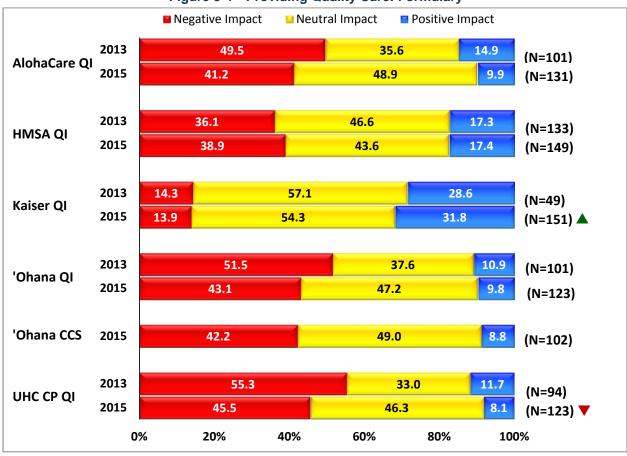


Figure 3-4—Providing Quality Care: Formulary

Note: Percentages may not total 100.0% due to rounding.

▲ indicates the health plan's top-box rate is significantly higher than the aggregate of the other health plans.



- AlohaCare QI's 2015 top-box rates for prior authorization process and formulary (16.3 percent and 9.9 percent, respectively) were not significantly higher or lower than the aggregate of the other health plans.
- HMSA QI's 2015 top-box rate for prior authorization process (26.6 percent) was significantly higher than the aggregate of the other health plans, and the 2015 top-box rate for formulary (17.4 percent) was not significantly higher or lower than the aggregate of the other health plans.
- Kaiser QI's 2015 top-box rates for prior authorization process and formulary (28.9 percent and 31.8 percent, respectively) were significantly higher than the aggregate of the other health plans.
- 'Ohana QI's 2015 top-box rates for prior authorization process (10.7 percent) was significantly lower than the aggregate of the other health plans, and the 2015 top-box rate for formulary (9.8 percent) was not significantly higher or lower than the aggregate of the other health plans.
- 'Ohana CCS' 2015 top-box rates for prior authorization process and formulary (11.5 percent and 8.8 percent, respectively) were not significantly higher or lower than the aggregate of the other health plans.
- UHC CP QI's 2015 top-box rates for prior authorization process and formulary (5.5 percent and 8.1 percent, respectively) were significantly lower than the aggregate of the other health plans.



Non-Formulary

Providers were asked a question to rate the adequacy of the health plans' access to non-formulary drugs, when needed. Responses were classified into the three response categories as follows:

- Satisfied—Yes, Definitely Adequate
- Neutral—Yes, Somewhat Adequate
- Dissatisfied—No, Not Very Adequate

Figure 3-5 depicts the response category proportions for each health plan.

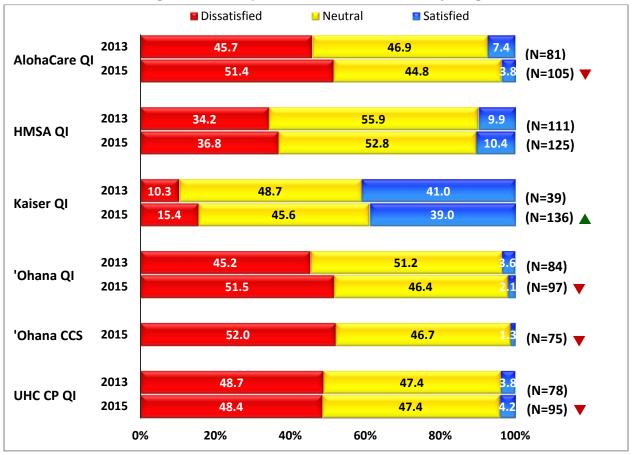


Figure 3-5—Adequate Access to Non-Formulary Drugs

Note: Percentages may not total 100.0% due to rounding.

▲ indicates the health plan's top-box rate is significantly higher than the aggregate of the other health plans.



- AlohaCare QI's 2015 top-box rate for adequate access to non-formulary drugs (3.8 percent) was significantly lower than the aggregate of the other health plans.
- HMSA QI's 2015 top-box rate for adequate access to non-formulary drugs (10.4 percent) was not significantly higher or lower than the aggregate of the other health plans.
- Kaiser QI's 2015 top-box rate for adequate access to non-formulary drugs (39.0 percent) was significantly higher than the aggregate of the other health plans.
- 'Ohana QI's 2015 top-box rate for adequate access to non-formulary drugs (2.1 percent) was significantly lower than the aggregate of the other health plans.
- 'Ohana CCS' 2015 top-box rate for adequate access to non-formulary drugs (1.3 percent) was significantly lower than the aggregate of the other health plans.
- UHC CP QI's 2015 top-box rate for adequate access to non-formulary drugs (4.2 percent) was significantly lower than the aggregate of the other health plans.



Service Coordinators

Providers were asked to rate the adequacy of the help provided by the health plans' service coordinators, when needed. Responses were classified into the three response categories as follows:

- Satisfied—Yes, Definitely Adequate
- Neutral—Yes, Somewhat Adequate
- **Dissatisfied**—No, Not Very Adequate

Figure 3-6 depicts the response category proportions for each health plan.

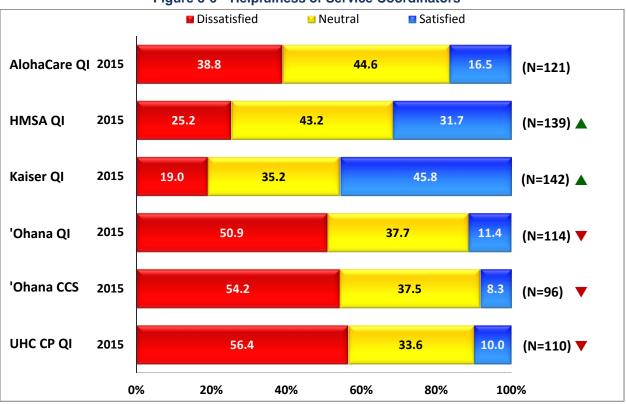


Figure 3-6—Helpfulness of Service Coordinators³⁻³

Note: Percentages may not total 100.0% due to rounding.

▲ indicates the health plan's top-box rate is significantly higher than the aggregate of the other health plans.

³⁻³ A trend analysis could not be performed for the Helpfulness of Service Coordinators measure, since this is a new measure for 2015.



- AlohaCare QI's 2015 top-box rate for helpfulness of service coordinators (16.5 percent) was not significantly higher or lower than the aggregate of the other health plans.
- HMSA QI's 2015 top-box rate for helpfulness of service coordinators (31.7 percent) was significantly higher than the aggregate of the other health plans.
- Kaiser QI's 2015 top-box rate for helpfulness of service coordinators (45.8 percent) was significantly higher than the aggregate of the other health plans.
- 'Ohana QI's 2015 top-box rate for helpfulness of service coordinators (11.4 percent) was significantly lower than the aggregate of the other health plans.
- 'Ohana CCS' 2015 top-box rate for helpfulness of service coordinators (8.3 percent) was significantly lower than the aggregate of the other health plans.
- UHC CP QI's 2015 top-box rate for helpfulness of service coordinators (10.0 percent) was significantly lower than the aggregate of the other health plans.



Specialists

Providers were asked two questions with regard to the health plans' specialists.³⁻⁴ Providers were asked to rate the adequacy of the amount of specialists and the adequacy of the amount of behavioral health specialists. Responses were classified into the three response categories as follows:

- Satisfied—Yes, Definitely Adequate
- Neutral—Yes, Somewhat Adequate
- **Dissatisfied**—No, Not Very Adequate

Figure 3-7 and Figure 3-8, on the following pages, depict the response category proportions for each health plan.

³⁻⁴ Health plan surveys results are limited to those providers who responded "Yes" to question 9 of the survey indicating that they were a primary care provider (PCP).



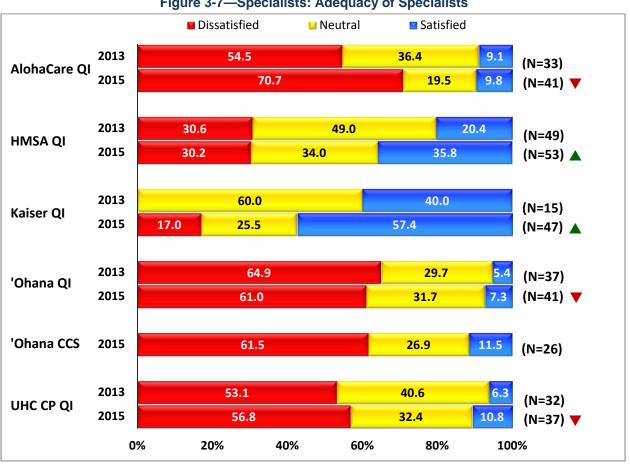


Figure 3-7—Specialists: Adequacy of Specialists

Note: Percentages may not total 100.0% due to rounding.

▲ indicates the health plan's top-box rate is significantly higher than the aggregate of the other health plans.



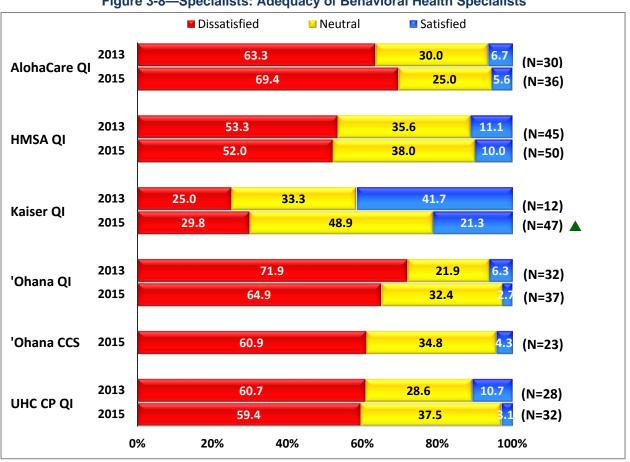


Figure 3-8—Specialists: Adequacy of Behavioral Health Specialists

Note: Percentages may not total 100.0% due to rounding.

▲ indicates the health plan's top-box rate is significantly higher than the aggregate of the other health plans.



- AlohaCare QI's 2015 top-box rate for adequacy of specialists (9.8 percent) was significantly lower than the aggregate of the other health plans, and the 2015 top-box rate for adequacy of behavioral health specialists (5.6 percent) was not significantly higher or lower than the aggregate of the other health plans.
- HMSA QI's 2015 top-box rate for adequacy of specialists (35.8 percent) was significantly higher than the aggregate of the other health plans, and the 2015 top-box rate for adequacy of behavioral health specialists (10.0 percent) was not significantly higher or lower than the aggregate of the other health plans.
- Kaiser QI's 2015 top-box rates for adequacy of specialists and adequacy of behavioral health specialists (57.4 percent and 21.3 percent, respectively) were significantly higher than the aggregate of the other health plans.
- 'Ohana QI's 2015 top-box rate for adequacy of specialists (7.3 percent) was significantly lower than the aggregate of other health plans, and the 2015 top-box rate for adequacy of behavioral health specialists (2.7 percent) was not significantly higher or lower than the aggregate of the other health plans.
- 'Ohana CCS' 2015 top-box rates for adequacy of specialists and adequacy of behavioral health specialists (11.5 percent and 4.3 percent, respectively) were not significantly higher or lower than the aggregate of the other health plans.
- UHC CP QI's 2015 top-box rate for adequacy of specialists (10.8 percent) was significantly lower than the aggregate of the other health plans, and the 2015 top-box rate for adequacy of behavioral health specialists (3.1 percent) was not significantly higher or lower than the aggregate of the other health plans.



Providers were asked to list specialists they would like to have better access to.³⁻⁵ Table 3-2 presents the specialists listed by providers.

Table 3-2—Specialist Providers Would Like Access To						
Specialist	Count	Percent				
Allergist	1	1.2%				
Audiologist	1	1.2%				
Behavioral Health	3	3.7%				
Dermatologist	13	16.0%				
Otorhinolaryngologist (Ear Nose and Throat [ENT])	6	7.4%				
Endocrinologist	2	2.5%				
Gastroenterologist (GI)	5	6.2%				
General Surgery	1	1.2%				
Mental Health	1	1.2%				
Neurologist	8	9.9%				
Nutritionist	1	1.2%				
Obstetrician & Gynecologist (OBGYN)	2	2.5%				
Ophthalmologist	2	2.5%				
Oral Surgeons	2	2.5%				
Orthopedist	6	7.4%				
Pain Management	1	1.2%				
Pediatric Allergist	1	1.2%				
Pediatric Dermatologist	2	2.5%				
Pediatric Mental Health Providers	1	1.2%				
Pediatric Neurologist	2	2.5%				
Pediatric Orthopedist	1	1.2%				
Pediatric Psychiatrist	1	1.2%				
Pediatric Surgeon	1	1.2%				
Physical/Occupational Therapist	1	1.2%				
Psychiatrist	10	12.3%				
Psychologist	1	1.2%				
Pulmonologist	1	1.2%				
Rheumatologist	1	1.2%				
Urologist	3	3.7%				

 $^{^{3-5}}$ As previously noted, results are limited to those providers that indicated they were a PCP.



Behavioral Health

Providers were asked a question with regard to the health plans' licensed behavioral health providers. Providers were asked to rate the adequacy of the amount of licensed behavioral health providers (i.e., psychiatrists or psychologists). Responses were classified into the three response categories as follows:

- Satisfied—Yes, Definitely Adequate
- Neutral—Yes, Somewhat Adequate
- **Dissatisfied**—No, Not Very Adequate

Figure 3-9, on the following page, depicts the response category proportions for each health plan.



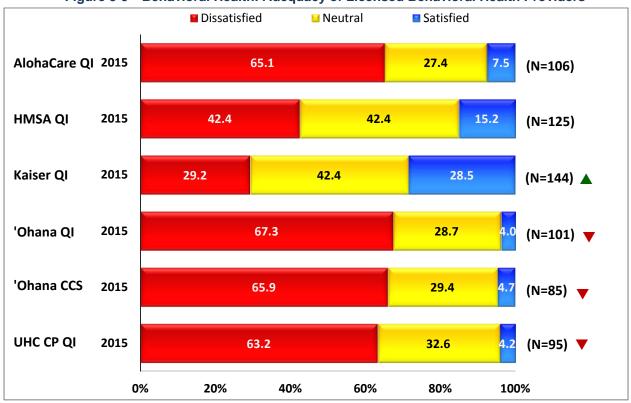


Figure 3-9—Behavioral Health: Adequacy of Licensed Behavioral Health Providers³⁻⁶

Note: Percentages may not total 100.0% due to rounding.

▲ indicates the health plan's top-box rate is significantly higher than the aggregate of the other health plans.

- AlohaCare QI's top-box rate for adequacy of licensed behavioral health providers (7.5 percent) was not significantly higher or lower than the aggregate of the other health plans.
- HMSA QI's top-box rate for adequacy of licensed behavioral health providers (15.2 percent) was not significantly higher or lower than the aggregate of the other health plans.
- Kaiser QI's top-box rate for adequacy of licensed behavioral health providers (28.5 percent) was significantly higher than the aggregate of the other health plans.
- 'Ohana QI's top-box rate for adequacy of licensed behavioral health providers (4.0 percent) was significantly lower than the aggregate of the other health plans.
- 'Ohana CCS' top-box rate for adequacy of licensed behavioral health providers (4.7 percent) was significantly lower than the aggregate of the other health plans.
- UHC CP QI's top-box rate for adequacy of licensed behavioral health providers (4.2 percent) was significantly lower than the aggregate of the other health plans.

³⁻⁶ A trend analysis could not be performed for the Behavioral Health measure, since this is a new measure for 2015.



Providers were asked if they were a behavioral health provider. Table 3-3 presents the percentage who answered "Yes" (i.e., behavioral health provider) or "No" (i.e., not a behavioral health provider).

Table 3-3—Behavioral Health: Provider Type				
Provider Type Percent				
Behavioral Health Provider	19.4%			
Not a Behavioral Health Provider	80.6%			

Behavioral health providers were asked if the services offered through the CCS program (i.e., case management, psychosocial rehabilitation, specialized residential treatment, and Clubhouse) were the right behavioral health services for their patients. Table 3-4 presents the percentage of behavioral health providers who answered "Yes" (i.e., services offered through CCS are right for their patients) or "No" (i.e., services offered through CCS are not right for their patients).³⁻⁷

Table 3-4—Behavioral Health: CCS' Program Services Right						
Provider Response Percent						
Yes	77.8%					
No	22.2%					

If the behavioral health provider answered "No," the services offered through the CCS program are not right for their patients, he/she had the opportunity to describe additional services patients needed. The following are the responses provided by behavioral health providers:

- Psychiatrist to manage their medications.
- Housing, medication assistance, and getting appointments.
- Patients who need these services are not usually coming to my buprenorphine clinic (a teaching clinic).
- CCS application process is laborious, lengthy, too long to obtain a case manager.
- Good services but my patients are high-functioning and typically do not need these services.
- Getting my patients into CCS results in an immediate reduction in reimbursement (psychologist).
- Horrible access to psychiatry.
- Case management hours seem to be inadequate to support what patients need.
- Kaiser QUEST patients are given option to choose CCS if they qualify for CCS. As a Kaiser provider, we do not see CCS patients and the level of care meets the needs of patients who are in CCS.

³⁻⁷ Results are based on providers who indicated that they were a behavioral health provider (i.e., answered "Yes" to Question 13 in the survey).



Summary of Results

Plan Comparisons

Table 3-5 presents a summary of the statistically significant differences that exist between the 2015 "top-box" rates of the health plans.

Table 3-5—Plan Comparisons						
	AlohaCare QI	HMSA QI	Kaiser QI	'Ohana QI	'Ohana CCS	UHC CP QI
General Positions ³⁻⁸					1	
Compensation Satisfaction	_			▼	▼	▼
Timeliness of Claims Payments	—			▼	▼	▼
Providing Quality Care						
Prior Authorization Process				▼		▼
Formulary		_				▼
Formulary						
Adequate Access to Non- Formulary Drugs	•	_		•	•	▼
Service Coordinators						
Helpfulness of Service Coordinators	_			▼	•	▼
Specialists						
Adequacy of Specialists	▼			▼		▼
Adequacy of Behavioral Health Specialists	_	_		_	_	_
Behavioral Health						
Adequacy of Licensed Behavioral Health Providers	_	_		▼	•	▼
▲ indicates the plan's performance is s	ignificantly higher t	han the aggregat	e performance of	the other plans.	1	

▲ indicates the plan's performance is significantly higher than the aggregate performance of the other plans.

- indicates the plan's performance is not significantly different than the aggregate performance of the other plans.

vindicates the plan's performance is significantly lower than the aggregate performance of the other plans.

³⁻⁸ For purposes of the Compensation Satisfaction and Timeliness of Claims Payments plan comparisons, the plans' results were compared to the aggregate performance of the other Medicaid health plans and contracted commercial managed care health plans.



The following is a summary of the health plans' performance on the nine measures evaluated for statistical differences.

- AlohaCare QI's performance was significantly lower than the aggregate performance of the other plans on two measures.
- HMSA QI's performance was significantly higher than the aggregate performance of the other plans on five measures.
- Kaiser QI's performance was significantly higher than the aggregate performance of the other plans on eight measures.
- 'Ohana QI's performance was significantly lower than the aggregate performance of the other plans on seven measures.
- 'Ohana CCS' performance was significantly lower than the aggregate performance of the other plans on five measures.
- UHC CP QI's performance was significantly lower than the aggregate performance of the other plans on eight measures.



Trend Analysis

Table 3-6 presents a summary of the results from the trend analysis.^{3-9,3-10}

Table 3-6—Trend Analysis							
	AlohaCare QI	HMSA QI	Kaiser QI	'Ohana QI	'Ohana CCS	UHC CP QI	
General Positions							
Compensation Satisfaction	↔	⇔	↔	⇔		⇔	
Timeliness of Claims Payments	↔	⇔	↔	⇔		↔	
Providing Quality Care							
Prior Authorization Process	↔	⇔	↔	↔		↔	
Formulary	↔	⇔	↔	↔		↔	
Formulary							
Adequate Access to Non- Formulary Drugs	⇔	⇔	⇔	⇔		⇔	
Specialists							
Adequacy of Specialists	↔	⇔	↔	↔		↔	
Adequacy of Behavioral Health Specialists	↔	⇔	↔	↔		⇔	

the 2015 top-box rate is significantly higher than the 2013 top-box rate.

↔ indicates the 2015 top-box rate is not significantly different than the 2013 top-box rate.

↓ indicates the 2015 top-box rate is significantly lower than the 2013 top-box rate.

Comparison of the health plans' 2015 top-box rates to their corresponding 2013 top-box rates on the seven measures evaluated for statistically significant differences revealed that AlohaCare QI, HMSA QI, Kaiser QI, 'Ohana QI, and UHC CP QI did not score significantly higher or lower in 2015 than in 2013 on any of the measures.

³⁻⁹ It should be noted that a trend analysis could not be performed for the Helpfulness of Service Coordinators and Adequacy of Licensed Behavioral Health Providers measures, since these are new measures for 2015.

³⁻¹⁰ This was the first year 'Ohana CCS providers were surveyed; therefore, the 2015 results are baseline results and trending could not be performed.



Quality Improvement Recommendations

The Provider Survey revealed that there is an opportunity for the plans to improve provider satisfaction.

Kaiser QI's performance was significantly higher than the aggregate performance of the other plans on nearly all domains. Conversely, 'Ohana QI and UHC CP QI exhibited the most opportunity for improvement performing significantly lower than the aggregate performance of the other plans on nearly all domains. HMSA QI and 'Ohana CCS also exhibited opportunity for improvement performing significantly lower than the aggregate performance of the other plans on over 50 percent of the measures.

Based on these results, the following are general quality improvement recommendations that the plans and the MQD should consider to increase or maintain a high level of provider satisfaction.⁴⁻¹ The MQD and each plan should evaluate these general recommendations in the context of their own operational and quality improvement activities.

- Providers consistently expressed concerns about difficulties in specialty and behavioral health referrals. Health plans could conduct an analysis to determine the frequency with which specialty categories and medical services requiring a referral or authorization are approved. For those specialty categories and medical services that have high approval rates, the plans could explore the option of no longer requiring a referral or authorization in order to streamline the processes and have a more positive impact on providers' abilities to supply quality care.
- To address providers' concerns with timeliness and burden of prior authorization systems, health plans not currently using electronic systems for providers should consider automating these processes. Automation of these processes can help facilitate patient care and allow for efficient communication with providers. Automating these processes also can: 1) minimize the number of human touches required for patient authorization, referral, and claims processing; 2) reduce the time required for providers to receive an authorization; 3) improve the timeliness of patient care; and 4) improve claims processing.
- Opportunities exist, based on providers' feedback, to ensure health plan staff have the knowledge and expertise to address providers' questions and concerns regarding health plan policies and procedures. Health plans could provide educational sessions to ensure the staff are up-to-date and well-informed about information on patient care and services requested by providers. Staff should be knowledgeable of basic information, such as, patient benefits, claims and billing, and provisions related to prior authorizations and referrals.
- Providers' feedback indicated that opportunities still exist to ensure that health plans have adequate access to non-formulary drugs. Health plans typically choose which drugs to include in the formulary. The MQD should consider working with the health plans to establish standard policies and procedures to ensure adequate access to non-formulary drugs.

⁴⁻¹ Brodsky, Karen L. "Best Practices in Specialty Provider Recruitment and Retention: Challenges and Solutions." *HealthWorks Consulting, LLC*, 2005.



• Periodic provider focus groups could be implemented to gain further valuable information and insight into areas of poor performance as described in the survey feedback. Hearing about specific scenarios and examples of provider issues may help the health plans in understanding and targeting areas needing performance improvement. Health plans could then utilize a performance improvement project approach to determine interventions and perform a targeted re-measurement of provider satisfaction at a later date.

Future Survey Administration Recommendations for the MQD

HSAG recommends continued administration of the Provider Survey every two years. This remeasurement would provide valuable trending information to the MQD, providers, the general public, as well as the health plans. Trending the data will allow health plans to see which areas they have improved on and which areas require direct improvement efforts. HSAG also recommends that the MQD continue to oversample in order to increase the number of providers that participate in the survey, as well increase the sample size for non-Kaiser providers to accommodate the increase in the sample of providers evaluated through the survey (i.e., to accommodate inclusion of 'Ohana CCS providers).

HSAG also recommends that the MQD continue to employ alternative approaches to increase provider participation in the survey. Increasing the overall number of respondents to the survey reduces the likelihood of non-response bias and increases the likelihood that the responses reflect those of all providers serving QI and CCS members. Some specific recommended strategies follow:

- Informing health plan and/or providers that a survey will be coming can greatly increase the number of responses. A survey notification, in the form of a letter or an email, could be sent from the MQD prior to administration of the survey informing health plans and/or providers about the upcoming survey, estimated timeline for administration, and when and how the survey results will be made available. Additionally, to augment the cover letter included with the mailed survey, the MQD could stress in the reminder notice, the importance of provider participation and encourage them to complete the survey when it arrives. Similar to this year, the MQD should continue its work with health plans and request that the health plans send reminder notifications to providers, or publish an announcement in provider newsletters, encouraging them to participate in the survey.
- HSAG recommends that the MQD collect email addresses for its QI and 'Ohana CCS providers to ensure this information is captured in its provider database system from which the provider survey sample is taken. Alternatively, the MQD could work with the health plans to obtain this email contact information
- A Web-based survey is an easy and convenient way for providers to respond to the survey. The combination of a mixed-mode approach (e.g., mail survey, email reminders, or Web-based survey) can help to yield higher response rates. The potential for initial and follow-up distribution of the survey via provider email as opposed to only mailed paper copies would increase the likelihood of higher response rates by allowing ease of access to the Web-based component of the survey. An email with a direct link to the Web-based survey and customized to include a provider's specific login promotes provider participation by allowing immediate and convenient access to the Web-based survey.



This section provides a comprehensive overview of the survey administration protocol and analytic methodology employed for this study. It is designed to provide supplemental information to the reader that may aid in the interpretation and use of the results presented in this report.

Survey Administration

HSAG, in collaboration with the MQD, developed a survey instrument to collect the most meaningful data possible. The 2015 Hawaii Provider Survey included 15 questions that surveyed providers on a broad range of topics.

Sampling Procedures

Hawaii providers eligible for sampling included PCPs and specialists who served the Medicaid population during the study period, were contracted with at least one of the QI health plans and/or 'Ohana CCS, and were included on the Medicaid registered provider listing provided by the MQD for HSAG's sampling. HSAG performed a simple random sample of 400 Kaiser providers and 1,100 non-Kaiser (i.e., AlohaCare QI, HMSA QI, 'Ohana QI, 'Ohana CCS, and/or UHC CP QI) providers, for a total of 1,500 providers.

Survey Protocol

The survey administration consisted of mailing surveys to the sampled providers. Each provider was sent the survey questionnaire, a cover letter from the MQD, and a postage-paid reply envelope. There were two options for providers to complete the survey: (1) complete the paper-based survey and return it in the pre-addressed, postage-paid return envelope, or (2) complete the Web-based survey by logging on to the survey website with a designated provider-specific login. For providers with available email addresses, an electronic reminder was sent via email communication.

HSAG sampled providers who met the following criteria:

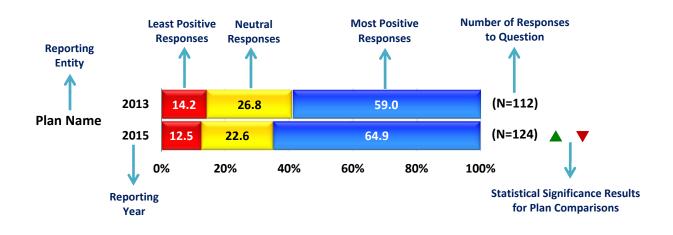
- Served the Hawaii Medicaid population.
- Provided service to QI and/or CCS members as of December 31, 2014.
- Provided service to at least one of the following health plans: AlohaCare QI, HMSA QI, Kaiser QI, 'Ohana QI, 'Ohana CCS, and/or UHC CP QI.



How to Read the Satisfaction Bar Graphs

The bar graphs in this section have three response categories. The least positive responses to the survey questions is on the left of the bar in red. Neutral responses fall between the least positive and the most positive responses and are in the middle of the bar in yellow. The most positive responses to the survey questions are on the right of the bar in blue. The most positive responses also are referred to as "top-box" responses.

Below is an explanation of how to read the satisfaction bar graphs presented throughout the Results Section.





Methodology

Response Rates

The administration of the Hawaii Provider Survey was designed to achieve the highest possible response rate. The response rate is defined as the total number of completed surveys divided by all eligible providers of the sample. Eligible providers included the entire random sample minus any providers that could not be surveyed due to incorrect contact information or did not have a current contract with any of the health plans.

Response Rate = <u>Number of Completed Surveys</u> Total Random Sample – Ineligibles

A total of 260 Hawaii providers completed a survey, including 94 providers from the Kaiser sample and 166 providers from the non-Kaiser sample.

Response Category Proportions

Where applicable, response category proportions were calculated for each survey item. Table 5-1 presents how the response categories were assigned.

Table 5-1—Response Category Assignments				
Response Category	Assignment			
Very Dissatisfied	Dissatisfied Response			
Dissatisfied	Dissatisfied Response			
Neutral	Neutral Response			
Satisfied	Satisfied Response			
Very Satisfied	Satisfied Response			
No, Not Very Adequate	Dissatisfied Response			
Yes, Somewhat Adequate	Neutral Response			
Yes, Definitely Adequate	Satisfied Response			
Strong Negative Impact	Negative Impact Response			
Negative Impact	Negative Impact Response			
Little or No Impact	Neutral Impact Response			
Positive Impact	Positive Impact Response			
Strong Positive Impact	Positive Impact Response			



For the survey items, response category proportions were calculated using a standard question summary rate formula. In other words, separate response category proportions (or question summary rates) were calculated for each of the response categories (e.g., satisfied, neutral, and dissatisfied). Responses that fell into a response category were assigned a 1, while all others were assigned a 0. These values were summed to determine a response category score.

The question summary rate was the response category score divided by the total number of responses to a question. Therefore, the response category proportions total 100 percent.

Question Summary Rate = $\sum_{i=1}^{n} \frac{x}{n}$ (QSR) i = 1, ..., n providers responding to question x = response category score (either 0 or 1)

Plan Comparisons

Chi square (χ^2) tests were performed on each measure to determine if significant performance differences existed between the plans. For purposes of this analysis, responses were categorized into one of two response categories: positive response and non-positive response. Each health plan's responses were compared to the aggregate results of the other health plans, excluding the health plan being analyzed. For example, an analysis of AlohaCare QI's results would include a comparison to the aggregate of all other health plans, excluding AlohaCare QI.

The test statistic for the χ^2 test is:

$$\chi^{2} = \sum \left[\frac{(O_{i} - E_{i})^{2}}{E_{i}} \right]$$

where O_i is the observed frequency for the *i*th category of the variable of interest and E_i is the expected frequency for the *i*th category. χ^2 will be small if the frequencies exhibit small differences (i.e., larger *p* value) and large if the frequencies exhibit large differences (i.e., small *p* value). For purposes of this evaluation, a *p* value less than 0.05 is defined as a statistically significant difference. In scenarios where any of the expected frequencies fall below five, a Fisher's Exact Test was used as an alternate method.

In the bar graphs, statistically significant differences are noted with directional triangles. A health plan's top-box rates that was significantly higher than the aggregate rate of the other health plans is noted with an upward (\blacktriangle) triangle. A health plan's top-box rate that was significantly lower than the aggregate rate of the other health plans is noted with a downward (\bigtriangledown) triangle.

Trend Analysis

The 2015 Provider Survey results for AlohaCare QI, HMSA QI, Kaiser QI, 'Ohana QI, and UHC CP QI (were compared to their corresponding 2013 Provider Survey results, where applicable, to



determine if there were statistically significant differences.^{5-1,5-2} The results of the trend analysis revealed that there were no statistically significant difference between the health plans' 2013 and 2015 top-box rates.

Limitations and Cautions

The findings presented in the 2015 Hawaii Provider Survey Report are subject to some limitations in the survey design, analysis, and interpretation. These limitations should be considered carefully when interpreting or generalizing the findings presented. These limitations are discussed below.

Non-Response Bias

The experiences of the provider respondent population may be different than that of nonrespondent providers with respect to their personal experiences and may vary by plan. Therefore, the potential for non-response bias should be considered when interpreting these results.

Single Point-in-Time

The results of the survey provide a snapshot comparison of provider satisfaction for each health plan, according to providers that completed the survey, at a single point-in-time. These comparisons may not reflect stable patterns of providers' experiences over time.

Causal Inferences

Although the survey examines whether providers report differences in satisfaction with various aspects of the health plans, these differences may not be completely attributable to the health plans. These analyses identify whether providers give different ratings of satisfaction. The survey by itself does not reveal why the differences exist.

Multi-Plan Participation

Caution should be taken when reviewing the results presented in this report. Since providers may participate in more than one health plan, the providers' responses toward a given health plan may be affected by their experiences with either: 1) a different health plan or 2) the QI programs. Therefore, any differences reported may be due to additional factors that were not captured in this survey.

⁵⁻¹ The Provider Survey was not administered in 2014.

^{5-2 2015} represents the first year 'Ohana CCS providers were surveyed; therefore, the 2015 results are baseline results and trending could not be performed.



'Ohana CCS Baseline Results

It is important to note that in 2015 'Ohana CCS providers were surveyed for the first time. The 2015 'Ohana CCS results presented in this report represent a baseline assessment of providers' satisfaction and perception of the QI health plans.

Provider Email Addresses

Email address information was not available for all providers in the sampling frame. Therefore, the survey administration protocol varied for providers based on whether or not email address information was not available. The survey administration protocol included two questionnaire mailings for all sampled providers. However, for providers with available email addresses, the survey administration protocol also included electronic reminders sent via email communication after the first and second questionnaire mailing. The lack of email addresses information for a percentage of surveyed providers may have impacted the response rates, as well as increased the potential for non-response bias among the population of providers that did not have available email address information. This should be taken into consideration when interpreting the results.

2013 Kaiser Results

Due to the small number of Kaiser provider respondents in 2013, extreme caution should be exercised when interpreting the health plan's 2013 results given the increased potential for non-response bias and likelihood that responses from the 2013 provider survey are not reflective of all Kaiser providers serving QI members in 2013.



6. Survey Instrument

This section provides a copy of the survey instrument used during this study.



2015 HAWAII PROVIDER'S SURVEY



1. Are you currently accepting new patients for the health plans below?

	Not at this time	Intermittently	Most of the time	Yes, accepting new patients
1a. AlohaCare	0	0	0	0
1b. HMSA	0	0	0	0
1c. Kaiser	0	0	0	0
1d. 'Ohana	0	0	0	0
1e. 'Ohana CCS ¹	0	0	0	0
1f. UHC CP	0	0	0	0

2. How would you describe your satisfaction with the rate of reimbursement (pay schedule) or compensation you get from each of the following:

		Very dissatisfied	Dissatisfied	Neutral	Satisfied	Very satisfied
2a.	AlohaCare	0	0	0	0	0
2b.	HMSA	0	0	0	0	0
2c.	Kaiser	0	0	0	0	0
2d.	'Ohana	0	0	0	0	0
2e.	'Ohana CCS	0	0	0	0	0
2f.	UHC CP	0	0	0	0	0
2g.	Commercial managed care health plan(s) you contract with now	0	0	0	0	0

3. How would you describe your satisfaction with the timeliness of claims payments for each of the following:

		Very dissatisfied	Dissatisfied	Neutral	Satisfied	Very satisfied
За.	AlohaCare	0	0	0	0	0
3b.	HMSA	0	0	0	0	0
3c.	Kaiser	0	0	0	0	0
3d.	'Ohana	0	0	0	0	0
3e.	'Ohana CCS	0	0	0	0	0
3f.	UHC CP	0	0	0	0	0
3g.	Commercial managed care health plan(s) you contract with now	0	0	0	0	0

4. What methods do you use to complete prior authorizations? (Select all that apply)

O Electronic

O Paper

O By Phone

¹ 'Ohana CCS is Hawaii's behavioral health program.

5. What has been the impact of the health plan's **prior authorization process** on your ability to provide quality care for your patients in the health plan?

	Strong negative impact	Negative impact	Little or no impact	Positive impact	Strong positive impact
5a. AlohaCare	0	0	0	0	0
5b. HMSA	0	0	0	0	0
5c. Kaiser	0	0	0	0	0
5d. 'Ohana	0	0	0	0	0
5e. 'Ohana CCS	0	0	0	0	0
5f. UHC CP	0	0	0	0	0

6. During the last 12 months, what has been the impact of the health plan's **formulary** on your ability to provide quality care for your patients in the health plan?

	Strong negative impact	Negative impact	Little or no impact	Positive impact	Strong positive impact
6a. AlohaCare	0	0	0	0	0
6b. HMSA	0	0	0	0	0
6c. Kaiser	0	0	0	0	0
6d. 'Ohana	0	0	0	0	0
6e. 'Ohana CCS	0	0	0	0	0
6f. UHC CP	0	0	0	0	0

7. Does the health plan provide **adequate access to** <u>non-formulary drugs</u> for patients in circumstances where you feel they are needed?

	NO, not very adequate	YES, somewhat adequate	YES, definitely adequate
7a. AlohaCare	0	0	0
7b. HMSA	0	0	0
7c. Kaiser	0	0	0
7d. 'Ohana	0	0	0
7e. 'Ohana CCS	0	0	0
7f. UHC CP	0	0	0

8. Do the health plan's **service coordinators provide the help you need** for patients in circumstances where you feel they are needed?

	NO, not very adequate	YES, somewhat adequate	YES, definitely adequate
8a. AlohaCare	0	0	0
8b. HMSA	0	0	0
8c. Kaiser	0	0	0
8d. 'Ohana	0	0	0
8e. 'Ohana CCS	0	0	0
8f. UHC CP	0	0	0

- 9. Are you a primary care provider (PCP)?
 - Yes → Go to Question 10
 - No → Go to Question 12
- 10. Does the health plan have an **adequate network of specialists** in terms of having **enough** specialists?

		NO, not very adequate	YES, somewhat adequate	YES, definitely adequate
10a.	AlohaCare	0	0	0
10b.	HMSA	0	0	0
10c.	Kaiser	0	0	0
10d.	'Ohana	0	0	0
10e.	'Ohana CCS	0	0	0
10f.	UHC CP	0	0	0

For each health plan above, please list specialists you would like to have better access to.

11. Does the health plan have an adequate network of **behavioral health specialists** in terms of having **enough** specialists?

		NO, not very adequate	YES, somewhat adequate	YES, definitely adequate
11a.	AlohaCare	0	0	0
11b.	HMSA	0	0	0
11c.	Kaiser	0	0	0
11d.	'Ohana	0	0	0
11e.	'Ohana CCS	0	0	0
11f.	UHC CP	0	0	0

12. Do the health plans have adequate licensed behavioral health providers (i.e., psychiatrists or psychologists) to care for your patients?

		NO, not very adequate	YES, somewhat adequate	YES, definitely adequate
12a.	AlohaCare	0	0	0
12b.	HMSA	0	0	0
12c.	Kaiser	0	0	0
12d.	'Ohana	0	0	0
12e.	'Ohana CCS	0	0	0
12f.	UHC CP	0	0	0

- 13. Are you a behavioral health provider?
 - O Yes → Go to Question 14
 - O No → Provide any comments at Question 15
- 14. DHS offers several behavioral health services through its CCS program. These services include case management, psychosocial rehabilitation, specialized residential treatment, and Clubhouse. Are these the right behavioral health services for your patients?
 - O Yes → Go to Question 15
 - No → Please describe the additional behavioral health services your patients need below

15. We welcome your comments - please write them on the lines below.

Thank you for sharing your experience and opinions! Your answers are greatly appreciated.

When you are done, please use the enclosed postagepaid envelope to mail the survey to:

DataStat, 3975 Research Park Drive, Ann Arbor, MI 48108

Results will be available on the Med-QUEST Division Web site after January 1, 2016.

http://www.med-quest.us/



7. CD Contents

The accompanying CD includes all of the information from the Executive Summary, Survey Administration, Results, Recommendations, Reader's Guide, and Survey Instrument sections of this report. The CD also contains electronic copies of comprehensive cross-tabulations (Tab and Banner Book) on each survey question.

CD Contents

- 2015 Hawaii Provider Survey Report
- 2015 Hawaii Provider Survey Cross-tabulations (Tab and Banner Book)

Please note, the CD contents are in the form of an Adobe Acrobat portable document format (PDF) file. Internal PDF bookmarks can be used to navigate from section-to-section within the PDF file.



Hawaii Med-QUEST Provider Survey Crosstabulations Question 1a								
	Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No	
(N)	86	50	36	38	46	14	70	
(%)	44.56	32.26	94.74	59.38	38.33	32.56	49.65	
(N)	13	12	1	4	7	5	6	
(%)	6.74	7.74	2.63	6.25	5.83	11.63	4.26	
(N)	13	13	0	5	7	4	6.38	
(%)	6.74	8.39	0.00	7.81	5.83	9.30		
(N)	81	80	1	17	60	20	56	
(%)	41.97	51.61	2.63	26.56	50.00	46.51	39.72	
(N)	193	155	38	64	120	43	141	
(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.00	
	(%) (N) (%) (N) (%) (N) (%) (N)	(N) 86 (%) 44.56 (N) 13 (%) 6.74 (N) 13 (%) 6.74 (N) 13 (%) 6.74 (N) 13 (%) 41.97 (N) 193	Total Non-Kaiser (N) 86 50 (%) 44.56 32.26 (N) 13 12 (%) 6.74 7.74 (N) 13 13 (%) 6.74 8.39 (N) 81 80 (%) 41.97 51.61 (N) 193 155	Total Non-Kaiser Kaiser (N) 86 50 36 (%) 44.56 32.26 94.74 (N) 13 12 1 (%) 6.74 7.74 2.63 (N) 13 12 1 (%) 6.74 7.74 2.63 (N) 13 13 0 (%) 6.74 8.39 0.00 (%) 81 80 1 (%) 41.97 51.61 2.63 (N) 193 155 38	Crosstabulations Question 1a Physicia Total Non-Kaiser Kaiser PCP (N) 86 50 36 38 (%) 44.56 32.26 94.74 59.38 (N) 13 12 1 4 (%) 6.74 7.74 2.63 6.25 (N) 13 13 0 5 (%) 6.74 8.39 0.00 7.81 (%) 81 80 1 17 (%) 41.97 51.61 2.63 26.56 (N) 193 155 38 64	Kaiser PCP Specialist (N) 86 50 36 38 46 (%) 44.56 32.26 94.74 59.38 38.33 (N) 13 12 1 4 7 (%) 6.74 7.74 2.63 6.25 5.83 (N) 13 12 1 4 7 (%) 6.74 7.74 2.63 6.25 5.83 (N) 13 12 1 4 7 (%) 6.74 7.74 2.63 6.25 5.83 (N) 13 13 0 5 7 (%) 6.74 8.39 0.00 7.81 5.83 (N) 81 80 1 1.77 60 (%) 41.97 51.61 2.63 26.56 50.00 (%) 41.97 51.61 2.63 26.56 50.00 (%) 193 <	Kaiser PCP Specialist Yes (N) 86 50 36 38 46 14 (%) 44.56 32.26 94.74 59.38 38.33 32.56 (N) 13 12 1 4 7 5 (%) 6.74 7.74 2.63 6.25 5.83 11.63 (%) 6.74 7.74 2.63 6.25 5.83 9.30 (N) 13 12 1 4 7 5 (%) 6.74 7.74 2.63 6.25 5.83 11.63 (N) 13 12 1 4 7 5 5 (%) 6.74 7.39 0.00 7.81 5.83 9.30 6 (%) 6.74 8.39 0.00 7.81 5.83 9.30 6 (%) 41.97 51.61 2.63 26.56 50.00 46.51 (%)	

1a. Are you currently accepting new patients for AlohaCare?

1 = Not at this time

2 = Intermittently

3 = Most of the time

4 = Yes, accepting new patients



Hawaii Med-QUEST Provider Survey Crosstabulations										
				Quest	ion 1b					
			Sam	ple	Physicia	an Type				
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No		
1	(N)	54	19	35	24	28	5	49		
	(%)	27.14	11.73	94.59	35.29	23.14	11.11	33.56		
2	(N)	13	12	1	7	6	2	9		
	(%)	6.53	7.41	2.70	10.29	4.96	4.44	6.16		
3	(N)	18	18	0	7	8	5	12		
	(%)	9.05	11.11	0.00	10.29	6.61	11.11	8.22		
4	(N)	114	113	1	30	79	33	76		
	(%)	57.29	69.75	2.70	44.12	65.29	73.33	52.05		
Total	(N)	199	162	37	68	121	45	146		
	(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.00		

1b. Are you currently accepting new patients for HMSA?

1 = Not at this time

2 = Intermittently

3 = Most of the time

4 = Yes, accepting new patients



Hawaii Med-QUEST Provider Survey Crosstabulations										
				Questio	on 1c					
			Samp	ole	Physicia	n Type	Behavioral He	alth Provider		
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No		
1	(N) (%)	87 40.47	84 64.12	3 3.57	35 48.61	48 35.82	21 53.85	62 37.35		
2	(N) (%)	12 5.58	10 7.63	2 2.38	5 6.94	6 4.48	4 10.26	8 4.82		
3	(N) (%)	7 3.26	5 3.82	2 2.38	1 1.39	6 4.48	3 7.69	2.41		
4	(N) (%)	109 50.70	32 24.43	77 91.67	31 43.06	74 55.22	11 28.21	92 55.42		
Total	(N) (%)	215 100.00	131 100.00	84 100.00	72 100.00	134 100.00	39 100.00	166 100.00		

1c. Are you currently accepting new patients for Kaiser?

1 = Not at this time

2 = Intermittently

3 = Most of the time

4 = Yes, accepting new patients



Hawaii Med-QUEST Provider Survey Crosstabulations										
				Questi	on 1d					
			Sam	ple	Physicia	an Type	Behavioral He	alth Provider		
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No		
1	(N) (%)	95 49.48	59 38.31	36 94.74	40 63.49	50 41.67	15 34.88	75 53.57		
2	(N) (%)	17 8.85	17 11.04	0 0.00	7 11.11	9 7.50	4 9.30	13 9.29		
3	(N) (%)	8 4.17	8 5.19	0 0.00	3 4.76	5 4.17	4 9.30	4		
4	(N) (%)	72 37.50	70 45.45	2 5.26	13 20.63	56 46.67	20 46.51	48 34.29		
Total	(N) (%)	192 100.00	154 100.00	38 100.00	63 100.00	120 100.00	43 100.00	140 100.00		

1d. Are you currently accepting new patients for 'Ohana?

1 = Not at this time

2 = Intermittently

3 = Most of the time

4 = Yes, accepting new patients



_			Hawaii	Med-QUEST Crosstabu		rvey		
				Questio	n 1e			
			Samp	le	Physiciar	Туре	Behavioral Hea	alth Provider
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N) (%)	108 60.67	73 51.77	35 94.59	45 78.95	59 53.15	15 34.88	89 70.08
2	(N) (%)	15 8.43	15 10.64	0 0.00	4 7.02	8 7.21	5 11.63	10 7.8
3	(N) (%)	4 2.25	4 2.84	0 0.00	1 1.75	3 2.70	4 9.30	0.00
4	(N) (%)	51 28.65	49 34.75	2 5.41	7 12.28	41 36.94	19 44.19	28 22.05
Total	(N) (%)	178 100.00	141 100.00	37 100.00	57 100.00	111 100.00	43 100.00	127 100.00

1e. Are you currently accepting new patients for 'Onana CCS'

1 = Not at this time

2 = Intermittently

3 = Most of the time

4 = Yes, accepting new patients



Hawaii Med-QUEST Provider Survey Crosstabulations										
				Questio	n 1f					
			Samp	le	Physician	Туре	Behavioral Hea	th Provider		
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No		
1	(N)	85	49	36	35	47	17	65		
	(%)	47.49	34.51	97.30	61.40	41.59	42.50	50.00		
2	(N)	19	19	0	5	12	6	12		
	(%)	10.61	13.38	0.00	8.77	10.62	15.00	9.23		
3	(N)	13	13	0	5	7	5	8		
	(%)	7.26	9.15	0.00	8.77	6.19	12.50	6.15		
4	(N)	62	61	1	12	47	12	45		
	(%)	34.64	42.96	2.70	21.05	41.59	30.00	34.62		
Total	(N)	179	142	37	57	113	40	130		
	(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.00		

11. Are you currently accepting new patients for UHC CF

1 = Not at this time

2 = Intermittently

3 = Most of the time

4 = Yes, accepting new patients



				Questio				
			Samp	le	Physician	Туре	Behavioral Healt	h Provider
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N)	39	34	5	9	29	14	2:
	(%)	24.53	23.78	31.25	20.93	27.10	34.15	23.1:
2	(N)	35	33	2	9	23	11	2
	(%)	22.01	23.08	12.50	20.93	21.50	26.83	19.4
3	(N)	48	39	9	17	29	8	3′
	(%)	30.19	27.27	56.25	39.53	27.10	19.51	34.20
4	(N)	24	24	0	7	15	4	10
	(%)	15.09	16.78	0.00	16.28	14.02	9.76	14.8
5	(N) (%)	13 8.18	13 9.09	0 0.00	1 2.33	11 10.28	4 9.76	8.3
Total	(N)	159	143	16	43	107	41	100
	(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.00



			-	Questio		_		
			Samp	le	Physician	Туре	Behavioral Heal	h Provider
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N)	15	12	3	5	9	1	14
	(%)	8.52	7.45	20.00	8.93	8.18	2.22	11.48
2	(N)	24	21	3	9	13	4	18
	(%)	13.64	13.04	20.00	16.07	11.82	8.89	14.75
3	(N)	46	40	6	19	26	8	38
	(%)	26.14	24.84	40.00	33.93	23.64	17.78	31.15
4	(N)	57	56	1	19	34	16	35
	(%)	32.39	34.78	6.67	33.93	30.91	35.56	28.69
5	(N)	34	32	2	4	28	16	17
	(%)	19.32	19.88	13.33	7.14	25.45	35.56	13.93
Total	(N)	176	161	15	56	110	45	122
	(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.00



				Questio	n 2c			
			Samp	le	Physician	п Туре	Behavioral Heal	th Provider
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N)	24	21	3	6	17	11	12
	(%)	14.46	22.34	4.17	12.24	14.91	30.56	9.52
2	(N)	21	17	4	8	13	1	20
	(%)	12.65	18.09	5.56	16.33	11.40	2.78	15.8
3	(N)	61	42	19	20	41	16	44
	(%)	36.75	44.68	26.39	40.82	35.96	44.44	34.92
4	(N)	22	10	12	7	15	3	19
	(%)	13.25	10.64	16.67	14.29	13.16	8.33	15.00
5	(N)	38	4	34	8	28	5	3
	(%)	22.89	4.26	47.22	16.33	24.56	13.89	24.6
Total	(N)	166	94	72	49	114	36	120
	(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.00
2c. How w	vould you des	cribe your satis	sfaction with the rate	of reimbursement (pay schedule) or c	compensation you	get from Kaiser?	

4 = Satisfied 5 = Very satisfied



				Questio				
			Samp	le	Physician	Туре	Behavioral Healt	th Provider
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N) (%)	45 29.03	41 29.29	4 26.67	13 28.89	29 28.43	11 28.21	3: 29.9
2	(N) (%)	34 21.94	33 23.57	1 6.67	13 28.89	19 18.63	7 17.95	2: 23.3
3	(N) (%)	49 31.61	39 27.86	10 66.67	15 33.33	33 32.35	13 33.33	34 31.7
4	(N) (%)	17 10.97	17 12.14	0 0.00	4 8.89	12 11.76	5 12.82	8.4
5	(N) (%)	10 6.45	10 7.14	0 0.00	0 0.00	9 8.82	3 7.69	6.5
Total	(N) (%)	155 100.00	140 100.00	15 100.00	45 100.00	102 100.00	39 100.00	10 100.0



				Questio	n 2e			
			Samp	le	Physician	п Туре	Behavioral Heal	th Provider
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N) (%)	35 27.56	30 26.79	5 33.33	7 23.33	27 29.35	13 33.33	22 25.93
2	(N) (%)	29 22.83	28 25.00	1 6.67	8 26.67	19 20.65	9 23.08	18 22.22
3	(N) (%)	46 36.22	37 33.04	9 60.00	12 40.00	34 36.96	12 30.77	3: 40.74
4	(N) (%)	14 11.02	14 12.50	0 0.00	3 10.00	10 10.87	3 7.69	9.8
5	(N) (%)	3 2.36	3 2.68	0 0.00	0 0.00	2 2.17	2 5.13	1.2
Total	(N) (%)	127 100.00	112 100.00	15 100.00	30 100.00	92 100.00	39 100.00	81 100.00
2e. How w 1 = Very di		cribe your satis	sfaction with the rate	of reimbursement (pay schedule) or c	compensation you	get from 'Ohana CCS	3?



				Questio				
			Samp	le	Physiciar	і Туре	Behavioral Healt	h Provider
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N) (%)	47 31.54	42 31.34	5 33.33	11 26.19	34 33.66	14 36.84	30 29.4
2	(N) (%)	27 18.12	27 20.15	0 0.00	8 19.05	18 17.82	7 18.42	20 19.6
3	(N) (%)	54 36.24	44 32.84	10 66.67	18 42.86	34 33.66	12 31.58	39 38.24
4	(N) (%)	16 10.74	16 11.94	0 0.00	5 11.90	10 9.90	4 10.53	8.82
5	(N) (%)	5 3.36	5 3.73	0 0.00	0 0.00	5 4.95	1 2.63	3.92
Total	(N) (%)	149 100.00	134 100.00	15 100.00	42 100.00	101 100.00	38 100.00	102 100.00



				Questio	n 2g			
			Samp	le	Physician	Туре	Behavioral Heal	th Provider
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N)	10	8	2	4	5	1	
-	(%)	7.30	6.50	14.29	10.00	5.38	2.86	9.1
2	(N)	11	11	0	3	8	2	
2	(%)	8.03	8.94	0.00	7.50	8.60	5.71	9.1
3	(N)	53	44	9	15	38	11	4
5	(%)	38.69	35.77	64.29	37.50	40.86	31.43	42.8
4	(N)	53	51	2	18	32	15	3
-	(%)	38.69	41.46	14.29	45.00	34.41	42.86	34.6
5	(N)	10	9	1	0	10	6	
5	(%)	7.30	7.32	7.14	0.00	10.75	17.14	4.0
Total	(N)	137	123	14	40	93	35	9
Total	(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.0

1 = Very dissatisfied 2 = Dissatisfied

3 = Neutral

4 = Satisfied

5 = Very satisfied



				Questio	n 3a			
			Samp	le	Physiciar	n Type	Behavioral Heal	th Provider
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N)	19	14	5	8	11	5	14
	(%)	12.03	9.79	33.33	19.05	10.28	12.20	13.08
2	(N)	15	12	3	2	12	5	8
	(%)	9.49	8.39	20.00	4.76	11.21	12.20	7.48
3	(N)	60	53	7	15	43	17	42
	(%)	37.97	37.06	46.67	35.71	40.19	41.46	39.25
4	(N)	43	43	0	14	25	8	29
	(%)	27.22	30.07	0.00	33.33	23.36	19.51	27.10
5	(N) (%)	21 13.29	21 14.69	0 0.00	3 7.14	16 14.95	6 14.63	14
Total	(N)	158	143	15	42	107	41	107
	(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.00
3a. How v	vould you des	scribe your sat	isfaction with the time	eliness of claims pay	ments for AlohaC	are?	<u>+</u>	

4 = Satisfied 5 = Very satisfied



			lawan	Med-QUEST Crosstabu	lations			
				Questio	n 3b			
			Samp	le	Physician	п Туре	Behavioral Hea	Ith Provider
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N)	8	5	3	4	4	1	7
	(%)	4.57	3.13	20.00	7.27	3.64	2.22	5.83
2	(N)	7	4	3	1	6	3	3
	(%)	4.00	2.50	20.00	1.82	5.45	6.67	2.50
3	(N)	46	39	7	19	25	6	38
	(%)	26.29	24.38	46.67	34.55	22.73	13.33	31.67
4	(N)	65	65	0	24	37	17	42
	(%)	37.14	40.63	0.00	43.64	33.64	37.78	35.00
5	(N)	49	47	2	7	38	18	30
	(%)	28.00	29.38	13.33	12.73	34.55	40.00	25.00
Total	(N)	175	160	15	55	110	45	120
	(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.00
3b. How v 1 = Very d 2 = Dissati 3 = Neutra 4 = Satisfie	lissatisfied isfied al	cribe your sat	isfaction with the time	eliness of claims pay	ments for HMSA?			



Question 3c								
			Samp	le	Physiciar	Туре	Behavioral Heal	h Provider
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N) (%)	16 11.76	13 15.48	3 5.77	4 10.53	12 12.37	7 23.33	7.9
2	(N)	14	12	2	5	9	1	11
	(%)	10.29	14.29	3.85	13.16	9.28	3.33	12.8
3	(N)	54	38	16	12	41	14	3
	(%)	39.71	45.24	30.77	31.58	42.27	46.67	37.6
4	(N)	24	16	8	13	11	3	2
	(%)	17.65	19.05	15.38	34.21	11.34	10.00	19.8
5	(N)	28	5	23	4	24	5	2:
	(%)	20.59	5.95	44.23	10.53	24.74	16.67	21.7
Total	(N)	136	84	52	38	97	30	10
	(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.0



Question 3d									
			Samp	le	Physician	п Туре	Behavioral Heal	th Provider	
urvey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No	
	(N) (%)	25 16.67	19 13.97	6 42.86	10 23.81	15 14.85	7 17.95	1 [*] 16.5	
	(N)	31	29		9	21	10	2	
	(%)	20.67	21.32	14.29	21.43	20.79	25.64	19.4	
	(N)	46	40	6	11	32	11	3	
	(%)	30.67	29.41	42.86	26.19	31.68	28.21	32.0	
	(N)	37	37	0	12	24	9	2	
	(%)	24.67	27.21	0.00	28.57	23.76	23.08	24.2	
	(N)	11	11	0	0	9	2	:	
	(%)	7.33	8.09	0.00	0.00	8.91	5.13	7.7	
otal	(N)	150	136	14	42	101	39	10	
ottai	(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.0	

4 = Satisfied

5 = Very satisfied



				Questio				
			Samp	le	Physician	п Туре	Behavioral Healt	h Provider
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N)	25	20	5	6	19	11	1:
	(%)	20.00	18.02	35.71	20.69	21.11	28.21	16.6
2	(N)	26	23	3	9	16	7	1
	(%)	20.80	20.72	21.43	31.03	17.78	17.95	23.0
3	(N)	39	33	6	5	32	11	20
	(%)	31.20	29.73	42.86	17.24	35.56	28.21	33.3
4	(N)	30	30	0	9	20	8	19
	(%)	24.00	27.03	0.00	31.03	22.22	20.51	24.3
5	(N) (%)	5 4.00	5 4.50	0 0.00	0 0.00	3 3.33	2 5.13	2.5
Total	(N)	125	111	14	29	90	39	7
	(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.0



Hawaii Med-QUEST Provider Survey Crosstabulations										
				Questio	n 3f					
			Samp	le	Physiciar	п Туре	Behavioral Hea	Ith Provider		
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No		
1	(N) (%)	28 19.05	23 17.16	5 38.46	6 15.00	22 22.00	13 34.21	14 14.00		
2	(N) (%)	26 17.69	25 18.66	1 7.69	9 22.50	16 16.00	6 15.79	20 20.00		
3	(N) (%)	51 34.69	44 32.84	7 53.85	12 30.00	37 37.00	13 34.21	36 36.00		
4	(N) (%)	34 23.13	34 25.37	0 0.00	11 27.50	20 20.00	5 13.16	24 24.00		
5	(N) (%)	8 5.44	8 5.97	0 0.00	2 5.00	5 5.00	1 2.63	6.00		
Total	(N) (%)	147 100.00	134 100.00	13 100.00	40 100.00	100 100.00	38 100.00	100 100.00		
	dissatisfied tisfied al	cribe your satis	sfaction with the time	liness of claims pay	ments for UHC CF	<u>5</u> ?				

4 = Satisfied

5 = Very satisfied



Question 3g									
			Samp	le	Physiciar	n Type	Behavioral Hea	Ith Provider	
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No	
1	(N) (%)	6 4.38	3 2.42	3 23.08	1 2.33	5 5.56	2 5.56	4.2	
2	(N) (%)	5 3.65	5 4.03	0 0.00	2 4.65	3 3.33	1 2.78	4.2	
3	(N) (%)	53 38.69	45 36.29	8 61.54	15 34.88	37 41.11	13 36.11	3 41.0	
4	(N) (%)	58 42.34	57 45.97	1 7.69	24 55.81	31 34.44	14 38.89	42.1	
5	(N) (%)	15 10.95	14 11.29	1 7.69	1 2.33	14 15.56	6 16.67	8.4	
Total	(N) (%)	137 100.00	124 100.00	13 100.00	43 100.00	90 100.00	36 100.00	9 100.0	

3 = Neutral

4 = Satisfied

5 = Very satisfied



_			Hawaii	i Med-QUES Crosstab	T Provider So Julations	urvey		-
				Quest	ion 4			
Sample Physician Type							Behavioral He	alth Provider
Survey Response		Total	Non-Kaiser Kaiser PCP Specialist	Specialist	Yes	No		
0	(N) (%)	92 43.60	82 56.16	10 15.38	28 38.36	59 46.46	26 60.47	61 39.10
1	(N) (%)	119 56.40	64 43.84	55 84.62	45 61.64	68 53.54	17 39.53	95 60.90
Total	(N) (%)	211 100.00	146 100.00	65 100.00	73 100.00	127 100.00	43 100.00	156 100.00
4. What m	ethods do vo	u use to comp	lete prior authorizat	ions? (Select all th	at apply)			

0 = Respondent did not check "Electronic"

1 = Respondent checked "Electronic"



_			Hawaii	i Med-QUES Crosstab	T Provider So oulations	urvey		-
				Quest	tion 4			
			Sam	ple	Physicia	an Type	Behavioral He	alth Provider
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
0	(N) (%)	88 41.71	33 22.60	55 84.62	28 38.36	56 44.09	15 34.88	69 44.23
1	(N) (%)	123 58.29	113 77.40	10 15.38	45 61.64	71 55.91	28 65.12	87 55.77
Total	(N) (%)	211 100.00	146 100.00	65 100.00	73 100.00	127 100.00	43 100.00	156 100.00
4. What m	ethods do you	u use to comp	lete prior authorizat	tions? (Select all th	at apply)			

0 = Respondent did not check "Paper" 1 = Respondent checked "Paper"



			Hawaii	i Med-QUES Crosstab	T Provider So oulations	urvey		
				Quest	tion 4			
Sample Physician Type Beh								alth Provider
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
0	(N) (%)	125 59.24	65 44.52	60 92.31	38 52.05	80 62.99	30 69.77	89 57.05
1	(N) (%)	86 40.76	81 55.48	5 7.69	35 47.95	47 37.01	13 30.23	67 42.95
Total	(N) (%)	211 100.00	146 100.00	65 100.00	73 100.00	127 100.00	43 100.00	156 100.00
4. What m	ethods do you	u use to comp	lete prior authorizat	ions? (Select all th	nat apply)			

0 = Respondent did not check "By Phone"

1 = Respondent checked "By Phone"



				Questio	n 5a			
Sample Physician Type Behavioral Heal								Ith Provider
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N) (%)	33 23.40	25 19.69	8 57.14	11 26.83	21 22.83	7 18.92	24 25.53
2	(N) (%)	38 26.95	37 29.13	1 7.14	15 36.59	21 22.83	8 21.62	27 28.72
3	(N) (%)	47 33.33	42 33.07	5 35.71	10 24.39	37 40.22	16 43.24	31 32.98
4	(N) (%)	16 11.35	16 12.60	0 0.00	5 12.20	7 7.61	3 8.11	8.5
5	(N) (%)	7 4.96	7 5.51	0 0.00	0 0.00	6 6.52	3 8.11	4.20
Total	(N) (%)	141 100.00	127 100.00	14 100.00	41 100.00	92 100.00	37 100.00	94 100.00

1 = Strong negative impact

2 = Negative impact

3 = Little or no impact 4 = Positive impact

5 = Strong positive impact



				Question	n 5b			
			Samp	le	Physiciar	п Туре	Behavioral Health Provider	
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N)	19	14	5	5	13	5	11
	(%)	12.03	9.66	38.46	8.93	13.98	12.50	12.04
2	(N)	32	30	2	17	14	4	23
	(%)	20.25	20.69	15.38	30.36	15.05	10.00	23.1
3	(N)	65	59	6	19	44	20	41
	(%)	41.14	40.69	46.15	33.93	47.31	50.00	39.8
4	(N)	27	27	0	11	14	7	1′
	(%)	17.09	18.62	0.00	19.64	15.05	17.50	15.74
5	(N)	15	15	0	4	8	4	10
	(%)	9.49	10.34	0.00	7.14	8.60	10.00	9.20
Total	(N)	158	145	13	56	93	40	103
	(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.00

1 = Strong negative impact

2 = Negative impact

3 = Little or no impact 4 = Positive impact

5 = Strong positive impact



				Questio	n 5c			
			Samp	le	Physiciar	п Туре	Behavioral Health Provider	
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N) (%)	18 12.68	16 23.19	2 2.74	6 12.77	11 11.96	6 23.08	11 9.91
2	(N) (%)	18 12.68	16 23.19	2 2.74	9 19.15	9 9.78	4 15.38	14
3	(N) (%)	65 45.77	31 44.93	34 46.58	23 48.94	42 45.65	11 42.31	52 46.85
4	(N) (%)	13 9.15	2 2.90	11 15.07	5 10.64	7 7.61	3 11.54	7.2
5	(N) (%)	28 19.72	4 5.80	24 32.88	4 8.51	23 25.00	2 7.69	20 23.42
Total	(N) (%)	142 100.00	69 100.00	73 100.00	47 100.00	92 100.00	26 100.00	111 100.00

2 = Negative impact 3 = Little or no impact 4 = Positive impact

5 = Strong positive impact



				Questio	n 5d			
Sample Physician Type Behavioral Health F								
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N) (%)	36 27.48	29 24.58	7 53.85	9 21.43	26 30.95	9 25.71	2 27.7
2	(N) (%)	40 30.53	39 33.05	1 7.69	16 38.10	23 27.38	10 28.57	2 32.2
3	(N) (%)	41 31.30	36 30.51	5 38.46	12 28.57	28 33.33	11 31.43	2 32.2
4	(N) (%)	12 9.16	12 10.17	0 0.00	5 11.90	6 7.14	4 11.43	6.6
5	(N) (%)	2 1.53	2 1.69	0 0.00	0 0.00	1 1.19	1 2.86	1.1
Total	(N) (%)	131 100.00	118 100.00	13 100.00	42 100.00	84 100.00	35 100.00	9 100.0

2 = Negative impact 3 = Little or no impact 4 = Positive impact

5 = Strong positive impact



				Questio	n 5e			
Sample Physician Type Behavioral Health Pro								
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N) (%)	34 30.09	27 27.00	7 53.85	6 21.43	27 33.75	9 25.71	23 32.39
2	(N) (%)	35 30.97	33 33.00	2 15.38	14 50.00	20 25.00	11 31.43	22 30.99
3	(N) (%)	31 27.43	27 27.00	4 30.77	4 14.29	26 32.50	9 25.71	22 29.58
4	(N) (%)	10 8.85	10 10.00	0 0.00	4 14.29	5 6.25	4 11.43	5.63
5	(N) (%)	3 2.65	3 3.00	0 0.00	0 0.00	2 2.50	2 5.71	1.4
Total	(N) (%)	113 100.00	100 100.00	13 100.00	28 100.00	80 100.00	35 100.00	71 100.00

2 = Negative impact

3 = Little or no impact 4 = Positive impact

5 = Strong positive impact



Question 5f									
Sample Physician Type Behavioral Health								h Provider	
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No	
1	(N) (%)	35 27.56	28 24.56	7 53.85	7 18.42	27 32.14	13 41.94	2 22.4	
2	(N) (%)	41 32.28	40 35.09	1 7.69	16 42.11	23 27.38	9 29.03	2 32.5	
3	(N) (%)	44 34.65	39 34.21	5 38.46	13 34.21	30 35.71	9 29.03	3 38.2	
4	(N) (%)	5 3.94	5 4.39	0 0.00	2 5.26	2 2.38	0 0.00	4.4	
5	(N) (%)	2 1.57	2 1.75	0 0.00	0 0.00	2 2.38	0 0.00	2.2	
Total	(N) (%)	127 100.00	114 100.00	13 100.00	38 100.00	84 100.00	31 100.00	8 100.0	

2 = Negative impact

3 = Little or no impact 4 = Positive impact

5 = Strong positive impact



				Question	n 6a			
Sample Physician Type Behavioral								alth Provider
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N) (%)	18 13.74	13 10.92	5 41.67	8 20.51	9 10.84	3 12.00	14 14.14
2	(N) (%)	36 27.48	35 29.41	1 8.33	13 33.33	21 25.30	4 16.00	30.3
3	(N) (%)	64 48.85	58 48.74	6 50.00	14 35.90	46 55.42	15 60.00	4' 47.4'
4	(N) (%)	10 7.63	10 8.40	0 0.00	4 10.26	5 6.02	2 8.00	6.0
5	(N) (%)	3 2.29	3 2.52	0 0.00	0 0.00	2 2.41	$1 \\ 4.00$	2.0
Total	(N) (%)	131 100.00	119 100.00	12 100.00	39 100.00	83 100.00	25 100.00	9 100.0

1 = Strong negative impact 2 = Negative impact

3 = Little or no impact

4 = Positive impact

5 = Strong positive impact



Question 6b									
			Samp	le	Physiciar	п Туре	Behavioral Heal	th Provider	
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No	
1	(N)	13	10	3	5	7	1	12	
•	(%)	8.72	7.30	25.00	9.43	8.14	3.57	10.53	
2	(N)	45	42	3	19	24	6	36	
2	(%)	30.20	30.66	25.00	35.85	27.91	21.43	31.58	
2	(N)	65	60	5	19	43	15	49	
5	(%)	43.62	43.80	41.67	35.85	50.00	53.57	42.98	
4	(N)	17	17	0	7	9	5	10	
4	(%)	11.41	12.41	0.00	13.21	10.47	17.86	8.77	
-	(N)	9	8	1	3	3	1	7	
5	(%)	6.04	5.84	8.33	5.66	3.49	3.57	6.14	
m . 1	(N)	149	137	12	53	86	28	114	
Total	(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.00	

1 = Strong negative impact 2 = Negative impact

3 = Little or no impact

4 = Positive impact

5 = Strong positive impact



Hawaii Med-QUEST Provider Survey Crosstabulations											
	Question 6c										
Sample Physician Type Behavioral Health Provi											
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No			
1	(N)	7	6	1	2	4	2	5			
	(%)	4.64	9.09	1.18	4.00	4.17	11.11	3.97			
2	(N)	14	13	1	9	4	1	12			
	(%)	9.27	19.70	1.18	18.00	4.17	5.56	9.52			
3	(N)	82	42	40	24	57	13	66			
	(%)	54.30	63.64	47.06	48.00	59.38	72.22	52.38			
4	(N)	27	5	22	11	15	2	23			
	(%)	17.88	7.58	25.88	22.00	15.63	11.11	18.25			
5	(N)	21	0	21	4	16	0	20			
	(%)	13.91	0.00	24.71	8.00	16.67	0.00	15.87			
Total	(N)	151	66	85	50	96	18	126			
	(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.00			
6c. During plan?	the last 12 m	nonths, what ha	as been the impact o	f Kaiser's formulary	on your ability to	provide quality ca	re for your patients in	the health			

1 = Strong negative impact 2 = Negative impact

3 = Little or no impact

4 = Positive impact

5 = Strong positive impact



				Questio	Question 6d									
			Samp	le	Physician Type		Behavioral Health Provider							
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No						
1	(N) (%)	23 18.70	18 16.22	5 41.67	9 23.68	13 16.46	5 20.00	17 18.09						
2	(N) (%)	30 24.39	29 26.13	1 8.33	12 31.58	18 22.78	4 16.00	20 27.60						
3	(N) (%)	58 47.15	52 46.85	6 50.00	11 28.95	44 55.70	14 56.00	43 45.74						
4	(N) (%)	10 8.13	10 9.01	0 0.00	6 15.79	3 3.80	1 4.00	7.45						
5	(N) (%)	2 1.63	2 1.80	0 0.00	0 0.00	1 1.27	1 4.00	1.06						
Total	(N) (%)	123 100.00	111 100.00	12 100.00	38 100.00	79 100.00	25 100.00	94 100.00						

1 = Strong negative impact 2 = Negative impact

3 = Little or no impact

4 = Positive impact

5 = Strong positive impact



Hawaii Med-QUEST Provider Survey Crosstabulations									
				Question	n 6e				
Sample Physician Type Behavioral Health Provi									
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No	
1	(N)	22	17	5	7	14	5	16	
	(%)	21.57	18.89	41.67	28.00	19.44	20.00	21.92	
2	(N)	21	19	2	6	15	6	15	
	(%)	20.59	21.11	16.67	24.00	20.83	24.00	20.55	
3	(N)	50	45	5	8	40	12	37	
	(%)	49.02	50.00	41.67	32.00	55.56	48.00	50.68	
4	(N)	7	7	0	4	2	1	4	
	(%)	6.86	7.78	0.00	16.00	2.78	4.00	5.48	
5	(N)	2	2	0	0	1	1	1	
	(%)	1.96	2.22	0.00	0.00	1.39	4.00	1.37	
Total	(N)	102	90	12	25	72	25	73	
	(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.00	
6e. During health plan		nonths, what h	as been the impact of	of 'Ohana CCS' form	ulary on your abili	ty to provide quali	ty care for your patie	nts in the	

1 = Strong negative impact 2 = Negative impact

3 =Little or no impact

4 = Positive impact

5 = Strong positive impact



				Questio	n 6f			
Sample Physician Type Behavioral Health Pro								
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N)	24	19	5	8	15	6	17
1	(%)	19.51	17.12	41.67	21.62	18.75	26.09	18.09
2	(N)	32	31	1	12	19	6	25
2	(%)	26.02	27.93	8.33	32.43	23.75	26.09	26.60
2	(N)	57	51	6	12	42	11	4
5	(%)	46.34	45.95	50.00	32.43	52.50	47.83	46.8
4	(N)	8	8	0	5	2	0	
÷	(%)	6.50	7.21	0.00	13.51	2.50	0.00	6.3
-	(N)	2	2	0	0	2	0	
,	(%)	1.63	1.80	0.00	0.00	2.50	0.00	2.1
Total	(N)	123	111	12	37	80	23	9.
Total	(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.00

1 = Strong negative impact 2 = Negative impact

3 =Little or no impact

4 = Positive impact

5 = Strong positive impact



-			Hawaii	Med-QUES	F Provider Sulations	urvey		
				Questi	on 7a			
Sample Physician Type Behavioral Health Pr								
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N) (%)	54 51.43	47 49.47	7 70.00	23 58.97	27 45.76	6 42.86	45 53.57
2	(N) (%)	47 44.76	44 46.32	3 30.00	16 41.03	29 49.15	8 57.14	36 42.86
3	(N) (%)	4 3.81	4 4.21	0 0.00	0 0.00	3 5.08	0 0.00	3.5
Total	(N) (%)	105 100.00	95 100.00	10 100.00	39 100.00	59 100.00	14 100.00	84 100.00
7a. Does /	· /	ovide adequate	e access to <u>non-forr</u>					100.



				Crosstabu						
Question 7b										
			Samp	ble	Physiciar	п Туре	Behavioral Heal	th Provider		
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No		
1	(N) (%)	46 36.80	41 36.28	5 41.67	20 37.04	23 35.94	3 20.00	4 40.2		
2	(N) (%)	66 52.80	60 53.10	6 50.00	29 53.70	33 51.56	10 66.67	50.0		
3	(N) (%)	13 10.40	12 10.62	1 8.33	5 9.26	8 12.50	2 13.33	1 9.8		
Fotal	(N) (%)	125 100.00	113 100.00	12 100.00	54 100.00	64 100.00	15 100.00	10 100.0		



Crosstabulations											
				Questio	n 7c						
Sample Physician Type Behavioral Health Provide											
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No			
1	(N) (%)	21 15.44	19 35.85	2 2.41	8 16.00	11 13.58	3 23.08	1 14.5			
2	(N) (%)	62 45.59	33 62.26	29 34.94	24 48.00	37 45.68	9 69.23	5			
3	(N) (%)	53 38.97	1 1.89	52 62.65	18 36.00	33 40.74	1 7.69	4 41.0			
Total	(N) (%)	136 100.00	53 100.00	83 100.00	50 100.00	81 100.00	13 100.00	11 100.0			



_			Hawai	ii Med-QUES Crosstat	T Provider Su Solations	urvey		
				Quest	ion 7d			
			Sam	ple	Physicia	an Type	Behavioral He	alth Provider
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N) (%)	50 51.55	43 48.86	7 77.78	18 48.65	30 53.57	7 46.67	42 53.16
2	(N) (%)	45 46.39	43 48.86	2 22.22	19 51.35	24 42.86	8 53.33	35 44.30
3	(N) (%)	2 2.06	2 2.27	0 0.00	0 0.00	2 3.57	0 0.00	2 2.53
Total	(N) (%)	97 100.00	88 100.00	9 100.00	37 100.00	56 100.00	15 100.00	79 100.00
	()	de adequate a			ents in circumstance			100.00



Hawaii Med-QUEST Provider Survey Crosstabulations											
			Questio	on 7e							
		Samp	ble	Physicia	n Type	Behavioral Hea	th Provider				
	Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No				
(N) (%)	39 52.00	32 48.48	7 77.78	10 41.67	27 56.25	7 46.67	31 54.39				
(N) (%)	35 46.67	33 50.00	2 22.22	14 58.33	20 41.67	8 53.33	2: 43.8				
(N) (%)	1 1.33	1 1.52	0 0.00	0 0.00	1 2.08	0 0.00	1.7				
(N) (%)	75 100.00	66 100.00	9 100.00	24 100.00	48 100.00	15 100.00	57 100.00				
	(%) (N) (%) (N) (%) (N)	(N) 39 (%) 52.00 (N) 35 (%) 46.67 (N) 1 (%) 1.33 (N) 75	Total Non-Kaiser (N) 39 32 (%) 52.00 48.48 (N) 35 33 (%) 46.67 50.00 (N) 1 1 (%) 1.33 1.52 (N) 75 66	Crosstabut Questic Questic Constabut Constabut	Crosstabulations Question 7e Question 7e Physician Total Non-Kaiser Kaiser PCP (N) 39 32 7 100 (%) 52.00 48.48 77.78 41.67 (N) 35 33 2 14 (%) 46.67 50.00 22.22 58.33 (N) 1 1 0 0 (%) 1.33 1.52 0.00 0.00 (N) 75 66 9 24	Kaiser PCP Specialist (N) 39 32 7 100 27 (%) 52.00 48.48 77.78 41.67 56.25 (N) 35 33 2 14 200 (%) 46.67 50.00 22.22 58.33 41.67 (N) 1 1 0 0 1 (%) 46.67 50.00 22.22 58.33 41.67 (%) 133 1.52 0.00 0.00 2.08 (N) 75 66 9 24 48	Crosstabulations Question 7e Sample Physician Type Behavioral Heal Total Non-Kaiser Kaiser PCP Specialist Yes A (N) 39 32 7 10 27 7 6 (N) 39 32 7 10 27 7 6 (N) 35 33 2 14 20 8 8 (%) 46.67 50.00 22.22 58.33 41.67 53.33 8 (%) 46.67 50.00 22.22 58.33 41.67 53.33 8 (%) 41.67 50.00 22.22 58.33 41.67 53.33 8 6 (%) 1 1 0 0 1 0 0 0 1 0 0 0 1 0 0 0 0 0 0 0 0 0				



_	Hawaii Med-QUEST Provider Survey Crosstabulations											
				Questi	on 7f							
Sample Physician Type Behavioral Health Provide												
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No				
1	(N) (%)	46 48.42	39 45.88	7 70.00	13 36.11	31 56.36	9 64.29	35 47.30				
2	(N) (%)	45 47.37	42 49.41	3 30.00	21 58.33	22 40.00	5 35.71	36 48.65				
3	(N) (%)	4 4.21	4 4.71	0 0.00	2 5.56	2 3.64	0 0.00	4.05				
Total	(N) (%)	95 100.00	85 100.00	10 100.00	36 100.00	55 100.00	14 100.00	74 100.00				
7f. Does L	JHC CP provi	ide adequate a	access to non-formu	lary drugs for patier	nts in circumstance	es where you feel th	ney are needed?					



Hawaii Med-QUEST Provider Survey Crosstabulations Question 8a										
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No		
1	(N)	47	36	11	19	26	9	35		
	(%)	38.84	33.03	91.67	50.00	34.21	33.33	40.23		
2	(N)	54	53	1	16	36	13	39		
	(%)	44.63	48.62	8.33	42.11	47.37	48.15	44.83		
3	(N)	20	20	0	3	14	5	13		
	(%)	16.53	18.35	0.00	7.89	18.42	18.52	14.94		
Total	(N)	121	109	12	38	76	27	81		
	(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.00		
	(%)	100.00		100.00	100.00	100.00	100.00			



_			Hawai	i Med-QUEST Crosstabu		rvey			
				Questic	on 8b				
Sample Physician Type Behavioral Health Provider									
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No	
1	(N) (%)	35 25.18	28 22.05	7 58.33	13 26.53	21 25.61	7 20.59	27 27.55	
2	(N) (%)	60 43.17	57 44.88	3 25.00	23 46.94	33 40.24	11 32.35	45 45.92	
3	(N) (%)	44 31.65	42 33.07	2 16.67	13 26.53	28 34.15	16 47.06	26 26.53	
Total	(N) (%)	139 100.00	127 100.00	12 100.00	49 100.00	82 100.00	34 100.00	98 100.00	
8b. Do HN	ISA's service	coordinators	provide the help you	u need for patients ir	n circumstances wh	ere you feel they	are needed?		



_				i Med-QUEST Crosstabu					
				Questio	n 8c				
Sample Physician Type Behavioral Health Provider									
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No	
1	(N)	27	25	2	11	15	7	19	
	(%)	19.01	39.68	2.53	22.45	16.67	30.43	16.6	
2	(N)	50	29	21	16	34	12	31	
	(%)	35.21	46.03	26.58	32.65	37.78	52.17	33.3	
3	(N)	65	9	56	22	41	4	5'	
	(%)	45.77	14.29	70.89	44.90	45.56	17.39	50.0	
Total	(N)	142	63	79	49	90	23	11-	
	(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.0	



Crosstabulations											
				Questio	n 8d						
			Samp	le	Physician	Туре	Behavioral Heal	th Provider			
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No			
1	(N) (%)	58 50.88	49 47.57	9 81.82	20 52.63	36 50.00	11 39.29	4 56.1			
2	(N) (%)	43 37.72	41 39.81	2 18.18	15 39.47	28 38.89	13 46.43	2 35.3			
3	(N) (%)	13 11.40	13 12.62	0 0.00	3 7.89	8 11.11	4 14.29	8.5			
Total	(N) (%)	114 100.00	103 100.00	11 100.00	38 100.00	72 100.00	28 100.00	8 100.0			



Hawaii Med-QUEST Provider Survey Crosstabulations										
				Questio	n 8e					
Sample Physician Type Behavioral Health Provide										
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No		
1	(N) (%)	52 54.17	42 50.00	10 83.33	12 52.17	38 55.07	13 46.43	37 58.73		
2	(N) (%)	36 37.50	34 40.48	2 16.67	9 39.13	27 39.13	11 39.29	24 38.10		
3	(N) (%)	8 8.33	8 9.52	0 0.00	2 8.70	4 5.80	4 14.29	3.1		
Total	(N) (%)	96 100.00	84 100.00	12 100.00	23 100.00	69 100.00	28 100.00	63 100.00		
8e. Do 'Oh	ana CCS' se	ervice coordina	tors provide the help	you need for patier	nts in circumstance	es where you feel	they are needed?			



	Hawaii Med-QUEST Provider Survey Crosstabulations											
				Questi	on 8f							
Sample Physician Type Behavioral Health Provide												
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No				
1	(N) (%)	62 56.36	52 52.53	10 90.91	18 52.94	42 57.53	17 65.38	42 52.50				
2	(N) (%)	37 33.64	36 36.36	1 9.09	13 38.24	24 32.88	8 30.77	2 36.2				
3	(N) (%)	11 10.00	11 11.11	0 0.00	3 8.82	7 9.59	1 3.85	11.2				
Total	(N) (%)	110 100.00	99 100.00	11 100.00	34 100.00	73 100.00	26 100.00	80 100.00				
8f. Do UHC	C CP's servio	ce coordinators	provide the help yo	ou need for patients	in circumstances	where you feel they	y are needed?					



—			Hawai	i Med-QUEST Crosstabi		irvey			
				Questi	on 9				
Sample Physician Type Behavioral Health Provide									
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No	
1	(N) (%)	84 34.15	56 36.13	28 30.77	84 100.00	0 0.00	1 2.17	79 40.93	
2	(N) (%)	162 65.85	99 63.87	63 69.23	0 0.00	162 100.00	45 97.83	114 59.07	
Total	(N) (%)	246 100.00	155 100.00	91 100.00	84 100.00	162 100.00	46 100.00	193 100.00	
9. Are you	a primary ca	are provider (P	CP)?						
1 = Yes 2 = No									



_	Hawaii Med-QUEST Provider Survey Crosstabulations											
Question 10a												
Sample Physician Type Behavioral Health Provider												
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No				
1	(N) (%)	29 70.73	28 70.00	1 100.00	29 70.73	0 0.00	1 100.00	27 71.05				
2	(N) (%)	8 19.51	8 20.00	0 0.00	8 19.51	0 0.00	0 0.00	21.05				
3	(N) (%)	4 9.76	4 10.00	0 0.00	4 9.76	0 0.00	0 0.00	7.89				
Total	(N) (%)	41 100.00	40 100.00	1 100.00	41 100.00	0 0.00	1 100.00	38 100.00				
	s AlohaCare h	•	ate network of spec	cialists in terms of h	aving enough spec	ialists?						

2 = YES, somewhat adequate 3 = YES, definitely adequate



_			Hawaii	Med-QUEST Crosstabu		irvey					
Question 10b											
Sample Physician Type Behavioral Health Provider											
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No			
1	(N) (%)	16 30.19	16 30.77	0 0.00	16 30.19	0 0.00	1 100.00	14 28.00			
2	(N) (%)	18 33.96	17 32.69	1 100.00	18 33.96	0 0.00	0 0.00	1 36.0			
3	(N) (%)	19 35.85	19 36.54	0 0.00	19 35.85	0 0.00	0 0.00	11 36.0			
Total	(N) (%)	53 100.00	52 100.00	1 100.00	53 100.00	0 0.00	1 100.00	50 100.00			
	s HMSA have	•	network of specialist	ts in terms of having	g enough specialist	s?					



_			Hawaii	Med-QUEST Crosstabu		irvey						
Question 10c												
Sample Physician Type Behavioral Health Provider												
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No				
1	(N) (%)	8 17.02	7 36.84	1 3.57	8 17.02	0 0.00	1 100.00	7 15.56				
2	(N) (%)	12 25.53	7 36.84	5 17.86	12 25.53	0 0.00	0 0.00	12 26.67				
3	(N) (%)	27 57.45	5 26.32	22 78.57	27 57.45	0 0.00	0 0.00	26 57.78				
Total	(N) (%)	47 100.00	19 100.00	28 100.00	47 100.00	0 0.00	1 100.00	45 100.00				
	s Kaiser have	•	network of specialists	s in terms of having	enough specialists	\$?						

2 = YES, somewhat adequate 3 = YES, definitely adequate



_			Hawai	i Med-QUES ⁻ Crosstab		urvey		-			
Question 10d											
Sample Physician Type Behavioral Health Provider											
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No			
1	(N) (%)	25 60.98	24 60.00	1 100.00	25 60.98	0 0.00	1 100.00	23 60.53			
2	(N) (%)	13 31.71	13 32.50	0 0.00	13 31.71	0 0.00	0 0.00	13 34.21			
3	(N) (%)	3 7.32	3 7.50	0 0.00	3 7.32	0 0.00	0 0.00	2 5.26			
Total	(N) (%)	41 100.00	40 100.00	1 100.00	41 100.00	0 0.00	1 100.00	38 100.00			
	s 'Ohana have	-	network of speciali	sts in terms of havi	ng enough speciali	sts?					

2 = YES, somewhat adequate 3 = YES, definitely adequate



_			Hawaii	Med-QUEST Crosstabu		ırvey		-			
Question 10e											
Sample Physician Type Behavioral Health Provider											
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No			
1	(N) (%)	16 61.54	15 60.00	1 100.00	16 61.54	0 0.00	1 100.00	14 60.87			
2	(N) (%)	7 26.92	7 28.00	0 0.00	7 26.92	0 0.00	0 0.00	30.43			
3	(N) (%)	3 11.54	3 12.00	0 0.00	3 11.54	0 0.00	0 0.00	8.70			
Total	(N) (%)	26 100.00	25 100.00	1 100.00	26 100.00	0 0.00	1 100.00	23 100.00			
	s 'Ohana CCS		quate network of spe	ecialists in terms of	having enough spe	ecialists?		-			

2 = YES, somewhat adequate 3 = YES, definitely adequate



_			Hawaii	Med-QUEST Crosstabu		irvey					
Question 10f											
Sample Physician Type Behavioral Health Provider											
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No			
1	(N) (%)	21 56.76	20 55.56	1 100.00	21 56.76	0 0.00	1 100.00	20 57.14			
2	(N) (%)	12 32.43	12 33.33	0 0.00	12 32.43	0 0.00	0 0.00	12 34.2			
3	(N) (%)	4 10.81	4 11.11	0 0.00	4 10.81	0 0.00	0 0.00	8.5			
Total	(N) (%)	37 100.00	36 100.00	1 100.00	37 100.00	0 0.00	1 100.00	35 100.00			
	UHC CP hav	•	e network of specialis	sts in terms of havin	g enough specialis	sts?					



			Hawai	i Med-QUES Crosstab	T Provider Su Julations	urvey				
				Questi	on 11a					
Sample Physician Type Behavioral Health Provider										
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No		
1	(N) (%)	25 69.44	23 67.65	2 100.00	25 69.44	0 0.00	0 0.00	25 73.53		
2	(N) (%)	9 25.00	9 26.47	0 0.00	9 25.00	0 0.00	1 100.00	8 23.53		
3	(N) (%)	2 5.56	2 5.88	0 0.00	2 5.56	0 0.00	0 0.00	1 2.94		
Total	(N) (%)	36 100.00	34 100.00	2 100.00	36 100.00	0 0.00	1 100.00	34 100.00		
11a. Does	s AlohaCare h	nave an adequ	ate network of beha	avioral health speci	alists in terms of ha	aving enough speci	alists?	_		



_			Hawaii	Med-QUEST Crosstabu	Provider Su Alations	irvey		-		
				Questio	n 11b					
Sample Physician Type Behavioral Health Provider										
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No		
1	(N) (%)	26 52.00	23 48.94	3 100.00	26 52.00	0 0.00	0 0.00	26 54.17		
2	(N) (%)	19 38.00	19 40.43	0 0.00	19 38.00	0 0.00	1 100.00	18 37.50		
3	(N) (%)	5 10.00	5 10.64	0 0.00	5 10.00	0 0.00	0 0.00	8.33		
Total	(N) (%)	50 100.00	47 100.00	3 100.00	50 100.00	0 0.00	1 100.00	48 100.00		
11b. Does	HMSA have	an adequate	network of behaviora	I health specialists	in terms of having	enough specialists	\$?			



		Crosstab	ulations							
		Questic	on 11c							
Sample Physician Type Behavioral Health Provider										
Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No				
14 29.79	8 42.11	6 21.43	14 29.79	0 0.00	0 0.00	14 31.11				
23 48.94	11 57.89	12 42.86	23 48.94	0 0.00	1 100.00	22 48.89				
10 21.28	0 0.00	10 35.71	10 21.28	0 0.00	0 0.00	9 20.00				
47 100.00	19 100.00	28 100.00	47 100.00	0 0.00	1 100.00	45 100.00				
-	14 29.79 23 48.94 10 21.28 47 100.00	Total Non-Kaiser 14 8 29.79 42.11 23 11 48.94 57.89 10 00 21.28 0.00 47 19 100.00 100.00	Non-Kaiser Kaiser 14 8 6 29.79 42.11 21.43 23 11 12 48.94 57.89 42.86 10 0 10 21.28 0.00 35.71 47 19 28 100.00 100.00 100.00	Non-Kaiser Kaiser PCP 14 8 6 14 29.79 42.11 21.43 29.79 23 11 12 23 48.94 57.89 42.86 48.94 10 0 10 10 21.28 0.00 35.71 21.28 47 19 28 47 100.00 100.00 100.00 100.00	Sample Physician Type Total Non-Kaiser Kaiser PCP Specialist 14 8 6 14 0 29.79 42.11 21.43 29.79 0.00 23 11 12 23 0 48.94 57.89 42.86 48.94 0.00 10 0 10 0 0 21.28 0.00 35.71 21.28 0.00 47 19 28 47 0 100.00 100.00 100.00 0.00	Sample Physician Type Behavioral Here Total Non-Kaiser Kaiser PCP Specialist Yes 14 8 6 14 0				



_			Hawai	ii Med-QUES Crosstab		urvey		-			
Question 11d											
Sample Physician Type Behavioral Health Provider											
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No			
1	(N) (%)	24 64.86	22 62.86	2 100.00	24 64.86	0 0.00	0 0.00	24 68.57			
2	(N) (%)	12 32.43	12 34.29	0 0.00	12 32.43	0 0.00	1 100.00	11 31.43			
3	(N) (%)	1 2.70	1 2.86	0 0.00	1 2.70	0 0.00	0 0.00	0.00			
Total	(N) (%)	37 100.00	35 100.00	2 100.00	37 100.00	0 0.00	1 100.00	35 100.00			
	6 'Ohana have		network of behavio	oral health specialis	ts in terms of havin	g enough specialist	s?				



			Hawai	i Med-QUES Crosstab	T Provider Soulations	urvey					
Question 11e											
Sample Physician Type Behavioral Health Provider											
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No			
1	(N) (%)	14 60.87	12 57.14	2 100.00	14 60.87	0 0.00	0 0.00	14 66.67			
2	(N) (%)	8 34.78	8 38.10	0 0.00	8 34.78	0 0.00	1 100.00	33.33			
3	(N) (%)	1 4.35	1 4.76	0 0.00	1 4.35	0 0.00	0 0.00	0.00			
Total	(N) (%)	23 100.00	21 100.00	2 100.00	23 100.00	0 0.00	1 100.00	21 100.00			
	s 'Ohana CCS		quate network of be	havioral health spe	ecialists in terms of	having enough spe	ecialists?				



			Hawai	i Med-QUEST Crosstab	Provider Su ulations	rvey				
				Questic	on 11f					
Sample Physician Type Behavioral Health Provider										
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No		
1	(N) (%)	19 59.38	17 56.67	2 100.00	19 59.38	0 0.00	0 0.00	19 63.33		
2	(N) (%)	12 37.50	12 40.00	0 0.00	12 37.50	0 0.00	1 100.00	11 36.67		
3	(N) (%)	1 3.13	1 3.33	0 0.00	1 3.13	0 0.00	0 0.00	0.00		
Total	(N) (%)	32 100.00	30 100.00	2 100.00	32 100.00	0 0.00	1 100.00	30 100.00		
11f. Does	UHC CP hav	e an adequate	e network of behavi	oral health specialis	ts in terms of having	g enough specialis	sts?			



				ີ Provider Sເ ulations	ii vey					
			Questio	on 12a						
Sample Physician Type Behavioral Health Provider										
	Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No			
(N) (%)	69 65.09	61 64.21	8 72.73	27 72.97	38 59.38	23 65.71	43 65.15			
(N) (%)	29 27.36	27 28.42	2 18.18	9 24.32	19 29.69	8 22.86	20 30.30			
(N) (%)	8 7.55	7 7.37	1 9.09	1 2.70	7 10.94	4 11.43	4.55			
(N) (%)	106 100.00	95 100.00	11 100.00	37 100.00	64 100.00	35 100.00	66 100.00			
	(%) (N) (%) (N) (%) (N) (%)	(N) 69 (%) 65.09 (N) 29 (%) 27.36 (N) 8 (%) 7.55 (N) 106 (%) 100.00	Total Non-Kaiser (N) 69 61 (%) 65.09 64.21 (N) 29 27 (%) 27.36 28.42 (N) 8 7 (%) 7.55 7.37 (N) 106 95 (%) 100.00 100.00	Question Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2">Colspan="2"Colspan="""Colsp	Total Non-Kaiser Kaiser PCP (N) 69 61 8 27 (%) 65.09 64.21 72.73 72.97 (N) 29 27 2 9 (%) 27.36 28.42 18.18 24.32 (N) 8 7 1 1 (%) 7.55 7.37 9.09 2.70 (N) 106 95 11 37 (%) 100.00 100.00 100.00 100.00	Question 12a Physician Type Total Non-Kaiser Kaiser PCP Specialist (N) 69 661 8 27 38 (%) 65.09 64.21 72.73 72.97 59.38 (N) 29 27 2 9 19 (%) 27.36 28.42 18.18 24.32 29.69 (N) 8 7 1 1 7 (%) 7.55 7.37 9.09 2.70 10.94 (N) 106 95 11 37 64 (%) 100.00 100.00 100.00 100.00	Question 12a Physician Type Behavioral Heteen Internation Internatio Internatint Internation Internation Internation Internation Inter			



_			Hawa	ii Med-QUES Crosstat	T Provider Su Sulations	urvey		
				Questi	on 12b			
Sample Physician Type Behavioral Health Provide								
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N) (%)	53 42.40	46 41.07	7 53.85	26 50.98	24 35.29	12 30.77	39 48.15
2	(N) (%)	53 42.40	48 42.86	5 38.46	23 45.10	27 39.71	14 35.90	3 45.6
3	(N) (%)	19 15.20	18 16.07	1 7.69	2 3.92	17 25.00	13 33.33	6.17
Total	(N) (%)	125 100.00	112 100.00	13 100.00	51 100.00	68 100.00	39 100.00	8 100.0
	(%)	100.00	100.00	100.00	• -	100.00	100.00	



_			Hawai	i Med-QUES Crosstab		urvey		
				Questic	on 12c			
Sample Physician Type Behavioral Health Provide								
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N)	42	31	11	17	23	15	2'
	(%)	29.17	55.36	12.50	34.69	25.27	57.69	23.8
2	(N)	61	22	39	21	38	9	59
	(%)	42.36	39.29	44.32	42.86	41.76	34.62	44.2
3	(N)	41	3	38	11	30	2	3
	(%)	28.47	5.36	43.18	22.45	32.97	7.69	31.8
Total	(N)	144	56	88	49	91	26	11
	(%)	100.00	100.00	100.00	100.00	100.00	100.00	100.0



Hawaii Med-QUEST Provider Survey Crosstabulations										
				Questio	n 12d					
Sample Physician Type Behavioral Health Pr							alth Provider			
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No		
1	(N) (%)	68 67.33	60 65.93	8 80.00	26 70.27	40 65.57	24 70.59	43 67.19		
2	(N) (%)	29 28.71	28 30.77	1 10.00	11 29.73	17 27.87	8 23.53	20 31.25		
3	(N) (%)	4 3.96	3 3.30	1 10.00	0 0.00	4 6.56	2 5.88	1.50		
Total	(N) (%)	101 100.00	91 100.00	10 100.00	37 100.00	61 100.00	34 100.00	64 100.00		
12d. Does	s 'Ohana hav	e adequate lice	ensed behavioral he	alth providers (i.e., p	osychiatrists or psyc	chologists) to care	e for your patients?			



_			Hawai	ii Med-QUES Crosstab	T Provider Soulations	urvey					
Question 12e											
			Sam	ple	Physicia	an Type	Behavioral He	ealth Provider			
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No			
1	(N) (%)	56 65.88	48 64.00	8 80.00	15 68.18	39 65.00	23 69.70	32 64.00			
2	(N) (%)	25 29.41	24 32.00	1 10.00	7 31.82	17 28.33	8 24.24	17 34.00			
3	(N) (%)	4 4.71	3 4.00	1 10.00	0 0.00	4 6.67	2 6.06	1 2.00			
Total	(N) (%)	85 100.00	75 100.00	10 100.00	22 100.00	60 100.00	33 100.00	50 100.00			
	(%) s 'Ohana CCS	100.00 S have adequa		100.00	100.00	100.00	100.00				



		Hawaii			urvey		
			Questio	on 12f			
		Samp	ble	Physicia	in Type	Behavioral He	alth Provider
	Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
(N) (%)	60 63.16	52 61.90	8 72.73	19 61.29	39 62.90	22 68.75	37 60.66
(N) (%)	31 32.63	29 34.52	2 18.18	12 38.71	19 30.65	8 25.00	23 37.70
(N) (%)	4 4.21	3 3.57	1 9.09	0 0.00	4 6.45	2 6.25	1 1.64
(N) (%)	95 100.00	84 100.00	11 100.00	31 100.00	62 100.00	32 100.00	61 100.00
-	(%) (N) (%) (N) (%) (N)	(N) 60 (%) 63.16 (N) 31 (%) 32.63 (N) 4 (%) 4.21 (N) 95	Total Non-Kaiser (N) 60 52 (%) 63.16 61.90 (N) 31 29 (%) 32.63 34.52 (N) 4 3 (%) 4.21 3.57 (N) 95 84	Crosstabut Questic Questic Total Non-Kaiser Kaiser (N) 60 52 8 (%) 63.16 61.90 72.73 (N) 31 29 2 (%) 32.63 34.52 18.18 (N) 4 3 1 (%) 4.21 3.57 9.09 (N) 95 84 11	Total Non-Kaiser Kaiser PCP (N) 60 52 78 19 (%) 63.16 61.90 72.73 61.29 (N) 31 29 2 12 (%) 32.63 34.52 18.18 38.71 (N) 4 3 1 00 (%) 4.21 3.57 9.09 0.00 (N) 95 84 11 31	Question 12f Physician Type Total Non-Kaiser Kaiser PCP Specialist (N) 60 52 8 19 39 (%) 63.16 61.90 72.73 61.29 62.90 (N) 31 29 2 12 19 (%) 32.63 34.52 18.18 38.71 30.65 (N) 4 3 1 0 4 (%) 4.21 3.57 9.09 0.00 64.55 (N) 95 84 11 31 62	Crosstabulations Cuestion 12f Sample Physician Type Behavioral He Non-Kaiser Kaiser PCP Specialist Yes (N) 60 52 8 19 39 22 (%) 63.16 61.90 72.73 61.29 62.90 68.75 (N) 31 29 2 12 19 8 (%) 32.63 34.52 18.18 38.71 30.65 25.00 (%) 4.21 3.57 9.09 0.00 6.45 6.25 (N) 95 84 11 31 62 32



_			Hawaii	Med-QUEST Crosstabu		rvey		
				Questio	n 13			
Sample Physician Type Behavioral Health Prov								alth Provider
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No
1	(N) (%)	48 19.43	44 27.85	4 4.49	1 1.25	45 28.30	48 100.00	0 0.00
2	(N) (%)	199 80.57	114 72.15	85 95.51	79 98.75	114 71.70	0 0.00	199 100.00
Total	(N) (%)	247 100.00	158 100.00	89 100.00	80 100.00	159 100.00	48 100.00	199 100.00
13. Are yo 1 = Yes 2 = No	u a behaviora	al health provid	ler?					

It is important to note that the TOTAL column includes providers that may be missing survey response information; therefore, the TOTAL column may not add up to the totals of the category columns. Also note, percentages may not total 100.00% due to rounding.

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Hawaii Med-QUEST Provider Survey Crosstabulations											
Question 14											
Sample Physician Type Behavioral Health Provider											
Survey Response		Total	Non-Kaiser	Kaiser	РСР	Specialist	Yes	No			
1	(N) (%)	35 77.78	32 78.05	3 75.00	1 100.00	32 76.19	35 77.78	0 0.00			
2	(N) (%)	10 22.22	9 21.95	1 25.00	0 0.00	10 23.81	10 22.22	0 0.00			
Total	(N) (%)	45 100.00	41 100.00	4 100.00	1 100.00	42 100.00	45 100.00	0 0.00			
14. DHS c	offers several	behavioral he	alth services throug	h its CCS program.	These services in	clude case manage	ement, psychosocia	I rehabilitation,			

specialized residential treatment, and Clubhouse. Are these the right behavioral health services for your patients?

1 = Yes

2 = No



Appendix A. Provider Comments

Provider Comments

At the end of the survey, providers were encouraged to write additional comments about their experiences. These comments are categorized below.

Reimbursement

- 'Ohana and UHC CP reimbursement is insultingly low over 10 percent less than HMSA for exam and over 80 percent less for procedures.
- UHC CP is not paying per Medicaid guidelines or rates and is horrible to work with.
- Need greater reimbursements especially on eyeglasses frames and lenses.
- UHC CP has not given adequate assistance in resolving issues. We have unresolved claim issues from 2012.
- HMSA is still the best plan; yet, it is increasingly expensive. 'Ohana is the best Medicaid program (reimbursement provider support). AlohaCare struggles at best.
- Regarding 'Ohana and UHC CP QExA, our office constantly chases our claims to be paid by 'Ohana and UHC CP QExA. We have unpaid claims over 2 years; they have no system in progress to address this. Maybe because we are a contracted provider. All visits need authorization for payment. In good faith, we see 'Ohana and UHC CP patients; in good faith, we should receive timely payments. They both existed in 2009 and we still have problems with authorization and payments. Why haven't they followed other Medicaid programs protocol?
- Will soon stop accepting QUEST patients due to poor reimbursement.
- That is counterproductive. It is now May 23, 2015. My patient with Medicare primary switched from 'Ohana to HMSA for their Medicaid provider, and to this date the problem of having the crossover of the claim happen is still extant. Medicare still has 'Ohana as secondary and HMSA has not contacted them to rectify this despite my requests to HMSA!
- UHC CP doesn't pay per Medicaid guidelines and is horrible insurance to work with.
- UHC CP has low payment rates.
- 1) Humana worst insurance ever. 2) All pre-authorization paperwork for anything under \$300.00 should be banned.
- There seems to be a significant variation in QUEST/Medicaid payments, time of processing, and administrative support. Lots of patients don't get care.
- Pure Medicare reimburses \$307.00. Below the loss of delivering the care.
- Poor reimbursement #1 problem.
- I don't handle billing and reimbursements, as I work at Kaiser.
- Wallet hub.com doctors in Hawaii #51 out of 50 (lowest paying) #4 in lowest 5 of doctors in USA.



Prior Authorizations/Referrals

- We are bogged down with too many prior authorizations from medications to surgeries that are necessary.
- If you only know what a colossal waste of time the prior authorizations are you'd do something about it. Getting through on the phone not 24 hours/day but during my patients hours is very frustrating!
- Fee schedule should be raised, since documentations referrals and prior approval/authorizations are required. Frequent denials for inpatient services.
- Overall, I'm satisfied. Unlike HMSA, etc. who were messing with over-limiting visits and preauthorizations.
- We were happy that HMSA does not require referral from PCP anymore. We hope AlohaCare would do that too especially for OB global care.
- PCP referral process makes care difficult when most PCPs don't take new QUEST patients. Patients themselves because of QUEST status make and no-show on appointments by far more than PPO patients.
- The paperwork involved for the new Hepatitis C treatment is time consuming along with the phone calls to the different insurance companies.

Specialists/Behavioral Health

- Need better inpatient substance abuse programs.
- Big island Hamakua and Kohala areas are bereft of adequate pediatric primary care (it's just me) and any pediatric specialty care; it is like practicing in a medical desert.
- Access to specialists is nearly a big problem for our population.
- I am not practicing currently; there is a huge shortage of primary care providers, specialists, and behavioral health providers on Hawaii island.
- Absolute inability to get severely addicted or medically compromised patients with alcohol dependence into hospital for detoxification. This amounts to documentation on basis of diagnosis.
- For behavioral health 'Ohana is very difficult to work with, contact, get paid for psych evaluation, etc.
- Needs to have mental health providers and mental health provider to provide feedback to PCP.
- There is a severe shortage of psychiatrists in the central Oahu and north shore area of Oahu. Many of my clients must try to use their PCP for psychiatric medications because no psychiatrist will accept new patients or accept their insurance plan (especially QUEST/CCS).
- Client appreciates the CCS program support.
- As a specialist, we continue to have difficulty with referrals to physical therapists or higher level imaging in a timely manner.
- Difficulty finding psychiatrists for Med-QUEST patients.
- The CCS programs pretend they have access to psychiatry. They do not [have access to] psychiatry no ability to get appointments, terrible follow up scheduling, consistent inability



of most CM's to even talk to patients, very poor actual contact. No coordination with primary care.

- Hawaii as a whole needs better behavioral health coverage/care especially in the area of developmental problems.
- Level of care meets the needs of patients who are in CCS.
- CCS has the right services, but I cannot seem to get my patients approved to obtain those services, or when approved have those services provided to my patients in a timely or even adequate manner.

Formulary

- Too many different companies now involved too many formulary changes. This is all costly! Need more common sense approach.
- Cancer patients should have unrestricted availability of narcotic pharmaceutical drugs regardless of the type and category of patient's medical insurance. Also includes availability of all types of formulary narcotic pharmaceutical drugs.
- I have never had a prior authorization denied; therefore, it is a more a nuisance that I need to regulate/control prescription.

Service Coordinators/Care Coordination

- Service coordinators need to be more knowledgeable. I've spent 4 hours with UHC CP trying to determine coverage for a QExA/Medicare patient. Claims aren't paid; copays are incorrect and a complete disaster. Personnel do not direct one to the right person.
- Hire more provider representatives available so providers don't have to go through the recorded messages that don't include connecting them directly to a live provider service coordinator.
- Coordination of effort and continuum of care leading to problems with over extension and case management seriously misdirected.
- Getting care management (the process) is a burdensome task.
- Very difficult; we have an established patient and good rapport and they need case management or other supports, but have to lose their psychiatrists or therapist in order to get that. Should not have to choose; very disruptive to patient care and continuity, and these are some of our sickest patients.

Miscellaneous

- How are they accessed by the family?
- I don't handle billing and reimbursements, as I work at Kaiser.
- Very little information with this kind of problem.
- Other than HMSA I cannot keep track of which plan offers what and requires what, very bothersome and time consuming.



- The problem lies in the policing (checking fraudulent usage) of the benefits provided through free insurance. Too many people abuse the system. You need to have forensic measures to fix the problem.
- Missed appointments means inefficiency and inability to see other QUEST patients. Plan must consider a \$5.00 co-pay or penalty to decrease missed appointments.
- UHC CP absolutely horrible not only CP but also for military
- I am an inpatient NICU physician. I do not see patients in the outpatient setting. Most of this survey is not relevant to my work as a physician.
- Question 13 should be asked before question 13, especially if we don't deal with behavioral health. Question 8 should be more specific as to claims department customer service provider services. 'Ohana insurance is the worst in provider services par only with AlohaCare and HMSA.
- There needs to be oversight of these plans or someone to complain to when a health plan is not conducting business in a fair to reasonable manner. 'Ohana has been very, very bad for lab and pathology services.
- HMSA, Kaiser, and QUEST have been very easy to work with, allowing me to focus on caring for the patients.
- Additional help with housing would be helpful.
- I think Kaiser gives the best care possible for QUEST members.
- High percentage going to effort for non-urgent problems; QUEST patients account for more than 70 percent of my "no shows." Patients should be more accountable.
- As a Kaiser doctor I don't really deal with the other health plans, so I can't really say everyone is having a shortage.
- Cannot answer most questions because [I am] a Kaiser provider and do not see anyone from other plans, and if I do someone else does the paperwork.
- Services are not known to providers and patients.
- As a Kaiser provider I only have exposure to Kaiser-QUEST plans.
- I feel great working with Kaiser.