2ESA Provider Survey

Nancy K. Raiha, MSW, Ph.D. Monica A. Stanley Barbara A. Whitbeck, MSW



Who responded?

271 individuals and agencies who provide services to clients of DSHS Economic Services Administration (ESA) responded to the 2008 ESA Provider Survey.

What did it ask?

This postcard-style survey asked each respondent to rate the courtesy and respect of ESA employees, and to report what ESA does well and what ESA can do better.

How is the report organized?

This survey was mailed to two different groups of ESA providers. Because the survey responses of the two groups differ, this report is organized into two different chapters.

Paid through SSPS

 These providers—primarily medical or psychiatric evaluators—submit vouchers for services provided to DSHS clients, and are paid through the SSPS payment system. Their responses are discussed on pages A-1 to A-9.

Paid through A-19 invoices

 These contractors have active service contracts in the DSHS Agency Contracts Database. They submit A-19 invoices for a wide range of different services provided to DSHS clients, and are paid on the basis of these invoices. Their responses can be found on pages B-1 to B-9.



Washington State Department of Social and Health Services Research and Data Analysis Division December 2008 • 11.108.

Quick Summary

Key Topics Addressed by Providers

Provider comments - both positive and negative – most frequently addressed the following:

Access

• Quick responses to calls and emails; short phone wait times. More staff to provide better access.

Collaborative Relationships

• Courteous, knowledgeable ESA staff working together with providers, making appropriate referrals, and sharing information.

Pay

• Fast and accurate payment. Higher rates of pay.

Smooth Processes

• Simple, clear forms and procedures. A number of very specific suggestions were offered for improving procedures and forms.

2008 of providers paid through SSPS



Who responded?

132 individuals and agencies who are paid through the SPSS payment system to provide services to clients of DSHS Economic Services Administration (ESA) responded to the SSPS portion of the 2008 ESA Provider Survey.



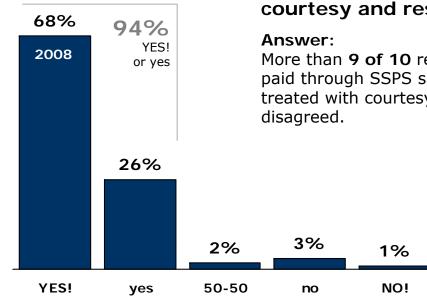
How was it sent?

1600 surveys were enclosed in all Social Service Payment System (SSPS) mailings to ESA providers in February 2008. The response rate was greater than 8%. (The exact response rate cannot be calculated because we do not know the exact number of providers who received surveys; the SSPS mail system could not specify the number of mailings to the same provider. Some providers received more than one mailing from SSPS during the survey time frame, and thus received more than one copy of the survey.)



Washington State Department of Social and Health Services Research and Data Analysis Division December 2008 • 11.108.I

Courtesy and Respect



Do DSHS staff treat you with courtesy and respect?

More than **9 of 10** responding ESA providers paid through SSPS said that they were treated with courtesy and respect. 4% disagreed.

As shown in the tables at right, in most ESA provider groups, more than **9 of 10 providers** answered "YES!" or "yes", indicating they were treated with courtesy and respect.

Differences by Type of Provider

Service Provided by Respondent	# Responding	% Yes*
Medical Evaluation	53 (40%)	91%
Psychiatric Evaluation	52 (39%)	98%
Transportation	1 (1%)	100%
Other	16 (12%)	86%
More Than One Service	7 (5%)	100%
Service Not Specified	3 (2%)	100%

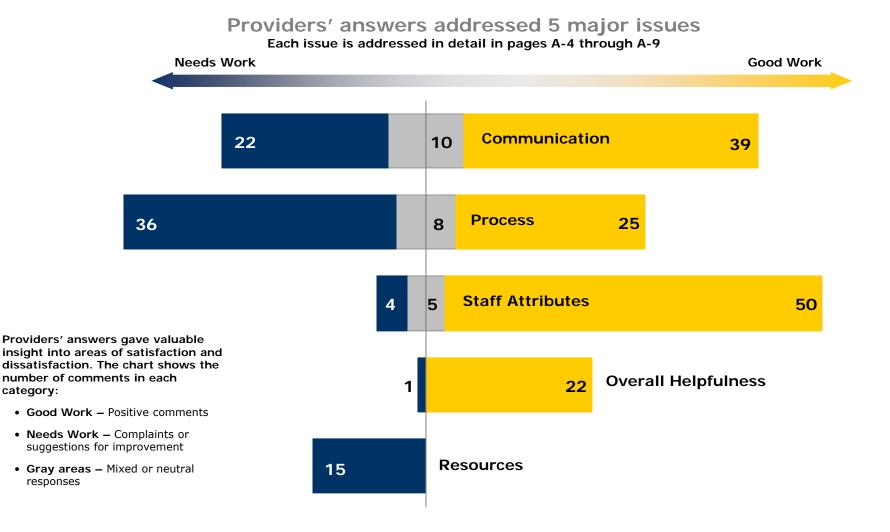
*Answer to "Does ADSA staff treat you with courtesy and respect?" Two respondents did not answer this question (both "Other").

Providers Speak Out

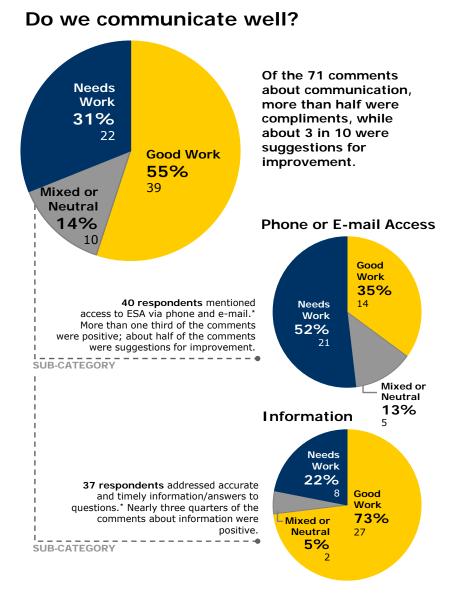
Two open-ended questions were asked:

What does DSHS do well?

What could DSHS do better?



Communication



* One cannot total the two subcategories to calculate the total number of providers commenting on communication. Providers frequently commented on both subcategories. Also, some of the comments about communication did not fall within either subcategory.

Nearly 3 of 5 providers who made comments addressed communication.



COMMUNICATION MENTIONED

Areas to Improve:

- Shorter wait times on phone
- Quicker responses to questions
- Better listening skills
- More complete, clear, knowledgeable explanations

Providers Appreciate Workers Who:

- Return calls and e-mails quickly
- Listen well
- Answer questions knowledgably
- Supply timely and useful information

Providers say...

"Good communication. Always provides needed historical documentation on referred cases."

"Phone system is terrible! On hold, and phone disconnects every once in a while. Average hold time? 25 minutes!"

"Very helpful when I call for information/assistance."

"Less wait time to speak to LIVE customer services."

"Listen, and try to understand what I am trying to say."

"Listens well, and also educates us when asked."

"Sometimes I end up talking to 2-3 people before I get an answer to my question."

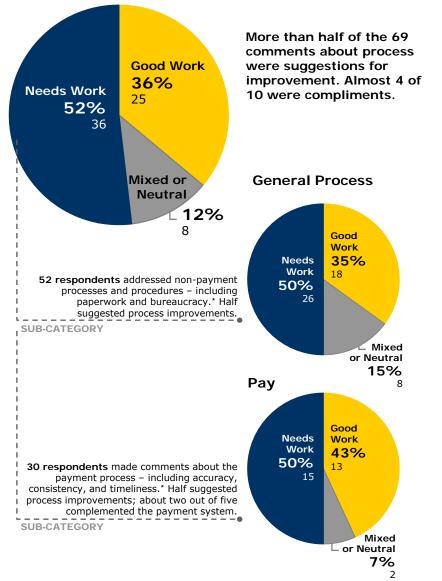
"Polite social workers – they are responsive to our phone calls and messages."

"Sometimes the information given isn't correct, and we have to call back."

"Cheerfully try to answer questions or try to direct us to someone who can help us."

Process

Can we improve our processes?



* Providers frequently commented on both subcategories of process. Thus, one cannot total the subcategories to calculate the total number of providers commenting on process.

Nearly 3 of 5 providers who made comments addressed processes and procedures.



PROCESS WAS MENTIONED

Areas to Improve:

- More timely payments
- Fewer errors in payments
- Clearer information in written instructions
- More electronic transmittal of forms and information
- Specific suggestions See next page for more detailed suggestions for process improvement

Providers Appreciate:

- Prompt, consistent and accurate payments
- Appropriate referrals
- Quick resolution of issues
- Working collaboratively with ESA staff

Providers say...

"Billing has often been SLOW and required repeated requests. Payment that accompanied this survey was for a patient I'd never seen and meanwhile, I haven't received payment for a different patient."

"The workers are very prompt in processing medical applications, very attentive to issues when they happen, to get them resolved quickly."

"Simplify processes - standardize - often get multiple answers to same question."

"They are helpful in setting up appointment times with patients."

"Reduce administrative burden. Look at Molina - they do it right! DSHS is broken beyond repair."

"They pay their claims in a timely manner."

"Staff answers are not complete – they leave out important information and I have to re-do everything – not worth it."

"Referrals have been screened, evaluation materials are clear, payment is quick."

Providers suggest...

"A better breakdown of charges being paid: state billed charge then DOS, then payment allowed. It's very hard to know what charges are being paid when patient has a number of them."

"Put account numbers on all correspondence and checks issued."

"Not having to change password so often."

"Fax us a patient's monthly coupon if the patient did not bring it in. Some [ESA staff] will offer and others say they don't have time."

"Process Alien Program patients when billed the first time instead of denying and having us rebill."

"Install a provider line to incapacity workers, or add worker e-mail address to authorization letter."

"Automate the forms we complete so that we could use our PCs to complete evaluations."

"Suggestion only: Once a year the DSHS staff (all or representatives) meet with evaluators (me), etc. We did so in past." "Provide names of clients on electronic deposit notices (e-mail)."

"Allow me to use DSHS computers only to print my reports on-site - this would provide caseworkers with their clients' evaluation reports 2-4 days sooner than by mail."

"Make the authorization (medication, etc.) easier to use and figure out - which forms, where do we get them, etc."

"Have capacity to receive referrals and submit documentation by email."

"The Remittance Advice could be easier to read and interpret."

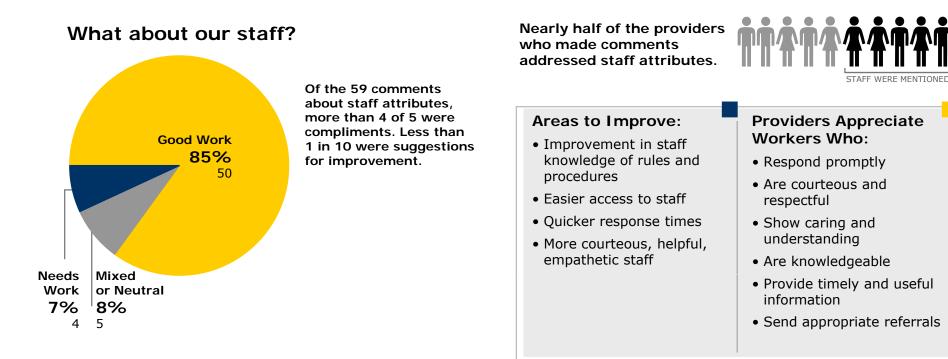
"An option on voicemail to talk to a person."

"Put our patient account numbers on vouchers (other insurance companies do this routinely)."

"Pay a claim completely and not require records for just one of the procedure codes."

"Stop duplication of paperwork."

Staff Attributes



Providers say...

"Excellent staff, well-informed, prompt and courteous, very respectful of clients, bend over backward to help me (provider) and them (clients)."

"Shorter wait time to customer service, and more politeness."

"Sometimes I have to tell the customer service folks their own rules! Especially when it comes to DD clients and well patient exams."

"We love that we can just call and get a problem fixed immediately, instead of having to submit a ton of paperwork and waiting weeks."

"They are very knowledgeable of DSHS rules and payment procedures, and can always help me to submit claims correctly."

"Often rude, discourteous, treated like DSHS is doing me a favor for providing cut-rate services, usually unpaid, for DSHS clients."

"We enjoy a wonderful working relationship with all DSHS staff."

"There is an unevenness in quality of DSHS staff, with certain individuals seemingly far less competent and empathetic with clients than others."

"A better understanding of billing rules would be great."

"Communications are quick and efficient. Always courteous, even overly respectful."

"You have some wonderful people on staff - helpful and friendly."

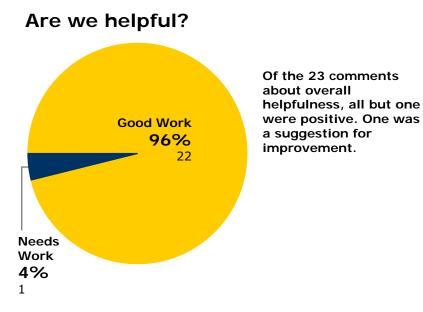
"When I come in to drop off psych evals, the girl at the desk needs to try to be helpful."

"Have help that will be more willing to help with our office staff and questions."

"Extremely courteous, helpful, flexible, and funny!"

"They are kind, considerate, and respectful of me, my staff, and our time."

Overall Helpfulness



About 1 in 5 providers who made comments addressed the overall helpfulness of ESA services.

Areas to Improve:

There was only one response in this category. When asked what DSHS does well, the provider responded "Nothing", indicating <u>dissatisfaction</u> with ESA services and a need for increased helpfulness.

Providers Appreciate:

MENTIONED HELPFULNESS

- A smooth-running process for doing business
- A collaborative relationship between ESA staff and providers

When asked what DSHS could do to be more helpful, a number of providers responded "Nothing", indicating <u>satisfaction</u> with ESA services and no need for improvement.

Providers say...

"Local GAU office is great."

"DSO/DSHS is a pleasure to work with."

"EDI Department is most helpful."

"We only receive 2 or 3 calls a year from any DSHS employee. We have never had any problems."

"They [DSHS] are doing well, don't feel any improvement is necessary."

"I am satisfied."

"Actually, I'm quite pleased."

"At both Capitol Hill and Rainier CSOs...Prompt payment, excellent professional collaboration."

- "All staff are courteous and great to work with."
- "The process works pretty good."
- "They are already great to work with."

"Just keep up the good stuff."

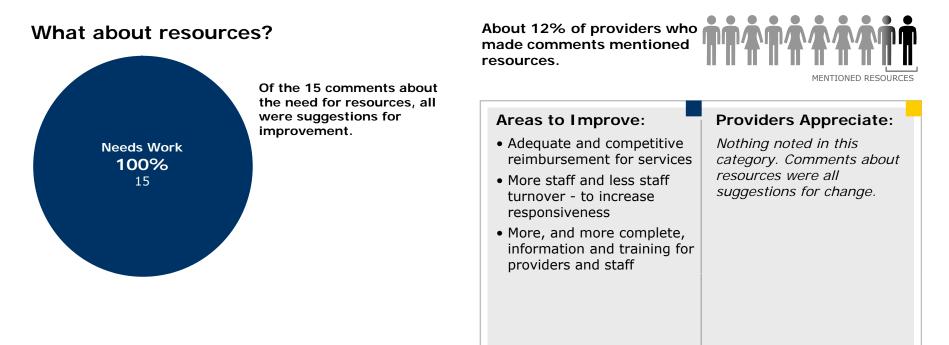
"Satisfied with [work] flow."

"They try to work with me and my busy schedule so clients will be getting the required paperwork in...Please forward my compliments to ALL Snohomish County case managers!"

"You do OK – no complaints."

"Keep up the great work!"

Resources



Providers say...

"Clearly, the staff are burdened by excessive caseloads."

- "We no longer take new DSHS patients due to poor reimbursement increase that."
- "Reimbursement of \$130 is no longer consistent with market value of \$150."
- "Dump most of [the rules], and then maybe we will get paid our measly payments faster."
- "Help me know the website better for claims and checking for coverage."
- "Pay competitive fees for services."

- "Medicaid reimbursement is very low and disqualifies many."
- "Get more phone reps so your hold time is shorter. Usually only 15-30 minute wait. But I have held for up to 3 hours."
- "Pay better on medical exams."
- "Psychological fee schedule for psychological testing needs to be updated."
- "Pay me more for my work 🙂."
- *"Continue to train staff. Some reps really stand out and know how to get 'deeper' answers, which reflects their training and expertise. Offer training for providers."*

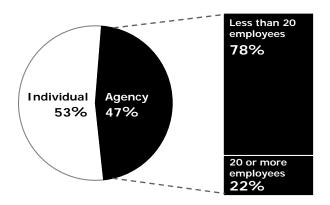
Who completed the survey?

The typical respondent is:

- A medical or psychiatric evaluation provider
- An individual, or a small agency
- Located in Western Washington

PROVIDER TYPE. The largest group of providers (40%) conduct medical evaluations. The second largest group of providers (39%) conduct psychiatric evaluations. The table at the bottom of page A-2 includes a complete list of provider services.

The largest number of respondents (53%) were individual providers. Agencies comprised 47% of the returned surveys (60). Of those, 78% were small organizations with less than 20 employees and 22% were agencies with 20 or more employees.



LOCATION. About 42% of completed surveys were returned by providers who delivered services in just 5 Washington counties: **Pierce** (13 respondents), **Spokane** (12), **King** (10), **Snohomish** (10), and **Whatcom** (9). Most of the remainder served ESA clients in smaller counties or in more than one county.

67% of the responding providers (89) work in Western Washington. 33% (43) work in Eastern Washington.

Pierce	10%	
Spokane	9%	
King	8%	
Snohomish	8%	
Whatcom	7%	
Other	58%	More than 2 of 5 respondents reporte working in one of five countie

2005 Survey of providers paid through A-19 invoices



Who responded?

139 individuals and agencies who are paid through A-19 invoices to provide services to clients of DSHS Economic Services Administration (ESA) responded to this portion of the 2008 ESA Provider Survey.

How was it sent?

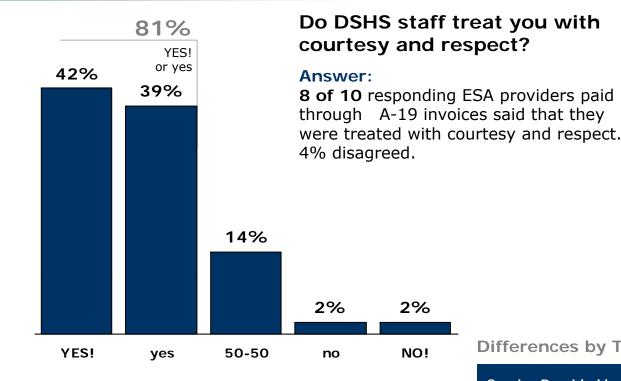


215 surveys were mailed to ESA providers in May and early June 2008. These providers have active contracts in the DSHS Agency Contracts Database, and are paid through A-19 invoices. The response rate was nearly 65%, due in part to two sets of reminders to complete the survey which were sent out one week and three weeks after the original mailing.



Washington State Department of Social and Health Services Research and Data Analysis Division December 2008 • 11.108.I

Courtesy and Respect



As shown in the tables at right, in provider groups with more than ten respondents, about 8 of 10 providers answered "YES!" or "yes", indicating they were treated with courtesy and respect.

Differences by Type of Provider

Service Provided by Respondent	# Responding	% Yes*
WorkFirst Services	19 (14%)	84%
Protective Payee	17 (12%)	88%
Guardian ad Litem	7 (5%)	71%
Legal Services	3 (2%)	100%
Refugee Services	3 (2%)	100%
Child Support Services	1 (1%)	100%
Child Care Services	1 (1%)	100%
Food Stamp Services	1 (1%)	0%
Other	23 (17%)	83%
More Than One Service	63 (45%)	76%

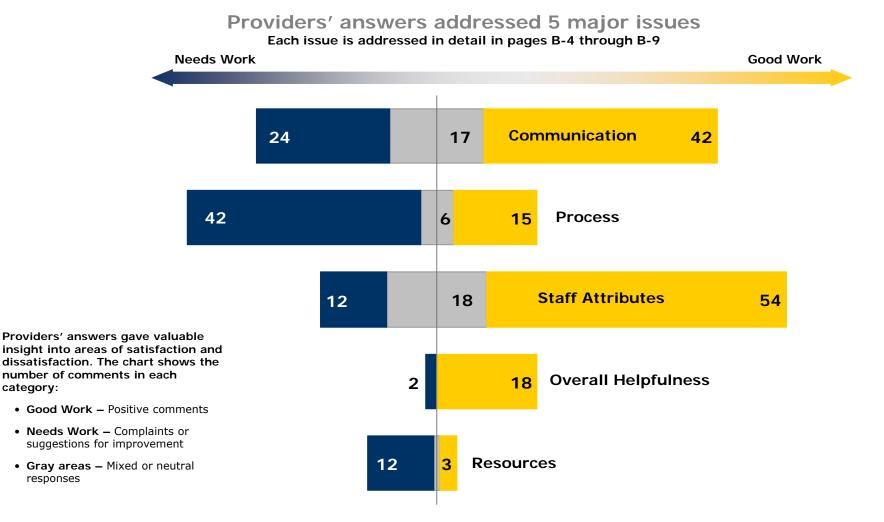
* Answer to "Does ADSA staff treat you with courtesy and respect?" One respondent did not answer this question (a Guardian ad Litem).

Providers Speak Out

Two open-ended questions were asked:

What does DSHS do well?

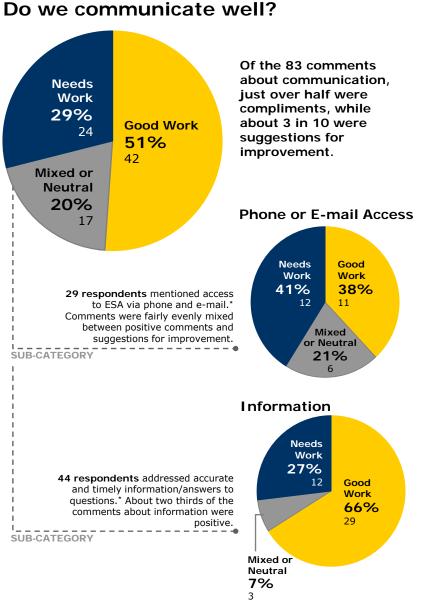
What could DSHS do better?



2008 ESA Provider Survey (A-19)

category:

Communication



* One cannot total the two subcategories to calculate the total number of providers commenting on communication. Providers frequently commented on both subcategories. Also, some of the comments about communication did not fall within either subcategory. About 3 of 5 providers who made comments addressed communication.



Areas to Improve:

- Quicker response to calls and questions
- Better listening skills
- More timely dissemination of needed information and notification of changes
- Greater use of web-based communications

Providers Appreciate Workers Who:

- Return calls and e-mails quickly
- Listen well, and patiently
- Answer questions knowledgably
- Clarify confusing issues
- Supply timely and useful information

Providers say...

"Supervisors are great at returning calls and trying to get issues resolved."

"Listen more carefully to our concerns and recognize us as equal stakeholders. Respond to suggestions and e-mails."

"I request a significant number of records from DSHS... VAST improvement in turnaround time and information in the past 6 months."

"Use web-based reporting forms. Use consistent language in describing rules and procedures."

"Advance notice for telephone number changes, as well as e-mail changes."

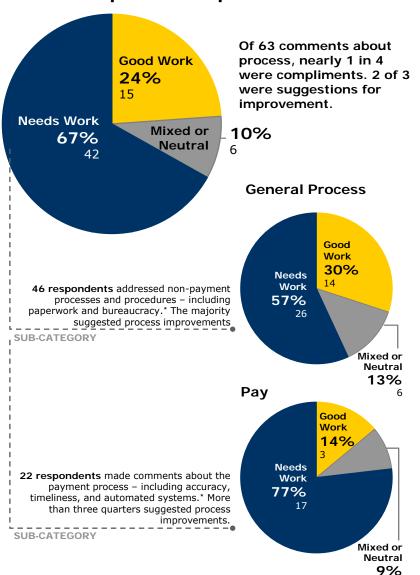
"Our agency and staff are new at providing contracted services to DSHS clients. We have a lot of questions and appreciate DSHS staff's patience."

"Answer all my questions. Help me understand when I don't."

"Communication is very good. DSHS staff help willingly when there is confusion."

"Return calls in a timely manner... Appointment letters VERY OFTEN arrive late. Almost no Hispanic translator at interviews."

Process



Can we improve our processes?

* Providers frequently commented on both subcategories of process. Thus, one cannot total the subcategories to calculate the total number of providers commenting on process.

Nearly half of providers who made comments addressed processes and procedures.



PROCESS WAS MENTIONED

Areas to Improve:Prov• Faster and more consistent
claims processing• Pror
accu

- More timely notification of changes in clients' status
- Better access to eJAS and other web-based systems
- Specific suggestions See next page for more detailed suggestions for process improvement

Providers Appreciate:

- Prompt, consistent and accurate payments
- Ready access to DSHS staff
- Appropriate and accurate referrals
- Efficient automated systems (direct deposit, e-mail contacts, etc.)

Providers say...

"The Region 4 birth parent visits reporting and billing is GREAT!"

"Lessen administrative burdens."

"Having domestic violence advocate on site is most beneficial."

"eJAS limitations drive me crazy."

"Gets reports out in a timely manner (most offices)."

"Provides direct deposit, provides e-mail contacts for questions."

"Be more consistent with contract payments – it seems there is constant staff turnover resulting in payment confusion/delays."

"Caseworkers don't make referrals, no matter how hard we try to support them."

"Develop a functional and cohesive IT department for more unified and logical reporting."

"Streamline process to obtain copies of records."

Providers suggested some very specific ways to improve processes...

"WorkOne JAS system to help domestic violence confidential notes. As it stands now, I cannot read my notes I've entered. Work gets so busy here, sometimes I forget if I've entered my notes or not."

"Let payer keep client when client moves to new area."

"Without a system like eJAS for TANF clients, it is often difficult to get information on the GA clients. Secure e-mail is somewhat helpful. Ability to submit 01-110A forms electronically would be a great help."

"[We need] Consistent use of contracted programs so they can keep funded and in existence."

"Notify us when someone's TANF closes. Some WFPs never return calls or answer the phone."

"BCCU could improve by letting us know where clearance forms are in the system and why hold ups."

"Use web-based reporting forms. Use consistent language in describing rules and procedures. Have policies to serve immigrants as well as refugees in the same program."

"Finance reporting forms are lengthy and cumbersome."

"Immediate childcare services for clients in domestic violence situations."

"Address checks in one consistent and correct fashion."

"Don't always understand drug issues of clients. They often won't count hours required by our program to meet TANF or WorkFirst requirements."

"Stop annual renewals. Drives my costs up."

"Having access to notes in eJAS would be helpful in assisting clients."

"Issue bus tickets, gas vouchers, etc. to clients attending classes in a timely manner."

"Address issue in Comprehensive Evaluation before refer out."

"Update eJAS notes immediately."

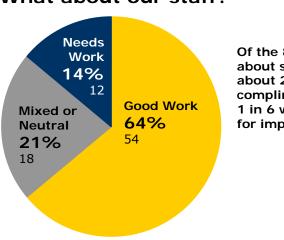
"Give me a code to enter the worker area. I often have to find someone to let me in."

"1. Too many audits – one a year would be good. 2. We need access to your computers like we used to."

"Send out Protective Payee Plans (start and end) when client moves to a different area that you work in (social workers take away your clients)."

"Not waste our time with CPT meetings where the kids have already been returned and now they need our signatures to cover their behinds to close the file."

Staff Attributes



What about our staff?

Of the 84 comments about staff attributes, about 2 of 3 were compliments. Less than 1 in 6 was a suggestion for improvement. About 3 of 5 providers who made comments addressed staff attributes.



Areas to Improve:

- Increased access to staff
- Quicker response times
- More respect for providers and clients
- More helpful and knowledgeable staff

Providers Appreciate Workers Who:

- Respond promptly
- Are willing to collaborate
- Are courteous and respectful
- Show caring and empathy
- Are able to accommodate special circumstances

Providers say...

"I feel DSHS is supportive of our agency, collaborative, and offers great suggestions and resources to improve client services."

"Karla Mehl! She is always helpful, kind, calls back promptly, tells me who to talk to if she can't help me."

"More availability and quicker return calls. Treat WorkFirst population respectfully."

"A better response time. Viewing us as a professional partner who wants to assist our common customers."

"They attend to the matter or question immediately. They do not leave things until later. This helps the client – less anxiety."

"They've been great."

"Staff at DSHS often respond poorly due to listening to internal gossip rather than their own research and experience." "Case managers or workers could do much better at returning calls and working out issues between client and vendors."

"Extremely friendly, treat clients well. Open communication, return calls and e-mails...see me at unscheduled times...try to fit me in."

"They are always willing to include me in meetings and provide information (re: cases in common)."

"Don't behave so adversarial."

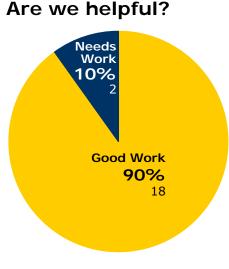
"One unit does not work with us, gives minimal referrals, and some are rude when we meet them as part of their unit meeting."

"They make good referrals and provide support."

"Better communications and willingness to work with other providers."

"Supervisors are great at returning calls and trying to get issues resolved."

Overall Helpfulness



Of the 20 comments about overall helpfulness or specific offices, 9 of 10 were positive. 1 in 10 was negative, or a suggestion for improvement. About 15% of providers who made comments addressed the overall helpfulness of ESA services.

Areas to Improve:

When asked what DSHS does well, one provider replied "Not a lot of anything," indicating dissatisfaction and the need for improvement.

The only specific negative comment in this category concerned parking at one of the CSO's (see comment below).

Providers Appreciate:

MENTIONED HELPFULNESS

Responsiveness

- Partnering with contractors
- The variety of services DSHS provides
- The quality of services DSHS provides
- Continuing improvements in DSHS processes and services

Providers say...

"Belltown CSO is very good at partnering with other providers to get the job done. In particular, they work well with homeless populations."

"[DSHS] provides a variety of services."

"DSHS is often maligned, but the public only gets the bad coverage, and seldom the good."

"Great – I feel like part of the family."

"[Helpful] most of the time."

"We have never had any problems."

"There have been significant improvements."

"DSHS is very helpful."

"Quit parking in our spaces! They (ESA staff) have their own, but continue to use our LIMITED spaces – that we (providers) pay for."

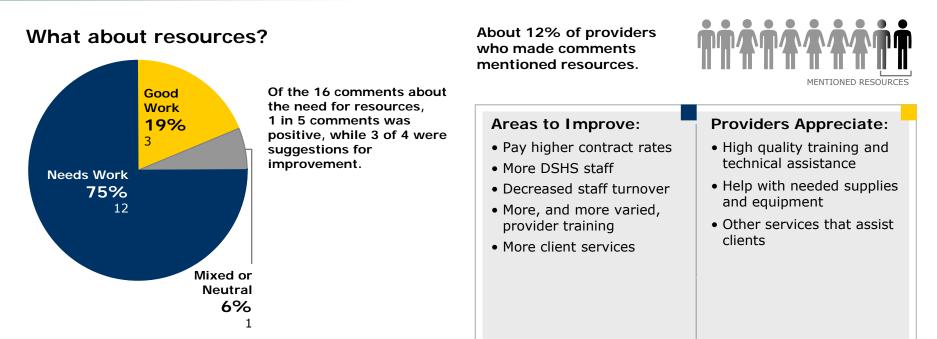
"We are very pleased with all of you."

"We appreciate the relationship with RIA staff. ALL staff are responsive to the contractors. Thank you for choosing us to serve our community."

"No problems at all. Always ready to assist and brainstorm to better serve the clients."

"Keep up the good work."

Resources



Providers say...

"Hire more staff – current staff have too many cases. More money is needed."

"[DSHS] provides technical assistance."

"Be more consistent with contract payments – it seems there is constant staff turnover resulting in payment confusion/delays."

"Increase the contract payment rate."

"I feel DSHS...offers great suggestions and resources to improve client services."

"Should provide more funding for more services (especially for elders and youths)."

"[DSHS] provides good equipment."

"Pay market rates – the AGs are well paid, but contractors are not!"

"Higher contract rate for GAL fees."

"DSHS provides trainings."

"More education on domestic violence issues."

"Job training."

"The only issue would be consistent funding [for providers]."

"The new employees need more training before they are left one-onone with clients."

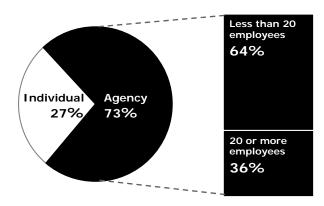
Who completed the survey?

The typical respondent is:

- A provider of more than one service
- An agency, not an individual
- Located in Western Washington

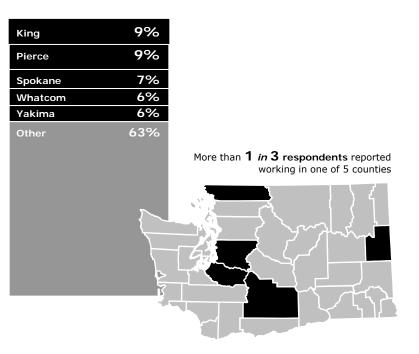
PROVIDER TYPE. The largest group of providers (45%) deliver more than one service. The most common *single* services provided are WorkFirst services (14%) and protective payee services (12%). The table at the bottom of page B-2 includes a complete list of provider services.

The majority of respondents were agencies (73%). Of those, 64% were small organizations with less than 20 employees, and 36% were agencies with 20 or more employees. Individuals comprised 27% of the returned surveys (37).



LOCATION. About 37% of completed surveys were returned by providers who delivered services in 5 larger Washington counties: King (12 respondents), Pierce (12), Spokane (10), Whatcom (8), and Yakima (8). Most of the remainder served ESA clients in smaller counties or in more than one county.

65% of the responding providers (91) work in Western Washington. 30% (42) work in Eastern Washington. 4% (6) work in both Western and Eastern Washington.



2005 Provider Survey



For questions or comments on this report, please contact:



Nancy Raiha, PhD Department of Social and Health Services Research and Data Analysis Division P.O. Box 45204 Olympia, WA 98504-5204 (360) 902-7667 raihank@dshs.wa.gov

This report, other provider survey reports, plus complete lists of provider comments are available from the *RDA website*: <u>www1.dshs.wa.gov/rda</u>

Washington State Department of Social and Health Services Research and Data Analysis Division December 2008 • 11.108.I