SUPPORTING STATEMENT FOR PROVIDER SURVEYS

A. JUSTIFICATION

1. Need and Use

This survey is part of Wisconsin Physician Services (WPS) proposal to meet the following contract requirement (section C.7.7.9) under the TRICARE Dual Eligible Fiscal Intermediary Contract (TDEFIC): The contractor shall establish an approach for measuring whether the contractor's customer services are achieving highly satisfied TRICARE beneficiaries and providers. The methods and procedures shall include measurement, calculation and reporting separately both beneficiary satisfaction and provider satisfaction. The contractor shall have established methods and procedures to mitigate any identified negative trends for both beneficiary satisfaction and provider satisfaction.

This contract requirement will be conducted on a monthly basis, and the sample will be drawn from all providers that have had a claim processed within the previous month.

2. Purpose and Users of the Information

WPS will use the survey to assess provider satisfaction, attitudes, and perceptions regarding the claims processing and customer services provided by WPS for the TDEFIC in order to improve internal operations and customer services to increase provider satisfaction. WPS will provide the government a monthly report indicating the satisfaction results of providers. WPS proposed that they would maintain a 95% satisfaction level among providers.

3. Information Collection Techniques

Information will be collected by provider survey taken via mail or telephone. WPS will mail on a monthly basis 750 return postage paid surveys to providers that had a claim processed within the previous month. WPS will use an automated program to randomly select these providers. WPS will also offer a telephone survey to a random sample of not less than 5% of all provider calls.

4. Duplication and Similar Information

There is no duplication of the data collection effort. No other DoD survey addresses these issues.

5. Small Business

This collection of information does not involve small business or other small entities.

6. Less Frequent Collection

Providers will not be asked to fill out a mailed claims survey more than once in a twelve-month period. However, if they request a survey, WPS will provide one. The telephone survey is optional and will be offered until not less than 5% of all provider calls have been surveyed.

7. Special Circumstances

There are no special circumstances to the collection of these data.

8. Federal Register Notice/Conclusions

The Federal Register Notice for this collection of information published March 6, 2008 (73 FR 12138). No comments were received.

9. Payment/Gift to Respondents

No payment of gift will be provided to the respondents.

10. Confidentiality

Although WPS can utilize the claim number on the mailed surveys to identify the provider and the claims processed, this only has importance to WPS. This linkage between the claim number and the provider allows WPS to reference the specific data to reflect in quality enhancements. Respondent's names will not be released when data and analytic results are reported. No PHI information is being released. The post card survey provides an option for the provider to include their name and phone number if they want to be contacted by WPS to discuss any concerns but this is optional. The hard copy surveys will be destroyed in 3 months.

11. Sensitive Questions

There are no questions of a sensitive nature on the survey instrument.

12. Burden Estimates

The total annual burden for respondents is projected to be 11,700 for the mailed and telephone surveys combined. This projection is based on an annual participation of 46,800 providers and an estimate of 15 minutes per completed survey.

The average cost to providers to answer the survey is \$50. This cost is based on an estimate of 15 minutes per completed survey and an average physician wage of \$200. per hour based on current literature.

13. Cost to Respondents

There are no start-up or O&M costs to the respondents.

14. Cost to Federal Government

The specific costs associated with conducting this survey are part of the overall administrative costs WPS proposed with their Bid on this contract.

15. Change in Burden

This is the first time providers will be surveyed by the contractor administering the health care contacts. As a result of meeting a contract requirement, the change in burden is + 11,700.

16. Public/Tabulation

To calculate provider satisfaction WPS will add scores of 3, 4, and 5 on the survey. Customer satisfaction is calculated by dividing that total by the total actual weighted score of all ratings.

17. Expiration Date

No exception is sought for displaying the expiration data of the data collected through this project

18. Exceptions

There are no exceptions to the certification statement.

B. COLLECTION OF INFORMATION EMPLOYING STATISTICAL METHODS

1. Respondent Universe and Sampling Methods

a. Population Universe

The population consists of all network and non network providers in the U.S. territories. An exact number of providers is not available. Although there are 1.8 million active TRICARE provider records in the TMA system, there is not a 1 to 1 ratio between the TRICARE provider records and the number of providers.

b. Sample Stratification: This is a random sample of 750 providers of all network and non network providers.

On a monthly basis Wisconsin Physician Services will use an internally (IS) developed automated program to randomly select 750 providers to mail a survey to. In addition, the IVR (Interactive Voice Response) survey will be offered to a random sample of not less than 5% of calls from providers to Wisconsin Physician Services' customer service with inquiries related to claims processing or the TRICARE program. Wisconsin Physician Services currently receives close to a 40% return rate on mailed surveys. For the IVR survey, Wisconsin Physician Services will collect data until 5% of all provider calls to customer service during the month complete the survey. Wisconsin Physician Services customer service area receives approximately 80,265 calls per month from providers thus, Wisconsin Physician Services will continue to collect data until 4,013 responses are completed.

c. Calculation of Sample Size per Stratum: This is a random sample.

2. Procedures for Information Collection

Wisconsin Physician Services will mail surveys on a monthly basis to determine the overall provider satisfaction. Wisconsin Physician Services will send 750 return postage paid surveys. Wisconsin Physician Services will use an internally developed automated program to randomly select providers who had a claim processed within the previous month. Providers will be asked to rate Wisconsin Physician Services on the overall service provided. The claims are pulled at the end of each month for 750 unique providers and the provider can not have been selected in the past 12 months. These are processed claims within the previous month and are randomly selected.

Below are different processes that WPS reviewed. Based on this review WPS

chose the last method or the formula method:

- 1) Census approach- not used because the population is too big
- 2) Sample size from similar study- not used because runs risk of repeating errors
 - 3) Published tables- looked at initially but refined based on information- published tables would be a sample size of 400 valid responses which would be an average return rate of 53% of a mail out of 750 surveys
- 4) Formula- most used formula for large populations over 100,000

 $n = Z^2pq \div e^2$

n= sample size

Z= abscissa of the normal curve assuming normal distribution= z table value =(1-desired confidence level) found in statistical table and in this case equal to 1.95

P=estimated proportion of attribute that is present in population (variability) We assume worst case maximum variability = to 0.5 Q=(1-p)=0.5

E=desired level of precision or .05

Thus n = 375 sample size of valid responses which is 50% of or our assumed response rate from 750 surveys.

3. Methods to Maximize Response Rates

Since this is a new effort, at this time there are not methods proposed to maximize the response rate. Wisconsin Physician Services will ensure that a survey is not sent out to the same provider more than once in a 12 month period. This should ensure the sample is more representative of the universe. Providers that do not submit claims or contact Wisconsin Physician Services would not be included in the sample. Wisconsin Physician Services indicated that their research and experience indicates that an average return rate for surveys is 5-10% and thus believe that a 40% return rate is a good indication of provider satisfaction.

4. Description of Tests of Procedures or Methods

Telephones surveys and surveys via the mail have been successfully employed in previous efforts by TMA or the contractors. These previous efforts have demonstrated that the use of this protocol is an effective method to collect satisfaction data in a short amount of time.

5. Points of Contact (POCs)

a. TRICARE Management Activity (TMA0, Health Program Analysis and Evaluation (HPA&E)
Kim Frazier, Director, Survey Operations (703) 681-3636

b. TRICARE Management Activity (National Contract Operations, NCO Branch)Laura Johnson, Program Analyst (303) 676-3622