

VA Community Care Provider Satisfaction Survey

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The Paperwork Reduction Act of 1995: This information is collected in accordance with section 3507 of the Paperwork Reduction Act of 1995. Accordingly, we may not conduct or sponsor and you are not required to respond to, a collection of information unless it displays a valid OMB number. We anticipate that the time expended by all individuals who complete this survey will average 10 minutes. This includes the time it will take to follow instructions, gather the necessary facts and respond to questions asked. Customer satisfaction is used to gauge customer perceptions of VA services as well as customer expectations and desires. The results of this online/mail survey will lead to improvements in the quality of service delivery to community providers by the Veterans Health Administration (VHA) Office of Community Care under traditional VA Community Care. Participation in this survey is voluntary and failure to respond will have no impact on benefits to which you may be entitled.

VA Form 10-APR 2014 **Privacy Act Statement:** This survey is not a collection of personal information; please do not enter any personal information in the open text fields. By voluntarily providing information on www.va.gov/purchasedcare/programs/provider info, you are consenting to VA's use and disclosure of that information in the manner described in this limited policy. The VA general Web privacy policy is available at www.va.gov/privacy.

VA uses a Hierarchy of Care to determine how care in the community should be provided. VA Community Care purchases health care for eligible Veterans when their local VA Medical Center cannot readily provide the needed care. Under the current VA hierarchy structure, the Veterans Choice Program (VCP) is the primary mechanism used when Veterans use community care. If services are not available under VCP, or a Veteran is not eligible for or declines such care, VA staff may utilize other traditional Community Care options pending availability of funds. The VHA Office of Community Care administers VCP in addition to traditional VA Community Care for VA.

The statements and questions in this survey are regarding your experience with the VHA Office of Community Care through <u>traditional VA Community Care</u> and are <u>not</u> related to health care services delivered through VCP.

Unique Identifier Code (UIC)

Please enter the Unique Identifier Code (UIC) that is printed under your business name on the survey invitation letter (7-8 characters):

For each question, please check the box that best matches your experience.

Experience with VHA Office of Community Care and Staff

VHA Office of Community Care Staff

Courteous							
o Always	o Most of the Time	o Sometimes	o Rarely	o Never			
Competent							
o Always	o Most of the Time	o Sometimes	o Rarely	o Never			
Provide consiste	ently good service						
o Always	o Most of the Time	o Sometimes	o Rarely	o Never			
Adequately accessible for advice and assistance							
o Always	o Most of the Time	o Sometimes	o Rarely	o Never			

VHA Office of Community Care Keeps me informed of conditions and changes that affect me o Most of the Time o Sometimes o Always o Rarely o Never Works with me to ensure I get what I need o Always o Most of the Time o Sometimes o Never o Rarely Policies and procedures are easy to understand o Always o Most of the Time o Sometimes o Never o Rarely **Authorizations for Care and Payments Authorizations for Care** Issued in a timely manner o Always o Most of the Time Sometimes o Rarely o Never Accurate and error-free o Always o Most of the Time o Sometimes o Rarely o Never Easy to understand o Always o Most of the Time o Sometimes o Rarely o Never Provide enough information for care and treatment o Most of the Time o Always o Sometimes o Rarely o Never **Payments** Issued in a timely manner o Always o Most of the Time o Sometimes o Never o Rarely Accurate and error-free o Most of the Time o Sometimes o Always o Rarely o Never Satisfaction with Services How satisfied are you with the following services? Authorizations for Care o Satisfied o Somewhat o Somewhat o Dissatisfied o Very o Very Satisfied Satisfied Dissatisfied Dissatisfied Billing (excluding document submission) o Very o Satisfied o Somewhat o Somewhat o Dissatisfied o Very

Dissatisfied

Dissatisfied

Satisfied

Satisfied

Document Su	ıbmission							
o Very Satisfied	o Satisfied	o Somewhat Satisfied	0	Somewhat Dissatisfied	o Dissatisfied	o Very Dissatisfied		
Payments								
o Very Satisfied	o Satisfied	o Somewhat Satisfied	0	Somewhat Dissatisfied	o Dissatisfied	o Very Dissatisfied		
Response to o Very Satisfied	o Satisfied	o Somewhat Satisfied	0	Somewhat Dissatisfied	o Dissatisfied	o Very Dissatisfied		
3055		- Comence		210001101100		210001101100		
Problems a	and Complaints	5						
o Yes	perienced a prob	olem in the last 3 r o No (Please sl			on, Overall Satisf a	action)		
			•		,	,		
Problems an	d complaints							
Resolved qu o Always	ickly o Most of	the Time	0.50	metimes	o Rarely	o Never		
O / livray 3	O WOOL OF		0.00	meames	Ortarely	O I VOVOI		
	n minimal effort		- 0-		a Danah	a Navan		
o Always	o Most of	tne Time	0 50	metimes	o Rarely	o Never		
VHA Office of	of Community C	Care Staff						
Flexible in fin	ding solutions to	problems						
o Always	o Most of		o So	metimes	o Rarely	o Never		
Effectively handle problems or mistakes								
o Always	O Most of		o So	metimes	o Rarely	o Never		
In which of the following areas did you experience the problem(s)? Mark all that apply O Authorizations for Care O Billing (excluding document submission)								
o Payments o Response to Inquiries								
o Other – please specify								
Describe the problem(s) and how the problem(s) was resolved.								
Overall Satisfaction with VHA Office of Community Care								
	Overall, how satisfied are you with the VHA Office of Community Care?							
o Very	satisfied are you o Satisfied	i with the VHA Of o Somewhat		o Somewhat	are? O Dissatisfied	o Very		
Satisfied		Satisfied		Dissatisfied		Dissatisfied		

o Definitely Yes	o Probably Y	es o Proba	ably No	o Definitely No	o Not Sure				
What is the VHA Office of Community Care doing well?									
How can the VHA Office of Community Care improve?									
Overall Experien	Overall Experience with Department of Veterans Affairs (VA)								
Now think about your experiences with all the services provided by the VA (which includes healthcare, benefits programs or memorial services).									
Please tell us how	v you feel about	the following sta	atements:						
I got the service I n									
o Strongly Agree	o Agree	o Neither Agree nor Disagree		sagree C	Strongly Disagree				
It was easy to get t									
o Strongly Agree	o Agree	o Neither Agree nor Disagree		sagree C	Strongly Disagree				
I felt like a valued o	customer.								
o Strongly Agree	o Agree	o Neither Agree nor Disagree		sagree C	Strongly Disagree				
I trust VA to fulfill o	ur country's com	mitment to Vetera	ns.						
o Strongly Agree	o Agree		e o Dis	sagree c	Strongly Disagree				
About You									
Where do you work	·?								
o Independent Medical Office o University Hospital			o Private Hospital o Other – please specify						
What is your occup	ation?								
o Clinician o Billing and Accounts Receivable Personnel o Office Manager or Office Staff o Other – please specify					rsonnel				
Within the <u>last 3 months</u> how many Veterans did you provide care for? o Fewer than 10 o 10-39 o 40-69 o 70-99 o 100 or more o Do not know									
How would you des	scribe the geogra o Urban	uphic area where y o Subu		care?					

END OF SURVEY Thank you for your time!