

## MAC Binder Section 7 – Audits

### Table of Contents with Document Summary

Located online at <http://chfs.ky.gov/dms/mac.htm>

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#### **1 – Encounter Data Rate Benchmarking Study FINAL\_July2014:**

This HEDIS “benchmarking” project aimed to compare the HEDIS measure rates calculated by IPRO using MCO submitted encounter data to the HEDIS measure rates calculated by the MCO’s. Specifically, the project aimed to validate that the data contained in the encounter data warehouse was consistent with the health plan data with regard to the fields including, but no limited to: member eligibility and enrollment dates, dates of service, diagnosis codes and procedure codes.

#### **2 – KY Web Provider Directory Validation Study Report\_FINAL\_Sept2014:**

The Web-Based Provider Directory Validation Study is one of a variety of activities performed to ensure enrollees are being provided accurate information regarding the providers comprising the health plans’ provider network.

#### **3 – MC Prov Network Submission Audit Report FINAL\_Sept2014:**

This report is a summary of the second audit of the accuracy of MCO submissions to the MCAPS conducted by IPRO for the DMS. IPRO conducted a two-phase mailing to validate the accuracy of the MCAPS data submissions for PCPs and specialists participating with any of the four MCOs operating in Kentucky with a Medicaid product line.



**Encounter Data Rate Benchmarking Study:**

M CO HEDIS<sup>®</sup> 2013 Rates Versus Plan Encounter Data Calculated Rates

**Prepared on Behalf of The**

Commonwealth of Kentucky

Department for Medicaid Services

Division of Program Quality and Outcomes

**July 2014**

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## I. BACKGROUND AND INTRODUCTION

Coventry Health and Life Insurance Company (doing business as CoventryCares of Kentucky), WellCare of Kentucky and Passport Health Plan were required by the Kentucky Department for Medicaid Services (DMS) to report Healthcare Effectiveness Data and Information Set (HEDIS<sup>®1</sup>) measure results to the National Committee for Quality Assurance (NCQA) for its Medicaid product line in 2013. Humana CareSource was not required to submit HEDIS since they only began operations in January 2013 and did not have the required membership for this reporting period. In Addition, Anthem did not begin providing services until January 2014 and therefore is not included in this report. HEDIS is the most widely used set of performance measures in the managed care industry. HEDIS was developed and is maintained by NCQA, a not-for-profit organization committed to assessing, reporting and improving the quality of care provided by organized delivery systems. The Managed Care Organizations (MCOs) reported HEDIS data is used for purposes of monitoring quality of and access to care, as well as for NCQA accreditation of its Medicaid product line, which is also a DMS contract requirement.

Island Peer Review Organization (IPRO) serves as the Medicaid External Quality Review Organization (EQRO) for the Commonwealth of Kentucky. As the EQRO, IPRO receives extracts of MCO submitted encounter data from KDM S. Encounters are received on a monthly basis and are loaded into a SAS data warehouse at IPRO.

As one of the optional Medicaid managed care External Quality Review activities, DMS requested that IPRO conduct an encounter data validation project. The topic chosen was an analysis of select MCO HEDIS 2013 measures to evaluate MCO encounter data completeness in the IPRO data warehouse. IPRO accomplished this by creating SAS programs using the HEDIS technical specifications to calculate HEDIS measure rates using the encounter data from the EQRO data warehouse. The results were compared to the rates submitted by the MCO's to NCQA for their annual HEDIS reporting. The four HEDIS measures selected were: *Breast Cancer Screening (BCS)*, *Annual Dental Visit (ADV)*, *Children and Adolescents' Access to Primary Care Practitioners (CAP)* and *Adults' Access to Preventive/ Ambulatory Health Services (AAP)*.

In order to evaluate the completeness and accuracy of the IPRO data warehouse, this HEDIS "benchmarking" project aimed to compare the HEDIS measure rates calculated by IPRO using MCO submitted encounter data to the HEDIS measure rates calculated by the MCO's. Specifically, the project aimed to validate that the data contained in the encounter data warehouse was consistent with the health plan data with regard to fields including, but not limited to: member eligibility and enrollment dates, dates of service, diagnosis codes and procedure codes. The overarching goal was to identify issues and improve the quality of the data in the data warehouse so that DMS may use the encounter data to reliably calculate measures of quality and cost, and for rate setting.

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<sup>1</sup> HEDIS is a registered trademark of NCQA, the National Committee for Quality Assurance.

## II. METHODOLOGY

Each year, health plans submit their HEDIS data to NCQA via a secure, web-based electronic tool known as the HEDIS Interactive Data Submission System (IDSS). In order to conduct this task, IPRO received from DMS an electronic version of each MCO's 2013 HEDIS IDSS populated with all of their Medicaid product line measure data. These data provided the baseline for comparison.

To calculate HEDIS rates independently of the MCO's rates, IPRO followed NCQA's HEDIS 2013 Volume 2: Technical Specifications to develop SAS programs for the four measures included in this study. IPRO then calculated the selected HEDIS measures: *Breast Cancer Screening (BCS)*, *Annual Dental Visit (ADV)*, *Children and Adolescents' Access to Primary Care Practitioners (CAP)* and *Adults' Access to Preventive/Ambulatory Health Services (AAP)* using the MCO encounter data within the IPRO encounter data warehouse.

These encounter calculated rates were compared to the HEDIS rates reported by the MCO's to NCQA and DMS. The results are displayed in figures contained in Appendix 1 of this report.

### III. FINDINGS

The tables below and the figures in Appendix 1 display the comparisons between the MCO's reported rates and the encounter data calculated rates. The findings are described below.

#### **CoventryCares of Kentucky**

The results of the comparison were as follows:

#### **HEDIS 2013 and Encounter Data Calculated Rates**

Measure <sup>1</sup>	HEDIS Denominator <sup>2</sup>	HEDIS Numerator <sup>2</sup>	HEDIS Rate <sup>2</sup>	Encounter Denominator <sup>3</sup>	Encounter Numerator <sup>3</sup>	Encounter Rate <sup>3</sup>	SS <sup>4</sup>
CAP (Ages 12-24 mos)	6,795	6,655	97.94	6,887	6,691	97.2	NS
CAP (Ages 25 month-6 yrs)	32,077	30,130	93.93	32,360	29,964	92.6	SS
CAP (Ages 7-11 yrs)	NA	NA	NA	NA	NA	NA	NA
CAP (Ages 12-19 yrs)	NA	NA	NA	NA	NA	NA	NA
AAP (Ages 20-44 yrs)	19,984	17,661	87.4	25,676	22,432	87.4	NS
AAP (Ages 45-64 yrs)	12,893	12,081	93.1	20,838	19,402	93.1	NS
AAP (Ages 65+)	214	190	93.3	10,289	9,597	93.3	NS
BCS	NA	NA	NA	NA	NA	NA	NA
ADV	96,495	58,926	61.07	97,637	57,163	58.5	SS

<sup>1</sup> Measure names: CAP – Children and Adolescents' Access to Primary Care Practitioners; AAP – Adults' Access to Preventive/Ambulatory Health Services; BCS – Breast Cancer Screening; ADV – Annual Dental Visit

<sup>2</sup> These are the data the MCO reported for HEDIS 2013.

<sup>3</sup> These are the data derived from the encounter data.

<sup>4</sup> Indicates difference in rates was statistically significant.

NA: not applicable; SS: statistically significant; NS not significant

#### *Children and Adolescents' Access to Primary Care Practitioners (CAP)*

CoventryCares of Kentucky did not report this measure for the age groups 7-11 and 12-19 years since these subgroups required a two year membership and the plan was not serving Kentucky Medicaid for two years at the time of HEDIS2013 reporting.

While the difference in the MCO-reported and encounter data calculated rates for the 25 month to 6 year age group is considered statistically significant, the MCO plan reported and calculated using encounter data rates for this group and the 12 to 24 month age group were very similar - the numerators and denominators for both age groups' rates were close.

*Adults' Access to Preventive/Ambulatory Health Services (AAP)*

For this measure, the encounter calculated denominators for each age group were much higher than CoventryCares of Kentucky reported for HEDIS. As a result, the numerators were also higher. While differences in the rates for all three age groups were considered not statistically significant, the encounter rate for the 65+ age group showed a difference of more than 5 percentage points higher than the MCO-reported rate. The plan reported and calculated using encounter data rates for the 20 to 44 years and 45 to 64 years age groups were within approximately 1 percentage point of each other.

*Breast Cancer Screening (BCS)*

This measure requires a two year enrollment period and therefore was not reported by CoventryCares of Kentucky.

*Annual Dental Visit (ADV)*

Although the difference in the two rates was statistically significant, the denominator and numerator were close when comparing the plan reported HEDIS rates and the calculated rates using encounter data. The actual rates were within approximately 3 percentage points of each other.

**Passport Health Plan**

The results of the comparison were as follows:

**HEDIS 2013 and Encounter Data Calculated Rates**

Measure <sup>1</sup>	HEDIS Denominator <sup>2</sup>	HEDIS Numerator <sup>2</sup>	HEDIS Rate <sup>2</sup>	Encounter Denominator <sup>3</sup>	Encounter Numerator <sup>3</sup>	Encounter Rate <sup>3</sup>	SS <sup>4</sup>
CAP (Ages 12-24 mos)	7,172	7,018	97.85	7,389	6,953	94.1	SS
CAP (Ages 25 month-6 yrs)	30,502	27,261	89.37	34,395	24,662	71.7	SS
CAP (Ages 7-11 yrs)	22,533	20,720	91.95	24,697	18,871	76.4	SS
CAP (Ages 12-19 yrs)	26,455	24,244	91.64	28,451	21,922	77.1	SS
AAP (Ages 20-44 yrs)	16,778	14,281	82.24	19,275	14,208	73.7	SS
AAP (Ages 45-64 yrs)	13,090	11,870	88.06	14,327	11,839	82.6	SS
AAP (Ages 65+)	5,206	4,793	90.62	5,578	4,785	85.8	SS
BCS	8,969	4,634	51.67	9,347	3,332	35.6	SS
ADV	90,746	55,310	60.95	102,030	52,110	51.1	SS

<sup>1</sup> Measure names: CAP – Children and Adolescents’ Access to Primary Care Practitioners; AAP – Adults’ Access to Preventive/Ambulatory Health Services; BCS – Breast Cancer Screening; ADV – Annual Dental Visit

<sup>2</sup> These are the data the MCO reported for HEDIS 2013.

<sup>3</sup> These are the data derived from the encounter data.

<sup>4</sup> Indicates difference in rates was statistically significant (SS).

NA: not applicable; SS: statistically significant; NS not significant

*Children and Adolescents’ Access to Primary Care Practitioners (CAP)*

For the CAP measure, all four age groups’ rates showed differences that were statistically significant. Additionally, the denominators were slightly higher while the numerators were all slightly lower when comparing the encounter rates and the HEDIS reported rates. Therefore, the calculated rates using encounter data were lower than the plan reported rates. The two rates for 25 month to 6 year age group were closest with a difference of just under 4 percentage points.



*Adults' Access to Preventive/Ambulatory Health Services (AAP)*

Similar to the Children and Adolescents' Access to Primary Care Practitioners measure, the encounter rates had higher denominators and lower numerators for all three age groups when compared to the HEDIS reported numbers. This in turn caused sizable differences between the plan reported rates and the calculated rates using encounter data.

*Breast Cancer Screening (BCS)*

Similar to both the previous measures, the BCS measure had a higher denominator using encounter data and lower numerator based on encounter data compared to the plan reported numerator. Again, this resulted in sizable differences between the two rates (16 percentage points).

*Annual Dental Visit (ADV)*

This fourth measure also resulted in a higher denominator and a lower numerator when calculated using encounter data. The calculated rate was nearly nine percentage points below the HEDIS reported rate.

## WellCare of Kentucky

The results of the comparison were as follows:

### **HEDIS 2013 and Encounter Data Calculated Rates**

Measure <sup>1</sup>	HEDIS Denominator <sup>2</sup>	HEDIS Numerator <sup>2</sup>	HEDIS Rate <sup>2</sup>	Encounter Denominator <sup>3</sup>	Encounter Numerator <sup>3</sup>	Encounter Rate <sup>3</sup>	SS <sup>4</sup>
CAP (Ages 12-24 mos)	5,954	5,818	97.7	5,859	5,581	95.3	SS
CAP (Ages 25 month-6 yrs)	23,990	22,457	93.6	23,524	20,781	88.3	SS
CAP (Ages 7-11 yrs)	NA	NA	NA	NA	NA	NA	NA
CAP (Ages 12-19 yrs)	NA	NA	NA	NA	NA	NA	NA
AAP (Ages 20-44 yrs)	19,360	17,065	88.15	18,802	16,075	85.5	SS
AAP (Ages 45-64 yrs)	16,383	15,279	93.26	16,115	14,706	91.3	SS
AAP (Ages 65+)	6,250	5,855	93.68	6,034	5,508	91.3	SS
BCS	NA	NA	NA	NA	NA	NA	NA
ADV	74,286	45,900	61.8	72,922	34,409	47.2	SS

<sup>1</sup> Measure names: CAP – Children and Adolescents’ Access to Primary Care Practitioners; AAP – Adults’ Access to Preventive/Ambulatory Health Services; BCS – Breast Cancer Screening; ADV – Annual Dental Visit

<sup>2</sup> These are the data the MCO reported for HEDIS 2013.

<sup>3</sup> These are the data derived from the encounter data.

<sup>4</sup> Indicates difference in rates was statistically significant.

NA: not applicable; SS: statistically significant; NS not significant

### *Children and Adolescents’ Access to Primary Care Practitioners (CAP)*

WellCare of Kentucky did not report this measure for the age groups 7-11 and 12-19 years since these subgroups required a two year membership and the plan was not serving Kentucky Medicaid for two years at the time of HEDIS2013 reporting.

While the difference in rates for the two reported subgroups (ages 12 to 24 months and 25 months to 6 years) were considered statistically significant, the rates for the 12 to 24 month age group were within 2.5 percentage points of each other and the rates for the 25 month to 6 year age

group showed a larger discrepancy at over 5 percentage points. The encounter data denominators were similar while the numerators were lower compared to the HEDIS reported rates.

*Adults' Access to Preventive / Ambulatory Health Services (AAP)*

For this measure, the numerators and denominators for the rates derived from the MCO encounters were much higher than those reported for HEDIS. Since there were more members in the calculated measures, it in turn caused the numerators to be higher also. While the differences in the rates for all three age groups were not considered statistically significant, the 65+ age group encounter rate was a full 5 percentage points higher than the HEDIS reported rate. The plan reported rates and the rates calculated using encounter data for the 20 to 44 and 45 to 64 age groups were both within approximately 1 percentage point of each other.

*Breast Cancer Screening (BCS)*

This measure requires a two year enrollment period and therefore was not reported by WellCare of Kentucky.

*Annual Dental Visit (ADV)*

The denominator for the HEDIS-reported rate was close to the calculated rate denominator. The numerator for the calculated rate was much lower than the HEDIS-reported rate causing a much lower rate and a large difference between the two rates.

#### **IV. LIMITATIONS**

When reviewing the project findings, the following limitations should be noted:

- § Some discrepancies would be expected due to the time difference inherent in this project. The MCO's prepared their HEDIS eligible populations and denominators early in 2013 and the numerators and rates in the second quarter of 2013 in order to report HEDIS timely in June 2013. IPRO calculated the encounter-derived eligible populations, denominators, numerators and rates in June 2014, a full year later. Given the time gap, the enrollment data would have been updated and more claims would have been reported, thereby impacting the eligible populations/denominators.
- § For the Children's and Adolescents' Access to Primary Care Practitioners measure, the codes within the encounter system used to designate a Primary Care Physician (PCP) visit used in the IPRO methodology may have differed from, the MCOs methodologies.

#### **V. NEXT STEPS**

This study should be conducted for HEDIS 2014 and a comparison of member detail files should be requested from each MCO in order to determine possible causes of difference in numerators.

#### **VI. REFERENCE(S)**

HEDIS 2013 Volume 2: Technical Specifications, NCQA, 2012.

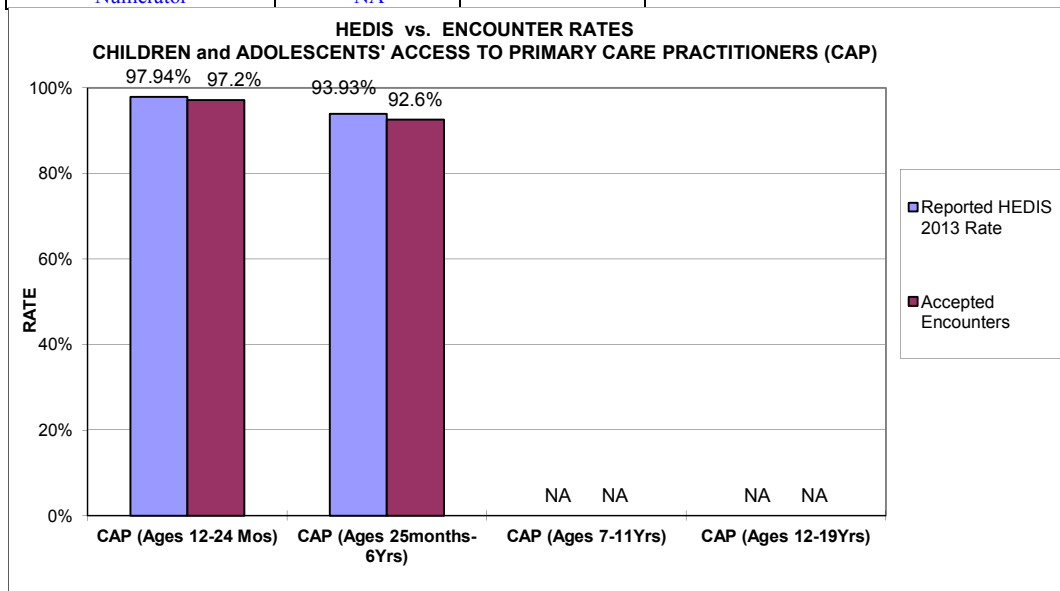
**Appendix 1**  
Measure Benchmarking Figures

**CoventryCares of Kentucky**  
**MCO HEDIS Rates - Plan Reported Versus Calculated Using Encounter Data**

**DATES OF SERVICE: 01JAN2012 - 31DEC2012**  
**HEDIS® 2013 CHILDREN and ADOLESCENTS' ACCESS TO PRIMARY CARE PRACTITIONERS (CAP)**

Measure	MCO HEDIS 2013 (MY 2012) <sup>1</sup>	MCO Encounter (MY 2012) <sup>2</sup>	Comparison of HEDIS to Encounter Rates <sup>3</sup>
CAP (Ages 12-24 Mos)	97.94%	97.2%	ns
CAP (Ages 25months-6Yrs)	93.93%	92.6%	ss
CAP (Ages 7-11Yrs)	NA	NA	NA
CAP (Ages 12-19Yrs)	NA	NA	NA

CAP (Ages 12-24 Mos)		
Denominator	6,795	6,887
Numerator	6,655	6,691
CAP (Ages 25M-6Yrs)		
Denominator	32,077	32,360
Numerator	30,130	29,964
CAP (Ages 7-11Yrs)		
Denominator	NA	
Numerator	NA	
CAP (Ages 12-19Yrs)		
Denominator	NA	
Numerator	NA	



1-Rate reported for HEDIS 2013 by MCO.  
 2-Rate calculated from encounters submitted by MCO.  
 3-ss=statistically significant difference, ns=not statistically significant difference.  
 4-Not Available.  
**NOTE:** Age as of December 31 of the measurement year.  
 No more than a one month gap in enrollment during the measurement year

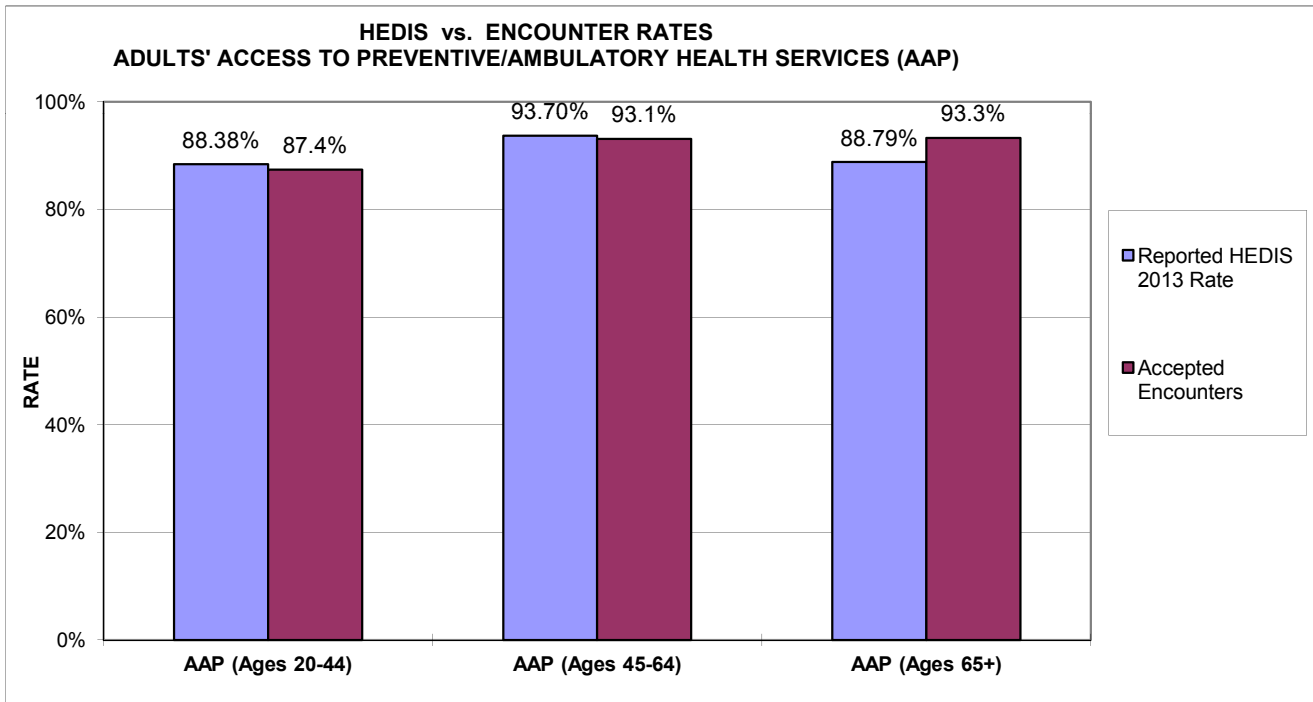
**CoventryCares of Kentucky**  
**MCO HEDIS Rates - Plan Reported Versus Calculated Using Encounter Data**

**DATES OF SERVICE: 01JAN2012 - 31DEC2012**

**HEDIS® 2013 ADULTS' ACCESS TO PREVENTIVE/AMBULATORY HEALTH SERVICES (AAP)**

Measure	MCO HEDIS 2013 (MY 2012) <sup>1</sup>	MCO Encounter (MY 2012) <sup>2</sup>	Comparison of HEDIS to Encounter Rates <sup>3</sup>
AAP (Ages 20-44)	88.38%	87.4%	ns
AAP (Ages 45-64)	93.70%	93.1%	ns
AAP (Ages 65+)	88.79%	93.3%	ns

AAP (Ages 20-44)		
Denominator	19,984	25,676
Numerator	17,661	22,432
AAP (Ages 45-64)		
Denominator	12,893	20,838
Numerator	12,081	19,402
AAP (Ages 65+)		
Denominator	214	10,289
Numerator	190	9,597



1-Rate reported for HEDIS 2013 by MCO.

2-Rate calculated from encounters submitted by MCO.

3-ss=statistically significant difference, ns=not statistically significant difference.

**NOTE:** Includes adults ages 20-65+ as of December 31 of the measurement year.

No more than a one month gap in enrollment during the measurement year

**ISSUE DATE:** 9-Jul-14

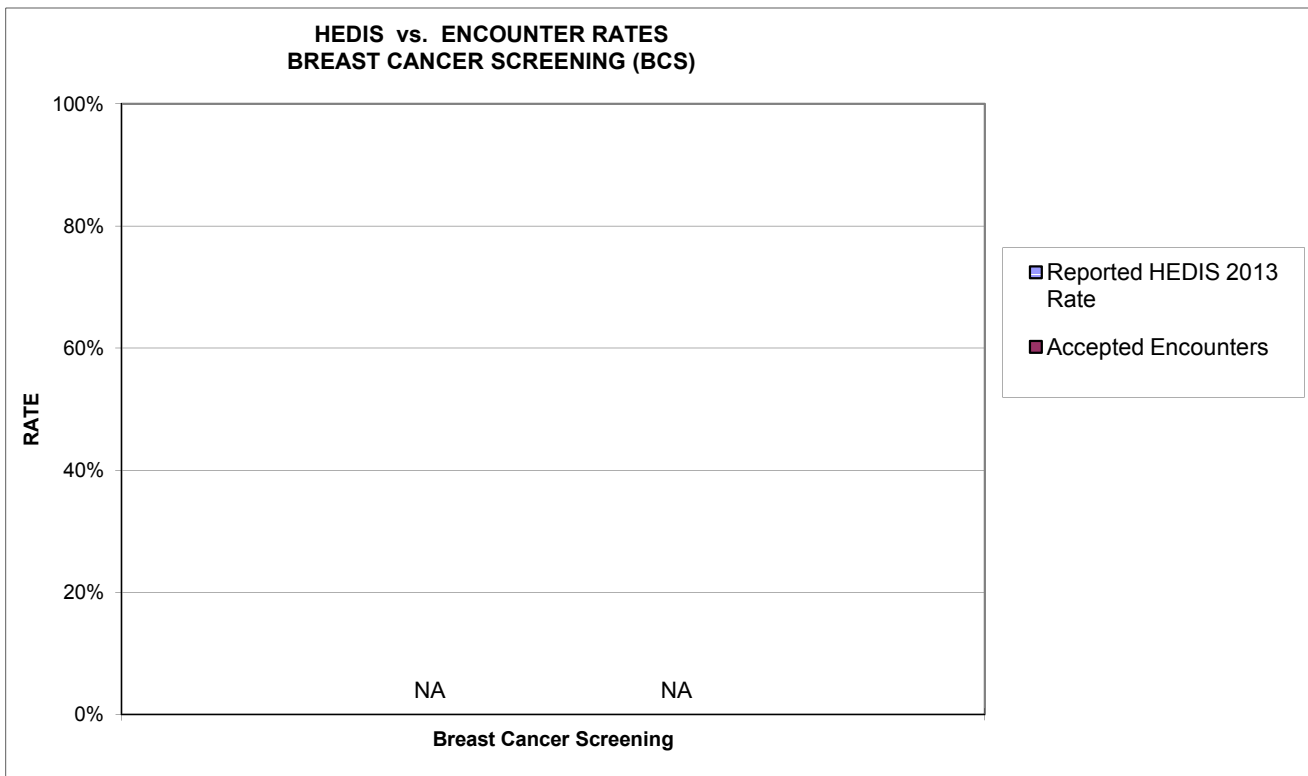
**CoventryCares of Kentucky**

**MCO HEDIS Rates - Plan Reported Versus Calculated Using Encounter Data**

**DATES OF SERVICE: 01JAN2012 - 31DEC2012**

**HEDIS<sup>a</sup> 2013 BREAST CANCER SCREENING (BCS)**

Measure	MCO HEDIS 2013 (MY 2012) <sup>1</sup>	MCO Encounter (MY 2012) <sup>2</sup>	Comparison of HEDIS to Encounter Rates <sup>3</sup>
Breast Cancer Screening	NA	NA	NA
Denominator	NA	NA	
Numerator	NA	NA	



1-Rate reported for HEDIS 2013 by MCO.

2-Rate calculated from encounters submitted by MCO.

3-ss=statistically significant difference, ns=not statistically significant difference.

NA =Not Available.

**NOTE:** Includes women ages 42-69 years as of December 31 of the measurement year.

No more than a one month gap in enrollment during the measurement year

**ISSUE DATE:**

9-Jul-14



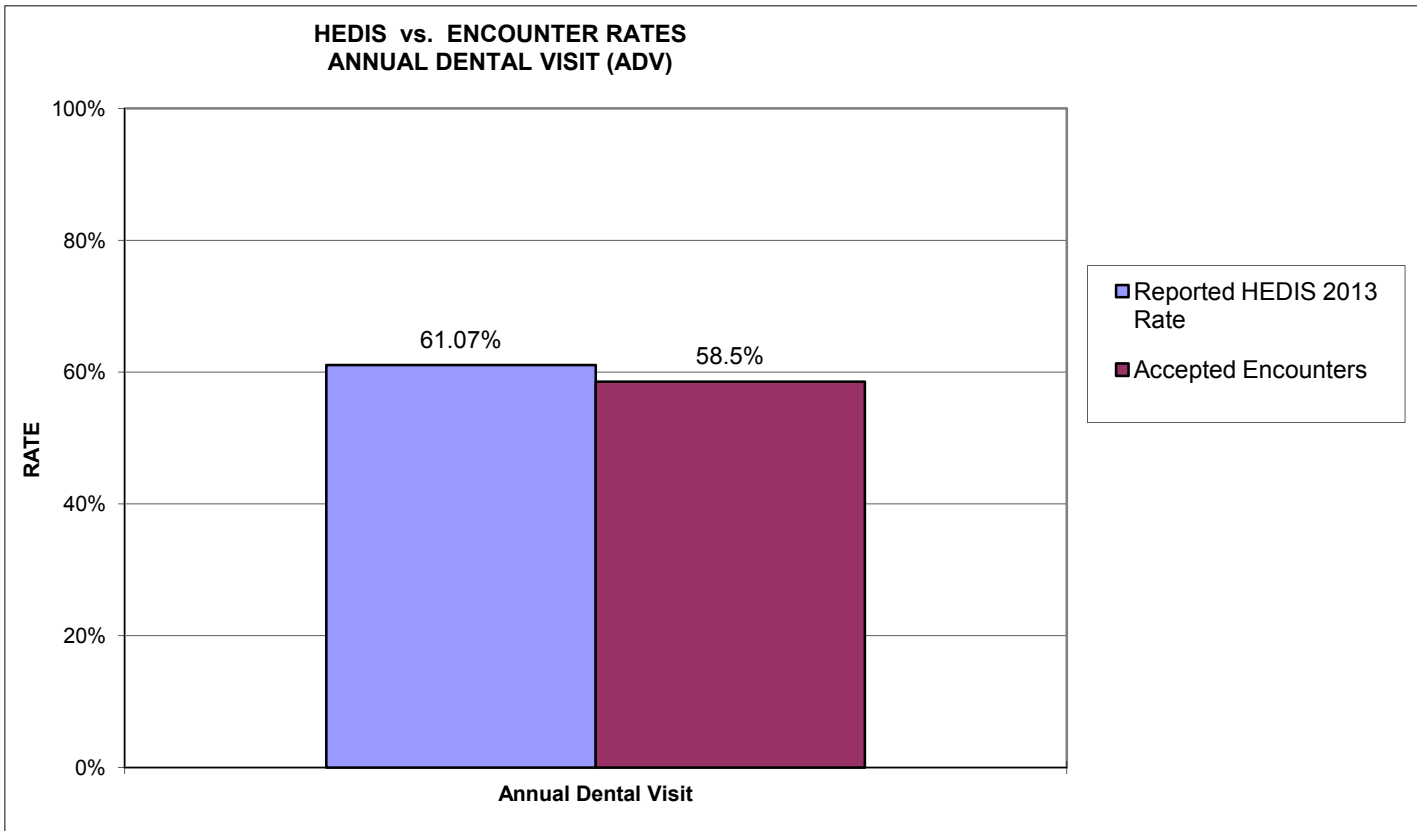
**CoventryCares of Kentucky**

**MCO HEDIS Rates - Plan Reported Versus Calculated Using Encounter Data**

**DATES OF SERVICE: 01JAN2012 - 31DEC2012**

**HEDIS<sup>®</sup> 2013 ANNUAL DENTAL VISIT (ADV)**

Measure	MCO HEDIS 2013 (MY 2012) <sup>1</sup>	MCO Encounter (MY 2012) <sup>2</sup>	Comparison of HEDIS to Encounter Rates <sup>3</sup>
Annual Dental Visit	61.07%	58.5%	ss
Denominator	96,495	97,637	
Numerator	58,926	57,163	



1-Rate reported for HEDIS 2013 by MCO.

2-Rate calculated from encounters submitted by MCO.

3-ss=statistically significant difference, ns=not statistically significant difference.

**NOTE:** Includes members who turned 2-21 years as of December 31 of the measurement year.

No more than a one month gap in enrollment during the measurement year

**ISSUE DATE:**

9-Jul-14

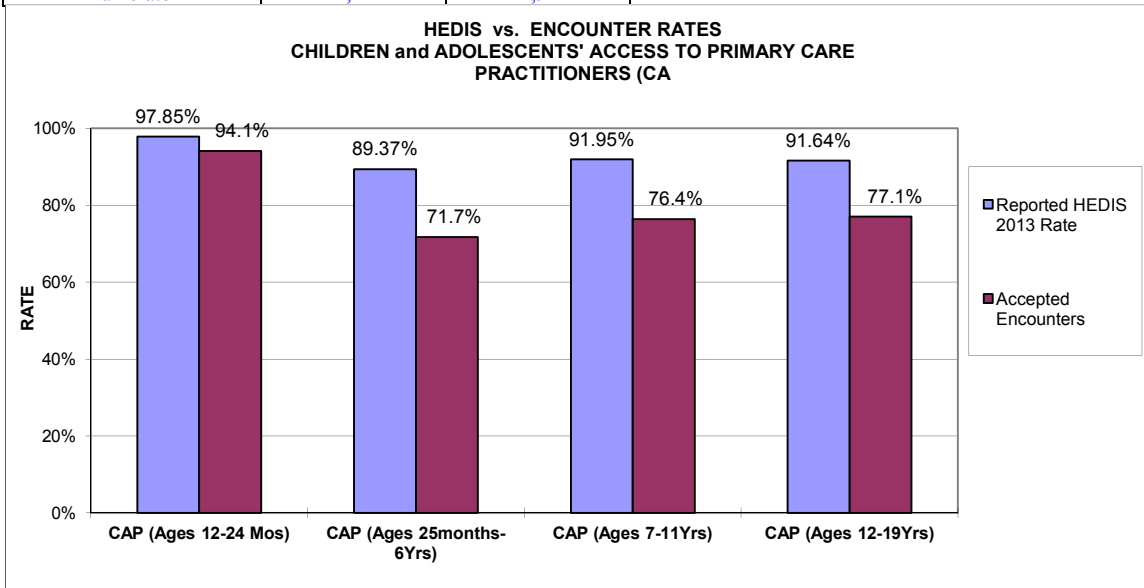
**Passport Health Plan**

**MCO HEDIS Rates - Plan Reported Versus Calculated Using Encounter Data**

**DATES OF SERVICE: 01JAN2012 - 31DEC2012**  
**HEDIS® 2013 CHILDREN and ADOLESCENTS' ACCESS TO PRIMARY CARE PRACTITIONERS (CAP)**

Measure	MCO HEDIS 2013 (MY 2012) <sup>1</sup>	MCO Encounter (MY 2012) <sup>2</sup>	Comparison of HEDIS to Encounter Rates <sup>3</sup>
CAP (Ages 12-24 Mos)	97.85%	94.1%	ss
CAP (Ages 25months-6Yrs)	89.37%	71.7%	ss
CAP (Ages 7-11Yrs)	91.95%	76.4%	ss
CAP (Ages 12-19Yrs)	91.64%	77.1%	ss

CAP (Ages 12-24 Mos)		
Denominator	7,172	7,389
Numerator	7,018	6,953
CAP (Ages 25M-6Yrs)		
Denominator	30,502	34,395
Numerator	27,261	24,662
CAP (Ages 7-11Yrs)		
Denominator	22,533	24,697
Numerator	20,720	18,871
CAP (Ages 12-19Yrs)		
Denominator	26,455	28,451
Numerator	24,244	21,922



1-Rate reported for HEDIS 2013 by MCO.  
 2-Rate calculated from encounters submitted by MCO.  
 3-ss=statistically significant difference, ns=not statistically significant difference.

**NOTE:** Age as of December 31 of the measurement year.  
 No more than a one month gap in enrollment during the measurement year

**ISSUE DATE:** 9-Jul-14

**Passport Health Plan**

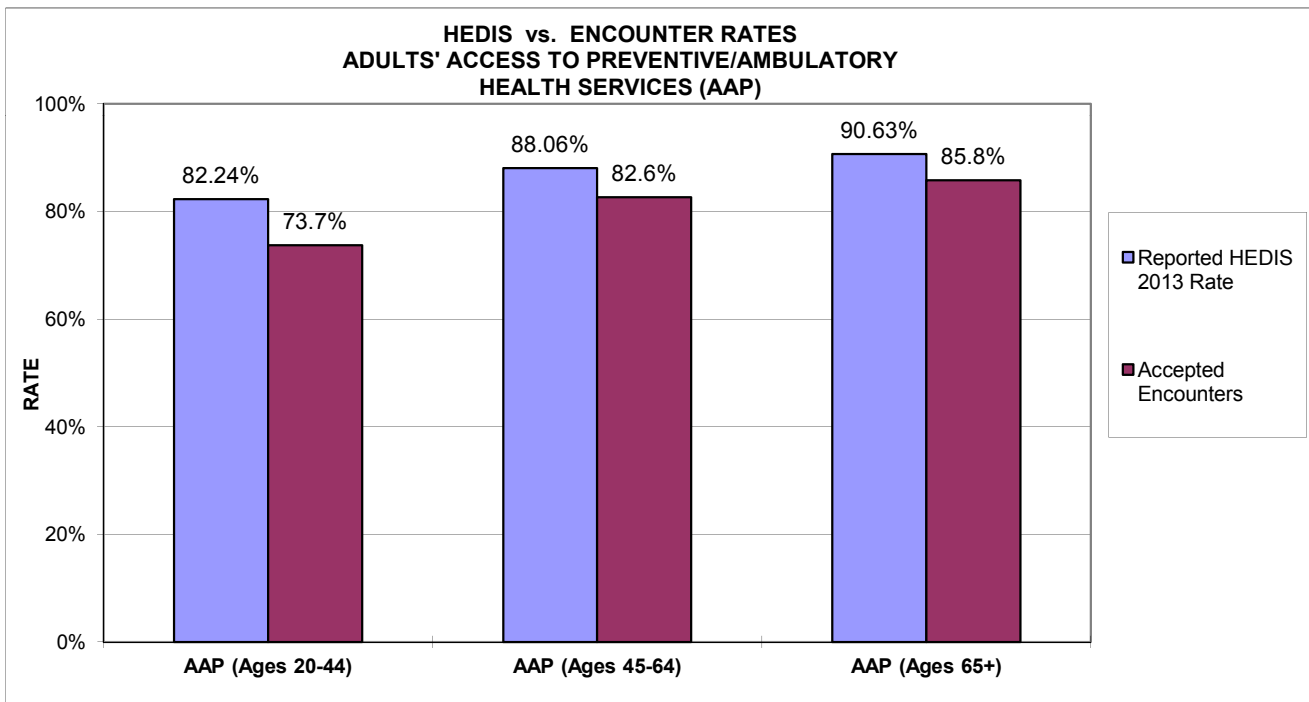
**MCO HEDIS Rates - Plan Reported Versus Calculated Using Encounter Data**

**DATES OF SERVICE: 01JAN2012 - 31DEC2012**

**HEDIS® 2013 ADULTS' ACCESS TO PREVENTIVE/AMBULATORY HEALTH SERVICES (AAP)**

Measure	MCO HEDIS 2013 (MY 2012) <sup>1</sup>	MCO Encounter (MY 2012) <sup>2</sup>	Comparison of HEDIS to Encounter Rates <sup>3</sup>
AAP (Ages 20-44)	82.24%	73.7%	ss
AAP (Ages 45-64)	88.06%	82.6%	ss
AAP (Ages 65+)	90.63%	85.8%	ss

AAP (Ages 20-44)		
Denominator	16,778	19,275
Numerator	14,281	14,208
AAP (Ages 45-64)		
Denominator	13,090	14,327
Numerator	11,870	11,839
AAP (Ages 65+)		
Denominator	5,206	5,578
Numerator	4,793	4,785



1-Rate reported for HEDIS 2013 by MCO.

2-Rate calculated from encounters submitted by MCO.

3-ss=statistically significant difference, ns=not statistically significant difference.

**NOTE:** Includes adults ages 20-65+ as of December 31 of the measurement year.

No more than a one month gap in enrollment during the measurement year

**ISSUE DATE:** 9-Jul-14

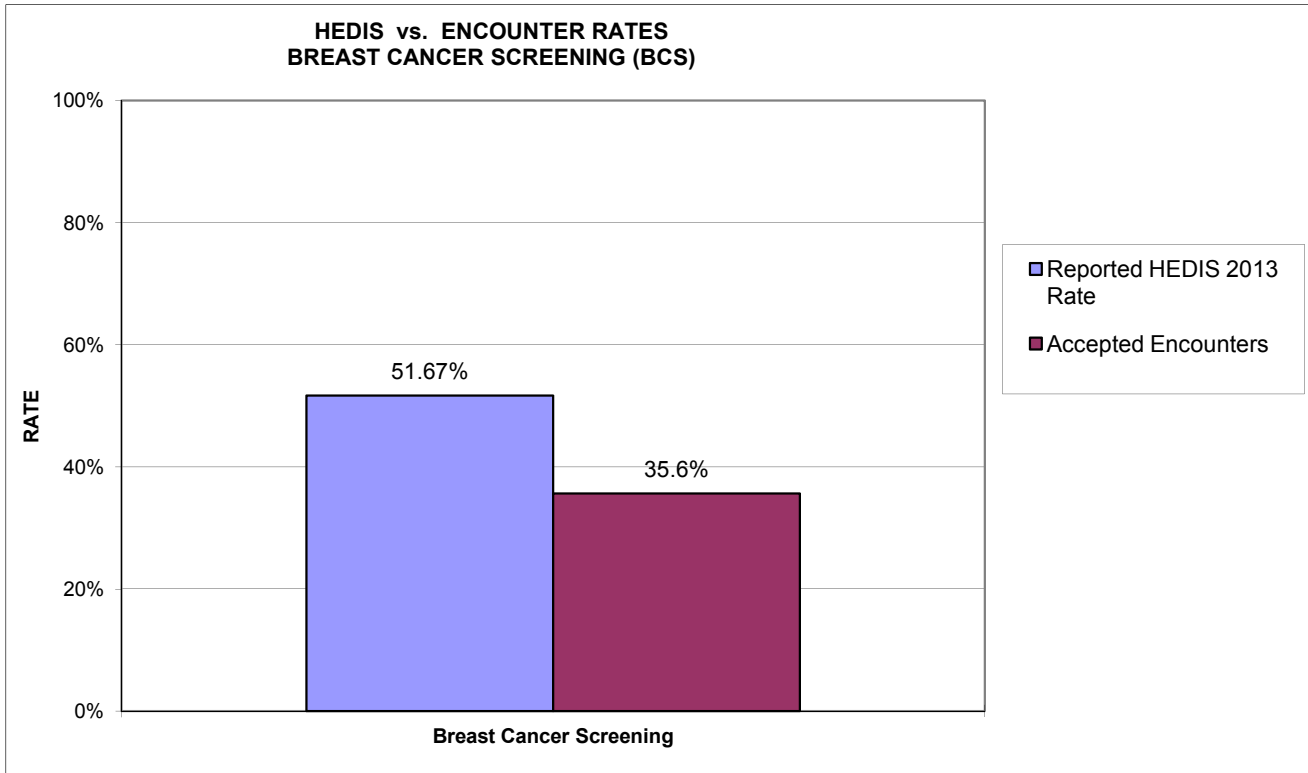
# Passport Health Plan

## MCO HEDIS Rates - Plan Reported Versus Calculated Using Encounter Data

**DATES OF SERVICE:** 01JAN2012 - 31DEC2012

### HEDIS® 2013 BREAST CANCER SCREENING (BCS)

Measure	MCO HEDIS 2013 (MY 2012) <sup>1</sup>	MCO Encounter (MY 2012) <sup>2</sup>	Comparison of HEDIS to Encounter Rates <sup>3</sup>
Breast Cancer Screening	51.67%	35.6%	ss
Denominator	8,969	9,347	
Numerator	4,634	3,332	



1-Rate reported for HEDIS 2013 by MCO.

2-Rate calculated from encounters submitted by MCO.

3-ss=statistically significant difference, ns=not statistically significant difference.

**NOTE:** Includes women ages 42-69 years as of December 31 of the measurement year.

No more than a one month gap in enrollment during the measurement year

**ISSUE DATE:**

9-Jul-14

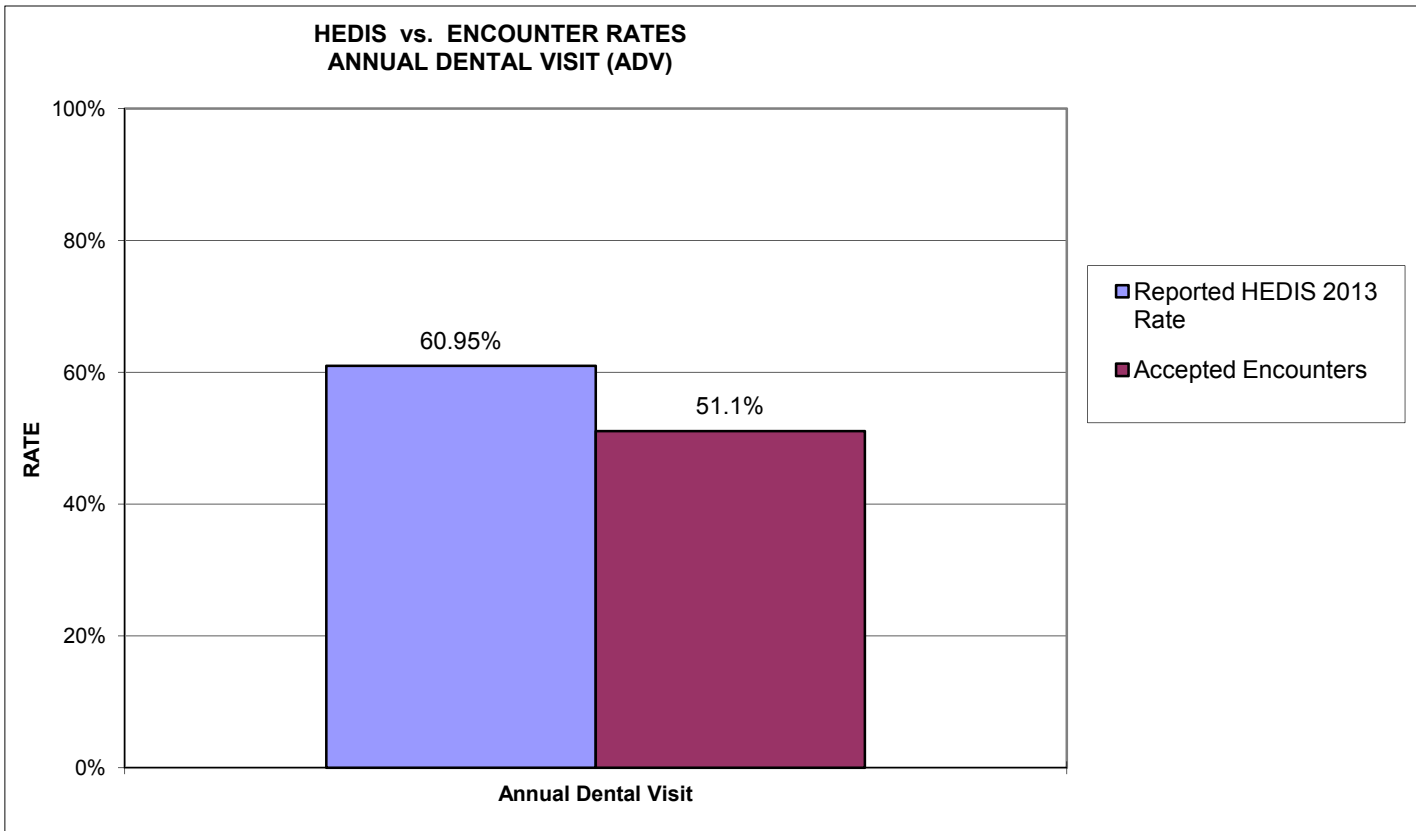
# Passport Health Plan

## MCO HEDIS Rates - Plan Reported Versus Calculated Using Encounter Data

**DATES OF SERVICE:** 01JAN2012 - 31DEC2012

**HEDIS® 2013 ANNUAL DENTAL VISIT (ADV)**

Measure	MCO HEDIS 2013 (MY 2012) <sup>1</sup>	MCO Encounter (MY 2012) <sup>2</sup>	Comparison of HEDIS to Encounter Rates <sup>3</sup>
Annual Dental Visit	60.95%	51.1%	ss
Denominator	90,746	102,030	
Numerator	55,310	52,110	



1-Rate reported for HEDIS 2013 by MCO.

2-Rate calculated from encounters submitted by MCO.

3-ss=statistically significant difference, ns=not statistically significant difference.

**NOTE:** Includes members who turned 2-21 years as of December 31 of the measurement year.

No more than a one month gap in enrollment during the measurement year

**ISSUE DATE:**

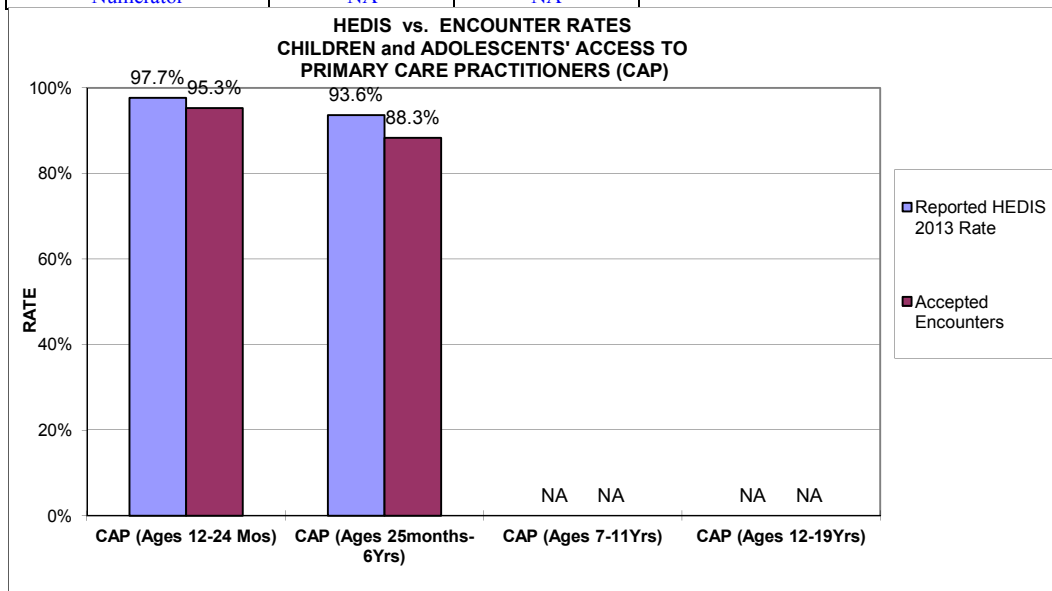
9-Jul-14

**WellCare of Kentucky Inc.  
MCO HEDIS Rates - Plan Reported Versus Calculated Using Encounter Data**

**DATES OF SERVICE: 01JAN2012 - 31DEC2012**  
**HEDIS® 2013 CHILDREN and ADOLESCENTS' ACCESS TO PRIMARY CARE PRACTITIONERS (CAP)**

Measure	MCO HEDIS 2013 (MY 2012) <sup>1</sup>	MCO Encounter (MY 2012) <sup>2</sup>	Comparison of HEDIS to Encounter Rates <sup>3</sup>
CAP (Ages 12-24 Mos)	97.7%	95.3%	ss
CAP (Ages 25months-6Yrs)	93.6%	88.3%	ss
CAP (Ages 7-11Yrs)	NA	NA	NA
CAP (Ages 12-19Yrs)	NA	NA	NA

CAP (Ages 12-24 Mos)		
Denominator	5,954	5,859
Numerator	5,818	5,581
CAP (Ages 25M-6Yrs)		
Denominator	23,990	23,524
Numerator	22,457	20,781
CAP (Ages 7-11Yrs)		
Denominator	NA	NA
Numerator	NA	NA
CAP (Ages 12-19Yrs)		
Denominator	NA	NA
Numerator	NA	NA



1-Rate reported for HEDIS 2013 by MCO.  
 2-Rate calculated from encounters submitted by MCO.  
 3-ss=statistically significant difference, ns=not statistically significant difference.  
 NA = Not Available.

**NOTE:** Age as of December 31 of the measurement year.  
 No more than a one month gap in enrollment during the measurement year

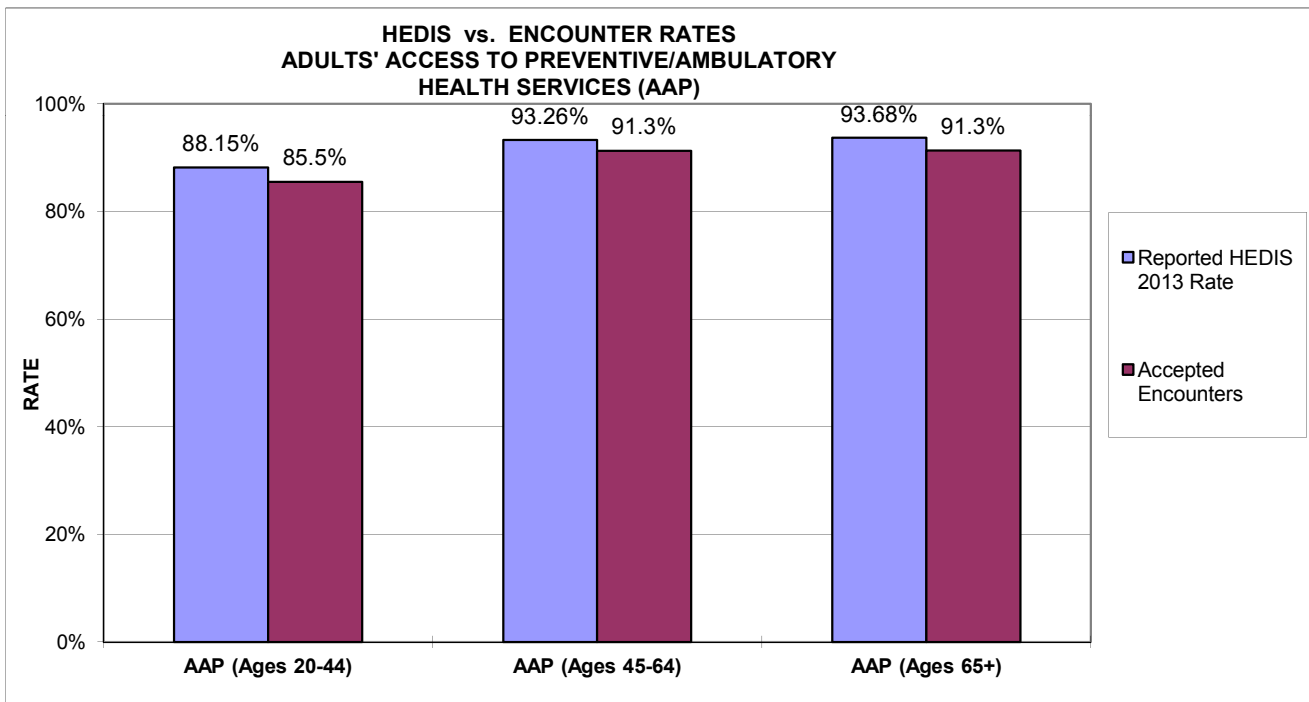
**ISSUE DATE:** 9-Jul-14

DATES OF SERVICE: 01JAN2012 - 31DEC2012

**HEDIS® 2013 ADULTS' ACCESS TO PREVENTIVE/AMBULATORY HEALTH SERVICES (AAP)**

Measure	MCO HEDIS 2013 (MY 2012) <sup>1</sup>	MCO Encounter (MY 2012) <sup>2</sup>	Comparison of HEDIS to Encounter Rates <sup>3</sup>
AAP (Ages 20-44)	88.15%	85.5%	ss
AAP (Ages 45-64)	93.26%	91.3%	ss
AAP (Ages 65+)	93.68%	91.3%	ss

AAP (Ages 20-44)		
Denominator	19,360	18,802
Numerator	17,065	16,075
AAP (Ages 45-64)		
Denominator	16,383	16,115
Numerator	15,279	14,706
AAP (Ages 65+)		
Denominator	6,250	6,034
Numerator	5,855	5,508



1-Rate reported for HEDIS 2013 by MCO.

2-Rate calculated from encounters submitted by MCO.

3-ss=statistically significant difference, ns=not statistically significant difference.

**NOTE:** Includes adults ages 20-65+ as of December 31 of the measurement year.

No more than a one month gap in enrollment during the measurement year

ISSUE DATE: 9-Jul-14

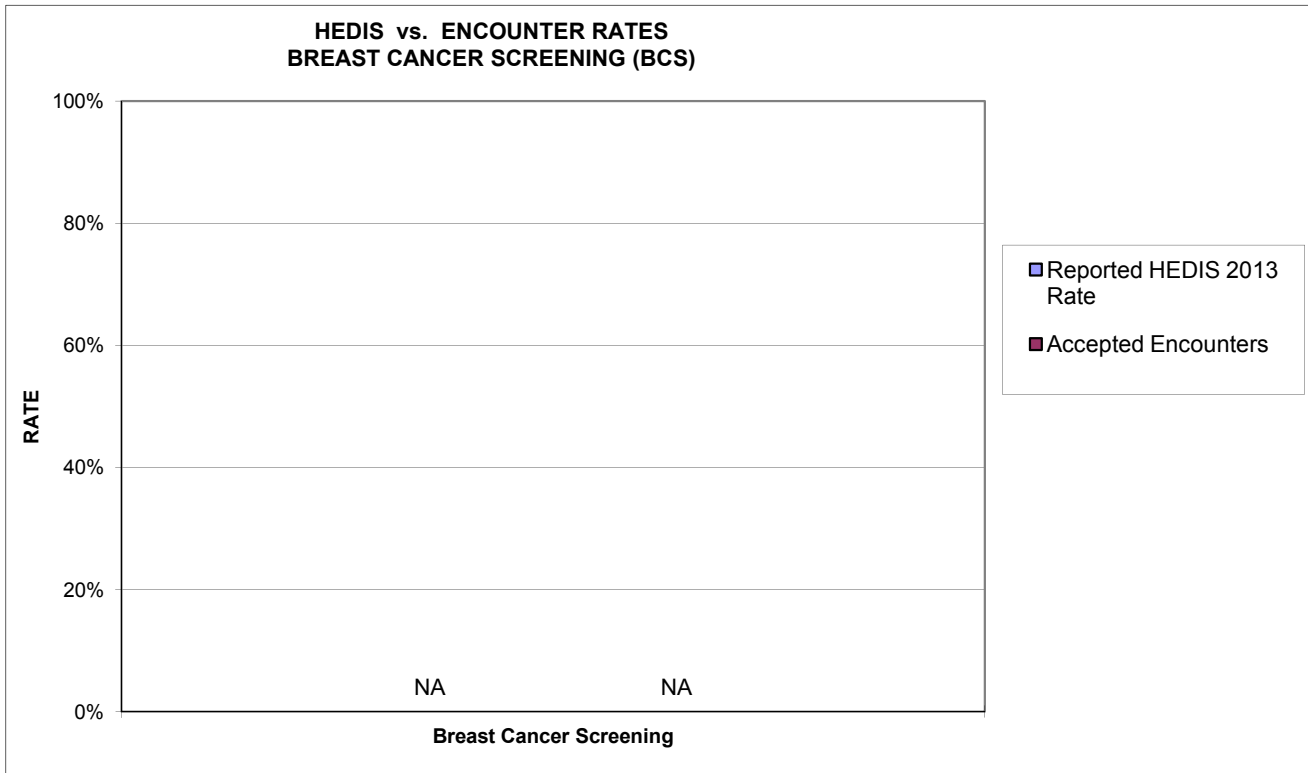
**WellCare of Kentucky Inc.**

**MCO HEDIS Rates - Plan Reported Versus Calculated Using Encounter Data**

**DATES OF SERVICE: 01JAN2012 - 31DEC2012**

**HEDIS® 2013 BREAST CANCER SCREENING (BCS)**

Measure	MCO HEDIS 2013 (MY 2012) <sup>1</sup>	MCO Encounter (MY 2012) <sup>2</sup>	Comparison of HEDIS to Encounter Rates <sup>3</sup>
Breast Cancer Screening	NA	NA	NA
Denominator	NA	NA	NA
Numerator	NA	NA	NA



1-Rate reported for HEDIS 2013 by MCO.

2-Rate calculated from encounters submitted by MCO.

3-ss=statistically significant difference, ns=not statistically significant difference.

NA = Not Available.

**NOTE:** Includes women ages 42-69 years as of December 31 of the measurement year.

No more than a one month gap in enrollment during the measurement year

**ISSUE DATE:**

9-Jul-14



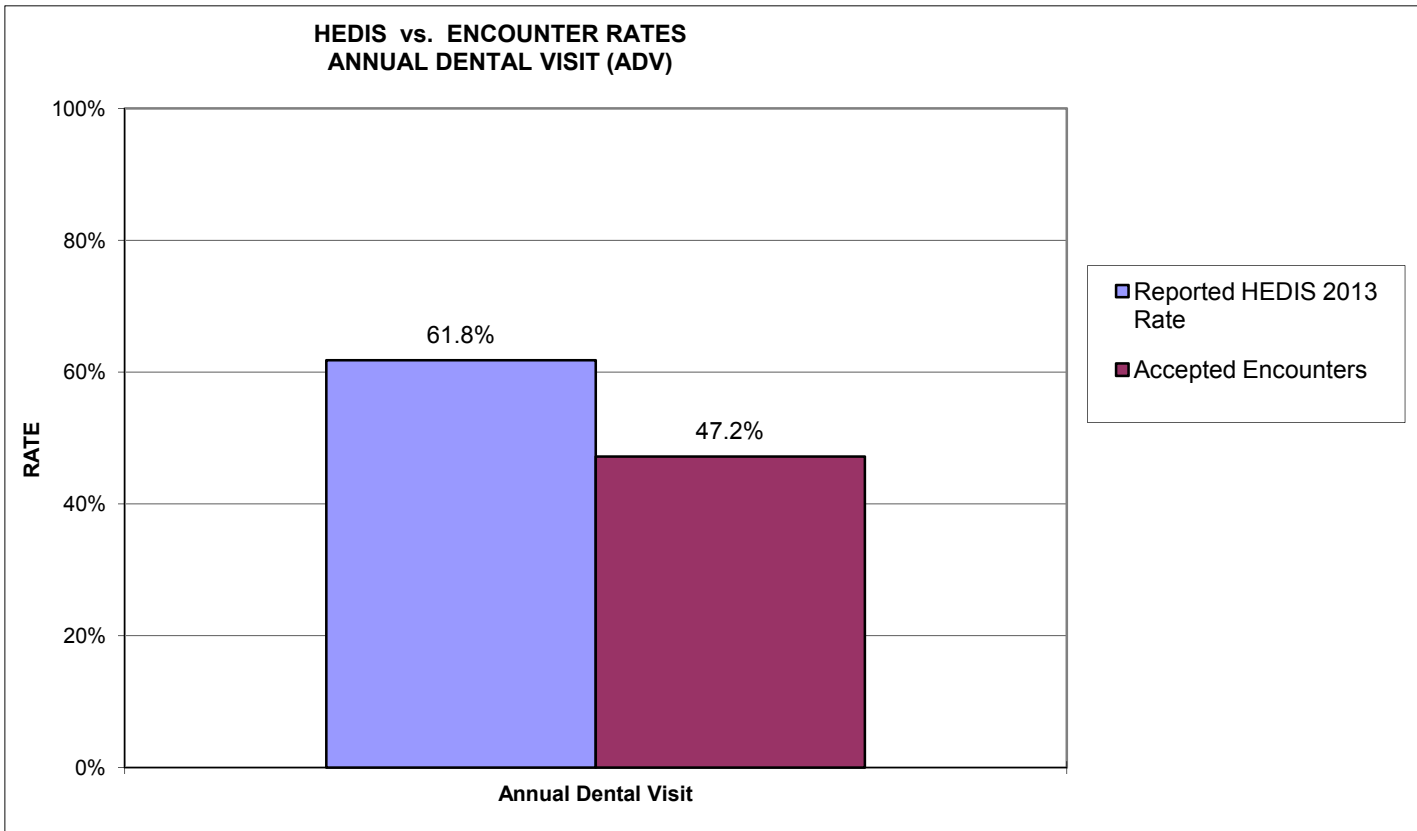
**WellCare of Kentucky Inc.**

**MCO HEDIS Rates - Plan Reported Versus Calculated Using Encounter Data**

**DATES OF SERVICE: 01JAN2012 - 31DEC2012**

**HEDIS® 2013 ANNUAL DENTAL VISIT (ADV)**

Measure	MCO HEDIS 2013 (MY 2012) <sup>1</sup>	MCO Encounter (MY 2012) <sup>2</sup>	Comparison of HEDIS to Encounter Rates <sup>3</sup>
Annual Dental Visit	61.8%	47.2%	ss
Denominator	74,286	72,922	
Numerator	45,900	34,409	



1-Rate reported for HEDIS 2013 by MCO.

2-Rate calculated from encounters submitted by MCO.

3-ss=statistically significant difference, ns=not statistically significant difference.

**NOTE:** Includes members who turned 2-21 years as of December 31 of the measurement year.

No more than a one month gap in enrollment during the measurement year

**ISSUE DATE:** 9-Jul-14



**Commonwealth of Kentucky**  
**Department for Medicaid Services**  
**Division of Program Quality & Outcomes**

**Web-Based Provider Directory Validation Study**  
**Summary Report**

***September 2014***

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## INTRODUCTION

As part of the newly founded Kentucky Managed Care system, validation of each Managed Care Organizations (MCO) web-based provider directory should be conducted by the external quality review organization (EQRO) to ensure information provided to members is consistent with the information that the MCOs report to the Kentucky Department for Medicaid Services.

In accordance with Code of Federal Regulations (CFR) 42(4) § 438.10 (f) (6i), managed care enrollees have the right to access a listing of all providers who participate in the managed care plan. This listing is to contain contact information for each participating provider, as well as other pertinent information useful to enrollees including: address, phone number, languages spoken other than English and provider's panel status. MCOs are required to keep their provider directory current and accurate. The web directory must contain information as required by statute, regulation and the Medicaid contract.

The Web-Based Provider Directory Validation Study is one of a variety of activities performed to ensure enrollees are being provided accurate information regarding the providers comprising the health plans' provider network. It is essential that enrollees have up to date and accurate information to enable them to contact their providers and schedule appointments that are timely and within easy access to their homes.

The objectives of this study were to determine the following:

- a) All providers included in the MCAPS submission for each MCO are displayed in the web-based provider directory.
- b) Provider information published in the MCOs' web directories are consistent with the information reported in the MCAPS and/or the provider network audit responses.

## METHODOLOGY

In May 2014, DMS sent IPRO four files containing each MCO's MCAPS submission for the most recent monthly provider data. The MCOs are CoventryCares of Kentucky, Passport Health Plan, WellCare of Kentucky and Humana CareSource. Anthem Blue Cross and Blue Shield had not submitted a MCAPS file by the time the study was initiated and was therefore excluded.

IPRO conducted a two-phase mailing to validate the accuracy of the MCAPS data submissions for PCPs and specialists participating with any of the four MCOs operating in Kentucky with a Medicaid product line. Survey responses were compared to information in the MCAPS and an error rate is computed for each data element that is validated. The resulting report is the *Validation of Managed Care Provider Network Submissions: Audit Report; September 2014*. For this audit, a random sample of 100 PCPs and 100 specialists was drawn for each plan, resulting in a total sample size of 800 providers. These providers received a survey by mail asking them to validate their information based on the MCAPS. For this web validation study, a random sample of 50% of providers who responded to the survey was drawn, but no more than 50 providers from each MCO, i.e. 25 PCPs and 25 specialists. For Passport Health Plan however, the high number of excluded<sup>1</sup> surveys meant that a full sample of 50 providers could not be drawn.

The response rate summary for the provider network survey and the final sample size for the web directory validation study by MCO are presented in **Table 1** below:

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<sup>1</sup> Exclusions included surveys that were undeliverable, provider was no longer at the location reported in the MCAPS or the provider no longer participates in the health plan's provider network.

**Table 1: Provider Network Survey Response Rates and Web Directory Validation Study Final Sample by MCO**

Plan	Provider Network Survey					Web Validation
	Initial Sample Size	Undeliverable Surveys	Adjusted Sample Size	Returns	Response Rate	Sample Size
CoventryCares of Kentucky	200	24	176	100	56.8%	50
Humana CareSource	200	25	175	102	58.3%	50
Passport Health Plan	200	55	145	81	55.9%	43*
WellCare of Kentucky	200	24	176	126	71.6%	50
<b>TOTAL</b>	<b>800</b>	<b>128</b>	<b>672</b>	<b>409</b>	<b>60.9%</b>	<b>193</b>
<b>ALL PCPs</b>	<b>400</b>	<b>61</b>	<b>339</b>	<b>204</b>	<b>60.2%</b>	<b>93</b>
<b>ALL Specialists</b>	<b>400</b>	<b>67</b>	<b>333</b>	<b>205</b>	<b>61.6%</b>	<b>100</b>

\*For Passport Health Plan, the web validation sample comprised of 18 PCPs and 25 Specialists.

For each survey that was included in the web validation sample, the reported provider information was validated against the corresponding MCO's web directory within one week to minimize the chance that any differences were due to real provider information changes over time. Web-based directories were searched using the sampled providers' names.

A Microsoft Access database was developed by IPRO, which presented MCAPS data and provider network survey responses side by side. If the information published in the MCOs' web directories matched either the MCAPS or the provider's survey response, the information was considered accurate.

Pertinent provider information that was validated includes:

- 1) Provider Name (Last Name, First Name)
- 2) Address (Address Line 1, Address Line 2, City, State, Zip Code, County)
- 3) Telephone Number
- 4) Primary Specialty
- 5) Provider Type (PCP or Specialist)
- 6) Panel Status (Open or Closed)
- 7) Languages Spoken by Provider and/or Staff

## Calculating Rates of Accuracy

The following accuracy rates were calculated:

- 1) **Rate of Providers Found in Web Directory** – This rate was calculated to identify the number of providers in the web validation sample that was found in the corresponding MCO’s web-based directory. Sampled providers were searched by their first and last name in the web-based directory; therefore, this rate is equal to the accuracy rate of providers’ names. It is defined as the number of providers in the validation sample that was found in the web directory, divided by the total number of providers in the validation sample.
- 2) **MCO Overall Accuracy Rate** – This rate identifies the number of providers in the validation sample that had accurate information when checked against the web-based directory. It is defined as the number of providers in the web validation sample that had accurate data reported for all the fields, divided by the total number of providers found in the web-based directory.
- 3) **MCO Accuracy Rate by Field** – This computes the accuracy rates (per field) reviewed. For each field, the rate is the number of providers in the web validation sample that had accurate data for a specific field, divided by the total number of providers found in the web-based directory.

## Web Validation of Undeliverable Provider Network Surveys

As a subanalysis, a random sample of 24 providers (3 PCPs and 3 specialists from each MCO) was drawn from the pool of undeliverable provider network surveys for the purpose of validating the addresses of these providers against the addresses published in the MCOs’ web directory.

There were three outcomes observed in this subanalysis:

1. The provider was found in the web directory with the same address reported in the MCAPS.
2. The provider was found in the web directory with a different address reported in the MCAPS.
3. The provider could not be found in the web directory.

The results of the subanalysis can be found in **Table 5**.

## RESULTS

As shown in **Table 2**, 86% of PCPs and 83% of specialists in the web validation sample were found in the web directories. Passport Health Plan had the lowest PCP match rate, where 14 PCPs (78%) were found in the web directories. CoventryCares of Kentucky had the lowest specialist match rate, where 16 (64%) of the sampled specialists were found in the web directory. **Appendix A** shows the full listing of sampled providers that were not found in the web directory by MCO.

**Table 2: Rate of Providers Found in Web Directory**

Providers Found in Web Directory	PCP					SPECIALISTS				
	Coventry	Humana	Passport	WellCare	TOTAL	Coventry	Humana	Passport	WellCare	TOTAL
Numerator	20	24	14	22	80	16	23	20	24	83
Denominator	25	25	18	25	93	25	25	25	25	100
Rate	80%	96%	78%	88%	86%	64%	92%	80%	96%	83%

**Table 3** shows each MCO's overall accuracy rate, which is the percentage of providers in the web validation sample that had consistent information reported for all fields between the web directories and the MCAPS/provider network survey. Note that the denominator has been adjusted for this rate to include only those providers that were found in the MCOs' web directories.

Overall, 85% of PCPs across all the plans and 84% of specialists had accurate information published in the web directories. Passport Health Plan had the lowest overall accuracy rate for PCPs and specialists: 71% of the PCPs had accurate information listed, while 75% of specialists had accurate information published in Passport Health Plan's web directory. WellCare of Kentucky had the highest accuracy rate for PCPs (91%) while CoventryCares of Kentucky had the highest accuracy rate for specialists (100%).

**Table 3: Overall Accuracy Rates by MCO**

Overall Accuracy Rate	PCP					SPECIALISTS				
	Coventry	Humana	Passport	WellCare	TOTAL	Coventry	Humana	Passport	WellCare	TOTAL
Numerator	17	21	10	20	68	16	20	15	19	70
Denominator	20	24	14	22	80	16	23	20	24	83
<i>Rate</i>	<i>85%</i>	<i>88%</i>	<i>71%</i>	<i>91%</i>	<i>85%</i>	<i>100%</i>	<i>87%</i>	<i>75%</i>	<i>79%</i>	<i>84%</i>

**Table 4** shows the rate of accuracy for each field that was validated against the web directory. **Appendix B** is a listing of providers that were found to have inconsistent information listed between the web directories and the MCAPS and/or the provider network survey by field. The results of the validation of each field are as follows:

VALIDATION FIELD	FINDINGS
<b>Site Address</b>	<p>Overall, high percentages of sampled PCPs and specialists across all the MCOs had the same address published in the web directories as reported in the MCAPS or the provider network survey. For those PCPs that were listed in the web directories, the accuracy rate of their addresses was 96%. WellCare of Kentucky and Humana CareSource both had accuracy rates of 100%, followed by Passport Health Plan with 93% and CoventryCares of Kentucky with 90% accuracy rate.</p> <p>For specialists' addresses, the vast majority of addresses for CoventryCares of Kentucky (100%) and Passport Health Plan (100%), Humana CareSource (96%) and WellCare of Kentucky (92%) were accurate.</p>
<b>Telephone Number</b>	<p>High percentages of sampled PCPs (95%) and specialists (93%) across all the MCOs had consistent telephone numbers listed in the web directories and the MCAPS and/or the provider network survey. Humana had an accuracy rate of 100% for PCPs and specialists. Passport Health Plan had the lowest accuracy rate: 86% and 80% for PCPs and specialists, respectively.</p>
<b>Primary Specialty</b>	<p>All PCPs and specialists in the validation sample had the same primary specialty listed in the web directories as the MCAPS and/or the provider network survey.</p>
<b>Provider Type</b>	<p>Only one specialist in the validation sample from Passport Health Plan had a discrepant Provider Type reported between the web directories and the MCAPS and/or the provider network survey.</p>
<b>Panel Status</b>	<p>Ninety-six percent of the PCPs from the validation sample had the same panel status information published in the web directories as the MCAPS and/or the provider network survey. CoventryCares of Kentucky and Humana CareSource had 100% accuracy rates, followed by Passport Health Plan with 93% and WellCare of Kentucky with 91%. Please note that panel status was not validated for</p>

specialists, since the MCAPS data requires this field for PCPs only.

**Languages spoken - Spanish** Nearly all the PCPs (98%) and specialists (96%) in the validation sample who had Spanish listed as one of the other languages spoken in the MCAPS or the provider network survey had consistent information published in the web directories.

**Languages spoken - Other** High percentages of PCPs (96%) and specialists (95%) in the validation sample that had other spoken languages listed in the MCAPS or the provider network survey had consistent information published in the web directories.

**Table 4: Accuracy Rates by Field**

Accuracy Rate - Site Address	PCP					SPECIALISTS				
	Coventry	Humana	Passport	WellCare	TOTAL	Coventry	Humana	Passport	WellCare	TOTAL
Numerator	18	24	13	22	77	16	22	20	22	80
Denominator	20	24	14	22	80	16	23	20	24	83
<i>Rate</i>	<i>90%</i>	<i>100%</i>	<i>93%</i>	<i>100%</i>	<i>96%</i>	<i>100%</i>	<i>96%</i>	<i>100%</i>	<i>92%</i>	<i>96%</i>
<b>Accuracy Rate - Telephone Number</b>										
Numerator	18	24	12	22	76	16	23	16	22	77
Denominator	20	24	14	22	80	16	23	20	24	83
<i>Rate</i>	<i>90%</i>	<i>100%</i>	<i>86%</i>	<i>100%</i>	<i>95%</i>	<i>100%</i>	<i>100%</i>	<i>80%</i>	<i>92%</i>	<i>93%</i>
<b>Accuracy Rate - Primary Specialty</b>										
Numerator	20	24	14	22	80	16	23	20	24	83
Denominator	20	24	14	22	80	16	23	20	24	83
<i>Rate</i>	<i>100%</i>	<i>100%</i>	<i>100%</i>	<i>100%</i>	<i>100%</i>	<i>100%</i>	<i>100%</i>	<i>100%</i>	<i>100%</i>	<i>100%</i>
<b>Accuracy Rate - Provider Type</b>										
Numerator	20	24	14	22	80	16	23	19	24	82
Denominator	20	24	14	22	80	16	23	20	24	83
<i>Rate</i>	<i>100%</i>	<i>100%</i>	<i>100%</i>	<i>100%</i>	<i>100%</i>	<i>100%</i>	<i>100%</i>	<i>95%</i>	<i>100%</i>	<i>99%</i>
<b>Accuracy Rate - Panel Status</b>										
Numerator	20	24	13	20	77	N/A	N/A	N/A	N/A	N/A
Denominator	20	24	14	22	80	N/A	N/A	N/A	N/A	N/A
<i>Rate</i>	<i>100%</i>	<i>100%</i>	<i>93%</i>	<i>91%</i>	<i>96%</i>	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>
<b>Accuracy Rate - Spanish</b>										
Numerator	19	24	13	22	78	16	21	20	23	80
Denominator	20	24	14	22	80	16	23	20	24	83
<i>Rate</i>	<i>95%</i>	<i>100%</i>	<i>93%</i>	<i>100%</i>	<i>98%</i>	<i>100%</i>	<i>91%</i>	<i>100%</i>	<i>96%</i>	<i>96%</i>
<b>Accuracy Rate - Other Languages</b>										
Numerator	20	21	14	22	77	16	22	20	21	79
Denominator	20	24	14	22	80	16	23	20	24	83
<i>Rate</i>	<i>100%</i>	<i>88%</i>	<i>100%</i>	<i>100%</i>	<i>96%</i>	<i>100%</i>	<i>96%</i>	<i>100%</i>	<i>88%</i>	<i>95%</i>



**Table 5** displays the results of the subanalysis, which validated the names and addresses of providers, whose surveys were returned as undeliverable, against the information published in the web directories. According to **Table 1**, 128 out of the 800 or 16% of the surveys mailed for the provider network audit were returned as undeliverable. For this subanalysis, 24 were sampled from this pool of undeliverable surveys.

Four of the 24 (17%) providers in the sample were found in the web directory listed with a different address, and 8 of the 24 (33%) providers could not be found in the web directory. But the most notable result in this subanalysis is the fact that 12 of the 24 (50%) were “undeliverables”, i.e. providers with erroneous addresses, had the same address published in the web directories. The MCAPS data is from the May 2014 submission and the web validation of the undeliverable survey was in September 2014, therefore, there is clearly a substantial delay between the time that the provider changes location, for example, and the time that this information is received by the MCOs and subsequently reflected in the web directories.

The full listing of the 24 sampled undeliverable surveys can be found in **Appendix C**.

**Table 5: Web Validation of Undeliverable Provider Network Surveys**

Plan Name	In web directory - same address		In web directory - different address		Not found in web directory		Total Sample
	Count	Percentage	Count	Percentage	Count	Percentage	
Coventry	3	50%	3	50%	0	0%	6
Humana	4	67%	0	0%	2	33%	6
Passport	0	0%	1	17%	5	83%	6
WellCare	5	83%	0	0%	1	17%	6
<b>Validation Outcome Total</b>	<b>12</b>	<b>50%</b>	<b>4</b>	<b>17%</b>	<b>8</b>	<b>33%</b>	<b>24</b>

## LIMITATIONS

1. The validation study sample only includes providers that responded to the Provider Network Survey, and therefore does not take into account the entire population of providers in the MCAPS.
2. The validation study considers the provider information “accurate” if the information listed in the web directory matches either the MCAPS dataset or the provider network survey, which means that the accuracy rates may be slightly inflated.
3. The methodology mentioned above also means that there is no measure of the rate of accuracy of the web directories with respect to the MCAPS and the provider network survey separately.
4. The small number of providers in the validation sample means that the rates should be interpreted with caution.

## RECOMMENDATIONS

Based on the findings of this validation study, IPRO recommends:

### DMS:

1. Follow-up with MCOS to ensure that any inaccuracies in provider information from this validation study and the provider network survey are corrected and those corrections are reflected in the MCAPS data and the web directories.
2. Work with MCOs to enhance the accuracy and completion of critical fields in the MCAPS, especially phone number, address, and languages spoken.
3. Work with MCOs to enhance the accuracy of the web directories, and to emphasize the importance of ensuring

that the members have access to the most up to date provider information online.

IPRO:

1. Create a measure that would indicate whether the web directory information is more consistent with the MCAPS or the provider network survey. Since the provider network survey provides us with the most up to date information on these providers, if it is observed that the web directory is more consistent with the provider network survey responses than the MCAPS, it is a positive indication that the web directories are kept up to date, even more so than the data source of the MCAPS. Conversely, if we observe that the web directory information is more consistent with the MCAPS, it is an indication that the MCOs have to improve on keeping the web directories and other systems updated with the most current information on their provider network.
2. Increase the sample for the web validation of undeliverable provider surveys (subanalysis) to gain a better estimate of how efficiently any change in provider information, specifically with regard to site address, is being reflected in the web directories.

## APPENDIX A: LISTING OF SAMPLED PROVIDERS NOT FOUND IN THE MCO WEB-BASED DIRECTORIES

### CoventryCares of Kentucky

PlanName	Prov Type	NPI	NAME	ADDRESS LINE 1	ADDRESS LINE 2	CITY	STATE	ZIP CODE	PHONE NUMBER	SPECIALTY
Coventry	PCP	1487658456	AARON, PHILLIP	902 WESTLAKE DR	STE 101	COLUMBIA	KY	42728	(270) 384-0451	Family Practitioner
Coventry	PCP	1003838707	FINNEY, PATRICK	1532 LONE OAK RD	STE G10	PADUCAH	KY	42003	(270) 441-0021	Internist
Coventry	PCP	1346224995	PATEL, JITENDRA	723 8TH ST		PORTSMOUTH	OH	45662	(740) 353-5306	Family Practitioner
Coventry	PCP	1770527178	KIRKENDALL, ERIC	3333 BURNET AVE	HOSPITAL MEDICINE ML 9016	CINCINNATI	OH	45229	(513) 803-8092	General Pediatrician
Coventry	PCP	1851613228	LAWSON, TERRY	57 HOGUE RD		PINE KNOT	KY	42635	(606) 376-7212	Nurse Practitioner (Other)
<b>TOTAL</b>										<b>5</b>
Coventry	Specialist	1366547127	ASLAM, MOHAMMAD	222 MEDICAL CIR		MOREHEAD	KY	40351	(606) 783-6500	Anesthesiologist
Coventry	Specialist	1356364079	SOTINGEANU, DAN	1792 ALYSHEBA WAY	STE 150	LEXINGTON	KY	40509	(859) 335-9041	Emergency Medicine Practitioner
Coventry	Specialist	1841400645	KHALIL, CHEBEL	4623 WESLEY AVE	STE N	CINCINNATI	OH	45212	(513) 861-0800	Internist
Coventry	Specialist	1396959755	NIJMEH, RUBA	457 SHAWNEE LN		CHILlicothe	OH	45601	(740) 774-4340	Internist
Coventry	Specialist	1932109964	RADIX, LISA	210A BURLEY AVE		HOPKINSVILLE	KY	42240	(270) 899-0228	Nephrologist
Coventry	Specialist	1245353812	STOOPS, MARILYN M	3333 BURNET AVE	PED GENERAL & THORACIC SURG ML 2023	CINCINNATI	OH	45229	(513) 636-4371	Nurse Practitioner (Other)
Coventry	Specialist	1437400405	WOOTEN, GABY	3333 BURNET AVE	PULMONARY TCC ML 11024	CINCINNATI	OH	45229	(513) 803-0375	Nurse Practitioner (Other)
Coventry	Specialist	1346244860	GOLDWIN, RICHARD	530 S JACKSON ST	STE C07	LOUISVILLE	KY	40202	(502) 852-5875	Radiologist
Coventry	Specialist	1396733994	HUG, KATHERINE	10550 MONTGOMERY RD	STE 16	CINCINNATI	OH	45242	(513) 745-1540	Radiologist
<b>TOTAL</b>										<b>9</b>

### Humana CareSource

PlanName	Prov Type	NPI	NAME	ADDRESS LINE 1	ADDRESS LINE 2	CITY	STATE	ZIP CODE	PHONE NUMBER	SPECIALTY
Humana	PCP	1952391724	MURAD, UMAR	270 1ST ST		CHAVIES	KY	41727	(606) 487-8188	General Internist
<b>TOTAL</b>										<b>1</b>
Humana	Specialist	1740403674	CARRELL, MARY	1532 LONE OAK RD		PADUCAH	KY	42003	(270) 538-5700	Nurse Practitioner (Other)
Humana	Specialist	1497752612	MCHENDRIX, ROBERT	3126 DIXIE HWY STE 10		ERLANGER	KY	41018	(859) 331-4777	Podiatrist
<b>TOTAL</b>										<b>2</b>

### Passport Health Plan

PlanName	Prov Type	NPI	NAME	ADDRESS LINE 1	ADDRESS LINE 2	CITY	STATE	ZIP CODE	PHONE NUMBER	SPECIALTY
Passport	PCP	1801898440	CLARK, ALICIA	518 W GUM ST		MARION	KY	42064	(270) 965-5238	Family Nurse Practitioner
Passport	PCP	1952412454	WEAVER, ANTHONY	222 MEDICAL CIR		MOREHEAD	KY	40351	(606) 785-0240	General Practitioner
Passport	PCP	1447520853	EVANS, JEANINE	1700 CANTON ST		HOPKINSVILLE	KY	42240	(270) 886-9888	Nurse Practitioner (Other)
Passport	PCP	1497749949	MATERNOWSKI, AMY	1700 CANTON ST	CHRISTIAN COUNTY HEALTH DEPT	HOPKINSVILLE	KY	42240	(270) 886-9888	Nurse Practitioner (Other)
<b>TOTAL</b>										<b>4</b>
Passport	Specialist	1609858612	DOLAN, DAMIAN	1 MEDICAL VILLAGE DR		EDGEWOOD	KY	41017	(859) 341-7246	Anesthesiologist
Passport	Specialist	1972500361	KING, JEFFREY	110 29TH AVE N		NASHVILLE	TN	37203	(615) 327-4304	Anesthesiologist
Passport	Specialist	1992852289	NORDIN, KIMBERLY	917 BROADWAY		PAINTSVILLE	KY	41240	(606) 788-0433	Optometrist
Passport	Specialist	1912945031	MIMMS, WILLIAM	740 N LIMESTONE		LEXINGTON	KY	40508	(859) 323-0295	Otologist, Laryngologist, Rhinologist
Passport	Specialist	1609873579	LYDON, ERIC	1311 N DIXIE HWY		ELIZABETHTOWN	KY	42701	(270) 360-0419	Psychiatrist
<b>TOTAL</b>										<b>5</b>

## WellCare of Kentucky

PlanName	Prov Type	NPI	NAME	ADDRESS LINE 1	ADDRESS LINE 2	CITY	STATE	ZIP CODE	PHONE NUMBER	SPECIALTY
WellCare	PCP	1083617062	CAROTHERS, BECKY	230 E BROADWAY		LOUISVILLE	KY	40202	(502) 629-8901	General Pediatrician
WellCare	PCP	1326034950	MARTIN, LYNETTE	2200 E PARRISH AVE	STE 101	OWENSBORO	KY	42303	(270) 683-3232	General Pediatrician
WellCare	PCP	1881781623	MANNING, BRANDI	609 N CAROL MALONE BLVD		GRAYSON	KY	41143	(606) 474-7892	Physician Assistant
<b>TOTAL</b>										<b>3</b>
WellCare	Specialist	1336192467	GUION, ANGELA	1401 MADISON AVE		COVINGTON	KY	41011	(859) 655-6100	Certified Clinical Social Worker
<b>TOTAL</b>										<b>1</b>

**APPENDIX B: LISTING OF PROVIDERS WITH INCONSISTENT INFORMATION IN THE MCAPS/PROVIDER NETWORK SURVEY AND THE WEB-BASED PROVIDER DIRECTORIES**

**1) SITE ADDRESS**

**CoventryCares of Kentucky**

PlanName	Prov Type	NPI	Name	MCAPS Address	Survey Address	Web Address
Coventry	PCP	1477670164	KASTNER, JASON	306 W LOCUST ST, LAFAYETTE, TN, 37083	306 W LOCUST ST, LAFAYETTE, TN, 37083	128 RAYMOND HIRSCH PKWAY, SUITE 1, WHITE HOUSE, TN, 37188
Coventry	PCP	1508119231	SCRIBNER, JAMIIN	19 ABES PLZ, LIBERTY, KY, 42539	19 ABES PLZ, LIBERTY, KY, 42539	107 METKER TRL, SUITE A, STANFORD, KY, 40484
<b>TOTAL</b>						<b>2</b>

**Humana CareSource**

PlanName	Prov Type	NPI	Name	MCAPS Address	Survey Address	Web Address
Humana	Specialist	1023345584	EMBRY, BRANDON	404 SHOPPERS DR, WINCHESTER, KY, 40391	404 SHOPPERS DR, WINCHESTER, KY, 40391	318 HIGHLAND PARK DRIVE, RICHMOND, KY, 40475
<b>TOTAL</b>						<b>1</b>

**Passport Health Plan**

PlanName	Prov Type	NPI	Name	MCAPS Address	Survey Address	Web Address
Passport	PCP	1790068849	GEORGE, JENNIFER	740 N LIMESTONE, LEXINGTON, KY, 40508	740 N LIMESTONE, LEXINGTON, KY, 40536	740 S LIMESTONE, LEXINGTON, KY, 40536
<b>TOTAL</b>						<b>1</b>

**WellCare of Kentucky**

PlanName	Prov Type	NPI	Name	MCAPS Address	Survey Address	Web Address
WellCare	Specialist	1760436711	GREENHILL, WILLIAM	7777 YANKEE ROAD, CINCINNATI CHILDREN'S LIBERTY CAMPUS, LIBERTY TOWNSHIP, OH, 45044	7777 YANKEE ROAD, CINCINNATI CHILDREN'S LIBERTY CAMPUS, LIBERTY TOWNSHIP, OH, 45044	3333 BURNET AVE, CINCINNATI, OH, 45229
WellCare	Specialist	1548254832	WOLFF, THOMAS	3900 KRESGE WAY STE 43, LOUISVILLE, KY, 40207	225 ABRAHAM FLEXNER WAY, #708, LOUISVILLE, KY, 40207	225 ABRAHAM FLEXNER WAY, SUITE 700, LOUISVILLE, KY, 40202
<b>TOTAL</b>						<b>2</b>

## 2) TELEPHONE NUMBER

### CoventryCares of Kentucky

PlanName	Prov Type	NPI	Name	MCAPS Phone	Survey Phone	Web Phone
Coventry	PCP	1477670164	KASTNER, JASON	(615) 688-7012		(615) 672-8118
Coventry	PCP	1508119231	SCRIBNER, JAMIN	(606) 787-0014		(606) 365-8338
<b>TOTAL</b>						<b>2</b>

### Passport Health Plan

PlanName	Prov Type	NPI	Name	MCAPS Phone	Survey Phone	Web Phone
Passport	PCP	1669772596	CARIC, MARY	(606) 738-5155		(606) 784-3771
Passport	PCP	1790068849	GEORGE, JENNIFER	(859) 257-5536	(859) 323-5643	(859) 323-5404
<b>TOTAL</b>						<b>2</b>
Passport	Specialist	1265695225	BREES, CAROL	(502) 852-1513	(502) 644-0406	(502) 271-5999
Passport	Specialist	1649269226	SAEED, ZAHID	(859) 334-9632		(859) 331-6466
Passport	Specialist	1740363324	MANIS, ISAAC	(859) 323-6021		(859) 323-1691
Passport	Specialist	1427022615	THOMPSON, SHARON	(502) 429-3630		(502) 429-3500
<b>TOTAL</b>						<b>4</b>

### WellCare of Kentucky

PlanName	Prov Type	NPI	Name	MCAPS Phone	Survey Phone	Web Phone
WellCare	Specialist	1760436711	GREENHILL, WILLIAM	(513) 803-9600		(513) 636-4641
WellCare	Specialist	1871693069	VAN SICKELS, JOSEPH	(859) 323-6357		(859) 323-9707
<b>TOTAL</b>						<b>2</b>

## 3) PROVIDER TYPE

**Passport Health Plan**

PlanName	NPI	FullName	MCAPS Primary Specialty	Survey Primary Specialty	Web Primary Specialty	MCAPS Prov Type	Survey Prov Type	Web Prov Type
Passport	1912056318	SIDDIQI, SIRAJ	General Internist			Specialist		PCP
<b>TOTAL</b>								<b>1</b>

**4) PANEL STATUS**

**Passport Health Plan**

PlanName	Prov Type	NPI	Name	MCAPS Panel	Survey Panel	Web Panel
Passport	PCP	1427142652	COHEN, SANDA	Open		Closed
<b>TOTAL</b>						<b>1</b>

**WellCare of Kentucky**

PlanName	Prov Type	NPI	Name	MCAPS Panel	Survey Panel	Web Panel
WellCare	PCP	1942208038	PAYTON, SUSAN	Open		Closed
WellCare	PCP	1750483822	TURNBO, JAMES	Closed		Open
<b>TOTAL</b>						<b>2</b>

**5) LANGUAGE SPOKEN: SPANISH**

**CoventryCares of Kentucky**

PlanName	Prov Type	NPI	Name	MCAPS Spanish	Survey Spanish	Web Spanish
Coventry	PCP	1457589079	MAYS, ADRIENNE	No		Yes
<b>TOTAL</b>						<b>1</b>

**Humana CareSource**

PlanName	Prov Type	NPI	Name	MCAPS Spanish	Survey Spanish	Web Spanish
Humana	Specialist	1528005865	AARON, JANNICE		Yes	No
Humana	Specialist	1336243971	PETRUCCI, LIDO L.		Yes	No
<b>TOTAL</b>						<b>2</b>

**Passport Health Plan**

PlanName	Prov Type	NPI	Name	MCAPS Spanish	Survey Spanish	Web Spanish
Passport	PCP	1891925004	RENFROW, TERESA		No	Yes
<b>TOTAL</b>						<b>1</b>

**WellCare of Kentucky**

PlanName	Prov Type	NPI	Name	MCAPS Spanish	Survey Spanish	Web Spanish
WellCare	Specialist	1871693069	VAN SICKELS, JOSEPH	Yes		No
<b>TOTAL</b>						<b>1</b>

LANGUAGE SPOKEN: OTHER

**Humana CareSource**

PlanName	Prov Type	NPI	FullName	MCAPS Lang 1	MCAPS Lang 2	MCAPS Lang 3	MCAPS Lang 4	Survey Lang 1	Survey Lang 2	Survey Lang 3	Survey Lang 4	Web Lang 1	Web Lang 2	Web Lang 3	Web Lang 4
Humana	PCP	1558371427	ATIENZA, MARIA					Tagalog							
Humana	PCP	1710092424	RIZEA, ALINA					Spanish	French	Romanian					
Humana	PCP	1144211327	VON LUHRTE, TOMMY					German							

**TOTAL 3**

Humana	Specialist	1336243971	PETRUCCI, LIDO L.					Spanish	Italian						
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**TOTAL 1**

**WellCare of Kentucky**

PlanName	PCP_SPEC	NPI	FullName	MCAPS Lang 1	MCAPS Lang 2	MCAPS Lang 3	MCAPS Lang 4	Survey Lang 1	Survey Lang 2	Survey Lang 3	Survey Lang 4	Web Lang 1	Web Lang 2	Web Lang 3	Web Lang 4
WellCare	Specialist	1770529810	SORIANO, LIBERACION					Filipino							
WellCare	Specialist	1194777185	SMOLYAR, ALBERT					Hebrew	Russian						
WellCare	Specialist	1871693069	VAN SICKELS, JOSEPH	Sangho	Spanish			Sangho							

**TOTAL 3**



## APPENDIX C: WEB VALIDATION OF UNDELIVERABLE SURVEYS

Plan Name	Prov Type	NPI	NAME	MCAPS ADDRESS LINE 1	MCAPS ADDRESS LINE 2	MCAPS CITY	MCAPS STATE	MCAPS ZIP	MCAPS PHONE NUMBER	Validation Date	Validation Status
Coventry	P	1538149596	BRIAN OVERBEE	157 DORTON JENKINS HWY		DORTON	KY	41520	(606) 639-4020	09/03/14	In web directory
Coventry	P	1093845026	KIMBERLY JONES	9 LINVILLE DR		PARIS	KY	40361	(859) 987-3600	09/03/14	In web directory - different address
Coventry	P	1114964061	JANET MACPHEE	215 CENTRAL AVE	#100	LOUISVILLE	KY	40208	(502) 852-2822	09/03/14	In web directory - different address
Coventry	S	1043324569	RICHARD BURGAN	815 E PARRISH AVE		OWENSBORO	KY	42303	(270) 688-0808	09/03/14	In web directory - different address
Coventry	S	1538256656	MAVIS SCHORN	2611 W END AVE	STE 280	NASHVILLE	TN	37203	(615) 936-5858	09/03/14	In web directory
Coventry	S	1619112042	DR. MOHAMMED SHAREEF	991 MEDICAL PARK DR	STE 300	MAYSVILLE	KY	41056	(606) 759-6606	09/03/14	In web directory
Humana	P	1467613901	DR. MUNISH LAPSLA	3700 WASHINGTON AVE		EVANSVILLE	IN	47714	(812) 485-7040	09/03/14	Not found in web directory
Humana	P	1891761045	DR. CHRISTOPHER STOKES	2880 HIGHWAY 30 BYP		LONDON	KY	40741	(606) 843-9440	09/03/14	Not found in web directory
Humana	P	1013184266	SHANNA MEYERS	800 ROSE ST		LEXINGTON	KY	40536	(859) 323-5956	09/03/14	In web directory
Humana	S	1043539471	DR. HIREN VALLABH	800 ROSE ST		LEXINGTON	KY	40536	(859) 323-5000	09/03/14	In web directory
Humana	S	1194044628	TERESA DAVIS	310 WHITTINGTON PKWY STE 200		LOUISVILLE	KY	40222	(502) 429-4430	09/03/14	In web directory
Humana	S	1649305863	DR. REENA SHAH	1 SAINT JOSEPH DR		LEXINGTON	KY	40504	(859) 313-1000	09/03/14	In web directory
Passport	P	1700044153	HEATHER JOHNSTON	1903 W HEBRON LN		SHEPHERDSVILLE	KY	40165	(502) 361-9900	09/03/14	Not found in web directory
Passport	P	1033174164	DR. VINNETTE LITTLE	1697 PEABODY WAY		LEXINGTON	KY	40511	(859) 226-2840	09/03/14	Not found in web directory
Passport	P	1982793790	DR. ANJUM IQBAL	350 HOSPITAL WAY		SOMERSET	KY	42503	(606) 451-2671	09/03/14	In web directory - different address
Passport	S	1306850862	DR. ROBERT MORTON	309 11TH ST		CARROLLTON	KY	41008	(502) 732-3241	09/03/14	Not found in web directory
Passport	S	1548240849	DR. SCOTT CHAPMAN	811 E PARRISH AVE		OWENSBORO	KY	42303	(270) 688-1330	09/03/14	Not found in web directory
Passport	S	1912177536	DR. PAULA EATON	530 S JACKSON ST		LOUISVILLE	KY	40202	(502) 562-3110	09/03/14	Not found in web directory
WellCare	P	1497014658	COURTNEY HAGER	239 MOUNTAIN PARKWAY SPUR		CAMPTON	KY	41301	(606) 668-3120	09/03/14	In web directory
WellCare	P	1871703678	DR. KAREN JERARDI	3050 MACK RD		FAIRFIELD	OH	45014	(513) 636-8259	09/03/14	In web directory
WellCare	P	1063613214	DR. MEGAN FULLER	50 WEDDINGTON BRANCH RD STE B		PIKEVILLE	KY	41501	(606) 432-2172	09/03/14	In web directory
WellCare	S	1013125160	DR. MARY LANG	512 JACKSON ST		LONDON	KY	40741	(606) 864-0009	09/03/14	In web directory
WellCare	S	1336413251	SHALEEN WILLIAMS	234 GOODMAN ST		CINCINNATI	OH	45219	(513) 475-8000	09/03/14	In web directory
WellCare	S	1720053770	DR. RAJAN LAKHIA	4380 MALSARY RD	STE 175	CINCINNATI	OH	45242	(513) 585-4157	09/03/14	Not found in web directory



**Commonwealth of Kentucky  
Department for Medicaid Services  
Division of Program Quality & Outcomes**

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**Validation of Managed Care Provider  
Network Submissions: Audit Report**

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**September 2014**

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## EXECUTIVE SUMMARY

In May 2014, Island Peer review Organization (IPRO), on behalf of the Kentucky Department for Medicaid Services (DMS), conducted its second audit of the Managed Care Assignment Processing System (MCAPS) to validate its accuracy. There are five managed care organizations (MCOs) operating in Kentucky: WellCare of Kentucky, CoventryCares of Kentucky, Passport Health Plan, Humana CareSource, and Anthem. Because Anthem started in January 2014, and did not report MCAPS data at the time of this project, it was not included.

Data validation surveys (see Appendix C) were sent to 100 primary care providers (PCPs) and 100 specialists from the four MCOs. The overall response rate was 60.9% (see Appendix A). Specialists responded at a slightly higher rate than PCPs, with 61.6% and 60.2% respectively. The response rates also varied by MCO, ranging from 55.9% for Passport to 71.6% for WellCare of Kentucky. After removing exclusions, 375 providers were available for analysis.

### Highlights of the Audit Findings

- A total of 187 (49.9%) providers who returned surveys included at least one revision. A higher percentage of PCP records had revisions than specialist records.
- Four survey items had a substantial percentage of providers with missing data in the MCAPS data file: License number, Secondary Specialty, Spanish, and Other Languages Spoken. Overall accuracy and error rates excluded additions to the Spanish field, as well as additions of “English” to the Languages field.
- While the least accurate field was “Spanish” with a 67.2% rate of accuracy, most of the revisions were additions, because the original MCAPS data were blank. As such, this finding should be interpreted with caution.
- The fields with the most accurate rates were “State” with a 100.0% rate, “Last Name” with a 98.9% rate, “First Name” and “NPI” each with a 98.7% rate, “City” and whether the provider has a contract to accept Medicaid patients each with a 98.1% rate, “PCP Panel Size” with a 96.4% rate, “Secondary Specialty” with a 96.3% rate, “Zip Code” with a 95.7% rate, and “Provider Type” and “Primary Specialty” each with a 93.3% rate.
- There was an average of 1.79 revisions per provider for the 187 providers that submitted surveys with changes.
- The “Street Address” element had an accuracy rate of 89.3%. The “Phone Number” element had an accuracy rate of 85.9%, although almost half the revisions coincided with a change in address.
- The “License Number” field was reported correctly in 81.9% of records among the 310 providers licensed in Kentucky, partially due to the high number of missing data in the original data file.
- The “Languages Spoken” element was underreported, and had an accuracy rate of 81.3%. At least one language was added by 69 PCPs.
- Rates of accuracy for other fields were: PCP, Specialist, or Both – 91.5% and PCP Open or Closed Panel – 92.3%.
- A comparison of 2013 and 2014 statewide rates of accuracy revealed a slight decrease from 51.6% to 50.1%. Two data elements, “Open or Closed Panel” and “Primary Specialty”, increased, while two data elements, “License Number” and “Provider Type”, decreased in accuracy over time.

The remainder of this report provides details on the background, objectives, and methodology of the study. In addition, the report analyzes the results for each data element and discusses differences in reporting between PCPs and specialists.

## INTRODUCTION

Provider networks must include sufficient provider numbers and types to deliver contracted services to their target Medicaid populations and meet state accessibility standards. DMS requires the contractor, IPRO, to verify the provider information submitted by Kentucky MCOs to the MCAPS, Kentucky's database for collecting provider panel information. MCOs must submit provider data monthly for all plan enrolled providers electronically to the state's secure MCAPS. The state uses MCAPS data to evaluate the adequacy of the MCO's networks, assess capacity, create Performance Measures related to the MCO's provider networks, and conduct access and availability studies; hence, the accuracy of the source data is essential.

IPRO conducted a two-phase mailing to validate the accuracy of the MCAPS data submissions for PCPs and specialists participating with any of the four MCOs operating in Kentucky with a Medicaid product line. Responses are compared to information in the MCAPS and an error rate is computed for each data element that is validated.

This report is a summary of the second audit of the accuracy of MCO submissions to the MCAPS conducted by IPRO for the DMS. The first audit, conducted in 2013, demonstrated that most data fields were correct over 90% of the time and errors were more likely due to underreporting. The audited population for the 2014 survey mirrors that of the 2013 survey in which PCPs and specialists who participate in Medicaid were audited. This year, however, KY Spirit was not sampled.

## OBJECTIVES

The objectives of this study are to:

- Validate the accuracy of MCO MCAPS data submissions for Medicaid participating PCPs and specialists,
- Further the accuracy of MCO data submission through furnishing MCO-specific reports to the health plans for correction, and
- Compare the findings of the 2013 and 2014 survey studies.

## METHODOLOGY

### ***Sampling***

In May 2014, DMS sent IPRO four files containing each MCO's MCAPS submission for the most recent monthly provider data. The combined files contained a total of 236,944 rows. IPRO excluded selected providers, such as providers whose address was not in KY or any of its bordering states, providers not included in the directory and provider types such as pharmacies. After removing duplicate providers, the file contained 22,450 providers. Random sampling of 100 PCPs and 100 specialists was performed for each plan, resulting in a total sample size of 800 providers. Providers who were denoted as "both" for the PCP/Specialist field were categorized as PCPs. A listing of participating MCOs can be found in Appendix A.

### Survey

The survey sent to PCPs and specialists requested the validation of data fields outlined in Table 1. Because the required data fields vary by provider classification, two versions of the survey tool were designed. The tool for specialists did not include the two fields (Open or Closed Panel and Panel Size) for which reporting is not required for them.

All providers were asked an initial screening question as to whether they participated in the named MCO. The 16 providers who responded that they did not participate or did not recognize the named MCO were excluded from analysis.

**Table 1: Fields for Validation by Provider Type**

Field Names	PCPs	Specialists
Last Name	X	X
First Name	X	X
License #	X	X
National Provider ID (NPI)	X	X
Street	X	X
City	X	X
State	X	X
Zip Code	X	X
Phone	X	X
Accepts Medicaid	X	X
Provider Type	X	X
PCP, Specialist, or Both	X	X
Primary Specialty	X	X
Secondary Specialty	X	X
PCP Open or Closed Panel	X	
PCP Panel Size	X	
Spanish	X	X
Other Languages Spoken*	X	X
MCO – whether provider participates with the plan sampled for survey	X	X

\*Up to four languages can be submitted for each provider.

To ensure the accuracy of responses for “Provider Type”, providers were sent a listing of codes for provider type and corresponding provider type labels to facilitate their response to this item.

### Mailing

The audit was conducted as a two-phase mail survey. A total of 800 providers were sent a survey on June 13th. The second mailing was sent on July 18th to the 400 providers who did not respond to the first mailing, excluding surveys that were returned as undeliverable. The analysis was started in late-August.

The mailing included a cover letter explaining the purpose of the survey, the survey containing auto-populated provider-specific information to be validated, instructions on how to complete the survey with an explanation of each survey item, a listing of provider types, and an envelope to return the survey with pre-paid postage. A database was developed to track the status of all surveys and record provider responses.

### **Data Analyses**

The following analyses were conducted to address the objectives of this study:

- Response rate calculations,
- Accuracy rates on all survey items,
- Comparison of 2013 and 2014 results, and
- Comparisons of PCPs and specialists on all applicable survey items.

To test for any differences in proportions, chi-square analyses were employed for all comparative analyses.

### **Methodological Considerations**

#### PCP/Specialist Categorization

Because the survey contains an item to validate whether the provider is a “PCP”, “Specialist”, or “Both”, the comparisons between PCPs and specialists on accuracy rates incorporate the revisions made by providers to this field. For instance, if a provider was categorized as a PCP in the MCAPS, and changed the item to specialist on the survey, that provider was considered a specialist for most analyses in this report. The only section that retains the original categorizations is the response rate calculation section. As a result, the total counts of PCPs and specialists appearing in this report differ depending on the analysis.

#### Data File Missing Data Issues

Among the survey items, there were four items that had a substantial percentage of providers with missing data in the MCAPS data file (see Table 2). This resulted in higher error rates, since providers recorded their responses because there was no data on the survey. License number was only required for providers licensed in Kentucky. Among the 310 providers licensed in Kentucky, 17.1% were missing license number in the MCAPS file. A total of 95.5% of providers had no secondary specialty in the MCAPS file, even though IPRO captured specialties from different rows in the file prior to conducting the survey. The Spanish field was missing for 45.6% of the providers. The MCAPS data dictionary specifies only “Y” for yes. However, some plans entered Y and N, and the analysis was conducted as if the requirement is Y and N. The Language field was missing for 76.0% of the rows in the MCAPS file.

**Table 2: Missing MCAPS Data**

<b>Survey Item</b>	<b>N</b>	<b>%</b>
License #*	53	17.1%
Secondary Specialty	358	95.5%
Spanish	171	45.6%
Other Languages Spoken	285	76.0%

\*License # is limited to providers licensed in Kentucky.

Below are the survey validation results on these 4 items.

- Among the 53 missing data for License number, 34 providers added a License number, while 19 left the field blank.
- Among the 358 missing data for Secondary Specialty, 17 providers added a specialty, while 341 left the field blank, most likely because they do not have a secondary specialty.
- Among the 171 missing data for Spanish, 114 added a response, while 57 left the field blank.
- Among the 285 missing data for Language, 62 added a response (most frequently English), while 223 left the field blank.

Due to the high number of providers with missing data in the MCAPS file, and the high percentage of revisions reflecting additions instead of changes, the overall accuracy and error rates exclude two types of revisions. For the Spanish field, additions were excluded, but changes were included. For the Languages field, additions of “English” were excluded, although other language additions or changes were retained. Further information is provided below in the report.

## **SURVEY RESULTS**

### **Response Rate Calculations**

The response rates for the survey are displayed in Table 3. Results are itemized by PCP and specialist surveys, and include the total number of surveys mailed, undeliverable surveys due to inaccurate addresses, adjusted populations, number of exclusions, and completed surveys.

A total of 128 surveys were returned to IPRO as “undeliverable” due to inaccurate addresses. Specialists had a slightly higher rate of undeliverables than PCPs (16.8% vs. 15.3%). The undeliverable rate was higher this year than last year (16.0% vs. 9.8%). As seen in Appendix A, the high rate is partially due to the very high rate of undeliverable addresses for Passport providers at 27.5%.

There were 409 returned surveys, yielding a response rate of 60.9%. As seen in Appendix A, WellCare had the highest response rate (71.6%). A total of 34 returns were excluded from the analysis because:

- 16 providers did not participate in the named MCO or did not recognize the MCO, and
- 18 providers were not at that site.

Passport had the highest number of exclusions, with 12, followed by WellCare of Kentucky (9), Humana CareSource (7), and CoventryCares of Kentucky (6).

As a result, 375 completed surveys were available for analysis.



**Table 3: Survey Responses by PCP/Specialist**

	PCPs	Specialists	Total
<b>Surveys Mailed</b>	400	400	800
Undeliverable	61	67	128
<b>Adjusted Population</b>	339	333	672
<b>Returned Surveys</b>	204	205	409
<b>Response Rate</b>	60.2%	61.6%	60.9%
<i>Exclusions</i>	20	14	34
<b>Completed Surveys</b>	184	191	375

**Accuracy Rate Calculations**

Among the completed surveys, Table 4 displays the number and percent of providers who reported at least one revision on their surveys across all items, itemized by PCPs and specialists.

The table indicates that 49.9% included at least one revision. PCPs were more likely than specialists to return surveys with revisions (56.1% vs. 44.1%). Note that the PCP survey included two more fields than the specialist survey. As mentioned previously, the error rates exclude instances where a provider added a response for Spanish if one did not exist and/or added English as a response for Languages. Also, corrections to License number were limited to providers in Kentucky.

There was an average of 1.79 revisions per provider, among providers that had at least one correction. See Appendix B for a listing of revisions per provider by health plan. Accuracy rates ranged from 31.9% for Passport to 59.0% for WellCare of Kentucky.

**Table 4: Status of Surveys by Provider Type**

Completed Surveys	Total (n=375)		PCPs (n=180)		Specialists (n=195)		Significance
	N	%	N	%	N	%	
With Revisions	187	49.9%	101	<b>56.1%</b>	86	44.1%	*
Without Revisions	188	50.1%	79	43.9%	109	<b>55.9%</b>	*

Note: Bold values represent the significantly higher value in the row.

\* Significant at p<.05.

## COMPARISON BETWEEN 2013 AND 2014 RESULTS

Table 5 provides a summary and comparison of 2013 and 2014 statewide rates of accuracy. (See Appendix B for overall plan rates of accuracy.) Overall accuracy decreased by 1.5 percentage points from 51.6% in 2013 to 50.1% in 2014.

Correct reporting of “Open or Closed Panel” saw the most dramatic change, significantly increasing from 83.3% to 92.3%. “Primary Specialty” also saw significant increases in reporting. “License Number” and “Provider Type” were the only data elements that saw significant decreases in accuracy.

**Table 5: Statewide Rates of Accuracy for 2013 and 2014**

Field Name	2013 Statewide Results	2014 Statewide Results	Significance
Last Name	99.4%	98.9%	
First Name	99.4%	98.7%	
License #	89.1%	81.9%	▼
National Provider ID (NPI)	99.6%	98.7%	
Street Address	91.7%	89.3%	
City	97.9%	98.1%	
State	99.8%	100.0%	
Zip Code	95.8%	95.7%	
Phone	88.5%	85.9%	
Accepts Medicaid	99.0%	98.1%	
Provider Type	96.5%	93.3%	▼
PCP, Specialist, or Both	93.7%	91.5%	
Primary Specialty	87.9%	93.3%	▲
Secondary Specialty	96.4%	96.3%	
Open or Closed Panel (PCPs Only)	83.3%	92.3%	▲
Panel Size (PCPs Only)	95.0%	96.4%	
Spanish	63.9%	67.2%	
Other Languages Spoken	82.5%	81.3%	
<b>Overall Accuracy</b>	51.6%	50.1%	

\* 2014 rate significantly higher (▲) or significantly lower (▼) than 2013 rate at  $p < .05$ .

## FINDINGS

The following sections detail the findings with respect to each element validated.

### ***Provider Identification***

Table 6 displays the percentage of correct records (i.e., records that did not require revising) for each of the provider identification elements at the statewide level and by provider classification. The provider identification element most likely to be corrected was “License Number” with an accuracy rate of 81.9%, partially due to the high number of missing data in the original data file. Note that License number is only based on the 310 providers who were licensed in Kentucky. “Phone Number” was the next element most likely to be revised with an accuracy rate of 85.9%. Among the 53 providers who revised “Phone Number”, 26 also revised their “Street Address”.

The error rates for the address-related fields do not include surveys that were returned as “undeliverable”, which in effect could also represent incorrect addresses. While the exclusion of undeliverables should be considered when interpreting the provider address fields’ (Street Address, City, State, and Zip Code) error rates, they were not factored into the analysis because the undeliverables may represent other issues (e.g., provider not at site or retired). Undeliverables by plan ranged from 12% to 27.5% with an overall rate of 16%. (See Appendix A).

With the exception of Street Address, Phone Number, and License Number, the remaining provider identification elements were correct in at least 95% of returned surveys, (i.e., Last Name, First Name, City, State, Zip Code, and NPI). For License Number, 56 providers recorded a change. However, for 34 of these providers, the MCAPS data file had no License Number, so these represent both an addition and revision.

The only field where PCPs and specialists differed significantly was City, where the rate for specialists was higher than for PCPs.

**Table 6: Provider Identification Elements – Statewide**

Provider Identification Elements	Total Records without Revisions	Total Records with Revisions	% Correct			Significance
			Total Records	PCPs	Specialists	
Last Name	371	4	98.9%	98.3%	99.5%	
First Name	370	5	98.7%	98.3%	99.0%	
License #**	254	56	81.9%	82.7%	81.1%	
NPI	370	5	98.7%	98.9%	98.5%	
Street Address	335	40	89.3%	87.2%	91.3%	
City	368	7	98.1%	96.1%	<b>100.0%</b>	*
State	375	0	100.0%	100.0%	100.0%	
Zip Code***	359	16	95.7%	94.4%	96.9%	
Phone #	322	53	85.9%	82.2%	89.2%	

Note: Bold value represents the significantly higher value in the row.

\* Significant at  $p < .05$ .

\*\* Of these revisions, 34 were for records that did not have a License # in the data file.

\*\*\* Of these revisions, a vast majority (14) was for records that also were revised for Street Address.

### ***Accepts Medicaid***

This item asks whether the provider has a contract to accept Medicaid patients, and is coded as 'Yes' or 'No'. This field was reported correctly in 98.1% (368 out of 375) of surveys. In all seven cases with corrections, a Yes was changed to a No response. PCPs were more likely to revise this element than specialists, at  $p < .05$ , with rates of 96.1% and 100.0%, respectively.

### ***Provider Type***

Provider type is identified by a 2-digit code and a corresponding provider type description. A listing of codes and corresponding provider type descriptions was enclosed in the survey packet, and providers were asked to use one of the codes on the list if a correction was necessary. This field was reported correctly in 93.3% (350 out of 375) of providers. Among the 25 corrections, 13 were changed from "Physician Individual" to "Physician Group". Provider type was accurate for 95.0% of PCPs and 91.8% of specialists.

### ***PCP, Specialist, or Both***

Providers were asked to validate whether they were PCP, Specialists, or Both. The accuracy rate for this field was 91.5% (343 out of 375). Among the 32 who recorded a change, the most common changes were from PCP to specialist (n=14) and specialist to PCP (n=10). Rates were similar for PCPs and specialists (91.1% and 91.8%, respectively).

### ***Provider Specialty***

Physicians were requested to verify their Primary and Secondary Specialties. Table 7 presents correct rates for these fields statewide and by provider group. Primary Specialty was correctly

reported in 350 (93.3%) records. Secondary Specialty was correctly reported in 361 (96.3%) records. Of the 14 records with corrections, 12 were originally blank and the provider added a specialty.

Accuracy rates for Primary Specialty were higher for PCPs (96.1%) than specialists (90.8%), at a significance of  $p < .05$ . For PCPs, the percentage of correct records for Secondary Specialty was 96.1% as compared with 96.4% for specialists. No significant differences were identified for Secondary Specialty.

**Table 7: Specialty – Statewide and by Provider Group**

Specialty	Records without Revisions	Records with Revisions	% Correct			Significance
			Total Records	PCPs	Specialists	
Primary Specialty	350	25	93.3%	<b>96.1%</b>	90.8%	*
Secondary Specialty	361	14	96.3%	96.1%	96.4%	

Note: Bold value represents the significantly higher value in the row.

\* Significant at  $p < .05$ .

### ***PCP Open or Closed Panel***

This field is a required field for PCPs only. Valid entries were “O” for Open or “C” for Closed. Of the 180 PCPs, 12 providers were excluded from this analysis, since they were originally classified as specialists (but corrected their data to PCP on the previous item), so this item did not appear on their survey. Among the 168 PCPs with data for this field, 155 (92.3%) were returned with no revisions to the element. Among the 13 PCPs with corrections, 12 revised their panel from Open to Closed, while 1 revised their panel from Closed to Open.

### ***Panel Size***

“Panel Size” is a required field for PCPs only. Providers were requested to validate the number of Medicaid enrollees last reported by the named health plan as being assigned to that provider and practice site. Of the 168 completed PCP surveys, 162 (96.4%) were returned with no revisions to the panel size element.

### ***Spanish***

Providers were asked to validate whether the provider or clinical staff can speak Spanish. While accuracy rates were low (67.2%), 114 out of the 123 revisions were additions, because the original data for the field was blank in the MCAPS file. Accuracy rates on this field did not significantly differ between PCPs and specialists (70.0% and 64.6%, respectively). Due to the high number of providers with missing data in the MCAPS file, and the high percentage of revisions reflecting additions instead of changes, additions for this field were excluded in computing overall accuracy and error rates. However, the 9 provider changes to this field were utilized in the calculations.

### **Languages Spoken**

This element reflects languages that a provider or clinical staff member has the ability to speak with patients. There are four possible language fields in the file. This element was correct in 81.3% of records (see Table 8a).

Provider revisions to this field indicate that the element is underreported. Of the 375 completed surveys, 70 (18.7%) providers reported revisions to the “Languages Spoken” field. A total of 69 (18.4%) providers added at least one language, while 3 (0.8%) providers dropped at least one language. Staff turnover at physicians’ practices may contribute to why this field is one of the least accurate elements. Table 8b displays the most frequently underreported languages. As can be seen, English was the most commonly added language on the survey.

PCPs were more likely to make corrections than specialists, with accuracy rates of 77.8% and 84.6%, respectively, although differences were not statistically significant.

Note that although the accuracy rate appears high for this field, with no changes for 305 providers, a total of 223 providers did not have any languages in the original MCAPS file and did not add a language, so they are included in the count of 305. Also, because “English” was added by 59 providers, but most providers left the Language field blank, all “English” additions were excluded from the overall accuracy and error rates.

**Table 8a: Reporting of Languages – Statewide**

<b>Languages</b>	<b>N</b>	<b>%</b>
Same languages	305	81.3%
At least one language added	69	18.4%
At least one language dropped	3	0.8%

Note: Two providers added and dropped at least one language and were therefore counted in the added and dropped counts.

**Table 8b: Most Frequently Underreported Languages**

<b>Language</b>	<b>Number of Providers Adding</b>
English	59
Spanish	4
Hindi	3

## Summary of Accuracy Rates Statewide and by Provider Group

Table 9 displays the accuracy rates for each survey item by provider group category.

**Table 9: Provider Group Summary on Survey Items**

Survey Item	PCP (n=180)	Specialist (n=195)	Total (n=375)
Last Name	98.3%	99.5%	98.9%
First Name	98.3%	99.0%	98.7%
License #	82.7%	81.1%	81.9%
National Provider ID (NPI)	98.9%	98.5%	98.7%
Street Address	87.2%	91.3%	89.3%
City	96.1%	100.0%	98.1%
State	100.0%	100.0%	100.0%
Zip Code	94.4%	96.9%	95.7%
Phone	82.2%	89.2%	85.9%
Accepts Medicaid	96.1%	100.0%	98.1%
Provider Type	95.0%	91.8%	93.3%
PCP, Specialist, or Both	91.1%	91.8%	91.5%
Primary Specialty	96.1%	90.8%	93.3%
Secondary Specialty	96.1%	96.4%	96.3%
PCP Open or Closed Panel	92.3%	N/A	N/A
PCP Panel Size	96.4%	N/A	N/A
Spanish	70.0%	64.6%	67.2%
Other Languages Spoken	77.8%	84.6%	81.3%
<b>Overall Accuracy</b>	43.9%	55.9%	50.1%

MCO variation in accuracy rates for each survey item was evaluated (data not shown). Most fields did not vary much among the four health plans. The five fields with the widest range in accuracy rates were: License number, Street address, Phone number, Spanish, and Languages spoken.

### Limitations

The major limitations in interpreting the results of this audit center on the missing data in the MCAPS data file, especially for the fields “Spanish” and “Other Languages”. The overall rates were adjusted to discount any additions made by the providers to the Spanish field and additions of “English” to the Language field. However, these additions were retained in the error rates for the two fields to present an accurate representation of the issues with these fields.

Treating provider additions as errors when the MCAPS data were blank increased the error rates for these fields. On the other hand, as noted above, many providers did not record a response on the survey when the original MCAPS data were blank. A lack of response was treated as no change, which consequently contributed to the accuracy rate. These limitations also applied to the License number field. In general, rates for these fields should be interpreted with caution. Validation surveys are much more informative when the original data file contains some data to validate, so plans should be encouraged to provide complete data, including a response for every field.

## **RECOMMENDATIONS**

Based on the findings of this audit, IPRO recommends that DMS/IPRO:

### **DMS**

- Follow-up with health plans to correct provider records for the errors identified by this audit.
- Work with plans to enhance the accuracy and completion of critical fields in the MCAPS, especially license number, phone, address, and languages spoken.
- Expand the data dictionary to include more specificity in the definitions of the data elements to help facilitate plans' submission of accurate and complete data. For example, for the Language fields, codes are provided without further instruction to ensure that each provider report at least one language.
- Consider adding data elements to the MCAPS that collect information about wheelchair access, hours at site, provider usage of Health Information Technology (such as electronic medical records (EMR) systems), and providers' Patient-Centered Medical Home (PCMH) certification status and level.
- Consider removing the field Spanish and incorporating it into the Language field. If Spanish is retained as a separate field, it would be preferable to revise the data dictionary and ask plans to enter "Y" or "N", so that missing data are not presumed to be No.
- Secondary Specialty should be recorded on the same row as Primary Specialty instead of on separate rows.
- Consider adding interpreter services / translation services as codes to the data dictionary of the language field, since some providers noted this on the survey, but there is no code to capture such services in the MCAPS.

### **IPRO**

- Furnish the names and addresses of the surveys that were undeliverable to the health plans for further research.



## Appendix A – Response Rate by Plan

Plan	Initial Sample Size	Undeliverable Surveys	Adjusted Sample Size	Returns	Response Rate
CoventryCares of KY	200	24	176	100	56.8%
Humana CareSource	200	25	175	102	58.3%
Passport	200	55	145	81	55.9%
WellCare of KY	200	24	176	126	71.6%
<b>TOTAL</b>	<b>800</b>	<b>128</b>	<b>672</b>	<b>409</b>	<b>60.9%</b>
<b>ALL PCPs</b>	<b>400</b>	<b>61</b>	<b>339</b>	<b>204</b>	<b>60.2%</b>
<b>ALL Specialists</b>	<b>400</b>	<b>67</b>	<b>333</b>	<b>205</b>	<b>61.6%</b>

## Appendix B – Overall Accuracy by Plan

Plan	Completed surveys	Returned with Revisions	Returned without Revisions	% Survey without Revisions	Average Revisions
CoventryCares of KY	94	42	52	55.3%	1.45
Humana CareSource	95	50	45	47.4%	1.74
Passport	69	47	22	31.9%	2.19
WellCare of KY	117	48	69	59.0%	1.75
<b>TOTAL</b>	<b>375</b>	<b>187</b>	<b>188</b>	<b>50.1%</b>	<b>1.79</b>
<b>ALL PCPs*</b>	<b>180</b>	<b>101</b>	<b>79</b>	<b>43.9%</b>	<b>1.82</b>
<b>ALL Specialists*</b>	<b>195</b>	<b>86</b>	<b>109</b>	<b>55.9%</b>	<b>1.76</b>

\*Provider revisions to the field “PCP, Specialist, or Both” were incorporated to identify the correct category for PCP or Specialist.

# Appendix C – Sample of Specialist Survey Sent to Providers

**Commonwealth of Kentucky  
Department for Medicaid Services**

## Provider Network Data Survey



The health plan to the left has provided the following to DMS for the provider listed below. If you do not participate in this plan, please check the box to the right and return the survey.

1. Please verify that the following information is correct.

2. Make necessary corrections.

<b>Last Name</b>				
<b>First Name</b>				
<b>License #</b>				
<b>Natl Provider Id (NPI)</b>				
<b>Street</b>				
<b>City</b>				
<b>State / Zip Code</b>				
<b>Phone</b>				
<b>Accepts Medicaid</b>	<input type="checkbox"/>	Y=Yes, N=No	<input type="checkbox"/>	Y=Yes, N=No
<b>Provider Type</b>				
<b>PCP, Specialist, or Both</b>	<input type="checkbox"/>	P=PCP, S=SPECIALIST, B=BOTH	<input type="checkbox"/>	P=PCP, S=SPECIALIST, B=BOTH
<b>Specialty:</b>				
Primary				
Secondary				
<b>Spanish</b>	<input type="checkbox"/>	Y=Yes, N=No	<input type="checkbox"/>	Y=Yes, N=No
<b>Languages spoken</b> by Physician and/ or Clinical staff at this site:				

Check here if no corrections required

**THANK YOU!**

# Appendix C – Sample of PCP Survey Sent to Providers

**Commonwealth of Kentucky  
Department for Medicaid Services**

## Provider Network Data Survey



The health plan to the left has provided the following to DMS for the provider listed below. If you do not participate in this plan, please check the box to the right and return the survey.

1. Please verify that the following information is correct.

2. Make necessary corrections.

<b>Last Name</b>				
<b>First Name</b>				
<b>License #</b>				
<b>Natl Provider Id (NPI)</b>				
<b>Street</b>				
<b>City</b>				
<b>State / Zip Code</b>				
<b>Phone</b>				
<b>Accepts Medicaid</b>	<input type="checkbox"/>	Y=Yes, N=No	<input type="checkbox"/>	Y=Yes, N=No
<b>Provider Type</b>				
<b>PCP, Specialist, or Both</b>	<input type="checkbox"/>	P=PCP, S=SPECIALIST, B=BOTH	<input type="checkbox"/>	P=PCP, S=SPECIALIST, B=BOTH
<b>Specialty:</b>				
Primary				
Secondary				
<b>PCP Open or Closed Panel</b>	<input type="checkbox"/>	O=Open, C=Closed	<input type="checkbox"/>	O=Open, C=Closed
<b>PCP Panel Size</b>				
<b>Spanish</b>	<input type="checkbox"/>	Y=Yes, N=No	<input type="checkbox"/>	Y=Yes, N=No
<b>Languages spoken</b> by Physician and/ or Clinical staff at this site:				

Check here if no corrections required

**THANK YOU!**