



## WV Highmark Health Options 2025 Provider Satisfaction Survey (PSS)

Highmark Health Options conducted a Practitioner and Provider Satisfaction Survey of Primary Care Physicians (PCPs), Behavioral Health, Obstetrics/ Gynecology and Ophthalmology and Cardiology located throughout Highmark Health Options' West Virginia (WV) Medicaid approved service area. The goal of the survey was to measure and evaluate provider satisfaction levels within Highmark Health Options' WV Medicaid Network and obtain recommendations regarding the adequacy, effectiveness, and quality of Highmark Health Options' WV Medicaid plan. The survey also supports the National Committee for Quality Assurance (NCQA) Quality Improvement (QI) standard related to Member Experience. The 2025 Provider Satisfaction Survey template was designed to support NCQA Standard QI 3 (Continuity and Coordination of Medical Care) which looks to managed care organizations to gather information, at least annually, to assess and identify opportunities to improve coordination of medical care across its delivery system. This includes conducting quantitative analysis of data and feedback. The 2025 surveys from May to June of 2025. They focused on key performance indicators that include the following composites:

- [Provider Relations](#)
- [Utilization and Quality Management](#)
- [Network/Coordination of Care](#)
- [All Other Plans \(Comparative Rating\)](#)
- [WV Reporting Requirements](#)
- [Overall Satisfaction](#)

Other areas of interest included areas of preferred methods of communication, and provider training. The results of the survey were not blinded.

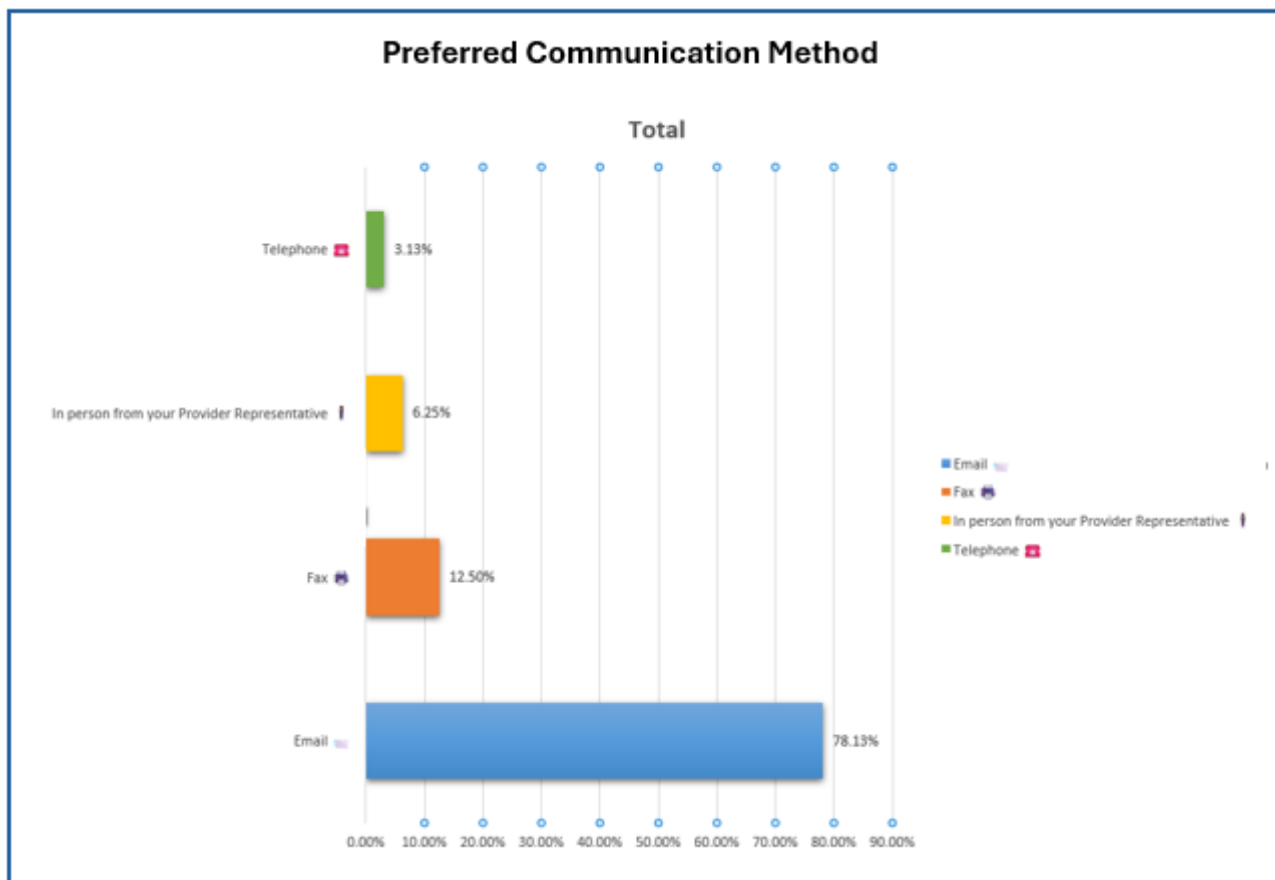
This summary will review the results for the Highmark Health Options WV Medicaid business. The 2025 practitioner survey was based on PCPs, Behavioral Health, Obstetrics, Ophthalmology and Cardiology providers with claim submissions.

HHO WV followed a fax and email methodology to administer the Provider Satisfaction Survey. Highmark Health Options' sample size was 1102. A total of 32 Medicaid practitioner surveys were completed, yielding a response rate of 2%.

## Summary of Survey Results

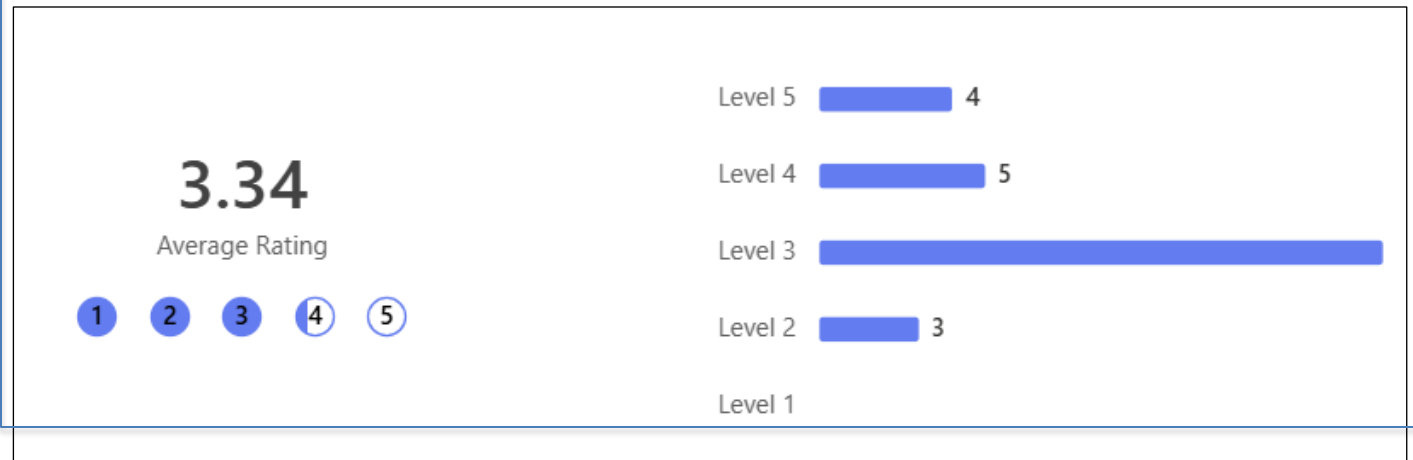
### Provider Relations

This composite addresses the providers' preferred method of communication showing email the preferred method at 78.13% with fax notifications at 12.50% and 6.25% in person engagement from our Provider Account Liaisons.



Satisfaction with the provider training available to the HHO WV (Medicaid) provider network averaged 3.34 out of 5, with most respondents finding it satisfactory (58.62% at 3/5), while notable portions rated it as good (17.24% at 4 /5) or excellent (13.79% at 5 out of 5), with the remaining portion rating it as needing improvement (10.34% at 2/5).

### Available Provider Training



### Network/Coordination of Care

Composite achieved an average rate of 3.34. This composite addresses the number and quality of specialists, as well as the timeliness of feedback/reports from specialists, in this health plan's provider network. A significant (74.07%) rated their experience as satisfactory with a score of 3/5, while smaller proportions rated it higher (14.81% at 4/5 and 3.70% at 5/5) or lower (7.41% at 2/5).

### Quality & Number of Specialist

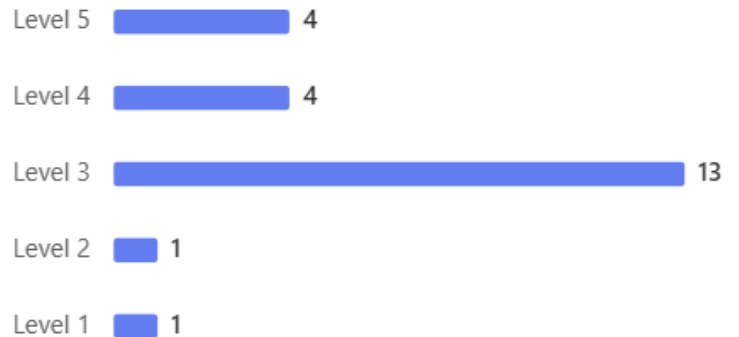


Behavioral Health Providers reported an average satisfaction rating of 3.39 out of 5 regarding the timeliness of communication received from PCPs about referred patients' care. The ratings consisted over half of the (56.52%) rated their experience as satisfactory (3 out of 5), while substantial portions rated it higher, with (17.39%) each giving a rating of 5/5 and 4/5. A smaller percentage of respondents rated their experience lower, with (4.35%) each giving a 2/5 and 1/5.

### BH Specialists Receiving Timeliness of Provider Communication

3.39

Average Rating



Specialists (excluding Behavioral Health) reported an average satisfaction rating of 3.30 out of 5 concerning the timeliness of communication received from PCPs. Many respondents (60.87%) rated their experience as satisfactory with a score of 3/5 with 21.74% giving a rating of 4/5. A smaller percentage (8.70%) rated their experience as 5/5 and 2/5.

### Specialists (excluding BH) Receiving Timeliness of Provider Communication

3.30

Average Rating



Satisfaction with the quality of Behavioral Health Specialists in the HHO WV (Medicaid) provider network averaged 3.26 out of 5. The distribution of responses was 55.56% gave a satisfaction rate of 3/5 with 18.52% providing a 4/5 satisfaction rate. Leaving 11.11%, providing a response of 5/5 and 14.81% a 2/5 rating.

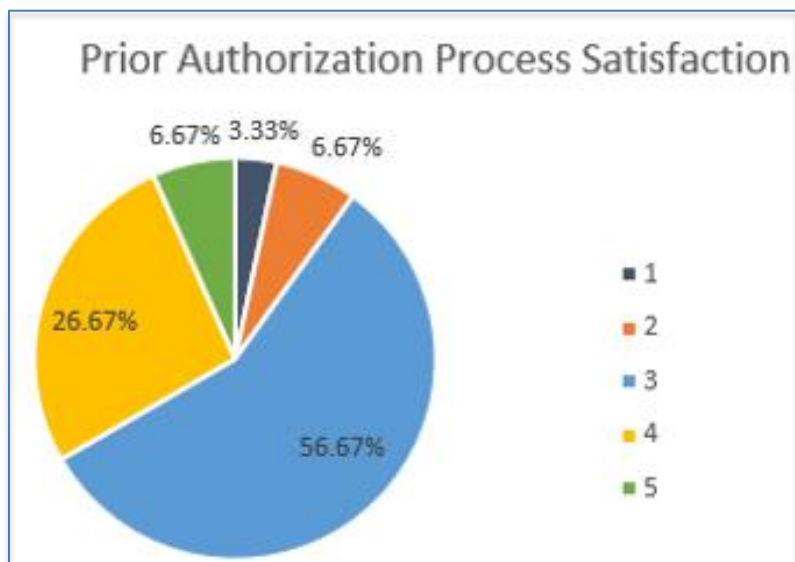


Satisfaction with the quality of Specialists in the HHO WV (Medicaid) provider network averaged 3.34 out of 5. The overall satisfaction with the quality of specialists in the HHO WV (Medicaid) provider network averaged 3.36 out of 5, with the majority of respondents rating it as satisfactory (60.71% at 3 out of 5), followed by 21.43% rating it as good (4 out of 5), 10.71% rating it as excellent (5 out of 5), and 7.14% rating it as needing improvement (2 out of 5).

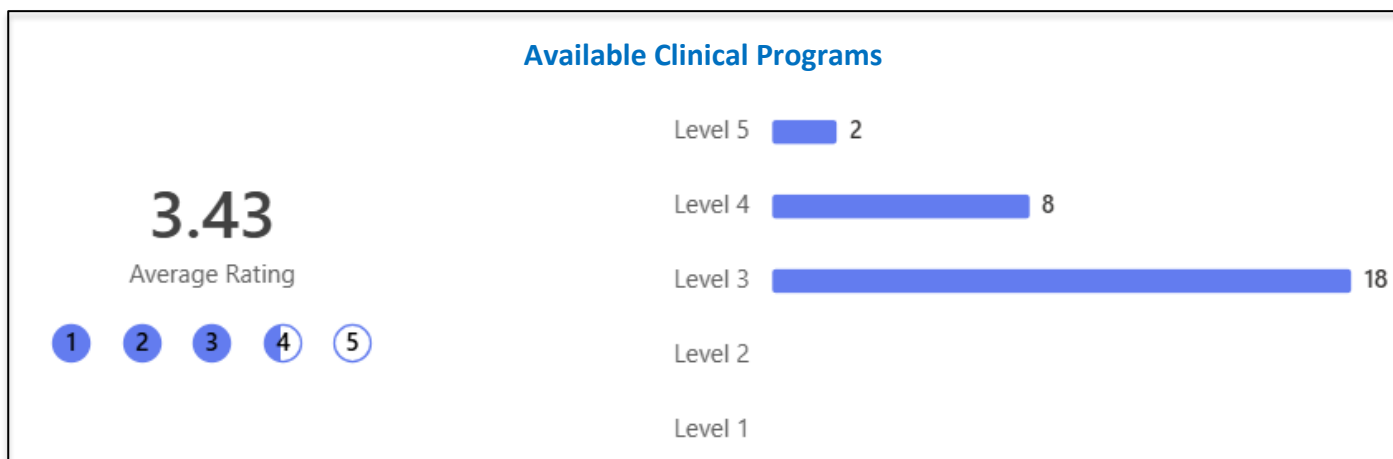


### Utilization and Quality Management

Composite achieved an average rate of 3.27. This composite measures the prior authorization process. Over half of the respondents (56.67%) rated their experience as satisfactory (3 out of 5), with a further 26.67% rating it as good (4 out of 5), while smaller percentages indicated less favorable experiences with rating of 2 (6.67%), 5 (6.67%), and 1 (3.33%) out of 5."



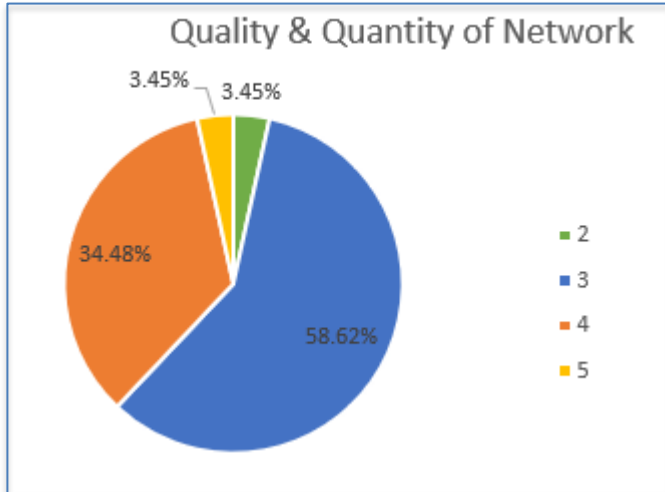
Provider satisfaction with available clinical programs averaged 3.4 with 3 out of 5, indicating a generally positive reception. The distribution of responses included 2 respondents rating the programs a 5, 8 rating them a 4, and 18 rating them a 3.



### Specialist Network (Quantity and Quality)

Satisfaction regarding the quantity and quality of the HHO WV specialist network yielded an average rating of 3.38. The majority of respondents (58.62%) rated their experience as satisfactory (3 out of 5), with a

substantial proportion (34.48%) rating it as good (4 out of 5). A small percentage rated it as excellent (3.45% at 5 out of 5), while an equal percentage indicated a need for improvement (3.45% at 2 out of 5).

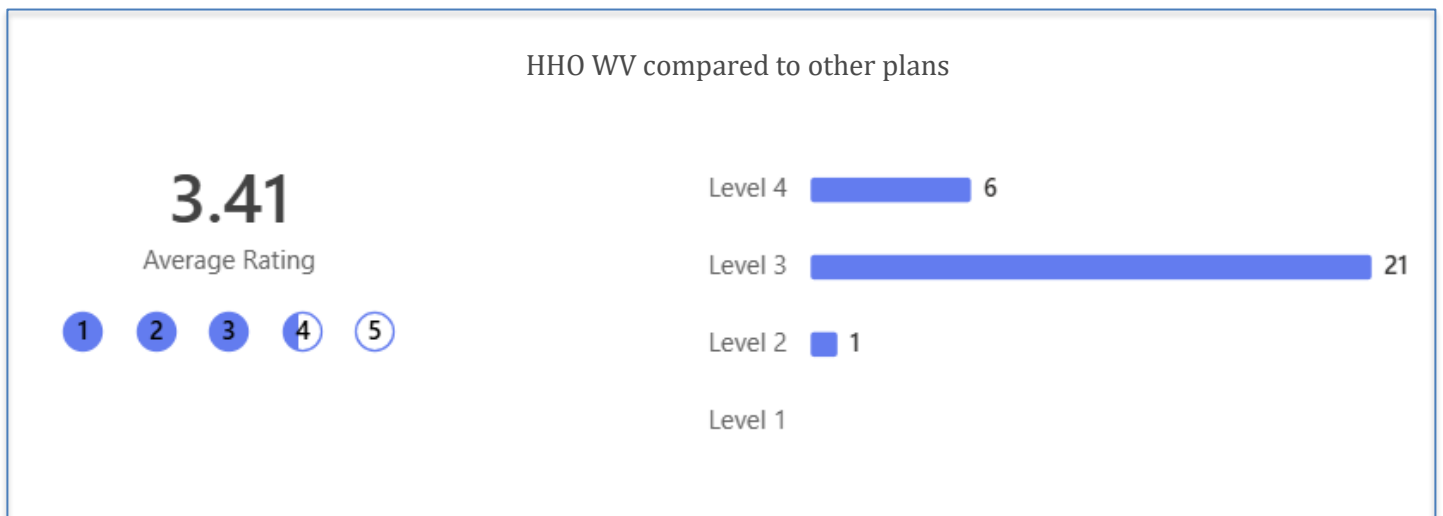


#### West Virginia Reporting Requirements

100% of providers respondents confirmed adherence to West Virginia reporting requirements for specified diseases, infections, conditions, and outbreaks, demonstrating full compliance with state regulations.

#### All Other Plans (Comparative Rating)

This item asks the respondents to rate Highmark Health Options compared to all other plans with which the provider contracts. A majority of respondents (65.63%) rated their experience as satisfactory (3 out of 5), with an additional 31.25% rating it as good or excellent (4 or 5 out of 5), while a small percentage (3.13.% rated their experience as needing improvement (2 out of 5).



## Overall Results Summary

Overall results indicate that Highmark Health Options WV Medicaid Overall Satisfaction survey results generally indicate a "satisfactory" level of provider satisfaction across several key areas, with most composite scores averaging between 3.26 and 3.39 out of 5. While the largest proportion of providers consistently selected a "3 out of 5" rating, notable percentages also rated their experiences as "good" (4 out of 5) or "excellent" (5 out of 5) in several categories.

In conclusion, the 2025 Provider Satisfaction Survey reveals a generally satisfactory level of provider experience within the Highmark Health Options WV Medicaid network. While most areas received average ratings, the consistent "satisfactory" scores, coupled with positive ratings in specific areas like clinical programs and compliance, suggest a solid foundation for continued improvement. The findings provide valuable insights for Highmark Health Options to further enhance provider relationships, streamline processes, and optimize the delivery of care within its WV Medicaid network.

## Recommendations

Analyze areas with lower satisfaction scores to identify specific pain points and implement targeted improvements.

Explore opportunities to enhance communication and coordination of care between PCPs and specialists, particularly in areas where satisfaction levels are slightly lower.

Leverage the positive feedback on clinical programs to further promote and expand these resources within the network.

Continue to monitor and maintain high levels of provider satisfaction and compliance with WV reporting requirements.

## Opportunities for Improvement

Develop initiatives to improve provider satisfaction regarding:

- Review/revise survey tool for 2026 to increase provider responses as necessary to align with corporate Highmark Health Options' mission statement and values.
- Work with the Provider Relations teams to increase the number of providers completing the survey.
- Share PSS Comments with the Provider Relations teams and other related areas for review and recommendations for improvement.