



NETWORK *Notification*

Notice Date: June 30, 2021
To: Georgia Marketplace Providers
From: CareSource
Subject: We Want to Hear From You!

Summary

As a CareSource health partner, your opinions are extremely important to us. We appreciate that you have chosen to work with CareSource and we want to hear your feedback.

Impact

CareSource is always looking for ways to improve our operations and services so that our providers have a seamless and consistent experience with us. We will be considering a survey to gather your insights about your experience with CareSource. Your responses will enable us to continue improving in key areas that matter most to you. Additionally, your responses will be valuable information for the National Committee for Quality Assurance (NCQA) and overall improving the quality of health care for members.

The survey measures your satisfaction with the health plan and your experience with the claims processing, pharmacy, member services, utilizing the provider portal and your engagement with our health partner team. It also helps CareSource learn your preferences for communication, how you want to receive plan information and updates, and to learn the demographics of our providers.

Importance

<Over the next few weeks>, you will receive <a phone call from SPH Analytics, an independent research company>, inviting you to participate in a CareSource survey. The questionnaire includes <38> provider satisfaction questions and <seven> demographic questions. The survey is conducted with <office staff, practice managers and providers that represent both medical and behavioral health>.

We appreciate your time and thank you in advance for your candid feedback.

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