



# NETWORK *Notification*

**Notice Date:** April 26, 2021  
**To:** Indiana Providers  
**From:** CareSource  
**Subject:** We Want to Hear From You!

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## **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**

We will be conducting a survey to gather your insights about your experience with CareSource. Your responses are important for the National Committee for Quality Assurance (NCQA) accreditation and improving the quality of health care. The survey measures your satisfaction with the health plan and your experience with 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 may receive a phone call (or email) 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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