



Washington State Department of
Labor & Industries

Independent Medical Exam (IME) Exit Survey

Update on Anonymous Surveys and Provider Performance Information

November, 2011 (revised March, 2012)

Prepared by James Callen, Research and Data Services

Introduction

Beginning in March 2010 L&I began surveying workers on their experience with independent medical examinations (IMEs). This was a joint effort between the department and the providers. Each IME provider was asked to hand a survey and return envelope to the worker as they left their independent medical examination. The worker was asked to voluntarily complete the survey within five days of the exam and return it to the department. Distribution of the anonymous surveys was by direct mailing from the department.

Contained in this Report

After receiving the information from the initial quarter of surveys, in the summer of 2010, the IME Business and Labor Committee expressed an interest in knowing if providing identifying information was influencing the responses of patients on the IME Exit Survey. In response, an anonymous version of the survey was developed and was distributed from July through September of 2011. That data is now available and I have compared the responses with the previous five quarters of data in which the respondents identified themselves on the surveys.

After looking at the anonymous survey data, you will see examples of new comparisons relating respondent satisfaction to providers and IME firms. These charts depict information from the five quarters of data in which identifying information was included in the survey responses.

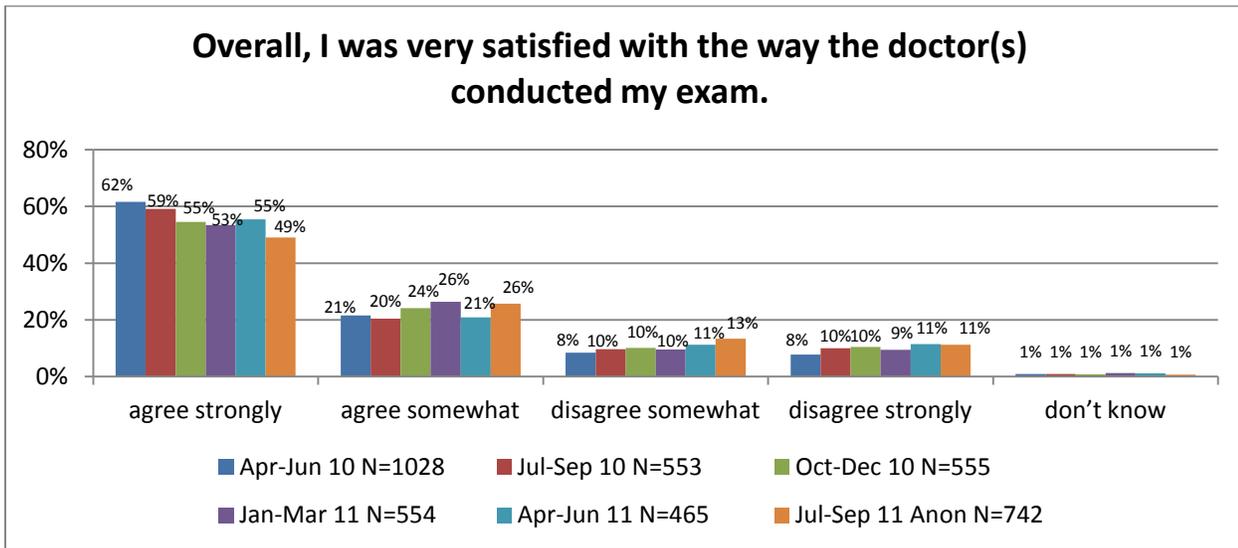
Below is a list of the periods in the survey and the number of respondents. Note the increase in response rate for the anonymous surveys. Data that became available in February 2012 indicates that the increased response rate seen in the anonymous surveys in the last quarter is related to the direct mailing distribution method, rather than the anonymity of the survey.

| Period | Number of Respondents |
|-------------------------------|------------------------------|
| April through June 2010 | 1028 |
| July through September 2010 | 553 |
| October through December 2010 | 555 |
| January through-March 2011 | 554 |
| April through June 2011 | 465 |
| July through September 2011 | 742 anonymous respondents |

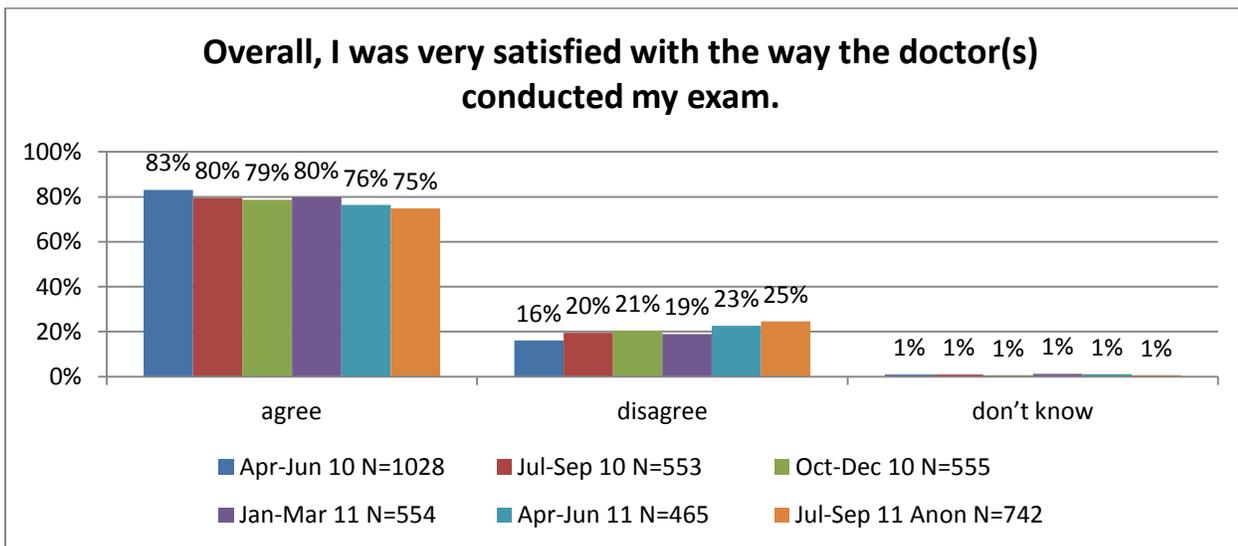
Comparing Anonymous to Identified Respondents

Members of the IME Business and Labor Committee expressed the concern that injured workers would feel inhibited in expressing dissatisfaction with their IMEs because the surveys asked them to identify themselves. I am happy to report that this does not appear to be a problem. The results of the anonymous survey are lower in overall satisfaction than previous quarters. However, when viewed as part of a series of quarterly results, you can see that the results are consistent with the trend. This is clear in the charts below. The first chart displays all the available responses for the “Overall, very satisfied” question. The second chart consolidates all those who agree and those who disagree about being “Overall, very satisfied”.

All responses displayed



Consolidated responses displayed



The other questions included in the survey also showed results that were consistent with previous quarters.

The data contained in the surveys has not yet yielded any information that can be considered causal when analyzed in relation to the slowly declining level of overall satisfaction.

Respondent Satisfaction with Providers

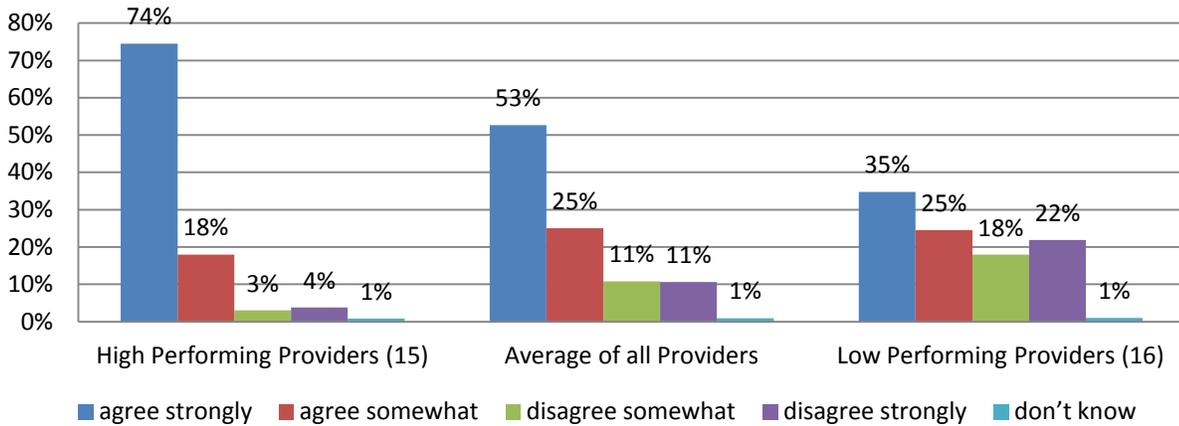
Through a combination of information provided on the surveys and information gleaned from billing data it was possible to identify providers associated with 3100 surveys. Using the same method, it was possible to identify the firms associated with 2846 surveys. Using this information we were able to find levels of satisfaction by provider and by firm, and analyze responses to each question in the survey based on provider and firm.

We have established criteria that define High, Above Average, Below Average, and Low levels of satisfaction based on the levels of overall satisfaction reported by respondents in the survey. We used the responses to the statement “Overall, I was very satisfied with the way the doctor(s) conducted my exam”. We combined the responses of those who said they agreed strongly with the statement with those who agreed somewhat with the statement to come up with a number of respondents who were willing to agree that they were “Overall, ...very satisfied...”. We also combined the responses of those who disagreed strongly and disagreed somewhat with the statement to come up with the number of respondents who felt they disagreed about being. “Overall, ...very satisfied...” This allowed us to calculate simple percentages of those who “agreed” and those who “disagreed” that we are using as proxies for satisfied and dissatisfied. Using the combined responses, we discovered that the average for all surveys with identified providers was; 78% agree that they were very satisfied, 21% disagree about being very satisfied and 1% didn’t know whether they agreed or not. Based on that information we established the following criteria:

- High satisfaction providers are those whose satisfaction levels, based on the “agree” percentages are more that 10% above the average (89% or higher in this case).
- Above average satisfaction providers are those whose satisfaction levels, based on the “agree” percentages are above average but not more that 10% above the average (79% to 88% in this case).
- Below average satisfaction providers are those whose satisfaction levels, based on the “agree” percentages are at or below average but not more that 10% below the average (78% to 68% in this case).
- Low satisfaction providers are those whose satisfaction levels, based on the “agree” percentages are more that 10% below the average (67% or lower in this case).

From this information we have created charts which compare the responses to the survey questions for High Satisfaction providers, the average of all providers, and Low satisfaction providers. The chart below shows the overall satisfaction question for this comparison. A comparison of these three groups for the entire survey is at Attachment 1.

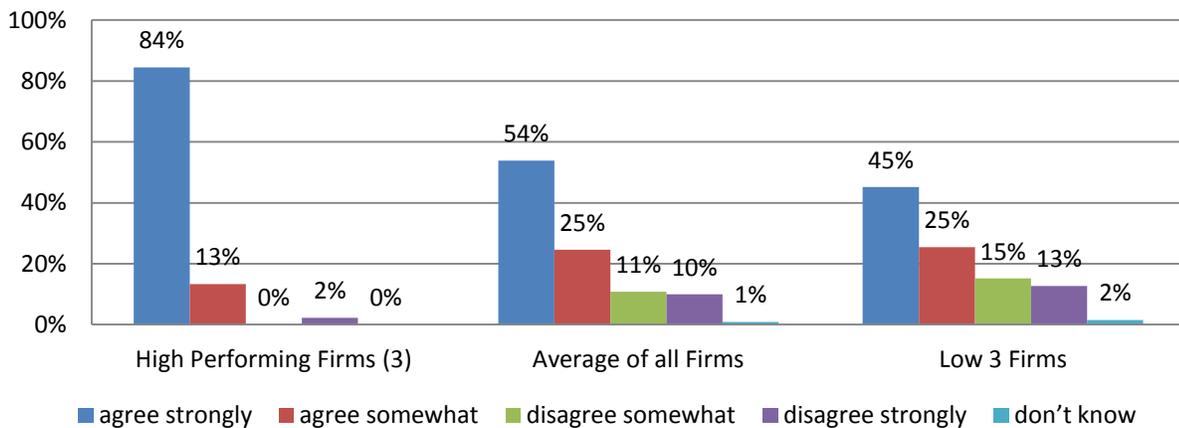
Overall, I was very satisfied with the way the doctor(s) conducted my exam.



Respondent Satisfaction with Firms

Fortuitously, the average for all surveys with identified firms was also; 78% agree that they were very satisfied, 21% disagree about being very satisfied and 1% didn't know whether they agreed or not. Therefore we used the same set of criteria when comparing firms, with one modification. Since there were only three firms that were more than 10% above average and no firms that were more than 10% below average, we used the three lowest satisfaction firms as our low comparison on the charts. Below is the overall satisfaction chart for this comparison. A comparison of these three groups for the entire survey is at Attachment 2.

Overall, I was very satisfied with the way the doctor(s) conducted my exam.



Conclusion

The increased response rate for the anonymous survey implies that identifying themselves is a concern for some Injured Workers. That the responses from the anonymous surveys are consistent with the responses from the identified surveys reassures us that the respondents who identify themselves are not unduly influenced by fear of identifying themselves to the Department.

The data in the survey has not allowed us to identify a specific cause for the slow decline in overall satisfaction among respondents.

The performance analysis for the providers and firms will provide a new tool to help guide discussions between the Department and the IME provider community.

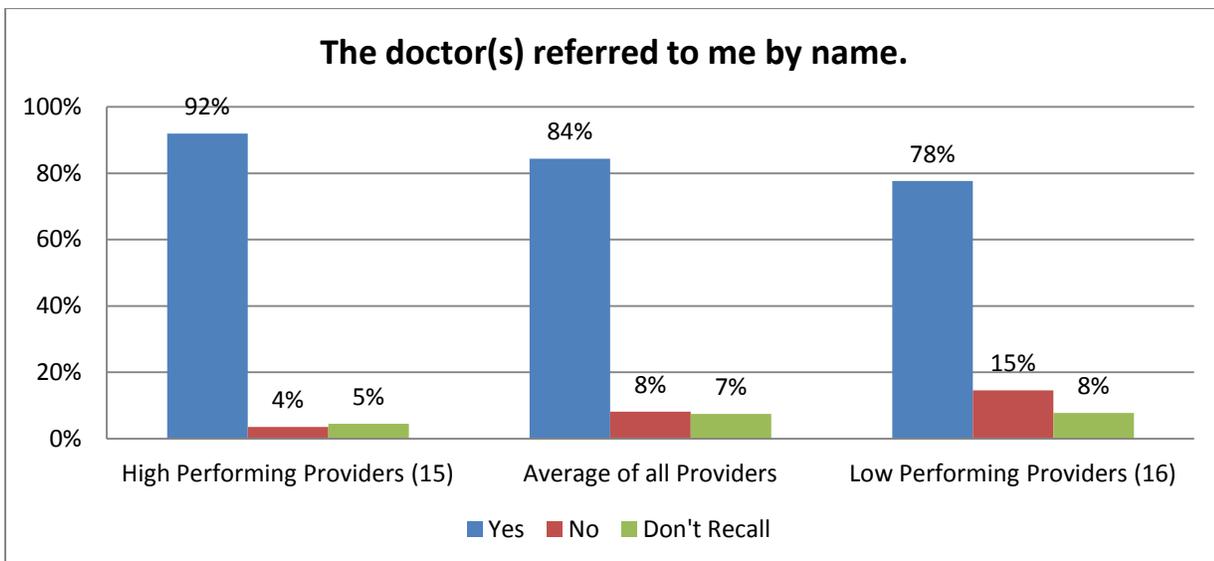
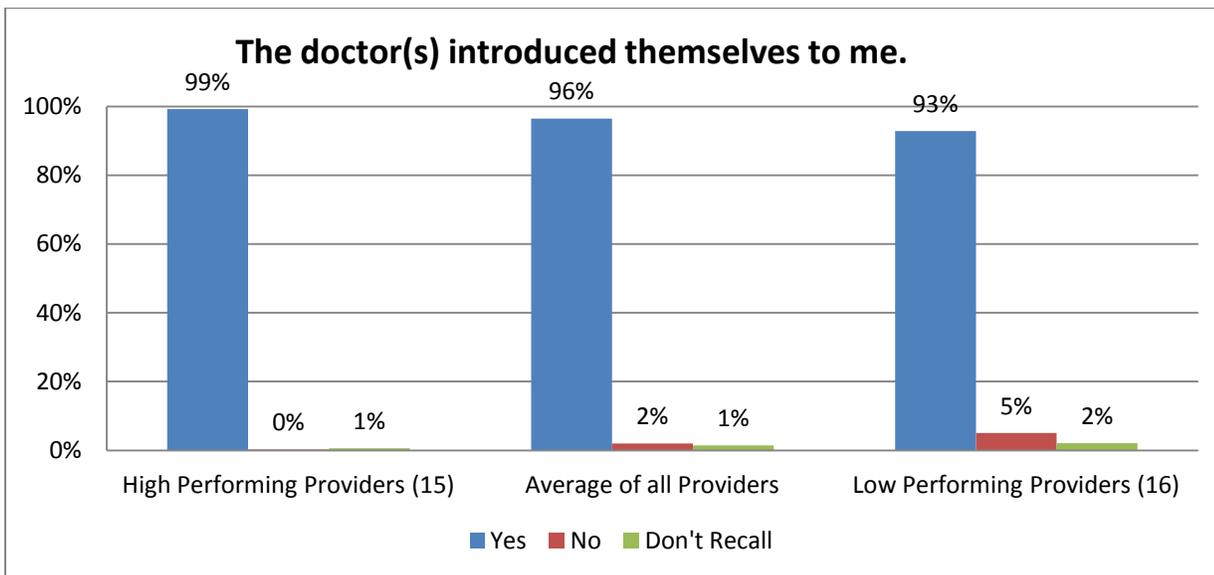
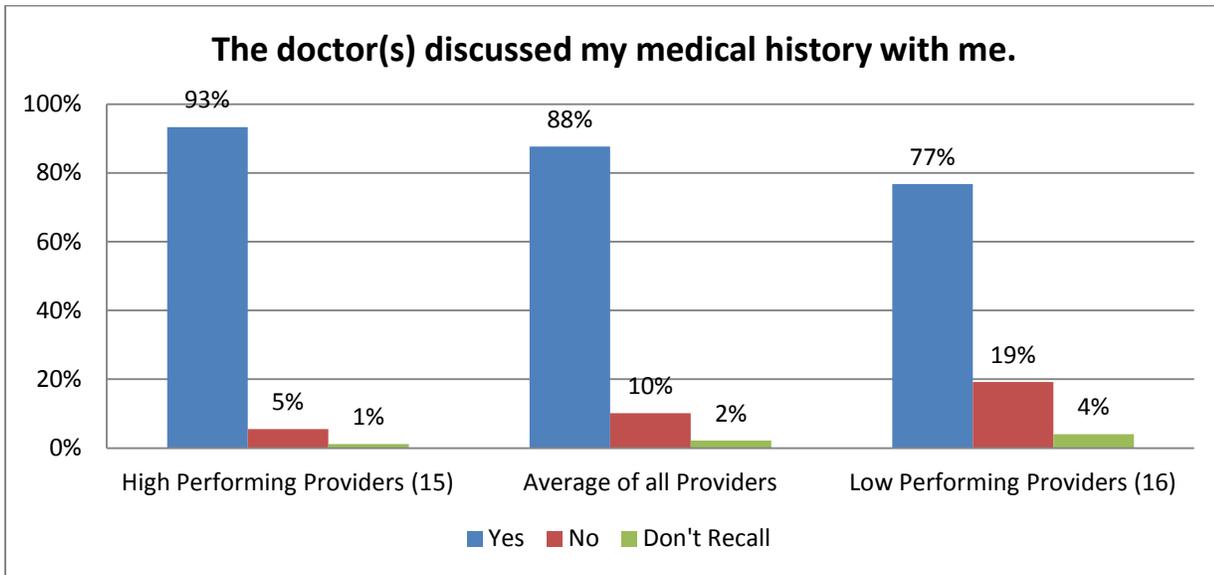
December Revision

In the November version of this report the Low Satisfaction group included 22 providers. On further review, it was discovered that 6 providers with satisfaction levels of 68% were included in the Low group that should have included only providers with satisfaction levels of 67% or lower. The charts in this version of the report correct that error. There was no effect on the scores of either the high satisfaction group or the averages of all providers. In the low satisfaction group the effect was to lower the scores by a marginal amount. The reduction was 2% or less for all the questions.

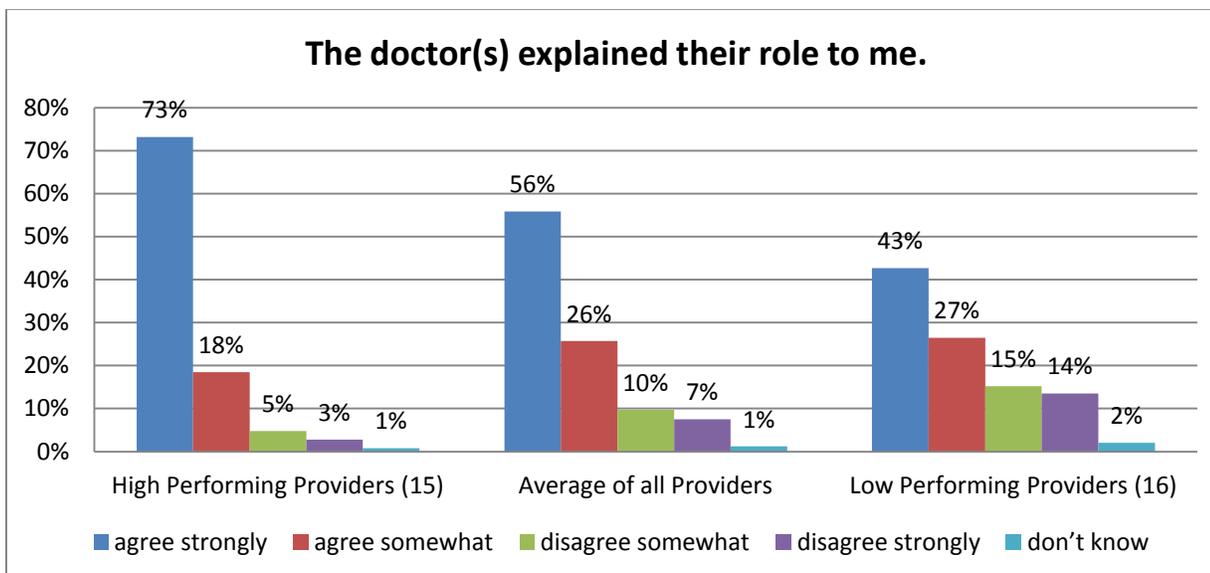
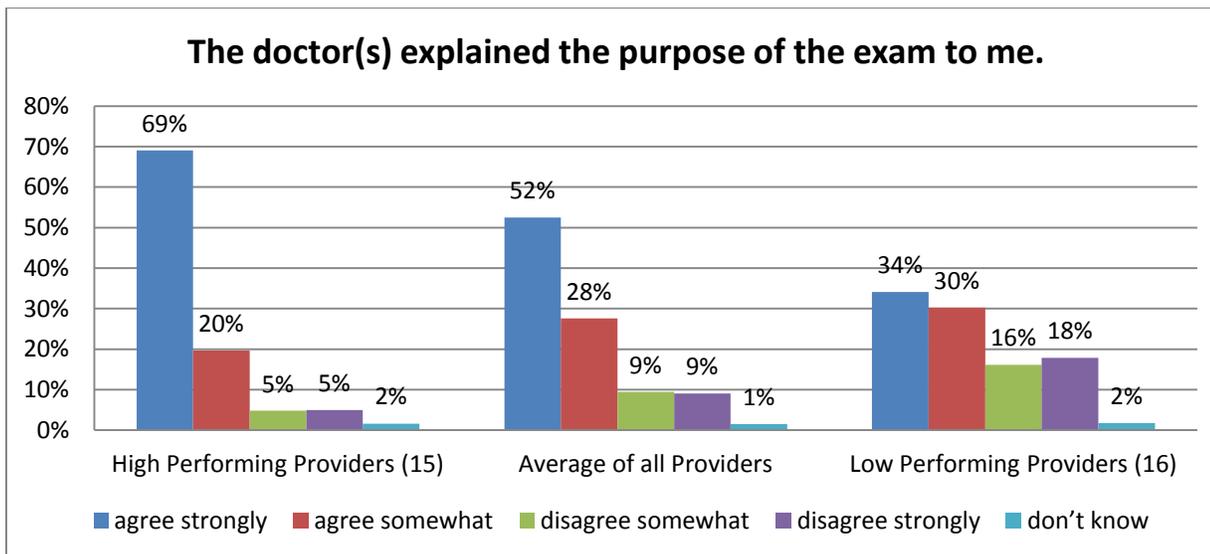
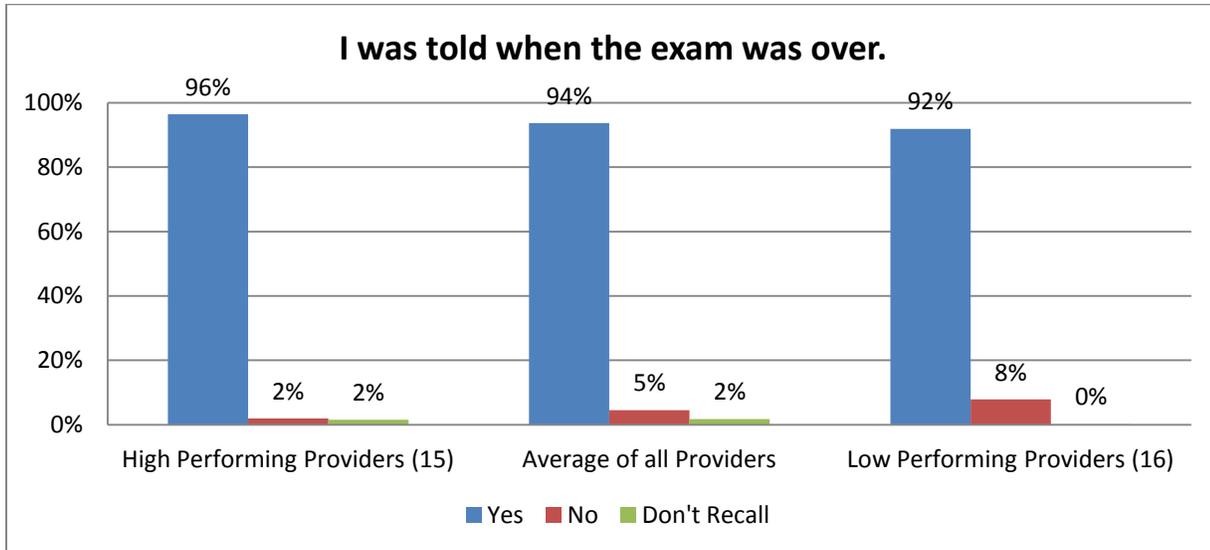
March Revision

In February 2012 we completed entering the data for October through December 2011, the first quarter of survey responses that were directly mailed to the Injured Workers and included identifying information on the returned surveys. We received 725 surveys, similar to the 742 anonymous surveys we received in the previous quarter. In the November version of this report I hypothesized that the increased rate of response was based on the anonymity of the surveys in the July through September 2011 quarter. This most recent data does not support that hypothesis.

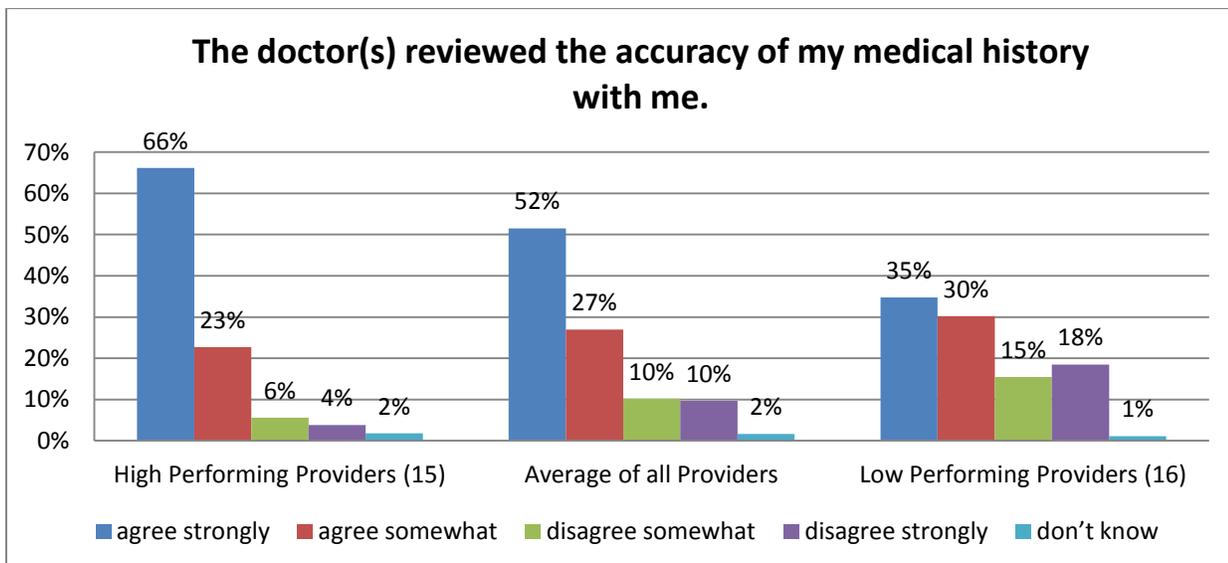
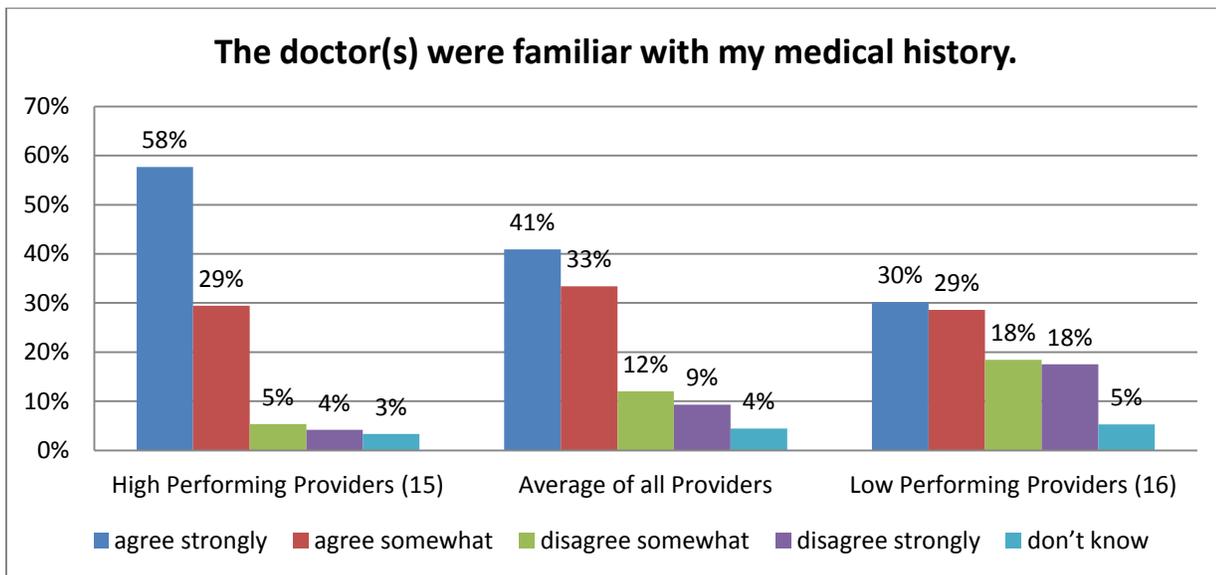
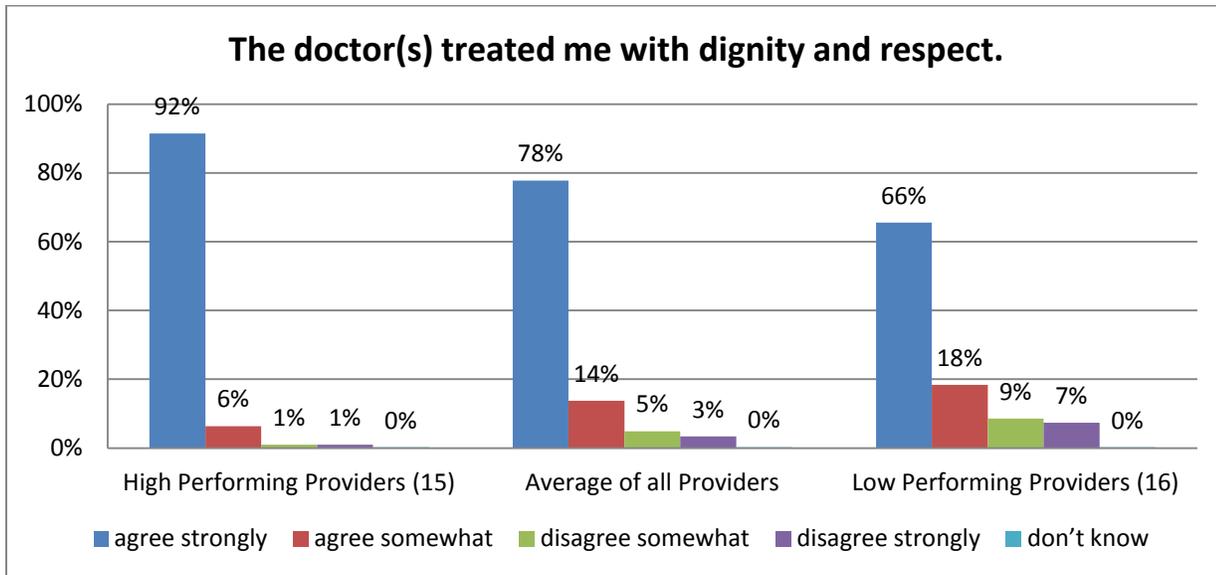
Attachment 1; Comparing Provider Satisfaction Levels



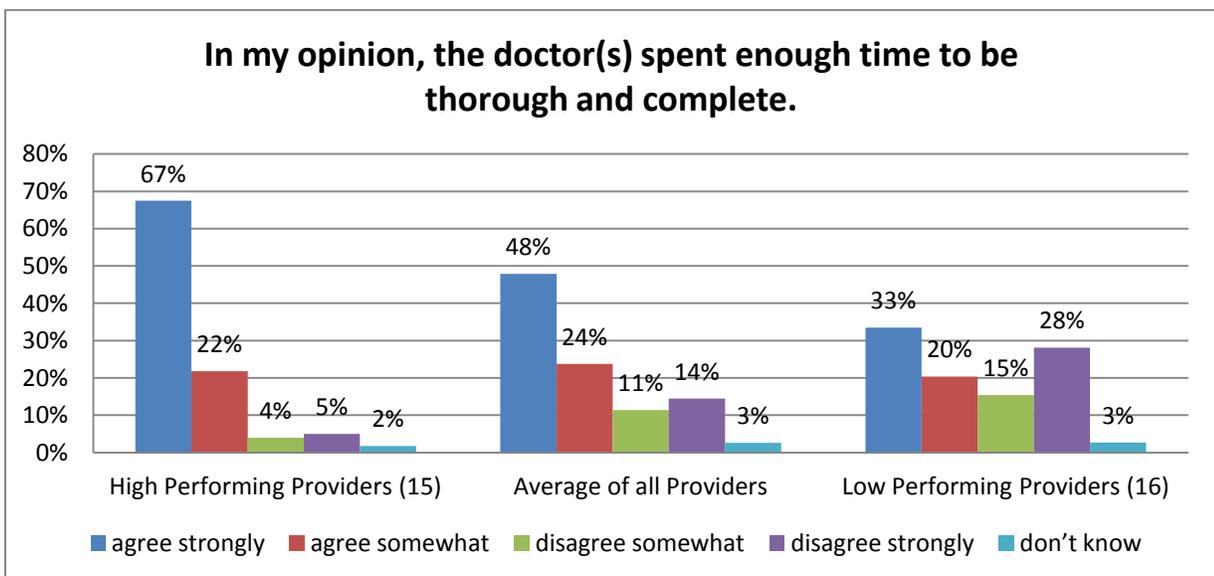
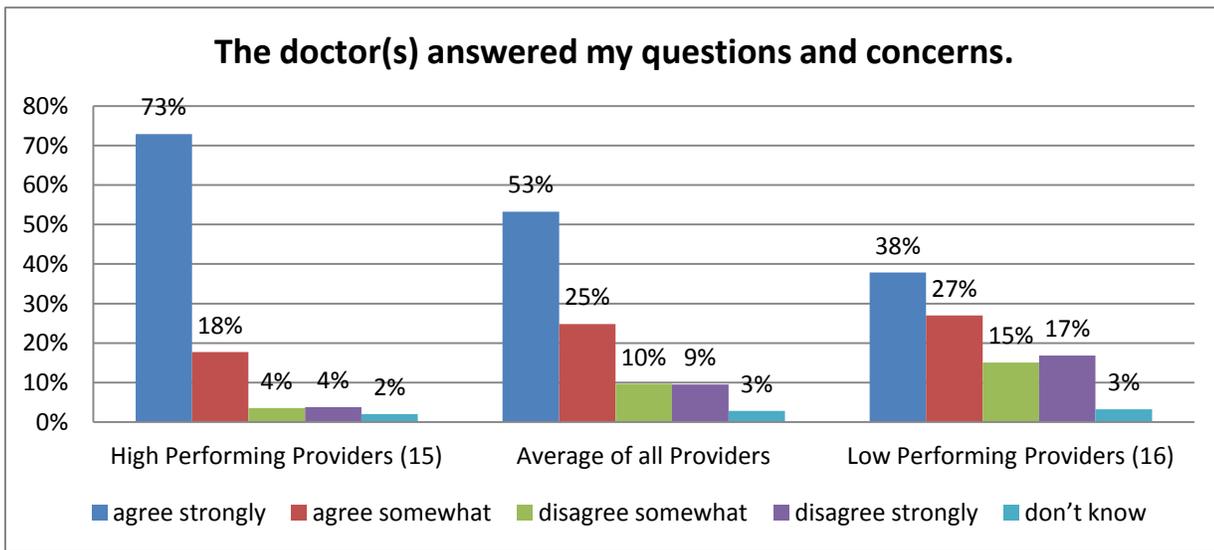
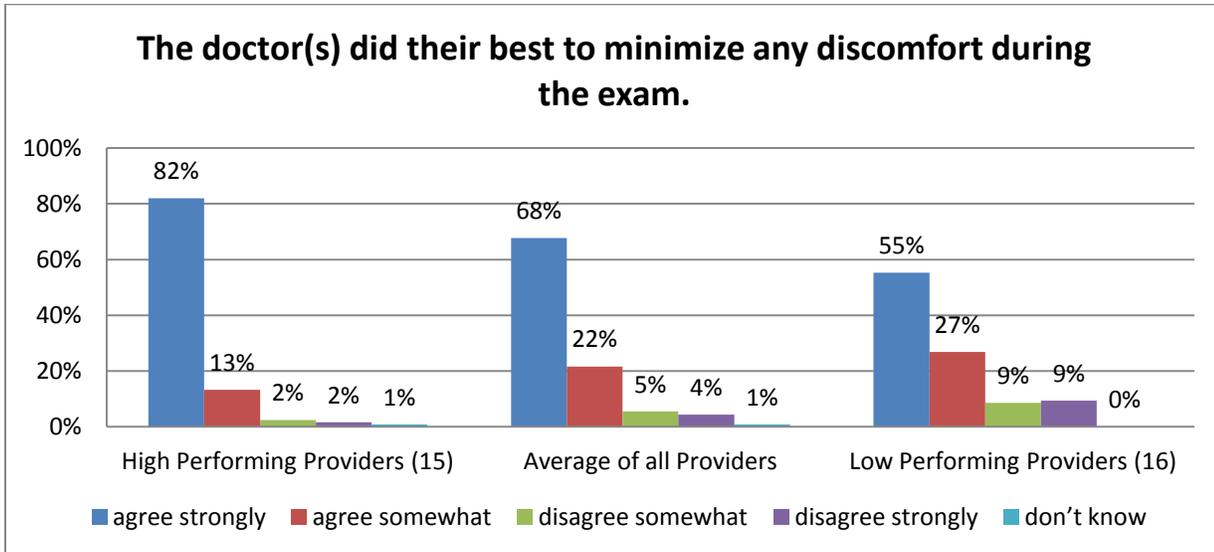
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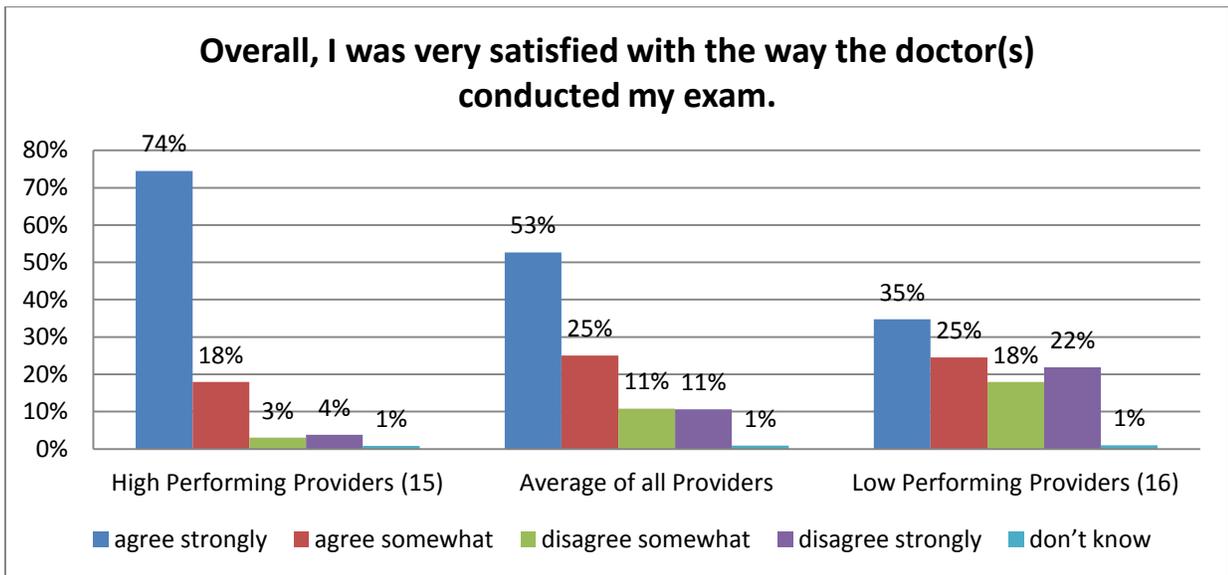
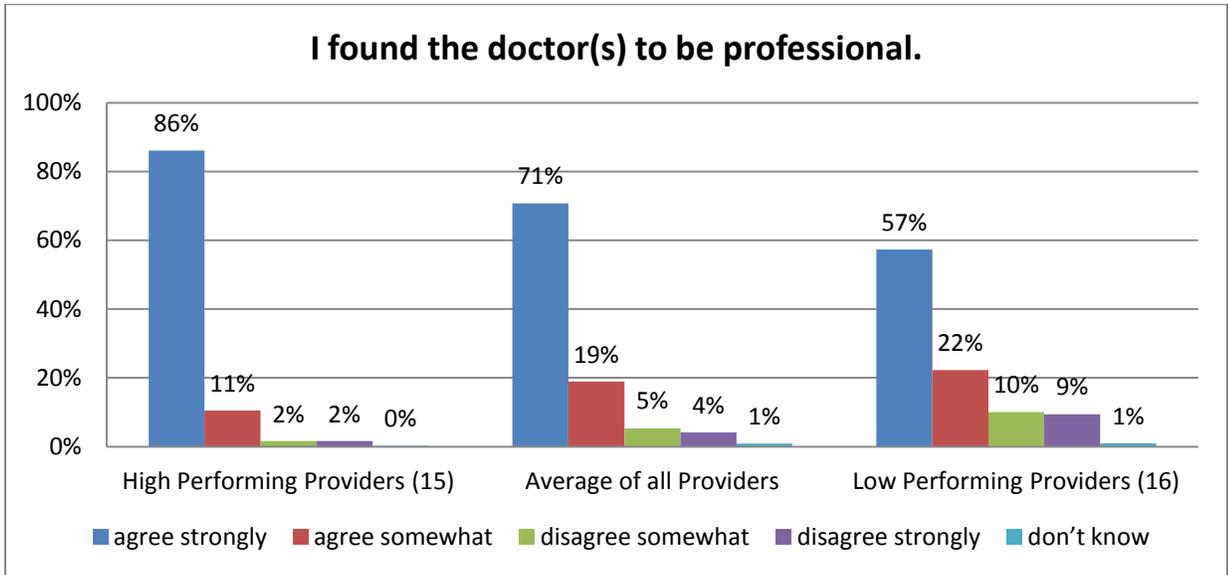
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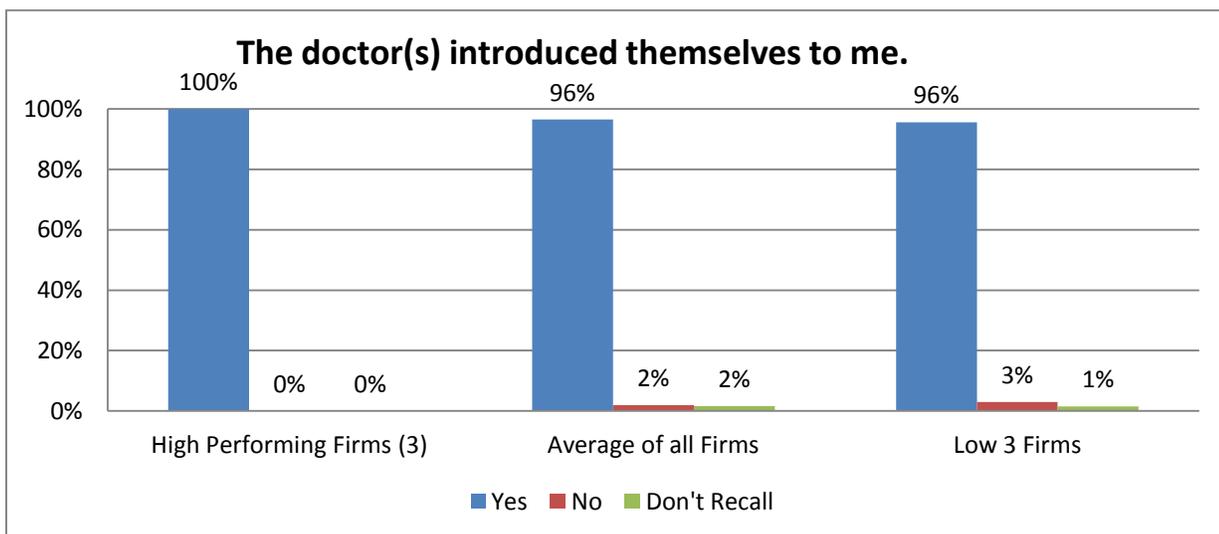
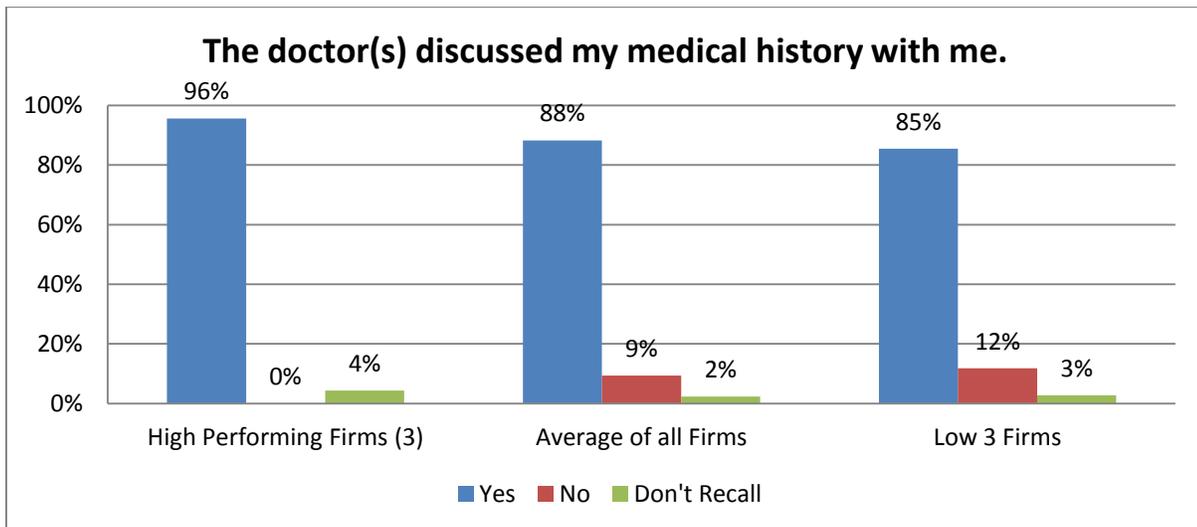
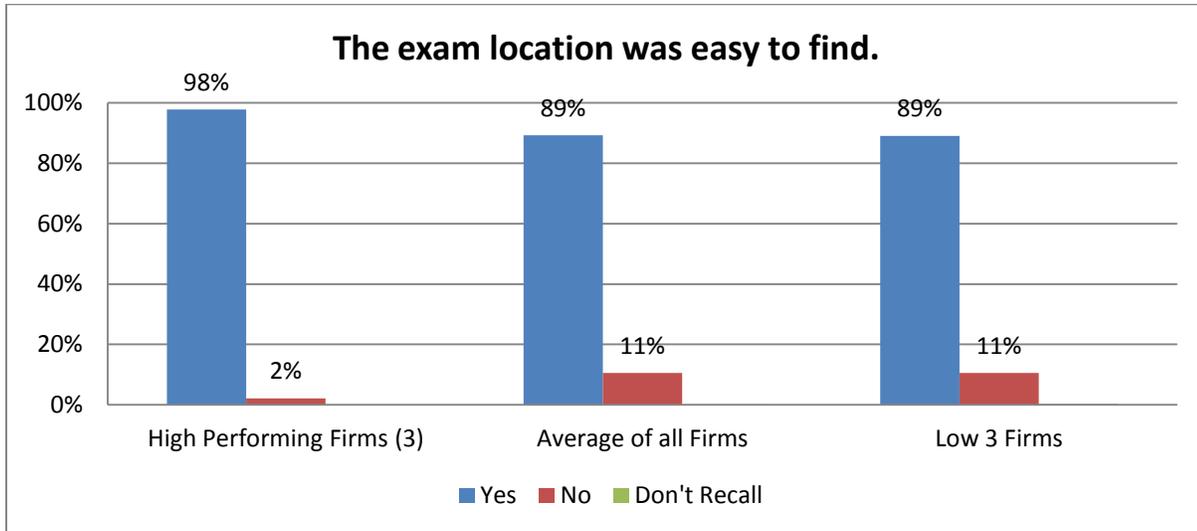
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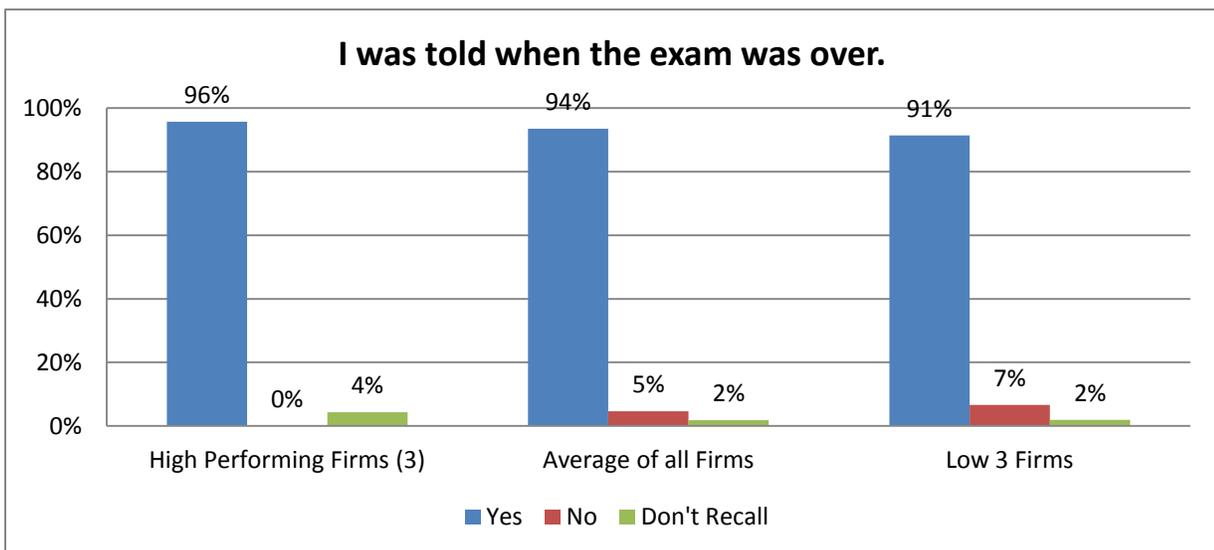
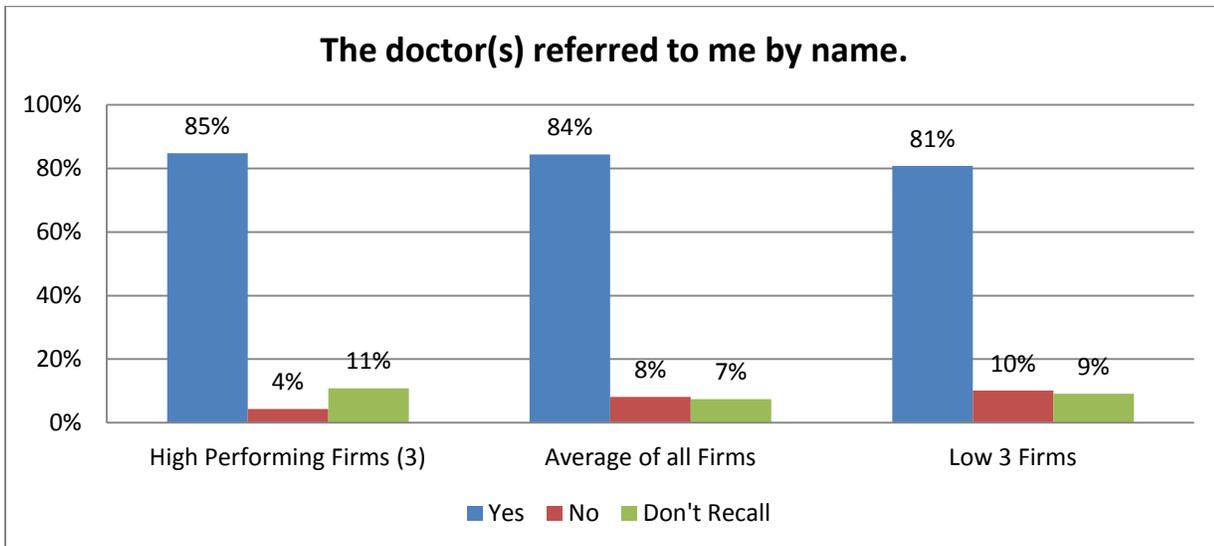
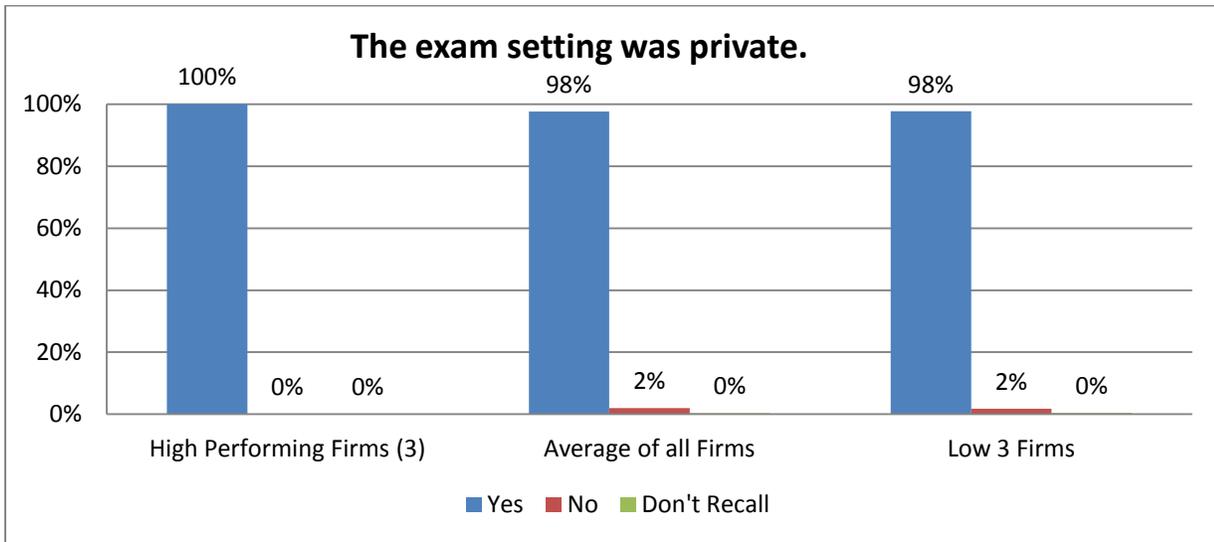
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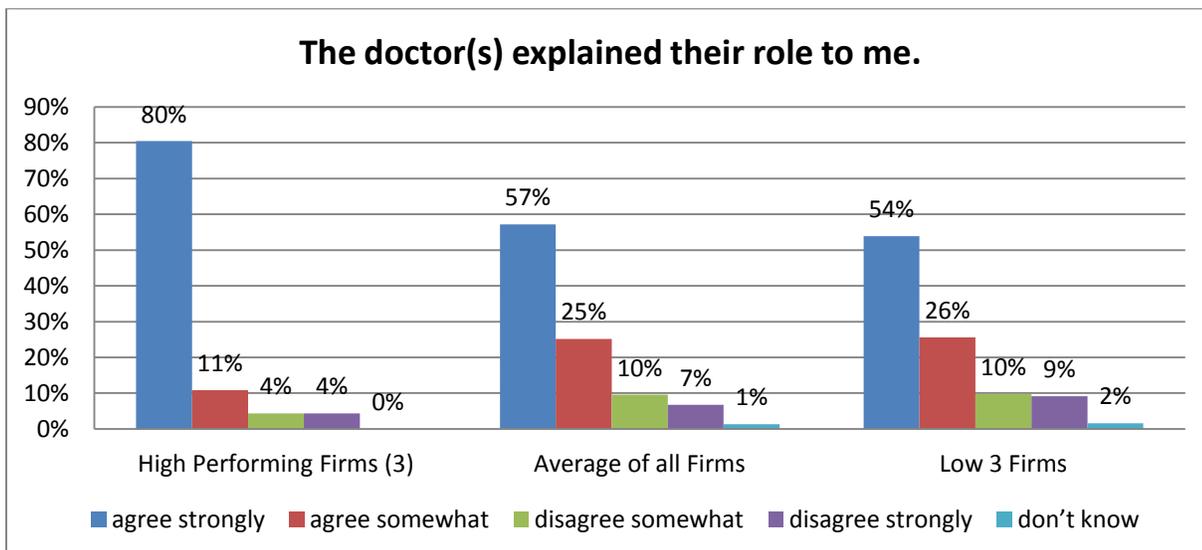
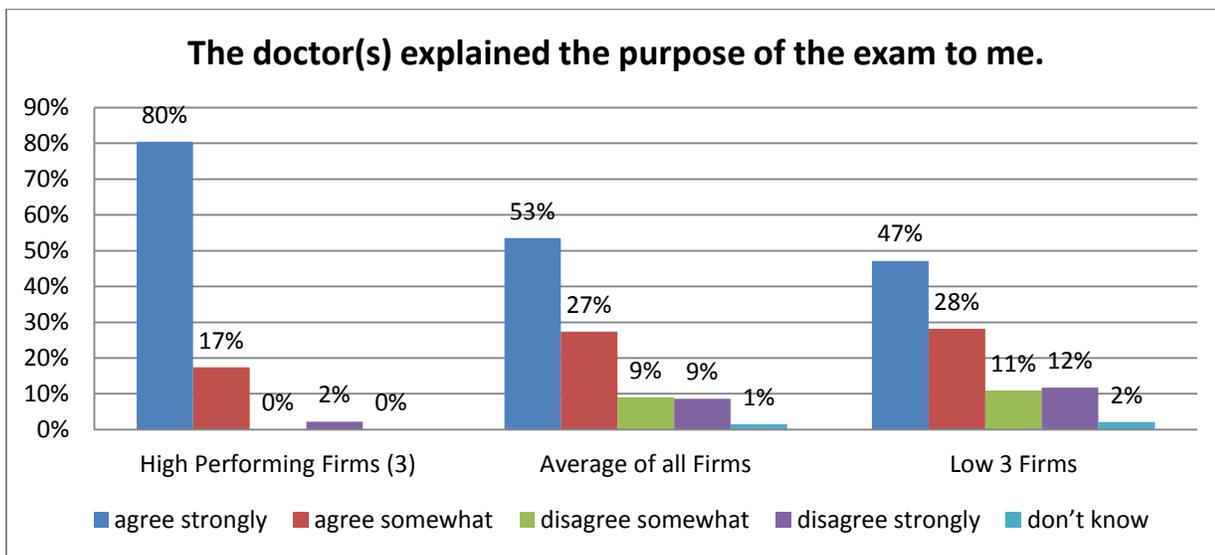
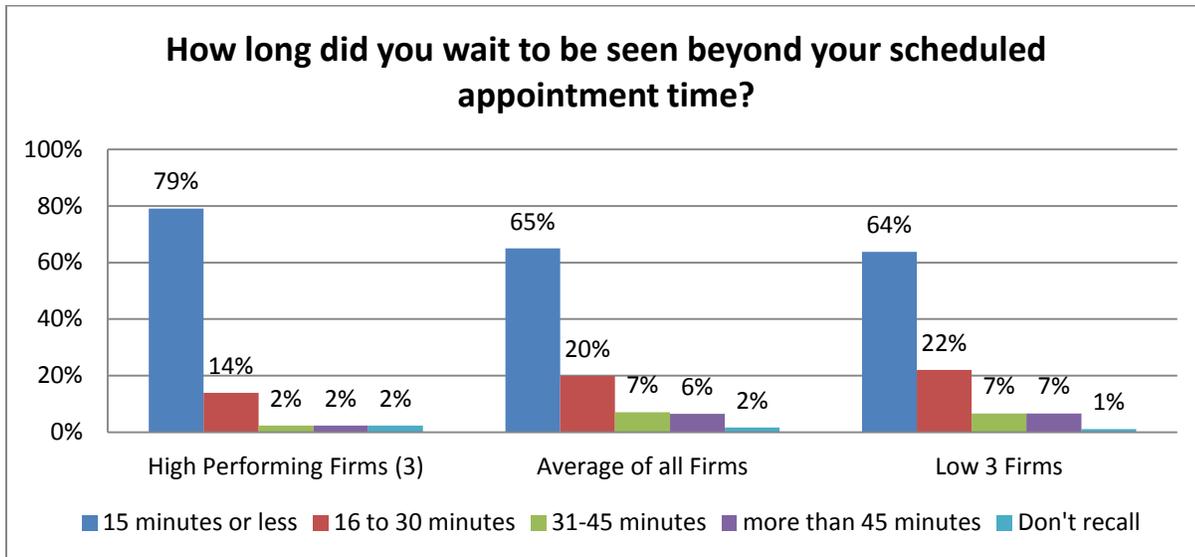
Attachment 2: Comparing Firm Satisfaction Levels



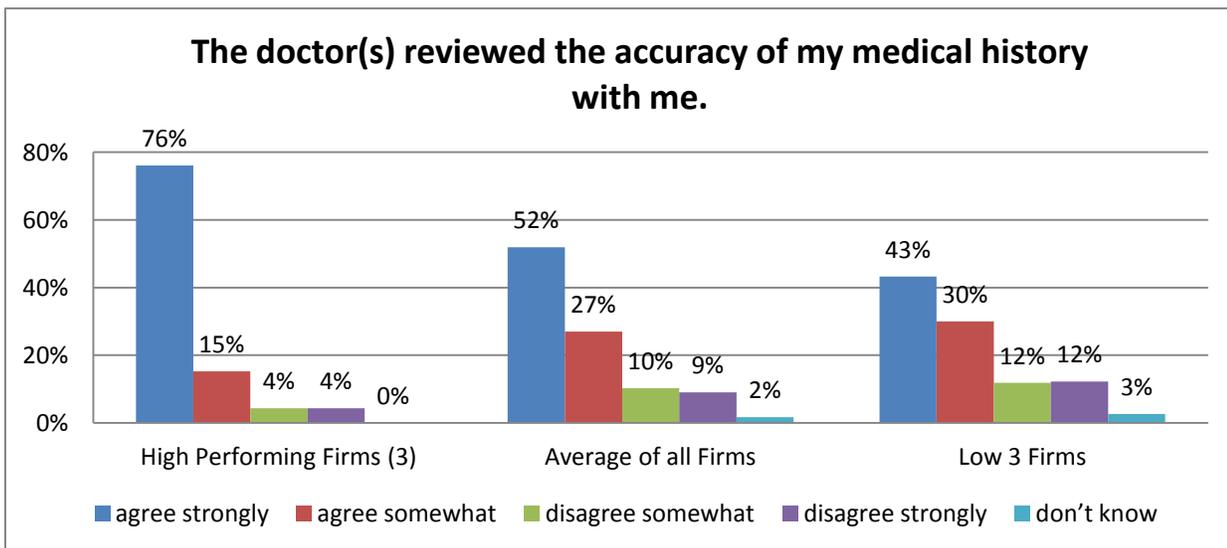
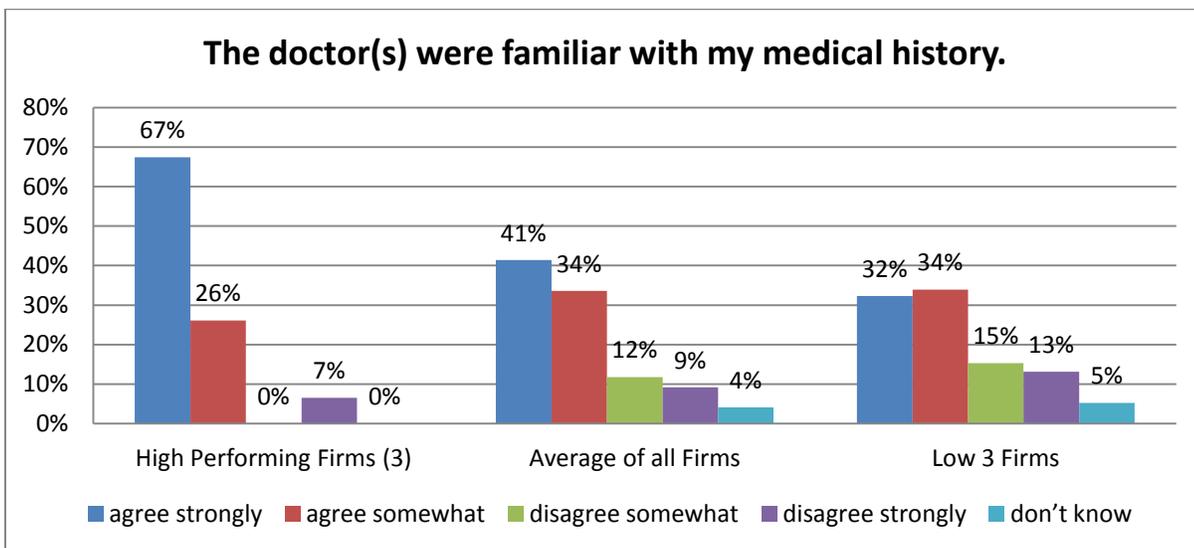
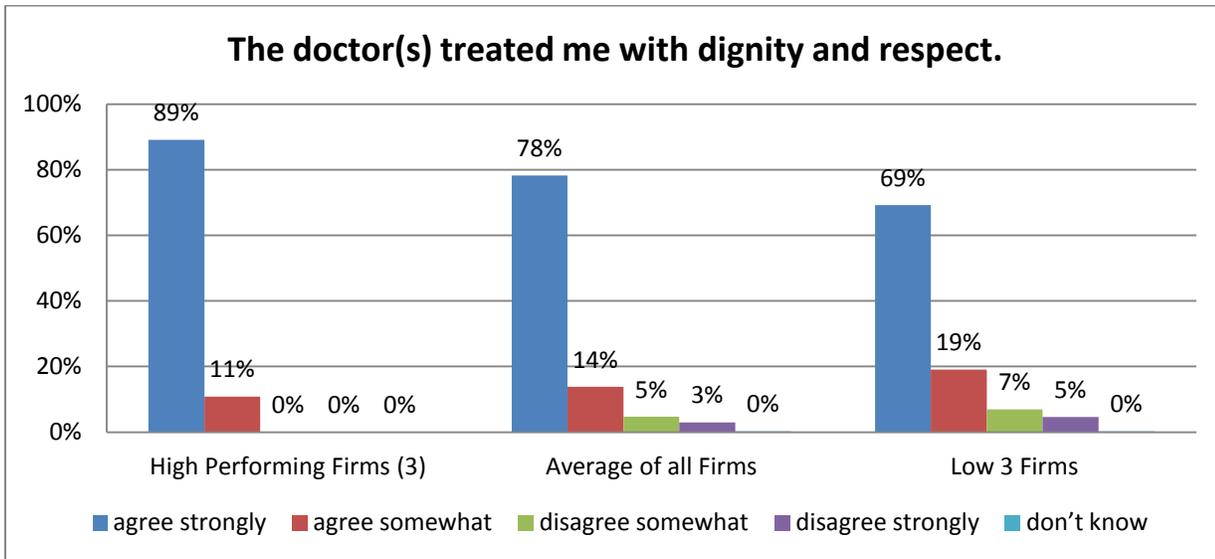
Attachment 2; Comparing Firm Performance



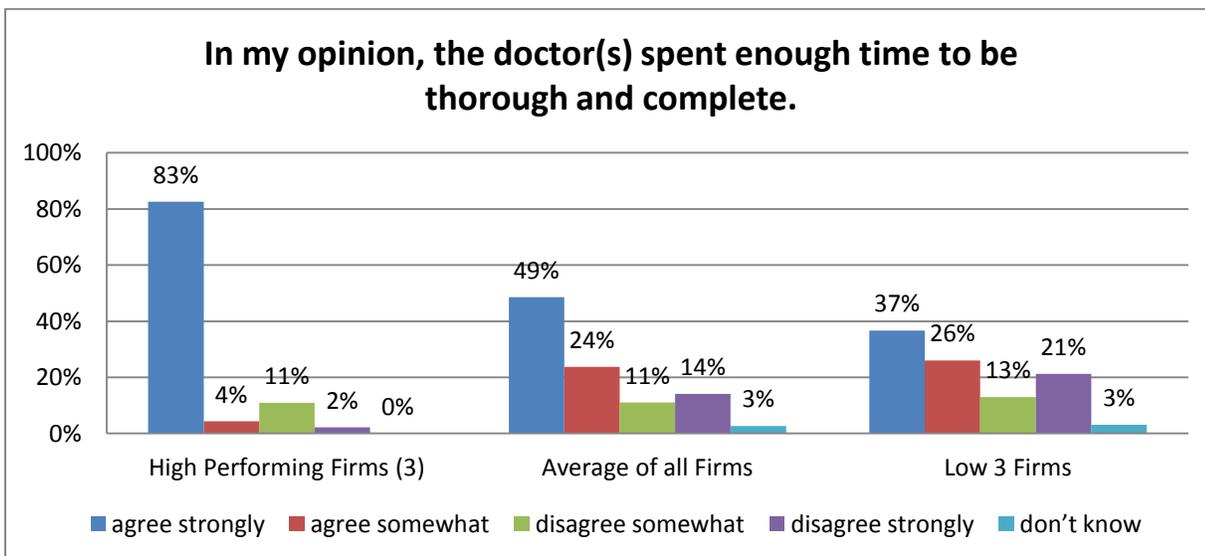
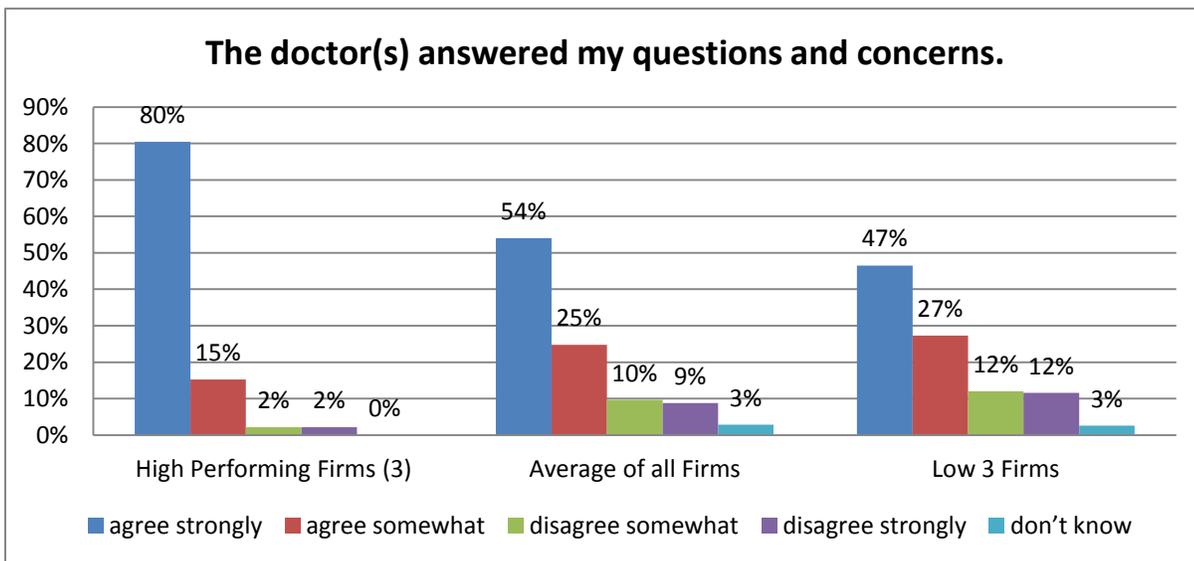
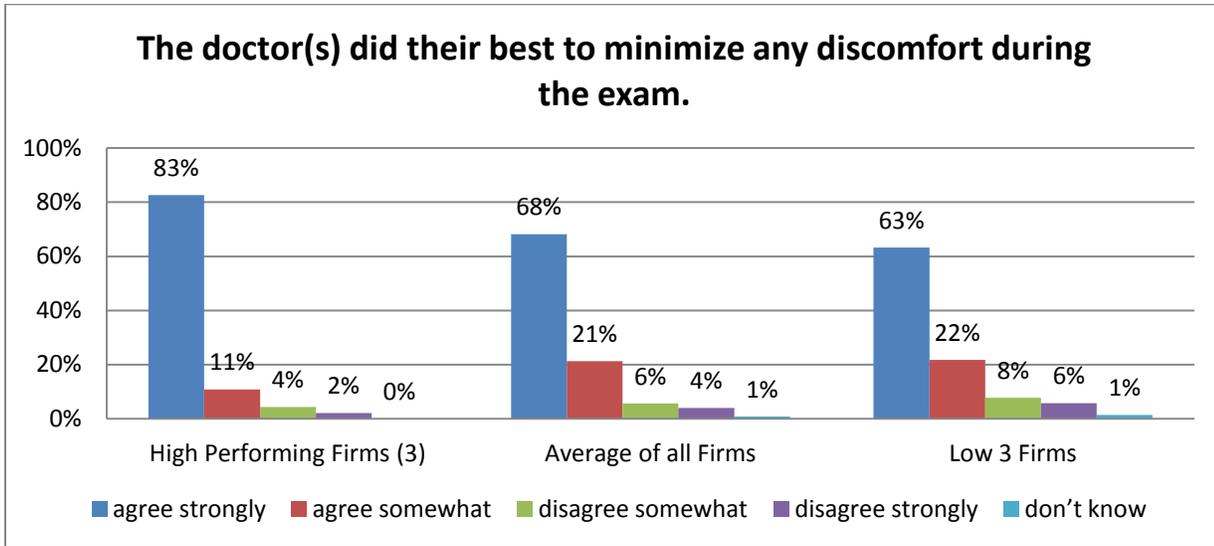
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