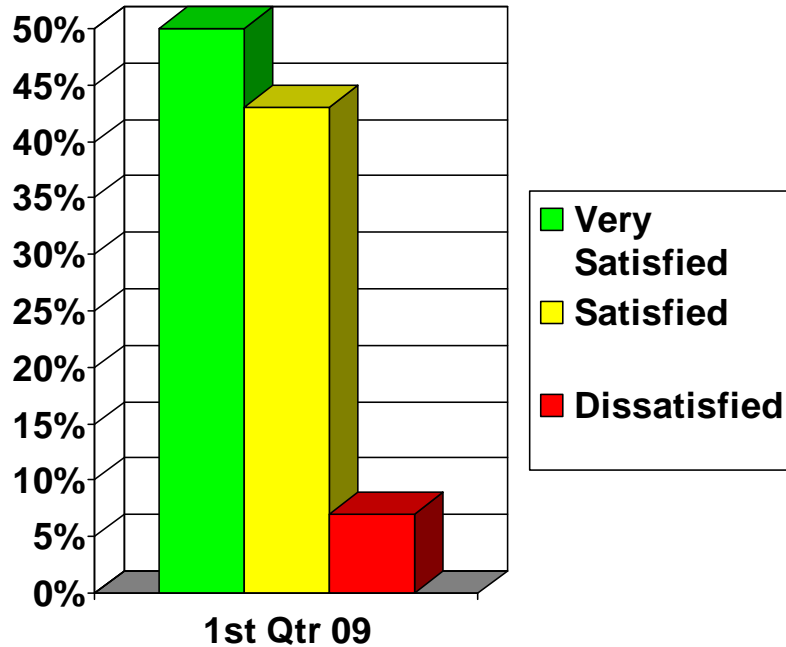


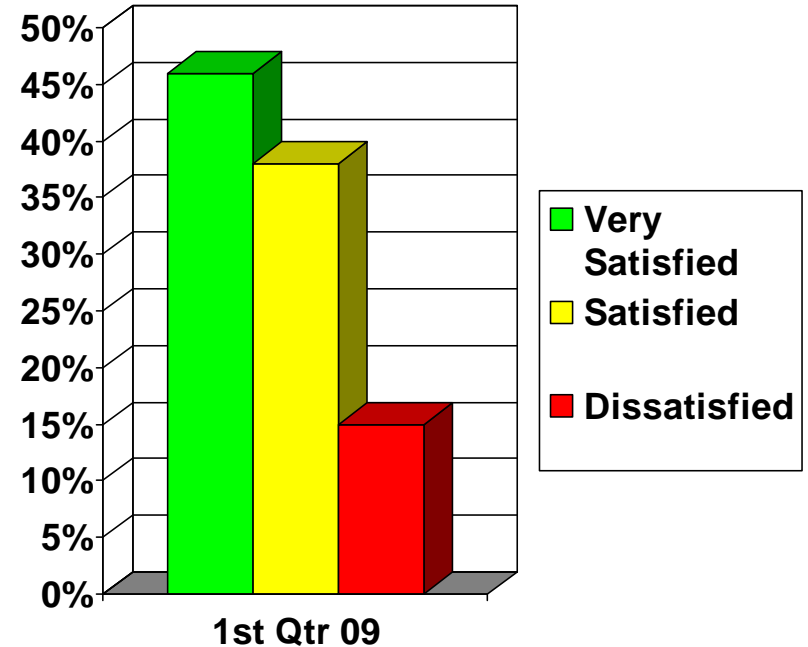
# GA Medicaid Provider Survey Result Comparison

## Vision: Q1 09

### Experience Verifying Eligibility on Web



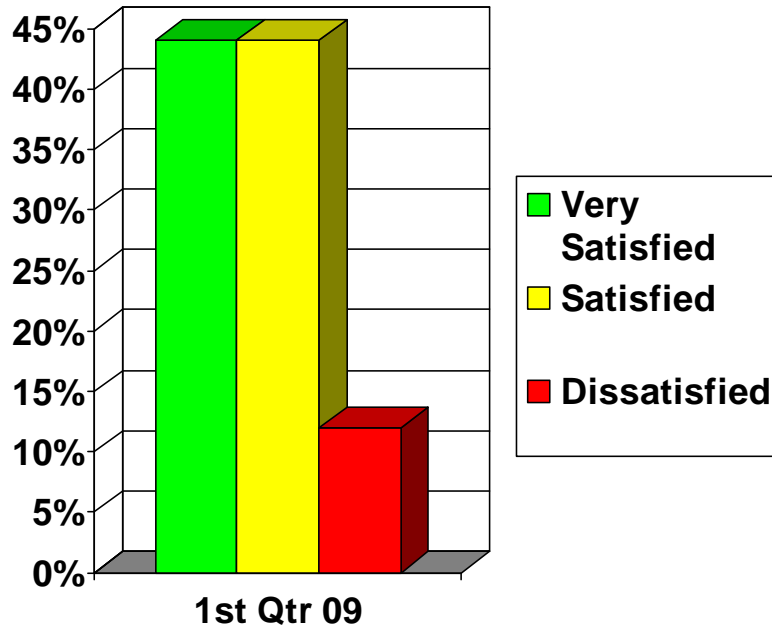
### Experience Verifying Eligibility with IVR



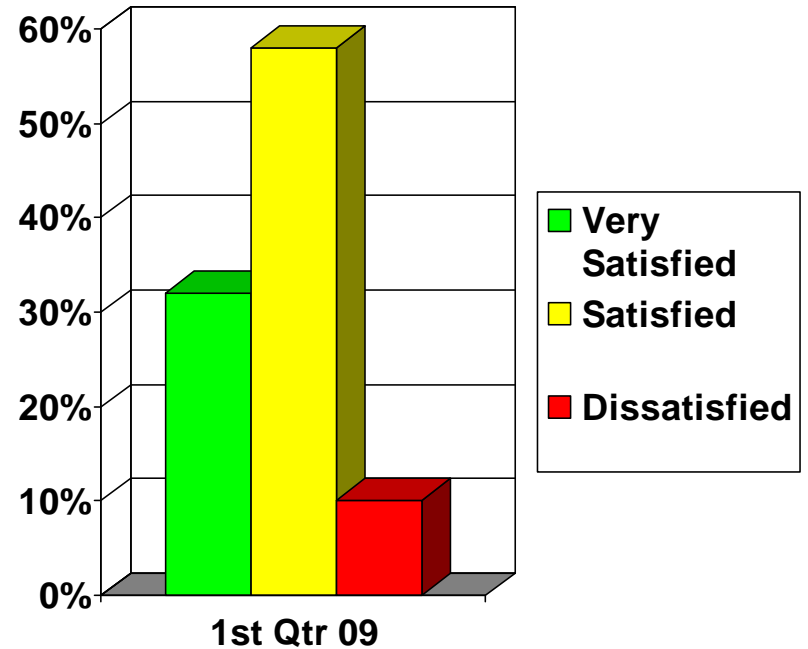
# GA Medicaid Provider Survey Result Comparison

## Vision: Q1 09

### Experience Verifying Eligibility with Customer Service



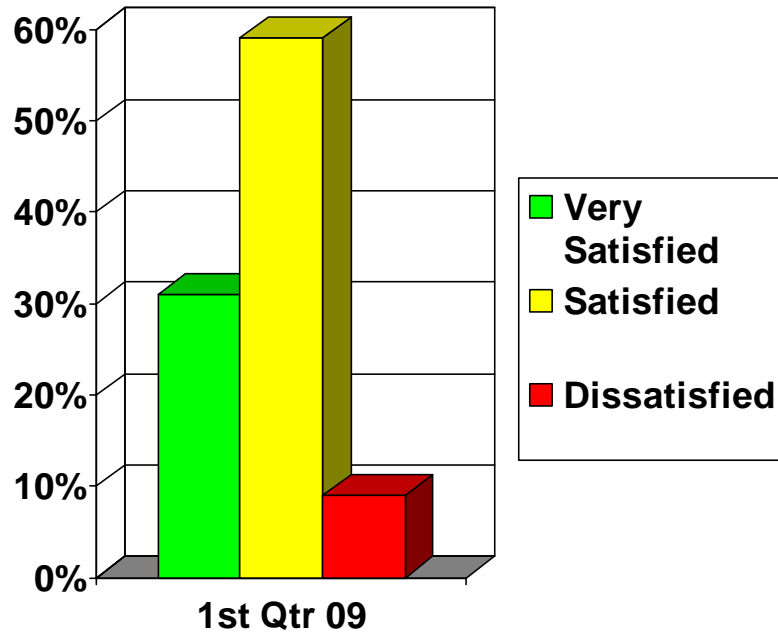
### Rate Customer Service Time to Answer



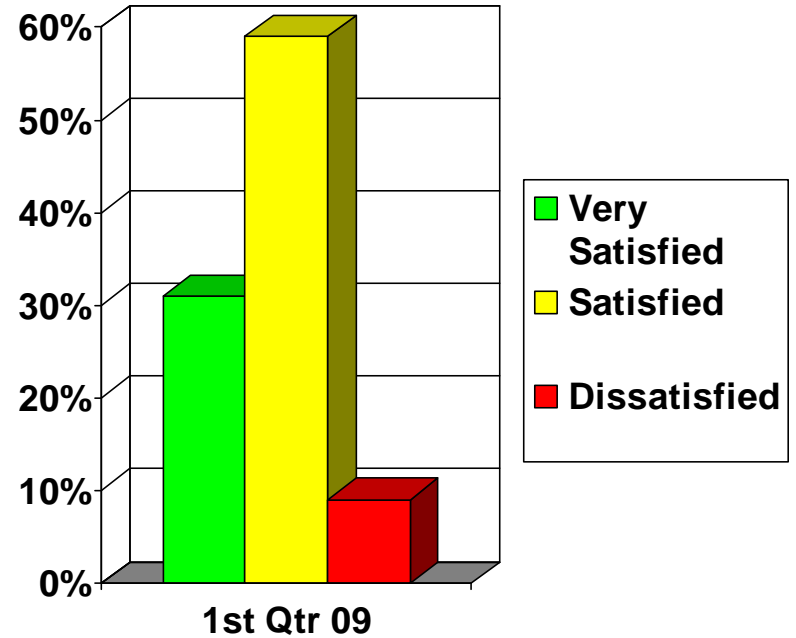
# GA Medicaid Provider Survey Result Comparison

## Vision: Q1 09

### Knowledge of Customer Service Rep



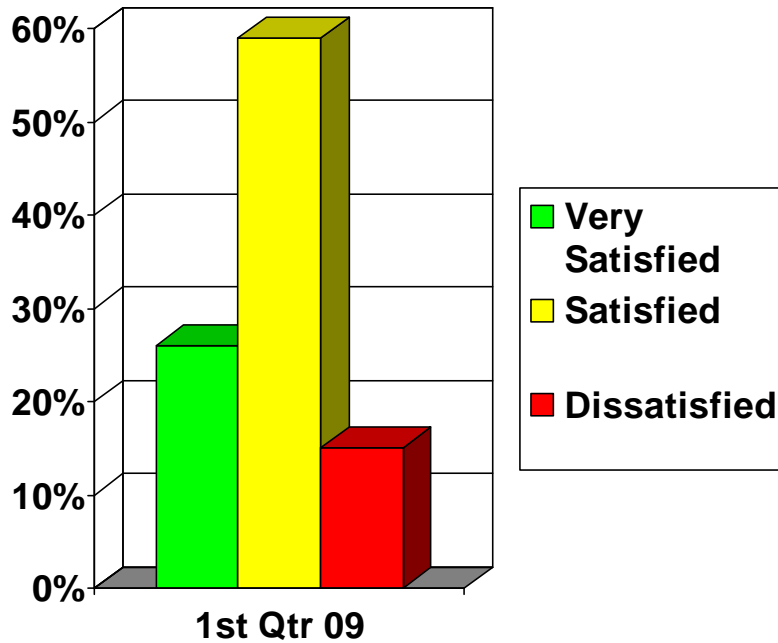
### Resolution of the call



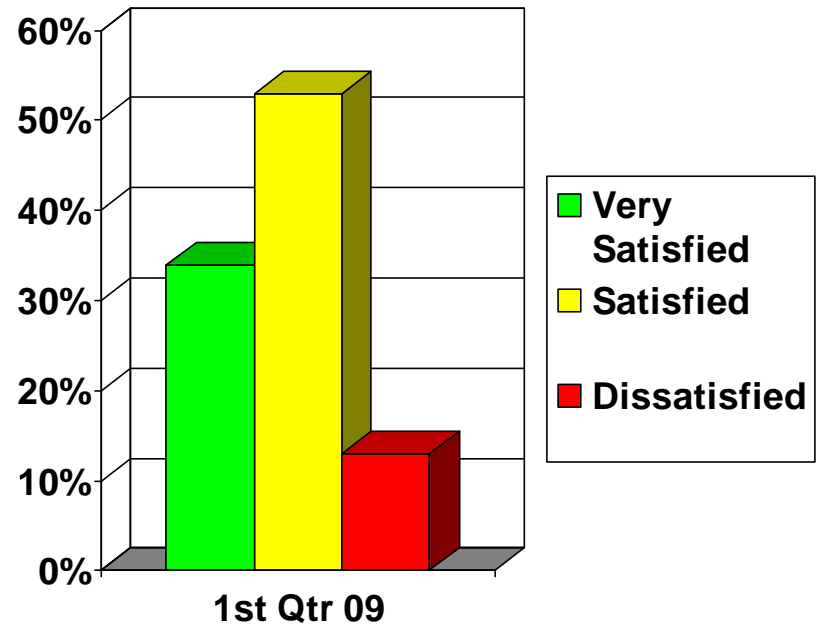
# GA Medicaid Provider Survey Result Comparison

## Vision: Q1 09

### Experience verifying claims status



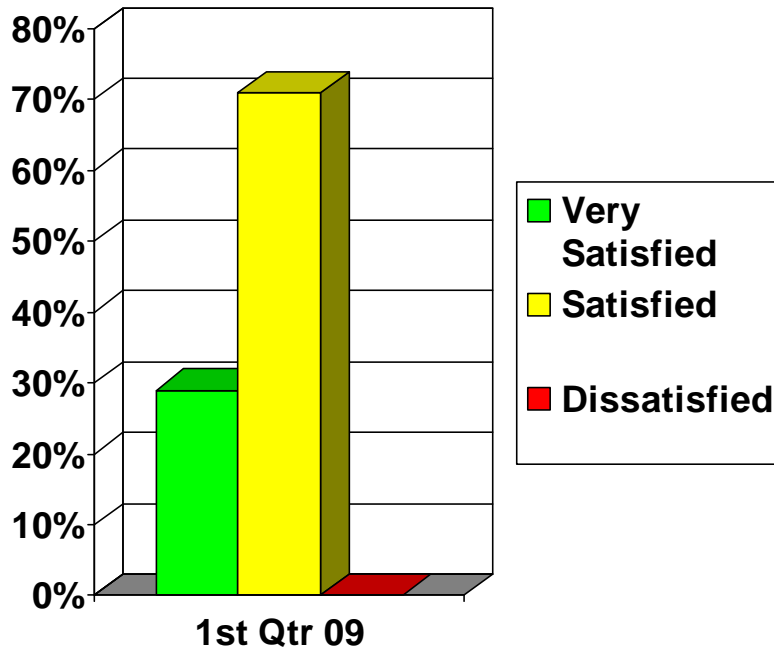
### Accuracy of Payment Amount



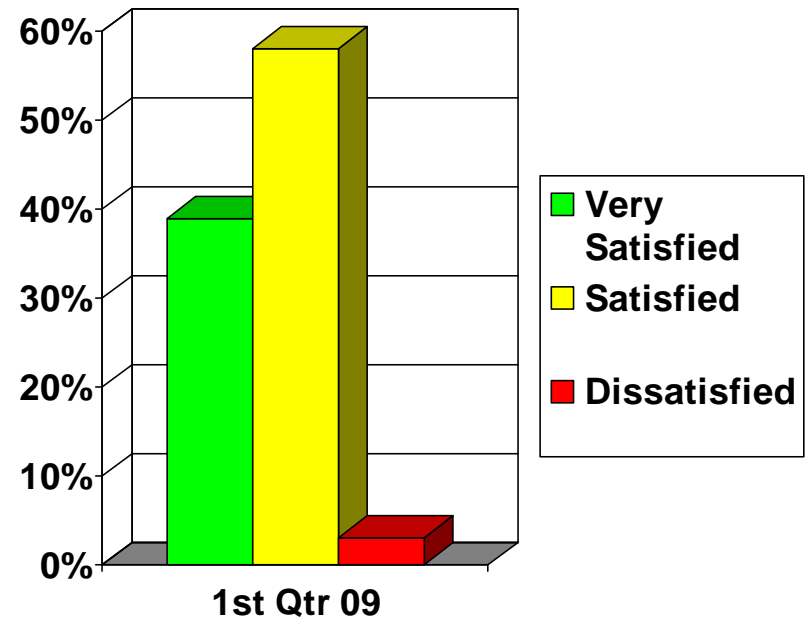
# GA Medicaid Provider Survey Result Comparison

## Vision: Q1 09

### Clarity of Remittance Advice



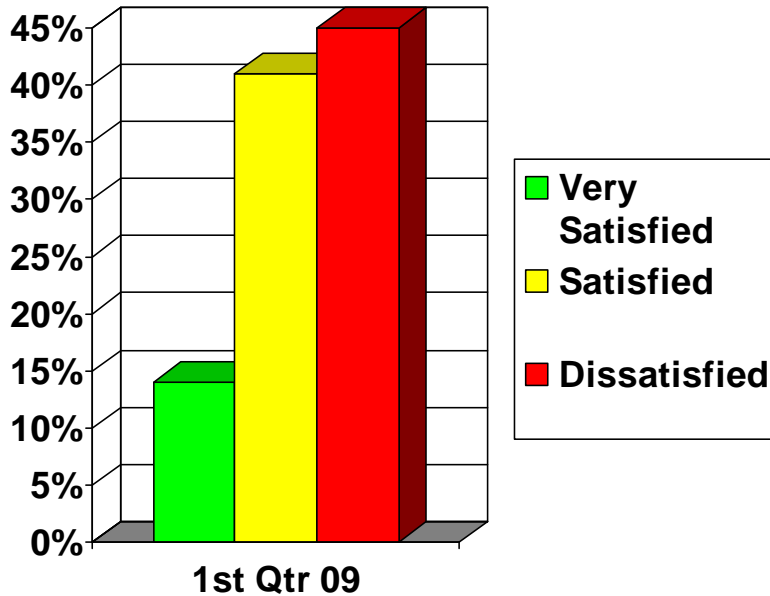
### Timeliness of Payment



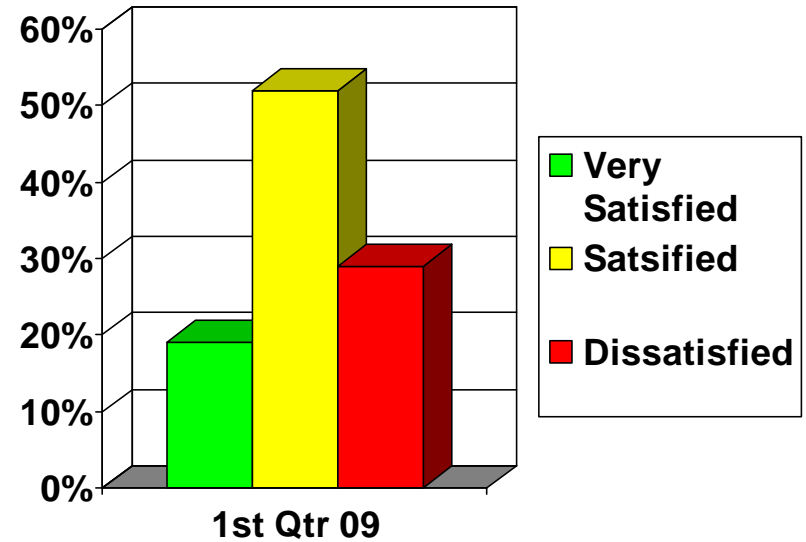
# GA Medicaid Provider Survey Result Comparison

## Vision: Q1 09

If you called for a prior authorization or pre estimate, rate time to respond



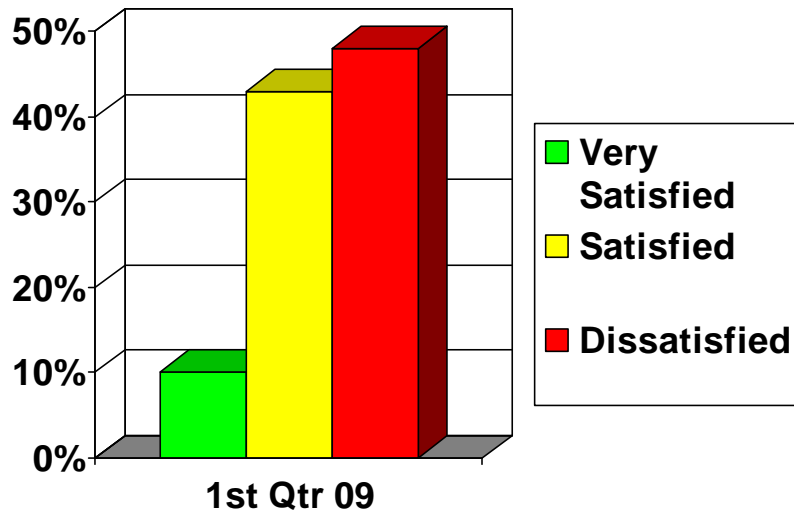
If you called for a prior authorization or pre estimate, rate knowledge of the provider service rep



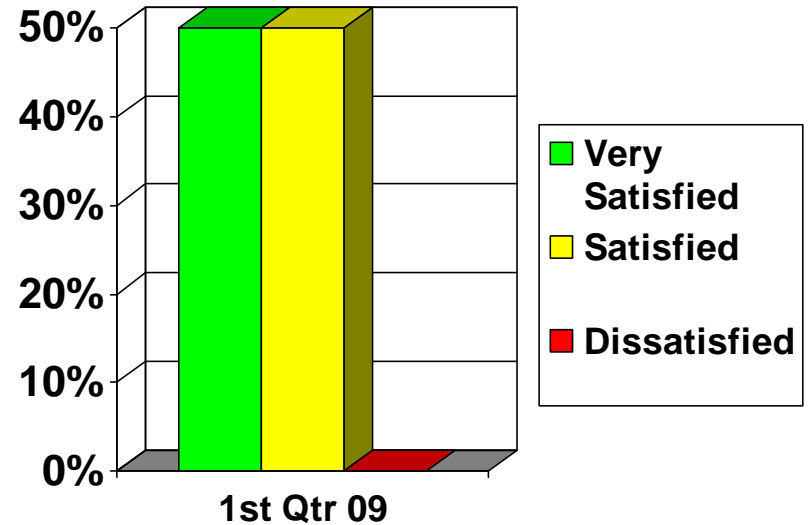
# GA Medicaid Provider Survey Result Comparison

## Vision: Q1 09

**If request was denied, were you provided adequate info regarding reason for denial?**



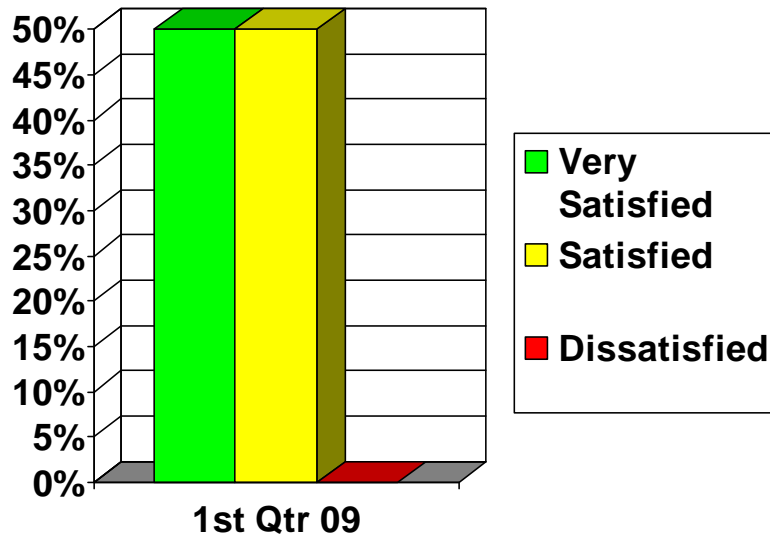
**If you attended a provider education session, rate the presentation of material**



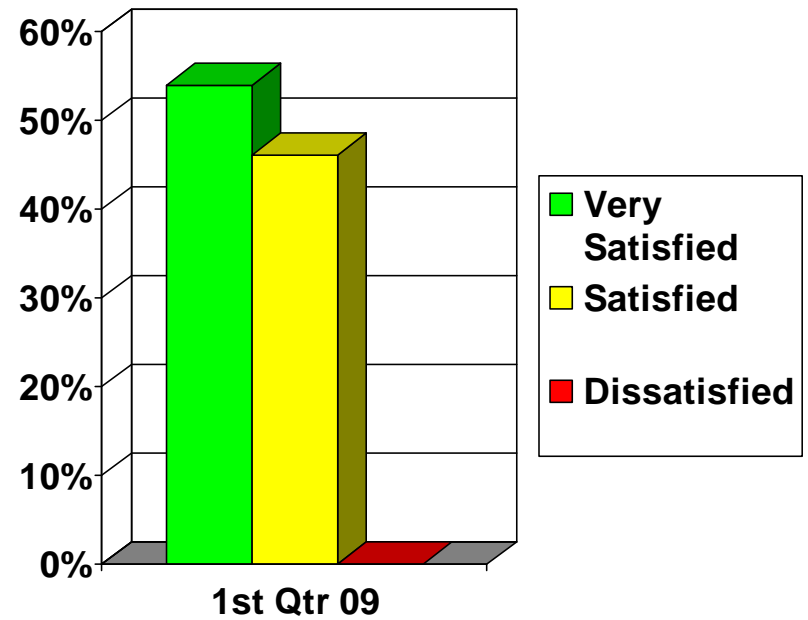
# GA Medicaid Provider Survey Result Comparison

## Vision: Q1 09

If you attended a provider education session, rate the content of material



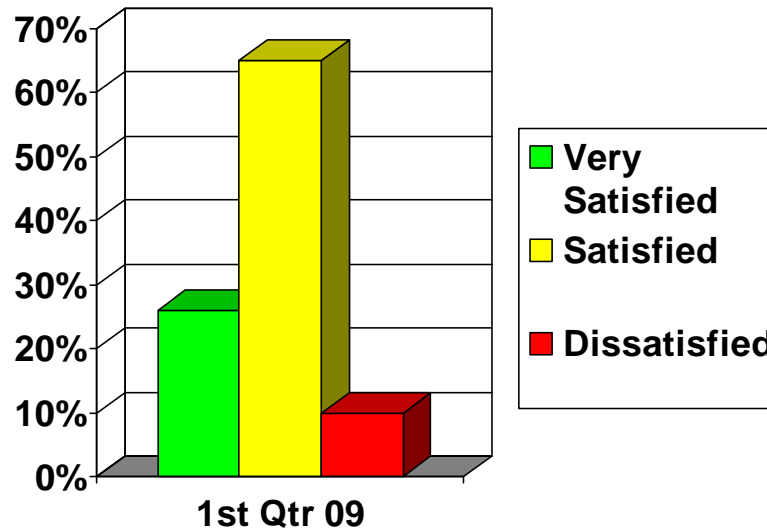
If you attended a provider education session, rate the effectiveness



# GA Medicaid Provider Survey Result Comparison

## Vision: Q1 09

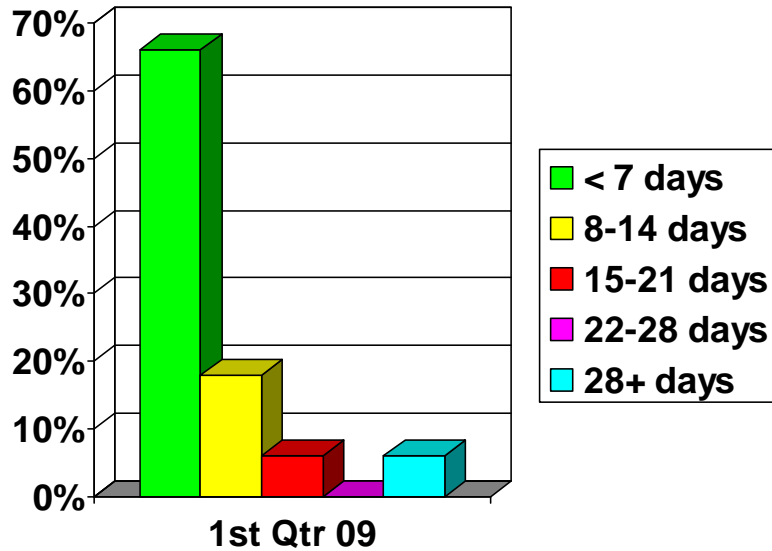
**Please rate your overall experience  
with Avesis**



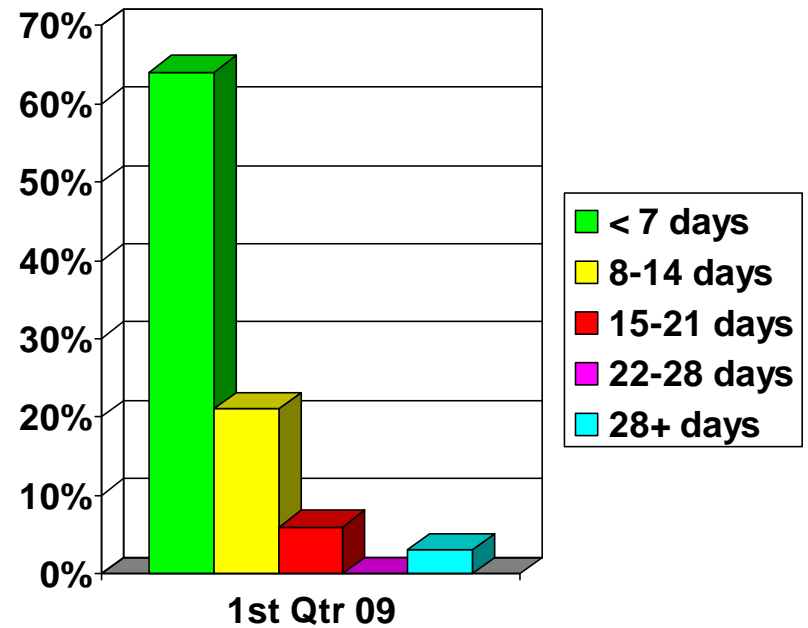
# GA Medicaid Provider Survey Result Comparison

## Vision: Q1 09

**Next available appointment - new patient**



**Next available appointment - existing patient**



# GA Medicaid Provider Survey Result Comparison

## Vision: Q1 09

Please indicate the youngest age you begin seeing patients

