



Voice-of-the-Customer Initiative

Medical provider survey Survey summary

Workers' Compensation Division

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Medical Provider Survey

The Workers' Compensation Division (WCD) has been working on an initiative called Voice of the Customer. The goals of the initiative are to identify customers' and stakeholders' priorities as they relate to workers' compensation services and information in order to improve them. As part of this initiative, WCD conducted this survey of medical providers.

The survey's population was drawn from four sources: Bulletin 220 (medical billing data), Bulletin 247 (MCO provider panel data), WCD arbiter data, and Employment Department data.

Bulletin 220's medical billing data was used to select all services with dates of injury between January 1, 2000 and December 31, 2003. Bulletin 220 contains approximately 80 percent of the workers' compensation market's medical payments. After duplicate providers were removed, 16,546 FEINs remained. These were then matched to physicians in MCO provider panels who were reported under Bulletin 247. Those that matched to Bulletin 247 allowed us to select the names, addresses, and phone numbers of providers, resulting in 5,284 unique provider names and addresses. Physicians listed on WCD's arbiters list were added. The names, addresses, and phone numbers of arbiters whose phone numbers were not already selected by matching to Bulletin 247 data were then added. This resulted in 261 unique arbiter names and addresses. Lastly, the remaining unmatched FEINs were compared to employer data provided by the Employment Department. This resulted in 1,718 unique employer names and addresses. These combined data sources yielded a total of 7,263 unique names and addresses for the survey's sample frame.

From this group, a sample of 727 was selected. The first mailing was done in April of 2005, followed by a second mailing in May of 2005. The final response rate was 38.9% (283). Of these, 65.7% (186) see workers' compensation patients and 34.3% (97) do not.

When asked what kinds of medical providers worked in their offices, respondents indicated that medical doctors accounted for twenty-seven percent, chiropractors twelve percent, physical therapists eight percent, and registered nurse practitioners seven percent. Audiologists, massage therapists, speech therapists, medical assistants, and ophthalmic technicians are examples of kinds of other providers named by respondents, accounting for eight percent. See text table 1.

Text table 1
Percent of kinds of providers

Medical doctor	27%
Chiropractor	12%
Physical therapist	8%
Registered nurse practitioner	7%
Physician's assistant	6%
Laboratory	4%
Occupational therapist	4%
Hospital inpatient	3%
Hospital outpatient	3%
Osteopath	3%
Psychologist/Neuropsychologist	3%
Optometrist	3%
Radiologist	3%
Dentist	2%
Podiatrist	2%
Pharmacy	2%
Acupuncturist	1%
Medical suppliers	1%
Naturopath	1%
Other medical provider	8%

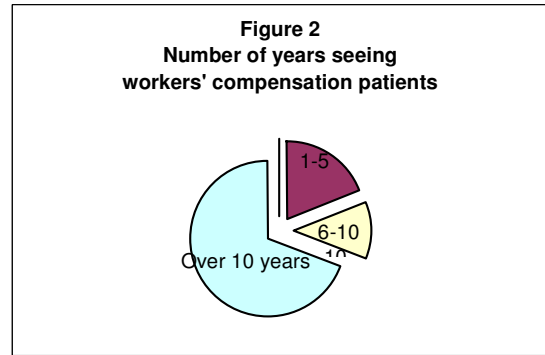
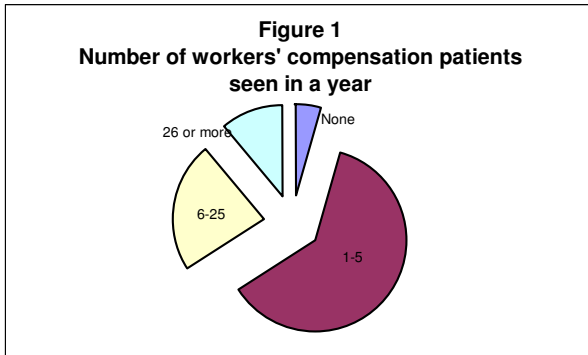
Family practice was the area of specialty for twenty-three percent of the medical/osteopathic providers. Orthopedists/orthosurgeons and other surgical/non-surgical specialists each accounted for ten percent of the area of specialty. Other specialists reported by respondents included allergy/immunology, audiology, cardiology, infectious diseases, pain management, podiatry, and psychological counseling. These other specialists accounted for 10% of the areas of specialty. Text table 2 provides a breakout of the areas of specialty.

Text table 2
Areas of specialty

Family practice	23%
Orthopedist/Orthosurgeon	10%
Internist	6%
Ophthalmologist	6%
General surgeon	6%
Physiatrist	6%
Neurologist	5%
Occupational medicine	5%
General practice	5%
Dermatologist	3%
Emergency medicine	3%
Urologist	3%
Anesthesiologist	2%
Otolaryngologist	2%

Neurosurgeon	1%
Plastic surgeon	1%
Psychiatrist	1%
Hand specialist	1%
Pathologist	0%
Oral surgeon	0%
Other surgical/non-surgical specialist	10%

Sixty-one percent of the respondents see from one to five workers' compensation patients in a month. Twenty-three percent see six to twenty-five, and eleven percent see twenty-six or more in a month. Only four percent indicated they see no workers' compensation patients. Sixty-nine percent of the medical providers have been seeing workers' compensation patients for over ten years. Another nineteen percent have been seeing these patients for one to five years and eleven percent for six to ten years.



Respondents were asked to rate the importance of, and their satisfaction with, various information and services provided by the Workers' Compensation Division. On all of the questions, when asked how important they believed the service, many respondents answered the question. However, when asked how satisfied they were with the same service, a large number of respondents indicated they had not used the service and did not rate satisfaction. For example, 160 respondents may have rated importance, while only 20 rated satisfaction. Using this information to rate both importance and satisfaction means that importance is determined by far more respondents than satisfaction.

Another way to look at the information is to use only those respondents who rated satisfaction when rating importance. For example, if twenty respondents rated satisfaction, then those same twenty are used for calculating importance. Looking at the results this way allows only those who have used the service rate its importance and their satisfaction with it. The drawback to this method is that, in some instances, a small number of respondents are used to rate importance and satisfaction. The following analysis uses this subset of information.

When rating the importance of, and their satisfaction with, various information and services of WCD, rating highest in importance were telephone consultations about the law and treatment and billing issues, the toll-free workers' compensation infoline, and employer insurance coverage information by phone. Respondents were also satisfied with these three services. Training at their office rated near the average in importance, but lower in satisfaction, while training workshops off site was somewhat less important and lower in satisfaction. See text table 3.

Text table 3. Importance and satisfaction with WCD services

Service	Importance Score	Importance Rating	Satisfaction Score	Satisfaction Rating
Training at your office	1.8	Near avg.	2.3	Lower
Training workshop off site	2.0	Lower	2.4	Lower
OMFARVS diskette with fee calculation information and	2.1	Lower	2.1	Near avg.
Telephone consultations about the law or treatment and billing issues	1.7	Higher	2.0	Higher
Employer insurance coverage information by phone	1.6	Higher	2.0	Higher
Toll-free phone line "Workers' Compensation Infoline"	1.5	Higher	2.0	Higher
Average score	1.8		2.1	
1.8 and lower is higher importance; 2.1 and lower is higher satisfaction				

Respondents were also asked to rate the importance of, and their satisfaction with, WCD's internet services and information. The employer coverage searchable data base, specialized pages with information tailored to medical providers, electronic copies of bulletins and forms, and statistical reports, and the e-mail for medical issue questions were all rated as important and medical providers were satisfied with these services. Other internet services and information were not rated as high in importance. See text table 4.

Text table 4. Importance and satisfaction with internet service and information

Internet Service and information	Importance Score	Importance Rating	Satisfaction Score	Satisfaction Rating
Specialized pages with information tailored for medical providers	1.7	Higher	2.1	Higher
E-mail notification service (WebBoard)	2.1	Lower	2.4	Lower
Electronic copies of laws and rules	1.8	Near avg.	2.1	Higher
Electronic copies of bulletins and forms	1.7	Higher	2.1	Higher
Electronic copies of statistical reports	1.7	Higher.	2.2	Near avg.
Employer coverage searchable database	1.6	Higher	2.1	Higher
Employer coverage interactive request form	2.0	Lower	2.3	Lower
Medical Advisory Committee information including meeting minutes	1.8	Near avg.	2.5	Lower
Workcomp questions@state.or.us (E-mail for general questions)	1.8	Near avg.	2.1	Higher
mruhelp.wcd@state.or.us (E-mail for medical issue questions)	1.6	Higher	2.2	Near avg.
Average score	1.8		2.2	
<i>Note: 1.8 and lower is higher importance; 2.2 and lower is higher satisfaction</i>				

WCD produces and distributes many publications used by medical providers who were asked to rate importance and satisfaction with these publications. As text table 5 shows, medical providers were satisfied with all the publications they considered important.

Text table 5. Importance and satisfaction with WCD publications

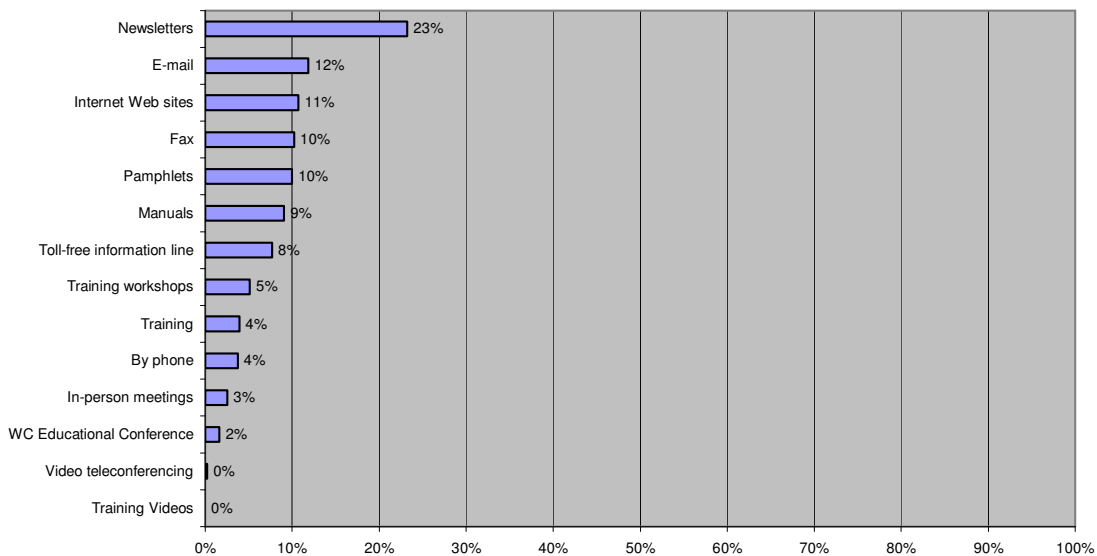
WCD Publication	Importance Score	Importance Rating	Satisfaction Score	Satisfaction Rating
Physician's Guide for Reporting On-the-job Injuries	1.9	High	2.0	Near avg.
Nurse Practitioner's Guide for Reporting On-the-job Injuries	2.1	Lower	2.1	Lower
Medical Arbiter Guide	1.8	Higher	1.9	Higher
Workers' Compensation Focus newsletter	2.0	Near avg.	2.0	Near avg.
"What Happens if I'm Injured on the Job" booklet	1.8	Higher	1.9	Higher
"What is a medical arbiter?" booklet	1.7	Higher	1.9	Higher

Workers' compensation-related statistical reports	2.3	Lower	2.1	Lower
Statistical reports tailored to your requests	2.1	Lower	2.3	Lower
Paper copies of laws, rules, and bulletins	2.1	Lower	2.0	Near avg.
Paper copies of forms	1.9	Higher	1.9	Higher
Oregon Specific Codes, Medical Fee & Payment Rules	1.8	Higher	2.0	Near avg
Average score	2.0		2.0	
<i>Note: 2.0 and lower is higher importance and satisfaction</i>				

WCD provides three types of medical dispute resolution services. Disputes regarding the resolution of appropriateness of medical treatment was of highest importance. Palliative care and medical fee disputes were slightly lower in importance, but medical providers were satisfied.

Respondents were asked the three ways they most prefer to receive information from the Workers' Compensation Division. Newsletters (23%), e-mail (12%), and internet Web sites (11%) were the three methods preferred. The least preferred methods were training videos, video teleconferencing, and the WC Educational Conference. See figure 3.

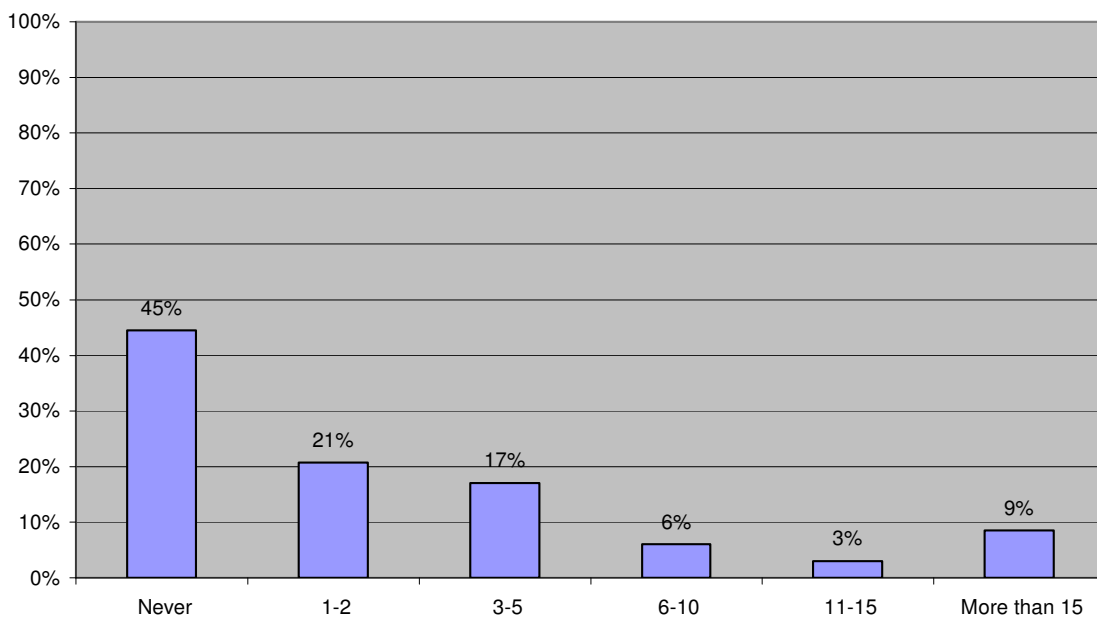
Figure 3
Preferred ways to receive information



Forty-five percent of the respondents reported that they have not used WC information or services in the last year. Twenty-one percent have used one or two and seventeen percent have used three to five. See figure 4.

When asked what information or services they need that they do not currently receive, the twenty-five who responded provided a wide variety of answers. Answers included more training workshops, a copy of the letter of denial, a physician guide, access to the claims adjuster, information on the Worker Requested Medical Exam, how to get paid, and a newsletter with workers' compensation changes and updates. Several also indicated that they were unaware that any services or information existed.

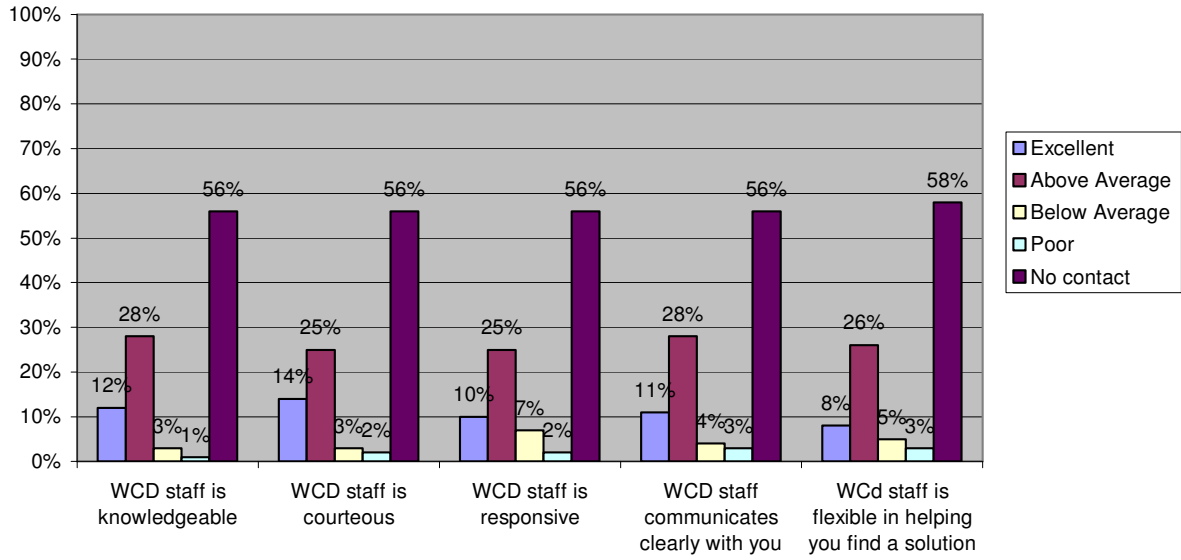
Figure 4
Use of WCD services or information in the last year



Medical providers were asked to share any other comments about the Workers' Compensation Division. Several chiropractors commented on the restrictions in workers' compensation for treating with a chiropractor. Other comments focused on the positives and negatives of the Oregon workers' compensation system, their interaction with WCD staff, and insurer case managers.

WCD strives to provide excellent customer service. As a way of measuring customer service, each survey conducted by WCD contains the same five questions about customer interaction with the Workers' Compensation Division. Approximately fifty-six percent of the medical providers surveyed have had no contact with WCD. The results shown in Figure 5 are of those medical providers who did have contact. WCD received high ratings for all of the customer service traits. Overall, WCD customer service was rated excellent by eight to fourteen percent of the medical providers and above average by twenty-five to twenty-eight percent. See figure 5 for a breakout of the individual service traits.

Figure 5
Rating of customer service traits of WCD staff





Medical Provider Survey

Thank you for filling out this survey. Your answers will help us improve our information and services to medical providers. You may fill out and return this survey, or fill it out online at:

<http://www4.cbs.state.or.us/exs/imd/survey/intrv/medicalprovider/index.cfm>.

Your personal information will be kept confidential. Answers to the survey will be summarized for reporting purposes. If you have questions about this survey, please contact Kara Olsen, (503) 947-7515, or send e-mail to kara.r.olsen@state.or.us.

Please give us the ID number from the survey letter you received in the mail: _____

1. Does your office see workers' compensation patients? If no, this survey does not apply; please return in the enclosed envelope. Yes No

2. What kinds of medical providers work in your office? (check all that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Acupuncturist | <input type="checkbox"/> Medical suppliers | <input type="checkbox"/> Physician's assistant |
| <input type="checkbox"/> Chiropractor | <input type="checkbox"/> Naturopath | <input type="checkbox"/> Podiatrist |
| <input type="checkbox"/> Dentist | <input type="checkbox"/> Occupational therapist | <input type="checkbox"/> Psychologist/neuropsychologist |
| <input type="checkbox"/> Hospital inpatient | <input type="checkbox"/> Optometrist | <input type="checkbox"/> Radiologist |
| <input type="checkbox"/> Hospital outpatient | <input type="checkbox"/> Osteopath | <input type="checkbox"/> Registered nurse practitioner |
| <input type="checkbox"/> Laboratory | <input type="checkbox"/> Pharmacy | <input type="checkbox"/> Other medical provider: _____ |
| <input type="checkbox"/> Medical doctor | <input type="checkbox"/> Physical therapist | |

3. If you are a medical/osteopathic doctor or responding for an office, what are the areas of specialty? (Check all that apply)

- | | | |
|---|---|---|
| <input type="checkbox"/> Anesthesiologist | <input type="checkbox"/> Neurologist | <input type="checkbox"/> Physiatrist |
| <input type="checkbox"/> Dermatologist | <input type="checkbox"/> Neurosurgeon | <input type="checkbox"/> Plastic surgeon |
| <input type="checkbox"/> Emergency medicine | <input type="checkbox"/> Occupational medicine | <input type="checkbox"/> Psychiatrist |
| <input type="checkbox"/> Family practice | <input type="checkbox"/> Ophthalmologist | <input type="checkbox"/> Urologist |
| <input type="checkbox"/> General practice | <input type="checkbox"/> Oral surgeon | <input type="checkbox"/> Other surgical/
non-surgical specialists: _____ |
| <input type="checkbox"/> General surgeon | <input type="checkbox"/> Orthopedist/orthosurgeon | |
| <input type="checkbox"/> Hand specialist | <input type="checkbox"/> Otolaryngologist | |
| <input type="checkbox"/> Internist | <input type="checkbox"/> Pathologist | |

4. On average, how many workers' compensation patients do you treat in a month?

- None 1-5 6-25 26 or more

5. How long has your office been seeing workers' compensation patients?

- Less than 1 year 1-5 years 6-10 years over 10 years

The following questions are about Workers' Compensation Division services and information for medical providers.

6. Please rate how important it is to you to have the following services?

	Very important	Important	Unimportant	Very unimportant
a. Training at your office.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Training workshop off site.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. OMFARVS diskette with fee calculation information and anesthesiology fee schedule	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Telephone consultations about the law or treatment and billing issues.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Employer insurance coverage information by phone.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Toll-free phone line "Workers' Compensation Infoline," (800) 452-0288.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Please rate your satisfaction with these WCD services. Please check “not applicable” if you have not used a service.

	Very satisfied	Satisfied	Dissatisfied	Very dissatisfied	Not applicable
a. Training at your office.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Training workshop off site.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. OMFARVS diskette with fee calculation information and an esthesiology fee schedule	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Telephone consultations about the law or treatment and billing issues.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Employer insurance coverage information by phone.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Toll-free phone line “Workers’ Compensation Infoline,” (800) 452-0288.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Please rate the importance of the following Internet services and information (www.wcd.oregon.gov).

	Very important	Important	Unimportant	Very unimportant
a. Specialized pages with information tailored for medical providers.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. E-mail notification service (WebBoard).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Electronic copies of laws and rules.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Electronic copies of bulletins and forms.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Electronic copies of statistical reports.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Employer coverage searchable database.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Employer coverage interactive request form.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Medical Advisory Committee information including meeting minutes.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Workcomp.questions@state.or.us (E-mail for general questions).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. mruhelp.wcd@state.or.us (E-mail for medical-issue questions).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Please rate your satisfaction with the following WCD Web site services and information (www.wcd.oregon.gov). Please check “not applicable” if you have not been to the Web site.

	Very satisfied	Satisfied	Dissatisfied	Very dissatisfied	Not applicable
a. Specialized pages with information tailored for medical providers.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. E-mail notification service (WebBoard).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Electronic copies of laws and rules.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Electronic copies of bulletins and forms.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Electronic copies of statistical reports.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Employer coverage database.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Employer coverage interactive request form.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Medical Advisory Committee information including meeting minutes.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Workcomp.questions@state.or.us (E-mail for general questions)..	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. mruhelp.wcd@state.or.us (E-mail for medical-issue questions).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Please rate the importance of the following publications.

	Very important	Important	Unimportant	Very unimportant
a. Physician’s Guide for Reporting On-the-job Injuries.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Nurse Practitioner’s Guide for Reporting On-the-job Injuries.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Medical Arbiter Guide.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Workers’ Compensation Focus newsletter.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. “What Happens if I’m Injured on the Job?” (Booklet for workers’ compensation patients).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. “What is a medical arbiter exam?” (Pamphlet for workers’ compensation patients).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Workers’-compensation-related statistical reports.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Statistical reports tailored to your requests.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Paper copies of laws, rules, and bulletins (subscription service).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Paper copies of forms.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Oregon Specific Codes, Medical Fee and Payment Rules (Oregon Administrative Rules (OAR) Chapter 436, Division 009).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Bulletin 239 – Closing examinations.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Bulletin 290 – Hospital Fee Schedule.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Please rate your satisfaction with the following publications. Please check “not applicable” if you have not used.

	Very satisfied	Satisfied	Dissatisfied	Very dissatisfied	Not applicable
a. Physician’s Guide for Reporting On-the-job Injuries.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Nurse Practitioner’s Guide for Reporting On-the-job Injuries.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Medical Arbiter Guide.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Workers’ Compensation Focus newsletter.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. “What Happens if I’m Injured on the Job?” (Booklet for workers’ compensation patients).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. “What is a medical arbiter exam?” (Pamphlet for workers’ compensation patients).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Workers’-compensation-related statistical reports.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Statistical reports tailored to your requests.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Paper copies of laws, rules, and bulletins (subscription service)....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Paper copies of forms.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Oregon Specific Codes, Medical Fee and Payment Rules (Oregon Administrative Rules (OAR) Chapter 436, Division 009)..	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. Please rate the importance of the following dispute-resolution

	Very important	Important	Unimportant	Very unimportant
a. Appropriateness of medical treatment.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Palliative care.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Medical fees.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Please rate your satisfaction with the following dispute-resolution services. Please check "not applicable" if you have not used.

	Very satisfied	Satisfied	Dissatisfied	Very dissatisfied	Not applicable
a. Appropriateness of medical treatment.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Palliative care.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Medical fees.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. What information or services do you need that you currently do not receive?

15. Please check three ways you prefer to receive information. (Check three only)

- | | | | | |
|---|---|---|--|--|
| <input type="checkbox"/> E-mail | <input type="checkbox"/> Fax | <input type="checkbox"/> Internet Web sites | <input type="checkbox"/> Video teleconferencing | <input type="checkbox"/> Training videos |
| <input type="checkbox"/> Newsletters | <input type="checkbox"/> Pamphlets | <input type="checkbox"/> Manuals | <input type="checkbox"/> Training workshops | <input type="checkbox"/> By phone |
| <input type="checkbox"/> In-person meetings | <input type="checkbox"/> Toll-free information line | | <input type="checkbox"/> WCD Workers' Comp. Educational Conference | |

16. Approximately how many times have you used WCD information or services in the last year?

- Never 1-2 3-5 6-10 11-15 More than 15

17. Please rate the following customer-service traits of WCD staff.

	Excellent	Above average	Below average	Poor	Have had no contact
WCD staff is knowledgeable.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WCD staff is courteous.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WCD staff is responsive.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WCD staff communicates clearly with you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WCD staff was flexible in helping find a solution.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18. Please share any other comments you have regarding the Workers' Compensation Division: _____

Thank you for completing this survey. Please mail it in the postage-paid envelope by April 25, 2005.