![The Path Forward for mental health and substance use — Health Equity for all Americans]

Employee Survey
Ease and Timeliness of Access to In-Network (INN) Mental Health/Substance Use Providers

[TPA] and [Employer] want to evaluate whether you and any family members covered under [Employer's Plan] have timely access to healthcare providers for mental health and substance use care. We are reaching out to randomly-selected members.

Since we are asking only a portion of [Employer's Plan] members to complete this brief survey, **your participation is very important**.

[TPA] has commissioned [Survey Company] to conduct this survey. [Survey Company] is a leading, independent survey firm. Answers you provide to this survey will never be provided to [TPA], [Employer] or anyone else. [Survey Company] will provide to [TPA] and [Employer] **only aggregated data provided by the entire group of respondents**.

All of your answers to the questions should pertain to the period beginning January 1, 20__, but including only the time that you were enrolled in [Employer's Plan].

Your participation is greatly appreciated. It should take only about 5 minutes to complete the survey.

Definitions of Terms

Below are definitions for terms that are used in the survey. At any point in the survey, you can click the **"Glossary"** button to review these definitions:

Care: Health services or prescription drugs. Health services could be Inpatient or Outpatient (including Tele-health). Health services can also involve Routine Care or Urgent Care.

In-Network Provider: Providers or health care facilities that are part of a health plan's network of providers. Deductibles, copays, and coinsurance are typically lower when you see an In-Network Provider.

Inpatient Care: Care provided in a setting where you spend the night. Examples include a general hospital, psychiatric hospital, residential treatment facility, rehabilitation facility, or a skilled nursing facility.

Member: An individual enrolled in [Employer's Plan], or a family member covered under the [Employer's Plan] because of your enrollment in the plan.

Mental Health: Emotional and psychological well-being that allows people to use their cognitive (thinking) and emotional capabilities, function in society, and meet the ordinary demands of everyday life. Mental Health and Substance Use care (including prescription drugs) may be provided by a Mental Health Specialist such as a psychiatrist, psychologist or a social worker, **or** by a primary care doctor or other general medical provider such as an OBGYN.

Out-of-Network Provider: Providers or health care facilities that do not participate in an insurer's provider network. Deductibles, copays, and coinsurance are typically high when you see an Out-of-Network Provider, or you have to pay the entire fee of the provider.

Outpatient Care: Care provided in a setting where you do not spend the night. Examples include a provider's office (doctor, psychiatrist, psychologist, or therapist), urgent care center, other outpatient settings such as intensive outpatient treatment at a facility but on an outpatient basis, and tele-health.

Routine Care: The regular care (non-emergency, non-urgent) you get from your primary care doctor or from other doctors that your PCP sends you to. It includes visits for scheduled check-ups, physical exams, health screenings and ongoing care for chronic health problems like diabetes, high blood pressure and asthma.

Substance Use: Recurrent use of alcohol and/or drugs that causes significant impairment, including health problems, disability, and failure to meet major responsibilities at work, school, or home. Mental Health and Substance Use care (including prescription drugs) may be provided by a Mental Health Specialist such as a psychiatrist, psychologist or a social worker, or by a primary care doctor or other general medical provider such as an OBGYN.

Survey Period: The period starting January 1, 20__, but including only those months when you were enrolled in [Employer's Plan].

Tele-health: Receiving care from a provider via an "audio-video" connection (for example, Zoom or Facetime) or via an "audio-only" connection (a telephone call).

Urgent Care: Outpatient care for injuries or health conditions requiring immediate attention but not serious enough to require going to an emergency room.

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Survey Questions

The following questions relate to types of Care that you or your family members who were covered under your health plan sought during the Survey Period, and your experience obtaining the Care.

Q1. During the Survey Period, did you or a covered family member <u>seek</u> Care (services and/or prescription drugs) for any of the following conditions? Select <u>one</u> answer in <u>each</u> row:

Health Condition Care was Sought For	Was Care Sought			
	01 No	02 Yes, and in all cases, care <u>was</u> received	03 Yes, but in one case, care <u>was not</u> received	04 Yes, but in two or more cases, care <u>was not</u> received
a. Mental health conditions				
b. Substance use conditions				

[Software Programmer: For Q1A and Q1B, only display the conditions from Q1 for which ~~if~~ the respondent indicated that they didn't receive Care (03 or 04)]

Q1A. Focusing on the <u>single most important time</u> when Care was sought but <u>not received</u> by you or a covered family member, why was Care <u>not received</u>? Please select <u>all</u> that apply:

	Mental health	Substance Use
01 Couldn't find an in-network provider in my/their area		
02 Could find an in-network provider in my/their area but they were not taking new patients		
03 Couldn't afford an out-of-network provider		
04 The wait time to receive care from an in-network provider was too long		
05 Insurance plan did not cover Tele-health visits		
06 Insurance plan covered Tele-health but I/they couldn't find a Tele-health provider who accepted my/their insurance		
07 Couldn't afford prescription medication copay		
08 Insurance plan did not cover the medication prescribed, and I/they couldn't afford to pay out-of-pocket		
97 Other		

Q1B. Focusing on the <u>single most important time</u> when Care was sought but <u>not received</u> by you or a covered family member, what happened to you or your family member? Please select <u>all</u> that apply.

	Mental Health	Substance Use
01 Condition became worse		
02 Hospital admission or emergency room visit		
03 Lost job/employment		
04 Family life impacted		
05 No impact		
97 Other		

The following questions relate to instances when you or a covered family member <u>did receive</u> Care from a <u>new in-network provider</u>.

Q2. During the Survey Period, did you or a covered family member receive care from at least one <u>new</u> **in-network** provider? Please select <u>all</u> that apply.

	Received care from at least one <u>new</u> in-network provider
a. Mental health conditions	
b. Substance use conditions	

[Software Programmer: For Q2A, Q2B, and Q2C, only display the conditions from Q2 for which the respondent indicated that they received care from a new in-network provider]

Q2A. Thinking of the <u>single most important</u> <u>new</u> **in-network** provider that you or a covered family member received care from: How many in-network providers did you or a covered family member have to contact before you/they were able to schedule an appointment or admission with a <u>new</u> **in-network** provider? Please select <u>only one</u>:

	Mental Health	Substance Use
01 1 - 3 providers		
02 4 - 9 providers		
03 10 or more providers		

Q2B. How long was it between the time you or a covered family member started searching for the <u>single most important</u> <u>new</u> **in-network** provider and when you/they were able to schedule an appointment or admission **("search time")**? Please select <u>only one</u>:

	Mental Health	Substance Use
01 Less than 24 hours		
02 Between 1 - 6 days		
03 Between 1 - 2 weeks		
04 Between 2 weeks - 1 month		
06 Over 1 month		

Q2C. Once this <u>single most important</u> <u>new</u> **in-network** provider was found and an appointment or admission was scheduled, what was the **"wait time"** until you/they actually received care from the provider? Please select <u>only one</u>:

	Mental Health	Substance Use
01 Less than 24 hours		
02 Between 1 - 6 days		
03 Between 1 - 2 weeks		
04 Between 2 weeks - 1 month		
05 Between 1 - 2 months		
06 Over 2 months		

The following questions relate to instances when you or a covered family member <u>did receive</u> Care from an <u>out-of-network</u> provider.

Q3. During the Survey Period, did you or a covered family member receive care from at least one **out-of-network** provider? Please select <u>all</u> that apply.

	Received care from at least one <u>out-of-network</u> provider
a. Mental health conditions	
b. Substance use conditions	

[Software Programmer: For Q3A, only display the conditions from Q3 for which the respondent indicated that they received care from an out-of-network provider]

Q3A. Focusing on the <u>single most important time</u> when Care was received from an **out-of-network** provider, what was the <u>single most important reason</u> why you or a covered family member received care from an **out-of-network** provider rather than an in-network provider? Please select **<u>only one</u>**:

	Mental Health	**Substance Use**
Was unable to find an in-network provider:		
01 Because the phone numbers in the provider directory were inaccurate, or the providers were not actually or were no longer in the the network		
02 Because the providers contacted did not return calls		
03 Who was taking new patients		
04 That was located within 30 minutes of where I/my family member lived		
05 That had a reasonable wait time to receive care from the provider		
96 Other reason		
Did not look for an in-network provider because:		
06 Already had an out-of-network provider and didn't want to change		
07 Received a recommendation from a friend or a trusted provider to a specific provider who was out-of-network		
08 Didn't want employer to know about the treatment being sought		
97 Other reason		