



2025 MANAGED CARE ORGANIZATION PROVIDER SURVEY RESULTS

Statewide Results

November 21, 2025

2025 MCO Provider Survey Results

Contents

Survey Overview	3
Survey Questions	4
Summary	5
Findings	6
Comparative Analysis.....	17
Survey Comments	24
Summary Analysis	24
Continuous Improvement.....	25

Survey Overview

The Arizona Health Care Cost Containment System (AHCCCS) mission is to help Arizonans live healthier lives by ensuring access to quality health care across all our communities. AHCCCS is dedicated to continuously improving the efficiency and effectiveness of its programs while ensuring the delivery of the highest quality care to its customers.

To fulfill this mission, AHCCCS contracts with Managed Care Organizations (MCOs or health plans) to provide covered services for the AHCCCS Complete Care (ACC), the Arizona Long Term Care System Elderly and/or Physically Disabled (ALTCS-EPD), and AHCCCS Complete Care with a Regional Behavioral Health Agreement (ACC-RBHA) lines of business. Currently, AHCCCS contracts with six distinct health plans, though each health plan may have contracts for more than one line of business. The health plans and their lines of business are:

- Arizona Complete Health - Complete Care Plan – ACC-RBHA
- Banner University Family Care – ACC and ALTCS-EPD
- Molina Healthcare – ACC
- Mercy Care – ACC-RBHA and ALTCS-EPD
- Blue Cross Blue Shield of Arizona Health Choice – ACC
- UnitedHealthcare Community Plan – ACC and ALTCS-EPD

AHCCCS expects its contracted health plans to; implement program innovation and best practices; continuously develop mechanisms to reduce administrative costs, improve program efficiency, and provide added value to the program. Health plans are expected to add value to the program by meeting several AHCCCS values, including recognizing that physical and behavioral health care providers are an essential partner in the delivery of health care services, and operating the health plan in a manner that is efficient and effective for both physical and behavioral health care providers and the health plan.

As a part of AHCCCS' ongoing monitoring activities of its health plans, AHCCCS conducted a provider survey from May 1, 2025, through June 1, 2025. The purpose of the survey was to solicit feedback from providers contracted with AHCCCS health plans regarding their satisfaction with health plan processes. This report summarizes the results of the survey specific to all contracted health plans.

AHCCCS appreciates all providers who participated in this survey to offer their time and valuable feedback regarding AHCCCS health plan performance.

AHCCCS previously conducted provider surveys in 2014, 2015, 2016 (for the RBHA line of business only), 2017, and 2021. These surveys results are also available on the [AHCCCS Website](#). The 2025 survey largely adopted the 2021 survey's methodology but revised the survey itself by removing two questions and adding three new ones.

The survey was made accessible for provider participation via the AHCCCS public website. On May 1, 2025, AHCCCS issued an email notification to approximately 31,000 registered provider email addresses and provided a link to complete the survey. Providers actively contracted with AHCCCS health plans were encouraged to complete the survey. Additionally, throughout the month of May 2025, health plans sent

2025 MCO Provider Survey Results

notifications of the survey to their contracted provider networks. The survey remained available on the AHCCCS website until June 1, 2025. At that time, the survey link was disabled and resulting data was collected for review by AHCCCS.

Survey responses allow for comparison between health plans and are provided individually to each health plan to guide quality improvement activities. The results of this survey will be used by AHCCCS to support ongoing health plan monitoring and quality improvement processes.

Survey Questions

The survey consisted of ten questions that covered a range of topics, including health plan claims processing, resolution of claims issues, provider services staff, credentialing processes, prior authorization processes, quality improvement activities and measures, and education regarding non-Title 19/21 services. Survey respondents were asked to identify all AHCCCS health plans they were contracted with.

The respondent was asked to provide a response to questions for each contracted health plan. For 2025, the following seven questions were continued from the 2021 survey:

- How satisfied are you with how timely [PLAN] processes initial claims?
- How satisfied are you with how accurately [PLAN] processes initial claims?
- How satisfied are you with how [PLAN] resolves claims issues?
- How satisfied are you with [PLAN] provider service staff?
- How satisfied are you with [PLAN] credentialing timeliness?
- How satisfied are you with [PLAN] prior authorization process?
- Overall, how satisfied are you with [PLAN]?

The three questions below were new for the 2025 survey:

- How satisfied are you with the information shared by [PLAN] as it pertains to quality measures (including CMS Core Set measures and NCQA HEDIS measures), quality improvement activities, and related initiatives?
- How satisfied are you with the information, education, training, and support provided by [PLAN] as it pertains to your or your provider organization's performance for these quality measures?
- How satisfied are you with [PLAN] efforts to educate you on how AHCCCS members can access non-Title 19/21 services? ¹

The following two questions from the 2021 survey were discontinued from the 2025 survey:

- How satisfied are you with how timely [PLAN] resolves claims issues?
- How satisfied are you with [PLAN] prior authorization timeliness?

The respondents rated each of the 2025 survey questions based upon the following options:

- Very Satisfied

¹ How plans educate providers on how AHCCCS members can access non-Title 19/21 was only asked of providers who responded "Yes" to providing services to non-Title 19/21 members.

2025 MCO Provider Survey Results

- Satisfied
- Neutral
- Dissatisfied
- Very Dissatisfied

The survey questions required an answer by the respondent to continue through the survey. In addition, respondents were given the option to provide open-ended comments to the following prompts:

- If there are areas where you are satisfied with PLAN, please share any comments detailing your satisfaction below.
- If there are areas where you are dissatisfied with PLAN, please share any comments detailing your dissatisfaction below.

Summary

AHCCCS received a total of 1,172 responses² to the survey for all health plans. The following table shows the number of contracted survey respondents who completed the survey by health plan:

Health Plan	Completed Surveys
Arizona Complete Health - Complete Care Plan (AzCH-CCP)	254
Banner University Family Care (BUFC)	194
Blue Cross Blue Shield of Arizona Health Choice (BCBS-HCA)	140
Mercy Care	227
Molina Healthcare (Molina)	116
UnitedHealthcare Community Plan (UHCCP)	241
Total Completed Surveys	1172

² The total number of survey responses received in 2025 (1,172) was lower compared to 2021 (2,641).

2025 MCO Provider Survey Results

Findings

Results of the survey vary by health plan. In all focus areas, the survey results indicate opportunities for improvement by all health plans and overall:

- Generally, providers expressed the most satisfaction with health plan timeliness of initial claims processing and accuracy of initial claims processing.
- Generally, providers expressed the most dissatisfaction with health plan resolution of claims issues and credentialing timeliness.
- Despite the significant decrease in provider participation between the 2021 (1,172) and the 2025 (2,641) surveys, the overall health plan average scores remained within 5%.
- With some exceptions, health plans were generally rated poorer by their providers in the 2025 survey compared to the 2021 survey.

While AHCCCS does not establish performance benchmarks for the survey, it is expected that each health plan will closely examine these results and implement process improvements necessary. At a minimum, each health plan must address survey response as follows:

- Any response from the 2025 survey where providers rated the health plan below the overall average of all health plans' 'Satisfied' rate, **and** more than 15 percent of the respondents reported being dissatisfied, **OR**
- Any of the seven survey questions continued from the 2021 survey where their provider satisfaction decreased by 5% or more.

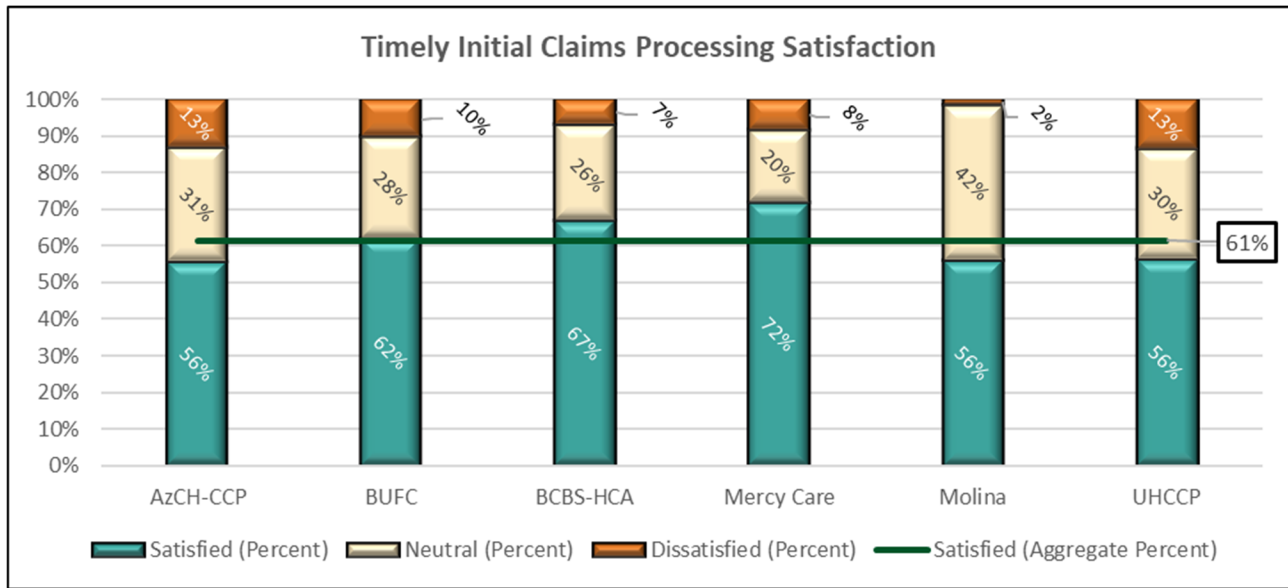
The results for each survey question are provided in the following graphs and are summarized below.

How to Read the Graphs

- Providers responding as "Very Satisfied" or "Satisfied" on the survey are reported in the teal, "Satisfied" portion of the chart. Providers responding "Neutral" are reported in the beige "Neutral" portion, while providers responding "Dissatisfied" or "Very Dissatisfied" are reported in the orange "Dissatisfied" portion.
- The numbers in white reflect the percentage of providers in the "Satisfied" category.
- The percentage in the callout boxes identify the average in the "Satisfied" category across all AHCCCS health plans.

2025 MCO Provider Survey Results

Timely Initial Claims Processing

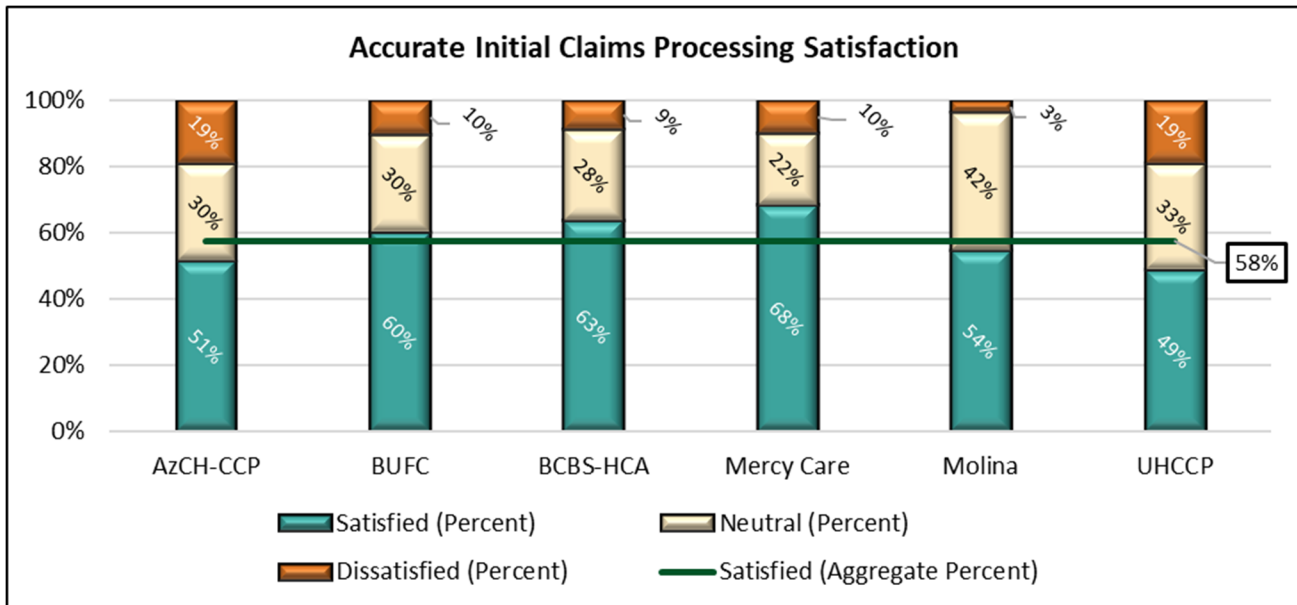


Number of Responses by Satisfaction and Health Plan

How satisfied are you with how timely PLAN processes initial claims?	AzCH-CCP	BUFC	BCBS-HCA	Mercy Care	Molina	UHCCP
Very satisfied	53	40	42	70	22	44
Satisfied	88	80	73	93	43	92
Neutral	80	54	45	45	49	73
Dissatisfied	22	17	10	13	2	18
Very dissatisfied	11	3	2	6	0	14
Total	254	194	172	227	116	241

2025 MCO Provider Survey Results

Accurate Initial Claims Processing

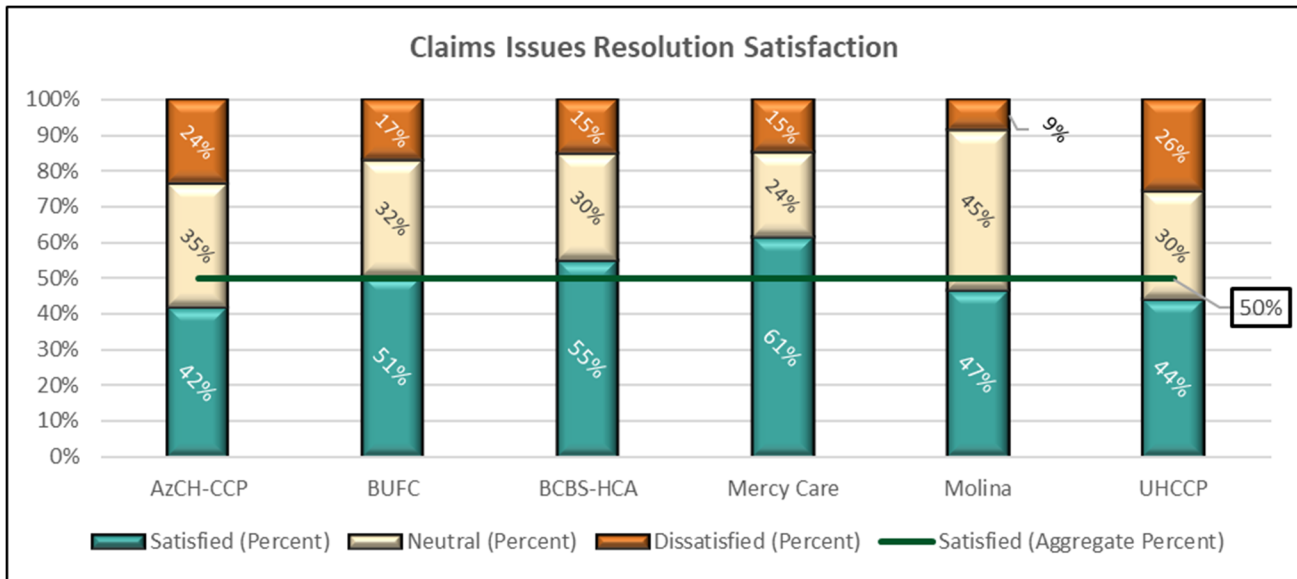


Number of Responses by Satisfaction and Health Plan

How satisfied are you with how accurately PLAN processes initial claims?	AzCH-CCP	BUFC	BCBS-HCA	Mercy Care	Molina	UHCCP
Very satisfied	49	40	36	61	23	43
Satisfied	81	76	73	94	40	74
Neutral	76	58	48	50	49	79
Dissatisfied	30	15	13	18	3	26
Very dissatisfied	18	5	2	4	1	19
Total	254	194	172	227	116	241

2025 MCO Provider Survey Results

Claims Issue Resolution

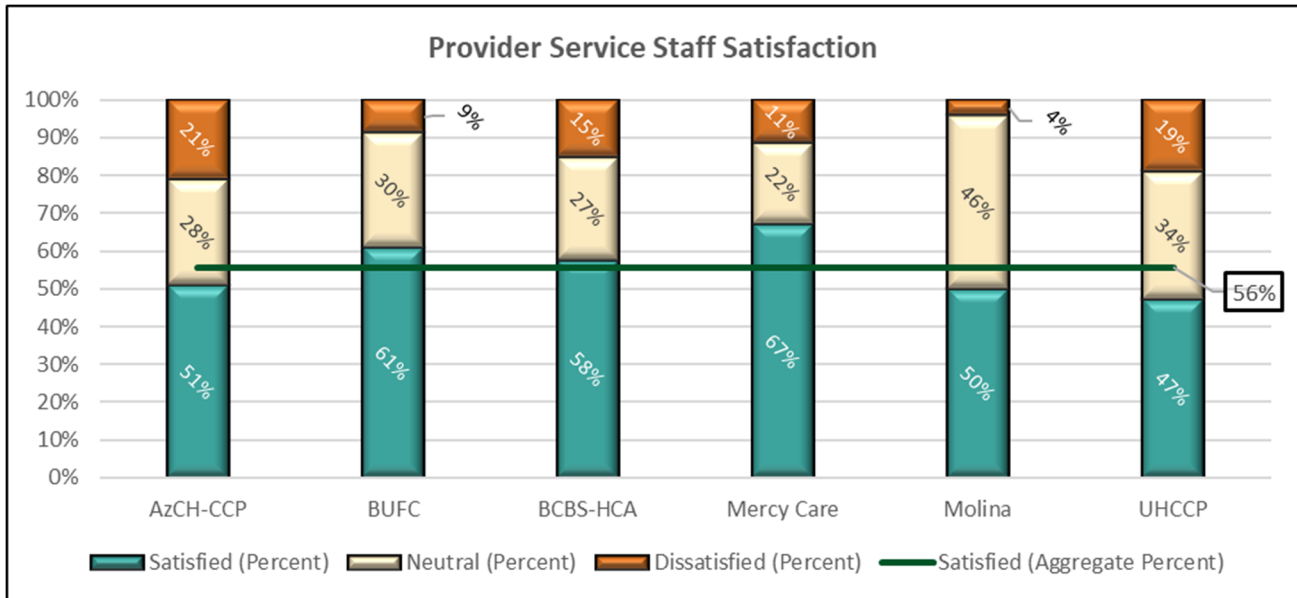


Number of Responses by Satisfaction and Health Plan

How satisfied are you with how PLAN resolves claims issues?	AzCH-CCP	BUFC	BCBS-HCA	Mercy Care	Molina	UHCCP
Very satisfied	35	34	36	57	19	29
Satisfied	71	64	58	82	35	77
Neutral	88	63	52	54	52	73
Dissatisfied	38	27	22	27	8	40
Very dissatisfied	22	6	4	7	2	22
Total	254	194	172	227	116	241

2025 MCO Provider Survey Results

Provider Service Staff

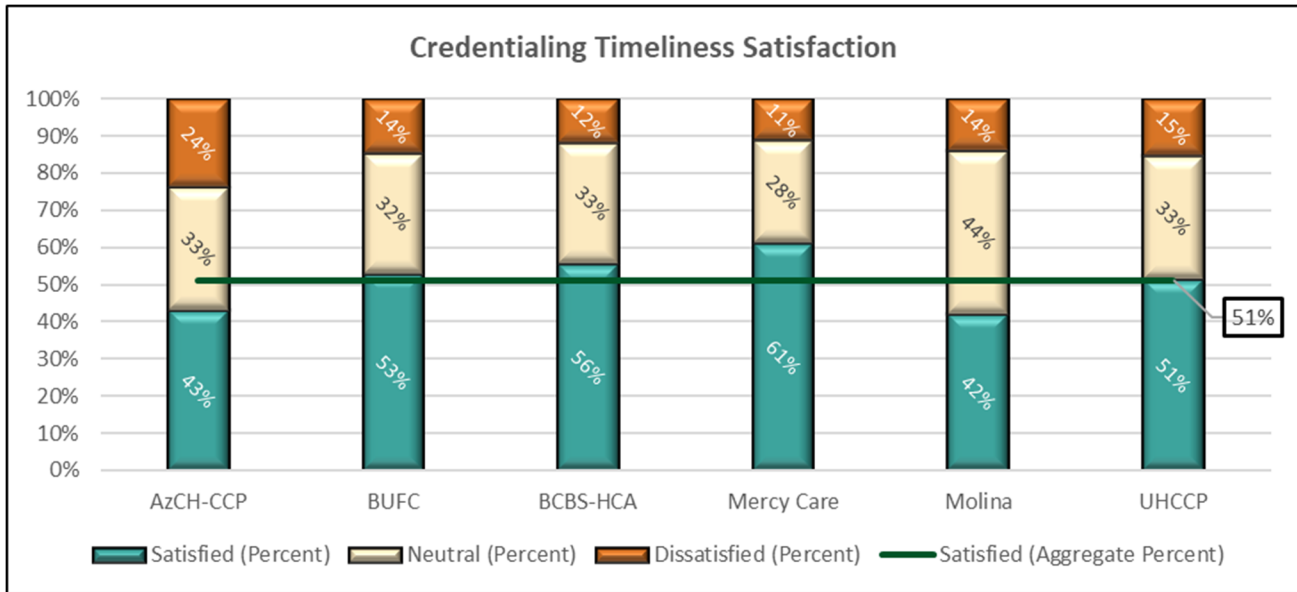


Number of Responses by Satisfaction and Health Plan

How satisfied are you with PLAN's provider service staff?	AzCH-CCP	BUFC	BCBS-HCA	Mercy Care	Molina	UHCCP
Very satisfied	48	44	40	70	22	41
Satisfied	81	74	59	82	36	73
Neutral	72	59	47	49	53	81
Dissatisfied	30	12	24	17	1	25
Very dissatisfied	23	5	2	9	4	21
Total	254	194	172	227	116	241

2025 MCO Provider Survey Results

Credentialing Timeliness

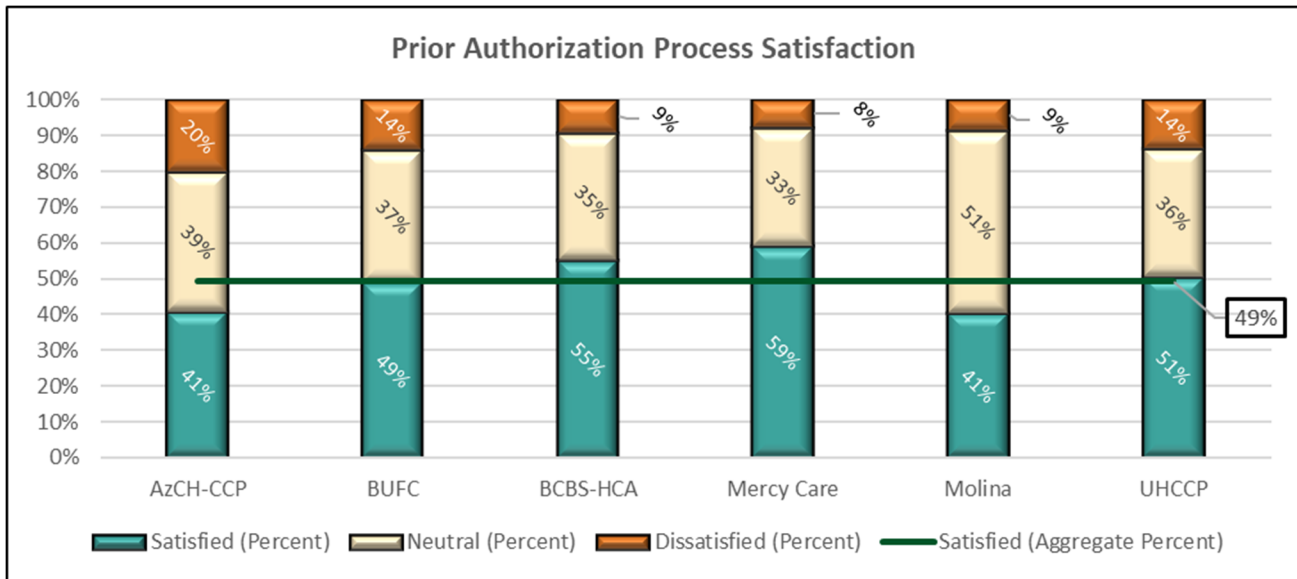


Number of Responses by Satisfaction and Health Plan

How satisfied are you with PLAN's credentialing timeliness?	AzCH-CCP	BUFC	BCBS-HCA	Mercy Care	Molina	UHCCP
Very satisfied	39	34	32	50	20	39
Satisfied	71	69	64	89	29	85
Neutral	84	63	56	63	51	80
Dissatisfied	31	18	14	15	8	18
Very dissatisfied	29	10	6	10	8	19
Total	254	194	172	227	116	241

2025 MCO Provider Survey Results

Prior Authorization Process

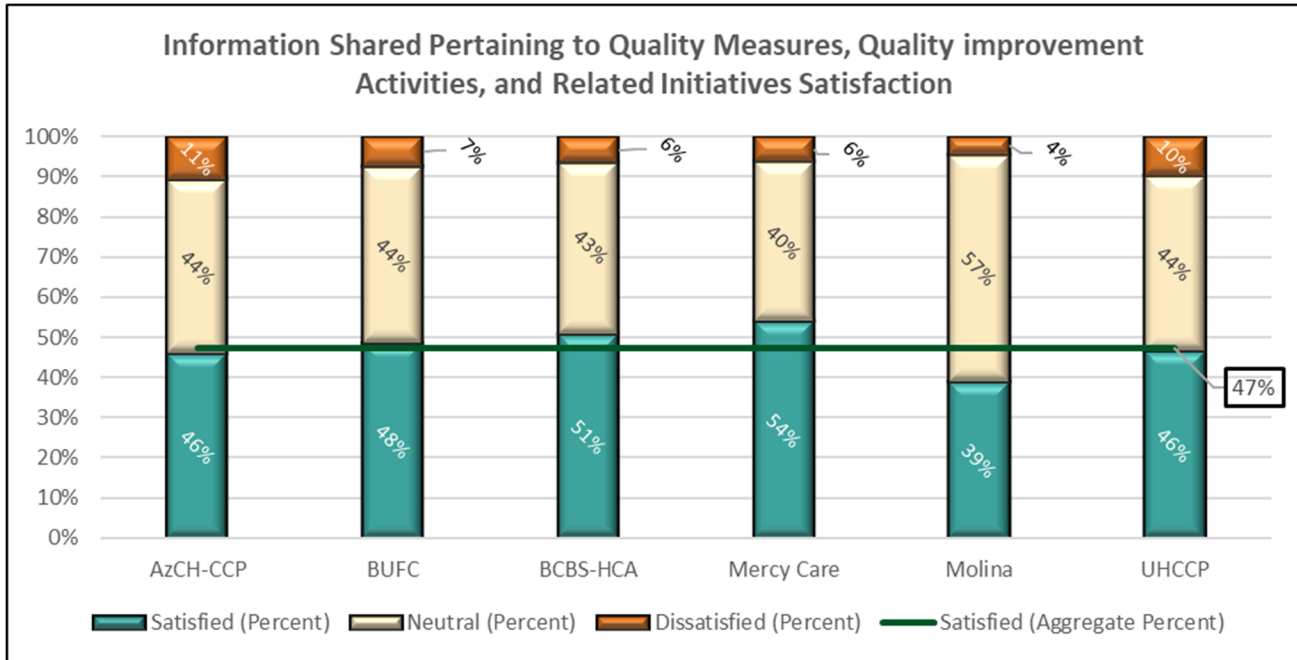


Number of Responses by Satisfaction and Health Plan

How satisfied are you with PLAN's prior authorization process?	AzCH-CCP	BUFC	BCBS-HCA	Mercy Care	Molina	UHCCP
Very satisfied	46	34	33	55	22	36
Satisfied	58	61	62	79	25	86
Neutral	99	72	61	75	59	86
Dissatisfied	24	19	11	11	5	17
Very dissatisfied	27	8	5	7	5	16
Total	254	194	172	227	116	241

2025 MCO Provider Survey Results

Information Shared Pertaining to Quality Measures, Quality Improvement Activities, and Related Initiatives Satisfaction

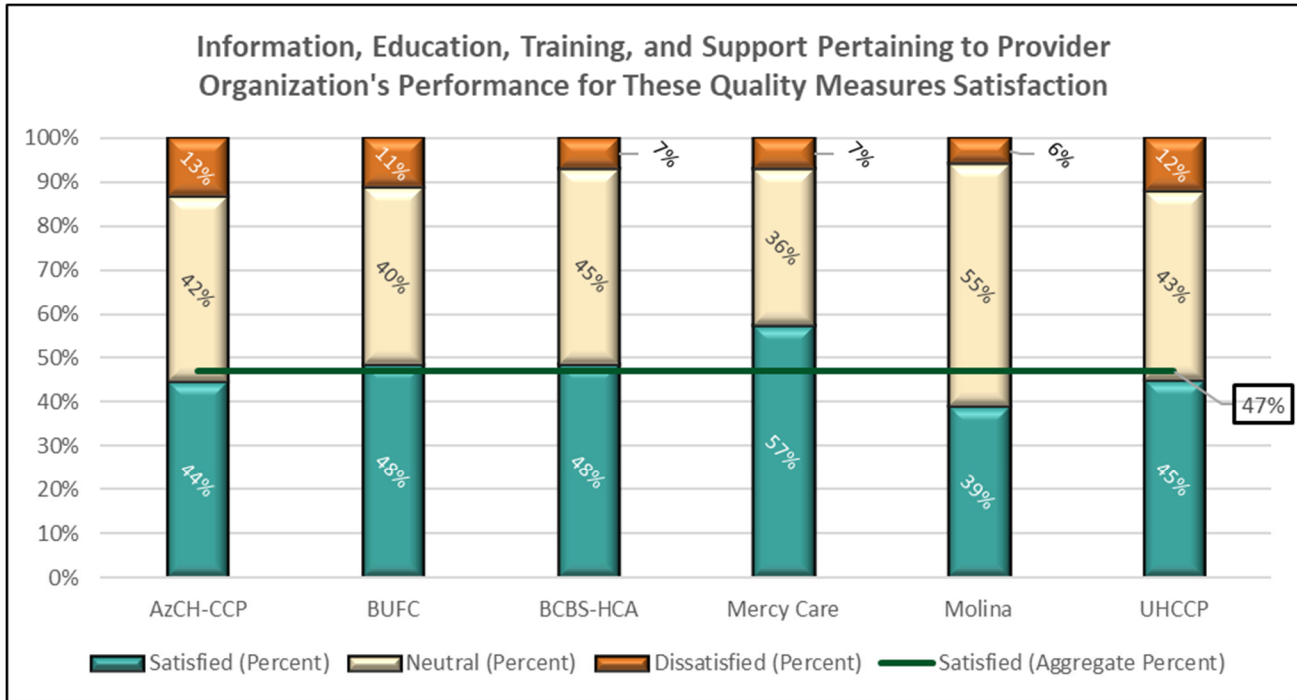


Number of Responses by Satisfaction and Health Plan

How satisfied are you with the information shared by PLAN as it pertains to quality measures (including CMS Core Set measures and NCQA HEDIS measures), quality improvement activities, and related initiatives?	AzCH-CCP	BUFC	BCBS-HCA	Mercy Care	Molina	UHCCP
Very satisfied	38	31	33	50	18	34
Satisfied	78	63	54	72	27	78
Neutral	111	86	74	91	66	106
Dissatisfied	17	10	7	8	3	12
Very dissatisfied	10	4	4	6	2	11
Total	254	194	172	227	116	241

2025 MCO Provider Survey Results

Information, Education, Training, and Support Pertaining to Provider Organization's Performance for These Quality Measures

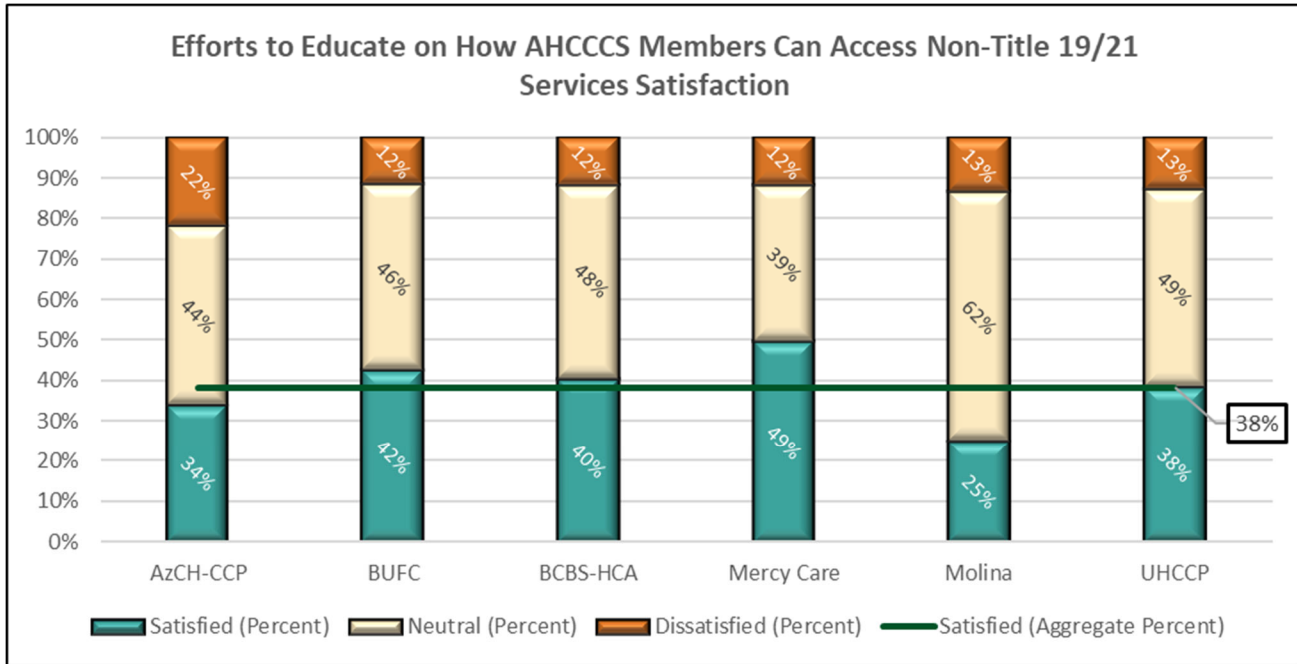


Number of Responses by Satisfaction and Health Plan

How satisfied are you with the information, education, training, and support provided by PLAN as it pertains to your or your provider organization's performance for these quality measures?	AzCH-CCP	BUFC	BCBS-HCA	Mercy Care	Molina	UHCCP
Very satisfied	39	39	31	65	18	36
Satisfied	74	55	52	65	27	72
Neutral	107	78	77	81	64	104
Dissatisfied	16	18	7	9	3	15
Very dissatisfied	18	4	5	7	4	14
Total	254	194	172	227	116	241

2025 MCO Provider Survey Results

Efforts to Educate on How AHCCCS Members Can Access Non-Title 19/21 Services



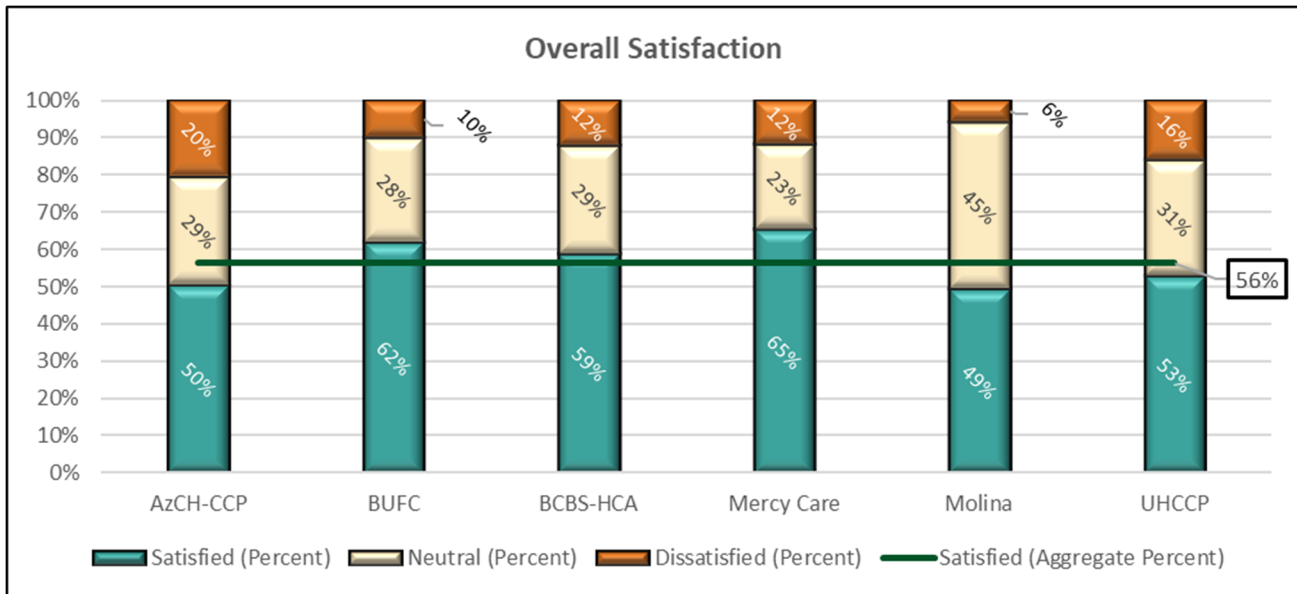
Number of Responses by Satisfaction and Health Plan

How satisfied are you with PLAN efforts to educate you on how AHCCCS members can access non-Title 19/21 services?*	AzCH-CCP	BUFC	BCBS-HCA	Mercy Care	Molina	UHCCP
Very satisfied	16	13	12	25	9	14
Satisfied	20	20	15	21	4	22
Neutral	47	36	32	36	32	46
Dissatisfied	15	7	6	7	5	2
Very dissatisfied	8	2	2	4	2	10
Total	106	78	67	93	52	94

***This question was limited only to providers that provide non-Title 19/21 services, accounting for the reduced number of overall responses.*

2025 MCO Provider Survey Results

Overall Satisfaction



Number of Responses by Satisfaction and Health Plan

Overall, how satisfied are you with PLAN?	AzCH-CCP	BUFC	BCBS-HCA	Mercy Care	Molina	UHCCP
Very satisfied	37	41	33	59	19	40
Satisfied	91	79	68	89	38	87
Neutral	74	54	50	52	52	75
Dissatisfied	30	14	19	22	5	21
Very dissatisfied	22	6	2	5	2	18
Total	254	194	172	227	116	241

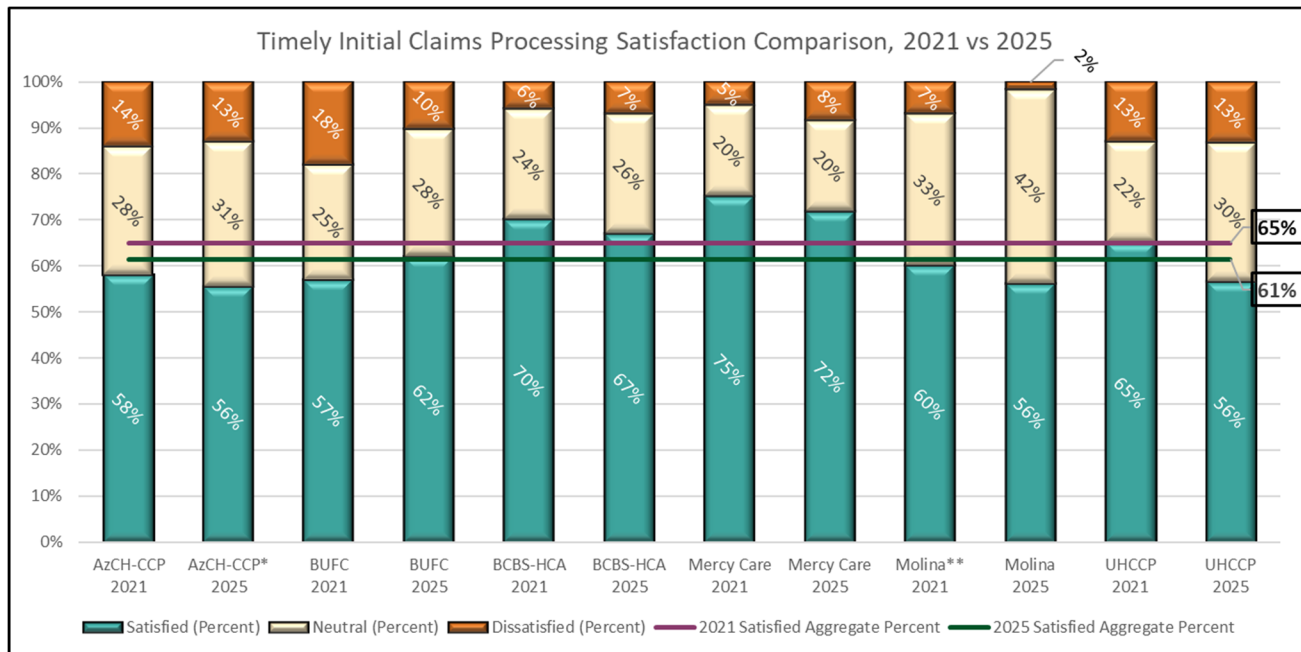
2025 MCO Provider Survey Results

Comparative Analysis

With the continuation of six questions from the 2021 survey, AHCCCS has been able to provide the following Comparative Analysis for each category.

Time Initial Claims Processing Satisfaction Comparison:

- Aggregate Satisfaction:
 - 2021: **65%**
 - 2025: **61%**
- All health plans had decreases in their satisfied percentages.
- The majority of health plans had an increase in their Neutral Response percentages.
- Dissatisfied percentages had both increases and decreases across all the health plans.



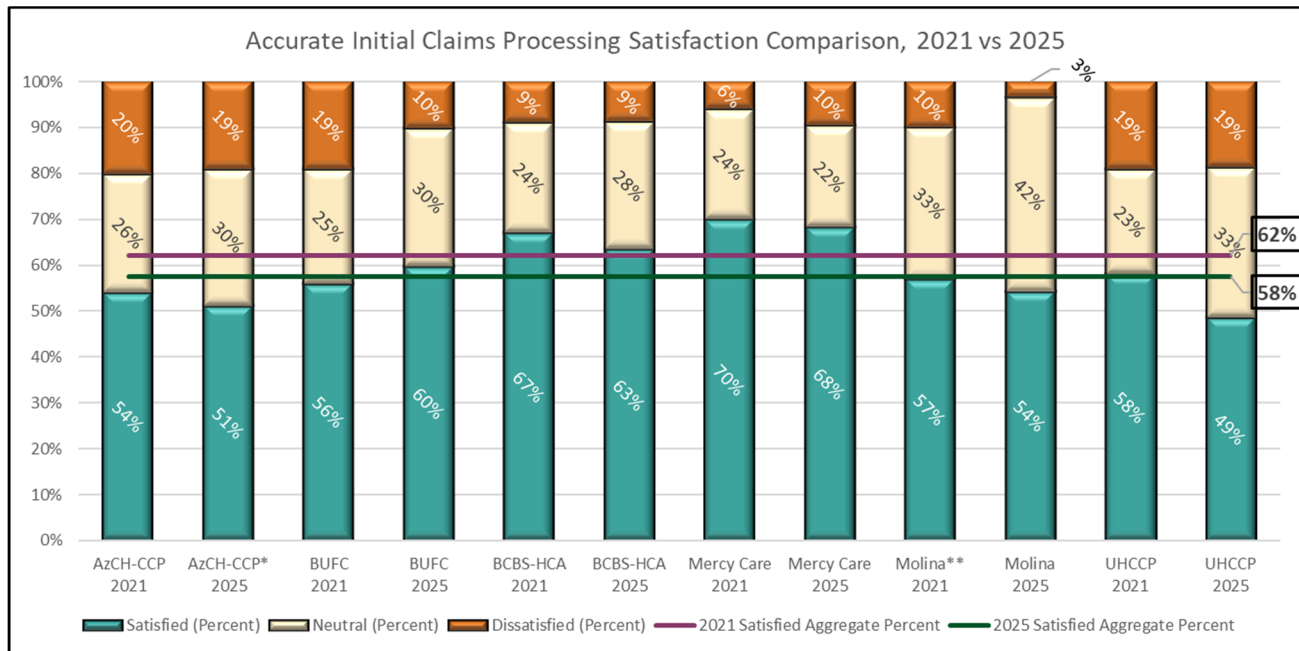
*AzCH-CCP 2025 includes data from Care 1st, which was acquired by AzCH-CCP in 2024.

**Molina was known as Magellan in 2021; however, their name change was completed in 2022. Molina is used here for consistency.

2025 MCO Provider Survey Results

Accurate Initial Claims Processing Satisfaction Comparison:

- Aggregate Satisfaction:
 - 2021: **62%**
 - 2025: **58%**
- Satisfaction percentages increased for a single health plan and decreased for the rest.
- Neutral Response percentages increased for the majority of plans.
- Dissatisfaction percentages decreased for all health plans except one.



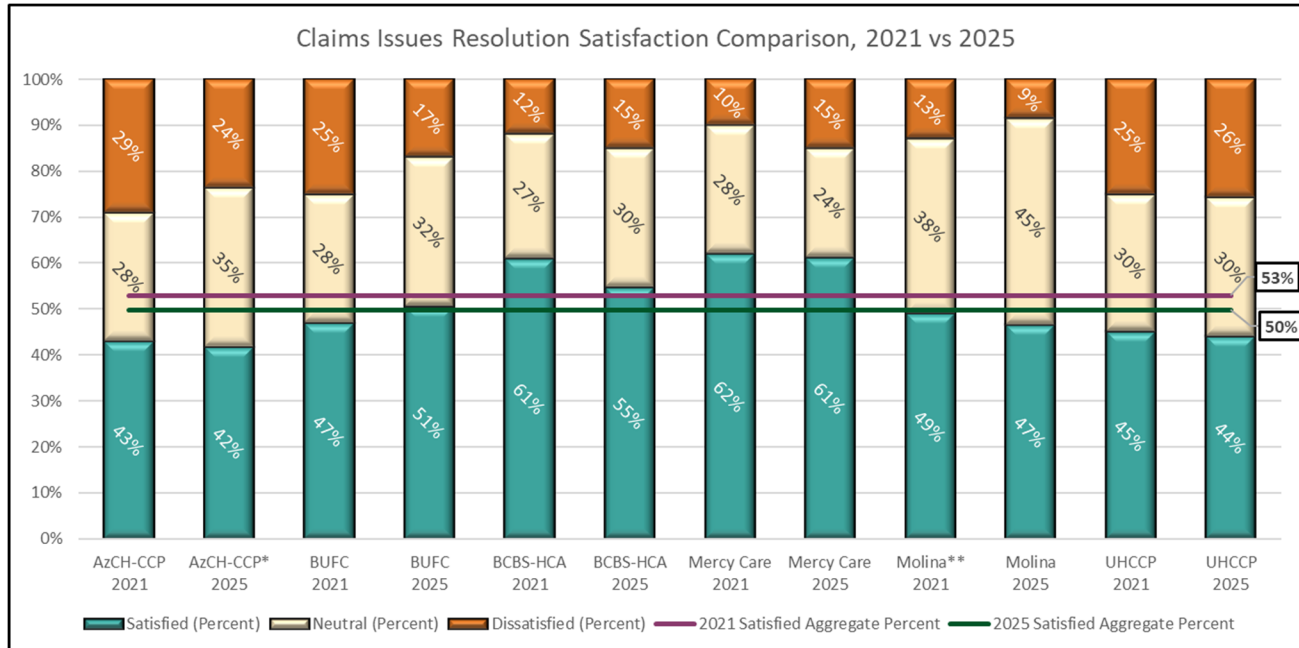
*AzCH-CCP 2025 includes data from Care 1st, which was acquired by AzCH-CCP in 2024.

**Molina was known as Magellan in 2021; however, their name change was completed in 2022. Molina is used here for consistency.

2025 MCO Provider Survey Results

Claims Issues Resolution Satisfaction Comparison:

- Aggregate Satisfaction:
 - 2021: **53%**
 - 2025: **50%**
- A single health plan had an increase in their satisfaction percentage while the remainder decreased.
- The majority of health plans increased their neutral response percentages.
- Dissatisfaction percentages both increased and decreased across the plans.



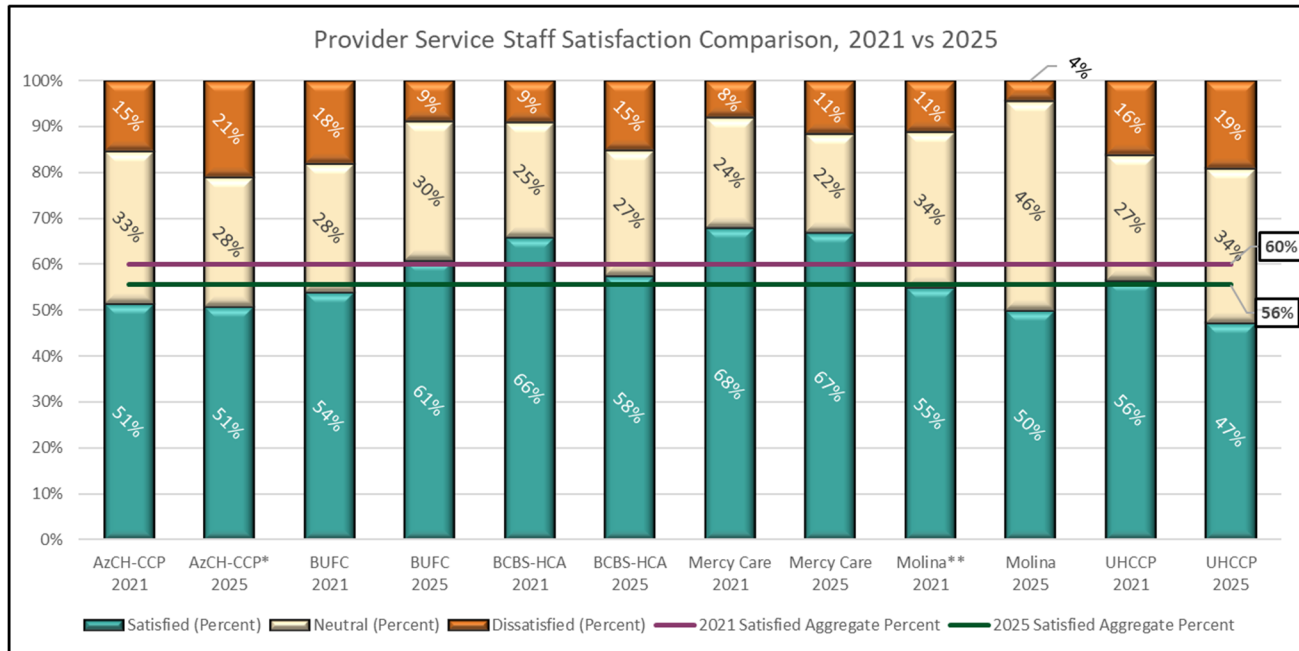
*AzCH-CCP 2025 includes data from Care 1st, which was acquired by AzCH-CCP in 2024.

**Molina was known as Magellan in 2021; however, their name change was completed in 2022. Molina is used here for consistency.

2025 MCO Provider Survey Results

Provider Service Staff Satisfaction Comparison:

- Aggregate Satisfaction:
 - 2021: **60%**
 - 2025: **56%**
- One health plan's satisfaction percentages did not change and another increased, while all other health plan's satisfaction percentage decreased.
- Neutral responses had both increases and decreases across the health plans.
- Four of the health plans increased their dissatisfaction percentages while the remaining two decreased.



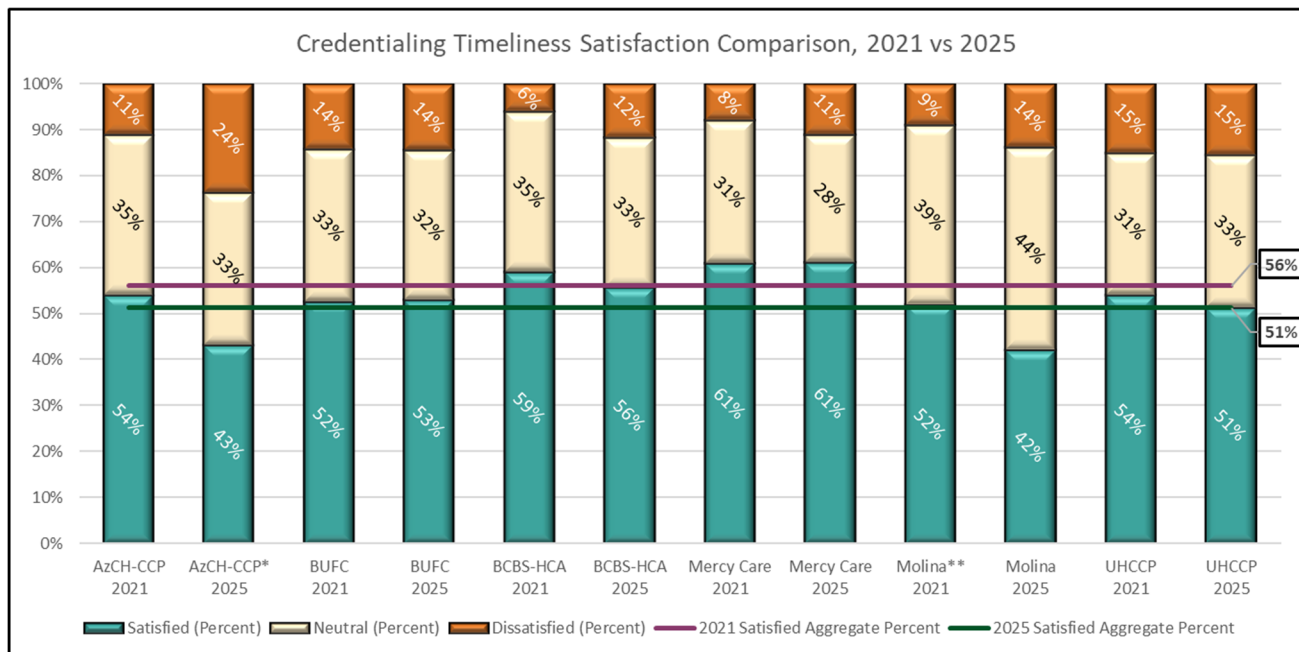
*AzCH-CCP 2025 includes data from Care 1st, which was acquired by AzCH-CCP in 2024.

**Molina was known as Magellan in 2021; however, their name change was completed in 2022. Molina is used here for consistency.

2025 MCO Provider Survey Results

Credentialing Timeliness Satisfaction Comparison:

- Aggregate Satisfaction:
 - 2021: **56%**
 - 2025: **51%**
- One health plan's satisfaction increased, and another health plans did not change. All other health plan's satisfaction percentage had decreased.
- Neutral responses had both increases and decreases across the health plans.
- Two health plans' dissatisfaction percentage did not change, while the remaining four had increases in their dissatisfaction percentages.



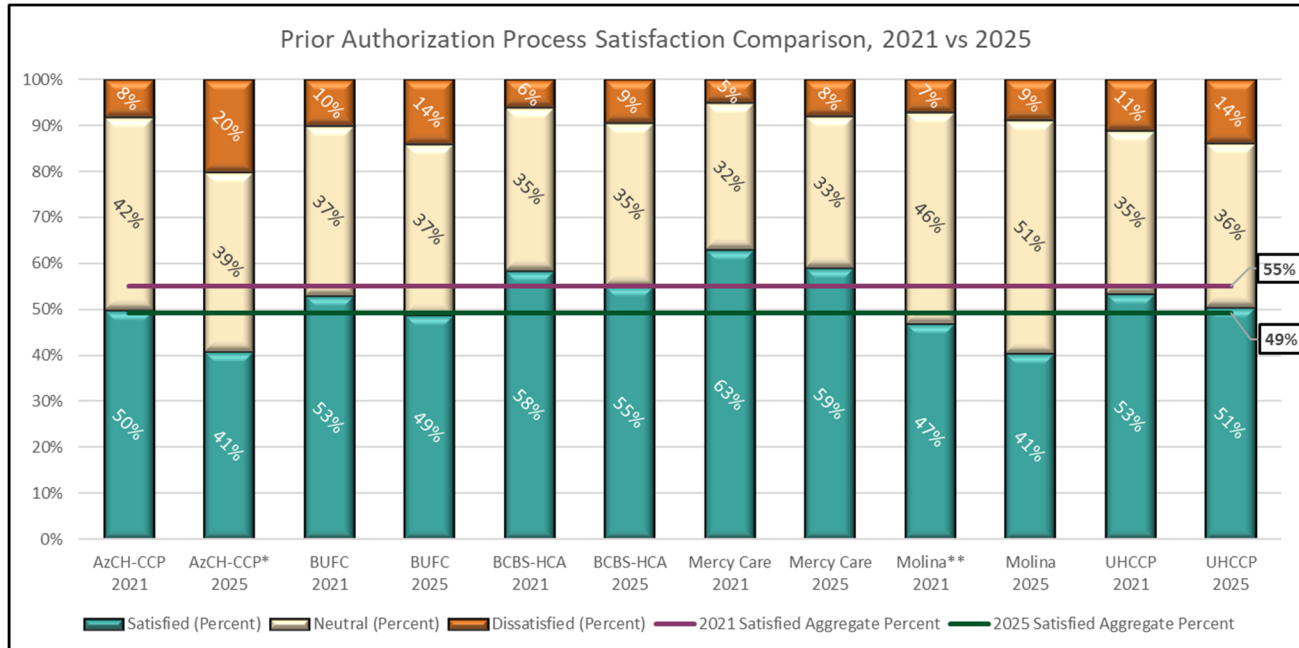
*AzCH-CCP 2025 includes data from Care 1st, which was acquired by AzCH-CCP in 2024.

**Molina was known as Magellan in 2021; however, their name change was completed in 2022. Molina is used here for consistency.

2025 MCO Provider Survey Results

Prior Authorization Process Satisfaction Comparison:

- Aggregate Satisfaction:
 - 2021: **55%**
 - 2025: **49%**
- Satisfaction percentages decreased across all health plans.
- Neutral responses increased slightly for three health plans, remained unchanged for two health plans, and decreased for one health plan.
- Dissatisfaction percentages increased for all health plans.



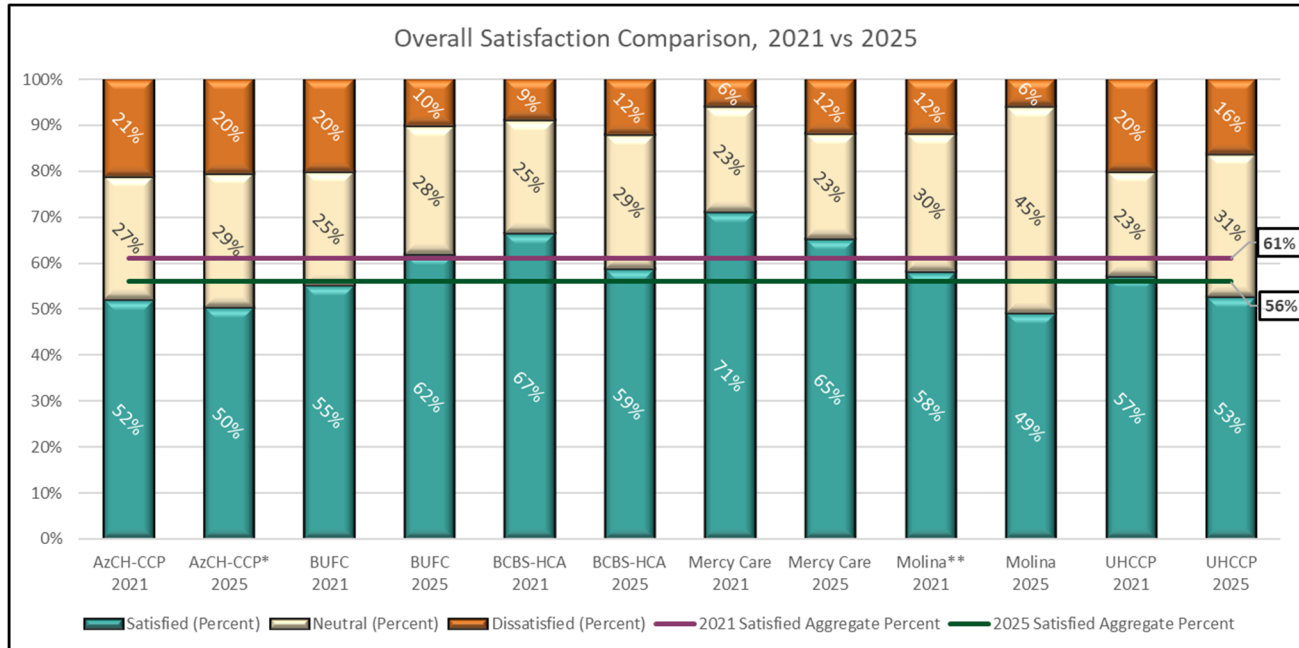
*AzCH-CCP 2025 includes data from Care 1st, which was acquired by AzCH-CCP in 2024.

**Molina was known as Magellan in 2021; however, their name change was completed in 2022. Molina is used here for consistency.

2025 MCO Provider Survey Results

Overall Satisfaction Comparison:

- Aggregate Satisfaction:
 - 2021: **61%**
 - 2025: **56%**
- One health plan had an increase in their satisfaction percentage, while the rest had a decrease.
- All plans, except for one, had an increase in their neutral response percentages.
- Two health plans increased their dissatisfaction percentage while the remaining health plans decreased.



*AzCH-CCP 2025 includes data from Care 1st, which was acquired by AzCH-CCP in 2024.

**Molina was known as Magellan in 2021; however, their name change was completed in 2022. Molina is used here for consistency.

Survey Comments

The survey allowed respondents to submit comments about each health plan. Respondents were provided separate areas to address satisfying and dissatisfying comments. AHCCCS received 745 total comments.

Comments which did not apply to the survey or to the health plan being reviewed were not considered and are not included in the corresponding analysis. Examples of these comments are – “No Comment”, “N/A”, and “None”. Additionally, if a comment was duplicated in the satisfying and dissatisfying fields, it was only counted once as appropriate. In total, 94 of these comments were not included in the corresponding analysis for these reasons. The final analysis consists of 651 comments.

AHCCCS recognizes that dissatisfied respondents may be more likely to comment than satisfied individuals. However, of the 651 comments including the final analysis across all health plans, respondents classified 281 (43 percent) as ‘satisfied’ and 370 as ‘dissatisfied’ (57 percent). Of the 57% percent of dissatisfied comments received in the 2025 survey, responses indicate a desire for health plan improvement in the efficiency and processes for resolution of claims issues, particularly related to claims processing and issues resolution, credentialing and contracting delays, subsequent payment, and efficient and responsive customer service.

Summary Analysis³

AHCCCS used 651 comments for its final analysis. As reflected in the survey results, strengths for some health plans may be reflected as weaknesses for others. The summary of the comments from **all** of the health plans included in the analysis revealed the following:

Common Satisfaction Themes

1. **Claims Processing**
 - Timely and consistent payments
 - Efficient resolution of disputes and reconsiderations
 - User-friendly portals
2. **Customer Service & Provider Relations**
 - Responsive and helpful reps
 - Direct contact with knowledgeable staff
 - Professional and respectful interactions
3. **Authorization Processes**
 - Streamlined and fast approvals
 - Clear communication and generous authorization hours
 - Positive experiences with peer-to-peer reviews
4. **Credentialing & Contracting**
 - Quick turnaround times (20–30 days)
 - Online tracking systems appreciated

³ This content was developed with the assistance of Microsoft Copilot. All AI-generated content was reviewed by knowledgeable AHCCCS staff to ensure accuracy and appropriateness.

2025 MCO Provider Survey Results

- Supportive credentialing teams
- 5. **Training & Communication**
 - Regular updates and provider meetings
 - Educational resources and collaborative problem-solving
- 6. **Positive Organizational Culture**
 - Member-focused approach

Open to feedback and proactive in resolving issues

Common Dissatisfaction Themes

1. **Claims Processing Issues**
 - Frequent erroneous denials
 - Long delays in payment (often exceeding 60 days)
 - Complex and inconsistent reconsideration and appeal processes
 - Coordination of Benefits (COB) challenges
2. **Credentialing & Contracting**
 - Excessive delays (some over a year)
 - Poor communication and lack of transparency
 - Closed panels with no clear justification
 - Inconsistent or missing provider rep support
3. **Authorization Challenges**
 - Slow and inconsistent prior authorization processes
 - Lack of clarity and standardization across health plans
 - Peer-to-peer reviews are often ineffective or delayed
4. **Customer Service & Communication**
 - Difficulty reaching reps or getting responses
 - Chat-based support systems seen as ineffective
 - Lack of follow-up and accountability
5. **Low Reimbursement Rates**
 - Rates often below cost of service delivery
 - Particularly problematic for speech therapy, ABA, and lymphedema care
6. **System & Portal Issues**
 - Non-user-friendly portals
 - Lack of integration with AHCCCS updates
 - Inability to attach documents or view EOBs easily
7. **Provider Network & Access**
 - Limited access to care for members
 - Anti-competitive practices reported
 - Lack of long-term placement options for behavioral health

Continuous Improvement

2025 MCO Provider Survey Results

AHCCCS recognizes the need for improvements regarding health plans' processes outlined in the survey and expects health plans to strive to enhance processes that result in increased provider satisfaction and efficient business operations. AHCCCS will continue to work with the health plans to implement strategies to improve overall efficiency and customer service experience for providers.