

SUMMARY OF PENSION, HOSPITALIZATION BENEFIT PLAN SURVEY

RESPONSES TO SURVEY

- More than 7,900 responses to the survey, which is a phenomenal response. 85% responded by paper, 15% on-line. More than 80% of respondents own a computer.
- Close to 3,000 comments
- 50% of respondents over age 55

KEY FINDINGS OF THE SURVEY

MAGNACARE RESULTS – Based on those expressing an opinion, most respondents are fairly satisfied with MagnaCare.

- A majority think their MagnaCare in-network benefits are easy to use.
- A majority are satisfied with the overall service they receive from MagnaCare.
- A majority are able to find doctors they like in the network, but more than 25% are not.
- While most participants report timely and accurate claims payment, more than 25% are not satisfied.
- A majority of participants find the MagnaCare service representatives as generally courteous, helpful and knowledgeable while a small percentage of the population do not.
- Most people do not use the MagnaCare website or their automated phone service. Of those who do rely on these features, some find them difficult to use.
- Some people find the online provider directory difficult to use and do not think it is current.
- A relatively large number of participants have had a provider leave the network.

HOW DOES MAGNACARE EXPECT TO IMPROVE ITS SERVICE TO PARTICIPANTS?

The Trustees of the Plan met with the senior management of MagnaCare and the following changes are expected:

1. MagnaCare will restructure its website to make access, such as finding freestanding diagnostic facilities, easier. MagnaCare's staff will be in touch with all providers to be sure the Internet information is accurate.
2. MagnaCare will restructure its automated phone response system to decrease the time it takes to speak with a customer service representative.
3. MagnaCare will provide better coaching and training to its customer service representatives.
4. MagnaCare will use the data provided by the Plan to identify all providers not currently in the network in an effort to get as many as possible into the network. MagnaCare's staff will communicate with the out-of-network providers directly in order to recruit more providers where possible.
5. MagnaCare will work with the JIB to provide more frequent and better communication as to how to use the benefits of the plan as well as providing information as to how to keep healthy.
6. MagnaCare will get feedback from participants as to how best provide better use of the web and phone technology.

SURVEY RESPONSES REGARDING PERFORMANCE OF THE JIB HOSPITALIZATION AND MEDICAL DEPARTMENTS

JIB HOSPITALIZATION DEPT. – Participants are typically satisfied with JIB's handling of claims

- A majority of respondents are satisfied with the overall service they get from the customer service reps at the JIB
- More than 40% choose to go out-of-network at least sometimes
- Some respondents do not experience timely claims processing or speedy resolution of problems

JIB MEDICAL DEPT. – Participants are generally satisfied with the Medical Dept.

- A majority of respondents are satisfied with the overall service
- More than 40-50% of respondents use the Medical Dept at least occasionally

COMMENTS MADE BY RESPONDENTS

COMMON POSITIVE COMMENTS

- General satisfaction with and appreciation for availability of benefits and plan design
- Helpful staff at JIB's Hospitalization Dept.
- Satisfaction with the Medical Dept. at the JIB

COMMON NEGATIVE COMMENTS

- Inadequate MagnaCare network: limited provider selection, not enough specialists in certain fields, limited availability of network providers outside the NYC Metro area
- Medical and prescription drug co-payments are too high: This is really a plan design issue that is determined by the Trustees of the Plan and MagnaCare has nothing to with this issue.
- Annual physicals should be covered under the plan: This is also a plan design issued that is determined by the Trustees and MagnaCare has nothing to do with this issue.
- Delayed payment to providers: This topic appears to be a perception issue that is communicated by the physician's office. In fact, MagnaCare pays the majority of valid in-network claims within 10 days after receipt and virtually all claims are paid within 30 days.
- Inadequate technology: online provider directory is not current, Website does not allow search by provider specialty, automated voice response system is frustrating.