

Aetna Better Health® of Illinois
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Aetna Better Health® of Illinois
2025 provider satisfaction survey

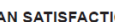
Aetna Better Health® of Illinois values the opinion of providers who serve our members. We're currently working with Press Ganey, an independent research firm to conduct a provider satisfaction survey.

Our 2025 Provider Satisfaction Survey will be conducted June 26 – September 5, 2025.

Your office may receive a survey in the mail from Press Ganey. When you're contacted, we encourage you to complete the survey — either online using your unique log-in credentials or by filling out the form and returning it in a postage-paid envelope.

Your valuable feedback helps our health plan expand on what we're doing well and find opportunities to improve.

Thank you for partnering with us to improve the health of our members, families and communities.



Aetna Better Health[®]
of Illinois

PHYSICIAN SATISFACTION SURVEY

Answer all the questions by marking the box with blue or black ink. Like this ☒.

DEMOGRAPHICS

Please answer the following questions about you and your practice.

1. Please indicate your area of medicine. (Mark all that apply)

☐ Primary Care
 ☐ Specialty
 ☐ Behavioral Health Clinician
2. How many physicians are in your practice?

☐ Solo
 ☐ 2 - 5 physicians
 ☐ More than 5 physicians
3. How many years have you been in this practice?

☐ Less than 5 years
 ☐ 5 - 15 years
 ☐ 16 years or more
4. What portion of your managed care volume is represented by Aetna Better Health of Illinois?

☐ None
 ☐ 10% or less
 ☐ 11 - 20%
 ☐ 21 - 30%
 ☐ 31 - 50%
 ☐ 51 - 75%
 ☐ 76 - 100%
5. Please mark who is completing this survey. (Mark only one)

☐ Physician
 ☐ Behavioral Health Clinician
 ☐ Office Manager
 ☐ Nurse
 ☐ Other staff
6. What is your preferred method of receiving communications from this health plan?

☐ Mail
 ☐ Telephone
 ☐ Fax
 ☐ Online portal

☐ E-mail (Please indicate your e-mail address): _____

☐ In person from your Provider Representative

☐ Other _____
7. Please indicate the number of insurance companies with which you or your practice participates.

☐ 3 or fewer
 ☐ 4 to 7
 ☐ 8 to 11
 ☐ 12 to 15
 ☐ More than 15

COMPARATIVE RATING

8. This question asks you to think about Aetna Better Health of Illinois in comparison to all of the other health plans that you work with.

a. How would you rate Aetna Better Health of Illinois compared to all other health plans you contract with?

☐
☐
☐
☐
☐
☐
☐
☐
☐
☐

Well below average

Somewhat below average

Average

Somewhat above average

Well above average

Not applicable

AetnaBetterHealth.com/Illinois-Medicaid

Tracking number