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# MY 2021 CAHPS® MEDICAID ADULT 5.1 SURVEY

OKLAHOMA HEALTH CARE AUTHORITY

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*PREPARED FOR THE OKLAHOMA HEALTH CARE AUTHORITY THROUGH A CONTRACT WITH KFMC HEALTH IMPROVEMENT PARTNERS*



## OKLAHOMA HEALTH CARE AUTHORITY

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SPH Analytics (SPH), a National Committee for Quality Assurance (NCQA) certified HEDIS<sup>®</sup> Survey Vendor, was selected by Oklahoma Health Care Authority through a contract with KFMC Health Improvement Partners to conduct its MY 2021 CAHPS<sup>®</sup> 5.1 Medicaid Adult Survey. NCQA requires health plans to submit CAHPS survey results in compliance with HEDIS<sup>®</sup> accreditation requirements.

**SURVEY OBJECTIVE** The overall objective of the CAHPS<sup>®</sup> study is to capture accurate and complete information about consumer-reported experiences with health care. Specifically, the survey aims to measure how well plans are meeting their members' expectations and goals; to determine which areas of service have the greatest effect on members' overall satisfaction; and to identify areas of opportunity for improvement, which can aid plans in increasing the quality of provided care.

**2022 NCQA CHANGES** NCQA made no substantial changes to the survey or program for 2022.

Your Project Manager is Tracy Freeman (817-665-7000, ext. 4186). Should you have any questions or comments regarding any aspect of the survey or reporting process, please feel free to call your Project Manager.

## DATA COLLECTION

The MY 2021 Medicaid Adult version of the 5.1 CAHPS survey was administered via the following methodology:

First questionnaire  
mailed  
3/8/2022



Second questionnaire  
mailed  
4/12/2022



Initiate follow-up calls  
to non-responders  
5/3/2022 - 5/17/2022



Last day to accept  
completed surveys  
5/23/2022

## QUALIFIED RESPONDENTS




Included beneficiaries who were...

- 18 years and older (as of December 31<sup>st</sup> of the measurement year)
- Continuously enrolled in the plan for at least five of the last six months of the measurement year

## 2022 RESPONSE RATE CALCULATION

$$\frac{248 \text{ (Completed)}}{1958 \text{ (Sample)} - 50 \text{ (Ineligible)}} = \frac{248}{1908} = 13.0\%$$

## VALID SURVEYS

	Total Number of Mail Completed =	175	(1 in Spanish)
	Total Number of Phone Completed =	49	(0 in Spanish)
	Total Number of Internet Completed =	24	(0 in Spanish)

## Number of Undeliverables: 281

Note: Respondents were given the option of completing the survey in Spanish. In place of the English survey, a Spanish survey was mailed to members who were identified by the plan as Spanish-speaking. A telephone number was also provided on the survey cover letter for all members to call if they would like to complete the survey in Spanish.

## RESPONSE RATE TRENDING

		2020	2021	2022
<b>Completed</b>	<b>SUBTOTAL</b>	---	---	248
	Does not Meet Eligibility Criteria (01)	---	---	31
<b>Ineligible</b>	Language Barrier (03)	---	---	4
	Mentally/Physically Incapacitated (04)	---	---	9
	Deceased (05)	---	---	6
	<b>SUBTOTAL</b>	---	---	50
<b>Non-response</b>	Break-off/Incomplete (02)	---	---	11
	Refusal (06)	---	---	44
	Maximum Attempts Made (07)	---	---	1605
	Added to DNC List (08)	---	---	0
	<b>SUBTOTAL</b>	---	---	1660
<b>Total Sample</b>		---	---	1958
<b>Oversampling %</b>		---	---	45.0%
<b>Response Rate</b>		---	---	13.0%
<i>SPH Response Rate</i>		---	---	12.2%



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# INDUSTRY TRENDS

- Oklahoma Health Care Authority

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

**Trend Highlights** The robust SPH Analytics Book of Business is valuable in monitoring industry trends. On the right, we have provided a side-by-side comparison of aggregate SPH Book of Business scores to help you understand broader trends in measure scoring over the past four years.

**Medicaid Adult:** Among the Medicaid Adult population, several measures declined by more than 1% compared to last year. The biggest decreases were in *Rating of Health Care*, *Getting specialist appointments*, and *Getting urgent care*.

Most scores rose at the beginning of the pandemic, but *Rating of Health Plan* and *Coordination of Care* are the only measures still rated at least 1% higher than they were in 2019. *Getting urgent care* and *Flu Vaccine* are both 3% lower than their 2019 scores.

**COVID-19 Impact** The pandemic caused significant disruption throughout most of 2020 and continuing through today. The disruption is reflected in the variation we've seen in health system experience scores over the last few years.

SPH Book of Business Trends				
	2019	2020	2021	2022
<b>Rating Questions (% 9 or 10)</b>				
Q28. Rating of Health Plan	62.0%	64.6%	64.5%	64.0%
Q8. Rating of Health Care	56.2%	58.8%	59.4%	57.0%
Q18. Rating of Personal Doctor	68.8%	70.7%	70.4%	69.5%
Q22. Rating of Specialist	66.8%	70.9%	69.7%	68.4%
<b>Rating Questions (% 8, 9 or 10)</b>				
Q28. Rating of Health Plan	78.4%	80.3%	79.8%	79.6%
Q8. Rating of Health Care	75.7%	76.9%	77.5%	75.8%
Q18. Rating of Personal Doctor	82.7%	84.2%	83.8%	83.1%
Q22. Rating of Specialist	82.9%	84.7%	83.9%	82.7%
<b>Getting Needed Care (% A/U)</b>				
Q9. Getting care, tests, or treatment	85.5%	86.3%	85.8%	85.0%
Q20. Getting specialist appointment	80.9%	80.7%	82.4%	79.6%
<b>Getting Care Quickly (% A/U)</b>				
Q4. Getting urgent care	84.9%	85.0%	84.3%	81.7%
Q6. Getting routine care	80.4%	80.4%	80.9%	80.0%
<b>Coordination of Care (Q17) (% A/U)</b>				
Q17. Coordination of Care	83.8%	85.9%	84.8%	85.0%
<b>Flu Vaccine: Adults 18-64 (Q31) (% Y)</b>				
Q31. Flu Vaccine: Adults 18-64	45.4%	44.1%	40.6%	41.2%

 Increase of 1% or greater since 2021  
 Decrease of 1% or greater since 2021



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# EXECUTIVE SUMMARY

- Oklahoma Health Care Authority

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**Summary Rates (SRS)** are defined by NCQA in its HEDIS MY 2021 CAHPS® 5.1H guidelines and generally represent the most favorable response percentages.

**Percentile Rankings** Your plan's approximate percentile rankings in relation to the Quality Compass® All Plans benchmark were calculated by SPH Analytics using information derived from the NCQA 1-100 Benchmark.

**SPH Benchmark Information** The source for data contained within the SPH Book of Business is all submitting plans that contracted with SPH for MY 2021. Submission occurred on May 25<sup>th</sup>, 2022.

**NCQA Benchmark Information** The source for data contained in this publication is Quality Compass® All Plans 2021. It is used with the permission of NCQA. Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass® is a registered trademark of NCQA.

**Significance Testing** All significance testing is performed at the 95% confidence level using a t-test.

**Small Denominator Threshold** NCQA will assign a measure result of NA to overall ratings or composites with a denominator (i.e., the average number of responses across all questions used to calculate the composite) less than 100.

**Non-Accreditation Notation** Throughout the report you will see a notation of “+” which indicates that the given measure is not utilized for accreditation score calculation.

**COVID-19 IMPACT** Because the 2020 survey administration took place during extraordinary circumstances, please use caution when comparing and interpreting trend results.

**Technical Notes** Please refer to the Technical Notes for more information.





248

Completed surveys

13.0%

Response Rate

**Stars:** SPH **Estimated** NCQA Rating  
NA = Denominator < 100

**Scores:** All scores displayed are Summary Rate Scores

- Rating: % 9 or 10
- Composites: % Usually or Always
- Flu: % Yes
- Smoking: % Always, Usually, or Sometimes

**Significance Testing:** Current score is significantly higher/lower than 2021 (↑/↓) or 2020 (↕/↔).

**Percentiles:** Based on the 2022 SPH Book of Business

**Health Plan Key Driver Classification:** Details can be found in the KDA section.

More info.

Rating of Health Plan ★			
Rating of Health Plan	51.1%	<5 <sup>th</sup>	---
Rating of Health Care ★★★			
Rating of Health Care	56.8%	49 <sup>th</sup>	Opportunity
Rating of Personal Doctor ★★★★★			
Rating of Personal Doctor	71.5%	64 <sup>th</sup>	Retain
Rating of Specialist ★★★			
Rating of Specialist	70.9%	68 <sup>th</sup>	Power
Flu Vaccine: 18-64 ★★★★★			
Flu Vaccine: 18-64	45.1%	72 <sup>nd</sup>	---
Advised to Quit Smoking: 2YR (NA)			
Advised to Quit Smoking: 2YR	71.1%	35 <sup>th</sup>	---

Customer Service +			
Composite	88.8%	39 <sup>th</sup>	---
Q24. Provided information or help	81.9%	34 <sup>th</sup>	Wait
Q25. Treated with courtesy and respect	95.7%	54 <sup>th</sup>	Retain
Ease of Filling Out Forms +			
Ease of Filling Out Forms +	95.2%	35 <sup>th</sup>	Wait

Coordination of Care ★★★			
Coordination of Care	84.1%	41 <sup>st</sup>	Wait
Getting Needed Care ★★★★★			
Composite	86.5%	86 <sup>th</sup>	---
Q9. Getting care, tests, or treatment	83.1%	31 <sup>st</sup>	Wait
Q20. Getting specialist appointment	89.9%	99 <sup>th</sup>	Power
Getting Care Quickly ★★★★★			
Composite	84.5%	74 <sup>th</sup>	---
Q4. Getting urgent care	88.0%	89 <sup>th</sup>	Power
Q6. Getting routine care	81.0%	54 <sup>th</sup>	Power

How Well Doctors Communicate +			
Composite	93.9%	70 <sup>th</sup>	---
Q12. Dr. explained things	93.9%	67 <sup>th</sup>	Retain
Q13. Dr. listened carefully	95.1%	83 <sup>rd</sup>	Retain
Q14. Dr. showed respect	95.1%	60 <sup>th</sup>	Retain
Q15. Dr. spent enough time	91.5%	56 <sup>th</sup>	Power



# ESTIMATED NCQA HEALTH INSURANCE PLAN RATINGS

MEDICAID ADULT

Oklahoma Health Care Authority  
Prepared for the Oklahoma Health Care Authority through  
a contract with KFMC Health Improvement Partners

	SCORE DEFINITION	2022 BASE	2022 HPR SCORE*	HPR 4 STAR THRESHOLD	HPR PERCENTILE BAND	SPH ESTIMATED RATING
<b>PATIENT EXPERIENCE</b>						<b>3</b>
<b>GETTING CARE</b>						<b>4</b>
Getting Needed Care	Usually or Always	151	86.4%	85.7%	67 <sup>th</sup>	4
Getting Care Quickly	Usually or Always	131	84.4%	83.7%	67 <sup>th</sup>	4
<b>SATISFACTION WITH PLAN PHYSICIANS</b>						<b>3.5</b>
Rating of Personal Doctor	9 or 10	193	71.5%	71.5%	67 <sup>th</sup>	4
Rating of Specialist	9 or 10	110	70.9%	71.9%	33 <sup>rd</sup>	3
Rating of Health Care	9 or 10	183	56.8%	60.8%	33 <sup>rd</sup>	3
Coordination of Care	Usually or Always	107	84.1%	87.4%	33 <sup>rd</sup>	3
<b>SATISFACTION WITH PLAN SERVICES</b>						<b>1</b>
Rating of Health Plan	9 or 10	233	51.0%	64.7%	<10 <sup>th</sup>	1
<b>PREVENTION</b>						
Flu Vaccinations Adults Ages 18-64	Yes	235	45.1%	42.4%	67 <sup>th</sup>	4
<b>TREATMENT</b>						
Smoking Advice: Rolling Average	Sometimes, Usually or Always	83	71.1%	77.7%	10 <sup>th</sup>	NA

## EXPLANATION

NCQA calculates health plan ratings (HPR) by evaluating plans in three categories: consumer satisfaction, clinical quality (includes prevention and treatment) and NCQA Accreditation Standards score.

The overall NCQA star rating is the weighted average of an organization's HEDIS and CAHPS measure ratings, plus Accreditation bonus points (if the organization has NCQA Accreditation), rounded to the nearest half point.

The CAHPS measures are classified based on their national percentile (10<sup>th</sup>, 33<sup>rd</sup>, 67<sup>th</sup> and 90<sup>th</sup>) into scores ranging from 1 to 5 (in increments of 0.5), where 5 is the highest score and 1 is the lowest.

Results are summarized in the table to the left. **Percentiles and ratings are estimated by SPH** based on the 2021 NCQA data and benchmarks.

Rating = 1	Rating = 2	Rating = 3	Rating = 4	Rating = 5
<10 <sup>th</sup> Percentile	10 <sup>th</sup> – 32 <sup>rd</sup> Percentile	33 <sup>rd</sup> – 66 <sup>th</sup> Percentile	67 <sup>th</sup> – 89 <sup>th</sup> Percentile	≥90 <sup>th</sup> Percentile

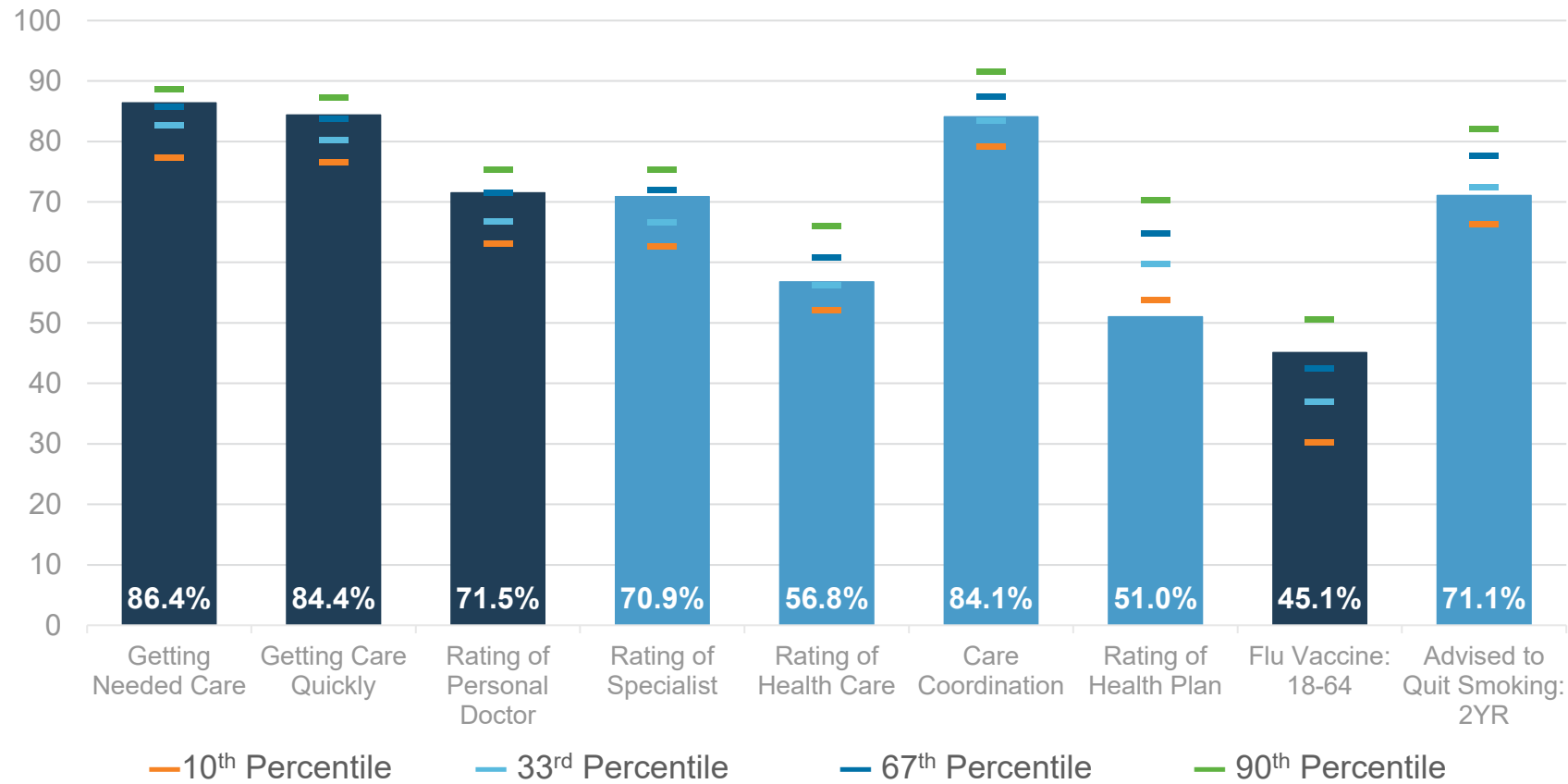
### Notes:

- NCQA will assign a measure result of NA to overall ratings or composites with a denominator (i.e., the average number of responses across all questions used to calculate the composite) less than 100.
- Medicaid plans have the option to be scored on either Adult CAHPS or Child CAHPS data.

\*HPR scores are truncated to three digits (XX.X%) according to the NCQA calculation protocol for Health Plan Ratings. Please note that scores on this slide may differ slightly compared to scores found throughout the rest of the report.

## COMPARISON TO QUALITY COMPASS CUT POINTS

The graph shows how your plan's **Estimated Health Plan Rating (HPR) scores** used for accreditation ratings compare to the most recent Quality Compass thresholds published by NCQA (Fall 2021).



**Dark Blue** bar = Your plan's performance is at or above the 67<sup>th</sup> percentile

**Light Blue** bar = Your plan's performance is below the 67<sup>th</sup> percentile





**HPR scores** are **truncated** to three digits (XX.X%) according to the NCQA calculation protocol for Health Plan Ratings. Please note that scores on this slide may differ slightly compared to scores found throughout the rest of the report.

\* Scores are % 9 or 10, % Always or Usually, % Yes (Flu) and % Always, Usually or Sometimes (Smoking Advice: Rolling Average).

MEASURE	SUMMARY RATE		CHANGE	2022 SPH BOOK OF BUSINESS BENCHMARK							
	2021	2022		PERCENTILE DISTRIBUTION			PERCENTILE RANK	BoB SRS			
				0	20	40	60	80	100		
<b>Health Plan Domain</b>											
Rating of Health Plan <i>% 9 or 10</i>	---	51.1%	---						<5 <sup>th</sup>	64.0%	▼
Getting Needed Care <i>% Usually or Always</i>	---	86.5%	---						86 <sup>th</sup>	82.3%	
Customer Service + <i>% Usually or Always</i>	---	88.8%	---						39 <sup>th</sup>	89.7%	
Ease of Filling Out Forms + <i>% Usually or Always</i>	---	95.2%	---						35 <sup>th</sup>	95.6%	
<b>Health Care Domain</b>											
Rating of Health Care <i>% 9 or 10</i>	---	56.8%	---						49 <sup>th</sup>	57.0%	
Getting Care Quickly <i>% Usually or Always</i>	---	84.5%	---						74 <sup>th</sup>	80.9%	
How Well Doctors Communicate + <i>% Usually or Always</i>	---	93.9%	---						70 <sup>th</sup>	92.7%	
Coordination of Care <i>% Usually or Always</i>	---	84.1%	---						41 <sup>st</sup>	85.0%	
Rating of Personal Doctor <i>% 9 or 10</i>	---	71.5%	---						64 <sup>th</sup>	69.5%	
Rating of Specialist <i>% 9 or 10</i>	---	70.9%	---						68 <sup>th</sup>	68.4%	

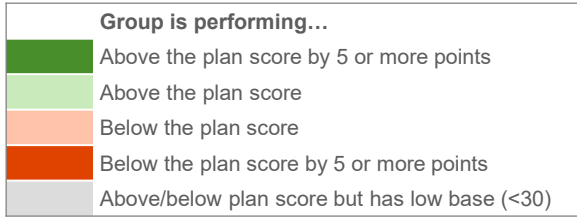
**Significance Testing** Current score is significantly higher/lower than the 2021 score (↑/↓) or benchmark score (▲/▼).

[More info.](#) 

MEASURE	SUMMARY RATE		CHANGE	2022 SPH BOOK OF BUSINESS BENCHMARK							
	2021	2022		PERCENTILE DISTRIBUTION			PERCENTILE RANK	BoB SRS			
				0	20	40	60	80	100		
<b>Effectiveness of Care</b>											
Flu Vaccine: 18-64 <i>% Yes</i>	---	45.1%	---						72 <sup>nd</sup>	41.2%	
Advised to Quit Smoking: 2YR <i>% Sometimes, Usually, or Always</i>	---	71.1%	---						35 <sup>th</sup>	74.1%	
Discussing Cessation Meds: 2YR + <i>% Sometimes, Usually, or Always</i>	---	48.1%	---						38 <sup>th</sup>	51.9%	
Discussing Cessation Strategies: 2YR + <i>% Sometimes, Usually, or Always</i>	---	49.4%	---						67 <sup>th</sup>	46.4%	

**Significance Testing** Current score is significantly higher/lower than the 2021 score (↑/↓) or benchmark score (▲/▼).

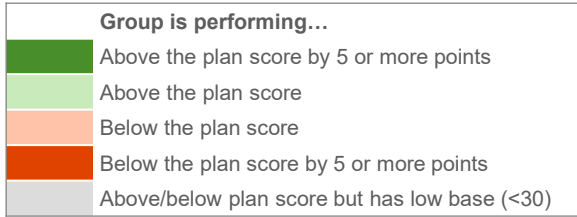
[More info.](#) 



The infographic below highlights disparities in health equity among key demographic groups across the key metrics. Darker shading indicates a larger disparity.

[More info.](#)

			Rating of Health Plan		Rating of Health Care		Getting Needed Care		Getting Care Quickly		Coordination of Care		Flu Vaccine: 18-64	
			SRS	△	SRS	△	SRS	△	SRS	△	SRS	△	SRS	△
<b>Demographic</b>			<b>51.1%</b>		<b>56.8%</b>		<b>86.5%</b>		<b>84.5%</b>		<b>84.1%</b>		<b>45.1%</b>	
<b>Gender</b>	Male	n = 76		3%		-3%		1%		-2%		-3%		2%
	Female	n = 169		-1%		1%		-1%		0%		2%		0%
<b>Age</b>	18 – 34	n = 48		<b>-7%</b>		-4%		0%		0%		8%		<b>-19%</b>
	35 – 44	n = 43		1%		<b>-14%</b>		-11%		1%		-8%		3%
	45 – 54	n = 39		0%		<b>6%</b>		4%		-6%		-2%		<b>-11%</b>
	55 or older	n = 114		2%		<b>6%</b>		2%		1%		4%		<b>11%</b>
<b>Overall Health</b>	Excellent/Very Good	n = 58		3%		<b>9%</b>		-5%		-11%		-17%		<b>-16%</b>
	Good	n = 76		-3%		4%		4%		2%		9%		-1%
	Fair/Poor	n = 108		1%		<b>-5%</b>		-1%		2%		3%		<b>10%</b>
<b>Mental Health</b>	Excellent/Very Good	n = 67		<b>9%</b>		<b>11%</b>		1%		-1%		-1%		<b>-7%</b>
	Good	n = 82		<b>-6%</b>		1%		-2%		3%		<b>8%</b>		4%
	Fair/Poor	n = 90		-2%		<b>-6%</b>		0%		-2%		-3%		1%
<b>Education</b>	HS Grad or less	n = 167		<b>9%</b>		4%		3%		2%		2%		2%
	Some college or more	n = 74		<b>-19%</b>		<b>-9%</b>		<b>-5%</b>		-2%		0%		<b>-5%</b>
<b>Race/Ethnicity</b>	White	n = 182		-4%		0%		0%		1%		1%		-4%
	Black/African-American	n = 37		3%		3%		-1%		-1%		16%		<b>14%</b>
	Asian	n = 7		6%		10%		-3%		3%		16%		38%
	Native Hawaiian/Pacific Islander	n = 2		-1%		43%		14%		16%		16%		55%
	American Indian or Alaska Native	n = 38		<b>-7%</b>		-9%		-4%		-1%		-17%		<b>11%</b>
	Other	n = 14		28%		10%		-18%		-3%		-13%		5%
	Hispanic/Latino	n = 15		16%		16%		-5%		1%		-17%		8%



The infographic below highlights disparities in health equity among key demographic groups across the key metrics. Darker shading indicates a larger disparity.

[More info.](#)

Demographic	Category	Total	Rating of Personal Doctor		Rating of Specialist		Customer Service +		How Well Doctors Communicate +		Ease of Filling Out Forms +	
			SRS	Δ	SRS	Δ	SRS	Δ	SRS	Δ	SRS	Δ
			<b>71.5%</b>		<b>70.9%</b>		<b>88.8%</b>		<b>93.9%</b>		<b>95.2%</b>	
Gender	Male	n = 76		-3%		7%		7%		-5%		-1%
	Female	n = 169		1%		-3%		-4%		2%		0%
Age	18 – 34	n = 48		<b>-7%</b>		-18%		11%		-1%		<b>5%</b>
	35 – 44	n = 43		<b>6%</b>		2%		-6%		2%		<b>5%</b>
	45 – 54	n = 39		4%		2%		-11%		2%		<b>-7%</b>
	55 or older	n = 114		-1%		2%		2%		-1%		-2%
Overall Health	Excellent/Very Good	n = 58		-4%		6%		5%		3%		1%
	Good	n = 76		1%		4%		4%		<b>5%</b>		2%
	Fair/Poor	n = 108		0%		<b>-7%</b>		-4%		-3%		-2%
Mental Health	Excellent/Very Good	n = 67		<b>6%</b>		11%		2%		4%		3%
	Good	n = 82		<b>-7%</b>		-2%		-3%		4%		-3%
	Fair/Poor	n = 90		2%		<b>-8%</b>		3%		<b>-5%</b>		0%
Education	HS Grad or less	n = 167		<b>6%</b>		1%		4%		0%		0%
	Some college or more	n = 74		<b>-12%</b>		-2%		-10%		2%		1%
Race/Ethnicity	White	n = 182		-1%		-3%		1%		-1%		0%
	Black/African-American	n = 37		2%		16%		-3%		3%		2%
	Asian	n = 7		29%		29%		NA		6%		5%
	Native Hawaiian/Pacific Islander	n = 2		29%		29%		11%		6%		5%
	American Indian or Alaska Native	n = 38		-8%		-8%		-2%		0%		-1%
	Other	n = 14		10%		4%		-32%		6%		-2%
	Hispanic/Latino	n = 15		1%		9%		11%		3%		-2%

## TOP THREE Performing Measures

Your plan's percentile rankings for these measures were the highest compared to the 2022 SPH Book of Business.

MEASURE	2022 Valid n	PLAN SUMMARY RATE SCORE			2021 QC			2022 SPH BoB		
		2021	2022	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Getting Needed Care (% Usually or Always)	151	---	86.5%	---	83.6%	2.9	75 <sup>th</sup>	82.3%	4.2	86 <sup>th</sup>
Getting Care Quickly (% Usually or Always)	131	---	84.5%	---	81.8%	2.7	73 <sup>rd</sup>	80.9%	3.6	74 <sup>th</sup>
How Well Doctors Communicate + (% Usually or Always)	164	---	93.9%	---	92.2%	1.7	75 <sup>th</sup>	92.7%	1.2	70 <sup>th</sup>

## BOTTOM THREE Performing Measures

Your plan's percentile rankings for these measures were the lowest compared to the 2022 SPH Book of Business.

MEASURE	2022 Valid n	PLAN SUMMARY RATE SCORE			2021 QC			2022 SPH BoB		
		2021	2022	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Coordination of Care (% Usually or Always)	107	---	84.1%	---	85.4%	-1.3	40 <sup>th</sup>	85.0%	-0.9	41 <sup>st</sup>
Customer Service + (% Usually or Always)	70 <sup>^</sup>	---	88.8%	---	88.9%	-0.1	47 <sup>th</sup>	89.7%	-0.9	39 <sup>th</sup>
Rating of Health Plan (% 9 or 10)	233	---	51.1%	---	62.3%	-11.2	<5 <sup>th</sup>	64.0%	-12.9	<5 <sup>th</sup>

**Significance Testing:** Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↔) or benchmark score (▲/▼).

<sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.



## Improving Performance

These measures had the lowest percentile rankings in comparison to the 2022 SPH Book of Business for your plan.

### Improvement Strategies – Coordination of Care

- Inform, support, remind and facilitate providers about coordination of care expectations, timely notification requirements, and standards of care for post-visit follow up to all PCPs. Explore options to encourage and support communications between specialists and PCPs.
- Develop on-going and timely reminders/messaging to promote and improve communication and reporting between all provider types, ideally based directly on available data/information.
- Assess the status and consistency of coordination of patient care, communication, and information shared within and across provider networks. Assure prompt feedback, standards.
- Support and facilitate a patient-centered care management approach within and across provider networks. Facilitate a complementary plan-based patient centered care management approach.
- Explore potential of aligning information flow/EHRs to better integrate, support or facilitate patient care, care coordination and vital medical and personal information among providers.
- Encourage providers to prompt patients AND patients to prompt providers, i.e., mutual interactions that review and discuss care, tests and/or treatments involving other providers.
- Encourage patients to bring a list of all medications, including dosage and frequency to all appointments. Encourage providers to prompt patients to do the same for their appointments.
- How do PCP's, providers, facilities and/or the plan assure common patient "touch points" to facilitate/support scheduling of appointments, tests and/or procedures? Where is the over-arching guidance and support for the patient/member?

### Improvement Strategies – Customer Service

- Emphasize comprehensive, collaborative, and high-quality customer/member services as a critical priority across all areas of the organization. Think and act together. Establish service recovery guidelines for resolving issues, including phrases that express apologies or atonement.
- Provide on-going/periodic CSR service training, open discussions and routine refresher programs. Include thorough annual updates, tools and resources and subsequent feedback. Training examples include: how to answer questions and resolve issues; consistency in being friendly, courteous and empathetic; quick issue resolution with follow-up; procedures to minimize transfers and wait/on-hold times.
- Involve the CS team in QI activities, seeking concrete customer-based input and improvements. Ensure they are fully informed of updates/changes to processes and procedures.
- Ensure CSRs have immediate access to knowledgeable staff within all key member and provider service areas (Claims, Enrollment, etc.).
- Support key subject matter experts to flexibly respond to urgent or complex types of calls, questions or issues - including prompt prioritization and resolution procedures and/or authority.
- Develop, implement and review protocols and scripts ("Talking Points") to ensure up-to-date, accurate and consist information provided to your members and patients and providers.
- Establish, assess and adhere to measurable CSR performance/service standards (i.e., call satisfaction, call resolution, time on hold, etc.). Operationally define service behaviors.
- Seek QI opportunities with CS via observational walkthrough of calls and discussion/review of complaints, inquiries, and the member experience, especially any changes. Identify main issues and seek interventions that decrease volume and/or improve experience.
- Acknowledge and reward service performance/behaviors reflective of service excellence.

### Improvement Strategies – Rating of Health Plan

- Analyze, investigate, probe for weakness or QI opportunities among those measures or composites that are Key Drivers (or highly correlated) with Rating of the Plan (i.e., CS, Claims, GNC, GCQ, HWDC). Review QI recommendations/actions of these CAHPS composite measures.
- Communicate and educate all areas of the Plan on CAHPS, sharing findings, initiatives and outcomes. Seek input and observations. Engage relevant contributors into QI design/activities.
- Analyze satisfaction levels and loyalty ratings based on member profile/segmentation data (health system, age, length of membership, have PCP, etc.).
- Set S.M.A.R.T. goals Specific, Measurable, Attainable, Realistic, and Timely for all identified activities. Assess all relevant internal data. Conduct additional surveys, data analyses as needed.
- Consider opportunities for positive and strategic messaging about the plan or health care reminders to adult members. Use technology to provide more effective and efficient care.
- Consider the value of a SPH CAHPS Drill-Down, Simulation Survey or CG-CAHPS to probe key CAHPS measures and/or target segments of the population.
- Explore opportunity to continually monitor rating of the plan using targeted follow-up surveys, e.g., call satisfaction, care management, etcetera.
- Develop online videos (vs. excessive reading) explaining key terms and activities members need to know, e.g., how much you have to pay, or Understanding Your Health Insurance Costs. Evaluate and implement complementing, consistent, simple and clear communications.
- Explore or enhance potential of a mobile app providing member immediate access to secure accurate, up-to-date information about their Plan, benefits, coverage, copays, cost, claims, etc.

[Full List of Improvement Strategies !\[\]\(cf531ed27e91483460120fcc057b3901\_img.jpg\)](#)



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# KEY DRIVER ANALYSIS OF RATING OF HEALTH PLAN

- Oklahoma Health Care Authority

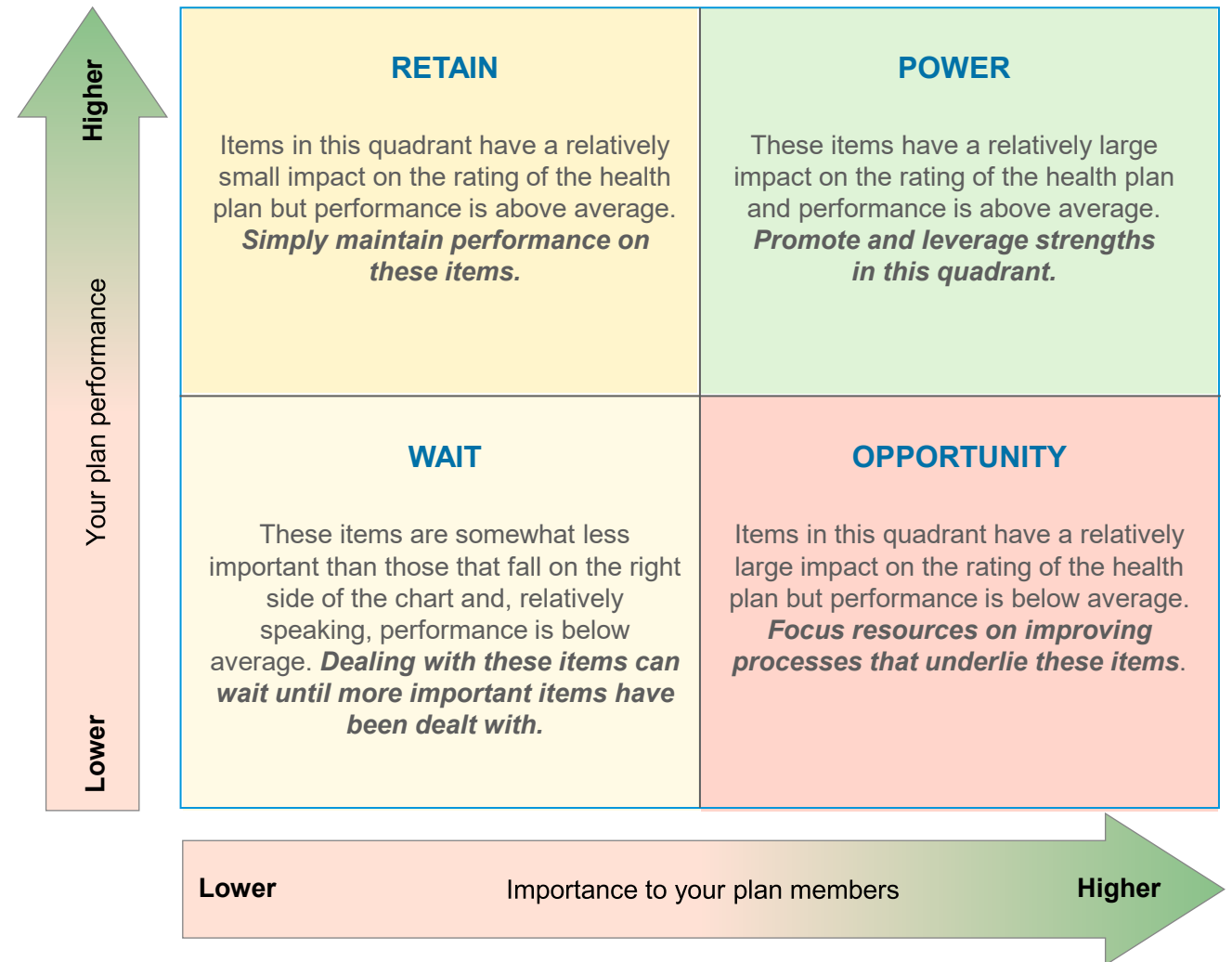
*PREPARED FOR THE OKLAHOMA HEALTH CARE AUTHORITY THROUGH  
A CONTRACT WITH KFMC HEALTH IMPROVEMENT PARTNERS*

### POWeR™ CHART CLASSIFICATION MATRIX

**Overview.** The SatisAction™ key driver statistical model is a powerful, proprietary statistical methodology used to identify the key drivers of the rating of the health plan and provide actionable direction for satisfaction improvement programs. This methodology is the result of a number of years of development and testing using health care satisfaction data. We have been successfully using this approach since 1997.

The model provides the following:

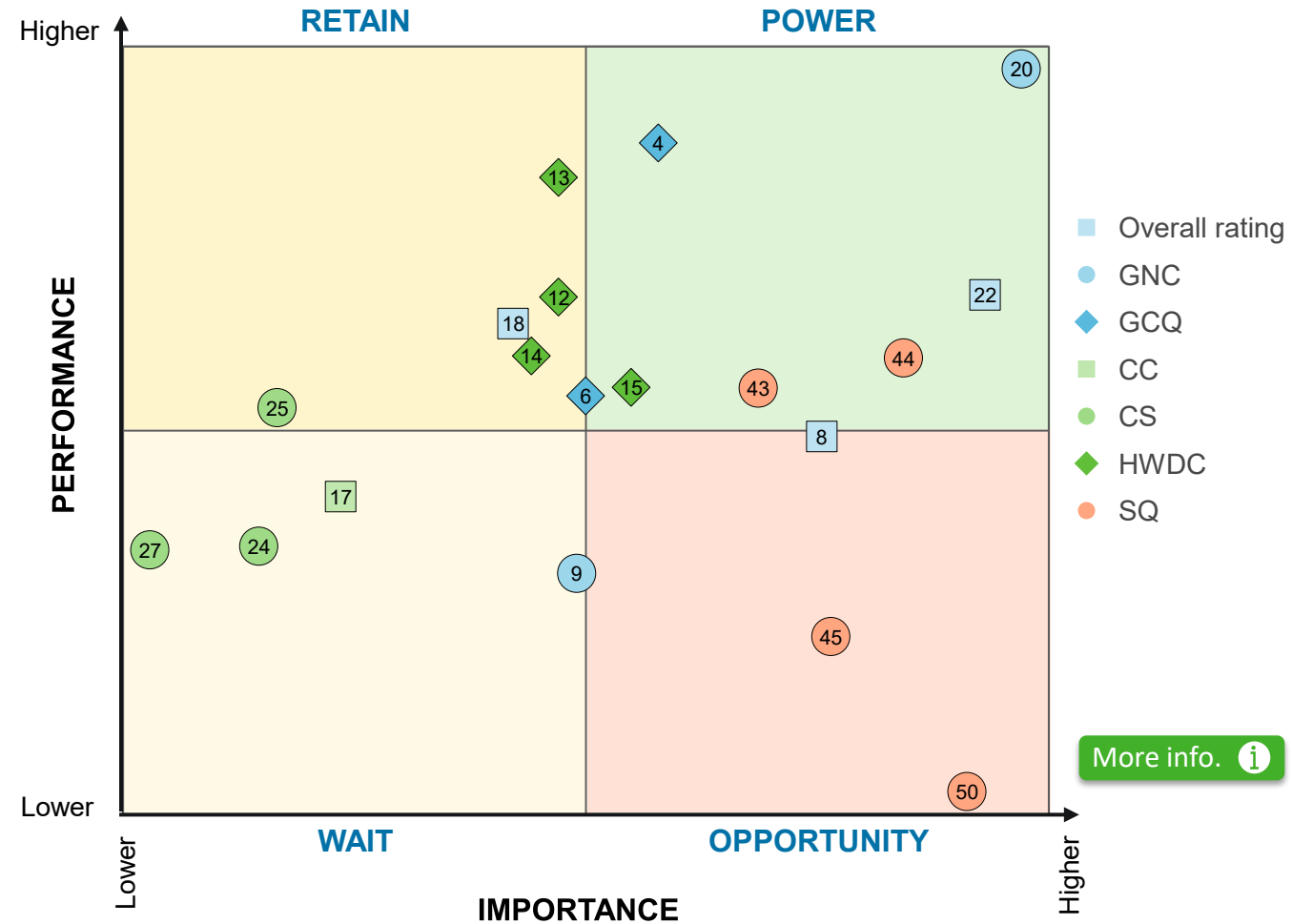
- Identification of the elements that are important in driving of the rating of the health plan.
- Measurement of the relative importance of each of these elements.
- Measurement of how well members think the plan performed on those important elements.
- Presentation of the importance/performance results in a matrix that provides clear direction for member satisfaction improvement efforts by the plan.



SURVEY MEASURE		SRS	SPH %tile
<b>POWER</b>			
Q20	Getting specialist appointment	89.9%	99 <sup>th</sup>
Q22	Rating of Specialist	70.9%	68 <sup>th</sup>
Q44	Easy to understand instructions for taking meds	89.3%	---
Q43	Got wanted info. about health from Dr.	90.4%	---
Q4	Getting urgent care	88.0%	89 <sup>th</sup>
Q15	Dr. spent enough time	91.5%	56 <sup>th</sup>
Q6	Getting routine care	81.0%	54 <sup>th</sup>
<b>OPPORTUNITY</b>			
Q50	Easy to find/understand info. on website	73.8%	---
Q45	Dr. explained side effects of meds	79.1%	---
Q8	Rating of Health Care	56.8%	49 <sup>th</sup>
<b>WAIT</b>			
Q9	Getting care, tests, or treatment	83.1%	31 <sup>st</sup>
Q17	Coordination of Care	84.1%	41 <sup>st</sup>
Q24	Provided information or help	81.9%	34 <sup>th</sup>
Q27	Ease of Filling Out Forms +	95.2%	35 <sup>th</sup>
<b>RETAIN</b>			
Q13	Dr. listened carefully	95.1%	83 <sup>rd</sup>
Q12	Dr. explained things	93.9%	67 <sup>th</sup>
Q14	Dr. showed respect	95.1%	60 <sup>th</sup>
Q18	Rating of Personal Doctor	71.5%	64 <sup>th</sup>
Q25	Treated with courtesy and respect	95.7%	54 <sup>th</sup>

### KEY DRIVERS, SUMMARY RATES AND PERCENTILES

The table assesses the key drivers and each measure is ranked by importance within each quadrant. Focus resources on improving processes that underlie the most important items and look for a significant improvement in the rating of the health plan.



More info. 

ALIGNMENT <i>Are your key drivers typical of the industry?</i>	KEY DRIVER RANK		ATTRIBUTE	SUMMARY RATE SCORE		SPH BoB PERCENTILE	CLASSIFICATION	
	YOUR PLAN	INDUSTRY		YOUR PLAN	INDUSTRY			
<b>TOP 10 KEY DRIVERS</b>				Q28	Rating of Health Plan	51.1%	64.0%	<5 <sup>th</sup>
✓	1	7	Q20	Getting specialist appointment	89.9%	79.6%	99 <sup>th</sup>	Power
✓	2	3	Q22	Rating of Specialist	70.9%	68.4%	68 <sup>th</sup>	Power
	3	---	Q50	Easy to find/understand info. on website	73.8%	---	---	Opportunity
	4	---	Q44	Easy to understand instructions for taking meds	89.3%	---	---	Power
	5	---	Q45	Dr. explained side effects of meds	79.1%	---	---	Opportunity
✓	6	1	Q8	Rating of Health Care	56.8%	57.0%	49 <sup>th</sup>	Opportunity
	7	---	Q43	Got wanted info. about health from Dr.	90.4%	---	---	Power
✓	8	5	Q4	Getting urgent care	88.0%	81.7%	89 <sup>th</sup>	Power
	9	12	Q15	Dr. spent enough time	91.5%	90.9%	56 <sup>th</sup>	Power
✓	10	6	Q6	Getting routine care	81.0%	80.0%	54 <sup>th</sup>	Power
	11	4	Q9	Getting care, tests, or treatment	83.1%	85.0%	31 <sup>st</sup>	Wait
	12	8	Q13	Dr. listened carefully	95.1%	92.7%	83 <sup>rd</sup>	Retain
	14	10	Q14	Dr. showed respect	95.1%	94.5%	60 <sup>th</sup>	Retain
	15	2	Q18	Rating of Personal Doctor	71.5%	69.5%	64 <sup>th</sup>	Retain
	17	9	Q25	Treated with courtesy and respect	95.7%	95.1%	54 <sup>th</sup>	Retain

**YOUR PLAN**  
 These items have a relatively large impact on the Rating of Health Plan. **Leverage** these questions since they are important to your members and the Rating of Health Plan score for this plan. They are listed in descending order of importance for your plan.

**INDUSTRY**  
 SPH Book of Business regression analysis has identified **Key Drivers** of Rating of Health Plan. The numbers represent the ranked importance across the entire Book of Business.

*All Industry scores & rankings are calculated based on the 2022 SPH Book of Business. Any items below the dotted line are Top 10 industry key drivers that are not identified as key drivers for your plan.*



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# MEASURE ANALYSES

## Measure Details and Summary Rate Scores

- Oklahoma Health Care Authority

*PREPARED FOR THE OKLAHOMA HEALTH CARE AUTHORITY THROUGH  
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**Drilling Down Into Composites And Ratings** This section is designed to give your plan a detailed report on the performance of each Star Rating measure as well as a few other key metrics. The measure analysis section contains:

**Rating & Composite** level information including...

- Percentile ranking and benchmark performance
- Historic scores
- Market performance

**Attribute** level information for composites including...

- Gate questions
- Percentile ranking and benchmark performance
- Summary rate score trending

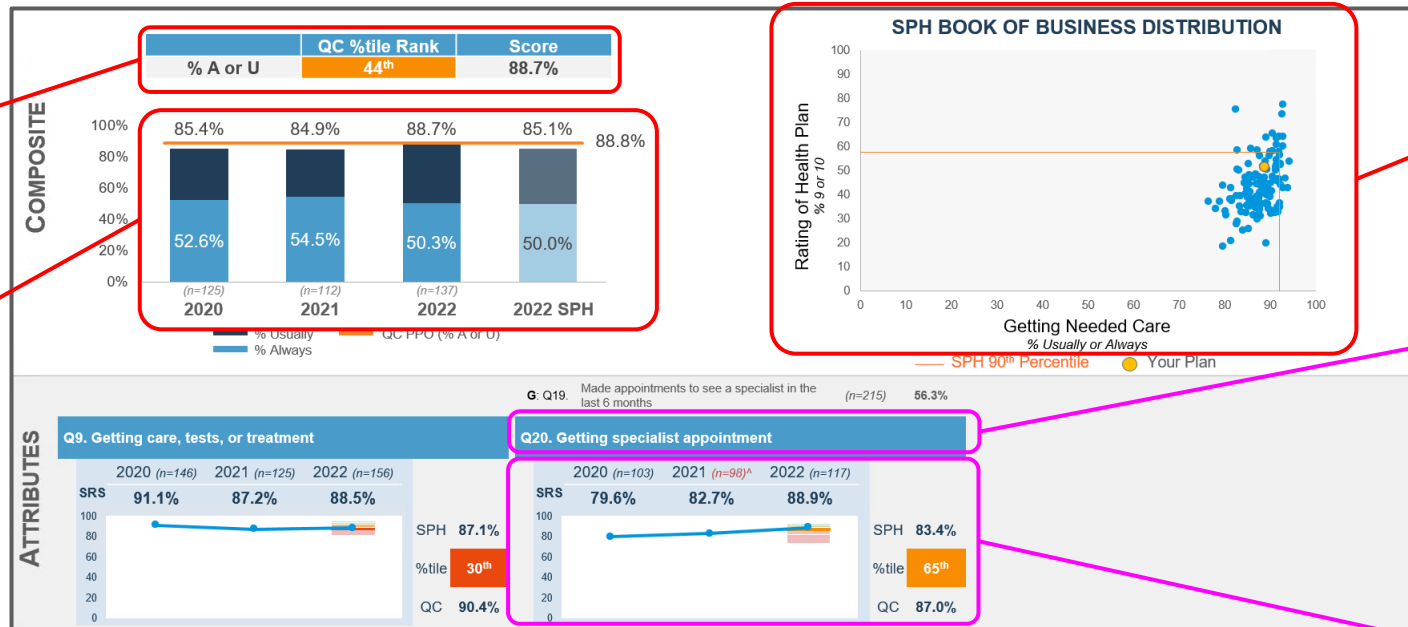
All scores displayed in this section are summary rate scores (notated with 'SRS').

More info.

Percentile Bands	
≥90 <sup>th</sup>	
67 <sup>th</sup> – 89 <sup>th</sup>	
33 <sup>rd</sup> – 66 <sup>th</sup>	
10 <sup>th</sup> – 32 <sup>nd</sup>	
<10 <sup>th</sup>	

Your plan's performance ranking along with **Summary Rate Score** are displayed at the top for quick reference.

Your plan's current year **Summary Rate Score** and base size along with previous two years, SPH BoB and Quality Compass national data are displayed.



Your plan's **Summary Rate Score** is plotted against the SPH Book of Business to provide a visual representation of market performance. The orange line represents the SPH 90<sup>th</sup> percentile.

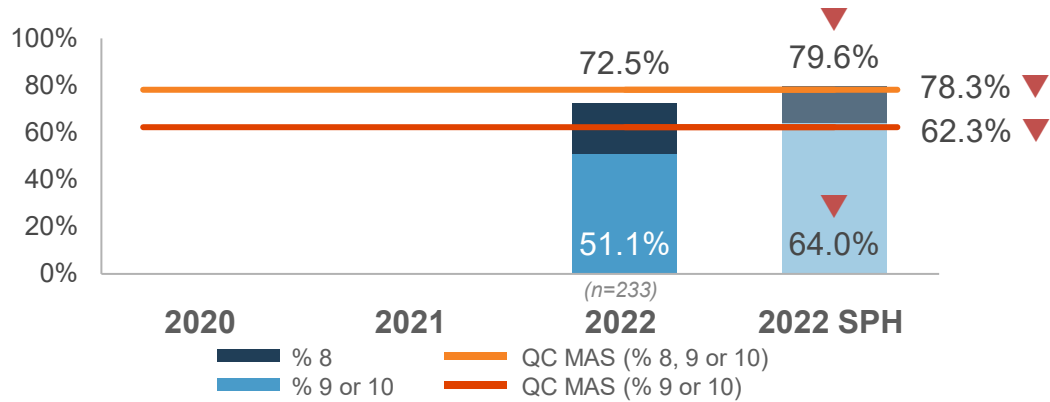
Gate questions (indicated by "G:") for attributes are displayed above attributes – scores displayed are % Yes

For composites – all corresponding attributes that roll-up into the composite score are displayed:

- Historic bases and **Summary Rate Scores** along with significant changes in trend notated
- Benchmark comparisons along with significant differences notated
- Percentile ranking against **Quality Compass**
- Graphic representation of trend and 2021 **Quality Compass** percentile bands

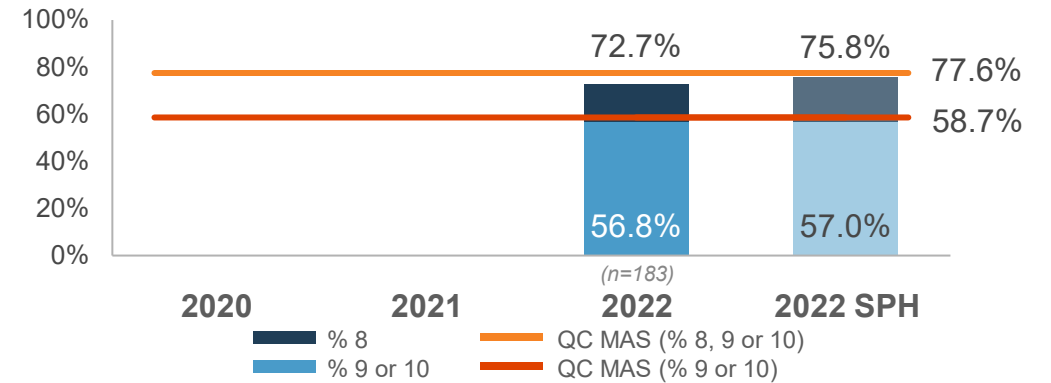
### RATING OF HEALTH PLAN

	QC %tile Rank	Score
% 8, 9 or 10	10 <sup>th</sup>	72.5%
% 9 or 10	<5 <sup>th</sup>	51.1%



### RATING OF HEALTH CARE

	QC %tile Rank	Score
% 8, 9 or 10	15 <sup>th</sup>	72.7%
% 9 or 10	37 <sup>th</sup>	56.8%



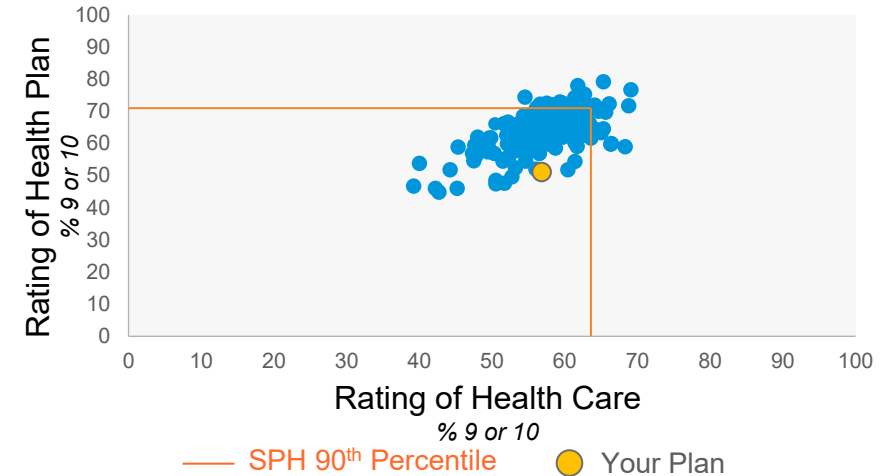
#### Key Drivers Of The Rating Of The Health Plan

##### POWER

##### OPPORTUNITIES

<b>Q20</b>	Getting specialist appointment	<b>Q50</b>	Easy to find/understand info. on website
<b>Q22</b>	Rating of Specialist	<b>Q45</b>	Dr. explained side effects of meds
<b>Q44</b>	Easy to understand instructions for taking meds	<b>Q8</b>	Rating of Health Care
<b>Q43</b>	Got wanted info. about health from Dr.		
<b>Q4</b>	Getting urgent care		
<b>Q15</b>	Dr. spent enough time		
<b>Q6</b>	Getting routine care		

#### SPH BOOK OF BUSINESS DISTRIBUTION



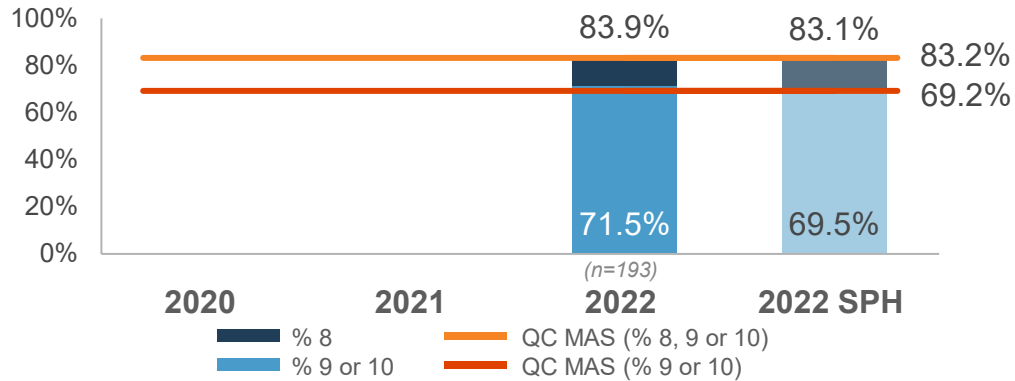
**Significance Testing:** Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↕) or benchmark score (▲/▼).

**^Denominator less than 100. NCQA will assign an NA to this measure.**

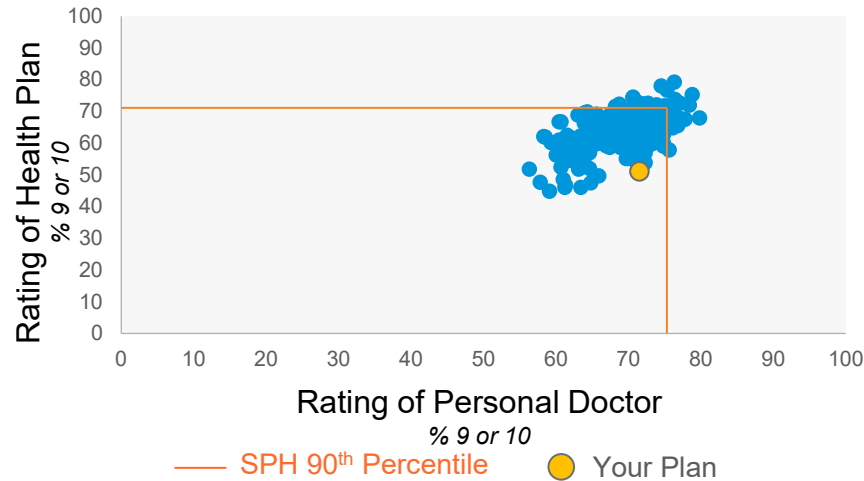


### RATING OF PERSONAL DOCTOR

	QC %tile Rank	Score
% 8, 9 or 10	57 <sup>th</sup>	83.9%
% 9 or 10	66 <sup>th</sup>	71.5%

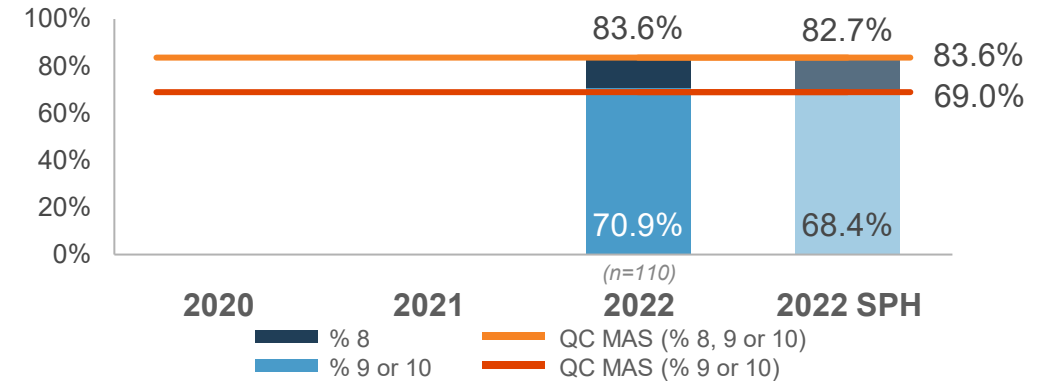


### SPH BOOK OF BUSINESS DISTRIBUTION

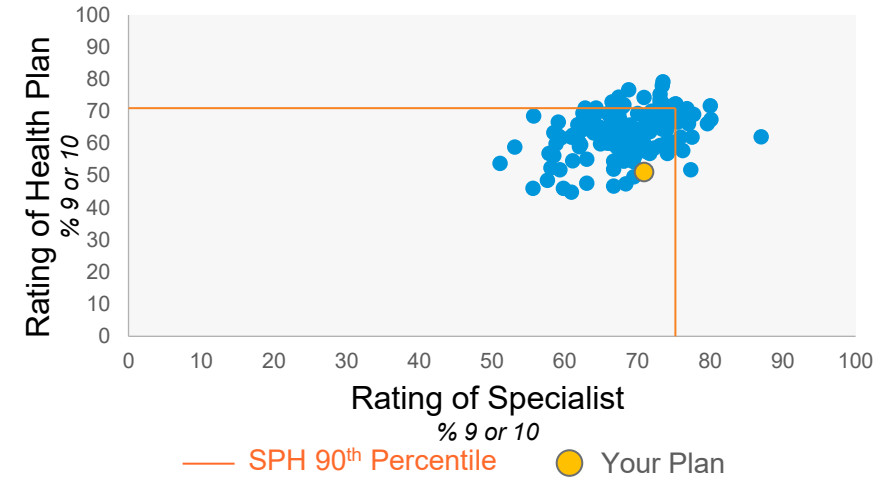


### RATING OF SPECIALIST

	QC %tile Rank	Score
% 8, 9 or 10	47 <sup>th</sup>	83.6%
% 9 or 10	62 <sup>nd</sup>	70.9%



### SPH BOOK OF BUSINESS DISTRIBUTION



**Significance Testing:** Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↕) or benchmark score (▲/▼).

**^Denominator less than 100. NCQA will assign an NA to this measure.**

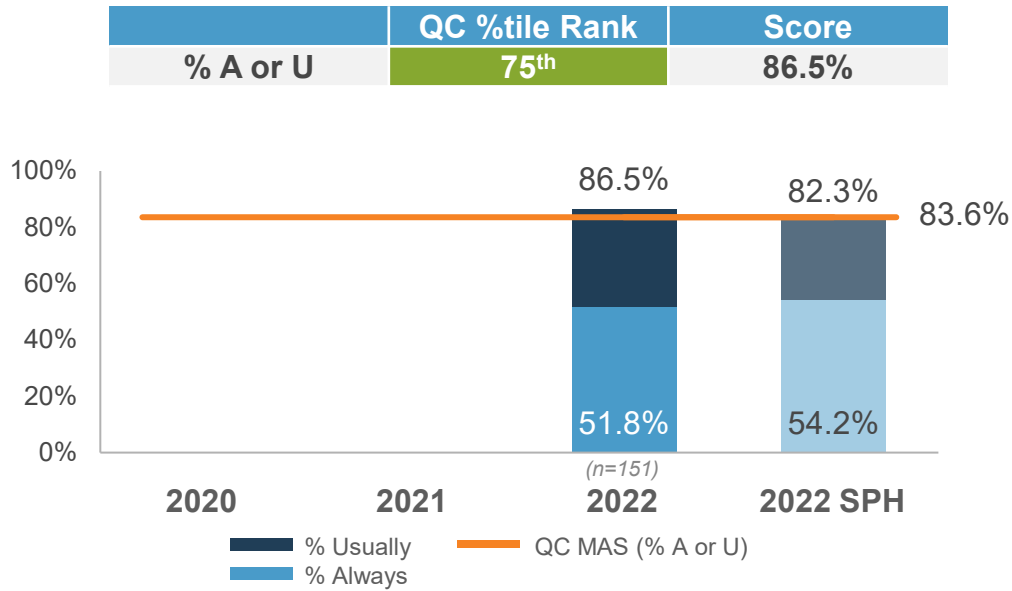


# GETTING NEEDED CARE

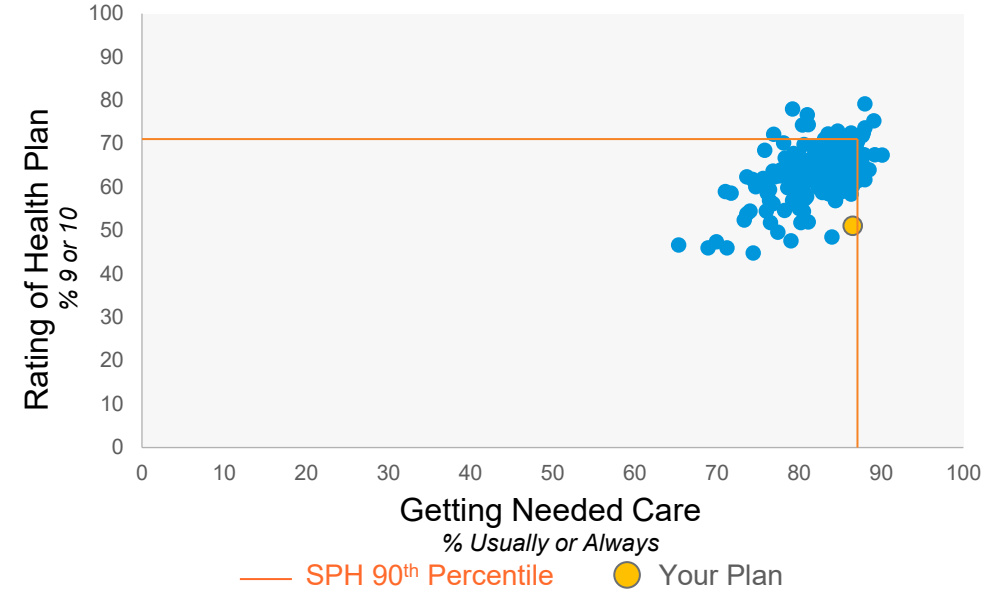
MEDICAID ADULT

Oklahoma Health Care Authority  
Prepared for the Oklahoma Health Care Authority through  
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COMPOSITE



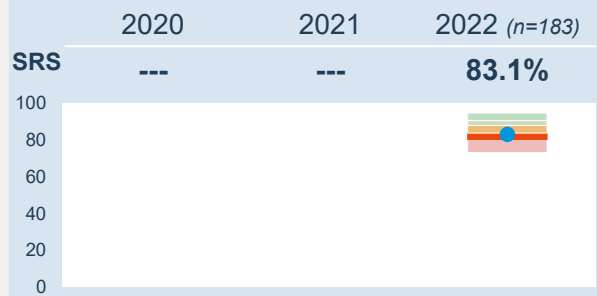
## SPH BOOK OF BUSINESS DISTRIBUTION



ATTRIBUTES

**G: Q19.** Made appointments to see a specialist in the last 6 months (n=246) **49.6%**

### Q9. Getting care, tests, or treatment



### Q20. Getting specialist appointment



**Significance Testing:** Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↔) or benchmark score (▲/▼).

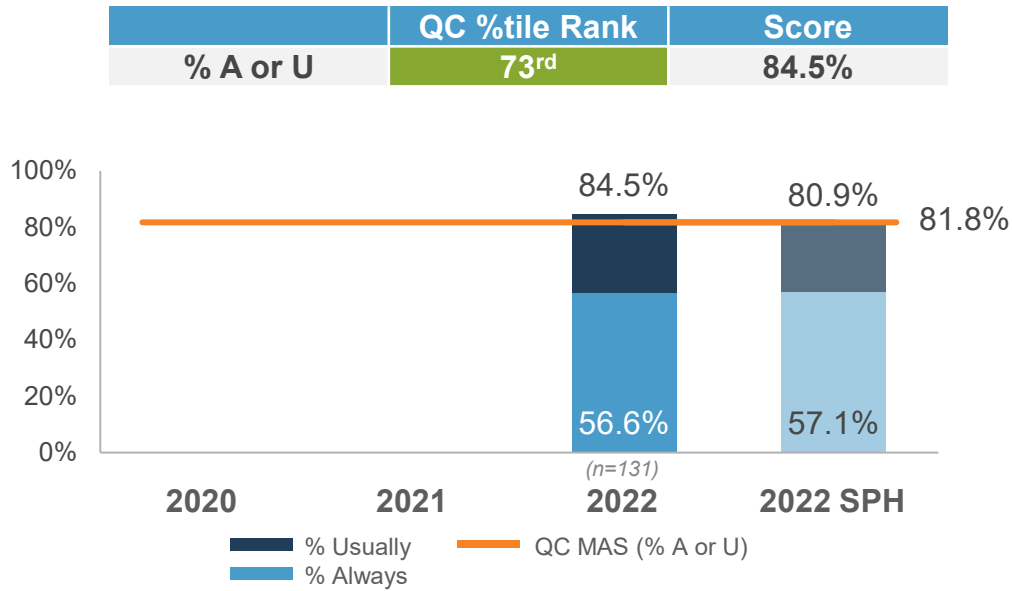
**^Denominator less than 100. NCQA will assign an NA to this measure.**



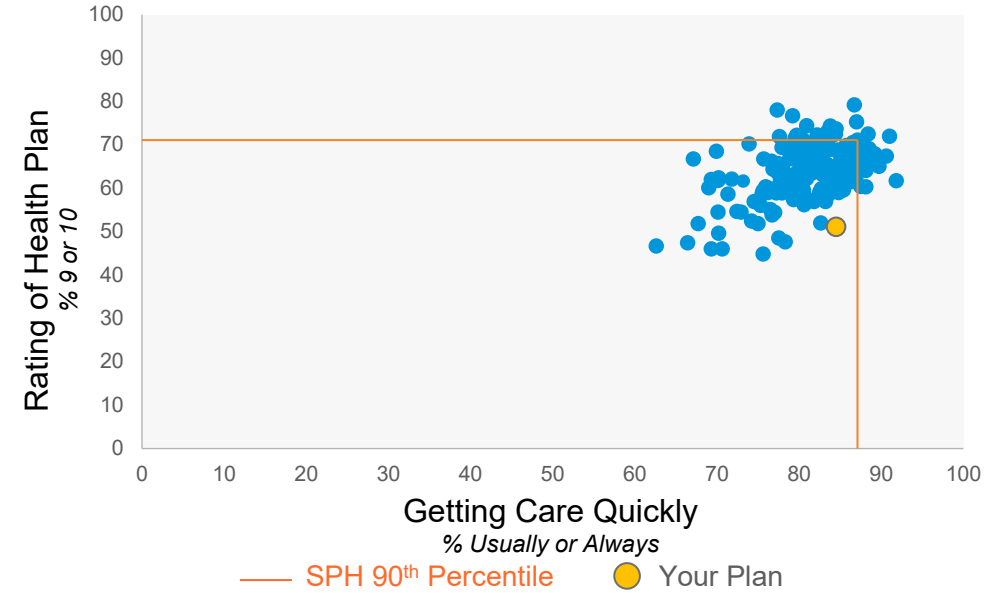
# GETTING CARE QUICKLY

MEDICAID ADULT

COMPOSITE



## SPH BOOK OF BUSINESS DISTRIBUTION



ATTRIBUTES

**G: Q3.** Had illness, injury or condition that needed care right away (n=246) 41.9%

**G: Q5.** Made appointments for check-ups or routine care at doctor's office or clinic (n=247) 68.0%

### Q4. Getting urgent care



### Q6. Getting routine care

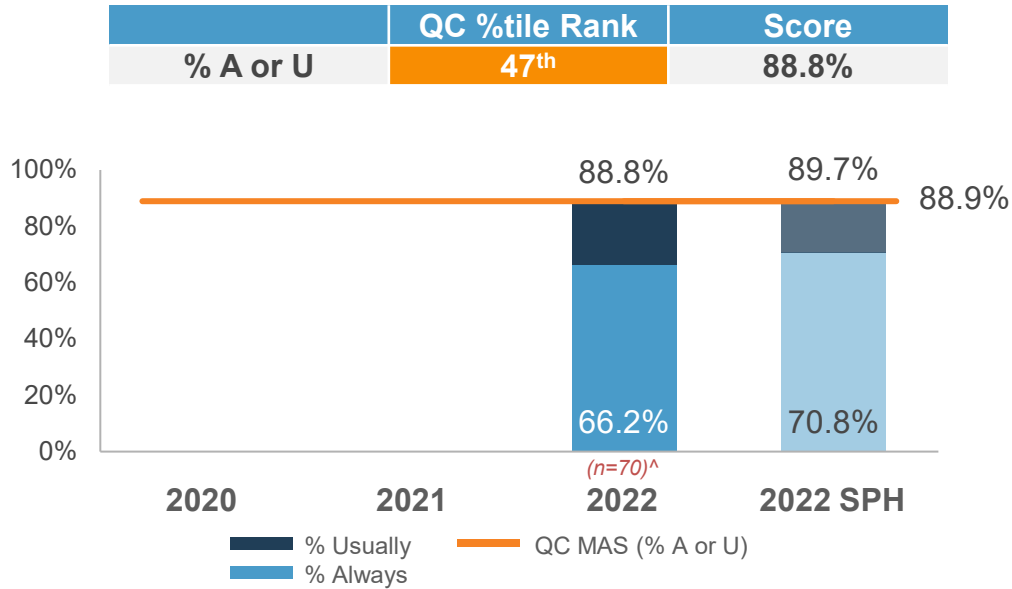


**Significance Testing:** Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↕) or benchmark score (▲/▼).

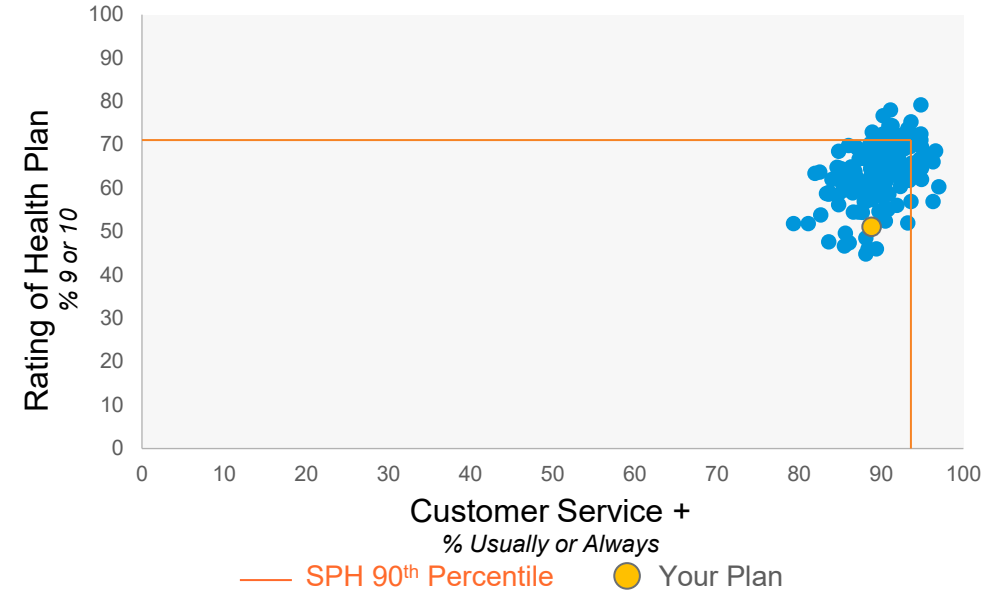
**^Denominator less than 100. NCQA will assign an NA to this measure.**



COMPOSITE



## SPH BOOK OF BUSINESS DISTRIBUTION



G: Q23. Got information or help from customer service (n=238) 30.7%

### Q24. Provided information or help



SPH 84.3%  
%tile 33<sup>rd</sup>  
QC 83.5%

### Q25. Treated with courtesy and respect



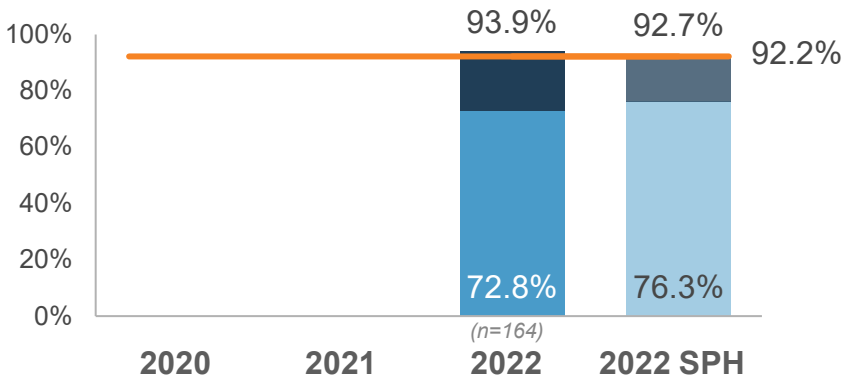
SPH 95.1%  
%tile 70<sup>th</sup>  
QC 94.3%

Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↕) or benchmark score (▲/▼).

^Denominator less than 100. NCQA will assign an NA to this measure.

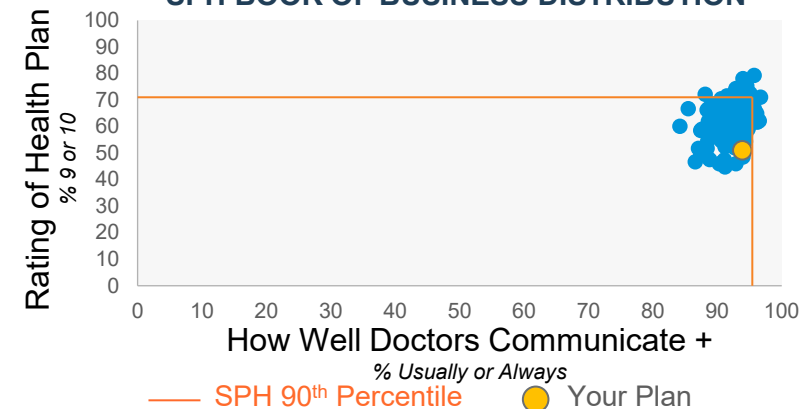
## COMPOSITE

% A or U	QC %tile Rank	Score
	75 <sup>th</sup>	93.9%



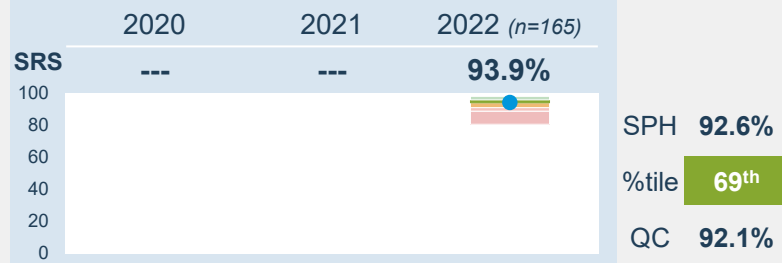
■ % Usually    — QC MAS (% A or U)  
■ % Always

### SPH BOOK OF BUSINESS DISTRIBUTION



## ATTRIBUTES

### Q12. Dr. explained things



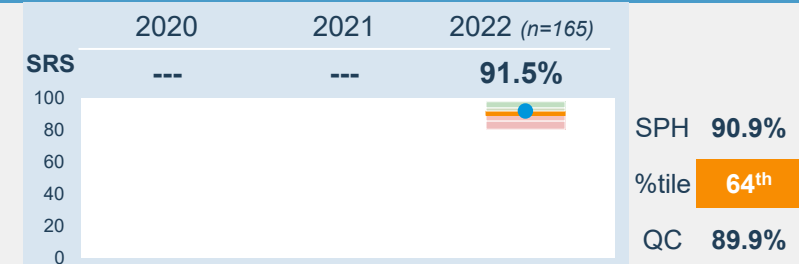
### Q14. Dr. showed respect



### Q13. Dr. listened carefully



### Q15. Dr. spent enough time



**Significance Testing:** Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↔) or benchmark score (▲/▼).

**^Denominator less than 100. NCQA will assign an NA to this measure.**

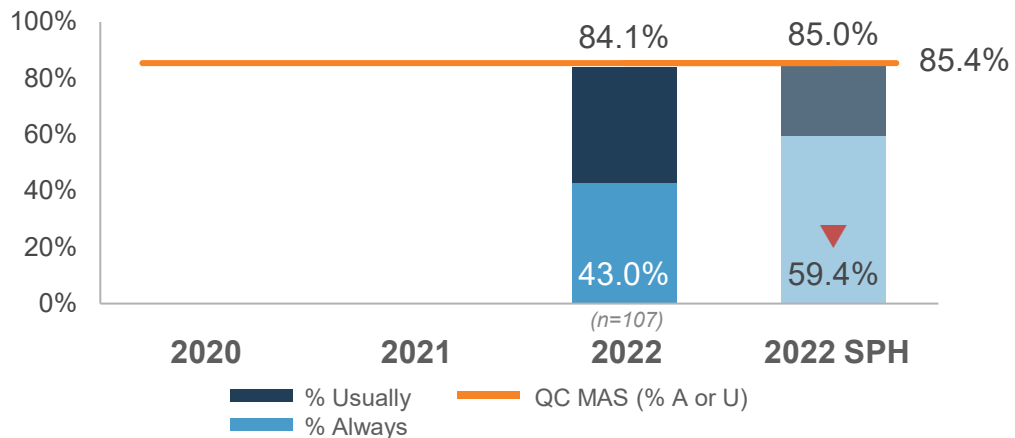


# COORDINATION OF CARE

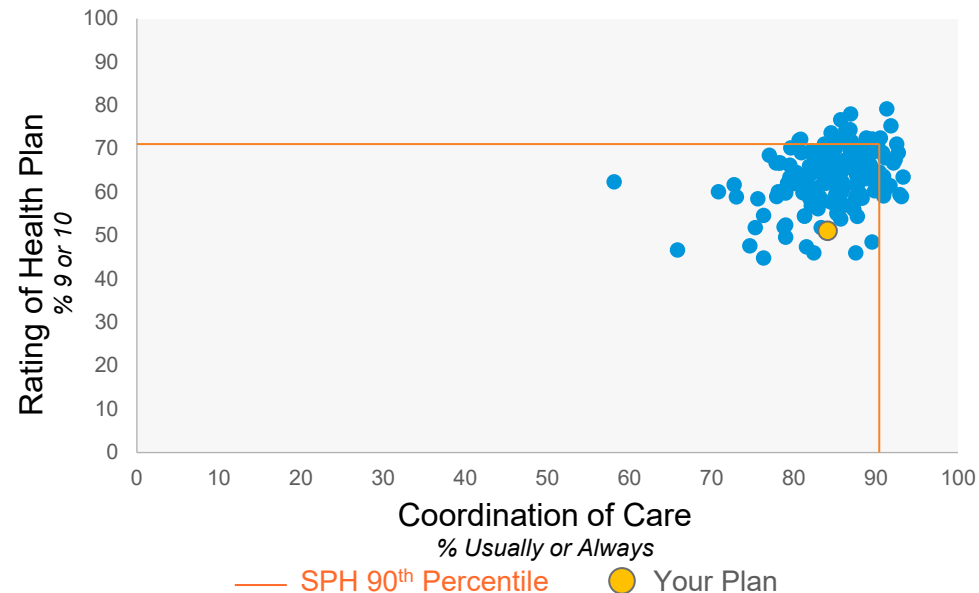
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	QC %tile Rank	Score
% A or U	40 <sup>th</sup>	84.1%



## SPH BOOK OF BUSINESS DISTRIBUTION



**Significance Testing:** Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↕) or benchmark score (▲/▼).

**^Denominator less than 100. NCQA will assign an NA to this measure.**



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# SUMMARY OF TREND AND BENCHMARKS

- Oklahoma Health Care Authority

*PREPARED FOR THE OKLAHOMA HEALTH CARE AUTHORITY THROUGH  
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**Trend and Benchmark Comparisons** The CAHPS® 5.1 survey is designed to use composite scores to facilitate the aggregation of information and the communication of results. Questions are combined into composite categories comprising a particular service area managed by your plan. These composites, the questions that make up composites (attributes), additional measures, and rating questions are shown on the following pages.

Summary Rate Scores: Shows how your plan's composite and key question Summary Rates compare to trend data (if applicable) and benchmark scores. To help you identify how your plan's population compares to other plans and to previous data, statistically significant differences are highlighted.

Plan Percentile Rankings: Shows your plan's Summary Rates and percentile rankings in relation to the benchmarks.

### Significance Testing

**Green** – Current year score is significantly higher than the 2021 score (↑), the 2020 score (⚡) or benchmark score (▲).

**Red** – Current year score is significantly lower than the 2021 score (↓), the 2020 score (⚡) or benchmark score (▼).

No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% confidence level.



## Available Benchmarks

The following benchmarks are used throughout the report.

	<b>2021 Quality Compass® All Plans</b>	<b>2021 NCQA 1-100 Benchmark</b>	<b>2022 SPH Analytics Book of Business</b>
	Includes all Medicaid Adult samples that submitted data to NCQA in 2021.	A percentile benchmark (with values ranging from the first through the one hundredth percentile) calculated by NCQA and derived from Medicaid Adult data submitted to NCQA in 2021.	Includes all Medicaid Adult samples that contracted with SPH Analytics to administer the MY2021 CAHPS 5.1H survey and submitted data to NCQA.
<b>PROS</b>	<ul style="list-style-type: none"> <li>Is presented in NCQA's The State of Health Care Quality</li> </ul>	<ul style="list-style-type: none"> <li>Utilized by SPH Analytics to calculate approximate percentile ranking of plan scores in relation to the Quality Compass® All Plans benchmark</li> </ul>	<ul style="list-style-type: none"> <li>Provides a benchmark for each question from the survey</li> <li>Permits precise percentile ranking of plan compared to benchmark</li> </ul>
<b>CONS</b>	<ul style="list-style-type: none"> <li>Only contains benchmarks for certain key questions, composites, and rating questions</li> </ul>	<ul style="list-style-type: none"> <li>Only contains benchmarks for certain key questions, composites, and rating questions</li> </ul>	<ul style="list-style-type: none"> <li>Contains fewer plans than the Quality Compass® All Plans Benchmarks</li> </ul>
<b>SIZE</b>	168 Plans	168 Plans	169 Plans / 39,089 Respondents

	2022 Valid n	2020	2021	2022	2022 SPH BoB	2021 QC
<b>Rating Questions (% 9 or 10)</b>						
★ Q28. Rating of Health Plan	233	---	---	51.1%	64.0% ▼	62.3% ▼
★ Q8. Rating of Health Care	183	---	---	56.8%	57.0%	58.7%
★ Q18. Rating of Personal Doctor	193	---	---	71.5%	69.5%	69.2%
★ Q22. Rating of Specialist	110	---	---	70.9%	68.4%	69.0%
<b>Rating Questions (% 8, 9 or 10)</b>						
Q28. Rating of Health Plan	233	---	---	72.5%	79.6% ▼	78.3% ▼
Q8. Rating of Health Care	183	---	---	72.7%	75.8%	77.6%
Q18. Rating of Personal Doctor	193	---	---	83.9%	83.1%	83.2%
Q22. Rating of Specialist	110	---	---	83.6%	82.7%	83.6%
★ <b>Getting Needed Care (% Usually or Always)</b>	<b>151</b>	---	---	<b>86.5%</b>	<b>82.3%</b>	<b>83.6%</b>
Q9. Getting care, tests, or treatment	183	---	---	83.1%	85.0%	85.5%
Q20. Getting specialist appointment	119	---	---	89.9%	79.6% ▲	81.8% ▲
★ <b>Getting Care Quickly (% Usually or Always)</b>	<b>131</b>	---	---	<b>84.5%</b>	<b>80.9%</b>	<b>81.8%</b>
Q4. Getting urgent care	100	---	---	88.0%	81.7%	83.1%
Q6. Getting routine care	163	---	---	81.0%	80.0%	79.9%
★ <b>Q17. Coordination of Care</b>	<b>107</b>	---	---	<b>84.1%</b>	<b>85.0%</b>	<b>85.4%</b>
<b>Effectiveness of Care (% Sometimes, Usually, or Always)</b>						
★ Q31. Flu Vaccine: 18-64 (% Yes)	235	---	---	45.1%	41.2%	40.0%
★ Q33. Advised to Quit Smoking: 2YR	83 <sup>^</sup>	---	---	71.1%	74.1%	74.8%
Q34. Discussing Cessation Meds: 2YR +	81 <sup>^</sup>	---	---	48.1%	51.9%	53.1%
Q35. Discussing Cessation Strategies: 2YR +	79 <sup>^</sup>	---	---	49.4%	46.4%	48.0%

**Significance Testing:** Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↔) or benchmark score (▲/▼).

<sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.

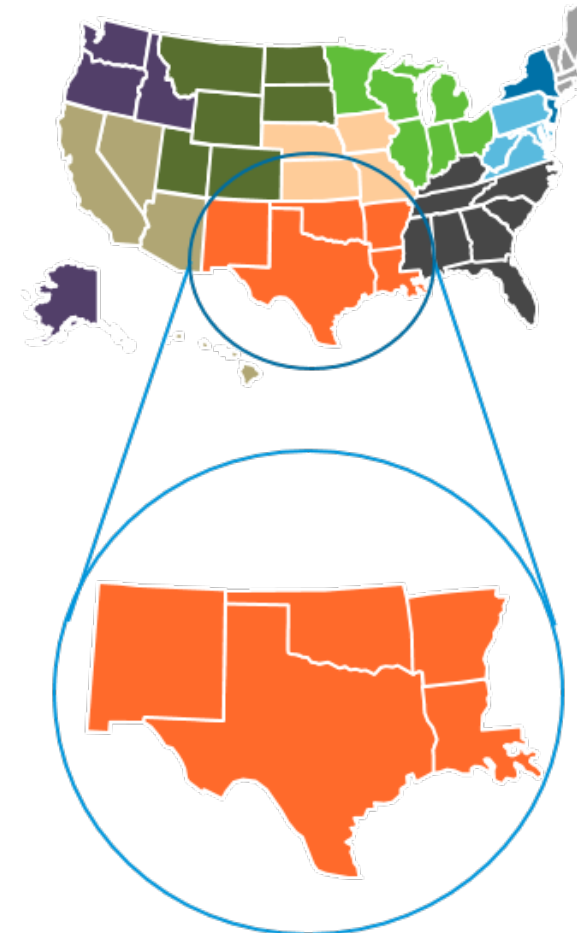
	2022 Valid n	2020	2021	2022	2022 SPH BoB	2021 QC
<b>Customer Service + (% Usually or Always)</b>	<b>70<sup>^</sup></b>	---	---	<b>88.8%</b>	<b>89.7%</b>	<b>88.9%</b>
Q24. Provided information or help	72 <sup>^</sup>	---	---	81.9%	84.3%	83.5%
Q25. Treated with courtesy and respect	69 <sup>^</sup>	---	---	95.7%	95.1%	94.3%
<b>How Well Doctors Communicate + (% Usually or Always)</b>	<b>164</b>	---	---	<b>93.9%</b>	<b>92.7%</b>	<b>92.2%</b>
Q12. Dr. explained things	165	---	---	93.9%	92.6%	92.1%
Q13. Dr. listened carefully	164	---	---	95.1%	92.7%	92.5%
Q14. Dr. showed respect	164	---	---	95.1%	94.5%	94.2%
Q15. Dr. spent enough time	165	---	---	91.5%	90.9%	89.9%
<b>Q27. Ease of Filling Out Forms + (% Usually or Always)</b>	<b>229</b>	---	---	<b>95.2%</b>	<b>95.6%</b>	<b>95.9%</b>

**Significance Testing:** Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↔) or benchmark score (▲/▼).

**^Denominator less than 100. NCQA will assign an NA to this measure.**

	SUMMARY RATE	2022 SPH BoB REGION
<b>Rating Questions (% 9 or 10)</b>		
★ Q28. Rating of Health Plan	51.1%	64.4% ❖
★ Q8. Rating of Health Care	56.8%	58.2%
★ Q18. Rating of Personal Doctor	71.5%	70.2%
★ Q22. Rating of Specialist	70.9%	70.1%
<b>Rating Questions (% 8, 9 or 10)</b>		
Q28. Rating of Health Plan	72.5%	79.4% ❖
Q8. Rating of Health Care	72.7%	75.7%
Q18. Rating of Personal Doctor	83.9%	82.4%
Q22. Rating of Specialist	83.6%	82.4%
★ <b>Getting Needed Care (% Usually or Always)</b>	<b>86.5%</b>	<b>80.9%</b> ❖
Q9. Getting care, tests, or treatment	83.1%	82.8%
Q20. Getting specialist appointment	89.9%	79.0% ❖
★ <b>Getting Care Quickly (% Usually or Always)</b>	<b>84.5%</b>	<b>80.4%</b>
Q4. Getting urgent care	88.0%	79.9% ❖
Q6. Getting routine care	81.0%	80.9%
★ <b>Q17. Coordination of Care</b>	<b>84.1%</b>	<b>81.6%</b>
<b>Effectiveness of Care (% Sometimes, Usually, or Always)</b>		
★ Q31. Flu Vaccine: 18-64 (% Yes)	45.1%	41.9%
★ Q33. Advised to Quit Smoking: 2YR	71.1%	71.7%
Q34. Discussing Cessation Meds: 2YR +	48.1%	45.3%
Q35. Discussing Cessation Strategies: 2YR +	49.4%	41.0%

**HHS Regions:** The regions used align with the U.S. Department of Health and Human Services regions.



**Region 6: Dallas**

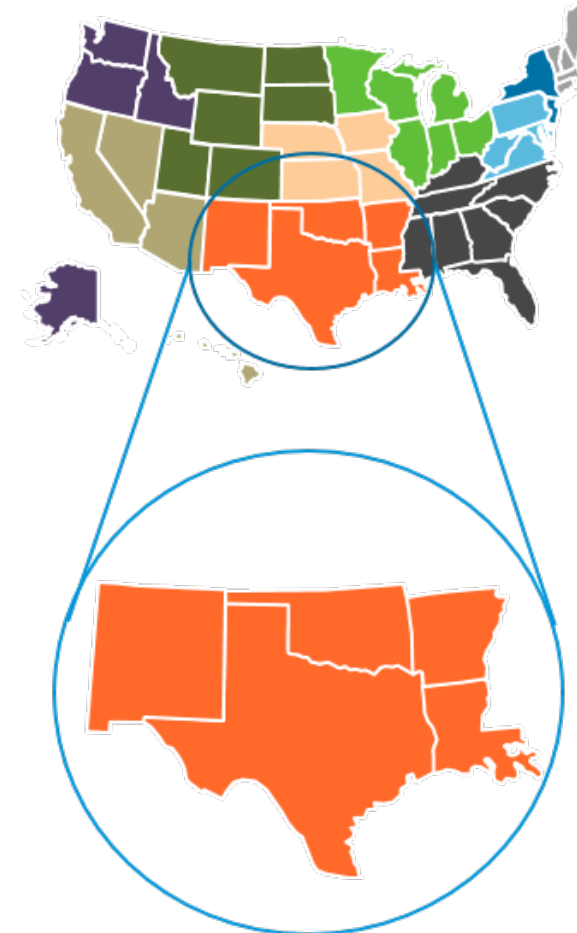
- Arkansas
- New Mexico
- Texas
- Louisiana
- Oklahoma

**Significance Testing**

Current year score is significantly higher/lower (❖/❖) than the 2022 SPH BoB Region score.

	SUMMARY RATE	2022 SPH BoB REGION
<b>Customer Service + (% Usually or Always)</b>	<b>88.8%</b>	<b>90.7%</b>
Q24. Provided information or help	81.9%	85.3%
Q25. Treated with courtesy and respect	95.7%	96.1%
<b>How Well Doctors Communicate + (% Usually or Always)</b>	<b>93.9%</b>	<b>91.7%</b>
Q12. Dr. explained things	93.9%	91.9%
Q13. Dr. listened carefully	95.1%	91.8%
Q14. Dr. showed respect	95.1%	92.9%
Q15. Dr. spent enough time	91.5%	90.2%
<b>Q27. Ease of Filling Out Forms + (% Usually or Always)</b>	<b>95.2%</b>	<b>95.8%</b>

**HHS Regions:** The regions used align with the U.S. Department of Health and Human Services regions.



**Region 6: Dallas**

- Arkansas
- New Mexico
- Texas
- Louisiana
- Oklahoma

**Significance Testing**

Current year score is significantly higher/lower (◆/◆) than the 2022 SPH BoB Region score.

	2022 Plan Score	QC %tile	National Percentiles from 2021 Quality Compass									SPH %tile	National Percentiles from 2022 SPH Book of Business								
			5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>		5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>
<b>Rating Questions (% 9 or 10)</b>																					
★ Q28. Rating of Health Plan	51.1%	<5 <sup>th</sup>	52.4	53.9	58.1	59.8	62.3	64.7	66.2	70.3	72.2	<5 <sup>th</sup>	51.8	54.7	59.6	61.5	64.0	66.3	67.9	71.1	72.5
★ Q8. Rating of Health Care	56.8%	37 <sup>th</sup>	50.6	52.2	54.9	56.4	58.3	60.8	62.3	66.2	67.5	49 <sup>th</sup>	47.5	49.5	53.6	54.8	56.9	59.2	61.0	63.6	65.2
★ Q18. Rating of Personal Doctor	71.5%	66 <sup>th</sup>	60.6	63.2	65.5	66.9	69.2	71.6	72.8	75.4	77.3	64 <sup>th</sup>	60.4	61.8	64.9	67.4	69.8	72.0	72.7	75.3	76.3
★ Q22. Rating of Specialist	70.9%	62 <sup>nd</sup>	60.6	62.8	65.1	66.7	69.3	71.9	73.8	75.5	76.2	68 <sup>th</sup>	58.5	60.9	64.3	66.3	68.2	70.8	72.0	75.2	77.0
<b>Rating Questions (% 8, 9 or 10)</b>																					
Q28. Rating of Health Plan	72.5%	10 <sup>th</sup>	71.0	72.5	74.8	76.0	78.6	80.6	82.0	84.8	86.6	10 <sup>th</sup>	70.9	72.5	76.1	77.5	80.1	81.7	82.5	85.2	86.7
Q8. Rating of Health Care	72.7%	15 <sup>th</sup>	70.4	71.3	75.2	76.5	77.7	79.5	80.7	83.1	84.3	22 <sup>nd</sup>	67.5	70.2	73.0	74.1	76.2	77.8	78.9	81.1	83.3
Q18. Rating of Personal Doctor	83.9%	57 <sup>th</sup>	77.0	78.9	81.0	81.7	83.1	84.8	85.6	88.3	89.1	60 <sup>th</sup>	76.8	77.6	80.2	81.1	83.1	85.0	85.7	87.6	88.3
Q22. Rating of Specialist	83.6%	47 <sup>th</sup>	77.4	79.3	81.1	82.2	84.0	85.4	86.0	87.7	88.8	59 <sup>th</sup>	75.5	76.9	79.6	80.7	82.5	84.6	85.7	87.1	88.6
★ <b>Getting Needed Care (% U/A)</b>	<b>86.5%</b>	<b>75<sup>th</sup></b>	<b>75.0</b>	<b>77.5</b>	<b>81.1</b>	<b>82.6</b>	<b>84.1</b>	<b>85.8</b>	<b>86.5</b>	<b>88.6</b>	<b>89.3</b>	<b>86<sup>th</sup></b>	<b>73.7</b>	<b>76.0</b>	<b>79.3</b>	<b>80.3</b>	<b>82.9</b>	<b>84.7</b>	<b>85.2</b>	<b>87.1</b>	<b>87.8</b>
Q9. Getting care, tests, or treatment	83.1%	29 <sup>th</sup>	76.8	80.4	82.6	83.8	85.8	88.0	89.0	90.6	91.5	31 <sup>st</sup>	77.2	78.9	82.1	83.3	85.7	86.6	87.6	89.5	91.3
Q20. Getting specialist appointment	89.9%	97 <sup>th</sup>	72.1	73.5	78.3	80.7	83.2	84.8	85.1	88.0	88.8	99 <sup>th</sup>	67.2	71.4	75.4	77.3	80.0	82.4	83.4	86.1	86.8
★ <b>Getting Care Quickly (% U/A)</b>	<b>84.5%</b>	<b>73<sup>rd</sup></b>	<b>72.1</b>	<b>76.5</b>	<b>79.3</b>	<b>80.2</b>	<b>82.2</b>	<b>83.8</b>	<b>84.7</b>	<b>87.2</b>	<b>88.4</b>	<b>74<sup>th</sup></b>	<b>70.1</b>	<b>72.9</b>	<b>77.3</b>	<b>78.0</b>	<b>80.6</b>	<b>83.4</b>	<b>84.6</b>	<b>87.1</b>	<b>88.2</b>
Q4. Getting urgent care	88.0%	84 <sup>th</sup>	75.7	77.0	80.7	82.6	83.5	86.0	86.2	89.1	89.5	89 <sup>th</sup>	71.2	72.6	77.6	79.3	82.6	84.8	85.9	88.6	90.2
Q6. Getting routine care	81.0%	56 <sup>th</sup>	70.5	72.3	76.5	78.0	80.2	83.1	83.9	87.0	89.1	54 <sup>th</sup>	68.8	70.5	76.1	77.6	80.5	82.6	84.0	87.0	88.3
★ <b>Q17. Coordination of Care</b>	<b>84.1%</b>	<b>40<sup>th</sup></b>	<b>76.2</b>	<b>79.3</b>	<b>83.1</b>	<b>83.4</b>	<b>85.6</b>	<b>87.4</b>	<b>88.4</b>	<b>91.6</b>	<b>92.4</b>	<b>41<sup>st</sup></b>	<b>76.3</b>	<b>78.8</b>	<b>81.5</b>	<b>82.9</b>	<b>85.1</b>	<b>87.3</b>	<b>87.9</b>	<b>90.4</b>	<b>91.6</b>
<b>Effectiveness of Care (% S/U/A)</b>																					
★ Q31. Flu Vaccine: 18-64 (% Yes)	45.1%	78 <sup>th</sup>	28.7	30.3	34.7	37.0	39.7	42.4	44.3	50.6	55.3	72 <sup>nd</sup>	28.7	31.0	35.0	36.8	40.6	43.9	45.9	52.3	56.6
★ Q33. Advised to Quit Smoking: 2YR	71.1%	24 <sup>th</sup>	64.5	66.4	71.2	72.4	75.1	77.8	79.3	82.1	84.3	35 <sup>th</sup>	57.2	63.0	69.6	70.7	73.6	76.3	78.7	82.3	85.7
Q34. Discussing Cessation Meds: 2YR +	48.1%	23 <sup>rd</sup>	39.9	43.7	48.2	50.3	52.9	55.8	57.1	61.6	67.2	38 <sup>th</sup>	34.1	37.2	45.5	47.5	50.0	54.6	57.8	62.6	67.1
Q35. Discussing Cessation Strategies: 2YR +	49.4%	59 <sup>th</sup>	37.5	39.6	42.9	45.3	47.4	50.5	52.0	58.0	60.0	67 <sup>th</sup>	30.0	33.6	40.1	41.5	45.5	49.2	51.3	58.5	61.4



# PERCENTILE RANKINGS

MEDICAID ADULT

Oklahoma Health Care Authority  
 Prepared for the Oklahoma Health Care Authority through  
 a contract with KFMC Health Improvement Partners

	2022 Plan Score	QC %tile	National Percentiles from 2021 Quality Compass									SPH %tile	National Percentiles from 2022 SPH Book of Business								
			5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>		5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>
<b>Customer Service + (% U/A)</b>	<b>88.8%</b>	<b>47<sup>th</sup></b>	<b>83.9</b>	<b>85.0</b>	<b>87.2</b>	<b>87.9</b>	<b>89.2</b>	<b>90.7</b>	<b>91.1</b>	<b>92.2</b>	<b>93.3</b>	<b>39<sup>th</sup></b>	<b>83.7</b>	<b>85.1</b>	<b>87.3</b>	<b>88.2</b>	<b>90.0</b>	<b>91.2</b>	<b>91.9</b>	<b>93.6</b>	<b>94.8</b>
Q24. Provided information or help	81.9%	33 <sup>rd</sup>	76.7	77.9	81.3	81.9	83.6	85.5	86.4	88.4	89.9	34 <sup>th</sup>	75.2	77.9	80.7	81.8	84.6	86.8	87.8	90.1	91.9
Q25. Treated with courtesy and respect	95.7%	70 <sup>th</sup>	88.7	90.6	92.9	93.6	94.9	95.7	96.2	97.2	97.6	54 <sup>th</sup>	89.9	91.4	93.6	94.1	95.5	96.2	97.1	98.4	98.6
<b>How Well Doctors Communicate + (% U/A)</b>	<b>93.9%</b>	<b>75<sup>th</sup></b>	<b>88.0</b>	<b>88.9</b>	<b>91.0</b>	<b>91.4</b>	<b>92.4</b>	<b>93.3</b>	<b>93.9</b>	<b>95.2</b>	<b>95.7</b>	<b>70<sup>th</sup></b>	<b>88.4</b>	<b>89.1</b>	<b>91.1</b>	<b>91.9</b>	<b>92.8</b>	<b>93.8</b>	<b>94.2</b>	<b>95.4</b>	<b>95.8</b>
Q12. Dr. explained things	93.9%	69 <sup>th</sup>	86.7	88.6	90.3	90.9	92.3	93.8	94.3	95.7	96.5	67 <sup>th</sup>	87.7	89.0	90.9	91.5	92.8	93.9	94.4	95.9	96.6
Q13. Dr. listened carefully	95.1%	85 <sup>th</sup>	87.9	89.3	90.9	91.5	92.8	94.0	94.3	95.4	95.7	83 <sup>rd</sup>	87.9	88.8	91.2	91.8	92.9	94.0	94.4	95.5	95.8
Q14. Dr. showed respect	95.1%	65 <sup>th</sup>	90.4	91.2	93.1	93.5	94.2	95.2	95.5	96.7	97.1	60 <sup>th</sup>	89.9	91.3	93.1	93.8	94.7	95.5	96.0	96.9	97.8
Q15. Dr. spent enough time	91.5%	64 <sup>th</sup>	83.6	85.4	88.0	88.9	90.3	91.7	92.2	93.7	94.7	56 <sup>th</sup>	84.2	85.7	88.4	89.1	91.1	92.5	93.1	94.8	95.6
<b>Q27. Ease of Filling Out Forms + (% U/A)</b>	<b>95.2%</b>	<b>33<sup>rd</sup></b>	<b>92.9</b>	<b>93.7</b>	<b>94.9</b>	<b>95.2</b>	<b>95.9</b>	<b>96.8</b>	<b>97.0</b>	<b>98.3</b>	<b>98.6</b>	<b>35<sup>th</sup></b>	<b>92.5</b>	<b>93.2</b>	<b>94.5</b>	<b>95.1</b>	<b>96.1</b>	<b>96.7</b>	<b>97.0</b>	<b>97.6</b>	<b>97.9</b>



a Press Ganey Solution

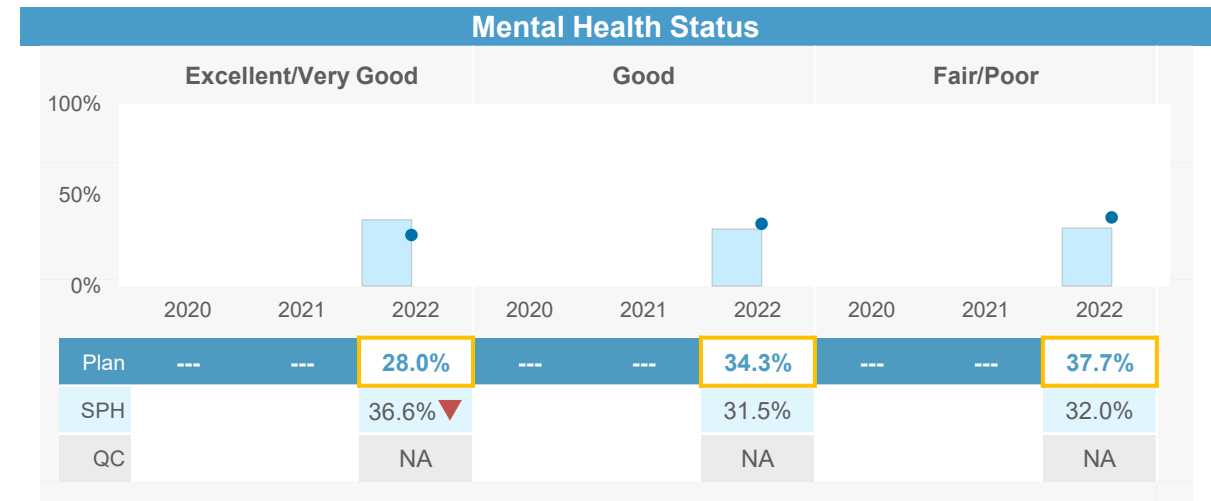
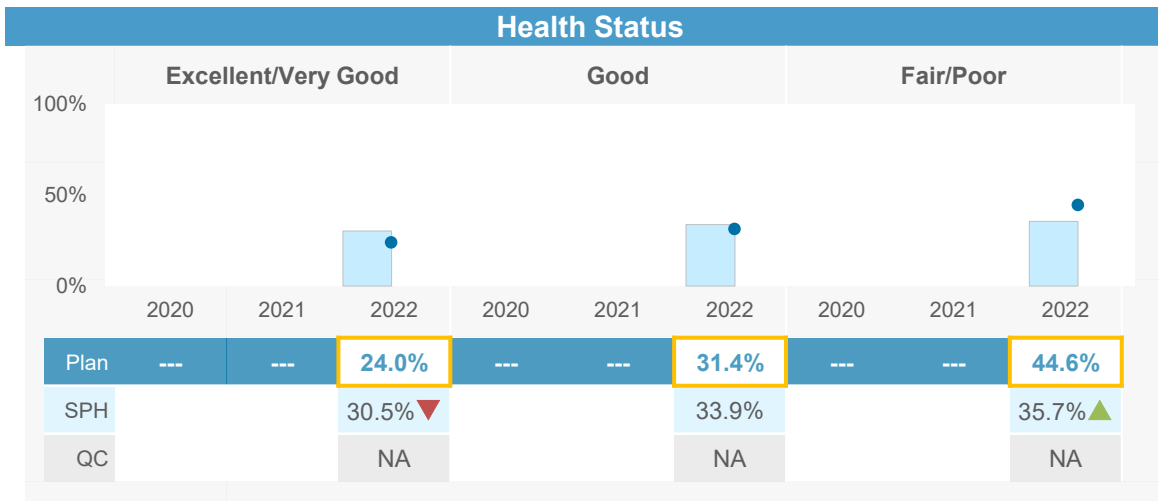
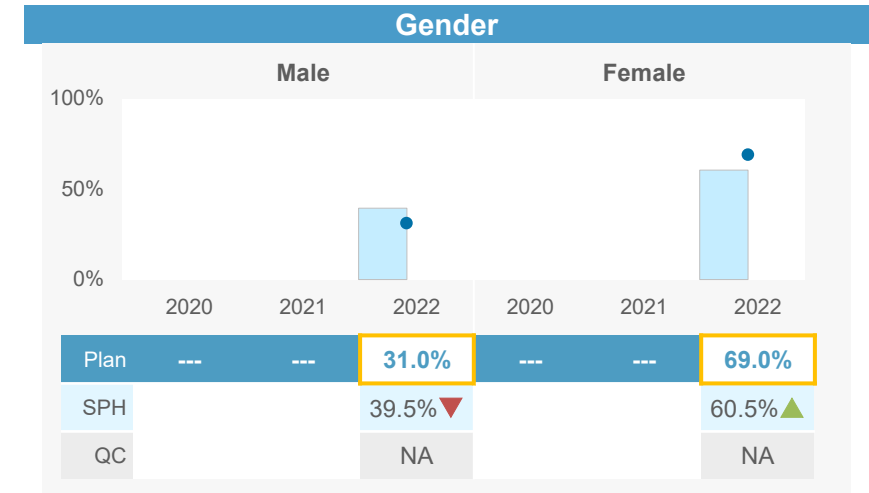
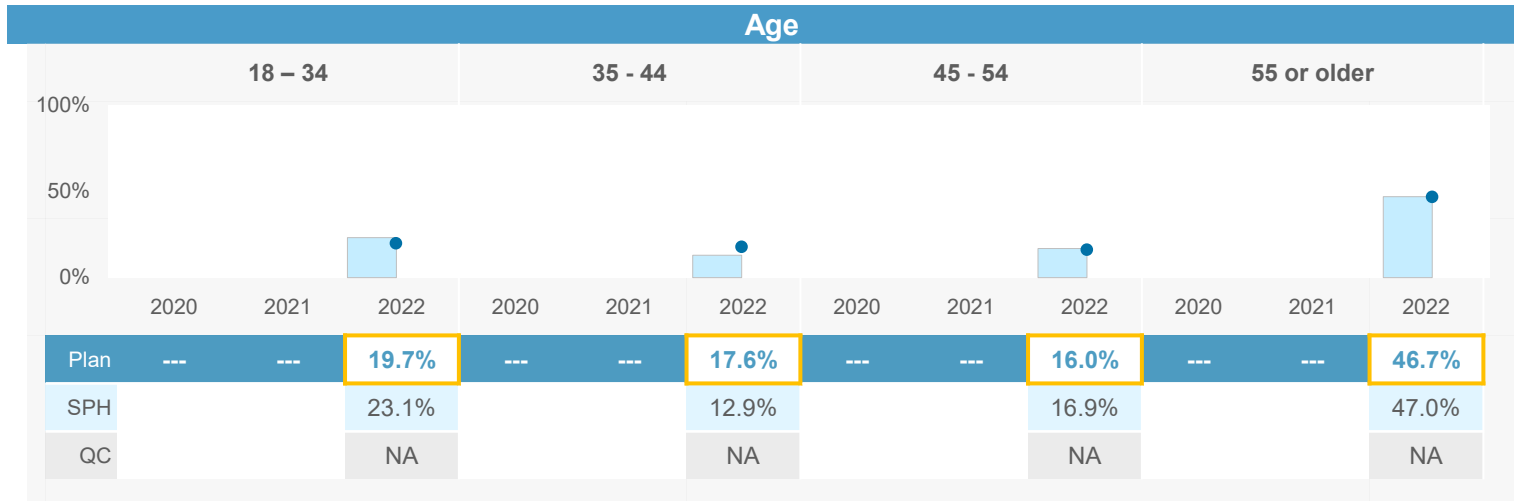
# PROFILE OF SURVEY RESPONDENTS

## DEMOGRAPHIC COMPOSITION

- Oklahoma Health Care Authority

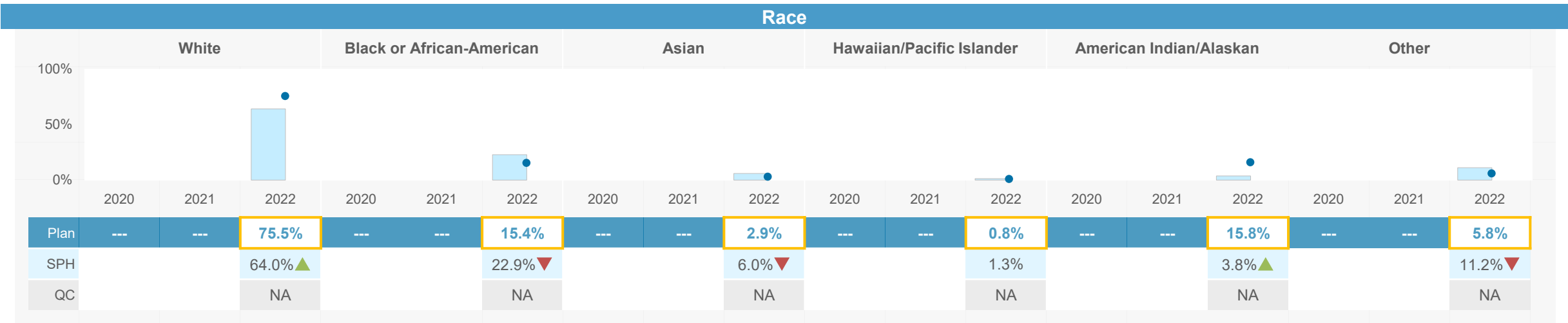
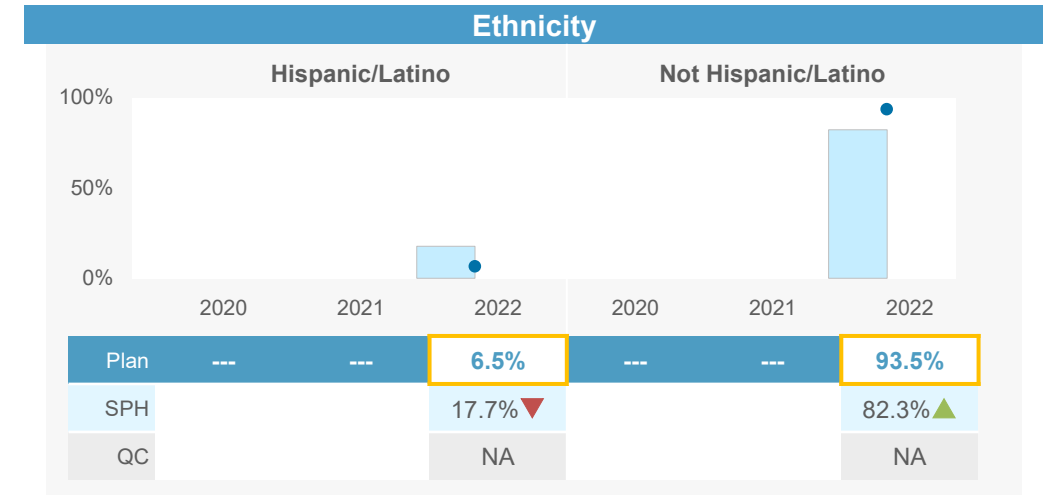
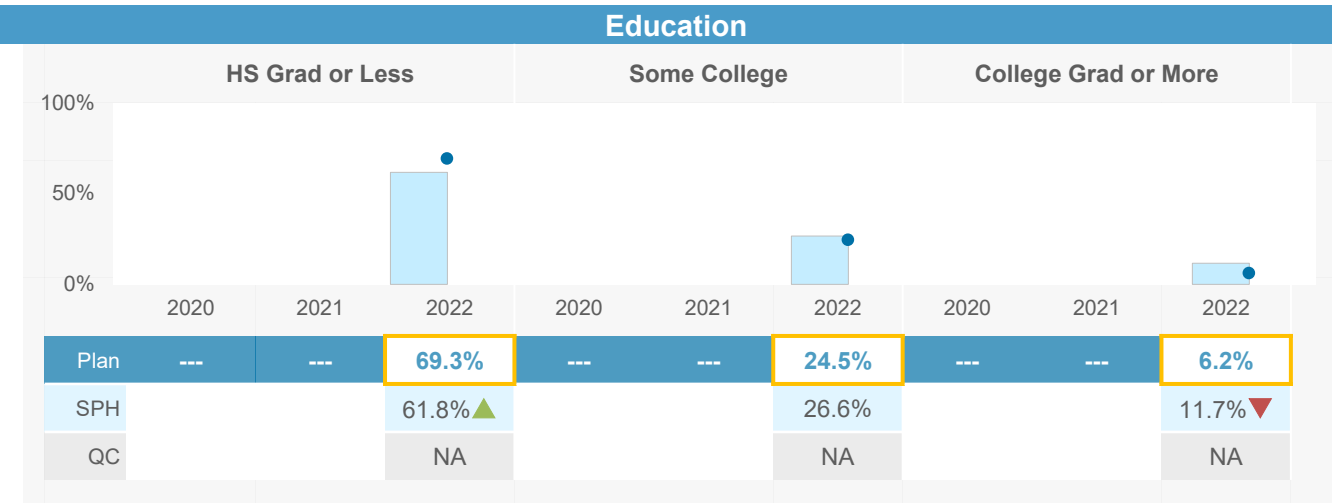
*PREPARED FOR THE OKLAHOMA HEALTH CARE AUTHORITY THROUGH  
A CONTRACT WITH KFMC HEALTH IMPROVEMENT PARTNERS*





More info. 

**Significance Testing:** Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↔) or benchmark score (▲/▼).  
**Benchmarks:** SPH refers to the 2022 SPH Book of Business benchmark. QC refers to the 2021 QC National Data benchmark. NCQA did not publish demographics for the 2021 benchmark.



**Significance Testing:** Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↕) or benchmark score (▲/▼).  
**Benchmarks:** SPH refers to the 2022 SPH Book of Business benchmark. QC refers to the 2021 QC National Data benchmark. NCQA did not publish demographics for the 2021 benchmark.



a Press Ganey Solution

# SUPPLEMENTAL QUESTIONS

- **Oklahoma Health Care Authority**  
*PREPARED FOR THE OKLAHOMA HEALTH CARE AUTHORITY THROUGH  
A CONTRACT WITH KFMC HEALTH IMPROVEMENT PARTNERS*

	Category Responses Based on Valid Responses Per Question				Summary Rate Score			2022 SPH BoB
	2020	2021	2022					
<b>Q41. Dr. used medical words not understood</b> (% Never or Sometimes)	<i>Valid Responses = 200</i>							
Opt Out: I did not talk with my personal doctor in the last 6 months 25	<u>Always</u>	<u>Usually</u>	<u>Sometimes</u>	<u>Never</u>	---	---	(n=200)	---
Opt Out: I do not have a personal doctor 13	4.0%	8.5%	28.0%	59.5%			<b>87.5%</b>	
<b>Q42. Dr. talked too fast</b> (% Never or Sometimes)	<i>Valid Responses = 198</i>							
Opt Out: I did not talk with my personal doctor in the last 6 months 0	<u>Always</u>	<u>Usually</u>	<u>Sometimes</u>	<u>Never</u>	---	---	(n=198)	---
Opt Out: I do not have a personal doctor 0	1.5%	3.5%	15.7%	79.3%			<b>94.9%</b>	
<b>Q43. Got wanted info. about health from Dr.</b> (% Always or Usually)	<i>Valid Responses = 198</i>							
	<u>Always</u>	<u>Usually</u>	<u>Sometimes</u>	<u>Never</u>	---	---	(n=198)	---
	67.7%	22.7%	7.6%	2.0%			<b>90.4%</b>	
<b>Q44. Easy to understand instructions for taking meds</b> (% Always or Usually)	<i>Valid Responses = 196</i>							
	<u>Always</u>	<u>Usually</u>	<u>Sometimes</u>	<u>Never</u>	---	---	(n=196)	---
	73.5%	15.8%	6.1%	4.6%			<b>89.3%</b>	

**Significance Testing:** Current year score is significantly higher/lower than 2021 score (↑/↓), the 2020 score (↕/↔) or benchmark score (▲/▼).

**Low Base:** ^Indicates a base size smaller than 20. Interpret results with caution.

	Category Responses Based on Valid Responses Per Question				Summary Rate Score			2022 SPH BoB
					2020	2021	2022	
<b>Q45. Dr. explained side effects of meds</b> (% Always or Usually)	<i>Valid Responses = 196</i>							
	<u>Always</u>	<u>Usually</u>	<u>Sometimes</u>	<u>Never</u>	---	---	(n=196)	---
	57.1%	21.9%	7.1%	13.8%			<b>79.1%</b>	
<b>Q46. Started prescription medicine</b> (% Yes)	<i>Valid Responses = 244</i>							
	<u>Yes</u>	<u>No</u>			---	---	(n=244)	---
	53.3%	46.7%					<b>53.3%</b>	
<b>Q47. Got wanted info. from pharmacist</b> (% Always or Usually)	<i>Valid Responses = 237</i>							
	<u>Always</u>	<u>Usually</u>	<u>Sometimes</u>	<u>Never</u>	---	---	(n=237)	---
	62.9%	18.6%	7.2%	11.4%			<b>81.4%</b>	
<b>Q48. Pharmacist reviewed medications</b> (% Yes)	<i>Valid Responses = 236</i>							
	<u>Yes</u>	<u>No</u>			---	---	(n=236)	---
	52.1%	47.9%					<b>52.1%</b>	

**Significance Testing:** Current year score is significantly higher/lower than 2021 score (↑/↓), the 2020 score (↕/↔) or benchmark score (▲/▼).

**Low Base:** ^Indicates a base size smaller than 20. Interpret results with caution.

	Category Responses Based on Valid Responses Per Question	Summary Rate Score			2022 SPH BoB
		2020	2021	2022	
<b>Q49. Knew I could make a complaint to health plan</b> (% Yes)	<i>Valid Responses = 242</i>				
	<u>Yes</u> <u>No</u>	---	---	(n=242)	---
	56.2%      43.8%			<b>56.2%</b>	
<b>Q50. Easy to find/understand info. on website</b> (% Very or Somewhat easy)	<i>Valid Responses = 107</i>				
<i>Opt Out: I have not used the website to find information</i> 131	<u>Very easy</u> <u>Somewhat easy</u> <u>Somewhat hard</u> <u>Very hard</u>	---	---	(n=107)	---
	30.8%      43.0%      18.7%      7.5%			<b>73.8%</b>	

**Significance Testing:** Current year score is significantly higher/lower than 2021 score (↑/↓), the 2020 score (↕/↔) or benchmark score (▲/▼).

**Low Base:** ^Indicates a base size smaller than 20. Interpret results with caution.



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# APPENDICES

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- APPENDIX A: CORRELATION ANALYSES
- APPENDIX B: QUESTIONNAIRE

## Highest Correlations

Below are the key measures with the highest correlations to the Rating measures.

### With Health Care Rating

<b>Q43</b>	Got wanted info. about health from Dr.	0.5930
<b>Q12</b>	Dr. explained things	0.5160
<b>Q9</b>	Got care/tests/treatment	0.5032
<b>Q24</b>	CS provided info./help	0.4923
<b>Q13</b>	Dr. listened carefully	0.4862
<b>Q22</b>	Specialist overall	0.4728
<b>Q18</b>	Personal doctor overall	0.4718
<b>Q15</b>	Dr. spent enough time	0.4523
<b>Q50</b>	Easy to find/understand info. on website	0.4397
<b>Q44</b>	Easy to understand instructions for taking meds	0.4134

### With Personal Doctor Rating

<b>Q15</b>	Dr. spent enough time	0.6000
<b>Q13</b>	Dr. listened carefully	0.5121
<b>Q12</b>	Dr. explained things	0.4993
<b>Q43</b>	Got wanted info. about health from Dr.	0.4938
<b>Q8</b>	Health care overall	0.4718
<b>Q14</b>	Dr. showed respect	0.4643
<b>Q44</b>	Easy to understand instructions for taking meds	0.4057
<b>Q22</b>	Specialist overall	0.4026
<b>Q9</b>	Got care/tests/treatment	0.3839
<b>Q28</b>	Health plan overall	0.3788

### With Specialist Rating

<b>Q28</b>	Health plan overall	0.5100
<b>Q8</b>	Health care overall	0.4728
<b>Q18</b>	Personal doctor overall	0.4026
<b>Q20</b>	Got specialist appt.	0.3899
<b>Q4</b>	Got urgent care	0.3795
<b>Q15</b>	Dr. spent enough time	0.3729
<b>Q6</b>	Got routine care	0.3701
<b>Q9</b>	Got care/tests/treatment	0.3321
<b>Q43</b>	Got wanted info. about health from Dr.	0.3129
<b>Q12</b>	Dr. explained things	0.3102







## SURVEY INSTRUCTIONS

- ◆ Answer each question by marking the box to the left of your answer.
- ◆ You are sometimes told to skip over some questions in this survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:

Yes → **If Yes, Go to Question 1**  
 No

**Personally identifiable information will not be made public and will only be released in accordance with federal laws and regulations. You may choose to answer this survey or not. If you choose not to, this will not affect the benefits you get. You may notice a number on the back of this survey. This number is ONLY used to let us know if you returned your survey so we don't have to send you reminders.**

**If you want to know more about this study, please call 1-888-797-3605.**

1. Our records show that you are now in Oklahoma Health Care Authority. Is that right?

Yes → **If Yes, Go to Question 3**  
 No

2. What is the name of your health plan? (Please print)

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## YOUR HEALTH CARE IN THE LAST 6 MONTHS

*These questions ask about your own health care from a clinic, emergency room, or doctor's office. This includes care you got in person, by phone, or by video. Do not include care you got when you stayed overnight in a hospital. Do not include the times you went for dental care visits.*

3. In the last 6 months, did you have an illness, injury, or condition that needed care right away?

Yes  
 No → **If No, Go to Question 5**

4. In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?

Never  
 Sometimes  
 Usually  
 Always

5. In the last 6 months, did you make any in person, phone, or video appointments for a check-up or routine care?

Yes  
 No → **If No, Go to Question 7**

6. In the last 6 months, how often did you get an appointment for a check-up or routine care as soon as you needed?

Never  
 Sometimes  
 Usually  
 Always



7. In the last 6 months, not counting the times you went to an emergency room, how many times did you get health care for yourself in person, by phone, or by video?

- None → *If None, Go to Question 10*
- 1 time
- 2
- 3
- 4
- 5 to 9
- 10 or more times

8. Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 6 months?

- 0 Worst health care possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best health care possible

9. In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?

- Never
- Sometimes
- Usually
- Always

### YOUR PERSONAL DOCTOR

10. A personal doctor is the one you would talk to if you need a check-up, want advice about a health problem, or get sick or hurt. Do you have a personal doctor?

- Yes
- No → *If No, Go to Question 19*

11. In the last 6 months, how many times did you have an in person, phone, or video visit with your personal doctor about your health?

- None → *If None, Go to Question 18*
- 1 time
- 2
- 3
- 4
- 5 to 9
- 10 or more times

12. In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand?

- Never
- Sometimes
- Usually
- Always

13. In the last 6 months, how often did your personal doctor listen carefully to you?

- Never
- Sometimes
- Usually
- Always

14. In the last 6 months, how often did your personal doctor show respect for what you had to say?

- Never
- Sometimes
- Usually
- Always

15. In the last 6 months, how often did your personal doctor spend enough time with you?

- Never
- Sometimes
- Usually
- Always

16. In the last 6 months, did you get care from a doctor or other health provider besides your personal doctor?

- Yes
- No → *If No, Go to Question 18*

17. In the last 6 months, how often did your personal doctor seem informed and up-to-date about the care you got from these doctors or other health providers?

- Never
- Sometimes
- Usually
- Always

18. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?

- 0 Worst personal doctor possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best personal doctor possible

### GETTING HEALTH CARE FROM SPECIALISTS

When you answer the next questions, include the care you got in person, by phone, or by video. Do not include dental visits or care you got when you stayed overnight in a hospital.

19. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. In the last 6 months, did you make any appointments with a specialist?

- Yes
- No → *If No, Go to Question 23*

20. In the last 6 months, how often did you get an appointment with a specialist as soon as you needed?

- Never
- Sometimes
- Usually
- Always

21. How many specialists have you talked to in the last 6 months?

- None → *If None, Go to Question 23*
- 1 specialist
- 2
- 3
- 4
- 5 or more specialists

22. We want to know your rating of the specialist you talked to most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

- 0 Worst specialist possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best specialist possible

### YOUR HEALTH PLAN

The next questions ask about your experience with your health plan.

23. In the last 6 months, did you get information or help from your health plan's customer service?

- Yes
- No → *If No, Go to Question 26*

24. In the last 6 months, how often did your health plan's customer service give you the information or help you needed?

- Never
- Sometimes
- Usually
- Always

25. In the last 6 months, how often did your health plan's customer service staff treat you with courtesy and respect?

- Never
- Sometimes
- Usually
- Always

26. In the last 6 months, did your health plan give you any forms to fill out?

- Yes
- No → *If No, Go to Question 28*

27. In the last 6 months, how often were the forms from your health plan easy to fill out?

- Never
- Sometimes
- Usually
- Always

28. Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your health plan?

- 0 Worst health plan possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best health plan possible

## ABOUT YOU

29. In general, how would you rate your overall health?

- Excellent
- Very Good
- Good
- Fair
- Poor

30. In general, how would you rate your overall mental or emotional health?

- Excellent
- Very Good
- Good
- Fair
- Poor

31. Have you had either a flu shot or flu spray in the nose since July 1, 2021?

- Yes
- No
- Don't know

32. Do you now smoke cigarettes or use tobacco every day, some days, or not at all?

- Every day
- Some days
- Not at all → *If Not at all, Go to Question 36*
- Don't know → *If Don't know, Go to Question 36*

33. In the last 6 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan?

- Never
- Sometimes
- Usually
- Always

34. In the last 6 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? *Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication.*

- Never
- Sometimes
- Usually
- Always

**35. In the last 6 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program.**

- Never
- Sometimes
- Usually
- Always

**36. What is your age?**

- 18 to 24
- 25 to 34
- 35 to 44
- 45 to 54
- 55 to 64
- 65 to 74
- 75 or older

**37. Are you male or female?**

- Male
- Female

**38. What is the highest grade or level of school that you have completed?**

- 8th grade or less
- Some high school, but did not graduate
- High school graduate or GED
- Some college or 2-year degree
- 4-year college graduate
- More than 4-year college degree

**39. Are you of Hispanic or Latino origin or descent?**

- Yes, Hispanic or Latino
- No, Not Hispanic or Latino

**40. What is your race? Mark one or more.**

- White
- Black or African-American
- Asian
- Native Hawaiian or other Pacific Islander
- American Indian or Alaska Native
- Other

## ADDITIONAL QUESTIONS

Now we would like to ask a few more questions about the services your health plan provides.

**41. In the last 6 months, how often did your personal doctor use medical words you did not understand?**

- Never
- Sometimes
- Usually
- Always
- I did not talk with my personal doctor in the last 6 months → **Go to Question 46**
- I do not have a personal doctor → **Go to Question 46**

**42. In the last 6 months, how often did your personal doctor talk too fast when talking with you?**

- Never
- Sometimes
- Usually
- Always
- I did not talk with my personal doctor in the last 6 months
- I do not have a personal doctor

**43. In the last 6 months, how often did your personal doctor give you all the information you wanted about your health?**

- Never
- Sometimes
- Usually
- Always

**44. In the last 6 months, how often did your personal doctor give you easy to understand instructions about how to take your medicines?**

- Never
- Sometimes
- Usually
- Always

**45. In the last 6 months, how often did your personal doctor explain the possible side effects of your medicines in a way that was easy to understand?**

- Never
- Sometimes
- Usually
- Always

**46. In the last 6 months, did you start a prescription medicine?**

- Yes
- No

**47. In the last 6 months, how often did your pharmacist give you the information or help you need?**

- Never
- Sometimes
- Usually
- Always

**48. In the past 6 months, has a pharmacist reviewed all your medications with you?**

- Yes
- No

**49. Did you know you could make a complaint to your health plan about the care or services you received or decisions your health plan made?**

- Yes
- No

**50. How easy was it to find and understand information using the website?**

- Very Easy
- Somewhat Easy
- Somewhat Hard
- Very Hard
- I have not used the website to find information

---

**Thank You**

**Please return the completed survey  
in the postage-paid envelope or send to:  
SPH Analytics • P.O. Box 985009  
Ft. Worth, TX 76185-5009**

**If you have any questions, please call  
1-888-797-3605.**







# IMPACT ANALYTICS

Redefine the experience members have with your plan by understanding what is driving those experiences, your Star Ratings and CAHPS performance.



## IMPROVE MEMBER EXPERIENCE AND ENGAGEMENT WITH DESCRIPTIVE AND PREDICTIVE ANALYTICS



### EXPLORE

Drill down into your data, compare segments against benchmarks and forecast CAHPS and Star improvements



### DISCOVER

Analyze and prioritize root causes, then correlate campaigns and PX surveys to CAHPS and Stars



### PREDICT

Predict member perceptions and behavior related to satisfaction, engageability and enrollment



### OUTREACH

Blueprint to educate, motivate and shift perception through omnichannel outreach.

# STRATEGIC CONSULTING WITH BENCHMARK-DRIVEN INSIGHTS

## Strategic Consulting

Solving challenges at each stage of the member journey with a comprehensive evidence-based, approach helping accelerate improvement, satisfaction, star ratings and CAHPS performance.

Target efforts to improve member acquisition, engagement, and retention

**Comprehensive approach delivering sustainable results that improve business and member outcomes.**

Leveraging the SPH Analytics benchmark of CAHPS data, representing 85% of Medicare Advantage plans, and predictive analytics, we help drive your Star Ratings performance through:

- Current state validation methods
- Roadmap and co-design
- Implementation
- Sustainment

Improve the member experience with a data-driven approach

**With the data and member feedback you're already collecting, our Strategic Consulting will help pinpoint the member cohorts with the most valuable opportunities to your organization.**

Insights derived from that data will inform our consulting team's recommendations for developing actionable, sustainable improvement plans that drive measurable change.

