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2014 CAHPS[®] Child Medicaid with CCC Member Satisfaction Survey

Oklahoma Health Care Authority members covered by
the Children's Health Insurance Programs (CHIP)

June 2014



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Executive Summary

Background and Protocol

Background

- CAHPS® measures health care consumers' satisfaction with the quality of care and customer service provided by their health plan. Plans which are collecting HEDIS® (Healthcare Effectiveness Data and Information Set) data for NCQA accreditation are required to field the CAHPS® survey among their eligible populations.

Protocol

- For CAHPS® results to be considered in HEDIS® results, the CAHPS® 5.0H survey must be fielded by an NCQA (National Committee for Quality Assurance)-certified survey vendor using an NCQA-approved protocol of administration in order to ensure that results are collected in a standardized way and can be compared across plans. Standard NCQA protocols for administering CAHPS® 5.0H include a mixed-mode mail/telephone protocol and a mail-only protocol.
- Oklahoma Health Care Authority chose the mail/telephone protocol. This protocol included mailing a questionnaire with a cover letter. For those selected members who did not respond to the first questionnaire, a second questionnaire with a cover letter encouraging participation was sent. Thank you/reminder postcards were mailed after each survey mailing. If a selected member still did not respond to the questionnaires, at least four telephone calls were made to complete the survey using trained telephone interviewers.
- Morpace designed a pre-notification postcard which pictured a portion of the questionnaire and the envelope in which it would arrive. A message encouraging the member to complete and return the questionnaire that would be arriving soon was also included.
- NCQA originally designed this protocol with the goal of achieving a total response rate of at least 45%. In 2013, the average response rate for all Child Medicaid with CCC plans reporting to NCQA was 27%, which was lower than the 2012 average (28%).
- In February, 3490 Oklahoma Health Care Authority members covered by the Children's Health Insurance Programs (CHIP) were randomly selected to participate in the 2014 CAHPS® 5.0H Child Medicaid with CCC Survey. This sample consisted of 1650 randomly selected Child members and 1,840 CCC Supplemental Sample. The CCC Supplemental Sample was pulled after the CAHPS® 5.0H Child survey sample was drawn. The CCC Supplemental Sample consisted of members with the prescreen status code of 2 (children more likely to have a chronic condition) who were not already selected for the CAHPS® 5.0H Child survey sample. Morpace combined the CAHPS® 5.0H Child survey sample and the CCC Supplemental Sample for survey administration and submission of data to NCQA for calculation of survey results. This report is compiled from the responses of the 839 Oklahoma Health Care Authority members covered by CHIP who responded to the survey (CAHPS® 5.0H Child survey sample and CCC Supplemental Sample combined).
- For purposes of reporting the Oklahoma Health Care Authority members covered by CHIP with CCC survey results, the results are divided into two groups: General Population and CCC Population. The General Population consists of all child members who were randomly selected for the CAHPS® 5.0H Child survey during sampling. The CCC Population consists of all children (either from the CAHPS® 5.0H Child survey sample or the CCC Supplemental Sample) who are identified as having a chronic condition, as defined by the member's responses to the CCC survey-based screening tool.

Executive Summary

Disposition Summary

- A response rate is calculated for those members who were eligible and able to respond. According to NCQA protocol, ineligible members include those who are deceased, do not meet eligible criteria, have a language barrier, or are either mentally or physically incapacitated. Non-responders include those members who have refused to participate in the survey, could not be reached due to a bad address or telephone number, or members that reached a maximum attempt threshold and were unable to be contacted during the survey time period.
- The table below shows the total number of members in the sample that fell into each of the various disposition categories.

Oklahoma Health Care Authority 2014 Disposition Summary

Ineligible	Total Sample	General Population
Deceased (M20/T20)	0	0
Does not meet criteria (M21/T21)	42	18
Language barrier (M22/T22)	14	8
Mentally/physically incapacitated (M24/T24)	0	0
Total Ineligible	56	26

Non-response	Total Sample	General Population
Bad address/phone (M23/T23)	329	167
Refusal (M32/T32)	186	85
Maximum attempts made (M33/T33)	2080	1015
Total Non-response	2595	1267

- Ineligible surveys are subtracted from the sample size when computing a response rate (see below):

$$\frac{\text{Completed mail and telephone surveys}}{\text{Sample size} - \text{Ineligible surveys}} = \text{Response Rate}$$

- Using the final figures from Oklahoma Health Care Authority members covered by CHIP with CCC survey, the numerator and denominator used to compute the response rate are presented below:

$$\frac{\text{Mail completes (597)} + \text{Phone completes (242)}}{\text{Total Sample (3490)} - \text{Total Ineligible (56)}} = \frac{839}{3434} = \text{Total Sample Response Rate} = 24\%$$

$$\frac{\text{Mail completes (245)} + \text{Phone completes (112)}}{\text{Total Sample (1650)} - \text{Total Ineligible (26)}} = \frac{357}{1624} = \text{General Population Response Rate} = 22\%$$

Executive Summary

Summary of Key Measures

- For purposes of reporting the CAHPS® results, the National Committee for Quality Assurance (NCQA) uses five core composite measures plus an additional five CCC measures and four rating questions from the survey.
- Each of the composite measures is the average of 2 - 4 questions on the survey, depending on the measure, while each rating score is based on a single question. CAHPS® scores are most commonly shown using Summary Rate scores (percentage of positive responses).

Oklahoma Health Care Authority				
	General Population		CCC Population	
Composite Measures	2013	2014	2013	2014
Getting Care Quickly	93%	92%	94%	94%
Shared Decision Making	52%	60%	57%	58%
How Well Doctors Communicate	93%	97%	94%	96%
Getting Needed Care	89%	89%	87%	88%
Customer Service	84%	88%	88%	90%
CCC Composite Measures				
Access to Prescription Medicines	95%	94%	94%	93%
Access to Specialized Services	79%	82%	76%	86%
Family-Centered Care: Personal Doctor Who Knows Child	86%	91%	89%	91%
Family-Centered Care: Getting Needed Information	90%	88%	93%	94%
Coordination of Care for Children with Chronic Conditions	70%	70%	77%	74%
Overall Rating Measures				
Health Care	82%	85%	83%	86%
Personal Doctor	85%	88%	85%	88%
Specialist	89%	89%	85%	89%
Health Plan	84%	86%	83%	83%
Health Promotion & Education	68%	69%	73%	68%
Coordination of Care	77%	82%	77%	84% ↑
	General Population		Total Sample	
Sample Size	1650	1650	3490	3490
# of Completes	549	357	1206	839
Response Rates	34%	22%	35%	24%

Legend: ↑/↓ 2014 results significantly higher/lower than 2013. Significance testing is not conducted on Composite Measures.

Executive Summary

Scoring for NCQA Accreditation – General Population

				2014 NCQA National Accreditation Comparisons*						
				Below 25th Nat'l	25th Nat'l	50th Nat'l	75th Nat'l	90th Nat'l		
				Accreditation Points	0.37	0.74	1.26	1.63	1.86	
<u>Composite Scores</u>	<u>Unadjusted</u>	<u>Adjusted**</u>	<u>Approximate Percentile Threshold</u>						<u>Approximate Score**</u>	
Getting Care Quickly	2.676	2.686	75 th	2.54	2.61	2.66	2.69		1.63	
How Well Doctors Communicate	2.793	2.803	90 th	2.63	2.68	2.72	2.75		1.86	
Getting Needed Care	2.510	2.520	75 th	2.38	2.46	2.52	2.57		1.63	
Customer Service***	0.000	0.000	NA	2.50	2.53	2.58	2.63		NA	
<u>Overall Ratings Scores</u>										
Q14 Health Care	2.548	2.562	50 th	2.49	2.52	2.57	2.59		1.26	
Q41 Personal Doctor	2.686	2.700	90 th	2.58	2.62	2.65	2.69		1.86	
Q48 Specialist ***	0.000	0.000	NA	2.53	2.59	2.62	2.66		NA	
				Accreditation Points	0.74	1.49	2.53	3.27	3.71	
Q54 Health Plan	2.599	2.613	50 th	2.51	2.57	2.62	2.67		2.53	
								Estimated Overall CAHPS® Score:	10.77	

NOTE: NCQA begins their calculation with an unadjusted raw score showing six digits after the decimal and then compares the adjusted score to their benchmarks and thresholds (also calculated to the sixth decimal place). This report displays accreditation points and scores with only two digits after the decimal. Therefore, the estimated overall CAHPS® score may differ from the sum of the individual scores due to rounding and could differ slightly from official scores provided by NCQA. The CAHPS® measures account for 13 points towards accreditation.

*Data Source: **NCQA Memorandum of January 30, 2014.** Subject: 2014 Accreditation Benchmarks and Thresholds.

**To take into account inherent sampling variation, prior to scoring, NCQA will add 0.014 to each of the four CAHPS® 5.0H rating questions and to the Customer Service composite means; and 0.01 to the Getting Needed Care, Getting Care Quickly, and How Well Doctors Communicate composite means. Data Source: "Important Information Regarding NCQA Accreditation Scoring Change" announcement dated May 11, 2011. NCQA will phase out the scoring adjustment over five years – 20% per year from 2011 until 2015.

*** Not reportable due to insufficient sample size.

Executive Summary

Comparison to Quality Compass® – General Population

	Oklahoma Health Care Authority	2013 Child Medicaid Quality Compass® Comparisons*				
		10th Nat'l	25th Nat'l	50th Nat'l	75th Nat'l	90th Nat'l
<u>Composite Scores</u>		%	%	%	%	%
Getting Care Quickly (<i>% Always and Usually</i>)	92.12%	81.77	87.40	90.06	92.51	94.23
Shared Decision Making (<i>% A lot/Yes</i>)	59.75%	NA	NA	NA	NA	NA
How Well Doctors Communicate (<i>% Always and Usually</i>)	96.57%	89.24	91.42	93.24	94.37	95.42
Getting Needed Care (<i>% Always and Usually</i>)	89.04%	76.58	81.56	84.65	87.85	90.43
Customer Service (<i>% Always and Usually</i>)	88.13%	84.29	85.78	87.77	89.70	91.21
<u>Overall Ratings Scores</u>						
Q14 Health Care (% 8, 9, and 10)	85.06%	78.54	81.30	83.73	85.57	87.04
Q41 Personal Doctor (% 8, 9, and 10)	88.31%	83.57	85.31	86.94	88.77	90.22
Q48 Specialist (% 8, 9, and 10)	88.73%	80.49	82.11	83.96	86.54	89.52
Q54 Health Plan (% 8, 9, and 10)	86.17%	77.52	80.46	83.49	86.36	88.92

NA = Comparison data not available from NCQA.

*Data Source: 2013 Child Medicaid Quality Compass®. Scores above based on 113 plans who qualified and chose to publicly report their scores.

	= Plan score falls on or above 90th Percentile
	= Plan score falls on 75th or below 90th Percentile
	= Plan score falls on 50th or below 75th Percentile
	= Plan score falls on 25th or below 50th Percentile
	= Plan score falls on 10th or below 25th Percentile
	= Plan score falls below 10th Percentile

Executive Summary

Comparison to Quality Compass® – CCC Population



	Oklahoma Health Care Authority	2013 Child Medicaid with CCC Quality Compass® Comparisons*				
		10th Nat'l	25th Nat'l	50th Nat'l	75th Nat'l	90th Nat'l
Composite Scores		%	%	%	%	%
Getting Care Quickly (<i>% Always and Usually</i>)	93.77%	86.49	91.01	92.55	93.79	94.81
Shared Decision Making (<i>% A lot/Yes</i>)	57.63%	NA	NA	NA	NA	NA
How Well Doctors Communicate (<i>% Always and Usually</i>)	95.61%	90.85	92.03	93.40	94.61	95.27
Getting Needed Care (<i>% Always and Usually</i>)	88.05%	82.41	83.60	86.75	89.85	91.50
Customer Service (<i>% Always and Usually</i>)	90.21%	83.57	87.50	88.98	90.40	92.47
Access to Prescription Medicines (<i>% Always and Usually</i>)	93.48%	86.13	88.64	91.01	93.69	94.93
Access to Specialized Services (<i>% Always and Usually</i>)	86.25%	67.37	74.95	77.23	80.36	81.78
Coordination of Care for Children with Chronic Conditions (<i>% Yes</i>)	74.27%	72.57	75.06	76.94	80.12	81.44
Family-Centered Care: Getting Needed Information (<i>% Always and Usually</i>)	93.54%	85.84	88.84	90.46	92.45	94.05
Family-Centered Care: Personal Doctor Who Knows Child (<i>% Yes</i>)	90.62%	86.54	88.34	89.59	90.81	92.11
Overall Ratings Scores						
Q14 Health Care (<i>% 8, 9, and 10</i>)	85.59%	75.62	78.60	81.90	84.23	86.67
Q41 Personal Doctor (<i>% 8, 9, and 10</i>)	88.01%	82.65	83.67	86.36	88.56	89.84
Q48 Specialist (<i>% 8, 9, and 10</i>)	89.10%	79.86	82.55	84.51	88.28	89.67
Q54 Health Plan (<i>% 8, 9, and 10</i>)	82.73%	73.83	77.75	81.98	84.45	87.23

NA = Comparison data not available from NCQA.

*Data Source: 2013 Child Medicaid with CCC Quality Compass®. Scores above based on 38 plans who qualified and chose to publicly report their scores.

	= Plan score falls on or above 90th Percentile
	= Plan score falls on 75th or below 90th Percentile
	= Plan score falls on 50th or below 75th Percentile
	= Plan score falls on 25th or below 50th Percentile
	= Plan score falls on 10th or below 25th Percentile
	= Plan score falls below 10th Percentile



Executive Summary

Key Driver Recommendations for General Population

A Key Driver Analysis is conducted to understand the impact that different aspects of plan service and provider care have on members' overall satisfaction with their health plan, their personal doctor, their specialist, and health care in general. Two specific scores are assessed both individually and in relation to each other. These are:

1. The relative importance of the individual issues (Correlation to overall measures).
2. The current levels of performance on each issue (Percentile group from Quality Compass®)

The key drivers for the health plan and health care are shown below:

High Priority for Improvement (High correlation/Relatively low performance)	
<u>Health Plan</u> Q51 - Treated You with Courtesy and Respect	<u>Health Care</u> None
Continue to Target Efforts (High correlation/Relatively high performance)	
<u>Health Plan</u> Q50 - Got Information or Help Needed Q15 - Easy to Get Care Believed Necessary for Child Q46 - Easy to Get Appointment for Child with Specialist	<u>Health Care</u> Q15 - Easy to Get Care Believed Necessary for Child Q37 - Spend Enough Time with Child Q50 - Got Information or Help Needed Q33 - Listen Carefully to You Q46 - Easy to Get Appointment for Child with Specialist

Executive Summary

Key Driver Recommendations for CCC Population

A Key Driver Analysis is conducted to understand the impact that different aspects of plan service and provider care have on members' overall satisfaction with their health plan, their personal doctor, their specialist, and health care in general. Two specific scores are assessed both individually and in relation to each other. These are:

1. The relative importance of the individual issues (Correlation to overall measures).
2. The current levels of performance on each issue (Percentile group from Quality Compass®)

The key drivers for the health plan and health care are shown below:

High Priority for Improvement (High correlation/Relatively low performance)	
<u>Health Plan</u> Q15 - Easy to Get Care Believed Necessary for Child	<u>Health Care</u> Q15 - Easy to Get Care Believed Necessary for Child
Continue to Target Efforts (High correlation/Relatively high performance)	
<u>Health Plan</u> Q32 - Explain Things in a Way You Could Understand Q33 - Listen Carefully to You Q37 - Spend Enough Time with Child Q56 - Easy to Get Prescription Medicine for Child	<u>Health Care</u> Q9 - Getting Questions Answered by Child's Doctor Q33 - Listen Carefully to You Q37 - Spend Enough Time with Child

Action Plans for Improving CAHPS® Scores

Morpace has consulted with numerous clients on ways to improve CAHPS® scores. Even though each health plan is unique and faces different challenges, many of the improvement strategies discussed on the next few pages can be applied by most plans with appropriate modifications.

In addition to the strategies suggested below, we suggest reviewing AHRQ's CAHPS® Improvement Guide, an online resource located on the Agency for Healthcare Research and Quality website at:

<https://www.cahps.ahrq.gov/qiguide/content/analysis/default.aspx>

Getting Needed Care

- Ease of obtaining appointment with specialist
 - Review panel of specialists to assure that there are an adequate number of specialists and that they are disbursed geographically to meet the needs of your members.
 - Conduct an Access to Care Survey with either or both of 2 audiences: physician's office and/or among members.
 - Conduct a CG-CAHPS Survey including specialists in the sample to identify the specialists with whom members are having a problem obtaining an appointment.
 - Include supplemental questions on the CAHPS® survey to determine whether the difficulty is in obtaining the initial consult or subsequent appointments.
 - Include a supplemental question on the CAHPS® survey to determine with which type of specialist members have difficulty making an appointment.
 - Utilize Provider Relations staff to question PCP office staff when making a regular visit to determine with which types of specialists they have the most problems scheduling appointments.
 - Develop materials to promote your specialist network and encourage the PCPs to develop new referral patterns that align with the network.
- Ease of obtaining care, tests, or treatment you needed through your health plan
 - Include a supplemental question on the CAHPS® survey to identify the type of care, test or treatment for which the member has a problem obtaining.
 - Review complaints received by Customer Service regarding inability to receive care, tests or treatments.
 - Evaluate pre-certification, authorization, and appeals processes. Of even more importance is to evaluate the manner in which the policies and procedures are delivered to the member, whether the delivery of the information is directly to the member or through their provider. Members may be hearing that they cannot receive the care, tests, or treatment, but are not hearing why.
 - When care or treatment is denied, care should be taken to ensure that the message is understood by both the provider and the member.

Action Plans for Improving CAHPS® Scores (cont'd)

Getting Care Quickly

- Obtaining care for urgent care (illness, injury or condition that needed care right away) as soon as you needed
- Obtaining an appointment for routine care/check-ups
 - Conduct a CG-CAHPS survey to identify offices with scheduling issues.
 - Conduct an Access to Care Study
 - Calls to physician office - unblinded
 - Calls to physician office – blinded (Secret Shopper)
 - Calls to members with recent claims
 - Desk audit by provider relations staff
 - Develop seminars for physicians' office staff that could include telephone skills (answering, placing a person on hold, taking messages from patients, dealing with irate patients over the phone, etc.) as well as scheduling advice. Use this time to obtain feedback concerning what issues members have shared with the office staff concerning interactions with the plan.
 - These seminars could be offered early morning, lunch times or evenings so as to be convenient for the office staff. Most physicians would be appreciative of having this type of training for their staff as they do not have the time or talents to train their employees in customer service and practice management.

How Well Doctors Communicate

- Doctor explained things in a way that was easy to understand
- Doctor listened carefully
- Doctor showed respect for what member had to say
- Doctor spent enough time with member
 - Conduct a CG-CAHPS survey to identify lower performing physicians for whom improvement plans should be developed.
 - Conduct focus group of members to identify examples of behaviors identified in the questions. Video the groups to show physicians how patients characterize excellent and poor physician performance.
 - Include supplemental questions from the Item Set for Addressing Health Literacy to better identify communication issues.
 - Develop “Questions Checklists” on specific diseases to be used by members when speaking to doctors. Have these available in office waiting rooms.
 - Offer in-service programs with CMEs for physicians on improving communication with patients. This could be couched in terms of motivating patients to comply with medication regimens or to incorporate healthy life-style habits. Research has shown that such small changes as having physicians sit down instead of stand when talking with a patient leads the patient to think that the doctor has spent more time with them.
 - Provide the physicians with patient education materials, which the physician will then give to the patient. These materials could reinforce that the physician has heard the concerns of the patient or that they are interested in the well-being of the patient. The materials might also speak to a healthy habit that the physician wants the patient to adopt, thereby reinforcing the communication and increasing the chances for compliance.
 - Provide communication tips in the provider newsletters. Often, these are better accepted if presented as a testimonial from a patient.

Action Plans for Improving CAHPS® Scores (cont'd)

Shared Decision Making














- Doctor talked about reasons you might want to take a medicine
- Doctor talked about reasons you might not want to take a medicine
- Doctor asked you what you thought was best
 - Conduct a CG-CAHPS survey and include the Shared Decision Composite as supplemental questions.
 - Develop patient education materials on common medicines described for your members explaining pros and cons of each medicine. Examples: asthma medications, high blood pressure medications, statins.
 - Develop audio recordings and/or videos of patient/doctor dialogues/vignettes on common medications. Distribute to provider panel via podcast or other method.

Health Plan Customer Service

- Customer service gave the information or help needed
- Customer service treated member with courtesy and respect
 - Conduct Call Center Satisfaction Survey. Implement a short IVR survey to members within days of their calling customer service to explore/assess their recent experience.
 - At the end of each Customer Service call, have your representative enter/post the reason for the call. At the end of a month, synthesize the information to discern the major reasons for a call. Have the customer service representatives and other appropriate staff discuss ways to address the reason for the majority of the calls and design interventions so that the reason for the call no longer exists.

Executive Summary

Key Driver Analysis for General Population – Health Plan

			Sample Size:	Health Plan's Score	Plan's Percentile Range
Q54. Rating of Health Plan					
Q51. Treated You with Courtesy and Respect		0.46	80	91.25%	10th
Q50. Got Information or Help Needed		0.38	80	85.00%	75th
Q15. Easy to Get Care Believed Necessary for Child		0.37	262	91.60%	50th
Q46. Easy to Get Appointment for Child with Specialist		0.32	74	86.49%	75th
Q37. Spend Enough Time with Child		0.25	241	95.85%	90th
Q33. Listen Carefully to You		0.20	241	97.51%	90th
Q4. Getting Care for Child as Soon as Needed		0.19	128	93.75%	50th
Q13. Asked Preference for Medicine		0.17	92	75.00%	NA
Q32. Explain Things in a Way You Could Understand		0.17	240	95.00%	50th
Q6. Getting Appointment for Child as Soon as Needed		0.17	242	90.50%	50th
Q12. Discussed Reasons Not to Take Medicine		0.16	94	38.30%	NA
Q34. Show Respect for What You Had to Say		0.16	242	97.93%	90th
Q11. Discussed Reasons to Take Medicine		0.15	94	65.96%	NA
	0.0	0.5	1.0		

High Priority for Improvement
(High Correlation/
Lower Quality Compass® Group)

Q51 - Treated You with Courtesy and Respect

Continue to Target Efforts
(High Correlation/
Higher Quality Compass® Group)

Q50 - Got Information or Help Needed
Q15 - Easy to Get Care Believed Necessary
for Child
Q46 - Easy to Get Appointment for Child with
Specialist










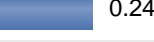



Use caution when reviewing scores with sample sizes less than 25.

"Health Plan's Score" is the percent of respondents that answered "Always", "Usually"; "A lot", "Yes"

Executive Summary

Key Driver Analysis for General Population – Health Care

Q14. Rating of Health Care

			Sample Size:	Health Plan's Score	Plan's Percentile Range
Q15. Easy to Get Care Believed Necessary for Child		0.45	262	91.60%	50th
Q37. Spend Enough Time with Child		0.39	241	95.85%	90th
Q50. Got Information or Help Needed		0.39	80	85.00%	75th
Q33. Listen Carefully to You		0.37	241	97.51%	90th
Q46. Easy to Get Appointment for Child with Specialist		0.35	74	86.49%	75th
Q34. Show Respect for What You Had to Say		0.30	242	97.93%	90th
Q32. Explain Things in a Way You Could Understand		0.29	240	95.00%	50th
Q6. Getting Appointment for Child as Soon as Needed		0.27	242	90.50%	50th
Q4. Getting Care for Child as Soon as Needed		0.26	128	93.75%	50th
Q13. Asked Preference for Medicine		0.24	92	75.00%	NA
Q11. Discussed Reasons to Take Medicine		0.19	94	65.96%	NA
Q12. Discussed Reasons Not to Take Medicine		0.18	94	38.30%	NA
Q51. Treated You with Courtesy and Respect		0.18	80	91.25%	10th

High Priority for Improvement
(High Correlation/
Lower Quality Compass® Group)

None

Continue to Target Efforts
(High Correlation/
Higher Quality Compass® Group)

Q15 - Easy to Get Care Believed Necessary for Child
Q37 - Spend Enough Time with Child
Q50 - Got Information or Help Needed
Q33 - Listen Carefully to You
Q46 - Easy to Get Appointment for Child with Specialist

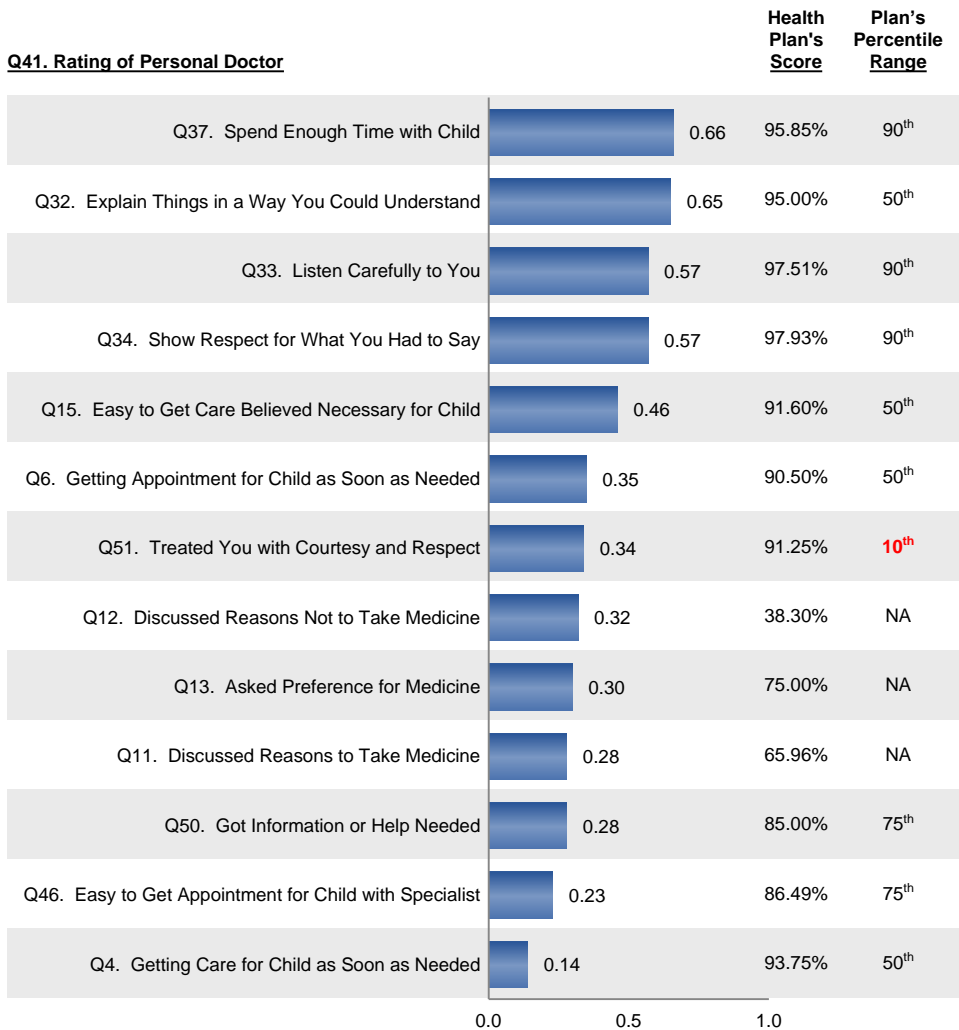
Use caution when reviewing scores with sample sizes less than 25.

"Health Plan's Score" is the percent of respondents that answered "Always", "Usually"; "A lot", "Yes"

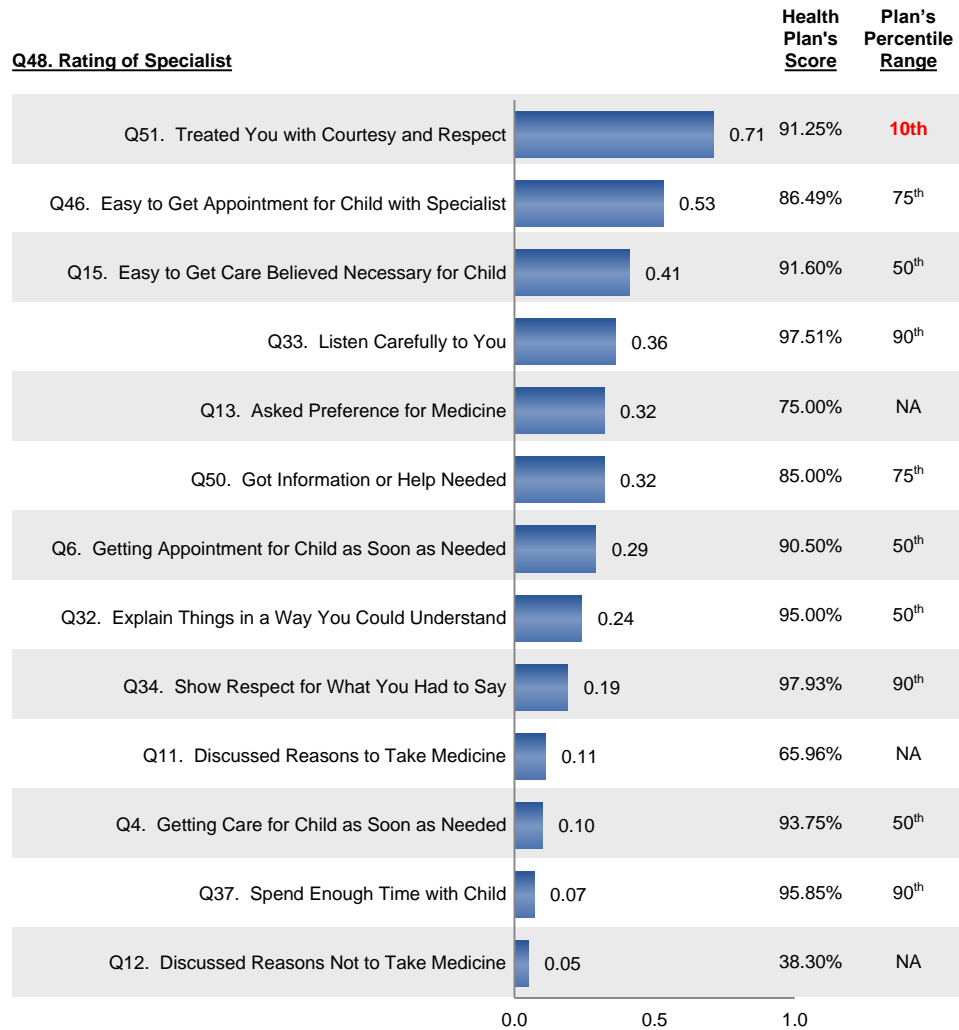
Executive Summary

Key Driver Analysis for General Population – Doctor and Specialist

Q41. Rating of Personal Doctor



Q48. Rating of Specialist





















"Health Plan's Score" is the percent of respondents that answered "Always", "Usually"; "A lot", "Yes"

Executive Summary

Key Driver Analysis for CCC Population – Health Plan

Q54. Rating of Health Plan

			Sample Size:	Health Plan's Score	Plan's Percentile Range
Q32. Explain Things in a Way You Could Understand		0.39	325	96.00%	75th
Q15. Easy to Get Care Believed Necessary for Child		0.36	355	89.86%	25th
Q33. Listen Carefully to You		0.34	325	96.31%	90th
Q37. Spend Enough Time with Child		0.32	324	94.75%	90th
Q56. Easy to Get Prescription Medicine for Child		0.30	368	93.48%	50th
Q34. Show Respect for What You Had to Say		0.28	324	95.37%	50th
Q6. Getting Appointment for Child as Soon as Needed		0.28	327	93.27%	75th
Q9. Getting Questions Answered by Child's Doctor		0.26	356	93.54%	75th
Q20. Easy to Get Special Medical Equipment for Child		0.25	32	81.25%	NA
Q44. Doctor Understands How Medical Conditions Affect Family's Day-to-Day Life		0.24	302	91.39%	75th
Q43. Doctor Understands How Medical Conditions Affect Child's Day-to-Day Life		0.21	303	95.38%	90th
Q50. Got Information or Help Needed		0.21	97	87.63%	75th
Q51. Treated You with Courtesy and Respect		0.21	97	92.78%	25th
Q13. Asked Preference for Medicine		0.20	177	77.40%	NA
Q46. Easy to Get Appointment for Child with Specialist		0.19	160	86.25%	50th
Q26. Easy to Get Treatment or Counseling for Child		0.18	170	90.00%	90th
Q4. Getting Care for Child as Soon as Needed		0.18	192	94.27%	50th
Q29. Health Plan or Doctor's Office Helps Coordinate Care		0.16	191	62.83%	50th

High Priority for Improvement
 (High Correlation/
 Lower Quality Compass[®] Group)
 Q15 - Easy to Get Care Believed Necessary
 for Child

Continue to Target Efforts
 (High Correlation/
 Higher Quality Compass[®] Group)
 Q32 - Explain Things in a Way You Could
 Understand
 Q33 - Listen Carefully to You
 Q37 - Spend Enough Time with Child
 Q56 - Easy to Get Prescription Medicine for
 Child

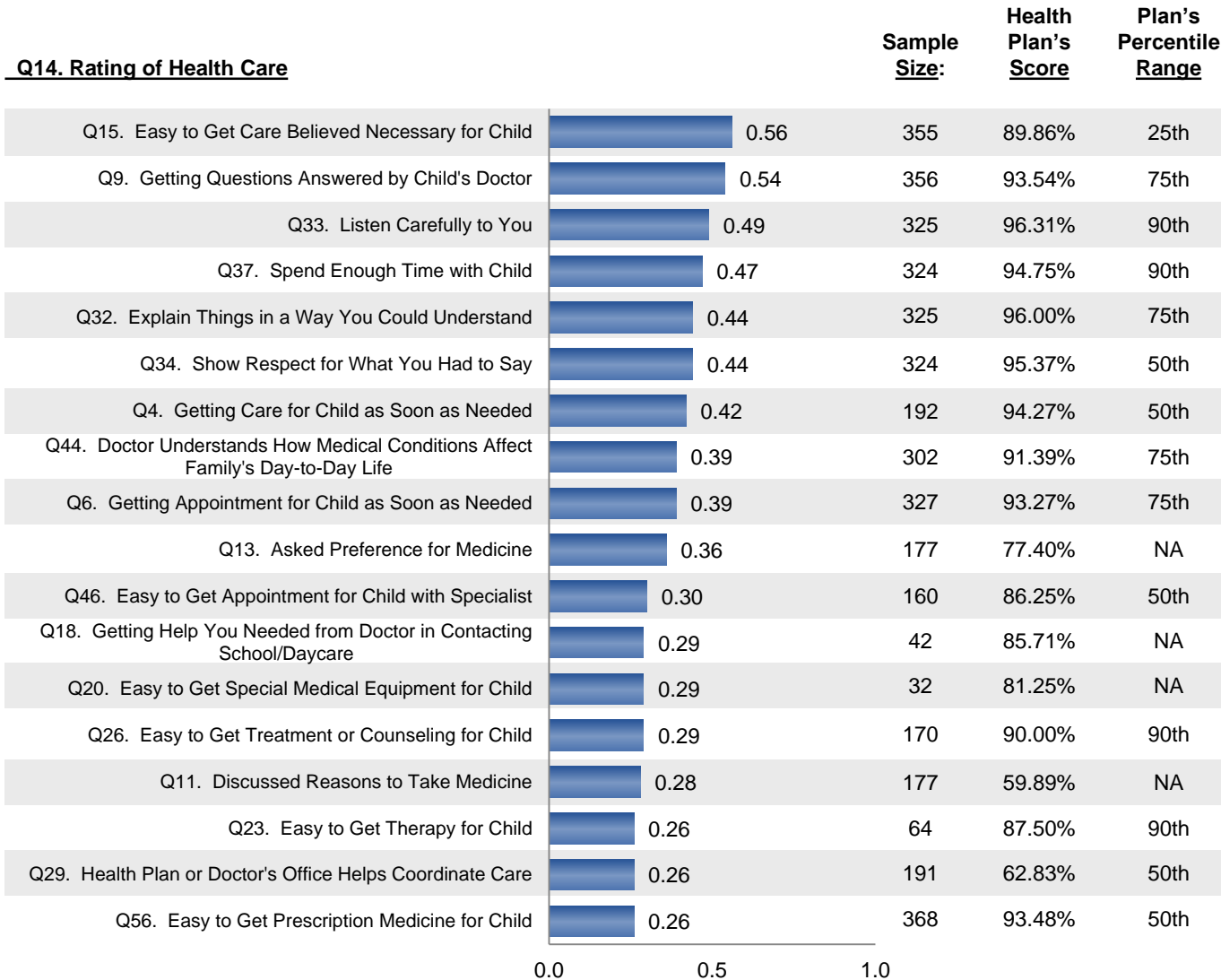
Above are 18 of the 23 key measures. The 5 measures with lowest correlation to Rating of Health Plan are not displayed.

Use caution when reviewing scores with sample sizes less than 25.

"Health Plan's Score" is the percent of respondents that answered "Always", "Usually"; "A lot", "Yes"

Executive Summary

Key Driver Analysis for CCC Population – Health Care



High Priority for Improvement
(High Correlation/
Lower Quality Compass® Group)

Q15 - Easy to Get Care Believed Necessary for Child

Continue to Target Efforts
(High Correlation/
Higher Quality Compass® Group)

Q9 - Getting Questions Answered by Child's Doctor

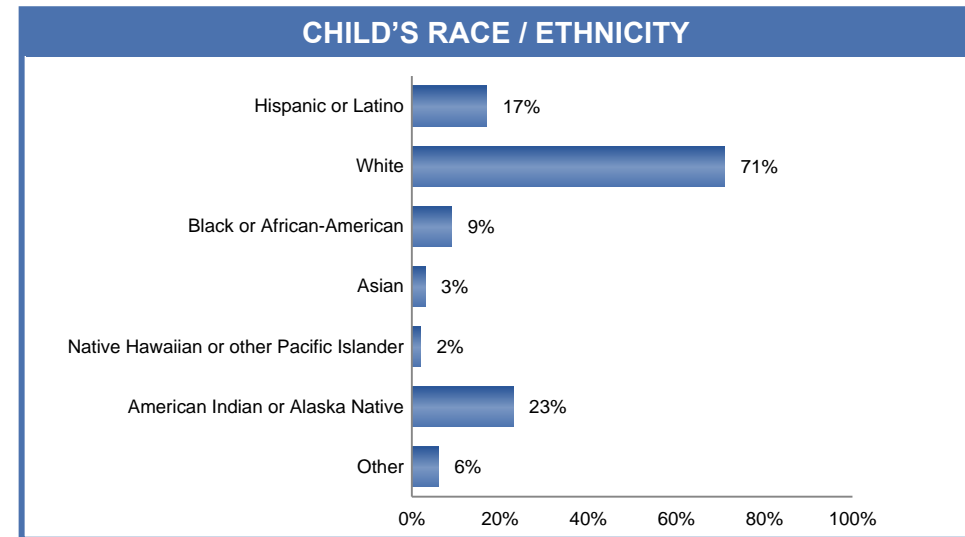
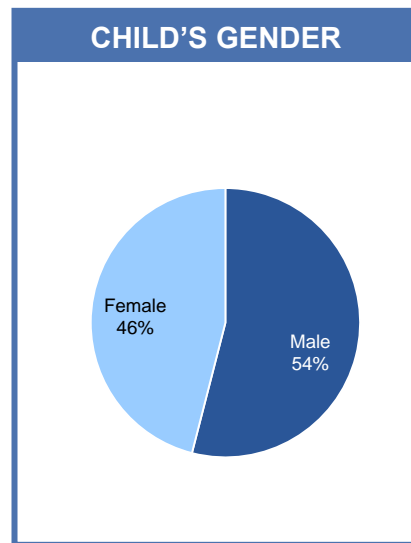
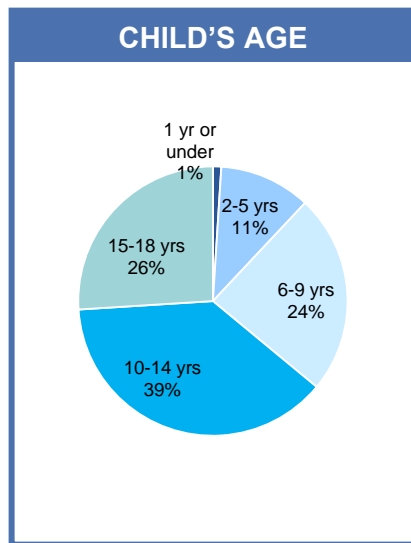
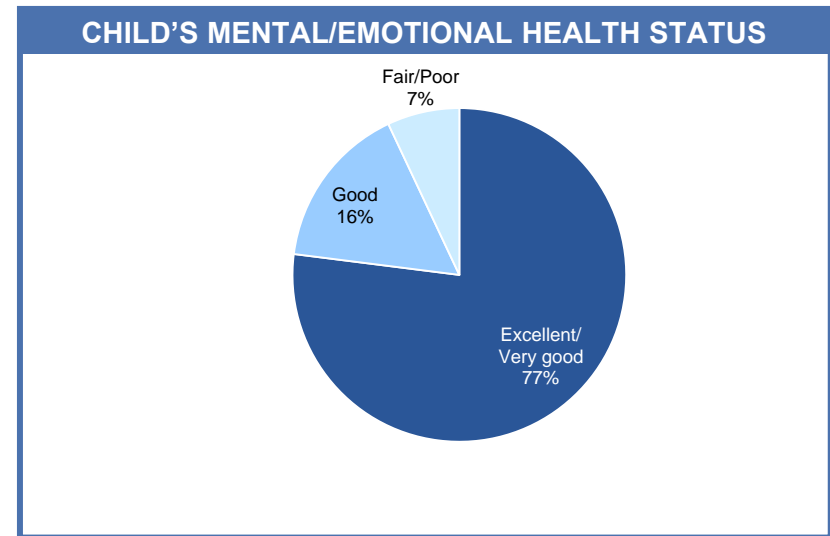
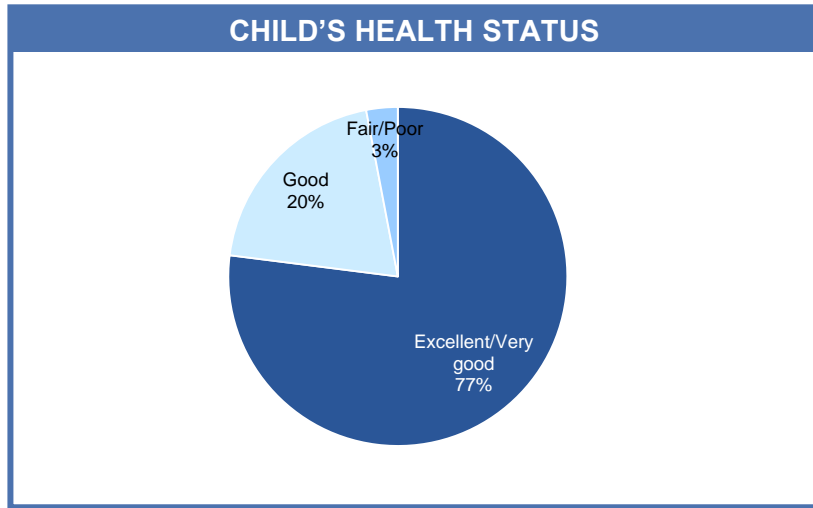
Q33 - Listen Carefully to You
Q37 - Spend Enough Time with Child

Above are 18 of the 23 key measures. The 5 measures with lowest correlation to Rating of Health Care are not displayed. Use caution when reviewing scores with sample sizes less than 25.

"Health Plan's Score" is the percent of respondents that answered "Always", "Usually"; "A lot", "Yes"

Executive Summary

Demographics – General Population

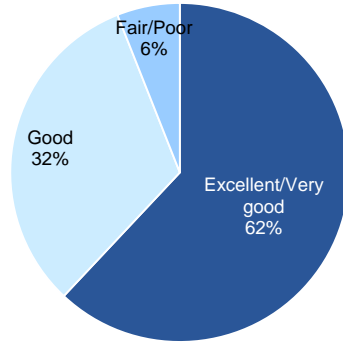


Data shown are self reported.

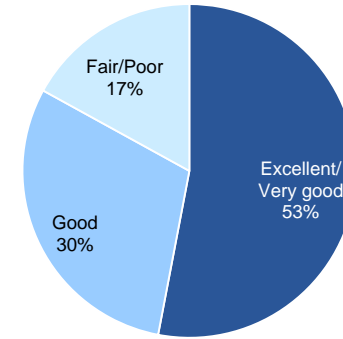
Executive Summary

Demographics – CCC Population

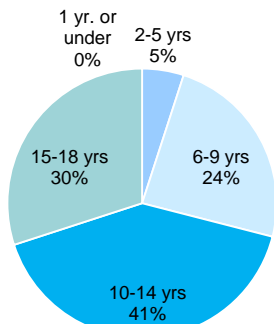
CHILD'S HEALTH STATUS



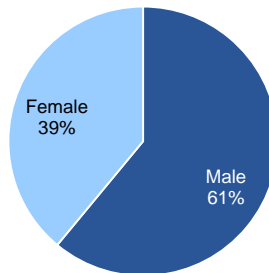
CHILD'S MENTAL/EMOTIONAL HEALTH STATUS



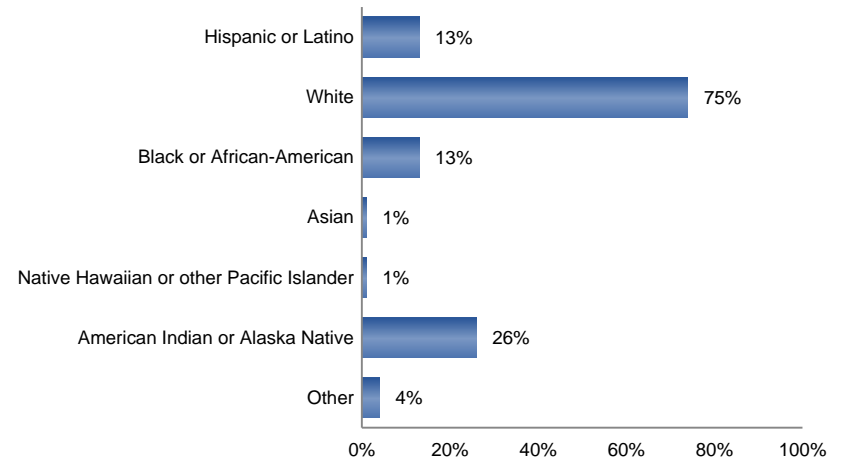
CHILD'S AGE



CHILD'S GENDER



CHILD'S RACE / ETHNICITY



Data shown are self reported.

Executive Summary

Child Demographics

	General Population		2013 Quality Compass®-General Population	CCC Population		2013 Quality Compass®-CCC Population
	2013	2014		2013	2014	
Q58. Child's Health Status						
Excellent/Very good	80%	77%	75%	63%	62%	55%
Good	17%	20%	20%	29%	32%	32%
Fair/Poor	3%	3%	5%	8%	6%	13%
Q59. Child's Mental/Emotional Health Status						
Excellent/Very good	79%	77%	NA	55%	53%	NA
Good	16%	16%	NA	31%	30%	NA
Fair/Poor	5%	7%	NA	14%	17%	NA
Q74. Child's Age						
1yr & under	2%	1%	NA	1%	0%	NA
2-5 yrs	15%	11%	NA	7%	5%	NA
6-9 yrs	27%	24%	NA	27%	24%	NA
10-14 yrs	33%	39%	NA	37%	41%	NA
15-18 yrs	23%	26%	NA	29%	30%	NA
Q75. Child's Gender						
Male	52%	54%	52%	57%	61%	59%
Female	48%	46%	48%	43%	39%	41%
Q76/77. Child's Race/Ethnicity						
Hispanic or Latino	21%	17%	29%	13%	13%	23%
White	68%	71%	46%	75%	75%	76%
Black or African-American	11%	9%	19%	12%	13%	46%
Asian	5%	3%	4%	1%	1%	6%
Native Hawaiian or other Pacific Islander	1%	2%	2%	0%	1%	1%
American Indian or Alaska Native	22%	23%	3%	25%	26%	5%
Other	10%	6%	11%	5%	4%	23%

Data shown are self reported.

NA = Data not available from NCQA (question added in 2013).

Executive Summary

Respondent Demographics

	General Population		2013 Quality Compass®- General Population	CCC Population		2013 Quality Compass®-CCC Population
	2013	2014		2013	2014	
Q7. Number of Times Going to Doctor's Office/Clinic for Care						
None	23%	23%	22%	11%	13%	12%
1 time	26%	26%	25%	17%	20%	19%
2 times	24%	21%	23%	25%	25%	23%
3 times	13%	14%	14%	17%	15%	18%
4 times	6%	7%	7%	11%	9%	10%
5-9 times	6%	8%	7%	14%	15%	13%
10 or more times	1%	2%	2%	4%	3%	5%
Q31. Number of Times Visited Personal Doctor to Get Care						
None	22%	24%	19%	12%	17%	12%
1 time	31%	30%	30%	20%	25%	25%
2 times	23%	21%	24%	28%	25%	24%
3 times	13%	13%	13%	18%	13%	16%
4 times	4%	6%	7%	8%	8%	10%
5-9 times	5%	6%	6%	11%	10%	10%
10 or more times	1%	1%	1%	3%	2%	3%
Q78. Respondent's Age						
Under 18	5%	7%	7%	5%	5%	8%
18 to 24	5%	1%	9%	2%	1%	5%
25 to 34	35%	27%	33%	31%	24%	28%
35 to 44	33%	41%	29%	37%	42%	29%
45 to 54	18%	17%	14%	17%	20%	17%
55 to 64	4%	7%	5%	6%	5%	8%
65 to 74	1%	1%	2%	1%	2%	3%
75 or older	0%	0%	0%	0%	0%	1%
Q79. Respondent's Gender						
Male	12%	15%	11%	11%	11%	10%
Female	88%	85%	89%	89%	89%	90%
Q80. Respondent's Education						
Did not graduate high school	15%	14%	22%	10%	8%	19%
High school graduate or GED	34%	34%	34%	33%	31%	34%
Some college or 2-year degree	37%	36%	33%	43%	48%	36%
4-year college graduate	10%	11%	7%	10%	10%	7%
More than 4-year college degree	5%	5%	4%	4%	4%	4%

Data shown are self reported.

NA = Data not available from NCQA (question added in 2013).



Executive Summary

General Knowledge about Demographic Differences

The commentary below is based on generally recognized industry knowledge per various published sources:

Age	Older respondents tend to be more satisfied than younger respondents.
Health Status	People who rate their health status as 'Excellent' or 'Very good' tend to be more satisfied than people who rate their health status lower.
Education	More educated respondents tend to be less satisfied.
Race and ethnicity effects are independent of education and income. Lower income generally predicts lower satisfaction with coverage and care.	
Race	Whites give the highest ratings to both rating and composite questions. In general, Hispanics, Asian/Pacific Islanders and American Indian/Alaska Natives give the lowest ratings. Growing evidence that lower satisfaction ratings from Asian Americans are partially attributable to cultural differences in their response tendencies. Therefore, their lower scores might not reflect an accurate comparison of their experience with health care.
Ethnicity	Hispanics tend to give lower ratings than non-Hispanics. Non-English speaking Hispanics tend to give lower ratings than English-speaking Hispanics.

Note: If a health plan's population differs from Quality Compass® in any of the demographic groups, these differences could account for the plan's score when compared to Quality Compass®. For example, if a plan's population rates themselves in better health than the Quality Compass® population, this could impact a plan's score positively. Conversely, if a plan's population rates themselves in poorer health than the Quality Compass® population, the plan's scores could be negatively impacted.

Executive Summary

Composite & Rating Scores by Demographics for General Population

Demographic	Child's Age					Child's Race				Child's Ethnicity		Respondent's Educational Level		Child's Health Status		
	1 yr or less	2-5 yrs	6-9 yrs	10-14 yrs	15-18 yrs	Caucasian	African American	Asian	All other	Hispanic	Non-Hispanic	HS Grad or Less	Some College+	Excellent/ Very Good	Good	Fair/ Poor
	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P
Sample size	(n=3)	(n=37)	(n=85)	(n=136)	(n=91)	(n=254)	(n=31)	(n=11)	(n=106)	(n=59)	(n=290)	(n=168)	(n=184)	(n=275)	(n=71)	(n=9)
Composites (% Always/Usually)																
Getting Care Quickly	100	100	96	88	90	93	89	69	95	90	92	91	93	93	89	100
Shared Decision Making(% A lot/Yes)	78	38	63	60	60	58	81	100	64	64	59	48	66	60	58	78
How Well Doctors Communicate	100	98	94	98	97	96	98	93	99	95	97	95	98	97	96	100
Getting Needed Care	50	91	87	92	86	92	85	63	90	82	90	88	90	91	85	80
Customer Service	100	83	85	95	83	89	83	67	92	82	90	85	91	88	87	100
Ratings (% 8,9,10)																
Personal Doctor	100	91	86	87	91	88	97	89	91	90	88	87	89	88	86	100
Specialist	0	75	82	91	95	90	75	50	92	86	89	84	91	89	91	75
Health Care	100	93	83	86	80	84	90	75	87	79	86	85	85	88 ○	77	71
Health Plan	100	81	89	87	85	87	87	90	88	88	86	88	85	87	81	100

A/B/C = significantly higher than indicated column at 95% confidence level

Significance testing is not conducted on Composite Measures.

Detailed Results

Getting Care Quickly

Shared Decision Making

How Well Doctors Communicate

Getting Needed Care

Customer Service

Health Promotion and Education/Coordination of Care

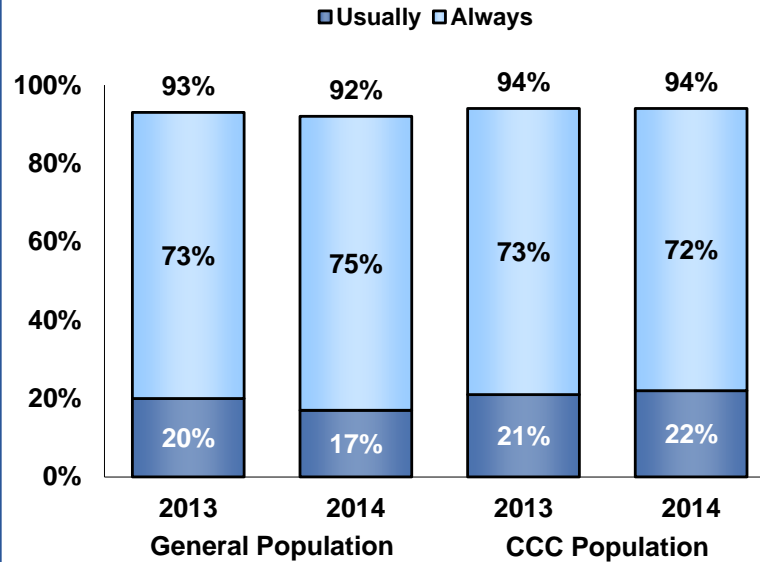
Overall Rating Scores for Health Care, Health Plan, Personal Doctor & Specialist



Getting Care Quickly Composite



Getting Care Quickly



General Population
plan score falls on 50th
or below 75th Percentile

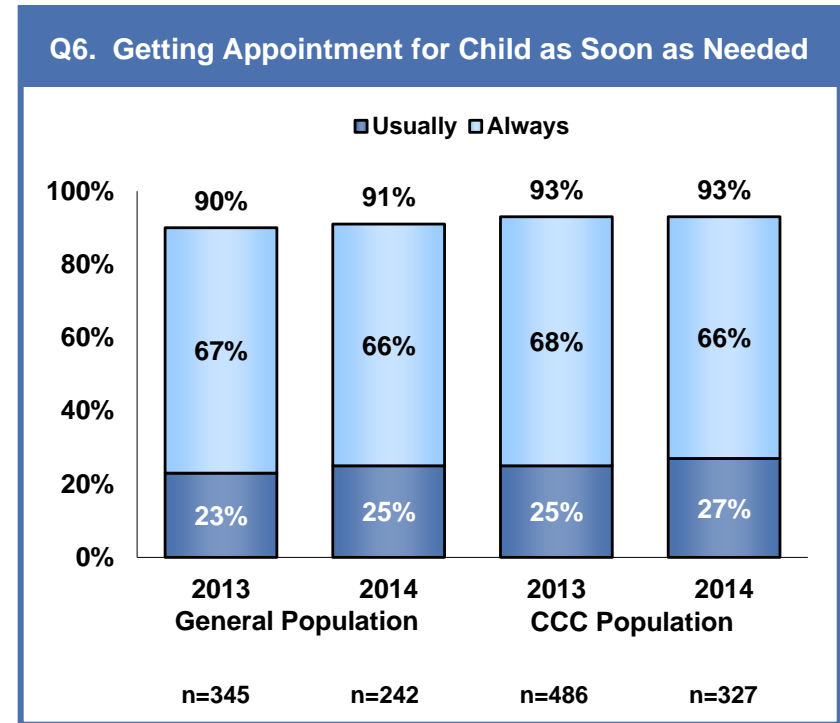
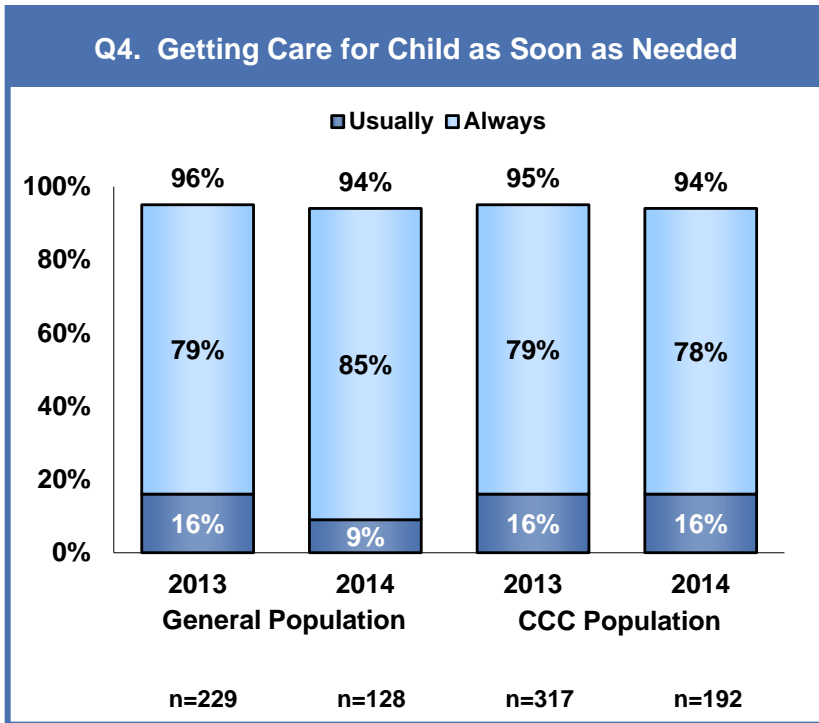
CCC Population plan
score falls on 50th or
below 75th Percentile

2013 Quality Compass®						
	Mean	10 th	25 th	50 th	75 th	90 th
General Population	89.18	81.77	87.40	90.06	92.51	94.23
CCC Population	91.81	86.49	91.01	92.55	93.79	94.81

NOTE: Numbers are rounded to the nearest whole number

Getting Care Quickly

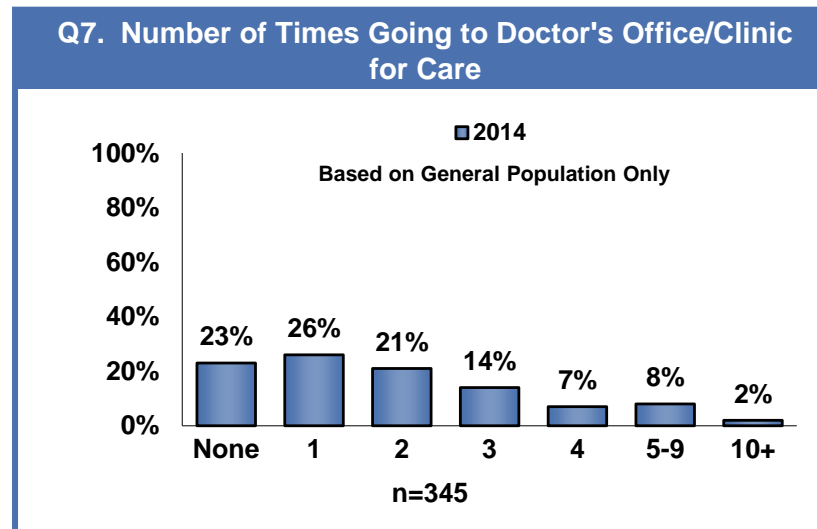
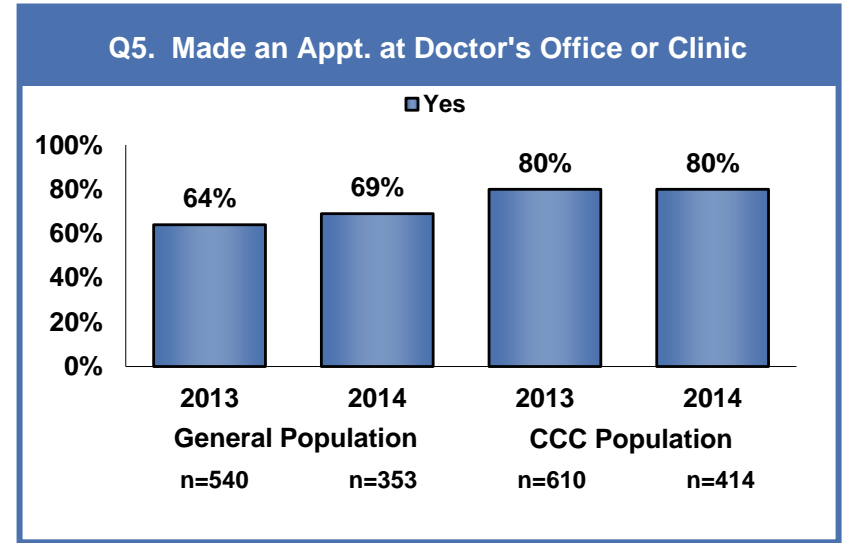
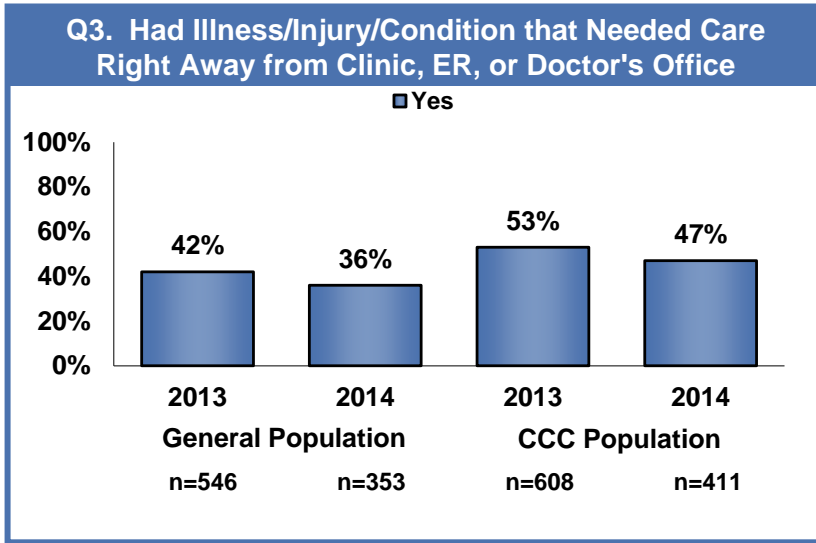
Composite Measures



Legend: ↑/↓ 2014 statistically higher/lower compared to 2013 results.
NOTE: Numbers are rounded to the nearest whole number

Getting Care Quickly

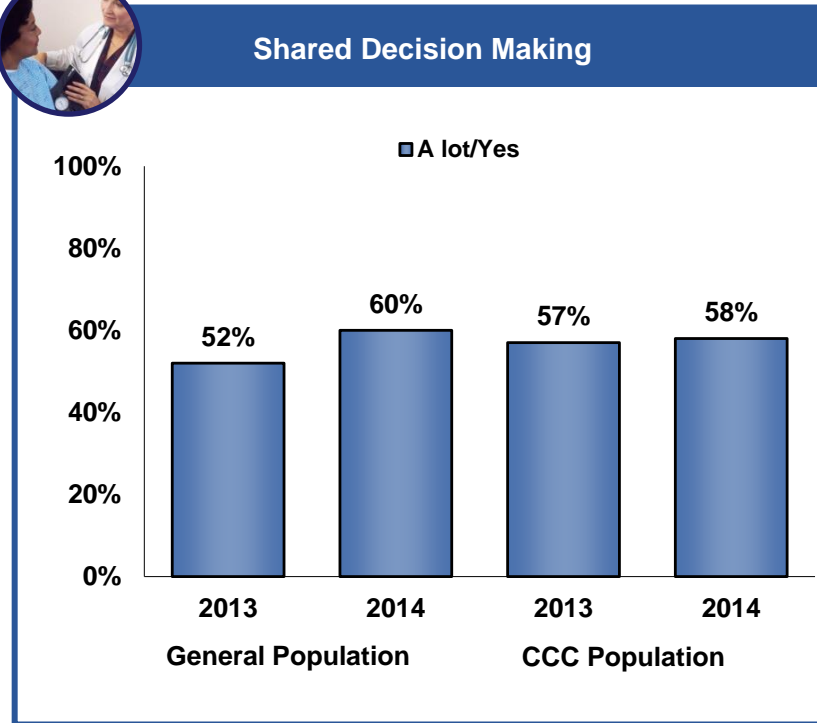
Access to Care



Legend: ↑/↓ 2014 statistically higher/lower compared to 2013 results.

NOTE: Numbers are rounded to the nearest whole number

Shared Decision Making Composite



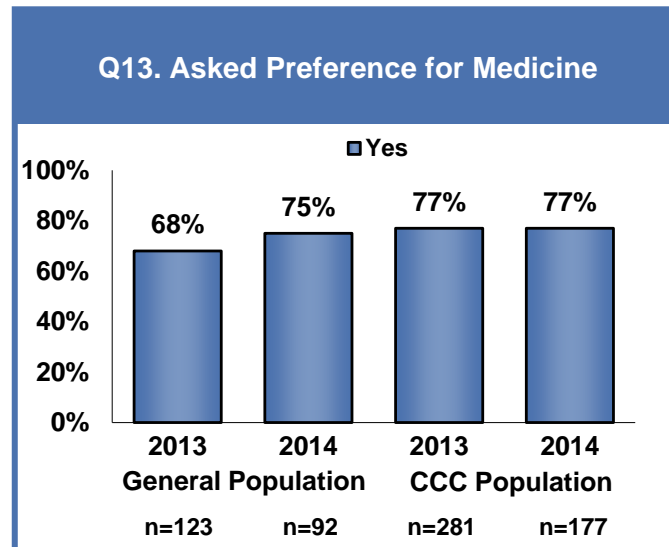
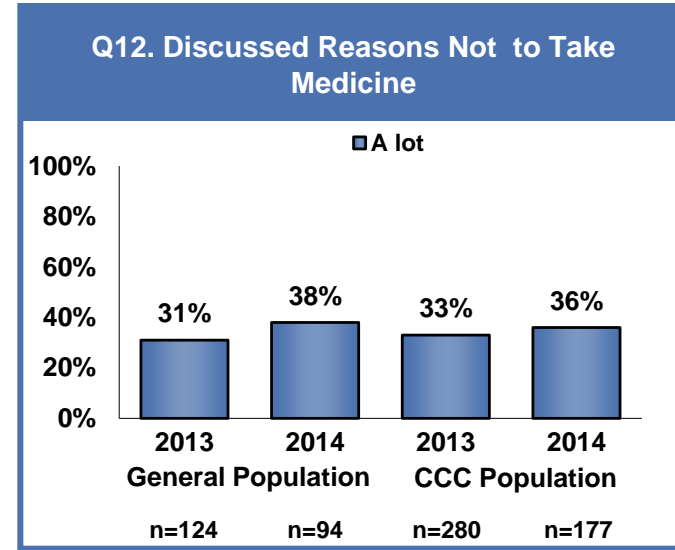
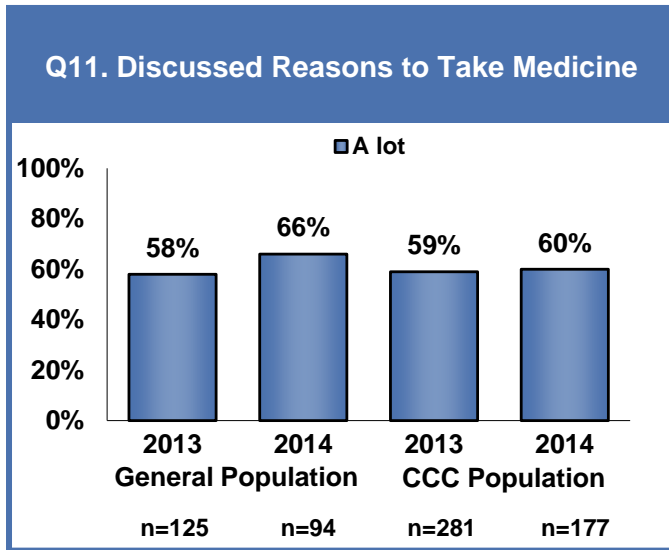
This composite was revised in 2013 to focus on patients' discussion with their doctor or other health provider about prescription medicine. The score for this measure is the average of 3 questions (Q11 - % A lot, Q12 - % A lot, Q13 - % Yes). This measure will be publicly reported for the first time in 2014.

2013 Quality Compass®						
	Mean	10 th	25 th	50 th	75 th	90 th
General Population	NA	NA	NA	NA	NA	NA
CCC Population	NA	NA	NA	NA	NA	NA

NOTE: Numbers are rounded to the nearest whole number

Shared Decision Making

Composite Measures

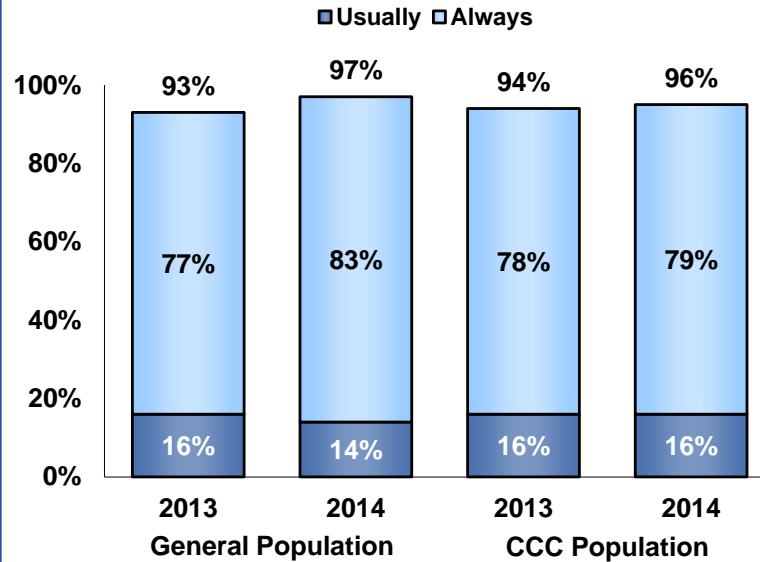


Legend: ↑/↓ 2014 statistically higher/lower compared to 2013 results. NOTE: Numbers are rounded to the nearest whole number

How Well Doctors Communicate Composite



How Well Doctors Communicate



General Population
plan score falls on or
above 90th Percentile

CCC Population plan
score falls on or above
90th Percentile

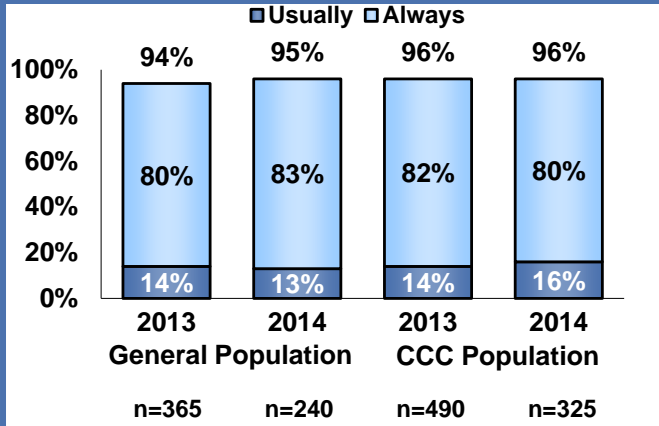
2013 Quality Compass®						
	Mean	10 th	25 th	50 th	75 th	90 th
General Population	92.61	89.24	91.42	93.24	94.37	95.42
CCC Population	93.06	90.85	92.03	93.40	94.61	95.27

NOTE: Numbers are rounded to the nearest whole number

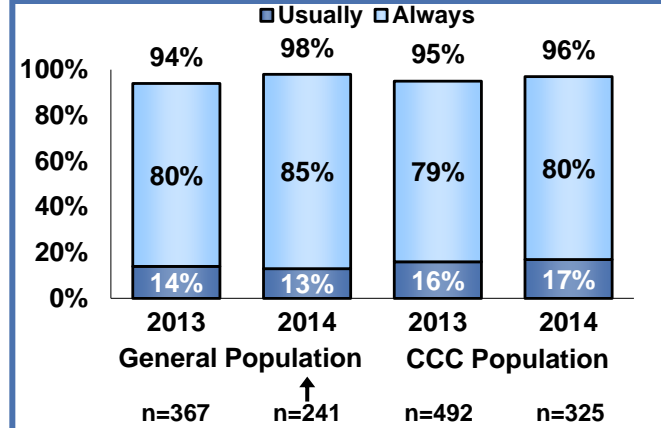
How Well Doctors Communicate

Composite Measures

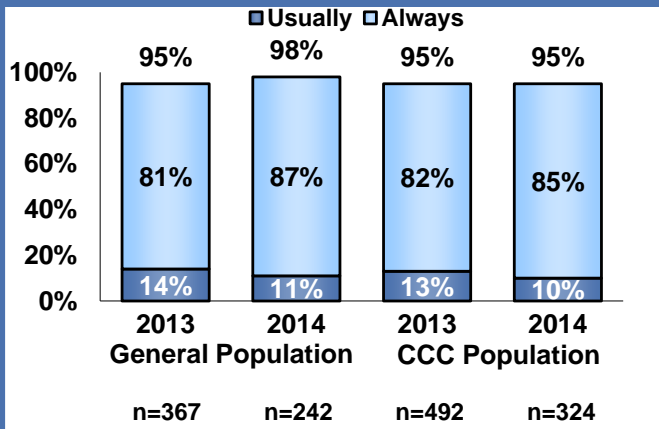
Q32. Explain Things in a Way You Could Understand



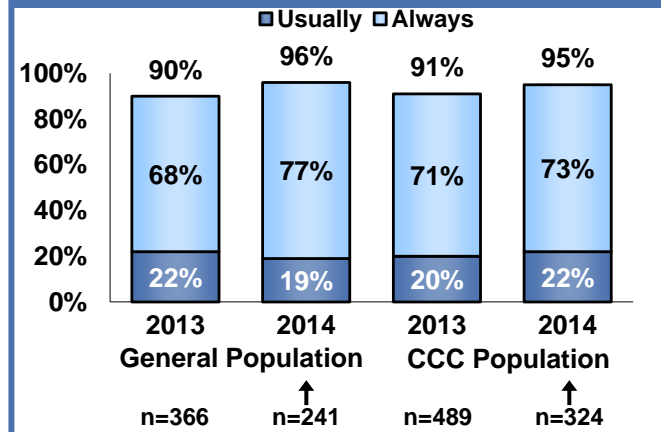
Q33. Listen Carefully to You



Q34. Show Respect for What You Had to Say



Q37. Spend Enough Time with Child

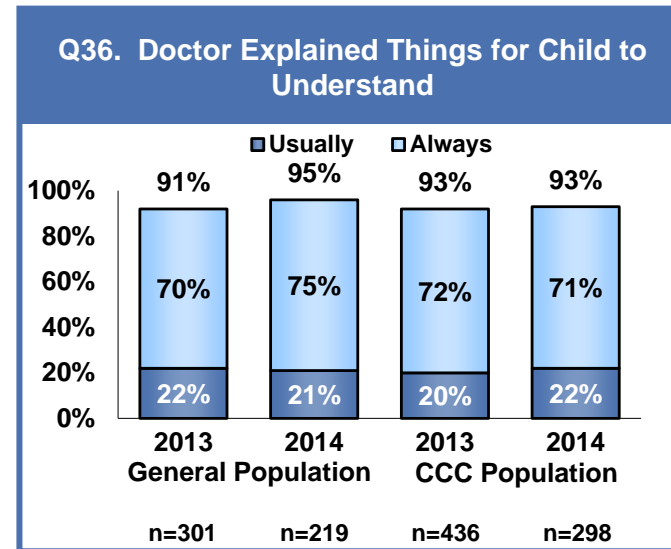
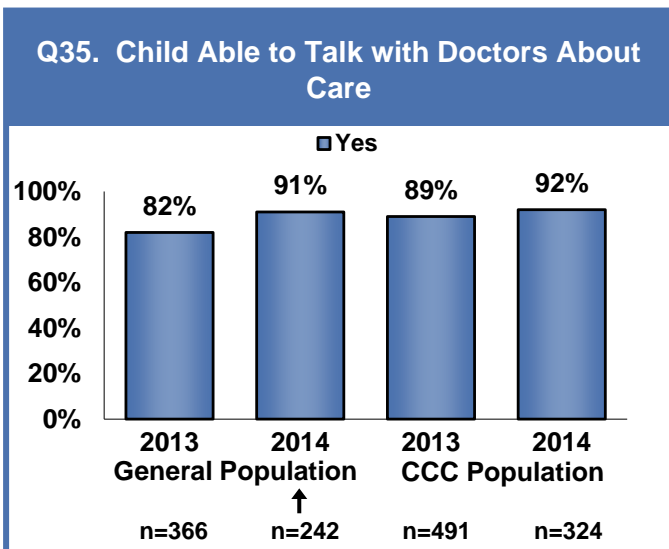
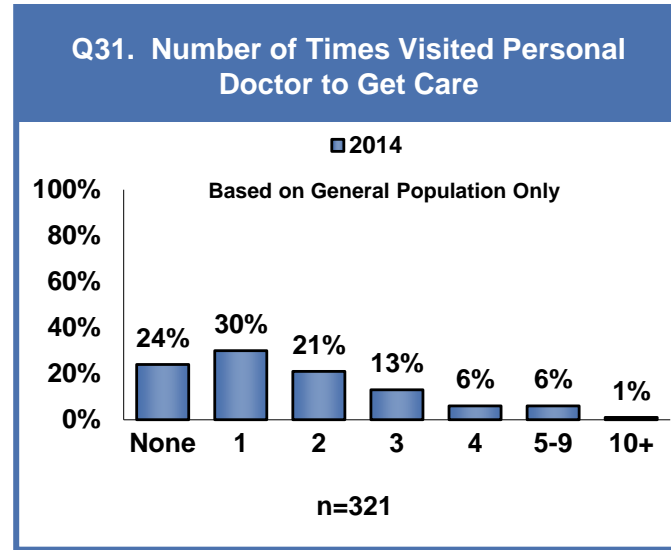
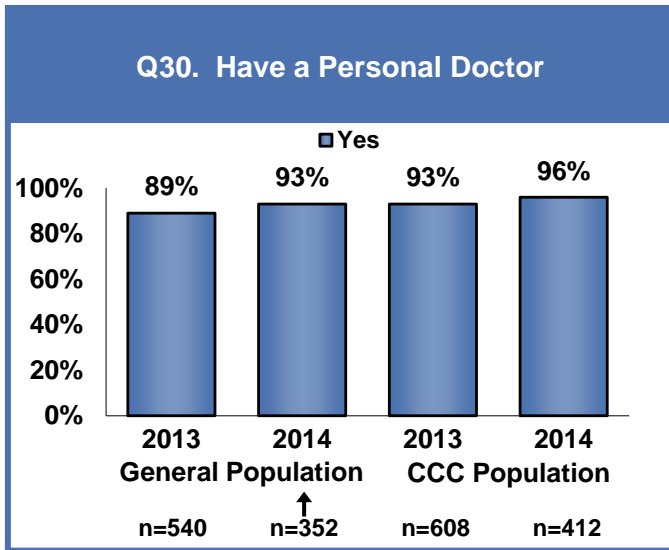


Legend: ↑/↓ 2014 statistically higher/lower compared to 2013 results.

NOTE: Numbers are rounded to the nearest whole number

How Well Doctors Communicate

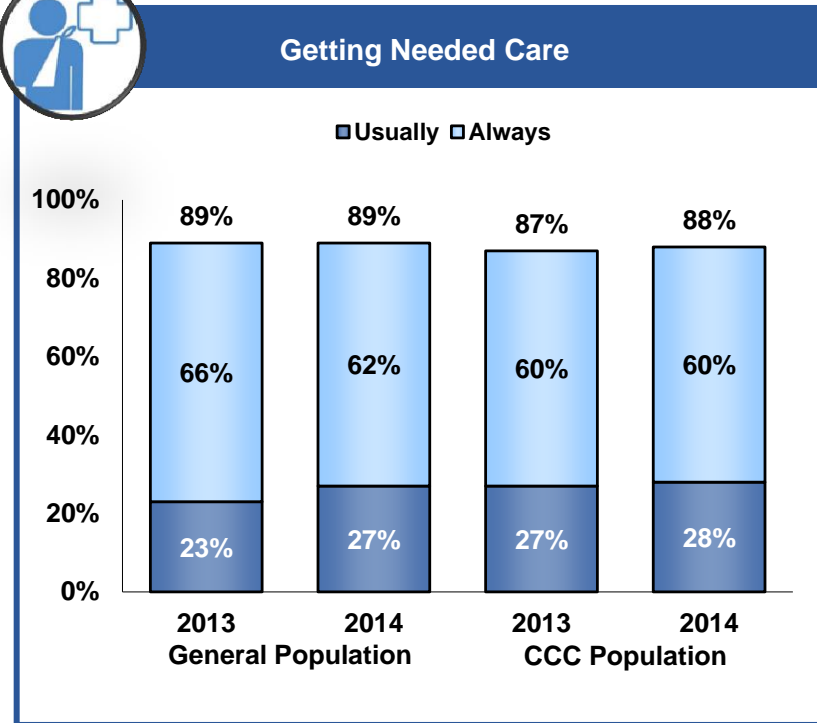
Access to Personal Doctor



Legend: ↑/↓ 2014 statistically higher/lower compared to 2013 results.

NOTE: Numbers are rounded to the nearest whole number

Getting Needed Care Composite



General Population
plan score falls on 75th
or below 90th Percentile

CCC Population plan
score falls on 50th or
below 75th Percentile

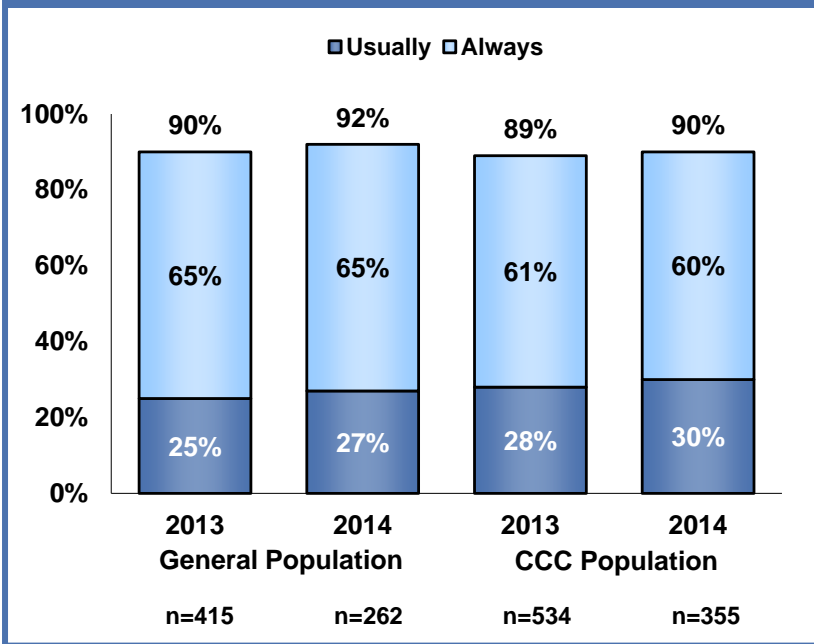
2013 Quality Compass®						
	Mean	10 th	25 th	50 th	75 th	90 th
General Population	84.38	76.58	81.56	84.65	87.85	90.43
CCC Population	86.43	82.41	83.60	86.75	89.85	91.50

NOTE: Numbers are rounded to the nearest whole number

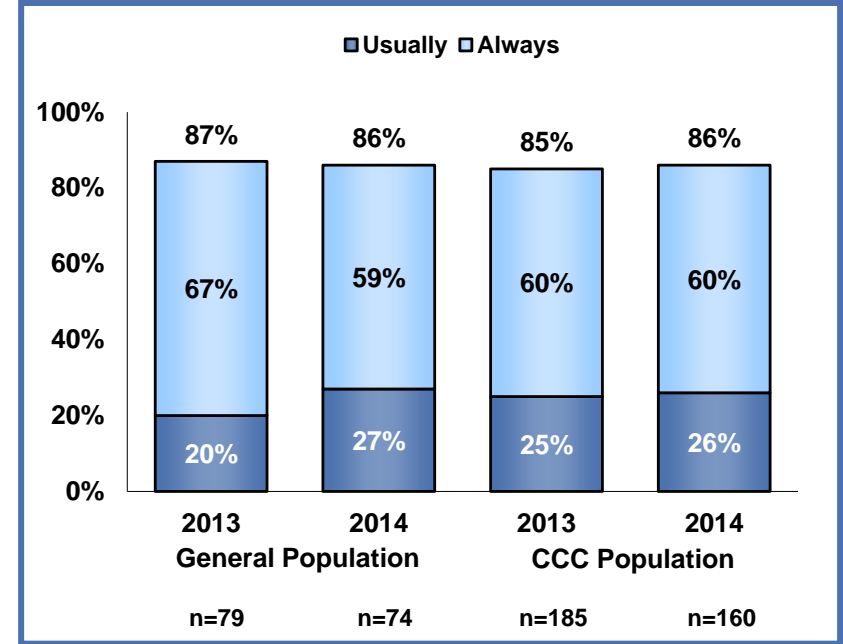
Getting Needed Care

Composite Measures

Q15. Easy to Get Care Believed Necessary for Child



Q46. Easy to Get Appointment for Child with Specialist

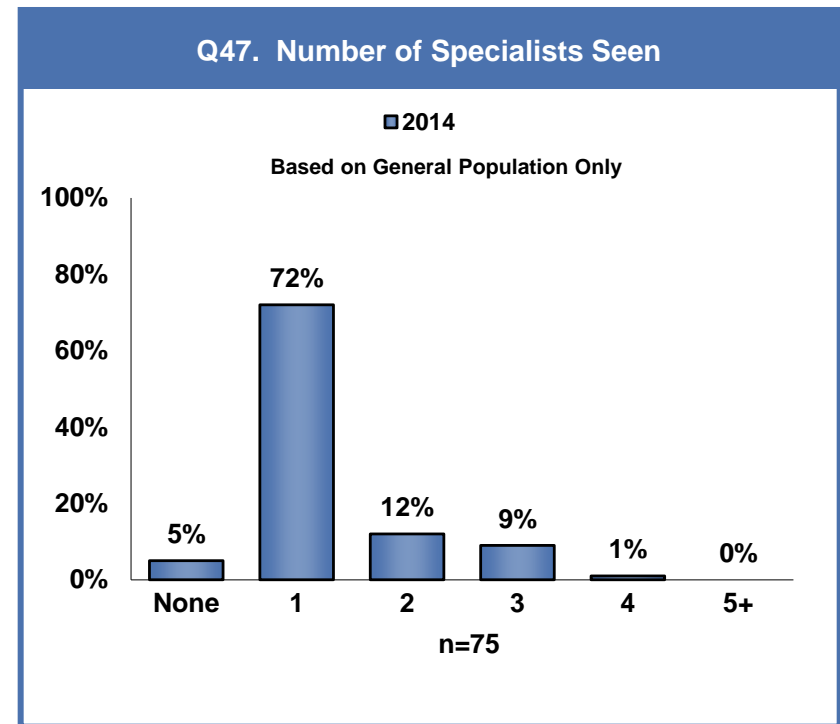
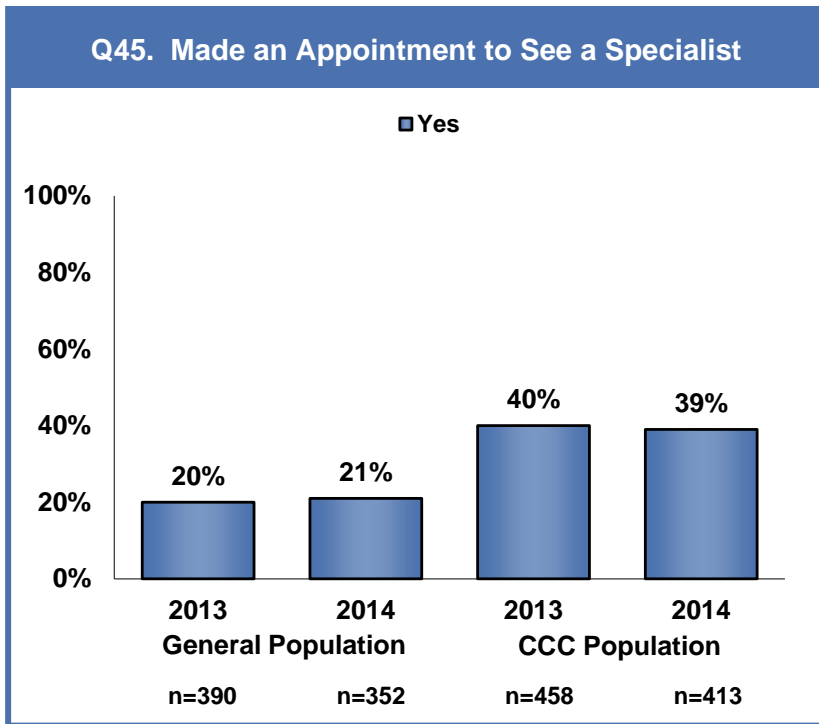


Legend: ↑/↓ 2014 statistically higher/lower compared to 2013 results.

NOTE: Numbers are rounded to the nearest whole number

Getting Needed Care

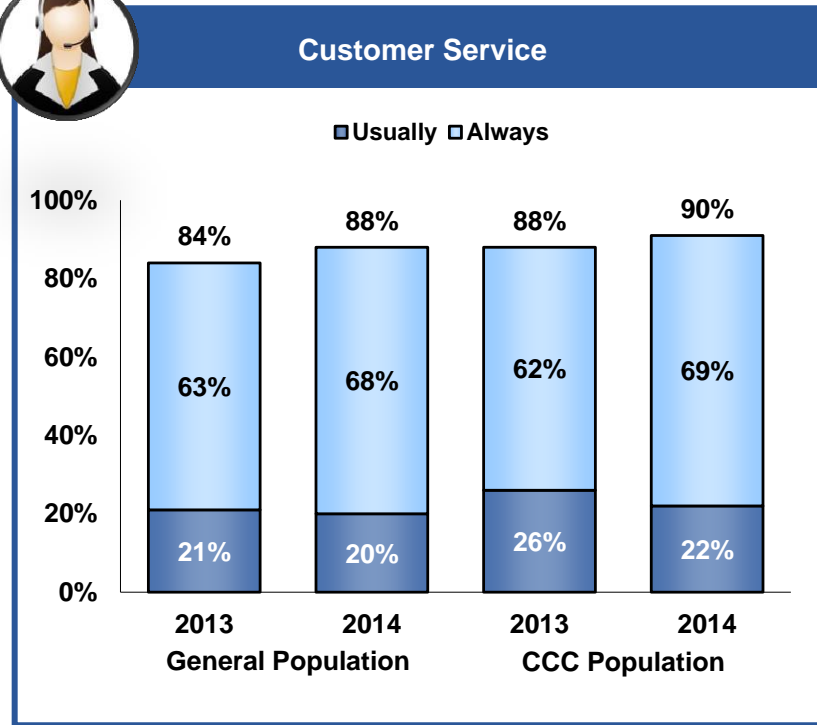
Access to Specialty Care



Legend: ↑/↓ 2014 statistically higher/lower compared to 2013 results.

NOTE: Numbers are rounded to the nearest whole number

Customer Service Composite



General Population plan score falls on 50th or below 75th Percentile

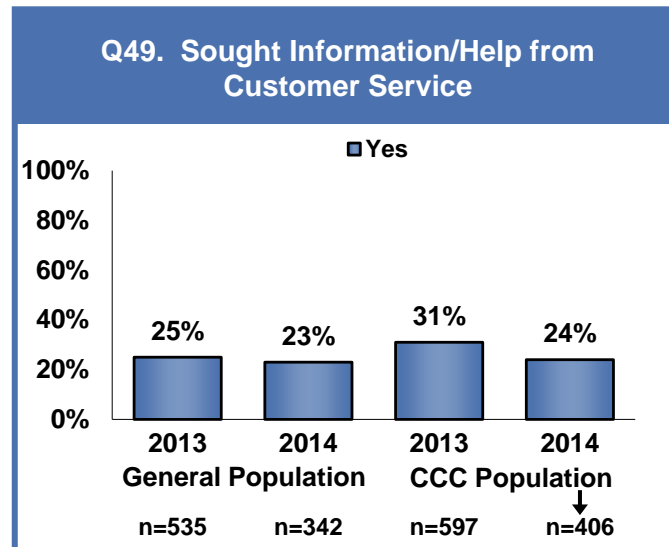
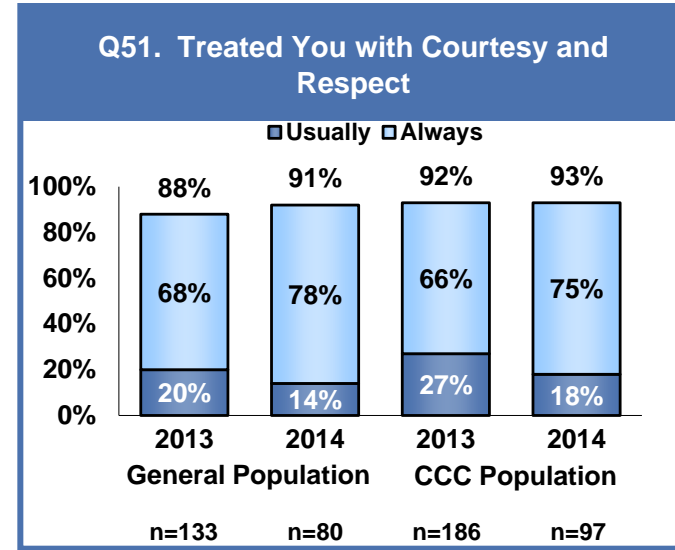
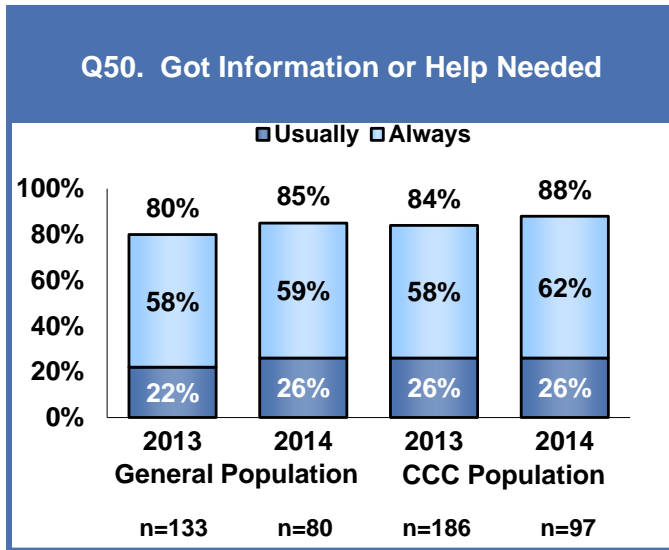
CCC Population plan score falls on 50th or below 75th Percentile

2013 Quality Compass®						
	Mean	10 th	25 th	50 th	75 th	90 th
General Population	87.61	84.29	85.78	87.77	89.70	91.21
CCC Population	88.74	83.57	87.50	88.98	90.40	92.47

NOTE: Numbers are rounded to the nearest whole number

Customer Service

Composite Measures

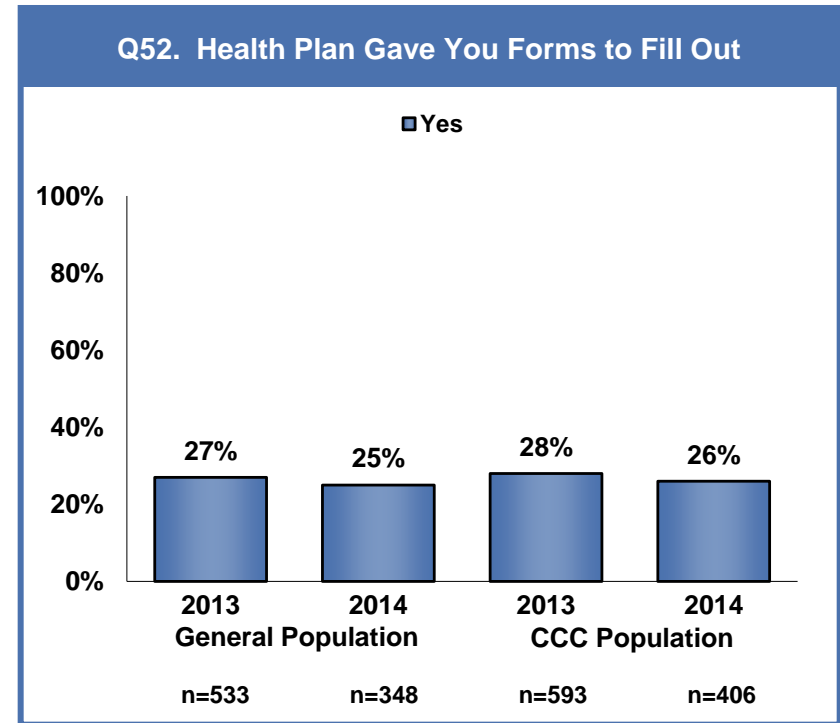
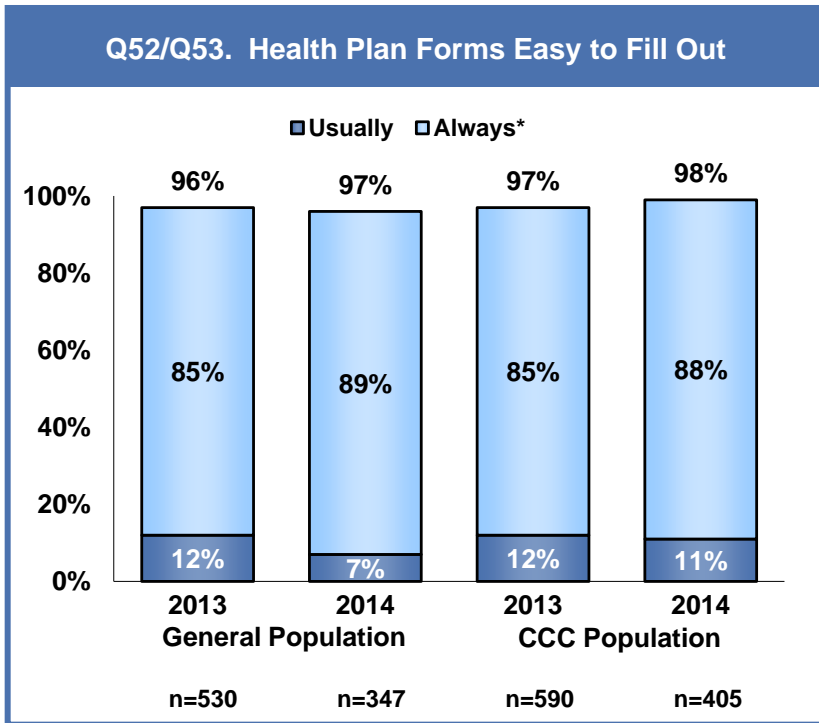


Legend: ↑↓ 2014 statistically higher/lower compared to 2013 results.

NOTE: Numbers are rounded to the nearest whole number

Customer Service

Access to Information and Paperwork



Legend: ↑/↓ 2014 statistically higher/lower compared to 2013 results.
NOTE: Numbers are rounded to the nearest whole number

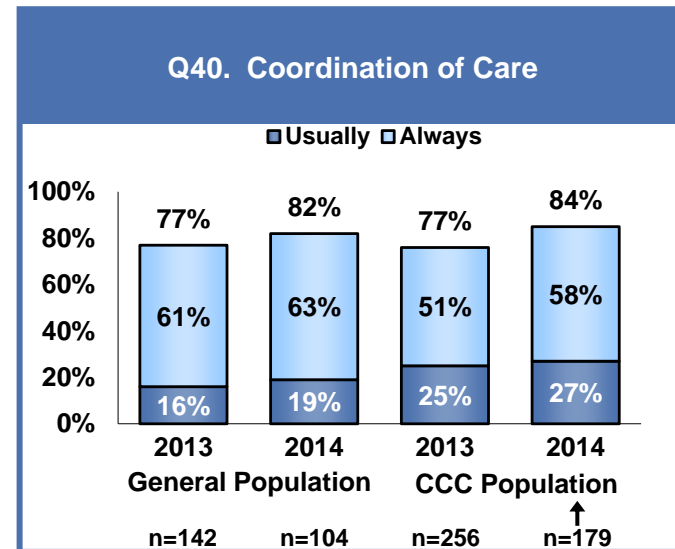
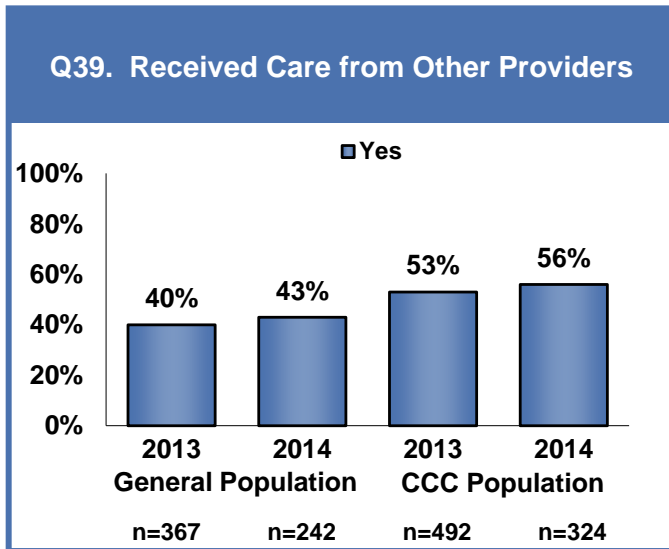
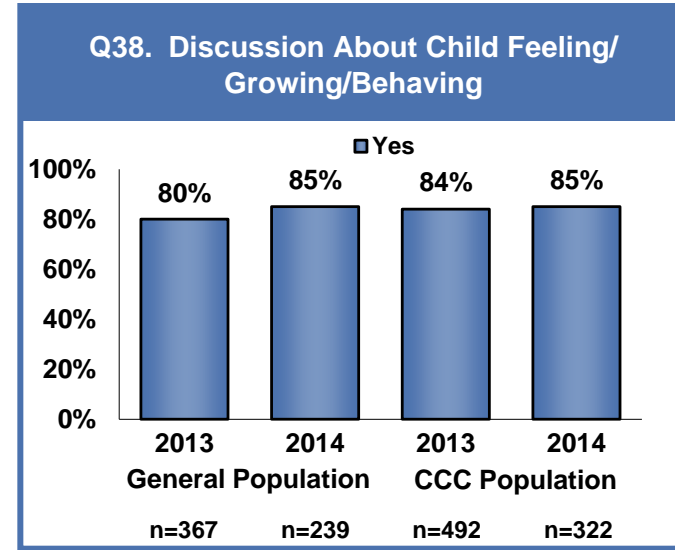
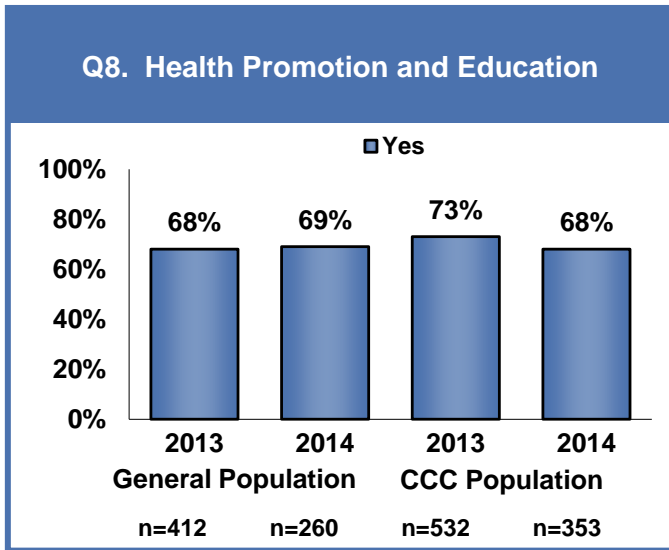
*Q53 includes the No's from Q52.

Other Measures

Health Promotion & Education

Coordination of Care

Health Promotion & Education Coordination of Care

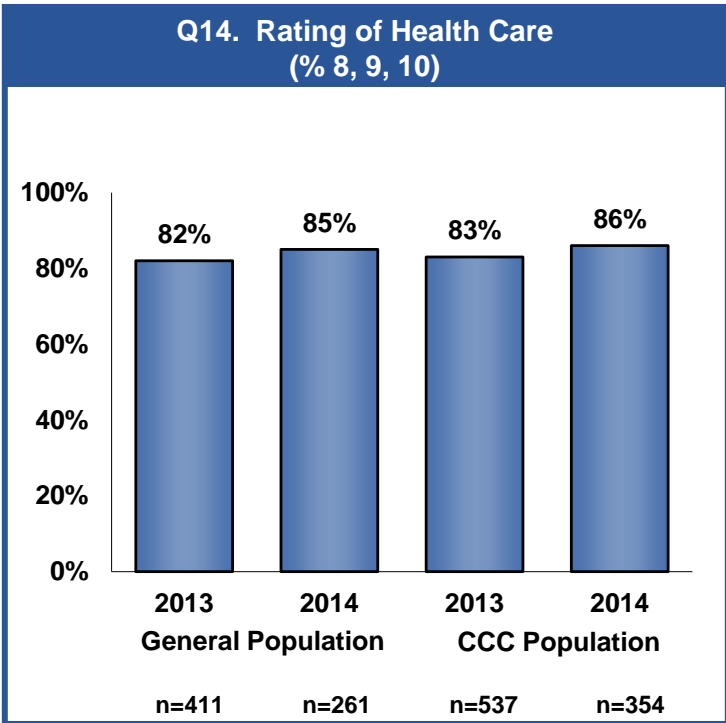


Legend: ↑/↓ 2014 statistically higher/lower compared to 2013 results. NOTE: Numbers are rounded to the nearest whole number

Overall Ratings

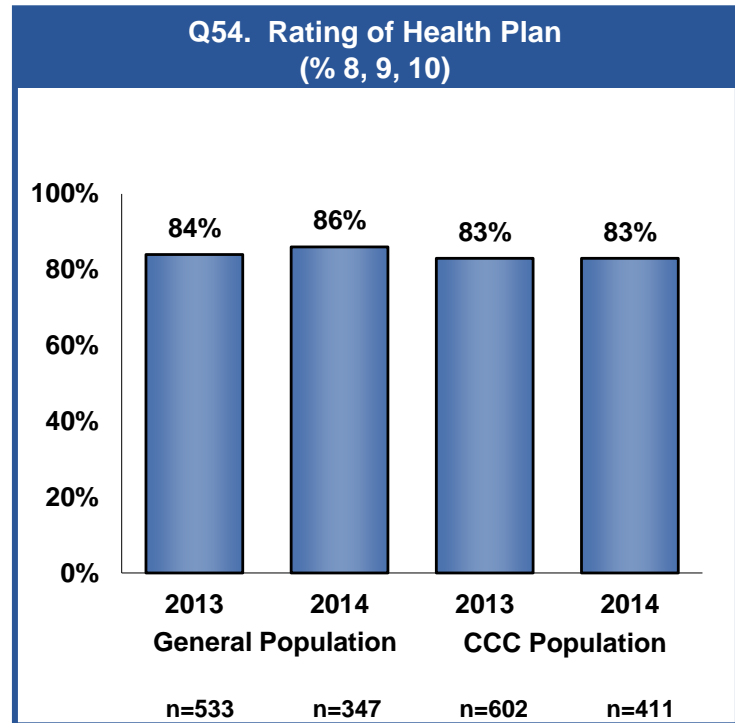


Overall Rating – Health Care & Health Plan



General Population plan score falls on 50th or below 75th Percentile

CCC Population plan score falls on 75th or below 90th Percentile



General Population plan score falls on 50th or below 75th Percentile

CCC Population plan score falls on 50th or below 75th Percentile

2013 Quality Compass®						
	Mean	10 th	25 th	50 th	75 th	90 th
General Population	83.12	78.54	81.30	83.73	85.57	87.04
CCC Population	81.61	75.62	78.60	81.90	84.23	86.67

2013 Quality Compass®						
	Mean	10 th	25 th	50 th	75 th	90 th
General Population	82.89	77.52	80.46	83.49	86.36	88.92
CCC Population	81.07	73.83	77.75	81.98	84.45	87.23

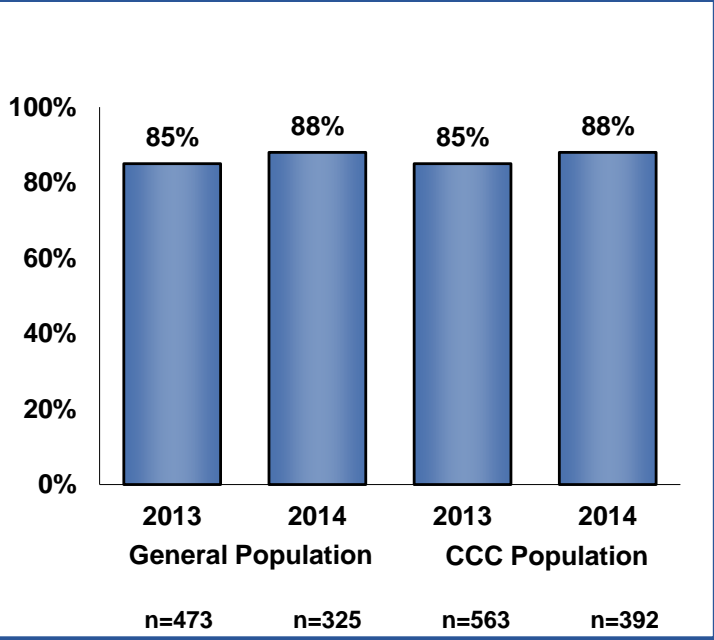
Legend: ↑/↓ 2014 statistically higher/lower compared to 2013 results.
NOTE: Numbers are rounded to the nearest whole number



Overall Rating – Personal Doctor & Specialist



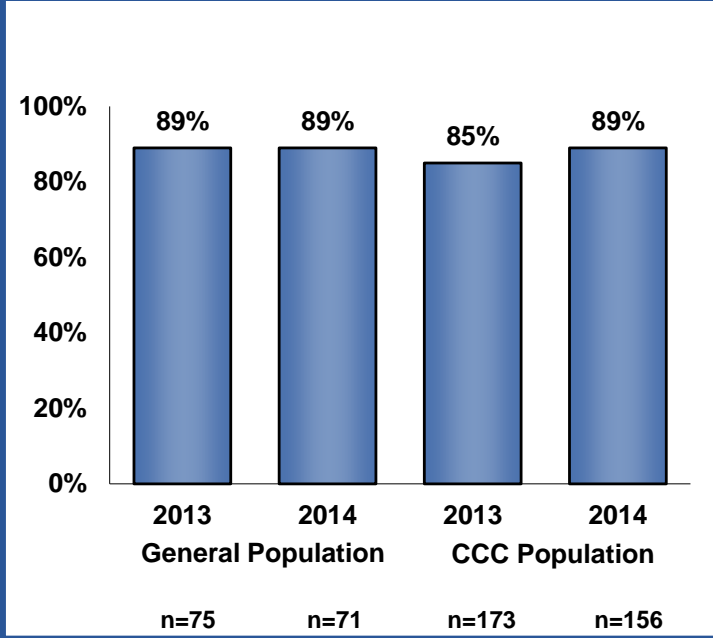
Q41. Rating of Personal Doctor
(% 8, 9, 10)



General Population plan score falls on 50th or below 75th Percentile

CCC Population plan score falls on 50th or below 75th Percentile

Q48. Rating of Specialist
(% 8, 9, 10)



General Population plan score falls on 75th or below 90th Percentile

CCC Population plan score falls on 75th or below 90th Percentile

2013 Quality Compass®

	Mean	10 th	25 th	50 th	75 th	90 th
General Population	87.10	83.57	85.31	86.94	88.77	90.22
CCC Population	86.28	82.65	83.67	86.36	88.56	89.84

2013 Quality Compass®

	Mean	10 th	25 th	50 th	75 th	90 th
General Population	84.52	80.49	82.11	83.96	86.54	89.52
CCC Population	84.97	79.86	82.55	84.51	88.28	89.67

Legend: ↑/↓ 2014 statistically higher/lower compared to 2013 results.
NOTE: Numbers are rounded to the nearest whole number

Detailed Results – CCC Measures

Access to Prescription Medicines

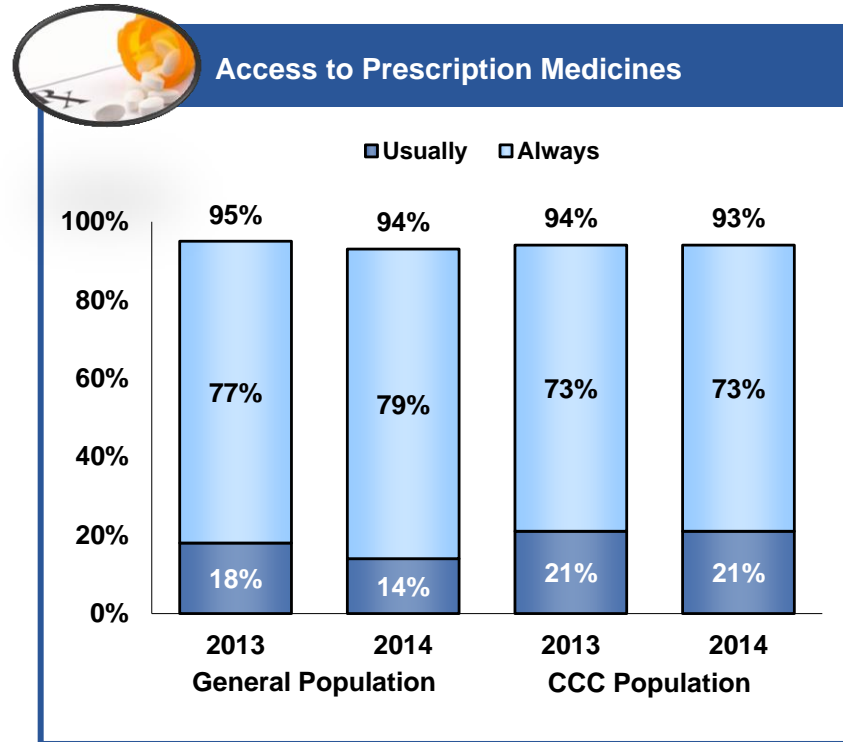
Access to Specialized Services

Family-Centered Care: Personal Doctor Who Knows Child

Family-Centered Care: Getting Needed Information

Coordination of Care for Children with Chronic Conditions

Access to Prescription Medicines



CCC Population plan score falls on 50th or below 75th Percentile

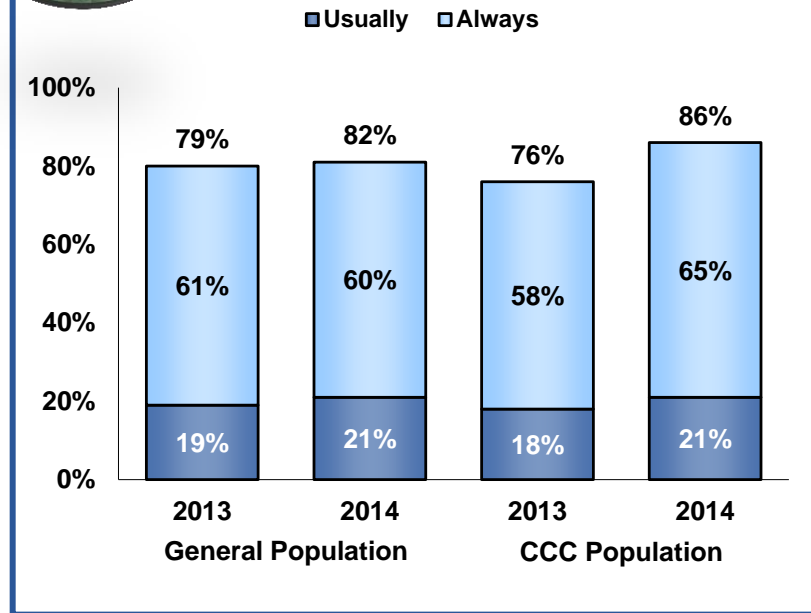
2013 Quality Compass®						
	Mean	10 th	25 th	50 th	75 th	90 th
CCC Population	90.55	86.13	88.64	91.01	93.69	94.93

NOTE: Numbers are rounded to the nearest whole number

Access to Specialized Services Composite



Access to Specialized Services



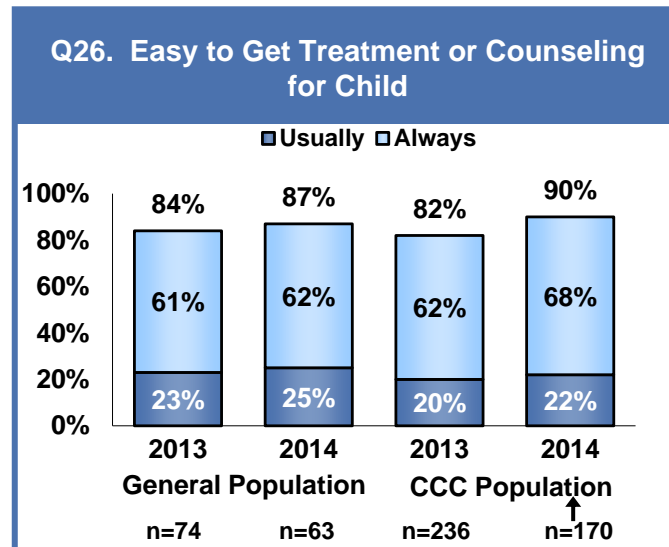
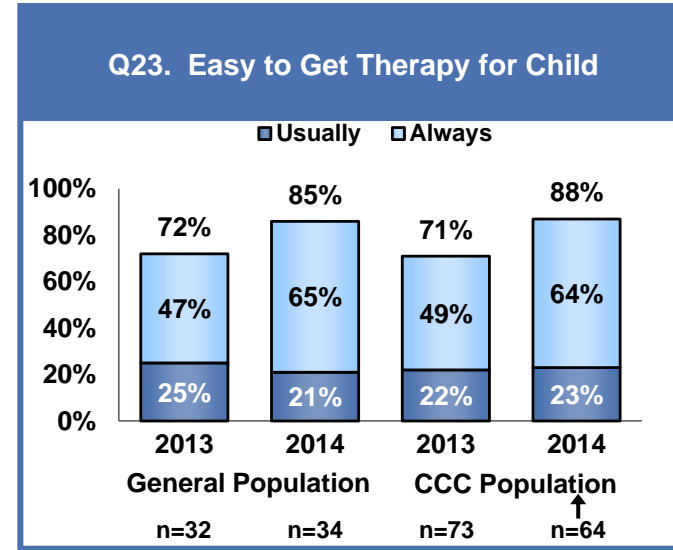
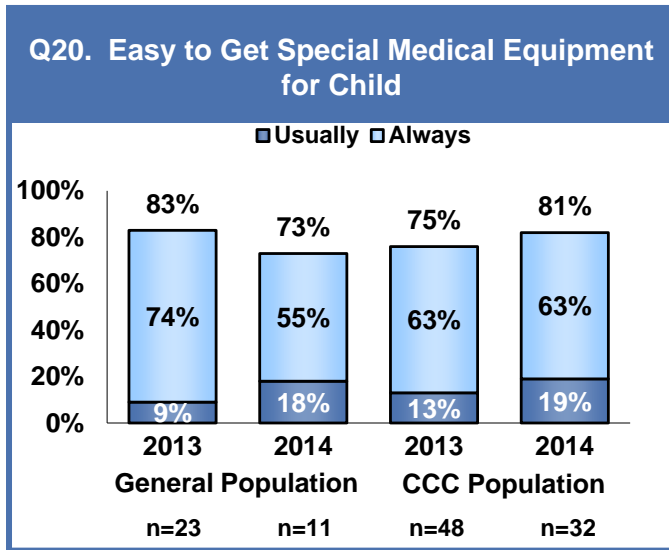
CCC Population plan score falls on or above 90th Percentile

2013 Quality Compass®						
	Mean	10 th	25 th	50 th	75 th	90 th
CCC Population	76.70	67.37	74.95	77.23	80.36	81.78

NOTE: Numbers are rounded to the nearest whole number

Access to Specialized Services

Composite Measures



Legend: ↑/↓ 2014 statistically higher/lower compared to 2013 results.

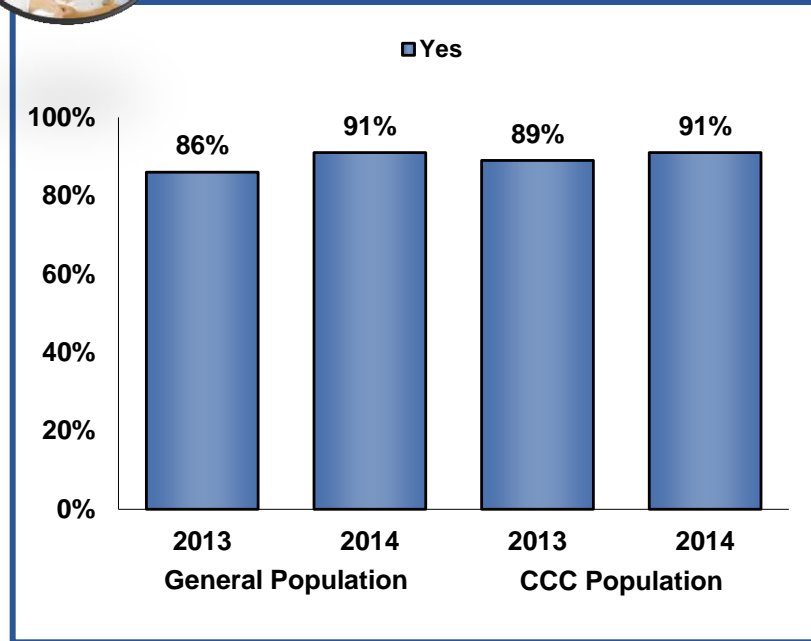
NOTE: Numbers are rounded to the nearest whole number

Family-Centered Care: Personal Doctor Who Knows Child

Composite



**Family-Centered Care:
Personal Doctor Who Knows Child**



CCC Population plan score falls on 50th or below 75th Percentile

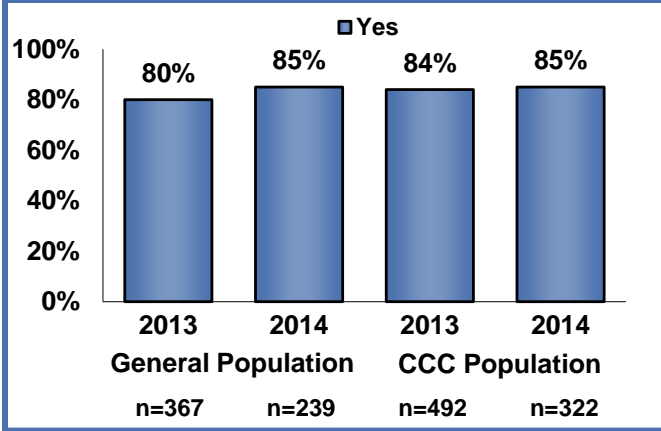
2013 Quality Compass®						
	Mean	10 th	25 th	50 th	75 th	90 th
CCC Population	89.26	86.54	88.34	89.59	90.81	92.11

NOTE: Numbers are rounded to the nearest whole number

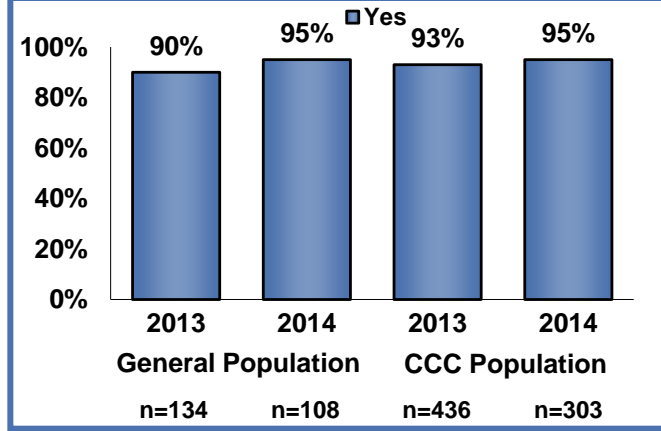
Family-Centered Care: Personal Doctor Who Knows Child

Composite Measures

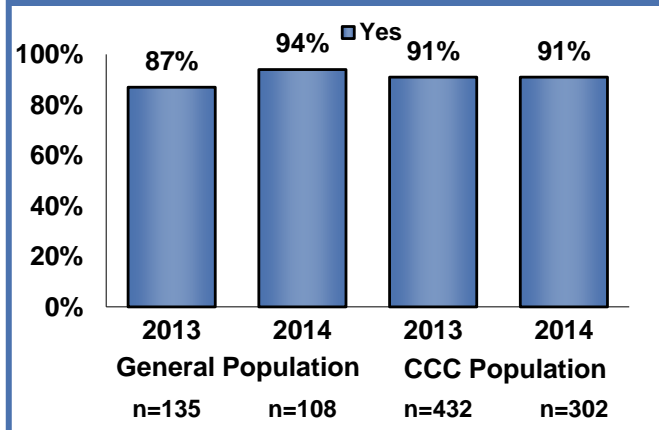
**Q38. Discussion About Child Feeling/
Growing/Behaving**



**Q43. Doctor Understands How Medical
Conditions Affect Child's Day-to-Day Life**



**Q44. Doctor Understands How Medical
Conditions Affect Family's Day-to-Day Life**



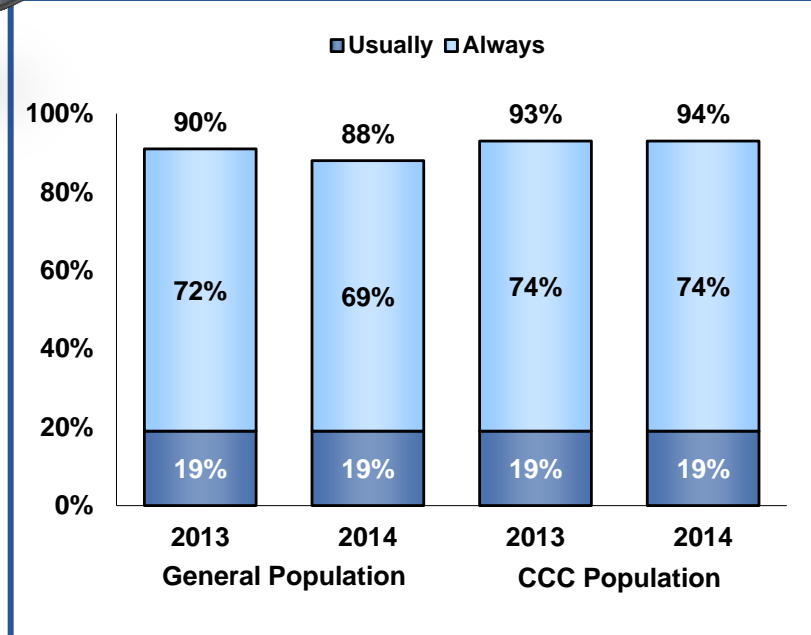
Legend: ↑/↓ 2014 statistically higher/lower compared to 2013 results.

NOTE: Numbers are rounded to the nearest whole number

Family-Centered Care: Getting Needed Information



Family-Centered Care: Getting Needed Information



CCC Population plan score falls on 75th or below 90th Percentile

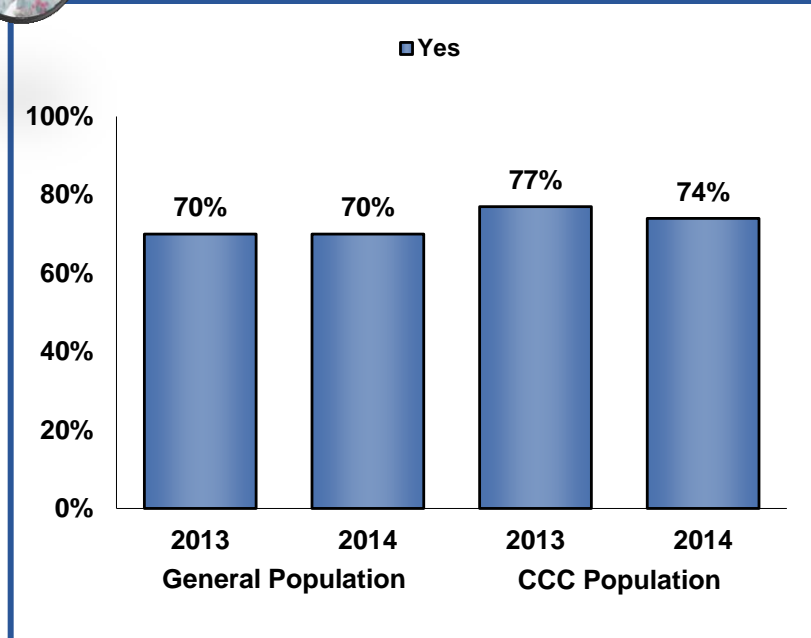
2013 Quality Compass®						
	Mean	10 th	25 th	50 th	75 th	90 th
CCC Population	90.26	85.84	88.84	90.46	92.45	94.05

NOTE: Numbers are rounded to the nearest whole number

Coordination of Care for Children with Chronic Conditions Composite



Coordination of Care for Children with Chronic Conditions



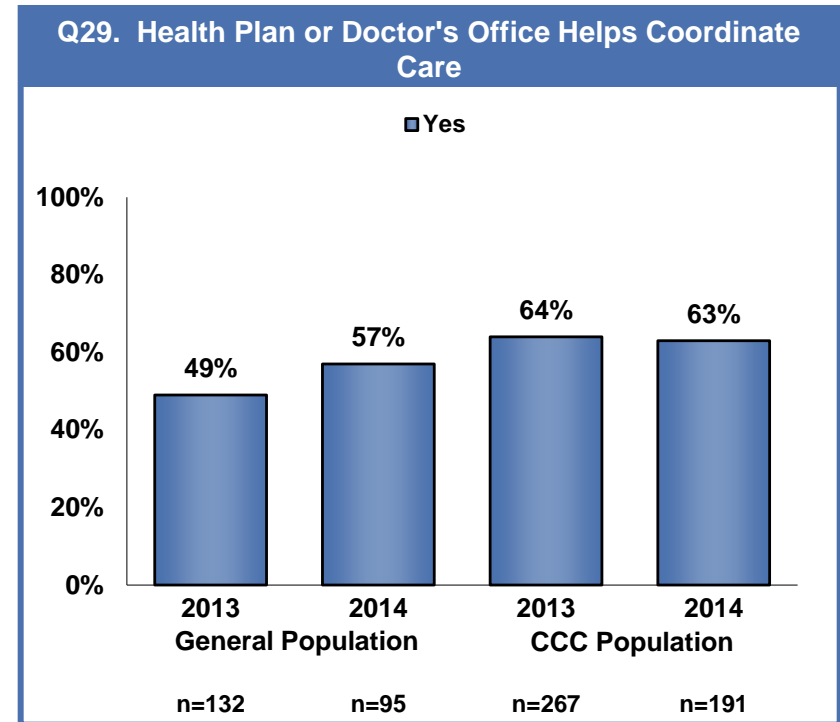
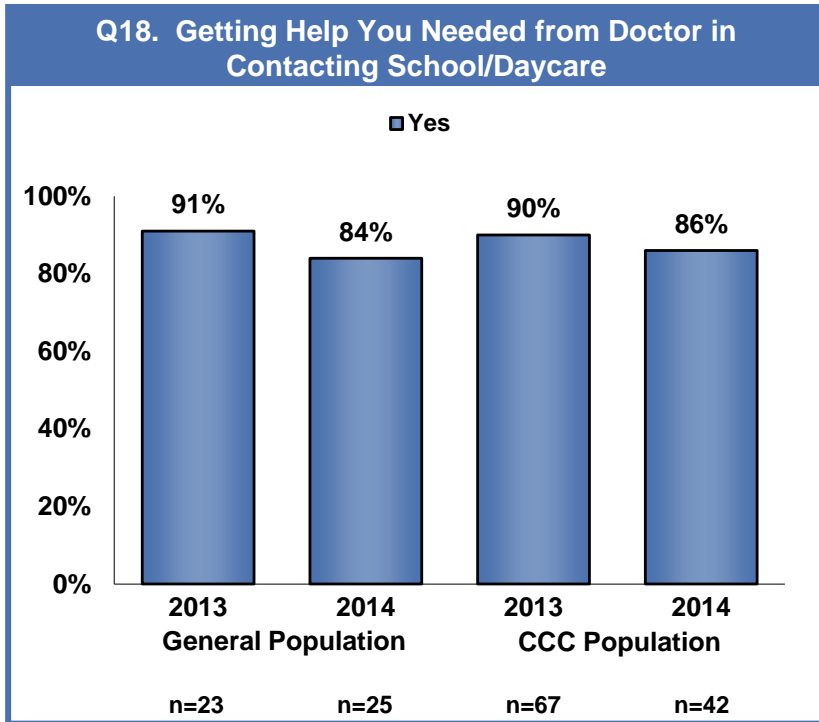
CCC Population plan score falls on 10th or below 25th Percentile

2013 Quality Compass®						
	Mean	10 th	25 th	50 th	75 th	90 th
CCC Population	77.19	72.57	75.06	76.94	80.12	81.44

NOTE: Numbers are rounded to the nearest whole number

Coordination of Care for Children with Chronic Conditions

Composite Measures



Legend: ↑/↓ 2014 statistically higher/lower compared to 2013 results.
NOTE: Numbers are rounded to the nearest whole number

Supplemental Questions



Supplemental Questions – Language Barrier with Doctor

Q81a. In the last 6 months, how often did you have a hard time speaking with or understanding your child's doctors or other health providers because you spoke different languages?

	2013	2014
Always	1%	1%
Usually	1%	1%
Sometimes	7%	7%
Never	91%	90%
	<i>Sample Size: (n=1,179)</i>	<i>(n=823)</i>

Supplemental Questions – Language Spoken at Home

Q81b. What language do you mainly speak at home?

	2013	2014
English	91%	91%
Spanish	8%	8%
Some other language	1%	1%
<i>Sample Size:</i>		
	(n=1,168)	(n=812)

Q81c. What language does your child mainly speak at home?

	2013	2014
English	94%	96%
Spanish	5%	4%
Some other language	1%	1%
<i>Sample Size:</i>		
	(n=1,166)	(n=807)