



MY 2020 CAHPS® Medicaid Child with CCC 5.1H Final Report

Presbyterian Centennial Care



Presbyterian Centennial Care

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SPH Analytics (SPH), a National Committee for Quality Assurance (NCQA) certified HEDIS[®] Survey Vendor, was selected by Presbyterian Centennial Care to conduct its MY 2020 CAHPS[®] 5.1H Medicaid Child with CCC Survey (with CCC Measurement set). NCQA requires health plans to submit CAHPS survey results in compliance with HEDIS[®] accreditation requirements.

SURVEY OBJECTIVE The overall objective of the CAHPS[®] 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.

2021 NCQA CHANGES NCQA is using AHRQ's new 5.1 version of the CAHPS survey for 2021. These modified HEDIS CAHPS surveys include minor changes to some of the instructions and survey items to indicate the different ways in which patients may be receiving care: in person or via **telehealth**.

There are no new questions on the 5.1 version, but existing questions have been modified so that respondents know they should include telehealth visits as an appointment type as they respond to the survey. For instance, the introductory language to a section now reads:

➤ *“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.”*

This new wording about care “in person, by phone or by video” has been added to appropriate questions and introductions throughout the survey.




Your Strategic Account Executive for this project is Roseann Carothers (817-665-7031) and your Project Manager is Jennifer Brown (248-737-3246). Should you have any questions or comments regarding any aspect of the survey or reporting process, please feel free to call either your Strategic Account Executive or your Project Manager.

- The CAHPS 5.1H Medicaid Child – Children with Chronic Conditions Survey assesses the experience of care for the general population of children and the population of children with chronic conditions (CCC). These conditions include relatively common conditions like asthma, as well as rare conditions, such as juvenile diabetes and Muscular Dystrophy.
- Children with chronic conditions represent a relatively small proportion of the overall child population. To achieve a sufficient number of complete surveys for CCC results to be calculated, a supplemental sample of children who are more likely to have a chronic condition, based on claims experience, is selected and added to the standard CAHPS® 5.1H Child Survey sample (General Population). After the General Population sample is pulled, the supplemental sample is pulled based on a prescreen sample code. The NCQA required total sample size is 3,490 (1,650 General Population + 1,840 supplemental sample), although plans may choose to oversample their population if necessary.
- NCQA defines the member as having a chronic condition through a survey-based screening tool. The CCC screening tool contains five sections representing five different health conditions. A child member is identified as having a chronic condition if all questions for at least one specific health consequence are answered “Yes.”
- It cannot be determined which respondents out of the total sample qualify as having a chronic condition. Given that a denominator for this equation cannot be determined, there is no response rate provided for the CCC Population. You will see the Response Rate for the Total Population and General Population on the following page, along with additional details for the General Population sample.
- As of 2020, NCQA no longer produces general population results for the CCC population and no longer produces CCC results for the general population. Therefore, results shown throughout this report are for the General Population unless specifically labeled as CCC Population.

SPH administered the MY 2020 Medicaid Child with CCC 5.1H CAHPS survey using an NCQA approved methodology. Surveys were collected via a mail, phone, and internet methodology. Members eligible for the survey were **parents of those 17 years and younger (as of December 31 of the measurement year) who were continuously enrolled in the plan for at least five of the last six months of the measurement year.** A synopsis of the data collection methodology is outlined below:



VALID SURVEYS (GENERAL POPULATION)

-  Total Number of Mail Completes = 128 (16 in Spanish)
-  Total Number of Phone Completes = 99 (8 in Spanish)
-  Total Number of Internet Completes = 21 (0 in Spanish)

Number of undeliverables: 269

2021 RESPONSE RATE (GENERAL POPULATION)

$$\text{Response Rate} = \frac{\text{Completed}}{\text{Sample size} - \text{Ineligible members}}$$

$$\frac{128 \text{ (Mail)} + 99 \text{ (Phone)} + 21 \text{ (Internet)} = 248}{2310 \text{ (Sample)} - 10 \text{ (Ineligible)} = 2300} = 10.8\%$$

RESPONSE RATE COMPARISON

The 2021 SPH Analytics Book of Business average response rate is **12.6%**.

GENERAL POPULATION		2019	2020	2021
Complete	Completed Survey	390	313	248
	SUBTOTAL	390	313	248
Ineligible	Does not Meet Eligibility Criteria (01)	7	9	3
	Language Barrier (03)	46	6	7
	Mentally/Physically Incapacitated (04)	0	0	0
	Deceased (05)	0	0	0
	SUBTOTAL	53	15	10
Non-Response	Break-off/Incomplete (02)	40	32	21
	Refusal (06)	9	112	41
	Maximum Attempts Made (07)	1815	1836	1990
	Added to DNC List (08)	3	2	0
	SUBTOTAL	1867	1982	2052
TOTAL		2310	2310	2310
OVERSAMPLING %		40.0%	40.0%	40.0%
Total Sample Size (General Pop + CCC)		4150	4150	4150
Total Completes (General Pop + CCC)		691	566	485
Total Response Rate (General Pop + CCC)		17.0%	13.7%	11.7%
General Population Sample Size		2310	2310	2310
General Population Response Rate		17.3%	13.6%	10.8%
Supplemental (CCC) Sample Size		1840	1840	1840
Supplemental (CCC) Completes		233	189	146

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.



Executive Summary



- Presbyterian Centennial Care

Overview of Terms

Summary Rates are defined by NCQA in its HEDIS MY 2020 CAHPS® 5.1H guidelines and generally represent the most favorable response percentages.

		No	Yes	
Never	Sometimes	Usually	Always	

Rating questions are typically displayed with two Summary Rates:

0	1	2	3	4	5	6	7	8	9	10
0	1	2	3	4	5	6	7	8	9	10

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.

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.

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

NCQA BENCHMARK INFORMATION

The source for data contained in this publication is Quality Compass® All Plans 2020. 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.

COVID-19 IMPACT

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

LEGACY DSS / MORPACE / SPH

For the 2020 reporting, the Analytics team reviewed all calculations and statistics to determine the best go forward strategy for SPH Analytics. Some historical calculations were updated to align with those decisions. As such, there are instances where a trend score from 2019 might be slightly different from historical reports.

Dashboard - 2021 Key Findings - General Population

TRENDING

Key measures that had significantly higher or lower scores compared to last year

MEASURE NAME	Trending
Getting Care Quickly (% Always or Usually)	
Q6. Getting routine care	↓



248 / 10.8%

Completed surveys / Response Rate

MEASURE NAME	2021 SCORE	ESTIMATED NCQA RATING
Rating of Health Plan (% 9 or 10)	74.3%	★ ★ ★
Rating of Health Care (% 9 or 10)	71.8%	★ ★ ★
Rating of Personal Doctor (% 9 or 10)	79.4%	★ ★ ★
Rating of Specialist (% 9 or 10)	68.8%	NA [^]
Getting Needed Care (% Always or Usually)	86.2%	NA [^]
Getting Care Quickly (% Always or Usually)	84.8%	NA [^]
Coordination of Care (% Always or Usually)	92.5%	NA [^]

SatisAction™ KEY DRIVER STATISTICAL MODEL Key Drivers Of The Rating Of The Health Plan

POWER

Promote and Leverage Strengths

Q48	Easy to fill out forms
Q41	Got specialist appt.
Q36	Personal doctor overall
Q28	Dr. listened carefully

OPPORTUNITIES

Focus Resources on Improving Processes That Underlie These Items

Q43	Specialist overall
Q10	Got care/tests/treatment
Q9	Health care overall
Q79	Satisfied with help to coordinate care
Q27	Dr. explained things

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

Please refer to slide 17 for details.



SPH Book of Business Trends - General Population

COVID-19 Impact The pandemic caused significant disruption throughout most of 2020 and continuing into 2021. Therefore, it is best to interpret trend results with a degree of caution. Survey results from 2020 may have been impacted for some health plans because of the pandemic. SPH Analytics monitors industry trends in measure scores. 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 three years. We chose to display the SPH Book of Business since we have 2021 results at the time this report was published.

Trend Highlights Overall, Medicaid Child scores have remained stable over the last two years. Getting routine care, however, has seen a dramatic drop in score, likely due to the COVID-19 Pandemic.

	SPH Book of Business Trends (Medicaid Child)		
	2019	2020	2021
Rating Questions (% 9 or 10)			
Q49. Rating of Health Plan	72.2%	73.0%	73.3%
Q9. Rating of Health Care	71.1%	73.0%	74.4%
Q36. Rating of Personal Doctor	77.6%	79.1%	78.6%
Q43. Rating of Specialist	73.2%	75.0%	75.7%
Rating Questions (% 8, 9 or 10)			
Q49. Rating of Health Plan	86.9%	87.5%	87.3%
Q9. Rating of Health Care	88.3%	88.7%	88.7%
Q36. Rating of Personal Doctor	90.6%	91.2%	90.8%
Q43. Rating of Specialist	87.2%	88.2%	88.2%
Getting Needed Care (% Always or Usually)			
Q10. Getting care, tests, or treatment	90.1%	90.8%	90.8%
Q41. Getting specialist appointment	80.3%	80.4%	82.4%
Getting Care Quickly (% Always or Usually)			
Q4. Getting urgent care	91.9%	91.7%	91.7%
Q6. Getting routine care	88.6%	89.3%	83.8%
Coordination of Care (Q35) (% Always or Usually)			
	84.2%	85.0%	84.9%

Measure Summary - General Population

Health Plan Domain Performance

Your plan's performance on measures that are typically considered to be in the domain of the health plan.

MEASURE	SUMMARY RATE		CHANGE	2021 SPH GP BENCHMARK		2020 QC GP BENCHMARK	
	2020	2021		SUMMARY RATE	PERCENTILE RANK	SUMMARY RATE	PERCENTILE RANK
Rating of Health Plan (% 9 or 10)	70.4%	74.3%	3.9%	73.3%	50 th	71.9%	62 nd
Rating of Health Plan (% 8, 9 or 10)	87.3%	88.2%	0.9%	87.3%	52 nd	86.5%	60 th
Getting Needed Care (% Always or Usually)	85.2%	86.2%	1.0%	86.6%	42 nd	86.0%	47 th
Customer Service (% Always or Usually)	92.0%	93.9%	1.9%	88.3%	96 th	88.8%	97 th
Ease of Filling Out Forms (% Always or Usually)	96.7%	98.0%	1.3%	96.0% ▲	90 th	96.5%	81 st

KEY TAKEAWAYS

Your overall Rating of Health Plan (9-10) Summary Rate score is 74.3% and represents a change of 3.9% from 2020.

Note: Please refer to benchmark descriptions on slide 44.

Significance Testing

Current year score is significantly higher than the 2020 score (↑) or benchmark score (▲).
 Current year score is significantly lower than the 2020 score (↓) or benchmark score (▼).

Measure Summary - General Population

Health Care Domain Performance

Your plan's performance on measures that are typically considered to be in the provider health care domain.

MEASURE	SUMMARY RATE		CHANGE	2021 SPH GP BENCHMARK		2020 QC GP BENCHMARK	
	2020	2021		SUMMARY RATE	PERCENTILE RANK	SUMMARY RATE	PERCENTILE RANK
Rating of Health Care (% 9 or 10)	71.3%	71.8%	0.5%	74.4%	30 th	71.9%	45 th
Rating of Health Care (% 8, 9 or 10)	87.8%	85.5%	-2.3%	88.7%	18 th	88.0%	21 st
Getting Care Quickly (% Always or Usually)	87.9%	84.8%	-3.1%	87.8%	25 th	90.5%	9 th
How Well Doctors Communicate (% Always or Usually)	95.5%	94.9%	-0.6%	94.5%	54 th	95.3%	38 th
Coordination of Care (% Always or Usually)	81.7%	92.5%	10.8%	84.9%	91 st	86.1%	100 th
Rating of Personal Doctor (% 9 or 10)	83.4%	79.4%	-4.0%	78.6%	58 th	78.6%	52 nd
Rating of Personal Doctor (% 8, 9 or 10)	91.1%	92.3%	1.2%	90.8%	71 st	90.9%	71 st
Rating of Specialist (% 9 or 10)	78.7%	68.8%	-9.9%	75.7%	15 th	73.4%	14 th
Rating of Specialist (% 8, 9 or 10)	87.2%	81.3%	-5.9%	88.2%	11 th	87.0%	<5 th

KEY TAKEAWAYS

Your overall Rating of Health Care (9-10) Summary Rate score is 71.8% and represents a change of 0.5% from 2020.

Note: Please refer to benchmark descriptions on slide 44.

Significance Testing

Current year score is significantly higher than the 2020 score (↑) or benchmark score (▲).
 Current year score is significantly lower than the 2020 score (↓) or benchmark score (▼).

Measure Summary - CCC Population

Health Plan Domain Performance

Your plan's performance on measures that are typically considered to be in the domain of the health plan.

MEASURE	SUMMARY RATE		CHANGE	2021 SPH CCC BENCHMARK		2020 QC CCC BENCHMARK	
	2020	2021		SUMMARY RATE	PERCENTILE RANK	SUMMARY RATE	PERCENTILE RANK
Rating of Health Plan (% 9 or 10)	70.1%	71.3%	1.2%	71.9%	44 th	69.3%	55 th
Rating of Health Plan (% 8, 9 or 10)	85.0%	83.9%	-1.1%	85.9%	31 st	84.8%	34 th
Getting Needed Care (% Always or Usually)	83.6%	84.2%	0.6%	88.3%	16 th	88.1%	16 th
Customer Service (% Always or Usually)	90.2%	88.9%	-1.3%	90.2%	31 st	90.3%	37 th
Ease of Filling Out Forms (% Always or Usually)	97.8%	97.9%	0.1%	95.9%	93 rd	96.4%	81 st

KEY TAKEAWAYS

Your overall Rating of Health Plan (9-10) Summary Rate score is 71.3% and represents a change of 1.2% from 2020.

Note: Please refer to benchmark descriptions on slide 44.

Significance Testing

Current year score is significantly higher than the 2020 score (↑) or benchmark score (▲).
 Current year score is significantly lower than the 2020 score (↓) or benchmark score (▼).

Measure Summary - CCC Population

Health Care Domain Performance

Your plan's performance on measures that are typically considered to be in the provider health care domain.

MEASURE	SUMMARY RATE		CHANGE	2021 SPH CCC BENCHMARK		2020 QC CCC BENCHMARK	
	2020	2021		SUMMARY RATE	PERCENTILE RANK	SUMMARY RATE	PERCENTILE RANK
Rating of Health Care (% 9 or 10)	67.2%	69.6%	2.4%	73.0%	25 th	71.0%	38 th
Rating of Health Care (% 8, 9 or 10)	84.3%	80.4%	-3.9%	87.3%	<5 th	87.6%	<5 th
Getting Care Quickly (% Always or Usually)	86.9%	89.0%	2.1%	91.1%	25 th	93.5%	9 th
How Well Doctors Communicate (% Always or Usually)	96.0%	96.5%	0.5%	94.9%	80 th	95.8%	60 th
Coordination of Care (% Always or Usually)	80.0%	79.2%	-0.8%	83.1%	13 th	85.1%	13 th
Rating of Personal Doctor (% 9 or 10)	75.4%	82.4%	7.0%	78.8%	75 th	78.4%	83 rd
Rating of Personal Doctor (% 8, 9 or 10)	90.1%	91.2%	1.1%	89.8%	63 rd	90.1%	64 th
Rating of Specialist (% 9 or 10)	80.0%	69.8%	-10.2%	75.7%	18 th	75.2%	11 th
Rating of Specialist (% 8, 9 or 10)	87.7%	83.0%	-4.7%	88.1%	14 th	87.9%	7 th

Note: Please refer to benchmark descriptions on slide 44.

Significance Testing

Current year score is significantly higher than the 2020 score (↑) or benchmark score (▲).
 Current year score is significantly lower than the 2020 score (↓) or benchmark score (▼).

KEY TAKEAWAYS

Your overall Rating of Health Care (9-10) Summary Rate score is 69.6% and represents a change of 2.4% from 2020.

Measure Summary - CCC Population

CCC Measures Performance

Your plan's performance on measures that have emphasis on the CCC population.

MEASURE	SUMMARY RATE		CHANGE	2021 SPH CCC BENCHMARK		2020 QC CCC BENCHMARK	
	2020	2021		SUMMARY RATE	PERCENTILE RANK	SUMMARY RATE	PERCENTILE RANK
Access to Prescription Medicines (% Always or Usually)	91.2%	93.3%	2.1%	91.8%	70 th	91.3%	69 th
Access to Specialized Services (% Always or Usually)	77.2%	86.4%	9.2%	75.6% ▲	98 th	74.5% ▲	100 th
Family-Centered Care: Personal Doctor Who Knows Child (% Yes)	94.0%	91.3%	-2.7%	91.5%	45 th	91.6%	36 th
Family-Centered Care: Getting Needed Information (% Always or Usually)	92.6%	90.2%	-2.4%	91.4%	33 rd	93.1%	6 th
Coordination of Care for CCC (% Yes)	74.1%	71.1%	-3.0%	76.6%	18 th	76.4%	<5 th

Note: Please refer to benchmark descriptions on slide 44.

Significance Testing

Current year score is significantly higher than the 2020 score (↑) or benchmark score (▲).
 Current year score is significantly lower than the 2020 score (↓) or benchmark score (▼).

Gap Analysis - General Population - 2020 Quality Compass

GAP ANALYSIS

Two scores can be used to evaluate a plan's performance gap – Achieved Max Score or Theoretical Max Score.

Achieved Max Score Gap – The spread between your plan's score and the highest score achieved by a plan within the 2020 Quality Compass (100th Percentile).

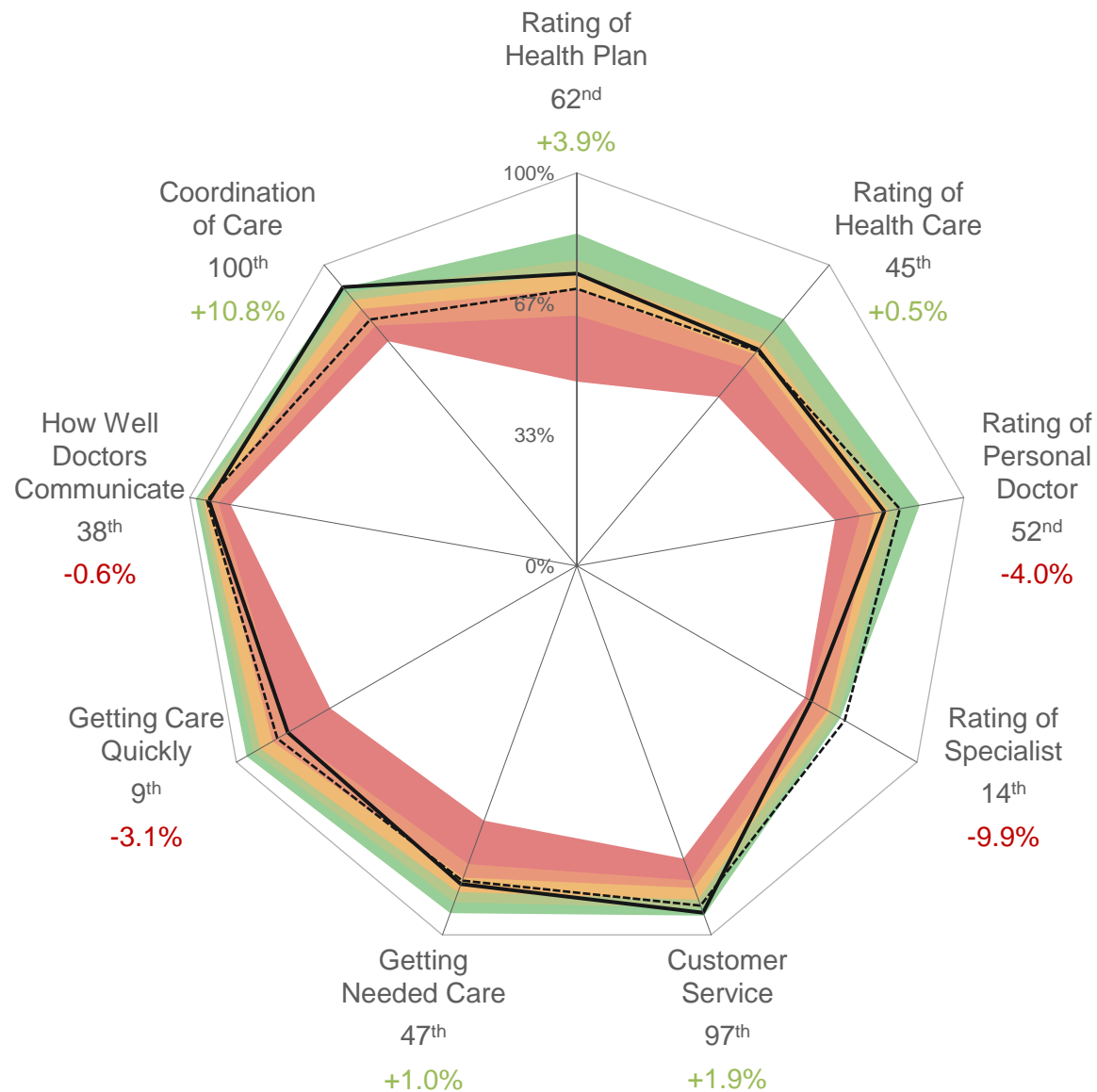
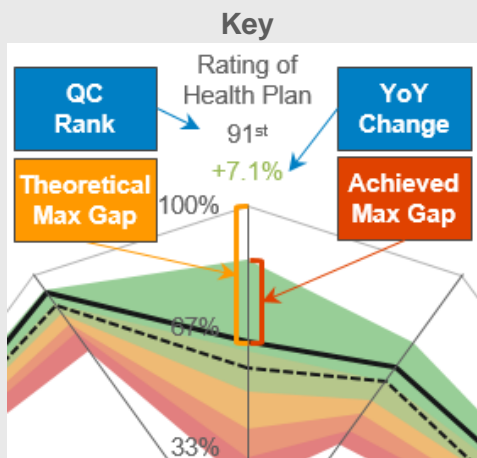
Displayed by the outer bound of the dark green section of the graph.

Theoretical Max Score Gap – The spread between your plan's score and the highest possible score a plan could achieve (100%).

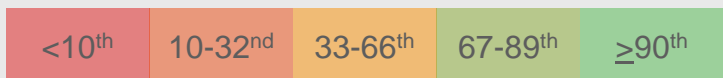
Displayed by the outer bound of the graph.

For each measure, your plan's 2021 and 2020 scores are plotted against the 2020 Quality Compass distribution.

Your plan's 2021 percentile ranking based on the 2020 Quality Compass along with the change in score from 2020 is reported on the outer edge of the graph.



2020 Quality Compass Thresholds



— 2021 Score
 --- 2020 Score

Gap Analysis - CCC Population - 2020 Quality Compass

GAP ANALYSIS

Two scores can be used to evaluate a plan's performance gap – Achieved Max Score or Theoretical Max Score.

Achieved Max Score Gap – The spread between your plan's score and the highest score achieved by a plan within the 2020 Quality Compass (100th Percentile).

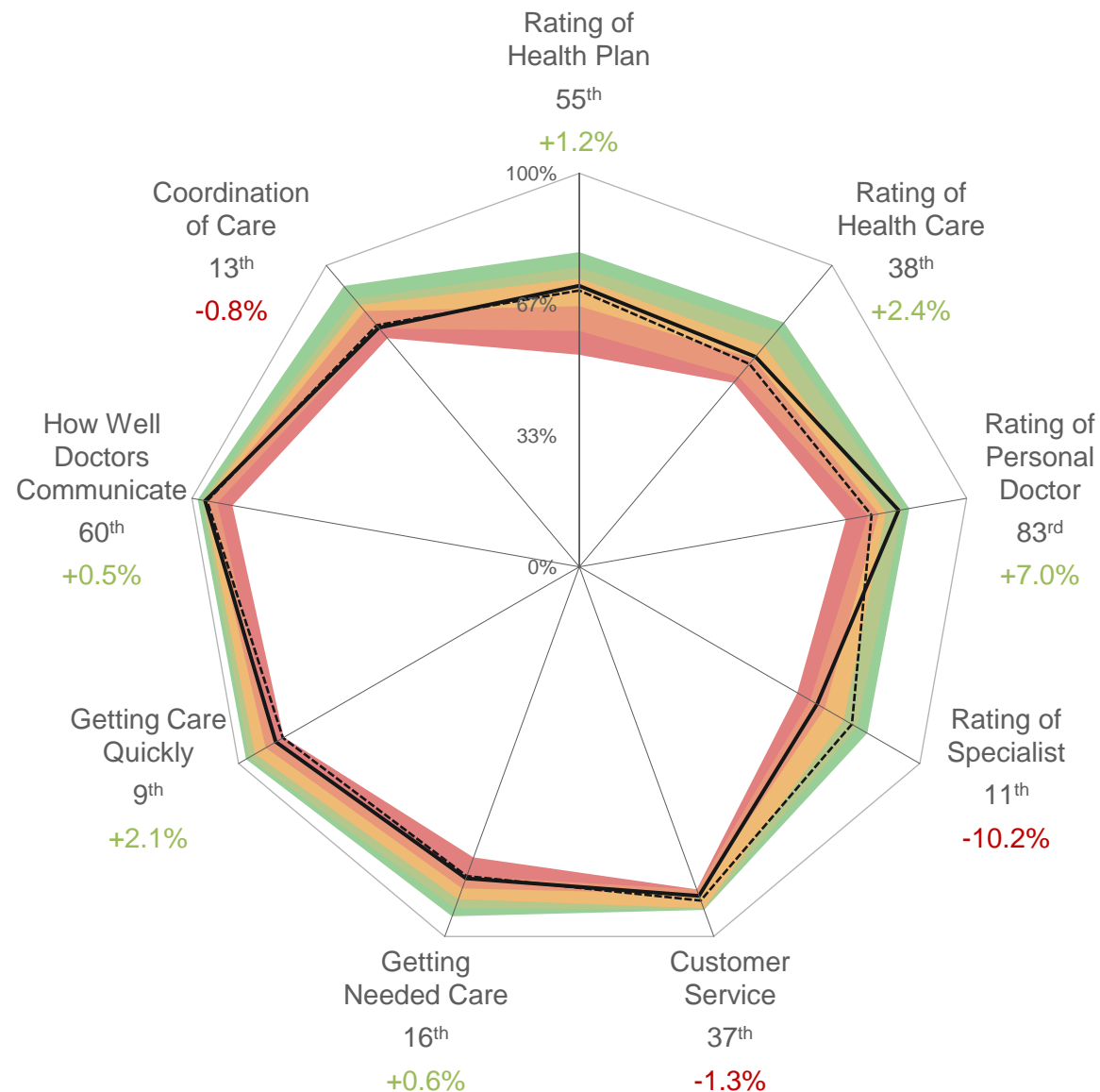
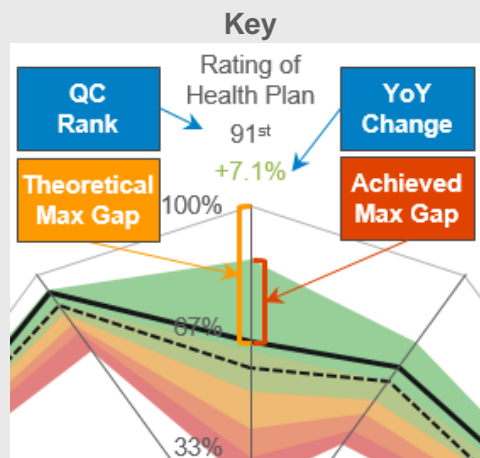
Displayed by the outer bound of the dark green section of the graph.

Theoretical Max Score Gap – The spread between your plan's score and the highest possible score a plan could achieve (100%).

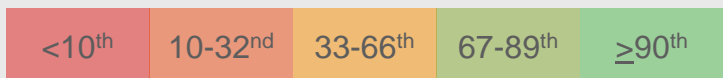
Displayed by the outer bound of the graph.

For each measure, your plan's 2021 and 2020 scores are plotted against the 2020 Quality Compass distribution.

Your plan's 2021 percentile ranking based on the 2020 Quality Compass along with the change in score from 2020 is reported on the outer edge of the graph.



2020 Quality Compass Thresholds



— 2021 Score
 --- 2020 Score

POWeR Chart: Explanation

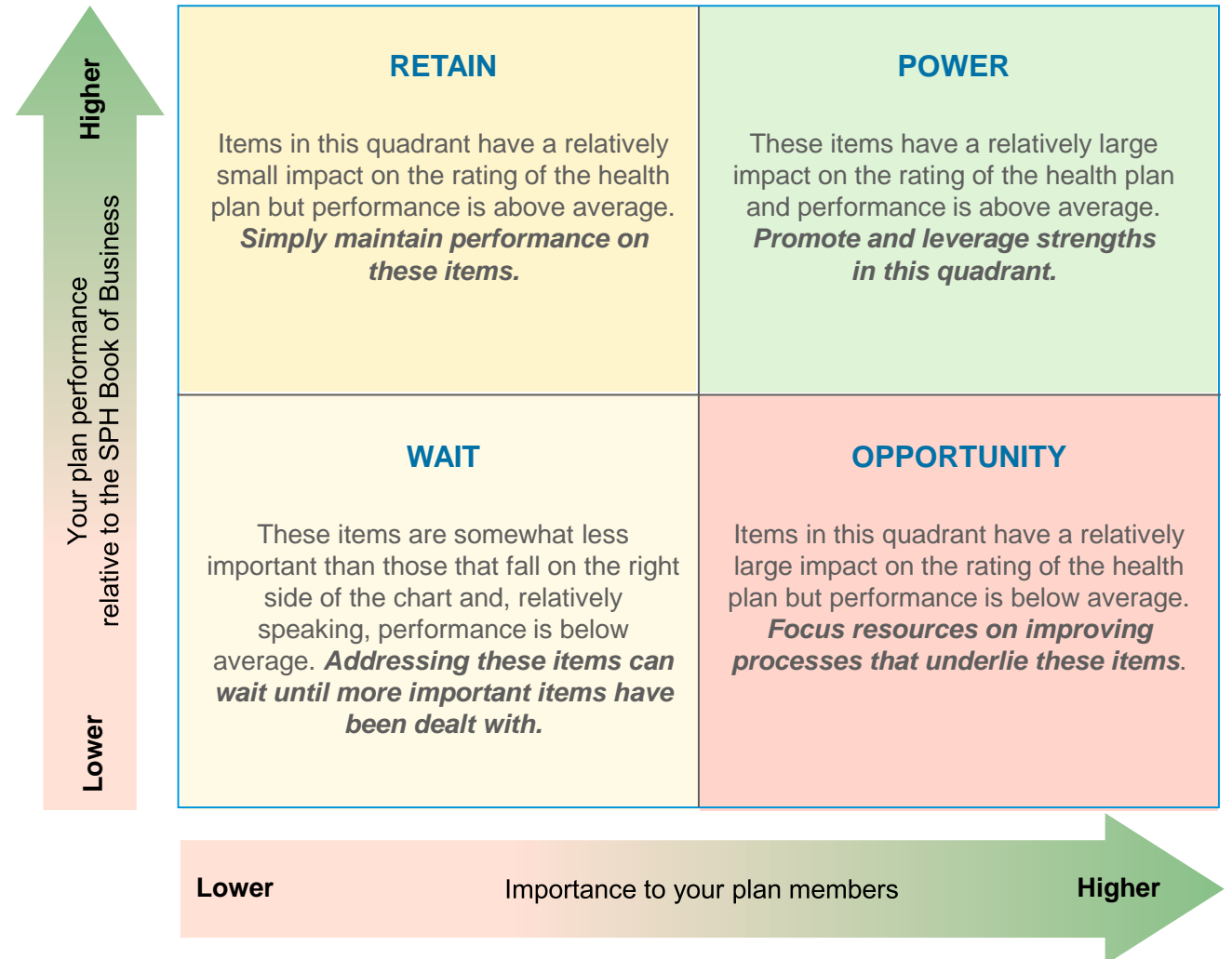
POWeR™ CHART CLASSIFICATION MATRIX

The SatisAction™ key driver statistical model was used to identify the key drivers of the rating of the health plan and the results are presented in the POWeR™ Chart classification matrix on the following page.

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.

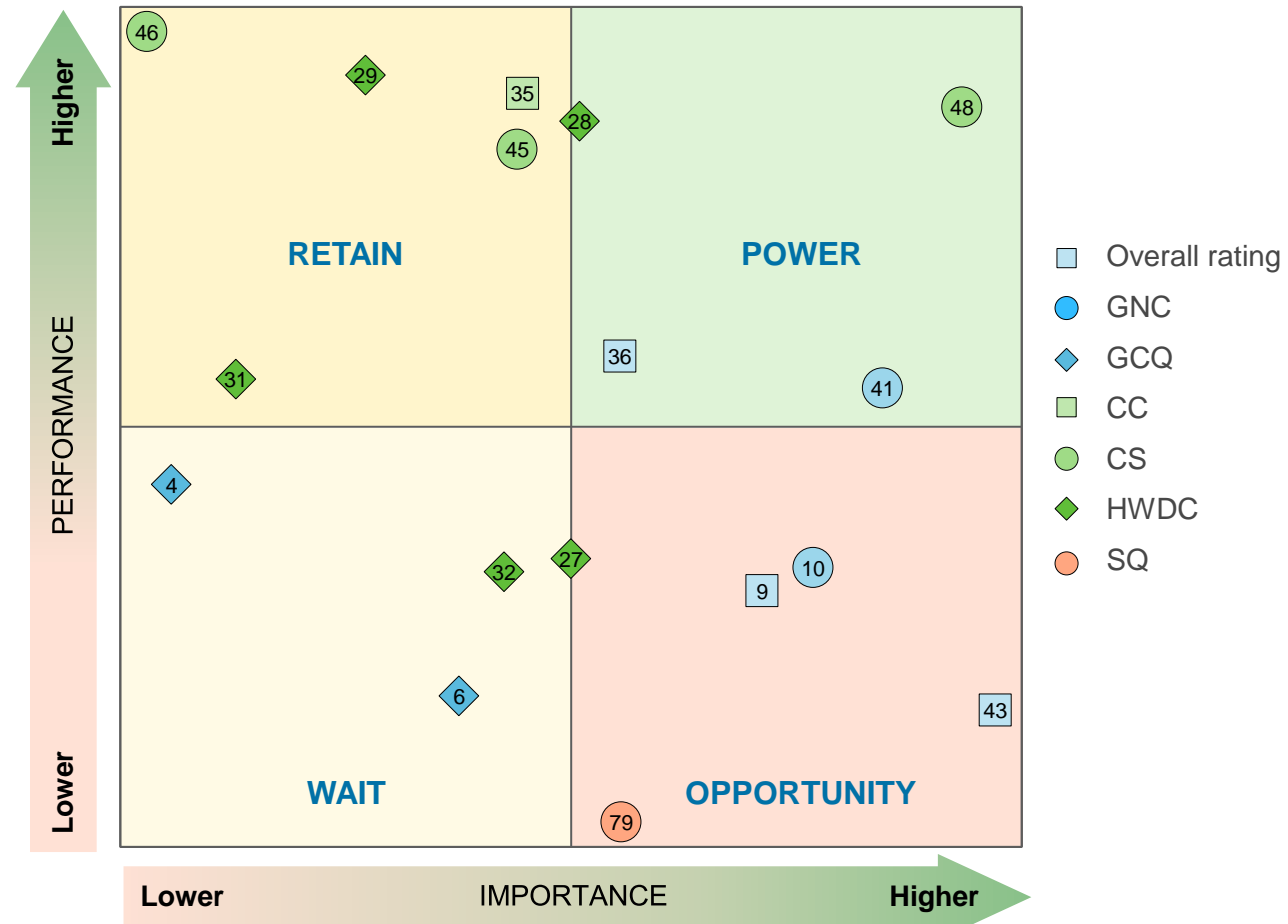


POWeR Chart: Your Results

KEY DRIVERS, SUMMARY RATES AND PERCENTILES

The key drivers of the rating of the health plan are presented in the POWeR™ Chart classification matrix. 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.

SURVEY MEASURE		SUMMARY RATE SCORE*	SPH ESTIMATED PERCENTILE	SPH ESTIMATED RATING
POWER				
Q48	Easy to fill out forms	98.0%	90 th	5
Q41	Got specialist appt.	83.3%	54 th	3
Q36	Personal doctor overall	79.4%	58 th	3
Q28	Dr. listened carefully	98.2%	86 th	4
OPPORTUNITY				
Q43	Specialist overall	68.8%	15 th	2
Q10	Got care/tests/treatment	89.1%	33 rd	3
Q9	Health care overall	71.8%	30 th	2
Q79	Satisfied with help to coordinate care	81.9%	---	---
Q27	Dr. explained things	93.8%	34 th	3
WAIT				
Q32	Dr. spent enough time	88.5%	32 nd	2
Q6	Got routine care	78.3%	16 th	2
Q4	Got urgent care	91.2%	43 rd	3
RETAIN				
Q35	Dr. informed about care	92.5%	91 st	5
Q45	CS provided info./help	87.8%	83 rd	4
Q29	Dr. showed respect	99.1%	92 nd	5
Q31	Dr. explained things for child	95.3%	56 th	3
Q46	CS courtesy/respect	100%	100 th	5



* Summary rates are top-two box scores.

Overall Rating of Health Plan – Plan and Industry Key Drivers

YOUR PLAN TOP 10 KEY DRIVERS 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 KEY DRIVERS 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.

RATING OF HEALTH PLAN

74.3%

Your plan scored in the **50th percentile** when compared to the SPH Book of Business benchmark

TOP 10 PLAN KEY DRIVERS

ALIGNMENT <i>Are your key drivers typical of the industry?</i>	ATTRIBUTE	YOUR PLAN SUMMARY RATE SCORE	INDUSTRY KEY DRIVER RANK	SPH BoB SUMMARY RATE SCORE	SPH BoB PERCENTILE	CLASSIFICATION
	Q43 Specialist overall	68.8%	3	75.7%	15 th	OPPORTUNITY
	Q48 Easy to fill out forms	98.0%	16	96.0%	90 th	POWER
	Q41 Got specialist appt.	83.3%	4	82.4%	54 th	POWER
	Q10 Got care/tests/treatment	89.1%	6	90.8%	33 rd	OPPORTUNITY
	Q9 Health care overall	71.8%	1	74.4%	30 th	OPPORTUNITY
	Q79 Satisfied with help to coordinate care	81.9%	---	---	---	OPPORTUNITY
	Q36 Personal doctor overall	79.4%	2	78.6%	58 th	POWER
	Q28 Dr. listened carefully	98.2%	8	95.9%	86 th	POWER
	Q27 Dr. explained things	93.8%	12	94.8%	34 th	OPPORTUNITY
	Q35 Dr. informed about care	92.5%	13	84.9%	91 st	RETAIN
<hr style="border-top: 1px dashed #ccc;"/>						
ADD'L TOP 10 INDUSTRY DRIVERS						
	Q45 CS provided info./help	87.8%	7	82.5%	83 rd	RETAIN
	Q6 Got routine care	78.3%	9	83.8%	16 th	WAIT
	Q29 Dr. showed respect	99.1%	10	96.9%	92 nd	RETAIN
	Q46 CS courtesy/respect	100%	5	94.0%	100 th	RETAIN

Note: All SPH BoB scores & rankings are calculated based on the 2021 SPH Book of Business. Any items below the dotted line are industry key drivers that are not identified as key drivers for your plan.








Aligns with top 10 industry drivers

Differs from top 10 industry drivers

Overall Rating of Health Plan - General Population

Demographic Comparisons

Different demographic subgroups can have dissimilar experiences with your health plan.

		8 - 10	9 - 10			8 - 10	9 - 10			8 - 10	9 - 10
 Respondent's Gender	MALE (n=31)	83.9%	67.7%	 Respondent's Age	<25 (n=29)	86.2%	79.3%	 Child's Ethnicity & Race			
	FEMALE (n=206)	88.8%	75.7%		25 - 34 (n=70)	92.9%	82.9%		WHITE (n=159)	85.5%	70.4%
			35 - 44 (n=84)		89.3%	65.5%	BLACK/AFRICAN AMERICAN (n=5) [^]		80.0%	40.0%	
			45 or older (n=54)		81.5%	74.1%	ASIAN (n=2) [^]		50.0%	50.0%	
 Child's Health Status	EXC./VERY GOOD (n=196)	89.3%	75.5%	 Child's Mental/Emotional Health Status	EXC./VERY GOOD (n=169)	88.8%	75.7%		NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER (n=4) [^]	75.0%	50.0%
	GOOD (n=41)	87.8%	73.2%		GOOD (n=57)	87.7%	70.2%		AMERICAN INDIAN OR ALASKA NATIVE (n=40)	92.5%	77.5%
	FAIR/POOR (n=8) [^]	62.5%	50.0%		FAIR/POOR (n=17) [^]	82.4%	76.5%		OTHER (n=43)	93.0%	81.4%
 Respondent's Education	HS GRAD OR LESS (n=117)	91.5%	78.6%	 Data Collection	MAIL (n=125)	84.8%	75.2%		HISPANIC/LATINO (n=165)	89.7%	75.2%
	SOME COLLEGE OR MORE (n=120)	85.0%	70.0%		PHONE (n=99)	91.9%	73.7%		NOT HISPANIC/ LATINO (n=71)	85.9%	73.2%
					INTERNET (n=21)	90.5%	71.4%				

[^] Indicates a base size smaller than 20. Interpret results with caution.



Estimated NCQA Health Insurance Plan Ratings - General Population

	2021 SCORE	SCORE DEFINITION	QC PERCENTILE RANK	SPH ESTIMATED RATING
CONSUMER SATISFACTION				3.0
GETTING CARE				NA
Getting Needed Care	86.2%	Usually or Always	47 th	NA
Getting Care Quickly	84.8%	Usually or Always	9 th	NA
SATISFACTION WITH PLAN PHYSICIANS				3.0
Rating of Personal Doctor	79.4%	9 or 10	52 nd	3.0
Rating of Specialist	68.8%	9 or 10	14 th	NA
Rating of Health Care	71.8%	9 or 10	45 th	3.0
Coordination of Care	92.5%	Usually or Always	100 th	NA
SATISFACTION WITH PLAN SERVICES				3.0
Rating of Health Plan	74.3%	9 or 10	62 nd	3.0

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 (10th, 33rd, 66th and 90th) 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 2020 NCQA data and benchmarks.

Rating = 1	Rating = 2	Rating = 3	Rating = 4	Rating = 5
<10 th Percentile	10 th – 32 rd Percentile	33 rd – 66 th Percentile	67 th – 90 th Percentile	>90 th 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.

In response to the **COVID-19** pandemic, NCQA did not publish Health Plan Ratings in 2020.

Oversampling Scenarios - General Population

OVERSAMPLING SCENARIO EXPLANATION

SPH displays projected results with current oversampling, no oversampling, and the scenario that achieves all reportable measures. The scenarios take into account changes in denominators and reportable measures that might impact ratings.

This plan currently oversamples at the rate of 40%. SPH does not recommend additional oversampling.

Based on the scenarios tested, holding everything else constant, an oversampling rate of 338% and above yields all reportable measures and an increase on 1 measure. **This is an estimate only and cannot be used to predict NCQA star ratings.**

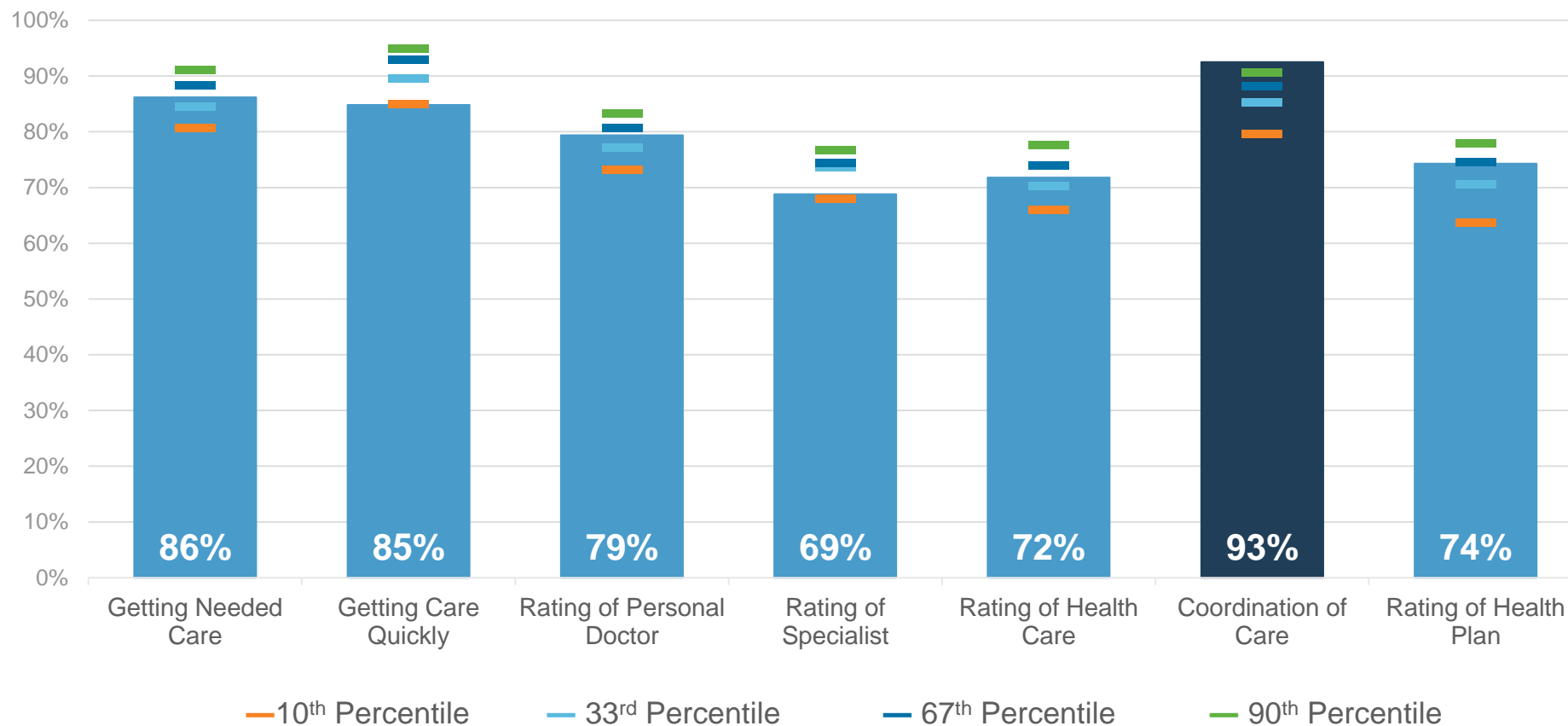
MEASURE NAME	ESTIMATED RATING (Current: 40%)	OVERSAMPLING SCENARIOS	
		0%	≥ 338%
CONSUMER SATISFACTION	3.0	3.0	3.0
GETTING CARE	NA	NA	2.0
Getting Needed Care	NA	NA	3.0
Getting Care Quickly	NA	NA	1.0
SATISFACTION WITH PLAN PHYSICIANS	3.0	3.0	3.5
Rating of Personal Doctor	3.0	3.0	3.0
Rating of Specialist	NA	NA	2.0
Rating of Health Care	3.0	NA	3.0
Coordination of Care	NA	NA	5.0
SATISFACTION WITH PLAN SERVICES	3.0	3.0	3.0
Rating of Health Plan	3.0	3.0	3.0

■ Higher Rating
■ Lower Rating
■ Reportable

Performance to Percentile Thresholds - General Population

COMPARISON TO QUALITY COMPASS PERCENTILE THRESHOLDS

The graph shows how your plan's **scores** used for accreditation ratings compare to the most recent Quality Compass thresholds published by NCQA (Fall 2020).



Dark Blue bar = Your plan's performance is at or above the 67th percentile

Light Blue bar = Your plan's performance is below the 67th percentile

* Scores are % 9 or 10, and % Always or Usually.



Measure Summary - General Population

Top Three Measures

Your plan had the highest NCQA Quality Compass® All Plans percentile rankings for these three measures.

MEASURE	2021 VALID N	YOUR PLAN SCORE		CHANGE	2020 QC GP BENCHMARK		GAP
		2020	2021		SUMMARY RATE	PERCENTILE RANK	
Coordination of Care (% Always or Usually)	40 [^]	81.7%	92.5%	10.8%	86.1%	100 th	6.4%
Customer Service (% Always or Usually)	41 [^]	92.0%	93.9%	1.9%	88.8%	97 th	5.1%
Rating of Health Plan (% 9 or 10)	245	70.4%	74.3%	3.9%	71.9%	62 nd	2.4%

Bottom Three Measures

Your plan had the lowest NCQA Quality Compass® All Plans percentile rankings for these three measures.

MEASURE	2021 VALID N	YOUR PLAN SCORE		CHANGE	2020 QC GP BENCHMARK		GAP
		2020	2021		SUMMARY RATE	PERCENTILE RANK	
How Well Doctors Communicate (% Always or Usually)	113	95.5%	94.9%	-0.6%	95.3%	38 th	-0.4%
Rating of Specialist (% 9 or 10)	32 [^]	78.7%	68.8%	-9.9%	73.4%	14 th	-4.6%
Getting Care Quickly (% Always or Usually)	77 [^]	87.9%	84.8%	-3.1%	90.5%	9 th	-5.7%

Significance Testing

Current year score is significantly higher than the 2020 score (↑) or benchmark score (▲).

Current year score is significantly lower than the 2020 score (↓) or benchmark score (▼).



Improvement Strategies

Improving Performance

These measures had the lowest NCQA Quality Compass® All Plans percentile rankings for your plan. While plans should also review which measures have lower scores than last year and which measures perform lower than benchmark, SPH offers these opportunities for improvement based on national percentile rankings.

Improvement Strategies – How Well Doctors Communicate

- Cultivate a patient-centered care philosophy and programs across the provider network.
- Support, communicate and educate providers about the vital medical importance of effective doctor-patient communication (i.e., reduced hospitalizations & ER visits, improved adherence).
- Explain health care concepts clearly and simply to parents and children. Use simple terms for children. Be prepared to accommodate and overcome language /literacy limitations.
- Address all of the parents' and the child's concerns. When appropriate, involve the child. Maintain eye contact with both the parent and the child. Be kind, thoughtful and thorough.
- Speak directly to older children when discussing matters related to their health.
- Provide readily available recommendations, tools and guidance to all providers to support and enhance communication skills and effective conversation skills with patients. Providers need to: Provide thorough explanations, provide written materials, illustrations and/or examples to help patient's understand, repeat the patient's concern and then address the topic, ask clarifying questions, make eye contact, avoid medical jargon and technical language, avoid multi-tasking, avoid rushing the patient, use constructive verbal responses and non-verbal cues, apply empathy and interest in response to concerns, by kind, avoid condescending language or actions, address questions and concerns-as much time as necessary, schedule adequate time for each visit, and follow-up after tests or procedures.
- Collaborate and share with providers tools, resources, and best practices to support, or reinforce, a complete and effective information exchange with all patients (e.g., a summary of medical record or health assessment to facilitate an effective health or wellness discussion, patient testimonials - perhaps from focus groups - of effective and ineffective communication techniques, provide tips and/or testimonials in provider newsletters).

Improvement Strategies – Rating of Specialist

- Analyze, investigate, and probe for weakness or QI opportunities among those measures or composites that are Key Drivers (or highly correlated) with rating of specialist or doctor. (e.g., HWDC, GCQ, GNC, Coordination Of Care).
- Review QI recommendations/actions for related CAHPS composite measures: How Well Doctors Communicate, Getting Care Quickly, Getting Needed Care, Coordination of Care.
- Provide resources, articles, tools and training sessions via multiple channels to support and drive improvement in physician-patient communication and patient-centered interviewing. Examples include: Listen to patients' concerns, Follow-up with the patient. Provide thorough explanations. Ensure that all questions and concerns are answered. All staff focus on being helpful and courteous to patients.
- Share, report and discuss relative CAHPS health care performance and feedback at the health system and/or within network level.
- Promote use of a secure online patient portal which allows patients access to their medical record and health care information of relevant to patient needs.
- Gather and analyze patient feedback on their recent office visit (i.e., patient "comment cards," follow up call/text/email, CG CAHPS survey, etc.)
- Assess adequacy of contracted specialist by specialty. If necessary, review quality of care information among specific specialties and/or identify practices of excellence.
- Explore ability of providers to share with patient's a summary of their medical record or health assessments to facilitate conversation about relevant health and wellness issues.
- Assess systems (e.g., EHRs) processes and/or procedures used to gather or facilitate distribution of patient information among providers.
- Suggest providers/practices periodically analyze appointment scheduling timeframes versus types of office visits.

Improvement Strategies – Getting Care Quickly

- Assess CAHPS data by health system, PO, and/or network. Communicate results and identify outliers. Correlate with HEDIS data, complaints, appeals and/or quality of care concerns, and communicate. Support and encourage providers to take innovative action to improve access.
- Support members and collaborate with providers to enhance routine and urgent access to care through innovative, proactive approaches within Care Management, Chronic Care, and Quality Management. Work with providers to identify and resolve opportunities.
- Discuss and engage providers/staff on scheduling best practices, how to improve access to routine/urgent care. Consider scheduling routine appointments well in advance, e.g., 12 months. Provide tools, resources, support and assessment.
- Support, encourage and assist in approaches toward open access scheduling. Allow a portion of each day open for urgent care and/or follow-up care.
- Contract with additional providers for urgent and after-hour appointments/availability.
- Explore partnering with 24-hour urgent care or walk-in clinics.
- Educate providers and staff about Plan and regulatory appointment wait time requirements or standards (i.e., CAHPS, CMS, States, etc.) . Identify opportunities for improvement.
- Provide members streamlined tools and resources (links, apps, etc.) about benefits, providers, referrals, scheduling appointments, etc. Identify options and hours available, and include alternatives, including practices with evening and weekend hours. Consider alternative sources of information, e.g., refrigerator magnets.
- Explore and support alternative telecommunication technologies to expand access to care: telephone, telehealth, telemedicine and patient portals.
- Encourage use of Nurse Hotline/Nurse on Call lines or live-chat via web for members to get health information and advice.

See full list of strategies in the [Appendix: Improvement Strategies](#)

Need Additional Assistance? For health plans that need additional assistance interpreting survey results and leveraging data to identify appropriate next steps for improvement, SPH offers Performance Improvement Consulting. Contact your Strategic Account Executive to learn more or visit our website at <http://www.sphanalytics.com/consulting>.



Measure Analyses

Measure Details and Scoring

- Presbyterian Centennial Care

Measure Analyses: Section Information - General Population

Drilling Down Into Ratings and Composites This section is designed to give plans a detailed report on the performance of each global rating and composite measure.

The Composite Analysis typically consists of two pages. The first page displays composite level details and the second displays results for the attributes contained within the composite. It is critical to look at these attribute questions to determine if there is a particular aspect of care that is driving your composite score.



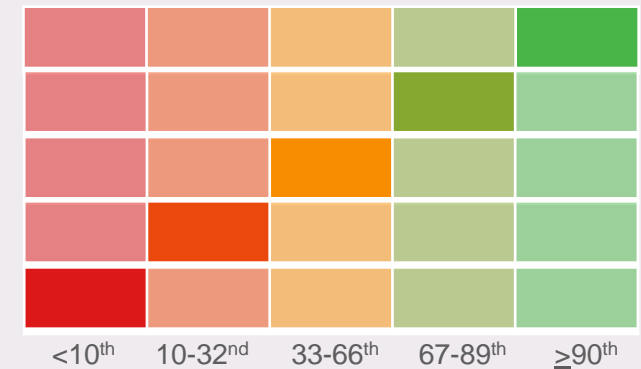
Analyses presented in this section include:

- Plan Summary Rate Scores with comparisons to trending (if available)
- Comparisons to benchmarks
- Percentile rankings
- Proportions of respondents on gate questions
- Comparisons to the SPH Book of Business on each measure plotted with Rating of Health Plan

Measures Included in Analyses

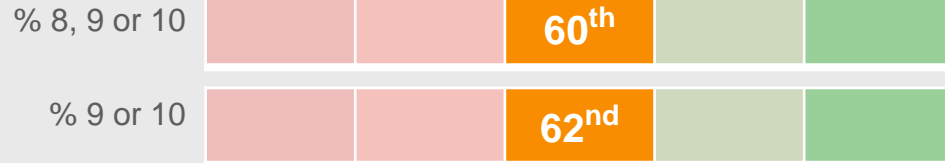
- Rating of Health Plan
- Rating of Health Care
- Rating of Personal Doctor
- Rating of Specialist
- Getting Needed Care
- Getting Care Quickly
- Coordination of Care
- Customer Service*
- How Well Doctors Communicate*

Percentile Rankings



* The Customer Service and How Well Doctors Communicate measures are not used for NCQA ratings.

PERCENTILE RANKING 2020 QC ALL PLANS GP



SatisAction™ KEY DRIVER STATISTICAL MODEL Key Drivers Of The Rating Of The Health Plan

POWER

Promote and Leverage Strengths

- Q48** Easy to fill out forms
- Q41** Got specialist appt.
- Q36** Personal doctor overall
- Q28** Dr. listened carefully

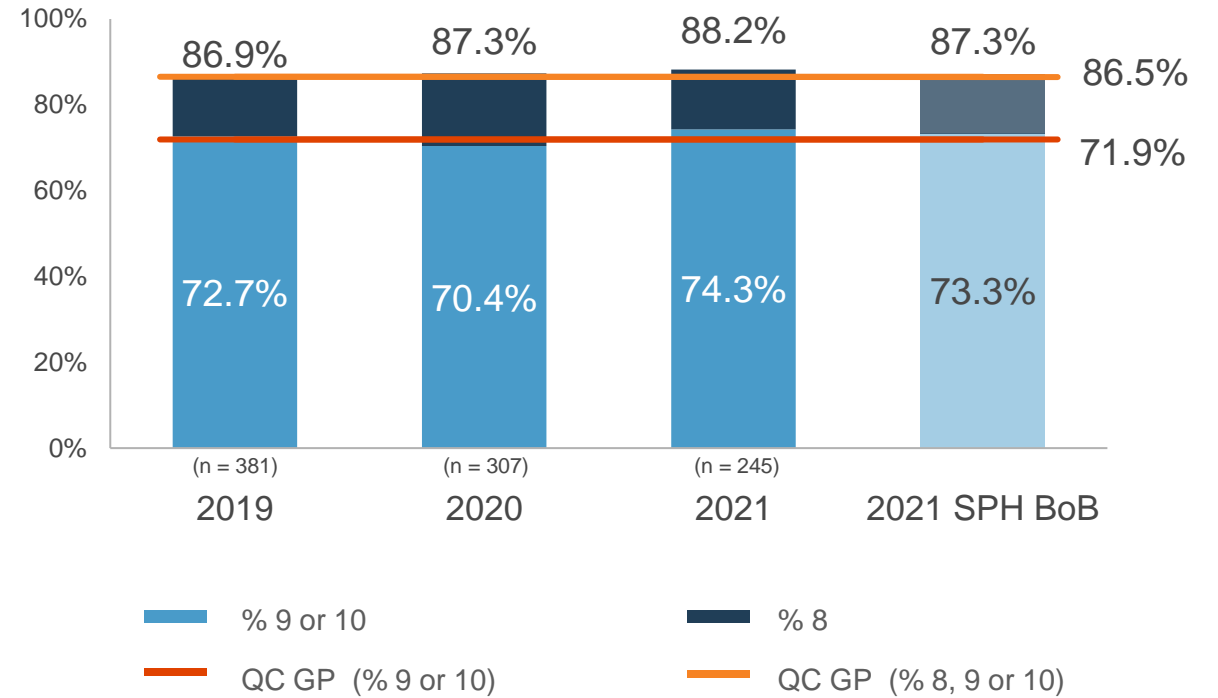
OPPORTUNITIES

Focus Resources on Improving Processes That Underlie These Items

- Q43** Specialist overall
- Q10** Got care/tests/treatment
- Q9** Health care overall
- Q79** Satisfied with help to coordinate care
- Q27** Dr. explained things

RATING OF HEALTH PLAN

% 8, 9 or 10



Significance Testing

Current year score is significantly higher than the 2020 score (↑), the 2019 score (‡) or benchmark score (▲).

Current year score is significantly lower than the 2020 score (↓), the 2019 score (‡) or benchmark score (▼).

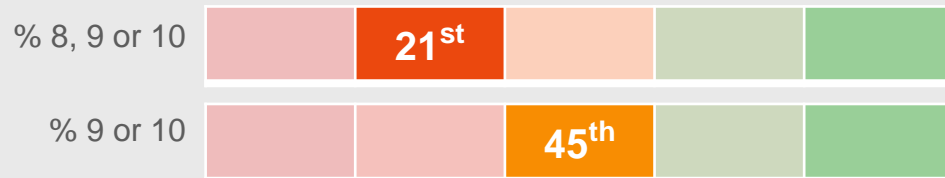
^Denominator less than 100. NCQA will assign an NA to this measure.



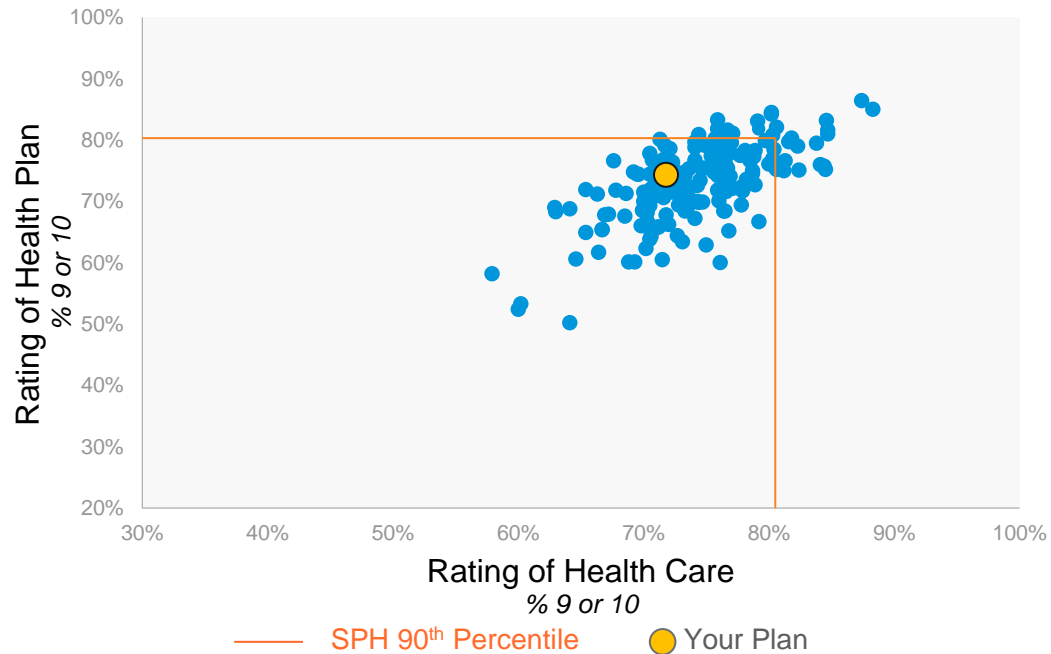
Rating of Health Care - General Population

Measure

PERCENTILE RANKING 2020 QC ALL PLANS GP

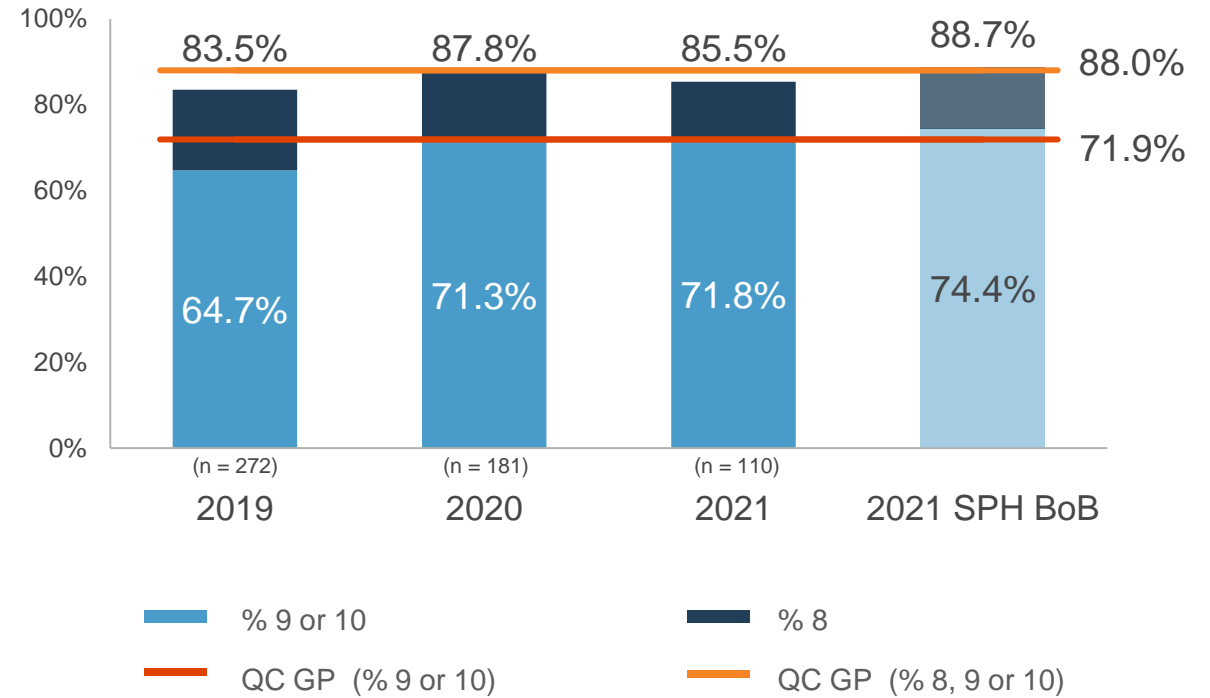


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RATING OF HEALTH CARE

% 8, 9 or 10



Significance Testing

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Current year score is significantly lower than the 2020 score (↓), the 2019 score (‡) or benchmark score (▼).

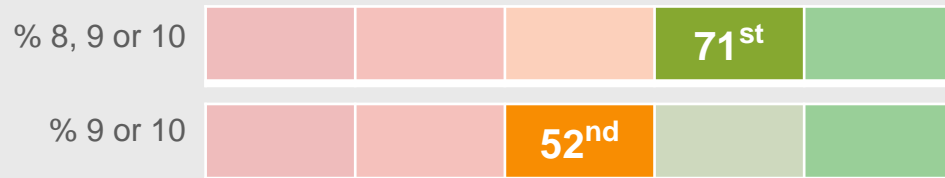
^Denominator less than 100. NCQA will assign an NA to this measure.



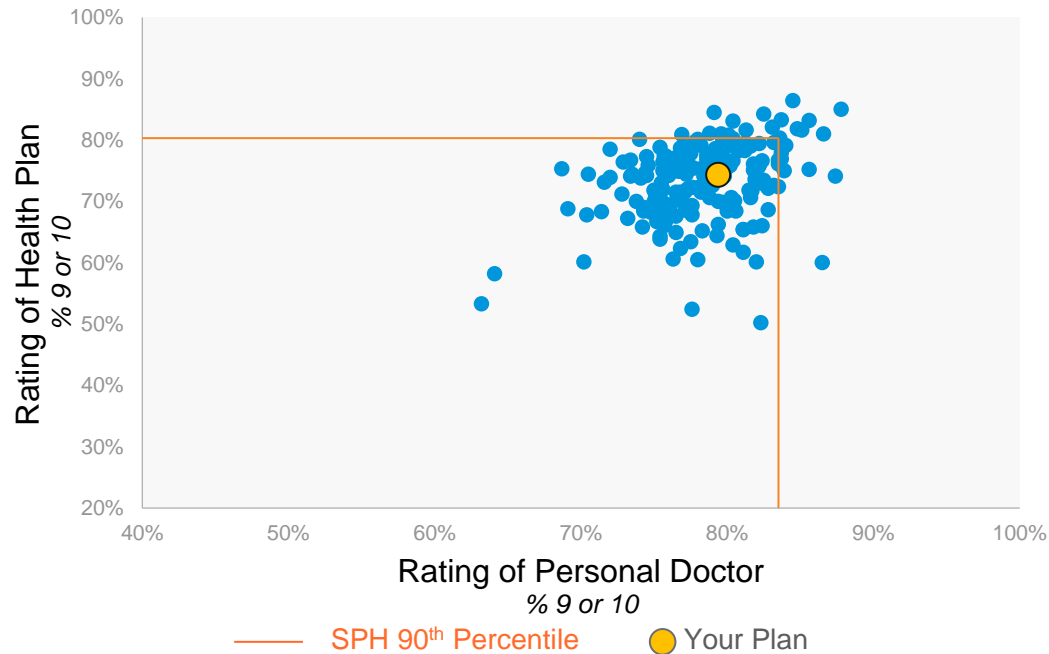
Rating of Personal Doctor - General Population

Measure

PERCENTILE RANKING 2020 QC ALL PLANS GP

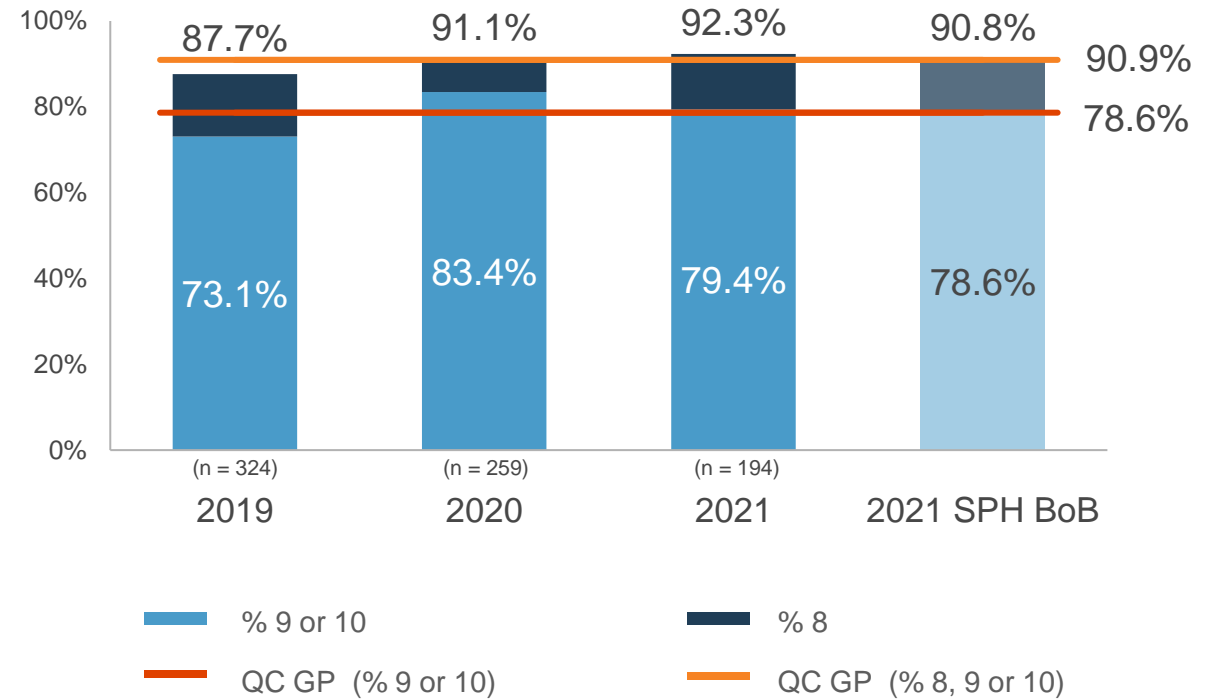


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RATING OF PERSONAL DOCTOR

% 8, 9 or 10

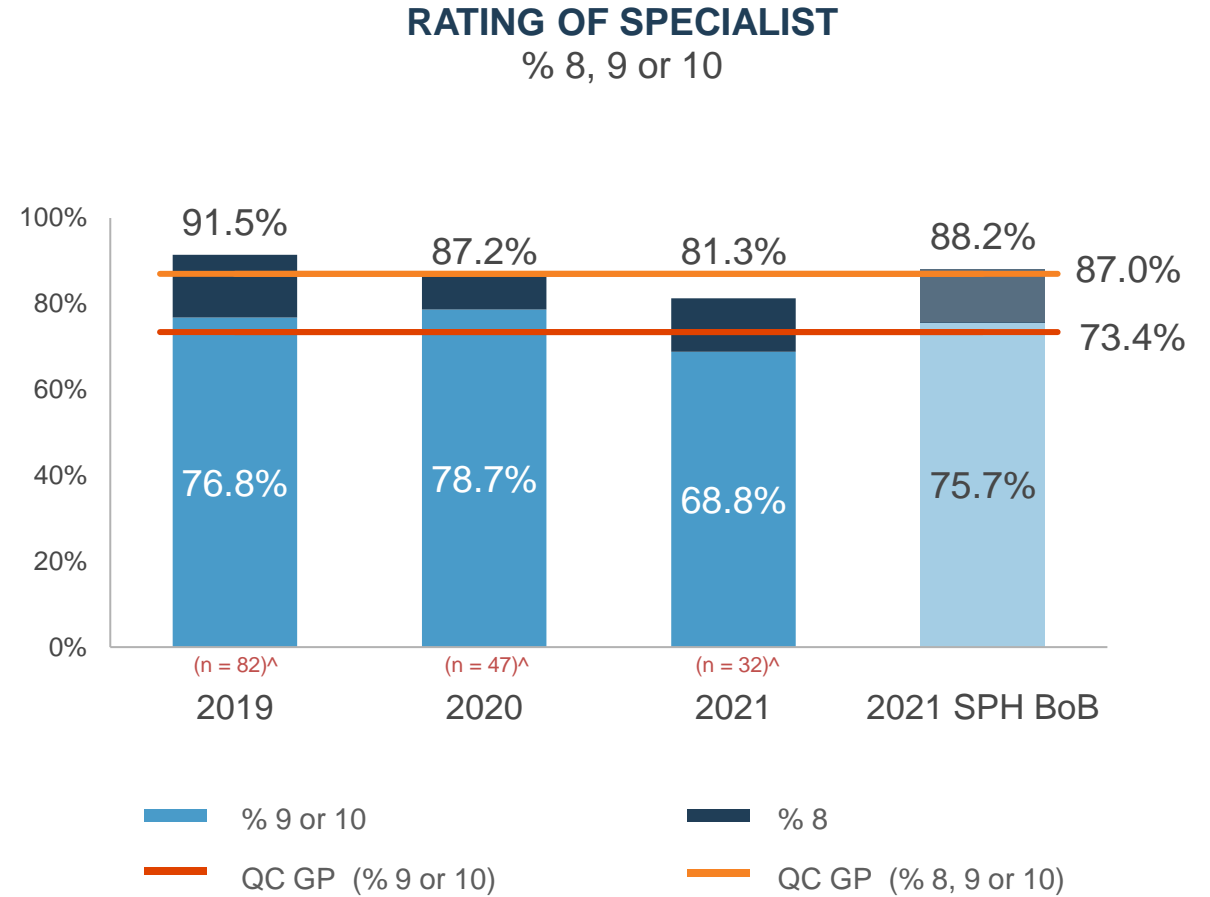
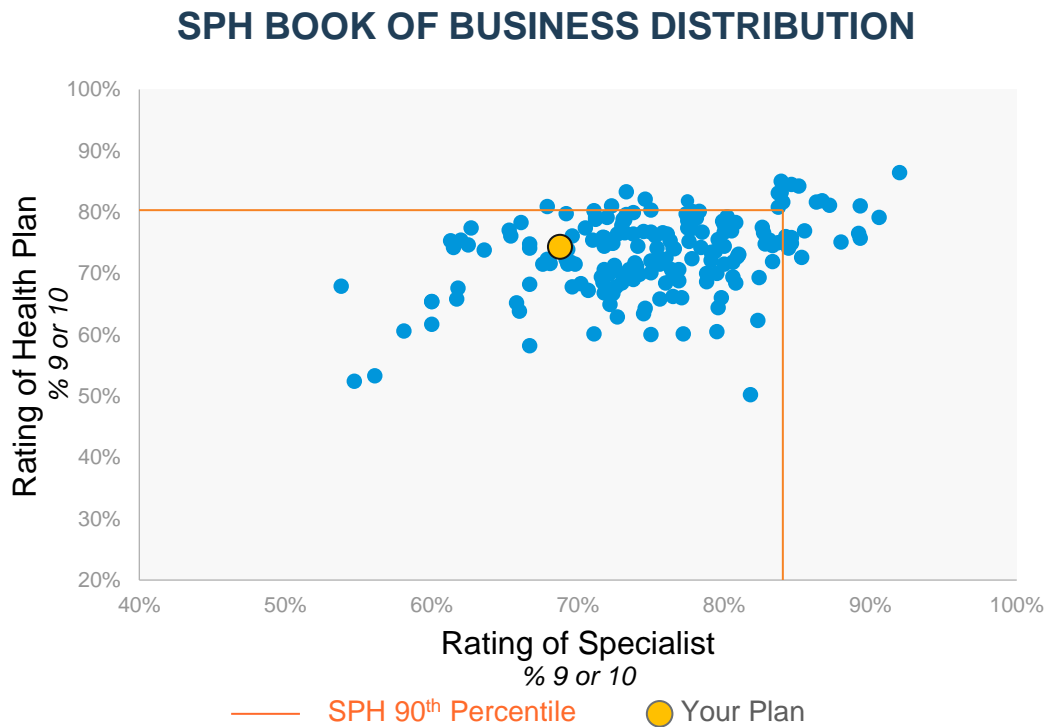
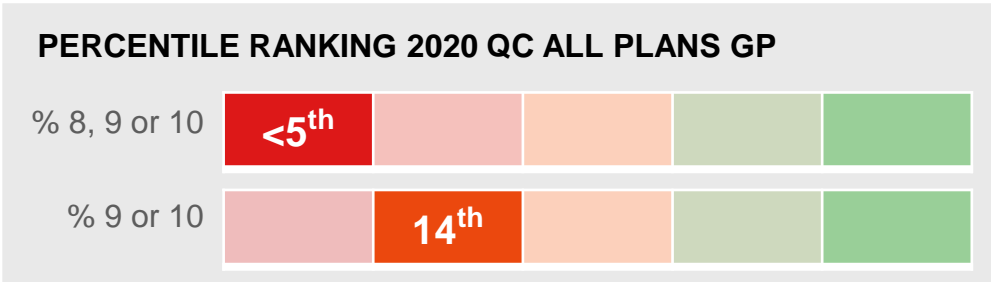


Significance Testing

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



Significance Testing

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Current year score is significantly lower than the 2020 score (↓), the 2019 score (‡) or benchmark score (▼).

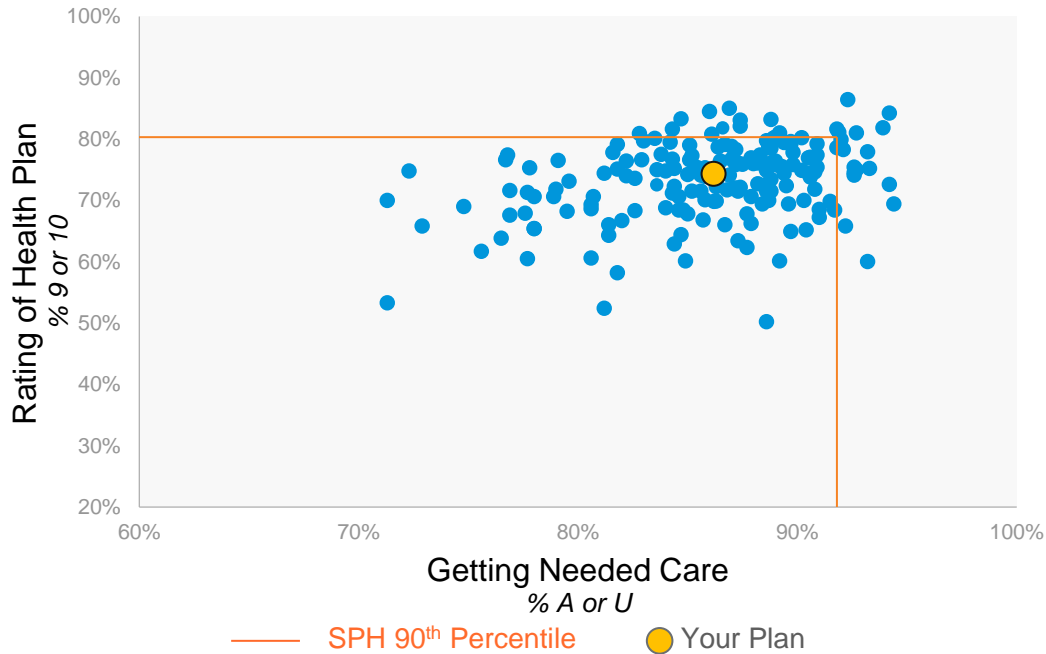
[^]Denominator less than 100. NCQA will assign an NA to this measure.

PERCENTILE RANKING 2020 QC ALL PLANS GP

% A or U

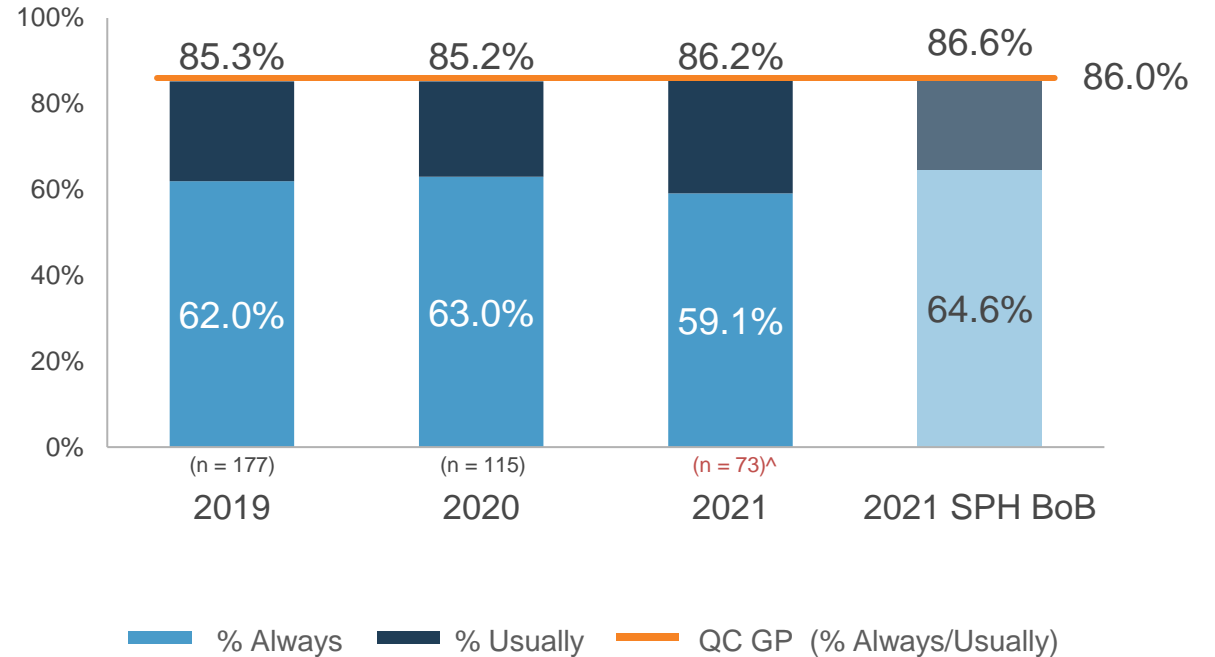
47th

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GETTING NEEDED CARE

% Always or Usually



Significance Testing

Current year score is significantly higher than the 2020 score (↑), the 2019 score (‡) or benchmark score (▲).

Current year score is significantly lower than the 2020 score (↓), the 2019 score (‡) or benchmark score (▼).

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

GETTING NEEDED CARE QUESTIONS

The Getting Needed Care composite score is calculated by taking the average of two questions:

- Q10. In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?
- Q41. In the last 6 months, how often did you get an appointment for your child to see a specialist as soon as you needed?

2021 GETTING NEEDED CARE COMPOSITE SUMMARY RATE SCORE

86.2%

Gate Question

Q40. Made appointments to see a specialist in the last 6 months

Valid n	Yes
247	15.4%

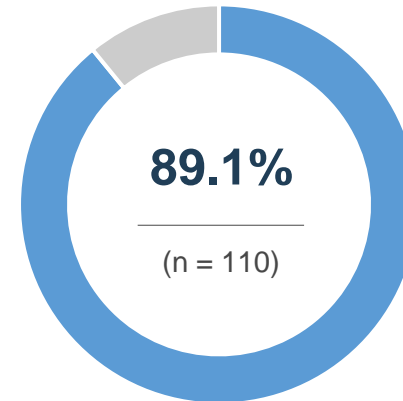
Significance Testing

Current year score is significantly higher than the 2020 score (↑), the 2019 score (‡) or benchmark score (▲).

Current year score is significantly lower than the 2020 score (↓), the 2019 score (‡) or benchmark score (▼).

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

Q10. GETTING CARE, TESTS, OR TREATMENT % Always or Usually

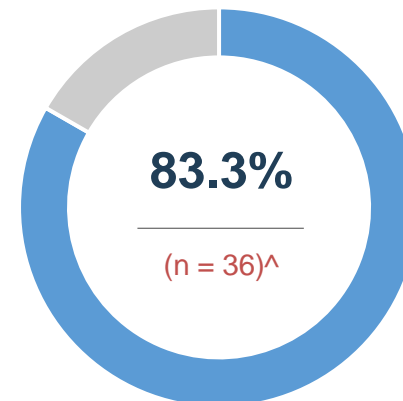


2021	89.1%
2020	89.6%
2019	90.1%
SPH	90.8%
QC	91.2%

Percentile Ranking 2020 QC All Plans GP



Q41. GETTING SPECIALIST APPOINTMENT % Always or Usually



2021	83.3%
2020	80.9%
2019	80.5%
SPH	82.4%
QC	79.8%

Percentile Ranking 2020 QC All Plans GP



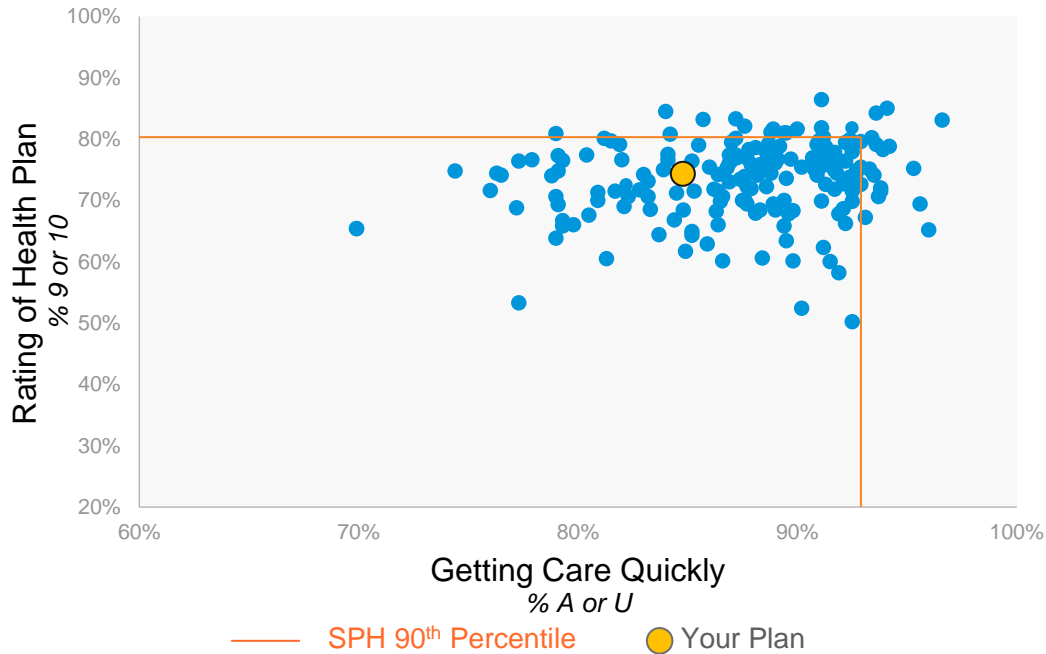
PERCENTILE RANKING 2020 QC ALL PLANS GP

% A or U

9th

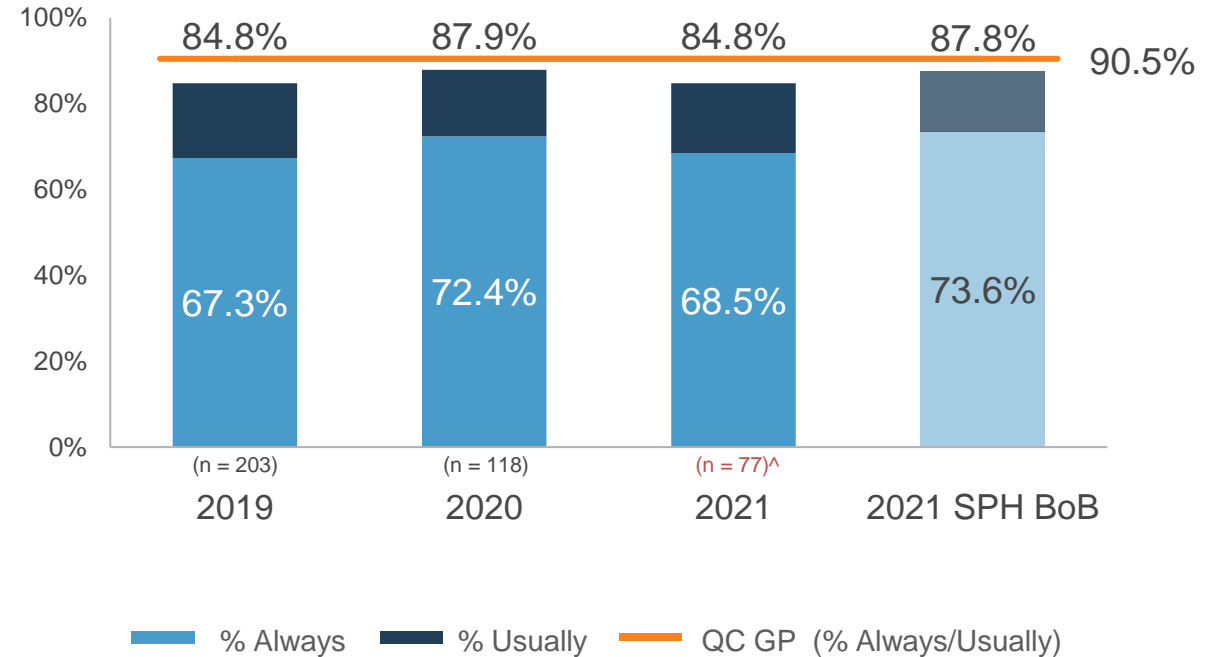


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GETTING CARE QUICKLY

% Always or Usually



Significance Testing

Current year score is significantly higher than the 2020 score (↑), the 2019 score (‡) or benchmark score (▲).

Current year score is significantly lower than the 2020 score (↓), the 2019 score (‡) or benchmark score (▼).

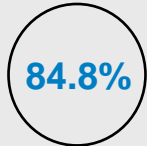
[^]Denominator less than 100. NCQA will assign an NA to this measure.

GETTING CARE QUICKLY QUESTIONS

The Getting Care Quickly composite score is calculated by taking the average of two questions:

- Q4. In the last 6 months, when your child needed care right away, how often did your child get care as soon as he/she needed?
- Q6. In the last 6 months, how often did you get an appointment for a check-up or routine care for your child as soon as your child needed?

2021 GETTING CARE QUICKLY COMPOSITE SUMMARY RATE SCORE



Gate Questions

Gate Questions	Valid n	Yes
Q3. Had illness, injury or condition that needed care right away	247	13.8%
Q5. Made appts for health care in person, on the phone, or on video	248	50.4%

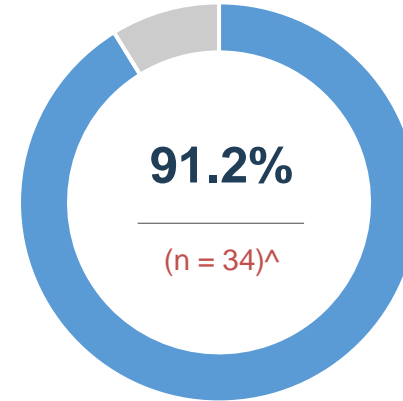
Significance Testing

Current year score is significantly higher than the 2020 score (↑), the 2019 score (‡) or benchmark score (▲).

Current year score is significantly lower than the 2020 score (↓), the 2019 score (‡) or benchmark score (▼).

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

Q4. GETTING URGENT CARE % Always or Usually

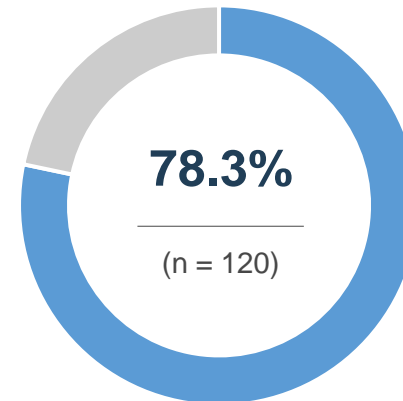


2021	91.2%
2020	84.9%
2019	87.0%
SPH	91.7%
QC	92.6%

Percentile Ranking 2020 QC All Plans GP



Q6. GETTING ROUTINE CARE % Always or Usually



2021	78.3%	↓
2020	90.8%	
2019	82.7%	
SPH	83.8%	
QC	89.0%	▼

Percentile Ranking 2020 QC All Plans GP

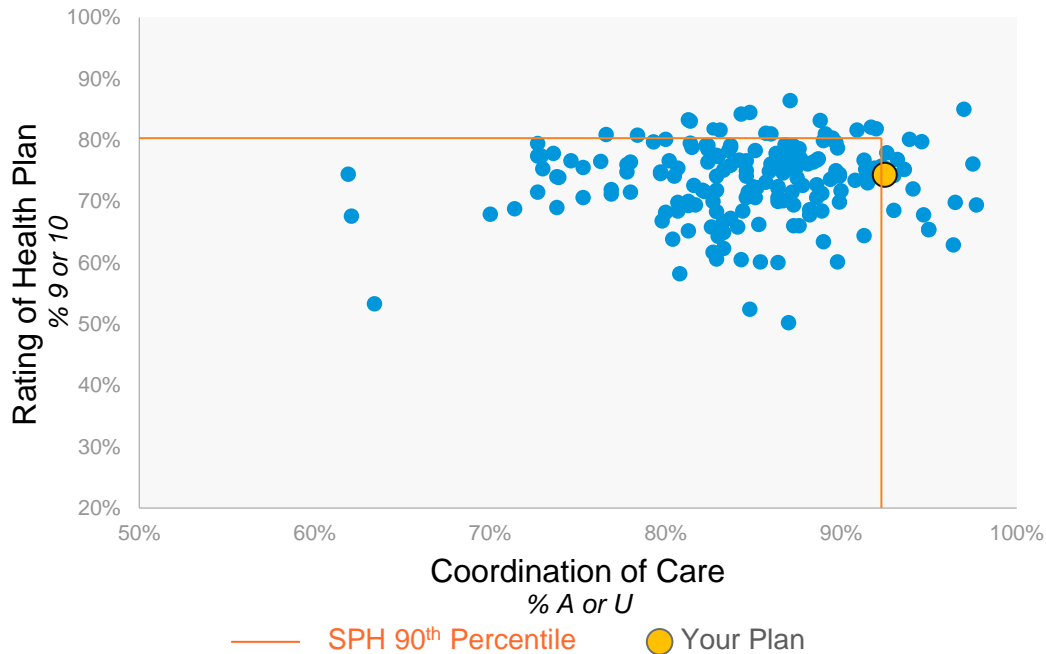


PERCENTILE RANKING 2020 QC ALL PLANS GP

% A or U

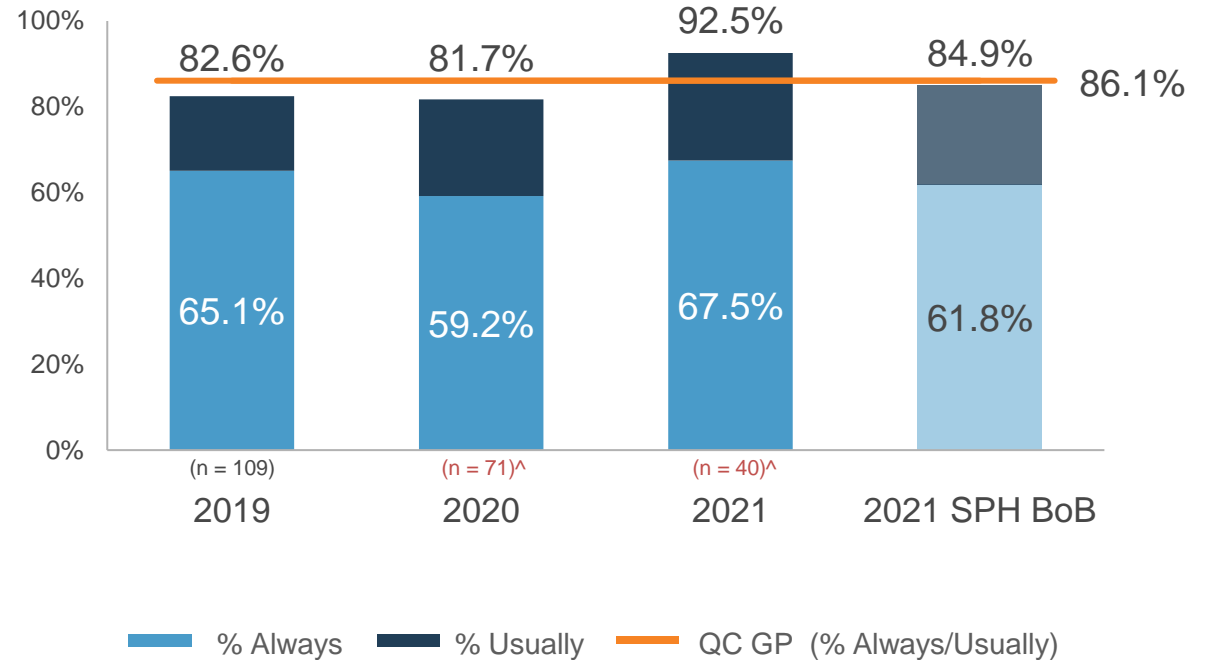


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COORDINATION OF CARE

% Always or Usually



Significance Testing

Current year score is significantly higher than the 2020 score (↑), the 2019 score (‡) or benchmark score (▲).

Current year score is significantly lower than the 2020 score (↓), the 2019 score (‡) or benchmark score (▼).

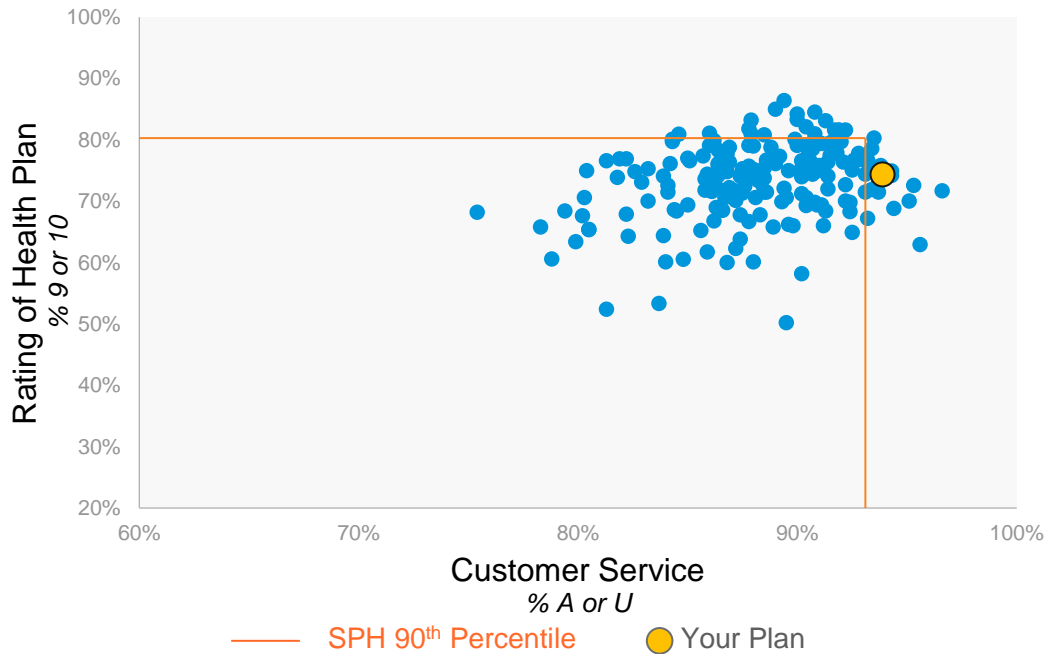
^Denominator less than 100. NCQA will assign an NA to this measure.

PERCENTILE RANKING 2020 QC ALL PLANS GP

% A or U

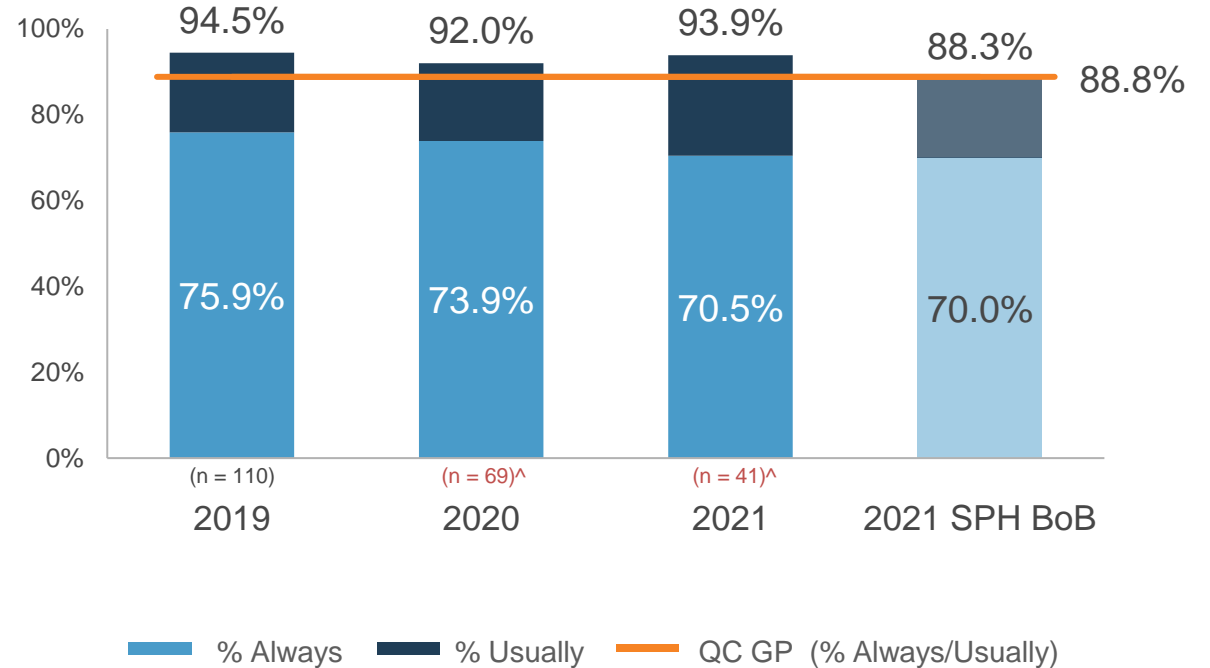


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CUSTOMER SERVICE

% Always or Usually



Significance Testing

Current year score is significantly higher than the 2020 score (↑), the 2019 score (‡) or benchmark score (▲).

Current year score is significantly lower than the 2020 score (↓), the 2019 score (‡) or benchmark score (▼).

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

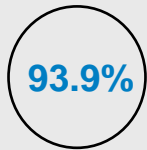
* The Customer Service measure is not used for NCQA ratings.

CUSTOMER SERVICE QUESTIONS

The Customer Service composite score is calculated by taking the average of two questions:

- Q45. In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed?
- Q46. In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect?

2021 CUSTOMER SERVICE COMPOSITE SUMMARY RATE SCORE



Gate Question

Q44. Tried to get information or help from health plan's customer service

Valid n	Yes
245	17.6%

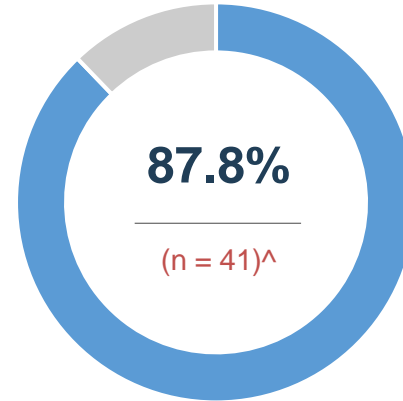
Significance Testing

Current year score is significantly higher than the 2020 score (↑), the 2019 score (⚡) or benchmark score (▲).

Current year score is significantly lower than the 2020 score (↓), the 2019 score (⚡) or benchmark score (▼).

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

Q45. PROVIDED INFORMATION OR HELP % Always or Usually

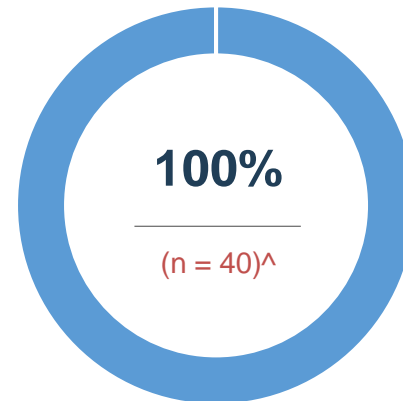


2021	87.8%
2020	84.1%
2019	90.0%
SPH	82.5%
QC	83.8%

Percentile Ranking 2020 QC All Plans GP



Q46. TREATED WITH COURTESY AND RESPECT % Always or Usually



2021	100%
2020	100%
2019	99.1%
SPH	94.0% ▲
QC	93.8% ▲

Percentile Ranking 2020 QC All Plans GP





How Well Doctors Communicate* - General Population

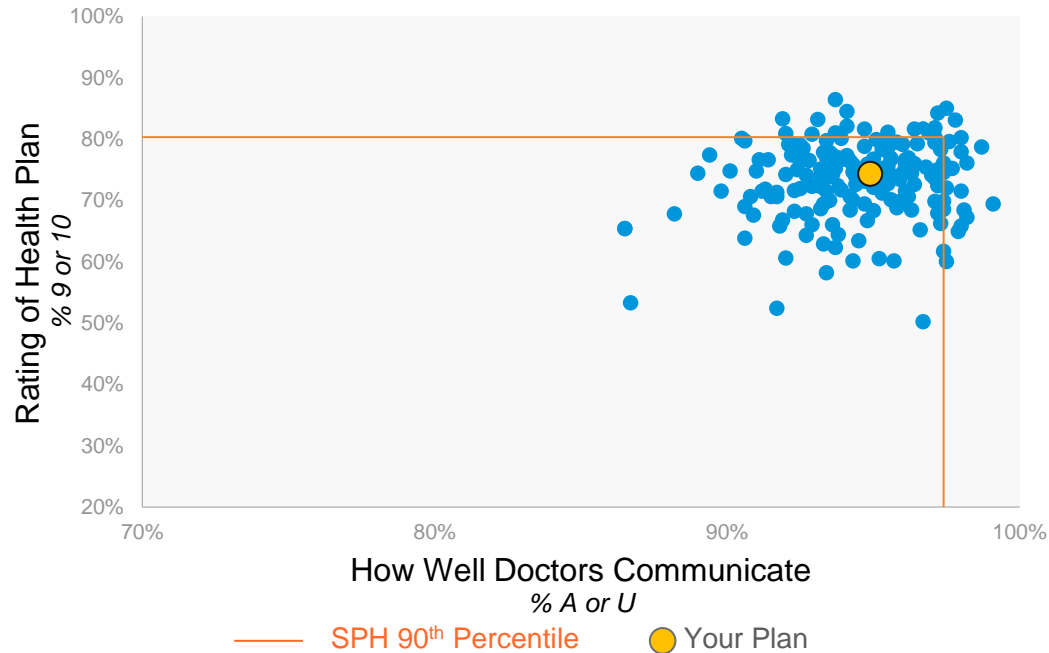
Composite

PERCENTILE RANKING 2020 QC ALL PLANS GP

% A or U

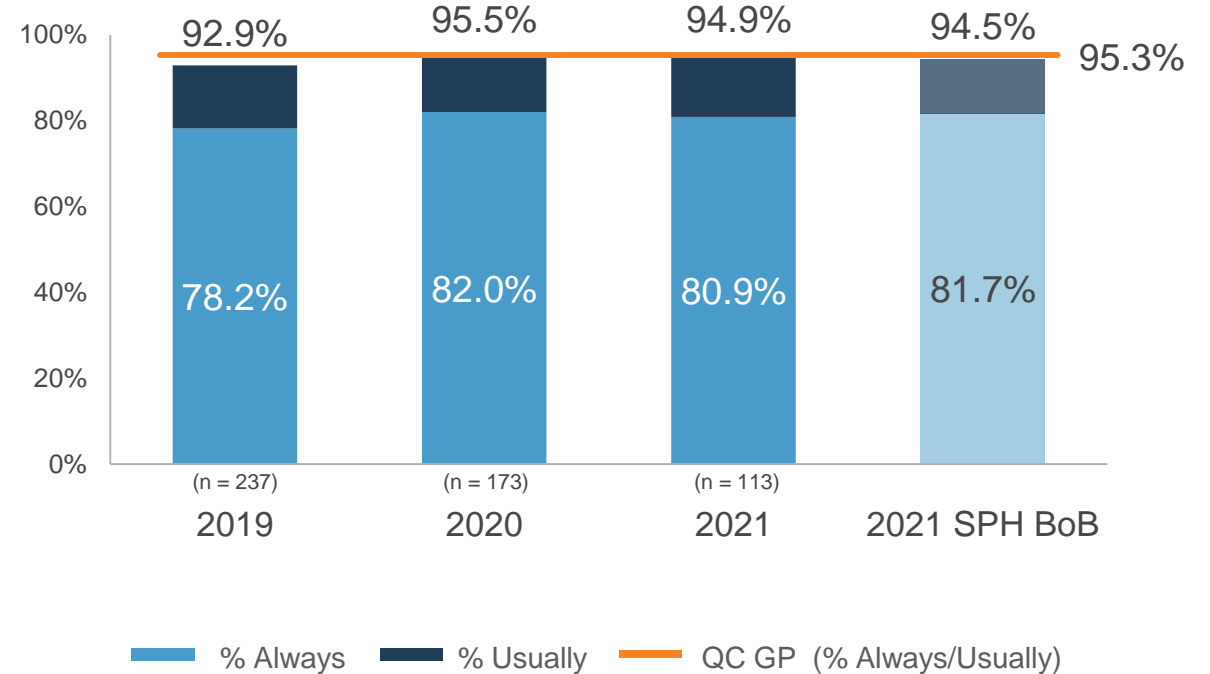
38th

SPH BOOK OF BUSINESS DISTRIBUTION



HOW WELL DOCTORS COMMUNICATE

% Always or Usually



Significance Testing

Current year score is significantly higher than the 2020 score (↑), the 2019 score (‡) or benchmark score (▲).

Current year score is significantly lower than the 2020 score (↓), the 2019 score (‡) or benchmark score (▼).

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

* The How Well Doctors Communicate measure is not used for NCQA ratings.



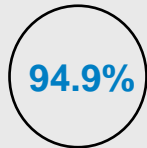
Attribute Questions

HOW WELL DOCTORS COMMUNICATE QUESTIONS

The How Well Doctors Communicate composite score is calculated by taking the average of four questions:

- Q27. In the last 6 months, how often did your child's personal doctor explain things in a way that was easy to understand?
- Q28. In the last 6 months, how often did your child's personal doctor listen carefully to you?
- Q29. In the last 6 months, how often did your child's personal doctor show respect for what you had to say?
- Q32. In the last 6 months, how often did your child's personal doctor spend enough time with your child?

2021 HOW WELL DOCTORS COMMUNICATE COMPOSITE SUMMARY RATE SCORE



Gate Question

Gate Question	Valid n	Yes
Q25. Have a personal doctor	242	81.8%

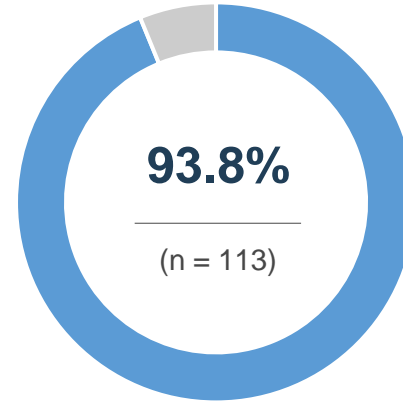
Significance Testing

Current year score is significantly higher than the 2020 score (↑), the 2019 score (‡) or benchmark score (▲).

Current year score is significantly lower than the 2020 score (↓), the 2019 score (‡) or benchmark score (▼).

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

Q27. PERSONAL DOCTOR EXPLAINED THINGS % Always or Usually

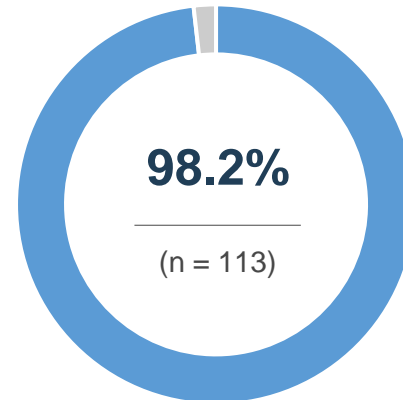


2021	93.8%
2020	95.4%
2019	94.9%
SPH	94.8%
QC	95.6%

Percentile Ranking 2020 QC All Plans GP



Q28. PERSONAL DOCTOR LISTENED CAREFULLY % Always or Usually



2021	98.2%	‡
2020	96.6%	
2019	93.6%	
SPH	95.9%	
QC	96.4%	

Percentile Ranking 2020 QC All Plans GP



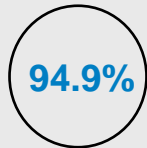


HOW WELL DOCTORS COMMUNICATE QUESTIONS

The How Well Doctors Communicate composite score is calculated by taking the average of four questions:

- Q27. In the last 6 months, how often did your child's personal doctor explain things in a way that was easy to understand?
- Q28. In the last 6 months, how often did your child's personal doctor listen carefully to you?
- Q29. In the last 6 months, how often did your child's personal doctor show respect for what you had to say?
- Q32. In the last 6 months, how often did your child's personal doctor spend enough time with your child?

2021 HOW WELL DOCTORS COMMUNICATE COMPOSITE SUMMARY RATE SCORE



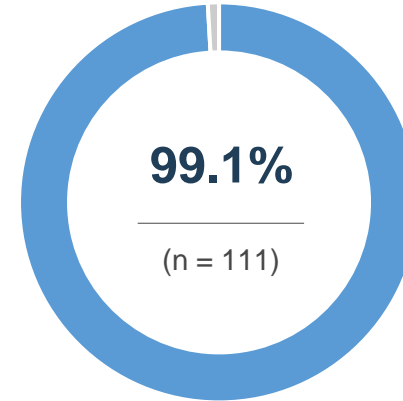
Significance Testing

Current year score is significantly higher than the 2020 score (↑), the 2019 score (⬆) or benchmark score (▲).

Current year score is significantly lower than the 2020 score (↓), the 2019 score (⬆) or benchmark score (▼).

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

Q29. PERSONAL DOCTOR SHOWED RESPECT % Always or Usually

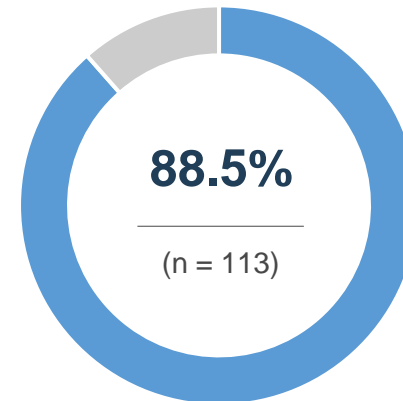


2021	99.1%
2020	98.8%
2019	97.0%
SPH	96.9% ▲
QC	97.2% ▲

Percentile Ranking 2020 QC All Plans GP



Q32. PERSONAL DOCTOR SPENT ENOUGH TIME % Always or Usually



2021	88.5%
2020	91.2%
2019	86.0%
SPH	90.4%
QC	91.9%

Percentile Ranking 2020 QC All Plans GP





Summary of Trend and Benchmarks

Summary Rate Scores and Percentile Rankings

- Presbyterian Centennial Care



Summary of Trend and Benchmarks: Section Information

Trend and Benchmark Comparisons The CAHPS® 5.1H 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 scores from the 2021 GP SPH Analytics Medicaid Child with CCC Book of Business and the 2020 GP Medicaid Child with CCC Quality Compass® All Plans benchmarks. 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 2020 score (↑), the 2019 score (‡) or benchmark score (▲).

Red – Current year score is significantly lower than the 2020 score (↓), the 2019 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.

	2020 Quality Compass® All Plans (General Population)	2020 Quality Compass® All Plans (CCC Population)	2020 NCQA 1-100 Benchmark (General Population)	2020 NCQA 1-100 Benchmark (CCC Population)	2021 SPH Analytics Book of Business (General Population)	2021 SPH Analytics Book of Business (CCC Population)
	Includes all Medicaid child samples (Non-CCC and CCC) that submitted data to NCQA in 2020.	Includes all Medicaid child samples (CCC) that submitted data to NCQA in 2020.	A percentile benchmark (with values ranging from the first through the one hundredth percentile) calculated by NCQA and derived from Medicaid child data (Non-CCC and CCC) collected by NCQA in 2020.	A percentile benchmark (with values ranging from the first through the one hundredth percentile) calculated by NCQA and derived from Medicaid child data (CCC) collected by NCQA in 2020.	Includes all the Medicaid child samples (Non-CCC and CCC) that contracted with SPH Analytics to administer the 2021 CAHPS 5.1H survey and submitted data to NCQA.	Includes all the Medicaid child samples (CCC) that contracted with SPH Analytics to administer the 2021 CAHPS 5.1H survey and submitted data to NCQA.
PROS	<ul style="list-style-type: none"> • Contains more plans than the SPH Book of Business • Is presented in NCQA's The State of Health Care Quality 	<ul style="list-style-type: none"> • Contains more plans than the SPH Book of Business • Is presented in NCQA's The State of Health Care Quality • Provides a CCC benchmark 	<ul style="list-style-type: none"> • Utilized by SPH Analytics to calculate approximate percentile ranking of plan scores in relation to the Quality Compass® All Plans benchmark 	<ul style="list-style-type: none"> • Utilized by SPH Analytics to calculate approximate percentile ranking of plan scores in relation to the Quality Compass® All Plans benchmark • Provides a CCC benchmark 	<ul style="list-style-type: none"> • Provides a benchmark for each question from the survey • Permits precise percentile ranking of plan compared to benchmark • Historically, the SPH BoB has varied by less than 1% from the Public Report benchmark. 	<ul style="list-style-type: none"> • Provides a benchmark for each question from the survey • Permits precise percentile ranking of plan compared to benchmark • Historically, the SPH BoB has varied by less than 1% from the Public Report benchmark • Provides a CCC benchmark
CONS	<ul style="list-style-type: none"> • Only contains benchmarks for certain key questions, composites, and rating questions 	<ul style="list-style-type: none"> • Only contains benchmarks for certain key questions, composites, and rating questions 	<ul style="list-style-type: none"> • Only contains benchmarks for certain key questions, composites, and rating questions 	<ul style="list-style-type: none"> • Only contains benchmarks for certain key questions, composites, and rating questions 	<ul style="list-style-type: none"> • Contains fewer plans than the Public Report and the Quality Compass® All Plans Benchmarks 	<ul style="list-style-type: none"> • Contains fewer plans than the Public Report and the Quality Compass® All Plans Benchmarks
# OF PLANS	175	49	175	49	181	69

Summary Rate Scores - General Population

STAR RATING MEASURES		2021 VALID N	2019	2020	2021	2021 SPH GP BENCHMARK	2020 QC GP BENCHMARK
7 Total Star Rating ★ Measures	Rating Questions (% 9 or 10)						
	★ Q49. Rating of Health Plan	245	72.7%	70.4%	74.3%	73.3%	71.9%
	★ Q9. Rating of Health Care	110	64.7%	71.3%	71.8%	74.4%	71.9%
	★ Q36. Rating of Personal Doctor	194	73.1%	83.4%	79.4%	78.6%	78.6%
	★ Q43. Rating of Specialist	32^	76.8%	78.7%	68.8%	75.7%	73.4%
4 Above QC GP Benchmark	Rating Questions (% 8, 9 or 10)						
	Q49. Rating of Health Plan	245	86.9%	87.3%	88.2%	87.3%	86.5%
	Q9. Rating of Health Care	110	83.5%	87.8%	85.5%	88.7%	88.0%
	Q36. Rating of Personal Doctor	194	87.7%	91.1%	92.3%	90.8%	90.9%
	Q43. Rating of Specialist	32^	91.5%	87.2%	81.3%	88.2%	87.0%
3 At or Below QC GP Benchmark	★ Getting Needed Care (% Always or Usually)	73^	85.3%	85.2%	86.2%	86.6%	86.0%
	Q10. Getting care, tests, or treatment	110	90.1%	89.6%	89.1%	90.8%	91.2%
	Q41. Getting specialist appointment	36^	80.5%	80.9%	83.3%	82.4%	79.8%
	★ Getting Care Quickly (% Always or Usually)	77^	84.8%	87.9%	84.8%	87.8%	90.5%
	Q4. Getting urgent care	34^	87.0%	84.9%	91.2%	91.7%	92.6%
Q6. Getting routine care	120	82.7%	90.8%	78.3% ↓	83.8%	89.0% ▼	
Other Measure (% Always or Usually)							
	★ Q35. Coordination of Care	40^	82.6%	81.7%	92.5%	84.9%	86.1%

Note: Please refer to benchmark descriptions on slide 44.

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

Summary Rate Scores - General Population

OTHER MEASURES

(Not used for accreditation/ratings)

	2021 VALID N	2019	2020	2021	2021 SPH GP BENCHMARK	2020 QC GP BENCHMARK
Customer Service (% Always or Usually)	41[^]	94.5%	92.0%	93.9%	88.3%	88.8%
Q45. Provided information or help	41 [^]	90.0%	84.1%	87.8%	82.5%	83.8%
Q46. Treated with courtesy and respect	40 [^]	99.1%	100%	100%	94.0% ▲	93.8% ▲
How Well Doctors Communicate (% Always or Usually)	113	92.9%	95.5%	94.9%	94.5%	95.3%
Q27. Personal doctor explained things	113	94.9%	95.4%	93.8%	94.8%	95.6%
Q28. Personal doctor listened carefully	113	93.6%	96.6%	98.2% ‡	95.9%	96.4%
Q29. Personal doctor showed respect	111	97.0%	98.8%	99.1%	96.9% ▲	97.2% ▲
Q32. Personal doctor spent enough time	113	86.0%	91.2%	88.5%	90.4%	91.9%
Other Measure (% Always or Usually)						
Q48. Ease of filling out forms	245	97.4%	96.7%	98.0%	96.0% ▲	96.5%



Summary Rate Scores - CCC Population

STAR RATING MEASURES

CCC POPULATION SCORES ARE NOT USED FOR ACCREDITATION

	2021 VALID N	2019	2020	2021	2021 SPH CCC BENCHMARK	2020 QC CCC BENCHMARK
Rating Questions (% 9 or 10)						
★ Q49. Rating of Health Plan	143	68.4%	70.1%	71.3%	71.9%	69.3%
★ Q9. Rating of Health Care	92 [^]	62.1%	67.2%	69.6%	73.0%	71.0%
★ Q36. Rating of Personal Doctor	125	72.0%	75.4%	82.4% ‡	78.8%	78.4%
★ Q43. Rating of Specialist	53 [^]	76.7%	80.0%	69.8%	75.7%	75.2%
Rating Questions (% 8, 9 or 10)						
Q49. Rating of Health Plan	143	85.3%	85.0%	83.9%	85.9%	84.8%
Q9. Rating of Health Care	92 [^]	85.6%	84.3%	80.4%	87.3%	87.6%
Q36. Rating of Personal Doctor	125	86.4%	90.1%	91.2%	89.8%	90.1%
Q43. Rating of Specialist	53 [^]	89.3%	87.7%	83.0%	88.1%	87.9%
★ Getting Needed Care (% Always or Usually)						
Q10. Getting care, tests, or treatment	92 [^]	88.0%	88.1%	88.0%	91.4%	92.2%
Q41. Getting specialist appointment	56 [^]	77.8%	79.1%	80.4%	85.3%	84.8%
★ Getting Care Quickly (% Always or Usually)						
Q4. Getting urgent care	43 [^]	94.1%	85.3%	93.0%	92.9%	95.3%
Q6. Getting routine care	93 [^]	90.2%	88.5%	84.9%	89.3%	91.9%
Other Measure (% Always or Usually)						
★ Q35. Coordination of Care	48 [^]	83.0%	80.0%	79.2%	83.1%	85.1%

Summary Rate Scores - CCC Population

OTHER MEASURES

(Not used for accreditation/ratings)

	2021 Valid n	2019	2020	2021	2021 SPH CCC BENCHMARK	2020 QC CCC BENCHMARK
Customer Service (% Always or Usually)	27^	96.6%	90.2%	88.9%	90.2%	90.3%
Q45. Provided information or help	27^	93.2%	82.6%	85.2%	85.1%	85.3%
Q46. Treated with courtesy and respect	27^	100%	97.8%	92.6%	95.3%	95.4%
How Well Doctors Communicate (% Always or Usually)	92^	94.1%	96.0%	96.5%	94.9%	95.8%
Q27. Personal doctor explained things	92^	95.2%	95.2%	96.7%	95.6%	96.3%
Q28. Personal doctor listened carefully	92^	95.8%	97.6%	96.7%	96.0%	96.3%
Q29. Personal doctor showed respect	91^	97.6%	100%	98.9%	96.8%	97.3%
Q32. Personal doctor spent enough time	92^	88.0%	91.1%	93.5%	91.3%	93.2%
Other Measure (% Always or Usually)						
Q48. Ease of filling out forms	141	94.7%	97.8%	97.9%	95.9%	96.4%



Summary Rate Scores - CCC Population

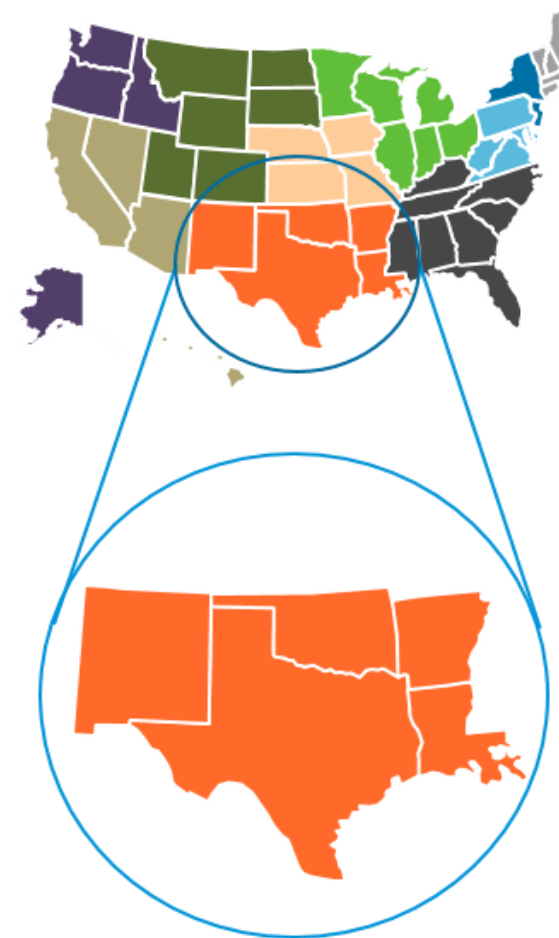
CCC MEASURES

	2021 Valid n	2019	2020	2021	2021 SPH CCC BENCHMARK	2020 QC CCC BENCHMARK
Q51. Access to Prescription Medicines (% Always or Usually)	104	93.7%	91.2%	93.3%	91.8%	91.3%
Access to Specialized Services (% Always or Usually)	33 [^]	77.8%	77.2%	86.4%	75.6% ▲	74.5% ▲
Q15. Ease of getting special medical equipment or devices	10 [^]	73.3%	76.0%	90.0%	75.5%	NA
Q18. Ease of getting therapy	27 [^]	85.1%	76.7%	85.2%	76.4%	74.1%
Q21. Ease of getting treatment or counseling	62 [^]	75.0%	78.9%	83.9%	74.7%	76.9%
FCC: Personal Doctor Who Knows Child (% Yes)	88 [^]	90.3%	94.0%	91.3%	91.5%	91.6%
Q33. Doctor talked about how child is feeling, growing, and behaving	90 [^]	90.3%	92.6%	92.2%	90.3%	90.0%
Q38. Doctor understands how these conditions affect child's day-to-day life	86 [^]	92.5%	98.1%	93.0%	93.7%	93.8%
Q39. Doctor understands how these conditions affect family's day-to-day life	87 [^]	88.2%	91.4%	88.5%	90.6%	90.6%
Q8. FCC: Getting Needed Information (% Always or Usually)	92 [^]	90.9%	92.6%	90.2%	91.4%	93.1%
Coordination of Care for CCC (% Yes)	36 [^]	77.2%	74.1%	71.1%	76.6%	76.4%
Q13. Obtained help from doctors or health providers in contacting child's school or daycare	13 [^]	88.9%	96.3%	84.6%	92.9%	NA
Q24. Obtained help coordinating child's care among different providers or services	59 [^]	65.6%	51.9%	57.6%	60.2%	58.7%

Regional Performance - General Population

	SUMMARY RATE	2021 SPH BoB REGION
Rating Questions (% 9 or 10)		
Q49. Rating of Health Plan	74.3%	77.3%
Q9. Rating of Health Care	71.8%	76.8%
Q36. Rating of Personal Doctor	79.4%	79.4%
Q43. Rating of Specialist	68.8%	79.1%
Rating Questions (% 8, 9 or 10)		
Q49. Rating of Health Plan	88.2%	89.6%
Q9. Rating of Health Care	85.5%	89.4%
Q36. Rating of Personal Doctor	92.3%	91.2%
Q43. Rating of Specialist	81.3%	89.2%
Getting Needed Care (% Always or Usually)		
Q10. Getting care, tests, or treatment	89.1%	89.8%
Q41. Getting specialist appointment	83.3%	81.9%
Getting Care Quickly (% Always or Usually)		
Q4. Getting urgent care	91.2%	90.9%
Q6. Getting routine care	78.3%	82.7%
Coordination of Care (Q35) (% Always or Usually)		
	92.5% ◆	83.7%

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 (◆) or lower (◆) than the 2021 SPH BoB Region score.

Percentile Rankings - General Population

	2021 Plan Score	QC %tile	National Percentiles from 2020 Quality Compass									SPH %tile	National Percentiles from 2021 SPH Book of Business								
			5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th		5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
Rating Questions (% 9 or 10)																					
Q49. Rating of Health Plan	74.3%	62 nd	60.6	63.6	68.9	70.6	73.3	74.6	75.5	77.9	80.5	50 th	61.6	65.4	69.8	71.5	74.2	76.4	77.4	80.3	81.8
Q9. Rating of Health Care	71.8%	45 th	63.0	66.1	69.3	70.3	72.4	74.0	75.5	77.7	79.8	30 th	66.2	68.6	71.2	72.1	74.4	76.4	77.0	80.5	82.5
Q36. Rating of Personal Doctor	79.4%	52 nd	72.0	73.1	75.9	77.2	79.0	80.7	81.4	83.3	84.3	58 th	72.0	74.1	75.8	76.8	78.5	80.2	81.2	83.5	84.5
Q43. Rating of Specialist	68.8%	14 th	66.9	68.0	71.3	73.6	74.2	74.4	75.0	76.8	77.4	15 th	61.7	65.9	71.5	72.5	75.1	78.3	80.0	84.0	85.5
Rating Questions (% 8, 9 or 10)																					
Q49. Rating of Health Plan	88.2%	60 th	79.2	81.3	84.4	85.7	87.4	88.6	89.3	91.7	92.4	52 nd	80.4	82.2	84.9	85.6	88.1	89.5	90.1	92.0	92.8
Q9. Rating of Health Care	85.5%	21 st	82.3	83.9	86.0	86.8	88.5	89.7	90.6	92.2	93.1	18 th	83.7	84.5	86.3	87.4	88.8	90.1	90.9	93.4	94.7
Q36. Rating of Personal Doctor	92.3%	71 st	86.0	87.6	89.5	90.2	91.2	92.0	92.5	93.8	94.8	71 st	86.4	87.3	88.9	89.8	91.0	92.0	92.6	94.0	94.8
Q43. Rating of Specialist	81.3%	<5 th	83.0	84.8	85.0	86.5	87.1	87.9	87.9	89.6	91.9	11 th	79.3	80.8	85.5	86.4	88.0	90.2	91.2	94.0	96.2
Getting Needed Care (% A or U)																					
Q10. Getting care, tests, or treatment	89.1%	25 th	84.8	86.7	89.1	90.0	92.0	93.3	93.8	95.4	96.2	33 rd	83.6	85.6	88.3	89.1	91.0	93.0	93.3	95.0	96.0
Q41. Getting specialist appointment	83.3%	73 rd	70.9	72.1	75.4	78.3	79.7	82.1	83.7	87.7	88.1	54 th	66.7	72.3	78.1	80.0	82.7	84.8	86.1	89.7	92.4
Getting Care Quickly (% A or U)																					
Q4. Getting urgent care	91.2%	32 nd	85.7	86.2	90.3	91.7	93.3	94.8	95.6	96.7	97.1	43 rd	81.8	83.8	87.9	89.5	92.0	93.9	95.2	96.9	98.1
Q6. Getting routine care	78.3%	<5 th	79.4	81.8	86.1	88.3	90.1	91.7	92.4	94.3	94.9	16 th	72.1	75.8	79.9	82.2	85.2	86.8	88.1	90.7	91.7
Q35. Coordination of Care (% A or U)																					
	92.5%	100 th	77.3	79.7	83.9	85.3	87.1	88.2	89.3	90.7	91.7	91 st	73.6	76.9	81.6	82.9	85.1	87.6	88.9	92.3	94.1

% A = % Always, % U = % Usually, % S = % Sometimes. Shading indicates that the plan has achieved the percentile level in the column header.

Percentile Rankings - General Population

	2021 Plan Score	QC %tile	National Percentiles from 2020 Quality Compass									SPH %tile	National Percentiles from 2021 SPH Book of Business								
			5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th		5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
Customer Service (% A or U)	93.9%	97th	81.7	85.1	87.0	87.3	89.0	90.3	91.1	92.9	93.8	96th	80.5	82.8	86.1	86.8	88.5	90.4	91.1	93.1	93.7
Q45. Provided information or help	87.8%	80 th	73.0	77.0	81.0	82.0	84.4	85.9	87.3	89.5	90.4	83 rd	73.1	75.0	79.1	80.0	82.9	85.5	86.6	89.1	90.2
Q46. Treated with courtesy and respect	100%	100 th	90.1	91.0	92.0	92.9	94.0	94.9	95.5	97.3	97.3	100 th	87.8	90.2	92.1	92.7	94.2	95.8	96.4	98.0	98.7
How Well Doctors Communicate (% A or U)	94.9%	38th	91.6	92.5	94.3	94.7	95.5	96.4	96.6	97.6	98.0	54th	90.5	91.3	92.9	93.4	94.5	95.8	96.4	97.4	97.9
Q27. Personal doctor explained things	93.8%	20 th	90.9	92.2	94.4	95.2	96.0	97.1	97.3	98.0	98.5	34 th	89.6	91.8	93.1	93.6	94.8	96.2	96.9	98.0	98.7
Q28. Personal doctor listened carefully	98.2%	86 th	93.1	94.2	95.3	95.8	96.6	97.3	97.5	98.5	98.7	86 th	92.2	93.2	94.6	95.2	95.9	97.2	97.5	98.4	99.2
Q29. Personal doctor showed respect	99.1%	92 nd	94.7	95.3	96.3	96.6	97.3	97.9	98.1	99.0	99.3	92 nd	94.0	94.4	95.8	96.1	97.0	97.8	98.2	98.9	99.2
Q32. Personal doctor spent enough time	88.5%	19 th	85.5	86.9	89.0	90.6	92.5	93.7	94.3	96.4	97.2	32 nd	82.7	84.5	87.9	88.5	90.7	92.8	94.0	95.5	96.5
Ease of Filling Out Forms (Q48) (% A or U)	98.0%	81st	93.2	94.4	95.5	96.0	96.6	97.3	97.6	98.4	98.9	90th	92.9	93.7	94.8	95.3	96.2	96.9	97.2	98.0	98.3

% A = % Always, % U = % Usually, % S = % Sometimes. Shading indicates that the plan has achieved the percentile level in the column header.

Percentile Rankings - CCC Population

	2021 Plan Score	QC %tile	National Percentiles from 2020 Quality Compass									SPH %tile	National Percentiles from 2021 SPH Book of Business								
			5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th		5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
Rating Questions (% 9 or 10)																					
Q49. Rating of Health Plan	71.3%	55 th	56.9	59.8	66.0	66.4	70.1	73.2	74.2	76.2	77.1	44 th	60.9	62.7	67.7	69.2	71.9	74.9	76.3	78.0	79.7
Q9. Rating of Health Care	69.6%	38 th	62.3	62.9	67.8	68.9	71.1	73.2	74.6	78.2	78.8	25 th	63.2	64.4	69.6	70.9	73.4	75.7	77.1	79.3	79.7
Q36. Rating of Personal Doctor	82.4%	83 rd	73.4	74.5	75.6	77.3	78.4	79.4	81.0	83.6	84.3	75 th	73.7	74.5	76.1	77.2	79.2	81.8	82.4	84.0	85.2
Q43. Rating of Specialist	69.8%	11 th	66.7	67.7	71.7	72.1	75.5	78.0	79.8	81.5	83.6	18 th	66.7	67.7	71.1	72.0	75.0	78.7	80.2	82.7	82.8
Rating Questions (% 8, 9 or 10)																					
Q49. Rating of Health Plan	83.9%	34 th	78.2	79.5	83.1	83.7	85.2	86.9	87.8	89.3	89.7	31 st	78.1	80.3	83.1	83.9	86.4	88.0	88.5	90.2	90.7
Q9. Rating of Health Care	80.4%	<5 th	82.4	83.3	84.6	86.3	88.5	89.9	90.3	91.6	92.1	<5 th	82.1	83.2	85.0	86.1	87.6	89.1	89.6	91.3	93.5
Q36. Rating of Personal Doctor	91.2%	64 th	84.0	85.5	89.0	89.8	90.5	91.3	92.2	93.0	94.0	63 rd	84.9	87.0	88.1	88.5	90.4	91.5	91.9	93.7	94.1
Q43. Rating of Specialist	83.0%	7 th	82.5	83.1	85.6	87.4	88.2	89.3	89.5	92.1	92.5	14 th	80.3	82.1	84.9	86.6	88.3	90.2	91.1	92.5	93.1
Getting Needed Care (% A or U)																					
Q10. Getting care, tests, or treatment	88.0%	12 th	86.3	86.8	89.7	91.5	93.0	94.1	94.7	95.8	95.9	18 th	85.6	86.6	88.9	89.6	91.5	93.2	93.4	94.5	94.8
Q41. Getting specialist appointment	80.4%	18 th	74.8	75.7	81.8	83.1	86.1	87.9	88.8	90.5	91.0	20 th	73.8	76.8	81.8	82.8	85.3	88.2	88.7	89.9	90.6
Getting Care Quickly (% A or U)																					
Q4. Getting urgent care	93.0%	18 th	89.9	91.9	93.6	93.9	95.8	97.0	97.2	98.3	99.3	44 th	85.3	87.8	90.4	91.3	93.3	94.2	95.2	97.0	97.4
Q6. Getting routine care	84.9%	<5 th	85.9	87.3	89.6	90.7	92.3	93.7	94.5	96.0	96.7	11 th	82.5	84.2	86.7	87.4	89.3	90.6	91.4	93.3	94.3
Q35. Coordination of Care (% A or U)	79.2%	13th	76.1	78.9	84.4	84.7	85.7	86.9	87.4	88.9	92.5	13th	72.1	79.0	80.4	81.7	83.3	84.6	85.5	89.5	91.2

% A = % Always, % U = % Usually, % S = % Sometimes. Shading indicates that the plan has achieved the percentile level in the column header.

Percentile Rankings - CCC Population

	2021 Plan Score	QC %tile	National Percentiles from 2020 Quality Compass									SPH %tile	National Percentiles from 2021 SPH Book of Business								
			5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th		5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
Customer Service (% A or U)	88.9%	37th	87.2	87.2	87.9	88.4	91.2	92.4	92.4	92.7	92.7	31st	83.3	85.5	87.5	89.0	90.0	91.0	91.9	94.1	94.8
Q45. Provided information or help	85.2%	37 th	80.2	80.2	82.4	83.5	86.2	87.7	87.8	89.5	89.5	55 th	75.7	77.8	82.1	82.9	84.4	87.2	88.0	91.4	92.5
Q46. Treated with courtesy and respect	92.6%	<5 th	93.3	93.3	93.8	94.2	95.9	96.4	96.6	97.1	97.1	20 th	90.9	91.4	92.7	93.6	95.2	96.6	96.8	98.0	98.3
How Well Doctors Communicate (% A or U)	96.5%	60th	93.0	93.3	95.0	95.6	96.2	96.7	97.1	97.5	97.7	80th	90.8	92.3	93.4	94.4	95.3	96.0	96.2	97.3	97.6
Q27. Personal doctor explained things	96.7%	47 th	92.2	94.1	95.2	96.0	96.7	97.1	97.4	98.7	99.0	69 th	91.5	92.0	94.8	95.3	95.8	96.6	97.0	97.8	98.8
Q28. Personal doctor listened carefully	96.7%	54 th	92.4	93.6	95.7	96.1	96.6	97.0	97.2	98.3	98.9	59 th	92.9	94.0	95.2	95.4	96.4	97.1	97.5	98.0	98.3
Q29. Personal doctor showed respect	98.9%	86 th	95.1	95.8	96.7	96.9	97.3	97.9	98.0	99.3	99.5	94 th	94.0	94.6	95.7	96.3	97.2	98.0	98.0	98.5	98.9
Q32. Personal doctor spent enough time	93.5%	39 th	88.5	88.9	91.5	93.2	93.8	94.8	95.1	96.4	96.5	65 th	84.5	85.6	88.1	89.7	91.9	93.8	94.3	95.9	96.2
Ease of Filling Out Forms (Q48) (% A or U)	97.9%	81st	94.1	94.4	95.5	96.1	96.5	97.1	97.6	98.6	98.9	93rd	92.8	94.0	95.0	95.5	96.0	96.5	96.9	97.7	98.1

% A = % Always, % U = % Usually, % S = % Sometimes. Shading indicates that the plan has achieved the percentile level in the column header.

Percentile Rankings - CCC Population

CCC Population	2021 Plan Score	QC %tile	National Percentiles from 2020 Quality Compass									SPH %tile	National Percentiles from 2021 SPH Book of Business								
			5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th		5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
Q51. Access to Prescription Medicines (% A or U)	93.3%	69th	86.5	87.1	89.1	89.7	91.4	92.7	93.6	95.4	96.3	70th	85.4	87.7	90.5	90.9	92.4	93.2	94.0	95.1	96.0
Access to Specialized Services (% A or U)	86.4%	100th	66.6	66.6	71.4	71.4	75.0	75.4	75.4	82.7	82.7	98th	63.2	66.6	70.6	72.6	74.8	78.0	80.4	83.8	85.2
Q15. Ease of getting special medical equipment or devices	90.0%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	94 th	57.1	61.1	68.8	70.5	75.0	81.9	84.4	86.7	90.0
Q18. Ease of getting therapy	85.2%	85 th	66.4	66.4	67.3	70.8	72.8	76.4	79.2	86.0	86.0	90 th	60.0	63.2	69.6	72.1	77.1	79.6	80.5	85.2	90.9
Q21. Ease of getting treatment or counseling	83.9%	75 th	65.6	66.9	72.4	73.1	76.9	80.4	81.9	86.3	87.3	91 st	60.3	64.4	69.4	71.2	74.7	78.1	80.4	83.6	84.5
FCC: Personal Doctor Who Knows Child (% Yes)	91.3%	36th	86.5	88.2	90.1	91.2	91.9	93.1	93.6	94.4	94.6	45th	87.8	88.5	90.6	90.8	91.5	92.5	92.8	94.4	95.2
Q33. Doctor talked about how child is feeling, growing, and behaving	92.2%	71 st	83.8	87.5	88.8	89.2	90.2	91.6	92.2	92.9	93.8	74 th	85.0	86.7	88.5	89.4	90.6	91.7	92.2	93.8	94.4
Q38. Doctor understands how these conditions affect child's day-to-day life	93.0%	30 th	88.4	89.7	92.4	93.3	94.3	95.3	96.2	96.7	97.5	33 rd	89.1	90.6	92.3	93.0	93.8	94.7	95.1	96.7	97.3
Q39. Doctor understands how these conditions affect family's day-to-day life	88.5%	16 th	84.6	85.6	89.1	89.8	90.6	92.6	92.9	94.0	94.7	23 rd	85.5	86.8	88.9	89.9	91.0	91.7	92.0	93.9	94.9
Q8. FCC: Getting Needed Information (% A or U)	90.2%	6th	89.1	90.3	91.7	92.1	93.4	93.8	94.7	95.6	96.7	33rd	85.5	87.3	89.4	90.2	91.7	92.6	93.0	95.1	96.9
Coordination of Care for CCC (% Yes)	71.1%	<5th	71.9	71.9	72.0	75.2	77.9	78.9	79.0	79.6	80.3	18th	67.4	69.3	73.6	75.2	76.7	78.5	78.9	81.4	83.3
Q13. Obtained help from doctors or health providers in contacting child's school or daycare	84.6%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	13 th	80.0	81.5	88.4	90.3	93.2	95.7	95.8	100	100
Q24. Obtained help coordinating child's care among different providers or services	57.6%	48 th	50.0	50.8	54.5	55.3	58.7	62.0	63.6	66.9	67.0	38 th	50.3	51.2	56.1	56.9	61.1	63.0	64.2	67.8	70.2

% A = % Always, % U = % Usually, % S = % Sometimes. Shading indicates that the plan has achieved the percentile level in the column header.



Profile of Survey Respondents



Demographic Composition

- Presbyterian Centennial Care



Profile of Survey Respondents: Section Information

Demographic Profile The demographic characteristics of respondents surveyed should be representative of your member population. SPH Analytics follows NCQA protocol to help achieve a representative sample of your plan's member population.

The percentages of respondents are displayed by demographic category (Child's Age, Gender, Health Status, Mental/Emotional Health Status, Ethnicity, and Race, as well as Respondent's Age, Gender, Education and Relation to Child) from your current survey, compared to trend data (if applicable) and the 2021 SPH Analytics Medicaid Child with CCC Book of Business and the 2020 Medicaid Child with CCC Quality Compass[®] All Plans benchmarks. NCQA did not provide Quality Compass demographic benchmarks in 2020.

The demographic makeup of your plan's member base may not mirror the "average" plan; therefore, caution is recommended when making comparisons to benchmark data. To help you identify how your plan's population compares to other plans and to previous data, statistically significant differences are notated. Refer to the Technical Notes for more information on this topic.

Significance Testing

Current year score is significantly higher than the 2020 score (↑), the 2019 score (‡) or benchmark score (▲).

Current year score is significantly lower than the 2020 score (↓), the 2019 score (‡) or benchmark score (▼).

SPH refers to the 2021 SPH Analytics Book of Business benchmark.

QC refers to the 2020 Quality Compass[®] All Plans benchmark.

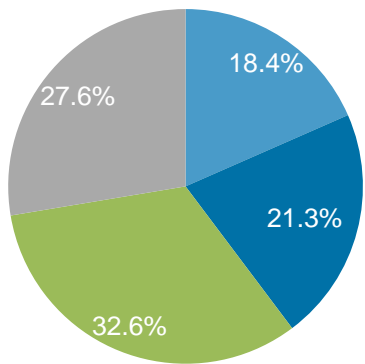
No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% confidence level.

Profile of Survey Respondents - General Population

Survey Demographics

The demographic characteristics of respondents surveyed should be representative of your member population. SPH Analytics follows NCQA protocol to help achieve a representative sample of your plan's member population.

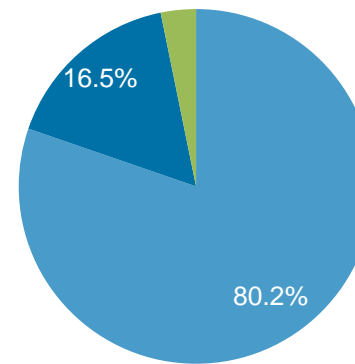
Child's Age



	0 - 4	5 - 8	9 - 13	14 or older
2021	18.4%	21.3%	32.6%	27.6%
2020	19.3%	18.7%	34.1%	27.9%
2019	19.3%	21.7%	31.5%	27.5%
SPH	21.4%	21.1%	29.7%	27.7%
QC	NA	NA	NA	NA

■ 0-4 ■ 5-8 ■ 9-13 ■ 14 or older

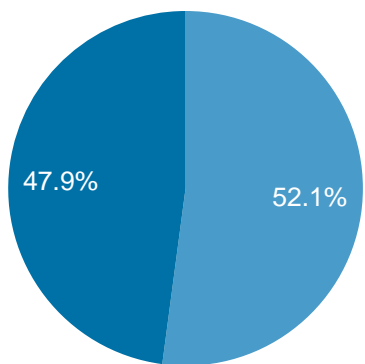
Child's Health Status



	Excellent/Very Good	Good	Fair/Poor
2021	80.2% ↑	16.5% ↓	3.2% ↓
2020	79.8%	15.1%	5.1%
2019	69.0%	23.1%	7.9%
SPH	76.5%	18.7%	4.8%
QC	NA	NA	NA

■ Excellent/Very Good ■ Good ■ Fair/Poor

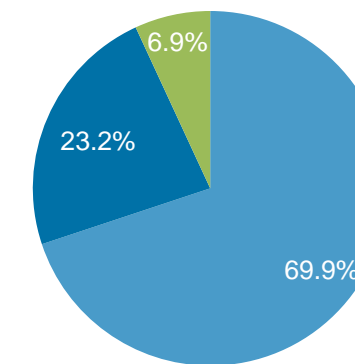
Child's Gender



	Male	Female
2021	52.1%	47.9%
2020	48.7%	51.3%
2019	53.4%	46.6%
SPH	52.9%	47.1%
QC	NA	NA

■ Male ■ Female

Child's Mental/Emotional Health Status



	Excellent/Very Good	Good	Fair/Poor
2021	69.9%	23.2%	6.9%
2020	70.6%	22.7%	6.8%
2019	70.1%	20.5%	9.4%
SPH	68.3%	20.5%	11.3% ▼
QC	NA	NA	NA

■ Excellent/Very Good ■ Good ■ Fair/Poor

Note: NCQA did not provide Quality Compass demographic benchmarks in 2020.

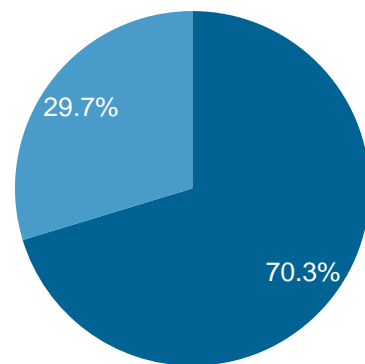
Note: Due to space constraints, scores <5% will not be labeled on the graph.

Profile of Survey Respondents - General Population

Survey Demographics

The demographic characteristics of respondents surveyed should be representative of your member population. SPH Analytics follows NCQA protocol to help achieve a representative sample of your plan's member population.

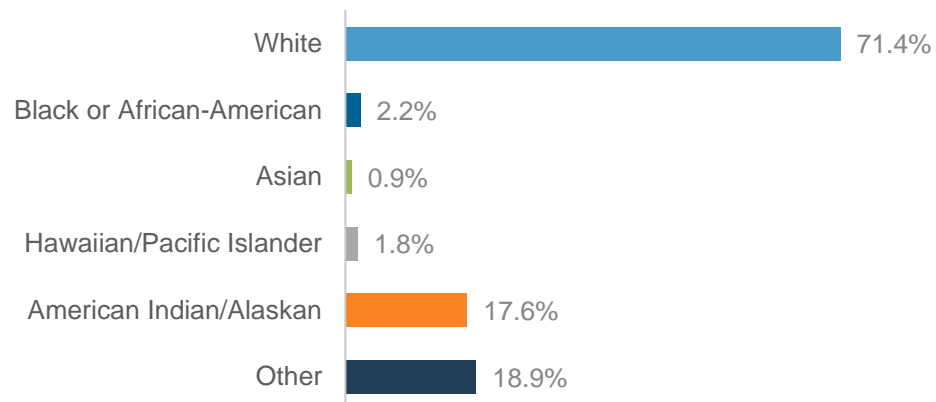
Child's Ethnicity



■ Hispanic/Latino ■ Not Hispanic/Latino

	Hispanic/Latino	Not Hispanic/Latino
2021	70.3% ↓	29.7% ↑
2020	75.0%	25.0%
2019	77.7%	22.3%
SPH	34.0% ▲	66.0% ▼
QC	NA	NA

Child's Race



	White	Black or African-American	Asian	Hawaiian/Pacific Islander	American Indian/Alaskan	Other
2021	71.4%	2.2% ↓	0.9%	1.8%	17.6% ↑	18.9% ↓
2020	68.4%	5.8%	1.8%	1.5%	17.8%	22.2%
2019	66.7%	5.0%	2.1%	0.3%	10.3%	29.8%
SPH	63.5% ▲	23.8% ▼	6.4% ▼	1.1%	3.0% ▲	15.2%
QC	NA	NA	NA	NA	NA	NA

Note: NCQA did not provide Quality Compass demographic benchmarks in 2020.

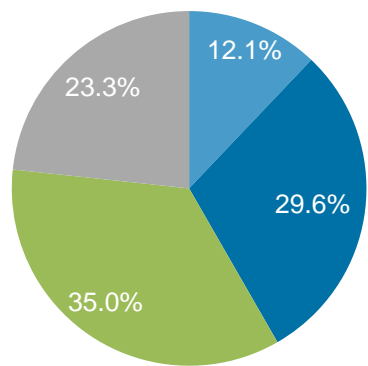
Note: Due to space constraints, scores <5% will not be labeled on the graph.

Profile of Survey Respondents - General Population

Survey Demographics

The demographic characteristics of respondents surveyed should be representative of your member population. SPH Analytics follows NCQA protocol to help achieve a representative sample of your plan's member population.

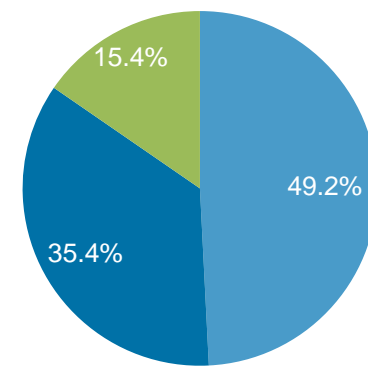
Respondent's Age



	24 or younger	25 - 34	35 - 44	45 or older
2021	12.1%	29.6%	35.0%	23.3%
2020	9.3%	29.8%	33.8%	27.2%
2019	11.4%	31.6%	31.3%	25.6%
SPH	12.4%	24.0%	33.6%	30.1% ▼
QC	NA	NA	NA	NA

■ 24 or younger ■ 25-34

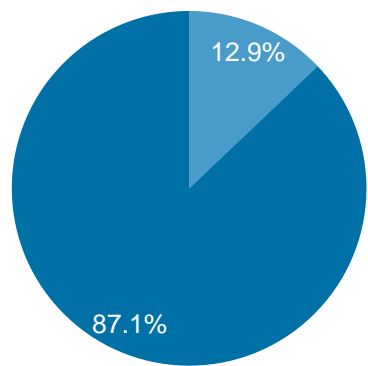
Respondent's Education



	HS Graduate or Less	Some College	College Graduate or More
2021	49.2%	35.4%	15.4%
2020	48.3%	38.3%	13.3%
2019	50.8%	32.5%	16.7%
SPH	50.3%	31.7%	18.0%
QC	NA	NA	NA

■ HS Graduate or Less ■ Some College

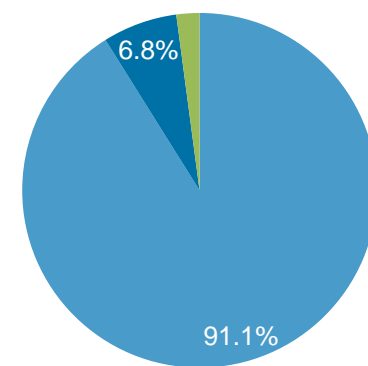
Respondent's Gender



	Male	Female
2021	12.9%	87.1%
2020	10.9%	89.1%
2019	10.1%	89.9%
SPH	12.7%	87.3%
QC	NA	NA

■ Male ■ Female

Respondent's Relation to Child



	Parent	Grandparent	Other
2021	91.1% ↑	6.8%	2.1% ↓
2020	85.5%	7.8%	6.8%
2019	89.8%	5.8%	4.4%
SPH	89.9%	6.6%	3.4%
QC	NA	NA	NA

■ Parent ■ Grandparent ■ Other

Note: NCQA did not provide Quality Compass demographic benchmarks in 2020.

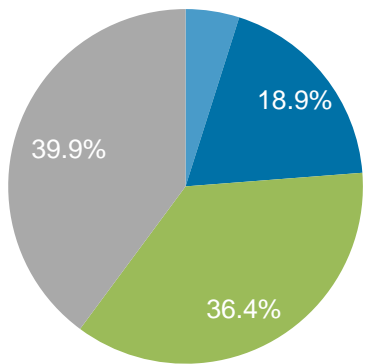
Note: Due to space constraints, scores <5% will not be labeled on the graph.

Profile of Survey Respondents - CCC Population

Survey Demographics

The demographic characteristics of respondents surveyed should be representative of your member population. SPH Analytics follows NCQA protocol to help achieve a representative sample of your plan's member population.

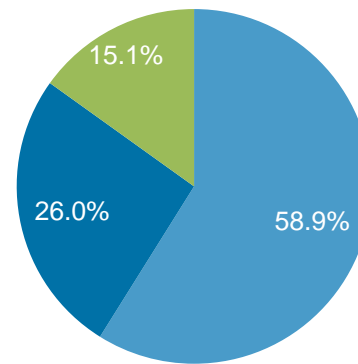
Child's Age



	0 - 4	5 - 8	9 - 13	14 or older
2021	4.9%	18.9%	36.4%	39.9%
2020	8.0%	20.9%	28.9%	42.2%
2019	10.0%	17.4%	36.5%	36.1%
SPH	10.3% ▼	19.9%	35.8%	34.0%
QC	NA	NA	NA	NA

■ 0-4 ■ 5-8 ■ 9-13 ■ 14 or older

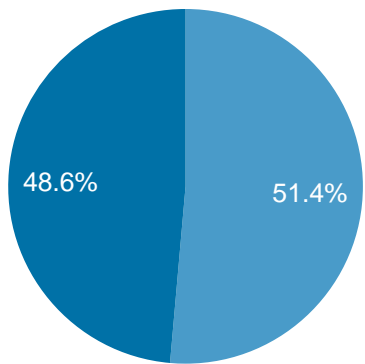
Child's Health Status



	Excellent/Very Good	Good	Fair/Poor
2021	58.9%	26.0%	15.1%
2020	60.3%	29.1%	10.6%
2019	50.9%	33.0%	16.1%
SPH	55.8%	31.7%	12.5%
QC	NA	NA	NA

■ Excellent/Very Good ■ Good ■ Fair/Poor

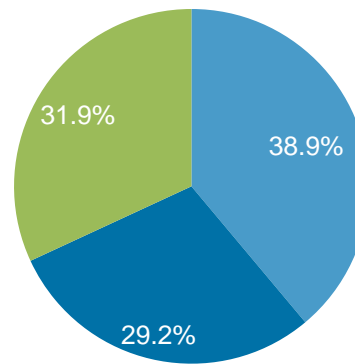
Child's Gender



	Male	Female
2021	51.4% ↓	48.6% ↑
2020	51.9%	48.1%
2019	62.5%	37.5%
SPH	59.1%	40.9%
QC	NA	NA

■ Male ■ Female

Child's Mental/Emotional Health Status



	Excellent/Very Good	Good	Fair/Poor
2021	38.9%	29.2%	31.9%
2020	45.7%	28.7%	25.5%
2019	40.1%	33.2%	26.7%
SPH	36.4%	32.4%	31.1%
QC	NA	NA	NA

■ Excellent/Very Good ■ Good ■ Fair/Poor

Note: NCQA did not provide Quality Compass demographic benchmarks in 2020.

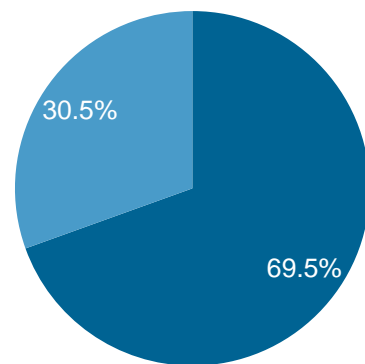
Note: Due to space constraints, scores <5% will not be labeled on the graph.

Profile of Survey Respondents - CCC Population

Survey Demographics

The demographic characteristics of respondents surveyed should be representative of your member population. SPH Analytics follows NCQA protocol to help achieve a representative sample of your plan's member population.

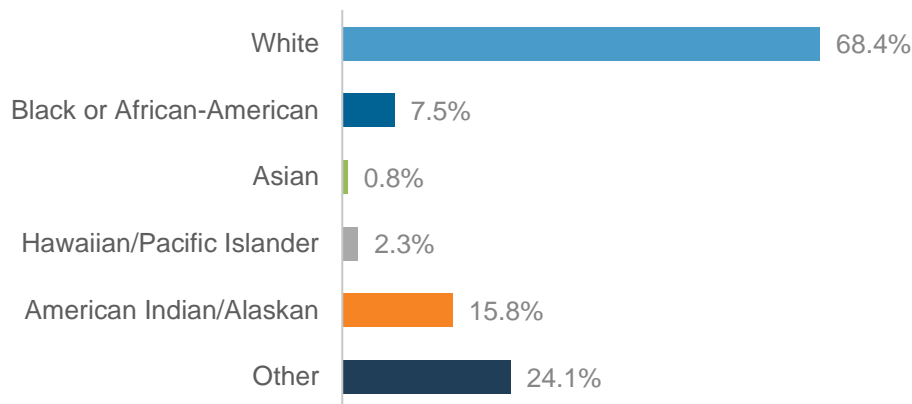
Child's Ethnicity



■ Hispanic/Latino ■ Not Hispanic/Latino

	Hispanic/Latino	Not Hispanic/Latino
2021	69.5%	30.5%
2020	69.2%	30.8%
2019	71.7%	28.3%
SPH	24.2% ▲	75.8% ▼
QC	NA	NA

Child's Race



	White	Black or African-American	Asian	Hawaiian/Pacific Islander	American Indian/Alaskan	Other
2021	68.4%	7.5%	0.8%	2.3%	15.8%	24.1%
2020	67.8%	5.3%	2.3%	2.3%	9.9%	26.9%
2019	67.3%	6.8%	0.5%	0.9%	9.1%	30.0%
SPH	71.3%	25.3% ▼	2.8% ▼	0.8%	3.2% ▲	10.0% ▲
QC	NA	NA	NA	NA	NA	NA

Note: NCQA did not provide Quality Compass demographic benchmarks in 2020.

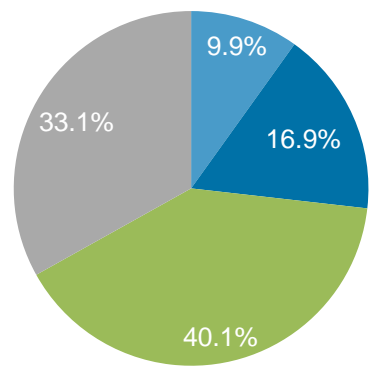
Note: Due to space constraints, scores <5% will not be labeled on the graph.

Profile of Survey Respondents - CCC Population

Survey Demographics

The demographic characteristics of respondents surveyed should be representative of your member population. SPH Analytics follows NCQA protocol to help achieve a representative sample of your plan's member population.

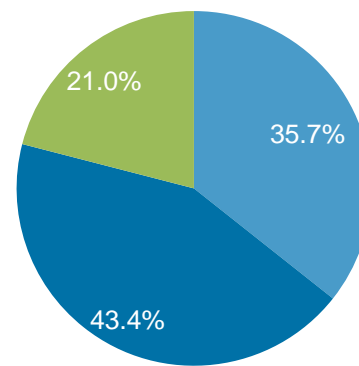
Respondent's Age



	24 or younger	25 - 34	35 - 44	45 or older
2021	9.9%	16.9%	40.1%	33.1%
2020	9.1%	24.1%	30.5%	36.4%
2019	8.7%	21.4%	31.9%	38.0%
SPH	11.4%	16.9%	31.5% ▲	40.2%
QC	NA	NA	NA	NA

■ 24 or younger ■ 25-34

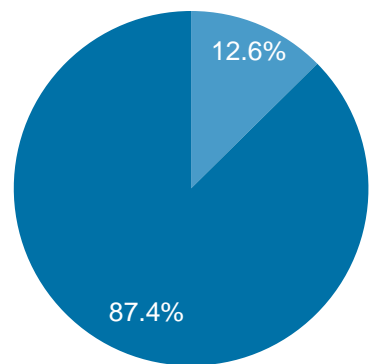
Respondent's Education



	HS Graduate or Less	Some College	College Graduate or More
2021	35.7% ↓	43.4%	21.0%
2020	43.9%	37.4%	18.7%
2019	50.2%	34.4%	15.4%
SPH	44.4% ▼	36.1%	19.5%
QC	NA	NA	NA

■ HS Graduate or Less ■ Some College

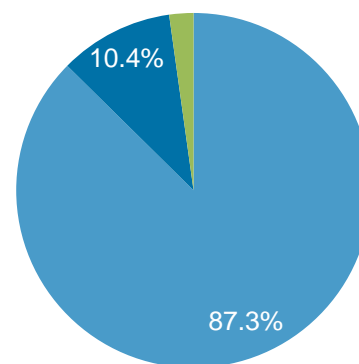
Respondent's Gender



	Male	Female
2021	12.6%	87.4%
2020	10.8%	89.2%
2019	10.0%	90.0%
SPH	10.2%	89.8%
QC	NA	NA

■ Male ■ Female

Respondent's Relation to Child



	Parent	Grandparent	Other
2021	87.3%	10.4%	2.2% ↓↓
2020	81.6%	11.2%	7.3%
2019	84.3%	8.5%	7.2%
SPH	82.6%	11.6%	5.8% ▼
QC	NA	NA	NA

■ Parent ■ Grandparent ■ Other

Note: NCQA did not provide Quality Compass demographic benchmarks in 2020.

Note: Due to space constraints, scores <5% will not be labeled on the graph.



Demographic Segment Analyses

Subgroup Analysis

- Presbyterian Centennial Care

Demographic Analyses: Section Information

Segmenting Responses The CAHPS® 5.1H survey asks demographic questions about the respondent. This section allows you to evaluate the differences across segments of your plan’s members. Reviewing measures across different survey response categories may indicate a health plan’s overall ability to meet the needs of a varied population.

The percentages represent the Summary Rate for each segment. For example, in the table below, the Summary Rate for the *Rating of Health Plan* is the percentage of respondents who rated their health plan an 8, 9 or 10. The interpretation of this example would be, “Of the respondents with a high school education or less, 85% gave their health plan a rating of 8, 9 or 10. And, of the respondents with some college education or more, 80% gave their health plan a rating of 8, 9 or 10.”

	High School or Less (A)	Some College or More (B)
Rating of Health Plan	85% ^B	80%

A letter and green font indicates that result is significantly higher than the corresponding column.

Segment Groups

- Rating of Health Plan (Q49)
- Rating of Health Care (Q9)
- Child’s Health Status (Q53)
- Child’s Mental/Emotional Health Status (Q54)
- Survey Type
- Child’s Age (Q69)
- Child’s Gender (Q70)
- Child’s Race (Q71)
- Child’s Ethnicity (Q72)
- Respondent’s Age (Q73)
- Respondent’s Gender (Q74)
- Respondent’s Education (Q75)

Demographic Segments - General Population

	Rating of Health Plan		Rating of Health Care		Child's Health Status			Child's Mental Health Status			Survey Type			Child's Age			
	8-10	0-7	8-10	0-7	Excellent/ Very good	Good	Fair/Poor	Excellent/ Very good	Good	Fair/Poor	Mail	Phone	Internet	0-4	5-8	9-13	14+
	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)	(W)
<i>Total respondents</i>	216	29	94	16^	199	41	8^	172	57	17^	128	99	21	44	51	78	66
Rating Questions (% 9 or 10)																	
Q49. Rating of Health Plan	84.3%	0.0%	80.6%	31.3%	75.5%	73.2%	50.0%	75.7%	70.2%	76.5%	75.2%	73.7%	71.4%	81.8%	71.4%	77.9%	66.7%
Q9. Rating of Health Care	79.8%	20.0%	84.0%	0.0%	77.6%	55.0%	40.0%	73.0%	72.0%	55.6%	63.6%	80.0%	80.0%	65.4%	84.2%	73.5%	64.3%
Q36. Rating of Personal Doctor	82.1%	55.0%	88.1%	46.2%	78.4%	80.0%	100%	79.7%	81.8%	73.3%	75.0%	84.3%	78.9%	73.7%	92.3% TW	82.8%	67.9%
Q43. Rating of Specialist	72.4%	33.3%	72.7%	0.0%	84.2%	55.6%	25.0%	81.3%	70.0%	40.0%	58.3%	75.0%	75.0%	66.7%	66.7%	80.0%	66.7%
Rating Questions (% 8, 9 or 10)																	
Q49. Rating of Health Plan	100%	0.0%	93.5%	43.8%	89.3%	87.8%	62.5%	88.8%	87.7%	82.4%	84.8%	91.9%	90.5%	90.9%	93.9% W	90.9% W	78.8%
Q9. Rating of Health Care	92.6%	40.0%	100%	0.0%	89.4%	80.0%	40.0%	87.8%	80.0%	77.8%	81.8%	88.9%	90.0%	84.6%	94.7%	82.4%	82.1%
Q36. Rating of Personal Doctor	93.6%	80.0%	97.6%	61.5%	90.8%	97.1%	100%	93.2%	86.4%	100%	89.1%	96.4%	89.5%	94.7%	94.9%	93.1%	86.8%
Q43. Rating of Specialist	86.2%	33.3%	86.4%	0.0%	94.7%	77.8%	25.0%	81.3%	90.0%	60.0%	66.7%	87.5%	100%	66.7%	83.3%	90.0%	83.3%
Getting Needed Care (% A or U)	89.0%	65.0%	90.3%	46.9%	89.1%	88.0%	46.7%	86.7%	98.0%	63.9%	87.4%	83.3%	95.0%	98.1%	94.7%	82.1%	84.6%
Q10. Getting care, tests, or treatment	90.4%	80.0%	92.6%	68.8%	91.8%	85.0%	60.0%	89.2%	96.0%	77.8%	89.1%	88.9%	90.0%	96.2%	89.5%	82.4%	89.3%
Q41. Getting specialist appointment	87.5%	50.0%	88.0%	25.0%	86.4%	90.9%	33.3%	84.2%	100%	50.0%	85.7%	77.8%	100%	100%	100%	81.8%	80.0%
Getting Care Quickly (% A or U)	87.9%	59.2%	87.8%	73.1%	85.7%	79.6%	NA	83.8%	90.7%	74.2%	83.8%	85.2%	90.0%	84.3%	89.5%	81.0%	82.5%
Q4. Getting urgent care	92.9%	80.0%	94.4%	100%	93.1%	80.0%	NA	91.3%	100%	66.7%	93.8%	86.7%	100%	83.3%	100%	85.7%	90.0%
Q6. Getting routine care	83.0%	38.5%	81.3%	46.2%	78.3%	79.2%	75.0%	76.3%	81.5%	81.8%	73.8%	83.7%	80.0%	85.2%	78.9%	76.2%	75.0%
Coordination of Care (Q35) (% A or U)	94.4%	75.0%	90.3%	100%	96.4%	77.8%	100%	96.3%	87.5%	75.0%	88.2%	100%	80.0%	100%	100%	100%	75.0%

% A = % Always, % U = % Usually, % S = % Sometimes. ^Indicates a base size smaller than 20. Interpret results with caution.

Demographic Segments - General Population

	Rating of Health Plan		Rating of Health Care		Child's Health Status			Child's Mental Health Status			Survey Type			Child's Age			
	8-10	0-7	8-10	0-7	Excellent/ Very good	Good	Fair/Poor	Excellent/ Very good	Good	Fair/Poor	Mail	Phone	Internet	0-4	5-8	9-13	14+
	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)	(W)
<i>Total respondents</i>	216	29	94	16^	199	41	8^	172	57	17^	128	99	21	44	51	78	66
Customer Service (% A or U)	95.8%	80.0%	97.8%	100%	92.6%	100%	100%	93.8%	90.0%	100%	97.1%	95.0%	75.0%	100%	88.9%	100%	86.4%
Q45. Provided information or help	91.7%	60.0%	95.7%	100%	85.3%	100%	100%	87.5%	80.0%	100%	94.1%	90.0%	50.0%	100%	77.8%	100%	72.7%
Q46. Treated with courtesy and respect	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
How Well Doctors Communicate (% A or U)	95.2%	91.7%	96.9%	80.0%	96.0%	89.2%	100%	95.8%	90.9%	96.2%	95.0%	95.1%	93.8%	94.8%	98.9%	91.4%	94.8%
Q27. Personal doctor explained things	95.0%	83.3%	97.3%	60.0%	94.3%	90.5%	100%	94.8%	86.4%	100%	94.5%	93.5%	91.7%	91.7%	100%	87.5%	96.6%
Q28. Personal doctor listened carefully	98.0%	100%	98.6%	100%	97.7%	100%	100%	97.4%	100%	100%	96.4%	100%	100%	100%	100%	96.9%	96.6%
Q29. Personal doctor showed respect	99.0%	100%	100%	90.0%	100%	95.0%	100%	100%	95.5%	100%	100%	97.8%	100%	95.8%	100%	100%	100%
Q32. Personal doctor spent enough time	89.0%	83.3%	91.8%	70.0%	92.0%	71.4%	100%	90.9%	81.8%	84.6%	89.1%	89.1%	83.3%	91.7%	95.7%	81.3%	86.2%
Other Measures																	
Q48. Ease of filling out forms (% A or U)	99.1%	89.7%	98.9%	87.5%	97.5%	100% K	100%	97.1%	100% N	100%	97.6%	97.9%	100%	95.5%	96.1%	100%	98.5%
Q7. Average number of visits to doctor's office or clinic	1.1	0.9	2.5	2.0	1.0	1.4	1.5	0.9	1.3	2.4	1.0	1.3	0.9	1.1	0.8	1.1	1.4
Q26. Average number of visits to personal doctor	1.1	0.9	1.7	1.3	1.0	1.2	1.7	1.0	0.9	2.1	1.0	1.0	1.4	1.2	1.2	0.9	1.0
Q42. Average number of specialists seen	1.2	0.8	1.1	0.6	1.0	1.5	1.0	0.9	1.2	1.2	0.9	1.4	1.0	1.0	1.0	1.3	1.1

% A = % Always, % U = % Usually, % S = % Sometimes. ^Indicates a base size smaller than 20. Interpret results with caution.

Demographic Segments - General Population

	Child's Gender		Child's Race						Child's Ethnicity		Respondent's Age				Respondent's Gender		Respondent's Education	
	Male	Female	White	Black or African-American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Other	Hispanic	Not Hispanic	24 or younger	25-34	35-44	45+	Male	Female	High School or Less	Some College or More
	(X)	(Y)	(Z)	(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)	(o)
<i>Total respondents</i>	125	115	162	5^	2^	4^	40	43	168	71	29	71	84	56	31	209	118	122
Rating Questions (% 9 or 10)																		
Q49. Rating of Health Plan	77.6%	71.4%	70.4%	40.0%	50.0%	50.0%	77.5%	81.4%	75.2%	73.2%	79.3%	82.9% j	65.5%	74.1%	67.7%	75.7%	78.6%	70.0%
Q9. Rating of Health Care	75.0%	66.7%	68.8%	100%	NA	50.0%	66.7%	68.4%	73.8%	64.0%	58.3%	76.9%	74.4%	58.8%	50.0%	73.2%	69.6%	72.1%
Q36. Rating of Personal Doctor	79.2%	78.3%	76.7%	100%	0.0%	100%	88.5%	72.7%	79.3%	76.9%	73.1%	88.3% k	78.5%	69.2%	68.2%	80.4%	72.6%	84.0%
Q43. Rating of Specialist	76.2%	60.0%	63.6%	100%	NA	100%	66.7%	66.7%	73.1%	60.0%	100%	80.0%	70.0%	60.0%	66.7%	71.4%	66.7%	75.0%
Rating Questions (% 8, 9 or 10)																		
Q49. Rating of Health Plan	90.4%	85.7%	85.5%	80.0%	50.0%	75.0%	92.5%	93.0%	89.7%	85.9%	86.2%	92.9%	89.3%	81.5%	83.9%	88.8%	91.5%	85.0%
Q9. Rating of Health Care	85.7%	84.3%	85.7%	100%	NA	100%	83.3%	78.9%	85.0%	88.0%	75.0%	84.6%	87.2%	88.2%	70.0%	86.6%	82.6%	86.9%
Q36. Rating of Personal Doctor	90.6%	94.0%	91.7%	100%	100%	100%	96.2%	90.9%	92.6%	90.4%	88.5%	93.3%	92.3%	92.3%	86.4%	92.9%	89.3%	94.3%
Q43. Rating of Specialist	85.7%	80.0%	77.3%	100%	NA	100%	66.7%	100%	88.5%	60.0%	100%	80.0%	80.0%	90.0%	66.7%	85.7%	80.0%	87.5%
Getting Needed Care (% A or U)	87.2%	86.8%	84.2%	100%	NA	100%	91.7%	94.7%	86.9%	87.7%	100%	87.8%	79.8%	91.2%	80.0%	88.3%	94.6% o	81.8%
Q10. Getting care, tests, or treatment	87.5%	90.2%	88.3%	100%	NA	100%	83.3%	89.5%	87.5%	92.0%	100%	92.3%	84.6%	82.4%	60.0%	91.8%	89.1%	88.5%
Q41. Getting specialist appointment	87.0%	83.3%	80.0%	100%	NA	100%	100%	100%	86.2%	83.3%	100%	83.3%	75.0%	100%	100%	84.8%	100%	75.0%
Getting Care Quickly (% A or U)	81.0%	88.1%	85.7%	50.0%	NA	83.3%	85.7%	82.5%	85.1%	84.3%	96.2%	84.5%	79.2%	88.0%	83.3%	84.5%	80.9%	86.4%
Q4. Getting urgent care	89.5%	92.3%	92.3%	0.0%	NA	100%	85.7%	100%	95.0%	83.3%	100%	85.7%	91.7%	90.9%	100%	89.7%	81.8%	95.2%
Q6. Getting routine care	72.6%	83.9%	79.1%	100%	0.0%	66.7%	85.7%	65.0%	75.3%	85.2%	92.3%	83.3%	66.7%	85.0%	66.7%	79.2%	80.0%	77.6%
Coordination of Care (Q35) (% A or U)	100%	84.2%	89.3%	100%	NA	100%	100%	100%	96.2%	81.8%	100%	100%	90.0%	77.8%	100%	91.4%	91.7%	92.3%

% A = % Always, % U = % Usually, % S = % Sometimes. ^Indicates a base size smaller than 20. Interpret results with caution.

Demographic Segments - General Population

	Child's Gender		Child's Race						Child's Ethnicity		Respondent's Age				Respondent's Gender		Respondent's Education	
	Male	Female	White	Black or African-American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Other	Hispanic	Not Hispanic	24 or younger	25-34	35-44	45+	Male	Female	High School or Less	Some College or More
	(X)	(Y)	(Z)	(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)	(o)
<i>Total respondents</i>	125	115	162	5^	2^	4^	40	43	168	71	29	71	84	56	31	209	118	122
Customer Service (% A or U)	97.7%	88.2%	93.5%	NA	NA	100%	91.7%	92.9%	92.9%	95.0%	100%	92.9%	90.9%	91.7%	92.9%	93.8%	91.7%	96.7%
Q45. Provided information or help	95.5%	76.5%	87.0%	NA	NA	100%	83.3%	85.7%	85.7%	90.0%	100%	85.7%	81.8%	83.3%	85.7%	87.5%	83.3%	93.3%
Q46. Treated with courtesy and respect	100%	100%	100%	NA	NA	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
How Well Doctors Communicate (% A or U)	94.8%	94.6%	95.3%	100%	NA	100%	95.0%	85.9%	96.2%	91.3%	96.7%	96.1%	91.0%	97.5%	88.9%	95.3%	89.8%	98.1%
Q27. Personal doctor explained things	94.1%	92.9%	96.3%	100%	NA	100%	86.7%	75.0%	96.2%	89.7%	100%	92.3%	88.9%	100%	77.8%	95.0%	86.4%	98.5% n
Q28. Personal doctor listened carefully	100%	95.2%	98.8%	100%	NA	100%	100%	93.8%	98.7%	96.6%	100%	100%	94.4%	100%	100%	98.0%	95.5%	100%
Q29. Personal doctor showed respect	98.5%	100%	98.7%	100%	NA	100%	100%	100%	100%	96.4%	100%	97.4%	100%	100%	100%	99.0%	97.7%	100%
Q32. Personal doctor spent enough time	86.8%	90.5%	87.5%	100%	NA	100%	93.3%	75.0%	89.7%	82.8%	86.7%	94.9%	80.6%	90.0%	77.8%	89.1%	79.5%	93.9% n
Other Measures																		
Q48. Ease of filling out forms (% A or U)	98.4%	97.4%	97.5%	100%	100%	100%	100% z	97.6%	98.2%	98.6%	96.6%	95.7%	100%	98.2%	96.8%	98.1%	98.3%	97.5%
Q7. Average number of visits to doctor's office or clinic	1.0	1.2	1.2	1.6	0	1.0	0.7	1.5	1.2	0.8	1.5	1.0	1.3	0.8	0.7	1.2	1.0	1.2
Q26. Average number of visits to personal doctor	1.2 y	0.8	1.1	0.7	0	1.0	1.0	1.1	1.1	0.9	1.3	1.1	0.9	1.1	0.6	1.1	1.1	1.0
Q42. Average number of specialists seen	1.1	1.2	1.1	2.0	NA	1.0	1.3	1.6	1.2	0.8	0.5	1.1	1.2	1.3	1.0	1.2	1.3	1.0

% A = % Always, % U = % Usually, % S = % Sometimes. ^Indicates a base size smaller than 20. Interpret results with caution.

Demographic Segments - CCC Population

	Rating of Health Plan		Rating of Health Care		Child's Health Status			Child's Mental Health Status			Survey Type			Child's Age			
	8-10	0-7	8-10	0-7	Excellent/ Very good	Good	Fair/Poor	Excellent/ Very good	Good	Fair/Poor	Mail	Phone	Internet	0-4	5-8	9-13	14+
	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)	(W)	(X)	(Y)	(Z)	(a)	(b)	(c)	(d)	(e)
<i>Total respondents</i>	120	23	74	18 [^]	86	38	22	56	42	46	82	52	12 [^]	7 [^]	27	52	57
Q51. Access to Prescription Medicines (% A or U)	95.2%	83.3%	96.8%	85.7%	96.8%	88.0%	88.2%	93.5%	92.9%	93.3%	98.3% z	83.3%	100%	100%	95.0%	94.3%	92.9%
Access to Specialized Services (% A or U)	91.7%	58.9%	89.7%	45.9%	90.6%	86.5%	84.3%	89.2%	91.5%	85.8%	97.9%	67.7%	NA	100%	96.3%	87.5%	87.3%
Q15. Ease of getting special medical equipment or devices	100%	50.0%	100%	0.0%	100%	100%	75.0%	80.0%	100%	100%	100%	75.0%	NA	100%	100%	100%	100%
Q18. Ease of getting therapy	87.0%	66.7%	86.7%	60.0%	81.8%	85.7%	88.9%	87.5%	85.7%	83.3%	100%	60.0%	100%	100%	100%	75.0%	83.3%
Q21. Ease of getting treatment or counseling	88.2%	60.0%	82.5%	77.8%	90.0%	73.9%	88.9%	100%	88.9%	74.2%	93.8%	68.0%	100%	100%	88.9%	87.5%	78.6%
FCC: Personal Doctor Who Knows Child (% Yes)	94.0%	76.9%	95.1%	61.7%	91.7%	93.4%	86.5%	97.0% x	97.1% x	80.0%	90.2%	92.0%	95.2%	83.3%	98.2%	91.4%	89.0%
Q33. Doctor talked about how child is feeling, growing, and behaving	93.2%	92.3%	95.2%	63.6%	90.4%	95.8%	92.9%	97.1%	95.7%	83.9%	90.7%	93.3%	100%	100%	100%	90.3%	88.2%
Q38. Doctor understands how these conditions affect child's day-to-day life	97.2%	69.2%	98.0%	64.3%	93.5%	92.0%	93.3%	96.9%	100%	82.8%	93.3%	91.2%	100%	100%	100%	96.0%	89.2%
Q39. Doctor understands how these conditions affect family's day-to-day life	91.7%	69.2%	92.2%	57.1%	91.3%	92.3%	73.3%	96.9% x	95.7%	73.3%	86.7%	91.4%	85.7%	50.0%	94.7%	88.0%	89.5%
Q8. FCC: Getting Needed Information (% A or U)	91.9%	80.0%	93.2%	77.8%	94.2%	88.0%	80.0%	91.4%	95.8%	83.9%	88.9%	93.8%	83.3%	75.0%	93.3%	90.3%	92.5%
Coordination of Care for CCC (% Yes)	74.2%	61.1%	78.2%	22.7%	74.1%	80.6%	62.5%	66.0%	0.0%	73.3%	80.3%	63.7%	0.0%	100%	83.3%	75.0%	65.8%
Q13. Obtaining help from doctors or health providers in contacting child's school or daycare	88.9%	66.7%	88.9%	0.0%	100%	100%	50.0%	80.0%	NA	87.5%	100%	75.0%	NA	100%	100%	100%	75.0%
Q24. Obtaining help coordinating child's care among different providers or services	59.6%	55.6%	67.5%	45.5%	48.3%	61.1%	75.0%	52.0%	72.7%	59.1%	60.6%	52.4%	60.0%	100%	66.7%	50.0%	56.5%

% A = % Always, % U = % Usually, % S = % Sometimes. [^]Indicates a base size smaller than 20. Interpret results with caution.

Demographic Segments - CCC Population

	Child's Gender		Child's Race						Child's Ethnicity		Respondent's Age				Respondent's Gender		Respondent's Education	
	Male	Female	White	Black or African-American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Other	Hispanic	Not Hispanic	24 or younger	25-34	35-44	45+	Male	Female	High School or Less	Some College or More
	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)	(o)	(p)	(q)	(r)	(s)	(t)	(u)	(v)	(w)
<i>Total respondents</i>	72	68	91	10 [^]	1 [^]	3 [^]	21	32	98	43	14 [^]	24	57	47	18 [^]	125	51	92
Q51. Access to Prescription Medicines (% A or U)	91.7%	96.0%	98.4%	100%	NA	100%	92.9%	86.4%	91.0%	100% ⁿ	100%	94.4%	89.7%	97.1%	92.9%	94.3%	85.7%	98.5% ^v
Access to Specialized Services (% A or U)	86.6%	95.6%	88.5%	NA	NA	NA	94.4%	84.1%	89.1%	92.6%	NA	92.6%	86.2%	91.9%	83.3%	91.7%	89.8%	91.7%
Q15. Ease of getting special medical equipment or devices	100%	100%	100%	NA	NA	NA	100%	100%	100%	100%	NA	100%	100%	100%	100%	100%	100%	100%
Q18. Ease of getting therapy	78.6%	100%	80.0%	NA	NA	NA	100%	66.7%	81.3%	100%	100%	100%	81.8%	85.7%	66.7%	91.3%	80.0%	93.8%
Q21. Ease of getting treatment or counseling	81.3%	86.7%	85.4%	25.0%	100%	100%	83.3%	85.7%	86.0%	77.8%	100%	77.8%	76.9%	90.0%	83.3%	83.9%	89.5%	81.4%
FCC: Personal Doctor Who Knows Child (% Yes)	91.4%	92.0%	91.0%	83.3%	0.0%	100%	97.6%	92.1%	91.8%	92.9%	94.4%	97.6%	86.0%	97.6% ^r	87.5%	92.2%	91.0%	92.2%
Q33. Doctor talked about how child is feeling, growing, and behaving	89.8%	94.9%	92.7%	75.0%	100%	100%	92.9%	90.0%	91.5%	93.1%	100%	100%	86.8%	92.9%	87.5%	92.6%	89.3%	93.4%
Q38. Doctor understands how these conditions affect child's day-to-day life	95.5%	91.9%	92.7%	87.5%	NA	100%	100%	95.5%	93.4%	95.2%	100%	100%	88.2%	100%	87.5%	94.7%	95.8%	93.2%
Q39. Doctor understands how these conditions affect family's day-to-day life	88.9%	89.2%	87.5%	87.5%	100%	100%	100%	90.9%	90.3%	90.5%	83.3%	92.9%	82.9%	100%	87.5%	89.5%	88.0%	89.8%
Q8. FCC: Getting Needed Information (% A or U)	88.6%	95.5%	89.5%	85.7%	100%	100%	90.0%	95.7%	89.4%	95.7%	75.0%	90.9%	90.7%	96.3%	88.9%	91.4%	90.3%	91.5%
Coordination of Care for CCC (% Yes)	67.5%	82.7%	75.0%	0.0%	NA	NA	75.0%	61.9%	70.5%	86.7%	0.0%	0.0%	80.4%	76.3%	100%	72.4%	75.0%	77.2%
Q13. Obtaining help from doctors or health providers in contacting child's school or daycare	83.3%	100%	100%	NA	NA	NA	100%	66.7%	87.5%	100%	NA	NA	85.7%	100%	100%	90.9%	75.0%	100%
Q24. Obtaining help coordinating child's care among different providers or services	51.6%	65.4%	50.0%	100%	NA	NA	50.0%	57.1%	53.5%	73.3%	25.0%	50.0%	75.0%	52.6%	100%	53.8%	75.0%	54.3%

% A = % Always, % U = % Usually, % S = % Sometimes. [^]Indicates a base size smaller than 20. Interpret results with caution.



Supplemental Questions

Results for Supplemental Questions

- Presbyterian Centennial Care

Supplemental Questions - General Population

Survey Item	Opt-out Responses <i>Out of 248 Total Respondents</i>	Category Responses <i>Based on Valid Responses Per Question</i>					Plan Summary Rate Score			2021 SPH BoB Summary Rate Score
							2019	2020	2021	
Q77. In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these doctors or other health providers?		<u>Yes</u>	<u>No</u>				(n = 345)	(n = 294)	(n = 235)	---
		17.4%	82.6%				24.6%	22.1%	17.4% [‡]	---
Q79. How satisfied are you with the help you got to coordinate your child's care in the last 6 months?		<u>Very satisfied</u>	<u>Satisfied</u>	<u>Neither dissatisfied nor satisfied</u>	<u>Dissatisfied</u>	<u>Very dissatisfied</u>	(n = 327)	(n = 285)	(n = 226)	---
		35.8%	46.0%	14.2%	0.9%	3.1%	86.2%	86.7%	81.9%	---
Q80. In the last 6 months, has your child received any material from your health plan about care coordination and how to contact the care coordination unit?		<u>Yes</u>	<u>No</u>				---	---	(n = 229)	---
		22.7%	77.3%				---	---	22.7%	---
Q81. Did your child's Care Coordinator sit down with you and create a Plan of Care?		<u>Yes</u>	<u>No</u>				---	---	(n = 50)	---
		18.0%	82.0%				---	---	18.0%	---
Q82. Are you satisfied that your child's care plan talks about the help your child needs to stay healthy and remain in your home?		<u>Very satisfied</u>	<u>Satisfied</u>	<u>Neither dissatisfied nor satisfied</u>	<u>Dissatisfied</u>	<u>Very dissatisfied</u>	---	---	(n = 49)	---
		36.7%	46.9%	12.2%	0.0%	4.1%	---	---	83.7%	---

Summary Rate Indicator

Grey shading indicates that the response is included in the summary rate score.

Significance Testing

Current year score is significantly higher than 2020 score (↑), the 2019 score (‡) or benchmark score (▲).
Current year score is significantly lower than 2020 score (↓), the 2019 score (‡) or benchmark score (▼).

Low Base

^Indicates a base size smaller than 20. Interpret results with caution.

Supplemental Questions - General Population

Survey Item		Plan Summary Rate Score			2021 SPH BoB Summary Rate Score	
		2019	2020	2021		
Q78. In the last 6 months, who helped to coordinate your child's care?						
	Valid Responses	Base	(n=321)	(n=266)	(n=220)	---
	Someone from your child's health plan		3.4%	5.6%	4.5%	---
	Someone from your child's doctor's office or clinic		21.5%	23.7%	15.9% ↓	---
	Someone from another organization		2.8%	2.3%	1.8%	---
	A friend or family member		5.0%	4.9%	5.0%	---
	You		67.3%	63.5%	72.7% ↑	---

Significance Testing
 Current year score is significantly higher than 2020 score (↑), the 2019 score (⚡) or benchmark score (▲).
 Current year score is significantly lower than 2020 score (↓), the 2019 score (⚡) or benchmark score (▼).

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

Demographic Segments - General Population

Summary Rate Score	Rating of Health Plan		Rating of Health Care		Child's Health Status			Child's Mental Health Status			Survey Type			Child's Age			
	8-10	0-7	8-10	0-7	Excellent/ Very good	Good	Fair/Poor	Excellent/ Very good	Good	Fair/Poor	Mail	Phone	Internet	0-4	5-8	9-13	14+
	(G)	(H)	(I)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)	(W)
<i>Total respondents</i>	216	29	94	16^	199	41	8^	172	57	17^	128	99	21	44	51	78	66
Q77. In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these doctors or other health providers? (% Yes)	18.8%	8.0%	26.7%	26.7%	15.1%	27.0%	33.3%	14.6%	20.8%	31.3%	20.8%	13.3%	15.0%	23.3% U	7.8%	21.3% U	17.7%
Q79. How satisfied are you with the help you got to coordinate your child's care in the last 6 months? (% Very satisfied or Satisfied)	84.8%	64.0%	84.3%	80.0%	79.2%	91.7% K	100%	81.3%	81.5%	93.3%	74.8%	89.8% Q	89.5%	74.4%	83.3%	84.7%	83.3%
Q80. In the last 6 months, has your child received any material from your health plan about care coordination and how to contact the care coordination unit? (% Yes)	24.6%	8.7%	29.2%	21.4%	21.9%	30.6%	0.0%	20.5%	25.9%	30.8%	17.1%	31.0% Q	21.1%	26.2%	20.0%	28.2%	17.7%
Q81. Did your child's Care Coordinator sit down with you and create a Plan of Care? (% Yes)	18.4%	0.0%	28.0%	50.0%	17.9%	18.2%	NA	21.9%	7.7%	25.0%	9.5%	26.9%	0.0%	36.4%	33.3%	5.3%	9.1%
Q82. Are you satisfied that your child's care plan talks about the help your child needs to stay healthy and remain in your home? (% Very satisfied or Satisfied)	87.2%	0.0%	88.0%	66.7%	84.2%	81.8%	NA	90.3%	76.9%	75.0%	75.0%	92.6%	50.0%	90.9%	87.5%	89.5%	63.6%

A letter and green font indicates that result is significantly higher than the corresponding column. ^Indicates a base size smaller than 20. Interpret results with caution.

Demographic Segments - General Population

Summary Rate Score	Child's Gender		Child's Race						Child's Ethnicity		Respondent's Age				Respondent's Gender		Respondent's Education	
	Male	Female	White	Black or African-American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Other	Hispanic	Not Hispanic	24 or younger	25-34	35-44	45+	Male	Female	High School or Less	Some College or More
	(X)	(Y)	(Z)	(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)	(o)
<i>Total respondents</i>	125	115	162	5 [^]	2 [^]	4 [^]	40	43	168	71	29	71	84	56	31	209	118	122
Q77. In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these doctors or other health providers? (% Yes)	14.6%	21.1%	15.3%	20.0%	0.0%	0.0%	17.5%	21.4%	20.5%	11.4%	28.6%	12.7%	16.5%	20.4%	6.7%	19.3% ^l	21.4%	14.2%
Q79. How satisfied are you with the help you got to coordinate your child's care in the last 6 months? (% Very satisfied or Satisfied)	84.6%	79.2%	82.0%	60.0%	0.0%	100%	86.8%	76.9%	84.0%	77.6%	96.4%	86.6% ^k	86.7% ^k	64.8%	86.2%	82.0%	87.2%	78.3%
Q80. In the last 6 months, has your child received any material from your health plan about care coordination and how to contact the care coordination unit? (% Yes)	23.7%	22.2%	19.0%	0.0%	0.0%	25.0%	23.7%	35.9% ^z	22.2%	23.5%	10.7%	25.4%	27.3%	20.4%	36.7%	20.9%	20.0%	25.9%
Q81. Did your child's Care Coordinator sit down with you and create a Plan of Care? (% Yes)	19.2%	16.7%	14.8%	NA	NA	0.0%	0.0%	30.8%	23.5%	0.0%	33.3%	25.0%	10.0%	18.2%	30.0%	15.0%	27.3%	10.7%
Q82. Are you satisfied that your child's care plan talks about the help your child needs to stay healthy and remain in your home? (% Very satisfied or Satisfied)	84.0%	83.3%	84.6%	NA	NA	100%	100%	64.3%	81.8%	86.7%	100%	86.7%	95.0%	54.5%	81.8%	84.2%	85.7%	82.1%

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Supplemental Questions – CCC Population

Survey Item	Opt-out Responses <i>Out of 146 Total Respondents</i>			Category Responses <i>Based on Valid Responses Per Question</i>					Plan Summary Rate Score			2021 SPH BoB Summary Rate Score
									2019	2020	2021	
Q77. In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these doctors or other health providers?				<u>Yes</u>	<u>No</u>				(n = 217)	(n = 179)	(n = 144)	---
				40.3%	59.7%				42.4%	44.1%	40.3%	---
Q79. How satisfied are you with the help you got to coordinate your child's care in the last 6 months?				<u>Very satisfied</u>	<u>Satisfied</u>	<u>Neither dissatisfied nor satisfied</u>	<u>Dissatisfied</u>	<u>Very dissatisfied</u>	(n = 213)	(n = 180)	(n = 139)	---
				43.2%	43.2%	10.8%	2.2%	0.7%	85.0%	82.2%	86.3%	---
Q80. In the last 6 months, has your child received any material from your health plan about care coordination and how to contact the care coordination unit?				<u>Yes</u>	<u>No</u>				---	---	(n = 136)	---
				29.4%	70.6%				---	---	29.4%	---
Q81. Did your child's Care Coordinator sit down with you and create a Plan of Care?				<u>Yes</u>	<u>No</u>				---	---	(n = 40)	---
				45.0%	55.0%				---	---	45.0%	---
Q82. Are you satisfied that your child's care plan talks about the help your child needs to stay healthy and remain in your home?				<u>Very satisfied</u>	<u>Satisfied</u>	<u>Neither dissatisfied nor satisfied</u>	<u>Dissatisfied</u>	<u>Very dissatisfied</u>	---	---	(n = 39)	---
				46.2%	33.3%	15.4%	5.1%	0.0%	---	---	79.5%	---

Summary Rate Indicator

Grey shading indicates that the response is included in the summary rate score.

Significance Testing

Current year score is significantly higher than 2020 score (↑), the 2019 score (⚡) or benchmark score (▲).
Current year score is significantly lower than 2020 score (↓), the 2019 score (⚡) or benchmark score (▼).

Low Base

▲Indicates a base size smaller than 20. Interpret results with caution.

Supplemental Questions – CCC Population

Survey Item		Plan Summary Rate Score			2021 SPH BoB Summary Rate Score	
		2019	2020	2021		
Q78. In the last 6 months, who helped to coordinate your child's care?						
	Valid Responses	Base	(n=200)	(n=168)	(n=127)	---
	Someone from your child's health plan		6.5%	6.5%	4.7%	---
	Someone from your child's doctor's office or clinic		28.0%	35.7%	33.1%	---
	Someone from another organization		5.0%	4.2%	6.3%	---
	A friend or family member		5.5%	1.8%	3.1%	---
	You		55.0%	51.8%	52.8%	---

Significance Testing

Current year score is significantly higher than 2020 score (↑), the 2019 score (⚡) or benchmark score (▲) .
 Current year score is significantly lower than 2020 score (↓), the 2019 score (⚡) or benchmark score (▼).

Low Base

^Indicates a base size smaller than 20.
 Interpret results with caution.

Demographic Segments – CCC Population

Summary Rate Score	Rating of Health Plan		Rating of Health Care		Child's Health Status			Child's Mental Health Status			Survey Type			Child's Age			
	8-10	0-7	8-10	0-7	Excellent/ Very good	Good	Fair/Poor	Excellent/ Very good	Good	Fair/Poor	Mail	Phone	Internet	0-4	5-8	9-13	14+
	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)	(W)	(X)	(Y)	(Z)	(a)	(b)	(c)	(d)	(e)
<i>Total respondents</i>	120	23	74	18 [^]	86	38	22	56	42	46	82	52	12 [^]	7 [^]	27	52	57
Q77. In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these doctors or other health providers? <i>(% Yes)</i>	42.0%	31.8%	50.0%	47.1%	32.9%	47.4%	57.1%	37.0%	38.1%	45.7%	41.5%	42.0%	25.0%	85.7%	37.0%	36.5%	40.4%
Q79. How satisfied are you with the help you got to coordinate your child's care in the last 6 months? <i>(% Very satisfied or Satisfied)</i>	92.1%	54.5%	91.9%	70.6%	84.3%	91.4%	85.7%	92.5%	87.5%	79.5%	81.3%	93.8% ^Y	90.9%	83.3%	88.9%	88.2%	83.3%
Q80. In the last 6 months, has your child received any material from your health plan about care coordination and how to contact the care coordination unit? <i>(% Yes)</i>	28.3%	35.0%	33.3%	33.3%	26.8%	28.6%	42.1%	21.2%	27.5%	39.5%	21.0%	44.4% ^Y	30.0%	42.9%	37.0%	29.8%	22.2%
Q81. Did your child's Care Coordinator sit down with you and create a Plan of Care? <i>(% Yes)</i>	43.8%	57.1%	41.7%	60.0%	40.9%	40.0%	62.5%	54.5%	18.2%	58.8%	47.1%	45.0%	33.3%	100%	60.0%	21.4%	50.0%
Q82. Are you satisfied that your child's care plan talks about the help your child needs to stay healthy and remain in your home? <i>(% Very satisfied or Satisfied)</i>	87.1%	42.9%	83.3%	60.0%	81.0%	80.0%	75.0%	100%	81.8%	68.8%	64.7%	95.0%	50.0%	100%	90.0%	85.7%	54.5%

A letter and green font indicates that result is significantly higher than the corresponding column. [^]Indicates a base size smaller than 20. Interpret results with caution.

Demographic Segments – CCC Population

Summary Rate Score	Child's Gender		Child's Race						Child's Ethnicity		Respondent's Age				Respondent's Gender		Respondent's Education	
	Male	Female	White	Black or African-American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Other	Hispanic	Not Hispanic	24 or younger	25-34	35-44	45+	Male	Female	High School or Less	Some College or More
	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)	(o)	(p)	(q)	(r)	(s)	(t)	(u)	(v)	(w)
<i>Total respondents</i>	72	68	91	10 [^]	1 [^]	3 [^]	21	32	98	43	14 [^]	24	57	47	18 [^]	125	51	92
Q77. In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these doctors or other health providers? <i>(% Yes)</i>	40.3%	39.7%	36.3%	40.0%	100%	33.3%	47.6%	46.9%	44.9%	32.6%	28.6%	33.3%	43.9%	44.7%	38.9%	40.8%	43.1%	39.1%
Q79. How satisfied are you with the help you got to coordinate your child's care in the last 6 months? <i>(% Very satisfied or Satisfied)</i>	84.1%	87.9%	85.4%	66.7%	100%	66.7%	100%	80.0%	90.4%	78.6%	100%	87.0%	87.5%	81.8%	83.3%	86.7%	87.8%	85.4%
Q80. In the last 6 months, has your child received any material from your health plan about care coordination and how to contact the care coordination unit? <i>(% Yes)</i>	23.5%	35.4%	24.7%	30.0%	0.0%	33.3%	35.0%	41.4%	31.1%	25.6%	0.0%	38.1%	34.5%	24.4%	38.9%	27.4%	23.9%	31.5%
Q81. Did your child's Care Coordinator sit down with you and create a Plan of Care? <i>(% Yes)</i>	43.8%	47.8%	42.9%	100%	NA	100%	28.6%	33.3%	42.9%	54.5%	NA	62.5%	57.9%	18.2%	42.9%	46.9%	27.3%	53.6%
Q82. Are you satisfied that your child's care plan talks about the help your child needs to stay healthy and remain in your home? <i>(% Very satisfied or Satisfied)</i>	68.8%	86.4%	81.0%	33.3%	NA	100%	100%	83.3%	82.1%	70.0%	NA	87.5%	83.3%	63.6%	85.7%	77.4%	90.9%	74.1%

A letter and green font indicates that result is significantly higher than the corresponding column. [^]Indicates a base size smaller than 20. Interpret results with caution.



Appendix: Correlation Analyses

Plan Specific Correlations

- Presbyterian Centennial Care

Highest Correlations

Below are the 10 key measures with the highest correlations to the Rating measures.

With Health Care Rating

Q49	Health plan overall	0.5874
Q41	Got specialist appt.	0.5865
Q43	Specialist overall	0.5630
Q36	Personal doctor overall	0.5618
Q46	CS courtesy/respect	0.4646
Q27	Dr. explained things	0.4551
Q10	Got care/tests/treatment	0.4093
Q35	Dr. informed about care	0.3990
Q29	Dr. showed respect	0.3369
Q28	Dr. listened carefully	0.3356

With Personal Doctor Rating

Q35	Dr. informed about care	0.7467
Q28	Dr. listened carefully	0.6900
Q27	Dr. explained things	0.5935
Q45	CS provided info./help	0.5703
Q9	Health care overall	0.5618
Q32	Dr. spent enough time	0.5508
Q41	Got specialist appt.	0.5437
Q29	Dr. showed respect	0.5349
Q46	CS courtesy/respect	0.5003
Q49	Health plan overall	0.3261

With Specialist Rating

Q41	Got specialist appt.	0.7077
Q10	Got care/tests/treatment	0.6856
Q49	Health plan overall	0.5641
Q9	Health care overall	0.5630
Q27	Dr. explained things	0.3871
Q79	Satisfied with help to coordinate care	0.3700
Q35	Dr. informed about care	0.3241
Q32	Dr. spent enough time	0.1651
Q6	Got routine care	0.1571
Q45	CS provided info./help	0.0527



Appendix: Flowchart



Understanding Relative Performance of Composite Measures

- Presbyterian Centennial Care

Flowchart – Understanding Relative Performance

How composite questions perform relative to each other

- 1 Composite summary rate scores are displayed in the orange box.
- 2 Next to the composite score are the questions included in the composite.
- 3 There are two numbers in the boxes under the questions. The top number is how much that question contributes to the composite score (Actual Contribution). The bottom number is the gap between the Maximum and Actual Contribution.

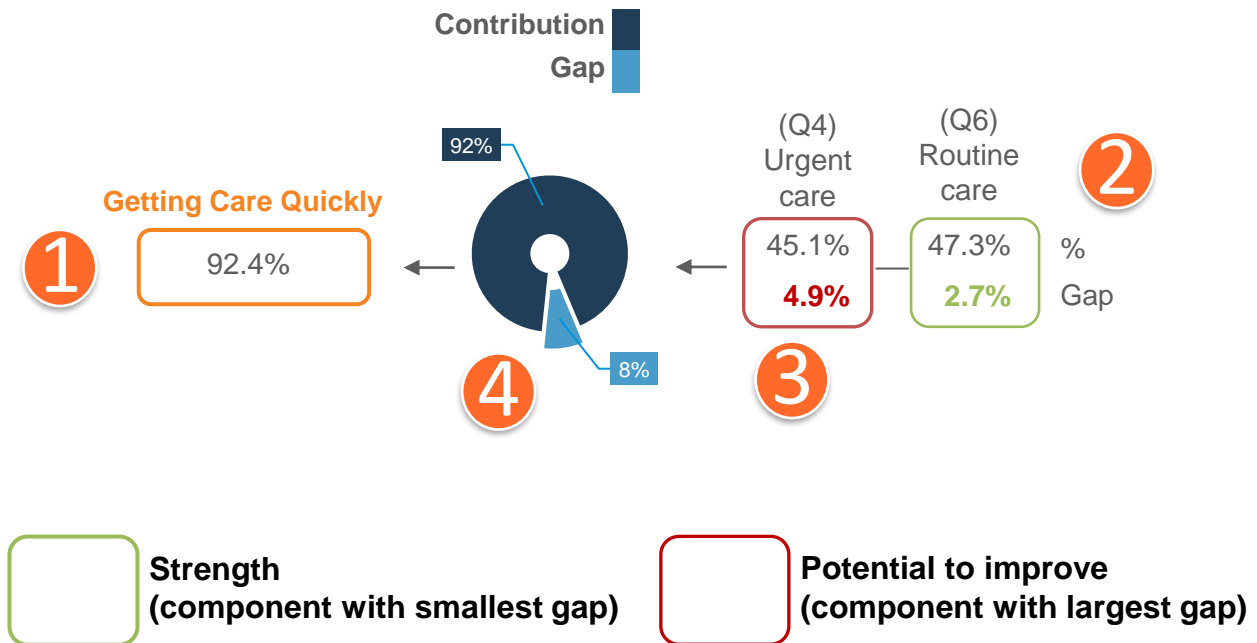
$$\frac{\text{Plan Score}}{\text{Max Score}} \times \frac{\text{Maximum Contribution}}{\text{Actual Contribution}} = \frac{\text{Maximum Contribution} - \text{Actual Contribution}}{\text{Actual Contribution}} = \text{Gap}$$

Q6 Example:

$$\frac{94.6\%}{100\%} \times 50.0\% = 47.3\%$$

$$50.0\% - 47.3\% = 2.7\%$$

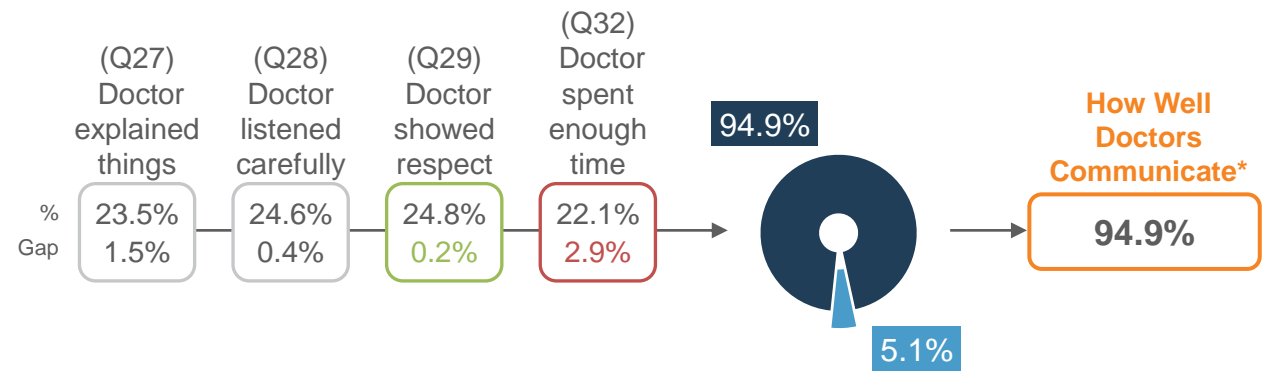
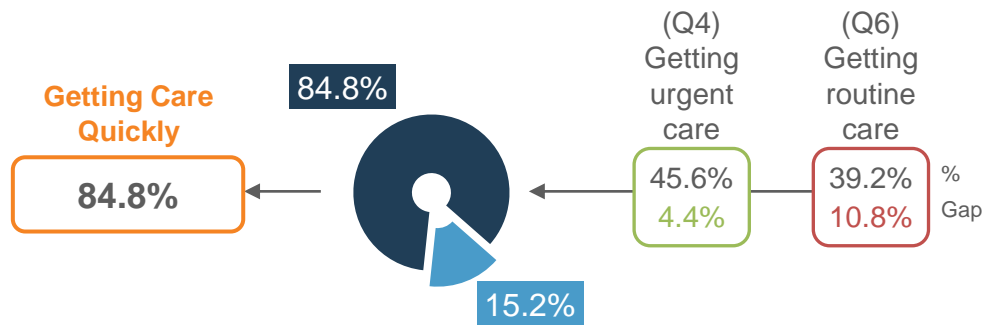
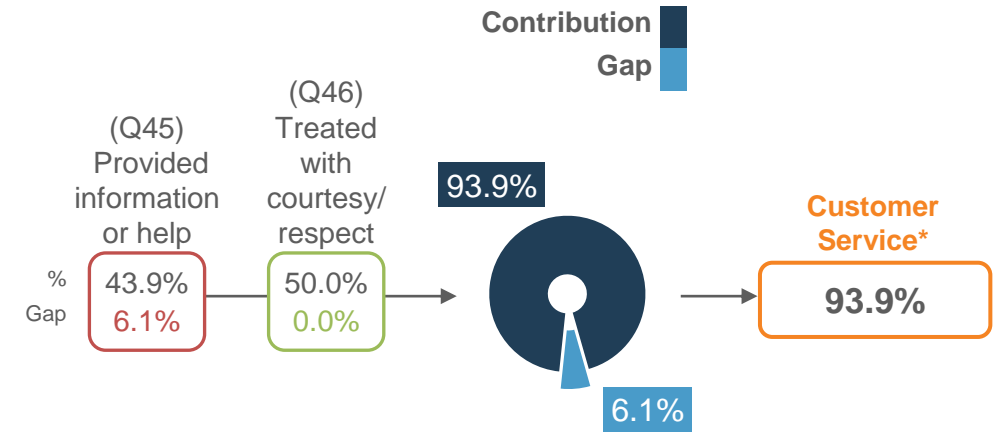
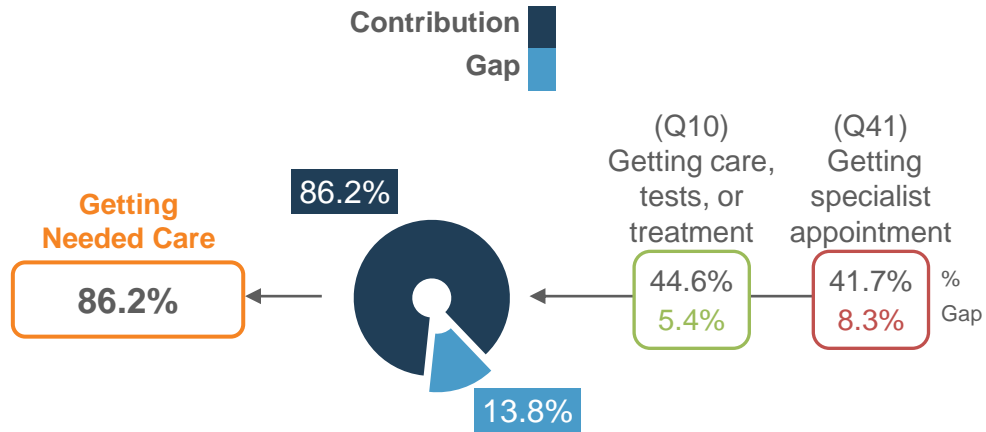
- 4 For the pie chart, the dark blue is the sum of the Actual Contributions and the light blue slice is the sum of the Gaps.



Flowchart – Understanding Relative Performance - General Population

 Strength
(component with smallest gap)

 Potential to improve
(component with largest gap)



* The How Well Doctors Communicate and Customer Service composites are not used in NCQA ratings.



Appendix: Accreditation

Estimated NCQA Plan Ratings and Frequency Distributions

- Presbyterian Centennial Care

Estimated NCQA Health Insurance Plan Ratings

EXPLANATION Beginning in 2020, NCQA made significant changes to Health Plan Accreditation. CAHPS® is no longer scored using 3-point scores for purposes of health plan accreditation. Instead, health plans are scored on a 1-5 star rating system based on HEDIS and CAHPS measures, with a bonus available for plans successfully completing the review of standards and guidelines.

The information contained in this report uses the methodology described by NCQA, but **only the NCQA results are official**. Results in this report should be used for quality improvement purposes only. The image to the right lists the measures from CAHPS required for Health Plan Accreditation as published by NCQA. Additional pages of required measures are available via the link provided.

- 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 (10th, 33rd, 67th and 90th) into scores ranging from 1 to 5 (in increments of 0.5), where 5 is the highest score and 1 is the lowest. Percentiles and ratings are estimated based on the 2020 NCQA Quality Compass data and benchmarks.

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

9 Required HEDIS and CAHPS Measures for HEDIS Reporting Year 2021

HEDIS/CAHPS Measures Required for HP Accreditation—Medicaid			
Measure Name		Web Display Name	Weight*
PATIENT EXPERIENCE			
Getting Care			
Getting Needed Care (Usually + Always)		Getting care easily	1.5
Getting Care Quickly (Usually + Always)		Getting care quickly	1.5
Satisfaction With Plan Physicians			
Rating of Personal Doctor (9 + 10)		Rating of primary care doctor	1.5
Rating of Specialist Seen Most Often (9 + 10)		Rating of specialists	1.5
Rating of All Health Care (9 + 10)		Rating of care	1.5
Coordination of Care (Usually + Always)		Coordination of care	1.5
Satisfaction With Plan Services			
Rating of Health Plan (9 + 10)		Rating of health plan	1.5
PREVENTION			
Children and Adolescent Well-Care			
ADV	Annual Dental Visits—Total	Dental visits	1
CIS	Childhood Immunization Status—Combination 10	Childhood immunizations	3
IMA	Immunizations for Adolescents—Combination 2	Adolescent immunizations	3
WCC	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents—BMI Percentile—Total	BMI percentile assessment	1
Women's Reproductive Health			
PPC	Prenatal and Postpartum Care—Timeliness of Prenatal Care	Prenatal checkups	1
	Prenatal and Postpartum Care—Postpartum Care	Postpartum care	1
Cancer Screening			
BCS	Breast Cancer Screening	Breast cancer screening	1
CCS	Cervical Cancer Screening	Cervical cancer screening	1
Other Preventive Services			
CHL	Chlamydia Screening in Women—Total	Chlamydia screening	1
FVA	Flu Vaccinations for Adults Ages 18-64	Flu shots	1

*The weight column indicates the weight of the item (maximum value = 3) in the overall score calculation.

https://www.ncqa.org/wp-content/uploads/2020/12/20201218_2021_List_of_Required_Performance_Measures.pdf

NCQA 2020

Note: The COVID-19 pandemic and the associated strain on the health care system led NCQA to decide not to publish Health Plan Ratings in 2020.

Note: Because 3-point scores are no longer used by NCQA, SPH does not calculate 3-point scores and accreditation thresholds within this report.

Estimated NCQA Plan Ratings - General Population

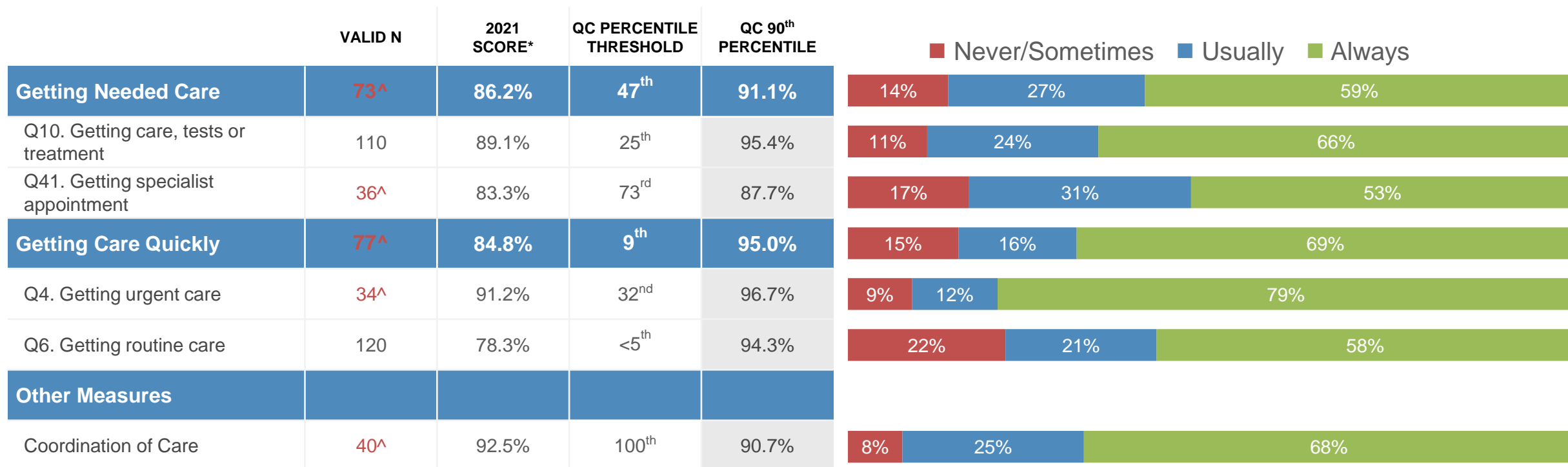
	2021 VALID N	2021 SCORE	SCORE DEFINITION	QC PERCENTILE RANK	SPH ESTIMATED RATING	WEIGHT
CONSUMER SATISFACTION					3.0	
GETTING CARE					NA	
Getting Needed Care	73 [^]	86.2%	Usually or Always	47 th	NA	1.5
Getting Care Quickly	77 [^]	84.8%	Usually or Always	9 th	NA	1.5
SATISFACTION WITH PLAN PHYSICIANS					3.0	
Rating of Personal Doctor	194	79.4%	9 or 10	52 nd	3.0	1.5
Rating of Specialist	32 [^]	68.8%	9 or 10	14 th	NA	1.5
Rating of Health Care	110	71.8%	9 or 10	45 th	3.0	1.5
Coordination of Care	40 [^]	92.5%	Usually or Always	100 th	NA	1.5
SATISFACTION WITH PLAN SERVICES					3.0	
Rating of Health Plan	245	74.3%	9 or 10	62 nd	3.0	1.5

NOTE 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.

Global Proportions - General Population

GLOBAL PROPORTIONS SCORING AND ACCREDITATION

The graphical presentation of frequency distributions, including scores for composites and rating questions are shown on these pages. In addition, the measure's percentile threshold when compared to the 2020 NCQA 90th percentile benchmark is shown. The 90th percentile is the standard for achieving the maximum rating possible for a particular CAHPS accreditation measure.

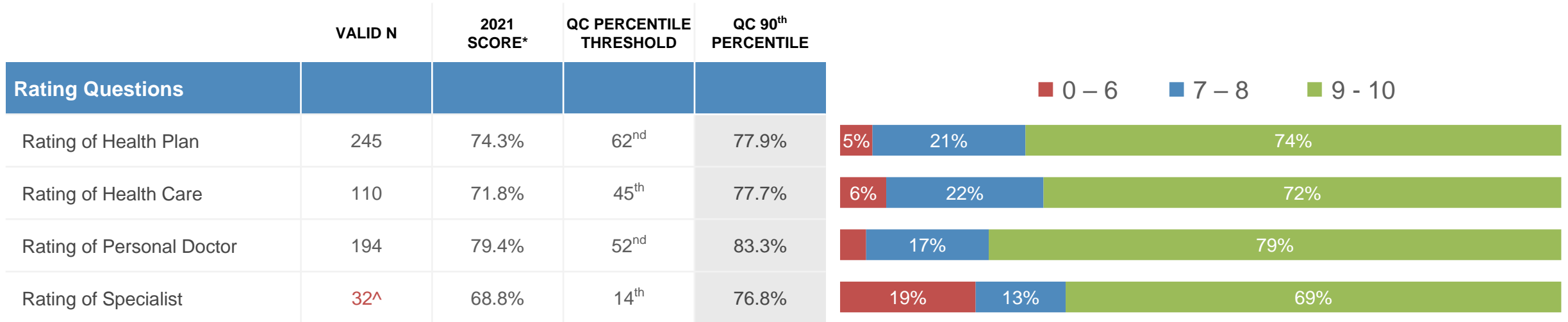


*Scores are % Always or Usually. **Note:** Due to space constraints, scores <5% will not be labeled on the graph.

Global Proportions - General Population

GLOBAL PROPORTIONS SCORING AND ACCREDITATION

The graphical presentation of frequency distributions, including scores for composites and rating questions are shown on these pages. In addition, the measure's percentile threshold when compared to the 2020 NCQA 90th percentile benchmark is shown. The 90th percentile is the standard for achieving the maximum rating possible for a particular CAHPS accreditation measure.



*Scores are % 9 or 10. **Note:** Due to space constraints, scores <5% will not be labeled on the graph.



Appendix: Improvement Strategies and Voice of the Member

- Presbyterian Centennial Care



Improvement Strategies and VoM: Section Information

Improvement Strategies The left-side grey boxes contain improvement strategies compiled from SPH's years of experience working with hundreds of health plans to improve their scores. These are organized by key measures on the CAHPS survey. SPH encourages plans to review these strategies to help inform quality improvement plans.

Voice of the Member SPH periodically conducts qualitative research to help health plans better understand what members are thinking about when they answer questions on the CAHPS survey. We recruit members of different types of health plans and lead a moderated bulletin board discussion, probing for insights about their experience with aspects of care asked about on CAHPS. The quotes provided on the right-side of the following slides are pulled from conversations we have with members as part of this research.

SPH conducts this research to provide our clients additional insights into recommended improvements.



Rating of Health Plan

Rating of Health Plan Improvement Strategies

- 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, GNC, GCQ, HWDC). Review QI recommendations/actions of these CAHPS composite measures.
- Carefully review, simplify and clarify all family/child member communications, processes and forms. Ensure that all materials and messages are accurate, up-to-date, complete and consistent, using concise and unambiguous language.
- Identify key parent needs and expectations and critically assess operations and processes.
- Ensure that the member website is easily navigable and highly user friendly.
- Simplify completion of commonly used forms via "pre-loaded" applications or on-line.
- 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 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.

Voice of the Member

“Specifically, I would **improve communications**. My insurance doesn't send any **information about check-ups, vaccine reminders, dental check-ups, etc.**”

“Make the **website more user friendly**, make it **easier to find the information** we need.”

“**An app would be a good idea**, because sometimes **getting online to recertify can be difficult.**”

“**More available and detailed information about counseling**. My daughter could benefit from some counseling to deal with living with her daily ADHD struggles. She has meltdowns and problems at school socially. It affects her in a number of ways and I am sure she is not the only child that feels this way that has Medicaid.”

“It is **the issues with name brand medications and not covering all areas of health**, such as chiropractic care, **that are very important to my family.**”

Additional resource for improvement:

AHRQ best practices: <https://cahps.ahrq.gov/surveys-guidance/hp/improve/index.html>

SPH Performance Improvement Consulting: <http://www.sphanalytics.com/consulting>

(SPH National Sample)

Recommended actions for improvement based on comments from adult consumers across the country with health insurance coverage



Rating of Health Care

Rating of Health Care Improvement Strategies

- Analyze, assess, probe for weakness or QI opportunities among those measures or composites that are Key Drivers (or highly correlated) with Rating of Health Care (e.g., GNC, GCQ, HWDC, CoC). Review QI recommendations/actions for related CAHPS composite measures.
- Seek to simplify Plan requirements, processes, and/or procedures (e.g., UM, CM, Pharma, Use of IVR) impacting the member experience of care and access to care, tests or treatment. Examples include: Provide care quickly. Provide quick access to effective treatments. Minimize patient costs for care.
- Assess internal data. Track, audit, review and assess call center calls and/or complaints regarding quality of care, choice of providers, access to care, UM, CM, health system, etc.
- 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.
- Confirm adequacy of contracted providers and walk-in centers with extended hours.
- Ensure CSR have easy access to current, updated resources to provide accurate guidance about plan/drug coverage, out of pocket cost, availability of providers, requirements, processes, etc.
- Foster strong relationships with contracted providers via regular communications and collaboration. Data driven comparisons of PEC metrics can support/guide mutual improvement.
- Explore potential of aligning information flow/ EHRs to better integrate, support, or facilitate patient care, coordination of care and vital information among contracted providers.
- Consider the need to conduct additional measurement, probing of composite measures with targeted populations or health systems (e.g., CG-CAHPS or CAHPS Drill Down Survey).

Voice of the Member

“Had **nothing but the best care for all my children**. The doctors **care and are straightforward** with everything.”

“We have **finally found doctors that make sure my children have the best care possible**. All of the **doctors coordinate with each other** and always **update one another on his medications** to keep from unwanted side effects!”

“His therapist is great. **She involves us in his treatment.**”

“She **always spent a lot of time listening to me** and **taking great care of my daughter.**”

“I have **never had issues with my daughter's care**. The doctors **always answer me fully** and often **provide additional resources** to help me learn more.”

Additional resource for improvement:

AHRQ best practices: <https://cahps.ahrq.gov/surveys-guidance/hp/improve/index.html>

SPH Performance Improvement Consulting: <http://www.sphanalytics.com/consulting>

(SPH National Sample)

Recommended actions for improvement based on comments from adult consumers across the country with health insurance coverage



Rating of Personal Doctor

Rating of Personal Doctor Improvement Strategies

- Analyze, investigate, and probe for weakness or QI opportunities among those measures or composites that are Key Drivers (or highly correlated) with rating of personal doctor. (e.g., HWDC, GCQ, GNC, Coordination Of Care).
- Review QI recommendations/actions for related CAHPS composite measures: How Well Doctors Communicate, Getting Care Quickly, Getting Needed Care, Coordination of Care.
- Work collaboratively with pediatric providers, encourage and support a family friendly approach that helps parents/families navigate the health care system and overcome obstacles.
- Provide resources, articles, tools and training sessions via multiple channels to support and drive improvement in physician-patient communication and patient-centered interviewing. Examples include: Foster relationships with patients. Partner with them. Listen to their concerns. Treat them with compassion. Spend adequate time with them and ensure questions and concerns are answered.
- Share, report and discuss relative CAHPS health care performance and feedback at the health system and/or within network level.
- Promote use of a secure online patient portal which allows patients access to their medical record and health care information of relevant to patient needs.
- Gather and analyze patient feedback on their recent office visit (i.e., patient "comment cards," follow up call/text/email, CG CAHPS survey, etc.).
- Explore ability of providers to share with patient's a summary of their medical record or health assessments to facilitate conversation about relevant health and wellness issues.
- Assess systems (e.g., EHRs) processes and/or procedures used to gather or facilitate distribution of patient information among providers.
- Suggest providers/practices periodically analyze appointment scheduling timeframes versus types of office visits. Minimize wait times.

Voice of the Member

- “My son's doctor is great. He **always answers all our questions** and **makes our son's health and well-being a priority**. He **proactively suggests treatments** and courses of action that we had not necessarily considered.”
- “**Very friendly and kind, and willing to answer most questions**. He doesn't always have all the information I need but **gets it for me when needed.**”
- “Our **doctor's bedside manner makes him stand out!** You can tell **how much he truly cares!**”
- “They have **worked hard to get the medication** we needed and **have gone out of their way** when there have been issues at the pharmacy.”
- “**Takes his time** and has those **one-on-one sessions with the child.**”
- “Our doctor **stays on top of things** and is **easy to get a hold of.**”

(SPH National Sample)

Recommended actions for improvement based on comments from adult consumers across the country with health insurance coverage

Additional resource for improvement:

AHRQ best practices: <https://cahps.ahrq.gov/surveys-guidance/hp/improve/index.html>

SPH Performance Improvement Consulting: <http://www.sphanalytics.com/consulting>



Rating of Specialist

Rating of Specialist Improvement Strategies

- Analyze, investigate, and probe for weakness or QI opportunities among those measures or composites that are Key Drivers (or highly correlated) with rating of specialist or doctor. (e.g., HWDC, GCQ, GNC, Coordination Of Care).
- Review QI recommendations/actions for related CAHPS composite measures: How Well Doctors Communicate, Getting Care Quickly, Getting Needed Care, Coordination of Care.
- Provide resources, articles, tools and training sessions via multiple channels to support and drive improvement in physician-patient communication and patient-centered interviewing. Examples include: Listen to patients' concerns, Follow-up with the patient. Provide thorough explanations. Ensure that all questions and concerns are answered. All staff focus on being helpful and courteous to patients.
- Share, report and discuss relative CAHPS health care performance and feedback at the health system and/or within network level.
- Promote use of a secure online patient portal which allows patients access to their medical record and health care information of relevant to patient needs.
- Gather and analyze patient feedback on their recent office visit (i.e., patient "comment cards," follow up call/text/email, CG CAHPS survey, etc.)
- Assess adequacy of contracted specialist by specialty. If necessary, review quality of care information among specific specialties and/or identify practices of excellence.
- Explore ability of providers to share with patient's a summary of their medical record or health assessments to facilitate conversation about relevant health and wellness issues.
- Assess systems (e.g., EHRs) processes and/or procedures used to gather or facilitate distribution of patient information among providers.
- Suggest providers/practices periodically analyze appointment scheduling timeframes versus types of office visits.

Voice of the Member

“The doctor who performed my son's follow-up circumcision was **very down to earth and did an excellent job.**”

“They're **great with my children and answer everything in timely manner.**”

“It's hard for someone that **sees a patient for 45 minutes a month to necessarily decide what is best**, or at least they should **let the parents have some input.**”

“She always **spent a lot of time listening to me and taking great care of my daughter.**”

“My daughter hasn't seen a specialist in a long time now, but whenever she has had to see one, they have **always been very professional.**”

Additional resource for improvement:

AHRQ best practices: <https://cahps.ahrq.gov/surveys-guidance/hp/improve/index.html>

SPH Performance Improvement Consulting: <http://www.sphanalytics.com/consulting>

(SPH National Sample)

Recommended actions for improvement based on comments from adult consumers across the country with health insurance coverage



Getting Needed Care

Getting Needed Care Improvement Strategies

- Assess CAHPS data by health system, PO, and/or network. Communicate results and identify outliers. Evaluate with HEDIS data, complaints, appeals and/or quality of care concerns, and communicate. Identify issues, prioritize and implement improvement activities.
- Work with providers to support patients in navigating health care and remove obstacles. Support and encourage providers to take innovative action to improve access. Examples include: Serve patients quickly, treat urgent issues promptly, minimize wait times, follow-up about appointment times and test results. Another is to develop an in-depth referral/decision-making guide for PCP's to prepare for/with patients explaining need, urgency, patient expectations and responsibilities, and preparations for seeing a specialist.
- Encourage and guide parents/families when and how to use/access alternative care settings, e.g., web-based, tele-health, urgent care, and emergency care.
- Support members and collaborate with providers to enhance access to care through innovative, proactive approaches within Care Management, Chronic Care, and Quality Management. Work with providers to identify and resolve opportunities.
- Continually assess, revisit and simplify plan requirements/processes (i.e., UM) impacting access to care, tests, or treatment. Seek opportunities to improve processes and procedures.
- Review and simplify precertification/auth/referral policies/procedures for both member and provider, including messages and communications. Cross-reference with complaints, concerns, and quality of care issues. Improve and clarify processes and communications.
- Evaluate and simplify member communications, assuring that members are clearly told why something is not approved. When appropriate, offer suggestions for next steps or alternatives.
- Ensure Customer Service representatives are able to accurately advise members of available alternatives for care, such as walk-in clinics, urgent care, specialists, labs, etc.

Voice of the Member

“I have **never had any difficulties getting any treatment or tests** done for my child. The **doctors are always right on top of things**. They get **everything done really quickly.**”

“**Getting tests and services done has been a big issue.** They were supposed to observe her for two nights, but the next day they tried kicking her out. Within a day, she exhibited respiratory issues and was transferred to another department. I argued for them to do a blood gas test. It was brushed off, and within a day she was in the ICU. I then cornered the doctor and demanded the blood gas test. As I suspected, she was retaining CO2.”

“It may help that **their doctor is the guy that runs the place**, and he knows **if I ask for something fast, it needs to be fast.**”

“I used to go to a **standalone emergency clinic, and they were always able to treat my daughter for everything.** I took her there once when she broke her arm and they **treated her great, from x-rays to splinting her arm.**”

(SPH National Sample)

Recommended actions for improvement based on comments from adult consumers across the country with health insurance coverage

Additional resource for improvement:

AHRQ best practices: <https://cahps.ahrq.gov/surveys-guidance/hp/improve/index.html>

SPH Performance Improvement Consulting: <http://www.sphanalytics.com/consulting>



Getting Care Quickly

Getting Care Quickly Improvement Strategies

- Assess CAHPS data by health system, PO, and/or network. Communicate results and identify outliers. Correlate with HEDIS data, complaints, appeals and/or quality of care concerns, and communicate. Support and encourage providers to take innovative action to improve access.
- Support members and collaborate with providers to enhance routine and urgent access to care through innovative, proactive approaches within Care Management, Chronic Care, and Quality Management. Work with providers to identify and resolve opportunities.
- Discuss and engage providers/staff on scheduling best practices, how to improve access to routine/urgent care. Consider scheduling routine appointments well in advance, e.g., 12 months. Provide tools, resources, support and assessment.
- Support, encourage and assist in approaches toward open access scheduling. Allow a portion of each day open for urgent care and/or follow-up care.
- Contract with additional providers for urgent and after-hour appointments/availability.
- Explore partnering with 24-hour urgent care or walk-in clinics.
- Educate providers and staff about Plan and regulatory appointment wait time requirements or standards (i.e., CAHPS, CMS, States, etc.) . Identify opportunities for improvement.
- Provide members streamlined tools and resources (links, apps, etc.) about benefits, providers, referrals, scheduling appointments, etc. Identify options and hours available, and include alternatives, including practices with evening and weekend hours. Consider alternative sources of information, e.g., refrigerator magnets.
- Explore and support alternative telecommunication technologies to expand access to care: telephone, telehealth, telemedicine and patient portals.
- Encourage use of Nurse Hotline/Nurse on Call lines or live-chat via web for members to get health information and advice.

Voice of the Member

“She has been **always seen in a timely manner** and was treated well.”

“**We were in and out in about 15 minutes**, and I had the **lab results within a few days** saying my kid was healthy.”

“The **care was quick and friendly**, and I got her into both **appointments easily**.”

“We have an **urgent care facility** that I can go to when **I don't want to wait for an appointment**. We mostly use it for sickness visits, so I don't have to wait in the waiting room.”

“It's **usually easy for us to get into an urgent care**. It's normally a 30-minute-per-person wait time. So if there are two people ahead of us, it's an hour wait time.”

(SPH National Sample)

Recommended actions for improvement based on comments from adult consumers across the country with health insurance coverage

Additional resource for improvement:

AHRQ best practices: <https://cahps.ahrq.gov/surveys-guidance/hp/improve/index.html>

SPH Performance Improvement Consulting: <http://www.sphanalytics.com/consulting>



How Well Doctors Communicate

How Well Doctors Communicate Improvement Strategies

- Cultivate a patient-centered care philosophy and programs across the provider network.
- Support, communicate and educate providers about the vital medical importance of effective doctor-patient communication (i.e., reduced hospitalizations & ER visits , improved adherence).
- Explain health care concepts clearly and simply to parents and children. Use simple terms for children. Be prepared to accommodate and overcome language /literacy limitations.
- Address all of the parents' and the child's concerns. When appropriate, involve the child. Maintain eye contact with both the parent and the child. Be kind, thoughtful and thorough.
- Speak directly to older children when discussing matters related to their health.
- Provide readily available recommendations, tools and guidance to all providers to support and enhance communication skills and effective conversation skills with patients. Providers need to: Provide thorough explanations, provide written materials, illustrations and/or examples to help patient's understand, repeat the patient's concern and then address the topic, ask clarifying questions, make eye contact, avoid medical jargon and technical language, avoid multi-tasking, avoid rushing the patient, use constructive verbal responses and non-verbal cues, apply empathy and interest in response to concerns, by kind, avoid condescending language or actions, address questions and concerns-as much time as necessary, schedule adequate time for each visit, and follow-up after tests or procedures.
- Collaborate and share with providers tools, resources, and best practices to support, or reinforce, a complete and effective information exchange with all patients (e.g., a summary of medical record or health assessment to facilitate an effective health or wellness discussion, patient testimonials - perhaps from focus groups - of effective and ineffective communication techniques, provide tips and/or testimonials in provider newsletters).

Voice of the Member

“They are **thorough every time** I take them to the doctor. They **explained everything** as to what was or wasn't wrong with my children, how to resolve it and **proper education** about the reasons.”

“We **typically go to nurse practitioners**, which I prefer. They seem **more willing to listen and take their time.**”

“**Direct eye contact** and the **doctor restating what I had just said** goes a long way to **reassuring me that I'm being listened to** and paid attention to.”

“They should **take their time**. When a **doctor seems rushed, it feels like you are unimportant** and a bother. When they take their time, then it feels like **you are important and that your issues matter.**”

“**Don't act like things that you say are stupid**. When they act like **what you say is important** and valid, it **makes you feel respected.**”

“**Look at you when you're talking to them**. He is always good about **facing us when we are talking to him.**”

(SPH National Sample)

Recommended actions for improvement based on comments from adult consumers across the country with health insurance coverage

Additional resource for improvement:

AHRQ best practices: <https://cahps.ahrq.gov/surveys-guidance/hp/improve/index.html>

SPH Performance Improvement Consulting: <http://www.sphanalytics.com/consulting>

Customer Service Improvement Strategies

- 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.

Voice of the Member

“Every time I did indeed call, the **staff was very respectful** and that **made me feel heard and valuable**. Even though, essentially, I was, and still am, getting almost free healthcare, I felt like I was indeed **paying a premium by how well I was treated.**”

“I had to call in to **recertify my daughter** because I was late recertifying, due to the fact that I received the paperwork later than I should have. **I was able to easily call** the number, get someone on the phone and **complete the process of recertifying very easily.**”

“**The forms can be ridiculous.** I just don't see why there should be four, five or six pages of information for me to fill out. And oftentimes, I am **repeating information** on the forms over and over again.”

“I have found that in the majority of interactions, with any **customer service representative that is associated with Medicaid**, they **tend to look down on you**. There have been numerous occasions where we would have to call and change doctors, and **we were treated like dirt**. It's as if a child is on Medicaid because the parents don't work or whatever.”

(SPH National Sample)

Recommended actions for improvement based on comments from adult consumers across the country with health insurance coverage

Additional resource for improvement:

AHRQ best practices: <https://cahps.ahrq.gov/surveys-guidance/hp/improve/index.html>

SPH Performance Improvement Consulting: <http://www.sphanalytics.com/consulting>



Coordination of Care

Coordination of Care Improvement Strategies

- 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.
- Carefully assess any parent or patient concerns associated with any health care received out-of-office, addressing and clarifying as appropriate. Seek and obtain all associated records.
- 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?

Voice of the Member

- “He has seen three different doctors at that office. I don't know **how they transfer information** to each other, since I have **had to repeat things** to one that I had already told another. **I would think that would be in his files.**”
- “When we switched her primary doctor, **the new doctor knew my child's medical history.** She was **right on top of it.** I was **surprised and impressed.**”
- “The doctor **knew our son's medical history, asked him about how school was going** at every visit, and **engaged with him about his interests and hobbies.** It almost felt like he was a **part of the family.**”
- “When our **son's doctor retired,** it was a bit of an **abrupt shock** to go from someone whom we had worked with for eleven years to a doctor who had never met us or our son before. However, he **took the time to talk to us and review our son's medical history,** and it **wasn't long before we were comfortable with each other** and confident that he would meet our son's medical needs.”

(SPH National Sample)

Recommended actions for improvement based on comments from adult consumers across the country with health insurance coverage

Additional resource for improvement:

AHRQ best practices: <https://cahps.ahrq.gov/surveys-guidance/hp/improve/index.html>

SPH Performance Improvement Consulting: <http://www.sphanalytics.com/consulting>



Access to Prescription Medicine

Access to Prescription Medicine Improvement Strategies

- Encourage streamlined, efficient service for families, such as sending prescriptions directly to pharmacies immediately after the appointment.
- Don't put the family in the middle, encourage and support prompt pharmacy/provider communication and collaboration to avoid or resolve issues for members.
- Assess opportunities to improve prescription coverage that may forego serious set-backs, e.g., coverage of some allergy medications.
- Provide alerts and reminders to busy parents to obtain currently prescribed medications in a timely manner.
- Advise and educate providers and pharmacies of preferred, covered alternative medications for common prescriptions. Make this information readily and easily available on-line.
- Assess and address member concerns and complaints about problems with mail prescription service and/or timeliness. Review and simplify or clarify associated communications/materials.
- Simplify pre-auth and authorization processes and clarify requirements with clear member and provider communications.

Voice of the Member

- “It's **easy to get them filled and fast**, but they stopped paying for my daughter's allergy medicine.”
- “Normally what happens is **the doctor finds an alternative that the insurance will cover.**”
- “The doctor sends them to the pharmacy, and they are **always filled quick and easy, with no hassles.**”
- “I would **expect the doctor to call the pharmacy and iron out any issues** that may come up.”
- “The bill was huge. I **called to discuss how much it would cost out-of-pocket.** Luckily, I had a **very helpful, kind customer service representative** who first **asked, not only about the health of my son, but also about my health!**”
- “The **representative helped me not worry about bills** during that stressful time.”

Additional resource for improvement:

AHRQ best practices: <https://cahps.ahrq.gov/surveys-guidance/hp/improve/index.html>

SPH Performance Improvement Consulting: <http://www.sphanalytics.com/consulting>

(SPH National Sample)

Recommended actions for improvement based on comments from adult consumers across the country with health insurance coverage



Appendix: Questionnaire

- Presbyterian Centennial Care

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 your child receives. 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.

Please answer the questions for the child listed on the letter. Please do not answer for any other children.

1. Our records show that your child is now in Presbyterian Centennial Care. Is that right?

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

2. What is the name of your child's health plan? (please print)

YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS

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

3. In the last 6 months, did your child 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 your child needed care right away, how often did your child get care as soon as he or she 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 for your child?

- 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 for your child as soon as your child needed?

- Never
 Sometimes
 Usually
 Always

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

- None → **If None, Go to Question 11**
 1 time
 2
 3
 4
 5 to 9
 10 or more times



8. In the last 6 months, how often did you have your questions answered by your child's doctors or other health providers?

- Never
- Sometimes
- Usually
- Always

9. 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 child's 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

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

- Never
- Sometimes
- Usually
- Always

11. Is your child now enrolled in any kind of school or daycare?

- Yes
- No → *If No, Go to Question 14*

12. In the last 6 months, did you need your child's doctors or other health providers to contact a school or daycare center about your child's health or health care?

- Yes
- No → *If No, Go to Question 14*

13. In the last 6 months, did you get the help you needed from your child's doctors or other health providers in contacting your child's school or daycare?

- Yes
- No

SPECIALIZED SERVICES

14. Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment.

In the last 6 months, did you get or try to get any special medical equipment or devices for your child?

- Yes
- No → *If No, Go to Question 17*

15. In the last 6 months, how often was it easy to get special medical equipment or devices for your child?

- Never
- Sometimes
- Usually
- Always

16. Did anyone from your child's health plan, doctor's office, or clinic help you get special medical equipment or devices for your child?

- Yes
- No

17. In the last 6 months, did you get or try to get special therapy such as physical, occupational, or speech therapy for your child?

- Yes
- No → *If No, Go to Question 20*

18. In the last 6 months, how often was it easy to get this therapy for your child?

- Never
- Sometimes
- Usually
- Always

19. Did anyone from your child's health plan, doctor's office, or clinic help you get this therapy for your child?

- Yes
- No

20. In the last 6 months, did you get or try to get treatment or counseling for your child for an emotional, developmental, or behavioral problem?

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

21. In the last 6 months, how often was it easy to get this treatment or counseling for your child?

- Never
- Sometimes
- Usually
- Always

22. Did anyone from your child's health plan, doctor's office, or clinic help you get this treatment or counseling for your child?

- Yes
- No

23. In the last 6 months, did your child get care from more than one kind of health care provider or use more than one kind of health care service?

- Yes
- No → *If No, Go to Question 25*

24. In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these different providers or services?

- Yes
- No

YOUR CHILD'S PERSONAL DOCTOR

25. A personal doctor is the one your child would talk to if he or she needs a check-up, has a health problem or gets sick or hurt. Does your child have a personal doctor?

- Yes
- No → *If No, Go to Question 40*

26. In the last 6 months, how many times did your child have an in person, phone, or video visit with his or her personal doctor?

- None → *If None, Go to Question 36*
- 1 time
- 2
- 3
- 4
- 5 to 9
- 10 or more times

27. In the last 6 months, how often did your child's personal doctor explain things about your child's health in a way that was easy to understand?

- Never
- Sometimes
- Usually
- Always

28. In the last 6 months, how often did your child's personal doctor listen carefully to you?

- Never
- Sometimes
- Usually
- Always

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

- Never
- Sometimes
- Usually
- Always

30. Is your child able to talk with doctors about his or her health care?

- Yes
- No → *If No, Go to Question 32*

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

- Never
- Sometimes
- Usually
- Always

32. In the last 6 months, how often did your child's personal doctor spend enough time with your child?

- Never
- Sometimes
- Usually
- Always

33. In the last 6 months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?

- Yes
- No

34. In the last 6 months, did your child get care from a doctor or other health provider besides his or her personal doctor?

- Yes
 No → *If No, Go to Question 36*

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

- Never
 Sometimes
 Usually
 Always

36. 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 child's personal doctor?

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

37. Does your child have any medical, behavioral, or other health conditions that have lasted for more than 3 months?

- Yes
 No → *If No, Go to Question 40*

38. Does your child's personal doctor understand how these medical, behavioral, or other health conditions affect your child's day-to-day life?

- Yes
 No

39. Does your child's personal doctor understand how your child's medical, behavioral, or other health conditions affect your family's day-to-day life?

- Yes
 No

GETTING HEALTH CARE FROM SPECIALISTS

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

40. 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 for your child with a specialist?

- Yes
 No → *If No, Go to Question 44*

41. In the last 6 months, how often did you get appointments for your child with a specialist as soon as he or she needed?

- Never
 Sometimes
 Usually
 Always

42. How many specialists has your child talked to in the last 6 months?

- None → *If None, Go to Question 44*
 1 specialist
 2
 3
 4
 5 or more specialists

43. We want to know your rating of the specialist your child 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 CHILD'S HEALTH PLAN

The next questions ask about your experience with your child's health plan.

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

- Yes
 No → *If No, Go to Question 47*

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

- Never
 Sometimes
 Usually
 Always

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

- Never
 Sometimes
 Usually
 Always

47. In the last 6 months, did your child's health plan give you any forms to fill out?

- Yes
 No → *If No, Go to Question 49*

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

- Never
 Sometimes
 Usually
 Always

49. 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 child's health plan?

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

PRESCRIPTION MEDICINES

50. In the last 6 months, did you get or refill any prescription medicines for your child?

- Yes
 No → *If No, Go to Question 53*

51. In the last 6 months, how often was it easy to get prescription medicines for your child through his or her health plan?

- Never
 Sometimes
 Usually
 Always

52. Did anyone from your child's health plan, doctor's office, or clinic help you get your child's prescription medicines?

- Yes
 No

ABOUT YOUR CHILD AND YOU

53. In general, how would you rate your child's overall health?

- Excellent
 Very Good
 Good
 Fair
 Poor

54. In general, how would you rate your child's overall mental or emotional health?

- Excellent
 Very Good
 Good
 Fair
 Poor

55. Does your child currently need or use medicine prescribed by a doctor (other than vitamins)?

- Yes
 No → *If No, Go to Question 58*

56. Is this because of any medical, behavioral, or other health condition?

- Yes
 No → *If No, Go to Question 58*

57. Is this a condition that has lasted or is expected to last for at least 12 months?

- Yes
 No

58. Does your child need or use more medical care, more mental health services, or more educational services than is usual for most children of the same age?

Yes

No → *If No, Go to Question 61*

59. Is this because of any medical, behavioral, or other health condition?

Yes

No → *If No, Go to Question 61*

60. Is this a condition that has lasted or is expected to last for at least 12 months?

Yes

No

61. Is your child limited or prevented in any way in his or her ability to do the things most children of the same age can do?

Yes

No → *If No, Go to Question 64*

62. Is this because of any medical, behavioral, or other health condition?

Yes

No → *If No, Go to Question 64*

63. Is this a condition that has lasted or is expected to last for at least 12 months?

Yes

No

64. Does your child need or get special therapy such as physical, occupational, or speech therapy?

Yes

No → *If No, Go to Question 67*

65. Is this because of any medical, behavioral, or other health condition?

Yes

No → *If No, Go to Question 67*

66. Is this a condition that has lasted or is expected to last for at least 12 months?

Yes

No

67. Does your child have any kind of emotional, developmental, or behavioral problem for which he or she needs or gets treatment or counseling?

Yes

No → *If No, Go to Question 69*

68. Has this problem lasted or is it expected to last for at least 12 months?

Yes

No

69. What is your child's age?

Less than 1 year old

_____ YEARS OLD (*write in*)

70. Is your child male or female?

Male

Female

71. Is your child of Hispanic or Latino origin or descent?

Yes, Hispanic or Latino

No, not Hispanic or Latino

72. What is your child's race? *Mark one or more.*

White

Black or African-American

Asian

Native Hawaiian or other Pacific Islander

American Indian or Alaska Native

Other

73. What is your age?

Under 18

18 to 24

25 to 34

35 to 44

45 to 54

55 to 64

65 to 74

75 or older

74. Are you male or female?

Male

Female

75. 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

76. How are you related to the child?

- Mother or father
- Grandparent
- Aunt or uncle
- Older brother or sister
- Other relative
- Legal guardian
- Someone else

ADDITIONAL QUESTIONS

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

77. In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these doctors or other health providers?

- Yes
- No

78. In the last 6 months, who helped to coordinate your child's care?

- Someone from your child's health plan
- Someone from your child's doctor's office or clinic
- Someone from another organization
- A friend or family member
- You

79. How satisfied are you with the help you got to coordinate your child's care in the last 6 months?

- Very dissatisfied
- Dissatisfied
- Neither dissatisfied nor satisfied
- Satisfied
- Very satisfied

80. In the last 6 months, has your child received any material from your health plan about care coordination and how to contact the care coordination unit?

- Yes
- No → ***Thank you. Please return the completed survey in the postage-paid envelope.***

81. Did your child's Care Coordinator sit down with you and create a Plan of Care?

- Yes
- No

82. Are you satisfied that your child's care plan talks about the help your child needs to stay healthy and remain in your home?

- Very dissatisfied
- Dissatisfied
- Neither dissatisfied nor satisfied
- Satisfied
- Very satisfied

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.





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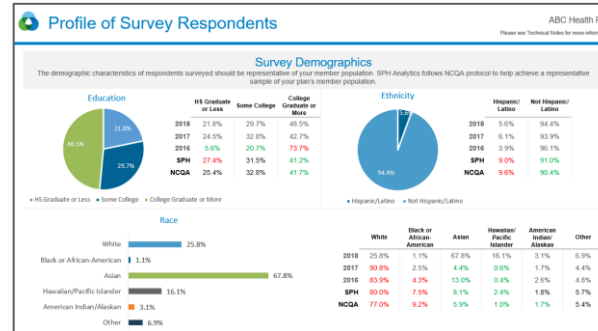
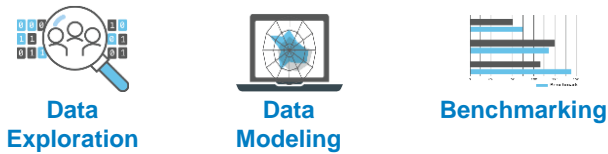
Survey Solutions Member Experience	Survey Solutions Patient Experience	Survey Solutions Medical Practice	Qualitative Solutions
HEDIS CAHPS	HCAHPS	CG CAHPS	Focus Groups
Medicare CAHPS	OAS CAHPS	Medical Practice Express	Online Communities
Medicare HOS	ACO CAHPS	PCMH	In-depth Interviews
QHP Enrollee	CAHPS for MIPS	PCMH Express	Strategy Research
Behavioral Health (ECHO)	Home Health CAHPS	Survey Solutions Provider Experience	Brand / Brand Positioning
Call Center Satisfaction	ED Express	Provider Satisfaction with Network	Market Share
Case Management	Surgical Express	Provider Satisfaction with Health Plan	Market Segmentation
Disease Management	Outpatient Express	Provider Access	Price Positioning
CAHPS Drill Down/Simulations	Inpatient Express	Provider Verification	Product Design
New Member	Diagnostic Imaging	Survey Solutions Other Stakeholders	Advertising / Communications
Dental CAHPS	Pain Management	Employee Satisfaction	Conjoint Analysis
HCBS CAHPS	Endoscopy	AHRQ Patient Safety Survey (SOPS)	Health Care Engagement Index™ (HCEI™)
Custom Member Satisfaction / Trackers	Therapy & Rehab	Broker / Employer Experience	
	Hospice CAHPS		
	ICH CAHPS		

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ANALYZE

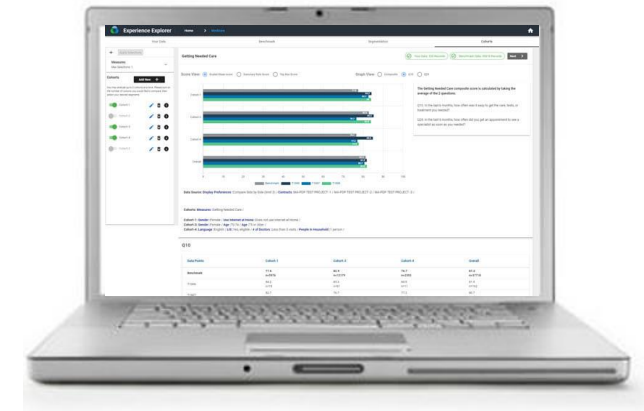
Our analytics offerings include 7 descriptive and predictive solutions built on our Nexus Platform



The clear industry leader in the insights provided by our analytics

MOTIVATE

We target action by creating cohorts for personalized engagement and can help with outreach execution



Data-driven blueprint to maximize results; plus the option to leverage SPH's help to execute a campaign



LISTEN to voice of healthcare consumers

ANALYZE healthcare consumer experience

MOTIVATE members to improve health

Voice of Member		Voice of Patient		Strategy Research	Data Analysis Solutions	Predictive Analytics + Targeted Outreach
HEDIS CAHPS	Health Risk Assessments	HCAHPS	OAS CAHPS	Brand / Brand Positioning	Nexus Portal	Smart Member Engagement
Medicare CAHPS	Performance Guarantees	CG CAHPS	ASC Patient Satisfaction	Market Share	Experience Explorer	Care Gap Closure
Medicare HOS	Net Promoter Score™ Surveys	ACO CAHPS	Pain Management	Market Segmentation	Nationwide Benchmarks	Diabetes
QHP Enrollee	Ongoing Tracker Surveys	CAHPS for MIPS	Endoscopy	Price Positioning	Predictive Analytics with SPH Forensics™	Cancer Screening
Behavioral Health (ECHO)	CAHPS Drill Down/Simulations	ICH CAHPS	Diagnostic Imaging	Product Design	trACTION™ Impact Analysis & Modeler	Vaccinations
Call Center Satisfaction	New Member	Home Health CAHPS	Therapy & Rehab	Advertising / Communications	Dynamic Data Analysis (DDA)	Omnichannel Outreach
Case Management	Disenrolled Members	Hospice CAHPS	Surgical Express	Qualitative Research	Conjoint Analysis	SDoH Assessment
Disease Management	LTC/LTSS	PCMH	ED Express	Focus Groups	Voice of the Member / Patient Priority Modeler	Access to Care Audits
Dental CAHPS	HCBS CAHPS	Outpatient Express	Inpatient Express	Online Communities	Condition Intelligence Analytics	Health Risk Assessments (HRAs)
Custom Voice of Member/Patient Market Research	Voice of Provider	Access to Care	In-depth Interviews	Voice of Other Stakeholders	Health Care Engagement Index™ (HCEI™)	Rx Adherence and MTM
	Provider Satisfaction with Network	Provider Access	Provider Verification	AHRQ Patient Safety Survey (SOPS)	Performance Improvement Solutions	New Member Welcome
	Provider Satisfaction with Health Plan			Employee Satisfaction	Scores / Ratings Improvement Consulting	Retention and Renewal
				Broker / Employer Experience		Discharge Phone Calls

LISTEN

ANALYZE

MOTIVATE