

# MY 2020 CAHPS<sup>®</sup> Medicaid Child with CCC 5.1H Final Report

Western Sky Community Care (Centene NM)

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SPH Analytics (SPH), a National Committee for Quality Assurance (NCQA) certified HEDIS<sup>®</sup> Survey Vendor, was selected by Western Sky Community Care (Centene NM) to conduct its MY 2020 CAHPS<sup>®</sup> 5.1H Medicaid Child with CCC Survey (with CCC Measurement set). NCQA requires health plans to submit CAHPS survey results in compliance with HEDIS<sup>®</sup> accreditation requirements.

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

**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 Alisa Simpson (678-689-0303) and your Project Manager is Julia Schneider (248- 539-8757). 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 and phone 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 = 66 (0 in Spanish)  
 ☎ Total Number of Phone Completes = 97 (8 in Spanish)

Number of undeliverables: 582

## 2021 RESPONSE RATE (GENERAL POPULATION)

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

$$\frac{66 \text{ (Mail)} + 97 \text{ (Phone)} = 163}{1650 \text{ (Sample)} - 14 \text{ (Ineligible)} = 1636} = 10.0\%$$

## RESPONSE RATE COMPARISON

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

GENERAL POPULATION		2019	2020	2021
Complete	Completed Survey	NA	14	163
	<b>SUBTOTAL</b>	<b>NA</b>	<b>14</b>	<b>163</b>
Ineligible	Does not Meet Eligibility Criteria (01)	NA	0	10
	Language Barrier (03)	NA	0	4
	Mentally/Physically Incapacitated (04)	NA	0	0
	Deceased (05)	NA	0	0
	<b>SUBTOTAL</b>	<b>NA</b>	<b>0</b>	<b>14</b>
Non-Response	Break-off/Incomplete (02)	NA	0	14
	Refusal (06)	NA	0	22
	Maximum Attempts Made (07)	NA	1635	1437
	Added to DNC List (08)	NA	1	0
	<b>SUBTOTAL</b>	<b>NA</b>	<b>1636</b>	<b>1473</b>
<b>TOTAL</b>		<b>NA</b>	<b>1650</b>	<b>1650</b>
<b>OVERSAMPLING %</b>		<b>NA</b>	<b>0.0%</b>	<b>0.0%</b>
Total Sample Size (General Pop + CCC)		NA	3024	2925
Total Completes (General Pop + CCC)		NA	26	289
<b>Total Response Rate (General Pop + CCC)</b>		<b>NA</b>	<b>0.9%</b>	<b>10.0%</b>
General Population Sample Size		NA	1650	1650
<b>General Population Response Rate</b>		<b>NA</b>	<b>0.8%</b>	<b>10.0%</b>
Supplemental (CCC) Sample Size		NA	1374	1275
Supplemental (CCC) Completes		NA	7	86

Note: Respondents were given the option of completing the survey in Spanish. A telephone number was provided on the survey cover letter for members to call if they would like to complete the survey in Spanish.



# Executive Summary

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- Western Sky Community Care (Centene NM)

**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

No key measures changed significantly.



## 163 / 10.0%

Completed surveys / Response Rate

MEASURE NAME	2021 SCORE	ESTIMATED NCQA RATING
<b>Rating of Health Plan</b> (% 9 or 10)	74.2%	★ ★ ★
<b>Rating of Health Care</b> (% 9 or 10)	75.9%	NA^
<b>Rating of Personal Doctor</b> (% 9 or 10)	76.0%	★ ★
<b>Rating of Specialist</b> (% 9 or 10)	61.5%	NA^
<b>Getting Needed Care</b> (% Always or Usually)	85.0%	NA^
<b>Getting Care Quickly</b> (% Always or Usually)	83.0%	NA^
<b>Coordination of Care</b> (% Always or Usually)	89.7%	NA^

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

## POWER

Promote and Leverage Strengths

**Q9** Health care overall

## OPPORTUNITIES

Focus Resources on Improving Processes That Underlie These Items

- Q43** Specialist overall
- Q79** Satisfied with help to coordinate care
- Q41** Got specialist appt.
- Q4** Got urgent care
- Q10** Got care/tests/treatment
- Q6** Got routine care
- Q29** Dr. showed respect
- Q28** Dr. listened carefully

^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
<b>Rating Questions (% 9 or 10)</b>			
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%
<b>Rating Questions (% 8, 9 or 10)</b>			
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%
<b>Getting Needed Care (% Always or Usually)</b>			
Q10. Getting care, tests, or treatment	90.1%	90.8%	90.8%
Q41. Getting specialist appointment	80.3%	80.4%	82.4%
<b>Getting Care Quickly (% Always or Usually)</b>			
Q4. Getting urgent care	91.9%	91.7%	91.7%
Q6. Getting routine care	88.6%	89.3%	83.8%
<b>Coordination of Care (Q35) (% Always or Usually)</b>			
	84.2%	85.0%	84.9%

## 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)	50.0%	74.2%	24.2%	73.3%	49 <sup>th</sup>	71.9%	62 <sup>nd</sup>
Rating of Health Plan (% 8, 9 or 10)	92.9%	84.3%	-8.6%	87.3%	20 <sup>th</sup>	86.5%	23 <sup>rd</sup>
Getting Needed Care (% Always or Usually)	68.3%	85.0%	16.7%	86.6%	34 <sup>th</sup>	86.0%	35 <sup>th</sup>
Customer Service (% Always or Usually)	100%	86.4%	-13.6%	88.3%	29 <sup>th</sup>	88.8%	19 <sup>th</sup>
Ease of Filling Out Forms (% Always or Usually)	92.9%	96.3%	3.4%	96.0%	53 <sup>rd</sup>	96.5%	44 <sup>th</sup>

### KEY TAKEAWAYS

Your overall Rating of Health Plan (9-10) Summary Rate score is 74.2% and represents a change of 24.2% 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 - 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)	55.6%	75.9%	20.3%	74.4%	60 <sup>th</sup>	71.9%	78 <sup>th</sup>
Rating of Health Care (% 8, 9 or 10)	88.9%	85.1%	-3.8%	88.7%	15 <sup>th</sup>	88.0%	17 <sup>th</sup>
Getting Care Quickly (% Always or Usually)	88.9%	83.0%	-5.9%	87.8%	18 <sup>th</sup>	90.5%	6 <sup>th</sup>
How Well Doctors Communicate (% Always or Usually)	93.8%	92.0%	-1.8%	94.5%	15 <sup>th</sup>	95.3%	6 <sup>th</sup>
Coordination of Care (% Always or Usually)	75.0%	89.7%	14.7%	84.9%	79 <sup>th</sup>	86.1%	78 <sup>th</sup>
Rating of Personal Doctor (% 9 or 10)	60.0%	76.0%	16.0%	78.6%	26 <sup>th</sup>	78.6%	25 <sup>th</sup>
Rating of Personal Doctor (% 8, 9 or 10)	80.0%	91.5%	11.5%	90.8%	57 <sup>th</sup>	90.9%	56 <sup>th</sup>
Rating of Specialist (% 9 or 10)	66.7%	61.5%	-5.2%	75.7%	<5 <sup>th</sup>	73.4%	<5 <sup>th</sup>
Rating of Specialist (% 8, 9 or 10)	83.3%	76.9%	-6.4%	88.2%	<5 <sup>th</sup>	87.0%	<5 <sup>th</sup>

### KEY TAKEAWAYS

Your overall Rating of Health Care (9-10) Summary Rate score is 75.9% and represents a change of 20.3% 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)	57.1%	71.8%	14.7%	71.9%	49 <sup>th</sup>	69.3%	59 <sup>th</sup>
Rating of Health Plan (% 8, 9 or 10)	85.7%	82.4%	-3.3%	85.9%	22 <sup>nd</sup>	84.8%	22 <sup>nd</sup>
Getting Needed Care (% Always or Usually)	83.3%	79.3%	-4.0%	88.3%	<5 <sup>th</sup>	88.1%	<5 <sup>th</sup>
Customer Service (% Always or Usually)	87.5%	92.0%	4.5%	90.2%	75 <sup>th</sup>	90.3%	62 <sup>nd</sup>
Ease of Filling Out Forms (% Always or Usually)	100%	93.7%	-6.3%	95.9%	7 <sup>th</sup>	96.4%	<5 <sup>th</sup>

### KEY TAKEAWAYS

Your overall Rating of Health Plan (9-10) Summary Rate score is 71.8% and represents a change of 14.7% 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)	71.4%	67.2%	-4.2%	73.0%	14 <sup>th</sup>	71.0%	21 <sup>st</sup>
Rating of Health Care (% 8, 9 or 10)	85.7%	84.5%	-1.2%	87.3%	23 <sup>rd</sup>	87.6%	23 <sup>rd</sup>
Getting Care Quickly (% Always or Usually)	100%	89.7%	-10.3%	91.1%	29 <sup>th</sup>	93.5%	10 <sup>th</sup>
How Well Doctors Communicate (% Always or Usually)	100%	86.5%	-13.5%	94.9%	<5 <sup>th</sup>	95.8% ▼	<5 <sup>th</sup>
Coordination of Care (% Always or Usually)	66.7%	75.0%	8.3%	83.1%	7 <sup>th</sup>	85.1%	<5 <sup>th</sup>
Rating of Personal Doctor (% 9 or 10)	66.7%	74.0%	7.3%	78.8%	7 <sup>th</sup>	78.4%	8 <sup>th</sup>
Rating of Personal Doctor (% 8, 9 or 10)	83.3%	80.8%	-2.5%	89.8%	<5 <sup>th</sup>	90.1% ▼	<5 <sup>th</sup>
Rating of Specialist (% 9 or 10)	66.7%	71.0%	4.3%	75.7%	23 <sup>rd</sup>	75.2%	14 <sup>th</sup>
Rating of Specialist (% 8, 9 or 10)	100%	90.3%	-9.7%	88.1%	67 <sup>th</sup>	87.9%	85 <sup>th</sup>

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 67.2% and represents a change of -4.2% 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)	80.0%	87.5%	7.5%	91.8%	8 <sup>th</sup>	91.3%	10 <sup>th</sup>
Access to Specialized Services (% Always or Usually)	NA	78.0%	NA	75.6%	66 <sup>th</sup>	74.5%	77 <sup>th</sup>
Family-Centered Care: Personal Doctor Who Knows Child (% Yes)	93.3%	78.9%	-14.4%	91.5% ▼	<5 <sup>th</sup>	91.6% ▼	<5 <sup>th</sup>
Family-Centered Care: Getting Needed Information (% Always or Usually)	100%	81.4%	-18.6%	91.4% ▼	<5 <sup>th</sup>	93.1% ▼	<5 <sup>th</sup>
Coordination of Care for CCC (% Yes)	75.0%	72.5%	-2.5%	76.6%	22 <sup>nd</sup>	76.4%	27 <sup>th</sup>

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

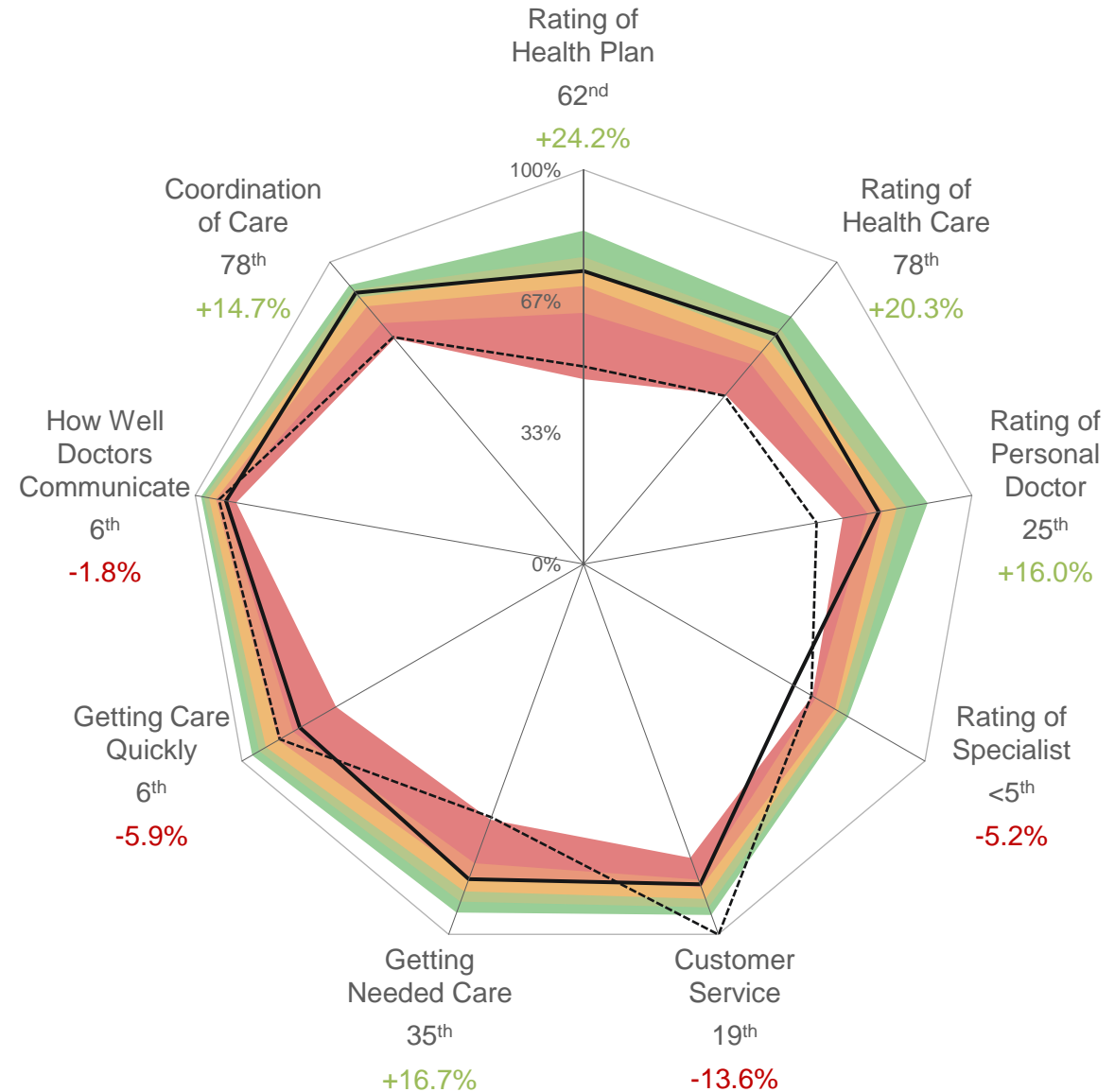
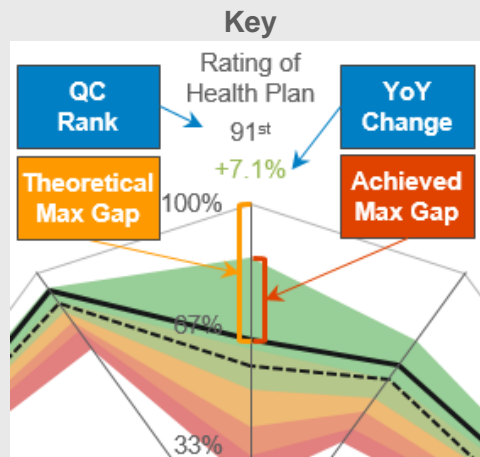
Two scores can be used to evaluate a plan's performance gap – Achieved Max Score or Theoretical Max Score.

**Achieved Max Score Gap** – The spread between your plan's score and the highest score achieved by a plan within the 2020 Quality Compass (100<sup>th</sup> 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
<10 <sup>th</sup>	10-32 <sup>nd</sup>	33-66 <sup>th</sup>	67-89 <sup>th</sup>	≥90 <sup>th</sup>	--- 2020 Score



# Gap Analysis - CCC Population - 2020 Quality Compass

## GAP ANALYSIS

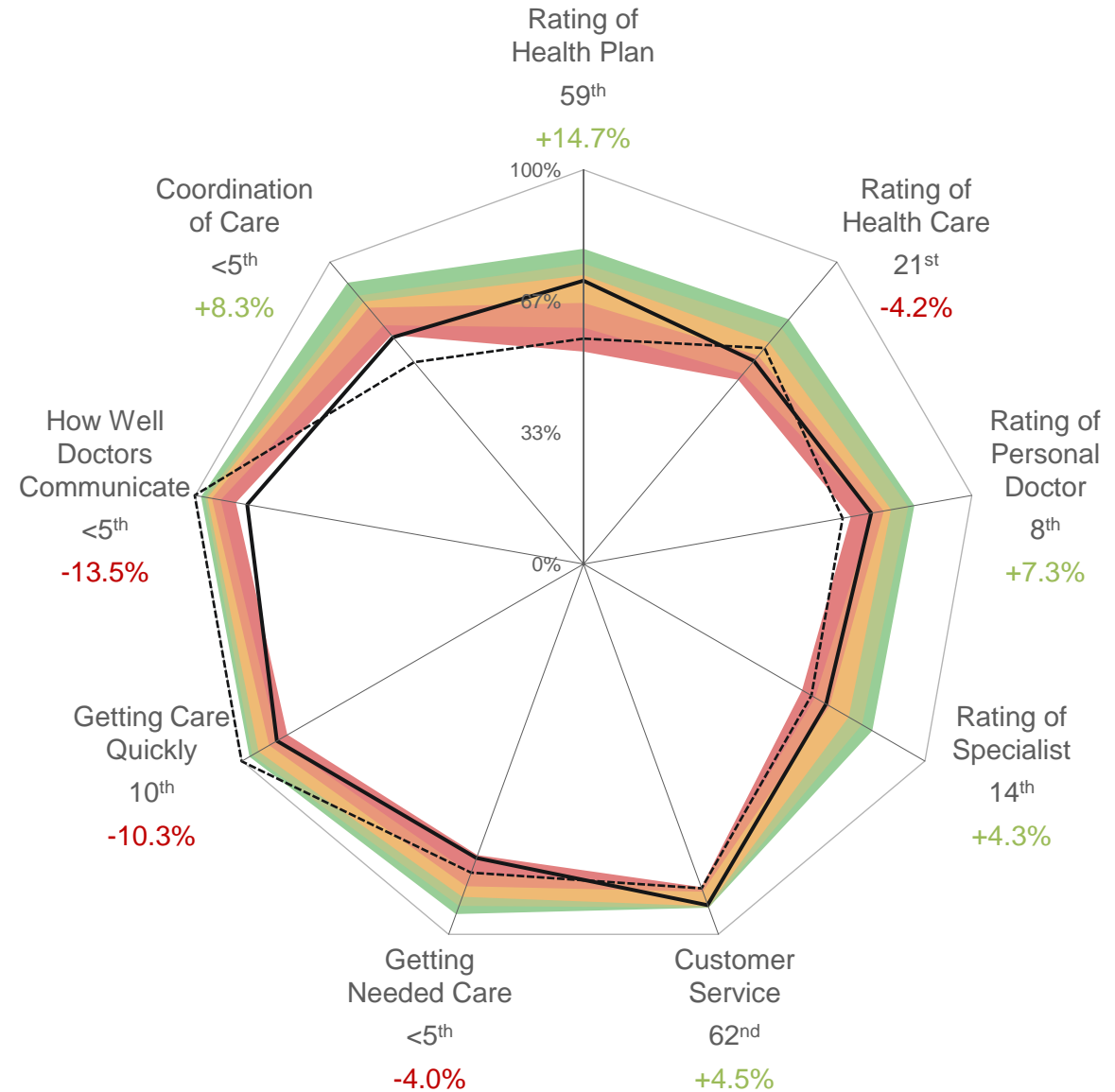
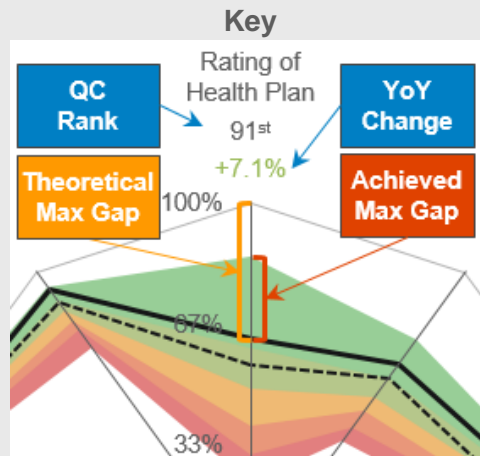
Two scores can be used to evaluate a plan's performance gap – Achieved Max Score or Theoretical Max Score.

**Achieved Max Score Gap** – The spread between your plan's score and the highest score achieved by a plan within the 2020 Quality Compass (100<sup>th</sup> Percentile).  
 Displayed by the outer bound of the dark green section of the graph.

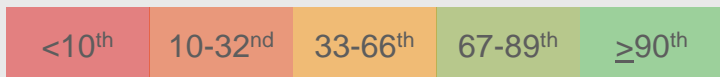
**Theoretical Max Score Gap** – The spread between your plan's score and the highest possible score a plan could achieve (100%).  
 Displayed by the outer bound of the light green section of the graph.

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



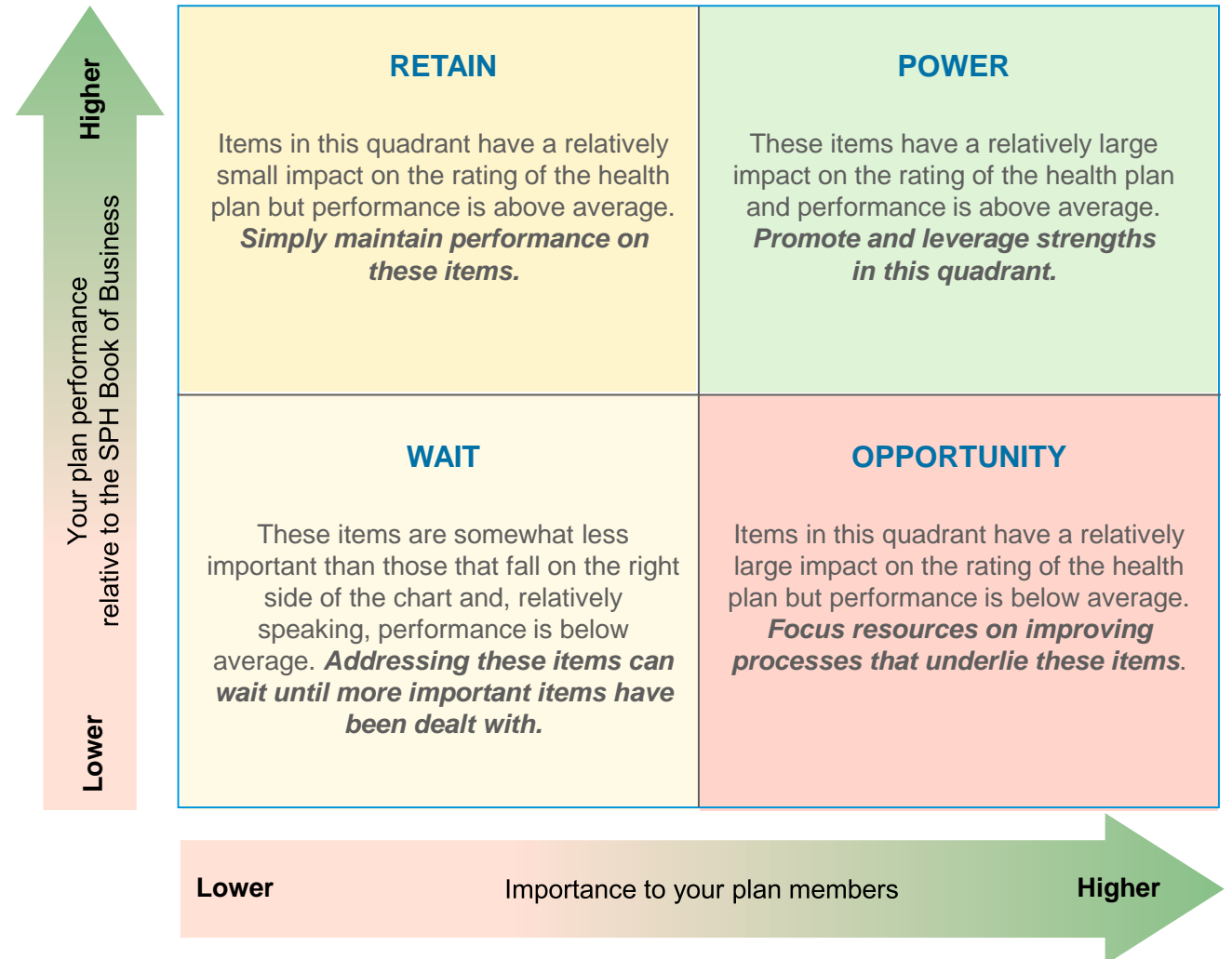
## POWeR™ CHART CLASSIFICATION MATRIX

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.

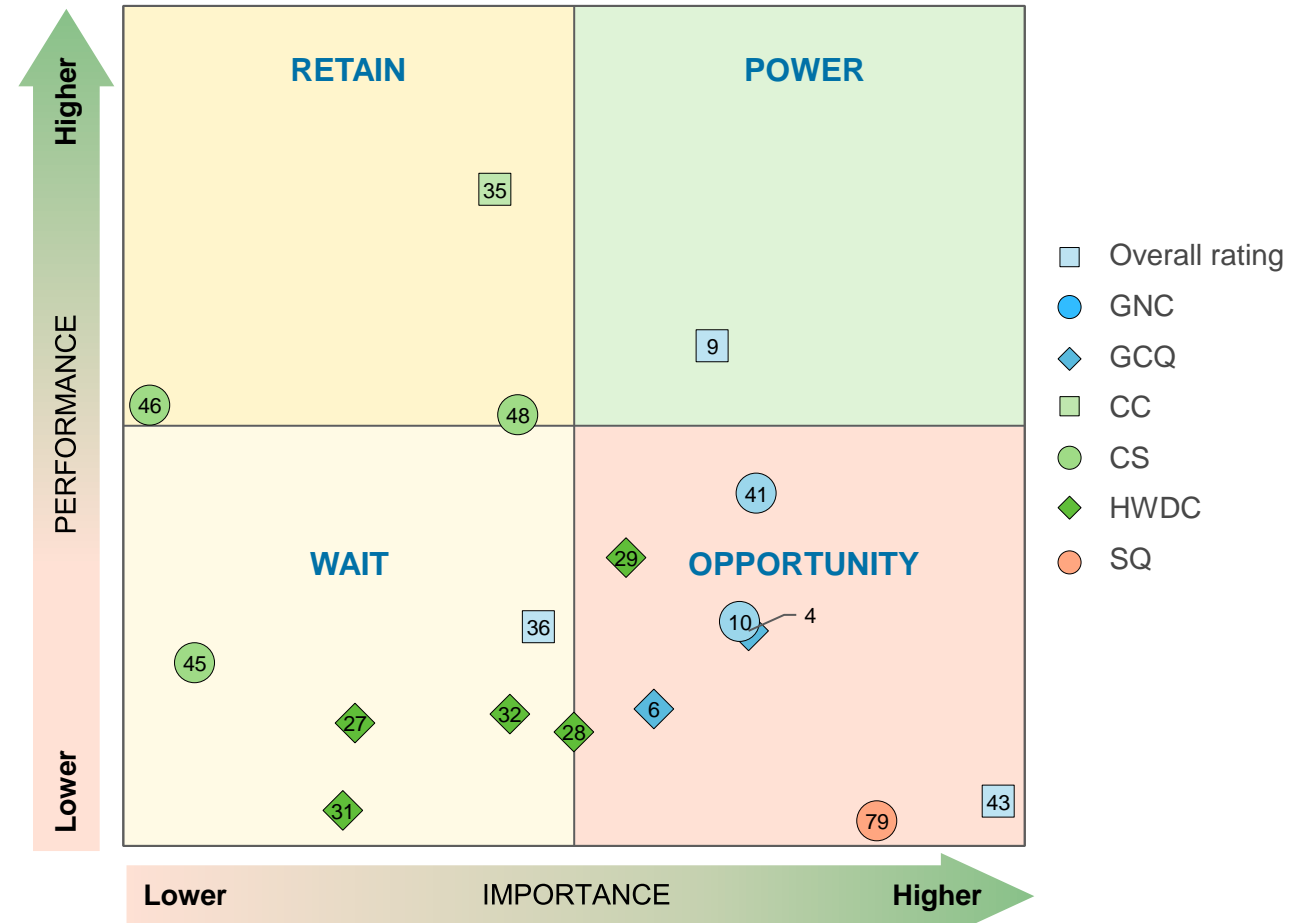


# POWeR Chart: Your Results

## 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
<b>POWER</b>				
Q9	Health care overall	75.9%	60 <sup>th</sup>	3
<b>OPPORTUNITY</b>				
Q43	Specialist overall	61.5%	<5 <sup>th</sup>	1
Q79	Satisfied with help to coordinate care	82.0%	---	---
Q41	Got specialist appt.	81.5%	41 <sup>st</sup>	3
Q4	Got urgent care	87.9%	25 <sup>th</sup>	2
Q10	Got care/tests/treatment	88.5%	26 <sup>th</sup>	2
Q6	Got routine care	78.2%	15 <sup>th</sup>	2
Q29	Dr. showed respect	96.2%	34 <sup>th</sup>	3
Q28	Dr. listened carefully	93.5%	12 <sup>th</sup>	2
<b>WAIT</b>				
Q36	Personal doctor overall	76.0%	26 <sup>th</sup>	2
Q32	Dr. spent enough time	85.9%	15 <sup>th</sup>	2
Q27	Dr. explained things	92.3%	13 <sup>th</sup>	2
Q31	Dr. explained things for child	89.3%	<5 <sup>th</sup>	1
Q45	CS provided info./help	78.4%	21 <sup>st</sup>	2
<b>RETAIN</b>				
Q48	Easy to fill out forms	96.3%	53 <sup>rd</sup>	3
Q35	Dr. informed about care	89.7%	79 <sup>th</sup>	4
Q46	CS courtesy/respect	94.4%	52 <sup>nd</sup>	3



\* 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**

**74.2%**

Your plan scored in the **49<sup>th</sup> 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	61.5%	3	75.7%	<5 <sup>th</sup>	<b>OPPORTUNITY</b>
	Q79 Satisfied with help to coordinate care	82.0%	---	---	---	<b>OPPORTUNITY</b>
	Q41 Got specialist appt.	81.5%	4	82.4%	41 <sup>st</sup>	<b>OPPORTUNITY</b>
	Q4 Got urgent care	87.9%	11	91.7%	25 <sup>th</sup>	<b>OPPORTUNITY</b>
	Q10 Got care/tests/treatment	88.5%	6	90.8%	26 <sup>th</sup>	<b>OPPORTUNITY</b>
	Q9 Health care overall	75.9%	1	74.4%	60 <sup>th</sup>	<b>POWER</b>
	Q6 Got routine care	78.2%	9	83.8%	15 <sup>th</sup>	<b>OPPORTUNITY</b>
	Q29 Dr. showed respect	96.2%	10	96.9%	34 <sup>th</sup>	<b>OPPORTUNITY</b>
	Q28 Dr. listened carefully	93.5%	8	95.9%	12 <sup>th</sup>	<b>OPPORTUNITY</b>
	Q36 Personal doctor overall	76.0%	2	78.6%	26 <sup>th</sup>	<b>WAIT</b>
<hr style="border-top: 1px dashed #ccc;"/>						
<b>ADD'L TOP 10 INDUSTRY DRIVERS</b>	Q45 CS provided info./help	78.4%	7	82.5%	21 <sup>st</sup>	<b>WAIT</b>
	Q46 CS courtesy/respect	94.4%	5	94.0%	52 <sup>nd</sup>	<b>RETAIN</b>

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	<b>MALE</b> (n=16) <sup>^</sup>	87.5%	81.3%	 Respondent's Age	<b>&lt;25</b> (n=12) <sup>^</sup>	83.3%	75.0%	 Child's Ethnicity & Race	<b>WHITE</b> (n=102)	83.3%	72.5%
	<b>FEMALE</b> (n=139)	85.6%	74.8%		<b>25 - 34</b> (n=43)	88.4%	79.1%		<b>BLACK/AFRICAN AMERICAN</b> (n=9) <sup>^</sup>	88.9%	66.7%
			<b>35 - 44</b> (n=59)		83.1%	69.5%	<b>ASIAN</b> (n=2) <sup>^</sup>		50.0%	50.0%	
			<b>45 or older</b> (n=42)		85.7%	78.6%	<b>NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER</b> (n=4) <sup>^</sup>		50.0%	50.0%	
 Child's Health Status	<b>EXC./VERY GOOD</b> (n=127)	84.3%	75.6%	 Child's Mental/Emotional Health Status	<b>EXC./VERY GOOD</b> (n=123)	83.7%	75.6%		<b>AMERICAN INDIAN OR ALASKA NATIVE</b> (n=13) <sup>^</sup>	84.6%	76.9%
	<b>GOOD</b> (n=25)	80.0%	68.0%		<b>GOOD</b> (n=27)	85.2%	70.4%		<b>OTHER</b> (n=35)	88.6%	77.1%
	<b>FAIR/POOR</b> (n=5) <sup>^</sup>	100%	60.0%		<b>FAIR/POOR</b> (n=7) <sup>^</sup>	85.7%	57.1%		<b>HISPANIC/LATINO</b> (n=112)	87.5%	79.5%
 Respondent's Education	<b>HS GRAD OR LESS</b> (n=88)	92.0%	80.7%	 Data Collection	<b>MAIL</b> (n=66)	83.3%	71.2%		<b>NOT HISPANIC/ LATINO</b> (n=43)	76.7%	62.8%
	<b>SOME COLLEGE OR MORE</b> (n=66)	75.8%	66.7%		<b>PHONE</b> (n=93)	84.9%	76.3%				

<sup>^</sup> 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
<b>CONSUMER SATISFACTION</b>				<b>2.5</b>
<b>GETTING CARE</b>				<b>NA</b>
Getting Needed Care	85.0%	Usually or Always	35 <sup>th</sup>	NA
Getting Care Quickly	83.0%	Usually or Always	6 <sup>th</sup>	NA
<b>SATISFACTION WITH PLAN PHYSICIANS</b>				<b>2.0</b>
Rating of Personal Doctor	76.0%	9 or 10	25 <sup>th</sup>	2.0
Rating of Specialist	61.5%	9 or 10	<5 <sup>th</sup>	NA
Rating of Health Care	75.9%	9 or 10	78 <sup>th</sup>	NA
Coordination of Care	89.7%	Usually or Always	78 <sup>th</sup>	NA
<b>SATISFACTION WITH PLAN SERVICES</b>				<b>3.0</b>
Rating of Health Plan	74.2%	9 or 10	62 <sup>nd</sup>	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 (10<sup>th</sup>, 33<sup>rd</sup>, 66<sup>th</sup> and 90<sup>th</sup>) into scores ranging from 1 to 5 (in increments of 0.5), where 5 is the highest score and 1 is the lowest.

Results are summarized in the table to the left. **Percentiles and ratings are estimated by SPH** based on the 2020 NCQA data and benchmarks.

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

### Notes:

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

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 does not currently oversample. SPH does not recommend oversampling.**

Based on the scenarios tested, holding everything else constant, an oversampling rate of 285% 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.**

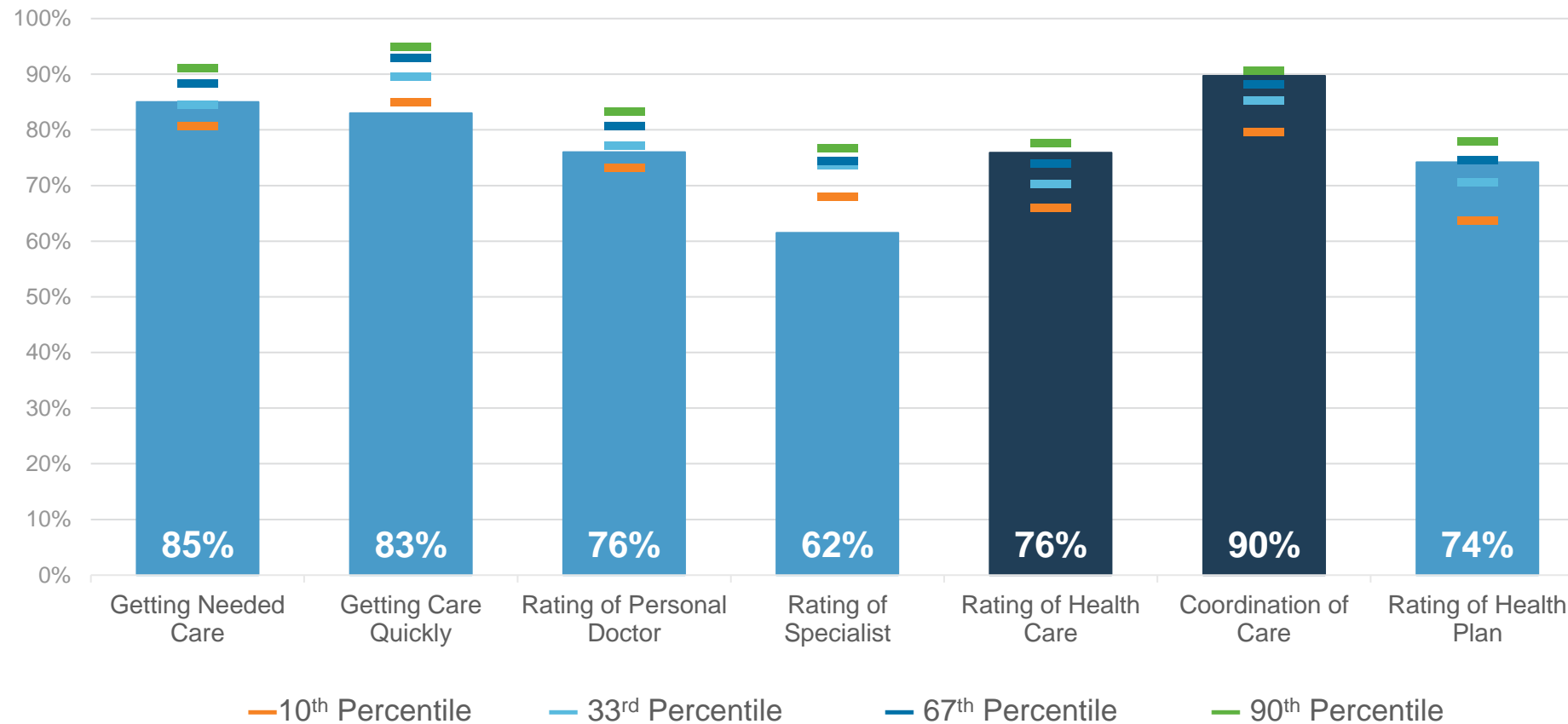
MEASURE NAME	ESTIMATED RATING (Current: 0%)	OVERSAMPLING SCENARIOS	
		0%	≥ 285%
<b>CONSUMER SATISFACTION</b>	<b>2.5</b>	<b>2.5</b>	<b>2.5</b>
GETTING CARE	NA	NA	2.0
Getting Needed Care	NA	NA	3.0
Getting Care Quickly	NA	NA	1.0
<b>SATISFACTION WITH PLAN PHYSICIANS</b>	<b>2.0</b>	<b>2.0</b>	<b>3.0</b>
Rating of Personal Doctor	2.0	2.0	2.0
Rating of Specialist	NA	NA	1.0
Rating of Health Care	NA	NA	4.0
Coordination of Care	NA	NA	4.0
<b>SATISFACTION WITH PLAN SERVICES</b>	<b>3.0</b>	<b>3.0</b>	<b>3.0</b>
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 67<sup>th</sup> percentile

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



# 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)	29 <sup>▲</sup>	75.0%	89.7%	14.7%	86.1%	78 <sup>th</sup>	3.6%
Rating of Health Care (% 9 or 10)	87 <sup>▲</sup>	55.6%	75.9%	20.3%	71.9%	78 <sup>th</sup>	4.0%
Rating of Health Plan (% 9 or 10)	159	50.0%	74.2%	24.2%	71.9%	62 <sup>nd</sup>	2.3%

## 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)	78 <sup>▲</sup>	93.8%	92.0%	-1.8%	95.3%	6 <sup>th</sup>	-3.3%
Getting Care Quickly (% Always or Usually)	60 <sup>▲</sup>	88.9%	83.0%	-5.9%	90.5%	6 <sup>th</sup>	-7.5%
Rating of Specialist (% 9 or 10)	26 <sup>▲</sup>	66.7%	61.5%	-5.2%	73.4%	<5 <sup>th</sup>	-11.9%

### 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 (▼).



## 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 – 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.

### 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.

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

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## Measure Details and Scoring

- Western Sky Community Care (Centene NM)

# 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.



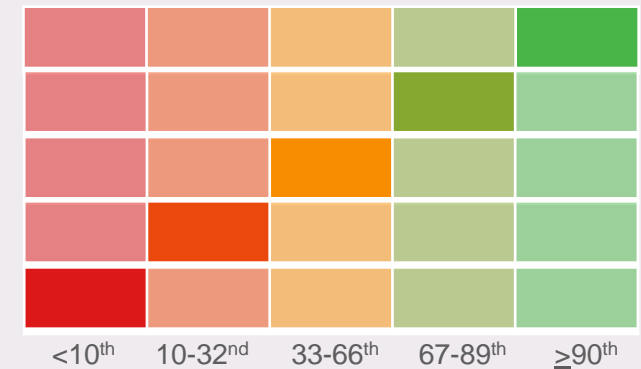
Analyses presented in this section include:

- 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

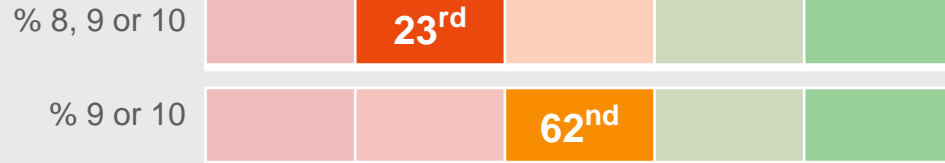
- Rating of Health Plan
- Rating of Health Care
- Rating of Personal Doctor
- Rating of Specialist
- Getting Needed Care
- Getting Care Quickly
- Coordination of Care
- Customer Service\*
- How Well Doctors Communicate\*

## 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

**Q9** Health care overall

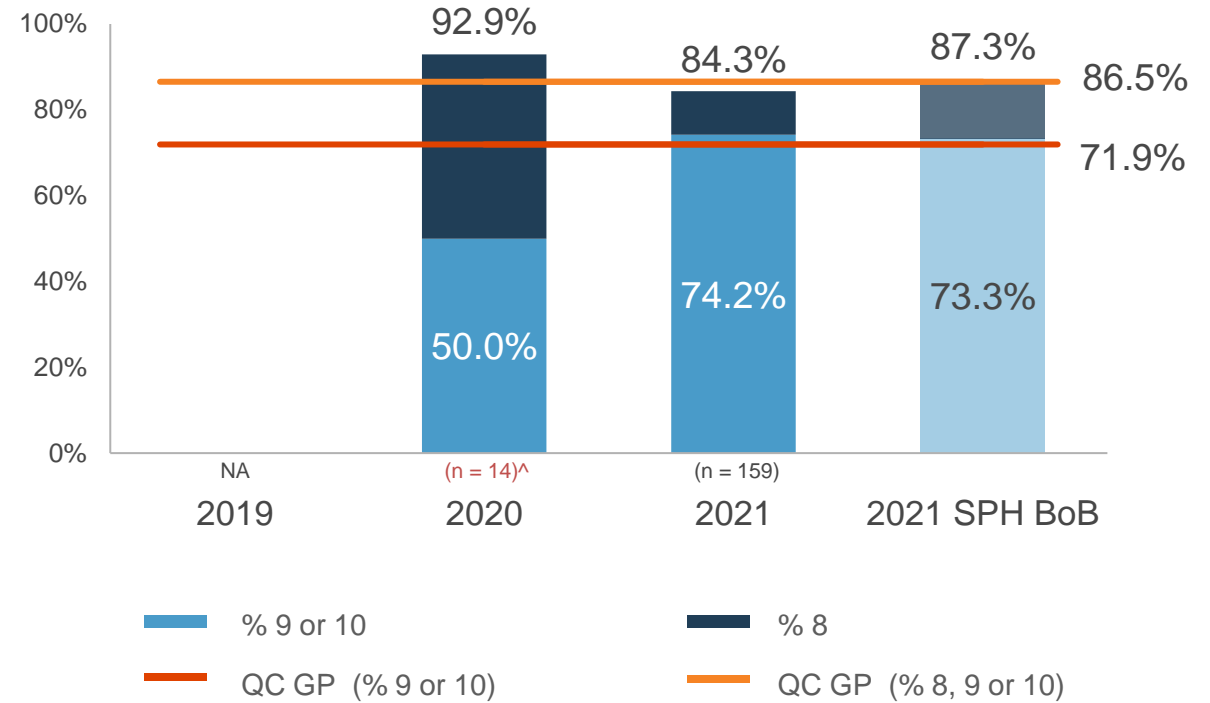
## OPPORTUNITIES

Focus Resources on Improving Processes That Underlie These Items

- Q43** Specialist overall
- Q79** Satisfied with help to coordinate care
- Q41** Got specialist appt.
- Q4** Got urgent care
- Q10** Got care/tests/treatment
- Q6** Got routine care
- Q29** Dr. showed respect
- Q28** Dr. listened carefully

### 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 (▼).

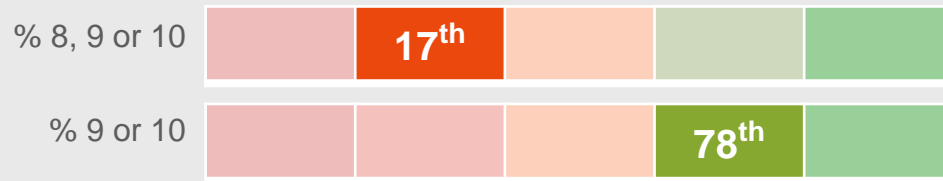
^Denominator less than 100. NCQA will assign an NA to this measure.



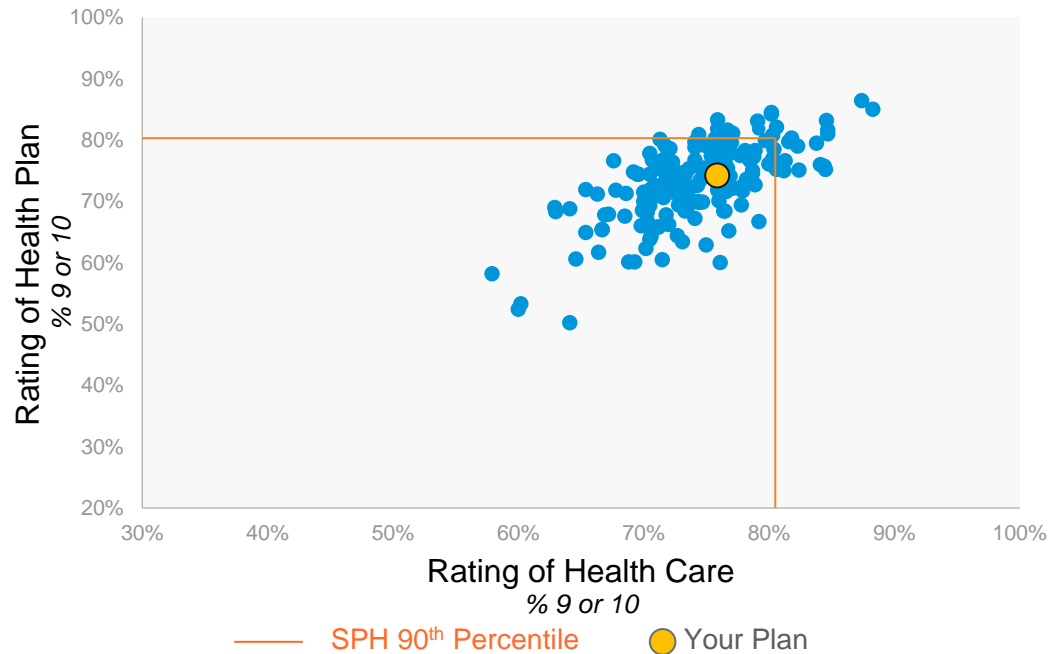
# Rating of Health Care - General Population

Measure

## PERCENTILE RANKING 2020 QC ALL PLANS GP

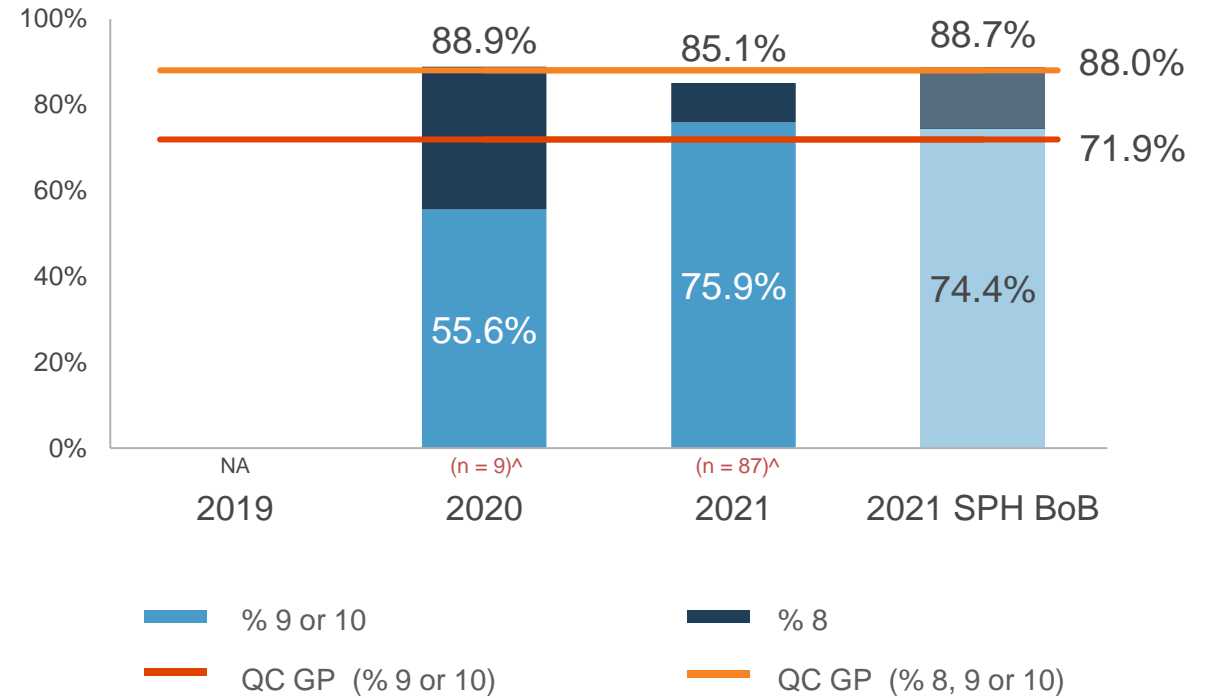


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## RATING OF HEALTH CARE

% 8, 9 or 10



### Significance Testing

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 (▼).

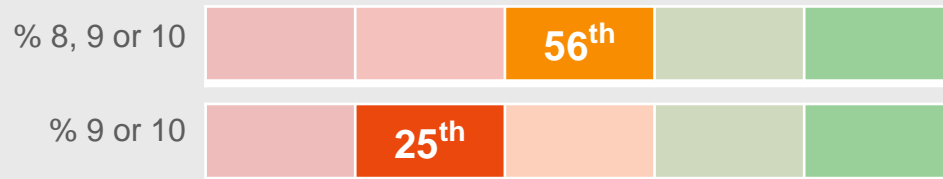
^Denominator less than 100. NCQA will assign an NA to this measure.



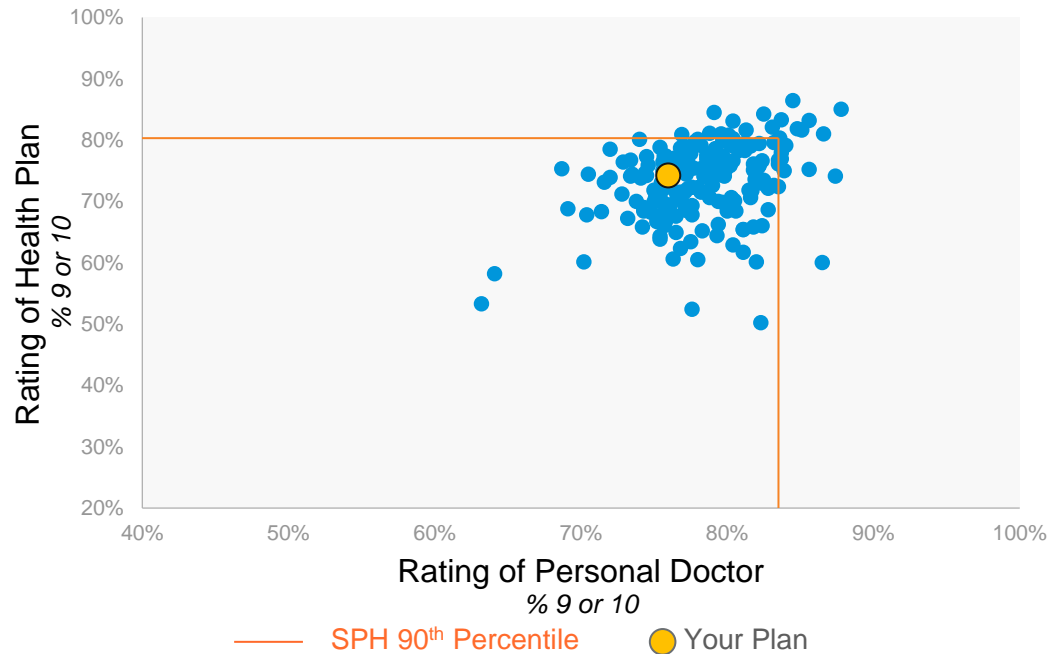
# Rating of Personal Doctor - General Population

Measure

## PERCENTILE RANKING 2020 QC ALL PLANS GP

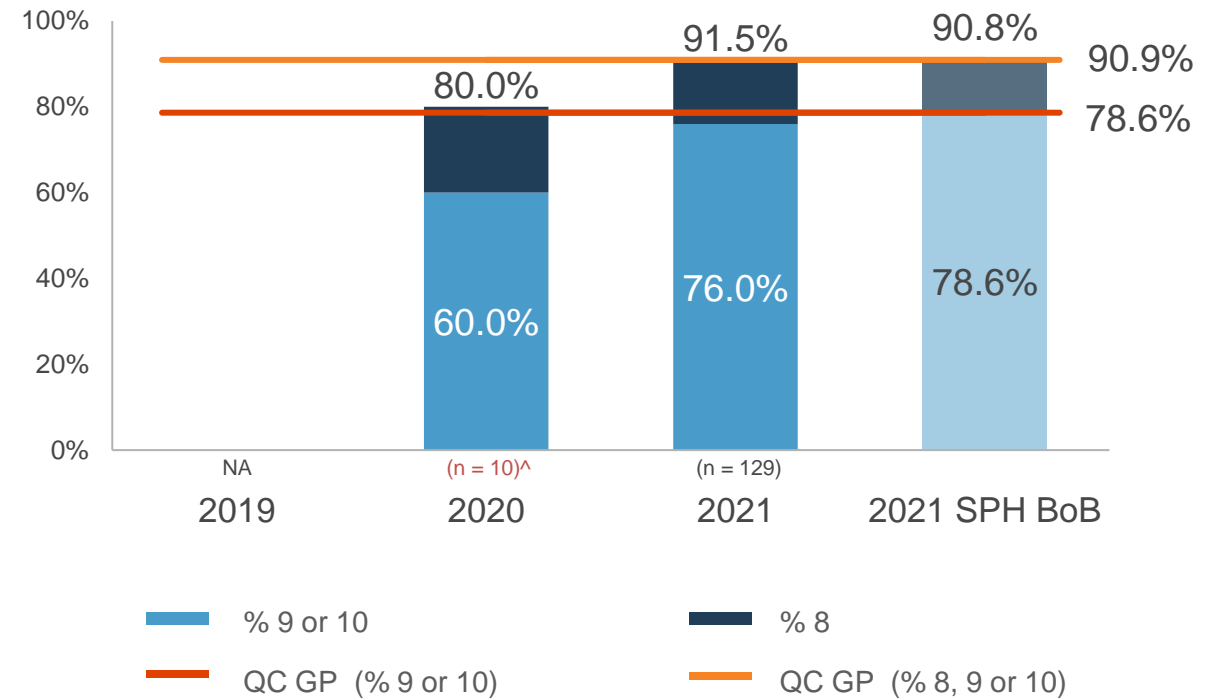


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## RATING OF PERSONAL DOCTOR

% 8, 9 or 10



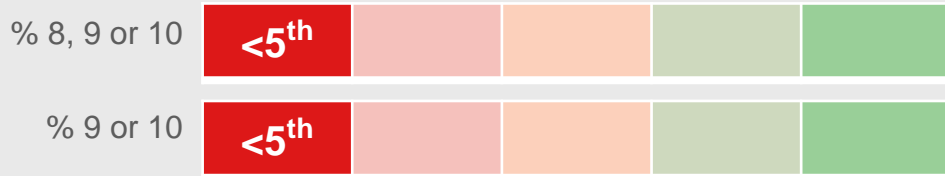
### Significance Testing

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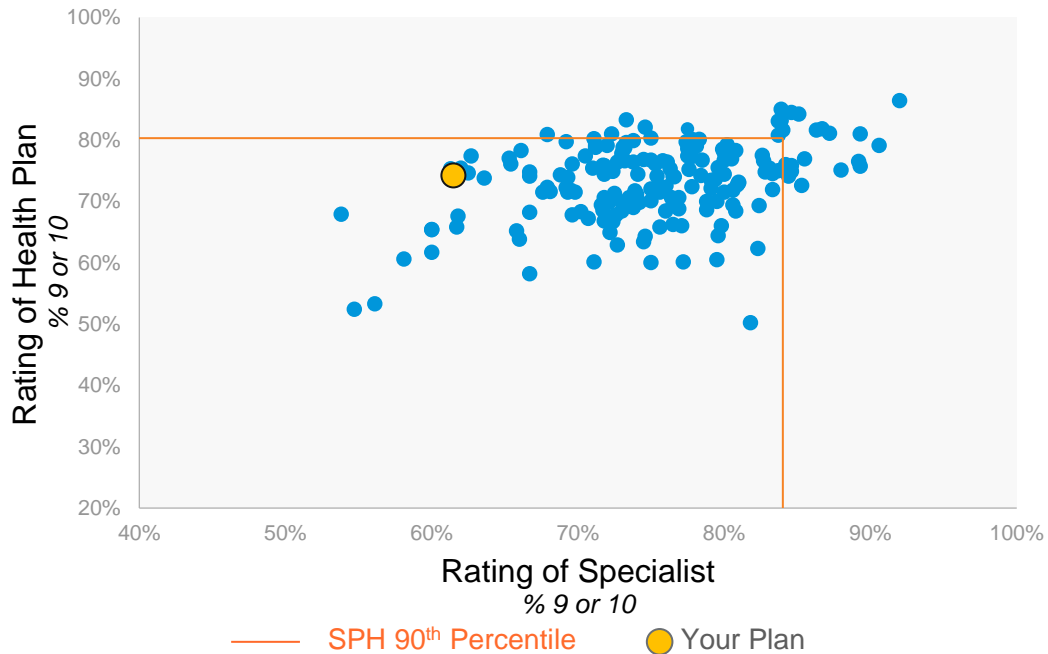
Current year score is significantly lower than the 2020 score (↓), the 2019 score (⌘) or benchmark score (▼).

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

**PERCENTILE RANKING 2020 QC ALL PLANS GP**

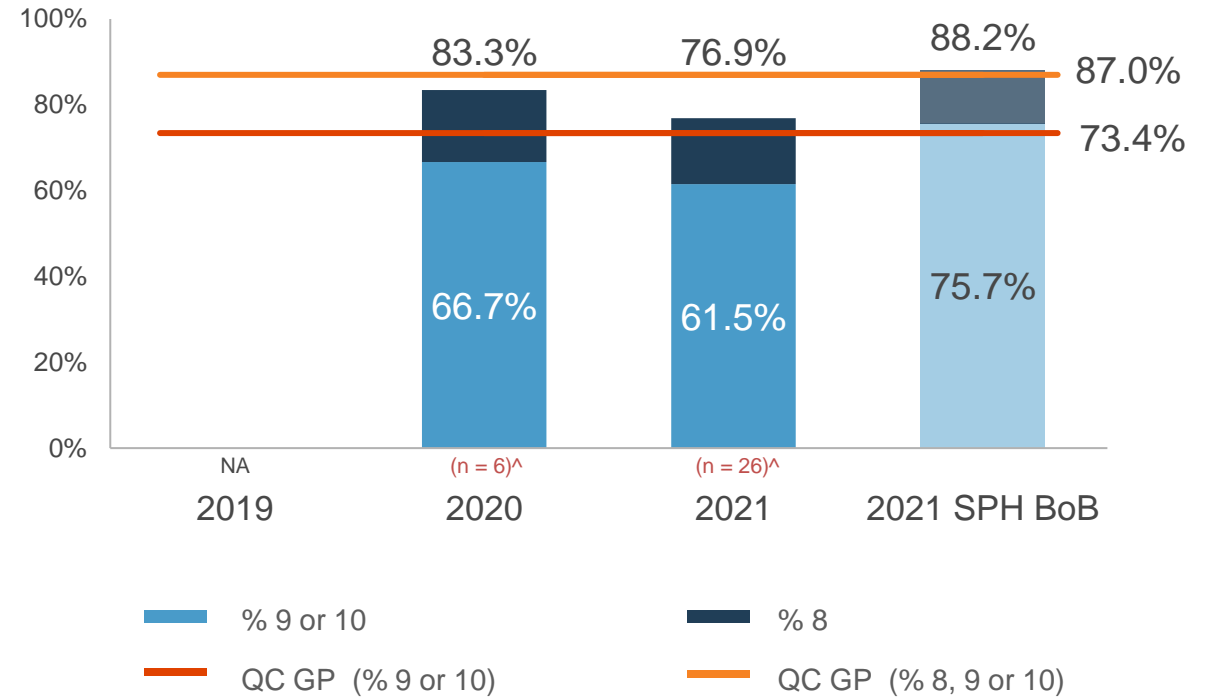


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**RATING OF SPECIALIST**

% 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.

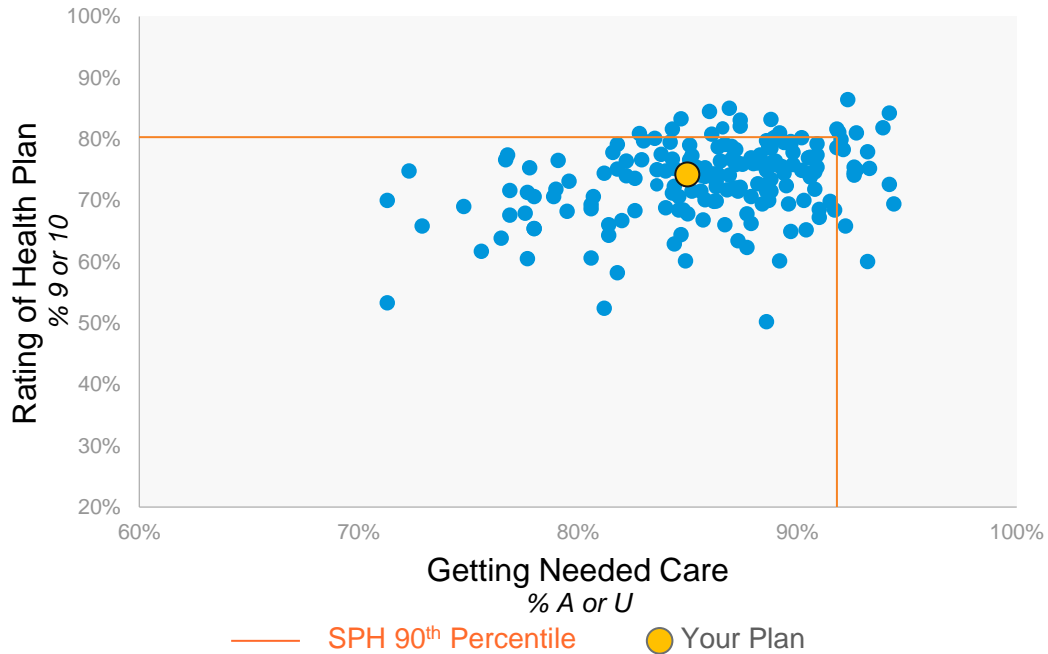
### PERCENTILE RANKING 2020 QC ALL PLANS GP

% A or U



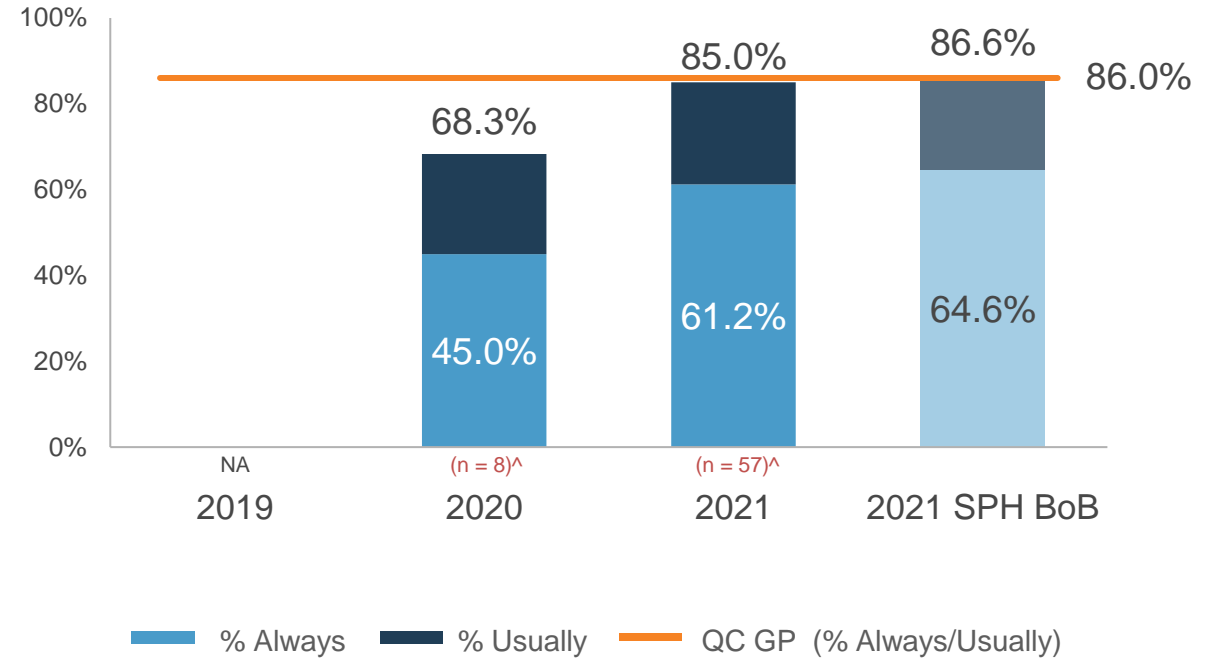
35<sup>th</sup>

### SPH BOOK OF BUSINESS DISTRIBUTION



### 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

85.0%

#### Gate Question

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

Valid n	Yes
163	16.6%

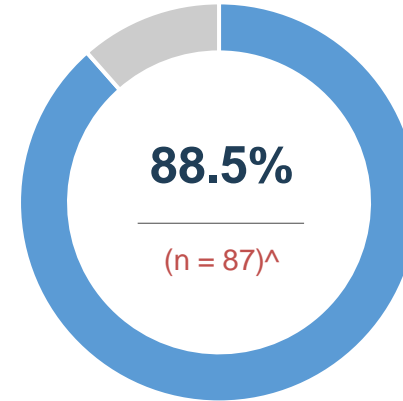
#### Significance Testing

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.

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

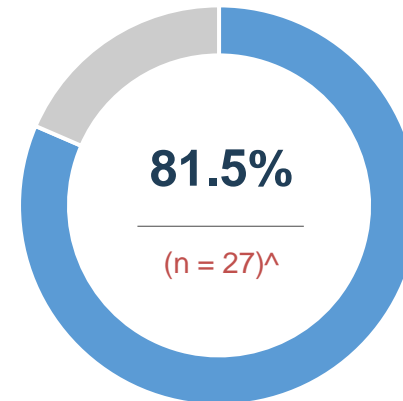


2021	88.5%
2020	70.0%
2019	NA
SPH	90.8%
QC	91.2%

Percentile Ranking 2020 QC All Plans GP



#### Q41. GETTING SPECIALIST APPOINTMENT % Always or Usually



2021	81.5%
2020	66.7%
2019	NA
SPH	82.4%
QC	79.8%

Percentile Ranking 2020 QC All Plans GP



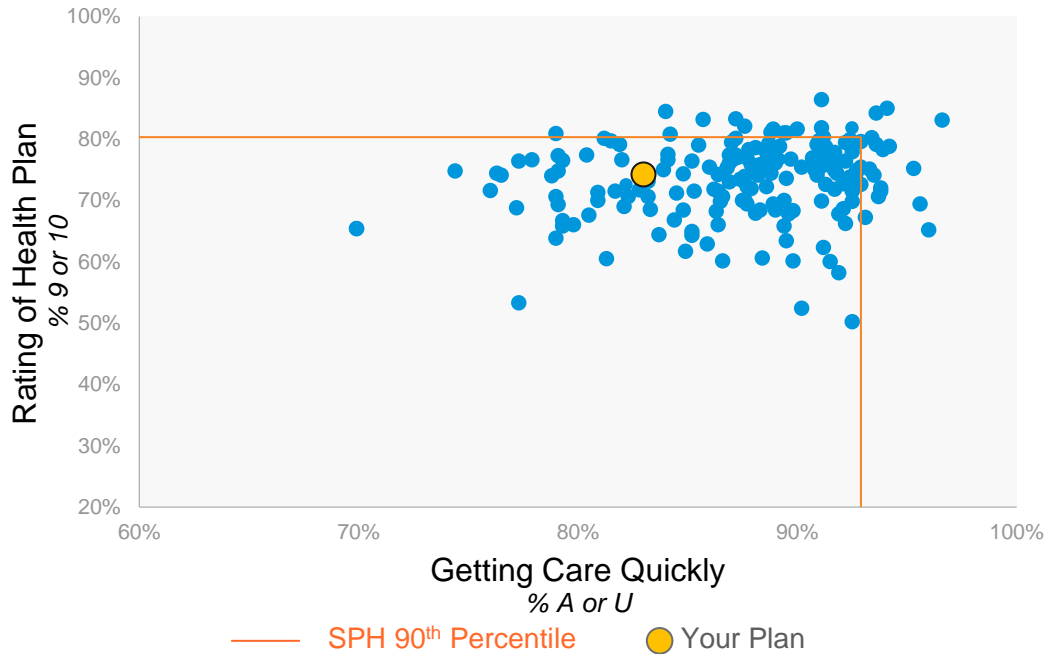
## PERCENTILE RANKING 2020 QC ALL PLANS GP

% A or U

6<sup>th</sup>

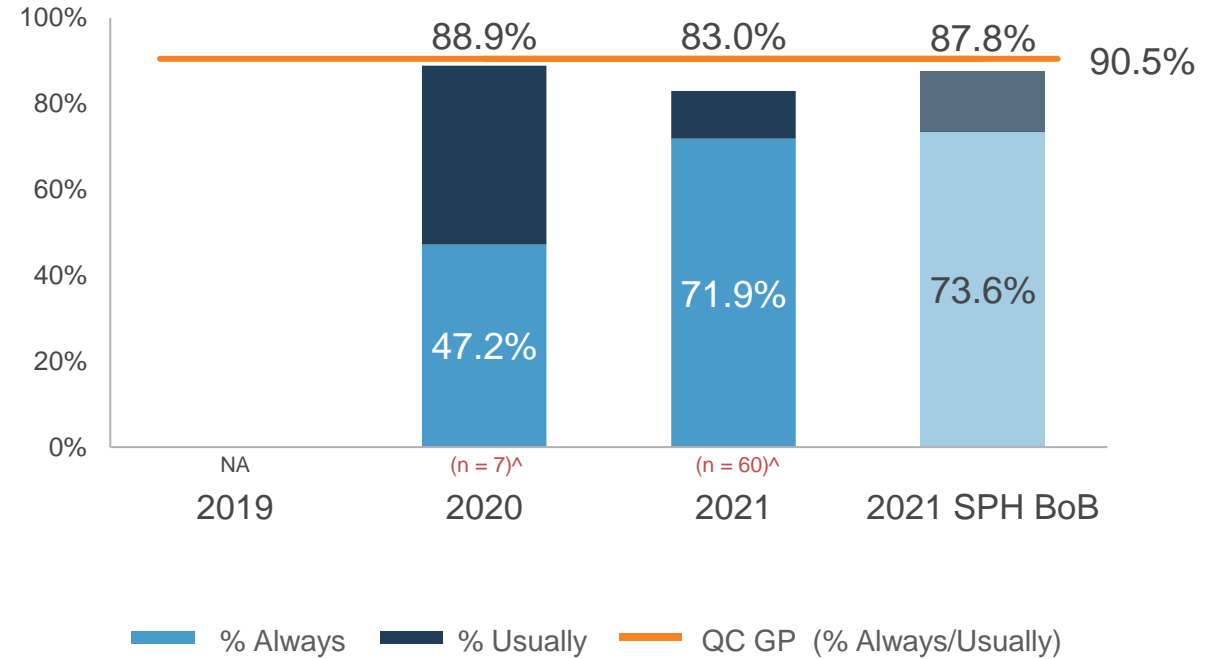


## SPH BOOK OF BUSINESS DISTRIBUTION



## 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

83.0%

#### Gate Questions

Gate Questions	Valid n	Yes
Q3. Had illness, injury or condition that needed care right away	163	22.1%
Q5. Made appts for health care in person, on the phone, or on video	162	55.6%

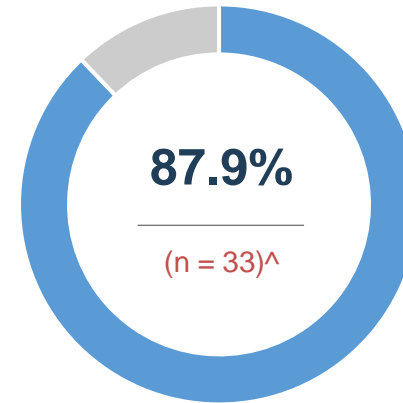
#### Significance Testing

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.

#### Q4. GETTING URGENT CARE % Always or Usually

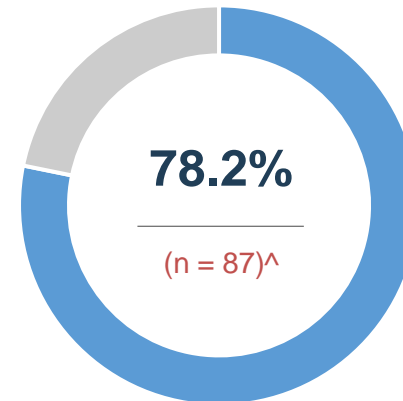


2021	87.9%
2020	100%
2019	NA
SPH	91.7%
QC	92.6%

Percentile Ranking 2020 QC All Plans GP



#### Q6. GETTING ROUTINE CARE % Always or Usually



2021	78.2%
2020	77.8%
2019	NA
SPH	83.8%
QC	89.0% ▼

Percentile Ranking 2020 QC All Plans GP

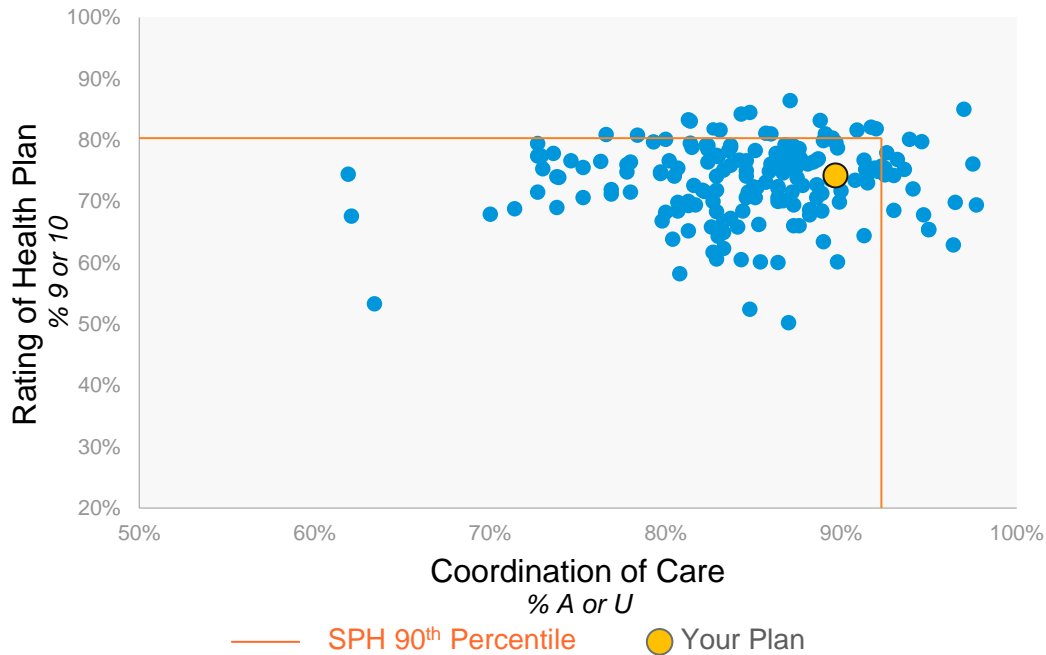


**PERCENTILE RANKING 2020 QC ALL PLANS GP**

% A or U

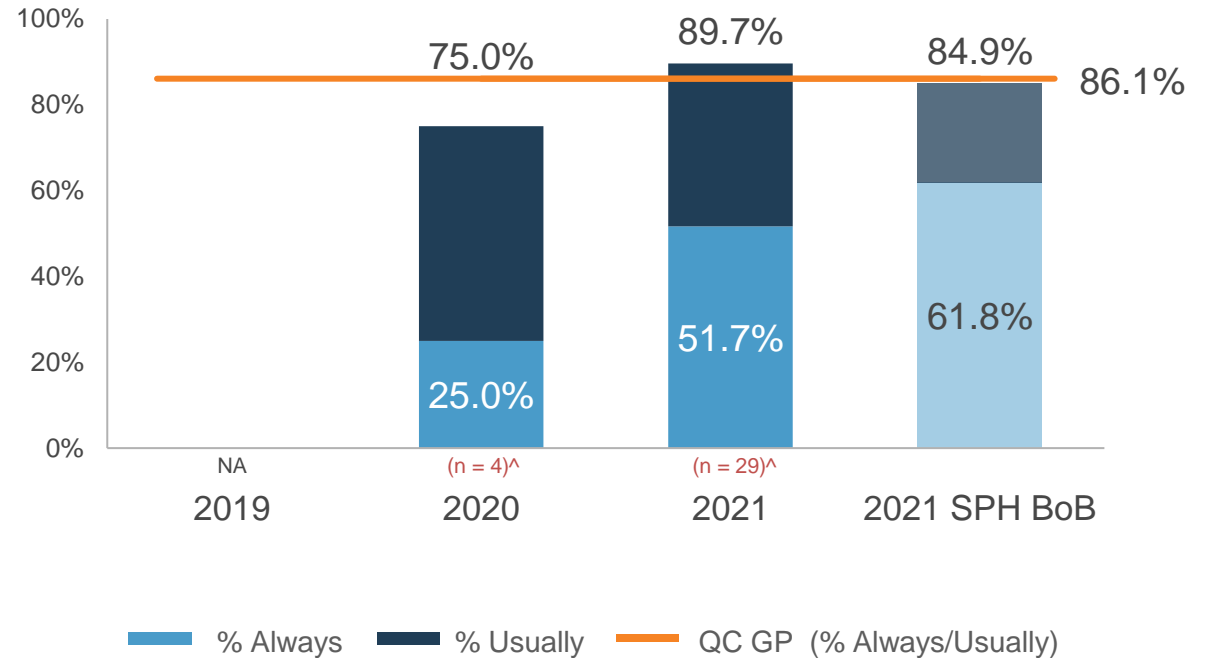


**SPH BOOK OF BUSINESS DISTRIBUTION**



**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 (▼).

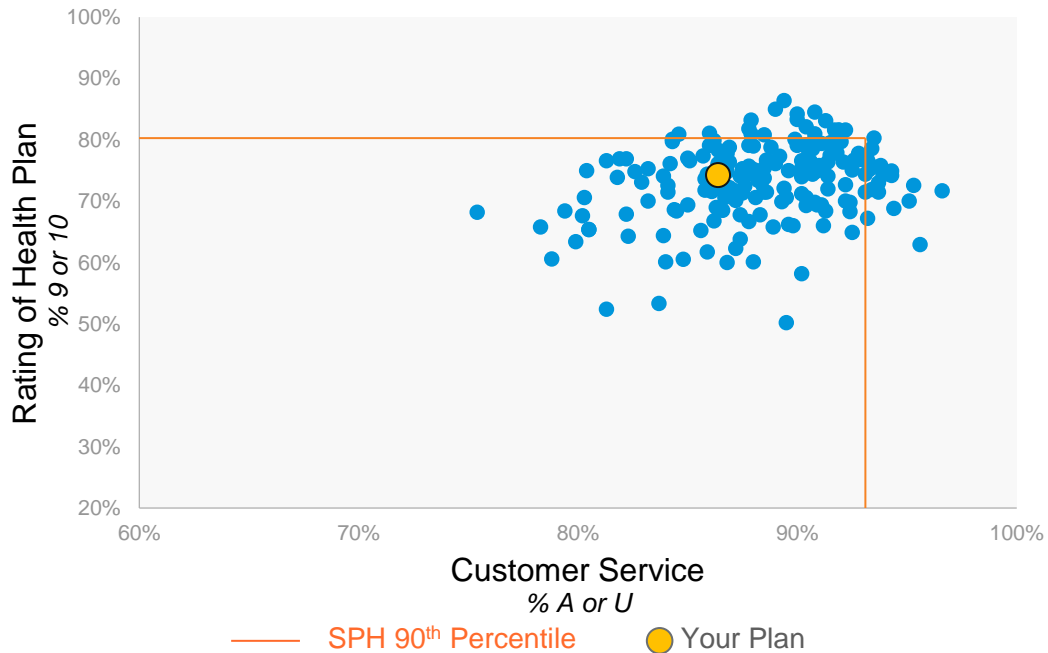
<sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.

**PERCENTILE RANKING 2020 QC ALL PLANS GP**

% A or U

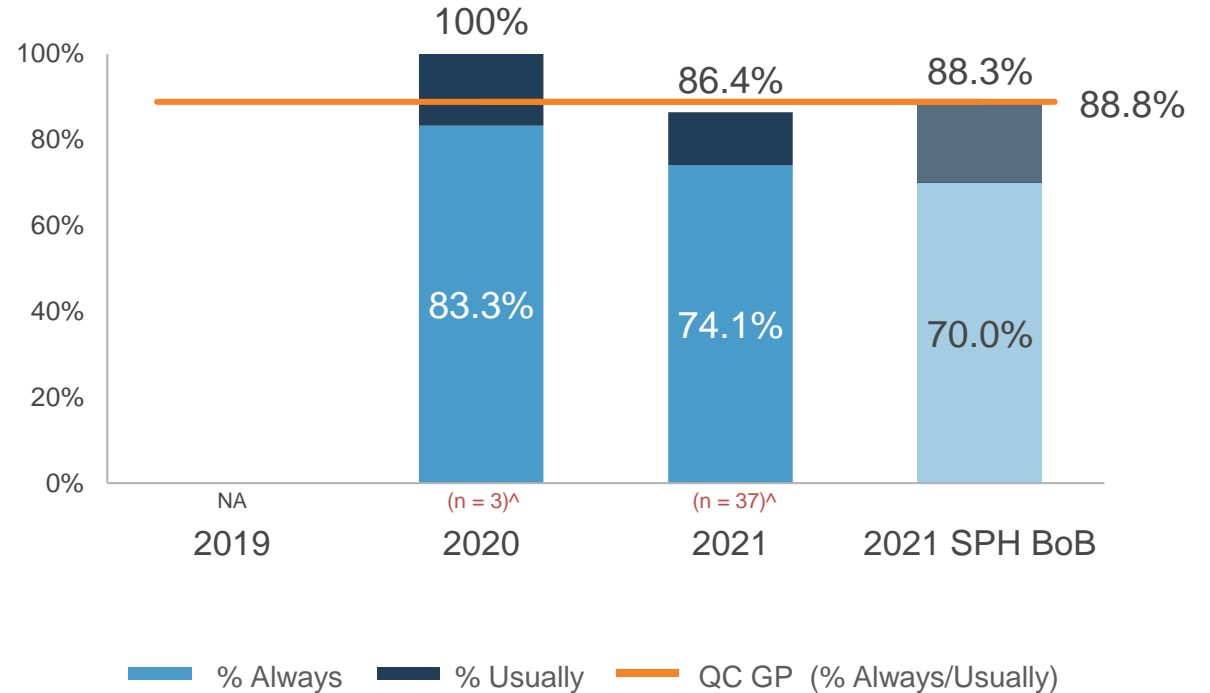
19<sup>th</sup>

**SPH BOOK OF BUSINESS DISTRIBUTION**



**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 (▼).

<sup>^</sup>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**

**86.4%**

#### Gate Question

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

Valid n	Yes
162	24.1%

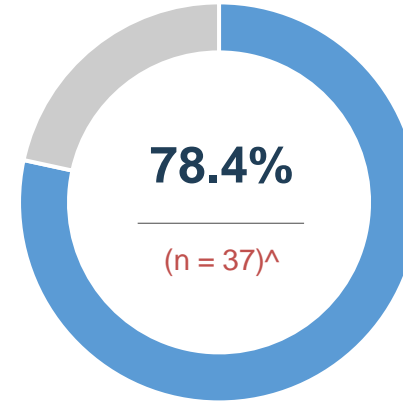
#### Significance Testing

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

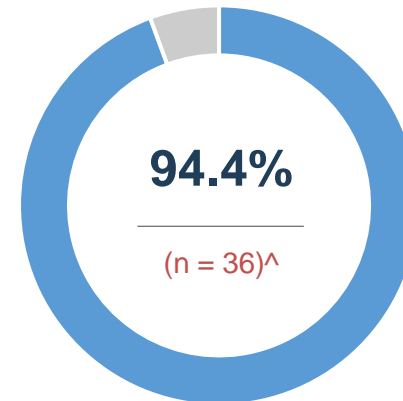


2021	78.4%
2020	100%
2019	NA
SPH	82.5%
QC	83.8%

Percentile Ranking 2020 QC All Plans GP



#### Q46. TREATED WITH COURTESY AND RESPECT % Always or Usually



2021	94.4%
2020	100%
2019	NA
SPH	94.0%
QC	93.8%

Percentile Ranking 2020 QC All Plans GP





# How Well Doctors Communicate\* - General Population

Composite

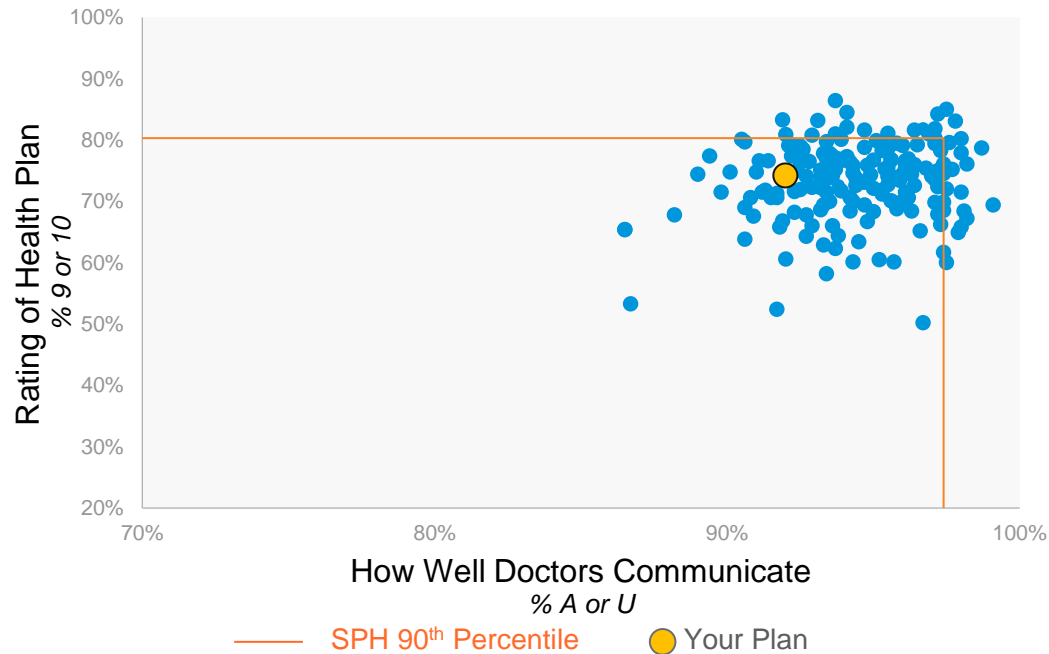
## PERCENTILE RANKING 2020 QC ALL PLANS GP

% A or U

6<sup>th</sup>

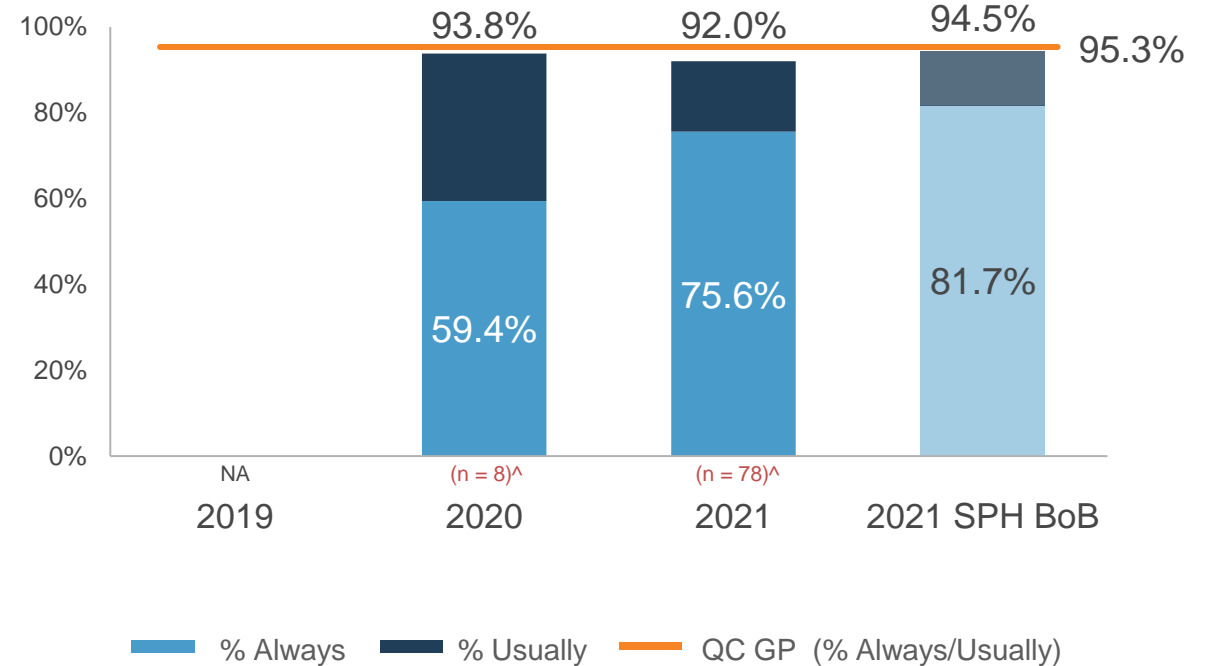


## SPH BOOK OF BUSINESS DISTRIBUTION



## 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.



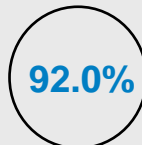
## Attribute Questions

### 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	160	81.9%

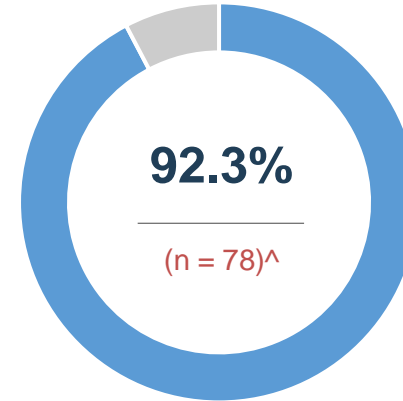
#### Significance Testing

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

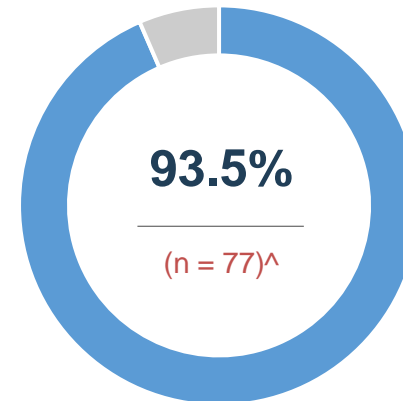


2021	92.3%
2020	87.5%
2019	NA
SPH	94.8%
QC	95.6%

Percentile Ranking 2020 QC All Plans GP



### Q28. PERSONAL DOCTOR LISTENED CAREFULLY % Always or Usually



2021	93.5%
2020	100%
2019	NA
SPH	95.9%
QC	96.4%

Percentile Ranking 2020 QC All Plans GP





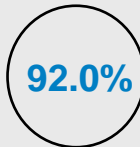


### HOW WELL DOCTORS COMMUNICATE QUESTIONS

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**



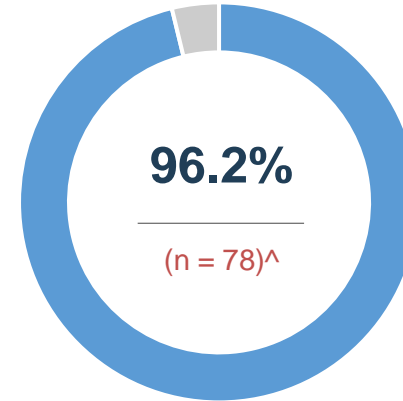
#### Significance Testing

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

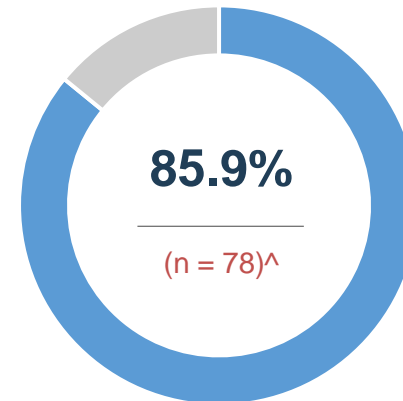


2021	96.2%
2020	100%
2019	NA
SPH	96.9%
QC	97.2%

Percentile Ranking 2020 QC All Plans GP



### Q32. PERSONAL DOCTOR SPENT ENOUGH TIME % Always or Usually



2021	85.9%
2020	87.5%
2019	NA
SPH	90.4%
QC	91.9%

Percentile Ranking 2020 QC All Plans GP





# Summary of Trend and Benchmarks

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Summary Rate Scores and Percentile Rankings

- Western Sky Community Care (Centene NM)



# 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.

	<b>2020 Quality Compass® All Plans (General Population)</b>	<b>2020 Quality Compass® All Plans (CCC Population)</b>	<b>2020 NCQA 1-100 Benchmark (General Population)</b>	<b>2020 NCQA 1-100 Benchmark (CCC Population)</b>	<b>2021 SPH Analytics Book of Business (General Population)</b>	<b>2021 SPH Analytics Book of Business (CCC Population)</b>
	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.
<b>PROS</b>	<ul style="list-style-type: none"> <li>Contains more plans than the SPH Book of Business</li> <li>Is presented in NCQA's The State of Health Care Quality</li> </ul>	<ul style="list-style-type: none"> <li>Contains more plans than the SPH Book of Business</li> <li>Is presented in NCQA's The State of Health Care Quality</li> <li>Provides a CCC benchmark</li> </ul>	<ul style="list-style-type: none"> <li>Utilized by SPH Analytics to calculate approximate percentile ranking of plan scores in relation to the Quality Compass® All Plans benchmark</li> </ul>	<ul style="list-style-type: none"> <li>Utilized by SPH Analytics to calculate approximate percentile ranking of plan scores in relation to the Quality Compass® All Plans benchmark</li> <li>Provides a CCC benchmark</li> </ul>	<ul style="list-style-type: none"> <li>Provides a benchmark for each question from the survey</li> <li>Permits precise percentile ranking of plan compared to benchmark</li> <li>Historically, the SPH BoB has varied by less than 1% from the Public Report benchmark.</li> </ul>	<ul style="list-style-type: none"> <li>Provides a benchmark for each question from the survey</li> <li>Permits precise percentile ranking of plan compared to benchmark</li> <li>Historically, the SPH BoB has varied by less than 1% from the Public Report benchmark</li> <li>Provides a CCC benchmark</li> </ul>
<b>CONS</b>	<ul style="list-style-type: none"> <li>Only contains benchmarks for certain key questions, composites, and rating questions</li> </ul>	<ul style="list-style-type: none"> <li>Only contains benchmarks for certain key questions, composites, and rating questions</li> </ul>	<ul style="list-style-type: none"> <li>Only contains benchmarks for certain key questions, composites, and rating questions</li> </ul>	<ul style="list-style-type: none"> <li>Only contains benchmarks for certain key questions, composites, and rating questions</li> </ul>	<ul style="list-style-type: none"> <li>Contains fewer plans than the Public Report and the Quality Compass® All Plans Benchmarks</li> </ul>	<ul style="list-style-type: none"> <li>Contains fewer plans than the Public Report and the Quality Compass® All Plans Benchmarks</li> </ul>
<b># OF PLANS</b>	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
<p><u>7</u></p> <p>Total Star Rating</p> <p>★ Measures</p>	<b>Rating Questions (% 9 or 10)</b>						
	★ Q49. Rating of Health Plan	159	NA	50.0%	74.2%	73.3%	71.9%
	★ Q9. Rating of Health Care	87 <sup>^</sup>	NA	55.6%	75.9%	74.4%	71.9%
	★ Q36. Rating of Personal Doctor	129	NA	60.0%	76.0%	78.6%	78.6%
	★ Q43. Rating of Specialist	26 <sup>^</sup>	NA	66.7%	61.5%	75.7%	73.4%
<p><u>3</u></p> <p>Above QC GP Benchmark</p>	<b>Rating Questions (% 8, 9 or 10)</b>						
	Q49. Rating of Health Plan	159	NA	92.9%	84.3%	87.3%	86.5%
	Q9. Rating of Health Care	87 <sup>^</sup>	NA	88.9%	85.1%	88.7%	88.0%
	Q36. Rating of Personal Doctor	129	NA	80.0%	91.5%	90.8%	90.9%
	Q43. Rating of Specialist	26 <sup>^</sup>	NA	83.3%	76.9%	88.2%	87.0%
	★ <b>Getting Needed Care (% Always or Usually)</b>	57 <sup>^</sup>	NA	68.3%	85.0%	86.6%	86.0%
	Q10. Getting care, tests, or treatment	87 <sup>^</sup>	NA	70.0%	88.5%	90.8%	91.2%
Q41. Getting specialist appointment	27 <sup>^</sup>	NA	66.7%	81.5%	82.4%	79.8%	
<p><u>4</u></p> <p>At or Below QC GP Benchmark</p>	★ <b>Getting Care Quickly (% Always or Usually)</b>	60 <sup>^</sup>	NA	88.9%	83.0%	87.8%	90.5%
	Q4. Getting urgent care	33 <sup>^</sup>	NA	100%	87.9%	91.7%	92.6%
	Q6. Getting routine care	87 <sup>^</sup>	NA	77.8%	78.2%	83.8%	89.0% ▼
	<b>Other Measure (% Always or Usually)</b>						
	★ Q35. Coordination of Care	29 <sup>^</sup>	NA	75.0%	89.7%	84.9%	86.1%



# Summary Rate Scores - General Population

<b>OTHER MEASURES</b> <i>(Not used for accreditation/ratings)</i>	<b>2021 VALID N</b>	<b>2019</b>	<b>2020</b>	<b>2021</b>	<b>2021 SPH GP BENCHMARK</b>	<b>2020 QC GP BENCHMARK</b>
<b>Customer Service (% Always or Usually)</b>	<b>37<sup>^</sup></b>	<b>NA</b>	<b>100%</b>	<b>86.4%</b>	<b>88.3%</b>	<b>88.8%</b>
Q45. Provided information or help	37 <sup>^</sup>	NA	100%	78.4%	82.5%	83.8%
Q46. Treated with courtesy and respect	36 <sup>^</sup>	NA	100%	94.4%	94.0%	93.8%
<b>How Well Doctors Communicate (% Always or Usually)</b>	<b>78<sup>^</sup></b>	<b>NA</b>	<b>93.8%</b>	<b>92.0%</b>	<b>94.5%</b>	<b>95.3%</b>
Q27. Personal doctor explained things	78 <sup>^</sup>	NA	87.5%	92.3%	94.8%	95.6%
Q28. Personal doctor listened carefully	77 <sup>^</sup>	NA	100%	93.5%	95.9%	96.4%
Q29. Personal doctor showed respect	78 <sup>^</sup>	NA	100%	96.2%	96.9%	97.2%
Q32. Personal doctor spent enough time	78 <sup>^</sup>	NA	87.5%	85.9%	90.4%	91.9%
<b>Other Measure (% Always or Usually)</b>						
Q48. Ease of filling out forms	161	NA	92.9%	96.3%	96.0%	96.5%



# Summary Rate Scores - CCC Population

<b>STAR RATING MEASURES</b> <i>CCC POPULATION SCORES ARE NOT USED FOR ACCREDITATION</i>	<b>2021 VALID N</b>	<b>2019</b>	<b>2020</b>	<b>2021</b>	<b>2021 SPH CCC BENCHMARK</b>	<b>2020 QC CCC BENCHMARK</b>
<b>Rating Questions (% 9 or 10)</b>						
★ Q49. Rating of Health Plan	85 <sup>^</sup>	NA	57.1%	71.8%	71.9%	69.3%
★ Q9. Rating of Health Care	58 <sup>^</sup>	NA	71.4%	67.2%	73.0%	71.0%
★ Q36. Rating of Personal Doctor	73 <sup>^</sup>	NA	66.7%	74.0%	78.8%	78.4%
★ Q43. Rating of Specialist	31 <sup>^</sup>	NA	66.7%	71.0%	75.7%	75.2%
<b>Rating Questions (% 8, 9 or 10)</b>						
Q49. Rating of Health Plan	85 <sup>^</sup>	NA	85.7%	82.4%	85.9%	84.8%
Q9. Rating of Health Care	58 <sup>^</sup>	NA	85.7%	84.5%	87.3%	87.6%
Q36. Rating of Personal Doctor	73 <sup>^</sup>	NA	83.3%	80.8%	89.8%	90.1% ▼
Q43. Rating of Specialist	31 <sup>^</sup>	NA	100%	90.3%	88.1%	87.9%
<b>★ Getting Needed Care (% Always or Usually)</b>	<b>45<sup>^</sup></b>	<b>NA</b>	<b>83.3%</b>	<b>79.3%</b>	<b>88.3%</b>	<b>88.1%</b>
Q10. Getting care, tests, or treatment	58 <sup>^</sup>	NA	100%	84.5%	91.4%	92.2%
Q41. Getting specialist appointment	31 <sup>^</sup>	NA	66.7%	74.2%	85.3%	84.8%
<b>★ Getting Care Quickly (% Always or Usually)</b>	<b>40<sup>^</sup></b>	<b>NA</b>	<b>100%</b>	<b>89.7%</b>	<b>91.1%</b>	<b>93.5%</b>
Q4. Getting urgent care	24 <sup>^</sup>	NA	100%	95.8%	92.9%	95.3%
Q6. Getting routine care	55 <sup>^</sup>	NA	100%	83.6%	89.3%	91.9%
<b>Other Measure (% Always or Usually)</b>						
★ Q35. Coordination of Care	32 <sup>^</sup>	NA	66.7%	75.0%	83.1%	85.1%



# Summary Rate Scores - CCC Population

<b>OTHER MEASURES</b> <i>(Not used for accreditation/ratings)</i>	<b>2021</b> Valid n	<b>2019</b>	<b>2020</b>	<b>2021</b>	<b>2021 SPH CCC</b> BENCHMARK	<b>2020 QC CCC</b> BENCHMARK
<b>Customer Service (% Always or Usually)</b>	<b>25<sup>^</sup></b>	NA	87.5%	92.0%	90.2%	90.3%
Q45. Provided information or help	25 <sup>^</sup>	NA	75.0%	88.0%	85.1%	85.3%
Q46. Treated with courtesy and respect	25 <sup>^</sup>	NA	100%	96.0%	95.3%	95.4%
<b>How Well Doctors Communicate (% Always or Usually)</b>	<b>56<sup>^</sup></b>	NA	100%	86.5%	94.9%	95.8% ▼
Q27. Personal doctor explained things	56 <sup>^</sup>	NA	100%	85.7%	95.6% ▼	96.3% ▼
Q28. Personal doctor listened carefully	55 <sup>^</sup>	NA	100%	87.3%	96.0%	96.3% ▼
Q29. Personal doctor showed respect	55 <sup>^</sup>	NA	100%	90.9%	96.8%	97.3%
Q32. Personal doctor spent enough time	56 <sup>^</sup>	NA	100%	82.1%	91.3%	93.2% ▼
<b>Other Measure (% Always or Usually)</b>						
Q48. Ease of filling out forms	79 <sup>^</sup>	NA	100%	93.7%	95.9%	96.4%





# Summary Rate Scores - CCC Population

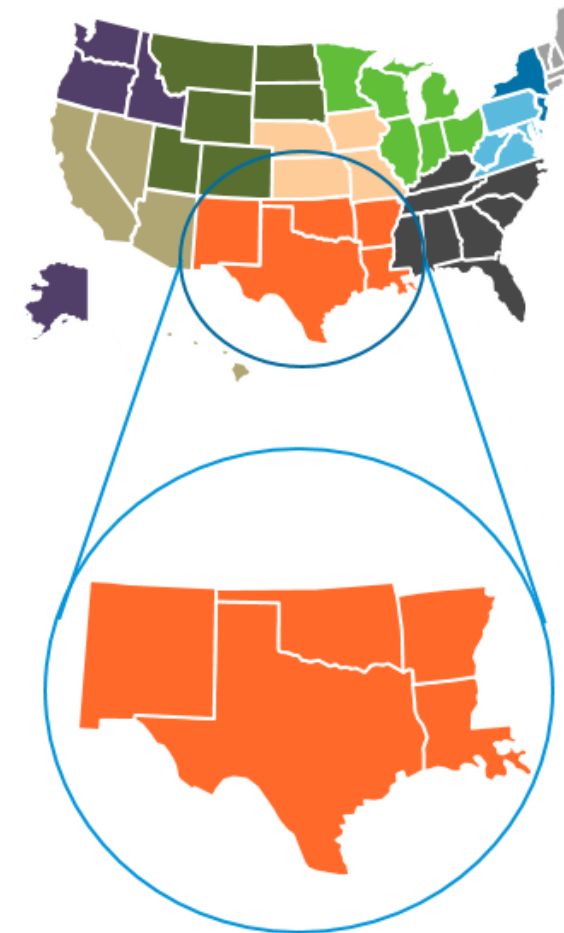
## CCC MEASURES

	2021 Valid n	2019	2020	2021	2021 SPH CCC BENCHMARK	2020 QC CCC BENCHMARK
<b>Q51. Access to Prescription Medicines (% Always or Usually)</b>	<b>64<sup>^</sup></b>	NA	80.0%	87.5%	91.8%	91.3%
<b>Access to Specialized Services (% Always or Usually)</b>	<b>25<sup>^</sup></b>	NA	NA	78.0%	75.6%	74.5%
Q15. Ease of getting special medical equipment or devices	11 <sup>^</sup>	NA	66.7%	81.8%	75.5%	NA
Q18. Ease of getting therapy	26 <sup>^</sup>	NA	100%	84.6%	76.4%	74.1%
Q21. Ease of getting treatment or counseling	37 <sup>^</sup>	NA	NA	67.6%	74.7%	76.9%
<b>FCC: Personal Doctor Who Knows Child (% Yes)</b>	<b>53<sup>^</sup></b>	NA	93.3%	78.9%	91.5% ▼	91.6% ▼
Q33. Doctor talked about how child is feeling, growing, and behaving	56 <sup>^</sup>	NA	80.0%	67.9%	90.3% ▼	90.0% ▼
Q38. Doctor understands how these conditions affect child's day-to-day life	52 <sup>^</sup>	NA	100%	84.6%	93.7%	93.8%
Q39. Doctor understands how these conditions affect family's day-to-day life	51 <sup>^</sup>	NA	100%	84.3%	90.6%	90.6%
<b>Q8. FCC: Getting Needed Information (% Always or Usually)</b>	<b>59<sup>^</sup></b>	NA	100%	81.4%	91.4% ▼	93.1% ▼
<b>Coordination of Care for CCC (% Yes)</b>	<b>26<sup>^</sup></b>	NA	75.0%	72.5%	76.6%	76.4%
Q13. Obtained help from doctors or health providers in contacting child's school or daycare	15 <sup>^</sup>	NA	100%	86.7%	92.9%	NA
Q24. Obtained help coordinating child's care among different providers or services	36 <sup>^</sup>	NA	50.0%	58.3%	60.2%	58.7%

# Regional Performance - General Population

	SUMMARY RATE	2021 SPH BoB REGION
<b>Rating Questions (% 9 or 10)</b>		
Q49. Rating of Health Plan	74.2%	77.3%
Q9. Rating of Health Care	75.9%	76.8%
Q36. Rating of Personal Doctor	76.0%	79.4%
Q43. Rating of Specialist	61.5%	79.1%
<b>Rating Questions (% 8, 9 or 10)</b>		
Q49. Rating of Health Plan	84.3%	89.6%
Q9. Rating of Health Care	85.1%	89.4%
Q36. Rating of Personal Doctor	91.5%	91.2%
Q43. Rating of Specialist	76.9%	89.2%
<b>Getting Needed Care (% Always or Usually)</b>		
Q10. Getting care, tests, or treatment	88.5%	89.8%
Q41. Getting specialist appointment	81.5%	81.9%
<b>Getting Care Quickly (% Always or Usually)</b>		
Q4. Getting urgent care	87.9%	90.9%
Q6. Getting routine care	78.2%	82.7%
<b>Coordination of Care (Q35) (% Always or Usually)</b>		
	89.7%	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 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>		5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>
<b>Rating Questions (% 9 or 10)</b>																					
Q49. Rating of Health Plan	74.2%	62 <sup>nd</sup>	60.6	63.6	68.9	70.6	73.3	74.6	75.5	77.9	80.5	49 <sup>th</sup>	61.6	65.4	69.8	71.5	74.2	76.4	77.4	80.3	81.8
Q9. Rating of Health Care	75.9%	78 <sup>th</sup>	63.0	66.1	69.3	70.3	72.4	74.0	75.5	77.7	79.8	60 <sup>th</sup>	66.2	68.6	71.2	72.1	74.4	76.4	77.0	80.5	82.5
Q36. Rating of Personal Doctor	76.0%	25 <sup>th</sup>	72.0	73.1	75.9	77.2	79.0	80.7	81.4	83.3	84.3	26 <sup>th</sup>	72.0	74.1	75.8	76.8	78.5	80.2	81.2	83.5	84.5
Q43. Rating of Specialist	61.5%	<5 <sup>th</sup>	66.9	68.0	71.3	73.6	74.2	74.4	75.0	76.8	77.4	<5 <sup>th</sup>	61.7	65.9	71.5	72.5	75.1	78.3	80.0	84.0	85.5
<b>Rating Questions (% 8, 9 or 10)</b>																					
Q49. Rating of Health Plan	84.3%	23 <sup>rd</sup>	79.2	81.3	84.4	85.7	87.4	88.6	89.3	91.7	92.4	20 <sup>th</sup>	80.4	82.2	84.9	85.6	88.1	89.5	90.1	92.0	92.8
Q9. Rating of Health Care	85.1%	17 <sup>th</sup>	82.3	83.9	86.0	86.8	88.5	89.7	90.6	92.2	93.1	15 <sup>th</sup>	83.7	84.5	86.3	87.4	88.8	90.1	90.9	93.4	94.7
Q36. Rating of Personal Doctor	91.5%	56 <sup>th</sup>	86.0	87.6	89.5	90.2	91.2	92.0	92.5	93.8	94.8	57 <sup>th</sup>	86.4	87.3	88.9	89.8	91.0	92.0	92.6	94.0	94.8
Q43. Rating of Specialist	76.9%	<5 <sup>th</sup>	83.0	84.8	85.0	86.5	87.1	87.9	87.9	89.6	91.9	<5 <sup>th</sup>	79.3	80.8	85.5	86.4	88.0	90.2	91.2	94.0	96.2
<b>Getting Needed Care (% A or U)</b>																					
Q10. Getting care, tests, or treatment	88.5%	17 <sup>th</sup>	84.8	86.7	89.1	90.0	92.0	93.3	93.8	95.4	96.2	26 <sup>th</sup>	83.6	85.6	88.3	89.1	91.0	93.0	93.3	95.0	96.0
Q41. Getting specialist appointment	81.5%	57 <sup>th</sup>	70.9	72.1	75.4	78.3	79.7	82.1	83.7	87.7	88.1	41 <sup>st</sup>	66.7	72.3	78.1	80.0	82.7	84.8	86.1	89.7	92.4
<b>Getting Care Quickly (% A or U)</b>																					
Q4. Getting urgent care	87.9%	12 <sup>th</sup>	85.7	86.2	90.3	91.7	93.3	94.8	95.6	96.7	97.1	25 <sup>th</sup>	81.8	83.8	87.9	89.5	92.0	93.9	95.2	96.9	98.1
Q6. Getting routine care	78.2%	<5 <sup>th</sup>	79.4	81.8	86.1	88.3	90.1	91.7	92.4	94.3	94.9	15 <sup>th</sup>	72.1	75.8	79.9	82.2	85.2	86.8	88.1	90.7	91.7
<b>Q35. Coordination of Care (% A or U)</b>																					
	89.7%	78 <sup>th</sup>	77.3	79.7	83.9	85.3	87.1	88.2	89.3	90.7	91.7	79 <sup>th</sup>	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 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>		5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>
<b>Customer Service (% A or U)</b>	<b>86.4%</b>	<b>19<sup>th</sup></b>	<b>81.7</b>	<b>85.1</b>	<b>87.0</b>	<b>87.3</b>	<b>89.0</b>	<b>90.3</b>	<b>91.1</b>	<b>92.9</b>	<b>93.8</b>	<b>29<sup>th</sup></b>	<b>80.5</b>	<b>82.8</b>	<b>86.1</b>	<b>86.8</b>	<b>88.5</b>	<b>90.4</b>	<b>91.1</b>	<b>93.1</b>	<b>93.7</b>
Q45. Provided information or help	78.4%	13 <sup>th</sup>	73.0	77.0	81.0	82.0	84.4	85.9	87.3	89.5	90.4	21 <sup>st</sup>	73.1	75.0	79.1	80.0	82.9	85.5	86.6	89.1	90.2
Q46. Treated with courtesy and respect	94.4%	61 <sup>st</sup>	90.1	91.0	92.0	92.9	94.0	94.9	95.5	97.3	97.3	52 <sup>nd</sup>	87.8	90.2	92.1	92.7	94.2	95.8	96.4	98.0	98.7
<b>How Well Doctors Communicate (% A or U)</b>	<b>92.0%</b>	<b>6<sup>th</sup></b>	<b>91.6</b>	<b>92.5</b>	<b>94.3</b>	<b>94.7</b>	<b>95.5</b>	<b>96.4</b>	<b>96.6</b>	<b>97.6</b>	<b>98.0</b>	<b>15<sup>th</sup></b>	<b>90.5</b>	<b>91.3</b>	<b>92.9</b>	<b>93.4</b>	<b>94.5</b>	<b>95.8</b>	<b>96.4</b>	<b>97.4</b>	<b>97.9</b>
Q27. Personal doctor explained things	92.3%	10 <sup>th</sup>	90.9	92.2	94.4	95.2	96.0	97.1	97.3	98.0	98.5	13 <sup>th</sup>	89.6	91.8	93.1	93.6	94.8	96.2	96.9	98.0	98.7
Q28. Personal doctor listened carefully	93.5%	7 <sup>th</sup>	93.1	94.2	95.3	95.8	96.6	97.3	97.5	98.5	98.7	12 <sup>th</sup>	92.2	93.2	94.6	95.2	95.9	97.2	97.5	98.4	99.2
Q29. Personal doctor showed respect	96.2%	21 <sup>st</sup>	94.7	95.3	96.3	96.6	97.3	97.9	98.1	99.0	99.3	34 <sup>th</sup>	94.0	94.4	95.8	96.1	97.0	97.8	98.2	98.9	99.2
Q32. Personal doctor spent enough time	85.9%	7 <sup>th</sup>	85.5	86.9	89.0	90.6	92.5	93.7	94.3	96.4	97.2	15 <sup>th</sup>	82.7	84.5	87.9	88.5	90.7	92.8	94.0	95.5	96.5
<b>Ease of Filling Out Forms (Q48) (% A or U)</b>	<b>96.3%</b>	<b>44<sup>th</sup></b>	<b>93.2</b>	<b>94.4</b>	<b>95.5</b>	<b>96.0</b>	<b>96.6</b>	<b>97.3</b>	<b>97.6</b>	<b>98.4</b>	<b>98.9</b>	<b>53<sup>rd</sup></b>	<b>92.9</b>	<b>93.7</b>	<b>94.8</b>	<b>95.3</b>	<b>96.2</b>	<b>96.9</b>	<b>97.2</b>	<b>98.0</b>	<b>98.3</b>

% 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 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>		5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>
<b>Rating Questions (% 9 or 10)</b>																					
Q49. Rating of Health Plan	71.8%	59 <sup>th</sup>	56.9	59.8	66.0	66.4	70.1	73.2	74.2	76.2	77.1	49 <sup>th</sup>	60.9	62.7	67.7	69.2	71.9	74.9	76.3	78.0	79.7
Q9. Rating of Health Care	67.2%	21 <sup>st</sup>	62.3	62.9	67.8	68.9	71.1	73.2	74.6	78.2	78.8	14 <sup>th</sup>	63.2	64.4	69.6	70.9	73.4	75.7	77.1	79.3	79.7
Q36. Rating of Personal Doctor	74.0%	8 <sup>th</sup>	73.4	74.5	75.6	77.3	78.4	79.4	81.0	83.6	84.3	7 <sup>th</sup>	73.7	74.5	76.1	77.2	79.2	81.8	82.4	84.0	85.2
Q43. Rating of Specialist	71.0%	14 <sup>th</sup>	66.7	67.7	71.7	72.1	75.5	78.0	79.8	81.5	83.6	23 <sup>rd</sup>	66.7	67.7	71.1	72.0	75.0	78.7	80.2	82.7	82.8
<b>Rating Questions (% 8, 9 or 10)</b>																					
Q49. Rating of Health Plan	82.4%	22 <sup>nd</sup>	78.2	79.5	83.1	83.7	85.2	86.9	87.8	89.3	89.7	22 <sup>nd</sup>	78.1	80.3	83.1	83.9	86.4	88.0	88.5	90.2	90.7
Q9. Rating of Health Care	84.5%	23 <sup>rd</sup>	82.4	83.3	84.6	86.3	88.5	89.9	90.3	91.6	92.1	23 <sup>rd</sup>	82.1	83.2	85.0	86.1	87.6	89.1	89.6	91.3	93.5
Q36. Rating of Personal Doctor	80.8%	<5 <sup>th</sup>	84.0	85.5	89.0	89.8	90.5	91.3	92.2	93.0	94.0	<5 <sup>th</sup>	84.9	87.0	88.1	88.5	90.4	91.5	91.9	93.7	94.1
Q43. Rating of Specialist	90.3%	85 <sup>th</sup>	82.5	83.1	85.6	87.4	88.2	89.3	89.5	92.1	92.5	67 <sup>th</sup>	80.3	82.1	84.9	86.6	88.3	90.2	91.1	92.5	93.1
<b>Getting Needed Care (% A or U)</b>																					
Q10. Getting care, tests, or treatment	84.5%	<5 <sup>th</sup>	86.3	86.8	89.7	91.5	93.0	94.1	94.7	95.8	95.9	<5 <sup>th</sup>	85.6	86.6	88.9	89.6	91.5	93.2	93.4	94.5	94.8
Q41. Getting specialist appointment	74.2%	<5 <sup>th</sup>	74.8	75.7	81.8	83.1	86.1	87.9	88.8	90.5	91.0	6 <sup>th</sup>	73.8	76.8	81.8	82.8	85.3	88.2	88.7	89.9	90.6
<b>Getting Care Quickly (% A or U)</b>																					
Q4. Getting urgent care	95.8%	48 <sup>th</sup>	89.9	91.9	93.6	93.9	95.8	97.0	97.2	98.3	99.3	79 <sup>th</sup>	85.3	87.8	90.4	91.3	93.3	94.2	95.2	97.0	97.4
Q6. Getting routine care	83.6%	<5 <sup>th</sup>	85.9	87.3	89.6	90.7	92.3	93.7	94.5	96.0	96.7	6 <sup>th</sup>	82.5	84.2	86.7	87.4	89.3	90.6	91.4	93.3	94.3
<b>Q35. Coordination of Care (% A or U)</b>	<b>75.0%</b>	<b>&lt;5<sup>th</sup></b>	<b>76.1</b>	<b>78.9</b>	<b>84.4</b>	<b>84.7</b>	<b>85.7</b>	<b>86.9</b>	<b>87.4</b>	<b>88.9</b>	<b>92.5</b>	<b>7<sup>th</sup></b>	<b>72.1</b>	<b>79.0</b>	<b>80.4</b>	<b>81.7</b>	<b>83.3</b>	<b>84.6</b>	<b>85.5</b>	<b>89.5</b>	<b>91.2</b>

% 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 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>	5 <sup>th</sup>		10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>		
<b>Customer Service (% A or U)</b>	<b>92.0%</b>	<b>62<sup>nd</sup></b>	<b>87.2</b>	<b>87.2</b>	<b>87.9</b>	<b>88.4</b>	<b>91.2</b>	<b>92.4</b>	<b>92.4</b>	<b>92.7</b>	<b>92.7</b>	<b>75<sup>th</sup></b>	<b>83.3</b>	<b>85.5</b>	<b>87.5</b>	<b>89.0</b>	<b>90.0</b>	<b>91.0</b>	<b>91.9</b>	<b>94.1</b>	<b>94.8</b>		
Q45. Provided information or help	88.0%	87 <sup>th</sup>	80.2	80.2	82.4	83.5	86.2	87.7	87.8	89.5	89.5	74 <sup>th</sup>	75.7	77.8	82.1	82.9	84.4	87.2	88.0	91.4	92.5		
Q46. Treated with courtesy and respect	96.0%	62 <sup>nd</sup>	93.3	93.3	93.8	94.2	95.9	96.4	96.6	97.1	97.1	63 <sup>rd</sup>	90.9	91.4	92.7	93.6	95.2	96.6	96.8	98.0	98.3		
<b>How Well Doctors Communicate (% A or U)</b>	<b>86.5%</b>	<b>&lt;5<sup>th</sup></b>	<b>93.0</b>	<b>93.3</b>	<b>95.0</b>	<b>95.6</b>	<b>96.2</b>	<b>96.7</b>	<b>97.1</b>	<b>97.5</b>	<b>97.7</b>	<b>&lt;5<sup>th</sup></b>	<b>90.8</b>	<b>92.3</b>	<b>93.4</b>	<b>94.4</b>	<b>95.3</b>	<b>96.0</b>	<b>96.2</b>	<b>97.3</b>	<b>97.6</b>		
Q27. Personal doctor explained things	85.7%	<5 <sup>th</sup>	92.2	94.1	95.2	96.0	96.7	97.1	97.4	98.7	99.0	<5 <sup>th</sup>	91.5	92.0	94.8	95.3	95.8	96.6	97.0	97.8	98.8		
Q28. Personal doctor listened carefully	87.3%	<5 <sup>th</sup>	92.4	93.6	95.7	96.1	96.6	97.0	97.2	98.3	98.9	<5 <sup>th</sup>	92.9	94.0	95.2	95.4	96.4	97.1	97.5	98.0	98.3		
Q29. Personal doctor showed respect	90.9%	<5 <sup>th</sup>	95.1	95.8	96.7	96.9	97.3	97.9	98.0	99.3	99.5	<5 <sup>th</sup>	94.0	94.6	95.7	96.3	97.2	98.0	98.0	98.5	98.9		
Q32. Personal doctor spent enough time	82.1%	<5 <sup>th</sup>	88.5	88.9	91.5	93.2	93.8	94.8	95.1	96.4	96.5	<5 <sup>th</sup>	84.5	85.6	88.1	89.7	91.9	93.8	94.3	95.9	96.2		
<b>Ease of Filling Out Forms (Q48) (% A or U)</b>	<b>93.7%</b>	<b>&lt;5<sup>th</sup></b>	<b>94.1</b>	<b>94.4</b>	<b>95.5</b>	<b>96.1</b>	<b>96.5</b>	<b>97.1</b>	<b>97.6</b>	<b>98.6</b>	<b>98.9</b>	<b>7<sup>th</sup></b>	<b>92.8</b>	<b>94.0</b>	<b>95.0</b>	<b>95.5</b>	<b>96.0</b>	<b>96.5</b>	<b>96.9</b>	<b>97.7</b>	<b>98.1</b>		

% 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 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>		5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>
<b>Q51. Access to Prescription Medicines (% A or U)</b>	87.5%	10 <sup>th</sup>	86.5	87.1	89.1	89.7	91.4	92.7	93.6	95.4	96.3	8 <sup>th</sup>	85.4	87.7	90.5	90.9	92.4	93.2	94.0	95.1	96.0
<b>Access to Specialized Services (% A or U)</b>	78.0%	77 <sup>th</sup>	66.6	66.6	71.4	71.4	75.0	75.4	75.4	82.7	82.7	66 <sup>th</sup>	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	81.8%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	64 <sup>th</sup>	57.1	61.1	68.8	70.5	75.0	81.9	84.4	86.7	90.0
Q18. Ease of getting therapy	84.6%	85 <sup>th</sup>	66.4	66.4	67.3	70.8	72.8	76.4	79.2	86.0	86.0	87 <sup>th</sup>	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	67.6%	10 <sup>th</sup>	65.6	66.9	72.4	73.1	76.9	80.4	81.9	86.3	87.3	15 <sup>th</sup>	60.3	64.4	69.4	71.2	74.7	78.1	80.4	83.6	84.5
<b>FCC: Personal Doctor Who Knows Child (% Yes)</b>	78.9%	<5 <sup>th</sup>	86.5	88.2	90.1	91.2	91.9	93.1	93.6	94.4	94.6	<5 <sup>th</sup>	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	67.9%	<5 <sup>th</sup>	83.8	87.5	88.8	89.2	90.2	91.6	92.2	92.9	93.8	<5 <sup>th</sup>	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	84.6%	<5 <sup>th</sup>	88.4	89.7	92.4	93.3	94.3	95.3	96.2	96.7	97.5	<5 <sup>th</sup>	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	84.3%	<5 <sup>th</sup>	84.6	85.6	89.1	89.8	90.6	92.6	92.9	94.0	94.7	<5 <sup>th</sup>	85.5	86.8	88.9	89.9	91.0	91.7	92.0	93.9	94.9
<b>Q8. FCC: Getting Needed Information (% A or U)</b>	81.4%	<5 <sup>th</sup>	89.1	90.3	91.7	92.1	93.4	93.8	94.7	95.6	96.7	<5 <sup>th</sup>	85.5	87.3	89.4	90.2	91.7	92.6	93.0	95.1	96.9
<b>Coordination of Care for CCC (% Yes)</b>	72.5%	27 <sup>th</sup>	71.9	71.9	72.0	75.2	77.9	78.9	79.0	79.6	80.3	22 <sup>nd</sup>	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	86.7%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	15 <sup>th</sup>	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	58.3%	48 <sup>th</sup>	50.0	50.8	54.5	55.3	58.7	62.0	63.6	66.9	67.0	39 <sup>th</sup>	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

- Western Sky Community Care (Centene NM)





# 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<sup>®</sup> 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<sup>®</sup> All Plans benchmark.

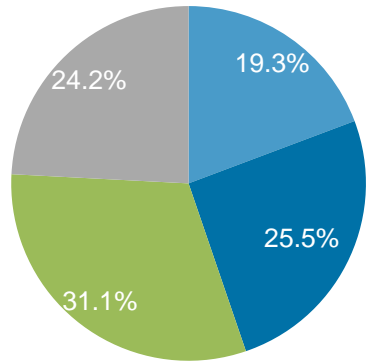
No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% confidence level.

# 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.

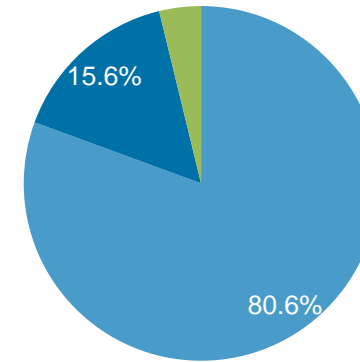
### Child's Age



	0 - 4	5 - 8	9 - 13	14 or older
2021	19.3%	25.5%	31.1%	24.2%
2020	35.7%	14.3%	28.6%	21.4%
2019	NA	NA	NA	NA
SPH	<b>21.4%</b>	<b>21.1%</b>	<b>29.7%</b>	<b>27.7%</b>
QC	NA	NA	NA	NA

■ 0-4 ■ 5-8 ■ 9-13 ■ 14 or older

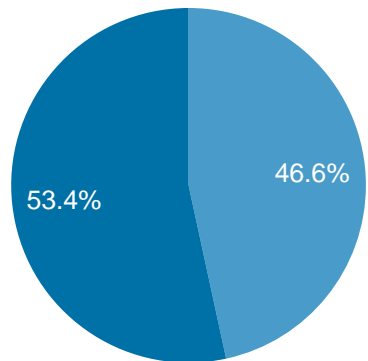
### Child's Health Status



	Excellent/Very Good	Good	Fair/Poor
2021	80.6%	15.6%	3.8%
2020	85.7%	0.0%	14.3%
2019	NA	NA	NA
SPH	<b>76.5%</b>	<b>18.7%</b>	<b>4.8%</b>
QC	NA	NA	NA

■ Excellent/Very Good ■ Good ■ Fair/Poor

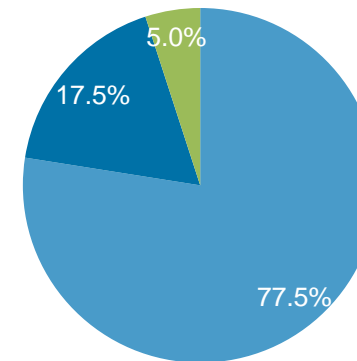
### Child's Gender



	Male	Female
2021	46.6%	53.4%
2020	50.0%	50.0%
2019	NA	NA
SPH	<b>52.9%</b>	<b>47.1%</b>
QC	NA	NA

■ Male ■ Female

### Child's Mental/Emotional Health Status



	Excellent/Very Good	Good	Fair/Poor
2021	77.5%	17.5%	5.0%
2020	78.6%	14.3%	7.1%
2019	NA	NA	NA
SPH	<b>68.3%</b> ▲	<b>20.5%</b>	<b>11.3%</b> ▼
QC	NA	NA	NA

■ Excellent/Very Good ■ Good ■ Fair/Poor

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

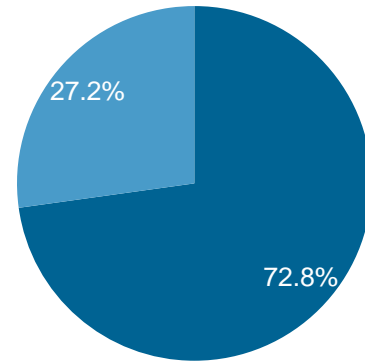
Note: Due to space constraints, scores <5% will not be labeled on the graph.

# 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.

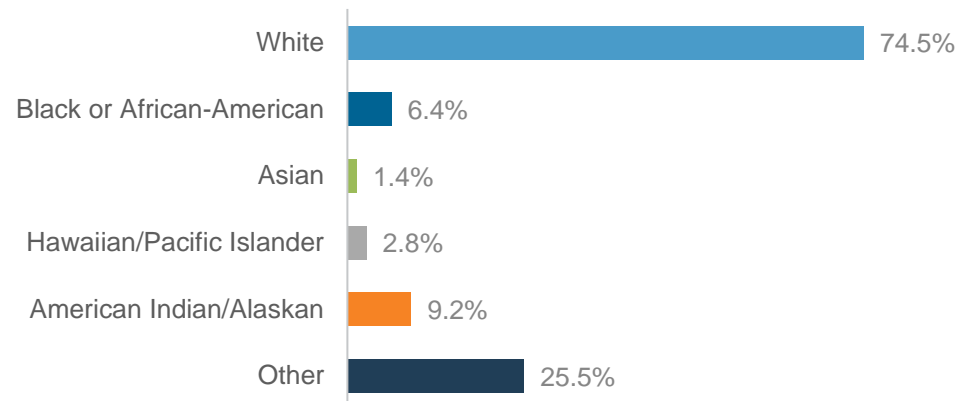
Child's Ethnicity



■ Hispanic/Latino ■ Not Hispanic/Latino

	Hispanic/Latino	Not Hispanic/Latino
2021	72.8%	27.2%
2020	57.1%	42.9%
2019	NA	NA
SPH	34.0% ▲	66.0% ▼
QC	NA	NA

Child's Race



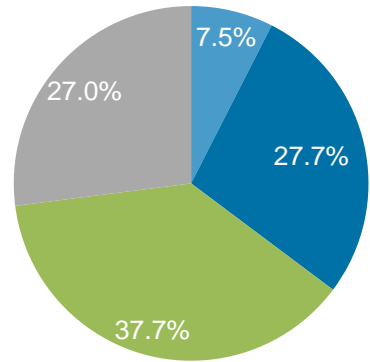
	White	Black or African-American	Asian	Hawaiian/Pacific Islander	American Indian/Alaskan	Other
2021	74.5%	6.4%	1.4%	2.8%	9.2%	25.5%
2020	71.4%	0.0%	0.0%	7.1%	7.1%	14.3%
2019	NA	NA	NA	NA	NA	NA
SPH	63.5% ▲	23.8% ▼	6.4% ▼	1.1%	3.0% ▲	15.2% ▲
QC	NA	NA	NA	NA	NA	NA

# 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.

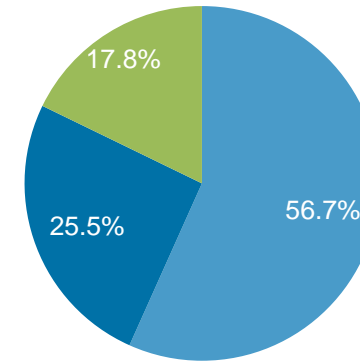
### Respondent's Age



	24 or younger	25 - 34	35 - 44	45 or older
2021	7.5%	27.7%	37.7%	27.0%
2020	7.7%	46.2%	23.1%	23.1%
2019	NA	NA	NA	NA
SPH	12.4% ▼	24.0%	33.6%	30.1%
QC	NA	NA	NA	NA

■ 24 or younger ■ 25-34

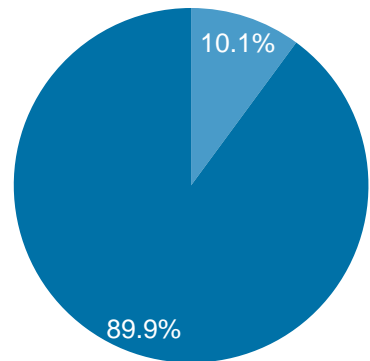
### Respondent's Education



	HS Graduate or Less	Some College	College Graduate or More
2021	56.7%	25.5%	17.8%
2020	64.3%	21.4%	14.3%
2019	NA	NA	NA
SPH	50.3%	31.7%	18.0%
QC	NA	NA	NA

■ HS Graduate or Less ■ Some College

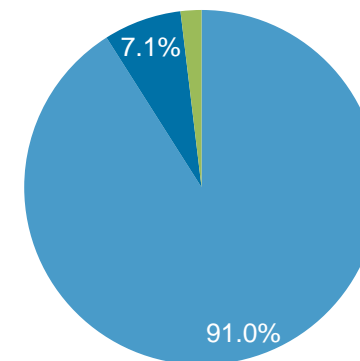
### Respondent's Gender



	Male	Female
2021	10.1%	89.9%
2020	7.1%	92.9%
2019	NA	NA
SPH	12.7%	87.3%
QC	NA	NA

■ Male ■ Female

### Respondent's Relation to Child



	Parent	Grandparent	Other
2021	91.0%	7.1%	1.9%
2020	100%	0.0%	0.0%
2019	NA	NA	NA
SPH	89.9%	6.6%	3.4%
QC	NA	NA	NA

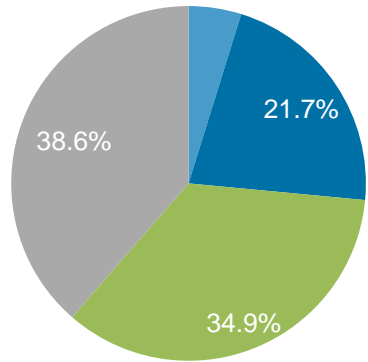
■ Parent ■ Grandparent ■ Other

# 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.

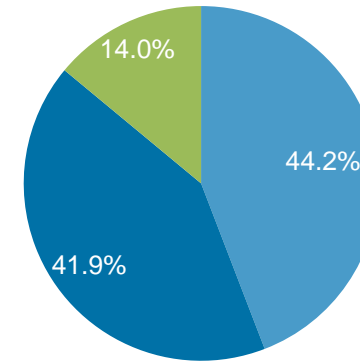
### Child's Age



	0 - 4	5 - 8	9 - 13	14 or older
2021	4.8%	21.7%	34.9%	38.6%
2020	28.6%	0.0%	28.6%	42.9%
2019	NA	NA	NA	NA
SPH	10.3% ▼	19.9%	35.8%	34.0%
QC	NA	NA	NA	NA

■ 0-4 ■ 5-8 ■ 9-13 ■ 14 or older

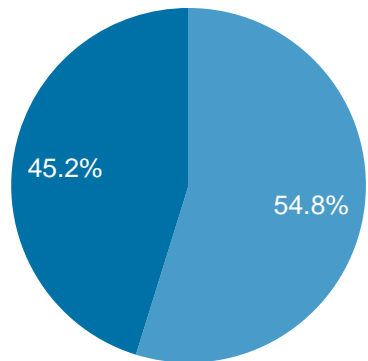
### Child's Health Status



	Excellent/Very Good	Good	Fair/Poor
2021	44.2%	41.9%	14.0%
2020	85.7%	0.0%	14.3%
2019	NA	NA	NA
SPH	55.8% ▼	31.7%	12.5%
QC	NA	NA	NA

■ Excellent/Very Good ■ Good ■ Fair/Poor

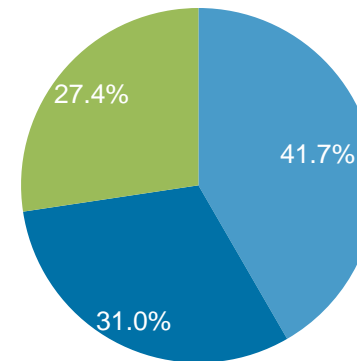
### Child's Gender



	Male	Female
2021	54.8%	45.2%
2020	71.4%	28.6%
2019	NA	NA
SPH	59.1%	40.9%
QC	NA	NA

■ Male ■ Female

### Child's Mental/Emotional Health Status



	Excellent/Very Good	Good	Fair/Poor
2021	41.7%	31.0%	27.4%
2020	71.4%	0.0%	28.6%
2019	NA	NA	NA
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.

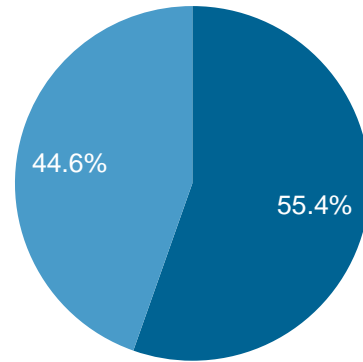
Note: Due to space constraints, scores <5% will not be labeled on the graph.

# 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.

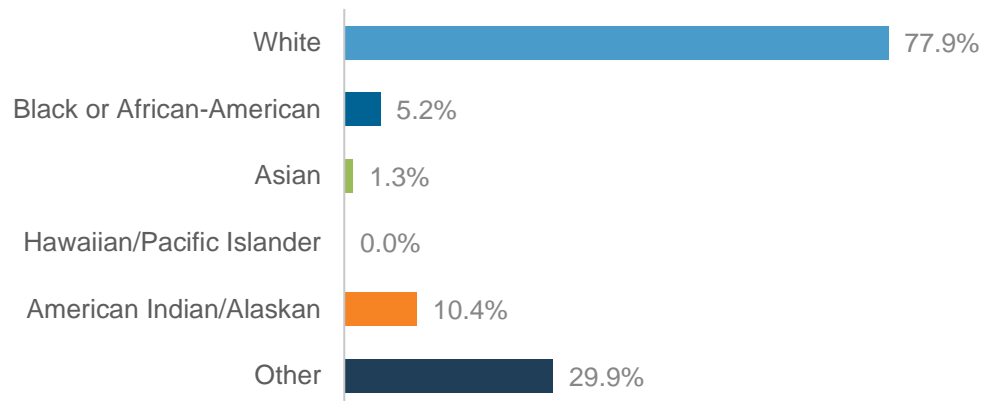
Child's Ethnicity



■ Hispanic/Latino ■ Not Hispanic/Latino

	Hispanic/Latino	Not Hispanic/Latino
2021	55.4%	44.6%
2020	28.6%	71.4%
2019	NA	NA
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	77.9%	5.2%	1.3%	0.0%	10.4%	29.9%
2020	85.7%	0.0%	0.0%	0.0%	14.3%	0.0%
2019	NA	NA	NA	NA	NA	NA
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.

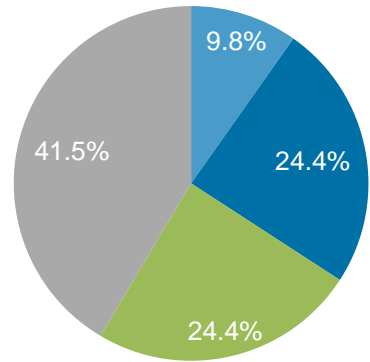
Note: Due to space constraints, scores <5% will not be labeled on the graph.

# 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.

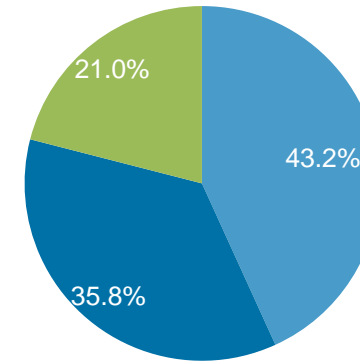
### Respondent's Age



	24 or younger	25 - 34	35 - 44	45 or older
2021	9.8%	24.4%	24.4%	41.5%
2020	14.3%	42.9%	14.3%	28.6%
2019	NA	NA	NA	NA
SPH	11.4%	16.9%	31.5%	40.2%
QC	NA	NA	NA	NA

■ 24 or younger ■ 25-34

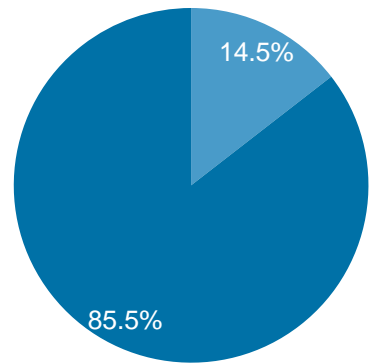
### Respondent's Education



	HS Graduate or Less	Some College	College Graduate or More
2021	43.2%	35.8%	21.0%
2020	14.3%	42.9%	42.9%
2019	NA	NA	NA
SPH	44.4%	36.1%	19.5%
QC	NA	NA	NA

■ HS Graduate or Less ■ Some College

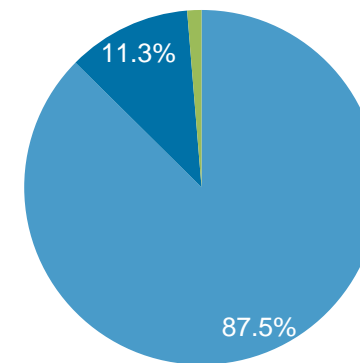
### Respondent's Gender



	Male	Female
2021	14.5%	85.5%
2020	42.9%	57.1%
2019	NA	NA
SPH	10.2%	89.8%
QC	NA	NA

■ Male ■ Female

### Respondent's Relation to Child



	Parent	Grandparent	Other
2021	87.5%	11.3%	1.3%
2020	100.0%	0.0%	0.0%
2019	NA	NA	NA
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

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## Subgroup Analysis

- Western Sky Community Care (Centene NM)





# 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% <sup>B</sup>	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>	134	25	74	13 <sup>^</sup>	129	25	6 <sup>^</sup>	124	28	8 <sup>^</sup>	66	97	0 <sup>^</sup>	31	41	50	39
<b>Rating Questions (% 9 or 10)</b>																	
Q49. Rating of Health Plan	88.1%	0.0%	80.8%	15.4%	75.6%	68.0%	60.0%	75.6%	70.4%	57.1%	71.2%	76.3%	---	70.0%	75.6%	75.0%	74.4%
Q9. Rating of Health Care	82.9%	43.8%	89.2%	0.0%	78.7%	65.0%	75.0%	74.6%	75.0%	83.3%	63.6%	83.3% Q	---	72.2%	76.0%	75.0%	77.8%
Q36. Rating of Personal Doctor	77.8%	68.4%	87.1%	40.0%	76.9%	68.4%	75.0%	78.2%	65.2%	66.7%	74.0%	77.2%	---	68.0%	77.1%	80.0%	75.0%
Q43. Rating of Specialist	73.7%	16.7%	75.0%	20.0%	73.3%	25.0%	100%	70.6%	20.0%	75.0%	58.3%	64.3%	---	50.0%	55.6%	60.0%	70.0%
<b>Rating Questions (% 8, 9 or 10)</b>																	
Q49. Rating of Health Plan	100%	0.0%	87.7%	46.2%	84.3%	80.0%	100%	83.7%	85.2%	85.7%	83.3%	84.9%	---	86.7%	80.5%	85.4%	84.6%
Q9. Rating of Health Care	91.4%	56.3%	100%	0.0%	88.5%	75.0%	75.0%	84.1%	87.5%	83.3%	81.8%	87.0%	---	77.8%	84.0%	91.7%	83.3%
Q36. Rating of Personal Doctor	94.4%	73.7%	96.8%	50.0%	94.2%	78.9%	75.0%	93.1%	87.0%	66.7%	90.0%	92.4%	---	96.0%	94.3%	85.7%	90.6%
Q43. Rating of Specialist	84.2%	50.0%	93.8%	20.0%	80.0%	62.5%	100%	76.5%	60.0%	100%	75.0%	78.6%	---	50.0%	66.7%	80.0%	90.0%
<b>Getting Needed Care (% A or U)</b>	<b>88.9%</b>	<b>67.7%</b>	<b>94.2%</b>	<b>51.9%</b>	<b>85.1%</b>	<b>78.9%</b>	<b>100%</b>	<b>83.3%</b>	<b>80.6%</b>	<b>100%</b>	<b>81.4%</b>	<b>87.8%</b>	<b>---</b>	<b>77.8%</b>	<b>82.9%</b>	<b>73.8%</b>	<b>94.4%</b>
Q10. Getting care, tests, or treatment	92.9%	68.8%	94.6%	53.8%	90.2%	80.0%	100%	88.9%	81.3%	100%	87.9%	88.9%	---	88.9%	88.0%	87.5%	88.9%
Q41. Getting specialist appointment	85.0%	66.7%	93.8%	50.0%	80.0%	77.8%	100%	77.8%	80.0%	100%	75.0%	86.7%	---	66.7%	77.8%	60.0%	100%
<b>Getting Care Quickly (% A or U)</b>	<b>83.8%</b>	<b>63.1%</b>	<b>86.8%</b>	<b>53.4%</b>	<b>85.7%</b>	<b>71.0%</b>	<b>87.5%</b>	<b>83.0%</b>	<b>74.6%</b>	<b>100%</b>	<b>80.4%</b>	<b>85.6%</b>	<b>---</b>	<b>73.2%</b>	<b>91.3%</b>	<b>84.2%</b>	<b>81.9%</b>
Q4. Getting urgent care	92.9%	33.3%	95.5%	25.0%	91.3%	71.4%	100%	88.0%	80.0%	100%	81.3%	94.1%	---	71.4%	100%	87.5%	91.7%
Q6. Getting routine care	74.6%	92.9%	78.2%	81.8%	80.0%	70.6%	75.0%	77.9%	69.2%	100%	79.5%	77.1%	---	75.0%	82.6%	81.0%	72.2%
<b>Coordination of Care (Q35) (% A or U)</b>	<b>91.3%</b>	<b>83.3%</b>	<b>100%</b>	<b>66.7%</b>	<b>84.2%</b>	<b>100%</b>	<b>100%</b>	<b>89.5%</b>	<b>85.7%</b>	<b>100%</b>	<b>100%</b>	<b>81.3%</b>	<b>---</b>	<b>50.0%</b>	<b>100%</b>	<b>75.0%</b>	<b>91.7%</b>



# 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>	134	25	74	13 <sup>^</sup>	129	25	6 <sup>^</sup>	124	28	8 <sup>^</sup>	66	97	0 <sup>^</sup>	31	41	50	39
<b>Customer Service (% A or U)</b>	<b>86.7%</b>	<b>75.0%</b>	<b>95.2%</b>	<b>83.3%</b>	<b>85.4%</b>	<b>82.6%</b>	<b>100%</b>	<b>85.6%</b>	<b>80.0%</b>	<b>100%</b>	<b>77.3%</b>	<b>90.3%</b>	<b>---</b>	<b>100%</b>	<b>91.7%</b>	<b>68.2%</b>	<b>94.4%</b>
Q45. Provided information or help	79.4%	50.0%	90.5%	66.7%	75.0%	77.8%	100%	75.0%	80.0%	100%	63.6%	84.6%	---	100%	83.3%	54.5%	88.9%
Q46. Treated with courtesy and respect	93.9%	100%	100%	100%	95.8%	87.5%	100%	96.3%	80.0%	100%	90.9%	96.0%	---	100%	100%	81.8%	100%
<b>How Well Doctors Communicate (% A or U)</b>	<b>93.3%</b>	<b>80.6%</b>	<b>96.6%</b>	<b>69.4%</b>	<b>93.7%</b>	<b>85.3%</b>	<b>91.7%</b>	<b>94.0%</b>	<b>81.7%</b>	<b>100%</b>	<b>94.4%</b>	<b>90.7%</b>	<b>---</b>	<b>90.8%</b>	<b>91.7%</b>	<b>86.8%</b>	<b>97.3%</b>
Q27. Personal doctor explained things	92.5%	88.9%	98.0%	77.8%	92.9%	88.2%	100%	94.8%	80.0%	100%	96.3%	90.2%	---	89.5%	95.2%	82.4%	100%
Q28. Personal doctor listened carefully	97.0%	66.7%	96.1%	66.7%	96.4%	82.4%	100%	96.5%	80.0%	100%	92.6%	94.0%	---	94.7%	95.2%	88.2%	94.4%
Q29. Personal doctor showed respect	98.5%	77.8%	100%	66.7%	98.2%	88.2%	100%	96.6%	93.3%	100%	96.3%	96.1%	---	89.5%	100%	94.1%	100%
Q32. Personal doctor spent enough time	85.1%	88.9%	92.2%	66.7%	87.5%	82.4%	66.7%	87.9%	73.3%	100%	92.6%	82.4%	---	89.5%	76.2%	82.4%	94.7%
<b>Other Measures</b>																	
Q48. Ease of filling out forms (% A or U)	96.2%	96.0%	97.3%	92.3%	95.3%	100%	100%	95.1%	100%	100%	97.0%	95.8%	---	96.7%	97.6%	98.0%	92.3%
Q7. Average number of visits to doctor's office or clinic	1.3	1.8	2.4	2.4	1.0	2.8	1.7	1.1	2.2	1.8	1.4	1.3	---	1.5	1.6	0.9	1.5
Q26. Average number of visits to personal doctor	1.1	1.1	1.4	2.5	0.9	2.2	1.0	1.0	1.5	1.3	1.0	1.2	---	1.5	1.0	1.0	1.1
Q42. Average number of specialists seen	1.4	2.5	2.0	1.2	1.3	2.1	2.0	1.2	3.0	2.0	2.0	1.3	---	0.7	1.3	1.6	2.2

# 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>	75	86	105	9^	2^	4^	13^	36	115	43	12^	44	60	43	16^	142	89	68
<b>Rating Questions (% 9 or 10)</b>																		
Q49. Rating of Health Plan	72.6%	75.3%	72.5%	66.7%	50.0%	50.0%	76.9%	77.1%	79.5% g	62.8%	75.0%	79.1%	69.5%	78.6%	81.3%	74.8%	80.7%	66.7%
Q9. Rating of Health Care	74.4%	76.1%	71.4%	100%	50.0%	0.0%	87.5%	84.2%	81.0%	60.0%	60.0%	73.1%	80.0%	77.3%	85.7%	75.0%	77.8%	72.2%
Q36. Rating of Personal Doctor	76.4%	75.0%	72.6%	50.0%	100%	100%	81.8%	77.8%	80.7% g	62.2%	60.0%	71.4%	81.6%	77.4%	76.9%	76.6%	73.1%	78.9%
Q43. Rating of Specialist	66.7%	57.1%	63.6%	0.0%	NA	NA	50.0%	60.0%	80.0%	36.4%	0.0%	57.1%	69.2%	60.0%	50.0%	62.5%	58.3%	61.5%
<b>Rating Questions (% 8, 9 or 10)</b>																		
Q49. Rating of Health Plan	83.6%	84.7%	83.3%	88.9%	50.0%	50.0%	84.6%	88.6%	87.5%	76.7%	83.3%	88.4%	83.1%	85.7%	87.5%	85.6%	92.0% o	75.8%
Q9. Rating of Health Care	84.6%	84.8%	85.7%	100%	100%	0.0%	87.5%	89.5%	87.9%	76.0%	80.0%	76.9%	93.3%	86.4%	85.7%	85.5%	88.9%	80.6%
Q36. Rating of Personal Doctor	92.7%	90.3%	90.5%	100%	100%	100%	90.9%	88.9%	93.2%	86.5%	70.0%	94.3%	95.9%	90.3%	92.3%	92.8%	91.0%	93.0%
Q43. Rating of Specialist	75.0%	78.6%	77.3%	100%	NA	NA	100%	60.0%	80.0%	72.7%	100%	57.1%	92.3%	60.0%	50.0%	79.2%	75.0%	76.9%
<b>Getting Needed Care (% A or U)</b>	<b>85.9%</b>	<b>83.9%</b>	<b>84.2%</b>	<b>87.5%</b>	<b>NA</b>	<b>NA</b>	<b>93.8%</b>	<b>84.7%</b>	<b>88.6%</b>	<b>78.4%</b>	<b>100%</b>	<b>88.0%</b>	<b>83.5%</b>	<b>80.9%</b>	<b>92.9%</b>	<b>84.1%</b>	<b>87.9%</b>	<b>81.5%</b>
Q10. Getting care, tests, or treatment	87.2%	89.1%	91.1%	75.0%	100%	0.0%	87.5%	89.5%	89.7%	84.0%	100%	88.5%	90.0%	81.8%	85.7%	88.2%	91.1%	86.1%
Q41. Getting specialist appointment	84.6%	78.6%	77.3%	100%	NA	NA	100%	80.0%	87.5%	72.7%	100%	87.5%	76.9%	80.0%	100%	80.0%	84.6%	76.9%
<b>Getting Care Quickly (% A or U)</b>	<b>82.7%</b>	<b>83.6%</b>	<b>87.7%</b>	<b>87.5%</b>	<b>NA</b>	<b>NA</b>	<b>93.8%</b>	<b>81.3%</b>	<b>79.1%</b>	<b>88.9%</b>	<b>78.6%</b>	<b>76.4%</b>	<b>88.3%</b>	<b>83.9%</b>	<b>25.0%</b>	<b>86.9%</b>	<b>77.8%</b>	<b>87.5%</b>
Q4. Getting urgent care	85.0%	91.7%	95.7%	100%	NA	NA	100%	87.5%	85.0%	91.7%	100%	70.0%	100%	88.9%	0.0%	93.3%	87.5%	87.5%
Q6. Getting routine care	80.5%	75.6%	79.7%	75.0%	100%	NA	87.5%	75.0%	73.2%	86.2%	57.1%	82.8%	76.7%	78.9%	50.0%	80.5%	68.2%	87.5% n
<b>Coordination of Care (Q35) (% A or U)</b>	<b>83.3%</b>	<b>93.8%</b>	<b>90.0%</b>	<b>50.0%</b>	<b>NA</b>	<b>NA</b>	<b>100%</b>	<b>80.0%</b>	<b>85.0%</b>	<b>100%</b>	<b>100%</b>	<b>60.0%</b>	<b>90.9%</b>	<b>100%</b>	<b>100%</b>	<b>88.0%</b>	<b>94.1%</b>	<b>80.0%</b>

% 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>	75	86	105	9^	2^	4^	13^	36	115	43	12^	44	60	43	16^	142	89	68
<b>Customer Service (% A or U)</b>	<b>94.1%</b>	<b>78.7%</b>	<b>87.5%</b>	<b>80.0%</b>	<b>NA</b>	<b>NA</b>	<b>100%</b>	<b>84.3%</b>	<b>83.8%</b>	<b>90.9%</b>	<b>90.0%</b>	<b>93.8%</b>	<b>76.2%</b>	<b>93.8%</b>	<b>75.0%</b>	<b>87.4%</b>	<b>82.6%</b>	<b>91.7%</b>
Q45. Provided information or help	88.2%	68.4%	80.0%	60.0%	NA	NA	100%	76.9%	76.0%	81.8%	80.0%	87.5%	66.7%	87.5%	50.0%	81.3%	73.9%	83.3%
Q46. Treated with courtesy and respect	100%	88.9%	95.0%	100%	NA	NA	100%	91.7%	91.7%	100%	100%	100%	85.7%	100%	100%	93.5%	91.3%	100%
<b>How Well Doctors Communicate (% A or U)</b>	<b>92.3%</b>	<b>91.3%</b>	<b>95.8%</b>	<b>62.5%</b>	<b>100%</b>	<b>NA</b>	<b>95.8%</b>	<b>90.8%</b>	<b>91.3%</b>	<b>92.9%</b>	<b>90.6%</b>	<b>90.7%</b>	<b>96.9%</b>	<b>89.1%</b>	<b>91.7%</b>	<b>92.4%</b>	<b>90.8%</b>	<b>95.8%</b>
Q27. Personal doctor explained things	94.4%	90.0%	94.3%	66.7%	100%	NA	100%	94.7%	90.9%	95.2%	87.5%	92.6%	95.8%	87.5%	83.3%	92.8%	89.5%	97.2%
Q28. Personal doctor listened carefully	94.3%	92.5%	98.1%	50.0%	100%	NA	83.3%	100%	96.3%	85.7%	87.5%	96.2%	100%	87.5%	100%	94.1%	97.4%	94.3%
Q29. Personal doctor showed respect	94.4%	97.5%	96.2%	100%	100%	NA	100%	100%	96.4%	95.2%	100%	92.6%	100%	93.8%	100%	95.7%	97.4%	94.4%
Q32. Personal doctor spent enough time	86.1%	85.0%	94.3%	33.3%	100%	NA	100%	68.4%	81.8%	95.2%	87.5%	81.5%	91.7%	87.5%	83.3%	87.0%	78.9%	97.2% n
<b>Other Measures</b>																		
Q48. Ease of filling out forms (% A or U)	92.0%	100% x	97.1%	100%	100%	100%	92.3%	88.6%	94.7%	100% f	100%	97.7%	96.6%	93.0%	100%	95.7%	94.3%	98.5%
Q7. Average number of visits to doctor's office or clinic	1.2	1.5	1.4	1.7	1.0	0.3	2.1	1.1	1.1	1.9	2.1	1.4	1.2	1.1	0.6	1.4	1.4	1.3
Q26. Average number of visits to personal doctor	1.1	1.1	1.1	0.6	1.0	0	0.9	1.0	1.1	1.2	1.8	1.3	0.8	1.1	0.8	1.1	1.1	1.1
Q42. Average number of specialists seen	1.2	2.0	1.4	2.0	NA	NA	4.0	1.8	1.3	2.1	6.0	1.1	1.4	2.2	1.5	1.6	1.5	1.7

% 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>	70	15 <sup>^</sup>	49	9 <sup>^</sup>	38	36	12 <sup>^</sup>	35	26	23	39	47	0 <sup>^</sup>	4 <sup>^</sup>	18 <sup>^</sup>	29	32
<b>Q51. Access to Prescription Medicines (% A or U)</b>	<b>94.0%</b>	<b>61.5%</b>	<b>92.3%</b>	<b>71.4%</b>	<b>96.0%</b>	<b>83.9%</b>	<b>75.0%</b>	<b>100%</b>	<b>75.0%</b>	<b>83.3%</b>	<b>89.7%</b>	<b>85.7%</b>	<b>---</b>	<b>100%</b>	<b>92.9%</b>	<b>80.0%</b>	<b>88.0%</b>
<b>Access to Specialized Services (% A or U)</b>	<b>81.2%</b>	<b>73.9%</b>	<b>83.0%</b>	<b>75.0%</b>	<b>86.9%</b>	<b>77.9%</b>	<b>53.3%</b>	<b>81.3%</b>	<b>85.9%</b>	<b>62.5%</b>	<b>81.4%</b>	<b>76.5%</b>	<b>---</b>	<b>NA</b>	<b>78.3%</b>	<b>70.2%</b>	<b>87.8%</b>
Q15. Ease of getting special medical equipment or devices	77.8%	100%	88.9%	100%	100%	87.5%	0.0%	80.0%	100%	50.0%	100%	71.4%	---	100%	100%	66.7%	100%
Q18. Ease of getting therapy	85.7%	80.0%	84.2%	100%	85.7%	81.3%	100%	88.9%	88.9%	75.0%	81.8%	86.7%	---	100%	75.0%	85.7%	85.7%
Q21. Ease of getting treatment or counseling	80.0%	41.7%	76.0%	25.0%	75.0%	65.0%	60.0%	75.0%	68.8%	62.5%	62.5%	71.4%	---	NA	60.0%	58.3%	77.8%
<b>FCC: Personal Doctor Who Knows Child (% Yes)</b>	<b>83.1%</b>	<b>57.8%</b>	<b>81.2%</b>	<b>49.2%</b>	<b>82.1%</b>	<b>75.6%</b>	<b>82.1%</b>	<b>88.0%</b>	<b>85.4%</b>	<b>61.3%</b>	<b>78.8%</b>	<b>79.0%</b>	<b>---</b>	<b>55.6%</b>	<b>78.1%</b>	<b>85.5%</b>	<b>83.9%</b>
Q33. Doctor talked about how child is feeling, growing, and behaving	73.9%	33.3%	71.8%	14.3%	75.0%	60.7%	75.0%	81.8%	56.3%	58.8%	70.4%	65.5%	---	33.3%	69.2%	75.0%	68.2%
Q38. Doctor understands how these conditions affect child's day-to-day life	87.8%	70.0%	86.1%	66.7%	85.7%	83.3%	85.7%	91.3%	100%	62.5%	83.3%	85.7%	---	66.7%	83.3%	94.1%	88.9%
Q39. Doctor understands how these conditions affect family's day-to-day life	87.5%	70.0%	85.7%	66.7%	85.7%	82.6%	85.7%	90.9%	100%	62.5%	82.6%	85.7%	---	66.7%	81.8%	87.5%	94.7%
<b>Q8. FCC: Getting Needed Information (% A or U)</b>	<b>84.8%</b>	<b>69.2%</b>	<b>83.7%</b>	<b>77.8%</b>	<b>79.2%</b>	<b>82.1%</b>	<b>85.7%</b>	<b>90.5%</b>	<b>82.4%</b>	<b>75.0%</b>	<b>72.4%</b>	<b>90.0%</b>	<b>---</b>	<b>100%</b>	<b>92.9%</b>	<b>64.7%</b>	<b>90.9%</b>
<b>Coordination of Care for CCC (% Yes)</b>	<b>73.4%</b>	<b>69.0%</b>	<b>66.9%</b>	<b>75.0%</b>	<b>75.0%</b>	<b>76.3%</b>	<b>66.7%</b>	<b>83.3%</b>	<b>77.3%</b>	<b>64.9%</b>	<b>85.7%</b>	<b>66.7%</b>	<b>---</b>	<b>83.3%</b>	<b>68.6%</b>	<b>80.0%</b>	<b>60.3%</b>
Q13. Obtaining help from doctors or health providers in contacting child's school or daycare	91.7%	66.7%	80.0%	100%	100%	100%	33.3%	100%	100%	71.4%	100%	83.3%	---	100%	80.0%	100%	66.7%
Q24. Obtaining help coordinating child's care among different providers or services	55.2%	71.4%	53.8%	50.0%	50.0%	52.6%	100%	66.7%	54.5%	58.3%	71.4%	50.0%	---	66.7%	57.1%	60.0%	53.8%



# 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>	46	38	60	4 <sup>^</sup>	1 <sup>^</sup>	0 <sup>^</sup>	8 <sup>^</sup>	23	46	37	8 <sup>^</sup>	20	20	34	12 <sup>^</sup>	71	35	46
<b>Q51. Access to Prescription Medicines (% A or U)</b>	<b>91.7%</b>	<b>81.5%</b>	<b>86.7%</b>	<b>75.0%</b>	<b>100%</b>	---	<b>100%</b>	<b>88.9%</b>	<b>84.4%</b>	<b>90.3%</b>	<b>83.3%</b>	<b>91.7%</b>	<b>92.3%</b>	<b>83.3%</b>	<b>90.0%</b>	<b>86.5%</b>	<b>96.0%</b>	<b>80.0%</b>
<b>Access to Specialized Services (% A or U)</b>	<b>89.6%</b>	<b>69.4%</b>	<b>86.2%</b>	<b>66.7%</b>	<b>NA</b>	---	<b>66.7%</b>	<b>70.0%</b>	<b>81.2%</b>	<b>81.1%</b>	<b>88.9%</b>	<b>45.2%</b>	<b>90.0%</b>	<b>80.8%</b>	<b>88.9%</b>	<b>79.0%</b>	<b>73.1%</b>	<b>85.3%</b>
Q15. Ease of getting special medical equipment or devices	100%	85.7%	100%	100%	NA	---	50.0%	75.0%	100%	85.7%	100%	0.0%	100%	100%	100%	88.9%	75.0%	100%
Q18. Ease of getting therapy	93.8%	62.5%	93.3%	100%	100%	---	50.0%	60.0%	76.9%	90.9%	66.7%	85.7%	100%	77.8%	66.7%	85.7%	62.5%	93.3%
Q21. Ease of getting treatment or counseling	75.0%	60.0%	65.4%	0.0%	0.0%	---	100%	75.0%	66.7%	66.7%	100%	50.0%	70.0%	64.7%	100%	62.5%	81.8%	62.5%
<b>FCC: Personal Doctor Who Knows Child (% Yes)</b>	<b>79.7%</b>	<b>80.1%</b>	<b>80.5%</b>	<b>100%</b>	<b>100%</b>	---	<b>67.5%</b>	<b>77.1%</b>	<b>78.8%</b>	<b>80.1%</b>	<b>83.3%</b>	<b>76.8%</b>	<b>70.5%</b>	<b>84.9%</b>	<b>74.6%</b>	<b>80.5%</b>	<b>81.7%</b>	<b>77.4%</b>
Q33. Doctor talked about how child is feeling, growing, and behaving	72.4%	61.5%	70.0%	100%	100%	---	50.0%	64.7%	69.0%	65.4%	50.0%	66.7%	75.0%	68.0%	66.7%	67.4%	73.9%	61.3%
Q38. Doctor understands how these conditions affect child's day-to-day life	85.2%	87.5%	84.6%	100%	100%	---	85.7%	83.3%	81.0%	89.7%	100%	81.8%	63.6%	95.7%	85.7%	86.0%	86.7%	85.3%
Q39. Doctor understands how these conditions affect family's day-to-day life	81.5%	91.3%	86.8%	100%	100%	---	66.7%	83.3%	86.4%	85.2%	100%	81.8%	72.7%	90.9%	71.4%	88.1%	84.6%	85.7%
<b>Q8. FCC: Getting Needed Information (% A or U)</b>	<b>83.3%</b>	<b>82.1%</b>	<b>86.4%</b>	<b>100%</b>	<b>NA</b>	---	<b>66.7%</b>	<b>85.7%</b>	<b>73.3%</b>	<b>92.9%</b>	<b>83.3%</b>	<b>76.9%</b>	<b>83.3%</b>	<b>88.5%</b>	<b>80.0%</b>	<b>83.3%</b>	<b>80.0%</b>	<b>83.8%</b>
<b>Coordination of Care for CCC (% Yes)</b>	<b>77.8%</b>	<b>68.8%</b>	<b>75.5%</b>	<b>100%</b>	<b>0.0%</b>	---	<b>50.0%</b>	<b>80.8%</b>	<b>78.8%</b>	<b>66.7%</b>	<b>0.0%</b>	<b>64.3%</b>	<b>87.5%</b>	<b>67.8%</b>	<b>75.0%</b>	<b>72.0%</b>	<b>85.0%</b>	<b>68.8%</b>
Q13. Obtaining help from doctors or health providers in contacting child's school or daycare	100%	75.0%	91.7%	100%	NA	---	100%	88.9%	88.9%	83.3%	NA	85.7%	100%	80.0%	100%	83.3%	100%	87.5%
Q24. Obtaining help coordinating child's care among different providers or services	55.6%	62.5%	59.3%	100%	100%	---	0.0%	72.7%	68.8%	50.0%	100%	42.9%	75.0%	55.6%	50.0%	60.7%	70.0%	50.0%



# Supplemental Questions

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Results for Supplemental Questions

- Western Sky Community Care (Centene NM)





# Supplemental Questions - General Population

Survey Item	Opt-out Responses <i>Out of 163 Total Respondents</i>	Category Responses <i>Based on Valid Responses Per Question</i>					Plan Summary Rate Score			2021 SPH BoB Summary Rate Score		
		Yes	No	Very satisfied	Satisfied	Neither dissatisfied nor satisfied	Dissatisfied	Very dissatisfied	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?		16.7%	83.3%						---	(n=13) <sup>^</sup>	(n = 156)	---
Q79. How satisfied are you with the help you got to coordinate your child's care in the last 6 months?		39.3%	42.7%	13.3%	3.3%	1.3%			---	(n=12) <sup>^</sup>	(n = 150)	---
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?		24.7%	75.3%						---	---	(n = 150)	---
Q81. Did your child's Care Coordinator sit down with you and create a Plan of Care?		25.7%	74.3%						---	---	(n = 35)	---
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?		42.9%	45.7%	11.4%	0.0%	0.0%			---	---	(n = 35)	---

**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**

<sup>^</sup>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		
<b>Q78. In the last 6 months, who helped to coordinate your child's care?</b>						
	<b>Valid Responses</b>	<b>Base</b>	---	(n=12)^	(n=140)	---
	Someone from your child's health plan		---	0.0%	4.3%	---
	Someone from your child's doctor's office or clinic		---	50.0%	17.1%	---
	Someone from another organization		---	0.0%	1.4%	---
	A friend or family member		---	8.3%	5.0%	---
	You		---	41.7%	72.1%	---

**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>	134	25	74	13 <sup>^</sup>	129	25	6 <sup>^</sup>	124	28	8 <sup>^</sup>	66	97	0 <sup>^</sup>	31	41	50	39
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)	17.7%	13.0%	29.4%	0.0%	15.9%	20.0%	25.0%	17.4%	11.1%	28.6%	21.5%	13.2%	---	13.8%	23.1%	12.0%	18.4%
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)	86.4%	56.5%	88.1%	45.5%	81.7%	84.0%	75.0%	82.2%	83.3%	71.4%	74.2%	87.5% Q	---	77.8%	78.9%	87.5%	81.1%
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)	27.0%	13.6%	22.4%	0.0%	26.7%	20.0%	0.0%	24.6%	33.3%	0.0%	14.3%	32.2% Q	---	14.8%	35.9%	25.0%	19.4%
Q81. Did your child's Care Coordinator sit down with you and create a Plan of Care? (% Yes)	25.0%	33.3%	26.7%	NA	20.0%	60.0%	NA	18.5%	50.0%	NA	37.5%	22.2%	---	25.0%	28.6%	27.3%	16.7%
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)	93.8%	33.3%	85.7%	NA	86.7%	100%	NA	88.9%	87.5%	NA	100%	85.7%	---	75.0%	92.3%	90.9%	85.7%

A letter and green font indicates that result is significantly higher than the corresponding column. <sup>^</sup>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>	75	86	105	9 <sup>^</sup>	2 <sup>^</sup>	4 <sup>^</sup>	13 <sup>^</sup>	36	115	43	12 <sup>^</sup>	44	60	43	16 <sup>^</sup>	142	89	68
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)	17.6%	15.9%	16.3%	33.3%	0.0%	25.0%	38.5%	11.8%	15.2%	21.4%	33.3%	20.9% <sup>k</sup>	18.6% <sup>k</sup>	4.8%	12.5%	17.3%	19.5%	13.2%
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)	84.5%	79.7%	77.8%	77.8%	100%	75.0%	92.3%	87.9%	87.0% <sup>g</sup>	70.0%	83.3%	78.0%	82.1%	85.4%	81.3%	82.7%	86.9%	75.4%
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? (% Yes)	23.9%	25.3%	23.5%	33.3%	0.0%	25.0%	46.2%	18.2%	22.9%	28.2%	9.1%	26.8%	32.1%	16.7%	12.5%	26.1%	21.7%	28.8%
Q81. Did your child's Care Coordinator sit down with you and create a Plan of Care? (% Yes)	29.4%	22.2%	21.7%	33.3%	NA	0.0%	33.3%	33.3%	25.0%	27.3%	100%	27.3%	17.6%	33.3%	50.0%	24.2%	29.4%	22.2%
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)	94.1%	83.3%	81.8%	100%	NA	100%	100%	100%	84.0%	100%	100%	100%	76.5%	100%	50.0%	90.9%	88.9%	88.2%

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



# Supplemental Questions – CCC Population

Survey Item	Opt-out Responses <i>Out of 86 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=7) <sup>^</sup>	(n = 82)	---
				42.7%	57.3%				---	<b>42.9%</b>	<b>42.7%</b>	---
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=6) <sup>^</sup>	(n = 78)	---
				46.2%	38.5%	11.5%	1.3%	2.6%	---	<b>83.3%</b>	<b>84.6%</b>	---
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 = 79)	---
				30.4%	69.6%				---	---	<b>30.4%</b>	---
Q81. Did your child's Care Coordinator sit down with you and create a Plan of Care?				<u>Yes</u>	<u>No</u>				---	---	(n = 22)	---
				40.9%	59.1%				---	---	<b>40.9%</b>	---
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 = 21)	---
				47.6%	47.6%	0.0%	4.8%	0.0%	---	---	<b>95.2%</b>	---

**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**

<sup>^</sup>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?						
	<b>Valid Responses</b>	<b>Base</b>	---	(n=7)^	(n=76)	---
	Someone from your child's health plan		---	14.3%	5.3%	---
	Someone from your child's doctor's office or clinic		---	28.6%	23.7%	---
	Someone from another organization		---	0.0%	5.3%	---
	A friend or family member		---	0.0%	6.6%	---
	You		---	57.1%	59.2%	---

**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>	70	15 <sup>^</sup>	49	9 <sup>^</sup>	38	36	12 <sup>^</sup>	35	26	23	39	47	0 <sup>^</sup>	4 <sup>^</sup>	18 <sup>^</sup>	29	32
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>	40.9%	53.3%	48.9%	11.1%	42.1%	42.9%	44.4%	41.2%	46.2%	40.0%	41.0%	44.2%	---	50.0%	27.8%	46.4%	48.4%
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>	90.5%	57.1%	86.7%	55.6%	91.7%	78.8%	77.8%	93.9%	87.5%	63.2%	75.7%	92.7% <sup>Y</sup>	---	50.0%	88.2%	85.2%	89.7%
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>	32.3%	23.1%	38.3%	12.5%	32.4%	35.3%	0.0%	35.3%	32.0%	22.2%	28.9%	31.7%	---	50.0%	38.9%	30.8%	23.3%
Q81. Did your child's Care Coordinator sit down with you and create a Plan of Care? <i>(% Yes)</i>	42.1%	33.3%	41.2%	0.0%	36.4%	45.5%	NA	54.5%	28.6%	25.0%	50.0%	33.3%	---	100%	14.3%	71.4%	16.7%
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? <i>(% Very satisfied or Satisfied)</i>	94.7%	100%	93.8%	100%	100%	90.9%	NA	100%	100%	66.7%	100%	92.3%	---	100%	100%	100%	85.7%

A letter and green font indicates that result is significantly higher than the corresponding column. <sup>^</sup>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>	46	38	60	4 <sup>^</sup>	1 <sup>^</sup>	0 <sup>^</sup>	8 <sup>^</sup>	23	46	37	8 <sup>^</sup>	20	20	34	12 <sup>^</sup>	71	35	46
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)	35.6%	51.4%	35.0%	75.0%	100%	---	50.0%	63.6%	50.0%	35.1%	50.0%	40.0%	40.0%	42.4%	33.3%	44.3%	48.6%	37.0%
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)	86.7%	81.8%	82.5%	100%	100%	---	87.5%	95.0%	90.5%	80.0%	71.4%	85.0%	73.7%	93.5%	91.7%	83.3%	93.9% w	77.3%
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)	28.9%	32.4%	24.1%	50.0%	0.0%	---	50.0%	38.1%	22.0%	37.8%	28.6%	30.0%	26.3%	34.4%	50.0%	26.9%	30.3%	31.1%
Q81. Did your child's Care Coordinator sit down with you and create a Plan of Care? (% Yes)	38.5%	44.4%	30.8%	0.0%	NA	---	75.0%	57.1%	33.3%	46.2%	100%	33.3%	50.0%	30.0%	33.3%	43.8%	50.0%	33.3%
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)	91.7%	100%	92.3%	100%	NA	---	100%	100%	100%	92.3%	100%	100%	100%	88.9%	83.3%	100%	100%	91.7%

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





# Appendix: Correlation Analyses

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## Plan Specific Correlations

- Western Sky Community Care (Centene NM)

## Highest Correlations

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

### With Health Care Rating

<b>Q36</b>	Personal doctor overall	0.5354
<b>Q10</b>	Got care/tests/treatment	0.5170
<b>Q29</b>	Dr. showed respect	0.5081
<b>Q27</b>	Dr. explained things	0.4818
<b>Q49</b>	Health plan overall	0.4817
<b>Q28</b>	Dr. listened carefully	0.4486
<b>Q35</b>	Dr. informed about care	0.4405
<b>Q31</b>	Dr. explained things for child	0.3875
<b>Q4</b>	Got urgent care	0.3706
<b>Q43</b>	Specialist overall	0.3348

### With Personal Doctor Rating

<b>Q28</b>	Dr. listened carefully	0.5397
<b>Q9</b>	Health care overall	0.5354
<b>Q29</b>	Dr. showed respect	0.5121
<b>Q43</b>	Specialist overall	0.4941
<b>Q41</b>	Got specialist appt.	0.4595
<b>Q35</b>	Dr. informed about care	0.4082
<b>Q31</b>	Dr. explained things for child	0.3129
<b>Q27</b>	Dr. explained things	0.3060
<b>Q49</b>	Health plan overall	0.2513
<b>Q32</b>	Dr. spent enough time	0.2297

### With Specialist Rating

<b>Q4</b>	Got urgent care	0.8807
<b>Q32</b>	Dr. spent enough time	0.6811
<b>Q31</b>	Dr. explained things for child	0.5960
<b>Q41</b>	Got specialist appt.	0.5595
<b>Q79</b>	Satisfied with help to coordinate care	0.5547
<b>Q28</b>	Dr. listened carefully	0.5535
<b>Q49</b>	Health plan overall	0.4995
<b>Q36</b>	Personal doctor overall	0.4941
<b>Q27</b>	Dr. explained things	0.4134
<b>Q10</b>	Got care/tests/treatment	0.3393



# Appendix: Flowchart



Understanding Relative Performance of Composite Measures

- Western Sky Community Care (Centene NM)

# 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.

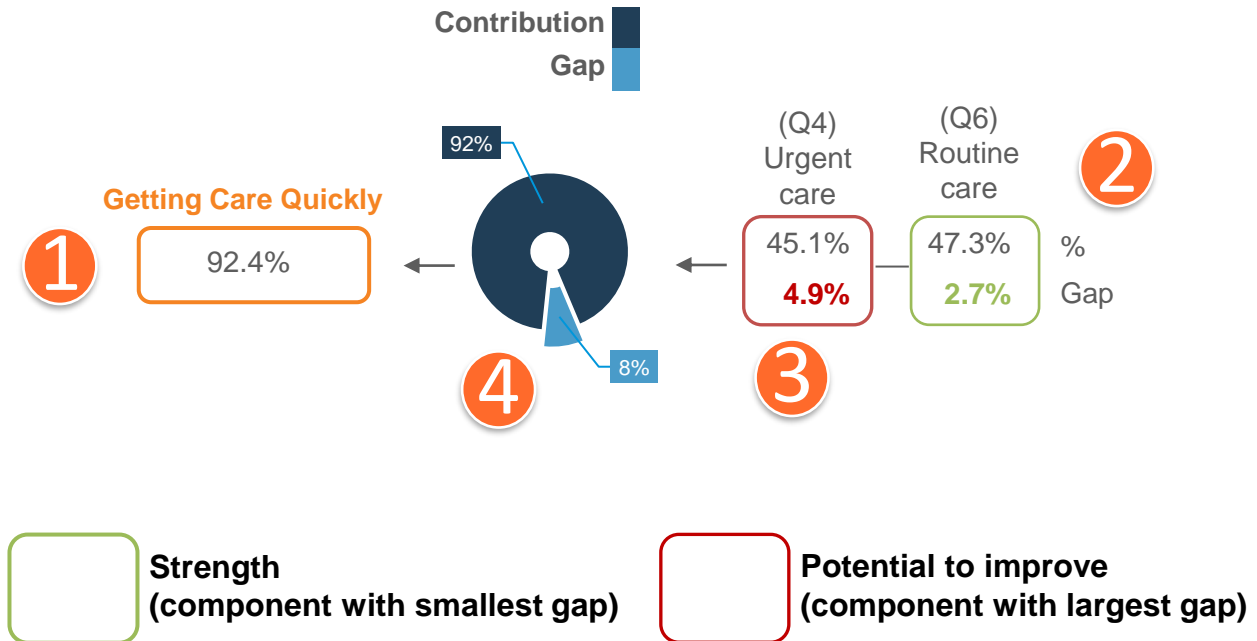
$$\frac{\text{Plan Score}}{\text{Max Score}} \times \frac{\text{Maximum Contribution}}{\text{Actual Contribution}} = \frac{\text{Maximum Contribution} - \text{Actual Contribution}}{\text{Actual Contribution}} = \text{Gap}$$

### Q6 Example:

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

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

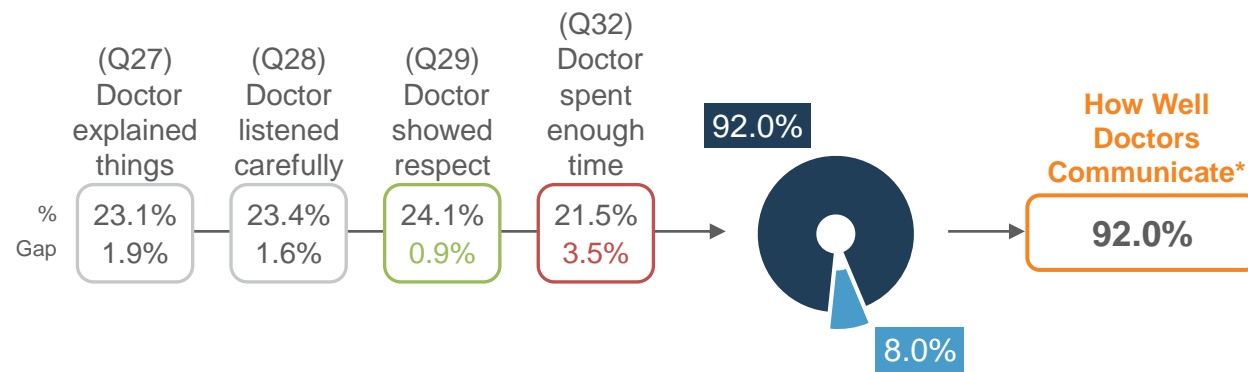
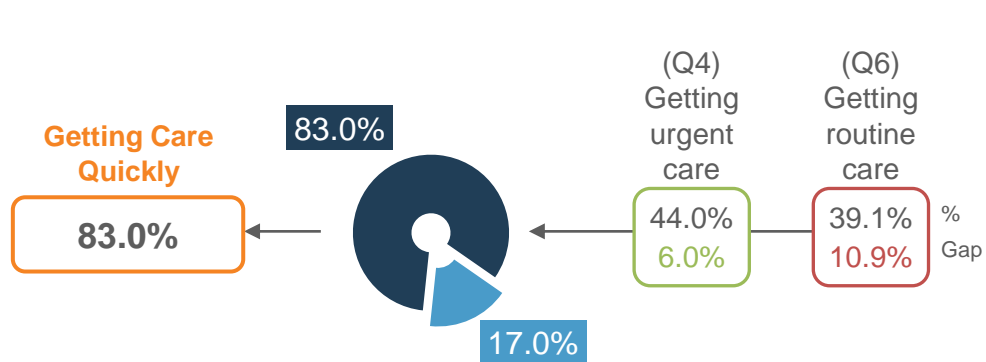
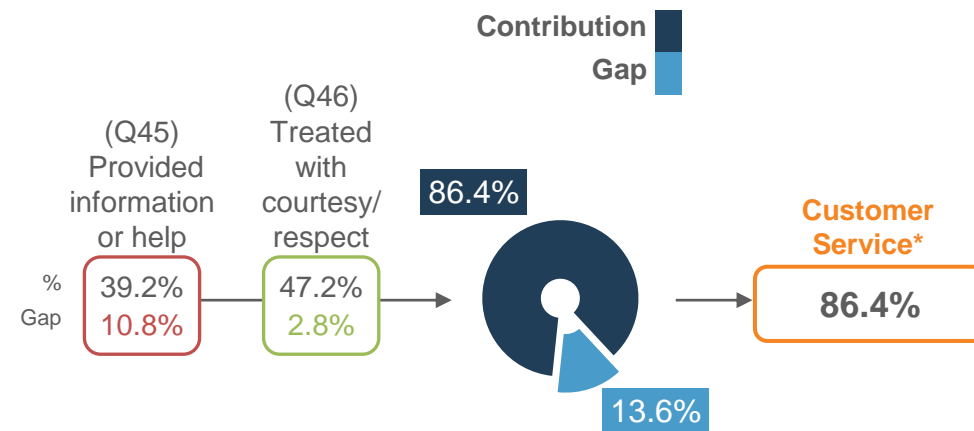
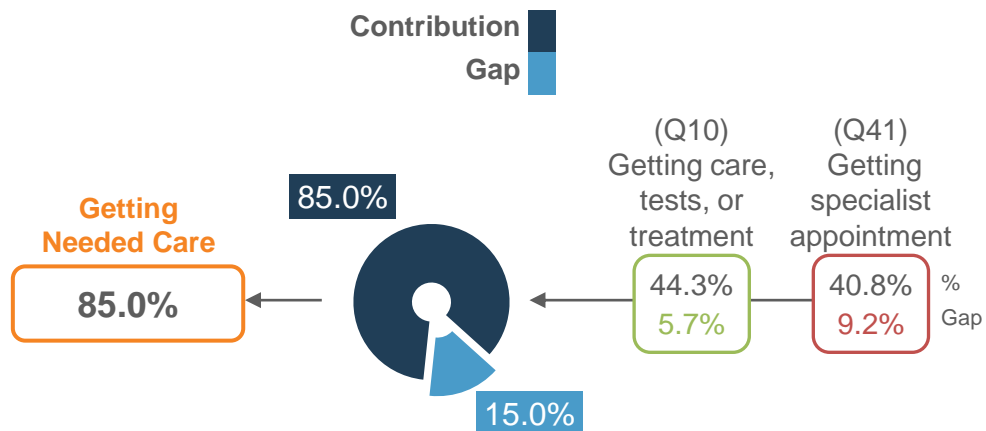
- 4 For the pie chart, the dark blue is the sum of the Actual Contributions and the light blue slice is the sum of the Gaps.



# 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

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Estimated NCQA Plan Ratings and Frequency Distributions

- Western Sky Community Care (Centene NM)



# 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 (10<sup>th</sup>, 33<sup>rd</sup>, 67<sup>th</sup> and 90<sup>th</sup>) into scores ranging from 1 to 5 (in increments of 0.5), where 5 is the highest score and 1 is the lowest. 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 <sup>th</sup> Percentile	10 <sup>th</sup> – 32 <sup>rd</sup> Percentile	33 <sup>rd</sup> – 66 <sup>th</sup> Percentile	67 <sup>th</sup> – 90 <sup>th</sup> Percentile	>90 <sup>th</sup> Percentile

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.

## 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*
<b>PATIENT EXPERIENCE</b>		
<b>Getting Care</b>		
Getting Needed Care (Usually + Always)	Getting care easily	1.5
Getting Care Quickly (Usually + Always)	Getting care quickly	1.5
<b>Satisfaction With Plan Physicians</b>		
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
<b>Satisfaction With Plan Services</b>		
Rating of Health Plan (9 + 10)	Rating of health plan	1.5
<b>PREVENTION</b>		
<b>Children and Adolescent Well-Care</b>		
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
<b>Women's Reproductive Health</b>		
PPC Prenatal and Postpartum Care—Timeliness of Prenatal Care	Prenatal checkups	1
Prenatal and Postpartum Care—Postpartum Care	Postpartum care	1
<b>Cancer Screening</b>		
BCS Breast Cancer Screening	Breast cancer screening	1
CCS Cervical Cancer Screening	Cervical cancer screening	1
<b>Other Preventive Services</b>		
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](https://www.ncqa.org/wp-content/uploads/2020/12/20201218_2021_List_of_Required_Performance_Measures.pdf)

NCQA 2020



# Estimated NCQA Plan Ratings - General Population

	2021 VALID N	2021 SCORE	SCORE DEFINITION	QC PERCENTILE RANK	SPH ESTIMATED RATING	WEIGHT
<b>CONSUMER SATISFACTION</b>					<b>2.5</b>	
GETTING CARE					NA	
Getting Needed Care	57 <sup>^</sup>	85.0%	Usually or Always	35 <sup>th</sup>	NA	1.5
Getting Care Quickly	60 <sup>^</sup>	83.0%	Usually or Always	6 <sup>th</sup>	NA	1.5
<b>SATISFACTION WITH PLAN PHYSICIANS</b>					<b>2.0</b>	
Rating of Personal Doctor	129	76.0%	9 or 10	25 <sup>th</sup>	2.0	1.5
Rating of Specialist	26 <sup>^</sup>	61.5%	9 or 10	<5 <sup>th</sup>	NA	1.5
Rating of Health Care	87 <sup>^</sup>	75.9%	9 or 10	78 <sup>th</sup>	NA	1.5
Coordination of Care	29 <sup>^</sup>	89.7%	Usually or Always	78 <sup>th</sup>	NA	1.5
<b>SATISFACTION WITH PLAN SERVICES</b>					<b>3.0</b>	
Rating of Health Plan	159	74.2%	9 or 10	62 <sup>nd</sup>	3.0	1.5

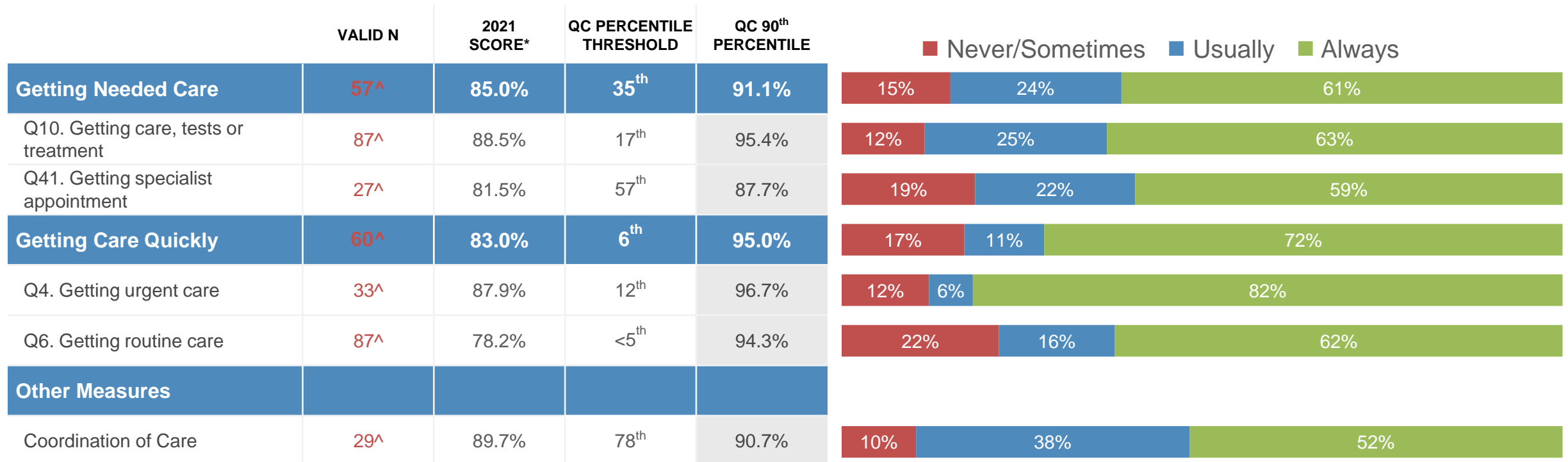
**NOTE** NCQA will assign a measure result of NA to overall ratings or composites with a denominator (i.e., the average number of responses across all questions used to calculate the composite) less than 100.



# Global Proportions - General Population

## GLOBAL PROPORTIONS SCORING AND ACCREDITATION

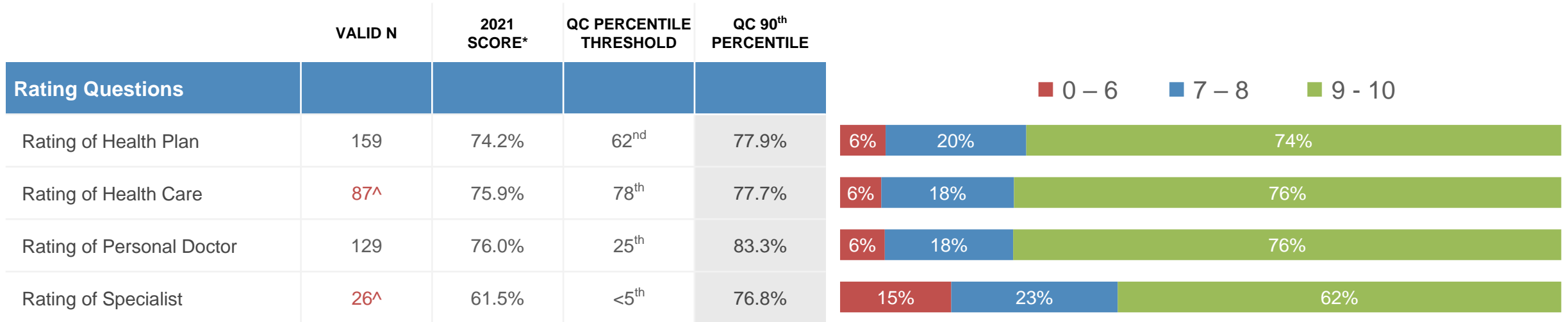
The graphical presentation of frequency distributions, including scores for composites and rating questions are shown on these pages. In addition, the measure's percentile threshold when compared to the 2020 NCQA 90th percentile benchmark is shown. The 90th percentile is the standard for achieving the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

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- Western Sky Community Care (Centene NM)



# 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 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.”



# 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.

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>

## 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

## 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 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 CO<sub>2</sub>.”

“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.**”

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 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.”

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



# 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.**”

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

## 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 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.”

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



## 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

- Western Sky Community Care (Centene NM)



**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 Western Sky Community 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 (If Yes, please answer the following two questions)
- No

**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.**



# SPH Solution Portfolio Built on Innovative Platform



## LISTEN

We offer 51 surveys and market research offerings via full scale omni-channel outreach



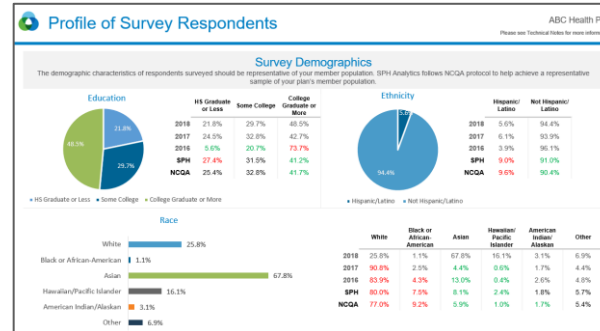
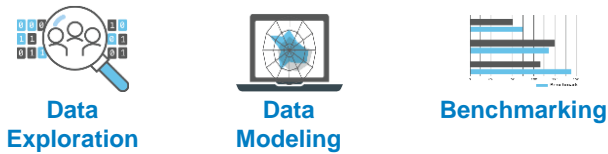
Survey Solutions Member Experience	Survey Solutions Patient Experience	Survey Solutions Medical Practice	Qualitative Solutions
HEDIS CAHPS	HCAHPS	CG CAHPS	Focus Groups
Medicare CAHPS	OAS CAHPS	Medical Practice Express	Online Communities
Medicare HOS	ACO CAHPS	PCMH	In-depth Interviews
QHP Enrollee	CAHPS 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		

LISTEN

Broadest portfolio of healthcare market research & widest set of modalities

## ANALYZE

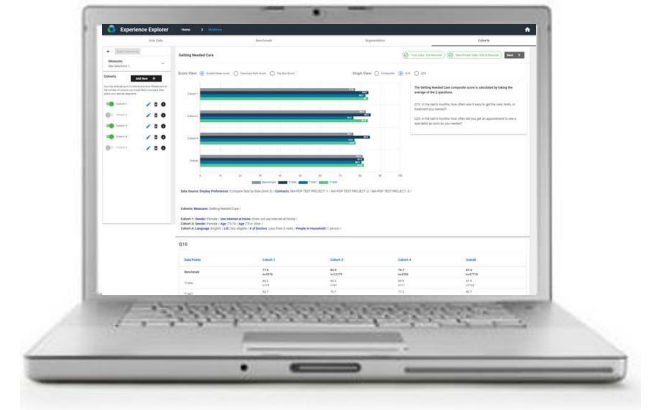
Our analytics offerings include 7 descriptive and predictive solutions built on our Nexus Platform



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	Health Care Engagement Index™ (HCEI™)	Rx Adherence and MTM
		Provider Satisfaction with Network	Provider Access	Voice of Other Stakeholders	Performance Improvement Solutions	New Member Welcome
		Provider Satisfaction with Health Plan	Provider Verification	AHRQ Patient Safety Survey (SOPS)	Scores / Ratings Improvement Consulting	Retention and Renewal
				Employee Satisfaction		Discharge Phone Calls
				Broker / Employer Experience		

LISTEN

ANALYZE

MOTIVATE