

# 2016 Medicaid Adult CAHPS® 5.0H

## At-A-Glance Report



Health Partners Plans

Project Number(s): 4109174

Current data as of: 06/16/2016

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## 1. Executive Summary

SPH Analytics, a National Committee for Quality Assurance (NCQA) Certified Healthcare Effectiveness Data and Information Set (HEDIS®)<sup>1</sup> Survey Vendor, was selected by Health Partners Plans to conduct its 2016 Consumer Assessment of Healthcare Providers and Systems (CAHPS®)<sup>2</sup> 5.0H Medicaid Adult Member Satisfaction Survey. This At-A-Glance report is designed to give you a summary view of those CAHPS® results.<sup>3</sup> SPH Analytics collected 331 valid surveys from the eligible member population, yielding a response rate of 23.8%.<sup>4</sup>

### CAHPS® 5.0H Medicaid Adult Survey

Topics included in the CAHPS® 5.0H Medicaid Adult Survey are:

- Getting Needed Care
- Getting Care Quickly
- How Well Doctors Communicate
- Customer Service
- Shared Decision Making
- Health Promotion and Education
- Coordination of Care
- Providing Needed Information
- Ease of Filling out Forms
- Health Care, Provider, and Plan Ratings
- Effectiveness of Care Measures

Throughout this report, results are shown as “Summary Rates.” Summary Rates represent the percentage of respondents who answer in the most positive way, as defined by NCQA.

The *Getting Needed Care* composite measures member experiences when attempting to get care, tests, or treatment needed and appointments to see specialists as soon as needed in the last six months (Questions 14 and 25). The Summary Rate represents the percentage of respondents reporting “Always” or “Usually.”

The *Getting Care Quickly* composite measures member experiences with receiving care (when care is needed right away) and getting appointments for check-ups or routine care as soon as needed (Questions 4 and 6). The Summary Rate represents the percentage of respondents indicating “Always” or “Usually.”

The *How Well Doctors Communicate* composite measures how well the providers explain things and listen, spend enough time with, and show respect for what members have to say (Questions 17-20). The Summary Rate represents the percentage of respondents reporting “Always” or “Usually.”

<sup>1</sup> HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

<sup>2</sup> CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

<sup>3</sup> The 2015 Public Report benchmark is derived from NCQA's Quality Compass® benchmark and calculated by SPH Analytics. The 2015 Public Report benchmark is the mean of plan samples that submitted their data to NCQA in 2015 and allowed their scores to be reported publicly. Please note that any analyses, interpretations, or conclusions based upon the Public Report benchmark are solely that of the author (SPH Analytics) and NCQA specifically disclaims responsibility for any such analyses, interpretations, or conclusions.

<sup>4</sup> Please note that the CAHPS® survey is eligible to be conducted from January through May 2016.

The *Customer Service* composite measures member experiences with getting information from as well as treatment by customer service staff in the last six months (Questions 31 and 32). The Summary Rate represents the percentage of members who answered “Always” or “Usually.”

The *Shared Decision Making* composite measures if the member’s doctor or health provider spoke with him or her about reasons one might want to take a medicine and the reasons one might not want to take a medicine (Questions 10 and 11). Additionally, the composite gauges if the member’s doctor or health provider asked which choice he or she thought was best when talking about starting or stopping prescription medications (Question 12). The Summary Rate represents the percentage of respondents answering “Yes.”

The *Health Promotion and Education* measure evaluates member experiences with doctor or health provider discussions of specific things to do to prevent illnesses in the last six months (Question 8). The Summary Rate represents the percentage of respondents reporting “Yes.”

The *Coordination of Care* measure evaluates the member’s perception that his or her personal doctor seemed informed and up-to-date about the care received from other doctors and health providers in the last six months (Question 22). The Summary Rate represents the percentage of members who responded “Always” or “Usually.”

The *Providing Needed Information* attribute evaluates the member’s experiences with getting information through written materials or the Internet (Question 29). The Summary Rate represents the percentage of respondents indicating “Always” or “Usually.”

The *Ease of Filling out Forms* attribute evaluates how often forms received from the member’s health plan were easy to fill out (Question 34). The Summary Rate represents the percentage of respondents indicating “Always” or “Usually.”<sup>5</sup>

There are four questions with responses scaled 0 to 10 in the CAHPS® 5.0H survey: *Rating of Health Care* (Q13), *Rating of Personal Doctor* (Q23), *Rating of Specialist* (Q27), and *Rating of Health Plan* (Q35), where zero represents “worst possible” and ten represents “best possible.” The Summary Rate represents the percentage of respondents who rated the question an “8,” “9,” or “10.”

The *Effectiveness of Care* measures cover the following: *Aspirin Use and Discussion*, *Medical Assistance with Smoking and Tobacco Use Cessation*, and *Flu Vaccinations for Adults Ages 18–64*. All *Effectiveness of Care* measures, with the exception of the *Flu Vaccinations for Adults Ages 18–64*, are calculated on a rolling average methodology over a period of two years.

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<sup>5</sup> Please note that members who responded “No” to Q33 are included in “Always” of Q34, per NCQA HEDIS 2016 guidelines.

The *Aspirin Use and Discussion* measures assess the following two components:

- 1) The percentage of members<sup>6</sup> who *are currently taking aspirin*, and
- 2) The percentage of members<sup>7</sup> who *discussed the risks and benefits of using aspirin with a doctor or other health provider*.

The Summary Rate for the *Aspirin Use* measure is the proportion of members who indicate that they currently take aspirin daily or every other day, while the Summary Rate for the *Discussing Aspirin Risks and Benefits* measure is the proportion of members who indicate that their doctor or other provider discussed the risks and benefits of aspirin use to prevent heart attack or stroke.

The *Medical Assistance with Smoking and Tobacco Use Cessation* measures evaluate the following three components:

- 1) The percentage of members 18 years and older who were current smokers or tobacco users and who *received advice to quit* during the survey measurement period,
- 2) The percentage of members 18 years of age and older who were current smokers or tobacco users and who *discussed or were recommended cessation medications* during the survey measurement period, and
- 3) The percentage of members 18 years of age and older who were current smokers or tobacco users and who *discussed or were provided cessation methods or strategies* during the survey measurement period.

The Summary Rate for the *Advising Smokers and Tobacco Users to Quit* measure is the percentage of members who indicated that they “Sometimes,” “Usually,” or “Always” received counsel to quit smoking or using tobacco from a doctor or other health practitioner. The Summary Rates for the *Discussing Cessation Medications* and *Discussing Cessation Strategies* measures are the percentage of members who indicated that their doctor or health provider “Sometimes,” “Usually,” or “Always” recommended cessation medications or provided cessation methods or strategies.

The *Flu Vaccinations for Adults Ages 18-64* measure is the percentage of members 18-64 years of age who received a flu shot or flu spray in the nose since July 1, 2015. The Summary Rate for the *Flu Vaccination for Adults Ages 18-64* measure is the proportion of respondents between the ages of 18-64 who responded “Yes” to the question, “Have you had either a flu shot or flu spray in the nose since July 1, 2015?” Although the *Flu Vaccinations for Adults Ages 18-64* is considered to be an Effectiveness of Care measure, NCQA rolling average methodology will not be used to calculate results.

<sup>6</sup> Members eligible for inclusion in the *Aspirin Use* measure are as follows: 1) Women 55-79 years of age with at least two risk factors for cardiovascular disease, 2) Men 45-64 years of age with at least one risk factor for cardiovascular disease, and 3) Men 65-79 years of age, regardless of risk factors.

<sup>7</sup> Members eligible for inclusion in the *Discussing Aspirin Risks and Benefits* measure are as follows: 1) Women 55-79 years of age, and 2) Men 45-79 years of age.

**Three-Point Scores**

For accreditation assessment purposes, NCQA converts certain CAHPS® 5.0H results into Three-Point Scores. In Three-Point scoring, a value of 1, 2, or 3 is assigned to each question response category, and a numeric average is computed based upon the valid responses for each question. The four rating questions (*Health Plan*, *Health Care*, *Personal Doctor*, and *Specialist*) and the following composites are evaluated: *Getting Needed Care*, *Getting Care Quickly*, and *Customer Service*.

“Your Three-Point Scores” are your plan’s results. For comparison purposes, NCQA’s national benchmark (the 90th percentile) and national thresholds (the 75th, 50th, and 25th percentiles) are also provided for your review. Thresholds are based on HEDIS/CAHPS® benchmark data from other Medicaid adult survey results.



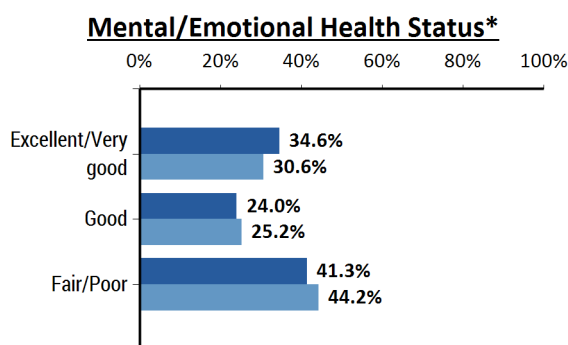
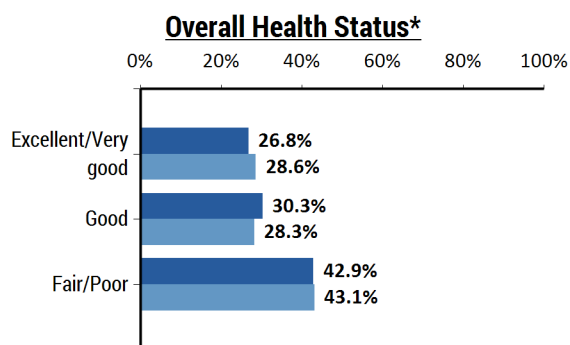
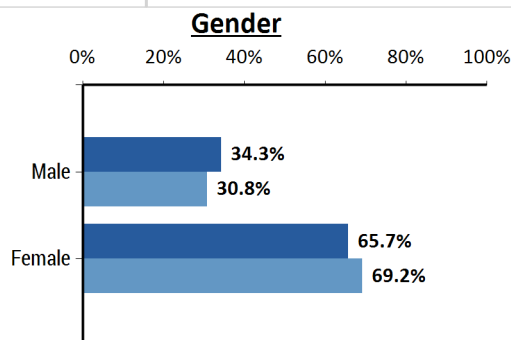
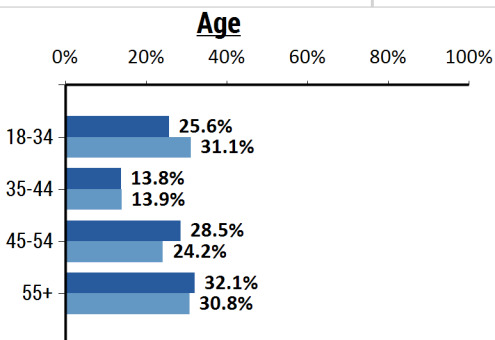
# Medicaid Adult CAHPS // Profile of Survey Respondents

## Trend Comparison

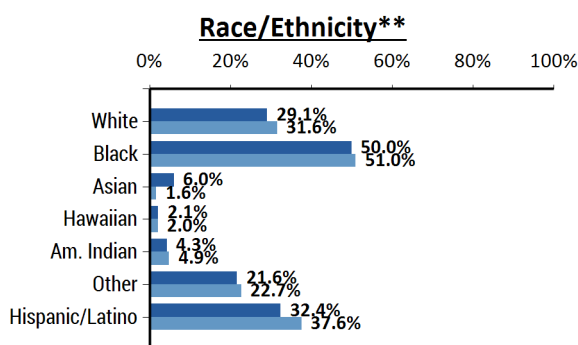
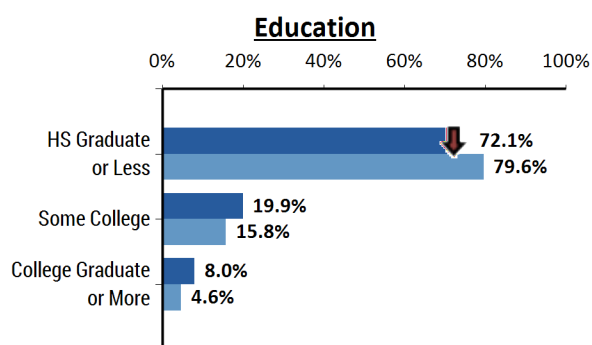
Health Partners Plans

2016 2015

Sample Size	Total Survey Returns	Response Rate
1418	331	23.8%



\* Overall and Mental/Emotional Health Status are defined by survey respondent.



\*\* Race/Ethnicity figures will not equal 100% because they are separate questions.

Significance Testing "↑" denotes the results that were found when hypothesis tests were conducted to determine if the percentage is higher for 2016 results when compared to 2015 results. "↓" denotes the results that were found when hypothesis tests were conducted to determine if the percentage is lower for 2016 results when compared to 2015 results. "Not Sig." results, which denotes that there was insufficient support to conclude that there was a significant difference between the percentages, and "Unable to Test" results, which denotes that there was insufficient sample size to conduct the statistical test, are not displayed. All significance testing is performed at the 95% significance level.



Composite/Attribute/Measure/Rating Item	Valid n	Your Plan Summary Rate*	2016 SPH Analytics Medicaid Adult Book of Business**				
			Mean	25th	50th	75th	90th
<b>Getting Needed Care</b>		<b>78.7%</b>	<b>80.5%</b>	<b>78.0%</b>	<b>80.7%</b>	<b>83.7%</b>	<b>85.3%</b>
Q14. Ease of getting necessary care, tests, or treatment needed	261	80.8%	82.7%	80.3%	83.0%	85.6%	87.4%
Q25. Getting appointments with specialists as soon as needed	149	76.5%	78.2%	75.5%	79.1%	81.9%	83.4%
<b>Getting Care Quickly</b>		<b>77.0%</b>	<b>79.7%</b>	<b>77.7%</b>	<b>80.3%</b>	<b>82.9%</b>	<b>84.1%</b>
Q4. Got care as soon as needed when care was needed right away	139	82.0%	81.9%	79.1%	82.1%	84.9%	86.5%
Q6. Got check-up/routine care appointment as soon as needed	257	72.0%	77.6%	74.7%	78.6%	81.0%	83.7%
<b>How Well Doctors Communicate</b>		<b>88.5%</b>	<b>90.7%</b>	<b>89.7%</b>	<b>91.0%</b>	<b>92.3%</b>	<b>93.4%</b>
Q17. Personal doctor explained things in an understandable way	238	87.8%	91.1%	89.7%	91.1%	92.5%	94.3%
Q18. Personal doctor listened carefully to you	238	89.9%	91.2%	89.7%	91.4%	92.9%	93.9%
Q19. Personal doctor showed respect for what you had to say	240	92.1%	92.4%	90.9%	92.7%	94.0%	95.1%
Q20. Personal doctor spent enough time with you	240	84.2%	88.3%	86.9%	88.8%	90.1%	91.8%
<b>Customer Service</b>		<b>89.9%</b>	<b>87.3%</b>	<b>85.4%</b>	<b>87.5%</b>	<b>89.3%</b>	<b>91.2%</b>
Q31. Customer service provided information or help	134	84.3%	81.2%	78.2%	81.4%	83.8%	87.5%
Q32. Customer service treated member with courtesy and respect	134	95.5%	93.3%	92.5%	93.7%	95.2%	96.1%
<b>Shared Decision Making</b>		<b>78.0%</b>	<b>78.7%</b>	<b>76.6%</b>	<b>78.8%</b>	<b>81.5%</b>	<b>83.0%</b>
Q10. Doctor/health provider talked about reasons you might want to take a medicine	114	90.4%	91.6%	89.9%	91.8%	94.0%	94.7%
Q11. Doctor/health provider talked about reasons you might not want to take a medicine	113	59.3%	67.2%	63.0%	67.6%	71.3%	74.0%
Q12. Doctor/health provider asked you what you thought was best when starting or stopping a prescription medicine	115	84.3%	77.4%	73.7%	77.3%	80.7%	83.6%
<b>Health Promotion and Education</b>	<b>260</b>	<b>74.2%</b>	<b>71.6%</b>	<b>69.2%</b>	<b>72.1%</b>	<b>74.7%</b>	<b>76.1%</b>
<b>Coordination of Care</b>	<b>142</b>	<b>76.1%</b>	<b>81.7%</b>	<b>79.4%</b>	<b>81.3%</b>	<b>84.6%</b>	<b>86.5%</b>
<b>Providing Needed Information</b>	<b>74</b>	<b>75.7%</b>	<b>66.6%</b>	<b>61.6%</b>	<b>66.3%</b>	<b>71.7%</b>	<b>74.5%</b>
<b>Ease of Filling out Forms</b>	<b>306</b>	<b>89.9%</b>	<b>93.9%</b>	<b>92.6%</b>	<b>94.1%</b>	<b>95.3%</b>	<b>95.8%</b>
<b>Rating Items (Summary Rate = 8 + 9 + 10)</b>							
<b>Rating of Health Care (Q13)</b>	<b>257</b>	<b>79.0%</b>	<b>73.1%</b>	<b>69.4%</b>	<b>73.8%</b>	<b>76.3%</b>	<b>78.3%</b>
<b>Rating of Personal Doctor (Q23)</b>	<b>277</b>	<b>80.5%</b>	<b>80.2%</b>	<b>78.0%</b>	<b>80.4%</b>	<b>82.0%</b>	<b>84.5%</b>
<b>Rating of Specialist (Q27)</b>	<b>139</b>	<b>79.9%</b>	<b>80.9%</b>	<b>78.9%</b>	<b>80.8%</b>	<b>82.7%</b>	<b>85.1%</b>
<b>Rating of Health Plan (Q35)</b>	<b>308</b>	<b>84.4%</b>	<b>75.1%</b>	<b>71.0%</b>	<b>75.0%</b>	<b>78.5%</b>	<b>82.2%</b>
<b>Rating Items (Summary Rate = 9 + 10)</b>							
<b>Rating of Health Care (Q13)</b>	<b>257</b>	<b>56.0%</b>	<b>53.5%</b>	<b>50.6%</b>	<b>53.3%</b>	<b>56.4%</b>	<b>59.6%</b>
<b>Rating of Personal Doctor (Q23)</b>	<b>277</b>	<b>61.0%</b>	<b>65.5%</b>	<b>62.7%</b>	<b>64.8%</b>	<b>67.8%</b>	<b>71.4%</b>
<b>Rating of Specialist (Q27)</b>	<b>139</b>	<b>57.6%</b>	<b>66.0%</b>	<b>63.0%</b>	<b>65.6%</b>	<b>69.8%</b>	<b>72.7%</b>
<b>Rating of Health Plan (Q35)</b>	<b>308</b>	<b>66.9%</b>	<b>57.8%</b>	<b>54.0%</b>	<b>57.1%</b>	<b>61.8%</b>	<b>67.3%</b>
<b>Effectiveness of Care Measures (Rolling Average)</b>							
<b>Flu Vaccinations (Adults 18–64)</b>	<b>295</b>	<b>45.8%</b>	<b>38.8%</b>	<b>35.1%</b>	<b>38.3%</b>	<b>43.7%</b>	<b>47.9%</b>
<b>Advising Smokers and Tobacco Users to Quit</b>	<b>196</b>	<b>85.2%</b>	<b>75.9%</b>	<b>72.1%</b>	<b>77.3%</b>	<b>80.6%</b>	<b>83.9%</b>
<b>Discussing Cessation Medications</b>	<b>193</b>	<b>60.1%</b>	<b>47.9%</b>	<b>42.1%</b>	<b>49.3%</b>	<b>56.1%</b>	<b>60.0%</b>
<b>Discussing Cessation Strategies</b>	<b>188</b>	<b>53.2%</b>	<b>44.0%</b>	<b>38.7%</b>	<b>43.8%</b>	<b>49.7%</b>	<b>54.3%</b>
<b>Aspirin Use</b>	<b>54</b>	<b>29.6%</b>	<b>31.4%</b>	<b>24.8%</b>	<b>32.9%</b>	<b>39.7%</b>	<b>45.4%</b>
<b>Discussing Aspirin Risks and Benefits</b>	<b>105</b>	<b>49.5%</b>	<b>39.4%</b>	<b>36.2%</b>	<b>42.4%</b>	<b>46.4%</b>	<b>52.4%</b>
<b>Effectiveness of Care Measures (Current Year)</b>							
<b>Flu Vaccinations (Adults 18–64)</b>	<b>295</b>	<b>45.8%</b>	<b>38.8%</b>	<b>35.1%</b>	<b>38.3%</b>	<b>43.7%</b>	<b>47.9%</b>
<b>Advising Smokers and Tobacco Users to Quit</b>	<b>105</b>	<b>81.9%</b>	<b>75.9%</b>	<b>72.1%</b>	<b>77.3%</b>	<b>80.6%</b>	<b>83.9%</b>
<b>Discussing Cessation Medications</b>	<b>104</b>	<b>57.7%</b>	<b>47.9%</b>	<b>42.1%</b>	<b>49.3%</b>	<b>56.1%</b>	<b>60.0%</b>
<b>Discussing Cessation Strategies</b>	<b>102</b>	<b>51.0%</b>	<b>44.0%</b>	<b>38.7%</b>	<b>43.8%</b>	<b>49.7%</b>	<b>54.3%</b>
<b>Aspirin Use</b>	<b>28</b>	<b>32.1%</b>	<b>31.4%</b>	<b>24.8%</b>	<b>32.9%</b>	<b>39.7%</b>	<b>45.4%</b>
<b>Discussing Aspirin Risks and Benefits</b>	<b>55</b>	<b>45.5%</b>	<b>39.4%</b>	<b>36.2%</b>	<b>42.4%</b>	<b>46.4%</b>	<b>52.4%</b>

\* Summary Rates are defined by NCQA in its HEDIS 2016 CAHPS® 5.0H guidelines and generally represent the most favorable response percentages.

\*\* The 2016 SPH Analytics Book of Business consists of 72 Medicaid adult samples that conducted surveys with SPH Analytics in 2016 and submitted to NCQA. See *Glossary of Terms* for more information.

Note 1: Members who responded "No" to Q33 are included in "Always" of Q34, per NCQA HEDIS 2016 Volume 3 guidelines.

Note 2: Please note that the rolling average methodology is not used to calculate the *Flu Vaccinations (Adults 18-64)* measure per HEDIS 2016 protocol.



Composite/Attribute/Measure/Rating Item	Valid n	Your Plan Summary Rate*	Benchmarks		Significance Testing***	
			2016 SPH Analytics BoB**	2015 MAS Public Report**	To SPH Analytics BoB	To Public Report
<b>Getting Needed Care</b>		78.7%	80.5%	81.1%	Not sig.	Not sig.
Q14. Ease of getting necessary care, tests, or treatment needed	261	80.8%	82.7%	83.4%	Not sig.	Not sig.
Q25. Getting appointments with specialists as soon as needed	149	76.5%	78.2%	79.1%	Not sig.	Not sig.
<b>Getting Care Quickly</b>		77.0%	79.7%	81.0%	Not sig.	Not sig.
Q4. Got care as soon as needed when care was needed right away	139	82.0%	81.9%	83.5%	Not sig.	Not sig.
Q6. Got check-up/routine care appointment as soon as needed	257	72.0%	77.6%	78.7%	Below	Below
<b>How Well Doctors Communicate</b>		88.5%	90.7%	90.7%	Not sig.	Not sig.
Q17. Personal doctor explained things in an understandable way	238	87.8%	91.1%	91.2%	Not sig.	Not sig.
Q18. Personal doctor listened carefully to you	238	89.9%	91.2%	91.1%	Not sig.	Not sig.
Q19. Personal doctor showed respect for what you had to say	240	92.1%	92.4%	92.4%	Not sig.	Not sig.
Q20. Personal doctor spent enough time with you	240	84.2%	88.3%	88.4%	Below	Below
<b>Customer Service</b>		89.9%	87.3%	87.0%	Not sig.	Not sig.
Q31. Customer service provided information or help	134	84.3%	81.2%	81.2%	Not sig.	Not sig.
Q32. Customer service treated member with courtesy and respect	134	95.5%	93.3%	93.0%	Not sig.	Not sig.
<b>Shared Decision Making</b>		78.0%	78.7%	79.1%	Not sig.	Not sig.
Q10. Doctor/health provider talked about reasons you might want to take a medicine	114	90.4%	91.6%	92.1%	Not sig.	Not sig.
Q11. Doctor/health provider talked about reasons you might not want to take a medicine	113	59.3%	67.2%	67.8%	Not sig.	Not sig.
Q12. Doctor/health provider asked you what you thought was best when starting or stopping a prescription medicine	115	84.3%	77.4%	77.3%	Not sig.	Not sig.
<b>Health Promotion and Education</b>	260	74.2%	71.6%	71.6%	Not sig.	Not sig.
<b>Coordination of Care</b>	142	76.1%	81.7%	81.8%	Not sig.	Not sig.
<b>Providing Needed Information</b>	74	75.7%	66.6%	68.5%	Not sig.	Not sig.
<b>Ease of Filling out Forms</b>	306	89.9%	93.9%	94.1%	Below	Below
<b>Rating Items (Summary Rate = 8 + 9 + 10)</b>						
<b>Rating of Health Care (Q13)</b>	257	79.0%	73.1%	72.9%	Above	Above
<b>Rating of Personal Doctor (Q23)</b>	277	80.5%	80.2%	79.8%	Not sig.	Not sig.
<b>Rating of Specialist (Q27)</b>	139	79.9%	80.9%	80.5%	Not sig.	Not sig.
<b>Rating of Health Plan (Q35)</b>	308	84.4%	75.1%	75.6%	Above	Above
<b>Rating Items (Summary Rate = 9 + 10)</b>						
<b>Rating of Health Care (Q13)</b>	257	56.0%	53.5%	52.5%	Not sig.	Not sig.
<b>Rating of Personal Doctor (Q23)</b>	277	61.0%	65.5%	64.4%	Not sig.	Not sig.
<b>Rating of Specialist (Q27)</b>	139	57.6%	66.0%	65.0%	Below	Not sig.
<b>Rating of Health Plan (Q35)</b>	308	66.9%	57.8%	58.4%	Above	Above
<b>Effectiveness of Care Measures (Rolling Average)</b>						
<b>Flu Vaccinations (Adults 18-64)</b>	295	45.8%	38.8%	39.7%	Above	Above
<b>Advising Smokers and Tobacco Users to Quit</b>	196	85.2%	75.9%	75.8%	Above	Above
<b>Discussing Cessation Medications</b>	193	60.1%	47.9%	47.2%	Above	Above
<b>Discussing Cessation Strategies</b>	188	53.2%	44.0%	42.6%	Above	Above
<b>Aspirin Use</b>	54	29.6%	31.4%	Not Available	Not sig.	NA
<b>Discussing Aspirin Risks and Benefits</b>	105	49.5%	39.4%	Not Available	Above	NA
<b>Effectiveness of Care Measures (Current Year)</b>						
<b>Flu Vaccinations (Adults 18-64)</b>	295	45.8%	38.8%	39.7%	Above	Above
<b>Advising Smokers and Tobacco Users to Quit</b>	105	81.9%	75.9%	75.8%	Not sig.	Not sig.
<b>Discussing Cessation Medications</b>	104	57.7%	47.9%	47.2%	Above	Above
<b>Discussing Cessation Strategies</b>	102	51.0%	44.0%	42.6%	Not sig.	Not sig.
<b>Aspirin Use</b>	28	32.1%	31.4%	Not Available	Not sig.	NA
<b>Discussing Aspirin Risks and Benefits</b>	55	45.5%	39.4%	Not Available	Not sig.	NA

\* Summary Rates are defined by NCQA in its HEDIS 2016 CAHPS® 5.0H guidelines and generally represent the most favorable response percentages.

\*\* The 2016 SPH Analytics Book of Business consists of 72 Medicaid adult samples that conducted surveys with SPH Analytics in 2016 and submitted to NCQA. The 2015 Public Report benchmark is derived from NCQA's Quality Compass® benchmark and calculated by SPH Analytics. The benchmark is the mean of 130 plan-specific Medicaid samples that submitted to NCQA in 2015. See *Glossary of Terms* for more information.

\*\*\* Significance Testing - All significance testing is performed at the 95% significance level. "-" indicates "Unable to Test" due to a combination of low valid n and/or extreme Summary Rate. Significance testing of composites should be used with caution as a rough guideline, since the test procedure is approximate.

Note 1: Members who responded "No" to Q33 are included in "Always" of Q34, per NCQA HEDIS 2016 Volume 3 guidelines.

Note 2: Please note that the rolling average methodology is not used to calculate the *Flu Vaccinations (Adults 18-64)* measure per HEDIS 2016 protocol.





## Medicaid Adult CAHPS // Global Proportions

Health Partners Plans

Composite/Rating Item	Global Proportions Response Percentages		
Composites	Never/Sometimes	Usually	Always
Getting Needed Care (GNC)	21.3%	24.4%	54.2%
Getting Care Quickly (GCQ)	23.0%	17.9%	59.1%
How Well Doctors Communicate (HWDC)	11.5%	15.9%	72.6%
Customer Service (CS)	10.1%	17.5%	72.4%
Coordination of Care (CC)	23.9%	21.1%	54.9%
Composites	No	Yes	
Shared Decision Making (SDM)	22.0%	78.0%	
Health Promotion and Education (HPE)	25.8%	74.2%	
Rating Items	0 to 6	7 to 8	9 to 10
Rating of Health Care (Q13)	12.1%	31.9%	56.0%
Rating of Personal Doctor (Q23)	13.4%	25.6%	61.0%
Rating of Specialist (Q27)	15.8%	26.6%	57.6%
Rating of Health Plan (Q35)	7.1%	26.0%	66.9%

### Three-Point Scores: Accreditation

Composite/Rating Item	Your Three-Point Scores	Three-Point Scoring			
		HEDIS/CAHPS Percentiles*			
		25th	50th	75th	90th
Getting Needed Care (GNC)	2.3292	2.31	2.37	2.42	2.45
Getting Care Quickly (GCQ)	2.3613	2.36	2.42	2.46	2.49
Customer Service (CS)	2.6231	2.48	2.54	2.58	2.61
Rating of Health Care (Q13)	2.4397	2.31	2.36	2.42	2.45
Rating of Personal Doctor (Q23)	2.4765	2.43	2.50	2.53	2.57
Rating of Specialist (Q27)	2.4173	2.48	2.51	2.56	2.59
Rating of Health Plan (Q35)	2.5974	2.37	2.43	2.49	2.55

\* These benchmark percentiles are used to score health plans for accreditation year 2016. The source for the HEDIS/CAHPS® Measures is: NCQA>Programs>Accreditation>Policy Updates & Supporting Documents>Trending and Benchmarks>Benchmarks and Thresholds: 2016 Accreditation.



Composite/Attribute/Measure/Rating Item	Summary Rate Score Definition	2016		2015		Significance Testing**
		Valid n	Summary Rate*	Valid n	Summary Rate*	2015 versus 2016
Getting Needed Care	Always, Usually		78.7%		82.8%	Not sig.
Q14. Ease of getting necessary care, tests, or treatment needed		261	80.8%	247	83.4%	Not sig.
Q25. Getting appointments with specialists as soon as needed		149	76.5%	152	82.2%	Not sig.
Getting Care Quickly	Always, Usually		77.0%		83.3%	Not sig.
Q4. Got care as soon as needed when care was needed right away		139	82.0%	146	84.9%	Not sig.
Q6. Got check-up/routine care appointment as soon as needed		257	72.0%	250	81.6%	Sig. decrease
How Well Doctors Communicate	Always, Usually		88.5%		91.6%	Not sig.
Q17. Personal doctor explained things in an understandable way		238	87.8%	223	90.6%	Not sig.
Q18. Personal doctor listened carefully to you		238	89.9%	227	92.5%	Not sig.
Q19. Personal doctor showed respect for what you had to say		240	92.1%	223	94.2%	Not sig.
Q20. Personal doctor spent enough time with you		240	84.2%	223	89.2%	Not sig.
Customer Service	Always, Usually		89.9%		88.2%	Not sig.
Q31. Customer service provided information or help		134	84.3%	136	84.6%	Not sig.
Q32. Customer service treated member with courtesy and respect		134	95.5%	135	91.9%	Not sig.
Shared Decision Making	Yes		78.0%		75.3%	Not sig.
Q10. Doctor/health provider talked about reasons you might want to take a medicine		114	90.4%	95	87.4%	Not sig.
Q11. Doctor/health provider talked about reasons you might not want to take a medicine		113	59.3%	90	64.4%	Not sig.
Q12. Doctor/health provider asked you what you thought was best when starting or stopping a prescription medicine		115	84.3%	93	74.2%	Not sig.
Health Promotion and Education (Q8)	Yes	260	74.2%	251	73.3%	Not sig.
Coordination of Care (Q22)	Always, Usually	142	76.1%	137	84.7%	Not sig.
Providing Needed Information (Q29)		74	75.7%	71	69.0%	Not sig.
Ease of Filling out Forms (Q34)		306	89.9%	271	92.3%	Not sig.
Rating Items (Summary Rate = 8 + 9 + 10)						
Rating of Health Care (Q13)	8 to 10	257	79.0%	249	71.5%	Not sig.
Rating of Personal Doctor (Q23)		277	80.5%	257	88.7%	Sig. decrease
Rating of Specialist (Q27)		139	79.9%	137	80.3%	Not sig.
Rating of Health Plan (Q35)		308	84.4%	277	84.1%	Not sig.
Rating Items (Summary Rate = 9 + 10)						
Rating of Health Care (Q13)	9 to 10	257	56.0%	249	57.4%	Not sig.
Rating of Personal Doctor (Q23)		277	61.0%	257	76.7%	Sig. decrease
Rating of Specialist (Q27)		139	57.6%	137	70.8%	Sig. decrease
Rating of Health Plan (Q35)		308	66.9%	277	69.3%	Not sig.
Effectiveness of Care Measures (Rolling Average)						
Flu Vaccinations (Adults 18–64)	Various	295	45.8%	264	54.9%	Sig. decrease
Advising Smokers and Tobacco Users to Quit		196	85.2%	240	85.4%	Not sig.
Discussing Cessation Medications		193	60.1%	235	57.4%	Not sig.
Discussing Cessation Strategies		188	53.2%	231	50.6%	Not sig.
Aspirin Use		54	29.6%	65	33.8%	Not sig.
Discussing Aspirin Risks and Benefits		105	49.5%	122	53.3%	Not sig.
Effectiveness of Care Measures (2016 compared to 2015)						
Flu Vaccinations (Adults 18–64)	Various	295	45.8%	264	54.9%	Sig. decrease
Advising Smokers and Tobacco Users to Quit		105	81.9%	91	89.0%	Not sig.
Discussing Cessation Medications		104	57.7%	89	62.9%	Not sig.
Discussing Cessation Strategies		102	51.0%	86	55.8%	Not sig.
Aspirin Use		28	32.1%	26	26.9%	Not sig.
Discussing Aspirin Risks and Benefits		55	45.5%	50	54.0%	Not sig.

\* Summary Rates are defined by NCQA in its HEDIS 2016 CAHPS® 5.0H guidelines and generally represent the most favorable response percentages.

\*\* Significance Testing - "Sig. increase" denotes the results that were found when hypothesis tests were conducted to determine if the percentage is higher for 2016 results when compared to 2015 results. "Sig. decrease" denotes the results that were found when hypothesis tests were conducted to determine if the percentage is lower for 2016 results when compared to 2015 results. "Not sig." denotes that there was insufficient support to conclude that there was a significant difference between the percentages. "Unable to Test" denotes that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Note 1: Members who responded "No" to Q33 are included in "Always" of Q34, per NCQA HEDIS 2016 Volume 3 guidelines.

Note 2: Please note that the rolling average methodology is not used to calculate the *Flu Vaccinations (Adults 18-64)* measure per HEDIS 2016 protocol.

## 2. Glossary of Terms

**Attributes** are the questions that relate to a specific service area or composite as defined by NCQA.

**Composites** are the mean of the Summary Rates of attributes within a given service area as specified by NCQA.

**Global Proportions** are a breakout of response option results according to the Three-Point Score definition. See “Three-Point Score” below.

**Public Report (2015) benchmark** is derived from NCQA’s Quality Compass® benchmark and calculated by SPH Analytics. The benchmark is a collection of CAHPS® 5.0H mean summary ratings for those Medicaid adult plans (130 plan-specific samples) choosing to report their scores publicly, in addition to submitting their scores to be compiled anonymously into a Quality Compass aggregate, or national summary. The scores shown in this report reflect the mean Summary Rates from these plans.

**Rating** questions use a scale of 0 to 10 for assessing overall experience (*Health Plan, Health Care, Personal Doctor, and Specialist*) with zero being the worst possible and ten being the best possible.

**Significance test** is a test to determine if an observed difference is too large to have occurred by chance alone.

**SPH Analytics Book of Business** (calculated on a plan-level) consists of all Medicaid adult samples that conducted surveys with SPH Analytics and submitted data to NCQA. In 2016, there were 72 samples included in the Book of Business.

**Summary Rates** are single statistics generated for a survey question. In general, Summary Rates represent the percentage of respondents who chose the most favorable response options (“Always” and “Usually,” “Yes,” or “8,” “9,” and “10”).

**Three-Point Score** is the result of the process of assigning a value of 1, 2, or 3 to each question response category and then computing a numerical average based upon the valid responses for each question. The Three-Point values are assigned to question answer categories as follows:

Response Choice 1	Score Value
Never	1
Sometimes	1
Usually	2
Always	3

Response Choice 2	Score Value
No	1
Yes	3

Response Choice 3	Score Value
0 - 6	1
7 and 8	2
9 and 10	3