



At - A - Glance Report

2021 Medicaid Child CAHPS 5.0 H

Health Partners Plans - CHIP

Project Number(s):

37896

SPHAnalytics.com

Current data as of: 07/09/2021

1. *Executive Summary*

SPH Analytics, a National Committee for Quality Assurance (NCQA) Certified Healthcare Effectiveness Data and Information Set (HEDIS®)¹ Survey Vendor, was selected by Health Partners Plans - CHIP to conduct its 2021 Consumer Assessment of Healthcare Providers and Systems (CAHPS®)² 5.1H Medicaid Child Member Satisfaction Survey. SPH Analytics collected 327 valid surveys from the eligible member population, yielding a response rate of 19.1%.³

CAHPS® 5.1H Medicaid Child Survey

Topics included in the CAHPS® 5.1H Medicaid Child Survey are:

- Getting Needed Care
- Getting Care Quickly
- How Well Doctors Communicate
- Customer Service
- Coordination of Care
- Ease of Filling out Forms
- Health Care, Provider, and Plan Ratings

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 respondent experiences when attempting to get care, tests, or treatment needed by his or her child and appointments for his or her child to see specialists as soon as needed in the last six months (Questions 9 and 23). The Summary Rate represents the percentage of respondents reporting “Always” or “Usually.”

The *Getting Care Quickly* composite measures respondent experiences with receiving care (when needed care right away) and getting appointments for check-ups or routine care for his or her child 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 child’s providers explain things about the child’s health and listen, spend enough time with, and show respect for what respondents have to say (Questions 12, 13, 14, and 17). The Summary Rate represents the percentage of respondents reporting “Always” or “Usually.”

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

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

³ Please note that the CAHPS® survey is eligible to be conducted from January through May 2021.

The *Customer Service* composite measures respondent experiences with getting information from as well as treatment by customer service staff in the last six months (Questions 27 and 28). The Summary Rate represents the percentage of respondent answering “Always” or “Usually.”

The *Coordination of Care* measure evaluates respondent perceptions that the child’s personal doctor seemed informed and up-to-date about the care his or her child received from other doctors and health providers in the last six months (Question 20). The Summary Rate represents the percentage of respondents answering “Always” or “Usually.”

The *Ease of Filling out Forms* attribute evaluates how often forms received from the child’s health plan were easy to fill out (Question 30). The Summary Rate represents the percentage of respondents indicating “Always” or “Usually.”⁴

There are four questions with responses scaled 0 to 10 in the CAHPS® 5.1H survey: *Rating of Health Care* (Question 8), *Rating of Personal Doctor* (Question 21), *Rating of Specialist* (Question 25), and *Rating of Health Plan* (Question 31), 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.”

⁴ Please note that members who responded “No” to Q29 are included in “Always” of Q30, per NCQA HEDIS 2021 guidelines.

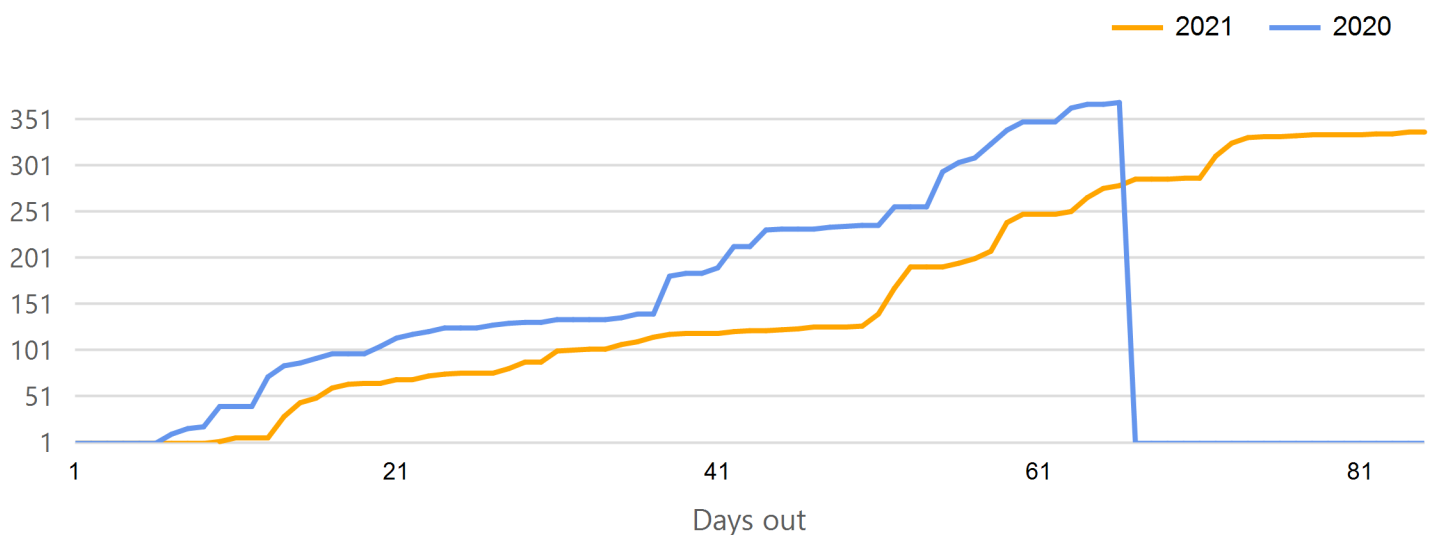


Sample Size	Total Completes	Response Rate
1749	327	19.1%

Disposition Code	Disposition Description	2021	2020
M0	Mail Complete	256	225
T0	Phone Complete	71	98
I0	Internet Complete	0	0
1	Does Not Meet Criteria	20	22
2	Non-Responses	15	23
3	Ineligible (Language Barrier)	13	6
4	Ineligible (Mentally/Physically Incapable)	0	0
5	Ineligible (Deceased)	0	0
6	Non-Response (Refusal)	70	74
7	Non-Response (Non-Response After Maximum Attempts)	1304	1285
8	Non-Response (Added to DNC List)	0	0
Sample Size		1749	1733
Response Rate		19.1%	18.9%

Raw Returns	2021	2020	% Change
Total Returns to Date	337	369	-8.67%
Total Response Rate to Date	19.27%	21.29%	-2.02%

Total Returns YTD

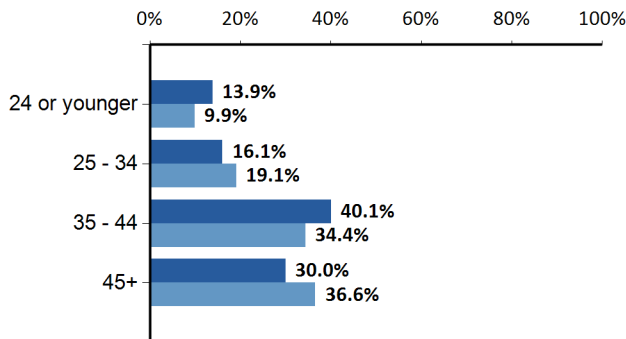




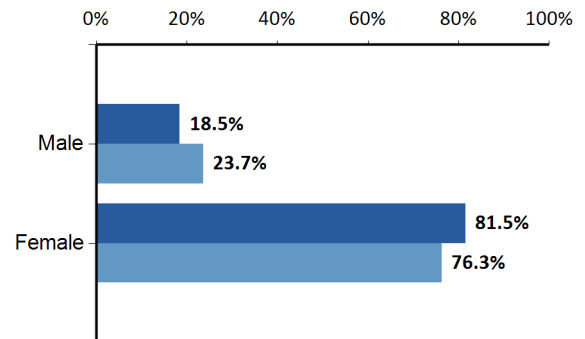
2021 2020

Sample Size	Total Completes	Response Rate
1749	327	19.1%

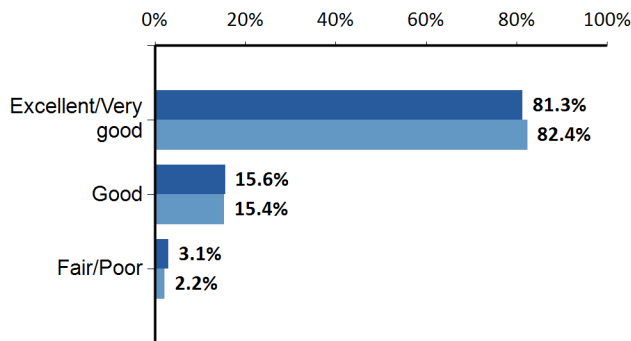
Respondent's Age



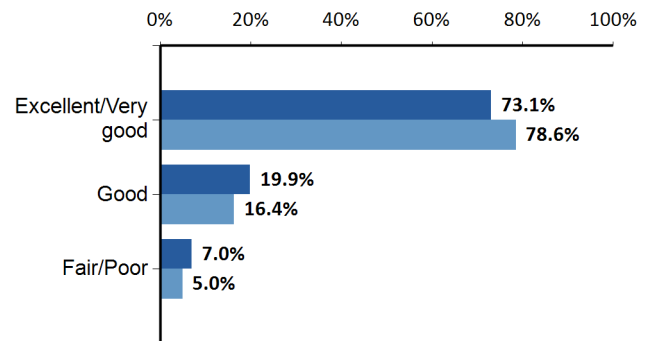
Respondent's Gender



Child's Overall Health Status*

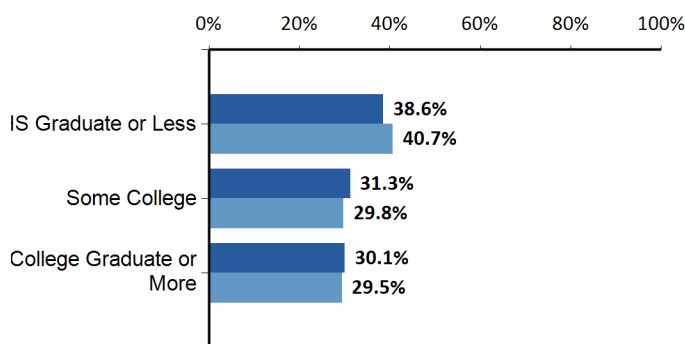


Child's Mental Health Status*

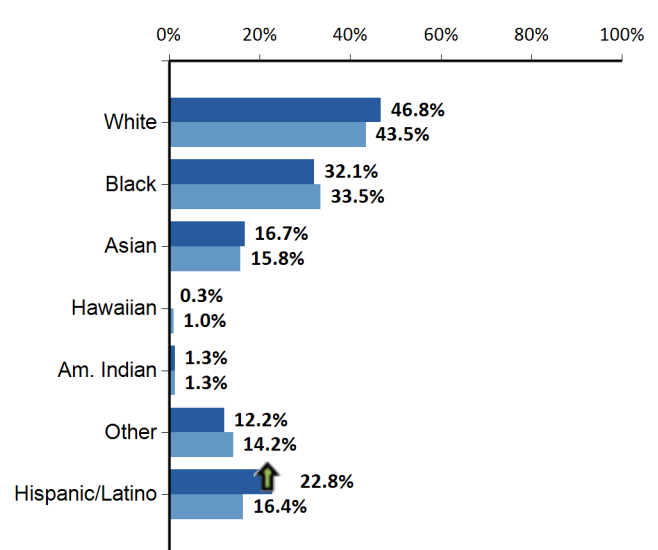


* Child's Overall and Mental/Emotional Health Status are defined by survey respondent.

Respondent's Education



Child's Race/Ethnicity**



** 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 2021 results when compared to 2020 results. "↓" denotes the results that were found when hypothesis tests were conducted to determine if the percentage is lower for 2021 results when compared to 2020 results.

Note 1: "NA" denotes that data are unavailable.



Composite/Attribute/Measure/Rating Item	Valid n	Your Plan Summary Rate*	2021 SPH Analytics Medicaid Child Book of Business**				
			Mean	25th	50th	75th	90th
Getting Needed Care		86.9%	86.6%	83.6%	86.9%	89.4%	91.8%
Q9. Ease of getting necessary care, tests, or treatment child needed	167	89.8%	90.8%	88.3%	91.0%	93.3%	95.0%
Q23. Getting child's appointments with specialists as soon as needed	50	84.0%	82.4%	78.1%	82.7%	86.1%	89.7%
Getting Care Quickly		76.5%	87.8%	84.5%	88.2%	91.2%	92.9%
Q4. Child got care as soon as needed when care was needed right away	48	79.2%	91.7%	87.9%	92.0%	95.2%	96.9%
Q6. Child got check-up/routine care appointment as soon as needed	176	73.9%	83.8%	79.9%	85.2%	88.1%	90.7%
How Well Doctors Communicate		92.7%	94.5%	92.9%	94.5%	96.4%	97.4%
Q12. Child's personal doctor explained things about health in an understandable way	165	93.3%	94.8%	93.1%	94.8%	96.9%	98.0%
Q13. Child's personal doctor listened carefully to you	166	94.6%	95.9%	94.6%	95.9%	97.5%	98.4%
Q14. Child's personal doctor showed respect for what you had to say	165	95.2%	96.9%	95.8%	97.0%	98.2%	98.9%
Q17. Child's personal doctor spent enough time with your child	164	87.8%	90.4%	87.9%	90.7%	94.0%	95.5%
Customer Service		87.4%	88.3%	86.1%	88.5%	91.1%	93.1%
Q27. Customer service provided information or help	104	83.7%	82.5%	79.1%	82.9%	86.6%	89.1%
Q28. Customer service treated member with courtesy and respect	102	91.2%	94.0%	92.1%	94.2%	96.4%	98.0%
Coordination of Care (Q20)	52	84.6%	84.9%	81.6%	85.1%	88.9%	92.3%
Ease of Filling out Forms (Q30)	308	92.2%	96.0%	94.8%	96.2%	97.2%	98.0%
Rating Items (Summary Rate = 8 + 9 + 10)							
Rating of Health Care (Q8)	168	89.3%	88.7%	86.3%	88.8%	90.9%	93.4%
Rating of Personal Doctor (Q21)	271	87.8%	90.8%	88.9%	91.0%	92.6%	94.0%
Rating of Specialist (Q25)	48	89.6%	88.2%	85.5%	88.0%	91.2%	94.0%
Rating of Health Plan (Q31)	317	88.0%	87.3%	84.9%	88.1%	90.1%	92.0%
Rating Items (Summary Rate = 9 + 10)							
Rating of Health Care (Q8)	168	72.6%	74.4%	71.2%	74.4%	77.0%	80.5%
Rating of Personal Doctor (Q21)	271	73.4%	78.6%	75.8%	78.5%	81.2%	83.5%
Rating of Specialist (Q25)	48	66.7%	75.7%	71.5%	75.1%	80.0%	84.0%
Rating of Health Plan (Q31)	317	74.1%	73.3%	69.8%	74.2%	77.4%	80.3%

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

** The 2021 SPH Analytics Book of Business contains all Medicaid Child (Non-CCC and CCC) samples that conducted surveys with SPH Analytics in 2021 and submitted data to NCQA. See *Glossary of Terms* for more information.

Note: Members who responded "No" to Q29 are included in "Always" of Q30, per NCQA HEDIS 2021 Volume 3 guidelines.



Composite/Attribute/Measure/Rating Item	Valid n	Your Plan Summary Rate*	2020 Quality Compass® All Plans Means & Percentiles**				
			Mean	25th	50th	75th	90th
Getting Needed Care		86.9%	86.0%	83.7%	86.6%	89.1%	91.1%
Q9. Ease of getting necessary care, tests, or treatment child needed	167	89.8%	91.2%	89.1%	92.0%	93.8%	95.4%
Q23. Getting child's appointments with specialists as soon as needed	50	84.0%	79.8%	75.4%	79.7%	83.7%	87.7%
Getting Care Quickly		76.5%	90.5%	88.3%	91.6%	93.5%	95.0%
Q4. Child got care as soon as needed when care was needed right away	48	79.2%	92.6%	90.3%	93.3%	95.6%	96.7%
Q6. Child got check-up/routine care appointment as soon as needed	176	73.9%	89.0%	86.1%	90.1%	92.4%	94.3%
How Well Doctors Communicate		92.7%	95.3%	94.3%	95.5%	96.6%	97.6%
Q12. Child's personal doctor explained things about health in an understandable way	165	93.3%	95.6%	94.4%	96.0%	97.3%	98.0%
Q13. Child's personal doctor listened carefully to you	166	94.6%	96.4%	95.3%	96.6%	97.5%	98.5%
Q14. Child's personal doctor showed respect for what you had to say	165	95.2%	97.2%	96.3%	97.3%	98.1%	99.0%
Q17. Child's personal doctor spent enough time with your child	164	87.8%	91.9%	89.0%	92.5%	94.3%	96.4%
Customer Service		87.4%	88.8%	87.0%	89.0%	91.1%	92.9%
Q27. Customer service provided information or help	104	83.7%	83.8%	81.0%	84.4%	87.3%	89.5%
Q28. Customer service treated member with courtesy and respect	102	91.2%	93.8%	92.0%	94.0%	95.5%	97.3%
Coordination of Care (Q20)	52	84.6%	86.1%	83.9%	87.1%	89.3%	90.7%
Ease of Filling out Forms (Q30)	308	92.2%	96.5%	95.5%	96.6%	97.6%	98.4%
Rating Items (Summary Rate = 8 + 9 + 10)							
Rating of Health Care (Q8)	168	89.3%	88.0%	86.0%	88.5%	90.6%	92.2%
Rating of Personal Doctor (Q21)	271	87.8%	90.9%	89.5%	91.2%	92.5%	93.8%
Rating of Specialist (Q25)	48	89.6%	87.0%	85.0%	87.1%	87.9%	89.6%
Rating of Health Plan (Q31)	317	88.0%	86.5%	84.4%	87.4%	89.3%	91.7%
Rating Items (Summary Rate = 9 + 10)							
Rating of Health Care (Q8)	168	72.6%	71.9%	69.3%	72.4%	75.5%	77.7%
Rating of Personal Doctor (Q21)	271	73.4%	78.6%	75.9%	79.0%	81.4%	83.3%
Rating of Specialist (Q25)	48	66.7%	73.4%	71.3%	74.2%	75.0%	76.8%
Rating of Health Plan (Q31)	317	74.1%	71.9%	68.9%	73.3%	75.5%	77.9%

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

** The 2020 Quality Compass® All Plans benchmark is the mean summary rate from the Medicaid Child plans who submitted to NCQA in 2020. See *Glossary of Terms* for more information.

Note: Members who responded "No" to Q29 are included in "Always" of Q30, per NCQA HEDIS 2021 Volume 3 guidelines.



Composite/Attribute/Measure/Rating Item	Valid n	Your Plan Summary Rate*	Benchmarks		Significance Testing***	
			2021 SPH Analytics BoB**	2020 Quality Compass® All Plans**	To SPH Analytics BoB	To Quality Compass® AP
Getting Needed Care		86.9%	86.6%	86.0%	Not sig.	Not sig.
Q9. Ease of getting necessary care, tests, or treatment child needed	167	89.8%	90.8%	91.2%	Not sig.	Not sig.
Q23. Getting child's appointments with specialists as soon as needed	50	84.0%	82.4%	79.8%	Not sig.	Not sig.
Getting Care Quickly		76.5%	87.8%	90.5%	Below	Below
Q4. Child got care as soon as needed when care was needed right away	48	79.2%	91.7%	92.6%	Below	Below
Q6. Child got check-up/routine care appointment as soon as needed	176	73.9%	83.8%	89.0%	Below	Below
How Well Doctors Communicate		92.7%	94.5%	95.3%	Not sig.	Not sig.
Q12. Child's personal doctor explained things about health in an understandable way	165	93.3%	94.8%	95.6%	Not sig.	Not sig.
Q13. Child's personal doctor listened carefully to you	166	94.6%	95.9%	96.4%	Not sig.	Not sig.
Q14. Child's personal doctor showed respect for what you had to say	165	95.2%	96.9%	97.2%	Not sig.	Not sig.
Q17. Child's personal doctor spent enough time with your child	164	87.8%	90.4%	91.9%	Not sig.	Not sig.
Customer Service		87.4%	88.3%	88.8%	Not sig.	Not sig.
Q27. Customer service provided information or help	104	83.7%	82.5%	83.8%	Not sig.	Not sig.
Q28. Customer service treated member with courtesy and respect	102	91.2%	94.0%	93.8%	Not sig.	Not sig.
Coordination of Care (Q20)	52	84.6%	84.9%	86.1%	Not sig.	Not sig.
Ease of Filling out Forms (Q30)	308	92.2%	96.0%	96.5%	Below	Below
Rating Items (Summary Rate = 8 + 9 + 10)						
Rating of Health Care (Q8)	168	89.3%	88.7%	88.0%	Not sig.	Not sig.
Rating of Personal Doctor (Q21)	271	87.8%	90.8%	90.9%	Not sig.	Not sig.
Rating of Specialist (Q25)	48	89.6%	88.2%	87.0%	Not sig.	Not sig.
Rating of Health Plan (Q31)	317	88.0%	87.3%	86.5%	Not sig.	Not sig.
Rating Items (Summary Rate = 9 + 10)						
Rating of Health Care (Q8)	168	72.6%	74.4%	71.9%	Not sig.	Not sig.
Rating of Personal Doctor (Q21)	271	73.4%	78.6%	78.6%	Not sig.	Not sig.
Rating of Specialist (Q25)	48	66.7%	75.7%	73.4%	Not sig.	Not sig.
Rating of Health Plan (Q31)	317	74.1%	73.3%	71.9%	Not sig.	Not sig.

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

** The 2021 SPH Analytics Book of Business contains all Medicaid Child (Non-CCC and CCC) samples that conducted surveys with SPH Analytics in 2021 and submitted data to NCQA. The 2020 Quality Compass® All Plans is the mean summary rate from the Medicaid child plans (Non-CCC and CCC) who submitted to NCQA in 2020. 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: Members who responded "No" to Q29 are included in "Always" of Q30, per NCQA HEDIS 2021 Volume 3 guidelines.



Composite/Attribute/Measure/Rating Item	Valid N	Your Plan Mean Score*	Frequency Distributions**		
			Never/Sometimes	Usually	Always
Getting Needed Care			13.1%	24.7%	62.2%
Q9. Ease of getting necessary care, tests, or treatment child needed	167	3.6	10.2%	23.4%	66.5%
Q23. Getting child's appointments with specialists as soon as needed	50	3.4	16.0%	26.0%	58.0%
Getting Care Quickly			23.5%	14.0%	62.5%
Q4. Child got care as soon as needed when care was needed right away	48	3.4	20.8%	10.4%	68.8%
Q6. Child got check-up/routine care appointment as soon as needed	176	3.3	26.1%	17.6%	56.3%
How Well Doctors Communicate			7.3%	16.4%	76.3%
Q12. Child's personal doctor explained things about health in an understandable way	165	3.7	6.7%	15.8%	77.6%
Q13. Child's personal doctor listened carefully to you	166	3.7	5.4%	14.5%	80.1%
Q14. Child's personal doctor showed respect for what you had to say	165	3.8	4.8%	9.7%	85.5%
Q17. Child's personal doctor spent enough time with your child	164	3.5	12.2%	25.6%	62.2%
Customer Service			12.6%	18.4%	69.0%
Q27. Customer service provided information or help	104	3.4	16.3%	24.0%	59.6%
Q28. Customer service treated member with courtesy and respect	102	3.7	8.8%	12.7%	78.4%
Coordination of Care (Q20)	52	3.3	15.4%	36.5%	48.1%
Ease of Filling out Forms (Q30)	308	3.8	7.8%	7.8%	84.4%
Rating Items	Mean Score*		0 to 6	7 to 8	9 to 10
Rating of Health Care (Q8)	168	9.1	3.6%	23.8%	72.6%
Rating of Personal Doctor (Q21)	271	9.0	5.5%	21.0%	73.4%
Rating of Specialist (Q25)	48	9.1	4.2%	29.2%	66.7%
Rating of Health Plan (Q31)	317	9.1	6.3%	19.6%	74.1%

* Mean scores represent an average of all responses. Please see the *Glossary of Terms* for more information.

** Frequency distributions, sometimes referred to as Global Proportions, provide a breakout of the percentage of respondents choosing each response option.

Note: Members who responded 'No' to Q29 are included in 'Always' of Q30, per NCQA HEDIS 2021 Volume 3 guidelines.



Composite/Attribute/Measure/Rating Item	Summary Rate Score Definition	2021		2020		2019		Significance Testing**	
		Valid n	Summary Rate*	Valid n	Summary Rate*	Valid n	Summary Rate*	2021 versus 2020	2021 versus 2019
Getting Needed Care	Always/Usually		86.9%		80.9%		82.1%	Not sig.	Not sig.
Q9. Ease of getting necessary care, tests, or treatment child needed		167	89.8%	208	85.6%	266	89.5%	Not sig.	Not sig.
Q23. Getting child's appointments with specialists as soon as needed		50	84.0%	59	76.3%	79	74.7%	Not sig.	Not sig.
Getting Care Quickly	Always/Usually		76.5%		88.5%		86.1%	Sig. decrease	Sig. decrease
Q4. Child got care as soon as needed when care was needed right away		48	79.2%	72	88.9%	117	86.3%	Not sig.	Not sig.
Q6. Child got check-up/routine care appointment as soon as needed		176	73.9%	201	88.1%	290	85.9%	Sig. decrease	Sig. decrease
How Well Doctors Communicate	Always/Usually		92.7%		95.5%		93.0%	Not sig.	Not sig.
Q12. Child's personal doctor explained things about health in an understandable way		165	93.3%	196	92.9%	243	93.8%	Not sig.	Not sig.
Q13. Child's personal doctor listened carefully to you		166	94.6%	195	97.9%	239	95.8%	Not sig.	Not sig.
Q14. Child's personal doctor showed respect for what you had to say		165	95.2%	194	99.5%	241	95.4%	Sig. decrease	Not sig.
Q17. Child's personal doctor spent enough time with your child		164	87.8%	193	91.7%	239	87.0%	Not sig.	Not sig.
Customer Service	Always/Usually		87.4%		89.7%		89.7%	Not sig.	Not sig.
Q27. Customer service provided information or help		104	83.7%	137	83.9%	180	83.3%	Not sig.	Not sig.
Q28. Customer service treated member with courtesy and respect		102	91.2%	135	95.6%	180	96.1%	Not sig.	Not sig.
Coordination of Care (Q20)		52	84.6%	60	78.3%	103	82.5%	Not sig.	Not sig.
Ease of Filling out Forms (Q30)		308	92.2%	312	92.3%	389	89.2%	Not sig.	Not sig.
Rating Items (Summary Rate = 8 + 9 + 10)									
Rating of Health Care (Q8)	8 to 10	168	89.3%	208	90.4%	267	88.0%	Not sig.	Not sig.
Rating of Personal Doctor (Q21)		271	87.8%	278	89.6%	334	88.6%	Not sig.	Not sig.
Rating of Specialist (Q25)		48	89.6%	53	88.7%	76	84.2%	Not sig.	Not sig.
Rating of Health Plan (Q31)		317	88.0%	318	87.4%	395	87.1%	Not sig.	Not sig.
Rating Items (Summary Rate = 9 + 10)									
Rating of Health Care (Q8)	9 to 10	168	72.6%	208	71.6%	267	62.5%	Not sig.	Sig. increase
Rating of Personal Doctor (Q21)		271	73.4%	278	71.6%	334	69.8%	Not sig.	Not sig.
Rating of Specialist (Q25)		48	66.7%	53	69.8%	76	68.4%	Not sig.	Not sig.
Rating of Health Plan (Q31)		317	74.1%	318	71.1%	395	71.1%	Not sig.	Not sig.

* Summary Rates are defined by NCQA in its HEDIS 2021 CAHPS® 5.1H 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 2021 results when compared to trend data. "Sig. decrease" denotes the results that were found when hypothesis tests were conducted to determine if the percentage is lower for 2021 results when compared to trend data. "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. "NA" denotes trend data is not available.

Note 1: Members who responded "No" to Q29 are included in "Always" of Q30, per NCQA HEDIS 2021 Volume 3 guidelines.

Note 2: Please note that the trend results in this report may vary slightly from historical year reporting.

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 (Frequency Distributions) a breakout of response option results.

Mean Scores are an average of all responses. They are calculated by assigning a value of four to the most favorable response option, a three to the next most favorable response option, and so on until a value of one is reached. These values are assuming that there are four response options. If there are a different number of response options, the most favorable response option receives a value equal to the total number of response options. When every response receives a value, the values are averaged to give the Mean Score.

Quality Compass (2020) Includes all Medicaid Child samples that submitted data to NCQA in 2020. It is used with the permission of the National Committee for Quality Assurance (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.

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 tests determine if an observed difference is too large to have occurred by chance alone.

SPH Analytics Book of Business contains all Medicaid Child samples (Non-CCC and CCC) that conducted surveys with SPH Analytics and submitted data to NCQA.

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").