

MY 2022 CAHPS[®] MEDICAID ADULT 5.1H FINAL REPORT

BLUE CROSS COMMUNITY CENTENNIAL

- OVERVIEW
- METHODOLOGY
- INDUSTRY TRENDS
- EXECUTIVE SUMMARY
- KEY DRIVER ANALYSIS OF RATING OF HEALTH PLAN
- MEASURE ANALYSES
- SUMMARY OF TREND AND BENCHMARKS
- PROFILE OF SURVEY RESPONDENTS
- SUPPLEMENTAL QUESTIONS
- APPENDICES
 - A: CORRELATIONS
 - B: QUESTIONNAIRE

BLUE CROSS COMMUNITY CENTENNIAL AM

CONTENTS

OVERVIEW

Press Ganey (PG), a National Committee for Quality Assurance (NCQA) certified HEDIS[®] Survey Vendor, was selected by Blue Cross Community Centennial AM to conduct its MY 2022 CAHPS[®] 5.1H Medicaid Adult Survey. NCQA requires health plans to submit CAHPS survey results in compliance with HEDIS[®] accreditation requirements.

SURVEY OBJECTIVE The overall objective of the CAHPS[®] study is to capture accurate and complete information about consumerreported 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.

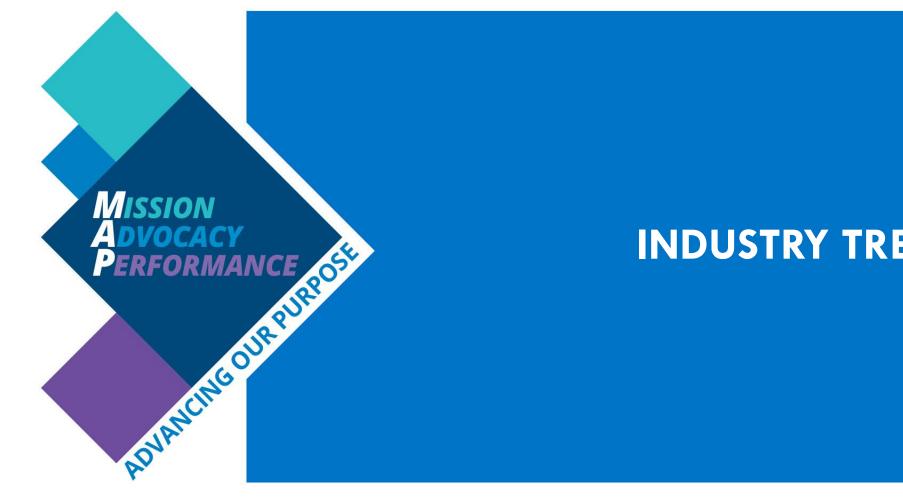
2023 NCQA CHANGES NCQA made no substantial changes to the survey or program for 2023.

Your Project Manager is Dana Sadlo (Dana.Sadlo@pressganey.com). Should you have any questions or comments regarding any aspect of the survey or reporting process, please feel free to email your Project Manager.

METHODOLOGY

he MY 2022	Medicaid	Adult ver	sion of th	e 5.1H C/	AHPS su	rvey was	s adminis	tered via the following method	dology:			
Pre-notific maile 2/24/2(d			First ques mail 3/3/2	ed		>	Second questionnaire mailed 4/7/2023	Initiate follow-up calls to non-responders 4/28/2023 - 5/12/2023	>	Last day to completed 5/15/2	surveys
	(QUALIFIE	D RESP	ONDENT	S				RESPONSE RATE TRE	NDING		
Included bene	eficiaries w	/ho were.								2021	2022	2023
• 18 years	and older	(as of De	cember 3	1 st of the	measure	ment ye	ear)	Completed	SUBTOTAL	207	200	210
Continuo	-		plan for a	nt least fiv	e of the la	ast six n	nonths		Does not Meet Eligibility Criteria (01)	5	8	11
of the me	easuremen	t year							Language Barrier (03)	1	4	2
								Ineligible	Mentally/Physically Incapacitated (04)	4	1	2
									Deceased (05)	1	1	1
	2023 RE	SPONSE	RATE C						SUBTOTAL	11	14	16
				ALCOLA					Break-off/Incomplete (02)	5	12	15
4765	210 (Con	· /	rible)	=	210	— =	12.1%		Refusal (06)	25	46	23
1755	(Sample) ·	· ro (men	(elaig		1739			Non-response	Maximum Attempts Made (07)	1102	1281	1491
	COMPL	ETES - M	ODALIT	Y BY LAN	GUAGE				Added to DNC List (08)	0	0	0
				Int	ernet Mod	es			SUBTOTAL	1132	1339	1529
Language	Mail	Phone	Internet	QR Code	Email	URL	Total		Total Sample	1350	1553	1755
English	113	64	11	0	0	11	188		Oversampling %	0.0%	15.0%	30.0%
English	113	04	11	U	U	11	100		Response Rate	15.5%	13.0%	12.1%
Spanish	19	2	1	0	0	1	22	I	PG Response Rate	14.8%	12.2%	11.5%

Note: Respondents were given the option of completing the survey in Spanish. All members selected in the sample received both an English and a Spanish mail survey. Additionally, cover letters included a telephone number for members to call and complete the survey in Spanish.



INDUSTRY TRENDS

PG BOOK OF BUSINESS TRENDS

MEDICAID ADULT

Trend Highlights The robust Press Ganey Book of Business is valuable in monitoring industry trends. On the right, we have provided a side-by-side comparison of aggregate PG Book of Business scores to help you understand broader trends in measure scoring over the past five years.

Medicaid Adult: Among the Medicaid Adult population, one measure declined by more than 1% compared to last year - *Rating of Specialist*, while one measure increased - *Getting urgent care*.

Most scores rose at the beginning of the pandemic, but *Rating of Health Plan* and *Coordination of Care* are the only measures still rated at least 1% higher than they were in 2019. *Flu Vaccine* continues to be 4% lower than the 2019 scores.

COVID-19 Impact The pandemic caused significant disruption throughout most of 2020 and continuing through today. The disruption is reflected in the variation we've seen in health system experience scores over the last few years.

	P	G Book o	of Busine	ess Trenc	ls
	2019	2020	2021	2022	2023
Rating Questions (% 9 or 10)					
Q28. Rating of Health Plan	62.0%	64.6%	64.5%	64.0%	63.6%
Q8. Rating of Health Care	56.2%	58.8%	59.4%	57.0%	56.8%
Q18. Rating of Personal Doctor	68.8%	70.7%	70.4%	69.5%	69.2%
Q22. Rating of Specialist	66.8%	70.9%	69.7%	68.4%	67.4%
Rating Questions (% 8, 9 or 10)					
Q28. Rating of Health Plan	78.4%	80.3%	79.8%	79.6%	79.3%
Q8. Rating of Health Care	75.7%	76.9%	77.5%	75.8%	75.4%
Q18. Rating of Personal Doctor	82.7%	84.2%	83.8%	83.1%	83.2%
Q22. Rating of Specialist	82.9%	84.7%	83.9%	82.7%	82.3%
Getting Needed Care (% A/U)	83.2%	83.5%	84.1%	82.3%	82.0%
Q9. Getting care, tests, or treatment	85.5%	86.3%	85.8%	85.0%	84.8%
Q20. Getting specialist appointment	80.9%	80.7%	82.4%	79.6%	79.1%
Getting Care Quickly (% A/U)	82.7%	82.7%	82.6%	80.9%	81.5%
Q4. Getting urgent care	84.9%	85.0%	84.3%	81.7%	82.7%
Q6. Getting routine care	80.4%	80.4%	80.9%	80.0%	80.4%
Coordination of Care (Q17) (% A/U)	83.8%	85.9%	84.8%	85.0%	85.6%
Flu Vaccine: Adults 18-64 (Q31) (% Y)	45.4%	44.1%	40.6%	41.2%	41.1%

Increase of 1% or greater since 2022 Decrease of 1% or greater since 2022



EXECUTIVE SUMMARY

OVERVIEW OF TERMS

Summary Rates (SRS) are defined by NCQA in its HEDIS MY 2022 CAHPS[®] 5.1H guidelines and generally represent the most favorable response percentages.

Percentile Rankings Your plan's approximate percentile rankings in relation to the Quality Compass[®] All Plans benchmark were calculated by Press Ganey using information derived from the NCQA 1-100 Benchmark.

PG Benchmark Information The source for data contained within the PG Book of Business is all submitting plans that contracted with PG for MY 2022. Submission occurred on May 24th, 2023.

NCQA Benchmark Information The source for data contained in this publication is Quality Compass[®] All Plans 2022. 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.

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.

Non-Accreditation Notation Throughout the report you will see a notation of "+" which indicates that the given measure is not utilized for accreditation score calculation.

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

2023 DASHBOARD

MEDICAID ADULT



Rating NA = Denominator < 100

Scores: All scores displayed are Summary Rate Scores

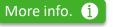
- Rating: % 9 or 10
 Composites: % Usually or Always
- Flu: % Yes
- Smoking: % Always, Usually, or Sometimes

Significance Testing: Current score is significantly higher/lower than 2022 (↑/↓) or 2021 (‡/‡).

Percentiles: Based on the 2023 PG Book of Business

Health Plan Key Driver Classification: Details can be found in the KDA section.

Rating of Health F	Plan 🛨 🛨 🛨			Getting Nee	ded Care 🔺				
Rating of Health Plan	63.9%	54 th		Composite	73.6%	6 th			
				Q9. Getting care, tests, or treatment	80.2%	19 th	Opportunity		
Rating of Health Ca	re ★ 🛧 🕇	7		Q20. Getting specialist appointment	67.1%	<5 th	Wait		
Rating of Health Care	60.6%	78 th	Power	Getting Care Quickly (NA)					
Rating of Personal Do		<u> </u>		Composite	77.4%	24 th			
		71 st		Q4. Getting urgent care	82.1%	43 rd	Opportunity		
Rating of Personal Doctor	72.3%	71°	Retain	Q6. Getting routine care	72.8%	16 th	Opportunity		
Advised to Quit Sn	noking: 2YR (NA)		Flu Vaccine: 18-64 🛛 🛧 🛧 🛧					
Advised to Quit Smoking: 2YR	57.7%	7 th		Flu Vaccine: 18-64	43.3%	66 th			
Rating of S	pecialist +			Ease of Filli	ng Out Forms +				
Rating of Specialist +	63.5%	30 th	Opportunity	Ease of Filling Out Forms +	93.9%	20 th	Wait		
Coordinatio	n of Care +			How Well Docto	rs Communicate	+			
Coordination of Care +	91.0%	92 nd	Retain	Composite	91.8%	33 rd			
Customer	Service +			Q12. Dr. explained things	92.2%	38 th	Wait		
Composite	87.6%	23 rd		Q13. Dr. listened carefully	92.2%	35 th	Wait		
Q24. Provided information or help	83.8%	43 rd	Opportunity	Q14. Dr. showed respect	94.0%	37 th	Wait		
				Q15. Dr. spent enough time	88.8%	27 th	Wait		



ESTIMATED NCQA HEALTH INSURANCE PLAN RATINGS

MEDICAID ADULT

	SCORE DEFINITION	2023 BASE	2023 HPR SCORE*	HPR 4 STAR THRESHOLD	HPR PERCENTILE BAND	PG ESTIMATED RATING
PATIENT EXPERIENCE						3
GETTING CARE						1
Getting Needed Care	Usually or Always	104	73.6%	84.6%	<10 th	1
Getting Care Quickly	Usually or Always	90	77.4%	83.8%	10 th	NA
SATISFACTION WITH PLAN	N PHYSICIANS					4
Rating of Personal Doctor	9 or 10	159	72.3%	71.1%	67 th	4
SATISFACTION WITH PLAN	NAND PLAN SERVIC	ES				3.5
Rating of Health Plan	9 or 10	202	63.8%	64.9%	33 rd	3
Rating of Health Care	9 or 10	127	60.6%	58.7%	67 th	4
PREVENTION						
Flu Vaccinations Adults Ages 18-64	Yes	171	43.2%	42.4%	67 th	4
TREATMENT						
Smoking Advice: <i>Rolling Average</i>	Sometimes, Usually or Always	97	57.7%	75.4%	<10 th	NA

*HPR scores are truncated to three digits (XX.X%) according to the NCQA calculation protocol for Health Plan Ratings. Please note that scores on this slide may differ slightly compared to scores found throughout the rest of the report.

EXPLANATION

NCQA calculates health plan ratings (HPR) by evaluating plans in three categories: consumer satisfaction, clinical quality (includes prevention and treatment) and NCQA Accreditation Standards score.

The overall NCQA star rating is the weighted average of an organization's HEDIS and CAHPS measure ratings, plus Accreditation bonus points (if the organization has NCQA Accreditation), rounded to the nearest half point.

The CAHPS measures are classified based on their national percentile (10th, 33rd, 67th and 90th) into scores ranging from 1 to 5 (in increments of 0.5), where 5 is the highest score and 1 is the lowest.

Results are summarized in the table to the left. **Percentiles and ratings are estimated by PG** based on the 2022 NCQA data and benchmarks.

Rating = 1	Rating = 2	Rating = 3	Rating = 4	Rating = 5
<10 th	10 th – 32 nd	33 rd – 66 th	67 th – 89 th	≥90 th
Percentile	Percentile	Percentile	Percentile	Percentile

Notes:

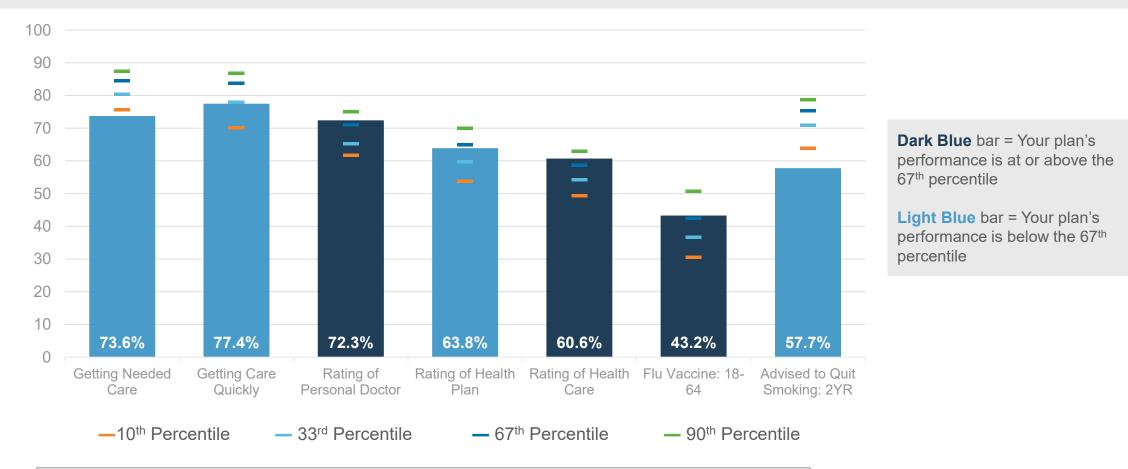
- NCQA will assign a measure result of NA to overall ratings or composites with a denominator (i.e., the average number of responses across all questions used to calculate the composite) less than 100.
- Medicaid plans have the option to be scored on either Adult CAHPS or Child CAHPS data.

PERFORMANCE TO STAR CUT POINTS

MEDICAID ADULT

COMPARISON TO QUALITY COMPASS CUT POINTS

The graph shows how your plan's **Estimated Health Plan Rating (HPR) scores** used for accreditation ratings compare to the most recent Quality Compass thresholds published by NCQA (Fall 2022).



HPR scores are truncated to three digits (XX.X%) according to the NCQA calculation protocol for Health Plan Ratings. Please note that scores on this slide may differ slightly compared to scores found throughout the rest of the report.

* Scores are % 9 or 10, % Always or Usually, % Yes (Flu) and % Always, Usually or Sometimes (Smoking Advice: Rolling Average).

MEASURE SUMMARY

MEDICAID ADULT

	SUMMA	RY RATE		2023 PG BOOK OF BUSINESS BENCHMARK									
MEASURE	2022	2023	CHANGE	0	PI 20	ERCENTILE 40	DISTRIBU	ITION 80	100	PERCENTILE RANK	BoB SRS		
Health Plan Domain													
Rating of Health Plan % 9 or 10	72.2%	63.9%	-8.3							54 th	63.6%		
Getting Needed Care % Usually or Always	76.9%	73.6%	-3.3							6 th	82.0% 🔻		
Customer Service + % Usually or Always	94.4%	87.6%	-6.8							23 rd	89.8%		
Ease of Filling Out Forms + % Usually or Always	95.8%	93.9%	-1.9							20 th	95.3%		
Health Care Domain													
Rating of Health Care % 9 or 10	56.6%	60.6%	4.0							78 th	56.8%		
Getting Care Quickly % Usually or Always	79.7%	77.4%	-2.3							24 th	81.5%		
How Well Doctors Communicate + % Usually or Always	88.1%	91.8%	3.7							33 rd	92.8%		
Coordination of Care + % Usually or Always	80.8%	91.0%	10.2							92 nd	85.6%		
Rating of Personal Doctor % 9 or 10	68.7%	72.3%	3.6							71 st	69.2%		
Rating of Specialist + % 9 or 10	75.3%	63.5%	-11.8							30 th	67.4%		

Significance Testing Current score is significantly higher/lower than the 2022 score (\uparrow/\downarrow) or benchmark score (\blacktriangle/∇).



MY 2022 Medicaid Adult CAHPS Report - 12

MEASURE SUMMARY

MEDICAID ADULT

	SUMMA		2023 PG BOOK OF BUSINESS BENCHMARK									
MEASURE	2022 2023		CHANGE						100	PERCENTILE RANK	BoB SRS	
Effectiveness of Care				0	20	40	60	80	100			
Effectiveness of Care												
Flu Vaccine: 18-64 % Yes	47.4%	43.3%	-4.1							66 th	41.1%	
Advised to Quit Smoking: 2YR % Sometimes, Usually, or Always	59.8%	57.7%	-2.1							7 th	74.3%	
Discussing Cessation Meds: 2YR + % Sometimes, Usually, or Always	40.4%	33.0%	-7.4							<5 th	53.0% 🔻	
Discussing Cessation Strategies: 2YR + % Sometimes, Usually, or Always	34.4%	32.0%	-2.4							9 th	47.2% 🔻	



HEALTH EQUITY

MEDICAID ADULT

	Above the Above the	performing e plan score by 5 or more points e plan score		More info. 🧃		0 1	0 0 1		alth equity among key de idicates a larger disparity.	0 1	tation Measure er Measure
		e plan score e plan score by 5 or more points		Rating of Health Pla	an	Rating of Health Care	Getting Needed	Care	Getting Care Quickly	Flu Vaccine: 18-64	Rating of Personal Doctor
	Above/bel	low plan score but has low base (<3	0)	SRS 2		SRS 🛆	SRS	Δ	SRS 🛆	SRS 🛆	SRS 🛆
	Demographic	Category	Total	63.9%		60.6%	73.6%		77.4%	43.3%	72.3%
88	Gender	Male	n = 81	-1	1%	-5%		-3%	-6%	-10%	-10%
14	Gender	Female	n = 126	1	%	1%		1%	2%	6%	5%
		18 – 34	n = 36	0	%	-8%		-3%	-10%	-7%	-12%
90		35 – 44	n = 27		%	-0 %		-3 % 7%	18%	-1%	-12 %
$\Omega \Omega \delta$	Age	45 – 54	n = 36		3%	-3%		-14%	-13%	-3%	-8%
		55 or older	n = 106		%	1%		4%	4%	5%	6%
						_					
\sim	Overall	Excellent/Very Good	n = 60		%	2%		-1%	4%	0%	11%
	Health	Good	n = 63		3%	1%		5%	1%	1%	-10%
		Fair/Poor	n = 80	-4	1%	-3%		-4%	-2%	-2%	-1%
						5 0/		4.07	40/	00/	00/
Pa	Mental	Excellent/Very Good	n = 73		%	5%		-1%	1%	0%	6%
	Health	Good	n = 62		2%	-6%	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	1%	3%	-4%	-4%
		Fair/Poor	n = 70	-ö	3%	-1%		-1%	-3%	5%	-3%
		HS Grad or less	n = 108	6	%	1%		2%	-2%	-2%	1%
	Education	Some college or more	n = 95		5%	-3%		-2%	1%	2%	-2%
		White	n = 108		%	-2%		-2%	1%	-2%	-1%
		Black/African-American	n = 10	16		23%		3%	16%	1%	-17%
	Race/	Asian	n = 5		4%	6%		-24%	10%	37%	3%
NAD	Ethnicity	Native Hawaiian/Pacific Islander	n = 1		4%	NA		NA	-77%	57%	-72%
U42I		American Indian or Alaska Native	n = 31		8%	-19%		-20%	-17%	-3%	1%
		Other	n = 58		%	-1%		2%	-2%	7%	6%
		Hispanic/Latino	n = 111	10	0%	5%		5%	1%	8%	id Adult CAHPS Report - 14

MY 2022 Medicaid Adult CAHPS Report - 14

HEALTH EQUITY

MEDICAID ADULT

	Above the Above the	performing plan score by 5 or more points plan score		More info	. (j	The infographi groups across							Accred Ot
		plan score plan score by 5 or more points		Rating of Specia	alist +	Coordination of	of Care +	Customer S	ervice +	How Well D Communio		Ease of Fill Forms	
	Above/bel	ow plan score but has low base (<3	80)	SRS	\bigtriangleup	SRS	\bigtriangleup	SRS	\bigtriangleup	SRS	\bigtriangleup	SRS	\bigtriangleup
D	Demographic	Category	Total	63.5%		91.0%		87.6%		91.8%		93.9%	
20	Ormalan	Male	n = 81		-21%		-5%		3%		-5%		-2%
\mathcal{R}	Gender	Female	n = 126		8%		2%		-2%		2%		1%
		18 – 34	n = 36		18%		0%		-3%		6%		- 6%
A A	Age	35 – 44	n = 27		-21%		9%		12%		-1%		6%
447	- ge	45 – 54	n = 36		-14%		-22%		-9%		-5%		-3%
		55 or older	n = 106		3%		5%		1%		0%		1%
												_	
\sim	Overall	Excellent/Very Good	n = 60		-5%		-4%		-4%		0%		-4%
\checkmark	Health	Good	n = 63		-3%		5%		-4%		0%	- - -	-1%
The second secon		Fair/Poor	n = 80		2%		-1%		4%		0%		4%
					0%		0%		50/	_	09/		00/
2	Mental	Excellent/Very Good	n = 73		-1%				-5%		-2% 6%		2% -2%
	Health	Good Fair/Poor	n = 62	1 N N	-1% 1%		-3% 2%		4% 1%		6% -4%	-	-2% 0%
		Fair/Poor	n = 70		1%		۷%		1%		-4%		0%
		HS Grad or less	n = 108		15%		-2%		4%		-2%		-2%
E	ducation	Some college or more	n = 95		-10%		1%		-6%	- D	1%		2%
										-			
		White	n = 108		-2%		-2%		-2%		-2%		1%
		Black/African-American	n = 10		37%		9%		12%		8%		6%
	Deset	Asian	n = 5		-30%		-41%		-63%		-17%		-14%
88	Race/	Native Hawaiian/Pacific Islander	n = 1		NA		NA		NA		8%		6%
	Ethnicity	American Indian or Alaska Native	n = 31		-14%		9%		-2%		6%		-4%
		Other	n = 58		-3%		1%		9%		1%		-3%
		Hispanic/Latino	n = 111		10%		7%		4%		0%		-1%

MEASURE SUMMARY

MEDICAID ADULT

TOP THREE Performing Measures

Your plan's percentile rankings for these measures were the highest compared to the 2023 PG Book of Business.

MEAQUDE	2023	PLAN SUM	MARY RATE SCC	DRE		2022 QC		2023 PG BoB			
MEASURE	Valid n	2022	2023	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE	
Coordination of Care + (% Usually or Always)	78^	80.8%	91.0%	10.2	84.0%	7.0	95 th	85.6%	5.4	92 nd	
Rating of Health Care (% 9 or 10)	127	56.6%	60.6%	4.0	56.5%	4.1	77 th	56.8%	3.8	78 th	
Rating of Personal Doctor (% 9 or 10)	159	68.7%	72.3%	3.6	68.3%	4.0	75 th	69.2%	3.1	71 st	

BOTTOM THREE Performing Measures

Your plan's percentile rankings for these measures were the lowest compared to the 2023 PG Book of Business.

MEASURE	2023	PLAN SUM	MARY RATE SCC	RE		2022 QC		2023 PG BoB		
MEASURE	Valid n	2022	2023	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Getting Care Quickly (% Usually or Always)	90^	79.7%	77.4%	-2.3	80.2%	-2.8	27 th	81.5%	-4.1	24 th
Customer Service + (% Usually or Always)	80^	94.4%	87.6%	-6.8	88.9%	-1.3	31 st	89.8%	-2.2	23 rd
Getting Needed Care (% Usually or Always)	104	76.9%	73.6%	-3.3	81.9% 🔻	-8.3	5 th	82.0% 🔻	-8.4	6 th

Significance Testing: Current score is significantly higher/lower than the 2022 score (\uparrow/\downarrow) or benchmark score (\land/\triangledown) .

IMPROVEMENT STRATEGIES

Improving Performance

These measures had the lowest percentile rankings in comparison to the 2023 PG Book of Business for your plan.

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 – Customer Service

- 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.

Improvement Strategies – Getting Needed Care

- 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.
- 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. Crossreference 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.
- Establish a specialist referral hotline for providers and members.



KEY DRIVER ANALYSIS OF RATING OF HEALTH PLAN

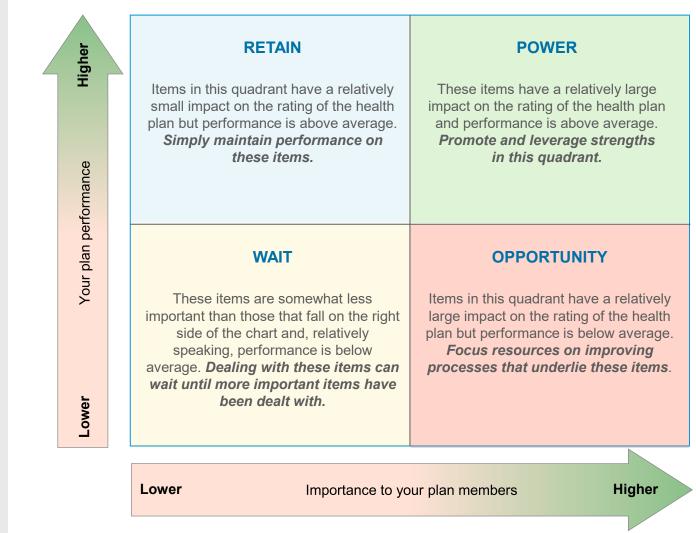
POWER CHART: EXPLANATION

POWeR™ CHART CLASSIFICATION MATRIX

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

MEDICAID ADULT

				20	022	20)23	Higher	<u>+</u>	RETAIN	POWER	
			SURVEY MEASURE	SRS	%tile*	SRS	%tile*	riigrici				
			POWER						17			
R	Rating	Q 8	Rating of Health Care	56.6%	47 th	60.6%	78 th					
			OPPORTUNITY									
	SQ	Q47	Satisfied with care plans	74.0%		69.4%						
•	CS	Q25	Treated with courtesy and respect	98.6%	95 th	91.4%	12 th				8	
	Rating	Q22	Rating of Specialist +	75.3%	91 st	63.5%	30 th		18			
•	CS	Q24	Provided information or help	90.1%	90 th	83.8%	43 rd					
•	SQ	Q43	Satisfied with help received to coordinate care	76.5%		77.6%						
• (GNC	Q9	Getting care, tests, or treatment	79.1%	11 th	80.2%	19 th					
• (GCQ	Q6	Getting routine care	76.7%	27 th	72.8%	16 th					
• (GCQ	Q4	Getting urgent care	82.6%	51 st	82.1%	43 rd	Щ				
			WAIT					PERFORMANCE				
• (GNC	Q20	Getting specialist appointment	74.7%	21 st	67.1%	<5 th	Į				
•	CS	Q27	Ease of Filling Out Forms +	95.8%	47 th	93.9%	20 th	N N N			4 24	
🔶 H	WDC	Q13	Dr. listened carefully	88.4%	9 th	92.2%	35 th	ō			_	
🔶 H	WDC	Q14	Dr. showed respect	89.3%	<5 th	94.0%	37 th	ЧЧ	12 14 13			
🔶 H'	IWDC	Q12	Dr. explained things	89.3%	13 th	92.2%	38 th	Ш			(43) 22	
🔶 H'	IWDC	Q15	Dr. spent enough time	85.2%	8 th	88.8%	27 th	-				
			RETAIN						15			
R	Rating	Q18	Rating of Personal Doctor	68.7%	43 rd	72.3%	71 st			27	9	
	CC	Q17	Coordination of Care +	80.8%	20 th	91.0%	92 nd			\smile		(47)
			*Percentiles b	ased on the	PG Book of E	Business of th	ne listed year	:			25	
										20		
								Lawan		20		
								Lower		WAIT	OPPORTUNITY	
									ver			hei
									Lower	IMPOR	TANCE	Higher
												<u> </u>
										More ir		

KEY DRIVERS OF RATING OF HEALTH PLAN

MEDICAID ADULT

		ALIGNMENT Are your key		VER RANK			SUMMARY RATE SCORE		PG BoB	CLASSIFICATION		
		drivers typical of the industry?	YOUR PLAN	INDUSTRY	ATTRIBUTE		YOUR PLAN	INDUSTRY	%TILE*	2022		2023
	TOP 10 KEY DRIVERS				Q28	Rating of Health Plan	63.9%	63.6%	54 th (-39)			
	to your members and the		1		Q47	Satisfied with care plans	69.4%			Орр.		Орр.
		\checkmark	2	7	Q25	Treated with courtesy and respect	91.4%	95.0%	12 th (-83)	Retain	→	Орр.
PLAN		\checkmark	3	2	Q22	Rating of Specialist +	63.5%	67.4%	30 th (-61)	Power	→	Орр.
Ř		\checkmark	4	8	Q24	Provided information or help	83.8%	84.5%	43 rd (-47)	Retain	→	Орр.
YOU			5		Q43	Satisfied with help received to coordinate care	77.6%			Wait	→	Орр.
		\checkmark	6	4	Q9	Getting care, tests, or treatment	80.2%	84.8%	19 th (+8)	Орр.		Орр.
	your plan.	\checkmark	7	5	Q6	Getting routine care	72.8%	80.4%	16 th (-11)	Wait	→	Орр.
	PG Book of Business regression analysis has	\checkmark	8	1	Q8	Rating of Health Care	60.6%	56.8%	78 th (+31)	Wait	→	Power
STRY	identified Key Drivers of Rating of Health Plan.	\checkmark	9	6	Q4	Getting urgent care	82.1%	82.7%	43 rd (-8)	Орр.		Орр.
SNDNS	The numbers represent		10	11	Q20	Getting specialist appointment	67.1%	79.1%	<5 th (-18)	Wait		Wait
N	the ranked importance across the entire Book of		12	9	Q13	Dr. listened carefully	92.2%	92.9%	35 th (+26)	Opp.	→	Wait
	Business.		13	10	Q14	Dr. showed respect	94.0%	94.6%	37 th (+35)	Opp.	→	Wait
cal	Industry scores & rankings are culated based on the 2023 PG Book Business. Any items below the dotted		14	3	Q18	Rating of Personal Doctor	72.3%	69.2%	71 st (+28)	Opp.	\rightarrow	Retain

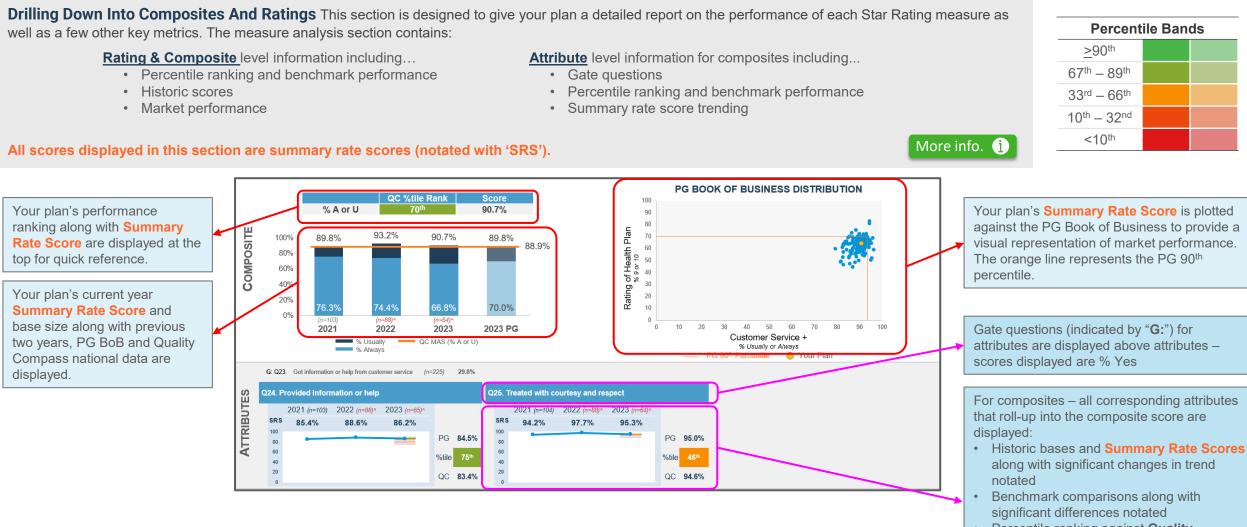
calculated based on the 2023 PG Book of Business. Any items below the dotted line are Top 10 industry key drivers that are not identified as key drivers for your plan.

*Differentials are based on comparisons to your plan's prior year percentile rankings.



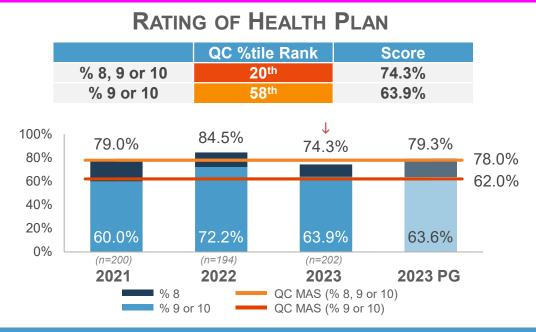
MEASURE ANALYSES

SECTION INFORMATION



- Percentile ranking against Quality
 Compass
- Graphic representation of trend and 2022
 Quality Compass percentile bands

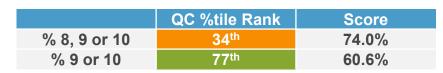
RATINGS MEDICAID ADULT

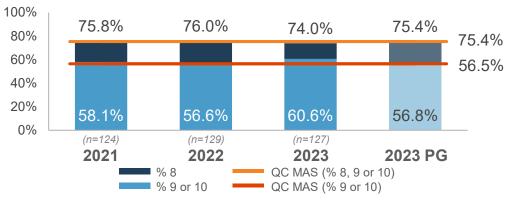


Key Drivers Of The Rating Of The Health Plan

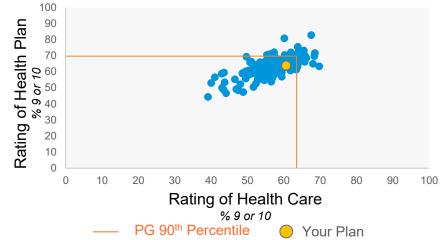
	•	.	
	POWER		OPPORTUNITIES
Q 8	Rating of Health Care	Q47	Satisfied with care plans
		Q25	Treated with courtesy and respect
		Q22	Rating of Specialist +
		Q24	Provided information or help
		Q43	Satisfied with help received to coordinate care
		Q9	Getting care, tests, or treatment
		Q6	Getting routine care
		Q4	Getting urgent care

RATING OF HEALTH CARE



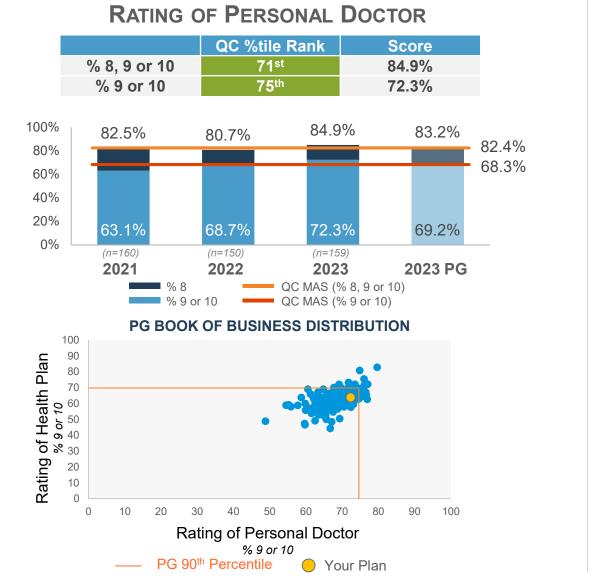


PG BOOK OF BUSINESS DISTRIBUTION

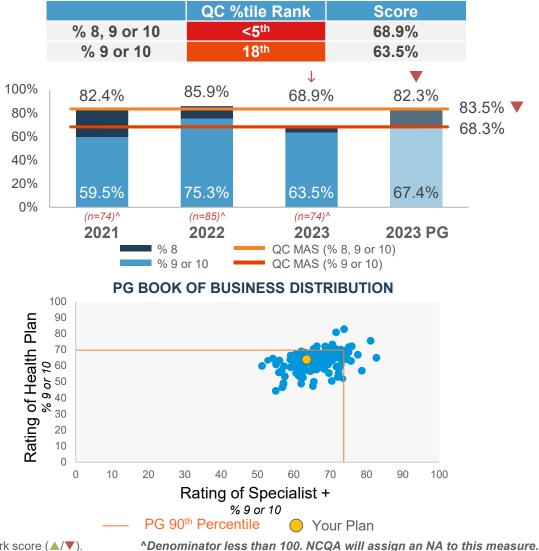


Significance Testing: Current score is significantly higher/lower than the 2022 score (\uparrow/\downarrow) , the 2021 score (\ddagger/\ddagger) or benchmark score $(\blacktriangle/\triangledown)$.

RATINGS MEDICAID ADULT



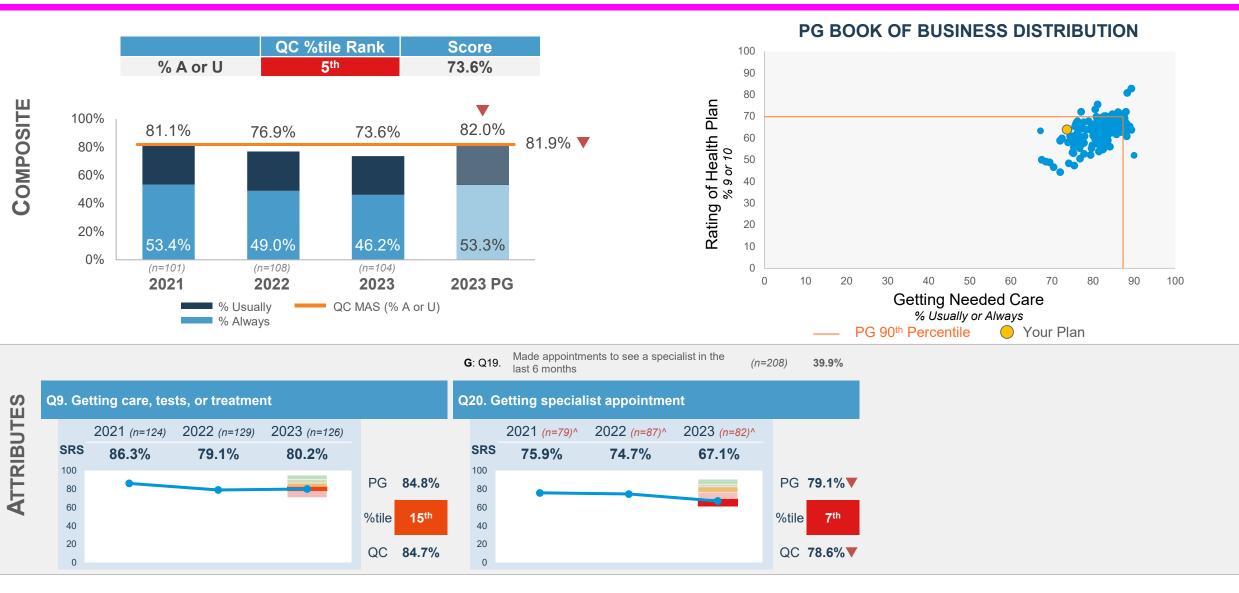
RATING OF SPECIALIST +



Significance Testing: Current score is significantly higher/lower than the 2022 score (\uparrow/\downarrow) , the 2021 score (\ddagger/\ddagger) or benchmark score $(\blacktriangle/\triangledown)$.

GETTING NEEDED CARE

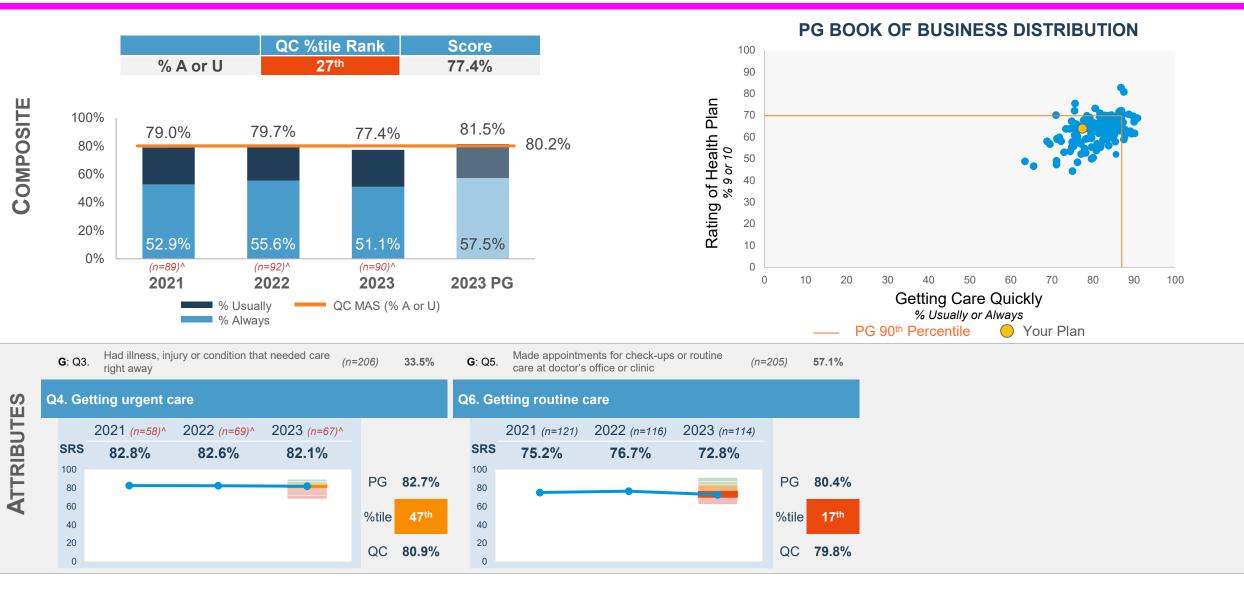
MEDICAID ADULT



Significance Testing: Current score is significantly higher/lower than the 2022 score ($^{/\downarrow}$), the 2021 score ($^{/\ddagger}$) or benchmark score ($^{/\blacktriangledown}$).

GETTING CARE QUICKLY

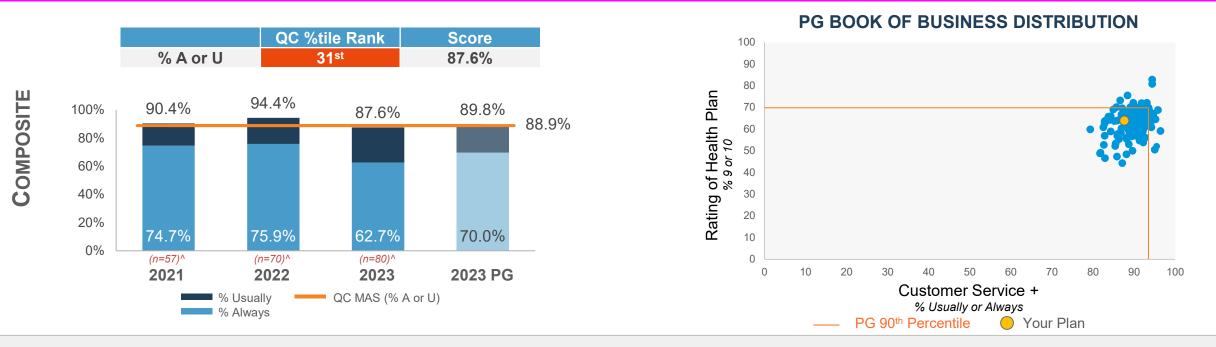
MEDICAID ADULT



Significance Testing: Current score is significantly higher/lower than the 2022 score (\uparrow/\downarrow), the 2021 score (\ddagger/\ddagger) or benchmark score ($\blacktriangle/\triangledown$).

CUSTOMER SERVICE +

MEDICAID ADULT



G: Q23. Got information or help from customer service (n=208) 39.9%

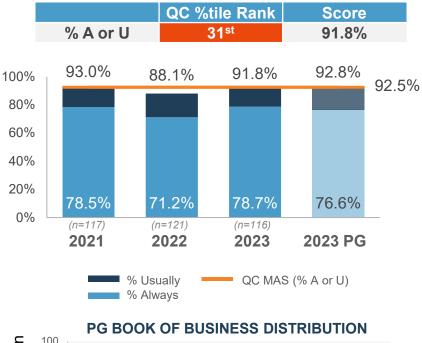


Significance Testing: Current score is significantly higher/lower than the 2022 score (↑/↓), the 2021 score (‡/≢) or benchmark score (▲/▼).

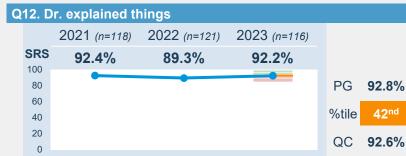
How Well Doctors Communicate +

MEDICAID ADULT

COMPOSITE







ATTRIBUTES



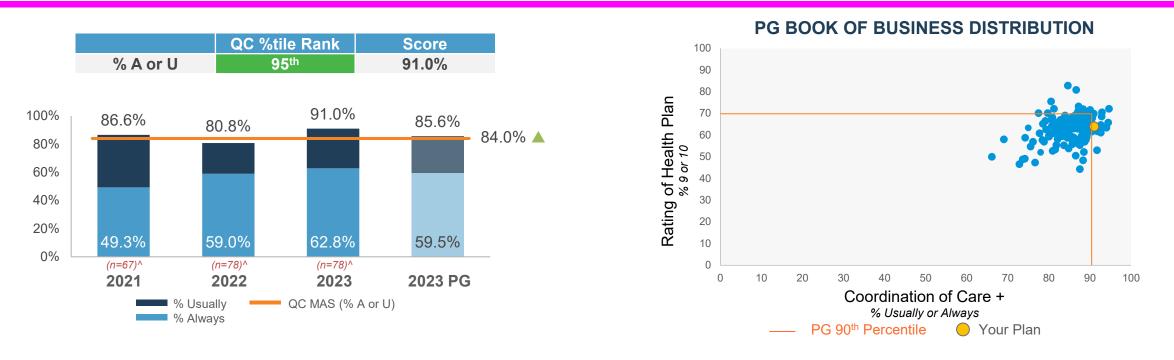
Q13. D	r. listened car	efully				Q15. Dr. spent enough time						
	2021 (n=117)	2022 (n=121)	2023 (n=116)				20	021 (n=118)	2022 (n=122)	2023 (n=116)		
SRS 100	92.3%	88.4%	92.2%			SRS		92.4%	85.2%	88.8%		
80				PG	92.9%	100 80					PG	91.0%
60 40				%tile	39 th	60					%tile	35 th
20						40 20						
0				QC	92.7%	0					QC	90.4%

Significance Testing: Current score is significantly higher/lower than the 2022 score ($^{/\downarrow}$), the 2021 score ($^{/\ddagger}$) or benchmark score ($^{/\blacktriangledown}$).

Q

COORDINATION OF CARE +

MEDICAID ADULT





SUMMARY OF TREND AND BENCHMARKS

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.

<u>Summary Rate Scores</u>: Shows how your plan's composite and key question Summary Rates compare to trend data (if applicable) and benchmark scores. 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 2022 score (\uparrow), the 2021 score (\ddagger) or benchmark score (\blacktriangle). **Red** – Current year score is significantly lower than the 2022 score (\downarrow), the 2021 score (\ddagger) or benchmark score (\blacktriangledown).

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.

BENCHMARK INFORMATION

Available Benchmarks The following benchmarks are used throughout the report.									
	2022 Quality Compass [®] All Plans	2022 NCQA 1-100 Benchmark	2023 Press Ganey Book of Business						
	Includes all Medicaid Adult samples that submitted data to NCQA in 2022.	A percentile benchmark (with values ranging from the first through the one hundredth percentile) calculated by NCQA and derived from Medicaid Adult data submitted to NCQA in 2022.	Includes all Medicaid samples that contracted with Press Ganey to administer the MY 2022 CAHPS 5.1H survey and submitted data to NCQA.						
PROS	 Is presented in NCQA's The State of Health Care Quality 	 Utilized by Press Ganey to calculate approximate percentile ranking of plan scores in relation to the Quality Compass[®] All Plans benchmark 	 Provides a benchmark for each question from the survey Permits precise percentile ranking of plan compared to benchmark 						
CONS	 Only contains benchmarks for certain key questions, composites, and rating questions 	 Only contains benchmarks for certain key questions, composites, and rating questions 	 Contains fewer plans than the Quality Compass[®] All Plans Benchmarks 						
SIZE	178 Plans	178 Plans	160 Plans / 38,674 Respondents						

SUMMARY RATE SCORES

MEDICAID ADULT

		2023 Valid n	2021	2022	2023	2023 PG BoB	2022 QC
	Rating Questions (% 9 or 10)						
*	Q28. Rating of Health Plan	202	60.0%	72.2%	63.9%	63.6%	62.0%
\star	Q8. Rating of Health Care	127	58.1%	56.6%	60.6%	56.8%	56.5%
*	Q18. Rating of Personal Doctor	159	63.1%	68.7%	72.3%	69.2%	68.3%
	Q22. Rating of Specialist +	74^	59.5%	75.3%	63.5%	67.4%	68.3%
	Rating Questions (% 8, 9 or 10)						
	Q28. Rating of Health Plan	202	79.0%	84.5%	74.3% 🔰	79.3%	78.0%
	Q8. Rating of Health Care	127	75.8%	76.0%	74.0%	75.4%	75.4%
	Q18. Rating of Personal Doctor	159	82.5%	80.7%	84.9%	83.2%	82.4%
	Q22. Rating of Specialist +	74^	82.4%	85.9%	68.9% 🗸	82.3% 🔻	83.5% 🔻
*	Getting Needed Care (% Usually or Always)	104	81.1%	76.9%	73.6%	82.0% 🔻	81.9% 🔻
	Q9. Getting care, tests, or treatment	126	86.3%	79.1%	80.2%	84.8%	84.7%
	Q20. Getting specialist appointment	82^	75.9%	74.7%	67.1%	79.1% 🔻	78.6% 🔻
*	Getting Care Quickly (% Usually or Always)	90^	79.0%	79.7%	77.4%	81.5%	80.2%
	Q4. Getting urgent care	67^	82.8%	82.6%	82.1%	82.7%	80.9%
	Q6. Getting routine care	114	75.2%	76.7%	72.8%	80.4%	79.8%
	Effectiveness of Care (% Sometimes, Usually, or Always)						
*	Q31. Flu Vaccine: 18-64 <i>(% Yes)</i>	171	38.3%	47.4%	43.3%	41.1%	40.1%
*	Q33. Advised to Quit Smoking: 2YR	97^	68.5%	59.8%	57.7%	74.3% 🔻	72.5% 🔻
	Q34. Discussing Cessation Meds: 2YR +	97^	41.5%	40.4%	33.0%	53.0% 🔻	50.8% 🔻
	Q35. Discussing Cessation Strategies: 2YR +	97^	43.0%	34.4%	32.0%	47.2% 🔻	45.3% 🔻

SUMMARY RATE SCORES

MEDICAID ADULT

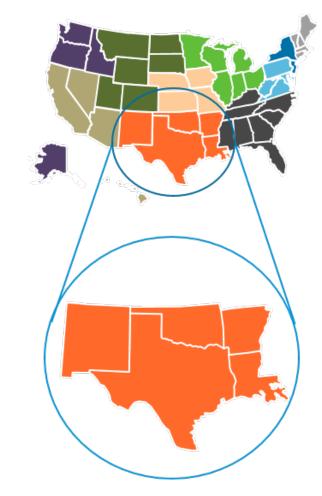
	2023 Valid n	2021	2022	2023	2023 PG BoB	2022 QC
Customer Service + (% Usually or Always)	80^	90.4%	94.4%	87.6%	89.8%	88.9%
Q24. Provided information or help	80^	82.5%	90.1%	83.8%	84.5%	83.4%
Q25. Treated with courtesy and respect	81^	98.3%	98.6%	91.4% 🗸	95.0%	94.6%
How Well Doctors Communicate + (% Usually or Always)	116	93.0%	88.1%	91.8%	92.8%	92.5%
Q12. Dr. explained things	116	92.4%	89.3%	92.2%	92.8%	92.6%
Q13. Dr. listened carefully	116	92.3%	88.4%	92.2%	92.9%	92.7%
Q14. Dr. showed respect	116	94.9%	89.3%	94.0%	94.6%	94.3%
Q15. Dr. spent enough time	116	92.4%	85.2%	88.8%	91.0%	90.4%
Q17. Coordination of Care +	78^	86.6%	80.8%	91.0%	85.6%	84.0% 🔺
Q27. Ease of Filling Out Forms + (% Usually or Always)	197	95.3%	95.8%	93.9%	95.3%	95.5%

REGIONAL PERFORMANCE

MEDICAID ADULT

		SUMMARY RATE	2023 PG BoB REGION
	Rating Questions (% 9 or 10)		
\star	Q28. Rating of Health Plan	63.9%	63.8%
\star	Q8. Rating of Health Care	60.6%	57.5%
\star	Q18. Rating of Personal Doctor	72.3%	70.2%
	Q22. Rating of Specialist +	63.5%	66.0%
	Rating Questions (% 8, 9 or 10)		
	Q28. Rating of Health Plan	74.3%	78.3%
	Q8. Rating of Health Care	74.0%	75.4%
	Q18. Rating of Personal Doctor	84.9%	83.3%
	Q22. Rating of Specialist +	68.9%	81.1% 💠
*	Getting Needed Care (% Usually or Always)	73.6%	80.0%
	Q9. Getting care, tests, or treatment	80.2%	82.7%
	Q20. Getting specialist appointment	67.1%	77.3%
*	Getting Care Quickly (% Usually or Always)	77.4%	81.4%
	Q4. Getting urgent care	82.1%	83.6%
	Q6. Getting routine care	72.8%	79.2%
	Effectiveness of Care (% Sometimes, Usually, or Always)		
\star	Q31. Flu Vaccine: 18-64 <i>(% Yes)</i>	43.3%	42.3%
\star	Q33. Advised to Quit Smoking: 2YR	57.7%	67.9% 💠
	Q34. Discussing Cessation Meds: 2YR +	33.0%	44.7% 🔶
	Q35. Discussing Cessation Strategies: 2YR +	32.0%	40.4%

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

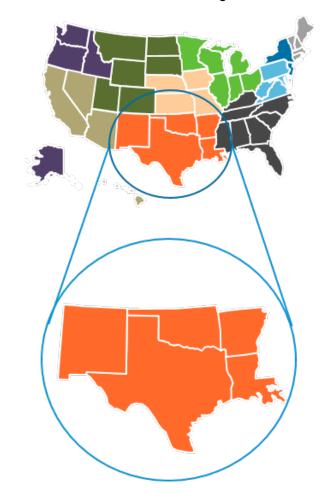
Significance Testing Current year score is significantly higher/lower (❖/❖) than the 2023 PG BoB Region score. MY 2022 Medicaid Adult CAHPS Report - 36

REGIONAL PERFORMANCE

MEDICAID ADULT

	SUMMARY RATE	2023 PG BoB REGION
Customer Service + (% Usually or Always)	87.6%	90.9%
Q24. Provided information or help	83.8%	85.8%
Q25. Treated with courtesy and respect	91.4%	96.0%
How Well Doctors Communicate + (% Usually or Always)	91.8%	92.3%
Q12. Dr. explained things	92.2%	92.1%
Q13. Dr. listened carefully	92.2%	92.7%
Q14. Dr. showed respect	94.0%	93.8%
Q15. Dr. spent enough time	88.8%	90.4%
Q17. Coordination of Care +	91.0%	84.5% 🚸
Q27. Ease of Filling Out Forms + (% Usually or Always)	93.9%	95.6%

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/lower (�/�) than the 2023 PG BoB Region score. MY 2022 Medicaid Adult CAHPS Report - 37

PERCENTILE RANKINGS

		2023 Plan	QC		National Percentiles from 2022 Quality Compass			PG				ional F 8 PG B										
		Score	%tile	5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th	%tile	5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
	Rating Questions (% 9 or 10)																					
*	Q28. Rating of Health Plan	63.9%	58 th	48.2	53.9	58.6	59.8	62.0	64.9	66.2	70.1	72.0	54 th	51.2	55.2	59.4	61.0	63.8	65.6	66.7	69.8	71.3
*	Q8. Rating of Health Care	60.6%	77 th	47.6	49.3	52.9	54.2	56.7	58.8	59.9	63.0	66.2	78 th	43.9	48.7	53.2	55.2	56.8	58.7	60.0	63.5	65.6
*	Q18. Rating of Personal Doctor	72.3%	75 th	60.4	61.8	64.3	65.3	68.5	71.1	72.3	75.0	76.4	71 st	59.8	62.1	65.1	66.7	69.0	71.5	72.8	74.6	76.0
	Q22. Rating of Specialist +	63.5%	18 th	61.1	61.9	64.7	66.3	67.5	70.0	72.9	75.5	75.9	30 th	56.7	59.1	62.4	64.5	67.1	69.4	70.8	73.7	75.0
	Rating Questions (% 8, 9 or 10)																					
	Q28. Rating of Health Plan	74.3%	20 th	68.6	71.3	75.1	76.6	78.5	80.4	81.5	84.0	85.6	17 th	70.4	72.4	75.6	77.0	79.3	81.2	82.0	85.6	86.5
	Q8. Rating of Health Care	74.0%	34 th	67.0	70.1	72.8	73.9	75.9	77.7	78.4	80.3	81.5	32 nd	66.7	69.5	72.9	74.1	75.7	77.2	77.9	80.9	83.1
	Q18. Rating of Personal Doctor	84.9%	71 st	75.5	77.6	79.9	80.7	82.6	84.4	85.4	87.5	88.8	69 th	76.3	78.0	80.2	81.8	83.4	84.9	85.3	87.2	87.9
	Q22. Rating of Specialist +	68.9%	<5 th	76.0	78.5	80.9	82.3	83.6	85.3	85.9	88.6	90.5	<5 th	73.9	75.8	78.6	80.0	82.3	84.1	85.1	87.7	88.7
*	Getting Needed Care (% U/A)	73.6%	5 th	71.7	75.6	79.2	80.4	82.7	84.6	85.2	87.5	87.9	6 th	72.2	75.1	77.7	79.9	81.8	84.0	85.3	87.3	88.1
	Q9. Getting care, tests, or treatment	80.2%	15 th	76.6	78.1	82.1	83.2	85.5	86.7	87.9	90.3	91.4	19 th	75.4	78.4	81.6	82.8	84.9	87.3	88.5	89.6	91.1
	Q20. Getting specialist appointment	67.1%	7 th	66.7	69.7	74.8	76.8	79.8	82.4	83.3	85.0	86.4	<5 th	68.4	70.1	74.3	76.3	78.6	81.0	82.3	85.6	86.6
*	Getting Care Quickly (% U/A)	77.4%	27 th	69.9	70.2	77.2	77.9	80.5	83.8	84.8	86.9	88.1	24 th	71.2	74.8	77.5	79.1	81.8	84.3	85.0	87.0	88.0
	Q4. Getting urgent care	82.1%	47 th	71.2	71.8	76.9	80.2	82.6	84.2	85.4	87.3	88.3	43 rd	72.5	75.4	78.9	80.3	83.3	84.9	86.1	88.7	90.5
	Q6. Getting routine care	72.8%	17 th	67.4	69.8	75.5	77.6	81.3	83.5	84.3	87.1	88.2	16 th	69.2	71.4	75.4	77.3	81.0	83.3	84.7	87.0	88.3
	Effectiveness of Care (% S/U/A)																					1
*	Q31. Flu Vaccine: 18-64 (% Yes)	43.3%	69 th	28.7	30.6	34.7	36.7	40.4	42.5	45.0	50.7	54.6	66 th	28.3	31.7	36.2	37.6	39.1	43.5	46.7	53.5	56.8
*	Q33. Advised to Quit Smoking: 2YR	57.7%	<5 th	61.5	64.0	69.3	70.9	73.0	75.5	76.7	78.7	79.4	7 th	55.8	61.1	68.2	70.1	74.0	76.8	78.3	83.6	86.8
	Q34. Discussing Cessation Meds: 2YR +	33.0%	<5 th	39.3	42.0	46.0	47.1	51.6	53.3	54.9	60.1	62.8	<5 th	33.3	38.5	45.0	46.8	50.9	57.1	58.8	66.4	66.8
	Q35. Discussing Cessation Strategies: 2YR +	32.0%	<5 th	35.8	37.5	40.7	41.8	44.7	47.5	49.4	52.7	54.8	9 th	29.0	32.8	40.4	42.2	45.6	51.0	53.3	59.0	61.2

PERCENTILE RANKINGS

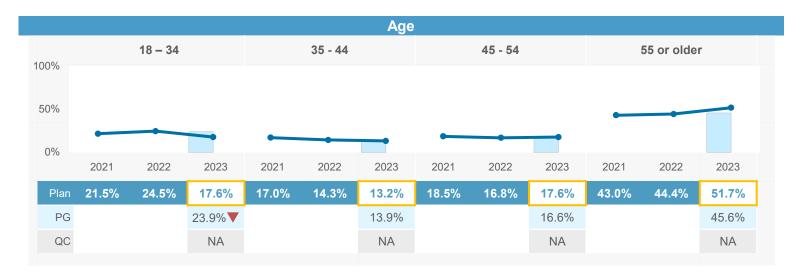
	2023 Plan	QC		National Percentiles from 2022 Quality Compass							PG										
	Score	%tile	5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th	%tile	5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
Customer Service + (% U/A)	87.6%	31 st	83.6	84.1	86.7	87.9	89.7	90.7	91.0	92.3	92.6	23 rd	82.9	85.2	88.0	88.7	90.1	91.4	91.8	93.5	94.4
Q24. Provided information or help	83.8%	44 th	75.1	76.9	80.5	82.2	84.6	85.7	86.2	89.0	89.3	43 rd	75.1	77.9	82.0	82.9	84.6	86.4	87.6	89.7	90.8
Q25. Treated with courtesy and respect	91.4%	13 th	90.1	90.6	92.5	94.0	95.5	96.0	96.2	97.7	98.2	12 th	90.3	91.2	93.2	93.8	95.4	96.5	97.1	98.3	98.9
How Well Doctors Communicate + (% U/A)	91.8%	31 st	88.4	89.0	90.8	92.0	92.9	93.8	94.2	95.4	95.8	33 rd	87.7	90.1	91.6	91.8	93.0	94.0	94.4	95.3	95.7
Q12. Dr. explained things	92.2%	42 nd	88.1	89.2	90.7	91.5	92.7	94.1	94.5	96.0	96.3	38 th	86.5	89.3	91.2	92.0	93.1	94.3	94.8	96.0	96.5
Q13. Dr. listened carefully	92.2%	39 th	88.3	89.3	91.1	92.1	93.1	94.1	94.4	95.7	96.0	35 th	88.4	89.5	91.4	92.1	92.9	93.9	94.6	95.6	96.3
Q14. Dr. showed respect	94.0%	42 nd	89.7	90.7	93.0	93.7	94.4	95.4	96.0	97.0	97.8	37 th	91.2	92.1	93.5	93.8	94.7	95.4	96.0	97.0	97.4
Q15. Dr. spent enough time	88.8%	35 th	84.2	85.3	88.1	88.6	90.8	92.1	93.3	95.0	95.6	27 th	85.6	86.8	88.7	89.4	91.4	92.4	93.5	94.3	95.0
Q17. Coordination of Care +	91.0%	95 th	77.9	79.2	81.2	81.8	84.5	86.3	86.9	89.5	89.7	92 nd	75.7	78.8	82.4	84.0	86.0	87.6	88.4	90.4	92.2
Q27. Ease of Filling Out Forms + (% U/A)	93.9%	19 th	92.0	93.0	94.3	94.8	95.8	96.6	97.0	97.7	98.2	20 th	92.7	93.1	94.1	94.7	95.4	96.2	96.4	97.6	98.2

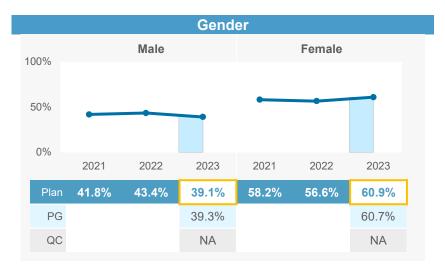


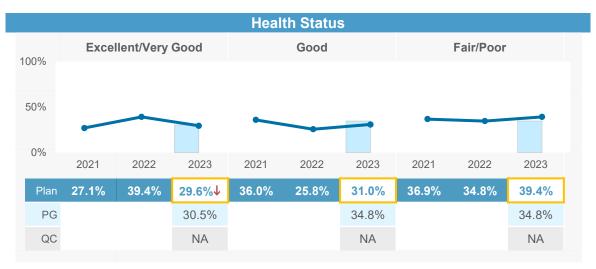
PROFILE OF SURVEY RESPONDENTS

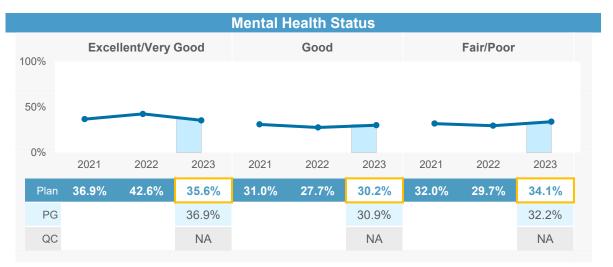
PROFILE OF SURVEY RESPONDENTS

MEDICAID ADULT









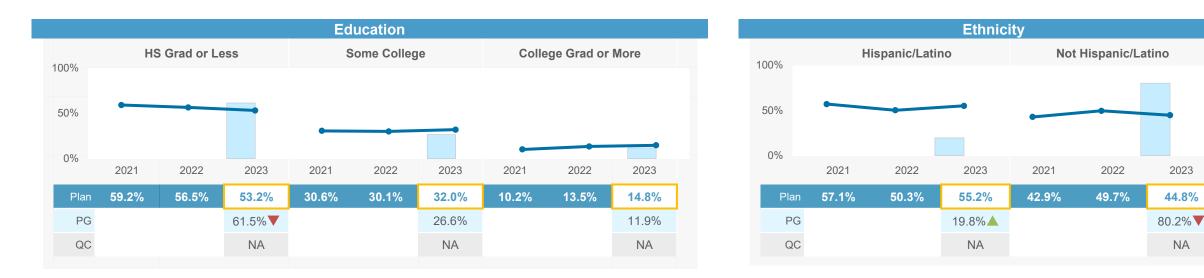
More info. 🧻

Significance Testing: Current score is significantly higher/lower than the 2022 score (↑/↓), the 2021 score (↑/↓) or benchmark score (▲/▼). Benchmarks: PG refers to the 2023 PG Book of Business benchmark. QC refers to the 2022 QC National Data benchmark. NCQA did not publish demographics for the 2022 benchmark.

MY 2022 Medicaid Adult CAHPS Report - 41

PROFILE OF SURVEY RESPONDENTS

MEDICAID ADULT





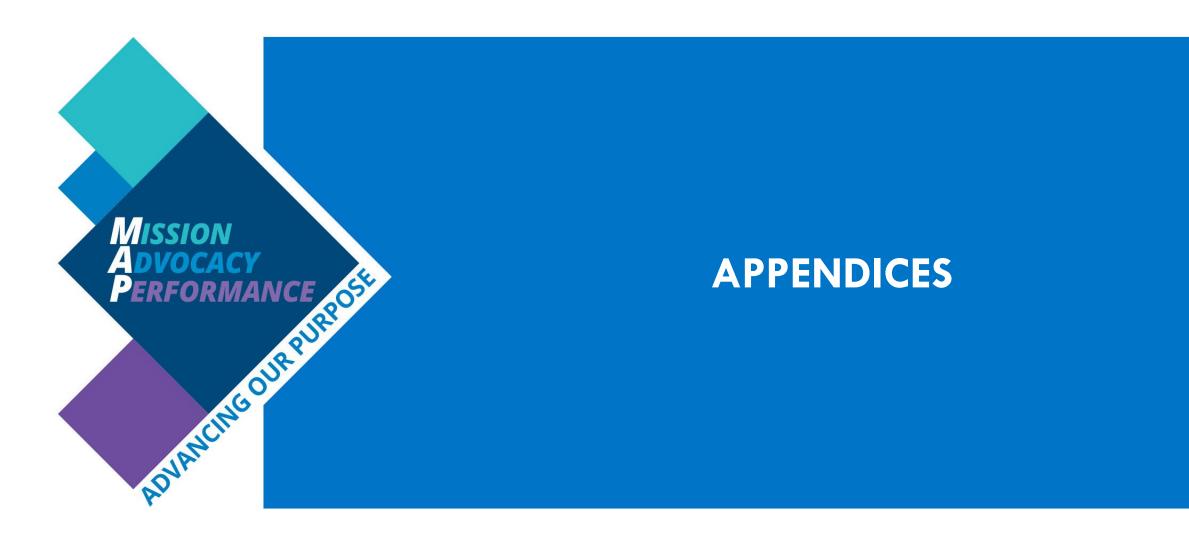
Significance Testing: Current score is significantly higher/lower than the 2022 score (↑/↓), the 2021 score (↑/↓) or benchmark score (▲/▼). Benchmarks: PG refers to the 2023 PG Book of Business benchmark. QC refers to the 2022 QC National Data benchmark. NCQA did not publish demographics for the 2022 benchmark.



			Category F	Responses		Sun	nmary Rate Sc	ore	2023
		Bas	ed on Valid Resp	oonses Per Qu	estion	2021	2022	2023	PG BoB
Q41. Help with coordination of care (% Yes)	Valid Response	es = 199							
	Yes	No				(n=191)	(n=190)	(n=199)	
	35.7%	64.3%				33.5%	38.4%	35.7%	
Q43. Satisfied with help received to coordinate care (% Very Satisfied or Satisfied)	Valid Response	es = 196							
	Very satisfied	<u>Satisfied</u>	<u>Neither</u> dissatisfied nor satisfied	Dissatisfied	<u>Very</u> dissatisfied	(n=188)	(n=187)	(n=196)	
	37.2%	40.3%	14.8%	3.6%	4.1%	68.6%	76.5%	77.6% 🛊	
Q44. Received material from plan about good health and how to stay healthy (% Yes)	Valid Response	es = 197							
	Yes	No				(n=197)	(n=188)	(n=197)	
	48.2%	51.8%				55.8%	52.1%	48.2%	
Q45. Received material from plan about care coordination and how to contact the care coordination unit (% Yes)	Valid Response	es = 197							
	Yes	No				(n=185)	(n=188)	(n=197)	
	47.7%	52.3%				42.2%	45.2%	47.7%	

		Category Responses				Sur	2023		
		Bas	ed on Valid Res		uestion	2021	2022	2023	PG BoB
Q46. Sat down with Care Coordinator and created a Plan of Care (% Yes)	Valid Respons	ses = 197							
	Yes	No				(n=75)	(n=186)	(n=197)	
	23.4%	76.6%				42.7%	23.7%	23.4% ‡	
Q47. Satisfied with care plans (% Very satisfied or Satisfied)	Valid Respons	ses = 193							
	Very satisfied	<u>Satisfied</u>	<u>Neither</u> <u>dissatisfied</u> nor satisfied		Very dissatisfied	(n=73)	(n=181)	(n=193)	
	26.9%	42.5%	25.9%	2.6%	2.1%	79.5%	74.0%	69.4%	

Sumariltom	Survey Item				2023
Survey item		2021	2022	2023	PG BoB
Q42. Who helped to coordinate your care					
Valid Responses	Base	(n=177)	(n=177)	(n=188)	
Someone from your health plan		8.5%	7.9%	13.3%	
Someone from your doctor's office or clinic		23.7%	27.7%	26.1%	
Someone from another organization		2.8%	1.7%	2.1%	
A friend or family member		16.4%	16.9%	16.0%	
You		48.6%	45.8%	42.6%	



APPENDIX A: CORRELATIONS

0.4937

0.4870

0.4513

MEDICAID ADULT

Highest Correlations

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

With Health Care Rating							
Q22	Specialist overall	0.7814					
Q20	Got specialist appt.	0.6205					
Q9	Got care/tests/treatment	0.6057					
Q4	Got urgent care	0.6029					
Q6	Got routine care	0.5232					
Q13	Dr. listened carefully	0.5218					
Q14	Dr. showed respect	0.5192					

Satisfied with help received to coordinate

Q43

Q15

Q18

care

Dr. spent enough time

Personal doctor overall

	With Personal Doctor Rating	
Q13	Dr. listened carefully	0.7890
Q14	Dr. showed respect	0.7414
Q12	Dr. explained things	0.6467
Q15	Dr. spent enough time	0.6240
Q17	Dr. informed about care	0.5771
Q43	Satisfied with help received to coordinate care	0.4957
Q4	Got urgent care	0.4693
Q8	Health care overall	0.4513
Q20	Got specialist appt.	0.4400
Q22	Specialist overall	0.4354

With Specialist Rating								
Q8	Health care overall	0.7814						
Q20	Got specialist appt.	0.6126						
Q9	Got care/tests/treatment	0.5705						
Q47	Satisfied with care plans	0.5344						
Q15	Dr. spent enough time	0.5317						
Q4	Got urgent care	0.5146						
Q6	Got routine care	0.4668						
Q24	CS provided info./help	0.4576						
Q17	Dr. informed about care	0.4484						
Q14	Dr. showed respect	0.4471						

APPENDIX B: QUESTIONNAIRE

Blue Cross Community Centennial[™]

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: Xes → If Yes, Go to Question 1 No 	 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 <u>not</u> include care you got when you stayed overnight in a hospital. Do <u>not</u> include the times you went for dental care visits. 3. In the last 6 months, did you have an illness, injury, or condition that <u>needed care right away?</u>
Personally identifiable information will not be made public and will only be released in accordance with federal laws and regulations.	 ☐ Yes ☐ No → If No, Go to Question 5
You may choose to answer this survey or not. If you choose not to, this will not affect the benefits you get. You may notice a number on the back of	4. In the last 6 months, when you <u>needed care</u> <u>right away</u> , how often did you get care as soon as you needed?
<i>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.</i>	 Never Sometimes Usually Always
1. Our records show that you are now in Blue Cross Community Centennial. Is that right?	5. In the last 6 months, did you make any in person, phone, or video appointments for a <u>check-up or routine care</u> ?
 Yes → If Yes, Go to Question 3 No 	 Yes No → If No, Go to Question 7
2. What is the name of your health plan? (Please print)	6. In the last 6 months, how often did you get an appointment for a <u>check-up or routine care</u> as soon as you needed?
	 Never Sometimes Usually Always

YOUR HEALTH CARE IN THE LAST 6 MONTHS

7.	In the last 6 months, <u>not</u> counting the times you went to an emergency room, how many times did you get health care for yourself in	11.	In the last 6 months, how many times did you have an in person, phone, or video visit with your personal doctor about your health?
	person, by phone, or by video? □ None → If None, Go to Question 10 □ 1 time □ 2 □ 3 □ 4 □ 5 to 9 □ 10 or more times		 None → If None, Go to Question 18 1 time 2 3 4 5 to 9 10 or more times
8.	Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the	12.	In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand?
	best health care possible, what number woul you use to rate all your health care in the las 6 months?		 Never Sometimes Usually
	 0 Worst health care possible 1 		Always
		13.	In the last 6 months, how often did your personal doctor listen carefully to you?
	□ 4 □ 5 □ 6 □ 7 □ 8		 Never Sometimes Usually Always
	9 10 Best health care possible	14.	In the last 6 months, how often did your personal doctor show respect for what you had to say?
9.	In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?		 Never Sometimes Usually Always
Y	Always	15.	In the last 6 months, how often did your personal doctor spend enough time with you?
10.	A personal doctor is the one you would talk to if you need a check-up, want advice about a health problem, or get sick or hurt. Do you have a personal doctor?		 Never Sometimes Usually Always
	Yes No → If No, Go to Question 19		In the last 6 months, did you get care from a doctor or other health provider besides your personal doctor?
			 ☐ Yes ☐ No → If No, Go to Question 18

17. In the last 6 months, how often did your personal doctor seem informed and	21. How many specialists have you talked to in the last 6 months?
 up-to-date about the care you got from these doctors or other health providers? Never Sometimes Usually Always 	 None → If None, Go to Question 23 1 specialist 2 3 4 5 or more specialists
 18. 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 personal doctor? 0 Worst personal doctor possible 1 	22. We want to know your rating of the specialist you 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?
 □ 2 □ 3 □ 4 □ 5 □ 6 □ 7 □ 8 □ 9 □ 10 Best personal doctor possible 	□ 0 Worst specialist possible □ 1 □ 2 □ 3 □ 4 □ 5 □ 6 □ 7 □ 8
GETTING HEALTH CARE FROM SPECIALISTS	9 10 Best specialist possible
When you answer the next questions, include the care you got in person, by phone, or by video. Do <u>not</u> include dental visits or care you got when you stayed overnight in a hospital.	YOUR HEALTH PLAN The next questions ask about your experience with your health plan.
 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 with a specialist? 	 23. In the last 6 months, did you get information or help from your health plan's customer service? ☐ Yes ☐ No → If No, Go to Question 26
 ☐ Yes ☐ No → If No, Go to Question 23 	24. In the last 6 months, how often did your health plan's customer service give you the information or help you needed?
 20. In the last 6 months, how often did you get an appointment with a specialist as soon as you needed? Never Sometimes Usually Always 	 Never Sometimes Usually Always

25.	In the last 6 months, how often did your health plan's customer service staff treat you with courtesy and respect?	30. In general, how would you rate your overall mental or emotional health?
	 Never Sometimes Usually Always 	 Excellent Very Good Good Fair Poor
26.	In the last 6 months, did your health plan give you any forms to fill out?	31. Have you had either a flu shot or flu spray in the nose since July 1, 2022?
27.	 Yes No → If No, Go to Question 28 In the last 6 months, how often were the forms 	☐ Yes☐ No☐ Don't know
	from your health plan easy to fill out?	32. Do you now smoke cigarettes or use tobacco every day, some days, or not at all?
	 Sometimes Usually Always 	 □ Every day □ Some days □ Not at all → If Not at all, Go to Question 36
28.	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	☐ Don't know → If Don't know, Go to Question 36
	use to rate your health plan? 0 Worst health plan possible 1	33. In the last 6 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan?
	□ 2 □ 3 □ 4 □ 5 □ 6	 Never Sometimes Usually Always
AE	 7 8 9 10 Best health plan possible 	34. In the last 6 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? <i>Examples of medication are: nicotine gum,</i> <i>patch, nasal spray, inhaler, or prescription</i>
29.	In general, how would you rate your	medication.
	overall health? Excellent Very Good Good Fair Poor	 Never Sometimes Usually Always

35.	In the last 6 months, how often did your	ADDITIONAL QUESTIONS
	doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using	Now we would like to ask a few more questions about the services your health plan provides.
	tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program.	41. In the last 6 months, did anyone from your health plan, doctor's office, or clinic help coordinate your care among these doctors or other health providers?
	 Never Sometimes Usually Always 	Yes No
20		42. In the last 6 months, who helped to coordinate your care?
30.	What is your age? 18 to 24 25 to 34 35 to 44 45 to 54 55 to 64	 Someone from your health plan Someone from your doctor's office or clinic Someone from another organization A friend or family member You
	 65 to 74 75 or older 	43. How satisfied are you with the help you received to coordinate your care in the last 6 months?
37.	Are you male or female?	Very dissatisfied
	Male Female	 Dissatisfied Neither dissatisfied nor satisfied
38.	What is the highest grade or level of school that you have completed?	 Satisfied Very satisfied
	 8th grade or less Some high school, but did not graduate High school graduate or GED 	44. In the last 6 months, have you received any material from your health plan about good health and how to stay healthy?
	 Some college or 2-year degree 4-year college graduate More than 4-year college degree 	☐ Yes ☐ No
39.	Are you of Hispanic or Latino origin or descent?	45. In the last 6 months, have you received any material from your health plan about care
	 Yes, Hispanic or Latino No, Not Hispanic or Latino 	coordination and how to contact the care coordination unit?
40.	What is your race? Mark one or more.	☐ Yes ☐ No
	☐ White	_
	☐ Black or African-American ☐ Asian	46. Did your Care Coordinator sit down with you and create a Plan of Care?
	 Native Hawaiian or other Pacific Islander American Indian or Alaska Native Other 	☐ Yes ☐ No

- 47. Are you satisfied that your care plan talks about the help you need 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, a Press Ganey Solution P.O. Box 7315 South Bend, IN 46699-0488

If you have any questions, please call 1-888-797-3605.

This page left intentionally blank.

SPH Analytics is an independent company that provides technology and analytics services for Blue Cross and Blue Shield of New Mexico (BCBSNM).

BCBSNM makes no endorsement, representations or warranties regarding third-party vendors and the products and services offered by them.

Blue Cross and Blue Shield of New Mexico, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association