

2018 CAHPS Medicaid Adult 5.0H Final Report

Molina Healthcare of New Mexico

Project Number: 4130157





- Executive Summary
- Profile of Survey Respondents
- Summary of Trends and Benchmarks
- Global Proportions and Accreditation
- Composite Analyses
- Segmentation Analyses
- Correlation Analysis
- Priority Matrix
- Custom Question Analysis



SPH Analytics (SPH), a National Committee for Quality Assurance (NCQA) certified HEDIS® Survey Vendor, was selected by Molina Healthcare of New Mexico to conduct its 2018 CAHPS® 5.0H Medicaid Adult Member Satisfaction Survey. NCQA requires health plans to submit CAHPS survey results in compliance with HEDIS® accreditation requirements.

Your Sales Director for this project is John DiCesare (404-425-3246), and your Project Manager is Mary Beth Trembley (770-978-3173, ext. 1376). Should you have any questions or comments regarding any aspect of the survey or reporting process, please feel free to call either your Sales Director or your Project Manager.

NCQA made the following change the survey in 2018:

• NCQA retired the HEDIS® Aspirin Use and Discussion Measure in 2017. The CAHPS 5.0H survey items aligned with this measure have been removed.



Executive Summary

- Molina Healthcare of New Mexico
- 4130157



Medicaid Adult CAHPS 5.0H

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

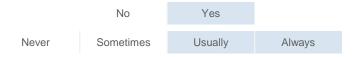
SPH Analytics (SPH) has structured this report to provide insightful and actionable information that plans can use to improve quality and performance.

VALID SURVEYS

Using a mixed (mail with phone) survey methodology, per NCQA protocol, SPH Analytics collected **561 valid surveys** from the eligible member population, yielding a response rate of **21.2%**.



Summary Rates are defined by NCQA in its HEDIS 2018 CAHPS® 5.0H guidelines and generally represent the most favorable response percentages. The Summary Rates for the Effectiveness of Care Measures (with the exception of the *Flu Vaccinations (Adults 18-64)* measure) are calculated on a two-year rolling average due to anticipated small denominators.



Rating questions are typically displayed with two Summary Rates:

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

Percentile Rankings Your plan's approximate percentile rankings in relation to the Quality Compass® All Plans benchmark were calculated by SPH Analytics using information derived from the NCQA 1-100 Benchmark. Your percentile rank indicates where your plan's Summary Rate falls relative to the NCQA 1-100 Benchmark.

NCQA BENCHMARK INFORMATION

The source for data contained in this publication is Quality Compass® All Plans 2017. 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.



Health Plan Domain Performance

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

MEASURE 2018 SUMM		2017 SUMMARY	CHANGE*	2018 SPH A BENCH		2017 QUALITY C	
WEASURE	RATE	RATE	CHANGE	SUMMARY RATE	PERCENTILE RANK	SUMMARY RATE	PERCENTILE RANK
8-10 Rating of Health Plan	74.9%	77.0%	-2.1	75.8%	45th	75.9%	32nd
9-10 Rating of Health Plan	57.2%	61.0%	-3.7	59.2%	41st	59.0%	31st
Getting Needed Care	82.4%	78.0%	4.4	81.8%	47th	82.0%	47th
Customer Service	87.4%	88.3%	-0.9	88.7%	22nd	88.2%	32nd
Providing Needed Information	58.6%	68.3%	-9.7	69.8%	<10th	68.2%	<10th
Ease of Filling Out Forms	93.1%	94.6%	-1.5	94.2%	22nd	94.2%	24th

KEY TAKEAWAYS

Your overall Rating of Health Plan (8-10) Summary Rate score was 74.9%, and represents a change of -2.1 from 2017. This measure counts for double points in accreditation scoring.

SPH regression analysis has identified Customer Service, Getting Needed Care, and Coordination of Care as Key Drivers of Rating of Health Plan. Improving scores on these measures can improve the rating score.

Significance Testing

Green – Significantly higher percentage when compared to current year data.

^{*} Please note that the "change" comparison may vary slightly due to rounding.



Health Care Domain Performance

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

MEASURE	2018 SUMMARY	2017 SUMMARY	MMARY CHANGE:	2018 SPH ANALYTICS BENCHMARK		2017 QUALITY COMPASS® ALL PLANS BENCHMARK	
MEASURE	RATE	RATE	CHANGE	SUMMARY RATE	PERCENTILE RANK	SUMMARY RATE	PERCENTILE RANK
8-10 Rating of Health Care	74.5%	73.6%	0.9	73.5%	54th	74.4%	48th
9-10 Rating of Health Care	56.6%	54.8%	1.8	53.8%	73rd	54.7%	63rd
Getting Care Quickly	80.4%	78.4%	2.0	81.7%	32nd	81.8%	30th
How Well Doctors Communicate	90.6%	91.0%	-0.3	91.3%	28th	91.4%	31st
Shared Decision Making	79.0%	81.8%	-2.7	78.6%	47th	79.8%	31st
Health Promotion and Education	69.6%	74.0%	-4.4	72.1%	26th	73.8%	11th
Coordination of Care	82.9%	85.6%	-2.7	82.9%	45th	83.2%	40th
8-10 Rating of Personal Doctor	81.1%	79.6%	1.5	80.9%	52nd	81.2%	43rd
9-10 Rating of Personal Doctor	64.4%	65.6%	-1.1	65.9%	37th	66.4%	29th
8-10 Rating of Specialist	80.3%	80.3%		81.0%	50th	81.8%	30th
9-10 Rating of Specialist	63.4%	66.2%	-2.8	65.3%	39th	67.1%	21st

KEY TAKEAWAYS

SPH regression analysis has identified How Well Doctors Communicate and Getting Needed Care as Key Drivers of Rating of Health Care. Improving scores on these measures can improve the rating score.

Significance Testing

Green – Significantly higher percentage when compared to current year data.

^{*} Please note that the "change" comparison may vary slightly due to rounding.



Effectiveness of Care Performance

Your plan's performance on HEDIS measures collected through the CAHPS 5.0H survey.

MEASURE	2019 SLIMMADV DATE	2017 SUMMARY RATE	CHANGE*	2018 SPH ANALY	2018 SPH ANALYTICS BENCHMARK		IPASS® ALL PLANS HMARK
WEASURE	2010 SUMIWART RATE	2017 SUMMART RATE	CHANGE	SUMMARY RATE	PERCENTILE RANK	SUMMARY RATE	PERCENTILE RANK
Flu Vaccinations (Adults 18-64)	42.7%	42.5%	0.2	39.3%	67th	38.6%	73rd
Advising Smokers and Tobacco Users to Quit	62.7%	68.7%	-6.0	76.0%	<10th	76.2%	<10th
Discussing Cessation Medications	39.4%	39.1%	0.3	50.1%	16th	49.5%	10th
Discussing Cessation Strategies	36.3%	37.0%	-0.8	44.4%	16th	44.1%	16th

Significance Testing

Green – Significantly higher percentage when compared to current year data.

^{*} Please note that the "change" comparison may vary slightly due to rounding.



Accreditation and Global Proportions

E

OVERVIEW: ACCREDITATION FOR 2018 SCORING

Your plan scored at or below the 50th percentile for the following measures used for accreditation:

MEASURE	PERCENTIL
Getting Needed Care	25th
Getting Care Quickly	25th
Customer Service	25th
Coordination of Care	25th
Rating of Health Care	50th
Rating of Specialist	25th
Rating of Health Plan	25th

ME LOUDE NAME	2018 HE	2018 HEDIS/CAHPS PERCENTILES				Approximate	Approximate Points Awarded
MEASURE NAME	25TH	25TH 50TH 75TH 90TH		Score	Plan Percentile Threshold	2018	
Getting Needed Care	2.33	2.39	2.43	2.47	2.3353	25th	0.5778
Getting Care Quickly	2.37	2.43	2.47	2.52	2.3716	25th	0.5778
Customer Service	2.48	2.54	2.58	2.61	2.5205	25th	0.5778
Coordination of Care	2.36	2.43	2.48	2.53	2.4278	25th	0.5778
Rating of Health Care	2.35	2.39	2.44	2.48	2.4096	50th	0.9822
Rating of Personal Doctor	2.43	2.5	2.53	2.57	2.5323	75th	1.2711
Rating of Specialist	2.48	2.51	2.56	2.59	2.5082	25th	0.5778
Rating of Health Plan	2.39	2.46	2.51	2.55	2.4165	25th	1.1556
Approximate Points Earned (13.000 available)							

Note: If a plan receives an NA (indicating the denominator was less than 100) the points for that measure are redistributed among the remaining required measures. An organization that has more than four CAHPS® NAs, or which exceed ten NA or NB results between HEDIS and CAHPS® for each product line, are scored based on the standards score only and the accreditation status is capped at Commendable.



Top Three Measures

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

MEASURE	VALID N	2018 SUMMARY RATE SCORE	2017 SUMMARY RATE SCORE	CHANGE*	QC ALL PLANS PERCENTILE RANKING	NCQA QUALITY COMPASS ALL PLANS	GAP
Rating of Health Care (8-10)	376	74.5%	73.6%	0.9	48th	74.4%	0.1
Getting Needed Care	290	82.4%	78.0%	4.4	47th	82.0%	0.4
Rating of Personal Doctor (8-10)	402	81.1%	79.6%	1.5	43rd	81.2%	-0.1

Bottom Three Measures

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

MEASURE	VALID N	2018 SUMMARY RATE SCORE	2017 SUMMARY RATE SCORE	CHANGE*	QC ALL PLANS PERCENTILE RANKING	NCQA QUALITY COMPASS ALL PLANS	GAP
Getting Care Quickly	273	80.4%	78.4%	2.0	30th	81.8%	-1.4
Rating of Specialist (8-10)	183	80.3%	80.3%		30th	81.8%	-1.5
Health Promotion and Education	378	69.6%	74.0%	-4.4	11th	73.8%	-4.2

^{*} Please note that the "change" comparison may vary slightly due to rounding.

Significance Testing

Green – Significantly higher percentage when compared to current year data.



Improving Performance

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

GETTING CARE QUICKLY

Strategies for improving Getting Care Quickly include:

- Evaluate number of providers, hours of availability and overall adequacy of network by key provider types and regions.
- Conduct periodic phone audits of appointment availability (routine, urgent, after-hours) by PCPs.
- Contract with additional providers for urgent and after-hour appointments/availability.
- Discuss and engage providers/staff on scheduling best practices, how to improve access to routine/urgent care.
- Educate providers and staff about Plan and regulatory appointment wait time requirements or standards (i.e., CAHPS, CMS, States, etc.).
- · Analyze open access scheduling opportunities.
- Explore partnering with 24 hour urgent care or walk-in clinics.
- Explore alternative telecommunication technologies to expand access to care: telephone, telehealth, telemedicine.
- Provide members streamlined (links, apps, etc.) tools to reference about "their" benefits, providers, referrals, scheduling appointments, etc.
- Encourage use of Nurse Hotline or live-chat via web for members to get health information and advice.

RATING OF SPECIALIST

Strategies for improving Rating of Specialist include:

- Analyze, investigate, probe for weakness or QI needs those composite measures highly correlated with rating of doctor or specialist. (i.e., GNC, HWDC, Coordination Of Care).
- Review QI recommendations for related CAHPS composite measures: How Well Doctors Communicate, Shared Decision Making, Coordination of Care.
- Explore ability of providers to share with patient's a summary of medical record or health assessment to facilitate conversation about health/wellness.
- Share and discuss CAHPS feedback, scores and reporting with providers.
- Gather and analyze patient feedback on their recent office visit (i.e.., patient "comment cards," follow up call/text/email, CG CAHPS survey, etc.)
- Suggest providers/practices periodically analyze appointment scheduling timeframes versus types of office visits.
- Promote use of a secure online patient portal which allows access to their medical record and a health care information of particular interest to their needs.
- Provide on-line tools or training sessions to include improving physician-patient communication, patient-centered interviewing.
- Determine systems (i.e., EHRs) processes or procedures used to gather or facilitate distribution of patient information among providers.

HEALTH PROMOTION AND EDUCATION

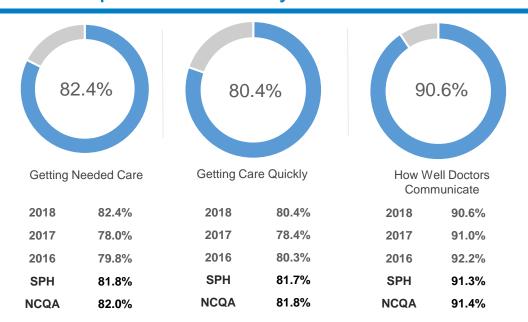
Strategies for improving Health Promotion and Education include:

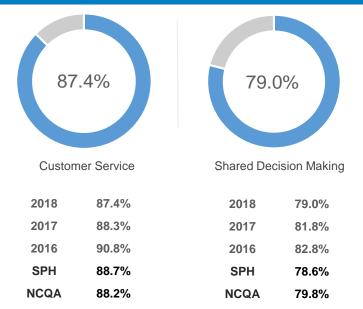
- Encourage/remind members and providers of resources, tools, apps, etc. to assist patients with staying healthy and preventing illness (i.e., Plan website, WebMD, Garmin smartwatch).
- Offer call-in line (i.e., Nurse/provider hotline) or internet option (live chat) for members to get health advise or information.
- Promoting a holistic care philosophy, encouraging providers to routinely ask about the patient's lifestyle, activities and/or health concerns.
- Encourage providers to utilize a summary of patient's medical record/health assessment to facilitate health/wellness discussion
- Periodic reminders (i.e., text message, e-mail, voicemail) to advise patients of the benefits of not smoking, aspirin use, getting a flu shot or other vaccines, etc.

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



Composite Summary Rate Scores





Summary Rate Scores

Summary Rates are defined by **NCQA** in its HEDIS 2018 CAHPS® 5.0H guidelines and generally represent the most favorable response percentages.

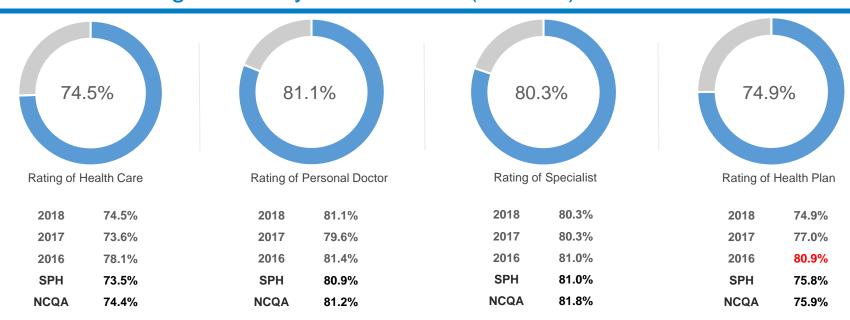
NCQA refers to the 2017 Quality Compass® All Plans benchmark. **SPH** refers to the 2018 SPH Analytics Book of Business benchmark.

Significance Testing

Green – Significantly higher percentage when compared to current year data.

Global Rating Summary Rate Scores (8+9+10)

Please see Technical Notes for more information.



Summary Rate Scores

Summary Rates are defined by **NCQA** in its HEDIS 2018 CAHPS[®] 5.0H guidelines and generally represent the most favorable response percentages.

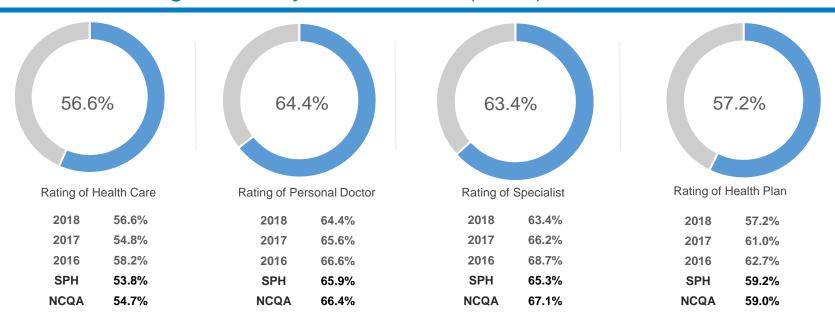
NCQA refers to the 2017 Quality Compass[®] All Plans benchmark. **SPH** refers to the 2018 SPH Analytics Book of Business benchmark.

Significance Testing

Green – Significantly higher percentage when compared to current year data.



Global Rating Summary Rate Scores (9+10)



Summary Rate Scores

Summary Rates are defined by NCQA in its HEDIS 2018 CAHPS® 5.0H guidelines and generally represent the most favorable response percentages.

NCQA refers to the 2017 Quality Compass[®] All Plans benchmark. **SPH** refers to the 2018 SPH Analytics Book of Business benchmark.

Significance Testing

Green - Significantly higher percentage when compared to current vear data.



Overall Rating of Health Plan

SPH Book of Business regression analysis on has identified the following **Key Drivers** of Rating of Health Plan. Performance on these measures may be driving member's overall experience rating.





RATING OF HEALTH PLAN

PERFORMANCE ON KEY DRIVERS

Key Driver	2018 SPH BoB %Rank	QC %Rank
Customer Service	22nd	32nd
Getting Needed Care	47th	47th
Coordination of Care	45th	40th

DIFFERENT WAYS TO LOOK AT THE DATA

Standard Summary Rate Scoring combines the top 3 responses (8+9+10).

Some health plans prefer to compare to a higher standard of performance and track the top 2 responses (9+10).



Rating of Health Plan (8 – 10)

Your plan scored in the 32nd percentile when compared to the QC All Plans benchmark.

Compared to last year, your score decreased by 2.1. This result is not statistically significant.



Rating of Health Plan (9 – 10) Your plan scored in the 31st percentile when compared to the QC All Plans benchmark.

Compared to last year, your score decreased by 3.7. This result is not statistically significant.

PLAN SPECIFIC CORRELATIONS

Correlations show the strength of the linear relationship between the individual attributes and the rating questions for your plan.

These five questions had the **strongest correlation** with your Rating of Health Plan.

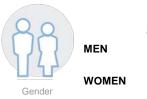
Question	Coefficient	2018 SRS	QC AP Rank
Rating of Health Care	0.460	74.5%	48th
31 Getting information/help from customer service	0.447	83.2%	58th
Rating of Personal Doctor	0.440	81.1%	43rd
Providing Needed Information 4 Obtaining needed care right away	0.392 0.322	58.6% 82.4%	<10th 28th



Overall Rating of Health Plan

Demographic Comparisons

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



8 - 10	9 - 10
76.1%	54.7%
75.0%	60.1%

9 - 10



	8 - 10	9 - 10
18 - 34	68.8%	47.1%
35 - 44	67.6%	50.7%
45 - 54	83.8%	72.6%
55 or older	77.9%	58.3%



8 - 1
77.69
73.3%

8 - 10	9 - 10
77.6%	61.0%
73.3%	53.4%



Health Status

EXCELLENT/ VERY GOOD	75.0%	58.5%
GOOD	77.6%	57.0%
FAIR/POOR	72.6%	56.2%

8 - 10



Health Status

EXCELLENT/ VERY GOOD	80.5%	60.6%
GOOD	72.8%	54.4%
FAIR/POOR	69.4%	55.6%

8 - 10

9 - 10



	8 - 10	9 - 10
MAIL	76.8%	60.0%
PHONE	71.5%	52.5%
INTERNET	NA	NA



_	8 - 10	9 - 10
HISPANIC/ LATINO	79.2%	62.8%
NOT HISPANIC/ LATINO	70.7%	51.0%

	8 - 10	9 - 10
WHITE	75.8%	60.1%
BLACK/AFRICAN AMERICAN	60.0%	35.0%
OTHER	75.8%	57.4%

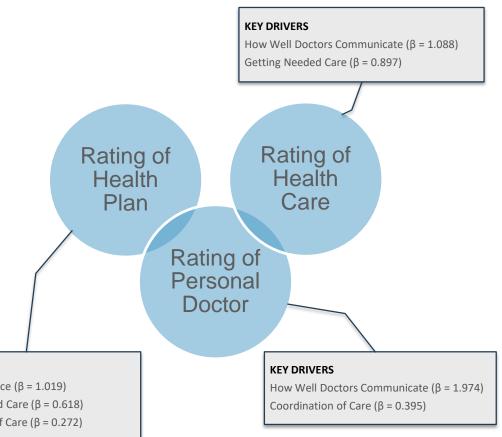


KEY DRIVERS: WHERE TO FOCUS IMPROVEMENT EFFORTS

Members set standards for performance whether consciously or subconsciously. Standards are usually set higher for those plan services that are deemed important to each member. These important services are the Key Drivers of Experience.

Multiple linear regression analyses were run on the 2018 SPH Analytics Medicaid Adult Book of Business to discover which composites were Key Drivers of Rating of Health Plan (Q35), Rating of Health Care (Q13), and Rating of Personal Doctor (Q23). Improvement efforts focused on these measures can also result in improvement on the global rating questions.

Your **Opportunity Analysis** based on this information is presented on the next page.



KEY DRIVERS

Customer Service (β = 1.019)

Getting Needed Care (β = 0.618)

Coordination of Care (β = 0.272)



This Opportunity Analysis displays both high performing measures and measures that are opportunities for improvement.

>75th

STRENGTH – Summary Rates at or above the 75th percentile when compared to the 2018 SPH Analytics Book of Business.



MONITOR — Summary Rates **at or above the 50th percentile and below the 75th percentile** when compared to the 2018 SPH Analytics Book of Business should be monitored, as they do have a significant impact on members' overall ratings.



OPPORTUNITY – Summary Rates that fall **below the 50th percentile** when compared to the 2018 SPH Analytics Book of Business should be investigated and improved upon.

Rating of Health Plan

These Composites have been identified by SPH as Key Drivers of Rating of Health Plan.

Getting Needed Care

Coordination of Care

Opportunity

Opportunity

Opportunity

Rating of Health Care

These Composites have been identified by SPH as Key Drivers of Rating of Health Care.

How Well Doctors Communicate

10W VVCII Bootoro Communicati

Getting Needed Care

Opportunity

Opportunity

Rating of Personal Doctor

These Composites have been identified by SPH as Key Drivers of Rating of Personal Doctor.

How Well Doctors Communicate

Opportunity

Coordination of Care

Opportunity



Methodology and Response Rates

Please see Technical Notes for more information.

VALID SURVEYS

707	Total Number of Ph
	Total Number of Ma

Total Number of Phone Completes = 207
Total Number of Mail Completes = 354

Total Number of Internet Completes = NA

2018 RESPONSE RATE

Ineligible members are subtracted from the sample size when computing a response rate as shown below.

Completed Surveys		
	=	Response Rate
Sample Size - Ineligible Members		

Using the final figures from the survey, the numerator and denominator used to compute your response rate are presented below.

RESPONSE RATE COMPARISONS

Your plan's response rate in 2017 was 22.6%.

The SPH Analytics 2018 Book of Business average response rate is 21.3%.

	Does not Meet Eligibility Criteria (01)	33
	Language Barrier (03)	11
Ineligible	Mentally/Physically Incapacitated (04)	11
	Deceased (05)	4
	SUBTOTAL	59
	Break-off/Incomplete (02)	74
	Refusal (06)	13
Non-Response	Maximum Attempts Made (07)	1989
	Added to DNC List (08)	4
	SUBTOTAL	2080
TOTAL		2139



Profile of Survey Respondents

Demographic Composition

- Molina Healthcare of New Mexico
- 4130157



Profile of Survey Respondents: Section Information

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

The percentages of respondents are displayed by demographic category (Health Status, Mental/Emotional Health Status, Age, Gender, Education, Ethnicity, and Race) from your current survey, compared to trend data (if applicable), the 2018 SPH Analytics Book of Business benchmark, and the 2017 Medicaid Adult Public Report benchmark.

The demographic makeup of your plan's member base may not mirror the "average" plan; therefore, caution is recommended when making comparisons to benchmark data. To help you identify how your plan's population compares to other plans and to previous data, statistically significant differences are highlighted with green or red text.

Significance Testing

Green – Significantly higher percentage when compared to current year data.

Red – Significantly lower percentage when compared to current year data.

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% significance level.

Good

30.7%

32.4%

35.3%

33.5%

33.0%

Fair/Poor

36.8%

35.1%

30.0%

34.8%

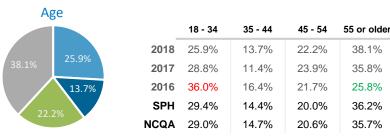
34.3%



Profile of Survey Respondents

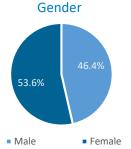
Survey Demographics

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



	18 - 34	35 - 44	45 - 54	55 or older
2018	25.9%	13.7%	22.2%	38.1%
2017	28.8%	11.4%	23.9%	35.8%
2016	36.0%	16.4%	21.7%	25.8%
SPH	29.4%	14.4%	20.0%	36.2%
NCQA	29.0%	14.7%	20.6%	35.7%





■ 18 - 34 ■ 35 - 44 ■ 45 - 54 ■ 55 or older

	Male	Female
2018	46.4%	53.6%
2017	40.8%	59.2%
2016	35.9%	64.1%
SPH	38.0%	62.0%
NCQA	38.6%	61.4%

Mental/Emotional Health Status

30.7%

Health Status



Excellent/

Very Good

32.5%

32.5%

34.7%

31.7%

32.7%

2018

2017

2016 SPH

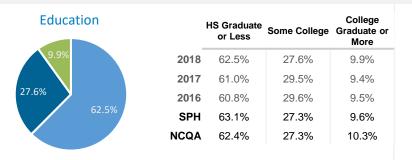
NCQA

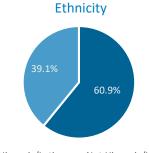


Profile of Survey Respondents

Survey Demographics

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

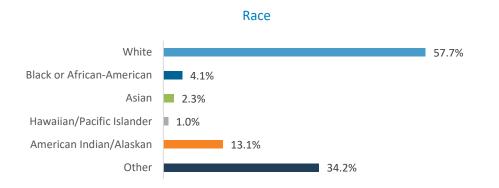




	Hispanic/ Latino	Not Hispanic/ Latino
2018	60.9%	39.1%
2017	60.7%	39.3%
2016	62.3%	37.7%
SPH	20.8%	79.2%
NCQA	18.4%	81.6%

Hispanic/LatinoNot Hispanic/Latino

HS Graduate or Less	Some College	College Graduate or More
---------------------------------------	--------------	--------------------------



	White	Black or African- American	Asian	Hawaiian/ Pacific Islander	American Indian/ Alaskan	Other
2018	57.7%	4.1%	2.3%	1.0%	13.1%	34.2%
2017	61.2%	5.0%	3.3%	1.0%	10.6%	30.6%
2016	60.1%	4.0%	2.5%	0.5%	11.0%	34.1%
SPH	60.4%	27.2%	4.4%	0.9%	4.4%	13.1%
NCQA	56.8%	26.2%	4.5%	1.2%	4.1%	10.2%



Summary of Trend and Benchmarks

Summary Rate Scores

Percentile Rankings

- Molina Healthcare of New Mexico
- 4130157

Summary of Trend and Benchmarks: Section Information

Please see Technical Notes for more information.

Trend and Benchmark Comparisons The CAHPS® 5.0H survey is designed to use composite scores to facilitate the aggregation of information and the communication of results. Questions are combined into composite categories comprising a particular service area managed by your plan. These composites, the questions that make up composites (attributes), additional measures, and rating questions are shown on the following pages.

Summary Rate Scores: Shows how your plan's composite and key question Summary Rates compare to scores from the previous years' results (if applicable) and scores from the 2018 SPH Analytics Medicaid Adult Book of Business, 2017 Medicaid Adult Public Report, and 2017 Medicaid Adult Quality Compass® All Plans benchmarks. To help you identify how your plan's population compares to other plans and to previous data, statistically significant differences are highlighted.

Plan Percentile Rankings: Shows your plan's Summary Rates and percentile rankings in relation to the three benchmarks. Benchmark percentile scores (25th, 50th, 75th, and 90th) are available in Appendix B.

Significance Testing

Green – Significantly higher percentage when compared to current year data.

Red – Significantly lower percentage when compared to current year data.

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% significance level.



Benchmark Information

Available Benchmarks

The following benchmarks are used throughout the report.

	2017 NCQA Public Report	2017 Quality Compass® All Plans	2017 NCQA 1-100 Benchmark	2018 SPH Analytics Book of Business
	Derived from NCQA's Quality Compass® benchmark and is calculated by SPH Analytics. The benchmark is a collection of Medicaid adult samples that submitted data to NCQA in 2017 and allowed their data to be publicly reported.	Includes all Medicaid adult samples that submitted data to NCQA in 2017.	A percentile benchmark (with values ranging from the first through the one hundredth percentile) calculated by NCQA and derived from Medicaid adult data collected by NCQA in 2017.	Includes all the Medicaid adult samples that contracted with SPH Analytics to administer the 2018 CAHPS 5.0H survey and submitted data to NCQA.
PROS	Provides the most up to-date benchmark reflecting the 2017 survey results Provides a benchmark for each question from the survey Permits precise percentile ranking of plan compared to benchmark	 Contains more plans than Public Report Is presented in NCQA's The State of Health Care Quality 	Utilized by SPH Analytics 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 Historically, the SPH BoB has varied by less than 1% from the Public Report benchmark.
CONS	Contains fewer plans than All Plans benchmark Does not contain benchmarking for some Effectiveness of Care Measures	Only contains benchmarks for certain key questions, composites, and rating questions Does not contain benchmarking for Effectiveness of Care Measures	Only contains benchmarks for certain key questions, composites, and rating questions Does not contain benchmarking for Effectiveness of Care Measures	Contains fewer plans than the Public Report and the Quality Compass [®] All Plans Benchmarks
# OF PLANS	159	175	175	54



COMPOSITES, ATTRIBUTES, AND KEY QUESTIONS

on Eo, Ar Midor Eo, AND NET GOLOTIONO	Valid n	2018	2017	2016	2018 SPH Book of Business	2017 Public Report	2017 Quality Compass All Plans
Getting Needed Care		82.4%	78.0%	79.8%	81.8%	82.2%	82.0%
14 Getting care, tests, or treatments necessary	379	88.7%	80.1%	85.0%	84.0%	84.4%	84.2%
25 Obtained appointment with specialist as soon as needed	201	76.1%	76.0%	74.5%	79.7%	80.0%	79.8%
Getting Care Quickly		80.4%	78.4%	80.3%	81.7%	82.1%	81.8%
4 Obtaining needed care right away	204	82.4%	80.2%	84.1%	83.7%	84.7%	84.4%
6 Obtained appointment for care as soon as needed	343	78.4%	76.7%	76.5%	79.6%	79.6%	79.4%
How Well Doctors Communicate		90.6%	91.0%	92.2%	91.3%	91.5%	91.4%
17 Doctors explained things in an understandable way	323	90.7%	91.0%	91.9%	91.5%	91.8%	91.7%
18 Doctors listened carefully to you	323	91.6%	92.2%	92.8%	91.5%	91.7%	91.7%
19 Doctors showed respect for what you had to say	322	91.9%	91.0%	95.0%	92.8%	93.1%	93.0%
20 Doctors spent enough time with you	324	88.3%	89.6%	89.0%	89.2%	89.3%	89.2%
Health Plan Customer Service		87.4%	88.3%	90.8%	88.7%	88.2%	88.2%
31 Getting information/help from customer service	155	83.2%	84.6%	86.1%	83.0%	82.1%	82.0%
32 Treated with courtesy and respect by customer service staff	153	91.5%	92.1%	95.6%	94.3%	94.4%	94.3%



COMPOSITES, ATTRIBUTES, AND KEY QUESTIONS (continued)

	Valid n	2018	2017	2016	2018 SPH Book of Business	2017 Public Report	2017 Quality Compass All Plans
Shared Decision Making		79.0%	81.8%	82.8%	78.6%	79.8%	79.8%
10 Doctor/health care provider talked about reasons you might want to take a medicine	164	92.7%	93.2%	90.7%	91.6%	92.6%	92.6%
11 Doctor/health care provider talked about reasons you might not want to take a medicine	165	69.7%	72.0%	73.5%	66.4%	68.6%	68.7%
12 Doctor/health care provider asked you what you thought was best when talking about starting or stopping a prescription	166	74.7%	80.1%	84.2%	78.0%	78.1%	77.9%
Other Measures							
8 Health Promotion and Education	378	69.6%	74.0%	71.7%	72.1%	73.9%	73.8%
22 Coordination of Care	187	82.9%	85.6%	79.1%	82.9%	83.3%	83.2%
29 Providing Needed Information	99	58.6%	68.3%	73.0%	69.8%	68.3%	68.2%
34 Ease of Filling Out Forms	537	93.1%	94.6%	96.1%	94.2%	94.2%	94.2%



Discussing Cessation Strategies

RATII	NG ITEMS	Valid n	2018	2017	2016	2018 SPH Book of Business	2017 Public Report	2017 Quality Compass All Plans
	Rating Questions (8+9+10)							
	13 Rating of Health Care	376	74.5%	73.6%	78.1%	73.5%	74.4%	74.4%
	23 Rating of Personal Doctor	402	81.1%	79.6%	81.4%	80.9%	81.3%	81.2%
	27 Rating of Specialist	183	80.3%	80.3%	81.0%	81.0%	81.8%	81.8%
	35 Rating of Health Plan	545	74.9%	77.0%	80.9%	75.8%	76.0%	75.9%
	Rating Questions (9+10)							
	13 Rating of Health Care	376	56.6%	54.8%	58.2%	53.8%	54.8%	54.7%
	23 Rating of Personal Doctor	402	64.4%	65.6%	66.6%	65.9%	66.5%	66.4%
	27 Rating of Specialist	183	63.4%	66.2%	68.7%	65.3%	67.0%	67.1%
	35 Rating of Health Plan	545	57.2%	61.0%	62.7%	59.2%	59.1%	59.0%
EFFE	CTIVENESS OF CARE MEASURES	Valid n	2018	2017	2016	2018 SPH Book of Business	2017 Public Report	2017 Quality Compass All Plans
	Effectiveness of Care Measures							
	Flu Vaccinations (Adults 18-64)	525	42.7%	42.5%	42.4%	39.3%	37.1%	38.6%
	Advising Smokers and Tobacco Users to Quit	332	62.7%	68.7%	73.7%	76.0%	75.2%	76.2%
	Discussing Cessation Medications	335	39.4%	39.1%	42.2%	50.1%	49.1%	49.5%

331

36.3%

40.7%

37.0%

44.4%

43.4%

44.1%



POSITES, ATTRIBUTES, AND KEY QUESTIONS	Plan Summary Rate	2018 SPH Book of Business	2017 Public Report	2017 Quality Compass All Plans
Getting Needed Care	82.4%	47th	46th	47th
14 Getting care, tests, or treatments necessary	88.7%	88th	89th	88th
25 Obtained appointment with specialist as soon as needed	76.1%	22nd	17th	18th
Getting Care Quickly	80.4%	32nd	29th	30th
4 Obtaining needed care right away	82.4%	35th	27th	28th
6 Obtained appointment for care as soon as needed	78.4%	35th	30th	31st
How Well Doctors Communicate	90.6%	28th	30th	31st
17 Doctors explained things in an understandable way	90.7%	28th	31st	33rd
18 Doctors listened carefully to you	91.6%	47th	47th	48th
19 Doctors showed respect for what you had to say	91.9%	28th	24th	25th
20 Doctors spent enough time with you	88.3%	30th	35th	36th
Health Plan Customer Service	87.4%	22nd	33rd	32nd
31 Getting information/help from customer service	83.2%	47th	58th	58th
32 Treated with courtesy and respect by customer service staff	91.5%	11th	<10th	<10th



Plan Percentile Rankings

COMPOSITES, ATTRIBUTES, AND KEY QUESTIONS (continued)

	Plan Summary Rate	2018 SPH Book of Business	2017 Public Report	2017 Quality Compass All Plans
Shared Decision Making	79.0%	47th	31st	31st
10 Doctor/health care provider talked about reasons you might want to take a medicine	92.7%	58th	42nd	42nd
11 Doctor/health care provider talked about reasons you might not want to take a medicine	69.7%	60th	56th	54th
12 Doctor/health care provider asked you what you thought was best when talking about starting or stopping a prescription	74.7%	20th	17th	17th
Other Measures				
Health Promotion and Education	69.6%	26th	<10th	11th
Coordination of Care	82.9%	45th	40th	40th
Providing Needed Information	58.6%	<10th	<10th	<10th
Ease of Filling Out Forms	93.1%	22nd	25th	24th

Plan Percentile Rankings

RATING ITEMS	Plan Summary Rate	2018 SPH Book of Business	2017 Public Report	2017 Quality Compass All Plans
Rating Questions (8+9+10)				
13 Rating of Health Care	74.5%	54th	50th	48th
23 Rating of Personal Doctor	81.1%	52nd	41st	43rd
27 Rating of Specialist	80.3%	50th	33rd	30th
42 Rating of Health Plan	74.9%	45th	32nd	32nd
Rating Questions (9+10)				
13 Rating of Health Care	56.6%	73rd	63rd	63rd
23 Rating of Personal Doctor	64.4%	37th	32nd	29th
27 Rating of Specialist	63.4%	39th	23rd	21st
42 Rating of Health Plan	57.2%	41st	31st	31st
EFFECTIVENESS OF CARE MEASURES	Plan Summary Rate	2018 SPH Book of Business	2017 Public Report	2017 Quality Compass All Plans
Effectiveness of Care Measures				
Flu Vaccinations (Adults 18-64)	42.7%	67th	69th	73rd
Advising Smokers and Tobacco Users to Quit	62.7%	<10th	<10th	<10th
Discussing Cessation Medications	39.4%	16th	10th	10th
Discussing Cessation Strategies	36.3%	16th	19th	16th



Global Proportions and Accreditation

Three Point Scores and Accreditation Scoring

- Molina Healthcare of New Mexico
- 4130157



Accreditation Assessment

ACCREDITATION FOR 2018 SCORING

NCQA requires health plans seeking accreditation to submit specified HEDIS measures and HEDIS/CAHPS 5.0H survey results. NCQA determines the CAHPS 5.0H portion of the score by comparing the plan's results to a national benchmark (the 90th percentile) and to national thresholds (the 75th, 50th, and 25th percentiles). The HEDIS measure portion of the score is ascertained by comparing the plan's results to a national benchmark (the 90th percentile) and to regional and national thresholds (the 75th, 50th, and 25th percentiles).

	20	2018 HEDIS/CAHPS PERCENTILES				Approximate Pl		Approximate Points Awarded
MEASURE NAME	25TH	50TH	75TH	90ТН	Plan 3-Point Score	Percentile Threshold	2018	
Getting Needed Care	2.33	2.39	2.43	2.47	2.3353	25th	0.5778	
Getting Care Quickly	2.37	2.43	2.47	2.52	2.3716	25th	0.5778	
Customer Service	2.48	2.54	2.58	2.61	2.5205	25th	0.5778	
Coordination of Care	2.36	2.43	2.48	2.53	2.4278	25th	0.5778	
Rating of Health Care	2.35	2.39	2.44	2.48	2.4096	50th	0.9822	
Rating of Personal Doctor	2.43	2.5	2.53	2.57	2.5323	75th	1.2711	
Rating of Specialist	2.48	2.51	2.56	2.59	2.5082	25th	0.5778	
Rating of Health Plan	2.39	2.46	2.51	2.55	2.4165	25th	1.1556	
Approximate Points Earned (13.000 available) 6.								

Note: If a plan receives an NA (indicating the denominator was less than 100) the points for that measure are redistributed among the remaining required measures. An organization that has more than four CAHPS® NAs, or which exceed ten NA or NB results between HEDIS and CAHPS® for each product line, are scored based on the standards score only and the accreditation status is capped at Commendable.



GLOBAL PROPORTIONS SCORING AND ACCREDITATION

The graphical presentation and Three-Point Score for composites and rating questions are shown on these pages. In addition, the measure's percentile threshold when compared to the accreditation benchmark and the 90th percentile benchmark is shown. The 90th percentile is the standard for achieving the maximum points possible for a particular CAHPS accreditation measure.

Scale One

Three Point Scores are calculated by assigning the following values to this response scale.

NEVER	1
SOMETIMES	'
USUALLY	2
ALWAYS	3

Scale Two

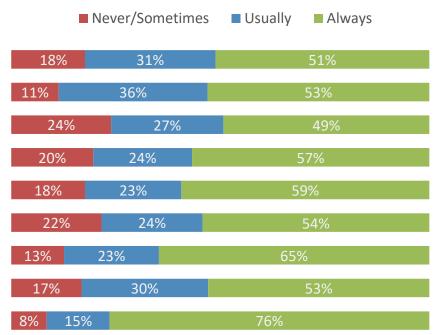
Three Point Scores are calculated by assigning the following values to the rating response scale.

0 - 6	1
7 & 8	2
9 & 10	3



Global Proportions / Three-Point Scores

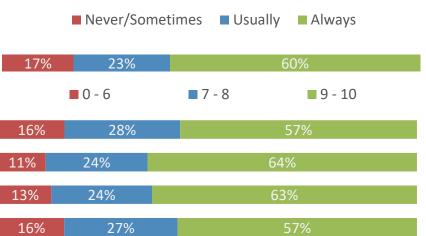
	Valid n	3 PT Score	Plan Percentile Threshold	Benchmark 90th Percentile
Getting Needed Care		2.3353	25th	2.47
14 Getting care, tests, or treatments necessary	379	2.4169		
25 Obtained appointment with specialist as soon as needed	201	2.2537		
Getting Care Quickly		2.3716	25th	2.52
4 Obtaining needed care right away	204	2.4167		
6 Obtained appointment for care as soon as needed	343	2.3265		
Customer Service		2.5205	25th	2.61
31 Getting information/help from customer service	155	2.3613		
32 Treated with courtesy and respect by customer service staff	153	2.6797		





Global Proportions / Three-Point Scores

	Valid n	3 PT Score	Plan Percentile Threshold	Benchmark 90th Percentile		■ Never/Sor	netimes I
Other Measures						- 1101017301	
Coordination of Care	187	2.4278	25th	2.53	17%	23%	
Rating Questions						0 - 6	1 7 - 8
Rating of Health Care	376	2.4096	50th	2.48	16%	28%	
Rating of Personal Doctor	402	2.5323	75th	2.57	11%	24%	
Rating of Specialist	183	2.5082	25th	2.59	13%	24%	
Rating of Health Plan	545	2.4165	25th	2.55	16%	27%	





Composite Analyses

Composite Details and Scoring

- Molina Healthcare of New Mexico
- 4130157



Composite Analyses: Section Information

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

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

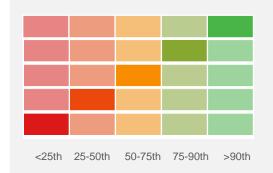


Analyses included in this section include: Plan Summary Rate Scores with comparisons to trending (if available), benchmarks, percentile rankings, accreditation scoring, and correlations.

Measures Included in Composite Analyses

- Getting Needed Care
- Getting Care Quickly
- Customer Service
- Coordination of Care
- · Rating of Health Care
- Rating of Personal Doctor
- Rating of Specialist
- Rating of Health Plan

Percentile Rankings

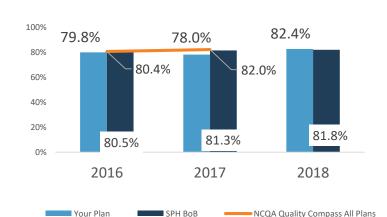




Getting Needed Care: Composite



GETTING NEEDED CARE – TRENDING AND BENCHMARKS



ADICON :	TO TRENC	

	Summary Rate	Change*	Sig Test
2017	78.0%	4.4	\leftrightarrow
2016	79.8%	2.6	\leftrightarrow

COMPARISON TO BENCHMARKS

	Summary Rate	Gap*	Sig Test
2018 SPH BoB	81.8%	0.5	\leftrightarrow
2017 QC All Plans	82.0%	0.4	\leftrightarrow

ACCREDITATION SCORING

	2018	2017	2016
3 Pt Score	2.3353	2.3094	2.3473
Plan Percentile Threshold	25th	25th	25th

^{*} Please note that the "change" or "gap" comparison may vary slightly due to rounding.



Getting Needed Care: Attribute Questions

GETTING NEEDED CARE QUESTIONS

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

- Q14. In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?
- Q25. In the last 6 months, how often did you get an appointment to see a specialist as soon as you needed?

2018 GNC COMPOSITE SUMMARY RATE SCORE



CORRELATION WITH RATING QUESTIONS

	With Health Plan	With Health Care	With Personal Doctor
Q14	0.286	0.443	0.401
Q25	0.241	0.327	0.244

Q14. GETTING CARE, TESTS, OR TREATMENTS NEEDED



Q25. EASE OF GETTING APPOINTMENT WITH A SPECIALIST





Getting Care Quickly: Composite



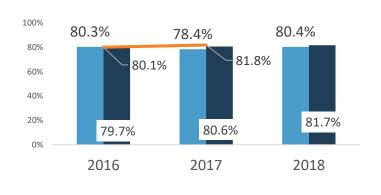
30th

NATIONAL TRENDS

NCQA Quality Compass scores for Getting Care Quickly increased by 1.7% between 2016 and 2017.

The SPH BoB has increased by 1.1% since 2017.

GETTING CARE QUICKLY – TRENDING AND BENCHMARKS



SPH BoB

COMPARISON TO TRENDING Summary Change* Sig Test Rate 2017 78.4% 2.0 \leftrightarrow 2016 80.3% 0.1 \leftrightarrow

COMPARISON TO BENCHMARKS

Your Plan

	Summary Rate	Gap*	Sig Test
2018 SPH BoB	81.7%	-1.3	\leftrightarrow
2017 QC All Plans	81.8%	-1.4	\leftrightarrow

ACCREDITATION SCORING

NCQA Quality Compass All Plans

	2018	2017	2016
3 Pt Score	2.3716	2.3708	2.3905
Plan Percentile Threshold	25th	25th	25th



Getting Care Quickly: Attribute Questions

GETTING CARE QUICKLY QUESTIONS

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

- Q4. In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?
- Q6. In the last 6 months, how often did you get an appointment for a check-up or routine care at a doctor's office or clinic as soon as you needed?

2018 GCQ COMPOSITE SUMMARY RATE SCORE

80.4%

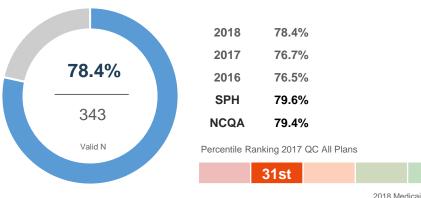
CORRELATION WITH RATING QUESTIONS

	With Health Plan	With Health Care	With Personal Doctor
Q4	0.322	0.311	0.323
Q6	0.19	0.255	0.322

Q4. OBTAINED NEEDED CARE RIGHT AWAY



Q6. OBTAINED APPOINTMENT FOR CARE AS SOON AS NEEDED





Customer Service: Composite



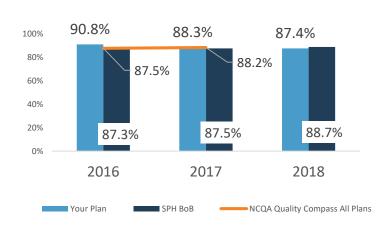
32nd

NATIONAL TRENDS

NCQA Quality Compass scores for Customer Service increased by 0.7% between 2016 and 2017.

The SPH BoB has increased by 1.2% since 2017.

CUSTOMER SERVICE – TRENDING AND BENCHMARKS



	COMPA	RISON TO T	RENDING		COMPARISON TO BENCHMARKS			ACCREDITATION SCORING			
	Summary Rate	Change*	Sig Test		Summary Rate	Gap*	Sig Test		2018	2017	2016
2017	88.3%	-0.9	\leftrightarrow	2018 SPH BoB	88.7%	-1.3	\leftrightarrow	3 Pt Score	2.5205	2.5690	2.6443
2016	90.8%	-3.5	\leftrightarrow	2017 QC All Plans	88.2%	-0.8	\leftrightarrow	Plan Percentile Threshold	25th	50th	90th
Please note that	at the "change" or	"gan" comparison	may vary slightly d	ue to rounding						2018 Med	licaid Adult Survev -



Customer Service: Attribute Questions

CUSTOMER SERVICE QUESTIONS

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

- Q31. In the last 6 months, how often did your health plan's customer service give you the information or help you needed?
- Q32. In the last 6 months, how often did your health plan's customer service staff treat you with courtesy and respect?

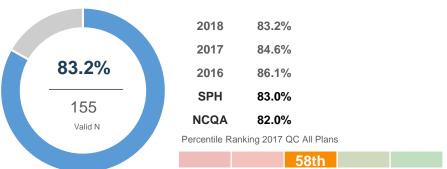
2018 CS COMPOSITE SUMMARY RATE SCORE



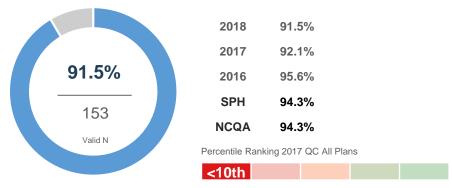
CORRELATION WITH RATING QUESTIONS

	With Health Plan	With Health Care	With Personal Doctor
Q31	0.447	0.355	0.315
Q32	0.257	0.358	0.275

Q31. GETTING INFORMATION/HELP FROM CUSTOMER SERVICE



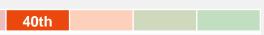
Q32. TREATED WITH COURTESY AND RESPECT BY CUSTOMER SERVICE STAFF





Coordination of Care: Measure



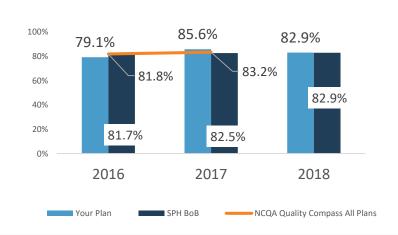


NATIONAL TRENDS

NCQA Quality Compass scores for Coordination of Care increased by 1.4% between 2016 and 2017.

The SPH BoB has increased by 0.4% since 2017.

COORDINATION OF CARE – TRENDING AND BENCHMARKS



COMPARISON TO TRENDING			
	Summary Rate	Change*	Sig Test
2017	85.6%	-2.7	\leftrightarrow
2016	79.1%	3.8	\leftrightarrow

COMPARISON TO BENCHMARKS

	Summary Rate	Gap*	Sig Test
2018 SPH BoB	82.9%		\leftrightarrow
2017 QC All Plans	83.2%	-0.4	\leftrightarrow

ACCREDITATION SCORING

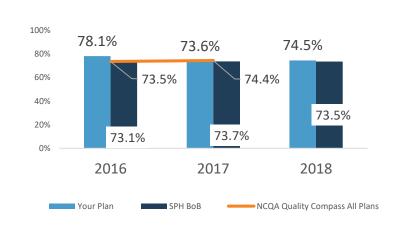
	2018	2017	2016
3 Pt Score	2.4278	2.4365	2.3560
Plan Percentile Threshold	25th	50th	25th
		2018 Medica	id Adult Survey

^{*} Please note that the "change" or "gap" comparison may vary slightly due to rounding.

Rating of Health Care: Measure



RATING OF HEALTH CARE – TRENDING AND BENCHMARKS



	COMPARISON TO TRENDING			COMPARISON TO BENCHMARKS			ACCREDITATION SCORING				
	Summary Rate	Change*	Sig Test		Summary Rate	Gap*	Sig Test		2018	2017	2016
2017	73.6%	0.9	\leftrightarrow	2018 SPH BoB	73.5%	1.0	\leftrightarrow	3 Pt Score	2.4096	2.3654	2.4299
2016	78.1%	-3.7	\leftrightarrow	2017 QC All Plans	74.4%	0.1	\leftrightarrow	Plan Percentile Threshold	50th	25th	75th

Rating of Personal Doctor: Measure

Please see Technical Notes for more information.

PERCENTILE RANKING 2017 QC ALL PLANS

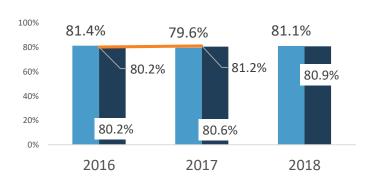
43rd

NATIONAL TRENDS

NCQA Quality Compass scores for Rating of Personal Doctor **increased** by 1.0% between 2016 and 2017.

The SPH BoB has increased by 0.3% since 2017.

RATING OF PERSONAL DOCTOR – TRENDING AND BENCHMARKS



Your Plan SPH BoB ——NCQA Quality Compass All Plans

COMPARISON TO TRENDING

	Summary Rate	Change*	Sig Test
2017	79.6%	1.5	\leftrightarrow
2016	81.4%	-0.3	\leftrightarrow

COMPARISON TO BENCHMARKS

	Summary Rate	Gap*	Sig Test	
2018 SPH BoB	80.9%	0.2	\leftrightarrow	
2017 QC All Plans	81.2%	-0.1	\leftrightarrow	

ACCREDITATION SCORING

	2018	2017	2016
3 Pt Score	2.5323	2.5246	2.5523
Plan Percentile Threshold	75th	50th	75th



Rating of Specialist: Measure



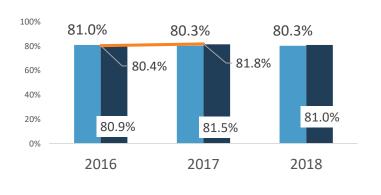
30th

NATIONAL TRENDS

NCQA Quality Compass scores for Rating of Specialist **increased** by 1.4% between 2016 and 2017.

The SPH BoB has decreased by 0.5% since 2017.

RATING OF SPECIALIST-TRENDING AND BENCHMARKS



SPH BoB

COMPARISON TO TRENDING

	Summary Rate	Change*	Sig Test
2017	80.3%		\leftrightarrow
2016	81.0%	-0.7	\leftrightarrow

COMPARISON TO BENCHMARKS

Your Plan

	Summary Rate	Gap*	Sig Test
2018 SPH BoB	81.0%	-0.7	\leftrightarrow
2017 QC All Plans	81.8%	-1.5	\leftrightarrow

ACCREDITATION SCORING

NCQA Quality Compass All Plans

	2018	2017	2016
3 Pt Score	2.5082	2.5303	2.5487
Plan Percentile Threshold	25th	50th	50th

^{*} Please note that the "change" or "gap" comparison may vary slightly due to rounding.



Rating of Health Plan: Measure



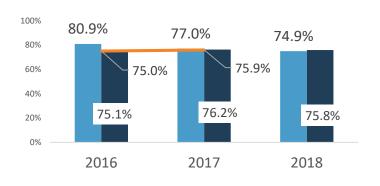
32nd

NATIONAL TRENDS

NCQA Quality Compass scores for Rating of Health Plan **increased** by 0.9% between 2016 and 2017.

The SPH BoB has decreased by 0.4% since 2017.

RATING OF HEALTH PLAN – TRENDING AND BENCHMARKS



SPH BoB



Summary Rate Gap* Sig Test 2018 SPH BoB 75.8% -0.9 →

-1.0

75.9%

Plans

COMPARISON TO BENCHMARKS

Your Plan

 \leftrightarrow

ACCREDITATION SCORING 2018 2017 2016 3 Pt Score 2.4165 2.4536 2.5058 Plan Percentile 25th 50th 75th Threshold 75th 75th

NCQA Quality Compass All Plans

^{*} Please note that the "change" or "gap" comparison may vary slightly due to rounding.



Segmentation Analyses

Subgroup Analysis

- Molina Healthcare of New Mexico
- 4130157



Segmentation Analyses: Section Information

Segmenting Responses The CAHPS® 5.0H survey asks demographic questions about the respondent. This information allows for a market segmentation of your members. Reviewing the set of measures across the assortment of demographic categories may indicate a health plan's overall ability to meet the needs of a varied population.

The percentages represent the Summary Rate for each segment. For example, in the table below, the Summary Rate for the *Rating of Health Plan* is the percentage of respondents who rated their health plan an 8, 9 or 10. The interpretation of this example would be, "Of the respondents with a high school education or less, 63% gave their health plan a rating of 8, 9 or 10. And, of the respondents with some college education or more, 58% gave their health plan a rating of 8, 9 or 10."

	High School or Less	Some College or More
Rating of Health Plan	63%	58%

Refer to "Summary Rate" in the *Technical Notes* for the Summary Rate definition for each composite.

Segment Groups

- Respondent's Age (Q47)
- Respondent's Education (Q49)
- Respondent's Ethnicity (Q50)
- Respondent's Race (Q51)
- Respondent's Health Status (Q36)
- Respondent's Mental/Emotional Health Status (Q37)
- Number of Doctor/Clinic Visits (Q7)
- Data Collection Mode
- County (Database)
- Medical Group (Database)

By Respondent's Age (Q47)

	18 - 34	35 - 44	45 - 54	55 or older	Range*
Getting Needed Care	74.6%	78.4%	87.9%	84.4%	13.3%
Getting Care Quickly	79.1%	73.2%	82.0%	83.2%	10.0%
How Well Doctors Communicate	94.4%	88.6%	91.0%	89.9%	5.9%
Customer Service	82.8%	86.4%	91.5%	86.4%	8.7%
Shared Decision Making	76.5%	64.6%	86.0%	79.6%	21.4%
Health Promotion and Education	58.4%	65.9%	77.8%	74.0%	19.4%
Coordination of Care	76.7%	77.8%	83.0%	87.6%	11.0%
Providing Needed Information	55.2%	40.0%	72.7%	61.8%	32.7%
Ease of Filling Out Forms	93.4%	93.0%	96.5%	91.4%	5.1%
Rating of Health Care (8 - 10)	66.3%	72.1%	77.8%	78.4%	12.1%
Rating of Personal Doctor (8 - 10)	82.2%	72.7%	84.4%	82.5%	11.7%
Rating of Specialist (8 - 10)	75.9%	65.0%	83.7%	82.9%	18.7%
Rating of Health Plan (8 - 10)	68.8%	67.6%	83.8%	77.9%	16.2%
Rating of Health Care (9 - 10)	51.7%	55.8%	64.2%	56.2%	12.5%
Rating of Personal Doctor (9 - 10)	57.8%	59.1%	71.1%	66.3%	13.3%
Rating of Specialist (9 - 10)	62.1%	55.0%	71.4%	61.0%	16.4%
Rating of Health Plan (9 - 10)	47.1%	50.7%	72.6%	58.3%	25.5%

^{*} Range is the difference between Summary Rates shown. The larger the number, the greater the difference in Summary Rates between segment groups for any given question/composite.

By Respondent's Education (Q49)

	High School Graduat or Less	^e Some College or More	Range*
Getting Needed Care	86.1%	77.4%	8.6%
Getting Care Quickly	81.1%	80.9%	0.3%
How Well Doctors Communicate	89.3%	93.2%	3.9%
Customer Service	87.5%	88.3%	0.8%
Shared Decision Making	76.5%	83.4%	7.0%
Health Promotion and Education	71.0%	71.7%	0.8%
Coordination of Care	80.8%	86.5%	5.7%
Providing Needed Information	62.2%	57.1%	5.0%
Ease of Filling Out Forms	92.5%	93.7%	1.2%
Rating of Health Care (8 - 10)	71.1%	77.1%	6.0%
Rating of Personal Doctor (8 - 10)	82.6%	80.4%	2.2%
Rating of Specialist (8 - 10)	84.0%	75.0%	9.0%
Rating of Health Plan (8 - 10)	77.6%	73.3%	4.3%
Rating of Health Care (9 - 10)	57.3%	54.9%	2.5%
Rating of Personal Doctor (9 - 10)	66.1%	63.0%	3.0%
Rating of Specialist (9 - 10)	68.9%	57.4%	11.5%
Rating of Health Plan (9 - 10)	61.0%	53.4%	7.6%

^{*} Range is the difference between Summary Rates shown. The larger the number, the greater the difference in Summary Rates between segment groups for any given question/composite.

By Respondent's Ethnicity (Q50)

	Hispanic/ Latino	Not Hispanic/ Latino	Range*
Getting Needed Care	84.7%	79.7%	5.0%
Getting Care Quickly	84.0%	76.1%	7.8%
How Well Doctors Communicate	94.4%	85.7%	8.7%
Customer Service	89.9%	83.2%	6.8%
Shared Decision Making	81.9%	77.8%	4.1%
Health Promotion and Education	73.4%	68.0%	5.4%
Coordination of Care	86.5%	78.9%	7.6%
Providing Needed Information	61.2%	55.6%	5.7%
Ease of Filling Out Forms	93.4%	92.4%	1.0%
Rating of Health Care (8 - 10)	76.4%	71.6%	4.8%
Rating of Personal Doctor (8 - 10)	82.8%	79.3%	3.5%
Rating of Specialist (8 - 10)	85.3%	73.2%	12.1%
Rating of Health Plan (8 - 10)	79.2%	70.7%	8.5%
Rating of Health Care (9 - 10)	64.4%	45.3%	19.2%
Rating of Personal Doctor (9 - 10)	67.8%	59.3%	8.5%
Rating of Specialist (9 - 10)	74.5%	47.9%	26.6%
Rating of Health Plan (9 - 10)	62.8%	51.0%	11.8%

^{*} Range is the difference between Summary Rates shown. The larger the number, the greater the difference in Summary Rates between segment groups for any given question/composite.

By Respondent's Race (Q51)

	White	Black or African American	Other	Range*
Getting Needed Care	82.6%	70.5%	86.9%	4.3%
Getting Care Quickly	82.3%	73.5%	76.4%	5.9%
How Well Doctors Communicate	92.1%	85.0%	89.9%	2.2%
Customer Service	87.5%	71.4%	88.6%	1.2%
Shared Decision Making	81.7%	79.2%	78.2%	3.6%
Health Promotion and Education	72.2%	78.6%	68.4%	3.8%
Coordination of Care	83.2%	77.8%	80.0%	3.2%
Providing Needed Information	54.5%	83.3%	72.5%	18.0%
Ease of Filling Out Forms	92.5%	85.0%	92.7%	0.2%
Rating of Health Care (8 - 10)	75.5%	64.3%	76.1%	0.6%
Rating of Personal Doctor (8 - 10)	82.6%	61.5%	84.7%	2.1%
Rating of Specialist (8 - 10)	78.6%	42.9%	85.7%	7.1%
Rating of Health Plan (8 - 10)	75.8%	60.0%	75.8%	0.0%
Rating of Health Care (9 - 10)	58.7%	35.7%	57.4%	1.3%
Rating of Personal Doctor (9 - 10)	64.7%	53.8%	65.6%	0.9%
Rating of Specialist (9 - 10)	61.2%	42.9%	68.6%	7.3%
Rating of Health Plan (9 - 10)	60.1%	35.0%	57.4%	2.7%

^{*} Range is the difference between Summary Rates shown. Due to the small number of respondents indicating their race is Black or African-American, this segment is not included in range calculations.

By Respondent's Health Status (Q36)

	Excellent/ Very Good	Good	Fair/Poor	Range*
Getting Needed Care	82.0%	87.6%	79.3%	8.3%
Getting Care Quickly	76.0%	87.3%	78.9%	11.2%
How Well Doctors Communicate	95.7%	92.6%	86.2%	9.5%
Customer Service	85.1%	90.6%	87.4%	5.5%
Shared Decision Making	84.2%	74.4%	79.5%	9.8%
Health Promotion and Education	68.7%	66.7%	73.9%	7.2%
Coordination of Care	86.8%	86.5%	79.2%	7.7%
Providing Needed Information	63.9%	59.3%	52.8%	11.1%
Ease of Filling Out Forms	93.0%	95.7%	91.3%	4.4%
Rating of Health Care (8 - 10)	80.4%	77.6%	67.7%	12.7%
Rating of Personal Doctor (8 - 10)	85.8%	84.2%	75.5%	10.4%
Rating of Specialist (8 - 10)	91.9%	84.3%	73.1%	18.8%
Rating of Health Plan (8 - 10)	75.0%	77.6%	72.6%	4.9%
Rating of Health Care (9 - 10)	63.9%	57.8%	51.3%	12.7%
Rating of Personal Doctor (9 - 10)	61.9%	67.5%	63.2%	5.6%
Rating of Specialist (9 - 10)	78.4%	62.7%	58.1%	20.3%
Rating of Health Plan (9 - 10)	58.5%	57.0%	56.2%	2.3%

^{*} Range is the difference between Summary Rates shown. The larger the number, the greater the difference in Summary Rates between segment groups for any given question/composite.

By Respondent's Mental/Emotional Health Status (Q37)

	Excellent/ Very Good	Good	Fair/Poor	Range*
Getting Needed Care	82.5%	83.9%	81.3%	2.6%
Getting Care Quickly	80.6%	84.5%	78.0%	6.5%
How Well Doctors Communicate	95.7%	92.6%	83.9%	11.8%
Customer Service	87.9%	86.8%	87.1%	1.0%
Shared Decision Making	80.9%	76.0%	79.8%	4.9%
Health Promotion and Education	65.7%	69.6%	75.0%	9.3%
Coordination of Care	87.5%	82.7%	79.5%	8.0%
Providing Needed Information	66.7%	48.0%	54.8%	18.7%
Ease of Filling Out Forms	95.4%	96.1%	87.1%	9.0%
Rating of Health Care (8 - 10)	79.4%	78.2%	64.8%	14.6%
Rating of Personal Doctor (8 - 10)	85.9%	85.5%	71.5%	14.4%
Rating of Specialist (8 - 10)	78.9%	88.9%	74.3%	14.6%
Rating of Health Plan (8 - 10)	80.5%	72.8%	69.4%	11.2%
Rating of Health Care (9 - 10)	64.0%	58.2%	47.2%	16.8%
Rating of Personal Doctor (9 - 10)	66.0%	65.5%	60.8%	5.3%
Rating of Specialist (9 - 10)	63.2%	68.5%	60.0%	8.5%
Rating of Health Plan (9 - 10)	60.6%	54.4%	55.6%	6.2%

^{*} Range is the difference between Summary Rates shown. The larger the number, the greater the difference in Summary Rates between segment groups for any given question/composite.

By Number of Doctor or Clinic Visits (Q7)

	Less Than Three Visits	Three or More Visits	Range*
Getting Needed Care	81.1%	84.1%	3.0%
Getting Care Quickly	72.1%	87.5%	15.4%
How Well Doctors Communicate	92.3%	89.1%	3.2%
Customer Service	85.0%	91.4%	6.4%
Shared Decision Making	76.7%	80.2%	3.5%
Health Promotion and Education	59.2%	79.4%	20.1%
Coordination of Care	78.3%	84.7%	6.3%
Providing Needed Information	53.6%	65.9%	12.3%
Ease of Filling Out Forms	93.7%	92.6%	1.2%
Rating of Health Care (8 - 10)	75.1%	73.8%	1.3%
Rating of Personal Doctor (8 - 10)	82.5%	80.2%	2.3%
Rating of Specialist (8 - 10)	87.1%	76.7%	10.4%
Rating of Health Plan (8 - 10)	74.3%	77.3%	3.0%
Rating of Health Care (9 - 10)	56.4%	56.9%	0.6%
Rating of Personal Doctor (9 - 10)	60.4%	68.9%	8.5%
Rating of Specialist (9 - 10)	67.7%	60.3%	7.4%
Rating of Health Plan (9 - 10)	54.3%	62.9%	8.6%

^{*} Range is the difference between Summary Rates shown. The larger the number, the greater the difference in Summary Rates between segment groups for any given question/composite.



By Number of Data Collection Mode

	Mail	Phone	Internet	Range*
Getting Needed Care	83.8%	78.9%	NA	4.9%
Getting Care Quickly	82.8%	75.6%	NA	7.2%
How Well Doctors Communicate	90.7%	90.5%	NA	0.2%
Customer Service	89.4%	83.2%	NA	6.2%
Shared Decision Making	79.0%	79.0%	NA	0.1%
Health Promotion and Education	73.6%	61.7%	NA	11.9%
Coordination of Care	85.8%	76.7%	NA	9.2%
Providing Needed Information	59.0%	57.9%	NA	1.1%
Ease of Filling Out Forms	94.8%	90.2%	NA	4.6%
Rating of Health Care (8 - 10)	71.1%	80.8%	NA	9.6%
Rating of Personal Doctor (8 - 10)	80.1%	82.9%	NA	2.8%
Rating of Specialist (8 - 10)	77.6%	87.8%	NA	10.1%
Rating of Health Plan (8 - 10)	76.8%	71.5%	NA	5.3%
Rating of Health Care (9 - 10)	56.1%	57.7%	NA	1.6%
Rating of Personal Doctor (9 - 10)	63.7%	65.8%	NA	2.1%
Rating of Specialist (9 - 10)	61.2%	69.4%	NA	8.2%
Rating of Health Plan (9 - 10)	60.0%	52.5%	NA	7.5%

^{*} Range is the difference between Summary Rates shown. This survey wasn't administered using an Internet data collection methodology. In keeping, the Internet segment is not included in range calculations.

	Bernalillo	Chaves	Dona Ana	Eddy	Lea	Mckinley	Otero	San Juan	Sandoval	Santa Fe	Taos	Valencia	Other	Range*
Getting Needed Care	78.1%	82.1%	85.7%	79.8%	74.8%	88.9%	88.2%	75.0%	90.0%	81.2%	85.8%	87.3%	85.6%	7.6%
Getting Care Quickly	77.0%	96.6%	85.6%	73.1%	72.4%	52.8%	87.9%	75.2%	75.0%	81.9%	87.3%	81.1%	83.3%	8.7%
How Well Doctors Communicate	86.8%	90.7%	96.0%	91.7%	84.5%	70.0%	98.4%	80.4%	97.5%	91.7%	97.2%	96.9%	92.7%	9.2%
Customer Service	82.6%	100.0%	87.0%	100.0%	78.6%	78.6%	100.0%	91.7%	100.0%	70.0%	75.0%	95.8%	87.5%	4.9%
Shared Decision Making	82.6%	70.0%	77.3%	83.3%	79.2%	77.8%	100.0%	83.3%	83.3%	68.3%	94.4%	66.7%	78.1%	5.2%
Health Promotion and Education	71.7%	78.6%	59.7%	82.4%	57.9%	77.8%	81.3%	50.0%	60.0%	81.8%	66.7%	52.4%	81.0%	21.3%
Coordination of Care	81.8%	83.3%	77.4%	77.8%	75.0%	66.7%	100.0%	100.0%	100.0%	75.0%	100.0%	100.0%	77.4%	4.4%
Providing Needed Information	58.6%	50.0%	50.0%	100.0%	33.3%	66.7%	66.7%	50.0%	50.0%	0.0%	75.0%	80.0%	60.0%	10.0%
Ease of Filling Out Forms	93.3%	94.3%	93.2%	95.0%	92.0%	93.3%	95.2%	90.9%	89.5%	90.9%	83.3%	100.0%	93.5%	0.4%
Rating of Health Care (8 - 10)	76.1%	75.0%	73.1%	70.6%	70.0%	66.7%	87.5%	66.7%	60.0%	77.8%	75.0%	81.0%	75.4%	3.0%
Rating of Personal Doctor (8 - 10)	80.4%	83.3%	83.3%	77.8%	64.0%	66.7%	80.0%	73.3%	78.6%	84.6%	91.7%	94.1%	85.3%	4.9%
Rating of Specialist (8 - 10)	75.0%	78.9%	89.3%	83.3%	81.8%	100.0%	100.0%	66.7%	87.5%	100.0%	90.0%	77.8%	63.6%	25.6%
Rating of Health Plan (8 - 10)	64.0%	82.4%	81.8%	85.0%	73.1%	58.8%	90.9%	84.0%	61.1%	61.9%	77.8%	92.0%	77.2%	17.8%
Rating of Health Care (9 - 10)	48.9%	64.3%	58.2%	64.7%	60.0%	44.4%	75.0%	50.0%	40.0%	55.6%	58.3%	61.9%	59.6%	10.7%
Rating of Personal Doctor (9 - 10)	60.9%	63.3%	65.2%	55.6%	56.0%	58.3%	75.0%	66.7%	57.1%	53.8%	83.3%	76.5%	69.1%	8.2%
Rating of Specialist (9 - 10)	59.1%	57.9%	78.6%	66.7%	63.6%	100.0%	88.9%	55.6%	62.5%	66.7%	50.0%	55.6%	54.5%	24.0%
Rating of Health Plan (9 - 10)	46.0%	61.8%	64.8%	65.0%	69.2%	41.2%	77.3%	60.0%	44.4%	52.4%	61.1%	72.0%	56.5%	18.7%

^{*} Range is the difference between Summary Rates shown. Due the small sample size of some of these segments, only "Bernalillo," "Dona Ana," and "Other" counties are included in range calculations.

By Medical Group (Database)

	Ben Archer Health Centers	First Choice Community Healthcare	La Clinica De Familia Inc	Presbyterian Healthcare Services	Presbyterian Medical Services	UNM Health Sciences Center	Other	Range*
Getting Needed Care	82.6%	78.0%	91.5%	95.7%	75.4%	63.3%	82.4%	4.4%
Getting Care Quickly	86.4%	84.9%	82.2%	74.3%	68.2%	67.5%	81.7%	3.2%
How Well Doctors Communicate	98.2%	88.7%	100.0%	100.0%	87.0%	100.0%	89.2%	0.5%
Customer Service	92.9%	96.7%	81.3%	78.6%	100.0%	80.0%	85.7%	10.9%
Shared Decision Making	61.9%	80.4%	91.7%	91.7%	85.2%	66.7%	77.4%	3.0%
Health Promotion and Education	62.5%	67.7%	70.6%	78.3%	76.9%	66.7%	68.8%	1.0%
Coordination of Care	71.4%	78.9%	88.9%	100.0%	83.3%	100.0%	82.4%	3.5%
Providing Needed Information	66.7%	50.0%	60.0%	66.7%	100.0%	100.0%	53.0%	3.0%
Ease of Filling Out Forms	95.8%	97.7%	95.5%	91.7%	93.2%	92.9%	92.4%	5.3%
Rating of Health Care (8 - 10)	86.7%	77.4%	82.4%	73.9%	66.7%	100.0%	72.8%	4.6%
Rating of Personal Doctor (8 - 10)	94.1%	79.4%	95.5%	91.7%	78.6%	88.9%	78.4%	1.1%
Rating of Specialist (8 - 10)	85.7%	77.8%	100.0%	77.8%	66.7%	80.0%	80.2%	2.4%
Rating of Health Plan (8 - 10)	83.3%	79.5%	82.6%	69.4%	74.4%	76.9%	73.8%	5.8%
Rating of Health Care (9 - 10)	80.0%	48.4%	41.2%	52.2%	59.3%	55.6%	57.5%	9.1%
Rating of Personal Doctor (9 - 10)	82.4%	64.7%	68.2%	70.8%	71.4%	77.8%	61.2%	3.5%
Rating of Specialist (9 - 10)	71.4%	55.6%	77.8%	66.7%	66.7%	60.0%	62.7%	7.1%
Rating of Health Plan (9 - 10)	66.7%	65.9%	65.2%	41.7%	51.2%	53.8%	57.5%	8.5%

^{*} Range is the difference between Summary Rates shown. Due the small sample size of some of these segments, only "First Choice Community Healthcare" and "Other" Medical Group segments are included in range calculations.



Correlation Analysis

Plan Specific Correlations

- Molina Healthcare of New Mexico
- 4130157



Correlation Analysis: Section Information

Correlations This section provides attribute correlations with *Rating of Health Plan* (Q35), *Rating of Health Care* (Q13), and *Rating of Personal Doctor* (Q23). The correlations show the strength of the linear relationship between the individual attribute and the rating question. The correlation value can range from –1 to +1 with values close to +1 indicating a strong positive relationship. For example, a question that is highly correlated with *Rating of Health Plan* indicates that a low Summary Rate for that question is associated with a low Summary Rate for *Rating of Health Plan*, and a high Summary Rate for that question is associated with a high Summary Rate for *Rating of Health Plan*.

Attributes considered to be highly correlated with the rating measures are shaded blue (r > 0.400). Comparisons to the 2017 Medicaid Adult Quality Compass® All Plans benchmark are also shown with significance testing.

Significance Testing

Green – Significantly higher percentage when compared to current year data.

Red – Significantly lower percentage when compared to current year data.

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% significance level.



	With Health Plan Rating	With Health Care Rating	With Personal Doctor Rating	Plan Summary Rate	2017 Quality Compass All Plans
Getting Needed Care					
14 Getting care, tests, or treatments necessary	0.286	0.443	0.401	88.7%	84.2%
25 Obtained appointment with specialist as soon as needed	0.241	0.327	0.244	76.1%	79.8%
Getting Care Quickly					
4 Obtaining needed care right away	0.322	0.311	0.323	82.4%	84.4%
6 Obtained appointment for care as soon as needed	0.190	0.255	0.322	78.4%	79.4%
How Well Doctors Communicate					
17 Doctors explained things in an understandable way	0.183	0.316	0.488	90.7%	91.7%
18 Doctors listened carefully to you	0.227	0.456	0.643	91.6%	91.7%
19 Doctors showed respect for what you had to say	0.254	0.465	0.63	91.9%	93.0%
20 Doctors spent enough time with you	0.219	0.393	0.601	88.3%	89.2%
Customer Service					
31 Getting information/help from customer service	0.447	0.355	0.315	83.2%	82.0%
32 Treated with courtesy and respect by customer service staff	0.257	0.358	0.275	91.5%	94.3%



Correlation Analysis (continued)

	With Health Plan Rating	With Health Care Rating	With Personal Doctor Rating	Plan Summary Rate	2017 Quality Compass All Plans
Other Measures					
Coordination of Care	0.259	0.387	0.529	82.9%	83.2%
Providing Needed Information	0.392	0.425	0.434	58.6%	68.2%
Ease of Filling Out Forms	0.041	0.084	0.083	93.1%	94.2%
Rating Questions					
Rating of Health Care	0.460	NA	0.618	74.5%	74.4%
Rating of Personal Doctor	0.440	0.618	NA	81.1%	81.2%
Rating of Specialist	0.289	0.674	0.379	80.3%	81.8%
Rating of Health Plan	NA	0.46	0.440	74.9%	75.9%



Priority Matrix

Display of Measure Performance

- Molina Healthcare of New Mexico
- 4130157

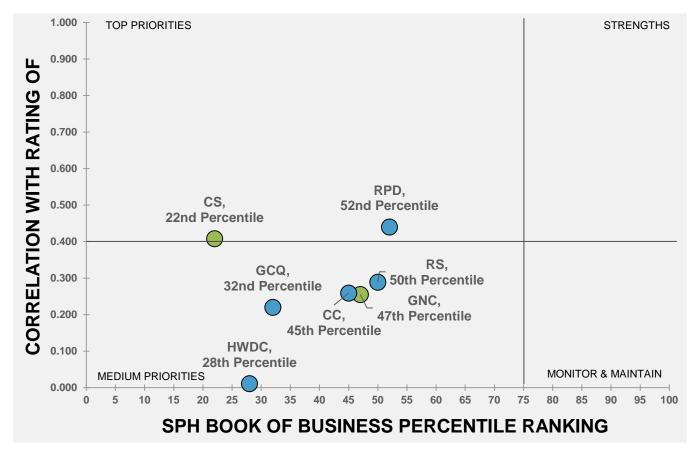


Priority Matrix: Section Information

Priority Matrix This section provides a graphical display of performance of survey composites and key measures, along with their relative 'importance' as it relates to *Rating of Health Plan* (Q35). Composites and key measures are placed on the Priority Matrix according to the interaction between their correlation coefficient and percentile ranking within the 2018 SPH Analytics Book of Business.

Composites and measures with moderate to strong correlations (0.400 and higher) with *Rating of Health Plan* (Q35) and ranking at or above the 75th percentile are considered plan *Strengths* and are placed in the top right quadrant. Composites with moderate to strong correlations (0.400 and higher) with *Rating of Health Plan* but ranking below the 75th percentile are considered *Top Priorities* and are placed in the top left quadrant. The *Monitor and Maintain* quadrant includes those composites and measures that are weakly correlated (below 0.400) with *Rating of Health Plan* but rank at or above the 75th percentile. Composites that are weakly correlated (below 0.400) with *Rating of Health Plan* and rank below the 75th percentile are considered *Medium Priorities* and are placed in the bottom left quadrant.

HEALTH PLAN DOMAIN	HEALTH CARE DOMAIN
Getting Needed Care (GNC)	Getting Care Quickly (GCQ)
Customer Service (CS)	How Well Doctors Communicate (HWDC)
	Coordination of Care (CC)
	Rating of Personal Doctor (RPD)
	Rating of Specialist (RS)







Custom Question Analysis

- Molina Healthcare of New Mexico
- 4130157



Custom Question Results

Your plan asked the following supplemental questions on the 2018 survey tool.

Q#	Survey Item	V-II-I	Category Responses (Summary Rate responses in grey)				Plan's Summary Rate		SPH Book of Business - 2017*			
		Valid n					2018	2017	Summary Rate	Correlation with Q35		
54	In the last 6 months, did anyone from your health plan, doctor's office, or clinic help coordinate your care among these	503	<u>Yes</u>	<u>No</u>					32.8%	26.1%	48.7%	NA
	doctors or other health providers?		32.8%	67.2%								
55	In the last 6 months, who helped to coordinate your care?	461	Someone from your health plan	vour doctor's	Someone from another organization	A friend or family member	<u>You</u>		NA	NA	NA	NA
			8.7%	24.9%	1.3%	13.7%	51.4%					
56	How satisfied are you with the help you received to coordinate your care in the last 6 months?	490	<u>Very</u> <u>dissatisfied</u>	Dissatisfied	Neither dissatisfied nor satisfied	Satisfied	Very satisfied		77.6%	70.3%	81.3%	0.067
			5.1%	2.9%	14.5%	44.7%	32.9%					
57	In the last 6 months, have you received any material from your health plan about good health and how to stay healthy?	512	<u>Yes</u>	<u>No</u>					56.1%	54.9%	NA	NA
			56.1%	43.9%								
58	In the last 6 months, have you received any material from your health plan about care coordination and how to contact the	500	<u>Yes</u>	<u>No</u>					43.8%	39.4%	NA	NA
	care coordination and now to contact the care coordination unit?	300	43.8%	56.2%								

^{*} The 2017 SPH Analytics Book of Business consists of the results of 36 Medicaid adult samples surveyed by SPH Analytics in 2017 that submitted data to NCQA.

Significance Testing

Green – Significantly higher percentage when compared to current year data.

Red – Significantly lower percentage when compared to current year data.



Custom Question Results

Your plan asked the following supplemental questions on the 2018 survey tool.

Q#	Survey Item		Category Responses						Plan's Summary Rate		SPH Book of Business - 2017*	
		Valid n		(Su	mmary Rate i				2018	2017	Summary Rate	Correlation with Q35
59	Did your Care Coordinator sit down with you and create a Plan of Care?	500	<u>Yes</u> 22.2%	<u>No</u> 77.8%					22.2%	31.6%	NA	NA
60	Are you satisfied that your care plan talks about the help you need to stay healthy and remain in your home?	492	Very dissatisfied 3.5%	Dissatisfied 3.7%	Neither dissatisfied nor satisfied 26.4%	Satisfied 41.7%	Very satisfied 24.8%		66.5%	72.4%	NA	NA
61	In the past 6 months, did you talk with your doctor or other health provider about falling or problems with balance or walking?	115	<u>Yes</u> 23.9%	No 76.1%	$\frac{\text{I had no visits in}}{\text{the past 6}}$ $\frac{\text{months}}{\text{n} = 88}$				23.9%	18.7%	NA	NA
62	Did you fall in the past 6 months?	512	<u>Yes</u> 17.8%	<u>No</u> 82.2%					17.8%	14.4%	22.8%	NA
63	In the past 6 months, have you had a problem with balance or walking?	513	<u>Yes</u> 29.8%	<u>No</u> 70.2%					29.8%	25.4%	NA	NA

^{*} The 2017 SPH Analytics Book of Business consists of the results of 36 Medicaid adult samples surveyed by SPH Analytics in 2017 that submitted data to NCQA.

Significance Testing

Green - Significantly higher percentage when compared to current year data.

Red - Significantly lower percentage when compared to current year data.



Custom Question Results

Your plan asked the following supplemental questions on the 2018 survey tool.

Q#	Survey Item	Valid n		Category Responses	Plan's Summary Rate		SPH Book of Business - 2017*	
				(Summary Rate responses in grey)	2018	2017	Summary Rate	Correlation with Q35
64	Has your doctor or other health provider done anything to help prevent falls or treat problems with balance or walking?	372	<u>Yes</u> <u>No</u>	<u>I had no visits in</u> <u>the past 6</u> <u>months</u>	35.8%	21.6%	31.8%	NA
			35.8% 64.2%	n = 116				

^{*} The 2017 SPH Analytics Book of Business consists of the results of 36 Medicaid adult samples surveyed by SPH Analytics in 2017 that submitted data to NCQA.

Significance Testing

Green – Significantly higher percentage when compared to current year data.

Red - Significantly lower percentage when compared to current year data.



SPH understands CAHPS is only one component of your performance improvement program. We invite you to partner with us for ongoing quality improvement.

Performance Improvement Consulting

SPH's consulting services help plans understand their CAHPS results and develop improvement initiatives based on survey data.

Simulation and Drill-Down Surveys

Understand the why behind your members' responses and develop targeted initiatives to improve scores, performance, and member satisfaction.

Continuous Member Engagement and Outreach

Connect with members throughout the year with SPH's multi-channel member engagement and targeted outreach programs. Increase satisfaction/loyalty, close care gaps, and improve scores and ratings.

