

2018 CAHPS Medicaid Adult 5.0H Final Report

Presbyterian Centennial Care

Project Number: 4130432





- 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 Presbyterian Centennial Care 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 Candi Charmoli (770-299-1411), and your Project Manager is Emmanuel Akinleye (770-978-3173, ext. 1366). 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

- Presbyterian Centennial Care
- 4130432



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.

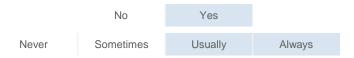
SPH Analytics (SPH) has structured this report to provide insightful and actionable information that plans can use to improve quality and performance.

VALID SURVEYS

Using a mixed (mail and phone with internet) survey methodology, per NCQA protocol, SPH Analytics collected 359 valid surveys from the eligible member population, yielding a response rate of 18.1%.



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
0	1	2	3	4	5	6	7	8	9	10

Percentile Rankings Your plan's approximate percentile rankings in relation to the Quality Compass® All Plans benchmark were calculated by SPH Analytics using information derived from the NCQA 1-100 Benchmark. 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 SUMMARY 20		2017 SUMMARY CHANGE	CHANGE*	2018 SPH A BENCH		2017 QUALITY COMPASS® ALL PLANS BENCHMARK		
MEASURE	RATE	RATE		SUMMARY RATE	PERCENTILE RANK	SUMMARY RATE	PERCENTILE RANK	
8-10 Rating of Health Plan	77.2%	78.6%	-1.5	75.8%	58th	75.9%	55th	
9-10 Rating of Health Plan	59.0%	61.5%	-2.5	59.2%	47th	59.0%	41st	
Getting Needed Care	81.9%	80.1%	1.8	81.8%	43rd	82.0%	41st	
Customer Service	89.0%	90.1%	-1.1	88.7%	50th	88.2%	58th	
Providing Needed Information	74.2%	64.4%	9.8	69.8%	75th	68.2%	93rd	
Ease of Filling Out Forms	95.2%	92.2%	3.0	94.2%	71st	94.2%	67th	

KEY TAKEAWAYS

Your overall Rating of Health Plan (8-10) Summary Rate score was 77.2%, and represents a change of -1.5 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	CHANGE*	2018 SPH ANALY	TICS BENCHMARK	2017 QUALITY COMPASS® ALL PLANS BENCHMARK	
MEASURE	RATE	RATE		SUMMARY RATE	PERCENTILE RANK	SUMMARY RATE	PERCENTILE RANK
8-10 Rating of Health Care	71.8%	72.3%	-0.6	73.5%	33rd	74.4%	24th
9-10 Rating of Health Care	54.8%	55.0%	-0.1	53.8%	54th	54.7%	50th
Getting Care Quickly	83.3%	78.2%	5.1	81.7%	58th	81.8%	59th
How Well Doctors Communicate	91.2%	91.1%	0.2	91.3%	43rd	91.4%	42nd
Shared Decision Making	81.7%	79.5%	2.2	78.6%	71st	79.8%	78th
Health Promotion and Education	74.5%	70.9%	3.6	72.1%	69th	73.8%	58th
Coordination of Care	84.3%	82.9%	1.4	82.9%	56th	83.2%	53rd
8-10 Rating of Personal Doctor	80.4%	82.9%	-2.5	80.9%	39th	81.2%	35th
9-10 Rating of Personal Doctor	64.9%	68.6%	-3.7	65.9%	39th	66.4%	33rd
8-10 Rating of Specialist	80.0%	82.0%	-2.0	81.0%	43rd	81.8%	26th
9-10 Rating of Specialist	61.7%	67.6%	-6.0	65.3%	26th	67.1%	11th

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 SLIMMARY RATE	2018 SPH ANALYTICS BENCHMARK MARY RATE 2017 SUMMARY RATE CHANGE*		2017 QUALITY COMPASS® ALL PLANS BENCHMARK			
WEASURE	2010 SUMMART RATE	2017 SUMMART RATE	CHANGE	SUMMARY RATE	PERCENTILE RANK	SUMMARY RATE	PERCENTILE RANK
Flu Vaccinations (Adults 18-64)	41.9%	41.4%	0.5	39.3%	61st	38.6%	85th
Advising Smokers and Tobacco Users to Quit	63.1%	61.4%	1.7	76.0%	<10th	76.2%	<10th
Discussing Cessation Medications	35.4%	30.8%	4.6	50.1%	11th	49.5%	<10th
Discussing Cessation Strategies	32.3%	30.2%	2.1	44.4%	13th	44.1%	10th

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

OVERVIEW: ACCREDITATION FOR 2018 SCORING

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

MEASURE	PERCENTILE
Getting Needed Care	<25th
Getting Care Quickly	25th
Customer Service	25th
Coordination of Care	25th
Rating of Health Care	<25th
Rating of Personal Doctor	25th
Rating of Specialist	25th
Rating of Health Plan	25th

MEASURE NAME	2018 HE	EDIS/CAHF	'S PERC	ENTILES	Plan 3-Point	Approximate	Approximate Points Awarded
MEASURE NAME	25TH	50TH	75TH	90TH	Score	Threshold	2018
Getting Needed Care	2.33	2.39	2.43	2.47	2.3275	<25th	0.2889
Getting Care Quickly	2.37	2.43	2.47	2.52	2.4035	25th	0.5778
Customer Service	2.48	2.54	2.58	2.61	2.5046	25th	0.5778
Coordination of Care	2.36	2.43	2.48	2.53	2.3858	25th	0.5778
Rating of Health Care	2.35	2.39	2.44	2.48	2.3468	<25th	0.2889
Rating of Personal Doctor	2.43	2.5	2.53	2.57	2.4981	25th	0.5778
Rating of Specialist	2.48	2.51	2.56	2.59	2.4917	25th	0.5778
Rating of Health Plan	2.39	2.46	2.51	2.55	2.4422	25th	1.1556
Approximate Points Earned (13.000 available) 4.62							

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
Shared Decision Making	113	81.7%	79.5%	2.2	78th	79.8%	2.0
Getting Care Quickly	181	83.3%	78.2%	5.1	59th	81.8%	1.4
Customer Service	109	89.0%	90.1%	-1.1	58th	88.2%	0.8

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
Rating of Personal Doctor (8-10)	265	80.4%	82.9%	-2.5	35th	81.2%	-0.8
Rating of Specialist (8-10)	120	80.0%	82.0%	-2.0	26th	81.8%	-1.8
Rating of Health Care (8-10)	248	71.8%	72.3%	-0.6	24th	74.4%	-2.6

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

Significance Testing

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

Please see Technical Notes for more information.

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.

RATING OF PERSONAL DOCTOR

Strategies for improving Rating of Personal Doctor 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.
- 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.

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.

RATING OF HEALTH CARE

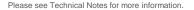
Strategies for improving Rating of Health Care include:

- Analyze, investigate, probe for weakness or QI needs those composite measures highly correlated with Rating of Health Care (i.e., Rating of Personal Doctor, How Well Doctors Communicate, Getting Needed Care, etc.).
- Increase awareness and engage all areas of the Plan and provider network about the CAHPS initiative, findings and outcomes.
- Seek to simplify Plan requirements/processes (i.e., UM, Pharma, Use of IVR) impacting member experience and access to care, tests or treatment.
- Track/audit call center calls or complaints regarding quality of care, choice of providers, access to care, etc.
- Promote availability of Nurse Hotline, web site, live-chat, after-hours centers to get health information, advice and or care.
- Explore potential of aligning EHRs to integrate/facilitate patient care and information among contracted providers.
- Periodically remind contracted providers about Plan and regulatory performance and service standards (i.e., scheduling appointments, test follow-up, etc.).
- Ensure CSR have easy access to updated tool and internal resources to answer questions/provide guidance about plan coverage, out of pocket cost, drug coverage, availability of providers, etc.
- Confirm adequacy of contracted providers or walk-in centers with extended hours.
- Explore potential of broadening alternatives to delivery of care with telecommunication technologies (i.e., telehealth).

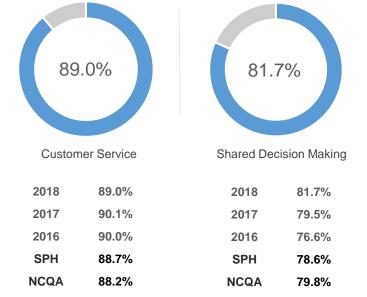
Need Additional Assistance? For health plans that need additional assistance interpreting survey results and leveraging data to identify appropriate next steps for improvement, SPH offers Performance Improvement Consulting. Contact your Sales Director to learn more or visit our website at http://www.sphanalytics.com/consulting.



Composite Summary Rate Scores







Summary Rate Scores

82.0%

NCQA

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

81.8%

NCQA

91.4%

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

NCQA

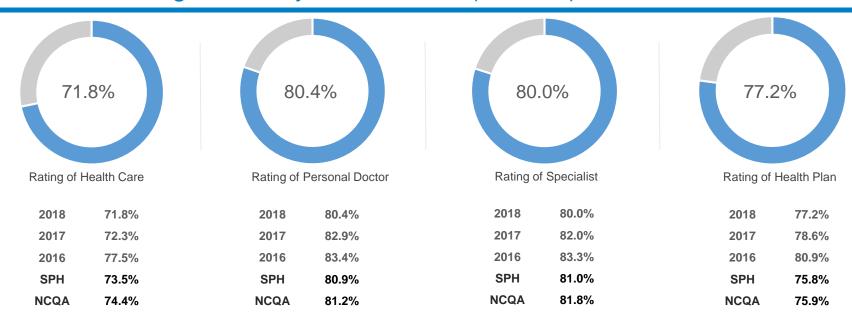
Significance Testing

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 year 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.

Customer Service
Getting Needed Care
Coordination of Care



RATING OF HEALTH PLAN

PERFORMANCE ON KEY DRIVERS

Key Driver	2018 SPH BoB %Rank	QC %Rank
Customer Service	50th	58th
Getting Needed Care	43rd	41st
Coordination of Care	56th	53rd

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 55th percentile when compared to the QC All Plans benchmark.

Compared to last year, your score decreased by 1.5. This result is not statistically significant.



Rating of Health Plan (9 – 10)

Your plan scored in the 41st percentile when compared to the QC All Plans benchmark.

Compared to last year, your score decreased by 2.5. 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	0.553	71.8%	24th
14 Getting care, tests, or treatments necessary	0.472	82.1%	30th
Rating of Specialist	0.417	80.0%	26th
Providing Needed Information	0.392	74.2%	93rd
Rating of Personal Doctor	0.386	80.4%	35th

Overall Rating of Health Plan

Please see Technical Notes for more information.

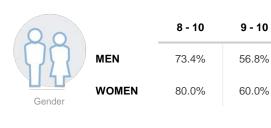
9 - 10

62.6%

53.8%

Demographic Comparisons

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





8 - 10	9 - 10
76.9%	53.8%
76.7%	53.5%
77.0%	57.4%
77.1%	63.9%
	76.9% 76.7% 77.0%





Health Status

	0 - 10	9-10
EXCELLENT/ VERY GOOD	84.1%	64.6%
GOOD	77.2%	57.4%
FAIR/POOR	72.5%	55.8%

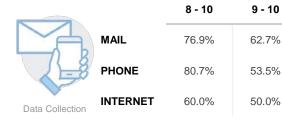
Q _ 10

Q _ 1N



Health Status

	8 - 10	9 - 10
EXCELLENT/ VERY GOOD	82.1%	60.7%
GOOD	76.5%	61.8%
FAIR/POOR	70.7%	53.5%





_	8 - 10	9 - 10
HISPANIC/ LATINO	82.9%	64.2%
NOT HISPANIC/ LATINO	70.9%	52.5%

	8 - 10	9 - 10
WHITE	74.6%	56.8%
BLACK/AFRICAN AMERICAN	88.9%	88.9%
OTHER	78.5%	59.7%

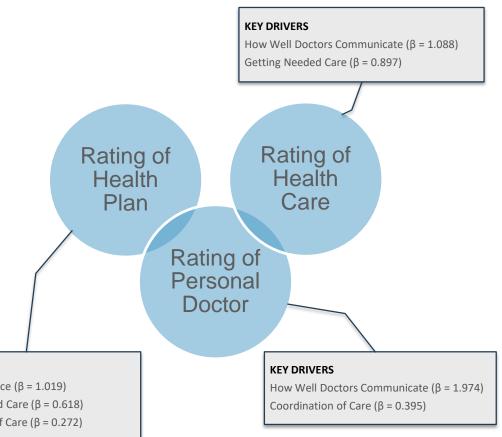


KEY DRIVERS: WHERE TO FOCUS IMPROVEMENT EFFORTS

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.

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.

Customer Service

Monitor

Opportunity

Getting Needed Care

Coordination of Care Monitor

Rating of Health Care

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

How Well Doctors Communicate

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

Monitor



Methodology and Response Rates

VALID SURVEYS

No.

Total Number of Phone Completes =

122

 $>\!\!<$

Total Number of Mail Completes =

217

Total Number of Internet Completes =

20

2018 RESPONSE RATE

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

Comp	leted	Survey	S
COILIP	ICICU	Ourvey	J

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.

18.1%

2025 (Sample) - 39 (Ineligibles)

RESPONSE RATE COMPARISONS

Your plan's response rate in 2017 was 19.7%.

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

	Does not Meet Eligibility Criteria (01)	18
	Language Barrier (03)	8
Ineligible	Mentally/Physically Incapacitated (04)	9
	Deceased (05)	4
	SUBTOTAL	39
	Break-off/Incomplete (02)	43
	Refusal (06)	9
Non-Response	Maximum Attempts Made (07)	1570
	Added to DNC List (08)	5
	SUBTOTAL	1627
TOTAL		1666



Profile of Survey Respondents

Demographic Composition

- Presbyterian Centennial Care
- 4130432

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.



Profile of Survey Respondents

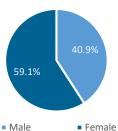
Survey Demographics

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.









	Male Female		
2018	40.9%	59.1%	
2017	36.9%	63.1%	
2016	33.7%	% 66.3%	
SPH	38.0%	62.0%	
NCQA	38.6%	61.4%	

Mental/Emotional Health Status



	Excellent/ Very Good	Good	Fair/Poor
2018	40.8%	29.6%	29.6%
2017	40.0%	29.7%	30.3%
2016	44.0%	32.0%	24.0%
SPH	42.6%	28.8%	28.6%
NCQA	42.6%	28.8%	28.6%

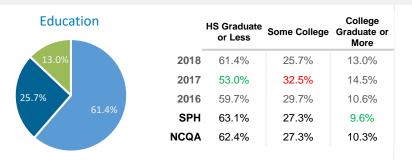
Excellent/ Very GoodGoodFair/Poor

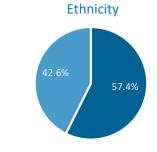
Profile of Survey Respondents

Please see Technical Notes for more information.

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	57.4%	42.6%
2017	56.5%	43.5%
2016	63.6%	36.4%
SPH	20.8%	79.2%
NCQA	18.4%	81.6%

Hispanic/LatinoNot Hispanic/Latino

	Race	
White		59.4%
Black or African-American	2.8%	
Asian	3.4%	
Hawaiian/Pacific Islander	0.9%	
American Indian/Alaskan	12.8%	
Other	31.9%	

■ HS Graduate or Less ■ Some College ■ College Graduate or More

	White	Black or African- American	Asian	Hawaiian/ Pacific Islander	American Indian/ Alaskan	Other
2018	59.4%	2.8%	3.4%	0.9%	12.8%	31.9%
2017	66.5%	2.3%	1.7%	0.8%	10.7%	26.5%
2016	63.3%	2.0%	2.0%	2.3%	9.3%	32.3%
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

- Presbyterian Centennial Care
- 4130432

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.



Available Benchmarks

The following benchmarks are used throughout the report.

		3		
	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

SITES, ATTRIBUTES, AND RET QUESTIONS	Valid n	2018	2017	2016	2018 SPH Book of Business	2017 Public Report	2017 Quality Compass All Plans
Getting Needed Care		81.9%	80.1%	81.8%	81.8%	82.2%	82.0%
14 Getting care, tests, or treatments necessary	251	82.1%	81.5%	85.1%	84.0%	84.4%	84.2%
25 Obtained appointment with specialist as soon as needed	131	81.7%	78.7%	78.4%	79.7%	80.0%	79.8%
Getting Care Quickly		83.3%	78.2%	81.1%	81.7%	82.1%	81.8%
4 Obtaining needed care right away	122	88.5%	81.9%	83.0%	83.7%	84.7%	84.4%
6 Obtained appointment for care as soon as needed	241	78.0%	74.4%	79.1%	79.6%	79.6%	79.4%
How Well Doctors Communicate		91.2%	91.1%	89.8%	91.3%	91.5%	91.4%
17 Doctors explained things in an understandable way	217	88.5%	91.6%	91.2%	91.5%	91.8%	91.7%
18 Doctors listened carefully to you	216	91.2%	90.8%	87.8%	91.5%	91.7%	91.7%
19 Doctors showed respect for what you had to say	217	94.0%	93.2%	90.7%	92.8%	93.1%	93.0%
20 Doctors spent enough time with you	216	91.2%	88.7%	89.6%	89.2%	89.3%	89.2%
Health Plan Customer Service		89.0%	90.1%	90.0%	88.7%	88.2%	88.2%
31 Getting information/help from customer service	109	83.5%	87.5%	83.5%	83.0%	82.1%	82.0%
32 Treated with courtesy and respect by customer service staff	109	94.5%	92.6%	96.5%	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		81.7%	79.5%	76.6%	78.6%	79.8%	79.8%
10 Doctor/health care provider talked about reasons you might want to take a medicine	113	89.4%	90.7%	91.6%	91.6%	92.6%	92.6%
11 Doctor/health care provider talked about reasons you might not want to take a medicine	114	71.9%	70.6%	68.4%	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	112	83.9%	77.2%	69.9%	78.0%	78.1%	77.9%
Other Measures							
8 Health Promotion and Education	251	74.5%	70.9%	66.4%	72.1%	73.9%	73.8%
22 Coordination of Care	127	84.3%	82.9%	80.0%	82.9%	83.3%	83.2%
29 Providing Needed Information	62	74.2%	64.4%	66.7%	69.8%	68.3%	68.2%
34 Ease of Filling Out Forms	331	95.2%	92.2%	96.0%	94.2%	94.2%	94.2%

Please see Technical Notes for more information.

RATI	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	248	71.8%	72.3%	77.5%	73.5%	74.4%	74.4%
	23 Rating of Personal Doctor	265	80.4%	82.9%	83.4%	80.9%	81.3%	81.2%
	27 Rating of Specialist	120	80.0%	82.0%	83.3%	81.0%	81.8%	81.8%
	35 Rating of Health Plan	346	77.2%	78.6%	80.9%	75.8%	76.0%	75.9%
	Rating Questions (9+10)							
	13 Rating of Health Care	248	54.8%	55.0%	53.3%	53.8%	54.8%	54.7%
	23 Rating of Personal Doctor	265	64.9%	68.6%	63.9%	65.9%	66.5%	66.4%
	27 Rating of Specialist	120	61.7%	67.6%	68.5%	65.3%	67.0%	67.1%
	35 Rating of Health Plan	346	59.0%	61.5%	61.5%	59.1%	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)	303	41.9%	41.4%	43.7%	39.3%	37.1%	38.6%
	Advising Smokers and Tobacco Users to Quit	195	63.1%	61.4%	61.6%	76.0%	75.2%	76.2%
	Discussing Cessation Medications	195	35.4%	30.8%	28.5%	50.1%	49.1%	49.5%
	Discussing Cessation Strategies	192	32.3%	30.2%	27.7%	44.4%	43.4%	44.1% 2018 Medicaid Adult Su

Plan Percentile Rankings

Please see Technical Notes for more information.

OMPOSITES, ATTRIBUTES, AND KEY QUESTIONS	Plan Summary Rate	2018 SPH Book of Business	2017 Public Report	2017 Quality Compass All Plans
Getting Needed Care	81.9%	43rd	40th	41st
14 Getting care, tests, or treatments necessary	82.1%	32nd	29th	30th
25 Obtained appointment with specialist as soon as needed	81.7%	54th	57th	58th
Getting Care Quickly	83.3%	58th	59th	59th
4 Obtaining needed care right away	88.5%	88th	81st	82nd
6 Obtained appointment for care as soon as needed	78.0%	30th	29th	30th
How Well Doctors Communicate	91.2%	43rd	42nd	42nd
17 Doctors explained things in an understandable way	88.5%	13th	<10th	<10th
18 Doctors listened carefully to you	91.2%	37th	41st	41st
19 Doctors showed respect for what you had to say	94.0%	75th	64th	66th
20 Doctors spent enough time with you	91.2%	75th	75th	75th
Health Plan Customer Service	89.0%	50th	57th	58th
31 Getting information/help from customer service	83.5%	52nd	60th	61st
32 Treated with courtesy and respect by customer service staff	94.5%	45th	53rd	55th



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	81.7%	71st	77th	78th
10 Doctor/health care provider talked about reasons you might want to take a medicine	89.4%	20th	<10th	<10th
11 Doctor/health care provider talked about reasons you might not want to take a medicine	71.9%	75th	70th	70th
12 Doctor/health care provider asked you what you thought was best when talking about starting or stopping a prescription	83.9%	96th	94th	93rd
Other Measures				
Health Promotion and Education	74.5%	69th	57th	58th
Coordination of Care	84.3%	56th	54th	53rd
Providing Needed Information	74.2%	75th	92nd	93rd
Ease of Filling Out Forms	95.2%	71st	66th	67th

Plan Percentile Rankings

Please see Technical Notes for more information.

RATING	TITEMS	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	71.8%	33rd	26th	24th
	23 Rating of Personal Doctor	80.4%	39th	35th	35th
	27 Rating of Specialist	80.0%	43rd	31st	26th
	42 Rating of Health Plan	77.2%	58th	55th	55th
	Rating Questions (9+10)				
	13 Rating of Health Care	54.8%	54th	51st	50th
	23 Rating of Personal Doctor	64.9%	39th	35th	33rd
	27 Rating of Specialist	61.7%	26th	12th	11th
	42 Rating of Health Plan	59.0%	47th	43rd	41st
EFFECT	TIVENESS 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)	41.9%	61st	84th	85th
	Advising Smokers and Tobacco Users to Quit	63.1%	<10th	<10th	<10th
	Discussing Cessation Medications	35.4%	11th	10th	<10th
	Discussing Cessation Strategies	32.3%	13th	12th	10th



Global Proportions and Accreditation

Three Point Scores and Accreditation Scoring

- Presbyterian Centennial Care
- 4130432

Accreditation Assessment

Please see Technical Notes for more information.

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	018 HEDIS/	CAHPS PE	RCENTILES		Approximate Plan	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	2.3275	<25th	0.2889
Getting Care Quickly	2.37	2.43	2.47	2.52	2.4035	25th	0.5778
Customer Service	2.48	2.54	2.58	2.61	2.5046	25th	0.5778
Coordination of Care	2.36	2.43	2.48	2.53	2.3858	25th	0.5778
Rating of Health Care	2.35	2.39	2.44	2.48	2.3468	<25th	0.2889
Rating of Personal Doctor	2.43	2.5	2.53	2.57	2.4981	25th	0.5778
Rating of Specialist	2.48	2.51	2.56	2.59	2.4917	25th	0.5778
Rating of Health Plan	2.39	2.46	2.51	2.55	2.4422	25th	1.1556
Approximate Points Earned (13.000 available) 4.62							4.6224

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

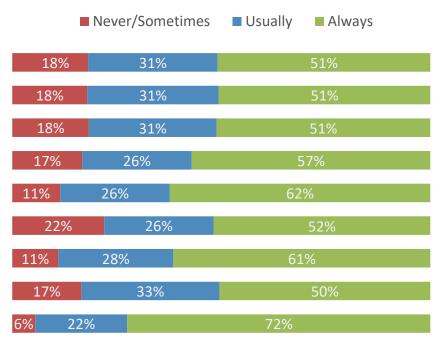
Three Point Scores are calculated by assigning the following values to the rating response scale.

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

Global Proportions / Three-Point Scores

Please see Technical Notes for more information.

	Valid n	3 PT Score	Plan Percentile Threshold	Benchmark 90th Percentile
Getting Needed Care		2.3275	<25th	2.47
14 Getting care, tests, or treatments necessary	251	2.3267		
25 Obtained appointment with specialist as soon as needed	131	2.3282		
Getting Care Quickly		2.4035	25th	2.52
4 Obtaining needed care right away	122	2.5082		
6 Obtained appointment for care as soon as needed	241	2.2988		
Customer Service		2.5046	25th	2.61
31 Getting information/help from customer service	109	2.3394		
32 Treated with courtesy and respect by customer service staff	109	2.6697		



Global Proportions / Three-Point Scores

	Flease see Technical Notes for more information.

	Valid n	3 PT Score	Plan Percentile Threshold	Benchmark 90th Percentile		■ Never/Some	times ■ Usu	ally ■ Always	
Other Measures						= Never/Some		- / ways	
Coordination of Care	127	2.3858	25th	2.53	16%	30%		54%	
Rating Questions						0 - 6	7 - 8	9 - 10	
Rating of Health Care	248	2.3468	<25th	2.48	20%	25%		55%	
Rating of Personal Doctor	265	2.4981	25th	2.57	15%	20%		65%	
Rating of Specialist	120	2.4917	25th	2.59	13%	26%		62%	
Rating of Health Plan	346	2.4422	25th	2.55	15%	26%		59%	



Composite Analyses

Composite Details and Scoring

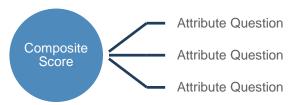
- Presbyterian Centennial Care
- 4130432

Composite Analyses: Section Information

Please see Technical Notes for more 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.

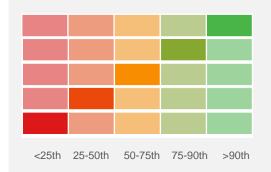


Analyses included in this section include: Plan Summary Rate Scores with comparisons to trending (if available), benchmarks, percentile rankings, accreditation scoring, and correlations.

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

Please see Technical Notes for more information.

PERCENTILE RANKING 2017 QC ALL PLANS

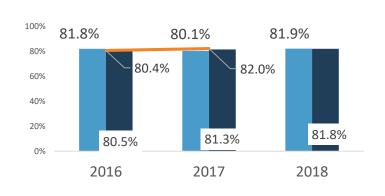


NATIONAL TRENDS

NCQA Quality Compass scores for Getting Needed Care increased by 1.6% between 2016 and 2017.

The SPH BoB has increased by 0.5% since 2017.

GETTING NEEDED CARE – TRENDING AND BENCHMARKS



SPH BoB

\sim		ICON	TO	TDEL	IDING
(() ()	лрдк			IKEN	II)IIV(-

	Summary Rate	Change*	Sig Test
2017	80.1%	1.8	\leftrightarrow
2016	81.8%	0.1	\leftrightarrow

COMPARISON TO BENCHMARKS

Your Plan

	Summary Rate	Gap*	Sig Test
2018 SPH BoB	81.8%		\leftrightarrow
2017 QC All Plans	82.0%	-0.1	\leftrightarrow

ACCREDITATION SCORING

NCQA Quality Compass All Plans

	2018	2017	2016
3 Pt Score	2.3275	2.2708	2.3421
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

Please see Technical Notes for more information.

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



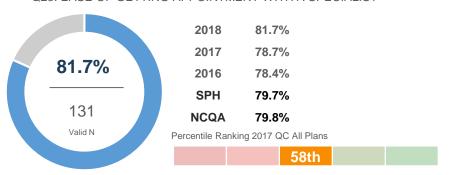
CORRELATION WITH RATING QUESTIONS

	With Health Plan	With Health Care	With Personal Doctor
Q14	0.472	0.515	0.469
Q25	0.258	0.358	0.215

Q14. GETTING CARE, TESTS, OR TREATMENTS NEEDED



Q25. EASE OF GETTING APPOINTMENT WITH A SPECIALIST



Getting Care Quickly: Composite

Please see Technical Notes for more information.

PERCENTILE RANKING 2017 QC ALL PLANS

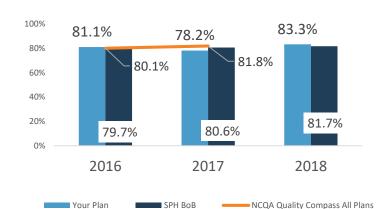


NATIONAL TRENDS

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



	COMPARISON TO TRENDING					
	Summary Rate	' Change' Sig lest				
2017	78.2%	5.1	\leftrightarrow			
2016	81.1%	2.2	\leftrightarrow			

COMPARISON TO BENCHMARKS

	Summary Rate	Gap*	Sig Test
2018 SPH BoB	81.7%	1.6	\leftrightarrow
2017 QC All Plans	81.8%	1.4	\leftrightarrow

ACCREDITATION SCORING

	2018	2017	2016
3 Pt Score	2.4035	2.2981	2.3552
Plan Percentile Threshold	25th	<25th	<25th

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

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?

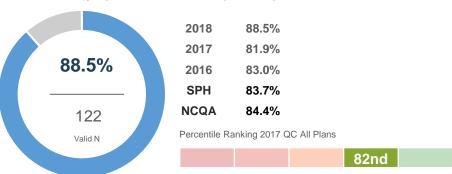
2018 GCQ COMPOSITE SUMMARY RATE SCORE

83.3%

CORRELATION WITH RATING QUESTIONS

	With Health Plan	With Health Care	With Personal Doctor
Q4	0.294	0.317	0.432
Q6	0.237	0.113	0.217

Q4. OBTAINED NEEDED CARE RIGHT AWAY



Q6. OBTAINED APPOINTMENT FOR CARE AS SOON AS NEEDED

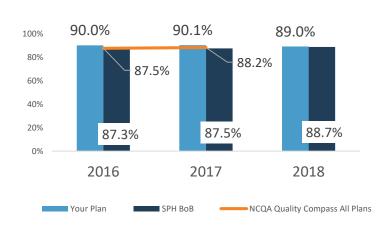




Customer Service: Composite



CUSTOMER SERVICE – 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	90.1%	-1.1	\leftrightarrow	2018 SPH BoB	88.7%	0.3	\leftrightarrow	3 Pt Score	2.5046	2.5809	2.5783	
2016	90.0%	-1.0	\leftrightarrow	2017 QC All Plans	88.2%	0.8	\leftrightarrow	Plan Percentile Threshold	25th	75th	50th	
Please note that	at the "change" or	"gap" comparison	may vary slightly du	ue to rounding.						2018 Med	icaid Adult Survey -	

The SPH BoB has increased by 1.2% since 2017.



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?

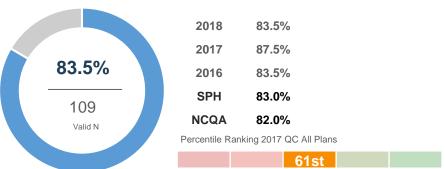
2018 CS COMPOSITE SUMMARY RATE SCORE



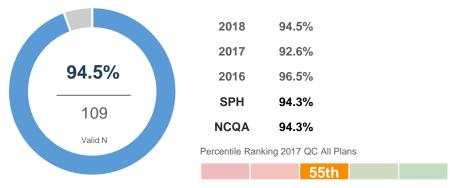
CORRELATION WITH RATING QUESTIONS

	With Health Plan	With Health Care	With Personal Doctor
Q31	0.381	0.193	0.321
Q32	0.305	0.266	0.475

Q31. GETTING INFORMATION/HELP FROM CUSTOMER SERVICE



Q32. TREATED WITH COURTESY AND RESPECT BY CUSTOMER SERVICE STAFF



Coordination of Care: Measure

Please see Technical Notes for more information.

PERCENTILE RANKING 2017 QC ALL PLANS

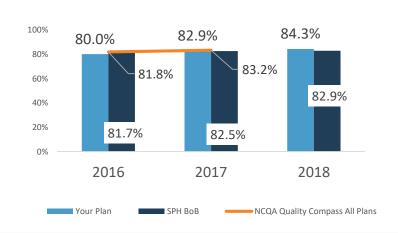


NATIONAL TRENDS

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 Change* Sig Test				
2017	82.9%	1.4	\leftrightarrow		
2016	80.0%	4.3	\leftrightarrow		

COMPARISON TO BENCHMARKS

	Summary Rate	Gap*	Sig Test
2018 SPH BoB	82.9%	1.4	\leftrightarrow
2017 QC All Plans	83.2%	1.0	\leftrightarrow

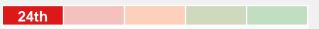
ACCREDITATION SCORING

	2018	2017	2016
3 Pt Score	2.3858	2.3786	2.3364
Plan Percentile Threshold	25th	25th	25th

Rating of Health Care: Measure

Please see Technical Notes for more information.

PERCENTILE RANKING 2017 QC ALL PLANS

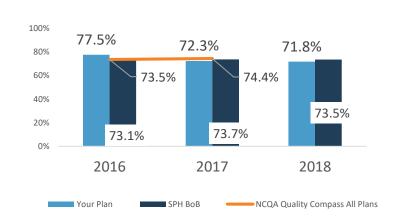


NATIONAL TRENDS

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

The SPH BoB has decreased by 0.2% since 2017.

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	20
2017	72.3%	-0.6	\leftrightarrow	2018 SPH BoB	73.5%	-1.7	\leftrightarrow	3 Pt Score	2.3468	2.4207	2.39
2016	77.5%	-5.8	\leftrightarrow	2017 QC All Plans	74.4%	-2.6	\leftrightarrow	Plan Percentile Threshold	<25th	50th	50

Rating of Personal Doctor: Measure

Please see Technical Notes for more information.

PERCENTILE RANKING 2017 QC ALL PLANS

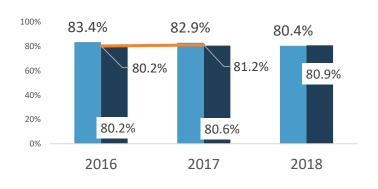
35th

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



SPH BoB

COMPARISON TO TRENDING

	Summary Rate	Change*	Sig Test
2017	82.9%	-2.5	\leftrightarrow
2016	83.4%	-3.0	\leftrightarrow

COMPARISON TO BENCHMARKS

Your Plan

	Summary Rate	Gap*	Sig Test	
2018 SPH BoB	80.9%	-0.5	\leftrightarrow	
2017 QC All Plans	81.2%	-0.8	\leftrightarrow	

ACCREDITATION SCORING

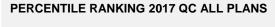
NCQA Quality Compass All Plans

	2018	2017	2016
3 Pt Score	2.4981	2.5749	2.5477
Plan Percentile Threshold	25th	90th	75th

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



Rating of Specialist: Measure



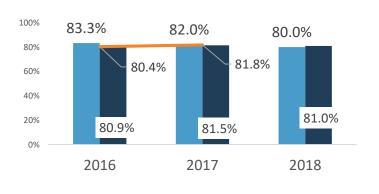
26th

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

 Summary Rate
 Change*
 Sig Test

 2017
 82.0%
 -2.0
 →

 2016
 83.3%
 -3.3
 →

COMPARISON TO TRENDING

COMPARISON TO BENCHMARKS

Your Plan

	Summary Rate	Gap*	Sig Test	
2018 SPH BoB	81.0%	-1.0	\leftrightarrow	
2017 QC All Plans	81.8%	-1.8	\leftrightarrow	

ACCREDITATION SCORING

NCQA Quality Compass All Plans

	2018	2017	2016
3 Pt Score	2.4917	2.5396	2.6019
Plan Percentile Threshold	25th	50th	90th

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

Rating of Health Plan: Measure

Please see Technical Notes for more information.

PERCENTILE RANKING 2017 QC ALL PLANS

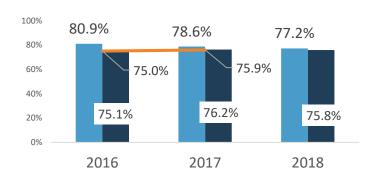


NATIONAL TRENDS

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

	COMPARISON TO TRENDING				
	Summary Rate	Change*	Sig Test		
2017	78.6%	-1.5	\leftrightarrow		
2016	80.9%	-3.8	\leftrightarrow		

Summary Rate Gap* Sig Test 2018 SPH BoB 75.8% 1.4 → 2017 QC All Plans 75.9% 1.3 →

COMPARISON TO BENCHMARKS

Your Plan

_	2018	2017	2016
3 Pt Score	2.4422	2.4870	2.5200
Plan Percentile Threshold	25th	75th	75th

NCQA Quality Compass All Plans

ACCREDITATION SCORING

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



Segmentation Analyses

Subgroup Analysis

- Presbyterian Centennial Care
- 4130432

Segmentation Analyses: Section Information

Please see Technical Notes for more 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

By Respondent's Age (Q47)

	18 - 34	35 - 44	45 - 54	55 or older	Range*
Getting Needed Care	80.8%	81.4%	74.9%	84.3%	9.4%
Getting Care Quickly	71.6%	81.1%	84.6%	88.6%	16.9%
How Well Doctors Communicate	89.4%	90.1%	89.2%	92.6%	3.4%
Customer Service	89.1%	95.5%	92.5%	87.3%	5.2%
Shared Decision Making	82.7%	88.9%	79.8%	80.4%	2.9%
Health Promotion and Education	66.1%	69.0%	73.9%	81.7%	15.5%
Coordination of Care	84.6%	90.0%	84.0%	82.3%	2.4%
Providing Needed Information	76.2%	80.0%	61.5%	81.0%	19.4%
Ease of Filling Out Forms	92.0%	97.7%	94.5%	96.4%	4.4%
Rating of Health Care (8 - 10)	72.9%	89.7%	69.6%	68.2%	4.7%
Rating of Personal Doctor (8 - 10)	76.6%	80.0%	82.0%	82.9%	6.3%
Rating of Specialist (8 - 10)	66.7%	72.7%	79.2%	86.7%	20.0%
Rating of Health Plan (8 - 10)	76.9%	76.7%	77.0%	77.1%	0.2%
Rating of Health Care (9 - 10)	54.2%	69.0%	54.3%	51.4%	2.9%
Rating of Personal Doctor (9 - 10)	60.9%	56.7%	58.0%	72.1%	14.1%
Rating of Specialist (9 - 10)	42.9%	63.6%	50.0%	71.7%	28.8%
Rating of Health Plan (9 - 10)	53.8%	53.5%	57.4%	63.9%	10.0%

^{*} Range is the difference between Summary Rates shown. Due to the small number of respondents aged 35-44, this segment is not included in range calculations.

By Respondent's Education (Q49)

Please see Technical Notes for more information.

	High School Graduate or Less	Some College or More	Range*
Getting Needed Care	79.5%	85.2%	5.7%
Getting Care Quickly	84.3%	81.0%	3.3%
How Well Doctors Communicate	90.3%	92.1%	1.8%
Customer Service	89.7%	88.8%	0.9%
Shared Decision Making	81.4%	81.4%	0.0%
Health Promotion and Education	77.4%	71.4%	6.0%
Coordination of Care	83.5%	83.7%	0.2%
Providing Needed Information	80.0%	69.0%	11.0%
Ease of Filling Out Forms	94.3%	96.0%	1.7%
Rating of Health Care (8 - 10)	70.1%	74.7%	4.6%
Rating of Personal Doctor (8 - 10)	79.1%	84.0%	4.9%
Rating of Specialist (8 - 10)	81.1%	78.6%	2.5%
Rating of Health Plan (8 - 10)	77.8%	76.9%	0.9%
Rating of Health Care (9 - 10)	54.5%	54.2%	0.3%
Rating of Personal Doctor (9 - 10)	65.2%	63.8%	1.4%
Rating of Specialist (9 - 10)	64.9%	54.8%	10.1%
Rating of Health Plan (9 - 10)	62.6%	53.8%	8.7%

^{*} 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)

Please see Technical Notes for more information.

	Hispanic/ Latino	Not Hispanic/ Latino	Range*
Getting Needed Care	82.2%	82.0%	0.3%
Getting Care Quickly	83.4%	84.7%	1.3%
How Well Doctors Communicate	91.5%	92.1%	0.6%
Customer Service	90.4%	89.8%	0.6%
Shared Decision Making	82.8%	84.2%	1.4%
Health Promotion and Education	74.8%	77.7%	2.9%
Coordination of Care	85.9%	83.9%	2.0%
Providing Needed Information	75.0%	77.8%	2.8%
Ease of Filling Out Forms	93.8%	97.0%	3.3%
Rating of Health Care (8 - 10)	75.6%	70.0%	5.6%
Rating of Personal Doctor (8 - 10)	80.4%	82.7%	2.3%
Rating of Specialist (8 - 10)	78.0%	83.0%	5.1%
Rating of Health Plan (8 - 10)	82.9%	70.9%	12.0%
Rating of Health Care (9 - 10)	57.3%	53.0%	4.3%
Rating of Personal Doctor (9 - 10)	65.9%	63.6%	2.3%
Rating of Specialist (9 - 10)	62.7%	62.3%	0.4%
Rating of Health Plan (9 - 10)	64.2%	52.5%	11.7%

^{*} 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	82.2%	100.0%	78.0%	4.3%
Getting Care Quickly	80.9%	66.7%	84.9%	4.0%
How Well Doctors Communicate	91.0%	100.0%	88.7%	2.3%
Customer Service	90.6%	100.0%	87.3%	3.3%
Shared Decision Making	83.5%	73.3%	79.1%	4.4%
Health Promotion and Education	73.5%	83.3%	74.8%	1.3%
Coordination of Care	84.6%	75.0%	83.0%	1.6%
Providing Needed Information	73.2%	100.0%	63.2%	10.0%
Ease of Filling Out Forms	95.1%	85.7%	95.0%	0.1%
Rating of Health Care (8 - 10)	77.1%	100.0%	64.7%	12.4%
Rating of Personal Doctor (8 - 10)	81.9%	100.0%	78.4%	3.6%
Rating of Specialist (8 - 10)	80.6%	66.7%	78.7%	1.9%
Rating of Health Plan (8 - 10)	74.6%	88.9%	78.5%	3.9%
Rating of Health Care (9 - 10)	54.2%	100.0%	51.0%	3.2%
Rating of Personal Doctor (9 - 10)	63.2%	100.0%	64.0%	0.8%
Rating of Specialist (9 - 10)	62.7%	66.7%	59.6%	3.1%
Rating of Health Plan (9 - 10)	56.8%	88.9%	59.7%	3.0%

^{*} 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)

Rating of Health Plan (9 - 10)

Excellent/ Very Fair/Poor Range* Good Good Getting Needed Care 84.1% 83.6% 80.5% Getting Care Quickly 72.8% 86.2% 85.0% 13.4% How Well Doctors Communicate 94.9% 93.9% 87.5% 7.4% **Customer Service** 81.3% 95.7% 89.3% 14.3% Shared Decision Making 82.2% 80.0% 82.3% 2.3% Health Promotion and Education 60.9% 77.3% 79.2% 18.3% Coordination of Care 13.1% 94.7% 86.4% 81.7% Providing Needed Information 81.8% 84.0% 62.5% 21.5% Ease of Filling Out Forms 95.1% 98.5% 90.9% Rating of Health Care (8 - 10) 80.4% 76.0% 66.0% 14.4% Rating of Personal Doctor (8 - 10) 87.1% 78.4% 80.2% 8.7% Rating of Specialist (8 - 10) 86.7% 84.4% 78.2% 8.5% Rating of Health Plan (8 - 10) 84.1% 77.2% 72.5% Rating of Health Care (9 - 10) 58.7% 57.3% 52.0% 6.7% Rating of Personal Doctor (9 - 10) 62.7% 63.7% 8.2% Rating of Specialist (9 - 10) 60.0% 66.7% 60.0% 6.7%

64.6%

57.4%

55.8%

8.8%

^{*} 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 Mental/Emotional Health Status (Q37)

Please see Technical Notes for more information.

	Excellent/ Very Good	Good	Fair/Poor	Range*
Getting Needed Care	84.7%	82.8%	78.5%	6.2%
Getting Care Quickly	80.8%	86.7%	82.4%	5.9%
How Well Doctors Communicate	95.8%	91.1%	85.9%	9.9%
Customer Service	87.1%	90.4%	92.2%	5.1%
Shared Decision Making	78.6%	85.7%	80.7%	7.1%
Health Promotion and Education	67.8%	79.2%	78.3%	11.4%
Coordination of Care	92.5%	75.0%	84.3%	17.5%
Providing Needed Information	72.7%	68.8%	81.8%	13.1%
Ease of Filling Out Forms	95.6%	93.9%	95.6%	1.7%
Rating of Health Care (8 - 10)	83.1%	73.2%	60.2%	22.9%
Rating of Personal Doctor (8 - 10)	88.7%	84.2%	67.1%	21.6%
Rating of Specialist (8 - 10)	91.9%	79.4%	72.3%	19.6%
Rating of Health Plan (8 - 10)	82.1%	76.5%	70.7%	11.4%
Rating of Health Care (9 - 10)	67.4%	52.1%	44.6%	22.8%
Rating of Personal Doctor (9 - 10)	73.6%	61.8%	56.6%	17.0%
Rating of Specialist (9 - 10)	75.7%	58.8%	53.2%	22.5%
Rating of Health Plan (9 - 10)	60.7%	61.8%	53.5%	8.2%

^{*} 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.



Getting Needed Care

Getting Care Quickly

Customer Service

Shared Decision Making

Coordination of Care

How Well Doctors Communicate

Health Promotion and Education

Providing Needed Information

Rating of Health Care (8 - 10)

Rating of Specialist (8 - 10)

Rating of Health Plan (8 - 10)

Rating of Health Care (9 - 10)

Rating of Specialist (9 - 10)

Rating of Health Plan (9 - 10)

Rating of Personal Doctor (9 - 10)

Rating of Personal Doctor (8 - 10)

Ease of Filling Out Forms

By Number of Doctor or Clinic Visits (Q7)

Less Than Three Three or More Visits Range* Visits 82.7% 81.1% 79.2% 88.5% 9.4% 93.9% 89.4% 89.2% 0.1% 89.3% 83.6% 80.2% 3.4% 69.4% 81.3% 11.9% 86.4% 84.1% 2.3% 75.0% 71.4% 3.6% 98.2% 8.2% 77.9% 63.9% 14.0% 81.6% 79.1% 81.6% 78.1% 3.5% 78.2% 75.2% 60.7% 47.2% 13.5% 67.5% 59.3% 8.1% 65.3% 57.8% 7.5%

60.3%

54.3%

6.0%

^{*} 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

Rating of Health Plan (9 - 10)

Mail Phone Internet Range* Getting Needed Care 81.8% 81.4% 84.1% 0.4% Getting Care Quickly 86.9% 76.8% 79.3% 10.1% How Well Doctors Communicate 92.3% 87.6% 98.2% 4.7% Customer Service 89.8% 89.0% 75.0% 0.7% Shared Decision Making 79.3% 4.3% Health Promotion and Education 73.2% 74.0% 88.2% 0.8% Coordination of Care 87.3% 75.7% 11.7% Providing Needed Information 75.0% 77.3% 62.5% 2.3% Ease of Filling Out Forms 92.9% Rating of Health Care (8 - 10) 67.9% 78.7% 76.5% 10.7% Rating of Personal Doctor (8 - 10) 82.3% 84.2% 76.1% 6.1% Rating of Specialist (8 - 10) 79.2% 82.4% 77.8% 3.1% Rating of Health Plan (8 - 10) 80.7% Rating of Health Care (9 - 10) 53.2% 58.7% 52.9% 5.5% Rating of Personal Doctor (9 - 10) 70.3% 55.7% 63.2% Rating of Specialist (9 - 10) 67.5% 52.9% 44.4% 14.6%

62.7%

53.5%

9.2%

^{*} Range is the difference between Summary Rates shown. Due to the small number of Internet respondents, this segment is not included in range.



Correlation Analysis

Plan Specific Correlations

- Presbyterian Centennial Care
- 4130432

Correlation Analysis: Section Information

Please see Technical Notes for more 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.

Correlation Analysis

	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	0.472	0.515	0.469	82.1%	84.2%
25 Obtained appointment with specialist as soon as needed	0.258	0.358	0.215	81.7%	79.8%
Getting Care Quickly					
4 Obtaining needed care right away	0.294	0.317	0.432	88.5%	84.4%
6 Obtained appointment for care as soon as needed	0.237	0.113	0.217	78.0%	79.4%
How Well Doctors Communicate					
17 Doctors explained things in an understandable way	0.205	0.324	0.533	88.5%	91.7%
18 Doctors listened carefully to you	0.222	0.409	0.600	91.2%	91.7%
19 Doctors showed respect for what you had to say	0.223	0.356	0.599	94.0%	93.0%
20 Doctors spent enough time with you	0.185	0.322	0.619	91.2%	89.2%
Customer Service					
31 Getting information/help from customer service	0.381	0.193	0.321	83.5%	82.0%
32 Treated with courtesy and respect by customer service staff	0.305	0.266	0.475	94.5%	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	0.202	0.311	0.464	84.3%	83.2%
Providing Needed Information	0.392	0.413	0.386	74.2%	68.2%
Ease of Filling Out Forms	0.066	0.079	0.078	95.2%	94.2%
Rating Questions					
Rating of Health Care	0.553	NA	0.583	71.8%	74.4%
Rating of Personal Doctor	0.386	0.583	NA	80.4%	81.2%
Rating of Specialist	0.417	0.501	0.313	80.0%	81.8%
Rating of Health Plan	NA	0.553	0.386	77.2%	75.9%



Priority Matrix

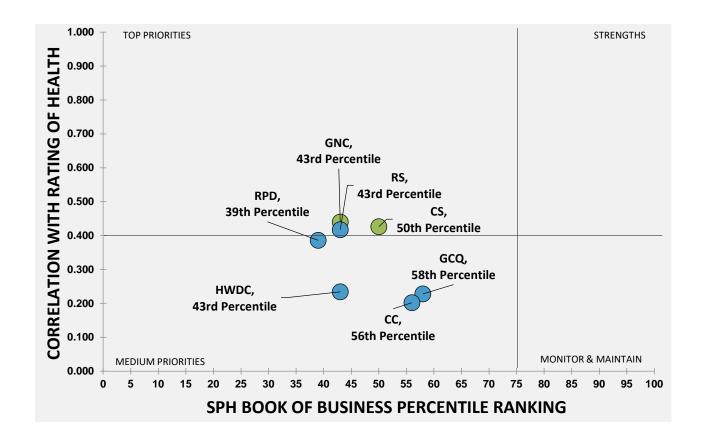
Display of Measure Performance

- Presbyterian Centennial Care
- 4130432

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

- Presbyterian Centennial Care
- 4130432



Custom Question Results

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

				Category Responses				Plan's Summary Rate		SPH Book of Business - 2017*		
Q#	Survey Item	Valid n			(Summary Rate responses in grey)			2018	2017	Summary Rate	Correlation with Q35	
54	In the last 6 months, have you received any material from your health plan about	330	<u>Yes</u>	<u>No</u>					54.8%	58.3%	NA	NA
	good health and how to stay healthy?		54.8%	45.2%								
55	In the last 6 months, have you received any material from your health plan about		<u>Yes</u>	<u>No</u>					51.2%	50.7%	NA	NA
33	care coordination and how to contact the care coordination unit?	304	51.2%	48.8%					31.270	30.770	1471	147.
56	In the last 6 months, did anyone from your health plan, doctor's office, or clinic	328	<u>Yes</u>	<u>No</u>					30.8%	28.6%	48.7%	NA
30	help coordinate your care among these doctors or other health providers?	020	30.8%	69.2%					30.070	20.070	40.170	1471
57	In the last 6 months, who helped to	95	Someone from your	Someone from your doctor's office	Someone from another	A friend or family	<u>You</u>		NA	NA	NA	NA
37	coordinate your care?	95	health plan	or clinic	organization	member			NA	INA	INA	INA
			30.5%	43.2%	4.2%	9.5%	12.6%					
58	How satisfied are you with the help you received to coordinate your care in the	101	<u>Very</u> <u>dissatisfied</u>	Dissatisfied	Neither dissatisfied nor satisfied	Satisfied	Very satisfied		86.1%	87.4%	81.3%	0.067
	last 6 months?		3.0%	3.0%	7.9%	48.5%	37.6%					

^{*} 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 Questions (continued)

Please see Technical Notes for more information.

Q#	Survey Item	Valid n		Category Responses (Summary Rate responses in grey)					an's ary Rate		of Business)17*	
W#	Survey item	valiu II						2018	2017	Summary Rate	Correlation with Q35	
59	Did your Care Coordinator sit down with you and create a Plan of Care?	77	<u>Yes</u> 63.6%	<u>No</u> 36.4%	l am not aware I have a Care Coordinator n = 22				63.6%	58.8%	NA	NA
60	Are you satisfied that your care plan talks about the help you need to stay healthy and remain in your home?	96	Very dissatisfied 0.0%	Dissatisfied 2.1%	Neither dissatisfied nor satisfied 15.6%	Satisfied 47.9%	Very satisfied 34.4%		82.3%	89.4%	NA	NA
61	Do you feel that your cultural and/or language needs are recognized and addressed, as needed, by Presbyterian?	330	<u>Yes</u> 85.2%	<u>No</u> 14.8%					85.2%	82.5%	NA	NA
62	In the past 6 months, have you had a problem with balance or walking?	320	<u>Yes</u> 30.6%	<u>No</u> 69.4%					30.6%	30.2%	NA	NA
63	In the past 6 months, did you talk with your doctor or other health provider about falling or problems with balance or walking?	85	<u>Yes</u> 67.1%	<u>No</u> 32.9%	I had no visits in the past 6 months n = 11				67.1%	72.4%	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 Questions (continued)

Q#	Survey Item	Valid n	Category Responses			Plan's Summary Rate		SPH Book of Business - 2017*	
				(Summary Rate responses in grey)			2017**	Summary Rate**	Correlation with Q35
64	Did you fall in the past 6 months?	95	<u>Yes</u> 42.1%	<u>No</u> 57.9%		42.1%	45.7%	22.8%	NA
65	Has your doctor or other health provider done anything to help prevent falls or treat problems with balance or walking?	77	<u>Yes</u> 66.2%	<u>No</u> 33.8%	Lhad no visits in the past 6 months n = 15	66.2%	63.4%	31.8%	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.



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.

