

MY 2021 CAHPS® MEDICAID ADULT 5.1H SURVEY

PRESBYTERIAN CENTENNIAL CARE



PRESBYTERIAN CENTENNIAL CARE

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SPH Analytics (SPH), a National Committee for Quality Assurance (NCQA) certified HEDIS® Survey Vendor, was selected by Presbyterian Centennial Care to conduct its MY 2021 CAHPS® 5.1H Medicaid Adult Survey. NCQA requires health plans to submit CAHPS survey results in compliance with HEDIS® accreditation requirements.

SURVEY OBJECTIVE The overall objective of the CAHPS® study is to capture accurate and complete information about 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 can aid plans in increasing the quality of provided care.

2022 NCQA CHANGES NCQA made no substantial changes to the survey or program for 2022.

Your Project Manager is Jennifer Brown (734-545-0192). Should you have any questions or comments regarding any aspect of the survey or reporting process, please feel free to call your Project Manager.

DATA COLLECTION

The MY 2021 Medicaid Adult version of the 5.1H CAHPS survey was administered via the following methodology:

First questionnaire mailed 3/8/2022

Second questionnaire mailed 4/12/2022

Initiate follow-up calls to non-responders 5/3/2022 - 5/17/2022 Last day to accept completed surveys 5/18/2022

QUALIFIED RESPONDENTS

Included beneficiaries who were...

- 18 years and older (as of December 31st of the measurement year)
- Continuously enrolled in the plan for at least five of the last six months of the measurement year

2022 RESPONSE RATE CALCULATION

VALID SURVEYS

Total Number of Mail Completed =	167	(12 in Spanish)
Total Number of Phone Completed =	73	(4 in Spanish)
Total Number of Internet Completed =	19	(0 in Spanish)

Number of Undeliverables: 329

Note: Respondents were given the option of completing the survey in Spanish. In place of the English survey, a Spanish survey was mailed to members who were identified by the plan as Spanish-speaking. A telephone number was also provided on the survey cover letter for all members to call if they would like to complete the survey in Spanish.

RESPONSE RATE TRENDING										
		2020	2021	2022						
Completed	SUBTOTAL	287	248	259						
	Does not Meet Eligibility Criteria (01)	9	10	15						
	Language Barrier (03)	5	2	2						
Ineligible	Mentally/Physically Incapacitated (04)	1	0	5						
	Deceased (05)	3	4	2						
	SUBTOTAL	18	16	24						
	Break-off/Incomplete (02)	6	17	15						
	Refusal (06)	51	57	60						
Non-response	Maximum Attempts Made (07)	1660	1687	1667						
	Added to DNC List (08)	3	0	0						
	SUBTOTAL	1720	1761	1742						
	Total Sample	2025	2025	2025						
	Oversampling %	50.0%	50.0%	50.0%						
	Response Rate	14.3%	12.3%	12.9%						
	SPH Response Rate	15.5%	14.8%	12.2%						



INDUSTRY TRENDS

Presbyterian Centennial Care

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

Medicaid Adult: Among the Medicaid Adult population, several measures declined by more than 1% compared to last year. The biggest decreases were in *Rating of Health Care*, *Getting specialist appointments*, and *Getting urgent care*.

Most scores rose at the beginning of the pandemic, but Rating of Health Plan and Coordination of Care are the only measures still rated at least 1% higher than they were in 2019. Getting urgent care and Flu Vaccine are both 3% lower than their 2019 scores.

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

SPH Bo	ook of Bus	siness Tre	ends
2019	2020	2021	2022
62.0%	64.6%	64.5%	64.0%
56.2%	58.8%	59.4%	57.0%
68.8%	70.7%	70.4%	69.5%
66.8%	70.9%	69.7%	68.4%
78.4%	80.3%	79.8%	79.6%
75.7%	76.9%	77.5%	75.8%
82.7%	84.2%	83.8%	83.1%
82.9%	84.7%	83.9%	82.7%
83.2%	83.5%	84.1%	82.3%
85.5%	86.3%	85.8%	85.0%
80.9%	80.7%	82.4%	79.6%
82.7%	82.7%	82.6%	80.9%
84.9%	85.0%	84.3%	81.7%
80.4%	80.4%	80.9%	80.0%
83.8%	85.9%	84.8%	85.0%
45.4%	44.1%	40.6%	41.2%
	2019 62.0% 66.2% 68.8% 66.8% 78.4% 75.7% 82.7% 82.9% 83.2% 84.9% 84.9% 80.4% 83.8%	2019 2020 62.0% 64.6% 56.2% 58.8% 58.8% 70.7% 66.8% 70.9% 78.4% 80.3% 75.7% 76.9% 82.7% 84.2% 83.2% 83.5% 85.5% 86.3% 80.9% 80.7% 84.9% 85.0% 80.4% 80.4% 83.8% 85.9%	62.0% 64.6% 64.5% 56.2% 58.8% 59.4% 68.8% 70.7% 70.4% 66.8% 70.9% 69.7% 78.4% 80.3% 79.8% 75.7% 76.9% 77.5% 82.7% 84.2% 83.8% 83.9% 83.5% 84.1% 85.5% 86.3% 85.8% 80.9% 80.7% 82.4% 84.9% 85.0% 84.3% 80.4% 80.4% 80.9% 83.8% 85.9% 84.8%

Increase of 1% or greater since 2021

Decrease of 1% or greater since 2021



EXECUTIVE SUMMARY

Presbyterian Centennial Care

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

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

SPH Benchmark Information The source for data contained within the SPH Book of Business is all submitting plans that contracted with SPH for MY 2021. Submission occurred on May 25th, 2022.

NCQA Benchmark Information The source for data contained in this publication is Quality Compass[®] All Plans 2021. It is used with the permission of NCQA. Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass[®] is a registered trademark of NCQA.

Significance Testing All significance testing is performed at the 95% confidence level using a t-test.

Small Denominator Threshold NCQA will assign a measure result of NA to overall ratings or composites with a denominator (i.e., the average number of responses across all questions used to calculate the composite) less than 100.

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

COVID-19 IMPACT Because the 2020 survey administration took place during extraordinary circumstances, please use caution when comparing and interpreting trend results.

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



259

Completed surveys

12.9%

Response Rate

Stars: SPH **Estimated** NCQA Rating

NA = Denominator < 100

Scores: All scores displayed are Summary Rate Scores

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

Significance Testing: Current score is significantly higher/lower than 2021 (↑/↓) or 2020 (‡/‡).

Percentiles: Based on the 2022 SPH Book of Business

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

00/		Rating of Health Plan 🌟 🚖										
6.9% #	14 th											
).3% ↓‡	11 th	Opportunity										
A A												
r實實												
3.2%	14 th	Opportunity										
(NA)												
1.7%	73 rd	Power										
A A												
黄黄												
3.3%	41 st											
2YR 🌟												
1.3%	8 th											
3	.3% ↓‡ .2% NA) .7% .3% 2YR	.3% ↓										

Coordination of Care (NA)										
Coordination of Care	86.8%	65 th	Retain							
Getting Needed Care 🜟										
Composite	76.4%	12 th								
Q9. Getting care, tests, or treatment	76.7%	<5 th	Wait							
Q20. Getting specialist appointment	76.0%	26 th	Wait							
Getting Care	e Quickly 🌟									
Composite	74.5%	12 th								
Q4. Getting urgent care	78.8%	29 th	Wait							
Q6. Getting routine care	70.1%	\$ 8 th	Wait							

Customer Service +										
Composite	88.1%	32 nd								
Q24. Provided information or help	81.3%	29 th	Wait							
Q25. Treated with courtesy and respect	94.9%	42 nd	Wait							
Ease of Filling	Out Forms +									
Ease of Filling Out Forms +	95.9%	48 th	Wait							

How Well Doctors Communicate +										
Composite	90.2%	16 th								
Q12. Dr. explained things	91.0%	29 th	Opportunity							
Q13. Dr. listened carefully	90.3%	19 th	Opportunity							
Q14. Dr. showed respect	93.1%	25 th	Opportunity							
Q15. Dr. spent enough time	86.2%	13 th	Opportunity							



ESTIMATED NCQA HEALTH INSURANCE PLAN RATINGS

MEDICAID ADULT

	SCORE DEFINITION	2022 BASE	2022 HPR SCORE*	HPR 4 STAR THRESHOLD	HPR PERCENTILE BAND	SPH ESTIMATED RATING
PATIENT EXPERIENCE						1.5
GETTING CARE						1
Getting Needed Care	Usually or Always	123	76.3%	85.7%	<10 th	1
Getting Care Quickly	Usually or Always	106	74.4%	83.7%	<10 th	1
SATISFACTION WITH PLAN	PHYSICIANS					1.5
Rating of Personal Doctor	9 or 10	174	63.2%	71.5%	10 th	2
Rating of Specialist	9 or 10	92	71.7%	71.9%	33 rd	NA
Rating of Health Care	9 or 10	147	50.3%	60.8%	<10 th	1
Coordination of Care	Usually or Always	Jsually or Always 91 86.8% 87.4%		33 rd	NA	
SATISFACTION WITH PLAN	SERVICES					2
Rating of Health Plan	9 or 10	239	56.9%	64.7%	10 th	2
PREVENTION						
Flu Vaccinations Adults Ages 18-64	Yes	201	38.3%	42.4%	33 rd	3
TREATMENT						
Smoking Advice: Rolling Average	Sometimes, Usually or Always	124	61.3%	77.7%	<10 th	1

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

EXPLANATION

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

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

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

Results are summarized in the table to the left. **Percentiles and ratings are estimated by SPH** based on the 2021 NCQA data and benchmarks.

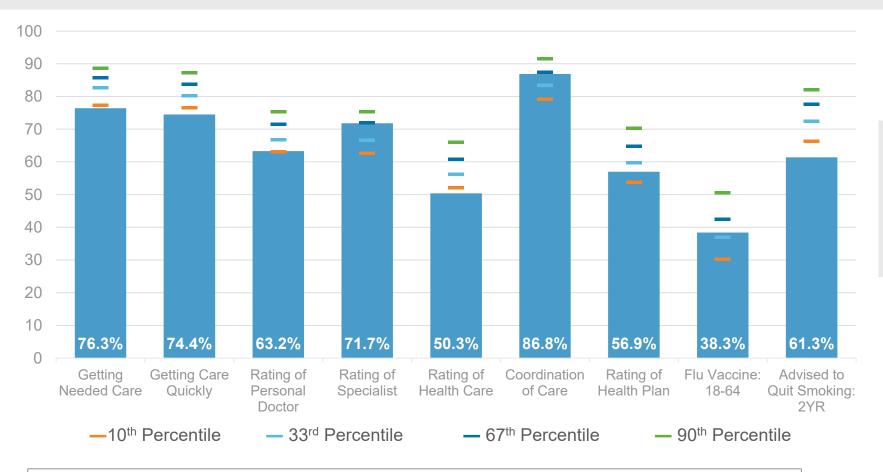
Rating = 1	Rating = 2 Rating = 3		Rating = 4	Rating = 5
<10 th	10 th – 32 nd	33 rd – 66 th	67 th – 89 th	≥90 th
Percentile	Percentile	Percentile	Percentile	Percentile

Notes:

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

COMPARISON TO QUALITY COMPASS CUT POINTS

The graph shows how your plan's **Estimated Health Plan Rating (HPR) scores** used for accreditation ratings compare to the most recent Quality Compass thresholds published by NCQA (Fall 2021).



Dark Blue bar = Your plan's performance is at or above the 67th percentile

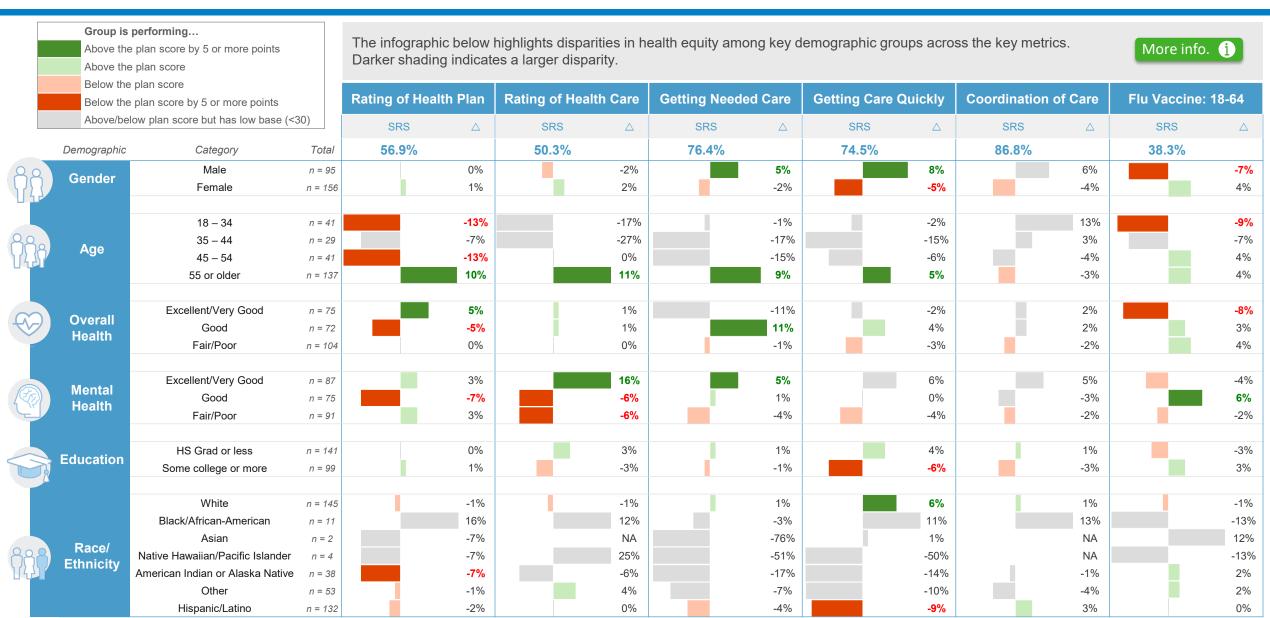
Light Blue bar = Your plan's performance is below the 67th percentile

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

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

	SUMMA	RY RATE		2022 SPH BOOK OF BUSINESS BENCHMARK								
MEASURE	2021	2022	CHANGE	0	PERCENTILE DISTRIBUTION 0 20 40 60 80 100				100	PERCENTILE RANK	BoB SRS	
Health Plan Domain												
Rating of Health Plan % 9 or 10	59.7%	56.9%	-2.8							14 th	64.0%	
Getting Needed Care % Usually or Always	81.4%	76.4%	-5.0							12 th	82.3%	
Customer Service + % Usually or Always	88.5%	88.1%	-0.4							32 nd	89.7%	
Ease of Filling Out Forms + % Usually or Always	94.0%	95.9%	1.9							48 th	95.6%	
Health Care Domain												
Rating of Health Care % 9 or 10	61.7%	50.3% ↓	-11.4							11 th	57.0%	
Getting Care Quickly % Usually or Always	81.4%	74.5%	-6.9							12 th	80.9%	
How Well Doctors Communicate + % Usually or Always	88.7%	90.2%	1.5							16 th	92.7%	
Coordination of Care % Usually or Always	80.7%	86.8%	6.1							65 th	85.0%	
Rating of Personal Doctor % 9 or 10	67.2%	63.2%	-4.0							14 th	69.5%	
Rating of Specialist % 9 or 10	59.5%	71.7%	12.2							73 rd	68.4%	

	SUMMA		2022 SPH BOOK OF BUSINESS BENCHMARK									
MEASURE	2021	2022	CHANGE		PE	RCENTILE	DISTRIBU	TION		PERCENTILE	BoB SRS	
	2021	2022		0	20	40	60	80	100	RANK	BOB SKS	
Effectiveness of Care												
Flu Vaccine: 18-64 % Yes	43.5%	38.3%	-5.2						41 st	41.2%		
Advised to Quit Smoking: 2YR % Sometimes, Usually, or Always	62.9%	61.3%	-1.6							8 th	74.1%	
Discussing Cessation Meds: 2YR + % Sometimes, Usually, or Always	38.8%	38.9%	0.1							11 th	51.9% ▼	
Discussing Cessation Strategies: 2YR + % Sometimes, Usually, or Always	39.3%	33.1%	-6.2							9 th	46.4% ▼	



Group is performing...

Above the plan score by 5 or more points

Above the plan score

Below the plan score

Below the plan score by 5 or more points

Above/below plan score but has low base (<30)

The infographic below highlights disparities in health equity among key demographic groups across the key metrics. Darker shading indicates a larger disparity.

More info. (i)

	Below the plan score Below the plan score by 5 or more points Above/below plan score but has low base (<30)		Rating of Personal Doctor		Rating of Sp	ecialist	Custome	er Service +	How Well Doctors Communicate +		Ease of Filling Out Forms +		
			30)	SRS	Δ	SRS	Δ	SRS	Δ	SRS	Δ	SRS	\triangle
	Demographic	Category	Total	63.2%		71.7%		88.19	2%	90.2%		95.9%	0
20	Gender	Male	n = 95		2%		-2%		5%		2%		3%
11/1	Gender	Female	n = 156		0%		1%		-3%		-1%		-2%
													_
		18 – 34	n = 41		2%		1%		12%		2%		4%
	Age	35 – 44	n = 29		-16%		17%		6%	_	-12%		1%
TAA	, i	45 – 54	n = 41		1%		-9%		-4%		1%		-6%
		55 or older	n = 137		3%		-1%		-3%		1%		0%
		Excellent/Very Good	n = 75		-2%		9%		-4%		8%		-2%
	Overall	Good	n = 72		9%		8%		6%		2%		3%
	Health	Fair/Poor	n = 104		-4%		-10%		-3%		-5%		-1%
						_							
	Mental	Excellent/Very Good	n = 87		12%		-2%		3%		7%		0%
	Health	Good	n = 75		-6%		-6%		-4%		-3%		-2%
	Houtin	Fair/Poor	n = 91		-6%		6%		0%		-3%		1%
		HS Grad or less	n = 141		5%		-7%		1%		-4%		-1%
	Education	Some college or more	n = 99		-8%		5%		2%		-4 <i>%</i> 4%	- N	1%
No.		Some conege of more	11 = 99		-0 /0		5 76		2.70		470		1 70
		White	n = 145		-3%		-3%		0%		2%		1%
		Black/African-American	n = 11		-1%		-12%		-8%		10%		-23%
	Dece /	Asian	n = 2		-63%		28%		12%		NA		4%
888	Race/ Ethnicity	Native Hawaiian/Pacific Islander	n = 4		-30%		28%		-38%		-40%		-46%
Aft	Lumberty	American Indian or Alaska Native	n = 38		4%		-2%		-4%		-4%		-2%
		Other	n = 53		14%		-2%		-8%		1%		-4%
		Hispanic/Latino	n = 132		1%		-5%		-4%		-1%		-2%

Top Three Performing Measures

Your plan's percentile rankings for these measures were the highest compared to the 2022 SPH Book of Business.

MEASURE	2022	PLAN SUM	IMARY RATE S	CORE		2021 QC		20	22 SPH B	юВ
WIEASURE	Valid n	2021	2022	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Rating of Specialist (% 9 or 10)	92^	59.5%	71.7%	12.2	69.0%	2.7	66 th	68.4%	3.3	73 rd
Coordination of Care (% Usually or Always)	91^	80.7%	86.8%	6.1	85.4%	1.4	62 nd	85.0%	1.8	65 th
Customer Service + (% Usually or Always)	79^	88.5%	88.1%	-0.4	88.9%	-0.8	35 th	89.7%	-1.6	32 nd

BOTTOM THREE Performing Measures

Your plan's percentile rankings for these measures were the lowest compared to the 2022 SPH Book of Business.

MEASURE	2022	PLAN SUMMARY RATE SCORE			2021 QC			2022 SPH BoB		
Valid	Valid n	2021	2022	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Getting Needed Care (% Usually or Always)	123	81.4%	76.4%	-5.0	83.6%	-7.2	8 th	82.3%	-5.9	12 th
Getting Care Quickly (% Usually or Always)	106	81.4%	74.5%	-6.9	81.8%	-7.3	7 th	80.9%	-6.4	12 th
Rating of Health Care (% 9 or 10)	147	61.7%	50.3% ↓	-11.4	58.7% ▼	-8.4	<5 th	57.0%	-6.7	11 th

Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (‡/‡) or benchmark score (△/▼).

^Denominator less than 100. NCQA will assign an NA to this measure.

Improving Performance

These measures had the lowest percentile rankings in comparison to the 2022 SPH Book of Business for your plan.

Improvement Strategies – Getting Needed Care

- Assess CAHPS data by health system, PO, and/or network. Communicate results and identify outliers. Evaluate with HEDIS data, complaints, appeals and/or quality of care concerns, and communicate. Identify issues, prioritize and implement improvement activities.
- Work with providers to support patients in navigating health care and remove obstacles. Support and encourage providers to take innovative action to improve access. Examples include: Serve patients quickly, treat urgent issues promptly, minimize wait times, follow-up about appointment times and test results. Another is to develop an in-depth referral/decision-making guide for PCPs to prepare for/with patients explaining need, urgency, patient expectations and responsibilities, and preparations for seeing a specialist.
- Support members and collaborate with providers to enhance access to care through innovative, proactive approaches within Care Management, Chronic Care, and Quality Management. Work with providers to identify and resolve opportunities.
- Continually assess, revisit and simplify plan requirements/processes (i.e., UM) impacting access to care, tests, or treatment. Seek opportunities to improve processes and procedures.
- Review and simplify precertification/auth/referral policies/procedures for both member and provider, including messages and communications. Crossreference with complaints, concerns, and quality of care issues. Improve and clarify processes and communications.
- Evaluate and simplify member communications, assuring that members are clearly told why something is not approved. When appropriate, offer suggestions for next steps or alternatives.
- Ensure Customer Service representatives are able to accurately advise members of available alternatives for care, such as walk-in clinics, urgent care, specialists, labs, etc.
- · Establish a specialist referral hotline for providers and members.

Improvement Strategies - Getting Care Quickly

- Assess CAHPS data by health system, PO, and/or network. Communicate results and identify outliers. Correlate with HEDIS data, complaints, appeals and/or quality of care concerns, and communicate. Support and encourage providers to take innovative action to improve access.
- Support members and collaborate with providers to enhance routine and urgent access to care through innovative, proactive approaches within Care Management, Chronic Care, and Quality Management. Work with providers to identify and resolve opportunities.
- Discuss and engage providers/staff on scheduling best practices, how to improve access to routine/urgent care. Consider scheduling routine appointments well in advance, e.g., 12 months. Provide tools, resources, support and assessment.
- Support, encourage and assist in approaches toward open access scheduling. Allow a portion of each day open for urgent care and/or follow-up care.
- Contract with additional providers for urgent and after-hour appointments/availability.
- · Explore partnering with 24-hour urgent care or walk-in clinics.
- Educate providers and staff about Plan and regulatory appointment wait time requirements or standards (i.e., CAHPS, CMS, States, etc.). Identify opportunities for improvement.
- Provide members streamlined tools and resources (links, apps, etc.) about benefits, providers, referrals, scheduling appointments, etc. Identify options and hours available, and include alternatives, including practices with evening and weekend hours. Consider alternative sources of information, e.g., refrigerator magnets.
- Explore and support alternative telecommunication technologies to expand access to care: telephone, telehealth, telemedicine and patient portals.
- Encourage use of Nurse Hotline/Nurse on Call lines or live-chat via web for members to get health information and advice.

Improvement Strategies - Rating of Health Care

- Analyze, assess, probe for weakness or QI opportunities among those measures or composites that are Key Drivers (or highly correlated) with Rating of Health Care (e.g., GNC, GCQ, HWDC, CoC). Review QI recommendations/actions for related CAHPS composite measures.
- Seek to simplify Plan requirements, processes, and/or procedures (e.g., UM, CM, Pharma, Use of IVR) impacting the member experience of care and access to care, tests or treatment. Examples include: Provide care quickly. Provide quick access to effective treatments. Minimize patient costs for care.
- Assess internal data. Track, audit, review and assess call center calls and/or complaints regarding quality of care, choice of providers, access to care, UM, CM, health system, etc.
- Communicate and educate all areas of the Plan on CAHPS, sharing findings, initiatives and outcomes. Seek input and observations. Engage relevant contributors into QI design/activities.
- Confirm adequacy of contracted providers and walk-in centers with extended hours.
- Ensure CSR have easy access to current, updated resources to provide accurate guidance about plan/drug coverage, out of pocket cost, availability of providers, requirements, processes, etc.
- Foster strong relationships with contracted providers via regular communications and collaboration. Data driven comparisons of PEC metrics can support/guide mutual improvement.
- Explore potential of aligning information flow/ EHRs to better integrate, support, or facilitate patient care, coordination of care and vital information among contracted providers.
- Consider the need to conduct additional measurement, probing of composite measures with targeted populations or health systems (e.g., CG-CAHPS or CAHPS Drill Down Survey).

Full List of Improvement Strategies (1)



KEY DRIVER ANALYSIS OF RATING OF HEALTH PLAN

Presbyterian Centennial Care

POWER CHART: EXPLANATION

POWeR™ CHART CLASSIFICATION MATRIX

Overview. The SatisActionTM key driver statistical model is a powerful, proprietary statistical methodology used to identify the key drivers of the rating of the health plan and provide actionable direction for satisfaction improvement programs. This methodology is the result of a number of years of development and testing using health care satisfaction data. We have been successfully using this approach since 1997.

The model provides the following:

- · Identification of the elements that are important in driving of the rating of the health plan.
- Measurement of the relative importance of each of these elements.
- Measurement of how well members think the plan performed on those important elements.
- Presentation of the importance/performance results in a matrix that provides clear direction for member satisfaction improvement efforts by the plan.

Higher

Your plan performance

Lower

RETAIN

Items in this quadrant have a relatively small impact on the rating of the health plan but performance is above average. Simply maintain performance on these items.

POWER

These items have a relatively large impact on the rating of the health plan and performance is above average. Promote and leverage strengths in this quadrant.

WAIT

These items are somewhat less important than those that fall on the right side of the chart and, relatively speaking, performance is below average. Dealing with these items can wait until more important items have been dealt with.

OPPORTUNITY

Items in this quadrant have a relatively large impact on the rating of the health plan but performance is below average. Focus resources on improving processes that underlie these items.

Lower

Importance to your plan members

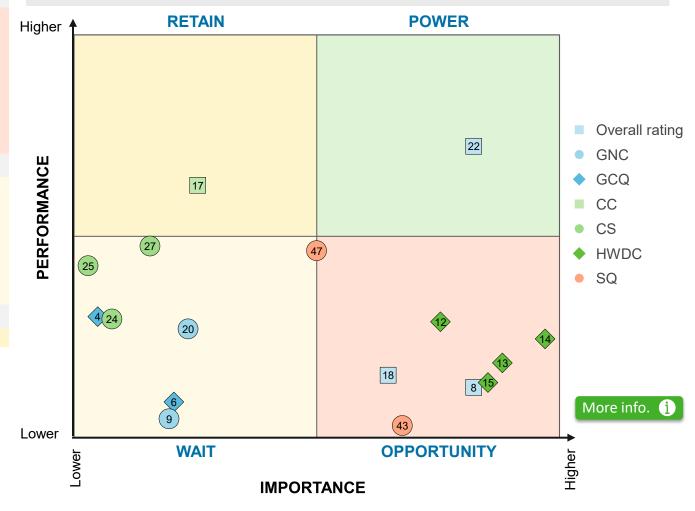
Higher



SURVEY M	IEASURE	SRS	SPH %tile
POWER			
Q22	Rating of Specialist	71.7%	73 rd
OPPORTU	INITY		
Q14	Dr. showed respect	93.1%	25 th
Q13	Dr. listened carefully	90.3%	19 th
Q15	Dr. spent enough time	86.2%	13 th
Q8	Rating of Health Care	50.3%	11 th
Q12	Dr. explained things	91.0%	29 th
Q43	Satisfied with help received to coordinate care	66.2%	
Q18	Rating of Personal Doctor	63.2%	14 th
Q47	Satisfied with care plans	81.2%	
WAIT			
Q20	Getting specialist appointment	76.0%	26 th
Q6	Getting routine care	70.1%	8 th
Q9	Getting care, tests, or treatment	76.7%	<5 th
Q27	Ease of Filling Out Forms +	95.9%	48 th
Q24	Provided information or help	81.3%	29 th
Q4	Getting urgent care	78.8%	29 th
Q25	Treated with courtesy and respect	94.9%	42 nd
RETAIN			
Q17	Coordination of Care	86.8%	65 th

KEY DRIVERS, SUMMARY RATES AND PERCENTILES

The table assesses the key drivers and each measure is ranked by importance within each quadrant. Focus resources on improving processes that underlie the most important items and look for a significant improvement in the rating of the health plan.





KEY DRIVERS OF RATING OF HEALTH PLAN

MEDICAID ADULT

TOP 10 K	EY D	RIVI	ERS
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These items have a relatively large impact on the Rating of Health Plan.

Leverage these questions since they are important to your members and the Rating of Health Plan score for this plan. They are listed in descending order of importance for your plan.

SPH Book of Business regression analysis has identified **Key Drivers** of Rating of Health Plan. The numbers represent the ranked importance across the entire Book of Business.

All Industry scores & rankings are calculated based on the 2022 SPH Book of Business. Any items below the dotted line are Top 10 industry key drivers that are not identified as key drivers for your plan.

ALIGNMENT Are your key	KEY DRIV	ER RANK		ATTRIBUTE	SUMMARY R	ATE SCORE	SPH BoB	
drivers typical of the industry?	YOUR PLAN	INDUSTRY		ATTRIBUTE	YOUR PLAN	INDUSTRY	PERCENTILE	CLASSIFICATION
			Q28	Rating of Health Plan	56.9%	64.0%	14 th	
\checkmark	1	10	Q14	Dr. showed respect	93.1%	94.5%	25 th	Opportunity
\checkmark	2	8	Q13	Dr. listened carefully	90.3%	92.7%	19 th	Opportunity
	3	12	Q15	Dr. spent enough time	86.2%	90.9%	13 th	Opportunity
\checkmark	4	3	Q22	Rating of Specialist	71.7%	68.4%	73 rd	Power
\checkmark	5	1	Q8	Rating of Health Care	50.3%	57.0%	11 th	Opportunity
	6	13	Q12	Dr. explained things	91.0%	92.6%	29 th	Opportunity
	7		Q43	Satisfied with help received to coordinate care	66.2%			Opportunity
\checkmark	8	2	Q18	Rating of Personal Doctor	63.2%	69.5%	14 th	Opportunity
	9		Q47	Satisfied with care plans	81.2%			Opportunity
	10	14	Q17	Coordination of Care	86.8%	85.0%	65 th	Retain
	11	7	Q20	Getting specialist appointment	76.0%	79.6%	26 th	Wait
	12	6	Q6	Getting routine care	70.1%	80.0%	8 th	Wait
	13	4	Q9	Getting care, tests, or treatment	76.7%	85.0%	<5 th	Wait
	16	5	Q4	Getting urgent care	78.8%	81.7%	29 th	Wait
	17	9	Q25	Treated with courtesy and respect	94.9%	95.1%	42 nd	Wait



MEASURE ANALYSES

Measure Details and Summary Rate Scores

Presbyterian Centennial Care



Section Information

Drilling Down Into Composites And Ratings This section is designed to give your plan a detailed report on the performance of each Star Rating measure as well as a few other key metrics. The measure analysis section contains:

Rating & Composite level information including...

- · Percentile ranking and benchmark performance
- · Historic scores
- Market performance

Attribute level information for composites including...

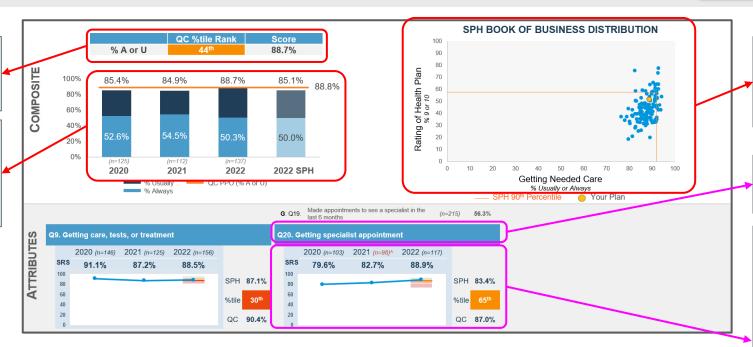
- Gate questions
- Percentile ranking and benchmark performance
- · Summary rate score trending

Percentile Bands >90th $67^{th} - 89^{th}$ $33^{rd} - 66^{th}$ $10^{th} - 32^{nd}$ <10th

All scores displayed in this section are summary rate scores (notated with 'SRS').

Your plan's performance ranking along with **Summary** Rate Score are displayed at the top for quick reference.

Your plan's current year **Summary Rate Score** and base size along with previous two years, SPH BoB and Quality Compass national data are displayed.



Your plan's **Summary Rate Score** is plotted against the SPH Book of Business to provide a visual representation of market performance. The orange line represents the SPH 90th percentile.

More info. (i)

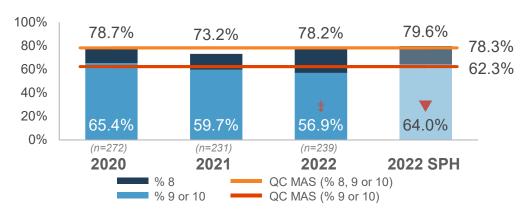
Gate questions (indicated by "G:") for attributes are displayed above attributes scores displayed are % Yes

For composites – all corresponding attributes that roll-up into the composite score are displayed:

- Historic bases and Summary Rate Scores along with significant changes in trend notated
- Benchmark comparisons along with significant differences notated
- Percentile ranking against Quality Compass
- Graphic representation of trend and 2021 **Quality Compass** percentile bands

RATING OF HEALTH PLAN

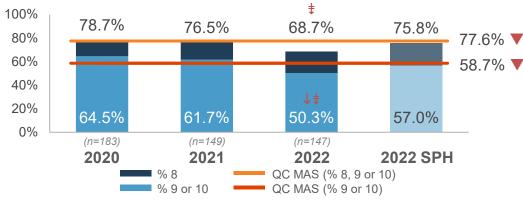
	QC %tile Rank	Score
% 8, 9 or 10	47 th	78.2%
% 9 or 10	19 th	56.9%



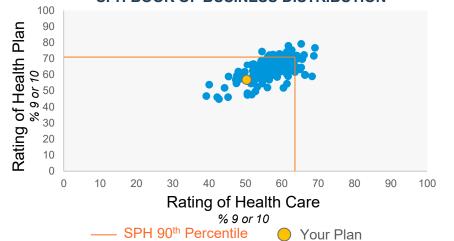
	Key Drivers Of The Rating Of The Health Plan								
	POWER		OPPORTUNITIES						
Q22	Rating of Specialist	Q14	Dr. showed respect						
		Q13	Dr. listened carefully						
		Q15	Dr. spent enough time						
		Q8	Rating of Health Care						
		Q12	Dr. explained things						
		Q43	Satisfied with help received to coordinate care						
		Q18	Rating of Personal Doctor						
		Q47	Satisfied with care plans						

RATING OF HEALTH CARE

		QC %ti	le Rank	Score	
	% 8, 9 or 10	</th <th>5th</th> <th>68.7%</th> <th></th>	5 th	68.7%	
	% 9 or 10	</th <th>5th</th> <th>50.3%</th> <th></th>	5 th	50.3%	
00%			‡		
80%	78.7%	76.5%	68.7%	75.8%	7





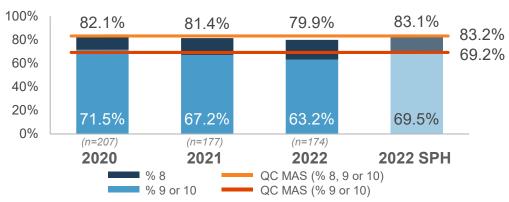


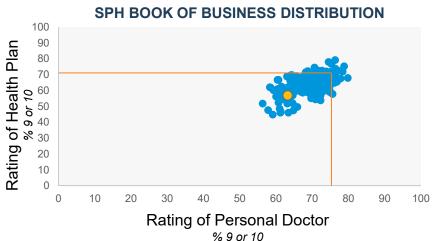
^Denominator less than 100. NCQA will assign an NA to this measure.



RATING OF PERSONAL DOCTOR

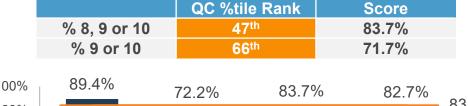
	QC %tile Rank	Score
% 8, 9 or 10	17 th	79.9%
% 9 or 10	11 th	63.2%

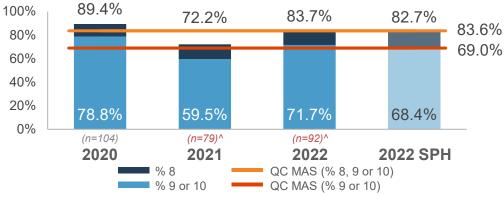




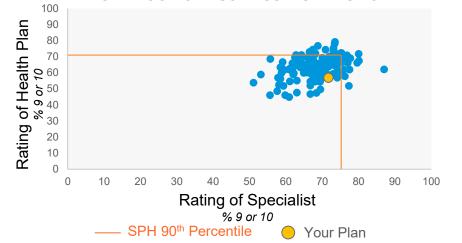
— SPH 90th Percentile

RATING OF SPECIALIST





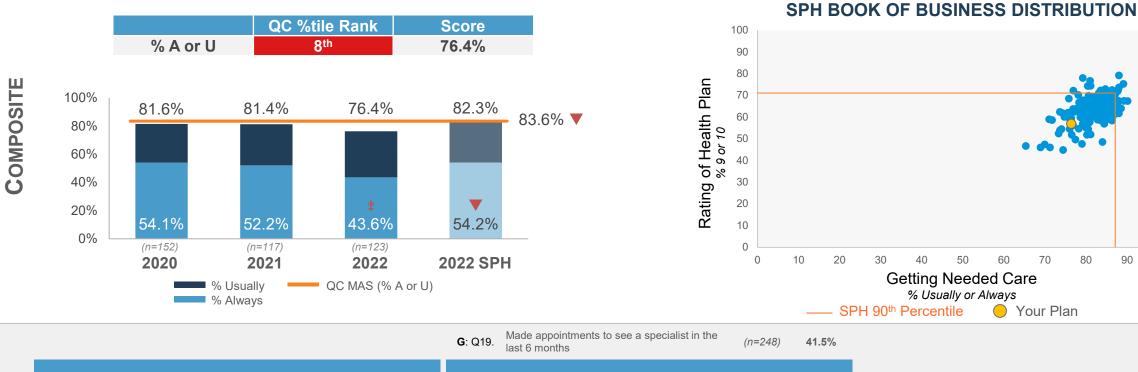
SPH BOOK OF BUSINESS DISTRIBUTION



^Denominator less than 100. NCQA will assign an NA to this measure.

Your Plan

ATTRIBUTES





50

60

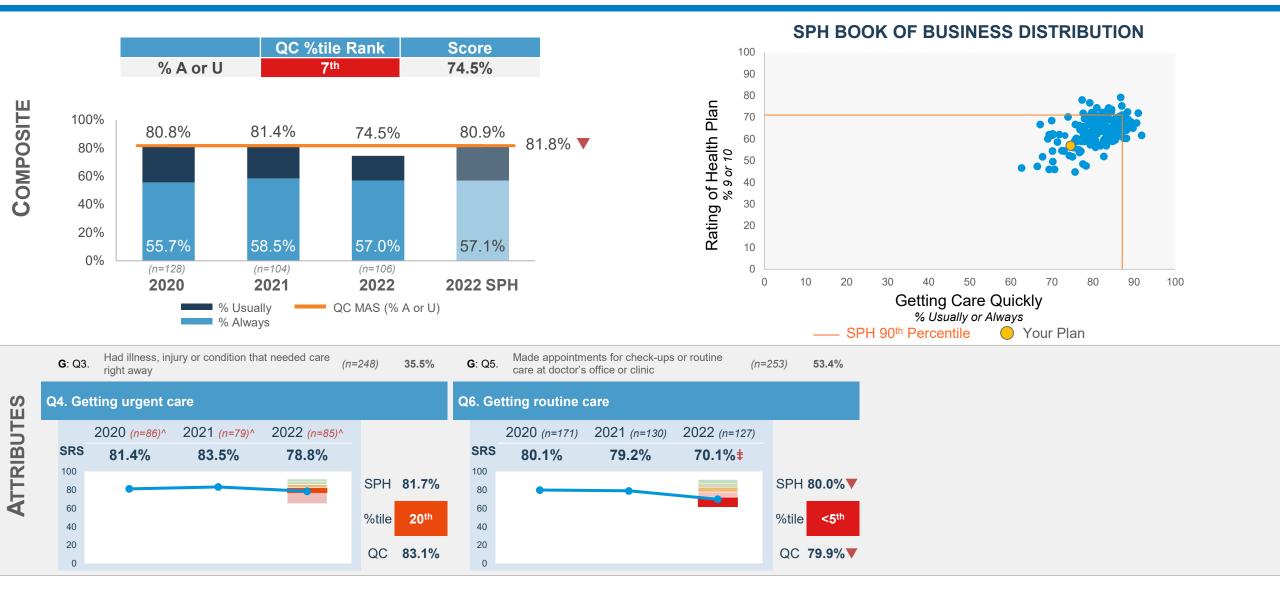
70

Your Plan

80

90

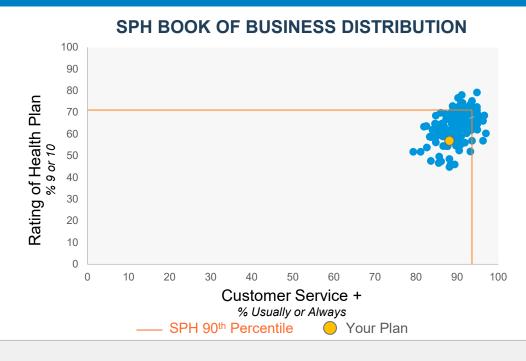
100



COMPOSITE

ATTRIBUTES



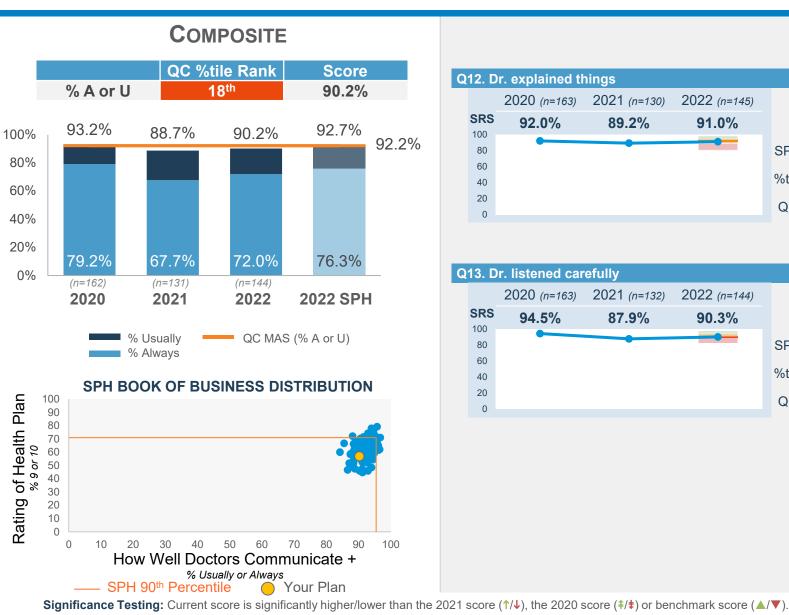






How Well Doctors Communicate +

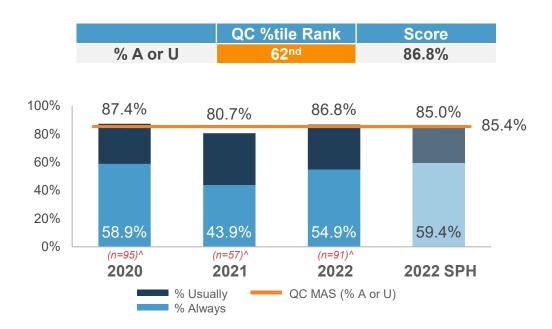
MEDICAID ADULT

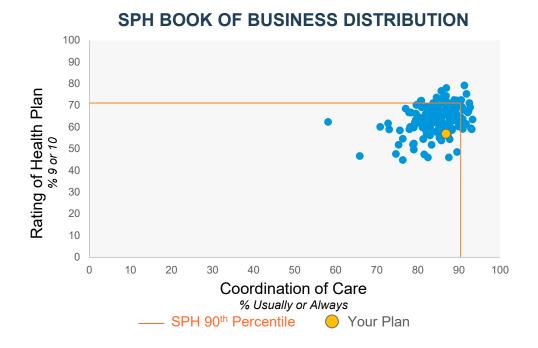


ATTRIBUTES Q12. Dr. explained things Q14. Dr. showed respect 2020 (n=163) 2021 (*n*=130) 2022 (*n*=145) 2020 (n=163) 2021 (*n*=132) 2022 (*n*=145) SRS SRS 92.0% 91.0% 95.1% 89.2% 92.4% 93.1% 100 100 SPH 92.6% SPH 94.5% 80 80 60 60 %tile 40 40 20 20 QC 92.1% QC 94.2% 0 0











SUMMARY OF TREND AND BENCHMARKS

Presbyterian Centennial Care

Trend and Benchmark Comparisons The CAHPS® 5.1H survey is designed to use composite scores to facilitate the aggregation of information and the communication of results. Questions are combined into composite categories comprising a particular service area managed by your plan. These composites, the questions that make up composites (attributes), additional measures, and rating questions are shown on the following pages.

<u>Summary Rate Scores:</u> Shows how your plan's composite and key question Summary Rates compare to trend data (if applicable) and benchmark scores. To help you identify how your plan's population compares to other plans and to previous data, statistically significant differences are highlighted.

<u>Plan Percentile Rankings:</u> Shows your plan's Summary Rates and percentile rankings in relation to the benchmarks.

Significance Testing

Green – Current year score is significantly higher than the 2021 score (↑), the 2020 score (♣) or benchmark score (▲).

Red – Current year score is significantly lower than the 2021 score (↓), the 2020 score (‡) or benchmark score (▼).

No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% confidence level.

Available Benchmarks

The following benchmarks are used throughout the report.

	2021 Quality Compass® All Plans	7071 NCOA 1=100 Benchmark		
	Includes all Medicaid Adult samples that submitted data to NCQA in 2021.	A percentile benchmark (with values ranging from the first through the one hundredth percentile) calculated by NCQA and derived from Medicaid Adult data submitted to NCQA in 2021.	Includes all Medicaid Adult samples that contracted with SPH Analytics to administer the MY2021 CAHPS 5.1H survey and submitted data to NCQA.	
PROS	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 	
CONS	Only contains benchmarks for certain key questions, composites, and rating questions	Only contains benchmarks for certain key questions, composites, and rating questions	Contains fewer plans than the Quality Compass® All Plans Benchmarks	
SIZE	168 Plans	168 Plans	169 Plans / 39,089 Respondents	



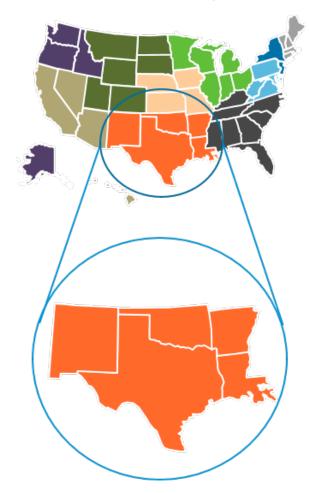
	2022 Valid n	2020	2021	2022	2022 SPH BoB	2021 QC
Rating Questions (% 9 or 10)						
★ Q28. Rating of Health Plan	239	65.4%	59.7%	56.9% ‡	64.0% ▼	62.3%
★ Q8. Rating of Health Care	147	64.5%	61.7%	50.3% ↓≢	57.0%	58.7% ▼
★ Q18. Rating of Personal Doctor	174	71.5%	67.2%	63.2%	69.5%	69.2%
★ Q22. Rating of Specialist	92^	78.8%	59.5%	71.7%	68.4%	69.0%
Rating Questions (% 8, 9 or 10)						
Q28. Rating of Health Plan	239	78.7%	73.2%	78.2%	79.6%	78.3%
Q8. Rating of Health Care	147	78.7%	76.5%	68.7% ‡	75.8%	77.6% V
Q18. Rating of Personal Doctor	174	82.1%	81.4%	79.9%	83.1%	83.2%
Q22. Rating of Specialist	92^	89.4%	72.2%	83.7%	82.7%	83.6%
★ Getting Needed Care (% Usually or Always)	123	81.6%	81.4%	76.4%	82.3%	83.6% ▼
Q9. Getting care, tests, or treatment	146	83.3%	84.0%	76.7%	85.0% V	85.5% V
Q20. Getting specialist appointment	100	79.8%	78.8%	76.0%	79.6%	81.8%
★ Getting Care Quickly (% Usually or Always)	106	80.8%	81.4%	74.5%	80.9%	81.8% ▼
Q4. Getting urgent care	85^	81.4%	83.5%	78.8%	81.7%	83.1%
Q6. Getting routine care	127	80.1%	79.2%	70.1% 🕏	80.0% ▼	79.9% ▼
★ Q17. Coordination of Care	91^	87.4%	80.7%	86.8%	85.0%	85.4%
Effectiveness of Care (% Sometimes, Usually, or Always)						
★ Q31. Flu Vaccine: 18-64 (% Yes)	201	46.6%	43.5%	38.3%	41.2%	40.0%
★ Q33. Advised to Quit Smoking: 2YR	124	63.2%	62.9%	61.3%	74.1% ▼	74.8% ▼
Q34. Discussing Cessation Meds: 2YR +	126	39.7%	38.8%	38.9%	51.9% ▼	53.1% ▼
Q35. Discussing Cessation Strategies: 2YR +	124	41.9%	39.3%	33.1%	46.4% ▼	48.0% ▼



	2022 Valid n	2020	2021	2022	2022 SPH BoB	2021 QC
Customer Service + (% Usually or Always)	79^	92.6%	88.5%	88.1%	89.7%	88.9%
Q24. Provided information or help	80^	88.9%	83.9%	81.3%	84.3%	83.5%
Q25. Treated with courtesy and respect	79^	96.3%	93.1%	94.9%	95.1%	94.3%
How Well Doctors Communicate + (% Usually or Always)	144	93.2%	88.7%	90.2%	92.7%	92.2%
Q12. Dr. explained things	145	92.0%	89.2%	91.0%	92.6%	92.1%
Q13. Dr. listened carefully	144	94.5%	87.9%	90.3%	92.7%	92.5%
Q14. Dr. showed respect	145	95.1%	92.4%	93.1%	94.5%	94.2%
Q15. Dr. spent enough time	145	91.3%	85.4%	86.2%	90.9%	89.9%
Q27. Ease of Filling Out Forms + (% Usually or Always)	241	97.4%	94.0%	95.9%	95.6%	95.9%

		SUMMARY RATE	2022 SPH BoB REGION
	Rating Questions (% 9 or 10)		
*	Q28. Rating of Health Plan	56.9%	64.4% 💠
*	Q8. Rating of Health Care	50.3%	58.2%
*	Q18. Rating of Personal Doctor	63.2%	70.2%
*	Q22. Rating of Specialist	71.7%	70.1%
	Rating Questions (% 8, 9 or 10)		
	Q28. Rating of Health Plan	78.2%	79.4%
	Q8. Rating of Health Care	68.7%	75.7%
	Q18. Rating of Personal Doctor	79.9%	82.4%
	Q22. Rating of Specialist	83.7%	82.4%
*	Getting Needed Care (% Usually or Always)	76.4%	80.9%
	Q9. Getting care, tests, or treatment	76.7%	82.8%
	Q20. Getting specialist appointment	76.0%	79.0%
*	Getting Care Quickly (% Usually or Always)	74.5%	80.4%
	Q4. Getting urgent care	78.8%	79.9%
	Q6. Getting routine care	70.1%	80.9% ❖
*	Q17. Coordination of Care	86.8%	81.6%
	Effectiveness of Care (% Sometimes, Usually, or Always)		
*	Q31. Flu Vaccine: 18-64 (% Yes)	38.3%	41.9%
*	Q33. Advised to Quit Smoking: 2YR	61.3%	71.7% 💠
	Q34. Discussing Cessation Meds: 2YR +	38.9%	45.3%
	Q35. Discussing Cessation Strategies: 2YR +	33.1%	41.0%

HHS Regions: The regions used align with the U.S. Department of Health and Human Services regions.



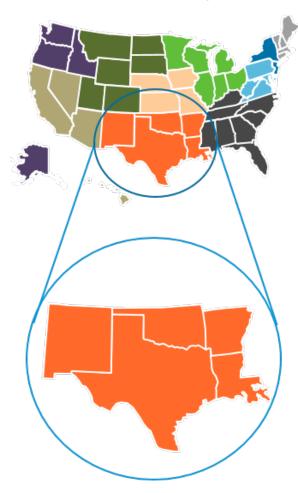
Region 6: Dallas

- Arkansas
- New Mexico
- Texas
- Louisiana
- Oklahoma

Significance Testing

	SUMMARY RATE	2022 SPH BoB REGION
Customer Service + (% Usually or Always)	88.1%	90.7%
Q24. Provided information or help	81.3%	85.3%
Q25. Treated with courtesy and respect	94.9%	96.1%
How Well Doctors Communicate + (% Usually or Always)	90.2%	91.7%
Q12. Dr. explained things	91.0%	91.9%
Q13. Dr. listened carefully	90.3%	91.8%
Q14. Dr. showed respect	93.1%	92.9%
Q15. Dr. spent enough time	86.2%	90.2%
Q27. Ease of Filling Out Forms + (% Usually or Always)	95.9%	95.8%

HHS Regions: The regions used align with the U.S. Department of Health and Human Services regions.



Region 6: Dallas

- Arkansas
- New Mexico
- Texas
- Louisiana
- Oklahoma

Significance Testing

		2022 Plan	QC		ZUZ I QUAIILV CUIIDASS			SPH					Percen Book c									
		Score	%tile	5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th	%tile	5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
	Rating Questions (% 9 or 10)																					
*	Q28. Rating of Health Plan	56.9%	19 th	52.4	53.9	58.1	59.8	62.3	64.7	66.2	70.3	72.2	14 th	51.8	54.7	59.6	61.5	64.0	66.3	67.9	71.1	72.5
*	Q8. Rating of Health Care	50.3%	<5 th	50.6	52.2	54.9	56.4	58.3	60.8	62.3	66.2	67.5	11 th	47.5	49.5	53.6	54.8	56.9	59.2	61.0	63.6	65.2
*	Q18. Rating of Personal Doctor	63.2%	11 th	60.6	63.2	65.5	66.9	69.2	71.6	72.8	75.4	77.3	14 th	60.4	61.8	64.9	67.4	69.8	72.0	72.7	75.3	76.3
*	Q22. Rating of Specialist	71.7%	66 th	60.6	62.8	65.1	66.7	69.3	71.9	73.8	75.5	76.2	73 rd	58.5	60.9	64.3	66.3	68.2	70.8	72.0	75.2	77.0
	Rating Questions (% 8, 9 or 10)																					
	Q28. Rating of Health Plan	78.2%	47 th	71.0	72.5	74.8	76.0	78.6	80.6	82.0	84.8	86.6	39 th	70.9	72.5	76.1	77.5	80.1	81.7	82.5	85.2	86.7
	Q8. Rating of Health Care	68.7%	<5 th	70.4	71.3	75.2	76.5	77.7	79.5	80.7	83.1	84.3	6 th	67.5	70.2	73.0	74.1	76.2	77.8	78.9	81.1	83.3
	Q18. Rating of Personal Doctor	79.9%	17 th	77.0	78.9	81.0	81.7	83.1	84.8	85.6	88.3	89.1	23 rd	76.8	77.6	80.2	81.1	83.1	85.0	85.7	87.6	88.3
	Q22. Rating of Specialist	83.7%	47 th	77.4	79.3	81.1	82.2	84.0	85.4	86.0	87.7	88.8	60 th	75.5	76.9	79.6	80.7	82.5	84.6	85.7	87.1	88.6
*	Getting Needed Care (% U/A)	76.4%	8 th	75.0	77.5	81.1	82.6	84.1	85.8	86.5	88.6	89.3	12 th	73.7	76.0	79.3	80.3	82.9	84.7	85.2	87.1	87.8
	Q9. Getting care, tests, or treatment	76.7%	<5 th	76.8	80.4	82.6	83.8	85.8	88.0	89.0	90.6	91.5	<5 th	77.2	78.9	82.1	83.3	85.7	86.6	87.6	89.5	91.3
	Q20. Getting specialist appointment	76.0%	16 th	72.1	73.5	78.3	80.7	83.2	84.8	85.1	88.0	88.8	26 th	67.2	71.4	75.4	77.3	0.08	82.4	83.4	86.1	86.8
*	Getting Care Quickly (% U/A)	74.5%	7 th	72.1	76.5	79.3	80.2	82.2	83.8	84.7	87.2	88.4	12 th	70.1	72.9	77.3	78.0	80.6	83.4	84.6	87.1	88.2
	Q4. Getting urgent care	78.8%	20 th	75.7	77.0	80.7	82.6	83.5	86.0	86.2	89.1	89.5	29 th	71.2	72.6	77.6	79.3	82.6	84.8	85.9	88.6	90.2
	Q6. Getting routine care	70.1%	<5 th	70.5	72.3	76.5	78.0	80.2	83.1	83.9	87.0	89.1	8 th	68.8	70.5	76.1	77.6	80.5	82.6	84.0	87.0	88.3
*	Q17. Coordination of Care	86.8%	62 nd	76.2	79.3	83.1	83.4	85.6	87.4	88.4	91.6	92.4	65 th	76.3	78.8	81.5	82.9	85.1	87.3	87.9	90.4	91.6
	Effectiveness of Care (% S/U/A)																					
*	Q31. Flu Vaccine: 18-64 (% Yes)	38.3%	42 nd	28.7	30.3	34.7	37.0	39.7	42.4	44.3	50.6	55.3	41 st	28.7	31.0	35.0	36.8	40.6	43.9	45.9	52.3	56.6
*	Q33. Advised to Quit Smoking: 2YR	61.3%	<5 th	64.5	66.4	71.2	72.4	75.1	77.8	79.3	82.1	84.3	8 th	57.2	63.0	69.6	70.7	73.6	76.3	78.7	82.3	85.7
	Q34. Discussing Cessation Meds: 2YR +	38.9%	<5 th	39.9	43.7	48.2	50.3	52.9	55.8	57.1	61.6	67.2	11 th	34.1	37.2	45.5	47.5	50.0	54.6	57.8	62.6	67.1
	Q35. Discussing Cessation Strategies: 2YR +	33.1%	<5 th	37.5	39.6	42.9	45.3	47.4	50.5	52.0	58.0	60.0	9 th	30.0	33.6	40.1	41.5	45.5	49.2	51.3	58.5	61.4

	2022 Plan	n QC						itiles f compa				SPH						itiles f			
	Score	%tile	5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th	%tile	5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
Customer Service + (% U/A)	88.1%	35 th	83.9	85.0	87.2	87.9	89.2	90.7	91.1	92.2	93.3	32 nd	83.7	85.1	87.3	88.2	90.0	91.2	91.9	93.6	94.8
Q24. Provided information or help	81.3%	25 th	76.7	77.9	81.3	81.9	83.6	85.5	86.4	88.4	89.9	29 th	75.2	77.9	80.7	81.8	84.6	86.8	87.8	90.1	91.9
Q25. Treated with courtesy and respect	94.9%	52 nd	88.7	90.6	92.9	93.6	94.9	95.7	96.2	97.2	97.6	42 nd	89.9	91.4	93.6	94.1	95.5	96.2	97.1	98.4	98.6
How Well Doctors Communicate + (% U/A)	90.2%	18 th	88.0	88.9	91.0	91.4	92.4	93.3	93.9	95.2	95.7	16 th	88.4	89.1	91.1	91.9	92.8	93.8	94.2	95.4	95.8
Q12. Dr. explained things	91.0%	35 th	86.7	88.6	90.3	90.9	92.3	93.8	94.3	95.7	96.5	29 th	87.7	89.0	90.9	91.5	92.8	93.9	94.4	95.9	96.6
Q13. Dr. listened carefully	90.3%	19 th	87.9	89.3	90.9	91.5	92.8	94.0	94.3	95.4	95.7	19 th	87.9	88.8	91.2	91.8	92.9	94.0	94.4	95.5	95.8
Q14. Dr. showed respect	93.1%	25 th	90.4	91.2	93.1	93.5	94.2	95.2	95.5	96.7	97.1	25 th	89.9	91.3	93.1	93.8	94.7	95.5	96.0	96.9	97.8
Q15. Dr. spent enough time	86.2%	14 th	83.6	85.4	88.0	88.9	90.3	91.7	92.2	93.7	94.7	13 th	84.2	85.7	88.4	89.1	91.1	92.5	93.1	94.8	95.6
Q27. Ease of Filling Out Forms + (% U/A)	95.9%	50 th	92.9	93.7	94.9	95.2	95.9	96.8	97.0	98.3	98.6	48 th	92.5	93.2	94.5	95.1	96.1	96.7	97.0	97.6	97.9



PROFILE OF SURVEY RESPONDENTS

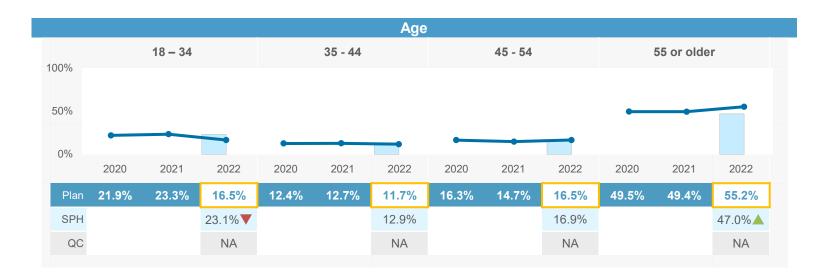
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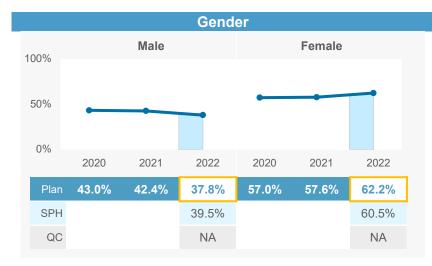
Presbyterian Centennial Care

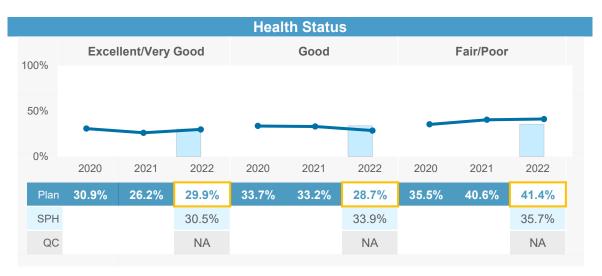


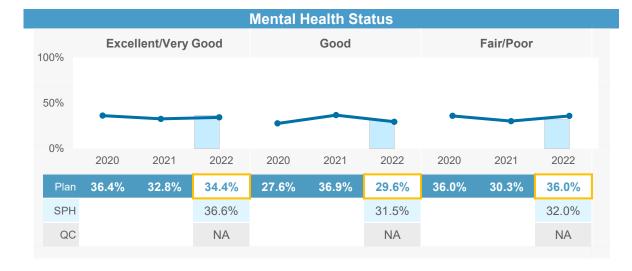
PROFILE OF SURVEY RESPONDENTS

MEDICAID ADULT

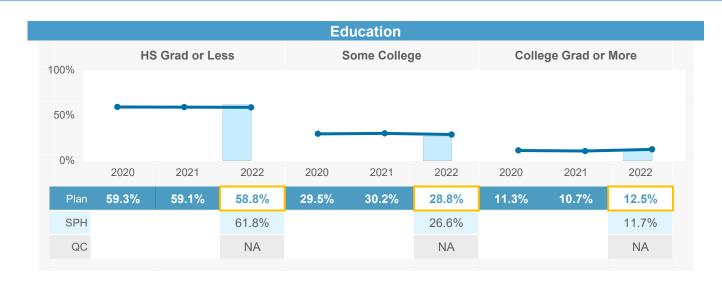


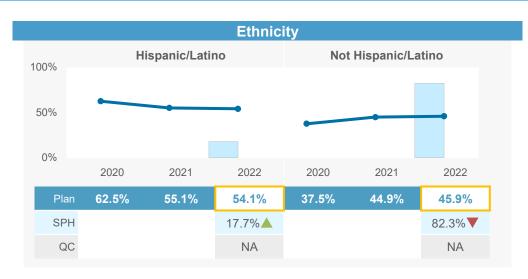


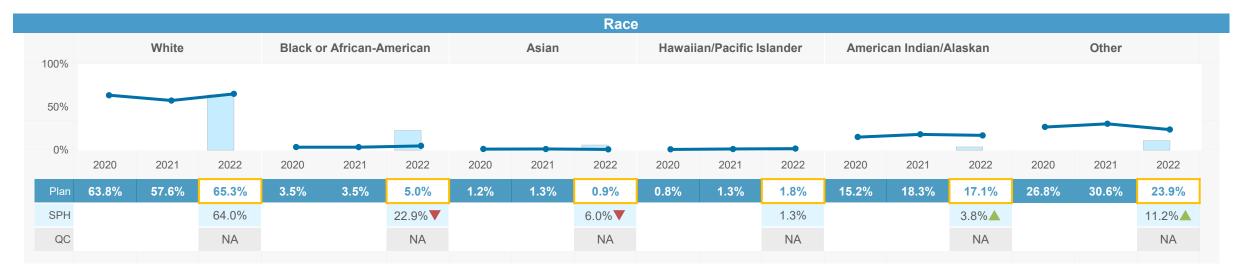












Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/♣), the 2020 score (‡/♣) or benchmark score (▲/▼).

Benchmarks: SPH refers to the 2022 SPH Book of Business benchmark. QC refers to the 2021 QC National Data benchmark. NCQA did not publish demographics for the 2021 benchmark.



SUPPLEMENTAL QUESTIONS

Presbyterian Centennial Care

			Category R	Responses		Sur	nmary Rate Sc	ore	2022
		Base	ed on Valid Resp	oonses Per Que	estion	2020	2021	2022	SPH BoB
Q41. Help with coordination of care (% Yes)	Valid Response	es = 242							
	Yes	No				(n=276)	(n=238)	(n=242)	
	37.6%	62.4%				37.0%	33.6%	37.6%	
Q43. Satisfied with help received to coordinate care (% Very Satisfied or %Satisfied)	Valid Response	es = 231							
	Very satisfied	Satisfied	Neither dissatisfied nor satisfied	Dissatisfied	<u>Very</u> <u>dissatisfied</u>	(n=267)	(n=232)	(n=231)	
	33.8%	32.5%	19.9%	5.6%	8.2%	74.9%	70.7%	66.2% \$	
Q44. Received material from plan about good health and how to stay healthy (% Yes)	Valid Response	es = 239							
	Yes	No				(n=272)	(n=239)	(n=239)	
	56.5%	43.5%				60.7%	57.3%	56.5%	
Q45. Received material from plan about care coordination and how to contact the care coordination unit (% Yes)	Valid Response	es = 235							
	Yes	<u>No</u>				(n=267)	(n=233)	(n=235)	
	36.6%	63.4%				54.3%	43.3%	36.6% \$	

			Category R	esponses		Sur	Summary Rate Score				
		Bas	ed on Valid Resp		estion	2020	2021	2022	SPH BoB		
Q46. Sat down with Care Coordinator and created a Plan of Care (% Yes)	Valid Response	es = 84									
	<u>Yes</u>	No				(n=267)	(n=95)	(n=84)			
	41.7%	58.3%				31.8%	48.4%	41.7%			
Q47. Satisfied with care plans (% Very satisfied + %Satisfied)	Valid Response	es = 85									
	Very satisfied	Satisfied	Neither dissatisfied nor satisfied	<u>Dissatisfied</u>	<u>Very</u> <u>dissatisfied</u>	(n=259)	(n=97)	(n=85)			
	44.7%	36.5%	15.3%	0.0%	3.5%	72.6%	79.4%	81.2%			
Q48. Problem understanding verbal/written communication from plan (% Never or Sometimes)	Valid Response	es = 174									
Opt Out: I do not have any special cultural and/or language needs 62	Always	<u>Usually</u>	Sometimes	Never			(n=175)	(n=174)			
	12.6%	4.0%	20.7%	62.6%			77.1%	83.3%			

Survey Item		ş	2022		
Survey item		2020	2021	2022	SPH BoB
Q42. Who helped to coordinate your care					
Valid Responses	Base	(n=247)	(n=217)	(n=218)	
Someone from your health plan		13.4%	10.1%	11.5%	
Someone from your doctor's office or clinic		25.9%	24.9%	28.0%	
Someone from another organization		4.5%	0.9%	2.8%	
A friend or family member		14.6%	21.2%	18.8%	
You		41.7%	42.9%	39.0%	



APPENDICES

- APPENDIX A: CORRELATION ANALYSES
- APPENDIX B: QUESTIONNAIRE

Highest Correlations

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

	With Health Care Rating								
Q18	Personal doctor overall	0.6464							
Q22	Specialist overall	0.5784							
Q28	Health plan overall	0.4960							
Q20	Got specialist appt.	0.4836							
Q12	Dr. explained things	0.4576							
Q9	Got care/tests/treatment	0.4518							
Q15	Dr. spent enough time	0.4328							
Q14	Dr. showed respect	0.3664							
Q13	Dr. listened carefully	0.3633							
Q6	Got routine care	0.3430							

	With Personal Doctor Rating	
Q14	Dr. showed respect	0.6680
Q13	Dr. listened carefully	0.6492
Q8	Health care overall	0.6464
Q15	Dr. spent enough time	0.6223
Q12	Dr. explained things	0.5983
Q28	Health plan overall	0.5301
Q17	Dr. informed about care	0.4344
Q43	Satisfied with help received to coordinate care	0.4037
Q9	Got care/tests/treatment	0.3992
Q47	Satisfied with care plans	0.3172

	With Specialist Rating								
Q8	Health care overall	0.5784							
Q20	Got specialist appt.	0.3695							
Q28	Health plan overall	0.3538							
Q43	Satisfied with help received to coordinate care	0.3068							
Q25	CS courtesy/respect	0.2715							
Q9	Got care/tests/treatment	0.2593							
Q12	Dr. explained things	0.1898							
Q13	Dr. listened carefully	0.1771							
Q27	Easy to fill out forms	0.1415							
Q14	Dr. showed respect	0.1247							



APPENDIX B: QUESTIONNAIRE

A PRESBYTERIAN

SURVEY INSTRUCTIONS

- Answer each question by marking the box to the left of your answer.
- You are sometimes told to skip over some questions in this survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:

Personally identifiable information will not be made public and will only be released in accordance with federal laws and regulations.

You may choose to answer this survey or not. If you choose not to, this will not affect the benefits you get. You may notice a number on the back of this survey. This number is ONLY used to let us know if you returned your survey so we don't have to send you reminders.

If you want to know more about this study, please call 1-888-797-3605.

1. Our records show that you are now in Presbyterian Centennial Care. Is that right?

☐ Yes → If Yes, Go to Question 3
☐ No

2. What is the name of your health plan? (Please print)

YOUR HEALTH CARE IN THE LAST 6 MONTHS

These questions ask about your own health care from a clinic, emergency room, or doctor's office. This includes care you got in person, by phone, or by video. Do <u>not</u> include care you got when you stayed overnight in a hospital. Do <u>not</u> include the times you went for dental care visits.

3. In the last 6 months, did you have an illness, injury, or condition that needed care right away?

☐ Yes

No → If No, Go to Question 5

4. In the last 6 months, when you <u>needed care</u> right away, how often did you get care as soon as you needed?

Never

Sometimes

] Usually

☐ Always

5. In the last 6 months, did you make any in person, phone, or video appointments for a check-up or routine care?

□ Yes

No → If No, Go to Question 7

6. In the last 6 months, how often did you get an appointment for a <u>check-up or routine care</u> as soon as you needed?

Never

Sometimes

Usually

Always

7.	In the last 6 months, <u>not</u> counting the times you went to an emergency room, how many times did you get health care for yourself in	11. In the last 6 months, how many times did you have an in person, phone, or video visit with your personal doctor about your health?
	person, by phone, or by video? None → If None, Go to Question 10 1 time 2 3 4 5 to 9 10 or more times	 None → If None, Go to Question 18 1 time 2 3 4 5 to 9 10 or more times
8.	Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 6 months?	12. In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand? Never Sometimes Usually
	□ 0 Worst health care possible□ 1□ 2□ 2	Always 13. In the last 6 months, how often did your personal doctor listen carefully to you?
	 □ 3 □ 4 □ 5 □ 6 □ 7 □ 8 □ 9 	Never Sometimes Usually Always 14. In the last 6 months, how often did your
	10 Best health care possible	personal doctor show respect for what you had to say?
9.	In the last 6 months, how often was it easy to get the care, tests, or treatment you needed? Never Sometimes Usually	NeverSometimesUsuallyAlways
Y	☐ Always DUR PERSONAL DOCTOR	15. In the last 6 months, how often did your personal doctor spend enough time with you?
10.	A personal doctor is the one you would talk to if you need a check-up, want advice about a health problem, or get sick or hurt. Do you have a personal doctor? Yes	Never Sometimes Usually Always
	☐ No → If No, Go to Question 19	16. In the last 6 months, did you get care from a doctor or other health provider besides your personal doctor?
		☐ Yes ☐ No → If No, Go to Question 18

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

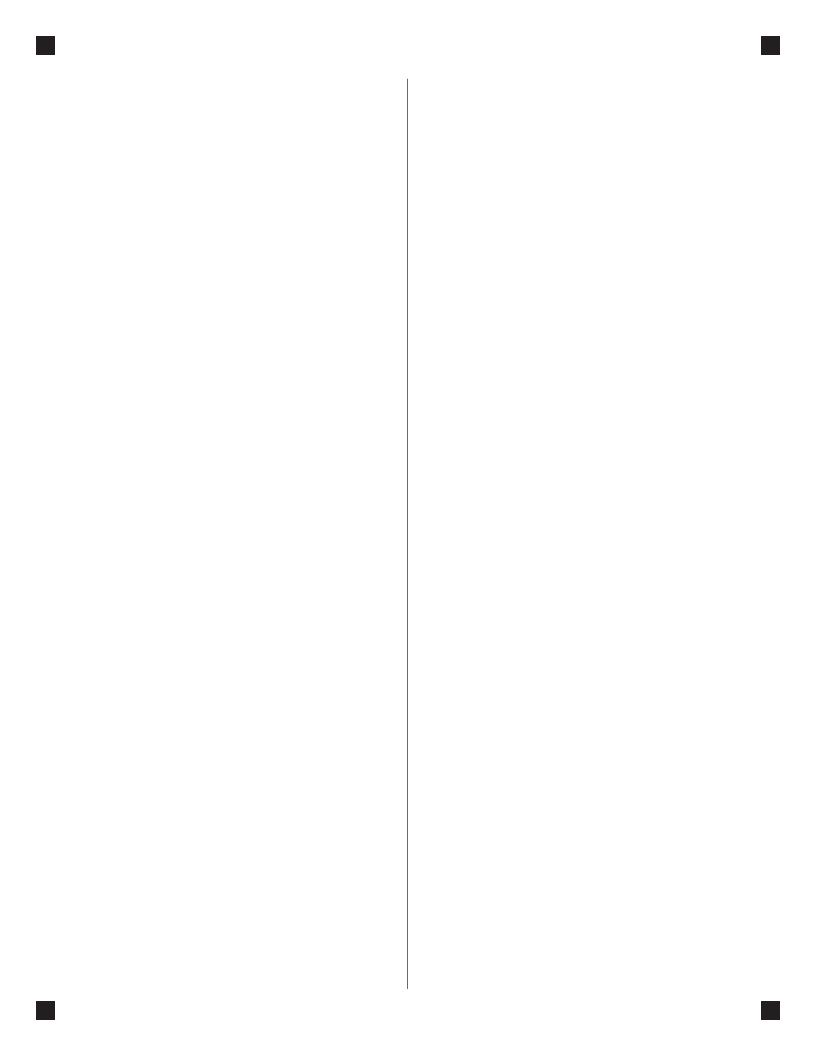
25.	In the last 6 months, how often did your health plan's customer service staff treat you	30. In general, how would you rate your overall mental or emotional health?
	with courtesy and respect? Never Sometimes Usually Always	☐ Excellent ☐ Very Good ☐ Good ☐ Fair ☐ Poor
26.	In the last 6 months, did your health plan give you any forms to fill out?	31. Have you had either a flu shot or flu spray in the nose since July 1, 2021?
27.	 Yes No → If No, Go to Question 28 In the last 6 months, how often were the forms 	☐ Yes ☐ No ☐ Don't know
	from your health plan easy to fill out?	32. Do you now smoke cigarettes or use tobacco every day, some days, or not at all?
	Sometimes Usually Always	 □ Every day □ Some days □ Not at all → If Not at all, Go to Question 36
28.	Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your health plan?	☐ Don't know → If Don't know, Go to Question 36
	□ 0 Worst health plan possible □ 1	33. In the last 6 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan?
	☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6	NeverSometimesUsuallyAlways
AE	7 8 9 10 Best health plan possible	34. In the last 6 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription
29.	In general, how would you rate your overall health?	medication. Never
	☐ Excellent ☐ Very Good ☐ Good ☐ Fair ☐ Poor	☐ Sometimes ☐ Usually ☐ Always

35.	In the last 6 months, how often did your	ADDITIONAL QUESTIONS
	doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program.	Now we would like to ask a few more questions about the services your health plan provides. 41. In the last 6 months, did anyone from your health plan, doctor's office, or clinic help coordinate your care among these doctors or other health providers?
	NeverSometimesUsuallyAlways	☐ Yes ☐ No
		42. In the last 6 months, who helped to coordinate your care?
36.	What is your age? 18 to 24 25 to 34 35 to 44 45 to 54 55 to 64	Someone from your health plan Someone from your doctor's office or clinic Someone from another organization A friend or family member You
	☐ 65 to 74 ☐ 75 or older	43. How satisfied are you with the help you received to coordinate your care in the last 6 months?
37.	Are you male or female?	☐ Very dissatisfied
	☐ Male ☐ Female	☐ Dissatisfied ☐ Neither dissatisfied nor satisfied
38.	What is the highest grade or level of school that you have completed?	Satisfied Very satisfied
	 8th grade or less Some high school, but did not graduate High school graduate or GED 	44. In the last 6 months, have you received any material from your health plan about good health and how to stay healthy?
	Some college or 2-year degree4-year college graduateMore than 4-year college degree	☐ Yes ☐ No
39	Are you of Hispanic or Latino origin or descent?	45. In the last 6 months, have you received any material from your health plan about care
	Yes, Hispanic or Latino No, Not Hispanic or Latino	coordination unit?
40		Yes
40.	What is your race? <i>Mark one or more.</i>	No → If No, Go to Question 48
	☐ White ☐ Black or African-American ☐ Asian	46. Did your Care Coordinator sit down with you and create a Plan of Care?
	☐ Native Hawaiian or other Pacific Islander ☐ American Indian or Alaska Native ☐ Other	☐ Yes ☐ No

47.	Are you satisfied that your care plan talks about the help you need to stay healthy and remain in your home?	
	 ✓ Very dissatisfied ✓ Dissatisfied ✓ Neither dissatisfied nor satisfied ✓ Satisfied ✓ Very satisfied 	
48.	Thinking about both verbal and written communication with your health plan, how often was it a problem for you to understand given your cultural and/or language needs?	
	 Never Sometimes Usually Always I do not have any special cultural and/or language needs 	
	Thank You Please return the completed survey	

Please return the completed survey in the postage-paid envelope or send to: SPH Analytics • P.O. Box 985009
Ft. Worth, TX 76185-5009

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



IMPACT ANALYTICS

Redefine the experience members have with your plan by understanding what is driving those experiences, your Star Ratings and CAHPS performance.



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Drill down into your data, compare segments against benchmarks and forecast CAHPS and Star improvements



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Predict member perceptions and behavior related to satisfaction, engageability and enrollment



DISCOVER

Analyze and prioritize root causes, then correlate campaigns and PX surveys to CAHPS and Stars



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Blueprint to educate, motivate and shift perception through omnichannel outreach.





STRATEGIC CONSULTING WITH BENCHMARK-DRIVEN INSIGHTS

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Solving challenges at each stage of the member journey with a comprehensive evidence-based, approach helping accelerate improvement, satisfaction, star ratings and CAHPS performance.

Target efforts to improve member acquisition, engagement, and retention

Comprehensive approach delivering sustainable results that improve business and member outcomes. Leveraging the SPH Analytics benchmark of CAHPS data, representing 85% of Medicare Advantage plans, and predictive analytics, we help drive your Star Ratings performance through:

- Current state validation methods
- Roadmap and co-design
- Implementation
- Sustainment

Improve the member experience with a data-driven approach

With the data and member feedback you're already collecting, our Strategic Consulting will help pinpoint the member cohorts with the most valuable opportunities to your organization.



Insights derived from that data will inform our consulting team's recommendations for developing actionable, sustainable improvement plans that drive measurable change.



