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MY 2022 CAHPS®
MEDICAID ADULT
5.1H SURVEY

PRESBYTERIAN CENTENNIAL CARE

PRESBYTERIAN CENTENNIAL CARE

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OVERVIEW

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

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

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

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

METHODOLOGY

DATA COLLECTION

The MY 2022 Medicaid Adult version of the 5.1H CAHPS survey was administered via the following methodology:

First questionnaire mailed 2/21/2023

Second questionnaire mailed 3/28/2023

Initiate follow-up calls to non-responders 4/18/2023 - 5/2/2023

PG Response Rate

Last day to accept completed surveys 5/10/2023

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

2023 RESPONSE RATE CALCULATION

$$\frac{252 \text{ (Completed)}}{2430 \text{ (Sample)} - 26 \text{ (Ineligible)}} = \frac{252}{2404} = 10.5\%$$

COMPLETES - MODALITY BY LANGUAGE

Longuago	_anguage Mail Ph		Phone Internet		Internet Modes				
Language	IVIAII	Pilone		QR Code	Email	URL	Total		
English	114	87	27	8	0	19	228		
Spanish	14	7	3	1	0	2	24		
Total	128	94	30	9	0	21	252		

Number of Undeliverables: 959

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									
		2021	2022	2023					
Completed	SUBTOTAL	248	259	252					
	Does not Meet Eligibility Criteria (01)	10	15	14					
Ineligible	Language Barrier (03)	2	2	2					
	Mentally/Physically Incapacitated (04)	0	5	8					
	Deceased (05)	4	2	2					
	SUBTOTAL	16	24	26					
	Break-off/Incomplete (02)	17	15	24					
	Refusal (06)	57	60	37					
Non-response	Maximum Attempts Made (07)	1687	1667	2091					
	Added to DNC List (08)	0	0	0					
	SUBTOTAL	1761	1742	2152					
	Total Sample	2025	2025	2430					
	Oversampling %	50.0%	50.0%	80.0%					
	Response Rate	12.3%	12.9%	10.5%					

11.5%

12.2%

14.8%

INDUSTRY TRENDS

Presbyterian Centennial Care

PG Book of Business Trends

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

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

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

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

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

EXECUTIVE SUMMARY

Presbyterian Centennial Care

OVERVIEW OF TERMS

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

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

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

NCQA Benchmark Information The source for data contained in this publication is Quality Compass[®] All Plans 2022. It is used with the permission of NCQA. Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass[®] is a registered trademark of NCQA.

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

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

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

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

2023 DASHBOARD

Other Measures

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252

Completed surveys

10.5%

Response Rate

Stars: PG **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 2022 (↑/↓) or 2021 (‡/‡).

Percentiles: Based on the 2023 PG Book of Business

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

	Rating of Health Plan	**						
Rating of Health Plan		62.4%	38 th					
	Rating of Health Care	★★★						
Rating of Health Care		56.0%	43 rd	Wait				
R	ating of Personal Docto	or ★ 🛧	*					
Rating of Personal Doc	tor	71.0%	64 th	Power				
Advised to Quit Smoking: 2YR 🤺								
	ng: 2YR	60.9%	9 th					

Getting Needed Care 🌟 🜟									
Composite	76.2%	16 th							
Q9. Getting care, tests, or treatment	79.9%	17 th	Opportunity						
Q20. Getting specialist appointment	72.5%	17 th	Opportunity						
Getting Care Quickly 🌟 🚖									
Composite	76.0%	19 th							
Q4. Getting urgent care	77.0%	16 th	Wait						
Q6. Getting routine care	75.0%	23 rd	Opportunity						
Flu Vaccine: 18-64 🌟 🜟									
Flu Vaccine: 18-64	42.2%	64 th							

Rating of Specialist +									
Rating of Specialist +	69.8%	69.8% 70 th							
Coordination of Care +									
Coordination of Care +	81.9%	21 st	Opportunity						
Customer Service +									
Customer S	Service +								
Customer S Composite	91.4%	68 th							
		68th 67 th	 Retain						

Ease of Filling Out Forms +	96.7%	79 th	Retain							
How Well Doctors Communicate +										
Composite	90.8%	16 th								
Q12. Dr. explained things	91.6%	28 th	Opportunity							
Q13. Dr. listened carefully	90.8%	20 th	Wait							
Q14. Dr. showed respect	93.9%	35 th	Wait							
Q15. Dr. spent enough time	87.0%	10 th	Wait							

Ease of Filling Out Forms +

ESTIMATED NCQA HEALTH INSURANCE PLAN RATINGS

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	SCORE DEFINITION	2023 BASE	2023 HPR SCORE*	HPR 4 STAR THRESHOLD	HPR PERCENTILE BAND	PG ESTIMATED RATING
PATIENT EXPERIENCE						2.5
GETTING CARE						2
Getting Needed Care	Usually or Always	120	76.2%	84.6%	10 th	2
Getting Care Quickly	Usually or Always	111	76.0%	83.8%	10 th	2
SATISFACTION WITH PLAN		3				
Rating of Personal Doctor	9 or 10	186	70.9%	71.1%	33 rd	3
SATISFACTION WITH PLAN		3				
Rating of Health Plan	9 or 10	242	62.4%	64.9%	33 rd	3
Rating of Health Care	9 or 10	150	56.0%	58.7%	33 rd	3
PREVENTION						
Flu Vaccinations Adults Ages 18-64	Yes	204	42.1%	42.4%	33 rd	3
TREATMENT						
Smoking Advice: Rolling Average	Sometimes, Usually or Always	115	60.9%	75.4%	<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 PG** based on the 2022 NCQA data and benchmarks.

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

Notes:

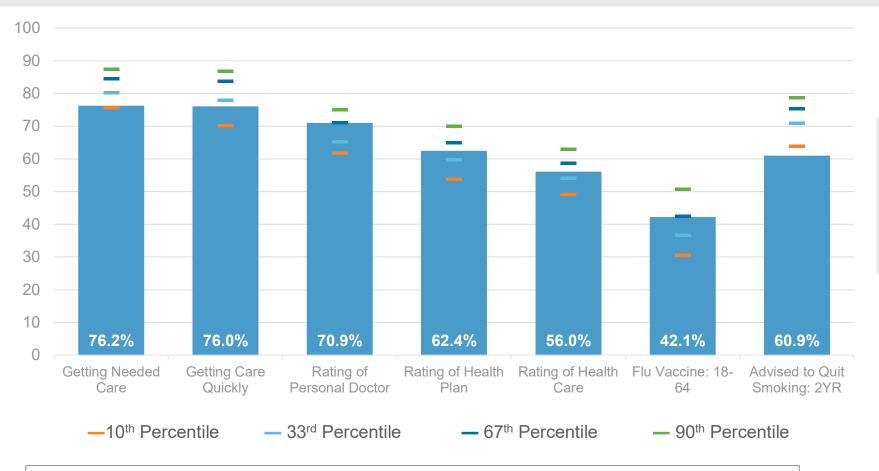
- NCQA will assign a measure result of NA to overall ratings or composites with a denominator (i.e., the average number of responses across all questions used to calculate the composite) less than 100.
- Medicaid plans have the option to be scored on either Adult CAHPS or Child CAHPS data.

PERFORMANCE TO STAR CUT POINTS

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COMPARISON TO QUALITY COMPASS CUT POINTS

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



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).

MEASURE SUMMARY

	SUMMAI		2023 PG BOOK OF BUSINESS BENCHMARK								
MEASURE	2022	2023	CHANGE	PERCENTILE DISTRIBUTION						PERCENTILE	BoB SRS
	2022	2020		0	20	40	60	80	100	RANK	DOD ONG
Health Plan Domain											
Rating of Health Plan % 9 or 10	56.9%	62.4%	5.5							38 th	63.6%
Getting Needed Care % Usually or Always	76.4%	76.2%	-0.2							16 th	82.0%
Customer Service + % Usually or Always	88.1%	91.4%	3.3							68 th	89.8%
Ease of Filling Out Forms + % Usually or Always	95.9%	96.7%	0.8							79 th	95.3%
Health Care Domain											
Rating of Health Care % 9 or 10	50.3%	56.0%	5.7							43 rd	56.8%
Getting Care Quickly % Usually or Always	74.5%	76.0%	1.5							19 th	81.5%
How Well Doctors Communicate + % Usually or Always	90.2%	90.8%	0.6							16 th	92.8%
Coordination of Care + % Usually or Always	86.8%	81.9%	-4.9							21 st	85.6%
Rating of Personal Doctor % 9 or 10	63.2%	71.0%	7.8							64 th	69.2%
Rating of Specialist + % 9 or 10	71.7%	69.8%	-1.9							70 th	67.4%

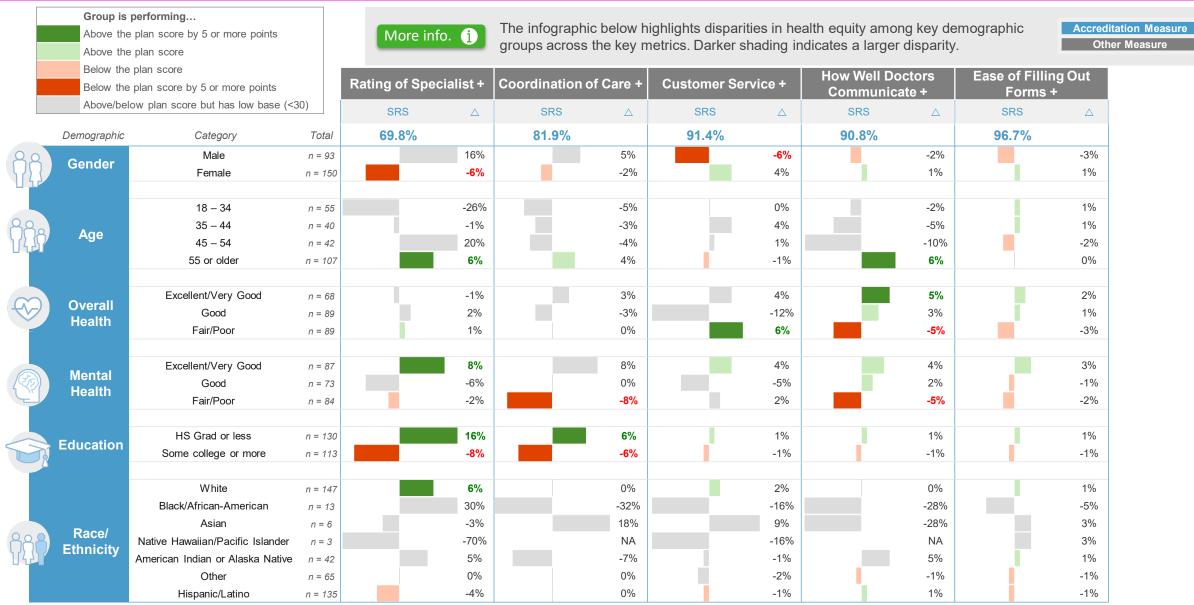
MEASURE SUMMARY

MEASURE	SUMMARY RATE			2023 PG BOOK OF BUSINESS BENCHMARK								
	2022	2023	CHANGE	PERCENTILE DISTRIBUTION						PERCENTILE	BoB SRS	
				0	20	40	60	80	100	RANK		
Effectiveness of Care												
Flu Vaccine: 18-64 % Yes	38.3%	42.2%	3.9							64 th	41.1%	
Advised to Quit Smoking: 2YR % Sometimes, Usually, or Always	61.3%	60.9%	-0.4							9 th	74.3% 🔻	
Discussing Cessation Meds: 2YR + % Sometimes, Usually, or Always	38.9%	40.2%	1.3							11 th	53.0% ▼	
Discussing Cessation Strategies: 2YR + % Sometimes, Usually, or Always	33.1%	31.9%	-1.2							9 th	47.2% ▼	

HEALTH EQUITY



HEALTH EQUITY



MEASURE SUMMARY

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Top Three Performing Measures

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

MEASURE	2023	PLAN SUMMARY RATE SCORE			2022 QC			2023 PG BoB			
	Valid n	2022	2023	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE	
Rating of Specialist + (% 9 or 10)	86^	71.7%	69.8%	-1.9	68.3%	1.5	64 th	67.4%	2.4	70 th	
Customer Service + (% Usually or Always)	81^	88.1%	91.4%	3.3	88.9%	2.5	81 st	89.8%	1.6	68 th	
Rating of Personal Doctor (% 9 or 10)	186	63.2%	71.0%	7.8	68.3%	2.7	66 th	69.2%	1.8	64 th	

BOTTOM THREE Performing Measures

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

MEASURE	2023	PLAN SUM	MARY RATE SC	TE SCORE 2022 QC 2023)23 PG BoB			
	Valid n	2022	2023	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Getting Care Quickly (% Usually or Always)	111	74.5%	76.0%	1.5	80.2%	-4.2	23 rd	81.5%	-5.5	19 th
Getting Needed Care (% Usually or Always)	120	76.4%	76.2%	-0.2	81.9%	-5.7	13 th	82.0%	-5.8	16 th
How Well Doctors Communicate + (% Usually or Always)	131	90.2%	90.8%	0.6	92.5%	-1.7	25 th	92.8%	-2.0	16 th

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

IMPROVEMENT STRATEGIES

Improving Performance

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

Improvement Strategies - Getting Care Quickly

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

Improvement Strategies - Getting Needed Care

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

Improvement Strategies – How Well Doctors Communicate

- Cultivate a patient-centered care philosophy and programs across the provider network.
- Support, communicate and educate providers about the vital medical importance of effective doctor-patient communication (i.e., reduced hospitalizations & ER visits, improved adherence).
- Provide readily available recommendations, tools and guidance to all providers to support and enhance communication skills and effective conversation skills with patients. Providers need to: Provide thorough explanations, provide written materials, illustrations and/or examples to help patient's understand, repeat the patient's concern and then address the topic, ask clarifying questions, make eye contact, avoid medical jargon and technical language, avoid multi-tasking, avoid rushing the patient, use constructive verbal responses and non-verbal cues, apply empathy and interest in response to concerns, by kind, avoid condescending language or actions, address questions and concerns-as much time as necessary, schedule adequate time for each visit, and follow-up after tests or procedures.
- Collaborate and share with providers tools, resources, and best practices to support, or reinforce, a complete and effective information exchange with all patients (e.g., a summary of medical record or health assessment to facilitate an effective health or wellness discussion, patient testimonials perhaps from focus groups - of effective and ineffective communication techniques, provide tips and/or testimonials in provider newsletters).
- Develop tools and guidance for patients to optimize appointment time and specific topic-based conversation guides or question checklists with providers (e.g., Doc Talk).
- Support patients with chronic illnesses/conditions and their providers with up-to-date tools, resources and conversation guides that address common clinical needs, continual review, modification and update of progress, next steps and self-management topics.

Full List of Improvement Strategies (1)

KEY DRIVER ANALYSIS OF RATING OF HEALTH PLAN

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POWER CHART: EXPLANATION

POWeR™ CHART CLASSIFICATION MATRIX

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

The model provides the following:

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

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.

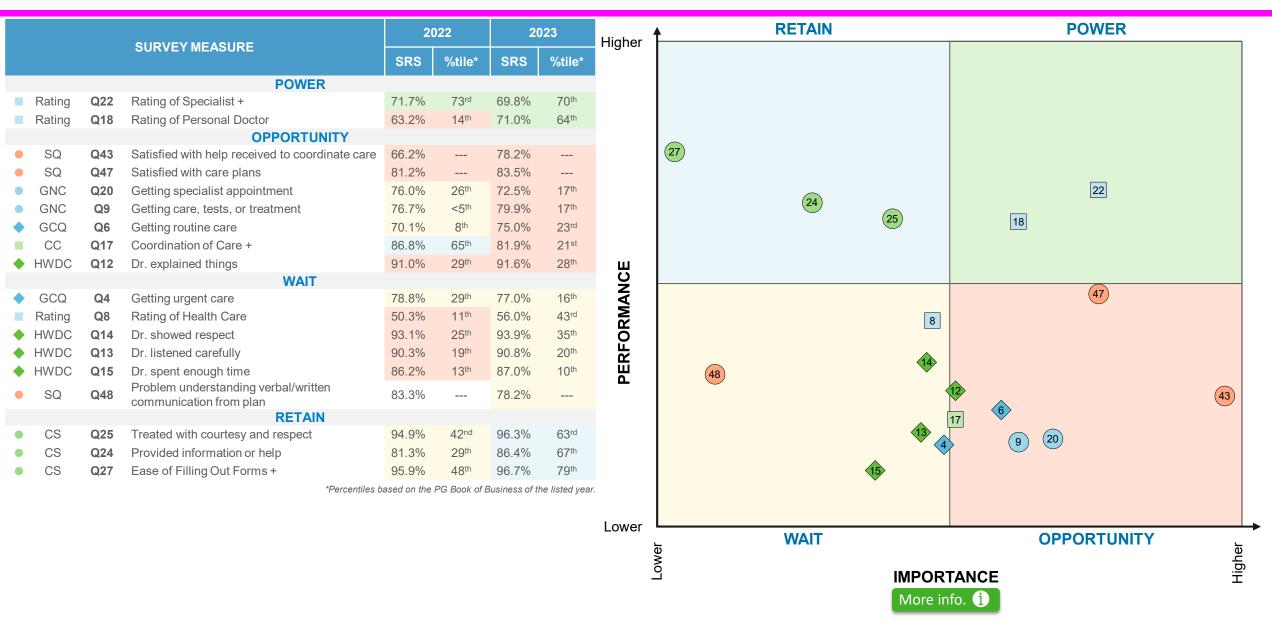
Focus resources on improving processes that underlie these items.

Lower

Importance to your plan members

Higher

POWER CHART: YOUR RESULTS



KEY DRIVERS OF RATING OF HEALTH PLAN

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	TOP 10 KEY DRIVERS
YOUR PLAN	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.
INDUSTRY	PG 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 2023 PG Book of Business. Any items below the dotted line are Top 10 industry key drivers that are not identified as key drivers for your plan.

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

	ALIGNMENT Are your key	KEY DRI	VER RANK		ATTOIDUTE		RY RATE ORE	PG BoB		CLASSIFICATION		
	drivers typical of the industry?	YOUR PLAN	INDUSTRY		ATTRIBUTE	YOUR PLAN	INDUSTRY %TILE*		2022		2023	
				Q28	Rating of Health Plan	62.4%	63.6%	38 th	(+24)			
		1		Q43	Satisfied with help received to coordinate care	78.2%				Орр.		Орр.
١.	\checkmark	2	2	Q22	Rating of Specialist +	69.8%	67.4%	70 th	(-3)	Power		Power
1S		3		Q47	Satisfied with care plans	83.5%				Орр.		Орр.
		4	11	Q20	Getting specialist appointment	72.5%	79.1%	17 th	(-9)	Wait	→	Орр.
	\checkmark	5	3	Q18	Rating of Personal Doctor	71.0%	69.2%	64 th	(+50)	Орр.	→	Power
	\checkmark	6	4	Q9	Getting care, tests, or treatment	79.9%	84.8%	17 th	(+14)	Wait	\rightarrow	Орр.
	\checkmark	7	5	Q6	Getting routine care	75.0%	80.4%	23 rd	(+15)	Wait	→	Орр.
		8	14	Q17	Coordination of Care +	81.9%	85.6%	21 st	(-44)	Retain	\rightarrow	Орр.
		9	13	Q12	Dr. explained things	91.6%	92.8%	28 th	(-1)	Орр.		Орр.
	√	10	6	Q4	Getting urgent care	77.0%	82.7%	16 th	(-13)	Wait		Wait
:		11	1	Q8	Rating of Health Care	56.0%	56.8%	43 rd	(+32)	Орр.	\rightarrow	Wait
		12	10	Q14	Dr. showed respect	93.9%	94.6%	35 th	(+10)	Орр.	→	Wait
k		13	9	Q13	Dr. listened carefully	90.8%	92.9%	20 th	(+1)	Орр.	\rightarrow	Wait
ed at ur		14	7	Q25	Treated with courtesy and respect	96.3%	95.0%	63 rd	(+21)	Wait	\rightarrow	Retain
		16	8	Q24	Provided information or help	86.4%	84.5%	67 th	(+38)	Wait	\rightarrow	Retain

MEASURE ANALYSES

Measure Details and Summary Rate Scores

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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

67th − 89th

33rd − 66th

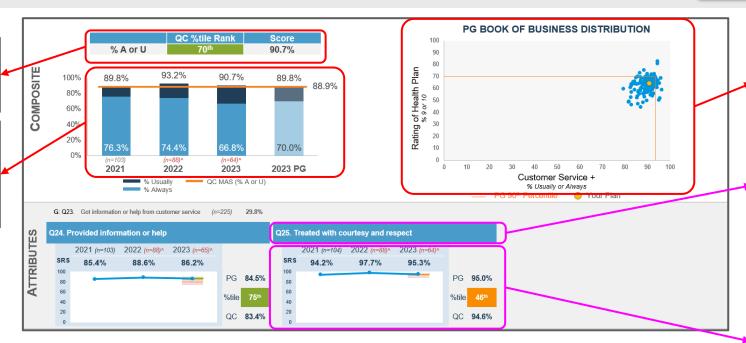
10th − 32nd

<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, PG BoB and Quality Compass national data are displayed.



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

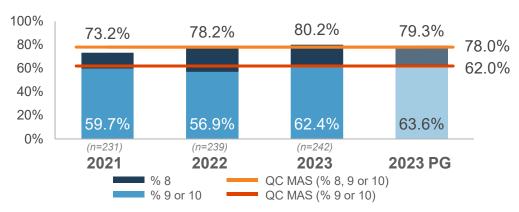
- Historic bases and Summary Rate Scores along with significant changes in trend notated
- Benchmark comparisons along with significant differences notated
- Percentile ranking against Quality Compass
- Graphic representation of trend and 2022 Quality Compass percentile bands

RATINGS

MEDICAID ADULT

RATING OF HEALTH PLAN

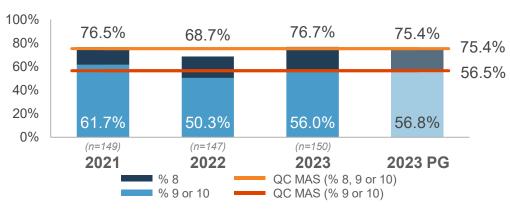
	QC %tile Rank	Score
% 8, 9 or 10	63 rd	80.2%
% 9 or 10	52 nd	62.4%



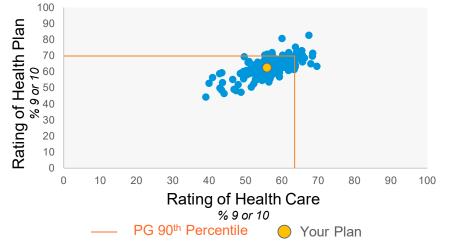
Key Drivers Of The Rating Of The Health Plan							
	POWER		OPPORTUNITIES				
Q22	Rating of Specialist +	Q43 Satisfied with help received to coordinate care					
Q18	Rating of Personal Doctor	Q47 Satisfied with care plans					
		Q20	Getting specialist appointment				
		Q9	Getting care, tests, or treatment				
		Q6	Getting routine care				
		Q17	Coordination of Care +				
		Q12	Dr. explained things				

RATING OF HEALTH CARE

	QC %tile Rank	Score
% 8, 9 or 10	58 th	76.7%
% 9 or 10	45 th	56.0%







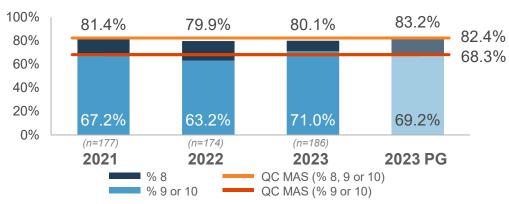
^Denominator less than 100. NCQA will assign an NA to this measure.

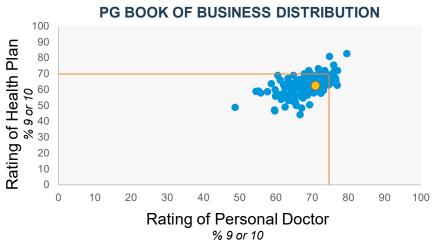
RATINGS

MEDICAID ADULT

RATING OF PERSONAL DOCTOR

	QC %tile Rank	Score
% 8, 9 or 10	27 th	80.1%
% 9 or 10	66 th	71.0%

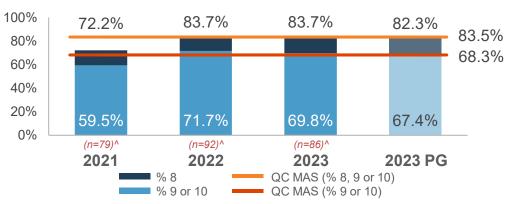




PG 90th Percentile

RATING OF SPECIALIST +

	QC %tile Rank	Score
% 8, 9 or 10	51 st	83.7%
% 9 or 10	64 th	69.8%



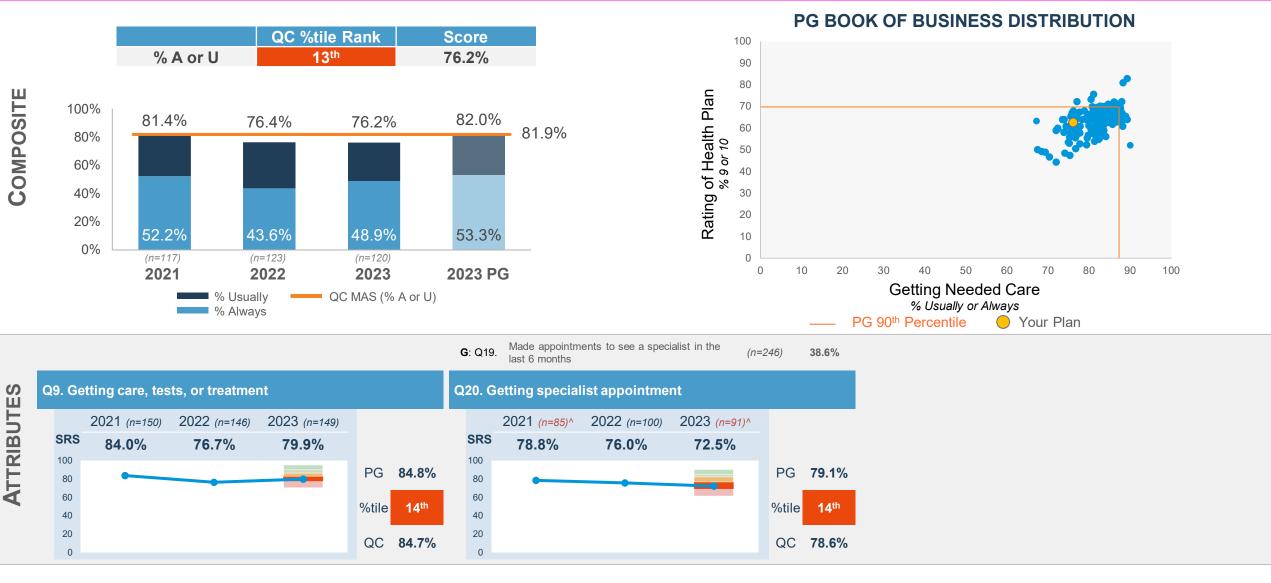




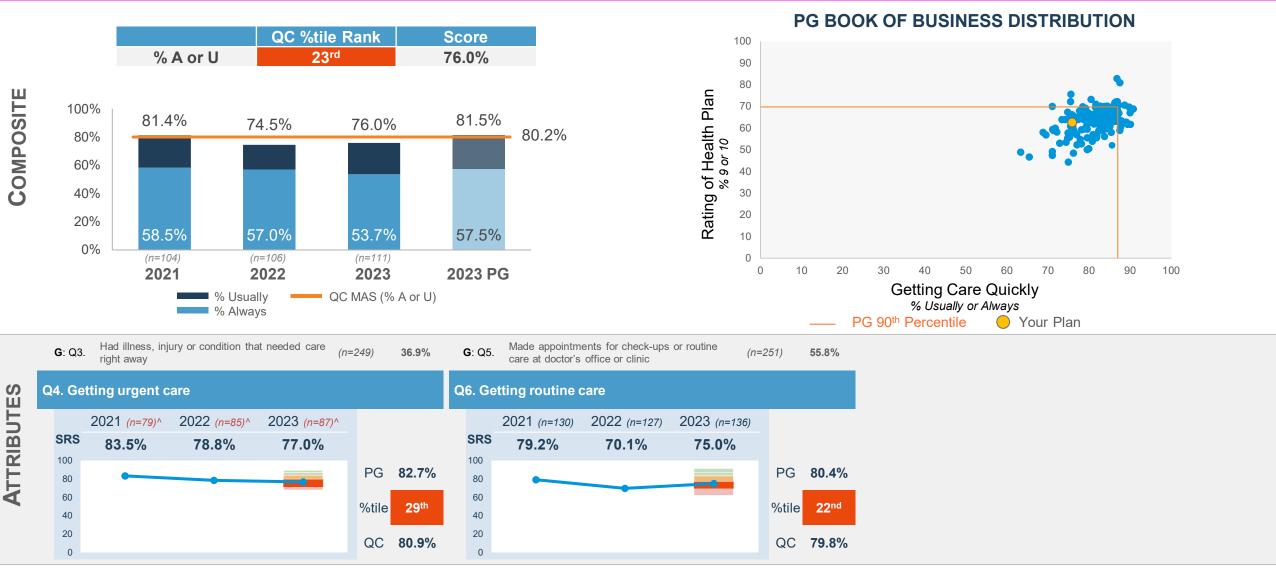
^Denominator less than 100. NCQA will assign an NA to this measure.

Your Plan

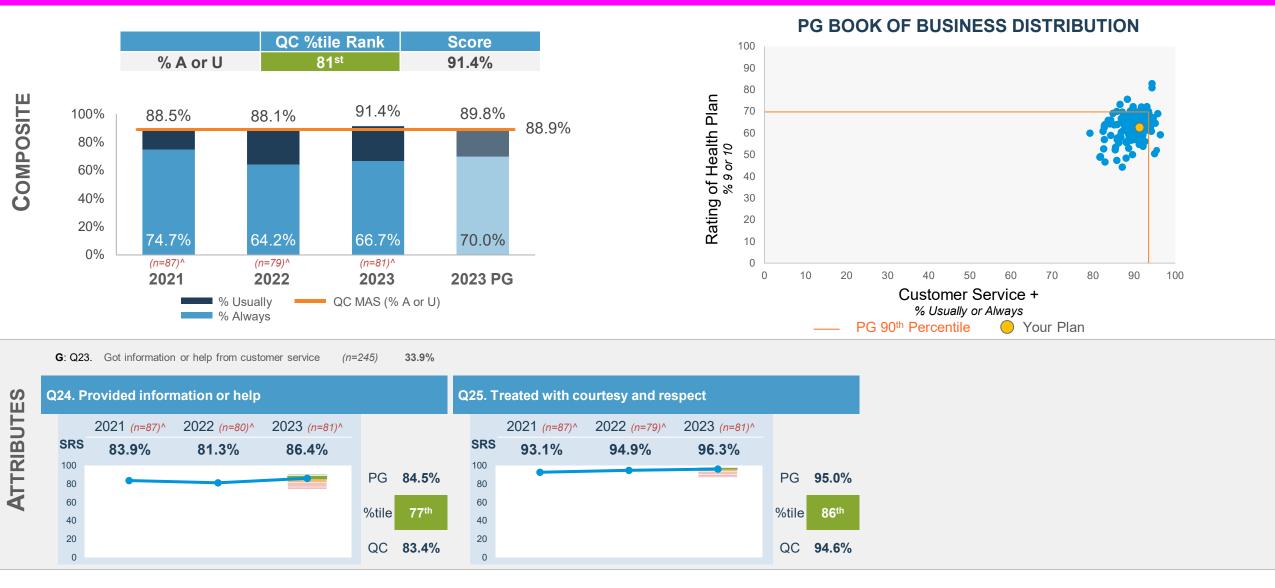
GETTING NEEDED CARE



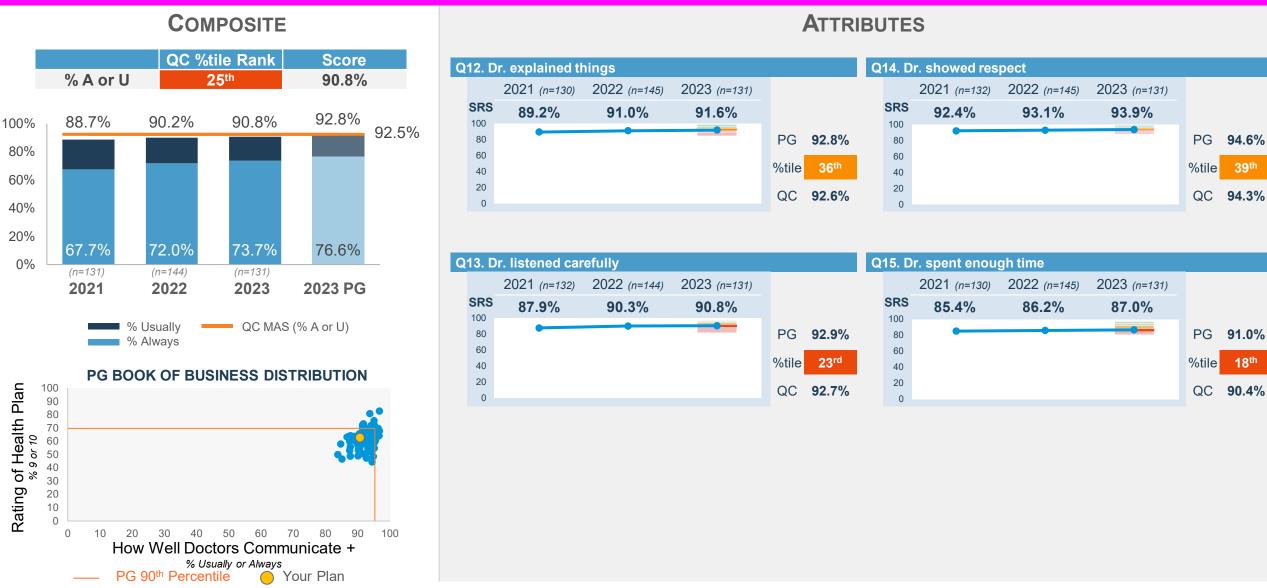
GETTING CARE QUICKLY



CUSTOMER SERVICE +

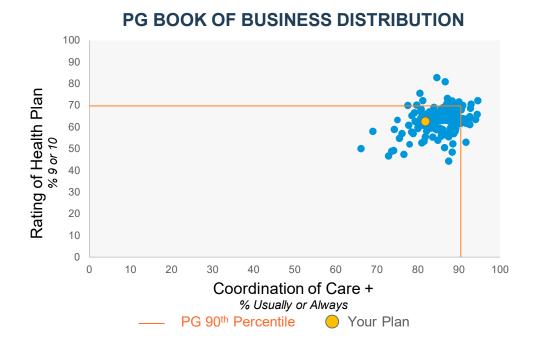


How Well Doctors Communicate +



COORDINATION OF CARE +

		QC %ti	ile Rank	Score	
	% A or U	3	5 th	81.9%	
100%	80.7%	86.8%	81.9%	85.6%	04.00/
80%					84.0%
60%					
40%					
20%	43.9%	54.9%	60.2%	59.5%	
0%	(n=57)^ 2021	(n=91)^ 2022	(n=83) [^] 2023	2023 PG	
		Usually Always	QC MAS (% A or	U)	



SUMMARY OF TREND AND BENCHMARKS

Presbyterian Centennial Care

SECTION INFORMATION

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 2022 score (↑), the 2021 score (♣) or benchmark score (▲).

Red – Current year score is significantly lower than the 2022 score (↓), the 2021 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.

BENCHMARK INFORMATION

Available Benchmarks

The following benchmarks are used throughout the report.

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

SUMMARY RATE SCORES

	2023 Valid n	2021	2022	2023	2023 PG BoB	2022 QC
Rating Questions (% 9 or 10)						
★ Q28. Rating of Health Plan	242	59.7%	56.9%	62.4%	63.6%	62.0%
★ Q8. Rating of Health Care	150	61.7%	50.3%	56.0%	56.8%	56.5%
★ Q18. Rating of Personal Doctor	186	67.2%	63.2%	71.0%	69.2%	68.3%
Q22. Rating of Specialist +	86^	59.5%	71.7%	69.8%	67.4%	68.3%
Rating Questions (% 8, 9 or 10)						
Q28. Rating of Health Plan	242	73.2%	78.2%	80.2%	79.3%	78.0%
Q8. Rating of Health Care	150	76.5%	68.7%	76.7%	75.4%	75.4%
Q18. Rating of Personal Doctor	186	81.4%	79.9%	80.1%	83.2%	82.4%
Q22. Rating of Specialist +	86^	72.2%	83.7%	83.7%	82.3%	83.5%
★ Getting Needed Care (% Usually or Always)	120	81.4%	76.4%	76.2%	82.0%	81.9%
Q9. Getting care, tests, or treatment	149	84.0%	76.7%	79.9%	84.8%	84.7%
Q20. Getting specialist appointment	91^	78.8%	76.0%	72.5%	79.1%	78.6%
★ Getting Care Quickly (% Usually or Always)	111	81.4%	74.5%	76.0%	81.5%	80.2%
Q4. Getting urgent care	87^	83.5%	78.8%	77.0%	82.7%	80.9%
Q6. Getting routine care	136	79.2%	70.1%	75.0%	80.4%	79.8%
Effectiveness of Care (% Sometimes, Usually, or Always)						
★ Q31. Flu Vaccine: 18-64 (% Yes)	204	43.5%	38.3%	42.2%	41.1%	40.1%
★ Q33. Advised to Quit Smoking: 2YR	115	62.9%	61.3%	60.9%	74.3% ▼	72.5% V
Q34. Discussing Cessation Meds: 2YR +	117	38.8%	38.9%	40.2%	53.0% ▼	50.8% V
Q35. Discussing Cessation Strategies: 2YR +	116	39.3%	33.1%	31.9%	47.2% V	45.3% V

SUMMARY RATE SCORES

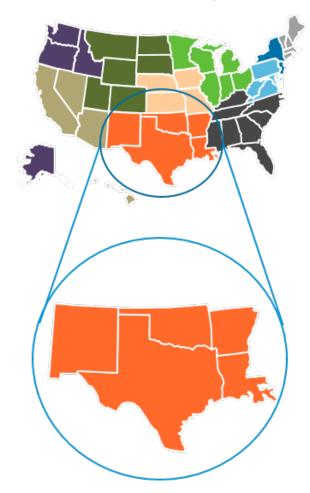
	2023 Valid n	2021	2022	2023	2023 PG BoB	2022 QC
Customer Service + (% Usually or Always)	81^	88.5%	88.1%	91.4%	89.8%	88.9%
Q24. Provided information or help	81^	83.9%	81.3%	86.4%	84.5%	83.4%
Q25. Treated with courtesy and respect	81^	93.1%	94.9%	96.3%	95.0%	94.6%
How Well Doctors Communicate + (% Usually or Always)	131	88.7%	90.2%	90.8%	92.8%	92.5%
Q12. Dr. explained things	131	89.2%	91.0%	91.6%	92.8%	92.6%
Q13. Dr. listened carefully	131	87.9%	90.3%	90.8%	92.9%	92.7%
Q14. Dr. showed respect	131	92.4%	93.1%	93.9%	94.6%	94.3%
Q15. Dr. spent enough time	131	85.4%	86.2%	87.0%	91.0%	90.4%
Q17. Coordination of Care +	83^	80.7%	86.8%	81.9%	85.6%	84.0%
Q27. Ease of Filling Out Forms + (% Usually or Always)	239	94.0%	95.9%	96.7%	95.3%	95.5%

REGIONAL PERFORMANCE

MEDICAID ADULT

		SUMMARY RATE	2023 PG BoB REGION
	Rating Questions (% 9 or 10)		
*	Q28. Rating of Health Plan	62.4%	63.8%
*	Q8. Rating of Health Care	56.0%	57.5%
*	Q18. Rating of Personal Doctor	71.0%	70.2%
	Q22. Rating of Specialist +	69.8%	66.0%
	Rating Questions (% 8, 9 or 10)		
	Q28. Rating of Health Plan	80.2%	78.3%
	Q8. Rating of Health Care	76.7%	75.4%
	Q18. Rating of Personal Doctor	80.1%	83.3%
	Q22. Rating of Specialist +	83.7%	81.1%
*	Getting Needed Care (% Usually or Always)	76.2%	80.0%
	Q9. Getting care, tests, or treatment	79.9%	82.7%
	Q20. Getting specialist appointment	72.5%	77.3%
*	Getting Care Quickly (% Usually or Always)	76.0%	81.4%
	Q4. Getting urgent care	77.0%	83.6%
	Q6. Getting routine care	75.0%	79.2%
	Effectiveness of Care (% Sometimes, Usually, or Always)		
*	Q31. Flu Vaccine: 18-64 (% Yes)	42.2%	42.3%
*	Q33. Advised to Quit Smoking: 2YR	60.9%	67.9%
	Q34. Discussing Cessation Meds: 2YR +	40.2%	44.7%
	Q35. Discussing Cessation Strategies: 2YR +	31.9%	40.4%

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



Region 6: Dallas

- Arkansas
- New Mexico
- Texas
- Louisiana
- Oklahoma

Significance Testing

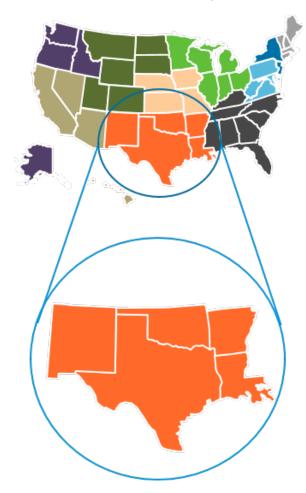
Current year score is significantly higher/lower (❖/❖) than the 2023 PG BoB Region score.

REGIONAL PERFORMANCE

MEDICAID ADULT

SUMMARY RATE	2023 PG BoB REGION
91.4%	90.9%
86.4%	85.8%
96.3%	96.0%
90.8%	92.3%
91.6%	92.1%
90.8%	92.7%
93.9%	93.8%
87.0%	90.4%
81.9%	84.5%
96.7%	95.6%
	91.4% 86.4% 96.3% 90.8% 91.6% 90.8% 93.9% 87.0% 81.9%

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



Region 6: Dallas

- Arkansas
- New Mexico
- Texas
- Louisiana
- Oklahoma

Significance Testing

Current year score is significantly higher/lower (❖/❖) than the 2023 PG BoB Region score.

PERCENTILE RANKINGS

		2023 Plan	QC		2022 Quality Collipass				PG					Percentiles from Book of Business								
		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	62.4%	52 nd	48.2	53.9	58.6	59.8	62.0	64.9	66.2	70.1	72.0	38 th	51.2	55.2	59.4	61.0	63.8	65.6	66.7	69.8	71.3
*	Q8. Rating of Health Care	56.0%	45 th	47.6	49.3	52.9	54.2	56.7	58.8	59.9	63.0	66.2	43 rd	43.9	48.7	53.2	55.2	56.8	58.7	60.0	63.5	65.6
*	Q18. Rating of Personal Doctor	71.0%	66 th	60.4	61.8	64.3	65.3	68.5	71.1	72.3	75.0	76.4	64 th	59.8	62.1	65.1	66.7	69.0	71.5	72.8	74.6	76.0
	Q22. Rating of Specialist +	69.8%	64 th	61.1	61.9	64.7	66.3	67.5	70.0	72.9	75.5	75.9	70 th	56.7	59.1	62.4	64.5	67.1	69.4	70.8	73.7	75.0
	Rating Questions (% 8, 9 or 10)																					
	Q28. Rating of Health Plan	80.2%	63 rd	68.6	71.3	75.1	76.6	78.5	80.4	81.5	84.0	85.6	59 th	70.4	72.4	75.6	77.0	79.3	81.2	82.0	85.6	86.5
	Q8. Rating of Health Care	76.7%	58 th	67.0	70.1	72.8	73.9	75.9	77.7	78.4	80.3	81.5	62 nd	66.7	69.5	72.9	74.1	75.7	77.2	77.9	80.9	83.1
	Q18. Rating of Personal Doctor	80.1%	27 th	75.5	77.6	79.9	80.7	82.6	84.4	85.4	87.5	88.8	24 th	76.3	78.0	80.2	81.8	83.4	84.9	85.3	87.2	87.9
	Q22. Rating of Specialist +	83.7%	51 st	76.0	78.5	80.9	82.3	83.6	85.3	85.9	88.6	90.5	63 rd	73.9	75.8	78.6	80.0	82.3	84.1	85.1	87.7	88.7
*	Getting Needed Care (% U/A)	76.2%	13 th	71.7	75.6	79.2	80.4	82.7	84.6	85.2	87.5	87.9	16 th	72.2	75.1	77.7	79.9	81.8	84.0	85.3	87.3	88.1
	Q9. Getting care, tests, or treatment	79.9%	14 th	76.6	78.1	82.1	83.2	85.5	86.7	87.9	90.3	91.4	17 th	75.4	78.4	81.6	82.8	84.9	87.3	88.5	89.6	91.1
	Q20. Getting specialist appointment	72.5%	14 th	66.7	69.7	74.8	76.8	79.8	82.4	83.3	85.0	86.4	17 th	68.4	70.1	74.3	76.3	78.6	81.0	82.3	85.6	86.6
*	Getting Care Quickly (% U/A)	76.0%	23 rd	69.9	70.2	77.2	77.9	80.5	83.8	84.8	86.9	88.1	19 th	71.2	74.8	77.5	79.1	81.8	84.3	85.0	87.0	88.0
	Q4. Getting urgent care	77.0%	29 th	71.2	71.8	76.9	80.2	82.6	84.2	85.4	87.3	88.3	16 th	72.5	75.4	78.9	80.3	83.3	84.9	86.1	88.7	90.5
	Q6. Getting routine care	75.0%	22 nd	67.4	69.8	75.5	77.6	81.3	83.5	84.3	87.1	88.2	23 rd	69.2	71.4	75.4	77.3	81.0	83.3	84.7	87.0	88.3
	Effectiveness of Care (% S/U/A)																					
*	Q31. Flu Vaccine: 18-64 (% Yes)	42.2%	65 th	28.7	30.6	34.7	36.7	40.4	42.5	45.0	50.7	54.6	64 th	28.3	31.7	36.2	37.6	39.1	43.5	46.7	53.5	56.8
*	Q33. Advised to Quit Smoking: 2YR	60.9%	<5 th	61.5	64.0	69.3	70.9	73.0	75.5	76.7	78.7	79.4	9 th	55.8	61.1	68.2	70.1	74.0	76.8	78.3	83.6	86.8
	Q34. Discussing Cessation Meds: 2YR +	40.2%	6 th	39.3	42.0	46.0	47.1	51.6	53.3	54.9	60.1	62.8	11 th	33.3	38.5	45.0	46.8	50.9	57.1	58.8	66.4	66.8
	Q35. Discussing Cessation Strategies: 2YR +	31.9%	<5 th	35.8	37.5	40.7	41.8	44.7	47.5	49.4	52.7	54.8	9 th	29.0	32.8	40.4	42.2	45.6	51.0	53.3	59.0	61.2

PERCENTILE RANKINGS

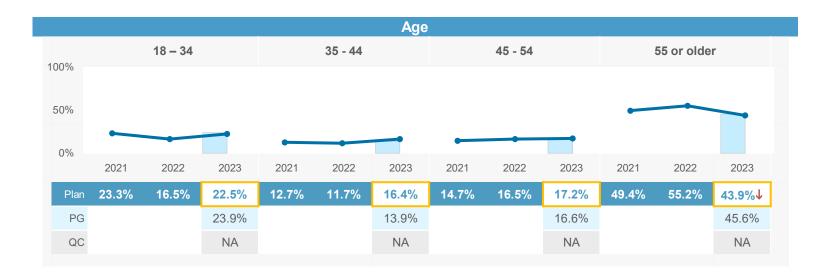
	2023 Plan	QC 0/4ile	National Percentiles from 2022 Quality Compass								PG	National Percentiles from 2023 PG Book of Business									
	Score	%tile	5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th	%tile	5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
Customer Service + (% U/A)	91.4%	81 st	83.6	84.1	86.7	87.9	89.7	90.7	91.0	92.3	92.6	68 th	82.9	85.2	88.0	88.7	90.1	91.4	91.8	93.5	94.4
Q24. Provided information or help	86.4%	77 th	75.1	76.9	80.5	82.2	84.6	85.7	86.2	89.0	89.3	67 th	75.1	77.9	82.0	82.9	84.6	86.4	87.6	89.7	90.8
Q25. Treated with courtesy and respect	96.3%	86 th	90.1	90.6	92.5	94.0	95.5	96.0	96.2	97.7	98.2	63 rd	90.3	91.2	93.2	93.8	95.4	96.5	97.1	98.3	98.9
How Well Doctors Communicate + (% U/A)	90.8%	25 th	88.4	89.0	90.8	92.0	92.9	93.8	94.2	95.4	95.8	16 th	87.7	90.1	91.6	91.8	93.0	94.0	94.4	95.3	95.7
Q12. Dr. explained things	91.6%	36 th	88.1	89.2	90.7	91.5	92.7	94.1	94.5	96.0	96.3	28 th	86.5	89.3	91.2	92.0	93.1	94.3	94.8	96.0	96.5
Q13. Dr. listened carefully	90.8%	23 rd	88.3	89.3	91.1	92.1	93.1	94.1	94.4	95.7	96.0	20 th	88.4	89.5	91.4	92.1	92.9	93.9	94.6	95.6	96.3
Q14. Dr. showed respect	93.9%	39 th	89.7	90.7	93.0	93.7	94.4	95.4	96.0	97.0	97.8	35 th	91.2	92.1	93.5	93.8	94.7	95.4	96.0	97.0	97.4
Q15. Dr. spent enough time	87.0%	18 th	84.2	85.3	88.1	88.6	90.8	92.1	93.3	95.0	95.6	10 th	85.6	86.8	88.7	89.4	91.4	92.4	93.5	94.3	95.0
Q17. Coordination of Care +	81.9%	35 th	77.9	79.2	81.2	81.8	84.5	86.3	86.9	89.5	89.7	21 st	75.7	78.8	82.4	84.0	86.0	87.6	88.4	90.4	92.2
Q27. Ease of Filling Out Forms + (% U/A)	96.7%	71 st	92.0	93.0	94.3	94.8	95.8	96.6	97.0	97.7	98.2	79 th	92.7	93.1	94.1	94.7	95.4	96.2	96.4	97.6	98.2

PROFILE OF SURVEY RESPONDENTS

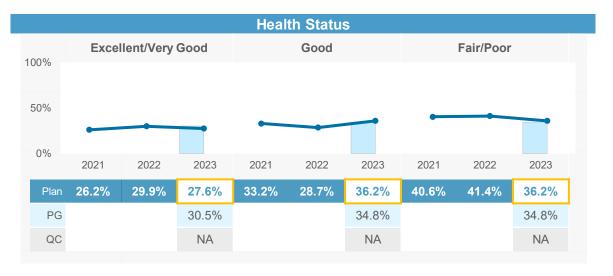
DEMOGRAPHIC COMPOSITION

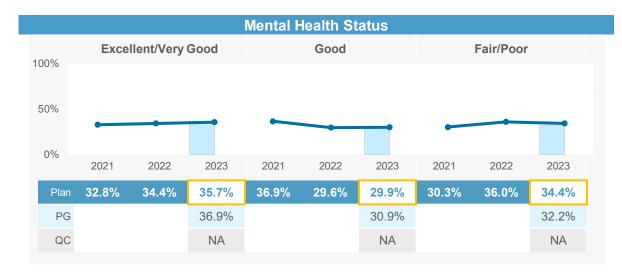
Presbyterian Centennial Care

PROFILE OF SURVEY RESPONDENTS



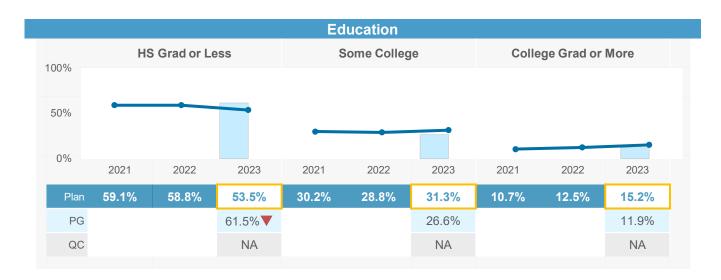


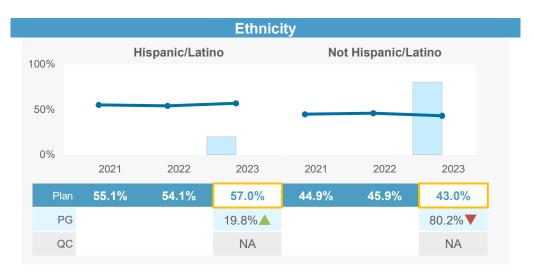


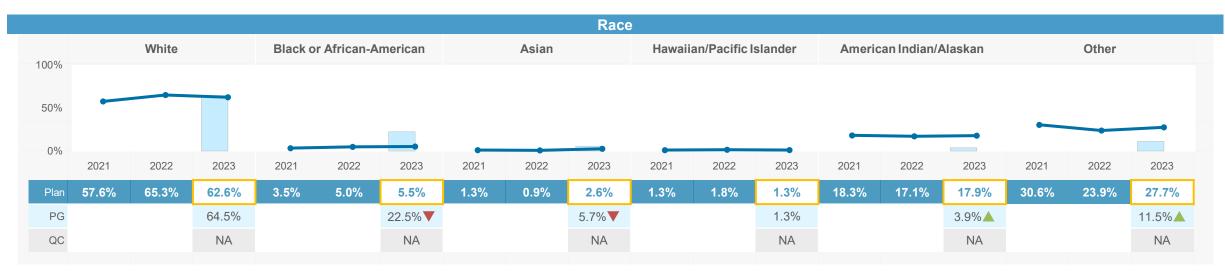


PROFILE OF SURVEY RESPONDENTS

MEDICAID ADULT







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

Benchmarks: PG refers to the 2023 PG Book of Business benchmark. QC refers to the 2022 QC National Data benchmark. NCQA did not publish demographics for the 2022 benchmark.

• Presbyterian Centennial Care

			Category F	Responses		Sur	Summary Rate Score				
		Base	ed on Valid Resp	oonses Per Que	estion	2021	2022	2023	PG BoB		
Q41. Help with coordination of care (% Yes)	Valid Response	es = 238									
	<u>Yes</u>	<u>No</u>				(n=238)	(n=242)	(n=238)			
	37.8%	62.2%				33.6%	37.6%	37.8%			
Q43. Satisfied with help received to coordinate care (% Very Satisfied or %Satisfied)	Valid Response	es = 229									
	Very satisfied	Satisfied	Neither dissatisfied nor satisfied	Dissatisfied	<u>Very</u> <u>dissatisfied</u>	(n=232)	(n=231)	(n=229)			
	38.9%	39.3%	14.8%	3.9%	3.1%	70.7%	66.2%	78.2% <u>↑</u>			
Q44. Received material from plan about good health and how to stay healthy (% Yes)	Valid Response	es = 239									
	<u>Yes</u>	<u>No</u>				(n=239)	(n=239)	(n=239)			
	51.0%	49.0%				57.3%	56.5%	51.0%			
Q45. Received material from plan about care coordination and how to contact the care coordination unit $(\% \ \text{Yes})$	Valid Response	es = 230									
	<u>Yes</u>	<u>No</u>				(n=233)	(n=235)	(n=230)			
	39.6%	60.4%				43.3%	36.6%	39.6%			

			Category R	esponses		Sur	Summary Rate Score				
		Base	ed on Valid Respo		estion	2021	2022	2023	PG BoB		
Q46. Sat down with Care Coordinator and created a Plan of Care (% Yes)	Valid Response	Valid Responses = 89									
	<u>Yes</u>	<u>No</u>				(n=95)	(n=84)	(n=89)			
	47.2%	52.8%				48.4%	41.7%	47.2%			
Q47. Satisfied with care plans (% Very satisfied + %Satisfied)	Valid Responses = 91										
	Very satisfied	Satisfied	Neither dissatisfied nor satisfied	<u>Dissatisfied</u>	<u>Very</u> <u>dissatisfied</u>	(n=97)	(n=85)	(n=91)			
	44.0%	39.6%	14.3%	1.1%	1.1%	79.4%	81.2%	83.5%			
Q48. Problem understanding verbal/written communication from plan (% Never or Sometimes)	Valid Responses = 238										
	<u>Always</u>	<u>Usually</u>	Sometimes	Never		(n=175)	(n=174)	(n=238)			
	13.9%	8.0%	13.9%	64.3%		77.1%	83.3%	78.2%			

Cumray Itam	Survey Item				2023
Survey item		2021	2022	2023	PG BoB
Q42. Who helped to coordinate your care					
Valid Responses	Base	(n=217)	(n=218)	(n=223)	
Someone from your health plan		10.1%	11.5%	12.1%	
Someone from your doctor's office or clinic		24.9%	28.0%	30.5%	
Someone from another organization		0.9%	2.8%	2.7%	
A friend or family member		21.2%	18.8%	14.3%	
You		42.9%	39.0%	40.4%	

APPENDICES

- APPENDIX A: CORRELATION ANALYSES
- APPENDIX B: QUESTIONNAIRE

APPENDIX A: CORRELATIONS

MEDICAID ADULT

Highest Correlations

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

With Health Care Rating									
Q28	Health plan overall	0.6315							
Q9	Got care/tests/treatment	0.5842							
Q18	Personal doctor overall	0.5432							
Q17	Dr. informed about care	0.4406							
Q6	Got routine care	0.4359							
Q43	Satisfied with help received to coordinate care	0.4190							
Q12	Dr. explained things	0.4154							
Q20	Got specialist appt.	0.3934							
Q14	Dr. showed respect	0.3805							
Q25	CS courtesy/respect	0.3689							

With Personal Doctor Rating									
Q14	Dr. showed respect	0.7765							
Q13	Dr. listened carefully	0.7416							
Q12	Dr. explained things	0.7157							
Q17	Dr. informed about care	0.5697							
Q9	Got care/tests/treatment	0.5611							
Q15	Dr. spent enough time	0.5451							
Q8	Health care overall	0.5432							
Q43	Satisfied with help received to coordinate care	0.4938							
Q28	Health plan overall	0.4744							
Q47	Satisfied with care plans	0.4744							

With Specialist Rating									
Q43	Satisfied with help received to coordinate care	0.5931							
Q28	Health plan overall	0.5145							
Q9	Got care/tests/treatment	0.5029							
Q20	Got specialist appt.	0.4613							
Q4	Got urgent care	0.3740							
Q8	Health care overall	0.3633							
Q18	Personal doctor overall	0.3213							
Q47	Satisfied with care plans	0.2679							
Q24	CS provided info./help	0.1882							
Q6	Got routine care	0.1819							

APPENDIX B: QUESTIONNAIRE

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 needed care 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	Always 13. In the last 6 months, how often did your
	 □ 3 □ 4 □ 5 □ 6 □ 7 □ 8 □ 9 	personal doctor listen carefully to you? 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	21. How many specialists have you talked to in the last 6 months?						
up-to-date about the care you got from these doctors or other health providers? Never Sometimes Usually	 None → If None, Go to Question 23 1 specialist 2 3 4 						
Always	☐ 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?	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						
☐ 0 Worst personal doctor possible☐ 1	specialist possible, what number would you use to rate that specialist?						
2	 □ 0 Worst specialist possible □ 1 □ 2 □ 3 □ 4 □ 5 □ 6 □ 7 □ 8 □ 9 						
GETTING HEALTH CARE FROM SPECIALISTS	☐ 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 with courtesy and respect? Never Sometimes Usually Always	30.	In general, how would you rate your overall mental or emotional health? Excellent Very Good Good Fair Poor
26.	In the last 6 months, did your health plan give you any forms to fill out?	31.	Have you had either a flu shot or flu spray in the nose since July 1, 2022?
27.	 Yes No → If No, Go to Question 28 In the last 6 months, how often were the forms 		☐ Yes ☐ No ☐ Don't know
	from your health plan easy to fill out? Never Sometimes Usually Always	32.	Do you now smoke cigarettes or use tobacco every day, some days, or not at all? ☐ Every day ☐ Some days ☐ Not at all → If Not at all,
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?		Go to Question 36 ☐ Don't know → If Don't know, Go to Question 36
	O 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 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.	ADDITIONAL QUESTIONS
		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
	NeverSometimesUsuallyAlways	other health providers? Yes No
36.	What is your age?	42. In the last 6 months, who helped to coordinate your care?
	☐ 18 to 24 ☐ 25 to 34 ☐ 35 to 44 ☐ 45 to 54 ☐ 55 to 64 ☐ 65 to 74	Someone from your health plan Someone from your doctor's office or clinic Someone from another organization A friend or family member You
37.	75 or older Are you male or female?	43. How satisfied are you with the help you received to coordinate your care in the last 6 months?
	☐ Male ☐ Female	☐ Very dissatisfied☐ 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 Some college or 2-year degree 4-year college graduate More than 4-year college degree 	44. In the last 6 months, have you received any material from your health plan about good health and how to stay healthy? Yes No
39.	Are you of Hispanic or Latino origin or descent? Yes, Hispanic or Latino No, Not Hispanic or Latino	45. In the last 6 months, have you received any material from your health plan about care coordination and how to contact the care coordination unit?
40.	What is your race? <i>Mark one or more.</i>	☐ Yes ☐ 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?
		☐ 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?	
	NeverSometimesUsuallyAlways	
	Thank You Please return the completed survey	

Please return the completed survey in the postage-paid envelope or send to: SPH Analytics, a Press Ganey Solution P.O. Box 7315 South Bend, IN 46699-0488

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

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Why Press Ganey

Anticipate member needs sooner and deliver real-time solutions that lay **Enhance satisfaction** a strong foundation for improvements that reduce friction. Connect member experience measurement across the journey to Reduce churn streamline and simplify, removing pain points that can lead to churn. Partner with a dedicated advisory team in making precise Customize solutions improvements to make the greatest impact. Utilize real-time, continuous voice of customer listening to establish a **Boost ratings** member-centric view and improve Star ratings. Deliver a 5-star experience that positively impacts financial Financial impact performance.

Partnering together

CAHPS Improvement Experience Improvement Listening Strategy (Simulation, Drill Down, Triggered, Focus Groups, Post-Visit, Provider Engagement...) Analytics (Key Drivers, Opportunity Analysis, Comment Sediment, Px/Mx Correlation...) **Consulting Support:** Disenrollment reduction Strategic Planning Journey Mapping **Provider Improvement** Member Retention Incentive Plans **Access Strategies** Customer Service (incl. CTM, Member Engagement complaints/ grievances): Field Staff PX Training Broker Training **Common Cause Analysis** Pharmacy MX Improvement • CX, Branding, Growth Workflows eLearning Training Videos **Strategies** Summit Hosting

Focusing Rapid Improvement Efforts by CAHPS Domain

Focused consulting and analytics solutions

GNC & GCQ

Access improvement focused on outreach for high-risk members with access to specialist or PCP issues

Includes care coordination outreach program

GNPD, RDP

Analytics to identify tipping point for cost/coverage

Develop outreach strategies around cost and mail order onboarding

CS

CCA to identify factors in complaints and CS issues

CS training and POD design for subpopulations

CC

Care program mapping

Information flow design and outreach prioritization

Structure and skill mix analysis