

MY 2021 CAHPS® MEDICAID ADULT 5.1H SURVEY

WESTERN SKY COMMUNITY CARE (CENTENE NM)



WESTERN SKY COMMUNITY CARE

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SPH Analytics (SPH), a National Committee for Quality Assurance (NCQA) certified HEDIS® Survey Vendor, was selected by Western Sky Community 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 Julia Schneider (248-539-8757). 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 3/1/2022

Second questionnaire mailed 4/5/2022

Initiate follow-up calls to non-responders 4/26/2022 - 5/10/2022 Last day to accept completed surveys 5/12/2022

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

То	tal Number of Mail Completed =	77	(0 in Spanish)
To	tal Number of Phone Completed =	37	(1 in Spanish)

Number of Undeliverables: 415

Note: Respondents were given the option of completing the survey in Spanish. A telephone number was provided on the survey cover letter for members to call if they would like to complete the survey in Spanish.

	RESPONSE RATE TRE	NDING		
		2020	2021	2022
Completed	SUBTOTAL	47	134	114
	Does not Meet Eligibility Criteria (01)	0	11	17
	Language Barrier (03)	0	3	1
Ineligible	Mentally/Physically Incapacitated (04)	0	1	1
	Deceased (05)	0	1	0
	SUBTOTAL	0	16	19
	Break-off/Incomplete (02)	0	8	10
	Refusal (06)	0	30	53
Non-response	Maximum Attempts Made (07)	1303	1162	1154
	Added to DNC List (08)	0	0	0
	SUBTOTAL	1303	1200	1217
	Total Sample	1350	1350	1350
	Oversampling %	0.0%	0.0%	0.0%
	Response Rate	3.5%	10.0%	8.6%
	SPH Response Rate	15.5%	14.8%	12.2%



INDUSTRY TRENDS

Western Sky Community 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 I	Book of B	usiness T	rends
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% 56.2% 68.8% 66.8% 78.4% 75.7% 82.7% 82.9% 85.5% 80.9% 84.9% 80.4% 83.8%	2019 2020 62.0% 64.6% 56.2% 58.8% 68.8% 70.7% 66.8% 70.9% 78.4% 80.3% 75.7% 76.9% 82.7% 84.2% 82.9% 84.7% 85.5% 86.3% 80.9% 80.7% 82.7% 82.7% 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% 82.9% 84.7% 83.9% 83.2% 83.5% 84.1% 85.5% 86.3% 85.8% 80.9% 80.7% 82.4% 82.7% 82.6% 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

Western Sky Community 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.



114

Completed surveys

8.6%

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.

Rating of Health Plan 🌟 🜟										
Rating of Health Plan	58.9%	20 th								
Rating of Health Care (NA)										
Rating of Health Care	45.3%	<5 th	Opportunity							
Rating of Personal Doctor (NA)										
Rating of Personal Doctor	62.0%	11 th	Wait							
Rating of	Specialist (NA)									
Rating of Specialist	53.1%	<5 th	Wait							
Flu Vacci	ne: 18-64 (NA)									
Flu Vaccine: 18-64	30.8% ↓	9 th								
Advised to Quit Smoking: 2YR (NA)										
Advised to Quit Smoking: 2YR	70.7%	33 rd								

On auditoration of Come (NA)										
Coordination of Care (NA)										
Coordination of Care	73.0%	<5 th	Wait							
Getting Needed Care (NA)										
Composite	83.1%	51 st								
Q9. Getting care, tests, or treatment	86.7%	68 th	Power							
Q20. Getting specialist appointment	79.6%	47 th	Wait							
Getting Car	e Quickly (NA)									
Composite	77.2%	24 th								
Q4. Getting urgent care	72.5%	9 th	Opportunity							
Q6. Getting routine care	81.8%	62 nd	Power							

Customer Service +										
Composite	86.5%	18 th								
Q24. Provided information or help	80.0%	21 st	Opportunity							
Q25. Treated with courtesy and respect	93.0%	21 st	Opportunity							
Ease of Filling (Out Forms +									
Ease of Filling Out Forms +	95.2%	35 th	Opportunity							

How Well Doctors Communicate +									
Composite	90.1%	14 th							
Q12. Dr. explained things	91.4%	32 nd	Wait						
Q13. Dr. listened carefully	87.9%	5 th	Wait						
Q14. Dr. showed respect	94.8%	52 nd	Retain						
Q15. Dr. spent enough time	86.2%	13 th	Wait						



ESTIMATED NCQA HEALTH INSURANCE PLAN RATINGS

MEDICAID ADULT

	SCORE DEFINITION	2022 BASE	2022 HPR SCORE*	HPR 4 STAR THRESHOLD	HPR PERCENTILE	
PATIENT EXPERIENCE					BAND	RATING 2
GETTING CARE						NA
Getting Needed Care	Usually or Always	64	83.1%	85.7%	33 rd	NA
Getting Care Quickly	Usually or Always	53	77.1%	83.7%	10 th	NA
SATISFACTION WITH PLAN	PHYSICIANS					NA
Rating of Personal Doctor	9 or 10	71	61.9%	71.5%	<10 th	NA
Rating of Specialist	9 or 10	49	53.0%	71.9%	<10 th	NA
Rating of Health Care	9 or 10	75	45.3%	60.8%	<10 th	NA
Coordination of Care	Usually or Always	37	72.9%	87.4%	<10 th	NA
SATISFACTION WITH PLAN	SERVICES					2
Rating of Health Plan	9 or 10	112	58.9%	64.7%	10 th	2
PREVENTION						
Flu Vaccinations Adults Ages 18-64	Yes	91	30.7%	42.4%	10 th	NA
TREATMENT						
Smoking Advice: Rolling Average	Sometimes, Usually or Always	75	70.7%	77.7%	10 th	NA

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

EXPLANATION

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

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

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

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

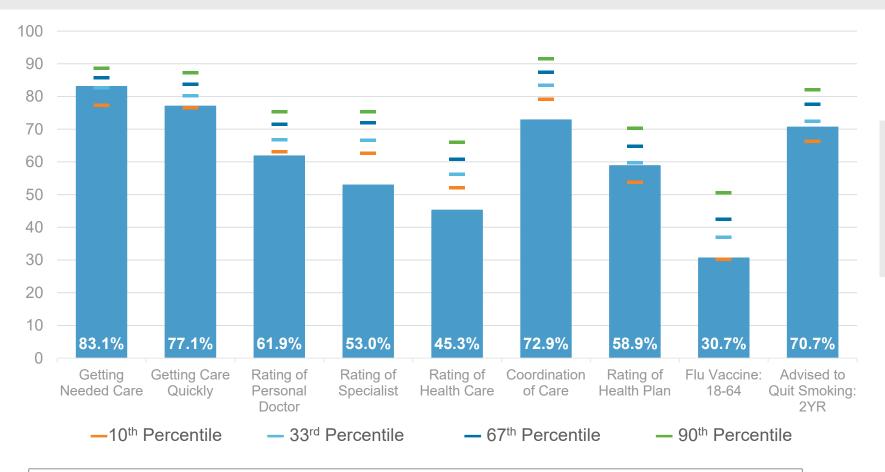
Rating = 1	Rating = 2	Rating = 3	Rating = 4	Rating = 5
<10 th	10 th – 32 nd	33 rd – 66 th	67 th – 89 th	≥90 th
Percentile	Percentile	Percentile	Percentile	Percentile

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

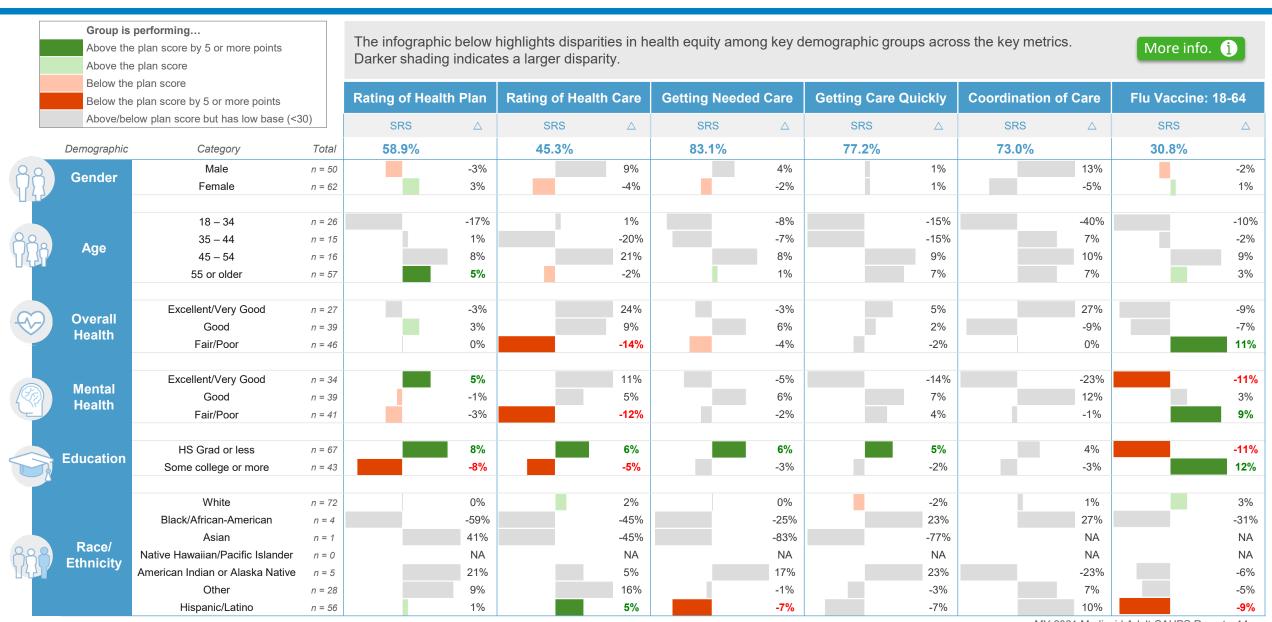
Light Blue bar = Your plan's performance is below the 67th percentile

<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			RCENTILE	DISTRIBUT	ION		PERCENTILE	BoB SRS	
				0	20	40	60	80	100	RANK		
Health Plan Domain												
Rating of Health Plan % 9 or 10	63.6%	58.9%	-4.7							20 th	64.0%	
Getting Needed Care % Usually or Always	80.5%	83.1%	2.6							51 st	82.3%	
Customer Service + % Usually or Always	89.1%	86.5%	-2.6							18 th	89.7%	
Ease of Filling Out Forms + % Usually or Always	95.4%	95.2%	-0.2							35 th	95.6%	
Health Care Domain												
Rating of Health Care % 9 or 10	52.4%	45.3%	-7.1							<5 th	57.0% ▼	
Getting Care Quickly % Usually or Always	77.4%	77.2%	-0.2							24 th	80.9%	
How Well Doctors Communicate + % Usually or Always	93.2%	90.1%	-3.1							14 th	92.7%	
Coordination of Care % Usually or Always	81.0%	73.0%	-8.0							<5 th	85.0%	
Rating of Personal Doctor % 9 or 10	65.3%	62.0%	-3.3							11 th	69.5%	
Rating of Specialist % 9 or 10	61.2%	53.1%	-8.1							<5 th	68.4% ▼	

	SUMMAI		2022 SPH BOOK OF BUSINESS BENCHMARK								
MEASURE	2021	2022	CHANGE		PEF	RCENTILE	DISTRIBU	TION		PERCENTILE	BoB SRS
	2021	2022		0	20	40	60	80	100	RANK	DOD OILO
Effectiveness of Care											
Flu Vaccine: 18-64 % Yes	46.3%	30.8% ↓	-15.5							9 th	41.2% 🔻
Advised to Quit Smoking: 2YR % Sometimes, Usually, or Always	71.1%	70.7%	-0.4							33 rd	74.1%
Discussing Cessation Meds: 2YR + % Sometimes, Usually, or Always	57.8%	48.6%	-9.2				43 rd	51.9%			
Discussing Cessation Strategies: 2YR + % Sometimes, Usually, or Always	48.9%	42.5%	-6.4							36 th	46.4%



Group is performing... Above the plan score by 5 or more points Above the plan score

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)

	7 to vo the plan cools												
	Below the	e plan score e plan score by 5 or more points		Rating of Pe		Rating of Sp	ecialist	Customer Se	ervice +	How Well I		Ease of Filli Forms	
	Above/be	low plan score but has low base (<3	30)	SRS	Δ	SRS	Δ	SRS	Δ	SRS	Δ	SRS	Δ
	Demographic	Category	Total	62.0%		53.1%		86.5%		90.1%		95.2%	
00	Constan	Male	n = 50		-3%		4%		1%		1%		-4%
WA.	Gender	Female	n = 62		4%		-1%		0%		2%		3%
		18 – 34	n = 26		-20%		-25%		-12%		-5%		-4%
000		35 – 44	n = 15		5%		-20%		5%		-11%		-2%
1/1/36	Age	45 – 54	n = 16		18%		-20%		14%		10%		5%
		55 or older	n = 57		1%		17%		1%		1%		1%
		Excellent/Very Good	n = 27		7%		-41%		2%		10%		-3%
	Overall	Good	n = 39		11%		8%		6%		-1%		5%
	Health	Fair/Poor	n = 46		-11%		5%		-4%		-3%		-2%
	Mental	Excellent/Very Good	n = 34		9%		14%		7%		7%	•	-2%
(43)	Health	Good	n = 39		2%		-10%		-3%		5%		2%
		Fair/Poor	n = 41		-7%		-1%		-3%		-9%		-1%
	Education	HS Grad or less	n = 67		1%		5%		-1%		-2%		0%
	Luucation	Some college or more	n = 43		1%		-5%		3%		2%		2%
		White	n = 72		-3%		4%		2%		2%		2%
		Black/African-American	n = 4		5%		-53%		-53%		10%		5%
		Asian	n = 1		38%		NA		14%		10%		5%
222	Race/	Native Hawaiian/Pacific Islander	n = 0		NA		NA		NA		NA		NA
TUT	Ethnicity	American Indian or Alaska Native	n = 5		5%		-3%		1%		-7%		-15%
		Other	n = 28		15%		-8%		10%		5%		1%
		Hispanic/Latino	n = 56		14%		-1%		1%		8%		-1%

Top Three Performing Measures

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

MEASURE ,2		PLAN SUMMARY RATE SCORE		2021 QC			2022 SPH BoB			
WEASURE	Valid n	2021	2022	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Getting Needed Care (% Usually or Always)	64^	80.5%	83.1%	2.6	83.6%	-0.5	38 th	82.3%	0.8	51 st
Getting Care Quickly (% Usually or Always)	53^	77.4%	77.2%	-0.2	81.8%	-4.6	12 th	80.9%	-3.7	24 th
Rating of Health Plan (% 9 or 10)	112	63.6%	58.9%	-4.7	62.3%	-3.4	29 th	64.0%	-5.1	20 th

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			
WEASURE	Valid n	2021	2022	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Rating of Health Care (% 9 or 10)	75^	52.4%	45.3%	-7.1	58.7% ▼	-13.4	<5 th	57.0% ▼	-11.7	<5 th
Coordination of Care (% Usually or Always)	37^	81.0%	73.0%	-8.0	85.4%	-12.4	<5 th	85.0%	-12.0	<5 th
Rating of Specialist (% 9 or 10)	49^	61.2%	53.1%	-8.1	69.0% ▼	-15.9	<5 th	68.4% ▼	-15.3	<5 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 - 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).

Improvement Strategies - Coordination of Care

- Inform, support, remind and facilitate providers about coordination of care expectations, timely notification requirements, and standards of care for postvisit follow up to all PCPs. Explore options to encourage and support communications between specialists and PCPs.
- Develop on-going and timely reminders/messaging to promote and improve communication and reporting between all provider types, ideally based directly on available data/information.
- Assess the status and consistency of coordination of patient care, communication, and information shared within and across provider networks. Assure prompt feedback, standards.
- Support and facilitate a patient-centered care management approach within and across provider networks. Facilitate a complementary plan-based patient centered care management approach.
- Explore potential of aligning information flow/EHRs to better integrate, support or facilitate patient care, care coordination and vital medical and personal information among providers.
- Encourage providers to prompt patients AND patients to prompt providers, i.e., mutual interactions that review and discuss care, tests and/or treatments involving other providers.
- Encourage patients to bring a list of all medications, including dosage and frequency to all appointments. Encourage providers to prompt patients to do the same for their appointments.
- How do PCP's, providers, facilities and/or the plan assure common patient "touch points" to facilitate/support scheduling of appointments, tests and/or procedures? Where is the over-arching guidance and support for the patient/member?

Improvement Strategies – Rating of Specialist

- Analyze, investigate, and probe for weakness or QI opportunities among those measures or composites that are Key Drivers (or highly correlated) with rating of specialist or doctor. (e.g., HWDC, GCQ, GNC, Coordination Of Care).
- Review QI recommendations/actions for related CAHPS composite measures: How Well Doctors Communicate, Getting Care Quickly, Getting Needed Care, Coordination of Care.
- Provide resources, articles, tools and training sessions via multiple channels
 to support and drive improvement in physician-patient communication and
 patient-centered interviewing. Examples include: Listen to patients' concerns,
 Follow-up with the patient. Provide thorough explanations. Ensure that all
 questions and concerns are answered. All staff focus on being helpful and
 courteous to patients.
- Share, report and discuss relative CAHPS health care performance and feedback at the health system and/or within network level.
- Promote use of a secure online patient portal which allows patients access to their medical record and health care information of relevant to patient needs.
- Gather and analyze patient feedback on their recent office visit (i.e.., patient "comment cards," follow up call/text/email, CG CAHPS survey, etc.)
- Assess adequacy of contracted specialist by specialty. If necessary, review
 quality of care information among specific specialties and/or identify practices
 of excellence.
- Explore ability of providers to share with patient's a summary of their medical record or health assessments to facilitate conversation about relevant health and wellness issues.
- Assess systems (e.g., EHRs) processes and/or procedures used to gather or facilitate distribution of patient information among providers.
- Suggest providers/practices periodically analyze appointment scheduling timeframes versus types of office visits.

Full List of Improvement Strategies i



KEY DRIVER ANALYSIS OF RATING OF HEALTH PLAN

Western Sky Community 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

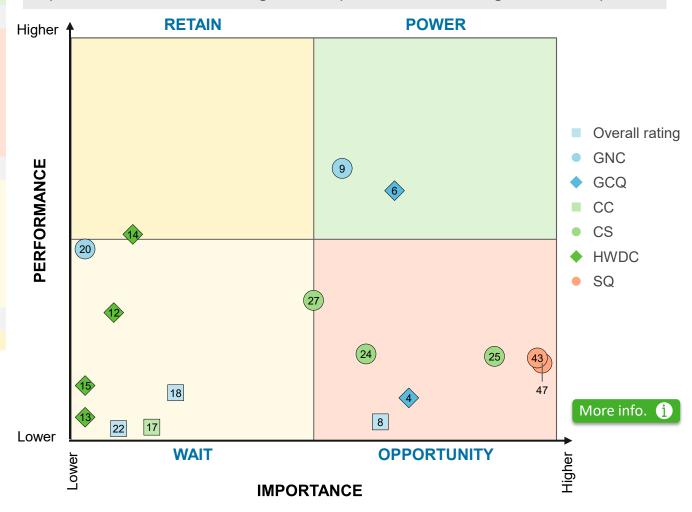
Higher



SURVEY M	EASURE	SRS	SPH %tile
POWER			
Q6	Getting routine care	81.8%	62 nd
Q9	Getting care, tests, or treatment	86.7%	68 th
OPPORTU	NITY		
Q47	Satisfied with care plans	80.0%	
Q43	Satisfied with help received to coordinate care	75.9%	
Q25	Treated with courtesy and respect	93.0%	21 st
Q4	Getting urgent care	72.5%	9 th
Q8	Rating of Health Care	45.3%	<5 th
Q24	Provided information or help	80.0%	21 st
Q27	Ease of Filling Out Forms +	95.2%	35 th
WAIT			
Q18	Rating of Personal Doctor	62.0%	11 th
Q17	Coordination of Care	73.0%	<5 th
Q22	Rating of Specialist	53.1%	<5 th
Q12	Dr. explained things	91.4%	32 nd
Q13	Dr. listened carefully	87.9%	5 th
Q15	Dr. spent enough time	86.2%	13 th
Q20	Getting specialist appointment	79.6%	47 th
RETAIN			
Q14	Dr. showed respect	94.8%	52 nd

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 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	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			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	58.9%	64.0%	20 th	
	1		Q47	Satisfied with care plans	80.0%			Opportunity
	2		Q43	Satisfied with help received to coordinate care	75.9%			Opportunity
\checkmark	3	9	Q25	Treated with courtesy and respect	93.0%	95.1%	21 st	Opportunity
\checkmark	4	5	Q4	Q4 Getting urgent care		81.7%	9 th	Opportunity
\checkmark	5	6	Q6	Getting routine care	81.8%	80.0%	62 nd	Power
\checkmark	6	1	Q8	Rating of Health Care	45.3%	57.0%	<5 th	Opportunity
	7	11	Q24	Provided information or help	80.0%	84.3%	21 st	Opportunity
\checkmark	8	4	Q9	Getting care, tests, or treatment	86.7%	85.0%	68 th	Power
	9	15	Q27	Ease of Filling Out Forms +	95.2%	95.6%	35 th	Opportunity
\checkmark	10	2	Q18	Rating of Personal Doctor	62.0%	69.5%	11 th	Wait
	12	10	Q14	Dr. showed respect	94.8%	94.5%	52 nd	Retain
	13	3	Q22	Rating of Specialist	53.1%	68.4%	<5 th	Wait
	15	8	Q13	Dr. listened carefully	87.9%	92.7%	5 th	Wait
	17	7	Q20	Getting specialist appointment	79.6%	79.6%	47 th	Wait



MEASURE ANALYSES

Measure Details and Summary Rate Scores

Western Sky Community 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...

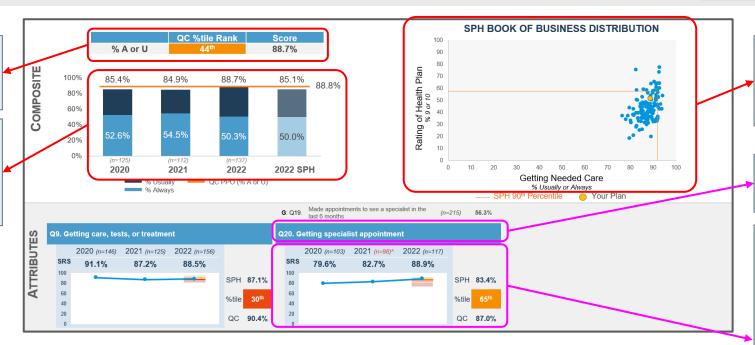
- Gate questions
- Percentile ranking and benchmark performance
- · Summary rate score trending

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

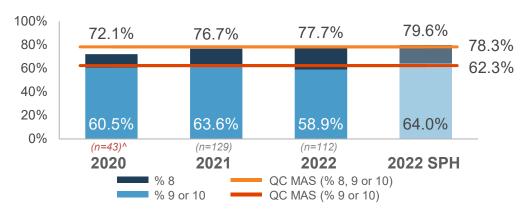
For composites – all corresponding attributes that roll-up into the composite score are displayed:

- 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



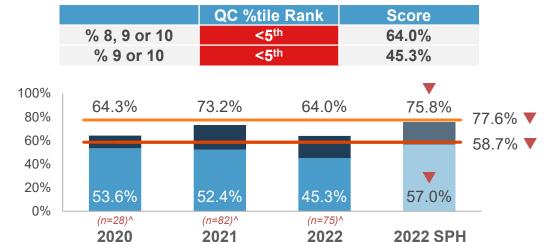
RATING OF HEALTH PLAN

	QC %tile Rank	Score
% 8, 9 or 10	43 rd	77.7%
% 9 or 10	29 th	58.9%



	Key Drivers Of The Rating Of The Health Plan							
	POWER		OPPORTUNITIES					
Q6	Getting routine care	Q47	Satisfied with care plans					
Q9	Getting care, tests, or treatment	Q43 Satisfied with help received to coording						
		Q25	Treated with courtesy and respect					
		Q4	Getting urgent care					
		Q8	Rating of Health Care					
		Q24	Provided information or help					
		Q27	Ease of Filling Out Forms +					

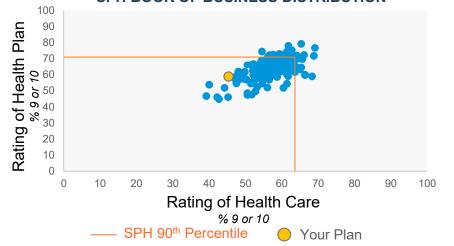
RATING OF HEALTH CARE



SPH BOOK OF BUSINESS DISTRIBUTION

% 8

9 % 9 or 10



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

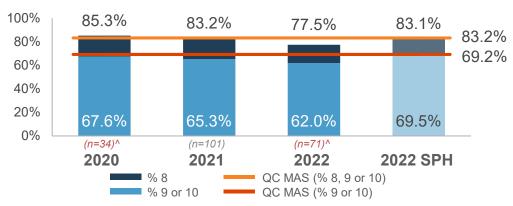
QC MAS (% 8, 9 or 10)

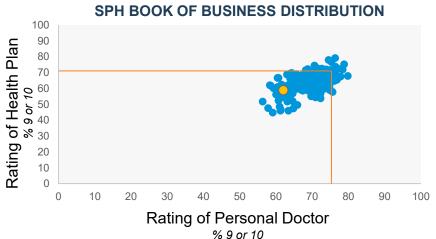
QC MAS (% 9 or 10)



RATING OF PERSONAL DOCTOR

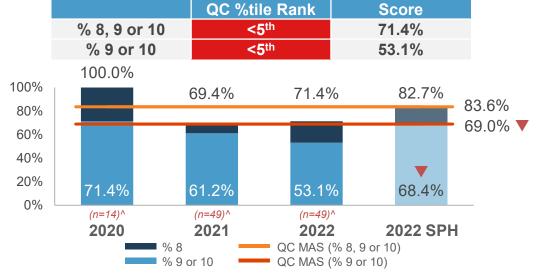
	QC %tile Rank	Score
% 8, 9 or 10	5 th	77.5%
% 9 or 10	6 th	62.0%



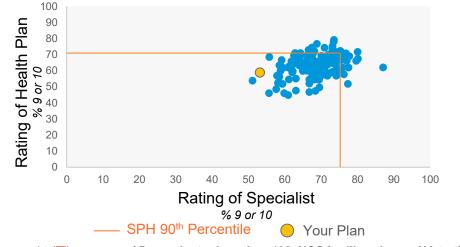


— SPH 90th Percentile

RATING OF SPECIALIST



SPH BOOK OF BUSINESS DISTRIBUTION

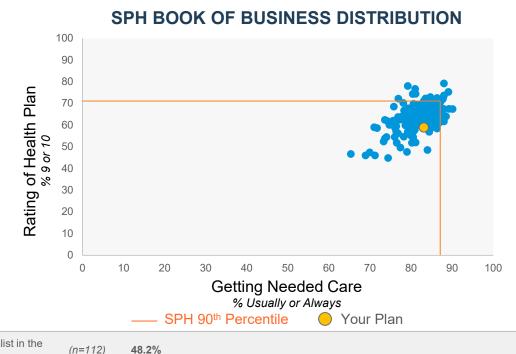


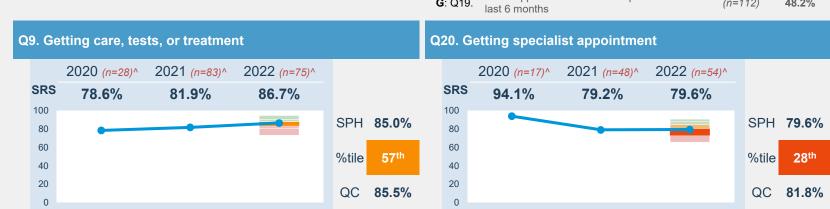
^Denominator less than 100. NCQA will assign an NA to this measure.

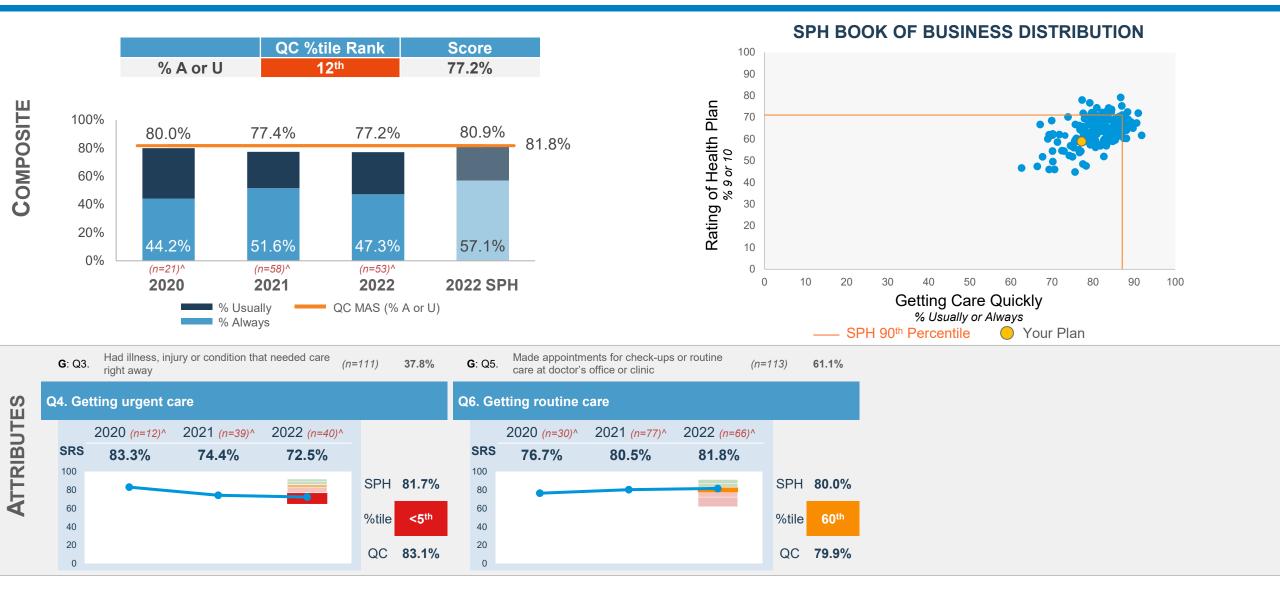
Your Plan

ATTRIBUTES



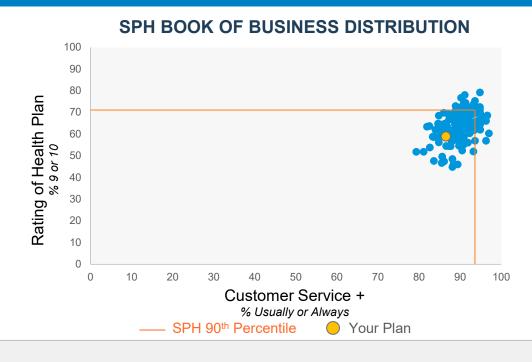


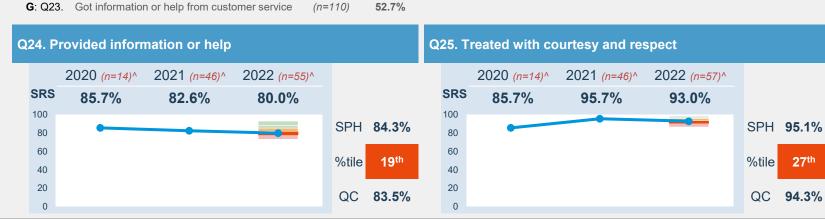




ATTRIBUTES









How Well Doctors Communicate +

MEDICAID ADULT



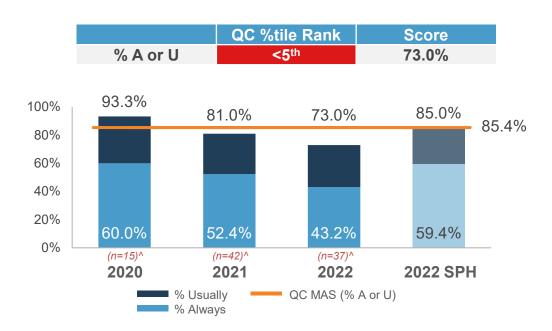
ATTRIBUTES

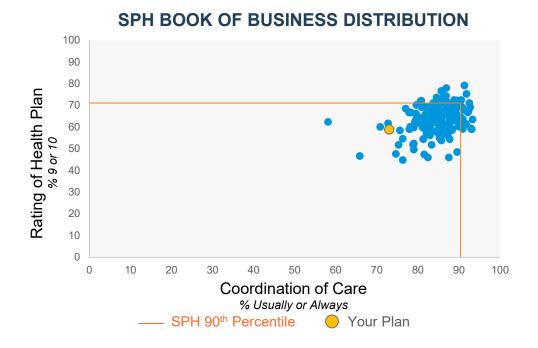














SUMMARY OF TREND AND BENCHMARKS

Western Sky Community 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	2021 NCQA 1-100 Benchmark	2022 SPH Analytics Book of Business
	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



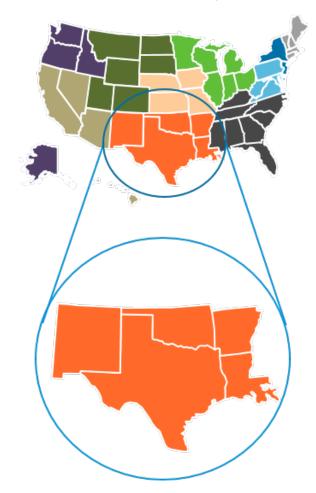
	2022 Valid n	2020	2021	2022	2022 SPH BoB	2021 QC
Rating Questions (% 9 or 10)						
★ Q28. Rating of Health Plan	112	60.5%	63.6%	58.9%	64.0%	62.3%
★ Q8. Rating of Health Care	75^	53.6%	52.4%	45.3%	57.0% ▼	58.7% ▼
★ Q18. Rating of Personal Doctor	71^	67.6%	65.3%	62.0%	69.5%	69.2%
★ Q22. Rating of Specialist	49^	71.4%	61.2%	53.1%	68.4% ▼	69.0% V
Rating Questions (% 8, 9 or 10)						
Q28. Rating of Health Plan	112	72.1%	76.7%	77.7%	79.6%	78.3%
Q8. Rating of Health Care	75^	64.3%	73.2%	64.0%	75.8% ▼	77.6% V
Q18. Rating of Personal Doctor	71^	85.3%	83.2%	77.5%	83.1%	83.2%
Q22. Rating of Specialist	49^	100%	69.4%	71.4%	82.7%	83.6%
★ Getting Needed Care (% Usually or Always)	64^	86.3%	80.5%	83.1%	82.3%	83.6%
Q9. Getting care, tests, or treatment	75^	78.6%	81.9%	86.7%	85.0%	85.5%
Q20. Getting specialist appointment	54^	94.1%	79.2%	79.6%	79.6%	81.8%
★ Getting Care Quickly (% Usually or Always)	53^	80.0%	77.4%	77.2%	80.9%	81.8%
Q4. Getting urgent care	40^	83.3%	74.4%	72.5%	81.7%	83.1%
Q6. Getting routine care	66^	76.7%	80.5%	81.8%	80.0%	79.9%
★ Q17. Coordination of Care	37^	93.3%	81.0%	73.0%	85.0%	85.4%
Effectiveness of Care (% Sometimes, Usually, or Always)						
★ Q31. Flu Vaccine: 18-64 (% Yes)	91^	44.4%	46.3%	30.8% ↓	41.2% V	40.0%
★ Q33. Advised to Quit Smoking: 2YR	75^	88.9%	71.1%	70.7%	74.1%	74.8%
Q34. Discussing Cessation Meds: 2YR +	74^	88.9%	57.8%	48.6%	51.9%	53.1%
Q35. Discussing Cessation Strategies: 2YR +	73^	88.9%	48.9%	42.5%	46.4%	48.0%



	2022 Valid n	2020	2021	2022	2022 SPH BoB	2021 QC
Customer Service + (% Usually or Always)	56^	85.7%	89.1%	86.5%	89.7%	88.9%
Q24. Provided information or help	55^	85.7%	82.6%	80.0%	84.3%	83.5%
Q25. Treated with courtesy and respect	57^	85.7%	95.7%	93.0%	95.1%	94.3%
How Well Doctors Communicate + (% Usually or Always)		95.6%	93.2%	90.1%	92.7%	92.2%
Q12. Dr. explained things	58^	96.6%	93.8%	91.4%	92.6%	92.1%
Q13. Dr. listened carefully	58^	96.6%	93.8%	87.9%	92.7%	92.5%
Q14. Dr. showed respect	58^	96.6%	97.5%	94.8%	94.5%	94.2%
Q15. Dr. spent enough time	58^	92.9%	87.5%	86.2%	90.9%	89.9%
Q27. Ease of Filling Out Forms + (% Usually or Always)	105	97.8%	95.4%	95.2%	95.6%	95.9%

		SUMMARY RATE	2022 SPH BoB REGION
	Rating Questions (% 9 or 10)		
*	Q28. Rating of Health Plan	58.9%	64.4%
*	Q8. Rating of Health Care	45.3%	58.2% ❖
*	Q18. Rating of Personal Doctor	62.0%	70.2%
*	Q22. Rating of Specialist	53.1%	70.1% 💠
	Rating Questions (% 8, 9 or 10)		
	Q28. Rating of Health Plan	77.7%	79.4%
	Q8. Rating of Health Care	64.0%	75.7% ❖
	Q18. Rating of Personal Doctor	77.5%	82.4%
	Q22. Rating of Specialist	71.4%	82.4%
*	Getting Needed Care (% Usually or Always)	83.1%	80.9%
	Q9. Getting care, tests, or treatment	86.7%	82.8%
	Q20. Getting specialist appointment	79.6%	79.0%
*	Getting Care Quickly (% Usually or Always)	77.2%	80.4%
	Q4. Getting urgent care	72.5%	79.9%
	Q6. Getting routine care	81.8%	80.9%
*	Q17. Coordination of Care	73.0%	81.6%
	Effectiveness of Care (% Sometimes, Usually, or Always)		
*	Q31. Flu Vaccine: 18-64 (% Yes)	30.8%	41.9% 💠
*	Q33. Advised to Quit Smoking: 2YR	70.7%	71.7%
	Q34. Discussing Cessation Meds: 2YR +	48.6%	45.3%
	Q35. Discussing Cessation Strategies: 2YR +	42.5%	41.0%

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



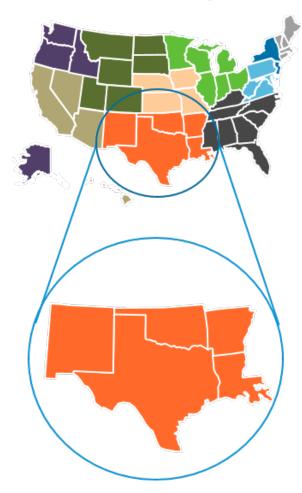
Region 6: Dallas

- Arkansas
- New Mexico
- Texas
- Louisiana
- Oklahoma

Significance Testing

	SUMMARY RATE	2022 SPH BoB REGION
Customer Service + (% Usually or Always)	86.5%	90.7%
Q24. Provided information or help	80.0%	85.3%
Q25. Treated with courtesy and respect	93.0%	96.1%
How Well Doctors Communicate + (% Usually or Always)	90.1%	91.7%
Q12. Dr. explained things	91.4%	91.9%
Q13. Dr. listened carefully	87.9%	91.8%
Q14. Dr. showed respect	94.8%	92.9%
Q15. Dr. spent enough time	86.2%	90.2%
Q27. Ease of Filling Out Forms + (% Usually or Always)	95.2%	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						itiles f				SPH				onal F SPH E					
		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	58.9%	29 th	52.4	53.9	58.1	59.8	62.3	64.7	66.2	70.3	72.2	20 th	51.8	54.7	59.6	61.5	64.0	66.3	67.9	71.1	72.5
*	Q8. Rating of Health Care	45.3%	<5 th	50.6	52.2	54.9	56.4	58.3	60.8	62.3	66.2	67.5	<5 th	47.5	49.5	53.6	54.8	56.9	59.2	61.0	63.6	65.2
*	Q18. Rating of Personal Doctor	62.0%	6 th	60.6	63.2	65.5	66.9	69.2	71.6	72.8	75.4	77.3	11 th	60.4	61.8	64.9	67.4	69.8	72.0	72.7	75.3	76.3
*	Q22. Rating of Specialist	53.1%	<5 th	60.6	62.8	65.1	66.7	69.3	71.9	73.8	75.5	76.2	<5 th	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	77.7%	43 rd	71.0	72.5	74.8	76.0	78.6	80.6	82.0	84.8	86.6	34 th	70.9	72.5	76.1	77.5	80.1	81.7	82.5	85.2	86.7
	Q8. Rating of Health Care	64.0%	<5 th	70.4	71.3	75.2	76.5	77.7	79.5	80.7	83.1	84.3	<5 th	67.5	70.2	73.0	74.1	76.2	77.8	78.9	81.1	83.3
	Q18. Rating of Personal Doctor	77.5%	5 th	77.0	78.9	81.0	81.7	83.1	84.8	85.6	88.3	89.1	9 th	76.8	77.6	80.2	81.1	83.1	85.0	85.7	87.6	88.3
	Q22. Rating of Specialist	71.4%	<5 th	77.4	79.3	81.1	82.2	84.0	85.4	86.0	87.7	88.8	<5 th	75.5	76.9	79.6	80.7	82.5	84.6	85.7	87.1	88.6
*	Getting Needed Care (% U/A)	83.1%	38 th	75.0	77.5	81.1	82.6	84.1	85.8	86.5	88.6	89.3	51 st	73.7	76.0	79.3	80.3	82.9	84.7	85.2	87.1	87.8
	Q9. Getting care, tests, or treatment	86.7%	57 th	76.8	80.4	82.6	83.8	85.8	88.0	89.0	90.6	91.5	68 th	77.2	78.9	82.1	83.3	85.7	86.6	87.6	89.5	91.3
	Q20. Getting specialist appointment	79.6%	28 th	72.1	73.5	78.3	80.7	83.2	84.8	85.1	88.0	88.8	47 th	67.2	71.4	75.4	77.3	80.0	82.4	83.4	86.1	86.8
*	Getting Care Quickly (% U/A)	77.2%	12 th	72.1	76.5	79.3	80.2	82.2	83.8	84.7	87.2	88.4	24 th	70.1	72.9	77.3	78.0	80.6	83.4	84.6	87.1	88.2
	Q4. Getting urgent care	72.5%	<5 th	75.7	77.0	80.7	82.6	83.5	86.0	86.2	89.1	89.5	9 th	71.2	72.6	77.6	79.3	82.6	84.8	85.9	88.6	90.2
	Q6. Getting routine care	81.8%	60 th	70.5	72.3	76.5	78.0	80.2	83.1	83.9	87.0	89.1	62 nd	68.8	70.5	76.1	77.6	80.5	82.6	84.0	87.0	88.3
*	Q17. Coordination of Care	73.0%	<5 th	76.2	79.3	83.1	83.4	85.6	87.4	88.4	91.6	92.4	<5 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)	30.8%	12 th	28.7	30.3	34.7	37.0	39.7	42.4	44.3	50.6	55.3	9 th	28.7	31.0	35.0	36.8	40.6	43.9	45.9	52.3	56.6
*	Q33. Advised to Quit Smoking: 2YR	70.7%	22 nd	64.5	66.4	71.2	72.4	75.1	77.8	79.3	82.1	84.3	33 rd	57.2	63.0	69.6	70.7	73.6	76.3	78.7	82.3	85.7
	Q34. Discussing Cessation Meds: 2YR +	48.6%	29 th	39.9	43.7	48.2	50.3	52.9	55.8	57.1	61.6	67.2	43 rd	34.1	37.2	45.5	47.5	50.0	54.6	57.8	62.6	67.1
	Q35. Discussing Cessation Strategies: 2YR +	42.5%	24 th	37.5	39.6	42.9	45.3	47.4	50.5	52.0	58.0	60.0	36 th	30.0	33.6	40.1	41.5	45.5	49.2	51.3	58.5	61.4

	ויan ו	QC						itiles f				SPH				onal F SPH E					
Sc	core y	%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) 86	6.5%	16 th	83.9	85.0	87.2	87.9	89.2	90.7	91.1	92.2	93.3	18 th	83.7	85.1	87.3	88.2	90.0	91.2	91.9	93.6	94.8
Q24. Provided information or help 80	0.0%	19 th	76.7	77.9	81.3	81.9	83.6	85.5	86.4	88.4	89.9	21 st	75.2	77.9	80.7	81.8	84.6	86.8	87.8	90.1	91.9
Q25. Treated with courtesy and respect 93	3.0%	27 th	88.7	90.6	92.9	93.6	94.9	95.7	96.2	97.2	97.6	21 st	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	0.1%	18 th	88.0	88.9	91.0	91.4	92.4	93.3	93.9	95.2	95.7	14 th	88.4	89.1	91.1	91.9	92.8	93.8	94.2	95.4	95.8
Q12. Dr. explained things 91	1.4%	38 th	86.7	88.6	90.3	90.9	92.3	93.8	94.3	95.7	96.5	32 nd	87.7	89.0	90.9	91.5	92.8	93.9	94.4	95.9	96.6
Q13. Dr. listened carefully 87	7.9%	5 th	87.9	89.3	90.9	91.5	92.8	94.0	94.3	95.4	95.7	5 th	87.9	88.8	91.2	91.8	92.9	94.0	94.4	95.5	95.8
Q14. Dr. showed respect 94	4.8%	61 st	90.4	91.2	93.1	93.5	94.2	95.2	95.5	96.7	97.1	52 nd	89.9	91.3	93.1	93.8	94.7	95.5	96.0	96.9	97.8
Q15. Dr. spent enough time 86	6.2%	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	5.2%	33 rd	92.9	93.7	94.9	95.2	95.9	96.8	97.0	98.3	98.6	35 th	92.5	93.2	94.5	95.1	96.1	96.7	97.0	97.6	97.9



PROFILE OF SURVEY RESPONDENTS

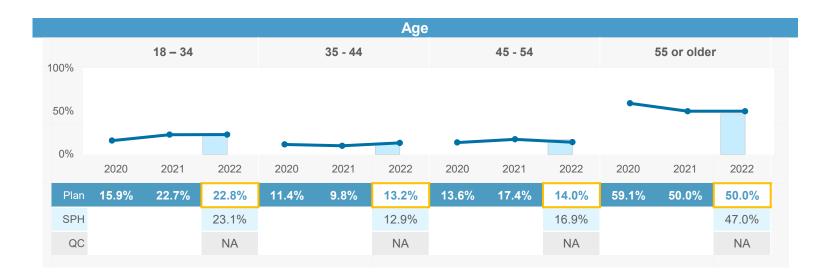
DEMOGRAPHIC COMPOSITION

Western Sky Community Care

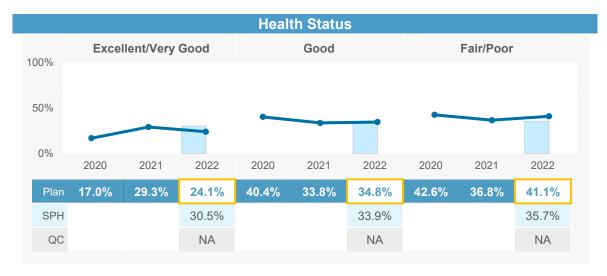


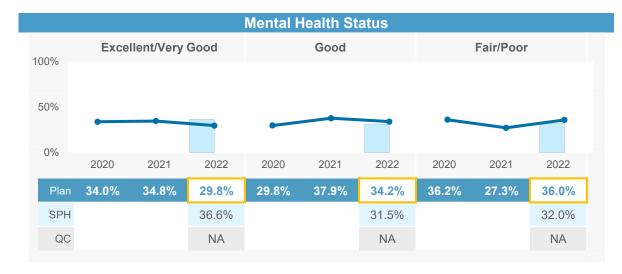
PROFILE OF SURVEY RESPONDENTS

MEDICAID ADULT

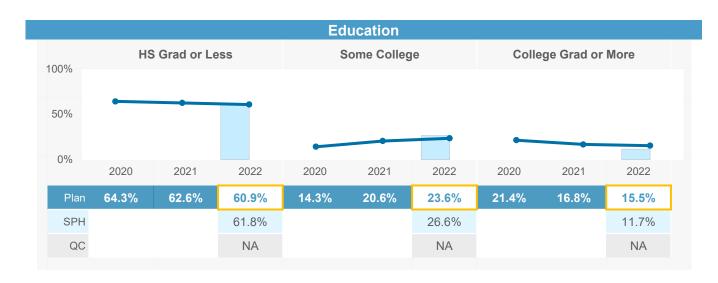


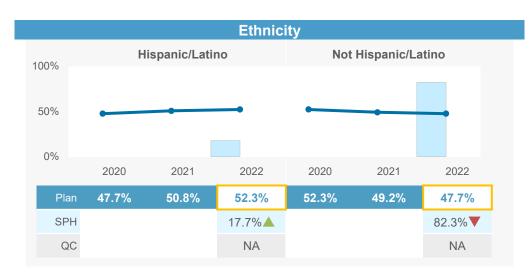


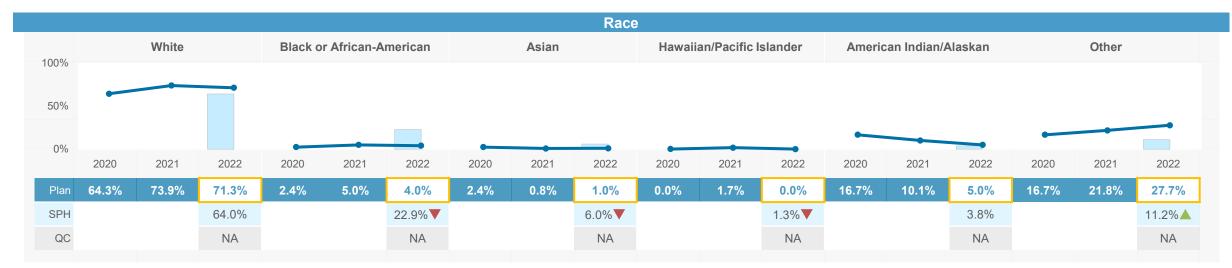












Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/♣), the 2020 score (↑/♣) or benchmark score (▲/▼).

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

Western Sky Community Care



			Category F	Responses		Sur	Summary Rate Score				
		Based on Valid Responses Per Question					2021	2022	SPH BoB		
Q41. Help with coordination of care (% Yes)	Valid Response	es = 110									
	Yes	No				(n=46)	(n=128)	(n=110)			
	36.4%	63.6%				32.6%	40.6%	36.4%			
Q43. Satisfied with help received to coordinate care (% Very Satisfied or %Satisfied)	Valid Response	es = 108									
	Very satisfied	Satisfied	Neither dissatisfied nor satisfied	Dissatisfied	<u>Very</u> <u>dissatisfied</u>	(n=42)	(n=124)	(n=108)			
	27.8%	48.1%	20.4%	0.9%	2.8%	64.3%	75.0%	75.9%			
Q44. Received material from plan about good health and how to stay healthy (% Yes)	Valid Response	es = 110									
	Yes	No				(n=45)	(n=129)	(n=110)			
	64.5%	35.5%				53.3%	64.3%	64.5%			
Q45. Received material from plan about care coordination and how to contact the care coordination unit (% Yes)	Valid Response	es = 109									
	Yes	No				(n=46)	(n=127)	(n=109)			
	52.3%	47.7%				50.0%	40.9%	52.3%			

			Category F	Responses		Sur	mmary Rate Sc	ore	2022
		Based on Valid Responses Per Question					2021	2022	SPH BoB
Q46. Sat down with Care Coordinator and created a Plan of Care (% Yes)	Valid Respons	es = 54							
	<u>Yes</u>	No				(n=46)	(n=50)	(n=54)	
	35.2%	64.8%				23.9%	42.0%	35.2%	
Q47. Satisfied with care plans (% Very satisfied + %Satisfied)	Valid Respons	es = 55							
	Very satisfied	Satisfied	Neither dissatisfied nor satisfied	Dissatisfied	<u>Very</u> <u>dissatisfied</u>	(n=43)	(n=52)	(n=55)	
	21.8%	58.2%	14.5%	5.5%	0.0%	60.5%	90.4%	80.0%	

Cumran library		ş	2022		
Survey Item		2020	2021	2022	SPH BoB
Q42. Who helped to coordinate your care					
Valid Responses	Base	(n=39)	(n=121)	(n=104)	
Someone from your health plan		10.3%	9.9%	7.7%	
Someone from your doctor's office or clinic		15.4%	32.2%	29.8%	
Someone from another organization		2.6%	3.3%	1.9%	
A friend or family member		25.6%	11.6%	14.4%	
You		46.2%	43.0%	46.2%	



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							
Q43	Satisfied with help received to coordinate care	0.4871						
Q28	Health plan overall	0.4847						
Q24	CS provided info./help	0.4785						
Q18	Personal doctor overall	0.4677						
Q22	Specialist overall	0.4628						
Q4	Got urgent care	0.4282						
Q9	Got care/tests/treatment	0.4042						
Q14	Dr. showed respect	0.3888						
Q13	Dr. listened carefully	0.3650						
Q25	CS courtesy/respect	0.3453						

	With Personal Doctor Rating	9
Q15	Dr. spent enough time	0.7662
Q13	Dr. listened carefully	0.7408
Q17	Dr. informed about care	0.7002
Q12	Dr. explained things	0.5595
Q14	Dr. showed respect	0.5324
Q8	Health care overall	0.4677
Q43	Satisfied with help received to coordinate care	0.3214
Q9	Got care/tests/treatment	0.2902
Q20	Got specialist appt.	0.2468
Q6	Got routine care	0.2456

	With Specialist Rating								
Q20	Got specialist appt.	0.5928							
Q8	Health care overall	0.4628							
Q47	Satisfied with care plans	0.3889							
Q9	Got care/tests/treatment	0.3819							
Q4	Got urgent care	0.3765							
Q17	Dr. informed about care	0.3327							
Q14	Dr. showed respect	0.2883							
Q25	CS courtesy/respect	0.2744							
Q18	Personal doctor overall	0.1991							
Q28	Health plan overall	0.1972							



APPENDIX B: QUESTIONNAIRE



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:

Yes → If Yes, Go to Question 1
 No

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 Western Sky Community 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 <u>needed care right</u>
	away?

Yes				
No →	If No,	Go to	Questio	n s

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 check-up or routine care 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 	Never Sometimes Usually Always 14. In the last 6 months, how often did your
	9 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	☐ Never ☐ Sometimes ☐ Usually ☐ Always
Υ(☐ 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

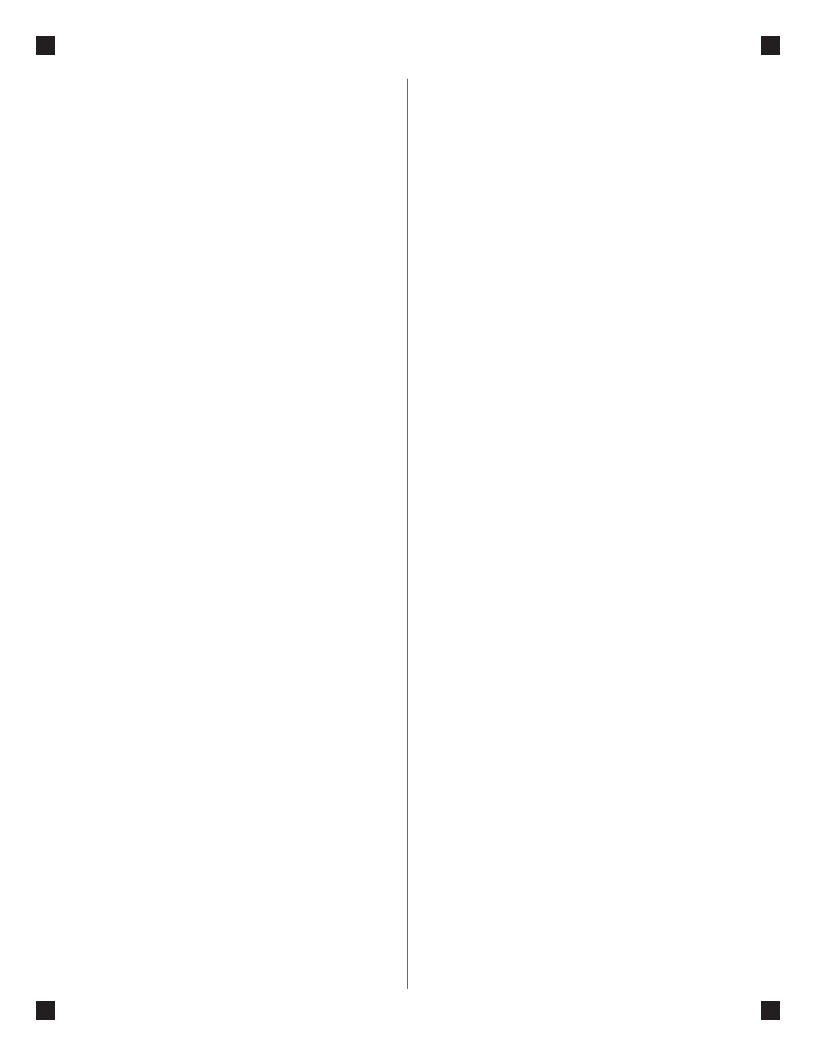
17. In the last 6 months, how often did your personal doctor seem informed and up-	21. How many specialists have you talked to in the last 6 months?
to-date about the care you got from these doctors or other health providers? Never Sometimes Usually Always	 None → If None, Go to Question 23 1 specialist 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.
	☐ Excellent ☐ Very Good ☐ Good ☐ Fair ☐ Poor	Sometimes Usually Always

35	In the last 6 months, how often did your	ADDITIONAL QUESTIONS
do m to	doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using	Now we would like to ask a few more questions about the services your health plan provides.
	tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program. Never	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?
	Sometimes Usually Always	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 What is the highest grade or level of school	 ☐ Very dissatisfied ☐ Dissatisfied ☐ Neither dissatisfied nor satisfied ☐ Satisfied
	that you have completed?	☐ 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?	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.	What is your race? Mark one or more.	Yes
	☐ White☐ Black or African-American☐ Asian	☐ No If Yes, please answer the following two questions.
	☐ Native Hawaiian or other Pacific Islander☐ American Indian or Alaska Native☐ Other	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 		
Thank You 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.



IMPROVE MEMBER EXPERIENCE AND ENGAGEMENT WITH DESCRIPTIVE AND PREDICTIVE ANALYTICS



EXPLORE

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



PREDICT

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



OUTREACH

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





STRATEGIC CONSULTING WITH BENCHMARK-DRIVEN INSIGHTS

Strategic Consulting

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.



