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Data Source: CHNCT, Inc.



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MY 2021 CAHPS[®] MEDICAID ADULT 5.1 SURVEY

HUSKY HEALTH PROGRAM (HUSKY A/C/D)



HUSKY HEALTH PROGRAM (A/C/D)

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SPH Analytics (SPH), a National Committee for Quality Assurance (NCQA) certified HEDIS® Survey Vendor, was selected by HUSKY Health program (A/C/D) to conduct its MY 2021 CAHPS® 5.1 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 Heather Nast (248-207-5682). 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 5.1 CAHPS survey was administered via the following methodology:

First questionnaire
mailed
1/28/2022



Second questionnaire
mailed
3/4/2022



Initiate follow-up calls
to non-responders
3/25/2022 - 4/8/2022



Last day to accept
completed surveys
5/23/2022

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

$$\frac{277 \text{ (Completed)}}{1755 \text{ (Sample)} - 23 \text{ (Ineligible)}} = \frac{277}{1732} = 16.0\%$$

VALID SURVEYS

	Total Number of Mail Completed =	174	(33 in Spanish)
	Total Number of Phone Completed =	62	(3 in Spanish)
	Total Number of Internet Completed =	41	(1 in Spanish)

Number of Undeliverables: 264

Note: Respondents were given the option of completing the survey in Spanish. All members selected in the sample received both an English and a Spanish mail survey. Additionally, cover letters included a telephone number for members to call and complete the survey in Spanish.

RESPONSE RATE TRENDING

		2020	2021	2022
Completed	SUBTOTAL	306	312	277
	Does not Meet Eligibility Criteria (01)	11	16	16
Ineligible	Language Barrier (03)	2	1	1
	Mentally/Physically Incapacitated (04)	5	0	1
	Deceased (05)	2	3	5
	SUBTOTAL	20	20	23
Non-response	Break-off/Incomplete (02)	14	17	15
	Refusal (06)	17	25	18
	Maximum Attempts Made (07)	1398	1381	1422
	Added to DNC List (08)	0	0	0
	SUBTOTAL	1429	1423	1455
Total Sample		1755	1755	1755
Oversampling %		30.0%	30.0%	30.0%
Response Rate		17.6%	18.0%	16.0%
SPH Response Rate		15.5%	14.8%	12.2%



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INDUSTRY TRENDS

- HUSKY Health program (A/C/D)



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

 Increase of 1% or greater since 2021
 Decrease of 1% or greater since 2021



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EXECUTIVE SUMMARY

- HUSKY Health program (A/C/D)



OVERVIEW OF TERMS

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.



277

Completed surveys

16.0%

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	65.4%	60 th	---
Rating of Health Care ★★★★★			
Rating of Health Care	61.8%	83 rd	Power
Rating of Personal Doctor ★★			
Rating of Personal Doctor	65.6%	27 th	Opportunity
Rating of Specialist ★★★			
Rating of Specialist	71.0%	68 th	Power
Flu Vaccine: 18-64 ★★★★★			
Flu Vaccine: 18-64	47.3%	77 th	---
Advised to Quit Smoking: 2YR ★★★★★			
Advised to Quit Smoking: 2YR	86.2%	96 th	---

Customer Service +			
Composite	87.8%	28 th	---
Q24. Provided information or help	80.8%	25 th	Wait
Q25. Treated with courtesy and respect	94.8%	39 th	Wait
Ease of Filling Out Forms +			
Ease of Filling Out Forms +	96.2%	54 th	Retain

Coordination of Care ★★			
Coordination of Care	81.6%	26 th	Opportunity
Getting Needed Care ★★★			
Composite	83.3%	52 nd	---
Q9. Getting care, tests, or treatment	85.0%	44 th	Opportunity
Q20. Getting specialist appointment	81.6%	60 th	Retain
Getting Care Quickly ★★★			
Composite	83.2%	66 th	---
Q4. Getting urgent care	88.4%	89 th	Power
Q6. Getting routine care	78.0%	35 th	Opportunity

How Well Doctors Communicate +			
Composite	94.2%	77 th	---
Q12. Dr. explained things	94.5%	77 th	Retain
Q13. Dr. listened carefully	95.7%	94 th	Power
Q14. Dr. showed respect	95.8%	72 nd	Retain
Q15. Dr. spent enough time	90.9%	48 th	Wait



ESTIMATED NCQA HEALTH INSURANCE PLAN RATINGS

MEDICAID ADULT

	SCORE DEFINITION	2022 BASE	2022 HPR SCORE*	HPR 4 STAR THRESHOLD	HPR PERCENTILE BAND	SPH ESTIMATED RATING
PATIENT EXPERIENCE						3
GETTING CARE						3
Getting Needed Care	Usually or Always	167	83.2%	85.7%	33 rd	3
Getting Care Quickly	Usually or Always	131	83.1%	83.7%	33 rd	3
SATISFACTION WITH PLAN PHYSICIANS						3
Rating of Personal Doctor	9 or 10	209	65.5%	71.5%	10 th	2
Rating of Specialist	9 or 10	131	70.9%	71.9%	33 rd	3
Rating of Health Care	9 or 10	191	61.7%	60.8%	67 th	4
Coordination of Care	Usually or Always	114	81.5%	87.4%	10 th	2
SATISFACTION WITH PLAN SERVICES						4
Rating of Health Plan	9 or 10	269	65.4%	64.7%	67 th	4
PREVENTION						
Flu Vaccinations Adults Ages 18-64	Yes	243	47.3%	42.4%	67 th	4
TREATMENT						
Smoking Advice: Rolling Average	Sometimes, Usually or Always	145	86.2%	77.7%	90 th	5

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 Percentile	10 th – 32 nd Percentile	33 rd – 66 th Percentile	67 th – 89 th Percentile	≥90 th Percentile

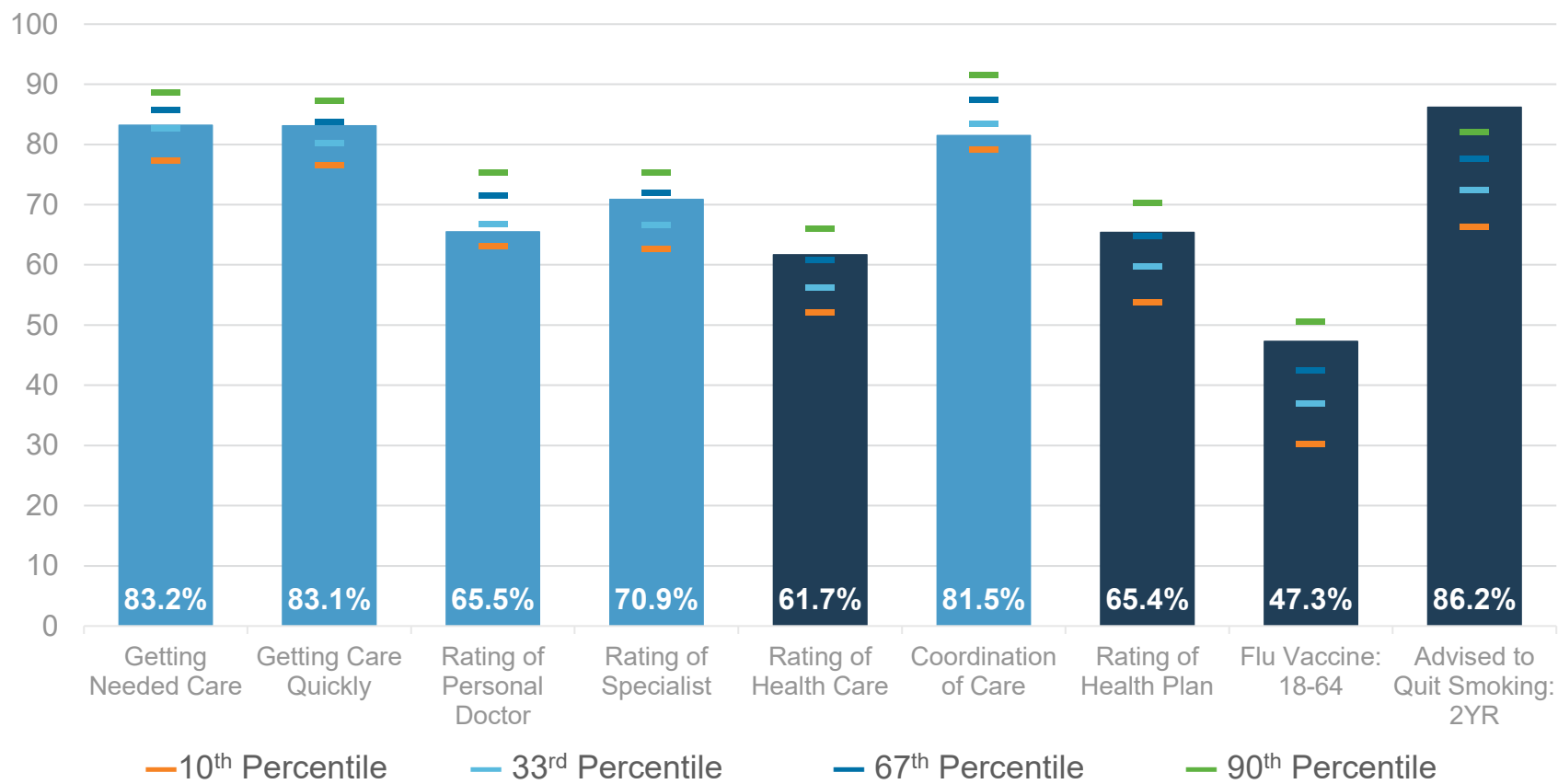
Notes:

- 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.

*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.

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





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.

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

MEASURE	SUMMARY RATE		CHANGE	2022 SPH BOOK OF BUSINESS BENCHMARK							
	2021	2022		PERCENTILE DISTRIBUTION			PERCENTILE RANK	BoB SRS			
				0	20	40	60	80	100		
Health Plan Domain											
Rating of Health Plan <i>% 9 or 10</i>	65.0%	65.4%	0.4						60 th	64.0%	
Getting Needed Care <i>% Usually or Always</i>	82.1%	83.3%	1.2						52 nd	82.3%	
Customer Service + <i>% Usually or Always</i>	86.8%	87.8%	1.0						28 th	89.7%	
Ease of Filling Out Forms + <i>% Usually or Always</i>	95.6%	96.2%	0.6						54 th	95.6%	
Health Care Domain											
Rating of Health Care <i>% 9 or 10</i>	59.1%	61.8%	2.7						83 rd	57.0%	
Getting Care Quickly <i>% Usually or Always</i>	82.5%	83.2%	0.7						66 th	80.9%	
How Well Doctors Communicate + <i>% Usually or Always</i>	94.1%	94.2%	0.1						77 th	92.7%	
Coordination of Care <i>% Usually or Always</i>	81.3%	81.6%	0.3						26 th	85.0%	
Rating of Personal Doctor <i>% 9 or 10</i>	67.7%	65.6%	-2.1						27 th	69.5%	
Rating of Specialist <i>% 9 or 10</i>	67.4%	71.0%	3.6						68 th	68.4%	

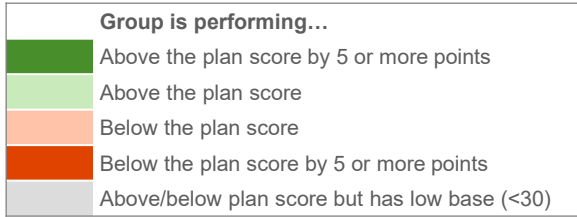
Significance Testing Current score is significantly higher/lower than the 2021 score (↑/↓) or benchmark score (▲/▼).

[More info.](#) 

MEASURE	SUMMARY RATE		CHANGE	2022 SPH BOOK OF BUSINESS BENCHMARK							
	2021	2022		PERCENTILE DISTRIBUTION			PERCENTILE RANK	BoB SRS			
				0	20	40	60	80	100		
Effectiveness of Care											
Flu Vaccine: 18-64 <i>% Yes</i>	40.4%	47.3%	6.9						77 th	41.2%	
Advised to Quit Smoking: 2YR <i>% Sometimes, Usually, or Always</i>	84.2%	86.2%	2.0						96 th	74.1% ▲	
Discussing Cessation Meds: 2YR + <i>% Sometimes, Usually, or Always</i>	61.5%	60.8%	-0.7						84 th	51.9% ▲	
Discussing Cessation Strategies: 2YR + <i>% Sometimes, Usually, or Always</i>	52.1%	48.3%	-3.8						64 th	46.4%	

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

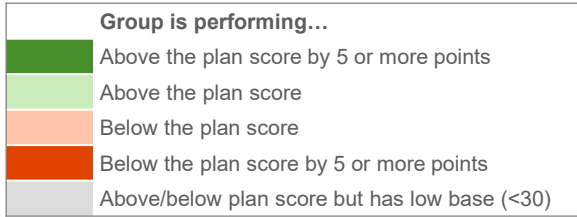
[More info.](#) 



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

[More info.](#)

			Rating of Health Plan		Rating of Health Care		Getting Needed Care		Getting Care Quickly		Coordination of Care		Flu Vaccine: 18-64	
			SRS	△	SRS	△	SRS	△	SRS	△	SRS	△	SRS	△
Demographic			65.4%		61.8%		83.3%		83.2%		81.6%		47.3%	
Gender	Male	n = 128	■	-5%	■	-5%	■	-5%	■	-8%	■	3%	■	-3%
	Female	n = 139	■	4%	■	3%	■	3%	■	7%	■	-3%	■	3%
Age	18 – 34	n = 76	■	-5%	■	-5%	■	-6%	■	-9%	■	-2%	■	-9%
	35 – 44	n = 29	■	-17%	■	-9%	■	-2%	■	-5%	■	6%	■	-18%
	45 – 54	n = 57	■	-5%	■	3%	■	1%	■	-2%	■	-6%	■	-4%
	55 or older	n = 108	■	10%	■	5%	■	4%	■	8%	■	2%	■	15%
Overall Health	Excellent/Very Good	n = 99	■	2%	■	12%	■	-3%	■	-2%	■	2%	■	-8%
	Good	n = 85	■	-4%	■	0%	■	4%	■	-1%	■	2%	■	2%
	Fair/Poor	n = 86	■	3%	■	-9%	■	0%	■	4%	■	-2%	■	7%
Mental Health	Excellent/Very Good	n = 120	■	1%	■	8%	■	7%	■	1%	■	4%	■	-3%
	Good	n = 77	■	1%	■	5%	■	-5%	■	-4%	■	-2%	■	-1%
	Fair/Poor	n = 75	■	-1%	■	-15%	■	-4%	■	6%	■	-2%	■	7%
Education	HS Grad or less	n = 153	■	3%	■	0%	■	1%	■	-1%	■	-7%	■	1%
	Some college or more	n = 113	■	-3%	■	-1%	■	-1%	■	1%	■	10%	■	1%
Race/Ethnicity	White	n = 168	■	-2%	■	-4%	■	0%	■	4%	■	-2%	■	-1%
	Black/African-American	n = 38	■	-7%	■	6%	■	-3%	■	-10%	■	8%	■	-5%
	Asian	n = 12	■	10%	■	26%	■	7%	■	10%	■	-15%	■	8%
	Native Hawaiian/Pacific Islander	n = 3	■	35%	■	-12%	■	17%	■	0%	■	18%	■	3%
	American Indian or Alaska Native	n = 13	■	19%	■	5%	■	10%	■	2%	■	2%	■	19%
	Other	n = 49	■	9%	■	8%	■	-1%	■	-7%	■	1%	■	11%
	Hispanic/Latino	n = 90	■	11%	■	8%	■	1%	■	-5%	■	-6%	■	5%



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

[More info.](#)

Demographic	Category	Total	Rating of Personal Doctor		Rating of Specialist		Customer Service +		How Well Doctors Communicate +		Ease of Filling Out Forms +	
			SRS	△	SRS	△	SRS	△	SRS	△	SRS	△
			65.6%		71.0%			87.8%		94.2%		96.2%
Gender	Male	n = 128	■	-5%	■	-10%	■	-6%	■	-2%		0%
	Female	n = 139	■	3%	■	9%	■	4%	■	2%	■	1%
Age	18 – 34	n = 76	■	-1%	■	3%	■	-1%		0%		0%
	35 – 44	n = 29	■	-12%	■	-28%	■	1%		1%	■	-4%
	45 – 54	n = 57	■	-8%	■	-2%	■	7%	■	-5%		0%
	55 or older	n = 108	■	7%	■	5%	■	-3%	■	3%	■	1%
Overall Health	Excellent/Very Good	n = 99	■	8%	■	4%	■	3%	■	1%	■	3%
	Good	n = 85	■	-8%	■	3%	■	1%		0%	■	1%
	Fair/Poor	n = 86	■	2%		0%	■	-5%	■	2%	■	-5%
Mental Health	Excellent/Very Good	n = 120	■	5%	■	15%	■	2%	■	2%	■	2%
	Good	n = 77	■	-1%	■	-3%	■	2%	■	2%	■	3%
	Fair/Poor	n = 75	■	-6%	■	-13%	■	-3%	■	-2%	■	-6%
Education	HS Grad or less	n = 153	■	-1%	■	-5%	■	-5%	■	1%	■	0%
	Some college or more	n = 113		0%	■	8%	■	5%		0%	■	-1%
Race/Ethnicity	White	n = 168	■	-1%		0%	■	3%		0%	■	2%
	Black/African-American	n = 38	■	1%	■	8%	■	-9%	■	4%	■	1%
	Asian	n = 12	■	-10%	■	29%	■	-5%	■	2%	■	-5%
	Native Hawaiian/Pacific Islander	n = 3	■	-32%	■	29%	■	12%	■	6%	■	4%
	American Indian or Alaska Native	n = 13	■	-7%	■	15%	■	12%	■	1%	■	-4%
	Other	n = 49	■	-3%	■	2%	■	1%	■	-1%	■	-1%
	Hispanic/Latino	n = 90	■	3%	■	5%	■	4%	■	2%	■	-2%

TOP THREE Performing Measures

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

MEASURE	2022 Valid n	PLAN SUMMARY RATE SCORE			2021 QC			2022 SPH BoB		
		2021	2022	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Rating of Health Care (% 9 or 10)	191	59.1%	61.8%	2.7	58.7%	3.1	72 nd	57.0%	4.8	83 rd
How Well Doctors Communicate + (% Usually or Always)	164	94.1%	94.2%	0.1	92.2%	2.0	79 th	92.7%	1.5	77 th
Rating of Specialist (% 9 or 10)	131	67.4%	71.0%	3.6	69.0%	2.0	62 nd	68.4%	2.6	68 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 Valid n	PLAN SUMMARY RATE SCORE			2021 QC			2022 SPH BoB		
		2021	2022	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Customer Service + (% Usually or Always)	98 [^]	86.8%	87.8%	1.0	88.9%	-1.1	32 nd	89.7%	-1.9	28 th
Rating of Personal Doctor (% 9 or 10)	209	67.7%	65.6%	-2.1	69.2%	-3.6	26 th	69.5%	-3.9	27 th
Coordination of Care (% Usually or Always)	114	81.3%	81.6%	0.3	85.4%	-3.8	16 th	85.0%	-3.4	26 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 – Customer Service

- Emphasize comprehensive, collaborative, and high-quality customer/member services as a critical priority across all areas of the organization. Think and act together. Establish service recovery guidelines for resolving issues, including phrases that express apologies or atonement.
- Provide on-going/periodic CSR service training, open discussions and routine refresher programs. Include thorough annual updates, tools and resources and subsequent feedback. Training examples include: how to answer questions and resolve issues; consistency in being friendly, courteous and empathetic; quick issue resolution with follow-up; procedures to minimize transfers and wait/on-hold times.
- Involve the CS team in QI activities, seeking concrete customer-based input and improvements. Ensure they are fully informed of updates/changes to processes and procedures.
- Ensure CSRs have immediate access to knowledgeable staff within all key member and provider service areas (Claims, Enrollment, etc.).
- Support key subject matter experts to flexibly respond to urgent or complex types of calls, questions or issues - including prompt prioritization and resolution procedures and/or authority.
- Develop, implement and review protocols and scripts ("Talking Points") to ensure up-to-date, accurate and consist information provided to your members and patients and providers.
- Establish, assess and adhere to measurable CSR performance/service standards (i.e., call satisfaction, call resolution, time on hold, etc.). Operationally define service behaviors.
- Seek QI opportunities with CS via observational walkthrough of calls and discussion/review of complaints, inquiries, and the member experience, especially any changes. Identify main issues and seek interventions that decrease volume and/or improve experience.
- Acknowledge and reward service performance/behaviors reflective of service excellence.

Improvement Strategies – Rating of Personal Doctor

- Analyze, investigate, and probe for weakness or QI opportunities among those measures or composites that are Key Drivers (or highly correlated) with rating of personal 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: Foster relationships with patients. Partner with them. Listen to their concerns. Treat them with compassion. Spend adequate time with them and ensure questions and concerns are answered.
- 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.).
- 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. Minimize wait times.

Improvement Strategies – Coordination of Care

- Inform, support, remind and facilitate providers about coordination of care expectations, timely notification requirements, and standards of care for post-visit 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?

Full List of Improvement Strategies 



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KEY DRIVER ANALYSIS OF RATING OF HEALTH PLAN

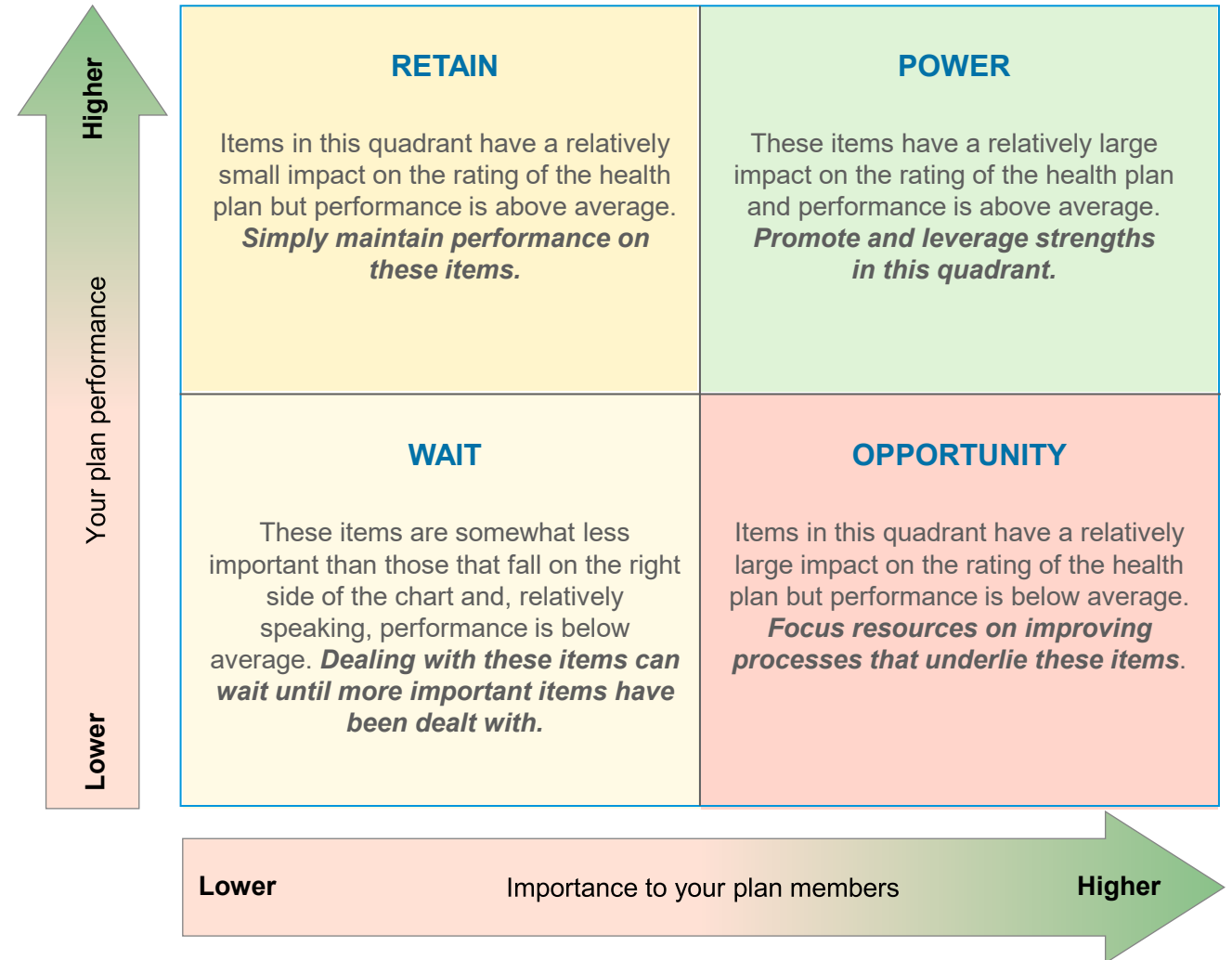
- HUSKY Health program (A/C/D)

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.

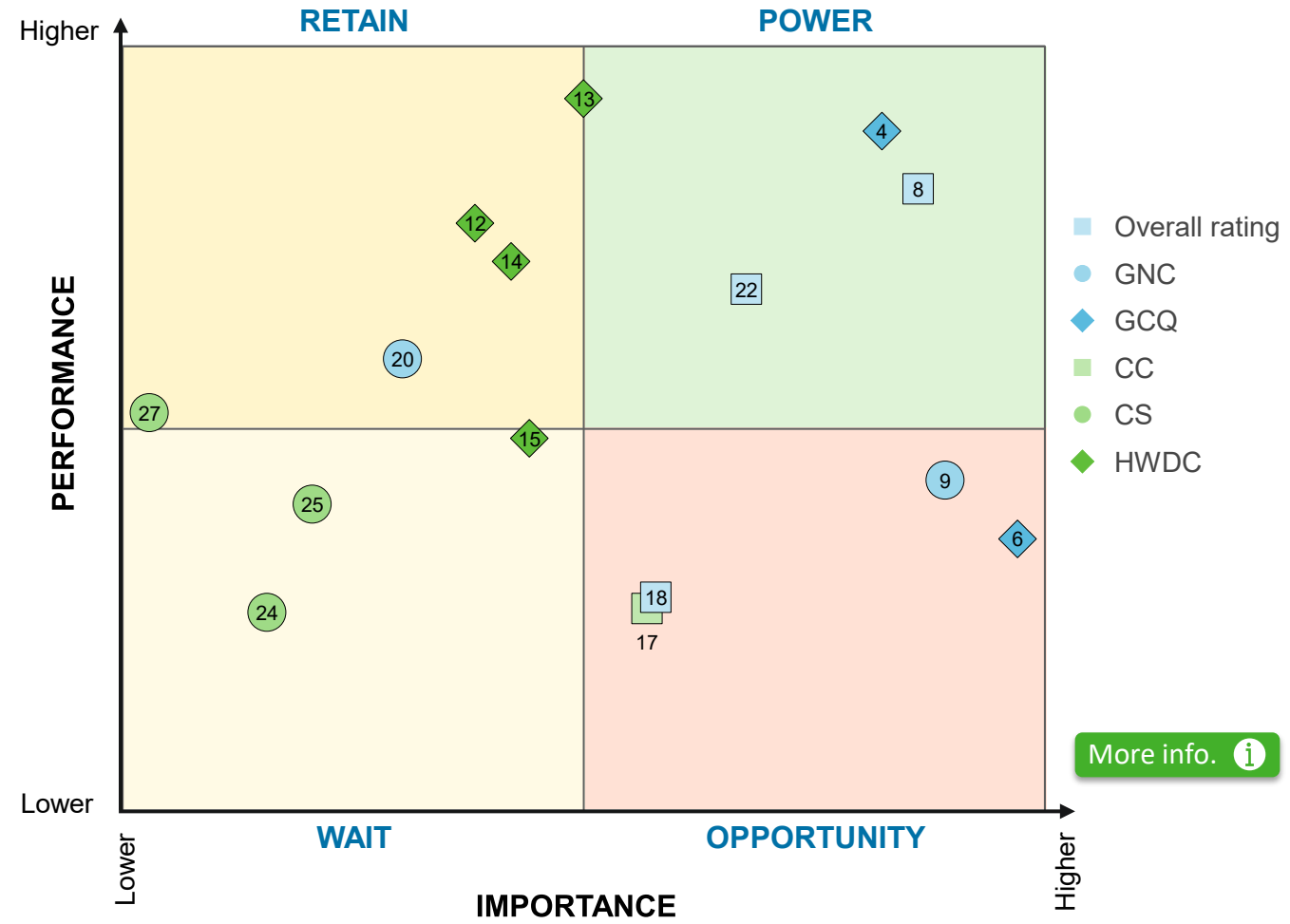
The model provides the following:

- 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.



SURVEY MEASURE		SRS	SPH %tile
POWER			
Q8	Rating of Health Care	61.8%	83 rd
Q4	Getting urgent care	88.4%	89 th
Q22	Rating of Specialist	71.0%	68 th
Q13	Dr. listened carefully	95.7%	94 th
OPPORTUNITY			
Q6	Getting routine care	78.0%	35 th
Q9	Getting care, tests, or treatment	85.0%	44 th
Q18	Rating of Personal Doctor	65.6%	27 th
Q17	Coordination of Care	81.6%	26 th
WAIT			
Q15	Dr. spent enough time	90.9%	48 th
Q25	Treated with courtesy and respect	94.8%	39 th
Q24	Provided information or help	80.8%	25 th
RETAIN			
Q14	Dr. showed respect	95.8%	72 nd
Q12	Dr. explained things	94.5%	77 th
Q20	Getting specialist appointment	81.6%	60 th
Q27	Ease of Filling Out Forms +	96.2%	54 th

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



[More info.](#)

ALIGNMENT <i>Are your key drivers typical of the industry?</i>	KEY DRIVER RANK		ATTRIBUTE	SUMMARY RATE SCORE		SPH BoB PERCENTILE	CLASSIFICATION
	YOUR PLAN	INDUSTRY		YOUR PLAN	INDUSTRY		
TOP 10 KEY DRIVERS							
			Q28	Rating of Health Plan	65.4%	64.0%	60 th
✓	1	6	Q6	Getting routine care	78.0%	80.0%	35 th Opportunity
✓	2	4	Q9	Getting care, tests, or treatment	85.0%	85.0%	44 th Opportunity
✓	3	1	Q8	Rating of Health Care	61.8%	57.0%	83 rd Power
✓	4	5	Q4	Getting urgent care	88.4%	81.7%	89 th Power
✓	5	3	Q22	Rating of Specialist	71.0%	68.4%	68 th Power
✓	6	2	Q18	Rating of Personal Doctor	65.6%	69.5%	27 th Opportunity
	7	14	Q17	Coordination of Care	81.6%	85.0%	26 th Opportunity
✓	8	8	Q13	Dr. listened carefully	95.7%	92.7%	94 th Power
	9	12	Q15	Dr. spent enough time	90.9%	90.9%	48 th Wait
✓	10	10	Q14	Dr. showed respect	95.8%	94.5%	72 nd Retain
	12	7	Q20	Getting specialist appointment	81.6%	79.6%	60 th Retain
	13	9	Q25	Treated with courtesy and respect	94.8%	95.1%	39 th Wait

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.



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MEASURE ANALYSES

Measure Details and Summary Rate Scores

- HUSKY Health program (A/C/D)

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

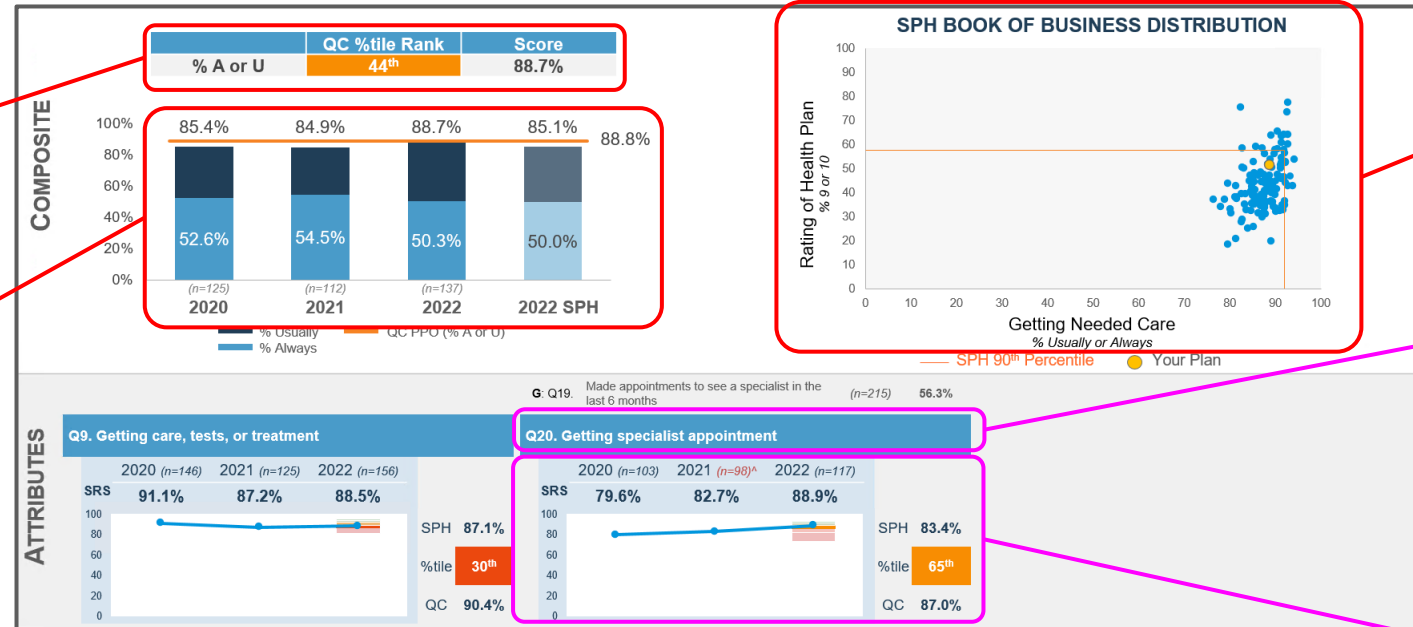
Percentile Bands	
≥90 th	
67 th – 89 th	
33 rd – 66 th	
10 th – 32 nd	
<10 th	

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

More info.

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.

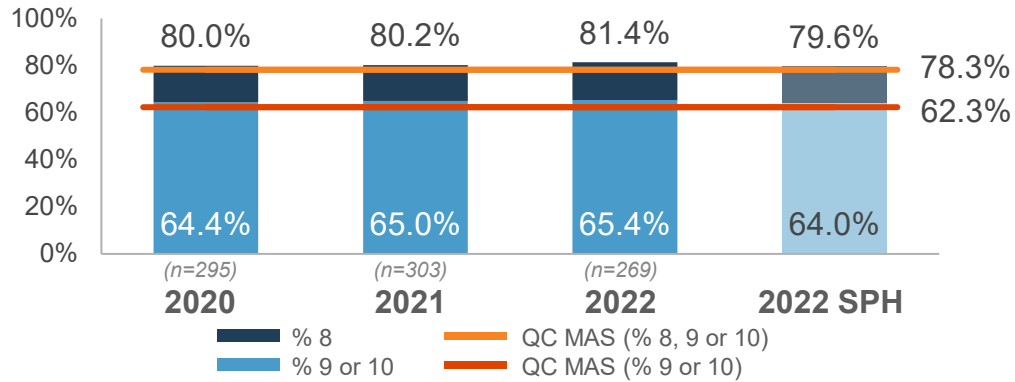
Gate questions (indicated by "G:") for attributes are displayed above attributes – scores displayed are % Yes

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

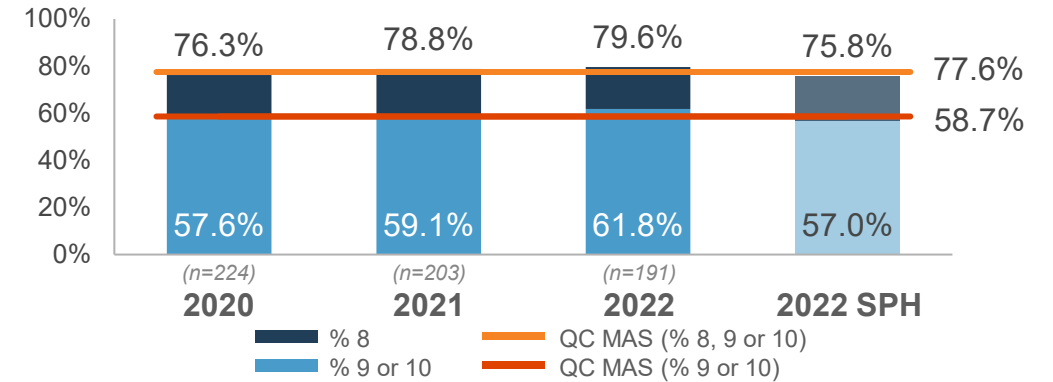
RATING OF HEALTH PLAN

	QC %tile Rank	Score
% 8, 9 or 10	72 nd	81.4%
% 9 or 10	70 th	65.4%



RATING OF HEALTH CARE

	QC %tile Rank	Score
% 8, 9 or 10	67 th	79.6%
% 9 or 10	72 nd	61.8%



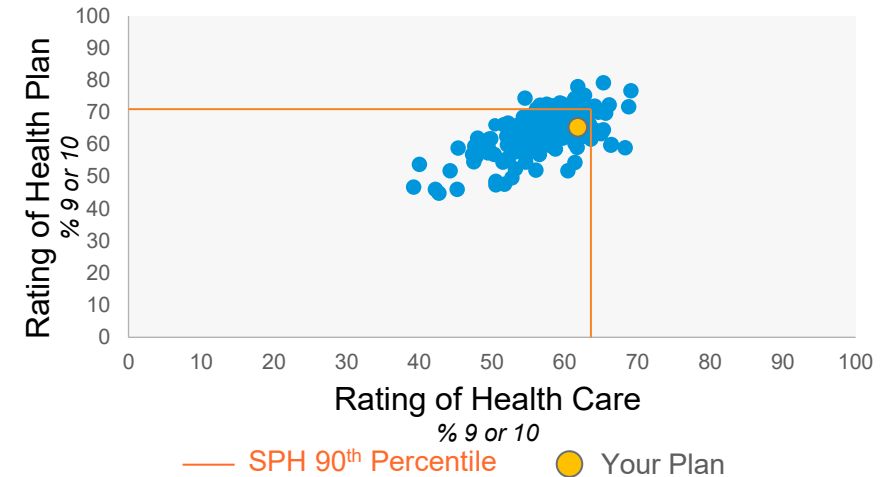
Key Drivers Of The Rating Of The Health Plan

POWER

OPPORTUNITIES

Q8	Rating of Health Care	Q6	Getting routine care
Q4	Getting urgent care	Q9	Getting care, tests, or treatment
Q22	Rating of Specialist	Q18	Rating of Personal Doctor
Q13	Dr. listened carefully	Q17	Coordination of Care

SPH BOOK OF BUSINESS DISTRIBUTION

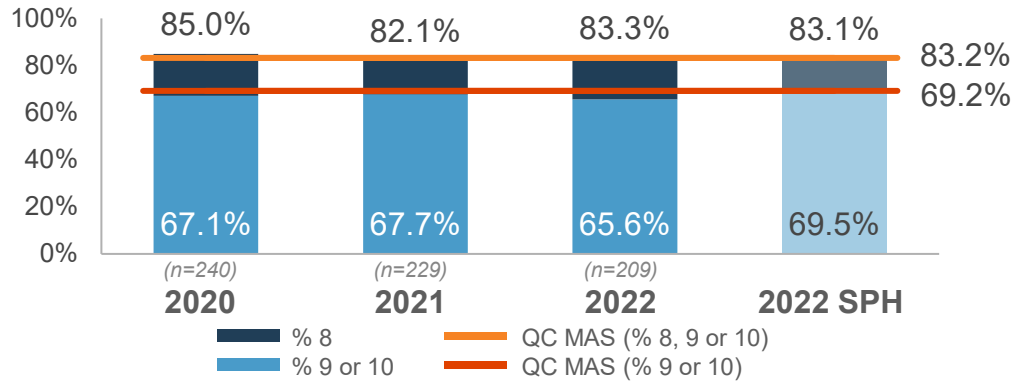


Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↔) or benchmark score (▲/▼).

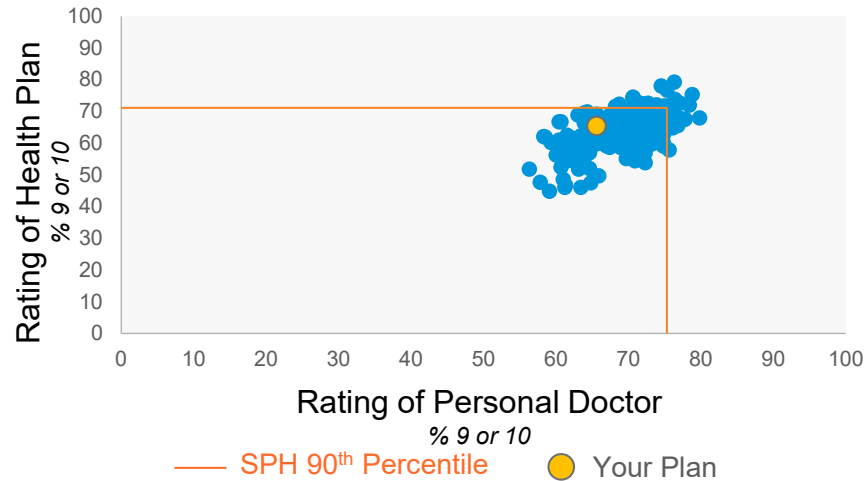
Denominator less than 100. NCQA will assign an NA to this measure.

RATING OF PERSONAL DOCTOR

	QC %tile Rank	Score
% 8, 9 or 10	53 rd	83.3%
% 9 or 10	26 th	65.6%

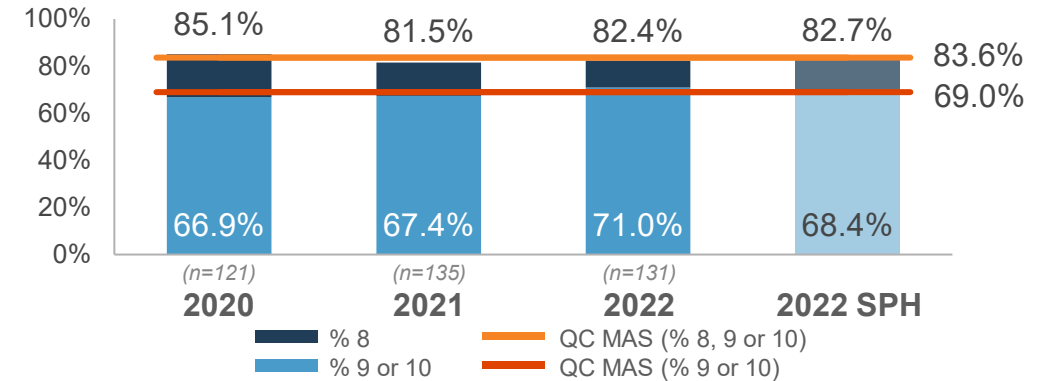


SPH BOOK OF BUSINESS DISTRIBUTION

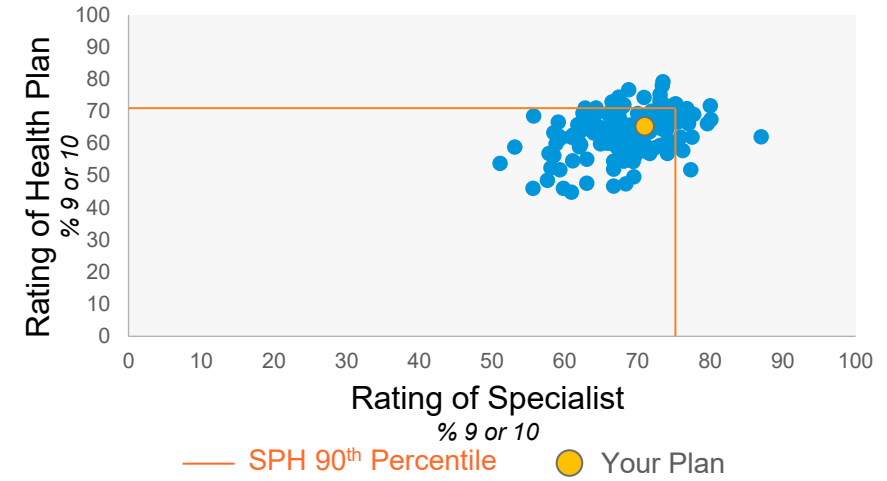


RATING OF SPECIALIST

	QC %tile Rank	Score
% 8, 9 or 10	34 th	82.4%
% 9 or 10	62 nd	71.0%



SPH BOOK OF BUSINESS DISTRIBUTION



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

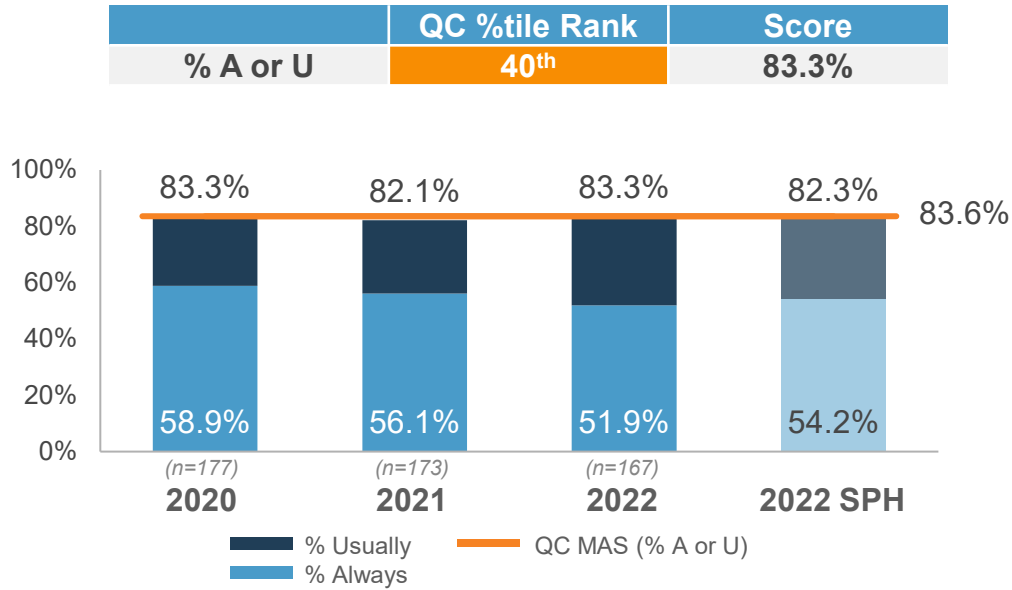
Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↕) or benchmark score (▲/▼). [^]Denominator less than 100. NCQA will assign an NA to this measure.



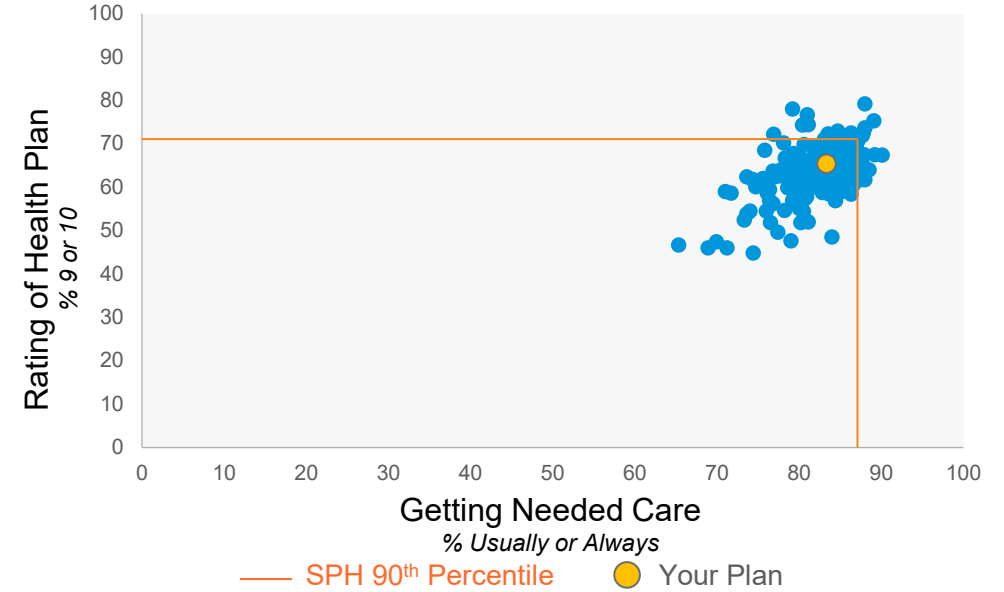
GETTING NEEDED CARE

MEDICAID ADULT

COMPOSITE



SPH BOOK OF BUSINESS DISTRIBUTION



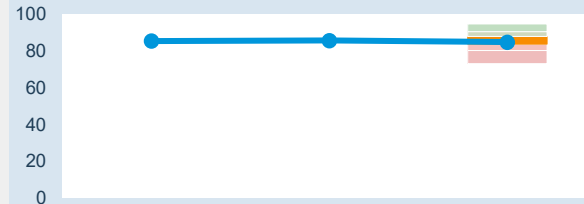
ATTRIBUTES

G: Q19. Made appointments to see a specialist in the last 6 months (n=274) 52.2%

Q9. Getting care, tests, or treatment

2020 (n=222) 2021 (n=204) 2022 (n=193)

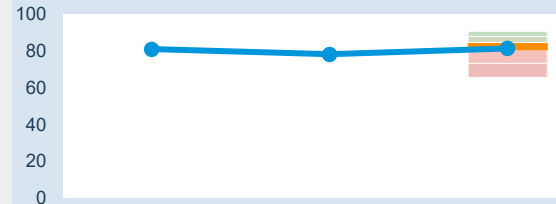
SRS 85.6% 85.8% 85.0%



Q20. Getting specialist appointment

2020 (n=132) 2021 (n=143) 2022 (n=141)

SRS 81.1% 78.3% 81.6%



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

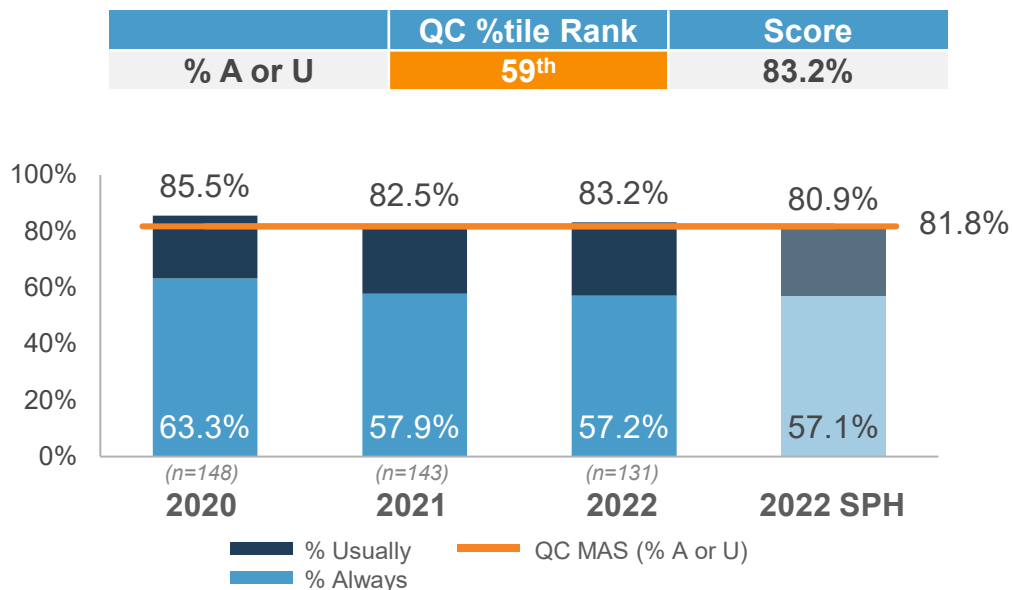
^Denominator less than 100. NCQA will assign an NA to this measure.



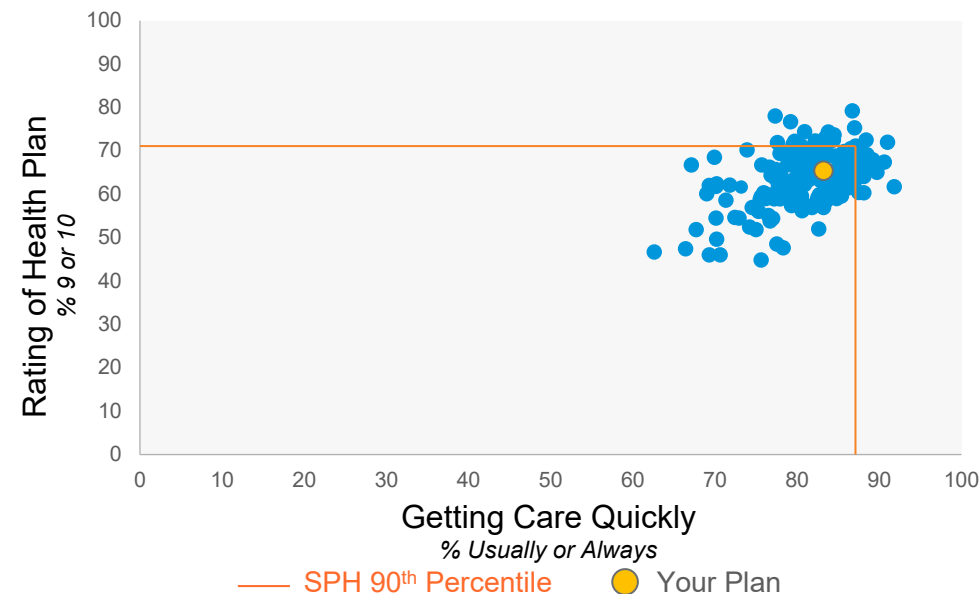
GETTING CARE QUICKLY

MEDICAID ADULT

COMPOSITE



SPH BOOK OF BUSINESS DISTRIBUTION

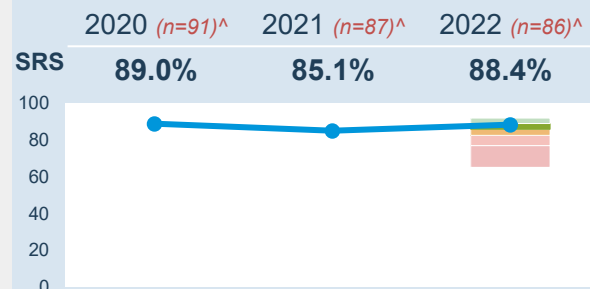


ATTRIBUTES

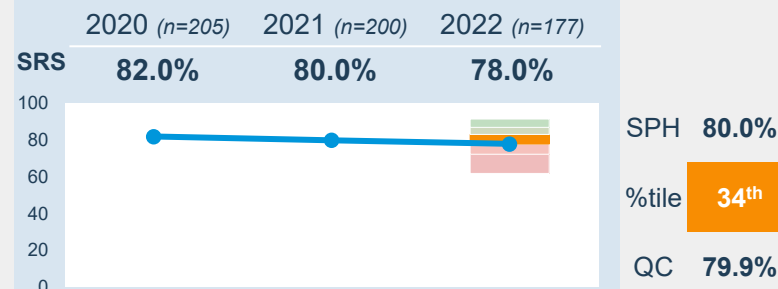
G: Q3. Had illness, injury or condition that needed care right away (n=270) 34.1%

G: Q5. Made appointments for check-ups or routine care at doctor's office or clinic (n=273) 68.1%

Q4. Getting urgent care



Q6. Getting routine care

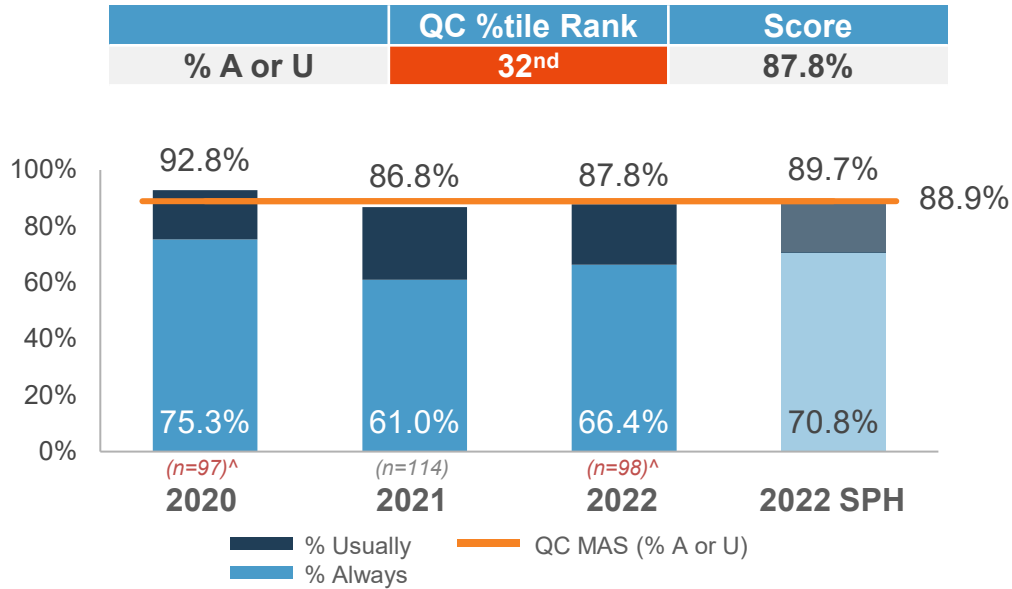


Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↕) or benchmark score (▲/▼).

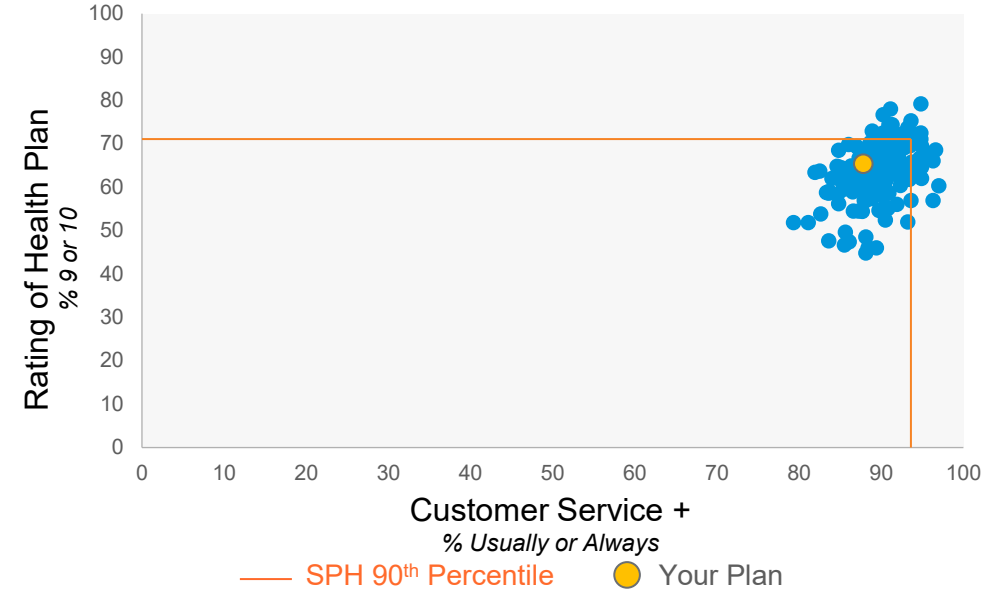
[^]Denominator less than 100. NCQA will assign an NA to this measure.



COMPOSITE



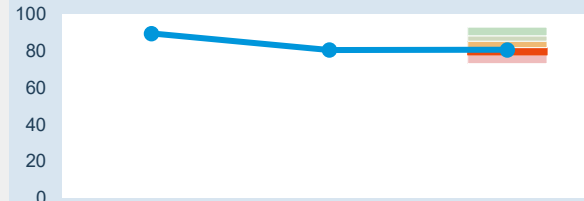
SPH BOOK OF BUSINESS DISTRIBUTION



G: Q23. Got information or help from customer service (n=269) 37.5%

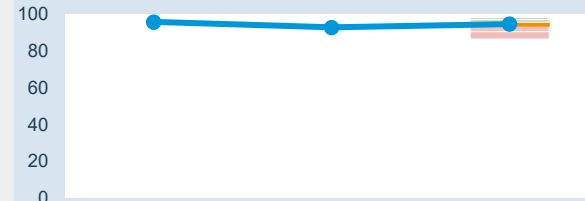
Q24. Provided information or help

SRS	2020 (n=97) [^]	2021 (n=114)	2022 (n=99) [^]
SRS	89.7%	80.7%	80.8%



Q25. Treated with courtesy and respect

SRS	2020 (n=98) [^]	2021 (n=114)	2022 (n=97) [^]
SRS	95.9%	93.0%	94.8%

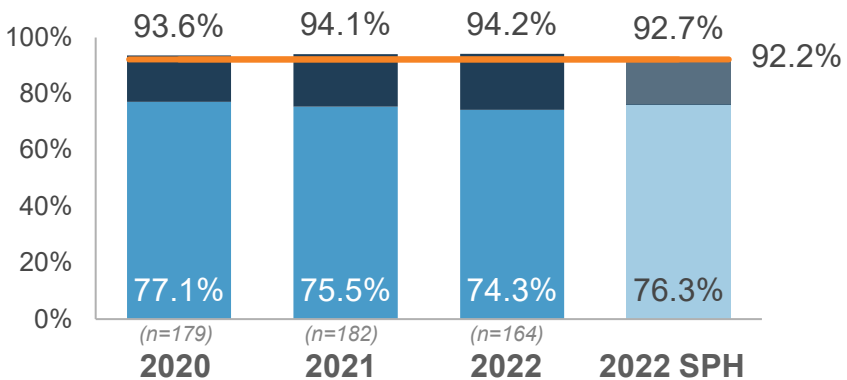


Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↕) or benchmark score (▲/▼).

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

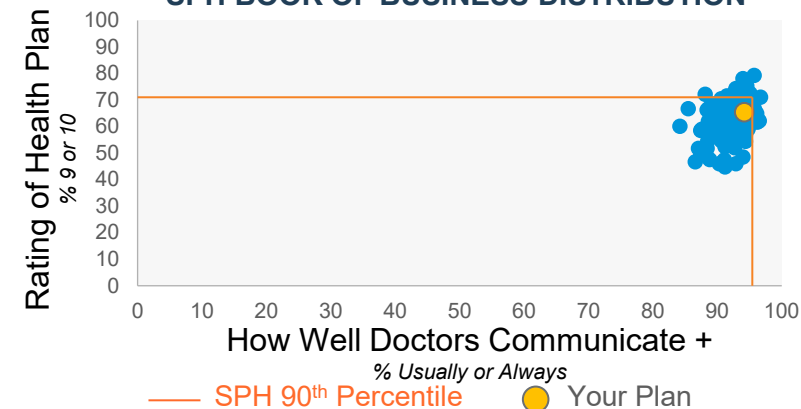
COMPOSITE

% A or U	QC %tile Rank	Score
94.2%	79 th	94.2%



■ % Always
■ % Usually
— QC MAS (% A or U)

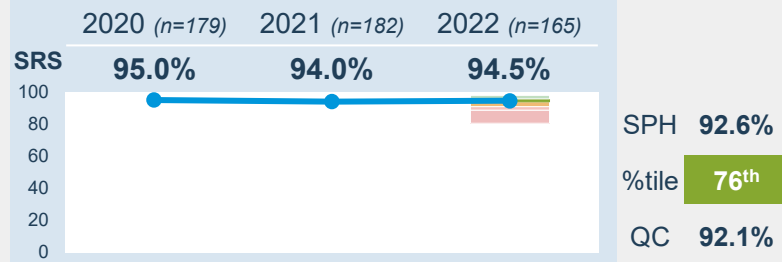
SPH BOOK OF BUSINESS DISTRIBUTION



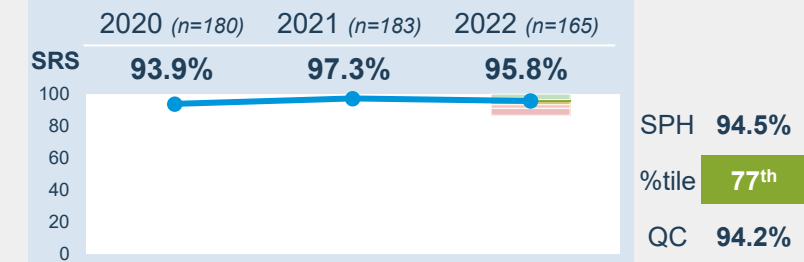
Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↕) or benchmark score (▲/▼).

ATTRIBUTES

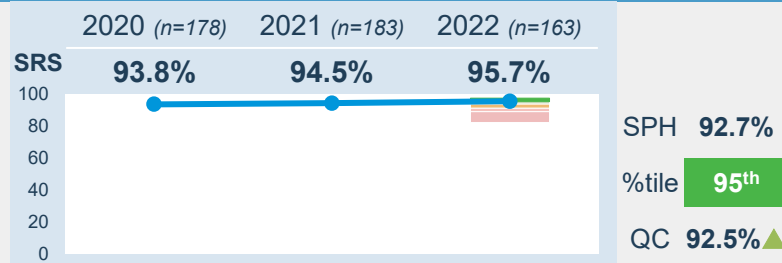
Q12. Dr. explained things



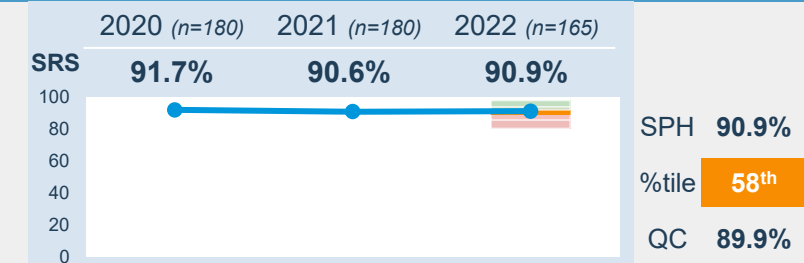
Q14. Dr. showed respect



Q13. Dr. listened carefully



Q15. Dr. spent enough time



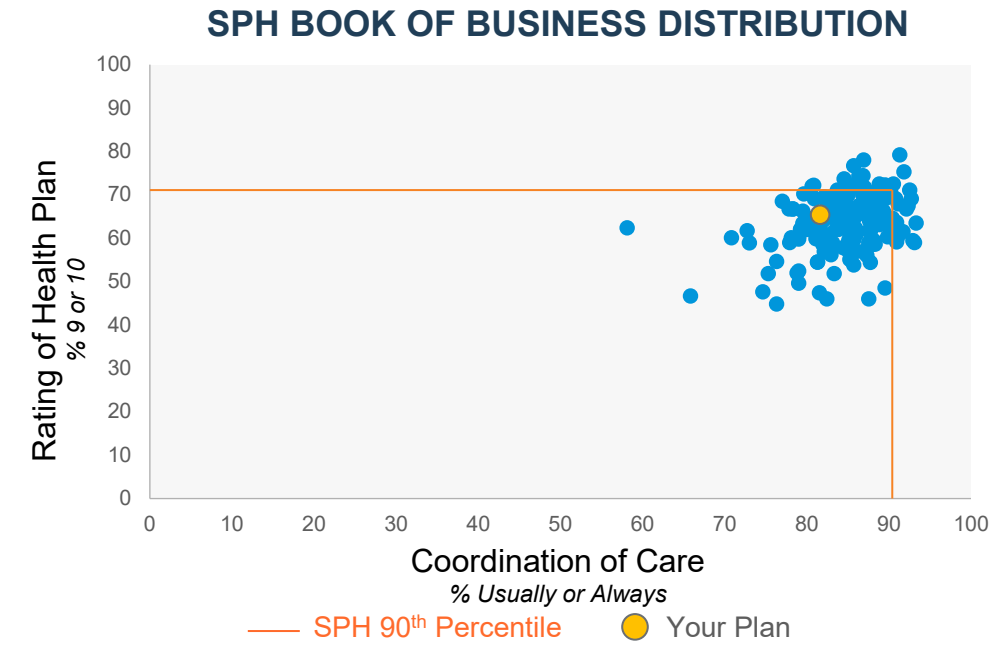
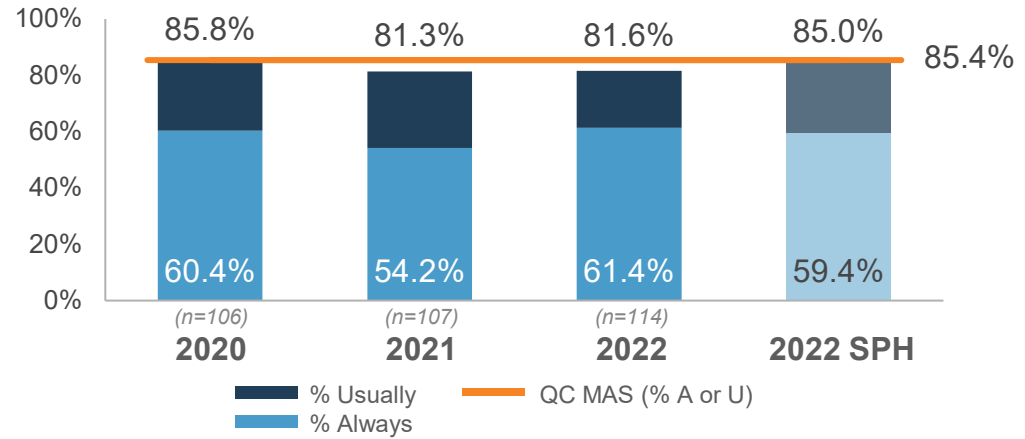
[^]Denominator less than 100. NCQA will assign an NA to this measure.



COORDINATION OF CARE

MEDICAID ADULT

	QC %tile Rank	Score
% A or U	16 th	81.6%



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.



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SUMMARY OF TREND AND BENCHMARKS

- HUSKY Health program (A/C/D)

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

Summary Rate Scores: Shows how your plan's composite and key question Summary Rates compare to 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.

Plan Percentile Rankings: 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	<ul style="list-style-type: none"> Is presented in NCQA's The State of Health Care Quality 	<ul style="list-style-type: none"> Utilized by SPH Analytics to calculate approximate percentile ranking of plan scores in relation to the Quality Compass[®] All Plans benchmark 	<ul style="list-style-type: none"> Provides a benchmark for each question from the survey Permits precise percentile ranking of plan compared to benchmark
CONS	<ul style="list-style-type: none"> Only contains benchmarks for certain key questions, composites, and rating questions 	<ul style="list-style-type: none"> Only contains benchmarks for certain key questions, composites, and rating questions 	<ul style="list-style-type: none"> 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	269	64.4%	65.0%	65.4%	64.0%	62.3%
★ Q8. Rating of Health Care	191	57.6%	59.1%	61.8%	57.0%	58.7%
★ Q18. Rating of Personal Doctor	209	67.1%	67.7%	65.6%	69.5%	69.2%
★ Q22. Rating of Specialist	131	66.9%	67.4%	71.0%	68.4%	69.0%
Rating Questions (% 8, 9 or 10)						
Q28. Rating of Health Plan	269	80.0%	80.2%	81.4%	79.6%	78.3%
Q8. Rating of Health Care	191	76.3%	78.8%	79.6%	75.8%	77.6%
Q18. Rating of Personal Doctor	209	85.0%	82.1%	83.3%	83.1%	83.2%
Q22. Rating of Specialist	131	85.1%	81.5%	82.4%	82.7%	83.6%
★ Getting Needed Care (% Usually or Always)	167	83.3%	82.1%	83.3%	82.3%	83.6%
Q9. Getting care, tests, or treatment	193	85.6%	85.8%	85.0%	85.0%	85.5%
Q20. Getting specialist appointment	141	81.1%	78.3%	81.6%	79.6%	81.8%
★ Getting Care Quickly (% Usually or Always)	131	85.5%	82.5%	83.2%	80.9%	81.8%
Q4. Getting urgent care	86 [^]	89.0%	85.1%	88.4%	81.7%	83.1%
Q6. Getting routine care	177	82.0%	80.0%	78.0%	80.0%	79.9%
★ Q17. Coordination of Care	114	85.8%	81.3%	81.6%	85.0%	85.4%
Effectiveness of Care (% Sometimes, Usually, or Always)						
★ Q31. Flu Vaccine: 18-64 (% Yes)	243	47.8%	40.4%	47.3%	41.2%	40.0% ▲
★ Q33. Advised to Quit Smoking: 2YR	145	78.6%	84.2%	86.2%	74.1% ▲	74.8% ▲
Q34. Discussing Cessation Meds: 2YR +	143	53.6%	61.5%	60.8%	51.9% ▲	53.1%
Q35. Discussing Cessation Strategies: 2YR +	143	45.0%	52.1%	48.3%	46.4%	48.0%

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.



SUMMARY RATE SCORES

MEDICAID ADULT

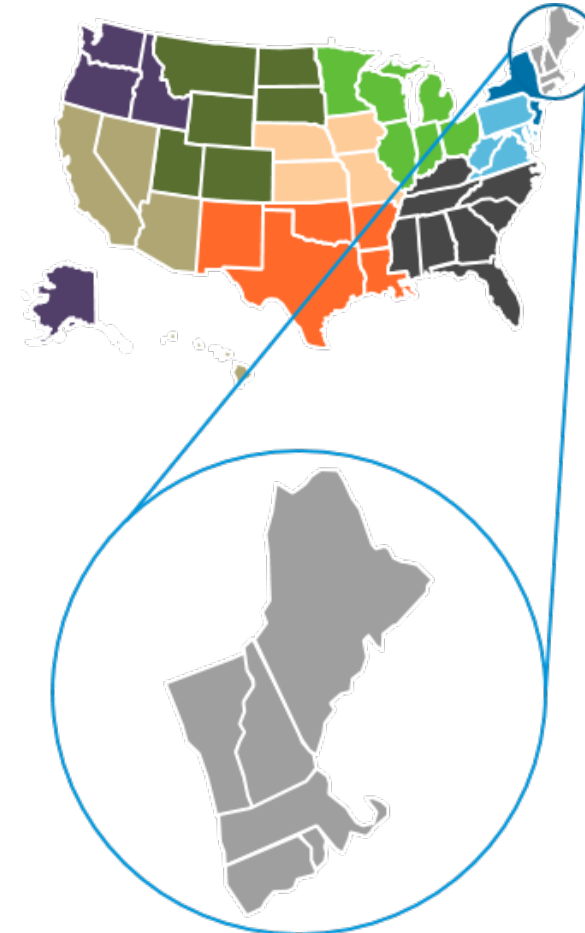
	2022 Valid n	2020	2021	2022	2022 SPH BoB	2021 QC
Customer Service + (% Usually or Always)	98[^]	92.8%	86.8%	87.8%	89.7%	88.9%
Q24. Provided information or help	99 [^]	89.7%	80.7%	80.8%	84.3%	83.5%
Q25. Treated with courtesy and respect	97 [^]	95.9%	93.0%	94.8%	95.1%	94.3%
How Well Doctors Communicate + (% Usually or Always)	164	93.6%	94.1%	94.2%	92.7%	92.2%
Q12. Dr. explained things	165	95.0%	94.0%	94.5%	92.6%	92.1%
Q13. Dr. listened carefully	163	93.8%	94.5%	95.7%	92.7%	92.5% ▲
Q14. Dr. showed respect	165	93.9%	97.3%	95.8%	94.5%	94.2%
Q15. Dr. spent enough time	165	91.7%	90.6%	90.9%	90.9%	89.9%
Q27. Ease of Filling Out Forms + (% Usually or Always)	261	95.4%	95.6%	96.2%	95.6%	95.9%

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.

	SUMMARY RATE	2022 SPH BoB REGION
Rating Questions (% 9 or 10)		
★ Q28. Rating of Health Plan	65.4%	68.4%
★ Q8. Rating of Health Care	61.8%	58.9%
★ Q18. Rating of Personal Doctor	65.6%	69.0%
★ Q22. Rating of Specialist	71.0%	68.7%
Rating Questions (% 8, 9 or 10)		
Q28. Rating of Health Plan	81.4%	83.3%
Q8. Rating of Health Care	79.6%	77.8%
Q18. Rating of Personal Doctor	83.3%	81.9%
Q22. Rating of Specialist	82.4%	85.0%
★ Getting Needed Care (% Usually or Always)	83.3%	81.7%
Q9. Getting care, tests, or treatment	85.0%	84.7%
Q20. Getting specialist appointment	81.6%	78.7%
★ Getting Care Quickly (% Usually or Always)	83.2%	79.5%
Q4. Getting urgent care	88.4%	81.0% ❖
Q6. Getting routine care	78.0%	78.1%
★ Q17. Coordination of Care	81.6%	85.9%
Effectiveness of Care (% Sometimes, Usually, or Always)		
★ Q31. Flu Vaccine: 18-64 (% Yes)	47.3%	46.8%
★ Q33. Advised to Quit Smoking: 2YR	86.2%	74.9% ❖
Q34. Discussing Cessation Meds: 2YR +	60.8%	58.2%
Q35. Discussing Cessation Strategies: 2YR +	48.3%	52.9%

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



Region 1: Boston

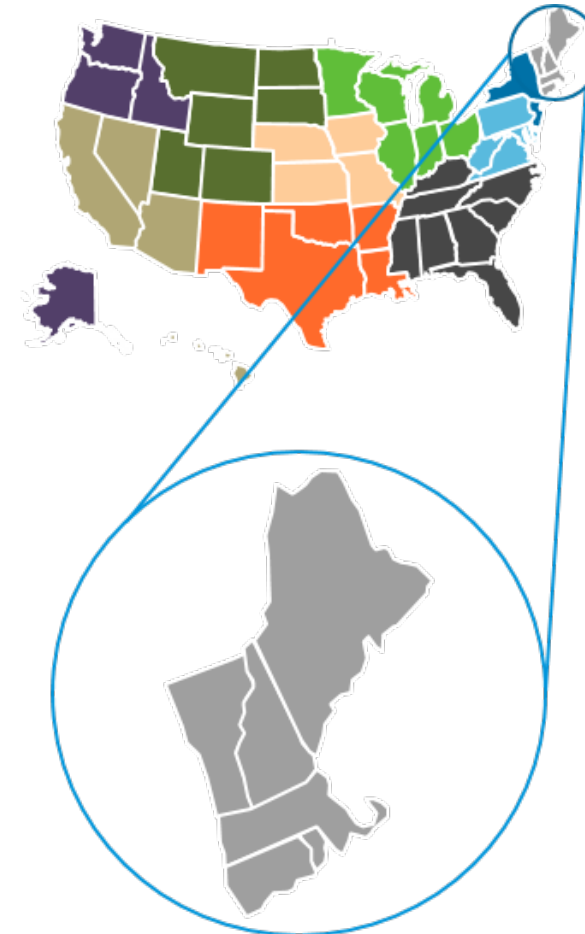
- Connecticut
- Maine
- Rhode Island
- Massachusetts
- New Hampshire
- Vermont

Significance Testing

Current year score is significantly higher/lower (❖/❖) than the 2022 SPH BoB Region score.

	SUMMARY RATE	2022 SPH BoB REGION
Customer Service + (% Usually or Always)	87.8%	89.0%
Q24. Provided information or help	80.8%	83.2%
Q25. Treated with courtesy and respect	94.8%	94.7%
How Well Doctors Communicate + (% Usually or Always)	94.2%	92.7%
Q12. Dr. explained things	94.5%	92.4%
Q13. Dr. listened carefully	95.7%	93.4%
Q14. Dr. showed respect	95.8%	94.8%
Q15. Dr. spent enough time	90.9%	90.3%
Q27. Ease of Filling Out Forms + (% Usually or Always)	96.2%	94.2%

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



Region 1: Boston

- Connecticut
- Maine
- Rhode Island
- Massachusetts
- New Hampshire
- Vermont

Significance Testing

Current year score is significantly higher/lower (◆/◆) than the 2022 SPH BoB Region score.



PERCENTILE RANKINGS

MEDICAID ADULT

	2022 Plan Score	QC %tile	National Percentiles from 2021 Quality Compass									SPH %tile	National Percentiles from 2022 SPH Book of Business								
			5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th		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	65.4%	70 th	52.4	53.9	58.1	59.8	62.3	64.7	66.2	70.3	72.2	60 th	51.8	54.7	59.6	61.5	64.0	66.3	67.9	71.1	72.5
★ Q8. Rating of Health Care	61.8%	72 nd	50.6	52.2	54.9	56.4	58.3	60.8	62.3	66.2	67.5	83 rd	47.5	49.5	53.6	54.8	56.9	59.2	61.0	63.6	65.2
★ Q18. Rating of Personal Doctor	65.6%	26 th	60.6	63.2	65.5	66.9	69.2	71.6	72.8	75.4	77.3	27 th	60.4	61.8	64.9	67.4	69.8	72.0	72.7	75.3	76.3
★ Q22. Rating of Specialist	71.0%	62 nd	60.6	62.8	65.1	66.7	69.3	71.9	73.8	75.5	76.2	68 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	81.4%	72 nd	71.0	72.5	74.8	76.0	78.6	80.6	82.0	84.8	86.6	62 nd	70.9	72.5	76.1	77.5	80.1	81.7	82.5	85.2	86.7
Q8. Rating of Health Care	79.6%	67 th	70.4	71.3	75.2	76.5	77.7	79.5	80.7	83.1	84.3	81 st	67.5	70.2	73.0	74.1	76.2	77.8	78.9	81.1	83.3
Q18. Rating of Personal Doctor	83.3%	53 rd	77.0	78.9	81.0	81.7	83.1	84.8	85.6	88.3	89.1	53 rd	76.8	77.6	80.2	81.1	83.1	85.0	85.7	87.6	88.3
Q22. Rating of Specialist	82.4%	34 th	77.4	79.3	81.1	82.2	84.0	85.4	86.0	87.7	88.8	48 th	75.5	76.9	79.6	80.7	82.5	84.6	85.7	87.1	88.6
★ Getting Needed Care (% U/A)	83.3%	40th	75.0	77.5	81.1	82.6	84.1	85.8	86.5	88.6	89.3	52nd	73.7	76.0	79.3	80.3	82.9	84.7	85.2	87.1	87.8
Q9. Getting care, tests, or treatment	85.0%	43 rd	76.8	80.4	82.6	83.8	85.8	88.0	89.0	90.6	91.5	44 th	77.2	78.9	82.1	83.3	85.7	86.6	87.6	89.5	91.3
Q20. Getting specialist appointment	81.6%	37 th	72.1	73.5	78.3	80.7	83.2	84.8	85.1	88.0	88.8	60 th	67.2	71.4	75.4	77.3	80.0	82.4	83.4	86.1	86.8
★ Getting Care Quickly (% U/A)	83.2%	59th	72.1	76.5	79.3	80.2	82.2	83.8	84.7	87.2	88.4	66th	70.1	72.9	77.3	78.0	80.6	83.4	84.6	87.1	88.2
Q4. Getting urgent care	88.4%	86 th	75.7	77.0	80.7	82.6	83.5	86.0	86.2	89.1	89.5	89 th	71.2	72.6	77.6	79.3	82.6	84.8	85.9	88.6	90.2
Q6. Getting routine care	78.0%	34 th	70.5	72.3	76.5	78.0	80.2	83.1	83.9	87.0	89.1	35 th	68.8	70.5	76.1	77.6	80.5	82.6	84.0	87.0	88.3
★ Q17. Coordination of Care	81.6%	16th	76.2	79.3	83.1	83.4	85.6	87.4	88.4	91.6	92.4	26th	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)	47.3%	83 rd	28.7	30.3	34.7	37.0	39.7	42.4	44.3	50.6	55.3	77 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	86.2%	97 th	64.5	66.4	71.2	72.4	75.1	77.8	79.3	82.1	84.3	96 th	57.2	63.0	69.6	70.7	73.6	76.3	78.7	82.3	85.7
Q34. Discussing Cessation Meds: 2YR +	60.8%	88 th	39.9	43.7	48.2	50.3	52.9	55.8	57.1	61.6	67.2	84 th	34.1	37.2	45.5	47.5	50.0	54.6	57.8	62.6	67.1
Q35. Discussing Cessation Strategies: 2YR +	48.3%	54 th	37.5	39.6	42.9	45.3	47.4	50.5	52.0	58.0	60.0	64 th	30.0	33.6	40.1	41.5	45.5	49.2	51.3	58.5	61.4



PERCENTILE RANKINGS

MEDICAID ADULT

	2022 Plan Score	QC %tile	National Percentiles from 2021 Quality Compass									SPH %tile	National Percentiles from 2022 SPH Book of Business								
			5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th		5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
Customer Service + (% U/A)	87.8%	32nd	83.9	85.0	87.2	87.9	89.2	90.7	91.1	92.2	93.3	28th	83.7	85.1	87.3	88.2	90.0	91.2	91.9	93.6	94.8
Q24. Provided information or help	80.8%	20 th	76.7	77.9	81.3	81.9	83.6	85.5	86.4	88.4	89.9	25 th	75.2	77.9	80.7	81.8	84.6	86.8	87.8	90.1	91.9
Q25. Treated with courtesy and respect	94.8%	48 th	88.7	90.6	92.9	93.6	94.9	95.7	96.2	97.2	97.6	39 th	89.9	91.4	93.6	94.1	95.5	96.2	97.1	98.4	98.6
How Well Doctors Communicate + (% U/A)	94.2%	79th	88.0	88.9	91.0	91.4	92.4	93.3	93.9	95.2	95.7	77th	88.4	89.1	91.1	91.9	92.8	93.8	94.2	95.4	95.8
Q12. Dr. explained things	94.5%	76 th	86.7	88.6	90.3	90.9	92.3	93.8	94.3	95.7	96.5	77 th	87.7	89.0	90.9	91.5	92.8	93.9	94.4	95.9	96.6
Q13. Dr. listened carefully	95.7%	95 th	87.9	89.3	90.9	91.5	92.8	94.0	94.3	95.4	95.7	94 th	87.9	88.8	91.2	91.8	92.9	94.0	94.4	95.5	95.8
Q14. Dr. showed respect	95.8%	77 th	90.4	91.2	93.1	93.5	94.2	95.2	95.5	96.7	97.1	72 nd	89.9	91.3	93.1	93.8	94.7	95.5	96.0	96.9	97.8
Q15. Dr. spent enough time	90.9%	58 th	83.6	85.4	88.0	88.9	90.3	91.7	92.2	93.7	94.7	48 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)	96.2%	54th	92.9	93.7	94.9	95.2	95.9	96.8	97.0	98.3	98.6	54th	92.5	93.2	94.5	95.1	96.1	96.7	97.0	97.6	97.9

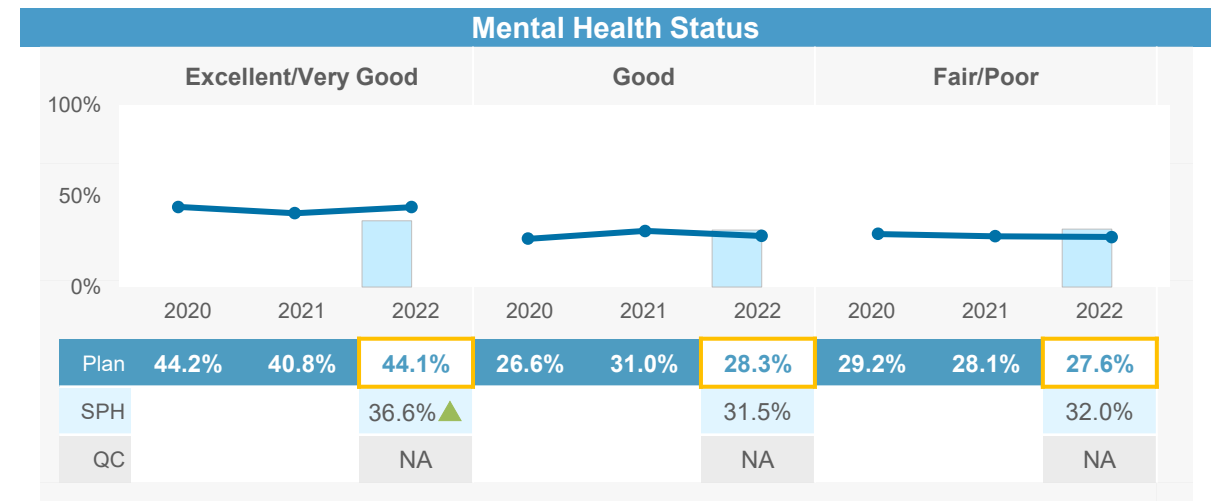
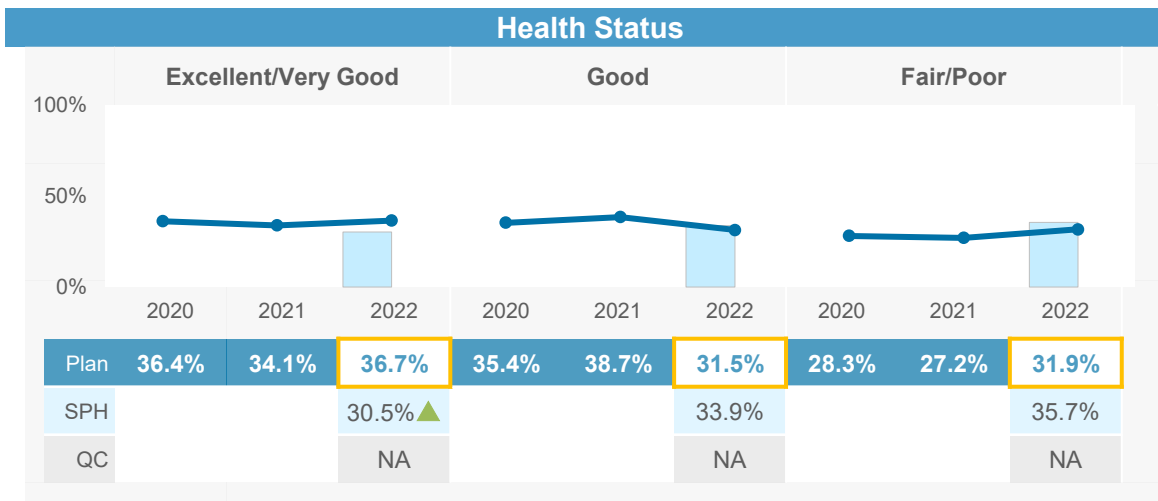
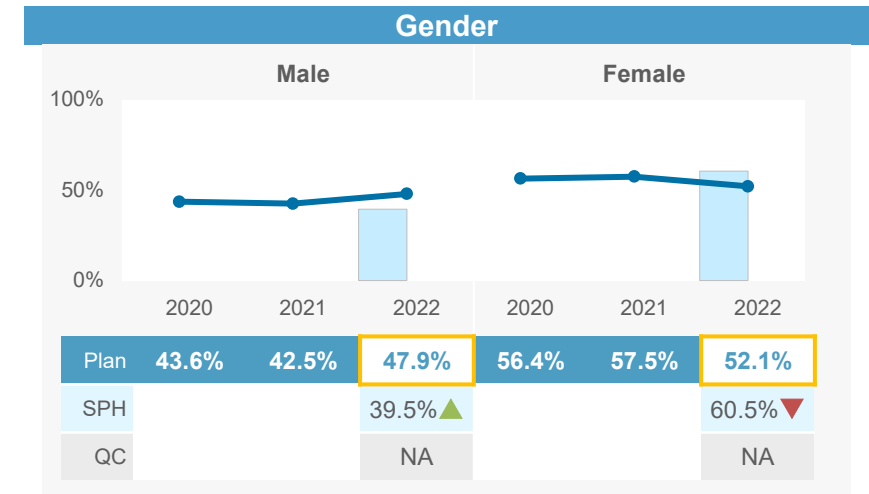
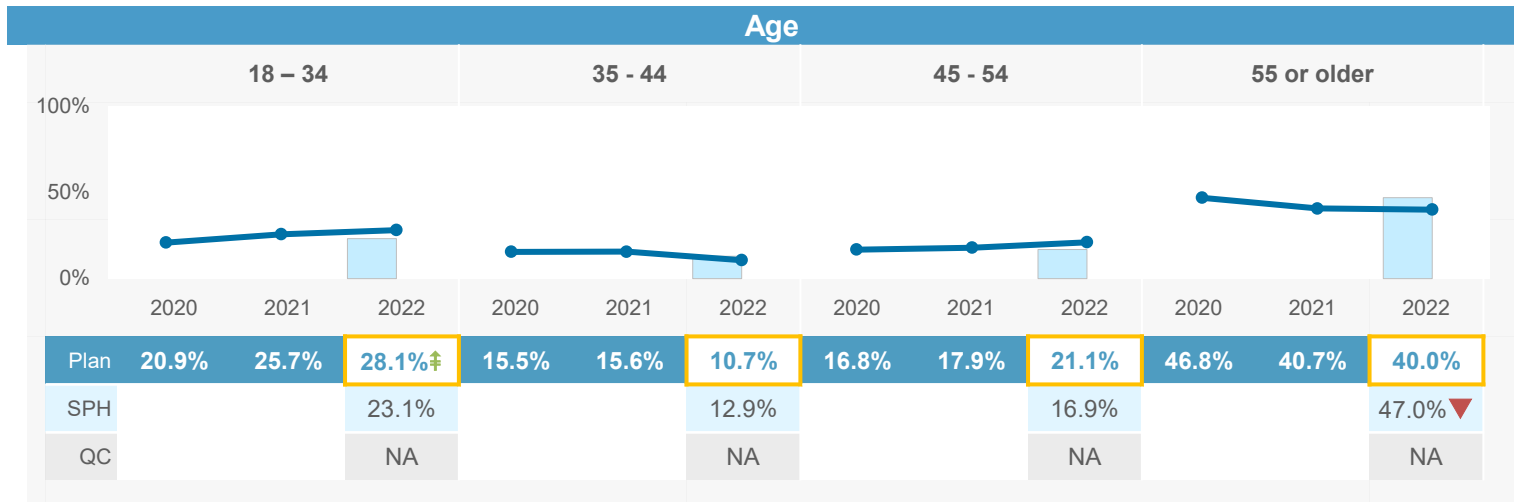


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PROFILE OF SURVEY RESPONDENTS

DEMOGRAPHIC COMPOSITION

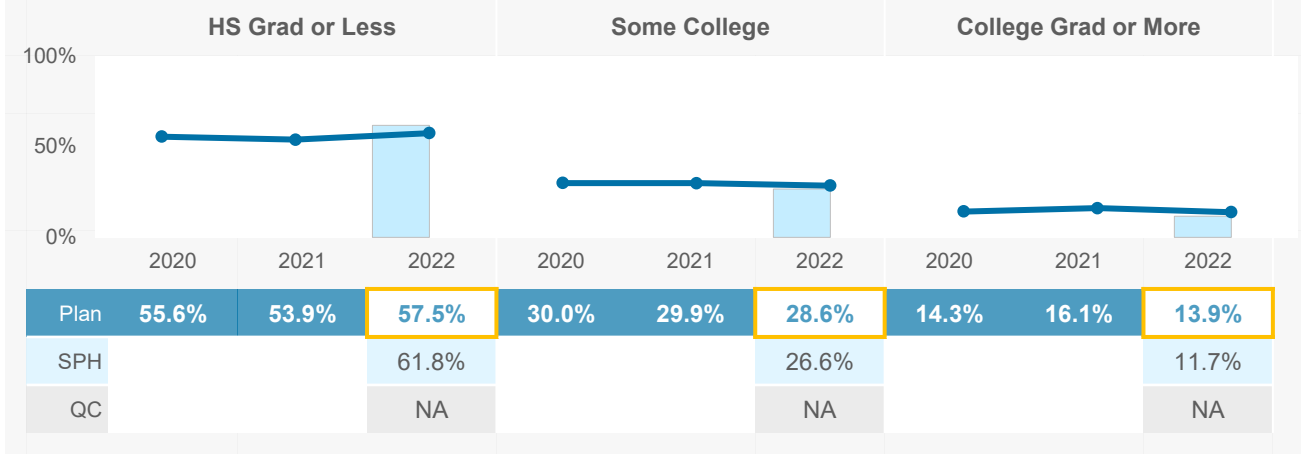
- HUSKY Health program (A/C/D)



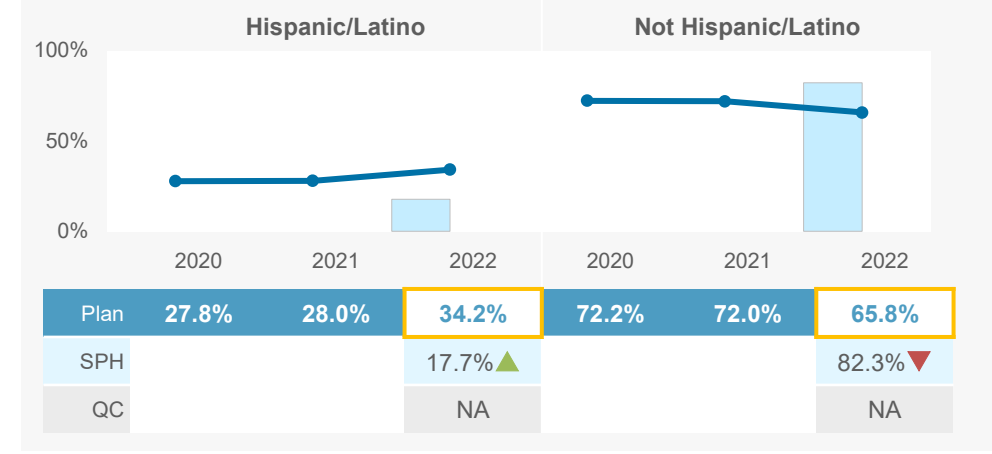
More info. 

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.

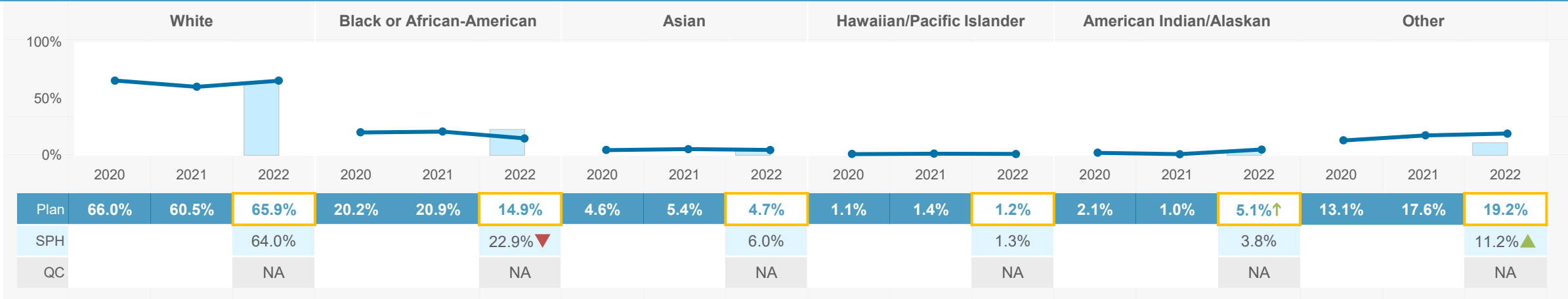
Education



Ethnicity



Race



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.



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SUPPLEMENTAL QUESTIONS

- HUSKY Health program (A/C/D)

Survey Item		Summary Rate Score			2022 SPH BoB
		2020	2021	2022	
Q41. Specialists difficult to see					
	Opt-Outs	Total	(n=306)	(n=312)	(n=277)
	Opt Out: I did not have any difficulty seeing a specialist		145	135	114
	Opt Out: I did not see a specialist		78	83	55
	Valid Responses	Base	(n=55)	(n=68)	(n=70)
	OB/Gynecology		18.2%	25.0%	14.3%
	Cardiology		5.5%	11.8%	20.0% ‡
	Neurology		9.1%	10.3%	17.1%
	Dermatology		30.9%	27.9%	17.1%
	Orthopedics		14.5%	13.2%	18.6%
	Ophthalmology		10.9%	4.4%	8.6%
	Gastrointestinal		14.5%	13.2%	10.0%
	Ear, Nose and Throat		10.9%	14.7%	11.4%
	Behavioral Health		16.4%	25.0%	15.7%
	Other		18.2%	17.6%	30.0%

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

Low Base: ^Indicates a base size smaller than 20. Interpret results with caution.

Survey Item		Summary Rate Score			2022 SPH BoB
		2020	2021	2022	
Q42. Reasons for difficulty quitting smoking/using tobacco					
	Opt-Outs	Total	---	(n=312)	(n=277)
	Opt Out: Does not apply			207	183
	Valid Responses	Base	---	(n=63)	(n=47)
	I enjoy smoking and do not intend to quit			31.7%	19.1%
	I am afraid to admit that I smoke			3.2%	0.0%
	I have difficulty talking to my doctor about quitting smoking			3.2%	2.1%
	My provider has never asked if I want to quit smoking			6.3%	6.4%
	I am too stressed to quit			42.9%	42.6%
	I am afraid I will gain weight			1.6%	8.5%
	I cannot handle the cravings and withdrawals			11.1%	21.3%

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

Low Base: ^Indicates a base size smaller than 20. Interpret results with caution.

Survey Item		Summary Rate Score			2022 SPH BoB
		2020	2021	2022	
Q43. Helped to quit smoking/using tobacco					
	Opt-Outs	Total	---	(n=312)	(n=277)
	Opt Out: Does not apply			213	195
	Valid Responses	Base	---	(n=57)	(n=48)
	Nicotine gum, patch, nasal spray, or inhaler			28.1%	27.1%
	Prescription medication			17.5%	12.5%
	Individual or group counseling or smoking cessation program			0.0%	0.0%
	Telephone Quitline			3.5%	0.0%
	E-cigarettes or vaping device			10.5%	25.0%
	Other			40.4%	35.4%

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

Low Base: ^Indicates a base size smaller than 20. Interpret results with caution.



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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

Q28	Health plan overall	0.6463
Q18	Personal doctor overall	0.5166
Q9	Got care/tests/treatment	0.5109
Q17	Dr. informed about care	0.4978
Q13	Dr. listened carefully	0.4625
Q4	Got urgent care	0.4592
Q12	Dr. explained things	0.4210
Q15	Dr. spent enough time	0.4020
Q22	Specialist overall	0.3939
Q6	Got routine care	0.3225

With Personal Doctor Rating

Q13	Dr. listened carefully	0.6529
Q17	Dr. informed about care	0.6464
Q15	Dr. spent enough time	0.5664
Q12	Dr. explained things	0.5419
Q14	Dr. showed respect	0.5397
Q8	Health care overall	0.5166
Q4	Got urgent care	0.5122
Q9	Got care/tests/treatment	0.3631
Q24	CS provided info./help	0.3472
Q28	Health plan overall	0.3382

With Specialist Rating

Q20	Got specialist appt.	0.4556
Q8	Health care overall	0.3939
Q25	CS courtesy/respect	0.3787
Q28	Health plan overall	0.3353
Q24	CS provided info./help	0.2602
Q18	Personal doctor overall	0.2504
Q17	Dr. informed about care	0.2487
Q9	Got care/tests/treatment	0.1835
Q4	Got urgent care	0.1416
Q13	Dr. listened carefully	0.1275



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 the HUSKY Health program. 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 not include care you got when you stayed overnight in a hospital. Do not 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 check-up or routine care as soon as you needed?

Never
 Sometimes
 Usually
 Always



7. In the last 6 months, not counting the times you went to an emergency room, how many times did you get health care for yourself in 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

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?

- 0 Worst health care possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best health care possible

9. In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?

- Never
- Sometimes
- Usually
- Always

YOUR PERSONAL DOCTOR

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
- No → *If No, Go to Question 19*

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?

- None → *If None, Go to Question 18*
- 1 time
- 2
- 3
- 4
- 5 to 9
- 10 or more times

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
- Always

13. In the last 6 months, how often did your personal doctor listen carefully to you?

- Never
- Sometimes
- Usually
- Always

14. In the last 6 months, how often did your personal doctor show respect for what you had to say?

- Never
- Sometimes
- Usually
- Always

15. In the last 6 months, how often did your personal doctor spend enough time with you?

- Never
- Sometimes
- Usually
- Always

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-to-date about the care you got from these doctors or other health providers?

- Never
- Sometimes
- Usually
- Always

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
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best personal doctor possible

GETTING HEALTH CARE FROM SPECIALISTS

When you answer the next questions, include the care you got in person, by phone, or by video. Do not include dental visits or care you got when you stayed overnight in a hospital.

19. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and 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 23*

20. In the last 6 months, how often did you get an appointment with a specialist as soon as you needed?

- Never
- Sometimes
- Usually
- Always

21. How many specialists have you talked to in the last 6 months?

- None → *If None, Go to Question 23*
- 1 specialist
- 2
- 3
- 4
- 5 or more specialists

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?

- 0 Worst specialist possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best specialist possible

YOUR HEALTH PLAN

The next questions ask about your experience with your health plan.

23. In the last 6 months, did you get information or help from your health plan's customer service?

- Yes
- No → *If No, Go to Question 26*

24. In the last 6 months, how often did your health plan's customer service give you the information or help you needed?

- Never
- Sometimes
- 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

26. In the last 6 months, did your health plan give you any forms to fill out?

- Yes
- No → *If No, Go to Question 28*

27. In the last 6 months, how often were the forms from your health plan easy to fill out?

- Never
- Sometimes
- Usually
- Always

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?

- 0 Worst health plan possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best health plan possible

ABOUT YOU

29. In general, how would you rate your overall health?

- Excellent
- Very Good
- Good
- Fair
- Poor

30. In general, how would you rate your overall mental or emotional health?

- Excellent
- Very Good
- Good
- Fair
- Poor

31. Have you had either a flu shot or flu spray in the nose since July 1, 2021?

- Yes
- No
- Don't know

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, Go to Question 36*
- Don't know → *If Don't know, Go to Question 36*

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?

- Never
- Sometimes
- Usually
- Always

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 medication.*

- Never
- 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.

- Never
- Sometimes
- Usually
- Always

36. What is your age?

- 18 to 24
- 25 to 34
- 35 to 44
- 45 to 54
- 55 to 64
- 65 to 74
- 75 or older

37. Are you male or female?

- Male
- Female

38. What is the highest grade or level of school that you have completed?

- 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

39. Are you of Hispanic or Latino origin or descent?

- Yes, Hispanic or Latino
- No, Not Hispanic or Latino

40. What is your race? Mark one or more.

- White
- Black or African-American
- Asian
- Native Hawaiian or other Pacific Islander
- American Indian or Alaska Native
- Other

ADDITIONAL QUESTIONS

Now we would like to ask a few more questions about the services your health plan provides.

41. If you had difficulty seeing a specialist, which specialists were a problem for you? (Please select all that apply)

- OB/Gynecology
- Cardiology
- Neurology
- Dermatology
- Orthopedics
- Ophthalmology
- Gastrointestinal
- Ear, Nose and Throat
- Behavioral Health
- Other (Please Specify):

-
- I did not have any difficulty seeing a specialist
 - I did not see a specialist

42. If you are a smoker or tobacco user, which best describes how you feel that makes it difficult to quit?

- I enjoy smoking and do not intend to quit
- I am afraid to admit that I smoke
- I have difficulty talking to my doctor about quitting smoking
- My provider has never asked if I want to quit smoking
- I am too stressed to quit
- I am afraid I will gain weight
- I cannot handle the cravings and withdrawals
- Does not apply

43. If you were a smoker or tobacco user and quit, what helped you quit smoking or using tobacco products?

- Nicotine gum, patch, nasal spray, or inhaler
- Prescription medication
- Individual or group counseling or smoking cessation program
- Telephone Quitline
- E-cigarettes or vaping device
- Other (Please Specify):

Does not apply

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



DISCOVER

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



PREDICT

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



OUTREACH

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



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MY 2021 CAHPS® MEDICAID CHILD WITH CCC 5.1 SURVEY

HUSKY HEALTH PROGRAM (HUSKY A/C/D)



HUSKY HEALTH PROGRAM (A/C/D)

CONTENTS

- OVERVIEW
- METHODOLOGY
- INDUSTRY TRENDS
- EXECUTIVE SUMMARY
- KEY DRIVER ANALYSIS OF RATING OF HEALTH PLAN
- MEASURE ANALYSES
- SUMMARY OF TREND AND BENCHMARKS
- PROFILE OF SURVEY RESPONDENTS
- SUPPLEMENTAL QUESTIONS
- APPENDICES
 - A: CORRELATIONS
 - B: QUESTIONNAIRE

SPH Analytics (SPH), a National Committee for Quality Assurance (NCQA) certified HEDIS® Survey Vendor, was selected by HUSKY Health program (A/C/D) to conduct its MY 2021 CAHPS® 5.1 Medicaid Child with CCC Survey (with CCC Measurement set). 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 Heather Nast (248-207-5682). Should you have any questions or comments regarding any aspect of the survey or reporting process, please feel free to call your Project Manager.

- The CAHPS 5.1 Medicaid Child – Children with Chronic Conditions Survey assesses the experience of care for the general population of children and the population of children with chronic conditions (CCC). These conditions include relatively common conditions like asthma, as well as rare conditions, such as juvenile diabetes and Muscular Dystrophy.
- Children with chronic conditions represent a relatively small proportion of the overall child population. To achieve a sufficient number of complete surveys for CCC results to be calculated, a supplemental sample of children who are more likely to have a chronic condition, based on claims experience, is selected and added to the standard CAHPS® 5.1 Child Survey sample (General Population). After the General Population sample is pulled, the supplemental sample is pulled based on a prescreen sample code. The NCQA required total sample size is 3,490 (1,650 General Population + 1,840 supplemental sample), although plans may choose to oversample their population if necessary.
- NCQA defines the member as having a chronic condition through a survey-based screening tool. The CCC screening tool contains five sections representing five different health conditions. A child member is identified as having a chronic condition if all questions for at least one specific health consequence are answered “Yes.”
- It cannot be determined which respondents out of the total sample qualify as having a chronic condition. Given that a denominator for this equation cannot be determined, there is no response rate provided for the CCC Population. You will see the Response Rate for the Total Population and General Population on the following page, along with additional details for the General Population sample.

DATA COLLECTION

The MY 2021 Medicaid Child with CCC version of the 5.1 CAHPS survey was administered via the following methodology:

First questionnaire mailed
1/28/2022

Second questionnaire mailed
3/4/2022

Initiate follow-up calls to non-responders
3/25/2022 - 4/8/2022

Last day to accept completed surveys
5/23/2022

QUALIFIED RESPONDENTS




Included beneficiaries who were...

- Parents of those 17 years and younger (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

$$\frac{379 \text{ (Completed)}}{2145 \text{ (Sample)} - 20 \text{ (Ineligible)}} = \frac{379}{2125} = 17.8\%$$

VALID SURVEYS

	Total Number of Mail Completed =	184	(64 in Spanish)
	Total Number of Phone Completed =	107	(22 in Spanish)
	Total Number of Internet Completed =	88	(20 in Spanish)

Number of Undeliverables: 411

Note: Respondents were given the option of completing the survey in Spanish. All members selected in the sample received both an English and a Spanish mail survey. Additionally, cover letters included a telephone number for members to call and complete the survey in Spanish.

RESPONSE RATE TRENDING

		2020	2021	2022
Completed	SUBTOTAL	412	381	379
	Does not Meet Eligibility Criteria (01)	9	12	17
Ineligible	Language Barrier (03)	8	10	2
	Mentally/Physically Incapacitated (04)	0	0	0
	Deceased (05)	0	1	1
	SUBTOTAL	17	23	20
Non-response	Break-off/Incomplete (02)	31	20	22
	Refusal (06)	24	21	18
	Maximum Attempts Made (07)	1661	1700	1706
	Added to DNC List (08)	0	0	0
	SUBTOTAL	1716	1741	1746
Total Sample		2145	2145	2145
Oversampling %		30.0%	30.0%	30.0%
Response Rate		19.4%	18.0%	17.8%
SPH Response Rate		12.6%	12.8%	10.2%

Total Completed (General Pop + CCC)	761	783	715
Total Ineligible (General Pop + CCC)	22	38	34
Total Sample (General Pop + CCC)	3985	3985	3985
Total Response Rate (General Pop + CCC)	19.2%	19.8%	18.1%
Supplemental (CCC) Sample Size	1840	1840	1840
Supplemental (CCC) Completes	332	352	301



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INDUSTRY TRENDS

- HUSKY Health program (A/C/D)



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 Child: Among the Medicaid Child 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 Needed Care*.

Getting Care Quickly is an area of concern, with the 2022 composite score 3.6% lower than it was in 2019. Most of that comes from a more than 6% drop in the ability to get routine care from its high point in 2020, at the beginning of the pandemic.

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 Book of Business Trends				
	2019	2020	2021	2022
Rating Questions (% 9 or 10)				
Q49. Rating of Health Plan	72.2%	73.0%	73.3%	72.5%
Q9. Rating of Health Care	71.1%	73.0%	74.4%	71.2%
Q36. Rating of Personal Doctor	77.6%	79.1%	78.6%	77.4%
Q43. Rating of Specialist	73.2%	75.0%	75.7%	73.9%
Rating Questions (% 8, 9 or 10)				
Q49. Rating of Health Plan	86.9%	87.5%	87.3%	86.9%
Q9. Rating of Health Care	88.3%	88.7%	88.7%	87.6%
Q36. Rating of Personal Doctor	90.6%	91.2%	90.8%	90.3%
Q43. Rating of Specialist	87.2%	88.2%	88.2%	87.5%
Getting Needed Care (% A/U)				
Q10. Getting care, tests, or treatment	90.1%	90.8%	90.8%	89.2%
Q41. Getting specialist appointment	80.3%	80.4%	82.4%	79.5%
Getting Care Quickly (% A/U)				
Q4. Getting urgent care	91.9%	91.7%	91.7%	90.5%
Q6. Getting routine care	88.6%	89.3%	83.8%	82.9%
Coordination of Care (Q35) (% A/U)				
	84.2%	85.0%	84.9%	84.1%

 Increase of 1% or greater since 2021
 Decrease of 1% or greater since 2021



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EXECUTIVE SUMMARY

- HUSKY Health program (A/C/D)



OVERVIEW OF TERMS

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.



2022 DASHBOARD

MEDICAID CHILD: GENERAL POPULATION



379

Completed surveys

17.8%

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

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	75.5%	68 th	---
Rating of Health Care ★★★			
Rating of Health Care	72.9%	58 th	Power
Rating of Personal Doctor ★★			
Rating of Personal Doctor	72.9%	↓‡ 12 th	Opportunity
Rating of Specialist (NA)			
Rating of Specialist	69.4%	24 th	Wait

Coordination of Care ★			
Coordination of Care	80.0%	19 th	Opportunity
Getting Needed Care ★★			
Composite	82.5%	37 th	---
Q10. Getting care, tests, or treatment	89.1%	46 th	Opportunity
Q41. Getting specialist appointment	75.8%	35 th	Wait
Getting Care Quickly ★★			
Composite	84.3%	30 th	---
Q4. Getting urgent care	87.2%	29 th	Wait
Q6. Getting routine care	81.5%	‡ 37 th	Wait

Customer Service +			
Composite	89.6%	60 th	---
Q45. Provided information or help	85.9%	↑‡ 68 th	Retain
Q46. Treated with courtesy and respect	93.4%	44 th	Wait
Ease of Filling Out Forms +			
Ease of Filling Out Forms +	94.7%	17 th	Wait

How Well Doctors Communicate +			
Composite	91.5%	13 th	---
Q27. Dr. explained things	92.2%	17 th	Opportunity
Q28. Dr. listened carefully	95.1%	39 th	Opportunity
Q29. Dr. showed respect	93.1%	‡ <5 th	Opportunity
Q32. Dr. spent enough time	85.5%	‡ 10 th	Wait

More info.



ESTIMATED NCQA HEALTH INSURANCE PLAN RATINGS

MEDICAID CHILD: GENERAL POPULATION

	SCORE DEFINITION	2022 BASE	2022 HPR SCORE*	HPR 4 STAR THRESHOLD	HPR PERCENTILE BAND	SPH ESTIMATED RATING
PATIENT EXPERIENCE						2.5
GETTING CARE						2
Getting Needed Care	Usually or Always	171	82.4%	88.0%	10 th	2
Getting Care Quickly	Usually or Always	166	84.3%	89.3%	10 th	2
SATISFACTION WITH PLAN PHYSICIANS						2
Rating of Personal Doctor	9 or 10	321	72.9%	79.8%	10 th	2
Rating of Specialist	9 or 10	85	69.4%	76.0%	10 th	NA
Rating of Health Care	9 or 10	247	72.8%	76.5%	33 rd	3
Coordination of Care	Usually or Always	100	80.0%	88.6%	<10 th	1
SATISFACTION WITH PLAN SERVICES						4
Rating of Health Plan	9 or 10	372	75.5%	75.3%	67 th	4

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 Percentile	10 th – 32 nd Percentile	33 rd – 66 th Percentile	67 th – 89 th Percentile	≥90 th Percentile

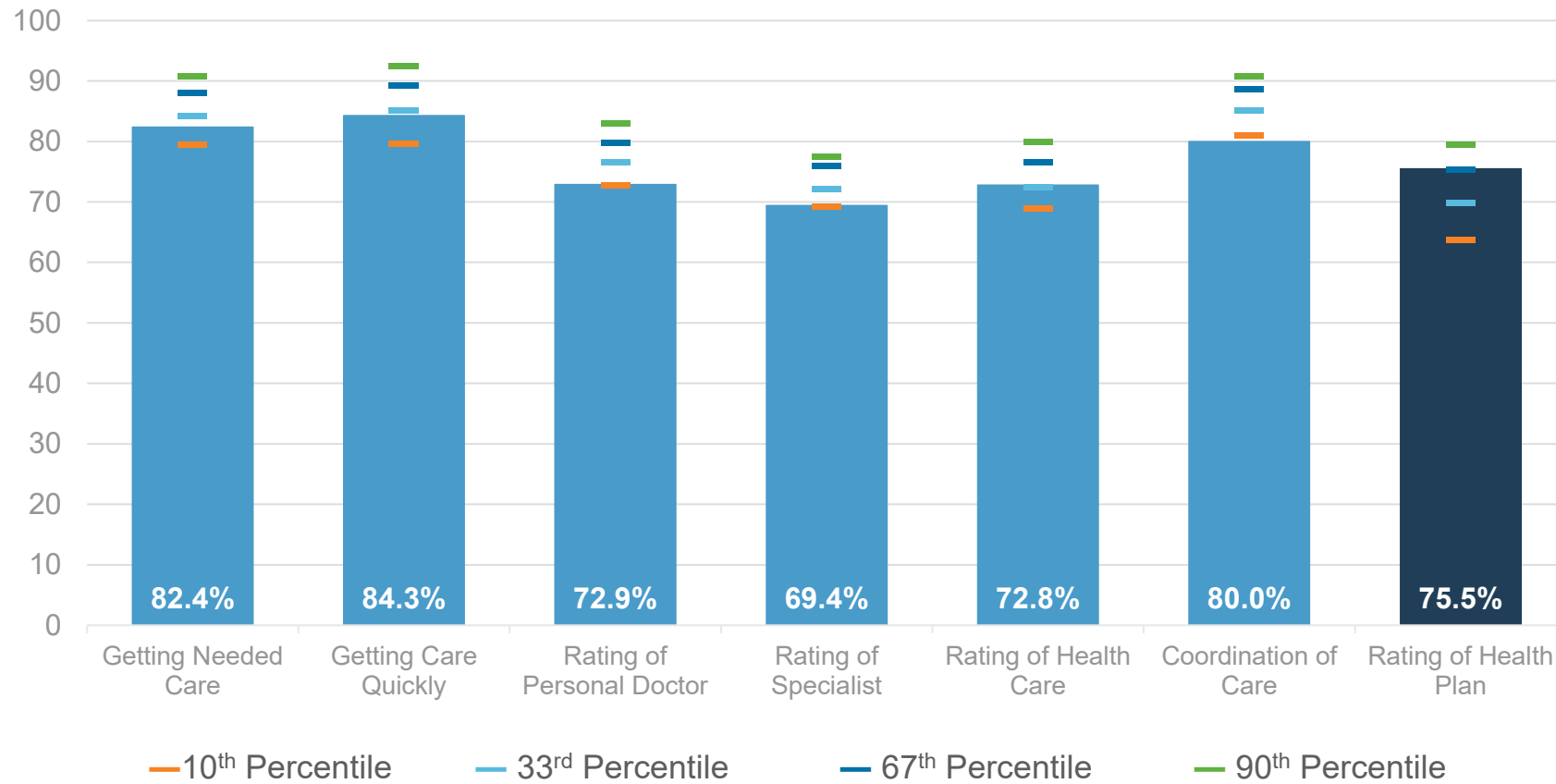
Notes:

- 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.

*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.

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

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.

* Scores are % 9 or 10, and % Always or Usually.



MEASURE SUMMARY

MEDICAID CHILD: GENERAL POPULATION

MEASURE	SUMMARY RATE		CHANGE	2022 GP SPH BOOK OF BUSINESS BENCHMARK							
	2021	2022		PERCENTILE DISTRIBUTION			PERCENTILE RANK	BoB SRS			
				0	20	40	60	80	100		
Health Plan Domain											
Rating of Health Plan <i>% 9 or 10</i>	77.4%	75.5%	-1.9						68 th	72.5%	
Getting Needed Care <i>% Usually or Always</i>	84.0%	82.5%	-1.5						37 th	84.4%	
Customer Service + <i>% Usually or Always</i>	80.1%	89.6%	9.5						60 th	88.2%	
Ease of Filling Out Forms + <i>% Usually or Always</i>	95.6%	94.7%	-0.9						17 th	96.1%	
Health Care Domain											
Rating of Health Care <i>% 9 or 10</i>	71.6%	72.9%	1.3						58 th	71.2%	
Getting Care Quickly <i>% Usually or Always</i>	89.9%	84.3%	-5.6						30 th	86.7%	
How Well Doctors Communicate + <i>% Usually or Always</i>	90.2%	91.5%	1.3						13 th	94.4%	
Coordination of Care <i>% Usually or Always</i>	89.5%	80.0%	-9.5						19 th	84.1%	
Rating of Personal Doctor <i>% 9 or 10</i>	79.7%	72.9% ↓	-6.8						12 th	77.4%	
Rating of Specialist <i>% 9 or 10</i>	76.4%	69.4%	-7.0						24 th	73.9%	

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

[More info.](#)



MEASURE SUMMARY

MEDICAID CHILD: CCC POPULATION

MEASURE	SUMMARY RATE		CHANGE	2022 CCC SPH BOOK OF BUSINESS BENCHMARK								
	2021	2022		PERCENTILE DISTRIBUTION			PERCENTILE RANK	BoB SRS				
				0	20	40	60	80	100			
Health Plan Domain												
Rating of Health Plan <i>% 9 or 10</i>	75.7%	72.1%	-3.6						58 th	69.7%		
Getting Needed Care <i>% Usually or Always</i>	85.9%	83.1%	-2.8						15 th	87.5%		
Customer Service + <i>% Usually or Always</i>	88.5%	92.5%	4.0						76 th	89.3%		
Ease of Filling Out Forms + <i>% Usually or Always</i>	95.0%	94.5%	-0.5						16 th	95.9%		
Health Care Domain												
Rating of Health Care <i>% 9 or 10</i>	70.4%	70.6%	0.2						55 th	69.1%		
Getting Care Quickly <i>% Usually or Always</i>	89.5%	87.3%	-2.2						18 th	90.5%		
How Well Doctors Communicate + <i>% Usually or Always</i>	95.3%	94.1%	-1.2						29 th	94.9%		
Coordination of Care <i>% Usually or Always</i>	84.9%	78.9%	-6.0						20 th	83.3%		
Rating of Personal Doctor <i>% 9 or 10</i>	79.1%	73.6%	-5.5						25 th	77.5%		
Rating of Specialist <i>% 9 or 10</i>	76.3%	71.3%	-5.0						31 st	74.0%		

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

[More info.](#)



MEASURE SUMMARY

MEDICAID CHILD: CCC POPULATION

MEASURE	SUMMARY RATE		CHANGE	2022 CCC SPH BOOK OF BUSINESS BENCHMARK							
	2021	2022		PERCENTILE DISTRIBUTION			PERCENTILE RANK	BoB SRS			
				0	20	40	60	80	100		
CCC Measures											
Access to Rx Medicines <i>% Usually or Always</i>	93.8%	95.0%	1.2						86 th	91.5%	▲
Access to Specialized Services <i>% Usually or Always</i>	80.6%	79.0%	-1.6						76 th	73.0%	▲
FCC: Dr Who Knows Child <i>% Yes</i>	93.9%	91.8%	-2.1						55 th	91.5%	
FCC: Getting Needed Info <i>% Usually or Always</i>	87.4%	90.6%	3.2						20 th	92.0%	
Coordination of Care for CCC <i>% Yes</i>	79.5%	75.4%	-4.1						36 th	76.6%	

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

[More info.](#)



HEALTH EQUITY

MEDICAID CHILD: GENERAL POPULATION

Group is performing...

- Above the plan score by 5 or more points
- Above the plan score
- Below the plan score
- Below the plan score by 5 or more points
- Above/below plan score but has low base (<30)

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

[More info.](#)

Demographic	Category	Total	Rating of Health Plan		Rating of Health Care		Getting Needed Care		Getting Care Quickly		Coordination of Care	
			SRS	Δ	SRS	Δ	SRS	Δ	SRS	Δ	SRS	Δ
			75.5%		72.9%		82.5%		84.3%		80.0%	
Child's Gender	Male	n = 181		-1%		0%		5%		3%		6%
	Female	n = 187		1%		0%		-2%		-4%		-7%
Child's Age	0 – 4	n = 69		2%		4%		9%		4%		12%
	5 – 8	n = 76		3%		3%		5%		-1%		-12%
	9 – 13	n = 102		-2%		-5%		-1%		1%		6%
	14 or older	n = 116		-2%		-1%		0%		-5%		-4%
Overall Health	Excellent/Very Good	n = 283		1%		3%		2%		2%		-3%
	Good	n = 69		-2%		-7%		0%		-7%		2%
	Fair/Poor	n = 22		-3%		-11%		-9%		-4%		20%
Mental Health	Excellent/Very Good	n = 262		2%		3%		0%		5%		-1%
	Good	n = 73		-5%		-9%		4%		-14%		2%
	Fair/Poor	n = 37		0%		-2%		-2%		-7%		0%
Race/Ethnicity	White	n = 171		-3%		1%		-2%		4%		-3%
	Black/African-American	n = 88		3%		7%		10%		-6%		4%
	Asian	n = 21		10%		5%		-24%		12%		-5%
	Native Hawaiian/Pacific Islander	n = 4		-1%		27%		-8%		16%		20%
	American Indian or Alaska Native	n = 10		15%		13%		-6%		-1%		-5%
	Other	n = 86		11%		-2%		0%		-6%		11%
	Hispanic/Latino	n = 174		5%		2%		-3%		-3%		5%



HEALTH EQUITY

MEDICAID CHILD: GENERAL POPULATION

Group is performing...

- Above the plan score by 5 or more points
- Above the plan score
- Below the plan score
- Below the plan score by 5 or more points
- Above/below plan score but has low base (<30)

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

[More info.](#)

Demographic	Category	Total	Rating of Personal Doctor		Rating of Specialist		Customer Service +		How Well Doctors Communicate +		Ease of Filling Out Forms +	
			SRS	△	SRS	△	SRS	△	SRS	△	SRS	△
Child's Gender	Male	n = 181	72.9%	-1%	69.4%	-4%	89.6%	1%	91.5%	2%	94.7%	-2%
	Female	n = 187		2%		6%		-1%		-2%		2%
Child's Age	0 – 4	n = 69		6%		9%		3%		2%		1%
	5 – 8	n = 76		-2%		8%		0%		-5%		0%
	9 – 13	n = 102		-3%		-17%		1%		5%		-2%
	14 or older	n = 116		2%		5%		-2%		-2%		1%
Overall Health	Excellent/Very Good	n = 283		6%		3%		2%		2%		0%
	Good	n = 69		-17%		-3%		-2%		-6%		1%
	Fair/Poor	n = 22		-18%		-8%		-12%		-7%		0%
Mental Health	Excellent/Very Good	n = 262		6%		0%		2%		2%		0%
	Good	n = 73		-9%		8%		-5%		-3%		-1%
	Fair/Poor	n = 37		-17%		-8%		0%		-7%		2%
Race/Ethnicity	White	n = 171		1%		-2%		4%		2%		2%
	Black/African-American	n = 88		9%		-1%		-6%		0%		0%
	Asian	n = 21		4%		31%		-20%		-4%		0%
	Native Hawaiian/Pacific Islander	n = 4		-48%		31%		10%		0%		5%
	American Indian or Alaska Native	n = 10		-3%		31%		-6%		2%		5%
	Other	n = 86		-6%		-4%		-11%		-1%		-3%
	Hispanic/Latino	n = 174		-4%		2%		1%		-2%		-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	2022 Valid n	PLAN SUMMARY RATE SCORE			2021 GP QC			2022 GP SPH BoB		
		2021	2022	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Rating of Health Plan (% 9 or 10)	372	77.4%	75.5%	-1.9	72.2%	3.3	68 th	72.5%	3.0	68 th
Customer Service + (% Usually or Always)	91 [^]	80.1%	89.6%	9.5	88.3%	1.3	61 st	88.2%	1.4	60 th
Rating of Health Care (% 9 or 10)	247	71.6%	72.9%	1.3	74.3%	-1.4	35 th	71.2%	1.7	58 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 Valid n	PLAN SUMMARY RATE SCORE			2021 GP QC			2022 GP SPH BoB		
		2021	2022	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Coordination of Care (% Usually or Always)	100	89.5%	80.0%	-9.5	86.6%	-6.6	<5 th	84.1%	-4.1	19 th
How Well Doctors Communicate + (% Usually or Always)	244	90.2%	91.5%	1.3	94.4%	-2.9	10 th	94.4%	-2.9	13 th
Rating of Personal Doctor (% 9 or 10)	321	79.7%	72.9%	↓ -6.8	78.0%	▼ -5.1	10 th	77.4%	-4.5	12 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 – Coordination of Care

- Inform, support, remind and facilitate providers about coordination of care expectations, timely notification requirements, and standards of care for post-visit follow up to all PCPs. Explore options to encourage and support communications between specialists and PCPs.
- Carefully assess any parent or patient concerns associated with any health care received out-of-office, addressing and clarifying as appropriate. Seek and obtain all associated records.
- 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 – 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).
- Explain health care concepts clearly and simply to parents and children. Use simple terms for children. Be prepared to accommodate and overcome language /literacy limitations.
- Address all of the parents' and the child's concerns. When appropriate, involve the child. Maintain eye contact with both the parent and the child. Be kind, thoughtful and thorough.
- Speak directly to older children when discussing matters related to their health.
- 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, be 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).

Improvement Strategies – Rating of Personal Doctor

- Analyze, investigate, and probe for weakness or QI opportunities among those measures or composites that are Key Drivers (or highly correlated) with rating of personal 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.
- Work collaboratively with pediatric providers, encourage and support a family friendly approach that helps parents/families navigate the health care system and overcome obstacles.
- 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: Foster relationships with patients. Partner with them. Listen to their concerns. Treat them with compassion. Spend adequate time with them and ensure questions and concerns are answered.
- 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.).
- 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. Minimize wait times.

[Full List of Improvement Strategies](#) 



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KEY DRIVER ANALYSIS OF RATING OF HEALTH PLAN

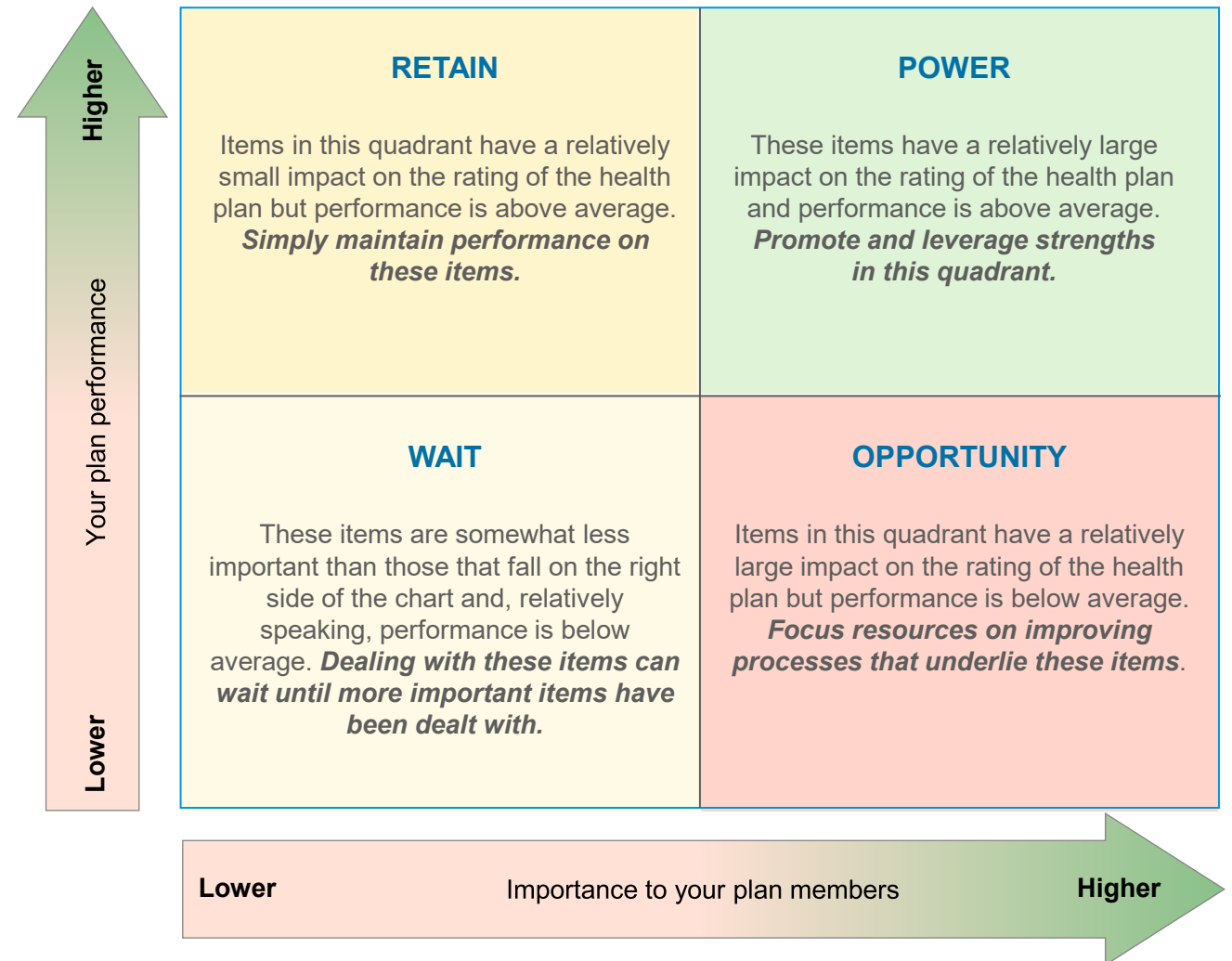
- HUSKY Health program (A/C/D)

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.



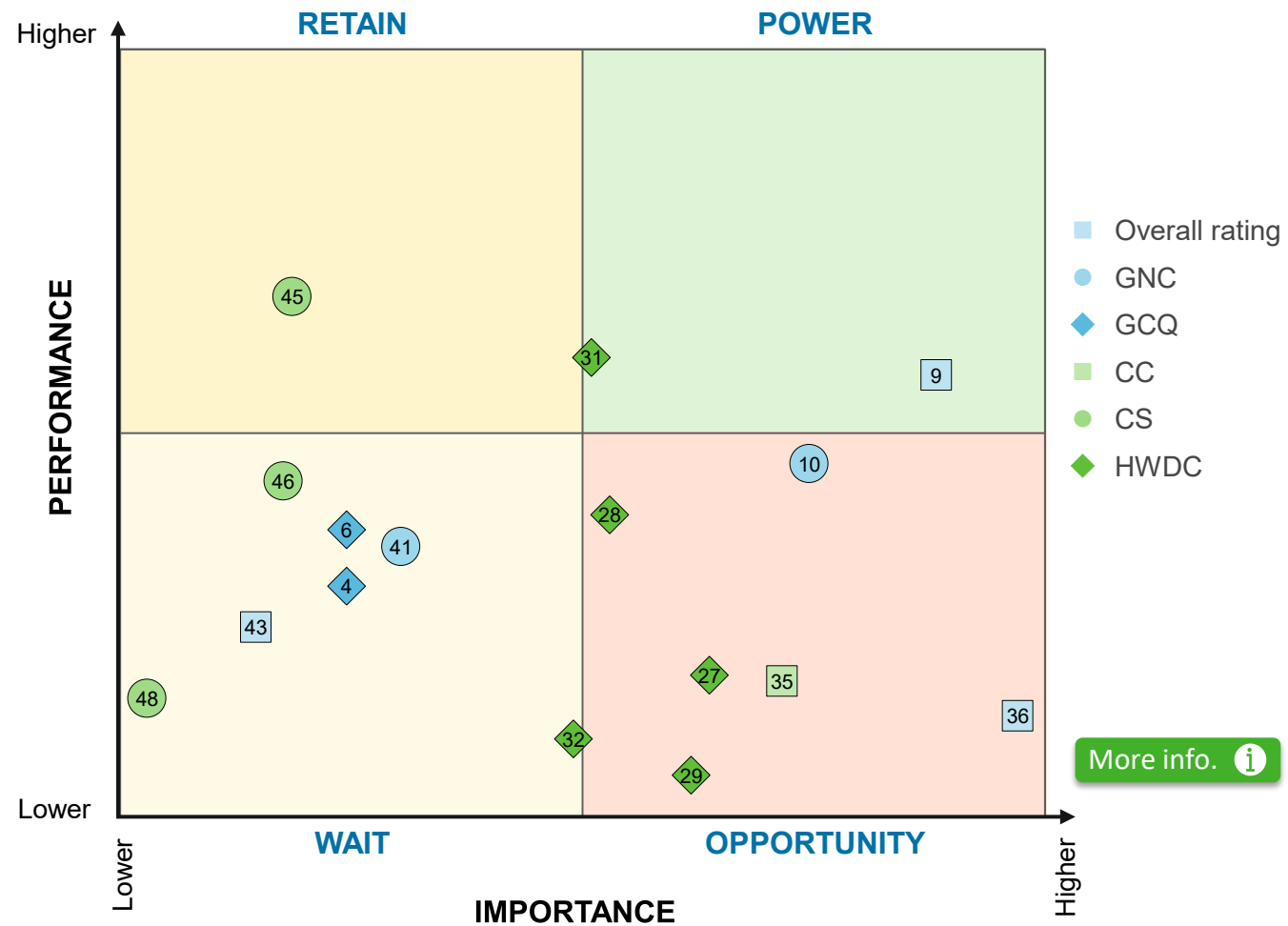
POWER CHART: YOUR RESULTS

MEDICAID CHILD: GENERAL POPULATION

SURVEY MEASURE		SRS	SPH %tile
POWER			
Q9	Rating of Health Care	72.9%	58 th
Q31	Dr explained things to child	95.4%	60 th
OPPORTUNITY			
Q36	Rating of Personal Doctor	72.9%	12 th
Q10	Getting care, tests, or treatment	89.1%	46 th
Q35	Coordination of Care	80.0%	19 th
Q27	Dr. explained things	92.2%	17 th
Q29	Dr. showed respect	93.1%	<5 th
Q28	Dr. listened carefully	95.1%	39 th
WAIT			
Q32	Dr. spent enough time	85.5%	10 th
Q41	Getting specialist appointment	75.8%	35 th
Q6	Getting routine care	81.5%	37 th
Q4	Getting urgent care	87.2%	29 th
Q46	Treated with courtesy and respect	93.4%	44 th
Q43	Rating of Specialist	69.4%	24 th
Q48	Ease of Filling Out Forms +	94.7%	17 th
RETAIN			
Q45	Provided information or help	85.9%	68 th

KEY DRIVERS, SUMMARY RATES AND PERCENTILES

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





KEY DRIVERS OF RATING OF HEALTH PLAN

MEDICAID CHILD: GENERAL POPULATION

ALIGNMENT <i>Are your key drivers typical of the industry?</i>	KEY DRIVER RANK		ATTRIBUTE	SUMMARY RATE SCORE		SPH BoB PERCENTILE	CLASSIFICATION
	YOUR PLAN	INDUSTRY		YOUR PLAN	INDUSTRY		
TOP 10 KEY DRIVERS							
			Q49	Rating of Health Plan	75.5%	72.5%	68th
✓	1	2	Q36	Rating of Personal Doctor	72.9%	77.4%	12 th Opportunity
✓	2	1	Q9	Rating of Health Care	72.9%	71.2%	58 th Power
✓	3	5	Q10	Getting care, tests, or treatment	89.1%	89.2%	46 th Opportunity
	4	12	Q35	Coordination of Care	80.0%	84.1%	19 th Opportunity
	5	13	Q27	Dr. explained things	92.2%	94.8%	17 th Opportunity
	6	11	Q29	Dr. showed respect	93.1%	96.7%	<5 th Opportunity
✓	7	10	Q28	Dr. listened carefully	95.1%	95.6%	39 th Opportunity
	8	15	Q31	Dr explained things to child	95.4%	94.6%	60 th Power
	9	14	Q32	Dr. spent enough time	85.5%	90.6%	10 th Wait
✓	10	4	Q41	Getting specialist appointment	75.8%	79.5%	35 th Wait
	11	8	Q6	Getting routine care	81.5%	82.9%	37 th Wait
	12	9	Q4	Getting urgent care	87.2%	90.5%	29 th Wait
	13	7	Q45	Provided information or help	85.9%	82.7%	68 th Retain
	14	6	Q46	Treated with courtesy and respect	93.4%	93.7%	44 th Wait
	15	3	Q43	Rating of Specialist	69.4%	73.9%	24 th Wait

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.



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MEASURE ANALYSES

Measure Details and Summary Rate Scores

- HUSKY Health program (A/C/D)

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

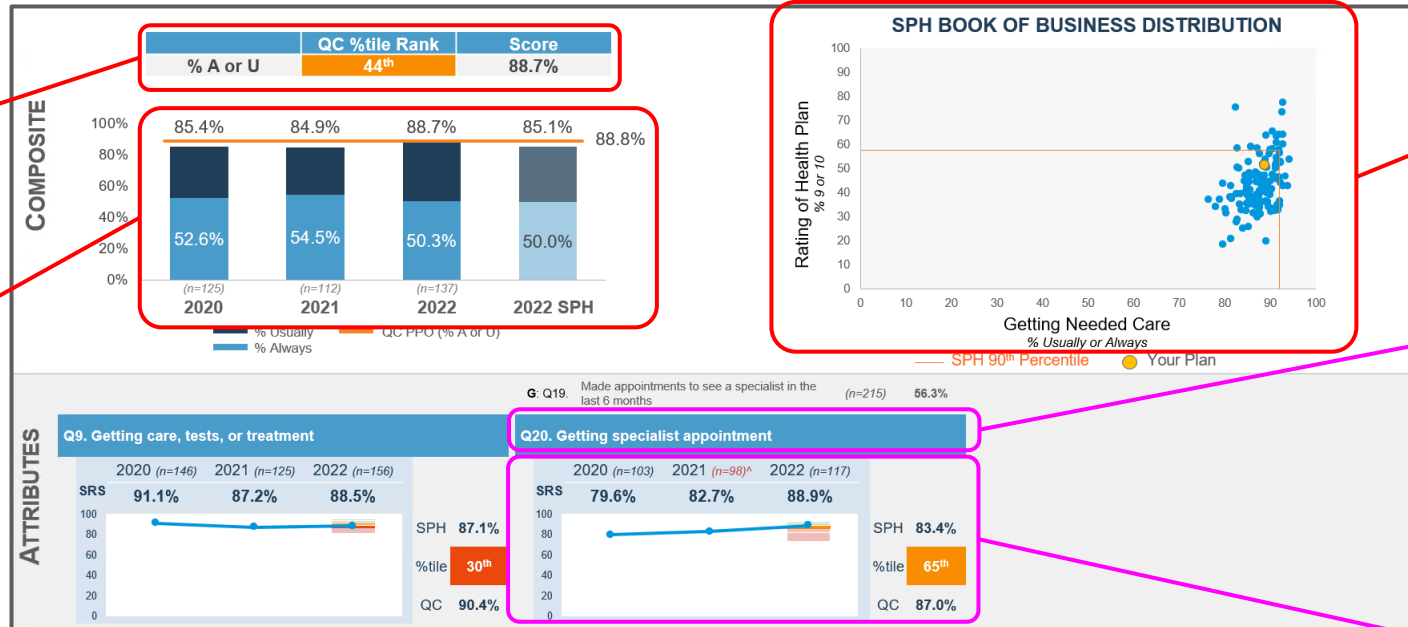
All scores displayed in this section are summary rate scores (notated with 'SRS').

More info.

Percentile Bands	
≥90 th	
67 th – 89 th	
33 rd – 66 th	
10 th – 32 nd	
<10 th	

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.

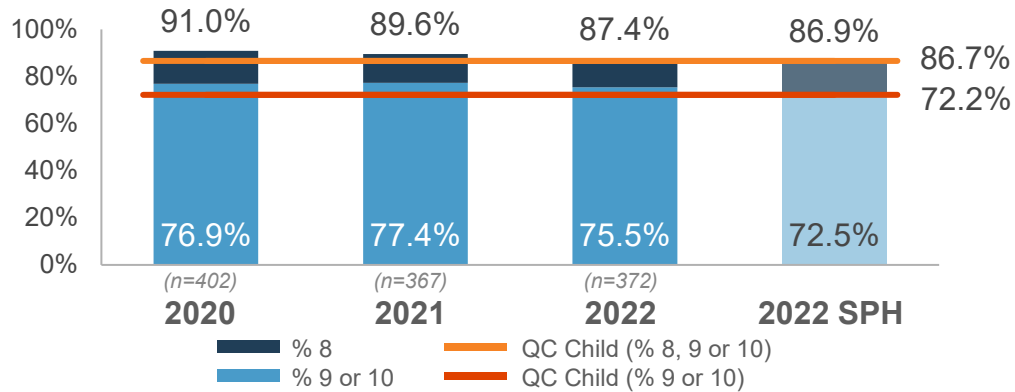
Gate questions (indicated by "G:") for attributes are displayed above attributes – scores displayed are % Yes

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

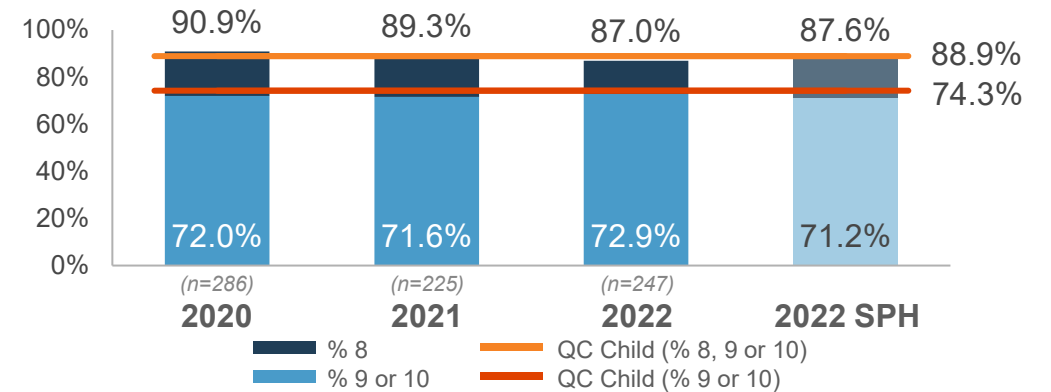
RATING OF HEALTH PLAN

	QC %tile Rank	Score
% 8, 9 or 10	51 st	87.4%
% 9 or 10	68 th	75.5%



RATING OF HEALTH CARE

	QC %tile Rank	Score
% 8, 9 or 10	22 nd	87.0%
% 9 or 10	35 th	72.9%



Key Drivers Of The Rating Of The Health Plan

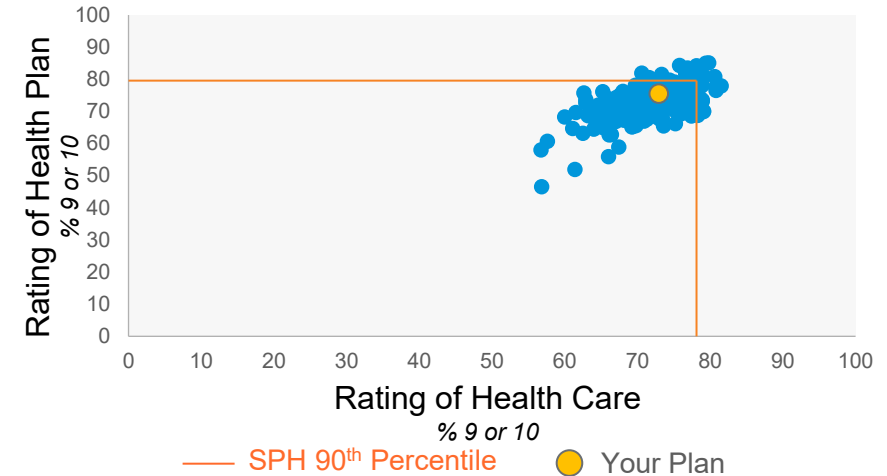
POWER

OPPORTUNITIES

- Q9 Rating of Health Care
- Q31 Dr explained things to child

- Q36 Rating of Personal Doctor
- Q10 Getting care, tests, or treatment
- Q35 Coordination of Care
- Q27 Dr. explained things
- Q29 Dr. showed respect
- Q28 Dr. listened carefully

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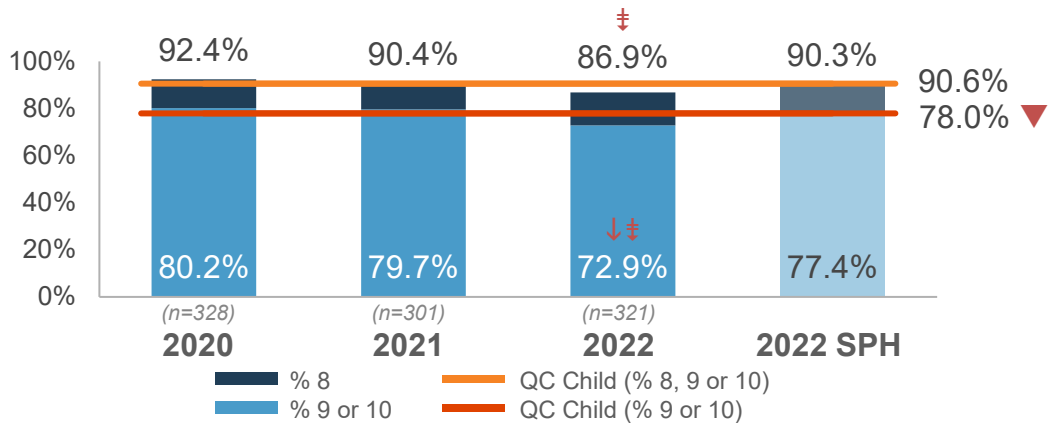


Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↕) or benchmark score (▲/▼).

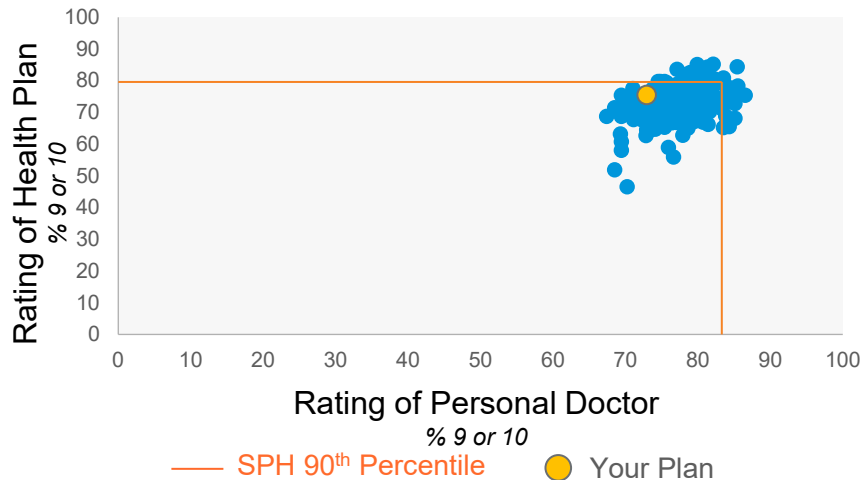
Denominator less than 100. NCQA will assign an NA to this measure.

RATING OF PERSONAL DOCTOR

	QC %tile Rank	Score
% 8, 9 or 10	9 th	86.9%
% 9 or 10	10 th	72.9%

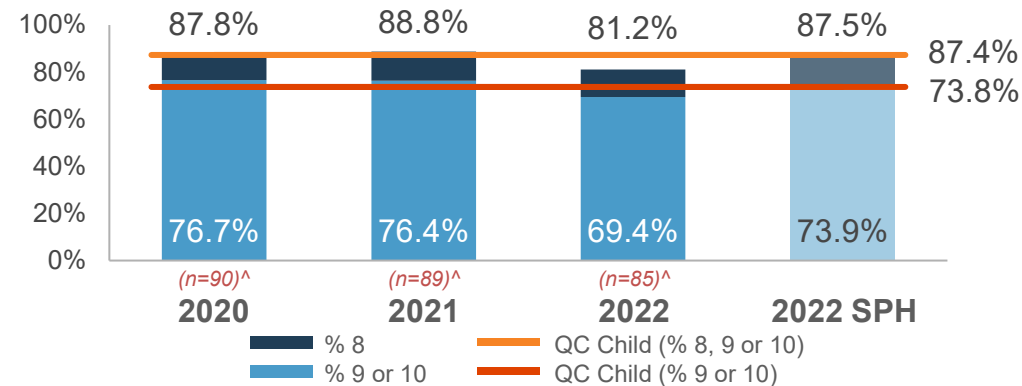


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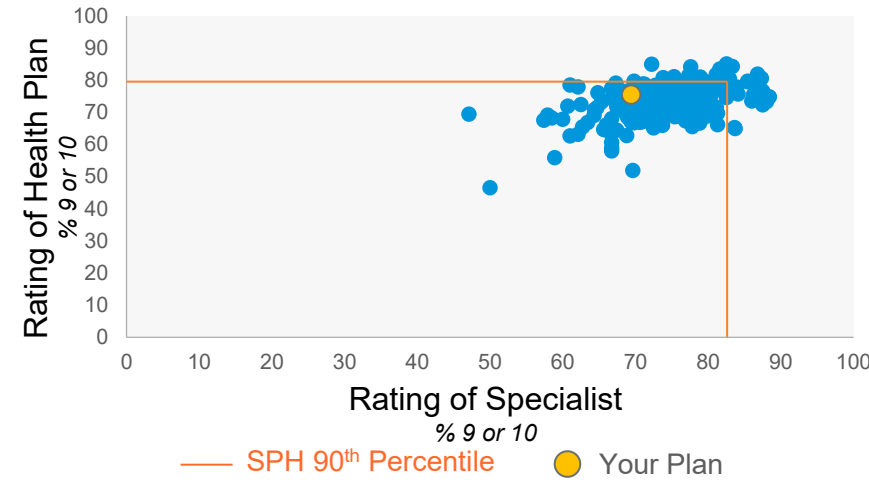


RATING OF SPECIALIST

	QC %tile Rank	Score
% 8, 9 or 10	6 th	81.2%
% 9 or 10	18 th	69.4%



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

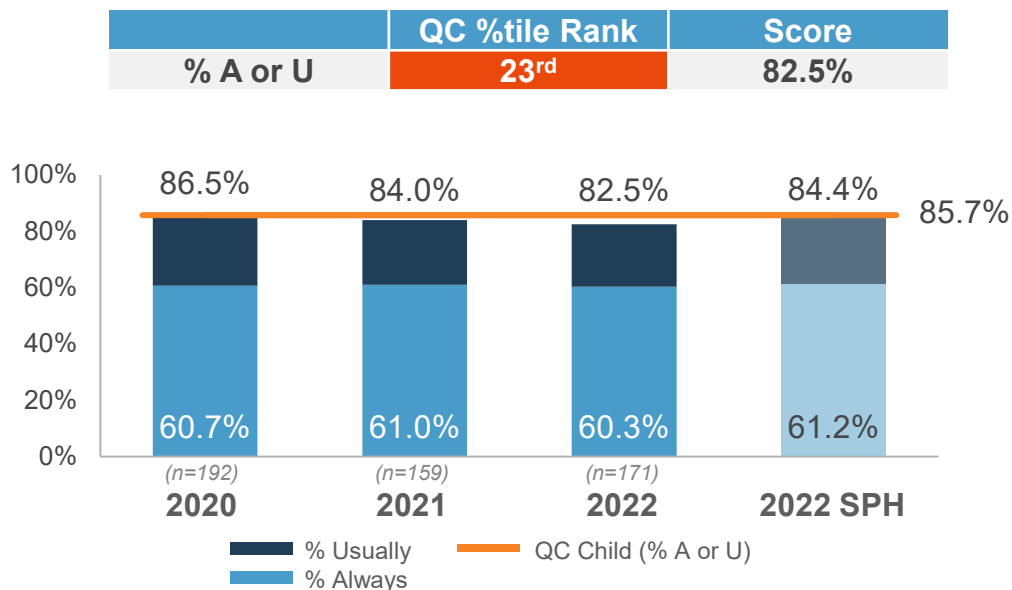
^Denominator less than 100. NCQA will assign an NA to this measure.



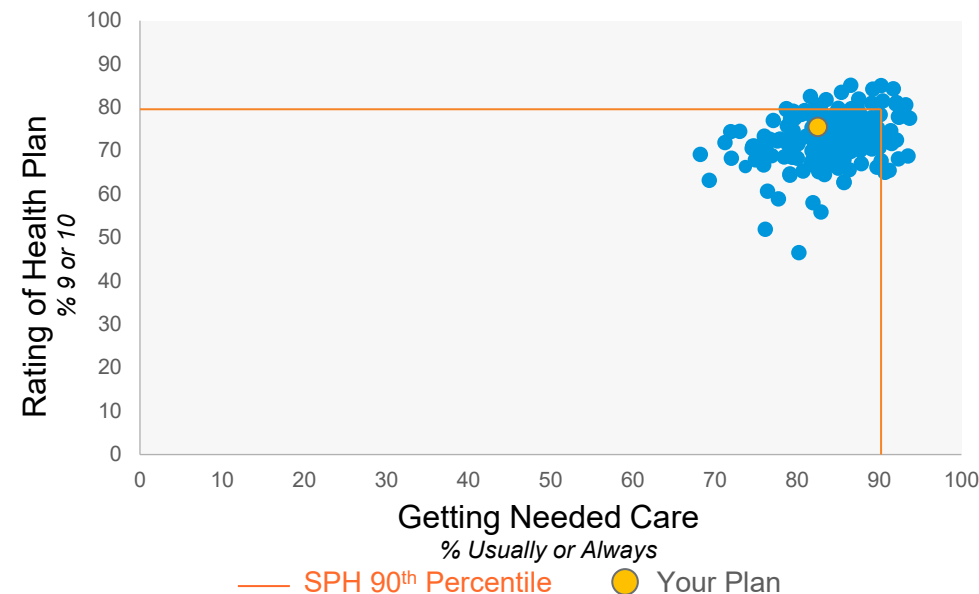
GETTING NEEDED CARE

MEDICAID CHILD: GENERAL POPULATION

COMPOSITE



SPH BOOK OF BUSINESS DISTRIBUTION



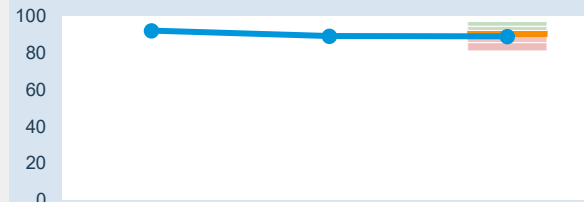
ATTRIBUTES

G: Q40. Made appointments to see a specialist in the last 6 months (n=377) 25.2%

Q10. Getting care, tests, or treatment

2020 (n=286) 2021 (n=224) 2022 (n=248)

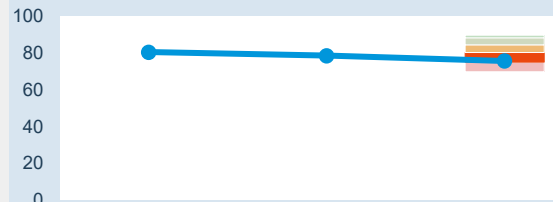
SRS 92.3% 89.3% 89.1%



Q41. Getting specialist appointment

2020 (n=98)[^] 2021 (n=94)[^] 2022 (n=95)[^]

SRS 80.6% 78.7% 75.8%



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

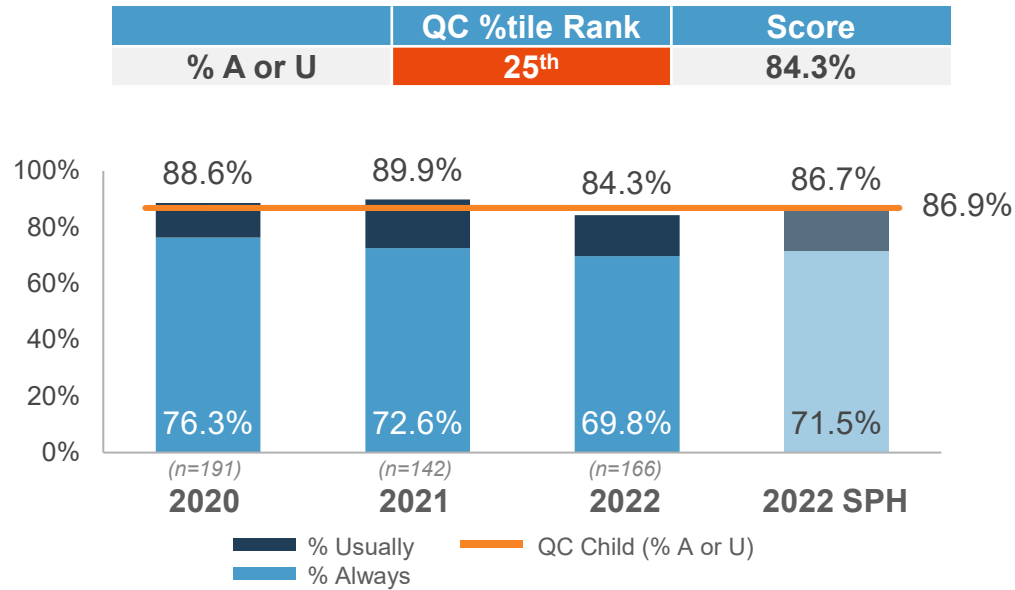
[^]Denominator less than 100. NCQA will assign an NA to this measure.



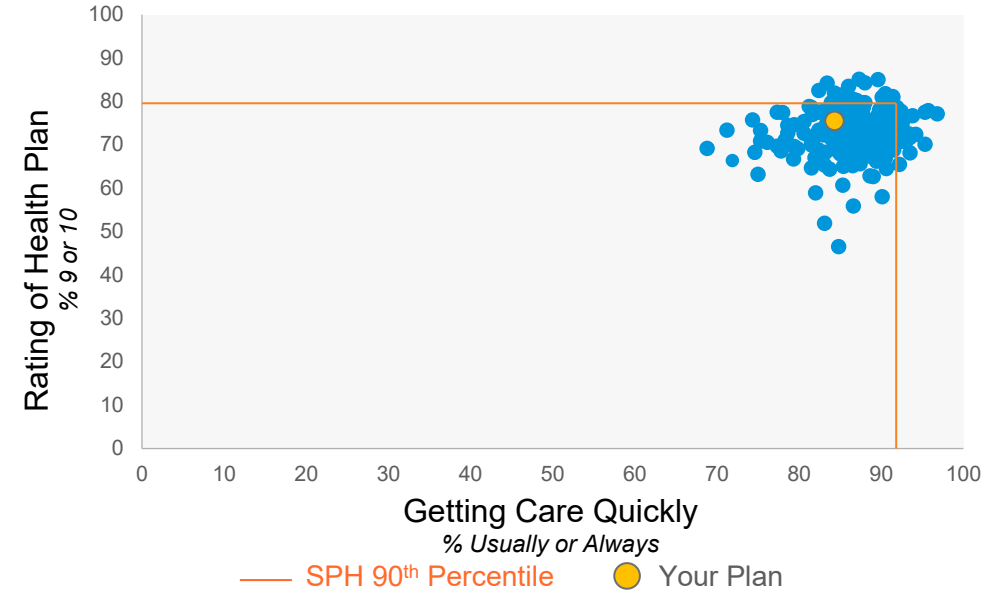
GETTING CARE QUICKLY

MEDICAID CHILD: GENERAL POPULATION

COMPOSITE



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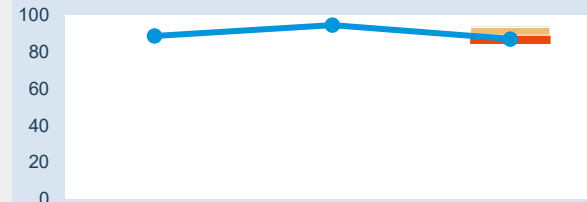
ATTRIBUTES

G: Q3. Had illness, injury or condition that needed care right away (n=374) 21.4%

G: Q5. Made appointments for check-ups or routine care at doctor's office or clinic (n=374) 70.1%

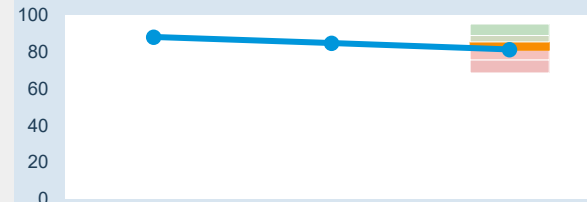
Q4. Getting urgent care

SRS	2020 (n=99) [^]	2021 (n=58) [^]	2022 (n=78) [^]
	88.9%	94.8%	87.2%



Q6. Getting routine care

SRS	2020 (n=283)	2021 (n=226)	2022 (n=254)
	88.3%	85.0%	81.5% [‡]



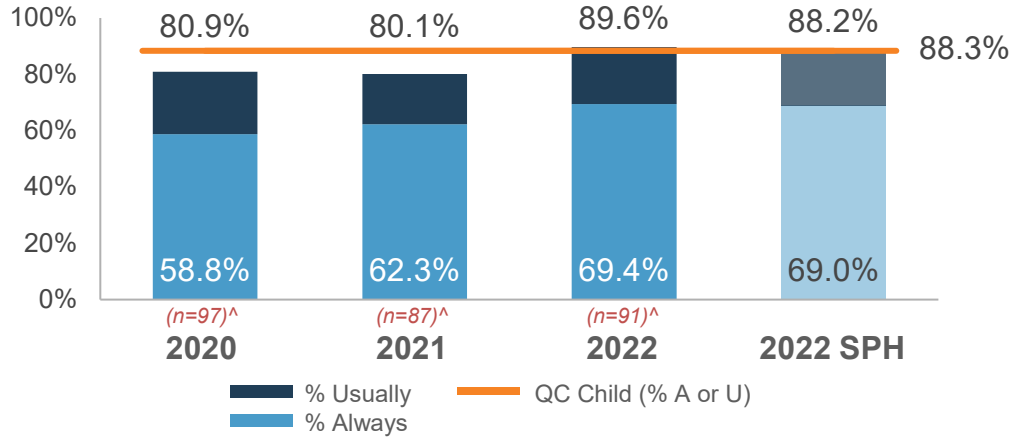
Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↔) or benchmark score (▲/▼).

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

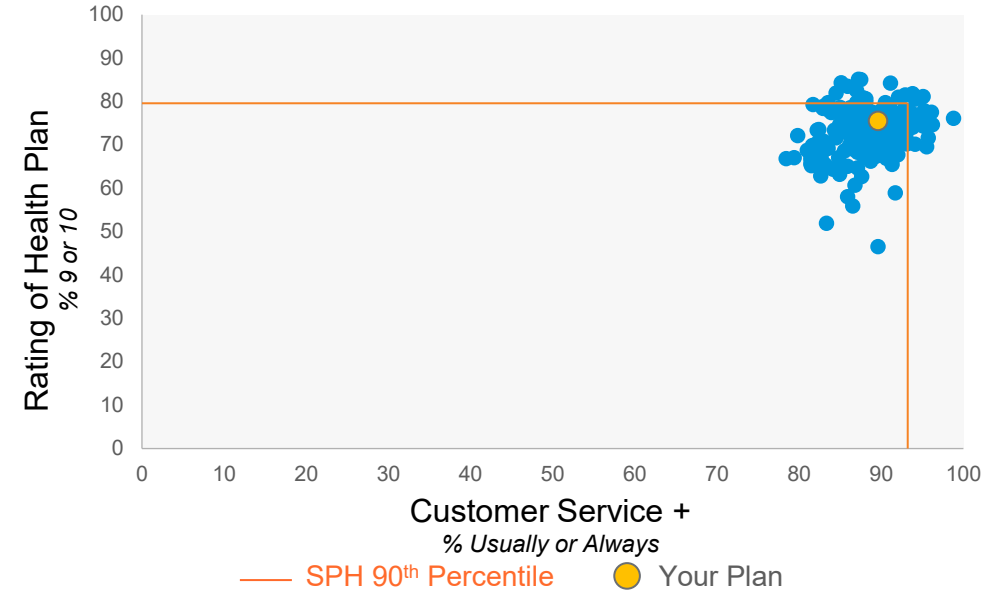


COMPOSITE

	QC %tile Rank	Score
% A or U	61 st	89.6%



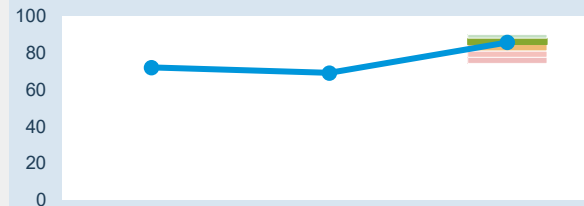
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G: Q44. Got information or help from customer service (n=367) 25.6%

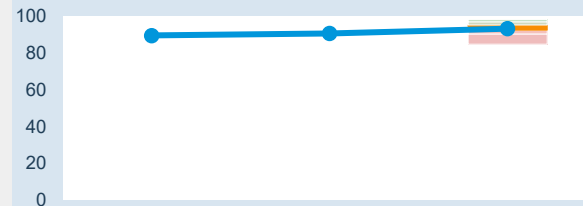
Q45. Provided information or help

Year	SRS
2020 (n=97) [^]	72.2%
2021 (n=88) [^]	69.3%
2022 (n=92) [^]	85.9% ^{↑‡}



Q46. Treated with courtesy and respect

Year	SRS
2020 (n=97) [^]	89.7%
2021 (n=87) [^]	90.8%
2022 (n=91) [^]	93.4%

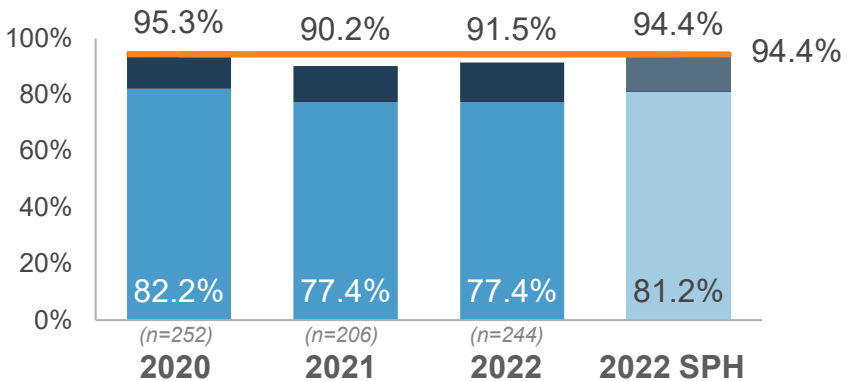


Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (‡/‡) or benchmark score (▲/▼).

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

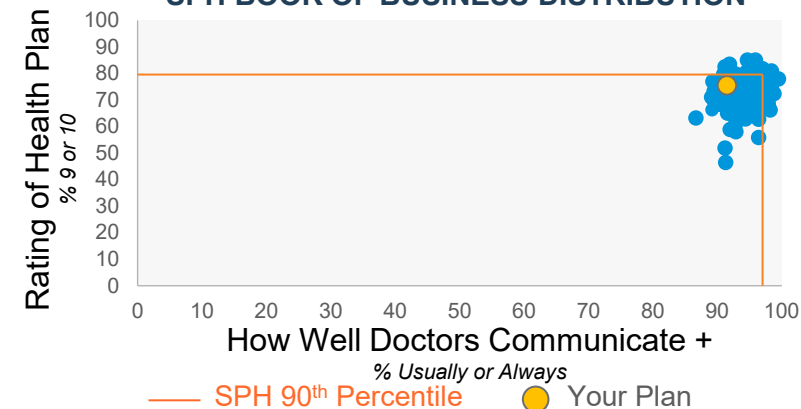
COMPOSITE

% A or U	QC %tile Rank	Score
	10th	91.5%



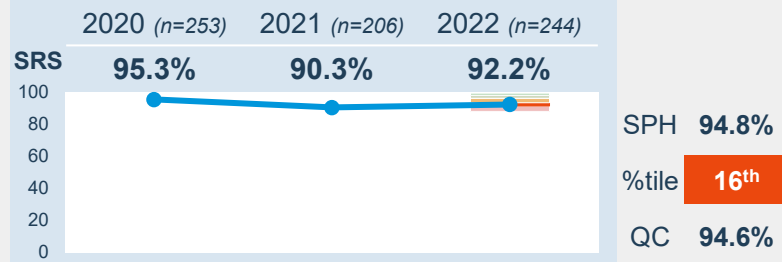
■ % Always
■ % Usually
— QC Child (% A or U)

SPH BOOK OF BUSINESS DISTRIBUTION

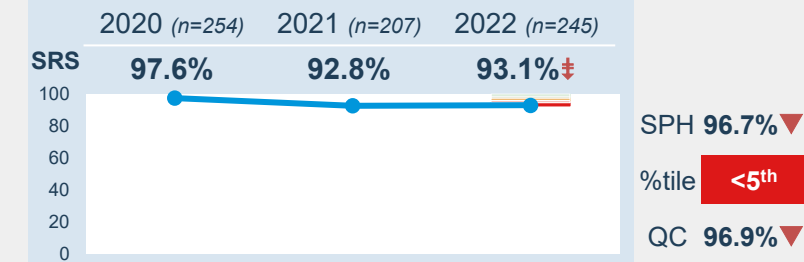


ATTRIBUTES

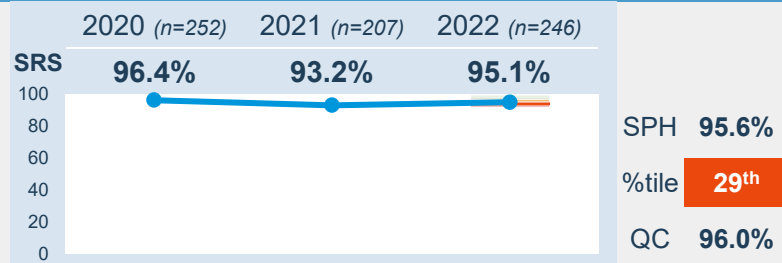
Q27. Dr. explained things



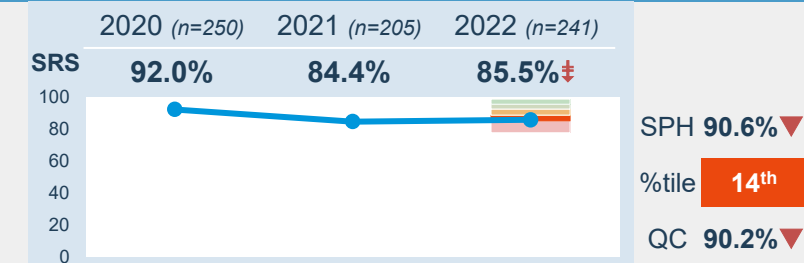
Q29. Dr. showed respect



Q28. Dr. listened carefully



Q32. Dr. spent enough time



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

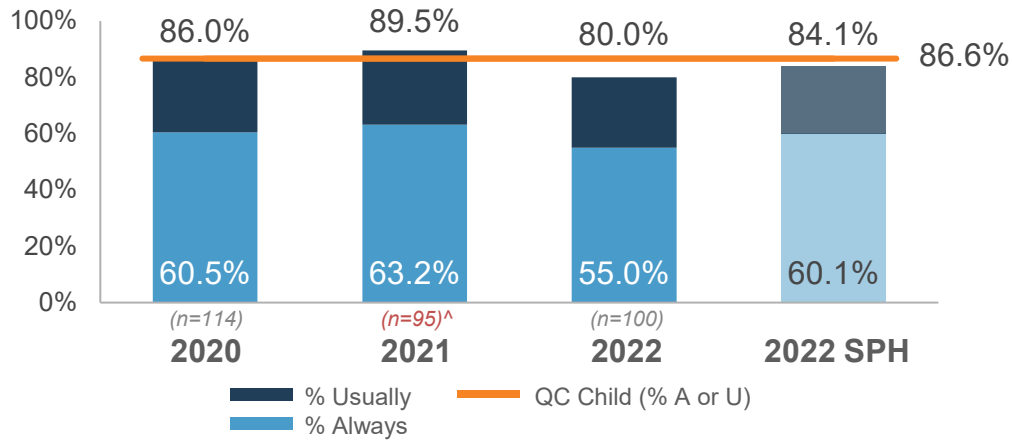
[‡]Denominator less than 100. NCQA will assign an NA to this measure.



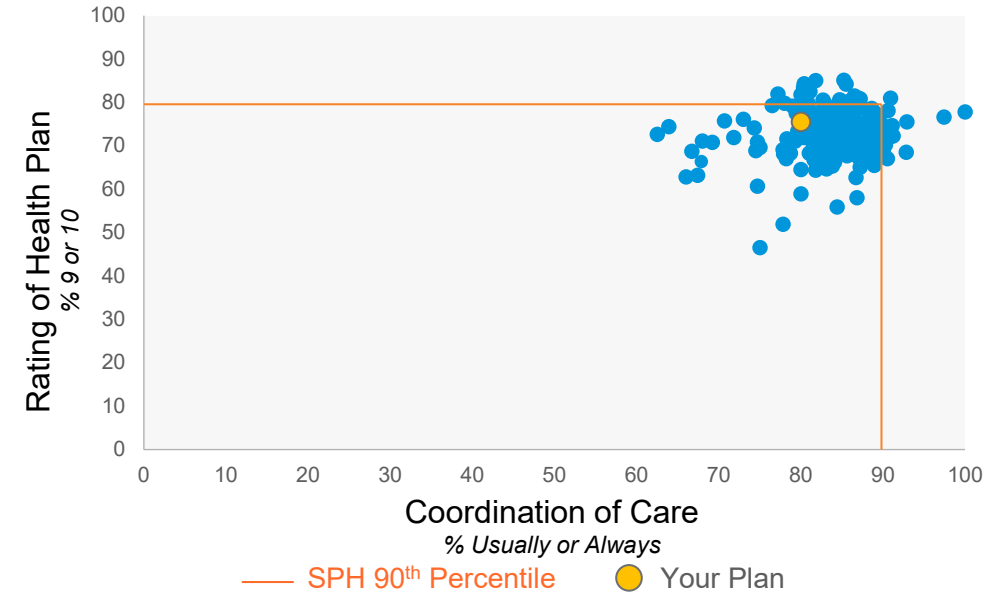
COORDINATION OF CARE

MEDICAID CHILD: GENERAL POPULATION

	QC %tile Rank	Score
% A or U	<5 th	80.0%



SPH BOOK OF BUSINESS DISTRIBUTION



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.



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SUMMARY OF TREND AND BENCHMARKS

- HUSKY Health program (A/C/D)

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

Summary Rate Scores: Shows how your plan's composite and key question Summary Rates compare to 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.

Plan Percentile Rankings: 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 (General Population)	2021 Quality Compass® All Plans (CCC Population)	2021 NCQA 1-100 Benchmark (General Population)	2021 NCQA 1-100 Benchmark (CCC Population)	2022 SPH Analytics Book of Business (General Population)	2022 SPH Analytics Book of Business (CCC Population)
	Includes all Medicaid child samples (Non-CCC and CCC) that submitted data to NCQA in 2021.	Includes all Medicaid child samples (CCC) 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 child data (Non-CCC and CCC) collected by NCQA in 2021.	A percentile benchmark (with values ranging from the first through the one hundredth percentile) calculated by NCQA and derived from Medicaid child data (CCC) collected by NCQA in 2021.	Includes all the Medicaid child samples (Non-CCC and CCC) that contracted with SPH Analytics to administer the 2022 CAHPS 5.1H survey and submitted data to NCQA.	Includes all the Medicaid child samples (CCC) that contracted with SPH Analytics to administer the 2022 CAHPS 5.1H survey and submitted data to NCQA.
PROS	<ul style="list-style-type: none"> Contains more plans than the SPH Book of Business Is presented in NCQA's The State of Health Care Quality 	<ul style="list-style-type: none"> Contains more plans than the SPH Book of Business Is presented in NCQA's The State of Health Care Quality Provides a CCC benchmark 	<ul style="list-style-type: none"> Utilized by SPH Analytics to calculate approximate percentile ranking of plan scores in relation to the Quality Compass® All Plans benchmark 	<ul style="list-style-type: none"> Utilized by SPH Analytics to calculate approximate percentile ranking of plan scores in relation to the Quality Compass® All Plans benchmark Provides a CCC benchmark 	<ul style="list-style-type: none"> Provides a benchmark for each question from the survey Permits precise percentile ranking of plan compared to benchmark 	<ul style="list-style-type: none"> Provides a benchmark for each question from the survey Permits precise percentile ranking of plan compared to benchmark Provides a CCC benchmark
CONS	<ul style="list-style-type: none"> Only contains benchmarks for certain key questions, composites, and rating questions 	<ul style="list-style-type: none"> Only contains benchmarks for certain key questions, composites, and rating questions 	<ul style="list-style-type: none"> Only contains benchmarks for certain key questions, composites, and rating questions 	<ul style="list-style-type: none"> Only contains benchmarks for certain key questions, composites, and rating questions 	<ul style="list-style-type: none"> Contains fewer plans than the Public Report and the Quality Compass® All Plans Benchmarks 	<ul style="list-style-type: none"> Contains fewer plans than the Quality Compass® All Plans Benchmarks
SIZE	183 Plans	57 Plans	183 Plans	57 Plans	189 Plans 47,922 Respondents	70 Plans 14,580 Respondents



SUMMARY RATE SCORES

MEDICAID CHILD: GENERAL POPULATION

	2022 Valid n	2020	2021	2022	2022 GP SPH BoB	2021 GP QC
Rating Questions (% 9 or 10)						
★ Q49. Rating of Health Plan	372	76.9%	77.4%	75.5%	72.5%	72.2%
★ Q9. Rating of Health Care	247	72.0%	71.6%	72.9%	71.2%	74.3%
★ Q36. Rating of Personal Doctor	321	80.2%	79.7%	72.9% ↓‡	77.4%	78.0% ▼
★ Q43. Rating of Specialist	85 [^]	76.7%	76.4%	69.4%	73.9%	73.8%
Rating Questions (% 8, 9 or 10)						
Q49. Rating of Health Plan	372	91.0%	89.6%	87.4%	86.9%	86.7%
Q9. Rating of Health Care	247	90.9%	89.3%	87.0%	87.6%	88.9%
Q36. Rating of Personal Doctor	321	92.4%	90.4%	86.9% ‡	90.3%	90.6%
Q43. Rating of Specialist	85 [^]	87.8%	88.8%	81.2%	87.5%	87.4%
★ Getting Needed Care (% Usually or Always)	171	86.5%	84.0%	82.5%	84.4%	85.7%
Q10. Getting care, tests, or treatment	248	92.3%	89.3%	89.1%	89.2%	90.3%
Q41. Getting specialist appointment	95 [^]	80.6%	78.7%	75.8%	79.5%	81.9%
★ Getting Care Quickly (% Usually or Always)	166	88.6%	89.9%	84.3%	86.7%	86.9%
Q4. Getting urgent care	78 [^]	88.9%	94.8%	87.2%	90.5%	91.0%
Q6. Getting routine care	254	88.3%	85.0%	81.5% ‡	82.9%	83.0%
★ Q35. Coordination of Care	100	86.0%	89.5%	80.0%	84.1%	86.6%
Customer Service + (% Usually or Always)	91 [^]	80.9%	80.1%	89.6%	88.2%	88.3%
Q45. Provided information or help	92 [^]	72.2%	69.3%	85.9% ↑‡	82.7%	82.8%
Q46. Treated with courtesy and respect	91 [^]	89.7%	90.8%	93.4%	93.7%	93.9%
How Well Doctors Communicate + (% Usually or Always)	244	95.3%	90.2%	91.5%	94.4%	94.4%
Q27. Dr. explained things	244	95.3%	90.3%	92.2%	94.8%	94.6%
Q28. Dr. listened carefully	246	96.4%	93.2%	95.1%	95.6%	96.0%
Q29. Dr. showed respect	245	97.6%	92.8%	93.1% ‡	96.7% ▼	96.9% ▼
Q32. Dr. spent enough time	241	92.0%	84.4%	85.5% ‡	90.6% ▼	90.2% ▼
Q48. Ease of Filling Out Forms + (% Usually or Always)	356	95.4%	95.6%	94.7%	96.1%	96.0%

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.



SUMMARY RATE SCORES

MEDICAID CHILD: CCC POPULATION

	2022 Valid n	2020	2021	2022	2022 CCC SPH BoB	2021 CCC QC
Rating Questions (% 9 or 10)						
★ Q49. Rating of Health Plan	298	73.1%	75.7%	72.1%	69.7%	68.6%
★ Q9. Rating of Health Care	231	71.8%	70.4%	70.6%	69.1%	71.7%
★ Q36. Rating of Personal Doctor	273	80.6%	79.1%	73.6% ‡	77.5%	78.4%
★ Q43. Rating of Specialist	122	71.5%	76.3%	71.3%	74.0%	74.4%
Rating Questions (% 8, 9 or 10)						
Q49. Rating of Health Plan	298	88.3%	87.9%	87.6%	84.4%	83.9%
Q9. Rating of Health Care	231	87.2%	88.1%	88.3%	86.5%	87.8%
Q36. Rating of Personal Doctor	273	89.7%	91.3%	87.9%	89.5%	89.5%
Q43. Rating of Specialist	122	84.7%	89.7%	85.2%	87.1%	87.5%
★ Getting Needed Care (% Usually or Always)	183	88.0%	85.9%	83.1%	87.5%	87.5%
Q10. Getting care, tests, or treatment	234	93.6%	89.3%	89.7%	90.4%	90.6%
Q41. Getting specialist appointment	132	82.4%	82.5%	76.5%	84.5% ▼	85.0% ▼
★ Getting Care Quickly (% Usually or Always)	163	92.1%	89.5%	87.3%	90.5%	90.8%
Q4. Getting urgent care	104	93.2%	95.6%	90.4%	92.4%	94.4%
Q6. Getting routine care	223	91.0%	83.5%	84.3% ‡	88.5%	88.1%
★ Q35. Coordination of Care	133	86.3%	84.9%	78.9%	83.3%	85.2%
Customer Service + (% Usually or Always)	86^	85.6%	88.5%	92.5%	89.3%	91.2%
Q45. Provided information or help	87^	80.0%	80.5%	87.4%	83.7%	86.8%
Q46. Treated with courtesy and respect	86^	91.1%	96.6%	97.7%	94.8%	95.6%
How Well Doctors Communicate + (% Usually or Always)	231	94.4%	95.3%	94.1%	94.9%	94.6%
Q27. Dr. explained things	228	94.9%	95.4%	93.4%	95.7%	95.2%
Q28. Dr. listened carefully	234	95.3%	95.9%	96.6%	95.5%	95.7%
Q29. Dr. showed respect	233	96.1%	97.5%	95.7%	96.5%	96.7%
Q32. Dr. spent enough time	232	91.4%	92.5%	90.5%	91.9%	91.0%
Q48. Ease of Filling Out Forms + (% Usually or Always)	289	94.8%	95.0%	94.5%	95.9%	95.6%

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.

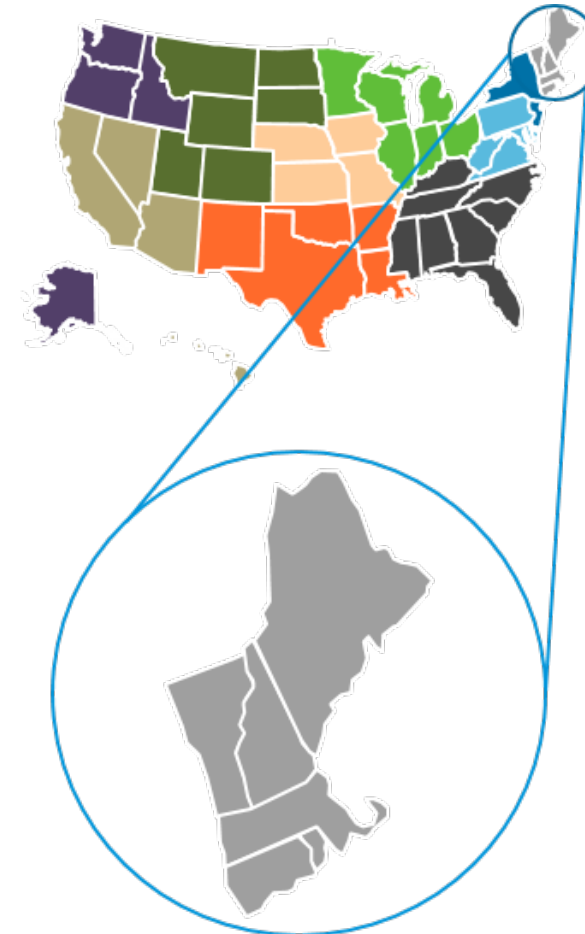
CCC MEASURES	2022 Valid n	2020	2021	2022	2022 CCC SPH BoB	2021 CCC QC
Q51. Access to Rx Medicines (% Usually or Always)	222	92.4%	93.8%	95.0%	91.5% ▲	91.4% ▲
Access to Specialized Services (% Usually or Always)	90^	83.5%	80.6%	79.0%	73.0% ▲	74.0%
Q15. Easy to get special medical equipment	32^	82.9%	71.0%	84.4%	71.9%	NA
Q18. Easy to get special therapy	83^	83.8%	87.1%	74.7% ↓	74.2%	75.0%
Q21. Easy to get treatment or counseling	155	83.9%	83.7%	78.1%	72.9%	74.4%
FCC: Dr Who Knows Child (% Yes)	202	92.6%	93.9%	91.8%	91.5%	90.8%
Q33. Discussed feelings/growth/behavior	231	91.7%	90.4%	89.2%	90.4%	89.9%
Q38. Understands effects on child's life	189	94.4%	97.8%	94.7%	93.7%	92.9%
Q39. Understands effects on family's life	186	91.8%	93.6%	91.4%	90.4%	90.0%
Q8. FCC: Getting Needed Info (% Usually or Always)	233	92.1%	87.4%	90.6%	92.0%	90.8%
Coordination of Care for CCC (% Yes)	107	78.6%	79.5%	75.4%	76.6%	77.1%
Q13. Helped contact child's school/daycare	70^	96.3%	97.1%	92.9%	92.6%	NA
Q24. Helped coordinate child's care	145	60.9%	61.9%	57.9%	60.5%	60.3%

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.

	SUMMARY RATE	2022 SPH BoB REGION
Rating Questions (% 9 or 10)		
★ Q49. Rating of Health Plan	75.5%	70.1% ◆
★ Q9. Rating of Health Care	72.9%	70.2%
★ Q36. Rating of Personal Doctor	72.9%	76.5%
★ Q43. Rating of Specialist	69.4%	72.7%
Rating Questions (% 8, 9 or 10)		
Q49. Rating of Health Plan	87.4%	86.0%
Q9. Rating of Health Care	87.0%	88.3%
Q36. Rating of Personal Doctor	86.9%	90.0%
Q43. Rating of Specialist	81.2%	87.5%
★ Getting Needed Care (% Usually or Always)	82.5%	86.5%
Q10. Getting care, tests, or treatment	89.1%	91.4%
Q41. Getting specialist appointment	75.8%	81.6%
★ Getting Care Quickly (% Usually or Always)	84.3%	88.5%
Q4. Getting urgent care	87.2%	91.8%
Q6. Getting routine care	81.5%	85.3%
★ Q35. Coordination of Care	80.0%	86.5%
Customer Service + (% Usually or Always)		
Q45. Provided information or help	85.9%	82.3%
Q46. Treated with courtesy and respect	93.4%	94.6%
How Well Doctors Communicate + (% Usually or Always)		
Q27. Dr. explained things	92.2%	95.0%
Q28. Dr. listened carefully	95.1%	95.1%
Q29. Dr. showed respect	93.1%	97.3% ◆
Q32. Dr. spent enough time	85.5%	91.6% ◆
Q48. Ease of Filling Out Forms + (% Usually or Always)	94.7%	95.6%

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



Region 1: Boston

- Connecticut
- Maine
- Rhode Island
- Massachusetts
- New Hampshire
- Vermont

Significance Testing

Current year score is significantly higher/lower (◆/◆) than the 2022 SPH BoB Region score.



	2022 Plan Score	QC %tile	National Percentiles from 2021 Quality Compass									SPH %tile	National Percentiles from 2022 SPH Book of Business								
			5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th		5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
Rating Questions (% 9 or 10)																					
★ Q49. Rating of Health Plan	75.5%	68 th	60.6	63.9	68.4	70.0	72.5	75.4	76.5	79.6	81.6	68 th	64.4	66.2	68.8	70.6	73.1	75.4	76.7	79.6	81.1
★ Q9. Rating of Health Care	72.9%	35 th	66.3	68.9	71.1	72.5	74.4	76.5	77.2	80.0	81.2	58 th	62.9	65.1	67.5	69.2	71.4	74.0	75.2	78.1	78.9
★ Q36. Rating of Personal Doctor	72.9%	10 th	71.6	72.8	75.6	76.6	78.2	79.9	80.4	82.9	83.9	12 th	69.9	72.4	74.9	75.7	77.3	78.9	80.2	83.3	84.3
★ Q43. Rating of Specialist	69.4%	18 th	68.3	69.2	71.2	72.3	74.1	76.0	76.1	77.5	80.9	24 th	61.1	64.7	69.7	71.2	73.9	76.9	78.3	82.6	86.0
Rating Questions (% 8, 9 or 10)																					
Q49. Rating of Health Plan	87.4%	51 st	78.6	81.8	84.2	85.3	87.2	88.7	89.7	91.3	92.5	50 th	80.3	82.0	84.4	85.6	87.3	89.3	89.9	92.1	92.8
Q9. Rating of Health Care	87.0%	22 nd	84.1	85.3	87.3	87.8	88.8	90.1	90.8	92.6	93.7	42 nd	81.5	82.8	85.6	86.4	87.9	89.1	90.0	91.5	92.7
Q36. Rating of Personal Doctor	86.9%	9 th	86.4	87.1	88.9	89.7	90.9	91.7	92.2	94.2	94.9	8 th	85.4	87.1	88.9	89.5	90.5	91.6	92.4	93.6	94.2
Q43. Rating of Specialist	81.2%	6 th	80.7	82.7	85.4	86.0	86.8	88.9	90.3	91.1	93.6	10 th	78.6	81.2	84.8	86.2	88.3	89.6	90.5	92.9	94.4
★ Getting Needed Care (% U/A)	82.5%	23rd	78.3	79.4	82.7	84.3	85.7	88.0	89.0	90.9	92.3	37th	74.8	76.5	80.6	82.1	84.4	86.4	87.6	90.2	92.1
Q10. Getting care, tests, or treatment	89.1%	36 th	83.9	85.8	88.2	89.1	90.4	92.4	93.0	94.7	95.2	46 th	81.3	82.7	86.2	87.6	89.7	91.8	92.4	93.9	95.1
Q41. Getting specialist appointment	75.8%	11 th	72.7	75.2	79.0	80.4	82.7	84.5	85.4	88.4	89.5	35 th	64.9	70.0	74.2	75.0	79.1	82.6	84.3	88.2	89.1
★ Getting Care Quickly (% U/A)	84.3%	25th	78.8	79.8	84.1	85.2	87.6	89.3	90.0	92.5	93.6	30th	76.2	79.1	83.5	84.8	86.8	89.2	90.1	91.8	92.9
Q4. Getting urgent care	87.2%	22 nd	84.7	84.7	89.3	89.3	92.4	93.5	93.5	94.3	94.3	29 th	78.8	81.8	86.6	87.7	90.8	92.9	93.9	95.8	97.6
Q6. Getting routine care	81.5%	36 th	72.9	75.8	79.3	81.1	83.4	85.6	86.4	89.1	91.0	37 th	71.2	75.1	78.8	81.0	83.7	85.7	87.3	89.4	90.6
★ Q35. Coordination of Care	80.0%	<5th	80.4	81.1	83.2	85.2	87.8	88.6	89.1	90.8	91.4	19th	71.9	77.3	81.0	82.1	84.2	86.6	87.2	89.8	90.6
Customer Service + (% U/A)	89.6%	61st	83.5	84.7	86.5	86.9	88.0	90.1	90.4	92.3	93.0	60th	81.7	82.9	85.9	86.8	88.3	90.3	91.1	93.2	95.0
Q45. Provided information or help	85.9%	78 th	76.0	77.8	80.3	81.2	82.7	84.8	85.7	88.2	89.3	68 th	73.8	76.1	78.6	80.8	82.9	85.7	87.2	90.3	91.6
Q46. Treated with courtesy and respect	93.4%	41 st	89.4	90.5	92.2	92.6	94.5	95.3	95.6	97.1	97.5	44 th	86.6	88.9	92.0	92.7	93.9	95.5	96.3	98.1	100
How Well Doctors Communicate + (% U/A)	91.5%	10th	90.6	91.4	92.9	93.4	94.3	95.5	96.0	97.3	97.9	13th	90.2	91.1	92.8	93.5	94.6	95.7	96.1	97.0	97.6
Q27. Dr. explained things	92.2%	16 th	90.0	91.2	92.8	93.2	94.7	96.1	96.6	97.8	98.4	17 th	89.1	90.5	93.2	94.0	95.3	96.3	96.7	97.9	98.3
Q28. Dr. listened carefully	95.1%	29 th	92.8	93.5	94.9	95.2	95.8	97.0	97.4	98.4	98.9	39 th	91.8	92.7	94.0	94.7	95.8	96.6	96.9	98.1	98.7
Q29. Dr. showed respect	93.1%	<5 th	93.9	94.7	95.8	96.1	96.9	97.6	98.1	98.9	99.3	<5 th	93.2	94.0	95.6	95.9	96.8	97.4	98.0	98.9	99.3
Q32. Dr. spent enough time	85.5%	14 th	83.0	84.8	87.8	88.5	90.2	92.2	93.0	95.3	96.5	10 th	83.7	85.5	87.9	89.1	91.2	92.5	93.2	94.9	95.8
Q48. Ease of Filling Out Forms + (% U/A)	94.7%	21st	93.0	93.9	95.0	95.3	96.1	96.7	97.1	98.0	98.4	17th	93.4	94.2	95.0	95.5	96.2	96.9	97.2	97.9	98.2



	2022 Plan Score	QC %tile	National Percentiles from 2021 Quality Compass									SPH %tile	National Percentiles from 2022 SPH Book of Business								
			5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th		5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
Rating Questions (% 9 or 10)																					
★ Q49. Rating of Health Plan	72.1%	73 rd	55.1	60.9	65.3	66.5	69.0	71.4	72.3	76.4	78.7	58 th	60.9	62.1	65.8	67.3	69.5	74.2	75.3	78.4	80.2
★ Q9. Rating of Health Care	70.6%	41 st	63.2	64.4	68.3	69.9	71.4	74.8	76.3	78.3	79.6	55 th	58.8	60.1	65.7	67.9	70.4	71.7	72.8	76.3	78.9
★ Q36. Rating of Personal Doctor	73.6%	14 th	71.8	72.7	75.8	76.5	78.2	80.5	82.0	84.0	84.6	25 th	68.4	71.2	73.6	75.7	78.2	79.8	81.1	83.9	84.8
★ Q43. Rating of Specialist	71.3%	23 rd	68.3	69.0	71.4	71.9	74.3	76.6	77.9	80.1	80.3	31 st	65.4	68.0	70.9	71.5	73.4	75.7	77.6	80.5	84.7
Rating Questions (% 8, 9 or 10)																					
Q49. Rating of Health Plan	87.6%	80 th	75.3	78.8	81.9	82.8	84.5	86.4	86.7	88.5	88.8	72 nd	77.4	79.7	82.9	83.5	85.2	87.0	87.7	89.8	90.7
Q9. Rating of Health Care	88.3%	56 th	83.1	83.7	86.1	86.6	87.6	89.3	90.2	91.0	92.5	73 rd	80.4	81.4	84.1	85.7	86.7	88.0	88.6	90.7	92.6
Q36. Rating of Personal Doctor	87.9%	25 th	84.0	85.2	87.9	88.4	90.1	90.8	91.5	93.0	94.1	30 th	85.8	86.6	87.7	88.1	89.3	90.8	91.7	94.1	94.2
Q43. Rating of Specialist	85.2%	23 rd	82.9	83.7	85.7	86.8	87.7	89.1	89.6	90.8	91.4	28 th	79.8	82.2	85.0	85.5	87.1	88.4	89.1	90.9	92.6
★ Getting Needed Care (% U/A)	83.1%	13th	80.7	81.4	86.0	86.4	88.3	89.4	90.4	91.7	92.1	15th	79.8	81.6	85.0	86.2	89.0	90.3	90.6	91.8	92.8
Q10. Getting care, tests, or treatment	89.7%	37 th	84.6	86.6	88.3	89.6	91.4	92.4	93.2	94.1	94.6	26 th	82.4	84.7	89.2	90.1	91.7	92.4	93.1	94.6	95.8
Q41. Getting specialist appointment	76.5%	6 th	76.3	81.2	82.5	83.0	85.1	87.4	88.0	90.0	91.5	9 th	74.9	77.2	81.4	84.1	86.3	87.8	88.4	89.9	90.4
★ Getting Care Quickly (% U/A)	87.3%	10th	85.2	87.2	89.8	90.2	91.0	91.8	92.6	93.9	95.2	18th	83.7	85.8	89.2	89.7	91.1	92.4	93.0	94.4	95.5
Q4. Getting urgent care	90.4%	<5 th	90.7	91.1	92.2	92.6	94.6	95.5	97.0	97.4	97.9	22 nd	84.5	86.5	90.6	91.7	93.4	94.7	95.2	97.3	98.7
Q6. Getting routine care	84.3%	15 th	82.5	83.9	85.4	86.7	88.4	89.5	90.0	92.5	94.3	14 th	82.2	83.8	86.5	87.3	89.2	90.5	91.4	93.0	93.4
★ Q35. Coordination of Care	78.9%	<5th	80.2	80.7	82.8	84.1	85.1	86.8	87.9	89.7	90.0	20th	73.9	75.0	79.5	81.8	84.6	86.0	86.5	88.5	89.0
Customer Service + (% U/A)	92.5%	60th	84.7	86.8	89.7	89.9	90.7	93.0	94.1	94.2	96.2	76th	84.0	85.3	86.8	87.2	89.1	91.9	92.5	94.1	94.5
Q45. Provided information or help	87.4%	46 th	76.6	83.0	83.3	83.7	87.6	90.4	90.5	91.2	94.3	72 nd	77.0	77.6	79.5	80.5	84.0	86.9	87.9	90.7	92.5
Q46. Treated with courtesy and respect	97.7%	86 th	90.6	92.7	94.7	95.1	96.1	97.1	97.1	97.9	98.1	84 th	89.5	91.7	93.0	93.3	95.1	96.2	96.9	98.4	100
How Well Doctors Communicate + (% U/A)	94.1%	36th	90.6	91.8	93.3	93.9	94.9	95.6	95.9	97.0	97.6	29th	91.4	92.2	93.8	94.3	95.2	96.0	96.2	97.1	97.8
Q27. Dr. explained things	93.4%	21 st	90.2	91.5	93.8	94.7	95.7	96.5	96.7	97.4	98.2	16 th	92.2	92.6	94.4	94.9	95.8	96.6	97.0	98.2	98.8
Q28. Dr. listened carefully	96.6%	73 rd	92.5	92.9	94.5	95.3	95.9	96.4	96.8	98.0	98.3	67 th	92.3	92.9	94.4	95.1	95.6	96.6	97.0	97.7	98.3
Q29. Dr. showed respect	95.7%	28 th	94.3	95.0	95.7	96.1	96.9	97.4	97.8	98.4	98.8	24 th	94.3	94.5	95.8	96.1	96.8	97.4	97.6	98.8	98.9
Q32. Dr. spent enough time	90.5%	42 nd	84.6	85.6	88.3	89.5	91.5	92.7	93.9	95.7	96.4	25 th	86.8	87.7	90.5	91.5	92.9	94.0	94.6	95.7	96.4
Q48. Ease of Filling Out Forms + (% U/A)	94.5%	26th	92.0	93.1	94.5	95.0	95.9	96.5	96.8	97.5	97.9	16th	93.2	94.0	95.0	95.3	96.0	96.6	97.1	97.8	98.3



PERCENTILE RANKINGS

MEDICAID CHILD: CCC POPULATION

	2022 Plan Score	QC %tile	National Percentiles from 2021 Quality Compass									SPH %tile	National Percentiles from 2022 SPH Book of Business								
			5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th		5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
Q51. Access to Rx Medicines (% U/A)	95.0%	92nd	86.8	87.8	89.7	90.4	91.8	92.6	93.0	94.8	95.8	86 th	86.2	88.4	89.6	90.1	91.0	93.4	94.2	95.7	96.3
Access to Specialized Services (% U/A)	79.0%	85th	64.1	66.0	72.2	72.2	73.7	74.7	77.9	82.5	83.2	76 th	62.9	66.2	70.4	71.8	73.5	76.8	78.9	81.3	84.9
Q15. Easy to get special medical equipment	84.4%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	80 th	53.4	60.5	66.7	68.6	71.4	81.8	83.3	91.9	94.7
Q18. Easy to get special therapy	74.7%	49 th	66.0	70.3	72.1	72.4	75.1	77.6	78.0	79.1	82.6	54 th	60.3	62.1	68.9	70.6	74.3	79.5	82.5	86.8	90.2
Q21. Easy to get treatment or counseling	78.1%	74 th	64.4	65.5	69.7	71.7	75.9	77.3	78.2	81.7	82.9	72 nd	61.7	64.2	67.4	69.9	75.5	77.7	78.4	81.6	85.5
FCC: Dr Who Knows Child (% Yes)	91.8%	69th	86.4	87.6	89.8	90.5	91.0	91.3	92.4	94.2	94.4	55 th	88.5	88.9	90.2	91.0	91.7	92.3	92.8	93.4	93.8
Q33. Discussed feelings/growth/behavior	89.2%	36 th	84.4	85.7	88.3	89.0	90.4	91.6	92.0	93.7	95.1	32 nd	87.8	88.1	88.8	89.3	90.0	91.5	92.0	93.5	94.2
Q38. Understands effects on child's life	94.7%	77 th	88.4	89.9	91.5	91.8	93.0	94.0	94.5	95.7	96.6	63 rd	89.1	90.6	92.3	92.9	93.4	95.0	95.5	96.1	96.9
Q39. Understands effects on family's life	91.4%	66 th	85.3	85.7	88.0	89.0	90.2	91.5	91.8	93.8	94.9	73 rd	85.9	86.9	89.6	90.1	90.6	91.3	91.6	93.6	94.6
Q8. FCC: Getting Needed Info (% U/A)	90.6%	41st	85.8	87.9	89.3	89.6	91.0	91.8	92.6	93.7	96.0	20 th	85.7	87.6	91.2	91.8	92.5	93.1	94.2	95.2	96.0
Coordination of Care for CCC (% Yes)	75.4%	21st	69.3	72.0	75.6	76.6	78.1	78.9	78.9	81.2	81.4	36 th	70.2	72.1	74.3	75.3	77.2	78.7	79.1	81.2	81.7
Q13. Helped contact child's school/daycare	92.9%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	47 th	81.2	85.0	90.0	90.9	93.3	95.3	96.4	100	100
Q24. Helped coordinate child's care	57.9%	39 th	49.4	50.4	56.4	56.6	60.9	64.5	64.9	67.4	69.1	36 th	51.3	53.2	56.9	57.8	60.5	63.1	65.4	69.6	72.3



a Press Ganey Solution

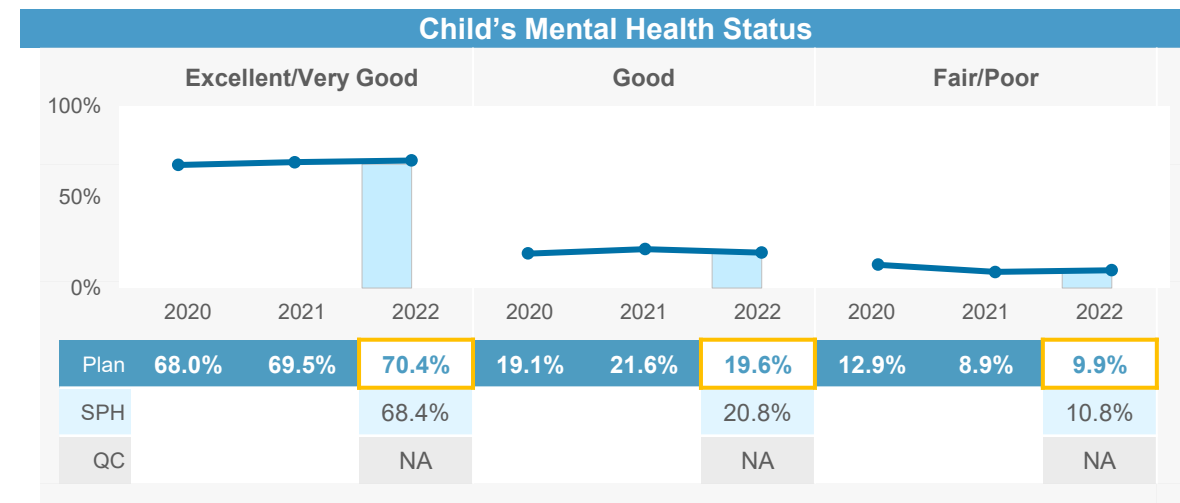
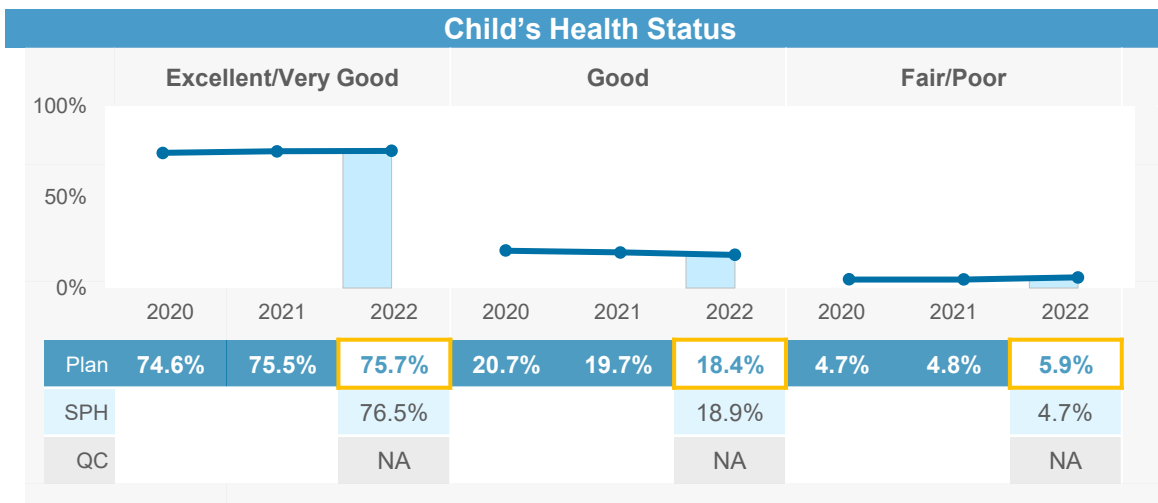
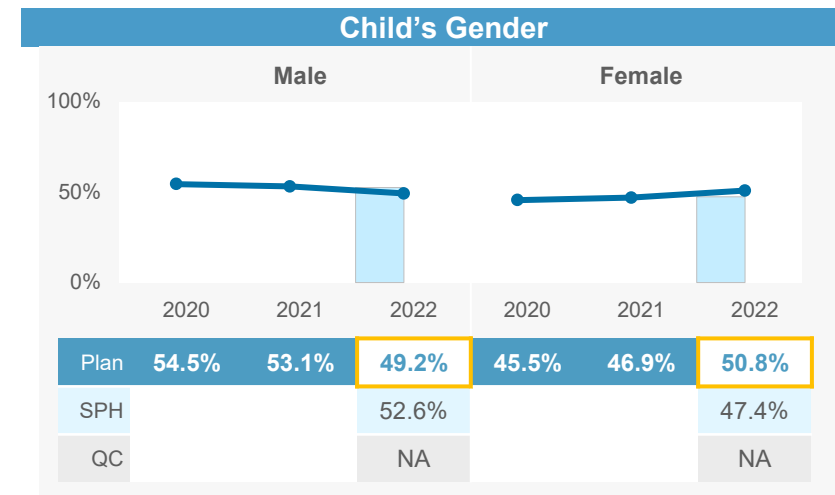
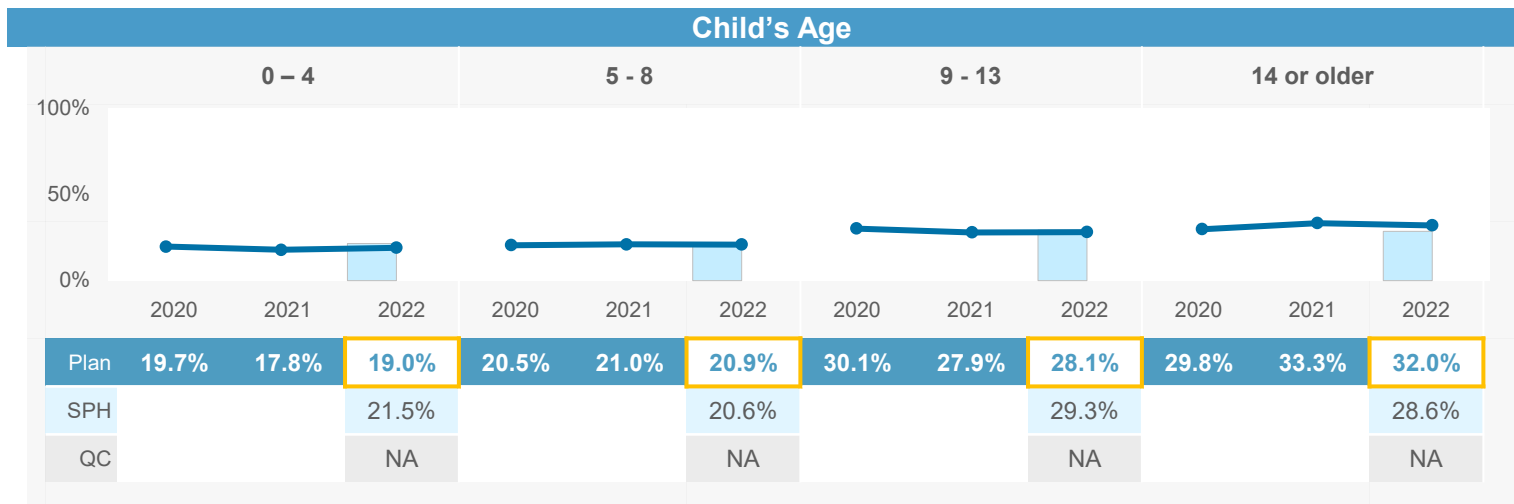
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DEMOGRAPHIC COMPOSITION

- HUSKY Health program (A/C/D)

PROFILE OF SURVEY RESPONDENTS

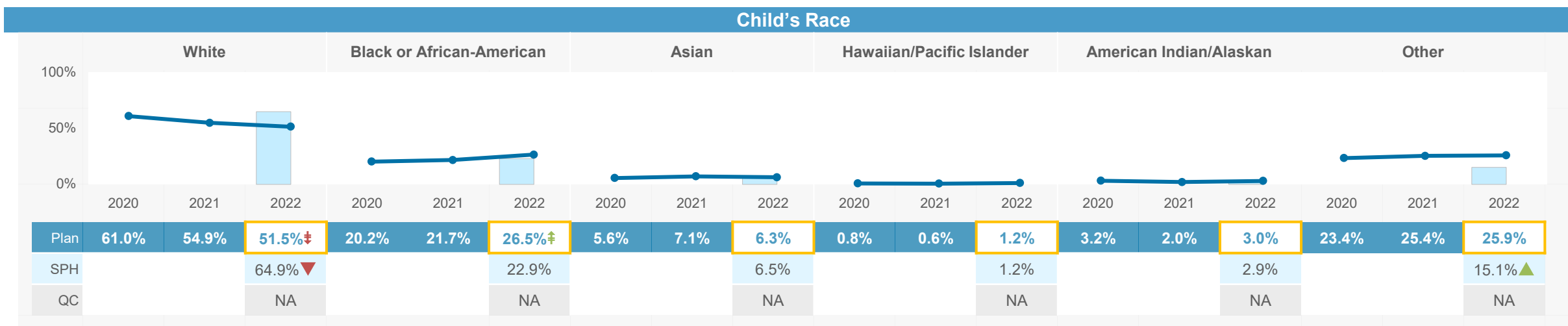
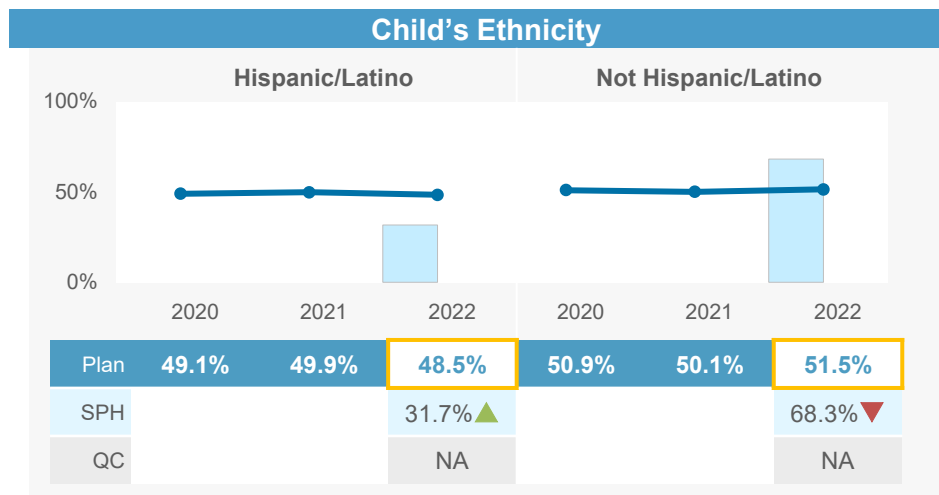
MEDICAID CHILD: GENERAL POPULATION



More info.

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.



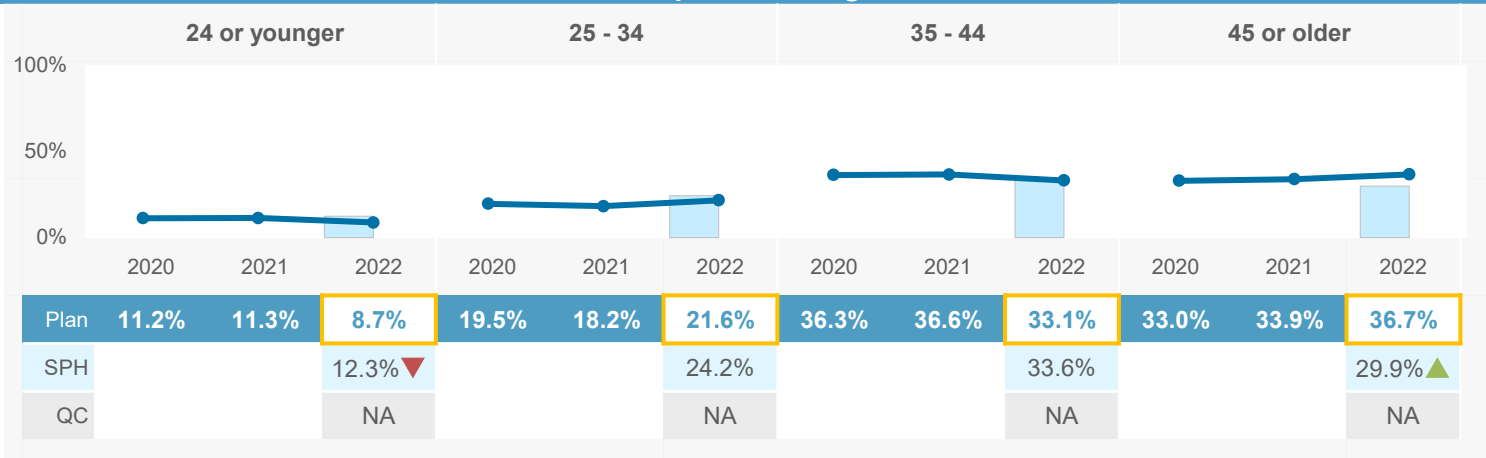
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Benchmarks: SPH refers to the 2022 SPH Book of Business benchmark. QC refers to the 2021 QC National Data benchmark. NCQA did not publish demographics for the 2021 benchmark.

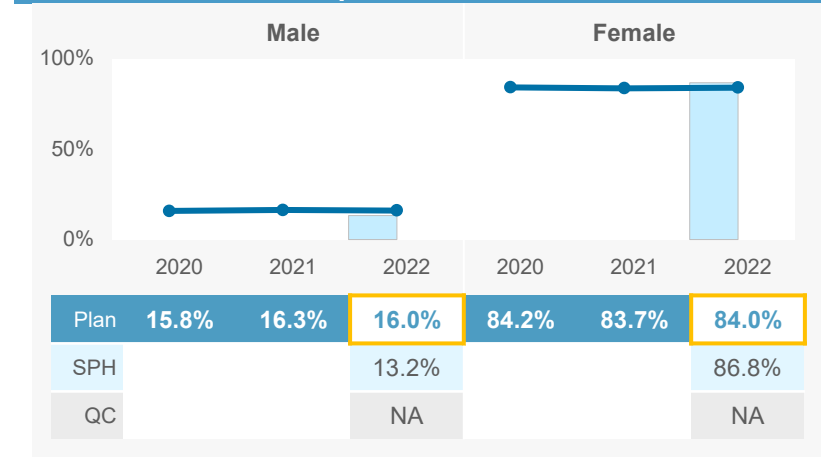
PROFILE OF SURVEY RESPONDENTS

MEDICAID CHILD: GENERAL POPULATION

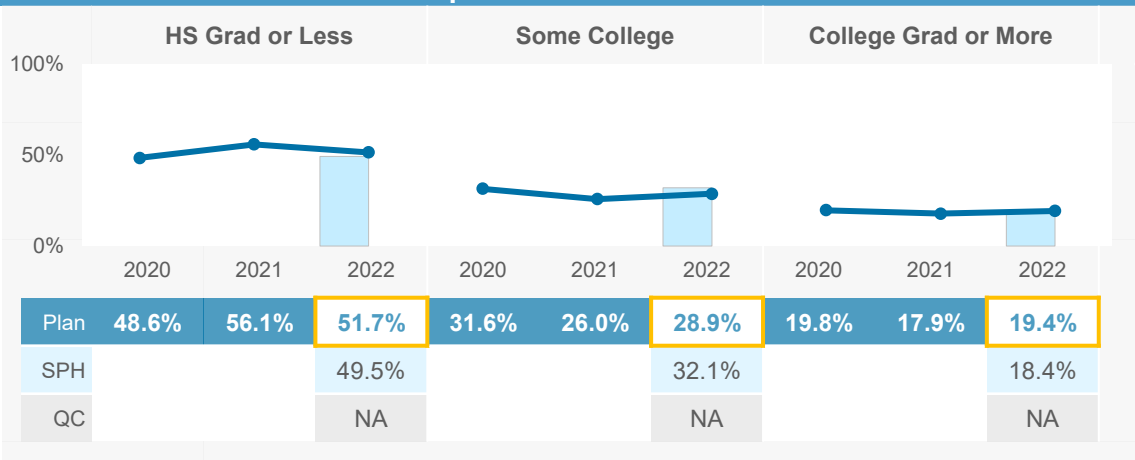
Respondent's Age



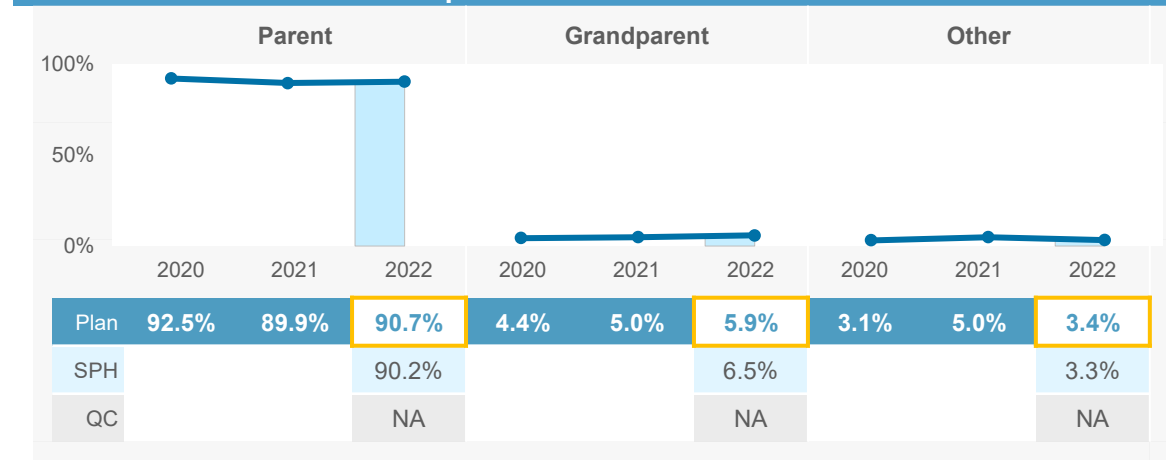
Respondent's Gender



Respondent's Education

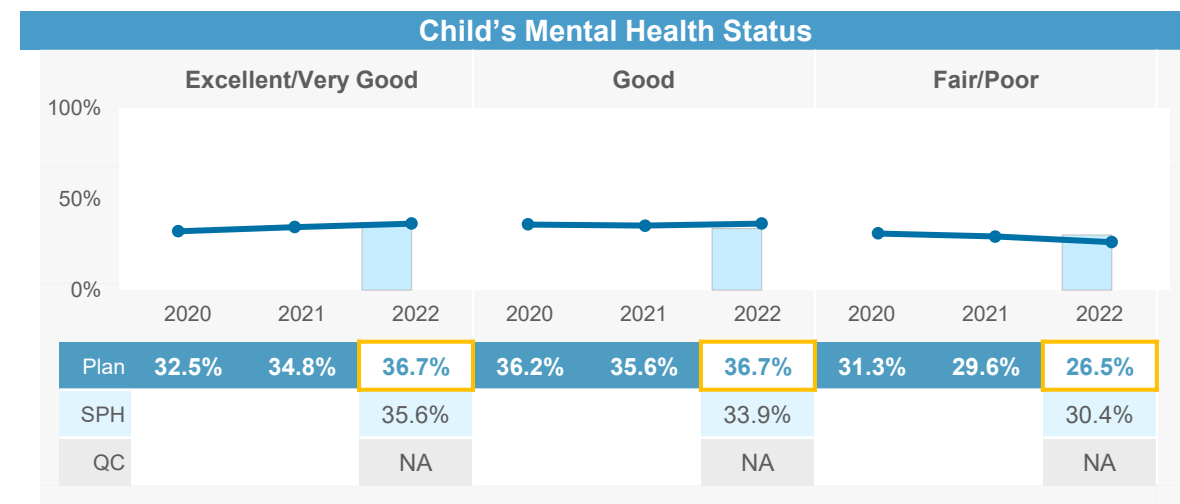
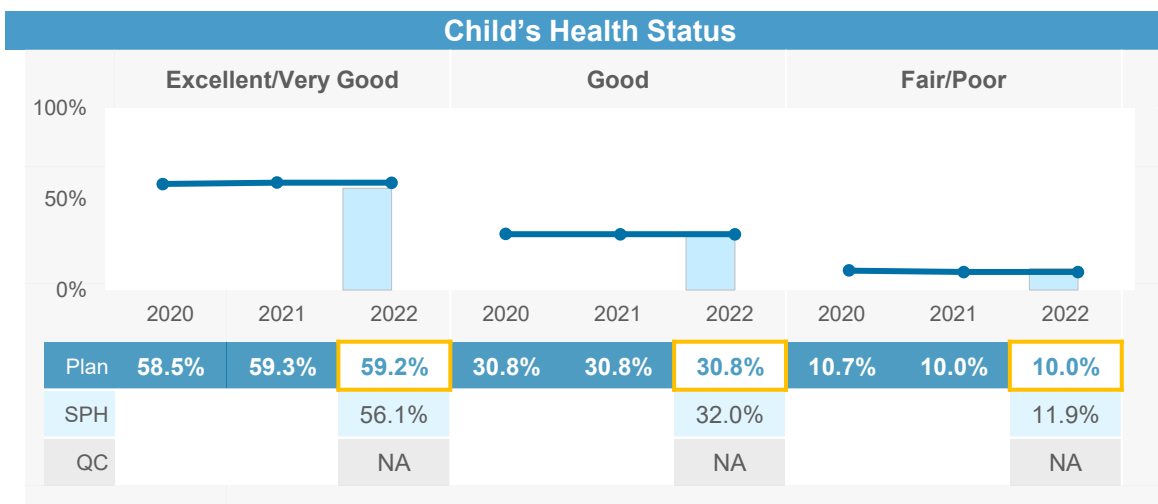
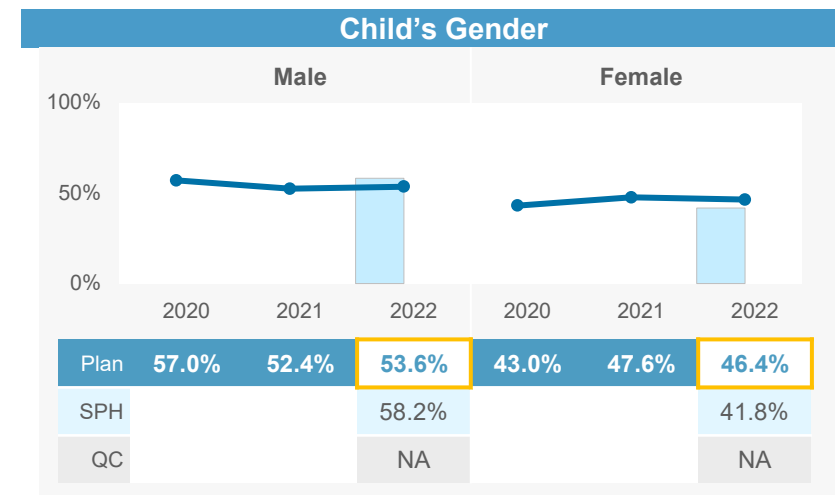
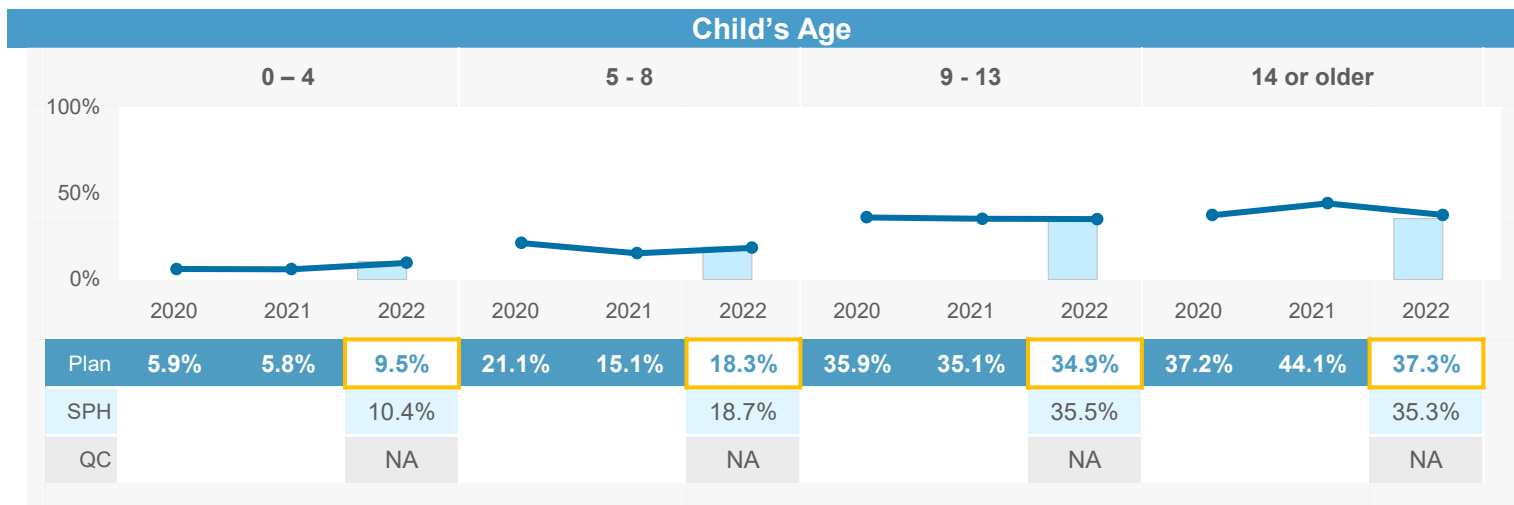


Respondent's Relation to Child



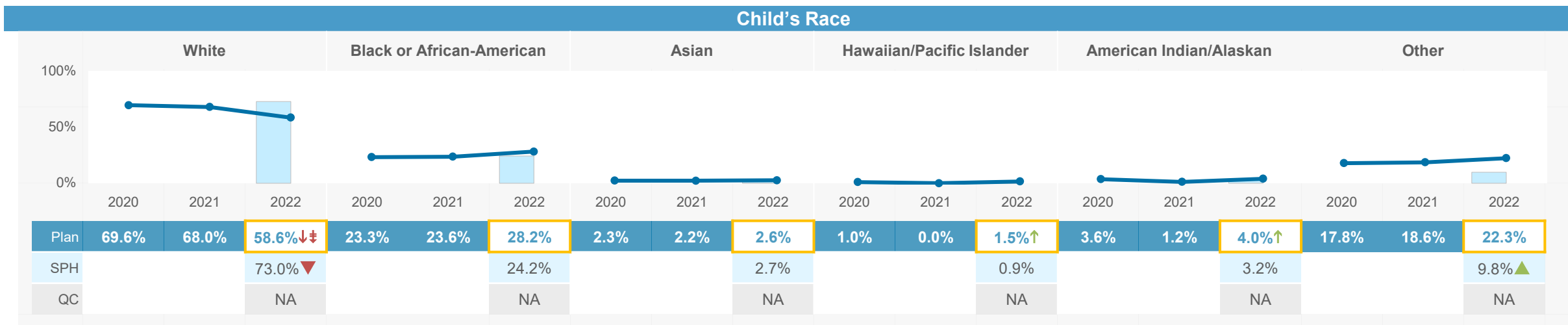
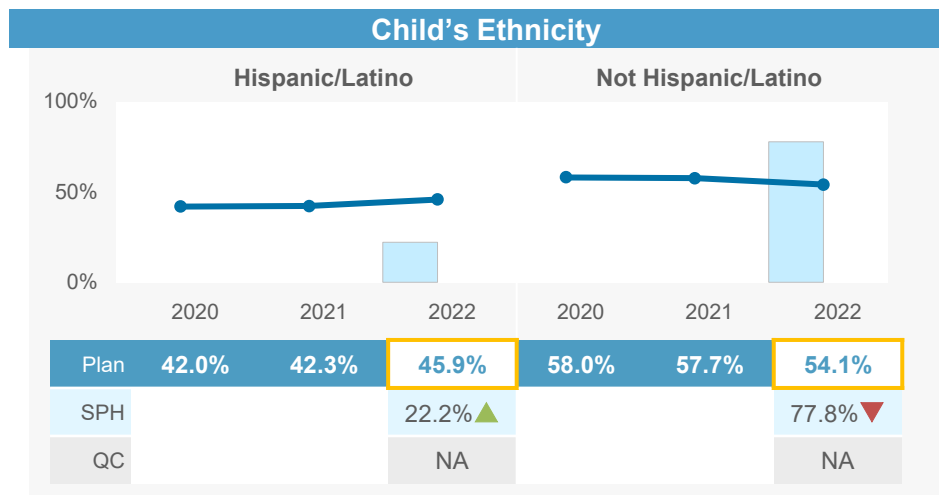
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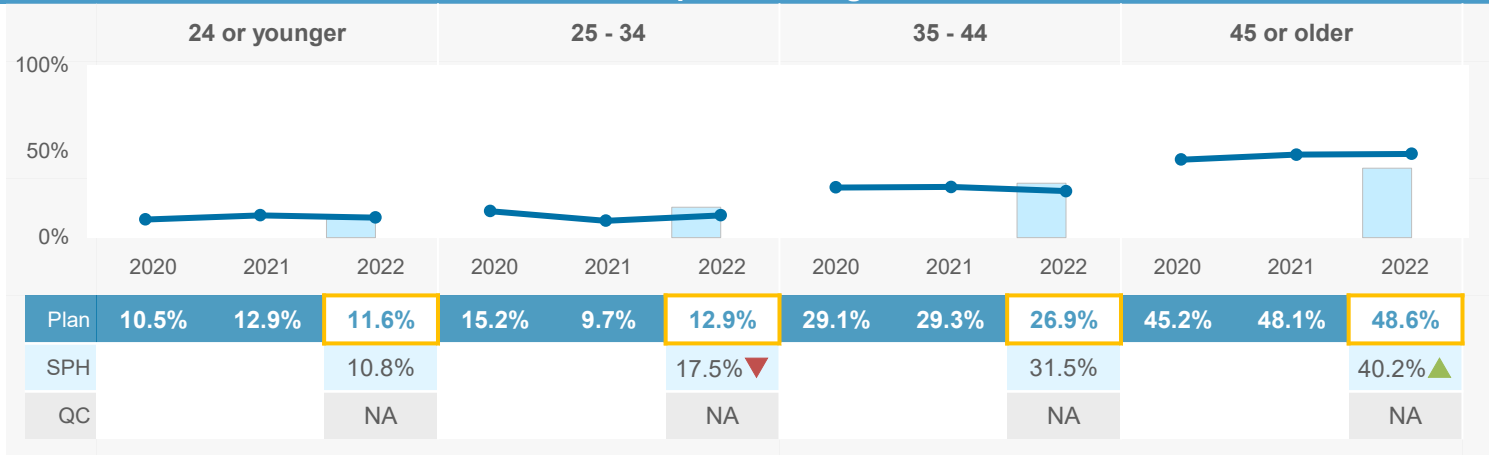
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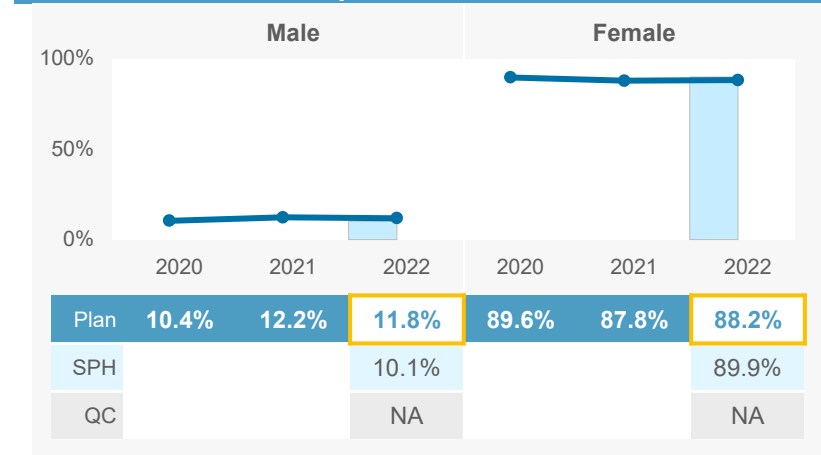
Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (‡/‡) or benchmark score (▲/▼).

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.

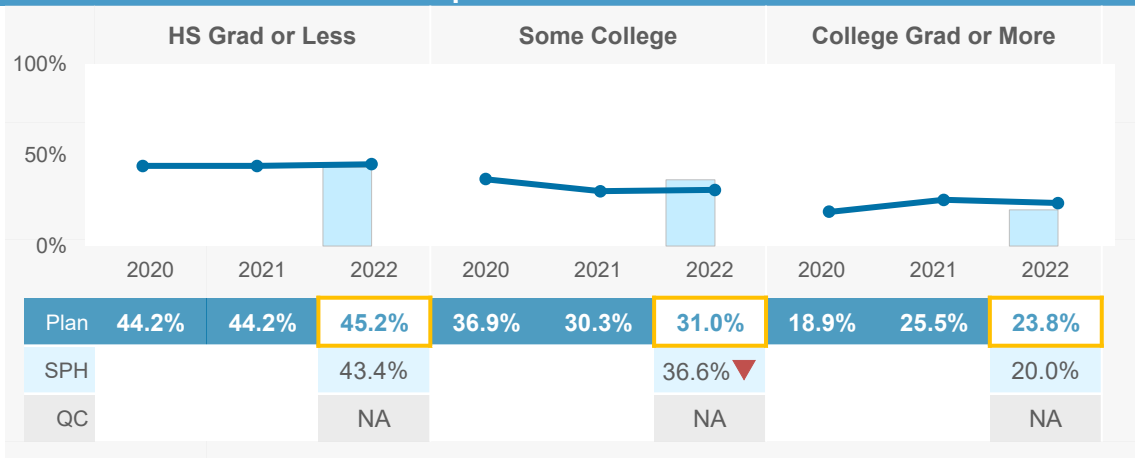
Respondent's Age



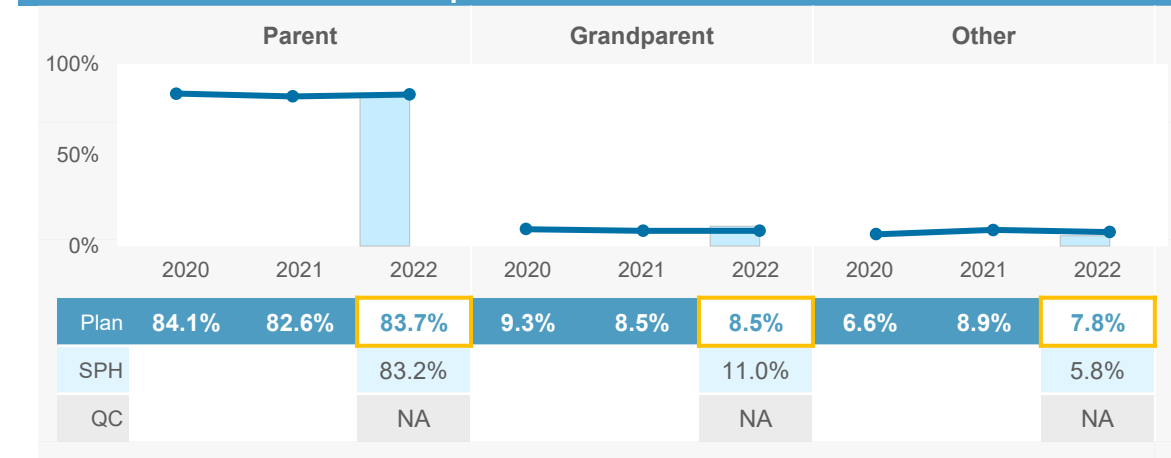
Respondent's Gender



Respondent's Education



Respondent's Relation to Child



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.



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SUPPLEMENTAL QUESTIONS

- HUSKY Health program (A/C/D)



SUPPLEMENTAL QUESTIONS

MEDICAID CHILD: GENERAL POPULATION

Survey Item		Summary Rate Score			2022 SPH BoB
		2020	2021	2022	
Q77. Problems seeing a specialist					
	Opt-Outs	Total	(n=412)	(n=381)	(n=379)
	Opt Out: My child did not have any difficulty seeing a specialist		113	144	127
	Opt Out: My child did not see a specialist		166	143	129
	Valid Responses	Base	(n=69)	(n=44)	(n=51)
	OB/Gynecology		7.2%	2.3%	3.9%
	Cardiology		7.2%	2.3%	5.9%
	Neurology		14.5%	4.5%	5.9%
	Dermatology		24.6%	22.7%	31.4%
	Orthopedics		8.7%	13.6%	13.7%
	Ophthalmology		13.0%	9.1%	11.8%
	Gastrointestinal		14.5%	6.8%	11.8%
	Ear, Nose and Throat		20.3%	11.4%	11.8%
	Behavioral Health		20.3%	22.7%	29.4%
	Other		24.6%	29.5%	29.4%

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

Low Base: ^Indicates a base size smaller than 20. Interpret results with caution.



SUPPLEMENTAL QUESTIONS

MEDICAID CHILD: CCC POPULATION

Survey Item		Summary Rate Score			2022 SPH BoB
		2020	2021	2022	
Q77. Problems seeing a specialist					
	Opt-Outs	Total	(n=332)	(n=352)	(n=301)
	Opt Out: My child did not have any difficulty seeing a specialist		145	175	140
	Opt Out: My child did not see a specialist		62	64	42
	Valid Responses	Base	(n=82)	(n=75)	(n=77)
	OB/Gynecology		7.3%	4.0%	3.9%
	Cardiology		4.9%	0.0%	2.6%
	Neurology		13.4%	12.0%	9.1%
	Dermatology		18.3%	18.7%	19.5%
	Orthopedics		17.1%	5.3%	11.7%
	Ophthalmology		9.8%	2.7%	7.8%
	Gastrointestinal		12.2%	10.7%	6.5%
	Ear, Nose and Throat		15.9%	8.0%	13.0%
	Behavioral Health		45.1%	52.0%	35.1% ↓
	Other		20.7%	28.0%	36.4% ‡

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

Low Base: ^Indicates a base size smaller than 20. Interpret results with caution.



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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

Q36	Personal doctor overall	0.6665
Q27	Dr. explained things	0.5088
Q4	Got urgent care	0.4499
Q49	Health plan overall	0.4437
Q10	Got care/tests/treatment	0.4413
Q45	CS provided info./help	0.4010
Q41	Got specialist appt.	0.4006
Q29	Dr. showed respect	0.3861
Q6	Got routine care	0.3754
Q35	Dr. informed about care	0.3714

With Personal Doctor Rating

Q9	Health care overall	0.6665
Q27	Dr. explained things	0.5662
Q29	Dr. showed respect	0.5433
Q32	Dr. spent enough time	0.5203
Q28	Dr. listened carefully	0.5192
Q10	Got care/tests/treatment	0.5114
Q49	Health plan overall	0.5071
Q35	Dr. informed about care	0.4899
Q31	Dr. explained things for child	0.4886
Q45	CS provided info./help	0.3941

With Specialist Rating

Q31	Dr. explained things for child	0.3596
Q27	Dr. explained things	0.2288
Q41	Got specialist appt.	0.2151
Q49	Health plan overall	0.2085
Q28	Dr. listened carefully	0.1827
Q35	Dr. informed about care	0.1461
Q10	Got care/tests/treatment	0.1310
Q9	Health care overall	0.1273
Q36	Personal doctor overall	0.1152
Q29	Dr. showed respect	0.1065



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 your child receives. 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.

Please answer the questions for the child listed on the letter. Please do not answer for any other children.

1. Our records show that your child is now in the HUSKY Health program. Is that right?

Yes → **If Yes, Go to Question 3**
 No

2. What is the name of your child's health plan? (please print)

YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS

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

3. In the last 6 months, did your child 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 your child needed care right away, how often did your child get care as soon as he or she 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 for your child?

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 for your child as soon as your child needed?

Never
 Sometimes
 Usually
 Always

7. In the last 6 months, not counting the times your child went to an emergency room, how many times did he or she get health care in person, by phone, or by video?

None → **If None, Go to Question 11**
 1 time
 2
 3
 4
 5 to 9
 10 or more times



8. In the last 6 months, how often did you have your questions answered by your child's doctors or other health providers?

- Never
- Sometimes
- Usually
- Always

9. 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 child's health care in the last 6 months?

- 0 Worst health care possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best health care possible

10. In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?

- Never
- Sometimes
- Usually
- Always

11. Is your child now enrolled in any kind of school or daycare?

- Yes
- No → *If No, Go to Question 14*

12. In the last 6 months, did you need your child's doctors or other health providers to contact a school or daycare center about your child's health or health care?

- Yes
- No → *If No, Go to Question 14*

13. In the last 6 months, did you get the help you needed from your child's doctors or other health providers in contacting your child's school or daycare?

- Yes
- No

SPECIALIZED SERVICES

14. Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment.

In the last 6 months, did you get or try to get any special medical equipment or devices for your child?

- Yes
- No → *If No, Go to Question 17*

15. In the last 6 months, how often was it easy to get special medical equipment or devices for your child?

- Never
- Sometimes
- Usually
- Always

16. Did anyone from your child's health plan, doctor's office, or clinic help you get special medical equipment or devices for your child?

- Yes
- No

17. In the last 6 months, did you get or try to get special therapy such as physical, occupational, or speech therapy for your child?

- Yes
- No → *If No, Go to Question 20*

18. In the last 6 months, how often was it easy to get this therapy for your child?

- Never
- Sometimes
- Usually
- Always

19. Did anyone from your child's health plan, doctor's office, or clinic help you get this therapy for your child?

- Yes
- No

20. In the last 6 months, did you get or try to get treatment or counseling for your child for an emotional, developmental, or behavioral problem?

- Yes
- No → *If No, Go to Question 23*

21. In the last 6 months, how often was it easy to get this treatment or counseling for your child?

- Never
- Sometimes
- Usually
- Always

22. Did anyone from your child's health plan, doctor's office, or clinic help you get this treatment or counseling for your child?

- Yes
- No

23. In the last 6 months, did your child get care from more than one kind of health care provider or use more than one kind of health care service?

- Yes
- No → *If No, Go to Question 25*

24. In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these different providers or services?

- Yes
- No

YOUR CHILD'S PERSONAL DOCTOR

25. A personal doctor is the one your child would talk to if he or she needs a check-up, has a health problem or gets sick or hurt. Does your child have a personal doctor?

- Yes
- No → *If No, Go to Question 40*

26. In the last 6 months, how many times did your child have an in person, phone, or video visit with his or her personal doctor?

- None → *If None, Go to Question 36*
- 1 time
- 2
- 3
- 4
- 5 to 9
- 10 or more times

27. In the last 6 months, how often did your child's personal doctor explain things about your child's health in a way that was easy to understand?

- Never
- Sometimes
- Usually
- Always

28. In the last 6 months, how often did your child's personal doctor listen carefully to you?

- Never
- Sometimes
- Usually
- Always

29. In the last 6 months, how often did your child's personal doctor show respect for what you had to say?

- Never
- Sometimes
- Usually
- Always

30. Is your child able to talk with doctors about his or her health care?

- Yes
- No → *If No, Go to Question 32*

31. In the last 6 months, how often did your child's personal doctor explain things in a way that was easy for your child to understand?

- Never
- Sometimes
- Usually
- Always

32. In the last 6 months, how often did your child's personal doctor spend enough time with your child?

- Never
- Sometimes
- Usually
- Always

33. In the last 6 months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?

- Yes
- No

34. In the last 6 months, did your child get care from a doctor or other health provider besides his or her personal doctor?

- Yes
 No → *If No, Go to Question 36*

35. In the last 6 months, how often did your child's personal doctor seem informed and up-to-date about the care your child got from these doctors or other health providers?

- Never
 Sometimes
 Usually
 Always

36. 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 child's personal doctor?

- 0 Worst personal doctor possible
 1
 2
 3
 4
 5
 6
 7
 8
 9
 10 Best personal doctor possible

37. Does your child have any medical, behavioral, or other health conditions that have lasted for more than 3 months?

- Yes
 No → *If No, Go to Question 40*

38. Does your child's personal doctor understand how these medical, behavioral, or other health conditions affect your child's day-to-day life?

- Yes
 No

39. Does your child's personal doctor understand how your child's medical, behavioral, or other health conditions affect your family's day-to-day life?

- Yes
 No

GETTING HEALTH CARE FROM SPECIALISTS

When you answer the next questions, include the care your child got in person, by phone, or by video. Do not include dental visits or care your child got when he or she stayed overnight in a hospital.

40. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. In the last 6 months, did you make any appointments for your child with a specialist?

- Yes
 No → *If No, Go to Question 44*

41. In the last 6 months, how often did you get appointments for your child with a specialist as soon as he or she needed?

- Never
 Sometimes
 Usually
 Always

42. How many specialists has your child talked to in the last 6 months?

- None → *If None, Go to Question 44*
 1 specialist
 2
 3
 4
 5 or more specialists

43. We want to know your rating of the specialist your child 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?

- 0 Worst specialist possible
 1
 2
 3
 4
 5
 6
 7
 8
 9
 10 Best specialist possible

YOUR CHILD'S HEALTH PLAN

The next questions ask about your experience with your child's health plan.

44. In the last 6 months, did you get information or help from customer service at your child's health plan?

- Yes
 No → *If No, Go to Question 47*

45. In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed?

- Never
 Sometimes
 Usually
 Always

46. In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect?

- Never
 Sometimes
 Usually
 Always

47. In the last 6 months, did your child's health plan give you any forms to fill out?

- Yes
 No → *If No, Go to Question 49*

48. In the last 6 months, how often were the forms from your child's health plan easy to fill out?

- Never
 Sometimes
 Usually
 Always

49. 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 child's health plan?

- 0 Worst health plan possible
 1
 2
 3
 4
 5
 6
 7
 8
 9
 10 Best health plan possible

PRESCRIPTION MEDICINES

50. In the last 6 months, did you get or refill any prescription medicines for your child?

- Yes
 No → *If No, Go to Question 53*

51. In the last 6 months, how often was it easy to get prescription medicines for your child through his or her health plan?

- Never
 Sometimes
 Usually
 Always

52. Did anyone from your child's health plan, doctor's office, or clinic help you get your child's prescription medicines?

- Yes
 No

ABOUT YOUR CHILD AND YOU

53. In general, how would you rate your child's overall health?

- Excellent
 Very Good
 Good
 Fair
 Poor

54. In general, how would you rate your child's overall mental or emotional health?

- Excellent
 Very Good
 Good
 Fair
 Poor

55. Does your child currently need or use medicine prescribed by a doctor (other than vitamins)?

- Yes
 No → *If No, Go to Question 58*

56. Is this because of any medical, behavioral, or other health condition?

- Yes
 No → *If No, Go to Question 58*

57. Is this a condition that has lasted or is expected to last for at least 12 months?

- Yes
 No

58. Does your child need or use more medical care, more mental health services, or more educational services than is usual for most children of the same age?

Yes

No → *If No, Go to Question 61*

59. Is this because of any medical, behavioral, or other health condition?

Yes

No → *If No, Go to Question 61*

60. Is this a condition that has lasted or is expected to last for at least 12 months?

Yes

No

61. Is your child limited or prevented in any way in his or her ability to do the things most children of the same age can do?

Yes

No → *If No, Go to Question 64*

62. Is this because of any medical, behavioral, or other health condition?

Yes

No → *If No, Go to Question 64*

63. Is this a condition that has lasted or is expected to last for at least 12 months?

Yes

No

64. Does your child need or get special therapy such as physical, occupational, or speech therapy?

Yes

No → *If No, Go to Question 67*

65. Is this because of any medical, behavioral, or other health condition?

Yes

No → *If No, Go to Question 67*

66. Is this a condition that has lasted or is expected to last for at least 12 months?

Yes

No

67. Does your child have any kind of emotional, developmental, or behavioral problem for which he or she needs or gets treatment or counseling?

Yes

No → *If No, Go to Question 69*

68. Has this problem lasted or is it expected to last for at least 12 months?

Yes

No

69. What is your child's age?

Less than 1 year old

_____ YEARS OLD (*write in*)

70. Is your child male or female?

Male

Female

71. Is your child of Hispanic or Latino origin or descent?

Yes, Hispanic or Latino

No, not Hispanic or Latino

72. What is your child's race? *Mark one or more.*

White

Black or African-American

Asian

Native Hawaiian or other Pacific Islander

American Indian or Alaska Native

Other

73. What is your age?

Under 18

18 to 24

25 to 34

35 to 44

45 to 54

55 to 64

65 to 74

75 or older

74. Are you male or female?

Male

Female

75. What is the highest grade or level of school that you have completed?

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

76. How are you related to the child?

- Mother or father
- Grandparent
- Aunt or uncle
- Older brother or sister
- Other relative
- Legal guardian
- Someone else

ADDITIONAL QUESTIONS

Now we would like to ask a few more questions about the services your child's health plan provides.

77. If your child had difficulty seeing a specialist, which specialists were a problem for your child? (Please select all that apply)

- OB/Gynecology
- Cardiology
- Neurology
- Dermatology
- Orthopedics
- Ophthalmology
- Gastrointestinal
- Ear, Nose and Throat
- Behavioral Health
- Other (Please Specify):

-
- My child did not have any difficulty seeing a specialist
 - My child did not see a specialist
-

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



DISCOVER

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



PREDICT

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



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.



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MY 2021 CAHPS® MEDICAID CHILD WITH CCC 5.1 SURVEY

HUSKY HEALTH PROGRAM (HUSKY B)



HUSKY HEALTH PROGRAM (HUSKY B)

CONTENTS

- OVERVIEW
- METHODOLOGY
- INDUSTRY TRENDS
- EXECUTIVE SUMMARY
- KEY DRIVER ANALYSIS OF RATING OF HEALTH PLAN
- MEASURE ANALYSES
- SUMMARY OF TREND AND BENCHMARKS
- PROFILE OF SURVEY RESPONDENTS
- SUPPLEMENTAL QUESTIONS
- APPENDICES
 - A: CORRELATIONS
 - B: QUESTIONNAIRE

SPH Analytics (SPH), a National Committee for Quality Assurance (NCQA) certified HEDIS[®] Survey Vendor, was selected by HUSKY Health program (HUSKY B) to conduct its MY 2021 CAHPS[®] 5.1 Medicaid Child with CCC Survey (with CCC Measurement set). 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 Heather Nast (248-207-5682). Should you have any questions or comments regarding any aspect of the survey or reporting process, please feel free to call your Project Manager.

- The CAHPS 5.1 Medicaid Child – Children with Chronic Conditions Survey assesses the experience of care for the general population of children and the population of children with chronic conditions (CCC). These conditions include relatively common conditions like asthma, as well as rare conditions, such as juvenile diabetes and Muscular Dystrophy.
- Children with chronic conditions represent a relatively small proportion of the overall child population. To achieve a sufficient number of complete surveys for CCC results to be calculated, a supplemental sample of children who are more likely to have a chronic condition, based on claims experience, is selected and added to the standard CAHPS® 5.1 Child Survey sample (General Population). After the General Population sample is pulled, the supplemental sample is pulled based on a prescreen sample code. The NCQA required total sample size is 3,490 (1,650 General Population + 1,840 supplemental sample), although plans may choose to oversample their population if necessary.
- NCQA defines the member as having a chronic condition through a survey-based screening tool. The CCC screening tool contains five sections representing five different health conditions. A child member is identified as having a chronic condition if all questions for at least one specific health consequence are answered “Yes.”
- It cannot be determined which respondents out of the total sample qualify as having a chronic condition. Given that a denominator for this equation cannot be determined, there is no response rate provided for the CCC Population. You will see the Response Rate for the Total Population and General Population on the following page, along with additional details for the General Population sample.

DATA COLLECTION

The MY 2021 Medicaid Child with CCC version of the 5.1 CAHPS survey was administered via the following methodology:

First questionnaire
mailed
1/28/2022

Second questionnaire
mailed
3/4/2022

Initiate follow-up calls
to non-responders
3/25/2022 - 4/8/2022

Last day to accept
completed surveys
5/23/2022

QUALIFIED RESPONDENTS




Included beneficiaries who were...

- Parents of those 17 years and younger (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

$$\frac{347 \text{ (Completed)}}{2145 \text{ (Sample)} - 46 \text{ (Ineligible)}} = \frac{347}{2099} = 16.5\%$$

VALID SURVEYS

	Total Number of Mail Completed =	189	(34 in Spanish)
	Total Number of Phone Completed =	91	(2 in Spanish)
	Total Number of Internet Completed =	67	(9 in Spanish)

Number of Undeliverables: 223

Note: Respondents were given the option of completing the survey in Spanish. All members selected in the sample received both an English and a Spanish mail survey. Additionally, cover letters included a telephone number for members to call and complete the survey in Spanish.

RESPONSE RATE TRENDING

		2020	2021	2022
Completed	SUBTOTAL	507	438	347
	Does not Meet Eligibility Criteria (01)	18	24	45
Ineligible	Language Barrier (03)	5	2	1
	Mentally/Physically Incapacitated (04)	0	0	0
	Deceased (05)	0	0	0
	SUBTOTAL	23	26	46
Non-response	Break-off/Incomplete (02)	35	21	26
	Refusal (06)	59	26	28
	Maximum Attempts Made (07)	1950	1634	1698
	Added to DNC List (08)	0	0	0
	SUBTOTAL	2044	1681	1752
Total Sample		2574	2145	2145
Oversampling %		56.0%	30.0%	30.0%
Response Rate		19.9%	20.7%	16.5%
SPH Response Rate		12.6%	12.8%	10.2%

Total Completed (General Pop + CCC)	788	708	539
Total Ineligible (General Pop + CCC)	28	32	64
Total Sample (General Pop + CCC)	3870	3599	3164
Total Response Rate (General Pop + CCC)	20.5%	19.8%	17.4%
Supplemental (CCC) Sample Size	1296	1454	1019
Supplemental (CCC) Completes	280	254	178



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INDUSTRY TRENDS

- HUSKY Health program (HUSKY B)



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 Child: Among the Medicaid Child 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 Needed Care*.

Getting Care Quickly is an area of concern, with the 2022 composite score 3.6% lower than it was in 2019. Most of that comes from a more than 6% drop in the ability to get routine care from its high point in 2020, at the beginning of the pandemic.

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 Book of Business Trends				
	2019	2020	2021	2022
Rating Questions (% 9 or 10)				
Q49. Rating of Health Plan	72.2%	73.0%	73.3%	72.5%
Q9. Rating of Health Care	71.1%	73.0%	74.4%	71.2%
Q36. Rating of Personal Doctor	77.6%	79.1%	78.6%	77.4%
Q43. Rating of Specialist	73.2%	75.0%	75.7%	73.9%
Rating Questions (% 8, 9 or 10)				
Q49. Rating of Health Plan	86.9%	87.5%	87.3%	86.9%
Q9. Rating of Health Care	88.3%	88.7%	88.7%	87.6%
Q36. Rating of Personal Doctor	90.6%	91.2%	90.8%	90.3%
Q43. Rating of Specialist	87.2%	88.2%	88.2%	87.5%
Getting Needed Care (% A/U)				
Q10. Getting care, tests, or treatment	90.1%	90.8%	90.8%	89.2%
Q41. Getting specialist appointment	80.3%	80.4%	82.4%	79.5%
Getting Care Quickly (% A/U)				
Q4. Getting urgent care	91.9%	91.7%	91.7%	90.5%
Q6. Getting routine care	88.6%	89.3%	83.8%	82.9%
Coordination of Care (Q35) (% A/U)				
	84.2%	85.0%	84.9%	84.1%

 Increase of 1% or greater since 2021
 Decrease of 1% or greater since 2021



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EXECUTIVE SUMMARY

- HUSKY Health program (HUSKY B)



OVERVIEW OF TERMS

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.



2022 DASHBOARD

MEDICAID CHILD: GENERAL POPULATION



347

Completed surveys

16.5%

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

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	67.5%	15 th	---
Rating of Health Care ★★			
Rating of Health Care	70.5%	44 th	Opportunity
Rating of Personal Doctor ★★			
Rating of Personal Doctor	73.4%	↓⚡	14 th Opportunity
Rating of Specialist (NA)			
Rating of Specialist	61.1%	⚡	5 th Opportunity

Coordination of Care (NA)			
Coordination of Care	84.5%	52 nd	Retain
Getting Needed Care ★★			
Composite	80.4%	⚡	24 th ---
Q10. Getting care, tests, or treatment	85.8%	↓⚡	23 rd Opportunity
Q41. Getting specialist appointment	75.0%		33 rd Opportunity
Getting Care Quickly ★★★			
Composite	86.3%		44 th ---
Q4. Getting urgent care	92.5%		62 nd Power
Q6. Getting routine care	80.1%	⚡	29 th Wait

Customer Service +			
Composite	84.1%	14 th	---
Q45. Provided information or help	77.8%	18 th	Wait
Q46. Treated with courtesy and respect	90.3%	15 th	Wait
Ease of Filling Out Forms +			
Ease of Filling Out Forms +	94.0%	8 th	Wait

How Well Doctors Communicate +			
Composite	94.6%	50 th	---
Q27. Dr. explained things	92.9%	23 rd	Wait
Q28. Dr. listened carefully	95.8%	51 st	Wait
Q29. Dr. showed respect	96.2%	38 th	Wait
Q32. Dr. spent enough time	93.4%	77 th	Power

More info.



ESTIMATED NCQA HEALTH INSURANCE PLAN RATINGS

MEDICAID CHILD: GENERAL POPULATION

	SCORE DEFINITION	2022 BASE	2022 HPR SCORE*	HPR 4 STAR THRESHOLD	HPR PERCENTILE BAND	SPH ESTIMATED RATING
PATIENT EXPERIENCE						2
GETTING CARE						2.5
Getting Needed Care	Usually or Always	152	80.3%	88.0%	10 th	2
Getting Care Quickly	Usually or Always	145	86.3%	89.3%	33 rd	3
SATISFACTION WITH PLAN PHYSICIANS						2
Rating of Personal Doctor	9 or 10	278	73.3%	79.8%	10 th	2
Rating of Specialist	9 or 10	72	61.1%	76.0%	<10 th	NA
Rating of Health Care	9 or 10	224	70.5%	76.5%	10 th	2
Coordination of Care	Usually or Always	84	84.5%	88.6%	10 th	NA
SATISFACTION WITH PLAN SERVICES						2
Rating of Health Plan	9 or 10	338	67.4%	75.3%	10 th	2

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 Percentile	10 th – 32 nd Percentile	33 rd – 66 th Percentile	67 th – 89 th Percentile	≥90 th Percentile

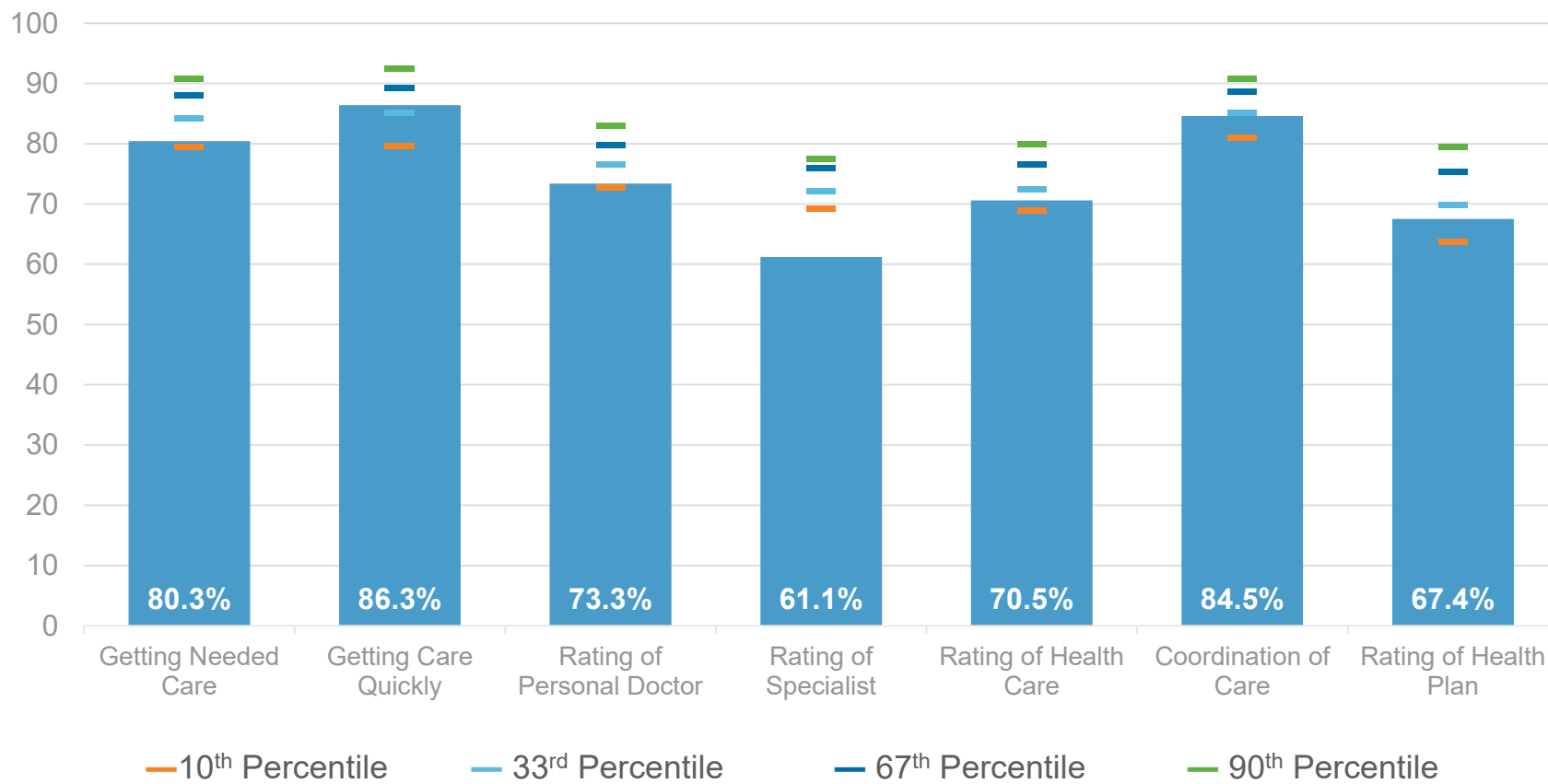
Notes:

- 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.

*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.

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

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.

* Scores are % 9 or 10, and % Always or Usually.



MEASURE SUMMARY

MEDICAID CHILD: GENERAL POPULATION

MEASURE	SUMMARY RATE		CHANGE	2022 GP SPH BOOK OF BUSINESS BENCHMARK								
	2021	2022		PERCENTILE DISTRIBUTION			PERCENTILE RANK	BoB SRS				
				0	20	40	60	80	100			
Health Plan Domain												
Rating of Health Plan <i>% 9 or 10</i>	66.0%	67.5%	1.5						15 th	72.5%		
Getting Needed Care <i>% Usually or Always</i>	86.7%	80.4%	-6.3						24 th	84.4%		
Customer Service + <i>% Usually or Always</i>	89.0%	84.1%	-4.9						14 th	88.2%		
Ease of Filling Out Forms + <i>% Usually or Always</i>	96.4%	94.0%	-2.4						8 th	96.1%		
Health Care Domain												
Rating of Health Care <i>% 9 or 10</i>	75.0%	70.5%	-4.5						44 th	71.2%		
Getting Care Quickly <i>% Usually or Always</i>	91.1%	86.3%	-4.8						44 th	86.7%		
How Well Doctors Communicate + <i>% Usually or Always</i>	97.3%	94.6%	-2.7						50 th	94.4%		
Coordination of Care <i>% Usually or Always</i>	80.6%	84.5%	3.9						52 nd	84.1%		
Rating of Personal Doctor <i>% 9 or 10</i>	80.1%	73.4% ↓	-6.7						14 th	77.4%		
Rating of Specialist <i>% 9 or 10</i>	72.3%	61.1%	-11.2						5 th	73.9%	▼	

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

[More info.](#)



MEASURE SUMMARY

MEDICAID CHILD: CCC POPULATION

MEASURE	SUMMARY RATE		CHANGE	2022 CCC SPH BOOK OF BUSINESS BENCHMARK							
	2021	2022		PERCENTILE DISTRIBUTION			PERCENTILE RANK	BoB SRS			
				0	20	40	60	80	100		
Health Plan Domain											
Rating of Health Plan <i>% 9 or 10</i>	65.2%	65.1%	-0.1						18 th	69.7%	
Getting Needed Care <i>% Usually or Always</i>	92.1%	89.6%	-2.5						58 th	87.5%	
Customer Service + <i>% Usually or Always</i>	91.7%	95.7%	4.0						98 th	89.3% ▲	
Ease of Filling Out Forms + <i>% Usually or Always</i>	96.7%	97.6%	0.9						84 th	95.9%	
Health Care Domain											
Rating of Health Care <i>% 9 or 10</i>	71.9%	68.5%	-3.4						37 th	69.1%	
Getting Care Quickly <i>% Usually or Always</i>	93.0%	91.7%	-1.3						58 th	90.5%	
How Well Doctors Communicate + <i>% Usually or Always</i>	98.3%	97.1%	-1.2						90 th	94.9%	
Coordination of Care <i>% Usually or Always</i>	81.0%	79.5%	-1.5						25 th	83.3%	
Rating of Personal Doctor <i>% 9 or 10</i>	77.4%	73.5%	-3.9						24 th	77.5%	
Rating of Specialist <i>% 9 or 10</i>	79.0%	65.4% ↓	-13.6						5 th	74.0%	

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

[More info.](#)



MEASURE SUMMARY

MEDICAID CHILD: CCC POPULATION

MEASURE	SUMMARY RATE		CHANGE	2022 CCC SPH BOOK OF BUSINESS BENCHMARK								
	2021	2022		PERCENTILE DISTRIBUTION			PERCENTILE RANK	BoB SRS				
				0	20	40	60	80	100			
CCC Measures												
Access to Rx Medicines <i>% Usually or Always</i>	93.3%	88.5%	-4.8						10 th	91.5%		
Access to Specialized Services <i>% Usually or Always</i>	82.4%	83.1%	0.7						92 nd	73.0%	▲	
FCC: Dr Who Knows Child <i>% Yes</i>	93.1%	91.5%	-1.6						41 st	91.5%		
FCC: Getting Needed Info <i>% Usually or Always</i>	93.3%	93.7%	0.4						73 rd	92.0%		
Coordination of Care for CCC <i>% Yes</i>	76.3%	78.3%	2.0						62 nd	76.6%		

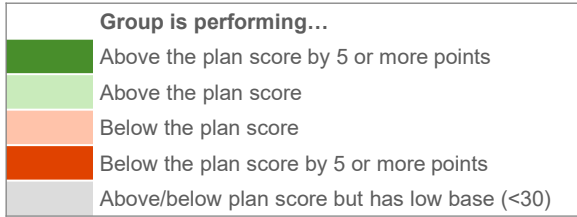
Significance Testing Current score is significantly higher/lower than the 2021 score (↑/↓) or benchmark score (▲/▼).

[More info.](#)



HEALTH EQUITY

MEDICAID CHILD: GENERAL POPULATION



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

[More info.](#)

Demographic	Category	Total	Rating of Health Plan		Rating of Health Care		Getting Needed Care		Getting Care Quickly		Coordination of Care	
			SRS	△	SRS	△	SRS	△	SRS	△	SRS	△
			67.5%		70.5%			80.4%		86.3%		84.5%
Child's Gender	Male	n = 190		2%		2%		3%		0%		-7%
	Female	n = 151		-3%		-2%		1%		1%		5%
Child's Age	0 – 4	n = 53		10%		-4%		-24%		6%		7%
	5 – 8	n = 55		7%		8%		-6%		-3%		-5%
	9 – 13	n = 107		-1%		2%		14%		-3%		-5%
	14 or older	n = 121		-7%		-2%		3%		2%		3%
Overall Health	Excellent/Very Good	n = 276		3%		5%		2%		1%		-4%
	Good	n = 58		-10%		-11%		8%		1%		10%
	Fair/Poor	n = 7		-53%		-51%		-70%		-11%		16%
Mental Health	Excellent/Very Good	n = 249		2%		4%		2%		-1%		-1%
	Good	n = 60		-3%		-9%		5%		5%		6%
	Fair/Poor	n = 32		-8%		-5%		-1%		2%		-8%
Race/Ethnicity	White	n = 214		-2%		-4%		2%		4%		5%
	Black/African-American	n = 59		1%		-7%		3%		-11%		-6%
	Asian	n = 37		5%		2%		12%		2%		-13%
	Native Hawaiian/Pacific Islander	n = 4		33%		-4%		-80%		-3%		NA
	American Indian or Alaska Native	n = 8		8%		-21%		-30%		-3%		16%
	Other	n = 47		2%		8%		-9%		-7%		-18%
	Hispanic/Latino	n = 111		7%		8%		0%		2%		6%



HEALTH EQUITY

MEDICAID CHILD: GENERAL POPULATION

Group is performing...

- Above the plan score by 5 or more points
- Above the plan score
- Below the plan score
- Below the plan score by 5 or more points
- Above/below plan score but has low base (<30)

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

[More info.](#)

Demographic	Category	Total	Rating of Personal Doctor		Rating of Specialist		Customer Service +		How Well Doctors Communicate +		Ease of Filling Out Forms +	
			SRS	Δ	SRS	Δ	SRS	Δ	SRS	Δ	SRS	Δ
			73.4%		61.1%		84.1%		94.6%		94.0%	
Child's Gender	Male	n = 190		-1%		-4%		2%		-2%		-1%
	Female	n = 151		2%		3%		1%		3%		1%
Child's Age	0 – 4	n = 53		-7%		-33%		-1%		2%		2%
	5 – 8	n = 55		5%		1%		-31%		-2%		2%
	9 – 13	n = 107		-3%		1%		5%		2%		1%
	14 or older	n = 121		2%		3%		12%		-1%		-3%
Overall Health	Excellent/Very Good	n = 276		2%		-5%		4%		1%		1%
	Good	n = 58		-7%		12%		-10%		-3%		-5%
	Fair/Poor	n = 7		-7%		-61%		16%		-7%		6%
Mental Health	Excellent/Very Good	n = 249		2%		2%		0%		0%		-1%
	Good	n = 60		-5%		4%		-1%		0%		-1%
	Fair/Poor	n = 32		-1%		-11%		16%		-1%		6%
Race/Ethnicity	White	n = 214		-1%		-2%		-4%		2%		-2%
	Black/African-American	n = 59		1%		16%		2%		-4%		1%
	Asian	n = 37		-8%		-1%		3%		-12%		3%
	Native Hawaiian/Pacific Islander	n = 4		-73%		NA		16%		-95%		6%
	American Indian or Alaska Native	n = 8		-23%		39%		16%		-30%		6%
	Other	n = 47		-10%		1%		8%		-10%		2%
	Hispanic/Latino	n = 111		5%		-1%		-4%		-1%		2%

TOP THREE Performing Measures

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

MEASURE	2022 Valid n	PLAN SUMMARY RATE SCORE			2021 GP QC			2022 GP SPH BoB		
		2021	2022	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Coordination of Care (% Usually or Always)	84 [^]	80.6%	84.5%	3.9	86.6%	-2.1	27 th	84.1%	0.4	52 nd
How Well Doctors Communicate + (% Usually or Always)	211	97.3%	94.6%	-2.7	94.4%	0.2	52 nd	94.4%	0.2	50 th
Rating of Health Care (% 9 or 10)	224	75.0%	70.5%	-4.5	74.3%	-3.8	21 st	71.2%	-0.7	44 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 Valid n	PLAN SUMMARY RATE SCORE			2021 GP QC			2022 GP SPH BoB		
		2021	2022	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Rating of Personal Doctor (% 9 or 10)	278	80.1%	73.4%	↓ -6.7	78.0%	-4.6	11 th	77.4%	-4.0	14 th
Customer Service + (% Usually or Always)	62 [^]	89.0%	84.1%	-4.9	88.3%	-4.2	6 th	88.2%	-4.1	14 th
Rating of Specialist (% 9 or 10)	72 [^]	72.3%	61.1%	-11.2	73.8%	▼ -12.7	<5 th	73.9%	▼ -12.8	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 Personal Doctor

- Analyze, investigate, and probe for weakness or QI opportunities among those measures or composites that are Key Drivers (or highly correlated) with rating of personal 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.
- Work collaboratively with pediatric providers, encourage and support a family friendly approach that helps parents/families navigate the health care system and overcome obstacles.
- 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: Foster relationships with patients. Partner with them. Listen to their concerns. Treat them with compassion. Spend adequate time with them and ensure questions and concerns are answered.
- 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.).
- 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. Minimize wait times.

Improvement Strategies – Customer Service

- Emphasize comprehensive, collaborative, and high-quality customer/member services as a critical priority across all areas of the organization. Think and act together. Establish service recovery guidelines for resolving issues, including phrases that express apologies or atonement.
- Provide on-going/periodic CSR service training, open discussions and routine refresher programs. Include thorough annual updates, tools and resources and subsequent feedback. Training examples include: how to answer questions and resolve issues; consistency in being friendly, courteous and empathetic; quick issue resolution with follow-up; procedures to minimize transfers and wait/on-hold times.
- Involve the CS team in QI activities, seeking concrete customer-based input and improvements. Ensure they are fully informed of updates/changes to processes and procedures.
- Ensure CSRs have immediate access to knowledgeable staff within all key member and provider service areas (Claims, Enrollment, etc.).
- Support key subject matter experts to flexibly respond to urgent or complex types of calls, questions or issues - including prompt prioritization and resolution procedures and/or authority.
- Develop, implement and review protocols and scripts ("Talking Points") to ensure up-to-date, accurate and consist information provided to your members and patients and providers.
- Establish, assess and adhere to measurable CSR performance/service standards (i.e., call satisfaction, call resolution, time on hold, etc.). Operationally define service behaviors.
- Seek QI opportunities with CS via observational walkthrough of calls and discussion/review of complaints, inquiries, and the member experience, especially any changes. Identify main issues and seek interventions that decrease volume and/or improve experience.
- Acknowledge and reward service performance/behaviors reflective of service excellence.

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.



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KEY DRIVER ANALYSIS OF RATING OF HEALTH PLAN

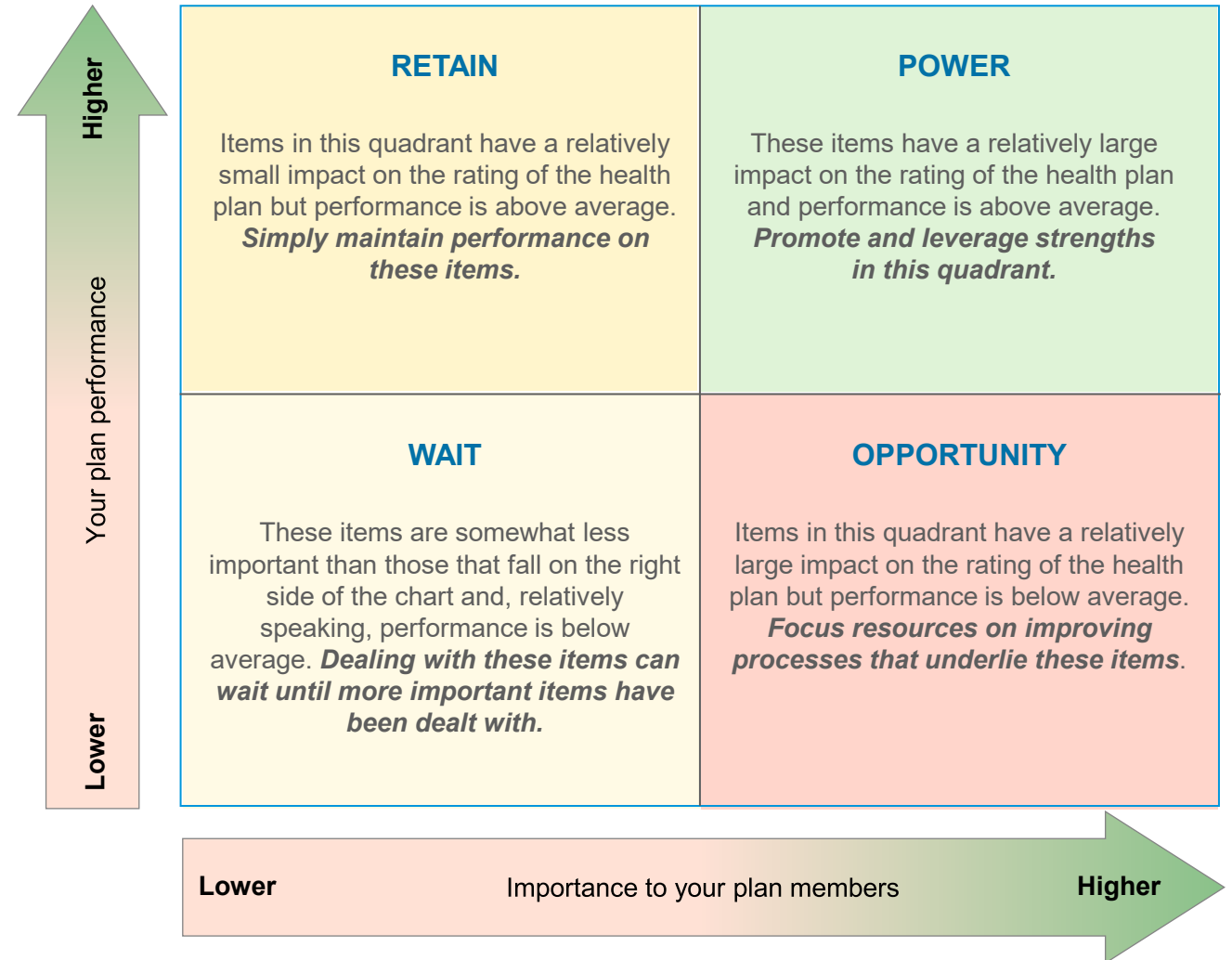
- HUSKY Health program (HUSKY B)

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.



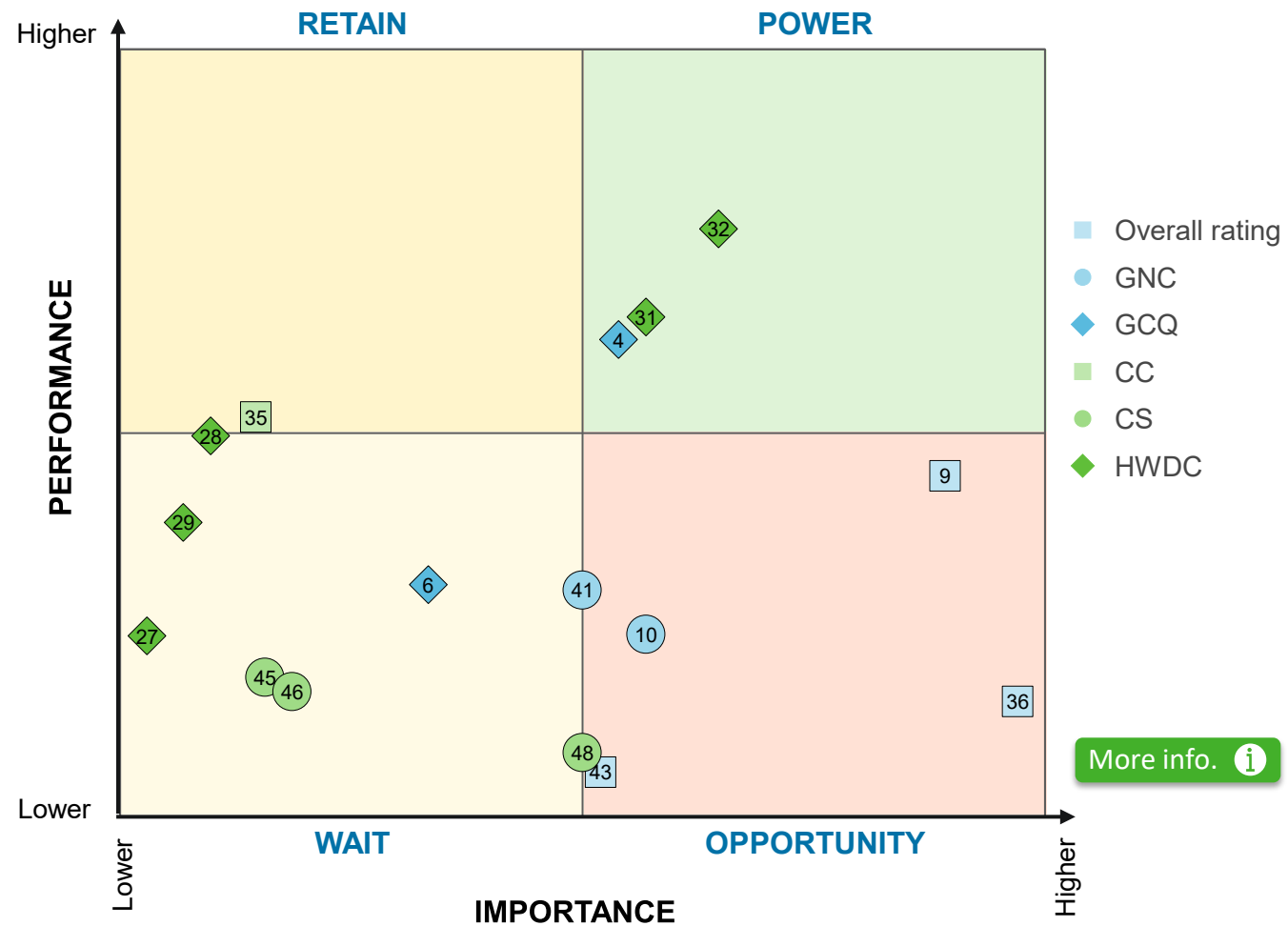
POWER CHART: YOUR RESULTS

MEDICAID CHILD: GENERAL POPULATION

SURVEY MEASURE		SRS	SPH %tile
POWER			
Q32	Dr. spent enough time	93.4%	77 th
Q31	Dr explained things to child	95.8%	65 th
Q4	Getting urgent care	92.5%	62 nd
OPPORTUNITY			
Q36	Rating of Personal Doctor	73.4%	14 th
Q9	Rating of Health Care	70.5%	44 th
Q10	Getting care, tests, or treatment	85.8%	23 rd
Q43	Rating of Specialist	61.1%	5 th
Q41	Getting specialist appointment	75.0%	33 rd
WAIT			
Q48	Ease of Filling Out Forms +	94.0%	8 th
Q6	Getting routine care	80.1%	29 th
Q46	Treated with courtesy and respect	90.3%	15 th
Q45	Provided information or help	77.8%	18 th
Q28	Dr. listened carefully	95.8%	51 st
Q29	Dr. showed respect	96.2%	38 th
Q27	Dr. explained things	92.9%	23 rd
RETAIN			
Q35	Coordination of Care	84.5%	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 CHILD: GENERAL POPULATION

ALIGNMENT <i>Are your key drivers typical of the industry?</i>	KEY DRIVER RANK		ATTRIBUTE	SUMMARY RATE SCORE		SPH BoB PERCENTILE	CLASSIFICATION		
	YOUR PLAN	INDUSTRY		YOUR PLAN	INDUSTRY				
TOP 10 KEY DRIVERS				Q49	Rating of Health Plan	67.5%	72.5%	15th	
✓	1	2	Q36	Rating of Personal Doctor	73.4%	77.4%	14 th	Opportunity	
✓	2	1	Q9	Rating of Health Care	70.5%	71.2%	44 th	Opportunity	
	3	14	Q32	Dr. spent enough time	93.4%	90.6%	77 th	Power	
✓	4	5	Q10	Getting care, tests, or treatment	85.8%	89.2%	23 rd	Opportunity	
	5	15	Q31	Dr explained things to child	95.8%	94.6%	65 th	Power	
✓	6	9	Q4	Getting urgent care	92.5%	90.5%	62 nd	Power	
✓	7	3	Q43	Rating of Specialist	61.1%	73.9%	5 th	Opportunity	
✓	8	4	Q41	Getting specialist appointment	75.0%	79.5%	33 rd	Opportunity	
	9	16	Q48	Ease of Filling Out Forms +	94.0%	96.1%	8 th	Wait	
✓	10	8	Q6	Getting routine care	80.1%	82.9%	29 th	Wait	
	11	6	Q46	Treated with courtesy and respect	90.3%	93.7%	15 th	Wait	
	12	7	Q45	Provided information or help	77.8%	82.7%	18 th	Wait	
	14	10	Q28	Dr. listened carefully	95.8%	95.6%	51 st	Wait	

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.



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MEASURE ANALYSES

Measure Details and Summary Rate Scores

- HUSKY Health program (HUSKY B)

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

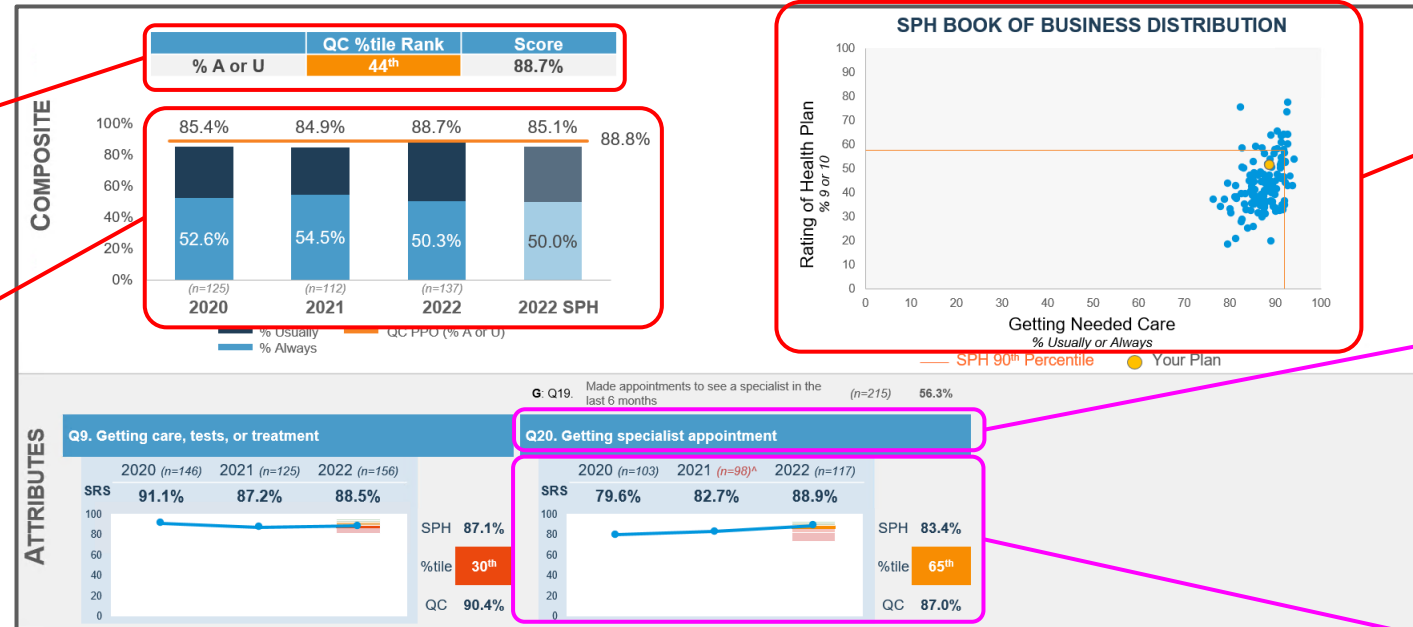
Percentile Bands	
≥90 th	
67 th – 89 th	
33 rd – 66 th	
10 th – 32 nd	
<10 th	

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

More info.

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.

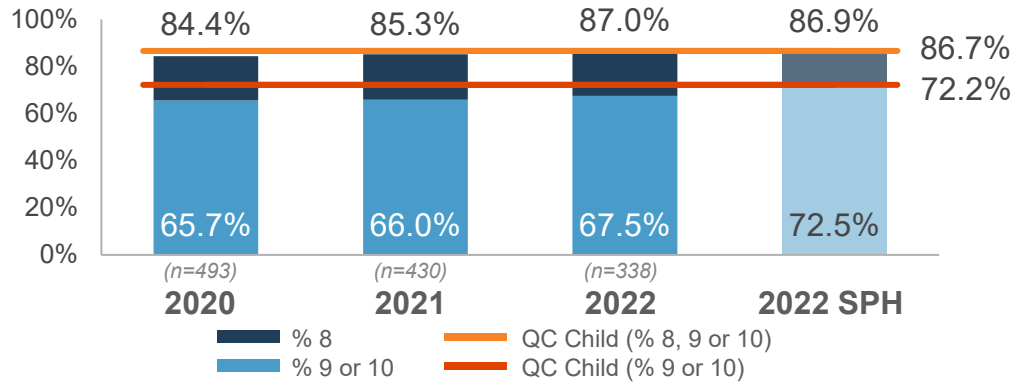
Gate questions (indicated by "G:") for attributes are displayed above attributes – scores displayed are % Yes

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

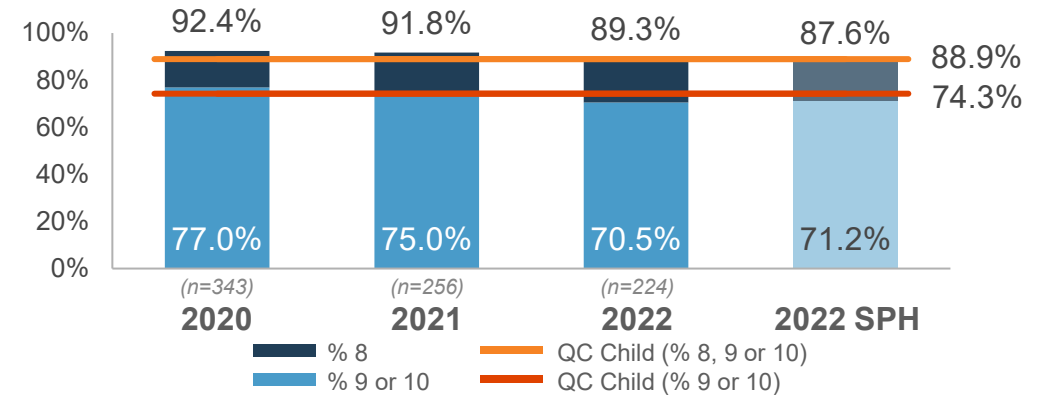
RATING OF HEALTH PLAN

	QC %tile Rank	Score
% 8, 9 or 10	49 th	87.0%
% 9 or 10	20 th	67.5%



RATING OF HEALTH CARE

	QC %tile Rank	Score
% 8, 9 or 10	58 th	89.3%
% 9 or 10	21 st	70.5%



Key Drivers Of The Rating Of The Health Plan

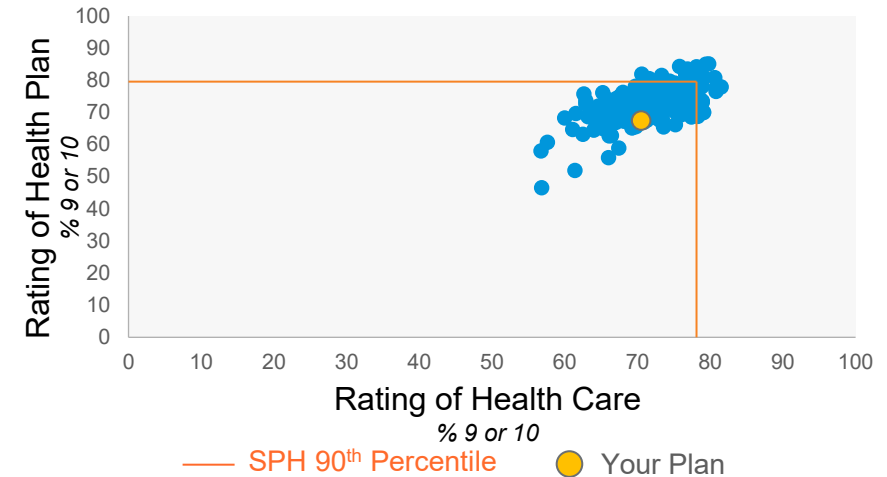
POWER

OPPORTUNITIES

- Q32 Dr. spent enough time
- Q31 Dr explained things to child
- Q4 Getting urgent care

- Q36 Rating of Personal Doctor
- Q9 Rating of Health Care
- Q10 Getting care, tests, or treatment
- Q43 Rating of Specialist
- Q41 Getting specialist appointment

SPH BOOK OF BUSINESS DISTRIBUTION

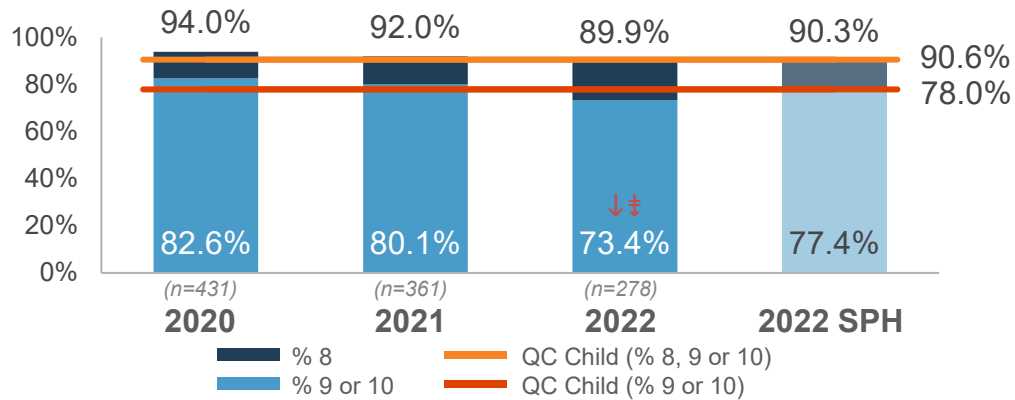


Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↕) or benchmark score (▲/▼).

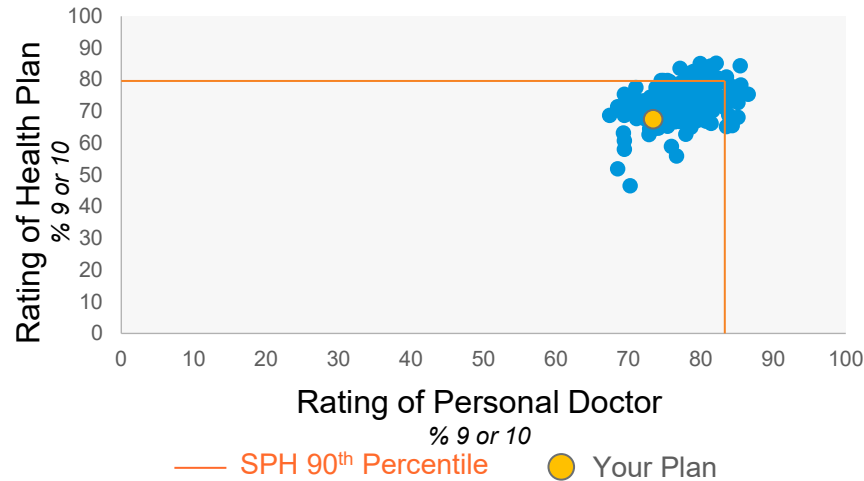
Denominator less than 100. NCQA will assign an NA to this measure.

RATING OF PERSONAL DOCTOR

	QC %tile Rank	Score
% 8, 9 or 10	36 th	89.9%
% 9 or 10	11 th	73.4%

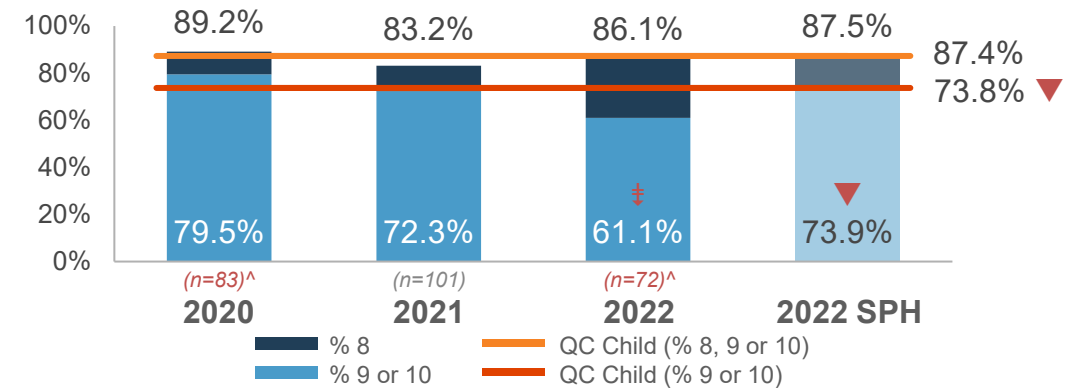


SPH BOOK OF BUSINESS DISTRIBUTION

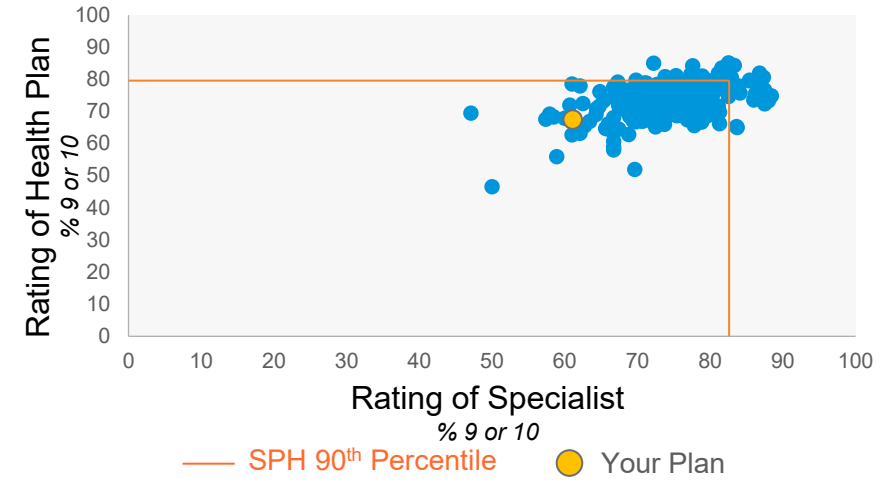


RATING OF SPECIALIST

	QC %tile Rank	Score
% 8, 9 or 10	37 th	86.1%
% 9 or 10	<5 th	61.1%



SPH BOOK OF BUSINESS DISTRIBUTION



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

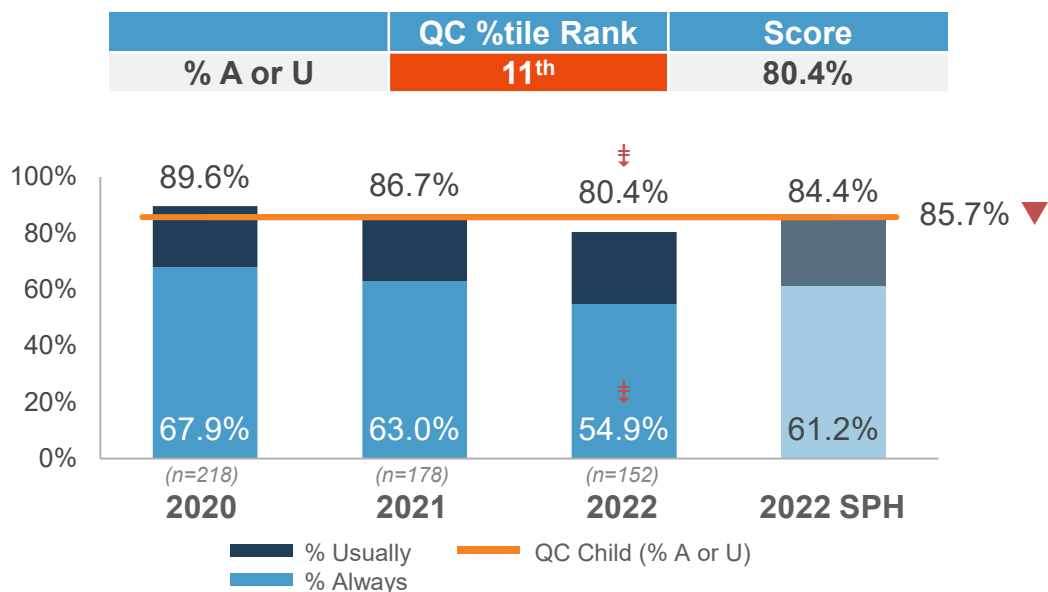
[^]Denominator less than 100. NCQA will assign an NA to this measure.



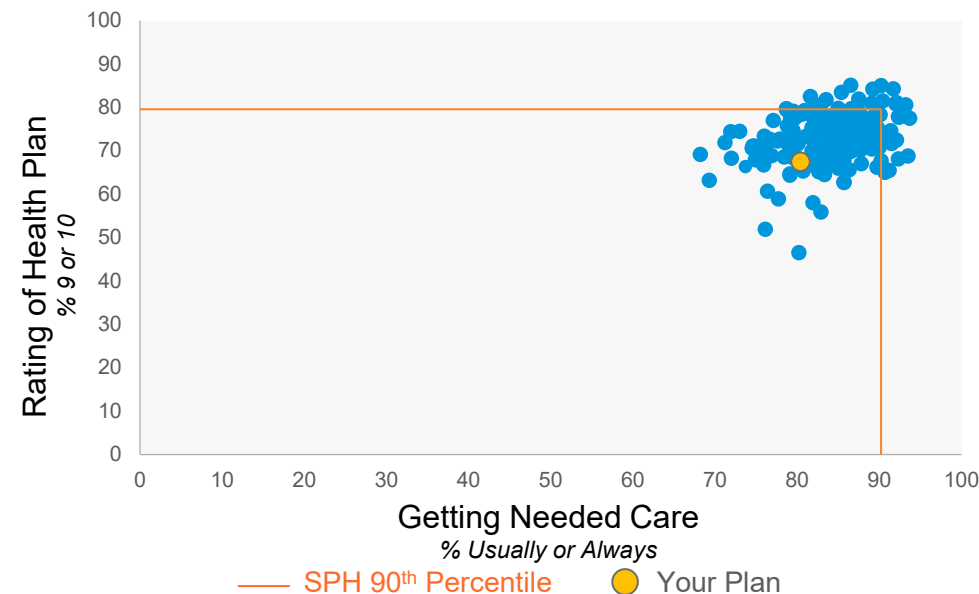
GETTING NEEDED CARE

MEDICAID CHILD: GENERAL POPULATION

COMPOSITE



SPH BOOK OF BUSINESS DISTRIBUTION



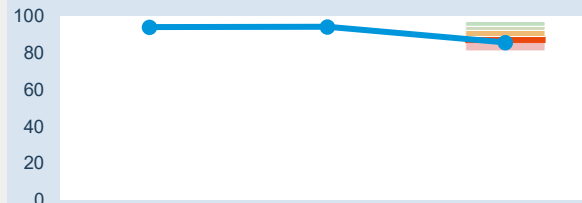
ATTRIBUTES

G: Q40. Made appointments to see a specialist in the last 6 months (n=346) 23.1%

Q10. Getting care, tests, or treatment

2020 (n=344) 2021 (n=251) 2022 (n=225)

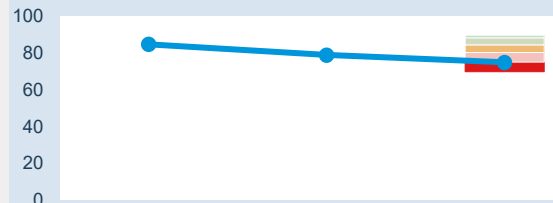
SRS 94.2% 94.4% 85.8% ↓ ‡



Q41. Getting specialist appointment

2020 (n=93)[^] 2021 (n=105) 2022 (n=80)[^]

SRS 84.9% 79.0% 75.0%



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

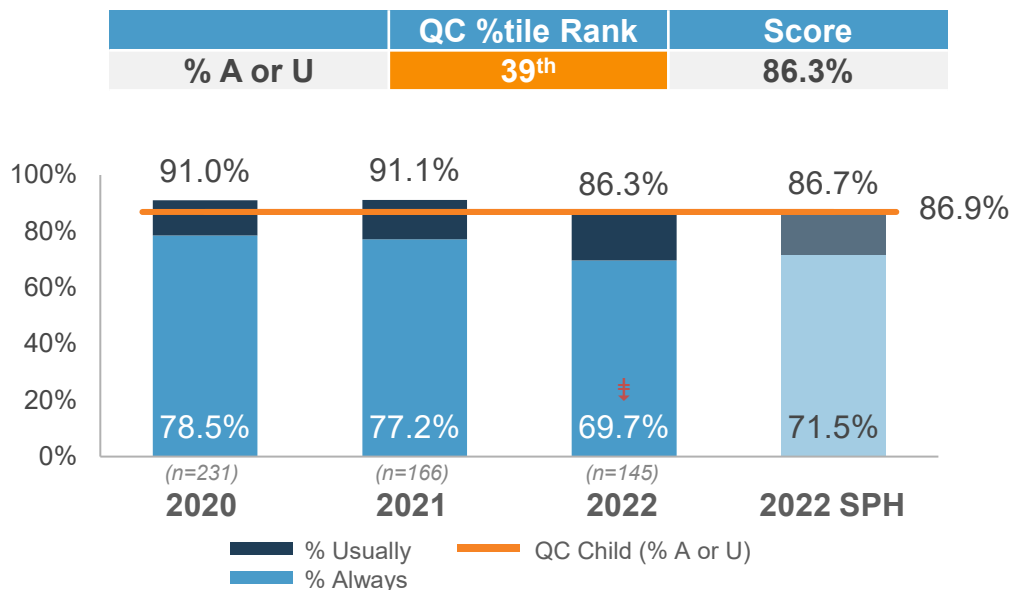
[^]Denominator less than 100. NCQA will assign an NA to this measure.



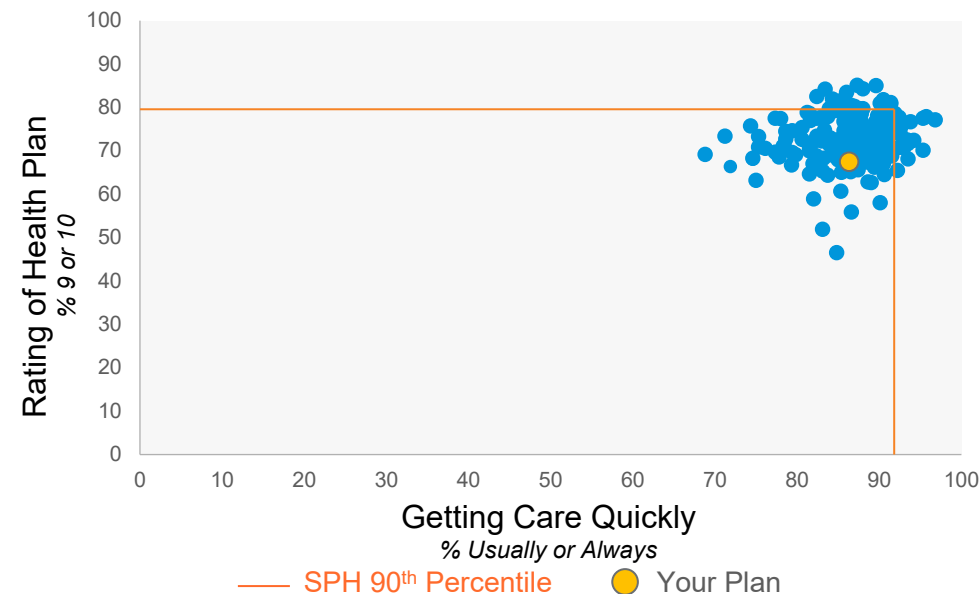
GETTING CARE QUICKLY

MEDICAID CHILD: GENERAL POPULATION

COMPOSITE



SPH BOOK OF BUSINESS DISTRIBUTION

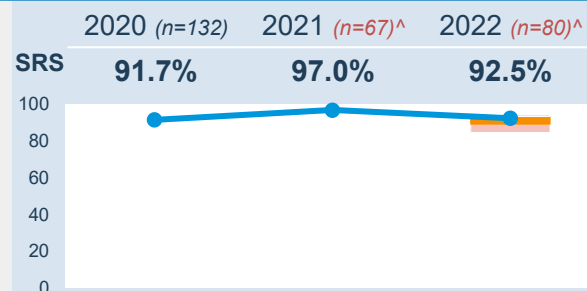


ATTRIBUTES

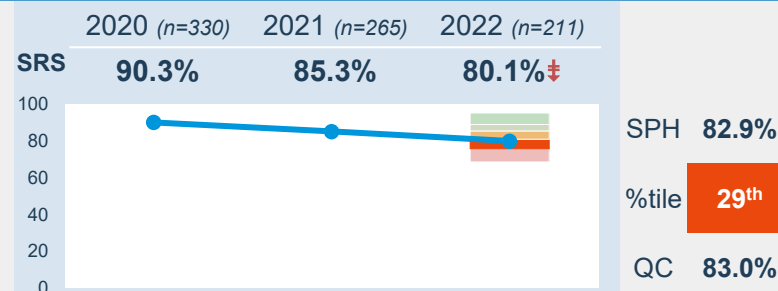
G: Q3. Had illness, injury or condition that needed care right away (n=341) 23.8%

G: Q5. Made appointments for check-ups or routine care at doctor's office or clinic (n=341) 65.1%

Q4. Getting urgent care



Q6. Getting routine care

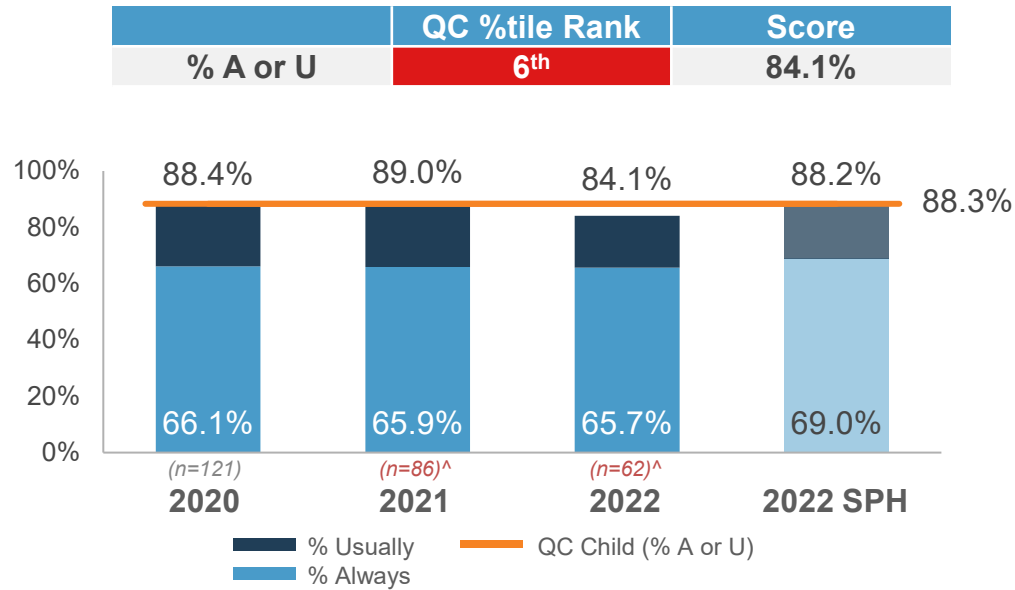


Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (‡/‡) or benchmark score (▲/▼).

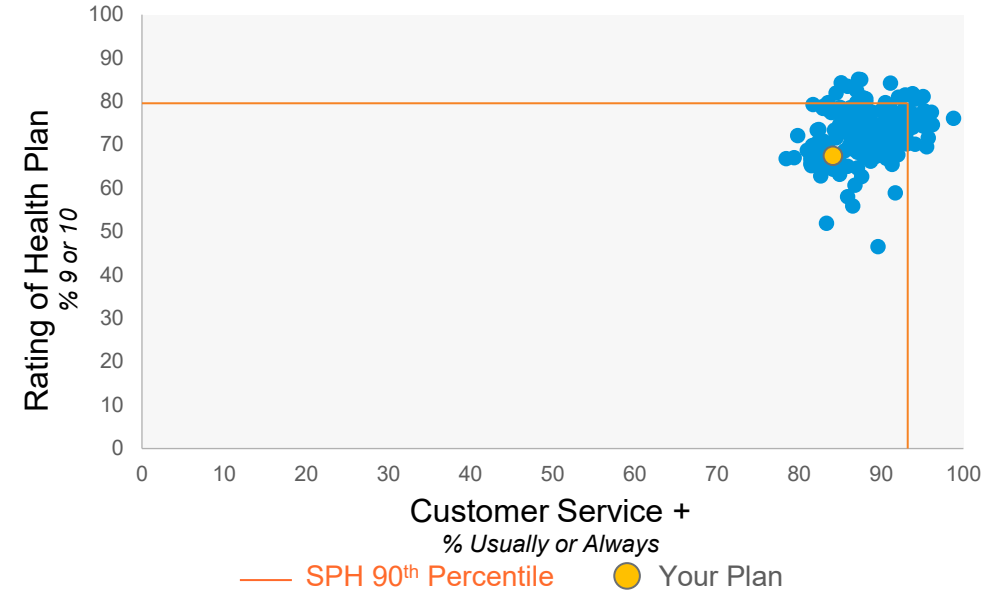
[^]Denominator less than 100. NCQA will assign an NA to this measure.



COMPOSITE



SPH BOOK OF BUSINESS DISTRIBUTION

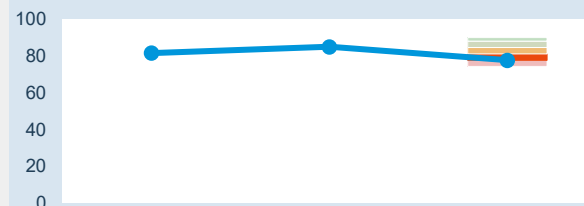


G: Q44. Got information or help from customer service (n=340) 18.8%

ATTRIBUTES

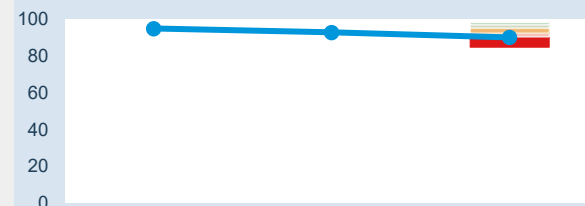
Q45. Provided information or help

Year	2020 (n=120)	2021 (n=87)^	2022 (n=63)^
SRS	81.7%	85.1%	77.8%



Q46. Treated with courtesy and respect

Year	2020 (n=122)	2021 (n=86)^	2022 (n=62)^
SRS	95.1%	93.0%	90.3%

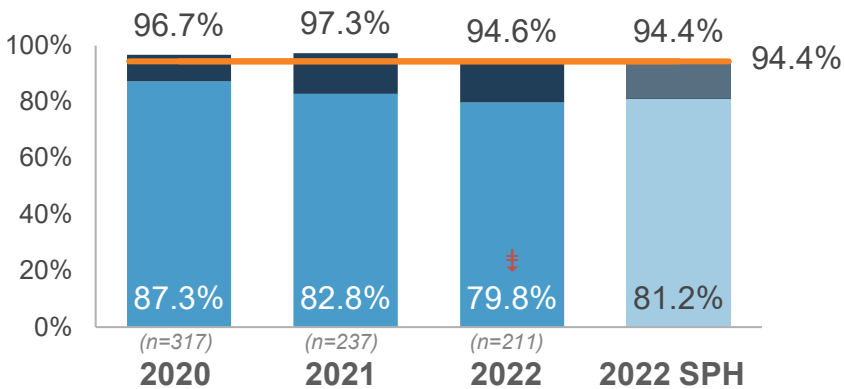


Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↕) or benchmark score (▲/▼).

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

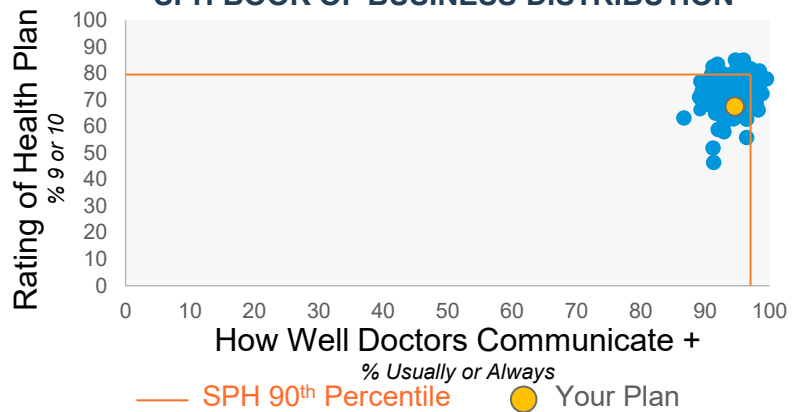
COMPOSITE

% A or U	QC %tile Rank	Score
94.4%	52 nd	94.6%



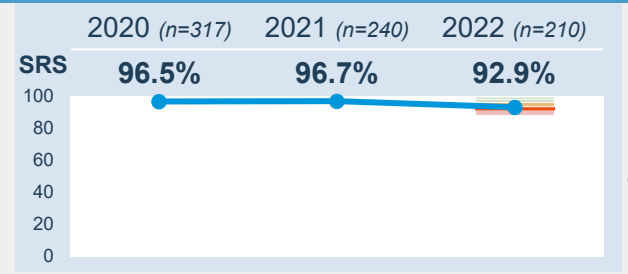
■ % Always
■ % Usually
— QC Child (% A or U)

SPH BOOK OF BUSINESS DISTRIBUTION



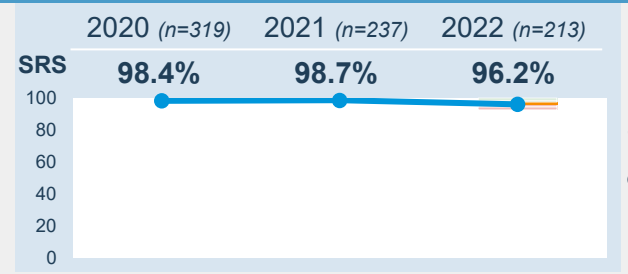
ATTRIBUTES

Q27. Dr. explained things



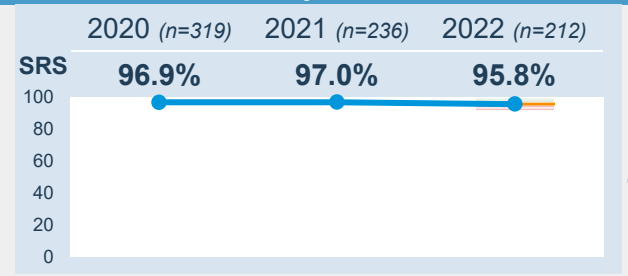
SPH **94.8%**
 %tile **26th**
 QC **94.6%**

Q29. Dr. showed respect



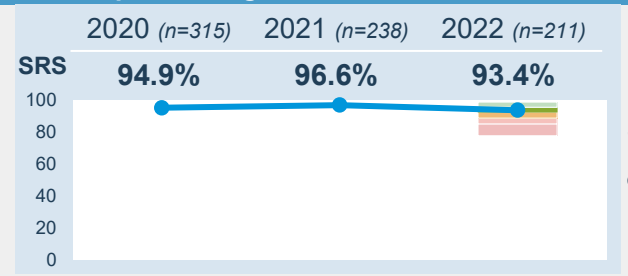
SPH **96.7%**
 %tile **34th**
 QC **96.9%**

Q28. Dr. listened carefully



SPH **95.6%**
 %tile **50th**
 QC **96.0%**

Q32. Dr. spent enough time



SPH **90.6%**
 %tile **78th**
 QC **90.2%**

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

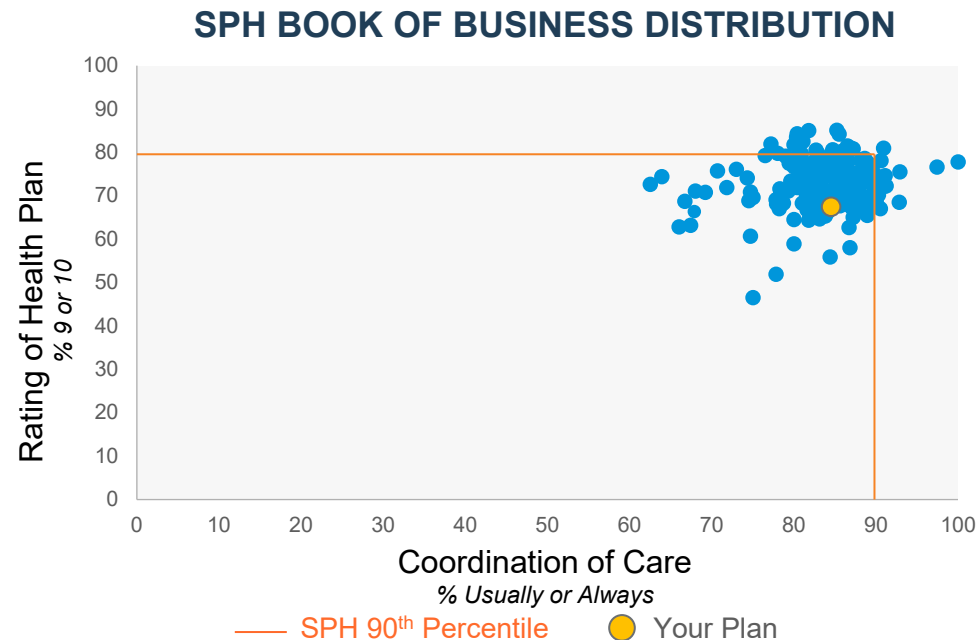
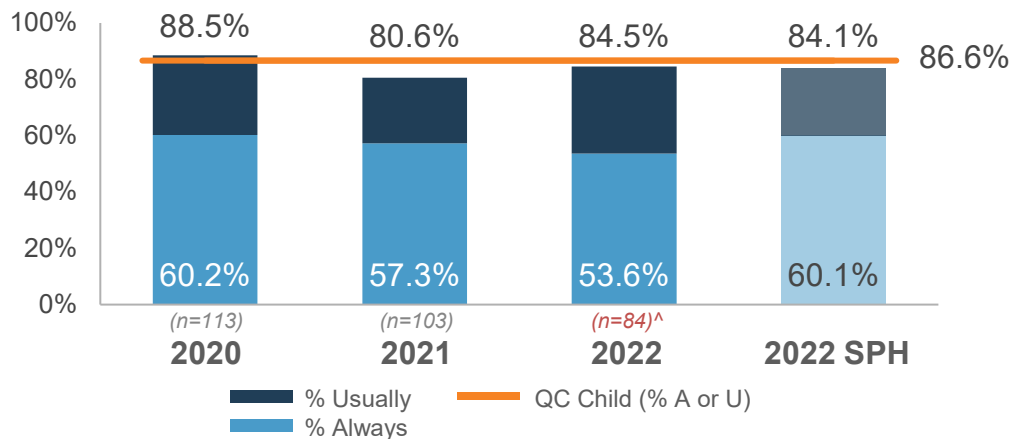
^Denominator less than 100. NCQA will assign an NA to this measure.



COORDINATION OF CARE

MEDICAID CHILD: GENERAL POPULATION

	QC %tile Rank	Score
% A or U	27 th	84.5%



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.



a Press Ganey Solution

SUMMARY OF TREND AND BENCHMARKS

- HUSKY Health program (HUSKY B)

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

Summary Rate Scores: Shows how your plan's composite and key question Summary Rates compare to 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.

Plan Percentile Rankings: 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 (General Population)	2021 Quality Compass® All Plans (CCC Population)	2021 NCQA 1-100 Benchmark (General Population)	2021 NCQA 1-100 Benchmark (CCC Population)	2022 SPH Analytics Book of Business (General Population)	2022 SPH Analytics Book of Business (CCC Population)
	Includes all Medicaid child samples (Non-CCC and CCC) that submitted data to NCQA in 2021.	Includes all Medicaid child samples (CCC) 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 child data (Non-CCC and CCC) collected by NCQA in 2021.	A percentile benchmark (with values ranging from the first through the one hundredth percentile) calculated by NCQA and derived from Medicaid child data (CCC) collected by NCQA in 2021.	Includes all the Medicaid child samples (Non-CCC and CCC) that contracted with SPH Analytics to administer the 2022 CAHPS 5.1H survey and submitted data to NCQA.	Includes all the Medicaid child samples (CCC) that contracted with SPH Analytics to administer the 2022 CAHPS 5.1H survey and submitted data to NCQA.
PROS	<ul style="list-style-type: none"> Contains more plans than the SPH Book of Business Is presented in NCQA's The State of Health Care Quality 	<ul style="list-style-type: none"> Contains more plans than the SPH Book of Business Is presented in NCQA's The State of Health Care Quality Provides a CCC benchmark 	<ul style="list-style-type: none"> Utilized by SPH Analytics to calculate approximate percentile ranking of plan scores in relation to the Quality Compass® All Plans benchmark 	<ul style="list-style-type: none"> Utilized by SPH Analytics to calculate approximate percentile ranking of plan scores in relation to the Quality Compass® All Plans benchmark Provides a CCC benchmark 	<ul style="list-style-type: none"> Provides a benchmark for each question from the survey Permits precise percentile ranking of plan compared to benchmark 	<ul style="list-style-type: none"> Provides a benchmark for each question from the survey Permits precise percentile ranking of plan compared to benchmark Provides a CCC benchmark
CONS	<ul style="list-style-type: none"> Only contains benchmarks for certain key questions, composites, and rating questions 	<ul style="list-style-type: none"> Only contains benchmarks for certain key questions, composites, and rating questions 	<ul style="list-style-type: none"> Only contains benchmarks for certain key questions, composites, and rating questions 	<ul style="list-style-type: none"> Only contains benchmarks for certain key questions, composites, and rating questions 	<ul style="list-style-type: none"> Contains fewer plans than the Public Report and the Quality Compass® All Plans Benchmarks 	<ul style="list-style-type: none"> Contains fewer plans than the Quality Compass® All Plans Benchmarks
SIZE	183 Plans	57 Plans	183 Plans	57 Plans	189 Plans 47,922 Respondents	70 Plans 14,580 Respondents



SUMMARY RATE SCORES

MEDICAID CHILD: GENERAL POPULATION

	2022 Valid n	2020	2021	2022	2022 GP SPH BoB	2021 GP QC
Rating Questions (% 9 or 10)						
★ Q49. Rating of Health Plan	338	65.7%	66.0%	67.5%	72.5%	72.2%
★ Q9. Rating of Health Care	224	77.0%	75.0%	70.5%	71.2%	74.3%
★ Q36. Rating of Personal Doctor	278	82.6%	80.1%	73.4% ↓‡	77.4%	78.0%
★ Q43. Rating of Specialist	72^	79.5%	72.3%	61.1% ‡	73.9% ▼	73.8% ▼
Rating Questions (% 8, 9 or 10)						
Q49. Rating of Health Plan	338	84.4%	85.3%	87.0%	86.9%	86.7%
Q9. Rating of Health Care	224	92.4%	91.8%	89.3%	87.6%	88.9%
Q36. Rating of Personal Doctor	278	94.0%	92.0%	89.9%	90.3%	90.6%
Q43. Rating of Specialist	72^	89.2%	83.2%	86.1%	87.5%	87.4%
★ Getting Needed Care (% Usually or Always)	152	89.6%	86.7%	80.4% ↓	84.4%	85.7% ▼
Q10. Getting care, tests, or treatment	225	94.2%	94.4%	85.8% ↓‡	89.2%	90.3%
Q41. Getting specialist appointment	80^	84.9%	79.0%	75.0%	79.5%	81.9%
★ Getting Care Quickly (% Usually or Always)	145	91.0%	91.1%	86.3%	86.7%	86.9%
Q4. Getting urgent care	80^	91.7%	97.0%	92.5%	90.5%	91.0%
Q6. Getting routine care	211	90.3%	85.3%	80.1% ‡	82.9%	83.0%
★ Q35. Coordination of Care	84^	88.5%	80.6%	84.5%	84.1%	86.6%
Customer Service + (% Usually or Always)	62^	88.4%	89.0%	84.1%	88.2%	88.3%
Q45. Provided information or help	63^	81.7%	85.1%	77.8%	82.7%	82.8%
Q46. Treated with courtesy and respect	62^	95.1%	93.0%	90.3%	93.7%	93.9%
How Well Doctors Communicate + (% Usually or Always)	211	96.7%	97.3%	94.6%	94.4%	94.4%
Q27. Dr. explained things	210	96.5%	96.7%	92.9%	94.8%	94.6%
Q28. Dr. listened carefully	212	96.9%	97.0%	95.8%	95.6%	96.0%
Q29. Dr. showed respect	213	98.4%	98.7%	96.2%	96.7%	96.9%
Q32. Dr. spent enough time	211	94.9%	96.6%	93.4%	90.6%	90.2%
Q48. Ease of Filling Out Forms + (% Usually or Always)	331	95.0%	96.4%	94.0%	96.1%	96.0%

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.



SUMMARY RATE SCORES

MEDICAID CHILD: CCC POPULATION

	2022 Valid n	2020	2021	2022	2022 CCC SPH BoB	2021 CCC QC
Rating Questions (% 9 or 10)						
★ Q49. Rating of Health Plan	175	63.2%	65.2%	65.1%	69.7%	68.6%
★ Q9. Rating of Health Care	143	77.4%	71.9%	68.5%	69.1%	71.7%
★ Q36. Rating of Personal Doctor	166	82.2%	77.4%	73.5% ‡	77.5%	78.4%
★ Q43. Rating of Specialist	81^	73.3%	79.0%	65.4% ↓	74.0%	74.4%
Rating Questions (% 8, 9 or 10)						
Q49. Rating of Health Plan	175	80.9%	85.6%	84.6%	84.4%	83.9%
Q9. Rating of Health Care	143	92.5%	91.8%	87.4%	86.5%	87.8%
Q36. Rating of Personal Doctor	166	91.7%	91.7%	91.0%	89.5%	89.5%
Q43. Rating of Specialist	81^	87.1%	91.0%	84.0%	87.1%	87.5%
★ Getting Needed Care (% Usually or Always)	115	89.9%	92.1%	89.6%	87.5%	87.5%
Q10. Getting care, tests, or treatment	143	96.0%	95.4%	93.0%	90.4%	90.6%
Q41. Getting specialist appointment	87^	83.7%	88.9%	86.2%	84.5%	85.0%
★ Getting Care Quickly (% Usually or Always)	100	96.2%	93.0%	91.7%	90.5%	90.8%
Q4. Getting urgent care	60^	95.7%	96.1%	98.3%	92.4% ▲	94.4% ▲
Q6. Getting routine care	140	96.6%	89.9%	85.0% ‡	88.5%	88.1%
★ Q35. Coordination of Care	88^	87.1%	81.0%	79.5%	83.3%	85.2%
Customer Service + (% Usually or Always)	47^	91.0%	91.7%	95.7%	89.3% ▲	91.2%
Q45. Provided information or help	47^	84.6%	88.3%	91.5%	83.7%	86.8%
Q46. Treated with courtesy and respect	47^	97.4%	95.0%	100%	94.8% ▲	95.6% ▲
How Well Doctors Communicate + (% Usually or Always)	138	97.8%	98.3%	97.1%	94.9%	94.6%
Q27. Dr. explained things	137	98.5%	99.5%	97.1%	95.7%	95.2%
Q28. Dr. listened carefully	138	97.5%	96.3%	97.8%	95.5%	95.7%
Q29. Dr. showed respect	139	98.5%	98.9%	98.6%	96.5% ▲	96.7%
Q32. Dr. spent enough time	139	96.5%	98.4%	95.0%	91.9%	91.0% ▲
Q48. Ease of Filling Out Forms + (% Usually or Always)	170	95.1%	96.7%	97.6%	95.9%	95.6%

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.

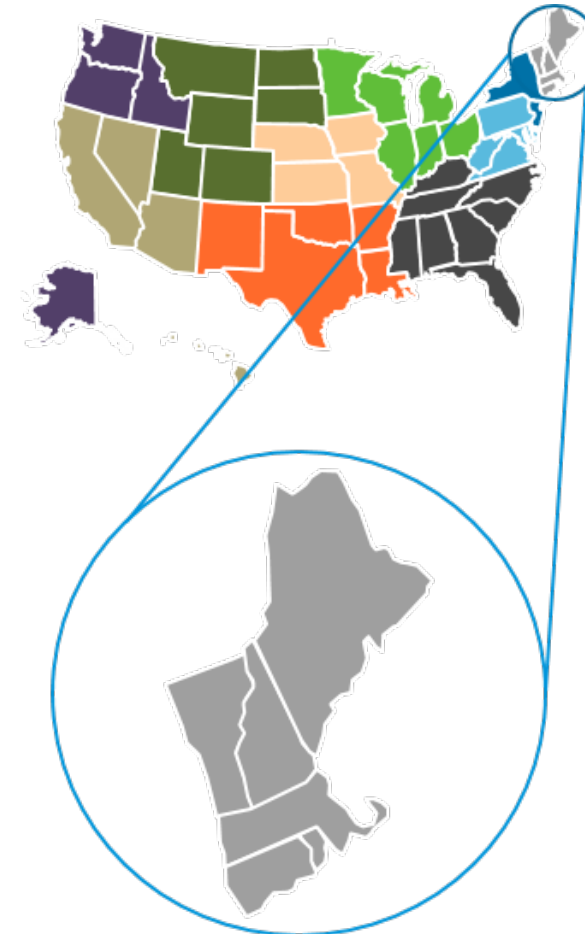
CCC MEASURES	2022 Valid n	2020	2021	2022	2022 CCC SPH BoB	2021 CCC QC
Q51. Access to Rx Medicines (% Usually or Always)	131	92.1%	93.3%	88.5%	91.5%	91.4%
Access to Specialized Services (% Usually or Always)	50^	82.8%	82.4%	83.1%	73.0% ▲	74.0% ▲
Q15. Easy to get special medical equipment	13^	83.3%	82.4%	92.3%	71.9%	NA
Q18. Easy to get special therapy	37^	78.4%	83.8%	86.5%	74.2% ▲	75.0% ▲
Q21. Easy to get treatment or counseling	102	86.6%	81.0%	70.6% ‡	72.9%	74.4%
FCC: Dr Who Knows Child (% Yes)	125	92.5%	93.1%	91.5%	91.5%	90.8%
Q33. Discussed feelings/growth/behavior	138	94.6%	92.4%	91.3%	90.4%	89.9%
Q38. Understands effects on child's life	120	92.7%	94.5%	94.2%	93.7%	92.9%
Q39. Understands effects on family's life	117	90.2%	92.5%	88.9%	90.4%	90.0%
Q8. FCC: Getting Needed Info (% Usually or Always)	143	93.4%	93.3%	93.7%	92.0%	90.8%
Coordination of Care for CCC (% Yes)	69^	77.9%	76.3%	78.3%	76.6%	77.1%
Q13. Helped contact child's school/daycare	40^	100%	96.9%	95.0%	92.6%	NA
Q24. Helped coordinate child's care	99^	55.8%	55.7%	61.6%	60.5%	60.3%

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.

	SUMMARY RATE	2022 SPH BoB REGION
Rating Questions (% 9 or 10)		
★ Q49. Rating of Health Plan	67.5%	70.1%
★ Q9. Rating of Health Care	70.5%	70.2%
★ Q36. Rating of Personal Doctor	73.4%	76.5%
★ Q43. Rating of Specialist	61.1%	72.7% ❖
Rating Questions (% 8, 9 or 10)		
Q49. Rating of Health Plan	87.0%	86.0%
Q9. Rating of Health Care	89.3%	88.3%
Q36. Rating of Personal Doctor	89.9%	90.0%
Q43. Rating of Specialist	86.1%	87.5%
★ Getting Needed Care (% Usually or Always)	80.4%	86.5% ❖
Q10. Getting care, tests, or treatment	85.8%	91.4% ❖
Q41. Getting specialist appointment	75.0%	81.6%
★ Getting Care Quickly (% Usually or Always)	86.3%	88.5%
Q4. Getting urgent care	92.5%	91.8%
Q6. Getting routine care	80.1%	85.3%
★ Q35. Coordination of Care	84.5%	86.5%
Customer Service + (% Usually or Always)		
Q45. Provided information or help	77.8%	82.3%
Q46. Treated with courtesy and respect	90.3%	94.6%
How Well Doctors Communicate + (% Usually or Always)		
Q27. Dr. explained things	92.9%	95.0%
Q28. Dr. listened carefully	95.8%	95.1%
Q29. Dr. showed respect	96.2%	97.3%
Q32. Dr. spent enough time	93.4%	91.6%
Q48. Ease of Filling Out Forms + (% Usually or Always)	94.0%	95.6%

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



Region 1: Boston

- Connecticut
- Maine
- Rhode Island
- Massachusetts
- New Hampshire
- Vermont

Significance Testing

Current year score is significantly higher/lower (❖/❖) than the 2022 SPH BoB Region score.



PERCENTILE RANKINGS

MEDICAID CHILD: GENERAL POPULATION

	2022 Plan Score	QC %tile	National Percentiles from 2021 Quality Compass									SPH %tile	National Percentiles from 2022 SPH Book of Business								
			5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th		5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
Rating Questions (% 9 or 10)																					
★ Q49. Rating of Health Plan	67.5%	20 th	60.6	63.9	68.4	70.0	72.5	75.4	76.5	79.6	81.6	15 th	64.4	66.2	68.8	70.6	73.1	75.4	76.7	79.6	81.1
★ Q9. Rating of Health Care	70.5%	21 st	66.3	68.9	71.1	72.5	74.4	76.5	77.2	80.0	81.2	44 th	62.9	65.1	67.5	69.2	71.4	74.0	75.2	78.1	78.9
★ Q36. Rating of Personal Doctor	73.4%	11 th	71.6	72.8	75.6	76.6	78.2	79.9	80.4	82.9	83.9	14 th	69.9	72.4	74.9	75.7	77.3	78.9	80.2	83.3	84.3
★ Q43. Rating of Specialist	61.1%	<5 th	68.3	69.2	71.2	72.3	74.1	76.0	76.1	77.5	80.9	5 th	61.1	64.7	69.7	71.2	73.9	76.9	78.3	82.6	86.0
Rating Questions (% 8, 9 or 10)																					
Q49. Rating of Health Plan	87.0%	49 th	78.6	81.8	84.2	85.3	87.2	88.7	89.7	91.3	92.5	48 th	80.3	82.0	84.4	85.6	87.3	89.3	89.9	92.1	92.8
Q9. Rating of Health Care	89.3%	58 th	84.1	85.3	87.3	87.8	88.8	90.1	90.8	92.6	93.7	69 th	81.5	82.8	85.6	86.4	87.9	89.1	90.0	91.5	92.7
Q36. Rating of Personal Doctor	89.9%	36 th	86.4	87.1	88.9	89.7	90.9	91.7	92.2	94.2	94.9	41 st	85.4	87.1	88.9	89.5	90.5	91.6	92.4	93.6	94.2
Q43. Rating of Specialist	86.1%	37 th	80.7	82.7	85.4	86.0	86.8	88.9	90.3	91.1	93.6	32 nd	78.6	81.2	84.8	86.2	88.3	89.6	90.5	92.9	94.4
★ Getting Needed Care (% U/A)	80.4%	11th	78.3	79.4	82.7	84.3	85.7	88.0	89.0	90.9	92.3	24th	74.8	76.5	80.6	82.1	84.4	86.4	87.6	90.2	92.1
Q10. Getting care, tests, or treatment	85.8%	11 th	83.9	85.8	88.2	89.1	90.4	92.4	93.0	94.7	95.2	23 rd	81.3	82.7	86.2	87.6	89.7	91.8	92.4	93.9	95.1
Q41. Getting specialist appointment	75.0%	7 th	72.7	75.2	79.0	80.4	82.7	84.5	85.4	88.4	89.5	33 rd	64.9	70.0	74.2	75.0	79.1	82.6	84.3	88.2	89.1
★ Getting Care Quickly (% U/A)	86.3%	39th	78.8	79.8	84.1	85.2	87.6	89.3	90.0	92.5	93.6	44th	76.2	79.1	83.5	84.8	86.8	89.2	90.1	91.8	92.9
Q4. Getting urgent care	92.5%	55 th	84.7	84.7	89.3	89.3	92.4	93.5	93.5	94.3	94.3	62 nd	78.8	81.8	86.6	87.7	90.8	92.9	93.9	95.8	97.6
Q6. Getting routine care	80.1%	29 th	72.9	75.8	79.3	81.1	83.4	85.6	86.4	89.1	91.0	29 th	71.2	75.1	78.8	81.0	83.7	85.7	87.3	89.4	90.6
★ Q35. Coordination of Care	84.5%	27th	80.4	81.1	83.2	85.2	87.8	88.6	89.1	90.8	91.4	52nd	71.9	77.3	81.0	82.1	84.2	86.6	87.2	89.8	90.6
Customer Service + (% U/A)	84.1%	6th	83.5	84.7	86.5	86.9	88.0	90.1	90.4	92.3	93.0	14th	81.7	82.9	85.9	86.8	88.3	90.3	91.1	93.2	95.0
Q45. Provided information or help	77.8%	10 th	76.0	77.8	80.3	81.2	82.7	84.8	85.7	88.2	89.3	18 th	73.8	76.1	78.6	80.8	82.9	85.7	87.2	90.3	91.6
Q46. Treated with courtesy and respect	90.3%	8 th	89.4	90.5	92.2	92.6	94.5	95.3	95.6	97.1	97.5	15 th	86.6	88.9	92.0	92.7	93.9	95.5	96.3	98.1	100
How Well Doctors Communicate + (% U/A)	94.6%	52nd	90.6	91.4	92.9	93.4	94.3	95.5	96.0	97.3	97.9	50th	90.2	91.1	92.8	93.5	94.6	95.7	96.1	97.0	97.6
Q27. Dr. explained things	92.9%	26 th	90.0	91.2	92.8	93.2	94.7	96.1	96.6	97.8	98.4	23 rd	89.1	90.5	93.2	94.0	95.3	96.3	96.7	97.9	98.3
Q28. Dr. listened carefully	95.8%	50 th	92.8	93.5	94.9	95.2	95.8	97.0	97.4	98.4	98.9	51 st	91.8	92.7	94.0	94.7	95.8	96.6	96.9	98.1	98.7
Q29. Dr. showed respect	96.2%	34 th	93.9	94.7	95.8	96.1	96.9	97.6	98.1	98.9	99.3	38 th	93.2	94.0	95.6	95.9	96.8	97.4	98.0	98.9	99.3
Q32. Dr. spent enough time	93.4%	78 th	83.0	84.8	87.8	88.5	90.2	92.2	93.0	95.3	96.5	77 th	83.7	85.5	87.9	89.1	91.2	92.5	93.2	94.9	95.8
Q48. Ease of Filling Out Forms + (% U/A)	94.0%	12th	93.0	93.9	95.0	95.3	96.1	96.7	97.1	98.0	98.4	8th	93.4	94.2	95.0	95.5	96.2	96.9	97.2	97.9	98.2



PERCENTILE RANKINGS

MEDICAID CHILD: CCC POPULATION

	2022 Plan Score	QC %tile	National Percentiles from 2021 Quality Compass									SPH %tile	National Percentiles from 2022 SPH Book of Business								
			5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th		5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
Rating Questions (% 9 or 10)																					
★ Q49. Rating of Health Plan	65.1%	24 th	55.1	60.9	65.3	66.5	69.0	71.4	72.3	76.4	78.7	18 th	60.9	62.1	65.8	67.3	69.5	74.2	75.3	78.4	80.2
★ Q9. Rating of Health Care	68.5%	25 th	63.2	64.4	68.3	69.9	71.4	74.8	76.3	78.3	79.6	37 th	58.8	60.1	65.7	67.9	70.4	71.7	72.8	76.3	78.9
★ Q36. Rating of Personal Doctor	73.5%	14 th	71.8	72.7	75.8	76.5	78.2	80.5	82.0	84.0	84.6	24 th	68.4	71.2	73.6	75.7	78.2	79.8	81.1	83.9	84.8
★ Q43. Rating of Specialist	65.4%	<5 th	68.3	69.0	71.4	71.9	74.3	76.6	77.9	80.1	80.3	5 th	65.4	68.0	70.9	71.5	73.4	75.7	77.6	80.5	84.7
Rating Questions (% 8, 9 or 10)																					
Q49. Rating of Health Plan	84.6%	50 th	75.3	78.8	81.9	82.8	84.5	86.4	86.7	88.5	88.8	41 st	77.4	79.7	82.9	83.5	85.2	87.0	87.7	89.8	90.7
Q9. Rating of Health Care	87.4%	47 th	83.1	83.7	86.1	86.6	87.6	89.3	90.2	91.0	92.5	59 th	80.4	81.4	84.1	85.7	86.7	88.0	88.6	90.7	92.6
Q36. Rating of Personal Doctor	91.0%	69 th	84.0	85.2	87.9	88.4	90.1	90.8	91.5	93.0	94.1	69 th	85.8	86.6	87.7	88.1	89.3	90.8	91.7	94.1	94.2
Q43. Rating of Specialist	84.0%	13 th	82.9	83.7	85.7	86.8	87.7	89.1	89.6	90.8	91.4	15 th	79.8	82.2	85.0	85.5	87.1	88.4	89.1	90.9	92.6
★ Getting Needed Care (% U/A)	89.6%	68th	80.7	81.4	86.0	86.4	88.3	89.4	90.4	91.7	92.1	58th	79.8	81.6	85.0	86.2	89.0	90.3	90.6	91.8	92.8
Q10. Getting care, tests, or treatment	93.0%	74 th	84.6	86.6	88.3	89.6	91.4	92.4	93.2	94.1	94.6	73 rd	82.4	84.7	89.2	90.1	91.7	92.4	93.1	94.6	95.8
Q41. Getting specialist appointment	86.2%	59 th	76.3	81.2	82.5	83.0	85.1	87.4	88.0	90.0	91.5	49 th	74.9	77.2	81.4	84.1	86.3	87.8	88.4	89.9	90.4
★ Getting Care Quickly (% U/A)	91.7%	64th	85.2	87.2	89.8	90.2	91.0	91.8	92.6	93.9	95.2	58th	83.7	85.8	89.2	89.7	91.1	92.4	93.0	94.4	95.5
Q4. Getting urgent care	98.3%	100 th	90.7	91.1	92.2	92.6	94.6	95.5	97.0	97.4	97.9	94 th	84.5	86.5	90.6	91.7	93.4	94.7	95.2	97.3	98.7
Q6. Getting routine care	85.0%	15 th	82.5	83.9	85.4	86.7	88.4	89.5	90.0	92.5	94.3	17 th	82.2	83.8	86.5	87.3	89.2	90.5	91.4	93.0	93.4
★ Q35. Coordination of Care	79.5%	<5th	80.2	80.7	82.8	84.1	85.1	86.8	87.9	89.7	90.0	25th	73.9	75.0	79.5	81.8	84.6	86.0	86.5	88.5	89.0
Customer Service + (% U/A)	95.7%	93rd	84.7	86.8	89.7	89.9	90.7	93.0	94.1	94.2	96.2	98th	84.0	85.3	86.8	87.2	89.1	91.9	92.5	94.1	94.5
Q45. Provided information or help	91.5%	93 rd	76.6	83.0	83.3	83.7	87.6	90.4	90.5	91.2	94.3	91 st	77.0	77.6	79.5	80.5	84.0	86.9	87.9	90.7	92.5
Q46. Treated with courtesy and respect	100%	100 th	90.6	92.7	94.7	95.1	96.1	97.1	97.1	97.9	98.1	100 th	89.5	91.7	93.0	93.3	95.1	96.2	96.9	98.4	100
How Well Doctors Communicate + (% U/A)	97.1%	91st	90.6	91.8	93.3	93.9	94.9	95.6	95.9	97.0	97.6	90th	91.4	92.2	93.8	94.3	95.2	96.0	96.2	97.1	97.8
Q27. Dr. explained things	97.1%	87 th	90.2	91.5	93.8	94.7	95.7	96.5	96.7	97.4	98.2	77 th	92.2	92.6	94.4	94.9	95.8	96.6	97.0	98.2	98.8
Q28. Dr. listened carefully	97.8%	87 th	92.5	92.9	94.5	95.3	95.9	96.4	96.8	98.0	98.3	91 st	92.3	92.9	94.4	95.1	95.6	96.6	97.0	97.7	98.3
Q29. Dr. showed respect	98.6%	94 th	94.3	95.0	95.7	96.1	96.9	97.4	97.8	98.4	98.8	87 th	94.3	94.5	95.8	96.1	96.8	97.4	97.6	98.8	98.9
Q32. Dr. spent enough time	95.0%	86 th	84.6	85.6	88.3	89.5	91.5	92.7	93.9	95.7	96.4	81 st	86.8	87.7	90.5	91.5	92.9	94.0	94.6	95.7	96.4
Q48. Ease of Filling Out Forms + (% U/A)	97.6%	92nd	92.0	93.1	94.5	95.0	95.9	96.5	96.8	97.5	97.9	84th	93.2	94.0	95.0	95.3	96.0	96.6	97.1	97.8	98.3



PERCENTILE RANKINGS

MEDICAID CHILD: CCC POPULATION

	2022 Plan Score	QC %tile	National Percentiles from 2021 Quality Compass									SPH %tile	National Percentiles from 2022 SPH Book of Business								
			5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th		5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
Q51. Access to Rx Medicines (% U/A)	88.5%	13th	86.8	87.8	89.7	90.4	91.8	92.6	93.0	94.8	95.8	10th	86.2	88.4	89.6	90.1	91.0	93.4	94.2	95.7	96.3
Access to Specialized Services (% U/A)	83.1%	92nd	64.1	66.0	72.2	72.2	73.7	74.7	77.9	82.5	83.2	92nd	62.9	66.2	70.4	71.8	73.5	76.8	78.9	81.3	84.9
Q15. Easy to get special medical equipment	92.3%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	91st	53.4	60.5	66.7	68.6	71.4	81.8	83.3	91.9	94.7
Q18. Easy to get special therapy	86.5%	100th	66.0	70.3	72.1	72.4	75.1	77.6	78.0	79.1	82.6	89th	60.3	62.1	68.9	70.6	74.3	79.5	82.5	86.8	90.2
Q21. Easy to get treatment or counseling	70.6%	29th	64.4	65.5	69.7	71.7	75.9	77.3	78.2	81.7	82.9	33rd	61.7	64.2	67.4	69.9	75.5	77.7	78.4	81.6	85.5
FCC: Dr Who Knows Child (% Yes)	91.5%	69th	86.4	87.6	89.8	90.5	91.0	91.3	92.4	94.2	94.4	41st	88.5	88.9	90.2	91.0	91.7	92.3	92.8	93.4	93.8
Q33. Discussed feelings/growth/behavior	91.3%	65th	84.4	85.7	88.3	89.0	90.4	91.6	92.0	93.7	95.1	66th	87.8	88.1	88.8	89.3	90.0	91.5	92.0	93.5	94.2
Q38. Understands effects on child's life	94.2%	71st	88.4	89.9	91.5	91.8	93.0	94.0	94.5	95.7	96.6	56th	89.1	90.6	92.3	92.9	93.4	95.0	95.5	96.1	96.9
Q39. Understands effects on family's life	88.9%	31st	85.3	85.7	88.0	89.0	90.2	91.5	91.8	93.8	94.9	22nd	85.9	86.9	89.6	90.1	90.6	91.3	91.6	93.6	94.6
Q8. FCC: Getting Needed Info (% U/A)	93.7%	90th	85.8	87.9	89.3	89.6	91.0	91.8	92.6	93.7	96.0	73rd	85.7	87.6	91.2	91.8	92.5	93.1	94.2	95.2	96.0
Coordination of Care for CCC (% Yes)	78.3%	64th	69.3	72.0	75.6	76.6	78.1	78.9	78.9	81.2	81.4	62nd	70.2	72.1	74.3	75.3	77.2	78.7	79.1	81.2	81.7
Q13. Helped contact child's school/daycare	95.0%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	58th	81.2	85.0	90.0	90.9	93.3	95.3	96.4	100	100
Q24. Helped coordinate child's care	61.6%	53rd	49.4	50.4	56.4	56.6	60.9	64.5	64.9	67.4	69.1	55th	51.3	53.2	56.9	57.8	60.5	63.1	65.4	69.6	72.3



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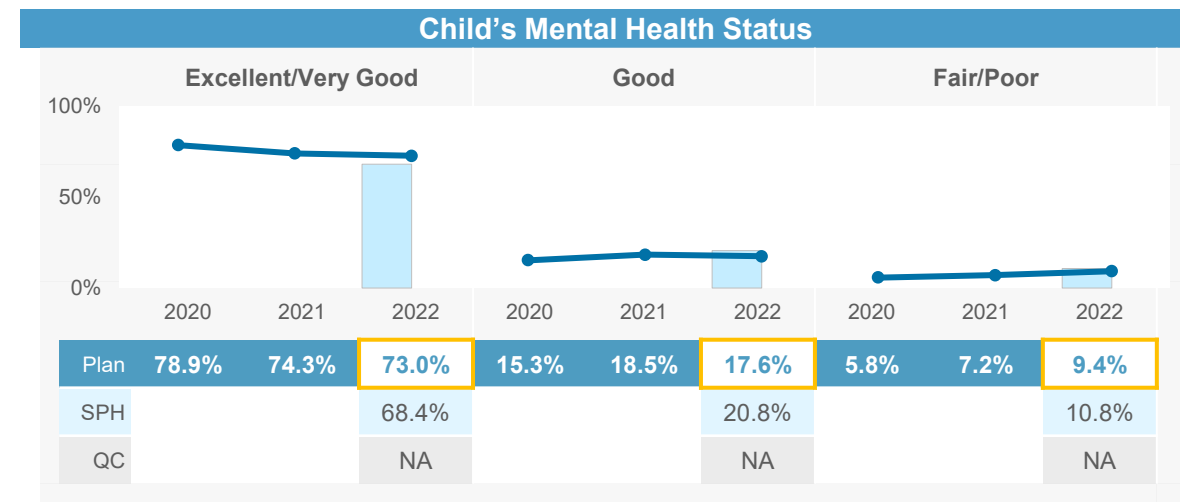
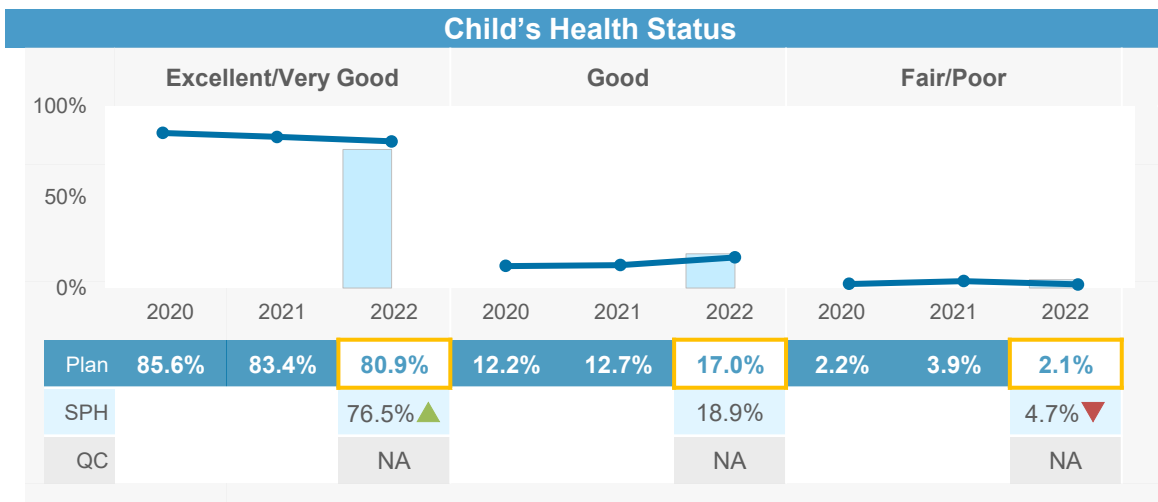
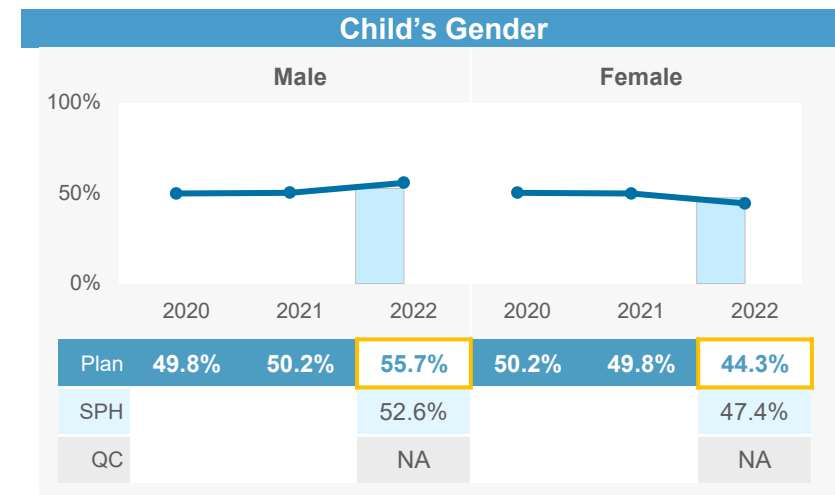
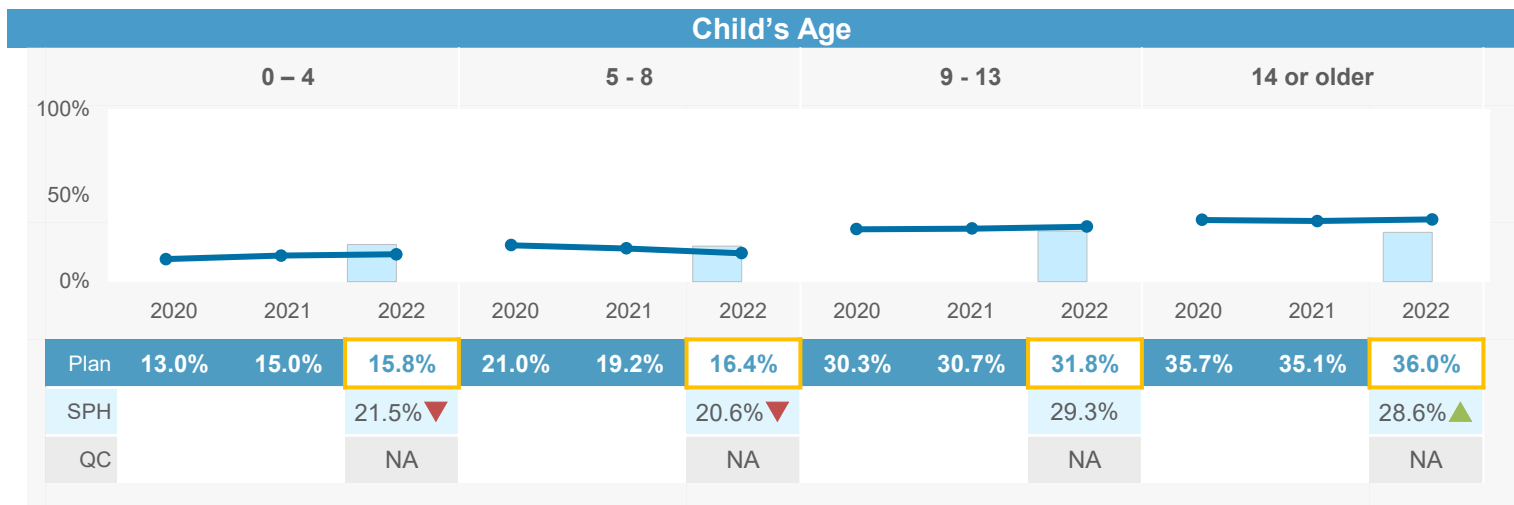
PROFILE OF SURVEY RESPONDENTS

DEMOGRAPHIC COMPOSITION

- HUSKY Health program (HUSKY B)

PROFILE OF SURVEY RESPONDENTS

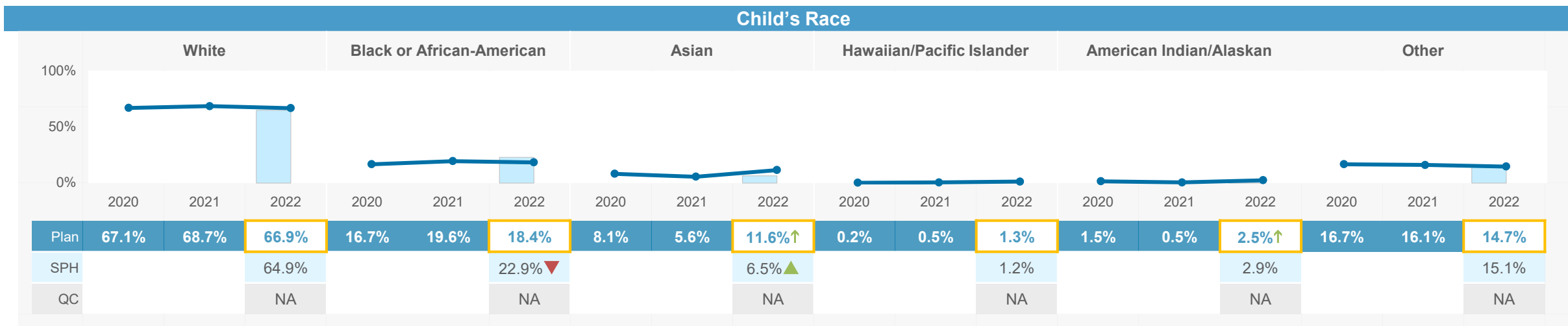
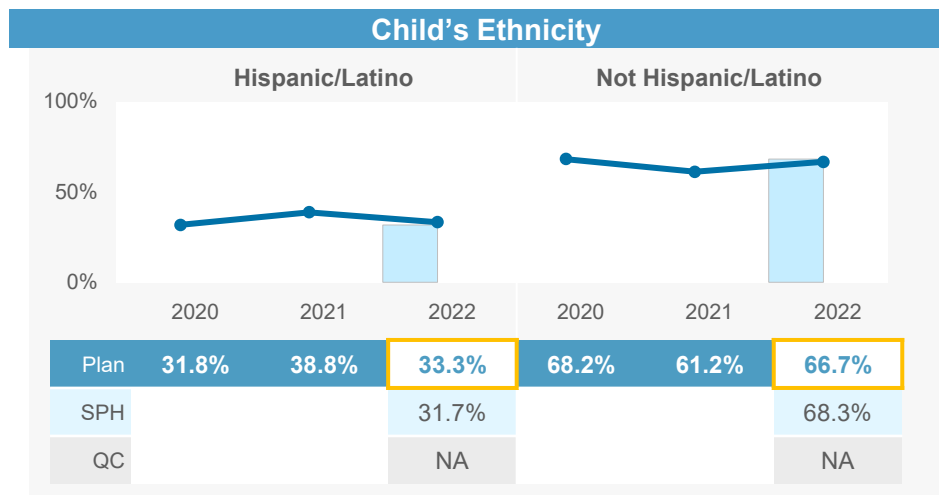
MEDICAID CHILD: GENERAL POPULATION



More info.

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.

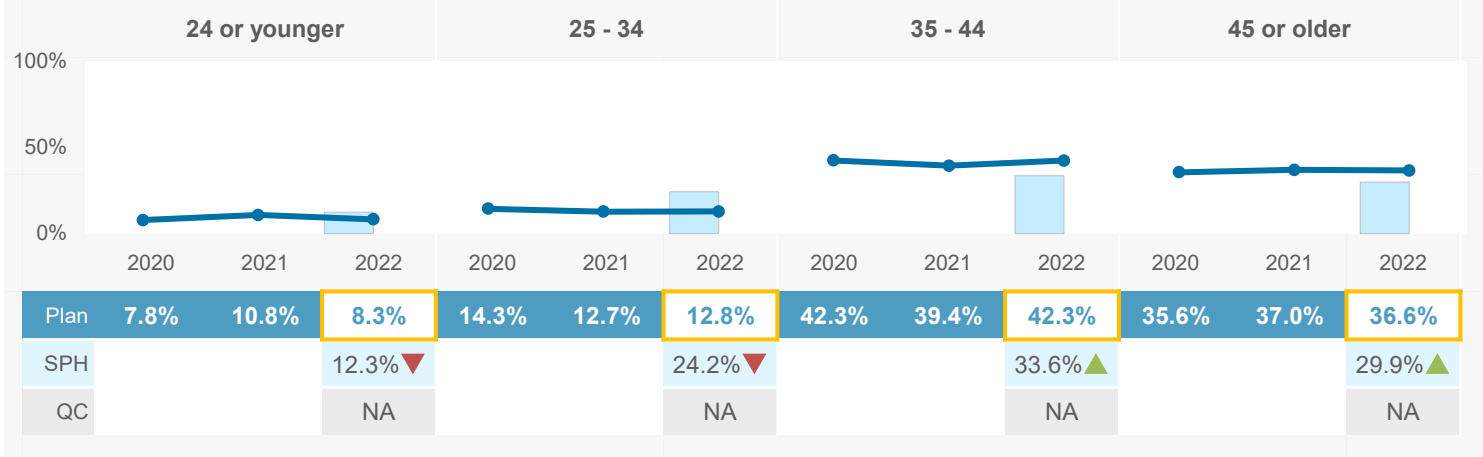


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Benchmarks: SPH refers to the 2022 SPH Book of Business benchmark. QC refers to the 2021 QC National Data benchmark. NCQA did not publish demographics for the 2021 benchmark.

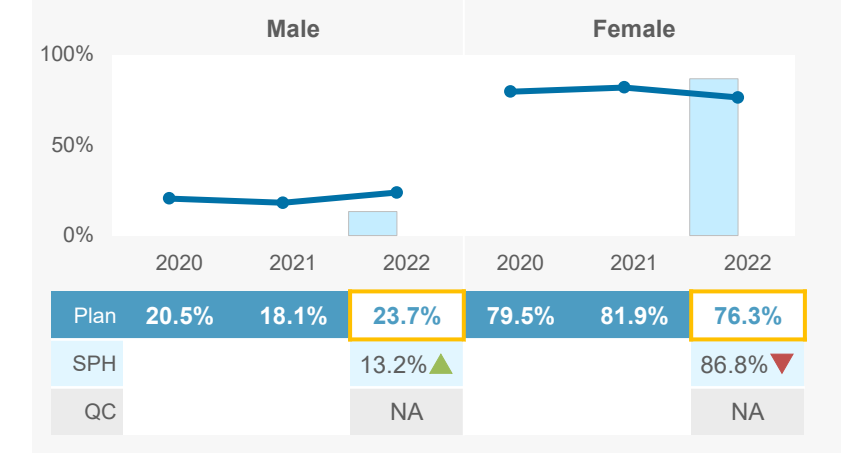
PROFILE OF SURVEY RESPONDENTS

MEDICAID CHILD: GENERAL POPULATION

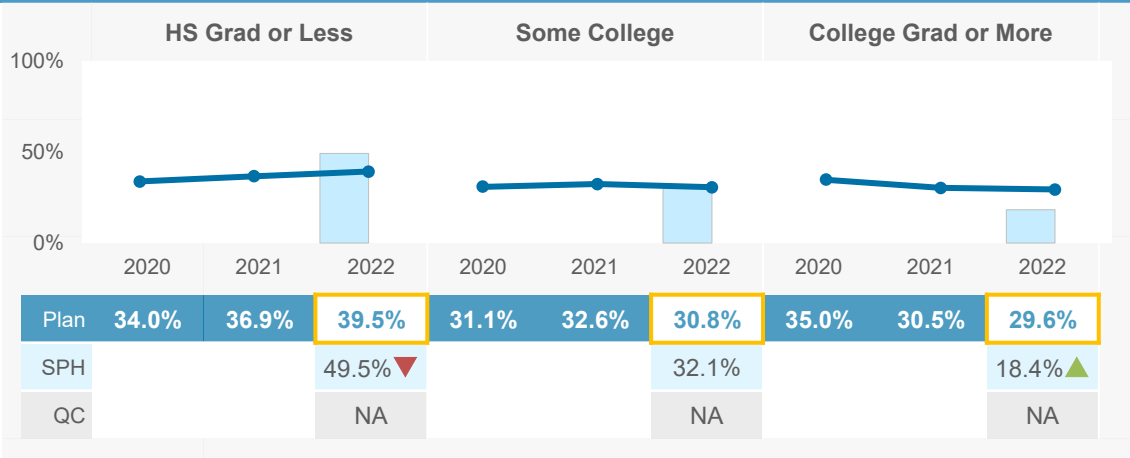
Respondent's Age



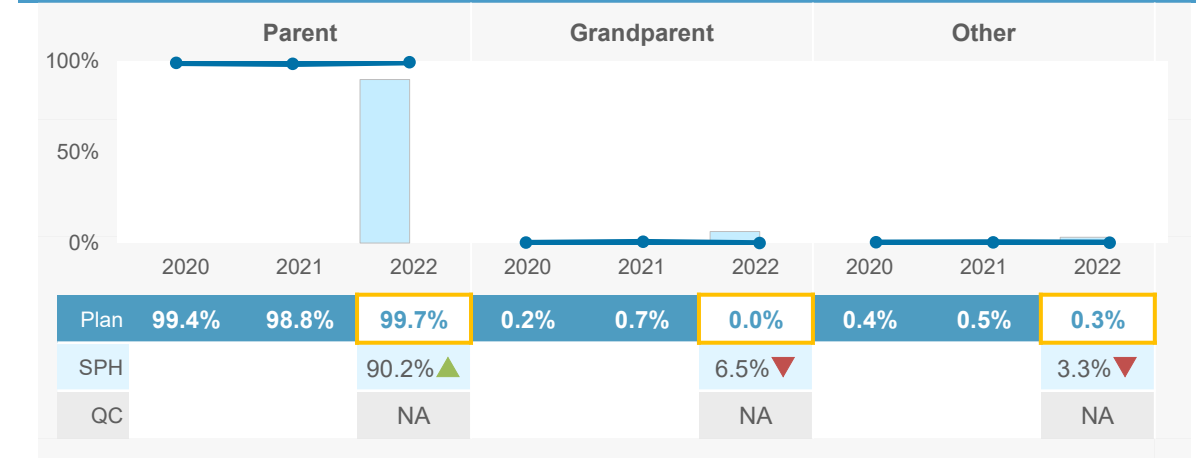
Respondent's Gender



Respondent's Education

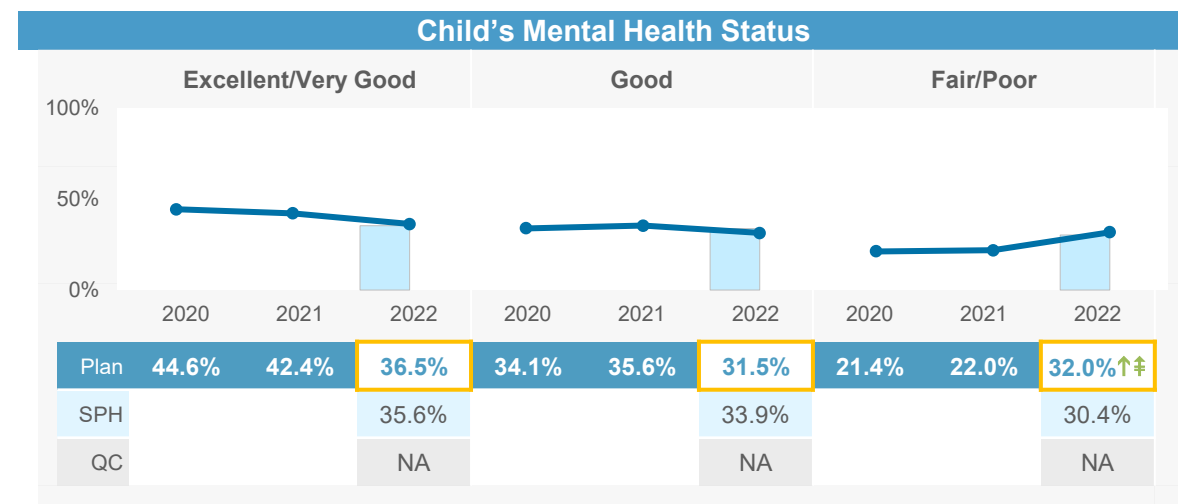
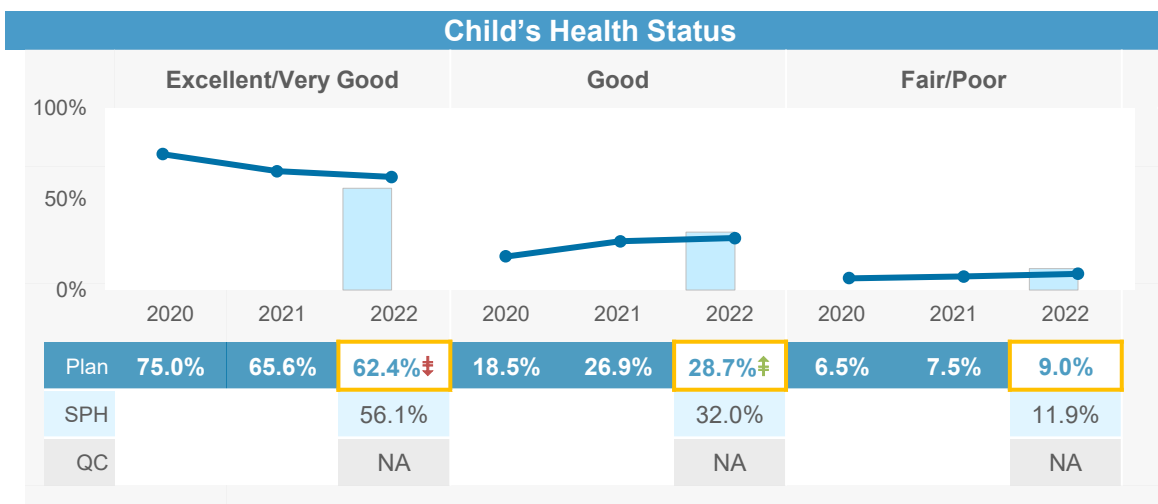
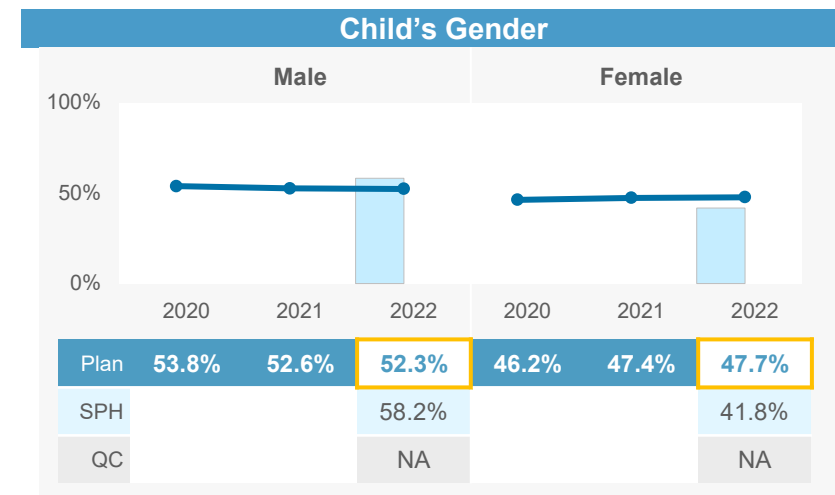
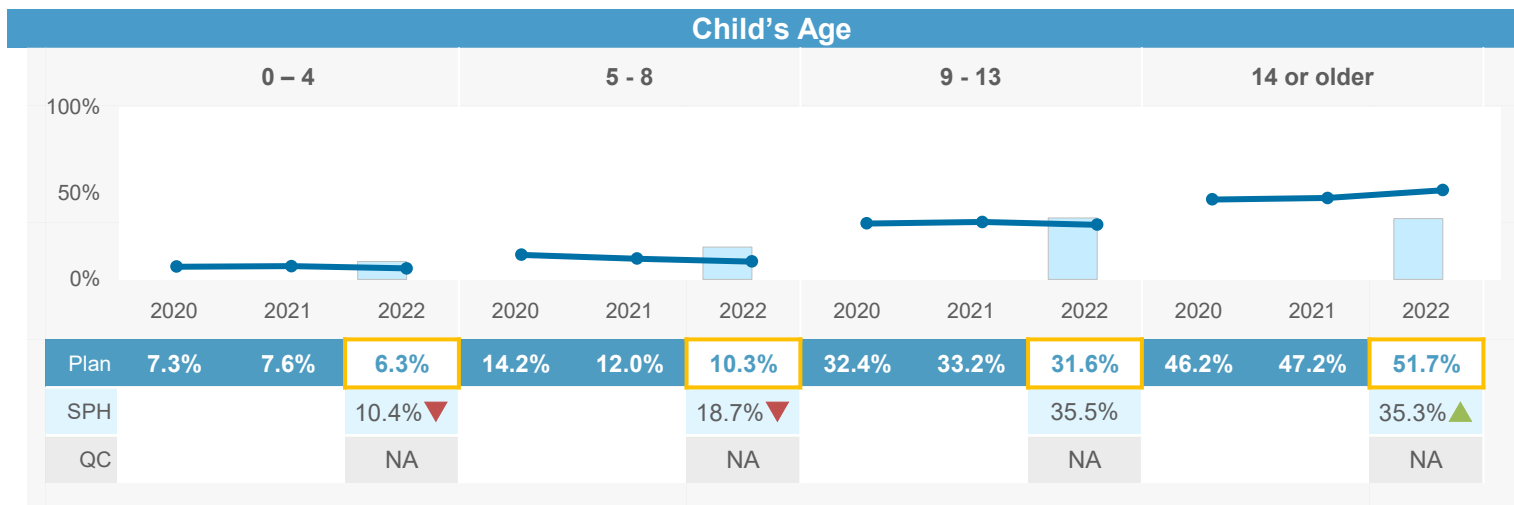


Respondent's Relation to Child

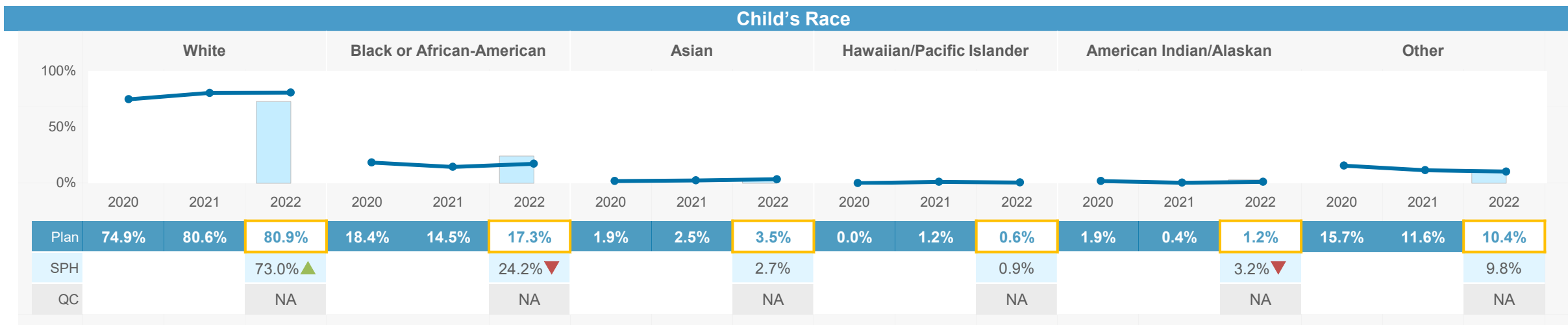
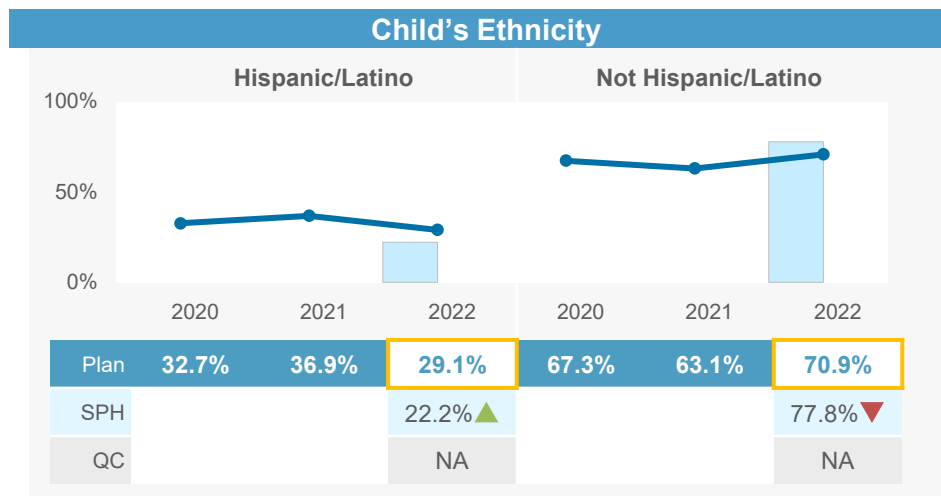


Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (↕/↕) or benchmark score (▲/▼).

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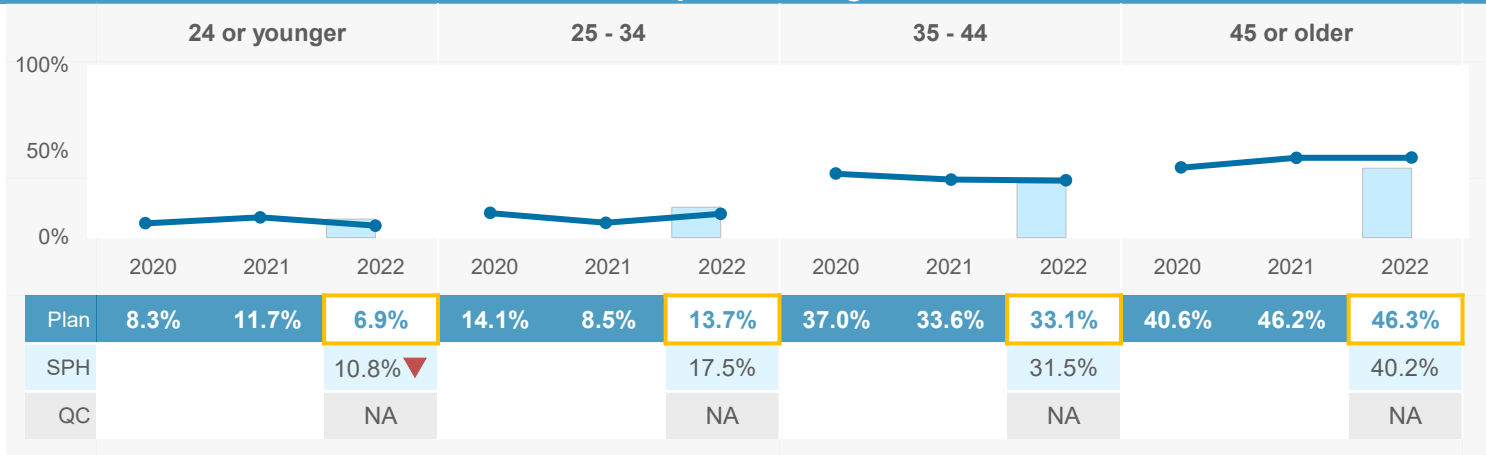
Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/↓), the 2020 score (‡/‡) or benchmark score (▲/▼).
Benchmarks: SPH refers to the 2022 SPH Book of Business benchmark. QC refers to the 2021 QC National Data benchmark. NCQA did not publish demographics for the 2021 benchmark.



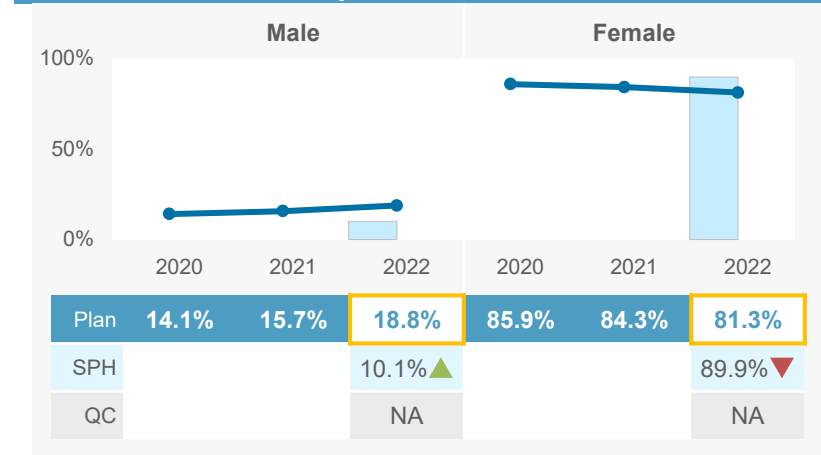
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Benchmarks: SPH refers to the 2022 SPH Book of Business benchmark. QC refers to the 2021 QC National Data benchmark. NCQA did not publish demographics for the 2021 benchmark.

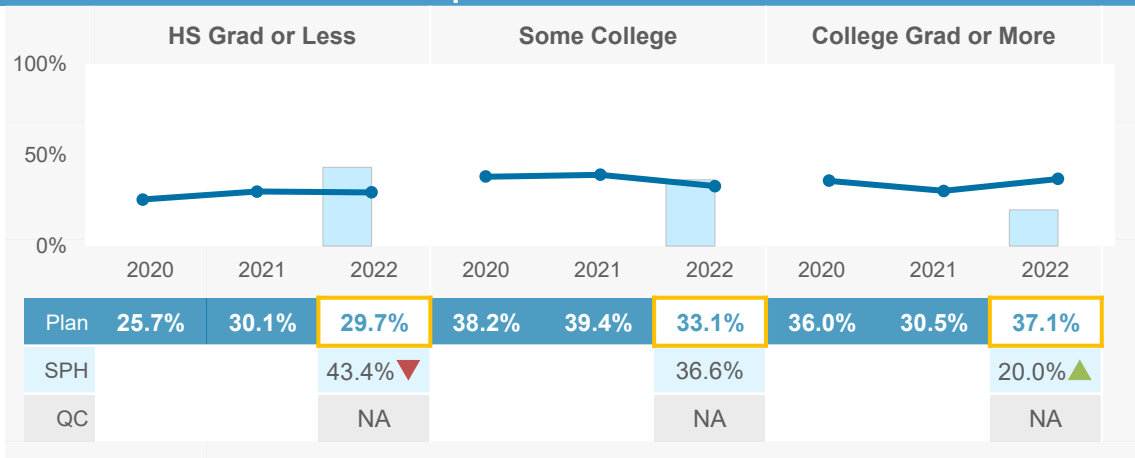
Respondent's Age



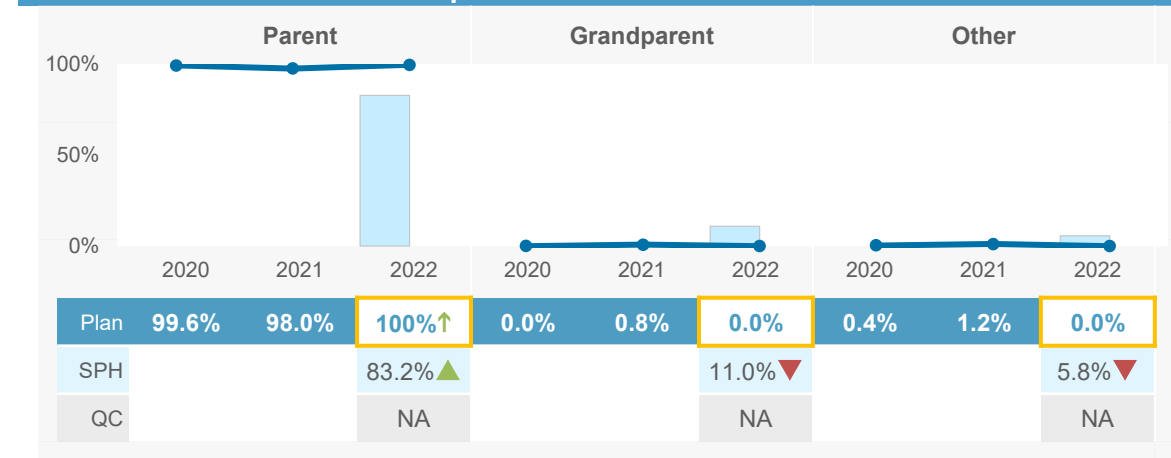
Respondent's Gender



Respondent's Education



Respondent's Relation to Child



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.



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SUPPLEMENTAL QUESTIONS

- HUSKY Health program (HUSKY B)

Survey Item		Summary Rate Score			2022 SPH BoB
		2020	2021	2022	
Q77. Problems seeing a specialist					
	Opt-Outs	Total	(n=507)	(n=438)	(n=347)
	Opt Out: My child did not have any difficulty seeing a specialist		143	128	107
	Opt Out: My child did not see a specialist		220	221	162
	Valid Responses	Base	(n=70)	(n=38)	(n=41)
	OB/Gynecology		2.9%	5.3%	4.9%
	Cardiology		2.9%	2.6%	4.9%
	Neurology		7.1%	10.5%	7.3%
	Dermatology		25.7%	21.1%	24.4%
	Orthopedics		7.1%	5.3%	14.6%
	Ophthalmology		14.3%	13.2%	14.6%
	Gastrointestinal		7.1%	7.9%	2.4%
	Ear, Nose and Throat		7.1%	5.3%	2.4%
	Behavioral Health		21.4%	18.4%	29.3%
	Other		30.0%	36.8%	39.0%

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

Low Base: ^Indicates a base size smaller than 20. Interpret results with caution.



SUPPLEMENTAL QUESTIONS

MEDICAID CHILD: CCC POPULATION

Survey Item		Summary Rate Score			2022 SPH BoB
		2020	2021	2022	
Q77. Problems seeing a specialist					
	Opt-Outs	Total	(n=280)	(n=254)	(n=178)
	Opt Out: My child did not have any difficulty seeing a specialist		121	129	86
	Opt Out: My child did not see a specialist		48	54	26
	Valid Responses	Base	(n=62)	(n=49)	(n=55)
	OB/Gynecology		1.6%	2.0%	5.5%
	Cardiology		0.0%	0.0%	7.3% ↑ ‡
	Neurology		6.5%	10.2%	5.5%
	Dermatology		14.5%	20.4%	12.7%
	Orthopedics		9.7%	2.0%	7.3%
	Ophthalmology		6.5%	12.2%	3.6%
	Gastrointestinal		6.5%	4.1%	0.0% ‡
	Ear, Nose and Throat		9.7%	6.1%	7.3%
	Behavioral Health		40.3%	51.0%	50.9%
	Other		29.0%	14.3%	34.5% ↑

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

Low Base: ^Indicates a base size smaller than 20. Interpret results with caution.



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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	Specialist overall	0.6121
Q36	Personal doctor overall	0.5930
Q49	Health plan overall	0.5096
Q10	Got care/tests/treatment	0.4601
Q32	Dr. spent enough time	0.4013
Q41	Got specialist appt.	0.3786
Q31	Dr. explained things for child	0.3717
Q28	Dr. listened carefully	0.3526
Q29	Dr. showed respect	0.3399
Q6	Got routine care	0.3389

With Personal Doctor Rating

Q9	Health care overall	0.5930
Q32	Dr. spent enough time	0.4191
Q49	Health plan overall	0.4005
Q31	Dr. explained things for child	0.3850
Q28	Dr. listened carefully	0.3650
Q4	Got urgent care	0.3363
Q35	Dr. informed about care	0.3341
Q29	Dr. showed respect	0.3192
Q10	Got care/tests/treatment	0.3119
Q43	Specialist overall	0.2945

With Specialist Rating

Q9	Health care overall	0.6121
Q35	Dr. informed about care	0.5176
Q10	Got care/tests/treatment	0.4653
Q41	Got specialist appt.	0.4252
Q29	Dr. showed respect	0.4033
Q6	Got routine care	0.3956
Q28	Dr. listened carefully	0.3945
Q27	Dr. explained things	0.3447
Q36	Personal doctor overall	0.2945
Q31	Dr. explained things for child	0.2405



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 your child receives. 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.

Please answer the questions for the child listed on the letter. Please do not answer for any other children.

1. Our records show that your child is now in the HUSKY Health program. Is that right?

Yes → **If Yes, Go to Question 3**
 No

2. What is the name of your child's health plan? (please print)

YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS

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

3. In the last 6 months, did your child 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 your child needed care right away, how often did your child get care as soon as he or she 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 for your child?

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 for your child as soon as your child needed?

Never
 Sometimes
 Usually
 Always

7. In the last 6 months, not counting the times your child went to an emergency room, how many times did he or she get health care in person, by phone, or by video?

None → **If None, Go to Question 11**
 1 time
 2
 3
 4
 5 to 9
 10 or more times



8. In the last 6 months, how often did you have your questions answered by your child's doctors or other health providers?

- Never
- Sometimes
- Usually
- Always

9. 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 child's health care in the last 6 months?

- 0 Worst health care possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best health care possible

10. In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?

- Never
- Sometimes
- Usually
- Always

11. Is your child now enrolled in any kind of school or daycare?

- Yes
- No → *If No, Go to Question 14*

12. In the last 6 months, did you need your child's doctors or other health providers to contact a school or daycare center about your child's health or health care?

- Yes
- No → *If No, Go to Question 14*

13. In the last 6 months, did you get the help you needed from your child's doctors or other health providers in contacting your child's school or daycare?

- Yes
- No

SPECIALIZED SERVICES

14. Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment.

In the last 6 months, did you get or try to get any special medical equipment or devices for your child?

- Yes
- No → *If No, Go to Question 17*

15. In the last 6 months, how often was it easy to get special medical equipment or devices for your child?

- Never
- Sometimes
- Usually
- Always

16. Did anyone from your child's health plan, doctor's office, or clinic help you get special medical equipment or devices for your child?

- Yes
- No

17. In the last 6 months, did you get or try to get special therapy such as physical, occupational, or speech therapy for your child?

- Yes
- No → *If No, Go to Question 20*

18. In the last 6 months, how often was it easy to get this therapy for your child?

- Never
- Sometimes
- Usually
- Always

19. Did anyone from your child's health plan, doctor's office, or clinic help you get this therapy for your child?

- Yes
- No

20. In the last 6 months, did you get or try to get treatment or counseling for your child for an emotional, developmental, or behavioral problem?

- Yes
- No → *If No, Go to Question 23*

21. In the last 6 months, how often was it easy to get this treatment or counseling for your child?

- Never
- Sometimes
- Usually
- Always

22. Did anyone from your child's health plan, doctor's office, or clinic help you get this treatment or counseling for your child?

- Yes
- No

23. In the last 6 months, did your child get care from more than one kind of health care provider or use more than one kind of health care service?

- Yes
- No → *If No, Go to Question 25*

24. In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these different providers or services?

- Yes
- No

YOUR CHILD'S PERSONAL DOCTOR

25. A personal doctor is the one your child would talk to if he or she needs a check-up, has a health problem or gets sick or hurt. Does your child have a personal doctor?

- Yes
- No → *If No, Go to Question 40*

26. In the last 6 months, how many times did your child have an in person, phone, or video visit with his or her personal doctor?

- None → *If None, Go to Question 36*
- 1 time
- 2
- 3
- 4
- 5 to 9
- 10 or more times

27. In the last 6 months, how often did your child's personal doctor explain things about your child's health in a way that was easy to understand?

- Never
- Sometimes
- Usually
- Always

28. In the last 6 months, how often did your child's personal doctor listen carefully to you?

- Never
- Sometimes
- Usually
- Always

29. In the last 6 months, how often did your child's personal doctor show respect for what you had to say?

- Never
- Sometimes
- Usually
- Always

30. Is your child able to talk with doctors about his or her health care?

- Yes
- No → *If No, Go to Question 32*

31. In the last 6 months, how often did your child's personal doctor explain things in a way that was easy for your child to understand?

- Never
- Sometimes
- Usually
- Always

32. In the last 6 months, how often did your child's personal doctor spend enough time with your child?

- Never
- Sometimes
- Usually
- Always

33. In the last 6 months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?

- Yes
- No

34. In the last 6 months, did your child get care from a doctor or other health provider besides his or her personal doctor?

- Yes
 No → *If No, Go to Question 36*

35. In the last 6 months, how often did your child's personal doctor seem informed and up-to-date about the care your child got from these doctors or other health providers?

- Never
 Sometimes
 Usually
 Always

36. 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 child's personal doctor?

- 0 Worst personal doctor possible
 1
 2
 3
 4
 5
 6
 7
 8
 9
 10 Best personal doctor possible

37. Does your child have any medical, behavioral, or other health conditions that have lasted for more than 3 months?

- Yes
 No → *If No, Go to Question 40*

38. Does your child's personal doctor understand how these medical, behavioral, or other health conditions affect your child's day-to-day life?

- Yes
 No

39. Does your child's personal doctor understand how your child's medical, behavioral, or other health conditions affect your family's day-to-day life?

- Yes
 No

GETTING HEALTH CARE FROM SPECIALISTS

When you answer the next questions, include the care your child got in person, by phone, or by video. Do not include dental visits or care your child got when he or she stayed overnight in a hospital.

40. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. In the last 6 months, did you make any appointments for your child with a specialist?

- Yes
 No → *If No, Go to Question 44*

41. In the last 6 months, how often did you get appointments for your child with a specialist as soon as he or she needed?

- Never
 Sometimes
 Usually
 Always

42. How many specialists has your child talked to in the last 6 months?

- None → *If None, Go to Question 44*
 1 specialist
 2
 3
 4
 5 or more specialists

43. We want to know your rating of the specialist your child 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?

- 0 Worst specialist possible
 1
 2
 3
 4
 5
 6
 7
 8
 9
 10 Best specialist possible

YOUR CHILD'S HEALTH PLAN

The next questions ask about your experience with your child's health plan.

44. In the last 6 months, did you get information or help from customer service at your child's health plan?

- Yes
 No → *If No, Go to Question 47*

45. In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed?

- Never
 Sometimes
 Usually
 Always

46. In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect?

- Never
 Sometimes
 Usually
 Always

47. In the last 6 months, did your child's health plan give you any forms to fill out?

- Yes
 No → *If No, Go to Question 49*

48. In the last 6 months, how often were the forms from your child's health plan easy to fill out?

- Never
 Sometimes
 Usually
 Always

49. 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 child's health plan?

- 0 Worst health plan possible
 1
 2
 3
 4
 5
 6
 7
 8
 9
 10 Best health plan possible

PRESCRIPTION MEDICINES

50. In the last 6 months, did you get or refill any prescription medicines for your child?

- Yes
 No → *If No, Go to Question 53*

51. In the last 6 months, how often was it easy to get prescription medicines for your child through his or her health plan?

- Never
 Sometimes
 Usually
 Always

52. Did anyone from your child's health plan, doctor's office, or clinic help you get your child's prescription medicines?

- Yes
 No

ABOUT YOUR CHILD AND YOU

53. In general, how would you rate your child's overall health?

- Excellent
 Very Good
 Good
 Fair
 Poor

54. In general, how would you rate your child's overall mental or emotional health?

- Excellent
 Very Good
 Good
 Fair
 Poor

55. Does your child currently need or use medicine prescribed by a doctor (other than vitamins)?

- Yes
 No → *If No, Go to Question 58*

56. Is this because of any medical, behavioral, or other health condition?

- Yes
 No → *If No, Go to Question 58*

57. Is this a condition that has lasted or is expected to last for at least 12 months?

- Yes
 No

58. Does your child need or use more medical care, more mental health services, or more educational services than is usual for most children of the same age?

Yes

No → *If No, Go to Question 61*

59. Is this because of any medical, behavioral, or other health condition?

Yes

No → *If No, Go to Question 61*

60. Is this a condition that has lasted or is expected to last for at least 12 months?

Yes

No

61. Is your child limited or prevented in any way in his or her ability to do the things most children of the same age can do?

Yes

No → *If No, Go to Question 64*

62. Is this because of any medical, behavioral, or other health condition?

Yes

No → *If No, Go to Question 64*

63. Is this a condition that has lasted or is expected to last for at least 12 months?

Yes

No

64. Does your child need or get special therapy such as physical, occupational, or speech therapy?

Yes

No → *If No, Go to Question 67*

65. Is this because of any medical, behavioral, or other health condition?

Yes

No → *If No, Go to Question 67*

66. Is this a condition that has lasted or is expected to last for at least 12 months?

Yes

No

67. Does your child have any kind of emotional, developmental, or behavioral problem for which he or she needs or gets treatment or counseling?

Yes

No → *If No, Go to Question 69*

68. Has this problem lasted or is it expected to last for at least 12 months?

Yes

No

69. What is your child's age?

Less than 1 year old

_____ YEARS OLD (*write in*)

70. Is your child male or female?

Male

Female

71. Is your child of Hispanic or Latino origin or descent?

Yes, Hispanic or Latino

No, not Hispanic or Latino

72. What is your child's race? *Mark one or more.*

White

Black or African-American

Asian

Native Hawaiian or other Pacific Islander

American Indian or Alaska Native

Other

73. What is your age?

Under 18

18 to 24

25 to 34

35 to 44

45 to 54

55 to 64

65 to 74

75 or older

74. Are you male or female?

Male

Female

75. What is the highest grade or level of school that you have completed?

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

76. How are you related to the child?

- Mother or father
- Grandparent
- Aunt or uncle
- Older brother or sister
- Other relative
- Legal guardian
- Someone else

ADDITIONAL QUESTIONS

Now we would like to ask a few more questions about the services your child's health plan provides.

77. If your child had difficulty seeing a specialist, which specialists were a problem for your child? (Please select all that apply)

- OB/Gynecology
- Cardiology
- Neurology
- Dermatology
- Orthopedics
- Ophthalmology
- Gastrointestinal
- Ear, Nose and Throat
- Behavioral Health
- Other (Please Specify):

-
- My child did not have any difficulty seeing a specialist
 - My child did not see a specialist
-

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



DISCOVER

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



PREDICT

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



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.



**Community Health Network of Connecticut, Inc.®
2022 HUSKY Health Mystery Shopper Survey Analysis**

Survey Description

On an annual basis, Community Health Network of Connecticut, Inc.® (CHNCT) conducts a Mystery Shopper survey to evaluate the ability of HUSKY Health members to obtain medical appointments and determine whether being covered by HUSKY Health influences the availability of those appointments amongst providers with open panels. In 2022, the survey also evaluated whether having an ethnic sounding first name, and if identifying as LGBTQ+, has an adverse effect on appointment availability. The 2022 survey targeted specific open panel provider practice types, which included adult primary care providers (PCP), pediatricians, family practitioners, OB/GYNs, cardiologists, and neurologists.

To understand if perceived ethnicity or identifying as a member of the LGBTQ+ community has an effect on the availability of those appointments, the sample size of completed surveys was increased from 541 in 2021, to 1,082 in 2022. Each provider office surveyed was called twice; once with researchers using an ethnic sounding name to make an appointment, and a second time using a non-ethnic sounding name. In addition, 20% of the appointment calls using a non-ethnic sounding name were conducted by a researcher who also identified as a member of the LGBTQ+ community.

As a result of the increased sample size, inclusion of ethnic and non-ethnic sounding name calls, as well as LGBTQ+ identification, the 2022 study is viewed as a reset and a new baseline and benchmark for the Mystery Shopper survey.

2022 Mystery Shopper Survey Results

	2022	
	# of Responses	Percent
Providers accepting new patients:		
Overall	626 (of 1,082)	57.9%
Adult PCP	339 (of 518)	65.4%
Pediatrician	123 (of 192)	64.1%
OB/GYN	89 (of 206)	43.2%
Cardiology	65 (of 126)	51.6%
Neurology	10 (of 40)	25.0%
Providers accepting HUSKY:		
Overall	590 (of 626)	94.2%
Adult PCP	329 (of 339)	97.1%
Pediatrician	114 (of 123)	92.7%
OB/GYN	81 (of 89)	91.0%
Cardiology	56 (of 65)	86.2%
Neurology	10 (of 10)	100.0%
Overall rate of appointment offers to HUSKY members:		
Overall	590 (of 1,082)	54.5%
Adult PCP	329 (of 518)	63.5%
Pediatrician	114 (of 192)	59.4%
OB/GYN	81 (of 206)	39.3%
Cardiology	56 (of 126)	44.4%
Neurology	10 (of 40)	25.0%

**Community Health Network of Connecticut, Inc.®
2022 HUSKY Health Mystery Shopper Survey Analysis**

Appointment Availability Timeliness Results

CHNCT also reviewed appointment availability timeliness. Although the report shows that providers have appointments available twelve or more weeks out, CHNCT analyzed appointments available within four weeks, shown in the table below.

Provider Type	% of Appointments Available within Four Weeks - 2022
Adult PCP	29.0%
Pediatrician	23.7%
OB/GYN	48.1%
Cardiology	52.0%
Neurology	66.7%

When analyzing appointment availability timeliness beyond four weeks, CHNCT observed that more callers with an ethnic sounding name were given a routine appointment at twelve or more weeks from both Adult PCPs and pediatricians. Overall, fifty-three (53) appointments were scheduled at twelve more weeks for callers with an ethnic sounding name versus thirty-one (31) appointments for callers with a non-ethnic sounding name.

Ethnic vs. Non-Ethnic Sounding Name Analysis

In 2022, CHNCT and the Department of Social Services (DSS) agreed to continue the use of ethnic vs. non-ethnic sounding names (that began with the 2021 survey), to evaluate whether a HUSKY Health member’s name alone would have an adverse effect on appointment availability and timeliness. In 2021, the survey vendor was asked to use a combination of 50% ethnic and 50% non-ethnic sounding names when calling providers for appointments. In 2022, each provider office surveyed was called twice; once with researchers using an ethnic name to make an appointment, and a second time using a non-ethnic name. CHNCT and DSS provided the names to the survey vendor. Key overall findings are shown in the table below.

	2022			2022 – Ethnic Name			2022 – Non-Ethnic Name		
	# of resp. Yes	Total N	%	# of resp. Yes	Total N	%	# of resp. Yes	Total N	%
Providers Accepting New Patients									
Overall	626	1,082	57.9%	334	541	61.7%	292	541	54.0%
Adult PCP	339	518	65.4%	179	259	69.1%	160	259	61.8%
Pediatrician	123	192	64.1%	65	96	67.7%	58	96	60.4%
OB/GYN	89	206	43.2%	47	103	45.6%	42	103	40.8%
Cardiology	65	126	51.6%	38	63	60.3%	27	63	42.9%
Neurology	10	40	25.0%	5	20	25.0%	5	20	25.0%

**Community Health Network of Connecticut, Inc.®
2022 HUSKY Health Mystery Shopper Survey Analysis**

	2022			2022 – Ethnic Name			2022 – Non-Ethnic Name		
	# of resp. Yes	Total N	%	# of resp. Yes	Total N	%	# of resp. Yes	Total N	%
Providers Accepting HUSKY									
Overall	590	626	94.2%	318	334	95.2%	272	292	93.2%
Adult PCP	329	339	97.1%	175	179	97.8%	154	160	96.3%
Pediatrician	114	123	92.7%	61	65	93.8%	53	58	91.4%
OB/GYN	81	89	91.0%	42	47	89.4%	39	42	92.9%
Cardiology	56	65	86.2%	35	38	92.1%	21	27	77.8%
Neurology	10	10	100.0%	5	5	100.0%	5	5	100.0%

	2022			2022 – Ethnic Name			2022 – Non-Ethnic Name		
	# of resp. Yes/Not w/o ref.	Total N	%	# of resp. Yes/Not w/o ref.	Total N	%	# of resp. Yes/Not w/o ref.	Total N	%
Overall Rate of Appointment Offers									
Overall	590	1,082	54.5%	318	541	58.8%	272	541	50.3%
Adult PCP	329	518	63.5%	175	259	67.6%	154	259	59.5%
Pediatrician	114	192	59.4%	61	96	63.5%	53	96	55.2%
OB/GYN	81	206	39.3%	42	103	40.8%	39	103	37.9%
Cardiology	56	126	44.4%	35	63	55.6%	21	63	33.3%
Neurology	10	40	25.0%	5	20	25.0%	5	20	25.0%

Overall, the callers with ethnic sounding names were more likely to receive an appointment over callers with non-ethnic sounding names. In 2021, callers with non-ethnic sounding names were more likely to get an appointment over callers with ethnic sounding names. While the use of ethnic sounding names is not new to the Mystery Shopper survey in 2022, there are no trend comparison data or statistical significance calculations due to the change in methodology and agreement that the 2022 survey will act as a baseline for future surveys.

LGBTQ+ Analysis

The 2022 Mystery Shopper survey also evaluated whether identifying as a member of the LGBTQ+ community would have an effect on appointment availability. Twenty (20) percent of non-ethnic sounding name appointment calls were conducted by a researcher identifying as a member of the LGBTQ+ community. Key overall findings are shown in the table below.

	2022			2022 – LGBTQ+			2022 – No LGBTQ+		
	# of resp. Yes	Total N	%	# of resp. Yes	Total N	%	# of resp. Yes	Total N	%
Providers Accepting New Patients									
Overall	626	1,082	57.9%	64	109	58.7%	562	973	57.8%
Adult PCP	339	518	65.4%	35	51	68.6%	304	467	65.1%
Pediatrician	123	192	64.1%	13	19	68.4%	110	173	63.6%
OB/GYN	89	206	43.2%	7	22	31.8%	82	184	44.6%
Cardiology	65	126	51.6%	8	13	61.5%	57	113	50.4%
Neurology	10	40	25.0%	1	4	25.0%	9	36	25.0%

**Community Health Network of Connecticut, Inc.®
2022 HUSKY Health Mystery Shopper Survey Analysis**

	2022			2022 – LGBTQ+			2022 – No LGBTQ+		
	# of resp. Yes	Total N	%	# of resp. Yes	Total N	%	# of resp. Yes	Total N	%
Providers Accepting HUSKY									
Overall	590	626	94.2%	59	64	92.2%	531	562	94.5%
Adult PCP	329	339	97.1%	32	35	91.4%	297	304	97.7%
Pediatrician	114	123	92.7%	12	13	92.3%	102	110	92.7%
OB/GYN	81	89	91.0%	7	7	100.0%	74	82	90.2%
Cardiology	56	65	86.2%	7	8	87.5%	49	57	86.0%
Neurology	10	10	100.0%	1	1	100.0%	9	9	100.0%

	2022			2022 – LGBTQ+			2022 – No LGBTQ+		
	# of resp. Yes/Not w/o ref.	Total N	%	# of resp. Yes/Not w/o ref.	Total N	%	# of resp. Yes/Not w/o ref.	Total N	%
Overall Rate of Appointment Offers									
Overall	590	1,082	54.5%	59	109	54.1%	531	973	54.6%
Adult PCP	329	518	63.5%	32	51	62.7%	297	467	63.6%
Pediatrician	114	192	59.4%	12	19	63.2%	102	173	59.0%
OB/GYN	81	206	39.3%	7	22	31.8%	74	184	40.2%
Cardiology	56	126	44.4%	7	13	53.8%	49	113	43.4%
Neurology	10	40	25.0%	1	4	25.0%	9	36	25.0%

Since the inclusion of LGBTQ+ self-identification is new in 2022, there are no trend comparison data or statistical significance calculations. Results will be compared to the 2023 Mystery Shopper survey conducted in quarters three and four of 2023.

Corrective Action Plan

The 2022 Mystery Shopper survey provided some key action items that require Provider Engagement Services (PES) and Person-Centered Medical Home (PCMH) staff follow-up in 2023.

- PES and PCMH teams will contact all adult PCP and pediatric providers regarding the timeliness of appointments, although there are no standards included in the provider’s contract with DSS.
- Based on provider feedback, increased membership and missed appointments continue to challenge providers and impact their availability to see new HUSKY Health members. The HUSKY Health program continues to cover over one million members since 2021.
- PES will continue to recruit new key specialty and primary care providers and monitor network adequacy via Geo Access reporting, Mystery Shopper, and Provider Satisfaction survey results.
- For the providers who indicated they were not a PCP, PES will re-confirm the correct provider specialty and advise the provider to update their specialty with DSS’ enrollment broker to ensure the integrity of the directory data.
- PES will track, report, and document all provider outreach efforts. A provider can work at many locations and practices; a provider may be a PCP at their community practice, but not at other practices. Although PES routinely confirms provider status throughout the year, we acknowledge this status is fluid and may change at any time. For those providers who indicated they have a different panel status (open/limited/closed) than what was identified on CHNCT’s file, PES will contact them to confirm their latest status and update CHNCT’s provider tracking database accordingly.

Community Health Network of Connecticut, Inc.®
2022 HUSKY Health Mystery Shopper Survey Analysis

- PES and PCMH will continue to educate providers and their staff on resources available on the HUSKY Health provider website addressing health equity, including Cook Ross' CultureVision™, in the secure provider portal. CultureVision™ is a comprehensive, user-friendly database that gives healthcare professionals access to culturally competent patient care.
 - In 2022, an article addressing available health equity resources and CultureVision™ was included in the CMO Corner of the provider newsletter.
- PES will work with the CHNCT Health Equity Team to develop additional educational tools for providers and their staff on communication and building patient-provider trust to help members navigate the health care system.
- In 2023, providers will be able to access a Provider Directory Status smart/express request form through HUSKY Health's secure provider portal to independently maintain and update how they appear in the HUSKY Health directory for members and other providers. When using the form, providers will be able to indicate:
 - Whether they are accepting new patients
 - Race/Ethnicity
 - Telehealth Services offered
 - LGBTQ+ friendly practice



2022 PCMH+ PCPCM Survey
Person-Centered Primary Care Measure
Composite Findings



Report of Findings

30 December 2022

Project Overview

- The State of Connecticut Department of Social Services (The Department) commissioned GreatBlue Research to conduct the 2022 PCMH+ Person-Centered Primary Care Measure (PCPCM) Survey with Provider Services utilizing telephonic and digital survey methodologies from September 26, 2022 to December 8, 2022. The sample universe consisted of adults and children enrolled in the HUSKY Health Program who were contacted in efforts to complete 5,850 surveys.
- The 2022 PCMH+ PCPCM Member Survey with Provider Services included the following areas of investigation:
 - PCMH+ Member satisfaction with Primary Care experience
 - Health care over the last 12 months
 - Member demographic information
- The primary goals of the research were to build an understanding of member opinions and perceptions as they pertain to care received from their Primary Care Provider, and enable Community Health Network of CT, Inc. (“CHNCT”) to identify near-term opportunities for improvement of Member Satisfaction with Provider Services.
- GreatBlue Research utilized the Person-Centered Primary Care Measure, or PCPCM, developed by the Larry A. Green Center, in order to achieve these goals. The PCPCM is a survey of primary care quality that focuses on the patient’s access to care, relationship with the physician, and ability to reach health outcome goals.
- Upon receipt of the survey instrument and a random sample list of members, GreatBlue call center and senior staff completed all remaining facets of the 2022 PCMH+ PCPCM Member Satisfaction Survey with Provider Services. These tasks included the following: survey programming, researcher training, survey pre-testing, full-scale fielding (telephone calls and digital collection), coding, data entry, editing, validation, verification, computer analysis, analysis and report writing.

Sample Breakdown - Adult

PCMH TIN Name	2022 Completed Surveys
Hartford HealthCare Medical Group	457
Community Health Center	400
Cornell Scott-Hill Health Center	400
Charter Oak	200
First Choice Community Health Centers	200
Generations Family Health Center	200
Optimus Health Care	200
Southwest Community Health Center	200
United Community and Family Services	117
Fair Haven Community Health Clinic	100
Wheeler Clinic	100
CCMC Advanced Network	75
Control Group	200

Research Methodology Snapshot - Adult

Methodology Telephone / Digital	No. of Completes 2,649	No. of Questions 20*	Incentive None	Sample Provided by CHNCT
Target HUSKY Members	Quality Assurance Dual-level**	Margin of Error 1.8%	Confidence Level 95%	Research Dates Sept 26 - Dec 8, 2022

* This represents the total possible number of questions; not all respondents will answer all questions based on skip patterns and other instrument bias.

** Supervisory personnel, in addition to computer-aided interviewing platform, ensure the integrity of the data is accurate.

Research Methodology Snapshot - Adult Control Group

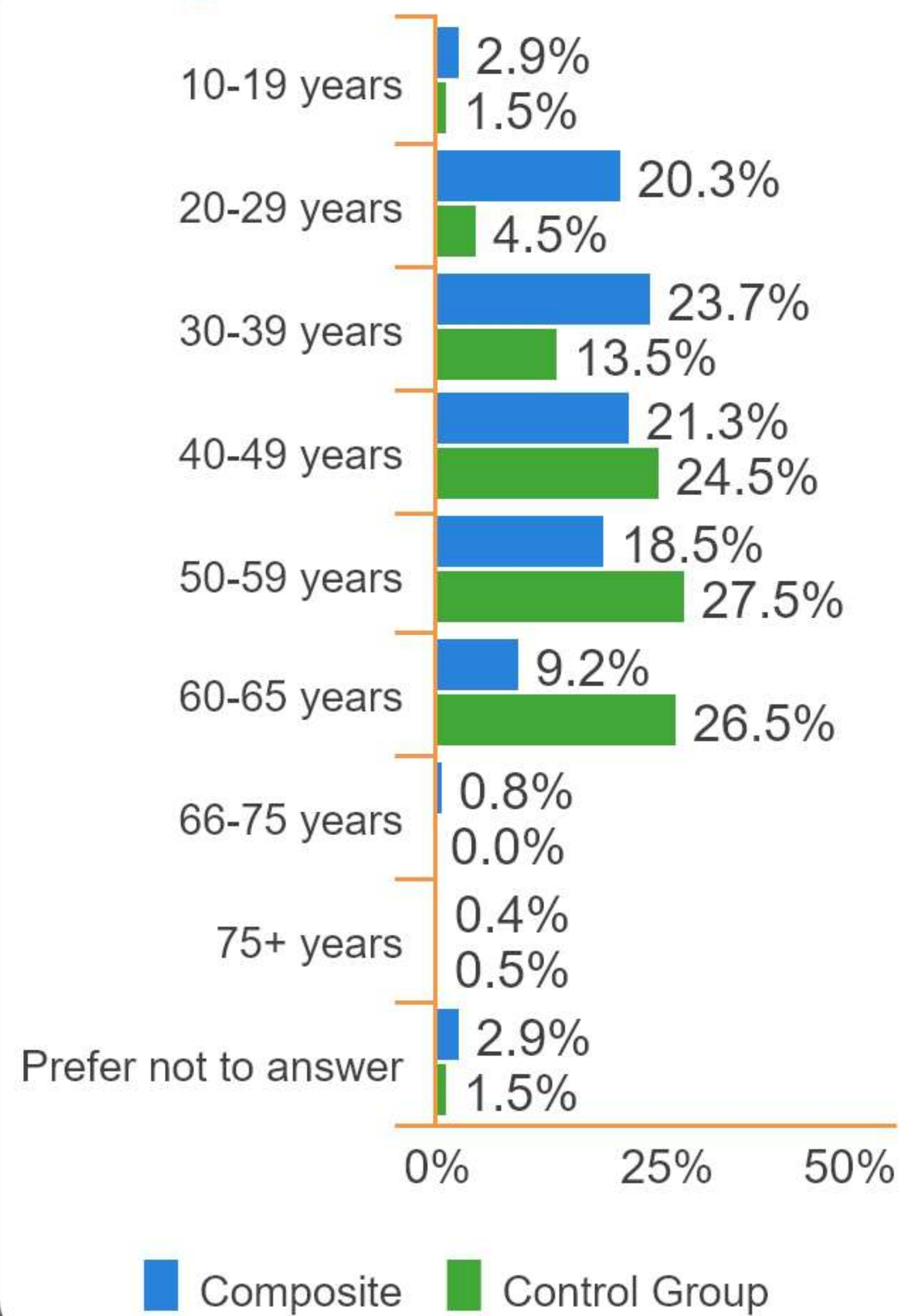
Methodology Telephone / Digital	No. of Completes 200	No. of Questions 20*	Incentive None	Sample Provided by CHNCT
Target HUSKY Members	Quality Assurance Dual-level**	Margin of Error 6.8%	Confidence Level 95%	Research Dates Sept 26 - Dec 8, 2022

* This represents the total possible number of questions; not all respondents will answer all questions based on skip patterns and other instrument bias.

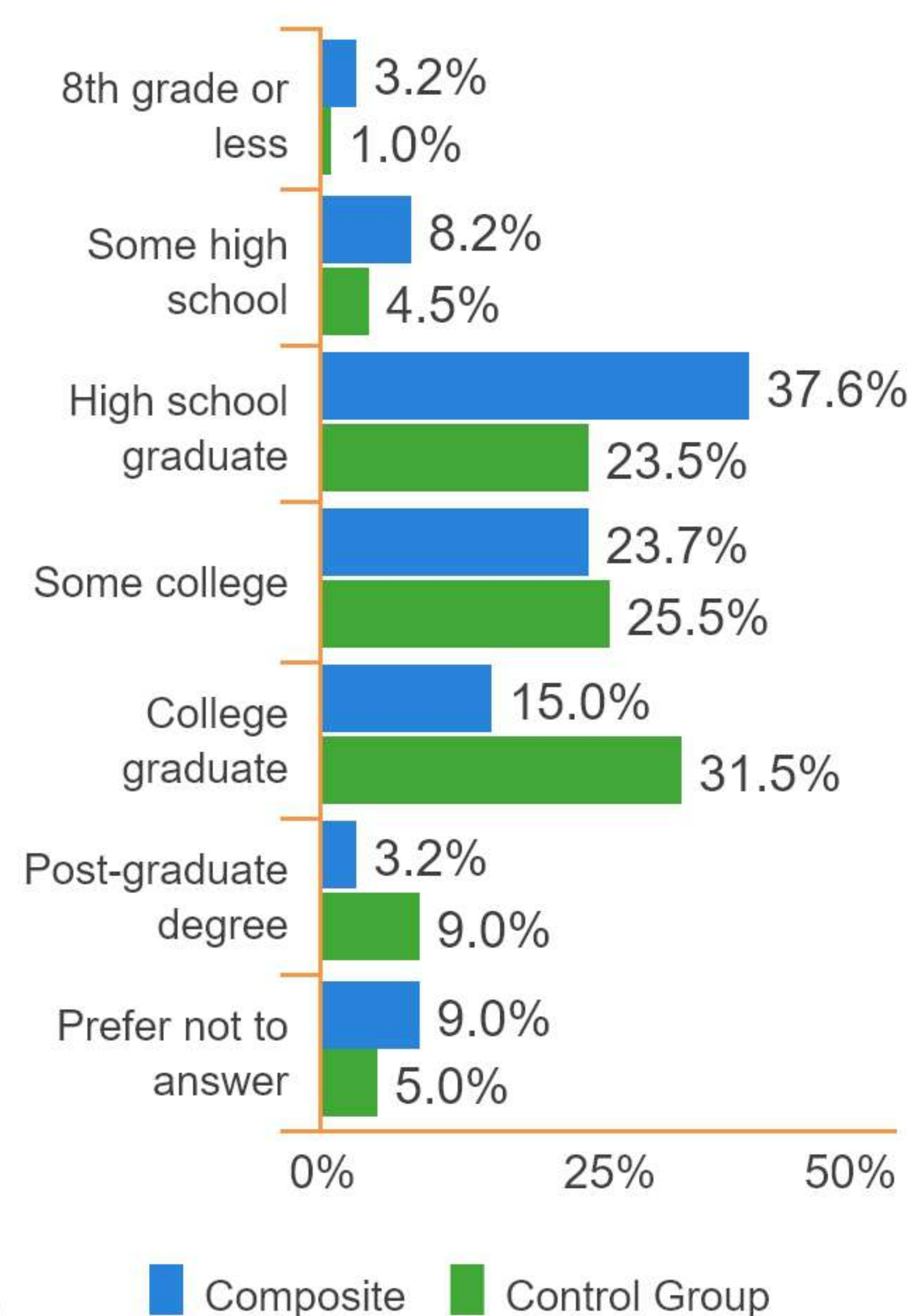
** Supervisory personnel, in addition to computer-aided interviewing platform, ensure the integrity of the data is accurate.

Respondent Demographics - Adult

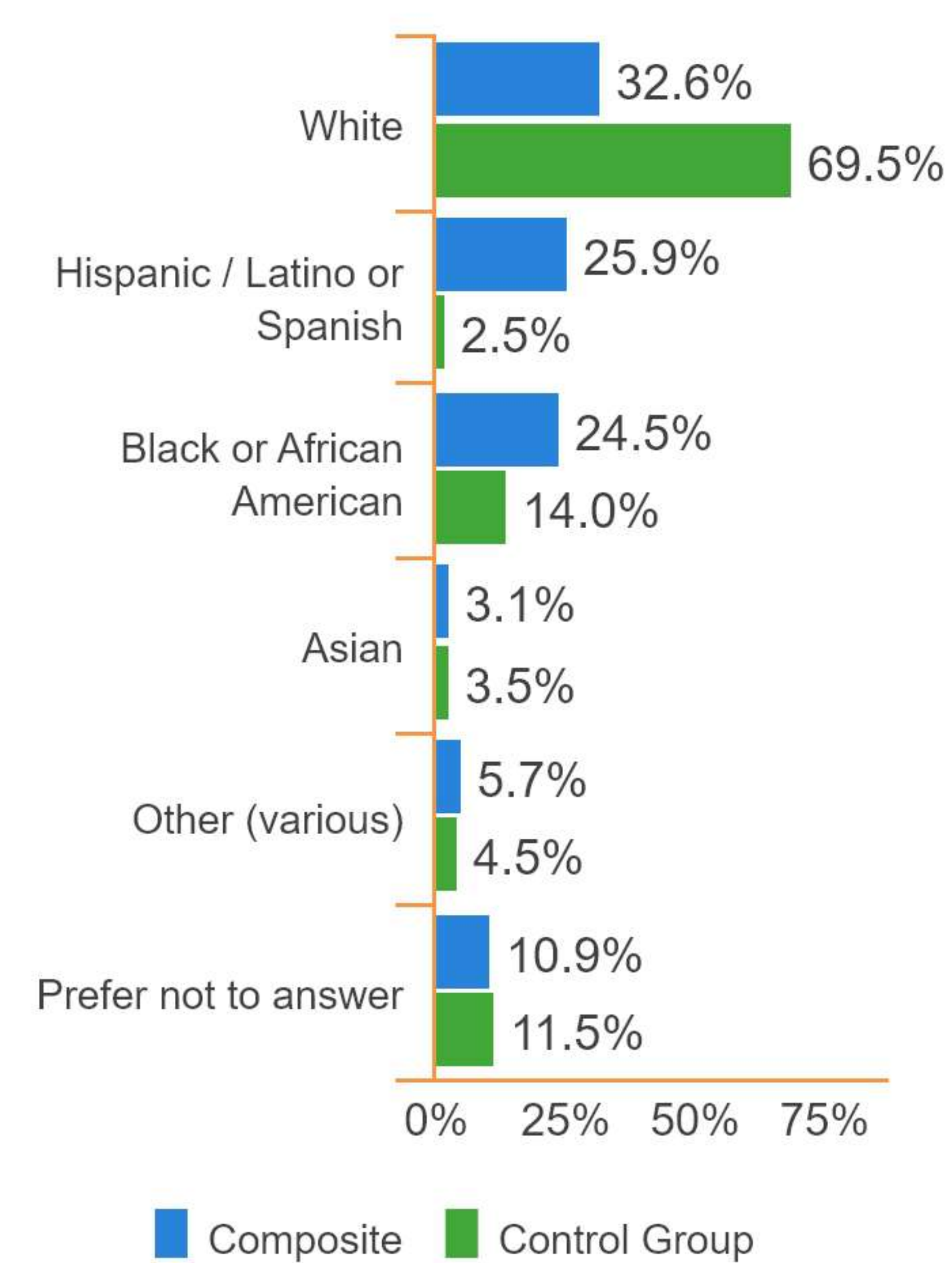
Age



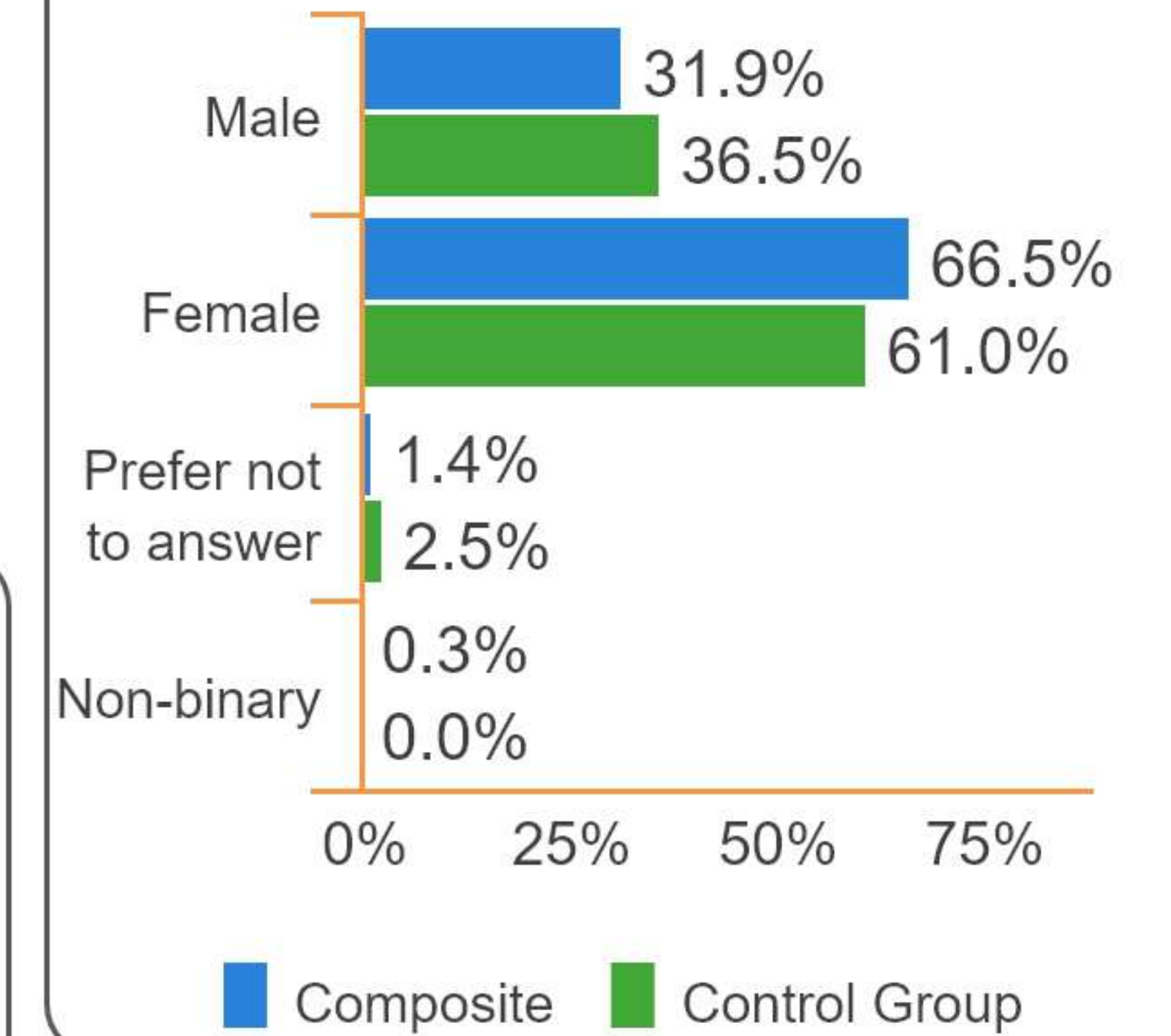
Education



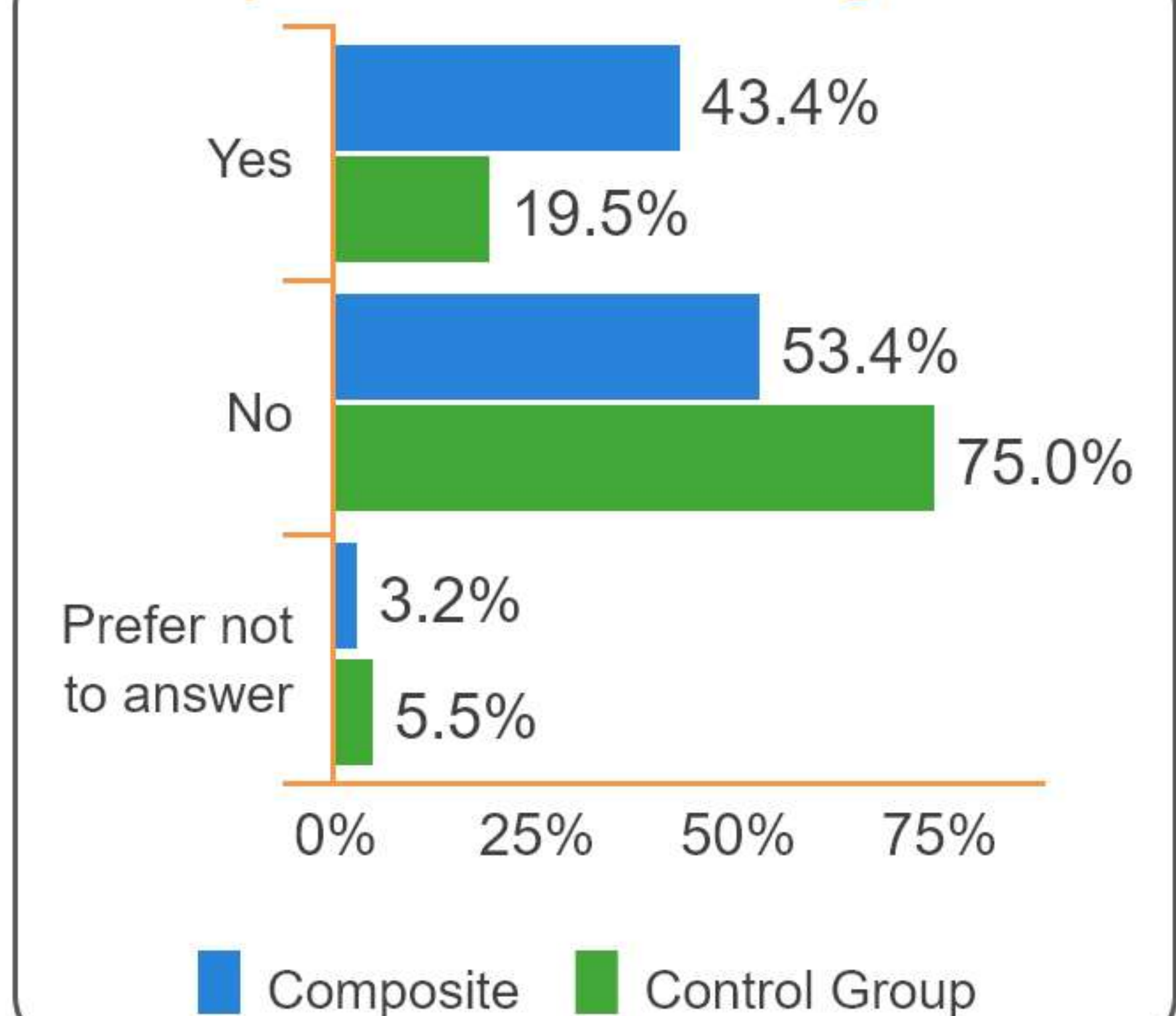
Ethnicity (Select all that apply)



Gender

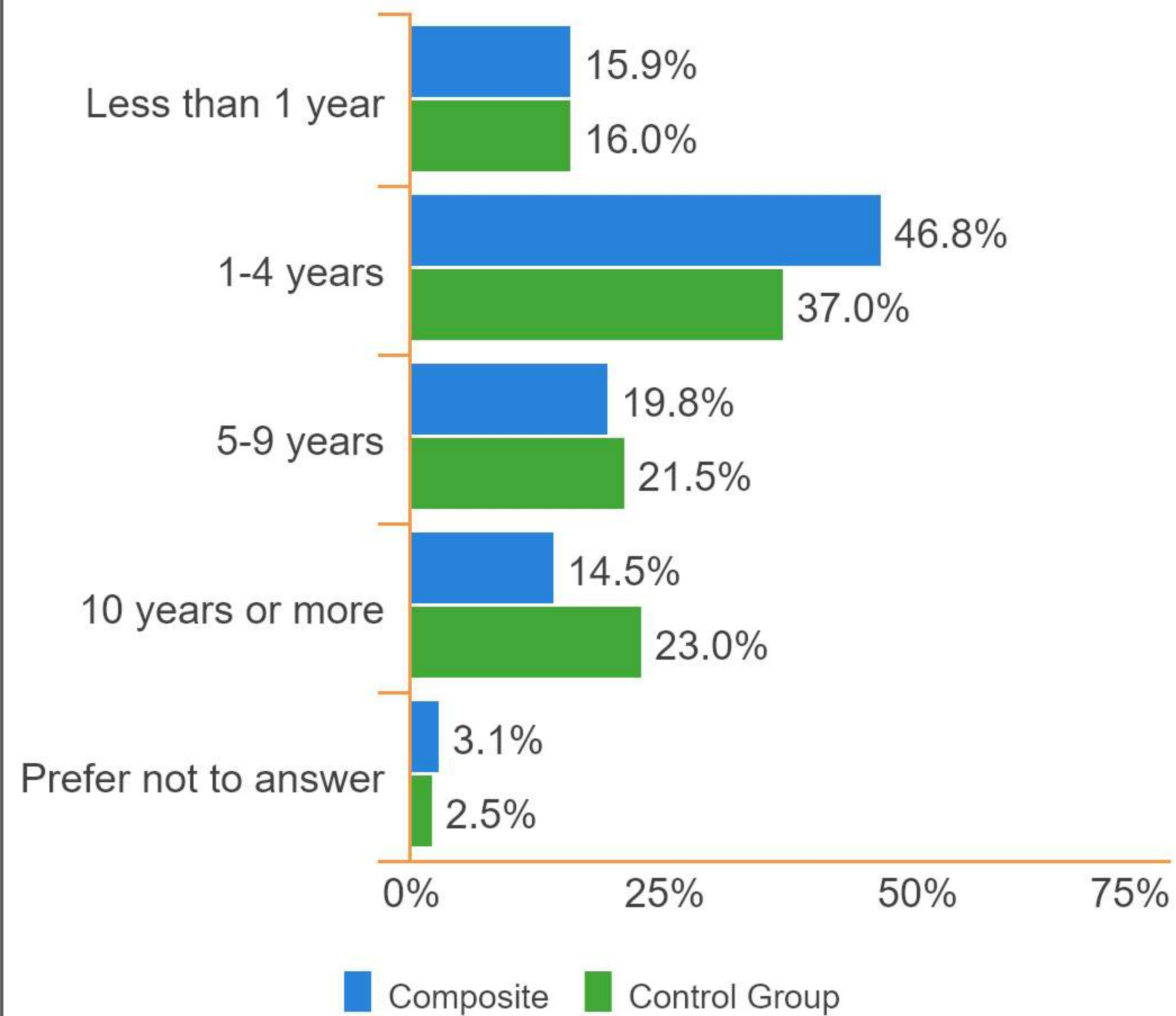


Hispanic/Latino Origin

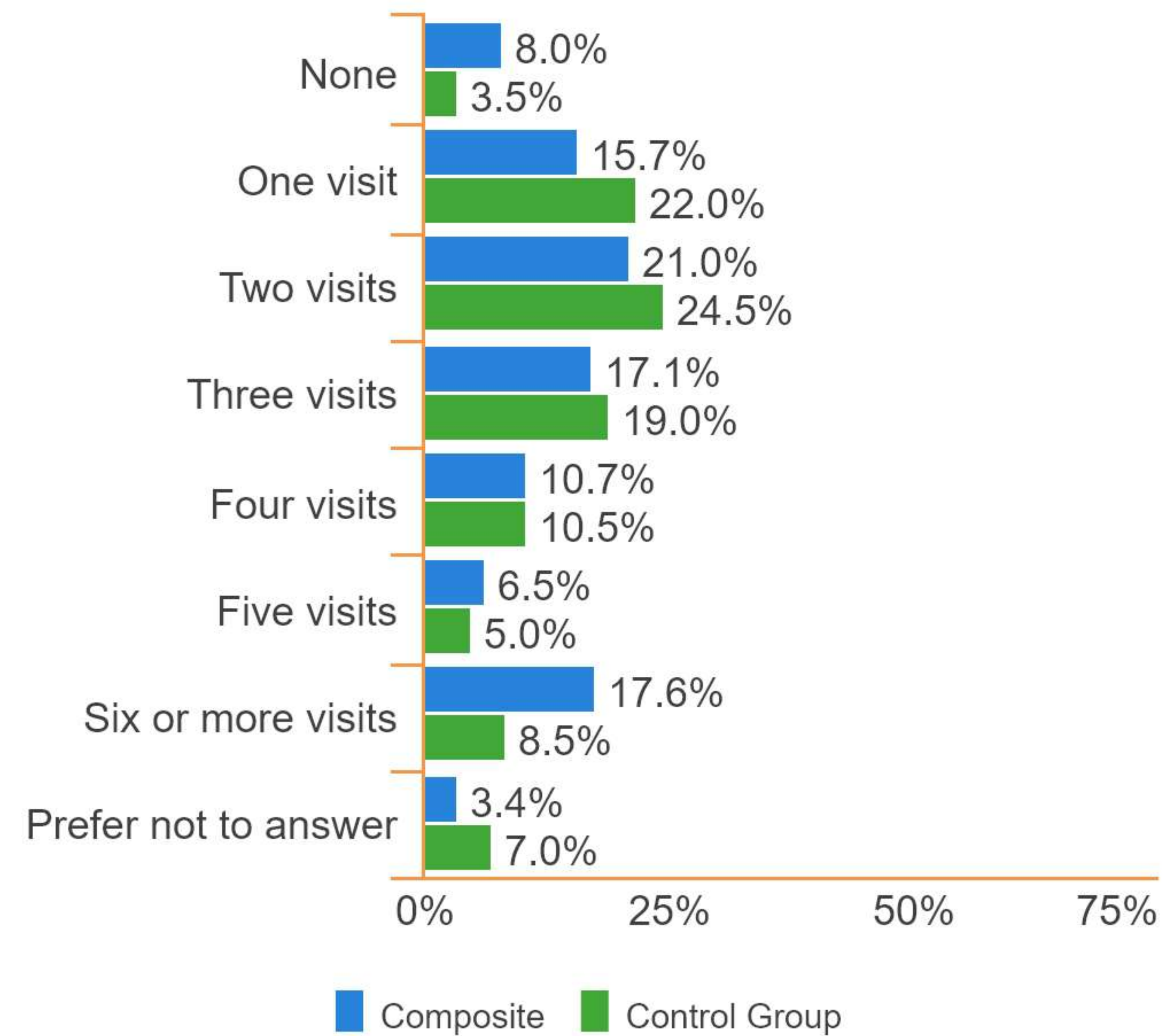


Respondent Demographics - Adult

Length of Time with Current Doctor



Number of Doctor Visits in Past Year



Sample Breakdown - Child

PCMH TIN Name	2022 Completed Surveys
CCMC Advanced Network	400
Community Health Center	400
Fair Haven Community Health Clinic	400
Optimus Health Care	400
Cornell Scott-Hill Health Center	200
First Choice Community Health Centers	200
Southwest Community Health Center	200
United Community and Family Services	183
Hartford HealthCare Medical Group	143
Charter Oak	100
Generations Family Health Center	100
Wheeler Clinic	75
Control Group	200

Research Methodology Snapshot - Child

Methodology Telephone / Digital	No. of Completes 2,801	No. of Questions 20*	Incentive None	Sample Provided by CHNCT
Target HUSKY Members	Quality Assurance Dual-level**	Margin of Error 1.8%	Confidence Level 95%	Research Dates Sept 26 - Dec 8, 2022

* This represents the total possible number of questions; not all respondents will answer all questions based on skip patterns and other instrument bias.

** Supervisory personnel, in addition to computer-aided interviewing platform, ensure the integrity of the data is accurate.

Research Methodology Snapshot - Child Control Group

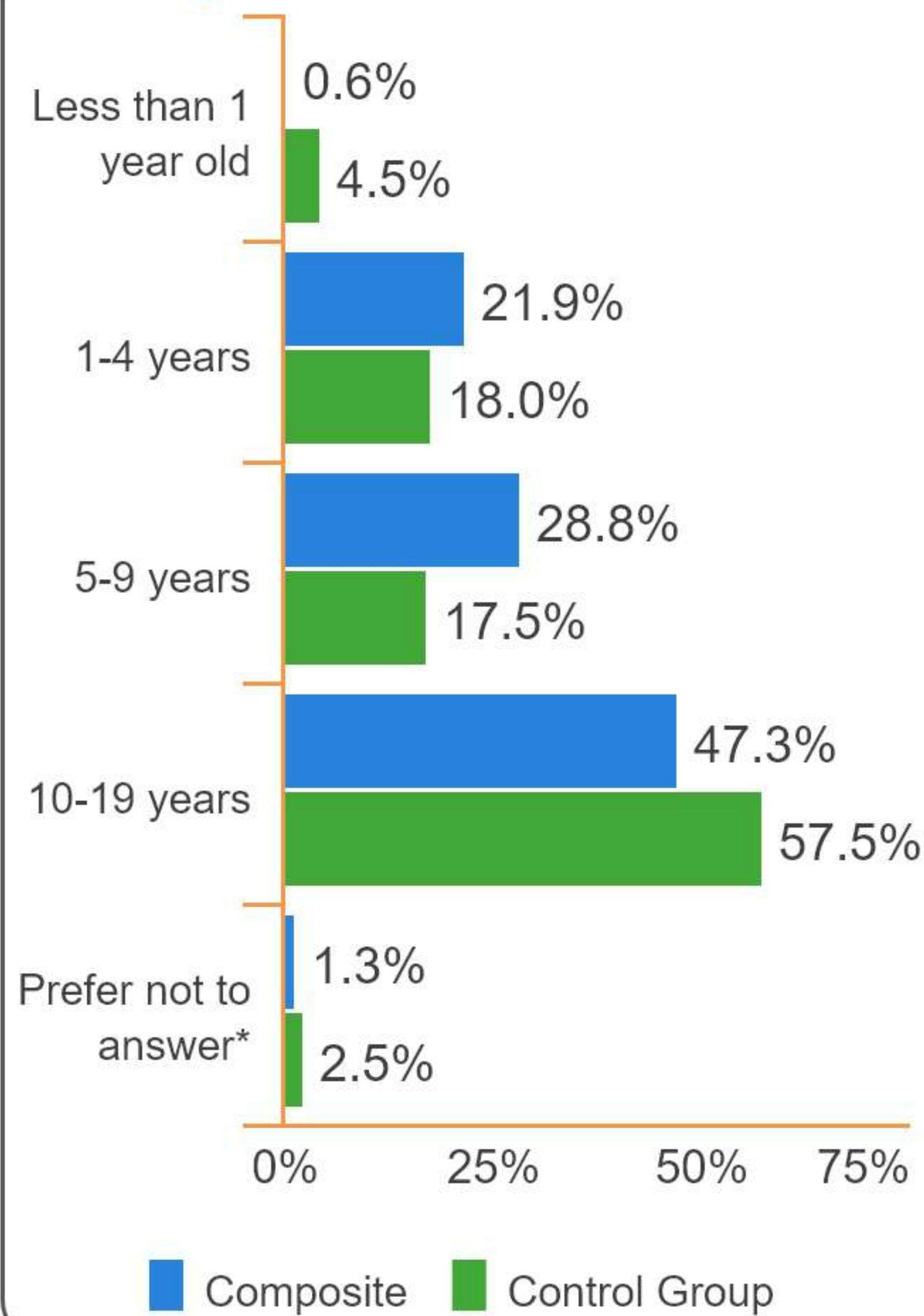
Methodology Telephone / Digital	No. of Completes 200	No. of Questions 20*	Incentive None	Sample Provided by CHNCT
Target HUSKY Members	Quality Assurance Dual-level**	Margin of Error 6.8%	Confidence Level 95%	Research Dates Sept 26 - Dec 8, 2022

* This represents the total possible number of questions; not all respondents will answer all questions based on skip patterns and other instrument bias.

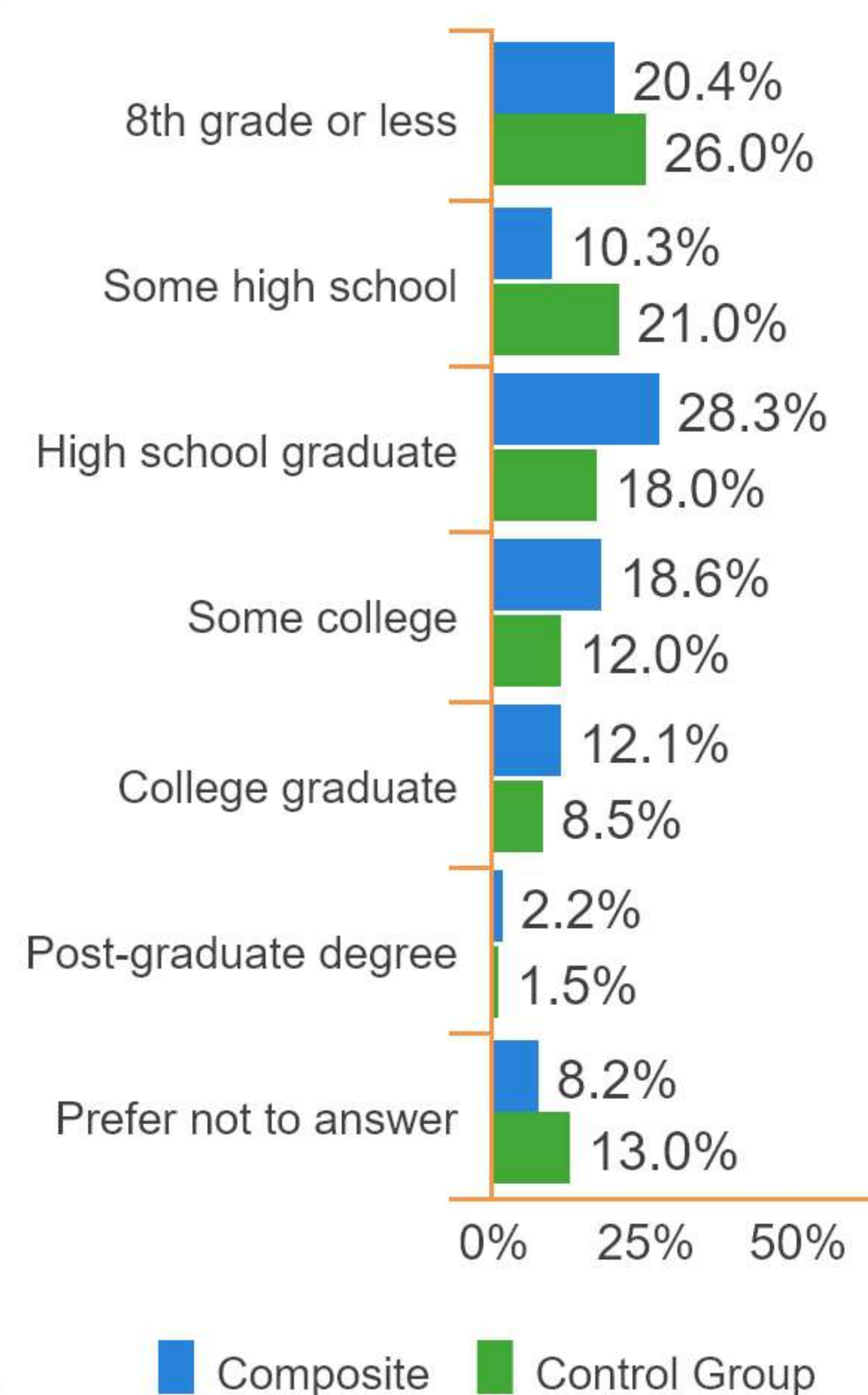
** Supervisory personnel, in addition to computer-aided interviewing platform, ensure the integrity of the data is accurate.

Respondent Demographics - Child

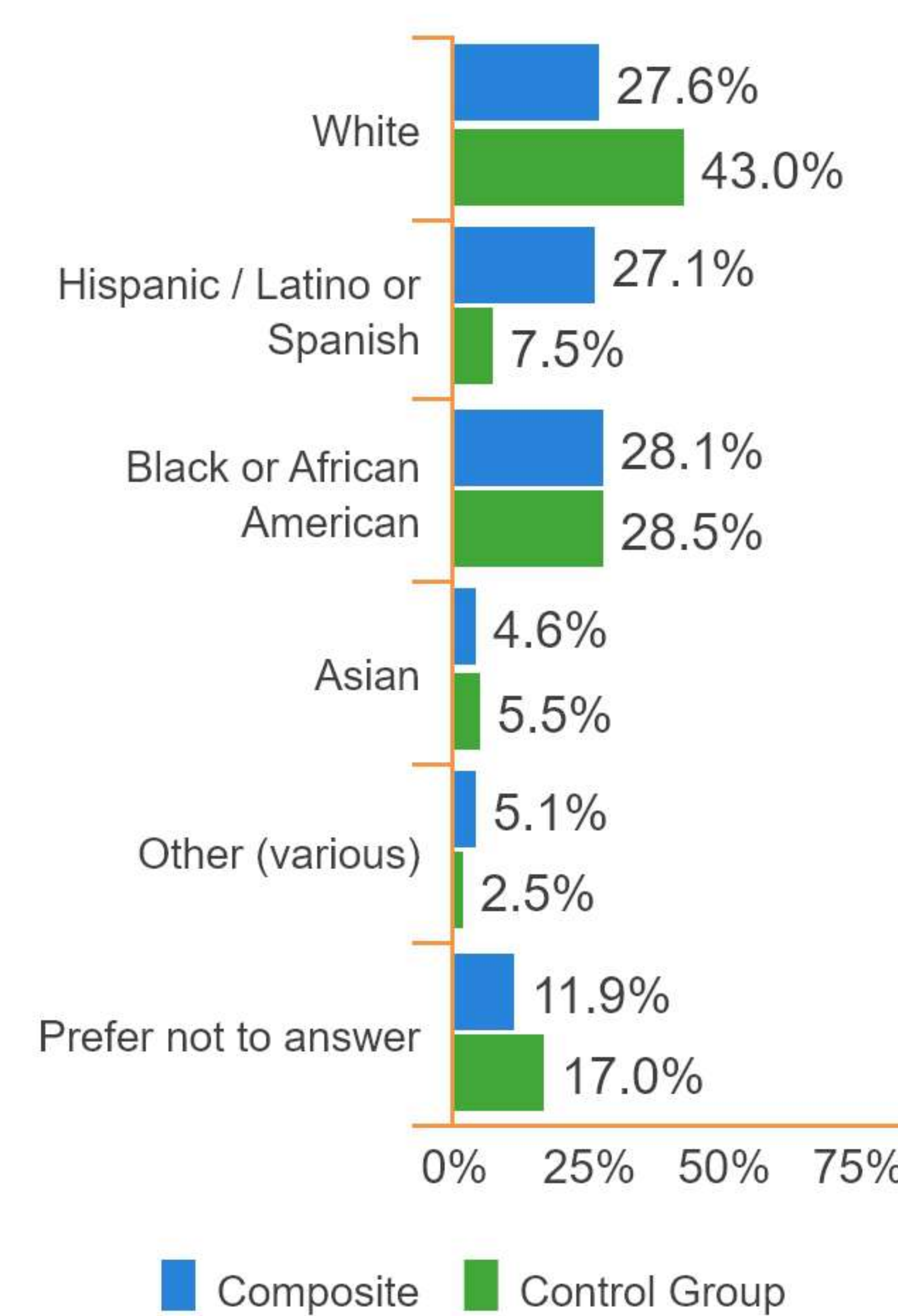
Age



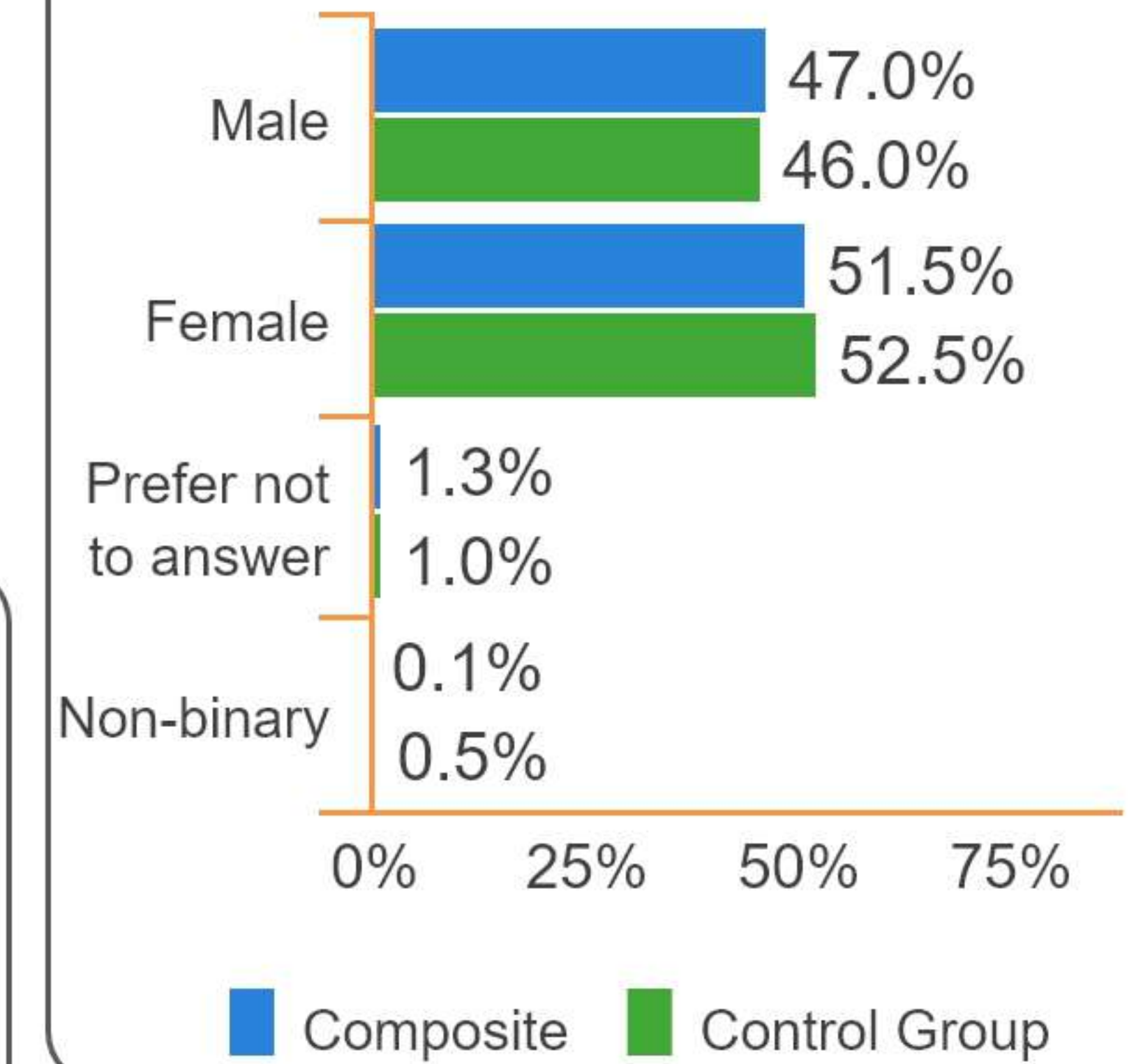
Education



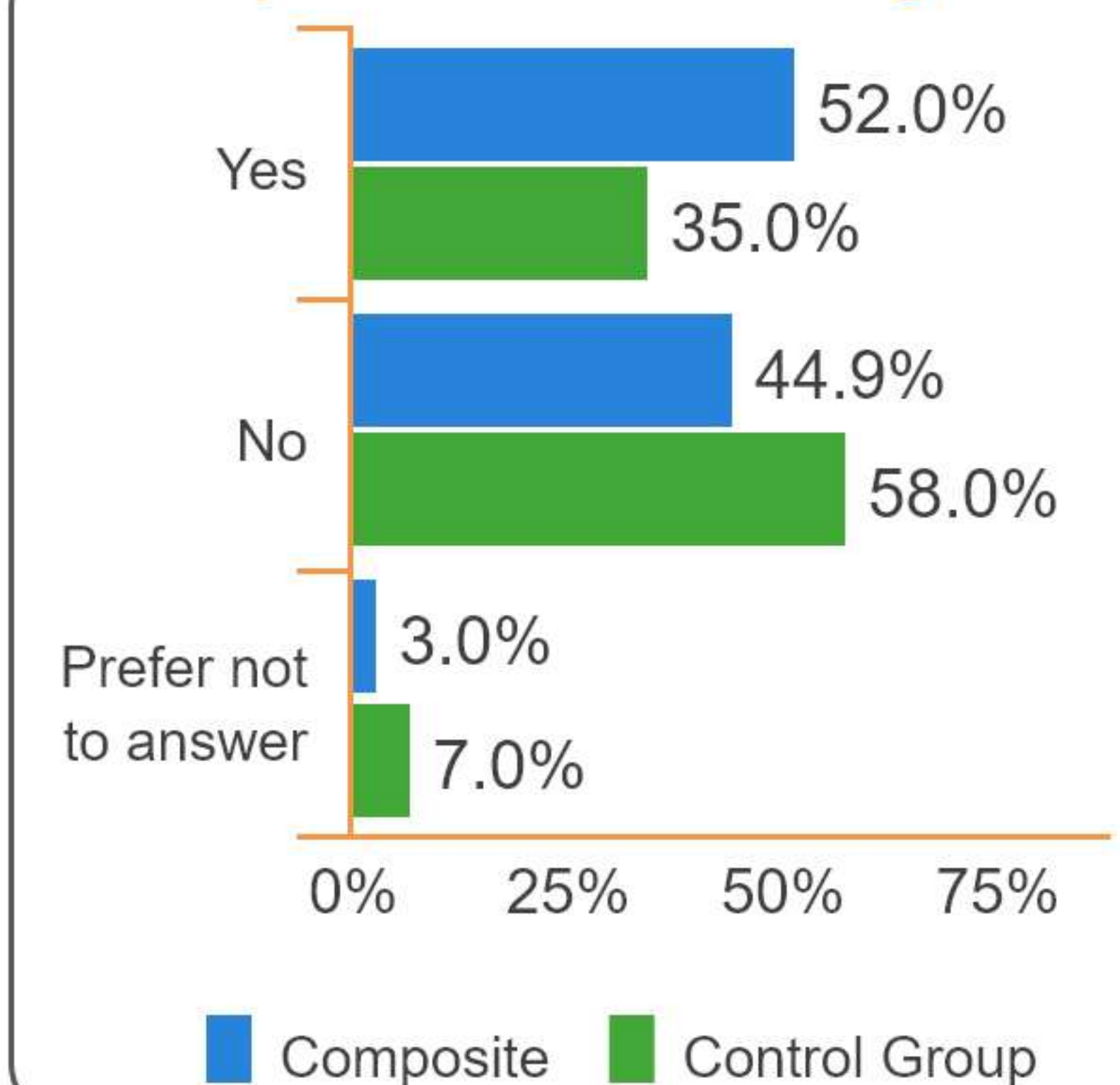
Ethnicity (Select all that apply)



Gender

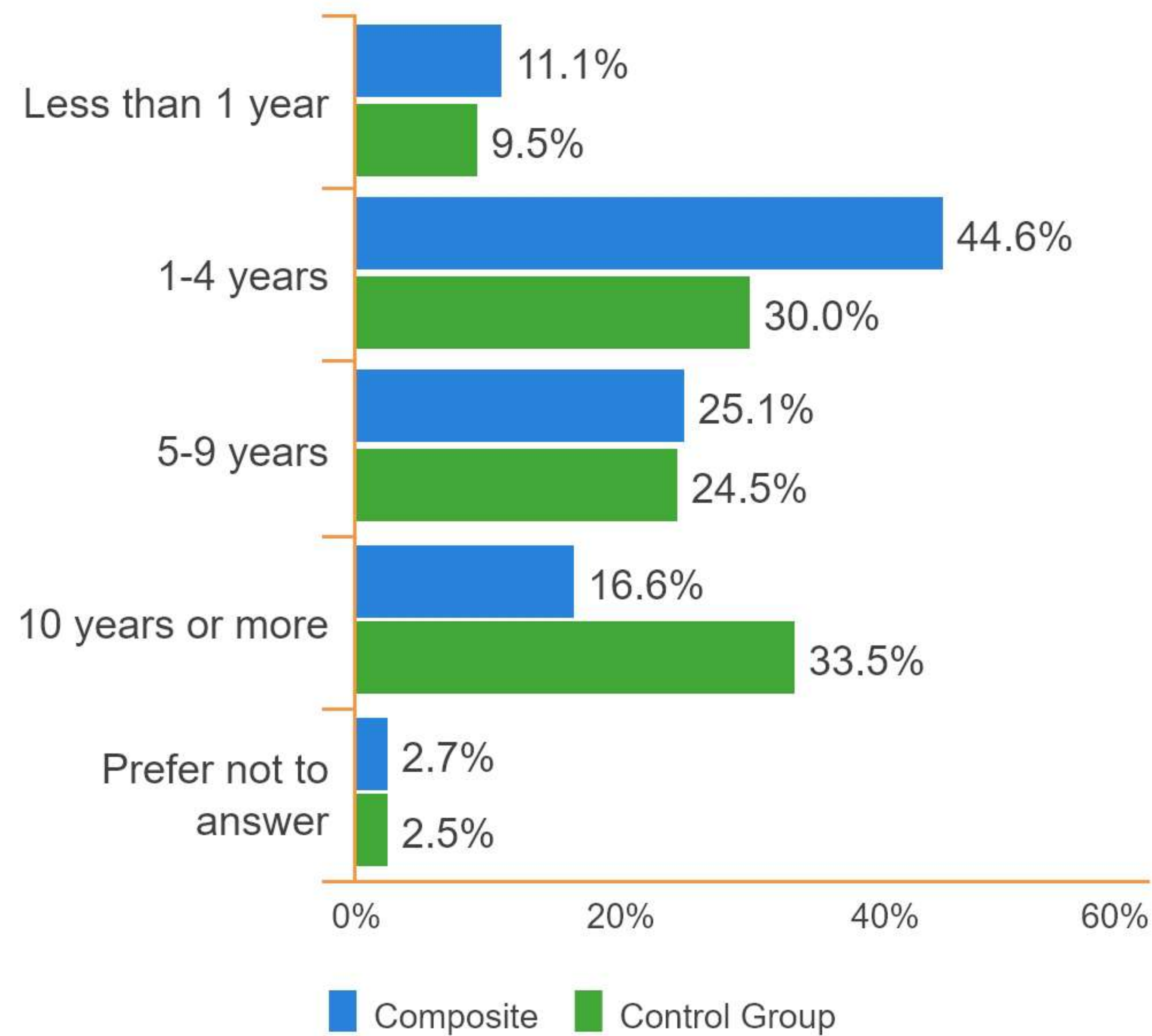


Hispanic/Latino Origin

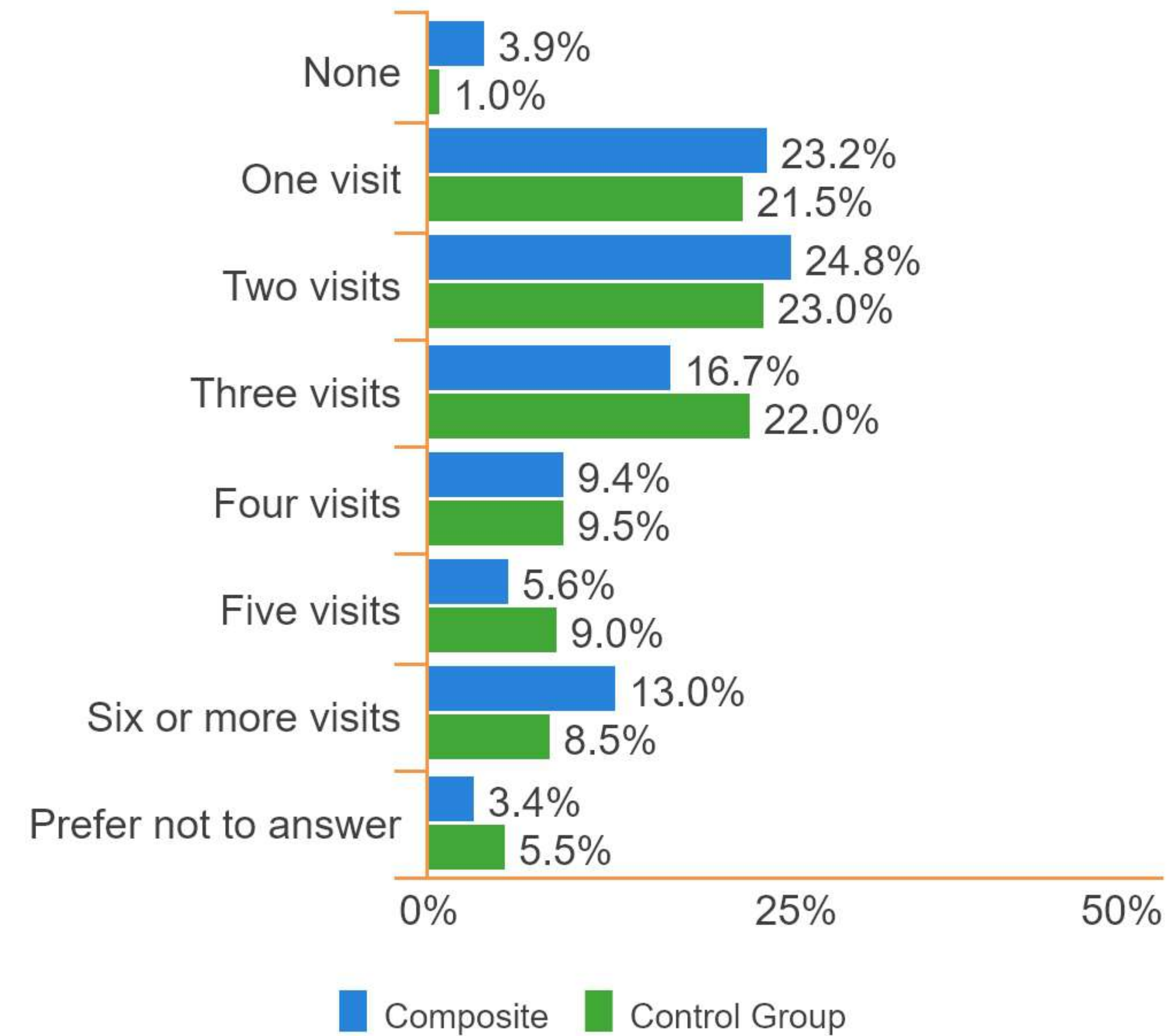


Respondent Demographics - Child

Length of Time with Current Doctor



Number of Doctor Visits in Past Year



Key Study Findings - Adult

- Adult survey respondents in the control group provided higher ratings for seven (7) of eleven (11) characteristics rated in the PCPCM survey as compared to adults in the composite group.
- Among the adult composite group, the average score across all eleven (11) characteristics was 78.6%, while the average score among adult control group respondents was 79.8%.
- Adult composite survey respondents provided the highest ratings for “in caring for me, my doctor considers all factors that affect my health” (88.0%) and “my practice is able to provide most of my care” (86.2%), while the lowest rated characteristic was “my doctor and I have been through a lot together” (55.6%).
- Adult control group survey respondents provided the highest rating for “in caring for me, my doctor considers all factors that affect my health” (90.5%), while the lowest rated characteristic was “my doctor and I have been through a lot together” (56.5%).
- The largest increase in scores for the control group over the composite group was recorded for “my doctor or practice knows me as a person” (78.0% versus 73.8%), while the largest increase in scores for the composite group over the control group was recorded for “the care I get in this practice is informed by knowledge of my community” (71.8% versus 68.5%).
- Among adult composite survey respondents, the provider office receiving the highest average score across all eleven (11) characteristics was CCMC Advanced Network (83.4%), while the lowest average score was recorded for Optimus Health Care (71.6%).

Key Study Findings - Adult

- Adult composite survey respondents ages 60-65 (82.2%) provided the highest overall average rating, while respondents ages 66-75 provided the lowest average rating (75.9%).
- Men in the adult composite survey (79.6%) provided a higher average rating as compared to women (78.0%).
- Asian respondents in the adult composite survey (85.5%) provided the highest overall average rating, while respondents characterizing themselves as an “other” ethnicity provided the lowest average rating (75.8%).
- Adult composite survey respondents with an education level of some high school experience (84.3%) provided the highest overall average rating, while respondents with some college experience provided the lowest average rating (76.4%).
- Adult composite survey respondents who have been with their current medical provider for more than 10 years (82.6%) provided the highest overall average rating, while respondents who have been with their current medical provider for less than 1 year provided the lowest average rating (70.6%).
- Adult composite survey respondents with four (4) visits to their medical provider within the past year (84.4%) provided the highest overall average rating, while respondents who have not seen their medical provider within the past year provided the lowest average rating (62.4%).

Key Study Findings - Child

- Child survey respondents in the control group provided higher ratings for all eleven (11) characteristics rated in the PCPCM survey as compared to children in the composite group.
- Among the child composite group, the average score across all eleven (11) characteristics was 82.1%, while the average score among child control group respondents was 88.6%.
- Child composite survey respondents provided the highest rating for “in caring for me, my doctor considers all factors that affect my health” (90.1%), while the lowest rated characteristic was “my doctor and I have been through a lot together” (58.2%).
- Child control group survey respondents provided the highest rating for “over time, my practice helps me to stay healthy” (95.0%), while the lowest rated characteristic was “my doctor and I have been through a lot together” (72.0%).
- The largest increase in scores for the child control group over the composite group was recorded for “my doctor and I have been through a lot together” (72.0% versus 58.2%).
- Among child composite survey respondents, the provider office receiving the highest average score across all eleven (11) characteristics was Hartford HealthCare Medical Group (89.3%), while the lowest average score was recorded for Optimus Health Care (73.9%).

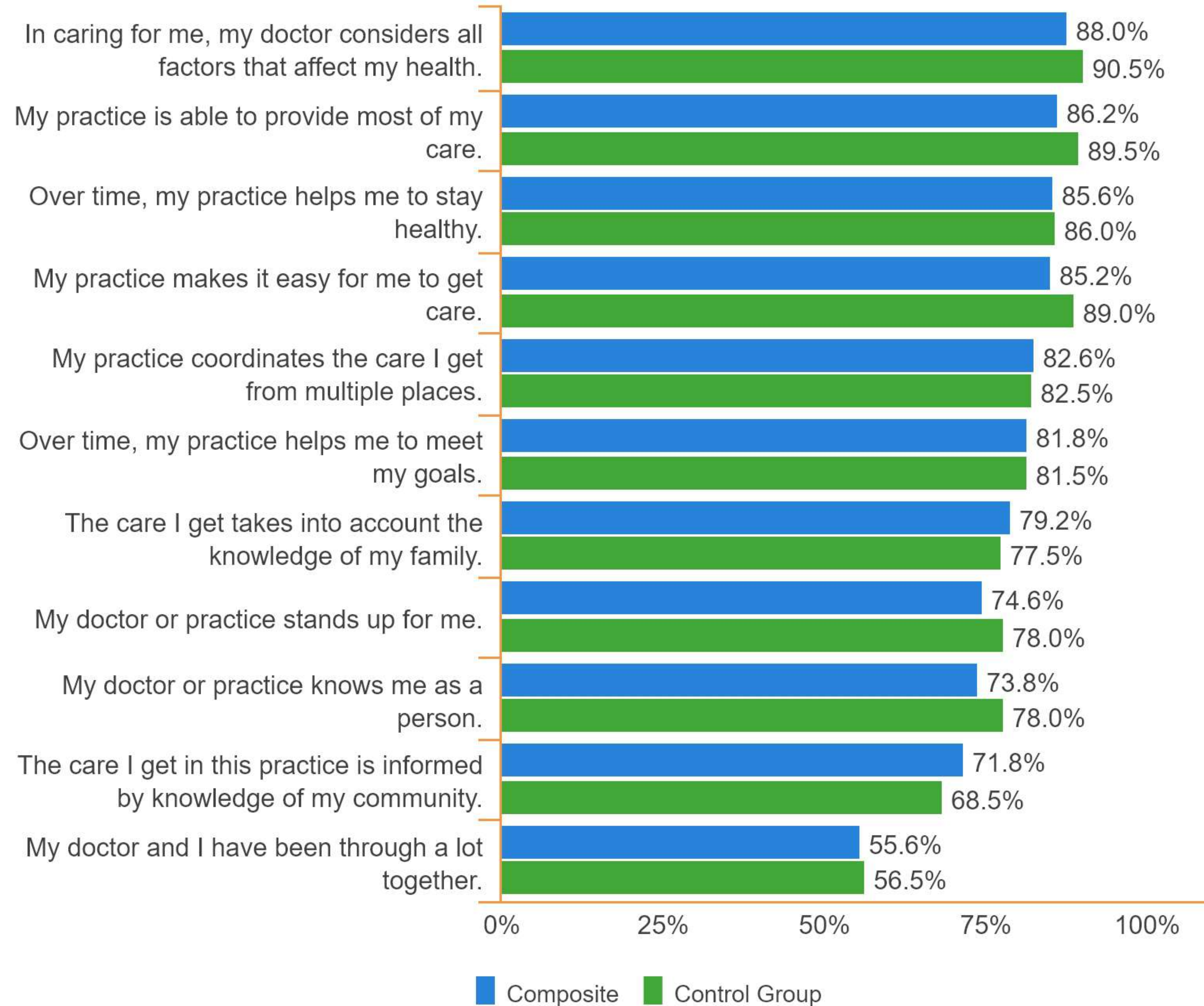
Key Study Findings - Child

- Child composite survey respondents less than 1 year old (88.9%) provided the highest overall average rating, while respondents ages 5-9 provided the lowest average rating (81.0%).
- Boys in the child composite survey (82.3%) provided a slightly higher average rating as compared to girls (81.8%).
- Asian respondents in the child composite survey (86.3%) provided the highest overall average rating, while Hispanic / Latino or Spanish respondents provided the lowest average rating (80.5%).
- Child composite survey respondents who have been with their current medical provider for more than 10 years (84.1%) provided the highest overall average rating, while respondents who have been with their current medical provider for less than 1 year provided the lowest average rating (76.2%).
- Child composite survey respondents with four (4) visits to their medical provider within the past year (86.1%) provided the highest overall average rating, while respondents who have not seen their medical provider within the past year provided the lowest average rating (66.0%).

Adult Primary Care Experience

Adult survey respondents in the control group provided higher ratings for seven (7) of eleven (11) characteristics rated in the PCPCM survey as compared to the adult composite group.

The largest increase in scores for the control group over the composite group was recorded for “my doctor or practice knows me as a person” (78.0% versus 73.8%), while the largest increase in scores for the composite group over the control group was recorded for “the care I get in this practice is informed by knowledge of my community” (71.8% versus 68.5%).

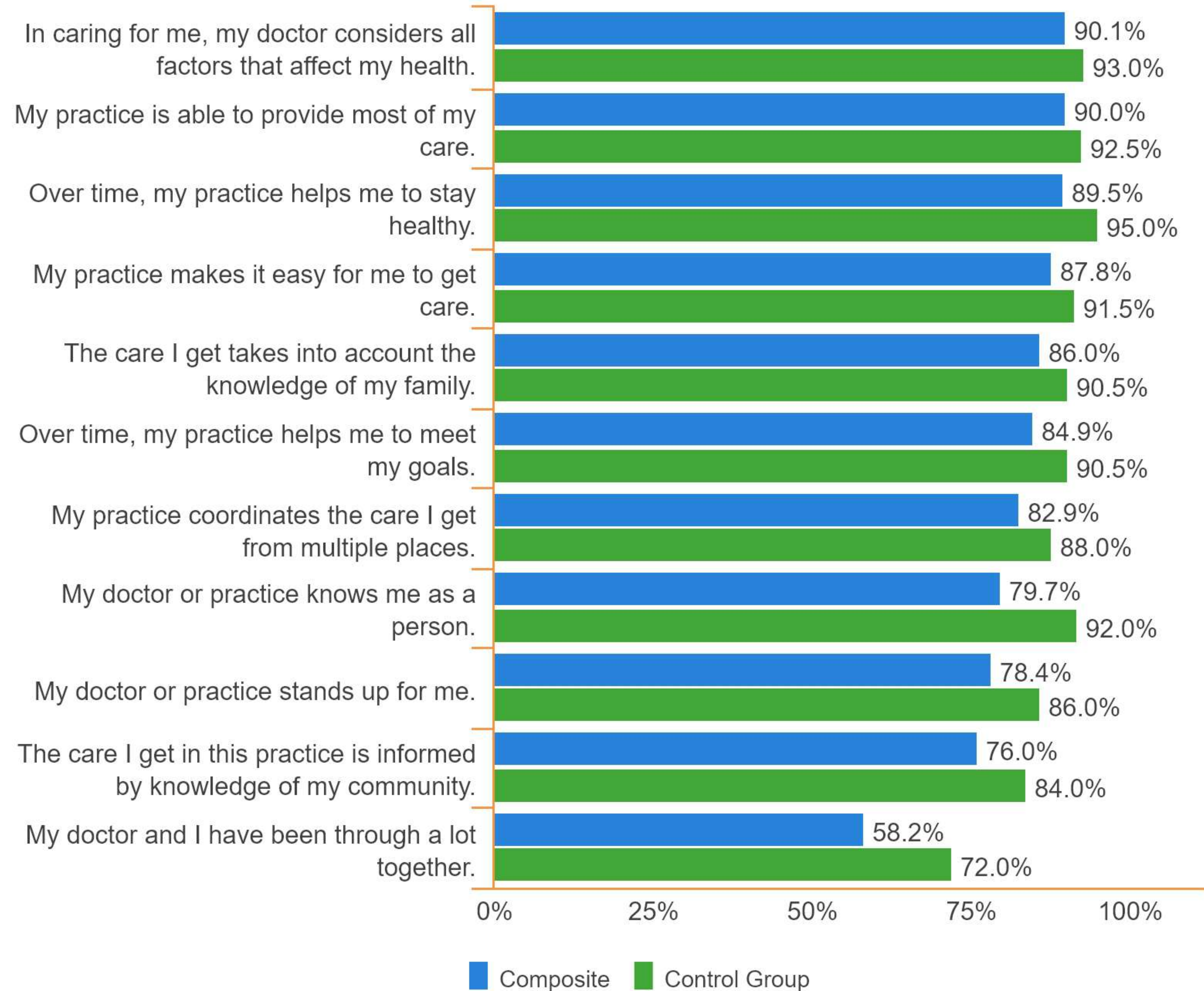


How would you assess your primary care experience? (Total "definitely" or "mostly")

Child Primary Care Experience

Child survey respondents in the control group provided higher ratings for all eleven (11) characteristics rated in the PCPCM survey as compared to the child composite group.

The largest increase in scores for the control group over the composite group was recorded for “my doctor and I have been through a lot together” (72.0% versus 58.2%).



How would you assess your primary care experience? (Total "definitely" or "mostly")