

MY 2021 CAHPS® MEDICAID CHILD WITH CCC 5.1 SURVEY

OKLAHOMA HEALTH CARE AUTHORITY

PREPARED FOR THE OKLAHOMA HEALTH CARE AUTHORITY THROUGH A CONTRACT WITH KFMC HEALTH IMPROVEMENT PARTNERS



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SPH Analytics (SPH), a National Committee for Quality Assurance (NCQA) certified HEDIS® Survey Vendor, was selected by Oklahoma Health Care Authority through a contract with KFMC Health Improvement Partners 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 Tracy Freeman (817-665-7000, ext. 4186). 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 3/8/2022

Second questionnaire mailed 4/12/2022

Initiate follow-up calls to non-responders 5/3/2022 - 5/17/2022 Last day to accept completed surveys 5/23/2022

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

VALID SURVEYS

Total Number of Mail Completed =	507	(83 in Spanish)
Total Number of Phone Completed =	272	(12 in Spanish)
Total Number of Internet Completed =	163	(0 in Spanish)

Number of Undeliverables: 894

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

RESPONSE RATE TRENDING

	2021	2022				
Completed	SUBTOTAL			942		
	Does not Meet Eligibility Criteria (01)			79		
	Language Barrier (03)			19		
Ineligible	Mentally/Physically Incapacitated (04)			0		
	Deceased (05)			0		
	SUBTOTAL			98		
	Break-off/Incomplete (02)			60		
	Refusal (06)			188		
Non-response	Maximum Attempts Made (07)			5663		
	Added to DNC List (08)			0		
	SUBTOTAL			5911		
	Total Sample			6951		
	Oversampling %			321.3%		
	Response Rate			13.7%		
5	SPH Response Rate			10.2%		
Total Con	npleted (General Pop + CCC)			951		
Total Ine	ligible (General Pop + CCC)			98		
Total Sa	ample (General Pop + CCC)			7020		
Total Respo	nse Rate (General Pop + CCC)		13.7			
Supple	mental (CCC) Sample Size			69		
Supple	emental (CCC) Completes			342		



INDUSTRY TRENDS

Oklahoma Health Care Authority

PREPARED FOR THE OKLAHOMA HEALTH CARE AUTHORITY THROUGH A CONTRACT WITH KFMC HEALTH IMPROVEMENT PARTNERS **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	c of Busi	ness Trer	nds
19 20	020	2021	2022
2% 73	3.0% 7	73.3%	72.5%
1% 73	3.0% 7	74.4%	71.2%
6% 79	0.1% 7	78.6%	77.4%
2% 75	5.0% 7	75.7%	73.9%
9% 87	'.5% 8	37.3%	86.9%
3% 88	3.7%	38.7%	87.6%
6% 91	.2%	90.8%	90.3%
2% 88	3.2%	38.2%	87.5%
2% 85	5.6% 8	36.6%	84.4%
1% 90).8%	90.8%	89.2%
3% 80).4% 8	32.4%	79.5%
3% 90	.5% 8	37.8%	86.7%
9% 91	.7%	91.7%	90.5%
6% 89	0.3%	33.8%	82.9%
2% 85	5.0% 8	84.9%	34.1%
	19 20 2% 73 1% 73 6% 79 2% 75 9% 87 3% 88 6% 91 2% 85 1% 90 3% 90 9% 91 6% 89 6% 89	19 2020 2% 73.0% 1% 73.0% 6% 79.1% 2% 75.0% 8 75.0% 8 87.5% 8 88.7% 8 91.2% 2% 85.6% 1% 90.8% 3% 80.4% 8 90.5% 9% 91.7% 6% 89.3%	2% 73.0% 73.3% 1% 73.0% 74.4% 6% 79.1% 78.6% 2% 75.0% 75.7% 9% 87.5% 87.3% 3% 88.7% 88.7% 6% 91.2% 90.8% 2% 88.2% 88.2% 2% 85.6% 86.6% 1% 90.8% 90.8% 3% 80.4% 82.4% 3% 90.5% 87.8% 9% 91.7% 91.7% 6% 89.3% 83.8%

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



EXECUTIVE SUMMARY

Oklahoma Health Care Authority

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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.





942

Completed surveys

13.7%

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 He	ealth Plan 🔺 📩									
Rating of Health Plan	68.9%	25 th								
Rating of Health Care 🌟										
Rating of Health Care	67.6%	25 th	Opportunity							
Rating of Person	onal Doctor 🔺 📩									
Rating of Personal Doctor	73.7%	15 th	Opportunity							
Rating of Spe	cialist 🖈 🖈 🕇									
Rating of Specialist	75.4%	59 th	Power							

Coordination of Care 🌟 📩										
Coordination of Care	83.8%	47 th	47 th							
Getting Needed Care	**									
Composite	86.0%	65 th								
Q10. Getting care, tests, or treatment	91.4%	64 th	Power							
Q41. Getting specialist appointment	80.5%	57 th	Power							
Getting Care Quickly	**									
Composite	89.0%	66 th								
Q4. Getting urgent care	93.3%	70 th	Power							
Q6. Getting routine care	84.7%	58 th	Power							

Customer Service +									
Composite	89.4%	59 th							
Q45. Provided information or help	84.7%	60 th	Retain						
Q46. Treated with courtesy and respect	94.2%	54 th	Retain						
Ease of Filling (Out Forms +								
Ease of Filling Out Forms +	97.1%	73 rd	Retain						

How Well Doctors Communicate +									
Composite	95.2%	61 st							
Q27. Dr. explained things	95.9%	59 th	Retain						
Q28. Dr. listened carefully	96.1%	58 th	Power						
Q29. Dr. showed respect	96.6%	47 th	Opportunity						
Q32. Dr. spent enough time	92.3%	64 th	Retain						

ESTIMATED NCQA HEALTH INSURANCE PLAN RATINGS

Prepared for the Oklahoma Health Care Authority through a contract with KFMC Health Improvement Partners

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						3
Getting Needed Care	Usually or Always	426	85.9%	88.0%	33 rd	3
Getting Care Quickly	Usually or Always	423	89.0%	89.3%	33 rd	3
SATISFACTION WITH PLAN	PHYSICIANS					2
Rating of Personal Doctor	9 or 10	807	73.7%	79.8%	10 th	2
Rating of Specialist	9 or 10	207	75.3%	76.0%	33 rd	3
Rating of Health Care	9 or 10	626	67.5%	76.5%	<10 th	1
Coordination of Care	Usually or Always	259	83.7%	88.6%	10 th	2
SATISFACTION WITH PLAN	SERVICES					2
Rating of Health Plan	9 or 10	907	68.9%	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	10 th – 32 nd	33 rd – 66 th	67 th – 89 th	≥90 th
Percentile	Percentile	Percentile	Percentile	Percentile

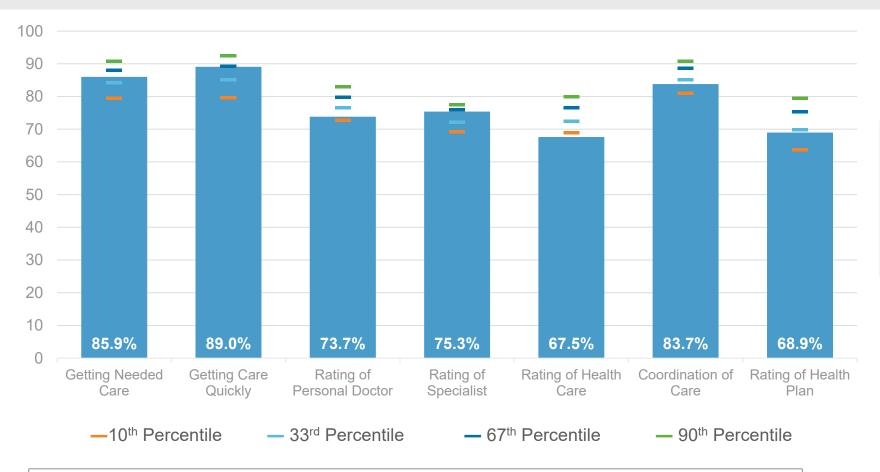
Notes:

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

*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

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

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

	SUMMA	RY RATE		2022 GP SPH BOOK OF BUSINESS BENC							NCHMARK			
MEASURE	2021	2022	CHANGE	0	PE l	RCENTILE 40	DISTRIBU	ITION 80	100	PERCENTILE RANK	BoB SRS			
Health Plan Domain														
Rating of Health Plan % 9 or 10		68.9%								25 th	72.5% 🔻			
Getting Needed Care % Usually or Always		86.0%								65 th	84.4%			
Customer Service + % Usually or Always		89.4%								59 th	88.2%			
Ease of Filling Out Forms + % Usually or Always		97.1%								73 rd	96.1%			
Health Care Domain														
Rating of Health Care % 9 or 10		67.6%								25 th	71.2%			
Getting Care Quickly % Usually or Always		89.0%								66 th	86.7%			
How Well Doctors Communicate + % Usually or Always		95.2%								61 st	94.4%			
Coordination of Care % Usually or Always		83.8%								47 th	84.1%			
Rating of Personal Doctor % 9 or 10		73.7%								15 th	77.4%			
Rating of Specialist % 9 or 10		75.4%								59 th	73.9%			

	SUMMA	RY RATE				2022 CC	SPH BOC	K OF BUS	INESS BE	NCHMARK	
MEASURE	2021	2022	CHANGE	0	PE F	RCENTILE 40	DISTRIBU [*]	TION 80	100	PERCENTILE RANK	BoB SRS
Health Plan Domain											
Rating of Health Plan % 9 or 10		64.0%								16 th	69.7%
Getting Needed Care % Usually or Always		85.1%								26 th	87.5%
Customer Service + % Usually or Always		85.2%								9 th	89.3%
Ease of Filling Out Forms + % Usually or Always		97.0%								74 th	95.9%
Health Care Domain											
Rating of Health Care % 9 or 10		64.1%								21 st	69.1%
Getting Care Quickly % Usually or Always		90.5%								45 th	90.5%
How Well Doctors Communicate + % Usually or Always		95.3%								51 st	94.9%
Coordination of Care % Usually or Always		81.6%								29 th	83.3%
Rating of Personal Doctor % 9 or 10		76.2%								35 th	77.5%
Rating of Specialist % 9 or 10		72.7%								41 st	74.0%

	SUMMA	RY RATE				2022 CC	C SPH BOC	K OF BUS	SINESS BE	NCHMARK	
MEASURE	2021	2022	CHANGE		PE	RCENTILE	DISTRIBU	TION		PERCENTILE	BoB SRS
	2021	2022		0	20	40	60	80	100	RANK	DOD OILO
CCC Measures											
Access to Rx Medicines % Usually or Always		91.8%								54 th	91.5%
Access to Specialized Services % Usually or Always		67.9%								13 th	73.0%
FCC: Dr Who Knows Child % Yes		91.4%								40 th	91.5%
FCC: Getting Needed Info % Usually or Always		90.3%								16 th	92.0%
Coordination of Care for CCC % Yes		70.8%								5 th	76.6%



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

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

More info. (i)

	Above the plan score			Darker snading indicates a larger disparity.									
	Below the	Below the plan score Below the plan score by 5 or more points Above/below plan score but has low base (<30)		Rating of Health Plan		Rating of Hea					Coordinatio		
				SRS	Δ	SRS	Δ	SRS	Δ	SRS	Δ	SRS	Δ
	Demographic	Category	Total	68.9%		67.6%		86.0%		89.0%		83.8%	
88	Child's	Male	n = 485		1%		2%		3%		1%		0%
1/1/	Gender	Female	n = 432		-1%		-3%		-2%		-1%		-1%
6		0 – 4	n = 146		4%		3%		3%		3%		6%
	Child's Age	5 – 8	n = 178		1%	_	-3%		0%		-1%		-8%
TAN		9 – 13	n = 260		-1%		4%		3%		0%		-1%
		14 or older	n = 327		-2%		-4%		-2%		-1%		2%
		Free Hamt/Vam / Coard	705		3%		4%		2%		1%		1%
	Overall	Excellent/Very Good Good	n = 725		-9%		4% - 8%		2% 0%		-2%		-3%
	Health	Fair/Poor	n = 160 n = 38		-9% -18%		-6% -26%		-11%		-2% -2%		-5%
		i ali/F00i	11 – 30		-10 /0		-20 /0		-1170		-2 /0		-5 70
		Excellent/Very Good	n = 604		5%		6%		3%		1%		4%
	Mental	Good	n = 209		-7%		-11%		1%	T I	-1%		-2%
	Health	Fair/Poor	n = 108		-15%		-9%		-10%		-1%		-12%
		White	n = 674		-1%		-1%		-1%		1%		-1%
		Black/African-American	n = 121		-3%		-3%		9%		1%		6%
	Race/	Asian	n = 37		-5%		-9%		-8%		-32%		-4%
	Ethnicity	Native Hawaiian/Pacific Islander	n = 25		-5%		-3%		-4%		-18%		16%
TAZI	Zumorty	American Indian or Alaska Native	n = 209		-3%		1%		-1%		3%		5%
		Other	n = 83		8%		11%		-6%		-2%		10%
		Hispanic/Latino	n = 220		12%		9%		-1%		-3%		1%

MEDICAID CHILD: GENERAL POPULATION

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

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

Мо

re	info.	

	Above the plan score			Darker shading indicates a larger disparity.										
	Below the plan score Below the plan score by 5 or more points Above/below plan score but has low base (<30)			Docto	Rating of Personal Doctor SRS △		ecialist	Customer SRS	Service +	How Well Doctors Communicate + SRS A SRS SRS				
						SRS	Δ	I					\triangle	
	Demographic		Total	73.7%		75.4%		89.4%		95.2%		97.1%		
88	Child's	Male	n = 485		1%		1%		2%	- 2	1%		-1%	
TH	Gender	Female	n = 432		-3%		0%		-3%		-2%		1%	
		0 – 4	n = 146		-8%		5%		6%		-2%		-1%	
880	Child's	5 – 8	n = 178		0%		3%		-10%		-1%		-1%	
11230	Age	9 – 13	n = 260		5%		2%		1%		0%		1%	
		14 or older	n = 327		-2%		-3%		1%		1%		0%	
(00)		Excellent/Very Good	n = 725		1%		4%		2%		1%		0%	
	Overall	Good	n = 160		-5%		-3%		-6%		-3%		0%	
	Health	Fair/Poor	n = 38		-9%		-10%		2%		-3%		0%	
		Excellent/Very Good	n = 604		3%		5%		1%		1%		0%	
(PP)	Mental	Good	n = 209		-7%		-1%		2%	-	-3%		1%	
42	Health	Fair/Poor	n = 108		0%		-12%		-3%		0%		-4%	
		White	n = 674		0%		-2%		-1%		0%		0%	
		Black/African-American	n = 121		- 6%		-2% 6%		2%		1%		1%	
		Asian	n = 37		- 1 4%		-4%		11%		2%	_	-3%	
200	Race/	Native Hawaiian/Pacific Islander	n = 37 n = 25		-14% -4%		-4% -42%		-4%		-2%		-3% -9%	
727	Ethnicity	American Indian or Alaska Native	n = 209		-4 % -2%		-42% -2%		4%	-	2%		-9% 1%	
		Other	n = 83		9%		9%		-8%		-2%	-	-3%	
		Hispanic/Latino	n = 220		4%		6%		0%		-3%	-	-1%	
		пізрапіс/цашіо	11 = 220		4 70		0 70		U 70		-370		-170	

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		
WEASURE		2021	2022	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Getting Care Quickly (% Usually or Always)	423		89.0%		86.9%	2.1	65 th	86.7%	2.3	66 th
Getting Needed Care (% Usually or Always)	426		86.0%		85.7%	0.3	55 th	84.4%	1.6	65 th
How Well Doctors Communicate + (% Usually or Always)	585		95.2%		94.4%	0.8	61 st	94.4%	0.8	61 st

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		
WEASURE		2021	2022	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Rating of Health Plan (% 9 or 10)	907		68.9%		72.2% ▼	-3.3	27 th	72.5% ▼	-3.6	25 th
Rating of Health Care (% 9 or 10)	626		67.6%		74.3% ▼	-6.7	6 th	71.2%	-3.6	25 th
Rating of Personal Doctor (% 9 or 10)	807		73.7%		78.0% V	-4.3	12 th	77.4%	-3.7	15 th

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

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

Improving Performance

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

Improvement Strategies - Rating of Health Plan

- Analyze, investigate, probe for weakness or QI opportunities among those
 measures or composites that are Key Drivers (or highly correlated) with
 Rating of the Plan (i.e., CS, GNC, GCQ, HWDC). Review QI
 recommendations/actions of these CAHPS composite measures.
- Carefully review, simplify and clarify all family/child member communications, processes and forms. Ensure that all materials and messages are accurate, up-to-date, complete and consistent, using concise and unambiguous language.
- Identify key parent needs and expectations and critically assess operations and processes.
- · Ensure that the member website is easily navigable and highly user friendly.
- Simplify completion of commonly used forms via "pre-loaded" applications or on-line.
- Communicate and educate all areas of the Plan on CAHPS, sharing findings, initiatives and outcomes. Seek input and observations. Engage relevant contributors into QI design/activities.
- Analyze satisfaction levels and loyalty ratings based on member profile/segmentation data (health system, age, length of membership, have PCP, etc.).
- Set S.M.A.R.T. goals. Specific, Measurable, Attainable, Realistic, and Timely for all identified activities. Assess all relevant internal data. Conduct additional surveys, data analyses as needed.
- Consider opportunities for positive and strategic messaging about the plan or health care reminders to members. Use technology to provide more effective and efficient care.
- Consider the value of a SPH CAHPS Drill-Down, Simulation Survey or CG-CAHPS to probe key CAHPS measures and/or target segments of the population.

Improvement Strategies - Rating of Health Care

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

Improvement Strategies - 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 (1)



a Press Ganey Solution

KEY DRIVER ANALYSIS OF RATING OF HEALTH PLAN

Oklahoma Health Care Authority

PREPARED FOR THE OKLAHOMA HEALTH CARE AUTHORITY THROUGH A CONTRACT WITH KFMC HEALTH IMPROVEMENT PARTNERS

POWER CHART: EXPLANATION

POWeR™ CHART CLASSIFICATION MATRIX

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

The model provides the following:

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

Higher

Your plan performance

Lower

RETAIN

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

POWER

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

WAIT

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

OPPORTUNITY

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

Lower

Importance to your plan members

Higher



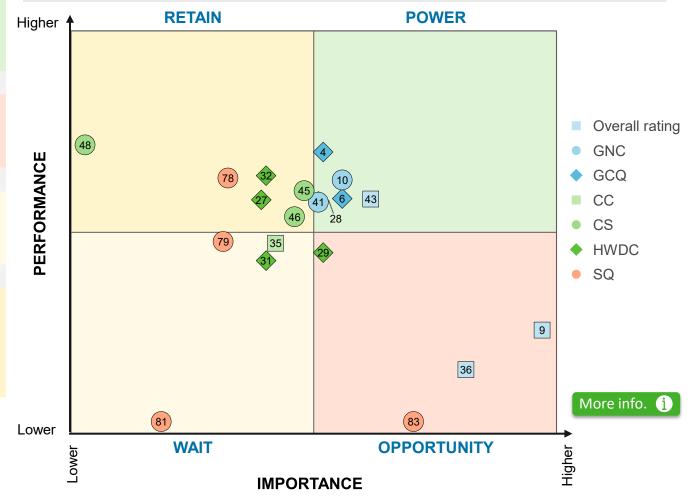
POWER CHART: YOUR RESULTS

MEDICAID CHILD: GENERAL POPULATION

SURVEY M	EASURE	SRS	SPH %tile
POWER			
Q43	Rating of Specialist	75.4%	59 th
Q10	Getting care, tests, or treatment	91.4%	64 th
Q6	Getting routine care	84.7%	58 th
Q4	Getting urgent care	93.3%	70 th
Q28	Dr. listened carefully	96.1%	58 th
Q41	Getting specialist appointment	80.5%	57 th
OPPORTU	NITY		
Q9	Rating of Health Care	67.6%	25 th
Q36	Rating of Personal Doctor	73.7%	15 th
Q83	Easy to find/understand info. on website	83.2%	
Q29	Dr. showed respect	96.6%	47 th
WAIT			
Q35	Coordination of Care	83.8%	47 th
Q31	Dr explained things to child	94.3%	43 rd
Q79	Got easy to understand info.	90.2%	
Q81	Got wanted info. from pharmacist	74.9%	
RETAIN			
Q45	Provided information or help	84.7%	60 th
Q46	Treated with courtesy and respect	94.2%	54 th
Q32	Dr. spent enough time	92.3%	64 th
Q27	Dr. explained things	95.9%	59 th
Q78	Got wanted info. about health from Dr.	92.8%	
Q48	Ease of Filling Out Forms +	97.1%	73 rd

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.



Prepared for the Oklahoma Health Care Authority through a contract with KFMC Health Improvement Partners

KEY DRIVERS OF RATING OF HEALTH PLAN

MEDICAID CHILD: GENERAL POPULATION

	TOP 10 KEY DRIVERS
YOUR PLAN	These items have a relatively large impact on the Rating of Health Plan. Leverage these questions since they are important to your members and the Rating of Health Plan score for this plan. They are listed in descending order of importance for your plan.
INDUSTRY	SPH Book of Business regression analysis has identified Key Drivers of Rating of Health Plan. The numbers represent the ranked importance across the entire Book of Business.

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

ALIGNMENT Are your key	KEY DRIV	ER RANK		ATTRIBUTE	SUMMARY R	ATE SCORE	SPH BoB	OL ADDIFICATION
drivers typical of the industry?	YOUR PLAN	INDUSTRY		ATTRIBUTE	YOUR PLAN	INDUSTRY	PERCENTILE	CLASSIFICATION
			Q49	Rating of Health Plan	68.9%	72.5%	25 th	
\checkmark	1	1	Q9	Rating of Health Care	67.6%	71.2%	25 th	Opportunity
\checkmark	2	2	Q36	Rating of Personal Doctor	73.7%	77.4%	15 th	Opportunity
	3		Q83	Easy to find/understand info. on website	83.2%			Opportunity
\checkmark	4	3	Q43	Rating of Specialist	75.4%	73.9%	59 th	Power
\checkmark	5	5	Q10	Getting care, tests, or treatment	91.4%	89.2%	64 th	Power
\checkmark	6	8	Q6	Getting routine care	84.7%	82.9%	58 th	Power
	7	11	Q29	Dr. showed respect	96.6%	96.7%	47 th	Opportunity
\checkmark	8	9	Q4	Getting urgent care	93.3%	90.5%	70 th	Power
\checkmark	9	10	Q28	Dr. listened carefully	96.1%	95.6%	58 th	Power
\checkmark	10	4	Q41	Getting specialist appointment	80.5%	79.5%	57 th	Power
	11	7	Q45	Provided information or help	84.7%	82.7%	60 th	Retain
	12	6	Q46	Treated with courtesy and respect	94.2%	93.7%	54 th	Retain



MEASURE ANALYSES

Measure Details and Summary Rate Scores

Oklahoma Health Care Authority
 PREPARED FOR THE OKLAHOMA HEALTH CARE AUTHORITY THROUGH
 A CONTRACT WITH KFMC HEALTH IMPROVEMENT PARTNERS



SECTION INFORMATION

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

Rating & Composite level information including...

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

Attribute level information for composites including...

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

Percentile Bands

≥90th

67th − 89th

33rd − 66th

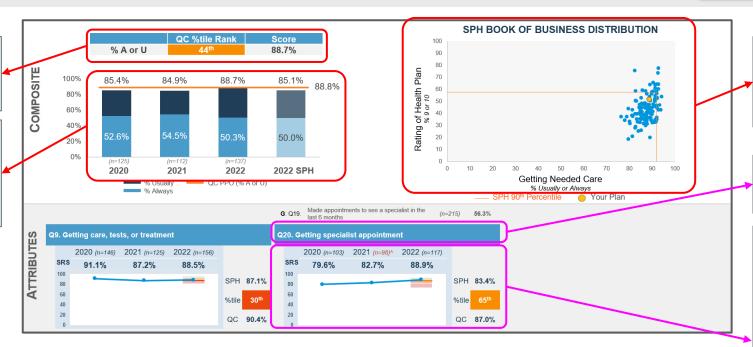
10th − 32nd

<10th

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

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

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



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

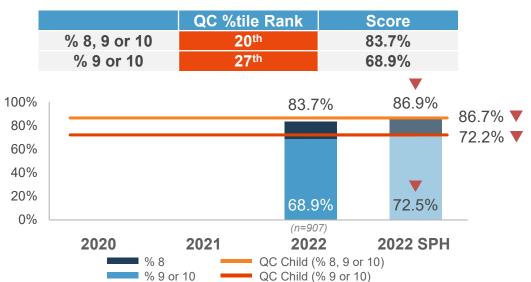
More info. (i)

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

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

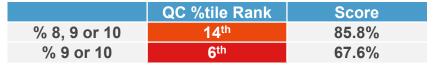
- Historic bases and Summary Rate Scores along with significant changes in trend notated
- Benchmark comparisons along with significant differences notated
- Percentile ranking against Quality Compass
- Graphic representation of trend and 2021
 Quality Compass percentile bands

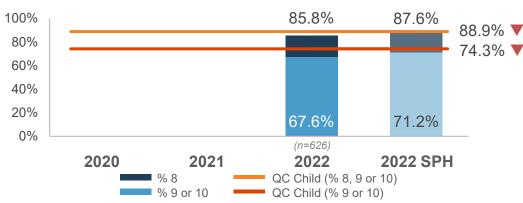
RATING OF HEALTH PLAN

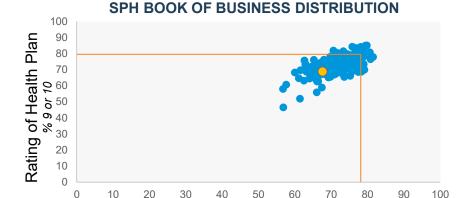


	Key Drivers Of The Rating Of The Health Plan										
	POWER	OPPORTUNITIES									
Q43	Rating of Specialist	Q9	Rating of Health Care								
Q10	Getting care, tests, or treatment	Q36	Rating of Personal Doctor								
Q6	Getting routine care	Q83	Easy to find/understand info. on website								
Q4	Getting urgent care	Q29	Dr. showed respect								
Q28	Dr. listened carefully										
Q41	Getting specialist appointment										

RATING OF HEALTH CARE



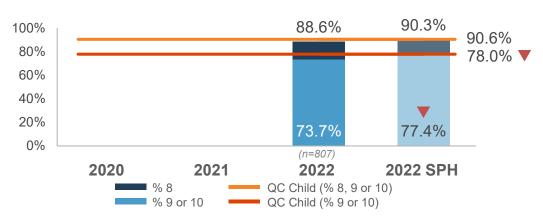


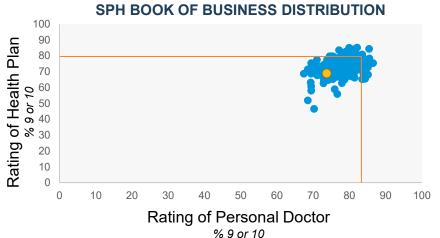


Rating of Health Care % 9 or 10 SPH 90th Percentile Your Plan

RATING OF PERSONAL DOCTOR

	QC %tile Rank	Score
% 8, 9 or 10	22 nd	88.6%
% 9 or 10	12 th	73.7%

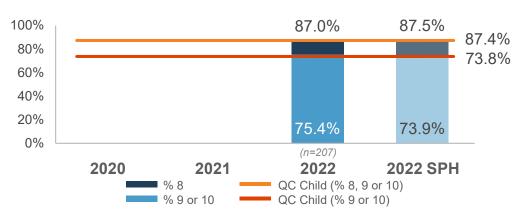




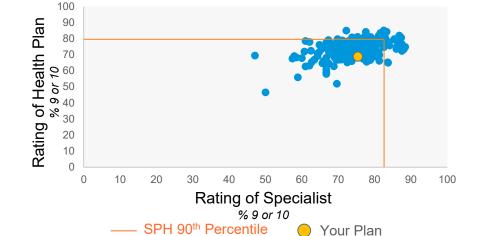
— SPH 90th Percentile

RATING OF SPECIALIST

	QC %tile Rank	Score
% 8, 9 or 10	50 th	87.0%
% 9 or 10	56 th	75.4%



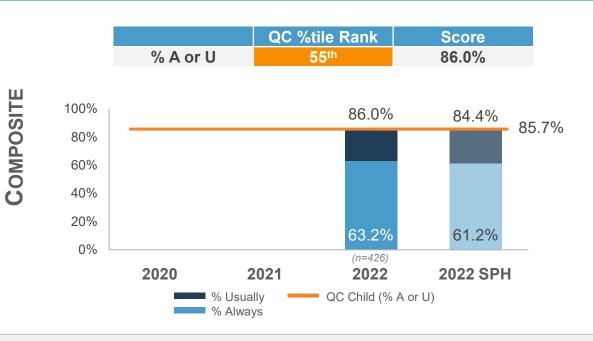


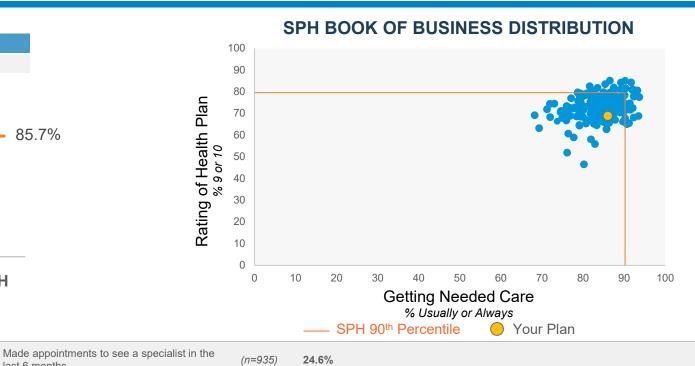


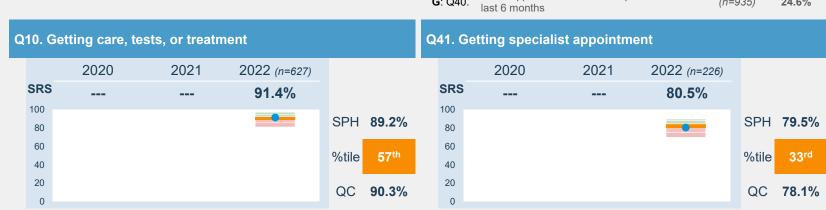
^Denominator less than 100. NCQA will assign an NA to this measure.

Your Plan

ATTRIBUTES







G: Q40.

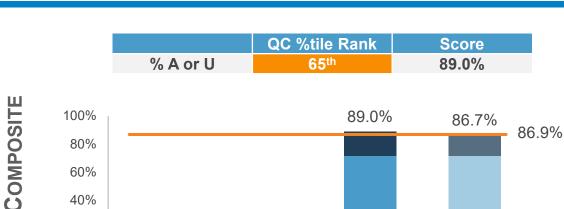


20%

0%

ATTRIBUTES

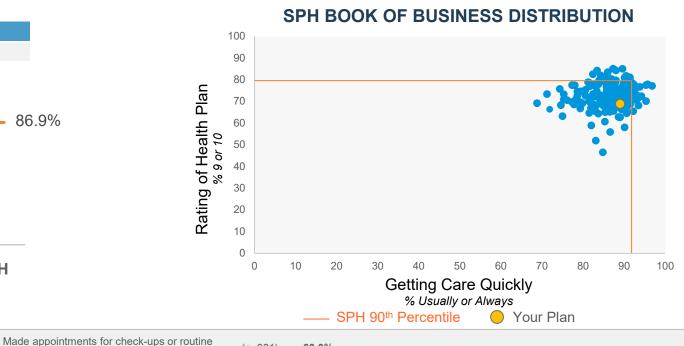
2020

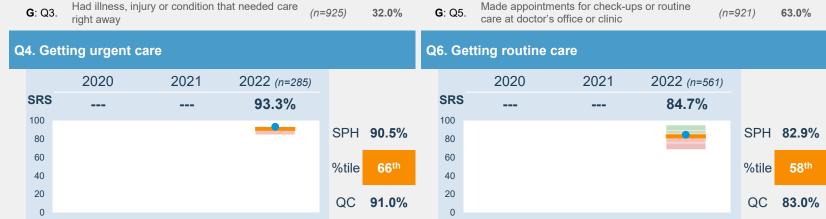


2021

% Usually

% Always





71.5%

2022 SPH

71.8%

(n=423)

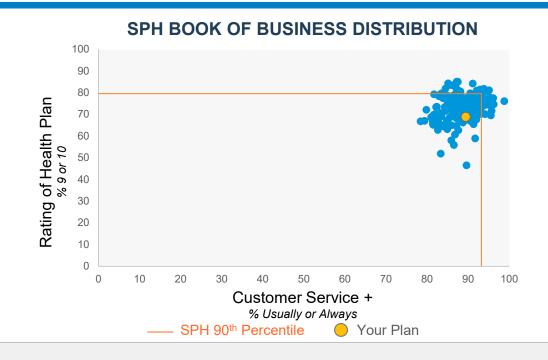
2022

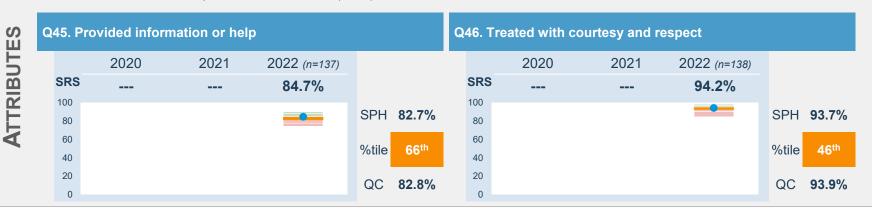
QC Child (% A or U)



G: Q44. Got information or help from customer service



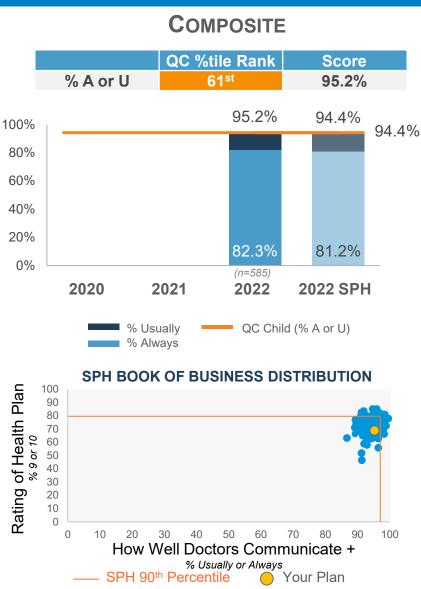




15.2%

How Well Doctors Communicate +

MEDICAID CHILD: GENERAL POPULATION

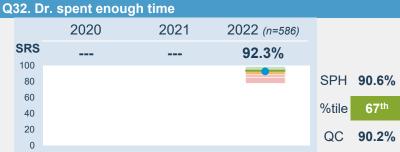


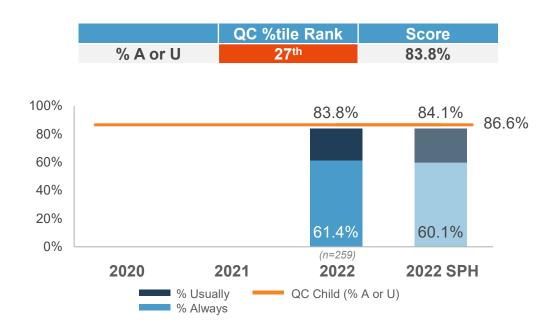
ATTRIBUTES

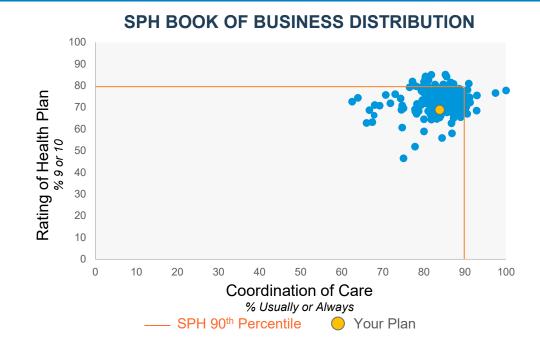














SUMMARY OF TREND AND BENCHMARKS

Oklahoma Health Care Authority

PREPARED FOR THE OKLAHOMA HEALTH CARE AUTHORITY THROUGH A CONTRACT WITH KFMC HEALTH IMPROVEMENT PARTNERS **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.

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

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

Significance Testing

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

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

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

Available Benchmarks

The following benchmarks are used throughout the report.

	2021 Quality Compass® All Plans (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 (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.	percentile) calculated by NCQA	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	Contains more plans than the SPH Book of Business Is presented in NCQA's The State of Health Care Quality	Contains more plans than the SPH Book of Business Is presented in NCQA's The State of Health Care Quality Provides a CCC benchmark	Utilized by SPH Analytics to calculate approximate percentile ranking of plan scores in relation to the Quality Compass® All Plans benchmark	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	Provides a benchmark for each question from the survey Permits precise percentile ranking of plan compared to benchmark	Provides a benchmark for each question from the survey Permits precise percentile ranking of plan compared to benchmark Provides a CCC benchmark
CONS	Only contains benchmarks for certain key questions, composites, and rating questions	Only contains benchmarks for certain key questions, composites, and rating questions	Only contains benchmarks for certain key questions, composites, and rating questions	Only contains benchmarks for certain key questions, composites, and rating questions	Contains fewer plans than the Public Report and the Quality Compass [®] All Plans Benchmarks	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	907			68.9%	72.5% ▼	72.2% ▼
★ Q9. Rating of Health Care	626			67.6%	71.2%	74.3% V
★ Q36. Rating of Personal Doctor	807			73.7%	77.4% ▼	78.0% ▼
★ Q43. Rating of Specialist	207			75.4%	73.9%	73.8%
Rating Questions (% 8, 9 or 10)						
Q49. Rating of Health Plan	907			83.7%	86.9% ▼	86.7%
Q9. Rating of Health Care	626			85.8%	87.6%	88.9% V
Q36. Rating of Personal Doctor	807			88.6%	90.3%	90.6%
Q43. Rating of Specialist	207			87.0%	87.5%	87.4%
★ Getting Needed Care (% Usually or Always)	426			86.0%	84.4%	85.7%
Q10. Getting care, tests, or treatment	627			91.4%	89.2%	90.3%
Q41. Getting specialist appointment	226			80.5%	79.5%	78.1%
★ Getting Care Quickly (% Usually or Always)	423			89.0%	86.7%	86.9%
Q4. Getting urgent care	285			93.3%	90.5%	91.0%
Q6. Getting routine care	561			84.7%	82.9%	83.0%
★ Q35. Coordination of Care	259			83.8%	84.1%	86.6%
Customer Service + (% Usually or Always)	137			89.4%	88.2%	88.3%
Q45. Provided information or help	137			84.7%	82.7%	82.8%
Q46. Treated with courtesy and respect	138			94.2%	93.7%	93.9%
How Well Doctors Communicate + (% Usually or Always)	585			95.2%	94.4%	94.4%
Q27. Dr. explained things	584			95.9%	94.8%	94.6%
Q28. Dr. listened carefully	584			96.1%	95.6%	96.0%
Q29. Dr. showed respect	586			96.6%	96.7%	96.9%
Q32. Dr. spent enough time	586			92.3%	90.6%	90.2%
Q48. Ease of Filling Out Forms + (% Usually or Always)	894			97.1%	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	333			64.0%	69.7% ▼	68.6%
★ Q9. Rating of Health Care	276			64.1%	69.1%	71.7%
★ Q36. Rating of Personal Doctor	311			76.2%	77.5%	78.4%
★ Q43. Rating of Specialist	139			72.7%	74.0%	74.4%
Rating Questions (% 8, 9 or 10)						
Q49. Rating of Health Plan	333			79.3%	84.4%	83.9%
Q9. Rating of Health Care	276			83.0%	86.5%	87.8%
Q36. Rating of Personal Doctor	311			90.0%	89.5%	89.5%
Q43. Rating of Specialist	139			83.5%	87.1%	87.5%
★ Getting Needed Care (% Usually or Always)	212			85.1%	87.5%	87.5%
Q10. Getting care, tests, or treatment	277			88.4%	90.4%	90.6%
Q41. Getting specialist appointment	148			81.8%	84.5%	85.0%
★ Getting Care Quickly <i>(% Usually or Always)</i>	200			90.5%	90.5%	90.8%
Q4. Getting urgent care	143			93.0%	92.4%	94.4%
Q6. Getting routine care	258			88.0%	88.5%	88.1%
★ Q35. Coordination of Care	152			81.6%	83.3%	85.2%
Customer Service + (% Usually or Always)	54^			85.2%	89.3%	91.2%
Q45. Provided information or help	54^			75.9%	83.7%	86.8%
Q46. Treated with courtesy and respect	54^			94.4%	94.8%	95.6%
How Well Doctors Communicate + (% Usually or Always)	263			95.3%	94.9%	94.6%
Q27. Dr. explained things	263			95.8%	95.7%	95.2%
Q28. Dr. listened carefully	262			96.2%	95.5%	95.7%
Q29. Dr. showed respect	263			96.2%	96.5%	96.7%
Q32. Dr. spent enough time	264			92.8%	91.9%	91.0%
Q48. Ease of Filling Out Forms + (% Usually or Always)	330			97.0%	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.

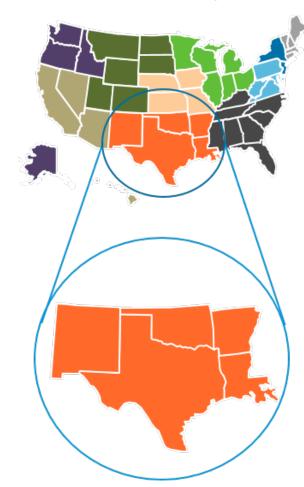


CCC MEASURES	2022 Valid n	2020	2021	2022	2022 CCC SPH BoB	2021 CCC QC
Q51. Access to Rx Medicines (% Usually or Always)	280			91.8%	91.5%	94.4%
Access to Specialized Services (% Usually or Always)	88^			67.9%	73.0%	74.0%
Q15. Easy to get special medical equipment	34^			70.6%	71.9%	NA
Q18. Easy to get special therapy	78^			61.5%	74.2% ▼	NA
Q21. Easy to get treatment or counseling	154			71.4%	72.9%	74.4%
FCC: Dr Who Knows Child (% Yes)	233			91.4%	91.5%	90.8%
Q33. Discussed feelings/growth/behavior	263			91.6%	90.4%	NA
Q38. Understands effects on child's life	219			94.1%	93.7%	92.9%
Q39. Understands effects on family's life	219			88.6%	90.4%	90.0%
Q8. FCC: Getting Needed Info (% Usually or Always)	277			90.3%	92.0%	NA
Coordination of Care for CCC (% Yes)	97^			70.8%	76.6%	77.1%
Q13. Helped contact child's school/daycare	30^			80.0%	92.6%	NA
Q24. Helped coordinate child's care	164			61.6%	60.5%	60.3%

REGIONAL PERFORMANCE MEDICAID CHILD: GENERAL POPULATION

SUMMARY 2022 SPH BoB RATE **REGION** Rating Questions (% 9 or 10) 76.8% ❖ Q49. Rating of Health Plan 68.9% Q9. Rating of Health Care 67.6% 73.2% ❖ Q36. Rating of Personal Doctor 73.7% 77.3% ❖ Q43. Rating of Specialist 75.4% 77.5% Rating Questions (% 8, 9 or 10) Q49. Rating of Health Plan 83.7% 89.8% � Q9. Rating of Health Care 85.8% 88.5% Q36. Rating of Personal Doctor 90.6% 88.6% 87.0% 89.8% Q43. Rating of Specialist 84.4% Getting Needed Care (% Usually or Always) 86.0% Q10. Getting care, tests, or treatment 91.4% 89.0% ❖ Q41. Getting specialist appointment 80.5% 79.7% 89.0% 85.8% * Getting Care Quickly (% Usually or Always) Q4. Getting urgent care 93.3% 89.0% � Q6. Getting routine care 84.7% 82.5% **★** Q35. Coordination of Care 83.8% 83.4% **Customer Service + (% Usually or Always)** 89.4% 88.4% Q45. Provided information or help 84.7% 82.9% Q46. Treated with courtesy and respect 94.2% 93.8% How Well Doctors Communicate + (% Usually or Always) 95.2% 93.3% * Q27. Dr. explained things 95.9% 93.6% * 96.1% 95.2% Q28. Dr. listened carefully 96.2% Q29. Dr. showed respect 96.6% Q32. Dr. spent enough time 92.3% 88.1% ❖ Q48. Ease of Filling Out Forms + (% Usually or Always) 97.1% 95.7% .

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



Region 6: Dallas

- Arkansas
- New Mexico
- Texas
- Louisiana
- Oklahoma

Significance Testing

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



		2022 Plan	QC	2021 Quality Collidass				SPH	ZUZZ SPR DOUK OI BUSIIIESS													
		Score	%tile	5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th	%tile	5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
	Rating Questions (% 9 or 10)																					
*	Q49. Rating of Health Plan	68.9%	27 th	60.6	63.9	68.4	70.0	72.5	75.4	76.5	79.6	81.6	25 th	64.4	66.2	68.8	70.6	73.1	75.4	76.7	79.6	81.1
*	Q9. Rating of Health Care	67.6%	6 th	66.3	68.9	71.1	72.5	74.4	76.5	77.2	80.0	81.2	25 th	62.9	65.1	67.5	69.2	71.4	74.0	75.2	78.1	78.9
*	Q36. Rating of Personal Doctor	73.7%	12 th	71.6	72.8	75.6	76.6	78.2	79.9	80.4	82.9	83.9	15 th	69.9	72.4	74.9	75.7	77.3	78.9	80.2	83.3	84.3
*	Q43. Rating of Specialist	75.4%	56 th	68.3	69.2	71.2	72.3	74.1	76.0	76.1	77.5	80.9	59 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	83.7%	20 th	78.6	81.8	84.2	85.3	87.2	88.7	89.7	91.3	92.5	19 th	80.3	82.0	84.4	85.6	87.3	89.3	89.9	92.1	92.8
	Q9. Rating of Health Care	85.8%	14 th	84.1	85.3	87.3	87.8	88.8	90.1	90.8	92.6	93.7	27 th	81.5	82.8	85.6	86.4	87.9	89.1	90.0	91.5	92.7
	Q36. Rating of Personal Doctor	88.6%	22 nd	86.4	87.1	88.9	89.7	90.9	91.7	92.2	94.2	94.9	21 st	85.4	87.1	88.9	89.5	90.5	91.6	92.4	93.6	94.2
	Q43. Rating of Specialist	87.0%	50 th	80.7	82.7	85.4	86.0	86.8	88.9	90.3	91.1	93.6	40 th	78.6	81.2	84.8	86.2	88.3	89.6	90.5	92.9	94.4
*	Getting Needed Care (% U/A)	86.0%	55 th	78.3	79.4	82.7	84.3	85.7	88.0	89.0	90.9	92.3	65 th	74.8	76.5	80.6	82.1	84.4	86.4	87.6	90.2	92.1
	Q10. Getting care, tests, or treatment	91.4%	57 th	83.9	85.8	88.2	89.1	90.4	92.4	93.0	94.7	95.2	64 th	81.3	82.7	86.2	87.6	89.7	91.8	92.4	93.9	95.1
	Q41. Getting specialist appointment	80.5%	33 rd	72.7	75.2	79.0	80.4	82.7	84.5	85.4	88.4	89.5	57 th	64.9	70.0	74.2	75.0	79.1	82.6	84.3	88.2	89.1
*	Getting Care Quickly (% U/A)	89.0%	65 th	78.8	79.8	84.1	85.2	87.6	89.3	90.0	92.5	93.6	66 th	76.2	79.1	83.5	84.8	86.8	89.2	90.1	91.8	92.9
	Q4. Getting urgent care	93.3%	66 th	84.7	84.7	89.3	89.3	92.4	93.5	93.5	94.3	94.3	70 th	78.8	81.8	86.6	87.7	90.8	92.9	93.9	95.8	97.6
	Q6. Getting routine care	84.7%	58 th	72.9	75.8	79.3	81.1	83.4	85.6	86.4	89.1	91.0	58 th	71.2	75.1	78.8	81.0	83.7	85.7	87.3	89.4	90.6
*	Q35. Coordination of Care	83.8%	27 th	80.4	81.1	83.2	85.2	87.8	88.6	89.1	90.8	91.4	47 th	71.9	77.3	81.0	82.1	84.2	86.6	87.2	89.8	90.6
	Customer Service + (% U/A)	89.4%	60 th	83.5	84.7	86.5	86.9	88.0	90.1	90.4	92.3	93.0	59 th	81.7	82.9	85.9	86.8	88.3	90.3	91.1	93.2	95.0
	Q45. Provided information or help	84.7%	66 th	76.0	77.8	80.3	81.2	82.7	84.8	85.7	88.2	89.3	60 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	94.2%	46 th	89.4	90.5	92.2	92.6	94.5	95.3	95.6	97.1	97.5	54 th	86.6	88.9	92.0	92.7	93.9	95.5	96.3	98.1	100
	How Well Doctors Communicate + (% U/A)	95.2%	61 st	90.6	91.4	92.9	93.4	94.3	95.5	96.0	97.3	97.9	61 st	90.2	91.1	92.8	93.5	94.6	95.7	96.1	97.0	97.6
	Q27. Dr. explained things	95.9%	64 th	90.0	91.2	92.8	93.2	94.7	96.1	96.6	97.8	98.4	59 th	89.1	90.5	93.2	94.0	95.3	96.3	96.7	97.9	98.3
	Q28. Dr. listened carefully	96.1%	56 th	92.8	93.5	94.9	95.2	95.8	97.0	97.4	98.4	98.9	58 th	91.8	92.7	94.0	94.7	95.8	96.6	96.9	98.1	98.7
	Q29. Dr. showed respect	96.6%	41 st	93.9	94.7	95.8	96.1	96.9	97.6	98.1	98.9	99.3	47 th	93.2	94.0	95.6	95.9	96.8	97.4	98.0	98.9	99.3
	Q32. Dr. spent enough time	92.3%	67 th	83.0	84.8	87.8	88.5	90.2	92.2	93.0	95.3	96.5	64 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)	97.1%	75 th	93.0	93.9	95.0	95.3	96.1	96.7	97.1	98.0	98.4	73 rd	93.4	94.2	95.0	95.5	96.2	96.9	97.2	97.9	98.2



MEDICAID CHILD: CCC POPULATION

		2022 Plan	QC		2021 Quality Compass				SPH	2022 SPH DOOK OF DUSINESS												
		Score	%tile	5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th	%tile	5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
	Rating Questions (% 9 or 10)																					
*	Q49. Rating of Health Plan	64.0%	17 th	55.1	60.9	65.3	66.5	69.0	71.4	72.3	76.4	78.7	16 th	60.9	62.1	65.8	67.3	69.5	74.2	75.3	78.4	80.2
*	Q9. Rating of Health Care	64.1%	9 th	63.2	64.4	68.3	69.9	71.4	74.8	76.3	78.3	79.6	21 st	58.8	60.1	65.7	67.9	70.4	71.7	72.8	76.3	78.9
*	Q36. Rating of Personal Doctor	76.2%	32 nd	71.8	72.7	75.8	76.5	78.2	80.5	82.0	84.0	84.6	35 th	68.4	71.2	73.6	75.7	78.2	79.8	81.1	83.9	84.8
*	Q43. Rating of Specialist	72.7%	36 th	68.3	69.0	71.4	71.9	74.3	76.6	77.9	80.1	80.3	41 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	79.3%	10 th	75.3	78.8	81.9	82.8	84.5	86.4	86.7	88.5	88.8	9 th	77.4	79.7	82.9	83.5	85.2	87.0	87.7	89.8	90.7
	Q9. Rating of Health Care	83.0%	<5 th	83.1	83.7	86.1	86.6	87.6	89.3	90.2	91.0	92.5	17 th	80.4	81.4	84.1	85.7	86.7	88.0	88.6	90.7	92.6
	Q36. Rating of Personal Doctor	90.0%	49 th	84.0	85.2	87.9	88.4	90.1	90.8	91.5	93.0	94.1	59 th	85.8	86.6	87.7	88.1	89.3	90.8	91.7	94.1	94.2
	Q43. Rating of Specialist	83.5%	6 th	82.9	83.7	85.7	86.8	87.7	89.1	89.6	90.8	91.4	14 th	79.8	82.2	85.0	85.5	87.1	88.4	89.1	90.9	92.6
*	Getting Needed Care (% U/A)	85.1%	24 th	80.7	81.4	86.0	86.4	88.3	89.4	90.4	91.7	92.1	26 th	79.8	81.6	85.0	86.2	89.0	90.3	90.6	91.8	92.8
	Q10. Getting care, tests, or treatment	88.4%	25 th	84.6	86.6	88.3	89.6	91.4	92.4	93.2	94.1	94.6	19 th	82.4	84.7	89.2	90.1	91.7	92.4	93.1	94.6	95.8
	Q41. Getting specialist appointment	81.8%	18 th	76.3	81.2	82.5	83.0	85.1	87.4	88.0	90.0	91.5	25 th	74.9	77.2	81.4	84.1	86.3	87.8	88.4	89.9	90.4
*	Getting Care Quickly (% U/A)	90.5%	40 th	85.2	87.2	89.8	90.2	91.0	91.8	92.6	93.9	95.2	45 th	83.7	85.8	89.2	89.7	91.1	92.4	93.0	94.4	95.5
	Q4. Getting urgent care	93.0%	33 rd	90.7	91.1	92.2	92.6	94.6	95.5	97.0	97.4	97.9	43 rd	84.5	86.5	90.6	91.7	93.4	94.7	95.2	97.3	98.7
	Q6. Getting routine care	88.0%	49 th	82.5	83.9	85.4	86.7	88.4	89.5	90.0	92.5	94.3	41 st	82.2	83.8	86.5	87.3	89.2	90.5	91.4	93.0	93.4
*	Q35. Coordination of Care	81.6%	17 th	80.2	80.7	82.8	84.1	85.1	86.8	87.9	89.7	90.0	29 th	73.9	75.0	79.5	81.8	84.6	86.0	86.5	88.5	89.0
	Customer Service + (% U/A)	85.2%	6 th	84.7	86.8	89.7	89.9	90.7	93.0	94.1	94.2	96.2	9 th	84.0	85.3	86.8	87.2	89.1	91.9	92.5	94.1	94.5
	Q45. Provided information or help	75.9%	<5 th	76.6	83.0	83.3	83.7	87.6	90.4	90.5	91.2	94.3	<5 th	77.0	77.6	79.5	80.5	84.0	86.9	87.9	90.7	92.5
	Q46. Treated with courtesy and respect	94.4%	20 th	90.6	92.7	94.7	95.1	96.1	97.1	97.1	97.9	98.1	41 st	89.5	91.7	93.0	93.3	95.1	96.2	96.9	98.4	100
	How Well Doctors Communicate + (% U/A)	95.3%	57 th	90.6	91.8	93.3	93.9	94.9	95.6	95.9	97.0	97.6	51 st	91.4	92.2	93.8	94.3	95.2	96.0	96.2	97.1	97.8
	Q27. Dr. explained things	95.8%	53 rd	90.2	91.5	93.8	94.7	95.7	96.5	96.7	97.4	98.2	50 th	92.2	92.6	94.4	94.9	95.8	96.6	97.0	98.2	98.8
	Q28. Dr. listened carefully	96.2%	60 th	92.5	92.9	94.5	95.3	95.9	96.4	96.8	98.0	98.3	61 st	92.3	92.9	94.4	95.1	95.6	96.6	97.0	97.7	98.3
	Q29. Dr. showed respect	96.2%	34 th	94.3	95.0	95.7	96.1	96.9	97.4	97.8	98.4	98.8	38 th	94.3	94.5	95.8	96.1	96.8	97.4	97.6	98.8	98.9
	Q32. Dr. spent enough time	92.8%	69 th	84.6	85.6	88.3	89.5	91.5	92.7	93.9	95.7	96.4	49 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)	97.0%	80 th	92.0	93.1	94.5	95.0	95.9	96.5	96.8	97.5	97.9	74 th	93.2	94.0	95.0	95.3	96.0	96.6	97.1	97.8	98.3



MEDICAID CHILD: CCC POPULATION

	2022 Plan	QC	70/1 Guality Compass									SPH						Percentiles from Book of Business			
	Score	%tile	5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th	%tile	5 th	10 th	25 th	33 rd	50 th	67 th	75 th	90 th	95 th
Q51. Access to Rx Medicines (% U/A)	91.8%	52 nd	86.8	87.8	89.7	90.4	91.8	92.6	93.0	94.8	95.8	54 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)	67.9%	14 th	64.1	66.0	72.2	72.2	73.7	74.7	77.9	82.5	83.2	13 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	70.6%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	44 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	61.5%	<5 th	66.0	70.3	72.1	72.4	75.1	77.6	78.0	79.1	82.6	9 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	71.4%	32 nd	64.4	65.5	69.7	71.7	75.9	77.3	78.2	81.7	82.9	36 th	61.7	64.2	67.4	69.9	75.5	77.7	78.4	81.6	85.5
FCC: Dr Who Knows Child (% Yes)	91.4%	67 th	86.4	87.6	89.8	90.5	91.0	91.3	92.4	94.2	94.4	40 th	88.5	88.9	90.2	91.0	91.7	92.3	92.8	93.4	93.8
Q33. Discussed feelings/growth/behavior	91.6%	70 th	84.4	85.7	88.3	89.0	90.4	91.6	92.0	93.7	95.1	69 th	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	94.1%	68 th	88.4	89.9	91.5	91.8	93.0	94.0	94.5	95.7	96.6	55 th	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	88.6%	28 th	85.3	85.7	88.0	89.0	90.2	91.5	91.8	93.8	94.9	21 st	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)	90.3%	39 th	85.8	87.9	89.3	89.6	91.0	91.8	92.6	93.7	96.0	16 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)	70.8%	7 th	69.3	72.0	75.6	76.6	78.1	78.9	78.9	81.2	81.4	5 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	80.0%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	<5 th	81.2	85.0	90.0	90.9	93.3	95.3	96.4	100	100
Q24. Helped coordinate child's care	61.6%	53 rd	49.4	50.4	56.4	56.6	60.9	64.5	64.9	67.4	69.1	55 th	51.3	53.2	56.9	57.8	60.5	63.1	65.4	69.6	72.3



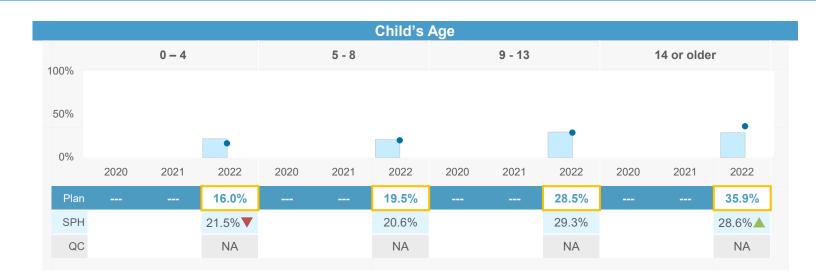
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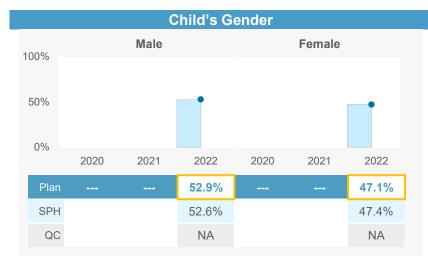
Oklahoma Health Care Authority

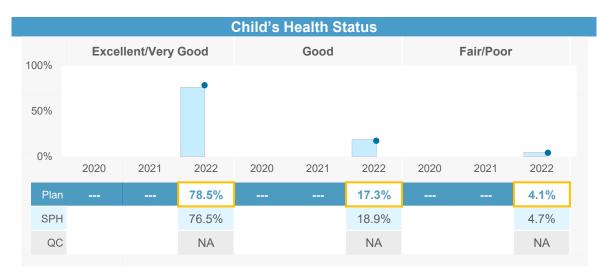
PREPARED FOR THE OKLAHOMA HEALTH CARE AUTHORITY THROUGH A CONTRACT WITH KFMC HEALTH IMPROVEMENT PARTNERS

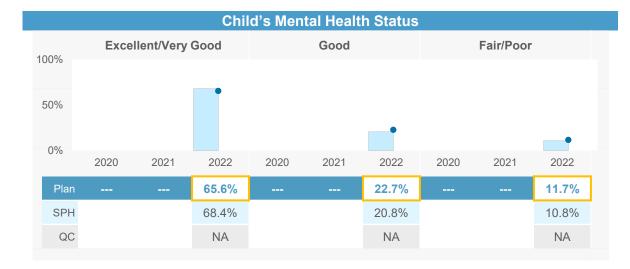


MEDICAID CHILD: GENERAL POPULATION









More info. 1

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.

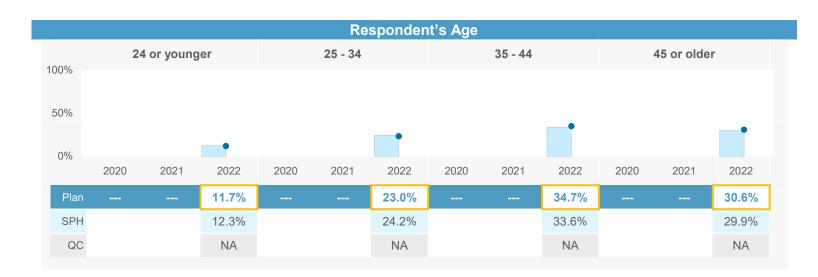




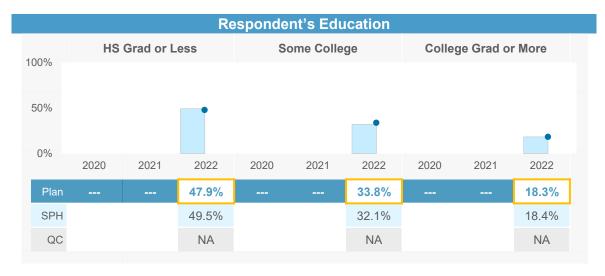
Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/♣), the 2020 score (↑/♣) or benchmark score (▲/▼).

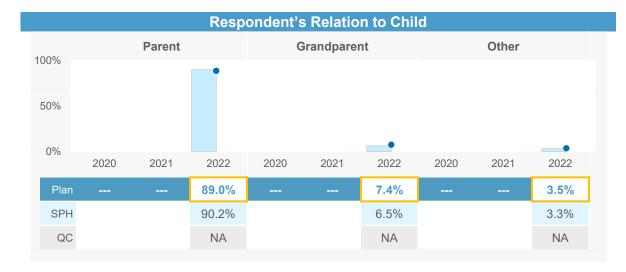
Benchmarks: SPH refers to the 2022 SPH Book of Business benchmark. QC refers to the 2021 QC National Data benchmark. NCQA did not publish demographics for the 2021 benchmark.

MEDICAID CHILD: GENERAL POPULATION









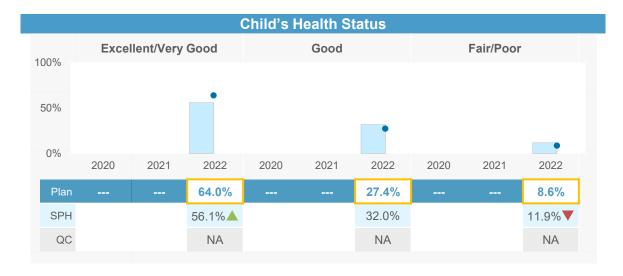
Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/♣), the 2020 score (‡/♣) or benchmark score (▲/▼).

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.

PROFILE OF SURVEY RESPONDENTS MEDICAID CHILD: CCC POPULATION









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.



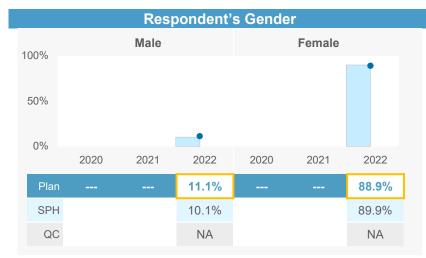


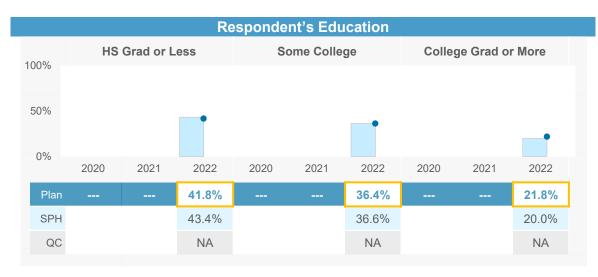
Significance Testing: Current score is significantly higher/lower than the 2021 score (↑/♣), the 2020 score (‡/♣) or benchmark score (▲/▼).

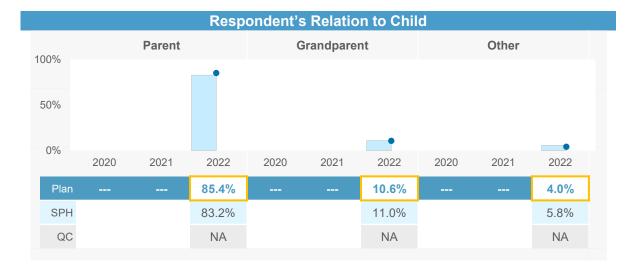
Benchmarks: SPH refers to the 2022 SPH Book of Business benchmark. QC refers to the 2021 QC National Data benchmark. NCQA did not publish demographics for the 2021 benchmark.

MEDICAID CHILD: CCC POPULATION









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

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



SUPPLEMENTAL QUESTIONS

Oklahoma Health Care Authority

PREPARED FOR THE OKLAHOMA HEALTH CARE AUTHORITY THROUGH A CONTRACT WITH KFMC HEALTH IMPROVEMENT PARTNERS



		Category Responses Based on Valid Responses Per Question					Summary Rate Score			
							2021	2022	SPH BoB	
Q77. Dr. used medical words not understood (% Never or Sometimes)	Valid I	Responses	s = 852							
Opt Out: My child does not have a personal doctor 45	Alw	<u>vays</u>	<u>Usually</u>	Sometimes	Never			(n=852)		
	1.8	8%	2.0%	29.7%	66.5%			96.2%		
Q78. Got wanted info. about health from Dr. (% Always or Usually)	Valid I	Responses	s = 749							
Opt Out: Not Applicable 68	Alw	<u>vays</u>	<u>Usually</u>	Sometimes	Never			(n=749)		
	78	.9%	13.9%	4.7%	2.5%			92.8%		
Q79. Got easy to understand info. (% Always or Usually)	Valid I	Responses	s = 797							
	Alw	<u>vays</u>	<u>Usually</u>	Sometimes	<u>Never</u>			(n=797)		
	73	.5%	16.7%	5.5%	4.3%			90.2%		
Q80. Provider discussed starting or stopping a prescription medicine (% Yes)	Valid I	Responses	s = 785							
Opt Out: My child did not visit a doctor or other health provider in the last 6 months 109	Y	<u>es</u>	No					(n=785)		
	25	.4%	74.6%					25.4%		

	Category Responses Based on Valid Responses Per Question					Summary Rate Score			
						2021	2022	SPH BoB	
Q81. Got wanted info. from pharmacist (% Always or Usually)	Valid Respon	nses = 847							
	Always	<u>Usually</u>	Sometimes	Never			(n=847)		
	61.2%	13.7%	7.3%	17.8%			74.9%		
Q82. Knew I could make a complaint to health plan (% Yes)	Valid Respon	nses = 879							
	<u>Yes</u>	<u>No</u>					(n=879)		
	55.6%	44.4%					55.6%		
Q83. Easy to find/understand info. on website (% Very or Somewhat easy)	Valid Respon	nses = 505							
Opt Out: I have not visited my child's health plan's website 383	Very easy	Somewhat easy	Somewhat hard	Very hard			(n=505)		
	38.4%	44.8%	12.7%	4.2%			83.2%		
Q84. Child currently has an IEP (Individual Education Program) (% Yes)	Valid Respon	nses = 778							
Opt Out: Don't know 111	<u>Yes</u>	<u>No</u>					(n=778)		
	24.7%	75.3%					24.7%		



			Category Re	esponses	Sui	Summary Rate Score			
		Bas	ed on Valid Respo	onses Per Question	2020	2021	2022	SPH BoB	
Q77. Dr. used medical words not understood (% Never or Sometimes)	Valid Respon	ses = 321							
Opt Out: My child does not have a personal doctor 10	Always	<u>Usually</u>	Sometimes	Never			(n=321)		
	2.2%	2.2%	32.7%	62.9%			95.6%		
Q78. Got wanted info. about health from Dr. (% Always or Usually)	Valid Respon	Valid Responses = 302							
Opt Out: Not Applicable 16	<u>Always</u>	<u>Usually</u>	Sometimes	Never			(n=302)		
	79.8%	14.6%	5.3%	0.3%			94.4%		
Q79. Got easy to understand info. (% Always or Usually)	Valid Respon	ses = 313							
	<u>Always</u>	<u>Usually</u>	Sometimes	Never			(n=313)		
	72.2%	18.8%	7.0%	1.9%			91.1%		
Q80. Provider discussed starting or stopping a prescription medicine (% Yes)	Valid Respon	ses = 322							
Opt Out: My child did not visit a doctor or other health provider in the last 6 months 9	<u>Yes</u>	No					(n=322)		
	46.3%	53.7%					46.3%		

			Category R	Responses	Sui	Summary Rate Score			
	Based on Valid Responses Per Question					2021	2022	SPH BoB	
Q81. Got wanted info. from pharmacist (% Always or Usually)	Valid Respon	ses = 324							
	<u>Always</u>	<u>Usually</u>	Sometimes	<u>Never</u>			(n=324)		
	66.4%	15.4%	7.7%	10.5%			81.8%		
Q82. Knew I could make a complaint to health plan (% Yes)	Valid Respon	ses = 328							
	<u>Yes</u>	<u>No</u>					(n=328)		
	57.3%	42.7%					57.3%		
Q83. Easy to find/understand info. on website (% Very or Somewhat easy)	Valid Respon	ses = 176							
Opt Out: I have not visited my child's health plan's website 153	Very easy	Somewhat easy	Somewhat hard	Very hard			(n=176)		
	34.1%	44.3%	15.3%	6.3%			78.4%		
Q84. Child currently has an IEP (Individual Education Program) (% Yes)	Valid Respon	rses = 304							
Opt Out: Don't know 27	<u>Yes</u>	<u>No</u>					(n=304)		
	42.8%	57.2%					42.8%		



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	0.6425							
Q49	Health plan overall	0.5325							
Q10	Got care/tests/treatment	0.5107							
Q43	Specialist overall	0.5028							
Q4	Got urgent care	0.4652							
Q28	Dr. listened carefully	0.4514							
Q29	Dr. showed respect	0.4264							
Q35	Dr. informed about care	0.4209							
Q78	Got wanted info. about health from Dr.	0.4155							
Q27	Dr. explained things	0.4134							

	With Personal Doctor Rating	3
Q9	Health care overall	0.6425
Q29	Dr. showed respect	0.5531
Q28	Dr. listened carefully	0.5279
Q35	Dr. informed about care	0.4945
Q32	Dr. spent enough time	0.4898
Q31	Dr. explained things for child	0.4587
Q27	Dr. explained things	0.4471
Q79	Got easy to understand info.	0.3982
Q49	Health plan overall	0.3981
Q10	Got care/tests/treatment	0.3891

With Specialist Rating										
Q9	Health care overall	0.5028								
Q41	Got specialist appt.	0.4480								
Q35	Dr. informed about care	0.4114								
Q36	Personal doctor overall	0.3588								
Q10	Got care/tests/treatment	0.3302								
Q49	Health plan overall	0.3067								
Q46	CS courtesy/respect	0.2742								
Q78	Got wanted info. about health from Dr.	0.2683								
Q31	Dr. explained things for child	0.2556								
Q79	Got easy to understand info.	0.2492								



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:

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 Oklahoma Health Care Authority. Is that right?

Yes

If Yes, Go to Question 3

What is the name of your child's health plan? 2. (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 de

denta	al care visits.
3.	In the last 6 months, did your child have an illness, injury, or condition that <u>needed care right away</u> ?
	YesNo → If No, Go to Question 5
4.	In the last 6 months, when your child <u>needed</u> <u>care right away</u> , how often did your child get care as soon as he or she needed?
	NeverSometimesUsuallyAlways
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?
	YesNo → If No, Go to Question 7
6.	In the last 6 months, how often did you get an appointment for a <u>check-up or routine care</u> for your child as soon as your child needed?
	NeverSometimesUsuallyAlways
7.	In the last 6 months, <u>not</u> 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	14.	Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment.
	Sometimes Usually Always		In the last 6 months, did you get or try to get any special medical equipment or devices for your child?
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?		YesNo → If No, Go to Question 17
			In the last 6 months, how often was it easy to get special medical equipment or devices for your child?
	□ 0 Worst health care possible□ 1□ 2□ 3		NeverSometimesUsuallyAlways
	☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8		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
10.	910 Best health care possibleIn the last 6 months, how often was it easy		In the last 6 months, did you get or try to get special therapy such as physical, occupational, or speech therapy for your child?
	to get the care, tests, or treatment your child needed?		☐ Yes ☐ No → If No, Go to Question 20
			In the last 6 months, how often was it easy to get this therapy for your child?
11.	Always Is your child now enrolled in any kind of school or daycare?		 □ Never □ Sometimes □ Usually
	Yes	40	Always
12.	No → If No, Go to Question 14In the last 6 months, did you need your		Did anyone from your child's health plan, doctor's office, or clinic help you get this therapy for your child?
	child's doctors or other health providers to contact a school or daycare center about your child's health or health care?		Yes No
13.	☐ Yes ☐ No → If No, Go to Question 14 In the last 6 months, did you get the help you		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?
	needed from your child's doctors or other health providers in contacting your child's school or daycare?		☐ Yes ☐ No → If No, Go to Question 23
	☐ Yes ☐ No		

21.	In the last 6 months, how often was it easy to get this treatment or counseling for your child?	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?
22	 Never Sometimes Usually Always Did anyone from your child's health plan, 	Never Sometimes Usually Always
22.	doctor's office, or clinic help you get this treatment or counseling for your child?	28. In the last 6 months, how often did your child's personal doctor listen carefully to you?
	☐ Yes ☐ No	Never
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	Sometimes Usually Always
	care service? ☐ Yes ☐ No → If No, Go to Question 25	29. In the last 6 months, how often did your child's personal doctor show respect for what you had to say?
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?	NeverSometimesUsuallyAlways
	☐ Yes ☐ No	30. Is <u>your child</u> able to talk with doctors about his or her health care?
	OUR CHILD'S PERSONAL DOCTOR A personal doctor is the one your child would	☐ Yes ☐ No → If No, Go to Question 32
		 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
	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 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?
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?	 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
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 In the last 6 months, how many times did your child have an in person, phone, or video visit	 No → If No, Go to Question 32 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
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 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	 No → If No, Go to Question 32 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 In the last 6 months, how often did your child's personal doctor spend enough time
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 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	 No → If No, Go to Question 32 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?

34.	In the last 6 months, did your child get care from a doctor or other health provider	GETTING HEALTH CARE FROM SPECIALISTS
	besides his or her personal doctor?	When you answer the next questions, include the care your child got in person, by phone, or by video. Do not
	Yes	include dental visits or care your child got when he or
	☐ No → If No, Go to Question 36	she stayed overnight in a hospital.
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	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
	Sometimes	specialist?
	Usually	☐ Yes☐ No → If No, Go to Question 44
	Always	41. In the last 6 months, how often did you get
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	appointments for your child with a specialist as soon as he or she needed?
	would you use to rate your child's personal	Never
	doctor?	Sometimes
	0 Worst personal doctor possible	☐ Usually ☐ Always
		42. How many specialists has your child talked to
	3	in the last 6 months?
	<u> </u>	☐ None → If None, Go to Question 44
	5	1 specialist
	 6	☐ 2 ☐ 3
	□ <i>'</i>	
	9	5 or more specialists
	10 Best personal doctor possible	43. We want to know your rating of the specialist
37.	Does your child have any medical, behavioral, or other health conditions that have lasted for more than <u>3 months</u> ?	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
	Yes	number would you use to rate that specialist?
00	No → If No, Go to Question 40	0 Worst specialist possible
38.	Does your child's personal doctor understand how these medical, behavioral, or other health conditions affect your child's day-to-day life?	
		☐ 2 ☐ 3
	Yes	☐ 4 ☐ 5
	No	
39.	Does your child's personal doctor understand how your child's medical, behavioral, or other	7
	health conditions affect your family's day-to-	□ 8
	day life?	9 10 Post specialist possible
	☐ Yes ☐ No	10 Best specialist possible
	LI NO	

YOUR CHILD'S HEALTH PLAN	PRESCRIPTION MEDICINES
The next questions ask about your experience with your child's health plan.	50. In the last 6 months, did you get or refill any prescription medicines for your child?
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 53
☐ Yes ☐ No → If No, Go to Question 47	51. In the last 6 months, how often was it easy to get prescription medicines for your child through his or her health plan?
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
NeverSometimesUsuallyAlways	Always 52. Did anyone from your child's health plan, doctor's office, or clinic help you get your child's prescription medicines?
46. In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect?	Yes No
NeverSometimesUsuallyAlways	ABOUT YOUR CHILD AND YOU In general, how would you rate your child's overall health? Excellent
47. In the last 6 months, did your child's health plan give you any forms to fill out? Yes	☐ Very Good ☐ Good ☐ Fair
No → If No, Go to Question 49 48. In the last 6 months, how often were the	Poor 54. In general, how would you rate your child's overall mental or emotional health?
forms from your child's health plan easy to fill out?	Excellent
NeverSometimesUsually	│ Very Good │ Good │ Fair │ Poor
 Always 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 	55. Does your child currently need or use medicine prescribed by a doctor (other than vitamins)?
use to rate your child's health plan?	☐ Yes ☐ No → If No, Go to Question 58
□ 0 Worst health plan possible□ 1□ 2	56. Is this because of any medical, behavioral, or other health condition?
□ 3 □ 4	☐ Yes ☐ No → If No, Go to Question 58
□ 5 □ 6	57. Is this a condition that has lasted or is expected to last for at least 12 months?
☐ 7 ☐ 8 ☐ 9	☐ Yes ☐ No
10 Best health plan possible	

58.	Does your child need or use more medical care, more mental health services, or more	68. Has this problem lasted or is it expected to last for at least 12 months?
	educational services than is usual for most children of the same age?	☐ Yes ☐ No
	Yes	69. What is your child's age?
5 0	No → If No, Go to Question 61	Less than 1 year old
59.	Is this because of any medical, behavioral, or other health condition?	YEARS OLD (write in)
	YesNo → If No, Go to Question 61	70. Is your child male or female? Male
60.	Is this a condition that has lasted or is expected to last for at least 12 months?	Female
	☐ Yes ☐ No	71. Is your child of Hispanic or Latino origin or descent?
61.	Is your child limited or prevented in any way in his or her ability to do the things most	Yes, Hispanic or LatinoNo, not Hispanic or Latino
	children of the same age can do?	72. What is your child's race? Mark one or more.
	YesNo → If No, Go to Question 64	☐ White ☐ Black or African-American
62.	Is this because of any medical, behavioral, or other health condition?	☐ Asian☐ Native Hawaiian or other Pacific Islander
	☐ Yes ☐ No → If No, Go to Question 64	☐ American Indian or Alaska Native☐ Other
63.	Is this a condition that has lasted or is expected to last for at least 12 months?	73. What is <u>your</u> age? Under 18
	☐ Yes ☐ No	☐ 18 to 24 ☐ 25 to 34
64.	Does your child need or get special therapy such as physical, occupational, or speech therapy?	☐ 35 to 44 ☐ 45 to 54 ☐ 55 to 64
	YesNo → If No, Go to Question 67	☐ 65 to 74 ☐ 75 or older
65	Is this because of any medical, behavioral, or	74. Are you male or female?
00.	other health condition?	☐ Male
	☐ Yes ☐ No → If No, Go to Question 67	Female75. What is the highest grade or level of school
66.	Is this a condition that has lasted or is expected to last for at least 12 months?	that you have completed? 8th grade or less
	☐ Yes ☐ No	Some high school, but did not graduate High school graduate or GED
67.	Does your child have any kind of emotional, developmental, or behavioral problem for which he or she needs or gets treatment or counseling?	Some college or 2-year degree 4-year college graduate More than 4-year college degree
	YesNo → If No, Go to Question 69	

76. H	How are you related to the child? Mother or father Grandparent	81.	In the last 6 months, how often did your child's pharmacist give you the information or help you need?
	Aunt or uncle Older brother or sister Other relative Legal guardian		NeverSometimesUsuallyAlways
	Someone else DITIONAL QUESTIONS we would like to ask a few more questions about	82.	Did you know you could make a complaint to your child's health plan about the care or services your child received or decisions your child's health plan made?
	How often did your child's personal doctor		☐ Yes ☐ No
	use medical words you did not understand? ☐ Never ☐ Sometimes	83.	How easy was it to find and understand information using your child's health plan's website?
	 Usually Always My child does not have a personal doctor → Go to Question 80 		☐ Very easy☐ Somewhat easy☐ Somewhat hard☐ Very hard
78.	In the last 6 months, how often did your child's personal doctor give you all the information you wanted about your child's health?	84.	I have not visited my child's health plan's websiteDoes your child currently have an individual
	Never Sometimes Usually Always Not Applicable		education program (IEP)? Yes Don't Know
	In the last 6 months, how often did your child's personal doctor give you easy to understand information about any health questions or concerns about your child?		Thank You Please return the completed survey in the postage-paid envelope or send to: SPH Analytics • P.O. Box 985009
	NeverSometimesUsuallyAlways		Ft. Worth, TX 76185-5009 If you have any questions, please call 1-888-797-3605.
	In the last 6 months, did you and your child's doctor or other health provider talk about starting or stopping a prescription medication for your child?		
	YesNoMy child did not visit a doctor or other health provider in the last 6 months		

IMPACT ANALYTICS

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



IMPROVE MEMBER EXPERIENCE AND ENGAGEMENT WITH DESCRIPTIVE AND PREDICTIVE ANALYTICS



EXPLORE

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



PREDICT

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



DISCOVER

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



OUTREACH

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





STRATEGIC CONSULTING WITH BENCHMARK-DRIVEN INSIGHTS

Strategic Consulting

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

Target efforts to improve member acquisition, engagement, and retention

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

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

Improve the member experience with a data-driven approach

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



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



