## **¬PressGaney**

# MY 2023 CAHPS® MEDICAID ADULT 5.1 SURVEY

## SOONERCARE MEDICAID ADULT

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

#### SOONERCARE MEDICAID ADULT

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

## 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

## **OVERVIEW**

Press Ganey (PG), 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 Medicaid Adult to conduct its MY 2023 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.

**2024 NCQA CHANGES** NCQA made changes to the survey or program for 2024.

One question will be deleted from the 2024 Commercial Adult Survey and the 2024 Medicaid Adult Survey:

Have you had either a flu shot or flu spray in the nose since July 1, 20XX?

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

## **METHODOLOGY**

#### **DATA COLLECTION**

The MY 2023 Medicaid Adult version of the 5.1 CAHPS survey was administered via the following methodology:

First questionnaire mailed 2/16/2024

Reminder Call **2/23/2024**  Second questionnaire mailed 3/22/2024

Initiate follow-up calls to non-responders 4/12/2024 - 4/26/2024

Last day to accept completed surveys 5/22/2024

#### **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

#### **2024 RESPONSE RATE CALCULATION**

 $\frac{370 \text{ (Completed)}}{2500 \text{ (Sample)} - 58 \text{ (Ineligible)}} = \frac{370}{2442} = 15.2\%$ 

COMP	LETES -	· MODALIT	Y BY L	ANGUAGE

Languaga	Meil	Dhone	Phone Internet QR (	Int	Total		
Language	Mail	Phone		QR Code	Email	URL	Total
English	206	95	67	35	0	32	368
Spanish	1	0	1	0	0	1	2
Total	207	95	68	35	0	33	370

Total Number of Undeliverables: 249

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

		2022	2023	2024
Completed	SUBTOTAL	248	361	370
	Does not Meet Eligibility Criteria (01)	31	27	32
	Does not Meet Eligibility Criteria (01)   31	4	0	
Ineligible	Mentally/Physically Incapacitated (04)	9	7	19
	Deceased (05)	6	2	7
	SUBTOTAL	50	40	58
	Break-off/Incomplete (02)	11	15	29
	Refusal (06)	44	28	31
	Maximum Attempts Made (07)	1605	2056	2012
	Does not Meet Eligibility Criteria (01)  Language Barrier (03)  Mentally/Physically Incapacitated (04)  Deceased (05)  SUBTOTAL  Break-off/Incomplete (02)  Refusal (06)  Maximum Attempts Made (07)  Added to DNC List (08)  SUBTOTAL  Total Sample  Oversampling %  Response Rate	0	0	0
	SUBTOTAL	1660	2099	2072
	Total Sample	1958	2500	2500
	Oversampling %	45.0%	85.2%	85.2%
	Response Rate	13.0%	14.7%	15.2%
	PG Response Rate	12.2%	11.5%	11.1%

# **INDUSTRY TRENDS**

SoonerCare Medicaid Adult

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

## PG BOOK OF BUSINESS TRENDS

MEDICAID ADULT

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

**Medicaid Adult:** Among the Medicaid Adult population, no measures declined by more than 1% compared to 2023. Rating of Personal Doctor (%9 or 10) and Rating of Specialist (%9 or 10) have increased by more than 1%.

All scores have decreased overall since 2020. Rating of Health Care Quality and Getting Care Quickly are the largest decrease of at least 2% lower than the 2020 scores.

	PG Book of Business Trends							
	2020	2021	2022	2023	2024			
Rating Questions (% 9 or 10)								
Q28. Rating of Health Plan	64.6%	64.5%	64.0%	63.6%	63.1%			
Q8. Rating of Health Care	58.8%	59.4%	57.0%	56.8%	57.3%			
Q18. Rating of Personal Doctor	70.7%	70.4%	69.5%	69.2%	70.3%			
Q22. Rating of Specialist	70.9%	69.7%	68.4%	67.4%	68.5%			
Rating Questions (% 8, 9 or 10)								
Q28. Rating of Health Plan	80.3%	79.8%	79.6%	79.3%	78.7%			
Q8. Rating of Health Care	76.9%	77.5%	75.8%	75.4%	75.8%			
Q18. Rating of Personal Doctor	84.2%	83.8%	83.1%	83.2%	83.9%			
Q22. Rating of Specialist	84.7%	83.9%	82.7%	82.3%	82.7%			
Getting Needed Care (% A/U)	83.5%	84.1%	82.3%	82.0%	82.1%			
Q9. Getting care, tests, or treatment	86.3%	85.8%	85.0%	84.8%	85.1%			
Q20. Getting specialist appointment	80.7%	82.4%	79.6%	79.1%	79.1%			
Getting Care Quickly (% A/U)	82.7%	82.6%	80.9%	81.5%	81.2%			
Q4. Getting urgent care	85.0%	84.3%	81.7%	82.7%	82.7%			
Q6. Getting routine care	80.4%	80.9%	80.0%	80.4%	79.7%			
Coordination of Care (Q17) (% A/U)	85.9%	84.8%	85.0%	85.6%	86.0%			
Flu Vaccine: Adults 18-64 (QMISSING) (% Y)	77.8%	74.0%	74.1%	74.3%	73.7%			

## **EXECUTIVE SUMMARY**

SoonerCare Medicaid Adult

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

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

## **OVERVIEW OF TERMS**

**Summary Rates (SRS)** are defined by NCQA in its HEDIS MY 2023 CAHPS® 5.1H guidelines and generally represent the most favorable response percentages.

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

**PG Benchmark Information** The source for data contained within the PG Book of Business is all submitting plans that contracted with PG for MY 2023. Submission occurred on May 24<sup>th</sup>, 2024.

**NCQA Benchmark Information** The source for data contained in this publication is Quality Compass® All Plans 2023. It is used with the permission of NCQA. Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass® is a registered trademark of NCQA.

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

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

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

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

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

## 2024 DASHBOARD

Other Measures

MEDICAID ADULT



370

Completed surveys

15.2%

Response Rate

**Stars:** PG **Estimated** NCQA Rating

NA = Denominator < 100

**Scores**: All scores displayed are Summary Rate Scores

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

Significance Testing: Current score is significantly higher/lower than 2023 (↑/↓) or 2022 (‡/‡).

**Percentiles**: Based on the 2024 PG Book of Business

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

		Rating of Health Plan	***		
	Rating of Health Plan		60.1% ‡	30 <sup>th</sup>	
se.					
asur		Rating of Health Care	**		
Mex	Rating of Health Care		54.7%	28 <sup>th</sup>	Opportunity
Accreditation Measures			A A A		
lita	R	ating of Personal Docto	or 🗮 🗮 🔭		
ē	Rating of Personal Doo	ctor	68.9%	39 <sup>th</sup>	Opportunity
U l			00.9%	33	Opportunity
Acc	A	dvised to Quit Smoking			Оррогини
Acc	Advised to Quit Smoki	dvised to Quit Smoking			

Getting Needed Care	**	*		
Composite	83.9%		64 <sup>th</sup>	
Q9. Getting care, tests, or treatment	85.7%		53 <sup>rd</sup>	Power
Q20. Getting specialist appointment	82.1%	<b>±</b>	67 <sup>th</sup>	Retain
Getting Care Quickly	**1	<b>†</b>		
Getting Care Quickly Composite	84.5%	**	81 <sup>st</sup>	
		**	81 <sup>st</sup>	 Power

Rating of Specialist +									
Rating of Specialist +	71.5%	73 <sup>rd</sup>	Power						
Coordination of Care +									
Coordination of Care +	87.9%	62 <sup>nd</sup>	Retain						
Customer S	Service +								
Composite	88.9%	35 <sup>th</sup>							
Q24. Provided information or help	83.6%	36 <sup>th</sup>	Wait						
Q25. Treated with courtesy and respect	94.3%	37 <sup>th</sup>	Wait						

Ease of Filling Out Forms +	95.4%		57 <sup>th</sup>	Retain						
How Well Doctors Communicate +										
Composite	94.5%		74 <sup>th</sup>							
Q12. Dr. explained things	94.3%		64 <sup>th</sup>	Retain						
Q13. Dr. listened carefully	94.3%		68 <sup>th</sup>	Power						
Q14. Dr. showed respect	95.5%		58 <sup>th</sup>	Retain						
Q15. Dr. spent enough time	93.9%	1	82 <sup>nd</sup>	Retain						

Ease of Filling Out Forms +

## ESTIMATED NCQA HEALTH INSURANCE PLAN RATINGS

MEDICAID ADULT

	SCORE DEFINITION	2024 BASE	2024 HPR SCORE*	HPR 4 STAR THRESHOLD	HPR PERCENTILE BAND	PG ESTIMATED RATING
PATIENT EXPERIENCE						3
GETTING CARE						3.5
Getting Needed Care	Usually or Always	226	83.8%	84.6%	33 <sup>rd</sup>	3
Getting Care Quickly	Usually or Always	179	84.4%	83.8%	67 <sup>th</sup>	4
SATISFACTION WITH PLAN	I PHYSICIANS					3
Rating of Personal Doctor	9 or 10	318	68.8%	71.1%	33 <sup>rd</sup>	3
SATISFACTION WITH PLAN	AND PLAN SERVIC	CES				3
Rating of Health Plan	9 or 10	348	60.0%	64.9%	33 <sup>rd</sup>	3
Rating of Health Care	9 or 10	254	54.7%	58.7%	33 <sup>rd</sup>	3
TREATMENT						
Smoking Advice: Rolling Average	Sometimes, Usually or Always	245	70.2%	75.4%	10 <sup>th</sup>	2

## \*HPR scores are truncated to three digits (XX.X%) according to the NCQA calculation protocol for Health Plan Ratings. Please note that scores on this slide

may differ slightly compared to scores found throughout the rest of the report.

#### **EXPLANATION**

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

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

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

Results are summarized in the table to the left. **Percentiles** and ratings are estimated by PG based on the 2023 NCQA data and benchmarks.

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

#### Notes:

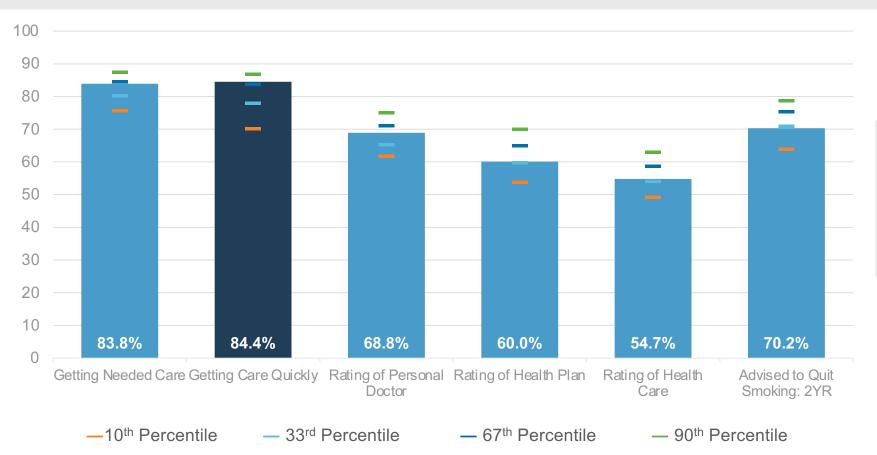
- NCQA will assign a measure result of NA to overall ratings or composites with a denominator (i.e., the average number of responses across all questions used to calculate the composite) less than 100.
- Medicaid plans have the option to be scored on either Adult CAHPS or Child CAHPS data.

### PERFORMANCE TO STAR CUT POINTS

MEDICAID ADULT

#### **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 2023).



**Dark Blue** bar = Your plan's performance is at or above the 67<sup>th</sup> percentile

**Light Blue** bar = Your plan's performance is below the 67<sup>th</sup> 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.

<sup>\*</sup> Scores are % 9 or 10, % Always or Usually, and % Always, Usually or Sometimes (Smoking Advice: Rolling Average).

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

## MEASURE SUMMARY

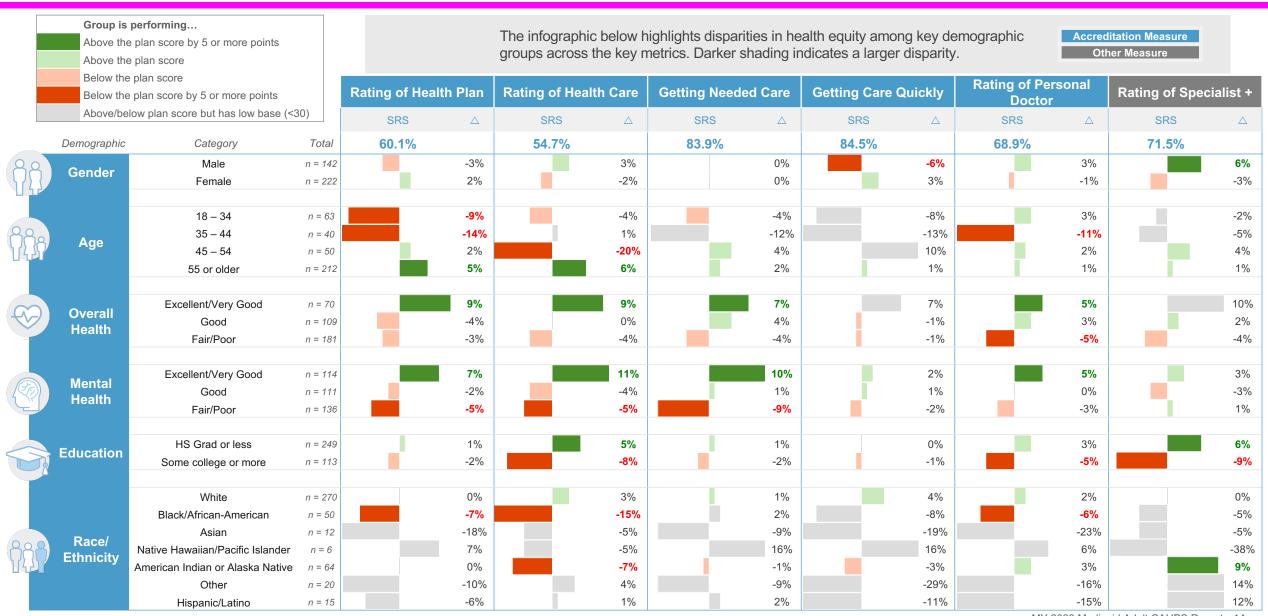
	SUMMA	SUMMARY RATE 2024 PG BOOK OF BUSINES		NESS BENCHMARK						
MEASURE	2023	2024	CHANGE	PERCENTILE DISTRIBUTION  0 20 40 60 80 100		PERCENTILE RANK	BoB SRS			
Health Plan Domain										
Rating of Health Plan % 9 or 10	55.2%	60.1%	4.9						30 <sup>th</sup>	63.1%
Getting Needed Care % Usually or Always	86.3%	83.9%	-2.4						64 <sup>th</sup>	82.1%
Customer Service + % Usually or Always	87.8%	88.9%	1.1						35 <sup>th</sup>	89.8%
Ease of Filling Out Forms + % Usually or Always	95.9%	95.4%	-0.5						57 <sup>th</sup>	94.8%
Health Care Domain										
Rating of Health Care % 9 or 10	53.7%	54.7%	1.0						28 <sup>th</sup>	57.3%
Getting Care Quickly % Usually or Always	82.3%	84.5%	2.2						81 <sup>st</sup>	81.2%
How Well Doctors Communicate + % Usually or Always	92.1%	94.5%	2.4						74 <sup>th</sup>	93.2%
Coordination of Care + % Usually or Always	85.0%	87.9%	2.9						62 <sup>nd</sup>	86.0%
Rating of Personal Doctor % 9 or 10	70.5%	68.9%	-1.6						39 <sup>th</sup>	70.3%
Rating of Specialist + % 9 or 10	70.4%	71.5%	1.1						73 <sup>rd</sup>	68.5%

## MEASURE SUMMARY

	SUMMARY RATE			2024 PG BOOK OF BUSINESS BENCHMARK							
MEASURE	2023	2024	CHANGE		PEF	RCENTILE	DISTRIBU	TION		PERCENTILE	BoB SRS
				0	20	40	60	80	100	RANK	
Effectiveness of Care											
Advised to Quit Smoking: 2YR % Sometimes, Usually, or Always	70.6%	70.2%	-0.4							37 <sup>th</sup>	73.7%
Discussing Cessation Meds: 2YR + % Sometimes, Usually, or Always	52.0%	51.2%	-0.8							43 <sup>rd</sup>	53.4%
Discussing Cessation Strategies: 2YR + % Sometimes, Usually, or Always	47.2%	44.7%	-2.5							45 <sup>th</sup>	47.1%

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

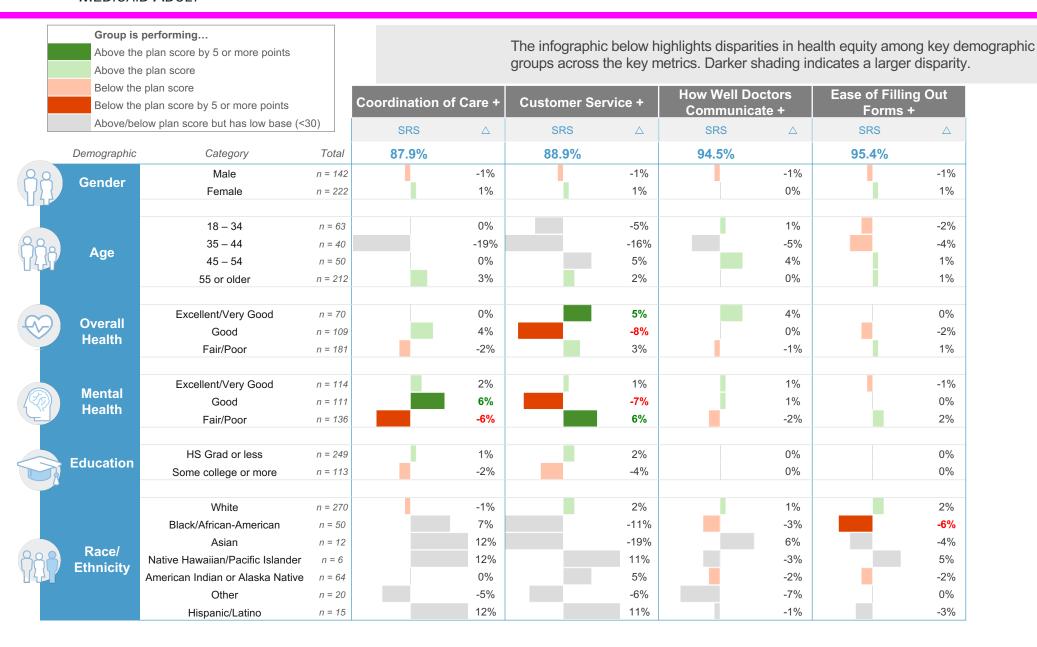
## HEALTH EQUITY



Accreditation Measure

Other Measure

## HEALTH EQUITY



## MEASURE SUMMARY

MEDICAID ADULT

## **Top Three** Performing Measures

Your plan's percentile rankings for these measures were the highest compared to the 2024 PG Book of Business.

MEACURE	2024	PLAN SUMMARY RATE SCORE			2023 QC			2024 PG BoB		
MEASURE	Valid n	2023	2024	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Getting Care Quickly (% Usually or Always)	179	82.3%	84.5%	2.2	80.4%	4.1	72 <sup>nd</sup>	81.2%	3.3	81 <sup>st</sup>
How Well Doctors Communicate + (% Usually or Always)	263	92.1%	94.5%	2.4	92.5%	2.0	82 <sup>nd</sup>	93.2%	1.3	74 <sup>th</sup>
Rating of Specialist + (% 9 or 10)	193	70.4%	71.5%	1.1	66.2%	5.3	87 <sup>th</sup>	68.5%	3.0	73 <sup>rd</sup>

## **BOTTOM THREE** Performing Measures

Your plan's percentile rankings for these measures were the lowest compared to the 2024 PG Book of Business.

MEASURE	2024	PLAN SUMMARY RATE SCORE			2023 QC			2024 PG BoB		
MEASURE	Valid n	2023	2024	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Customer Service + (% Usually or Always)	140	87.8%	88.9%	1.1	89.2%	-0.3	38 <sup>th</sup>	89.8%	-0.9	35 <sup>th</sup>
Rating of Health Plan (% 9 or 10)	348	55.2%	60.1%	4.9	61.2%	-1.1	39 <sup>th</sup>	63.1%	-3.0	30 <sup>th</sup>
Rating of Health Care (% 9 or 10)	254	53.7%	54.7%	1.0	55.7%	-1.0	38 <sup>th</sup>	57.3%	-2.6	28 <sup>th</sup>

**Significance Testing:** Current score is significantly higher/lower than the 2023 score  $(\uparrow / \downarrow)$  or benchmark score  $(\triangle / \blacktriangledown)$ .

## IMPROVEMENT STRATEGIES

## **Improving** Performance

These measures had the lowest percentile rankings in comparison to the 2024 PG 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 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, Claims, GNC, GCQ, HWDC). Review QI recommendations/actions of these CAHPS composite measures.
- 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 adult members. Use technology to provide more effective and efficient care.
- Consider the value of a PG CAHPS Drill-Down, Simulation Survey or CG-CAHPS to probe key CAHPS measures and/or target segments of the population.
- · Explore opportunity to continually monitor rating of the plan using targeted follow-up surveys, e.g., call satisfaction, care management, etcetera.
- · Develop online videos (vs. excessive reading) explaining key terms and activities members need to know, e.g., how much you have to pay, or Understanding Your Health Insurance Costs. Evaluate and implement complementing, consistent, simple and clear communications.
- Explore or enhance potential of a mobile app providing member immediate access to secure accurate, up-to-date information about their Plan, benefits, coverage, copays, cost, claims, etc.

#### 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/quide 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).

PCP = Primary Care Providers

EHR = Electronic Health Record

CS = Customer Service QI - Quality Improvement

CSR = Customer Service Representative

GNC = Getting Needed Care GCQ = Getting Care Quickly HWDC = How well Doctors Communicate CG CAHPS = Clinician and Group CAHPS

# KEY DRIVER ANALYSIS OF RATING OF HEALTH PLAN

SoonerCare Medicaid Adult

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

## POWER CHART: EXPLANATION

#### POWeR™ CHART CLASSIFICATION MATRIX

**Overview.** The SatisAction<sup>™</sup> 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

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

#### MEDICAID ADULT

POWER CHART: YOUR RESULTS

OLIDVEY MEACUDE		2	023	20	024	Higher	RETAIN	POWER		
			SURVEY MEASURE	SRS	%tile*	SRS	%tile*	riigiici		
			POWER							
	Rating	Q22	Rating of Specialist +	70.4%	72 <sup>nd</sup>	71.5%	73 <sup>rd</sup>			
•	GCQ	Q4	Getting urgent care	80.6%	35 <sup>th</sup>	84.7%	64 <sup>th</sup>		15	
	GNC	Q9	Getting care, tests, or treatment	86.7%	62 <sup>nd</sup>	85.7%	53 <sup>rd</sup>		6	
	SQ	Q43	Easy to understand instructions for taking meds	85.8%		87.5%			<b>V</b>	
•	HWDC	Q13	Dr. listened carefully	93.7%	63 <sup>rd</sup>	94.3%	68 <sup>th</sup>			22
			OPPORTUNITY						20	13
	Rating	Q18	Rating of Personal Doctor	70.5%	59 <sup>th</sup>	68.9%	39 <sup>th</sup>			2
	Rating	Q8	Rating of Health Care	53.7%	26 <sup>th</sup>	54.7%	28 <sup>th</sup>		17	43
	SQ	Q42	Got wanted info. about health from Dr.	85.5%		83.4%			27	_
	SQ	Q46	Got wanted info. from pharmacist	81.6%		81.6%		Ж	·	9
	SQ	Q44	Dr. explained side effects of meds	70.1%		73.4%		2		
			WAIT					PERFORMANCE		46) 42
	CS	Q25	Treated with courtesy and respect	90.9%	8 <sup>th</sup>	94.3%	37 <sup>th</sup>	\lambda{\begin{array}{c} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		
	CS	Q24	Provided information or help	84.7%	52 <sup>nd</sup>	83.6%	36 <sup>th</sup>	Ö	24 25	18
	SQ	Q50	Help with transportation met needs			49.6%		2	24	4)
			RETAIN					В		
•	HWDC	Q12	Dr. explained things	93.7%	57 <sup>th</sup>	94.3%	64 <sup>th</sup>	_		8
•	HWDC	Q14	Dr. showed respect	92.4%	11 <sup>th</sup>	95.5%	58 <sup>th</sup>			
	GNC	Q20	Getting specialist appointment	86.0%	92 <sup>nd</sup>	82.1%	67 <sup>th</sup>			
•	HWDC	Q15	Dr. spent enough time	88.8%	27 <sup>th</sup>	93.9%	82 <sup>nd</sup>			
	CC	Q17	Coordination of Care +	85.0%	42 <sup>nd</sup>	87.9%	62 <sup>nd</sup>			
•	GCQ	Q6	Getting routine care	83.9%	70 <sup>th</sup>	84.2%	79 <sup>th</sup>			
	CS	Q27	Ease of Filling Out Forms +	95.9%	64 <sup>th</sup>	95.4%	57 <sup>th</sup>			
			*Percentiles b	ased on the	PG Book of E	Business of t	he listed year.	Lower	50	
									WAIT	OPPORTUNITY _
	EY	NI !	-10						IMPOR	<u>h</u> e
G	NC = Getti CQ = Getti	ng Need ng Care	ed Care Quickly					_		FANCE H

GCQ = Getting Care Quickly

CC = Care Coordination CS = Customer Service

HWDC = How Well Doctors Communicate

SQ = Supplemental Question

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

## KEY DRIVERS OF RATING OF HEALTH PLAN

MEDICAID ADULT

SUMMARY RATE **ALIGNMENT KEY DRIVER RANK CLASSIFICATION SCORE** PG BoB Are vour kev **ATTRIBUTE** %TILE\* drivers typical of YOUR **YOUR INDUSTRY INDUSTRY** 2024 2023 the industry? **PLAN PLAN TOP 10 KEY DRIVERS Q28 Rating of Health Plan** 60.1% 63.1% 30<sup>th</sup> (+20)These items have a Q22 Rating of Specialist + 68.5% 73<sup>rd</sup> **Power** 3 71.5% **Power** relatively large impact on 2 Q4 Getting urgent care 84.7% 82.7% 64<sup>th</sup> Opp. 6 (+29)**Power** the Rating of Health Plan. Leverage these questions 39th 3 2 Q18 Rating of Personal Doctor 68.9% 70.3% Retain Opp. (-20)since they are important to your members and the **53**<sup>rd</sup> 4 5 Q9 Getting care, tests, or treatment 85.7% 85.1% **Power Power** (-9)Rating of Health Plan score for this plan. They 5 Q8 Rating of Health Care 54.7% 57.3% 28<sup>th</sup> (+2)Opp. Opp. are listed in descending Q42 Got wanted info. about health from Dr. 83.4% Wait 6 Opp. order of importance for your plan. Q43 Easy to understand instructions for taking meds 87.5% **Power Power** PG Book of Business 8 Q46 Got wanted info. from pharmacist 81.6% Wait Opp. regression analysis has identified Key Drivers of 9 10 Q13 Dr. listened carefully 94.3% 93.3% 68<sup>th</sup> Retain Power Rating of Health Plan. 10 Q44 Dr. explained side effects of meds 73.4% Opp. Wait The numbers represent the ranked importance 13 9 82.1% 67<sup>th</sup> (-25)across the entire Book of Business. 14 37<sup>th</sup> Wait (+29)All Industry scores & rankings are 17 8 Provided information or help 36th Wait 18 84.2% 4 (+9)

calculated based on the 2024 PG Book of Business. Any items below the dotted line are Top 10 industry key drivers that are not identified as key drivers for your plan.

<sup>\*</sup>Differentials are based on comparisons to your plan's prior year percentile rankings.

## MEASURE ANALYSES

Measure Details and Summary Rate Scores

SoonerCare Medicaid Adult

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

## SECTION INFORMATION

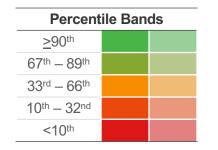
**Drilling Down Into Composites And Ratings** This section is designed to give your plan a detailed report on the performance of each Star Rating measure as well as a few other key metrics. The measure analysis section contains:

#### 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



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

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

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



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

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

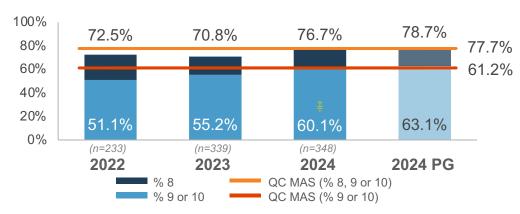
For composites – all corresponding attributes that roll-up into the composite score are displayed:

- 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 2023 Quality Compass percentile bands

# RATINGS MEDICAID ADULT

#### RATING OF HEALTH PLAN

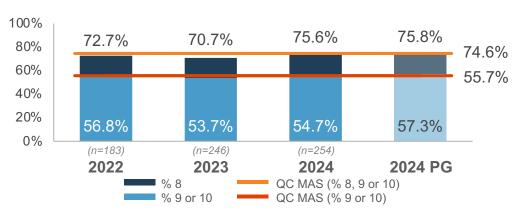
	QC %tile Rank	Score
% 8, 9 or 10	38 <sup>th</sup>	76.7%
% 9 or 10	39 <sup>th</sup>	60.1%



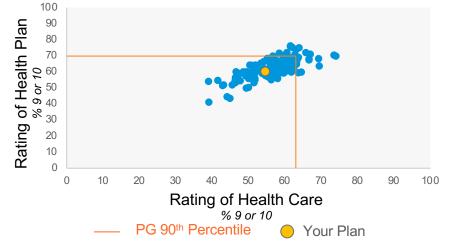
Key Drivers Of The Rating Of The Health Plan						
POWER OPPORTUNITIES						
Q22	Rating of Specialist +	Q18	Rating of Personal Doctor			
Q4	Getting urgent care	Q8	Rating of Health Care			
Q9	Getting care, tests, or treatment	Q42	Got wanted info. about health from Dr.			
Q43	Easy to understand instructions for taking meds	Q46	Got wanted info. from pharmacist			
Q13	Dr. listened carefully	Q44	Dr. explained side effects of meds			

#### RATING OF HEALTH CARE

	QC %tile Rank	Score
% 8, 9 or 10	57 <sup>th</sup>	75.6%
% 9 or 10	38 <sup>th</sup>	54.7%







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

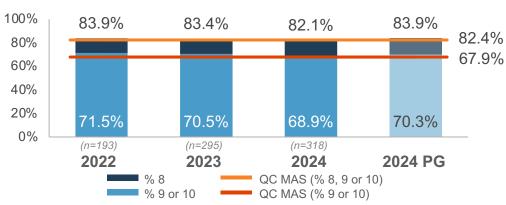
**Score** 

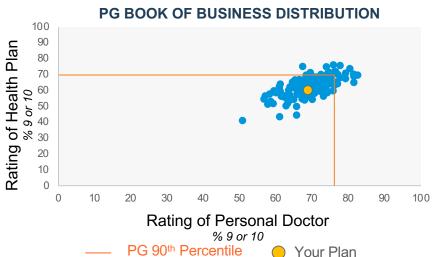
## RATINGS

MEDICAID ADULT

#### RATING OF PERSONAL DOCTOR

	QC %tile Rank	Score
% 8, 9 or 10	41 <sup>st</sup>	82.1%
% 9 or 10	54 <sup>th</sup>	68.9%



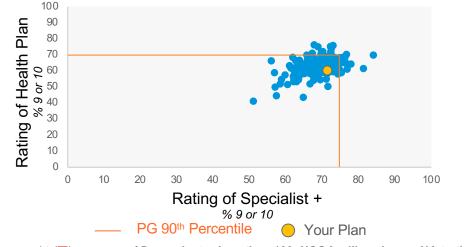


#### RATING OF SPECIALIST +

QC %tile Rank

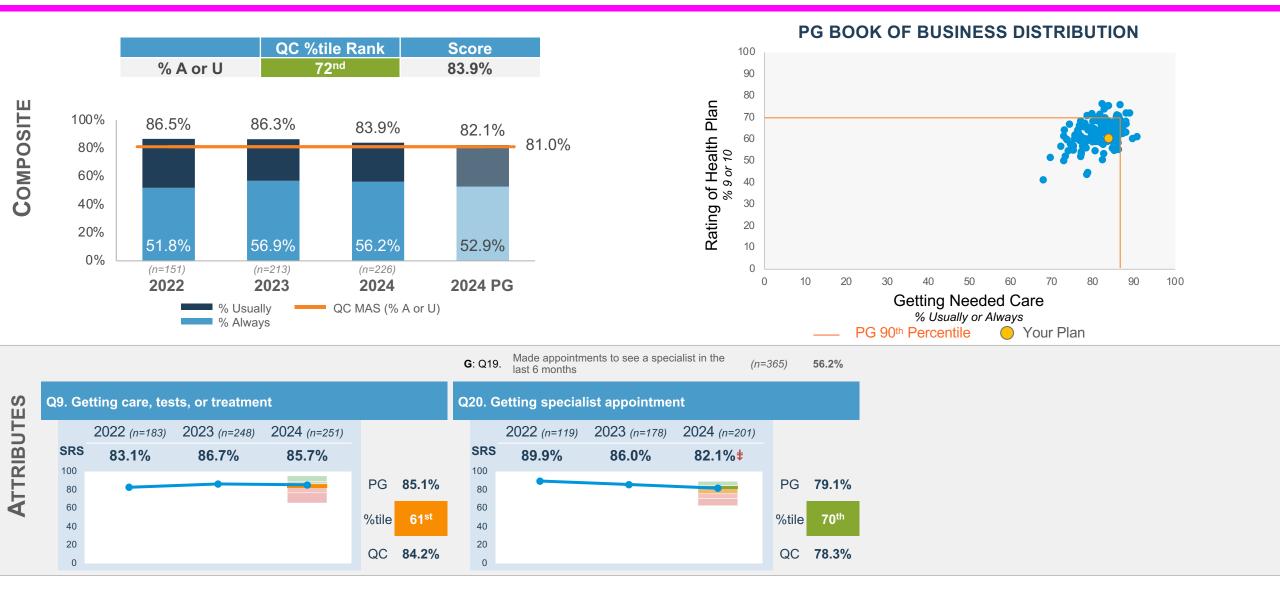
	% 8, 9 or 10			84.5%	
	% 9 or 10	87	rth	71.5%	
100%	83.6%	82.8%	84.5%	82.7%	
80%					81.4%
60%					66.2%
40%					
20%	70.9%	70.4%	71.5%	68.5%	
0%	(n=110)	(n=169)	(n=193)		
	2022	2023	2024	2024 PG	
		% 8	QC MAS (% 8, 9	,	
		% 9 or 10	QC MAS (% 9 or	r 10)	

#### PG BOOK OF BUSINESS DISTRIBUTION

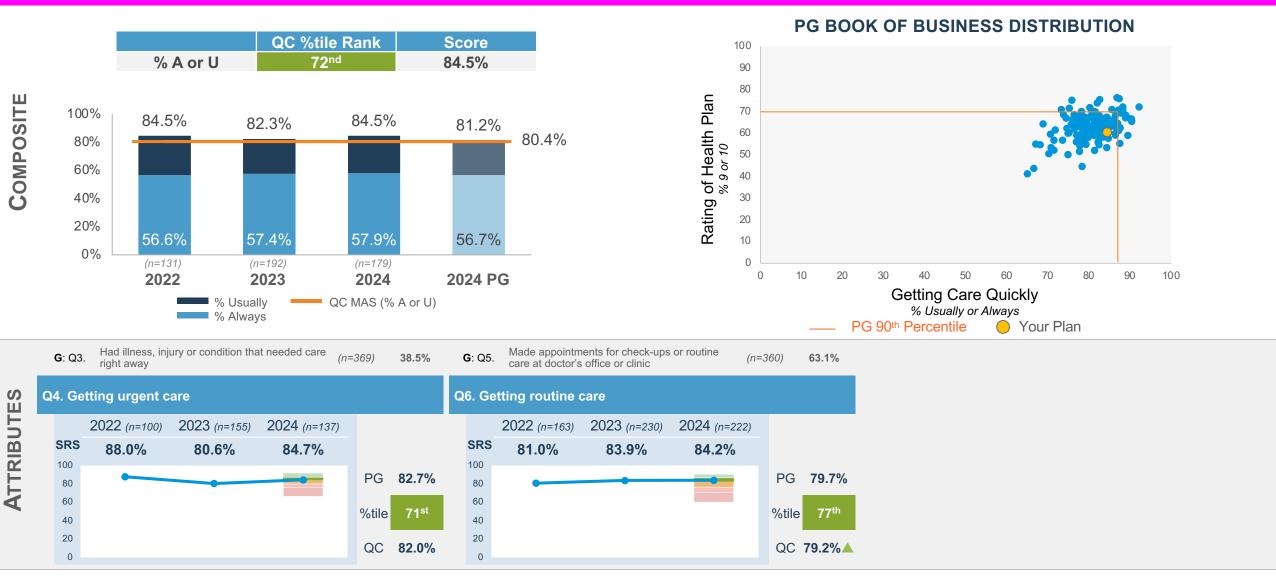


^Denominator less than 100. NCQA will assign an NA to this measure.

## GETTING NEEDED CARE

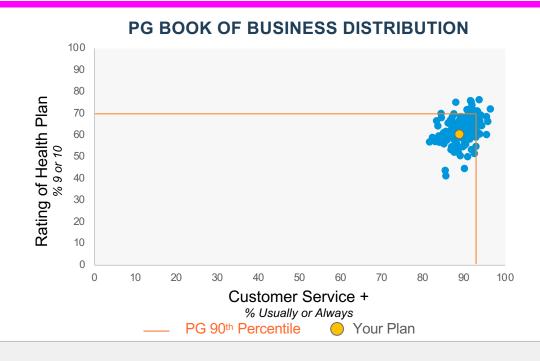


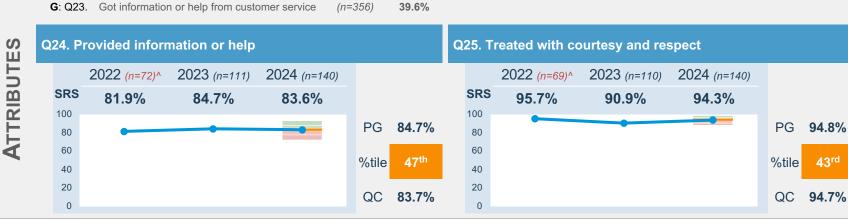
## GETTING CARE QUICKLY



### CUSTOMER SERVICE +







PG

%tile

QC

PG

%tile

94.9%

94.4%

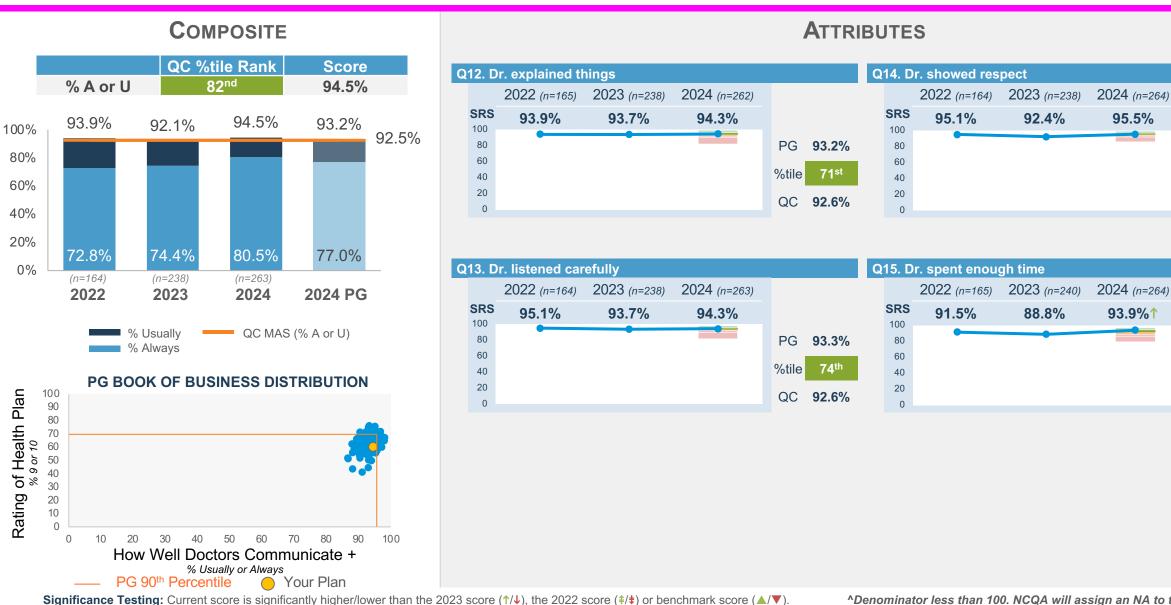
91.4%

87th

QC 90.3%

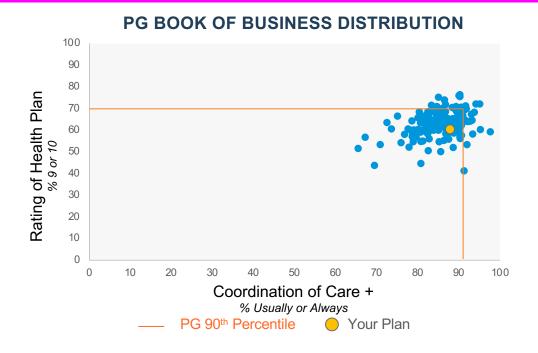
#### Prepared for the Oklahoma Health Care Authority through a contract with KFMC Health Improvement Partners

## How Well Doctors Communicate +



## COORDINATION OF CARE +





# SUMMARY OF TREND AND BENCHMARKS

SoonerCare Medicaid Adult

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

## SECTION INFORMATION

**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.

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 2023 score (↑), the 2022 score (♣) or benchmark score (▲).

Red – Current year score is significantly lower than the 2023 score (↓), the 2022 score (‡) or benchmark score (▼).

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

## BENCHMARK INFORMATION

### **Available Benchmarks**

The following benchmarks are used throughout the report.

	2023 Quality Compass® All Plans	2023 NCQA 1-100 Benchmark	2024 Press Ganey Book of Business
	Includes all Medicaid Adult samples that submitted data to NCQA in 2023.	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 2023.	Includes all Medicaid samples that contracted with Press Ganey to administer the MY 2023 CAHPS 5.1H survey and submitted data to NCQA.
PROS	Is presented in NCQA's The State of Health Care Quality	Utilized by Press Ganey to calculate approximate percentile ranking of plan scores in relation to the Quality Compass® All Plans benchmark	<ul> <li>Provides a benchmark for each question from the survey</li> <li>Permits precise percentile ranking of plan compared to benchmark</li> </ul>
CONS	Only contains benchmarks for certain key questions, composites, and rating questions	Only contains benchmarks for certain key questions, composites, and rating questions	Contains fewer plans than the Quality Compass® All Plans Benchmarks
SIZE	189 Plans	189 Plans	174 Plans / 43,077 Respondents

## SUMMARY RATE SCORES

	2024 Valid n	2022	2023	2024	2024 PG BoB	2023 QC
Rating Questions (% 9 or 10)						
★ Q28. Rating of Health Plan	348	51.1%	55.2%	60.1% ‡	63.1%	61.2%
★ Q8. Rating of Health Care	254	56.8%	53.7%	54.7%	57.3%	55.7%
★ Q18. Rating of Personal Doctor	318	71.5%	70.5%	68.9%	70.3%	67.9%
Q22. Rating of Specialist +	193	70.9%	70.4%	71.5%	68.5%	66.2%
Rating Questions (% 8, 9 or 10)						
Q28. Rating of Health Plan	348	72.5%	70.8%	76.7%	78.7%	77.7%
Q8. Rating of Health Care	254	72.7%	70.7%	75.6%	75.8%	74.6%
Q18. Rating of Personal Doctor	318	83.9%	83.4%	82.1%	83.9%	82.4%
Q22. Rating of Specialist +	193	83.6%	82.8%	84.5%	82.7%	81.4%
★ Getting Needed Care (% Usually or Always)	226	86.5%	86.3%	83.9%	82.1%	81.0%
Q9. Getting care, tests, or treatment	251	83.1%	86.7%	85.7%	85.1%	84.2%
Q20. Getting specialist appointment	201	89.9%	86.0%	82.1% 🕏	79.1%	78.3%
★ Getting Care Quickly (% Usually or Always)	179	84.5%	82.3%	84.5%	81.2%	80.4%
Q4. Getting urgent care	137	88.0%	80.6%	84.7%	82.7%	82.0%
Q6. Getting routine care	222	81.0%	83.9%	84.2%	79.7%	79.2% 🔺
Effectiveness of Care (% Sometimes, Usually, or Always)						
★ Q32. Advised to Quit Smoking: 2YR	245	73.0%	70.6%	70.2%	73.7%	72.8%
Q33. Discussing Cessation Meds: 2YR +	246	45.7%	52.0%	51.2%	53.4%	51.2%
Q34. Discussing Cessation Strategies: 2YR +	244	42.8%	47.2%	44.7%	47.1%	45.4%

## SUMMARY RATE SCORES

	2024 Valid n	2022	2023	2024	2024 PG BoB	2023 QC
Customer Service + (% Usually or Always)	140	88.8%	87.8%	88.9%	89.8%	89.2%
Q24. Provided information or help	140	81.9%	84.7%	83.6%	84.7%	83.7%
Q25. Treated with courtesy and respect	140	95.7%	90.9%	94.3%	94.8%	94.7%
How Well Doctors Communicate + (% Usually or Always)	263	93.9%	92.1%	94.5%	93.2%	92.5%
Q12. Dr. explained things	262	93.9%	93.7%	94.3%	93.2%	92.6%
Q13. Dr. listened carefully	263	95.1%	93.7%	94.3%	93.3%	92.6%
Q14. Dr. showed respect	264	95.1%	92.4%	95.5%	94.9%	94.4%
Q15. Dr. spent enough time	264	91.5%	88.8%	93.9% ↑	91.4%	90.3%
Q17. Coordination of Care +	174	84.1%	85.0%	87.9%	86.0%	84.6%
Q27. Ease of Filling Out Forms + (% Usually or Always)	351	95.2%	95.9%	95.4%	94.8%	95.4%

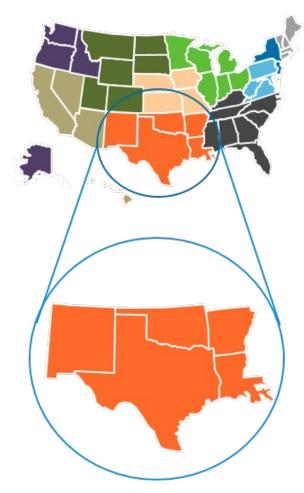
#### Prepared for the Oklahoma Health Care Authority through a contract with KFMC Health Improvement Partners

## REGIONAL PERFORMANCE

MEDICAID ADULT

		SUMMARY RATE	2024 PG BoB REGION
	Rating Questions (% 9 or 10)		
*	Q28. Rating of Health Plan	60.1%	62.6%
*	Q8. Rating of Health Care	54.7%	59.0%
*	Q18. Rating of Personal Doctor	68.9%	70.6%
	Q22. Rating of Specialist +	71.5%	67.5%
	Rating Questions (% 8, 9 or 10)		
	Q28. Rating of Health Plan	76.7%	78.6%
	Q8. Rating of Health Care	75.6%	75.8%
	Q18. Rating of Personal Doctor	82.1%	83.3%
	Q22. Rating of Specialist +	84.5%	82.0%
*	Getting Needed Care (% Usually or Always)	83.9%	81.9%
	Q9. Getting care, tests, or treatment	85.7%	85.0%
	Q20. Getting specialist appointment	82.1%	78.7%
*	Getting Care Quickly (% Usually or Always)	84.5%	82.2%
	Q4. Getting urgent care	84.7%	82.7%
	Q6. Getting routine care	84.2%	81.6%
	Effectiveness of Care (% Sometimes, Usually, or Always)		
*	Q32. Advised to Quit Smoking: 2YR	70.2%	69.8%
	Q33. Discussing Cessation Meds: 2YR +	51.2%	48.9%
	Q34. Discussing Cessation Strategies: 2YR +	44.7%	44.1%

**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 2024 PG BoB Region score.

### Prepared for the Oklahoma Health Care Authority through

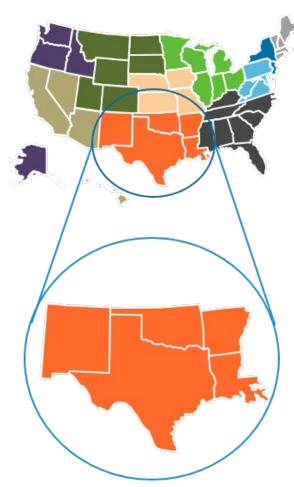
a contract with KFMC Health Improvement Partners

### MEDICAID ADULT

	SUMMARY RATE	2024 PG BoB REGION
Customer Service + (% Usually or Always)	88.9%	91.5%
Q24. Provided information or help	83.6%	87.1%
Q25. Treated with courtesy and respect	94.3%	95.8%
How Well Doctors Communicate + (% Usually or Always)	94.5%	93.0%
Q12. Dr. explained things	94.3%	92.7%
Q13. Dr. listened carefully	94.3%	93.5%
Q14. Dr. showed respect	95.5%	94.7%
Q15. Dr. spent enough time	93.9%	91.0%
Q17. Coordination of Care +	87.9%	83.2%
Q27. Ease of Filling Out Forms + (% Usually or Always)	95.4%	94.5%

REGIONAL PERFORMANCE

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 2024 PG BoB Region score.

a contract with KFMC Health Improvement Partners

## PERCENTILE RANKINGS

		2024 Plan	QC		National Percentiles from 2023 Quality Compass			PG					Percen									
		Score	%tile	5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>	%tile	5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	<b>50</b> <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>
	Rating Questions (% 9 or 10)																					
*	Q28. Rating of Health Plan	60.1%	<b>39</b> <sup>th</sup>	49.1	52.7	57.9	59.3	61.8	64.0	65.4	68.7	70.1	<b>30</b> <sup>th</sup>	53.0	55.5	59.5	60.3	63.2	65.1	66.7	69.8	71.4
*	Q8. Rating of Health Care	54.7%	38 <sup>th</sup>	44.1	48.0	52.3	53.4	56.0	58.3	59.0	62.5	64.7	<b>28</b> <sup>th</sup>	46.1	49.0	54.1	55.3	57.7	59.6	60.6	63.0	64.8
*	Q18. Rating of Personal Doctor	68.9%	<b>54</b> <sup>th</sup>	59.8	61.8	64.2	65.4	68.2	70.6	71.9	74.0	75.8	<b>39</b> <sup>th</sup>	59.9	62.4	66.8	67.5	69.8	72.1	73.3	76.1	77.7
	Q22. Rating of Specialist +	71.5%	<b>87</b> <sup>th</sup>	57.6	60.6	63.4	64.5	66.4	68.3	68.9	72.3	73.3	<b>73</b> <sup>rd</sup>	60.4	62.2	64.8	66.3	68.5	70.9	72.0	74.7	76.3
	Rating Questions (% 8, 9 or 10)																					
	Q28. Rating of Health Plan	76.7%	38 <sup>th</sup>	69.6	71.2	74.7	76.0	77.7	79.9	80.9	83.7	85.9	<b>30</b> <sup>th</sup>	69.7	72.9	75.5	76.9	78.6	80.2	81.7	83.8	86.5
	Q8. Rating of Health Care	75.6%	<b>57</b> <sup>th</sup>	66.7	69.4	72.3	73.1	74.8	76.5	77.7	79.9	82.4	<b>47</b> <sup>th</sup>	67.0	68.3	72.2	73.5	76.0	78.1	79.1	81.6	82.9
	Q18. Rating of Personal Doctor	82.1%	41 <sup>st</sup>	75.8	77.9	80.4	81.5	82.7	84.3	84.9	86.9	87.4	<b>33</b> <sup>rd</sup>	77.1	78.6	80.9	81.8	83.9	85.3	86.0	88.3	89.9
	Q22. Rating of Specialist +	84.5%	<b>77</b> <sup>th</sup>	73.2	75.1	78.6	80.1	81.7	83.3	84.4	86.6	87.6	<b>66</b> <sup>th</sup>	75.8	77.1	79.4	80.9	83.2	84.6	85.4	87.3	88.5
*	Getting Needed Care (% U/A)	83.9%	<b>72</b> nd	73.5	75.0	77.8	79.8	81.7	83.1	84.5	86.5	87.2	<b>64</b> <sup>th</sup>	73.7	75.6	78.7	80.0	82.5	84.4	85.2	86.6	87.3
	Q9. Getting care, tests, or treatment	85.7%	<b>61</b> <sup>st</sup>	75.6	77.2	81.4	82.7	84.6	86.7	87.4	89.7	91.0	<b>53</b> <sup>rd</sup>	77.5	79.2	82.3	83.6	85.2	87.0	87.7	89.7	91.1
	Q20. Getting specialist appointment	82.1%	<b>70</b> <sup>th</sup>	69.9	70.9	74.1	76.1	78.9	81.5	82.4	84.6	85.1	67 <sup>th</sup>	68.3	70.7	75.0	77.1	79.6	81.9	82.7	85.1	86.8
*	Getting Care Quickly (% U/A)	84.5%	<b>72</b> nd	69.5	73.4	76.0	77.7	81.5	83.8	84.9	86.9	87.8	<b>81</b> <sup>st</sup>	71.3	74.7	78.0	79.2	81.9	83.1	83.7	87.0	88.2
	Q4. Getting urgent care	84.7%	<b>71</b> <sup>st</sup>	72.6	76.1	79.1	80.3	83.0	84.4	84.9	87.6	88.6	64 <sup>th</sup>	72.0	75.6	79.7	80.6	83.3	85.0	85.9	88.9	90.7
	Q6. Getting routine care	84.2%	<b>77</b> <sup>th</sup>	68.6	70.9	74.8	76.7	80.0	82.9	83.8	86.9	88.1	<b>79</b> <sup>th</sup>	68.6	71.2	75.9	77.3	80.4	82.3	83.6	86.7	87.8
	Effectiveness of Care (% S/U/A)																					
*	Q32. Advised to Quit Smoking: 2YR	70.2%	<b>31</b> st	60.9	65.1	68.7	70.6	73.0	75.0	76.9	80.4	82.8	<b>37</b> <sup>th</sup>	57.4	61.0	66.7	69.4	73.1	76.6	78.9	84.5	88.9
	Q33. Discussing Cessation Meds: 2YR +	51.2%	<b>53</b> rd	39.1	40.6	46.3	48.0	50.4	53.9	55.2	61.4	64.6	<b>43</b> <sup>rd</sup>	33.3	38.2	45.7	48.1	53.6	57.5	59.9	64.8	68.6
	Q34. Discussing Cessation Strategies: 2YR +	44.7%	<b>44</b> <sup>th</sup>	34.7	37.1	40.0	41.2	46.4	49.1	50.3	54.0	56.2	<b>45</b> <sup>th</sup>	30.6	34.1	40.0	41.5	46.2	50.0	52.4	58.8	65.9

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

## PERCENTILE RANKINGS

	2024 Plan	QC				ional F 023 Qu						PG	2024 FG BOOK OF BUSINESS								
	Score	%tile	5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>	%tile	5 <sup>th</sup> 10		<b>25</b> <sup>th</sup>	33 <sup>rd</sup>	<b>50</b> <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>
Customer Service + (% U/A)	88.9%	38 <sup>th</sup>	83.1	84.5	88.1	88.7	89.6	90.4	91.1	91.9	93.5	35 <sup>th</sup>	84.5	85.6	87.7	88.7	90.1	91.3	91.9	92.9	93.8
Q24. Provided information or help	83.6%	<b>47</b> <sup>th</sup>	76.4	78.2	82.0	82.8	83.8	85.3	86.2	88.1	89.5	<b>36</b> <sup>th</sup>	76.8	79.0	82.2	83.2	85.2	86.9	87.5	89.4	90.9
Q25. Treated with courtesy and respect	94.3%	<b>43</b> <sup>rd</sup>	90.3	91.0	93.0	93.7	95.4	96.3	96.7	97.4	97.7	<b>37</b> <sup>th</sup>	90.6	91.5	93.3	93.9	95.0	96.0	96.5	97.6	98.2
How Well Doctors Communicate + (% U/A)	94.5%	<b>82</b> <sup>nd</sup>	87.8	90.2	91.4	91.7	92.7	93.6	94.0	95.1	95.8	<b>74</b> <sup>th</sup>	89.4	90.4	91.8	92.3	93.0	93.9	94.6	95.6	96.1
Q12. Dr. explained things	94.3%	<b>71</b> <sup>st</sup>	86.9	89.8	91.1	91.7	92.7	93.9	94.6	95.9	96.6	<b>64</b> <sup>th</sup>	89.1	89.7	91.1	92.0	93.3	94.5	95.0	96.0	96.2
Q13. Dr. listened carefully	94.3%	<b>74</b> <sup>th</sup>	88.4	89.7	91.5	92.2	92.7	93.7	94.3	95.4	95.9	68 <sup>th</sup>	88.88	90.2	92.0	92.5	93.4	94.2	94.7	95.9	96.4
Q14. Dr. showed respect	95.5%	<b>74</b> <sup>th</sup>	91.2	91.9	93.4	93.8	94.5	95.3	95.6	96.9	97.5	<b>58</b> <sup>th</sup>	91.1	92.1	93.5	93.8	95.0	95.8	96.2	97.4	98.0
Q15. Dr. spent enough time	93.9%	<b>87</b> <sup>th</sup>	84.8	86.3	88.4	89.0	90.5	92.0	92.4	94.2	95.0	<b>82</b> <sup>nd</sup>	86.1	87.5	89.2	90.0	91.5	92.6	93.3	95.3	95.8
Q17. Coordination of Care +	87.9%	<b>83</b> rd	77.5	78.5	82.2	83.2	85.3	86.7	87.2	89.0	89.4	<b>62</b> <sup>nd</sup>	76.5	78.9	82.3	83.6	86.3	88.4	89.3	91.0	92.7
Q27. Ease of Filling Out Forms + (% U/A)	95.4%	<b>44</b> th	92.7	93.1	94.2	94.8	95.5	96.3	96.5	97.8	98.5	<b>57</b> <sup>th</sup>	91.2	92.4	93.7	94.1	94.7	95.9	96.2	97.0	97.3

## PROFILE OF SURVEY RESPONDENTS

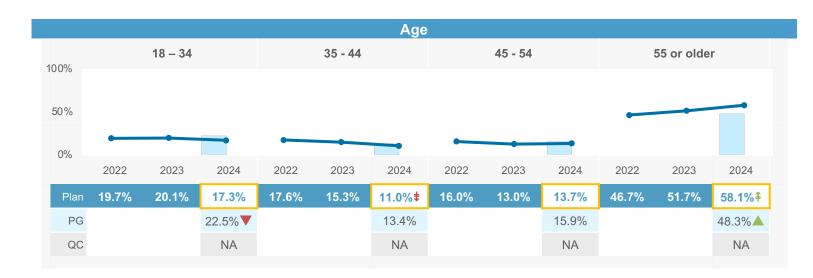
### **DEMOGRAPHIC COMPOSITION**

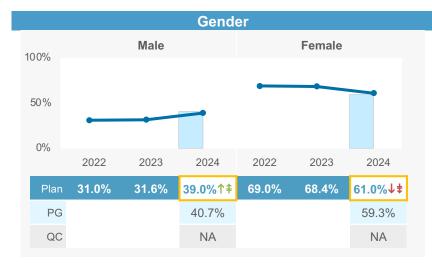
SoonerCare Medicaid Adult

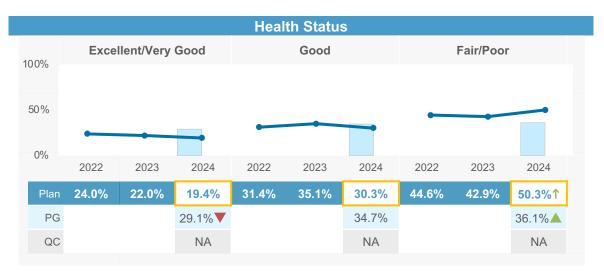
PREPARED FOR THE OKLAHOMA HEALTH CARE AUTHORITY THROUGH A CONTRACT WITH KFMC HEALTH IMPROVEMENT PARTNERS

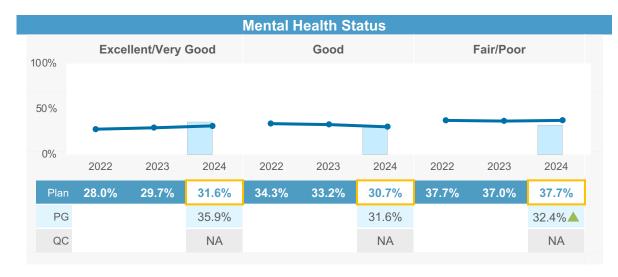
### PROFILE OF SURVEY RESPONDENTS Prepared for the Oklahoma Health Care Authority through a contract with KFMC Health Improvement Partners

MEDICAID ADULT







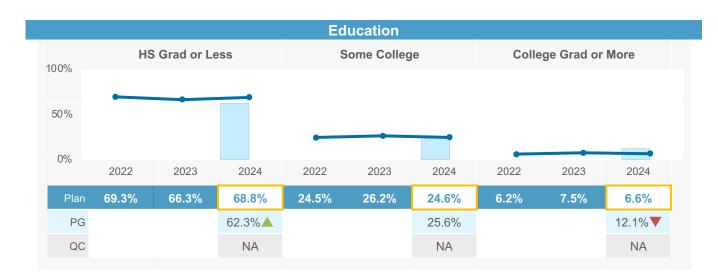


Significance Testing: Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↑/↓) or benchmark score (△/▼).

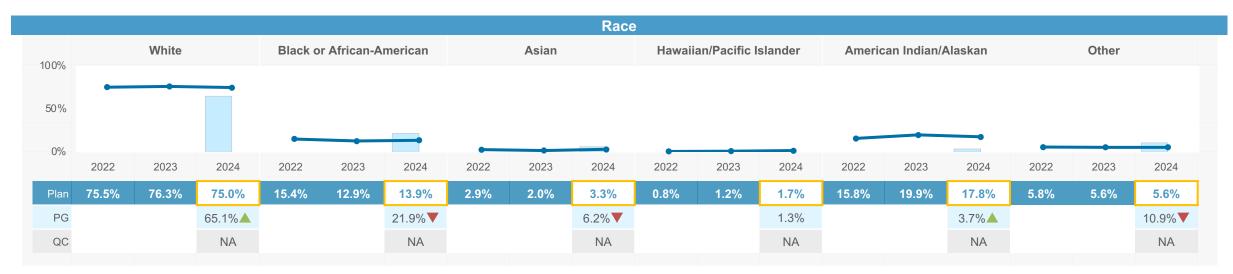
Benchmarks: PG refers to the 2024 PG Book of Business benchmark. QC refers to the 2023 QC National Data benchmark. NCQA did not publish demographics for the 2023 benchmark.

## PROFILE OF SURVEY RESPONDENTS Prepared for the Oklahoma Health Care Authority through a contract with KFMC Health Improvement Partners

MEDICAID ADULT







Significance Testing: Current score is significantly higher/lower than the 2023 score (↑/♣), the 2022 score (↑/♣) or benchmark score (▲/▼).

Benchmarks: PG refers to the 2024 PG Book of Business benchmark. QC refers to the 2023 QC National Data benchmark. NCQA did not publish demographics for the 2023 benchmark.

# SUPPLEMENTAL QUESTIONS

SoonerCare Medicaid Adult

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

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

## SUPPLEMENTAL QUESTIONS

	Category Responses			Sur	2024				
		Base		nses Per Question	2022	2023	2024	PG BoB	
Q40. Dr. used medical words not understood (% Never or Sometimes)	Valid Responses = 356								
	<u>Always</u>	<u>Usually</u>	Sometimes	<u>Never</u>	(n=200)	(n=294)	(n=356)		
	3.9%	4.2%	26.4%	65.4%	87.5%	93.5%	91.9%		
Q41. Dr. talked too fast (% Never or Sometimes)	Valid Respons	ses = 355							
	<u>Always</u>	<u>Usually</u>	Sometimes	Never	(n=198)	(n=291)	(n=355)		
	1.7%	2.3%	10.4%	85.6%	94.9%	94.8%	96.1%		
Q42. Dr. gave all info. about health (% Always or Usually)	Valid Respons	ses = 355							
	<u>Always</u>	<u>Usually</u>	Sometimes	<u>Never</u>	(n=198)	(n=289)	(n=355)		
	63.4%	20.0%	8.5%	8.2%	90.4%	85.5%	83.4%		
Q43. Dr. gave easy to understand instructions about how to take medicines (% Always or Usually)	Valid Respons	ses = 351							
	Always	<u>Usually</u>	Sometimes	<u>Never</u>	(n=196)	(n=288)	(n=351)		
	75.8%	11.7%	2.6%	10.0%	89.3%	85.8%	87.5%		

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

## SUPPLEMENTAL QUESTIONS

	Category Responses				Sur	2024		
		Bas	ed on Valid Respo	nses Per Question	2022	2023	2024	PG BoB
Q44. Dr. explained side effects in a way easy to understand (% Always or Usually)	Valid Responses = 346							
	<u>Always</u>	<u>Usually</u>	Sometimes	Never	(n=196)	(n=284)	(n=346)	
	58.1%	15.3%	7.5%	19.1%	79.1%	70.1%	73.4%	
Q45. Started a prescription medicine (% Yes)	Valid Respons	ses = 356						
	Yes	No			(n=244)	(n=344)	(n=356)	
	49.7%	50.3%			53.3%	54.7%	49.7%	
Q46. Pharmacist gave info. or help needed (% Always or Usually)	Valid Respons	ses = 354						
	<u>Always</u>	<u>Usually</u>	Sometimes	Never	(n=237)	(n=332)	(n=354)	
	68.4%	13.3%	8.8%	9.6%	81.4%	81.6%	81.6%	
Q47. Pharmacist reviewed medications (% Yes)	Valid Respons	ses = 347						
	Yes	No			(n=236)	(n=336)	(n=347)	
	57.9%	42.1%			52.1%	48.8%	<b>57.9% ↑</b>	

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

## SUPPLEMENTAL QUESTIONS

		Category Responses				Sur	2024		
		Base		ponses Per Question		2022	2023	2024	PG BoB
Q48. Knowledgeable about making complaints (% Yes)	Valid Respon	nses = 353							
	Yes	No				(n=242)	(n=336)	(n=353)	
	58.1%	41.9%				56.2%	52.7%	58.1%	
Q49. Ease of finding and understanding info. on website (% Very or Somewhat Easy)	Valid Respon	nses = 152							
I have not used the website to find information 199	Very easy	Somewhat easy	Somewhat hard	Very hard		(n=107)	(n=156)	(n=152)	
	34.2%	38.2%	15.8%	11.8%		73.8%	70.5%	72.4%	
Q50. Help with transportation met needs (% Always or Usually)	Valid Respon	nses = 129							
I did not phone my health plan for help with transportation in the last 6 months 221	Always	<u>Usually</u>	Sometimes	<u>Never</u>				(n=129)	
	35.7%	14.0%	10.1%	40.3%				49.6%	

# **APPENDICES**

- APPENDIX A: CORRELATION ANALYSES
- APPENDIX B: QUESTIONNAIRE

## APPENDIX A: CORRELATIONS

MEDICAID ADULT

### **Highest Correlations**

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

With Health Care Rating								
Q28	Health plan overall	0.5017						
Q9	Got care/tests/treatment	0.4943						
Q4	Got urgent care	0.4715						
Q42	Got wanted info. about health from Dr.	0.4434						
Q18	Personal doctor overall	0.4426						
Q22	Specialist overall	0.4209						
Q15	Dr. spent enough time	0.4118						
Q17	Dr. informed about care	0.3916						
Q14	Dr. showed respect	0.3889						
Q20	Got specialist appt.	0.3332						

With Personal Doctor Rating									
Q22	Specialist overall	0.5614							
Q12	Dr. explained things	0.5609							
Q15	Dr. spent enough time	0.5522							
Q13	Dr. listened carefully	0.5345							
Q17	Dr. informed about care	0.5238							
Q14	Dr. showed respect	0.5105							
Q28	Health plan overall	0.4931							
Q8	Health care overall	0.4426							
Q42	Got wanted info. about health from Dr.	0.4154							
Q43	Easy to understand instructions for taking meds	0.3942							

With Specialist Rating								
Q18	Personal doctor overall	0.5614						
Q28	Health plan overall	0.4609						
Q17	Dr. informed about care	0.4564						
Q13	Dr. listened carefully	0.4484						
Q8	Health care overall	0.4209						
Q12	Dr. explained things	0.4144						
Q9	Got care/tests/treatment	0.4032						
Q20	Got specialist appt.	0.3665						
Q42	Got wanted info. about health from Dr.	0.3531						
Q6	Got routine care	0.3323						