



Arnold Schwarzenegger
Governor

Results of the 2004 Consumer Assessment of Health Plans Survey (CAHPS 3.0H) for Medi-Cal Managed Care Health Plans



California Health & Human Services Agency

Kim Belshé
Secretary
Health & Human Services Agency

Prepared for:

**California Department of Health Services
Medi-Cal Managed Care Division**

Prepared by:



and



Delmarva Foundation
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California
Department of
Health Services

Sandra Shewry
Director

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Background and Research Approach

- In 2004, WB&A Market Research (WB&A) conducted satisfaction research on behalf of the Medi-Cal managed care plans. The CAHPS® 3.0H Medicaid Satisfaction Survey was administered to adult and child enrollees. The primary objective of this research was to determine members' ratings of and experiences with the medical care they receive.
- There are twenty-two Medi-Cal managed care plans that are contracted with the State of California. Some health plans have more than one geographic contract area and, for purposes of performance measurement and evaluation, the results of the 29 contract-specific areas are reported as 29 individual Medi-Cal managed care plans. The tables on the following page identify the plans that were surveyed as well as their contract type and the counties of operation.
- The CAHPS® 3.0H Adult Medicaid and Child Medicaid (with Children with Chronic Conditions Measurement Set) surveys were used. The CAHPS® 3.0H surveys are a set of standardized surveys that assess patient satisfaction with their experience of care containing question sets covering such topics as coverage, access to and utilization of health care, communication and interaction with providers, interaction with health plan administration, self-perceived health status and respondent demographics. Separate surveys were conducted for adults and children. The child survey incorporated the measurement set to assess the experience of care for children with chronic conditions. The child surveys were conducted by proxy, that is, with the parent/guardian who knows the most about the sampled child's health care.
- The CAHPS® 3.0H surveys were administered according to the protocol outlined by the National Committee for Quality Assurance (NCQA), which utilizes two survey mailings and up to 15 follow-up Computer-Assisted Telephone Interviewing (CATI) calls to those who do not respond by mail.
- Each Medi-Cal managed care plan provided a list of eligible Medicaid members. To qualify, members had to be continuously enrolled in the same Medi-Cal managed care plan for five out of the six months between July and December 2003. Adult members were classified as those 18 years of age and older, while child members were defined as those 17 years of age and younger. WB&A was responsible for pulling a random sample of eligible members from each managed care plan for participation in this survey.
- Across all Medi-Cal managed care plans, a total of 39,341 adult and 85,020 child surveys were mailed. Between the middle of February and the middle of May 2004, a total of 14,363 adult and 32,088 child surveys were completed.

	Adult Members	Child Members (General Population/Sample A)
Number of surveys completed	14,363	16,929
NCQA-adjusted response rate	39%	37%

Background and Research Approach (continued)

Medi-Cal Managed Care Contracted Health Plans

Plan Name	Plan Abbreviation	Contract Type	County (ies) of Operation
Blue Cross of California	Blue Cross (CP)	CP	Alameda
			Fresno
			Contra Costa
			San Joaquin
			San Francisco
			Kern
	Santa Clara		
	Blue Cross (GMC-North)	GMC	Sacramento
Blue Cross (GMC-South)	GMC	San Diego	
Blue Cross (Stanislaus)	LI	Stanislaus	
Blue Cross (Tulare)	LI	Tulare	
Health Net	Health Net (CP)	CP	Fresno
			Los Angeles
			Tulare
	Health Net (GMC-North)	GMC	Sacramento
Health Net (GMC-South)	GMC	San Diego	
Kaiser Foundation (North)	Kaiser (GMC-North)	GMC	Sacramento
Kaiser Foundation (South)	Kaiser (GMC-South)	GMC	San Diego
Molina Healthcare	Molina Healthcare (GMC-North)	GMC	Sacramento
	Molina Healthcare of California	CP	San Bernardino Riverside
Alameda Alliance for Health	Alameda Alliance for Health	LI	Alameda
Contra Costa Health Plan	Contra Costa Health Plan	LI	Contra Costa
Health Plan of San Joaquin	Health Plan of San Joaquin	LI	San Joaquin

Plan Name	Plan Abbreviation	Contract Type	County (ies) of Operation
Inland Empire Health Plan	Inland Empire Health Plan	LI	Riverside
			San Bernardino
Kern Family Health Care	Kern Family Health Care	LI	Kern
L.A. Care Health Plan	L.A. Care Health Plan	LI	Los Angeles
San Francisco Health Plan	San Francisco Health Plan	LI	San Francisco
Santa Clara Family Health Plan	Santa Clara Family Health Plan	LI	Santa Clara
CalOptima	CalOptima	COHS	Orange
Health Plan of San Mateo	Health Plan of San Mateo	COHS	San Mateo
Partnership Health Plan of California	Partnership HealthPlan	COHS	Solano
			Yolo
			Napa
Santa Barbara Regional Health Authority	Santa Barbara Regional Health Authority	COHS	Santa Barbara
Central Coast Alliance for Health	Central Coast Alliance	COHS	Santa Cruz
			Monterey
Western Health Advantage	Western Health Advantage	GMC	Sacramento
Community Health Group	Community Health Group	GMC	San Diego
Sharp Health Plan	Sharp Health Plan	GMC	San Diego
Universal Care	Universal Care	GMC	San Diego

Background and Research Approach (continued)

Notes for Reading:

1. For purposes of brevity, certain terms are used throughout this report to define the population segments surveyed. The term “child members” refers to the general population of randomly selected child members (Sample A) prior to oversampling for children with diagnoses indicative of a probable chronic condition. The term “CSHCN” refers to all child members surveyed who met the criteria for Children with Special Health Care Needs and the term “non-CSHCN” refers to all child members surveyed who did not meet this criteria.
2. The Medi-Cal Adult and Child Managed Care Overall Averages are calculated from the ratings of all 29 contracts within the Medi-Cal managed care plans and were weighted to be proportionate to plan enrollment.
3. A Medi-Cal Managed Care Overall Average was not calculated for CSHCN and Non-CSHCN members because these segments were identified based on their responses to the questions pertaining to children with special health care needs. Specifically, 30% of the child members across all Medi-Cal managed care plans qualified as having special health care needs (out of 32,088 completed child surveys).
4. The table below explains the Medi-Cal managed care contract models in detail.

Model	Characteristics
Geographic Managed Care (GMC)	Mandatory enrollment of Temporary Assistance to Needy Families (TANF) population into commercially operated managed care plan, with enrollee choosing between multiple plans in area.
County-Organized Health System (COHS)	Mandatory enrollment of nearly all Medi-Cal eligible population into managed care system developed by the county.
Two-Plan Model (includes Commercial Plans [CPs] and Local Initiatives [LIs])	Mandatory enrollment of TANF population into one of two managed care entities. CP is a commercially operated managed care plan and LI is a community-developed plan designed to meet the specific needs of the community served. Both CP and LI model plans can subcontract with entities to provide services in the respective county of operation.

MEDI-CAL MANAGED CARE CONTRACTED PLAN RESULTS

Medi-Cal Managed Care Contracted Plan Results

- Overall, the areas of high performance across the program generally relate to access at the plan level, while the areas identified as opportunities for improvement are more related to dissatisfaction at the provider level.
- Based on the percentage of members giving the most positive responses to a question, the following areas are identified as high performers across the program:
 - Getting a personal doctor or nurse member is happy with;
 - Getting care, tests or treatment that they or their doctor believed necessary;
 - Not experiencing delays in health care while waiting for approval from their plan; and
 - Ease of finding or understanding information in written materials from their plan or on the Internet.
- Conversely, based on the percentage of members that gave the most negative responses to a question, the following areas are identified as opportunities for improvement across the program:
 - Being able to see a specialist when needed;
 - Receiving the help or advice needed when calling during regular office hours;
 - Scheduling appointments for health care as soon as member wanted;
 - Getting care needed for an illness, injury or condition as soon as member wanted;
 - Not being taken into the exam room within 15 minutes of appointment time;
 - The amount of time their doctor spends with them; and
 - The office staff being helpful at the doctor's office (although to a lesser extent than the other categories).

Medi-Cal Managed Care Contracted Plan Results (continued)

Composite scores are groupings of several questions that measure similar aspects of health care or health plan services. The table below illustrates the composite areas, the questions that comprise each area and the question abbreviations that are shown on the following pages.

Composite Areas	Abbreviations
<p><u>Getting Needed Care</u></p> <p>How much of a problem, if any, was it to get a personal doctor or nurse you are happy with?</p> <p>In the last six months, how much of a problem, if any, was it to see a specialist that you needed to see?</p> <p>In the last six months, how much of a problem, if any, was it to get the care, tests or treatment that you or a doctor believed necessary?</p> <p>In the last six months, how much of a problem, if any, were delays in health care while you waited for approval from your health plan?</p>	<p>Get Dr. happy with</p> <p>See a specialist needed</p> <p>Get care/tests/treatment</p> <p>Delays in health care</p>
<p><u>Getting Care Quickly</u></p> <p>In the last six months, when you called during regular office hours, how often did you get the help or advice you needed?</p> <p>In the last six months, when you needed care right away for an illness, injury or condition, how often did you get care as soon as you wanted?</p> <p>In the last six months, not counting the times you needed health care right away, how often did you get an appointment for health care as soon as you wanted?</p> <p>In the last six months, how often were you taken to the exam room within 15 minutes of your appointment?</p>	<p>Received help needed</p> <p>Got care needed for illness</p> <p>Got appt for health care</p> <p>Taken to exam room w/in 15 mins.</p>
<p><u>How Well Doctors Communicate</u></p> <p>In the last six months, how often did doctors or other health providers listened carefully to you?</p> <p>In the last six months, how often did doctors or other health providers explain things in a way you could understand?</p> <p>In the last six months, how often did doctors or other health providers show respect for what you had to say?</p> <p>In the last six months, how often did doctors or other health providers spend enough time with you?</p>	<p>Listened to patient</p> <p>Explained things to patient</p> <p>Showed respect for whatpatient had to say</p> <p>Spent enough time with patient</p>
<p><u>Courteous and Helpful Office Staff</u></p> <p>In the last six months, how often did office staff at your doctor's office or clinic treat you with courtesy and respect?</p> <p>In the last six months, how often were office staff at your doctor's office or clinic as helpful as you thought they should be?</p>	<p>Treated patients w/ courtesy/respect</p> <p>Were helpful</p>
<p><u>Health Plan's Customer Service</u></p> <p>In the last six months, how much of a problem, if any, was it to find or understand information in written materials or on the Internet?</p> <p>In the last six months, how much of a problem, if any, was it to get the help you needed when you called your health plan's customer service?</p>	<p>Ease of finding info</p> <p>Get help when calling</p>

Medi-Cal Managed Care Contracted Plan Results (continued)

Notes for understanding this chart:

Blue percentages show areas where the contracted plan is performing well. That is, received a score of 80% or better in the *not a problem/always* response category or the most positive category.

Red percentages identify potential areas of concern where the contracted plan is receiving a score of 20% or greater in the *big problem/never or only sometimes* category or the negative category.

No percentage shown identifies areas where a plan's result for that measure was between 20% of the most negative rating and 80% of the most positive rating.

	Getting Needed Care				Getting Care Quickly				Doctors Communicate				Office Staff		Customer Service	
	Get Dr. happy with	See a specialist needed	Get care/ tests/ treatment	Delays in health care	Received help needed	Got care needed for illness	Got appt for health care	Taken to exam room w/in 15 mins.	Listened to patient	Explained things to patient	Showed respect for what patient had to say	Spent enough time with patient	Treated patient w/ courtesy/ respect	Were helpful	Ease of finding info	Get help when calling
Alameda Alliance for Health																
Adult		23%		84%	26%	26%	37%	66%		22%		30%		24%		
Child	82%			92%	22%		21%	53%								
CSHCN	81%		82%	88%				53%								
Non-CSHCN	81%			95%			21%	54%							80%	
Blue Cross (CP)																
Adult				84%	28%	24%	28%	66%		20%		25%				
Child		24%		89%	25%	21%	22%	62%				23%				
CSHCN		25%		83%	24%	22%	21%	63%				21%				
Non-CSHCN				94%	23%		20%	59%				23%				
Blue Cross (GMC-North)																
Adult	24%	35%			31%	35%	38%	68%	22%	26%	24%	31%	21%	27%		
Child		26%		90%	21%	24%	21%	59%				22%				
CSHCN		27%				21%		54%								
Non-CSHCN				94%				63%				20%				
Blue Cross (GMC-South)																
Adult		24%			32%	26%	36%	65%		20%		21%		25%		
Child				90%	21%	20%	20%	56%				22%				
CSHCN		21%			23%		20%	58%								20%
Non-CSHCN				94%	21%	20%	21%	55%				23%			81%	
Blue Cross (Stanislaus)																
Adult		25%		84%	29%	28%	32%	70%		20%		25%		24%		
Child		21%		94%	23%	24%	30%	65%				24%		21%		
CSHCN	24%	24%		84%	21%	22%	28%	62%				24%				21%
Non-CSHCN				95%	27%	25%	28%	64%				24%				
Blue Cross (Tulare)																
Adult		29%		83%	39%	36%	28%	68%				22%		22%		
Child			82%	96%	20%		21%	64%							90%	83%
CSHCN			81%	91%	23%	20%	20%	69%				22%		22%		
Non-CSHCN	84%		81%	96%	21%	20%	22%	66%				21%			81%	80%



Medi-Cal Managed Care Contracted Plan Results (continued)

Notes for understanding this chart:

Blue percentages show areas where the contracted plan is performing well. That is, received a score of 80% or better in the *not a problem/always* response category or the most positive category.

Red percentages identify potential areas of concern where the contracted plan is receiving a score of 20% or greater in the *big problem/never or only sometimes* category or the negative category.

No percentage shown identifies areas where a plan's result for that measure was between 20% of the most negative rating and 80% of the most positive rating.

	Getting Needed Care				Getting Care Quickly				Doctors Communicate				Office Staff		Customer Service	
	Get Dr. happy with	See a specialist needed	Get care/ tests/ treatment	Delays in health care	Received help needed	Got care needed for illness	Got appt for health care	Taken to exam room w/in 15 mins.	Listened to patient	Explained things to patient	Showed respect for what patient had to say	Spent enough time with patient	Treated patient w/ courtesy/ respect	Were helpful	Ease of finding info	Get help when calling
CalOptima																
Adult				81%	21%	22%	27%	61%								
Child		21%		91%	22%		23%	62%				21%				
CSHCN		27%			28%	25%	26%	61%					21%			27%
Non-CSHCN	81%			94%	21%	23%	22%	59%				21%				
Central Coast Alliance																
Adult				83%			22%	53%								
Child				93%	23%	23%	24%	54%				20%				
CSHCN				85%			23%	51%								
Non-CSHCN			83%	96%	27%	24%	24%	57%				20%				
Community Health Group																
Adult		20%			34%	36%	32%	68%				27%		22%		
Child	86%		85%	92%		22%		65%							88%	
CSHCN						23%	20%	59%							84%	
Non-CSHCN	85%		82%	92%		25%	22%	62%				21%			89%	80%
Contra Costa Health Plan																
Adult				82%	26%	25%	33%	68%								
Child				92%		24%	29%	54%				23%				
CSHCN	21%			84%	23%	25%	24%	55%								
Non-CSHCN				96%		24%	29%	59%				21%			82%	
Health Net (CP)																
Adult					31%	28%	32%	64%		21%		25%		23%	81%	
Child		26%		89%	26%	24%	28%	60%				25%		20%		
CSHCN		28%		80%	24%	22%	29%	57%				21%		23%	21%	26%
Non-CSHCN				93%		24%	21%	60%				23%			81%	
Health Net (GMC-North)																
Adult		34%			34%	40%	33%	69%	23%	32%	26%	34%	23%	29%		
Child		23%		91%	23%	21%	24%	63%				28%				
CSHCN	23%	29%			23%		27%	67%			20%	26%		21%		
Non-CSHCN		24%		94%	24%	26%	23%	62%				30%			81%	



Medi-Cal Managed Care Contracted Plan Results (continued)

Notes for understanding this chart:

Blue percentages show areas where the contracted plan is performing well. That is, received a score of 80% or better in the *not a problem/always* response category or the most positive category.

Red percentages identify potential areas of concern where the contracted plan is receiving a score of 20% or greater in the *big problem/never or only sometimes* category or the negative category.

No percentage shown identifies areas where a plan's result for that measure was between 20% of the most negative rating and 80% of the most positive rating.

	Getting Needed Care				Getting Care Quickly				Doctors Communicate				Office Staff		Customer Service	
	Get Dr. happy with	See a specialist needed	Get care/ tests/ treatment	Delays in health care	Received help needed	Got care needed for illness	Got appt for health care	Taken to exam room w/in 15 mins.	Listened to patient	Explained things to patient	Showed respect for what patient had to say	Spent enough time with patient	Treated patient w/ courtesy/ respect	Were helpful	Ease of finding info	Get help when calling
Health Net (GMC-South)																
Adult	20%	30%	20%		32%	31%	40%	64%	20%	21%		24%		23%		
Child	83%			90%	28%	27%	25%	57%								
CSHCN				85%	33%	24%	36%	51%				24%		20%	80%	
Non-CSHCN	84%		82%	91%	26%	28%	22%	59%								
Health Plan of San Joaquin																
Adult		24%			29%	32%	29%	63%		25%		23%		23%		
Child		25%		93%		21%	21%	60%				24%			82%	
CSHCN		22%		81%	22%	22%	25%	61%				29%				
Non-CSHCN	83%	22%		94%		20%		61%				24%			86%	
Health Plan of San Mateo																
Adult				87%	21%		26%	54%								
Child	80%			93%	26%		24%	55%				20%				
CSHCN				84%		20%	23%	49%								24%
Non-CSHCN	81%			95%	24%		23%	54%								
Inland Empire Health Plan																
Adult		22%			30%	37%	34%	71%	23%	21%	20%	28%		27%		
Child		29%		90%	22%	23%	20%	64%				24%				
CSHCN		22%		80%	25%	26%	24%	63%				23%				
Non-CSHCN	80%	21%		93%		22%	20%	62%				21%			85%	80%
Kaiser (GMC-North)																
Adult				95%			21%	36%								
Child	88%		82%	96%				37%				82%			84%	
CSHCN	84%		85%	94%				31%							81%	
Non-CSHCN	88%		81%	97%				38%				83%			85%	81%
Kaiser (GMC-South)																
Adult				92%			22%	33%								
Child	89%		83%	97%				31%				80%			84%	
CSHCN	88%		82%	95%				27%				80%			87%	25%
Non-CSHCN	89%		86%	98%				31%				81%				84%



Medi-Cal Managed Care Contracted Plan Results (continued)

Notes for understanding this chart:

Blue percentages show areas where the contracted plan is performing well. That is, received a score of 80% or better in the *not a problem/always* response category or the most positive category.

Red percentages identify potential areas of concern where the contracted plan is receiving a score of 20% or greater in the *big problem/never or only sometimes* category or the negative category.

No percentage shown identifies areas where a plan's result for that measure was between 20% of the most negative rating and 80% of the most positive rating.

	Getting Needed Care				Getting Care Quickly				Doctors Communicate				Office Staff		Customer Service	
	Get Dr. happy with	See a specialist needed	Get care/ tests/ treatment	Delays in health care	Received help needed	Got care needed for illness	Got appt for health care	Taken to exam room w/in 15 mins.	Listened to patient	Explained things to patient	Showed respect for what patient had to say	Spent enough time with patient	Treated patient w/ courtesy/ respect	Were helpful	Ease of finding info	Get help when calling
Kern Family Health Care																
Adult					20%	29%	23%	69%				24%		20%		
Child		30%		91%	22%	21%	23%	63%				28%		21%	86%	
CSHCN		28%		80%	25%	23%	28%	66%				25%				
Non-CSHCN	80%		83%	93%	24%	23%	23%	66%				26%		21%	86%	82%
L.A. Care Health Plan																
Adult		23%		80%	24%	29%	28%	58%						20%	80%	
Child	82%		85%	94%				55%				20%			84%	80%
CSHCN		27%		83%	24%		24%	54%								
Non-CSHCN	84%		85%	96%				54%				21%			86%	
Molina Healthcare of California																
Adult		27%			28%	32%	29%	67%				25%		21%		
Child	82%	20%		89%	22%	26%	22%	61%				26%		20%	87%	
CSHCN		27%			25%	22%	23%	59%		20%		22%		22%		
Non-CSHCN	85%		80%	92%	22%	25%	20%	59%				24%			88%	
Molina Healthcare (GMC-North)																
Adult		31%	22%	80%	38%	48%	40%	69%	25%	29%		28%	23%	28%		
Child				95%	23%	28%	23%	62%		21%		24%		20%		
CSHCN		22%		90%	23%	25%	20%	52%								
Non-CSHCN				96%	22%	32%	23%	64%		23%		27%				
Partnership HealthPlan																
Adult				86%				53%								23%
Child	80%			91%				47%								
CSHCN		21%				22%		46%								
Non-CSHCN	80%		80%	95%				49%				20%				
San Francisco Health Plan																
Adult				85%	24%	22%	30%	59%								
Child				92%	20%	21%	33%	62%								
CSHCN		24%	21%		22%	25%	33%	56%				22%				
Non-CSHCN				93%	21%		33%	61%				20%		20%	82%	



Medi-Cal Managed Care Contracted Plan Results (continued)

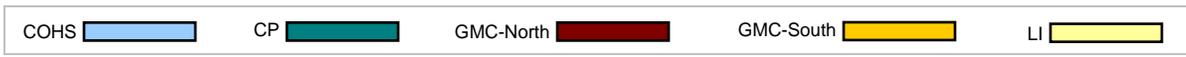
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No percentage shown identifies areas where a plan's result for that measure was between 20% of the most negative rating and 80% of the most positive rating.

	Getting Needed Care				Getting Care Quickly				Doctors Communicate				Office Staff		Customer Service	
	Get Dr. happy with	See a specialist needed	Get care/ tests/ treatment	Delays in health care	Received help needed	Got care needed for illness	Got appt for health care	Taken to exam room w/in 15 mins.	Listened to patient	Explained things to patient	Showed respect for what patient had to say	Spent enough time with patient	Treated patient w/ courtesy/ respect	Were helpful	Ease of finding info	Get help when calling
Santa Barbara Regional Health Authority																
Adult				83%			23%	45%								
Child				92%	20%	20%	20%	54%				23%				
CSHCN				82%	23%		20%	53%								
Non-CSHCN			83%	96%				54%				20%			80%	
Santa Clara Family Health Plan																
Adult		20%		83%	23%	23%	29%	54%								
Child		20%		95%	21%	25%	25%	59%				23%			81%	
CSHCN		20%		84%	25%	25%	23%	50%				22%				
Non-CSHCN			82%	96%		20%	23%	57%				20%				
Sharp Health Plan																
Adult		20%			26%	28%	31%	57%				25%				
Child	80%	24%		91%	21%	23%	24%	58%				20%			85%	
CSHCN		22%		80%			22%	55%								
Non-CSHCN	81%			94%	22%	23%	22%	57%				22%			88%	
Universal Care																
Adult		28%			29%	23%	31%	64%		21%		24%		20%		
Child	81%			91%	22%	20%	22%	57%				20%				
CSHCN		25%	20%		28%	20%	31%	59%		23%		27%		29%		25%
Non-CSHCN	86%		85%	94%	20%	21%	21%	58%								
Western Health Advantage																
Adult		20%			21%	26%	36%	55%				23%				
Child				95%	22%		30%	53%				21%				20%
CSHCN	23%	22%		88%	20%		24%	43%								40%
Non-CSHCN				95%	21%		33%	60%				24%			83%	



**OVERALL RATINGS AND COMPOSITE SCORES
BY MEDI-CAL MANAGED CARE MODEL-TYPE RESULTS**

Medi-Cal Managed Care Model-Type Results

- Overall, the County-Organized Health System (COHS) and the Geographic Managed Care (GMC) of Southern California are performing better than the other model-types for most of the measures rated.
- On the other hand, the Two-Plan Model among Commercial Plans (CP) and the Geographic Managed Care (GMC) of Northern California are performing below the Medi-Cal Managed Care Overall Average for most of the measures rated.
- Furthermore, the Two-Plan Model among Local Initiatives (LI) is performing somewhere in the middle.
- It's important to note that while the COHS are one of the high performers, this model-type received the lowest ratings among adult and child members for the Customer Service Composite.
- And GMC-North, while typically performing below the Medi-Cal Managed Care Overall Average, received the highest ratings among child members for the following composite areas:
 - How Well Doctors Communicate;
 - Courteous and Helpful Office Staff; and
 - Getting Care Quickly.

Medi-Cal Managed Care Model-Type Results (continued)

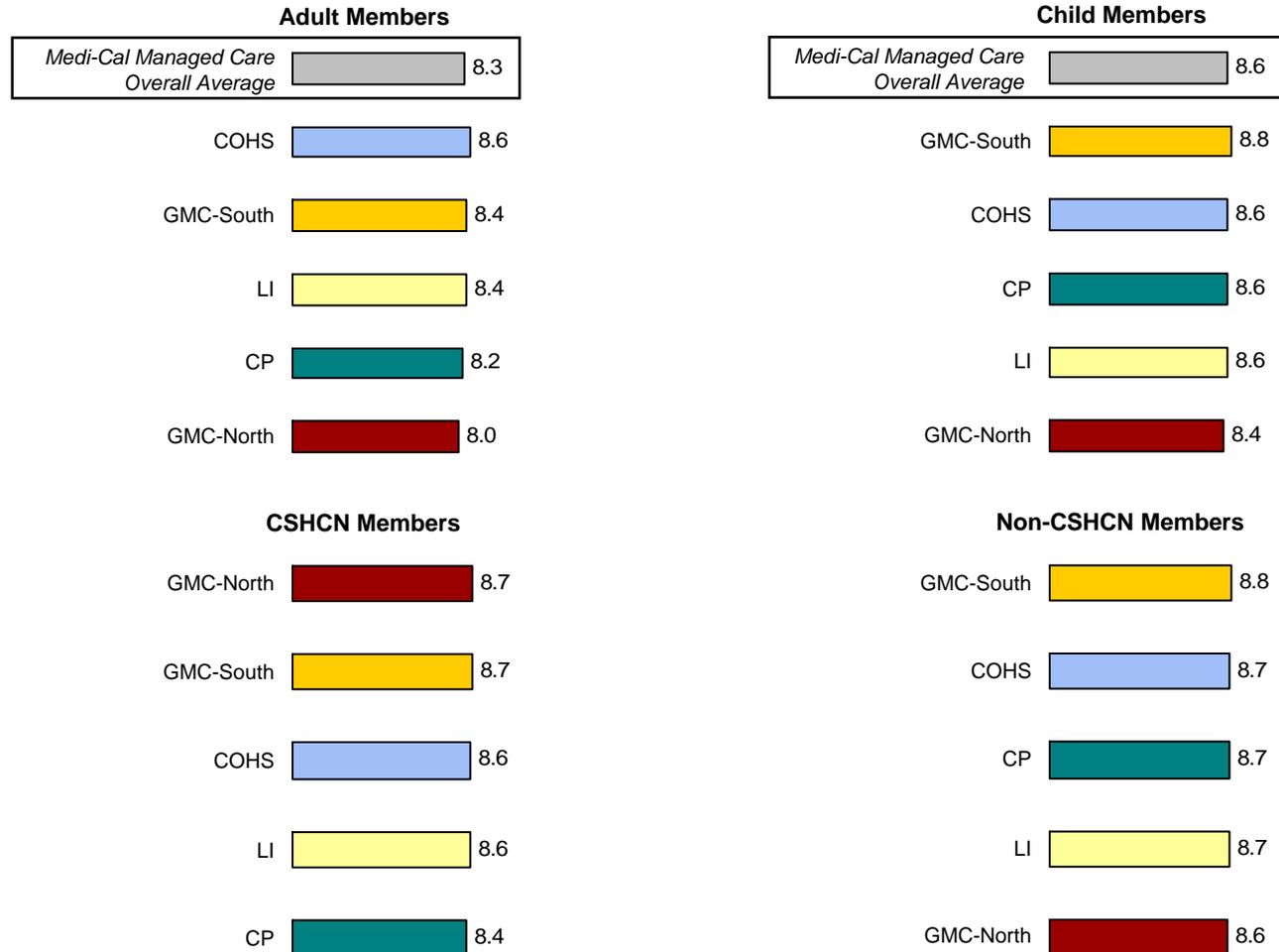
CSHCN vs. Non-CSHCN Results

- Overall, the findings suggest that parents/guardians of members who are identified as CSHCN are less satisfied with many of the measures rated than are non-CSHCN members, however, individual model-type ratings indicate a level of general satisfaction.
- Among each of the model-types, parents/guardians of members who were identified as non-CSHCN reported a significantly higher level of satisfaction with their child's health plan and health care overall than did the parents/guardians of CSHCN members.
 - In addition, among the COHS, CP and LI health plans, parents/guardians of members who were identified as non-CSHCN reported a significantly higher level of satisfaction with their child's personal doctor or nurse than did the parents/guardians of CSHCN members.
 - And, among the COHS and GMC-South health plans, parents/guardians of members who were identified as non-CSHCN indicated a significantly higher level of satisfaction with their child's specialist compared to the parents/guardians of CSHCN members.
- With the exception of the GMC-North health plans, parents/guardians of members who were identified as non-CSHCN, across the remaining four model-types, reported a significantly higher level of satisfaction with the Getting Needed Care and Customer Service composites than did the parents/guardians of CSHCN members.
 - Meanwhile, among the COHS health plans, parents/guardians of members who were identified as CSHCN reported a significantly higher level of satisfaction with the Courteous and Helpful Office Staff composites than did the parents/guardians of non-CSHCN members.
 - And, among the LI health plans, parents/guardians of members who were identified as CSHCN reported a significantly higher level of satisfaction with the How Well Doctors Communicate and Courteous and Helpful Office Staff composites than did the parents/guardians of non-CSHCN members.

Overall Ratings by Model-Type

Personal Doctor/Nurse Ratings (Mean/Average Rating)

Members who have one person they think of as their personal doctor or nurse were asked to rate their personal doctor or nurse overall using a “0 to 10” scale, where a “0” means the worst personal doctor or nurse possible and a “10” means the best personal doctor or nurse possible.

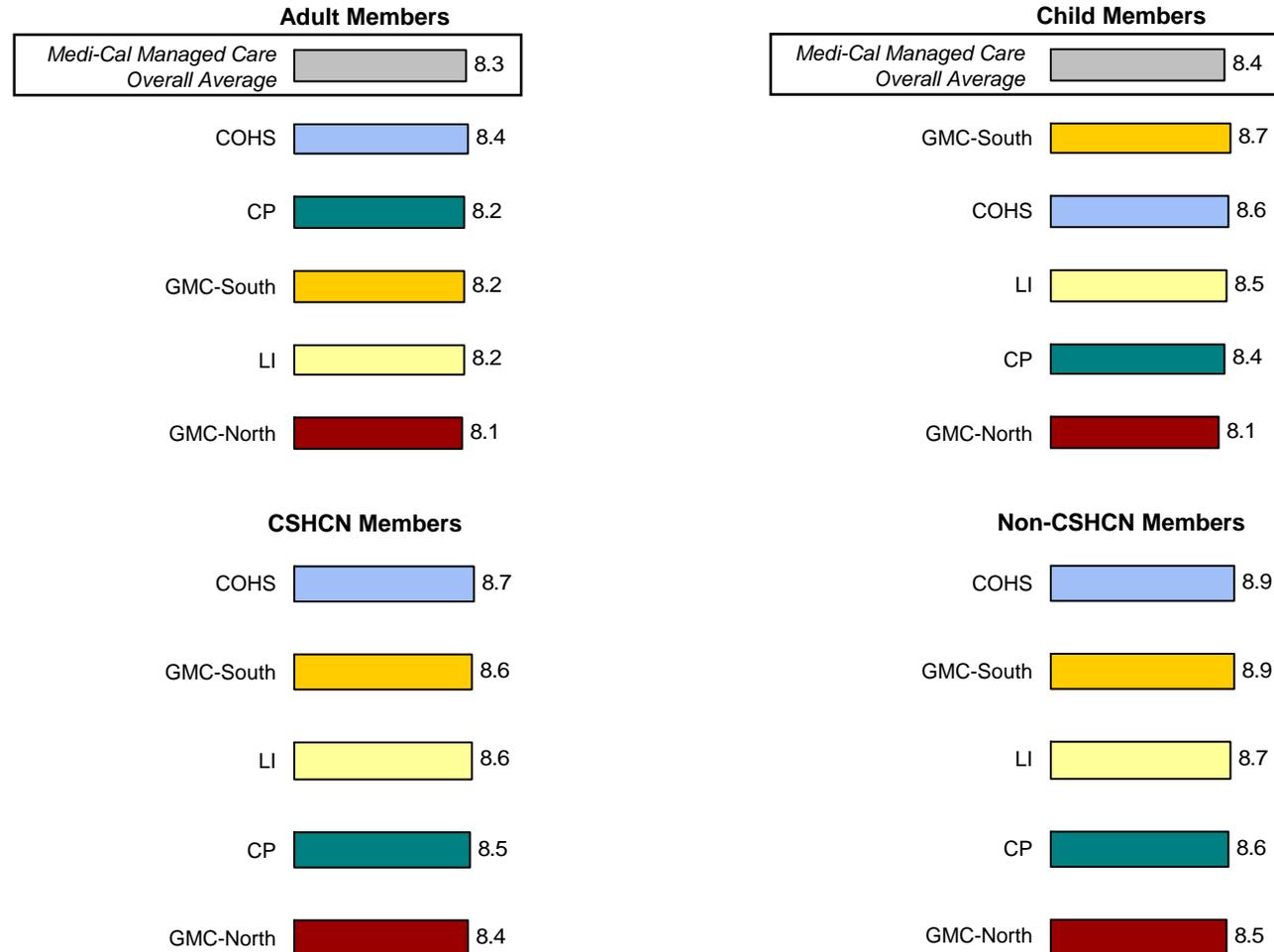


Note: The Medi-Cal Managed Care Overall Average was calculated from the ratings of all 29 Medi-Cal managed care plans operating in California and was weighted by plan enrollment. The Medi-Cal Managed Care Overall Average was not calculated for CSHCN and Non-CSHCN members because these segments were identified based on their responses to the questions pertaining to children with special health care needs. For purposes of brevity, the term “child members” refers to the general population of randomly selected child members (Sample A) prior to oversampling for children with diagnoses indicative of a probable chronic condition. The term “CSHCN” refers to all child members surveyed who met the criteria for Children with Special Health Care Needs and the term “non-CSHCN” refers to all child members surveyed who did not meet this criteria.

Overall Ratings by Model-Type (continued)

Specialist Ratings (Mean/Average Rating)

Members who had seen a specialist in the past six months were asked to rate their specialist overall using a “0 to 10” scale, where a “0” means the worst specialist possible and a “10” means the best specialist possible.



Note: The Medi-Cal Managed Care Overall Average was calculated from the ratings of all 29 Medi-Cal managed care plans operating in California and was weighted by plan enrollment. The Medi-Cal Managed Care Overall Average was not calculated for CSHCN and Non-CSHCN members because these segments were identified based on their responses to the questions pertaining to children with special health care needs. For purposes of brevity, the term “child members” refers to the general population of randomly selected child members (Sample A) prior to oversampling for children with diagnoses indicative of a probable chronic condition. The term “CSHCN” refers to all child members surveyed who met the criteria for Children with Special Health Care Needs and the term “non-CSHCN” refers to all child members surveyed who did not meet this criteria.

Overall Ratings by Model-Type (continued)

Health Care Ratings (Mean/Average Rating)

Members who went to a doctor's office or clinic in the past six months were asked to rate their health care overall using a "0 to 10" scale, where a "0" means the worst health care possible and a "10" means the best health care possible.

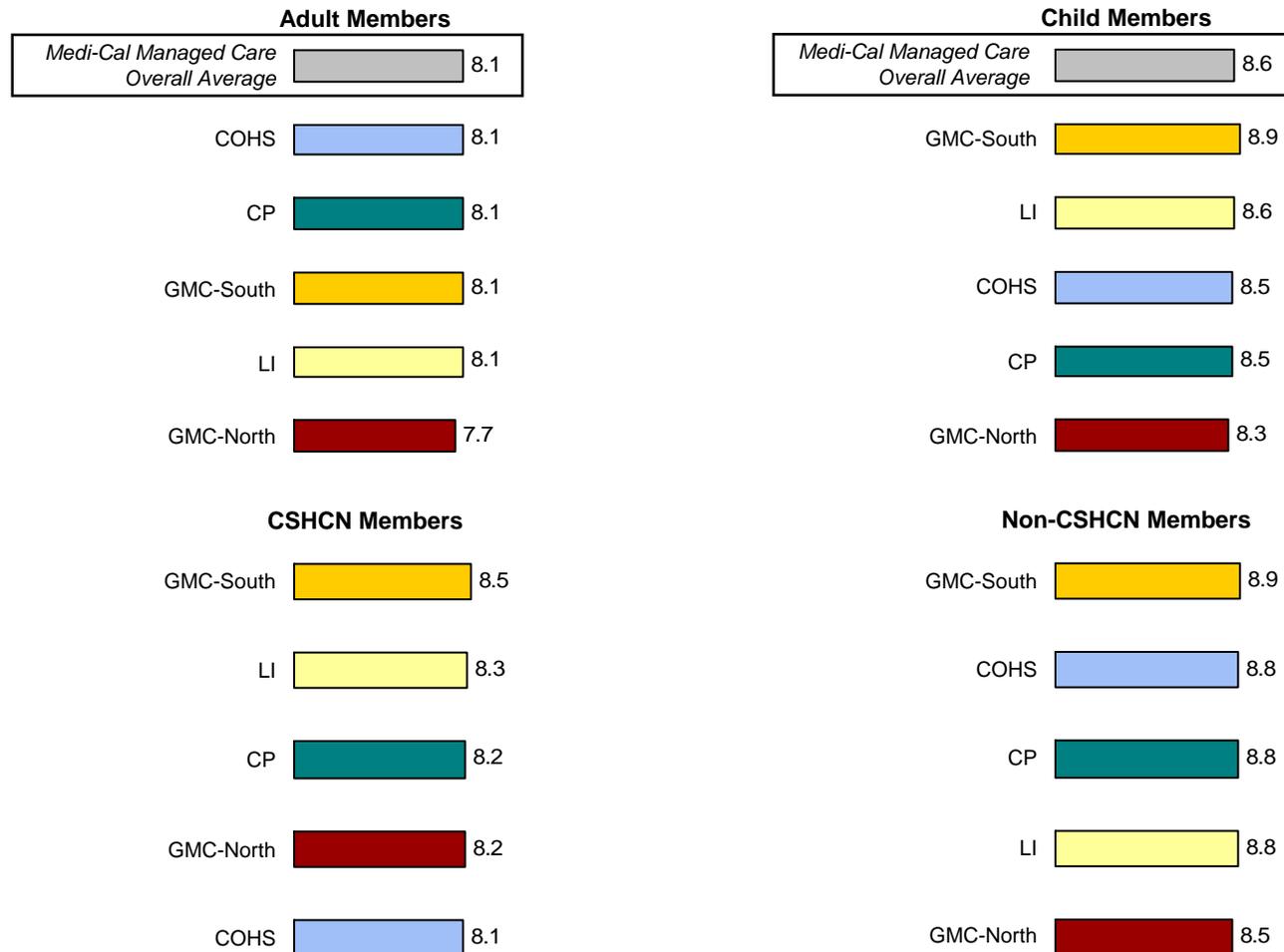


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Overall Ratings by Model-Type (continued)

Health Plan Ratings (Mean/Average Rating)

Members were asked to rate their health plan overall using a “0 to 10” scale, where a “0” means the worst health plan possible and a “10” means the best health plan possible.



Note: The Medi-Cal Managed Care Overall Average was calculated from the ratings of all 29 Medi-Cal managed care plans operating in California and was weighted by plan enrollment. The Medi-Cal Managed Care Overall Average was not calculated for CSHCN and Non-CSHCN members because these segments were identified based on their responses to the questions pertaining to children with special health care needs. For purposes of brevity, the term “child members” refers to the general population of randomly selected child members (Sample A) prior to oversampling for children with diagnoses indicative of a probable chronic condition. The term “CSHCN” refers to all child members surveyed who met the criteria for Children with Special Health Care Needs and the term “non-CSHCN” refers to all child members surveyed who did not meet this criteria.

Composite Scores by Model-Type

Getting Needed Care (Percent rated "Not a Problem")

Getting Needed Care is a composite score of four questions regarding whether it was a big problem, a small problem or not a problem to find a personal doctor or nurse with whom they were happy, to see a specialist, to get the necessary care needed, and to get care approved by the health plan without delays.

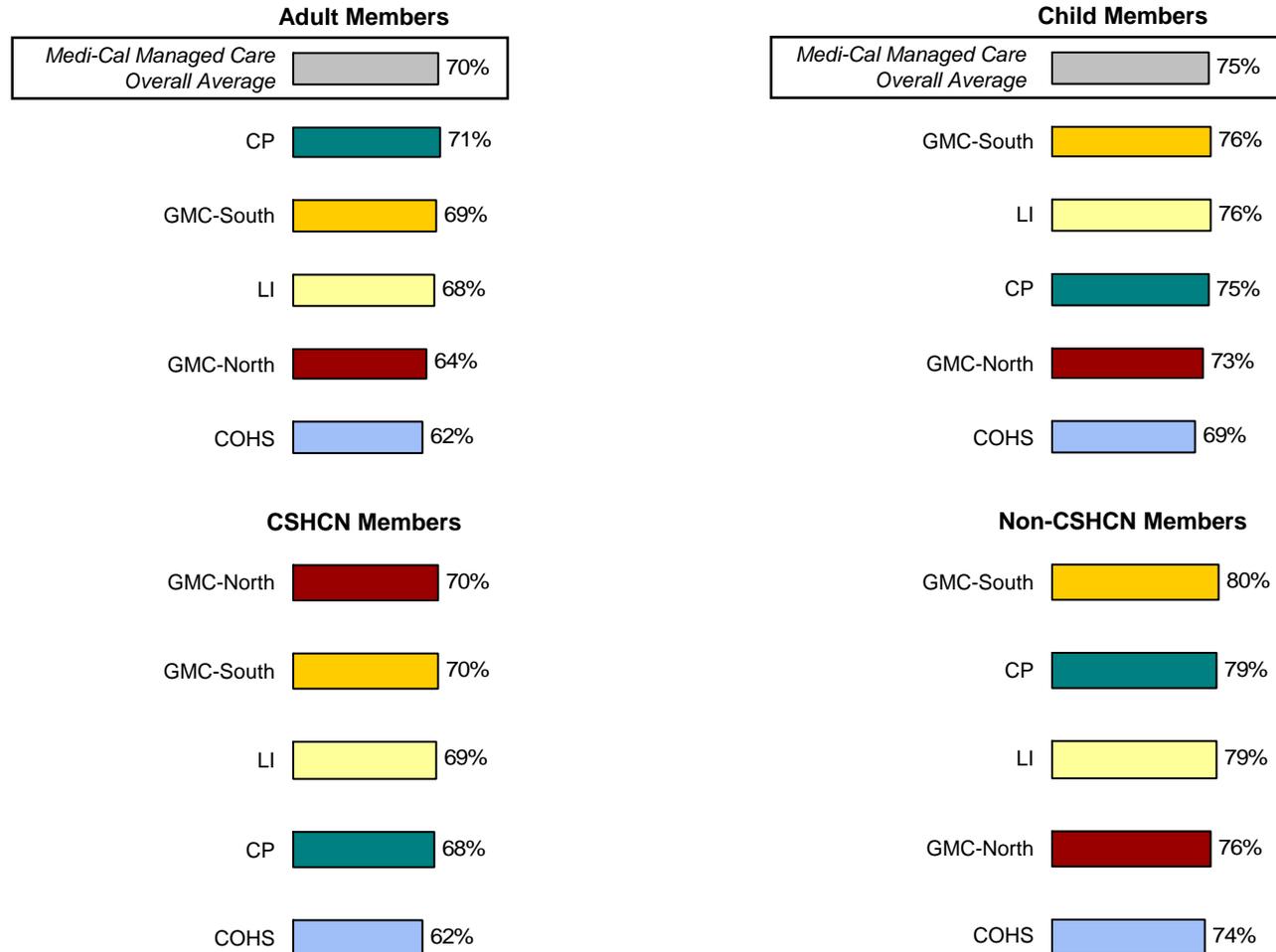


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Composite Scores by Model-Type (continued)

Customer Service (Percent rated "Not a Problem")

Customer Service is a composite score of two questions regarding whether it was a big problem, a small problem or not a problem to get information they needed in written materials from their health plan or on the Internet and to get help from customer service.

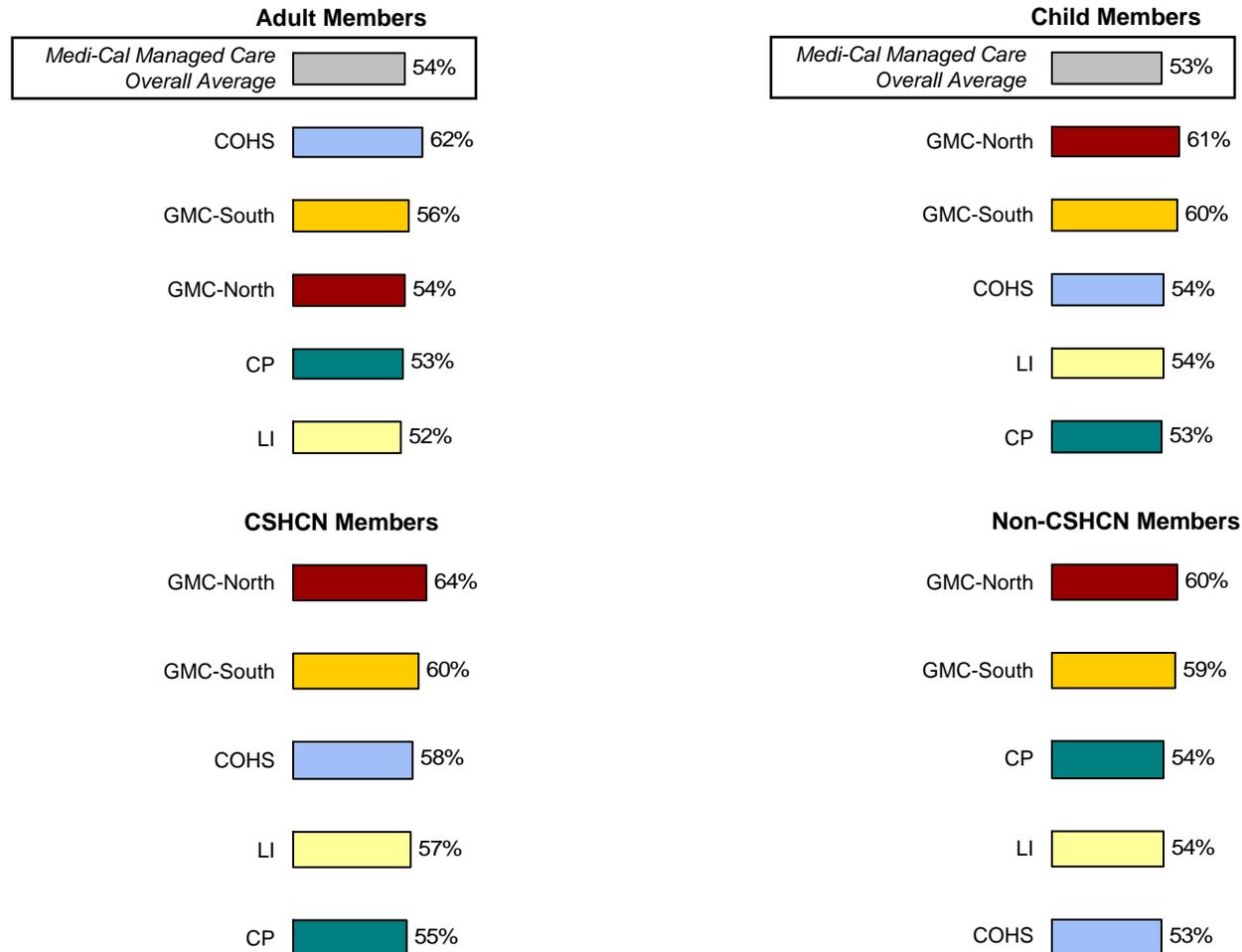


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Composite Scores by Model-Type (continued)

Courteous and Helpful Office Staff (Percent rated "Always")

Courteous and Helpful Office Staff is a composite score of two questions regarding whether medical office staff always, usually, sometimes or never were helpful to members and treated them with courtesy and respect.

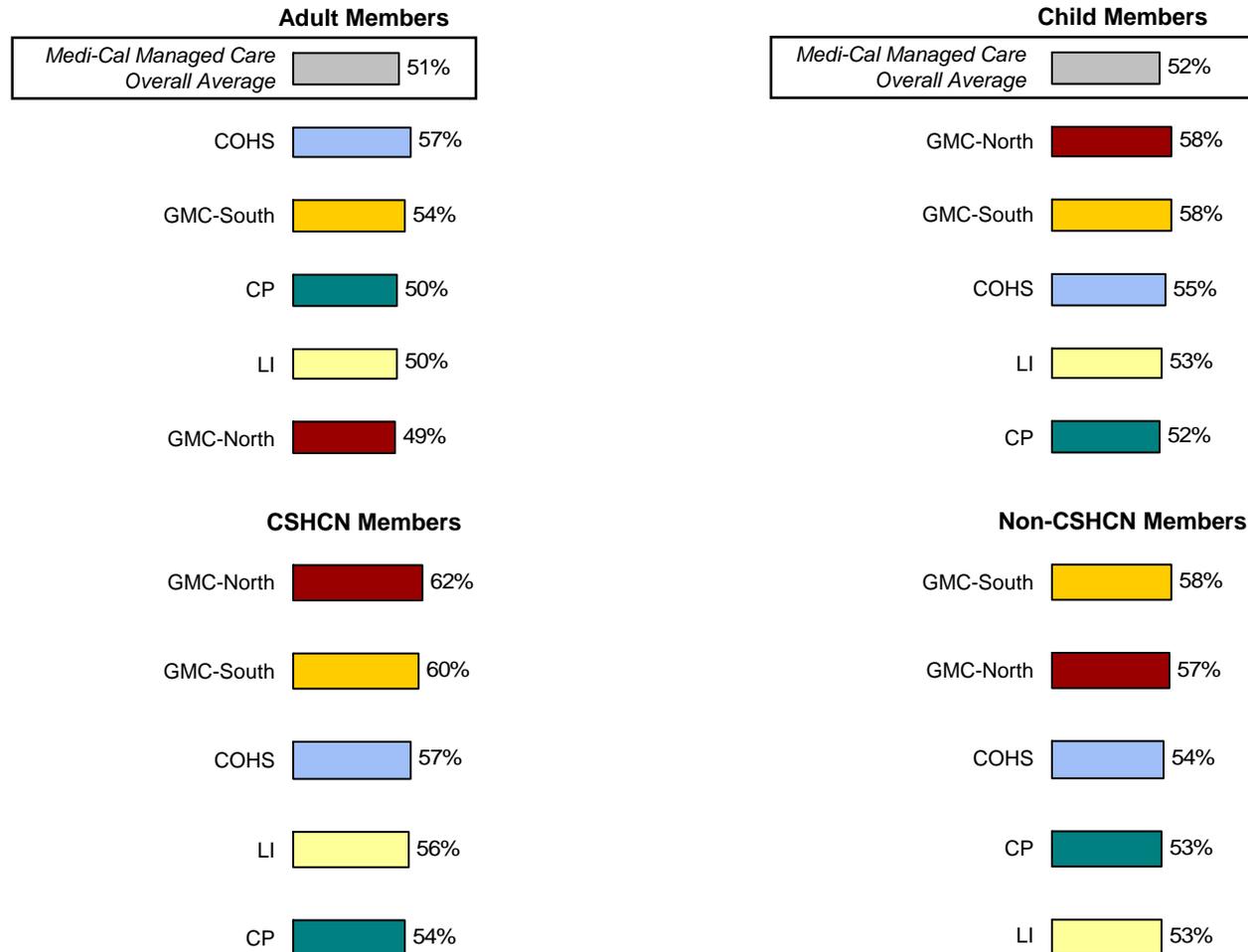


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Composite Scores by Model-Type (continued)

How Well Doctors Communicate (Percent rated "Always")

How Well Doctors Communicate is a composite score of four questions regarding whether providers always, usually, sometimes or never listened carefully to members, explained things in a way they could understand, showed respect for what they had to say, and spent enough time with them.

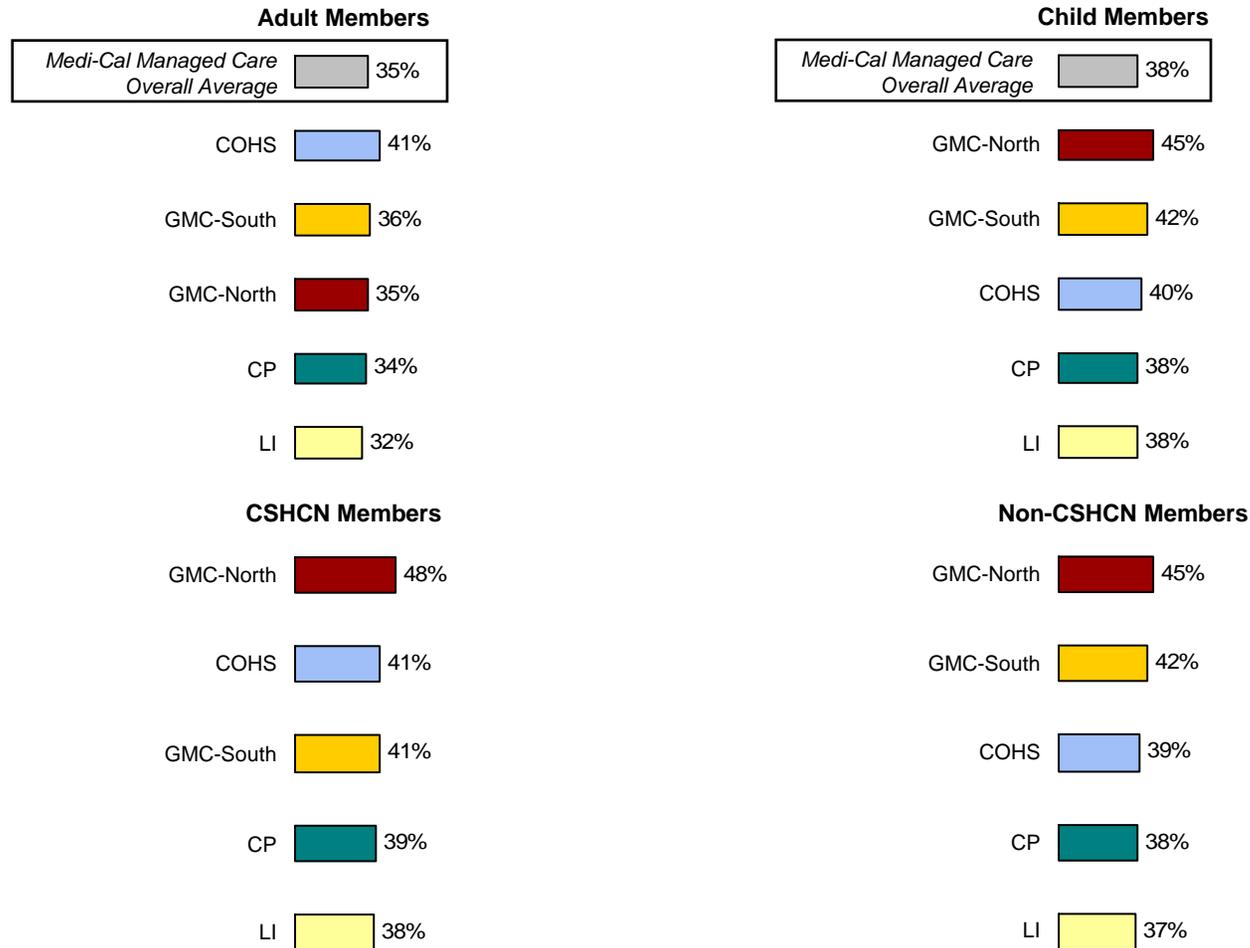


Note: The Medi-Cal Managed Care Overall Average was calculated from the ratings of all 29 Medi-Cal managed care plans operating in California and was weighted by plan enrollment. The Medi-Cal Managed Care Overall Average was not calculated for CSHCN and Non-CSHCN members because these segments were identified based on their responses to the questions pertaining to children with special health care needs. For purposes of brevity, the term "child members" refers to the general population of randomly selected child members (Sample A) prior to oversampling for children with diagnoses indicative of a probable chronic condition. The term "CSHCN" refers to all child members surveyed who met the criteria for Children with Special Health Care Needs and the term "non-CSHCN" refers to all child members surveyed who did not meet this criteria.

Composite Scores by Model-Type (continued)

Getting Care Quickly (Percent rated "Always")

Getting Care Quickly is a composite score of four questions regarding whether members always, usually, sometimes or never received help over the phone during regular office hours, got an appointment for health care as soon as they wanted, got an appointment for an illness, injury or condition, and were taken to the exam room within 15 minutes of their appointment time.



Note: The Medi-Cal Managed Care Overall Average was calculated from the ratings of all 29 Medi-Cal managed care plans operating in California and was weighted by plan enrollment. The Medi-Cal Managed Care Overall Average was not calculated for CSHCN and Non-CSHCN members because these segments were identified based on their responses to the questions pertaining to children with special health care needs. For purposes of brevity, the term "child members" refers to the general population of randomly selected child members (Sample A) prior to oversampling for children with diagnoses indicative of a probable chronic condition. The term "CSHCN" refers to all child members surveyed who met the criteria for Children with Special Health Care Needs and the term "non-CSHCN" refers to all child members surveyed who did not meet this criteria.

**OVERALL RATINGS AND COMPOSITE SCORES
BY MEDI-CAL MANAGED CARE CONTRACTED PLAN**

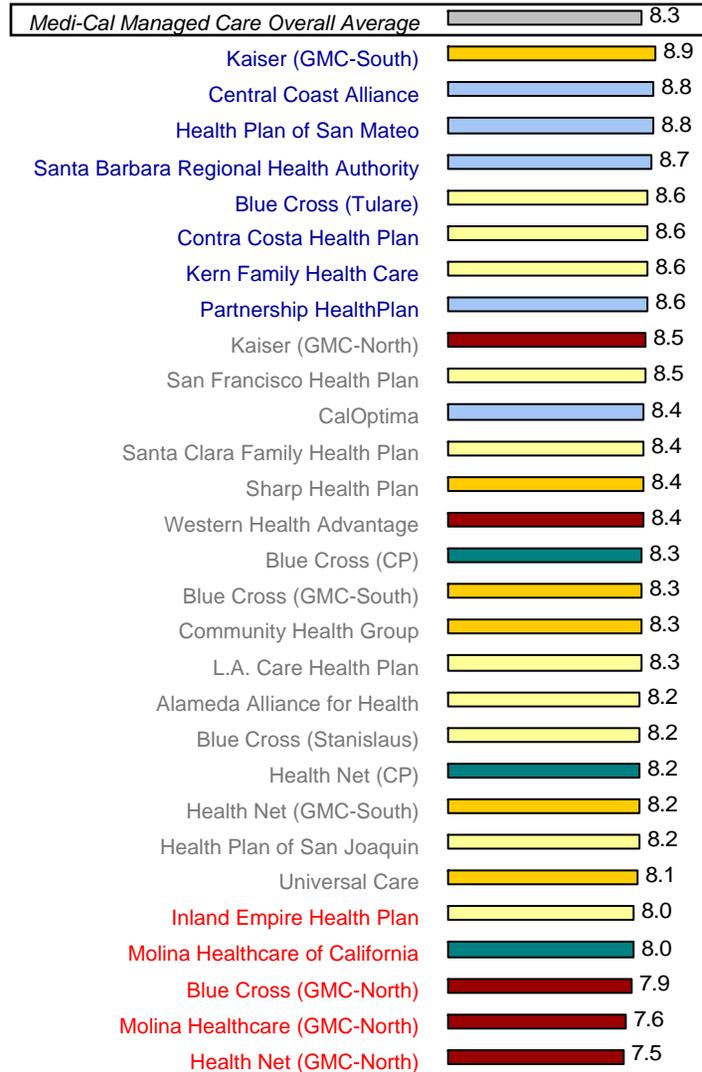
Medi-Cal Managed Care Contracted Plan Results

- Overall, the following contracted plans are identified as high performers for most of the measures rated:
 - Central Coast Alliance;
 - Health Plan of San Mateo;
 - Kaiser Permanente (GMC-North);
 - Kaiser Permanente (GMC-South);
 - Partnership Health Plan; and
 - Santa Barbara Regional Health Authority.
- Notably, four out of the five COHS plans are mentioned as plans that are performing well.
- In contrast, there are several plans that are performing below the Medi-Cal Managed Care Overall Average for most of the measures rated, these include:
 - Blue Cross of California (GMC-North);
 - Blue Cross of California (Stanislaus);
 - Health Net (GMC-North);
 - Inland Empire Health Plan; and
 - Molina Healthcare (GMC-North).
- Overall, the survey results show that each of the Medi-Cal managed care plans surveyed received higher ratings among all members for the following composite measures: *Getting Needed Care*, *Customer Service*, *Courteous and Helpful Office Staff*, and *How Well Doctors Communicate*, while the composite measure for *Getting Care Quickly* received the lowest ratings.

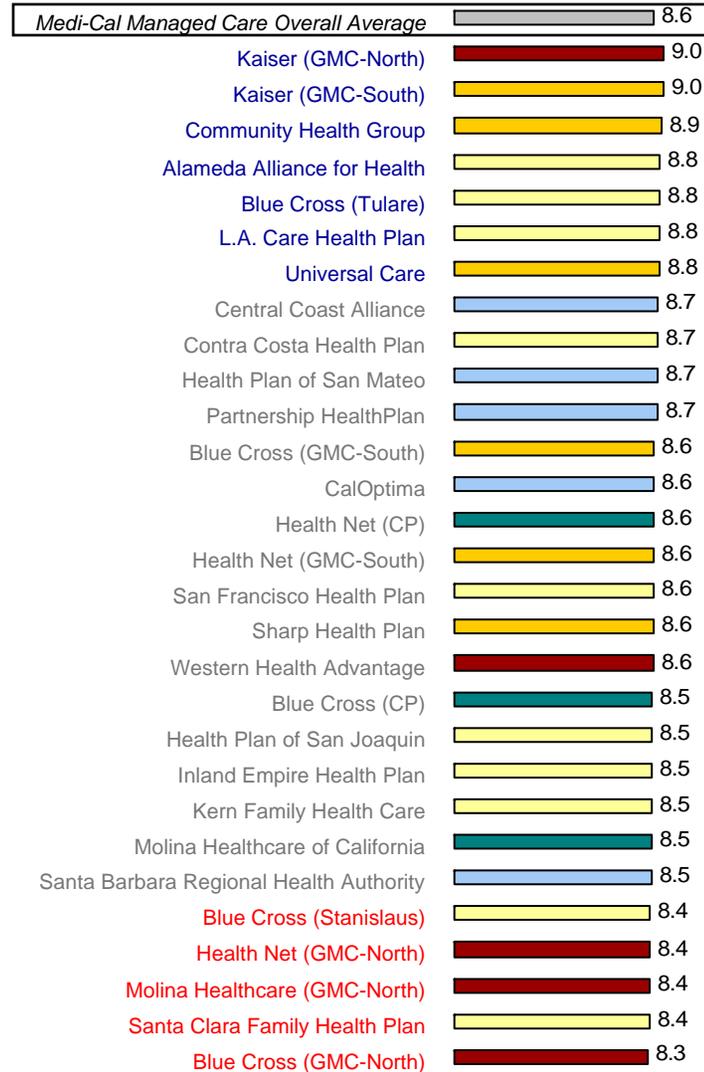
Overall Ratings by Contracted Plan

Personal Doctor/Nurse Ratings (Mean/Average Rating)

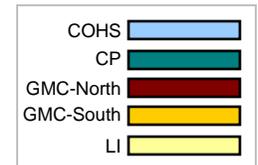
Adult Ratings



Child Ratings



Members who have one person they think of as their personal doctor or nurse were asked to rate their personal doctor or nurse overall using a "0 to 10" scale, where a "0" means the worst personal doctor or nurse possible and a "10" means the best personal doctor or nurse possible.

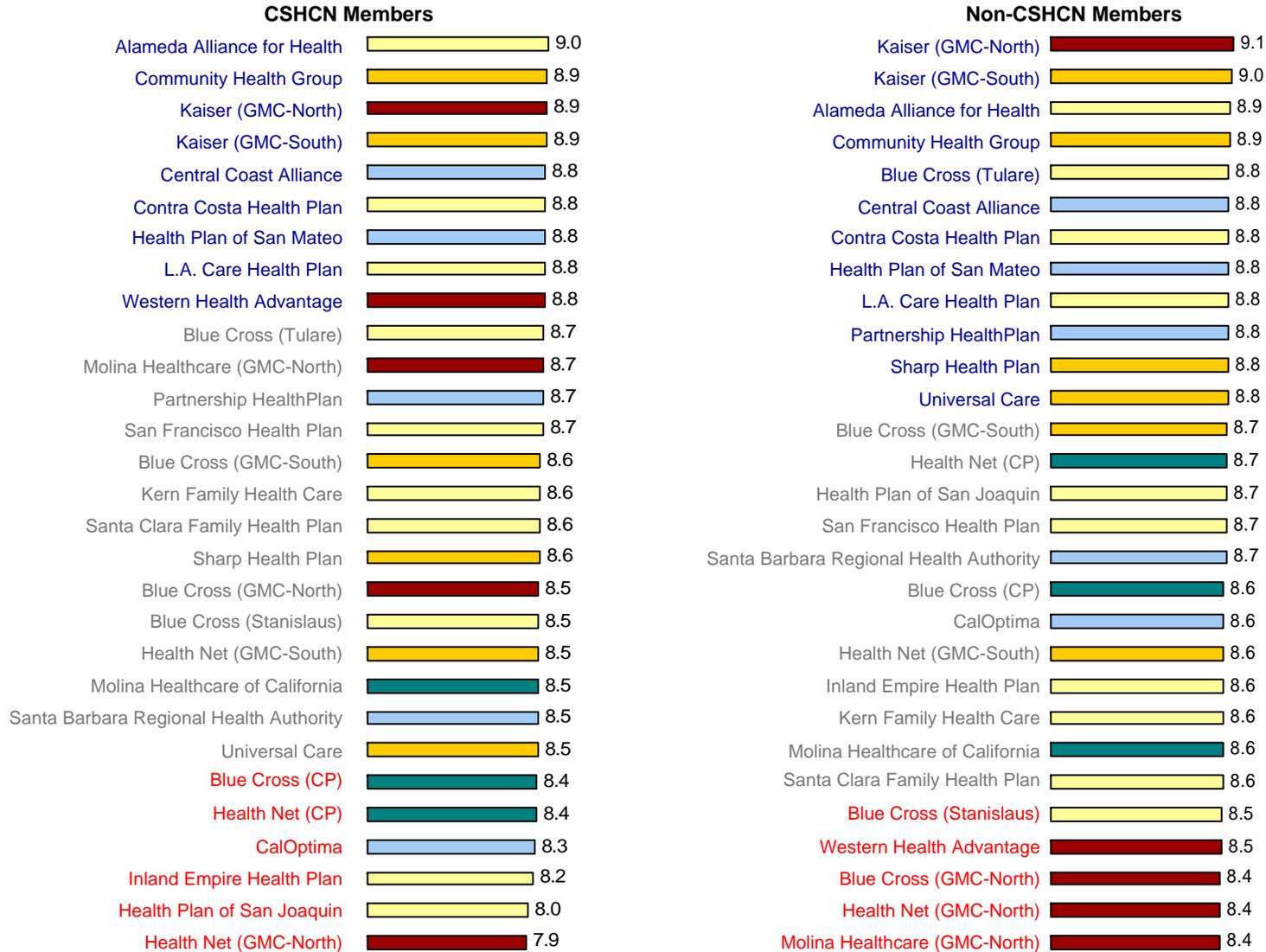


Plans in Blue = Top Five
Plans in Red = Bottom Five

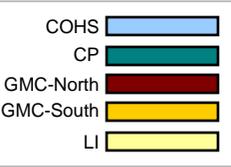
Note: The Medi-Cal Managed Care Overall Average was calculated from the ratings of all 29 Medi-Cal managed care contracted plans operating in California and was weighted by plan enrollment.

Overall Ratings by Contracted Plan (continued)

Personal Doctor/Nurse Ratings (Mean/Average Rating)



Members who have one person they think of as their personal doctor or nurse were asked to rate their personal doctor or nurse overall using a "0 to 10" scale, where a "0" means the worst personal doctor or nurse possible and a "10" means the best personal doctor or nurse possible.

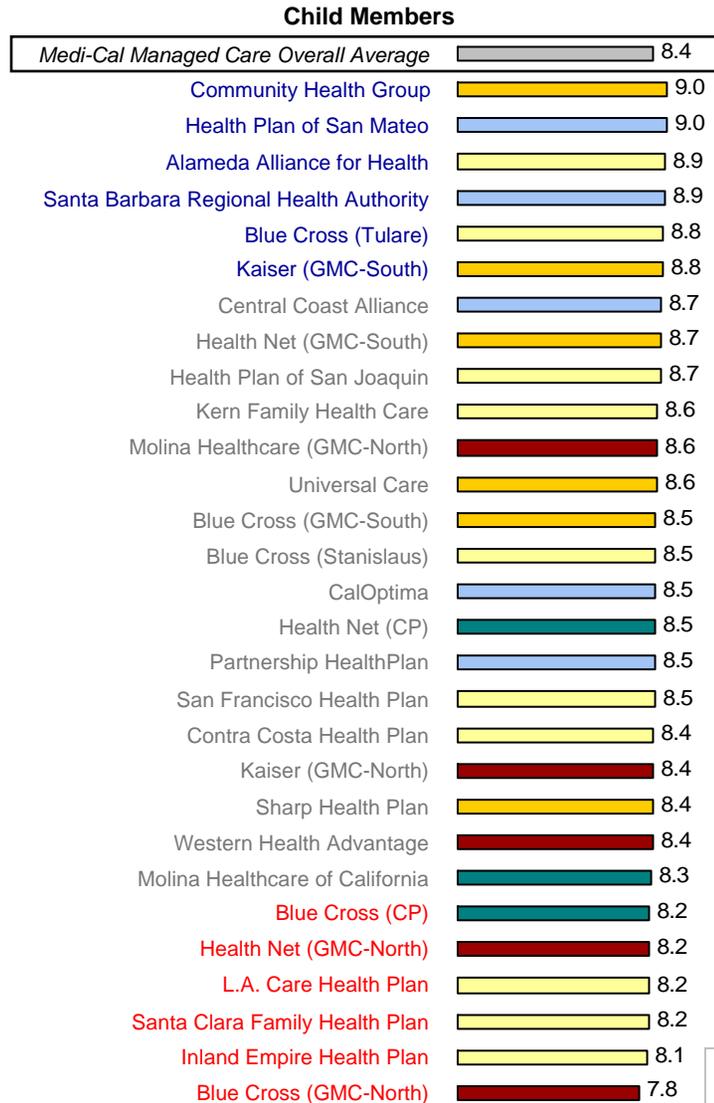
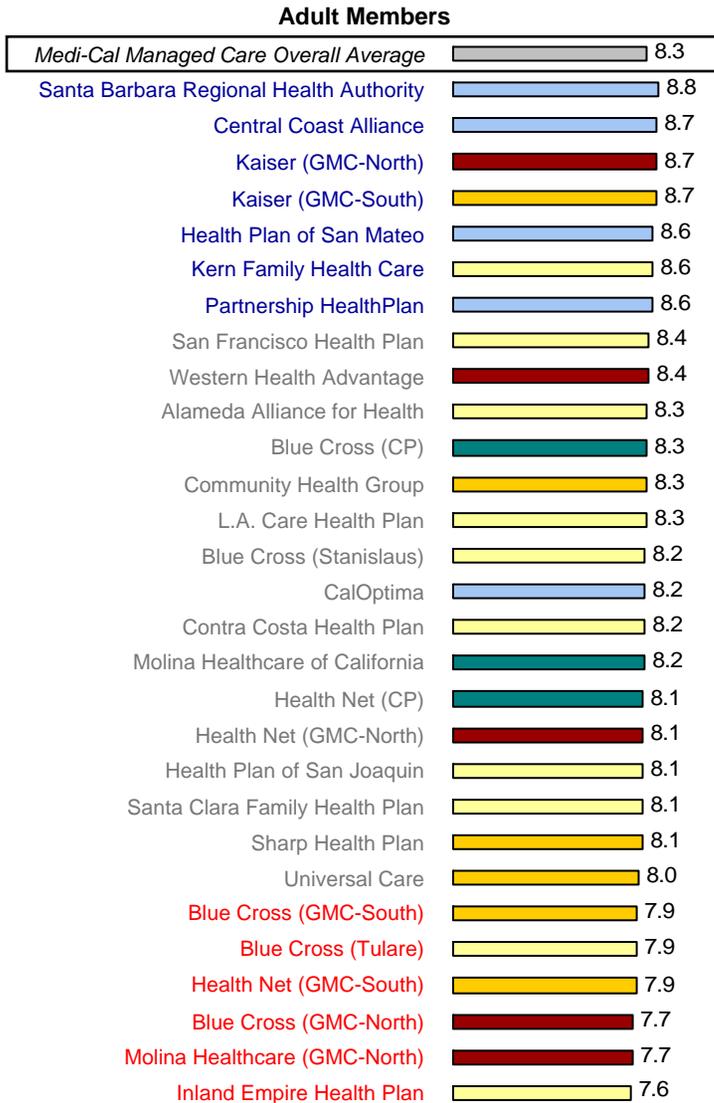


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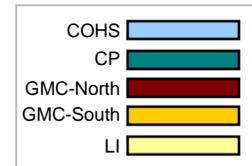
Note: The Medi-Cal Managed Care Overall Average was not calculated for CSHCN and Non-CSHCN members because these segments were identified based on their responses to the questions pertaining to children with special health care needs.

Overall Ratings by Contracted Plan (continued)

Specialist Ratings (Mean/Average Rating)



Members who had seen a specialist in the past six months were asked to rate their specialist overall using a "0 to 10" scale, where a "0" means the worst specialist possible and a "10" means the best specialist possible.

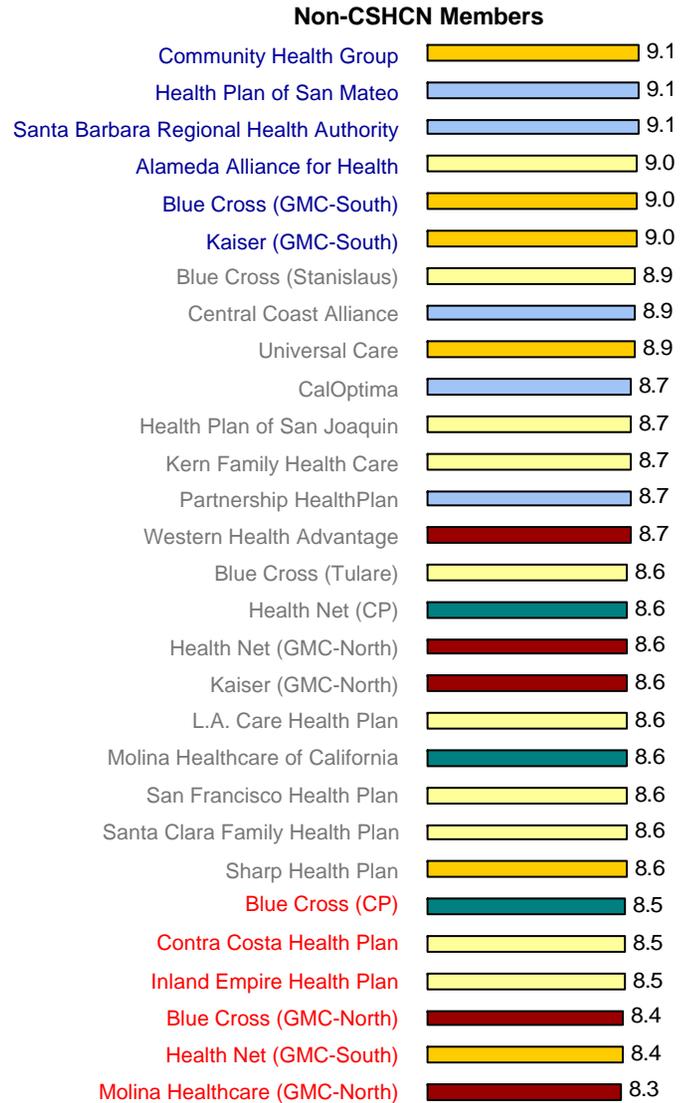
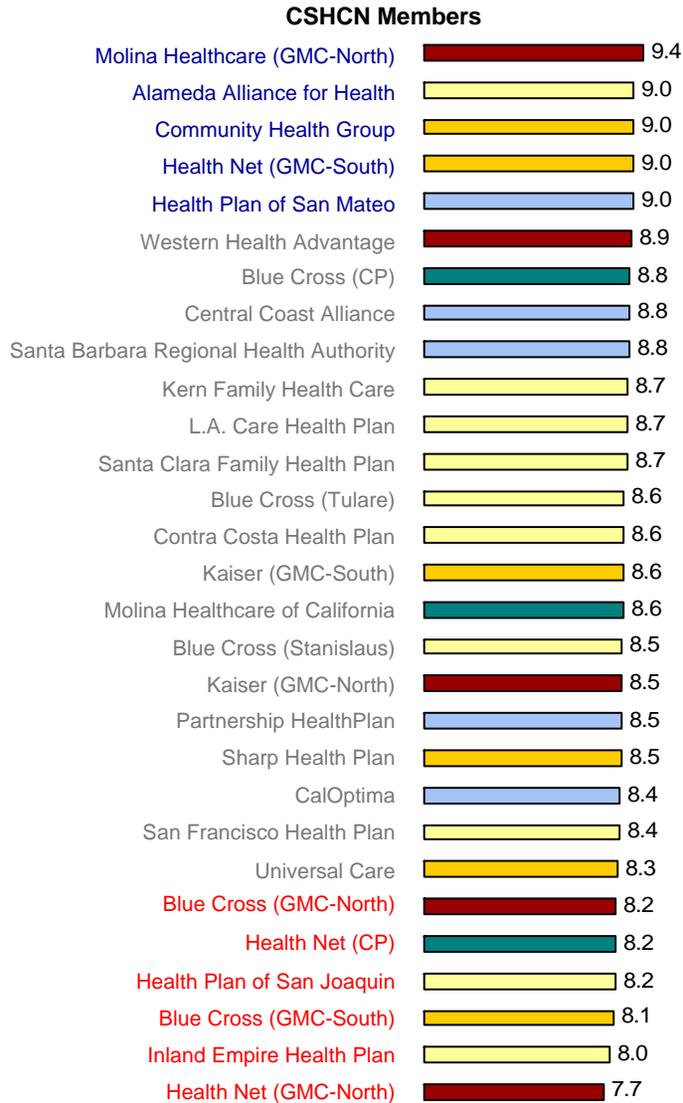


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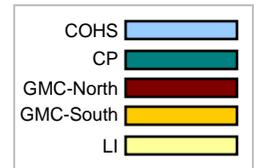
Note: The Medi-Cal Managed Care Overall Average was calculated from the ratings of all 29 Medi-Cal managed care contracted plans operating in California and was weighted by plan enrollment.

Overall Ratings by Contracted Plan (continued)

Specialist Ratings (Mean/Average Rating)



Members who had seen a specialist in the past six months were asked to rate their specialist overall using a "0 to 10" scale, where a "0" means the worst specialist possible and a "10" means the best specialist possible.



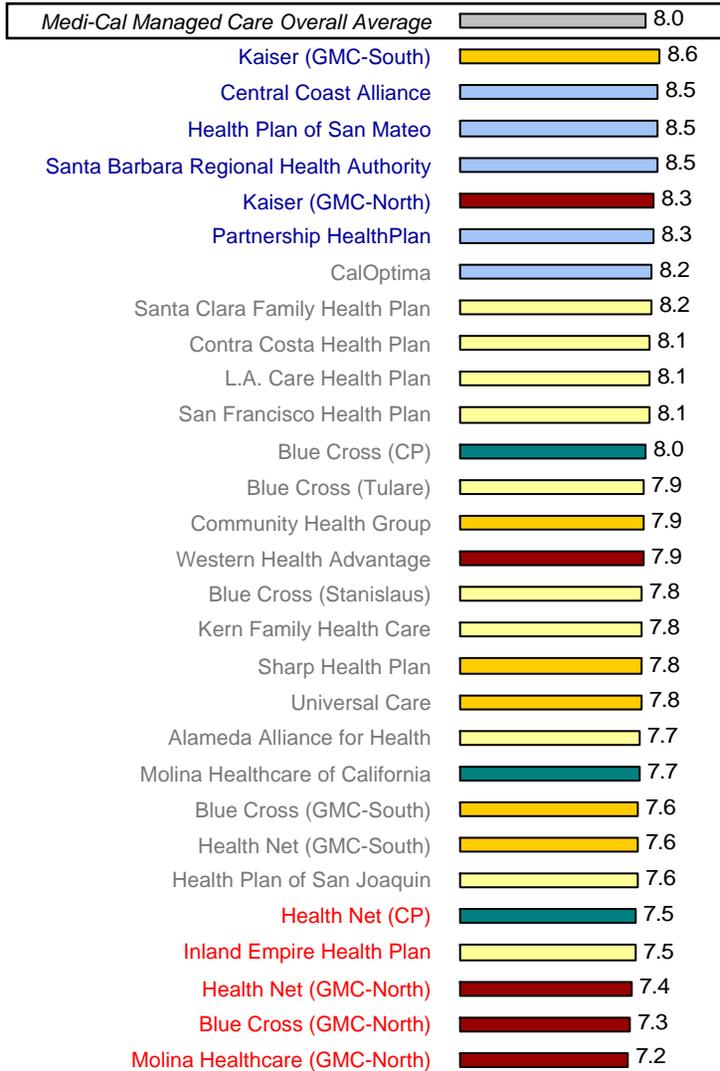
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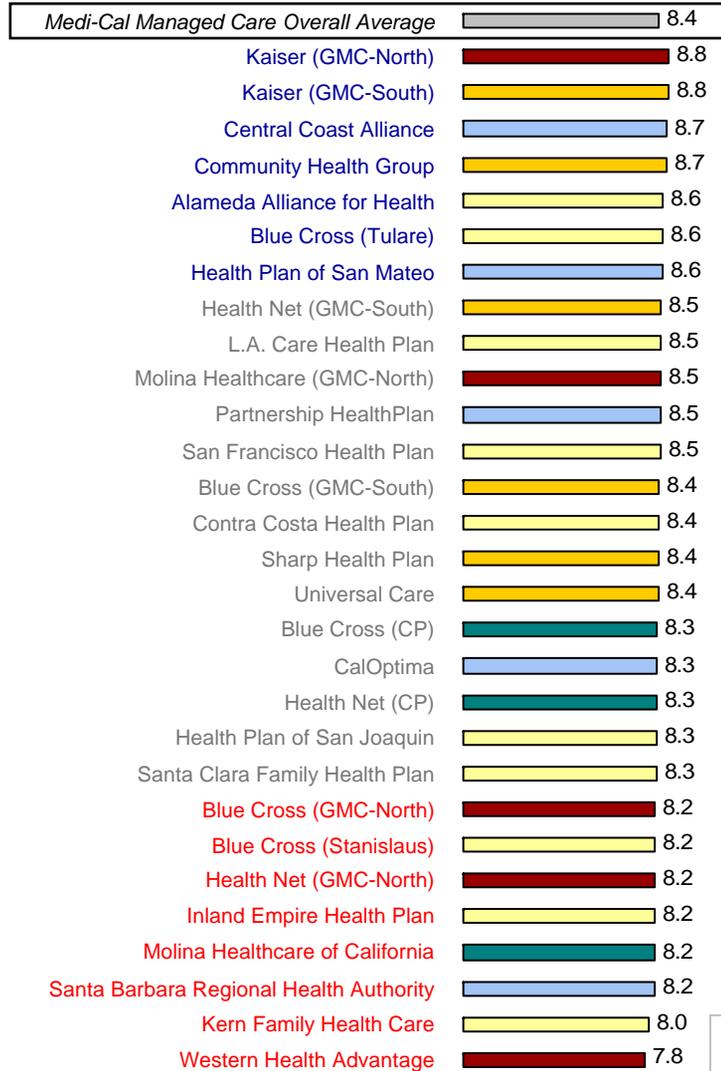
Overall Ratings by Contracted Plan (continued)

Health Care Ratings (Mean/Average Rating)

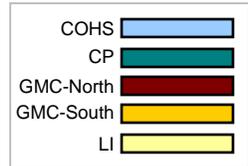
Adult Members



Child Members



Members who went to a doctor's office or clinic in the past six months were asked to rate their health care overall using a "0 to 10" scale, where a "0" means the worst health care possible and a "10" means the best health care possible.

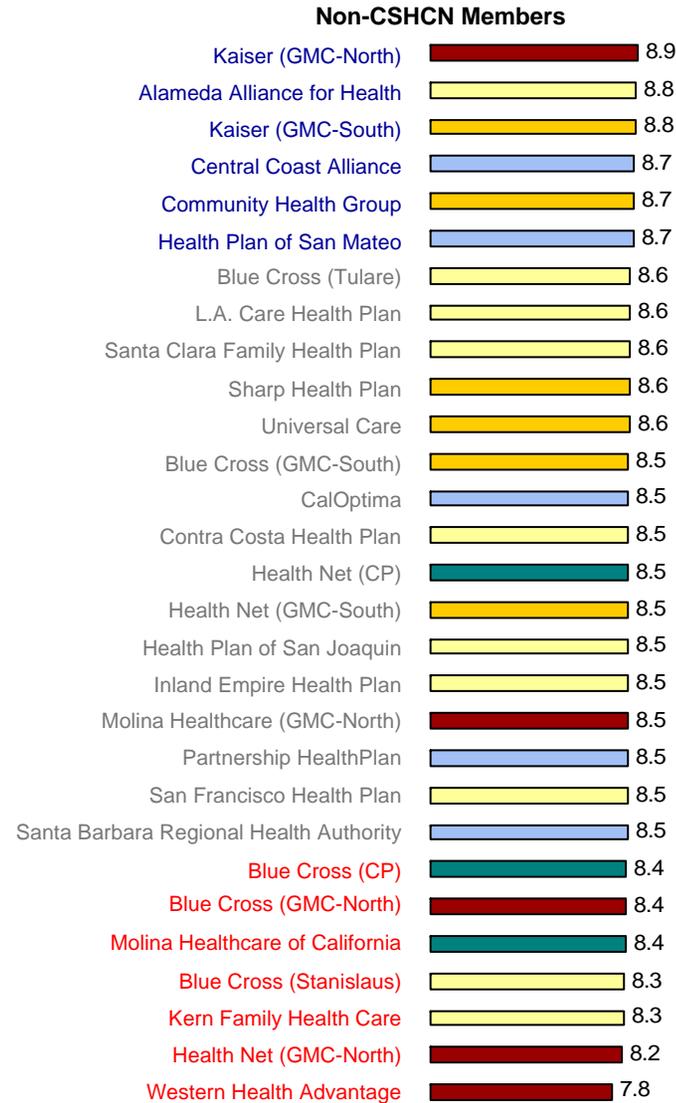
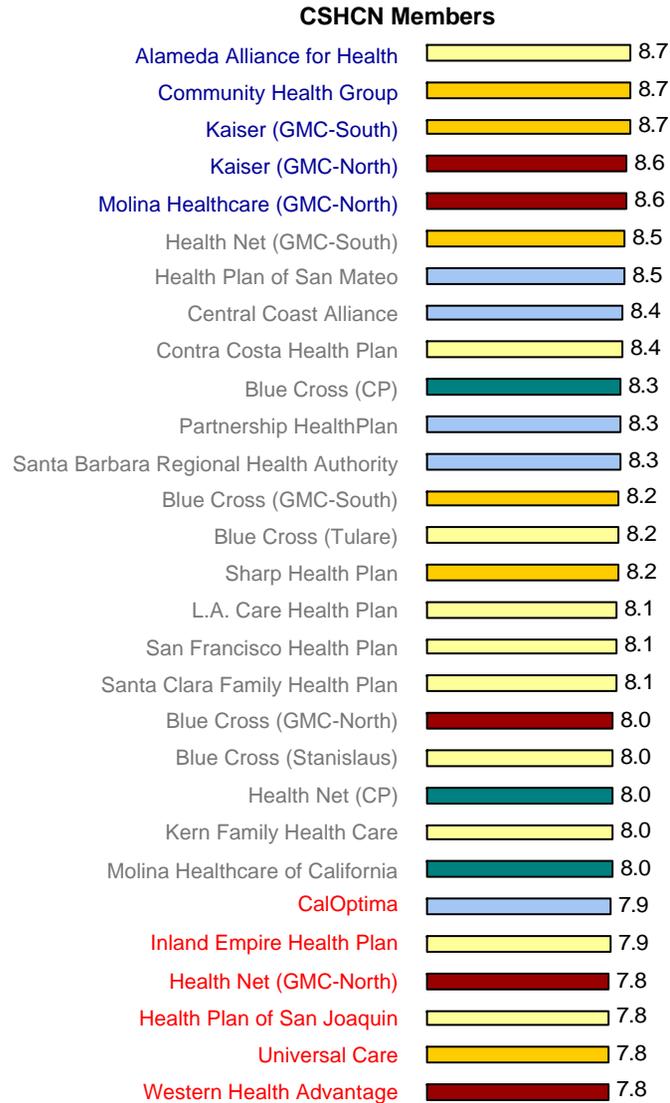


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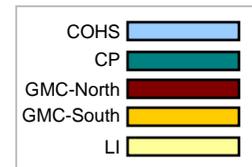
Note: The Medi-Cal Managed Care Overall Average was calculated from the ratings of all 29 Medi-Cal managed care contracted plans operating in California and was weighted by plan enrollment.

Overall Ratings by Contracted Plan (continued)

Health Care Ratings (Mean/Average Rating)



Members who went to a doctor's office or clinic in the past six months were asked to rate their health care overall using a "0 to 10" scale, where a "0" means the worst health care possible and a "10" means the best health care possible.



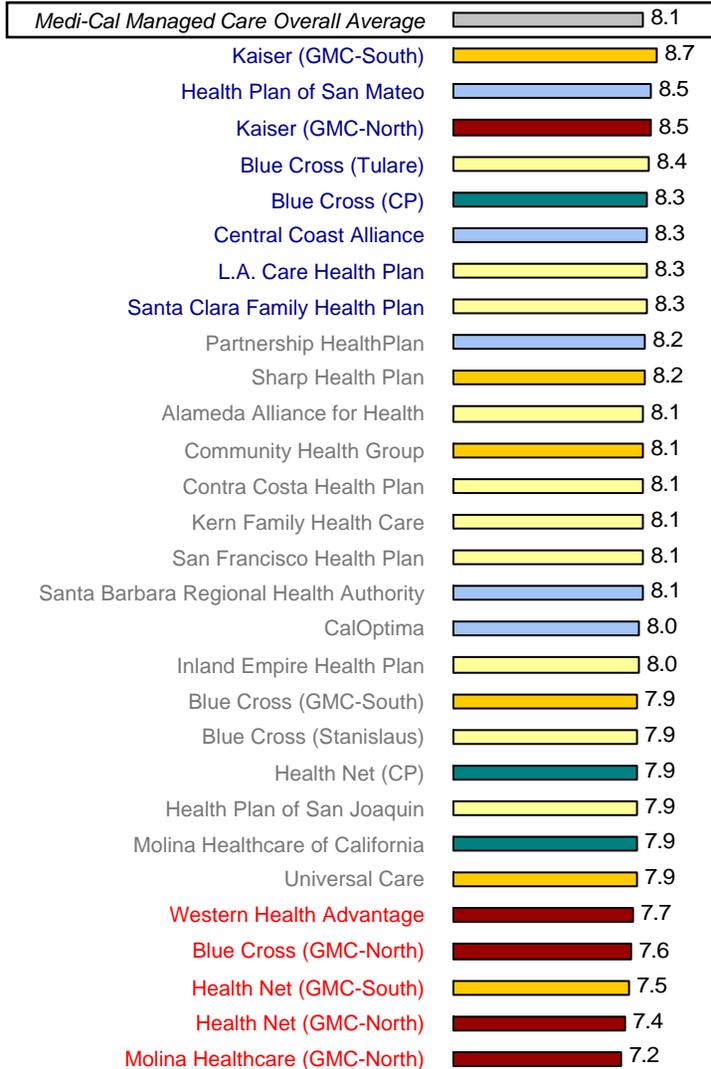
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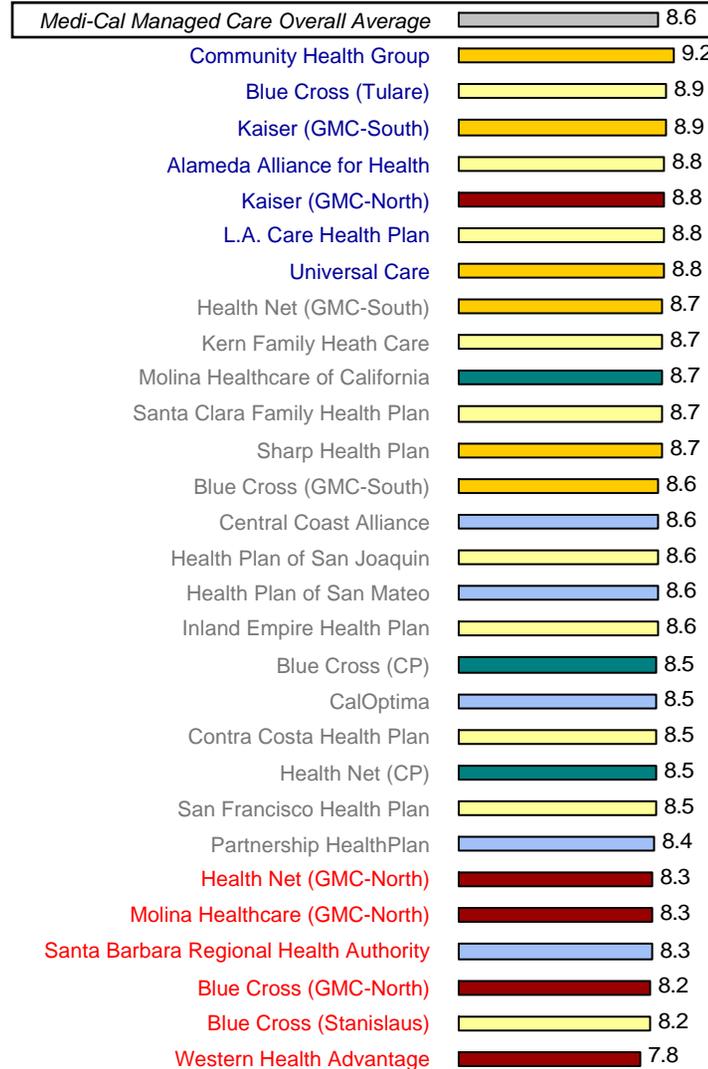
Overall Ratings by Contracted Plan (continued)

Health Plan Ratings (Mean/Average Rating)

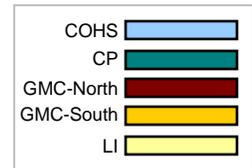
Adult Members



Child Members



Members were asked to rate their health plan overall using a “0 to 10” scale, where a “0” means the worst health plan possible and a “10” means the best health plan possible.

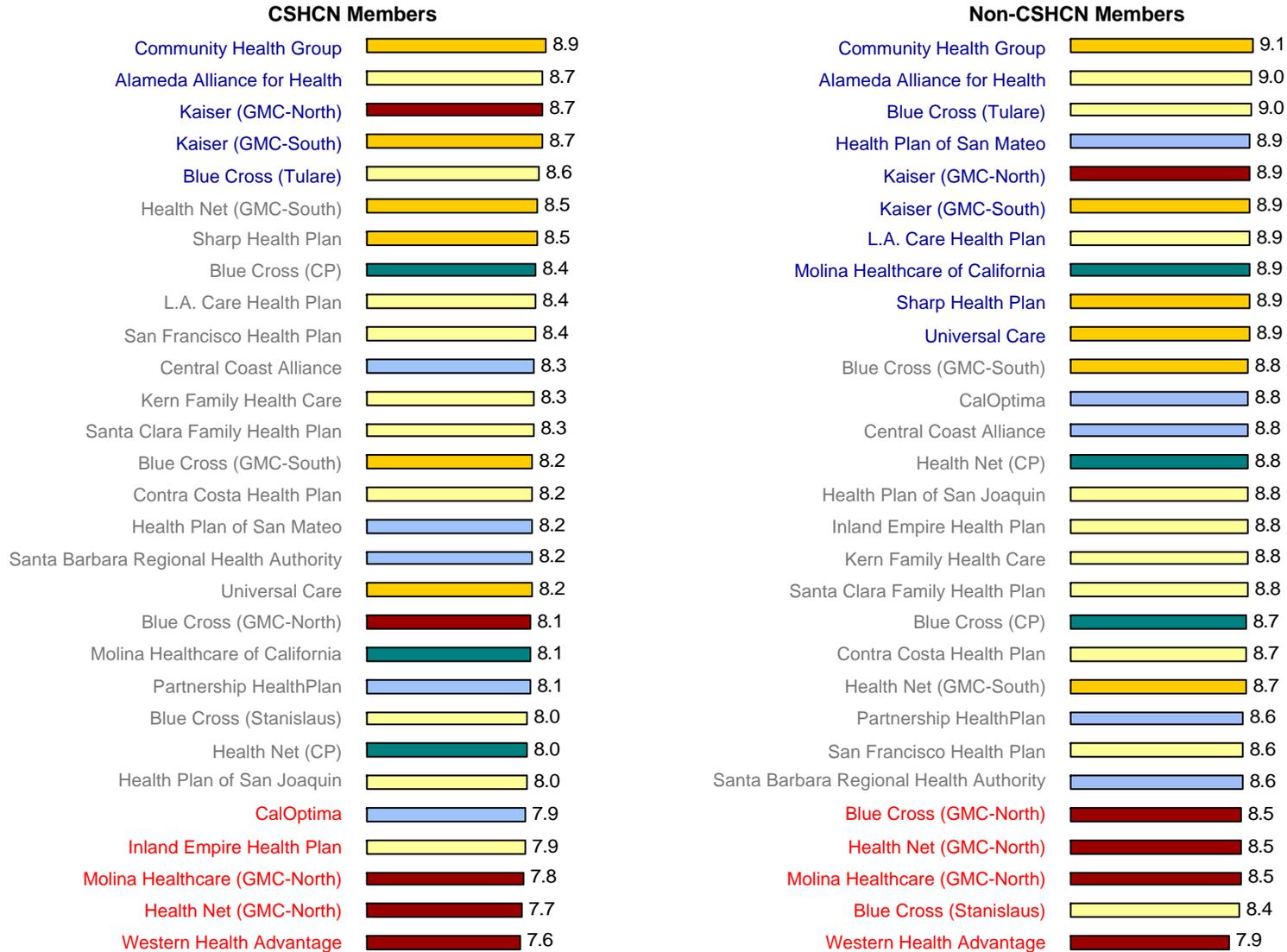


Plans in Blue = Top Five
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Overall Ratings by Contracted Plan (continued)

Health Plan Ratings (Mean/Average Rating)



Members were asked to rate their health plan overall using a “0 to 10” scale, where a “0” means the worst health plan possible and a “10” means the best health plan possible.

COHS

CP

GMC-North

GMC-South

LI

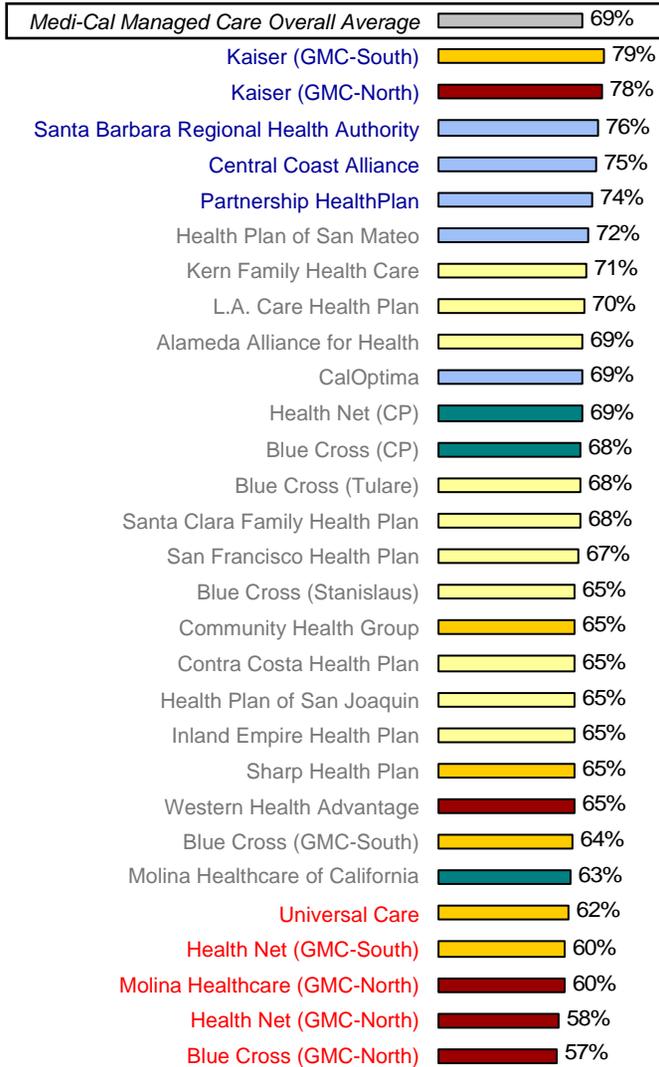
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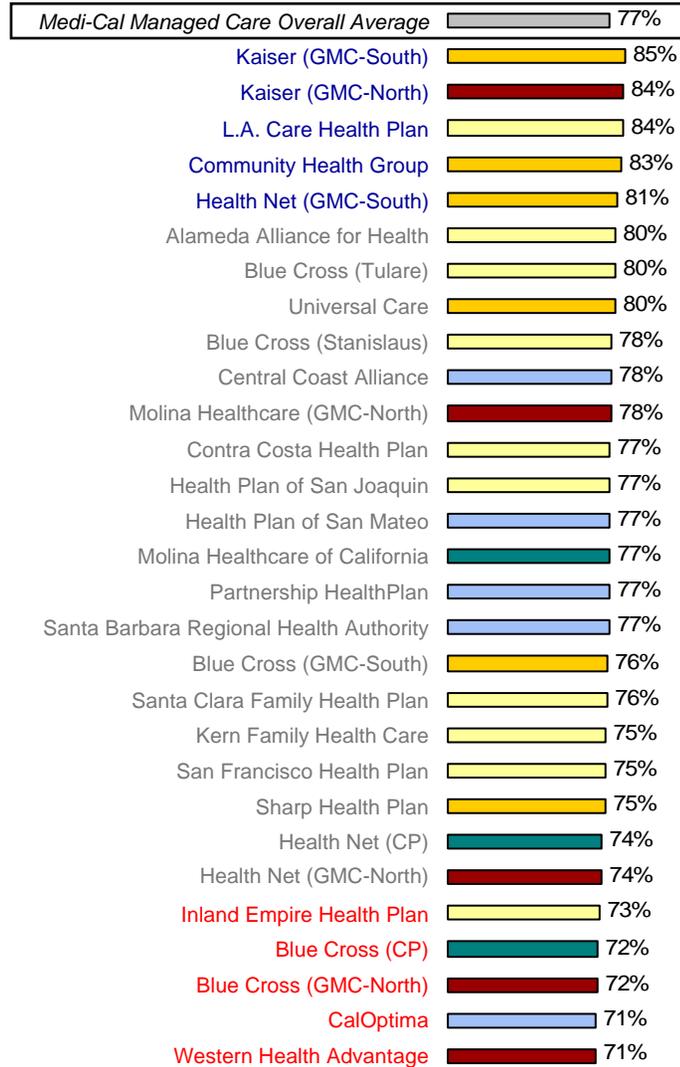
Composite Scores by Contracted Plan

Getting Needed Care (Percent rated "Not a Problem")

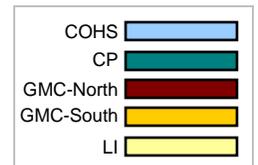
Adult Members



Child Members



Getting Needed Care is a composite score of four questions regarding whether it was a big problem, a small problem or not a problem to find a personal doctor or nurse with whom they were happy, to see a specialist, to get the necessary care needed, and to get care approved by the health plan without delays.

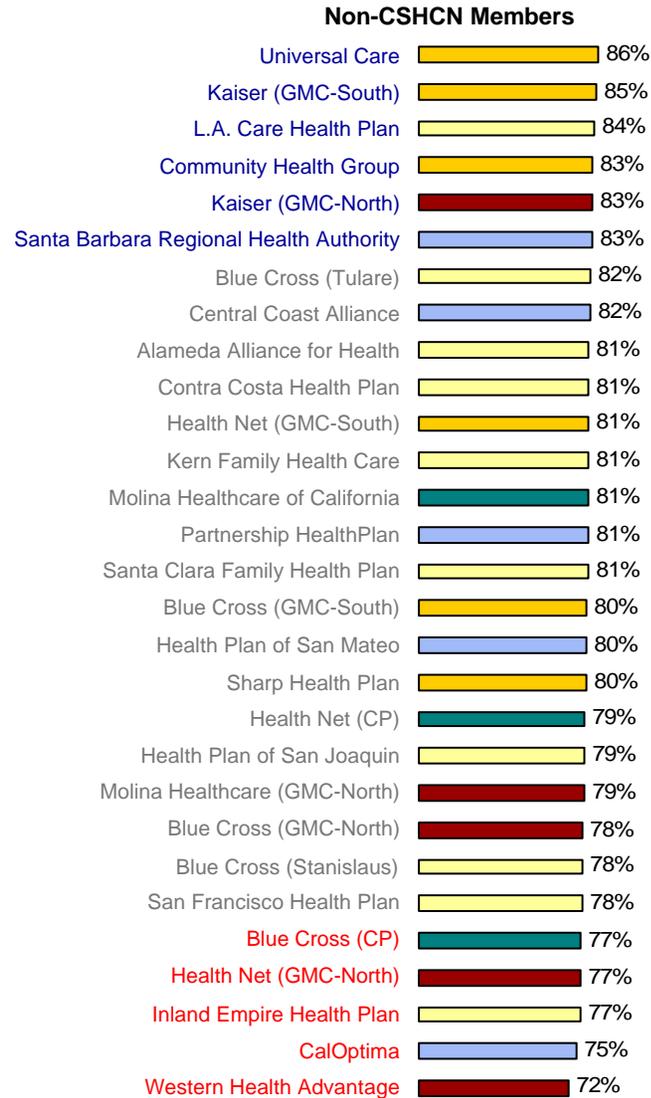
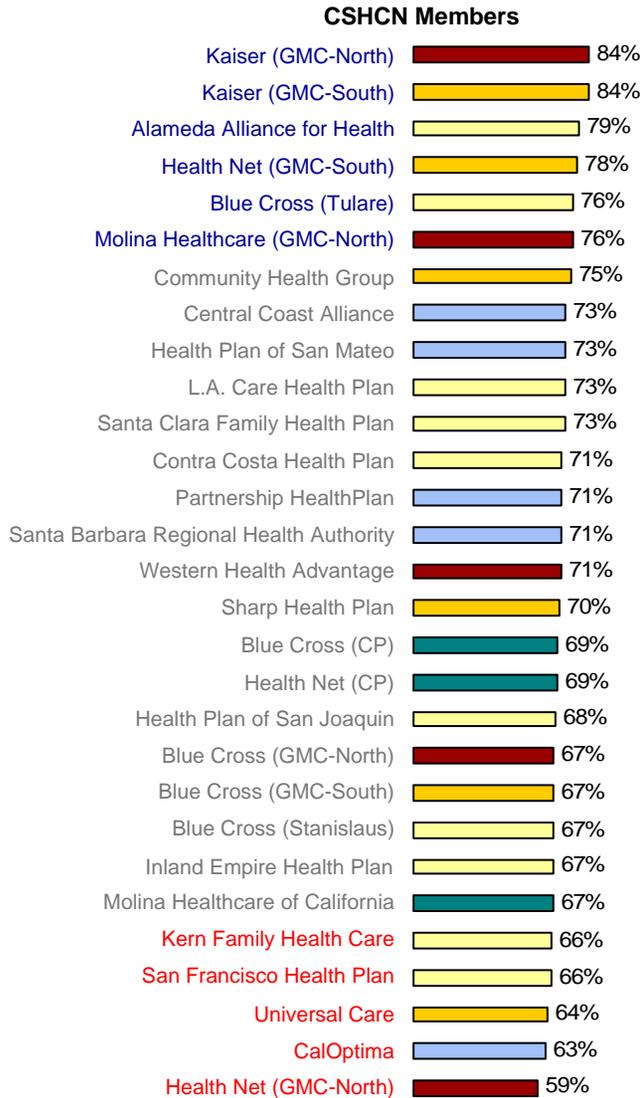


Plans in Blue = Top Five
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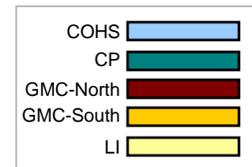
Note: The Medi-Cal Managed Care Overall Average was calculated from the ratings of all 29 Medi-Cal managed care contracted plans operating in California and was weighted by plan enrollment.

Composite Scores by Contracted Plan (continued)

Getting Needed Care (Percent rated "Not a Problem")



Getting Needed Care is a composite score of four questions regarding whether it was a big problem, a small problem or not a problem to find a personal doctor or nurse with whom they were happy, to see a specialist, to get the necessary care needed, and to get care approved by the health plan without delays.



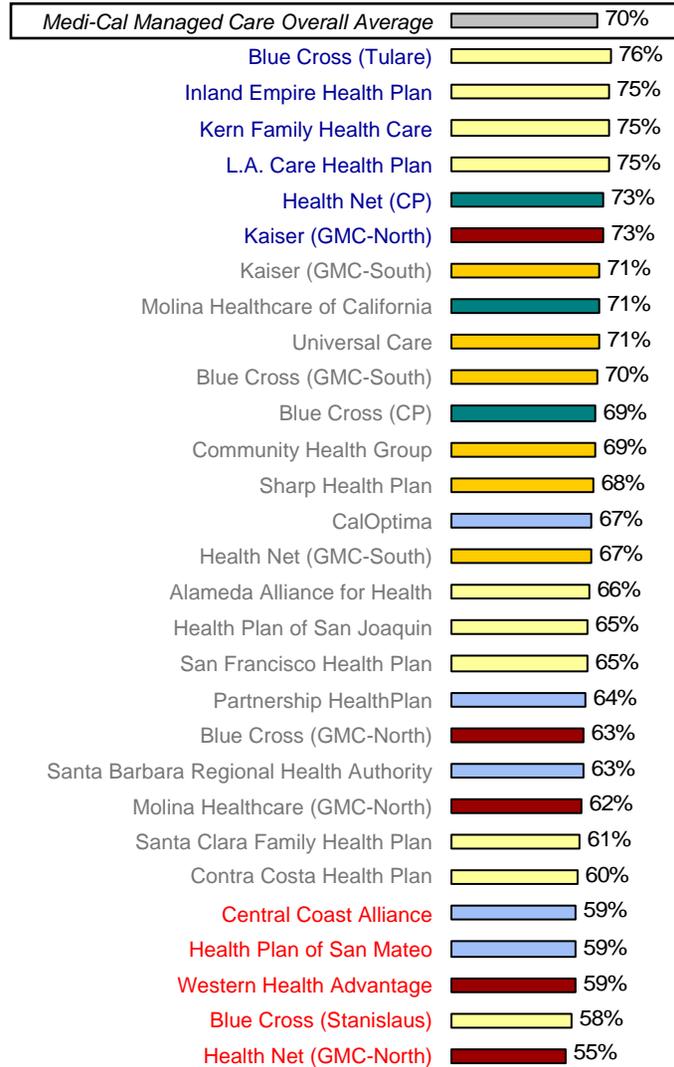
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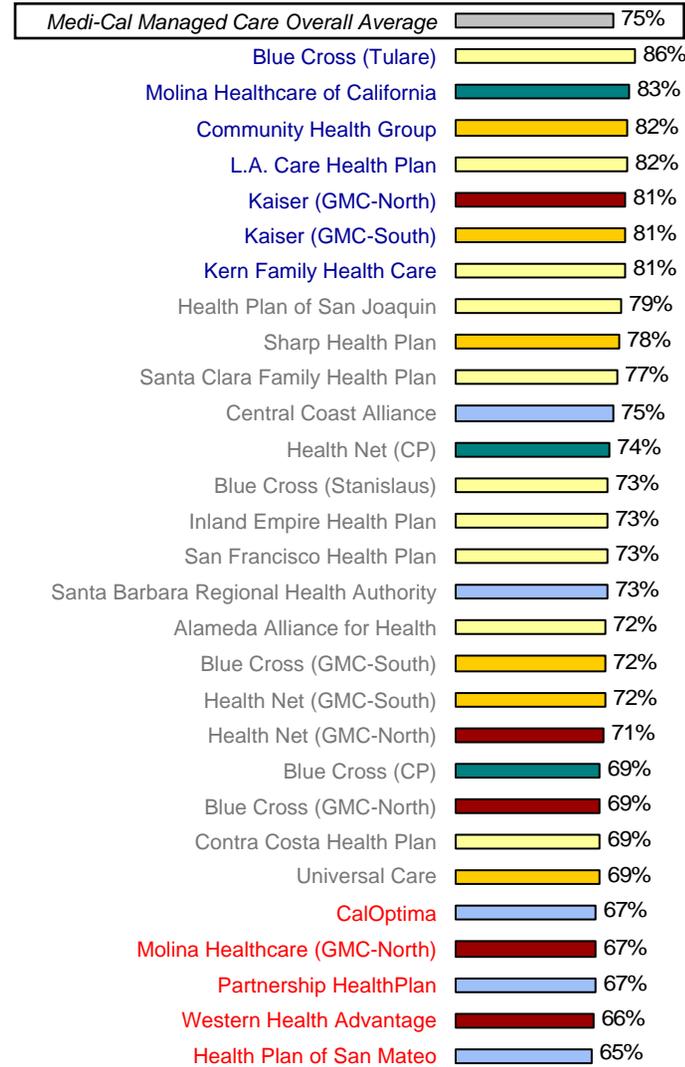
Composite Scores by Contracted Plan (continued)

Customer Service (Percent rated "Not a Problem")

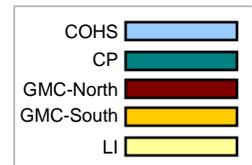
Adult Members



Child Members



Customer Service is a composite score of two questions regarding whether it was a big problem, a small problem or not a problem to get information they needed in written materials from their health plan or on the Internet and to get help from customer service.



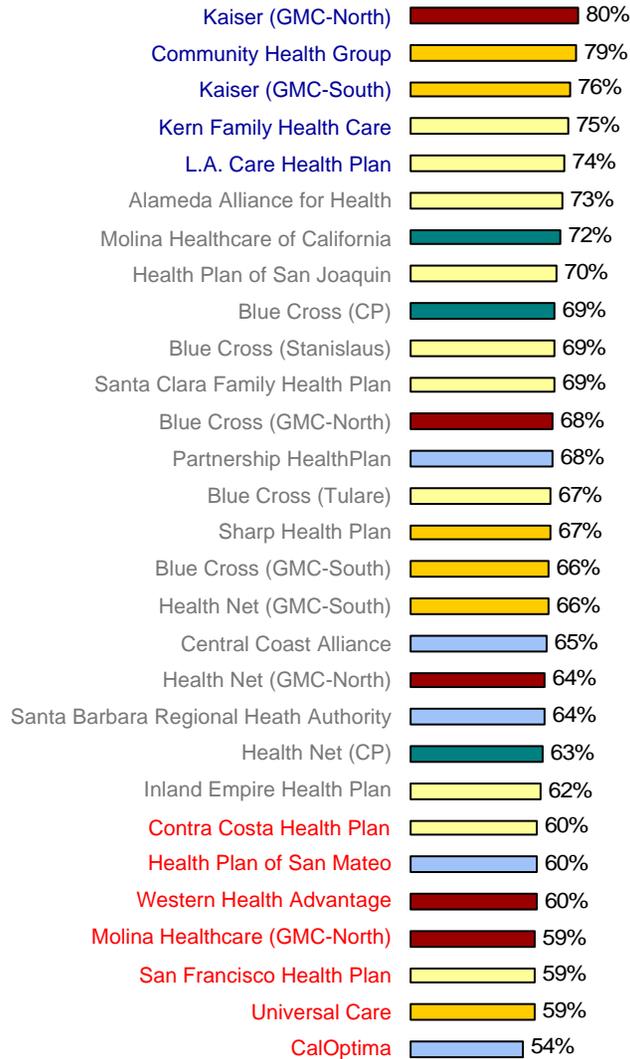
Plans in Blue = Top Five
Plans in Red = Bottom Five

Note: The Medi-Cal Managed Care Overall Average was calculated from the ratings of all 29 Medi-Cal managed care contracted plans operating in California and was weighted by plan enrollment.

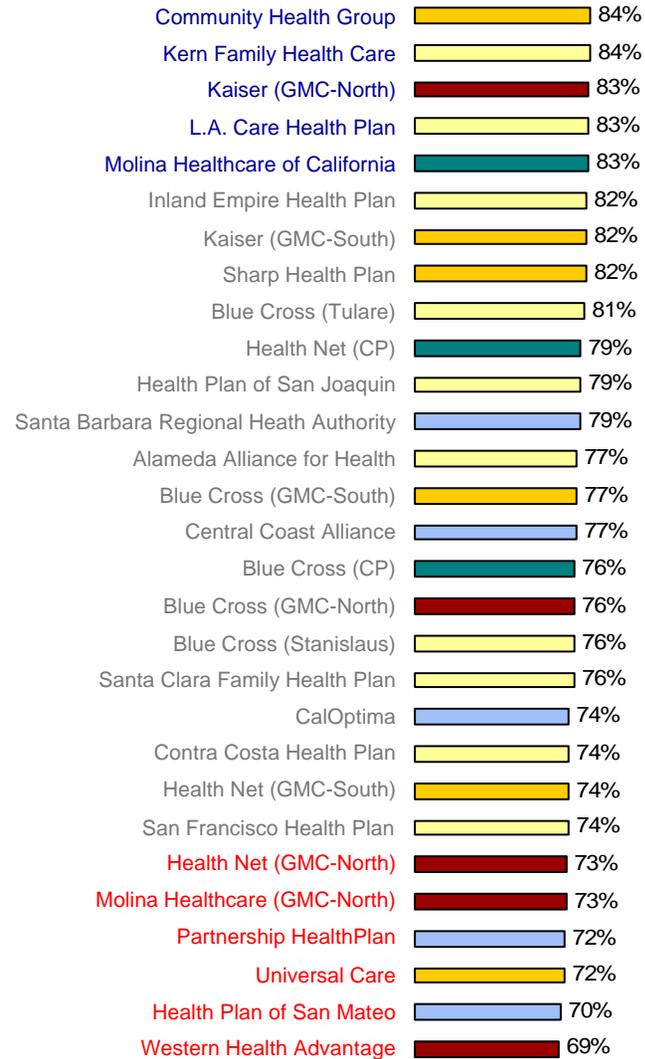
Composite Scores by Contracted Plan (continued)

Customer Service (Percent rated "Not a Problem")

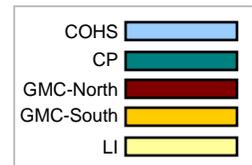
CSHCN Members



Non-CSHCN Members



Customer Service is a composite score of two questions regarding whether it was a big problem, a small problem or not a problem to get information they needed in written materials from their health plan or on the Internet and to get help from customer service.

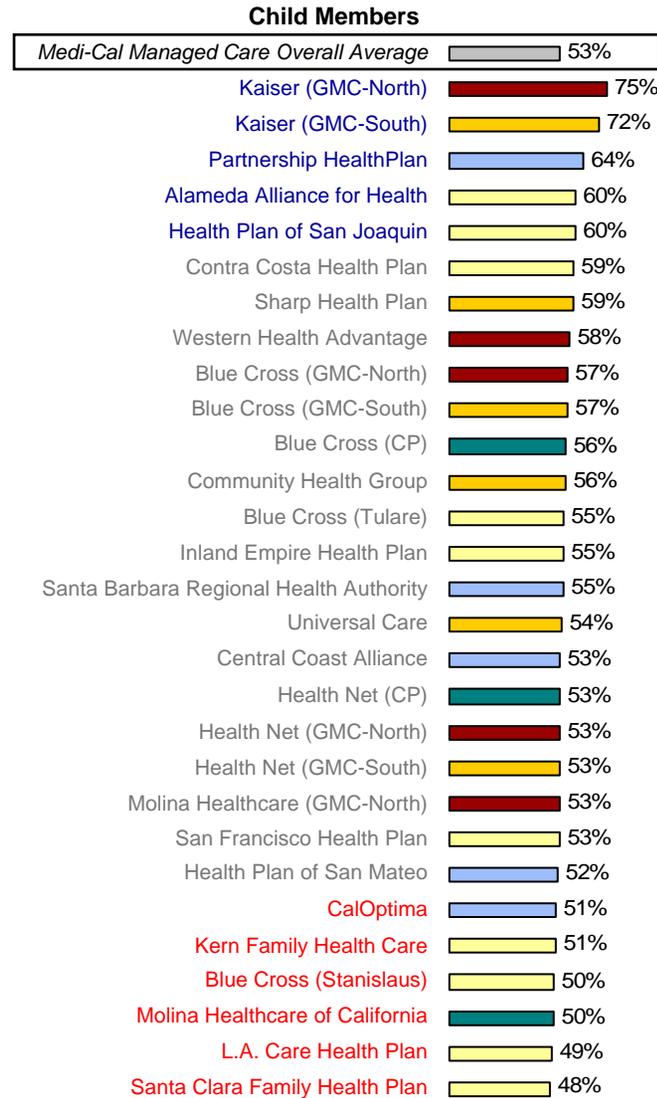
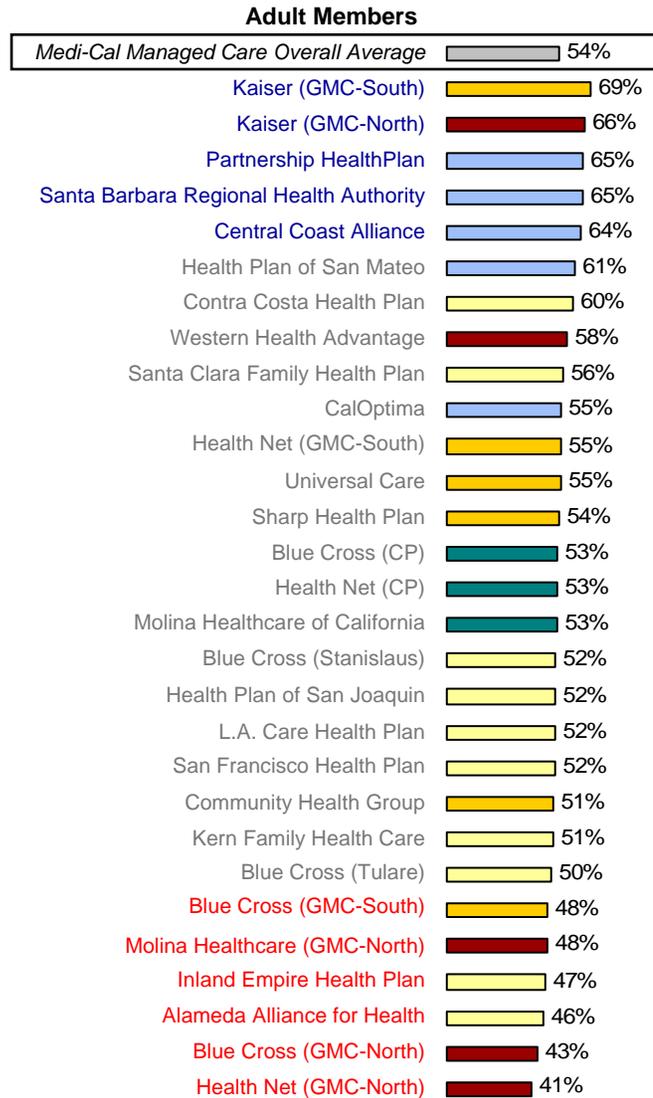


Plans in Blue = Top Five
Plans in Red = Bottom Five

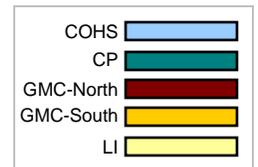
Note: The Medi-Cal Managed Care Overall Average was not calculated for CSHCN and Non-CSHCN members because these segments were identified based on their responses to the questions pertaining to children with special health care needs.

Composite Scores by Contracted Plan (continued)

Courteous and Helpful Office Staff (Percent rated "Always")



Courteous and Helpful Office Staff is a composite score of two questions regarding whether medical office staff always, usually, sometimes or never were helpful to members and treated them with courtesy and respect.

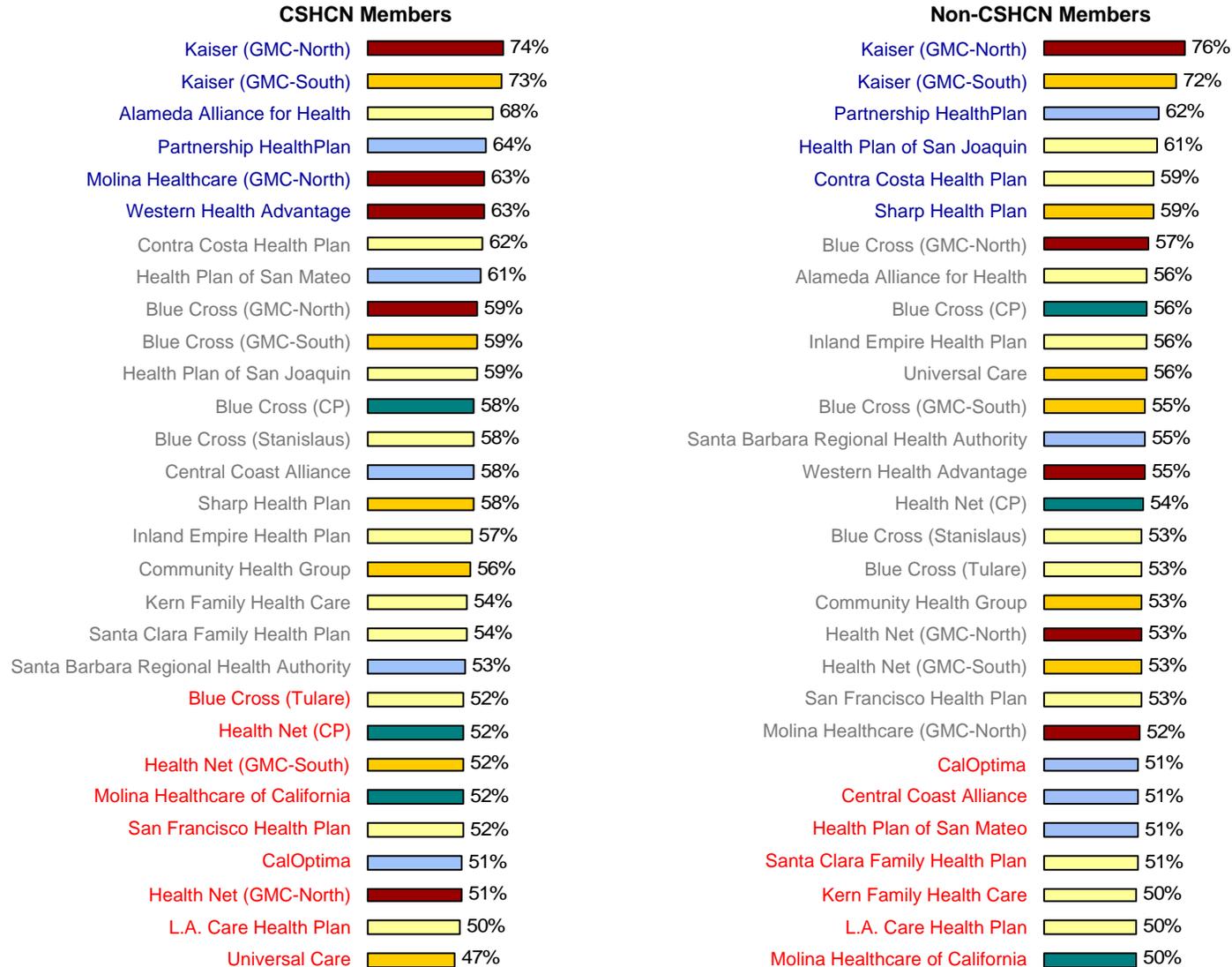


Plans in Blue = Top Five
Plans in Red = Bottom Five

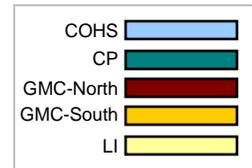
Note: The Medi-Cal Managed Care Overall Average was calculated from the ratings of all 29 Medi-Cal managed care contracted plans operating in California and was weighted by plan enrollment.

Composite Scores by Contracted Plan (continued)

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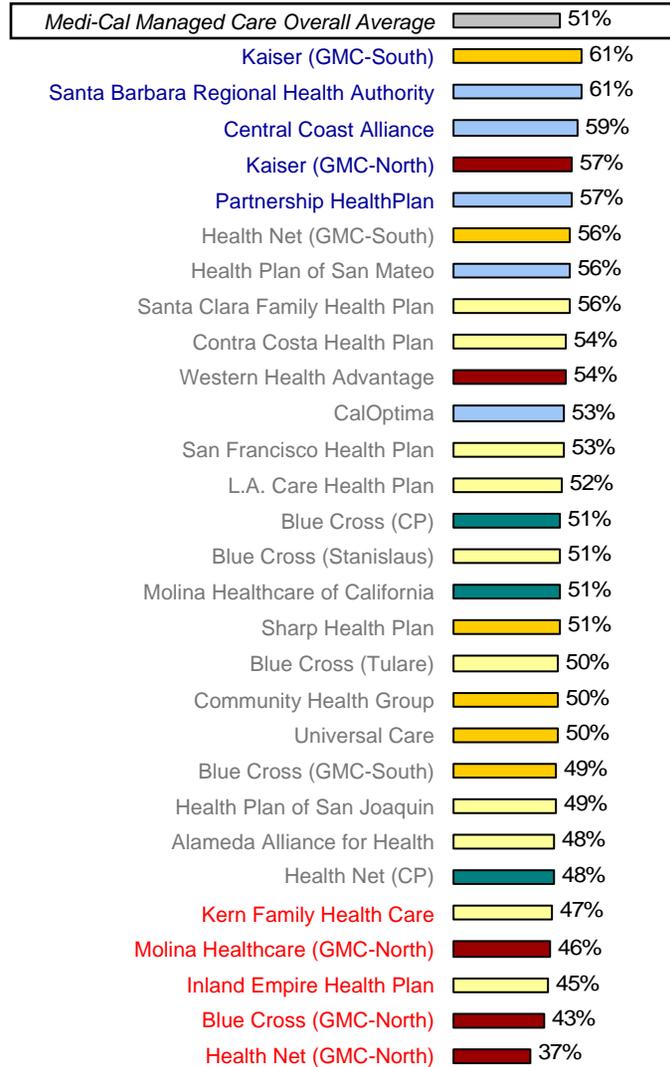
Plans in Blue = Top Five
Plans in Red = Bottom Five

Note: The Medi-Cal Managed Care Overall Average was not calculated for CSHCN and Non-CSHCN members because these segments were identified based on their responses to the questions pertaining to children with special health care needs.

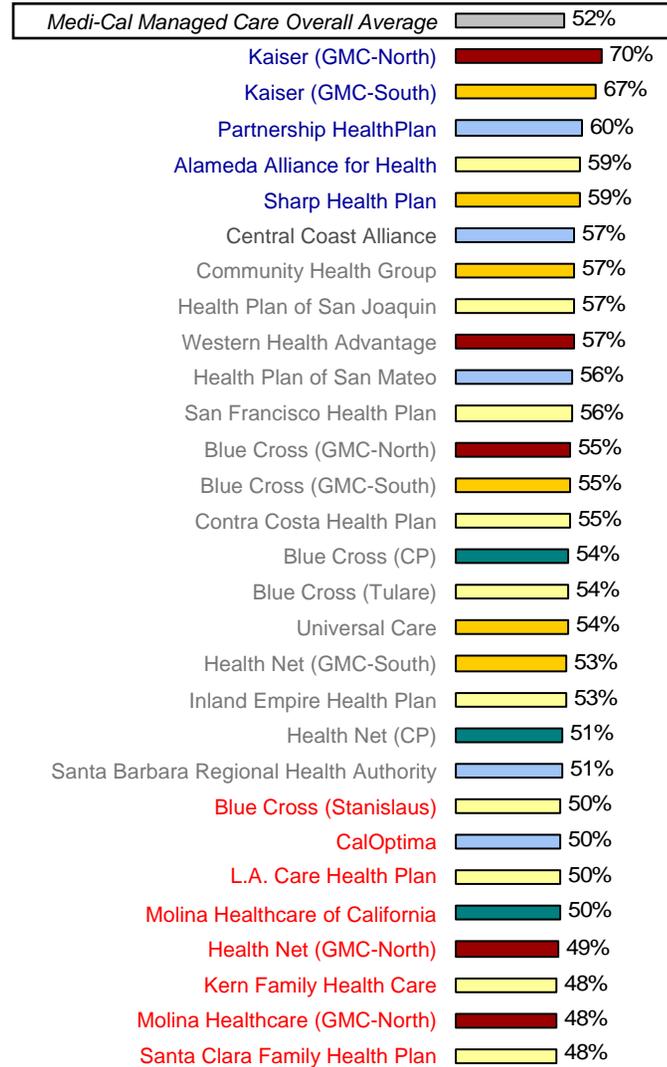
Composite Scores by Contracted Plan (continued)

How Well Doctors Communicate (Percent rated "Always")

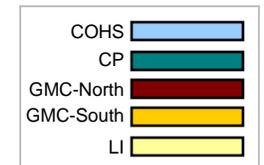
Adult Members



Child Members



How Well Doctors Communicate is a composite score of four questions regarding whether providers always, usually, sometimes or never listened carefully to members, explained things in a way they could understand, showed respect for what they had to say and spent enough time with them.

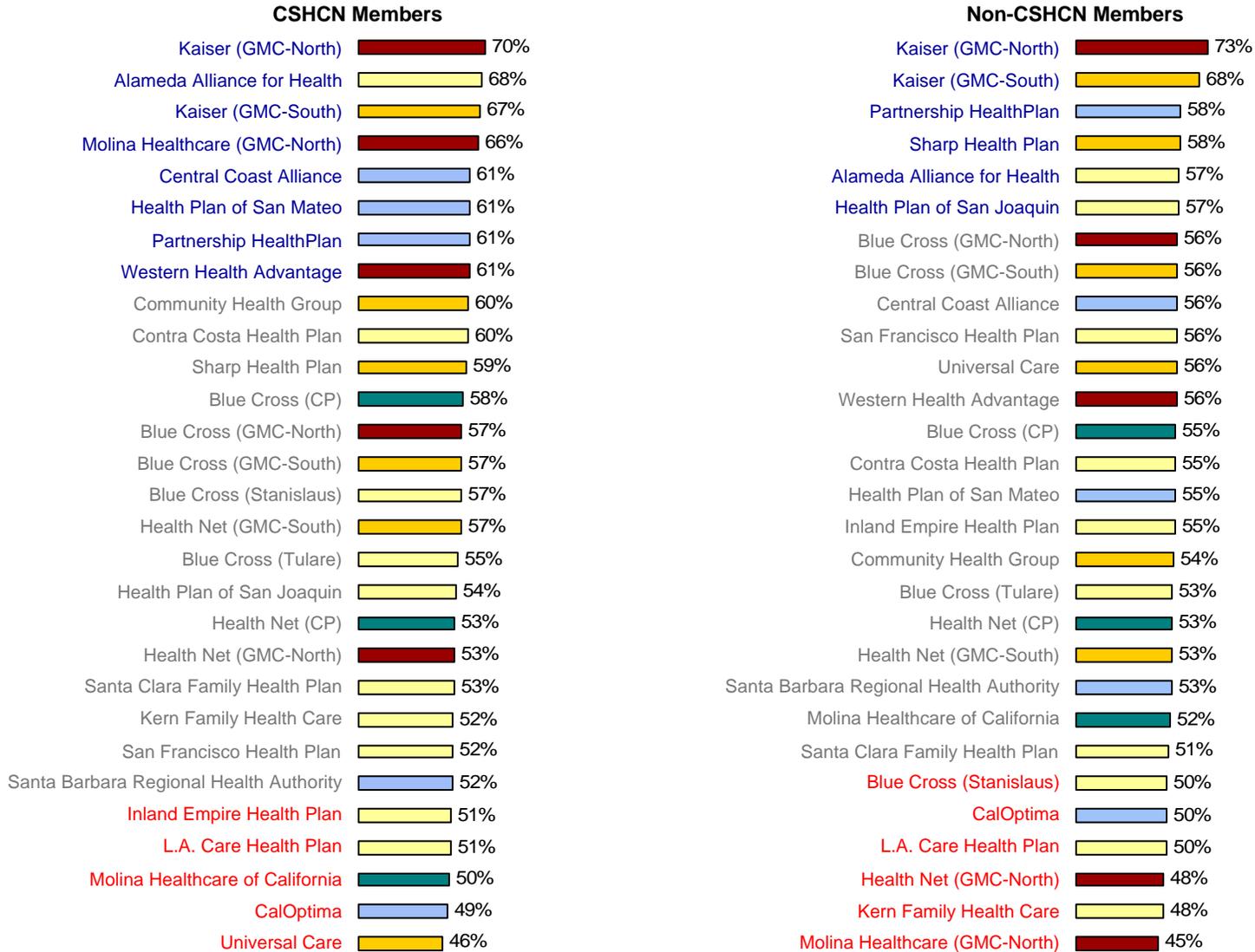


Plans in Blue = Top Five
Plans in Red = Bottom Five

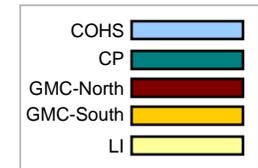
Note: The Medi-Cal Managed Care Overall Average was calculated from the ratings of all 29 Medi-Cal managed care contracted plans operating in California and was weighted by plan enrollment.

Composite Scores by Contracted Plan (continued)

How Well Doctors Communicate (Percent rated "Always")



How Well Doctors Communicate is a composite score of four questions regarding whether providers always, usually, sometimes or never listened carefully to members, explained things in a way they could understand, showed respect for what they had to say and spent enough time with them.

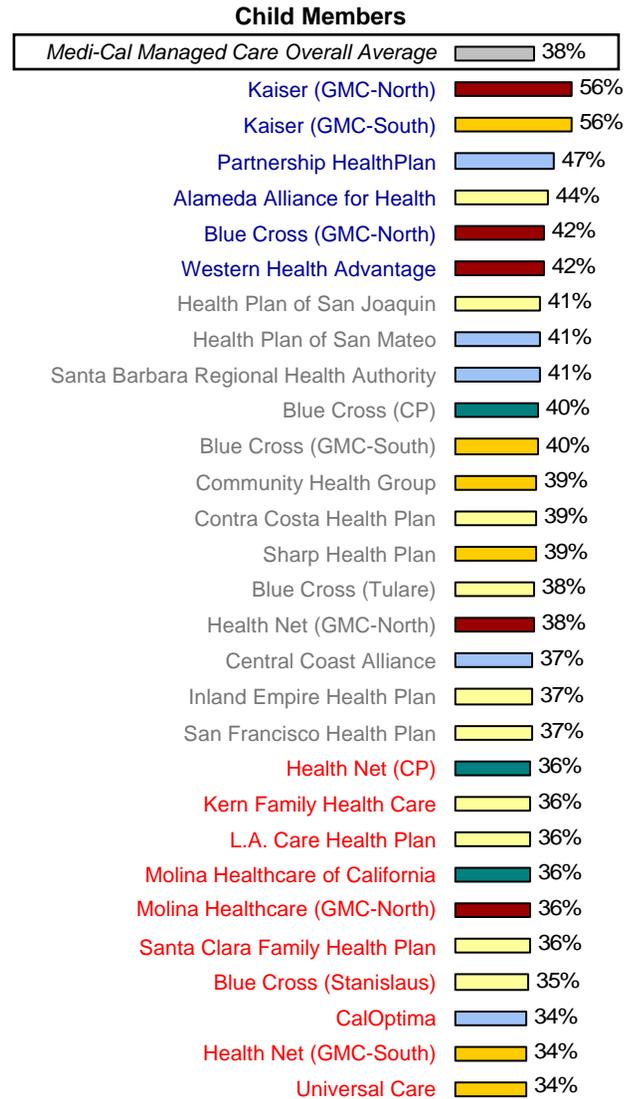
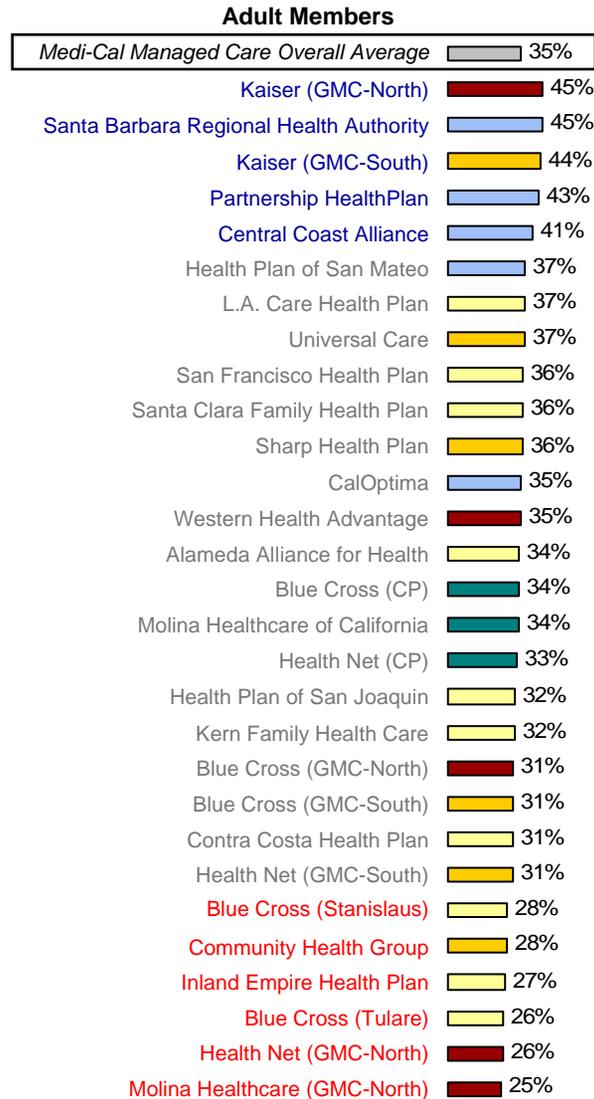


Plans in Blue = Top Five
Plans in Red = Bottom Five

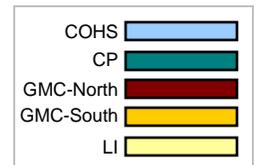
Note: The Medi-Cal Managed Care Overall Average was not calculated for CSHCN and Non-CSHCN members because these segments were identified based on their responses to the questions pertaining to children with special health care needs.

Composite Scores by Contracted Plan (continued)

Getting Care Quickly (Percent rated "Always")



Getting Care Quickly is a composite score of four questions regarding whether members always, usually, sometimes or never received help over the phone during regular office hours, got an appointment for health care as soon as they wanted, got an appointment for an illness, injury or condition and were taken to the exam room within 15 minutes of their appointment time.

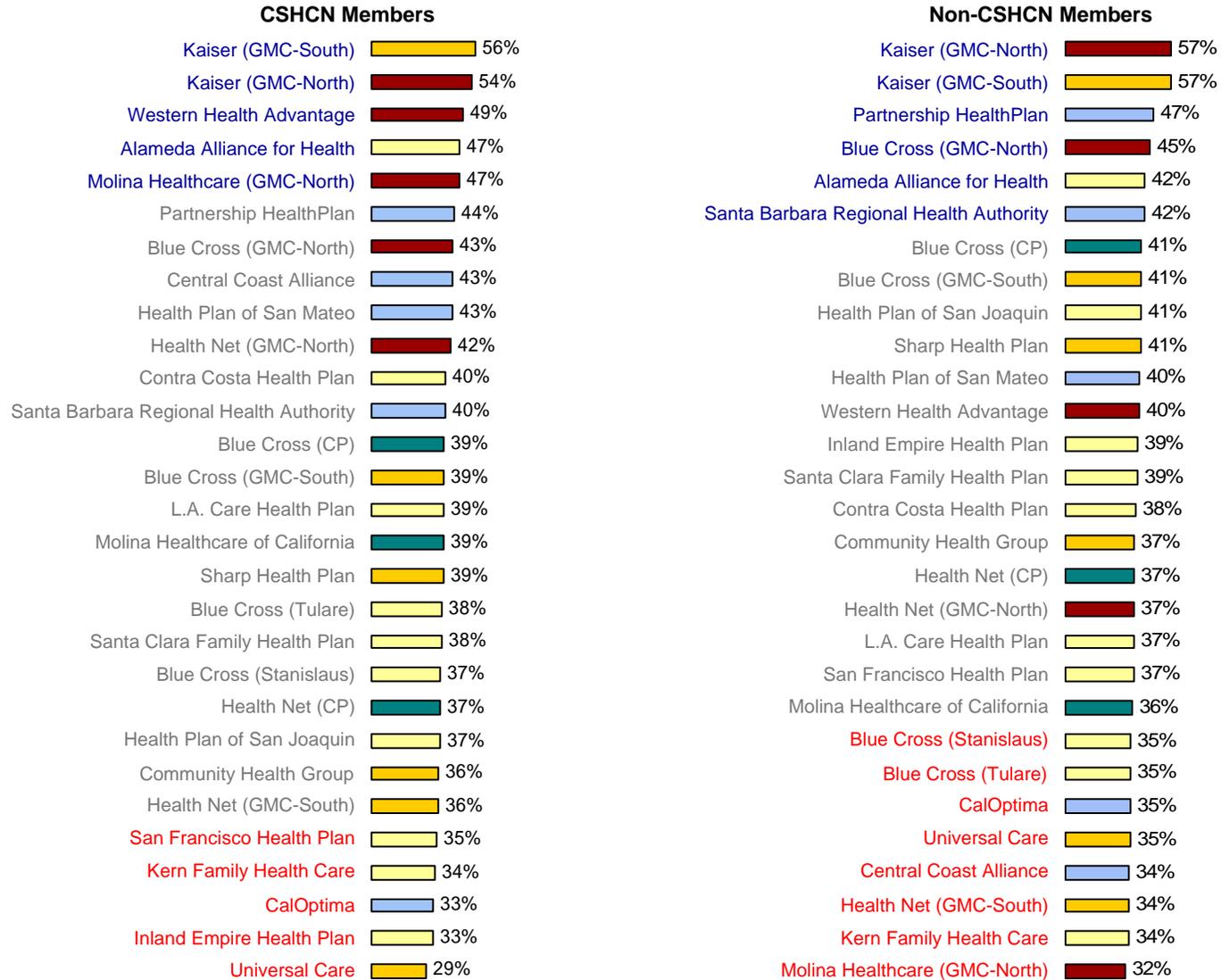


Plans in Blue = Top Five
Plans in Red = Bottom Five

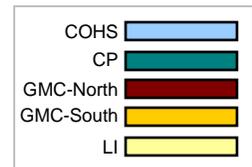
Note: The Medi-Cal Managed Care Overall Average was calculated from the ratings of all 29 Medi-Cal managed care contracted plans operating in California and was weighted by plan enrollment.

Composite Scores by Contracted Plan (continued)

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Note: The Medi-Cal Managed Care Overall Average was not calculated for CSHCN and Non-CSHCN members because these segments were identified based on their responses to the questions pertaining to children with special health care needs.

APPENDIX

Recommended Websites

- <http://www.ncqa.org>
- <http://ncbd.cahps.org>
- <http://www.cahps-sun.org>