2024 MEDI-CAL CAHPS SURVEY SUMMARY REPORT

December 2024

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COMMONLY USED ABBREVIATIONS AND ACRONYMS

Following is a list of abbreviations and acronyms used throughout this report.

» **AHRQ**—Agency for Healthcare Research and Quality

» **CAHPS**®—Consumer Assessment of Healthcare Providers and Systems[1]

» **CalAIM**—California Advancing and Innovating Medi-Cal

» **CMS**—Centers for Medicare & Medicaid Services

» **CBO**—Community-based organization

» **DDG**—Data De-Identification Guidelines

» **DHCS**—California Department of Health Care Services

» **ECM**—Enhanced Care Management

» **EQR**—external quality review

» **EQRO**—external quality review organization

» **FFS**—fee-for-service

» **HIPAA**—Health Insurance Portability and Accountability Act

» **HEDIS**®—Healthcare Effectiveness Data and Information Set[2]

» **HSAG**—Health Services Advisory Group, Inc.

» **IPP**—Incentive Payment Program

» **MCAS**—Managed Care Accountability Set

» **MCMC**—Medi-Cal Managed Care program

» **MCP**—Medi-Cal managed care health plan

» **NCOA**—National Change of Address

» **NCQA**—National Committee for Quality Assurance

» **PATH**—Providing Access and Transforming Health

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[1] CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

[2] HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

» **PHM**—Population Health Management

» **PSP**—Population-specific health plan

» **QR**—quick response

EXECUTIVE SUMMARY

The Centers for Medicare & Medicaid Services (CMS) requires that states, through their contracts with managed care plans, measure and report on performance to assess the quality and appropriateness of care and services provided to members. The California Department of Health Care Services (DHCS) periodically assesses the perceptions and experiences of members as part of its process for evaluating the quality of health care services provided by Medi-Cal managed care health plans (MCPs), the fee-for-service (FFS) program, and population-specific health plans (PSPs).

DHCS contracted with Health Services Advisory Group, Inc. (HSAG), an external quality review organization (EQRO), to administer and report the results of the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Health Plan Survey. The CAHPS Survey administration is an optional Medicaid external quality review (EQR) activity to assess members' experiences with their health care services. The goal of the CAHPS Health Plan Survey is to provide performance feedback that is actionable and will aid in improving overall member experience. DHCS required that CAHPS Surveys be administered to both adult members and parents/caretakers of child members.

This report presents the 2024 CAHPS results from adult members and parents/ caretakers of child members enrolled in an MCP, FFS, or PSP, as applicable, who completed surveys from February to May 2024, which represent members' experiences with care and services over the prior six months. The standardized survey instruments selected were the CAHPS 5.1 Adult and Child Medicaid Health Plan Surveys with the Healthcare Effectiveness Data and Information Set (HEDIS®) supplemental item set.[3] Table 1 provides a list of the 21 MCPs that participated in the survey.[4,5] The two PSPs, SCAN Health Plan (SCAN) and AIDS Healthcare Foundation (AHF), were sampled at the statewide level to provide a sufficient number of eligible members for the survey due to small enrollment numbers.

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[3] HSAG used the CAHPS 5.1 Child Medicaid Health Plan Survey without the children with chronic conditions measurement set.

[4] Members were not enrolled in Community Health Plan of Imperial Valley (CHPIV) until January 1, 2024; therefore, these members could not meet the continuous enrollment criteria and were not included in the 2024 survey administration. In addition, Aetna Better Health of California (Aetna) and California Health & Wellness Plan (CHW) were no longer MCPs as of January 1, 2024; therefore, these MCPs were not included in the 2024 survey administration.

[5] Prior to January 1, 2024, Kaiser Permanente was reported as two separate entities (i.e., KP Cal, LLC Kaiser SoCal [Kaiser SoCal] and KP Cal, LLC Kaiser NorCal [Kaiser NorCal]).

Table 1—Participating MCPs

MCP Names	
Alameda Alliance for Health (AAH)	Health Plan of San Joaquin (HPSJ)
Blue Cross of California Partnership Plan, Inc. DBA Anthem Blue Cross Partnership Plan (Anthem Blue Cross)	Health Plan of San Mateo (HPSM)
Blue Shield of California Promise Health Plan (Blue Shield Promise)	Inland Empire Health Plan (IEHP)
CalOptima	Kaiser Permanente (Kaiser)
CalViva Health (CalViva)	Kern Health Systems, DBA Kern Family Health Care (KHS)
CenCal Health (CenCal)	L.A. Care Health Plan (L.A. Care)
Central California Alliance for Health (CCAH)	Molina Healthcare of California (Molina)
Community Health Group Partnership Plan (CHG)	Partnership HealthPlan of California (Partnership)
Contra Costa Health Plan (CCHP)	San Francisco Health Plan (SFHP)
Gold Coast Health Plan (GCHP)	Santa Clara Family Health Plan (SCFHP)
Health Net Community Solutions, Inc. (Health Net)	

Performance Highlights

HSAG calculated State weighted scores for the adult and child Medi-Cal populations. Overall, the differences between the State weighted scores and the National Committee for Quality Assurance (NCQA) Medicaid national 50th percentiles ranged from 8.15 percentage points below to 0.21 percentage points above the NCQA adult Medicaid national 50th percentiles, with an average of 3.83 percentage points below the NCQA adult Medicaid national 50th percentiles, and from 6.16 to 0.16 percentage points below the NCQA child Medicaid national 50th percentiles, with an average of 3.28 percentage points below the NCQA child Medicaid national 50th percentiles.

State-Level Scores

The following MCPs showed the greatest level of performance by scoring statistically significantly above the 2023 NCQA Medicaid national 50th percentiles for the following reportable measures:

» CCHP—*How Well Doctors Communicate* (adult population only)

» PSP Statewide—Rating of Health Plan, Rating of All Health Care, and Rating of Personal Doctor (adult population only)

» IEHP—*Rating of Health Plan* (adult population only)

» CHG—*Rating of Personal Doctor* (child population only)

» Kaiser—*Rating of Health Plan* (adult and child populations), *Rating of All Health Care* (child population only), *Rating of Personal Doctor* (child population only), *Rating of Specialist Seen Most Often* (child population only), *Getting Needed Care* (child population only), and *How Well Doctors Communicate* (child population only)

Anthem Blue Cross showed the greatest opportunity for improvement for the adult population, and Health Net and SFHP showed the greatest opportunity for improvement for the child population, with these MCPs having the most reportable measures demonstrating statistically significantly lower performance than the 2023 NCQA Medicaid national 50th percentiles.

DHCS demonstrates a commitment to monitor and improve members' experiences through the CAHPS Survey administration. The CAHPS Survey plays an important role as a quality improvement tool. The standardized data and results can be used to identify

relative strengths and weaknesses in performance, identify areas for improvement, and trend progress over time.

Based on 2024 CAHPS performance, the MCPs have opportunities to improve members' experience with care and services. The *Rating of Health Plan*, *Getting Needed Care*, and *Getting Care Quickly* measures show the greatest opportunities for improvement for the adult population, and the *Rating of All Health Care*, *Getting Needed Care*, and *Getting Care Quickly* measures show the greatest opportunities for improvement for the child population, since these measures had the most MCPs with scores lower than the 50th percentiles. Low performance in these areas may point to issues with access to and timeliness and quality of care.

Considerations

Only one MCP had greater than 100 respondents for the medical assistance with smoking and tobacco use cessation measure items. In future years, DHCS may want to consider increasing the oversample for the adult Medi-Cal populations in an effort to obtain more reportable measure items for evaluation. Additionally, HSAG observed that the State weighted scores were at or below the 2023 NCQA Medicaid national 50th percentiles for every measure except *Rating of All Health Care* for the adult population and for every measure for the child population. The MCPs scored statistically significantly below the NCQA Medicaid national 50th percentiles for several measures for the adult and child populations. The survey results from 2021, 2023, and 2024 may reflect ongoing issues with providers delivering quality, timely, and accessible services to members. HSAG suggests that DHCS conduct ongoing evaluation of the quality improvement efforts described on page 108 to determine if they are resulting in a positive impact on member experience.

BACKGROUND

Medi-Cal Overview

In the State of California, DHCS administers the Medicaid program (Medi-Cal) through its FFS and managed care delivery systems. Medi-Cal provides services to more than 14 million members (approximately one-third of all Californians), including low-income children and families, seniors and persons with disabilities, and pregnant women.[6] Approximately 88 percent of members are enrolled in an MCP, while the remaining members receive their care through DHCS' FFS delivery system.[7] On January 1, 2024, approximately 1.2 million members transitioned to a new MCP.[8]

Medi-Cal Delivery System

The Medi-Cal Managed Care (MCMC) program provides health care services to members through managed care delivery systems. During the period for which HSAG administered the CAHPS surveys, DHCS contracted with 22 MCPs and two PSPs (SCAN and AHF) to provide health care services in all 58 counties throughout California.[9] MCMC members receive physical health care services through five main models of managed care as well as a model for PSPs. DHCS monitors MCMC plan performance across model types.

In addition to managed care, DHCS directly oversees health care services for Medi-Cal members enrolled in its FFS delivery system. The full or restricted scope FFS Medi-Cal delivery system includes the restricted scope population, individuals in the State or county inmate programs, share-of-cost individuals, and individuals enrolled in

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[6] California Department of Health Care Services. *Department of Health Care Services Comprehensive Quality Strategy*. February 2022. Available at: https://www.dhcs.ca.gov/services/Documents/Formatted-Combined-CQS-2-4-22.pdf. Accessed on: July 31, 2024.

[7] California Department of Health Care Services. *Medi-Cal Enrollment and Renewal*. Available at: https://www.dhcs.ca.gov/dataandstats/Pages/Medi-Cal-Eligibility-Statistics.aspx. Accessed on: July 31, 2024.

[8] California Department of Health Care Services. *Medi-Cal Changes in 2024*. November 2023. Available at: https://www.dmhc.ca.gov/Portals/0/Docs/DO/FSSBNov2023/AgendaItem5.DepartmentofHealthCareServicesUpdate.pdf. Accessed on: July 31, 2024.

[9] Members were not enrolled in CHPIV until January 1, 2024; therefore, these members did not meet the continuous enrollment criteria and were not included in the 2024 survey administration.

presumptive eligibility programs. Dual eligible members transitioned to managed care enrollment in 2023, leaving approximately 9 percent of Medi-Cal members in FFS.[10]

How DHCS Uses Member Experience Results

The overall goal of DHCS is to preserve and improve the health status of all Californians. Since Medi-Cal serves some of California's most vulnerable populations, the need to evaluate and monitor the quality of and access to health care, including member experience, has remained a key objective for DHCS in meeting its overarching goal.

One strategy established to evaluate and monitor the quality of health care is the CAHPS surveys administration. DHCS shares plan-specific and aggregate CAHPS results with the plans and publicly releases the *CAHPS Summary Report* on its website as a reliable and supportive tool to assist Medi-Cal members and other stakeholders in making informed decisions, including the selection of MCPs with the highest quality, and to incentivize improved performance among MCPs. DHCS also incorporates CAHPS results into its consumer guides for new members and uses the data as part of its annual performance assessment of MCPs and Medi-Cal as a whole.

DHCS' quality strategy includes the goal to engage members to be actively involved in their own health care and to provide input to DHCS about its Medi-Cal policy. Through Consumer Advisory Committees, the MCPs review Member Services' Quality Improvement activities, including survey results, and make recommendations based on feedback from members, advocates, stakeholders, and select providers.[11] Furthermore, DHCS seeks to prioritize member experience in all quality improvement efforts. Beginning in 2023, DHCS incorporated CAHPS survey results into MCP payment rates.[12]

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[10] California Department of Health Care Services. *Department of Health Care Services Comprehensive Quality Strategy*. February 2022. Available at: https://www.dhcs.ca.gov/services/Documents/Formatted-Combined-CQS-2-4-22.pdf. Accessed on: July 31, 2024.

[11] Steward, M., et al. Center for Health Care Strategies. *Designing Medi-Cal Consumer Advisory Committees: Insights from a Survey of Medi-Cal Managed Care Plans*. July 2023. Available at: https://www.chcf.org/wp-content/uploads/2023/06/DesigningMedi-CalConsumerAdvisoryCommittees.pdf. Accessed on: July 31, 2024.

[12] California Department of Health Care Services. *Department of Health Care Services Comprehensive Quality Strategy*. February 2022. Available at: https://www.dhcs.ca.gov/services/Documents/Formatted-Combined-CQS-2-4-22.pdf. Accessed on: July 31, 2024.

The 2024 Medi-Cal Managed Care contracts strengthened transparency by requiring the MCPs to publicly post activity information, including CAHPS survey results, and required the CAHPS surveys administration annually (previously every two years) beginning with the 2024 survey administration.[13,14]

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[13] California Department of Health Care Services. *Department of Health Care Services Comprehensive Quality Strategy*. February 2022. Available at: https://www.dhcs.ca.gov/services/Documents/Formatted-Combined-CQS-2-4-22.pdf. Accessed on: July 31, 2024.

[14] California Department of Health Care Services. *Medi-Cal Changes in 2024*. November 2023. Available at: https://www.dmhc.ca.gov/Portals/0/Docs/DO/FSSBNov2023/AgendaItem5.DepartmentofHealthCareServicesUpdate.pdf. Accessed on: July 31, 2024.

METHODOLOGY

CAHPS Performance Measures

CAHPS performance measures are derived from individual questions, such as asking for a general rating, as well as groups of questions that form composite measures. Table 2 lists the measures included in the CAHPS 5.1 Adult and Child Medicaid Health Plan Surveys with the HEDIS supplemental item set.

Table 2—CAHPS Measures

Global Ratings	Composite Measures	Medical Assistance with Smoking and Tobacco Use Cessation Measure Items (Adult Population Only)
Rating of Health Plan	*Getting Needed Care*	*Advising Smokers and Tobacco Users to Quit*
Rating of All Health Care	*Getting Care Quickly*	*Discussing Cessation Medications*
Rating of Personal Doctor	*How Well Doctors Communicate*	*Discussing Cessation Strategies*
Rating of Specialist Seen Most Often	*Customer Service*	

Table 3 and Table 4 present the survey language and response options for each measure for the adult and child surveys, respectively. The CAHPS Survey includes gate items that instruct respondents to skip specific questions if they are not receiving certain services, which results in fewer responses. The measures that are affected by these gate items are noted below.

Table 3—Adult CAHPS Survey Language and Response Options

Question Language	Response Options
Global Ratings	
Rating of Health Plan	
28. Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your health plan?	0–10 Scale
Rating of All Health Care[15]	
8. Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 6 months?	0–10 Scale
Rating of Personal Doctor[16]	
18. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?	0–10 Scale

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[15] For *Rating of All Health Care*, the gate question asks respondents how many times they received health care in person, by phone, or by video, not counting the times they went to the emergency room in the last six months. If respondents answer "None" to this question, they are directed to skip the question that comprises the *Rating of All Health Care* measure.

[16] For *Rating of Personal Doctor*, the gate question asks respondents if they have a personal doctor. If respondents answer "No" to this question, they are directed to skip the question that comprises the *Rating of Personal Doctor* measure.

Question Language	Response Options
Rating of Specialist Seen Most Often[17]	
22. We want to know your rating of the specialist you talked to most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?	0–10 Scale
Composite Measures	
Getting Needed Care[18]	
9. In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?	Never, Sometimes, Usually, Always
20. In the last 6 months, how often did you get an appointment with a specialist as soon as you needed?	Never, Sometimes, Usually, Always
Getting Care Quickly[19]	
4. In the last 6 months, when you <u>needed care right away</u>, how often did you get care as soon as you needed?	Never, Sometimes, Usually, Always

[17] For *Rating of Specialist Seen Most Often*, the gate question asks respondents if they made any appointments with a specialist in the last six months. If respondents answer "No" to this question, they are directed to skip the question that comprises the *Rating of Specialist Seen Most Often* measure.

[18] For *Getting Need Care*, the gate questions ask respondents how many times they received health care in person, by phone, or by video, not counting the times they went to the emergency room in the last six months and did they make any appointments with a specialist in the last six months. If respondents answer "None" or "No" to these questions, they are directed to skip the questions that collectively comprise the *Getting Needed Care* measure.

[19] For *Getting Care Quickly*, the gate questions ask respondents if they had an illness, injury, or condition that needed care right away and did they make any in person, phone, or video appointments for a check-up or routine care. If respondents answer "No" to these questions, they are directed to skip the questions that collectively comprise the *Getting Care Quickly* measure.

Question Language	Response Options
6. In the last 6 months, how often did you get an appointment for a <u>check-up or routine care</u> as soon as you needed?	Never, Sometimes, Usually, Always
How Well Doctors Communicate[20]	
12. In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand?	Never, Sometimes, Usually, Always
13. In the last 6 months, how often did your personal doctor listen carefully to you?	Never, Sometimes, Usually, Always
14. In the last 6 months, how often did your personal doctor show respect for what you had to say?	Never, Sometimes, Usually, Always
15. In the last 6 months, how often did your personal doctor spend enough time with you?	Never, Sometimes, Usually, Always
Customer Service[21]	
24. In the last 6 months, how often did your health plan's customer service give you the information or help you needed?	Never, Sometimes, Usually, Always
25. In the last 6 months, how often did your health plan's customer service staff treat you with courtesy and respect?	Never, Sometimes, Usually, Always

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[20] For *How Well Doctors Communicate*, the gate question asks respondents if they have a personal doctor. If respondents answer "No" to this question, they are directed to skip the questions that collectively comprise the *How Well Doctors Communicate* measure.

[21] For *Customer Service*, the gate question asks respondents if the received information or help from customer service at their health plan in the last six months. If respondents answer "No" to this question, they are directed to skip the questions that collectively comprise the *Customer Service* measure.

Question Language	Response Options
Medical Assistance With Smoking and Tobacco Use Cessation Measure Items[22]	
Advising Smokers and Tobacco Users to Quit	
32. In the last 6 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan?	Never, Sometimes, Usually, Always
Discussing Cessation Medications	
33. In the last 6 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication.	Never, Sometimes, Usually, Always
Discussing Cessation Strategies	
34. In the last 6 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program.	Never, Sometimes, Usually, Always

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[22] For the *Medical Assistance With Smoking and Tobacco Use Cessation* measure items, the gate question asks respondents if they smoke cigarettes or use tobacco every day, some days, or not at all. If respondents answer "Not at all" or "Don't know" to this question, they are directed to skip the questions that collectively comprise the *Medical Assistance With Smoking and Tobacco Use Cessation* measure items.

Table 4—Child CAHPS Survey Language and Response Options

Question Language	Response Options
Global Ratings	
Rating of Health Plan	
31. Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your child's health plan?	0–10 Scale
Rating of All Health Care[23]	
8. Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your child's health care in the last 6 months?	0–10 Scale
Rating of Personal Doctor[24]	
21. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your child's personal doctor?	0–10 Scale

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[23] For *Rating of All Health Care*, the gate question asks respondents how many times their child received health care in person, by phone, or by video, not counting the times their child went to the emergency room in the last six months. If respondents answer "None" to this question, they are directed to skip the question that comprises the *Rating of All Health Care* measure.

[24] For *Rating of Personal Doctor*, the gate question asks respondents if their child has a personal doctor. If respondents answer "No" to this question, they are directed to skip the question that comprises the *Rating of Personal Doctor* measure.

Question Language	Response Options
Rating of Specialist Seen Most Often[25]	
25. We want to know your rating of the specialist your child talked to most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?	0–10 Scale
Composite Measures	
Getting Needed Care[26]	
9. In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?	Never, Sometimes, Usually, Always
23. In the last 6 months, how often did you get appointments for your child with a specialist as soon as he or she needed?	Never, Sometimes, Usually, Always
Getting Care Quickly[27]	
4. In the last 6 months, when your child <u>needed care right away</u>, how often did your child get care as soon as he or she needed?	Never, Sometimes, Usually, Always

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[25] For *Rating of Specialist Seen Most Often*, the gate question asks respondents if they made any appointments for their child with a specialist in the last six months. If respondents answer "No" to this question, they are directed to skip the question that comprises the *Rating of Specialist Seen Most Often* measure.

[26] For *Getting Needed Care*, the gate questions ask respondents how many times their child received health care in person, by phone, or by video, not counting the times their child went to the emergency room in the last six months and did they make any appointments for their child with a specialist in the last six months. If respondents answer "None" or "No" to these questions, they are directed to skip the questions that collectively comprise the *Getting Needed Care* measure.

[27] For *Getting Care Quickly*, the gate questions ask respondents if their child had an illness, injury, or condition that needed care right away and did they make any in person, phone, or video appointments for a check-up or routine care for their child. If respondents answer "No" to these questions, they are directed to skip the questions that collectively comprise the *Getting Care Quickly* measure.

Question Language	Response Options
6. In the last 6 months, how often did you get an appointment for a <u>check-up or routine care</u> for your child as soon as your child needed?	Never, Sometimes, Usually, Always
How Well Doctors Communicate[28]	
12. In the last 6 months, how often did your child's personal doctor explain things about your child's health in a way that was easy to understand?	Never, Sometimes, Usually, Always
13. In the last 6 months, how often did your child's personal doctor listen carefully to you?	Never, Sometimes, Usually, Always
14. In the last 6 months, how often did your child's personal doctor show respect for what you had to say?	Never, Sometimes, Usually, Always
17. In the last 6 months, how often did your child's personal doctor spend enough time with your child?	Never, Sometimes, Usually, Always
Customer Service[29]	
27. In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed?	Never, Sometimes, Usually, Always
28. In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect?	Never, Sometimes, Usually, Always

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[28] For *How Well Doctors Communicate*, the gate question asks respondents if their child has a personal doctor. If respondents answer "No" to this question, they are directed to skip the questions that collectively comprise the *How Well Doctors Communicate* measure.

[29] For *Customer Service*, the gate question asks respondents if they received information or help from customer service at their child's health plan in the last six months. If respondents answer "No" to this question, they are directed to skip the questions that collectively comprise the *Customer Service* measure.

How CAHPS Survey Results Were Collected

Sampling Procedures

DHCS provided HSAG with a list of all eligible members for the MCP, FFS, and PSP sample frames. HSAG sampled members who met the following criteria:

» Were 18 years of age or older as of December 31, 2023, for the adult population.

» Were 17 years of age or younger as of December 31, 2023, for the child population.

» Were currently enrolled in the MCP, FFS, or PSP.

» Had been continuously enrolled in the MCP, FFS, or PSP for at least five of the last six months of 2023 (July through December) with no more than a 45-day gap in enrollment.

Following NCQA's specifications, the first step of the sampling strategy was for HSAG to select a systematic sample of adult and child MCMC members at the MCP level. HSAG selected a random sample of adult and child Medi-Cal FFS and adult PSP members at the statewide level. Based on the NCQA minimum required sample sizes for the CAHPS Medicaid Health Plan Survey, HSAG selected a minimum of 1,350 adult and 1,650 child Medi-Cal members from each plan/population.

Based on historical CAHPS disposition information for the California MCMC and FFS populations, HSAG determined that oversampling was required. HSAG conducted an oversample of the adult and child Medi-Cal populations for a total sample of 44,565 adult and 87,099 child MCMC members; 5,782 adult and 6,270 child FFS members; and 2,916 adult PSP members.

HSAG inspected the sample file records from the sample frame to check for any apparent problems with the files, such as missing address elements. HSAG obtained new addresses for members selected for the sample by processing sampled members' addresses through the United States Postal Service's National Change of Address (NCOA) system, as available. HSAG submitted the results from the adult and child MCP samples to NCQA.

In the context of NCQA's recommended sample size for the CAHPS Medicaid Health Plan Surveys, DHCS' surveying and reporting needs, and allotted funds available, Table 5

and Table 6 depict the sample sizes for the adult and child Medi-Cal populations, respectively, including any oversampling.

Table 5—Adult Medi-Cal Sample Sizes

Medi-Cal Population	General Sample Size	General Oversample Size	Total Sample Size
AAH	1,350	1,283	2,633
Anthem Blue Cross	1,350	2,349	3,699
Blue Shield Promise	1,350	284	1,634
CalOptima	1,350	0	1,350
CalViva	1,350	905	2,255
CenCal	1,350	715	2,065
CCAH	1,350	783	2,133
CHG	1,350	162	1,512
CCHP	1,350	432	1,782
FFS	1,350	4,432	5,782
GCHP	1,350	702	2,052
Health Net	1,350	1,526	2,876
HPSJ	1,350	1,107	2,457
HPSM	1,350	0	1,350
IEHP	1,350	324	1,674
Kaiser	1,350	729	2,079
KHS	1,350	621	1,971
L.A. Care	1,350	702	2,052
Molina	1,350	1,161	2,511
Partnership	1,350	1,917	3,267
PSP Statewide	1,350	1,566	2,916
SFHP	1,350	432	1,782

Medi-Cal Population	General Sample Size	General Oversample Size	Total Sample Size
SCFHP	1,350	81	1,431
Total Sample	**31,050**	**22,213**	**53,263**

Table 6—Child Medi-Cal Sample Sizes

Medi-Cal Population	General Sample Size	General Oversample Size	Total Sample Size
AAH	1,650	984	2,634
Anthem Blue Cross	1,650	4,653	6,303
Blue Shield Promise	1,650	3,470	5,120
CalOptima	1,650	1,339	2,989
CalViva	1,650	3,067	4,717
CenCal	1,650	808	2,458
CCAH	1,650	545	2,195
CHG	1,650	1,634	3,284
CCHP	1,650	1,837	3,487
FFS	1,650	4,620	6,270
GCHP	1,650	2,599	4,249
Health Net	1,650	4,587	6,237
HPSJ	1,650	3,250	4,900
HPSM	1,650	2,148	3,798
IEHP	1,650	3,093	4,743
Kaiser	1,650	3,308	4,958
KHS	1,650	2,558	4,208
L.A. Care	1,650	3,830	5,480

Medi-Cal Population	General Sample Size	General Oversample Size	Total Sample Size
Molina	1,650	3,273	4,923
Partnership	1,650	2,949	4,599
SFHP	1,650	1,357	3,007
SCFHP	1,650	1,160	2,810
Total Sample	**36,300**	**57,069**	**93,369**

Survey Protocol

The survey administration process allowed for two methods by which adult members and parents/caretakers of child members could complete a survey: (1) mail or (2) Internet. A cover letter was mailed to all adult members and parents/caretakers of child members that provided two options to complete the survey: (1) complete the paper-based survey and return it using the pre-addressed, postage-paid return envelope; or (2) complete the web-based survey via a URL or quick response (QR) code and designated username. Members who were identified as Spanish speaking through administrative data were mailed a Spanish version of the cover letter and survey. Members who were not identified as Spanish speaking received an English version of the cover letter and survey. The cover letter included with the English version of the survey had a Spanish cover letter on the back side informing adult members and parents/caretakers of child members that they could call the toll-free number to request a Spanish version of the CAHPS survey. The cover letter included with the Spanish version of the survey had an English cover letter on the back side informing adult members and parents/caretakers of child members that they could call the toll-free number to request an English version of the CAHPS survey. In addition, respondents had the option to choose an English or Spanish version of the web survey. All non-respondents received a reminder postcard, followed by a second survey mailing, second reminder postcard, and third survey mailing.

The HEDIS specifications for CAHPS require that the name of the MCP/FFS/PSP appear in the surveys and letters, that the letters bear the signature of a high-ranking state official, and that the survey packages include a postage-paid reply envelope addressed to the organization conducting the surveys. HSAG followed these specifications.

Table 7 shows the timeline used in the surveys administration.

Table 7—CAHPS Survey Timeline

Task	Timeline
Send first survey with cover letter to the member or parent/caretaker of the child member. Make website available to complete the survey online.	0 days
Send a postcard reminder to non-respondents 7 days after mailing the first survey.	7 days
Send a second survey (and letter) to non-respondents 28 days after mailing the first survey.	28 days
Send a second postcard reminder to non-respondents 7 days after mailing the second survey.	35 days
Send a third survey (and letter) to non-respondents 28 days after mailing the second survey.	56 days
Close survey field.	84 days

How CAHPS Survey Results Were Calculated and Displayed

HSAG used the CAHPS scoring approach recommended by NCQA in *HEDIS Measurement Year 2023, Volume 3: Specifications for Survey Measures*. Based on NCQA's recommendations and HSAG's extensive experience evaluating CAHPS data, HSAG performed several analyses to comprehensively assess member experience. This portion of the report includes an overview of each analysis that HSAG conducted.

Response Rates

The CAHPS survey response rate is the total number of completed surveys divided by all eligible members in the sample.[30] As specified by NCQA, HSAG considered a survey completed if adult members or parents/caretakers of child members answered at least three of the following five questions: questions 3, 10, 19, 23, and 28 for adult Medicaid

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[30] National Committee for Quality Assurance. *HEDIS® Measurement Year 2023, Volume 3: Specifications for Survey Measures.* Washington, DC: NCQA Publication, 2023.

and questions 3, 10, 22, 26, and 31 for child Medicaid.[31] Eligible members included the entire sample minus ineligible members. Ineligible members met at least one of the following criteria: they were deceased, did not meet the eligible population criteria, were mentally or physically incapacitated (adult population only), or had a language barrier (the survey was made available in both English and Spanish).

$$Response\ Rate = \frac{Number\ of\ Completed\ Surveys}{Sample - Ineligibles}$$

Respondent Analysis

For the respondent analysis, HSAG compared the demographic characteristics of adult and child survey respondents (i.e., respondent percentages) to the demographic characteristics of all adult and child members in the sample frames (i.e., sample frame percentages) for statistically significant differences. HSAG evaluated demographic characteristics of adult and child member age, gender, race, and ethnicity using variables from the sample frame. HSAG used the 95 percent confidence interval of the respondent percentage to determine whether demographic characteristics of survey respondents were statistically significantly different from demographic characteristics of all members in the sample frame. If the sample frame percentage was below the lower bound of the 95 percent confidence interval of the respondent percentage, the respondent percentage was statistically significantly higher than the sample frame percentage for the demographic category. If the sample frame percentage was above the upper bound of the 95 percent confidence interval of the respondent percentage, the respondent percentage was statistically significantly lower than the sample frame percentage for the demographic category. If the sample frame percentage encompassed the 95 percent confidence interval of the respondent percentage, there was no statistically significant difference between the respondent percentage and the sample frame percentage for the demographic category.

HSAG used arrows in the tables to indicate statistically significant differences within a particular demographic category. An upward (↑) arrow indicates that the respondent percentage was statistically significantly higher than the sample frame percentage. A downward (↓) arrow indicates that the respondent percentage was statistically

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[31] Please refer to Appendix B: Survey Instruments for a copy of the survey instrument to see the survey question language.

significantly lower than the sample frame percentage. Respondent percentages that were not statistically significantly higher or lower than the sample frame percentages are not noted with an arrow. DHCS should exercise caution when extrapolating the CAHPS results to the entire population if the average characteristics of respondents differ significantly from the MCP, FFS, or PSP populations.

Scoring Calculations

HSAG calculated top-box scores for each measure in accordance with NCQA HEDIS Specifications for Survey Measures.[32] HSAG suppressed scores for measures that have fewer than 100 respondents. For scoring of the measures, HSAG assigned top-box responses a score of one and all other responses a score of zero. HSAG defined a "top-box" response as follows:

- » "8," "9," or "10" for the global ratings
- » "Usually" or "Always" for the composites

Table 8 illustrates how HSAG determined the top-box score values.

Table 8—Determining Global Rating and Composite Measure Score Values

Response Category	Score Values
Global Ratings	
0–7	0
8–10	1
Composite Measures	
Never	0
Sometimes	0
Usually	1
Always	1

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[32] National Committee for Quality Assurance. *HEDIS® Measurement Year 2023, Volume 3: Specifications for Survey Measures.* Washington, DC: NCQA Publication, 2023.

Global Ratings

The top-box score was the sum of the score values (0 or 1) divided by the total number of responses to the global rating question.

$$\text{Top-Box (TB)} \atop \text{Score} = \sum_{i=1}^{n} \frac{x_i}{n}$$

i = 1, ..., n members responding to question
x$_I$ = score of member on question (either 0 or 1)

HSAG calculated a variance for each top-box score using a standard variance formula where *x* was the score value (0 or 1).

$$\text{Top-Box} \atop \text{Variance (TBV)} = \sum_{i=1}^{n} \frac{(x_i - u)^2}{n - 1}$$

i = 1, ..., n members responding to question
x$_I$ = score of member on question (either 0 or 1)
u = average score of member on question

HSAG used the mean and variance to calculate a 95 percent confidence interval for each top-box score. HSAG used the following formula to calculate the 95 percent confidence interval for each top-box score:

$$\text{TB 95\% Confidence Interval} = (TB) \pm 1.96 \sqrt{\frac{TBV}{n}}$$

Composite Measures

HSAG calculated top-box scores and their corresponding variances and 95 percent confidence intervals for each composite measure. HSAG calculated the composite top-box score by first determining the top-box score for each question (i.e., proportion responding with a score of 1 for each question). HSAG repeated this step for each question in the composite. Finally, HSAG determined the average proportion responding with a score of 1 across all the questions in the composite. This average was the composite top-box score. That is, each question contributed equally to the average regardless of the number of respondents for the question.

$$\text{Composite TB Score} = \frac{1}{m}\sum_{i=1}^{m}\left(\sum_{j=1}^{n_i}\frac{x_{ij}}{n_i}\right)$$

$i = 1, ..., m$ questions in a composite
$j = 1, ..., n_i$ members responding to question i
x_{ij} = score of member j on question i (either 0 or 1)

HSAG calculated a variance for each composite measure. HSAG used the following formula to calculate the composite measure variance:

$$\text{Composite TBV} = \frac{N}{N-1}\sum_{j=1}^{N}\left(\sum_{i=1}^{m}\frac{1}{m}*\frac{x_{ij}-\bar{x}_i}{n_i}\right)^2$$

$i = 1, ..., m$ questions in a composite
$j = 1, ..., n_i$ members responding to question i
x_{ij} = score of member j on question i (either 0 or 1)

HSAG used the mean and variance to calculate a 95 percent confidence interval for each composite score. HSAG used the following formula to calculate the 95 percent confidence interval for each composite top-box score:

$$\text{Composite TB 95\% Confidence Interval} = (TB) \pm 1.96\sqrt{TBV}$$

Medical Assistance with Smoking and Tobacco Use Cessation Measure Items

HSAG calculated three scores that assess different facets of providing medical assistance with smoking and tobacco use cessation:[33]

» Advising Smokers and Tobacco Users to Quit

» Discussing Cessation Medications

» Discussing Cessation Strategies

These scores assess the percentage of smokers or tobacco users who were advised to quit, were recommended cessation medications, and were provided cessation methods or strategies. Responses of "Sometimes," "Usually," and "Always" were used to determine if the member qualified for inclusion in the numerator. The scores presented follow NCQA's methodology of calculating a rolling average using two years of results; however, HSAG did not administer the survey in 2020 and 2022, so those results are not

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[33] HSAG presents scores for the *Medical Assistance with Smoking and Tobacco Use Cessation* measure items for the adult population only.

available. The 2024 results contain members who responded to the survey and indicated that they were current smokers or tobacco users in 2023 or 2024. The 2024 results for the PSP statewide population contain members who responded to the survey and indicated that they were current smokers or tobacco users in 2024 only since HSAG did not administer the CAHPS survey for the PSPs in 2023. The 2023 results contain members who responded to the survey and indicated that they were current smokers or tobacco users in 2021 or 2023. The 2023 results for FFS contain members who responded to the survey and indicated that they were current smokers or tobacco users in 2023 only since 2023 was the first year HSAG administered the CAHPS survey for FFS. The 2021 results contain members who responded to the survey and indicated that they were current smokers or tobacco users in 2019 or 2021.

HSAG calculated a variance and 95 percent confidence interval for each score using the same formulas as the global ratings on page 26.

State-Level Scores

HSAG presents the 2021, 2023, and 2024 State weighted (i.e., MCPs, FFS, and PSPs combined) scores for each CAHPS measure evaluated through the CAHPS Adult and Child Medicaid Health Plan Surveys.[34] HSAG used the sample frame files to determine the eligible population size for each MCP, FFS, and PSP, as applicable. HSAG calculated a general sample (including the oversample) probability and then calculated a weight for each general sample respondent using the formulas below.

$$GP_r = \frac{GSS_p}{EP_p}$$

$$w_{gsr} = \frac{1}{GP_r}$$

Where:

GP_r = probability for respondent r from the general sample
GSS_p = general sample size for MCP/FFS/PSP p

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[34] The 2021 State weighted scores only include the MCPs, AHF (adult results only), and Rady Children's Hospital—San Diego (child results only) since FFS and SCAN were not included in the 2021 survey administration. The 2023 State weighted scores only include the MCPs and FFS since the PSPs were not included in the 2023 survey administration. In addition, the 2021 and 2023 State weighted scores include Aetna and CHW.

EP_p = eligible population size for MCP/FFS/PSP *p*

w_{gsr} = weight for general sample respondent *r*

HSAG presents the results for the adult and child populations separately and the NCQA Medicaid national 50th percentile and 90th percentile data for comparison purposes. The State weighted scores included sample respondents from the MCP, FFS, and PSP general sample and oversample. Additionally, HSAG performed a *t* test to determine whether results in 2021 and 2023 were statistically significantly different from results in 2024. A difference was considered statistically significant if the two-sided *p* value of the *t* test was less than 0.05. The two-sided *p* value of the *t* test is the probability of observing a test statistic as extreme as or more extreme than the one actually observed by chance. In the figures, scores that were statistically significantly higher in 2021 or 2023 than in 2024 are noted with upward (▲) triangles. Scores that were statistically significantly lower in 2021 or 2023 than in 2024 are noted with downward (▼) triangles. Scores in 2021 or 2023 that were not statistically significantly different from scores in 2024 are not noted with triangles.

State Comparisons

For purposes of the State Comparisons analyses, HSAG presents the adult and child population results separately for each measure. HSAG presents MCP-level, FFS-level, and PSP statewide-level results and includes the State weighted scores in the figures for reference only. The NCQA adult and child Medicaid national 50th percentile and 90th percentile data are included as vertical lines in the figures.[35,36]

HSAG used responses from the MCP-level, FFS-level, and PSP statewide-level samples to report each measure, and the results were not weighted. HSAG calculated the 95 percent confidence intervals for each score and compared these intervals to the adult and child Medicaid national 50th percentiles. If the Medicaid national 50th percentile was below the lower bound of the 95 percent confidence interval, the measure was statistically significantly above the Medicaid national 50th percentile. If the Medicaid national 50th percentile was above the upper bound of the 95 percent confidence interval, the measure was statistically significantly below the Medicaid national 50th

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[35] National Committee for Quality Assurance. *Quality Compass®: Benchmark and Compare Quality Data 2023*. Washington, DC: NCQA, September 2023.

[36] NCQA national data for 2024 were not available at the time this report was prepared; therefore, 2023 NCQA national data are presented in this section. 2023 Quality Compass data reflect measurement year 2022 scores.

percentile. If the Medicaid national 50th percentile encompassed the 95 percent confidence interval, there was no statistically significant difference between the score and the Medicaid national 50th percentile for the measure.

Comparative Analysis

HSAG performed an analysis for each measure that compared 20 of the 21 MCPs and the FFS 2024 scores to the corresponding 2021 and 2023 scores, as applicable, to determine whether there were statistically significant differences.[37] HSAG presents the adult and child population results separately.

HSAG performed a *t* test to determine whether results in 2024 were statistically significantly different from results in 2021 and 2023. For more information on the comparative analysis, please refer to the "State-Level Scores" heading in the Methodology section of this report on page 28.

Limitations and Cautions

The findings presented in this CAHPS report are subject to some limitations in the survey design, analyses, and interpretations. According to NCQA HEDIS Specifications for Survey Measures, if a measure has fewer than 100 respondents, the measure is not reportable; therefore, in the figures throughout this report, HSAG does not present the results for measures with fewer than 100 respondents.[38]

Causal Inferences

The analyses in this report examine whether adult members or parents/caretakers of child members report differences in experiences with various aspects of their/their child's health care. However, these differences may not be completely attributable to the MCP, FFS, or PSP. The survey alone does not necessarily reveal the exact cause of these differences.

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[37] HSAG performed a comparative analysis for 20 of the 21 MCPs and FFS only. Prior to the 2024 survey administration, Kaiser was two separate entities, and the PSPs were included at the statewide level in the 2024 survey administration for the first time.

[38] National Committee for Quality Assurance. *HEDIS® Measurement Year 2023, Volume 3: Specifications for Survey Measures.* Washington, DC: NCQA Publication, 2023.

National Data

HSAG compared the 95 percent confidence interval of each MCP's, FFS population's, and PSP statewide population's scores with the NCQA Medicaid national 50th percentile.[39] NCQA does not calculate 95 percent confidence intervals; therefore, HSAG could only compare each MCP's, FFS population's, and PSP statewide population's 95 percent confidence intervals to the NCQA Medicaid national 50th percentile (and not the national 95 percent confidence interval). Also, the national data consist of Medicaid members enrolled in a managed care organization, which differs from the FFS and PSP statewide populations. DHCS should exercise caution when interpreting the significant results of the comparisons to NCQA Medicaid national percentiles.

Non-Response Bias

The experiences of the survey respondent population may be different than that of non-respondents with respect to their health care services and may vary by plan or program. According to research, late respondents (i.e., respondents who submitted a survey later than the first mailing/round) could potentially be non-respondents if the survey had ended earlier.[40] To identify potential non-response bias at the state-level, HSAG compared the scores from late respondents to early respondents (i.e., respondents who submitted a survey during the first mailing/round) for each measure. Table 9 presents the results of the non-response bias analysis. DHCS should consider that potential non-response bias may exist when interpreting CAHPS results.

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[39] National Committee for Quality Assurance. *Quality Compass®: Benchmark and Compare Quality Data 2023*. Washington, DC: NCQA, September 2023.

[40] Korkeila, K., et al. "Non-response and related factors in a nation-wide health survey." European Journal of Epidemiology 17.11 (2001): 991-999.

Table 9—Non-Response Bias Analysis

↑   Indicates that early respondents are statistically significantly more likely to provide a higher response for the measure (i.e., potential non-response bias).

↓   Indicates that early respondents are statistically significantly more likely to provide a lower response for the measure (i.e., potential non-response bias).

—   Indicates that early respondents are not statistically significantly more likely to provide a higher or lower response for the measure.

NA   Indicates that this measure is not applicable for the population.

Measure	2021		2023		2024	
	Adult	**Child**	**Adult**	**Child**	**Adult**	**Child**
Rating of Health Plan	↑	—	—	—	—	—
Rating of All Health Care	↑	—	—	↑	—	↑
Getting Needed Care	↑	—	—	—	—	—
Getting Care Quickly	↑	—	—	—	↓	—
Customer Service	↑	—	—	↓	—	—
Advising Smokers and Tobacco Users to Quit	↑	NA	↑	NA	—	NA
Discussing Cessation Strategies	—	NA	↑	NA	—	NA

RESULTS

Survey Respondents

HSAG used the 15,564 surveys completed by adult members and parents/caretakers of child members to calculate the CAHPS survey results presented throughout the Results section.

The CAHPS Survey response rate is the total number of completed surveys divided by all eligible members in the sample. If a sampled adult member or parent/caretaker of a sampled child member appropriately answered at least three of five NCQA-specified questions in the survey, HSAG counted the survey as complete.[41]

Table 10 presents the total number of members sampled, the number of ineligible and eligible members, the number of surveys completed, and the response rate for the adult and child members selected for surveying. The adult and child Medicaid national response rates reported by NCQA for 2023 were 12.9 percent and 12.2 percent, respectively. The overall Medi-Cal adult and child member response rates were lower than the adult and child Medicaid national response rates, except for PSP Statewide. In 2023, the adult and child MCP response rates (11.23 percent and 10.18 percent, respectively) were higher than the 2024 response rates, and the adult and child FFS response rates (6.38 percent and 6.28 percent, respectively) were lower than the 2024 response rates. While the 2024 response rates were lower than the national and prior year's response rates for the MCPs and lower than the national response rates for FFS, HSAG designed the sampling strategy with this in mind (i.e., accounted for the national trend of declining response rates). For more information on the calculation of the response rates, please refer to the "Response Rates" heading in the Methodology section of this report on page 23.

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[41] A survey was considered a complete and valid survey for the CAHPS Adult Medicaid Survey when three of the following five questions were appropriately answered: 3, 10, 19, 23, and 28. A survey was considered a complete and valid survey for the CAHPS Child Medicaid Survey when three of the following five questions were appropriately answered: 3, 10, 22, 26, and 31. Please refer to Appendix B: Survey Instruments for a copy of the survey instrument to see the survey question language.

Table 10—Total Number of Respondents and Response Rate

Response rate is calculated as Number of Completed Surveys/Eligible Sample.

	Total Adult MCP	Total Child MCP	Total Adult FFS	Total Child FFS	Total PSP Statewide
Sample Size	44,565	87,099	5,782	6,270	2,916
Ineligible Members	208	297	136	110	50
Eligible Sample	44,357	86,802	5,646	6,160	2,866
Number of Surveys Completed	4,699	8,802	441	510	1,112
Response Rate	10.59%	10.14%	7.81%	8.28%	38.80%

Respondent Analysis

HSAG compared the demographic characteristics (i.e., age, gender, race, and ethnicity) of survey respondents to the demographic characteristics of all members in the sample frames. For this analysis, the adult and child populations' results are presented separately. Please refer to Appendix A: Respondent Analysis Results for the detailed results of the respondent analysis.

State-Level Scores

For more information on the calculation of the scores and state-level scores, please refer to the "Scoring Calculations," "State-Level Scores," and "Comparative Analysis" headings in the Methodology section of this report on pages 25, 28, and 30, respectively.[42]

Global Ratings

Figure 1 shows the 2021, 2023, and 2024 adult State weighted top-box scores and the 2023 NCQA adult Medicaid national 50th percentiles and 90th percentiles for the four global ratings.

Figure 1—Global Ratings: Adult Top-Box Scores (State Level)

▲ Indicates the score is statistically significantly higher than the 2024 score.
▼ Indicates the score is statistically significantly lower than the 2024 score.
If no statistically significant differences were found, no indicator (▲ or ▼) appears on the bar.
Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.

_____
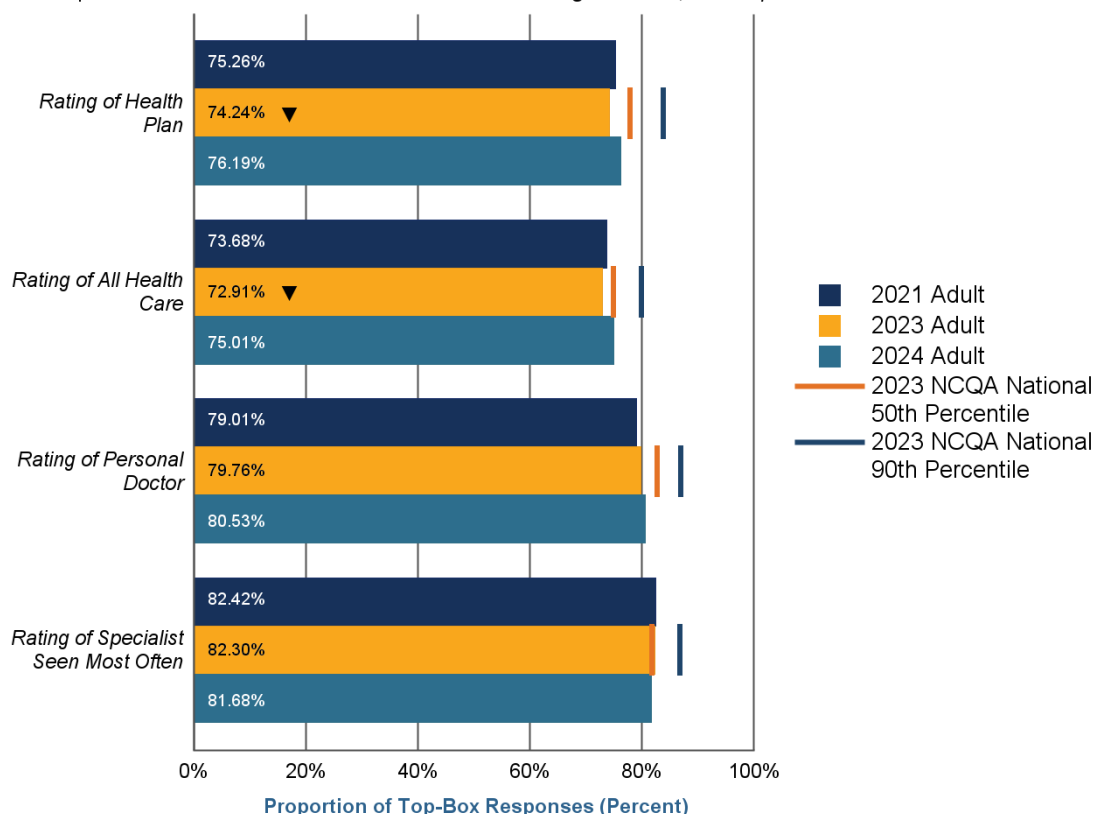
[42] HSAG recalculated the 2021 and 2023 scores to report scores out to two decimal places. Therefore, the 2021 and 2023 results in this report will not match previous reports.

Figure 2 shows the 2021, 2023, and 2024 child State weighted top-box scores and the 2023 NCQA child Medicaid national 50th percentiles and 90th percentiles for the four global ratings.

Figure 2—Global Ratings: Child Top-Box Scores (State Level)

▲ Indicates the score is statistically significantly higher than the 2024 score.
▼ Indicates the score is statistically significantly lower than the 2024 score.
If no statistically significant differences were found, no indicator (▲ or ▼) appears on the bar.
Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.
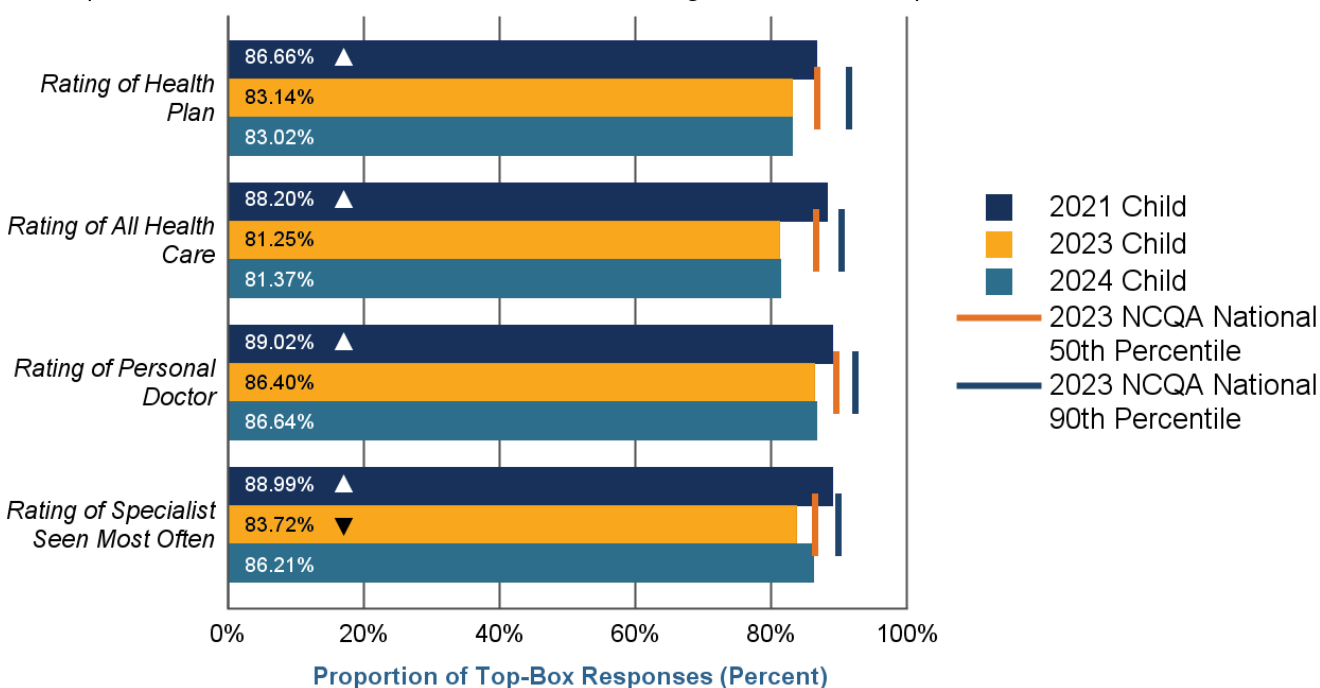
Composite Measures

Figure 3 shows the 2021, 2023, and 2024 adult State weighted top-box scores and the 2023 NCQA adult Medicaid national 50th percentiles and 90th percentiles for the four composite measures.

Figure 3—Composite Measures: Adult Top-Box Scores (State Level)

▲ Indicates the score is statistically significantly higher than the 2024 score.
▼ Indicates the score is statistically significantly lower than the 2024 score.
If no statistically significant differences were found, no indicator (▲ or ▼) appears on the bar.
Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.
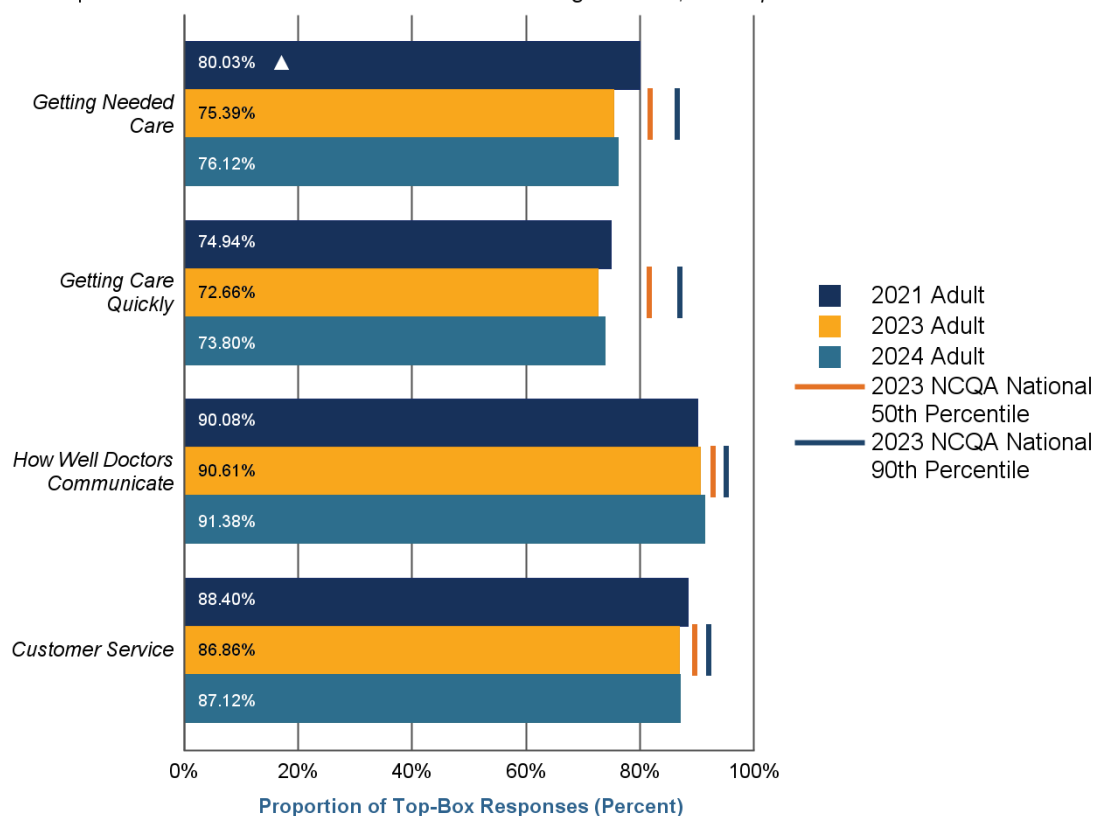
Figure 4 shows the 2021, 2023, and 2024 child State weighted top-box scores and the 2023 NCQA child Medicaid national 50th percentiles and 90th percentiles for the four composite measures.

Figure 4—Composite Measures: Child Top-Box Scores (State Level)

▲ Indicates the score is statistically significantly higher than the 2024 score.
▼ Indicates the score is statistically significantly lower than the 2024 score.
If no statistically significant differences were found, no indicator (▲ or ▼) appears on the bar.
Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.

Measure	2021 Child	2023 Child	2024 Child
Getting Needed Care	81.83% ▲	77.17%	77.19%
Getting Care Quickly	82.69% ▲	79.66%	79.80%
How Well Doctors Communicate	92.33%	92.38%	91.69%
Customer Service	86.12%	87.34%	87.44%

Legend: 2021 Child, 2023 Child, 2024 Child, 2023 NCQA National 50th Percentile, 2023 NCQA National 90th Percentile

Proportion of Top-Box Responses (Percent)

Medical Assistance with Smoking and Tobacco Use Cessation Measure Items

Figure 5 shows the 2021, 2023, and 2024 adult State weighted overall scores and the 2023 NCQA adult Medicaid national 50th percentiles and 90th percentiles for the three medical assistance with smoking and tobacco use cessation measure items.

Figure 5—Medical Assistance with Smoking and Tobacco Use Cessation Measure Items: Adult Scores (State Level)

▲ Indicates the score is statistically significantly higher than the 2024 score.
▼ Indicates the score is statistically significantly lower than the 2024 score.
If no statistically significant differences were found, no indicator (▲ or ▼) appears on the bar.
Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.
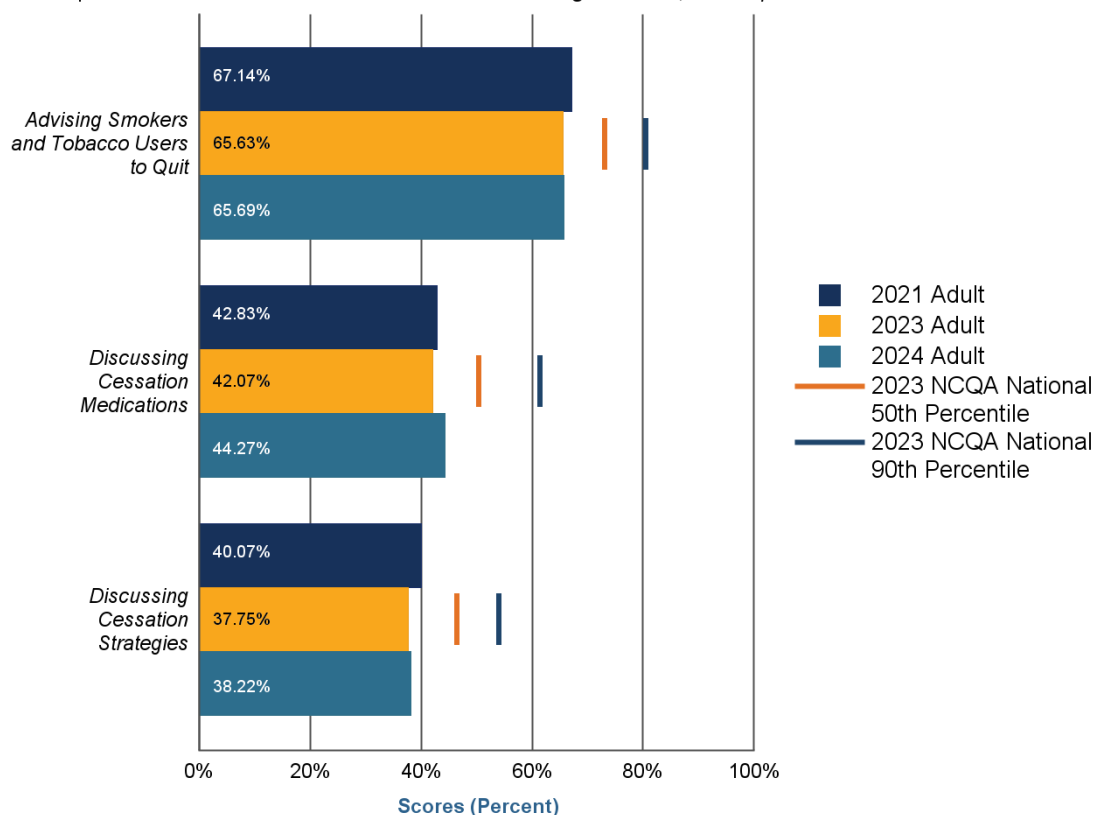
State Comparisons

For more information on the calculation of the scores and state comparisons, please refer to the "Scoring Calculations," "State Comparisons," and "Comparative Analysis" headings in the Methodology section of this report on pages 25, 29, and 30, respectively.[43]

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[43] HSAG recalculated the 2021 and 2023 scores to report scores out to two decimal places. Therefore, the 2021 and 2023 results in this report will not match previous reports.

Global Ratings

Rating of Health Plan

Measure Definition

Adult members and parents/caretakers of child members were asked to rate their/their child's MCP, FFS, or PSP on a scale of 0 to 10, with 0 being the "worst health plan possible" and 10 being the "best health plan possible."

Adult Results

Figure 6 shows the adult top-box scores for *Rating of Health Plan*.

Figure 6—*Rating of Health Plan*: Adult Top-Box Scores

Table 11 shows the 2021, 2023, and 2024 adult top-box scores for *Rating of Health Plan*.

Table 11—*Rating of Health Plan*: Adult Comparative Analysis Results

▲ Indicates the 2024 score is statistically significantly higher than the comparison year's score.

▼ Indicates the 2024 score is statistically significantly lower than the comparison year's score.

— Indicates the 2024 score is not statistically significantly different than the comparison year's score.

NA Indicates the FFS population was not included in the survey administration; therefore, FFS results are not available.

NC Indicates the score is not comparable due to the FFS population not being included in the survey administration or comparative data are suppressed.

Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
AAH	75.00%	80.65%	74.75%	—	—
Anthem Blue Cross	68.49%	68.05%	67.04%	—	—
Blue Shield Promise	79.21%	76.68%	70.48%	▼	—
CalOptima	76.97%	74.77%	77.56%	—	—
CalViva	75.91%	74.20%	81.98%	—	▲
CenCal	76.85%	78.26%	69.74%	—	▼
CCAH	76.77%	77.11%	74.14%	—	—
CHG	81.52%	75.45%	75.16%	—	—
CCHP	79.10%	76.38%	78.47%	—	—
FFS	NA	69.61%	76.04%	NC	—
GCHP	72.33%	78.86%	73.60%	—	—
Health Net	74.65%	72.66%	74.22%	—	—
HPSJ	77.08%	74.13%	76.99%	—	—
HPSM	79.42%	75.21%	77.78%	—	—

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
IEHP	78.22%	80.39%	84.17%	—	—
KHS	75.16%	75.77%	76.92%	—	—
L.A. Care	75.08%	73.37%	76.47%	—	—
Molina	68.38%	72.51%	76.00%	—	—
Partnership	74.10%	65.53%	70.14%	—	—
SFHP	76.42%	75.95%	72.50%	—	—
SCFHP	71.18%	76.02%	73.94%	—	—

Child Results

Figure 7 shows the child top-box scores for *Rating of Health Plan*.

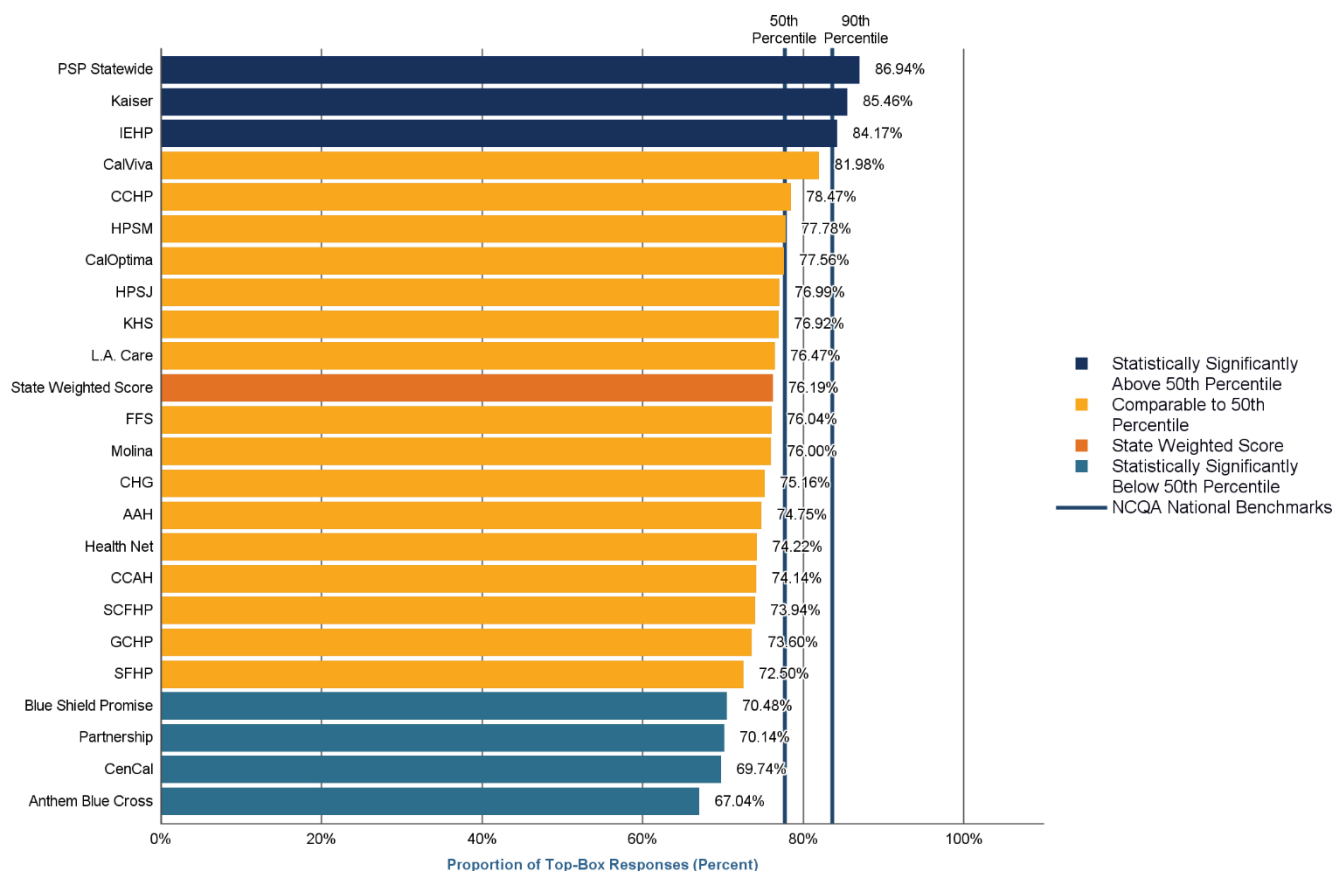## Figure 7—*Rating of Health Plan*: Child Top-Box Scores
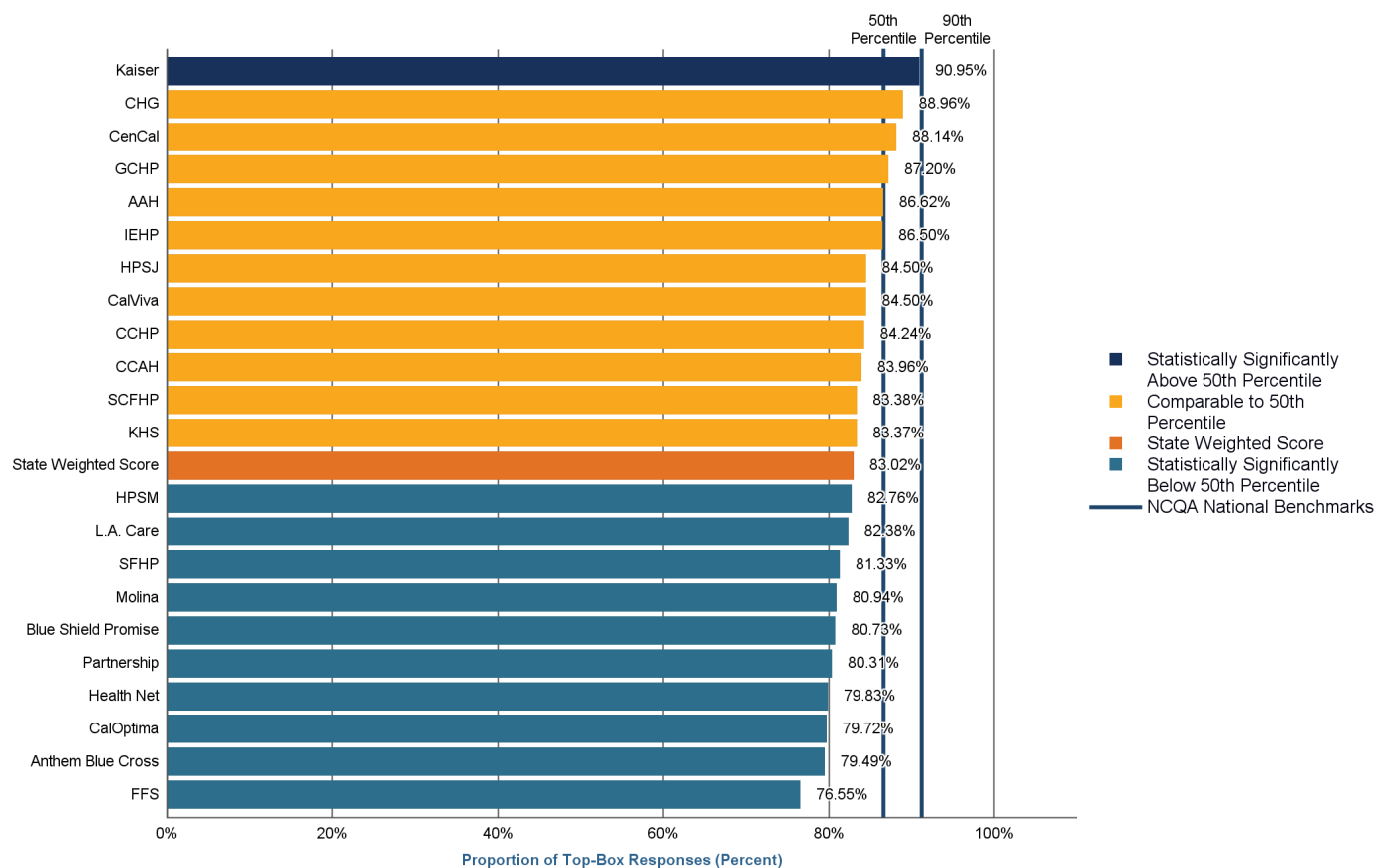
Table 12 shows the 2021, 2023, and 2024 child top-box scores for *Rating of Health Plan*.

Table 12—*Rating of Health Plan*: Child Comparative Analysis Results

▲   Indicates the 2024 score is statistically significantly higher than the comparison year's score.

▼   Indicates the 2024 score is statistically significantly lower than the comparison year's score.

—   Indicates the 2024 score is not statistically significantly different than the comparison year's score.

NA   Indicates the FFS population was not included in the survey administration; therefore, FFS results are not available.

NC   Indicates the score is not comparable due to the FFS population not being included in the survey administration or comparative data are suppressed.

Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
AAH	88.42%	83.30%	86.62%	—	—
Anthem Blue Cross	82.84%	76.56%	79.49%	—	—
Blue Shield Promise	83.33%	83.92%	80.73%	—	—
CalOptima	86.31%	82.66%	79.72%	▼	—
CalViva	87.47%	81.35%	84.50%	—	—
CenCal	90.57%	84.87%	88.14%	—	—
CCAH	87.37%	84.25%	83.96%	—	—
CHG	90.32%	84.68%	88.96%	—	—
CCHP	87.43%	83.47%	84.24%	—	—
FFS	NA	78.13%	76.55%	NC	—
GCHP	87.56%	82.58%	87.20%	—	▲
Health Net	86.94%	78.82%	79.83%	▼	—
HPSJ	84.29%	82.58%	84.50%	—	—
HPSM	86.92%	83.49%	82.76%	—	—

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
IEHP	87.50%	88.70%	86.50%	—	—
KHS	86.94%	82.69%	83.37%	—	—
L.A. Care	86.38%	84.50%	82.38%	—	—
Molina	84.25%	83.15%	80.94%	—	—
Partnership	86.04%	83.87%	80.31%	▼	—
SFHP	84.75%	82.87%	81.33%	—	—
SCFHP	88.40%	81.78%	83.38%	▼	—

Summary of Results—*Rating of Health Plan*

Adult

» The following two MCPs scored statistically significantly above the NCQA adult Medicaid national 50th percentile:

- IEHP
- Kaiser

» FFS did not score statistically significantly above or below the NCQA adult Medicaid national 50th percentile.

» PSP Statewide scored statistically significantly above the NCQA adult Medicaid national 50th percentile.

» The following four MCPs scored statistically significantly below the NCQA adult Medicaid national 50th percentile:

- Anthem Blue Cross
- Blue Shield Promise
- CenCal
- Partnership

» CalViva scored statistically significantly higher in 2024 than in 2023.

» CenCal scored statistically significantly lower in 2024 than in 2023.

» FFS did not score statistically significantly higher or lower in 2024 than in 2023.

» No MCPs scored statistically significantly higher in 2024 than in 2021.

» Blue Shield Promise scored statistically significantly lower in 2024 than in 2021.

Child

» Kaiser scored statistically significantly above the NCQA child Medicaid national 50th percentile.

» The following nine MCPs scored statistically significantly below the NCQA child Medicaid national 50th percentile:

- Anthem Blue Cross
- Blue Shield Promise
- CalOptima
- Health Net
- HPSM
- L.A. Care
- Molina
- Partnership
- SFHP

» FFS scored statistically significantly below the NCQA child Medicaid national 50th percentile.

» GCHP scored statistically significantly higher in 2024 than in 2023.

» No MCPs scored statistically significantly lower in 2024 than in 2023.

» FFS did not score statistically significantly higher or lower in 2024 than in 2023.

» No MCPs scored statistically significantly higher in 2024 than in 2021.

» The following four MCPs scored statistically significantly lower in 2024 than in 2021:

- CalOptima
- Health Net
- Partnership
- SCFHP

Rating of All Health Care

Measure Definition

Adult members and parents/caretakers of child members were asked to rate all their/their child's health care on a scale of 0 to 10, with 0 being the "worst health care possible" and 10 being the "best health care possible."

Adult Results

Figure 8 shows the adult top-box scores for *Rating of All Health Care.*

Figure 8—*Rating of All Health Care*: Adult Top-Box Scores
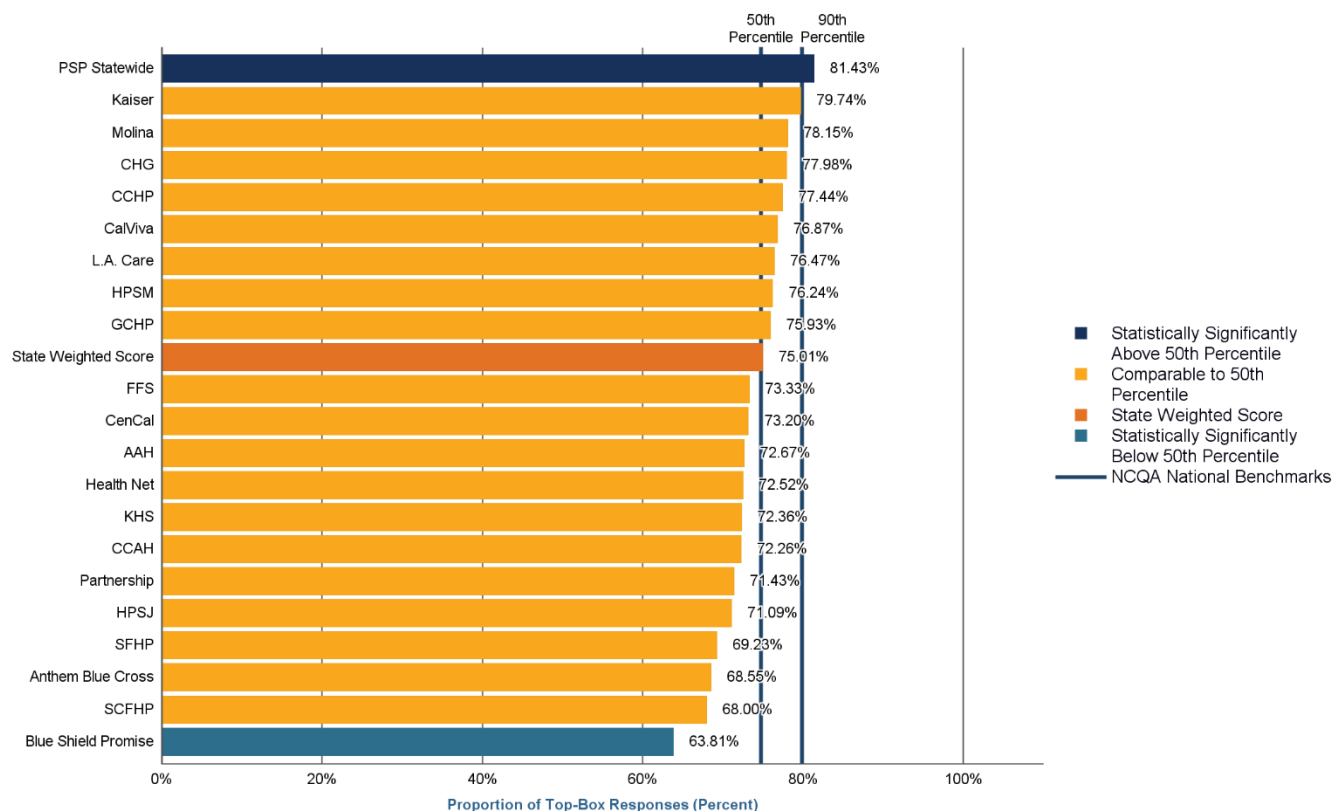
The scores for the following MCPs are not displayed in the figure above since fewer than 100 respondents responded for this measure:

> » CalOptima

> » IEHP

Table 13 shows the 2021, 2023, and 2024 adult top-box scores for *Rating of All Health Care*.

Table 13—*Rating of All Health Care*: Adult Comparative Analysis Results

▲ Indicates the 2024 score is statistically significantly higher than the comparison year's score.

▼ Indicates the 2024 score is statistically significantly lower than the comparison year's score.

— Indicates the 2024 score is not statistically significantly different than the comparison year's score.

S Indicates data are suppressed due to fewer than 100 respondents.

NA Indicates the FFS population was not included in the survey administration; therefore, FFS results are not available.

NC Indicates the score is not comparable due to the FFS population not being included in the survey administration or comparative data are suppressed.

Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
AAH	72.82%	78.70%	72.67%	—	—
Anthem Blue Cross	69.81%	69.43%	68.55%	—	—
Blue Shield Promise	74.86%	72.99%	63.81%	—	—
CalOptima	80.00%	73.75%	S	NC	NC
CalViva	72.15%	72.16%	76.87%	—	—
CenCal	75.14%	76.13%	73.20%	—	—
CCAH	73.74%	75.93%	72.26%	—	—
CHG	81.78%	73.95%	77.98%	—	—
CCHP	79.17%	80.98%	77.44%	—	—
FFS	NA	S	73.33%	NC	NC
GCHP	72.28%	76.42%	75.93%	—	—
Health Net	67.31%	71.61%	72.52%	—	—

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
HPSJ	73.14%	67.66%	71.09%	—	—
HPSM	77.68%	77.73%	76.24%	—	—
IEHP	73.89%	73.75%	S	NC	NC
KHS	73.99%	73.22%	72.36%	—	—
L.A. Care	70.55%	70.78%	76.47%	—	—
Molina	72.37%	73.62%	78.15%	—	—
Partnership	74.74%	68.97%	71.43%	—	—
SFHP	78.76%	76.19%	69.23%	—	—
SCFHP	79.80%	74.22%	68.00%	▼	—

Child Results

Figure 9 shows the child top-box scores for *Rating of All Health Care.*

Figure 9—*Rating of All Health Care*: Child Top-Box Scores
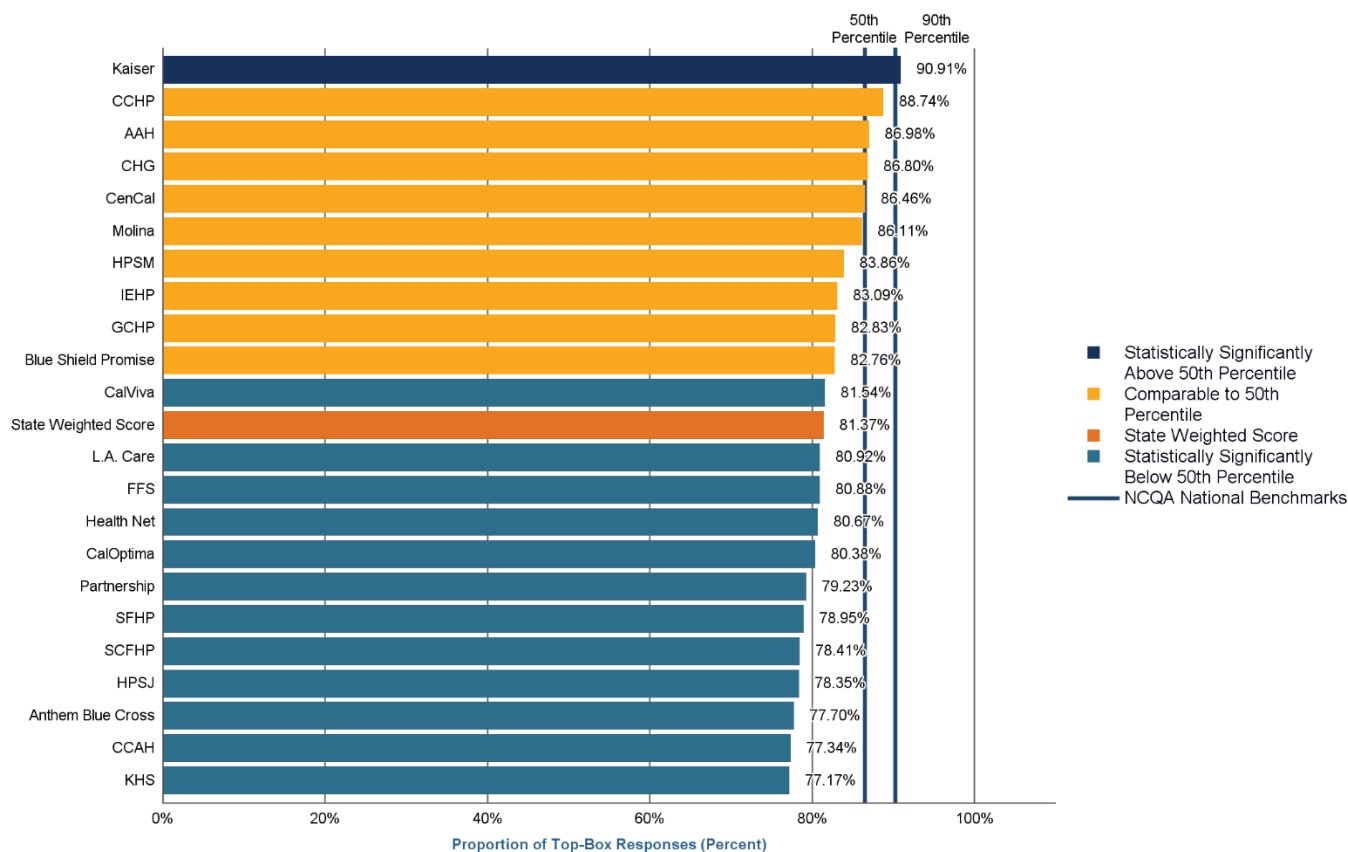
Table 14 shows the 2021, 2023, and 2024 child top-box scores for *Rating of All Health Care*.

Table 14—*Rating of All Health Care*: Child Comparative Analysis Results

▲   Indicates the 2024 score is statistically significantly higher than the comparison year's score.

▼   Indicates the 2024 score is statistically significantly lower than the comparison year's score.

—   Indicates the 2024 score is not statistically significantly different than the comparison year's score.

S   Indicates data are suppressed due to fewer than 100 respondents.

NA   Indicates the FFS population was not included in the survey administration; therefore, FFS results are not available.

NC   Indicates the score is not comparable due to the FFS population not being included in the survey administration or comparative data are suppressed.

Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
AAH	88.40%	81.66%	86.98%	—	—
Anthem Blue Cross	88.43%	78.86%	77.70%	▼	—
Blue Shield Promise	85.37%	83.99%	82.76%	—	—
CalOptima	89.35%	83.95%	80.38%	▼	—
CalViva	83.71%	77.30%	81.54%	—	—
CenCal	88.14%	81.31%	86.46%	—	—
CCAH	90.26%	79.37%	77.34%	▼	—
CHG	90.68%	85.39%	86.80%	—	—
CCHP	88.30%	81.49%	88.74%	—	▲
FFS	NA	S	80.88%	NC	NC
GCHP	89.36%	80.97%	82.83%	▼	—
Health Net	89.13%	76.49%	80.67%	▼	—

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
HPSJ	81.29%	79.49%	78.35%	—	—
HPSM	90.14%	84.13%	83.86%	▼	—
IEHP	89.04%	85.99%	83.09%	—	—
KHS	88.00%	79.72%	77.17%	▼	—
L.A. Care	88.89%	81.60%	80.92%	▼	—
Molina	86.05%	78.96%	86.11%	—	▲
Partnership	87.17%	82.32%	79.23%	▼	—
SFHP	85.42%	84.78%	78.95%	—	—
SCFHP	91.11%	77.95%	78.41%	▼	—

Summary of Results—*Rating of All Health Care*

Adult

Of the reportable Medi-Cal populations:

» PSP Statewide scored statistically significantly above the NCQA adult Medicaid national 50th percentile.

» No MCPs scored statistically significantly above the NCQA adult Medicaid national 50th percentile.

» FFS did not score statistically significantly above or below the NCQA adult Medicaid national 50th percentile.

» Blue Shield Promise scored statistically significantly below the NCQA adult Medicaid national 50th percentile.

» No MCPs scored statistically significantly higher or lower in 2024 than in 2023.

» No MCPs scored statistically significantly higher in 2024 than in 2021.

» SCFHP scored statistically significantly lower in 2024 than in 2021.

Child

Of the reportable Medi-Cal populations:

» Kaiser scored statistically significantly above the NCQA child Medicaid national 50th percentile.

» The following 11 MCPs scored statistically significantly below the NCQA child Medicaid national 50th percentile:

- Anthem Blue Cross
- CalOptima
- CalViva
- CCAH
- Health Net
- HPSJ
- KHS
- L.A. Care
- Partnership
- SFHP
- SCFHP

» FFS scored statistically significantly below the NCQA child Medicaid national 50th percentile.

» The following two MCPs scored statistically significantly higher in 2024 than in 2023:

- CCHP
- Molina

» No MCPs scored statistically significantly lower in 2024 than in 2023.

» No MCPs scored statistically significantly higher in 2024 than in 2021.

» The following 10 MCPs scored statistically significantly lower in 2024 than in 2021:

- Anthem Blue Cross
- CalOptima
- CCAH
- GCHP
- Health Net
- HPSM
- KHS
- L.A. Care
- Partnership
- SCFHP

Rating of Personal Doctor

Measure Definition

Adult members and parents/caretakers of child members were asked to rate their/their child's personal doctor on a scale of 0 to 10, with 0 being the "worst personal doctor possible" and 10 being the "best personal doctor possible."

Adult Results

Figure 10 shows the adult top-box scores for *Rating of Personal Doctor*.

Figure 10—*Rating of Personal Doctor*: Adult Top-Box Scores

Table 15 shows the 2021, 2023, and 2024 adult top-box scores for *Rating of Personal Doctor*.

Table 15—*Rating of Personal Doctor*: Adult Comparative Analysis Results

▲ Indicates the 2024 score is statistically significantly higher than the comparison year's score.

▼ Indicates the 2024 score is statistically significantly lower than the comparison year's score.

— Indicates the 2024 score is not statistically significantly different than the comparison year's score.

S Indicates data are suppressed due to fewer than 100 respondents.

NA Indicates the FFS population was not included in the survey administration; therefore, FFS results are not available.

NC Indicates the score is not comparable due to the FFS population not being included in the survey administration or comparative data are suppressed.

Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
AAH	83.97%	82.08%	80.37%	—	—
Anthem Blue Cross	77.55%	82.43%	80.93%	—	—
Blue Shield Promise	84.66%	82.92%	76.99%	—	—
CalOptima	83.27%	80.59%	83.72%	—	—
CalViva	77.78%	80.08%	81.38%	—	—
CenCal	77.68%	83.77%	78.09%	—	—
CCAH	83.33%	82.68%	80.37%	—	—
CHG	85.90%	84.21%	81.15%	—	—
CCHP	86.31%	85.15%	83.13%	—	—
FFS	NA	S	83.78%	NC	NC
GCHP	80.09%	84.08%	86.26%	—	—
Health Net	74.11%	81.40%	75.00%	—	—

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
HPSJ	76.84%	78.84%	76.06%	—	—
HPSM	82.64%	80.22%	78.07%	—	—
IEHP	74.49%	78.36%	74.55%	—	—
KHS	79.33%	81.89%	80.99%	—	—
L.A. Care	75.94%	78.34%	85.44%	▲	—
Molina	77.65%	78.41%	82.24%	—	—
Partnership	83.70%	79.24%	81.73%	—	—
SFHP	85.27%	83.00%	77.93%	—	—
SCFHP	83.14%	76.90%	69.23%	▼	—

Child Results

Figure 11 shows the child top-box scores for *Rating of Personal Doctor*.

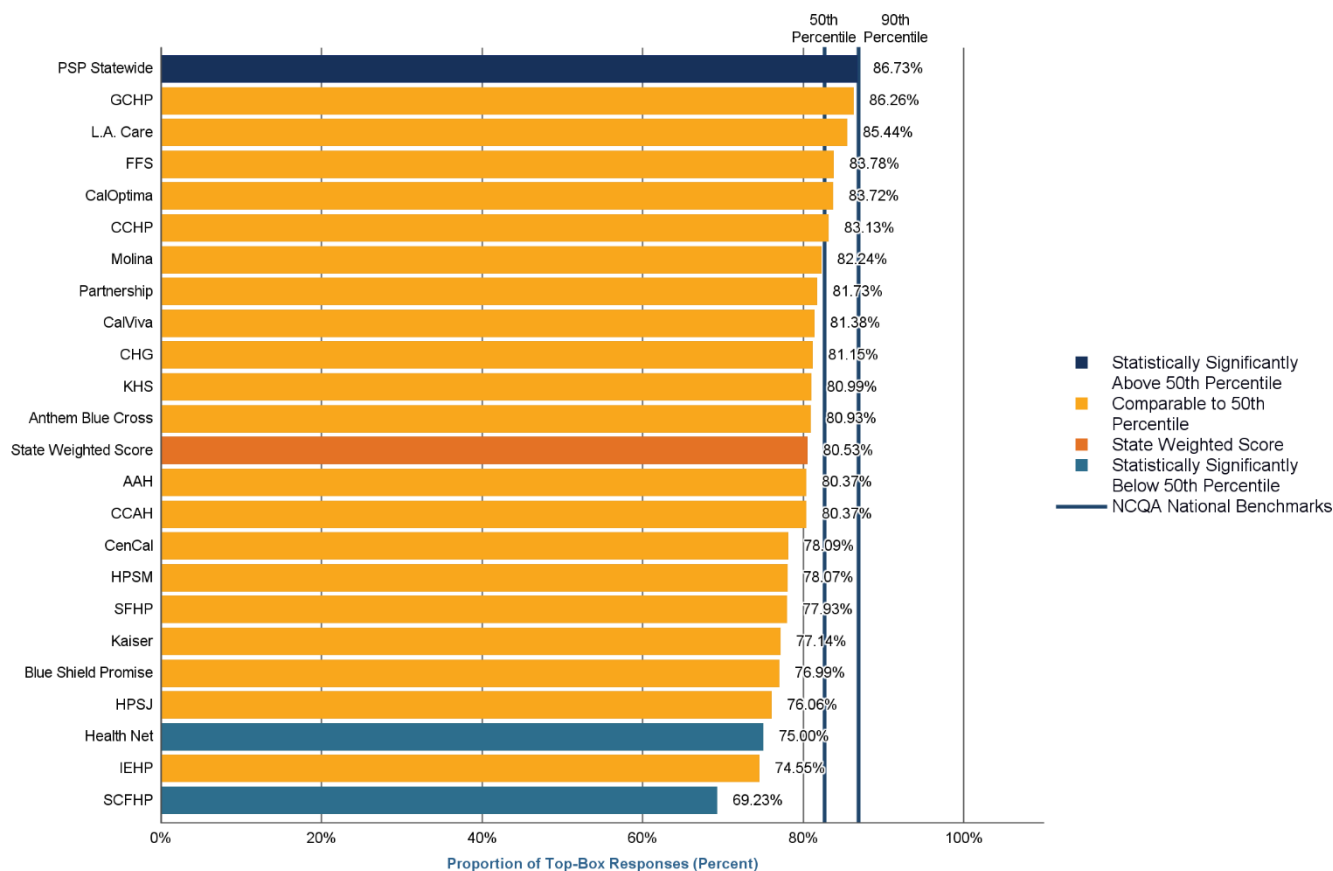## Figure 11—*Rating of Personal Doctor*: Child Top-Box Scores
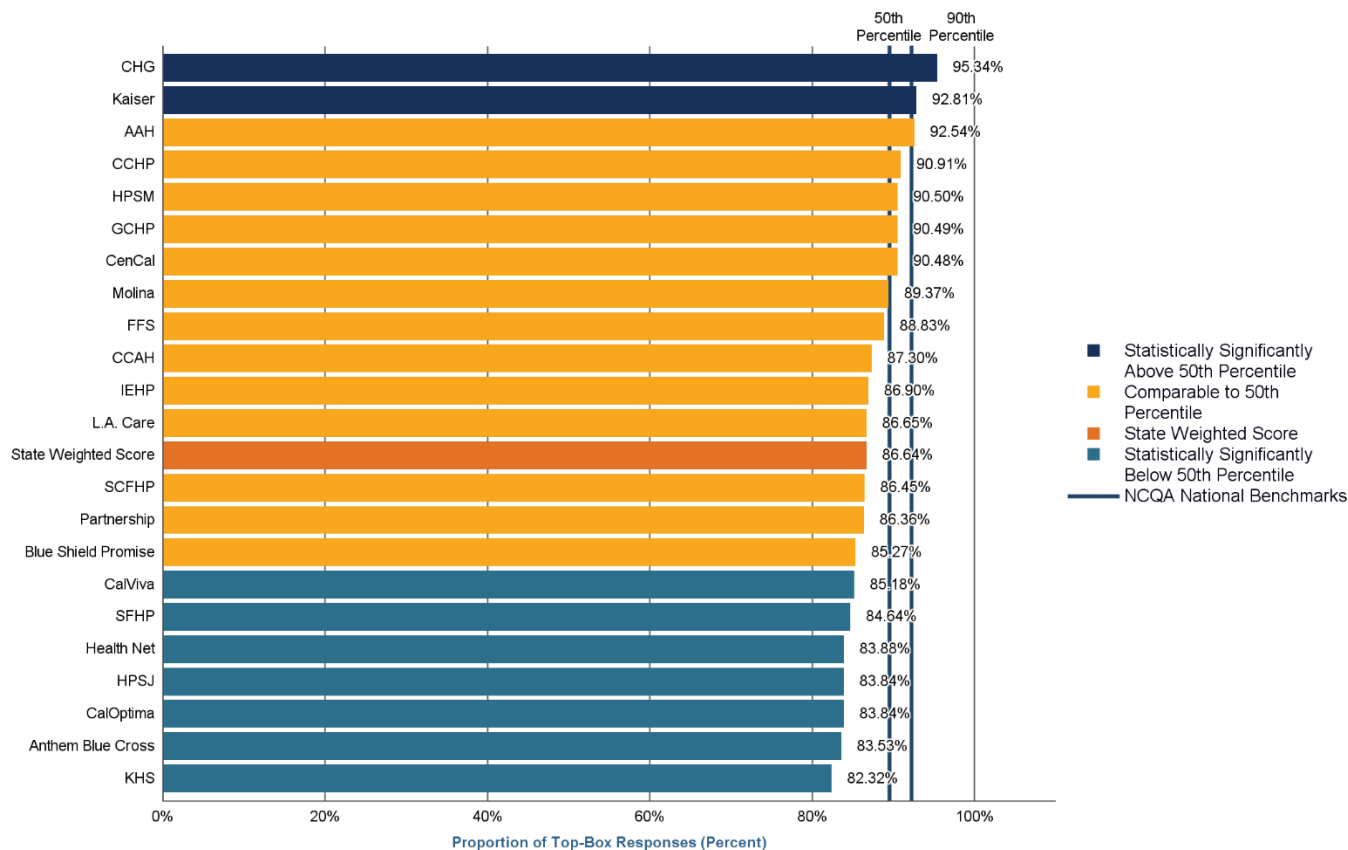
Table 16 shows the 2021, 2023, and 2024 child top-box scores for *Rating of Personal Doctor*.

Table 16—*Rating of Personal Doctor*: Child Comparative Analysis Results

▲   Indicates the 2024 score is statistically significantly higher than the comparison year's score.

▼   Indicates the 2024 score is statistically significantly lower than the comparison year's score.

—   Indicates the 2024 score is not statistically significantly different than the comparison year's score.

S   Indicates data are suppressed due to fewer than 100 respondents.

NA   Indicates the FFS population was not included in the survey administration; therefore, FFS results are not available.

NC   Indicates the score is not comparable due to the FFS population not being included in the survey administration or comparative data are suppressed.

Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
AAH	91.73%	87.36%	92.54%	—	▲
Anthem Blue Cross	86.10%	84.42%	83.53%	—	—
Blue Shield Promise	90.23%	92.29%	85.27%	—	▼
CalOptima	89.89%	88.79%	83.84%	▼	—
CalViva	90.91%	82.67%	85.18%	▼	—
CenCal	92.42%	85.21%	90.48%	—	▲
CCAH	90.91%	89.00%	87.30%	—	—
CHG	90.95%	90.42%	95.34%	—	▲
CCHP	91.38%	87.15%	90.91%	—	—
FFS	NA	S	88.83%	NC	NC
GCHP	91.87%	89.44%	90.49%	—	—
Health Net	90.00%	83.08%	83.88%	▼	—

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
HPSJ	86.28%	84.09%	83.84%	—	—
HPSM	91.80%	87.06%	90.50%	—	—
IEHP	86.15%	84.88%	86.90%	—	—
KHS	84.98%	84.24%	82.32%	—	—
L.A. Care	87.56%	86.00%	86.65%	—	—
Molina	92.86%	88.83%	89.37%	—	—
Partnership	88.06%	89.41%	86.36%	—	—
SFHP	88.86%	86.98%	84.64%	—	—
SCFHP	91.10%	84.68%	86.45%	—	—

Summary of Results—*Rating of Personal Doctor*

Adult

Of the reportable Medi-Cal populations:

» PSP Statewide scored statistically significantly above the NCQA adult Medicaid national 50th percentile.

» No MCPs scored statistically significantly above the NCQA adult Medicaid national 50th percentile.

» FFS did not score statistically significantly above or below the NCQA adult Medicaid national 50th percentile.

» The following two MCPs scored statistically significantly below the NCQA adult Medicaid national 50th percentile:
  • Health Net
  • SCFHP

» No MCPs scored statistically significantly higher or lower in 2024 than in 2023.

» L.A. Care scored statistically significantly higher in 2024 than in 2021.

» SCFHP scored statistically significantly lower in 2024 than in 2021.

Child

Of the reportable Medi-Cal populations:

» The following two MCPs scored statistically significantly above the NCQA child Medicaid national 50th percentile:

- CHG
- Kaiser

» The following seven MCPs scored statistically significantly below the NCQA child Medicaid national 50th percentile:

- Anthem Blue Cross
- HPSJ
- CalOptima
- KHS
- CalViva
- SFHP
- Health Net

» FFS did not score statistically significantly above or below the NCQA child Medicaid national 50th percentile.

» The following three MCPs scored statistically significantly higher in 2024 than in 2023:

- AAH
- CenCal
- CHG

» Blue Shield Promise scored statistically significantly lower in 2024 than in 2023.

» No MCPs scored statistically significantly higher in 2024 than in 2021.

» The following three MCPs scored statistically significantly lower in 2024 than in 2021:

- CalOptima
- CalViva
- Health Net

Rating of Specialist Seen Most Often

Measure Definition

Adult members and parents/caretakers of child members were asked to rate the specialist they/their child talked to most often on a scale of 0 to 10, with 0 being the "worst specialist possible" and 10 being the "best specialist possible."

Adult Results

Figure 12 shows the adult top-box scores for *Rating of Specialist Seen Most Often.*

Figure 12—*Rating of Specialist Seen Most Often*: Adult Top-Box Scores
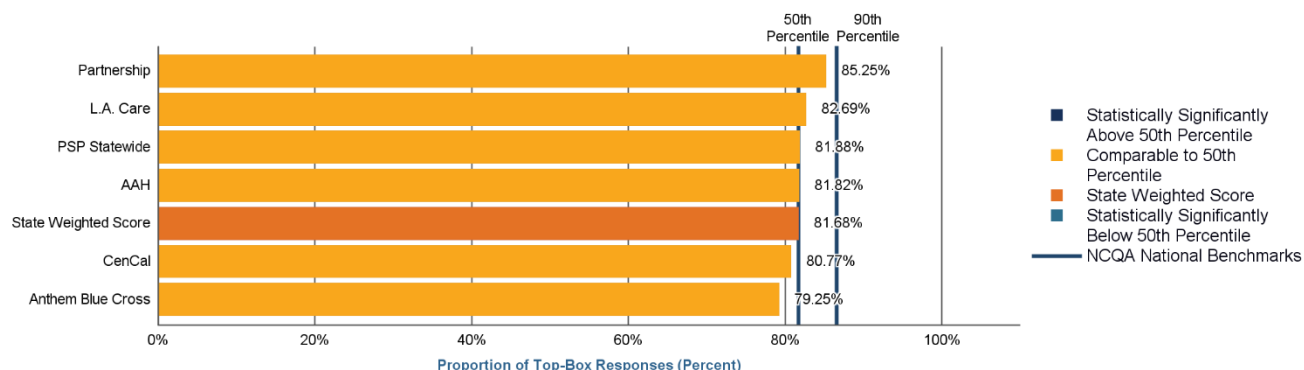
The scores for the following MCPs and FFS are not displayed in the figure above since fewer than 100 respondents responded for this measure:

- » Blue Shield Promise
- » CalOptima
- » CalViva
- » CCAH
- » CHG
- » CCHP
- » FFS
- » GCHP
- » Health Net
- » HPSJ
- » HPSM
- » IEHP
- » Kaiser
- » KHS
- » Molina
- » SFHP
- » SCFHP

Table 17 shows the 2021, 2023, and 2024 adult top-box scores for *Rating of Specialist Seen Most Often*.

Table 17—*Rating of Specialist Seen Most Often*: Adult Comparative Analysis Results

▲ Indicates the 2024 score is statistically significantly higher than the comparison year's score.

▼ Indicates the 2024 score is statistically significantly lower than the comparison year's score.

— Indicates the 2024 score is not statistically significantly different than the comparison year's score.

S Indicates data are suppressed due to fewer than 100 respondents.

NA Indicates the FFS population was not included in the survey administration; therefore, FFS results are not available.

NC Indicates the score is not comparable due to the FFS population not being included in the survey administration or comparative data are suppressed.

Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
AAH	81.15%	S	81.82%	—	NC
Anthem Blue Cross	S	81.19%	79.25%	NC	—
Blue Shield Promise	83.87%	84.81%	S	NC	NC
CalOptima	84.75%	81.18%	S	NC	NC
CalViva	S	83.46%	S	NC	NC
CenCal	78.23%	87.26%	80.77%	—	—
CCAH	78.81%	87.66%	S	NC	NC
CHG	86.71%	82.08%	S	NC	NC
CCHP	83.18%	79.09%	S	NC	NC
FFS	NA	S	S	NC	NC
GCHP	70.83%	83.33%	S	NC	NC
Health Net	S	77.63%	S	NC	NC

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
HPSJ	S	79.67%	S	NC	NC
HPSM	90.00%	90.15%	S	NC	NC
IEHP	86.07%	87.79%	S	NC	NC
KHS	79.28%	72.19%	S	NC	NC
L.A. Care	S	82.78%	82.69%	NC	—
Molina	S	81.58%	S	NC	NC
Partnership	78.95%	78.26%	85.25%	—	—
SFHP	84.00%	79.49%	S	NC	NC
SCFHP	83.47%	81.17%	S	NC	NC

Child Results

Figure 13 shows the child top-box scores for *Rating of Specialist Seen Most Often*.

Figure 13—*Rating of Specialist Seen Most Often*: Child Top-Box Scores
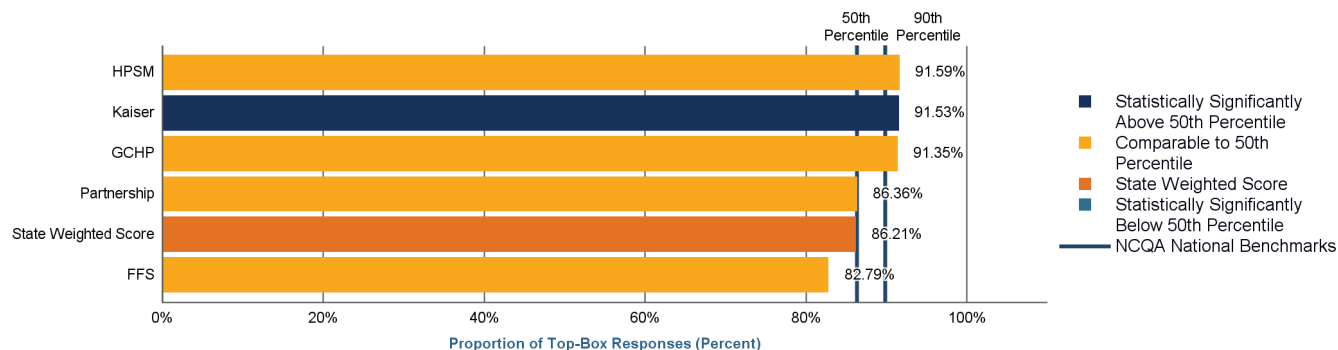
Scores for the following MCPs are not displayed in the figure above since fewer than 100 respondents responded for this measure:

»	AAH	»	Health Net
»	Anthem Blue Cross	»	HPSJ
»	Blue Shield Promise	»	IEHP
»	CalOptima	»	KHS
»	CalViva	»	L.A. Care
»	CenCal	»	Molina
»	CCAH	»	SFHP
»	CHG	»	SCFHP
»	CCHP		

Table 18 shows the 2021, 2023, and 2024 child top-box scores for *Rating of Specialist Seen Most Often*.

Table 18—*Rating of Specialist Seen Most Often*: Child Comparative Analysis Results

▲   Indicates the 2024 score is statistically significantly higher than the comparison year's score.

▼   Indicates the 2024 score is statistically significantly lower than the comparison year's score.

—   Indicates the 2024 score is not statistically significantly different than the comparison year's score.

S   Indicates data are suppressed due to fewer than 100 respondents.

NA   Indicates the FFS population was not included in the survey administration; therefore, FFS results are not available.

NC   Indicates the score is not comparable due to the FFS population not being included in the survey administration or comparative data are suppressed.

Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
AAH	S	83.02%	S	NC	NC
Anthem Blue Cross	S	S	S	NC	NC
Blue Shield Promise	S	85.00%	S	NC	NC
CalOptima	S	S	S	NC	NC
CalViva	S	77.78%	S	NC	NC
CenCal	S	S	S	NC	NC
CCAH	S	84.89%	S	NC	NC
CHG	S	85.38%	S	NC	NC
CCHP	S	S	S	NC	NC
FFS	NA	S	82.79%	NC	NC
GCHP	S	S	91.35%	NC	NC
Health Net	S	S	S	NC	NC

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
HPSJ	S	92.06%	S	NC	NC
HPSM	S	S	91.59%	NC	NC
IEHP	S	83.58%	S	NC	NC
KHS	S	85.06%	S	NC	NC
L.A. Care	S	79.41%	S	NC	NC
Molina	S	84.82%	S	NC	NC
Partnership	S	88.99%	86.36%	NC	—
SFHP	S	S	S	NC	NC
SCFHP	S	80.62%	S	NC	NC

Summary of Results—*Rating of Specialist Seen Most Often*

Adult

Of the reportable Medi-Cal populations:

» No MCPs scored statistically significantly above or below the NCQA adult Medicaid national 50th percentile.

» PSP Statewide did not score statistically significantly above or below the NCQA adult Medicaid national 50th percentile.

» No MCPs scored statistically significantly higher or lower in 2024 than in 2023 or 2021.

Child

Of the reportable Medi-Cal populations:

» Kaiser scored statistically significantly above the NCQA child Medicaid national 50th percentile.

» No MCPs scored statistically significantly below the NCQA child Medicaid national 50th percentile.

» FFS did not score statistically significantly above or below the NCQA child Medicaid national 50th percentile.

» Partnership did not score statistically significantly higher or lower in 2024 than in 2023.

» All MCPs had fewer than 100 respondents in 2021; therefore, the 2024 scores are not comparable to the 2021 scores.

Composite Measures

Getting Needed Care

Measure Definition

This measure assesses how often it was easy for members to get needed care including:

- » Getting the care, tests, or treatment needed
- » Getting an appointment with a specialist

Adult Results

Figure 14 shows the adult top-box scores for *Getting Needed Care*.

Figure 14—*Getting Needed Care*: Adult Top-Box Scores
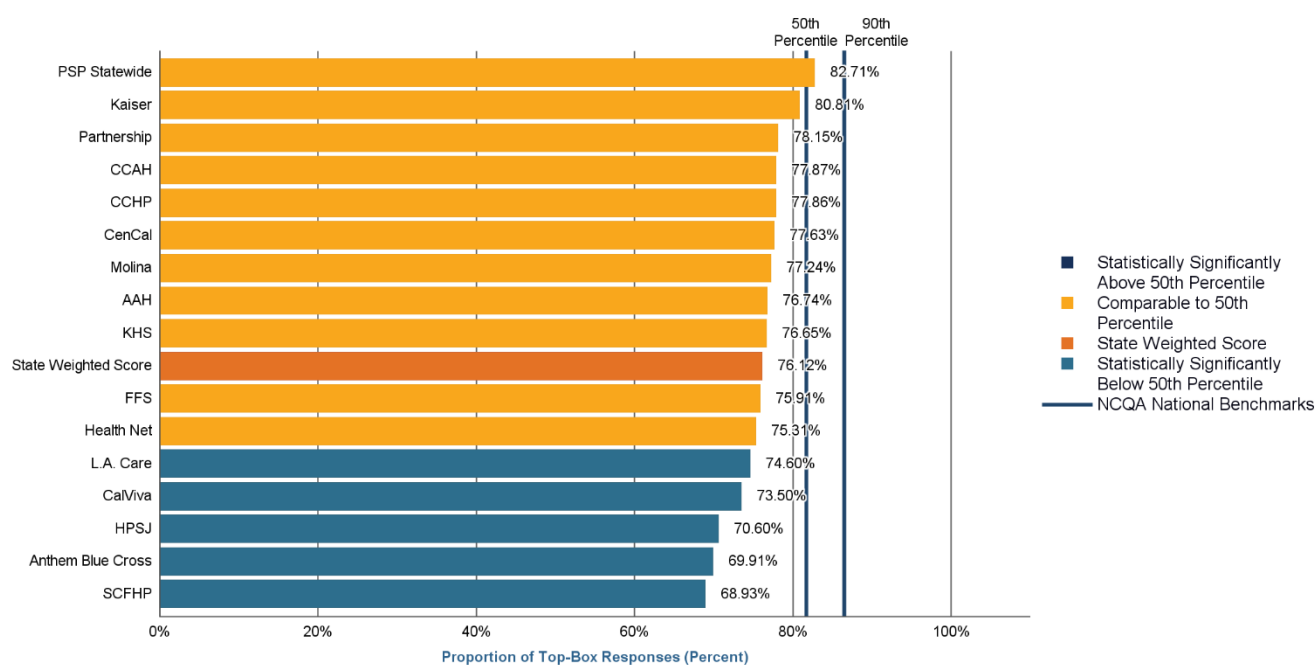
The scores for the following MCPs are not displayed in the figure above since fewer than 100 respondents responded for this measure:

- » Blue Shield Promise
- » GCHP
- » IEHP
- » CalOptima
- » HPSM
- » SFHP
- » CHG

Table 19 shows the 2021, 2023, and 2024 adult top-box scores for *Getting Needed Care.*

Table 19—*Getting Needed Care*: Adult Comparative Analysis Results

▲ Indicates the 2024 score is statistically significantly higher than the comparison year's score.

▼ Indicates the 2024 score is statistically significantly lower than the comparison year's score.

— Indicates the 2024 score is not statistically significantly different than the comparison year's score.

S Indicates data are suppressed due to fewer than 100 respondents.

NA Indicates the FFS population was not included in the survey administration; therefore, FFS results are not available.

NC Indicates the score is not comparable due to the FFS population not being included in the survey administration or comparative data are suppressed.

Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
AAH	78.83%	78.24%	76.74%	—	—
Anthem Blue Cross	74.85%	70.93%	69.91%	—	—
Blue Shield Promise	77.71%	78.01%	S	NC	NC
CalOptima	80.37%	74.40%	S	NC	NC
CalViva	79.90%	76.50%	73.50%	—	—
CenCal	83.12%	78.42%	77.63%	—	—
CCAH	77.93%	79.40%	77.87%	—	—
CHG	86.07%	77.76%	S	NC	NC
CCHP	81.19%	76.80%	77.86%	—	—
FFS	NA	S	75.91%	NC	NC
GCHP	74.68%	78.00%	S	NC	NC
Health Net	77.08%	73.33%	75.31%	—	—
HPSJ	77.89%	73.16%	70.60%	—	—

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
HPSM	80.45%	78.35%	S	NC	NC
IEHP	82.85%	79.58%	S	NC	NC
KHS	80.58%	82.55%	76.65%	—	—
L.A. Care	80.81%	73.25%	74.60%	—	—
Molina	76.50%	74.20%	77.24%	—	—
Partnership	82.50%	71.39%	78.15%	—	—
SFHP	81.97%	68.62%	S	NC	NC
SCFHP	77.13%	75.41%	68.93%	—	—

Child Results

Figure 15 shows the child top-box scores for *Getting Needed Care.*

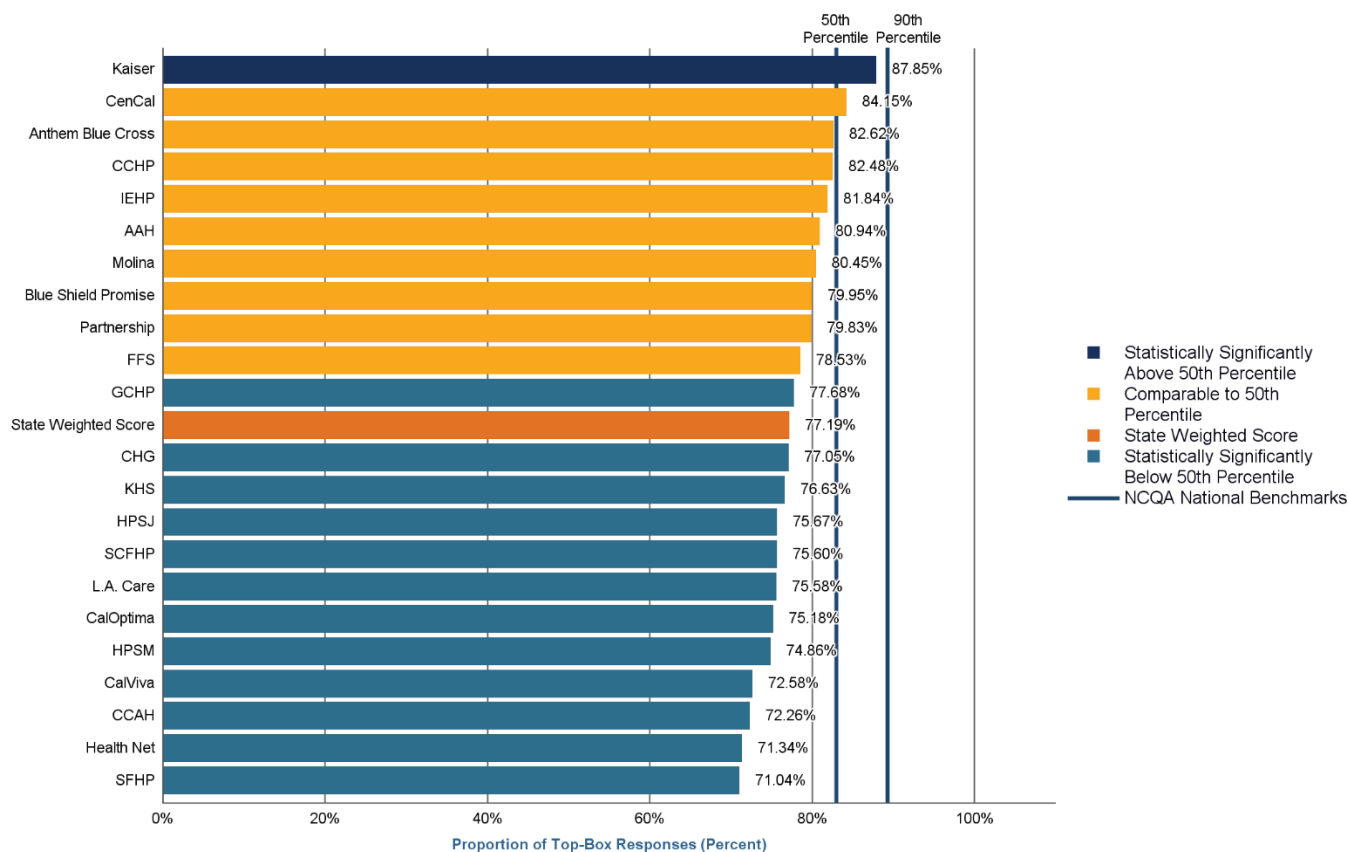## Figure 15—*Getting Needed Care*: Child Top-Box Scores

Table 20 shows the 2021, 2023, and 2024 child top-box scores for *Getting Needed Care*.

Table 20—*Getting Needed Care*: Child Comparative Analysis Results

▲ Indicates the 2024 score is statistically significantly higher than the comparison year's score.

▼ Indicates the 2024 score is statistically significantly lower than the comparison year's score.

— Indicates the 2024 score is not statistically significantly different than the comparison year's score.

S Indicates data are suppressed due to fewer than 100 respondents.

NA Indicates the FFS population was not included in the survey administration; therefore, FFS results are not available.

NC Indicates the score is not comparable due to the FFS population not being included in the survey administration or comparative data are suppressed.

Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
AAH	81.46%	71.44%	80.94%	—	▲
Anthem Blue Cross	S	74.49%	82.62%	NC	▲
Blue Shield Promise	80.70%	80.83%	79.95%	—	—
CalOptima	78.81%	77.80%	75.18%	—	—
CalViva	85.85%	75.16%	72.58%	▼	—
CenCal	84.60%	80.08%	84.15%	—	—
CCAH	83.93%	79.61%	72.26%	▼	—
CHG	82.75%	77.33%	77.05%	—	—
CCHP	81.64%	81.10%	82.48%	—	—
FFS	NA	S	78.53%	NC	NC
GCHP	80.55%	72.70%	77.68%	—	—
Health Net	S	72.20%	71.34%	NC	—
HPSJ	S	75.49%	75.67%	NC	—

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
HPSM	82.66%	84.04%	74.86%	▼	▼
IEHP	82.63%	81.55%	81.84%	—	—
KHS	S	79.93%	76.63%	NC	—
L.A. Care	S	75.26%	75.58%	NC	—
Molina	S	74.10%	80.45%	NC	—
Partnership	78.54%	77.54%	79.83%	—	—
SFHP	78.73%	73.44%	71.04%	—	—
SCFHP	84.62%	73.20%	75.60%	▼	—

Summary of Results—*Getting Needed Care*

Adult

Of the reportable Medi-Cal populations:

» No MCPs scored statistically significantly above the NCQA adult Medicaid national 50th percentile.

» The following five MCPs scored statistically significantly below the NCQA adult Medicaid national 50th percentile:

- Anthem Blue Cross
- CalViva
- HPSJ
- L.A. Care
- SCFHP

» FFS did not score statistically significantly above or below the NCQA adult Medicaid national 50th percentile.

» PSP Statewide did not score statistically significantly above or below the NCQA adult Medicaid national 50th percentile.

» No MCPs scored statistically significantly higher or lower in 2024 than in 2023 or 2021.

Child

Of the reportable Medi-Cal populations:

» Kaiser scored statistically significantly above the NCQA child Medicaid national 50th percentile.

» The following 12 MCPs scored statistically significantly below the NCQA child Medicaid national 50th percentile:

- CalOptima
- CalViva
- CCAH
- CHG
- GCHP
- Health Net

- HPSJ
- HPSM
- KHS
- L.A. Care
- SFHP
- SCFHP

» FFS did not score statistically significantly above or below the NCQA child Medicaid national 50th percentile.

» The following two MCPs scored statistically significantly higher in 2024 than in 2023:

- AAH
- Anthem Blue Cross

» HPSM scored statistically significantly lower in 2024 than in 2023.

» No MCPs scored statistically significantly higher in 2024 than in 2021.

» The following four MCPs scored statistically significantly lower in 2024 than in 2021:

- CalViva
- CCAH
- HPSM
- SCFHP

Getting Care Quickly

Measure Definition

This measure assesses how often it was easy for members to get care quickly including:

» Getting the care needed when care was needed right away

» Getting an appointment at a doctor's office or clinic for a check-up or routine care as soon as needed

Adult Results

Figure 16 shows the adult top-box scores for *Getting Care Quickly*.

Figure 16—*Getting Care Quickly*: Adult Top-Box Scores
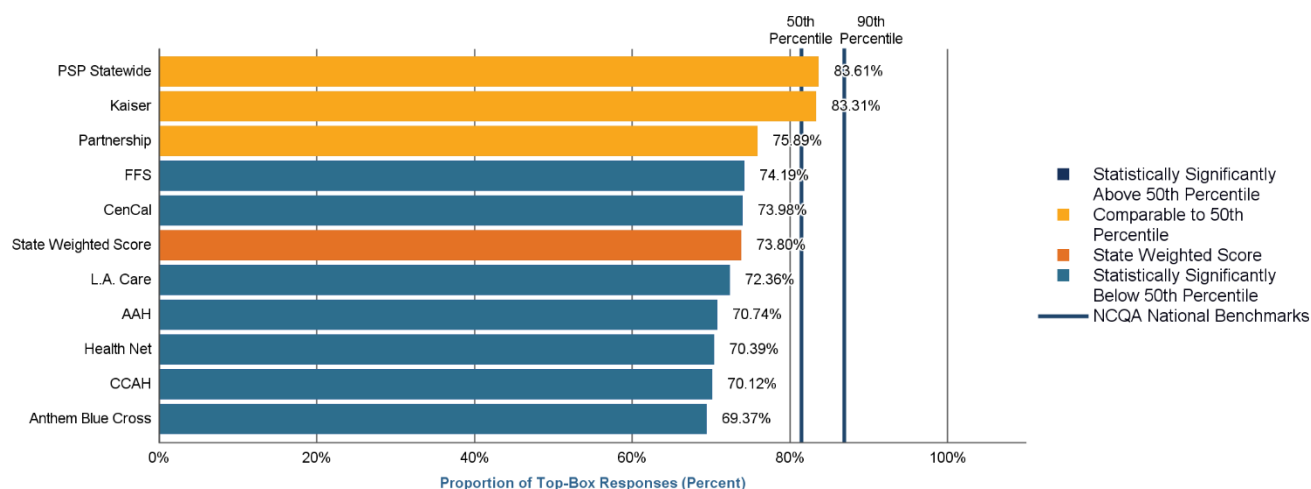
The scores for the following MCPs are not displayed in the figure above since fewer than 100 respondents responded for this measure:

» Blue Shield Promise

» CalOptima

» CalViva

» CHG

» CCHP

» GCHP

» HPSJ

» HPSM

» IEHP

» KHS

» Molina

» SFHP

» SCFHP

Table 21 shows the 2021, 2023, and 2024 adult top-box scores for *Getting Care Quickly*.

Table 21—*Getting Care Quickly*: Adult Comparative Analysis Results

▲ Indicates the 2024 score is statistically significantly higher than the comparison year's score.

▼ Indicates the 2024 score is statistically significantly lower than the comparison year's score.

— Indicates the 2024 score is not statistically significantly different than the comparison year's score.

S Indicates data are suppressed due to fewer than 100 respondents.

NA Indicates the FFS population was not included in the survey administration; therefore, FFS results are not available.

NC Indicates the score is not comparable due to the FFS population not being included in the survey administration or comparative data are suppressed.

Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
AAH	71.77%	66.95%	70.74%	—	—
Anthem Blue Cross	77.12%	65.37%	69.37%	—	—
Blue Shield Promise	77.69%	73.50%	S	NC	NC
CalOptima	76.94%	70.57%	S	NC	NC
CalViva	76.10%	77.88%	S	NC	NC
CenCal	80.87%	80.64%	73.98%	—	—
CCAH	79.73%	78.71%	70.12%	▼	—
CHG	77.17%	73.45%	S	NC	NC
CCHP	77.09%	72.60%	S	NC	NC
FFS	NA	S	74.19%	NC	NC
GCHP	72.08%	73.55%	S	NC	NC
Health Net	66.54%	69.59%	70.39%	—	—
HPSJ	68.01%	72.55%	S	NC	NC

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
HPSM	80.15%	75.76%	S	NC	NC
IEHP	81.42%	77.66%	S	NC	NC
KHS	76.35%	78.62%	S	NC	NC
L.A. Care	71.21%	69.13%	72.36%	—	—
Molina	76.19%	70.07%	S	NC	NC
Partnership	78.40%	73.05%	75.89%	—	—
SFHP	71.18%	66.36%	S	NC	NC
SCFHP	70.57%	70.95%	S	NC	NC

Child Results

Figure 17 shows the child top-box scores for *Getting Care Quickly*.

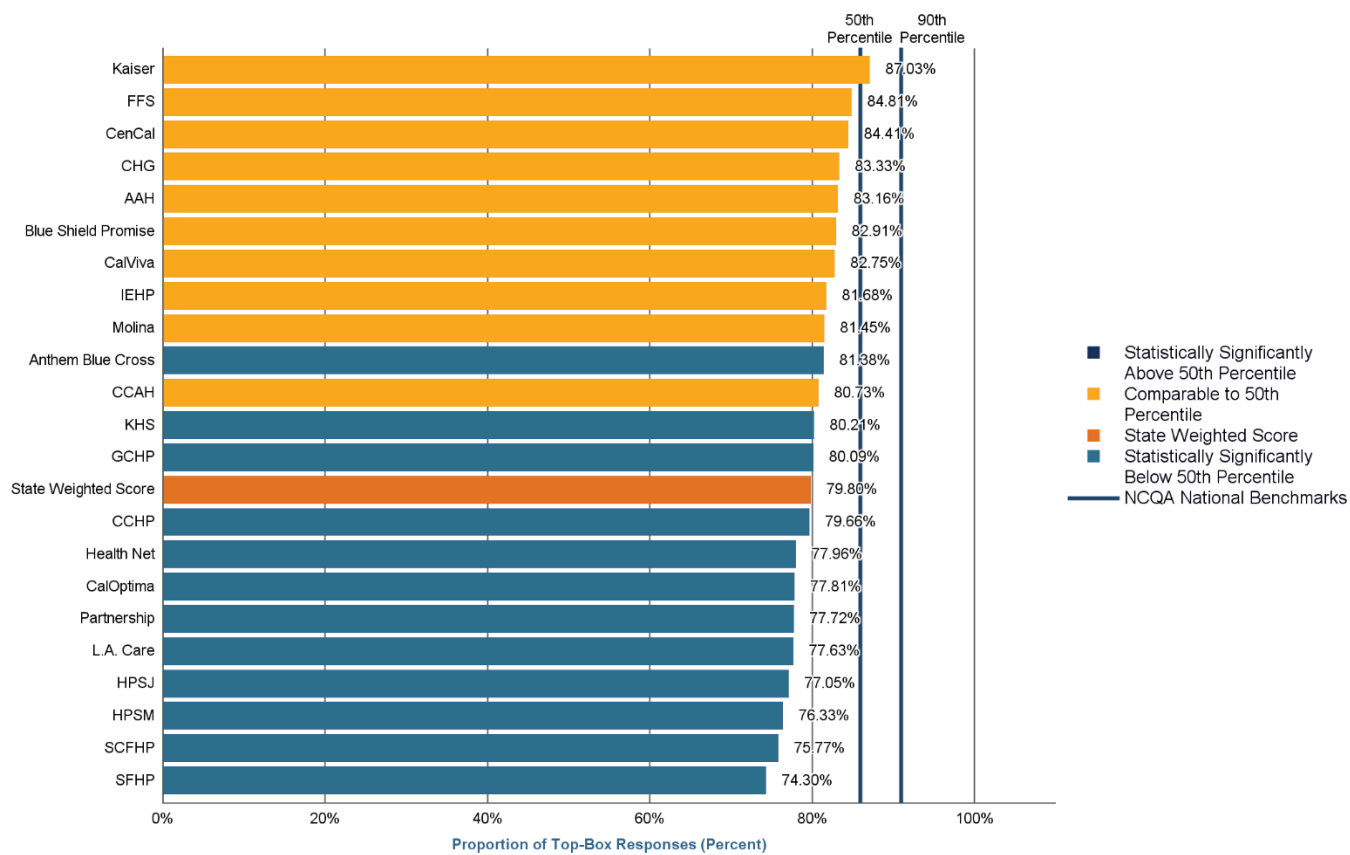## Figure 17—*Getting Care Quickly*: Child Top-Box Scores

Table 22 shows the 2021, 2023, and 2024 child top-box scores for *Getting Care Quickly*.

Table 22—*Getting Care Quickly*: Child Comparative Analysis Results

▲   Indicates the 2024 score is statistically significantly higher than the comparison year's score.

▼   Indicates the 2024 score is statistically significantly lower than the comparison year's score.

—   Indicates the 2024 score is not statistically significantly different than the comparison year's score.

S   Indicates data are suppressed due to fewer than 100 respondents.

NA   Indicates the FFS population was not included in the survey administration; therefore, FFS results are not available.

NC   Indicates the score is not comparable due to the FFS population not being included in the survey administration or comparative data are suppressed.

Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
AAH	81.97%	74.53%	83.16%	—	▲
Anthem Blue Cross	S	81.38%	81.38%	NC	—
Blue Shield Promise	S	79.78%	82.91%	NC	—
CalOptima	79.79%	82.29%	77.81%	—	—
CalViva	85.34%	79.38%	82.75%	—	—
CenCal	85.03%	86.02%	84.41%	—	—
CCAH	87.35%	79.54%	80.73%	—	—
CHG	S	81.96%	83.33%	NC	—
CCHP	79.02%	80.71%	79.66%	—	—
FFS	NA	S	84.81%	NC	NC
GCHP	78.10%	74.83%	80.09%	—	—
Health Net	S	76.11%	77.96%	NC	—
HPSJ	S	71.93%	77.05%	NC	—

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
HPSM	81.14%	81.41%	76.33%	—	—
IEHP	S	82.38%	81.68%	NC	—
KHS	S	84.52%	80.21%	NC	—
L.A. Care	S	78.03%	77.63%	NC	—
Molina	S	76.72%	81.45%	NC	—
Partnership	82.01%	82.68%	77.72%	—	—
SFHP	76.27%	70.02%	74.30%	—	—
SCFHP	79.89%	71.78%	75.77%	—	—

Summary of Results—*Getting Care Quickly*

Adult

Of the reportable Medi-Cal populations:

» No MCPs scored statistically significantly above the NCQA adult Medicaid national 50th percentile.

» The following six MCPs scored statistically significantly below the NCQA adult Medicaid national 50th percentile:

- AAH
- Anthem Blue Cross
- CenCal
- CCAH
- Health Net
- L.A. Care

» FFS scored statistically significantly below the NCQA adult Medicaid national 50th percentile.

» PSP Statewide did not score statistically significantly above or below the NCQA adult Medicaid national 50th percentile.

» No MCPs scored statistically significantly higher or lower in 2024 than in 2023.

» No MCPs scored statistically significantly higher in 2024 than in 2021.

» CCAH scored statistically significantly lower in 2024 than in 2021.

Child

Of the reportable Medi-Cal populations:

» No MCPs scored statistically significantly above the NCQA child Medicaid national 50th percentile.

» The following 12 MCPs scored statistically significantly below the NCQA child Medicaid national 50th percentile:

- Anthem Blue Cross
- CalOptima
- CCHP
- GCHP
- Health Net
- HPSJ

- HPSM
- KHS
- L.A. Care
- Partnership
- SFHP
- SCFHP

» FFS did not score statistically significantly above or below the NCQA child Medicaid national 50th percentile.

» AAH scored statistically significantly higher in 2024 than in 2023.

» No MCPs scored statistically significantly lower in 2024 than in 2023.

» No MCPs scored statistically significantly higher or lower in 2024 than in 2021.

How Well Doctors Communicate

Measure Definition

This measure assesses how often members' doctors communicated well including:

- » Explained things in a way that was easy to understand
- » Listened carefully to adult member or parent/caretaker of child member
- » Showed respect for what adult member or parent/caretaker of child member had to say
- » Spent enough time with member

Adult Results

Figure 18 shows the adult top-box scores for *How Well Doctors Communicate.*

Figure 18—*How Well Doctors Communicate*: Adult Top-Box Scores
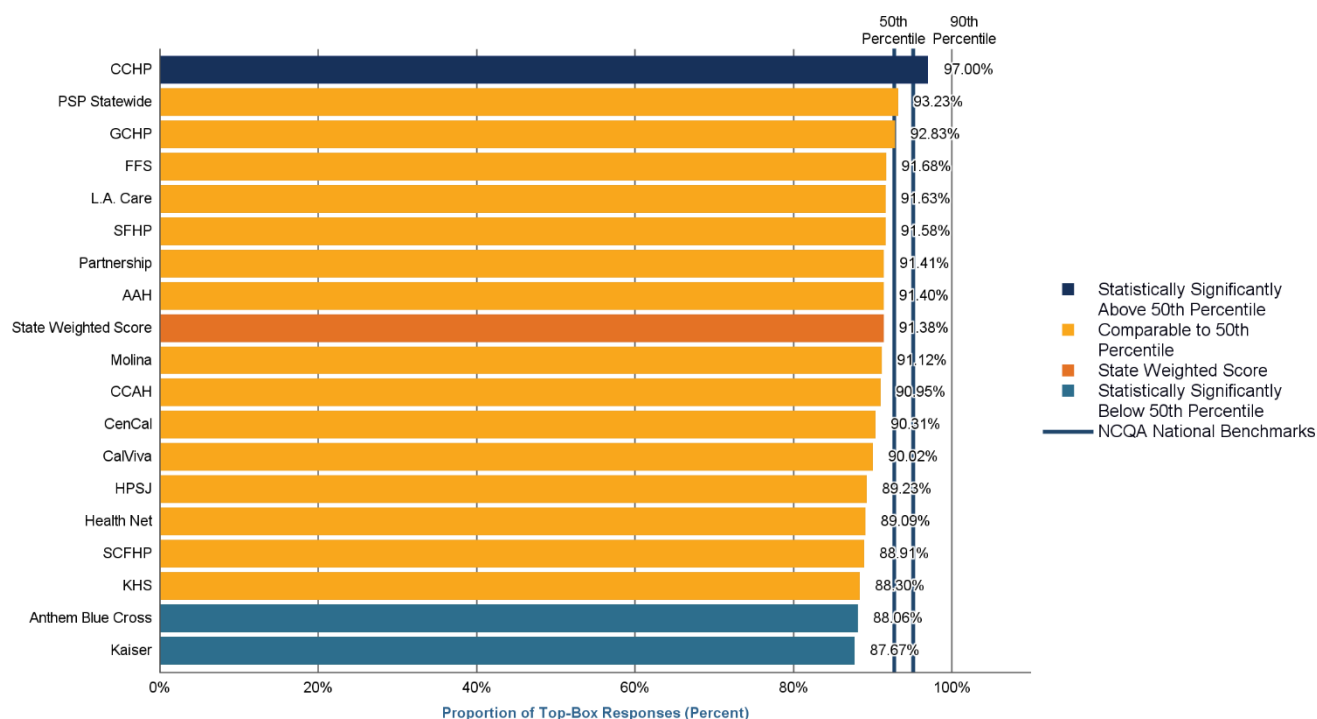
The scores for the following MCPs are not displayed in the figure on the previous page since fewer than 100 respondents responded for this measure:

- » Blue Shield Promise
- » CalOptima
- » CHG
- » HPSM
- » IEHP

Table 23 shows the 2021, 2023, and 2024 adult top-box scores for *How Well Doctors Communicate.*

Table 23—*How Well Doctors Communicate*: Adult Comparative Analysis Results

▲   Indicates the 2024 score is statistically significantly higher than the comparison year's score.

▼   Indicates the 2024 score is statistically significantly lower than the comparison year's score.

—   Indicates the 2024 score is not statistically significantly different than the comparison year's score.

S   Indicates data are suppressed due to fewer than 100 respondents.

NA   Indicates the FFS population was not included in the survey administration; therefore, FFS results are not available.

NC   Indicates the score is not comparable due to the FFS population not being included in the survey administration or comparative data are suppressed.

Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
AAH	89.59%	92.37%	91.40%	—	—
Anthem Blue Cross	90.18%	85.40%	88.06%	—	—
Blue Shield Promise	89.18%	93.44%	S	NC	NC
CalOptima	92.34%	91.87%	S	NC	NC
CalViva	85.82%	89.23%	90.02%	—	—
CenCal	89.06%	90.72%	90.31%	—	—

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
CCAH	91.27%	92.95%	90.95%	—	—
CHG	93.65%	92.73%	S	NC	NC
CCHP	93.38%	93.84%	97.00%	—	—
FFS	NA	S	91.68%	NC	NC
GCHP	89.71%	93.61%	92.83%	—	—
Health Net	87.64%	88.00%	89.09%	—	—
HPSJ	90.10%	87.77%	89.23%	—	—
HPSM	91.99%	91.60%	S	NC	NC
IEHP	87.54%	91.98%	S	NC	NC
KHS	91.97%	91.27%	88.30%	—	—
L.A. Care	89.43%	89.54%	91.63%	—	—
Molina	90.89%	89.99%	91.12%	—	—
Partnership	95.29%	89.38%	91.41%	—	—
SFHP	91.81%	90.25%	91.58%	—	—
SCFHP	89.20%	90.84%	88.91%	—	—

Child Results

Figure 19 shows the child top-box scores for *How Well Doctors Communicate.*

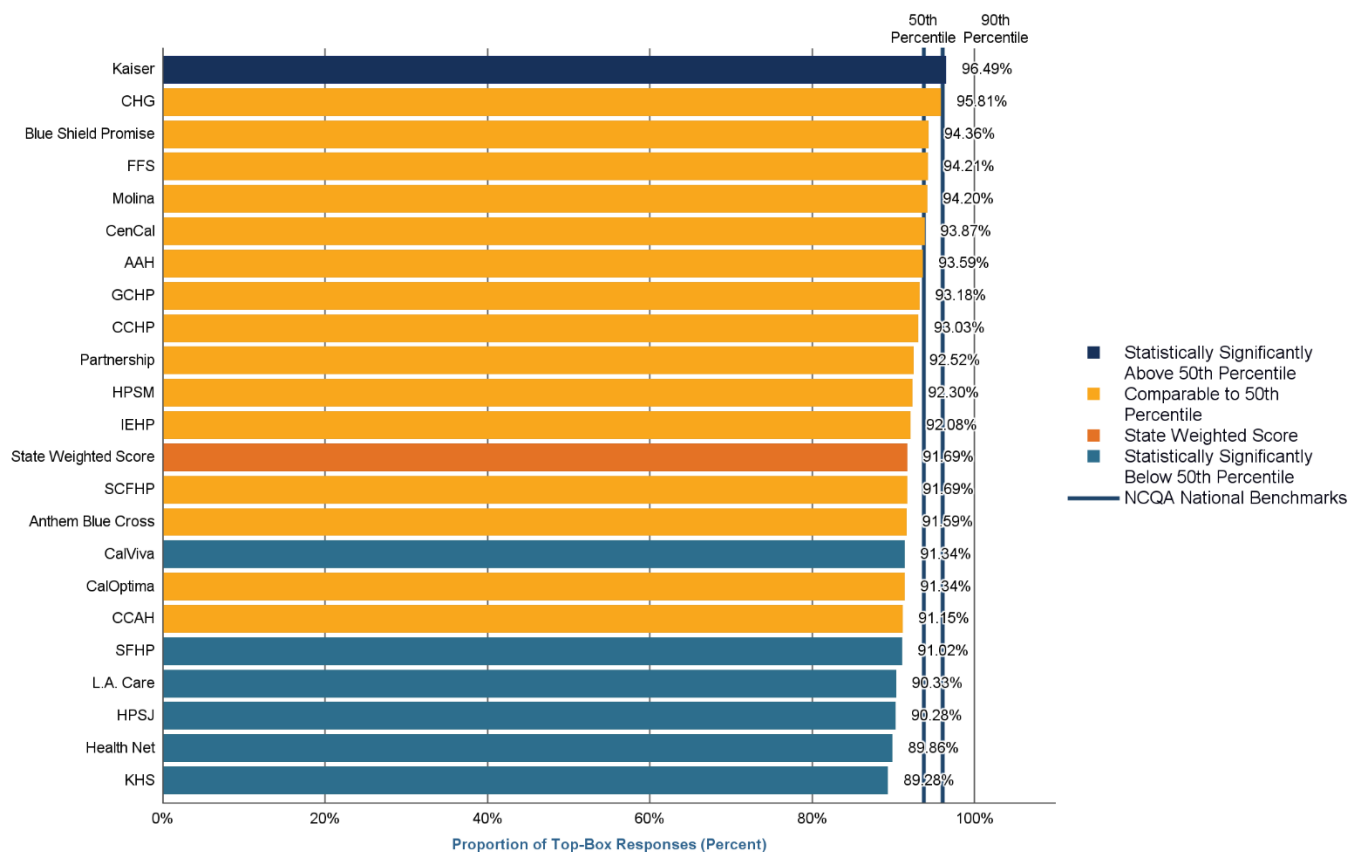Figure 19—*How Well Doctors Communicate*: Child Top-Box Scores

Table 24 shows the 2021, 2023, and 2024 child top-box scores for *How Well Doctors Communicate.*

Table 24—*How Well Doctors Communicate*: Child Comparative Analysis Results

▲   Indicates the 2024 score is statistically significantly higher than the comparison year's score.

▼   Indicates the 2024 score is statistically significantly lower than the comparison year's score.

—   Indicates the 2024 score is not statistically significantly different than the comparison year's score.

S   Indicates data are suppressed due to fewer than 100 respondents.

NA   Indicates the FFS population was not included in the survey administration; therefore, FFS results are not available.

NC   Indicates the score is not comparable due to the FFS population not being included in the survey administration or comparative data are suppressed.

Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
AAH	91.31%	92.81%	93.59%	—	—
Anthem Blue Cross	92.10%	92.73%	91.59%	—	—
Blue Shield Promise	91.37%	95.13%	94.36%	—	—
CalOptima	92.89%	93.99%	91.34%	—	—
CalViva	91.84%	89.04%	91.34%	—	—
CenCal	92.66%	92.90%	93.87%	—	—
CCAH	93.49%	93.28%	91.15%	—	—
CHG	95.62%	91.87%	95.81%	—	▲
CCHP	94.71%	93.07%	93.03%	—	—
FFS	NA	S	94.21%	NC	NC
GCHP	93.83%	92.14%	93.18%	—	—
Health Net	90.63%	90.99%	89.86%	—	—

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
HPSJ	90.89%	90.70%	90.28%	—	—
HPSM	93.98%	91.89%	92.30%	—	—
IEHP	91.30%	94.41%	92.08%	—	—
KHS	92.29%	90.29%	89.28%	—	—
L.A. Care	92.45%	91.06%	90.33%	—	—
Molina	94.74%	91.16%	94.20%	—	—
Partnership	92.01%	93.41%	92.52%	—	—
SFHP	90.71%	92.14%	91.02%	—	—
SCFHP	91.10%	90.57%	91.69%	—	—

Summary of Results—*How Well Doctors Communicate*

Adult

Of the reportable Medi-Cal populations:

» CCHP scored statistically significantly above the NCQA adult Medicaid national 50th percentile.

» The following two MCPs scored statistically significantly below the NCQA adult Medicaid national 50th percentile:

- Anthem Blue Cross
- Kaiser

» FFS did not score statistically significantly above or below the NCQA adult Medicaid national 50th percentile.

» PSP Statewide did not score statistically significantly above or below the NCQA adult Medicaid national 50th percentile.

» No MCPs scored statistically significantly higher or lower in 2024 than in 2023 or 2021.

Child

Of the reportable Medi-Cal populations:

» Kaiser scored statistically significantly above the NCQA child Medicaid national 50th percentile.

» The following six MCPs scored statistically significantly below the NCQA child Medicaid national 50th percentile:

- CalViva
- KHS
- Health Net
- L.A. Care
- HPSJ
- SFHP

» FFS did not score statistically significantly above or below the NCQA child Medicaid national 50th percentile.

» CHG scored statistically significantly higher in 2024 than in 2023.

» No MCPs scored statistically significantly lower in 2024 than in 2023.

» No MCPs scored statistically significantly higher or lower in 2024 than in 2021.

Customer Service

Measure Definition

This measure assesses how often adult members and parents/caretakers of child members were satisfied with their/their child's health plan's customer service including:

» Received information or help needed

» Treated with courtesy and respect

Adult Results

Figure 20 shows the adult top-box scores for *Customer Service.*

Figure 20—*Customer Service*: Adult Top-Box Scores
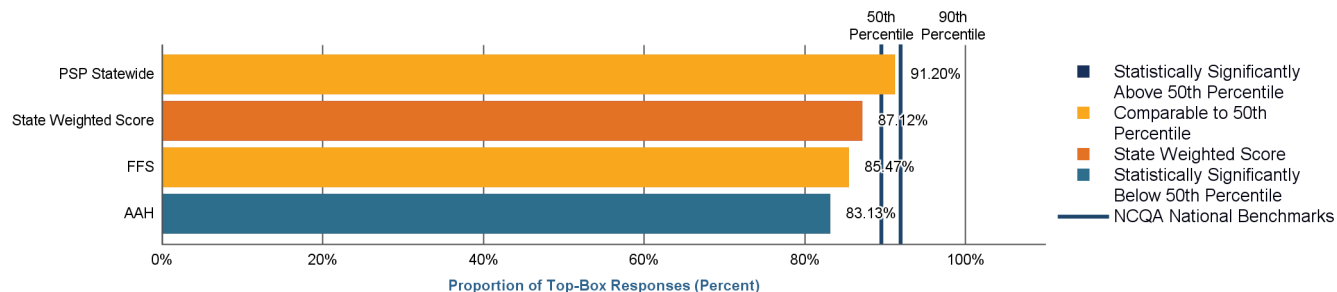
The scores for the following MCPs are not displayed in the figure above since fewer than 100 respondents responded for this measure:

» Anthem Blue Cross	» CCHP	» KHS
» Blue Shield Promise	» GCHP	» L.A. Care
» CalOptima	» Health Net	» Molina
» CalViva	» HPSJ	» Partnership
» CenCal	» HPSM	» SFHP
» CCAH	» IEHP	» SCFHP
» CHG	» Kaiser	

Table 25 shows the 2021, 2023, and 2024 adult top-box scores for *Customer Service.*

Table 25—*Customer Service*: Adult Comparative Analysis Results

▲ Indicates the 2024 score is statistically significantly higher than the comparison year's score.

▼ Indicates the 2024 score is statistically significantly lower than the comparison year's score.

— Indicates the 2024 score is not statistically significantly different than the comparison year's score.

S Indicates data are suppressed due to fewer than 100 respondents.

NA Indicates the FFS population was not included in the survey administration; therefore, FFS results are not available.

NC Indicates the score is not comparable due to the FFS population not being included in the survey administration or comparative data are suppressed.

Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
AAH	81.79%	S	83.13%	—	NC
Anthem Blue Cross	85.59%	79.90%	S	NC	NC
Blue Shield Promise	90.71%	86.23%	S	NC	NC
CalOptima	89.65%	88.12%	S	NC	NC
CalViva	S	89.84%	S	NC	NC
CenCal	S	91.87%	S	NC	NC
CCAH	S	84.10%	S	NC	NC
CHG	89.18%	86.83%	S	NC	NC
CCHP	88.23%	84.92%	S	NC	NC
FFS	NA	S	85.47%	NC	NC
GCHP	S	90.07%	S	NC	NC
Health Net	85.01%	85.98%	S	NC	NC
HPSJ	S	86.33%	S	NC	NC

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
HPSM	86.39%	87.10%	S	NC	NC
IEHP	93.29%	90.49%	S	NC	NC
KHS	88.57%	88.64%	S	NC	NC
L.A. Care	87.65%	84.89%	S	NC	NC
Molina	S	88.31%	S	NC	NC
Partnership	S	S	S	NC	NC
SFHP	81.01%	82.08%	S	NC	NC
SCFHP	90.43%	81.71%	S	NC	NC

Child Results

Figure 21 shows the child top-box scores for *Customer Service.*

Figure 21—*Customer Service*: Child Top-Box Scores
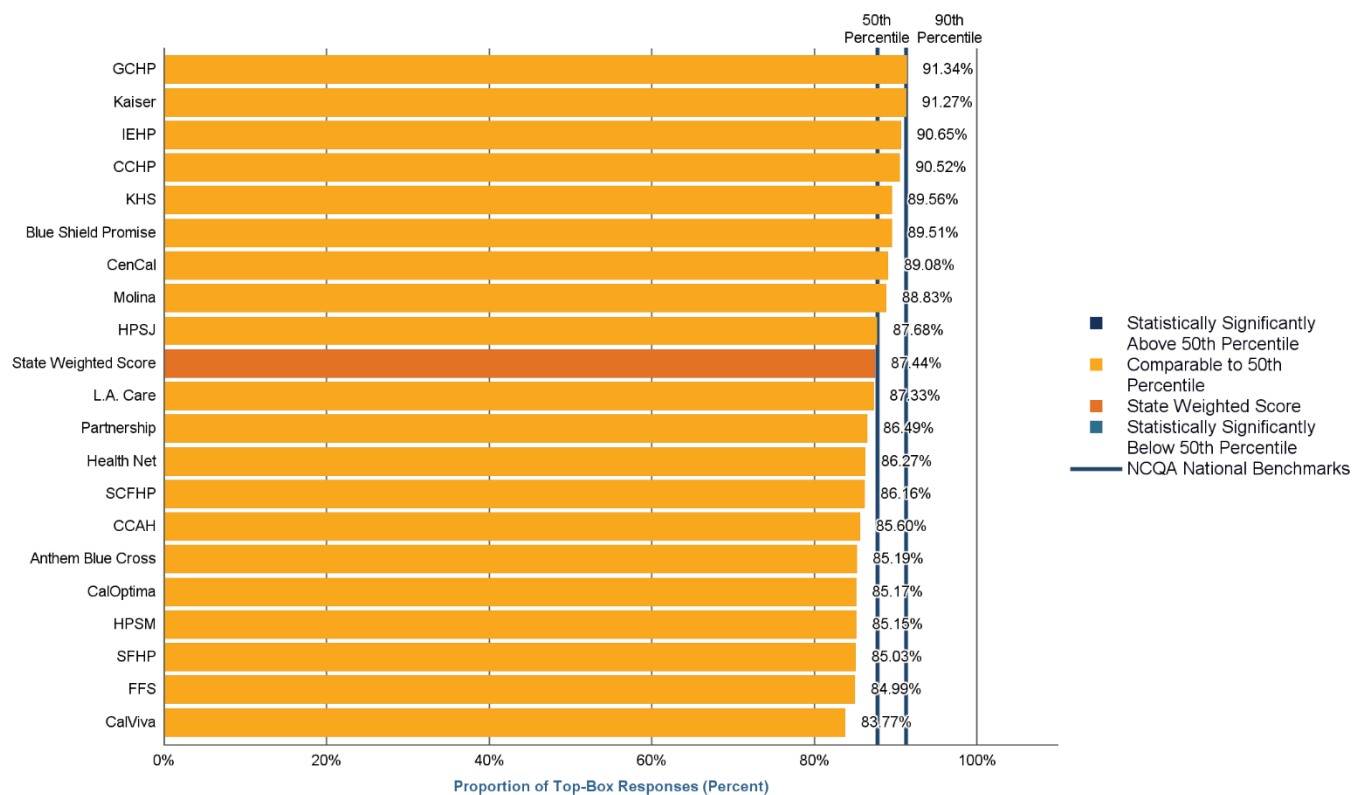
Scores for AAH and CHG are not displayed in the figure above since fewer than 100 respondents responded for this measure.

Table 26 shows the 2021, 2023, and 2024 child top-box scores for *Customer Service*.

Table 26—*Customer Service*: Child Comparative Analysis Results

▲   Indicates the 2024 score is statistically significantly higher than the comparison year's score.

▼   Indicates the 2024 score is statistically significantly lower than the comparison year's score.

—   Indicates the 2024 score is not statistically significantly different than the comparison year's score.

S   Indicates data are suppressed due to fewer than 100 respondents.

NA   Indicates the FFS population was not included in the survey administration; therefore, FFS results are not available.

NC   Indicates the score is not comparable due to the FFS population not being included in the survey administration or comparative data are suppressed.

Comparisons are based on the *t* test of statistical significance, with a *p* value of < 0.05.

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
AAH	S	87.58%	S	NC	NC
Anthem Blue Cross	S	89.47%	85.19%	NC	—
Blue Shield Promise	S	89.44%	89.51%	NC	—
CalOptima	S	88.08%	85.17%	NC	—
CalViva	S	88.21%	83.77%	NC	—
CenCal	88.33%	S	89.08%	—	NC
CCAH	S	92.91%	85.60%	NC	▼
CHG	S	87.12%	S	NC	NC
CCHP	S	84.90%	90.52%	NC	—
FFS	NA	S	84.99%	NC	NC
GCHP	S	82.61%	91.34%	NC	▲
Health Net	S	81.25%	86.27%	NC	—
HPSJ	S	87.32%	87.68%	NC	—

Medi-Cal Population	2021	2023	2024	2024 to 2021 Comparison Difference	2024 to 2023 Comparison Difference
HPSM	86.35%	87.03%	85.15%	—	—
IEHP	S	88.89%	90.65%	NC	—
KHS	S	87.70%	89.56%	NC	—
L.A. Care	S	87.95%	87.33%	NC	—
Molina	S	86.92%	88.83%	NC	—
Partnership	S	87.14%	86.49%	NC	—
SFHP	83.85%	82.46%	85.03%	—	—
SCFHP	86.92%	83.55%	86.16%	—	—

Summary of Results—*Customer Service*

Adult

Of the reportable Medi-Cal populations:

» No MCPs scored statistically significantly above the NCQA adult Medicaid national 50th percentile.

» AAH scored statistically significantly below the NCQA adult Medicaid national 50th percentile.

» FFS did not score statistically significantly above or below the NCQA adult Medicaid national 50th percentile.

» PSP Statewide did not score statistically significantly above or below the NCQA adult Medicaid national 50th percentile.

» AAH did not score statistically significantly higher or lower in 2024 than in 2021.

» All MCPs had fewer than 100 respondents in 2024 and/or 2023; therefore, the 2024 scores are not comparable to the 2023 scores.

Child

» No MCPs scored statistically significantly above or below the NCQA child Medicaid national 50th percentile.

» FFS did not score statistically significantly above or below the NCQA child Medicaid national 50th percentile.

» GCHP scored statistically significantly higher in 2024 than in 2023.

» CCAH scored statistically significantly lower in 2024 than in 2023.

» No MCPs scored statistically significantly higher or lower in 2024 than in 2021.

Medical Assistance with Smoking and Tobacco Use Cessation Measure Items

Advising Smokers and Tobacco Users to Quit, Discussing Cessation Medications, and Discussing Cessation Strategies

Measure Items Definitions

The following measure items assess different facets of providing medical assistance with smoking and tobacco use cessation:

» *Advising Smokers and Tobacco Users to Quit* – how often smokers or tobacco users were advised to quit smoking or using tobacco by a doctor or other health provider

» *Discussing Cessation Medications* – how often medication was recommended or discussed by a doctor or other health provider to assist smokers or tobacco users to quit smoking or using tobacco

» *Discussing Cessation Strategies* – how often doctors or other health providers discussed or provided methods or strategies other than medication to assist smokers or tobacco users to quit smoking or using tobacco

Summary of Results

The scores for every MCP except Partnership, as well as FFS and PSP Statewide, were suppressed since fewer than 100 respondents responded for every measure item. For *Advising Smokers and Tobacco Users to Quit*, Partnership scored statistically significantly below the NCQA adult Medicaid national 50th percentile and did not score statistically significantly higher or lower in 2024 than in 2023 or 2021. For *Discussing Cessation Medications* and *Discussing Cessation Strategies*, Partnership did not score statistically significantly above or below the NCQA adult Medicaid national 50th percentile or higher or lower in 2024 than in 2023 or 2021.

CONCLUSIONS AND CONSIDERATIONS

Conclusions

HSAG used the results from the State weighted scores, State Comparisons, and Comparative Analysis to identify notable results. HSAG also used the results to identify opportunities for improvement for DHCS' consideration as DHCS engages with the MCPs and PSPs on quality improvement strategies.

Table 27 and Table 28 show the notable results and opportunities for improvement, respectively, for the adult population, and Table 29 and Table 30 show the notable results and opportunities for improvement, respectively, for the child population.

Table 27—Adult Statistically Significantly Higher Results

Measure	Statistically Significantly Above National 50th Percentile	Statistically Significantly Higher in 2024 than 2021	Statistically Significantly Higher in 2024 than 2023
Rating of Health Plan	» IEHP » Kaiser » PSP Statewide		» CalViva
Rating of All Health Care	» PSP Statewide		
Rating of Personal Doctor	» PSP Statewide	» L.A. Care	
How Well Doctors Communicate	» CCHP		

Table 28—Adult Statistically Significantly Lower Results

Measure	Statistically Significantly Below National 50th Percentile	Statistically Significantly Lower in 2024 than 2021	Statistically Significantly Lower in 2024 than 2023
Rating of Health Plan	» Anthem Blue Cross » Blue Shield Promise » CenCal » Partnership	» Blue Shield Promise	» CenCal
Rating of All Health Care	» Blue Shield Promise	» SCFHP	
Rating of Personal Doctor	» Health Net » SCFHP	» SCFHP	
Getting Needed Care	» Anthem Blue Cross » CalViva » HPSJ » L.A. Care » SCFHP		
Getting Care Quickly	» AAH » Anthem Blue Cross » CCAH » CenCal » Health Net » L.A. Care » FFS	» CCAH	

Measure	Statistically Significantly Below National 50th Percentile	Statistically Significantly Lower in 2024 than 2021	Statistically Significantly Lower in 2024 than 2023
How Well Doctors Communicate	» Anthem Blue Cross » Kaiser		
Customer Service	» AAH		
Advising Smokers and Tobacco Users to Quit	» Partnership		

Table 29—Child Statistically Significantly Higher Results

No MCPs scored statistically significantly higher in 2024 than in 2021.

Measure	Statistically Significantly Above National 50th Percentile	Statistically Significantly Higher in 2024 than 2023
Rating of Health Plan	» Kaiser	» GCHP
Rating of All Health Care	» Kaiser	» CCHP » Molina
Rating of Personal Doctor	» CHG » Kaiser	» AAH » CenCal » CHG
Rating of Specialist Seen Most Often	» Kaiser	
Getting Needed Care	» Kaiser	» AAH » Anthem Blue Cross
Getting Care Quickly		» AAH
How Well Doctors Communicate	» Kaiser	» CHG

Measure	Statistically Significantly Above National 50th Percentile	Statistically Significantly Higher in 2024 than 2023
Customer Service		» GCHP

Table 30—Child Statistically Significantly Lower Results

Measure	Statistically Significantly Below National 50th Percentile	Statistically Significantly Lower in 2024 than 2021	Statistically Significantly Lower in 2024 than 2023
Rating of Health Plan	» Anthem Blue Cross » Blue Shield Promise » CalOptima » FFS » Health Net » HPSM » L.A. Care » Molina » Partnership » SFHP	» CalOptima » Health Net » Partnership » SCFHP	

Measure	Statistically Significantly Below National 50th Percentile	Statistically Significantly Lower in 2024 than 2021	Statistically Significantly Lower in 2024 than 2023
Rating of All Health Care	» Anthem Blue Cross » CalOptima » CalViva » CCAH » FFS » Health Net » HPSJ » KHS » L.A. Care » Partnership » SFHP » SCFHP	» Anthem Blue Cross » CalOptima » CCAH » GCHP » Health Net » HPSM » KHS » L.A. Care » Partnership » SCFHP	
Rating of Personal Doctor	» Anthem Blue Cross » CalOptima » CalViva » Health Net » HPSJ » KHS » SFHP	» CalOptima » CalViva » Health Net	» Blue Shield Promise

Measure	Statistically Significantly Below National 50th Percentile	Statistically Significantly Lower in 2024 than 2021	Statistically Significantly Lower in 2024 than 2023
Getting Needed Care	» CalOptima » CalViva » CCAH » CHG » GCHP » Health Net » HPSJ » HPSM » KHS » L.A. Care » SFHP » SCFHP	» CalViva » CCAH » HPSM » SCFHP	» HPSM

Measure	Statistically Significantly Below National 50th Percentile	Statistically Significantly Lower in 2024 than 2021	Statistically Significantly Lower in 2024 than 2023
Getting Care Quickly	» Anthem Blue Cross » CalOptima » CCHP » GCHP » Health Net » HPSJ » HPSM » KHS » L.A. Care » Partnership » SFHP » SCFHP		
How Well Doctors Communicate	» CalViva » Health Net » HPSJ » KHS » L.A. Care » SFHP		
Customer Service			» CCAH

The following findings indicate opportunities for improvement in member experience for several areas of care for the adult and child populations:

» The State weighted scores were at or below the 2023 NCQA Medicaid national 50th percentiles for every measure except *Rating of All Health Care* for the adult population and for all measures for the child population.

» Of the 11 measures for the adult population and eight measures for the child population, Table 31 shows the number of reportable measures where the MCPs, FFS, and PSP Statewide scored statistically significantly below the 2023 NCQA Medicaid national 50th percentiles. Of note, the scores for every MCP except Partnership, as well as FFS and PSP Statewide, were suppressed for the medical assistance with smoking and tobacco use cessation measure items since fewer than 100 respondents responded for every measure item.

Table 31—Number of Reportable Measures Statistically Significantly Below National 50th Percentiles

NA Indicates that PSP Statewide does not apply to the child population.

Medi-Cal Population	Adult	Child
AAH	2 (Out of 8)	0 (Out of 6)
Anthem Blue Cross	4 (Out of 7)	4 (Out of 7)
Blue Shield Promise	2 (Out of 3)	1 (Out of 7)
CalOptima	0 (Out of 2)	5 (Out of 7)
CalViva	1 (Out of 5)	4 (Out of 7)
CenCal	2 (Out of 7)	0 (Out of 7)
CCAH	1 (Out of 6)	2 (Out of 7)
CHG	0 (Out of 3)	1 (Out of 6)
CCHP	0 (Out of 5)	1 (Out of 7)
FFS	1 (Out of 7)	2 (Out of 8)
GCHP	0 (Out of 4)	2 (Out of 8)
Health Net	2 (Out of 6)	6 (Out of 7)
HPSJ	1 (Out of 5)	5 (Out of 7)
HPSM	0 (Out of 3)	3 (Out of 8)

Medi-Cal Population	Adult	Child
IEHP	0 (Out of 2)	0 (Out of 7)
Kaiser	1 (Out of 6)	0 (Out of 8)
KHS	0 (Out of 5)	5 (Out of 7)
L.A. Care	2 (Out of 7)	5 (Out of 7)
Molina	0 (Out of 5)	1 (Out of 7)
Partnership	2 (Out of 10)	3 (Out of 8)
PSP Statewide	0 (Out of 8)	NA
SFHP	0 (Out of 4)	6 (Out of 7)
SCFHP	2 (Out of 5)	3 (Out of 7)

HSAG observed the following differences in scores for the adult population:

» The differences between the NCQA adult Medicaid national 50th and 90th percentiles ranged from 2.35 percentage points to 11.01 percentage points, with an average of 5.56 percentage points.

» The differences between the adult population's State weighted scores and the NCQA adult Medicaid national 50th percentiles ranged from 8.15 percentage points below to 0.21 percentage points above the NCQA adult Medicaid national 50th percentiles, with an average of 3.83 percentage points below the NCQA adult Medicaid national 50th percentiles.

HSAG observed the following differences in scores for the child population:

» The differences between the NCQA child Medicaid national 50th and 90th percentiles ranged from 2.34 percentage points to 6.28 percentage points, with an average of 3.97 percentage points.

» The differences between the child population's State weighted scores and the NCQA child Medicaid national 50th percentiles ranged from 6.16 to 0.16 percentage points below the NCQA child Medicaid national 50th percentiles, with an average of 3.28 percentage points below the NCQA child Medicaid national 50th percentiles.

Quality Improvement Efforts

DHCS is currently working with the MCPs to implement the following quality improvement and health management efforts that are expected to deliver a person-centered, equity-focused, and data-driven Medi-Cal program:[44]

» One Standard Contract: Effective January 1, 2024, DHCS moved to using one standard model contract for all plan models instead of multiple model contracts for standardization, care coordination, access to community-based resources, and behavioral and physical health integration across all counties.[45,46] Also, per the 2024 contract, MCPs will be required to publicly report on consumer satisfaction regarding access, quality improvement, and health equity on an ongoing basis.

» California Advancing and Innovating Medi-Cal (CalAIM): This multi-year initiative strives to improve the quality of life and health outcomes of the Medi-Cal population using a whole-person care approach that targets social drivers of health with a goal of reducing health disparities and inequities. Specifically, a major goal of CalAIM is to standardize benefits and care delivery across the state of California, which includes reduced variation for members as they move within the State and between MCPs, and improved access since this can directly affect member experience. CalAIM is focused on DHCS' quality strategy goals of improving member experience and engaging members as owners of their own care through the following initiatives:[47]

- Providing high-need members with Enhanced Care Management (ECM) and Community Supports services despite whether they qualify for ECM.[48]

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[44] California Department of Health Care Services. *Joint Statement on the 2024 Medi-Cal Managed Care Plan Contracts*. Available at: https://www.dhcs.ca.gov/CalAIM/Pages/MCP-RFP.aspx. Accessed on: July 31, 2024.

[45] Ibid.

[46] California Department of Health Care Services. *Department of Health Care Services Comprehensive Quality Strategy*. February 2022. Available at: https://www.dhcs.ca.gov/services/Documents/Formatted-Combined-CQS-2-4-22.pdf. Accessed on: July 31, 2024.

[47] Ibid.

[48] California Department of Health Care Services. *Enhanced Care Management and Community Supports*. Available at: https://www.dhcs.ca.gov/CalAIM/ECM/Pages/Home.aspx. Accessed on: July 31, 2024.

- Allowing eligible Californians who are incarcerated to receive a targeted set of Medi-Cal services for up to 90 days prior to release through the Justice-Involved Initiative.[49]

- Providing incentives to MCPs that meet key targets in transformative programs and services through the Incentive Payment Program (IPP).[50]

- Requiring the MCPs to submit an annual Population Health Management (PHM) Strategy Deliverable to update DHCS on the MCPs' PHM programs in an effort to identify the needs and strengths within members' communities.[51]

- Funding historically under-resourced partners such as community-based organizations (CBOs) and public hospitals to strengthen the capacity of staff, billing systems, and data exchange resources under the Providing Access and Transforming Health (PATH) initiative.[52]

» Health Disparities Report: DHCS shares results of an annual health disparities report with MCPs (i.e., does not include data for FFS members) to target quality improvement efforts for members affected by health care disparities.[53] These reports analyze the Managed Care Accountability Set (MCAS) measures reported by MCPs that reflect clinical quality, timeliness, and access to care provided to members for various demographic categories.[54]

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[49] California Department of Health Care Services. *Justice-Involved Initiative.* Available at: https://www.dhcs.ca.gov/CalAIM/Justice-Involved-Initiative/Pages/home.aspx. Accessed on: July 31, 2024.

[50] California Department of Health Care Services. *Incentive Payment Program.* Available at: https://www.dhcs.ca.gov/Pages/incentivepaymentprogram.aspx. Accessed on: July 31, 2024.

[51] California Department of Health Care Services. *CalAIM Population Health Management Initiative.* Available at: https://www.dhcs.ca.gov/CalAIM/Pages/PopulationHealthManagement.aspx. Accessed on: July 31, 2024.

[52] California Department of Health Care Services. *CalAIM Providing Access and Transforming Health Initiative.* Available at: https://www.dhcs.ca.gov/CalAIM/Pages/CalAIM-PATH.aspx. Accessed on: July 31, 2024.

[53] Ibid.

[54] California Department of Health Care Services. *Medi-Cal Managed Care Quality Improvement Reports.* Available at: https://www.dhcs.ca.gov/dataandstats/reports/Pages/MgdCareQualPerfDisp.aspx. Accessed on: July 31, 2024.

» DHCS is working collaboratively with other entities to ensure that the Ages 26 through 49 Adult Expansion initiative that was enacted on January 1, 2024, is successfully implemented. This new law will allow adults ages 26 through 49 to qualify for full-scope Medi-Cal, regardless of immigration status.

Considerations

Only one MCP had greater than 100 respondents for the medical assistance with smoking and tobacco use cessation measure items. In future years, DHCS may want to consider increasing the oversample for the adult Medi-Cal populations in an effort to obtain more reportable measure items for evaluation. Additionally, HSAG observed that the State weighted scores were below the 2023 NCQA Medicaid national 50th percentiles for every measure except *Rating of All Health Care* for the adult population and for every measure for the child population. The MCPs scored statistically significantly below the NCQA Medicaid national 50th percentiles for several measures for the adult and child populations. The survey results from 2021, 2023, and 2024 may reflect ongoing issues with providers delivering quality, timely, and accessible services to members. HSAG suggests that DHCS conduct ongoing evaluation of the quality improvement efforts described on page 108 to determine if they are resulting in a positive impact on member experience.

APPENDIX A: RESPONDENT ANALYSIS RESULTS

Table 32 through Table 35 and Table 36 through Table 39 present the results of the respondent analysis for the adult and child populations, respectively. Please note that variables from the sample frames were used for this analysis. For more information on the calculation of the respondent analysis, please refer to the "Respondent Analysis" heading in the Methodology section of this report on page 24.

Table 32—Adult Respondent Analysis: Age

↑   Indicates the respondent percentage is statistically significantly higher than the sample frame percentage.

↓   Indicates the respondent percentage is statistically significantly lower than the sample frame percentage.

Some percentages may not total 100% due to rounding.

Comparisons are based on the 95 percent confidence interval of the respondent percentage.

An "S" indicates fewer than 11 respondents exist in the numerator of this demographic category. HSAG suppressed displaying the number in this report to satisfy the DHCS Data De-Identification Guidelines (DDG) V2.2 de-identification standard.

	Adult Respondents					Adult Sample Frame				
Medi-Cal Population	**18-34**	**35-44**	**45-54**	**55-64**	**65 or older**	**18-34**	**35-44**	**45-54**	**55-64**	**65 or older**
AAH	16.23% ↓	12.66% ↓	18.51%	31.49% ↑	21.10% ↑	42.35%	17.30%	14.71%	16.32%	9.32%
Anthem Blue Cross	28.87% ↓	11.97% ↓	15.14%	28.87% ↑	15.14% ↑	47.08%	19.43%	14.51%	13.88%	5.11%
Blue Shield Promise	14.53% ↓	14.53%	18.02%	40.12% ↑	12.79% ↑	44.31%	19.51%	14.71%	16.98%	4.48%
CalOptima	22.64% ↓	12.58%	21.38%	35.85% ↑	7.55%	47.35%	15.28%	15.57%	17.27%	4.53%
CalViva	29.69% ↓	14.41% ↓	24.02% ↑	24.45% ↑	7.42% ↑	48.15%	20.44%	15.03%	12.77%	3.61%
CenCal	30.88% ↓	15.79%	21.40% ↑	26.67% ↑	5.26%	52.26%	17.15%	13.69%	13.86%	3.04%
CCAH	31.23% ↓	16.73%	18.59%	24.91% ↑	8.55% ↑	51.23%	18.13%	14.40%	13.14%	3.12%

Medi-Cal Population	Adult Respondents					Adult Sample Frame				
	18-34	35-44	45-54	55-64	65 or older	18-34	35-44	45-54	55-64	65 or older
CHG	22.42% ↓	13.94%	22.42% ↑	27.27% ↑	13.94% ↑	46.34%	17.25%	14.94%	16.16%	5.32%
CCHP	25.46% ↓	8.80% ↓	23.61% ↑	26.85% ↑	15.28% ↑	43.61%	19.44%	15.24%	14.52%	7.19%
FFS	21.54% ↓	S	28.34% ↑	S	S	27.03%	46.93%	23.86%	1.56%	0.62%
GCHP	24.88% ↓	S	22.49% ↑	34.93% ↑	S	50.66%	16.73%	14.39%	15.05%	3.18%
Health Net	18.34% ↓	11.79% ↓	20.09%	38.86% ↑	10.92% ↑	45.67%	17.36%	15.36%	16.42%	5.19%
HPSJ	25.32% ↓	16.88%	17.30%	32.49% ↑	8.02%	48.36%	19.06%	14.04%	13.45%	5.10%
HPSM	21.59% ↓	14.20%	15.91%	28.98% ↑	19.32% ↑	45.60%	14.34%	14.91%	17.63%	7.52%
IEHP	22.38% ↓	13.99%	24.48% ↑	31.47% ↑	7.69% ↑	50.71%	18.19%	13.86%	14.09%	3.15%
Kaiser	23.50% ↓	S	18.80%	36.75% ↑	S	49.73%	20.00%	14.90%	13.45%	1.92%
KHS	22.43% ↓	12.62% ↓	22.43% ↑	35.05% ↑	7.48% ↑	50.82%	18.71%	14.12%	13.24%	3.11%
L.A. Care	23.28% ↓	11.64% ↓	15.09%	36.64% ↑	13.36% ↑	46.46%	16.20%	14.91%	16.87%	5.55%
Molina	19.31% ↓	9.44% ↓	16.31%	41.20% ↑	13.73% ↑	47.94%	18.28%	14.25%	14.73%	4.80%
Partnership	17.55% ↓	11.59% ↓	21.85% ↑	40.40% ↑	8.61% ↑	45.55%	20.47%	15.32%	15.11%	3.56%
PSP Statewide	0.00%	S	S	S	98.02% ↑	0.24%	0.38%	0.86%	1.79%	96.73%

Medi-Cal Population	Adult Respondents					Adult Sample Frame				
	18-34	35-44	45-54	55-64	65 or older	18-34	35-44	45-54	55-64	65 or older
SFHP	18.84% ↓	16.91%	19.81%	34.78% ↑	9.66%	35.39%	18.68%	17.61%	20.66%	7.66%
SCFHP	30.10% ↓	13.78%	14.29%	25.51% ↑	16.33% ↑	43.38%	13.92%	14.83%	17.78%	10.09%

Table 33—Adult Respondent Analysis: Gender

↑   Indicates the respondent percentage is statistically significantly higher than the sample frame percentage.

↓   Indicates the respondent percentage is statistically significantly lower than the sample frame percentage.

Some percentages may not total 100% due to rounding.

Comparisons are based on the 95 percent confidence interval of the respondent percentage.

Medi-Cal Population	Adult Respondents		Adult Sample Frame	
	Male	Female	Male	Female
AAH	45.45%	54.55%	44.71%	55.29%
Anthem Blue Cross	42.96%	57.04%	46.71%	53.29%
Blue Shield Promise	39.53% ↓	60.47% ↑	47.20%	52.80%
CalOptima	42.77%	57.23%	44.80%	55.20%
CalViva	36.68%	63.32%	42.26%	57.74%
CenCal	37.89% ↓	62.11% ↑	44.10%	55.90%
CCAH	38.66%	61.34%	43.56%	56.44%
CHG	33.94% ↓	66.06% ↑	42.91%	57.09%
CCHP	46.30%	53.70%	43.85%	56.15%
FFS	39.00% ↓	61.00% ↑	43.81%	56.19%
GCHP	42.58%	57.42%	44.08%	55.92%
Health Net	37.55% ↓	62.45% ↑	46.10%	53.90%

	Adult Respondents		Adult Sample Frame	
Medi-Cal Population	**Male**	**Female**	**Male**	**Female**
HPSJ	43.46%	56.54%	42.32%	57.68%
HPSM	40.91%	59.09%	45.91%	54.09%
IEHP	35.66%	64.34%	42.55%	57.45%
Kaiser	41.88%	58.12%	39.35%	60.65%
KHS	32.24% ↓	67.76% ↑	41.48%	58.52%
L.A. Care	37.07% ↓	62.93% ↑	45.19%	54.81%
Molina	33.05% ↓	66.95% ↑	46.42%	53.58%
Partnership	39.07% ↓	60.93% ↑	45.68%	54.32%
PSP Statewide	35.88% ↓	64.12% ↑	39.38%	60.62%
SFHP	50.72%	49.28%	49.90%	50.10%
SCFHP	40.31%	59.69%	45.35%	54.65%

Table 34—Adult Respondent Analysis: Race

↑ Indicates the respondent percentage is statistically significantly higher than the sample frame percentage.

↓ Indicates the respondent percentage is statistically significantly lower than the sample frame percentage.

Some percentages may not total 100% due to rounding.

Comparisons are based on the 95 percent confidence interval of the respondent percentage.

An "S" indicates fewer than 11 respondents exist in the numerator of this demographic category. HSAG suppressed displaying the number in this report to satisfy the DHCS DDG V2.2 de-identification standard.

	Adult Respondents				Adult Sample Frame			
Medi-Cal Population	**White**	**Black**	**Asian**	**Other**	**White**	**Black**	**Asian**	**Other**
AAH	12.10%	7.83% ↓	31.32% ↑	48.75%	10.16%	14.42%	24.99%	50.44%

Medi-Cal Population	Adult Respondents				Adult Sample Frame			
	White	Black	Asian	Other	White	Black	Asian	Other
Anthem Blue Cross	29.06%	S	S	50.94%	27.24%	7.20%	12.75%	52.81%
Blue Shield Promise	27.03%	S	S	52.70%	28.33%	6.27%	8.65%	56.75%
CalOptima	25.18%	S	S	56.12%	19.89%	1.99%	22.26%	55.86%
CalViva	17.62%	S	S	70.48%	15.99%	4.74%	8.97%	70.31%
CenCal	48.58%	S	S	46.56%	49.74%	1.44%	2.59%	46.23%
CCAH	31.78%	S	S	58.53%	28.22%	2.61%	4.80%	64.37%
CHG	20.69%	S	S	64.83%	17.84%	5.40%	9.41%	67.35%
CCHP	20.97%	6.99% ↓	19.35% ↑	52.69%	18.17%	13.43%	13.04%	55.36%
FFS	9.31%	S	S	87.11% ↑	11.79%	2.25%	4.15%	81.81%
GCHP	S	S	9.04% ↑	61.70% ↓	24.51%	1.69%	4.67%	69.13%
Health Net	25.23%	7.80%	11.01%	55.96%	23.94%	10.01%	10.18%	55.87%
HPSJ	39.19% ↑	S	S	43.24%	31.43%	7.50%	15.72%	45.35%
HPSM	22.67% ↑	S	S	49.33% ↓	14.61%	2.80%	20.78%	61.81%
IEHP	32.12%	S	S	54.74%	31.43%	9.97%	5.52%	53.08%
Kaiser	33.99% ↑	8.37%	13.30%	44.33%	26.78%	10.07%	13.00%	50.15%
KHS	35.29%	5.39%	7.84%	51.47%	34.78%	6.82%	5.13%	53.27%
L.A. Care	20.55%	10.05%	12.79%	56.62%	21.77%	12.42%	10.00%	55.81%
Molina	22.93%	S	S	66.34%	24.41%	8.19%	7.54%	59.86%
Partnership	46.15%	S	S	43.96%	45.19%	5.88%	6.66%	42.28%
PSP Statewide	22.87%	4.81%	10.40%	61.92%	23.59%	4.87%	9.48%	62.05%
SFHP	S	S	34.76%	50.27%	10.43%	7.44%	31.87%	50.27%

Medi-Cal Population	Adult Respondents				Adult Sample Frame			
	White	**Black**	**Asian**	**Other**	**White**	**Black**	**Asian**	**Other**
SCFHP	S	S	34.81%	49.72%	12.45%	3.40%	31.57%	52.59%

Table 35—Adult Respondent Analysis: Ethnicity

↑   Indicates the respondent percentage is statistically significantly higher than the sample frame percentage.

↓   Indicates the respondent percentage is statistically significantly lower than the sample frame percentage.

Some percentages may not total 100% due to rounding.

Comparisons are based on the 95 percent confidence interval of the respondent percentage.

Medi-Cal Population	Adult Respondents		Adult Sample Frame	
	Hispanic	**Non-Hispanic**	**Hispanic**	**Non-Hispanic**
AAH	25.98%	74.02%	26.60%	73.40%
Anthem Blue Cross	36.23%	63.77%	37.17%	62.83%
Blue Shield Promise	31.76%	68.24%	33.99%	66.01%
CalOptima	42.45%	57.55%	46.67%	53.33%
CalViva	64.76%	35.24%	60.99%	39.01%
CenCal	31.98%	68.02%	34.38%	65.62%
CCAH	60.47% ↓	39.53% ↑	68.53%	31.47%
CHG	43.45%	56.55%	45.97%	54.03%
CCHP	34.95%	65.05%	39.88%	60.12%
FFS	86.16% ↑	13.84% ↓	81.51%	18.49%
GCHP	50.53% ↓	49.47% ↑	58.82%	41.18%
Health Net	54.59%	45.41%	53.97%	46.03%
HPSJ	49.10%	50.90%	48.54%	51.46%
HPSM	37.33% ↓	62.67% ↑	47.60%	52.40%

	Adult Respondents		Adult Sample Frame	
Medi-Cal Population	**Hispanic**	**Non-Hispanic**	**Hispanic**	**Non-Hispanic**
IEHP	56.20%	43.80%	57.28%	42.72%
Kaiser	25.12%	74.88%	26.41%	73.59%
KHS	54.90%	45.10%	59.04%	40.96%
L.A. Care	57.53%	42.47%	58.07%	41.93%
Molina	50.24%	49.76%	46.70%	53.30%
Partnership	30.04%	69.96%	31.71%	68.29%
PSP Statewide	61.92%	38.08%	63.67%	36.33%
SFHP	19.79%	80.21%	18.62%	81.38%
SCFHP	34.81%	65.19%	41.47%	58.53%

Table 36—Child Respondent Analysis: Age

↑ Indicates the respondent percentage is statistically significantly higher than the sample frame percentage.

↓ Indicates the respondent percentage is statistically significantly lower than the sample frame percentage.

Some percentages may not total 100% due to rounding.

Comparisons are based on the 95 percent confidence interval of the respondent percentage.

An "S" indicates fewer than 11 respondents exist in the numerator of this demographic category. HSAG suppressed displaying the number in this report to satisfy the DHCS DDG V2.2 de-identification standard.

	Child Respondents					Child Sample Frame				
Medi-Cal Population	**Less than 1**	**1-3**	**4-7**	**8-12**	**13-17**	**Less than 1**	**1-3**	**4-7**	**8-12**	**13-17**
AAH	S	S	25.81%	25.81%	27.60%	1.94%	17.36%	24.10%	27.85%	28.76%
Anthem Blue Cross	2.73%	15.97%	19.12% ↓	25.42%	36.76% ↑	1.97%	17.60%	23.87%	27.86%	28.69%

Medi-Cal Population	Child Respondents					Child Sample Frame				
	Less than 1	1-3	4-7	8-12	13-17	Less than 1	1-3	4-7	8-12	13-17
Blue Shield Promise	S	S	20.11% ↓	25.27%	32.34% ↑	2.58%	21.29%	24.71%	25.88%	25.54%
CalOptima	S	11.99% ↓	S	29.16%	36.78% ↑	2.24%	17.01%	23.39%	27.00%	30.36%
CalViva	2.41%	16.48%	22.59%	24.44% ↓	34.07% ↑	2.14%	17.31%	23.66%	28.54%	28.35%
CenCal	3.18%	20.42%	24.67%	21.75% ↓	29.97%	3.12%	20.15%	24.10%	26.44%	26.19%
CCAH	S	S	19.82%	24.70%	39.63% ↑	2.71%	17.74%	23.68%	27.56%	28.31%
CHG	S	10.82% ↓	S	32.79%	30.16%	1.79%	16.79%	23.03%	28.20%	30.18%
CCHP	S	S	19.78% ↓	26.46%	33.70% ↑	1.90%	18.56%	24.24%	27.19%	28.11%
FFS	5.69%	11.57%	20.20%	28.24%	34.31%	7.60%	13.12%	20.03%	27.97%	31.28%
GCHP	S	S	23.79%	21.66% ↓	35.78% ↑	2.43%	17.93%	23.86%	26.78%	29.01%
Health Net	2.45%	14.49%	21.02%	24.90% ↓	37.14% ↑	1.79%	15.38%	22.50%	29.42%	30.91%
HPSJ	3.94% ↑	18.67%	23.24%	25.31%	28.84%	2.18%	18.39%	24.74%	27.47%	27.23%
HPSM	2.75%	13.74% ↓	21.99%	24.52%	37.00% ↑	2.60%	17.73%	24.01%	27.20%	28.47%
IEHP	S	S	21.14%	26.83%	36.31% ↑	1.87%	17.15%	24.58%	28.31%	28.08%
Kaiser	3.61%	13.45% ↓	22.89%	25.10%	34.94% ↑	2.45%	18.88%	25.45%	26.49%	26.73%
KHS	3.35%	17.57%	22.18%	23.01% ↓	33.89% ↑	2.21%	18.03%	24.23%	27.95%	27.57%

Medi-Cal Population	Child Respondents					Child Sample Frame				
	Less than 1	1-3	4-7	8-12	13-17	Less than 1	1-3	4-7	8-12	13-17
L.A. Care	2.71%	17.54%	18.58% ↓	25.05%	36.12% ↑	1.83%	16.39%	24.46%	28.36%	28.96%
Molina	S	S	20.11%	24.66% ↓	37.00% ↑	1.46%	15.58%	24.08%	29.15%	29.73%
Partnership	S	S	15.10%	29.98% ↓	37.86% ↑	2.41%	17.84%	24.20%	27.68%	27.86%
SFHP	3.41%	16.30%	23.36%	23.36% ↓	33.58% ↑	1.95%	17.18%	24.51%	27.76%	28.60%
SCFHP	S	13.30% ↓	S	27.66%	33.24%	2.36%	17.68%	23.53%	27.07%	29.35%

Table 37—Child Respondent Analysis: Gender

↑ Indicates the respondent percentage is statistically significantly higher than the sample frame percentage.

↓ Indicates the respondent percentage is statistically significantly lower than the sample frame percentage.

Some percentages may not total 100% due to rounding.

Comparisons are based on the 95 percent confidence interval of the respondent percentage.

Medi-Cal Population	Child Respondents		Child Sample Frame	
	Male	Female	Male	Female
AAH	51.61%	48.39%	51.42%	48.58%
Anthem Blue Cross	52.94%	47.06%	51.33%	48.67%
Blue Shield Promise	51.63%	48.37%	51.48%	48.52%
CalOptima	59.13% ↑	40.87% ↓	51.60%	48.40%
CalViva	52.41%	47.59%	51.04%	48.96%
CenCal	55.44%	44.56%	50.97%	49.03%
CCAH	57.32% ↑	42.68% ↓	50.91%	49.09%

	Child Respondents		Child Sample Frame	
Medi-Cal Population	**Male**	**Female**	**Male**	**Female**
CHG	57.05%	42.95%	51.50%	48.50%
CCHP	49.30%	50.70%	50.85%	49.15%
FFS	50.39%	49.61%	51.04%	48.96%
GCHP	51.64%	48.36%	51.30%	48.70%
Health Net	51.84%	48.16%	51.29%	48.71%
HPSJ	51.87%	48.13%	51.28%	48.72%
HPSM	50.95%	49.05%	51.73%	48.27%
IEHP	52.03%	47.97%	51.27%	48.73%
Kaiser	56.02%	43.98%	51.94%	48.06%
KHS	54.18%	45.82%	51.02%	48.98%
L.A. Care	54.49%	45.51%	51.37%	48.63%
Molina	51.74%	48.26%	51.36%	48.64%
Partnership	50.33%	49.67%	51.23%	48.77%
SFHP	55.72%	44.28%	51.43%	48.57%
SCFHP	53.99%	46.01%	51.84%	48.16%

Table 38—Child Respondent Analysis: Race

↑   Indicates the respondent percentage is statistically significantly higher than the sample frame percentage.

↓   Indicates the respondent percentage is statistically significantly lower than the sample frame percentage.

Some percentages may not total 100% due to rounding.

Comparisons are based on the 95 percent confidence interval of the respondent percentage.

An "S" indicates fewer than 11 respondents exist in the numerator of this demographic category. HSAG suppressed displaying the number in this report to satisfy the DHCS DDG V2.2 de-identification standard.

Medi-Cal Population	Child Respondents				Child Sample Frame			
	White	**Black**	**Asian**	**Other**	**White**	**Black**	**Asian**	**Other**
AAH	5.02%	7.34% ↓	24.32% ↑	63.32%	5.37%	16.79%	13.93%	63.91%
Anthem Blue Cross	14.81% ↓	3.42% ↓	10.93% ↑	70.84% ↑	20.07%	8.53%	7.64%	63.76%
Blue Shield Promise	18.13%	5.14%	8.46% ↑	68.28%	17.42%	6.52%	4.58%	71.48%
CalOptima	S	S	17.24% ↑	69.83%	13.16%	2.10%	11.47%	73.26%
CalViva	10.08%	2.96% ↓	6.32%	80.63% ↑	11.66%	5.76%	7.67%	74.91%
CenCal	53.67%	S	S	S	53.64%	0.86%	0.92%	44.58%
CCAH	17.63%	S	S	78.64%	17.73%	2.14%	2.61%	77.52%
CHG	S	S	9.34% ↑	76.12%	11.96%	5.73%	4.49%	77.82%
CCHP	7.30% ↓	8.57% ↓	10.79% ↑	73.33% ↑	11.26%	15.83%	6.91%	66.00%
FFS	28.76%	13.71% ↓	3.15%	54.38%	26.33%	18.07%	2.75%	52.85%
GCHP	12.03% ↓	S	4.77% ↑	S	15.07%	1.40%	1.86%	81.68%
Health Net	13.26%	3.91% ↓	9.78% ↑	73.04% ↑	16.21%	9.62%	5.58%	68.59%
HPSJ	20.16%	3.88% ↓	13.70% ↑	62.27%	24.03%	7.58%	10.06%	58.34%
HPSM	S	S	15.70% ↑	75.06% ↓	7.05%	2.08%	10.49%	80.38%

Medi-Cal Population	Child Respondents				Child Sample Frame			
	White	**Black**	**Asian**	**Other**	**White**	**Black**	**Asian**	**Other**
IEHP	24.31%	6.94% ↓	7.64% ↑	61.11%	24.22%	10.89%	3.15%	61.73%
Kaiser	23.23%	6.19% ↓	15.71% ↑	54.87%	23.29%	15.51%	9.79%	51.41%
KHS	21.80% ↓	S	S	73.18% ↑	26.63%	7.25%	2.37%	63.75%
L.A. Care	12.64%	3.92% ↓	8.28% ↑	75.16% ↑	14.85%	11.64%	5.02%	68.48%
Molina	12.39% ↓	S	S	78.67% ↑	17.85%	8.88%	4.37%	68.90%
Partnership	33.75%	3.97% ↓	7.44% ↑	54.84%	34.34%	7.24%	4.28%	54.14%
SFHP	S	3.32% ↓	32.65% ↑	S	3.82%	9.21%	25.79%	61.18%
SCFHP	S	S	25.97% ↑	67.68% ↓	6.73%	3.03%	15.75%	74.49%

Table 39—Child Respondent Analysis: Ethnicity

↑ Indicates the respondent percentage is statistically significantly higher than the sample frame percentage.

↓ Indicates the respondent percentage is statistically significantly lower than the sample frame percentage.

Some percentages may not total 100% due to rounding.

Comparisons are based on the 95 percent confidence interval of the respondent percentage.

Medi-Cal Population	Child Respondents		Child Sample Frame	
	Hispanic	**Non-Hispanic**	**Hispanic**	**Non-Hispanic**
AAH	46.33%	53.67%	45.21%	54.79%
Anthem Blue Cross	59.23% ↑	40.77% ↓	51.17%	48.83%
Blue Shield Promise	50.45%	49.55%	53.99%	46.01%
CalOptima	62.64%	37.36%	64.72%	35.28%
CalViva	79.05% ↑	20.95% ↓	71.12%	28.88%
CenCal	36.66%	63.34%	39.06%	60.94%
CCAH	84.41%	15.59%	82.40%	17.60%

Medi-Cal Population	Child Respondents		Child Sample Frame	
	Hispanic	**Non-Hispanic**	**Hispanic**	**Non-Hispanic**
CHG	63.32%	36.68%	62.72%	37.28%
CCHP	59.68% ↑	40.32% ↓	50.02%	49.98%
FFS	52.36%	47.64%	48.06%	51.94%
GCHP	71.99%	28.01%	72.40%	27.60%
Health Net	68.48%	31.52%	67.91%	32.09%
HPSJ	68.22% ↑	31.78% ↓	62.27%	37.73%
HPSM	60.28%	39.72%	63.88%	36.12%
IEHP	65.28%	34.72%	67.09%	32.91%
Kaiser	31.42%	68.58%	32.68%	67.32%
KHS	74.69% ↑	25.31% ↓	69.04%	30.96%
L.A. Care	75.60%	24.40%	71.93%	28.07%
Molina	64.84% ↑	35.16% ↓	58.39%	41.61%
Partnership	45.66%	54.34%	44.77%	55.23%
SFHP	41.07%	58.93%	38.21%	61.79%
SCFHP	58.29% ↓	41.71% ↑	65.32%	34.68%

HSAG identified statistically significant results for age, gender, race, and ethnicity for the adult population. Table 40 shows the number of MCPs within each reportable demographic category that had a statistically significantly higher or lower respondent percentage compared to the sample frame percentage.

Table 40—Adult Respondent Analysis: Summary of Results for MCPs

For gender and ethnicity, if the respondent percentage is significantly higher for one demographic category, then the respondent percentage for the other demographic category has to be significantly lower.

	Number of MCPs with a Reportable Demographic Category	
	Significantly Higher Respondent Percentage	**Significantly Lower Respondent Percentage**
Age		
18 to 34	0 (Out of 22)	21 (Out of 22)
35 to 44	0 (Out of 19)	9 (Out of 19)
45 to 54	8 (Out of 21)	0 (Out of 21)
55 to 64	21 (Out of 21)	0 (Out of 21)
65 or older	16 (Out of 20)	0 (Out of 20)
Gender		
Male	0 (Out of 22)	9 (Out of 22)
Female	9 (Out of 22)	0 (Out of 22)
Race		
White	3 (Out of 19)	0 (Out of 19)
Black	0 (Out of 7)	2 (Out of 7)
Asian	3 (Out of 10)	0 (Out of 10)
Other	0 (Out of 22)	2 (Out of 22)
Ethnicity		
Hispanic	0 (Out of 22)	3 (Out of 22)
Non-Hispanic	3 (Out of 22)	0 (Out of 22)

HSAG identified statistically significant results for age, gender, race, and ethnicity for the child population. Table 41 shows the number of MCPs within each reportable demographic category that had a statistically significantly higher or lower respondent percentage compared to the sample frame percentage.

Table 41—Child Respondent Analysis: Summary of Results for MCPs

For gender and ethnicity, if the respondent percentage is significantly higher for one demographic category, then the respondent percentage for the other demographic category has to be significantly lower.

	Number of MCPs with a Reportable Demographic Category	
	Significantly Higher Respondent Percentage	**Significantly Lower Respondent Percentage**
Age		
Less than 1	1 (Out of 10)	0 (Out of 10)
1 to 3	0 (Out of 13)	5 (Out of 13)
4 to 7	0 (Out of 18)	5 (Out of 18)
8 to 12	0 (Out of 21)	7 (Out of 21)
13 to 17	16 (Out of 21)	0 (Out of 21)
Gender		
Male	2 (Out of 21)	0 (Out of 21)
Female	0 (Out of 21)	2 (Out of 21)
Race		
White	0 (Out of 16)	5 (Out of 16)
Black	0 (Out of 12)	11 (Out of 12)
Asian	16 (Out of 17)	0 (Out of 17)
Other	7 (Out of 18)	2 (Out of 18)
Ethnicity		
Hispanic	6 (Out of 21)	1 (Out of 21)
Non-Hispanic	1 (Out of 21)	6 (Out of 21)

APPENDIX B: SURVEY INSTRUMENTS

The survey instruments DHCS selected were the CAHPS 5.1 Adult and Child Medicaid Health Plan Surveys with the HEDIS supplemental item set. This section provides copies of the survey instruments.

Your privacy is protected. The research staff will not share your personal information with anyone without your OK. Personally identifiable information will not be made public and will only be released in accordance with federal laws and regulations.

You may choose to answer this survey or not. If you choose not to, this will not affect the benefits you get. You may notice a number on the cover of this survey. This number is ONLY used to let us know if you returned your survey so we don't have to send you reminders.

If you want to know more about this study, please call 1-888-248-5294.

SURVEY INSTRUCTIONS

➤ **Please be sure to fill the response circle <u>completely</u>. Use only <u>black or blue ink</u> or <u>dark pencil</u> to complete the survey.**

Correct Mark	●	**Incorrect Marks**		

➤ **You are sometimes told to skip over some questions in the survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:**

● **Yes** ➔ *Go to Question 1*
○ **No**

⬇ **START HERE** ⬇

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1. **Our records show that you are now in [HEALTH PLAN NAME]. Is that right?**

   ○ Yes ➔ *Go to Question 3*
   ○ No

2. **What is the name of your health plan? (Please print)**

   _____

YOUR HEALTH CARE IN THE LAST 6 MONTHS

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

3. **In the last 6 months, did you have an illness, injury, or condition that <u>needed care right away</u>?**

   ○ Yes
   ○ No ➜ *Go to Question 5*

4. **In the last 6 months, when you <u>needed care right away</u>, how often did you get care as soon as you needed?**

   ○ Never
   ○ Sometimes
   ○ Usually
   ○ Always

5. **In the last 6 months, did you make any in person, phone, or video appointments for a <u>check-up or routine care</u>?**

   ○ Yes
   ○ No ➜ *Go to Question 7*

6. **In the last 6 months, how often did you get an appointment for a <u>check-up or routine care</u> as soon as you needed?**

   ○ Never
   ○ Sometimes
   ○ Usually
   ○ Always

7. **In the last 6 months, <u>not</u> counting the times you went to an emergency room, how many times did you get health care for yourself in person, by phone, or by video?**

   ○ None ➜ *Go to Question 10*
   ○ 1 time
   ○ 2
   ○ 3
   ○ 4
   ○ 5 to 9
   ○ 10 or more times

8. **Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 6 months?**

   ○ 0 ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ 6 ○ 7 ○ 8 ○ 9 ○ 10

   Worst Health Care Possible   Best Health Care Possible

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

   ○ Never
   ○ Sometimes
   ○ Usually
   ○ Always

YOUR PERSONAL DOCTOR

10. **A personal doctor is the one you would talk to if you need a check-up, want advice about a health problem, or get sick or hurt. Do you have a personal doctor?**

    ○ Yes
    ○ No ➜ *Go to Question 19*

11. In the last 6 months, how many times did you have an in person, phone, or video visit with your personal doctor about your health?

○ None ➜ *Go to Question 18*
○ 1 time
○ 2
○ 3
○ 4
○ 5 to 9
○ 10 or more times

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

○ Never
○ Sometimes
○ Usually
○ Always

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

○ Never
○ Sometimes
○ Usually
○ Always

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

○ Never
○ Sometimes
○ Usually
○ Always

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

○ Never
○ Sometimes
○ Usually
○ Always

16. In the last 6 months, did you get care from a doctor or other health provider besides your personal doctor?

○ Yes
○ No ➜ *Go to Question 18*

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

○ Never
○ Sometimes
○ Usually
○ Always

18. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?

○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○
0 1 2 3 4 5 6 7 8 9 10
Worst   Best
Personal Doctor   Personal Doctor
Possible   Possible

GETTING HEALTH CARE FROM SPECIALISTS

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

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

    ○ Yes
    ○ No ➜ *Go to Question 23*

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

    ○ Never
    ○ Sometimes
    ○ Usually
    ○ Always

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

    ○ None ➜ *Go to Question 23*
    ○ 1 specialist
    ○ 2
    ○ 3
    ○ 4
    ○ 5 or more specialists

22. **We want to know your rating of the specialist you talked to most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?**

    ○ 0 ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ 6 ○ 7 ○ 8 ○ 9 ○ 10
    Worst Specialist Possible   Best Specialist Possible

YOUR HEALTH PLAN

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

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

    ○ Yes
    ○ No ➜ *Go to Question 26*

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

    ○ Never
    ○ Sometimes
    ○ Usually
    ○ Always

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

    ○ Never
    ○ Sometimes
    ○ Usually
    ○ Always

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

○ Yes
○ No ➜ *Go to Question 28*

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

○ Never
○ Sometimes
○ Usually
○ Always

28. Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your health plan?

○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○
0 1 2 3 4 5 6 7 8 9 10
Worst   Best
Health Plan   Health Plan
Possible   Possible

ABOUT YOU

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

○ Excellent
○ Very Good
○ Good
○ Fair
○ Poor

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

○ Excellent
○ Very Good
○ Good
○ Fair
○ Poor

31. Do you now smoke cigarettes or use tobacco every day, some days, or not at all?

○ Every day
○ Some days
○ Not at all ➜ *Go to Question 35*
○ Don't know ➜ *Go to Question 35*

32. In the last 6 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan?

○ Never
○ Sometimes
○ Usually
○ Always

33. In the last 6 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication.

○ Never
○ Sometimes
○ Usually
○ Always

34. In the last 6 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program.

○ Never
○ Sometimes
○ Usually
○ Always

35. What is your age?

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

36. Are you male or female?

○ Male
○ Female

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

○ 8th grade or less
○ Some high school, but did not graduate
○ High school graduate or GED
○ Some college or 2-year degree
○ 4-year college graduate
○ More than 4-year college degree

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

○ Yes, Hispanic or Latino
○ No, Not Hispanic or Latino

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

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

Thanks again for taking the time to complete this survey! Your answers are greatly appreciated.

When you are done, please use the enclosed prepaid envelope to mail the survey to:

DataStat
3975 Research Park Drive
Ann Arbor, MI 48108

SURVEY INSTRUCTIONS

➤ **Please be sure to fill the response circle <u>completely</u>. Use only <u>black or blue ink</u> or <u>dark pencil</u> to complete the survey.**

Correct Mark	●	**Incorrect Marks**	⊘	⊘	🐷

➤ **You are sometimes told to skip over some questions in the survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:**

● **Yes** ➜ *Go to Question 1*
○ **No**

⬇ **START HERE** ⬇

Please answer the questions for the child named in the letter that was sent with this survey. Please do not answer for any other children.

1. **Our records show that your child is now in [HEALTH PLAN NAME/STATE MEDICAID PROGRAM NAME]. Is that right?**

   ○ Yes ➜ *Go to Question 3*
   ○ No

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

   _____

YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS

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

3. **In the last 6 months, did your child have an illness, injury, or condition that <u>needed care right away</u>?**

   ○ Yes
   ○ No ➜ *Go to Question 5*

4. **In the last 6 months, when your child <u>needed care right away</u>, how often did your child get care as soon as he or she needed?**

   ○ Never
   ○ Sometimes
   ○ Usually
   ○ Always

5. **In the last 6 months, did you make any in person, phone, or video appointments for a <u>check-up or routine care</u> for your child?**

   ○ Yes
   ○ No ➜ *Go to Question 7*

6. **In the last 6 months, how often did you get an appointment for a <u>check-up or routine care</u> for your child as soon as your child needed?**

   ○ Never
   ○ Sometimes
   ○ Usually
   ○ Always

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

   ○ None ➜ *Go to Question 10*
   ○ 1 time
   ○ 2
   ○ 3
   ○ 4
   ○ 5 to 9
   ○ 10 or more times

8. **Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your child's health care in the last 6 months?**

   ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○
   0 1 2 3 4 5 6 7 8 9 10
   Worst   Best
   Health Care   Health Care
   Possible   Possible

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

   ○ Never
   ○ Sometimes
   ○ Usually
   ○ Always

YOUR CHILD'S PERSONAL DOCTOR

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

    ○ Yes
    ○ No ➜ *Go to Question 22*

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

○ None ➔ *Go to Question 21*
○ 1 time
○ 2
○ 3
○ 4
○ 5 to 9
○ 10 or more times

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

○ Never
○ Sometimes
○ Usually
○ Always

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

○ Never
○ Sometimes
○ Usually
○ Always

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

○ Never
○ Sometimes
○ Usually
○ Always

15. Is <u>your child</u> able to talk with doctors about his or her health care?

○ Yes
○ No ➔ *Go to Question 17*

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

○ Never
○ Sometimes
○ Usually
○ Always

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

○ Never
○ Sometimes
○ Usually
○ Always

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

○ Yes
○ No

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

○ Yes
○ No ➔ *Go to Question 21*

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

○ Never
○ Sometimes
○ Usually
○ Always

21. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your child's personal doctor?

○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○
0 1 2 3 4 5 6 7 8 9 10
Worst   Best
Personal Doctor   Personal Doctor
Possible   Possible

GETTING HEALTH CARE FROM SPECIALISTS

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

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

○ Yes
○ No ➔ *Go to Question 26*

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

○ Never
○ Sometimes
○ Usually
○ Always

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

○ None ➔ *Go to Question 26*
○ 1 specialist
○ 2
○ 3
○ 4
○ 5 or more specialists

25. We want to know your rating of the specialist your child talked to most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○
0 1 2 3 4 5 6 7 8 9 10
Worst   Best
Specialist   Specialist
Possible   Possible

YOUR CHILD'S HEALTH PLAN

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

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

○ Yes
○ No ➔ *Go to Question 29*

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

○ Never
○ Sometimes
○ Usually
○ Always

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

○ Never
○ Sometimes
○ Usually
○ Always

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

○ Yes
○ No ➜ *Go to Question 31*

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

○ Never
○ Sometimes
○ Usually
○ Always

31. Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your child's health plan?

○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○
0 1 2 3 4 5 6 7 8 9 10
Worst   Best
Health Plan   Health Plan
Possible   Possible

ABOUT YOUR CHILD AND YOU

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

○ Excellent
○ Very good
○ Good
○ Fair
○ Poor

33. In general, how would you rate your child's overall <u>mental or emotional</u> health?

○ Excellent
○ Very good
○ Good
○ Fair
○ Poor

34. What is <u>your child's</u> age?

○ Less than 1 year old

☐☐ YEARS OLD (write in)

35. Is your child male or female?

○ Male
○ Female

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

○ Yes, Hispanic or Latino
○ No, not Hispanic or Latino

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

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

38. What is <u>your</u> age?

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

39. Are you male or female?

○ Male
○ Female

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

○ 8th grade or less
○ Some high school, but did not graduate
○ High school graduate or GED
○ Some college or 2-year degree
○ 4-year college graduate
○ More than 4-year college degree

41. How are you related to the child?

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

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