

# 2016 Medicaid Child CAHPS® 5.0H

## At-A-Glance Report



Health Partners Plans

Project Number(s): 5109175

Current data as of: 06/16/2016

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## 1. Executive Summary

SPH Analytics, a National Committee for Quality Assurance (NCQA) Certified Healthcare Effectiveness Data and Information Set (HEDIS®)<sup>1</sup> Survey Vendor, was selected by Health Partners Plans to conduct its 2016 Consumer Assessment of Healthcare Providers and Systems (CAHPS®)<sup>2</sup> 5.0H Medicaid Child Member Satisfaction Survey. This At-A-Glance report is designed to give you a summary view of those CAHPS® results.<sup>3</sup> SPH Analytics collected 373 valid surveys from the eligible member population, yielding a response rate of 22.5%.<sup>4</sup>

### CAHPS® 5.0H Medicaid Child Survey

Topics included in the CAHPS® 5.0H Medicaid Child Survey are:

- Getting Needed Care
- Getting Care Quickly
- How Well Doctors Communicate
- Customer Service
- Shared Decision Making
- Health Promotion and Education
- Coordination of Care
- Ease of Filling out Forms
- Health Care, Provider, and Plan Ratings

Throughout this report, results are shown as “Summary Rates.” Summary Rates represent the percentage of respondents who answer in the most positive way, as defined by NCQA.

The *Getting Needed Care* composite measures respondent experiences when attempting to get care, tests, or treatment needed by his or her child and appointments for his or her child to see specialists as soon as needed in the last six months (Questions 14 and 28). The Summary Rate represents the percentage of respondents reporting “Always” or “Usually.”

The *Getting Care Quickly* composite measures respondent experiences with receiving care (when needed care right away) and getting appointments for check-ups or routine care for his or her child as soon as needed (Questions 4 and 6). The Summary Rate represents the percentage of respondents indicating “Always” or “Usually.”

The *How Well Doctors Communicate* composite measures how well the child’s providers explain things about the child’s health and listen, spend enough time with, and show respect for what respondents have to say (Questions 17-19 & 22). The Summary Rate represents the percentage of respondents reporting “Always” or “Usually.”

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<sup>1</sup> HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

<sup>2</sup> CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

<sup>3</sup> The source for data contained in this publication is Quality Compass® Public Report 2015 and is used with the permission of the National Committee for Quality Assurance (NCQA). Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass is a registered trademark of NCQA.

<sup>4</sup> Please note that the CAHPS® survey is eligible to be conducted from January through May 2016.

The *Customer Service* composite measures respondent experiences with getting information from as well as treatment by customer service staff in the last six months (Questions 32 and 33). The Summary Rate represents the percentage of respondent answering “Always” or “Usually.”

The *Shared Decision Making* composite measures if the child's doctor or health provider spoke with the respondent about reasons one might *want* his or her child to take a medicine and the reasons one might *not* want his or her child to take a medicine (Questions 10 and 11). Additionally, the composite gauges if the child's doctor or health provider asked which choice the respondent thought was best for his or her child when talking about starting or stopping prescription medications (Question 12). The Summary Rate represents the percentage of respondents answering “Yes.”

The *Health Promotion and Education* measure evaluates respondent experiences with doctor or health provider discussions of specific things to do to prevent the illness of his or her child in the last six months (Question 8). The Summary Rate represents the percentage of respondents reporting “Yes.”

The *Coordination of Care* measure evaluates respondent perceptions that the child's personal doctor seemed informed and up-to-date about the care his or her child received from other doctors and health providers in the last six months (Question 25). The Summary Rate represents the percentage of respondents answering “Always” or “Usually.”

The *Ease of Filling out Forms* attribute evaluates how often forms received from the child's health plan were easy to fill out (Question 35). The Summary Rate represents the percentage of respondents indicating “Always” or “Usually.”<sup>5</sup>

There are four questions with responses scaled 0 to 10 in the CAHPS® 5.0H survey: *Rating of Health Care* (Q13), *Rating of Personal Doctor* (Q26), *Rating of Specialist* (Q30), and *Rating of Health Plan* (Q36), where zero represents “worst possible” and ten represents “best possible.” The Summary Rate represents the percentage of respondents who rated the question an “8,” “9,” or “10.”

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<sup>5</sup> Please note that members who responded “No” to Q34 are included in “Always” of Q35, per NCQA HEDIS 2016 guidelines.

### Three-Point Scores

For accreditation assessment purposes, NCQA converts certain CAHPS® 5.0H results into Three-Point Scores. In Three-Point scoring, a value of 1, 2, or 3 is assigned to each question response category, and a numeric average is computed based upon the valid responses for each question. The four rating questions (*Health Plan, Health Care, Personal Doctor, and Specialist*), the Coordination of Care measure, and the following composites are evaluated: *Getting Needed Care, Getting Care Quickly, and Customer Service*.

“Your Three-Point Scores” represent your plan’s results. For comparison purposes, NCQA’s national benchmark (the 90th percentile) and national thresholds (the 75th, 50th, and 25th percentiles) are also provided for your review. Thresholds are based on HEDIS/CAHPS® benchmark data from other Medicaid Child Survey results.



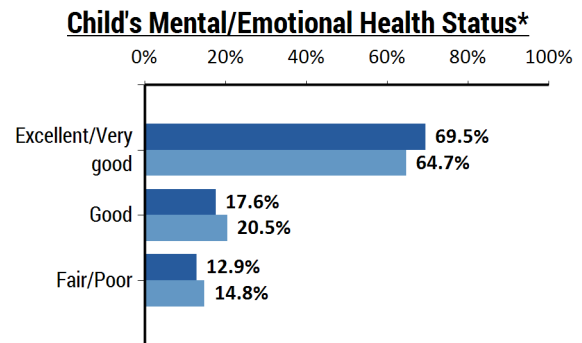
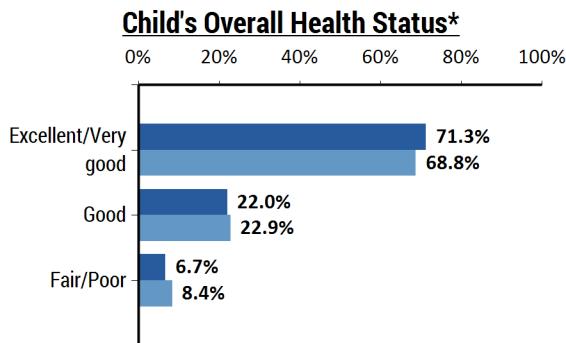
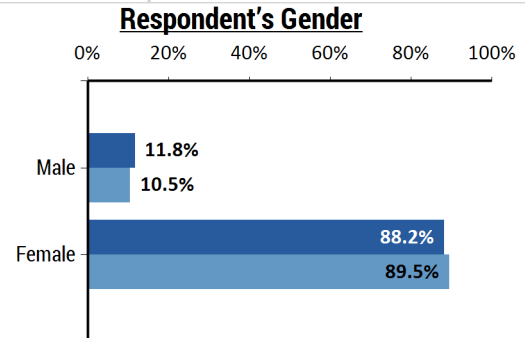
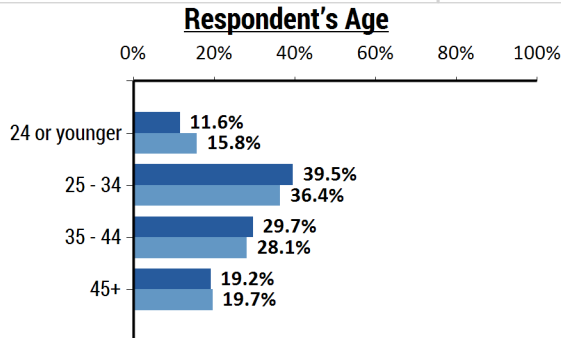
# Medicaid Child CAHPS // Profile of Survey Respondents

## Trend Comparison

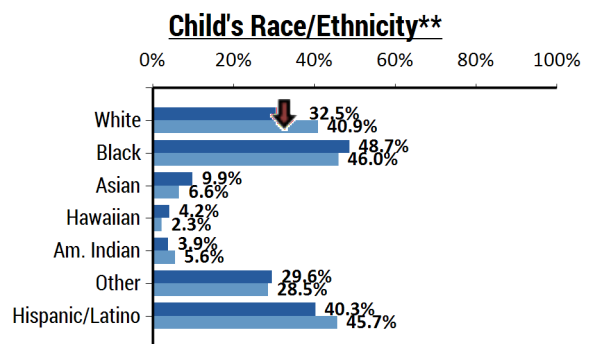
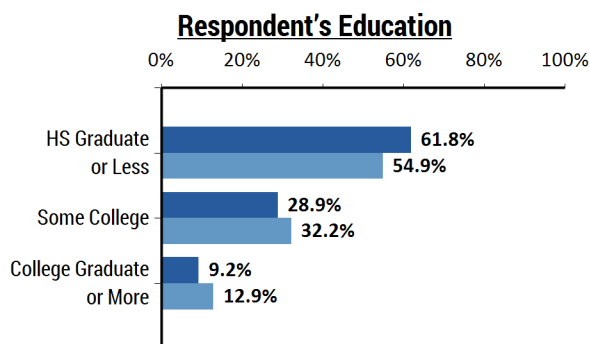
Health Partners Plans

2016 2015

Sample Size	Total Survey Returns	Response Rate
1733	373	22.5%



\* Child's Overall and Mental/Emotional Health Status are defined by survey respondent.



\*\* Race/Ethnicity figures will not equal 100% because they are separate questions.

Significance Testing - "↑" denotes the results that were found when hypothesis tests were conducted to determine if the percentage is higher for 2016 results when compared to 2015 results. "↓" denotes the results that were found when hypothesis tests were conducted to determine if the percentage is lower for 2016 results when compared to 2015 results. "Not Sig." results, which denotes that there was insufficient support to conclude that there was a significant difference between the percentages, and "Unable to Test" results, which denotes that there was insufficient sample size to conduct the statistical test, are not displayed. All significance testing is performed at the 95% significance level.



Composite/Attribute/Measure/Rating Item	Valid n	Your Plan Summary Rate *	2016 SPH Analytics Medicaid Child Book of Business**				
			Mean	25th	50th	75th	90th
<b>Getting Needed Care</b>		<b>79.4%</b>	<b>84.3%</b>	<b>81.6%</b>	<b>84.2%</b>	<b>87.5%</b>	<b>89.7%</b>
Q14. Ease of getting necessary care, tests, or treatment child needed	278	83.5%	88.7%	86.2%	89.6%	91.9%	93.7%
Q28. Getting child's appointments with specialists as soon as needed	81	75.3%	79.8%	75.3%	80.3%	83.5%	88.8%
<b>Getting Care Quickly</b>		<b>84.8%</b>	<b>88.9%</b>	<b>85.6%</b>	<b>89.3%</b>	<b>92.8%</b>	<b>94.4%</b>
Q4. Child got care as soon as needed when care was needed right away	116	88.8%	90.4%	87.8%	90.5%	94.3%	96.4%
Q6. Child got check-up/routine care appointment as soon as needed	288	80.9%	87.3%	84.6%	88.0%	90.9%	93.8%
<b>How Well Doctors Communicate</b>		<b>90.0%</b>	<b>93.3%</b>	<b>91.8%</b>	<b>93.2%</b>	<b>95.1%</b>	<b>96.5%</b>
Q17. Child's personal doctor explained things about health in an understandable way	258	90.7%	93.7%	91.8%	94.4%	95.6%	96.8%
Q18. Child's personal doctor listened carefully to you	258	93.0%	95.0%	93.2%	94.8%	96.4%	98.0%
Q19. Child's personal doctor showed respect for what you had to say	259	94.6%	95.8%	94.9%	95.6%	96.9%	98.5%
Q22. Child's personal doctor spent enough time with your child	258	81.8%	88.9%	85.2%	88.9%	92.1%	94.1%
<b>Customer Service</b>		<b>89.4%</b>	<b>88.5%</b>	<b>86.5%</b>	<b>88.8%</b>	<b>91.2%</b>	<b>92.8%</b>
Q32. Customer service provided information or help	156	84.6%	83.5%	81.2%	83.9%	87.0%	89.5%
Q33. Customer service treated member with courtesy and respect	154	94.2%	93.5%	92.0%	93.6%	95.6%	97.0%
<b>Shared Decision Making</b>		<b>79.6%</b>	<b>78.2%</b>	<b>75.9%</b>	<b>78.9%</b>	<b>81.5%</b>	<b>83.0%</b>
Q10. Doctor/health provider talked about reasons you might want your child to take a medicine	70	88.6%	91.5%	88.6%	92.2%	95.3%	97.4%
Q11. Doctor/health provider talked about reasons you might not want your child to take a medicine	69	68.1%	63.7%	60.0%	63.8%	68.5%	71.8%
Q12. Doctor/health provider asked you what you thought was best for your child when starting or stopping a prescription medicine	67	82.1%	79.4%	76.7%	79.8%	82.1%	86.1%
<b>Health Promotion and Education (Q8)</b>	<b>279</b>	<b>66.7%</b>	<b>69.8%</b>	<b>66.7%</b>	<b>69.6%</b>	<b>72.2%</b>	<b>74.5%</b>
<b>Coordination of Care (Q25)</b>	<b>90</b>	<b>80.0%</b>	<b>81.9%</b>	<b>79.0%</b>	<b>82.6%</b>	<b>85.3%</b>	<b>87.5%</b>
<b>Ease of Filling out Forms (Q35)</b>	<b>352</b>	<b>94.0%</b>	<b>94.7%</b>	<b>94.0%</b>	<b>95.1%</b>	<b>96.0%</b>	<b>96.6%</b>
<b>Rating Items (Summary Rate = 8 + 9 + 10)</b>							
<b>Rating of Health Care (Q13)</b>	<b>279</b>	<b>83.9%</b>	<b>85.6%</b>	<b>83.9%</b>	<b>86.4%</b>	<b>88.0%</b>	<b>89.7%</b>
<b>Rating of Personal Doctor (Q26)</b>	<b>308</b>	<b>85.1%</b>	<b>88.1%</b>	<b>86.7%</b>	<b>88.2%</b>	<b>90.2%</b>	<b>91.0%</b>
<b>Rating of Specialist (Q30)</b>	<b>74</b>	<b>79.7%</b>	<b>85.4%</b>	<b>82.7%</b>	<b>86.2%</b>	<b>88.7%</b>	<b>90.2%</b>
<b>Rating of Health Plan (Q36)</b>	<b>357</b>	<b>89.4%</b>	<b>84.6%</b>	<b>82.4%</b>	<b>84.8%</b>	<b>88.1%</b>	<b>91.2%</b>
<b>Rating Items (Summary Rate = 9 + 10)</b>							
<b>Rating of Health Care (Q13)</b>	<b>279</b>	<b>64.5%</b>	<b>67.7%</b>	<b>64.5%</b>	<b>68.2%</b>	<b>70.4%</b>	<b>74.0%</b>
<b>Rating of Personal Doctor (Q26)</b>	<b>308</b>	<b>68.8%</b>	<b>74.5%</b>	<b>72.7%</b>	<b>74.7%</b>	<b>77.3%</b>	<b>79.0%</b>
<b>Rating of Specialist (Q30)</b>	<b>74</b>	<b>55.4%</b>	<b>71.4%</b>	<b>67.7%</b>	<b>71.4%</b>	<b>75.7%</b>	<b>78.5%</b>
<b>Rating of Health Plan (Q36)</b>	<b>357</b>	<b>76.2%</b>	<b>69.0%</b>	<b>65.2%</b>	<b>68.8%</b>	<b>74.0%</b>	<b>77.6%</b>

\* Summary Rates are defined by NCQA in its HEDIS 2016 CAHPS® 5.0H guidelines and generally represent the most favorable response percentages.

\*\* The 2016 SPH Analytics Book of Business consists of 81 Medicaid Child (Non-CCC and CCC) samples that conducted surveys with SPHA in 2016 and submitted data to NCQA. See *Glossary of Terms* for more information.

Note: Members who responded "No" to Q34 are included in "Always" of Q35, per NCQA HEDIS 2016 Volume 3 guidelines.



Composite/Attribute/Measure/Rating Item	Valid n	Your Plan Summary Rate *	Benchmarks		Significance Testing***	
			2016 SPH Analytics BoB**	2015 Quality Compass® Public Report**	To SPH Analytics BoB	To Quality Compass®
<b>Getting Needed Care</b>		<b>79.4%</b>	<b>84.3%</b>	<b>84.7%</b>	<b>Below</b>	<b>Below</b>
Q14. Ease of getting necessary care, tests, or treatment child needed	278	83.5%	88.7%	89.1%	Below	Below
Q28. Getting child's appointments with specialists as soon as needed	81	75.3%	79.8%	81.0%	Not sig.	Not sig.
<b>Getting Care Quickly</b>		<b>84.8%</b>	<b>88.9%</b>	<b>89.0%</b>	<b>Below</b>	<b>Below</b>
Q4. Child got care as soon as needed when care was needed right away	116	88.8%	90.4%	90.4%	Not sig.	Not sig.
Q6. Child got check-up/routine care appointment as soon as needed	288	80.9%	87.3%	87.5%	Below	Below
<b>How Well Doctors Communicate</b>		<b>90.0%</b>	<b>93.3%</b>	<b>93.3%</b>	<b>Below</b>	<b>Below</b>
Q17. Child's personal doctor explained things about health in an understandable way	258	90.7%	93.7%	93.8%	Not sig.	Below
Q18. Child's personal doctor listened carefully to you	258	93.0%	95.0%	94.7%	Not sig.	Not sig.
Q19. Child's personal doctor showed respect for what you had to say	259	94.6%	95.8%	95.9%	Not sig.	Not sig.
Q22. Child's personal doctor spent enough time with your child	258	81.8%	88.9%	88.9%	Below	Below
<b>Customer Service</b>		<b>89.4%</b>	<b>88.5%</b>	<b>87.5%</b>	Not sig.	Not sig.
Q32. Customer service provided information or help	156	84.6%	83.5%	81.9%	Not sig.	Not sig.
Q33. Customer service treated member with courtesy and respect	154	94.2%	93.5%	93.2%	Not sig.	Not sig.
<b>Shared Decision Making</b>		<b>79.6%</b>	<b>78.2%</b>	<b>78.4%</b>	Not sig.	Not sig.
Q10. Doctor/health provider talked about reasons you might want your child to take a medicine	70	88.6%	91.5%	92.2%	Not sig.	Not sig.
Q11. Doctor/health provider talked about reasons you might not want your child to take a medicine	69	68.1%	63.7%	65.3%	Not sig.	Not sig.
Q12. Doctor/health provider asked you what you thought was best for your child when starting or stopping a prescription medicine	67	82.1%	79.4%	77.6%	Not sig.	Not sig.
<b>Health Promotion and Education (Q8)</b>	279	<b>66.7%</b>	<b>69.8%</b>	<b>71.2%</b>	Not sig.	Not sig.
<b>Coordination of Care (Q25)</b>	90	<b>80.0%</b>	<b>81.9%</b>	<b>82.3%</b>	Not sig.	Not sig.
<b>Ease of Filling out Forms (Q35)</b>	352	<b>94.0%</b>	<b>94.7%</b>	<b>95.4%</b>	Not sig.	Not sig.
<b>Rating Items (Summary Rate = 8 + 9 + 10)</b>						
<b>Rating of Health Care (Q13)</b>	279	<b>83.9%</b>	<b>85.6%</b>	<b>85.0%</b>	Not sig.	Not sig.
<b>Rating of Personal Doctor (Q26)</b>	308	<b>85.1%</b>	<b>88.1%</b>	<b>88.2%</b>	Not sig.	Not sig.
<b>Rating of Specialist (Q30)</b>	74	<b>79.7%</b>	<b>85.4%</b>	<b>85.0%</b>	Not sig.	Not sig.
<b>Rating of Health Plan (Q36)</b>	357	<b>89.4%</b>	<b>84.6%</b>	<b>84.4%</b>	<b>Above</b>	<b>Above</b>
<b>Rating Items (Summary Rate = 9 + 10)</b>						
<b>Rating of Health Care (Q13)</b>	279	<b>64.5%</b>	<b>67.7%</b>	<b>66.2%</b>	Not sig.	Not sig.
<b>Rating of Personal Doctor (Q26)</b>	308	<b>68.8%</b>	<b>74.5%</b>	<b>74.6%</b>	<b>Below</b>	<b>Below</b>
<b>Rating of Specialist (Q30)</b>	74	<b>55.4%</b>	<b>71.4%</b>	<b>70.9%</b>	<b>Below</b>	<b>Below</b>
<b>Rating of Health Plan (Q36)</b>	357	<b>76.2%</b>	<b>69.0%</b>	<b>68.5%</b>	<b>Above</b>	<b>Above</b>

\* Summary Rates are defined by NCQA in its HEDIS 2016 CAHPS® 5.0H guidelines and generally represent the most favorable response percentages.

\*\* The 2016 SPH Analytics Book of Business consists of 81 Medicaid Child (Non-CCC and CCC) samples that conducted surveys with SPH Analytics in 2016 and submitted data to NCQA. 2015 Quality Compass® Public Report is the mean summary rate from the Medicaid child plans (Non-CCC and CCC) who submitted to NCQA in 2015 (approximately 120 plan specific samples). See Glossary of Terms for more information.

\*\*\* Significance Testing - All significance testing is performed at the 95% significance level. "-" indicates "Unable to Test" due to a combination of low valid n and/or extreme Summary Rate. Significance testing of composites should be used with caution as a rough guideline, since the test procedure is approximate.

Note: Members who responded "No" to Q34 are included in "Always" of Q35, per NCQA HEDIS 2016 Volume 3 guidelines.



Composite/Rating Item	Global Proportions Response Percentages		
Composites	Never/ Sometimes	Usually	Always
Getting Needed Care (GNC)	20.6%	19.1%	60.3%
Getting Care Quickly (GCQ)	15.2%	16.5%	68.4%
How Well Doctors Communicate (HWDC)	10.0%	13.5%	76.6%
Customer Service (CS)	10.6%	20.6%	68.8%
Composites	No	Yes	
Shared Decision Making (SDM)	20.4%	79.6%	
Additional Measure	No	Yes	
Health Promotion and Education (HPE)	33.3%	66.7%	
Additional Measure	Never/ Sometimes	Usually	Always
Coordination of Care (CC)	20.0%	17.8%	62.2%
Rating Items	0 to 6	7 to 8	9 to 10
Rating of Health Care (Q13)	9.0%	26.5%	64.5%
Rating of Personal Doctor (Q26)	8.1%	23.1%	68.8%
Rating of Specialist (Q30)	6.8%	37.8%	55.4%
Rating of Health Plan (Q36)	5.6%	18.2%	76.2%

## Three-Point Scores: Accreditation

Composite/Rating Item	Your Three- Point Scores	Three-Point Scoring			
		HEDIS/CAHPS Percentiles*			
		25th	50th	75th	90th
Getting Needed Care (GNC)	2.3969	2.39	2.47	2.53	2.58
Getting Care Quickly (GCQ)	2.5324	2.54	2.61	2.66	2.69
Customer Service (CS)	2.5816	2.50	2.53	2.58	2.63
Rating of Health Care (Q13)	2.5556	2.49	2.52	2.57	2.59
Rating of Personal Doctor (Q26)	2.6071	2.58	2.62	2.65	2.69
Rating of Specialist (Q30)	2.4865	2.53	2.59	2.62	2.66
Rating of Health Plan (Q36)	2.7059	2.51	2.57	2.62	2.67

\* These benchmark percentiles are used to score health plans for accreditation year 2016. The source for the HEDIS/CAHPS® Measures is: NCQA>Programs>Accreditation>Policy Updates & Supporting Documents>Trending and Benchmarks>Benchmarks and Thresholds: 2016 Accreditation.



Composite/Attribute/Measure/Rating Item	Summary Rate Score Definition	2016		2015		Significance Testing**
		Valid n	Summary Rate*	Valid n	Summary Rate*	2015 versus 2016
Getting Needed Care	Always/Usually		79.4%		79.4%	Not sig.
Q14. Ease of getting necessary care, tests, or treatment child needed		278	83.5%	355	82.0%	Not sig.
Q28. Getting child's appointments with specialists as soon as needed		81	75.3%	91	76.9%	Not sig.
Getting Care Quickly	Always/Usually		84.8%		84.3%	Not sig.
Q4. Child got care as soon as needed when care was needed right away		116	88.8%	151	86.1%	Not sig.
Q6. Child got check-up/routine care appointment as soon as needed		288	80.9%	389	82.5%	Not sig.
How Well Doctors Communicate	Always/Usually		90.0%		91.1%	Not sig.
Q17. Child's personal doctor explained things about health in an understandable way		258	90.7%	304	91.4%	Not sig.
Q18. Child's personal doctor listened carefully to you		258	93.0%	302	92.1%	Not sig.
Q19. Child's personal doctor showed respect for what you had to say		259	94.6%	301	95.3%	Not sig.
Q22. Child's personal doctor spent enough time with your child		258	81.8%	294	85.4%	Not sig.
Customer Service	Always/Usually		89.4%		88.9%	Not sig.
Q32. Customer service provided information or help		156	84.6%	172	83.7%	Not sig.
Q33. Customer service treated member with courtesy and respect		154	94.2%	170	94.1%	Not sig.
Shared Decision Making	Yes		79.6%		72.5%	Not sig.
Q10. Doctor/health provider talked about reasons you might want your child to take a medicine		70	88.6%	85	87.1%	Not sig.
Q11. Doctor/health provider talked about reasons you might not want your child to take a medicine		69	68.1%	85	52.9%	Not sig.
Q12. Doctor/health provider asked you what you thought was best for your child when starting or stopping a prescription medicine		67	82.1%	84	77.4%	Not sig.
Health Promotion and Education (Q8)	Yes	279	66.7%	354	72.6%	Not sig.
Coordination of Care (Q25)	Always/Usually	90	80.0%	119	85.7%	Not sig.
Ease of Filling out Forms (Q35)		352	94.0%	429	94.9%	Not sig.
Rating Items (Summary Rate = 8 + 9 + 10)						
Rating of Health Care (Q13)	8 to 10	279	83.9%	359	87.7%	Not sig.
Rating of Personal Doctor (Q26)		308	85.1%	393	88.3%	Not sig.
Rating of Specialist (Q30)		74	79.7%	86	77.9%	Not sig.
Rating of Health Plan (Q36)		357	89.4%	443	88.3%	Not sig.
Rating Items (Summary Rate = 9 + 10)						
Rating of Health Care (Q13)	9 to 10	279	64.5%	359	70.5%	Not sig.
Rating of Personal Doctor (Q26)		308	68.8%	393	75.6%	Sig. decrease
Rating of Specialist (Q30)		74	55.4%	86	61.6%	Not sig.
Rating of Health Plan (Q36)		357	76.2%	443	74.9%	Not sig.

\* Summary Rates are defined by NCQA in its HEDIS 2016 CAHPS® 5.0H guidelines and generally represent the most favorable response percentages.

\*\* Significance Testing - "Sig. increase" denotes the results that were found when hypothesis tests were conducted to determine if the percentage is higher for 2016 results when compared to 2015 results. "Sig. decrease" denotes the results that were found when hypothesis tests were conducted to determine if the percentage is lower for 2016 results when compared to 2015 results. "Not sig." denotes that there was insufficient support to conclude that there was a significant difference between the percentages. "Unable to Test" denotes that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% significance level.

Note: Members who responded "No" to Q34 are included in "Always" of Q35, per NCQA HEDIS 2016 Volume 3 guidelines.

## 2. Glossary of Terms

**Attributes** are the questions that relate to a specific service area or composite as defined by NCQA.

**Composites** are the mean of the Summary Rates of attributes within a given service area as specified by NCQA.

**Global Proportions** are a breakout of response option results according to the Three-Point Score definition. See “Three-Point Score” below.

**Quality Compass 2015 (Medicaid Child – Public Report)** data benchmark is a collection of CAHPS® 5.0H mean summary ratings (120 samples) for those Medicaid Child plans (Non-CCC and CCC samples with at least 100 valid responses per question item) *allowing NCQA to use their data to be compiled into an aggregate, or national summary, without releasing their plan-level scores.*

**Rating** questions use a scale of 0 to 10 for assessing overall experience (*Health Plan, Health Care, Personal Doctor, and Specialist*) with zero being the worst possible and ten being the best possible.

**Significance test** is a test to determine if an observed difference is too large to have occurred by chance alone.

**Summary Rates** are single statistics generated for a survey question. In general, Summary Rates represent the percentage of respondents who chose the most favorable response options (“Always” and “Usually”; “Yes,” or “8,” “9”, and “10”).

**SPH Analytics Book of Business** (calculated on a plan-level) consists of 81 Medicaid child (Non-CCC and CCC) samples that conducted surveys with SPH Analytics in 2016, and submitted to NCQA.

**Three-Point Score** is the result of the process of assigning a value of 1, 2, or 3 to each question response category and then computing a numerical average based upon the valid responses for each question. The Three-Point values are assigned to question answer categories as follows:

Response Choice 1	Score Value
Never	1
Sometimes	1
Usually	2
Always	3

Response Choice 2	Score Value
No	1
Yes	3

Response Choice 3	Score Value
0 - 6	1
7 and 8	2
9 and 10	3