



# **MY 2023 CAHPS® MEDICAID ADULT 5.1H SURVEY**

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## **HEALTH NET - MCAL (CENTENE CA)**

HEALTH NET - MCAL

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# OVERVIEW

Press Ganey (PG), a National Committee for Quality Assurance (NCQA) certified HEDIS® Survey Vendor, was selected by Health Net - MCAL to conduct its MY 2023 CAHPS® 5.1H Medicaid Adult Survey. NCQA requires health plans to submit CAHPS survey results in compliance with HEDIS® accreditation requirements.

**SURVEY OBJECTIVE** The overall objective of the CAHPS® study is to capture accurate and complete information about consumer-reported experiences with health care. Specifically, the survey aims to measure how well plans are meeting their members' expectations and goals; to determine which areas of service have the greatest effect on members' overall satisfaction; and to identify areas of opportunity for improvement, which can aid plans in increasing the quality of provided care.

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

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

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

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

# METHODOLOGY

## DATA COLLECTION

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



## QUALIFIED RESPONDENTS

- Included beneficiaries who were...
- 18 years and older (as of December 31<sup>st</sup> of the measurement year)
  - Continuously enrolled in the plan for at least five of the last six months of the measurement year

## 2024 RESPONSE RATE CALCULATION

325 (Completed)

4185 (Sample) - 55 (Ineligible)

=

325

4130

=

7.9%

## COMPLETES - MODALITY BY LANGUAGE

Language	Mail	Phone	Internet	Internet Modes			Total
				QR Code	Email	URL	
English	99	53	32	16	7	9	184
Spanish	81	43	17	11	0	6	141
Total	180	96	49	27	7	15	325

Total Number of Undeliverables: 314

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

## RESPONSE RATE TRENDING

		2022	2023	2024
Completed	SUBTOTAL	304	340	325
	Does not Meet Eligibility Criteria (01)	11	7	36
Ineligible	Language Barrier (03)	0	0	12
	Mentally/Physically Incapacitated (04)	0	0	5
	Deceased (05)	0	0	2
	SUBTOTAL	11	7	55
Non-response	Break-off/Incomplete (02)	6	17	37
	Refusal (06)	10	1	64
	Maximum Attempts Made (07)	3854	3820	3704
	Added to DNC List (08)	0	0	0
	SUBTOTAL	3870	3838	3805
Total Sample		4185	4185	4185
Oversampling %		210.0%	210.0%	210.0%
Response Rate		7.3%	8.1%	7.9%
PG Response Rate		12.2%	11.5%	11.1%

# INDUSTRY TRENDS

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- Health Net - MCAL

# PG BOOK OF BUSINESS TRENDS

MEDICAID ADULT

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

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

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

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

Increase of 1% or greater since 2023

Decrease of 1% or greater since 2023

# EXECUTIVE SUMMARY

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- Health Net - MCAL

# OVERVIEW OF TERMS

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

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

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

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

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

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

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

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



# 2024 DASHBOARD

MEDICAID ADULT



325

Completed  
surveys

7.9%

Response Rate

**Stars:** PG **Estimated** NCQA  
Rating  
NA = Denominator < 100

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

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

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

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

**Health Plan Key Driver**

**Classification:** Details can be  
found in the KDA section.

Accreditation Measures

Rating of Health Plan ★★				
Rating of Health Plan	57.7%		15 <sup>th</sup>	---
Rating of Health Care ★★★				
Rating of Health Care	54.7%		28 <sup>th</sup>	Opportunity
Rating of Personal Doctor ★★★				
Rating of Personal Doctor	65.8%	↕	20 <sup>th</sup>	Opportunity
Advised to Quit Smoking: 2YR (NA)				
Advised to Quit Smoking: 2YR	64.1%		16 <sup>th</sup>	---

Other Measures

Rating of Specialist +				
Rating of Specialist +	67.2%		40 <sup>th</sup>	Wait
Coordination of Care +				
Coordination of Care +	78.9%		9 <sup>th</sup>	Wait
Customer Service +				
Composite	85.9%		11 <sup>th</sup>	---
Q24. Provided information or help	78.3%		8 <sup>th</sup>	Opportunity
Q25. Treated with courtesy and respect	93.6%		28 <sup>th</sup>	Opportunity

Getting Needed Care ★				
Composite	74.5%		6 <sup>th</sup>	---
Q9. Getting care, tests, or treatment	79.8%		13 <sup>th</sup>	Wait
Q20. Getting specialist appointment	69.3%		7 <sup>th</sup>	Wait
Getting Care Quickly ★★				
Composite	77.5%	↕	21 <sup>st</sup>	---
Q4. Getting urgent care	80.0%		26 <sup>th</sup>	Opportunity
Q6. Getting routine care	75.0%		21 <sup>st</sup>	Opportunity

Ease of Filling Out Forms +				
Ease of Filling Out Forms +	92.9%		15 <sup>th</sup>	Wait
How Well Doctors Communicate +				
Composite	92.2%	↑	28 <sup>th</sup>	---
Q12. Dr. explained things	92.2%		37 <sup>th</sup>	Wait
Q13. Dr. listened carefully	92.3%		28 <sup>th</sup>	Wait
Q14. Dr. showed respect	94.0%		34 <sup>th</sup>	Wait
Q15. Dr. spent enough time	90.4%		38 <sup>th</sup>	Wait

# ESTIMATED NCQA HEALTH INSURANCE PLAN RATINGS

MEDICAID ADULT

	SCORE DEFINITION	2024 BASE	2024 HPR SCORE*	HPR 4 STAR THRESHOLD	HPR PERCENTILE BAND	PG ESTIMATED RATING
PATIENT EXPERIENCE						2
GETTING CARE						1.5
Getting Needed Care	Usually or Always	152	74.5%	84.6%	<10 <sup>th</sup>	1
Getting Care Quickly	Usually or Always	133	77.5%	83.8%	10 <sup>th</sup>	2
SATISFACTION WITH PLAN PHYSICIANS						3
Rating of Personal Doctor	9 or 10	219	65.7%	71.1%	33 <sup>rd</sup>	3
SATISFACTION WITH PLAN AND PLAN SERVICES						2.5
Rating of Health Plan	9 or 10	305	57.7%	64.9%	10 <sup>th</sup>	2
Rating of Health Care	9 or 10	181	54.7%	58.7%	33 <sup>rd</sup>	3
TREATMENT						
Smoking Advice: <i>Rolling Average</i>	Sometimes, Usually or Always	64	64.1%	75.4%	10 <sup>th</sup>	NA

## EXPLANATION

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

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

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

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

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

### Notes:

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

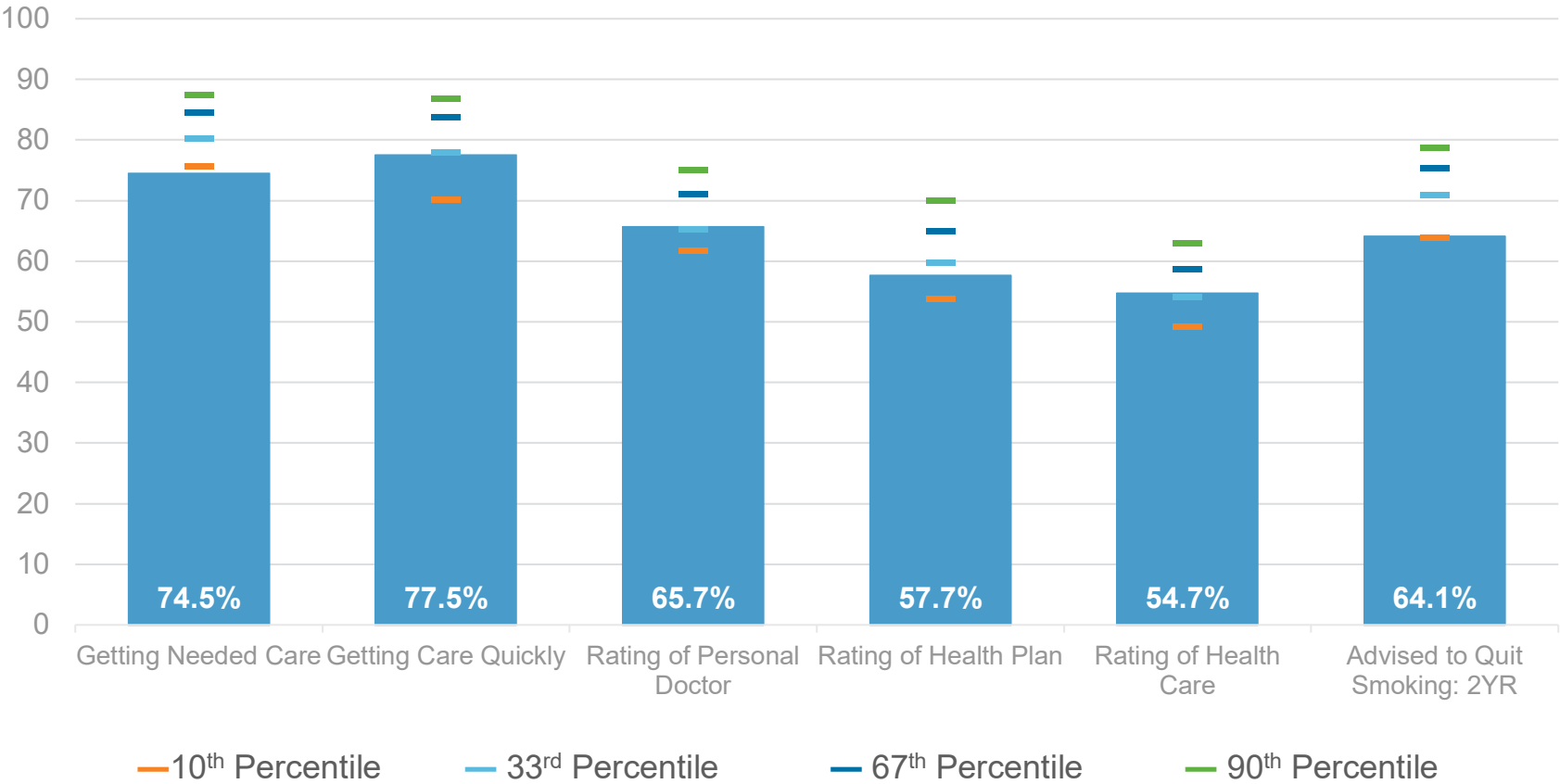
\*HPR scores are truncated to three digits (XX.X%) according to the NCQA calculation protocol for Health Plan Ratings. Please note that scores on this slide may differ slightly compared to scores found throughout the rest of the report.

# PERFORMANCE TO STAR CUT POINTS

MEDICAID ADULT

## COMPARISON TO QUALITY COMPASS CUT POINTS

The graph shows how your plan’s **Estimated Health Plan Rating (HPR) scores** used for accreditation ratings compare to the most recent Quality Compass thresholds published by NCQA (Fall 2023).



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

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

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

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

# MEASURE SUMMARY




MEDICAID ADULT

MEASURE	SUMMARY RATE		CHANGE	2024 PG BOOK OF BUSINESS BENCHMARK					PERCENTILE RANK	BoB SRS
	2023	2024		PERCENTILE DISTRIBUTION						
				0	20	40	60	80		
Health Plan Domain										
Rating of Health Plan <i>% 9 or 10</i>	55.8%	57.7%	1.9						15 <sup>th</sup>	63.1%
Getting Needed Care <i>% Usually or Always</i>	75.3%	74.5%	-0.8						6 <sup>th</sup>	82.1% ▼
Customer Service + <i>% Usually or Always</i>	88.1%	85.9%	-2.2						11 <sup>th</sup>	89.8%
Ease of Filling Out Forms + <i>% Usually or Always</i>	93.1%	92.9%	-0.2						15 <sup>th</sup>	94.8%
Health Care Domain										
Rating of Health Care <i>% 9 or 10</i>	49.5%	54.7%	5.2						28 <sup>th</sup>	57.3%
Getting Care Quickly <i>% Usually or Always</i>	75.3%	77.5%	2.2						21 <sup>st</sup>	81.2%
How Well Doctors Communicate + <i>% Usually or Always</i>	87.7%	92.2%	4.5						28 <sup>th</sup>	93.2%
Coordination of Care + <i>% Usually or Always</i>	85.7%	78.9%	-6.8						9 <sup>th</sup>	86.0%
Rating of Personal Doctor <i>% 9 or 10</i>	59.9%	65.8%	5.9						20 <sup>th</sup>	70.3%
Rating of Specialist + <i>% 9 or 10</i>	55.9%	67.2%	11.3						40 <sup>th</sup>	68.5%

**Significance Testing** Current score is significantly higher/lower than the 2023 score (↑/↓) or benchmark score (▲/▼).

# MEASURE SUMMARY

MEDICAID ADULT

MEASURE	SUMMARY RATE		CHANGE	2024 PG BOOK OF BUSINESS BENCHMARK						
	2023	2024		PERCENTILE DISTRIBUTION					PERCENTILE RANK	BoB SRS
				0	20	40	60	80		
Effectiveness of Care										
Advised to Quit Smoking: 2YR <i>% Sometimes, Usually, or Always</i>	61.0%	64.1%	3.1						16 <sup>th</sup>	73.7%
Discussing Cessation Meds: 2YR + <i>% Sometimes, Usually, or Always</i>	37.2%	36.9%	-0.3						9 <sup>th</sup>	53.4% ▼
Discussing Cessation Strategies: 2YR + <i>% Sometimes, Usually, or Always</i>	28.6%	32.8%	4.2						7 <sup>th</sup>	47.1% ▼

**Significance Testing** Current score is significantly higher/lower than the 2023 score (↑/↓) or benchmark score (▲/▼).

# HEALTH EQUITY







## MEDICAID ADULT

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

Accreditation Measure  
Other Measure

Group is performing...

- Above the plan score by 5 or more points
- Above the plan score
- Below the plan score
- Below the plan score by 5 or more points
- Above/below plan score but has low base (<30)

			Rating of Health Plan		Rating of Health Care		Getting Needed Care		Getting Care Quickly		Rating of Personal Doctor		Rating of Specialist +	
			SRS	△	SRS	△	SRS	△	SRS	△	SRS	△	SRS	△
Demographic	Category	Total	57.7%		54.7%		74.5%		77.5%		65.8%		67.2%	
 Gender	Male	n = 125		-3%		-3%		-8%		2%		-3%		-6%
	Female	n = 194		2%		3%		5%		-1%		3%		3%
 Age	18 – 34	n = 73		-2%		-8%		-3%		-19%		-4%		7%
	35 – 44	n = 39		-6%		-5%		-17%		0%		-11%		-12%
	45 – 54	n = 50		11%		17%		10%		10%		7%		23%
	55 or older	n = 154		-2%		0%		1%		3%		2%		-6%
 Overall Health	Excellent/Very Good	n = 89		15%		13%		6%		9%		10%		15%
	Good	n = 129		-12%		-8%		-4%		-4%		-9%		-12%
	Fair/Poor	n = 102		1%		1%		2%		-1%		3%		1%
 Mental Health	Excellent/Very Good	n = 124		8%		0%		10%		8%		9%		15%
	Good	n = 106		-7%		1%		1%		-2%		-4%		-8%
	Fair/Poor	n = 89		-4%		0%		-10%		-5%		-7%		-10%
 Education	HS Grad or less	n = 190		5%		6%		1%		-2%		3%		0%
	Some college or more	n = 106		-7%		-8%		-3%		1%		-4%		2%
 Race/ Ethnicity	White	n = 120		-3%		-2%		1%		3%		-1%		-3%
	Black/African-American	n = 22		6%		18%		3%		-3%		-8%		3%
	Asian	n = 46		-15%		-13%		-19%		-18%		-3%		6%
	Native Hawaiian/Pacific Islander	n = 5		2%		12%		-8%		23%		9%		-1%
	American Indian or Alaska Native	n = 6		2%		-30%		-12%		-11%		1%		33%
	Other	n = 115		6%		3%		5%		-3%		3%		5%
	Hispanic/Latino	n = 195		8%		9%		7%		5%		6%		2%

# HEALTH EQUITY

## MEDICAID ADULT

Group is performing...

Above the plan score by 5 or more points

Above the plan score

Below the plan score







Below the plan score by 5 or more points

Above/below plan score but has low base (<30)

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

Accreditation Measure

Other Measure

			Coordination of Care +	Customer Service +	How Well Doctors Communicate +	Ease of Filling Out Forms +
			SRS	SRS	SRS	SRS
			78.9%	85.9%	92.2%	92.9%
Demographic	Category	Total				
 Gender	Male	n = 125				
	Female	n = 194				
 Age	18 – 34	n = 73				
	35 – 44	n = 39				
	45 – 54	n = 50				
	55 or older	n = 154				
 Overall Health	Excellent/Very Good	n = 89				
	Good	n = 129				
	Fair/Poor	n = 102				
 Mental Health	Excellent/Very Good	n = 124				
	Good	n = 106				
	Fair/Poor	n = 89				
 Education	HS Grad or less	n = 190				
	Some college or more	n = 106				
 Race/ Ethnicity	White	n = 120				
	Black/African-American	n = 22				
	Asian	n = 46				
	Native Hawaiian/Pacific Islander	n = 5				
	American Indian or Alaska Native	n = 6				
	Other	n = 115				
	Hispanic/Latino	n = 195				

# MEASURE SUMMARY

MEDICAID ADULT

## TOP THREE Performing Measures

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

MEASURE	2024 Valid n	PLAN SUMMARY RATE SCORE			2023 QC			2024 PG BoB		
		2023	2024	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Rating of Specialist + (% 9 or 10)	119	55.9%	67.2%	11.3	66.2%	1.0	58 <sup>th</sup>	68.5%	-1.3	40 <sup>th</sup>
Rating of Health Care (% 9 or 10)	181	49.5%	54.7%	5.2	55.7%	-1.0	38 <sup>th</sup>	57.3%	-2.6	28 <sup>th</sup>
How Well Doctors Communicate + (% Usually or Always)	167	87.7%	92.2%	4.5	92.5%	-0.3	44 <sup>th</sup>	93.2%	-1.0	28 <sup>th</sup>

## BOTTOM THREE Performing Measures

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

MEASURE	2024 Valid n	PLAN SUMMARY RATE SCORE			2023 QC			2024 PG BoB		
		2023	2024	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Customer Service + (% Usually or Always)	139	88.1%	85.9%	-2.2	89.2%	-3.3	14 <sup>th</sup>	89.8%	-3.9	11 <sup>th</sup>
Coordination of Care + (% Usually or Always)	95^	85.7%	78.9%	-6.8	84.6%	-5.7	11 <sup>th</sup>	86.0%	-7.1	9 <sup>th</sup>
Getting Needed Care (% Usually or Always)	152	75.3%	74.5%	-0.8	81.0% ▼	-6.5	9 <sup>th</sup>	82.1% ▼	-7.6	6 <sup>th</sup>

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

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



# IMPROVEMENT STRATEGIES

## Improving Performance

These measures had the lowest percentile rankings in comparison to the 2024 PG Book of Business for your plan.

### Improvement Strategies – Customer Service

- Emphasize comprehensive, collaborative, and high-quality customer/member services as a critical priority across all areas of the organization. Think and act together. Establish service recovery guidelines for resolving issues, including phrases that express apologies or atonement.
- Provide on-going/periodic CSR service training, open discussions and routine refresher programs. Include thorough annual updates, tools and resources and subsequent feedback. Training examples include: how to answer questions and resolve issues; consistency in being friendly, courteous and empathetic; quick issue resolution with follow-up; procedures to minimize transfers and wait/on-hold times.
- Involve the CS team in QI activities, seeking concrete customer-based input and improvements. Ensure they are fully informed of updates/changes to processes and procedures.
- Ensure CSRs have immediate access to knowledgeable staff within all key member and provider service areas (Claims, Enrollment, etc.).
- Support key subject matter experts to flexibly respond to urgent or complex types of calls, questions or issues - including prompt prioritization and resolution procedures and/or authority.
- Develop, implement and review protocols and scripts ("Talking Points") to ensure up-to-date, accurate and consist information provided to your members and patients and providers.
- Establish, assess and adhere to measurable CSR performance/service standards (i.e., call satisfaction, call resolution, time on hold, etc.). Operationally define service behaviors.
- Seek QI opportunities with CS via observational walkthrough of calls and discussion/review of complaints, inquiries, and the member experience, especially any changes. Identify main issues and seek interventions that decrease volume and/or improve experience.
- Acknowledge and reward service performance/behaviors reflective of service excellence.

### Improvement Strategies – Coordination of Care

- Inform, support, remind and facilitate providers about coordination of care expectations, timely notification requirements, and standards of care for post-visit follow up to all PCPs. Explore options to encourage and support communications between specialists and PCPs.
- Develop on-going and timely reminders/messaging to promote and improve communication and reporting between all provider types, ideally based directly on available data/information.
- Assess the status and consistency of coordination of patient care, communication, and information shared within and across provider networks. Assure prompt feedback, standards.
- Support and facilitate a patient-centered care management approach within and across provider networks. Facilitate a complementary plan-based patient centered care management approach.
- Explore potential of aligning information flow/EHRs to better integrate, support or facilitate patient care, care coordination and vital medical and personal information among providers.
- Encourage providers to prompt patients AND patients to prompt providers, i.e., mutual interactions that review and discuss care, tests and/or treatments involving other providers.
- Encourage patients to bring a list of all medications, including dosage and frequency to all appointments. Encourage providers to prompt patients to do the same for their appointments.
- How do PCP's, providers, facilities and/or the plan assure common patient "touch points" to facilitate/support scheduling of appointments, tests and/or procedures? Where is the over-arching guidance and support for the patient/member?

### Improvement Strategies – Getting Needed Care

- Assess CAHPS data by health system, PO, and/or network. Communicate results and identify outliers. Evaluate with HEDIS data, complaints, appeals and/or quality of care concerns, and communicate. Identify issues, prioritize and implement improvement activities.
- Work with providers to support patients in navigating health care and remove obstacles. Support and encourage providers to take innovative action to improve access. Examples include: Serve patients quickly, treat urgent issues promptly, minimize wait times, follow-up about appointment times and test results. Another is to develop an in-depth referral/decision-making guide for PCP's to prepare for/with patients explaining need, urgency, patient expectations and responsibilities, and preparations for seeing a specialist.
- Support members and collaborate with providers to enhance access to care through innovative, proactive approaches within Care Management, Chronic Care, and Quality Management. Work with providers to identify and resolve opportunities.
- Continually assess, revisit and simplify plan requirements/processes (i.e., UM) impacting access to care, tests, or treatment. Seek opportunities to improve processes and procedures.
- Review and simplify precertification/auth/referral policies/procedures for both member and provider, including messages and communications. Cross-reference with complaints, concerns, and quality of care issues. Improve and clarify processes and communications.
- Evaluate and simplify member communications, assuring that members are clearly told why something is not approved. When appropriate, offer suggestions for next steps or alternatives.
- Ensure Customer Service representatives are able to accurately advise members of available alternatives for care, such as walk-in clinics, urgent care, specialists, labs, etc.
- Establish a specialist referral hotline for providers and members.

Full List of Improvement Strategies 

# KEY DRIVER ANALYSIS OF RATING OF HEALTH PLAN

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- Health Net - MCAL

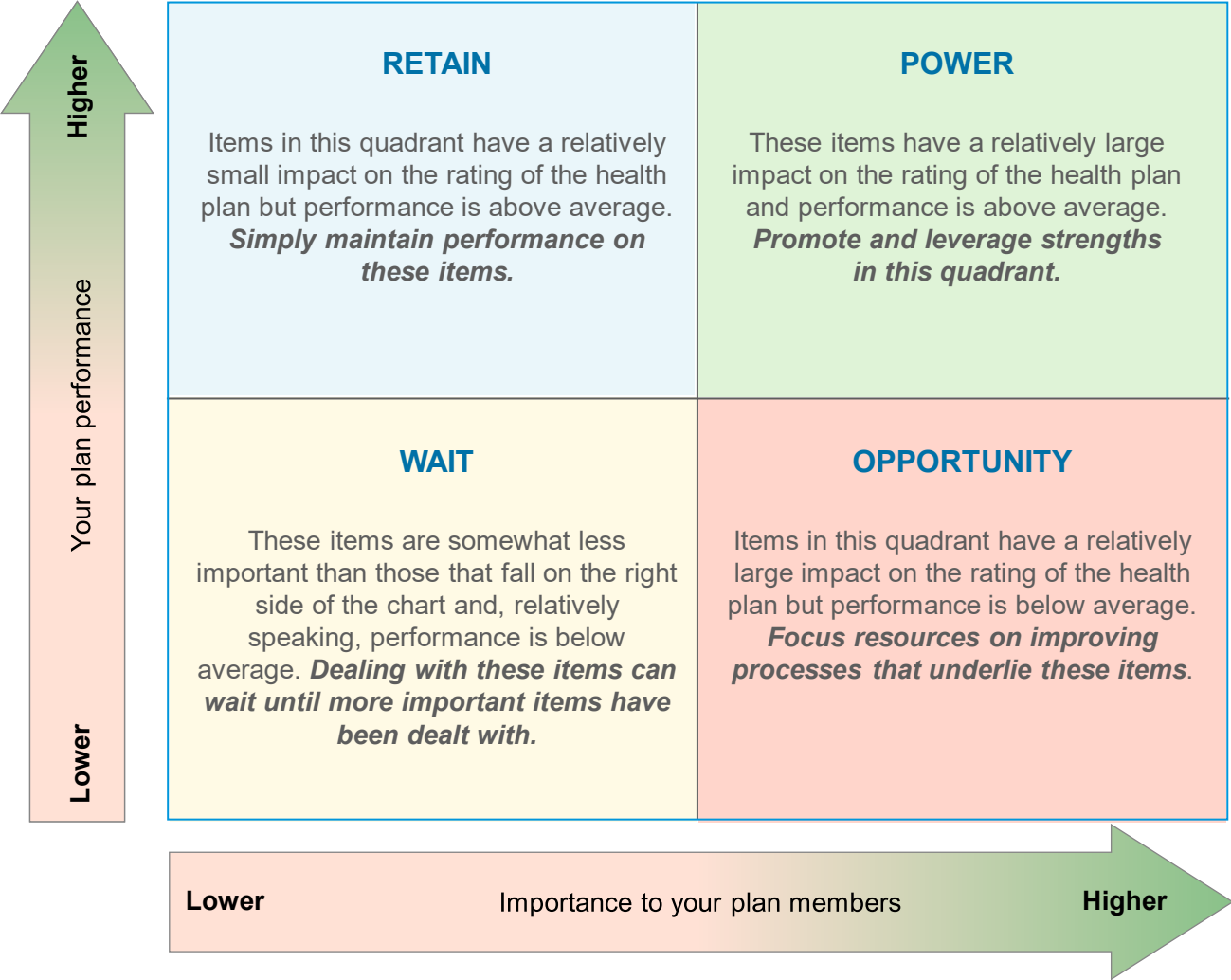
# POWeR CHART: EXPLANATION

## POWeR™ CHART CLASSIFICATION MATRIX

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

The model provides the following:

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



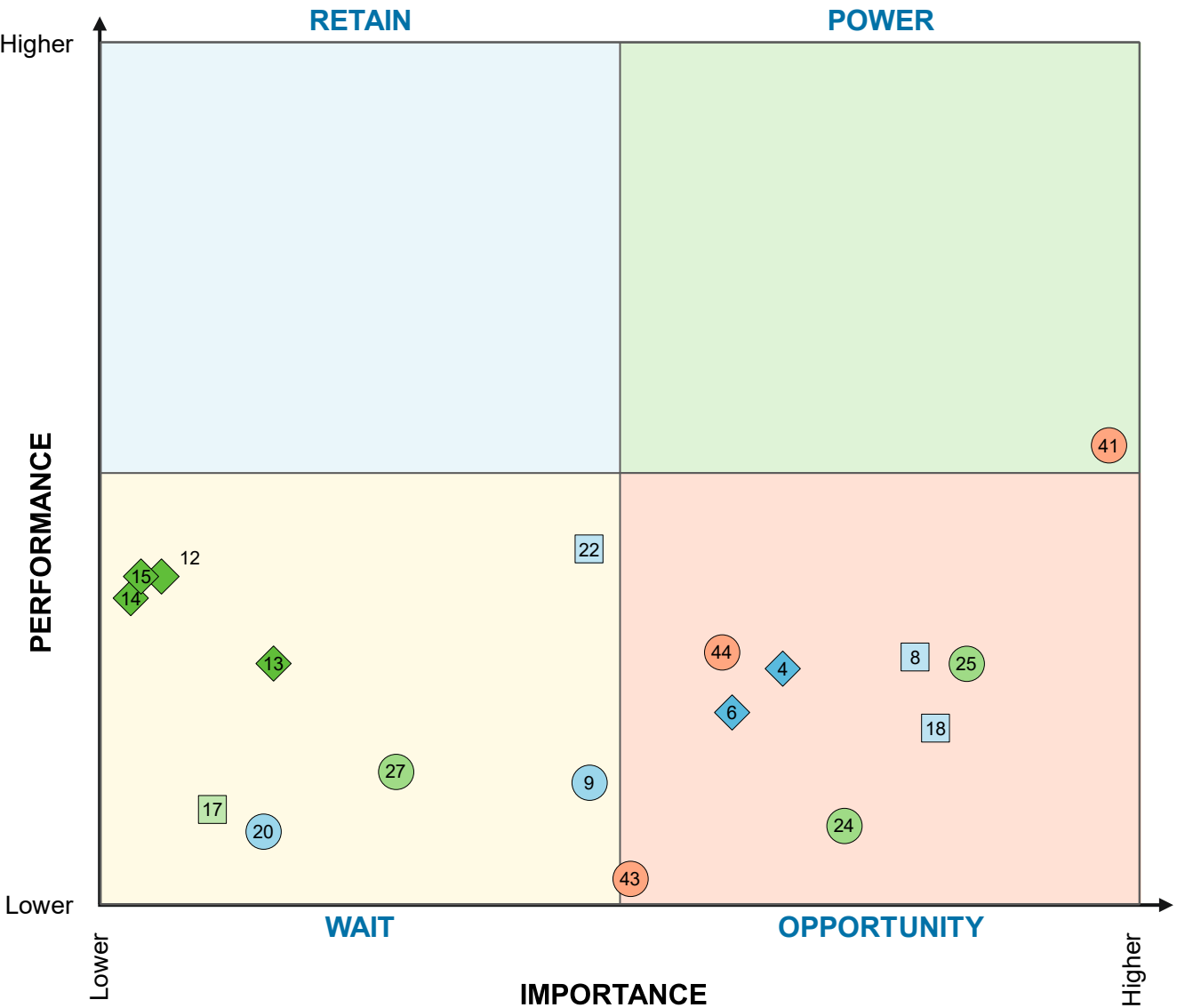
# POWER CHART: YOUR RESULTS

MEDICAID ADULT

SURVEY MEASURE			2023		2024	
			SRS	%tile*	SRS	%tile*
POWER						
SQ	Q41	Rating of provided interpreter overall	67.3%	---	67.7%	---
OPPORTUNITY						
CS	Q25	Treated with courtesy and respect	92.2%	18 <sup>th</sup>	93.6%	28 <sup>th</sup>
Rating	Q18	Rating of Personal Doctor	59.9%	6 <sup>th</sup>	65.8%	20 <sup>th</sup>
Rating	Q8	Rating of Health Care	49.5%	11 <sup>th</sup>	54.7%	28 <sup>th</sup>
CS	Q24	Provided information or help	84.0%	45 <sup>th</sup>	78.3%	8 <sup>th</sup>
GCQ	Q4	Getting urgent care	79.2%	26 <sup>th</sup>	80.0%	26 <sup>th</sup>
GCQ	Q6	Getting routine care	71.4%	10 <sup>th</sup>	75.0%	21 <sup>st</sup>
SQ	Q44	Dr. had scarce appts.	72.8%	---	78.2%	---
SQ	Q43	Got appt. in a timely manner	63.3%	---	57.8%	---
WAIT						
GNC	Q9	Getting care, tests, or treatment	79.5%	13 <sup>th</sup>	79.8%	13 <sup>th</sup>
Rating	Q22	Rating of Specialist +	55.9%	<5 <sup>th</sup>	67.2%	40 <sup>th</sup>
CS	Q27	Ease of Filling Out Forms +	93.1%	10 <sup>th</sup>	92.9%	15 <sup>th</sup>
HWDC	Q13	Dr. listened carefully	88.8%	6 <sup>th</sup>	92.3%	28 <sup>th</sup>
GNC	Q20	Getting specialist appointment	71.2%	12 <sup>th</sup>	69.3%	7 <sup>th</sup>
CC	Q17	Coordination of Care +	85.7%	45 <sup>th</sup>	78.9%	9 <sup>th</sup>
HWDC	Q12	Dr. explained things	83.1%	<5 <sup>th</sup>	92.2%	37 <sup>th</sup>
HWDC	Q15	Dr. spent enough time	85.5%	<5 <sup>th</sup>	90.4%	38 <sup>th</sup>
HWDC	Q14	Dr. showed respect	93.3%	21 <sup>st</sup>	94.0%	34 <sup>th</sup>
RETAIN						

None

\*Percentiles based on the PG Book of Business of the listed year.



# KEY DRIVERS OF RATING OF HEALTH PLAN

MEDICAID ADULT

		ALIGNMENT <i>Are your key drivers typical of the industry?</i>	KEY DRIVER RANK		ATTRIBUTE		SUMMARY RATE SCORE		PG BoB %TILE*	CLASSIFICATION			
			YOUR PLAN	INDUSTRY			YOUR PLAN	INDUSTRY		2023	2024		
TOP 10 KEY DRIVERS					Q28	Rating of Health Plan	57.7%	63.1%	15 <sup>th</sup>	(+3)			
YOUR PLAN	These items have a relatively large impact on the Rating of Health Plan. <b>Leverage</b> these questions since they are important to your members and the Rating of Health Plan score for this plan. They are listed in descending order of importance for your plan.		1	---	Q41	Rating of provided interpreter overall	67.7%	---	---		Power	Power	
		✓	2	7	Q25	Treated with courtesy and respect	93.6%	94.8%	28 <sup>th</sup>	(+10)	Wait	→	Opp.
		✓	3	2	Q18	Rating of Personal Doctor	65.8%	70.3%	20 <sup>th</sup>	(+14)	Opp.		Opp.
		✓	4	1	Q8	Rating of Health Care	54.7%	57.3%	28 <sup>th</sup>	(+17)	Opp.		Opp.
		✓	5	8	Q24	Provided information or help	78.3%	84.7%	8 <sup>th</sup>	(-37)	Wait	→	Opp.
		✓	6	6	Q4	Getting urgent care	80.0%	82.7%	26 <sup>th</sup>	(+0)	Opp.		Opp.
		✓	7	4	Q6	Getting routine care	75.0%	79.7%	21 <sup>st</sup>	(+11)	Opp.		Opp.
INDUSTRY	PG Book of Business regression analysis has identified <b>Key Drivers</b> of Rating of Health Plan. The numbers represent the ranked importance across the entire Book of Business.		8	---	Q44	Dr. had scarce appts.	78.2%	---	---		Opp.	Opp.	
			9	---	Q43	Got appt. in a timely manner	57.8%	---	---		Wait	→	Opp.
		✓	10	5	Q9	Getting care, tests, or treatment	79.8%	85.1%	13 <sup>th</sup>	(+0)	Opp.	→	Wait
			11	3	Q22	Rating of Specialist +	67.2%	68.5%	40 <sup>th</sup>	(+37)	Opp.	→	Wait
			13	10	Q13	Dr. listened carefully	92.3%	93.3%	28 <sup>th</sup>	(+22)	Wait		Wait
All Industry scores & rankings are calculated based on the 2024 PG Book of Business. Any items below the dotted line are not in the PG Book of Business.			14	9	Q20	Getting specialist appointment	69.3%	79.1%	7 <sup>th</sup>	(-5)	Wait		Wait

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

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

# MEASURE ANALYSES

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Measure Details and Summary Rate Scores

- Health Net - MCAL

# SECTION INFORMATION

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

**Rating & Composite** level information including...

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

**Attribute** level information for composites including...

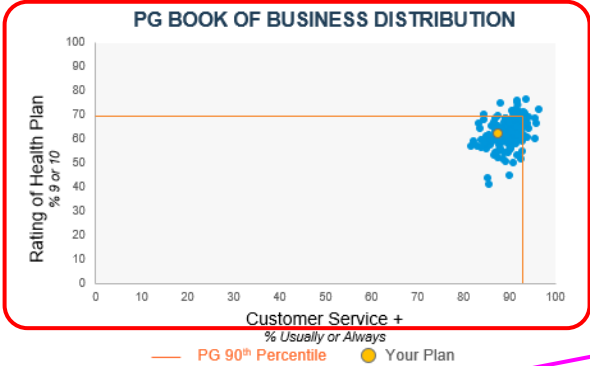
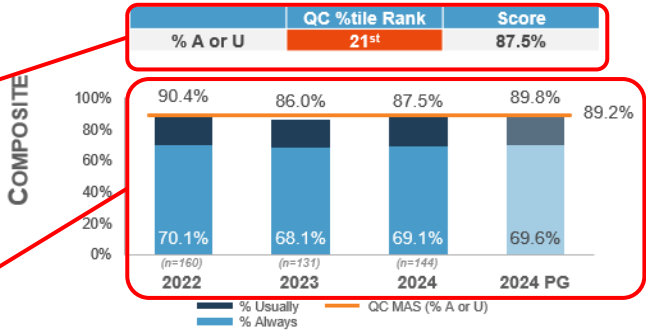
- Gate questions
- Percentile ranking and benchmark performance
- Summary rate score trending

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

Percentile Bands		
≥90 <sup>th</sup>		
67 <sup>th</sup> – 89 <sup>th</sup>		
33 <sup>rd</sup> – 66 <sup>th</sup>		
10 <sup>th</sup> – 32 <sup>nd</sup>		
<10 <sup>th</sup>		

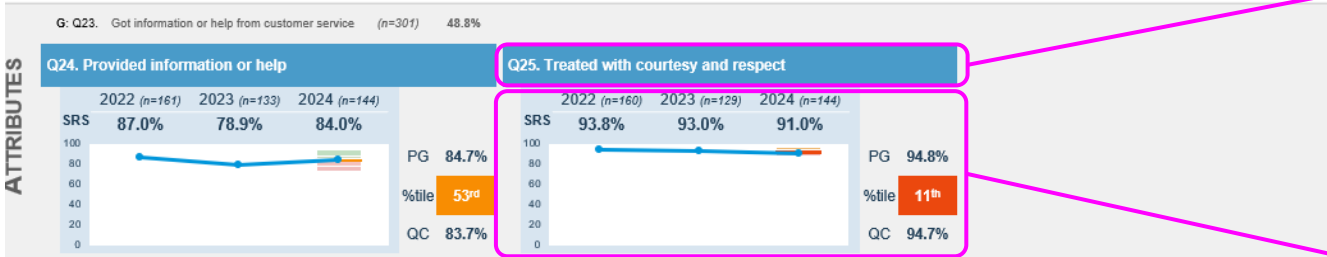
Your plan's performance ranking along with **Summary Rate Score** are displayed at the top for quick reference.

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



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

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



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

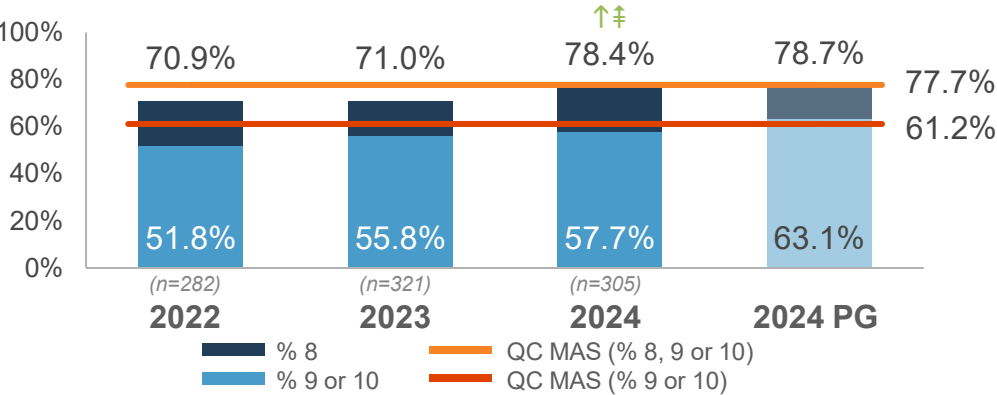
- Historic bases and **Summary Rate Scores** along with significant changes in trend notated
- Benchmark comparisons along with significant differences notated
- Percentile ranking against **Quality Compass**
- Graphic representation of trend and 2023 **Quality Compass** percentile bands

# RATINGS

MEDICAID ADULT

## RATING OF HEALTH PLAN

	QC %tile Rank	Score
% 8, 9 or 10	55 <sup>th</sup>	78.4%
% 9 or 10	23 <sup>rd</sup>	57.7%



### Key Drivers Of The Rating Of The Health Plan

#### POWER

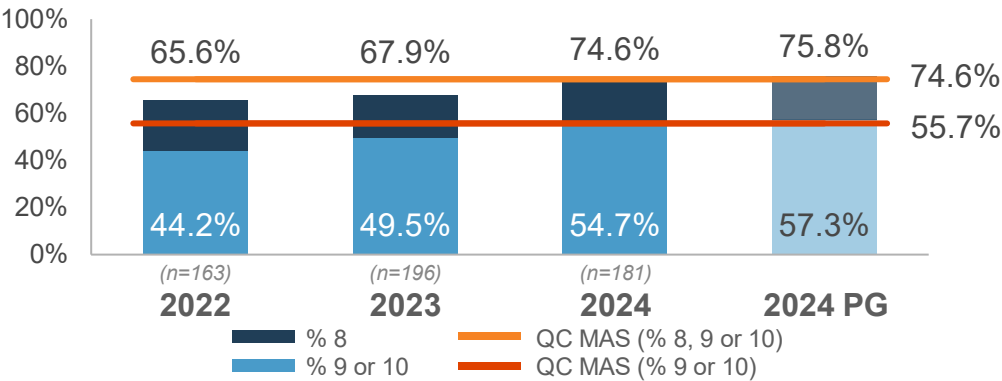
**Q41** Rating of provided interpreter overall

#### OPPORTUNITIES

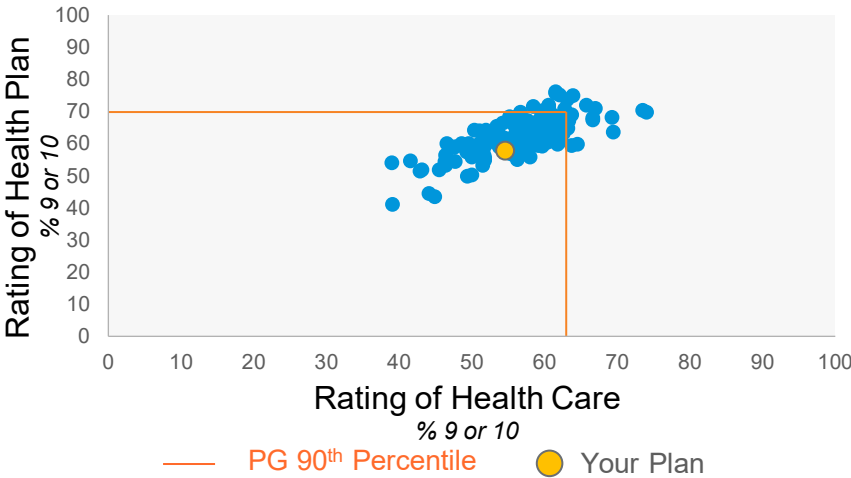
- Q25** Treated with courtesy and respect
- Q18** Rating of Personal Doctor
- Q8** Rating of Health Care
- Q24** Provided information or help
- Q4** Getting urgent care
- Q6** Getting routine care
- Q44** Dr. had scarce appts.
- Q43** Got appt. in a timely manner

## RATING OF HEALTH CARE

	QC %tile Rank	Score
% 8, 9 or 10	48 <sup>th</sup>	74.6%
% 9 or 10	38 <sup>th</sup>	54.7%



### PG BOOK OF BUSINESS DISTRIBUTION



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

<sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.

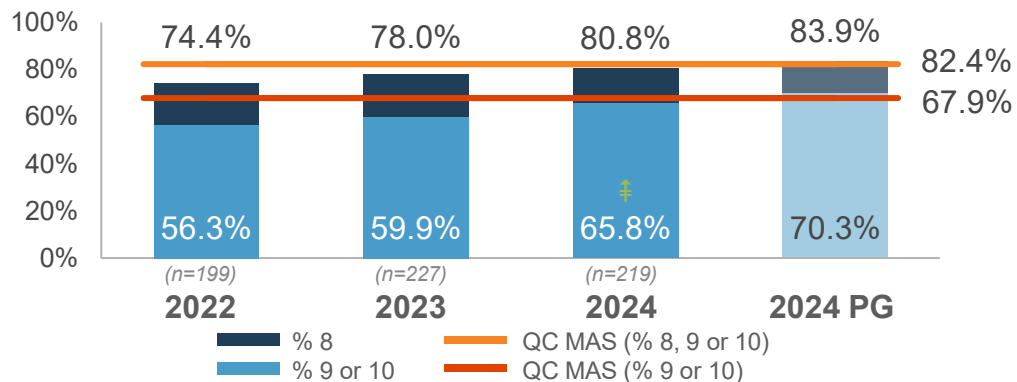


# RATINGS

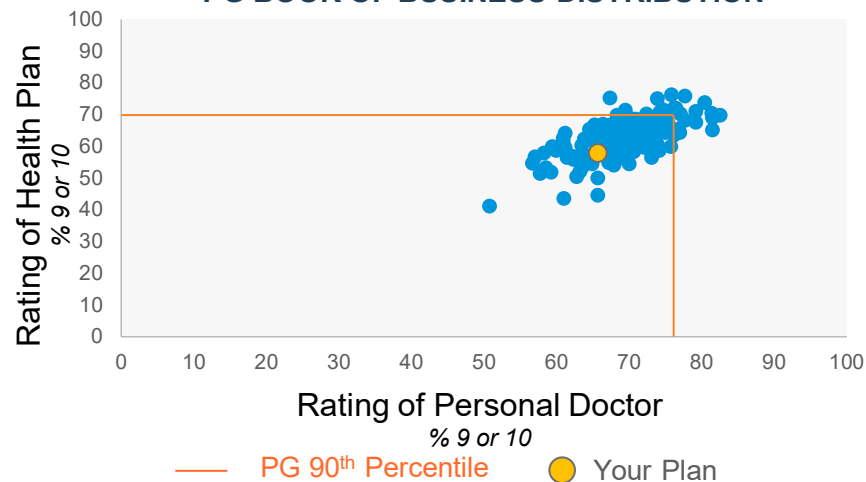
## MEDICAID ADULT

### RATING OF PERSONAL DOCTOR

	QC %tile Rank	Score
% 8, 9 or 10	28 <sup>th</sup>	80.8%
% 9 or 10	35 <sup>th</sup>	65.8%

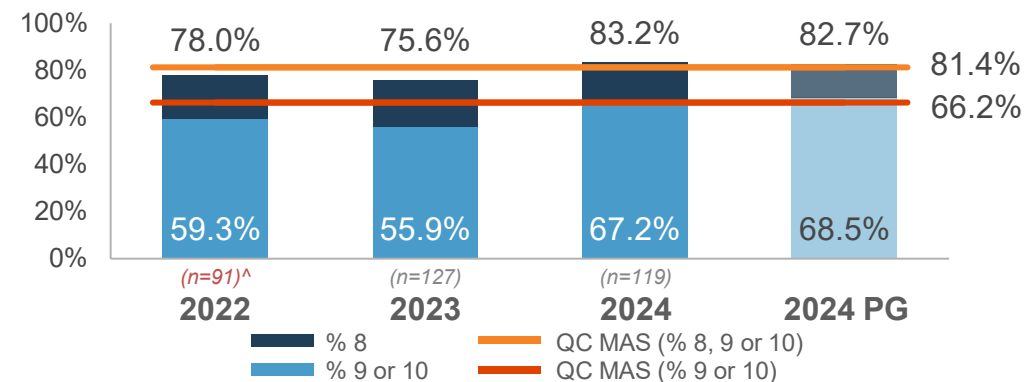


### PG BOOK OF BUSINESS DISTRIBUTION

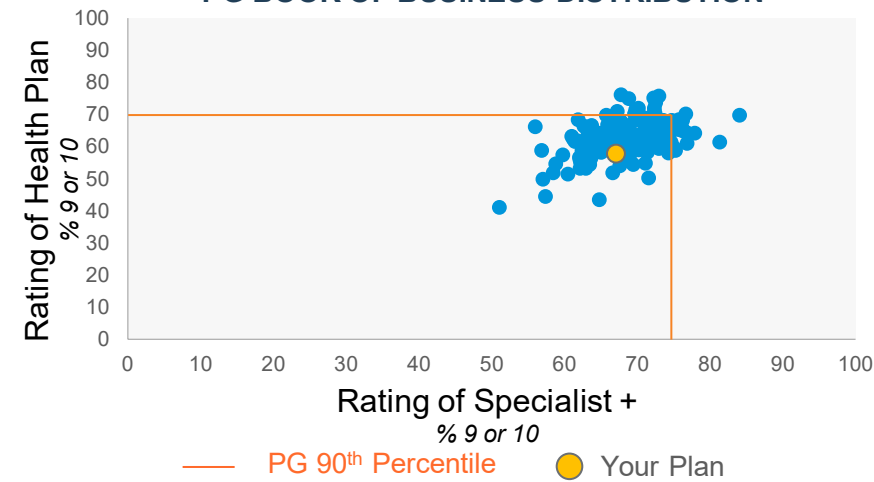


### RATING OF SPECIALIST +

	QC %tile Rank	Score
% 8, 9 or 10	63 <sup>rd</sup>	83.2%
% 9 or 10	58 <sup>th</sup>	67.2%



### PG BOOK OF BUSINESS DISTRIBUTION



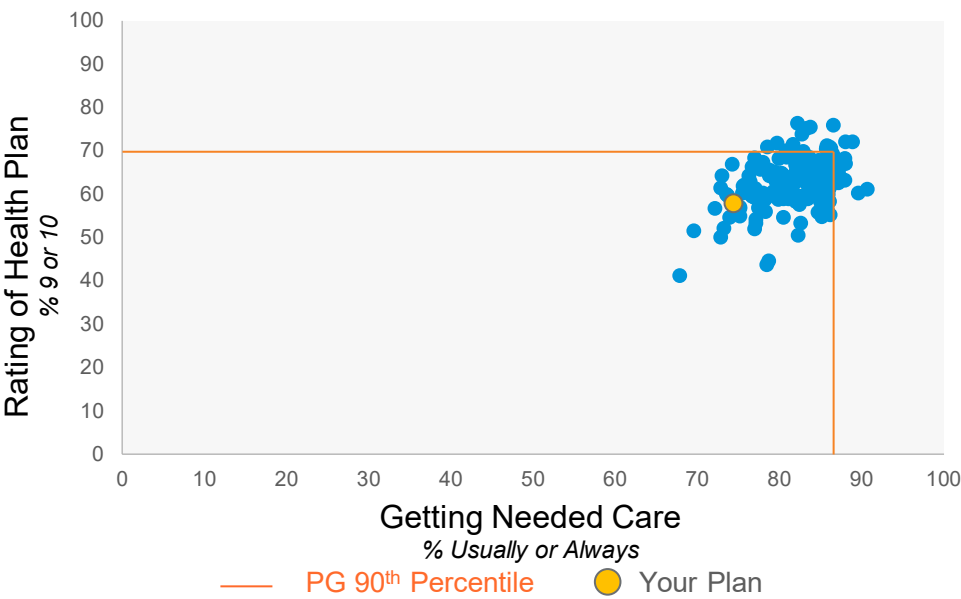
**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↕/↕) or benchmark score (▲/▼).

**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↕/↕) or benchmark score (▲/▼). <sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.

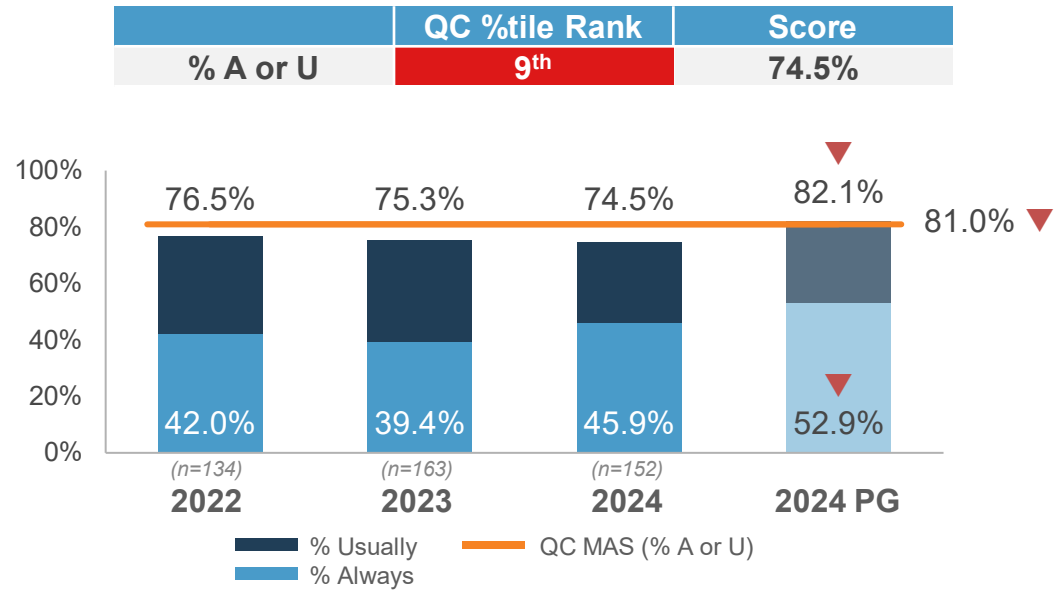
# GETTING NEEDED CARE

MEDICAID ADULT

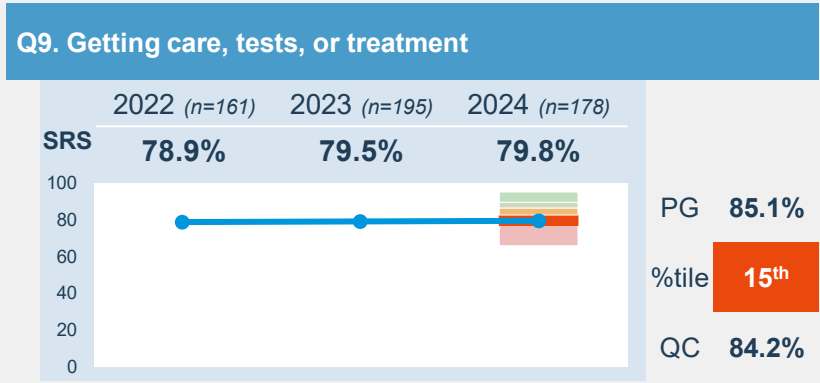
PG BOOK OF BUSINESS DISTRIBUTION



COMPOSITE



ATTRIBUTES

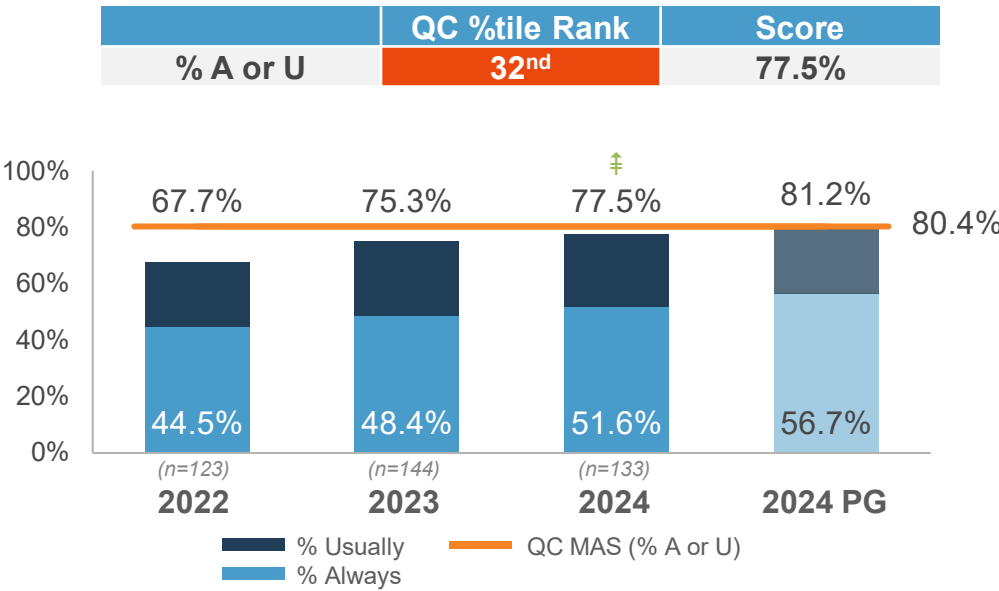


**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼). <sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.

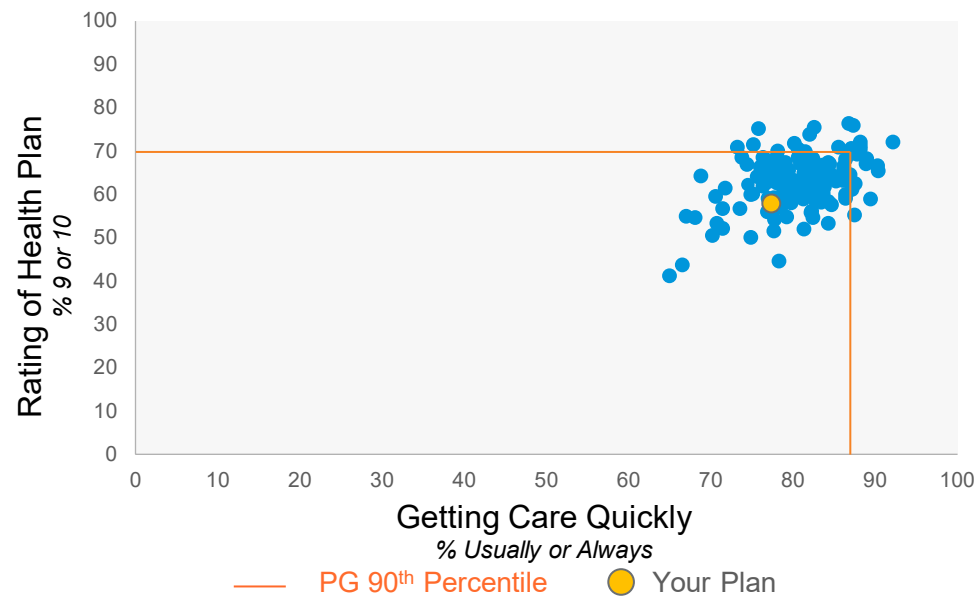
# GETTING CARE QUICKLY

MEDICAID ADULT

COMPOSITE



## PG BOOK OF BUSINESS DISTRIBUTION

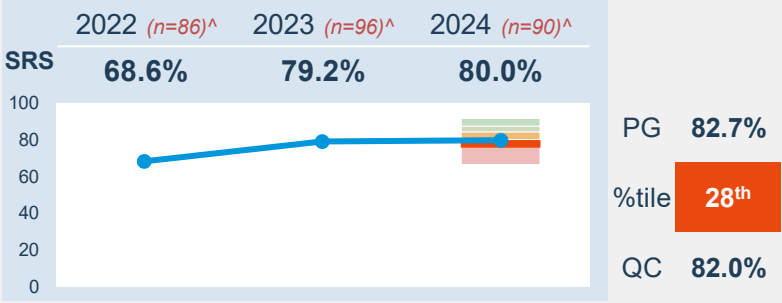


ATTRIBUTES

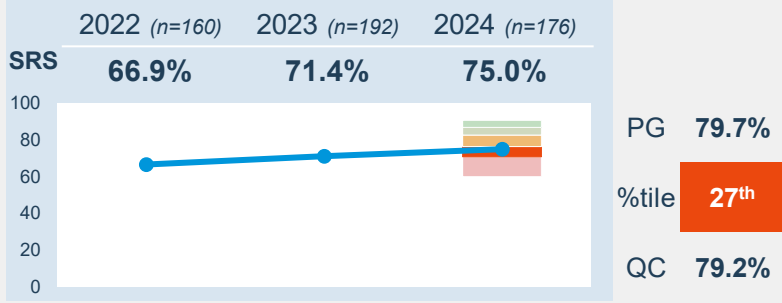
**G: Q3.** Had illness, injury or condition that needed care right away (n=319) 29.8%

**G: Q5.** Made appointments for check-ups or routine care at doctor's office or clinic (n=319) 58.0%

### Q4. Getting urgent care



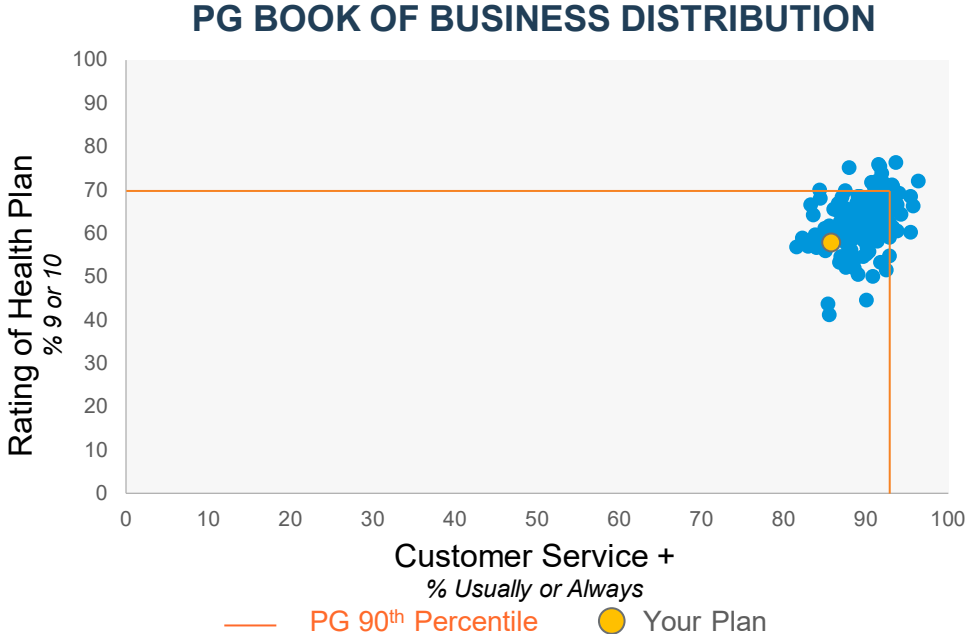
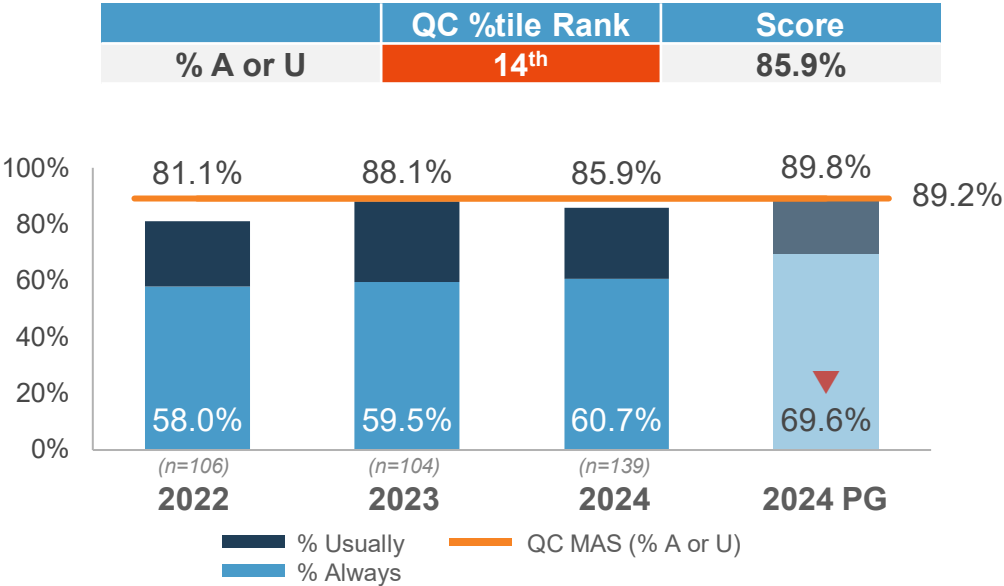
### Q6. Getting routine care



# CUSTOMER SERVICE +

MEDICAID ADULT

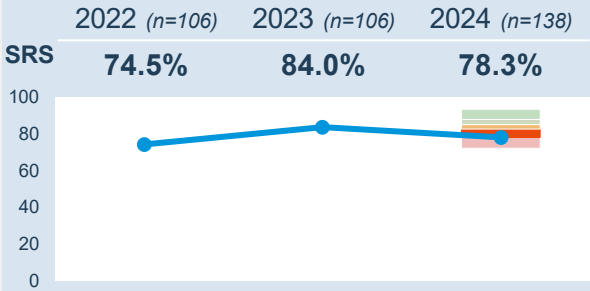
COMPOSITE



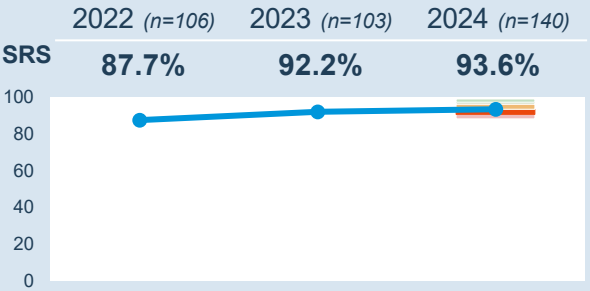
G: Q23. Got information or help from customer service (n=318) 44.0%

ATTRIBUTES

## Q24. Provided information or help



## Q25. Treated with courtesy and respect



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

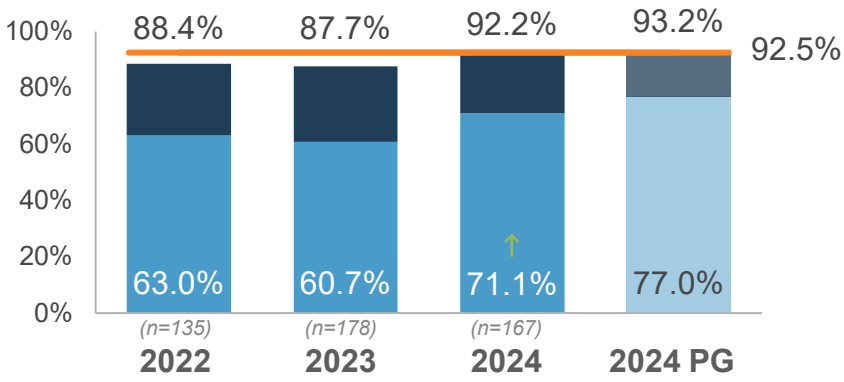
<sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.

# How Well Doctors Communicate +

MEDICAID ADULT

## COMPOSITE

	QC %tile Rank	Score
% A or U	44 <sup>th</sup>	92.2%



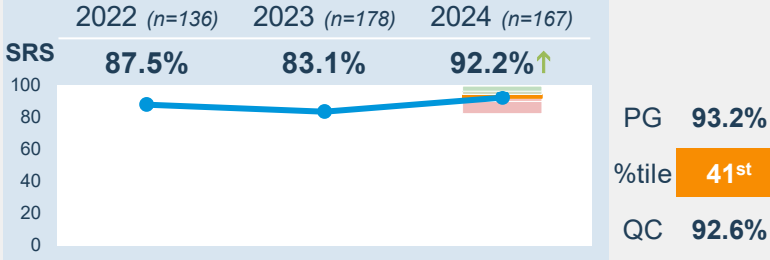
## PG BOOK OF BUSINESS DISTRIBUTION



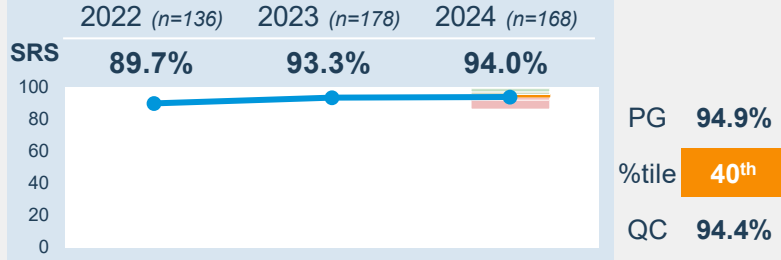
**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼).

## ATTRIBUTES

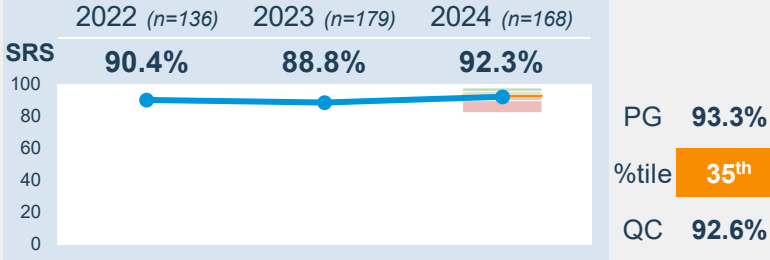
### Q12. Dr. explained things



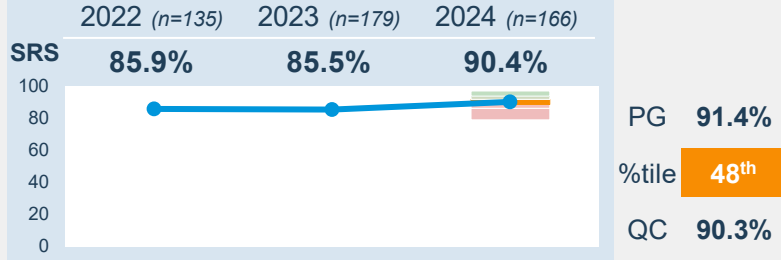
### Q14. Dr. showed respect



### Q13. Dr. listened carefully



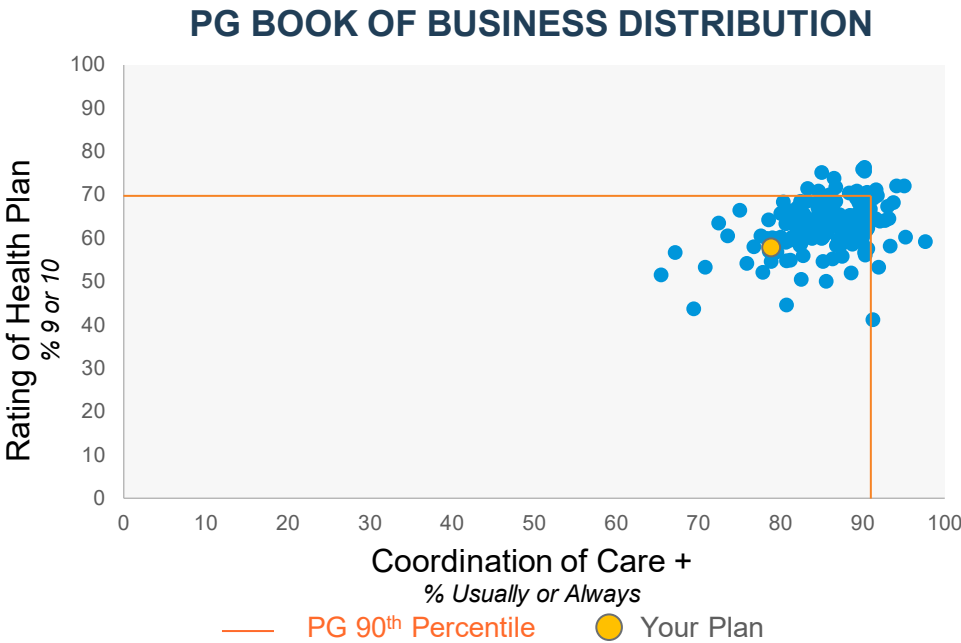
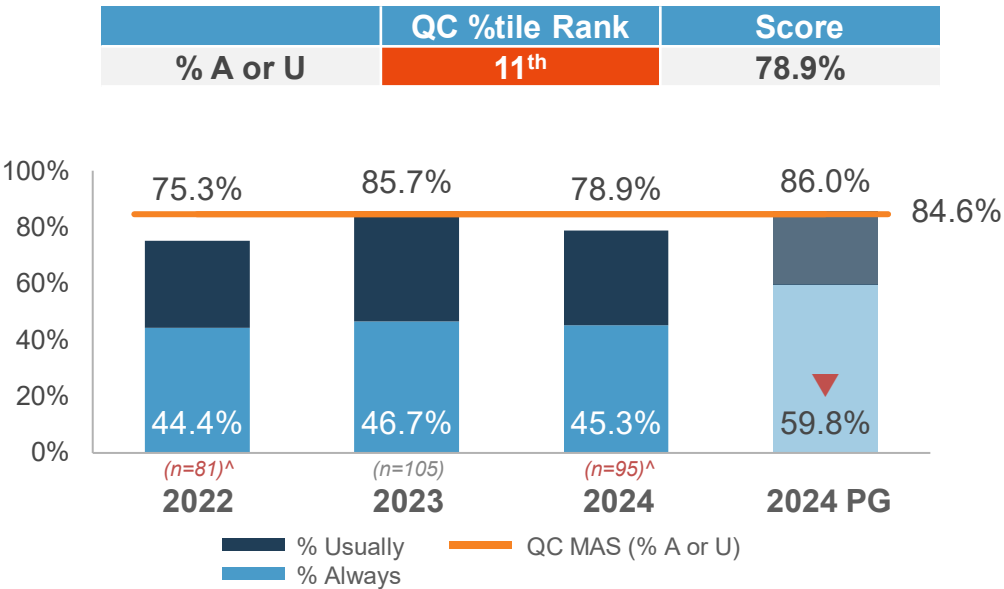
### Q15. Dr. spent enough time



<sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.

# COORDINATION OF CARE +

MEDICAID ADULT



# SUMMARY OF TREND AND BENCHMARKS

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- Health Net - MCAL

# SECTION INFORMATION

**Trend and Benchmark Comparisons** The CAHPS® 5.1H survey is designed to use composite scores to facilitate the aggregation of information and the communication of results. Questions are combined into composite categories comprising a particular service area managed by your plan. These composites, the questions that make up composites (attributes), additional measures, and rating questions are shown on the following pages.

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

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

## Significance Testing

**Green** – Current year score is significantly higher than the 2023 score (↑), the 2022 score (⬆) or benchmark score (▲).

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

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



# BENCHMARK INFORMATION

<div>Available Benchmarks</div> <div>The following benchmarks are used throughout the report.</div>			
	2023 Quality Compass® All Plans	2023 NCQA 1-100 Benchmark	2024 Press Ganey Book of Business
	Includes all Medicaid Adult samples that submitted data to NCQA in 2023.	A percentile benchmark (with values ranging from the first through the one hundredth percentile) calculated by NCQA and derived from Medicaid Adult data submitted to NCQA in 2023.	Includes all Medicaid samples that contracted with Press Ganey to administer the MY 2023 CAHPS 5.1H survey and submitted data to NCQA.
PROS	<ul style="list-style-type: none"><li>Is presented in NCQA's The State of Health Care Quality</li></ul>	<ul style="list-style-type: none"><li>Utilized by Press Ganey to calculate approximate percentile ranking of plan scores in relation to the Quality Compass® All Plans benchmark</li></ul>	<ul style="list-style-type: none"><li>Provides a benchmark for each question from the survey</li><li>Permits precise percentile ranking of plan compared to benchmark</li></ul>
CONS	<ul style="list-style-type: none"><li>Only contains benchmarks for certain key questions, composites, and rating questions</li></ul>	<ul style="list-style-type: none"><li>Only contains benchmarks for certain key questions, composites, and rating questions</li></ul>	<ul style="list-style-type: none"><li>Contains fewer plans than the Quality Compass® All Plans Benchmarks</li></ul>
SIZE	189 Plans	189 Plans	174 Plans / 43,077 Respondents

# SUMMARY RATE SCORES

## MEDICAID ADULT

	2024 Valid n	2022	2023	2024	2024 PG BoB	2023 QC
<b>Rating Questions (% 9 or 10)</b>						
★ Q28. Rating of Health Plan	305	51.8%	55.8%	57.7%	63.1%	61.2%
★ Q8. Rating of Health Care	181	44.2%	49.5%	54.7%	57.3%	55.7%
★ Q18. Rating of Personal Doctor	219	56.3%	59.9%	65.8%	70.3%	67.9%
Q22. Rating of Specialist +	119	59.3%	55.9%	67.2%	68.5%	66.2%
<b>Rating Questions (% 8, 9 or 10)</b>						
Q28. Rating of Health Plan	305	70.9%	71.0%	78.4%	78.7%	77.7%
Q8. Rating of Health Care	181	65.6%	67.9%	74.6%	75.8%	74.6%
Q18. Rating of Personal Doctor	219	74.4%	78.0%	80.8%	83.9%	82.4%
Q22. Rating of Specialist +	119	78.0%	75.6%	83.2%	82.7%	81.4%
★ <b>Getting Needed Care (% Usually or Always)</b>	<b>152</b>	<b>76.5%</b>	<b>75.3%</b>	<b>74.5%</b>	<b>82.1%</b>	<b>81.0%</b>
Q9. Getting care, tests, or treatment	178	78.9%	79.5%	79.8%	85.1%	84.2%
Q20. Getting specialist appointment	127	74.1%	71.2%	69.3%	79.1%	78.3%
★ <b>Getting Care Quickly (% Usually or Always)</b>	<b>133</b>	<b>67.7%</b>	<b>75.3%</b>	<b>77.5%</b>	<b>81.2%</b>	<b>80.4%</b>
Q4. Getting urgent care	90^	68.6%	79.2%	80.0%	82.7%	82.0%
Q6. Getting routine care	176	66.9%	71.4%	75.0%	79.7%	79.2%
<b>Effectiveness of Care (% Sometimes, Usually, or Always)</b>						
★ Q32. Advised to Quit Smoking: 2YR	64^	61.7%	61.0%	64.1%	73.7%	72.8%
Q33. Discussing Cessation Meds: 2YR +	65^	36.1%	37.2%	36.9%	53.4%	51.2%
Q34. Discussing Cessation Strategies: 2YR +	64^	33.0%	28.6%	32.8%	47.1%	45.4%

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

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

# SUMMARY RATE SCORES

## MEDICAID ADULT

	2024 Valid n	2022	2023	2024	2024 PG BoB	2023 QC
<b>Customer Service + (% Usually or Always)</b>	<b>139</b>	<b>81.1%</b>	<b>88.1%</b>	<b>85.9%</b>	<b>89.8%</b>	<b>89.2%</b>
Q24. Provided information or help	138	74.5%	84.0%	78.3%	84.7%	83.7%
Q25. Treated with courtesy and respect	140	87.7%	92.2%	93.6%	94.8%	94.7%
<b>How Well Doctors Communicate + (% Usually or Always)</b>	<b>167</b>	<b>88.4%</b>	<b>87.7%</b>	<b>92.2%</b>	<b>93.2%</b>	<b>92.5%</b>
Q12. Dr. explained things	167	87.5%	83.1%	92.2% ↑	93.2%	92.6%
Q13. Dr. listened carefully	168	90.4%	88.8%	92.3%	93.3%	92.6%
Q14. Dr. showed respect	168	89.7%	93.3%	94.0%	94.9%	94.4%
Q15. Dr. spent enough time	166	85.9%	85.5%	90.4%	91.4%	90.3%
<b>Q17. Coordination of Care +</b>	<b>95^</b>	<b>75.3%</b>	<b>85.7%</b>	<b>78.9%</b>	<b>86.0%</b>	<b>84.6%</b>
<b>Q27. Ease of Filling Out Forms + (% Usually or Always)</b>	<b>309</b>	<b>94.0%</b>	<b>93.1%</b>	<b>92.9%</b>	<b>94.8%</b>	<b>95.4%</b>

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

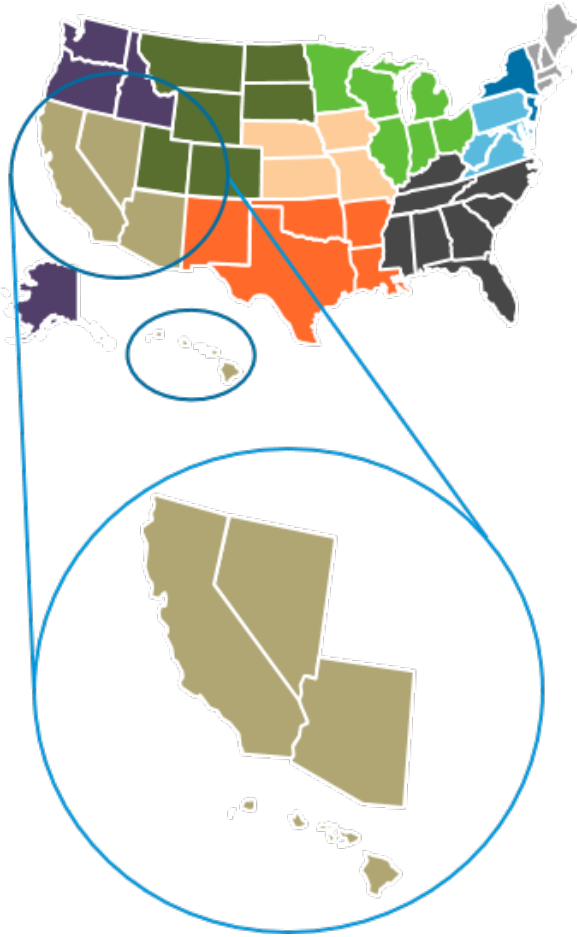
**^Denominator less than 100. NCQA will assign an NA to this measure.**

# REGIONAL PERFORMANCE

MEDICAID ADULT

	SUMMARY RATE	2024 PG BoB REGION
Rating Questions (% 9 or 10)		
★ Q28. Rating of Health Plan	57.7%	60.4%
★ Q8. Rating of Health Care	54.7%	53.4%
★ Q18. Rating of Personal Doctor	65.8%	66.8%
Q22. Rating of Specialist +	67.2%	67.0%
Rating Questions (% 8, 9 or 10)		
Q28. Rating of Health Plan	78.4%	76.4%
Q8. Rating of Health Care	74.6%	72.4%
Q18. Rating of Personal Doctor	80.8%	82.4%
Q22. Rating of Specialist +	83.2%	81.5%
★ Getting Needed Care (% Usually or Always)	74.5%	77.1%
Q9. Getting care, tests, or treatment	79.8%	80.2%
Q20. Getting specialist appointment	69.3%	74.0%
★ Getting Care Quickly (% Usually or Always)	77.5%	74.9%
Q4. Getting urgent care	80.0%	76.6%
Q6. Getting routine care	75.0%	73.2%
Effectiveness of Care (% Sometimes, Usually, or Always)		
★ Q32. Advised to Quit Smoking: 2YR	64.1%	66.7%
Q33. Discussing Cessation Meds: 2YR +	36.9%	47.0%
Q34. Discussing Cessation Strategies: 2YR +	32.8%	40.2%

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



- Region 9: San Francisco**
- American Samoa (not shown)
  - California
  - Hawaii
  - Arizona
  - Guam (not shown)
  - Nevada

Significance Testing

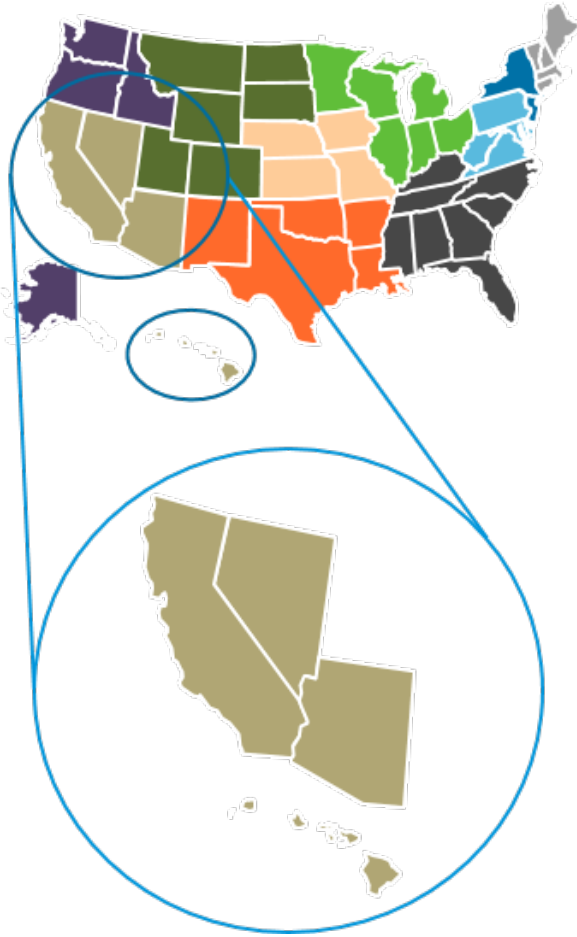
Current year score is significantly higher/lower (🍀/🍁) than the 2024 PG BoB Region score.

# REGIONAL PERFORMANCE

MEDICAID ADULT

	SUMMARY RATE	2024 PG BoB REGION
Customer Service + (% Usually or Always)	85.9%	88.4%
Q24. Provided information or help	78.3%	83.4%
Q25. Treated with courtesy and respect	93.6%	93.3%
How Well Doctors Communicate + (% Usually or Always)	92.2%	91.9%
Q12. Dr. explained things	92.2%	91.9%
Q13. Dr. listened carefully	92.3%	92.2%
Q14. Dr. showed respect	94.0%	93.8%
Q15. Dr. spent enough time	90.4%	89.5%
Q17. Coordination of Care +	78.9%	81.4%
Q27. Ease of Filling Out Forms + (% Usually or Always)	92.9%	93.6%

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



- Region 9: San Francisco**
- American Samoa (not shown)
  - California
  - Hawaii
  - Arizona
  - Guam (not shown)
  - Nevada

**Significance Testing**

Current year score is significantly higher/lower (🍀/🍁) than the 2024 PG BoB Region score.

# PERCENTILE RANKINGS

MEDICAID ADULT

			2024 Plan Score	QC %tile	National Percentiles from 2023 Quality Compass								PG %tile	National Percentiles from 2024 PG Book of Business									
					5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>		5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>
Rating Questions (% 9 or 10)																							
★	Q28. Rating of Health Plan	57.7%	23 <sup>rd</sup>	49.1	52.7	57.9	59.3	61.8	64.0	65.4	68.7	70.1	15 <sup>th</sup>	53.0	55.5	59.5	60.3	63.2	65.1	66.7	69.8	71.4	
★	Q8. Rating of Health Care	54.7%	38 <sup>th</sup>	44.1	48.0	52.3	53.4	56.0	58.3	59.0	62.5	64.7	28 <sup>th</sup>	46.1	49.0	54.1	55.3	57.7	59.6	60.6	63.0	64.8	
★	Q18. Rating of Personal Doctor	65.8%	35 <sup>th</sup>	59.8	61.8	64.2	65.4	68.2	70.6	71.9	74.0	75.8	20 <sup>th</sup>	59.9	62.4	66.8	67.5	69.8	72.1	73.3	76.1	77.7	
	Q22. Rating of Specialist +	67.2%	58 <sup>th</sup>	57.6	60.6	63.4	64.5	66.4	68.3	68.9	72.3	73.3	40 <sup>th</sup>	60.4	62.2	64.8	66.3	68.5	70.9	72.0	74.7	76.3	
Rating Questions (% 8, 9 or 10)																							
	Q28. Rating of Health Plan	78.4%	55 <sup>th</sup>	69.6	71.2	74.7	76.0	77.7	79.9	80.9	83.7	85.9	47 <sup>th</sup>	69.7	72.9	75.5	76.9	78.6	80.2	81.7	83.8	86.5	
	Q8. Rating of Health Care	74.6%	48 <sup>th</sup>	66.7	69.4	72.3	73.1	74.8	76.5	77.7	79.9	82.4	39 <sup>th</sup>	67.0	68.3	72.2	73.5	76.0	78.1	79.1	81.6	82.9	
	Q18. Rating of Personal Doctor	80.8%	28 <sup>th</sup>	75.8	77.9	80.4	81.5	82.7	84.3	84.9	86.9	87.4	23 <sup>rd</sup>	77.1	78.6	80.9	81.8	83.9	85.3	86.0	88.3	89.9	
	Q22. Rating of Specialist +	83.2%	63 <sup>rd</sup>	73.2	75.1	78.6	80.1	81.7	83.3	84.4	86.6	87.6	49 <sup>th</sup>	75.8	77.1	79.4	80.9	83.2	84.6	85.4	87.3	88.5	
★	Getting Needed Care (% U/A)	74.5%	9 <sup>th</sup>	73.5	75.0	77.8	79.8	81.7	83.1	84.5	86.5	87.2	6 <sup>th</sup>	73.7	75.6	78.7	80.0	82.5	84.4	85.2	86.6	87.3	
	Q9. Getting care, tests, or treatment	79.8%	15 <sup>th</sup>	75.6	77.2	81.4	82.7	84.6	86.7	87.4	89.7	91.0	13 <sup>th</sup>	77.5	79.2	82.3	83.6	85.2	87.0	87.7	89.7	91.1	
	Q20. Getting specialist appointment	69.3%	<5 <sup>th</sup>	69.9	70.9	74.1	76.1	78.9	81.5	82.4	84.6	85.1	7 <sup>th</sup>	68.3	70.7	75.0	77.1	79.6	81.9	82.7	85.1	86.8	
★	Getting Care Quickly (% U/A)	77.5%	32 <sup>nd</sup>	69.5	73.4	76.0	77.7	81.5	83.8	84.9	86.9	87.8	21 <sup>st</sup>	71.3	74.7	78.0	79.2	81.9	83.1	83.7	87.0	88.2	
	Q4. Getting urgent care	80.0%	28 <sup>th</sup>	72.6	76.1	79.1	80.3	83.0	84.4	84.9	87.6	88.6	26 <sup>th</sup>	72.0	75.6	79.7	80.6	83.3	85.0	85.9	88.9	90.7	
	Q6. Getting routine care	75.0%	27 <sup>th</sup>	68.6	70.9	74.8	76.7	80.0	82.9	83.8	86.9	88.1	21 <sup>st</sup>	68.6	71.2	75.9	77.3	80.4	82.3	83.6	86.7	87.8	
Effectiveness of Care (% S/U/A)																							
★	Q32. Advised to Quit Smoking: 2YR	64.1%	6 <sup>th</sup>	60.9	65.1	68.7	70.6	73.0	75.0	76.9	80.4	82.8	16 <sup>th</sup>	57.4	61.0	66.7	69.4	73.1	76.6	78.9	84.5	88.9	
	Q33. Discussing Cessation Meds: 2YR +	36.9%	<5 <sup>th</sup>	39.1	40.6	46.3	48.0	50.4	53.9	55.2	61.4	64.6	9 <sup>th</sup>	33.3	38.2	45.7	48.1	53.6	57.5	59.9	64.8	68.6	
	Q34. Discussing Cessation Strategies: 2YR +	32.8%	<5 <sup>th</sup>	34.7	37.1	40.0	41.2	46.4	49.1	50.3	54.0	56.2	7 <sup>th</sup>	30.6	34.1	40.0	41.5	46.2	50.0	52.4	58.8	65.9	

# PERCENTILE RANKINGS

MEDICAID ADULT

	2024 Plan Score	QC %tile	National Percentiles from 2023 Quality Compass									PG %tile	National Percentiles from 2024 PG Book of Business								
			5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>		5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>
Customer Service + (% U/A)	85.9%	14 <sup>th</sup>	83.1	84.5	88.1	88.7	89.6	90.4	91.1	91.9	93.5	11 <sup>th</sup>	84.5	85.6	87.7	88.7	90.1	91.3	91.9	92.9	93.8
Q24. Provided information or help	78.3%	11 <sup>th</sup>	76.4	78.2	82.0	82.8	83.8	85.3	86.2	88.1	89.5	8 <sup>th</sup>	76.8	79.0	82.2	83.2	85.2	86.9	87.5	89.4	90.9
Q25. Treated with courtesy and respect	93.6%	32 <sup>nd</sup>	90.3	91.0	93.0	93.7	95.4	96.3	96.7	97.4	97.7	28 <sup>th</sup>	90.6	91.5	93.3	93.9	95.0	96.0	96.5	97.6	98.2
How Well Doctors Communicate + (% U/A)	92.2%	44 <sup>th</sup>	87.8	90.2	91.4	91.7	92.7	93.6	94.0	95.1	95.8	28 <sup>th</sup>	89.4	90.4	91.8	92.3	93.0	93.9	94.6	95.6	96.1
Q12. Dr. explained things	92.2%	41 <sup>st</sup>	86.9	89.8	91.1	91.7	92.7	93.9	94.6	95.9	96.6	37 <sup>th</sup>	89.1	89.7	91.1	92.0	93.3	94.5	95.0	96.0	96.2
Q13. Dr. listened carefully	92.3%	35 <sup>th</sup>	88.4	89.7	91.5	92.2	92.7	93.7	94.3	95.4	95.9	28 <sup>th</sup>	88.8	90.2	92.0	92.5	93.4	94.2	94.7	95.9	96.4
Q14. Dr. showed respect	94.0%	40 <sup>th</sup>	91.2	91.9	93.4	93.8	94.5	95.3	95.6	96.9	97.5	34 <sup>th</sup>	91.1	92.1	93.5	93.8	95.0	95.8	96.2	97.4	98.0
Q15. Dr. spent enough time	90.4%	48 <sup>th</sup>	84.8	86.3	88.4	89.0	90.5	92.0	92.4	94.2	95.0	38 <sup>th</sup>	86.1	87.5	89.2	90.0	91.5	92.6	93.3	95.3	95.8
Q17. Coordination of Care +	78.9%	11 <sup>th</sup>	77.5	78.5	82.2	83.2	85.3	86.7	87.2	89.0	89.4	9 <sup>th</sup>	76.5	78.9	82.3	83.6	86.3	88.4	89.3	91.0	92.7
Q27. Ease of Filling Out Forms + (% U/A)	92.9%	5 <sup>th</sup>	92.7	93.1	94.2	94.8	95.5	96.3	96.5	97.8	98.5	15 <sup>th</sup>	91.2	92.4	93.7	94.1	94.7	95.9	96.2	97.0	97.3

# PROFILE OF SURVEY RESPONDENTS

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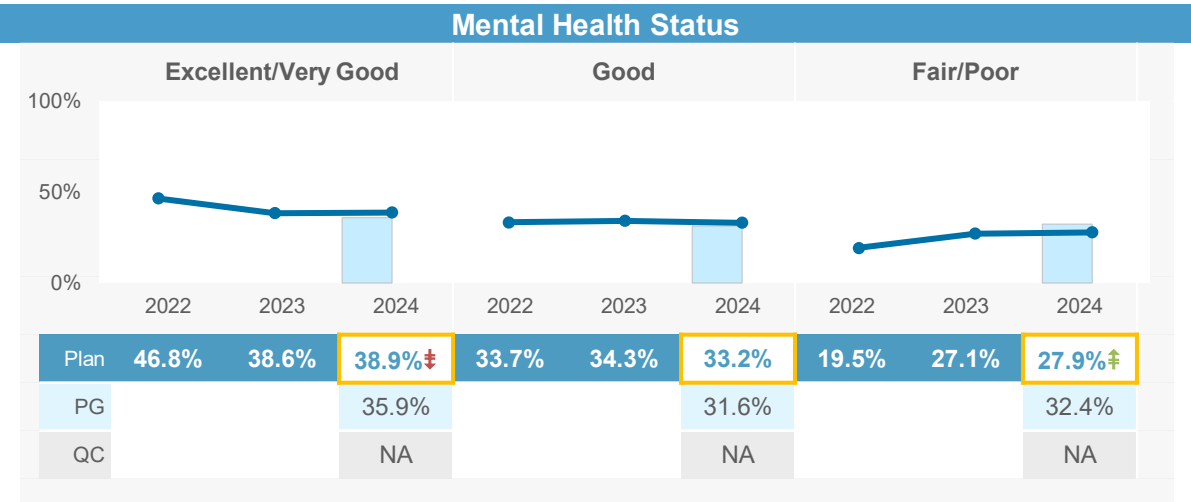
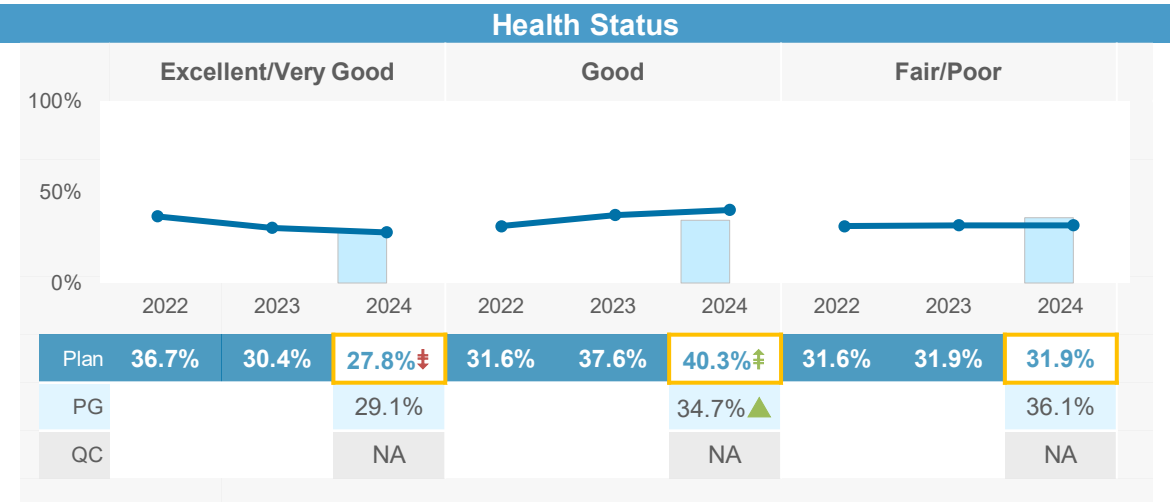
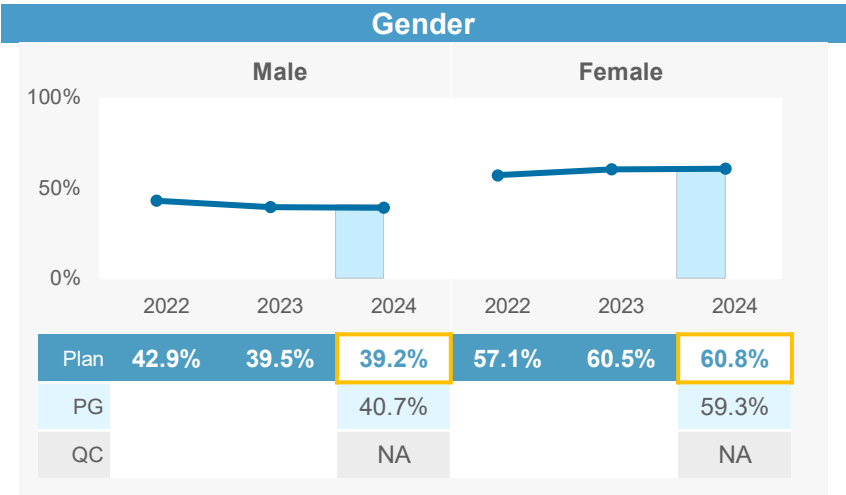
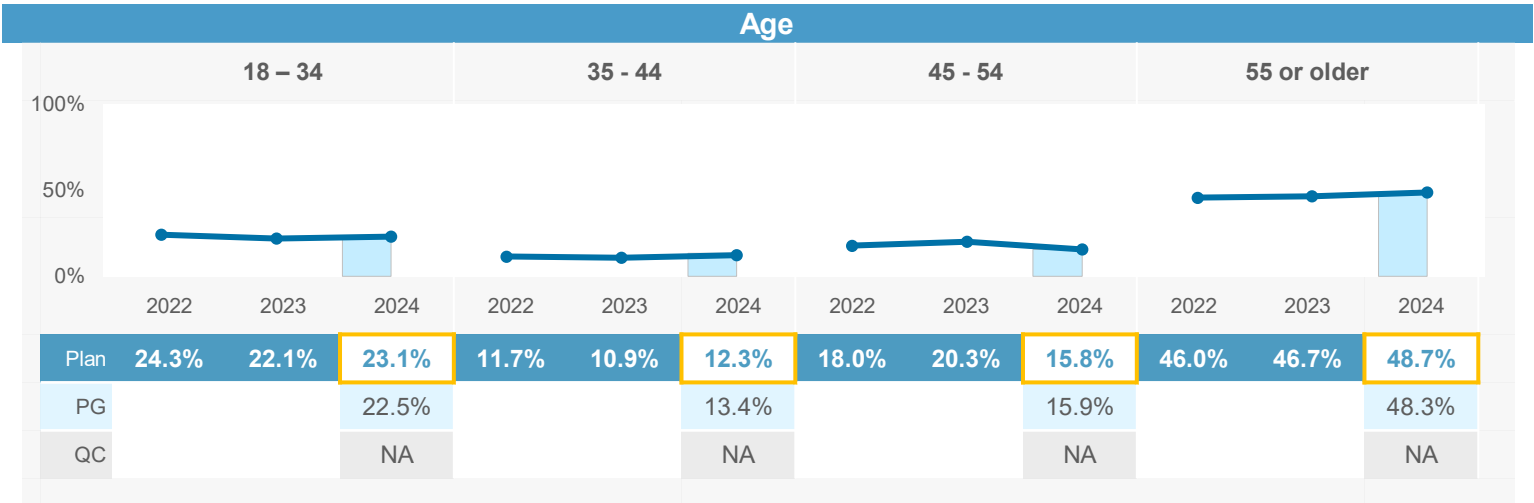
## DEMOGRAPHIC COMPOSITION

- Health Net - MCAL



# PROFILE OF SURVEY RESPONDENTS

MEDICAID ADULT

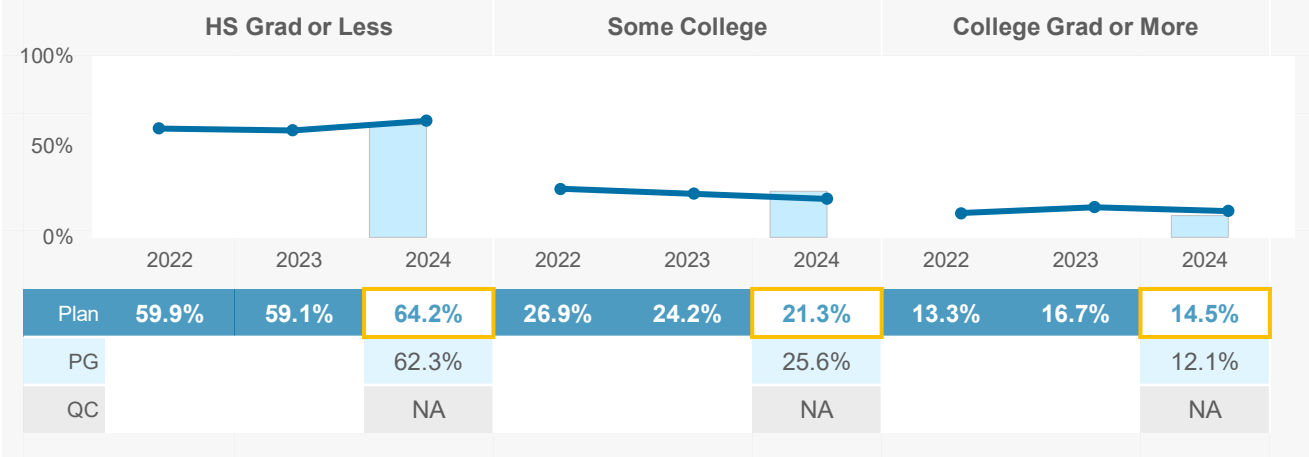


**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↕/↘) or benchmark score (▲/▼).  
**Benchmarks:** PG refers to the 2024 PG Book of Business benchmark. QC refers to the 2023 QC National Data benchmark. NCQA did not publish demographics for the 2023 benchmark.

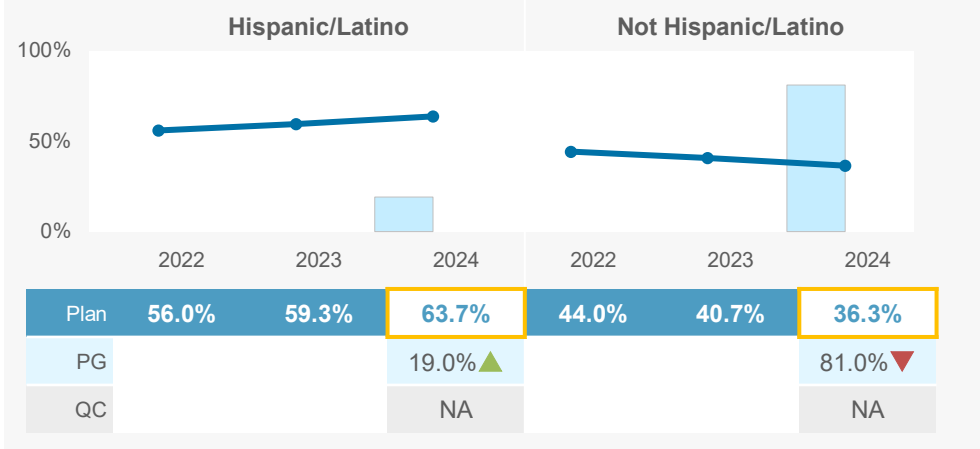
# PROFILE OF SURVEY RESPONDENTS

MEDICAID ADULT

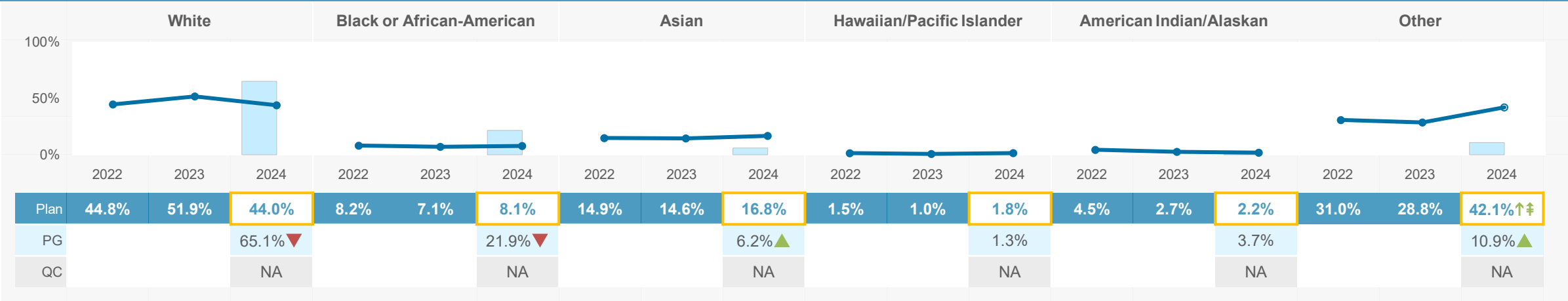
## Education



## Ethnicity



## Race



**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↕/↕) or benchmark score (▲/▼).  
**Benchmarks:** PG refers to the 2024 PG Book of Business benchmark. QC refers to the 2023 QC National Data benchmark. NCQA did not publish demographics for the 2023 benchmark.

# SUPPLEMENTAL QUESTIONS

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- Health Net - MCAL

# SUPPLEMENTAL QUESTIONS

MEDICAID ADULT

	Category Responses Based on Valid Responses Per Question				Summary Rate Score			2024 PG BoB		
					2022	2023	2024			
Q40. Needed an interpreter at Drs. office/clinic (% Yes)	Valid Responses = 307									
	<u>Yes</u>	<u>No</u>			(n=291)	(n=331)	(n=307)	---		
	30.9%	69.1%			15.5%	28.7%	30.9%			
Q41. Rating of provided interpreter overall (% 9 or 10 - Best interpreter possible)	Valid Responses = 164									
I did not need an interpreter in the last 12 months 0	9 or 10 - Best interpreter possible	<u>7-8</u>	<u>0-6</u>			(n=40)	(n=162)	(n=164)	---	
	67.7%	17.1%	15.2%			57.5%	67.3%	67.7%		
Q43. Rescheduled appointment in timely manner (% Always or Usually)	Valid Responses = 249									
Not Applicable 52	<u>Always</u>	<u>Usually</u>	<u>Sometimes</u>	<u>Never</u>			---	(n=256)	(n=249)	---
	32.9%	24.9%	26.1%	16.1%				63.3%	57.8%	
Q44. Waited for appt. because of limited hours or few available appts. (% Never or Sometimes)	Valid Responses = 239									
Not Applicable 64	<u>Always</u>	<u>Usually</u>	<u>Sometimes</u>	<u>Never</u>			(n=213)	(n=246)	(n=239)	---
	11.7%	10.0%	34.7%	43.5%			75.1%	72.8%	78.2%	

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

Low Base: ^Indicates a base size smaller than 20. Interpret results with caution.

**Low Base:** ^Indicates a base size smaller than 20. Interpret results with caution.

# SUPPLEMENTAL QUESTIONS

MEDICAID ADULT

Survey Item			Summary Rate Score			2024 PG BoB
			2022	2023	2024	
Q45. Which CS center have contacted most recently						
Opt-Outs		Total	(n=304)	(n=340)	(n=325)	
Opt Out: I did not contact customer service			147	145	127	
Valid Responses		Base	(n=113)	(n=155)	(n=153)	---
Health Plan's Customer Service (Phone number on ID Card)			29.2%	32.9%	29.4%	
Provider and/or Doctor's Office			54.0%	54.8%	49.7%	
Retail Pharmacy Services			11.5%	9.0%	17.6% <span>↑</span>	
Other			5.3%	3.2%	3.3%	

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

Low Base: ^Indicates a base size smaller than 20. Interpret results with caution.

# SUPPLEMENTAL QUESTIONS

MEDICAID ADULT

Survey Item			Summary Rate Score			2024 PG BoB
			2022	2023	2024	
Q46. Info. not received when contacting CS						
Opt-Outs		Total	(n=113)	(n=340)	(n=325)	
Opt Out: I did not contact customer service			20	166	132	
Opt Out: I received the information I wanted			37	83	81	
Valid Responses		Base	(n=40)	(n=60)	(n=65)	---
Benefits and covered services			30.0%	36.7%	46.2%	
Provider information			22.5%	30.0%	21.5%	
Co-payment, co-insurance, and deductible information			2.5%	8.3%	7.7%	
Claims information			5.0%	8.3%	7.7%	
Membership			10.0%	10.0%	13.8%	
Prescription drug information			22.5%	16.7%	41.5%	↑‡
Other			30.0%	31.7%	16.9%	

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

Low Base: ^Indicates a base size smaller than 20. Interpret results with caution.

# SUPPLEMENTAL QUESTIONS

MEDICAID ADULT

Survey Item			Summary Rate Score			2024 PG BoB
			2022	2023	2024	
Q47. Reasons it was difficult to get appt. with specialist						
Opt-Outs		Total	(n=304)	(n=340)	(n=325)	
Opt Out: I did not have difficulty getting an appointment with a specialist			102	117	119	
Opt Out: I did not make an appointment with a specialist			78	76	79	
Valid Responses		Base	(n=89)	(n=86)	(n=67)	---
Your doctor did not think you needed to see a specialist			9.0%	11.6%	17.9%	
Your health plan approval or authorization was delayed			20.2%	20.9%	23.9%	
You could not get a referral			11.2%	9.3%	7.5%	
You weren't sure where to find a list of specialists in your health plan or network			10.1%	19.8%	13.4%	
The specialists you had to choose from were too far away			12.4%	17.4%	22.4%	
You did not have enough specialists to choose from			9.0%	16.3%	14.9%	
The specialist you wanted did not belong to your health plan or network			13.5%	18.6%	26.9% ↕	
You could not get an appointment at a time that was convenient			29.2%	16.3%	31.3% ↑	
Other			39.3%	25.6%	28.4%	

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

Low Base: ^Indicates a base size smaller than 20. Interpret results with caution.



# APPENDICES

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- APPENDIX A: CORRELATION ANALYSES
- APPENDIX B: QUESTIONNAIRE

# APPENDIX A: CORRELATIONS

MEDICAID ADULT

## Highest Correlations

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

With Health Care Rating		
Q28	Health plan overall	0.7431
Q18	Personal doctor overall	0.6750
Q41	Rating of provided interpreter overall	0.6556
Q4	Got urgent care	0.6141
Q9	Got care/tests/treatment	0.5588
Q22	Specialist overall	0.4968
Q6	Got routine care	0.4480
Q12	Dr. explained things	0.4355
Q13	Dr. listened carefully	0.3813
Q17	Dr. informed about care	0.3748

With Personal Doctor Rating		
Q8	Health care overall	0.6750
Q13	Dr. listened carefully	0.5842
Q41	Rating of provided interpreter overall	0.5605
Q28	Health plan overall	0.5383
Q12	Dr. explained things	0.5216
Q14	Dr. showed respect	0.5187
Q15	Dr. spent enough time	0.4606
Q9	Got care/tests/treatment	0.3926
Q22	Specialist overall	0.3766
Q4	Got urgent care	0.3477

With Specialist Rating		
Q9	Got care/tests/treatment	0.5563
Q8	Health care overall	0.4968
Q27	Easy to fill out forms	0.4448
Q20	Got specialist appt.	0.4365
Q17	Dr. informed about care	0.4357
Q28	Health plan overall	0.4012
Q41	Rating of provided interpreter overall	0.3913
Q18	Personal doctor overall	0.3766
Q12	Dr. explained things	0.3685
Q14	Dr. showed respect	0.3240

# APPENDIX B: QUESTIONNAIRE

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SURVEY INSTRUCTIONS

- ◆ Answer each question by marking the box to the left of your answer.
- ◆ You are sometimes told to skip over some questions in this survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:

☒ Yes ➔ *If Yes, Go to Question 1*  
☐ No

*Personally identifiable information will not be made public and will only be released in accordance with federal laws and regulations. You may choose to answer this survey or not. If you choose not to, this will not affect the benefits you get. You may notice a number on the back of this survey. This number is ONLY used to let us know if you returned your survey so we don't have to send you reminders. If you want to know more about this study, please call 1-888-797-3605.*

1. Our records show that you are now in Health Net Community Solutions. Is that right?

- ☐ Yes ➔ *If 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 needed care right away?

- ☐ Yes  
☐ No ➔ *If No, Go to Question 5*

4. In the last 6 months, when you needed care right away, 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 check-up or routine care?

- ☐ Yes  
☐ No ➔ *If No, Go to Question 7*

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

- ☐ Never  
☐ Sometimes  
☐ Usually  
☐ Always

THANK YOU. Please return the completed survey in the postage-paid envelope.

PressGaney

P.O. Box 7315  
South Bend, IN 46699-0488

7. In the last 6 months, not 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 ➔ *If 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 Worst health care possible
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 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 ➔ *If 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 ➔ *If 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 ➔ *If No, Go to Question 18*

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44. In the last 6 months, how often did you have to wait for an appointment because the health provider you wanted to see worked limited hours or had few available appointments?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always
- ☐ Not Applicable

45. Which customer service center have you contacted most recently within the last 6 months?

- ☐ Health Plan’s Customer Service (Phone number on ID Card)
- ☐ Provider and/or Doctors Office
- ☐ Retail Pharmacy Services
- ☐ Other (Please specify):

- ☐ I did not contact customer service

46. What type of information did you not receive that you wanted when you contacted customer service? (Please select all that apply)

- ☐ Benefits and covered services
- ☐ Provider information
- ☐ Co-payment, co-insurance, and deductible information
- ☐ Claims information
- ☐ Membership
- ☐ Prescription drug information
- ☐ Other (Please specify):

- ☐ I received the information I wanted
- ☐ I did not contact customer service

47. Were any of the following an important reason it was difficult to get an appointment with a specialist? (Please select all that apply)

- ☐ I did not have difficulty getting an appointment with a specialist
- ☐ I did not make an appointment with a specialist
- ☐ Your doctor did not think you needed to see a specialist
- ☐ Your health plan approval or authorization was delayed
- ☐ You could not get a referral
- ☐ You weren’t sure where to find a list of specialists in your health plan or network
- ☐ The specialists you had to choose from were too far away
- ☐ You did not have enough specialists to choose from
- ☐ The specialist you wanted did not belong to your health plan or network
- ☐ You could not get an appointment at a time that was convenient
- ☐ Other (Please specify):

Thank You  
Please return the completed survey in the postage-paid envelope or send to:  
Press Ganey • P.O. Box 7315  
South Bend, IN 46699-0488

If you have any questions, please call 1-888-797-3605.

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 Worst personal doctor possible
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 Best personal doctor 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 ➔ If 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 ➔ If 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 Worst specialist possible
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 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 ➔ If 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 ➔ *If 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 Worst health plan possible
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 Best health plan 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 mental or emotional 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 ➔ *If Not at all, Go to Question 35*
- ☐ Don’t know ➔ *If 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

ADDITIONAL QUESTIONS

Now we would like to ask a few more questions about the services your health plan provides.

40. An interpreter is someone who helps you talk with others who do not speak your language. Interpreters can include staff from the doctor’s office, or telephone interpreters. In the last 6 months, was there any time when you needed an interpreter at this doctor’s office?

- ☐ Yes
- ☐ No

41. We want to know your rating of the interpreter provided by this doctor’s office that you saw most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst interpreter possible and 10 is the best interpreter possible, what number would you use to rate the interpreter provided by this doctor’s office you had most often in the last 6 months?

- ☐ 0 Worst interpreter possible
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 Best interpreter possible

42. In the last 6 months, when you got to your main doctor’s office, how long did you usually have to wait after your set appointment time?

- ☐ 15 minutes or less
- ☐ 16–30 minutes
- ☐ 31–45 minutes
- ☐ 46 minutes to 1 hour
- ☐ Over 1 hour
- ☐ Does not apply, I did not have any appointments in the last 6 months

43 In the last 6 months, not counting the times you needed care right away, how often were you able to reschedule an appointment in a timely manner?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always
- ☐ Not Applicable