



Department of  
Job and Family Services

**2011 CAHPS®  
OHIO'S COVERED FAMILIES AND  
CHILDREN MEDICAID  
MANAGED CARE PROGRAM  
MEMBER SATISFACTION SURVEY**

**Children with Chronic Conditions Report**

**March 2012**



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# Introduction

## OVERVIEW

The Ohio Department of Job and Family Services (ODJFS) conducts a variety of quality assessment and improvement activities to ensure Medicaid managed care plan (MCP) members have timely access to high quality health care services. These activities include annual surveys of member satisfaction. Survey results provide important feedback on MCP performance, which is used to improve overall member satisfaction with managed care programs.

ODJFS administers member satisfaction surveys for all MCPs in Ohio's Covered Families and Children (CFC) and Aged, Blind, or Disabled (ABD) Medicaid Managed Care Programs. In 2011, the ABD and CFC Medicaid Managed Care Programs were surveyed independently. This report presents survey results for child members in Ohio's CFC Medicaid Managed Care Program.<sup>1</sup> The standard survey instrument selected for 2011 for the CFC child population was the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) 4.0H Child Medicaid Health Plan Survey (with the chronic conditions measurement set).<sup>2</sup> Seven MCPs participated in the 2011 CAHPS 4.0H Child Medicaid Health Plan Survey, as listed in Table A-1 below.<sup>3</sup> The parents or caretakers of child members from each MCP completed the survey from February through May 2011.

<b>Table A-1 Ohio's CFC Medicaid Managed Care Program Participating MCPs</b>	
<b>MCP Name</b>	<b>MCP Abbreviation</b>
AMERIGROUP Ohio, Inc.	AMERIGROUP
Buckeye Community Health Plan	Buckeye
CareSource	CareSource
Molina Healthcare of Ohio, Inc.	Molina
Paramount <i>Advantage</i>	Paramount
UnitedHealthcare Community Plan of Ohio, Inc.	UnitedHealthcare
WellCare of Ohio, Inc.	WellCare

ODJFS administered the 2011 CAHPS Surveys through a contract with Health Services Advisory Group, Inc. (HSAG), its External Quality Review Organization vendor. This Ohio CFC Medicaid Managed Care Program CAHPS Children with Chronic Conditions (CCC) Report is one of four separate reports created by HSAG to provide ODJFS with a comprehensive analysis of the 2011

<sup>1</sup> Please refer to Ohio's CFC Medicaid Managed Care Program CAHPS Full Report and Executive Summary Report for detailed information regarding the CFC adult population and to Ohio's ABD Medicaid Managed Care Program CAHPS reports for detailed information regarding the ABD population.

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

<sup>3</sup> UnitedHealthcare Community Plan of Ohio, Inc. (UnitedHealthcare) was previously referred to as Unison Health Plan of Ohio, Inc. (Unison). In April 2011, Unison changed its name to UnitedHealthcare.

Ohio CFC Medicaid Managed Care Program CAHPS results. Information on all four reports can be found in Ohio's CFC Medicaid Managed Care Program CAHPS Methodology Report. Similar reports were created to provide ODJFS with a comprehensive analysis of the 2011 Ohio ABD Medicaid Managed Care Program CAHPS results. Information on these reports can be found in Ohio's ABD Medicaid Managed Care Program CAHPS Methodology Report.

## **SAMPLING PROCEDURES**

### **Sample Frame**

HSAG followed the National Committee for Quality Assurance (NCQA) Healthcare Effectiveness Data and Information Set (HEDIS) Specifications for Survey Measures in conducting the CAHPS 4.0H Child Medicaid Health Plan Survey.<sup>4</sup> The members eligible for sampling included those who were MCP members at the time the sample was drawn, who were 17 years of age or younger (as of December 31, 2010), and who were continuously enrolled in the MCP for at least five of the last six months (July through December) of 2010. A sample frame of 884,278 child members was produced by ODJFS and provided to HSAG.

### **Sample Size**

A random sample of up to 1,650 child members was selected from each participating MCP for the NCQA CAHPS 4.0H child sample, which represents the general population of children. Child members in the CAHPS 4.0H child sample were given a chronic condition prescreen status code of 1 or 2. A prescreen code of 1 indicated that the member had claims or encounters that did not suggest the member had a greater probability of having a chronic condition. A prescreen code of 2 (also known as a positive prescreen status code) indicated the member had claims or encounters that suggested the member had a greater probability of having a chronic condition.<sup>5</sup> A total of 11,550 child surveys for children in the CAHPS 4.0H child sample were mailed out for the seven participating MCPs in the State of Ohio. After selecting child members for the CAHPS 4.0H child sample, a random sample of 1,840 child members with a prescreen code of 2 was selected from each MCP for the NCQA CCC supplemental sample, which represents the population of children who are more likely to have a chronic condition. A total of 12,880 child surveys for children in the CCC supplemental sample were mailed out for the participating MCPs. There were 3,490 child members selected from each participating MCP, and a total of 24,430 child surveys for children in the CAHPS 4.0H child sample and the CCC supplemental sample were mailed for the seven participating MCPs. Please note, child members in both the CAHPS 4.0H child sample and CCC supplemental sample received the same CAHPS 4.0H Child Medicaid Health Plan Survey (with chronic conditions measurement set) instrument. The CAHPS 4.0H Child Medicaid Health Plan Survey included a number of questions comprising a CCC screener. This screener is used to identify children with chronic conditions from both the CAHPS 4.0H child sample and CCC supplemental sample. The results presented in this Ohio's CFC Medicaid Managed Care Program

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<sup>4</sup> National Committee for Quality Assurance. *HEDIS 2011, Volume 3: Specifications for Survey Measures*. Washington, DC: NCQA Publication, 2010.

<sup>5</sup> Ibid.

CAHPS CCC Report are based on the responses of parents or caretakers of children with and without chronic conditions. Additional information on the CCC population and CCC screener can be found beginning on page B-4.

NCQA protocol permits oversampling in 5 percent increments. Given the large number of child members sampled from each MCP, no oversampling was performed on the child population.

## **SURVEY PROTOCOL**

The survey administration protocol was designed to achieve a high response rate from members, thus minimizing the potential effects of non-response bias. The survey process allows for two methods by which members can complete the survey. The first phase, or mail phase, consisted of a survey being mailed to all sampled members. For Ohio's CFC Medicaid Managed Care Program, all sampled members received an English version of the survey. A reminder postcard was sent to all non-respondents, followed by a second survey mailing and second reminder postcard. The second phase, or telephone phase, consisted of Computer Assisted Telephone Interviewing (CATI) of sampled members who had not mailed in a completed survey. A series of at least three CATI calls was made to each non-respondent.<sup>6</sup>

HEDIS specifications require that HSAG be provided a list of all eligible members for the sampling frame.

Following HEDIS requirements, HSAG sampled members who met the following criteria:

- Were 17 years of age or younger as of December 31, 2010
- Were currently enrolled in the MCP
- Had been continuously enrolled for at least five of the last six months of 2010
- Had Medicaid as the primary payer

HSAG inspected a sample of the records to check for any apparent problems with the files such as missing address elements. All sampled records from each MCP were passed through the United States Postal Service's National Change of Address (NCOA) system to obtain new addresses for members who had moved (if they had given the Postal Service a new address). Prior to initiating CATI, HSAG employed the TeleMatch telephone number verification service to locate and/or update telephone numbers for all non-respondents. Following NCQA requirements, the survey samples were randomly selected with no more than one member being selected per household.

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<sup>6</sup> National Committee for Quality Assurance. *Quality Assurance Plan for HEDIS® 2011 Survey Measures*. Washington, DC: NCQA Publication, 2010.

The HEDIS specifications for CAHPS require that the name of the health plan appear in the questionnaires, letters, and postcards; that the letters and postcards bear the signature of a high ranking health plan or State official; and that the questionnaire packages include a postage-paid reply envelope addressed to the organization conducting the survey. HSAG complied with these specifications.

According to HEDIS specifications for the CAHPS 4.0H Health Plan Surveys, this survey was completed using the time frame shown in Table A-2.

<b>Table A-2 CAHPS 4.0H Survey Time Frame<sup>7</sup></b>	
<b>Basic Tasks for Conducting the Survey</b>	<b>Time Frame</b>
Send first questionnaire with cover letter to the parents/caretakers of child member	0 days
Send a postcard reminder to non-respondents four to 10 days after mailing the first questionnaire	4 – 10 days
Send a second questionnaire (and letter) to non-respondents approximately 35 days after mailing the first questionnaire	35 days
Send a second postcard reminder to non-respondents four to 10 days after mailing the second questionnaire	39 – 45 days
Initiate CATI for non-respondents approximately 21 days after mailing the second questionnaire	56 days
Initiate systematic contact for all non-respondents such that at least three telephone calls are attempted at different times of the day, on different days of the week, and in different weeks	56 – 70 days
Telephone follow-up sequence completed (i.e., completed interviews obtained or maximum calls reached for all non-respondents) approximately 14 days after initiation	70 days

<sup>7</sup> National Committee for Quality Assurance. *HEDIS 2011, Volume 3: Specifications for Survey Measures*. Washington, DC: NCQA Publication, 2010.

## **RESPONSE RATES**

The administration of the CAHPS 4.0H Health Plan Surveys is comprehensive and is designed to achieve the highest possible response rate. A high response rate facilitates the generalization of the survey responses to an MCP's population. The response rate is the total number of completed surveys divided by all eligible members of the sample.<sup>8</sup> A member's survey is assigned a disposition code of "completed" if any one question was answered within the survey. Eligible members include the entire random sample minus ineligible members. Ineligible members of the sample met one or more of the following criteria: were deceased, were invalid (did not meet the eligible population criteria described on page A-3), or had a language barrier. For additional information on the calculation of a completed survey and response rates, please refer to Ohio's CFC Medicaid Managed Care Program CAHPS Methodology Report.

A total of 9,781 parents or caretakers of child members returned a completed survey.<sup>9</sup> Of the 9,781 completed surveys, 3,941 were from children identified as having a chronic condition (CCC population) and 5,840 were from children who did not have a chronic condition (non-CCC population). This represents a response rate for the child population of 40.92 percent for Ohio's CFC Medicaid Managed Care Program.

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<sup>8</sup> National Committee for Quality Assurance. *HEDIS 2011, Volume 3: Specifications for Survey Measures*. Washington, DC: NCQA Publication, 2010.

<sup>9</sup> Please note, this includes all children sampled (both the CAHPS 4.0H child sample and the CCC supplemental sample). Per NCQA protocol, children in the CCC supplemental sample are not included in NCQA's standard child response rate calculations. Therefore, the overall child response rates reported in this section should not be compared to the NCQA response rates provided in Ohio's CFC Medicaid Managed Care Program CAHPS Full Report and Executive Summary Report.

# Demographics

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This Demographics section depicts the characteristics of child members with chronic conditions (the CCC population) and child members without chronic conditions (the non-CCC population). It also depicts the characteristics of respondents who completed the CAHPS 4.0H Child Medicaid Health Plan Survey.<sup>1</sup> In general, the demographics of a response group influence the overall results. For example, older and healthier respondents tend to report higher levels of satisfaction.<sup>2</sup>

The demographic data are presented in two sections. The first section consists of two tables, Table B-1 and Table B-2, which depict respondent-level and member-level demographic data, respectively. Member age, gender, and race and ethnicity information were derived from ODJFS administrative data. Member general health status and respondent age, gender, education, and relationship to child information were derived from responses to the Child Medicaid Health Plan Survey. The second section contains two tables, Table B-3 and Table B-4, and discusses the CCC population and how this population was identified.

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<sup>1</sup> The parents or caretakers of child members completed the CAHPS 4.0H Child Medicaid Health Plan Survey on behalf of child members.

<sup>2</sup> Agency for Healthcare Research and Quality. *CAHPS Health Plan Survey and Reporting Kit 2008*. Rockville, MD: US Department of Health and Human Services, July 2008.

## RESPONDENT PROFILES

Respondents to the CAHPS 4.0H Child Medicaid Health Plan Survey were the parents or caretakers of child members. Table B-1 depicts the demographic characteristics of the respondents who completed the CAHPS 4.0H Child Medicaid Health Plan Survey on behalf of child members in the CCC and non-CCC populations. Respondent relationship to child, age, gender, and education were derived from responses to the Child Medicaid Health Plan Survey.

<b>Table B-1 Respondent Profiles</b>		
	<b>Ohio's CFC Medicaid Managed Care Program CCC Population</b>	<b>Ohio's CFC Medicaid Managed Care Program Non-CCC Population</b>
<b>Respondent Relationship to Child</b>		
Parent	86.7%	92.2%
Grandparent	8.4%	5.2%
Other	4.9%	2.7%
<b>Age</b>		
Under 18	6.0%	6.0%
18 to 24	5.4%	13.5%
25 to 34	35.1%	38.9%
35 to 44	30.7%	27.2%
45 to 54	14.3%	10.2%
55 or older	8.5%	4.3%
<b>Gender</b>		
Male	8.3%	10.5%
Female	91.7%	89.5%
<b>Education</b>		
Not a HS Graduate	15.2%	17.1%
HS Graduate	38.4%	40.6%
Some College	40.0%	36.1%
College Graduate	6.5%	6.1%
<i>Please note, percentages may not total 100% due to rounding.</i>		

## MEMBER PROFILES

Table B-2 presents the demographic characteristics of the child members with and without chronic conditions in Ohio's CFC Medicaid Managed Care Program whose parents or caretakers completed the CAHPS 4.0H Child Medicaid Health Plan Survey. Age, gender, and race and ethnicity were derived from ODJFS administrative data. Health status was derived from responses to the Child Medicaid Health Plan Survey.

<b>Table B-2 Child Member Profiles</b>		
	<b>Ohio's CFC Medicaid Managed Care Program CCC Population</b>	<b>Ohio's CFC Medicaid Managed Care Program Non-CCC Population</b>
<b>Age</b>		
Less than 2	5.2%	15.9%
2 to 4	13.2%	21.3%
5 to 7	16.7%	16.6%
8 to 10	21.5%	14.0%
11 to 13	19.9%	13.6%
14 to 17	23.4%	18.7%
<b>Gender</b>		
Male	58.5%	50.3%
Female	41.5%	49.7%
<b>Race and Ethnicity</b>		
White	75.6%	70.7%
Black	21.3%	24.7%
Hispanic	2.7%	3.8%
Asian	0.4%	0.9%
Native American	0.0%	0.0%
Other	0.0%	0.0%
<b>Health Status</b>		
Excellent	16.7%	44.6%
Very Good	40.0%	39.4%
Good	33.5%	14.4%
Fair	8.9%	1.5%
Poor	0.9%	0.1%
<i>Please note, percentages may not total 100% due to rounding.</i>		

## **CHRONIC CONDITIONS CLASSIFICATION**

Meeting the health care needs of children with chronic conditions is costly, and the majority of national health care funds spent on children are spent on the CCC population.<sup>3</sup> Children with chronic conditions often access more services and different types of services than the non-CCC population. The parents or caretakers of children with chronic conditions also have different needs than the caregivers of children without chronic conditions. Assessing member satisfaction for the CCC population versus the non-CCC population can provide valuable information to MCPs regarding quality improvement activities they can implement to address the needs of both populations. The State of Ohio wants to ensure that the needs of families with children with chronic conditions are being met. One way to evaluate whether or not these needs are being met is to compare the satisfaction ratings of families with children with chronic conditions to the satisfaction ratings of families that have children without chronic conditions. The State of Ohio can then determine whether there are significant differences between the satisfaction ratings of the two populations and address these differences.

A series of questions used to identify children with chronic conditions was included in the CAHPS 4.0H Child Medicaid Health Plan Survey distributed to Ohio's CFC Medicaid Managed Care Program child members. This series contained five sets of survey questions that focus on specific health care needs and conditions. Child members with affirmative responses to all of the questions in at least one of the following five categories were considered to have a chronic condition:

- Child needed or used prescription medicine
- Child needed or used more medical care, mental health services, or educational services than other children of the same age need or use
- Child had limitations in the ability to do what other children of same age do
- Child needed or used special therapy
- Child needed or used mental health treatment or counseling

The survey responses for child members in the CAHPS 4.0H child sample and the CCC supplemental sample were analyzed to determine which child members have chronic conditions. Therefore, the general population of children (i.e., those in the CAHPS 4.0H child sample) included children with and without chronic conditions based on the responses to the survey questions. For each category, the first question was a gate item for the second question, except for the "Mental Health Services" category. These questions asked whether the child's use, need, or limitations were due to a health condition. Respondents that selected "No" to the first question were instructed to skip subsequent questions in the category. The second question in each category was a gate item for the third question. It asked whether the condition had lasted or was expected to last at least 12 months. Respondents that selected "No" to the second question were instructed

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<sup>3</sup> National Committee for Quality Assurance. *HEDIS 2011, Volume 3: Specifications for Survey Measures*. Washington, DC: NCQA Publication, 2010.

to skip the third question in the category. For the “Mental Health Services” category, there were only two screener questions. The first question was a gate item for the second question that asked respondents whether the condition had lasted or was expected to last at least 12 months. Respondents that selected “No” to the first question were instructed to skip the second question in this category. Table B-3, on page B-6, displays the responses to the five categories of questions for all children sampled. Ohio’s CFC Medicaid Managed Care Program CCC population included children in the CAHPS 4.0H child sample and in the CCC supplemental sample with affirmative responses to all questions in any of the five categories. Additional information on the CAHPS 4.0H child sample and the CCC supplemental sample can be found beginning on page A-2.

**Table B-3**  
**Responses to CCC Screener Questions**  
**Response of “Yes”**

	Ohio’s CFC Medicaid Managed Care Program CCC Population	Ohio’s CFC Medicaid Managed Care Program Non-CCC Population
<b>Prescription Medicine</b>		
Needs/Uses Prescription Medicine	84.4%	13.7%
Due to Health Condition	98.5%	39.8%
Condition Duration of at Least 12 Months	98.7%	0.0%
<b>More Care</b>		
Needs/Uses More Care	52.5%	3.3%
Due to Health Condition	96.5%	34.9%
Condition Duration of at Least 12 Months	99.0%	0.0%
<b>Functional Limitations</b>		
Limited Abilities	30.2%	4.2%
Due to Health Condition	94.7%	13.3%
Condition Duration of at Least 12 Months	99.3%	0.0%
<b>Special Therapy</b>		
Needs/Gets Therapy	20.3%	4.9%
Due to Health Condition	87.4%	19.7%
Condition Duration of at Least 12 Months	97.2%	0.0%
<b>Mental Health Services</b>		
Needs/Gets Counseling	48.1%	2.6%
Condition Duration of at Least 12 Months	97.6%	0.0%

*Please note, the parents or caretakers of child members in the CAHPS 4.0H child sample and the CCC supplemental sample responded to the CCC screener questions. Percentages represent the number of respondents with a response of “Yes” to the question divided by the total number of respondents to the question. The percentage of “Yes” responses to the last question in each category of screener questions for members in Ohio’s CFC Medicaid Managed Care Program Non-CCC population is always 0 percent because a “Yes” response to the final question in a category would qualify the member as having a chronic condition and therefore that member would not be part of Ohio’s CFC Medicaid Managed Care Program Non-CCC population.*

*For each category of screener questions, except for the “Mental Health Services” category, the first question was a gate item for the second question, and asked whether the child’s use or need was due to a health condition. Respondents who selected “No” to the first question were instructed to skip subsequent questions in the category. The second question in each category of screener questions was a gate item for the third question, and asked whether the condition has lasted or was expected to last at least 12 months. Respondents who selected “No” to the second question were instructed to skip the third question in the category. For the “Mental Health Services” category, there were only two screener questions. The first question was a gate item for the second question, and asked whether the condition has lasted or was expected to last at least 12 months. Respondents who selected “No” to the first question were instructed to skip the second question in this category.*

A total of 40.3 percent of all child members for whom a survey was completed (27.4 percent of child members in the CAHPS 4.0H child sample and 50.9 percent of child members in the CCC supplemental sample) had a chronic condition based on “Yes” responses to all of the questions in at least one of the five categories listed in Table B-3. Table B-4 depicts the percentage of children with chronic conditions with affirmative responses to all questions in any of the five categories. A child member can appear in more than one category. For example, a child member may have affirmative responses to all of the questions within the Prescription Medicine category and also have affirmative responses to all of the questions within the Functional Limitations category.

<b>Table B-4</b>					
<b>Distribution of Categories for Children with Chronic Conditions Population</b>					
	<b>Prescription Medicine</b>	<b>More Care</b>	<b>Functional Limitations</b>	<b>Special Therapy</b>	<b>Mental Health Service</b>
<b>Ohio's CFC Medicaid Managed Care Program CCC Population</b>	80.9%	48.7%	27.2%	16.5%	45.4%
<i>Please note, a child member may appear in more than one category</i>					

# Ohio CCC Comparisons

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This Ohio CCC Comparisons section presents 2010 and 2011 CAHPS results based on ODJFS' analytic methodology, which uses the Agency for Healthcare Research and Quality's (AHRQ's) CAHPS analysis program. The CAHPS results presented in this section are designed to meet the reporting needs of the State of Ohio and contain case-mix-adjusted results for the child members whose parents or caretakers completed a CAHPS 4.0H Child Medicaid Health Plan Survey. According to AHRQ recommendations, results were case-mix-adjusted for reported member health status, respondent educational level, and respondent age.<sup>1</sup> Additional information on the case-mix adjustment can be found in Ohio's CFC Medicaid Managed Care Program CAHPS Methodology Report. For the Ohio CCC Comparisons section, no threshold number of responses was required for the results to be reported. In 2010, Ohio's CFC Medicaid Managed Care Program had 4,323 completed surveys for the CCC population and 6,379 completed surveys for the non-CCC population. These 10,702 surveys were used to calculate the 2010 CAHPS results presented in this section for trending purposes.<sup>2</sup> In 2011, Ohio's CFC Medicaid Managed Care Program had 3,941 completed surveys for the CCC population and 5,840 completed surveys for the non-CCC population. These 9,781 surveys were used to calculate the 2011 CAHPS results presented in this section.

For each global rating, composite measure, item within a composite measure, and individual item measure, an overall mean was calculated. For global ratings, the overall mean was provided on a scale of 0 to 10. For the composite measures, composite items, and individual item measures, the overall mean was provided on a three-point scale. Members' responses were classified into one of three response categories for each global rating, composite measure, composite item, and individual item measure. For the global ratings, the response categories were: "0 to 6," "7 to 8," and "9 to 10." The Getting Needed Care, Getting Care Quickly, How Well Doctors Communicate, and Customer Service composite measures and items response categories were: "Never/Sometimes," "Usually," and "Always." The Shared Decision Making composite measure and items response categories were: "Definitely No/Somewhat No," "Somewhat Yes," and "Definitely Yes." For the individual item measures, Coordination of Care and Health Promotion and Education, the response categories were: "Never/Sometimes," "Usually," and "Always."

Specific survey questions pertaining to the following four areas of interest were also analyzed: Satisfaction with Health Plan, Satisfaction with Health Care Providers, Access to Care, and Utilization of Services. One-point means (for "Yes/No" items) or three-point means were calculated for each of these survey questions. The scale used to calculate the overall means varied by question and is provided within the discussion of each question. Members' responses to

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<sup>1</sup> Agency for Healthcare Research and Quality. *CAHPS Health Plan Survey and Reporting Kit 2008*. Rockville, MD: US Department of Health and Human Services, July 2008.

<sup>2</sup> For detailed information on the 2010 Ohio CFC Medicaid Managed Care Program CAHPS analysis, please refer to the Ohio CCC Comparisons section in the 2010 Ohio CFC Medicaid Managed Care Program CAHPS CCC Report.

questions within these areas of interest were also classified into response categories and are described in detail within the discussion of each of these questions.

For each CCC composite measure and CCC item measure, a one-point or a three-point overall mean was calculated.<sup>3</sup> Member responses were also classified into response categories. For the Family-Centered Care (FCC): Personal Doctor Who Knows Child and the Coordination of Care for Children with Chronic Conditions composites, and the items within these CCC composites, the response categories were: “No” and “Yes.” For the Access to Specialized Services CCC composite, and the items within this CCC composite, the response categories were: “Never/Sometimes,” “Usually,” and “Always.” For the CCC item measures, Access to Prescription Medications and FCC: Getting Needed Information, the response categories were: “Never/Sometimes,” “Usually,” and “Always.”

The Ohio CCC Comparisons section presents two different types of analyses. The first type of analysis involves a comparison of the 2011 results for the two populations, CCC and non-CCC. This population-to-population comparative analysis identifies whether one population performed statistically higher, the same, or lower on each measure than the other population. The second type of analysis presented in this section involves a comparison of each population’s 2011 scores to its 2010 scores. This trending analysis identifies populations that performed statistically higher, the same, or lower in 2011 than in 2010.

## **COMPARATIVE ANALYSIS**

Case-mix-adjusted mean scores for the CCC population in 2011 for the global ratings, composite measures, composite items, individual items, questions within the areas of interest, CCC composite measures, and CCC item measures were compared to the case-mix-adjusted mean scores for the non-CCC population in 2011 to determine whether there were statistically significant differences between the results for each population.<sup>4</sup> For additional information on these tests for statistical significance, please refer to Ohio’s CFC Medicaid Managed Care Program CAHPS Methodology Report.

Statistically significant differences between the 2011 mean scores for the CCC and non-CCC populations are noted with arrows.<sup>5</sup> Scores for one population that are statistically higher than scores for the other population are noted with upward (↑) arrows. Conversely, scores for one population that are statistically lower than scores for the other population are noted with

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<sup>3</sup> The Family-Centered Care (FCC): Personal Doctor Who Knows Child and the Coordination of Care for Children with Chronic Conditions composites consist of questions with “Yes” and “No” response categories, where a response of “Yes” is given a score of “1” and a response of “No” is given a score of “0.” Therefore, these CCC composites have a maximum mean score of 1.0, and three-point means cannot be calculated for these CCC composite measures.

<sup>4</sup> The term “mean scores” refers to the overall means and the response category proportions.

<sup>5</sup> Please note, statistically significant differences between 2010 mean scores for the CCC population and the 2010 mean scores for the non-CCC population are not included in this report. To obtain the 2010 population-to-population comparative analysis results, please refer to the Ohio CCC Comparisons section in the 2010 Ohio CFC Medicaid Managed Care Program CAHPS CCC Report.

downward (↓) arrows. Scores for one population that are not statistically different from the other population are not noted with arrows. If it is true that one population's mean score is significantly higher (↑) than that of the other's, then it follows that the other population's mean score is significantly lower (↓). Therefore, in the figures presented in this section, a pair of arrows (↑ and ↓) on a mean or a response category percentage is indicative of a single statistical test and is noted as one statistically significant difference in the narrative rather than two. For example, if it is true that the percentage of CCC respondents who gave a rating of 7 to 8 was significantly lower than that of non-CCC respondents, then it must be true that the percentage of non-CCC respondents who gave a rating of 7 to 8 was significantly higher than that of CCC respondents. This represents one statistically significant difference.

## **TRENDING ANALYSIS**

For each population, its case-mix-adjusted mean scores and response category proportions in 2011 were compared to its case-mix-adjusted mean scores and response category proportions in 2010 to determine whether there were statistically significant differences. For additional information on the tests for statistical significance used in these trend comparisons, please refer to Ohio's CFC Medicaid Managed Care Program CAHPS Methodology Report.

Statistically significant differences between mean scores in 2011 and mean scores in 2010 for each population are noted with directional triangles.<sup>6</sup> Scores that are statistically higher in 2011 than in 2010 are noted with upward (▲) triangles. Scores that are statistically lower in 2011 than in 2010 are noted with downward (▼) triangles. Scores in 2011 that are not statistically different from scores in 2010 are not noted with triangles. A detailed description of how to read the figures within the Ohio CCC Comparisons section can be found in the Reader's Guide (Section D) of this report.

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<sup>6</sup> The term "mean scores" refers to the overall means and the response category proportions.

## **GLOBAL RATINGS**

### **Rating of Health Plan**

The parents or caretakers of child members in Ohio's CFC Medicaid Managed Care Program were asked to rate their child's health plan on a scale of 0 to 10, with 0 being the "worst health plan possible" and 10 being the "best health plan possible." For the overall rating of health plan question, an overall mean was calculated for the CCC and non-CCC populations. Responses were also classified into three categories: 0 to 6 (worst); 7 to 8; and 9 to 10 (best). Figure C-1 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

#### *Comparative Analysis*

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

#### *Trending Analysis*

Overall, there were six *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

- The overall means for CCC respondents and non-CCC respondents were significantly higher in 2011 than in 2010. Furthermore, the percentage of CCC respondents and non-CCC respondents who gave a response of 0 to 6 was significantly lower in 2011 than in 2010, whereas the percentage of CCC respondents and non-CCC respondents who gave a response of 9 to 10 was significantly higher in 2011 than in 2010.



## **Rating of All Health Care**

The parents or caretakers of child members in Ohio's CFC Medicaid Managed Care Program were asked to rate their child's health care on a scale of 0 to 10, with 0 being the "worst health care possible" and 10 being the "best health care possible." For the overall rating of health care question, an overall mean was calculated for the CCC and non-CCC populations. Responses were also classified into three categories: 0 to 6 (worst); 7 to 8; and 9 to 10 (best). Figure C-2 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

### ***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

### ***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.



## **Rating of Personal Doctor**

The parents or caretakers of child members in Ohio's CFC Medicaid Managed Care Program were asked to rate their child's personal doctor on a scale of 0 to 10, with 0 being the "worst personal doctor possible" and 10 being the "best personal doctor possible." For the overall rating of personal doctor question, an overall mean was calculated for the CCC and non-CCC populations. Responses were also classified into three categories: 0 to 6 (worst); 7 to 8; and 9 to 10 (best). Figure C-3 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

### ***Comparative Analysis***

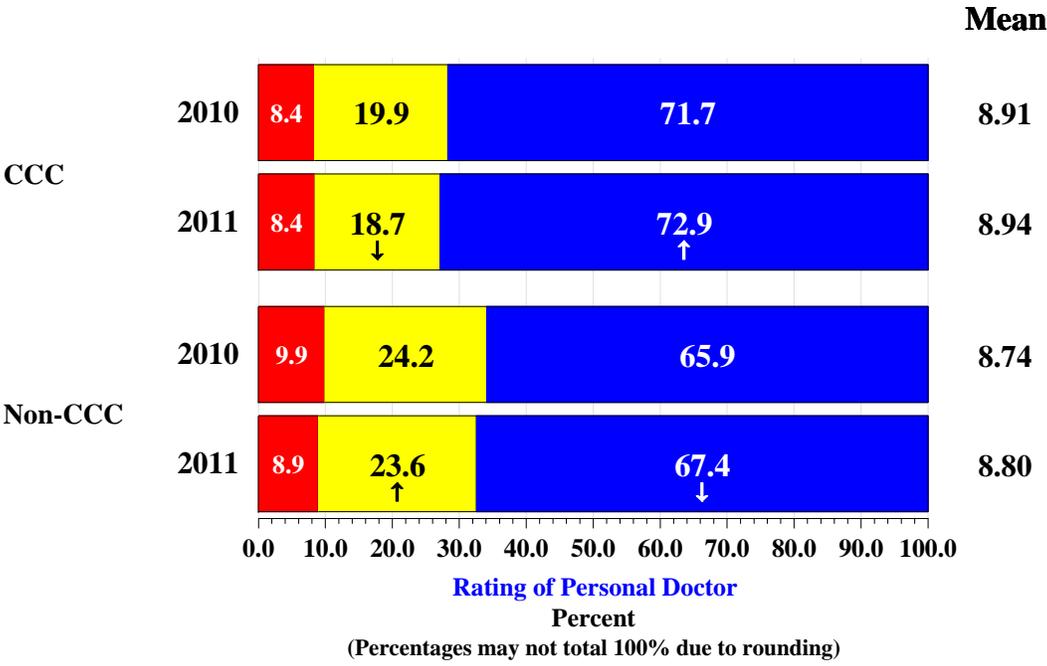
Overall, there were two *statistically significant* differences observed for this measure.

- The percentage of CCC respondents who gave a response of 7 to 8 was significantly lower than that of non-CCC respondents, whereas the percentage of CCC respondents who gave a response of 9 to 10 was significantly higher than that of non-CCC respondents.

### ***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

**Figure C-3**  
**Rating of Personal Doctor**



Statistical Significance Note:    ↑ indicates the score is significantly higher than the other population  
     ↓ indicates the score is significantly lower than the other population  
     ▲ indicates the 2011 score is significantly higher than the 2010 score  
     ▼ indicates the 2011 score is significantly lower than the 2010 score

## **Rating of Specialist Seen Most Often**

The parent or caretakers of child members in Ohio's CFC Medicaid Managed Care Program were asked to rate their child's specialist on a scale of 0 to 10, with 0 being the "worst specialist possible" and 10 being the "best specialist possible." For the overall rating of specialist question, an overall mean was calculated for the CCC and non-CCC populations. Responses were also classified into three categories: 0 to 6 (worst); 7 to 8; and 9 to 10 (best). Figure C-4 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

### *Comparative Analysis*

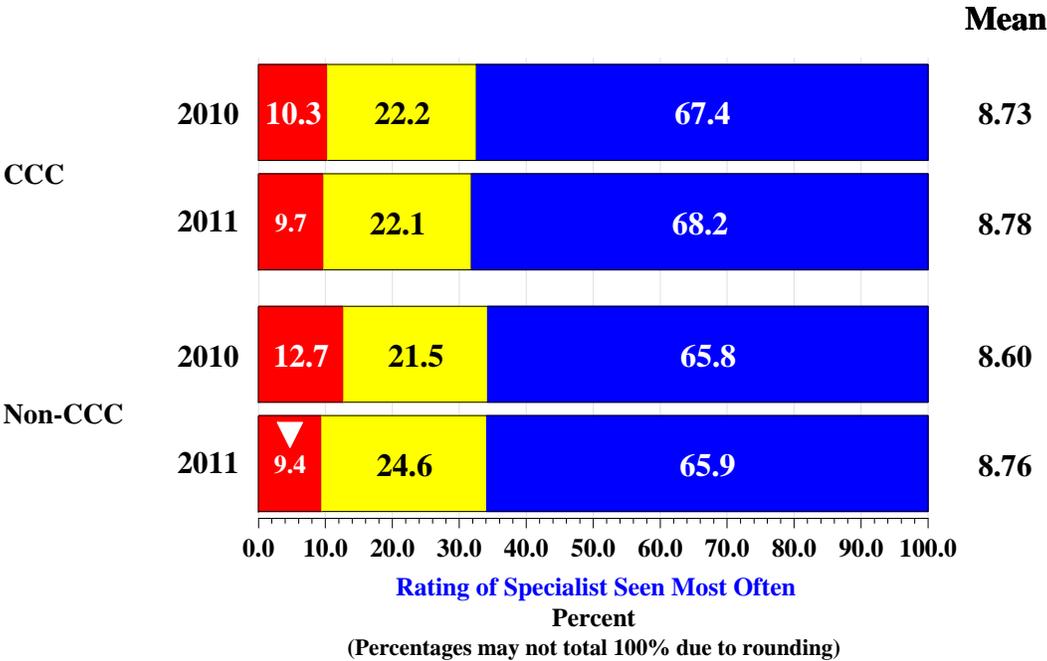
Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

### *Trending Analysis*

Overall, there was one *statistically significant* difference between scores in 2011 and scores in 2010 for this measure.

- The percentage of non-CCC respondents who gave a response of 0 to 6 was significantly lower in 2011 than in 2010.

**Figure C-4**  
**Rating of Specialist Seen Most Often**



Statistical Significance Note:    ↑ indicates the score is significantly higher than the other population  
    ↓ indicates the score is significantly lower than the other population  
    ▲ indicates the 2011 score is significantly higher than the 2010 score  
    ▼ indicates the 2011 score is significantly lower than the 2010 score

## **COMPOSITES AND COMPOSITE ITEMS**

### **Getting Needed Care**

A series of two questions was asked in order to assess how often it was easy to get needed care. For each of these questions (Questions 44 and 48 in the CAHPS Child Medicaid Health Plan Survey), an overall mean was calculated for the CCC and non-CCC populations. Responses were also classified into three categories: “Never/Sometimes,” “Usually,” and “Always.” Figure C-5 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

#### *Comparative Analysis*

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

#### *Trending Analysis*

Overall, there were four *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

- The overall means for CCC respondents and non-CCC respondents were significantly higher in 2011 than in 2010. Furthermore, the percentage of CCC respondents and non-CCC respondents who gave a response of Never/Sometimes was significantly lower in 2011 than in 2010.



***Getting Needed Care: Seeing a Specialist***

Question 44 in the CAHPS Child Medicaid Health Plan Survey asked the parents or caretakers of child members to rate how often it was easy for members to get appointments with specialists. Figure C-6 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

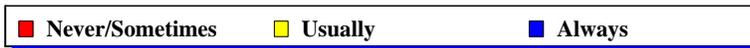
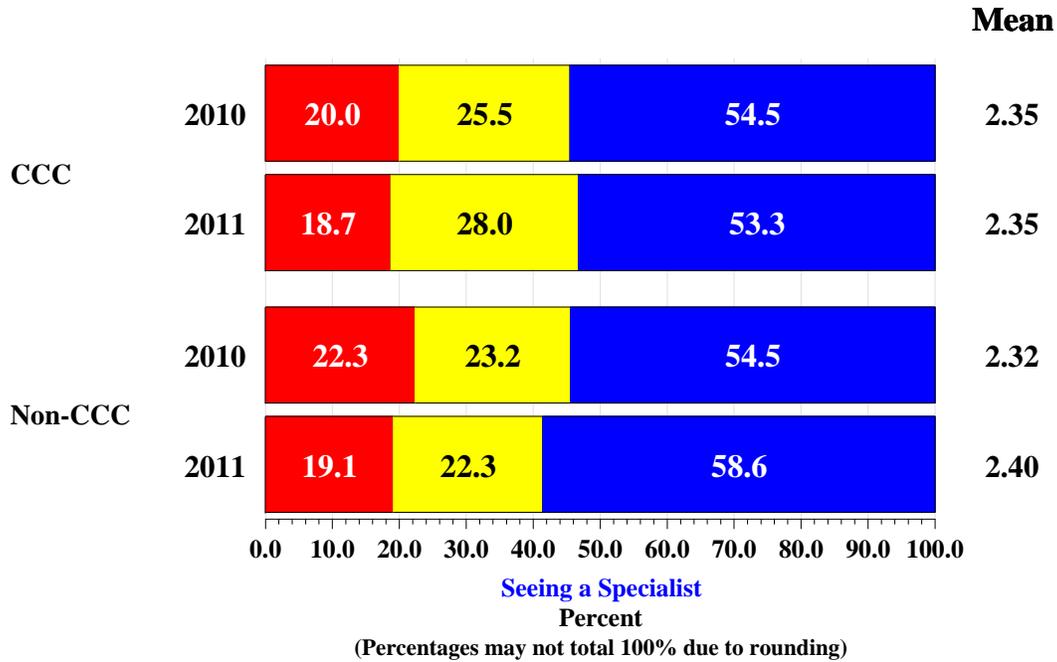
***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

**Figure C-6**  
**Getting Needed Care Composite:**  
**Seeing a Specialist**



Statistical Significance Note:    ↑ indicates the score is significantly higher than the other population  
     ↓ indicates the score is significantly lower than the other population  
     ▲ indicates the 2011 score is significantly higher than the 2010 score  
     ▼ indicates the 2011 score is significantly lower than the 2010 score

***Getting Needed Care: Getting Care Believed Necessary***

Question 48 in the CAHPS Child Medicaid Health Plan Survey asked the parents or caretakers of child members to rate how often it was easy to get the care, tests, or treatment they thought their child needed. Figure C-7 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there were three *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

- The overall mean for CCC respondents was significantly higher in 2011 than in 2010. Furthermore, the percentage of CCC respondents who gave a response of Never/Sometimes was significantly lower in 2011 than in 2010, whereas the percentage of CCC respondents who gave a response of Always was significantly higher in 2011 than in 2010.



## **Getting Care Quickly**

A series of two questions was asked in order to assess how often members received care quickly. For each of these questions (Questions 4 and 6 in the CAHPS Child Medicaid Health Plan Survey), an overall mean was calculated for the CCC and non-CCC populations. Responses were also classified into three categories: “Never/Sometimes,” “Usually,” and “Always.” Figure C-8 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

### *Comparative Analysis*

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

### *Trending Analysis*

Overall, there was one *statistically significant* difference between scores in 2011 and scores in 2010 for this measure.

- The percentage of CCC respondents who gave a response of Usually was significantly lower in 2011 than in 2010.



***Getting Care Quickly: Received Care as Soon as Wanted When Needed Right Away***

Question 4 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often they received care as soon as they wanted for their child when they needed care right away. Figure C-9 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there was one *statistically significant* difference between scores in 2011 and scores in 2010 for this measure.

- The percentage of CCC respondents who gave a response of Usually was significantly lower in 2011 than in 2010.



***Getting Care Quickly: Received Appointment as Soon as Wanted When Care Not Needed Right Away***

Question 6 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often they received an appointment as soon as they wanted for their child when their child did not need care right away. Figure C-10 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

***Comparative Analysis***

Overall, there were two *statistically significant* differences observed for this measure.

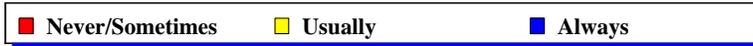
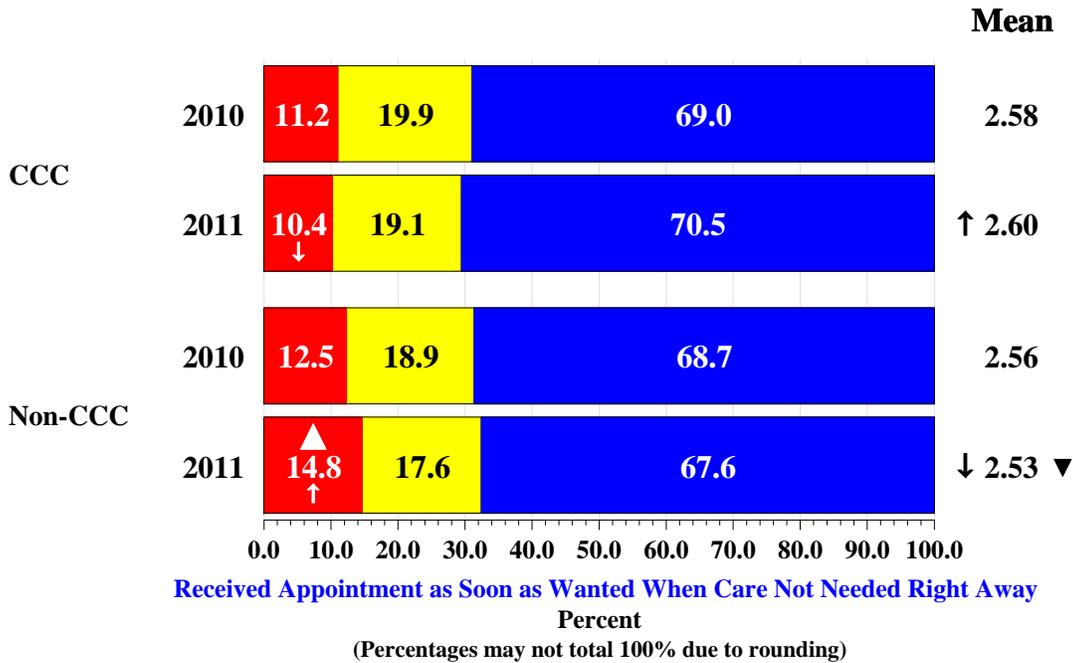
- The overall mean for CCC respondents was significantly higher than that of non-CCC respondents. The percentage of CCC respondents who gave a response of Never/Sometimes was significantly lower than that of non-CCC respondents.

***Trending Analysis***

Overall, there were two *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

- The overall mean for non-CCC respondents was significantly lower in 2011 than in 2010. Furthermore, the percentage of non-CCC respondents who gave a response of Never/Sometimes was significantly higher in 2011 than in 2010.

**Figure C-10**  
**Getting Care Quickly Composite:**  
**Received Appointment as Soon as Wanted**  
**When Care Not Needed Right Away**



Statistical Significance Note: ↑ indicates the score is significantly higher than the other population  
 ↓ indicates the score is significantly lower than the other population  
 ▲ indicates the 2011 score is significantly higher than the 2010 score  
 ▼ indicates the 2011 score is significantly lower than the 2010 score

## **How Well Doctors Communicate**

A series of four questions was asked in order to assess how often doctors communicated well. For each of these questions (Questions 30, 31, 32, and 35 in the CAHPS Child Medicaid Health Plan Survey), an overall mean was calculated for the CCC and non-CCC populations. Responses were also classified into three categories: “Never/Sometimes,” “Usually,” and “Always.” Figure C-11 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

### *Comparative Analysis*

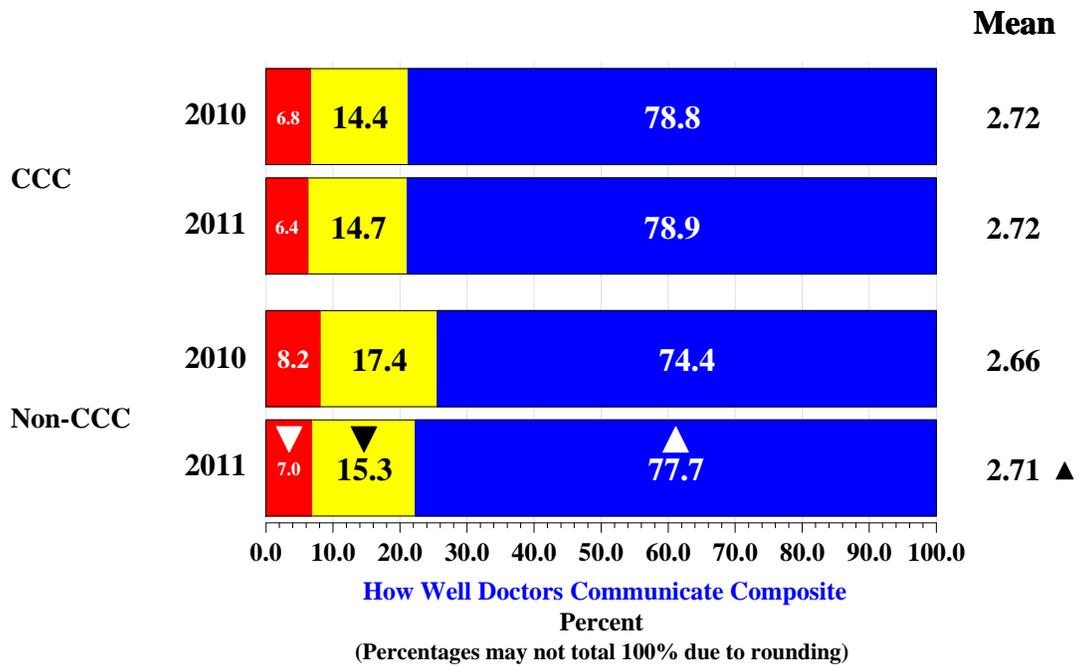
Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

### *Trending Analysis*

Overall, there were four *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

- The overall mean for non-CCC respondents was significantly higher in 2011 than in 2010. The percentage of non-CCC respondents who gave a response of Never/Sometimes was significantly lower in 2011 than in 2010, similarly the percentage of non-CCC respondents who gave a response of Usually was significantly lower in 2011 than in 2010 and the percentage of non-CCC respondents who gave a response of Always was significantly higher in 2011 than in 2010.

Figure C-11  
 How Well Doctors Communicate Composite



Statistical Significance Note: ↑ indicates the score is significantly higher than the other population  
 ↓ indicates the score is significantly lower than the other population  
 ▲ indicates the 2011 score is significantly higher than the 2010 score  
 ▼ indicates the 2011 score is significantly lower than the 2010 score

***How Well Doctors Communicate: Doctors Listened Carefully***

Question 31 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members to rate how often doctors listened carefully to them. Figure C-12 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

***Comparative Analysis***

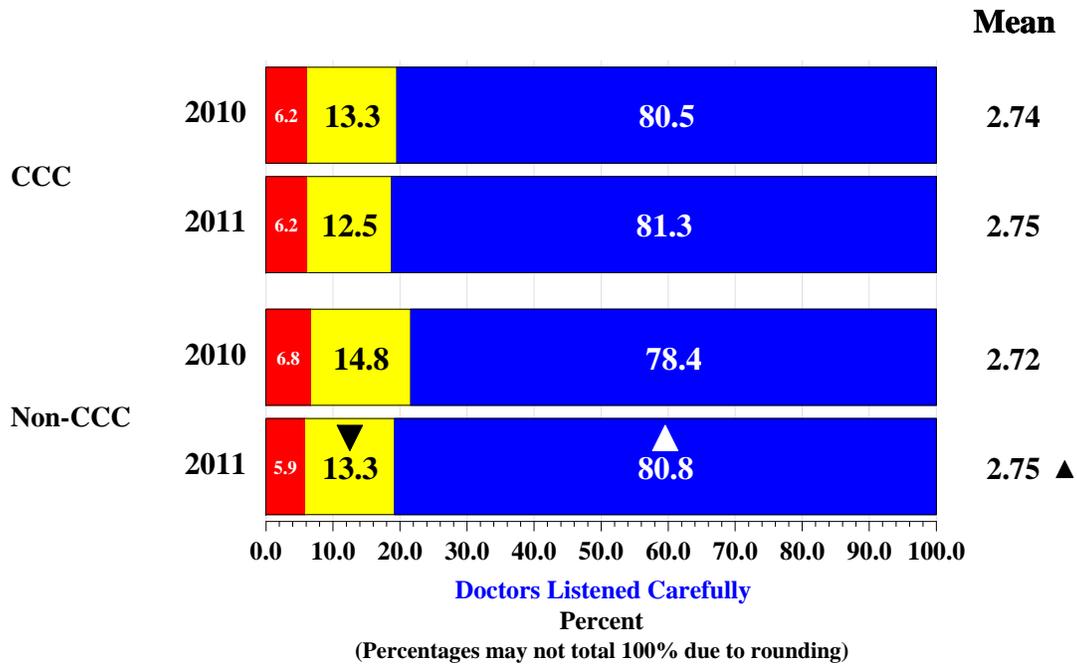
Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there were three *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

- The overall mean for non-CCC respondents was significantly higher in 2011 than in 2010. Furthermore, the percentage of non-CCC respondents who gave a response of Usually was significantly lower in 2011 than in 2010, whereas the percentage of non-CCC respondents who gave a response of Always was significantly higher in 2011 than in 2010.

Figure C-12  
 How Well Doctors Communicate Composite:  
 Doctors Listened Carefully



Statistical Significance Note: ↑ indicates the score is significantly higher than the other population  
 ↓ indicates the score is significantly lower than the other population  
 ▲ indicates the 2011 score is significantly higher than the 2010 score  
 ▼ indicates the 2011 score is significantly lower than the 2010 score

***How Well Doctors Communicate: Doctors Explained Things in Way They Could Understand***

Question 30 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members to rate how often doctors explained things in a way they could understand. Figure C-13 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there were four *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

- The overall mean for non-CCC respondents was significantly higher in 2011 than in 2010. The percentage of non-CCC respondents who gave a response of Never/Sometimes was significantly lower in 2011 than in 2010, similarly the percentage of non-CCC respondents who gave a response of Usually was significantly lower in 2011 than in 2010 and the percentage of non-CCC respondents who gave a response of Always was significantly higher in 2011 than in 2010.



***How Well Doctors Communicate: Doctors Showed Respect***

Question 32 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members to rate how often doctors showed respect for what they had to say. Figure C-14 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there were four *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

- The overall mean for non-CCC respondents was significantly higher in 2011 than in 2010. The percentage of non-CCC respondents who gave a response of Never/Sometimes was significantly lower in 2011 than in 2010, similarly the percentage of non-CCC respondents who gave a response of Usually was significantly lower in 2011 than in 2010 and the percentage of non-CCC respondents who gave a response of Always was significantly higher in 2011 than in 2010.



***How Well Doctors Communicate: Doctors Spent Enough Time With Patient***

Question 35 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members to rate how often doctors spent enough time with their child. Figure C-15 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

***Comparative Analysis***

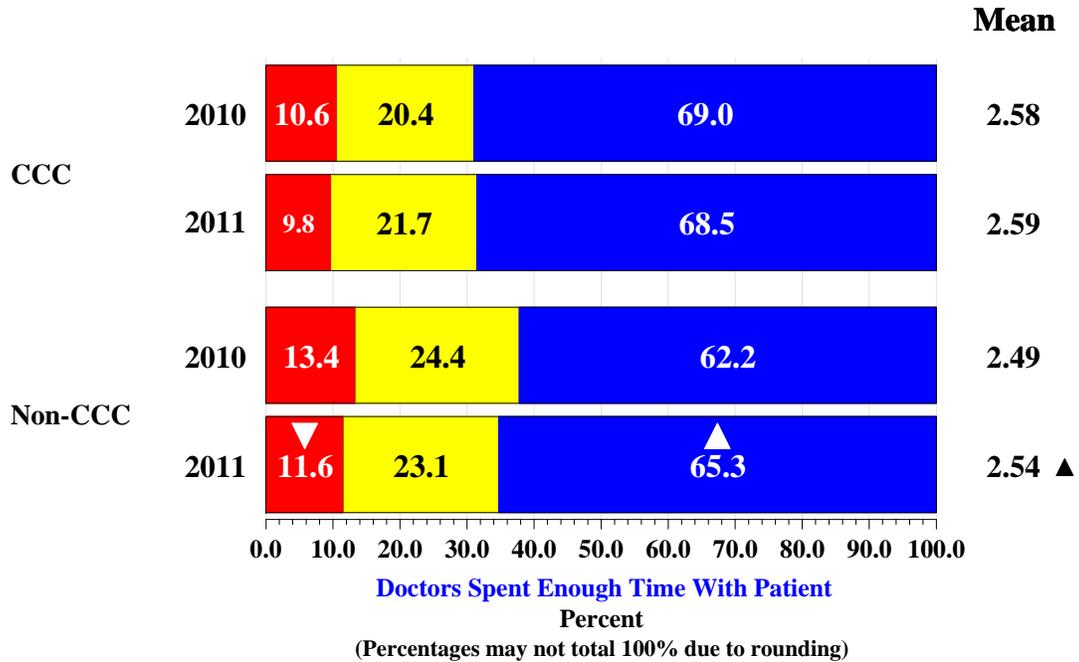
Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there were three *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

- The overall mean for non-CCC respondents was significantly higher in 2011 than in 2010. Furthermore, the percentage of non-CCC respondents who gave a response of Never/Sometimes was significantly lower in 2011 than in 2010, whereas the percentage of non-CCC respondents who gave a response of Always was significantly higher in 2011 than in 2010.

**Figure C-15**  
**How Well Doctors Communicate Composite:**  
**Doctors Spent Enough Time With Patient**



Statistical Significance Note:    ↑ indicates the score is significantly higher than the other population  
    ↓ indicates the score is significantly lower than the other population  
    ▲ indicates the 2011 score is significantly higher than the 2010 score  
    ▼ indicates the 2011 score is significantly lower than the 2010 score

## **Customer Service**

Two questions were asked in order to assess how often the parents or caretakers of child members were satisfied with customer service. For each of these questions (Questions 50 and 51 in the CAHPS Child Medicaid Health Plan Survey), an overall mean was calculated for the CCC and non-CCC populations. Responses were also classified into three categories: “Never/Sometimes,” “Usually,” and “Always.” Figure C-16 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

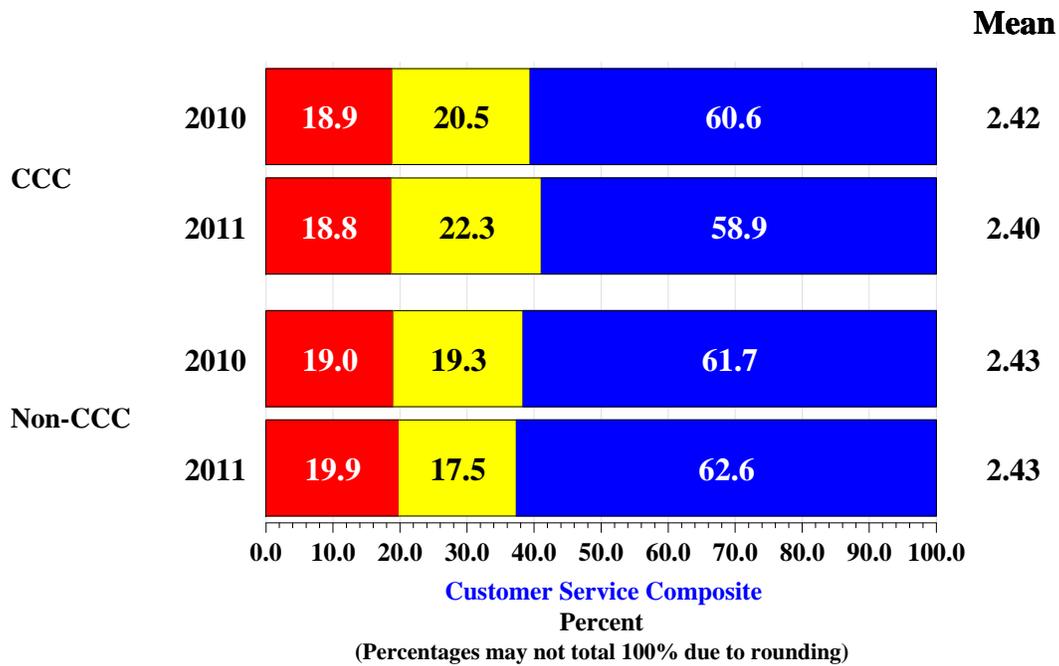
### *Comparative Analysis*

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

### *Trending Analysis*

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

**Figure C-16**  
**Customer Service Composite**



Statistical Significance Note:    ↑ indicates the score is significantly higher than the other population  
     ↓ indicates the score is significantly lower than the other population  
     ▲ indicates the 2011 score is significantly higher than the 2010 score  
     ▼ indicates the 2011 score is significantly lower than the 2010 score

***Customer Service: Obtaining Help Needed From Customer Service***

Question 50 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often the health plan's customer service gave members the information or help they needed. Figure C-17 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

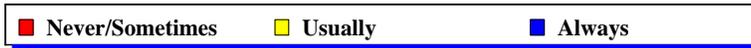
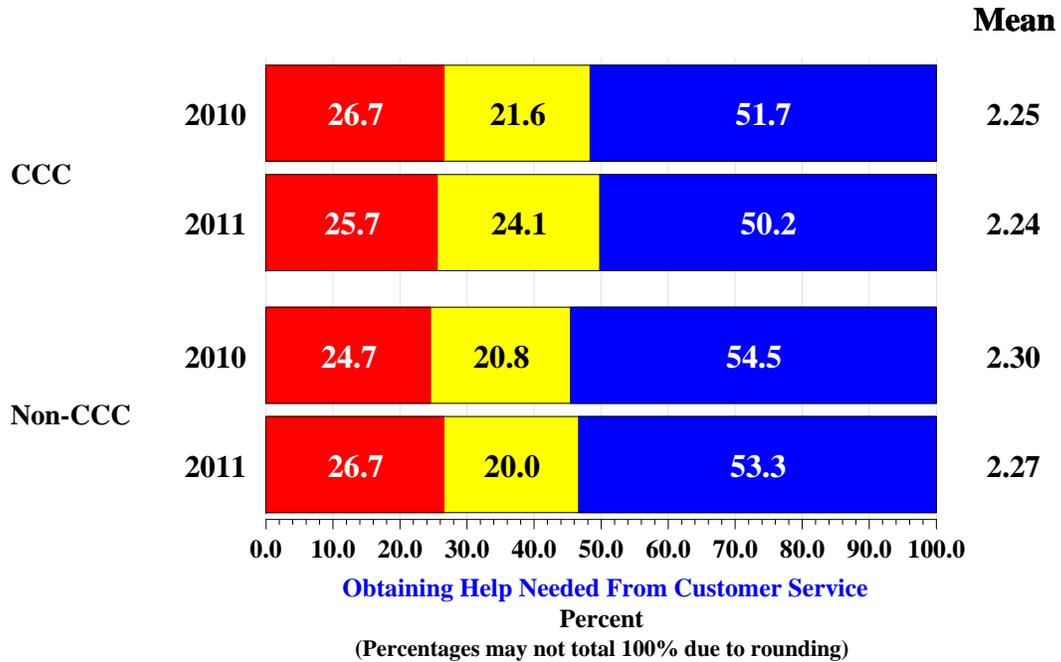
***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

**Figure C-17**  
**Customer Service Composite:**  
**Obtaining Help Needed From Customer Service**



Statistical Significance Note:

- ↑ indicates the score is significantly higher than the other population
- ↓ indicates the score is significantly lower than the other population
- ▲ indicates the 2011 score is significantly higher than the 2010 score
- ▼ indicates the 2011 score is significantly lower than the 2010 score

***Customer Service: Health Plan Customer Service Treated with Courtesy and Respect***

Question 51 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often the health plan's customer service staff treated them with courtesy and respect. Figure C-18 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

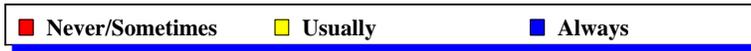
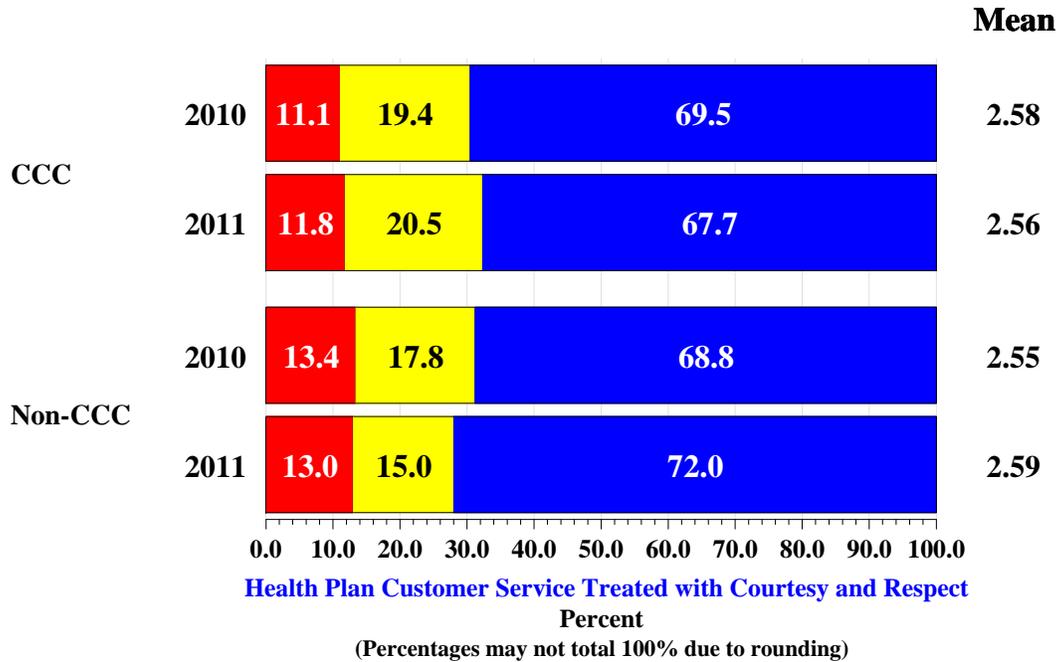
***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

**Figure C-18**  
**Customer Service Composite:**  
**Health Plan Customer Service Treated with Courtesy and Respect**



Statistical Significance Note:

- ↑ indicates the score is significantly higher than the other population
- ↓ indicates the score is significantly lower than the other population
- ▲ indicates the 2011 score is significantly higher than the 2010 score
- ▼ indicates the 2011 score is significantly lower than the 2010 score

## **Shared Decision Making**

Two questions were asked regarding the involvement of members in decision making when there was more than one choice for their child's treatment or health care. For each of these questions (Questions 11 and 12 in the CAHPS Child Medicaid Health Plan Survey), an overall mean was calculated for the CCC and non-CCC populations. Responses were also classified into three categories: "Definitely No/Somewhat No," "Somewhat Yes," and "Definitely Yes." Figure C-19 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

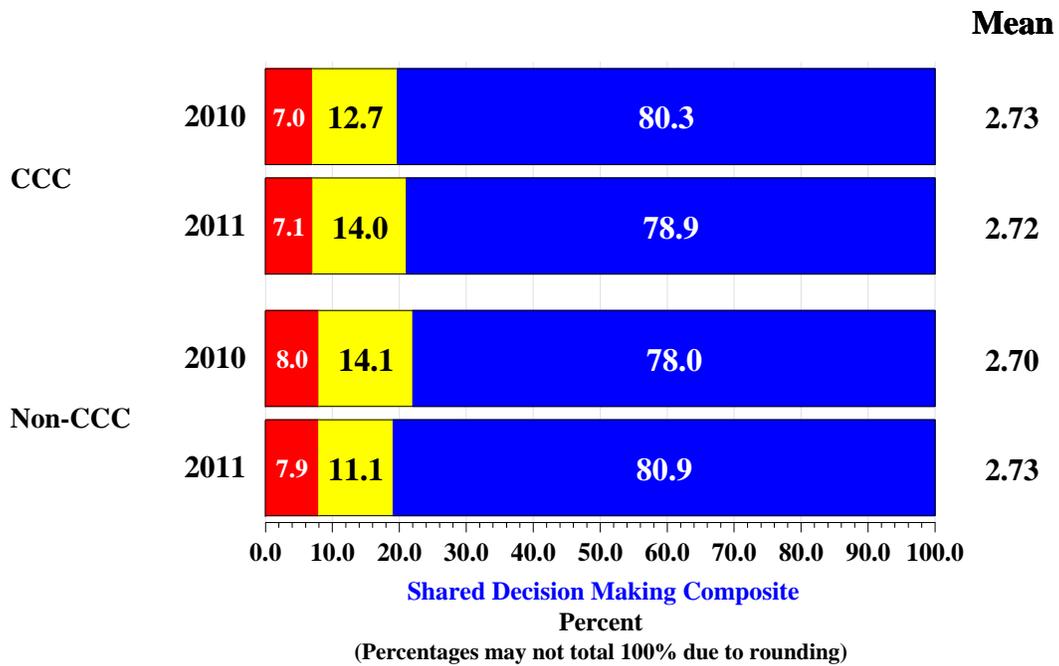
### *Comparative Analysis*

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

### *Trending Analysis*

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

**Figure C-19**  
**Shared Decision Making Composite**



Statistical Significance Note:

- ↑ indicates the score is significantly higher than the other population
- ↓ indicates the score is significantly lower than the other population
- ▲ indicates the 2011 score is significantly higher than the 2010 score
- ▼ indicates the 2011 score is significantly lower than the 2010 score

***Shared Decision Making: Doctor Talk About Pros and Cons of Treatment Choices***

Question 11 asked parents or caretakers of child members if a doctor or other health provider talked with them about the pros and cons of each choice for their child's treatment or health care. Figure C-20 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

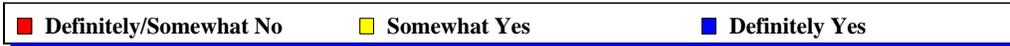
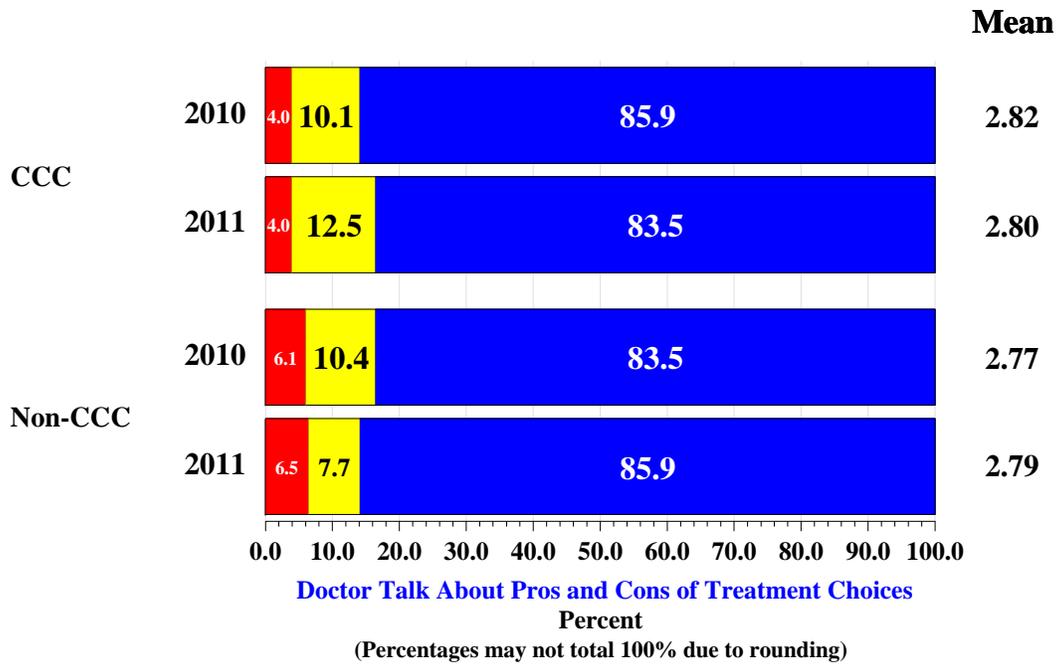
***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

**Figure C-20**  
**Shared Decision Making Composite:**  
**Doctor Talk About Pros and Cons of Treatment Choices**



Statistical Significance Note:

- ↑ indicates the score is significantly higher than the other population
- ↓ indicates the score is significantly lower than the other population
- ▲ indicates the 2011 score is significantly higher than the 2010 score
- ▼ indicates the 2011 score is significantly lower than the 2010 score

***Shared Decision Making: Doctor Ask About Best Treatment Choice for You***

Question 12 asked parents or caretakers of child members if a doctor or other health provider talked with them about the pros and cons of each choice for their child's treatment or health care. Figure C-21 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

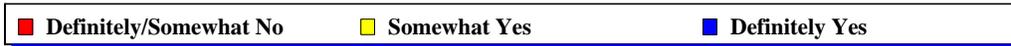
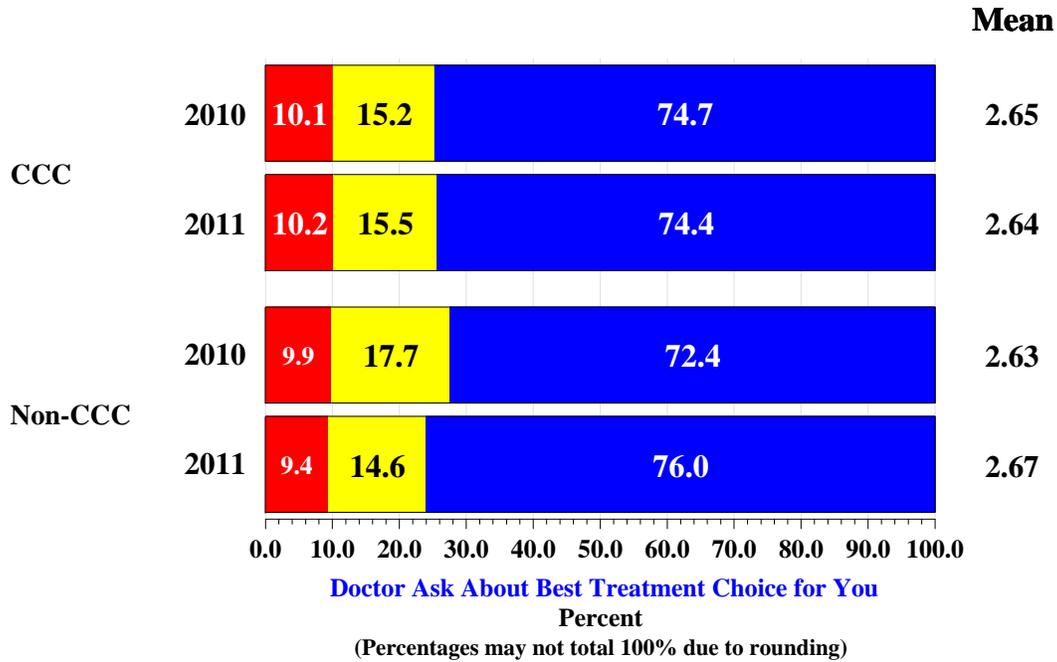
***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

**Figure C-21**  
**Shared Decision Making Composite:**  
**Doctor Ask About Best Treatment Choice for You**



Statistical Significance Note:

- ↑ indicates the score is significantly higher than the other population
- ↓ indicates the score is significantly lower than the other population
- ▲ indicates the 2011 score is significantly higher than the 2010 score
- ▼ indicates the 2011 score is significantly lower than the 2010 score

## **INDIVIDUAL ITEM MEASURES**

### **Health Promotion and Education**

Question 8 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members to rate how often a doctor or other health provider talked with them about specific things they could do to prevent illness in their child. Responses were also classified into three categories: “Never/Sometimes,” “Usually,” and “Always.” Figure C-22 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

#### *Comparative Analysis*

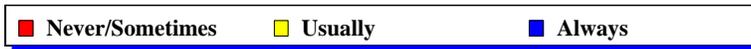
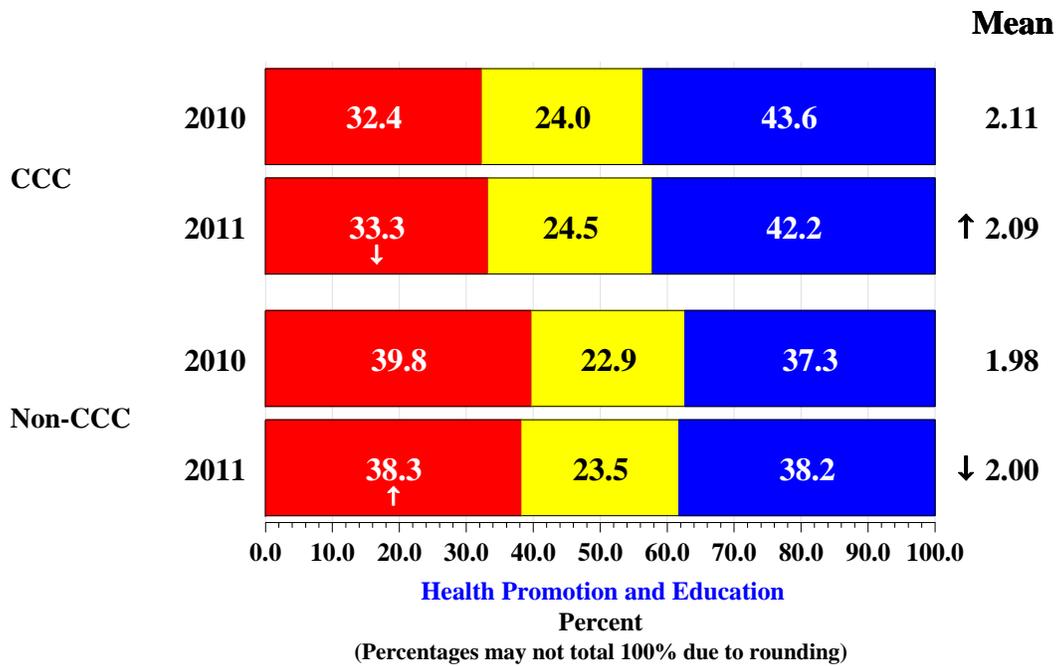
Overall, there were two *statistically significant* differences observed for this measure.

- The overall mean for CCC respondents was significantly higher than that of non-CCC respondents. The percentage of CCC respondents who gave a response of Never/Sometimes was significantly lower than that of non-CCC respondents.

#### *Trending Analysis*

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

Figure C-22  
 Health Promotion and Education



Statistical Significance Note: ↑ indicates the score is significantly higher than the other population  
 ↓ indicates the score is significantly lower than the other population  
 ▲ indicates the 2011 score is significantly higher than the 2010 score  
 ▼ indicates the 2011 score is significantly lower than the 2010 score

## **Coordination of Care**

Question 38 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members to rate how often their doctor seemed informed and up-to-date about care their child received from other doctors. Responses were also classified into three categories: “Never/Sometimes,” “Usually,” and “Always.” Figure C-23 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

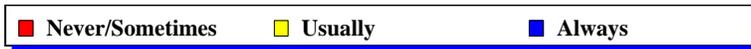
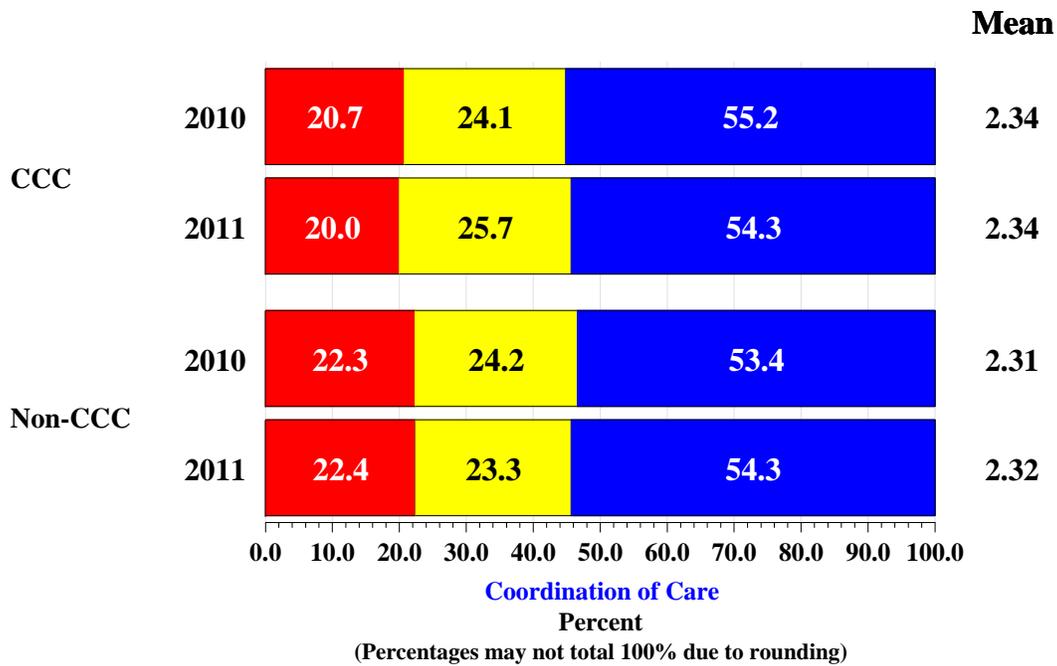
### *Comparative Analysis*

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

### *Trending Analysis*

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

Figure C-23  
 Coordination of Care



Statistical Significance Note: ↑ indicates the score is significantly higher than the other population  
 ↓ indicates the score is significantly lower than the other population  
 ▲ indicates the 2011 score is significantly higher than the 2010 score  
 ▼ indicates the 2011 score is significantly lower than the 2010 score

## SATISFACTION WITH HEALTH PLAN

### ***Satisfaction with Health Plan: Got Information or Help from Customer Service***

Question 49 in the CAHPS Child Medicaid Health Plan Survey asked whether the parents or caretakers of child members got information or help from customer service. For this question, an overall mean on a 0 to 1 scale was calculated for the CCC and non-CCC populations. Responses were also classified into two categories: “No” and “Yes.”<sup>7</sup> Figure C-24 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

#### ***Comparative Analysis***

Overall, there were three *statistically significant* differences observed for this measure.

- The overall mean for CCC respondents was significantly higher than that of non-CCC respondents. The percentage of CCC respondents who gave a response of No was significantly lower than that of non-CCC respondents, whereas the percentage of CCC respondents who gave a response of Yes was significantly higher than that of non-CCC respondents.

#### ***Trending Analysis***

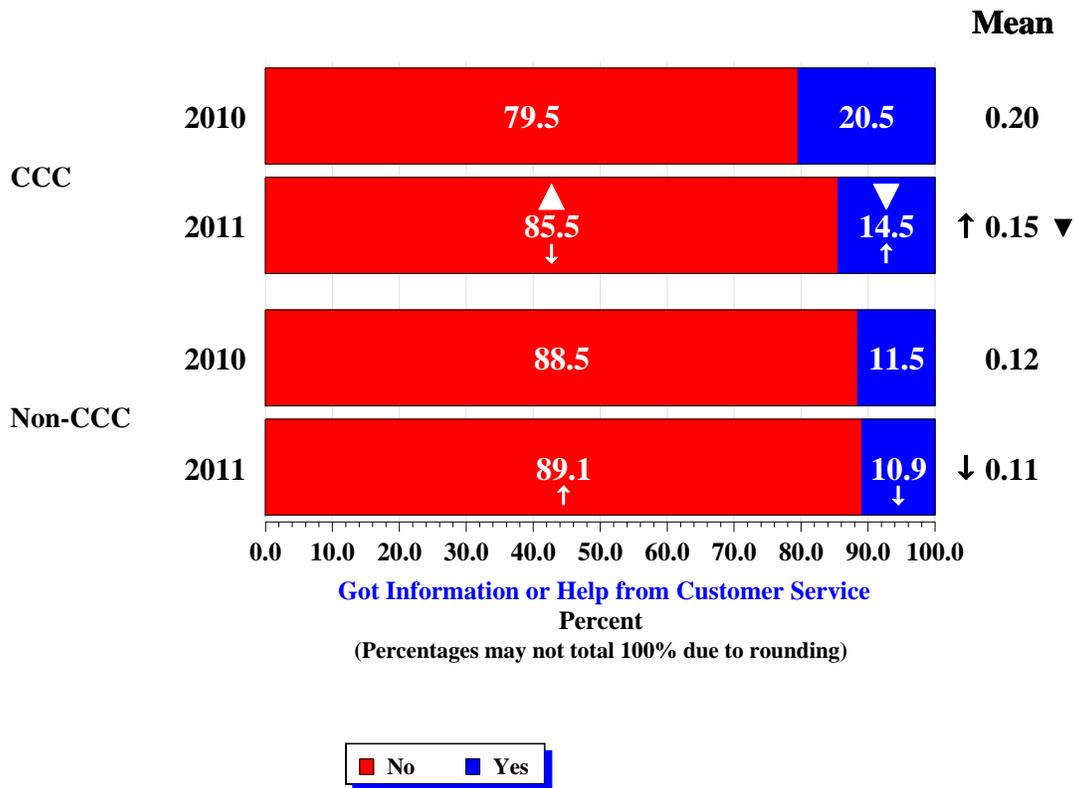
Overall, there were three *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

- The overall mean for CCC respondents was significantly lower in 2011 than in 2010. Furthermore, the percentage of CCC respondents who gave a response of No was significantly higher in 2011 than in 2010, whereas the percentage of CCC respondents who gave a response of Yes was significantly lower in 2011 than in 2010.

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<sup>7</sup> For questions with “No” and “Yes” response categories, responses of “No” were given a score of 0 and responses of “Yes” were given a score of 1.

**Figure C-24**  
**Satisfaction with Health Plan:**  
**Got Information or Help from Customer Service**



***Satisfaction with Health Plan: Filled Out Paperwork***

Question 52 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members if they had filled out paperwork for their child's health plan. For this question, an overall mean on a 0 to 1 scale was calculated for the CCC and non-CCC populations. Responses were also classified into two categories: "No" and "Yes." Figure C-25 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

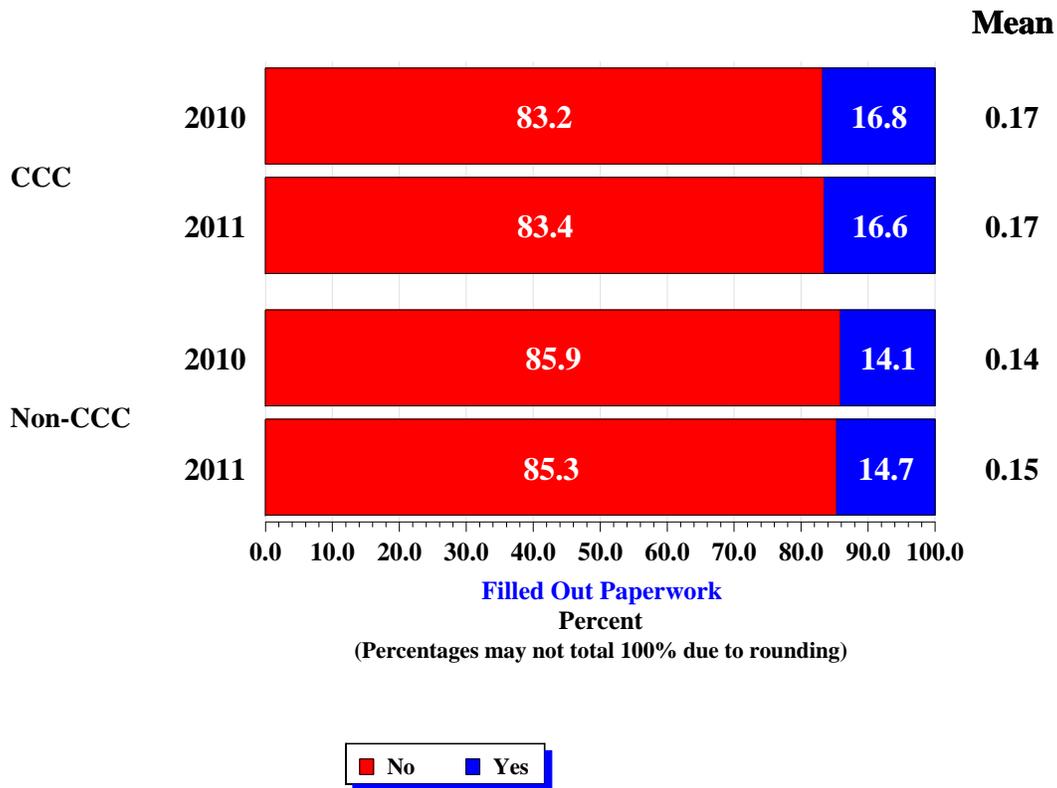
***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

**Figure C-25**  
**Satisfaction with Health Plan:**  
**Filled Out Paperwork**



Statistical Significance Note:    ↑ indicates the score is significantly higher than the other population  
    ↓ indicates the score is significantly lower than the other population  
    ▲ indicates the 2011 score is significantly higher than the 2010 score  
    ▼ indicates the 2011 score is significantly lower than the 2010 score

***Satisfaction with Health Plan: Problem with Paperwork for Health Plan***

Question 53 in the CAHPS Child Medicaid Health Plan Survey asked the parents or caretakers of child members how often forms were easy to fill out for their child’s health plan. For this question, an overall mean on a 1 to 3 scale was calculated for the CCC and non-CCC populations. Responses were also classified into three categories: “Never/Sometimes,” “Usually,” and “Always.”<sup>8</sup> Figure C-26 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

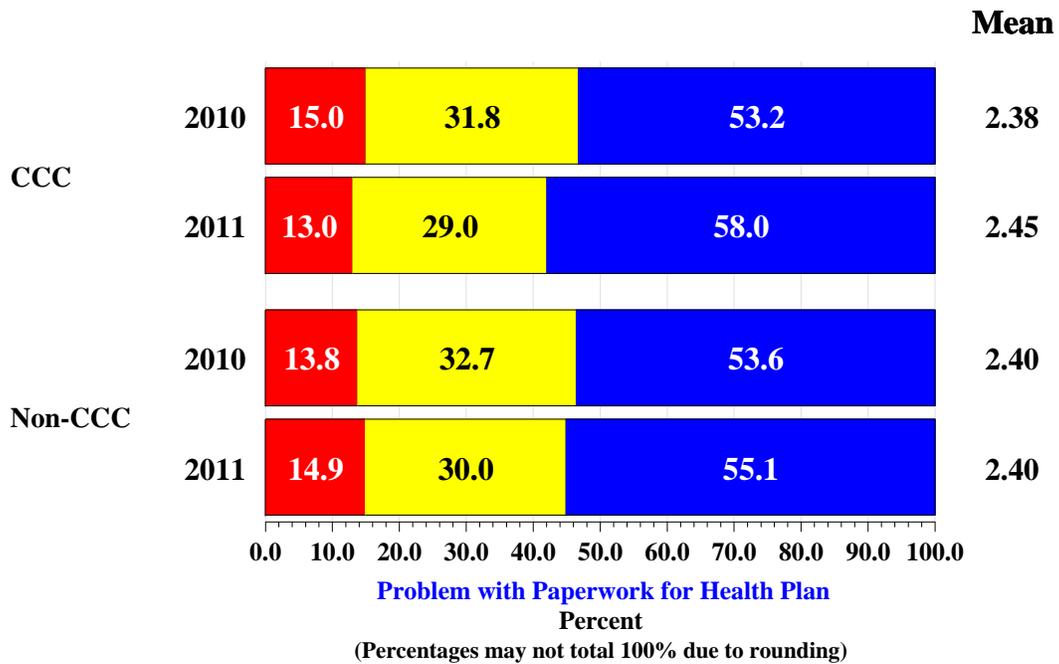
***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

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<sup>8</sup> For this question, responses of “Never/Sometimes” were given a score of 1, responses of “Usually” were given a score of 2, and responses of “Always” were given a score of 3.

**Figure C-26**  
**Satisfaction with Health Plan:**  
**Problem with Paperwork for Health Plan**



Statistical Significance Note:    ↑ indicates the score is significantly higher than the other population  
     ↓ indicates the score is significantly lower than the other population  
     ▲ indicates the 2011 score is significantly higher than the 2010 score  
     ▼ indicates the 2011 score is significantly lower than the 2010 score

## SATISFACTION WITH HEALTH CARE PROVIDERS

### ***Satisfaction with Health Care Providers: Have Personal Doctor***

Several questions were asked to assess the parents or caretakers of child members' satisfaction with their child's health care providers. Question 28 in the CAHPS Child Medicaid Health Plan Survey asked whether child members had one person as their personal doctor. For this question, an overall mean on a 0 to 1 scale was calculated for the CCC and non-CCC populations. Responses were also classified into two categories: "No" and "Yes." Figure C-27 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

### ***Comparative Analysis***

Overall, there were three *statistically significant* differences observed for this measure.

- The overall mean for CCC respondents was significantly higher than that of non-CCC respondents. The percentage of CCC respondents who gave a response of No was significantly lower than that of non-CCC respondents, whereas the percentage of CCC respondents who gave a response of Yes was significantly higher than that of non-CCC respondents.

### ***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.



***Satisfaction with Health Care Providers: Child Able to Talk With Doctors***

Question 33 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members whether child members were able to talk with doctors about their health care. For this question, an overall mean on a 0 to 1 scale was calculated for the CCC and non-CCC populations. Responses were also classified into two categories: “No” and “Yes.” Figure C-28 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

***Comparative Analysis***

Overall, there were three *statistically significant* differences observed for this measure.

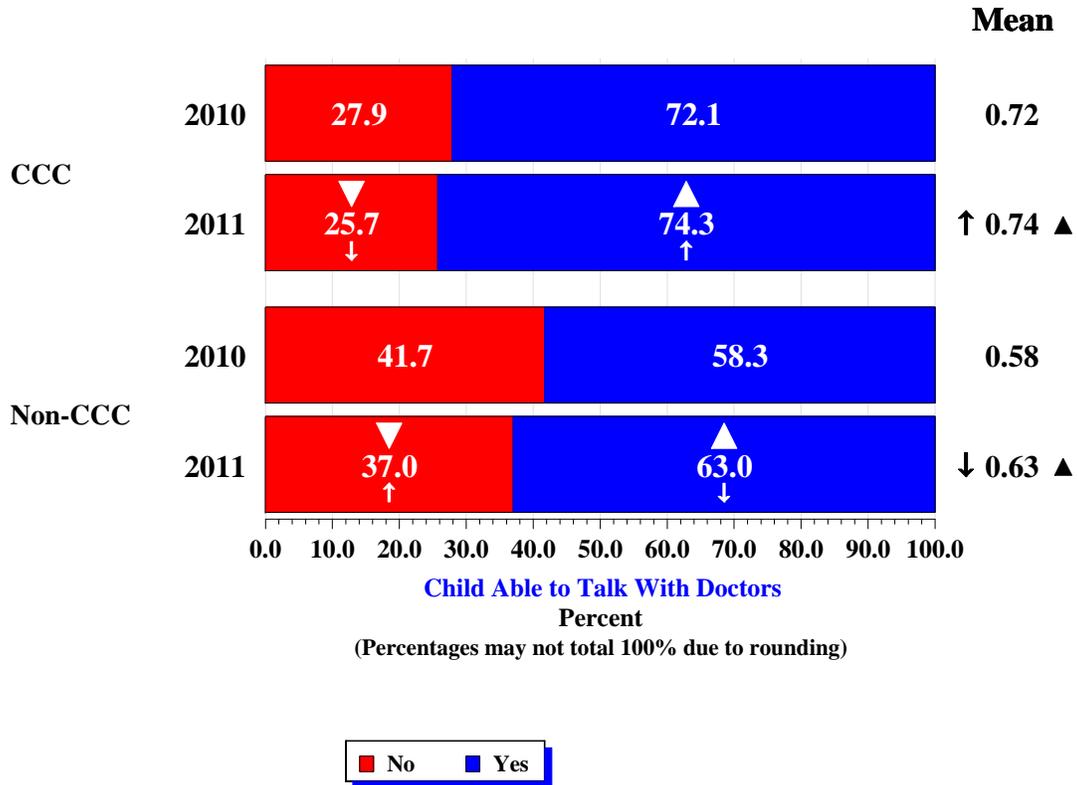
- The overall mean for CCC respondents was significantly higher than that of non-CCC respondents. The percentage of CCC respondents who gave a response of No was significantly lower than that of non-CCC respondents, whereas the percentage of CCC respondents who gave a response of Yes was significantly higher than that of non-CCC respondents.

***Trending Analysis***

Overall, there were six *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

- The overall means for CCC respondents and non-CCC respondents were significantly higher in 2011 than in 2010. Furthermore, the percentage of CCC respondents and non-CCC respondents who gave a response of No was significantly lower in 2011 than in 2010, whereas the percentage of CCC respondents and non-CCC respondents who gave a response of Yes was significantly higher in 2011 than in 2010.

**Figure C-28**  
**Satisfaction with Health Care Providers:**  
**Child Able to Talk With Doctors**



Statistical Significance Note:    ↑ indicates the score is significantly higher than the other population  
    ↓ indicates the score is significantly lower than the other population  
    ▲ indicates the 2011 score is significantly higher than the 2010 score  
    ▼ indicates the 2011 score is significantly lower than the 2010 score

***Satisfaction with Health Care Providers: Doctors Explained Things in Way Child Could Understand***

Question 34 in the CAHPS Child Medicaid Health Plan Survey asked the parents or caretakers of child members to rate how often their personal doctor explained things to their child in a way they could understand. For this question, an overall mean on a 1 to 3 scale was calculated for the CCC and non-CCC populations. Responses were also classified into three categories: “Never/Sometimes,” “Usually,” and “Always.”<sup>9</sup> Figure C-29 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

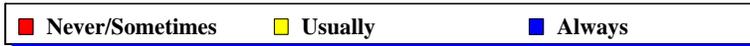
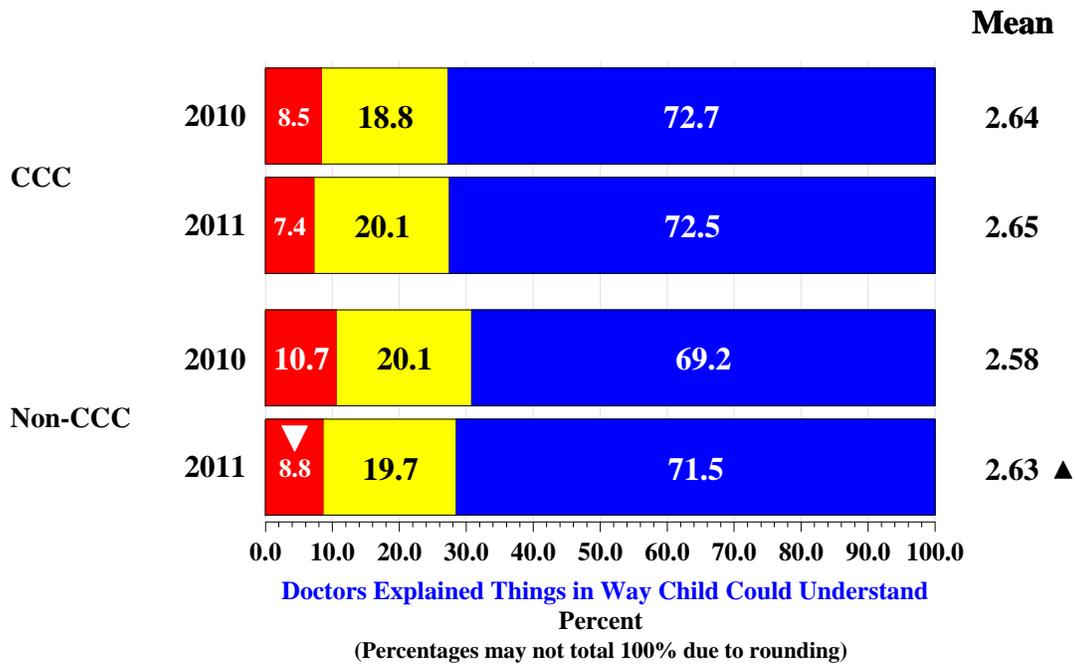
Overall, there were two *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

- The overall mean for non-CCC respondents was significantly higher in 2011 than in 2010. Furthermore, the percentage of non-CCC respondents who gave a response of Never/Sometimes was significantly lower in 2011 than in 2010.

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<sup>9</sup> For this question, responses of “Never/Sometimes” were given a score of 1, responses of “Usually” were given a score of 2, and responses of “Always” were given a score of 3.

**Figure C-29**  
**Satisfaction with Health Care Providers:**  
**Doctors Explained Things in Way Child Could Understand**



Statistical Significance Note:    ↑ indicates the score is significantly higher than the other population  
     ↓ indicates the score is significantly lower than the other population  
     ▲ indicates the 2011 score is significantly higher than the 2010 score  
     ▼ indicates the 2011 score is significantly lower than the 2010 score

## **ACCESS TO CARE**

### ***Access to Care: Tried to Make Appointment to See Specialist***

Several questions were asked to assess the parents or caretakers of child members' perceptions of access to care. Question 43 in the CAHPS Child Medicaid Health Plan Survey asked whether the parents or caretakers of child members tried to make an appointment to see a specialist. For this question, an overall mean on a 0 to 1 scale was calculated for the CCC and non-CCC populations. Responses were also classified into two categories: "No" and "Yes." Figure C-30 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

#### ***Comparative Analysis***

Overall, there were three *statistically significant* differences observed for this measure.

- The overall mean for CCC respondents was significantly higher than that of non-CCC respondents. The percentage of CCC respondents who gave a response of No was significantly lower than that of non-CCC respondents, whereas the percentage of CCC respondents who gave a response of Yes was significantly higher than that of non-CCC respondents.

#### ***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.



### ***Access to Care: Made Appointments for Health Care***

Question 5 in the CAHPS Child Medicaid Health Plan Survey asked whether the parents or caretakers of child members had made any appointments for their child's health care (not counting the times their child needed health care right away). For this question, an overall mean on a 0 to 1 scale was calculated for the CCC and non-CCC populations. Responses were also classified into two categories: "No" and "Yes." Figure C-31 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

#### ***Comparative Analysis***

Overall, there were three *statistically significant* differences observed for this measure.

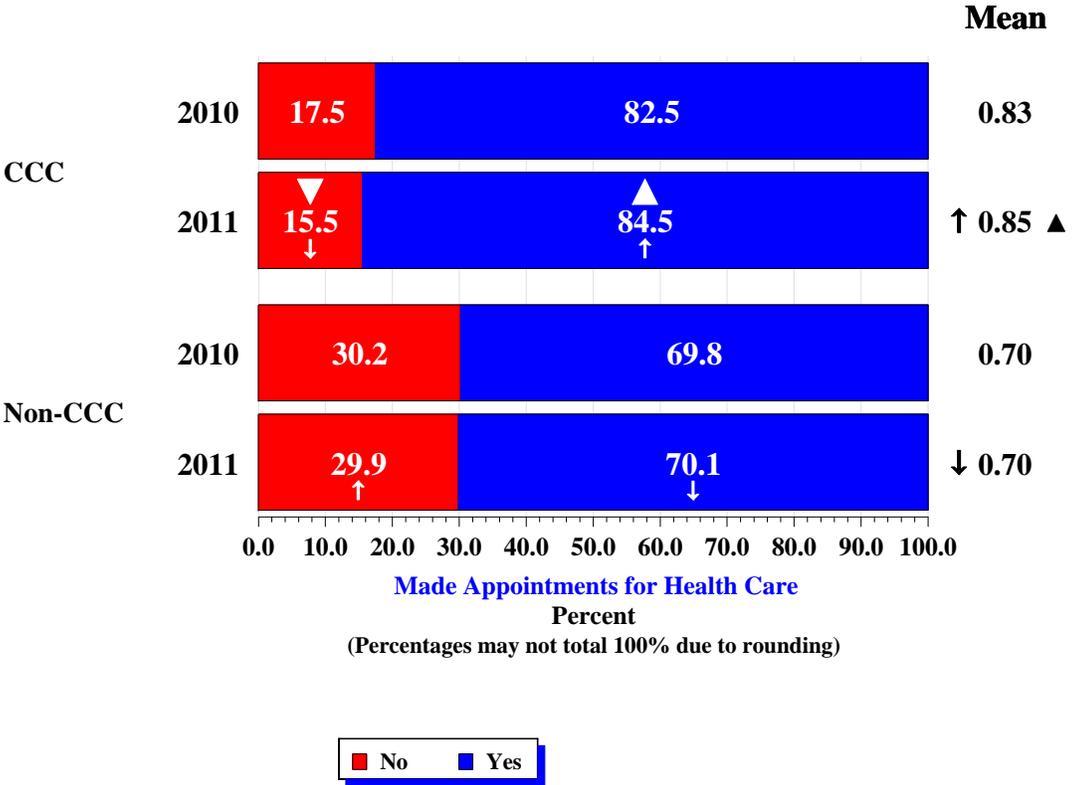
- The overall mean for CCC respondents was significantly higher than that of non-CCC respondents. The percentage of CCC respondents who gave a response of No was significantly lower than that of non-CCC respondents, whereas the percentage of CCC respondents who gave a response of Yes was significantly higher than that of non-CCC respondents.

#### ***Trending Analysis***

Overall, there were three *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

- The overall mean for CCC respondents was significantly higher in 2011 than in 2010. Furthermore, the percentage of CCC respondents who gave a response of No was significantly lower in 2011 than in 2010, whereas the percentage of CCC respondents who gave a response of Yes was significantly higher in 2011 than in 2010.

**Figure C-31**  
**Access to Care:**  
**Made Appointments for Health Care**



Statistical Significance Note:    ↑ indicates the score is significantly higher than the other population  
    ↓ indicates the score is significantly lower than the other population  
    ▲ indicates the 2011 score is significantly higher than the 2010 score  
    ▼ indicates the 2011 score is significantly lower than the 2010 score

***Access to Care: Had Illness, Injury, or Condition That Needed Care Right Away***

Question 3 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members whether their child had an illness, injury, or condition that needed care right away. For this question, an overall mean on a 0 to 1 scale was calculated for the CCC and non-CCC populations. Responses were also classified into two categories: “No” and “Yes.” Figure C-32 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

***Comparative Analysis***

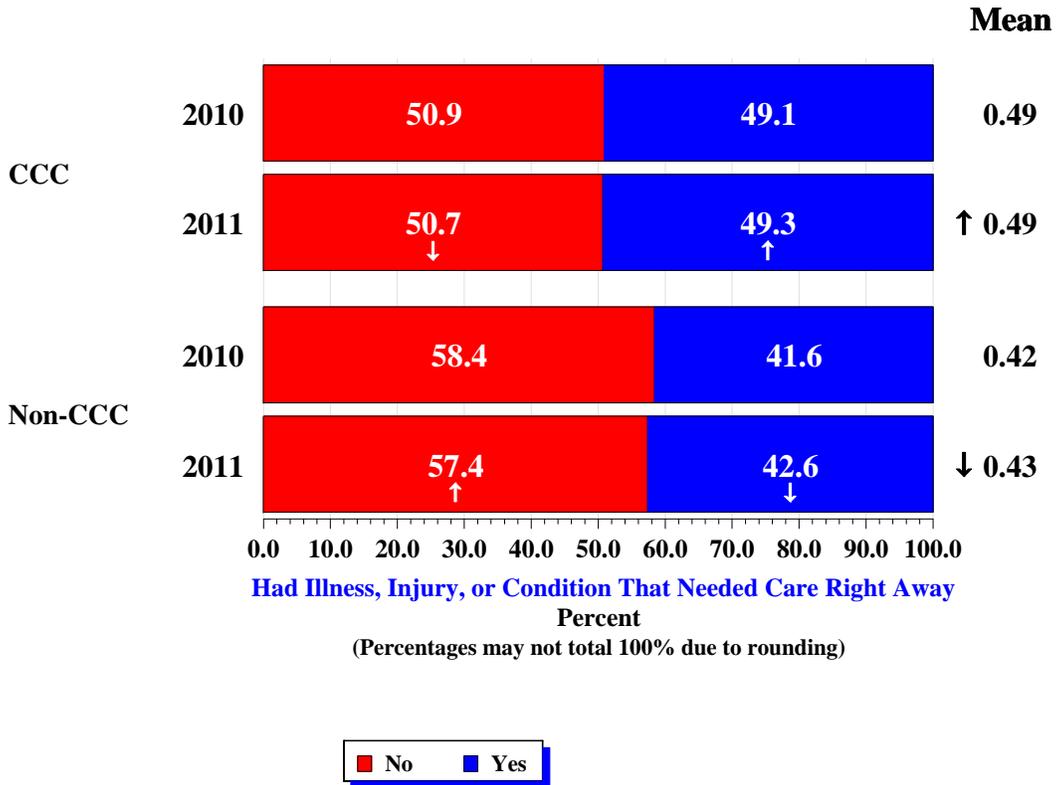
Overall, there were three *statistically significant* differences observed for this measure.

- The overall mean for CCC respondents was significantly higher than that of non-CCC respondents. The percentage of CCC respondents who gave a response of No was significantly lower than that of non-CCC respondents, whereas the percentage of CCC respondents who gave a response of Yes was significantly higher than that of non-CCC respondents.

***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

**Figure C-32**  
**Access to Care:**  
**Had Illness, Injury, or Condition That Needed Care Right Away**



Statistical Significance Note:    ↑ indicates the score is significantly higher than the other population  
    ↓ indicates the score is significantly lower than the other population  
    ▲ indicates the 2011 score is significantly higher than the 2010 score  
    ▼ indicates the 2011 score is significantly lower than the 2010 score

## UTILIZATION OF SERVICES

### *Utilization of Services: Number of Visits to the Doctor's Office*

Question 7 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how many times their child visited the doctor's office or clinic (not counting times the child visited the emergency room). For this question, an overall mean on a 1 to 3 scale was calculated for the CCC and non-CCC populations. Responses were also classified into three categories: "3 or More Times," "1 to 2 Times," and "None." Figure C-33 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

### *Comparative Analysis*

Overall, there were two *statistically significant* differences observed for this measure.

- The overall mean for CCC respondents was significantly lower than that of non-CCC respondents. The percentage of CCC respondents who gave a response of 3 or More Times was significantly higher than that of non-CCC respondents.

### *Trending Analysis*

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.



## **CCC COMPOSITES AND CCC ITEMS**

### **Access to Prescription Medicines**

Question 56 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often it was easy to obtain prescription medicines through their health plan. For this question, an overall mean was calculated for the CCC and non-CCC populations. Responses were also classified into three categories: “Never/Sometimes,” “Usually,” and “Always.” Figure C-34 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

#### *Comparative Analysis*

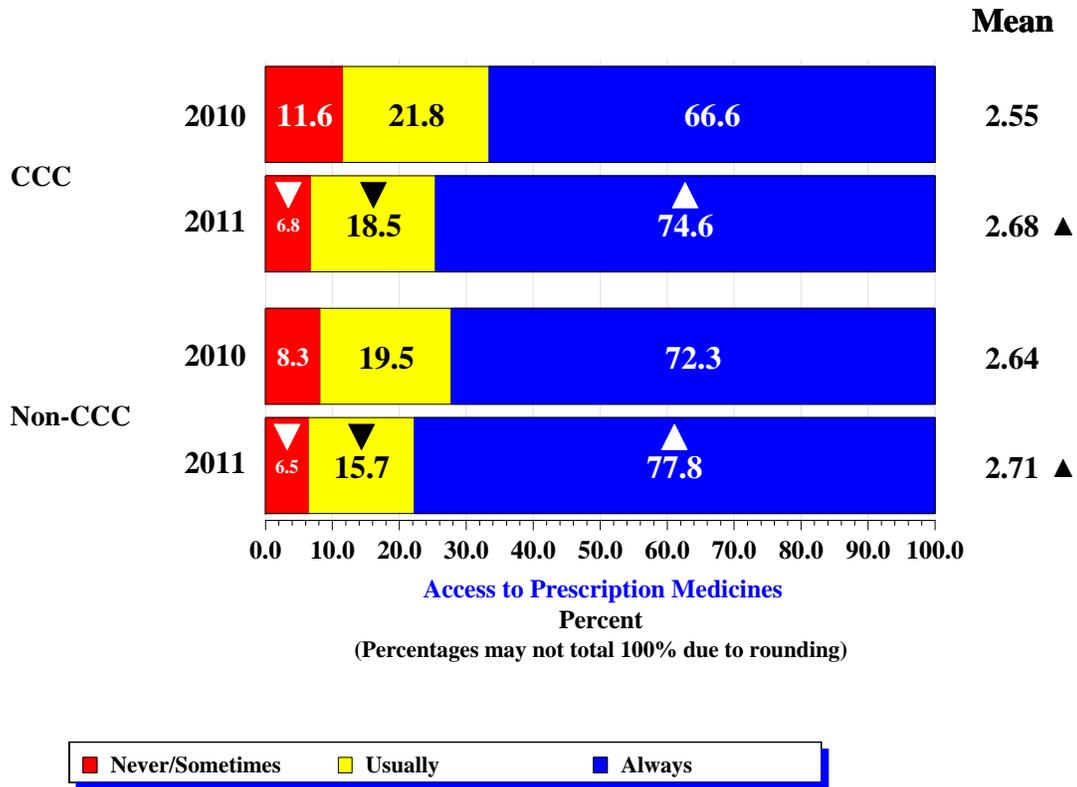
Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

#### *Trending Analysis*

Overall, there were eight *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

- The overall means for CCC respondents and non-CCC respondents were significantly higher in 2011 than in 2010. The percentage of CCC respondents and non-CCC respondents who gave a response of Never/Sometimes was significantly lower in 2011 than in 2010, similarly the percentage of CCC respondents and non-CCC respondents who gave a response of Usually was significantly lower in 2011 than in 2010 and the percentage of CCC respondents and non-CCC respondents who gave a response of Always was significantly higher in 2011 than in 2010.

Figure C-34  
 Access to Prescription Medicines



Statistical Significance Note:   
 ↑ indicates the score is significantly higher than the other population   
 ↓ indicates the score is significantly lower than the other population   
 ▲ indicates the 2011 score is significantly higher than the 2010 score   
 ▼ indicates the 2011 score is significantly lower than the 2010 score

## **Access to Specialized Services**

A series of three questions was asked in order to assess how often it was easy for child members to obtain access to specialized services. For each of these questions (Questions 18, 21, and 24 in the CAHPS Child Medicaid Health Plan Survey), an overall mean was calculated for the CCC and non-CCC populations. Responses were also classified into three categories: “Never/Sometimes,” “Usually,” and “Always.” Figure C-35 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

### *Comparative Analysis*

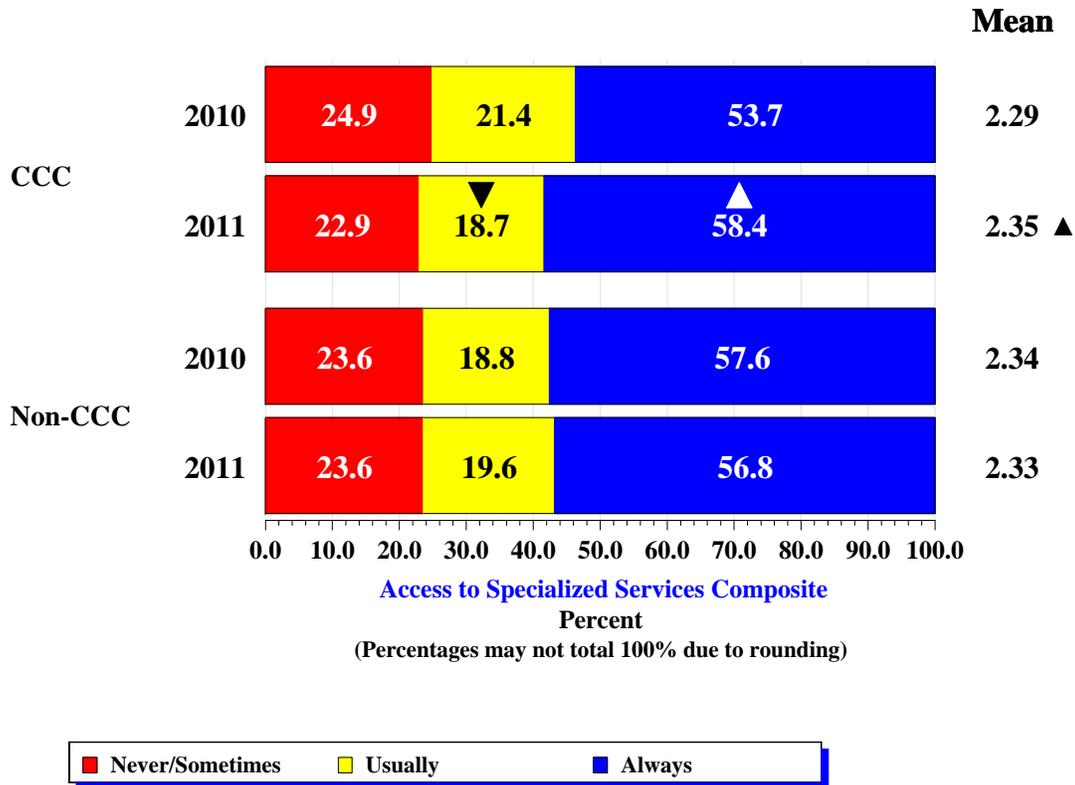
Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

### *Trending Analysis*

Overall, there were three *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

- The overall mean for CCC respondents was significantly higher in 2011 than in 2010. Furthermore, the percentage of CCC respondents who gave a response of Usually was significantly lower in 2011 than in 2010, whereas the percentage of CCC respondents who gave a response of Always was significantly higher in 2011 than in 2010.

**Figure C-35**  
**Access to Specialized Services Composite**



Statistical Significance Note:    ↑ indicates the score is significantly higher than the other population  
    ↓ indicates the score is significantly lower than the other population  
    ▲ indicates the 2011 score is significantly higher than the 2010 score  
    ▼ indicates the 2011 score is significantly lower than the 2010 score

***Access to Specialized Services: Problem Obtaining Special Medical Equipment***

Question 18 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members to rate how often it was easy obtaining special medical equipment or devices for their child. Figure C-36 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

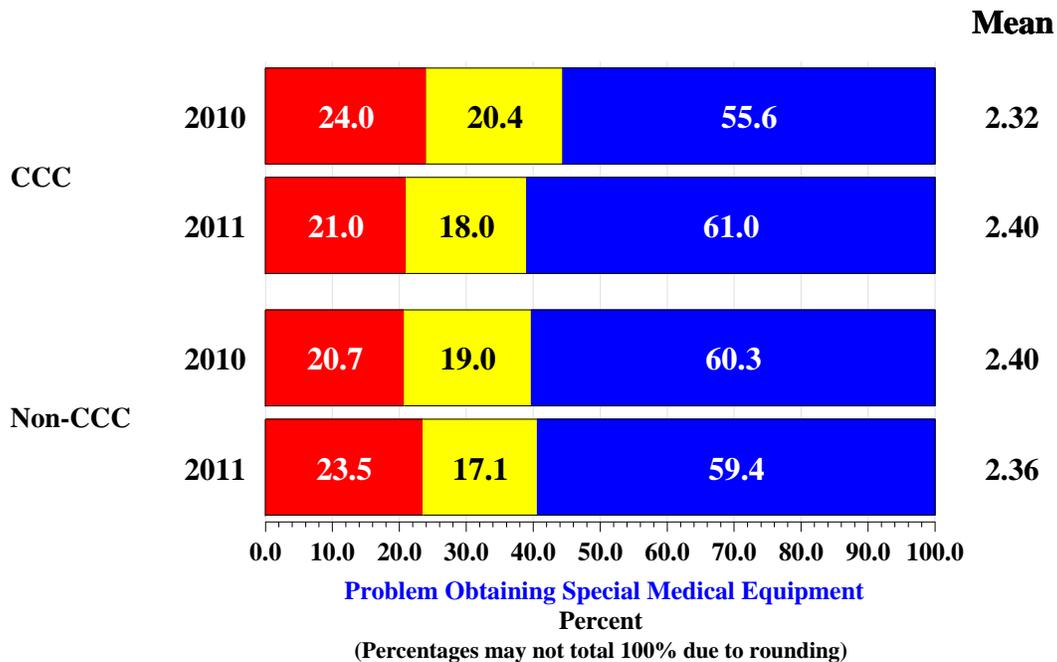
***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

**Figure C-36**  
**Access to Specialized Services Composite:**  
**Problem Obtaining Special Medical Equipment**



Statistical Significance Note:    ↑ indicates the score is significantly higher than the other population  
     ↓ indicates the score is significantly lower than the other population  
     ▲ indicates the 2011 score is significantly higher than the 2010 score  
     ▼ indicates the 2011 score is significantly lower than the 2010 score

***Access to Specialized Services: Problem Obtaining Special Therapy***

Question 21 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members to rate how often it was easy obtaining special therapy for their child. Figure C-37 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

***Comparative Analysis***

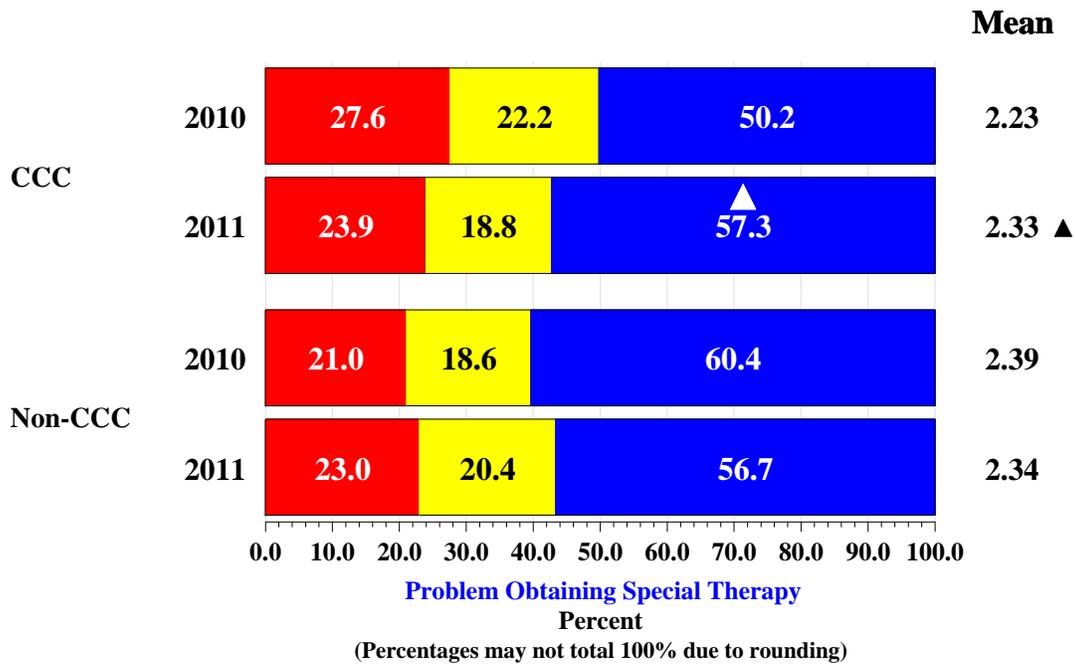
Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there were two *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

- The overall mean for CCC respondents was significantly higher in 2011 than in 2010. Furthermore, the percentage of CCC respondents who gave a response of Always was significantly higher in 2011 than in 2010.

**Figure C-37**  
**Access to Specialized Services Composite:**  
**Problem Obtaining Special Therapy**



Statistical Significance Note:

- ↑ indicates the score is significantly higher than the other population
- ↓ indicates the score is significantly lower than the other population
- ▲ indicates the 2011 score is significantly higher than the 2010 score
- ▼ indicates the 2011 score is significantly lower than the 2010 score

***Access to Specialized Services: Problem Obtaining Treatment or Counseling***

Question 24 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members to rate how often it was easy obtaining treatment or counseling for their child. Figure C-38 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

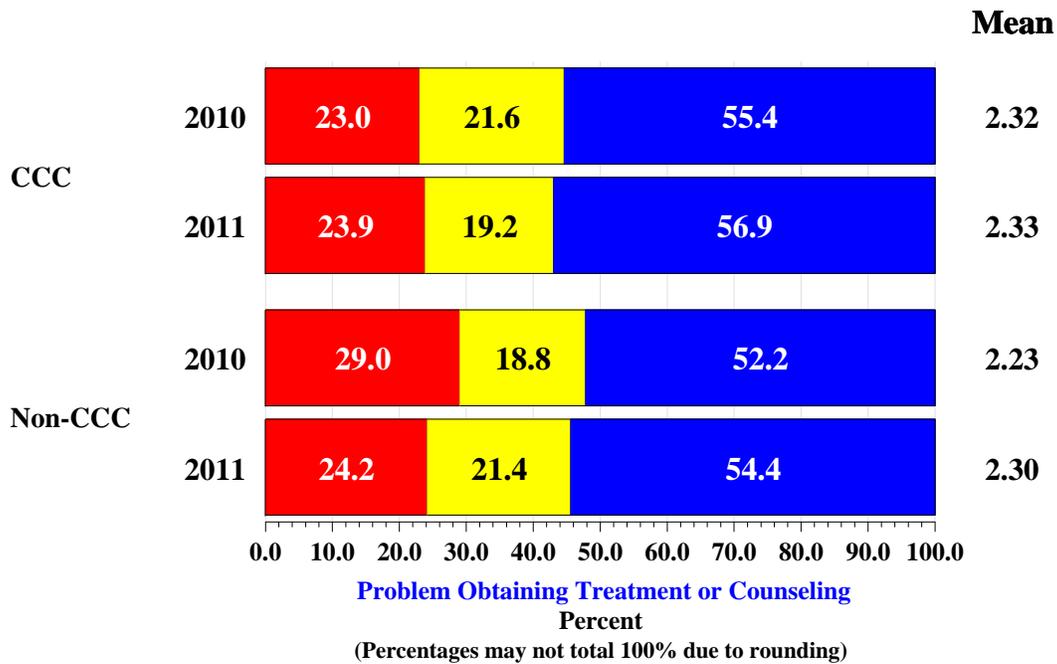
***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

**Figure C-38**  
**Access to Specialized Services Composite:**  
**Problem Obtaining Treatment or Counseling**



Statistical Significance Note:

- ↑ indicates the score is significantly higher than the other population
- ↓ indicates the score is significantly lower than the other population
- ▲ indicates the 2011 score is significantly higher than the 2010 score
- ▼ indicates the 2011 score is significantly lower than the 2010 score

### **Family-Centered Care (FCC): Personal Doctor Who Knows Child**

A series of three questions was asked in order to assess whether child members had a personal doctor who knew them. For each of these questions (Questions 36, 41, and 42 in the CAHPS Child Medicaid Health Plan Survey), an overall mean on a 0 to 1 scale was calculated for the CCC and non-CCC populations. Responses were also classified into two categories: “No” and “Yes.” Figure C-39 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

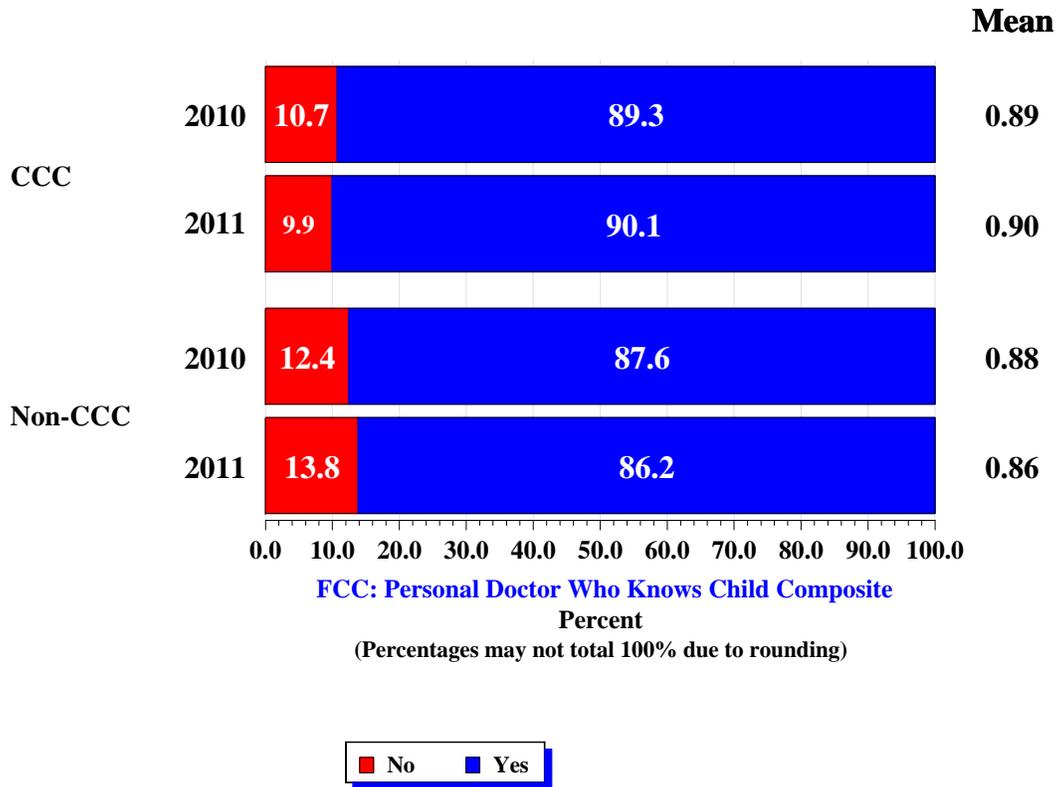
#### *Comparative Analysis*

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

#### *Trending Analysis*

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

**Figure C-39**  
**FCC: Personal Doctor Who Knows Child Composite**



Statistical Significance Note:    ↑ indicates the score is significantly higher than the other population  
    ↓ indicates the score is significantly lower than the other population  
    ▲ indicates the 2011 score is significantly higher than the 2010 score  
    ▼ indicates the 2011 score is significantly lower than the 2010 score

***FCC: Personal Doctor Who Knows Child: Talked About How Child Feeling, Growing, or Behaving***

Question 36 in the CAHPS Child Medicaid Health Plan Survey asked whether the personal doctor of the child member talked with the parent or caretaker of the child member about how the child was feeling, growing, or behaving. Figure C-40 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.



***FCC: Personal Doctor Who Knows Child: Understands How Health Conditions Affect Child's Life***

Question 41 in the CAHPS Child Medicaid Health Plan Survey asked whether the personal doctor of the child member understands how the child's medical, behavioral, or other health conditions affect the child's day-to-day life. Figure C-41 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

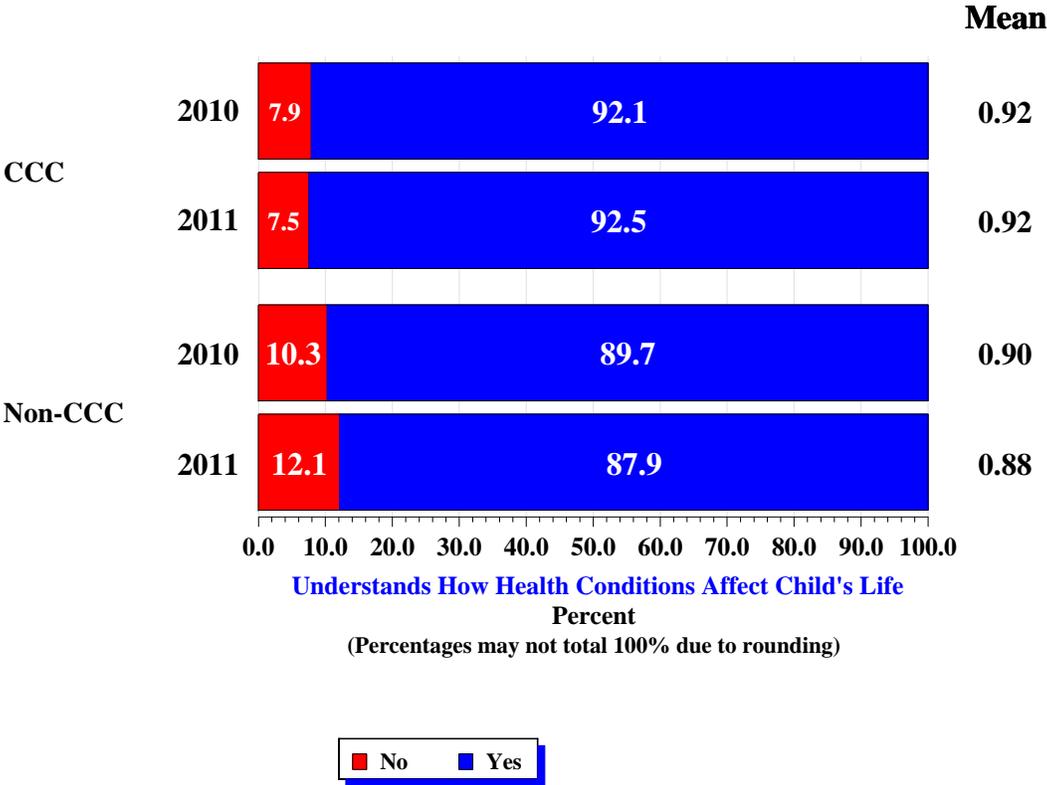
***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

**Figure C-41**  
**FCC: Personal Doctor Who Knows Child Composite:**  
**Understands How Health Conditions Affect Child's Life**



Statistical Significance Note:    ↑ indicates the score is significantly higher than the other population  
    ↓ indicates the score is significantly lower than the other population  
    ▲ indicates the 2011 score is significantly higher than the 2010 score  
    ▼ indicates the 2011 score is significantly lower than the 2010 score

***FCC: Personal Doctor Who Knows Child: Understands How Health Conditions Affect Family's Life***

Question 42 in the CAHPS Child Medicaid Health Plan Survey asked whether the personal doctor of the child member understands how the child's medical, behavioral, or other health conditions affect the family's day-to-day life. Figure C-42 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

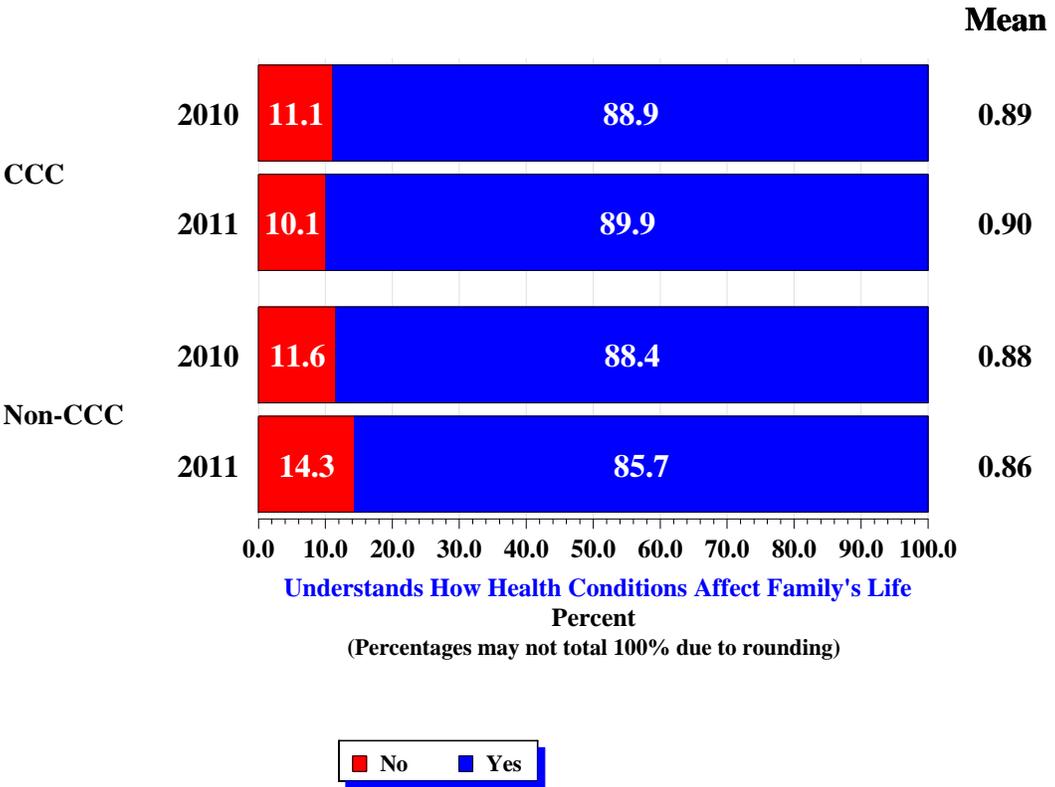
***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

**Figure C-42**  
**FCC: Personal Doctor Who Knows Child Composite:**  
**Understands How Health Conditions Affect Family's Life**



Statistical Significance Note:    ↑ indicates the score is significantly higher than the other population  
    ↓ indicates the score is significantly lower than the other population  
    ▲ indicates the 2011 score is significantly higher than the 2010 score  
    ▼ indicates the 2011 score is significantly lower than the 2010 score

## **FCC: Getting Needed Information**

Question 9 in the CAHPS Child Medicaid Health Plan Survey asked the parents or caretakers of child members to rate how often their questions were answered by doctors or other health providers. For this question, an overall mean was calculated for the CCC and non-CCC populations. Responses were also classified into three categories: “Never/Sometimes,” “Usually,” and “Always.” Figure C-43 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

### ***Comparative Analysis***

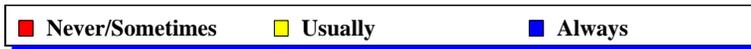
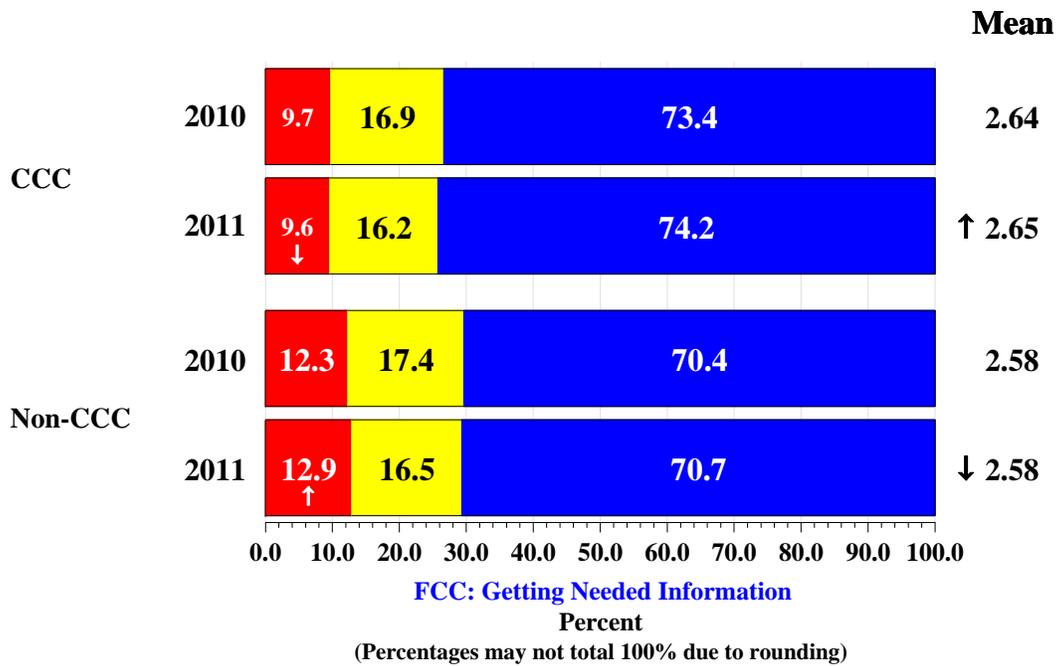
Overall, there were two *statistically significant* differences observed for this measure.

- The overall mean for CCC respondents was significantly higher than that of non-CCC respondents. The percentage of CCC respondents who gave a response of Never/Sometimes was significantly lower than that of non-CCC respondents.

### ***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

Figure C-43  
 FCC: Getting Needed Information



Statistical Significance Note: ↑ indicates the score is significantly higher than the other population  
 ↓ indicates the score is significantly lower than the other population  
 ▲ indicates the 2011 score is significantly higher than the 2010 score  
 ▼ indicates the 2011 score is significantly lower than the 2010 score

## **Coordination of Care for Children With Chronic Conditions**

Two questions were asked in order to assess whether parents or caretakers of child members received help in coordinating their child's care. For each of these questions (Questions 16 and 27 in the CAHPS Child Medicaid Health Plan Survey), an overall mean was calculated for the CCC and non-CCC populations. Responses were also classified into two categories: "No" and "Yes." Figure C-44 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

### ***Comparative Analysis***

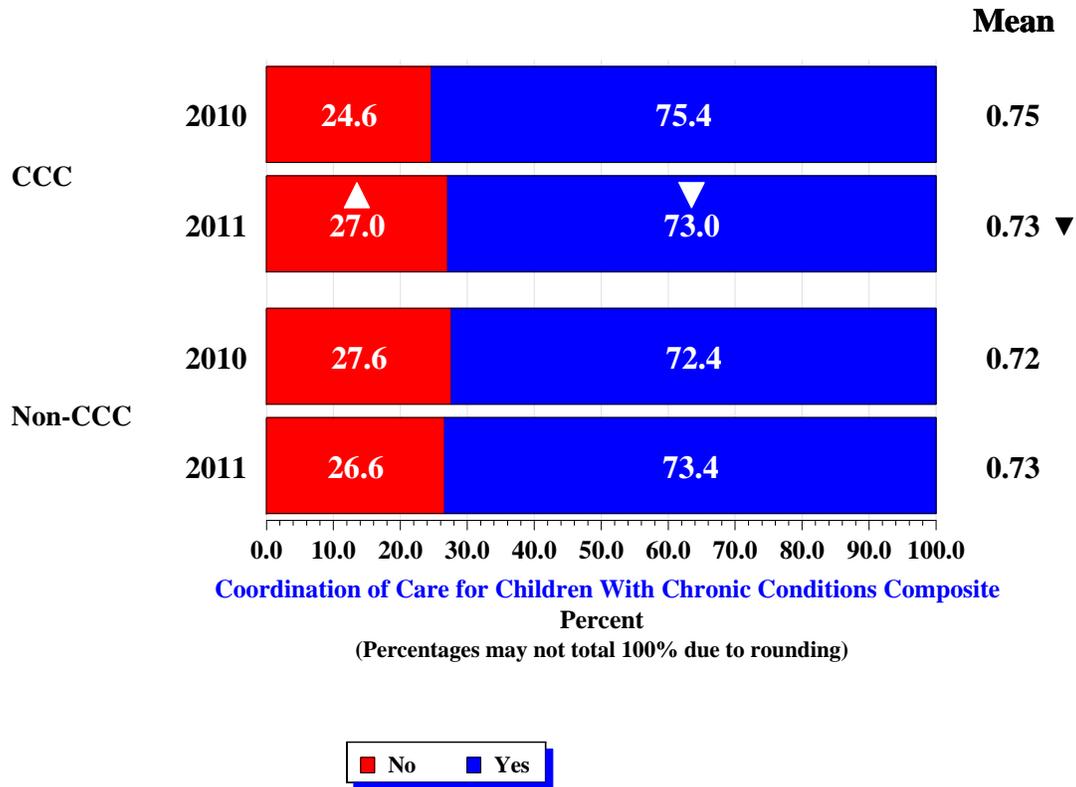
Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

### ***Trending Analysis***

Overall, there were three *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

- The overall mean for CCC respondents was significantly lower in 2011 than in 2010. Furthermore, the percentage of CCC respondents who gave a response of No was significantly higher in 2011 than in 2010, whereas the percentage of CCC respondents who gave a response of Yes was significantly lower in 2011 than in 2010.

**Figure C-44**  
**Coordination of Care for Children With Chronic Conditions Composite**



Statistical Significance Note:    ↑ indicates the score is significantly higher than the other population  
    ↓ indicates the score is significantly lower than the other population  
    ▲ indicates the 2011 score is significantly higher than the 2010 score  
    ▼ indicates the 2011 score is significantly lower than the 2010 score

***Coordination of Care for Children With Chronic Conditions: Received Help in Contacting School or Daycare***

Question 16 in the CAHPS Child Medicaid Health Plan Survey asked whether parents or caretakers of child members received the help they needed from doctors or other health providers in contacting their child's school or daycare. Figure C-45 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

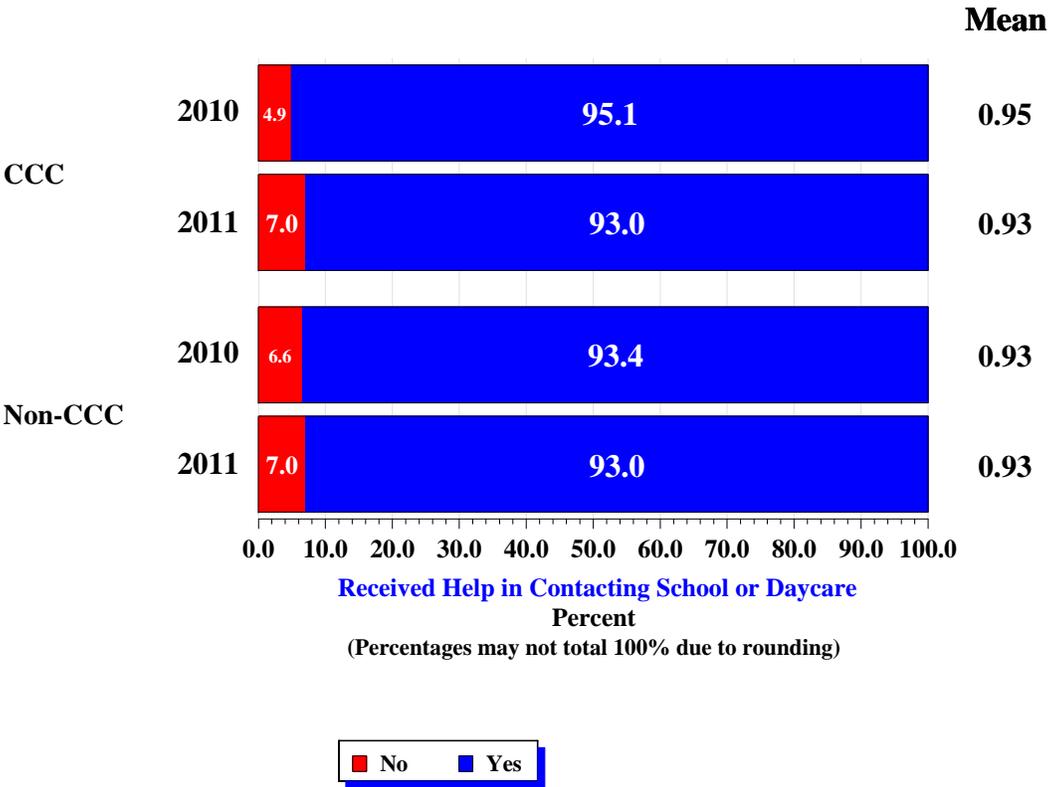
***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

**Figure C-45**  
**Coordination of Care for Children With Chronic Conditions Composite:**  
**Received Help in Contacting School or Daycare**



Statistical Significance Note:    ↑ indicates the score is significantly higher than the other population  
    ↓ indicates the score is significantly lower than the other population  
    ▲ indicates the 2011 score is significantly higher than the 2010 score  
    ▼ indicates the 2011 score is significantly lower than the 2010 score

***Coordination of Care for Children With Chronic Conditions: Health Plan or Doctors Helped Coordinate Child's Care***

Question 27 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members whether anyone from the health plan or doctor's office helped coordinate their child's care among different providers or services. Figure C-46 depicts the overall mean scores and the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

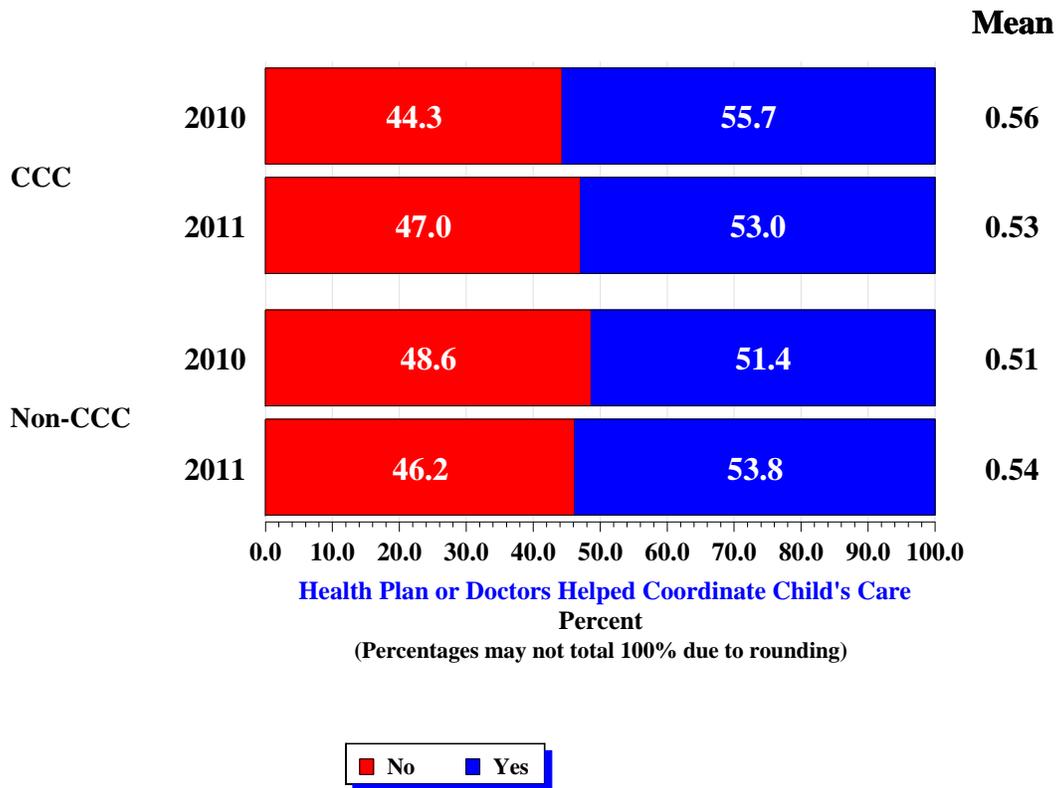
***Comparative Analysis***

Overall, there were no *statistically significant* differences observed between the CCC and non-CCC populations for this measure.

***Trending Analysis***

Overall, there were no *statistically significant* differences between scores in 2011 and scores in 2010 for this measure.

**Figure C-46**  
**Coordination of Care for Children With Chronic Conditions Composite:**  
**Health Plan or Doctors Helped Coordinate Child's Care**



Statistical Significance Note:    ↑ indicates the score is significantly higher than the other population  
    ↓ indicates the score is significantly lower than the other population  
    ▲ indicates the 2011 score is significantly higher than the 2010 score  
    ▼ indicates the 2011 score is significantly lower than the 2010 score

## SUMMARY OF OHIO CCC COMPARISONS

The following tables summarize the results of the comparative and trending analyses presented in the Ohio CCC Comparisons section. Table C-1 through Table C-3 summarize the statistically significant differences between the two populations based on the comparative analyses and the assignment of arrows to each population. The items listed in these tables are limited to those items where statistically significant differences were identified between the two populations. Table C-4 and Table C-5 summarize the statistically significant differences between each population's results in 2011 and its results in 2010 based on the trending analyses and the assignment of directional triangles. Please note, the results presented below are based on the overall means calculated for each population on the global ratings, composites, composite items, individual items, items in the areas of interest, CCC composites, and CCC items.

<b>Table C-1</b> <b>Summary of Ohio CFC CCC Comparisons Comparative Results for the Global Ratings, Composites, Composite Items, and Individual Items<sup>10</sup></b>		
Measure	Population with Significantly Higher Score	Population with Significantly Lower Score
Getting Care Quickly: Received Appointment as Soon as Wanted When Care Not Needed Right Away	CCC	Non-CCC
Health Promotion and Education	CCC	Non-CCC

<sup>10</sup> There were no statistically significant differences between the CCC and non-CCC populations for the global ratings or composites.

<b>Table C-2 Summary of Ohio CFC CCC Comparisons Comparative Results for the Areas of Interest</b>		
<b>Measure</b>	<b>Population with Significantly Higher Score</b>	<b>Population with Significantly Lower Score</b>
Satisfaction with Health Plan: Got Information or Help from Customer Service	CCC	Non-CCC
Satisfaction with Health Care Providers: Have Personal Doctor	CCC	Non-CCC
Satisfaction with Health Care Providers: Child Able to Talk With Doctors	CCC	Non-CCC
Access to Care: Tried to Make Appointment to See Specialist	CCC	Non-CCC
Access to Care: Made Appointments for Health Care	CCC	Non-CCC
Access to Care: Had Illness, Injury, or Condition That Needed Care Right Away	CCC	Non-CCC
Utilization of Services: Number of Visits to the Doctor's Office	Non-CCC	CCC

<b>Table C-3 Summary of Ohio CFC CCC Comparisons Comparative Results for the CCC Composites and CCC Items</b>		
<b>Measure</b>	<b>Population with Significantly Higher Score</b>	<b>Population with Significantly Lower Score</b>
FCC: Getting Needed Information	CCC	Non-CCC

<b>Table C-4</b>		
<b>Summary of Ohio CFC CCC Comparisons Trending Results for the Global Ratings, Composites, Composite Items, and Individual Items<sup>11</sup></b>		
<b>Measure</b>	<b>Population(s) with Significantly Higher Score in 2011</b>	<b>Population(s) with Significantly Lower Score in 2011</b>
Rating of Health Plan	CCC Non-CCC	—
Getting Needed Care Composite	CCC Non-CCC	—
Getting Needed Care: Getting Care Believed Necessary	CCC	—
Getting Care Quickly: Received Appointment as Soon as Wanted When Care Not Needed Right Away	—	Non-CCC
How Well Doctors Communicate Composite	Non-CCC	—
How Well Doctors Communicate: Doctors Listened Carefully	Non-CCC	—
How Well Doctors Communicate: Doctors Explained Things in Way They Could Understand	Non-CCC	—
How Well Doctors Communicate: Doctors Showed Respect	Non-CCC	—
How Well Doctors Communicate: Doctors Spent Enough Time With Patient	Non-CCC	—

Note: A dash (—) indicates that neither the CCC nor the non-CCC populations exhibited a statistically significant higher or lower score between 2010 and 2011.

<sup>11</sup> There were no statistically significant differences between the CCC and non-CCC populations for the individual items.

<b>Table C-5 Summary of Ohio CFC CCC Comparisons Trending Results for the Areas of Interest, CCC Composites, and CCC Items</b>		
Measure	Population(s) with Significantly Higher Score in 2011	Population(s) with Significantly Lower Score in 2011
Satisfaction with Health Plan: Got Information or Help from Customer Service	—	CCC
Satisfaction with Health Care Providers: Child Able to Talk With Doctors	CCC Non-CCC	—
Satisfaction with Health Care Providers: Doctors Explained Things in Way Child Could Understand	Non-CCC	—
Access to Care: Made Appointments for Health Care	CCC	—
Access to Prescription Medicines	CCC Non-CCC	—
Access to Specialized Services Composite	CCC	—
Access to Specialized Services: Problem Obtaining Special Therapy	CCC	—
Coordination of Care for Children With Chronic Conditions Composite	—	CCC

Note: A dash (—) indicates that neither the CCC nor the non-CCC populations exhibited a statistically significant higher or lower score between 2010 and 2011.

# Reader's Guide

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## HOW TO READ THE BAR GRAPHS

Below is an explanation of how to read the bar graphs presented in the Ohio CCC Comparisons section. The Ohio CCC Comparisons section reports on the CAHPS results in accordance with the methodology used by ODJFS to meet the reporting needs of the State of Ohio.

Separate bar graphs were created for the global ratings, composites, items within the composites, individual items, individual questions in four areas of interest (satisfaction with health plan, satisfaction with health care providers, access to care, and utilization of services), CCC composite measures, items within the CCC composites, and CCC items. Each bar graph depicts overall means for the survey item and the proportion of respondents in each of the item's response categories for the CCC and non-CCC populations. Statistically significant differences between these two populations in 2011 are noted within the bar graphs as well as statistically significant differences between scores in 2011 and scores in 2010.

The least positive responses to the survey questions are always at the left end of the bar in **red**.

Responses that fall between the least positive and the most positive responses are always in the middle of the bar in **yellow**.

The most positive responses to the survey questions are always at the right end of the bar in **blue**.

Overall means are shown to the right of the bar.



For figures with two response categories, only blue and red bars are depicted. For certain questions, response categories are neither more positive nor less positive. For these questions, the colors of the bars simply identify different response categories.

Numbers within the bars represent the percentage of respondents in the response category. Overall means are shown to the right of the bars.

Arrows (↑ and ↓) within the bars and to the left of the overall means indicate statistically significant differences between the populations' mean scores in 2011. Only statistically significant findings are discussed within the text of the Ohio CCC Comparisons section.

Directional triangles (▲ and ▼) within the bars and to the right of the overall means indicate statistically significant differences between mean scores in 2011 and mean scores in 2010. For each population, its 2011 mean scores were compared to its 2010 mean scores. Only statistically significant findings are discussed within the text of the Ohio CCC Comparisons section.

## **LIMITATIONS AND CAUTIONS**

The findings presented in Ohio's CFC Medicaid Managed Care Program CAHPS CCC Report are subject to some limitations in the survey design, analysis, and interpretation. These limitations should be considered carefully when interpreting or generalizing the findings. These limitations are discussed below.

### **Case-Mix Adjustment**

While data have been adjusted for differences in member health status, respondent educational level, and respondent age, it was not possible to adjust for differences in member or respondent characteristics that were not measured. These characteristics include income, employment, or any other characteristics that may not be under the MCP's control.

### **Non-Response Bias**

The experiences of the survey respondent population may be different than that of non-respondents with respect to their health care services and may vary by MCP. The potential for non-response bias should be considered when interpreting the results.

### **Causal Inferences**

The analyses described in Ohio's CFC Medicaid Managed Care Program CAHPS CCC Report identify whether the parents or caretakers of child members in different populations (CCC versus non-CCC) give different ratings of satisfaction. The surveys by themselves do not reveal why the differences exist.