



Department of  
Medicaid

# 2019 Ohio Medicaid Managed Care Program CAHPS<sup>®</sup> Member Experience Survey Full Report

July 20, 2020



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# Table of Contents

1. Introduction .....	11
Overview .....	11
Program Changes .....	11
Sampling Procedures .....	12
Sample Frame.....	12
Sample Size .....	12
Survey Protocol .....	13
Response Rates .....	14
2. Demographics .....	15
Background .....	15
Adult and General Child Profiles .....	16
Children with Chronic Conditions Profiles .....	19
Respondent and Member Profiles .....	19
Chronic Conditions Classification .....	21
3. Respondent/Non-Respondent Analysis .....	24
Description .....	24
Analysis .....	24
Adult Respondent and Non-Respondent Profiles .....	24
General Child Respondent and Non-Respondent Profiles .....	25
Summary .....	26
4. Adult and General Child Results.....	26
National Comparisons.....	27
Statewide Comparisons .....	29
Global Ratings .....	32
Composite Measures and Composite Items .....	40
Individual Item Measures.....	77
Satisfaction with Health Plan .....	82
Satisfaction with Health Care Providers.....	88
Access to Care .....	93
Utilization of Services.....	100
Medical Assistance with Smoking and Tobacco Use Cessation.....	103
CCC Composites and CCC Items .....	107
Priority Areas for Quality Improvement .....	121
Rating of Health Plan.....	124
Rating of All Health Care .....	136
Rating of Personal Doctor .....	148
Cross-Tabulations.....	160
Adult and General Child Cross-Tabulations.....	160
5. Children with Chronic Conditions Results.....	183
CCC and Non-CCC Comparisons .....	184
Global Ratings .....	186
Composite Measures .....	190
Individual Items.....	208
Satisfaction with Health Plan .....	210
Satisfaction with Health Care Providers.....	213
Access to Care .....	216
CCC Composites and CCC Items .....	220
Cross-Tabulations.....	233

- 6. Summary of Results ..... 251
  - Adult and General Child Results ..... 251
    - National Comparisons ..... 251
    - Statewide Comparisons..... 252
    - Priority Areas for Quality Improvement..... 254
    - Adult and General Child Cross-Tabulations..... 261
  - Children with Chronic Conditions Results..... 264
    - CCC and Non-CCC Comparative Analysis..... 264
    - CCC and Non-CCC Trend Analysis..... 265
    - CCC Population Cross-Tabulations ..... 265
    - CCC Population Categories..... 268
- 7. Conclusions and Recommendations ..... 269
  - Conclusions ..... 269
    - Adult and General Child Results..... 269
    - Children with Chronic Conditions Results ..... 270
  - Recommendations ..... 270
  - Cautions and Limitations..... 271
    - Case-Mix Adjustment ..... 271
    - Non-Response Bias..... 271
    - Causal Inferences ..... 271
    - Survey Vendor Effects ..... 271
    - Program Changes ..... 271
- 8. Reader’s Guide ..... 272
  - How to Read Figures in the Results Section..... 272
    - National Comparisons ..... 272
    - Statewide Comparisons..... 273
    - Priority Assignments ..... 274
  - Understanding Statistical Significance ..... 275
  - Understanding Correlation Analysis ..... 275
  - Understanding Sampling Error..... 275
  - Quality Improvement References..... 277
- Appendix A: Priority Matrix Data ..... 279

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## List of Tables

Table 1-1: Participating MCPs .....	11
Table 1-2: MCP Sample Frame Sizes .....	12
Table 1-3: MCP Sample Sizes .....	12
Table 1-4: CCC Supplemental Sample Sizes .....	13
Table 1-5: MCP Oversampling Rates.....	13
Table 1-6: CAHPS Survey Mixed-Mode Methodology Time Frames.....	14
Table 1-7: CAHPS 5.0H Medicaid Response Rates .....	15
Table 1-8: CAHPS 5.0H Medicaid Completed Surveys .....	15
Table 2-1: Adult Member Profiles.....	17
Table 2-2: General Child Profiles.....	18
Table 2-3: General Child Respondent Profiles .....	19
Table 2-4: CCC and Non-CCC Respondent Profiles .....	20
Table 2-5: CCC and Non-CCC Child Member Profiles.....	21
Table 2-6: Responses to CCC Screener Questions—Response of “Yes” .....	23
Table 2-7: Distribution of Categories for CCC Population.....	23
Table 3-1: Adult Respondent and Non-Respondent Profiles.....	25
Table 3-2: Child Respondent and Non-Respondent Profiles.....	26
Table 4-1: Star Ratings .....	27
Table 4-2: Overall Adult Scores on the Global Ratings, Composite Measures, and Individual Item Measure Compared to Quality Compass National Percentiles.....	28
Table 4-3: Overall Child Scores on the Global Ratings, Composite Measures, and Individual Item Measure Compared to Quality Compass National Percentiles.....	29
Table 4-4: Correlation Matrix.....	121
Table 4-5: Summary of Ohio Medicaid Managed Care Program Rating of Health Plan Priority Areas .....	122
Table 4-6: Summary of Ohio Medicaid Managed Care Program Rating of All Health Care Priority Areas.....	122
Table 4-7: Summary of Ohio Medicaid Managed Care Program Rating of Personal Doctor Priority Areas .....	123
Table 4-8: Had Personal Doctor .....	160
Table 4-9: Had Personal Doctor .....	161
Table 4-10: Coordination of Care.....	162
Table 4-11: Coordination of Care.....	163
Table 4-12: Number of Doctor’s Office or Clinic Visits in Last Six Months .....	164
Table 4-13: Number of Doctor’s Office or Clinic Visits in Last Six Months .....	165
Table 4-14: Who Helped You Coordinate Your Care.....	166
Table 4-15: Who Helped You Coordinate Your Child’s Care .....	167
Table 4-16: Satisfaction with Help Received to Coordinate Care .....	168
Table 4-17: Satisfaction with Help Received to Coordinate Your Child’s Care .....	169
Table 4-18: Hard to Take Care of Health.....	170
Table 4-19: Received Information About Health .....	171
Table 4-20: Received Information About Child’s Health.....	172
Table 4-21: How Child’s Body is Growing .....	173
Table 4-22: Customer Service Composite .....	174
Table 4-23: Customer Service Composite .....	175
Table 4-24: Rating of All Health Care .....	176
Table 4-25: Rating of All Health Care .....	177
Table 4-26: Rating of Health Plan .....	178
Table 4-27: Rating of Health Plan .....	179
Table 4-28: Rating of Overall Mental or Emotional Health.....	180
Table 4-29: Rating of Overall Mental or Emotional Health.....	181
Table 4-30: Rating of Overall Health.....	182
Table 4-31: Rating of Overall Health.....	183

Table 5-1: Had Personal Doctor .....	233
Table 5-2: Coordination of Care.....	234
Table 5-3: Number of Doctor’s Office or Clinic Visits in Last Six Months .....	235
Table 5-4: Who Helped You Coordinate Your Child’s Care .....	236
Table 5-5: Satisfaction with Help Received to Coordinate Your Child’s Care .....	237
Table 5-6: How Child’s Body is Growing .....	238
Table 5-7: Received Information About Child’s Health.....	239
Table 5-8: Customer Service Composite .....	240
Table 5-9: Rating of All Health Care .....	241
Table 5-10: Rating of Health Plan .....	242
Table 5-11: Rating of Overall Mental or Emotional Health.....	243
Table 5-12: Rating of Overall Health.....	244
Table 5-13: Access to Prescription Medicines .....	245
Table 5-14: Access to Specialized Services CCC Composite.....	246
Table 5-15: Coordination of Care for CCC Composite.....	247
Table 5-16: Use of or Need for Prescription Medicines.....	248
Table 5-17: Above Average Use or Need for Medical, Mental Health, or Education Services .....	249
Table 5-18: Functional Limitations Compared with Others of Same Age.....	249
Table 5-19: Use of or Need for Specialized Therapies.....	250
Table 5-20: Treatment or Counseling for Emotional or Developmental Problems .....	250
Table 6-1: Adult Population National Comparisons Summary—High and Low Scoring Measures .....	251
Table 6-2: General Child Population National Comparisons Summary—High Scoring and Low Scoring Measures .....	252
Table 6-3: Adult Population Statewide Comparisons .....	252
Table 6-4: General Child Population Statewide Comparisons .....	253
Table 6-5: Priority Areas Analysis—Adult Rating of Health Plan Summary Table .....	254
Table 6-6: Priority Areas Analysis—General Child Rating of Health Plan Summary Table .....	255
Table 6-7: Priority Areas Analysis—Adult Rating of All Health Care Summary Table.....	255
Table 6-8: Priority Areas Analysis—General Child Rating of All Health Care Summary Table.....	256
Table 6-9: Priority Areas Analysis—Adult Rating of Personal Doctor Summary Table.....	257
Table 6-10: Priority Areas Analysis—General Child Rating of Personal Doctor Summary Table.....	258
Table 6-11: CCC and Non-CCC Comparative Analysis Summary of Results .....	264
Table 6-12: CCC and Non-CCC Trend Analysis Summary of Results .....	265
Table 7-1: Adult and General Child Response Rate Comparison.....	269
Table 8-1: Star Ratings Crosswalk .....	272
Table 8-2: Overall Adult Medicaid Member Ratings Crosswalk.....	273
Table 8-3: Overall General Child Medicaid Member Ratings Crosswalk .....	273
Table 8-4: Sampling Error and the Number of Survey Responses .....	276

## List of Figures

Figure 4-1: Adult Rating of Health Plan Response Category Percentages .....	32
Figure 4-2: Child Rating of Health Plan Response Category Percentages.....	33
Figure 4-3: Adult Rating of All Health Care Response Category Percentages.....	34
Figure 4-4: Child Rating of All Health Care Response Category Percentages .....	35
Figure 4-5: Adult Rating of Personal Doctor Response Category Percentages.....	36
Figure 4-6: Child Rating of Personal Doctor Response Category Percentages .....	37
Figure 4-7: Adult Rating of Specialist Seen Most Often Response Category Percentages .....	38
Figure 4-8: Child Rating of Specialist Seen Most Often Response Category Percentages.....	39
Figure 4-9: Adult Getting Needed Care Response Category Percentages .....	40

Figure 4-10: Adult Getting Needed Care: Got Care Believed Necessary Response Category Percentages.....	42
Figure 4-11: Adult Getting Needed Care: Saw a Specialist Response Category Percentages.....	43
Figure 4-12: Child Getting Needed Care Response Category Percentages.....	44
Figure 4-13: Child Getting Needed Care: Got Care Believed Necessary Response Category Percentages .....	45
Figure 4-14: Child Getting Needed Care: Saw a Specialist Response Category Percentages .....	46
Figure 4-15: Adult Getting Care Quickly Response Category Percentages.....	47
Figure 4-16: Adult Getting Care Quickly: Received Care as Soon as Wanted Response Category Percentages .....	48
Figure 4-17: Adult Getting Care Quickly: Received Appointment as Soon as Wanted Response Category Percentages ....	49
Figure 4-18: Child Getting Care Quickly Response Category Percentages .....	50
Figure 4-19: Child Getting Care Quickly: Received Care as Soon as Wanted Response Category Percentages.....	51
Figure 4-20: Child Getting Care Quickly: Received Appointment as Soon as Wanted Response Category Percentages.....	52
Figure 4-21: Adult How Well Doctors Communicate Response Category Percentages .....	53
Figure 4-22: Adult How Well Doctors Communicate: Doctors Explained Things in Way They Could Understand Response Category Percentages .....	54
Figure 4-23: Adult How Well Doctors Communicate: Doctors Listened Carefully Response Category Percentages.....	55
Figure 4-24: Adult How Well Doctors Communicate: Doctors Showed Respect Response Category Percentages .....	56
Figure 4-25: Adult How Well Doctors Communicate: Doctors Spent Enough Time with Patient Response Category Percentages.....	57
Figure 4-26: Child How Well Doctors Communicate Response Category Percentages.....	58
Figure 4-27: Child How Well Doctors Communicate: Doctors Explained Things in Way They Could Understand Response Category Percentages .....	59
Figure 4-28: Child How Well Doctors Communicate: Doctors Listened Carefully Response Category Percentages .....	60
Figure 4-29: Child How Well Doctors Communicate: Doctors Showed Respect Response Category Percentages.....	61
Figure 4-30: Child How Well Doctors Communicate: Doctors Spent Enough Time with Patient Response Category Percentages.....	62
Figure 4-31: Adult Customer Service Response Category Percentages.....	63
Figure 4-32: Adult Customer Service: Obtained Help Needed from Customer Service Response Category Percentages...	64
Figure 4-33: Adult Customer Service: Health Plan Customer Service Treated with Courtesy and Respect Response Category Percentages .....	65
Figure 4-34: Child Customer Service Response Category Percentages .....	66
Figure 4-35: Child Customer Service: Obtained Help Needed from Customer Service Response Category Percentages ...	67
Figure 4-36: Child Customer Service: Health Plan Customer Service Treated with Courtesy and Respect Response Category Percentages .....	68
Figure 4-37: Adult Shared Decision Making Response Category Percentages .....	69
Figure 4-38: Adult Shared Decision Making: Doctor Talked About Reasons to Take a Medicine Response Category Percentages.....	70
Figure 4-39: Adult Shared Decision Making: Doctor Talked About Reasons Not to Take a Medicine Response Category Percentages.....	71
Figure 4-40: Adult Shared Decision Making: Doctor Asked About Best Medicine Choice for You Response Category Percentages.....	72
Figure 4-41: Child Shared Decision Making Response Category Percentages.....	73
Figure 4-42: Child Shared Decision Making: Doctor Talked About Reasons to Take a Medicine Response Category Percentages.....	74
Figure 4-43: Child Shared Decision Making: Doctor Talked About Reasons Not to Take a Medicine Response Category Percentages.....	75
Figure 4-44: Child Shared Decision Making: Doctor Asked About Best Medicine Choice for Your Child Response Category Percentages.....	76
Figure 4-45: Adult Health Promotion and Education Response Category Percentages .....	77
Figure 4-46: Child Health Promotion and Education Response Category Percentages.....	79
Figure 4-47: Adult Coordination of Care Response Category Percentages .....	80
Figure 4-48: Child Coordination of Care Response Category Percentages .....	81
Figure 4-49: Adult Got Information or Help from Customer Service Response Category Percentages .....	82

Figure 4-50: Child Got Information or Help from Customer Service Response Category Percentages.....	83
Figure 4-51: Adult Filled Out Paperwork Response Category Percentages .....	84
Figure 4-52: Child Filled Out Paperwork Response Category Percentages .....	85
Figure 4-53: Adult Problem with Paperwork for Health Plan Response Category Percentages.....	86
Figure 4-54: Child Problem with Paperwork for Health Plan Response Category Percentages .....	87
Figure 4-55: Adult Had Personal Doctor Response Category Percentages.....	88
Figure 4-56: Child Had Personal Doctor Response Category Percentages .....	90
Figure 4-57: Child Able to Talk with Doctors Response Category Percentages.....	91
Figure 4-58: Doctors Explained Things in Way Child Could Understand Response Category Percentages.....	92
Figure 4-59: Adult Tried to Make Appointment to See Specialist Response Category Percentages.....	93
Figure 4-60: Child Tried to Make Appointment to See Specialist Response Category Percentages .....	95
Figure 4-61: Adult Made Appointments for Health Care Response Category Percentages .....	96
Figure 4-62: Child Made Appointments for Health Care Response Category Percentages.....	97
Figure 4-63: Adult Had Illness, Injury, or Condition that Needed Care Right Away Response Category Percentages.....	98
Figure 4-64: Child Had Illness, Injury, or Condition that Needed Care Right Away Response Category Percentages .....	99
Figure 4-65: Adult Number of Visits to the Doctor’s Office Response Category Percentages .....	100
Figure 4-66: Child Number of Visits to the Doctor’s Office Response Category Percentages.....	102
Figure 4-67: Smoking and Tobacco Use Cessation: Advising Smokers and Tobacco Users to Quit Response Category Percentages.....	104
Figure 4-68: Smoking and Tobacco Use Cessation: Discussing Cessation Medications Response Category Percentages ..	105
Figure 4-69: Smoking and Tobacco Use Cessation: Discussing Cessation Strategies Response Category Percentages.....	106
Figure 4-70: Child Access to Prescription Medicines Response Category Percentages.....	107
Figure 4-71: Child Access to Specialized Services Composite Response Category Percentages .....	109
Figure 4-72: Child Access to Specialized Services: Problem Obtaining Special Medical Equipment Response Category Percentages.....	110
Figure 4-73: Child Access to Specialized Services: Problem Obtaining Special Therapy Response Category Percentages ..	111
Figure 4-74: Child Access to Specialized Services: Problem Obtaining Treatment or Counseling Response Category Percentages.....	112
Figure 4-75: Child FCC: Personal Doctor Who Knows Child Composite Response Category Percentages.....	113
Figure 4-76: Child FCC: Personal Doctor Who Knows Child: Talked About How Child Feeling, Growing, or Behaving Response Category Percentages.....	114
Figure 4-77: Child FCC: Personal Doctor Who Knows Child Understands How Health Conditions Affect Child’s Life Response Category Percentages.....	115
Figure 4-78: Child FCC: Personal Doctor Who Knows Child Understands How Health Conditions Affect Family’s Life Response Category Percentages.....	116
Figure 4-79: Child FCC: Getting Needed Information Response Category Percentages.....	117
Figure 4-80: Child Coordination of Care for CCC Response Category Percentages .....	118
Figure 4-81: Child Coordination of Care for CCC: Child Received Help in Contacting School or Daycare Response Category Percentages.....	119
Figure 4-82: Child Coordination of Care for CCC: Health Plan or Doctors Helped Coordinate Child’s Care Response Category Percentages .....	120
Figure 4-83: Adult Program Priority Matrix for Rating of Health Plan.....	124
Figure 4-84: Adult Buckeye Priority Matrix for Rating of Health Plan .....	125
Figure 4-85: Adult CareSource Priority Matrix for Rating of Health Plan .....	126
Figure 4-86: Adult Molina Priority Matrix for Rating of Health Plan .....	127
Figure 4-87: Adult Paramount Priority Matrix for Rating of Health Plan.....	128
Figure 4-88: Adult UnitedHealthcare Priority Matrix for Rating of Health Plan.....	129
Figure 4-89: Child Program Priority Matrix for Rating of Health Plan .....	130
Figure 4-90: Child Buckeye Priority Matrix for Rating of Health Plan.....	131
Figure 4-91: Child CareSource Priority Matrix for Rating of Health Plan.....	132
Figure 4-92: Child Molina Priority Matrix for Rating of Health Plan.....	133
Figure 4-93: Child Paramount Priority Matrix for Rating of Health Plan .....	134

Figure 4-94: Child UnitedHealthcare Priority Matrix for Rating of Health Plan.....	135
Figure 4-95: Adult Program Priority Matrix for Rating of All Health Care .....	136
Figure 4-96: Adult Buckeye Priority Matrix for Rating of All Health Care.....	137
Figure 4-97: Adult CareSource Priority Matrix for Rating of All Health Care.....	138
Figure 4-98: Adult Molina Priority Matrix for Rating of All Health Care .....	139
Figure 4-99: Adult Paramount Priority Matrix for Rating of All Health Care .....	140
Figure 4-100: Adult UnitedHealthcare Priority Matrix for Rating of All Health Care.....	141
Figure 4-101: Child Program Priority Matrix for Rating of All Health Care .....	142
Figure 4-102: Child Buckeye Priority Matrix for Rating of All Health Care .....	143
Figure 4-103: Child CareSource Priority Matrix for Rating of All Health Care .....	144
Figure 4-104: Child Molina Priority Matrix for Rating of All Health Care .....	145
Figure 4-105: Child Paramount Priority Matrix for Rating of All Health Care.....	146
Figure 4-106: Child UnitedHealthcare Priority Matrix for Rating of All Health Care .....	147
Figure 4-107: Adult Program Priority Matrix for Rating of Personal Doctor .....	148
Figure 4-108: Adult Buckeye Priority Matrix for Rating of Personal Doctor.....	149
Figure 4-109: Adult CareSource Priority Matrix for Rating of Personal Doctor.....	150
Figure 4-110: Adult Molina Priority Matrix for Rating of Personal Doctor .....	151
Figure 4-111: Adult Paramount Priority Matrix for Rating of Personal Doctor .....	152
Figure 4-112: Adult UnitedHealthcare Priority Matrix for Rating of Personal Doctor.....	153
Figure 4-113: Child Program Priority Matrix for Rating of Personal Doctor .....	154
Figure 4-114: Child Buckeye Priority Matrix for Rating of Personal Doctor .....	155
Figure 4-115: Child CareSource Priority Matrix for Rating of Personal Doctor .....	156
Figure 4-116: Child Molina Priority Matrix for Rating of Personal Doctor.....	157
Figure 4-117: Child Paramount Priority Matrix for Rating of Personal Doctor.....	158
Figure 4-118: Child UnitedHealthcare Priority Matrix for Rating of Personal Doctor .....	159
Figure 5-1: CCC and Non-CCC Comparisons: Rating of Health Plan Response Category Percentages .....	186
Figure 5-2: CCC and Non-CCC Comparisons: Rating of All Health Care Response Category Percentages.....	187
Figure 5-3: CCC and Non-CCC Comparisons: Rating of Personal Doctor Response Category Percentages.....	188
Figure 5-4: CCC and Non-CCC Comparisons: Rating of Specialist Seen Most Often Response Category Percentages .....	189
Figure 5-5: CCC and Non-CCC Comparisons: Getting Needed Care Response Category Percentages .....	190
Figure 5-6: CCC and Non-CCC Comparisons: Getting Needed Care – Got Care Believed Necessary Response Category Percentages.....	191
Figure 5-7: CCC and Non-CCC Comparisons: Getting Needed Care – Saw a Specialist Response Category Percentages..	192
Figure 5-8: CCC and Non-CCC Comparisons: Getting Care Quickly Response Category Percentages.....	193
Figure 5-9: CCC and Non-CCC Comparisons: Getting Care Quickly – Received Care as Soon as Wanted Response Category Percentages.....	194
Figure 5-10: CCC and Non-CCC Comparisons: Getting Care Quickly – Received Appointment as Soon as Wanted Response Category Percentages .....	195
Figure 5-11: CCC and Non-CCC Comparisons: How Well Doctors Communicate Response Category Percentages .....	196
Figure 5-12: CCC and Non-CCC Comparisons: How Well Doctors Communicate – Doctors Explained Things in Way They Could Understand Response Category Percentages.....	197
Figure 5-13: CCC and Non-CCC Comparisons: How Well Doctors Communicate – Doctors Listened Carefully Response Category Percentages .....	198
Figure 5-14: CCC and Non-CCC Comparisons: How Well Doctors Communicate – Doctors Showed Respect Response Category Percentages .....	199
Figure 5-15: CCC and Non-CCC Comparisons: How Well Doctors Communicate – Doctors Spent Enough Time with Patient Response Category Percentages.....	200
Figure 5-16: CCC and Non-CCC Comparisons: Customer Service Response Category Percentages.....	201
Figure 5-17: CCC and Non-CCC Comparisons: Customer Service – Obtained Help Needed from Customer Service Response Category Percentages.....	202
Figure 5-18: CCC and Non-CCC Comparisons: Customer Service – Health Plan Customer Service Treated with Courtesy and Respect Response Category Percentages .....	203

Figure 5-19: CCC and Non-CCC Comparisons: Shared Decision Making Response Category Percentages .....	204
Figure 5-20: CCC and Non-CCC Comparisons: Shared Decision Making – Doctor Talked About Reasons to Take a Medicine Response Category Percentages .....	205
Figure 5-21: CCC and Non-CCC Comparisons: Shared Decision Making – Doctor Talked About Reasons Not to Take a Medicine Response Category Percentages .....	206
Figure 5-22: CCC and Non-CCC Comparisons: Shared Decision Making – Doctor Asked About Best Medicine Choice for Your Child Response Category Percentages .....	207
Figure 5-23: CCC and Non-CCC Comparisons: Health Promotion and Education Response Category Percentages .....	208
Figure 5-24: CCC and Non-CCC Comparisons: Coordination of Care Response Category Percentages .....	209
Figure 5-25: CCC and Non-CCC Comparisons: Satisfaction with Health Plan – Got Information or Help from Customer Service Response Category Percentages .....	210
Figure 5-26: CCC and Non-CCC Comparisons: Satisfaction with Health Plan – Filled Out Paperwork Response Category Percentages .....	211
Figure 5-27: CCC and Non-CCC Comparisons: Satisfaction with Health Plan – Problem with Paperwork for Health Plan Response Category Percentages .....	212
Figure 5-28: CCC and Non-CCC Comparisons: Satisfaction with Health Care Providers – Had Personal Doctor Response Category Percentages .....	213
Figure 5-29: CCC and Non-CCC Comparisons: Satisfaction with Health Care Providers – Child Able to Talk with Doctors Response Category Percentages .....	214
Figure 5-30: CCC and Non-CCC Comparisons: Satisfaction with Health Care Providers – Doctor Explained Things in Way Child Could Understand Response Category Percentages .....	215
Figure 5-31: CCC and Non-CCC Comparisons: Access to Care – Tried to Make Appointment to See Specialist Response Category Percentages .....	216
Figure 5-32: CCC and Non-CCC Comparisons: Access to Care – Made Appointments for Health Care Response Category Percentages .....	217
Figure 5-33: CCC and Non-CCC Comparisons: Access to Care – Had Illness, Injury, or Condition that Needed Care Right Away Response Category Percentages .....	218
Figure 5-34: CCC and Non-CCC Comparisons: Utilization of Services – Number of Visits to the Doctor’s Office Response Category Percentages .....	219
Figure 5-35: CCC and Non-CCC Comparisons: Access to Prescription Medicines Response Category Percentages .....	220
Figure 5-36: CCC and Non-CCC Comparisons: Access to Specialized Services Response Category Percentages .....	221
Figure 5-37: CCC and Non-CCC Comparisons: Access to Specialized Services – Special Medical Equipment Response Category Percentages .....	222
Figure 5-38: CCC and Non-CCC Comparisons: Access to Specialized Services – Special Therapy Response Category Percentages .....	223
Figure 5-39: CCC and Non-CCC Comparisons: Access to Specialized Services – Treatment or Counseling Response Category Percentages .....	224
Figure 5-40: CCC and Non-CCC Comparisons: FCC: Personal Doctor Who Knows Child Response Category Percentages .....	225
Figure 5-41: CCC and Non-CCC Comparisons: FCC: Personal Doctor Who Knows Child – Talked About How Child Feeling, Growing, or Behaving Response Category Percentages .....	226
Figure 5-42: CCC and Non-CCC Comparisons: FCC: Personal Doctor Who Knows Child – Understands How Health Conditions Affect Child’s Life Response Category Percentages .....	227
Figure 5-43: CCC and Non-CCC Comparisons: FCC: Personal Doctor Who Knows Child – Understands How Health Conditions Affect Family’s Life Response Category Percentages .....	228
Figure 5-44: CCC and Non-CCC Comparisons: FCC: Getting Needed Information Response Category Percentages .....	229
Figure 5-45: CCC and Non-CCC Comparisons: Coordination of Care for CCC Response Category Percentages .....	230
Figure 5-46: CCC and Non-CCC Comparisons: Coordination of Care for CCC – Received Help in Contacting School or Daycare Response Category Percentages .....	231
Figure 5-47: CCC and Non-CCC Comparisons: Coordination of Care for CCC – Health Plan or Doctors Helped Coordinate Child’s Care Response Category Percentages .....	232
Figure 8-1: Sampling Error and the Number of Completed Surveys .....	276



# 1. Introduction

## Overview

The Ohio Department of Medicaid (ODM) requires 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 surveys of member experience with care. Survey results provide important feedback on MCP performance which is used to identify opportunities for continuous improvement in the care and services provided to members. ODM requires the MCPs to contract with a National Committee for Quality Assurance (NCQA)-certified Healthcare Effectiveness Data and Information Set (HEDIS®) survey vendor to conduct annual Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Health Plan Surveys. ODM contracted with IPRO to analyze the MCPs' 2019 survey data and report the results. This report presents the 2019 CAHPS results of adult members and the parents or caretakers of child members enrolled in an MCP. These results are trended using the 2018 CAHPS results.

The standardized survey instruments administered in 2019 were the CAHPS 5.0H Adult Medicaid Health Plan Survey and the CAHPS 5.0H Child Medicaid Health Plan Survey (with the children with chronic conditions [CCC] measurement set). Five MCPs participated in the 2019 CAHPS Medicaid Health Plan Surveys, as listed in Table 1-1. Adult members and the parents or caretakers of child members from each MCP completed the 2019 surveys from February to May 2019.

Table 1-1: Participating MCPs

MCP Name	MCP Abbreviation
Buckeye Health Plan	Buckeye
CareSource	CareSource
Molina Healthcare of Ohio, Inc.	Molina
Paramount Advantage	Paramount
UnitedHealthcare Community Plan of Ohio, Inc.	UnitedHealthcare

## Program Changes

In 2017, more Ohioans were able to access their benefits through one of the state's five Medicaid MCPs. Effective January 1, 2017, Ohio Medicaid transitioned the following recipient groups from fee-for-service to mandatory managed care: individuals enrolled in the Bureau of Children with Medical Handicaps (BCMh) program, children in the custody of Public Children's Services Agencies (PCSAs), children receiving federal adoption assistance, and individuals receiving services through the Breast and Cervical Cancer Project (BCCP). In addition, voluntary enrollment in a Medicaid MCP was extended to individuals on a developmental disabilities waiver. Also, effective February 2017, eligibility for respite services was expanded to cover child beneficiaries who receive long-term care and have behavioral health needs.

Ohio Medicaid made significant progress in 2017 to advance population health outcomes, beginning with implementation of the state's Comprehensive Primary Care (CPC) program. This program provides comprehensive services to members in a medical home setting to manage population health and encourage improvement in population health outcomes. MCPs work collaboratively with the CPC practices and provide ongoing support through CPC-MCP partnerships initiated by ODM. In 2017, 111 primary care practices and 1.1 million individuals were enrolled in the program, with monthly enrollment averaging 800,000 members.

Throughout 2017 and 2018, the MCP care management program continued to evolve in alignment with ODM's population health approach to managed care. Effective January 1, 2018, the MCPs extended the use of an ODM-approved and standardized pediatric or adult needs assessment tool to each member, within 90 days of enrollment. The MCPs use this information to risk-stratify members and identify any potential needs for care management.

In 2018, Ohio Medicaid transitioned the following recipient group from fee-for-service to mandatory managed care: individuals enrolled in the Medicaid Buy-In for Workers with Disabilities (MBIWD) program.

On January 1, 2018, Ohio Medicaid launched Behavioral Health Redesign, an initiative aimed at rebuilding Ohio’s community behavioral health capacity. This included the addition of new services for people with high intensity service and support needs. Effective July 1, 2018, Ohio integrated behavioral health services into Managed Care.

In 2018, ODM began “Managed Care Day 1” to help minimize the amount of time an individual is on fee-for-service and maximize their managed care experience. Recipients are assigned to a managed care plan effective the first day of the month in which Medicaid eligibility is determined.

## Sampling Procedures

### Sample Frame

ODM required the MCPs to administer the 2019 CAHPS Surveys according to the NCQA HEDIS Specifications for Survey Measures.<sup>1</sup> The members eligible for sampling included those who were MCP members at the time the sample was drawn and who were continuously enrolled in the MCP for at least five of the last six months (July through December) of 2018. Adult members eligible for sampling included those who were 18 years of age or older (as of December 31, 2018). Child members eligible for sampling included those who were 17 years of age or younger (as of December 31, 2018). Table 1-2 depicts the total sample frame size (i.e., total number of members eligible for sampling) by population (adult or child) for each MCP.

Table 1-2: MCP Sample Frame Sizes

MCP	Adult Sample Frame	Child Sample Frame
Buckeye	131,471	123,543
CareSource	506,254	503,161
Molina	120,854	103,405
Paramount	103,360	80,920
UnitedHealthcare	153,865	110,198

### Sample Size

A systematic sample of adult and child members (i.e., general population of children) was selected from each participating MCP.<sup>2</sup> Table 1-3 provides a breakout of the sample sizes for each MCP for adult and general child members.

Table 1-3: MCP Sample Sizes

MCP	Adult Sample Size	General Child Sample Size
Buckeye	2,700	3,300
CareSource	1,890	3,300
Molina	1,755	4,620
Paramount	1,890	1,650
UnitedHealthcare	1,890	2,310

Child members in the child sample frame could have a chronic condition prescreen status code of 1 or 2. A prescreen status code of 1 indicated that the member did not have claims or encounters that suggested the member had a greater probability of having a chronic condition. A prescreen status code of 2 (also known as a positive prescreen status code) indicated that the member had claims or encounters that suggested the member had a greater probability of having a chronic condition.<sup>3</sup> After selecting child members for the general child sample, a sample of at least 1,840 child members

<sup>1</sup> National Committee for Quality Assurance. *HEDIS® 2019, Volume 3: Specifications for Survey Measures*. Washington, DC: NCQA, 2018.

<sup>2</sup> Each MCP contracted with its own vendor to administer the surveys.

<sup>3</sup> National Committee for Quality Assurance. *HEDIS® 2019, Volume 3: Specifications for Survey Measures*. Washington, DC: NCQA, 2018.

with a prescreen code of 2 was selected from each MCP for the NCQA CCC supplemental sample, which represented the population of children who were more likely to have a chronic condition. This sample was drawn to ensure an adequate number of responses from children with chronic conditions. Please note, child members in both the general child sample and CCC supplemental sample received the same CAHPS 5.0H Child Medicaid Health Plan Survey (with the CCC measurement set) instrument. The general child sample from each MCP represents the general child population. The CAHPS 5.0H Child Medicaid Health Plan Survey also included several questions used to screen for children with chronic conditions (i.e., CCC screener questions). This screener was used to identify children with chronic conditions from both the general child sample and CCC supplemental sample.

Table 1-4 provides a breakout of the sample sizes for each MCP for the CCC supplemental sample.

Table 1-4: CCC Supplemental Sample Sizes

MCP	CCC Supplemental Sample Size
Buckeye	3,680
CareSource	1,840
Molina	1,840
Paramount	1,840
UnitedHealthcare	2,576

NCQA protocol permits oversampling in any increment. MCPs were required by ODM to oversample the adult population by at least 30 percent. Table 1-5 provides a breakout of the oversample rates for each MCP for adult and general child members.<sup>4</sup>

Table 1-5: MCP Oversampling Rates

MCP	Adult Rate	General Child Rate
Buckeye	100%	100%
CareSource	40%	100%
Molina	30%	180%
Paramount	40%	0%
UnitedHealthcare	40%	40%

## Survey Protocol

The MCPs contracted with separate survey vendors to administer the CAHPS surveys. The survey administration protocol employed by the MCPs' vendors allowed for various methods by which members could complete the surveys. The first phase, or mail phase, consisted of a survey being mailed to sampled members. Sampled members received an English and/or Spanish version of the survey. A reminder postcard was sent to all non-respondents, followed by a second survey mailing and reminder postcard. For survey vendors that elected to use the standard Internet protocol, an option to complete the survey via the Internet was provided in the cover letter with the mailed surveys. The second phase, or telephone phase, consisted of Computer Assisted Telephone Interviewing (CATI) for sampled members who had not mailed in a completed survey or completed a survey via the Internet. A series of at least three CATI calls was made to each non-respondent.<sup>5</sup> It has been shown that the addition of a telephone phase aids in the reduction of non-response

<sup>4</sup> The oversampling percentage varied for each MCP.

<sup>5</sup> National Committee for Quality Assurance. *Quality Assurance Plan for HEDIS 2019 Survey Measures*. Washington, DC: NCQA, 2018.

bias by increasing the number of respondents who are more demographically representative of a health plan’s population.<sup>6</sup>

According to HEDIS specifications for the CAHPS Surveys, surveys were completed using the time frames shown in Table 1-6.

Table 1-6: CAHPS Survey Mixed-Mode Methodology Time Frames<sup>7</sup>

Basic Tasks for Conducting the Surveys	Time Frames
Send first questionnaire with cover letter to the adult member or parent/caretaker 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 interviews 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

## Response Rates

The administration of the CAHPS 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> For both the adult and child surveys, a member’s survey was assigned a disposition code of “completed” if at least three of the following five questions were completed: questions 3, 15, 24, 28, and 35 for the adult population and questions 3, 30, 45, 49, and 54 for the child population. Eligible members included the entire sample (including any oversample) minus ineligible members. Ineligible members of the sample met one or more of the following criteria: they were deceased, they were invalid (did not meet the criteria on page 12 of this report), they were mentally or physically incapacitated, or they had a language barrier.<sup>9</sup> For additional information on the calculation of a completed survey and response rates, please refer to the *2019 Ohio Medicaid Managed Care Program CAHPS® Member Experience Survey Methodology Report*.

For 2019, a total of 4,112 surveys was completed for Ohio’s Medicaid Managed Care Program. This total includes 2,058 adult surveys and 2,054 general child surveys (note, child members in the CCC supplemental sample are not included in this number). The survey response rates were 16.40 percent for Ohio’s Medicaid Managed Care Program, 20.58 percent for the adult population, and 13.63 percent for the general child population (which excludes children in the CCC supplemental sample).

Table 1-7 depicts the total response rates (combining adult and general child members) and the response rates by population (adult or general child) for Ohio’s Medicaid Managed Care Program and all participating MCPs.

<sup>6</sup> Fowler FJ Jr., Gallagher PM, Stringfellow VL, et al. “Using Telephone Interviews to Reduce Nonresponse Bias to Mail Surveys of Health Plan Members.” *Medical Care*. 2002; 40(3): 190-200.

<sup>7</sup> National Committee for Quality Assurance. *HEDIS® 2019, Volume 3: Specifications for Survey Measures*. Washington, DC: NCQA, 2018.

<sup>8</sup> National Committee for Quality Assurance. *Quality Assurance Plan for HEDIS 2019 Survey Measures*. Washington, DC: NCQA, 2018.

<sup>9</sup> The mentally or physically incapacitated designation is not valid for the CAHPS 5.0H Child Medicaid Health Plan Survey. Children that are mentally or physically incapacitated are eligible for inclusion in the child results.

Table 1-7: CAHPS 5.0H Medicaid Response Rates

Program/Managed Care Plan <sup>1</sup>	Total Response Rate	Adult Response Rate	General Child Response Rate
<b>Ohio Medicaid</b>	<b>16.40%</b>	<b>20.58%</b>	<b>13.63%</b>
Buckeye	15.60%	20.57%	11.55%
CareSource	15.28%	18.19%	13.63%
Molina	18.65%	24.81%	16.32%
Paramount	17.91%	21.43%	13.90%
UnitedHealthcare	14.27%	18.23%	11.07%

<sup>1</sup>Please note, children in the CCC supplemental sample are not included in the response rates.

Table 1-8 depicts the total number of completed surveys (combining adult and general child members) and the number of completed surveys by population (adult or general child) for Ohio’s Medicaid Managed Care Program and all participating MCPs.

Table 1-8: CAHPS 5.0H Medicaid Completed Surveys

Program/Managed Care Plan <sup>1</sup>	Total Completed Surveys	Adult Completed Surveys	Child Completed Surveys
<b>Ohio Medicaid</b>	<b>4,112</b>	<b>2,058</b>	<b>2,054</b>
Buckeye	932	552	380
CareSource	785	339	446
Molina	1,175	429	746
Paramount	626	399	227
UnitedHealthcare	594	339	255

<sup>1</sup>Please note, children in the CCC supplemental sample are not included in the number of completed surveys.

A total of 3,680 parents or caretakers of child members returned a completed survey from both the general child and CCC supplemental samples. Of the 3,680 completed child surveys, 1,626 were from children identified as having a chronic condition based on survey responses (CCC population), and 2,054 were from children who did not have a chronic condition (non-CCC population). This represents a response rate for the child population of 13.7 percent for Ohio’s Medicaid Managed Care Program.<sup>10</sup>

## 2. Demographics

This section depicts the characteristics of respondents and members who completed the CAHPS Survey.<sup>11</sup> In general, the demographics of a response group may influence the overall results. For example, older and healthier respondents tend to report a more positive experience.

### Background

Demographic characteristics of a state’s Medicaid population can impact survey data outcomes. These characteristics can include general health status, age, education, income, employment, or any other characteristics that define the demographic make-up of a population. Demographic differences among Ohio’s Medicaid Managed Care Program MCPs may influence results.

<sup>10</sup> Please note, this includes all children sampled (both the general child sample and the CCC supplemental sample). According to 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 paragraph should not be compared to the NCQA response rates.

<sup>11</sup> The parents or caretakers of child members completed the CAHPS 5.0H Child Medicaid Health Plan Survey on behalf of child members.

NCQA elects not to case-mix adjust the results it provides for two principal reasons: 1) Different experts recommend different approaches to case-mix-adjustment, and the choice of method will affect the results obtained; and 2) If a plan provides poor service to a specific subpopulation, and this subpopulation represents a large proportion of the total members, then case-mix adjustment could bias a plan's results and overestimate the quality of care that the plan provides. Therefore, NCQA does not recommend case-mix adjusting Medicaid CAHPS results to account for plan or state differences in demographic make-up.<sup>12</sup> For additional information about the CAHPS analyses used in this report, please refer to the *2019 Ohio Medicaid Managed Care Program CAHPS® Member Experience Survey Methodology Report*.

## **Adult and General Child Profiles**

The demographic data in the “Adult and General Child Profiles” section consists of three tables, Table 2-1 through Table 2-3. These tables depict member- and respondent-level demographic data for adult and general child members.

Table 2-1 presents the demographic characteristics of the adult members who completed the CAHPS 5.0H Adult Medicaid Health Plan Survey. Age and gender were derived from sample frame data, while education, race, ethnicity, and general health status were derived from responses to the survey.

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<sup>12</sup> Agency for Healthcare Research and Quality. “CAHPS Health Plan Survey Database Methodology.” *The CAHPS Benchmarking Database*. Rockville, MD: US Department of Health and Human Services, September 2009.

Table 2-1: Adult Member Profiles

Program/Managed Care Plan <sup>1</sup>	Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
<b>Age</b>						
18 to 24	<b>7.2%</b>	7.3%	7.7%	7.7%	7.3%	6.2%
25 to 34	<b>13.4%</b>	9.8%	13.3%	11.7%	18.3%	15.6%
35 to 44	<b>12.1%</b>	9.8%	15.3%	11.4%	14.0%	10.9%
45 to 54	<b>24.1%</b>	25.4%	27.7%	24.5%	21.1%	21.2%
55 or older	<b>43.3%</b>	47.8%	36.0%	44.8%	39.3%	46.0%
<b>Gender</b>						
Male	<b>45.0%</b>	44.4%	41.9%	48.0%	44.9%	45.7%
Female	<b>55.0%</b>	55.6%	58.1%	52.0%	55.1%	54.3%
<b>Education</b>						
Not a High School Graduate	<b>21.4%</b>	21.3%	21.5%	24.6%	19.4%	20.1%
High School Graduate	<b>43.6%</b>	44.9%	43.3%	47.0%	41.6%	40.1%
Some College	<b>26.0%</b>	25.0%	26.1%	20.9%	28.3%	31.0%
College Graduate	<b>9.0%</b>	8.9%	9.1%	7.5%	10.7%	8.8%
<b>Race</b>						
Multi-Racial	<b>6.7%</b>	3.5%	7.9%	6.5%	8.4%	8.9%
White	<b>67.7%</b>	70.6%	66.8%	66.7%	66.1%	67.3%
Black or African American	<b>20.3%</b>	20.5%	19.8%	19.9%	22.4%	18.2%
Asian	<b>1.6%</b>	1.5%	1.2%	2.6%	0.8%	2.2%
Native Hawaiian or Other Pacific Islander	<b>0.0%</b>	0.0%	0.0%	0.0%	0.0%	0.0%
American Indian or Alaska Native	<b>0.4%</b>	0.2%	0.0%	0.5%	0.3%	1.2%
Other	<b>3.3%</b>	3.7%	4.3%	3.8%	2.1%	2.2%
<b>Ethnicity</b>						
Hispanic	<b>3.9%</b>	3.4%	4.4%	3.3%	4.8%	3.7%
Non-Hispanic	<b>96.1%</b>	96.6%	95.6%	96.7%	95.2%	96.2%
<b>General Health Status</b>						
Excellent	<b>7.1%</b>	5.3%	5.7%	7.7%	9.7%	7.6%
Very Good	<b>19.0%</b>	19.7%	17.4%	17.7%	19.2%	21.0%
Good	<b>37.5%</b>	39.9%	37.5%	34.8%	39.4%	34.7%
Fair	<b>28.1%</b>	26.8%	30.0%	31.6%	23.5%	29.2%
Poor	<b>8.3%</b>	8.3%	9.3%	8.1%	8.2%	7.6%

<sup>1</sup>Please note, percentages may not total 100% due to rounding.

Table 2-1 shows that, when compared to Ohio’s Medicaid Managed Care Program average, Buckeye, CareSource, Molina, and Paramount had a higher percentage of respondents 24 years of age and younger. When compared to Ohio’s Medicaid Managed Care Program average and the other MCPs, CareSource had the lowest percentage of respondents 55 years of age or older. Buckeye, CareSource, and Paramount had more Female respondents than the program average. In addition, when compared to the program average, Buckeye and Molina had a higher percentage of respondents who self-reported High School Graduate as their education level. Buckeye and Paramount had a higher percentage of Black or African American respondents when compared to the program average. Also, when compared to the program average, Paramount and UnitedHealthcare had a higher percentage of respondents whose self-reported general health status was Excellent or Very Good.

Table 2-2 presents the demographics characteristics of the general child members whose parents or caretakers completed the CAHPS 5.0H Child Medicaid Health Plan Survey. Age and gender were derived from sample frame data, while race, ethnicity, and general health status were derived from responses to the survey.

Table 2-2: General Child Profiles

Program/Managed Care Plan <sup>1</sup>	Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
<b>Age</b>						
Less than 2	<b>9.6%</b>	9.7%	8.7%	9.8%	13.7%	6.7%
2 to 4	<b>15.4%</b>	20.3%	17.7%	12.2%	14.5%	14.5%
5 to 7	<b>16.2%</b>	13.7%	15.2%	19.3%	15.0%	13.3%
8 to 10	<b>16.9%</b>	15.0%	19.5%	16.1%	16.3%	18.0%
11 to 13	<b>17.8%</b>	15.5%	17.0%	19.7%	16.7%	17.7%
14 to 17	<b>24.1%</b>	25.8%	21.8%	22.9%	23.8%	29.8%
<b>Gender</b>						
Male	<b>50.1%</b>	51.8%	46.6%	51.9%	50.7%	47.8%
Female	<b>40.9%</b>	48.2%	53.4%	48.1%	49.3%	52.2%
<b>Race</b>						
Multi-Racial	<b>12.8%</b>	10.7%	12.2%	12.7%	17.2%	13.7%
White	<b>62.9%</b>	68.3%	59.5%	62.7%	58.6%	65.3%
Black or African American	<b>15.5%</b>	13.2%	20.6%	13.1%	18.7%	14.5%
Asian	<b>3.0%</b>	4.2%	2.6%	3.8%	1.0%	1.6%
Native Hawaiian or Other Pacific Islander	<b>0.1%</b>	0.0%	0.0%	0.3%	0.0%	0.0%
American Indian or Alaska Native	<b>0.3%</b>	0.0%	0.2%	0.3%	1.0%	0.0%
Other	<b>5.3%</b>	3.6%	4.9%	7.1%	3.4%	4.8%
<b>Ethnicity</b>						
Hispanic	<b>12.2%</b>	9.1%	9.6%	15.8%	13.5%	9.8%
Non-Hispanic	<b>87.8%</b>	90.9%	90.4%	84.2%	86.5%	90.2%
<b>General Health Status</b>						
Excellent	<b>39.9%</b>	40.1%	41.7%	42.3%	31.5%	36.9%
Very Good	<b>38.8%</b>	39.6%	41.7%	34.2%	46.5%	39.3%
Good	<b>18.0%</b>	18.2%	14.1%	19.2%	17.8%	21.0%
Fair	<b>3.0%</b>	1.8%	2.3%	4.1%	3.8%	2.4%
Poor	<b>0.3%</b>	0.3%	0.2%	0.3%	0.5%	0.4%

<sup>1</sup>Please note, percentages may not total 100% due to rounding.

Table 2-2 shows Buckeye, CareSource, and Paramount had a higher percentage of child members 4 years of age and younger than Ohio's Medicaid Managed Care Program average. Buckeye, Molina, and Paramount had more Male child members than the program average. In addition, CareSource and Paramount had a higher percentage of child members who were Black or African American when compared to the program average. When compared to the program average, Buckeye and CareSource had a higher percentage of child members whose reported general health status was Excellent or Very Good.

Respondents to the CAHPS 5.0H Child Medicaid Health Plan Survey were the parents or caretakers of child members. Table 2-3 presents the demographic characteristics of the parents or caretakers who completed the survey. Age, gender, education, and respondent relationship to the child were derived from responses to the survey.

Table 2-3: General Child Respondent Profiles

Program/Managed Care Plan <sup>1</sup>	Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
<b>Age</b>						
Under 18 <sup>2</sup>	<b>9.7%</b>	13.6%	9.6%	8.0%	5.5%	12.9%
18 to 24	<b>5.8%</b>	6.8%	6.0%	4.9%	7.9%	4.8%
25 to 34	<b>25.6%</b>	28.7%	26.8%	25.8%	27.2%	17.3%
35 to 44	<b>26.5%</b>	24.4%	25.2%	26.7%	28.7%	29.3%
45 to 54	<b>15.5%</b>	13.6%	15.1%	15.4%	16.3%	18.1%
55 or older	<b>16.9%</b>	12.8%	17.2%	19.2%	14.4%	17.7%
<b>Gender</b>						
Male	<b>12.3%</b>	13.8%	9.5%	12.2%	10.6%	16.9%
Female	<b>87.7%</b>	86.2%	90.5%	87.8%	89.4%	83.1%
<b>Education</b>						
Not a High School Graduate	<b>14.3%</b>	14.2%	13.7%	15.9%	9.2%	14.9%
High School Graduate	<b>37.9%</b>	37.9%	33.1%	40.7%	42.2%	34.5%
Some College	<b>34.9%</b>	35.9%	39.6%	30.9%	35.0%	36.9%
College Graduate	<b>12.9%</b>	12.0%	13.5%	12.6%	13.6%	13.7%
<b>Respondent Relationship to Child</b>						
Parent	<b>80.5%</b>	84.8%	82.1%	78.1%	82.6%	76.8%
Grandparent	<b>13.0%</b>	9.9%	14.2%	14.6%	8.5%	14.3%
Other	<b>6.5%</b>	5.4%	3.7%	7.3%	9.0%	8.9%

<sup>1</sup>Please note, percentages may not total 100% due to rounding.

<sup>2</sup>The “Under 18” age category was a possible response choice only for the parents or caretakers responding to the CAHPS 5.0H Child Medicaid Health Plan Survey on behalf of child members.

Table 2-3 shows Buckeye, CareSource, and UnitedHealthcare had a higher percentage of respondents 24 years of age and younger than Ohio’s Medicaid Managed Care Program average. Overall, there were substantially more Female respondents than Male respondents for the program average and all MCPs. Molina and Paramount had a higher percentage of respondents whose self-reported education level was a High School Graduate than the program average. CareSource, Molina, and UnitedHealthcare had a higher percentage of respondents indicate their relationship to the child member was a Grandparent when compared to the program average.

### Children with Chronic Conditions Profiles

The demographic data in the “Children with Chronic Conditions Profiles” section consists of four tables, Table 2-4 through Table 2-7. Table 2-4 and Table 2-5 depict respondent- and member-level demographic data, respectively. Member age and gender were derived from sample frame data. Member race, ethnicity, and general health status, and respondent age, gender, education, and relationship to child information were derived from responses to the survey. Table 2-6 and Table 2-7 discuss the CCC population and how this population was identified.

### Respondent and Member Profiles

Respondents to the CAHPS 5.0H Child Medicaid Health Plan Survey were the parents or caretakers of child members. Table 2-4 depicts the demographic characteristics of the respondents who completed the survey on behalf of child members in the CCC and non-CCC populations.

Table 2-4: CCC and Non-CCC Respondent Profiles

Program/Managed Care Plan <sup>1</sup>	Ohio Medicaid CCC Population	Ohio Medicaid Non-CCC Population
<b>Age</b>		
Under 18 <sup>2</sup>	9.8%	11.4%
18 to 24	1.8%	7.8%
25 to 34	18.4%	28.0%
35 to 44	27.5%	26.4%
45 to 54	20.0%	12.0%
55 or older	22.6%	14.5%
<b>Gender</b>		
Male	11.3%	14.3%
Female	88.7%	85.7%
<b>Education</b>		
Not a High School Graduate	11.1%	16.8%
High School Graduate	36.3%	37.5%
Some College	38.7%	32.6%
College Graduate	14.0%	13.1%
<b>Respondent Relationship to Child</b>		
Parent	72.9%	83.2%
Grandparent	18.7%	11.1%
Other	8.4%	5.7%

<sup>1</sup>Please note, percentages may not total 100% due to rounding.

<sup>2</sup>The “Under 18” age category was a possible response choice only for the parents or caretakers responding to the CAHPS 5.0H Child Medicaid Health Plan Survey on behalf of child members.

Table 2-4 shows the non-CCC population had a higher percentage of respondents who were 34 years of age and younger when compared to the CCC population. The CCC population had a higher percentage of respondents who were Female than the non-CCC population. The non-CCC population had a higher percentage of respondents whose self-reported education level was a High School Graduate than the CCC population. The non-CCC population had a higher percentage of respondents indicate their relationship to the child member was a Parent when compared to the CCC population.

Table 2-5 presents the demographic characteristics of the child members with and without chronic conditions in the Ohio Medicaid Managed Care Program whose parents or caretakers completed the CAHPS 5.0H Child Medicaid Health Plan Survey.

Table 2-5: CCC and Non-CCC Child Member Profiles

Program/Managed Care Plan <sup>1</sup>	Ohio Medicaid CCC Population	Ohio Medicaid Non-CCC Population
<b>Age</b>		
Less than 2	2.5%	14.7%
2 to 4	8.6%	18.7%
5 to 7	15.2%	15.1%
8 to 10	20.0%	14.3%
11 to 13	22.0%	15.2%
14 to 17	31.7%	22.1%
<b>Gender</b>		
Male	56.4%	49.4%
Female	43.6%	50.6%
<b>Race</b>		
Multi-Racial	12.4%	13.0%
White	66.9%	61.2%
Black or African American	15.1%	15.9%
Asian	1.2%	4.0%
Native Hawaiian or Other Pacific Islander	0.1%	0.2%
American Indian or Alaska Native	0.1%	0.2%
Other	4.4%	5.5%
<b>Ethnicity</b>		
Hispanic	7.9%	13.3%
Non-Hispanic	92.1%	86.7%
<b>General Health Status</b>		
Excellent	19.7%	47.6%
Very Good	40.3%	37.1%
Good	31.1%	14.0%
Fair	8.1%	1.1%
Poor	0.9%	0.1%

<sup>1</sup>Please note, percentages may not total 100% due to rounding.

Table 2-5 shows the non-CCC population had a higher percentage of child members 4 years of age and younger when compared to the CCC population. The non-CCC population had a higher percentage of child members who were Female than the CCC population. The non-CCC population had a higher percentage of child members who were Multi-Racial, Black or African American, Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, or an Other race than the CCC population, while the CCC population had a higher percentage of children who were White. The non-CCC population had a higher percentage of child members who were Hispanic than the CCC population. The non-CCC population had a higher percentage of child members whose general health status was reported as Excellent or Very Good when compared to the CCC population.

### Chronic Conditions Classification

A series of questions used to identify children with chronic conditions was included in the CAHPS 5.0H Child Medicaid Health Plan Survey distributed to parents and caretakers of child members. This series contained five sets of survey questions that focused on specific health care needs and conditions. Child members with affirmative responses to all 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 the 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 general child sample and the CCC supplemental sample were analyzed to determine which child members had chronic conditions. Therefore, the general population of children (i.e., those in the general child sample) included children with chronic conditions based on the responses to the survey questions. For each category, except for the Mental Health Services category, the first question was a gate item for the second question, which asked whether the child's use, need, or limitations were due to a health condition. Respondents who selected "No" to the first question were instructed to skip subsequent questions in that 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 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, which asked whether the condition had 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.

Table 2-6 displays the responses to the five categories of questions for all children sampled. The Ohio Medicaid CCC population included children in the general child sample and in the CCC supplemental sample with affirmative responses to all questions in any of the five categories.

Table 2-6: Responses to CCC Screener Questions—Response of “Yes”

Health Care Needs/Conditions <sup>1</sup>	Ohio Medicaid CCC Population	Ohio Medicaid Non-CCC Population
<b>Prescription Medicine</b>		
Needs/Uses Prescription Medicine	78.2%	14.1%
Due to Health Condition	97.6%	30.3%
Condition Duration of at Least 12 Months	98.6%	0.0%
<b>More Care</b>		
Needs/Uses More Care	59.4%	2.9%
Due to Health Condition	96.5%	32.7%
Condition Duration of at Least 12 Months	99.3%	0.0%
<b>Functional Limitations</b>		
Limited Abilities	35.8%	5.5%
Due to Health Condition	95.3%	11.1%
Condition Duration of at Least 12 Months	98.9%	0.0%
<b>Special Therapy</b>		
Needs/Gets Therapy	29.1%	5.7%
Due to Health Condition	89.9%	18.7%
Condition Duration of at Least 12 Months	97.8%	0.0%
<b>Mental Health Services</b>		
Needs/Gets Counseling	65.4%	3.2%
Condition Duration of at Least 12 Months	97.7%	0.0%

<sup>1</sup>Please note, the parents or caretakers of child members in the general 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 Medicaid 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 Medicaid Non-CCC population.

A total of 44.40 percent of all child members for whom a survey was completed (42.77percent of child members in the general child sample and 57.22 percent of child members in the CCC supplemental sample) had a chronic condition based on “Yes” responses to all questions in at least one of the five categories listed in Table 2-6.<sup>13</sup>

Table 2-7 depicts the percentage of children with chronic conditions who had affirmative responses to all questions in each of the five categories. Please note, a child member can appear in more than one category.

Table 2-7: Distribution of Categories for CCC Population

Prescription Medicine <sup>1</sup>	More Care	Functional Limitations	Special Therapy	Mental Health Service
74.3%	55.1%	32.9%	24.9%	62.0%

<sup>1</sup>Please note, a child member may appear in more than one category.

<sup>13</sup> The 44.40 percent is derived from the number of individuals who responded “Yes” to all questions in at least one of the five CCC categories (as described in Table 2-6) divided by the total number of individuals in the entire child CAHPS sample (general child sample plus the CCC supplemental sample).

### 3. Respondent/Non-Respondent Analysis

This section compares the demographic characteristics of the CAHPS Survey respondents to the non-respondents. Non-response bias refers to a difference in how respondents answer survey questions compared to how non-respondents would have answered if they had responded. This section identifies whether any statistically significant differences exist between these two populations with respect to age and gender. A statistically significant difference between these two populations may indicate that the potential for non-response bias exists.

It is important to determine the magnitude of non-response bias when interpreting CAHPS Survey results because the experiences of the non-respondent population may differ from respondents' experiences with respect to their health care services. If the results from those who respond to a survey are statistically significantly different from non-response results, non-response bias may exist that could compromise the ability to generalize survey results. If statistically significant differences between respondent and non-respondent results are identified, then caution should be exercised when interpreting the CAHPS Survey results.

#### Description

The demographic information analyzed in this section was derived from administrative data. For the adult age category, members were categorized as 18 to 24, 25 to 34, 35 to 44, 45 to 54, or 55 or older. For the child age category, members were categorized as less than 2, 2 to 4, 5 to 7, 8 to 10, 11 to 13, or 14 to 17. For the gender category, members were categorized as Male or Female.

#### Analysis

The respondent and non-respondent populations were analyzed for statistically significant differences at the MCP and program levels. Respondents within one MCP were compared to non-respondents within the same MCP to identify statistically significant differences for any of the demographic categories. Also, respondents within the entire Ohio Medicaid Managed Care Program were compared to non-respondents within the entire program to identify statistically significant differences. Statistically significant differences are noted with arrows. MCP- and program-level percentages for the respondent population that were statistically significantly higher than the non-respondent population are noted with upward (↑) arrows. MCP- and program-level percentages for the respondent population that were statistically significantly lower than the non-respondent population are noted with downward (↓) arrows. MCP- and program-level percentages for the respondent population that were not statistically significantly different from the non-respondent population are not noted with arrows.

#### Adult Respondent and Non-Respondent Profiles

Table 3-1 presents the demographic characteristics of the adult respondents and non-respondents to the CAHPS 5.0H Adult Medicaid Health Plan Survey.

Table 3-1: Adult Respondent and Non-Respondent Profiles

Program/Managed Care Plan <sup>1</sup>		Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
<b>Age</b>							
18 to 24	R <sup>2</sup>	<b>6.9%↓</b>	6.6%↓	6.4%↓	7.5%↓	7.1%↓	6.8%↓
	NR	<b>17.60%</b>	15.90%	19.20%	19.00%	18.50%	16.50%
25 to 34	R	<b>13.7%↓</b>	10.1%↓	13.3%↓	12%↓	19.9%↓	15.1%↓
	NR	<b>26.30%</b>	22.70%	27.70%	28.70%	29.60%	24.80%
35 to 44	R	<b>12.5%↓</b>	10.6%↓	16.40%	12.2%↓	13.3%↓	11.3%↓
	NR	<b>19.00%</b>	17.70%	19.80%	18.80%	20.70%	18.60%
45 to 54	R	<b>26.9%↑</b>	27.6%↑	30.3%↑	28.1%↑	24.7%↑	23.50%
	NR	<b>19.00%</b>	21.40%	17.90%	18.80%	17.70%	18.40%
55 or older	R	<b>39.9%↑</b>	45.1%↑	33.6%↑	40.1%↑	35%↑	43.1%↑
	NR	<b>18.00%</b>	22.40%	15.30%	14.70%	13.40%	21.60%
<b>Gender</b>							
Male	R	<b>45.00%</b>	44.4%↓	41.90%	48.00%	44.80%	45.70%
	NR	<b>47.10%</b>	50.70%	38.70%	49.50%	50.00%	45.60%
Female	R	<b>55.00%</b>	55.6%↑	58.10%	52.00%	55.20%	54.30%
	NR	<b>52.90%</b>	49.30%	61.20%	50.50%	50.00%	54.40%

<sup>1</sup>Please note, respondent-level and non-respondent-level percentages for each demographic category may not total 100% due to rounding.

<sup>2</sup>An “R” indicates respondent percentages and an “NR” indicates non-respondent percentages. Respondent population percentages that are statistically higher than percentages for the non-respondent population are noted with upward arrows (↑). Respondent population percentages that are statistically lower than percentages for the non-respondent population are noted with downward arrows (↓). Respondent population percentages that are not statistically different from percentages for the non-respondent population are not noted with arrows.

### General Child Respondent and Non-Respondent Profiles

Table 3-2 presents the demographic characteristics of child members whose parents or caretakers did or did not respond to the CAHPS 5.0H Child Medicaid Health Plan Survey.<sup>14</sup>

<sup>14</sup> Please note, the characteristics of parents or caretakers (who were the actual respondents to the CAHPS 5.0H Child Medicaid Health Plan Survey) were not available in the sample frame data provided by the MCPs.

Table 3-2: Child Respondent and Non-Respondent Profiles

Program/Managed Care Plan <sup>1</sup>		Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
<b>Age</b>							
Less than 2	R <sup>2</sup>	<b>11.6%↓</b>	12.90%	13.10%	10%↓	14.80%	8.6%↓
	NR	<b>15.20%</b>	16.00%	15.80%	14.80%	15.40%	14.00%
2 to 4	R	<b>15.5%↓</b>	19.20%	15.70%	14.4%↓	15.70%	12.7%↓
	NR	<b>20.10%</b>	21.00%	19.90%	19.50%	21.60%	19.30%
5 to 7	R	<b>16.90%</b>	13.70%	18.30%	18.80%	14.30%	15.90%
	NR	<b>17.00%</b>	16.90%	16.20%	18.00%	16.70%	16.40%
8 to 10	R	<b>18.70%</b>	15.90%	19.70%	19.50%	19.00%	18.80%
	NR	<b>17.30%</b>	15.30%	17.30%	18.60%	16.80%	18.10%
11 to 13	R	<b>18.4%↑</b>	18.70%	15.50%	19.3%↑	16.20%	22.90%
	NR	<b>15.60%</b>	15.80%	16.00%	14.70%	16.20%	16.10%
14 to 17	R	<b>18.7%↑</b>	19.50%	17.60%	17.90%	19.90%	21.20%
	NR	<b>14.70%</b>	15.10%	14.70%	14.40%	13.20%	16.00%
<b>Gender</b>							
Male	R	<b>50.10%</b>	51.80%	46.60%	51.80%	50.70%	47.80%
	NR	<b>51.60%</b>	51.10%	50.50%	52.40%	51.20%	52.20%
Female	R	<b>49.90%</b>	48.20%	53.40%	48.10%	49.30%	52.20%
	NR	<b>48.40%</b>	48.80%	49.50%	47.60%	48.80%	47.80%

<sup>1</sup>Please note, respondent-level and non-respondent-level percentages for each demographic category may not total 100% due to rounding.

<sup>2</sup>An “R” indicates respondent percentages and an “NR” indicates non-respondent percentages. Respondent population percentages that are statistically higher than percentages for the non-respondent population are noted with upward arrows (↑). Respondent population percentages that are statistically lower than percentages for the non-respondent population are noted with downward arrows (↓). Respondent population percentages that are not statistically different from percentages for the non-respondent population are not noted with arrows.

### Summary

Table 3-1 and Table 3-2 present the results of the Respondent/Non-Respondent analysis for the adult and general child populations, respectively. Overall, results of the analysis show that statistically significant demographic differences were found for the Ohio Medicaid Managed Care Program’s adult and general child populations. There were significantly more respondents to the adult survey who were 45 years of age or older than the non-respondents, while significantly fewer respondents than non-respondents were 18 to 44 years of age. For the child survey, there were significantly fewer respondents than non-respondents for child members 4 years of age and younger, and there were significantly more respondents than non-respondents for child members 8 to 17 years of age.

Since the full effect of non-response on overall results cannot be determined (due to a lack of information from non-respondents), the potential for non-response bias should be considered when evaluating CAHPS results. However, the demographic differences in and of themselves are not necessarily an indication that significant non-response bias exists. The differences simply indicate that a particular subgroup or population is less likely to respond to a survey than another subgroup or population.

## 4. Adult and General Child Results

This section presents the results of the adult and general child populations (i.e., respondents from the CCC supplemental sample were not included in this analysis) for the Ohio Medicaid Managed Care Program and each MCP. The results are presented in four separate sections:

- National Comparisons
- Statewide Comparisons
- Priority Areas for Quality Improvement
- Cross-Tabulations

The results in this section were calculated in accordance with HEDIS specifications for survey measures.<sup>15</sup> According to HEDIS specifications, results for the adult and child populations are reported separately, and no weighting or case-mix adjustment is performed on the results. When reviewing these findings, it should be noted that NCQA’s averages and percentiles do not adjust for the respondent’s health status or socioeconomic, demographic, and/or geographic differences among participating states or MCPs.

## National Comparisons

To assess the overall performance of the Ohio Medicaid Managed Care Program and MCPs, the four global ratings (Rating of Health Plan, Rating of All Health Care, Rating of Personal Doctor, and Rating of Specialist Seen Most Often), four composite measures (Getting Needed Care, Getting Care Quickly, How Well Doctors Communicate, and Customer Service), and one individual item measure (Coordination of Care) were scored on a 100-point scale using an NCQA-approved scoring methodology to produce a top box score.<sup>16</sup> The Ohio Medicaid Managed Care Program’s and MCPs’ scores were compared to NCQA’s 2019 Quality Compass National Percentiles.<sup>17</sup> Based on this comparison, ratings of one (★) to five (★★★★★) stars were determined for each CAHPS measure, where one is the lowest possible rating (i.e., Poor) and five is the highest possible rating (i.e., Excellent), as shown in Table 4-1.

Table 4-1: Star Ratings

Stars	Percentiles
★ Poor	Below the 25th percentile
★★ Fair	At or between the 25th and 49th percentiles
★★★ Good	At or between the 50th and 74th percentiles
★★★★ Very Good	At or between the 75th and 89th percentiles
★★★★★ Excellent	At or above the 90th percentile

The results in the following two tables include the scores for each measure, while the stars represent overall adult and general child member ratings when the scores were compared to NCQA’s 2019 Quality Compass National Percentiles. Although NCQA requires a minimum of 100 responses on each item in order to report the item as a CAHPS/HEDIS result, all MCPs’ results are reported for each item in this report, regardless of the number of responses, to provide more information regarding MCP performance. Measures with fewer than 100 responses are noted with an asterisk.

Table 4-2 shows the overall adult member ratings on each of the four global ratings, four composite measures, and one individual item measure.

<sup>15</sup> National Committee for Quality Assurance. *HEDIS® 2019. Volume 3: Technical Specifications for Survey Measures*. Washington, DC: NCQA, 2018.

<sup>16</sup> This methodology differs from prior years’ editions of this report, which used three-point and one-point mean scores.

<sup>17</sup> National Committee for Quality Assurance. *Quality Compass 2019*. Washington, DC: NCQA, 2019.

Table 4-2: Overall Adult Scores on the Global Ratings, Composite Measures, and Individual Item Measure Compared to Quality Compass National Percentiles

	Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
<b>Global Ratings</b>						
Rating of Health Plan	☆☆☆ 80.36	☆☆☆ 80.75	★★★★★ 83.33	★★ 75.30	☆☆☆ 80.52	★★★★★ 82.93
Rating of All Health Care	☆☆☆ 76.74	☆☆☆ 75.89	★★ 73.00	★★★★★ 78.76	★★★★★ 79.00	☆☆☆ 76.92
Rating of Personal Doctor	☆☆☆ 82.64	☆☆☆ 82.57	★ 78.54	☆☆☆ 83.13	☆☆☆ 83.89	★★★★★ 84.92
Rating of Specialist Seen Most Often	★★ 82.41	☆☆☆ 84.94	☆☆☆ 82.88	★★ 81.46	★ 76.84	★★★★★ 85.44
<b>Composite Measures</b>						
Getting Needed Care	★★★★★ 87.04	☆☆☆ 85.04	★★★★★ 88.7	★★★★★ 86.72	★★★★★ 89.87	★★★★★ 85.86
Getting Care Quickly	★★★★★ 85.13	★★★★★ 86.94	★★★★★ 86.19	☆☆☆ 85.07	☆☆☆ 84.80	★★ 81.45
How Well Doctors Communicate	☆☆☆ 92.78	☆☆☆ 92.77	☆☆☆ 92.91	☆☆☆ 92.12	★★★★★ 94.09	★★ 91.85
Customer Service	☆☆☆ 90.77	★★ 88.92	☆☆☆ 89.81	★★★★★ 91.02	★★★★★ 91.52	★★★★★ 94.07
<b>Individual Item Measure</b>						
Coordination of Care	☆☆☆ 84.98	☆☆☆ 84.16	★ 80.00	★★★★★ 88.75	★★★★★ 88.88	★★ 82.31
Star Assignments Based on Percentiles						
★★★★★ 90th or Above      ★★★★ 75th – 89th      ☆☆☆ 50th – 74th      ★★ 25th – 49th      ★ Below 25th						

The Ohio Medicaid Managed Care Program scored at or above the 90th percentile for Getting Needed Care. The Ohio Medicaid Managed Care Program scored at or between the 75th and 89th percentiles for Getting Care Quickly. In addition, the Ohio Medicaid Managed Care Program scored at or between the 50th and 74th percentiles for Rating of Health Plan, Rating of All Health Care, Rating of Personal Doctor, How Well Doctors Communicate, Customer Service, and Coordination of Care. The Ohio Medicaid Managed Care Program scored at or between the 25th and 49th percentiles for Rating of Specialist Seen Most Often. The Ohio Medicaid Managed Care Program did not score below the 25th percentile on any measures.

Table 4-3 shows the overall general child member ratings on each of the four global ratings, four composite measures, and one individual item measure.

Table 4-3: Overall Child Scores on the Global Ratings, Composite Measures, and Individual Item Measure Compared to Quality Compass National Percentiles

	Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
<b>Global Ratings</b>						
Rating of Health Plan	★★ 85.22	★★ 85.11	★★★★ 89.38	★ 81.31	★★★ 87.74	★★★ 87.35
Rating of All Health Care	★★★ 89.19	★★★ 89.20	★★★★ 90.15	★★★★ 88.68	★★★★ 90.75	★★ 87.50
Rating of Personal Doctor	★★★ 90.59	★★★ 90.77	★★★★ 92.68	★★ 90.44	★ 88.24	★★ 88.89
Rating of Specialist Seen Most Often	★★★★ 90.67	★★★★★ 94.12*	★ 85.26*	★★★★★ 91.78	★★★★★ 93.44*	★★★ 88.89*
<b>Composite Measures</b>						
Getting Needed Care	★★★★ 88.63	★★★ 86.85	★★★ 85.96	★★★★ 89.65	★★★★★ 91.78	★★★★ 89.38
Getting Care Quickly	★★ 92.54	★★ 92.2	★★ 91.98	★★★ 92.64	★★★ 94.32	★★ 92.21
How Well Doctors Communicate	★★★★ 95.89	★★★ 95.42	★★★★ 97.05	★★★★ 95.84	★★★ 94.98	★★★ 95.52
Customer Service	★★★ 89.48	★★★ 89.02	★★★ 88.85	★★★ 89.63	★★★★★ 93.84*	★★★ 86.89*
<b>Individual Item Measure</b>						
Coordination of Care	★★★ 86.11	★★★★ 87.69	★★★★★ 90.07	★★ 83.50	★★★★ 88.23*	★★ 81.57*
Star Assignments Based on Percentiles						
★★★★★ 90th or Above    ★★★★ 75th – 89th    ★★★ 50th – 74th    ★★ 25th – 49th    ★ Below 25th						

\* Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

The Ohio Medicaid Managed Care Program did not score at or above the 90th percentile for any measures. The Ohio Medicaid Managed Care Program scored at or between the 75th and 89th percentile for Rating of Specialist Seen Most Often, Getting Needed Care, and How Well Doctors Communicate. The Ohio Medicaid Managed Care Program scored at or between the 50th and 74th percentiles for Rating of All Health Care, Rating of Personal Doctor, Customer Service, and Coordination of Care. The Ohio Medicaid Managed Care Program scored at or between the 25th and 49th percentiles for Rating of Health Plan and Getting Care Quickly. The Ohio Medicaid Managed Care Program did not score at or below the 25th percentile on any measures.

## Statewide Comparisons

For the global ratings, composite measures, composite items, individual item measures, CCC composite measures, CCC composite items, and CCC items the score was provided on a 100-point scale.<sup>18</sup> Responses were classified into response categories.

For the global ratings, these were the response categories:

<sup>18</sup> The CCC composite measures and CCC item measures are only included in the CAHPS 5.0H Child Medicaid Health Plan Survey (with CCC measurement set). Parents or caretakers of both general child members (those in the general child sample) and CCC members (those in the CCC supplemental sample) completed the CAHPS 5.0H Child Medicaid Health Plan Survey (with CCC measurement set), which includes the CCC composite measures and CCC items. The “Statewide Comparisons” section presents the CCC composite and CCC item results for general child members and children with chronic conditions.

- 0 to 4 (Dissatisfied)
- 5 to 7 (Neutral)
- 8 to 10 (Satisfied)

The following response categories were used for the Getting Needed Care, Getting Care Quickly, How Well Doctors Communicate, and Customer Service composite measures and items; the Coordination of Care individual item measure; the Access to Specialized Services CCC composite measure; and the Access to Prescription Medicines and Family-Centered Care (FCC): Getting Needed Information CCC items:

- Never (Dissatisfied)
- Sometimes (Neutral)
- Usually/Always (Satisfied)

The following response categories were used for the Shared Decision Making composite measure and items, Health Promotion and Education individual item measure, and the FCC: Personal Doctor Who Knows Child and the Coordination of Care for Children with Chronic Conditions CCC composite measures, and the items within these CCC composites:

- No
- Yes

The following Smoking and Tobacco Use Cessation measure response categories were used:

- Never (No)
- Sometimes/Usually/Always (Yes)

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. Scores were calculated for each of these survey questions. Members' responses to questions within the areas of interest were classified into response categories and are described in detail within the discussion of each of these questions.

The MCPs' scores were compared to Ohio's Medicaid Managed Care Program (program average) scores to determine whether there were statistically significant differences between the scores for each MCP and the program average scores. Each of the response category percentages and scores were compared for statistically significant differences. For additional information on these tests for statistical significance, please refer to the *2019 Ohio Medicaid Managed Care Program CAHPS® Member Experience Survey Methodology Report*.

Statistically significant differences between the 2019 MCP-level scores and the 2019 program average are noted with arrows. MCP-level scores that were statistically significantly higher than the program average are noted with upward (↑) arrows. MCP-level scores that were statistically significantly lower than the program average are noted with downward (↓) arrows. MCP-level scores that were not statistically significantly different from the program average are not noted with arrows. In some instances, the scores for two MCPs were the same, but one score was statistically significantly different from the program average and the other was not. In these instances, the difference in the number of respondents between the two MCPs explains the different statistical results. It is more likely that a statistically significant result will be found in an MCP with a larger number of respondents.

In addition, scores in 2019 were compared to the scores in 2018 to determine whether there were statistically significant differences.<sup>19</sup> Each of the response category percentages and the scores were compared for statistically significant differences. Statistically significant differences between scores in 2019 and scores in 2018 for each MCP and the program average are noted with triangles. Scores that were statistically significantly higher in 2019 than in 2018 are

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<sup>19</sup> To conduct trending analysis for each rating or measure, scores for 2018 were recalculated using the new methodology adopted for 2019. Therefore, the 2018 scores displayed in each figure below are different from the scores reported in the *2018 Ohio Medicaid Managed Care Program CAHPS® Member Experience Survey Full Report*.

noted with upward (▲) triangles. Scores that were statistically significantly lower in 2019 than in 2018 are noted with downward (▼) triangles. Scores in 2019 that were not statistically significantly different from scores in 2018 are not noted with triangles. For additional information on the tests for statistical significance used in these trend comparisons, please refer to the *2019 Ohio Medicaid Managed Care Program CAHPS® Member Experience Survey Methodology Report*.

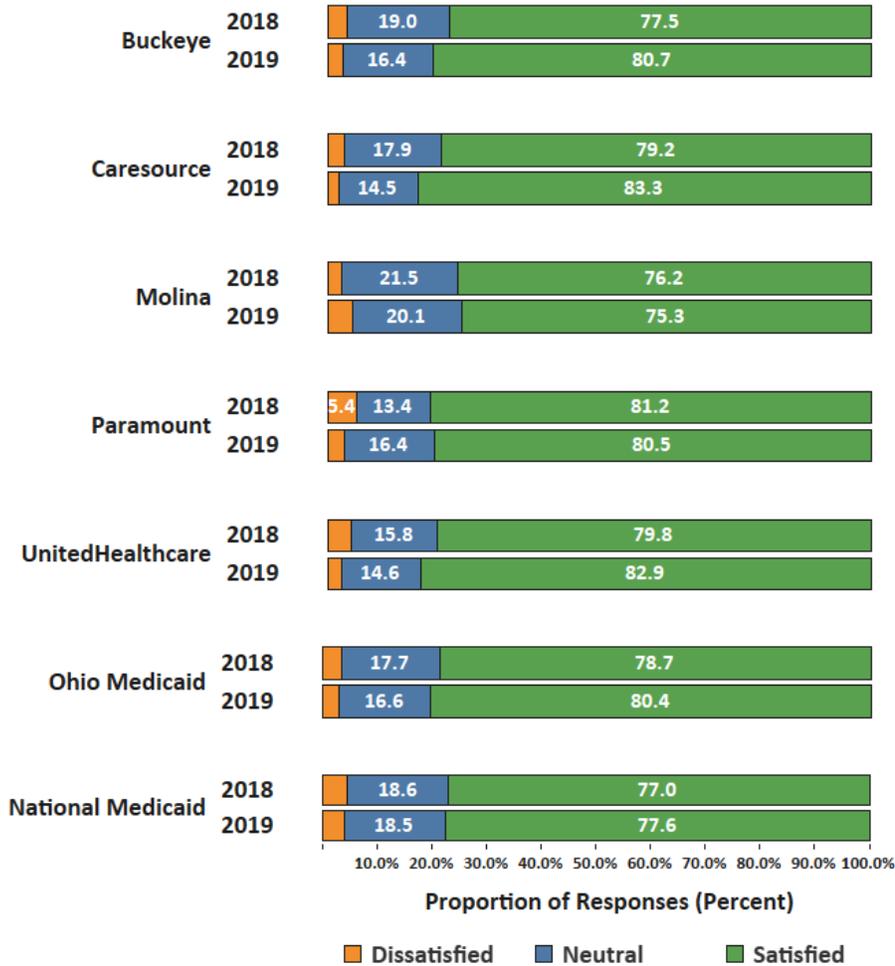
Measures with fewer than 100 responses are noted with an asterisk (\*). The 2018 and 2019 NCQA national Medicaid averages are presented for measures, when available, for comparison. The text below the figures provides details of the statistically significant differences for the scores for each measure. Arrows and triangles noting statistically significant results are only displayed for the scores in the figures.

## Global Ratings

### Rating of Health Plan

Respondents were asked to rate their health plan/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 this question, responses were classified into three categories: Dissatisfied (0–4), Neutral (5–7), and Satisfied (8–10). Figure 4-1 and Figure 4-2 depict the percentage of respondents in each of the response categories for the adult population and child population, respectively.

Figure 4-1: Adult Rating of Health Plan Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population’s score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population’s score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of “Usually/Always” or “Yes” or “3 or more times”.

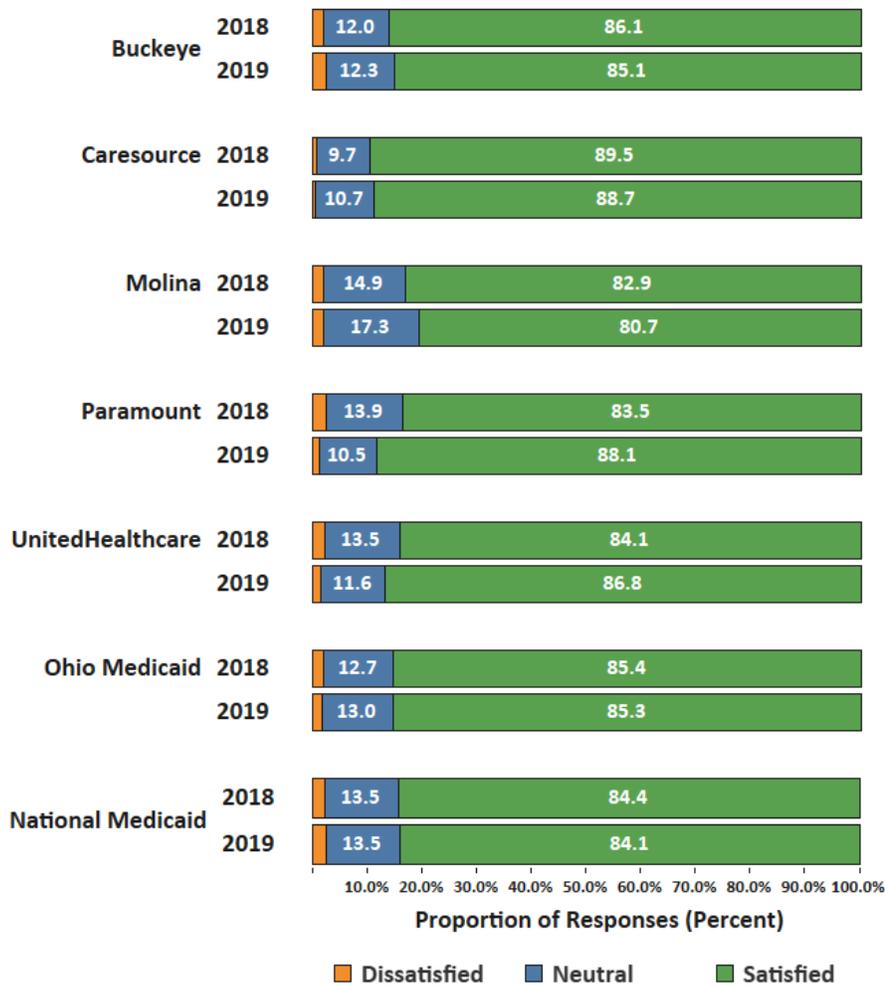
### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

Figure 4-2: Child Rating of Health Plan Response Category Percentages



Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there was one statistically significant difference observed for this measure.

- Molina's score was significantly lower than the program average.

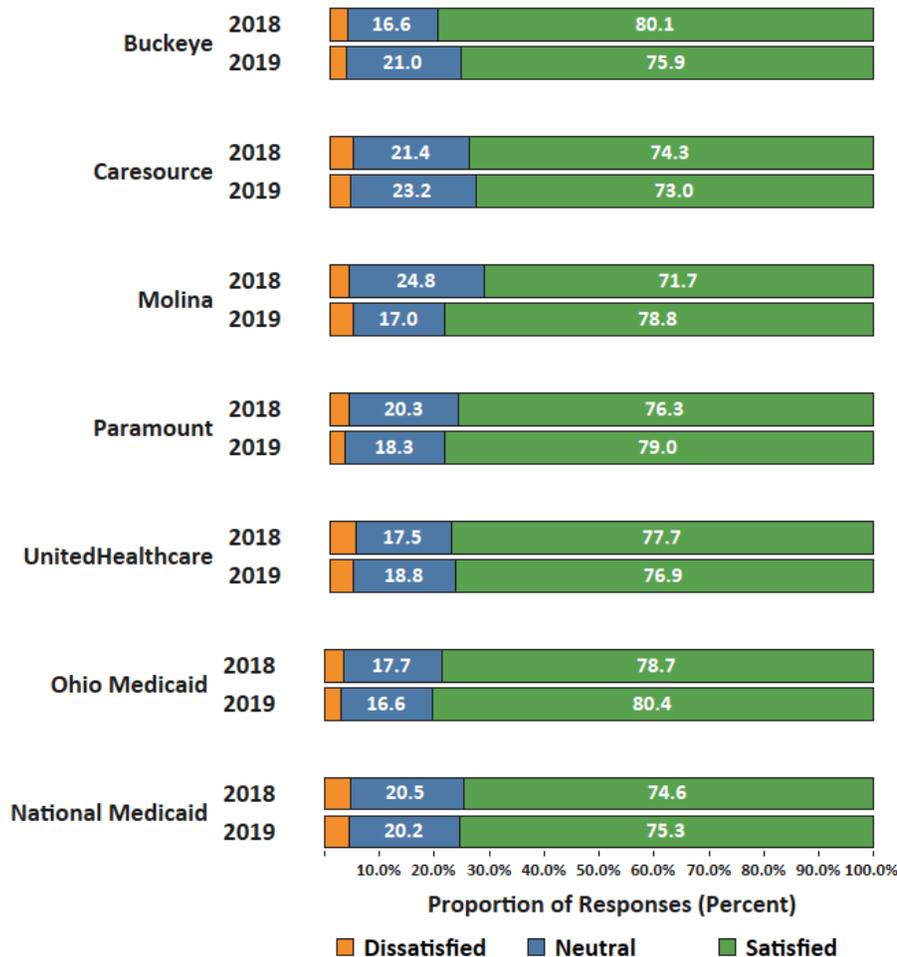
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Rating of All Health Care

Respondents were asked to rate all their health care/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 this question, responses were classified into three categories: Dissatisfied (0–4), Neutral (5–7), and Satisfied (8–10). Figure 4-3 and Figure 4-4 depict the percentage of respondents in each of the response categories for the adult population and child population, respectively.

Figure 4-3: Adult Rating of All Health Care Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population’s score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population’s score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of “Usually/Always” or “Yes” or “3 or more times”.

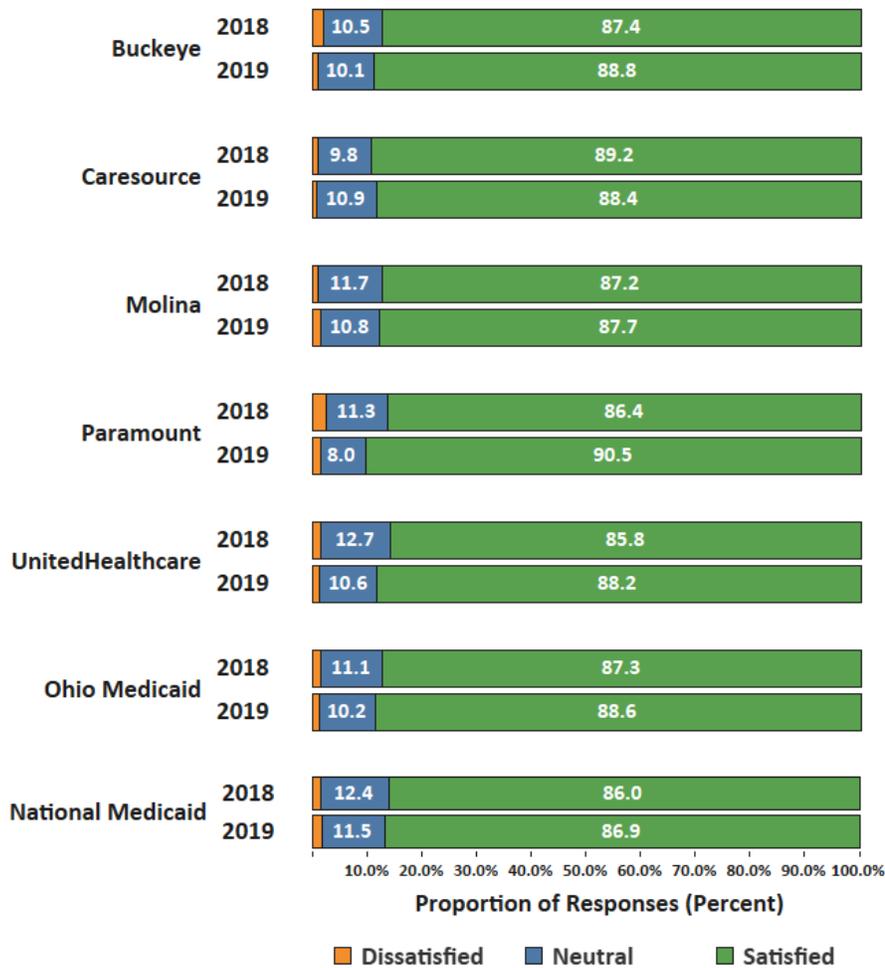
### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

Figure 4-4: Child Rating of All Health Care Response Category Percentages



Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

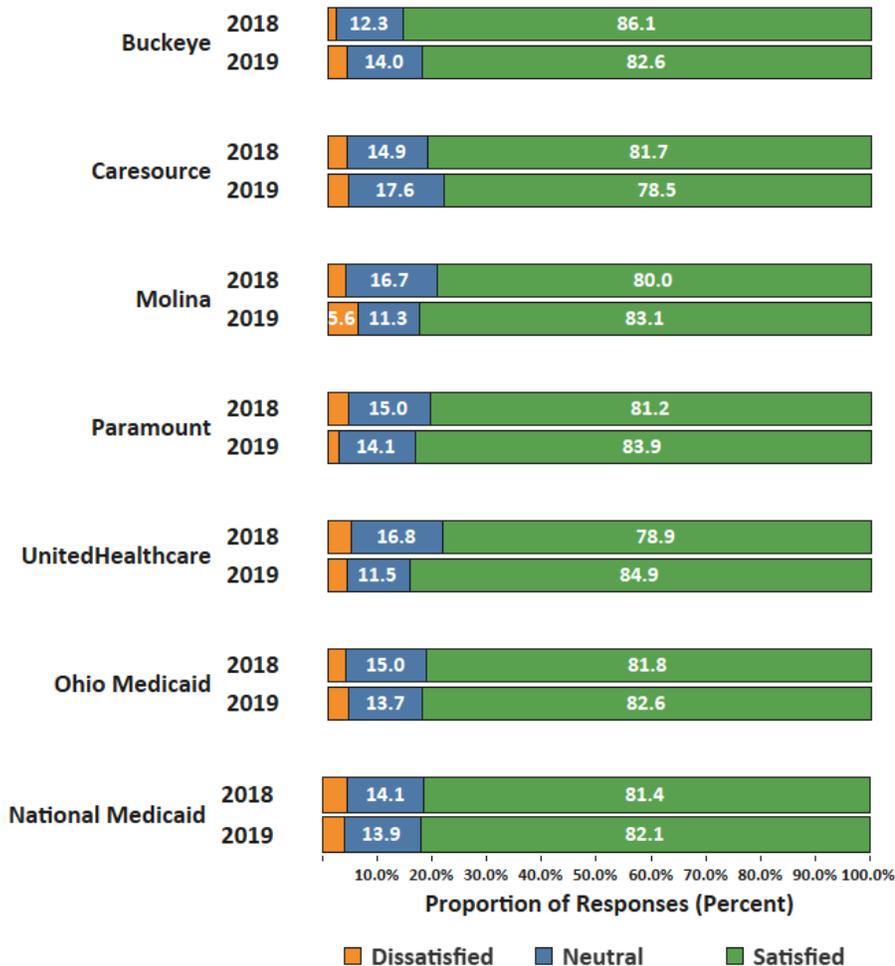
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Rating of Personal Doctor

Respondents were asked to rate their personal doctor/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 this question, responses were classified into three categories: Dissatisfied (0–4), Neutral (5–7), and Satisfied (8–10). Figure 4-5 and Figure 4-6 depict the percentage of respondents in each of the response categories for the adult population and child population, respectively.

Figure 4-5: Adult Rating of Personal Doctor Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population’s score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population’s score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of “Usually/Always” or “Yes” or “3 or more times”.

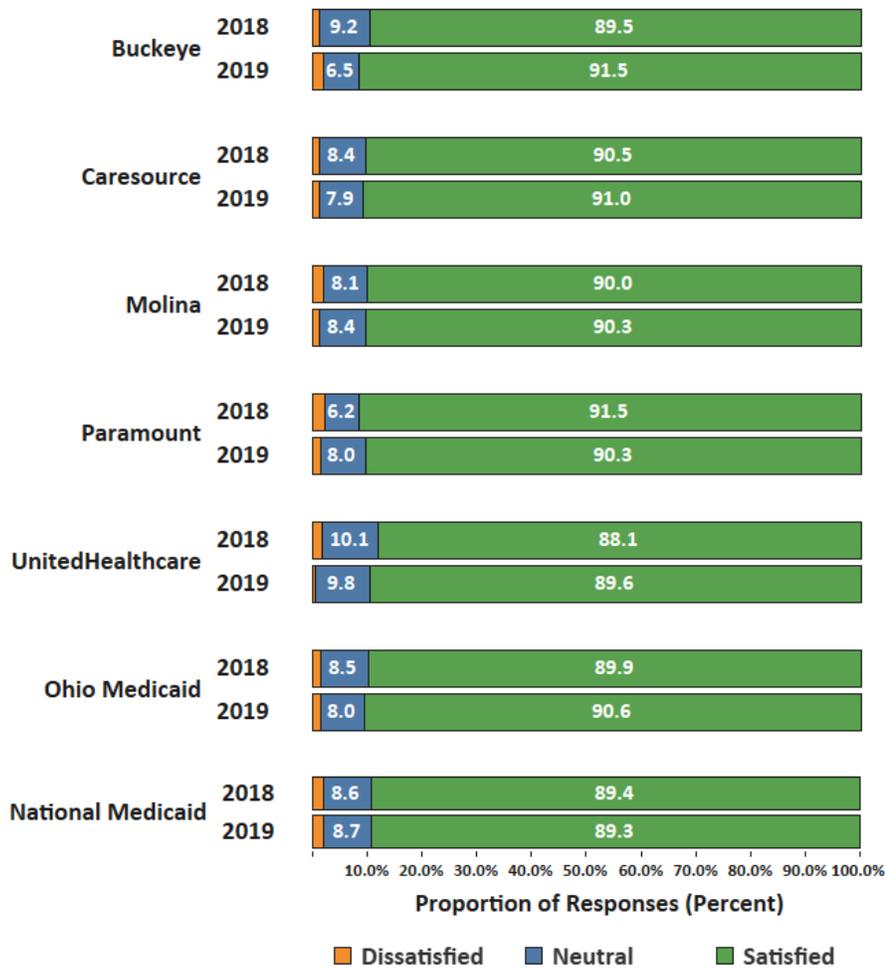
### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

Figure 4-6: Child Rating of Personal Doctor Response Category Percentages



Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

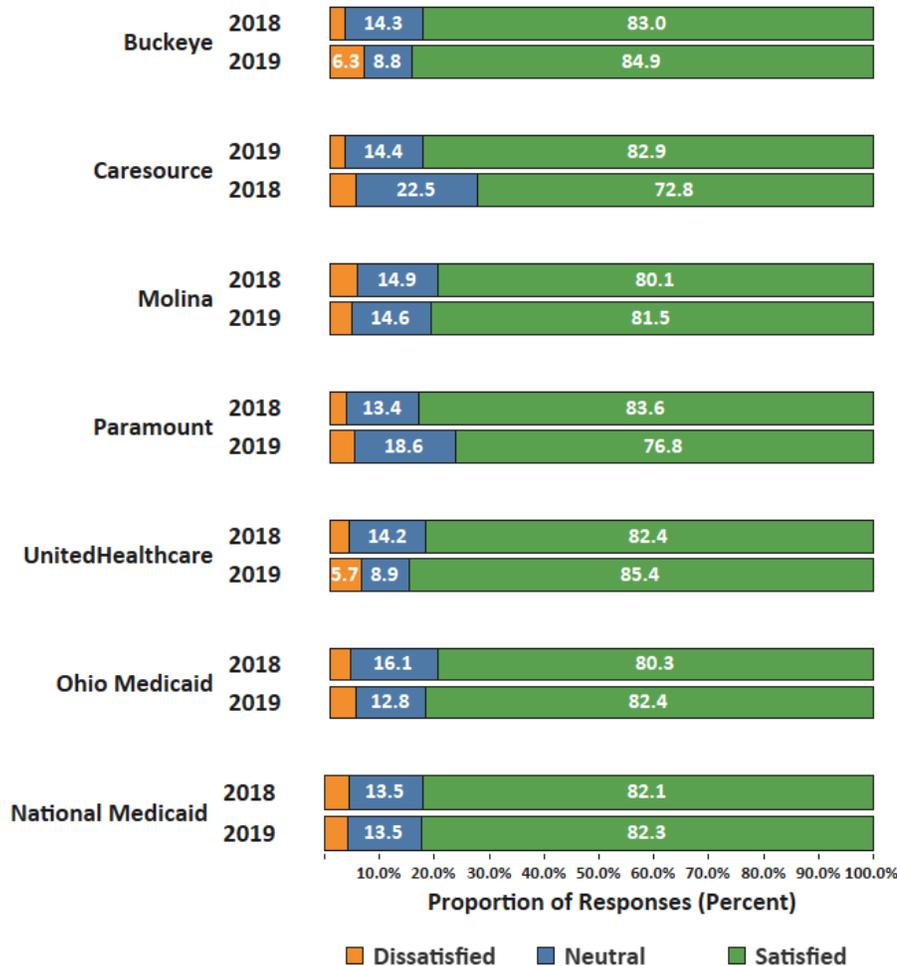
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Rating of Specialist Seen Most Often

Respondents were asked to rate the specialist they/their child saw most often on a scale of 0 to 10, with 0 being the “worst specialist possible” and 10 being the “best specialist possible.” For this question, responses were classified into three categories: Dissatisfied (0–4), Neutral (5–7), and Satisfied (8–10). Figure 4-7 and Figure 4-8 depict the percentage of respondents in each of the response categories for the adult population and child population, respectively.

Figure 4-7: Adult Rating of Specialist Seen Most Often Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of “Usually/Always” or “Yes” or “3 or more times”.

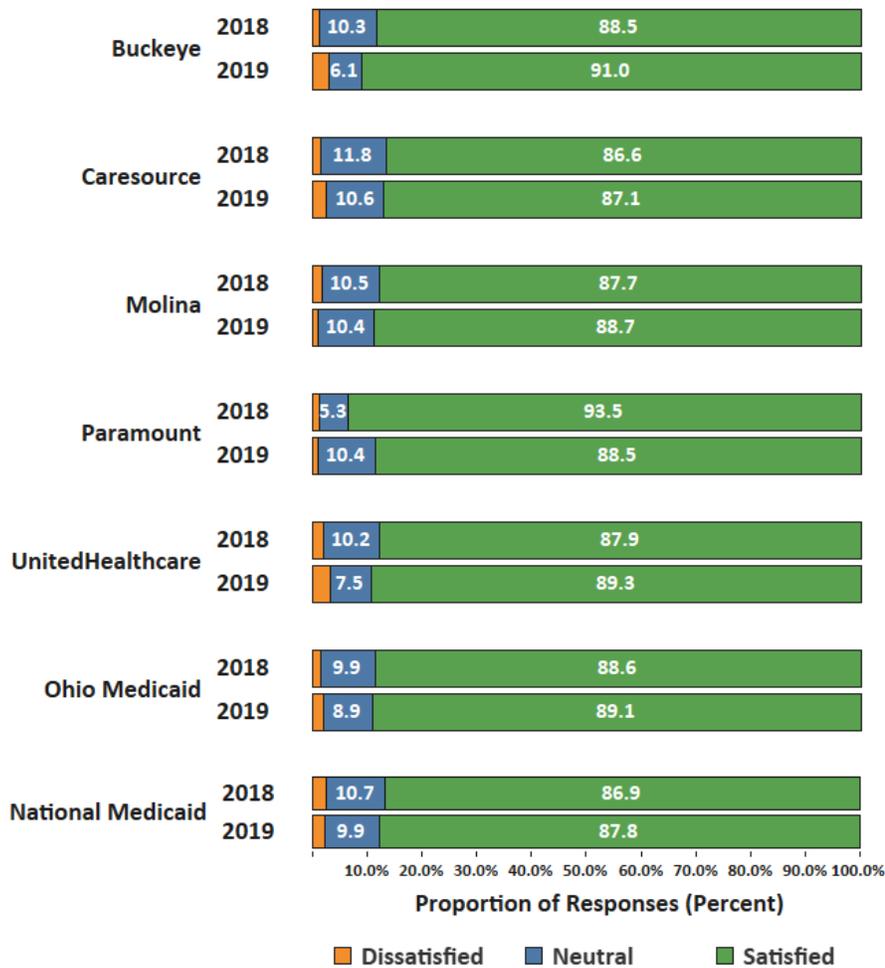
### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

Figure 4-8: Child Rating of Specialist Seen Most Often Response Category Percentages



Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

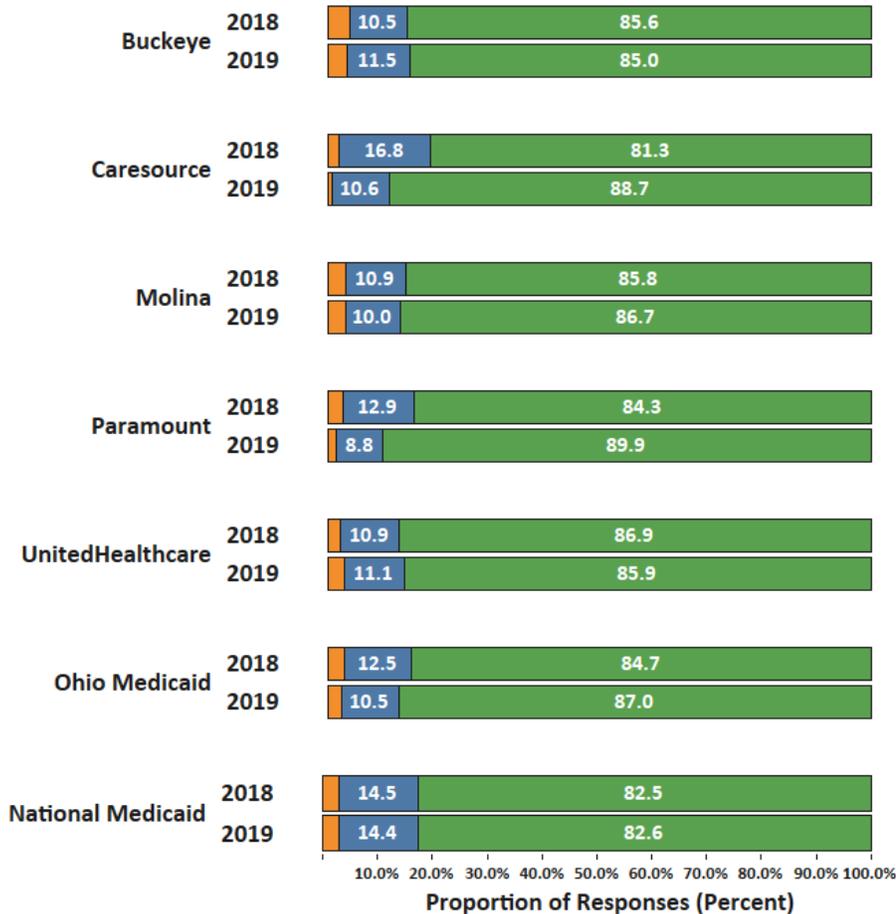
Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

## Composite Measures and Composite Items

### Adult Getting Needed Care

Two questions were asked to assess how often it was easy to get needed care. For each of these questions (questions 14 and 25 in the CAHPS Adult Medicaid Health Plan Survey), responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 4-9 depicts the percentage of respondents in each of the response categories for the adult population.

Figure 4-9: Adult Getting Needed Care Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

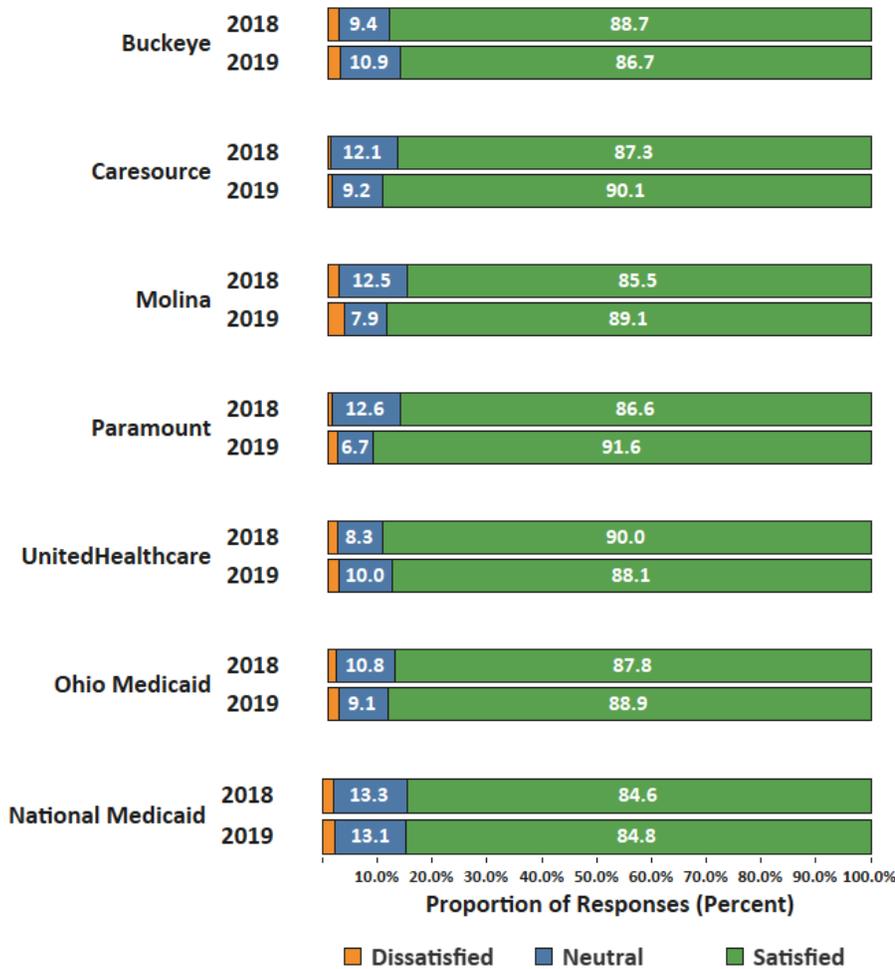
Overall, there was one statistically significant difference between scores in 2019 and scores in 2018 for this measure.

- CareSource's score was significantly higher in 2019 than in 2018.

### Adult Getting Needed Care: Got Care Believed Necessary

Question 14 in the CAHPS Adult Medicaid Health Plan Survey asked how often it was easy for members to get the care, tests, or treatment they thought they needed. Figure 4-10 depicts the percentage of respondents in each of the response categories for the adult population.

Figure 4-10: Adult Getting Needed Care: Got Care Believed Necessary Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

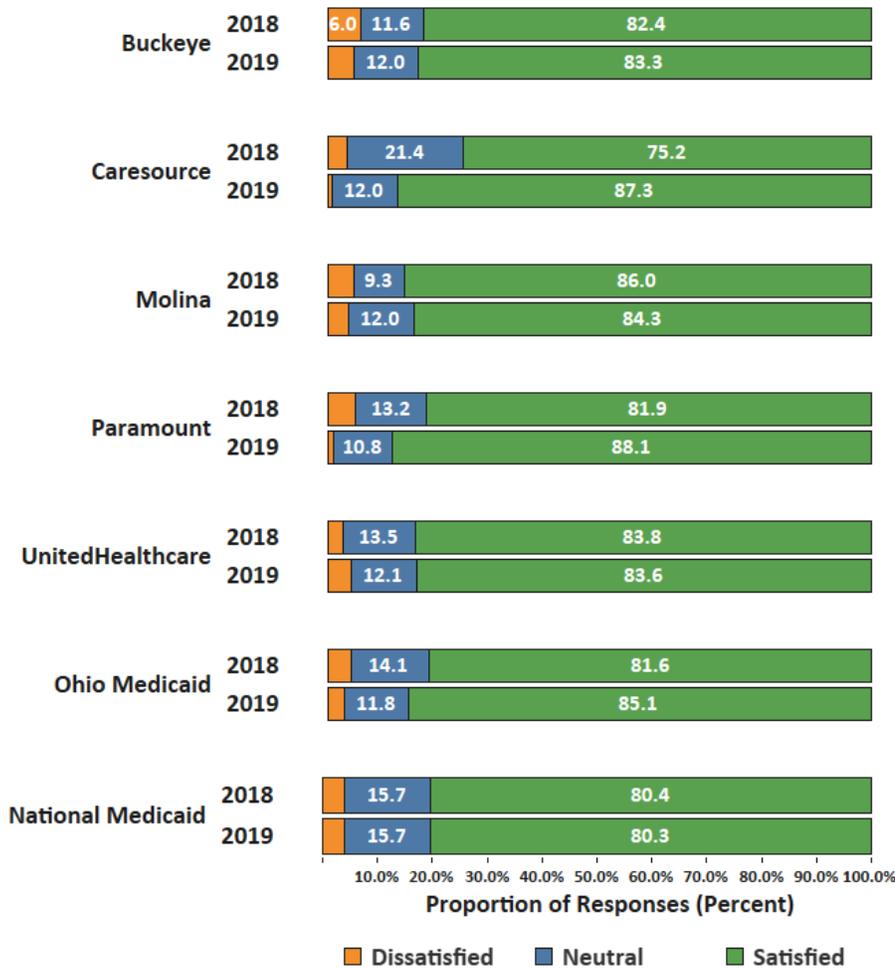
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Adult Getting Needed Care: Saw a Specialist

Question 25 in the CAHPS Adult Medicaid Health Plan Survey asked how often members got an appointment with a specialist as soon as they needed. Figure 4-11 depicts the percentage of respondents in each of the response categories for the adult population.

Figure 4-11: Adult Getting Needed Care: Saw a Specialist Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

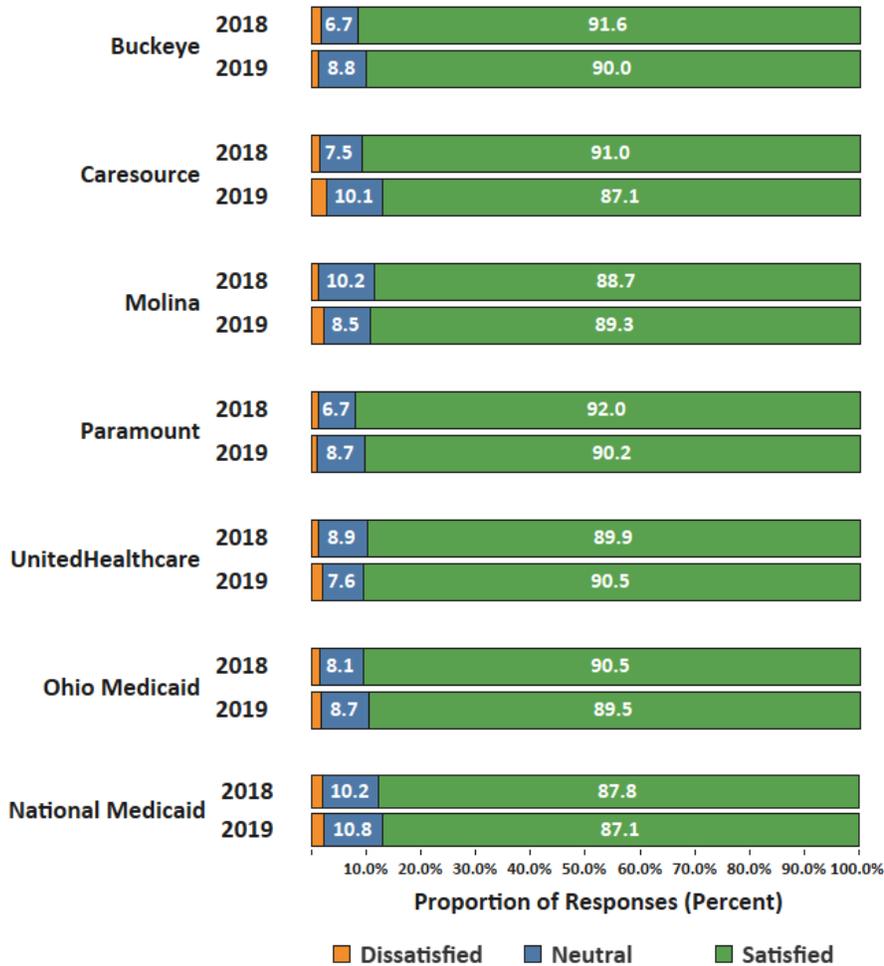
Overall, there was one statistically significant difference between scores in 2019 and scores in 2018 for this measure.

- CareSource's score was significantly higher in 2019 than in 2018.

### Child Getting Needed Care

Two questions were asked to parents or caretakers of child members to assess how often it was easy to get needed care for their child. For each of these questions (questions 15 and 46 in the CAHPS Child Medicaid Health Plan Survey), responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 4-12 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-12: Child Getting Needed Care Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
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- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

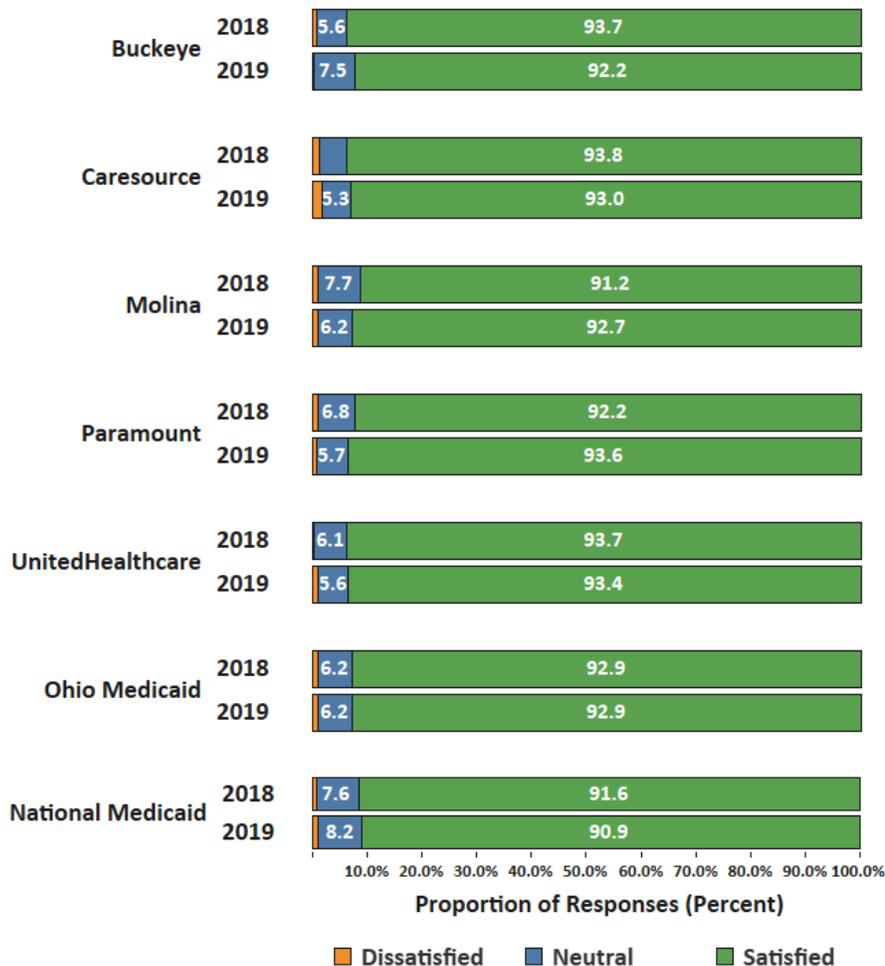
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Child Getting Needed Care: Got Care Believed Necessary

Question 15 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers how often it was easy to get the care, tests, or treatment their child needed. Figure 4-13 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-13: Child Getting Needed Care: Got Care Believed Necessary Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

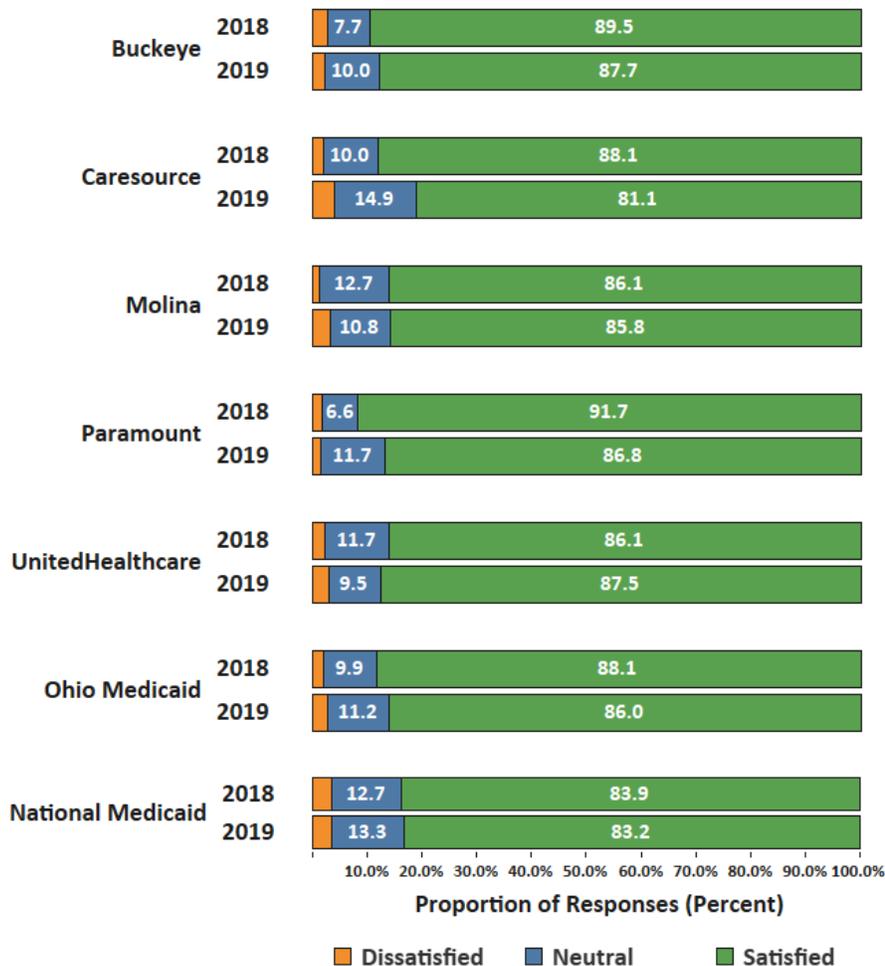
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Child Getting Needed Care: Saw a Specialist

Question 46 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers how often they got an appointment for their child to see a specialist as soon as they needed. Figure 4-14 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-14: Child Getting Needed Care: Saw a Specialist Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

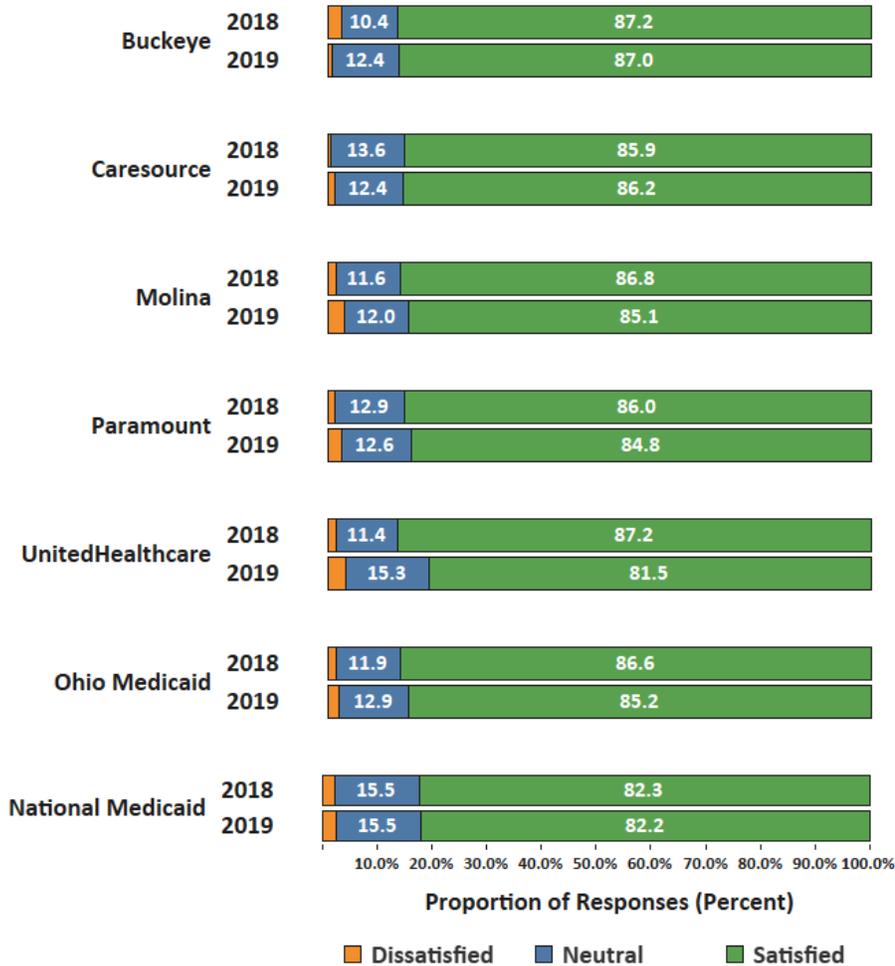
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Adult Getting Care Quickly

Two questions were asked to assess how often members received care quickly. For each of these questions (questions 4 and 6 in the CAHPS Adult Medicaid Health Plan Survey), responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 4-15 depicts the percentage of respondents in each of the response categories for the adult population.

Figure 4-15: Adult Getting Care Quickly Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

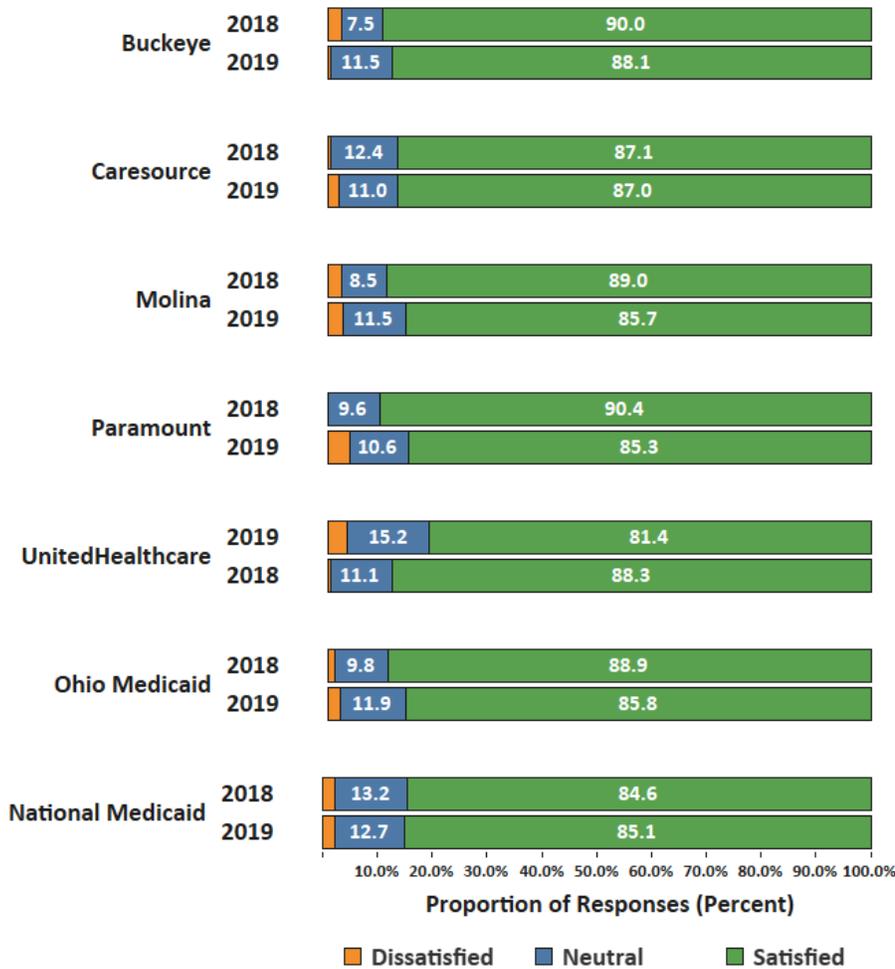
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Adult Getting Care Quickly: Received Care as Soon as Wanted

Question 4 in the CAHPS Adult Medicaid Health Plan Survey asked how often members received care as soon as they wanted when they needed care right away. Figure 4-16 depicts the percentage of respondents in each of the response categories for the adult population.

Figure 4-16: Adult Getting Care Quickly: Received Care as Soon as Wanted Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

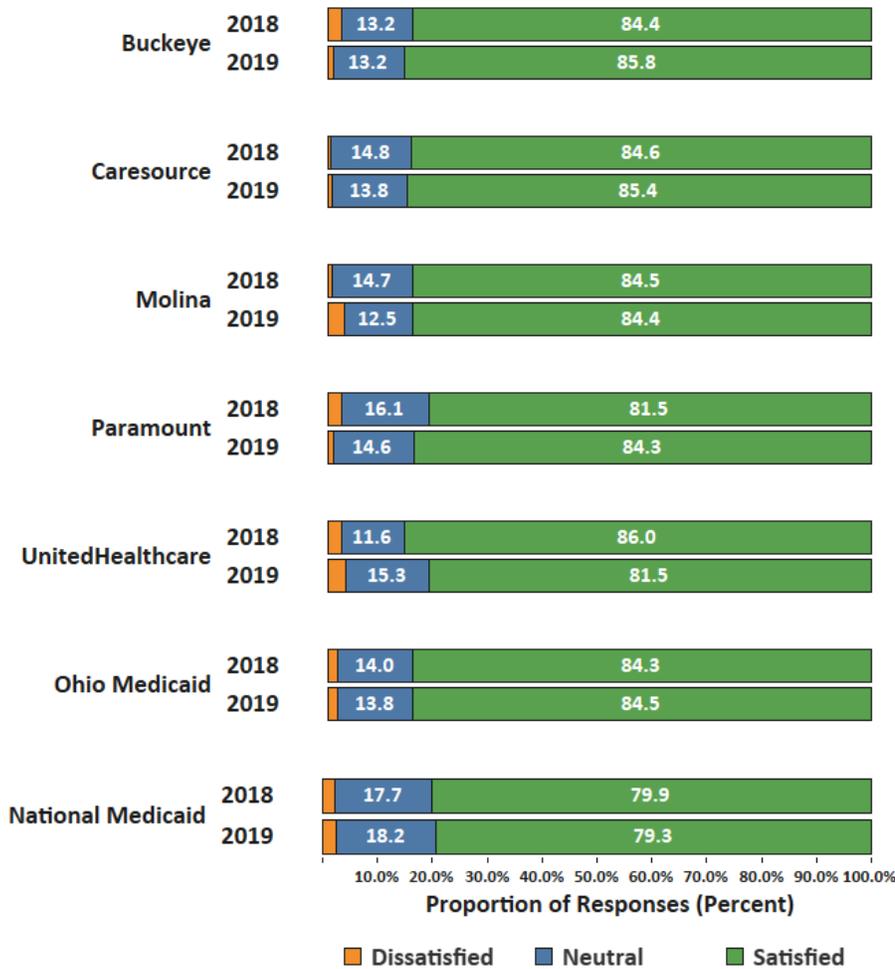
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Adult Getting Care Quickly: Received Appointment as Soon as Wanted

Question 6 in the CAHPS Adult Medicaid Health Plan Survey asked how often members received an appointment as soon as they wanted when they did not need care right away (i.e., a check-up or routine care). Figure 4-17 depicts the percentage of respondents in each of the response categories for the adult population.

Figure 4-17: Adult Getting Care Quickly: Received Appointment as Soon as Wanted Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

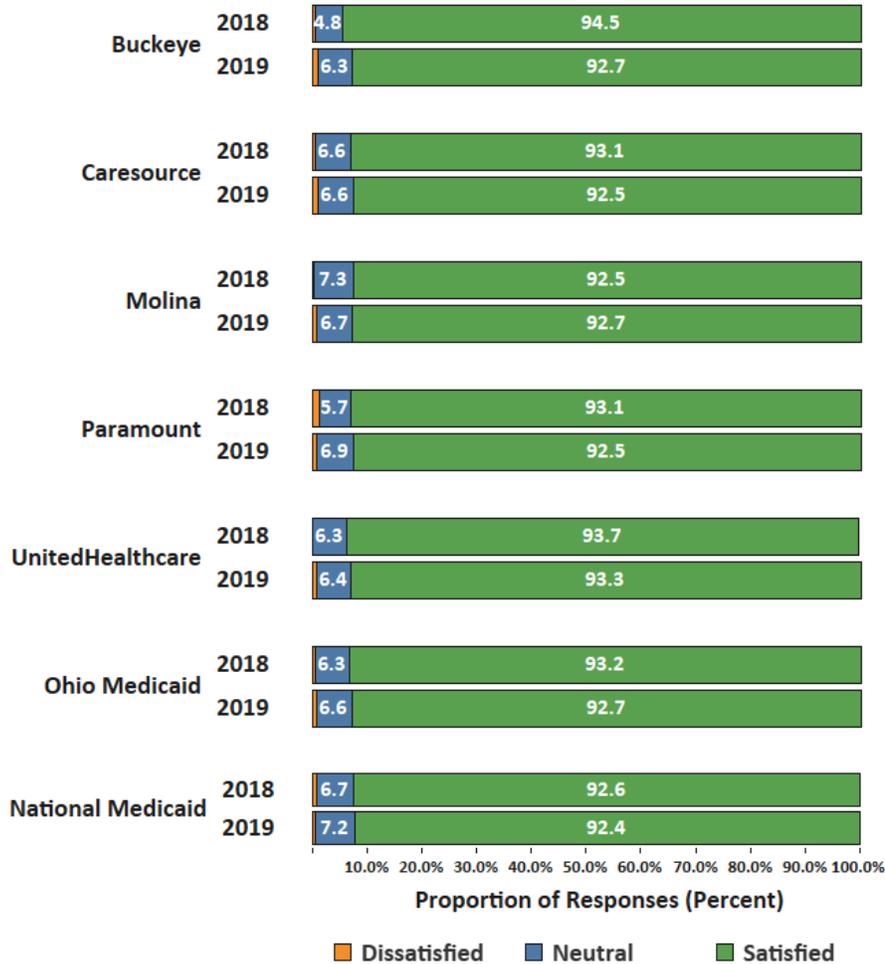
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Child Getting Care Quickly

Two questions were asked to parents or caretakers of child members to assess how often their child received care quickly. For each of these questions (questions 4 and 6 in the CAHPS Child Medicaid Health Plan Survey), responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 4-18 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-18: Child Getting Care Quickly Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

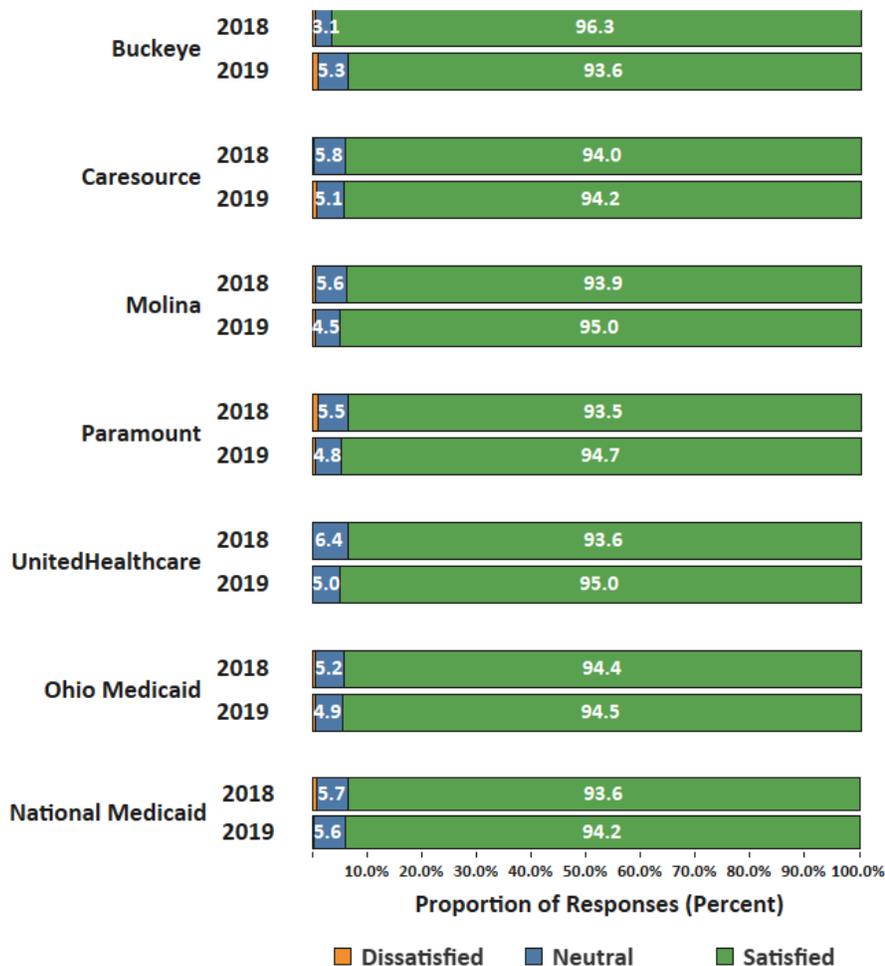
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Child Getting Care Quickly: Received Care as Soon as Wanted

Question 4 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers how often their child received care as soon as they wanted when their child needed care right away. Figure 4-19 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-19: Child Getting Care Quickly: Received Care as Soon as Wanted Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

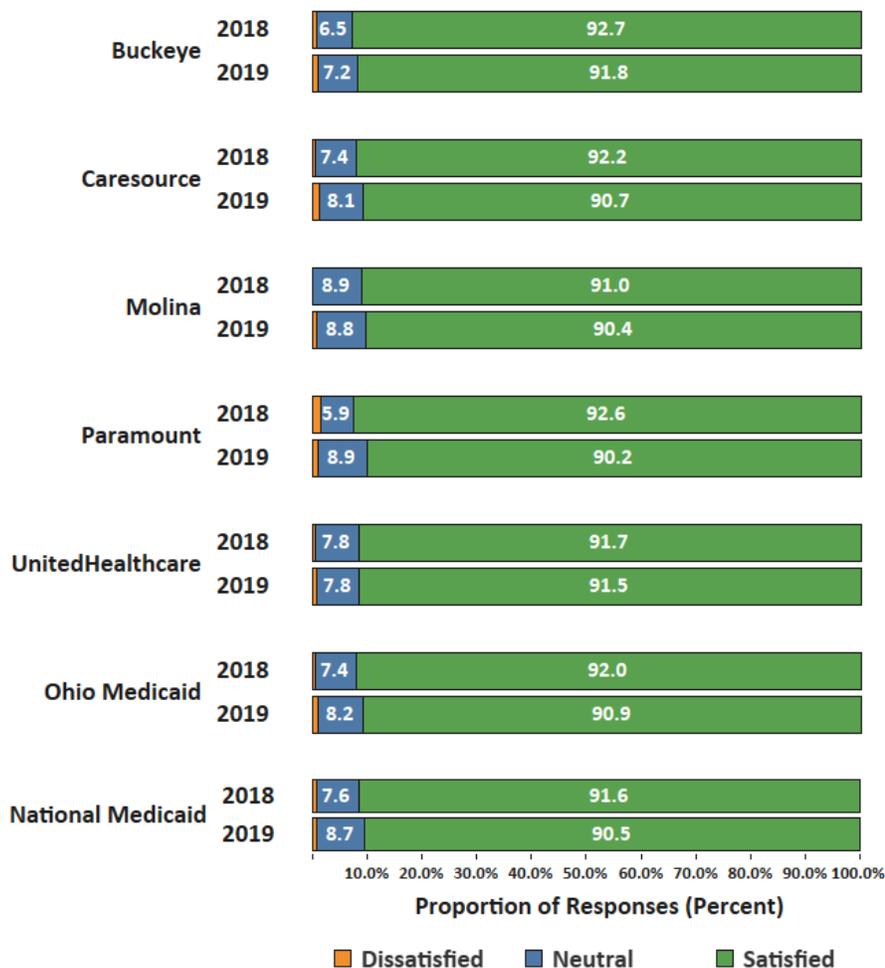
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Child Getting Care Quickly: Received Appointment as Soon as Wanted

Question 6 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers how often their child received an appointment as soon as they wanted when their child did not need care right away (i.e., a check-up or routine care). Figure 4-20 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-20: Child Getting Care Quickly: Received Appointment as Soon as Wanted Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

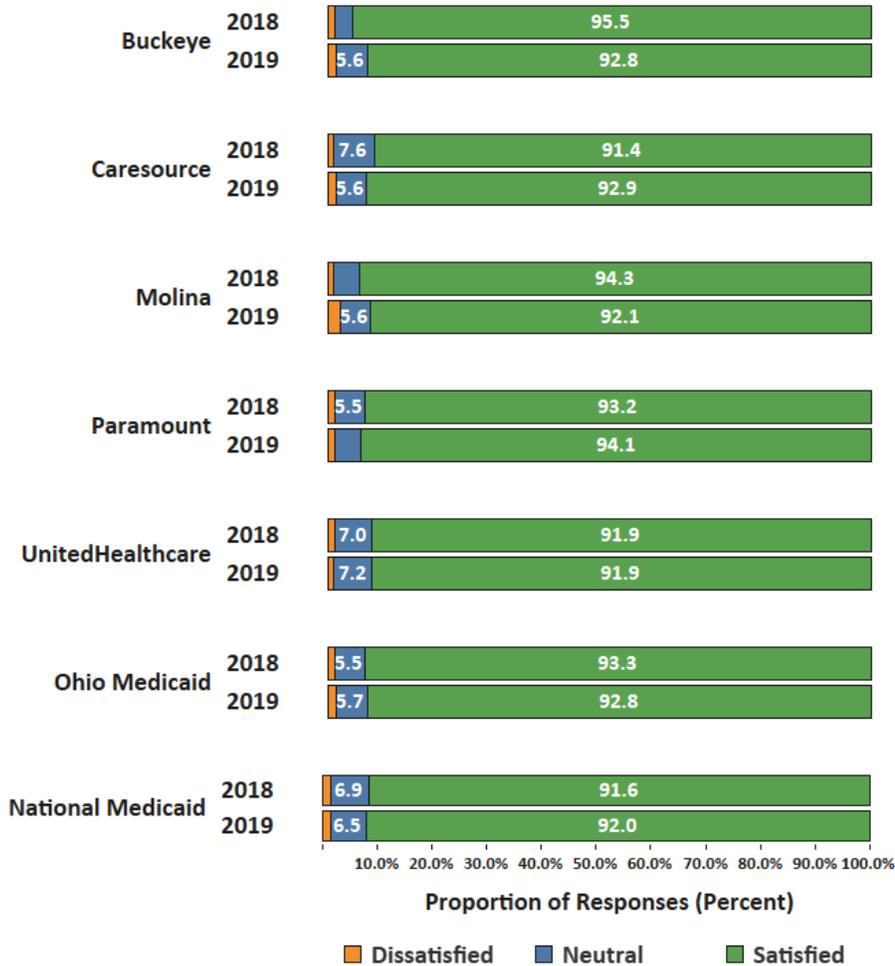
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Adult How Well Doctors Communicate

A series of four questions was asked to assess how often doctors communicated well. For each of these questions (questions 17, 18, 19, and 20 in the CAHPS Adult Medicaid Health Plan Survey), responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 4-21 depicts the percentage of respondents in each of the response categories for the adult population.

Figure 4-21: Adult How Well Doctors Communicate Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

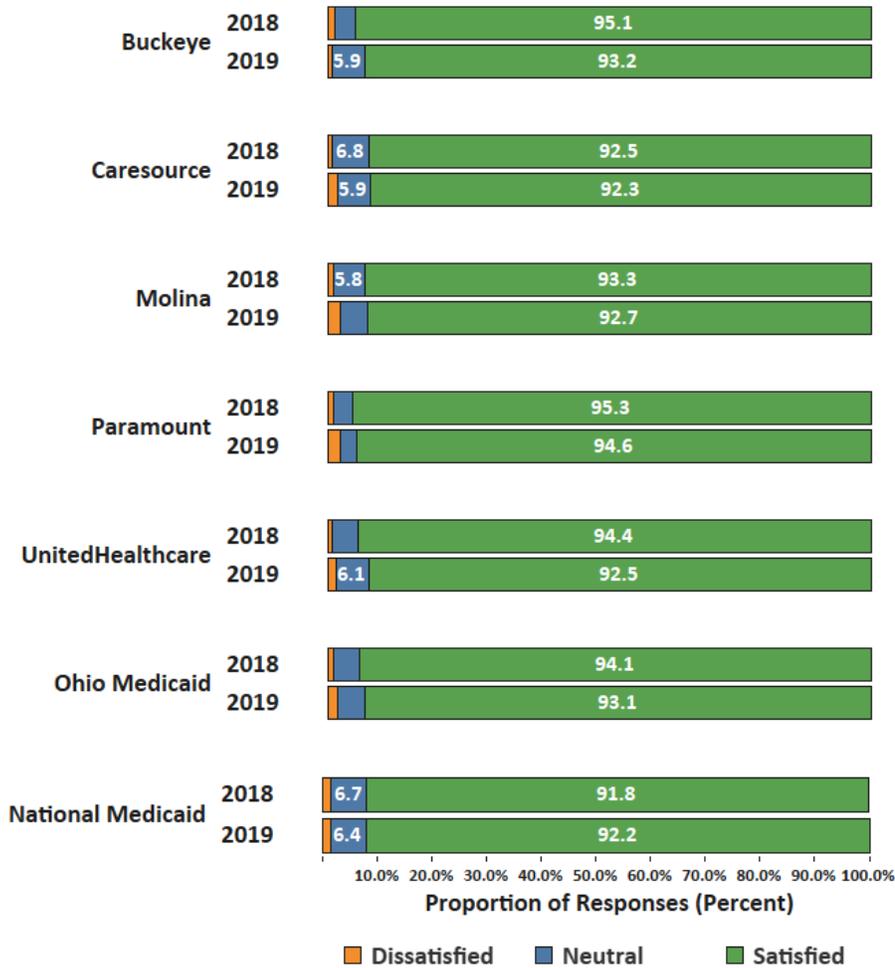
Overall, there was one statistically significant difference between scores in 2019 and scores in 2018 for this measure.

- Buckeye's score was significantly higher in 2019 than in 2018.

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

Question 17 in the CAHPS Adult Medicaid Health Plan Survey asked members how often doctors explained things in a way they could understand. Figure 4-22 depicts the percentage of respondents in each of the response categories for the adult population.

Figure 4-22: Adult How Well Doctors Communicate: Doctors Explained Things in Way They Could Understand Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

**Comparative Analysis**

Overall, there were no statistically significant differences observed for this measure.

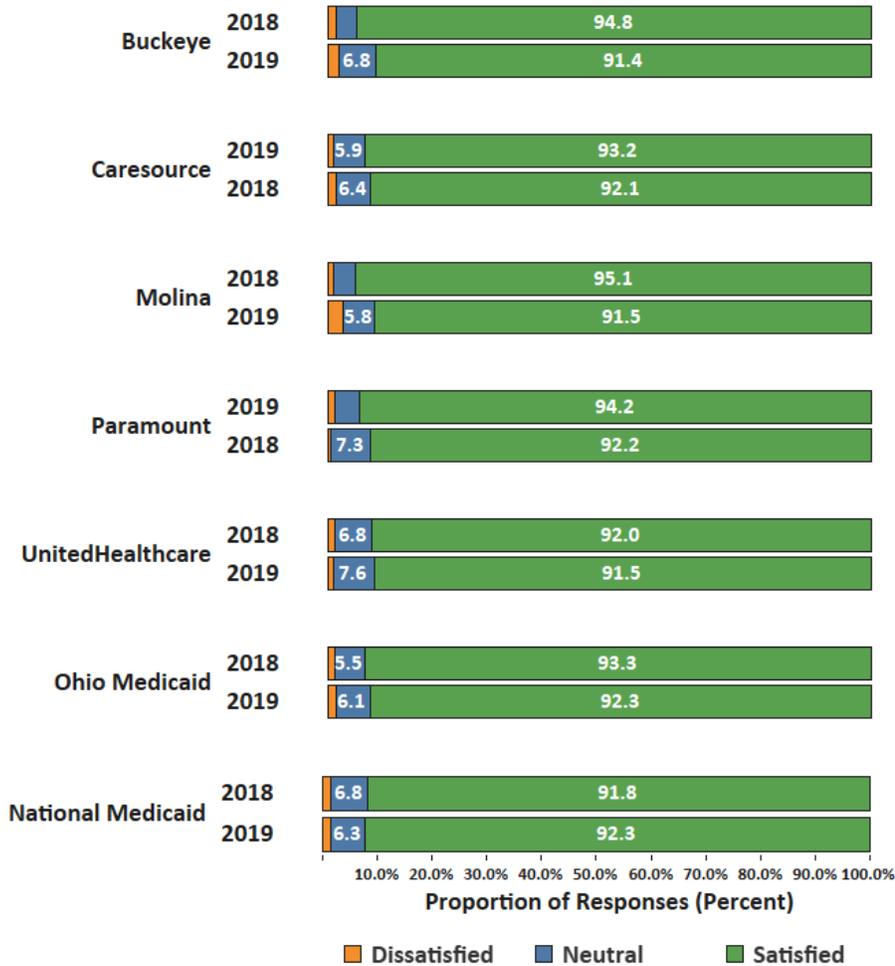
**Trending Analysis**

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Adult How Well Doctors Communicate: Doctors Listened Carefully

Question 18 in the CAHPS Adult Medicaid Health Plan Survey asked members how often doctors listened carefully to them. Figure 4-23 depicts the percentage of respondents in each of the response categories for the adult population.

Figure 4-23: Adult How Well Doctors Communicate: Doctors Listened Carefully Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

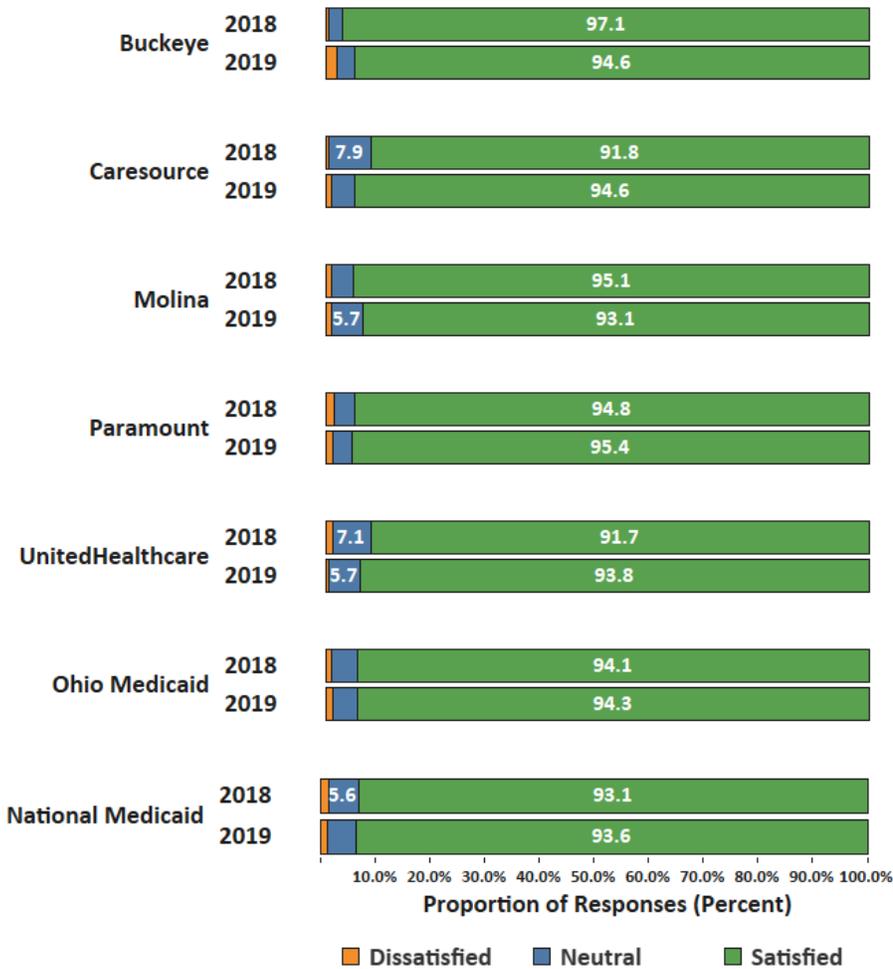
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Adult How Well Doctors Communicate: Doctors Showed Respect

Question 19 in the CAHPS Adult Medicaid Health Plan Survey asked members how often doctors showed respect for what they had to say. Figure 4-24 depicts the percentage of respondents in each of the response categories for the adult population.

Figure 4-24: Adult How Well Doctors Communicate: Doctors Showed Respect Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

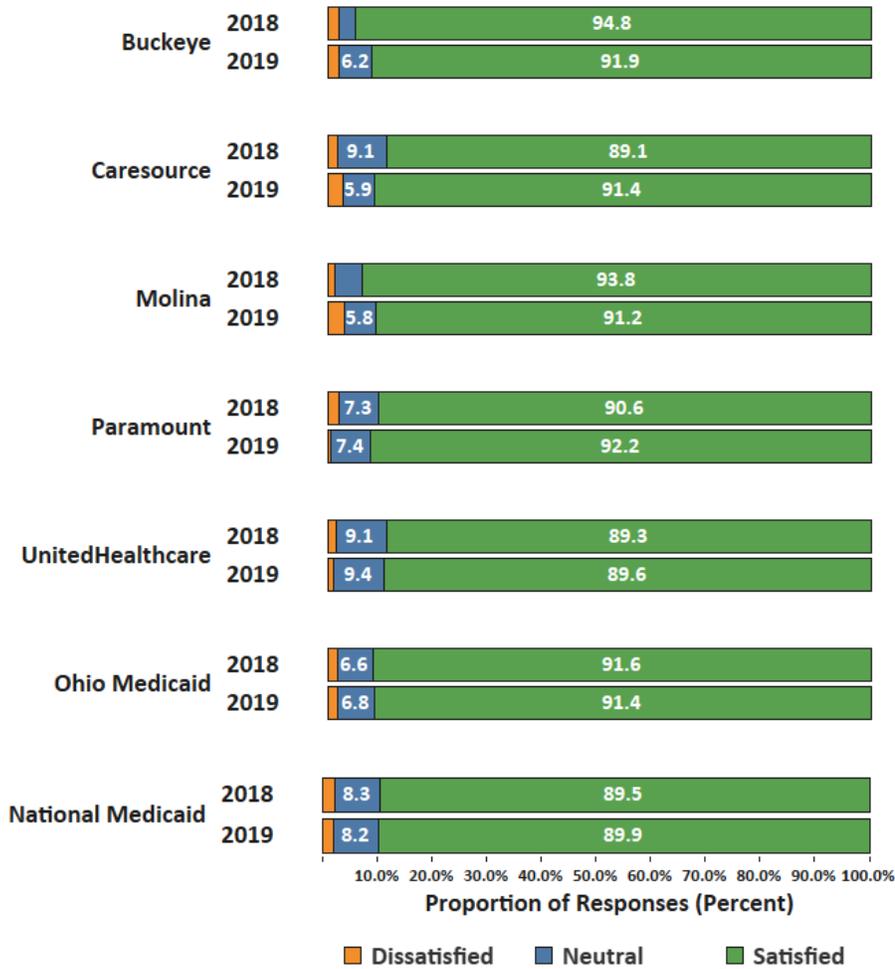
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Adult How Well Doctors Communicate: Doctors Spent Enough Time with Patient

Question 20 in the CAHPS Adult Medicaid Health Plan Survey asked members how often doctors spent enough time with them. Figure 4-25 depicts the percentage of respondents in each of the response categories for the adult population.

Figure 4-25: Adult How Well Doctors Communicate: Doctors Spent Enough Time with Patient Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

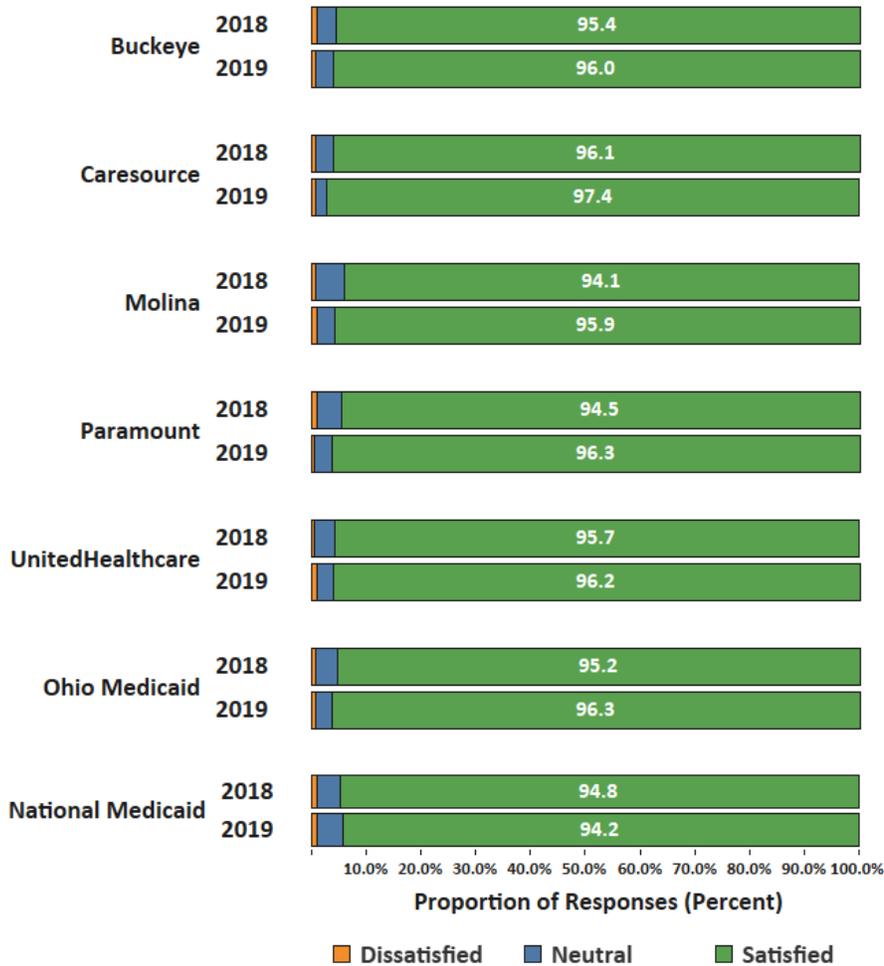
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Child How Well Doctors Communicate

A series of four questions was asked to parents or caretakers of child members to assess how often their child’s doctors communicated well. For each of these questions (questions 32, 33, 34, and 37 in the CAHPS Child Medicaid Health Plan Survey), responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 4-26 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-26: Child How Well Doctors Communicate Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population’s score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population’s score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of “Usually/Always” or “Yes” or “3 or more times”.

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years’ visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

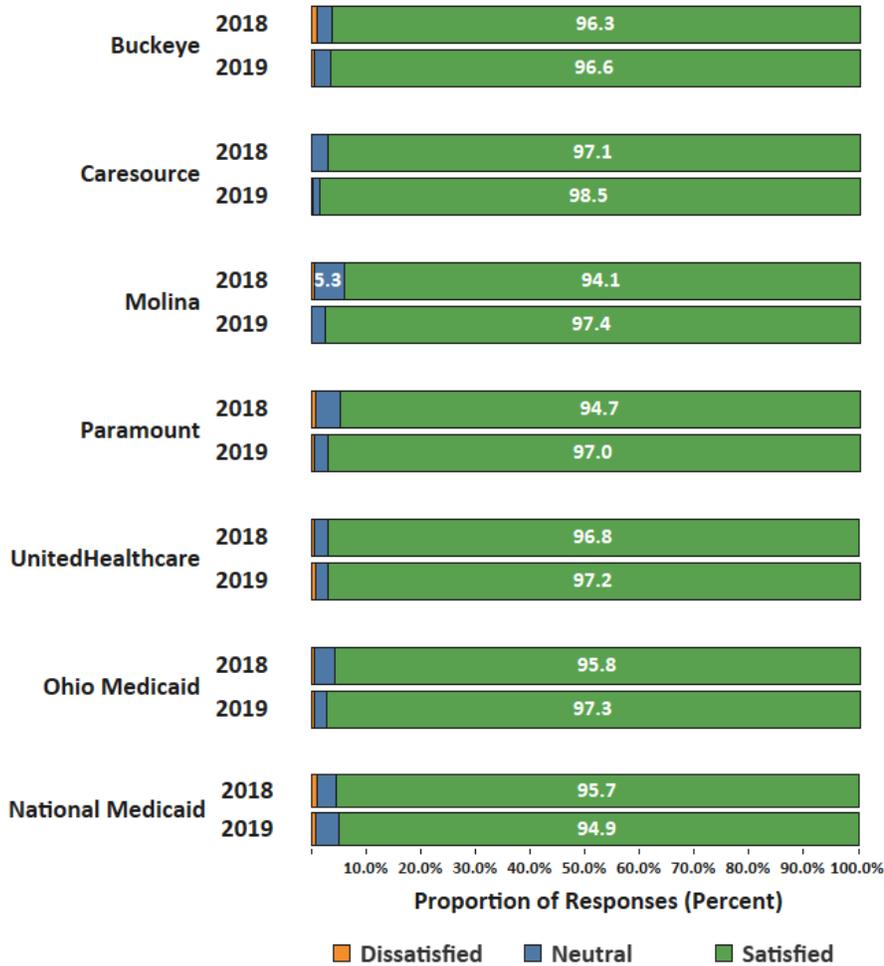
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

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

Question 32 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often doctors explained things about their child’s health in a way they could understand. Figure 4-27 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-27: Child How Well Doctors Communicate: Doctors Explained Things in Way They Could Understand Response Category Percentages



Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population’s score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population’s score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

**Comparative Analysis**

Overall, there were no statistically significant differences observed for this measure.

**Trending Analysis**

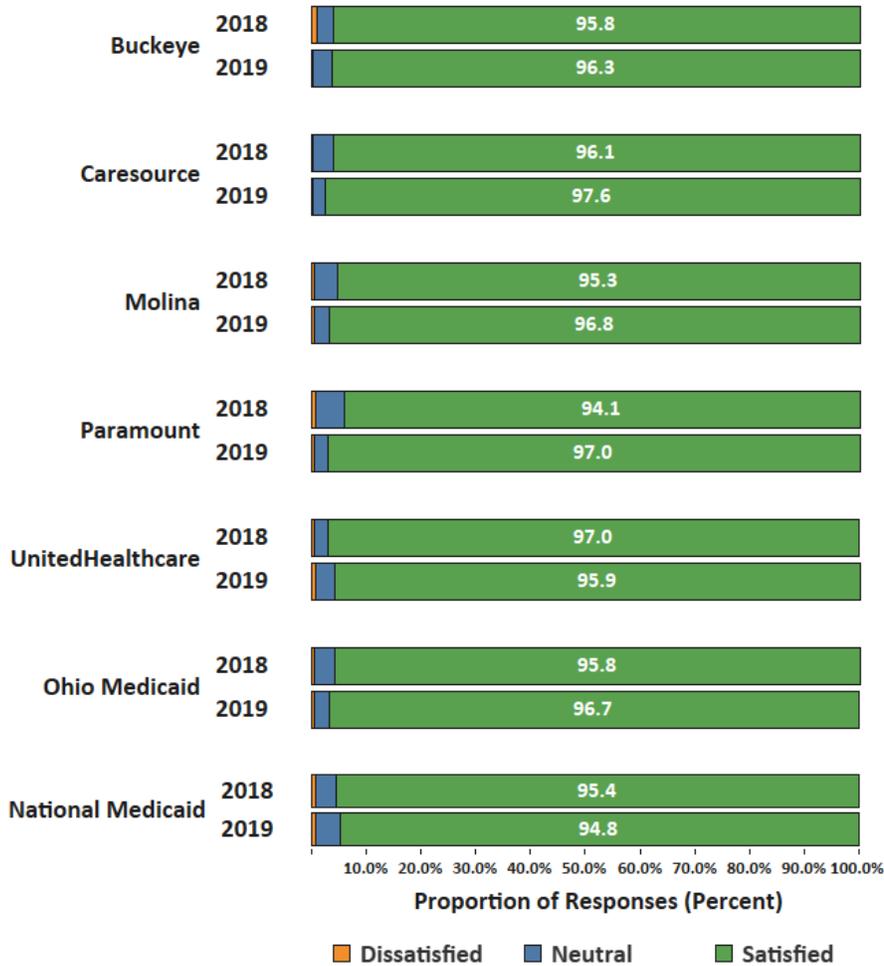
Overall, there was one statistically significant difference between scores in 2019 and scores in 2018 for this measure.

- Molina’s score was significantly higher in 2019 than in 2018.

### Child How Well Doctors Communicate: Doctors Listened Carefully

Question 33 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often their child’s doctors listened carefully to them. Figure 4-28 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-28: Child How Well Doctors Communicate: Doctors Listened Carefully Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population’s score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population’s score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of “Usually/Always” or “Yes” or “3 or more times”.

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years’ visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

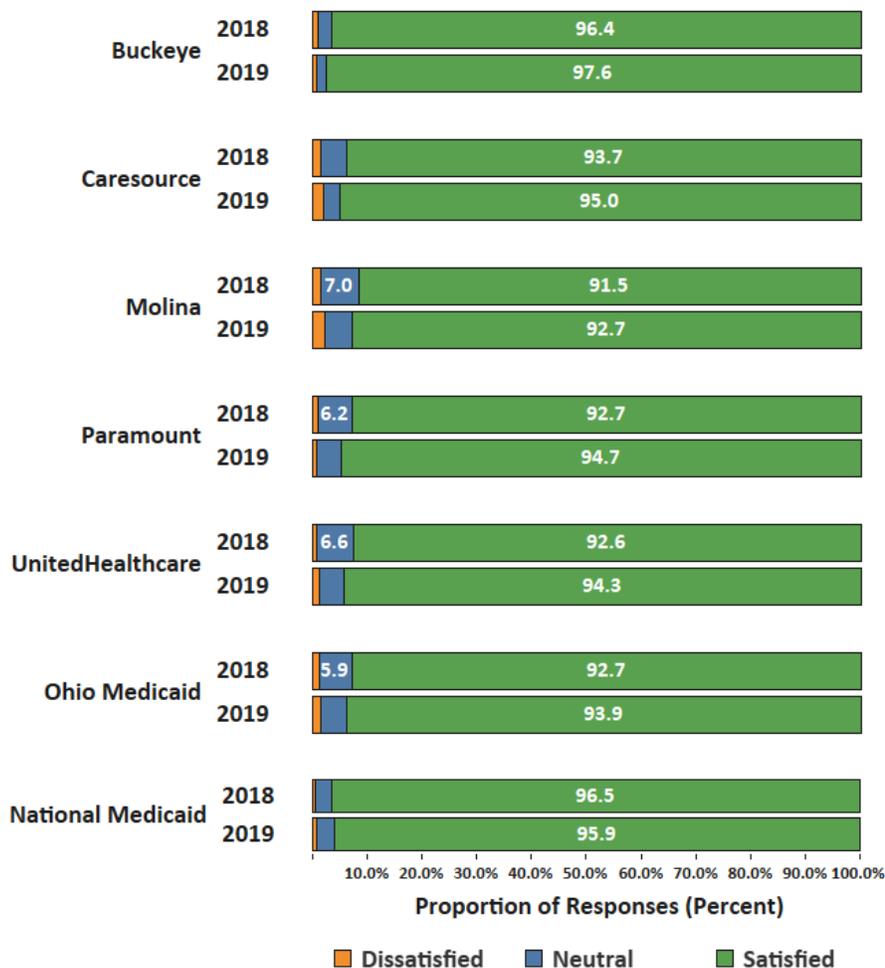
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Child How Well Doctors Communicate: Doctors Showed Respect

Question 34 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often their child’s doctors showed respect for what they had to say. Figure 4-29 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-29: Child How Well Doctors Communicate: Doctors Showed Respect Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population’s score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population’s score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of “Usually/Always” or “Yes” or “3 or more times”.

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years’ visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

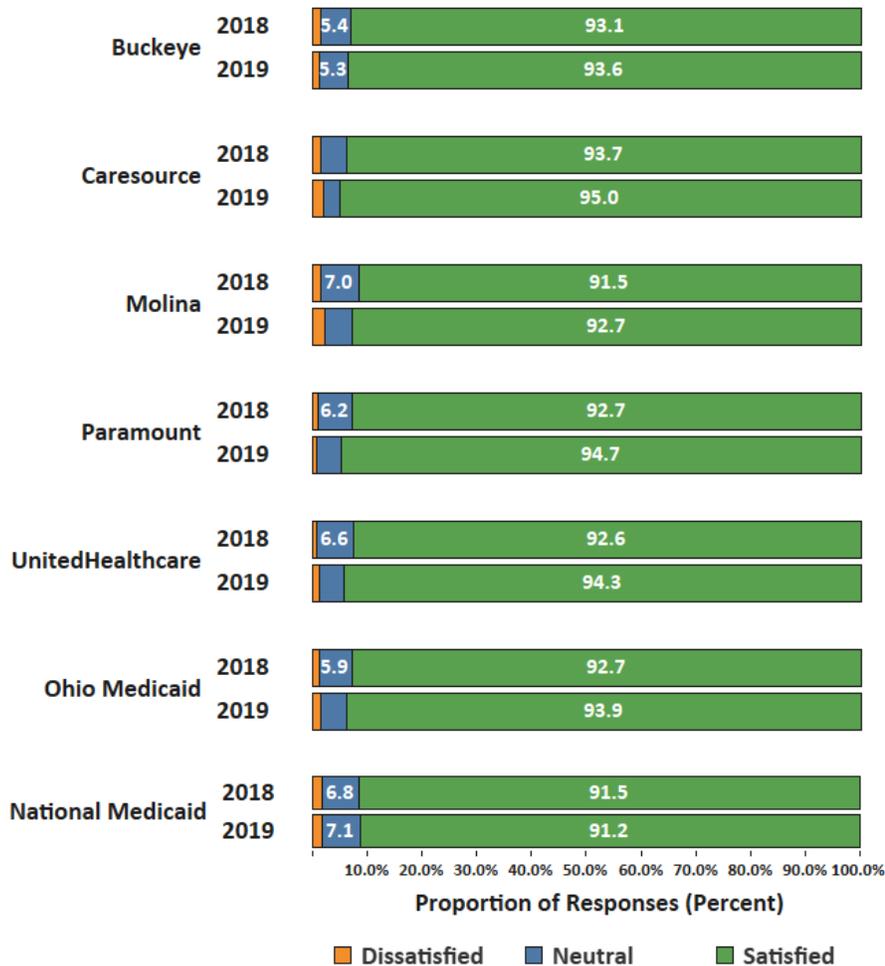
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Child How Well Doctors Communicate: Doctors Spent Enough Time with Patient

Question 37 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often their child’s doctors spent enough time with their child. Figure 4-30 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-30: Child How Well Doctors Communicate: Doctors Spent Enough Time with Patient Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

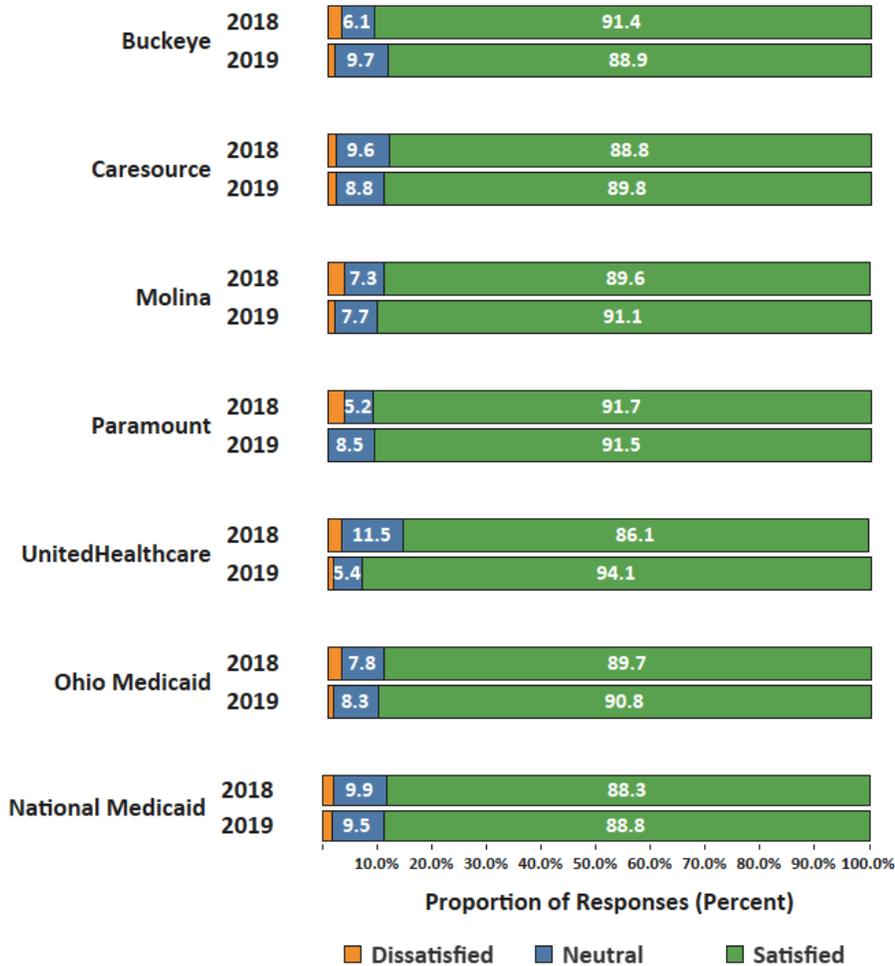
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

## Adult Customer Service

Two questions were asked to assess how often members were satisfied with customer service. For each of these questions (questions 31 and 32 in the CAHPS Adult Medicaid Health Plan Survey), responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 4-31 depicts the percentage of respondents in each of the response categories for the adult population.

Figure 4-31: Adult Customer Service Response Category Percentages



### Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

## Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

## Trending Analysis

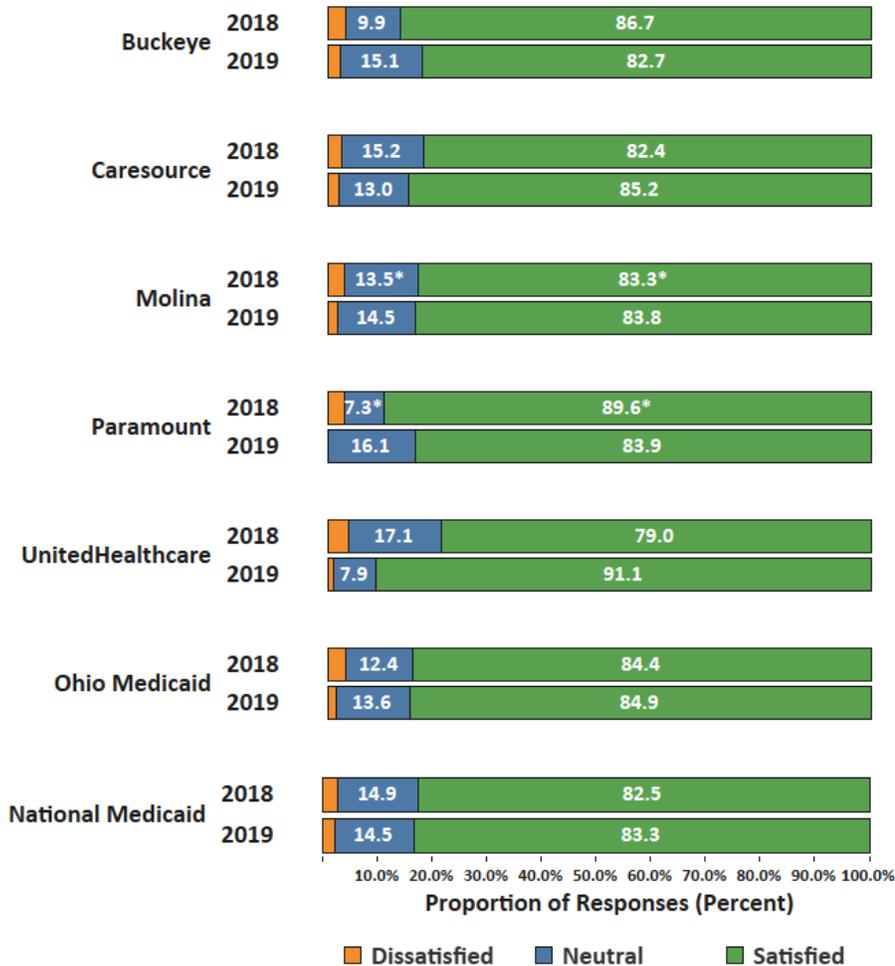
Overall, there was one statistically significant difference between scores in 2019 and scores in 2018 for this measure.

- UnitedHealthcare's score was significantly higher in 2019 than in 2018.

### Adult Customer Service: Obtained Help Needed from Customer Service

Question 31 in the CAHPS Adult Medicaid Health Plan Survey asked how often the health plan’s customer service gave members the information or help they needed. Figure 4-32 depicts the percentage of respondents in each of the response categories for the adult population.

Figure 4-32: Adult Customer Service: Obtained Help Needed from Customer Service Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population’s score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population’s score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

\* Caution should be taken when interpreting these results as responses were below 100.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

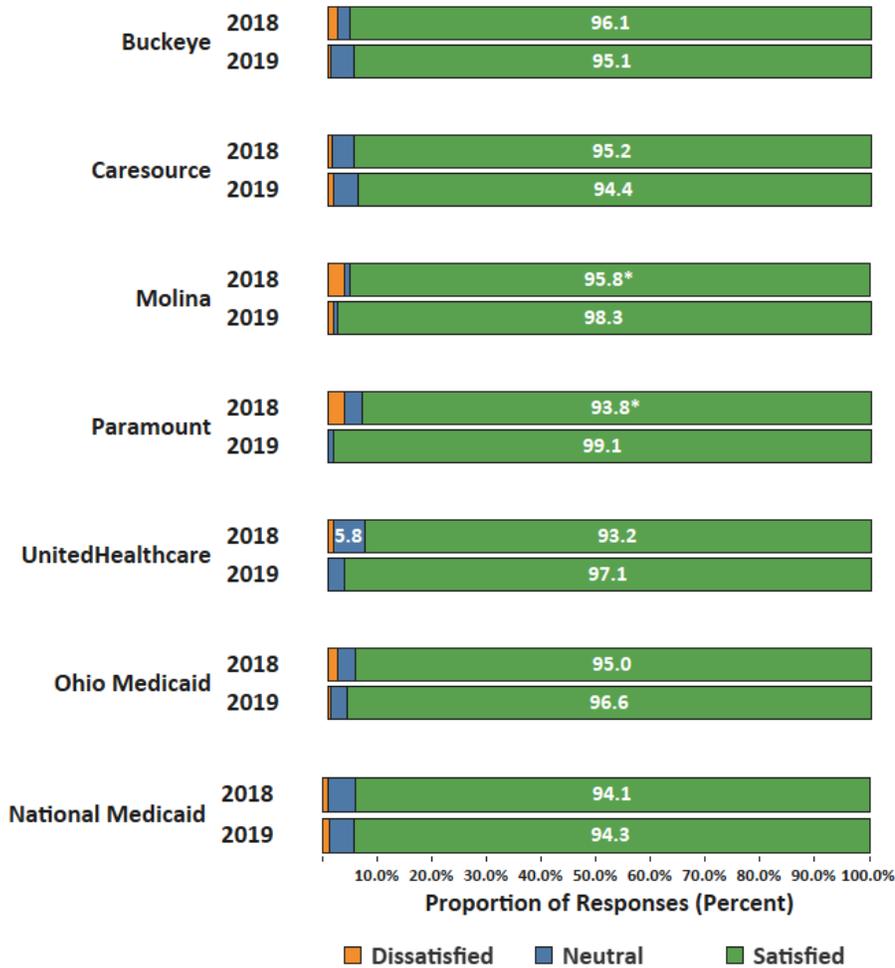
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Adult Customer Service: Health Plan Customer Service Treated with Courtesy and Respect

Question 32 in the CAHPS Adult Medicaid Health Plan Survey asked how often the health plan’s customer service staff treated members with courtesy and respect. Figure 4-33 depicts the percentage of respondents in each of the response categories for the adult population.

Figure 4-33: Adult Customer Service: Health Plan Customer Service Treated with Courtesy and Respect Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population’s score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population’s score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

\* Caution should be taken when interpreting these results as responses were below 100.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

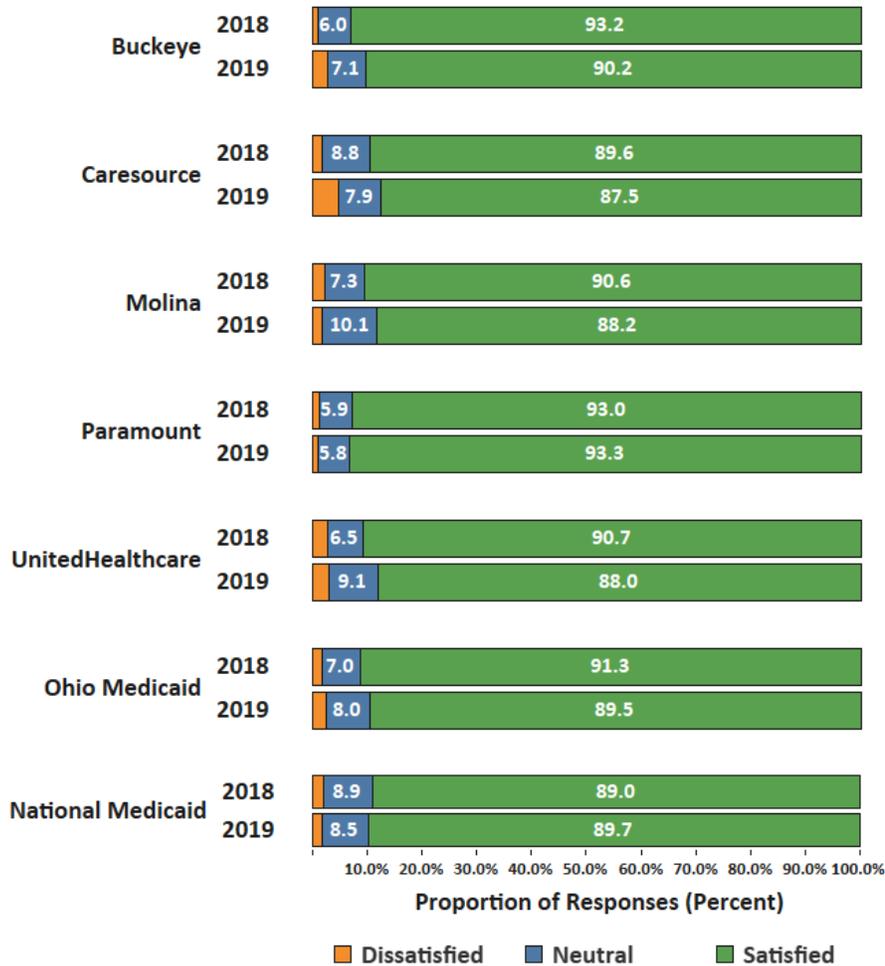
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Child Customer Service

Two questions were asked to assess how often 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), responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 4-34 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-34: Child Customer Service Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

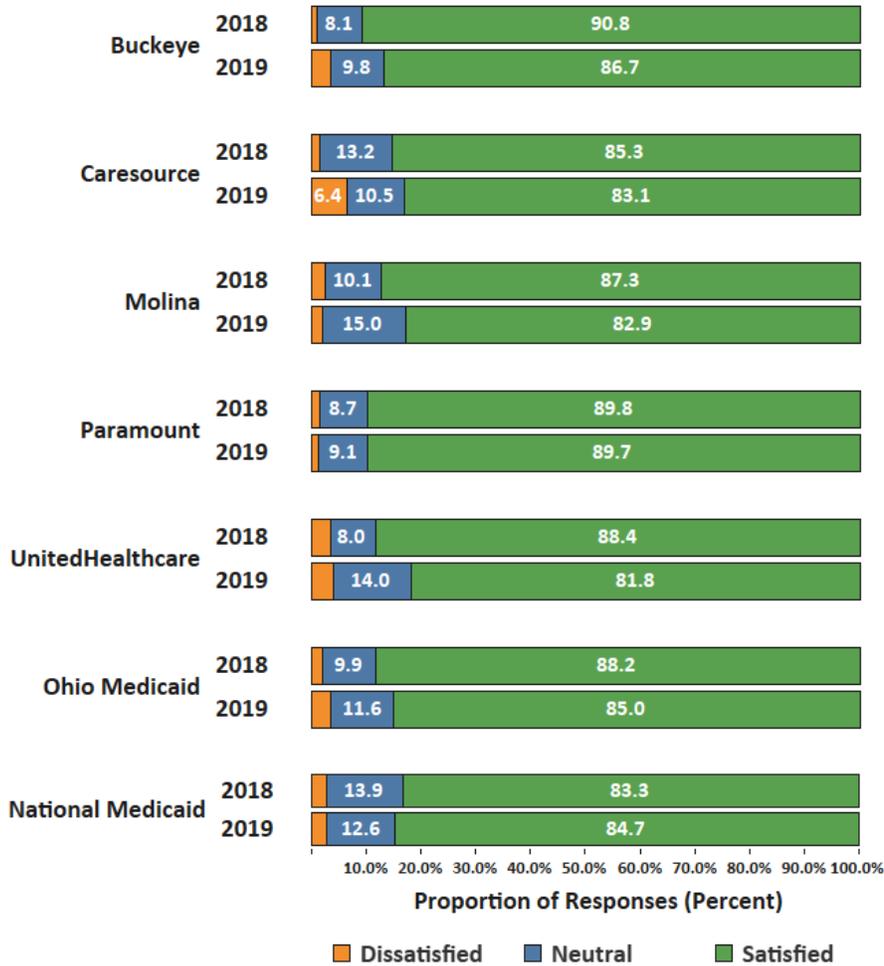
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Child Customer Service: Obtained Help Needed from Customer Service

Question 50 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often their child’s health plan customer service gave them the information or help they needed. Figure 4-35 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-35: Child Customer Service: Obtained Help Needed from Customer Service Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

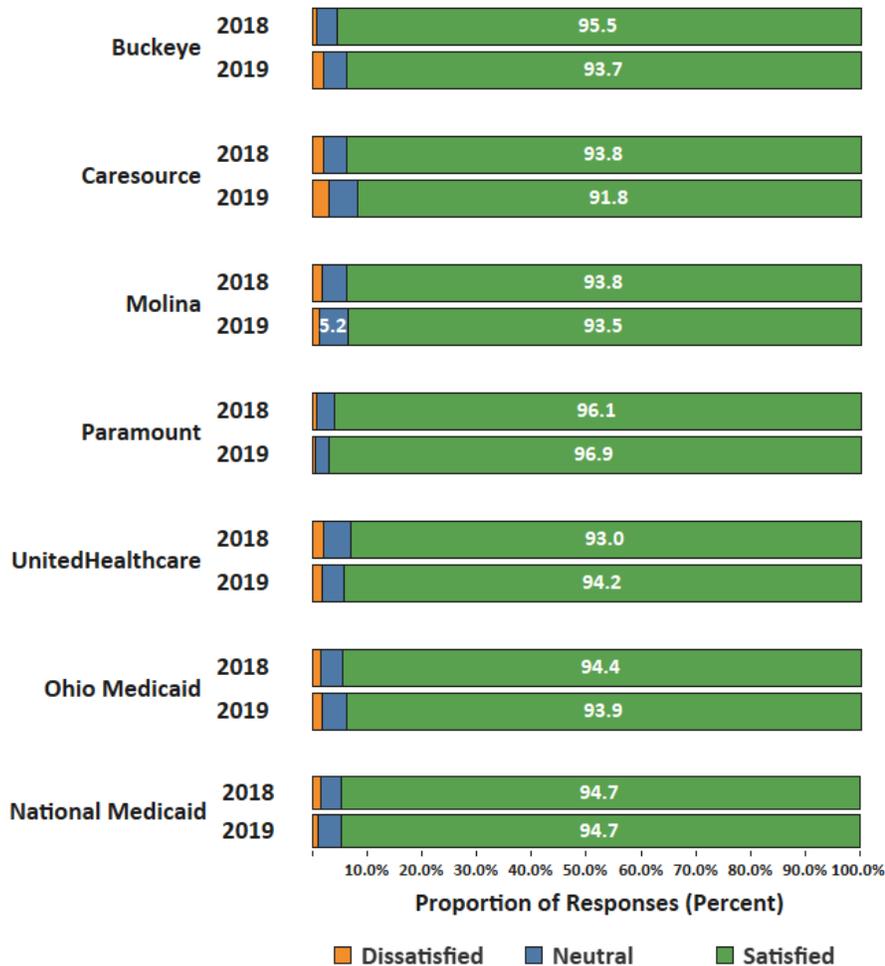
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Child 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 their child’s health plan customer service staff treated them with courtesy and respect. Figure 4-36 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-36: Child Customer Service: Health Plan Customer Service Treated with Courtesy and Respect Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

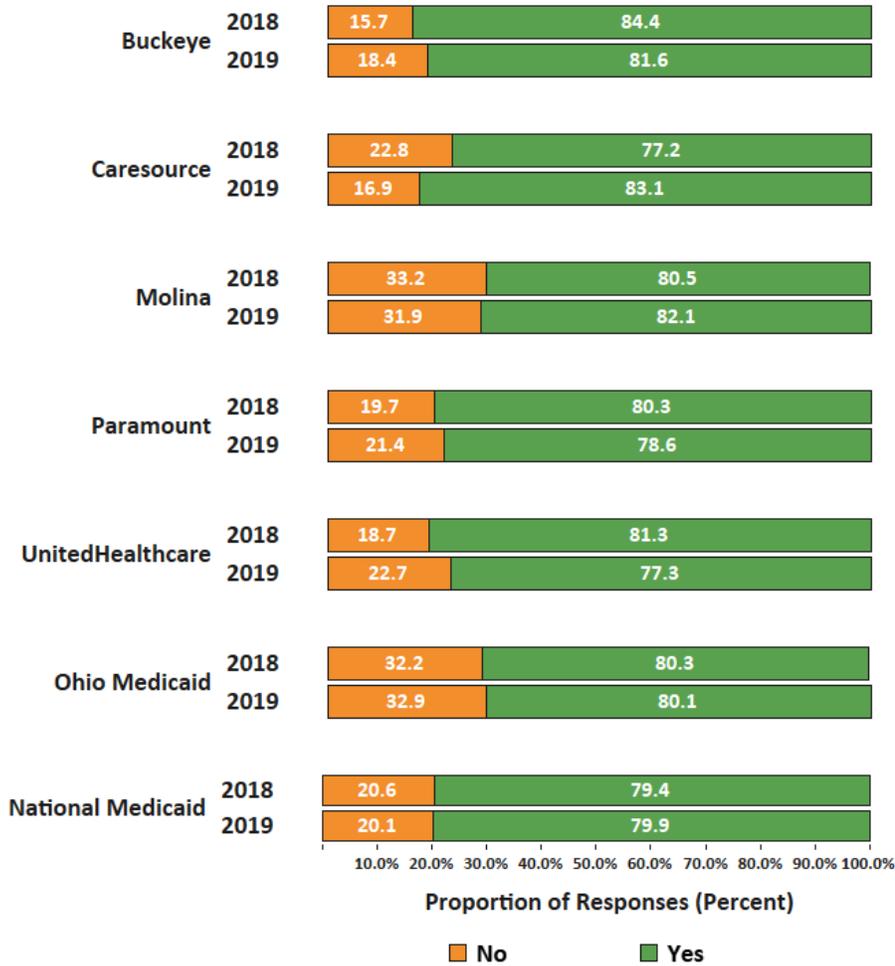
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Adult Shared Decision Making

Three questions were asked to assess the extent to which members’ doctors or other health providers discussed starting or stopping a medication with them. For each of these questions (questions 10, 11, and 12 in the CAHPS Adult Medicaid Health Plan Survey), responses were classified into two categories: No and Yes. Figure 4-37 depicts the percentage of respondents in each of the response categories for the adult population.

Figure 4-37: Adult Shared Decision Making Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population’s score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population’s score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

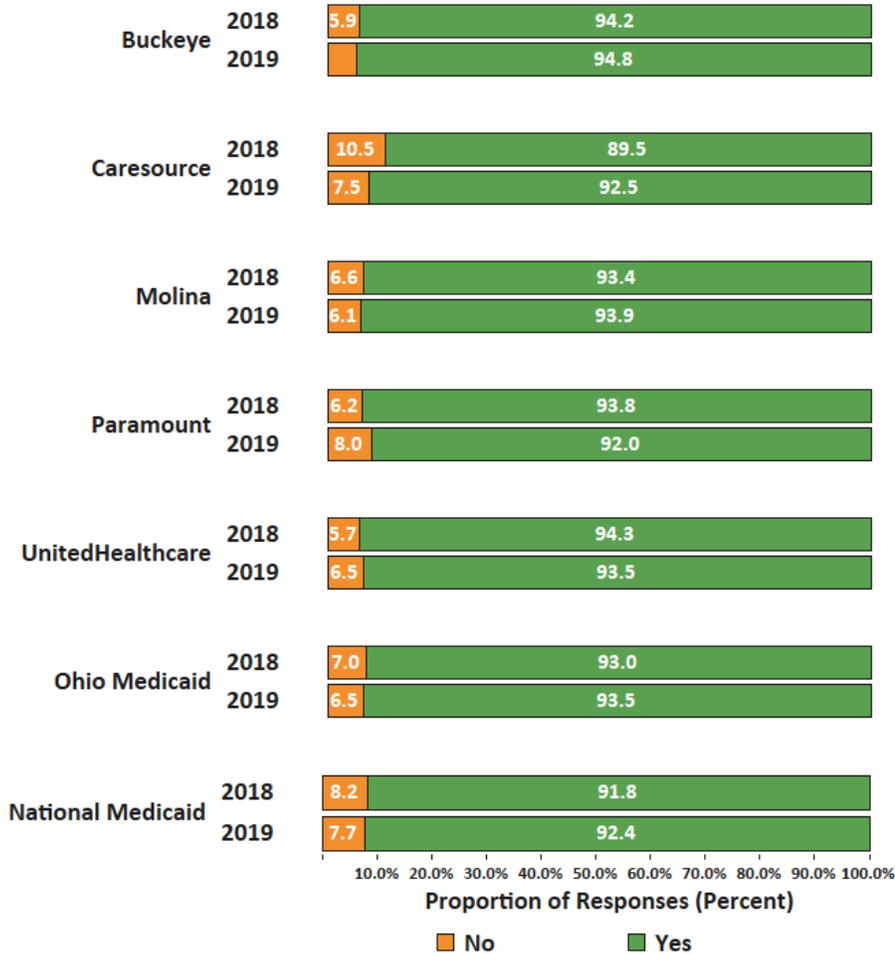
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Adult Shared Decision Making: Doctor Talked About Reasons to Take a Medicine

Question 10 in the CAHPS Adult Medicaid Health Plan Survey asked members if a doctor or other health provider talked about the reasons they might want to take a medicine. Figure 4-38 depicts the percentage of respondents in each of the response categories for the adult population.

Figure 4-38: Adult Shared Decision Making: Doctor Talked About Reasons to Take a Medicine Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

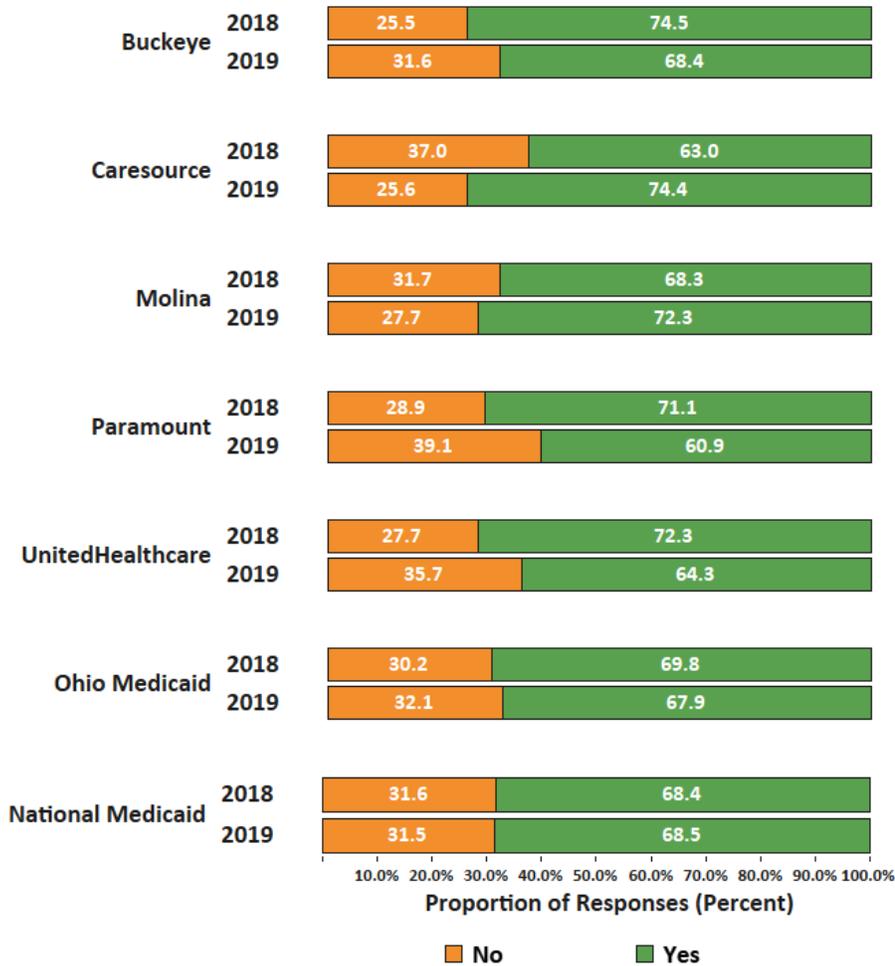
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Adult Shared Decision Making: Doctor Talked About Reasons Not to Take a Medicine

Question 11 in the CAHPS Adult Medicaid Health Plan Survey asked members if a doctor or other health provider talked about the reasons they might not want to take a medicine. Figure 4-39 depicts the percentage of respondents in each of the response categories for the adult population.

Figure 4-39: Adult Shared Decision Making: Doctor Talked About Reasons Not to Take a Medicine Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

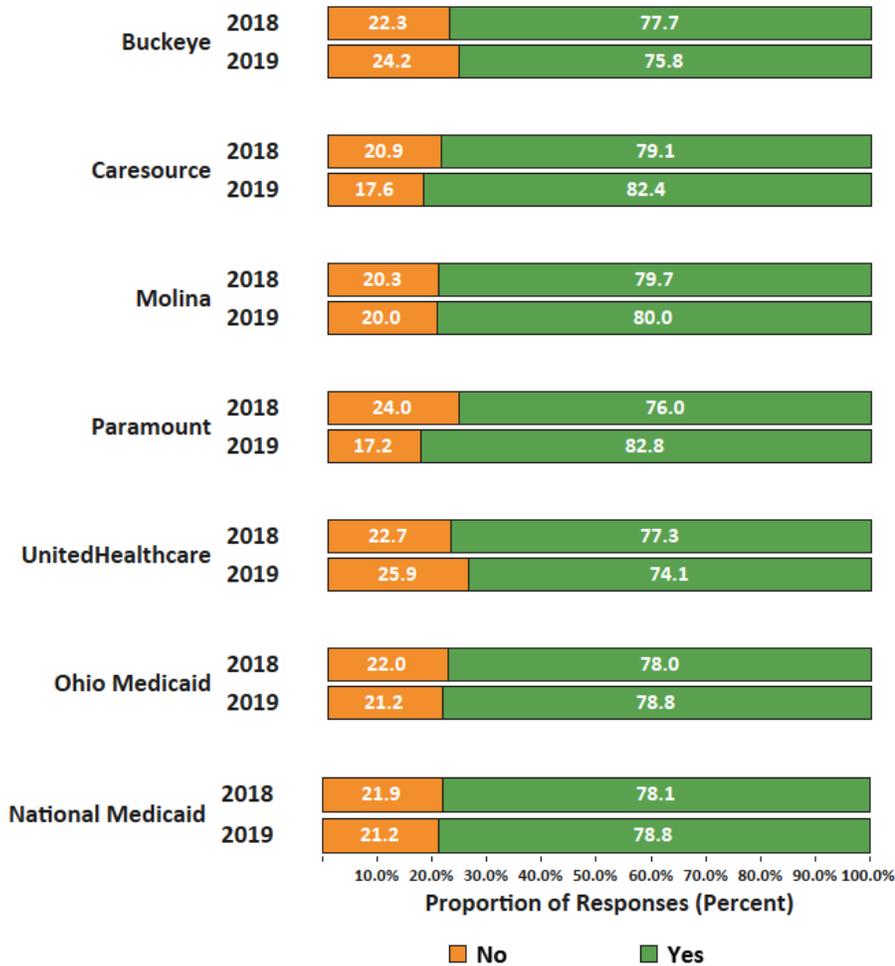
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Adult Shared Decision Making: Doctor Asked About Best Medicine Choice for You

Question 12 in the CAHPS Adult Medicaid Health Plan Survey asked members if a doctor or other health provider asked which medicine choice they thought was best for them. Figure 4-40 depicts the percentage of respondents in each of the response categories for the adult population.

Figure 4-40: Adult Shared Decision Making: Doctor Asked About Best Medicine Choice for You Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

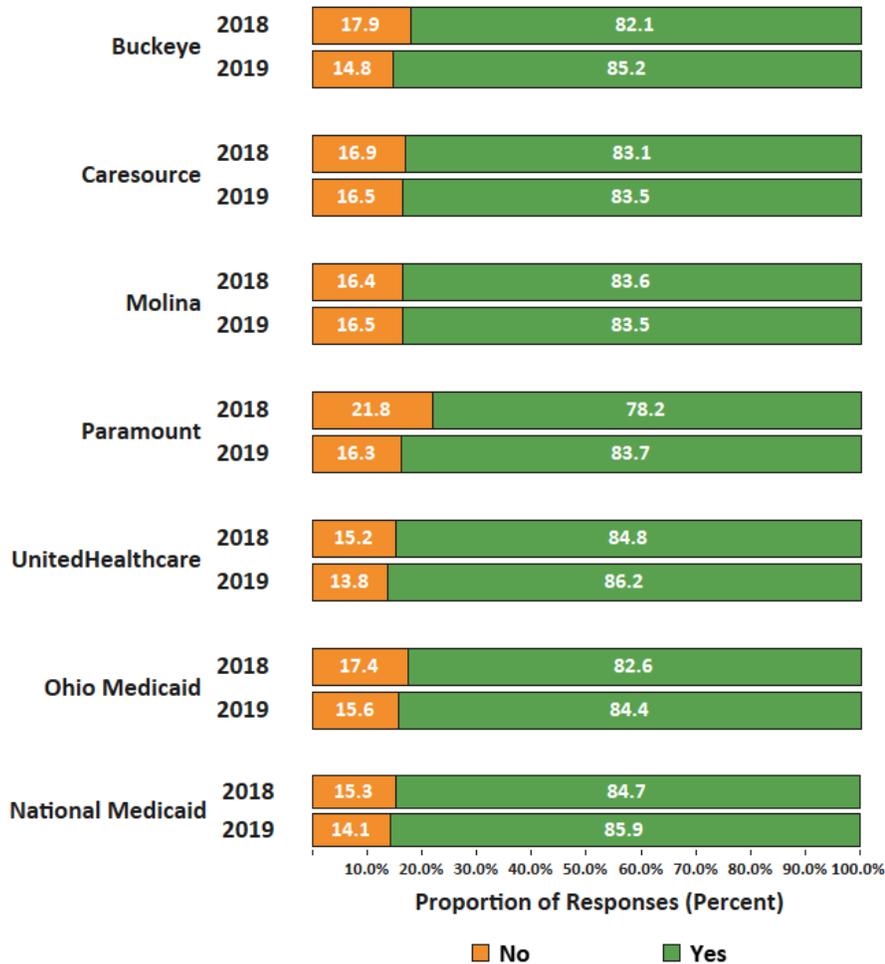
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

## Child Shared Decision Making

Three questions were asked to parents or caretakers of child members to assess the extent to which their child’s doctors or other health providers discussed starting or stopping a medication with them. For each of these questions (questions 11, 12, and 13 in the CAHPS Child Medicaid Health Plan Survey), responses were classified into two categories: No and Yes. Figure 4-41 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-41: Child Shared Decision Making Response Category Percentages



### Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population’s score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population’s score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of “Usually/Always” or “Yes” or “3 or more times”.

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years’ visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

## Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

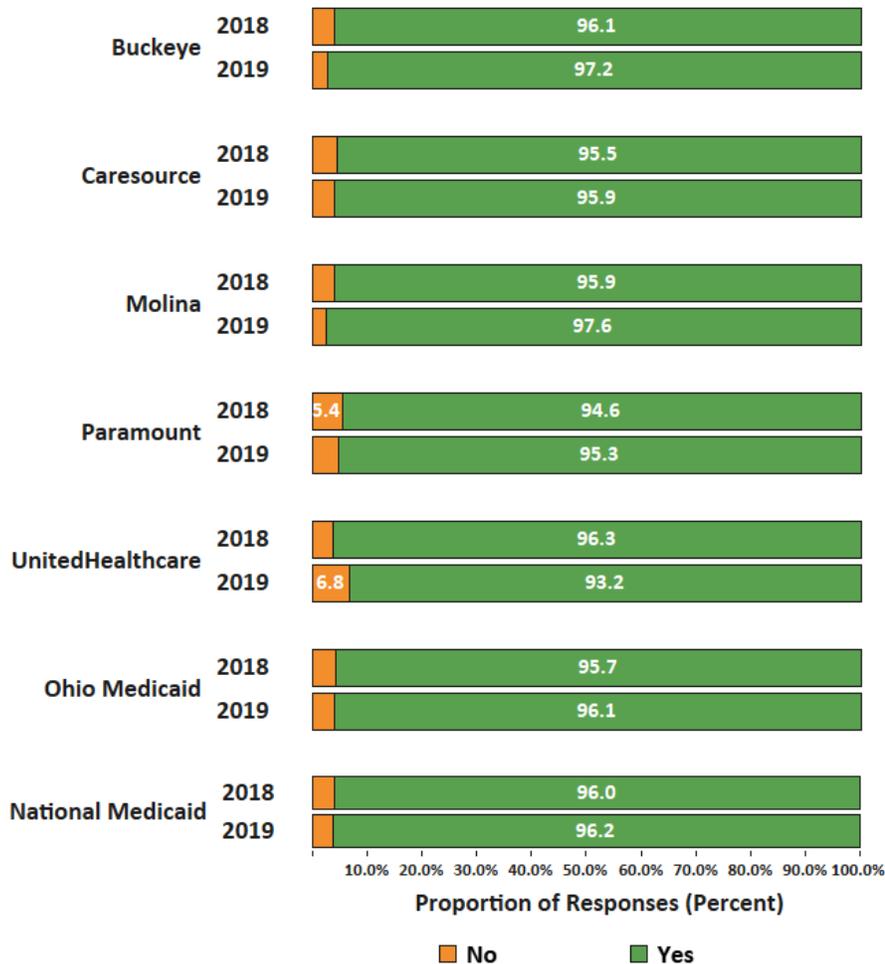
## Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Child Shared Decision Making: Doctor Talked About Reasons to Take a Medicine

Question 11 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members if a doctor or other health provider talked about the reasons their child might want to take a medicine. Figure 4-42 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-42: Child Shared Decision Making: Doctor Talked About Reasons to Take a Medicine Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

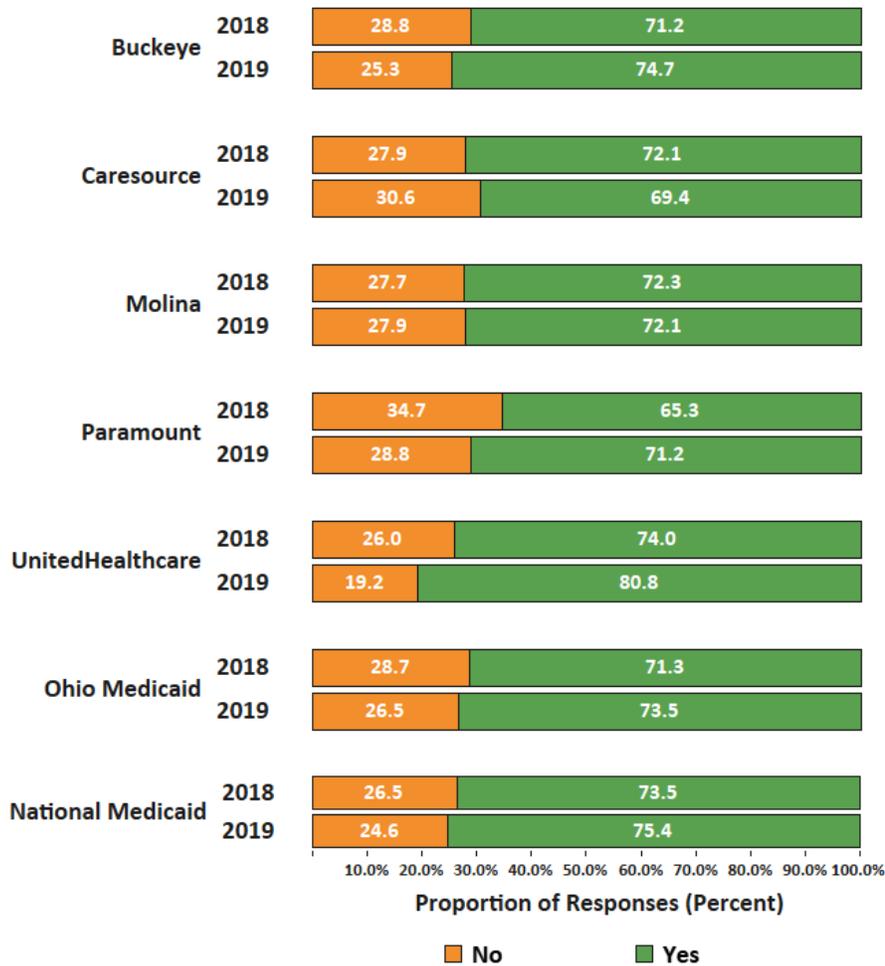
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Child Shared Decision Making: Doctor Talked About Reasons Not to Take a Medicine

Question 12 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members if a doctor or other health provider talked about the reasons their child might not want to take a medicine. Figure 4-43 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-43: Child Shared Decision Making: Doctor Talked About Reasons Not to Take a Medicine Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

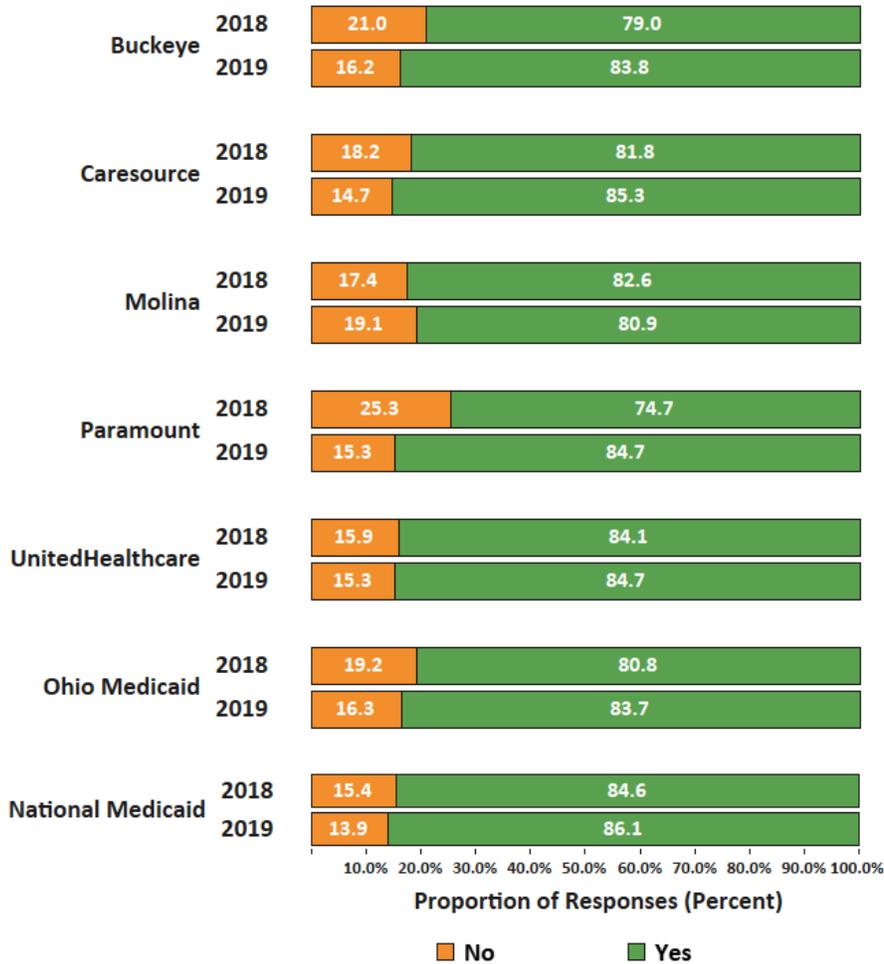
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Child Shared Decision Making: Doctor Asked About Best Medicine Choice for Your Child

Question 13 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members if a doctor or other health provider asked them which medicine choice they thought was best for their child. Figure 4-44 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-44: Child Shared Decision Making: Doctor Asked About Best Medicine Choice for Your Child Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

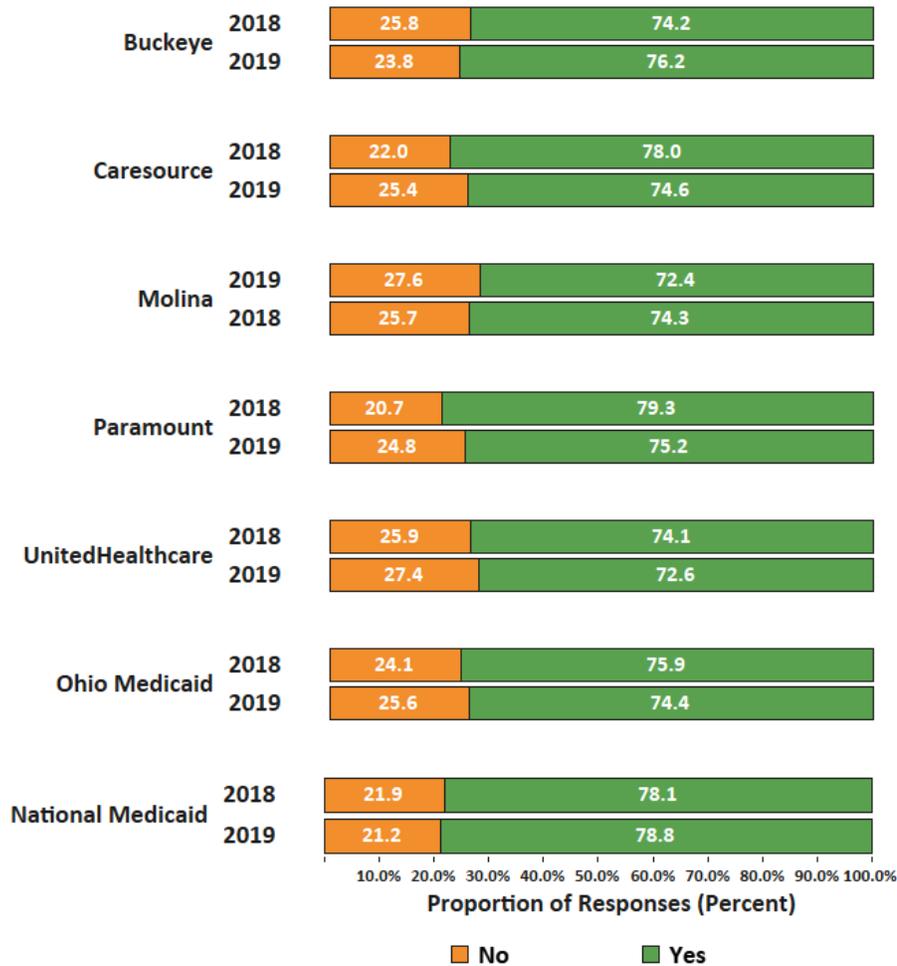
Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

## Individual Item Measures

### Health Promotion and Education

Question 8 in the CAHPS Adult and Child Medicaid Health Plan Surveys asked respondents how often their doctor/their child's doctor or other health provider talked with them about specific things they could do to prevent illness in themselves/their child. Responses were classified into two categories: No and Yes. Figure 4-45 and Figure 4-46 depict the percentage of respondents in each of the response categories for the adult population and child population, respectively.

Figure 4-45: Adult Health Promotion and Education Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

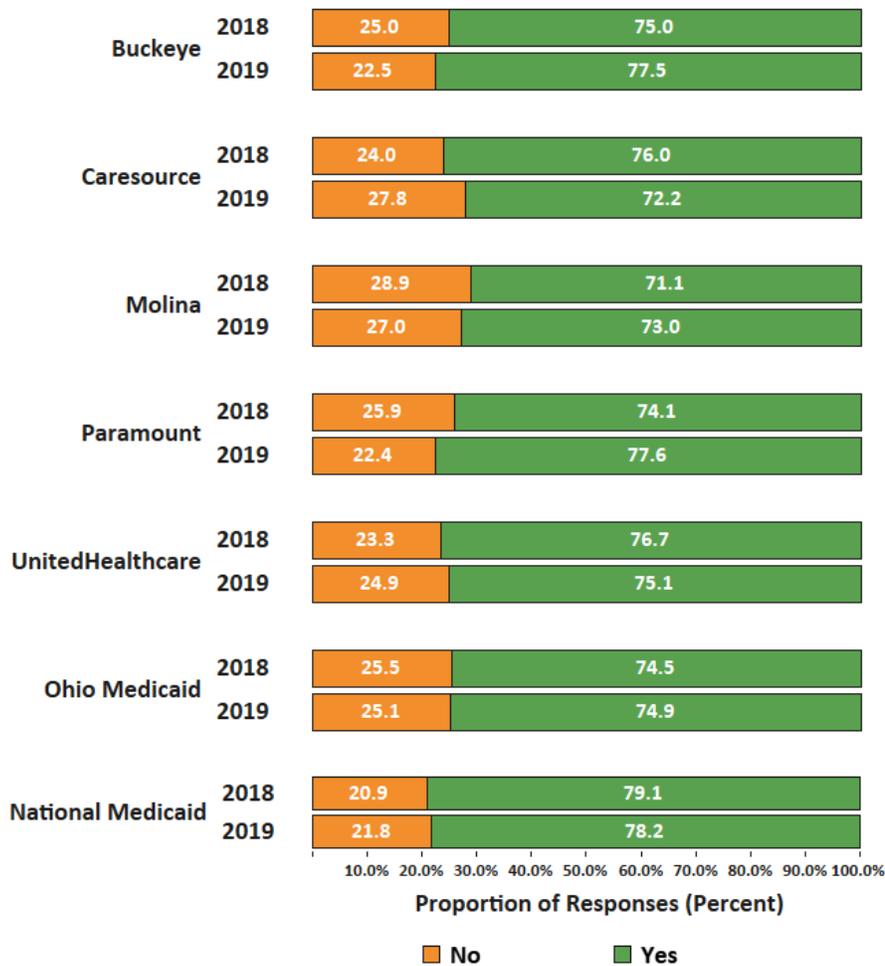
## Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### **Trending Analysis**

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

Figure 4-46: Child Health Promotion and Education Response Category Percentages



Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

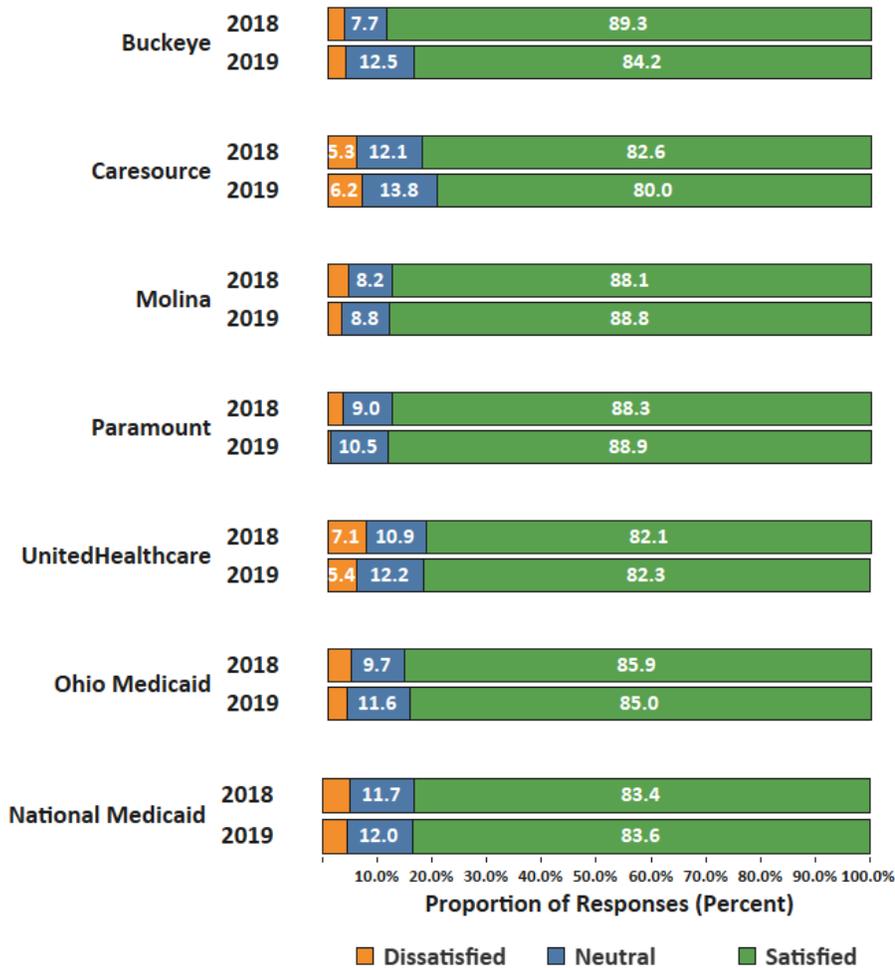
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Coordination of Care

Question 22 in the CAHPS Adult Medicaid Health Plan Survey and question 40 in the CAHPS Child Medicaid Health Plan Survey asked respondents how often their doctor/their child’s doctor seemed informed and up-to-date about care they/their child received from other doctors. Responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 4-47 and Figure 4-48 depict the percentage of respondents in each of the response categories for the adult population and child population, respectively.

Figure 4-47: Adult Coordination of Care Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population’s score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population’s score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

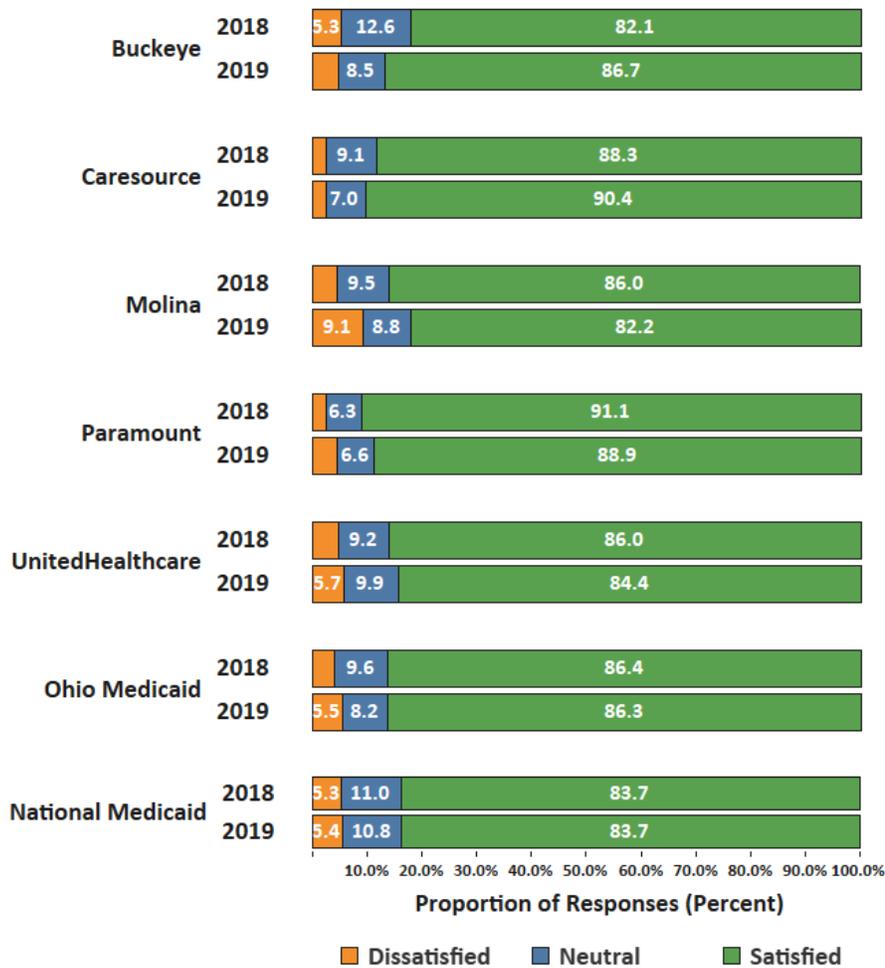
### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

Figure 4-48: Child Coordination of Care Response Category Percentages



Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

**Comparative Analysis**

Overall, there were no statistically significant differences observed for this measure.

**Trending Analysis**

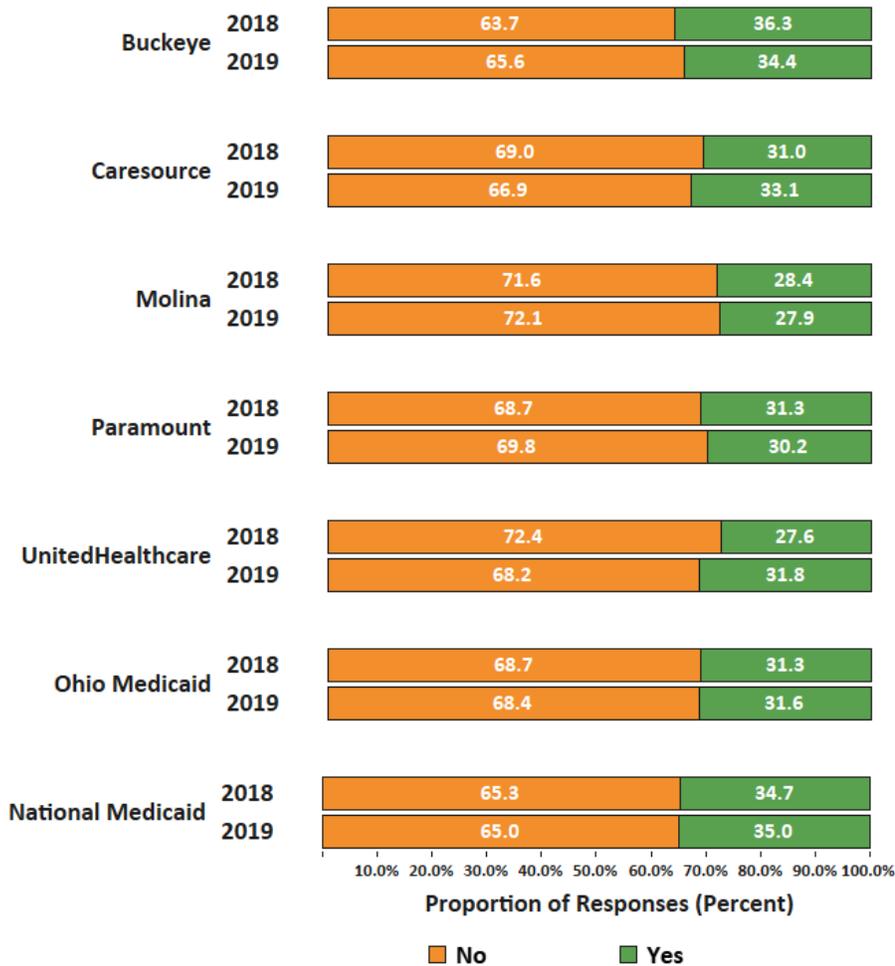
Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

## Satisfaction with Health Plan

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

Question 30 in the CAHPS Adult Medicaid Health Plan Survey and question 49 in the CAHPS Child Medicaid Health Plan Survey asked whether members got information or help from customer service. For this question, responses were classified into two categories: No and Yes. Figure 4-49 and Figure 4-50 depict the percentage of respondents in each of the response categories for the adult population and child population, respectively.

Figure 4-49: Adult Got Information or Help from Customer Service Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

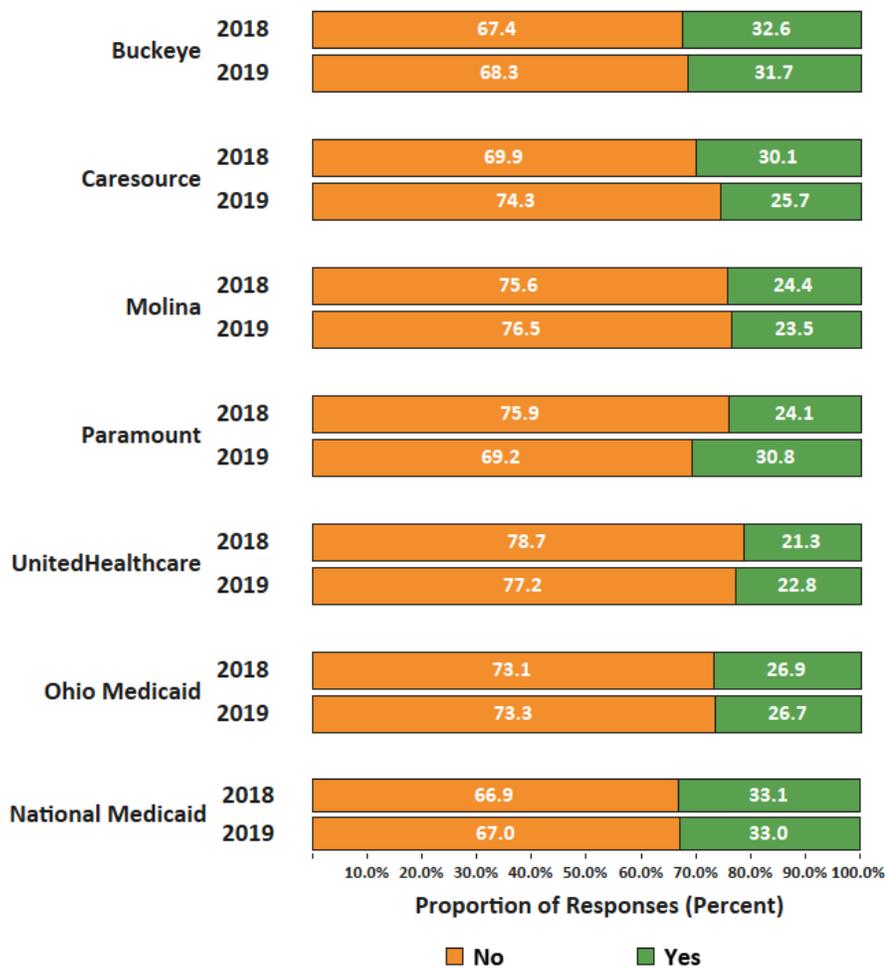
## Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

## Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

Figure 4-50: Child Got Information or Help from Customer Service Response Category Percentages



Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there was one statistically significant difference observed for this measure.

- Buckeye's score was significantly lower than the program average.

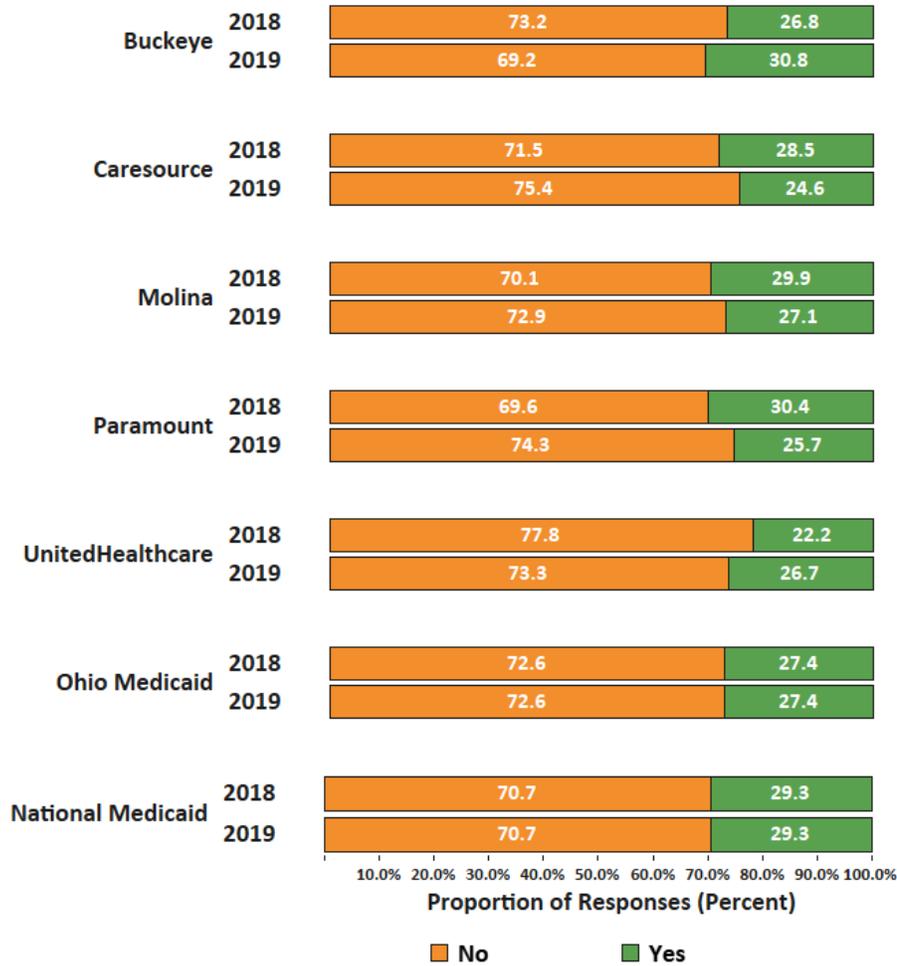
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Satisfaction with Health Plan: Filled Out Paperwork

Question 33 in the CAHPS Adult Medicaid Health Plan Survey and question 52 in the CAHPS Child Medicaid Health Plan Survey asked members if they had filled out paperwork for their/their child’s health plan. For this question, responses were classified into two categories: No and Yes. Figure 4-51 and Figure 4-52 depict the percentage of respondents in each of the response categories for the adult population and child population, respectively.

Figure 4-51: Adult Filled Out Paperwork Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population’s score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population’s score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
The score for the plans refer to the top box responses of “Usually/Always” or “Yes” or “3 or more times”.

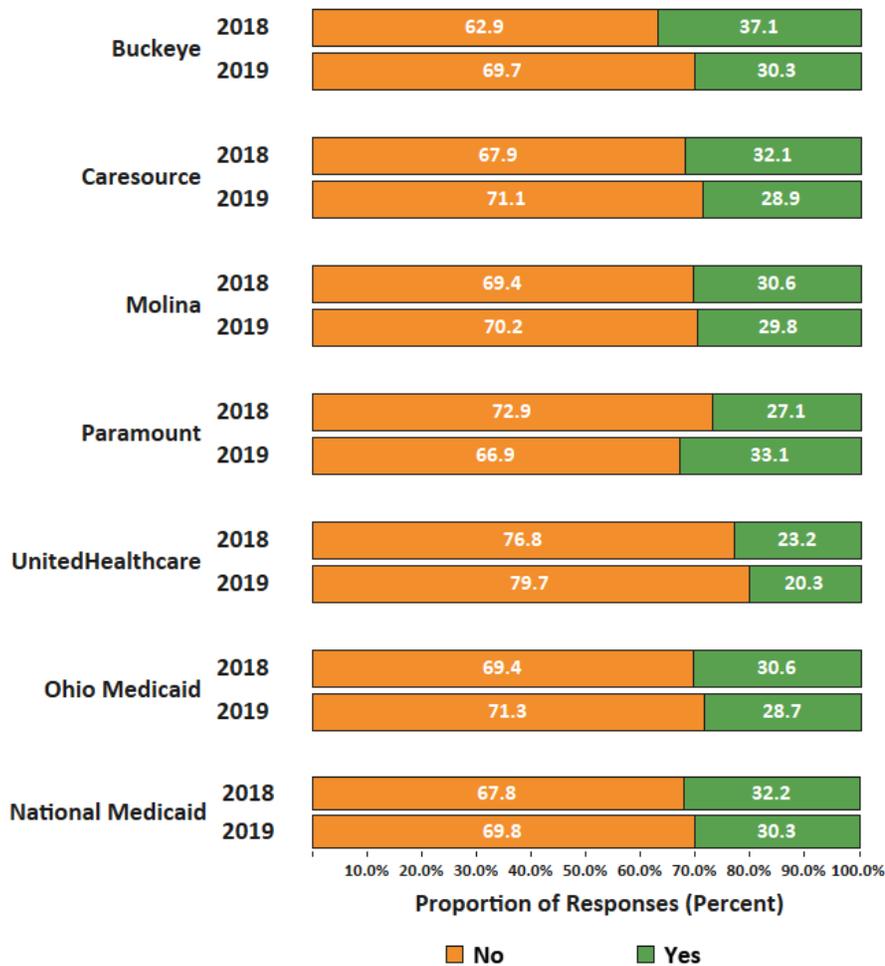
### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

Figure 4-52: Child Filled Out Paperwork Response Category Percentages



Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there was one statistically significant difference observed for this measure.

- UnitedHealthcare's score was significantly lower than the program average.

### Trending Analysis

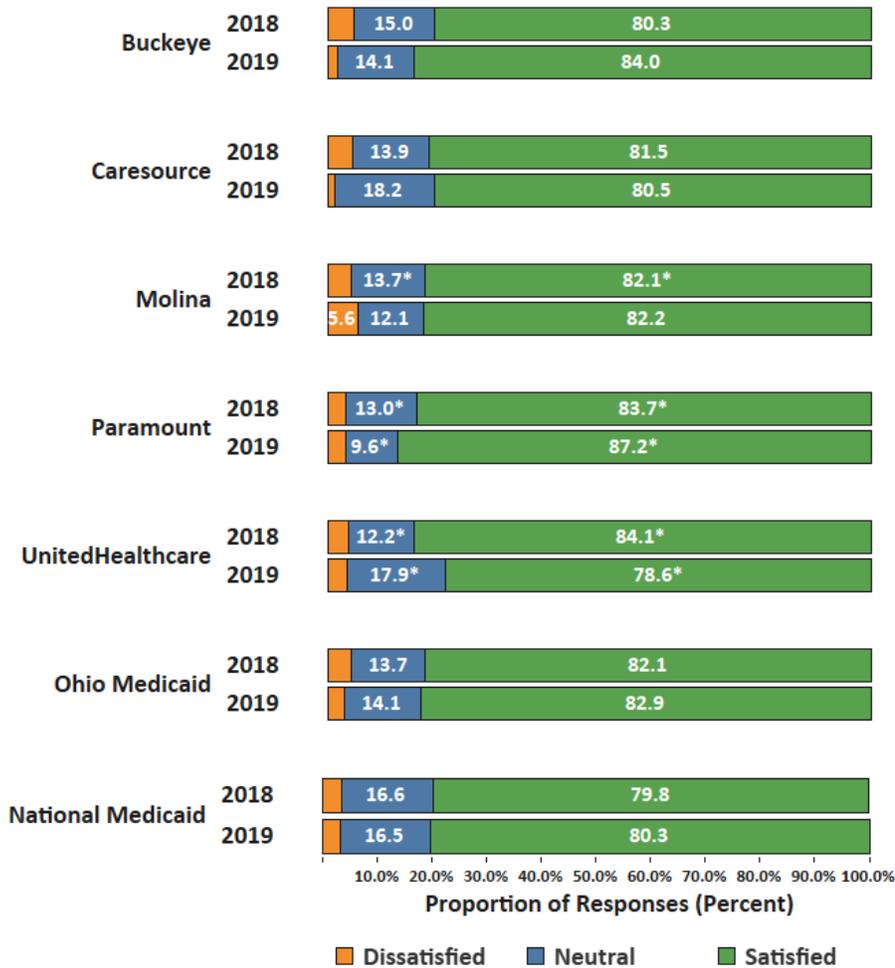
Overall, there was one statistically significant difference between scores in 2019 and scores in 2018 for this measure.

- Buckeye's score was significantly lower in 2019 than in 2018.

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

Question 34 in the CAHPS Adult Medicaid Health Plan Survey and question 53 in the CAHPS Child Medicaid Health Plan Survey asked members how often forms were easy to fill out for their health plan. For this question, responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 4-53 and Figure 4-54 depict the percentage of respondents in each of the response categories for the adult population and child population, respectively.

Figure 4-53: Adult Problem with Paperwork for Health Plan Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

\* Caution should be taken when interpreting these results as responses were below 100.

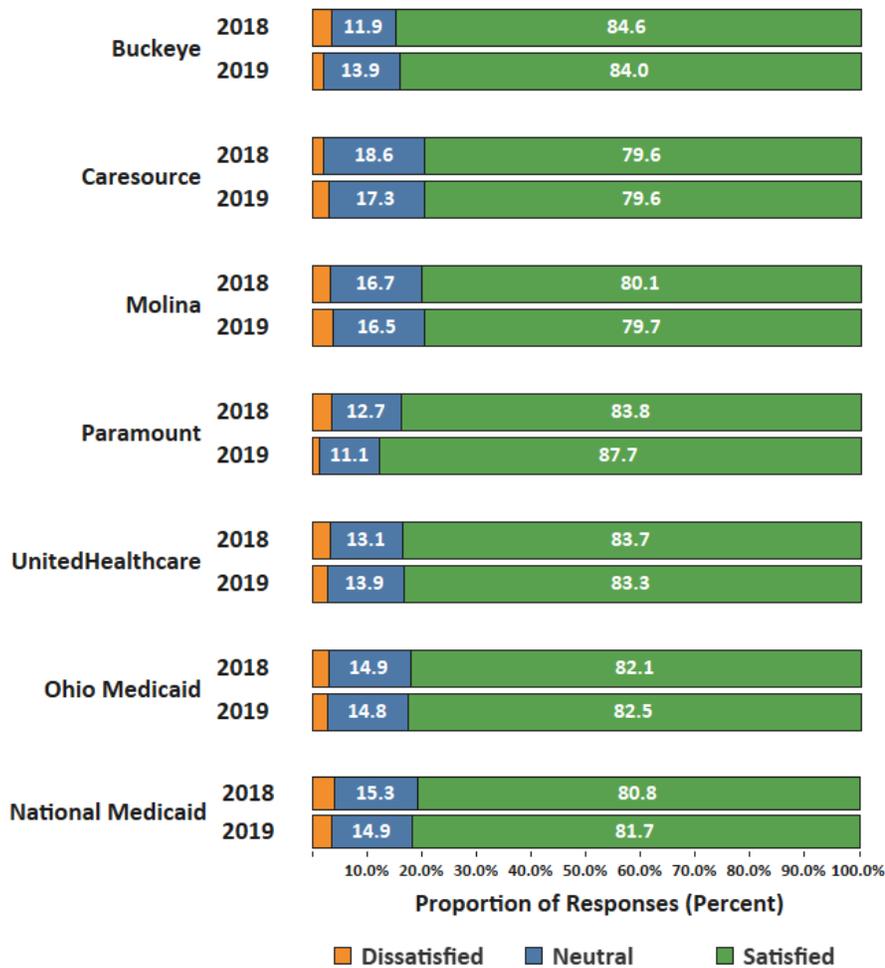
### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

Figure 4-54: Child Problem with Paperwork for Health Plan Response Category Percentages



Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

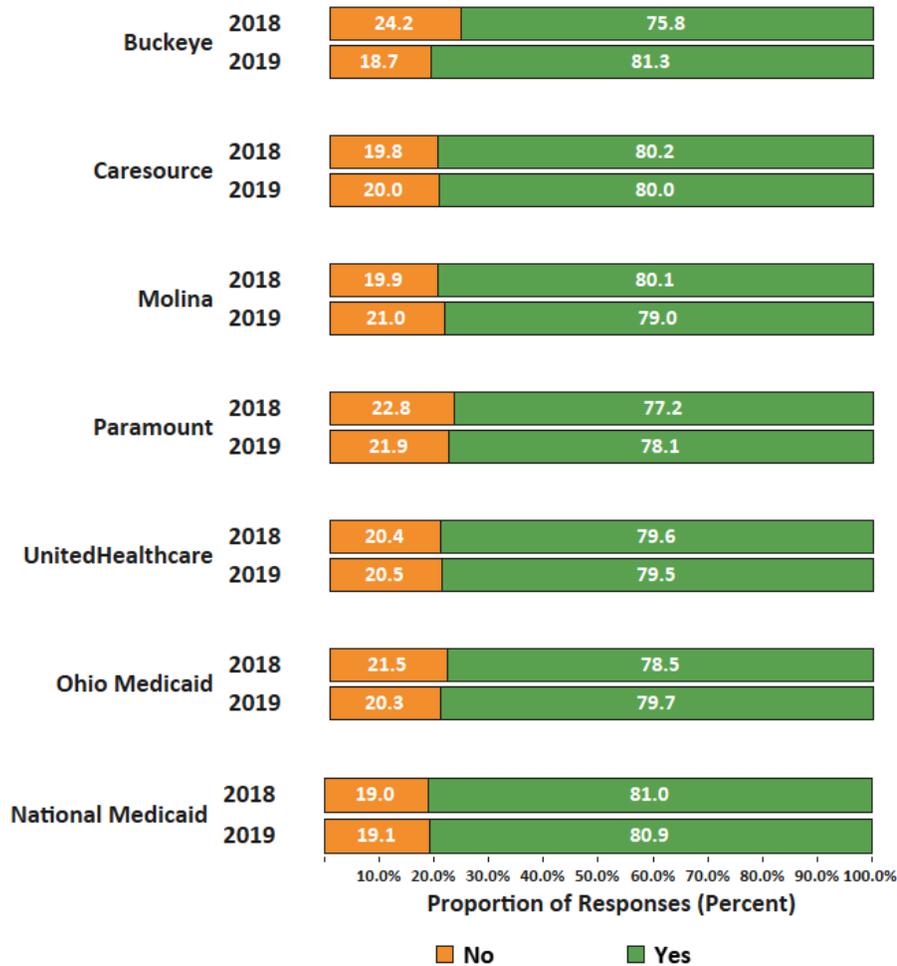
Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

## Satisfaction with Health Care Providers

### Satisfaction with Health Care Providers: Had Personal Doctor

Several questions were asked to assess member satisfaction with health care providers. Question 15 in the CAHPS Adult Medicaid Health Plan Survey and question 30 in the CAHPS Child Medicaid Health Plan Survey asked whether members had one person who they thought of as their personal doctor. For this question, responses were classified into two categories: No and Yes. Figure 4-55 and Figure 4-56 depict the percentage of respondents in each of the response categories for the adult population and child population, respectively.

Figure 4-55: Adult Had Personal Doctor Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

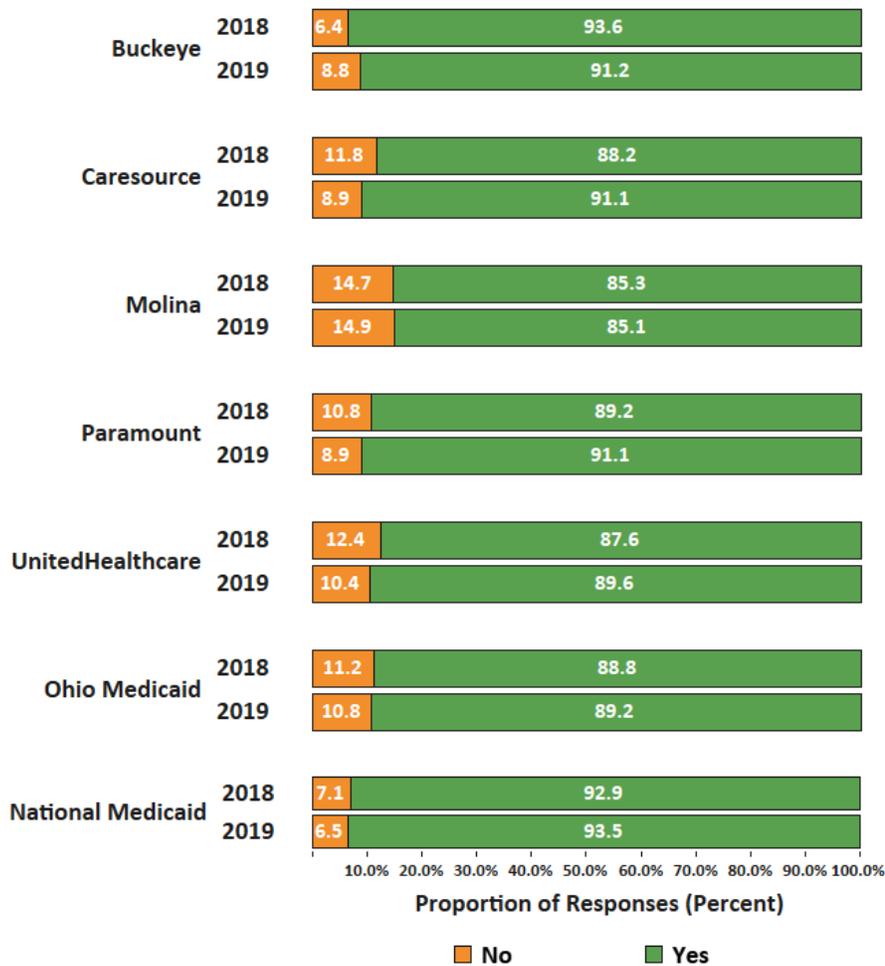
## Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### **Trending Analysis**

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

Figure 4-56: Child Had Personal Doctor Response Category Percentages



Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

**Comparative Analysis**

Overall, there was one statistically significant difference observed for this measure.

- Molina's score was significantly lower than the program average.

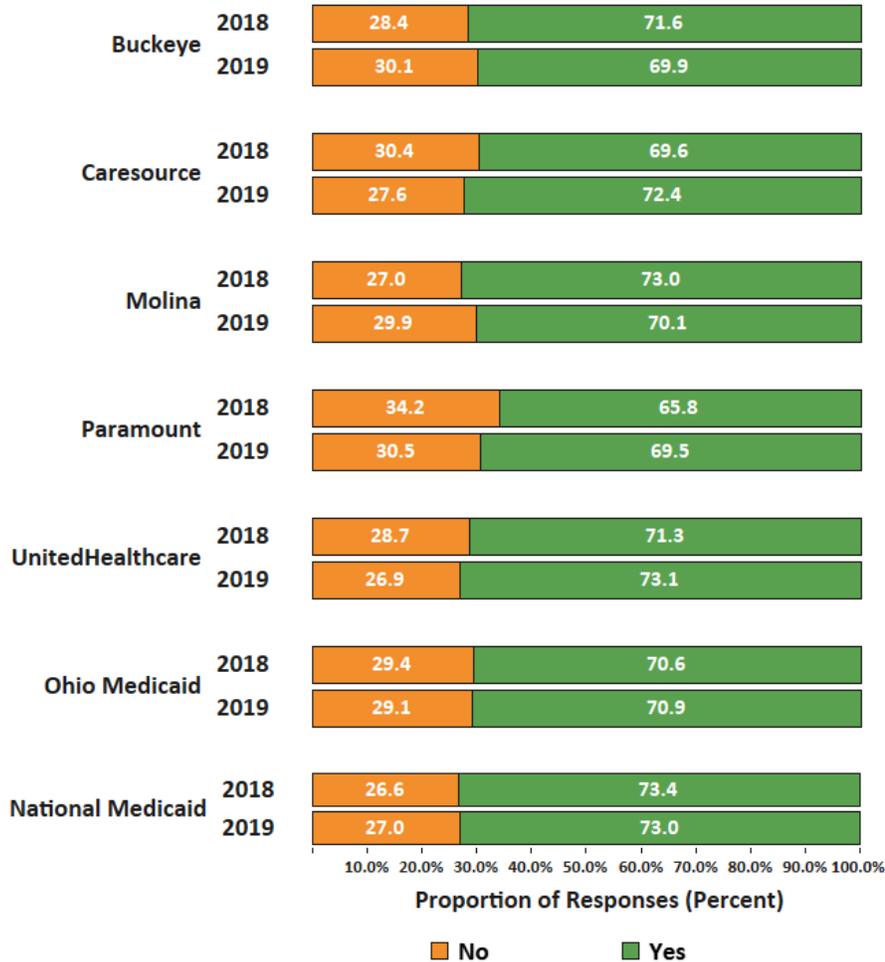
**Trending Analysis**

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Satisfaction with Health Care Providers: Child Able to Talk with Doctors

Question 35 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, responses were classified into two categories: No and Yes. Figure 4-57 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-57: Child Able to Talk with Doctors Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

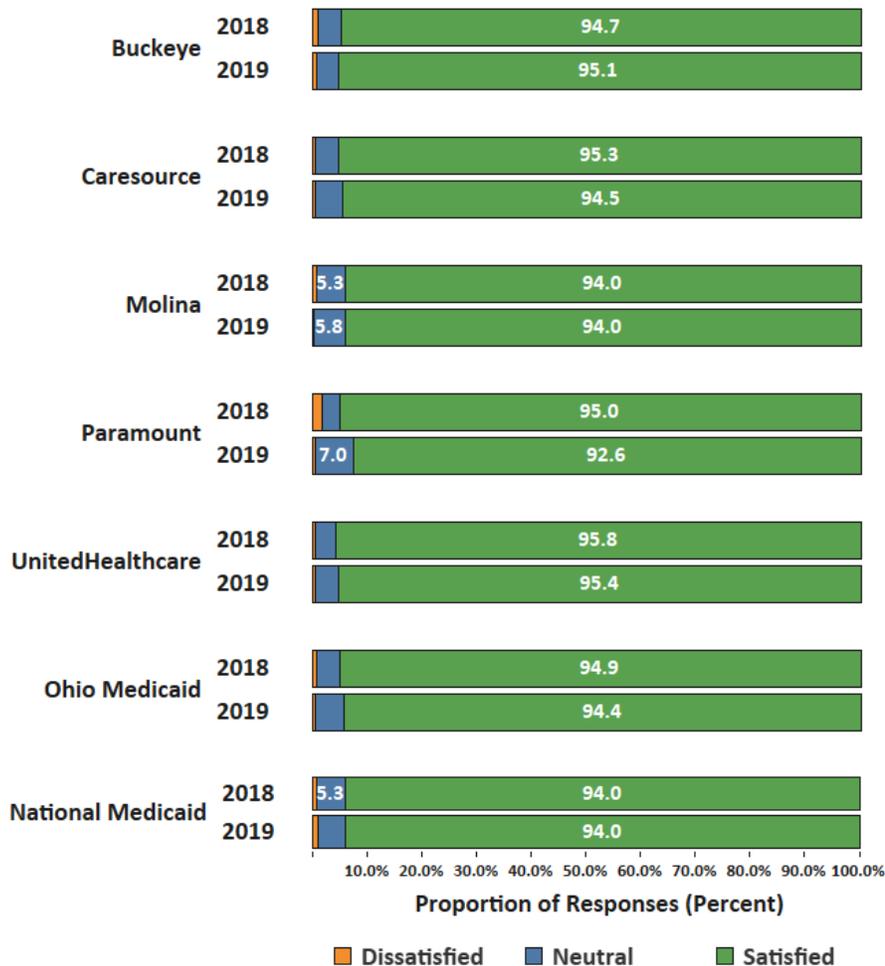
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

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

Question 36 in the CAHPS Child Medicaid Health Plan Survey asked the parents or caretakers of child members how often their child’s personal doctor explained things to their child in a way their child could understand. For this question, responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 4-58 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-58: Doctors Explained Things in Way Child Could Understand Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population’s score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population’s score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of “Usually/Always” or “Yes” or “3 or more times”.

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years’ visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

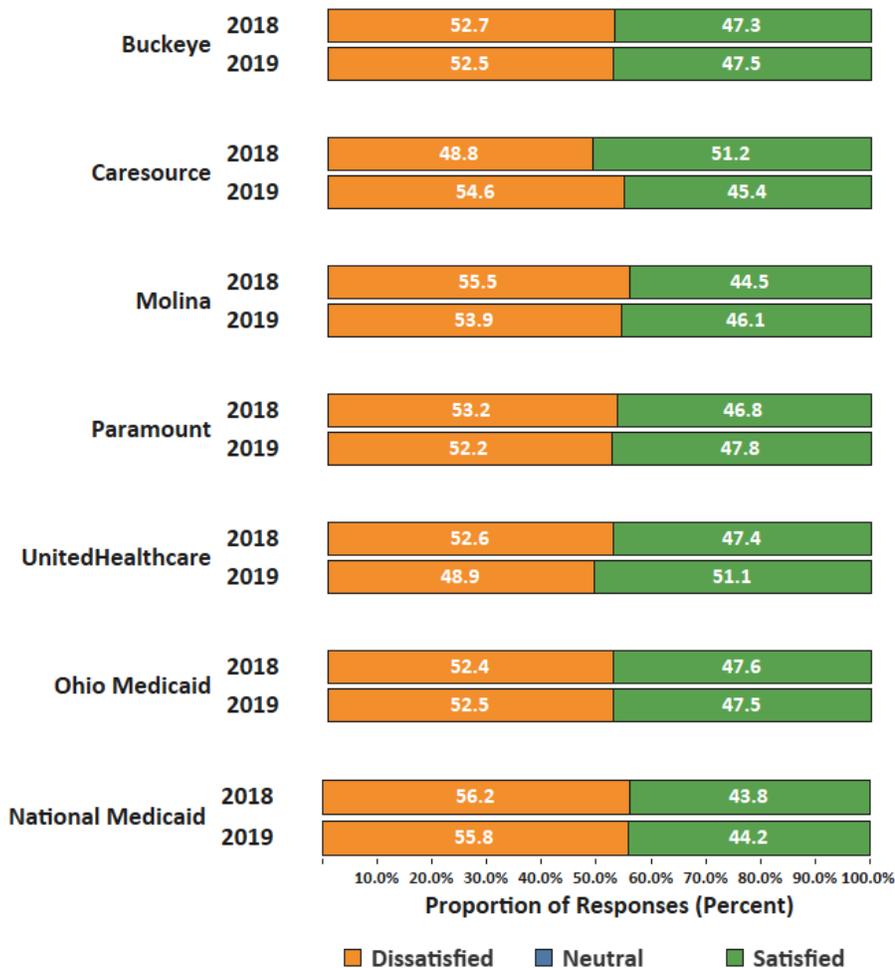
Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

## Access to Care

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

Several questions were asked to assess member perceptions of access to care. Question 24 in the CAHPS Adult Medicaid Health Plan Survey and question 45 in the CAHPS Child Medicaid Health Plan Survey asked whether the member tried to make an appointment to see a specialist. For this question, responses were classified into two categories: No and Yes. Figure 4-59 and Figure 4-60 depict the percentage of respondents in each of the response categories for the adult population and child population, respectively.

Figure 4-59: Adult Tried to Make Appointment to See Specialist Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

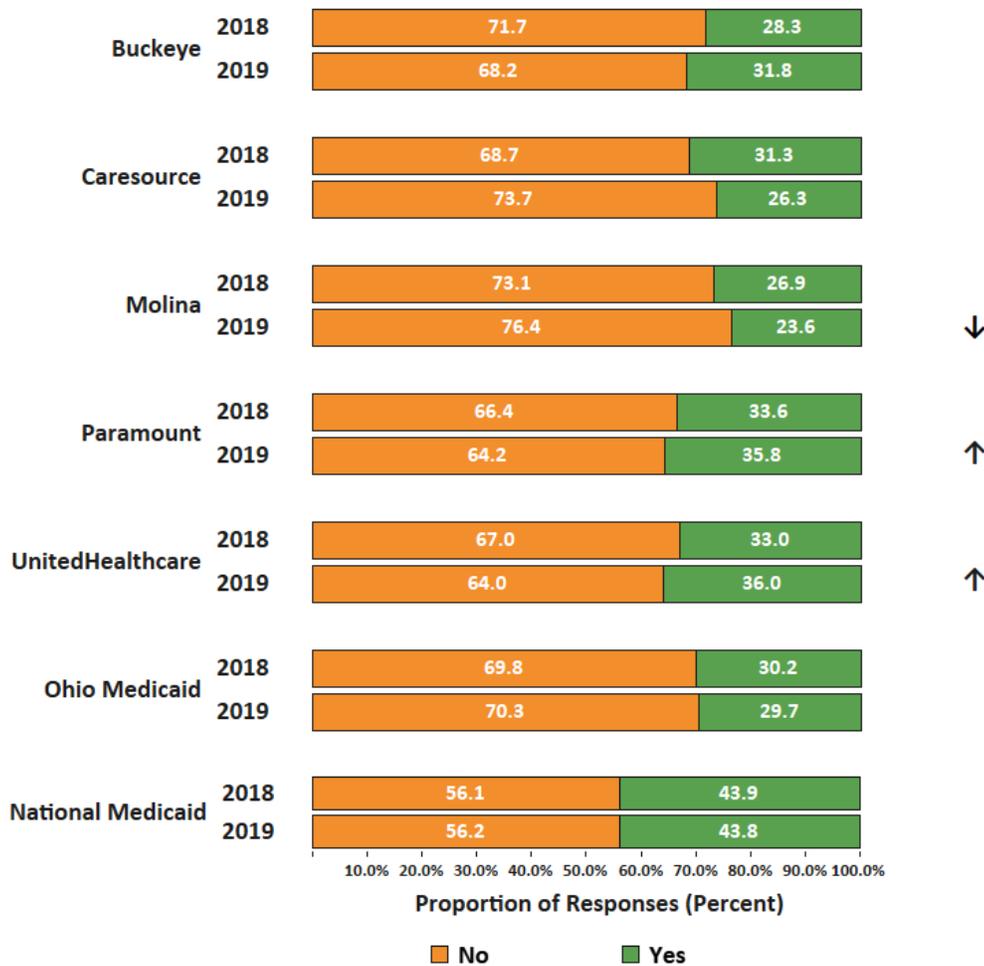
## Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

**Trending Analysis**

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

Figure 4-60: Child Tried to Make Appointment to See Specialist Response Category Percentages



Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

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

- Molina's score was significantly lower than the program average.
- Paramount's and UnitedHealthcare's scores were significantly higher than the program average.

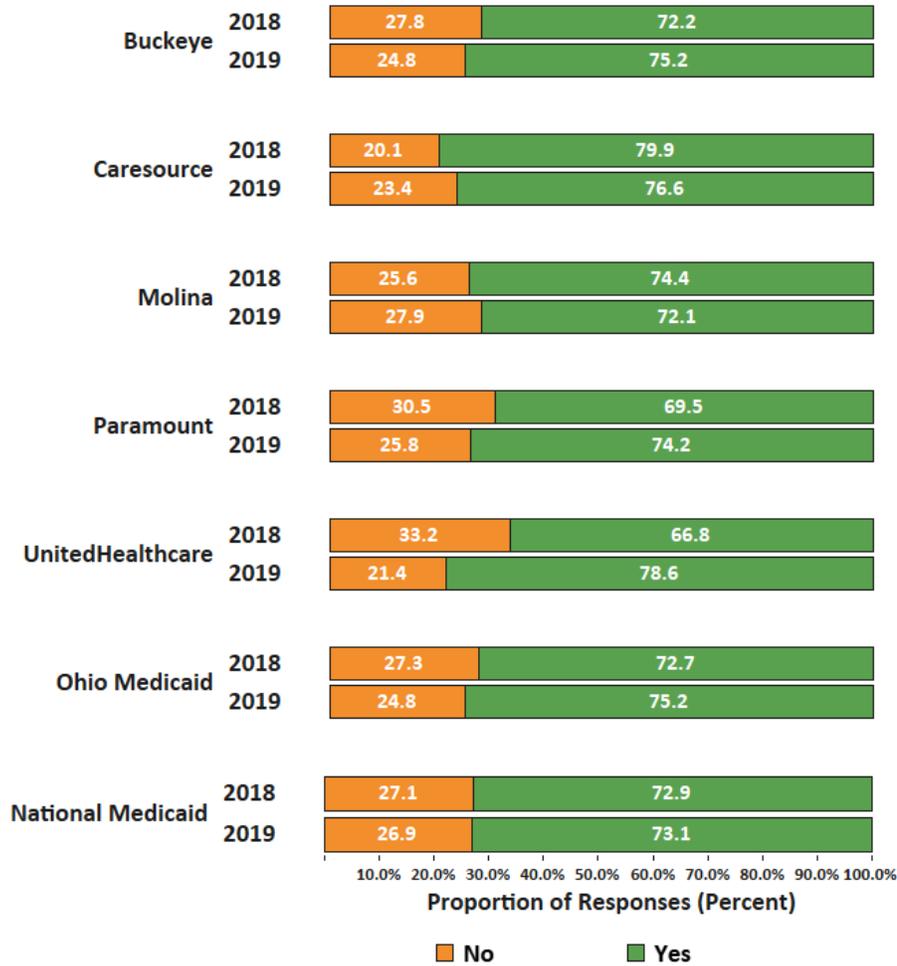
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

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

Question 5 in the CAHPS Adult and Child Medicaid Health Plan Surveys asked whether members had made any appointments for health care (not counting the times members needed health care right away). For this question, responses were classified into two categories: No and Yes. Figure 4-61 and Figure 4-62 depict the percentage of respondents in each of the response categories for the adult population and child population, respectively.

Figure 4-61: Adult Made Appointments for Health Care Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

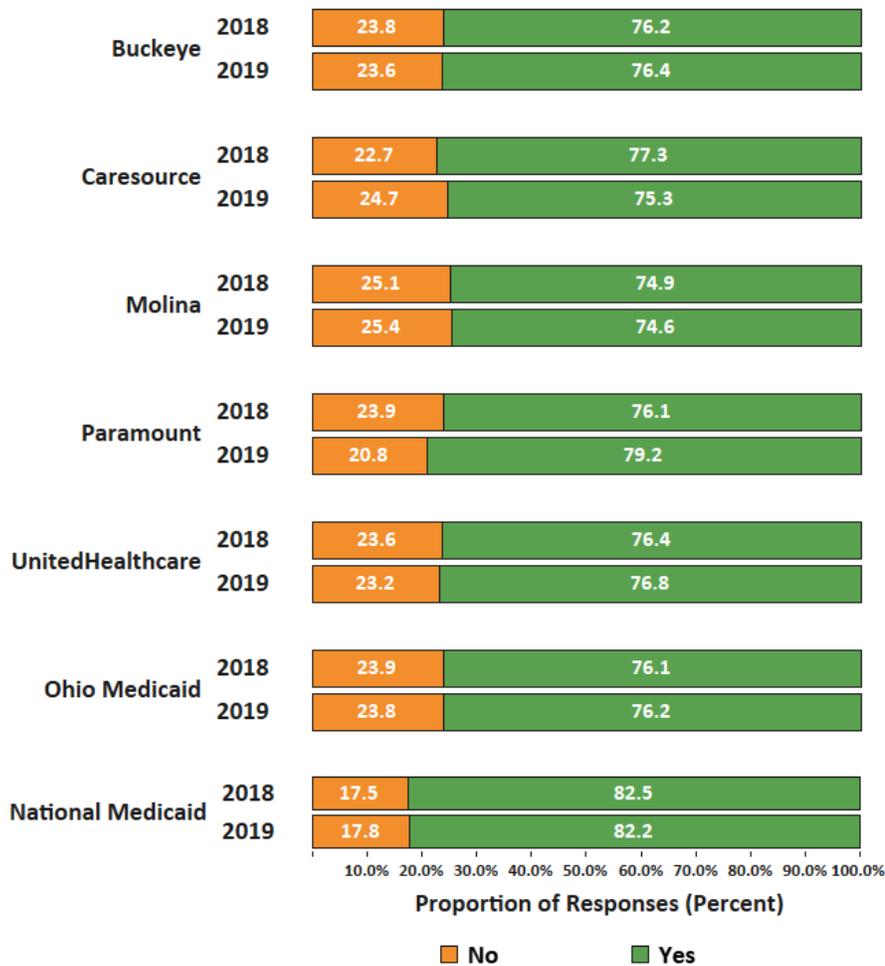
Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

Overall, there was one statistically significant difference between scores in 2019 and scores in 2018 for this measure.

UnitedHealthcare's score was significantly higher in 2019 than in 2018.

Figure 4-62: Child Made Appointments for Health Care Response Category Percentages



Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

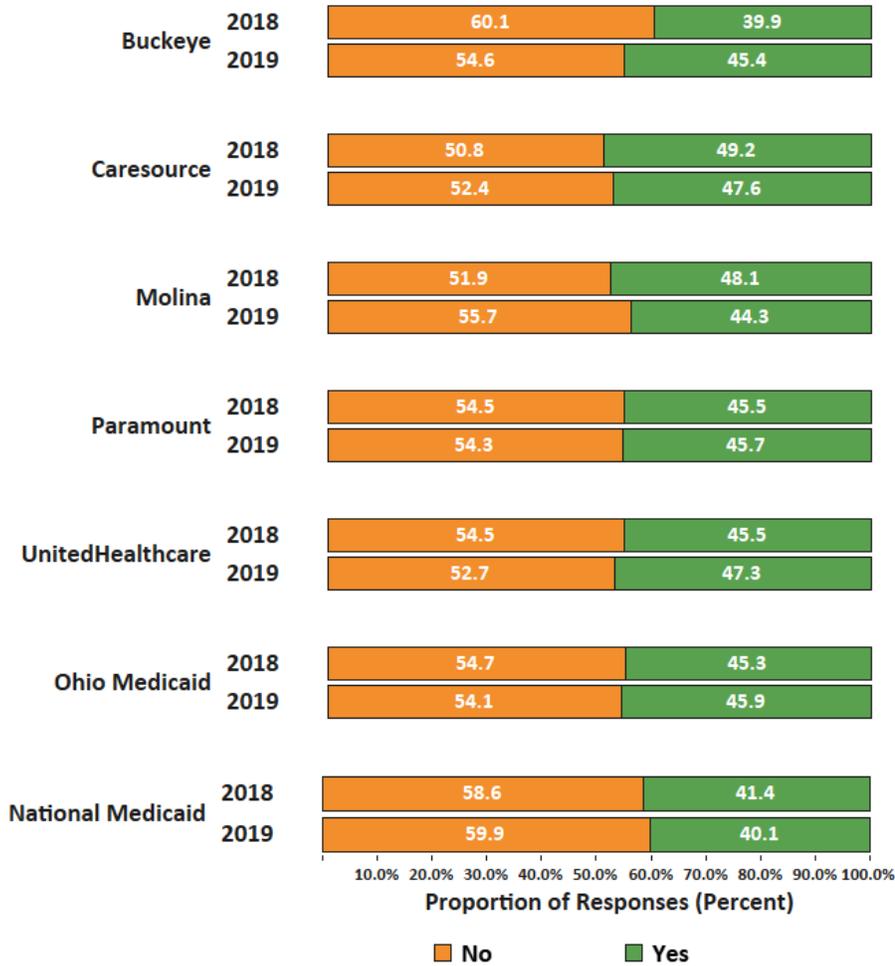
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

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

Question 3 in the CAHPS Adult and Child Medicaid Health Plan Surveys asked whether the member had an illness, injury, or condition that needed care right away. For this question, responses were classified into two categories: No and Yes. Figure 4-63 and Figure 4-64 depict the percentage of respondents in each of the response categories for the adult population and child population, respectively.

Figure 4-63: Adult Had Illness, Injury, or Condition that Needed Care Right Away Response Category Percentages



Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

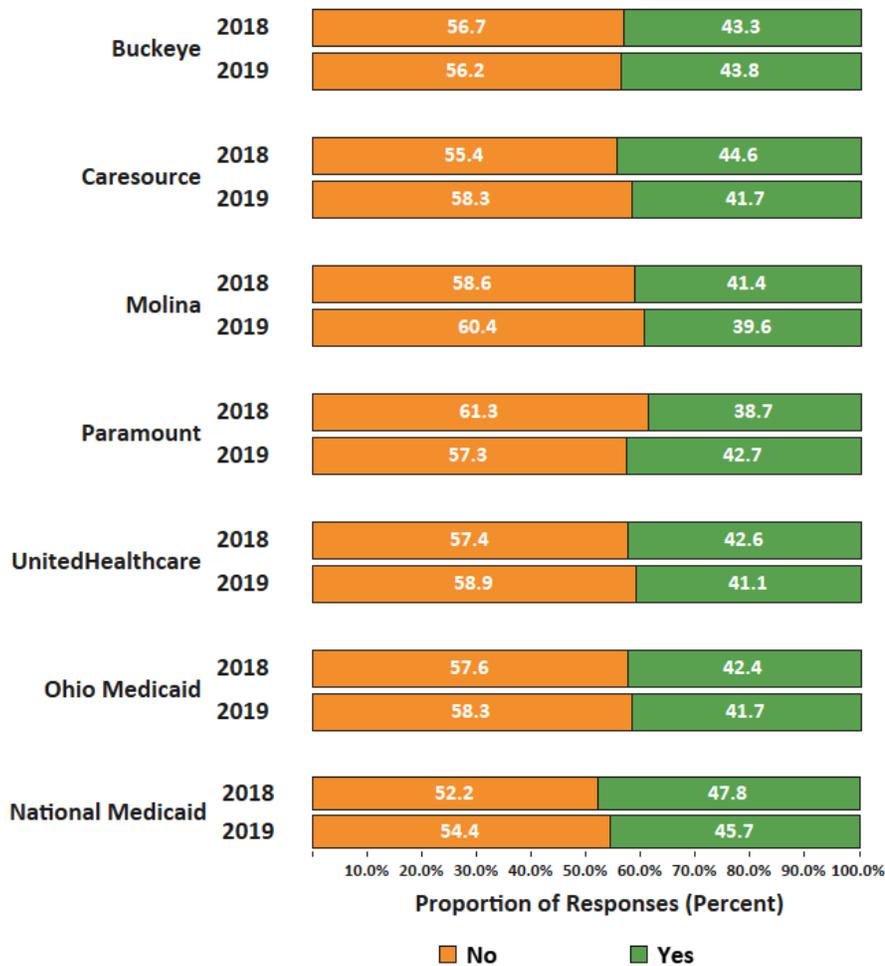
**Comparative Analysis**

Overall, there were no statistically significant differences observed for this measure.

**Trending Analysis**

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

Figure 4-64: Child Had Illness, Injury, or Condition that Needed Care Right Away Response Category Percentages



Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

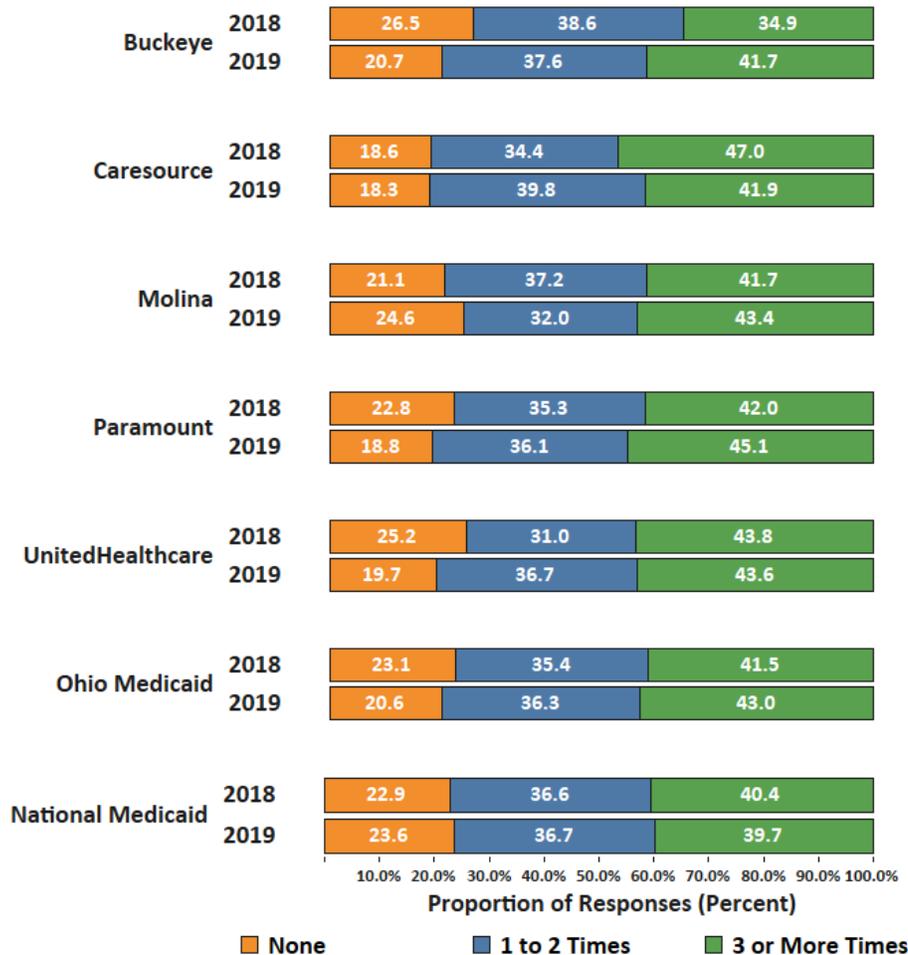
Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

## Utilization of Services

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

Question 7 in the CAHPS Adult and Child Medicaid Health Plan Surveys asked how many times the member visited the doctor's office or clinic (not counting times the member visited the emergency room). For this question, responses were classified into three categories: "3 or More Times," "1 to 2 Times," and "None." Figure 4-65 and Figure 4-66 depict the percentage of respondents in each of the response categories for the adult population and child population, respectively.

Figure 4-65: Adult Number of Visits to the Doctor's Office Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

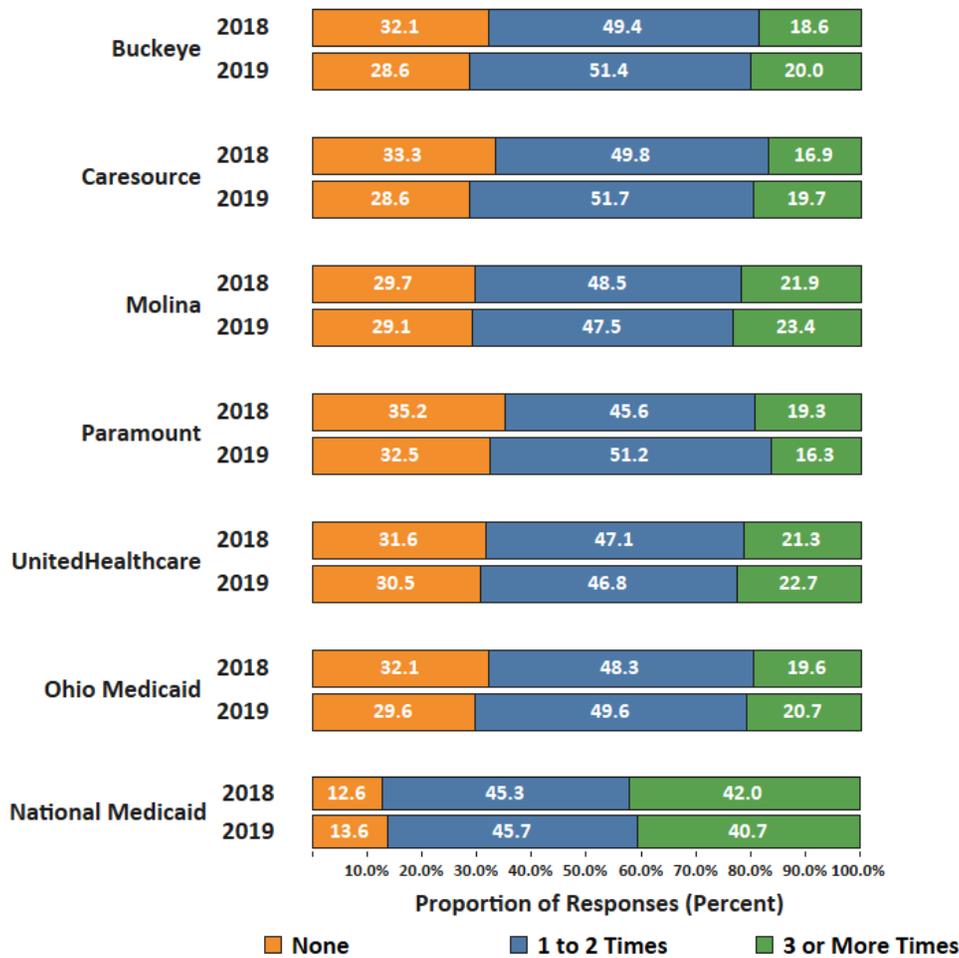
## Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### **Trending Analysis**

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

Figure 4-66: Child Number of Visits to the Doctor's Office Response Category Percentages



Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

## Medical Assistance with Smoking and Tobacco Use Cessation<sup>20</sup>

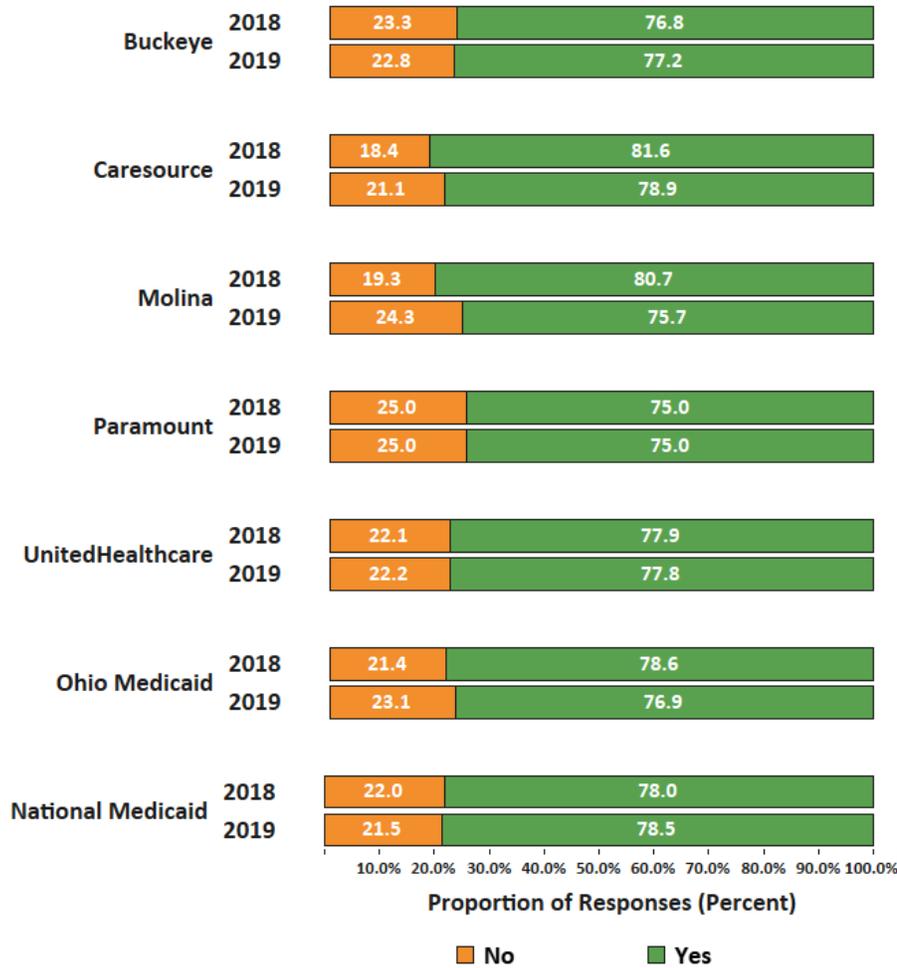
### *Advising Smokers and Tobacco Users to Quit*

Question 40 in the CAHPS Adult Medicaid Health Plan Survey asked how often the member was advised to quit smoking or using tobacco by a doctor or other health provider. For this question, responses were classified into two categories: No (Never) and Yes (Sometimes/Usually/Always). Figure 4-67 depicts the overall scores and the percentage of respondents in each of the response categories for the adult population.

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<sup>20</sup> The Medical Assistance with Smoking and Tobacco Use Cessation measures (Questions 40, 41, and 42) are only included in the CAHPS 5.0H Adult Medicaid Health Plan Survey. The 2018 and 2019 rates follow NCQA's methodology of calculating a rolling average using the current and prior year's results. Please exercise caution when reviewing the trend analysis results for the Medical Assistance with Smoking and Tobacco Use Cessation Measures, as the 2018 results contain members who responded to the survey and indicated that they were current smokers or tobacco users in 2017 or 2018.

Figure 4-67: Smoking and Tobacco Use Cessation: Advising Smokers and Tobacco Users to Quit Response Category Percentages



Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

**Comparative Analysis**

Overall, there were no statistically significant differences observed for this measure.

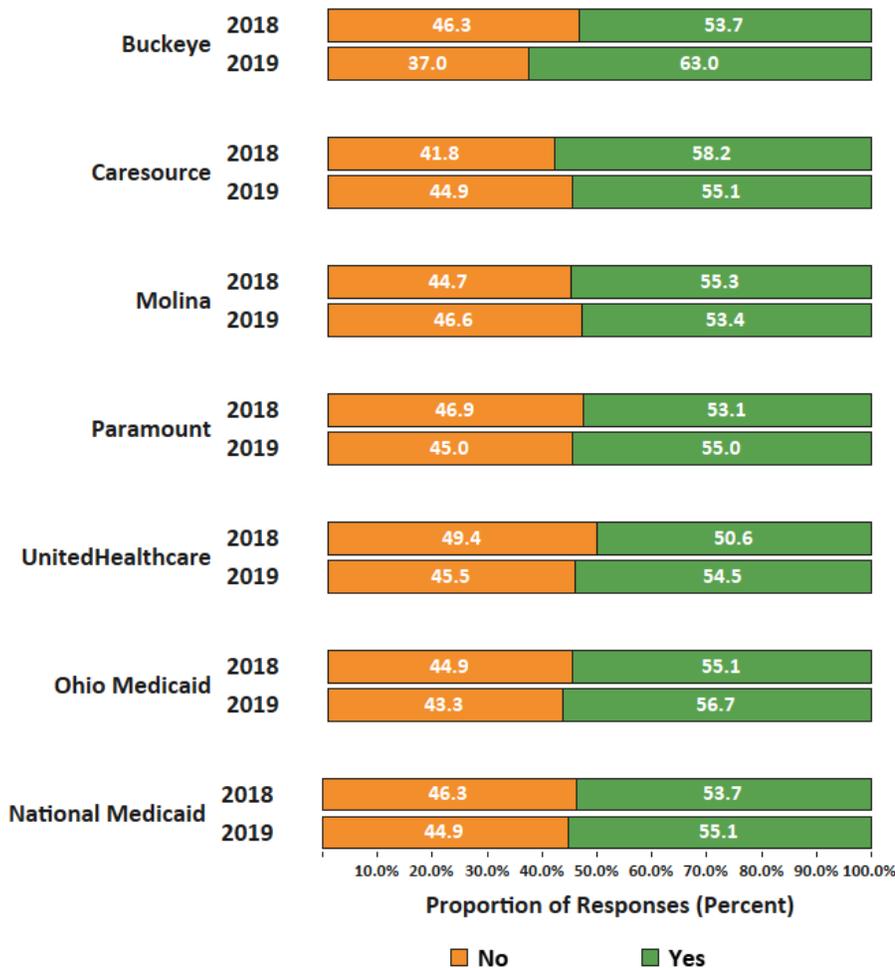
**Trend Analysis**

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Discussing Cessation Medications

Question 41 in the CAHPS Adult Medicaid Health Plan Survey asked how often the member’s doctor or health provider recommended or discussed medications to assist with quitting smoking or using tobacco (e.g., nicotine gum, patch, nasal spray, inhaler, or prescription medication). For this question, responses were classified into two categories: No (Never) and Yes (Sometimes/Usually/Always). Figure 4-68 depicts the overall scores and the percentage of respondents in each of the response categories for the adult population.

Figure 4-68: Smoking and Tobacco Use Cessation: Discussing Cessation Medications Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population’s score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population’s score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

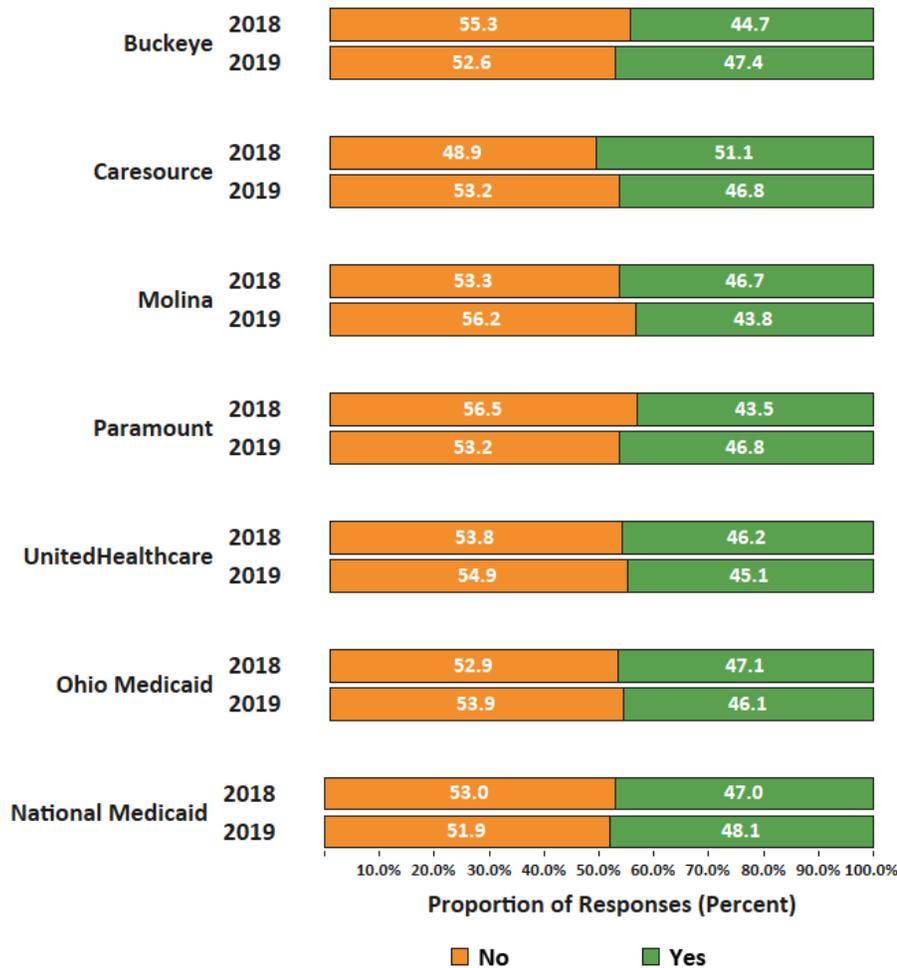
### Trend Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Discussing Cessation Strategies

Question 42 in the CAHPS Adult Medicaid Health Plan Survey asked how often the member’s doctor or health provider discussed or provided methods and strategies, other than medication, to assist with quitting smoking or using tobacco. For this question, responses were classified into two categories: No (Never) and Yes (Sometimes/Usually/Always). Figure 4-69 depicts the overall scores and the percentage of respondents in each of the response categories for the adult population.

Figure 4-69: Smoking and Tobacco Use Cessation: Discussing Cessation Strategies Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population’s score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population’s score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trend Analysis

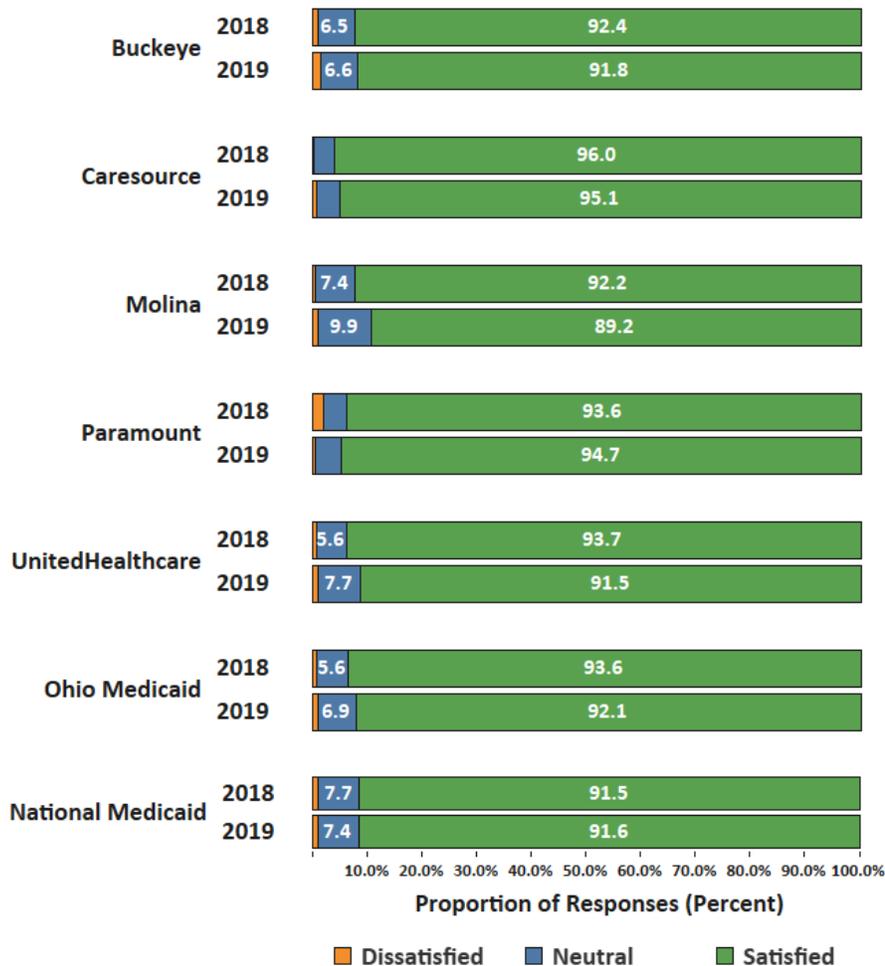
Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

## CCC Composites and CCC Items<sup>21</sup>

### 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, responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 4-70 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-70: Child Access to Prescription Medicines Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

<sup>21</sup> For the general child population, NCQA national averages are not provided for the CCC composite measures.

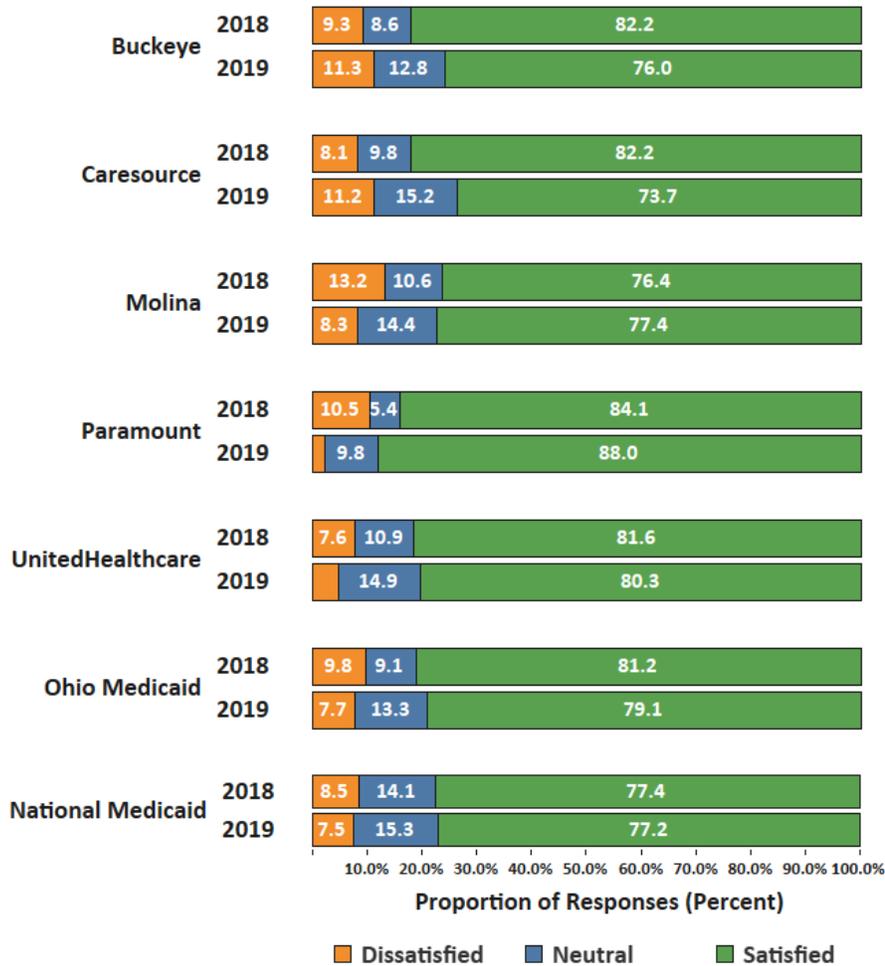
### **Trending Analysis**

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Access to Specialized Services

A series of three questions was asked to assess how often it was easy for child members to obtain access to specialized services. For each of these questions (questions 20, 23, and 26 in the CAHPS Child Medicaid Health Plan Survey), responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 4-71 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-71: Child Access to Specialized Services Composite Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

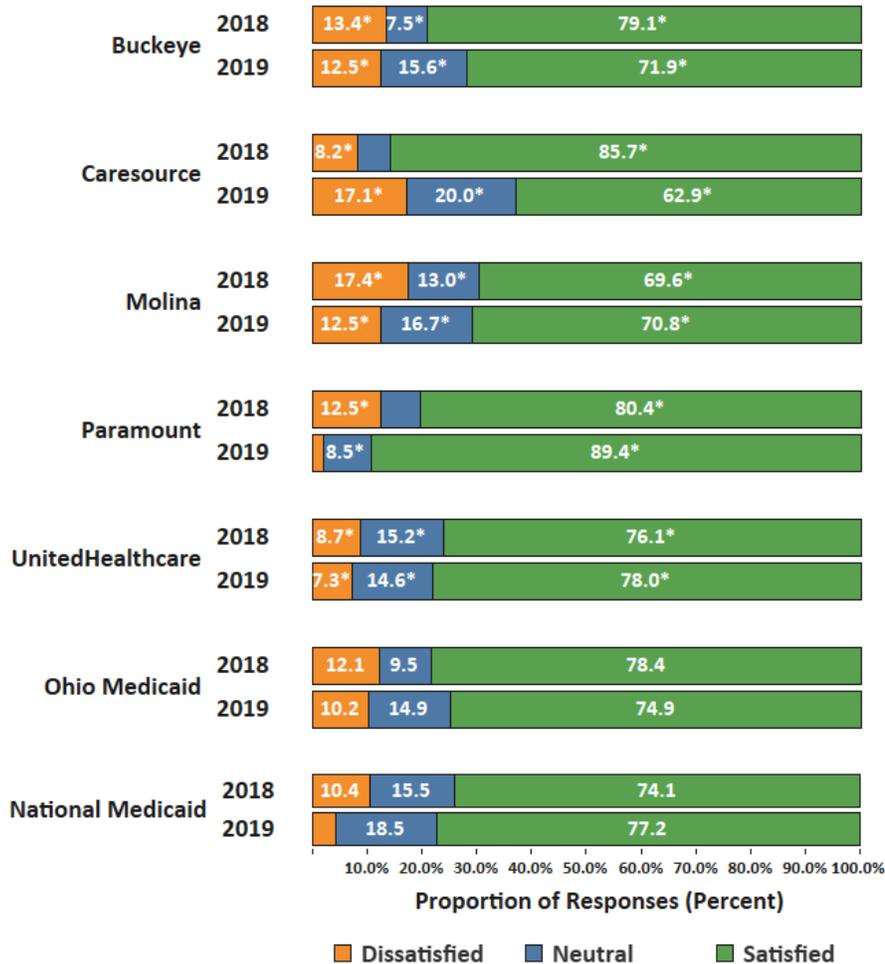
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

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

Question 20 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often it was easy obtaining special medical equipment or devices for their child. Figure 4-72 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-72: Child Access to Specialized Services: Problem Obtaining Special Medical Equipment Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

\*Caution should be taken when interpreting these results as responses were below 100.

### Comparative Analysis

Overall, there was one statistically significant difference observed for this measure.

- Paramount's score was significantly lower than the program average.

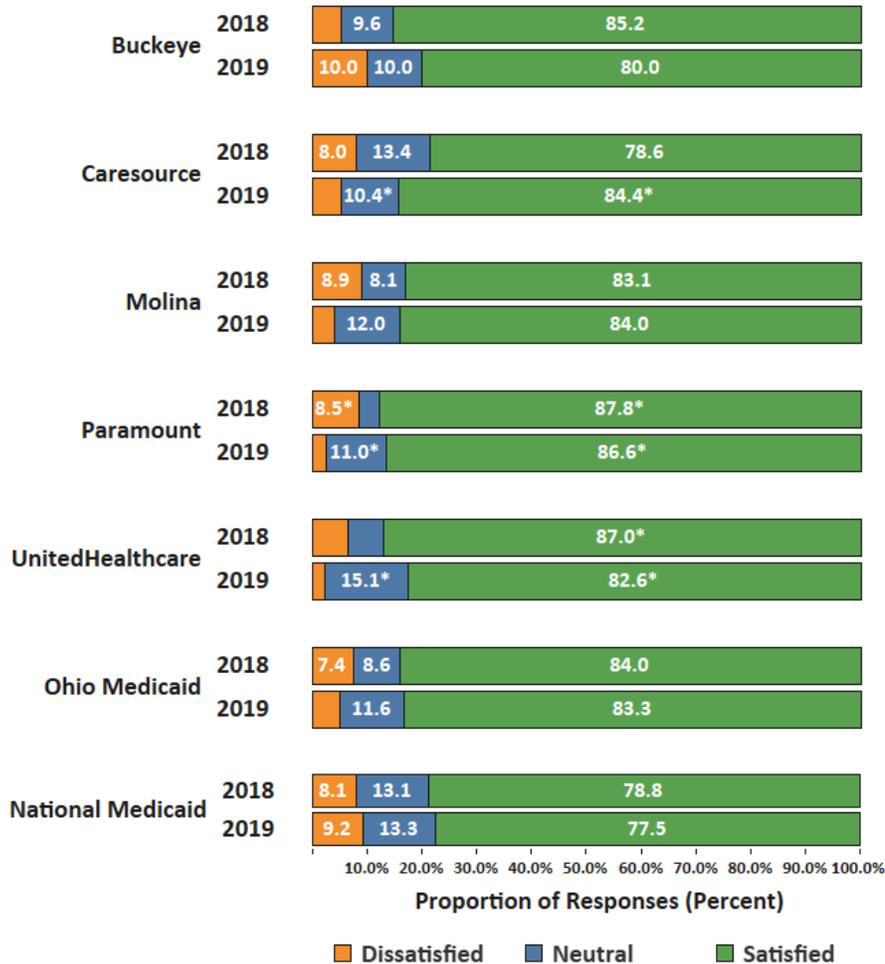
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

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

Question 23 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often it was easy obtaining special therapy for their child. Figure 4-73 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-73: Child Access to Specialized Services: Problem Obtaining Special Therapy Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

\*Caution should be taken when interpreting these results as responses were below 100.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

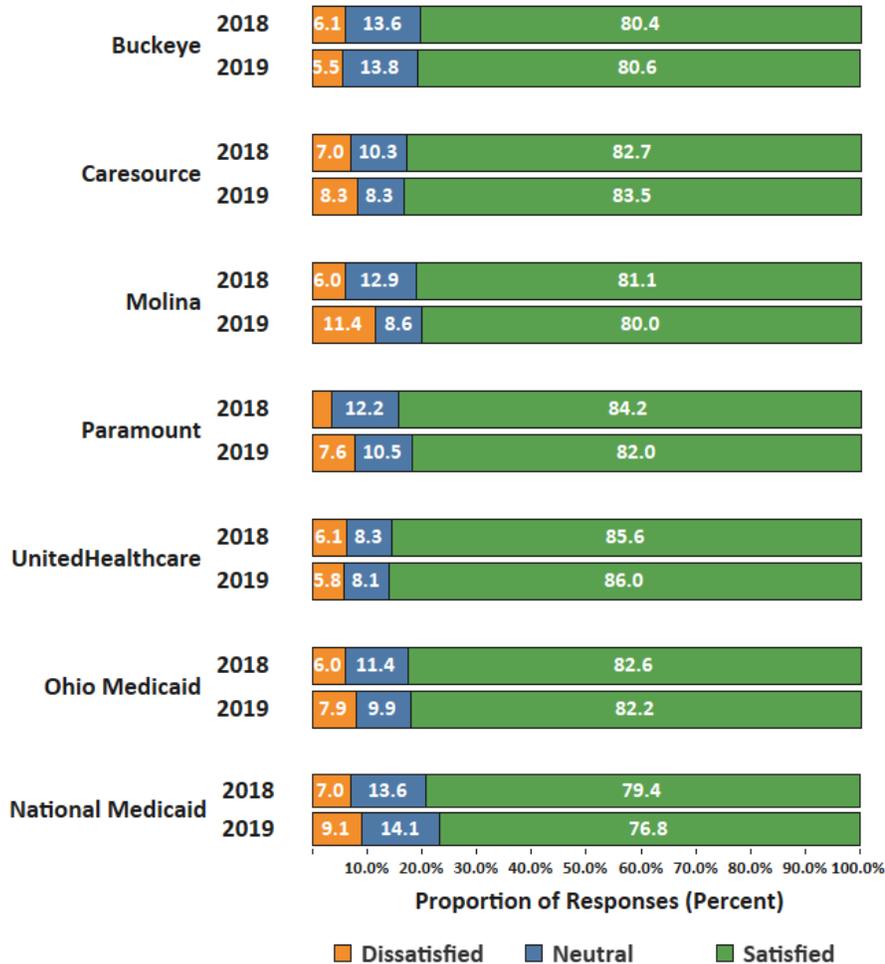
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

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

Question 26 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often it was easy obtaining treatment or counseling for their child. Figure 4-74 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-74: Child Access to Specialized Services: Problem Obtaining Treatment or Counseling Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

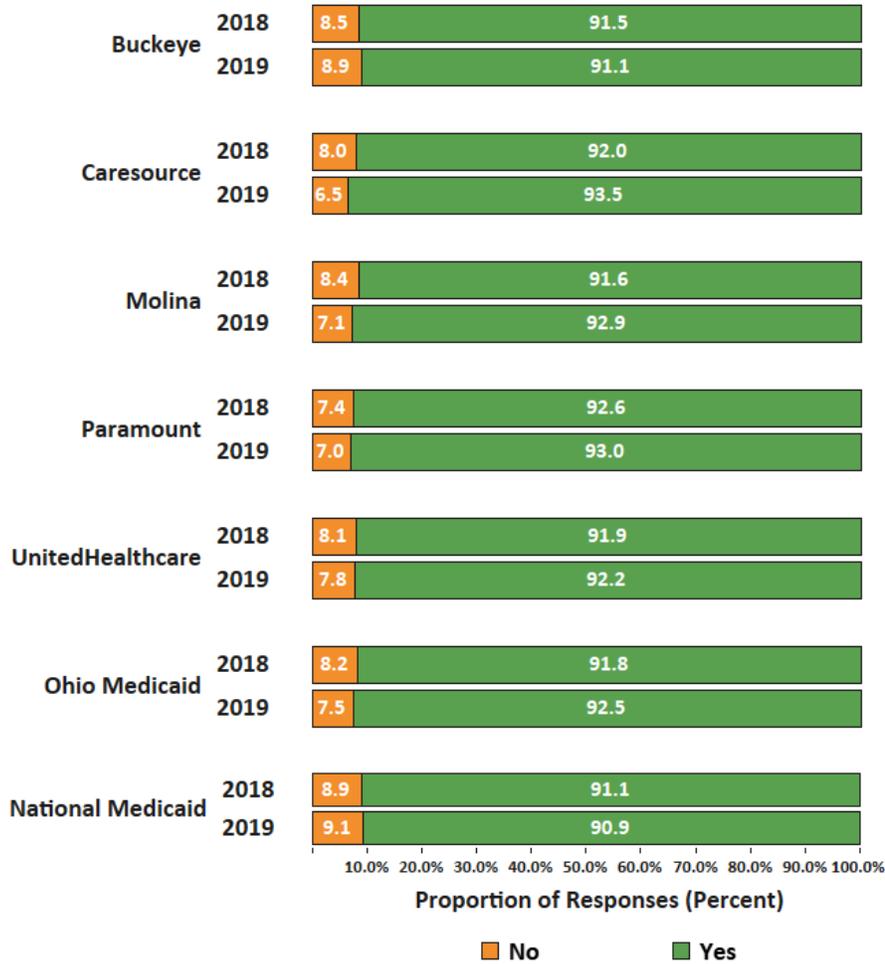
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### 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 38, 43, and 44 in the CAHPS Child Medicaid Health Plan Survey), responses were classified into two categories: No and Yes. Figure 4-75 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-75: Child FCC: Personal Doctor Who Knows Child Composite Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

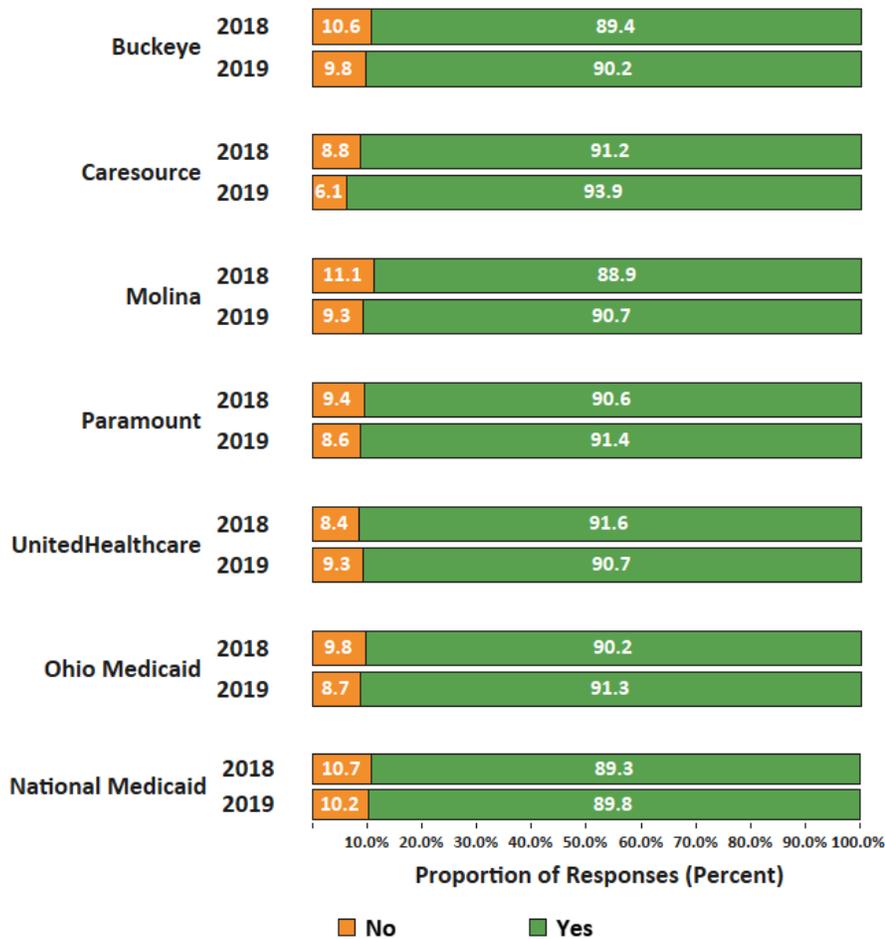
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

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

Question 38 in the CAHPS Child Medicaid Health Plan Survey asked whether the child’s personal doctor talked with the parent or caretaker about how the child was feeling, growing, or behaving. Figure 4-76 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-76: Child FCC: Personal Doctor Who Knows Child: Talked About How Child Feeling, Growing, or Behaving Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

**Comparative Analysis**

Overall, there were no statistically significant differences observed for this measure.

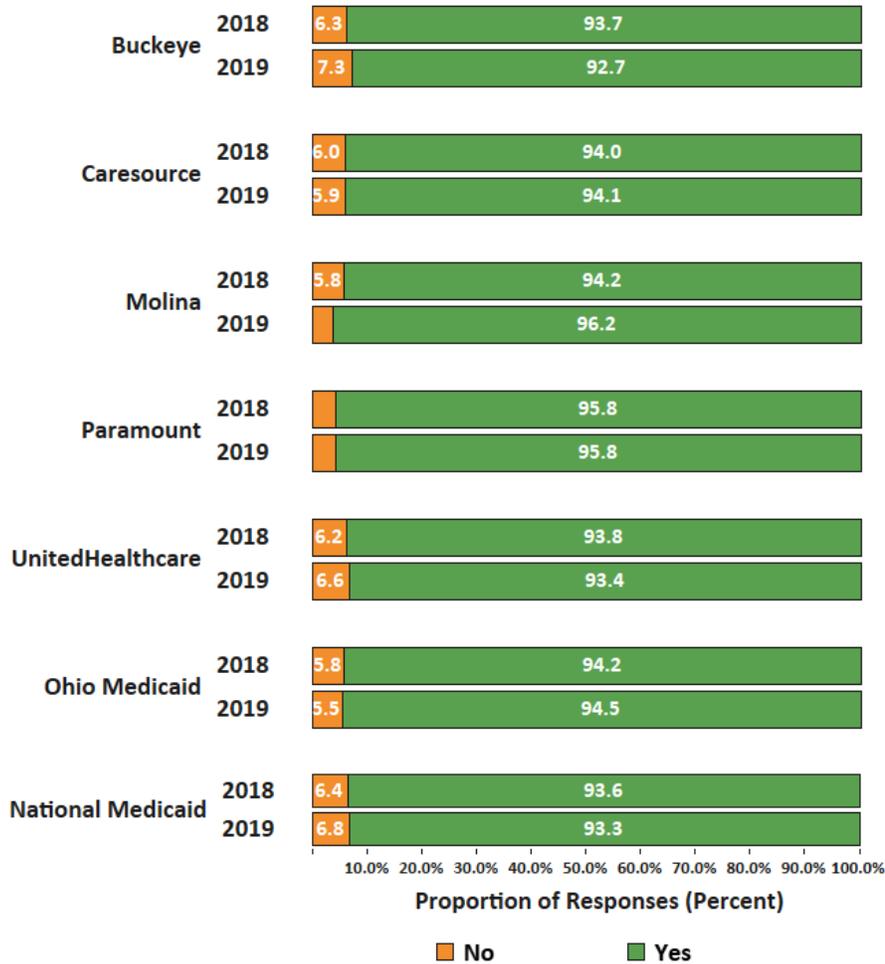
**Trending Analysis**

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

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

Question 43 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 4-77 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-77: Child FCC: Personal Doctor Who Knows Child Understands How Health Conditions Affect Child's Life Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

**Comparative Analysis**

Overall, there were no statistically significant differences observed for this measure.

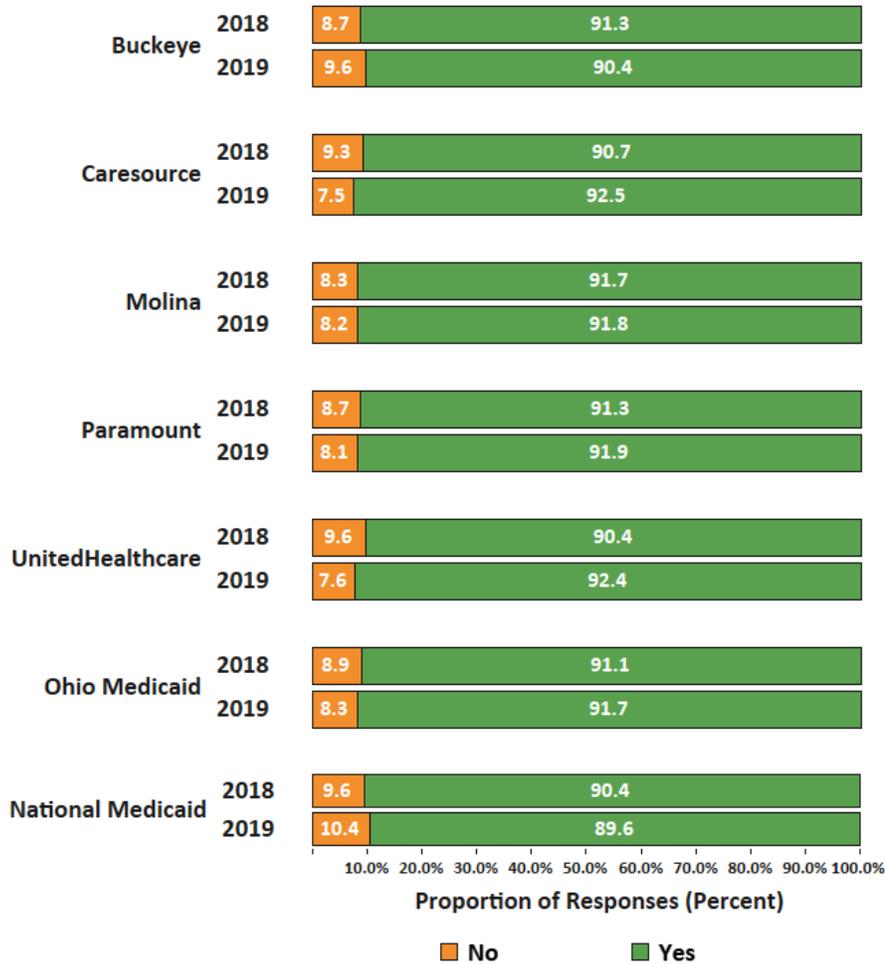
**Trending Analysis**

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

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

Question 44 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 4-78 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-78: Child FCC: Personal Doctor Who Knows Child Understands How Health Conditions Affect Family's Life Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

**Comparative Analysis**

Overall, there were no statistically significant differences observed for this measure.

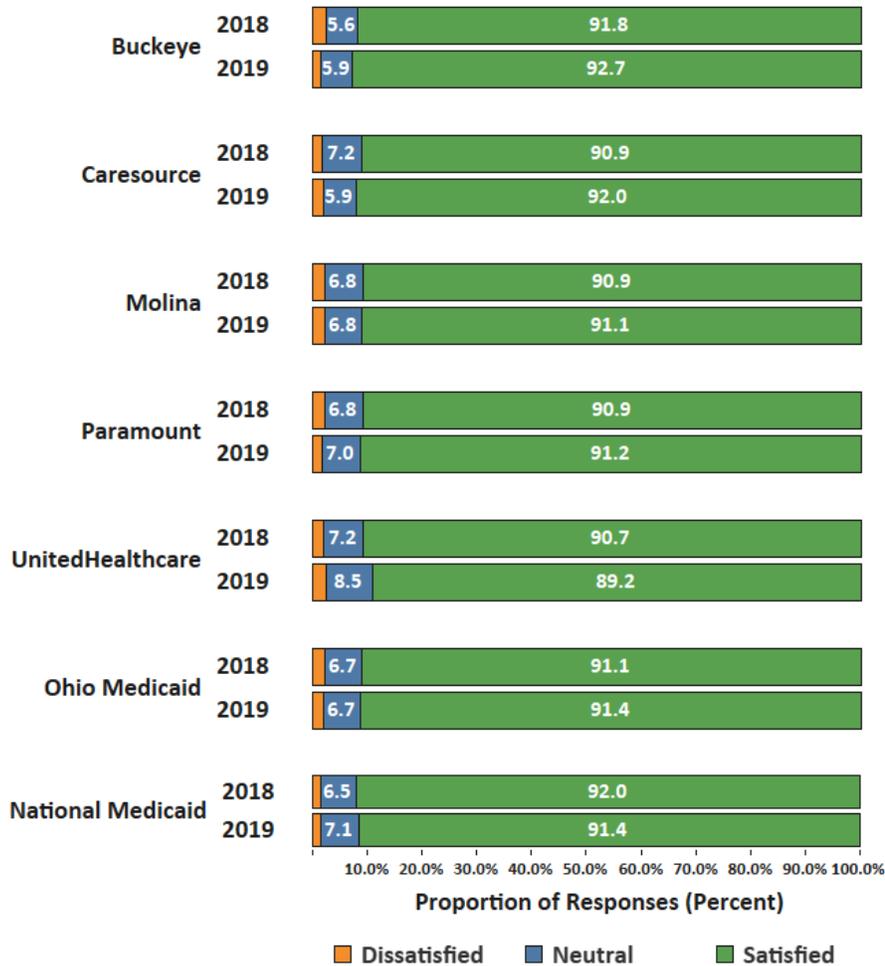
**Trending Analysis**

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### FCC: Getting Needed Information

Question 9 in the CAHPS Child Medicaid Health Plan Survey asked the parents or caretakers of child members often their questions were answered by doctors or other health providers. For this question, responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 4-79 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-79: Child FCC: Getting Needed Information Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

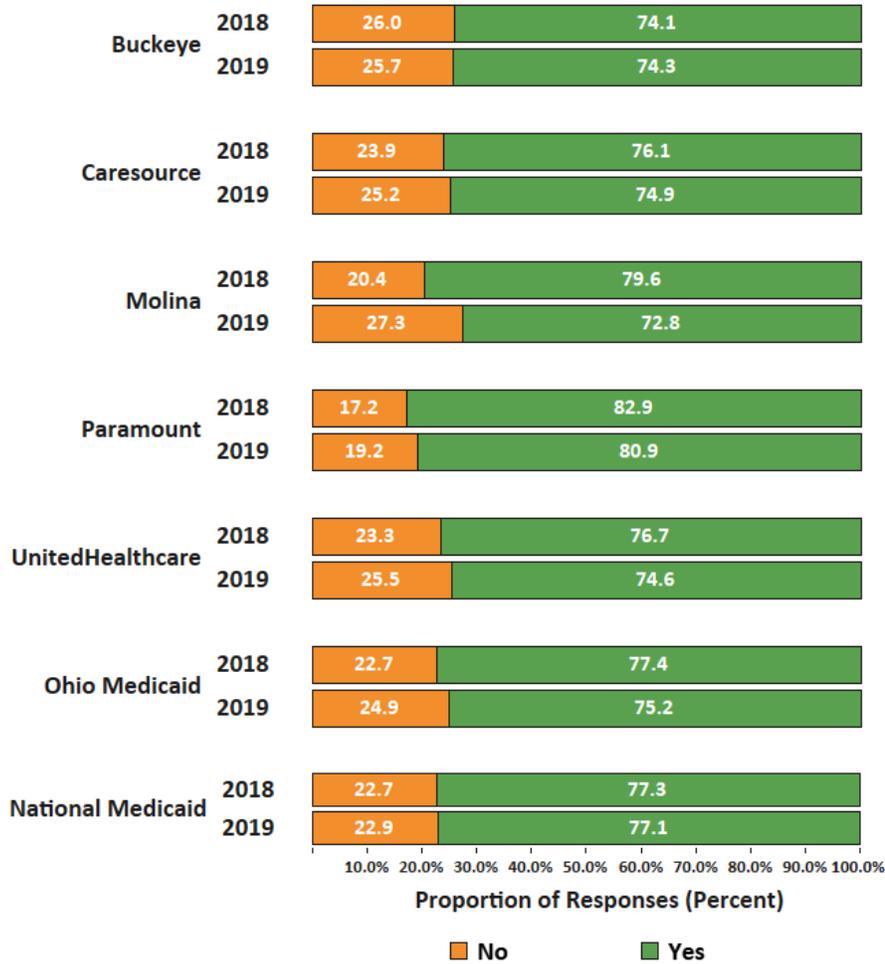
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### 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 18 and 29 in the CAHPS Child Medicaid Health Plan Survey), responses were classified into two categories: No and Yes. Figure 4-80 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-80: Child Coordination of Care for CCC Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population’s score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population’s score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

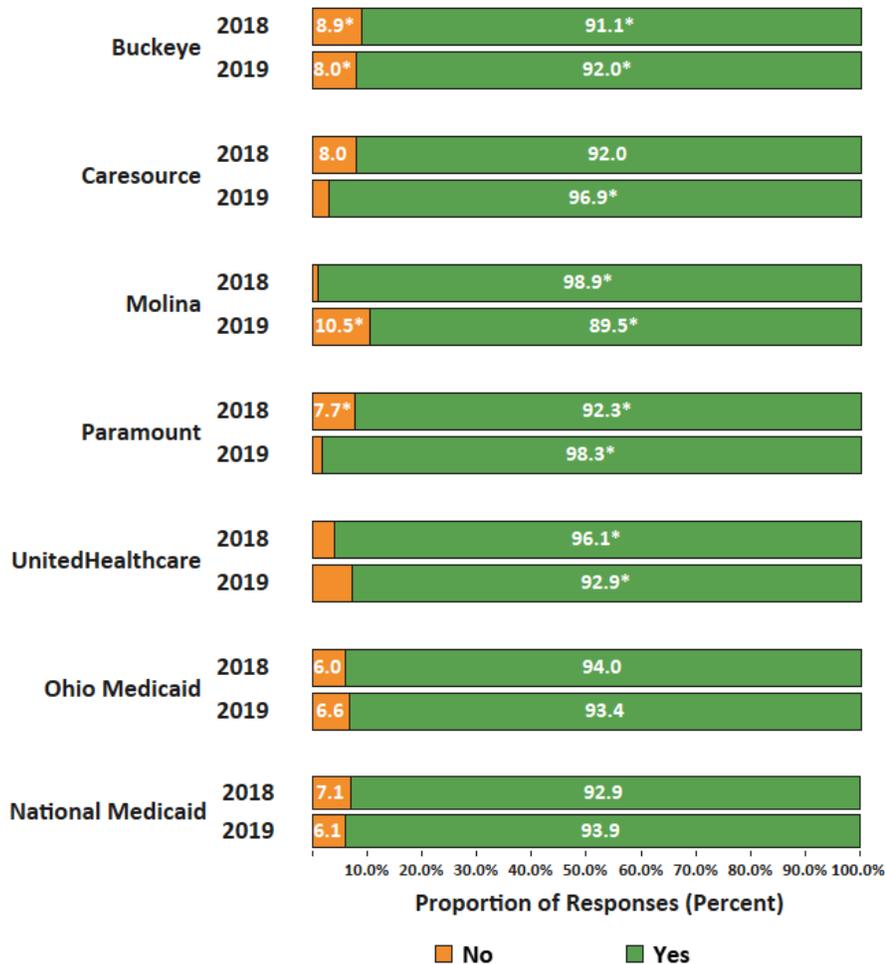
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Coordination of Care for Children with Chronic Conditions: Received Help in Contacting School or Daycare

Question 18 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 4-81 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-81: Child Coordination of Care for CCC: Child Received Help in Contacting School or Daycare Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population’s score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population’s score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years’ visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

\*Caution should be taken when interpreting these results as responses were below 100.

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

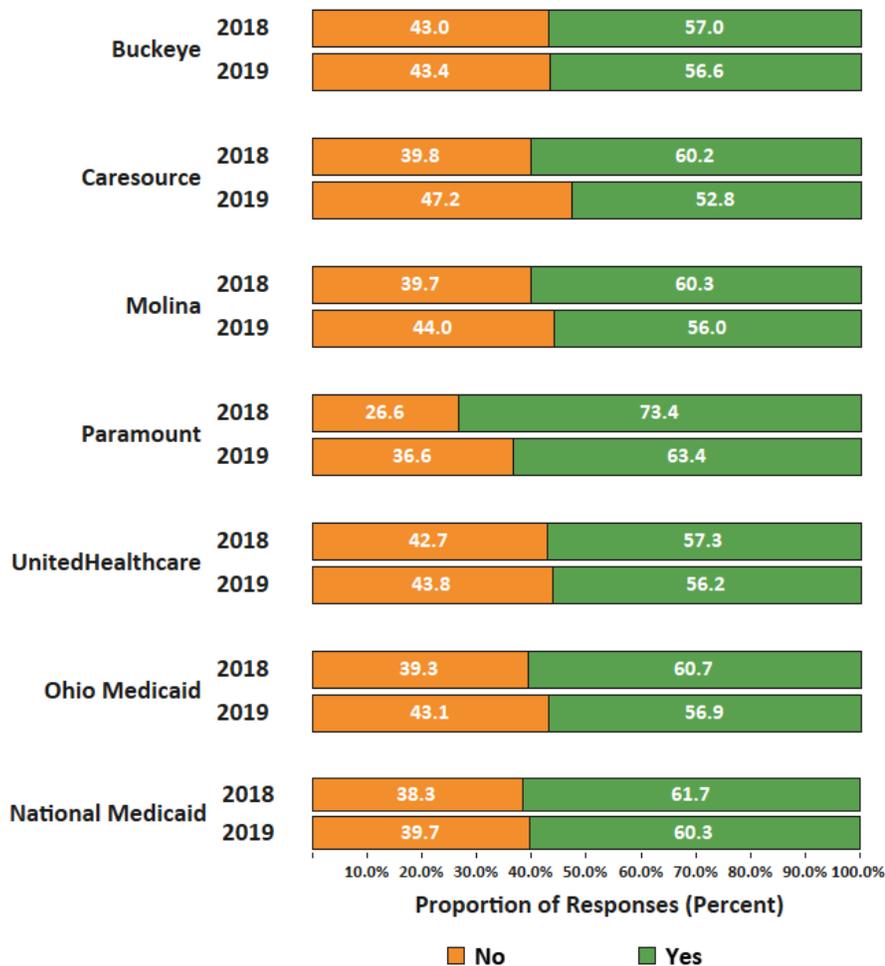
Overall, there was one statistically significant difference between scores in 2019 and scores in 2018 for this measure.

- Molina’s score was significantly lower in 2019 than in 2018.

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

Question 29 in the CAHPS Child Medicaid Health Plan Survey asked the 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 4-82 depicts the percentage of respondents in each of the response categories for the child population.

Figure 4-82: Child Coordination of Care for CCC: Health Plan or Doctors Helped Coordinate Child's Care Response Category Percentages



### Statistical Significance Notes:

- ↑ Indicates the score for the plan is significantly higher than the Ohio Medicaid score for 2019
- ↓ Indicates the score for the plan is significantly lower than the Ohio Medicaid score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

The values reported in the above visuals include both the general child and children with chronic conditions populations. In prior years' visuals, values represented only the general child population for the five health plans and Ohio Medicaid.

## Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

## Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

## Priority Areas for Quality Improvement

To determine potential survey items for quality improvement, IPRO conducted a priority areas analysis. The priority areas analysis focused on the following three global ratings:

- Rating of Health Plan
- Rating of All Health Care
- Rating of Personal Doctor

The analysis provides information on (1) how well the health plan/program is performing on the survey item (i.e., question), and (2) how important the item is to overall member experience.

“Priority areas” are defined as those survey items that (1) have a problem score that is greater than or equal to the health plan’s/program’s median problem score for all items examined, and (2) have a correlation that is greater than or equal to the health plan’s/program’s median correlation for all items examined. Please refer to Appendix A: Priority Matrix Data for a complete list of problem scores and correlation coefficients calculated for each rating by program/plan. For additional information on the assignment of problem scores, please refer to the *2019 Ohio Medicaid Managed Care Program CAHPS® Member Experience Survey Methodology Report*.

Table 4-4 presents the individual survey questions evaluated for the three global ratings to determine priority areas for the Ohio Medicaid Managed Care Program and each MCP.

Table 4-4: Correlation Matrix

Adult Question Number	Child Question Number	Question Language
Q4	Q4	In the last 6 months, when you/your child needed care right away, how often did you/your child get care as soon you/he or she needed?
Q6	Q6	<i>Adult:</i> In the last 6 months, how often did you get an appointment for a check-up or routine care a doctor’s office or clinic as soon as you needed? <i>Child:</i> In the last 6 months, when you made an appointment for a check-up or routine care for your child at a doctor’s office or clinic, how often did you get an appointment as soon as your child needed?
Q10	Q11	Did you and a doctor or other health provider talk about the reasons you might want to take a medicine/you might want your child to take a medicine?
Q11	Q12	Did you and a doctor or other health provider talk about the reasons you might not want to take a medicine/you might not want your child to take a medicine?
Q12	Q13	When you talked about (your child) starting or stopping a prescription medicine, did a doctor other health provider ask you what you thought was best for you/your child?
Q14	Q15	In the last 6 months, how often was it easy to get the care, tests, or treatment you/your child needed?
Q17	Q32	In the last 6 months, how often did your/your child’s personal doctor explain things (about your child’s health) in a way that was easy to understand?
Q18	Q33	In the last 6 months, how often did your/your child’s personal doctor listen carefully to you?
Q19	Q34	In the last 6 months, how often did your/your child’s personal doctor show respect for what you had to say?
Q20	Q37	In the last 6 months, how often did your/your child’s personal doctor spend enough time with you/your child?
Q25	Q46	In the last 6 months, how often did you get an appointment (for your child) to see a specialist as soon as you needed?

Adult Question Number	Child Question Number	Question Language
Q31	Q50	<i>Adult:</i> In the last 6 months, how often did your health plan's customer service give you the information or help you needed? <i>Child:</i> In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed?
Q32	Q51	<i>Adult:</i> In the last 6 months, how often did your health plan's customer service staff treat you with courtesy and respect? <i>Child:</i> In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect?

Table 4-5 through Table 4-7 depict those survey items identified for each of the three measures (i.e., Rating of Health Plan, Rating of All Health Care, and Rating of Personal Doctor) as being priority areas for the Ohio Medicaid Managed Care Program for the adult and general child populations.

Table 4-5: Summary of Ohio Medicaid Managed Care Program Rating of Health Plan Priority Areas

Adult
Q4. In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?
Q6. In the last 6 months, how often did you get an appointment for a check-up or routine care at a doctor's office or clinic as soon as you needed?
Q14. In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?
Q25. In the last 6 months, how often did you get an appointment to see a specialist as soon as you needed?
Q31. In the last 6 months, how often did your health plan's customer service give you the information or help you needed?
General Child
Q15. In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?
Q37. In the last 6 months, how often did your child's personal doctor spend enough time with your child?
Q46. In the last 6 months, how often did you get an appointment for your child to see a specialist as soon as you needed?
Q50. In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed?

Table 4-6: Summary of Ohio Medicaid Managed Care Program Rating of All Health Care Priority Areas

Adult
Q4. In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?
Q14. In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?
Q25. In the last 6 months, how often did you get an appointment to see a specialist as soon as you needed?
General Child
Q6. In the last 6 months, when you made an appointment for a check-up or routine care for your child at a doctor's office or clinic, how often did you get an appointment as soon as your child needed?
Q13. When you talked about your child starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for your child?
Q15. In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?
Q37. In the last 6 months, how often did your child's personal doctor spend enough time with your child?
Q50. In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed?

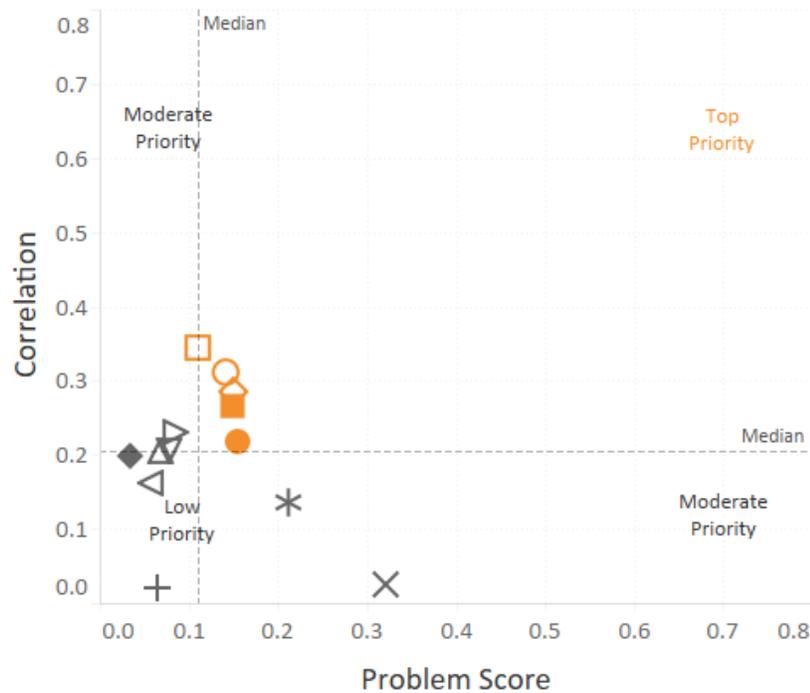
Table 4-7: Summary of Ohio Medicaid Managed Care Program Rating of Personal Doctor Priority Areas

<b>Adult</b>
Q4. In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?
Q14. In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?
Q25. In the last 6 months, how often did you get an appointment to see a specialist as soon as you needed?
<b>General Child</b>
Q13. When you talked about your child starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for your child?
Q15. In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?
Q37. In the last 6 months, how often did your child's personal doctor spend enough time with your child?
Q50. In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed?

Figure 4-83 through Figure 4-118 present priority matrices for each of the three global ratings for the Ohio Medicaid Managed Care Program and each MCP for both the adult and general child populations.

## Rating of Health Plan

Figure 4-83: Adult Program Priority Matrix for Rating of Health Plan



Adult CAHPS Priority Matrix Legend for Rating of Health Plan: Ohio Medicaid

Customer Service	◇ Q31. Received information or help from health plan
	◆ Q32. Health plan customer service treated you with courtesy and respect
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Getting Needed Care	□ Q14. Easy to get treatment needed
	■ Q25. Easy to get appointment as soon as needed
How Well Doctors Communicate	△ Q17. Personal doctor explained things in an understandable way
	▽ Q18. Personal doctor listened carefully
	◁ Q19. Personal doctor showed respect for what you had to say
	▷ Q20. Personal doctor spent enough time with you
Shared Decision Making	+ Q10. Doctor explained reasons to take a medication
	× Q11. Doctor explained reasons not to take a medication
	* Q12. Doctor asked you what you thought was best for you

**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-84: Adult Buckeye Priority Matrix for Rating of Health Plan



Adult CAHPS Priority Matrix Legend for Rating of Health Plan: Buckeye

Customer Service	◇ Q31. Received information or help from health plan
	◆ Q32. Health plan customer service treated you with courtesy and respect
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Getting Needed Care	□ Q14. Easy to get treatment needed
	■ Q25. Easy to get appointment as soon as needed
How Well Doctors Communicate	△ Q17. Personal doctor explained things in an understandable way
	▽ Q18. Personal doctor listened carefully
	◁ Q19. Personal doctor showed respect for what you had to say
	▷ Q20. Personal doctor spent enough time with you
Shared Decision Making	+ Q10. Doctor explained reasons to take a medication
	× Q11. Doctor explained reasons not to take a medication
	* Q12. Doctor asked you what you thought was best for you

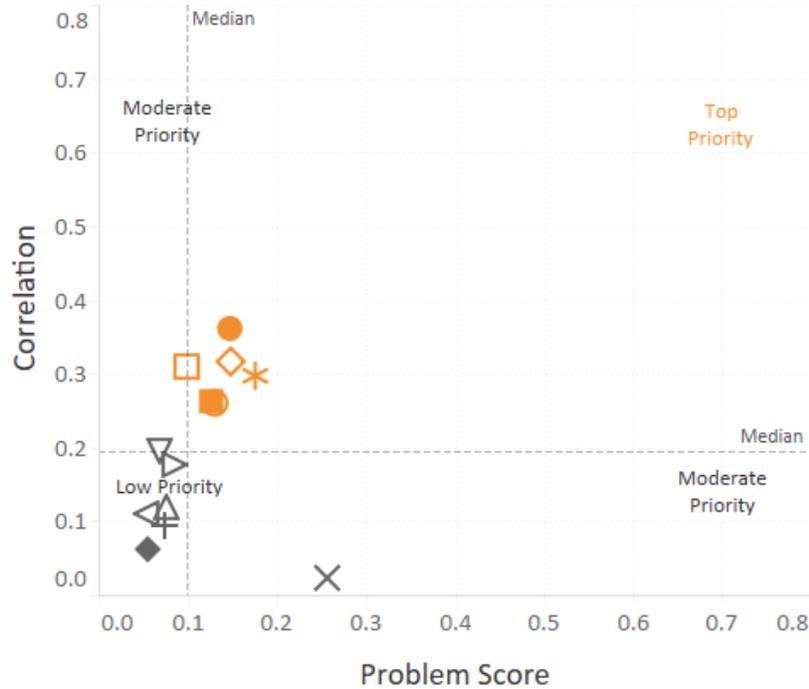
Note:

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-85: Adult CareSource Priority Matrix for Rating of Health Plan



Adult CAHPS Priority Matrix Legend for Rating of Health Plan: CareSource

Customer Service	◇ Q31. Received information or help from health plan
	◆ Q32. Health plan customer service treated you with courtesy and respect
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Getting Needed Care	□ Q14. Easy to get treatment needed
	■ Q25. Easy to get appointment as soon as needed
How Well Doctors Communicate	△ Q17. Personal doctor explained things in an understandable way
	▽ Q18. Personal doctor listened carefully
	◁ Q19. Personal doctor showed respect for what you had to say
	▷ Q20. Personal doctor spent enough time with you
Shared Decision Making	+ Q10. Doctor explained reasons to take a medication
	× Q11. Doctor explained reasons not to take a medication
	* Q12. Doctor asked you what you thought was best for you

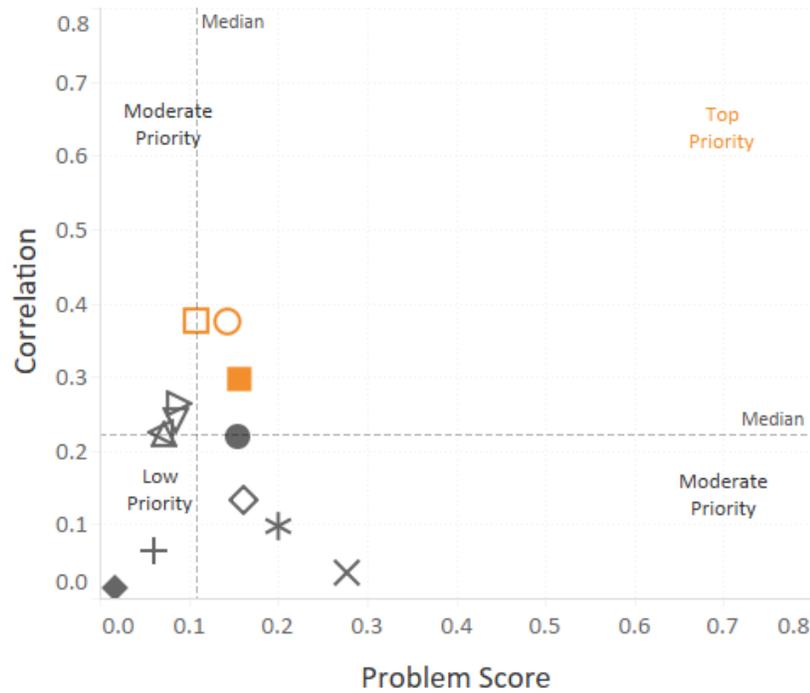
**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-86: Adult Molina Priority Matrix for Rating of Health Plan



Adult CAHPS Priority Matrix Legend for Rating of Health Plan: Molina

Customer Service	◇	Q31. Received information or help from health plan
	◆	Q32. Health plan customer service treated you with courtesy and respect
Getting Care Quickly	○	Q4. Got care as soon as needed
	●	Q6. Got an appointment as soon as needed
Getting Needed Care	□	Q14. Easy to get treatment needed
	■	Q25. Easy to get appointment as soon as needed
How Well Doctors Communicate	△	Q17. Personal doctor explained things in an understandable way
	▽	Q18. Personal doctor listened carefully
	◁	Q19. Personal doctor showed respect for what you had to say
	▷	Q20. Personal doctor spent enough time with you
Shared Decision Making	+	Q10. Doctor explained reasons to take a medication
	×	Q11. Doctor explained reasons not to take a medication
	*	Q12. Doctor asked you what you thought was best for you

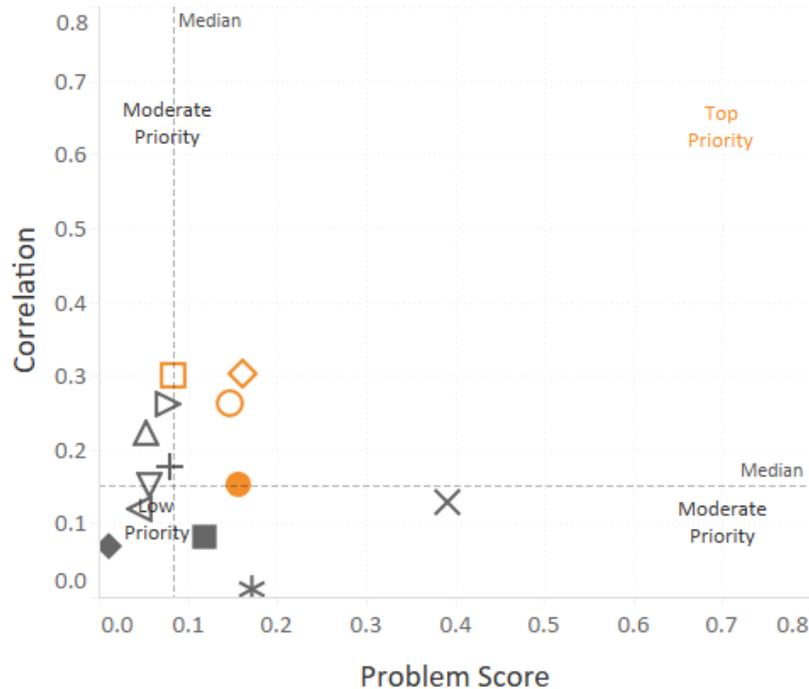
Note:

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-87: Adult Paramount Priority Matrix for Rating of Health Plan



Adult CAHPS Priority Matrix Legend for Rating of Health Plan: Paramount

Customer Service	◇ Q31. Received information or help from health plan
	◆ Q32. Health plan customer service treated you with courtesy and respect
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Getting Needed Care	□ Q14. Easy to get treatment needed
	■ Q25. Easy to get appointment as soon as needed
How Well Doctors Communicate	△ Q17. Personal doctor explained things in an understandable way
	▽ Q18. Personal doctor listened carefully
	◁ Q19. Personal doctor showed respect for what you had to say
	▷ Q20. Personal doctor spent enough time with you
Shared Decision Making	+ Q10. Doctor explained reasons to take a medication
	× Q11. Doctor explained reasons not to take a medication
	* Q12. Doctor asked you what you thought was best for you

**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-88: Adult UnitedHealthcare Priority Matrix for Rating of Health Plan



Adult CAHPS Priority Matrix Legend for Rating of Health Plan: UnitedHealthcare

Customer Service	◇ Q31. Received information or help from health plan *
	◆ Q32. Health plan customer service treated you with courtesy and respect *
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Getting Needed Care	□ Q14. Easy to get treatment needed
	■ Q25. Easy to get appointment as soon as needed
How Well Doctors Communicate	△ Q17. Personal doctor explained things in an understandable way
	▽ Q18. Personal doctor listened carefully
	◁ Q19. Personal doctor showed respect for what you had to say
	▷ Q20. Personal doctor spent enough time with you
Shared Decision Making	+ Q10. Doctor explained reasons to take a medication
	× Q11. Doctor explained reasons not to take a medication
	* Q12. Doctor asked you what you thought was best for you

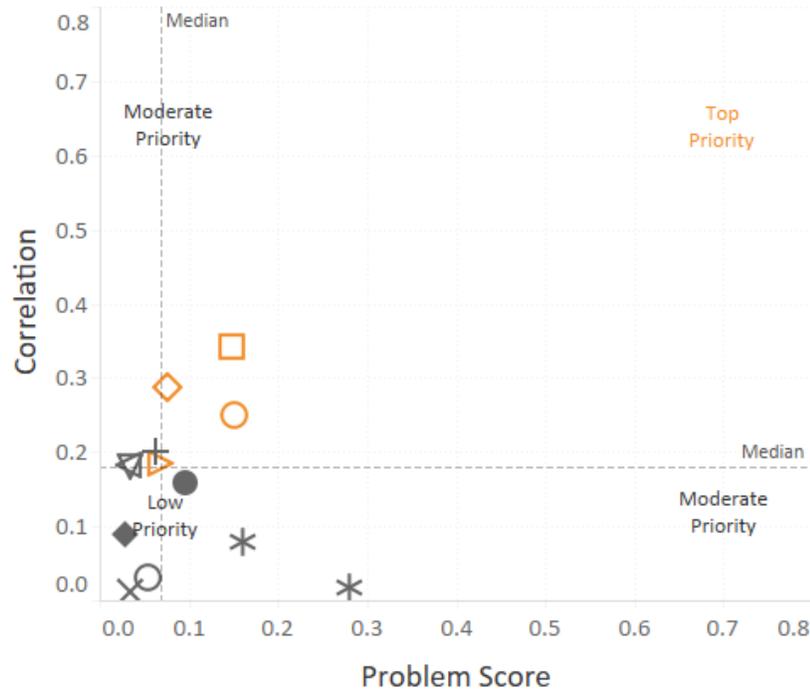
Note:

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-89: Child Program Priority Matrix for Rating of Health Plan



Child CAHPS Priority Matrix Legend for Rating of Health Plan: Ohio Medicaid

13	* Q13. Doctor asked you what you thought was best for you
15	◇ Q15. Easy to get treatment needed
33	▽ Q33. Personal doctor listened carefully
34	◁ Q34. Personal doctor showed respect for what you had to say
37	▷ Q37. Personal doctor spent enough time with you
46	○ Q46. Easy to get appointment as soon as needed
50	□ Q50. Received information or help from health plan
51	+ Q51. Health plan customer service treated you with courtesy and respect
Customer Service	◆ Q32. Personal doctor explained things in an understandable way
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Shared Decision Making	× Q11. Doctor explained reasons to take a medication
	* Q12. Doctor explained reasons not to take a medication

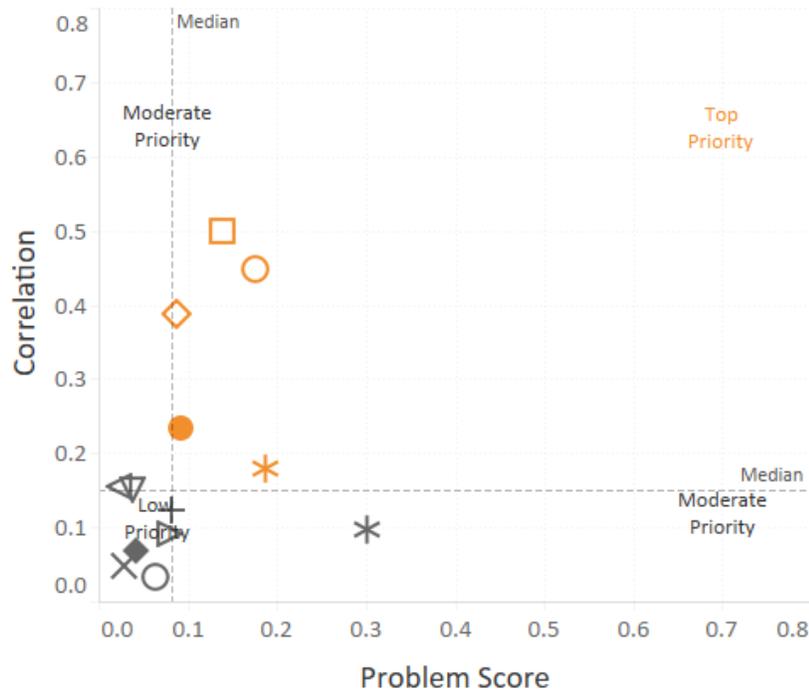
**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-90: Child Buckeye Priority Matrix for Rating of Health Plan



Child CAHPS Priority Matrix Legend for Rating of Health Plan: Buckeye

13	✱	Q13. Doctor asked you what you thought was best for you
15	◇	Q15. Easy to get treatment needed
33	▽	Q33. Personal doctor listened carefully
34	◁	Q34. Personal doctor showed respect for what you had to say
37	▷	Q37. Personal doctor spent enough time with you
46	○	Q46. Easy to get appointment as soon as needed *
50	□	Q50. Received information or help from health plan
51	+	Q51. Health plan customer service treated you with courtesy and respect
Customer Service	◆	Q32. Personal doctor explained things in an understandable way
Getting Care Quickly	○	Q4. Got care as soon as needed
	●	Q6. Got an appointment as soon as needed
Shared Decision Making	✕	Q11. Doctor explained reasons to take a medication
	✱	Q12. Doctor explained reasons not to take a medication

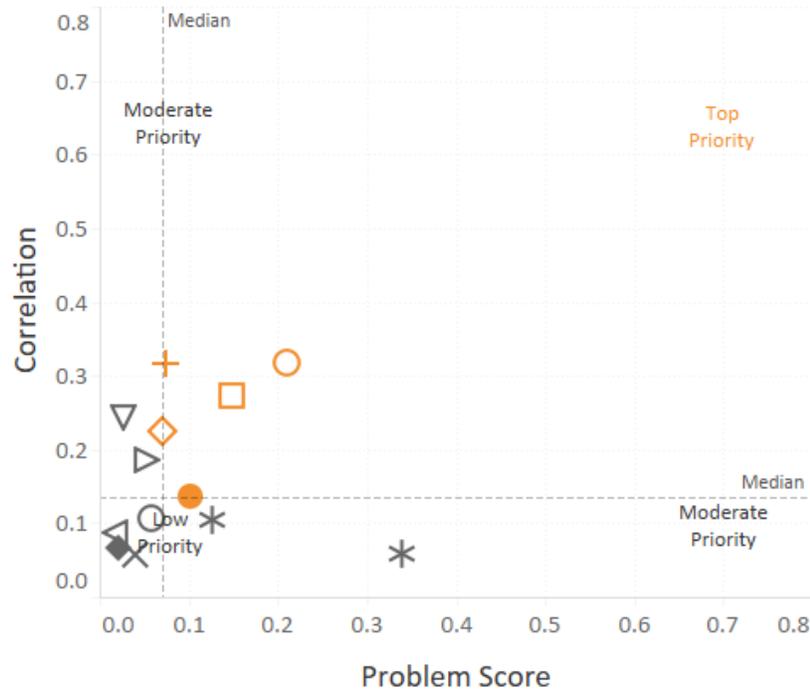
Note:

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-91: Child CareSource Priority Matrix for Rating of Health Plan



Child CAHPS Priority Matrix Legend for Rating of Health Plan: CareSource

13	* Q13. Doctor asked you what you thought was best for you
15	◇ Q15. Easy to get treatment needed
33	▽ Q33. Personal doctor listened carefully
34	◁ Q34. Personal doctor showed respect for what you had to say
37	▷ Q37. Personal doctor spent enough time with you
46	○ Q46. Easy to get appointment as soon as needed *
50	□ Q50. Received information or help from health plan
51	+ Q51. Health plan customer service treated you with courtesy and respect
Customer Service	◆ Q32. Personal doctor explained things in an understandable way
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Shared Decision Making	× Q11. Doctor explained reasons to take a medication
	* Q12. Doctor explained reasons not to take a medication

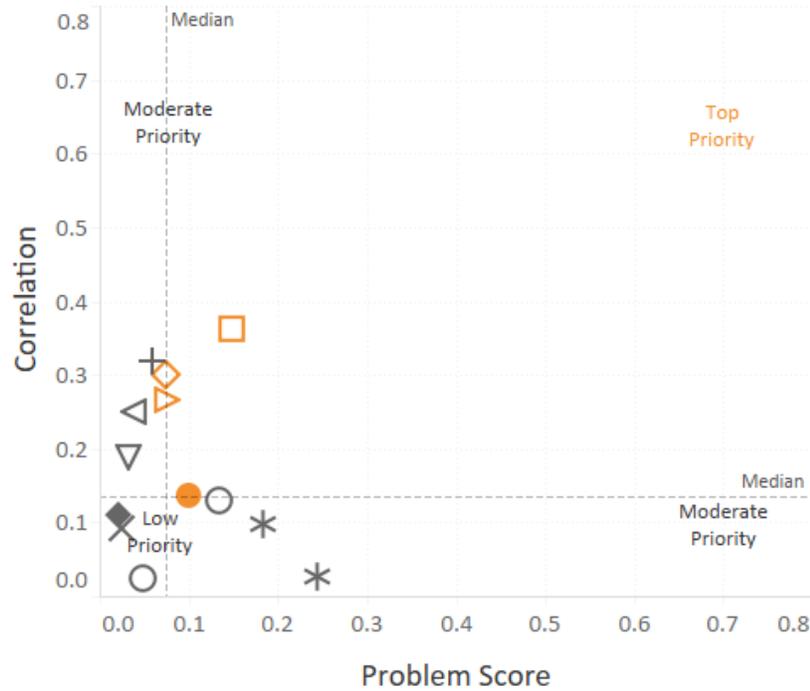
**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-92: Child Molina Priority Matrix for Rating of Health Plan



Child CAHPS Priority Matrix Legend for Rating of Health Plan: Molina

13	* Q13. Doctor asked you what you thought was best for you
15	◇ Q15. Easy to get treatment needed
33	▽ Q33. Personal doctor listened carefully
34	◁ Q34. Personal doctor showed respect for what you had to say
37	▷ Q37. Personal doctor spent enough time with you
46	○ Q46. Easy to get appointment as soon as needed
50	□ Q50. Received information or help from health plan
51	+ Q51. Health plan customer service treated you with courtesy and respect
Customer Service	◆ Q32. Personal doctor explained things in an understandable way
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Shared Decision Making	× Q11. Doctor explained reasons to take a medication
	* Q12. Doctor explained reasons not to take a medication

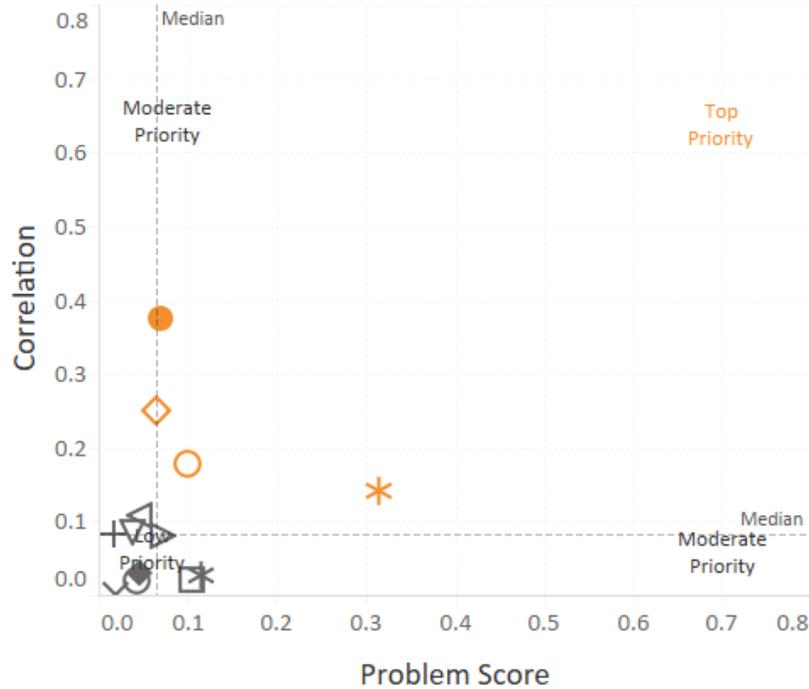
Note:

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-93: Child Paramount Priority Matrix for Rating of Health Plan



Child CAHPS Priority Matrix Legend for Rating of Health Plan: Paramount

13	* Q13. Doctor asked you what you thought was best for you *
15	◇ Q15. Easy to get treatment needed
33	▽ Q33. Personal doctor listened carefully
34	◁ Q34. Personal doctor showed respect for what you had to say
37	▷ Q37. Personal doctor spent enough time with you
46	○ Q46. Easy to get appointment as soon as needed *
50	□ Q50. Received information or help from health plan *
51	+ Q51. Health plan customer service treated you with courtesy and respect *
Customer Service	◆ Q32. Personal doctor explained things in an understandable way
Getting Care Quickly	○ Q4. Got care as soon as needed *
	● Q6. Got an appointment as soon as needed
Shared Decision Making	× Q11. Doctor explained reasons to take a medication *
	* Q12. Doctor explained reasons not to take a medication *

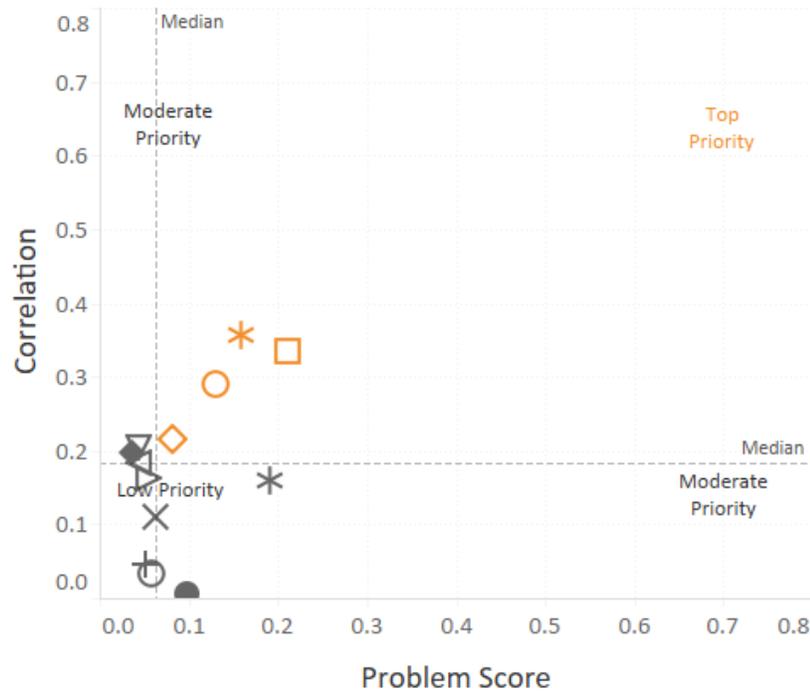
**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-94: Child UnitedHealthcare Priority Matrix for Rating of Health Plan



Child CAHPS Priority Matrix Legend for Rating of Health Plan: UnitedHealthcare

13	✱	Q13. Doctor asked you what you thought was best for you *
15	◇	Q15. Easy to get treatment needed
33	▽	Q33. Personal doctor listened carefully
34	◁	Q34. Personal doctor showed respect for what you had to say
37	▷	Q37. Personal doctor spent enough time with you
46	○	Q46. Easy to get appointment as soon as needed *
50	□	Q50. Received information or help from health plan *
51	+	Q51. Health plan customer service treated you with courtesy and respect *
Customer Service	◆	Q32. Personal doctor explained things in an understandable way
Getting Care Quickly	○	Q4. Got care as soon as needed *
	●	Q6. Got an appointment as soon as needed
Shared Decision Making	×	Q11. Doctor explained reasons to take a medication *
	✱	Q12. Doctor explained reasons not to take a medication *

Note:

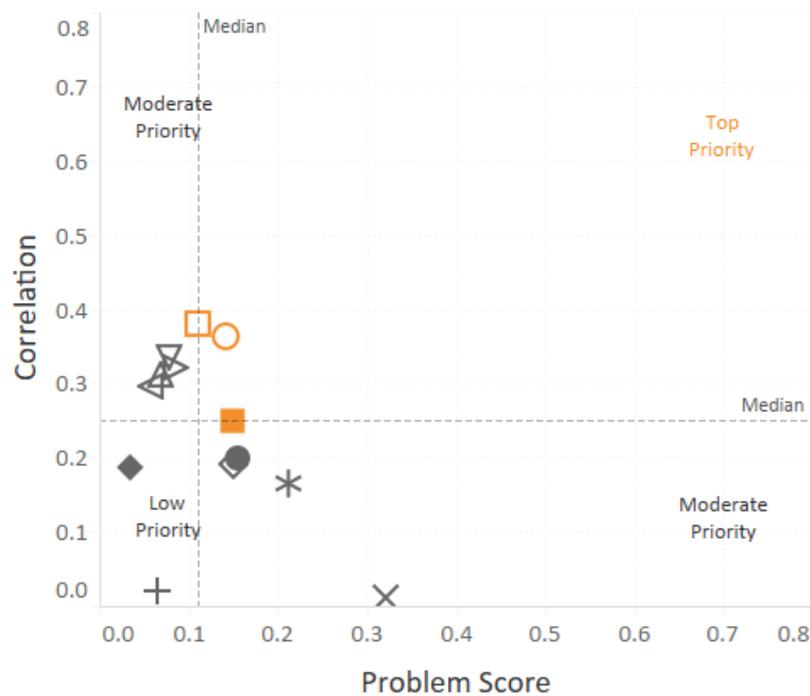
Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

## Rating of All Health Care

Figure 4-95: Adult Program Priority Matrix for Rating of All Health Care



Adult CAHPS Priority Matrix Legend for Rating of Health Care: Ohio Medicaid

Customer Service	◇ Q31. Received information or help from health plan
	◆ Q32. Health plan customer service treated you with courtesy and respect
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Getting Needed Care	□ Q14. Easy to get treatment needed
	■ Q25. Easy to get appointment as soon as needed
How Well Doctors Communicate	△ Q17. Personal doctor explained things in an understandable way
	▽ Q18. Personal doctor listened carefully
	◁ Q19. Personal doctor showed respect for what you had to say
	▷ Q20. Personal doctor spent enough time with you
Shared Decision Making	+ Q10. Doctor explained reasons to take a medication
	× Q11. Doctor explained reasons not to take a medication
	* Q12. Doctor asked you what you thought was best for you

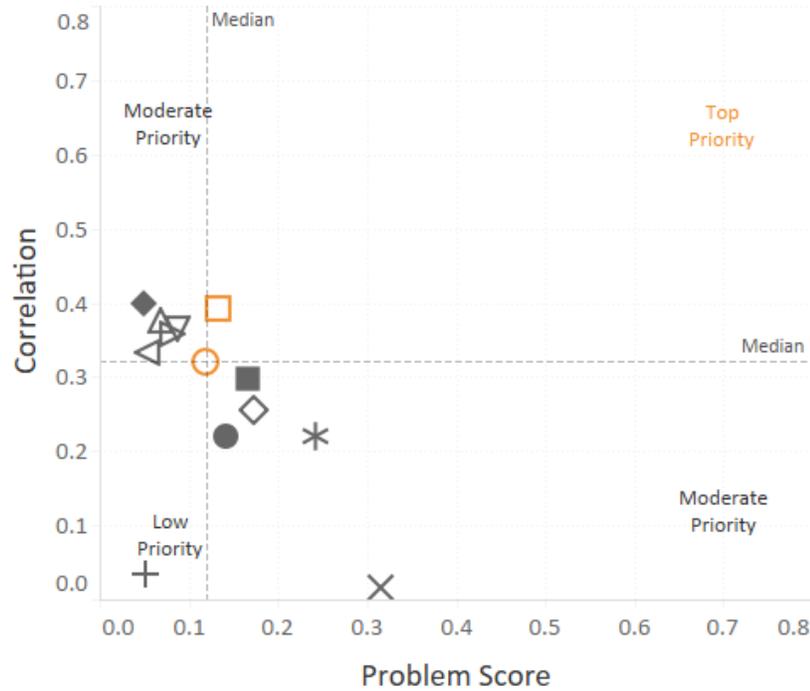
**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-96: Adult Buckeye Priority Matrix for Rating of All Health Care



Adult CAHPS Priority Matrix Legend for Rating of Health Care: Buckeye

Customer Service	◇ Q31. Received information or help from health plan
	◆ Q32. Health plan customer service treated you with courtesy and respect
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Getting Needed Care	□ Q14. Easy to get treatment needed
	■ Q25. Easy to get appointment as soon as needed
How Well Doctors Communicate	△ Q17. Personal doctor explained things in an understandable way
	▽ Q18. Personal doctor listened carefully
	◁ Q19. Personal doctor showed respect for what you had to say
	▷ Q20. Personal doctor spent enough time with you
Shared Decision Making	+ Q10. Doctor explained reasons to take a medication
	× Q11. Doctor explained reasons not to take a medication
	* Q12. Doctor asked you what you thought was best for you

**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-97: Adult CareSource Priority Matrix for Rating of All Health Care



Adult CAHPS Priority Matrix Legend for Rating of Health Care: CareSource

Customer Service	◇ Q31. Received information or help from health plan *
	◆ Q32. Health plan customer service treated you with courtesy and respect *
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Getting Needed Care	□ Q14. Easy to get treatment needed
	■ Q25. Easy to get appointment as soon as needed
How Well Doctors Communicate	△ Q17. Personal doctor explained things in an understandable way
	▽ Q18. Personal doctor listened carefully
	◁ Q19. Personal doctor showed respect for what you had to say
	▷ Q20. Personal doctor spent enough time with you
Shared Decision Making	+ Q10. Doctor explained reasons to take a medication
	× Q11. Doctor explained reasons not to take a medication
	* Q12. Doctor asked you what you thought was best for you

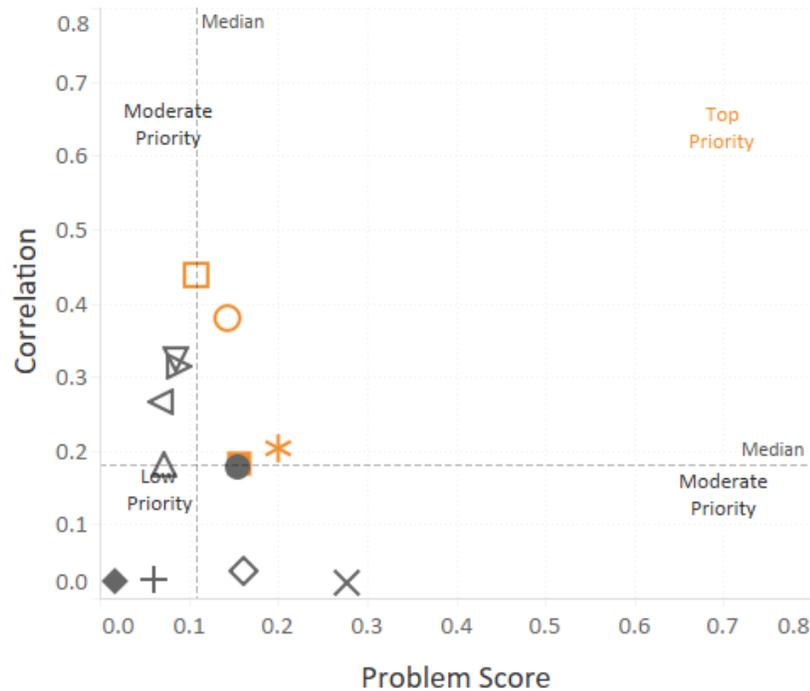
**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-98: Adult Molina Priority Matrix for Rating of All Health Care



Adult CAHPS Priority Matrix Legend for Rating of Health Care: Molina

Customer Service	◇	Q31. Received information or help from health plan *
	◆	Q32. Health plan customer service treated you with courtesy and respect *
Getting Care Quickly	○	Q4. Got care as soon as needed
	●	Q6. Got an appointment as soon as needed
Getting Needed Care	□	Q14. Easy to get treatment needed
	■	Q25. Easy to get appointment as soon as needed
How Well Doctors Communicate	△	Q17. Personal doctor explained things in an understandable way
	▽	Q18. Personal doctor listened carefully
	◁	Q19. Personal doctor showed respect for what you had to say
	▷	Q20. Personal doctor spent enough time with you
Shared Decision Making	+	Q10. Doctor explained reasons to take a medication
	×	Q11. Doctor explained reasons not to take a medication
	*	Q12. Doctor asked you what you thought was best for you

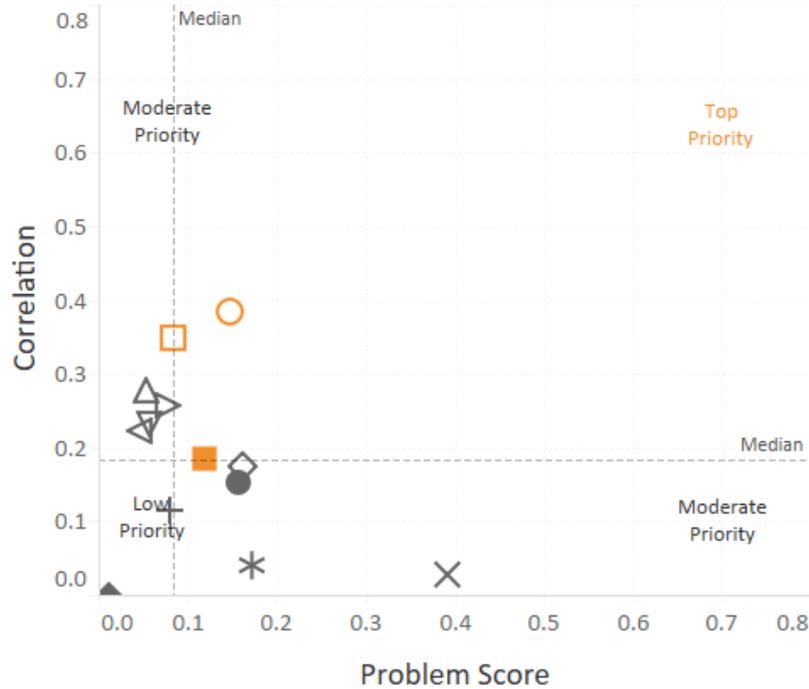
Note:

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-99: Adult Paramount Priority Matrix for Rating of All Health Care



Adult CAHPS Priority Matrix Legend for Rating of Health Care: Paramount

Customer Service	◇ Q31. Received information or help from health plan *
	◆ Q32. Health plan customer service treated you with courtesy and respect *
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Getting Needed Care	□ Q14. Easy to get treatment needed
	■ Q25. Easy to get appointment as soon as needed
How Well Doctors Communicate	△ Q17. Personal doctor explained things in an understandable way
	▽ Q18. Personal doctor listened carefully
	◁ Q19. Personal doctor showed respect for what you had to say
	▷ Q20. Personal doctor spent enough time with you
Shared Decision Making	+ Q10. Doctor explained reasons to take a medication
	× Q11. Doctor explained reasons not to take a medication
	* Q12. Doctor asked you what you thought was best for you

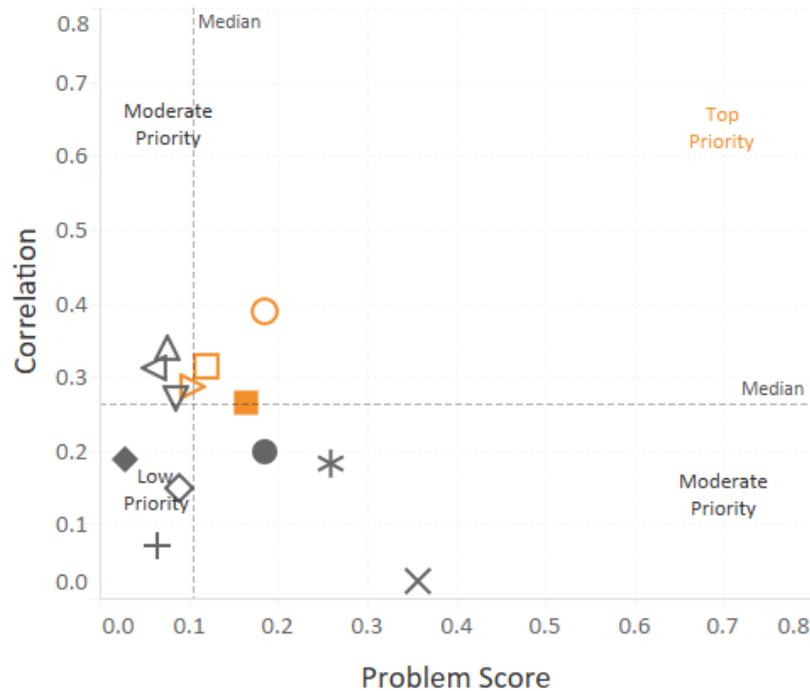
**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-100: Adult UnitedHealthcare Priority Matrix for Rating of All Health Care



Adult CAHPS Priority Matrix Legend for Rating of Health Care: UnitedHealthcare

Customer Service	◇ Q31. Received information or help from health plan *
	◆ Q32. Health plan customer service treated you with courtesy and respect *
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Getting Needed Care	□ Q14. Easy to get treatment needed
	■ Q25. Easy to get appointment as soon as needed
How Well Doctors Communicate	△ Q17. Personal doctor explained things in an understandable way
	▽ Q18. Personal doctor listened carefully
	◁ Q19. Personal doctor showed respect for what you had to say
	▷ Q20. Personal doctor spent enough time with you
Shared Decision Making	+ Q10. Doctor explained reasons to take a medication
	× Q11. Doctor explained reasons not to take a medication
	* Q12. Doctor asked you what you thought was best for you

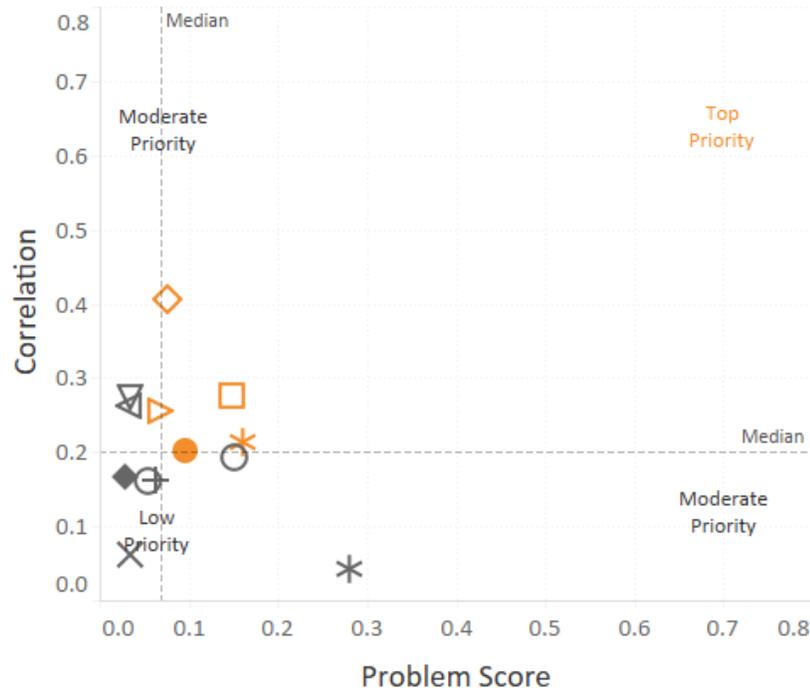
Note:

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-101: Child Program Priority Matrix for Rating of All Health Care



Child CAHPS Priority Matrix Legend for Rating of Health Care: Ohio Medicaid

13	* Q13. Doctor asked you what you thought was best for you
15	◇ Q15. Easy to get treatment needed
33	▽ Q33. Personal doctor listened carefully
34	◁ Q34. Personal doctor showed respect for what you had to say
37	▷ Q37. Personal doctor spent enough time with you
46	○ Q46. Easy to get appointment as soon as needed
50	□ Q50. Received information or help from health plan
51	+ Q51. Health plan customer service treated you with courtesy and respect
Customer Service	◆ Q32. Personal doctor explained things in an understandable way
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Shared Decision Making	× Q11. Doctor explained reasons to take a medication
	* Q12. Doctor explained reasons not to take a medication

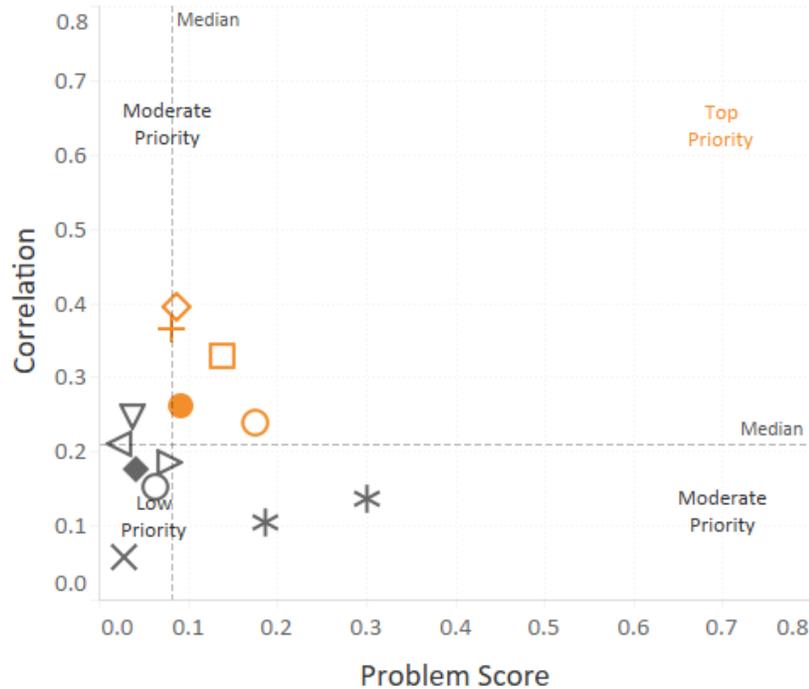
**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-102: Child Buckeye Priority Matrix for Rating of All Health Care



Child CAHPS Priority Matrix Legend for Rating of Health Care: Buckeye

13	* Q13. Doctor asked you what you thought was best for you
15	◇ Q15. Easy to get treatment needed
33	▽ Q33. Personal doctor listened carefully
34	◁ Q34. Personal doctor showed respect for what you had to say
37	▷ Q37. Personal doctor spent enough time with you
46	○ Q46. Easy to get appointment as soon as needed *
50	□ Q50. Received information or help from health plan
51	+ Q51. Health plan customer service treated you with courtesy and respect
Customer Service	◆ Q32. Personal doctor explained things in an understandable way
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Shared Decision Making	× Q11. Doctor explained reasons to take a medication
	* Q12. Doctor explained reasons not to take a medication

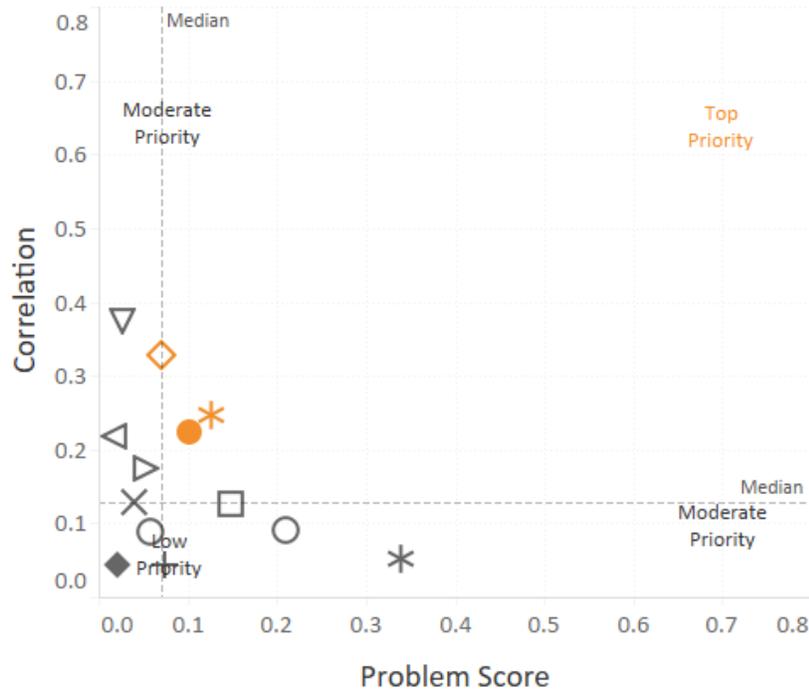
Note:

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-103: Child CareSource Priority Matrix for Rating of All Health Care



Child CAHPS Priority Matrix Legend for Rating of Health Care: CareSource

13	* Q13. Doctor asked you what you thought was best for you
15	◇ Q15. Easy to get treatment needed
33	▽ Q33. Personal doctor listened carefully
34	◁ Q34. Personal doctor showed respect for what you had to say
37	▷ Q37. Personal doctor spent enough time with you
46	○ Q46. Easy to get appointment as soon as needed *
50	□ Q50. Received information or help from health plan *
51	+ Q51. Health plan customer service treated you with courtesy and respect *
Customer Service	◆ Q32. Personal doctor explained things in an understandable way
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Shared Decision Making	× Q11. Doctor explained reasons to take a medication
	* Q12. Doctor explained reasons not to take a medication

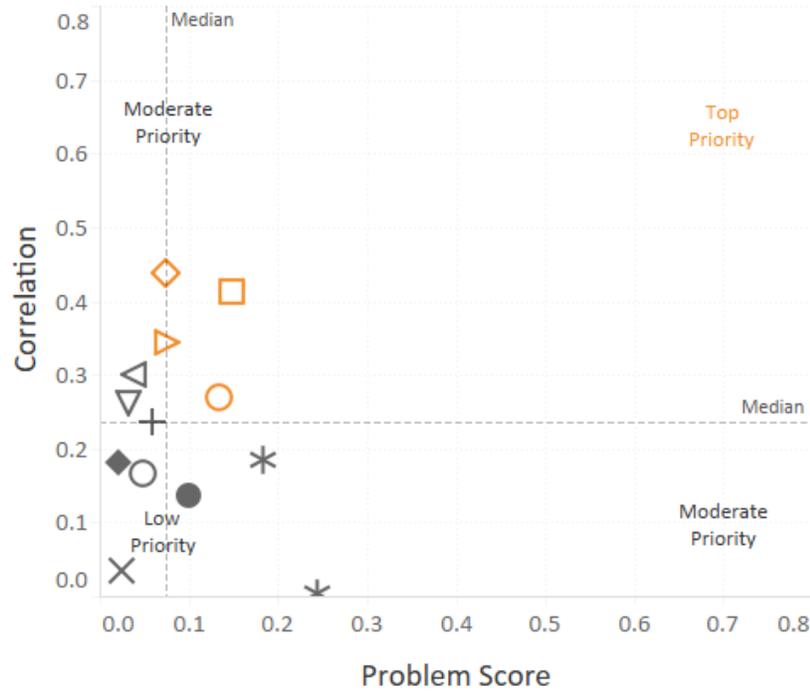
**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-104: Child Molina Priority Matrix for Rating of All Health Care



Child CAHPS Priority Matrix Legend for Rating of Health Care: Molina

13	* Q13. Doctor asked you what you thought was best for you
15	◇ Q15. Easy to get treatment needed
33	▽ Q33. Personal doctor listened carefully
34	◁ Q34. Personal doctor showed respect for what you had to say
37	▷ Q37. Personal doctor spent enough time with you
46	○ Q46. Easy to get appointment as soon as needed
50	□ Q50. Received information or help from health plan
51	+ Q51. Health plan customer service treated you with courtesy and respect
Customer Service	◆ Q32. Personal doctor explained things in an understandable way
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Shared Decision Making	× Q11. Doctor explained reasons to take a medication
	* Q12. Doctor explained reasons not to take a medication

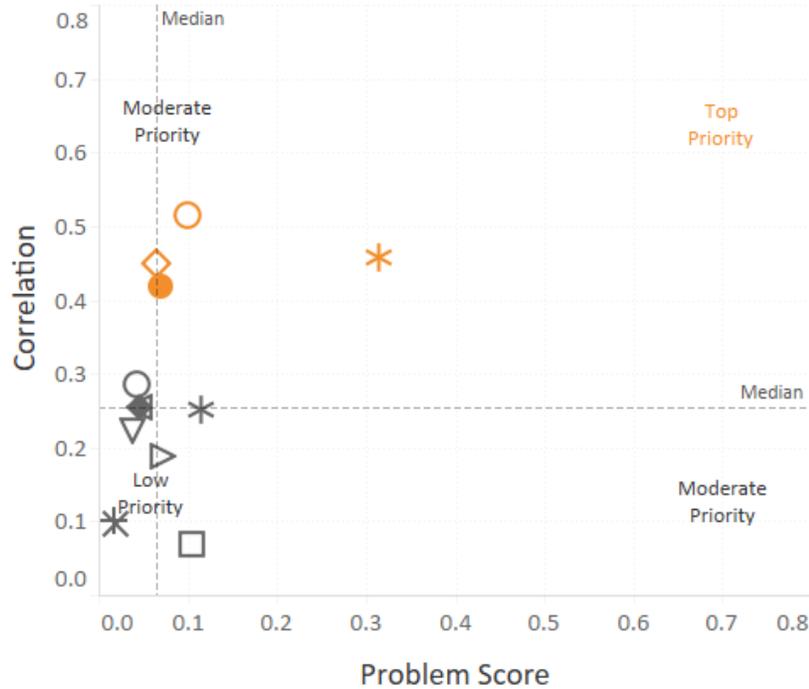
Note:

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-105: Child Paramount Priority Matrix for Rating of All Health Care



Child CAHPS Priority Matrix Legend for Rating of Health Care: Paramount

13	* Q13. Doctor asked you what you thought was best for you *
15	◇ Q15. Easy to get treatment needed
33	▽ Q33. Personal doctor listened carefully
34	◁ Q34. Personal doctor showed respect for what you had to say
37	▷ Q37. Personal doctor spent enough time with you
46	○ Q46. Easy to get appointment as soon as needed *
50	□ Q50. Received information or help from health plan *
51	+ Q51. Health plan customer service treated you with courtesy and respect *
Customer Service	◆ Q32. Personal doctor explained things in an understandable way
Getting Care Quickly	○ Q4. Got care as soon as needed *
	● Q6. Got an appointment as soon as needed
Shared Decision Making	× Q11. Doctor explained reasons to take a medication *
	* Q12. Doctor explained reasons not to take a medication *

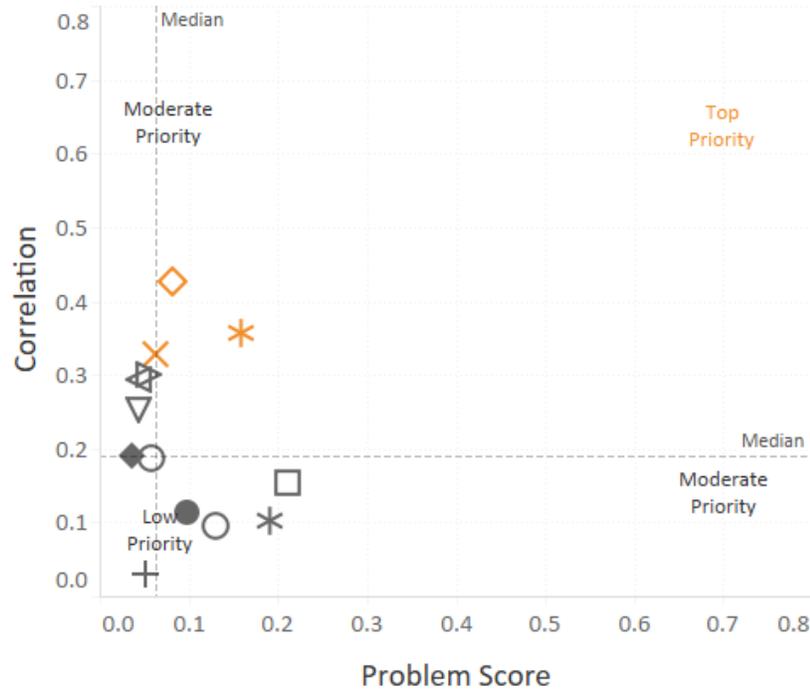
**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-106: Child UnitedHealthcare Priority Matrix for Rating of All Health Care



Child CAHPS Priority Matrix Legend for Rating of Health Care: UnitedHealthcare

13	✱	Q13. Doctor asked you what you thought was best for you *
15	◇	Q15. Easy to get treatment needed
33	▽	Q33. Personal doctor listened carefully
34	◁	Q34. Personal doctor showed respect for what you had to say
37	▷	Q37. Personal doctor spent enough time with you
46	○	Q46. Easy to get appointment as soon as needed *
50	□	Q50. Received information or help from health plan *
51	+	Q51. Health plan customer service treated you with courtesy and respect *
Customer Service	◆	Q32. Personal doctor explained things in an understandable way
Getting Care Quickly	○	Q4. Got care as soon as needed *
	●	Q6. Got an appointment as soon as needed
Shared Decision Making	✕	Q11. Doctor explained reasons to take a medication *
	✱	Q12. Doctor explained reasons not to take a medication *

Note:

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

## Rating of Personal Doctor

Figure 4-107: Adult Program Priority Matrix for Rating of Personal Doctor



Adult CAHPS Priority Matrix Legend for Rating of Personal Doctor: Ohio Medicaid

Customer Service	◇ Q31. Received information or help from health plan
	◆ Q32. Health plan customer service treated you with courtesy and respect
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Getting Needed Care	□ Q14. Easy to get treatment needed
	■ Q25. Easy to get appointment as soon as needed
How Well Doctors Communicate	△ Q17. Personal doctor explained things in an understandable way
	▽ Q18. Personal doctor listened carefully
	◁ Q19. Personal doctor showed respect for what you had to say
	▷ Q20. Personal doctor spent enough time with you
Shared Decision Making	+ Q10. Doctor explained reasons to take a medication
	× Q11. Doctor explained reasons not to take a medication
	* Q12. Doctor asked you what you thought was best for you

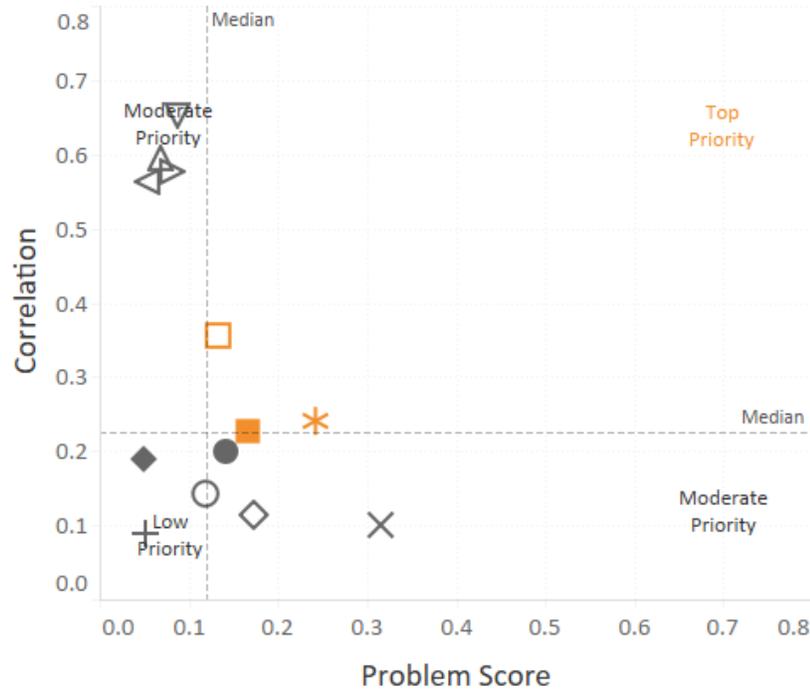
**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-108: Adult Buckeye Priority Matrix for Rating of Personal Doctor



Adult CAHPS Priority Matrix Legend for Rating of Personal Doctor: Buckeye

Customer Service	◇	Q31. Received information or help from health plan
	◆	Q32. Health plan customer service treated you with courtesy and respect
Getting Care Quickly	○	Q4. Got care as soon as needed
	●	Q6. Got an appointment as soon as needed
Getting Needed Care	□	Q14. Easy to get treatment needed
	■	Q25. Easy to get appointment as soon as needed
How Well Doctors Communicate	△	Q17. Personal doctor explained things in an understandable way
	▽	Q18. Personal doctor listened carefully
	◁	Q19. Personal doctor showed respect for what you had to say
	▷	Q20. Personal doctor spent enough time with you
Shared Decision Making	+	Q10. Doctor explained reasons to take a medication
	×	Q11. Doctor explained reasons not to take a medication
	*	Q12. Doctor asked you what you thought was best for you

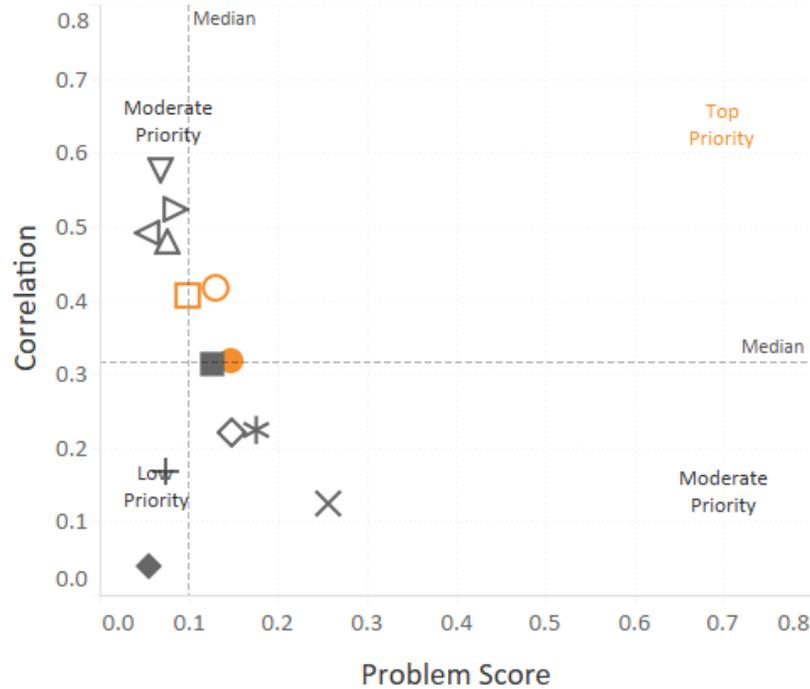
Note:

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-109: Adult CareSource Priority Matrix for Rating of Personal Doctor



Adult CAHPS Priority Matrix Legend for Rating of Personal Doctor: CareSource

Customer Service	◇ Q31. Received information or help from health plan *
	◆ Q32. Health plan customer service treated you with courtesy and respect *
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Getting Needed Care	□ Q14. Easy to get treatment needed
	■ Q25. Easy to get appointment as soon as needed
How Well Doctors Communicate	△ Q17. Personal doctor explained things in an understandable way
	▽ Q18. Personal doctor listened carefully
	◁ Q19. Personal doctor showed respect for what you had to say
	▷ Q20. Personal doctor spent enough time with you
Shared Decision Making	+ Q10. Doctor explained reasons to take a medication
	× Q11. Doctor explained reasons not to take a medication
	* Q12. Doctor asked you what you thought was best for you

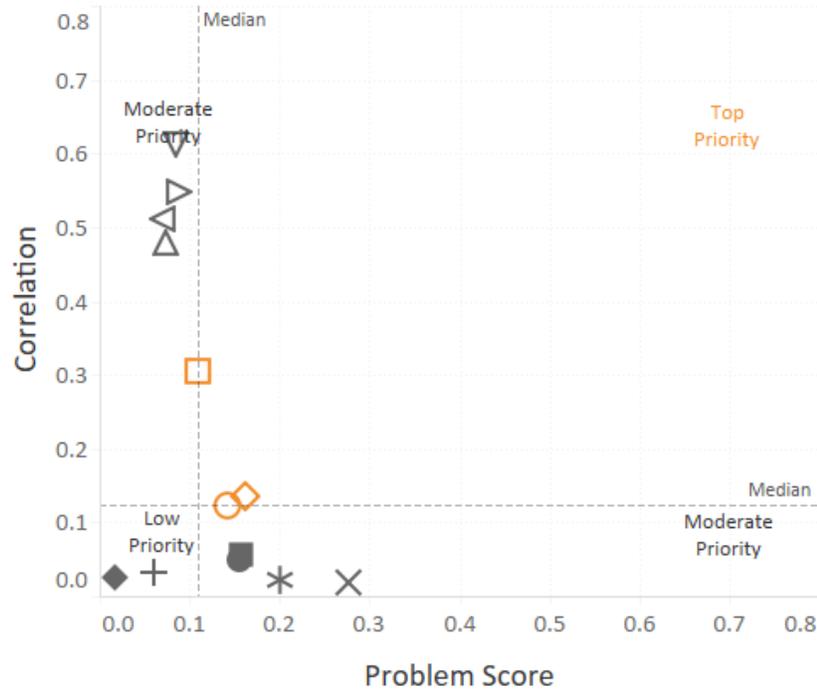
**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-110: Adult Molina Priority Matrix for Rating of Personal Doctor



Adult CAHPS Priority Matrix Legend for Rating of Personal Doctor: Molina

Customer Service	<ul style="list-style-type: none"> <li>◇ Q31. Received information or help from health plan *</li> <li>◆ Q32. Health plan customer service treated you with courtesy and respect *</li> </ul>
Getting Care Quickly	<ul style="list-style-type: none"> <li>○ Q4. Got care as soon as needed</li> <li>● Q6. Got an appointment as soon as needed</li> </ul>
Getting Needed Care	<ul style="list-style-type: none"> <li>□ Q14. Easy to get treatment needed</li> <li>■ Q25. Easy to get appointment as soon as needed</li> </ul>
How Well Doctors Communicate	<ul style="list-style-type: none"> <li>△ Q17. Personal doctor explained things in an understandable way</li> <li>▽ Q18. Personal doctor listened carefully</li> <li>◁ Q19. Personal doctor showed respect for what you had to say</li> <li>▷ Q20. Personal doctor spent enough time with you</li> </ul>
Shared Decision Making	<ul style="list-style-type: none"> <li>+ Q10. Doctor explained reasons to take a medication</li> <li>× Q11. Doctor explained reasons not to take a medication</li> <li>* Q12. Doctor asked you what you thought was best for you</li> </ul>

Note:

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-111: Adult Paramount Priority Matrix for Rating of Personal Doctor



Adult CAHPS Priority Matrix Legend for Rating of Personal Doctor: Paramount

Customer Service	◇	Q31. Received information or help from health plan *
	◆	Q32. Health plan customer service treated you with courtesy and respect *
Getting Care Quickly	○	Q4. Got care as soon as needed
	●	Q6. Got an appointment as soon as needed
Getting Needed Care	□	Q14. Easy to get treatment needed
	■	Q25. Easy to get appointment as soon as needed
How Well Doctors Communicate	△	Q17. Personal doctor explained things in an understandable way
	▽	Q18. Personal doctor listened carefully
	◁	Q19. Personal doctor showed respect for what you had to say
	▷	Q20. Personal doctor spent enough time with you
Shared Decision Making	+	Q10. Doctor explained reasons to take a medication
	×	Q11. Doctor explained reasons not to take a medication
	*	Q12. Doctor asked you what you thought was best for you

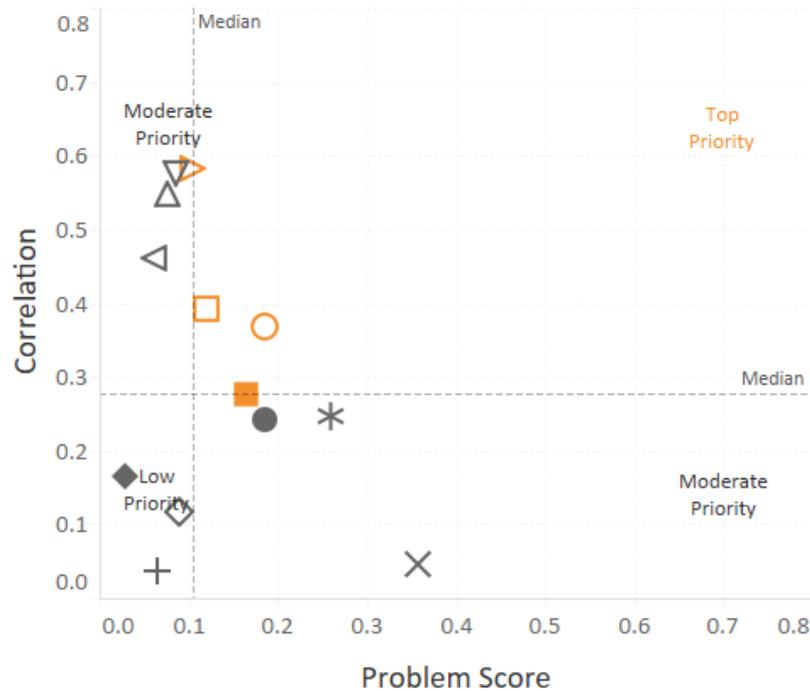
**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-112: Adult UnitedHealthcare Priority Matrix for Rating of Personal Doctor



Adult CAHPS Priority Matrix Legend for Rating of Personal Doctor: UnitedHealthcare

Customer Service	◇	Q31. Received information or help from health plan *
	◆	Q32. Health plan customer service treated you with courtesy and respect *
Getting Care Quickly	○	Q4. Got care as soon as needed
	●	Q6. Got an appointment as soon as needed
Getting Needed Care	□	Q14. Easy to get treatment needed
	■	Q25. Easy to get appointment as soon as needed
How Well Doctors Communicate	△	Q17. Personal doctor explained things in an understandable way
	▽	Q18. Personal doctor listened carefully
	◁	Q19. Personal doctor showed respect for what you had to say
	▷	Q20. Personal doctor spent enough time with you
Shared Decision Making	+	Q10. Doctor explained reasons to take a medication
	×	Q11. Doctor explained reasons not to take a medication
	*	Q12. Doctor asked you what you thought was best for you

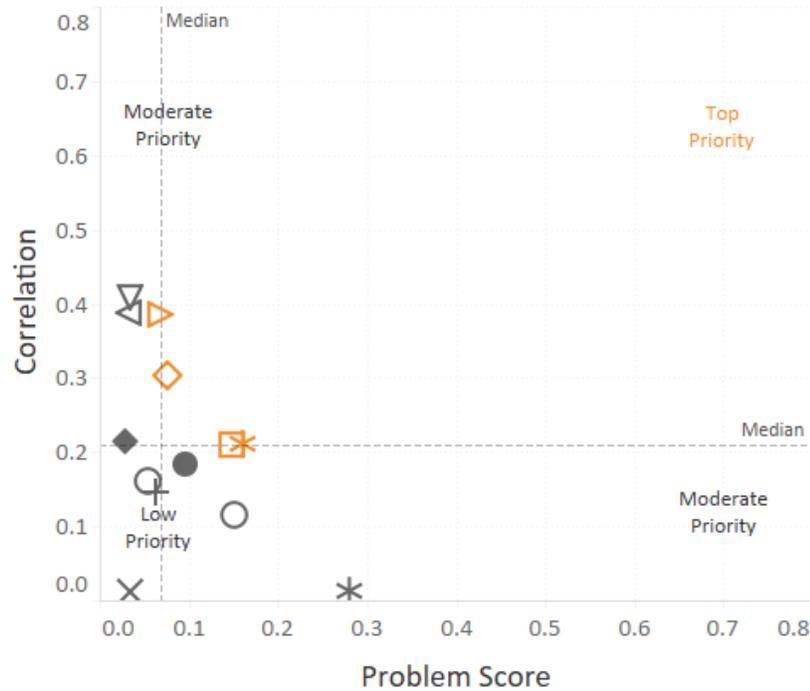
**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-113: Child Program Priority Matrix for Rating of Personal Doctor



Child CAHPS Priority Matrix Legend for Rating of Personal Doctor: Ohio Medicaid

13	* Q13. Doctor asked you what you thought was best for you
15	◇ Q15. Easy to get treatment needed
33	▽ Q33. Personal doctor listened carefully
34	◁ Q34. Personal doctor showed respect for what you had to say
37	▷ Q37. Personal doctor spent enough time with you
46	○ Q46. Easy to get appointment as soon as needed
50	□ Q50. Received information or help from health plan
51	+ Q51. Health plan customer service treated you with courtesy and respect
Customer Service	◆ Q32. Personal doctor explained things in an understandable way
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Shared Decision Making	× Q11. Doctor explained reasons to take a medication
	* Q12. Doctor explained reasons not to take a medication

**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-114: Child Buckeye Priority Matrix for Rating of Personal Doctor



Child CAHPS Priority Matrix Legend for Rating of Personal Doctor: Buckeye

13	* Q13. Doctor asked you what you thought was best for you *
15	◇ Q15. Easy to get treatment needed
33	▽ Q33. Personal doctor listened carefully
34	◁ Q34. Personal doctor showed respect for what you had to say
37	▷ Q37. Personal doctor spent enough time with you
46	○ Q46. Easy to get appointment as soon as needed *
50	□ Q50. Received information or help from health plan
51	+ Q51. Health plan customer service treated you with courtesy and respect
Customer Service	◆ Q32. Personal doctor explained things in an understandable way
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Shared Decision Making	× Q11. Doctor explained reasons to take a medication *
	* Q12. Doctor explained reasons not to take a medication *

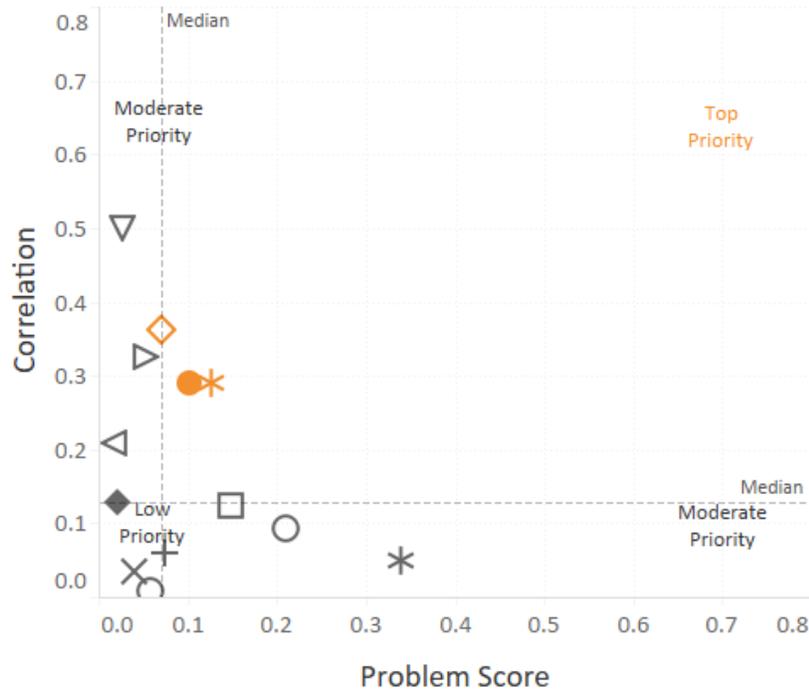
Note:

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-115: Child CareSource Priority Matrix for Rating of Personal Doctor



Child CAHPS Priority Matrix Legend for Rating of Personal Doctor: CareSource

13	✱	Q13. Doctor asked you what you thought was best for you
15	◇	Q15. Easy to get treatment needed
33	▽	Q33. Personal doctor listened carefully
34	◁	Q34. Personal doctor showed respect for what you had to say
37	▷	Q37. Personal doctor spent enough time with you
46	○	Q46. Easy to get appointment as soon as needed *
50	□	Q50. Received information or help from health plan *
51	+	Q51. Health plan customer service treated you with courtesy and respect *
Customer Service	◆	Q32. Personal doctor explained things in an understandable way
Getting Care Quickly	○	Q4. Got care as soon as needed
	●	Q6. Got an appointment as soon as needed
Shared Decision Making	✕	Q11. Doctor explained reasons to take a medication
	✱	Q12. Doctor explained reasons not to take a medication

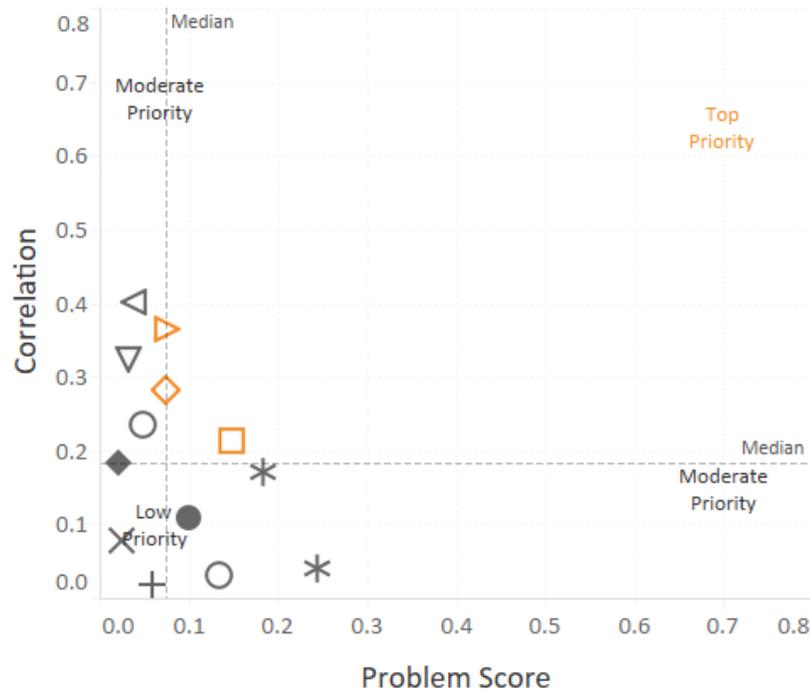
**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-116: Child Molina Priority Matrix for Rating of Personal Doctor



Child CAHPS Priority Matrix Legend for Rating of Personal Doctor: Molina

13	* Q13. Doctor asked you what you thought was best for you
15	◇ Q15. Easy to get treatment needed
33	▽ Q33. Personal doctor listened carefully
34	◁ Q34. Personal doctor showed respect for what you had to say
37	▷ Q37. Personal doctor spent enough time with you
46	○ Q46. Easy to get appointment as soon as needed
50	□ Q50. Received information or help from health plan
51	+ Q51. Health plan customer service treated you with courtesy and respect
Customer Service	◆ Q32. Personal doctor explained things in an understandable way
Getting Care Quickly	○ Q4. Got care as soon as needed
	● Q6. Got an appointment as soon as needed
Shared Decision Making	× Q11. Doctor explained reasons to take a medication
	* Q12. Doctor explained reasons not to take a medication

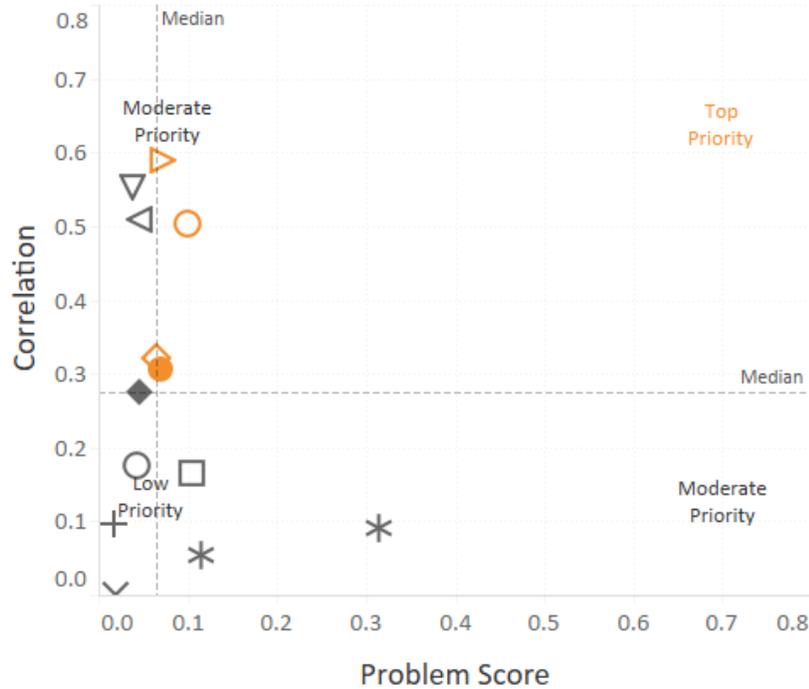
Note:

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-117: Child Paramount Priority Matrix for Rating of Personal Doctor



Child CAHPS Priority Matrix Legend for Rating of Personal Doctor: Paramount

13	* Q13. Doctor asked you what you thought was best for you *
15	◇ Q15. Easy to get treatment needed
33	▽ Q33. Personal doctor listened carefully
34	◁ Q34. Personal doctor showed respect for what you had to say
37	▷ Q37. Personal doctor spent enough time with you
46	○ Q46. Easy to get appointment as soon as needed *
50	□ Q50. Received information or help from health plan *
51	+ Q51. Health plan customer service treated you with courtesy and respect *
Customer Service	◆ Q32. Personal doctor explained things in an understandable way
Getting Care Quickly	○ Q4. Got care as soon as needed *
	● Q6. Got an appointment as soon as needed
Shared Decision Making	× Q11. Doctor explained reasons to take a medication *
	* Q12. Doctor explained reasons not to take a medication *

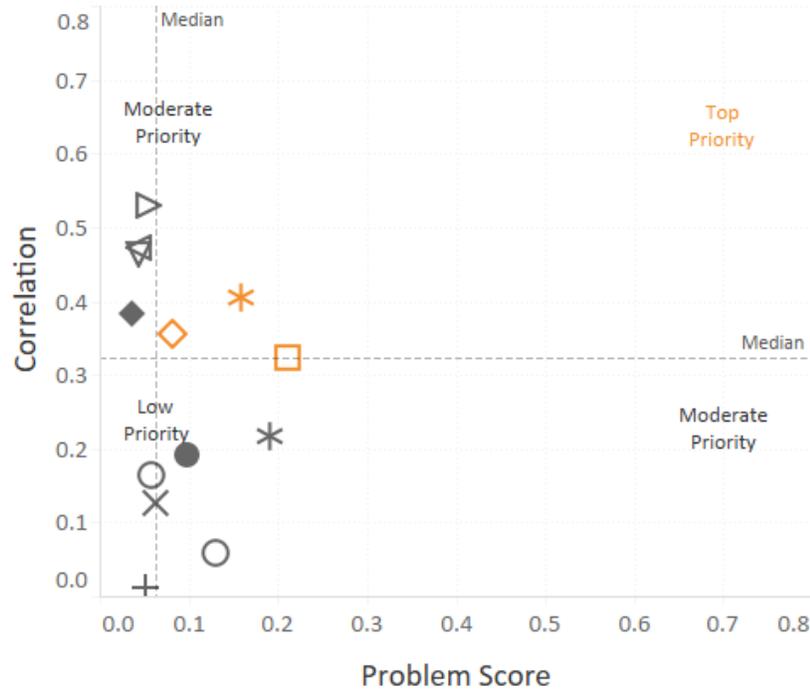
**Note:**

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

Figure 4-118: Child UnitedHealthcare Priority Matrix for Rating of Personal Doctor



Child CAHPS Priority Matrix Legend for Rating of Personal Doctor: UnitedHealthcare

13	✱	Q13. Doctor asked you what you thought was best for you *
15	◇	Q15. Easy to get treatment needed
33	▽	Q33. Personal doctor listened carefully
34	◁	Q34. Personal doctor showed respect for what you had to say
37	▷	Q37. Personal doctor spent enough time with you
46	○	Q46. Easy to get appointment as soon as needed *
50	□	Q50. Received information or help from health plan *
51	+	Q51. Health plan customer service treated you with courtesy and respect *
Customer Service	◆	Q32. Personal doctor explained things in an understandable way
Getting Care Quickly	○	Q4. Got care as soon as needed *
	●	Q6. Got an appointment as soon as needed
Shared Decision Making	✕	Q11. Doctor explained reasons to take a medication *
	✱	Q12. Doctor explained reasons not to take a medication *

Note:

Each composite item is represented by a shape.

Orange-colored shapes indicate 'Top Priority' items.

\* = Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

## Cross-Tabulations

This section presents cross-tabulations of survey responses stratified by certain demographic variables for the adult and general child populations. The demographic variables included in the tables below are gender, age, race, ethnicity, education/respondent education, and general health status.<sup>22</sup>

### Adult and General Child Cross-Tabulations

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

Question 15 and question 30 in the CAHPS Adult and Child Medicaid Health Plan Surveys asked respondents if they had one person whom they thought of as their/their child's personal doctor. The following tables display the cross-tabulations for this survey item for the adult and general child populations.

Table 4-8: Had Personal Doctor

Ohio Medicaid Managed Care Program – Adult Population					
Demographic Variables		Yes		No	
		Number	Percent	Number	Percent
Gender	Male	676	73.88	239	26.12
	Female	944	84.51	173	15.49
Age	18 - 34	279	66.59	140	33.41
	35 - 44	188	76.73	57	23.27
	45 - 54	407	83.06	83	16.94
	55 or older	746	84.97	132	15.03
Race (Q51)	White	1090	81.22	252	18.78
	Black/African American	307	77.72	88	22.28
	Other	175	74.47	60	25.53
Ethnicity (Q50)	Hispanic	58	78.38	16	21.62
	Non-Hispanic	1462	79.59	375	20.41
Education (Q49)	High School or less	999	78.05	281	21.95
	Some College or more	570	82.49	121	17.51
General Health Status (Q36)	Excellent/Very good	379	73.03	140	26.97
	Good	593	79.49	153	20.51
	Fair/Poor	611	84.39	113	15.61
Total		1,620	79.72	412	20.28

<sup>22</sup> The Other race category consists of the following: Multiracial, Asian, American Indian or Alaska Native, Native Hawaiian or Other Pacific Islander, and those not identified by any of the races listed here or in the table.

Table 4-9: Had Personal Doctor

Ohio Medicaid Managed Care Program – General Child Population					
Demographic Variables		Yes		No	
		Number	Percent	Number	Percent
Gender	Male	724	87.97	99	12.03
	Female	718	86.51	112	13.49
Age	Less than 2	429	87.02	64	12.98
	2 - 7	453	88.13	61	11.87
	8 - 12	424	86.00	69	14.00
	13 - 17	136	88.89	17	11.11
Race (Q77)	White	899	92.30	75	7.70
	Black/African American	206	81.42	47	18.58
	Other	277	79.37	72	20.63
Ethnicity (Q76)	Hispanic	157	77.34	46	22.66
	Non-Hispanic	1223	89.14	149	10.86
Respondent Education (Q80)	High School or less	689	84.54	126	15.46
	Some College or more	689	91.74	62	8.26
General Health Status (Q58)	Excellent/Very good	1121	87.99	153	12.01
	Good	246	84.54	45	15.46
	Fair/Poor	52	89.66	6	10.34
Total		1442	87.24	211	12.76

### Coordination of Care

Question 22 and question 40 in the CAHPS Adult and Child Medicaid Health Plan Surveys, respectively, asked respondents how often their doctor/their child’s doctor seemed informed and up-to-date about care received from other doctors. The following tables display the cross-tabulations for this survey item for the adult and general child populations.

Table 4-10: Coordination of Care

Ohio Medicaid Managed Care Program – Adult Population							
Demographic Variables		Never		Sometimes		Usually/Always	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	11	3.49	40	12.70	264	83.81
	Female	18	3.44	57	10.88	449	85.69
Age	18 - 34	6	5.04	12	10.08	101	84.87
	35 - 44	3	3.06	14	14.29	81	82.65
	45 - 54	9	3.95	27	11.84	192	84.21
	55 or older	11	2.79	44	11.17	339	86.04
Race (Q51)	White	19	3.35	64	11.27	485	85.39
	Black/African American	5	3.31	19	12.58	127	84.11
	Other	4	4.08	11	11.22	83	84.69
Ethnicity (Q50)	Hispanic	1	3.57	2	7.14	25	89.29
	Non-Hispanic	26	3.41	89	11.68	647	84.91
Education (Q49)	High School or less	19	3.86	59	11.99	414	84.15
	Some College or more	8	2.48	36	11.18	278	86.34
General Health Status (Q36)	Excellent/Very good	4	2.65	16	10.60	131	86.75
	Good	4	1.39	29	10.10	254	88.50
	Fair/Poor	20	5.21	50	13.02	314	81.77
Total		29	3.46	97	11.56	713	84.98

Table 4-11: Coordination of Care

Ohio Medicaid Managed Care Program – General Child Population							
Demographic Variables		Never		Sometimes		Usually/Always	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	14	5.69	19	7.72	213	86.59
	Female	14	6.11	21	9.17	194	84.72
Age	Less than 2	6	4.62	14	10.77	110	84.62
	2 - 7	10	6.67	9	6.00	131	87.33
	8 - 12	8	5.63	15	10.56	119	83.80
	13 - 17	4	7.55	2	3.77	47	88.68
Race (Q77)	White	17	5.74	22	7.43	257	86.82
	Black/African American	2	3.39	4	6.78	53	89.83
	Other	8	7.92	12	11.88	81	80.20
Ethnicity (Q76)	Hispanic	2	4.35	3	6.52	41	89.13
	Non-Hispanic	24	5.91	35	8.62	347	85.47
Respondent Education (Q80)	High School or less	11	5.34	13	6.31	182	88.35
	Some College or more	16	6.40	25	10.00	209	83.60
General Health Status (Q58)	Excellent/Very good	20	5.97	22	6.57	293	87.46
	Good	6	5.94	14	13.86	81	80.20
	Fair/Poor	1	3.45	3	10.34	25	86.21
Total		28	5.89	40	8.42	407	85.68

**Utilization of Services: Number of Doctor's Office or Clinic Visits**

Question 7 in the CAHPS Adult and Child Medicaid Health Plan Surveys asked how many times the member visited the doctor's office or clinic (not counting times the member visited the emergency room). The following tables display the cross-tabulations for this survey item for the adult and general child populations.

**Table 4-12: Number of Doctor's Office or Clinic Visits in Last Six Months**

Ohio Medicaid Managed Care Program – Adult Population							
Demographic Variables		None		1 or 2		3 or More	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	252	27.88	321	35.51	331	36.62
	Female	158	14.56	402	37.05	525	48.39
Age	18 - 34	118	28.57	141	34.14	154	37.29
	35 - 44	57	24.05	74	31.22	106	44.73
	45 - 54	88	18.45	165	34.59	224	46.96
	55 or older	147	17.05	343	39.79	372	43.16
Race (Q51)	White	264	20.05	495	37.59	558	42.37
	Black/African American	86	22.05	137	35.13	167	42.82
	Other	46	20.35	72	31.86	108	47.79
Ethnicity (Q50)	Hispanic	15	20.27	25	33.78	34	45.95
	Non-Hispanic	370	20.53	664	36.85	768	42.62
Education (Q49)	High School or less	289	23.05	459	36.60	506	40.35
	Some College or more	106	15.63	250	36.87	322	47.49
General Health Status (Q36)	Excellent/Very good	158	30.92	192	37.57	161	31.51
	Good	148	20.22	296	40.44	288	39.34
	Fair/Poor	98	13.88	223	31.59	385	54.53
Total		410	20.61	723	36.35	856	43.04

Table 4-13: Number of Doctor's Office or Clinic Visits in Last Six Months

Ohio Medicaid Managed Care Program – General Child Population							
Demographic Variables		None		1 or 2		3 or More	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	178	22.45	393	49.56	222	27.99
	Female	201	24.91	396	49.07	210	26.02
Age	Less than 2	131	27.46	228	47.80	118	24.74
	2 - 7	122	24.75	248	50.30	123	24.95
	8 - 12	108	22.64	242	50.73	127	26.62
	13 - 17	18	11.76	71	46.41	64	41.83
Race (Q77)	White	212	22.36	461	48.63	275	29.01
	Black/African American	62	25.31	131	53.47	52	21.22
	Other	86	25.75	163	48.80	85	25.45
Ethnicity (Q76)	Hispanic	49	25.26	101	52.06	44	22.68
	Non-Hispanic	310	23.26	655	49.14	368	27.61
Respondent Education (Q80)	High School or less	204	25.89	385	48.86	199	25.25
	Some College or more	151	20.57	370	50.41	213	29.02
General Health Status (Q58)	Excellent/Very good	324	26.13	623	50.24	293	23.63
	Good	45	16.13	134	48.03	100	35.84
	Fair/Poor	5	9.26	22	40.74	27	50.00
Total		379	23.69	789	49.31	432	27.00

### Who Helped Coordinate Care

Question 54 and question 84 in the CAHPS Adult and Child Medicaid Health Plan Surveys, respectively, asked who helped coordinate their/their child's care. The following tables display the cross-tabulations for this survey item for the adult and general child populations.

Table 4-14: Who Helped You Coordinate Your Care

Ohio Medicaid Managed Care Program – Adult Population											
Demographic Variables		Someone From the Health Plan		Someone From the Doctor's Office or Clinic		Someone From Another Organization		A Friend or Family Member		You	
		Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Gender	Male	48	6.76	115	16.20	20	2.82	180	25.35	347	48.87
	Female	50	5.69	133	15.15	21	2.39	145	16.51	529	60.25
Age	18 - 34	15	4.36	37	10.76	7	2.03	107	31.10	178	51.74
	35 - 44	10	5.21	28	14.58	7	3.65	34	17.71	113	58.85
	45 - 54	27	7.07	71	18.59	12	3.14	57	14.92	215	56.28
	55 or older	46	6.87	112	16.72	15	2.24	127	18.96	370	55.22
Race (Q51)	White	50	4.73	167	15.81	24	2.27	208	19.70	607	57.48
	Black/ African American	31	9.75	40	12.58	10	3.14	65	20.44	172	54.09
	Other	15	7.94	40	21.16	6	3.17	46	24.34	82	43.39
Ethnicity (Q50)	Hispanic	8	12.50	11	17.19	2	3.13	18	28.13	25	39.06
	Non-Hispanic	83	5.72	226	15.56	38	2.62	285	19.63	820	56.47
Education (Q49)	High School or less	71	7.10	159	15.90	27	2.70	255	25.50	488	48.80
	Some College or more	25	4.42	86	15.19	11	1.94	68	12.01	376	66.43
General Health Status (Q36)	Excellent/ Very good	25	6.38	50	12.76	8	2.04	83	21.17	226	57.65
	Good	22	3.69	100	16.75	13	2.18	110	18.43	352	58.96
	Fair/ Poor	49	8.46	98	16.93	20	3.45	123	21.24	289	49.91
Total		98	6.17	248	15.62	41	2.58	325	20.47	876	55.16

Table 4-15: Who Helped You Coordinate Your Child's Care

Ohio Medicaid Managed Care Program – General Child Population											
Demographic Variables		Someone From the Health Plan		Someone From the Doctor's Office or Clinic		Someone From Another Organization		A Friend or Family Member		You	
		Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Gender	Male	11	1.72	73	11.44	11	1.72	49	7.68	494	77.43
	Female	14	2.20	57	8.95	13	2.04	56	8.79	497	78.02
Age	Less than 2	8	2.09	42	10.99	6	1.57	23	6.02	303	79.32
	2 - 7	8	2.04	41	10.43	8	2.04	31	7.89	305	77.61
	8 - 12	6	1.58	34	8.95	7	1.84	36	9.47	297	78.16
	13 - 17	3	2.50	13	10.83	3	2.50	15	12.50	86	71.67
Race (Q77)	White	9	1.15	85	10.86	14	1.79	56	7.15	619	79.05
	Black/ African American	5	2.59	14	7.25	7	3.63	14	7.25	153	79.27
	Other	10	3.58	27	9.68	3	1.08	33	11.83	206	73.84
Ethnicity (Q76)	Hispanic	5	3.29	26	17.11	4	2.63	21	13.82	96	63.16
	Non-Hispanic	19	1.73	99	9.01	20	1.82	80	7.28	881	80.16
Respondent Education (Q80)	High School or less	18	2.84	73	11.51	16	2.52	72	11.36	455	71.77
	Some College or more	7	1.13	55	8.91	6	0.97	27	4.38	522	84.60
General Health Status (Q58)	Excellent/ Very good	17	1.69	89	8.86	18	1.79	77	7.67	803	79.98
	Good	6	2.68	32	14.29	3	1.34	23	10.27	160	71.43
	Fair/Poor	2	4.88	8	19.51	3	7.32	4	9.76	24	58.54
Total		25	1.96	130	10.20	24	1.88	105	8.24	991	77.73

**Satisfaction with Help Received to Coordinate Care**

Question 55 and question 85 in the CAHPS Adult and Child Medicaid Health Plan Surveys, respectively, asked how satisfied a respondent was with the help received to coordinate care. The following tables display the cross-tabulations for this survey item for the adult and general child populations.

Table 4-16: Satisfaction with Help Received to Coordinate Care

Ohio Medicaid Managed Care Program – Adult Population							
Demographic Variables		Very Dissatisfied/ Dissatisfied		Neither Dissatisfied Nor Satisfied		Satisfied/Very Satisfied	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	50	6.70	65	8.71	631	84.58
	Female	54	6.19	73	8.37	745	85.44
Age	18 - 34	12	3.58	35	10.45	288	85.97
	35 - 44	9	4.64	21	10.82	164	84.54
	45 - 54	25	6.39	43	11.00	323	82.61
	55 or older	58	8.31	39	5.59	601	86.10
Race (Q51)	White	66	6.24	95	8.99	896	84.77
	Black/African American	24	7.19	22	6.59	288	86.23
	Other	11	5.45	18	8.91	173	85.64
Ethnicity (Q50)	Hispanic	8	12.50	3	4.69	53	82.81
	Non-Hispanic	93	6.28	129	8.71	1259	85.01
Education (Q49)	High School or less	75	7.12	79	7.50	899	85.38
	Some College or more	28	5.19	57	10.58	454	84.23
General Health Status (Q36)	Excellent/Very good	33	8.53	28	7.24	326	84.24
	Good	23	3.80	44	7.27	538	88.93
	Fair/Poor	45	7.45	65	10.76	494	81.79
Total		104	6.43	138	8.53	1376	85.04

Table 4-17: Satisfaction with Help Received to Coordinate Your Child's Care

Ohio Medicaid Managed Care Program – General Child Population							
Demographic Variables		Very Dissatisfied/ Dissatisfied		Neither Dissatisfied Nor Satisfied		Satisfied/Very Satisfied	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	31	5.18	46	7.69	521	87.12
	Female	26	4.44	38	6.48	522	89.08
Age	Less than 2	19	5.52	26	7.56	299	86.92
	2 - 7	12	3.29	24	6.58	329	90.14
	8 - 12	18	5.07	21	5.92	316	89.01
	13 - 17	8	6.67	13	10.83	99	82.50
Race (Q77)	White	29	4.19	55	7.95	608	87.86
	Black/African American	14	7.04	9	4.52	176	88.44
	Other	13	4.80	20	7.38	238	87.82
Ethnicity (Q76)	Hispanic	10	6.10	10	6.10	144	87.80
	Non-Hispanic	45	4.53	74	7.44	875	88.03
Respondent Education (Q80)	High School or less	29	4.59	35	5.54	568	89.87
	Some College or more	23	4.38	49	9.33	453	86.29
General Health Status (Q58)	Excellent/Very good	49	5.45	63	7.01	787	87.54
	Good	5	2.20	16	7.05	206	90.75
	Fair/Poor	3	5.77	5	9.62	44	84.62
Total		57	4.81	84	7.09	1043	88.09

### Hard to Take Care of Health

Question 56 in the CAHPS Adult Medicaid Health Plan Survey asked if someone from the respondent's personal doctor's office asked if there were things that make it hard for them to take care of their health. The following table displays the cross-tabulations for this survey item for the adult population.

Table 4-18: Hard to Take Care of Health

Ohio Medicaid Managed Care Program – Adult Population					
Demographic Variables		Yes		No	
		Number	Percent	Number	Percent
Gender	Male	185	24.73	563	75.27
	Female	229	25.11	683	74.89
Age	18 - 34	62	19.44	257	80.56
	35 - 44	46	23.59	149	76.41
	45 - 54	117	27.99	301	72.01
	55 or older	189	25.96	539	74.04
Race (Q51)	White	263	24.08	829	75.92
	Black/African American	94	27.01	254	72.99
	Other	54	27.41	143	72.59
Ethnicity (Q50)	Hispanic	17	28.33	43	71.67
	Non-Hispanic	376	24.80	1140	75.20
Education (Q49)	High School or less	252	23.53	819	76.47
	Some College or more	153	27.52	403	72.48
General Health Status (Q36)	Excellent/Very good	63	16.03	330	83.97
	Good	137	22.28	478	77.72
	Fair/Poor	210	33.33	420	66.67
Total		414	24.94	1246	75.06

### Received Information About Health

Question 57 and question 87 in the CAHPS Adult and Child Medicaid Health Plan Surveys, respectively, asked respondents how often their/their child's personal doctor gave them all the information they wanted about their/their child's health. The following tables display the cross-tabulations for this survey item for the adult and general child populations.

Table 4-19: Received Information About Health

Ohio Medicaid Managed Care Program – Adult Population							
Demographic Variables		Never		Sometimes		Usually/Always	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	110	14.88	63	8.53	566	76.59
	Female	48	5.08	71	7.51	826	87.41
Age	18 - 34	41	12.93	22	6.94	254	80.13
	35 - 44	27	13.43	20	9.95	154	76.62
	45 - 54	46	11.00	36	8.61	336	80.38
	55 or older	44	5.88	56	7.49	648	86.63
Race (Q51)	White	88	7.94	74	6.67	947	85.39
	Black/African American	36	10.32	31	8.88	282	80.80
	Other	31	15.12	27	13.17	147	71.71
Ethnicity (Q50)	Hispanic	8	12.50	6	9.38	50	78.13
	Non-Hispanic	140	9.11	116	7.55	1281	83.34
Education (Q49)	High School or less	118	10.80	86	7.87	889	81.34
	Some College or more	36	6.43	41	7.32	483	86.25
General Health Status (Q36)	Excellent/Very good	45	11.48	25	6.38	322	82.14
	Good	51	8.07	38	6.01	543	85.92
	Fair/Poor	62	9.75	69	10.85	505	79.40
Total		158	9.38	134	7.96	1392	82.66

Table 4-20: Received Information About Child's Health

Ohio Medicaid Managed Care Program – General Child Population							
Demographic Variables		Never		Sometimes		Usually/Always	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	31	4.56	32	4.71	617	90.74
	Female	32	4.74	47	6.96	596	88.30
Age	Less than 2	23	5.94	27	6.98	337	87.08
	2 - 7	19	4.47	17	4.00	389	91.53
	8 - 12	18	4.49	27	6.73	356	88.78
	13 - 17	3	2.11	8	5.63	131	92.25
Race (Q77)	White	32	3.83	36	4.31	767	91.86
	Black/African American	11	5.29	15	7.21	182	87.50
	Other	20	6.90	27	9.31	243	83.79
Ethnicity (Q76)	Hispanic	9	5.33	16	9.47	144	85.21
	Non-Hispanic	53	4.58	59	5.10	1044	90.31
Respondent Education (Q80)	High School or less	35	5.02	50	7.17	612	87.80
	Some College or more	26	4.12	26	4.12	579	91.76
General Health Status (Q58)	Excellent/Very good	53	5.07	42	4.02	951	90.92
	Good	9	3.63	31	12.50	208	83.87
	Fair/Poor	1	1.89	6	11.32	46	86.79
Total		63	4.65	79	5.83	1213	89.52

### How Child's Body is Growing

Question 86 in the CAHPS Child Medicaid Health Plan Survey asked if the respondent talked to someone at their child's personal doctor's office about how their child's body is growing. The following table displays the cross-tabulations for this survey item for the general child population.

Table 4-21: How Child's Body is Growing

Ohio Medicaid Managed Care Program – General Child Population					
Demographic Variables		Yes		No	
		Number	Percent	Number	Percent
Gender	Male	480	68.18	224	31.82
	Female	470	66.95	232	33.05
Age	Less than 2	234	58.65	165	41.35
	2 - 7	309	70.07	132	29.93
	8 - 12	283	66.12	145	33.88
	13 - 17	124	89.86	14	10.14
Race (Q77)	White	557	64.99	300	35.01
	Black/African American	156	70.27	66	29.73
	Other	219	73.24	80	26.76
Ethnicity (Q76)	Hispanic	118	65.56	62	34.44
	Non-Hispanic	812	68.01	382	31.99
Respondent Education (Q80)	High School or less	474	65.74	247	34.26
	Some College or more	460	70.12	196	29.88
General Health Status (Q58)	Excellent/Very good	737	67.49	355	32.51
	Good	167	65.75	87	34.25
	Fair/Poor	41	78.85	11	21.15
Total		950	67.57	456	32.43

### Customer Service Composite

Two questions were asked to assess how often members were satisfied with the health plan’s customer service (questions 31 and 32 in the CAHPS Adult Medicaid Health Plan Survey and questions 50 and 51 in the CAHPS Child Medicaid Health Plan Survey). The following tables display the cross-tabulations for this composite measure for the adult and general child populations.

Table 4-22: Customer Service Composite

Ohio Medicaid Managed Care Program – Adult Population							
Demographic Variables		Never		Sometimes		Usually/Always	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	5	1.7	24	8.7	240	89.5
	Female	2	0.5	28	7.9	326	91.7
Age	18 - 34	1	0.1	8	7.2	102	91.9
	35 - 44	1	1.3	9	11.9	66	86.7
	45 - 54	3	1.2	10	6.1	144	92.6
	55 or older	4	1.2	30	10.2	254	88.5
Race (Q51)	White	6	1.4	30	7.5	363	91.1
	Black/African American	1	0.7	17	12.0	120	87.3
	Other	0	0.0	4	4.8	70	95.2
Ethnicity (Q50)	Hispanic	0	0.0	3	9.6	28	90.3
	Non-Hispanic	5	0.8	45	8.0	510	91.1
Education (Q49)	High School or less	5	1.2	29	7.9	334	90.9
	Some College or more	1	0.4	20	8.4	218	91.2
General Health Status (Q36)	Excellent/Very good	3	1.9	15	9.5	140	88.6
	Good	0	0.0	13	6.7	181	93.3
	Fair/Poor	3	1.0	22	8.5	234	90.5
Total		6	1.0	52	8.2	567	90.7

Table 4-23: Customer Service Composite

Ohio Medicaid Managed Care Program – General Child Population							
Demographic Variables		Never		Sometimes		Usually/Always	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	6	2.3	19	7.1	236	90.6
	Female	5	2.0	25	9.6	224	88.4
Age	Less than 2	1	1.3	5	5.9	70	92.7
	2 - 7	4	2.3	11	6.9	140	90.7
	8 - 12	4	2.4	14	9.7	127	87.8
	13 - 17	4	2.4	14	9.8	125	87.7
Race (Q77)	White	6	2.1	17	6.1	255	91.7
	Black/African American	1	1.1	13	14.3	77	84.5
	Other	4	3.0	10	8.6	103	88.3
Ethnicity (Q76)	Hispanic	0	0.0	6	8.9	56	91.1
	Non-Hispanic	11	2.5	32	7.7	373	89.7
Respondent Education (Q80)	High School or less	1	0.4	21	8.2	233	91.3
	Some College or more	9	3.9	15	6.6	204	89.5
General Health Status (Q58)	Excellent/Very good	10	2.5	31	8.1	342	89.4
	Good	2	1.6	7	7.5	84	90.8
	Fair/Poor	0	0.0	4	11.6	27	88.3
Total		11	2.1	43	8.4	459	89.5

### Rating of All Health Care

Question 13 and question 14 in the CAHPS Adult and Child Medicaid Health Plan Surveys, respectively, asked members to rate all their 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.” The following tables display the cross-tabulations for this survey item for the adult and general child populations.

Table 4-24: Rating of All Health Care

Ohio Medicaid Managed Care Program – Adult Population							
Demographic Variables		0 to 4		5 to 7		8 to 10	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	26	4.07	130	20.34	483	75.59
	Female	29	3.18	176	19.28	708	77.55
Age	18 - 34	12	4.14	67	23.10	211	72.76
	35 - 44	8	4.47	43	24.02	128	71.51
	45 - 54	15	3.96	75	19.79	289	76.25
	55 or older	20	2.84	121	17.19	563	79.97
Race (Q51)	White	28	2.69	197	18.96	814	78.34
	Black/African American	14	4.68	56	18.73	229	76.59
	Other	9	5.11	43	24.43	124	70.45
Ethnicity (Q50)	Hispanic	3	5.17	13	22.41	42	72.41
	Non-Hispanic	46	3.27	273	19.40	1088	77.33
Education (Q49)	High School or less	39	4.12	186	19.64	722	76.24
	Some College or more	13	2.30	106	18.79	445	78.90
General Health Status (Q36)	Excellent/Very good	6	1.72	42	12.07	300	86.21
	Good	8	1.40	115	20.18	447	78.42
	Fair/Poor	40	6.66	139	23.13	422	70.22
Total		55	3.54	306	19.72	1191	76.74

Table 4-25: Rating of All Health Care

Ohio Medicaid Managed Care Program – General Child Population							
Demographic Variables		0 to 4		5 to 7		8 to 10	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	7	1.16	45	7.44	553	91.40
	Female	12	2.01	66	11.04	520	86.96
Age	Less than 2	4	1.17	29	8.50	308	90.32
	2 - 7	6	1.64	35	9.56	325	88.80
	8 - 12	8	2.20	31	8.52	325	89.29
	13 - 17	1	0.76	16	12.12	115	87.12
Race (Q77)	White	7	0.96	58	7.98	662	91.06
	Black/African American	7	3.91	19	10.61	153	85.47
	Other	4	1.63	27	10.98	215	87.40
Ethnicity (Q76)	Hispanic	3	2.08	9	6.25	132	91.67
	Non-Hispanic	14	1.39	96	9.50	900	89.11
Respondent Education (Q80)	High School or less	11	1.92	52	9.08	510	89.01
	Some College or more	7	1.21	52	8.98	520	89.81
General Health Status (Q58)	Excellent/Very good	12	1.33	69	7.65	821	91.02
	Good	5	2.17	32	13.91	193	83.91
	Fair/Poor	1	2.04	8	16.33	40	81.63
Total		19	1.58	111	9.23	1073	89.19

### Rating of Health Plan

Question 35 and question 54 in the CAHPS Adult and Child Medicaid Health Plan Surveys, respectively, asked members to rate their 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.” The following tables display the cross-tabulations for this survey item for the adult and general child populations.

Table 4-26: Rating of Health Plan

Ohio Medicaid Managed Care Program – Adult Population							
Demographic Variables		0 to 4		5 to 7		8 to 10	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	31	3.47	158	17.69	704	78.84
	Female	30	2.73	172	15.66	896	81.60
Age	18 - 34	9	2.20	81	19.80	319	78.00
	35 - 44	10	4.20	48	20.17	180	75.63
	45 - 54	19	3.92	84	17.32	382	78.76
	55 or older	23	2.68	117	13.62	719	83.70
Race (Q51)	White	27	2.06	203	15.48	1081	82.46
	Black/African American	15	3.74	66	16.46	320	79.80
	Other	16	6.87	53	22.75	164	70.39
Ethnicity (Q50)	Hispanic	4	5.41	11	14.86	59	79.73
	Non-Hispanic	48	2.65	296	16.34	1468	81.02
Education (Q49)	High School or less	40	3.17	207	16.39	1016	80.44
	Some College or more	18	2.64	110	16.11	555	81.26
General Health Status (Q36)	Excellent/Very good	14	2.73	55	10.74	443	86.52
	Good	11	1.50	127	17.28	597	81.22
	Fair/Poor	35	4.85	144	19.94	543	75.21
Total		61	3.06	330	16.57	1600	80.36

Table 4-27: Rating of Health Plan

Ohio Medicaid Managed Care Program – General Child Population							
Demographic Variables		0 to 4		5 to 7		8 to 10	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	10	1.25	100	12.48	691	86.27
	Female	15	1.86	112	13.90	679	84.24
Age	Less than 2	10	2.10	76	15.97	390	81.93
	2 - 7	3	0.60	51	10.20	446	89.20
	8 - 12	11	2.29	67	13.96	402	83.75
	13 - 17	1	0.66	18	11.92	132	87.42
Race (Q77)	White	14	1.48	112	11.80	823	86.72
	Black/African American	6	2.39	30	11.95	215	85.66
	Other	4	1.16	60	17.34	282	81.50
Ethnicity (Q76)	Hispanic	1	0.50	17	8.42	184	91.09
	Non-Hispanic	21	1.56	184	13.67	1141	84.77
Respondent Education (Q80)	High School or less	12	1.50	93	11.61	696	86.89
	Some College or more	11	1.49	106	14.36	621	84.15
General Health Status (Q58)	Excellent/Very good	13	1.04	139	11.08	1103	87.89
	Good	10	3.51	52	18.25	223	78.25
	Fair/Poor	2	3.57	19	33.93	35	62.50
Total		25	1.56	212	13.19	1370	85.25

### Rating of Overall Mental or Emotional Health

Question 37 and question 59 in the CAHPS Adult and Child Medicaid Health Plan Survey, respectively, asked members to rate their overall mental or emotional health. The following tables display the cross-tabulations for this survey item for the adult and general child populations.

Table 4-28: Rating of Overall Mental or Emotional Health

Ohio Medicaid Managed Care Program – Adult Population							
Demographic Variables		Excellent/Very Good		Good		Fair/Poor	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	354	39.25	265	29.38	283	31.37
	Female	401	36.06	348	31.29	363	32.64
Age	18 - 34	167	39.95	116	27.75	135	32.30
	35 - 44	84	35.00	71	29.58	85	35.42
	45 - 54	163	33.68	140	28.93	181	37.40
	55 or older	341	39.11	286	32.80	245	28.10
Race (Q51)	White	464	34.73	425	31.81	447	33.46
	Black/African American	192	48.24	104	26.13	102	25.63
	Other	84	35.90	69	29.49	81	34.62
Ethnicity (Q50)	Hispanic	26	35.62	18	24.66	29	39.73
	Non-Hispanic	704	38.28	562	30.56	573	31.16
Education (Q49)	High School or less	439	34.27	401	31.30	441	34.43
	Some College or more	302	43.70	203	29.38	186	26.92
General Health Status (Q36)	Excellent/Very good	380	72.66	97	18.55	46	8.80
	Good	251	33.51	320	42.72	178	23.77
	Fair/Poor	121	16.62	192	26.37	415	57.01
Total		755	37.49	613	30.44	646	32.08

Table 4-29: Rating of Overall Mental or Emotional Health

Ohio Medicaid Managed Care Program – General Child Population							
Demographic Variables		Excellent/Very Good		Good		Fair/Poor	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	525	64.81	186	22.96	99	12.22
	Female	568	68.85	175	21.21	82	9.94
Age	Less than 2	279	57.53	126	25.98	80	16.49
	2 - 7	388	76.68	90	17.79	28	5.53
	8 - 12	288	58.54	132	26.83	72	14.63
	13 - 17	138	90.79	13	8.55	1	0.66
Race (Q77)	White	673	68.81	206	21.06	99	10.12
	Black/African American	160	63.49	56	22.22	36	14.29
	Other	227	64.49	85	24.15	40	11.36
Ethnicity (Q76)	Hispanic	136	67.00	47	23.15	20	9.85
	Non-Hispanic	934	67.73	291	21.10	154	11.17
Respondent Education (Q80)	High School or less	537	65.25	185	22.48	101	12.27
	Some College or more	522	69.60	157	20.93	71	9.47
General Health Status (Q58)	Excellent/Very good	984	77.00	218	17.06	76	5.95
	Good	91	31.49	128	44.29	70	24.22
	Fair/Poor	11	18.64	14	23.73	34	57.63
Total		1093	66.85	361	22.08	181	11.07

### Rating of Overall Health

Question 36 and question 58 in the CAHPS Adult and Child Medicaid Health Plan Survey, respectively, asked members to rate their overall health. The following tables display the cross-tabulations for this survey item for the adult and general child populations.

Table 4-30: Rating of Overall Health

Ohio Medicaid Managed Care Program – Adult Population							
Demographic Variables		Excellent/Very Good		Good		Fair/Poor	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	243	26.82	326	35.98	337	37.20
	Female	283	25.54	429	38.72	396	35.74
Age	18 - 34	165	39.66	163	39.18	88	21.15
	35 - 44	72	29.75	96	39.67	74	30.58
	45 - 54	99	20.37	169	34.77	218	44.86
	55 or older	190	21.84	327	37.59	353	40.57
Race (Q51)	White	337	25.15	512	38.21	491	36.64
	Black/African American	108	27.20	148	37.28	141	35.52
	Other	70	30.17	77	33.19	85	36.64
Ethnicity (Q50)	Hispanic	25	35.21	18	25.35	28	39.44
	Non-Hispanic	480	26.09	704	38.26	656	35.65
Education (Q49)	High School or less	302	23.59	471	36.80	507	39.61
	Some College or more	212	30.72	276	40.00	202	29.28
General Health Status (Q36)	Excellent/Very good	526	100.00	0	0.00	0	0.00
	Good	0	0.00	755	100.00	0	0.00
	Fair/Poor	0	0.00	0	0.00	733	100.00
Total		526	26.12	755	37.49	733	36.40

Table 4-31: Rating of Overall Health

Ohio Medicaid Managed Care Program – General Child Population							
Demographic Variables		Excellent/Very Good		Good		Fair/Poor	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	627	77.03	156	19.16	31	3.81
	Female	662	79.95	138	16.67	28	3.38
Age	Less than 2	359	73.27	106	21.63	25	5.10
	2 - 7	414	81.34	81	15.91	14	2.75
	8 - 12	383	78.00	91	18.53	17	3.46
	13 - 17	133	87.50	16	10.53	3	1.97
Race (Q77)	White	796	81.64	152	15.59	27	2.77
	Black/African American	180	70.31	60	23.44	16	6.25
	Other	269	76.20	69	19.55	15	4.25
Ethnicity (Q76)	Hispanic	162	79.02	35	17.07	8	3.90
	Non-Hispanic	1088	78.96	241	17.49	49	3.56
Respondent Education (Q80)	High School or less	617	75.34	173	21.12	29	3.54
	Some College or more	625	82.78	103	13.64	27	3.58
General Health Status (Q58)	Excellent/Very good	1289	100.00	0	0.00	0	0.00
	Good	0	0.00	294	100.00	0	0.00
	Fair/Poor	0	0.00	0	0.00	59	100.00
Total		1289	78.50	294	17.90	59	3.59

## 5. Children with Chronic Conditions Results

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>23</sup> Children with chronic conditions often access more 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 experience 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 these needs are being met is to compare the ratings of families that have children with chronic conditions to the ratings of families that have children without chronic conditions. The State of Ohio can then determine whether there are significant differences between the ratings of the two populations and address these differences.

This section presents a comparative analysis of survey results for child members with and child members without a chronic condition. This population-to-population comparative analysis identified whether one population performed statistically significantly higher, the same, or lower on each measure than the other population.

For the global ratings, composite measures, composite items, individual item measures, CCC composite measures, CCC composite items, and CCC items, a score was calculated on a 100-point scale using an NCQA-approved methodology to produce a top box score.<sup>24,25</sup> Responses were classified into response categories.

<sup>23</sup> National Association of Chronic Disease Directors. Why We Need Public Health to Improve Healthcare. Available at: <https://www.chronicdisease.org/page/whyweneedph2imphc>. Accessed on: May 29, 2020.

<sup>24</sup> This methodology differs from prior years' editions of this report, which used three-point and one-point mean scores.

<sup>25</sup> The CCC composite measures and CCC item measures are only included in the CAHPS 5.0H Child Medicaid Health Plan Survey (with CCC measurement set). Parents or caretakers of both general child members (those in the general child sample) and CCC members  
 2019 Medicaid Managed Care Program CAHPS Full Report  
 Rev. July 20, 2020

For the global ratings, these were the response categories:

- 0 to 4 (Dissatisfied)
- 5 to 7 (Neutral)
- 8 to 10 (Satisfied)

The following response categories were used for the Getting Needed Care, Getting Care Quickly, How Well Doctors Communicate, and Customer Service composite measures and items; the Coordination of Care individual item measure; the Access to Specialized Services CCC composite measure; and the Access to Prescription Medicines and FCC: Getting Needed Information CCC items:

- Never (Dissatisfied)
- Sometimes (Neutral)
- Usually/Always (Satisfied)

The following response categories were used for the Shared Decision Making composite measure and items, Health Promotion and Education individual item measure, and the FCC: Personal Doctor Who Knows Child and the Coordination of Care for Children with Chronic Conditions CCC composite measures, and the items within these CCC composites:

- No
- Yes

## CCC and Non-CCC Comparisons

Each of the response category percentages and the scores for the CCC population were compared to the response category percentages and the scores for the non-CCC population to determine whether there were statistically significant differences between the results for each population. For additional information on these tests for statistical significance, please refer to the *2019 Ohio Medicaid Managed Care Program CAHPS® Member Experience Survey Methodology Report*.

Statistically significant differences between the 2019 scores for the CCC and non-CCC populations are noted with arrows. Scores for one population that were statistically significantly higher than scores for the other population are noted with upward (↑) arrows. Conversely, scores for one population that were statistically significantly lower than scores for the other population are noted with downward (↓) arrows. Scores for one population that were not statistically significantly different from the other population are not noted with arrows. If it is true that one population's score was statistically significantly higher (↑) than the other population's score, then it follows that the other population's score was statistically significantly lower (↓). Therefore, in the figures presented in this section, a pair of arrows (↑ and ↓) to the right of the score 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 score of CCC respondents was statistically significantly lower than that of non-CCC respondents, then it must be true that the score of non-CCC respondents was statistically significantly higher than that of CCC respondents. This represents one statistically significant difference.

In addition, scores in 2019 were compared to scores in 2018 to determine whether there were statistically significant differences for the CCC and non-CCC populations.<sup>26</sup> Statistically significant differences between scores in 2019 and scores in 2018 for the CCC and non-CCC populations are noted with triangles to the left of the score. Scores that were statistically significantly higher in 2019 than in 2018 are noted with upward (▲) triangles. Scores that were statistically significantly lower in 2019 than in 2018 are noted with downward (▼) triangles. Scores in 2019 that were not statistically significantly different from scores in 2018 are not noted with triangles.

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(those in the CCC supplemental sample) completed the CAHPS 5.0H Child Medicaid Health Plan Survey (with CCC measurement set), which includes the CCC composite measures and CCC items.

<sup>26</sup> To conduct trending analysis for each rating or measure, scores for 2018 were recalculated using the new methodology adopted for 2019. Therefore, 2018 scores displayed in each figure below are different from the scores reported in the *2018 Ohio Medicaid Managed Care Program CAHPS® Member Experience Survey Full Report*.

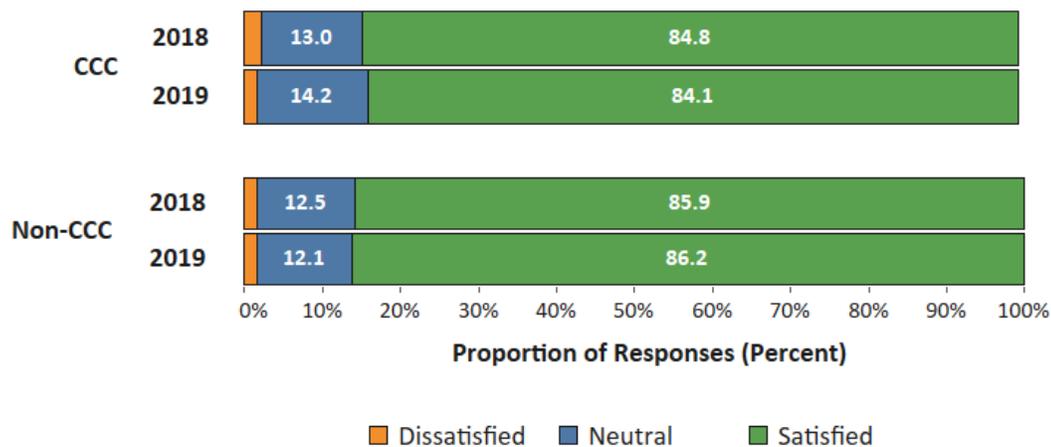
Please note, no national Medicaid data are available for the CCC and non-CCC comparisons analysis. Furthermore, statistically significant differences for response category percentages are not displayed in the figures, but rather are described in the text below the figures.

## Global Ratings

### Rating of Health Plan

Parents or caretakers of child members 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." Responses were classified into three categories: Dissatisfied (0–4), Neutral (5–7), and Satisfied (8–10). Figure 5-1 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-1: CCC and Non-CCC Comparisons: Rating of Health Plan Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

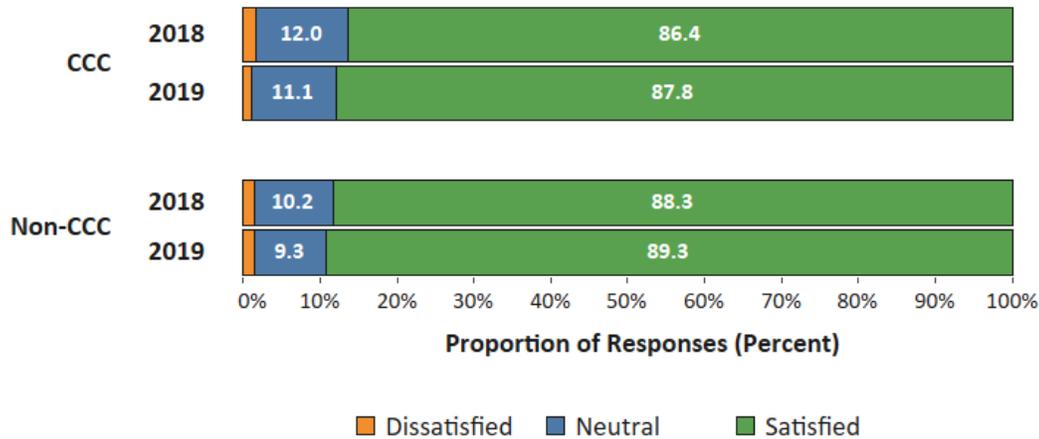
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Rating of All Health Care

Parents or caretakers of child members were asked to rate all 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.” Responses were classified into three categories: Dissatisfied (0–4), Neutral (5–7), and Satisfied (8–10). Figure 5-2 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-2: CCC and Non-CCC Comparisons: Rating of All Health Care Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

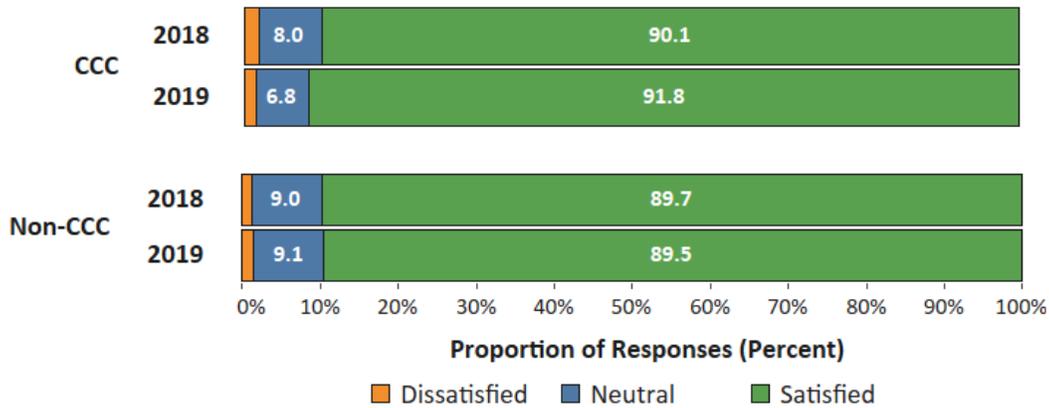
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Rating of Personal Doctor

Parents or caretakers of child members 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.” Responses were classified into three categories: Dissatisfied (0–4), Neutral (5–7), and Satisfied (8–10). Figure 5-3 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-3: CCC and Non-CCC Comparisons: Rating of Personal Doctor Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

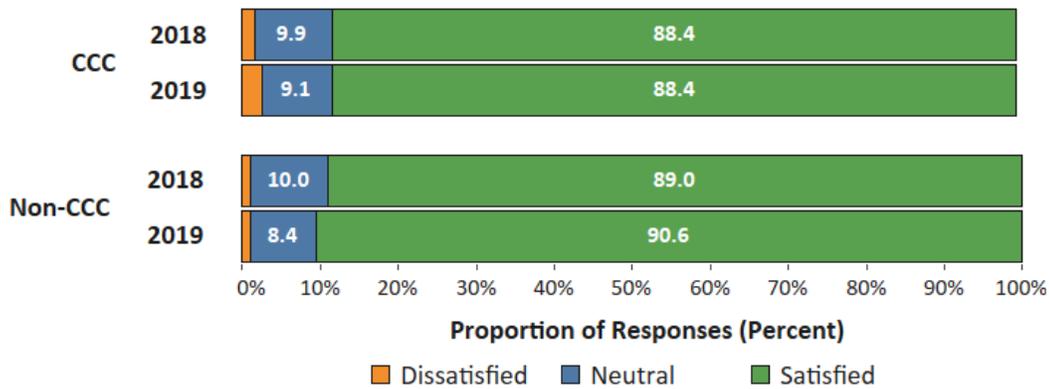
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Rating of Specialist Seen Most Often

Parents or caretakers of child members were asked to rate the specialist their child saw most often on a scale of 0 to 10, with 0 being the “worst specialist possible” and 10 being the “best specialist possible.” Responses were classified into three categories: Dissatisfied (0–4), Neutral (5–7), and Satisfied (8–10). Figure 5-4 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-4: CCC and Non-CCC Comparisons: Rating of Specialist Seen Most Often Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

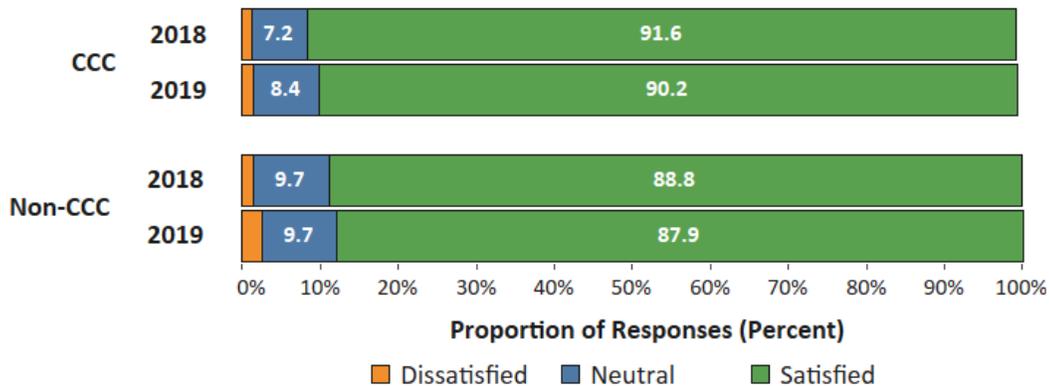
Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

## Composite Measures

### Getting Needed Care

Two questions were asked to assess how often it was easy for parents or caretakers to get the care they needed for their child (questions 15 and 46 in the CAHPS Child Medicaid Health Plan Survey). Responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 5-5 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-5: CCC and Non-CCC Comparisons: Getting Needed Care Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

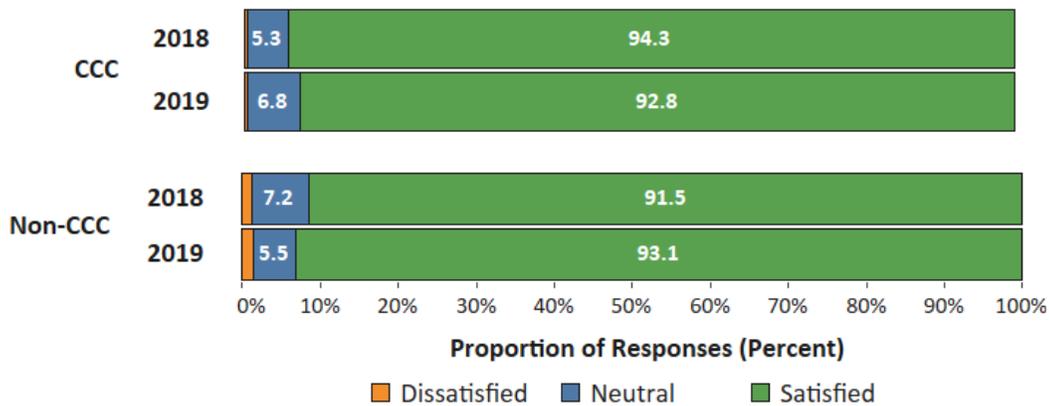
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Getting Needed Care: Got Care Believed Necessary

Question 15 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers how often it was easy to get the care, tests, or treatment their child needed. Figure 5-6 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-6: CCC and Non-CCC Comparisons: Getting Needed Care – Got Care Believed Necessary Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

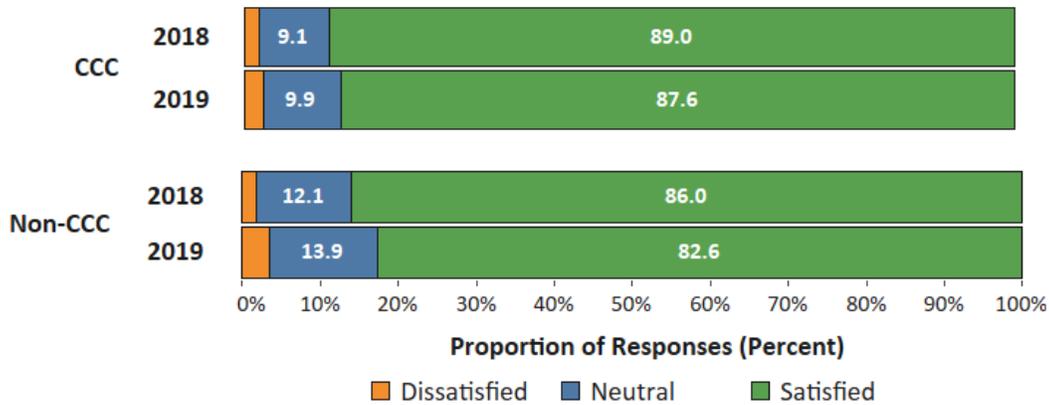
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Getting Needed Care: Saw a Specialist

Question 46 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers how often they got an appointment for their child to see a specialist as soon as they needed. Figure 5-7 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-7: CCC and Non-CCC Comparisons: Getting Needed Care – Saw a Specialist Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

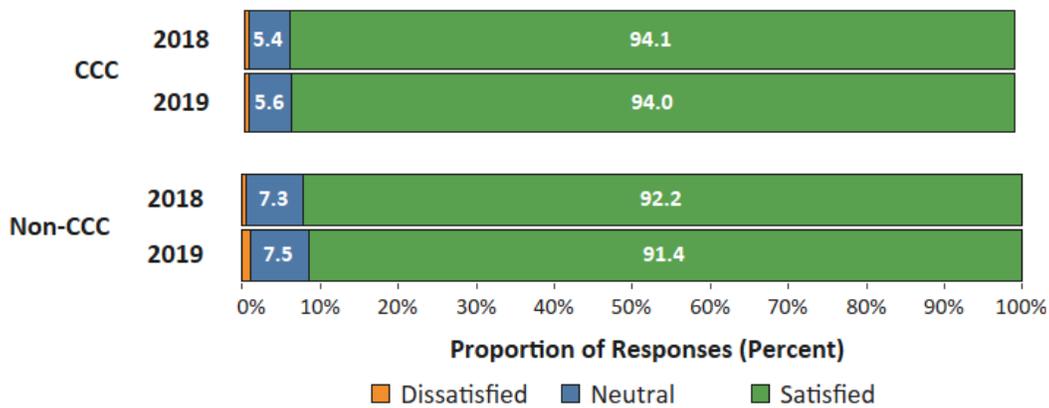
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Getting Care Quickly

Two questions were asked to parents or caretakers to assess how often their child received care quickly (questions 4 and 6 in the CAHPS Child Medicaid Health Plan Surveys). Responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 5-8 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-8: CCC and Non-CCC Comparisons: Getting Care Quickly Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

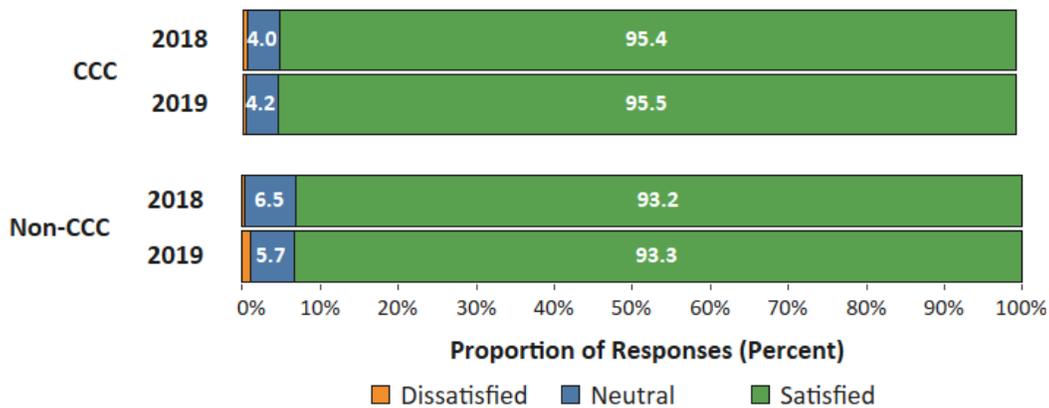
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Getting Care Quickly: Received Care as Soon as Wanted

Question 4 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers how often their child received care as soon as they wanted when their child needed care right away. Figure 5-9 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-9: CCC and Non-CCC Comparisons: Getting Care Quickly – Received Care as Soon as Wanted Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

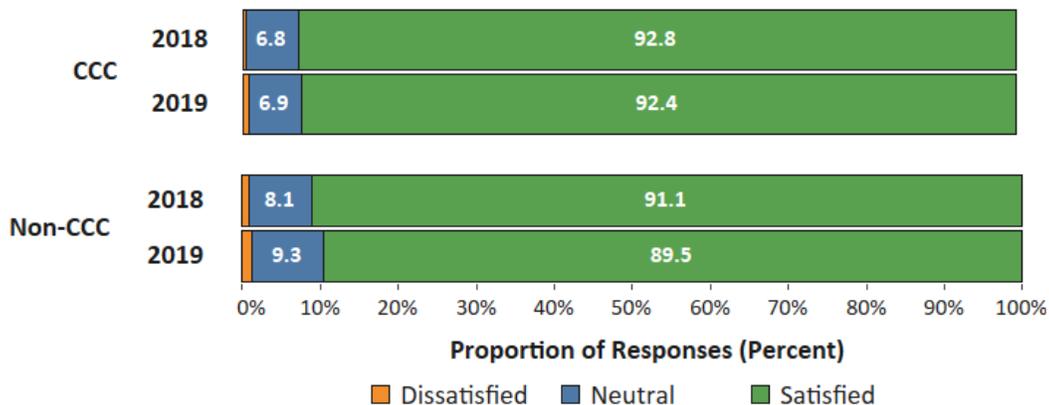
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Getting Care Quickly: Received Appointment as Soon as Wanted

Question 6 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers how often their child received an appointment as soon as they wanted when their child did not need care right away (i.e., a check-up or routine care). Figure 5-10 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-10: CCC and Non-CCC Comparisons: Getting Care Quickly – Received Appointment as Soon as Wanted Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

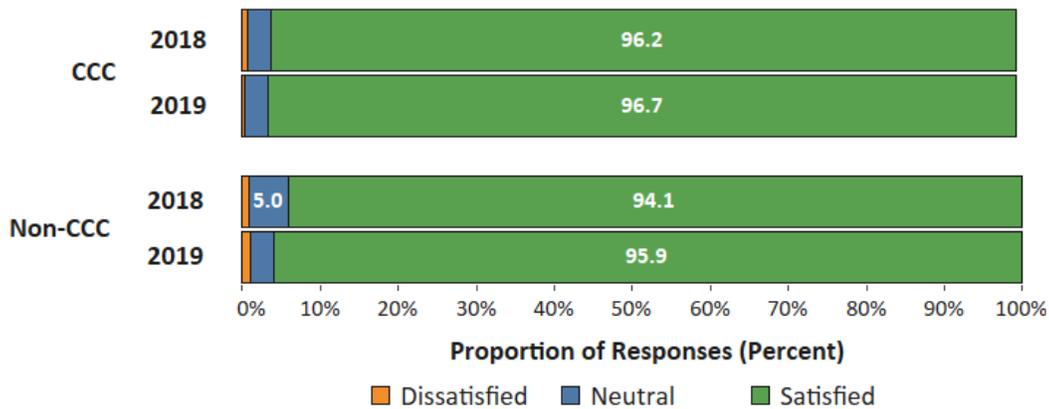
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### How Well Doctors Communicate

A series of four questions was asked to parents or caretakers of child members to assess how often their child's doctors communicated well. For each of these questions (questions 32, 33, 34, and 37 in the CAHPS Child Medicaid Health Plan Survey), responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 5-11 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-11: CCC and Non-CCC Comparisons: How Well Doctors Communicate Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

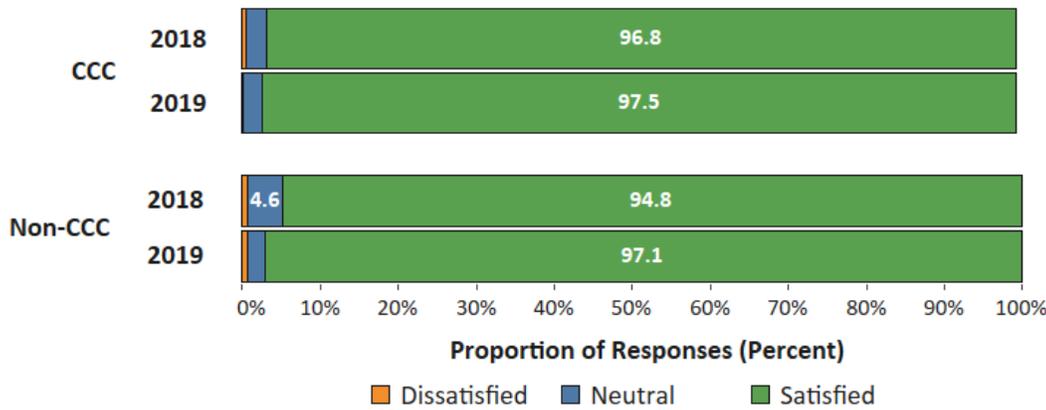
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

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

Question 32 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often doctors explained things about their child’s health in a way they could understand. Figure 5-12 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-12: CCC and Non-CCC Comparisons: How Well Doctors Communicate – Doctors Explained Things in Way They Could Understand Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

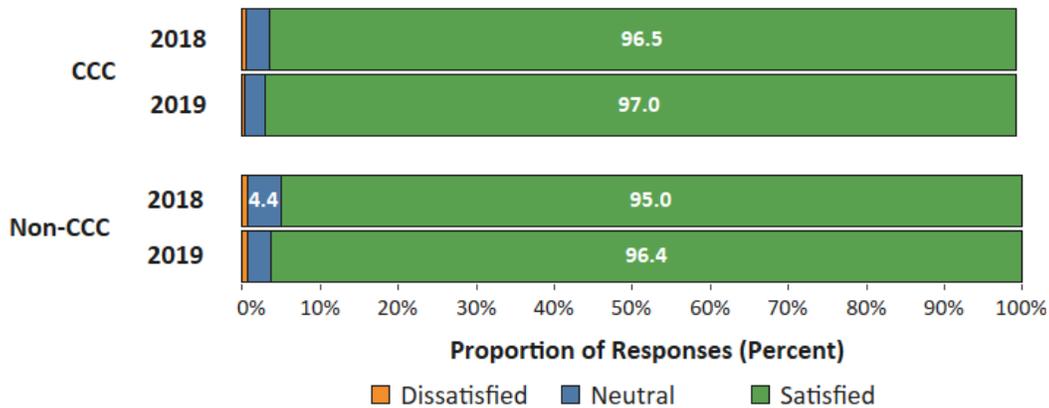
Overall, there was one statistically significant difference between scores in 2019 and scores in 2018 for this measure.

- The score for non-CCC respondents was significantly higher in 2019 than in 2018.

### How Well Doctors Communicate: Doctors Listened Carefully

Question 33 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often their child's doctors listened carefully to them. Figure 5-13 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-13: CCC and Non-CCC Comparisons: How Well Doctors Communicate – Doctors Listened Carefully Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

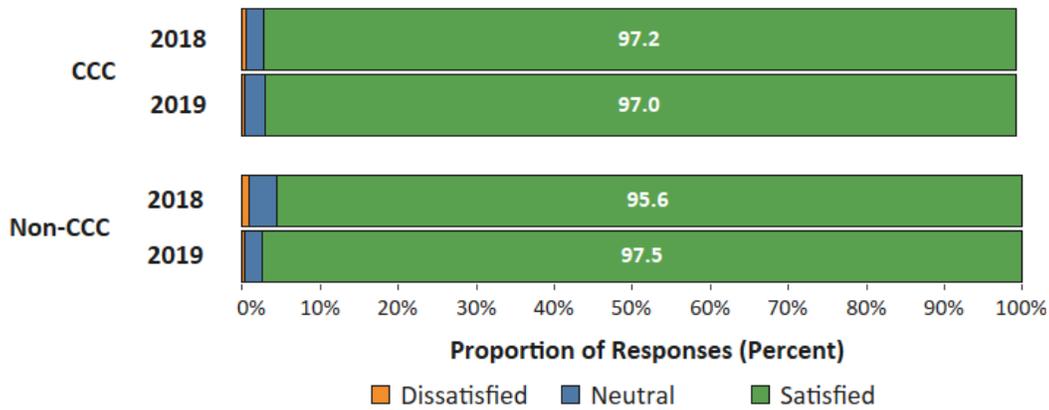
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### How Well Doctors Communicate: Doctors Showed Respect

Question 34 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often their child's doctors showed respect for what they had to say. Figure 5-14 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-14: CCC and Non-CCC Comparisons: How Well Doctors Communicate – Doctors Showed Respect Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

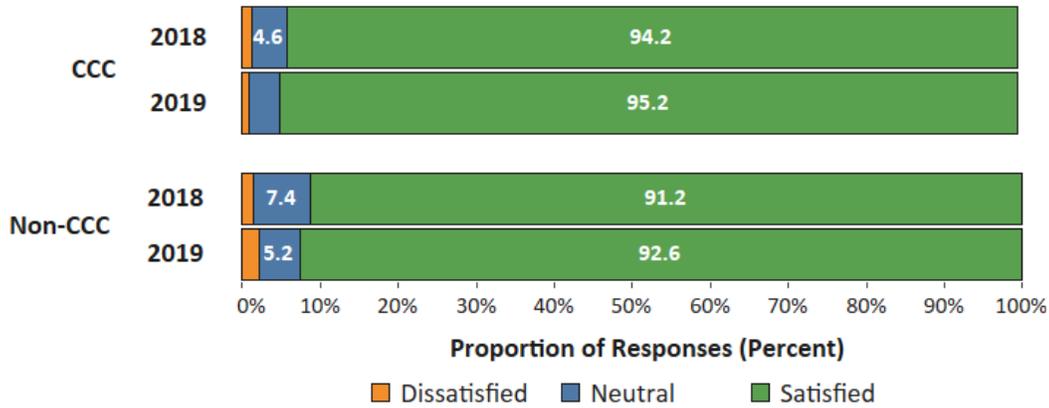
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### How Well Doctors Communicate: Doctors Spent Enough Time with Patient

Question 37 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often their child's doctors spent enough time with their child. Figure 5-15 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-15: CCC and Non-CCC Comparisons: How Well Doctors Communicate – Doctors Spent Enough Time with Patient Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

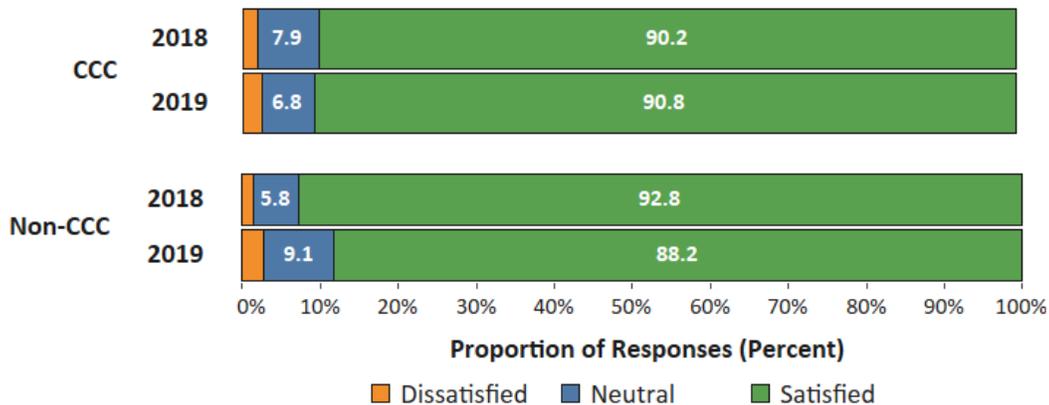
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

## Customer Service

Two questions were asked to assess how often parents or caretakers of child members were satisfied with the customer service of their child's health plan. For each of these questions (questions 50 and 51 in the CAHPS Child Medicaid Health Plan Survey), responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 5-16 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-16: CCC and Non-CCC Comparisons: Customer Service Response Category Percentages



### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

## Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

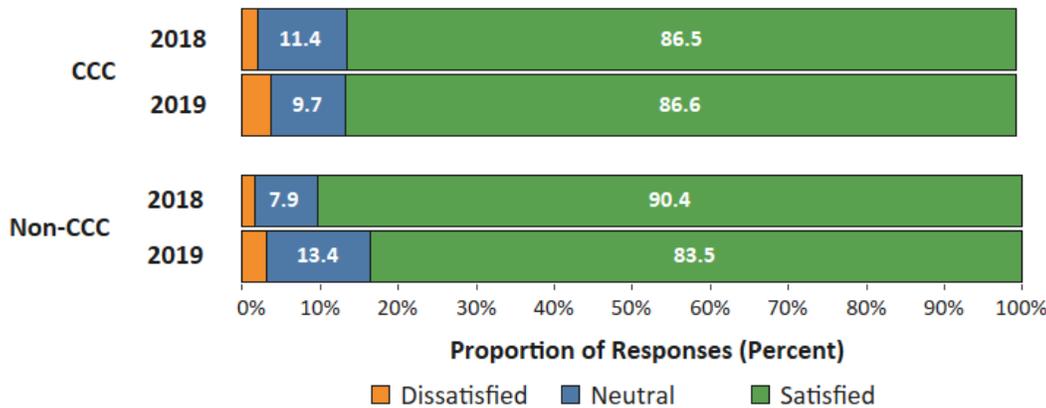
## Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Customer Service: Obtained Help Needed from Customer Service

Question 50 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often their child’s health plan customer service gave them the information or help they needed. Figure 5-17 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-17: CCC and Non-CCC Comparisons: Customer Service – Obtained Help Needed from Customer Service Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

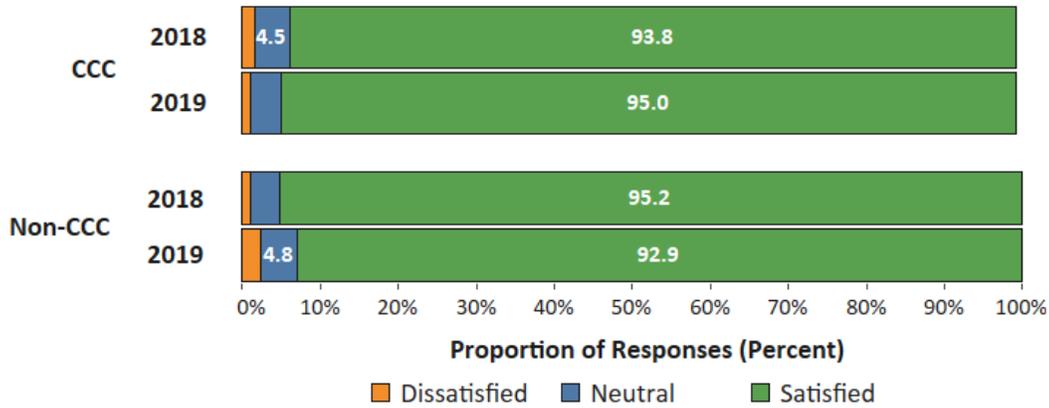
Overall, there was one statistically significant difference between scores in 2019 and scores in 2018 for this measure.

- The score for non-CCC respondents was significantly lower in 2019 than in 2018.

### 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 their child's health plan customer service staff treated them with courtesy and respect. Figure 5-18 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-18: CCC and Non-CCC Comparisons: Customer Service – Health Plan Customer Service Treated with Courtesy and Respect Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

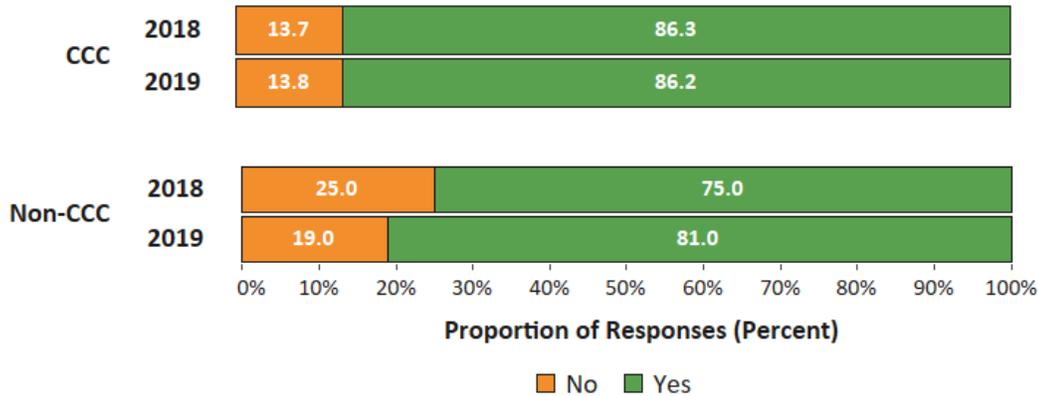
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Shared Decision Making

Three questions were asked to parents or caretakers of child members to assess the extent to which their child’s doctors or other health providers discussed starting or stopping a medication with them. For each of these questions (questions 11, 12, and 13 in the CAHPS Child Medicaid Health Plan Survey), responses were classified into two categories: No and Yes. Figure 5-19 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-19: CCC and Non-CCC Comparisons: Shared Decision Making Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

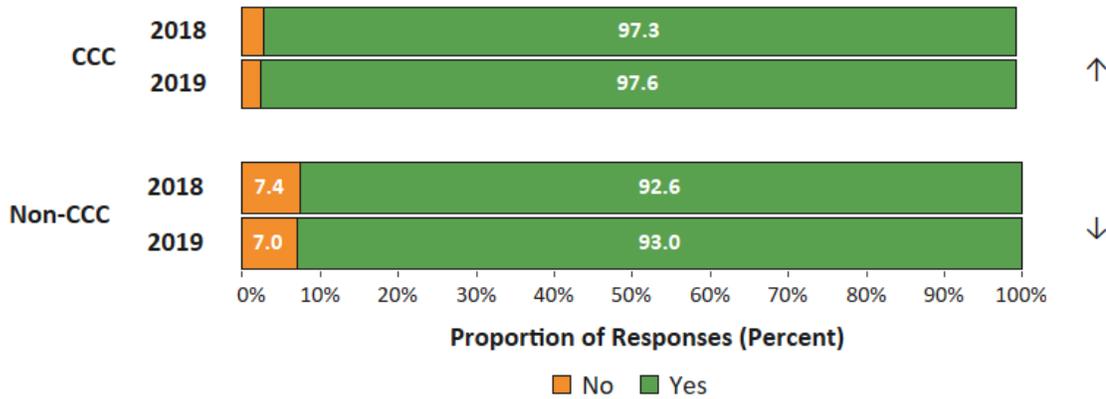
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

**Shared Decision Making: Doctor Talked About Reasons to Take a Medicine**

Question 11 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members if a doctor or other health provider talked about the reasons their child might want to take a medicine. Figure 5-20 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-20: CCC and Non-CCC Comparisons: Shared Decision Making – Doctor Talked About Reasons to Take a Medicine Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

**Comparative Analysis**

Overall, there was one statistically significant difference observed for this measure.

- The score for CCC respondents was significantly higher than that of non-CCC respondents.

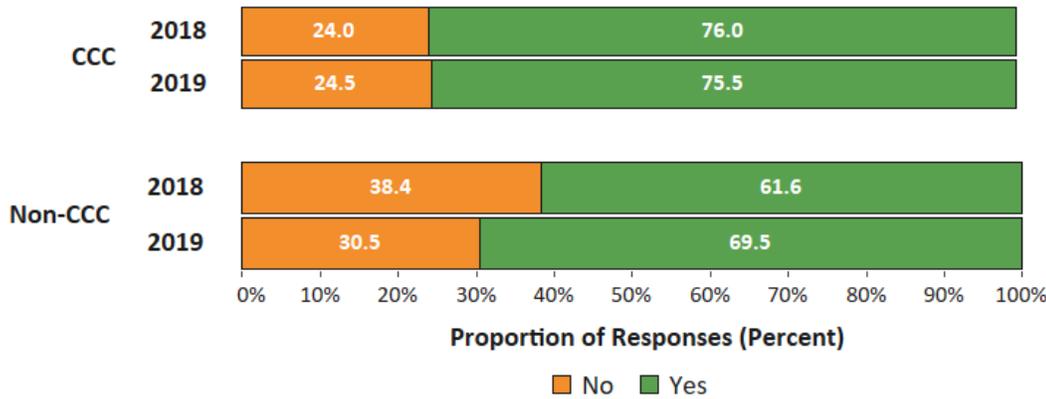
**Trending Analysis**

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

**Shared Decision Making: Doctor Talked About Reasons Not to Take a Medicine**

Question 12 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members if a doctor or other health provider talked about the reasons their child might not want to take a medicine. Figure 5-21 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-21: CCC and Non-CCC Comparisons: Shared Decision Making – Doctor Talked About Reasons Not to Take a Medicine Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

**Comparative Analysis**

Overall, there were no statistically significant differences observed for this measure.

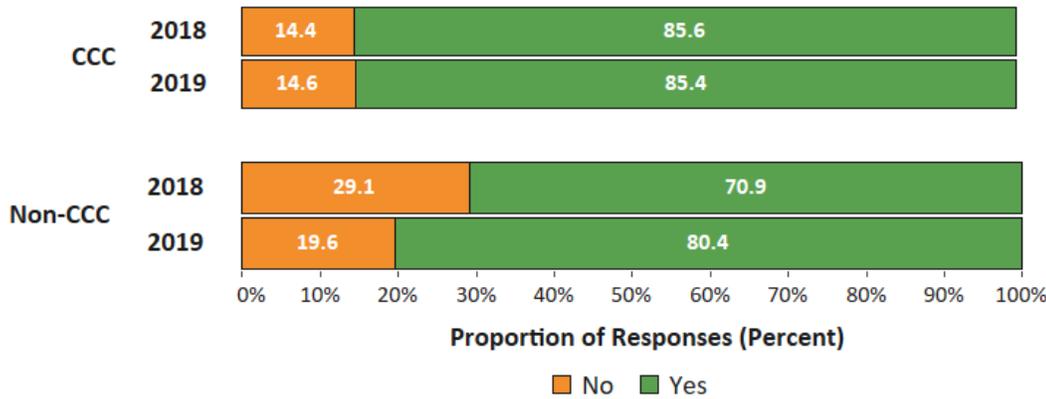
**Trending Analysis**

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

**Shared Decision Making: Doctor Asked About Best Medicine Choice for Your Child**

Question 13 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members if a doctor or other health provider asked them which medicine choice they thought was best for their child. Figure 5-22 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-22: CCC and Non-CCC Comparisons: Shared Decision Making – Doctor Asked About Best Medicine Choice for Your Child Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

**Comparative Analysis**

Overall, there were no statistically significant differences observed for this measure.

**Trending Analysis**

Overall, there was one statistically significant difference between scores in 2019 and scores in 2018 for this measure.

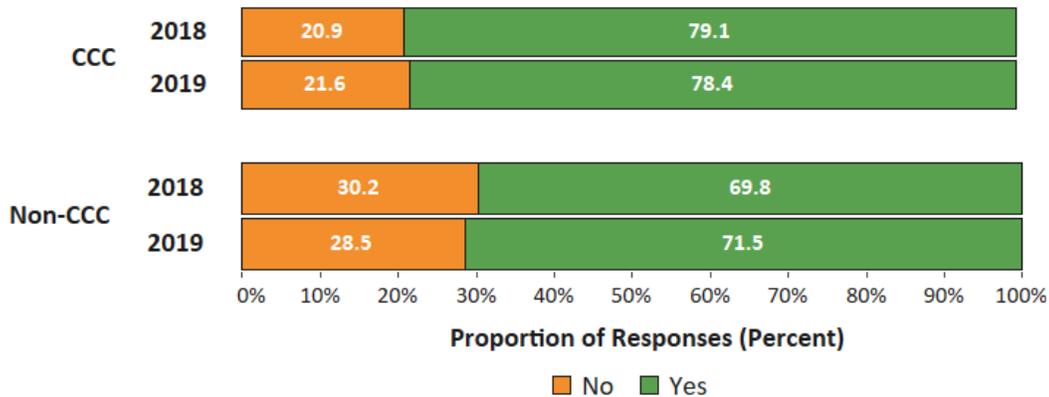
- The score for non-CCC respondents was significantly higher in 2019 than in 2018.

## Individual Items

### Health Promotion and Education

Question 8 in the CAHPS Child Medicaid Health Plan Surveys asked parents or caretakers of child members how often their child's doctor or other health provider talked with them about specific things they could do to prevent illness in their child. Responses were classified into two categories: No and Yes. Figure 5-23 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-23: CCC and Non-CCC Comparisons: Health Promotion and Education Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there was one statistically significant difference observed for this measure.

- The score for CCC respondents was significantly higher than that of non-CCC respondents.

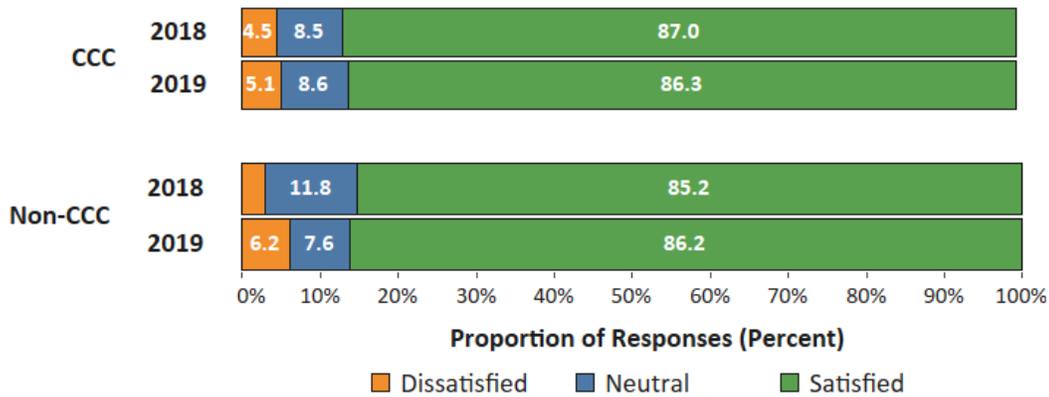
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Coordination of Care

Question 40 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often their child’s doctor seemed informed and up-to-date about the care their child received from other doctors. Responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 5-24 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-24: CCC and Non-CCC Comparisons: Coordination of Care Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

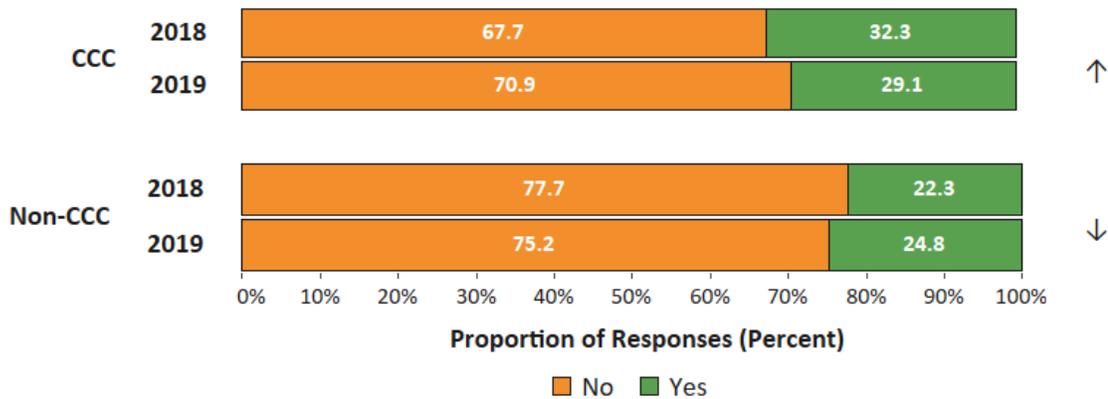
Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

## Satisfaction with Health Plan

### Got Information or Help from Customer Service

Question 49 asked whether the parents or caretakers of child members got information or help from customer service. For this question, responses were classified into two categories: No and Yes. Figure 5-25 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-25: CCC and Non-CCC Comparisons: Satisfaction with Health Plan – Got Information or Help from Customer Service Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there was one statistically significant difference observed for this measure.

- The score for CCC respondents was significantly higher than that of non-CCC respondents.

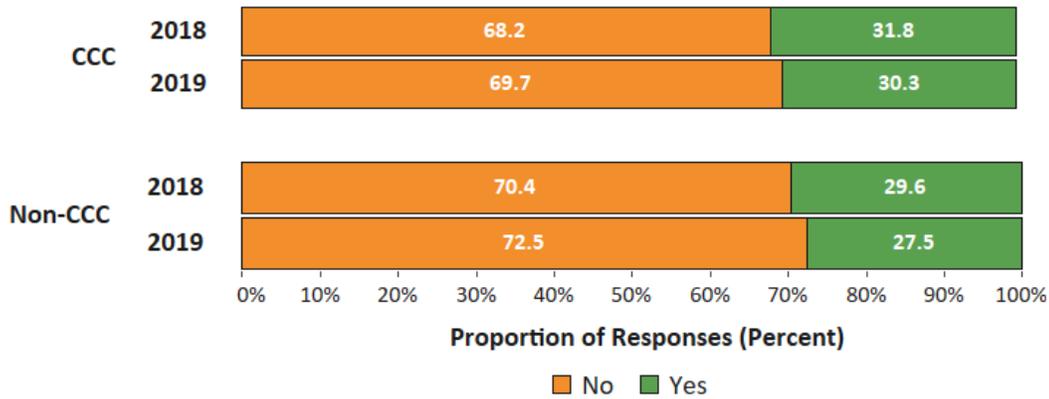
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Filled Out Paperwork

Question 52 asked parents or caretakers of child members if they had filled out paperwork for their child's health plan. For this question, responses were classified into two categories: No and Yes. Figure 5-26 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-26: CCC and Non-CCC Comparisons: Satisfaction with Health Plan – Filled Out Paperwork Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

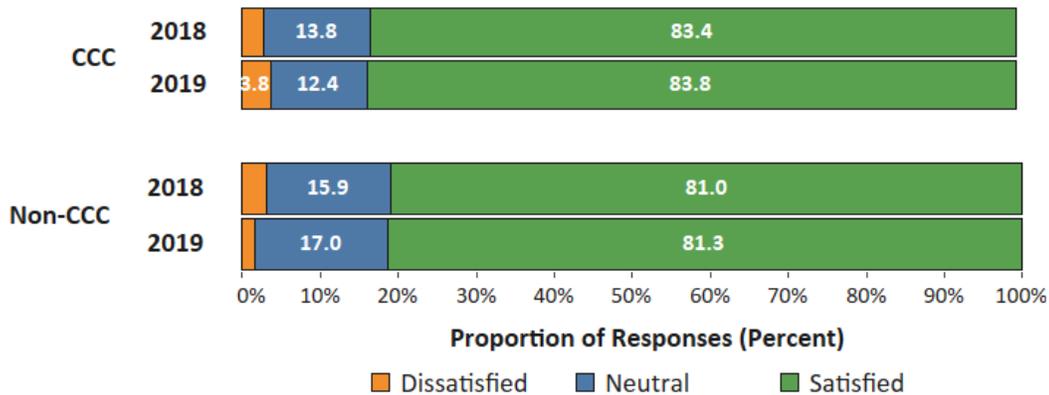
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Problem with Paperwork for Health Plan

Question 53 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, responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 5-27 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-27: CCC and Non-CCC Comparisons: Satisfaction with Health Plan – Problem with Paperwork for Health Plan Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

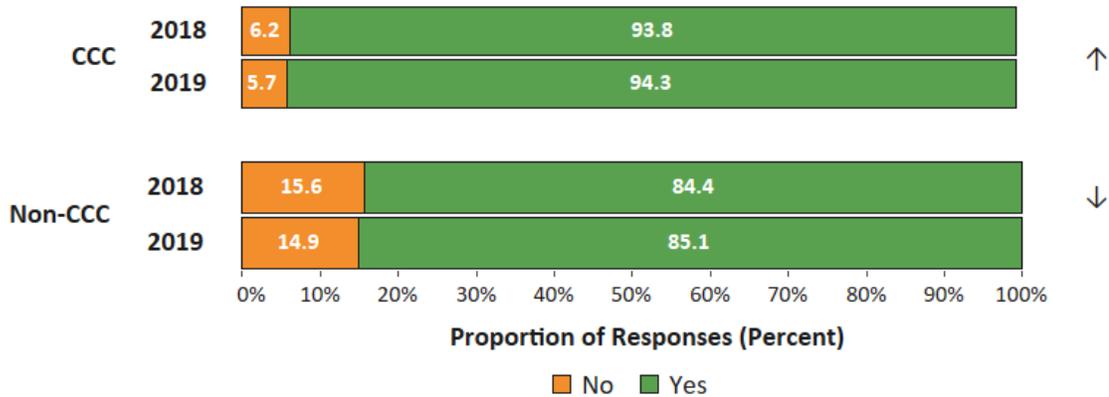
Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

## Satisfaction with Health Care Providers

### Had Personal Doctor

Question 30 asked parents or caretakers whether their child had one person as their personal doctor. For this question, responses were classified into two categories: No and Yes. Figure 5-28 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-28: CCC and Non-CCC Comparisons: Satisfaction with Health Care Providers – Had Personal Doctor Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there was one statistically significant difference observed for this measure.

- The score for CCC respondents was significantly higher than that of non-CCC respondents.

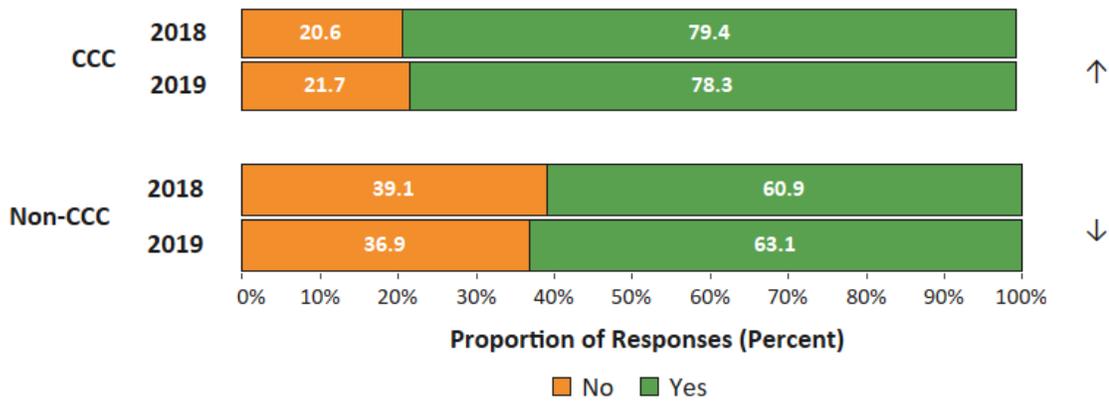
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Child Able to Talk with Doctors

Question 35 asked parents or caretakers whether their child was able to talk with doctors about their health care. For this question, responses were classified into two categories: No and Yes. Figure 5-29 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-29: CCC and Non-CCC Comparisons: Satisfaction with Health Care Providers – Child Able to Talk with Doctors Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there was one statistically significant difference observed for this measure.

- The score for CCC respondents was significantly higher than that of non-CCC respondents.

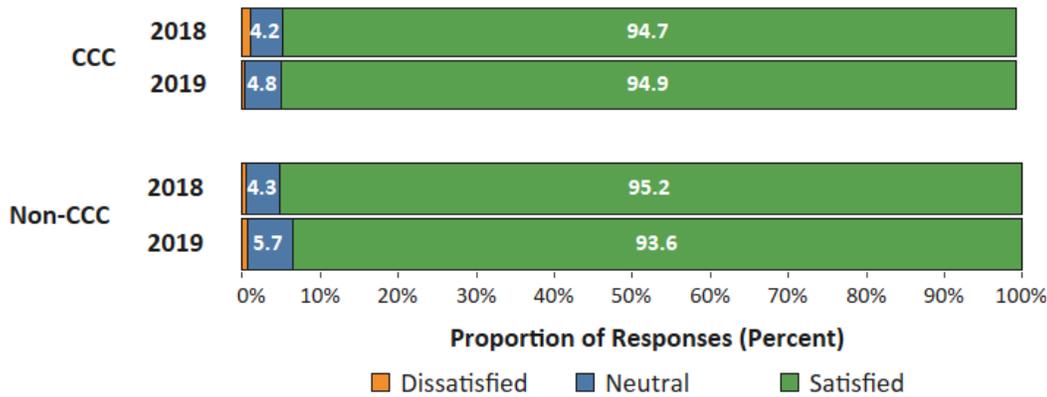
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Doctors Explained Things in Way Child Could Understand

Question 36 asked the parents or caretakers of child members often their child’s personal doctor explained things to their child in a way they could understand. For this question, responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 5-30 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-30: CCC and Non-CCC Comparisons: Satisfaction with Health Care Providers – Doctor Explained Things in Way Child Could Understand Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

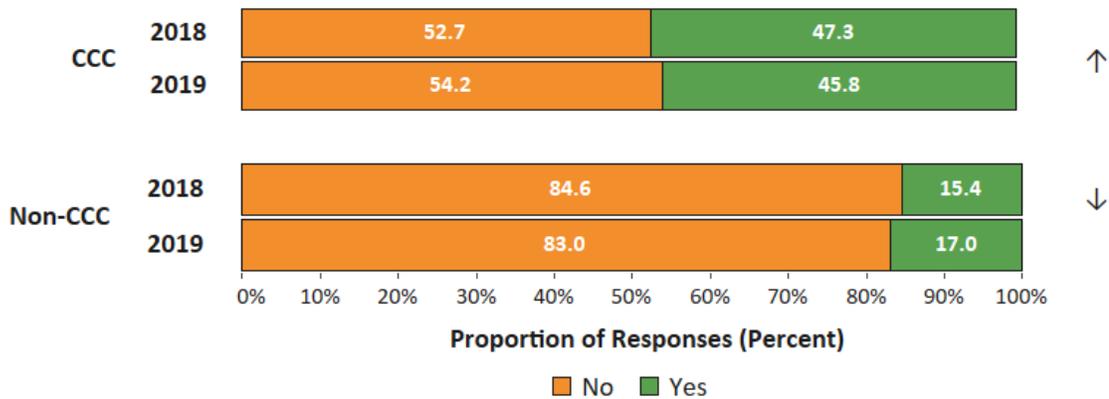
Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

## Access to Care

### Tried to Make Appointment to See Specialist

Question 45 asked whether the parents or caretakers of child members tried to make an appointment to see a specialist. For this question, responses were classified into two categories: No and Yes. Figure 5-31 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-31: CCC and Non-CCC Comparisons: Access to Care – Tried to Make Appointment to See Specialist Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there was one statistically significant difference observed for this measure.

- The score for CCC respondents was significantly higher than that of non-CCC respondents.

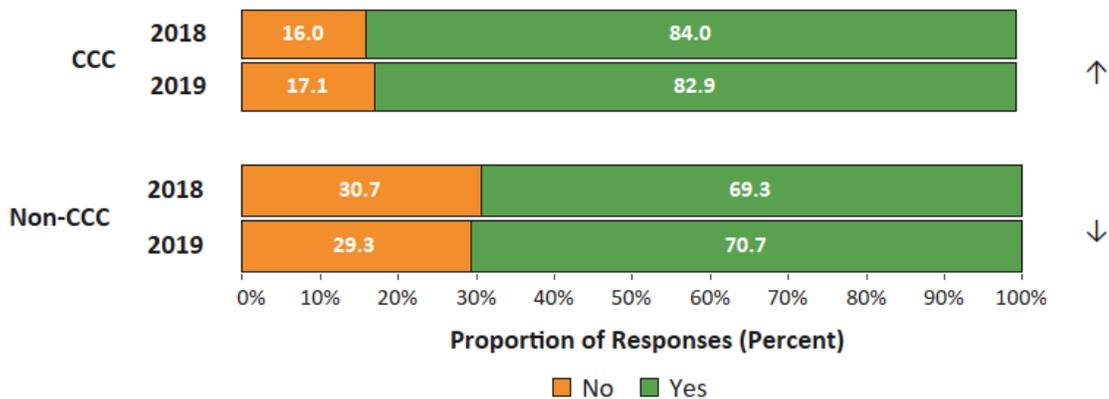
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### 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, responses were classified into two categories: No and Yes. Figure 5-32 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-32: CCC and Non-CCC Comparisons: Access to Care – Made Appointments for Health Care Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there was one statistically significant difference observed for this measure.

- The score for CCC respondents was significantly higher than that of non-CCC respondents.

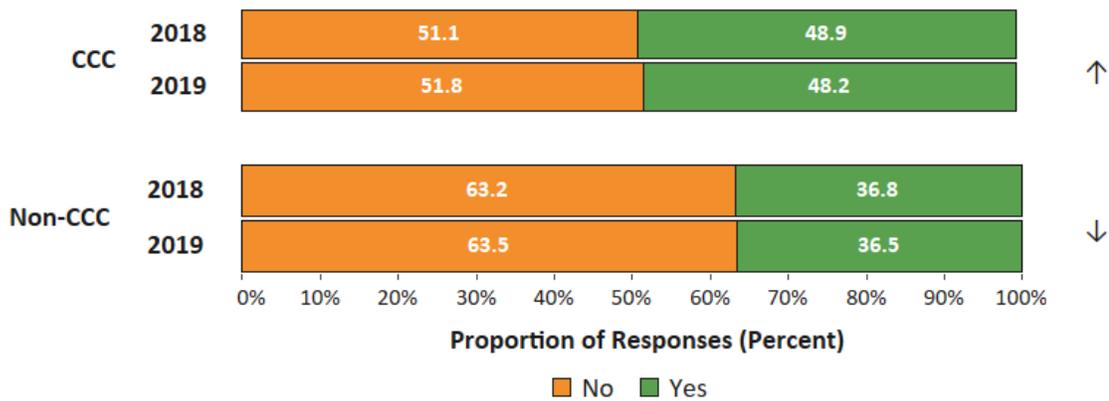
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### 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, responses were classified into two categories: No and Yes. Figure 5-33 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-33: CCC and Non-CCC Comparisons: Access to Care – Had Illness, Injury, or Condition that Needed Care Right Away Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there was one statistically significant difference observed for this measure.

- The score for CCC respondents was significantly higher than that of non-CCC respondents.

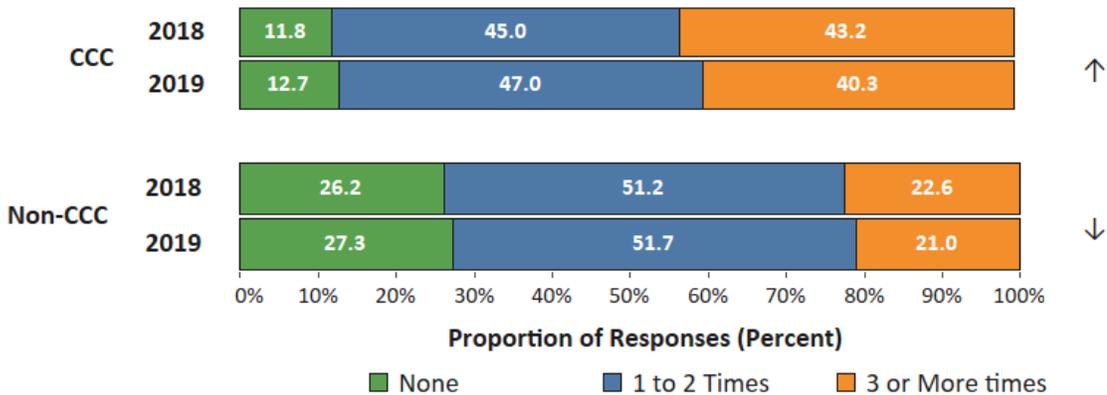
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Utilization of Services

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, responses were classified into three categories: “3 or More Times,” “1 to 2 Times,” and “None.” Figure 5-34 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-34: CCC and Non-CCC Comparisons: Utilization of Services – Number of Visits to the Doctor’s Office Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there was one statistically significant difference observed for this measure.

- The score for CCC respondents was significantly higher than that of non-CCC respondents.

### Trending Analysis

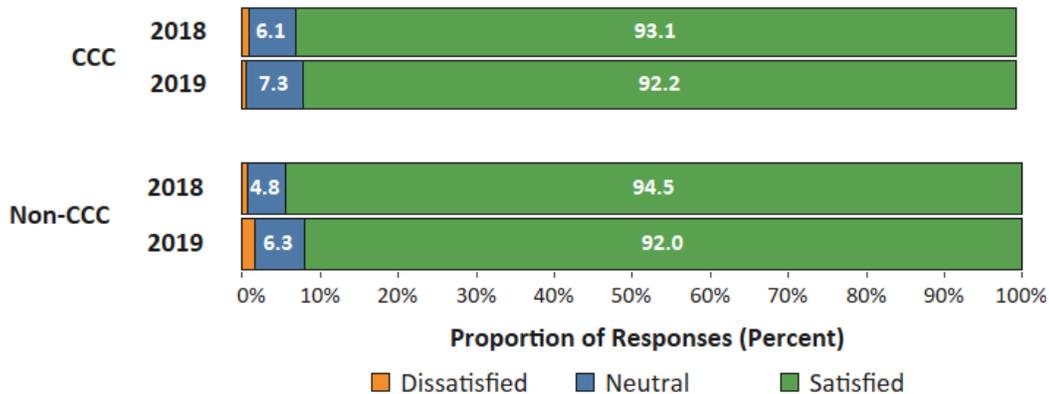
Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

## 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. Responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 5-35 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-35: CCC and Non-CCC Comparisons: Access to Prescription Medicines Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.

The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

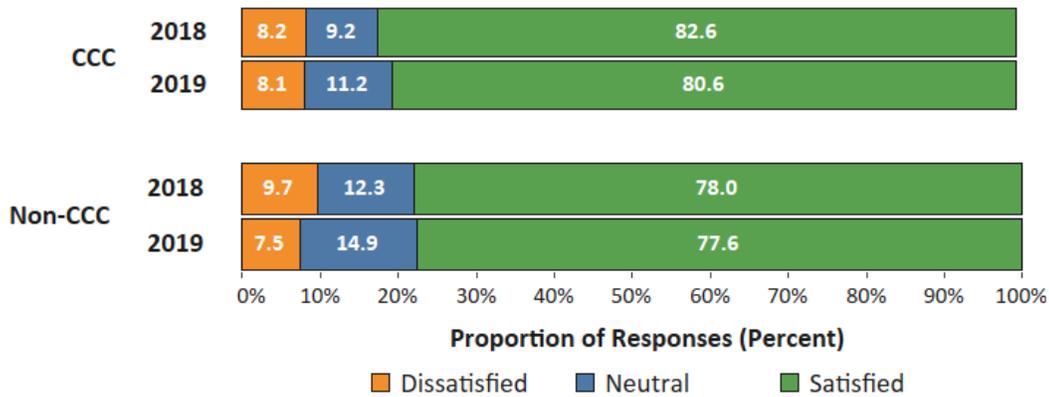
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Access to Specialized Services

Three questions (questions 20, 23, and 26 in the CAHPS Child Medicaid Health Plan Survey) were asked to parents or caretakers of children to assess how often it was easy for their child to obtain access to specialized services. Responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 5-36 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-36: CCC and Non-CCC Comparisons: Access to Specialized Services Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

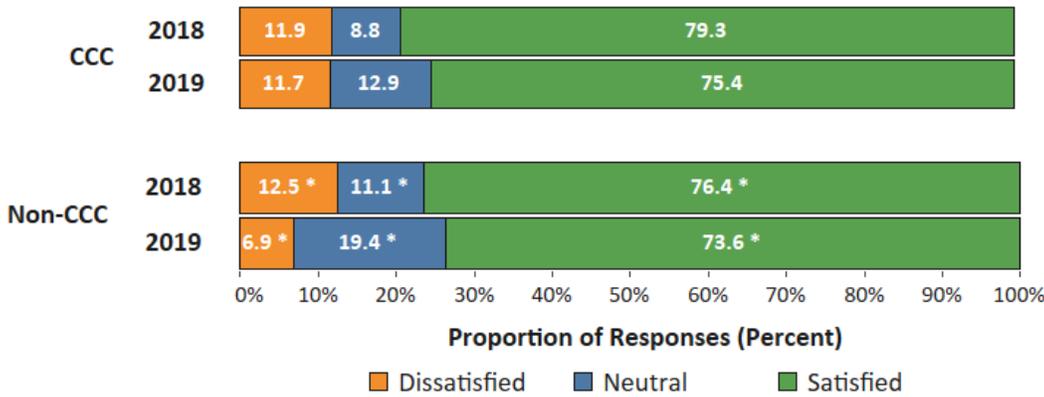
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

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

Question 20 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how easy it was to get special medical equipment or devices for their child. Figure 5-37 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-37: CCC and Non-CCC Comparisons: Access to Specialized Services – Special Medical Equipment Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

\* Caution should be exercised when interpreting these results since scores were based fewer than 100 respondents.

**Comparative Analysis**

Overall, there were no statistically significant differences observed for this measure.

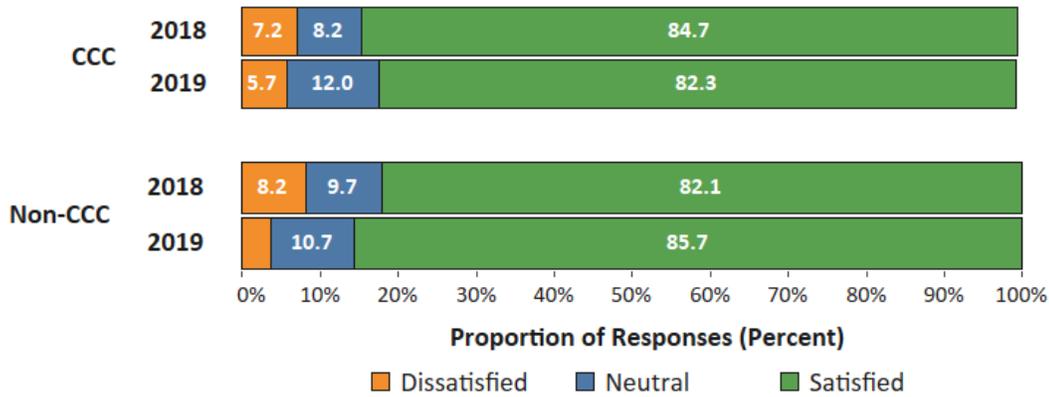
**Trending Analysis**

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Access to Specialized Services: Special Therapy

Question 23 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how easy it was to get special therapy for their child. Figure 5-38 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-38: CCC and Non-CCC Comparisons: Access to Specialized Services – Special Therapy Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

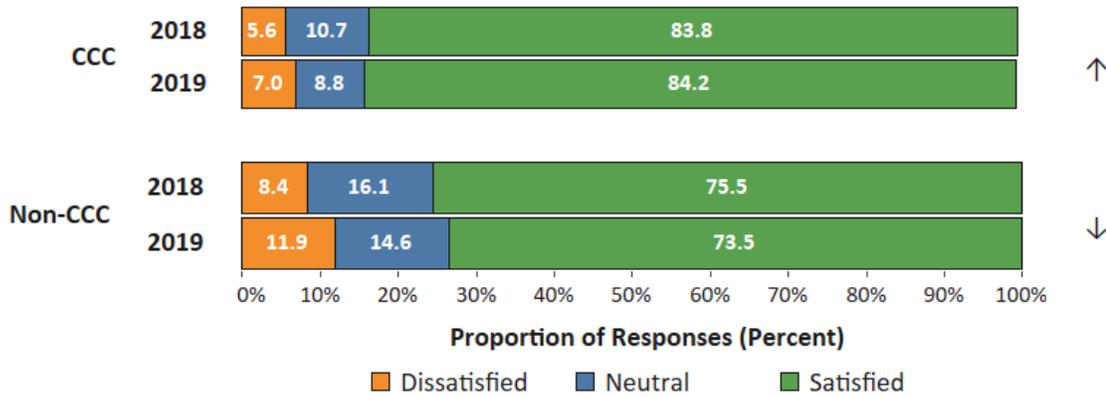
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Access to Specialized Services: Treatment or Counseling

Question 26 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how easy it was to get treatment or counseling for their child. Figure 5-39 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-39: CCC and Non-CCC Comparisons: Access to Specialized Services – Treatment or Counseling Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there was one statistically significant difference observed for this measure.

- The score for CCC respondents was significantly higher than that of non-CCC respondents.

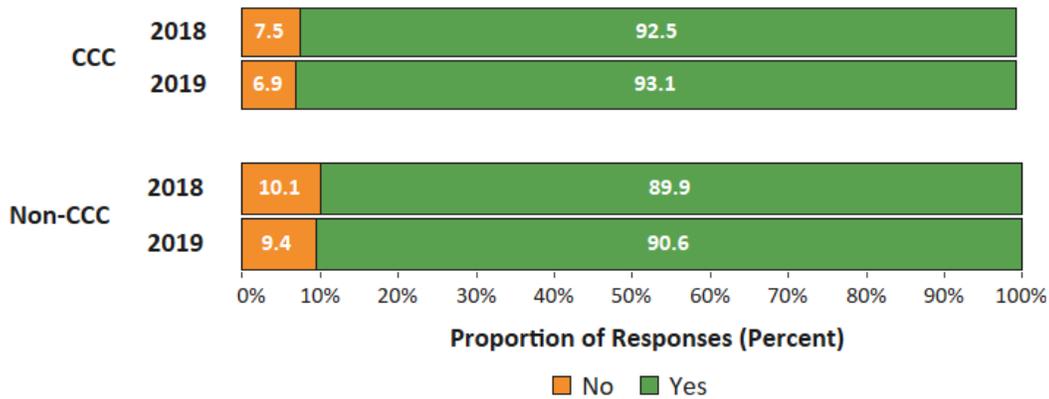
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### 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 38, 43, and 44 in the CAHPS Child Medicaid Health Plan Survey), responses were classified into two categories: No and Yes. Figure 5-40 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-40: CCC and Non-CCC Comparisons: FCC: Personal Doctor Who Knows Child Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

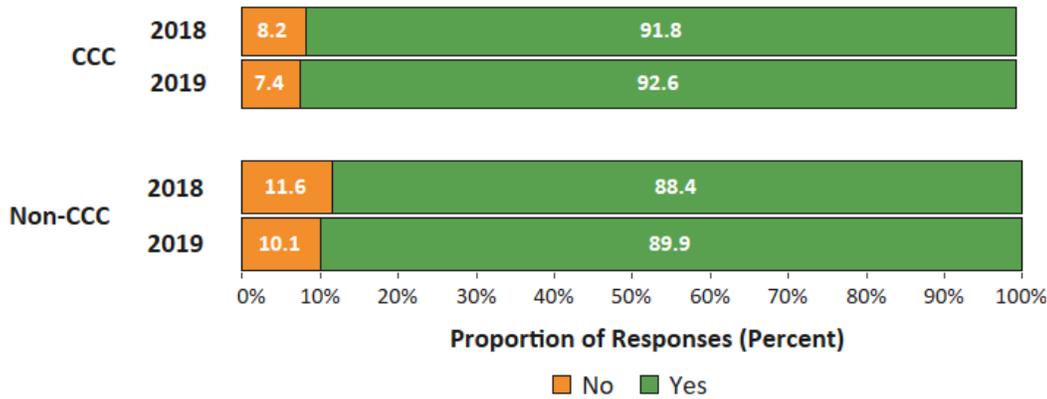
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

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

Question 38 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers if their child’s doctor talked about how their child is feeling, growing, or behaving. Figure 5-41 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-41: CCC and Non-CCC Comparisons: FCC: Personal Doctor Who Knows Child – Talked About How Child Feeling, Growing, or Behaving Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

**Comparative Analysis**

Overall, there were no statistically significant differences observed for this measure.

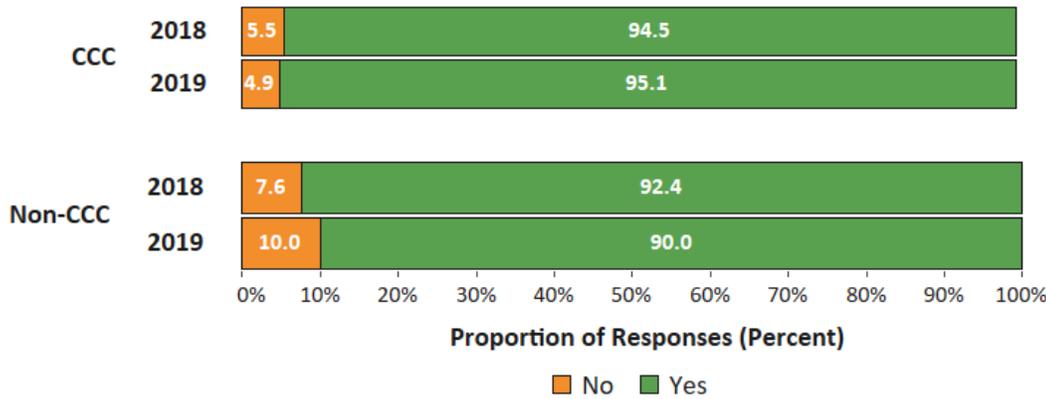
**Trending Analysis**

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

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

Question 43 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers to assess if their child’s doctor understands how their child’s medical, behavioral, or other health conditions affect their child’s life. Figure 5-42 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-42: CCC and Non-CCC Comparisons: FCC: Personal Doctor Who Knows Child – Understands How Health Conditions Affect Child’s Life Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

**Comparative Analysis**

Overall, there were no statistically significant differences observed for this measure.

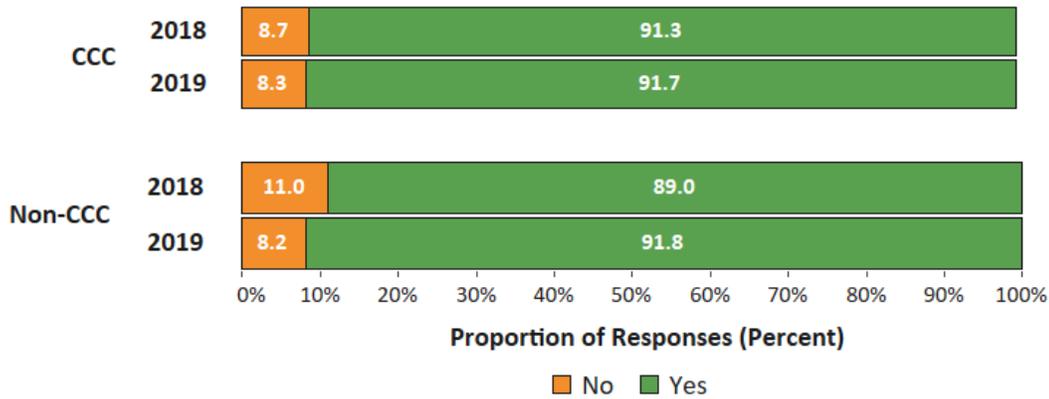
**Trending Analysis**

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

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

Question 44 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers to assess if their child’s doctor understands how their child’s medical, behavioral, or other health conditions affect their family’s life. Figure 5-43 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-43: CCC and Non-CCC Comparisons: FCC: Personal Doctor Who Knows Child – Understands How Health Conditions Affect Family’s Life Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

**Comparative Analysis**

Overall, there were no statistically significant differences observed for this measure.

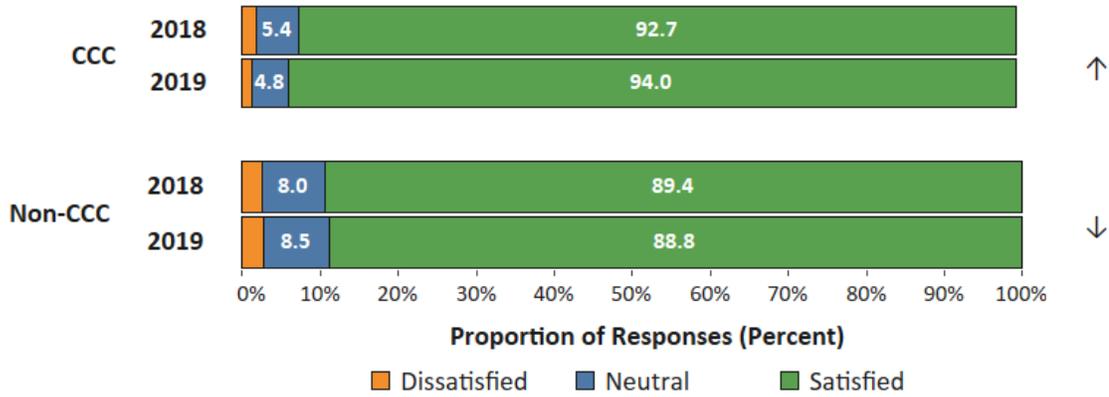
**Trending Analysis**

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### FCC: Getting Needed Information

Question 9 in the CAHPS Child Medicaid Health Plan Survey asked the parents or caretakers of child members how often their questions were answered by doctors or other health providers. Responses were classified into three categories: Dissatisfied (Never), Neutral (Sometimes), and Satisfied (Usually/Always). Figure 5-44 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-44: CCC and Non-CCC Comparisons: FCC: Getting Needed Information Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there was one statistically significant difference observed for this measure.

- The score for CCC respondents was significantly higher than that of non-CCC respondents.

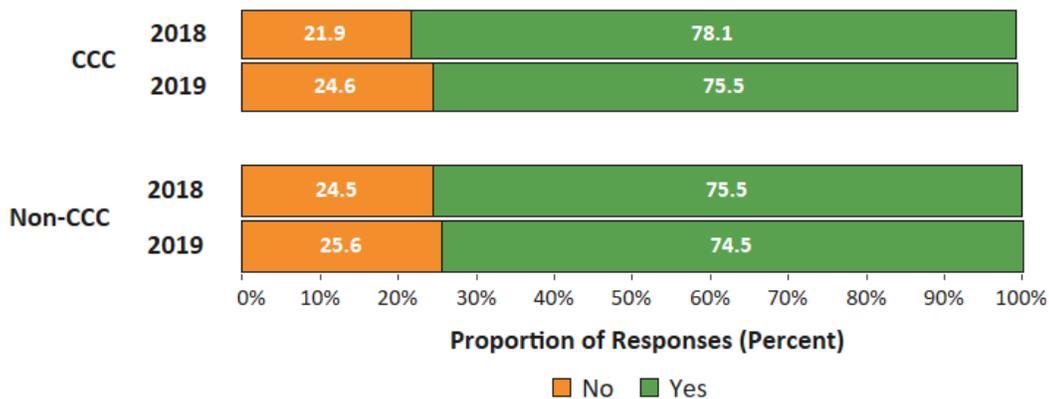
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Coordination of Care for Children with Chronic Conditions

Two questions (questions 18 and 29 in the CAHPS Child Medicaid Health Plan Survey) were asked to assess whether parents or caretakers of children received help in coordinating their child’s care. For each of these questions, responses were classified into two categories: No and Yes. Figure 5-45 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-45: CCC and Non-CCC Comparisons: Coordination of Care for CCC Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

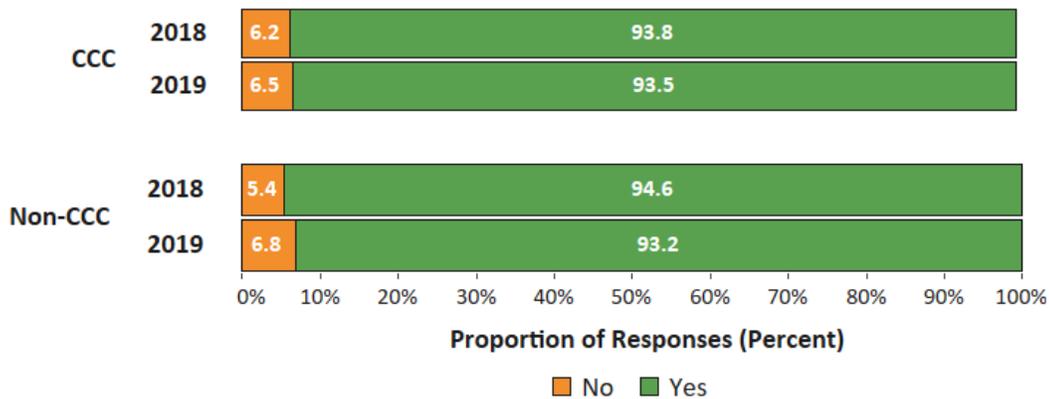
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Coordination of Care for CCC – Received Help in Contacting School or Daycare

Question 18 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers if their child’s doctor or other health providers helped contact their child’s school or daycare. Figure 5-46 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-46: CCC and Non-CCC Comparisons: Coordination of Care for CCC – Received Help in Contacting School or Daycare Response Category Percentages



**Statistical Significance Notes:**

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
 The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

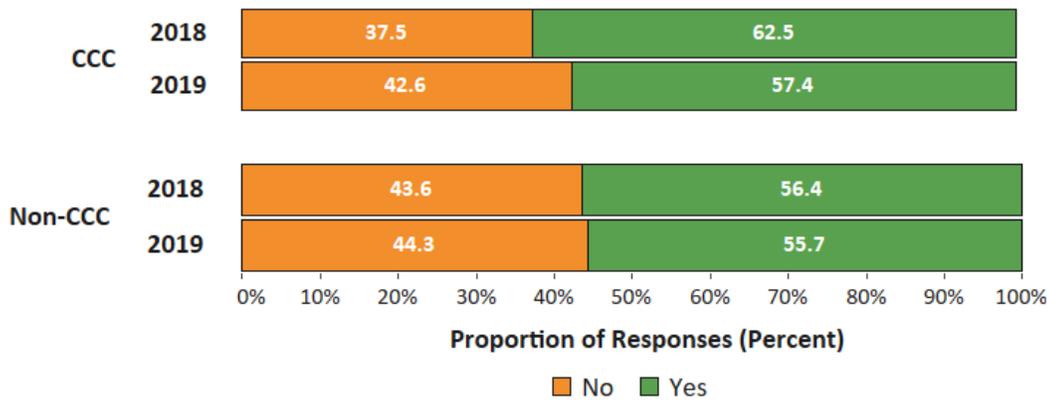
### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

### Coordination of Care for CCC – Health Plan or Doctors Helped Coordinate Child’s Care

Question 29 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers if they received help coordinating their child’s care. Figure 5-47 depicts the percentage of respondents in each of the response categories for the CCC and non-CCC populations.

Figure 5-47: CCC and Non-CCC Comparisons: Coordination of Care for CCC – Health Plan or Doctors Helped Coordinate Child’s Care Response Category Percentages



#### Statistical Significance Notes:

- ↑ Indicates the score is significantly higher than the other population's score for 2019
- ↓ Indicates the score is significantly lower than the other population's score for 2019
- ▲ Indicates the population's score for 2019 is significantly higher than the score for 2018
- ▼ Indicates the population's score for 2019 is significantly lower than the score for 2018

Response category percentages may not add up to 100.0% due to rounding.  
The score for the plans refer to the top box responses of "Usually/Always" or "Yes" or "3 or more times".

### Comparative Analysis

Overall, there were no statistically significant differences observed for this measure.

### Trending Analysis

Overall, there were no statistically significant differences between scores in 2019 and scores in 2018 for this measure.

## Cross-Tabulations

This section presents cross-tabulations of the survey responses for several survey items stratified by certain demographic variables for the CCC population only. The demographic variables included in the tables below are: gender, age, race, ethnicity, respondent education, and general health status.<sup>27</sup>

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

Question 30 in the CAHPS Child Medicaid Health Plan Survey asked whether child members had one person as their personal doctor. The table below displays the cross-tabulations for this survey item for the CCC population.

Table 5-1: Had Personal Doctor

Ohio Medicaid Managed Care Program – CCC Population					
Demographic Variables		Yes		No	
		Number	Percent	Number	Percent
Gender	Male	865	94.54	50	5.46
	Female	666	94.07	42	5.93
Age	Less than 2	40	97.56	1	2.44
	2 - 7	363	93.56	25	6.44
	8 - 12	530	93.97	34	6.03
	13 - 17	598	94.92	32	5.08
Race (Q77)	White	1007	95.63	46	4.37
	Black/African American	219	92.41	18	7.59
	Other	261	91.90	23	8.10
Ethnicity (Q76)	Hispanic	109	87.90	15	12.10
	Non-Hispanic	1369	95.27	68	4.73
Respondent Education (Q80)	High School or less	679	92.51	55	7.49
	Some College or more	791	96.35	30	3.65
General Health Status (Q58)	Excellent/Very good	922	95.15	47	4.85
	Good	470	93.81	31	6.19
	Fair/Poor	133	91.72	12	8.28
Total		1531	94.33	92	5.67

<sup>27</sup> The Other race category consists of the following: Multiracial, Asian, American Indian or Alaskan Native, Native Hawaiian or Other Pacific Islander, and those not identified by any of the races listed here or in the table.

### Coordination of Care

Question 40 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often their child's doctor seemed informed and up-to-date about care received from other doctors. The table below displays the cross-tabulations for this survey item for the CCC population.

Table 5-2: Coordination of Care

Ohio Medicaid Managed Care Program – CCC Population							
Demographic Variables		Never		Sometimes		Usually/Always	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	21	5.24	30	7.48	350	87.28
	Female	18	4.90	36	9.81	313	85.29
Age	Less than 2	2	6.45	3	9.68	26	83.87
	2 - 7	15	7.85	18	9.42	158	82.72
	8 - 12	10	4.17	18	7.50	212	88.33
	13 - 17	12	3.92	27	8.82	267	87.25
Race (Q77)	White	29	5.65	40	7.80	444	86.55
	Black/African American	6	6.19	11	11.34	80	82.47
	Other	3	2.14	13	9.29	124	88.57
Ethnicity (Q76)	Hispanic	4	7.41	4	7.41	46	85.19
	Non-Hispanic	35	5.06	60	8.67	597	86.27
Respondent Education (Q80)	High School or less	13	4.13	28	8.89	274	86.98
	Some College or more	24	5.61	36	8.41	368	85.98
General Health Status (Q58)	Excellent/Very good	23	5.26	32	7.32	382	87.41
	Good	12	4.92	25	10.25	207	84.84
	Fair/Poor	4	4.71	9	10.59	72	84.71
Total		39	5.08	66	8.59	663	86.33

**Utilization of Services: Number of Doctor's Office or Clinic Visits**

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 member visited the emergency room). The table below displays the cross-tabulations for this survey item for the CCC population.

**Table 5-3: Number of Doctor's Office or Clinic Visits in Last Six Months**

Ohio Medicaid Managed Care Program – CCC Population							
Demographic Variables		None		1 or 2		3 or More	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	115	12.85	430	48.04	350	39.11
	Female	85	12.43	313	45.76	286	41.81
Age	Less than 2	3	8.33	9	25.00	24	66.67
	2 - 7	36	9.52	172	45.50	170	44.97
	8 - 12	73	13.30	263	47.91	213	38.80
	13 - 17	88	14.29	299	48.54	229	37.18
Race (Q77)	White	129	12.63	452	44.27	440	43.10
	Black/African American	32	13.73	128	54.94	73	31.33
	Other	32	11.55	137	49.46	108	38.99
Ethnicity (Q76)	Hispanic	15	13.04	53	46.09	47	40.87
	Non-Hispanic	174	12.39	661	47.08	569	40.53
Respondent Education (Q80)	High School or less	100	14.06	333	46.84	278	39.10
	Some College or more	87	10.83	379	47.20	337	41.97
General Health Status (Q58)	Excellent/Very good	135	14.17	482	50.58	336	35.26
	Good	59	12.27	208	43.24	214	44.49
	Fair/Poor	5	3.60	49	35.25	85	61.15
Total		200	12.67	743	47.06	636	40.28

### Who Helped Coordinate Child's Care

Question 84 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members who helped to coordinate their child's care. The table below displays the cross-tabulations for this survey item for the CCC population.

Table 5-4: Who Helped You Coordinate Your Child's Care

Ohio Medicaid Managed Care Program – CCC Population											
Demographic Variables		Someone From the Health Plan		Someone From the Doctor's Office or Clinic		Someone From Another Organization		A Friend or Family Member		You	
		Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Gender	Male	12	1.63	94	12.79	31	4.22	49	6.67	549	74.69
	Female	17	2.99	66	11.62	25	4.40	35	6.16	425	74.82
Age	Less than 2	2	6.90	3	10.34	1	3.45	4	13.79	19	65.52
	2 - 7	3	0.96	39	12.54	12	3.86	24	7.72	233	74.92
	8 - 12	8	1.76	50	10.99	21	4.62	29	6.37	347	76.26
	13 - 17	16	3.15	68	13.39	22	4.33	27	5.31	375	73.82
Race (Q77)	White	18	2.08	107	12.34	34	3.92	57	6.57	651	75.09
	Black/ African American	6	3.16	20	10.53	17	8.95	10	5.26	137	72.11
	Other	5	2.15	32	13.73	5	2.15	16	6.87	175	75.11
Ethnicity (Q76)	Hispanic	2	2.08	14	14.58	5	5.21	9	9.38	66	68.75
	Non-Hispanic	27	2.27	141	11.88	50	4.21	73	6.15	896	75.48
Respondent Education (Q80)	High School or less	14	2.33	88	14.67	29	4.83	51	8.50	418	69.67
	Some College or more	14	2.03	71	10.30	27	3.92	30	4.35	547	79.39
General Health Status (Q58)	Excellent/ Very good	14	1.76	87	10.93	26	3.27	48	6.03	621	78.02
	Good	9	2.30	55	14.07	17	4.35	29	7.42	281	71.87
	Fair/Poor	6	5.41	17	15.32	12	10.81	6	5.41	70	63.06
Total		29	2.23	160	12.28	56	4.30	84	6.45	974	74.75

***Satisfaction with Help Received to Coordinate Child's Care***

Question 85 in the CAHPS Child Medicaid Health Plan Surveys asked parents or caretakers of child members how satisfied they were with the help they received to coordinate their child's care. The following tables display the cross-tabulations for this survey item for the CCC population.

**Table 5-5: Satisfaction with Help Received to Coordinate Your Child's Care**

Ohio Medicaid Managed Care Program – CCC Population							
Demographic Variables		Very Dissatisfied/ Dissatisfied		Neither Dissatisfied Nor Satisfied		Satisfied/ Very Satisfied	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	41	5.68	58	8.03	623	86.29
	Female	22	4.04	44	8.09	478	87.87
Age	Less than 2	3	8.57	6	17.14	26	74.29
	2 - 7	13	4.15	29	9.27	271	86.58
	8 - 12	22	4.95	29	6.53	393	88.51
	13 - 17	25	5.27	38	8.02	411	86.71
Race (Q77)	White	43	5.23	84	10.22	695	84.55
	Black/African American	11	5.56	9	4.55	178	89.90
	Other	9	3.86	9	3.86	215	92.27
Ethnicity (Q76)	Hispanic	6	6.00	6	6.00	88	88.00
	Non-Hispanic	55	4.81	95	8.31	993	86.88
Respondent Education (Q80)	High School or less	40	6.36	33	5.25	556	88.39
	Some College or more	23	3.70	69	11.11	529	85.19
General Health Status (Q58)	Excellent/Very good	38	5.17	57	7.76	640	87.07
	Good	19	4.79	30	7.56	348	87.66
	Fair/Poor	5	3.97	15	11.90	106	84.13
Total		63	4.98	102	8.06	1101	86.97

### How Child's Body is Growing

Question 86 in the CAHPS Child Medicaid Health Plan Survey asked if respondents talked to someone at their child's personal doctor's office about how their child's body is growing. The table below displays the cross-tabulations for this survey item for the CCC population.

Table 5-6: How Child's Body is Growing

Ohio Medicaid Managed Care Program – CCC Population					
Demographic Variables		Yes		No	
		Number	Percent	Number	Percent
Gender	Male	591	72.43	225	27.57
	Female	431	70.20	183	29.80
Age	Less than 2	31	86.11	5	13.89
	2 - 7	266	75.35	87	24.65
	8 - 12	372	73.23	136	26.77
	13 - 17	353	66.23	180	33.77
Race (Q77)	White	655	69.02	294	30.98
	Black/African American	166	77.57	48	22.43
	Other	194	76.08	61	23.92
Ethnicity (Q76)	Hispanic	76	69.72	33	30.28
	Non-Hispanic	924	71.35	371	28.65
Respondent Education (Q80)	High School or less	464	69.46	204	30.54
	Some College or more	544	73.32	198	26.68
General Health Status (Q58)	Excellent/Very good	618	71.86	242	28.14
	Good	303	69.02	136	30.98
	Fair/Poor	97	78.23	27	21.77
Total		1022	71.47	408	28.53

### Received Information About Child's Health

Question 87 in the CAHPS Child Medicaid Health Plan Survey asked if respondents received all the information they wanted about their child's health from their child's personal doctor. The table below displays the cross-tabulations for this survey item for the CCC population.

Table 5-7: Received Information About Child's Health

Ohio Medicaid Managed Care Program – CCC Population							
Demographic Variables		Never		Sometimes		Usually/Always	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	23	2.81	26	3.18	769	94.01
	Female	18	2.90	25	4.03	578	93.08
Age	Less than 2	1	2.63	4	10.53	33	86.84
	2 - 7	6	1.73	16	4.62	324	93.64
	8 - 12	11	2.17	12	2.36	485	95.47
	13 - 17	23	4.20	19	3.47	505	92.32
Race (Q77)	White	32	3.34	27	2.82	898	93.83
	Black/African American	4	1.89	11	5.19	197	92.92
	Other	5	1.94	12	4.65	241	93.41
Ethnicity (Q76)	Hispanic	2	1.90	7	6.67	96	91.43
	Non-Hispanic	38	2.91	42	3.21	1227	93.88
Respondent Education (Q80)	High School or less	25	3.67	29	4.25	628	92.08
	Some College or more	16	2.17	19	2.57	703	95.26
General Health Status (Q58)	Excellent/Very good	22	2.55	18	2.09	822	95.36
	Good	16	3.64	25	5.68	399	90.68
	Fair/Poor	3	2.27	7	5.30	122	92.42
Total		41	2.85	51	3.54	1347	93.61

### Customer Service Composite

Questions 50 and 51 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members how often they were satisfied with the customer service at their child’s health plan. The table below displays the cross-tabulations for this composite measure for the CCC population.

Table 5-8: Customer Service Composite

Ohio Medicaid Managed Care Program – CCC Population							
Demographic Variables		Never		Sometimes		Usually/Always	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	6	2.3	15	6.0	221	91.7
	Female	6	2.5	17	7.6	201	89.9
Age	Less than 2	0	0.0	0	0.0	19	100.0
	2 - 7	3	2.4	8	7.2	94	90.4
	8 - 12	6	3.1	13	7.2	155	89.5
	13 - 17	3	1.8	12	6.8	154	91.4
Race (Q77)	White	5	1.8	13	4.8	252	93.3
	Black/African American	1	1.1	12	13.2	75	85.6
	Other	3	2.6	7	6.8	86	90.5
Ethnicity (Q76)	Hispanic	1	2.2	6	12.6	37	85.0
	Non-Hispanic	10	2.3	23	6.0	370	91.5
Respondent Education (Q80)	High School or less	3	1.3	14	6.5	198	92.0
	Some College or more	7	2.8	15	6.5	210	90.7
General Health Status (Q58)	Excellent/Very good	8	2.9	16	6.2	233	90.8
	Good	4	2.4	10	6.7	129	90.8
	Fair/Poor	0	0.0	6	9.1	60	90.8
Total		11	2.4	32	6.8	422	90.8

### Rating of All Health Care

Question 14 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members to rate all 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.” The table below displays the cross-tabulations for this survey item for the CCC population.

Table 5-9: Rating of All Health Care

Ohio Medicaid Managed Care Program – CCC Population							
Demographic Variables		0 to 4		5 to 7		8 to 10	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	7	0.91	71	9.20	694	89.90
	Female	8	1.34	80	13.42	508	85.23
Age	Less than 2	0	0.00	5	15.15	28	84.85
	2 - 7	6	1.76	39	11.44	296	86.80
	8 - 12	3	0.64	52	11.02	417	88.35
	13 - 17	6	1.15	55	10.54	461	88.31
Race (Q77)	White	9	1.02	93	10.50	784	88.49
	Black/African American	4	1.99	23	11.44	174	86.57
	Other	2	0.83	25	10.42	213	88.75
Ethnicity (Q76)	Hispanic	1	1.01	6	6.06	92	92.93
	Non-Hispanic	13	1.07	136	11.15	1071	87.79
Respondent Education (Q80)	High School or less	6	0.99	69	11.39	531	87.62
	Some College or more	9	1.27	72	10.14	629	88.59
General Health Status (Q58)	Excellent/Very good	4	0.49	66	8.14	741	91.37
	Good	8	1.91	55	13.16	355	84.93
	Fair/Poor	3	2.24	30	22.39	101	75.37
Total		15	1.10	151	11.04	1202	87.87

### Rating of Health Plan

Question 54 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members 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.” The table below displays the cross-tabulations for this survey item for the CCC population.

Table 5-10: Rating of Health Plan

Ohio Medicaid Managed Care Program – CCC Population							
Demographic Variables		0 to 4		5 to 7		8 to 10	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	16	1.77	125	13.83	763	84.40
	Female	11	1.58	102	14.63	584	83.79
Age	Less than 2	0	0.00	4	10.00	36	90.00
	2 - 7	7	1.83	51	13.32	325	84.86
	8 - 12	10	1.80	78	14.05	467	84.14
	13 - 17	10	1.61	94	15.09	519	83.31
Race (Q77)	White	19	1.83	141	13.61	876	84.56
	Black/African American	6	2.59	28	12.07	198	85.34
	Other	2	0.70	50	17.54	233	81.75
Ethnicity (Q76)	Hispanic	2	1.63	11	8.94	110	89.43
	Non-Hispanic	24	1.69	209	14.73	1186	83.58
Respondent Education (Q80)	High School or less	7	0.96	102	14.03	618	85.01
	Some College or more	17	2.10	115	14.23	676	83.66
General Health Status (Q58)	Excellent/Very good	11	1.15	105	10.94	844	87.92
	Good	11	2.24	85	17.28	396	80.49
	Fair/Poor	5	3.52	37	26.06	100	70.42
Total		27	1.69	227	14.18	1347	84.13

### Rating of Overall Mental or Emotional Health

Question 59 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members to rate their child's overall mental or emotional health. The table below displays the cross-tabulations for this survey item for the CCC population.

Table 5-11: Rating of Overall Mental or Emotional Health

Ohio Medicaid Managed Care Program – CCC Population							
Demographic Variables		Excellent/Very Good		Good		Fair/Poor	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	321	35.16	330	36.14	262	28.70
	Female	265	37.54	251	35.55	190	26.91
Age	Less than 2	32	80.00	5	12.50	3	7.50
	2 - 7	177	45.74	127	32.82	83	21.45
	8 - 12	199	35.35	214	38.01	150	26.64
	13 - 17	178	28.30	235	37.36	216	34.34
Race (Q77)	White	393	37.50	377	35.97	278	26.53
	Black/African American	81	34.03	76	31.93	81	34.03
	Other	99	34.86	107	37.68	78	27.46
Ethnicity (Q76)	Hispanic	47	38.21	43	34.96	33	26.83
	Non-Hispanic	523	36.47	512	35.70	399	27.82
Respondent Education (Q80)	High School or less	256	34.74	261	35.41	220	29.85
	Some College or more	310	38.08	293	36.00	211	25.92
General Health Status (Q58)	Excellent/Very good	468	48.25	335	34.54	167	17.22
	Good	96	19.24	200	40.08	203	40.68
	Fair/Poor	20	13.79	44	30.34	81	55.86
Total		586	36.20	581	35.89	452	27.92

### Rating of Overall Health

Question 58 in the CAHPS Child Medicaid Health Plan Survey asked parents or caretakers of child members to rate their child's overall health. The table below displays the cross-tabulations for this survey item for the CCC population.

Table 5-12: Rating of Overall Health

Ohio Medicaid Managed Care Program – CCC Population							
Demographic Variables		Excellent/Very Good		Good		Fair/Poor	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	575	62.70	269	29.33	73	7.96
	Female	401	56.56	236	33.29	72	10.16
Age	Less than 2	22	55.00	15	37.50	3	7.50
	2 - 7	245	62.98	109	28.02	35	9.00
	8 - 12	364	64.31	157	27.74	45	7.95
	13 - 17	345	54.68	224	35.50	62	9.83
Race (Q77)	White	651	61.82	312	29.63	90	8.55
	Black/African American	131	54.81	84	35.15	24	10.04
	Other	170	59.44	89	31.12	27	9.44
Ethnicity (Q76)	Hispanic	71	58.20	36	29.51	15	12.30
	Non-Hispanic	876	60.75	439	30.44	127	8.81
Respondent Education (Q80)	High School or less	410	55.71	258	35.05	68	9.24
	Some College or more	534	64.96	218	26.52	70	8.52
General Health Status (Q58)	Excellent/Very good	976	100.00	0	0.00	0	0.00
	Good	0	0.00	505	100.00	0	0.00
	Fair/Poor	0	0.00	0	0.00	145	100.00
Total		976	60.02	505	31.06	145	8.92

### 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 child's health plan. The table below displays the cross-tabulations for this survey item for the CCC population.

Table 5-13: Access to Prescription Medicines

Ohio Medicaid Managed Care Program – CCC Population							
Demographic Variables		Never		Sometimes		Usually/Always	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	6	0.79	57	7.48	699	91.73
	Female	1	0.17	42	7.05	553	92.79
Age	Less than 2	0	0.00	2	6.45	29	93.55
	2 - 7	4	1.33	22	7.33	274	91.33
	8 - 12	2	0.43	46	9.83	420	89.74
	13 - 17	1	0.18	29	5.19	529	94.63
Race (Q77)	White	6	0.68	64	7.22	817	92.11
	Black/African American	0	0.00	11	5.76	180	94.24
	Other	1	0.41	20	8.26	221	91.32
Ethnicity (Q76)	Hispanic	0	0.00	10	10.31	87	89.69
	Non-Hispanic	6	0.49	85	7.01	1122	92.50
Respondent Education (Q80)	High School or less	3	0.48	36	5.71	591	93.81
	Some College or more	4	0.59	57	8.43	615	90.98
General Health Status (Q58)	Excellent/Very good	4	0.51	44	5.66	730	93.83
	Good	2	0.45	36	8.11	406	91.44
	Fair/Poor	1	0.78	18	13.95	110	85.27
Total		7	0.52	99	7.29	1252	92.19

### Access to Specialized Services CCC Composite

A series of three questions (questions 20, 23, and 26 in the CAHPS Child Medicaid Health Plan Survey) was asked in order to assess how often it was easy for child members to obtain access to specialized services. The table below displays the cross-tabulations for this composite measure for the CCC population.

Table 5-14: Access to Specialized Services CCC Composite

Ohio Medicaid Managed Care Program – CCC Population							
Demographic Variables		Never		Sometimes		Usually/Always	
		Number	Percent	Number	Percent	Number	Percent
Gender	Male	22	9.9	22	8.9	213	81.1
	Female	11	5.8	23	13.9	156	80.2
Age	Less than 2	0	0.0	1	9.1	13	96.9
	2 - 7	12	10.1	13	12.7	99	77.2
	8 - 12	13	7.2	15	11.1	127	81.7
	13 - 17	12	13.1	17	11.0	131	80.3
Race (Q77)	White	19	7.9	27	9.3	243	82.7
	Black/African American	7	12.4	10	16.1	50	71.4
	Other	4	4.3	8	12.6	69	83.1
Ethnicity (Q76)	Hispanic	0	0.0	2	7.6	33	88.3
	Non-Hispanic	27	8.2	41	11.5	325	80.2
Respondent Education (Q80)	High School or less	11	6.8	18	9.6	165	83.5
	Some College or more	20	9.2	25	11.7	191	79.1
General Health Status (Q58)	Excellent/Very good	18	7.8	20	8.8	205	83.3
	Good	10	8.5	19	13.9	113	77.6
	Fair/Poor	4	7.8	7	11.9	49	80.2
Total		32	8.1	45	11.2	369	80.6

### Coordination of Care for CCC Composite

Two questions (questions 18 and 29 in the CAHPS Child Medicaid Health Plan Survey) were asked in order to assess whether parents or caretakers of child members received help in coordinating their child’s care. The table below displays the cross-tabulations for this composite measure for the CCC population.

Table 5-15: Coordination of Care for CCC Composite

Ohio Medicaid Managed Care Program – CCC Population					
Demographic Variables		Yes		No	
		Number	Percent	Number	Percent
Gender	Male	181	74.1	97	25.9
	Female	149	76.9	71	23.1
Age	Less than 2	9	70.4	4	29.6
	2 - 7	84	72.9	42	27.1
	8 - 12	114	75.3	58	24.7
	13 - 17	123	76.9	64	23.1
Race (Q77)	White	215	74.9	117	25.1
	Black/African American	45	76.6	19	23.4
	Other	64	77.1	28	22.9
Ethnicity (Q76)	Hispanic	29	77.2	11	22.7
	Non-Hispanic	290	74.9	154	25.1
Respondent Education (Q80)	High School or less	144	78.9	58	21.0
	Some College or more	175	72.8	105	27.2
General Health Status (Q58)	Excellent/Very good	165	76.0	95	24.0
	Good	111	72.2	60	27.8
	Fair/Poor	53	84.2	13	15.7
Total		330	75.4	168	25.6

### CCC Population Categories

A series of questions in the CAHPS 5.0H Child Medicaid Health Plan Survey that focused on specific health care needs and conditions was used to identify children with chronic conditions. Child members with affirmative responses to all 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 the same age do.
- Child needed or used special therapy.
- Child needed or used mental health treatment or counseling.

The following tables display the cross-tabulations for these survey items for the CCC population.

Table 5-16: Use of or Need for Prescription Medicines

Ohio Medicaid Managed Care Program – CCC Population					
Demographic Variables		Yes		No	
		Number	Percent	Number	Percent
Gender	Male	696	75.57	225	24.43
	Female	518	72.65	195	27.35
Age	Less than 2	26	63.41	15	36.59
	2 - 7	250	64.27	139	35.73
	8 - 12	434	76.27	135	23.73
	13 - 17	504	79.37	131	20.63
Race (Q77)	White	781	73.68	279	26.32
	Black/African American	181	75.73	58	24.27
	Other	214	74.83	72	25.17
Ethnicity (Q76)	Hispanic	81	65.32	43	34.68
	Non-Hispanic	1087	75.07	361	24.93
Respondent Education (Q80)	High School or less	550	74.22	191	25.78
	Some College or more	614	74.42	211	25.58
General Health Status (Q58)	Excellent/Very good	686	70.29	290	29.71
	Good	405	80.20	100	19.80
	Fair/Poor	118	81.38	27	18.62
Total		1214	74.30	420	25.70

Table 5-17: Above Average Use or Need for Medical, Mental Health, or Education Services

Ohio Medicaid Managed Care Program – CCC Population					
Demographic Variables		Yes		No	
		Number	Percent	Number	Percent
Gender	Male	530	57.55	391	42.45
	Female	371	52.03	342	47.97
Age	Less than 2	19	46.34	22	53.66
	2 - 7	208	53.47	181	46.53
	8 - 12	324	56.94	245	43.06
	13 - 17	350	55.12	285	44.88
Race (Q77)	White	580	54.72	480	45.28
	Black/African American	130	54.39	109	45.61
	Other	169	59.09	117	40.91
Ethnicity (Q76)	Hispanic	70	56.45	54	43.55
	Non-Hispanic	802	55.39	646	44.61
Respondent Education (Q80)	High School or less	378	51.01	363	48.99
	Some College or more	494	59.88	331	40.12
General Health Status (Q58)	Excellent/Very good	473	48.46	503	51.54
	Good	311	61.58	194	38.42
	Fair/Poor	110	75.86	35	24.14
Total		901	55.14	733	44.86

Table 5-18: Functional Limitations Compared with Others of Same Age

Ohio Medicaid Managed Care Program – CCC Population					
Demographic Variables		Yes		No	
		Number	Percent	Number	Percent
Gender	Male	325	35.29	596	64.71
	Female	213	29.87	500	70.13
Age	Less than 2	20	48.78	21	51.22
	2 - 7	127	32.65	262	67.35
	8 - 12	191	33.57	378	66.43
	13 - 17	200	31.50	435	68.50
Race (Q77)	White	349	32.92	711	67.08
	Black/African American	87	36.40	152	63.60
	Other	94	32.87	192	67.13
Ethnicity (Q76)	Hispanic	42	33.87	82	66.13
	Non-Hispanic	484	33.43	964	66.57
Respondent Education (Q80)	High School or less	237	31.98	504	68.02
	Some College or more	287	34.79	538	65.21
General Health Status (Q58)	Excellent/Very good	247	25.31	729	74.69
	Good	207	40.99	298	59.01
	Fair/Poor	83	57.24	62	42.76
Total		538	32.93	1096	67.07

Table 5-19: Use of or Need for Specialized Therapies

Ohio Medicaid Managed Care Program – CCC Population					
Demographic Variables		Yes		No	
		Number	Percent	Number	Percent
Gender	Male	257	27.90	664	72.10
	Female	150	21.04	563	78.96
Age	Less than 2	18	43.90	23	56.10
	2 - 7	151	38.82	238	61.18
	8 - 12	141	24.78	428	75.22
	13 - 17	97	15.28	538	84.72
Race (Q77)	White	271	25.57	789	74.43
	Black/African American	60	25.10	179	74.90
	Other	70	24.48	216	75.52
Ethnicity (Q76)	Hispanic	40	32.26	84	67.74
	Non-Hispanic	359	24.79	1089	75.21
Respondent Education (Q80)	High School or less	184	24.83	557	75.17
	Some College or more	210	25.45	615	74.55
General Health Status (Q58)	Excellent/Very good	206	21.11	770	78.89
	Good	128	25.35	377	74.65
	Fair/Poor	71	48.97	74	51.03
Total		407	24.91	1227	75.09

Table 5-20: Treatment or Counseling for Emotional or Developmental Problems

Ohio Medicaid Managed Care Program – CCC Population					
Demographic Variables		Yes		No	
		Number	Percent	Number	Percent
Gender	Male	597	64.82	324	35.18
	Female	416	58.35	297	41.65
Age	Less than 2	15	36.59	26	63.41
	2 - 7	219	56.30	170	43.70
	8 - 12	371	65.20	198	34.80
	13 - 17	408	64.25	227	35.75
Race (Q77)	White	675	63.68	385	36.32
	Black/African American	141	59.00	98	41.00
	Other	173	60.49	113	39.51
Ethnicity (Q76)	Hispanic	78	62.90	46	37.10
	Non-Hispanic	904	62.43	544	37.57
Respondent Education (Q80)	High School or less	441	59.51	300	40.49
	Some College or more	535	64.85	290	35.15
General Health Status (Q58)	Excellent/Very good	598	61.27	378	38.73
	Good	311	61.58	194	38.42
	Fair/Poor	97	66.90	48	33.10
Total		1013	62.00	621	38.00

## 6. Summary of Results

### Adult and General Child Results

#### National Comparisons

Overall member ratings for four CAHPS global ratings, four CAHPS composite measures, and one individual item measure were compared to NCQA’s 2019 Quality Compass National Percentiles.<sup>28</sup> Table 6-1 includes the high-scoring CAHPS measures (i.e., five [★★★★★] stars) and the low-scoring CAHPS measures (i.e., one [★] star) for the Ohio Medicaid Managed Care Program and each MCP for the adult population.

Table 6-1: Adult Population National Comparisons Summary—High and Low Scoring Measures

	Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
<b>Global Ratings</b>						
Rating of Health Plan			★★★★★			
Rating of All Health Care						
Rating of Personal Doctor			★			
Rating of Specialist Seen Most Often					★	
<b>Composite Measures</b>						
Getting Needed Care	★★★★★		★★★★★		★★★★★	
Getting Care Quickly		★★★★★				
How Well Doctors Communicate						
Customer Service						★★★★★
<b>Individual Item Measure</b>						
Coordination of Care			★			
Note: ★★★★★ Represents high-scoring CAHPS measure      ★ Represents low-scoring CAHPS measure						

- CareSource scored at or above the 90th percentile for the Rating of Health Plan global rating.
- The Ohio Medicaid Managed Care Program, CareSource, and Paramount scored at or above the 90th percentile for the Getting Needed Care composite measure.
- Buckeye scored at or above the 90th percentile for the Getting Care Quickly composite measure.
- UnitedHealthcare scored at or above the 90th percentile for the Customer Service composite measure.
- CareSource scored below the 25th percentile for the Rating of Personal Doctor global rating and the Coordination of Care individual item measure.
- Paramount scored below the 25th percentile for the Rating of Specialist Seen Most Often global rating.

Table 6-2 includes the high-scoring CAHPS measures (i.e., five [★★★★★] stars) and the low-scoring CAHPS measures (i.e., one [★] star) for the Ohio Medicaid Managed Care Program and each MCP for the general child population.

<sup>28</sup> National Committee for Quality Assurance. *Quality Compass 2019*. Washington, DC: NCQA; 2019.  
2019 Medicaid Managed Care Program CAHPS Full Report  
Rev. July 20, 2020

Table 6-2: General Child Population National Comparisons Summary—High Scoring and Low Scoring Measures

	Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
<b>Global Ratings</b>						
Rating of Health Plan				★		
Rating of All Health Care						
Rating of Personal Doctor					★	
Rating of Specialist Seen Most Often		★★★★★*	★*	★★★★★	★★★★★*	
<b>Composite Measures</b>						
Getting Needed Care					★★★★★	
Getting Care Quickly						
How Well Doctors Communicate						
Customer Service					★★★★★*	
<b>Individual Item Measure</b>						
Coordination of Care			★★★★★			
Note: ★★★★★ Represents high scoring CAHPS measure      ★ Represents low scoring CAHPS measure						

\* Caution should be exercised when interpreting these results since scores were based on fewer than 100 respondents.

- Buckeye, Molina, and Paramount scored at or above the 90th percentile for the Rating of Specialist Seen Most Often global rating.
- Paramount scored at or above the 90th percentile for the Getting Needed Care Quickly composite measure and the Customer Service composite measure.
- CareSource scored at or above the 90th percentile for the Coordination of Care individual item measure.
- Molina scored below the 25th percentile for the Rating of Health Plan global rating.
- Paramount scored below the 25th percentile for the Rating of Personal Doctor global rating.
- CareSource scored below the 25th percentile for the Rating of Specialist Seen Most Often global rating.

### Statewide Comparisons

The Statewide Comparisons analysis results are grouped into four main statistically significant categories: 1) statistically significantly higher than the program average, 2) statistically significantly lower than the program average, 3) 2019 score statistically significantly higher than 2018 score, and 4) 2019 score statistically significantly lower than 2018 score. The categories are based on the assignment of arrows and triangles to the MCPS' scores on the global ratings, composite measures, composite items, individual item measures, additional items, CCC composites, CCC composite items, and CCC items. Table 6-3 and Table 6-4 show the highlights from these comparisons for the adult and general child populations, respectively.

Table 6-3: Adult Population Statewide Comparisons

Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
	▲ How Well Doctors Communicate	▲ Getting Needed Care			▲ Customer Service
		▲ Getting Needed Care: Saw a Specialist			▲ Made Appointments for Health Care
↑ Statistically significantly higher than the program average ↓ Statistically significantly lower than the program average			▲ 2019 score statistically significantly higher than 2018 score ▼ 2019 score statistically significantly lower than 2018 score		

The results from the Statewide Comparisons revealed that Buckeye, CareSource, and UnitedHealthcare had statistically significant findings for the adult population.

- Buckeye’s score was statistically significantly higher in 2019 than in 2018 on one measure.
- CareSource’s score was statistically significantly higher in 2019 than in 2018 on two measures.
- UnitedHealthcare’s score was statistically significantly higher in 2019 than in 2018 on two measures.

Table 6-4: General Child Population Statewide Comparisons

Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
	↓ Got Information or Help from Customer Service		↓ Rating of Health Plan	↑ Tried to Make Appointment to See Specialist	↓ Filled Out Paperwork
	▼ Filled Out Paperwork		▲ How Well Doctors Communicate: Doctors Explained Things in Way They Could Understand	↓ Access to Specialized Services: Problem Obtaining Special Medical Equipment*	↑ Tried to Make Appointment to See Specialist
			↓ Had Personal Doctor		
			↓ Tried to Make Appointment to See Specialist		
			▼ Coordination of Care: Child Received Help from Provider(s) in Contacting School or Daycare*		
↑ Statistically significantly higher than the program average			▲ 2019 score statistically significantly higher than 2018 score		
↓ Statistically significantly lower than the program average			▼ 2019 score statistically significantly lower than 2018 score		

\*Caution should be exercised when interpreting this result since scores were based on fewer than 100 respondents.

The results from the Statewide Comparisons revealed that Buckeye, Molina, Paramount, and UnitedHealthcare had statistically significant findings for the general child population.

- Buckeye’s score was statistically significantly lower than the program average on one measure. Buckeye’s score was statistically significantly lower in 2019 than in 2018 on one measure.
- Molina’s score was statistically significantly lower than the program average on three measures. Molina’s score was statistically significantly higher in 2019 than in 2018 on one measure. Conversely, Molina’s score was statistically significantly lower in 2019 than in 2018 on one measure.
- Paramount’s score was statistically significantly higher than the program average on one measure. Conversely, Paramount’s score was statistically significantly lower than the program average on one measure.
- UnitedHealthcare’s score was statistically significantly higher than the program average on one measure. Conversely, UnitedHealthcare’s score was statistically significantly lower than the program average on one measure.

### Priority Areas for Quality Improvement

The priority areas (i.e., survey composite items) for each of the three global ratings were assessed separately for the adult and general child populations. For each population, findings are provided for the program and each MCP. For this analysis, a mean problem score was calculated for each composite item; a correlation analysis was performed to compare global rating performance to composite items' mean problem scores; and each composite item was assigned to a priority level. Please refer to Appendix A: Priority Matrix Data for a complete list of problem scores and correlation coefficients calculated for each rating by program/plan. Table 6-5 through Table 6-10 show the top priority areas (as indicated by a ✓) for each global rating at the program and MCP levels for the adult and general child populations.

Table 6-5: Priority Areas Analysis—Adult Rating of Health Plan Summary Table

Priority Areas	Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
Q4. In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?	✓	✓	✓	✓	✓	✓
Q6. In the last 6 months, how often did you get an appointment for a check-up or routine care at a doctor's office or clinic as soon as you needed?	✓	✓	✓		✓	
Q12. When you talked about starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for you?			✓			
Q14. In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?	✓	✓	✓	✓	✓	✓
Q20. In the last 6 months, how often did your personal doctor spend enough time with you?						✓
Q25. In the last 6 months, how often did you get an appointment to see a specialist as soon as you needed?	✓	✓	✓	✓		✓
Q31. In the last 6 months, how often did your health plan's customer service give you the information or help you needed?	✓	✓	✓		✓	

Table 6-6: Priority Areas Analysis—General Child Rating of Health Plan Summary Table

Priority Areas	Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
Q6. In the last 6 months, when you made an appointment for a check-up or routine care for your child at a doctor's office or clinic, how often did you get an appointment as soon as your child needed?		✓	✓	✓	✓	
Q12. Did you and a doctor or other health provider talk about the reasons you might not want your child to take a medicine?					✓	
Q13. When you talked about your child starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for your child?		✓				✓
Q15. In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?	✓	✓	✓	✓	✓	✓
Q37. In the last 6 months, how often did your child's personal doctor spend enough time with your child?	✓			✓		
Q46. In the last 6 months, how often did you get an appointment for your child to see a specialist as soon as you needed?	✓	✓	✓		✓	✓
Q50. In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed?	✓	✓	✓	✓		✓
Q51. In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect?			✓			

Table 6-7: Priority Areas Analysis—Adult Rating of All Health Care Summary Table

Priority Areas	Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
Q4. In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?	✓	✓	✓	✓	✓	✓

Priority Areas	Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
Q12. When you talked about starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for you?				✓		
Q14. In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?	✓	✓	✓	✓	✓	✓
Q20. In the last 6 months, how often did your personal doctor spend enough time with you?						✓
Q25. In the last 6 months, how often did you get an appointment to see a specialist as soon as you needed?	✓		✓	✓	✓	✓

Table 6-8: Priority Areas Analysis—General Child Rating of All Health Care Summary Table

Priority Areas	Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
Q6. In the last 6 months, when you made an appointment for a check-up or routine care for your child at a doctor's office or clinic, how often did you get an appointment as soon as your child needed?	✓	✓	✓		✓	
Q11. Did you and a doctor or other health provider talk about the reasons you might want your child to take a medicine?						✓
Q12. Did you and a doctor or other health provider talk about the reasons you might not want your child to take a medicine?					✓	
Q13. When you talked about your child starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for your child?	✓		✓			✓
Q15. In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?	✓	✓	✓	✓	✓	✓

Priority Areas	Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
Q37. In the last 6 months, how often did your child's personal doctor spend enough time with your child?	✓			✓		
Q46. In the last 6 months, how often did you get an appointment for your child to see a specialist as soon as you needed?		✓		✓	✓	
Q50. In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed?	✓	✓		✓		
Q51. In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect?		✓				

Table 6-9: Priority Areas Analysis—Adult Rating of Personal Doctor Summary Table

Priority Areas	Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
Q4. In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?	✓		✓	✓	✓	✓
Q6. In the last 6 months, how often did you get an appointment for a check-up or routine care at a doctor's office or clinic as soon as you needed?			✓			
Q12. When you talked about starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for you?		✓				
Q14. In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?	✓	✓	✓	✓	✓	✓
Q20. In the last 6 months, how often did your personal doctor spend enough time with you?						✓
Q25. In the last 6 months, how often did you get an appointment to see a specialist as soon as you needed?	✓	✓				✓

Priority Areas	Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
Q31. In the last 6 months, how often did your health plan's customer service give you the information or help you needed?				✓		

Table 6-10: Priority Areas Analysis—General Child Rating of Personal Doctor Summary Table

Priority Areas	Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
Q4. In the last 6 months, when your child needed care right away, how often did your child get care as soon as he or she needed?						
Q6. In the last 6 months, when you made an appointment for a check-up or routine care for your child at a doctor's office or clinic, how often did you get an appointment as soon as your child needed?			✓		✓	
Q13. When you talked about your child starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for your child?	✓		✓			✓
Q15. In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?	✓	✓	✓	✓	✓	✓
Q37. In the last 6 months, how often did your child's personal doctor spend enough time with your child?	✓			✓	✓	
Q46. In the last 6 months, how often did you get an appointment for your child to see a specialist as soon as you needed?					✓	
Q50. In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed?	✓	✓		✓		✓
Q51. In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect?		✓				

The following CAHPS items (i.e., survey questions) were priority areas for the Ohio Medicaid Managed Care Program adult population for Rating of Health Plan (RHP), Rating of All Health Care (RHC), and/or Rating of Personal Doctor (RPD):

- Q4. Got care as soon as needed (RHP, RHC, RPD).
- Q6. Got an appointment as soon as needed (RHP).
- Q14. Easy to get treatment needed (RHP, RHC, RPD).
- Q25. Got an appointment with specialist as soon as needed (RHP, RHC, RPD).
- Q31. Received information or help from health plan customer service (RHP).

The following CAHPS items (i.e., survey questions) were priority areas for the Ohio Medicaid Managed Care Program general child population for RHP, RHC, and/or RPD:

- Q6. Got an appointment as soon as needed (RHC).
- Q13. Doctor asked you what you thought was best for you. (RHC, RPD)
- Q15. Easy to get treatment needed (RHP, RHC, RPD).
- Q37. Personal doctor spent enough time with your child (RHP, RHC, RPD).
- Q46. Got an appointment with specialist as soon as needed (RHP).
- Q50. Received information or help from health plan customer service (RHP, RHC, RPD).

The following CAHPS items (i.e., survey questions) were priority areas for the Buckeye adult population for RHP, RHC, and/or RPD:

Q4. Got care as soon as needed (RHP, RHC).

- Q6. Got an appointment as soon as needed (RHP).
- Q12. Doctor asked you what you thought was best for you (RPD).
- Q14. Easy to get treatment needed (RHP, RHC, RPD).
- Q25. Got an appointment with specialist as soon as needed (RHP, RPD).
- Q31. Received information or help from health plan customer service (RHP).

The following CAHPS items (i.e., survey questions) were priority areas for the Buckeye child population for RHP, RHC, and/or RPD:

- Q6. Got an appointment as soon as needed (RHP, RHC).
- Q13. Doctor asked you what you thought was best for you. (RHP)
- Q15. Easy to get treatment needed (RHP, RHC, RPD).
- Q46. Got an appointment with specialist as soon as needed (RHP, RHC).
- Q50. Received information or help from health plan customer service (RHP, RHC, RPD).
- Q51. Health plan customer service treated you with courtesy and respect (RHC, RPD).

The following CAHPS items (i.e., survey questions) were priority areas for the CareSource adult population for RHP, RHC, and/or RPD:

Q4. Got care as soon as needed (RHP, RHC, RPD).

- Q6. Got an appointment as soon as needed (RHP, RPD).
- Q12. Doctor asked you what you thought was best for you (RHP).
- Q14. Easy to get treatment needed (RHP, RHC, RPD).
- Q25. Got an appointment with specialist as soon as needed (RHP, RHC).
- Q31. Received information or help from health plan customer service (RHP).

The following CAHPS items (i.e., survey questions) were priority areas for the CareSource child population for RHP, RHC, and/or RPD:

- Q6. Got an appointment as soon as needed (RHP, RHC, RPD).
- Q13. Doctor asked you what you thought was best for you. (RHC, RPD)
- Q15. Easy to get treatment needed (RHP, RHC, RPD).
- Q46. Got an appointment with specialist as soon as needed (RHP).
- Q50. Received information or help from health plan customer service (RHP).
- Q51. Health plan customer service treated you with courtesy and respect (RHP).

The following CAHPS items (i.e., survey questions) were priority areas for the Molina adult population for RHP, RHC, and/or RPD:

Q4. Got care as soon as needed (RHP, RHC, RPD).

- Q12. Doctor asked you what you thought was best for you (RHC).
- Q14. Easy to get treatment needed (RHP, RHC, RPD).
- Q25. Got an appointment with specialist as soon as needed (RHP, RHC).
- Q31. Received information or help from health plan customer service (RPD).

The following CAHPS items (i.e., survey questions) were priority areas for the Molina child population for RHP, RHC, and/or RPD:

- Q6. Got an appointment as soon as needed (RHP).
- Q15. Easy to get treatment needed (RHP, RHC, RPD).
- Q37. Personal doctor spent enough time with your child (RHP, RHC, RPD).
- Q46. Got an appointment with specialist as soon as needed (RHC).
- Q50. Received information or help from health plan customer service (RHP, RHC, RPD).

The following CAHPS items (i.e., survey questions) were priority areas for the Paramount adult population for RHP, RHC, and/or RPD:

Q4. Got care as soon as needed (RHP, RHC, RPD).

- Q6. Got an appointment as soon as needed (RHP).
- Q14. Easy to get treatment needed (RHP, RHC, RPD).
- Q25. Got an appointment with specialist as soon as needed (RHC).
- Q31. Received information or help from health plan customer service (RHP).

The following CAHPS items (i.e., survey questions) were priority areas for the Paramount child population for RHP, RHC, and/or RPD:

- Q6. Got an appointment as soon as needed (RHP, RHC, RPD).
- Q12. Doctor explained reasons not to take a medication (RHP, RHC).
- Q15. Easy to get treatment needed (RHP, RHC, RPD).
- Q37. Personal doctor spent enough time with your child (RPD).
- Q46. Got an appointment with specialist as soon as needed (RHP, RHC, RPD).

The following CAHPS items (i.e., survey questions) were priority areas for the UnitedHealthcare adult population RHP, RHC, and/or RPD:

Q4. Got care as soon as needed (RHP, RHC, RPD).

- Q14. Easy to get treatment needed (RHP, RHC, RPD).
- Q20. Personal doctor spent enough time with you (RHP, RHC, RPD).
- Q25. Got an appointment with specialist as soon as needed (RHP, RHC, RPD).

The following CAHPS items (i.e., survey questions) were priority areas for the UnitedHealthcare child population for RHP, RHC, and/or RPD:

- Q11. Doctor explained reasons to take a medication (RHC).
- Q13. Doctor asked you what you thought was best for you. (RHP, RHC, RPD)
- Q15. Easy to get treatment needed (RHP, RHC, RPD).
- Q46. Got an appointment with specialist as soon as needed (RHP).
- Q50. Received information or help from health plan customer service (RHP, RPD).

### **Adult and General Child Cross-Tabulations**

Cross-Tabulations of the survey responses for 13 survey items, stratified by certain demographic variables, were presented in the “Adult and General Child Results” section. A summary of findings for each item is described below.

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

The percentage of adult members who had a personal doctor:

- Is highest for members 55 years of age or older.
- Is highest for White members.
- Decreases as general health improves.

For the general child population, the percentage of parents or caretakers who reported their child had a personal doctor:

- Is highest for children 13 to 17 years of age.
- Is highest for White child members.
- Increases with the parent’s or caretaker’s level of education.

#### ***Coordination of Care***

The percentage of adult members who reported that their personal doctor usually or always seemed informed and up-to-date about the care they received from other doctors:

- Is higher for Female members.
- Is highest for members 55 years of age or older.
- Is highest for White members.
- Is higher for Hispanic members.

For the general child population, the percentage of parents or caretakers who reported their child’s personal doctor usually or always seemed informed and up-to-date about the care their child received from other doctors:

- Is higher for Male child members.
- Is lowest for children 8 to 12 years of age.
- Is highest for Black/African American child members.

#### ***Utilization of Services: Number of Doctor’s Office or Clinic Visits***

The percentage of adult members who reported having three or more visits to the doctor’s office or clinic in the last six months:

- Is higher for Female members.
- Is highest for members 45 to 54 years of age.

- Decreases as general health improves.

For the general child population, the percentage of parents or caretakers who reported their child had three or more visits to the doctor's office or clinic in the last six months:

- Is highest for children who are 13 to 17 years of age.
- Is higher for Non-Hispanic child members.
- Decreases as general health of child improves.

### *Who Helped Coordinate Care*

The percentage of adult members who reported coordinating their own care:

- Is higher for Female members.
- Is higher for Non-Hispanic members.
- Is lowest for members in Fair/Poor general health.

For the general child population, the percentage of parents or caretakers who reported having helped coordinate their child's care:

- Is highest for children who are less than 2 years of age.
- Is higher for Non-Hispanic child members.
- Increases as general health of child improves.

### *Satisfaction with Help Received to Coordinate Care*

The percentage of adult members who reported being very satisfied or satisfied with the help they received to coordinate care:

- Is highest for members 55 years of age or older.
- Is highest for Black/African American members.
- Is higher for Non-Hispanic members.

For the general child population, the percentage of parents or caretakers who reported being very satisfied or satisfied with the help they received to coordinate their child's care:

- Is higher for Female child members.
- Is highest for Black/African American child members.

### *Hard to Take Care of Health*

The percentage of adult members who reported being asked by someone at their personal doctor's office if there were things that make it hard for them to take care of their health:

- Is higher for Female members.
- Is highest for members 45 to 54 years of age.
- Is higher for Hispanic members.
- Decreases as general health improves.

### *Received Information About Health*

The percentage of adult members who reported that their personal doctor usually or always gave them all the information they wanted about their health:

- Is higher for Female members.
- Is highest for members 55 years of age or older.
- Is highest for members in Good general health.

For the general child population, the percentage of parents or caretakers who reported that their child's personal doctor usually or always gave them all the information they wanted about their child's health:

- Is highest for children who are 13 to 17 years of age.
- Is higher for Non-Hispanic members.
- Is highest for children in Excellent/Very good general health.

### ***How Child's Body is Growing***

For the general child population, the percentage of parents or caretakers who reported that someone from their child's personal doctor's office talked about how their child's body is growing:

- Is highest for children 13 to 17 years of age.
- Is highest for child members of an Other race.
- Increases with parent's or caretaker's level of education.

### ***Customer Service Composite***

The percentage of adult members who reported being satisfied with their health plan's customer service:

- Is higher for Female members.
- Is highest for members 45 to 54 years of age.
- Is highest for Non-Hispanic members.

For the general child population, the percentage of parents or caretakers who reported being satisfied with the customer service of their child's health plan:

- Is higher for Male child members.
- Decreases as age of the child increases.
- Is higher for Hispanic child members.

### ***Rating of All Health Care***

The percentage of adult members who reported being satisfied with their health care:

- Is highest for White members.
- Is highest for members 55 years of age or older.
- Increases substantially as general health improves.

For the general child population, the percentage of parents or caretakers who reported being satisfied with their child's health care:

- Is lowest for children 13 to 17 years of age.
- Is highest for White child members.
- Increases as general health of child improves.

### ***Rating of Health Plan***

The percentage of adult members who reported being satisfied with their health plan:

- Is higher for Female members.
- Is lowest for members of an Other race.
- Decreases as general health declines.

For the general child population, the percentage of parents or caretakers who reported they were satisfied with their child's health plan:

- Is highest for children who are 2 to 7 years of age.
- Is higher for Hispanic child members.
- Increases as general health of child improves.

### **Rating of Overall Mental or Emotional Health**

The percentage of adult members who reported having excellent or very good mental or emotional health:

- Is higher for Male members.
- Is lowest for members 45 to 54 years of age.
- Increases with member’s level of education.
- Increases substantially as general health improves.

For the general child population, the percentage of parents or caretakers who reported their child having excellent or very good mental or emotional health:

- Is higher for Female child members.
- Is highest for children 13 to 17 years of age.
- Increases with parent’s or caretaker’s level of education.
- Increases substantially as general health of child improves.

### **Rating of Overall Health**

The percentage of adult members who reported having excellent or very good overall health:

- Is higher for Male members.
- Is lowest for members 45 to 54 years of age.
- Is higher for Hispanic members.
- Increases with member’s level of education.

For the general child population, the percentage of parents or caretakers who reported their child having excellent or very good overall health:

- Is highest for children 13 to 17 years of age.
- Is highest for White child members.
- Is higher for Hispanic child members.
- Increases with parent’s or caretaker’s level of education.

## **Children with Chronic Conditions Results**

### **CCC and Non-CCC Comparative Analysis**

Table 6-11 summarizes the results of the comparative analysis presented in the “Children with Chronic Conditions Results” section. The items listed in the table are limited to those items where statistically significant differences between the populations’ scores were identified.

Table 6-11: CCC and Non-CCC Comparative Analysis Summary of Results

Measure	Population With Significantly Higher Score	Population With Significantly Lower Score
<b>Composite Measures</b>		
Shared Decision Making: Doctor Talked About Reasons to Take a Medicine	CCC	Non-CCC
<b>Individual Items</b>		
Health Promotion and Education	CCC	Non-CCC
<b>Satisfaction with Health Plan</b>		

Measure	Population With Significantly Higher Score	Population With Significantly Lower Score
Got Information or Help from Customer Service	CCC	Non-CCC
<b>Satisfaction with Health Care Providers</b>		
Had Personal Doctor	CCC	Non-CCC
Child Able to Talk with Doctors	CCC	Non-CCC
<b>Access to Care</b>		
Tried to Make Appointment to See Specialist	CCC	Non-CCC
Made Appointments for Health Care	CCC	Non-CCC
Had Illness, Injury, or Condition That Needed Care Right Away	CCC	Non-CCC
<b>Utilization of Services</b>		
Number of Visits to the Doctor's Office	CCC	Non-CCC
<b>CCC Composites and CCC Items</b>		
Access to Specialized Services: Treatment or Counseling	CCC	Non-CCC
Getting Needed Information	CCC	Non-CCC

### CCC and Non-CCC Trend Analysis

Table 6-12 summarizes the results of the trend analysis presented in the “Children with Chronic Conditions Results” section. The items listed in the table are limited to those items where statistically significant differences between the populations’ scores were identified.

Table 6-12: CCC and Non-CCC Trend Analysis Summary of Results

Measure	Population With Significantly Higher Score in 2019	Population With Significantly Lower Score in 2019
<b>Composite Measures</b>		
How Well Doctors Communicate: Doctors Explained Things in Way They Could Understand	Non-CCC	—
Customer Service: Obtained Help Needed from Customer Service	—	Non-CCC
Shared Decision Making: Doctor Asked About Best Medicine Choice for Your Child	Non-CCC	—

The scores for the CCC and non-CCC populations were statistically significantly lower in 2019 than in 2018 for the non-CCC population for one measure. The scores for the non-CCC population were statistically significantly higher in 2019 than in 2018 for two measures.

### CCC Population Cross-Tabulations

Cross-Tabulations of the survey responses for 20 survey items, stratified by certain demographic variables, were presented in the “Children with Chronic Conditions Results” section. A summary of findings for each item for the CCC population is described below.

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

The percentage of parents or caretakers who reported that their child had a personal doctor:

- Is higher for Male child members.
- Is highest for children less than 2 years of age.
- Is highest for White child members.

- Increases with parent's or caretaker's level of education.

### ***Coordination of Care***

The percentage of parents or caretakers who reported their child's personal doctor usually or always seemed informed and up-to-date about the care their child received from other doctors:

- Is highest for children 8 to 12 years of age.
- Is highest for members of an Other race.
- Is higher for Non-Hispanic child members.
- Decreases as the level of parent's or caretaker's education increases.

### ***Utilization of Services: Number of Doctor's Office or Clinic Visits***

The percentage of parents or caretakers who reported their child visited the doctor's office three or more times in the last six months:

- Is higher for Female child members.
- Is highest for children less than 2 years of age.
- Is highest for Hispanic child members.
- Increases substantially as the general health of the child declines.

### ***Who Helped Coordinate Child's Care***

The percentage of parents or caretakers who reported having helped coordinate their child's care:

- Is highest for Female child members.
- Is highest for children 8 to 12 years of age.
- Is lower for Hispanic child members.
- Increases as the general health of the child improves.

### ***Satisfaction with Help Received to Coordinate Child's Care***

The percentage of parents or caretakers who reported being very satisfied or satisfied with the help they received to coordinate their child's care:

- Is highest for Female child members.
- Is highest for children 8 to 12 years of age.
- Is higher for Hispanic child members.
- Is highest for children in Good general health.

### ***How Child's Body is Growing***

The percentage of parents or caretakers who reported that someone from their child's personal doctor's office talked about how their child's body is growing:

- Is highest for Male child members.
- Is highest for children less than two years of age.
- Is lowest for White child members.

### ***Received Information About Child's Health***

The percentage of parents or caretakers who reported their child's personal doctor usually or always gave them all the information they wanted about their child's health:

- Is highest for Male child members.
- Is highest for children 8 to 12 years of age.
- Is highest for White child members.

### ***Customer Service Composite***

The percentage of parents or caretakers who reported being satisfied with their child's health plan customer service:

- Is highest for Male child members.
- Is highest for children less than 2 years of age.
- Is highest for White child members.
- Is higher for Non-Hispanic child members.

### ***Rating of All Health Care***

The percentage of parents or caretakers who reported being satisfied with their child's health care:

- Is highest for children 8 to 12 years of age.
- Is highest for child members of an Other race.
- Is higher for Hispanic child members.
- Decreases as the general health of the child declines.

### ***Rating of Health Plan***

The percentage of parents or caretakers who reported being satisfied with their child's health plan:

- Decreases as the child's age increases.
- Is highest for Black/African American child members.
- Increases as the general health of the child improves.

### ***Rating of Overall Mental or Emotional Health***

The percentage of parents or caretakers who reported their child having excellent or very good mental or emotional health:

- Decreases substantially as the child's age increases.
- Is highest for White child members.
- Is higher for Hispanic child members.
- Increases with parent's or caretaker's level of education.
- Increases substantially as the general health of the child improves.

### ***Rating of Overall Health***

The percentage of parents or caretakers who reported their child having excellent or very good overall health:

- Is higher for Male child members.
- Is lowest for children 13 to 17 years of age.
- Is higher for Non-Hispanic child members.
- Increases with parent's or caretaker's level of education.

### ***Access to Prescription Medicines***

The percentage of parents or caretakers who reported usually or always having access to prescription medicines for their child:

- Is lowest for children 8 to 12 years of age.
- Is higher for Non-Hispanic child members.
- Increases as the general health of the child improves.

### ***Access to Specialized Services CCC Composite***

The percentage of parents or caretakers who reported being satisfied with their child's access to specialized services:

- Is higher for Male child members.

- Is lowest for children 2 to 7 years of age.
- Decreases as the level of parents' or caretakers' education increases.
- Is highest for children in Excellent/Very good general health.

### ***Coordination of Care for CCC Composite***

The percentage of parents or caretakers who reported receiving help in coordinating their child's care:

- Increases as the child's age increases.
- Is highest for child members of an Other race.
- Is higher for Non-Hispanic child members.

### ***CCC Population Categories***

#### ***Use of or Need for Prescription Medicines***

The percentage of parents or caretakers who reported their child used or needed prescription medicines:

- Is higher for Male child members.
- Increases as the child's age increases.
- Is lower for Hispanic child members.
- Increases as the general health of the child declines.

#### ***Above-Average Use or Need for Medical, Mental Health, or Education Services***

The percentage of parents or caretakers who reported their child had above average use or need for medical, mental health, or education services:

- Is highest for children 8 to 12 years of age.
- Is lowest for Black/African American child members.
- Increases with parent's or caretaker's level of education.
- Increases as the general health of the child declines.

#### ***Functional Limitations Compared with Others of Same Age***

The percentage of parents or caretakers who reported their child had functional limitations compared with others of the same age:

- Is higher for Male child members.
- Is lowest for children 13 to 17 years of age.
- Is lowest for child members of an Other race.
- Increases as the general health of the child declines.

#### ***Use of or Need for Specialized Therapies***

The percentage of parents or caretakers who reported their child used or needed specialized therapies:

- Is higher for Male child members.
- Decreases as the child's age increases.
- Is highest for White child members.
- Is lower for Non-Hispanic child members.
- Increases as the general health of the child declines.

#### ***Treatment or Counseling for Emotional or Developmental Problems***

The percentage of parents or caretakers who reported their child had received treatment or counseling for emotional or developmental problems:

- Is higher for Male child members.

- Is highest for children 8 to 12 years of age.
- Is highest for White child members.

## 7. Conclusions and Recommendations

### Conclusions

No overall trends in changes to the response rates from 2018 to 2019 were noted for either the adult and general child populations. However, response rates notably decreased for CareSource’s adult and general child populations and UnitedHealthcare’s adult population; and response rates notably increased for Molina’s and Paramount’s adult populations. The table below provides a comparison of response rates from 2018 to 2019.

Table 7-1: Adult and General Child Response Rate Comparison

	Ohio Medicaid	Buckeye	CareSource	Molina	Paramount	United-Healthcare
<b>Adult Response Rates</b>						
2018 Response Rates	20.26%	19.00%	22.38%	20.28%	18.58%	21.47%
2019 Response Rates	20.58%	20.57%	18.19%	24.81%	21.43%	18.23%
<b>Difference</b>	<b>0.32%</b>	<b>1.57%</b>	<b>-4.19%</b>	<b>4.53%</b>	<b>2.85%</b>	<b>-3.24%</b>
<b>General Child Response Rates</b>						
2018 Response Rates	14.33%	12.04%	16.46%	14.91%	14.81%	13.10%
2019 Response Rates	13.63%	11.55%	13.63%	16.32%	13.90%	11.07%
<b>Difference</b>	<b>-0.70%</b>	<b>-0.49%</b>	<b>-2.83%</b>	<b>1.41%</b>	<b>-0.91%</b>	<b>-2.03%</b>

ODM should take into consideration various effects on the survey results due to the changes in response rates across the MCPs, such as non-response bias and survey vendor effects. For more information on non-response bias and survey vendor effects, please refer to the “Cautions and Limitations” section.

### Adult and General Child Results

When results for the adult and general child population were compared to 2019 national Medicaid percentiles, the Ohio Medicaid Managed Care Program’s performance was fair to excellent (i.e., none of the program’s scores were below the 25th percentile). Areas of excellent performance (i.e., at or above the 90th percentile) included Getting Needed Care (adult).

For the adult population, Paramount and UnitedHealthcare had the highest results when compared to national percentiles (i.e., five measures were at or above the 75th percentile), while CareSource and UnitedHealthcare had the lowest results (i.e., three measures were at or below the 49th percentile). For the general child population, CareSource and Paramount had the highest results when compared to national percentiles (i.e., five measures were at or above the 75th percentile), while UnitedHealthcare had the lowest results (i.e., four measures were at or below the 49th percentile).

The statewide comparisons analysis revealed significant differences for the adult and general child populations when compared between the MCPs’ and program’s scores. Molina’s scores were statistically significantly lower than the program scores more frequently than any other MCP, while none of the plans had scores that were statistically significantly higher than the program scores.

In addition, the trend analysis revealed significant differences for the adult and general child populations between the MCPs’ and program’s 2019 scores compared to the MCPs’ and program’s 2018 scores. The following presents the number of measures where the 2019 scores were statistically significantly higher than the 2018 scores: Buckeye (one measure), CareSource (two measures), Molina (one measure), and UnitedHealthcare (two measures). In addition, the following presents the number of measures where the 2019 scores were statistically significantly lower than the 2018 scores: Buckeye (one measure) and Molina (one measure).

The priority areas analysis identified areas that are top priorities for the Ohio Medicaid Managed Care Program for the Rating of Health Plan (RHP), Rating of All Health Care (RHC), and Rating of Personal Doctor (RPD) global ratings. For the adult population, top priority items for the program included getting care as soon as needed (RHP, RHC, RPD); getting an appointment as soon as needed (RHP); ease of getting care, tests, or treatment (RHP, RHC, RPD); getting an appointment as soon as needed (RHP, RHC, RPD); getting an appointment to see a specialist as soon as needed (RHP, RHC, RPD); and receiving information or help from health plan customer service (RHP). For the general child population, top priority items for the program included getting an appointment as soon as needed (RHC); doctor asking the member what they thought was best for their child (RHC, RPD); ease of getting care, tests, or treatment (RHP, RHC, RPD); amount of time a child's personal doctor spends with the child (RHP, RHC, RPD); getting an appointment to see a specialist as soon as needed (RHP); and receiving information or help from the health plan's customer service (RHP, RHC, RPD).

An evaluation of survey responses stratified by demographic variables revealed differences amongst demographic categories. For both the adult and general child populations, White members were more likely to have a personal doctor than Black or African American members or those of another race. Adult and general child members visited the doctor's office more often as their general health declined. Members that had good, fair, or poor general health were less likely to be satisfied with all their health care and health plan when compared to those with excellent or very good general health. Younger adult members (i.e., 18-34 years) were more likely to rate their overall health and overall mental or emotional health as Excellent or Very Good. In addition, parents/caretakers of child members between 13 and 17 years old were more likely to rate their child's overall health and overall mental or emotional health as Excellent or Very Good.

### **Children with Chronic Conditions Results**

The CCC and non-CCC populations reported different results. In general, the CCC population reported slightly higher rates (i.e., more measures with a higher score) than the non-CCC population. The CCC population's scores were statistically significantly higher than the non-CCC population for 11 measures. In addition, the scores for non-CCC population were statistically significantly higher in 2019 than 2018 for two measures and statistically significantly lower in 2019 than 2018 for one measure.

An evaluation of survey responses stratified by demographic variables revealed differences amongst demographic categories for the CCC population. White child members were more likely to have a personal doctor than Black or African American child members and those of another race. Children visited the doctor's office more often as their general health declined. Parents or caretakers of child members that had good, fair, or poor general health were less likely to be satisfied with all their child's health care and health plan when compared to those with excellent or very good general health. As expected, child members with good, fair, or poor general health used or needed more prescription medicines; medical, mental health, or education services; specialized therapies; had more functional limitations; and received more treatment or counseling for emotional or developmental problems when compared to those with excellent or very good general health.

### **Recommendations**

The CAHPS findings in this report examine members' experiences with their Medicaid MCPs, healthcare, and services. The results identify Ohio Medicaid Program and plan strengths and weaknesses, highlight areas for performance improvement, and track performance over time. Ohio Medicaid's participating plans conduct the survey annually using the CAHPS Health Plan Survey, a standardized and validated instrument, with national benchmarks. As such, this information is a rich source of data on patient experience the state may use to inform efforts to achieve excellence in patient-centered care and outcomes.

IPRO recommends ODM leverage the CAHPS Health Plan Survey data and report findings to support the development of relevant major initiatives, quality improvement strategies and interventions, and performance monitoring and evaluation activities. For example, CAHPS data may be analyzed to identify potential health disparities among key demographics. Supplemental items may be used to recognize issues related to cultural competence. This type of information could inform initiatives such as infant mortality, CPC, behavioral health care coordination, and school based healthcare. This report's findings establish priority areas for targeting quality improvement efforts in order to improve CAHPS ratings of health plan, health care, and personal doctor. Separate findings are provided for the Ohio Medicaid Program and each participating plan, by population (adult, child). A review of the CAHPS measure results (e.g., customer

service, smoking cessation) may impact the development of related quality improvement strategies, performance measurement and accountability systems, and program monitoring activities. In these and other ways, CAHPS data are valuable resources for patient-centered approaches to population health management and improving health outcomes.

## Cautions and Limitations

The findings presented in the 2019 Ohio Medicaid Managed Care Program CAHPS Reports are subject to some limitations in the survey design, analysis, and interpretation. ODM should carefully consider these limitations when interpreting or generalizing the findings. The limitations are discussed below.

### Case-Mix Adjustment

The demographics of respondents may impact member experience; however, results in the reports were not case-mix adjusted to account for differences in respondent characteristics. Caution should be exercised when interpreting the CAHPS results. NCQA does not recommend case-mix adjusting Medicaid CAHPS results to account for these differences.<sup>29</sup>

### Non-Response Bias

The experiences of the survey respondent population may be different from those of non-respondents with respect to their health care services and may vary by MCP. Therefore, ODM and the MCPs should consider the potential for non-response bias when interpreting CAHPS results.

### Causal Inferences

Although the CAHPS Reports examine whether members of various MCPs report differences in experience with various aspects of their health care experiences, these differences may not be attributed completely to the MCP. The analyses described in the CAHPS reports identify whether members in different MCPs give different ratings with their MCPs. The surveys alone do not reveal why the differences exist.

### Survey Vendor Effects

The CAHPS surveys were administered by multiple survey vendors. NCQA developed its Survey Vendor Certification Program to ensure standardization of data collection and the comparability of results across health plans. However, due to the different processes employed by the survey vendors, there is still the small potential for vendor effects. Therefore, survey vendor effects should be considered when interpreting the CAHPS results.

### Program Changes

In 2017, more Ohioans were able to access their benefits through one of the state's five Medicaid MCPs. Effective January 1, 2017, Ohio Medicaid transitioned the following recipient groups from fee for service to mandatory managed care: individuals enrolled in the BCMH program, children in the custody of PCSAs, children receiving federal adoption assistance, and individuals receiving services through the BCCP. In addition, voluntary enrollment in a Medicaid MCP was extended to individuals on a developmental disabilities waiver. Also, effective February 2017, eligibility for respite services was expanded to cover child beneficiaries who receive long-term care and have behavioral health needs.

Ohio Medicaid made significant progress in 2017 to advance population health outcomes, beginning with implementation of the state's CPC program. This program provides comprehensive services to members in a medical home setting to manage population health and encourage improvement in population health outcomes. MCPs work collaboratively with the CPC practices and provide ongoing support through CPC-MCP partnerships initiated by ODM. In 2017, 111 primary care practices and 1.1 million individuals were enrolled in the program, with monthly enrollment averaging 800,000 members.

Throughout 2017 and 2018, the MCP care management program continued to evolve in alignment with ODM's population health approach to managed care. Effective January 1, 2018, the MCPs extended the use of an ODM-

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<sup>29</sup> Agency for Healthcare Research and Quality. *CAHPS Health Plan Survey and Reporting Kit 2008*. Rockville, MD: U.S. Department of Health and Human Services, July 2008.

approved and standardized pediatric or adult needs assessment tool to each member, within 90 days of enrollment. The MCPs use this information to risk-stratify members and identify any potential needs for care management.

In 2018, Ohio Medicaid transitioned the following recipient group from fee-for-service to mandatory managed care: individuals enrolled in the Medicaid Buy-In for Workers with Disabilities (MBIWD) program.

On January 1, 2018, Ohio Medicaid launched Behavioral Health Redesign, an initiative aimed at rebuilding Ohio’s community behavioral health capacity. This included the addition of new services for people with high intensity service and support needs. Effective July 1, 2018, Ohio integrated behavioral health services into Managed Care.

In 2018, ODM began “Managed Care Day 1” to help minimize the amount of time an individual is on fee-for-service and maximize their managed care experience. Recipients are assigned to a managed care plan effective the first day of the month in which Medicaid eligibility is determined.

## 8. Reader’s Guide

### How to Read Figures in the Results Section

This section shows representative figures from the report and provides an explanation of how to read and interpret the figures.

#### National Comparisons

Star ratings were determined for each CAHPS measure using the score percentile distributions in Table 8-1.

Table 8-1: Star Ratings Crosswalk

Stars	Percentiles
★ Poor	Below the 25th percentile
★★ Fair	At or between the 25th and 49th percentiles
★★★ Good	At or between the 50th and 74th percentiles
★★★★ Very Good	At or between the 75th and 89th percentiles
★★★★★ Excellent	At or above the 90th percentile

Table 8-2 and

Measure	Number of Stars				
	★★★★★	★★★★	★★★	★★	★
Rating of Health Plan	>=83.00	80.92 to <83.00	78.45 to <80.92	74.31 to <78.45	<74.31
Rating of All Health Care	>=81.29	78.11 to <81.29	75.43 to <78.11	72.83 to <75.43	<72.83
Rating of Personal Doctor	>=86.54	84.62 to <86.54	82.34 to <84.62	79.78 to <82.34	<79.78
Rating of Specialist Seen Most Often	>=86.67	85.22 to <86.67	82.62 to <85.22	79.40 to <82.62	<79.40
Getting Needed Care	>=86.84	85.47 to <86.84	83.06 to <85.47	80.53 to <83.06	<80.53
Getting Care Quickly	>=86.74	85.08 to <86.74	82.34 to <85.08	80.02 to <82.34	<80.02
How Well Doctors Communicate	>=94.73	93.39 to <94.73	92.04 to <93.39	90.83 to <92.04	<90.83
Customer Service	>=92.39	90.95 to <92.39	88.93 to <90.95	87.12 to <88.93	<87.12
Coordination of Care	>=88.89	86.36 to <88.89	84.15 to <86.36	81.46 to <84.15	<81.46

Table 8-3 show the adult and general child Quality Compass National Percentiles, respectively, used to derive the overall member ratings on each CAHPS measure.<sup>30</sup>

Table 8-2: Overall Adult Medicaid Member Ratings Crosswalk

Measure	Number of Stars				
	★★★★★	★★★★	★★★	★★	★
Rating of Health Plan	>=83.00	80.92 to <83.00	78.45 to <80.92	74.31 to <78.45	<74.31
Rating of All Health Care	>=81.29	78.11 to <81.29	75.43 to <78.11	72.83 to <75.43	<72.83
Rating of Personal Doctor	>=86.54	84.62 to <86.54	82.34 to <84.62	79.78 to <82.34	<79.78
Rating of Specialist Seen Most Often	>=86.67	85.22 to <86.67	82.62 to <85.22	79.40 to <82.62	<79.40
Getting Needed Care	>=86.84	85.47 to <86.84	83.06 to <85.47	80.53 to <83.06	<80.53
Getting Care Quickly	>=86.74	85.08 to <86.74	82.34 to <85.08	80.02 to <82.34	<80.02
How Well Doctors Communicate	>=94.73	93.39 to <94.73	92.04 to <93.39	90.83 to <92.04	<90.83
Customer Service	>=92.39	90.95 to <92.39	88.93 to <90.95	87.12 to <88.93	<87.12
Coordination of Care	>=88.89	86.36 to <88.89	84.15 to <86.36	81.46 to <84.15	<81.46

Table 8-3: Overall General Child Medicaid Member Ratings Crosswalk

Measure	Number of Stars				
	★★★★★	★★★★	★★★	★★	★
Rating of Health Plan	>=92.22	89.38 to <92.22	87.15 to <89.38	84.48 to <87.15	<84.48
Rating of All Health Care	>=92.46	88.24 to <92.46	75.43 to <88.24	85.76 to <75.43	<85.76
Rating of Personal Doctor	>=93.63	92.02 to <93.63	90.49 to <92.02	88.69 to <90.49	<88.69
Rating of Specialist Seen Most Often	>=91.78	89.00 to <91.78	87.29 to <89.00	85.83 to <87.29	<85.83
Getting Needed Care	>=86.84	85.47 to <86.84	83.06 to <85.47	80.53 to <83.06	<80.53
Getting Care Quickly	>=86.74	85.08 to <86.74	82.34 to <85.08	80.02 to <82.34	<80.02
How Well Doctors Communicate	>=96.57	95.70 to <96.57	94.13 to <95.7	92.44 to <94.13	<92.44
Customer Service	>=92.00	89.98 to <92.00	88.56 to <89.98	86.50 to <88.56	<86.50
Coordination of Care	>=89.33	87.18 to <89.33	84.06 to <87.18	81.11 to <84.06	<81.11

## Statewide Comparisons

Below is an explanation of how to read the bar graphs presented in the “Statewide Comparisons” section.

Separate bar graphs were created for each measure. Each bar graph depicts scores for the survey item and the proportion of respondents in each of the item’s response categories for Ohio’s Medicaid Managed Care Program and its participating MCPs.

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

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

The most positive responses to the survey questions (equivalent to the score) are always at the right end of the bar in **green**.



<sup>30</sup> National Committee for Quality Assurance. *Quality Compass 2019*. Washington, DC: NCQA, 2019.  
2019 Medicaid Managed Care Program CAHPS Full Report  
Rev. July 20, 2020

For figures with two response categories, only green and orange 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.

Arrows (↑ and ↓) to the right of the scores indicate statistically significant differences between an MCP’s scores in 2019 and the program average in 2019. Triangles (▲ and ▼) to the left of the scores indicate statistically significant differences between scores in 2019 and scores in 2018 for each MCP and the program average. All statistically significant findings are discussed within the text of the “Statewide Comparisons” section. National Medicaid averages are provided in the graphs as a reference, when available.

### Priority Assignments

Priority matrices were used to identify the level of priority of each composite item evaluated: top, moderate, or low. The following figure illustrates the interpretation of the priority matrices.

<b>CORRELATION WITH GLOBAL RATING</b>	<i>High</i>	<b>MODERATE PRIORITY</b> Already doing well on composite items highly correlated with global rating. Could decide to try to do even better. <i>Maintain high performance</i>	<b>TOP PRIORITY</b> High problem scores on composite items highly correlated with global rating. <i>Deserve further scrutiny</i>
	<i>Low</i>	<b>LOW PRIORITY</b> Doing well on composite items not highly correlated with global rating. <i>Unlikely target for improvement activities</i>	<b>MODERATE PRIORITY</b> High problem scores on composite items not highly correlated with global rating. <i>Possible target for improvement depending on other priorities</i>
		<i>Low</i>	<i>High</i>
		<b>PROBLEM SCORE</b>	

Each priority matrix is broken out into four parts based on the median problem score and the median correlation with the global rating. Composite items with high problem scores and correlations with the global rating are considered a top priority. Top priority areas indicate that the program or the MCP is not doing well on a composite item driving the global performance rating. Low priority composite items indicate the program or the MCP is performing well on an item that is not highly correlated with the global rating. Moderate priority composite items are those items the program or the MCP is either not performing well on or has a high correlation with the global rating. The median, rather than the mean, is used to ensure that extreme problem scores and correlations do not have a disproportionate influence in prioritizing individual questions.

A problem score above the median is considered to be “high.” In other words, if the score for a particular question has a higher “problem” rating than the median of all questions, then the problem rating is considered to be “high.” If this question’s correlation with the global rating is also high, then that question falls into the “Top Priority” quadrant on the matrix. If this same question’s correlation with the global rating is low, then that question falls into the “Moderate Priority” quadrant. In this manner, all questions in each composite are categorized into the four quadrants on the

matrix. Questions that appear in the “Top Priority” quadrant may be considered the most significant problem areas in that they also have the highest correlation with the global rating (i.e., improvement in performance on these questions is most likely to improve performance on the global rating).

## Understanding Statistical Significance

Statistical significance means the likelihood that a finding or result is caused by something other than chance. In statistical significance testing, the  $p$  value is the probability of obtaining a test statistic at least as extreme as the one that was actually observed. If a  $p$  value is less than 0.05, the result is considered significant. Statistical tests enabled IPRO to determine if the results of the analyses were statistically significant. However, statistical significance does not necessarily equate to clinical significance and vice-versa. Statistical significance is influenced by the number of observations (i.e., the larger the number of observations, the more likely a statistically significant result will be found). Clinical significance depends on the magnitude of the effect being studied. While results may be statistically significant because the study was larger, small differences in rates may not be important from a clinical point of view.

## Understanding Correlation Analysis

Correlations are statistical representations that are used to help understand how two different pieces of information are related to one another, and how one piece of variable information may increase or decrease as a second piece of variable information increases or decreases. In general, correlations may be either positive or negative.

- In a positive correlation, scores on two different variables increase and decrease together.
- In a negative correlation, as scores for one variable increase, they decrease for the other variable.

Calculating correlation statistics yields a number called the coefficient of correlation. The coefficient may vary from 0.00 to +/-1.00. The strength of a correlation depends on its size, not its sign. For example, a correlation of -0.72 is stronger than a correlation of +0.53. As the correlation coefficient approaches 0.00, it can be inferred that there is no correlation between the two variables. For purposes of the priority areas analysis, the analysis was not focused on the direction of the correlation (positive or negative) but rather on the strength of the correlation; therefore, only the absolute values of the coefficients were used in the analysis, and the range is from 0.00 to 1.00.

It is important to understand that it is possible for two variables to be strongly related (i.e., correlated) but not have one variable cause another. The priority matrices identify the questions that have the greatest potential to effect change in overall member experience with the global ratings. Nothing in these matrices is intended to indicate causation. For example, respondents may report a negative experience with ease of getting care, tests, or treatment and also a low overall rating of the health plan. This does not indicate that difficulty in getting care, tests, or treatment causes lower ratings of the health plan. The strength of the relationship between the two only helps to understand whether the difficulty of getting care, tests, or treatments should be a top priority or not.

## Understanding Sampling Error

The interpretation of CAHPS results requires an understanding of sampling error, since it is generally not feasible to survey an entire MCP’s population. For this reason, surveys include only a sample from the population and use statistical techniques to maximize the probability that the sample results apply to the entire population.

In order for results to be generalizable to the entire population, the sample selection process must give each person in the population an equal chance of being selected for inclusion in the study. For the CAHPS Surveys, this is accomplished by drawing a systematic sample that selects members for inclusion from the entire MCP. This ensures that no single group of members in the sample is over-represented relative to the entire population. For example, if there were a larger number of members surveyed between the ages of 45 to 54, their views would have a disproportionate influence on the results compared to other age groups.

Since not every member in an MCP’s total population is surveyed, the actual percentage of satisfied members cannot be determined. Statistical techniques are used to ensure that the unknown actual percentage of satisfied members lies within a given interval, called the confidence interval, 95 percent of the time. The 95 percent confidence interval has a characteristic sampling error (sometimes called “margin of error”). For example, if the sampling error of a survey is  $\pm 10$

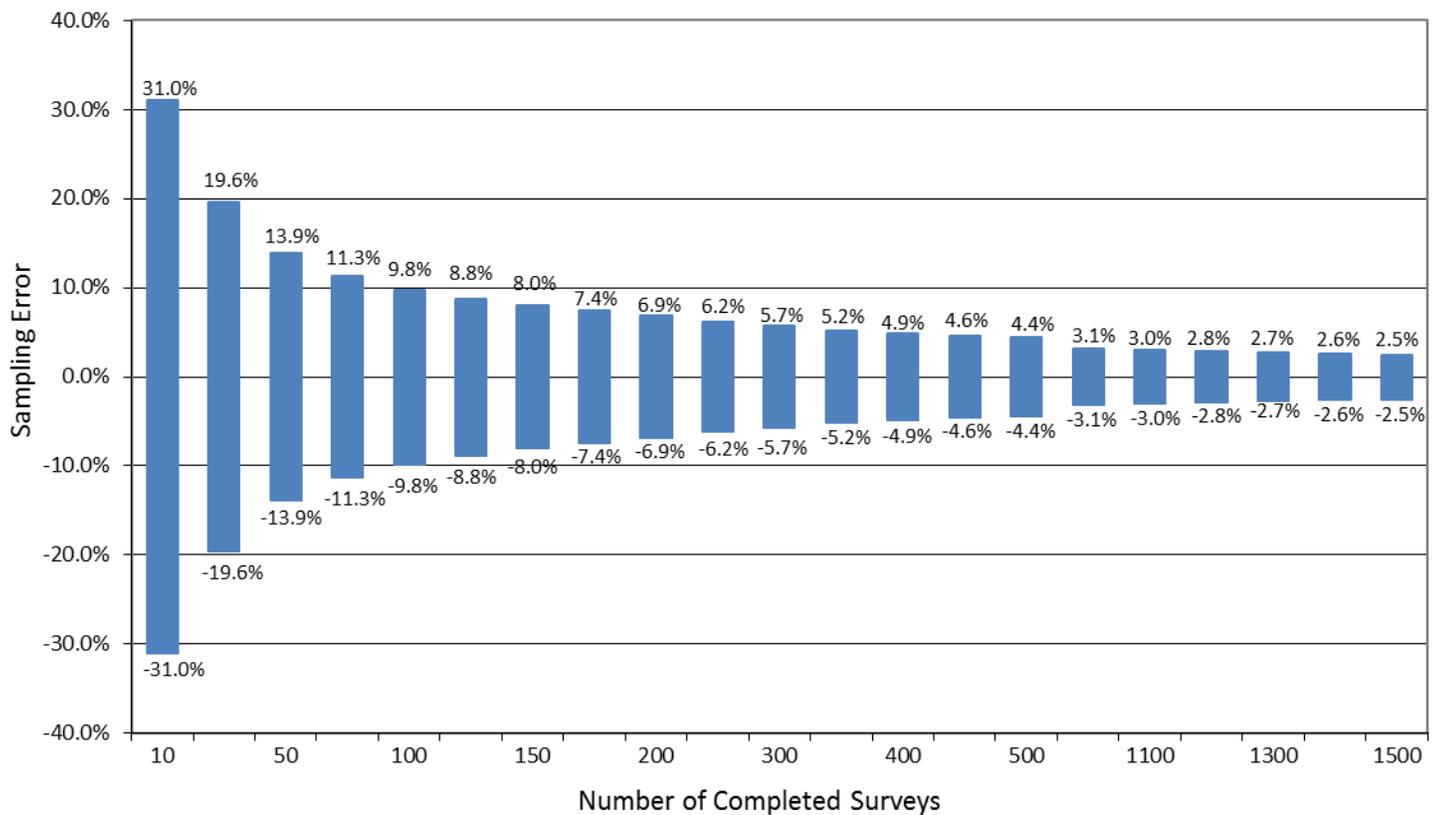
percent with a confidence interval of 95 percent, this indicates that if 100 samples were selected from the population of the same MCP, the results of these samples would be within plus or minus 10 percentage points of the results from a single sample in 95 of the 100 samples. Table 8-4 depicts the sampling errors for various numbers of responses.<sup>31</sup>

Table 8-4: Sampling Error and the Number of Survey Responses

Number of Responses	100	150	200	250	300	350	400	500
Approximate sampling error (%)	±9.8	±8.0	±6.9	±6.2	±5.7	±5.2	±4.9	±4.4

The size of the sampling error shown in Table 8-4 is based on the number of completed surveys. Table 8-4 indicates that if 400 MCP members complete a survey, the margin of error is ±4.9 percent. Note that the calculations used in the graph assume that the size of the eligible population is greater than 2,000, as is the case with most Medicaid MCPs. As the number of members completing a survey decreases, the sampling error increases. Lower response rates may bias results because the proportion of members responding to a survey may not necessarily reflect the randomness of the entire sample.

Figure 8-1: Sampling Error and the Number of Completed Surveys



As Figure 8-1 demonstrates, sampling error declines as the number of completed surveys increases.<sup>32</sup> Consequently, when the number of completed surveys is very large and sampling error is very small, almost any difference is statistically significant; however, this does not indicate that such differences are important. Likewise, even if the difference between two measured rates is not statistically significant, it may be important from an MCP’s perspective. The context in which the MCP data are reviewed will influence the interpretation of results.

<sup>31</sup> Fink, A. *How to Sample in Surveys*. Thousand Oaks, CA: Sage Publications, Inc.; 1995.

<sup>32</sup> Fink, A. *How to Sample in Surveys*. Thousand Oaks, CA: Sage Publications, Inc.; 1995.

It is important to note that sampling error can impact the interpretation of MCP results. For example, assume that 150 state Medicaid respondents were 80 percent satisfied with their personal doctor. The sampling error associated with this number is plus or minus 8 percent. Therefore, the true rate ranges between 72 percent and 88 percent. If 100 of an MCP's members completed the survey and 85 percent of those completing the survey reported being satisfied with their personal doctor, it is tempting to view this difference of 5 percentage points between the two rates as important. However, the true rate of the MCP's respondents ranges between 75 percent and 95 percent, thereby overlapping the state Medicaid average including sampling error. Whenever two measures fall within each other's sampling error, the difference may not be statistically significant. At the same time, lack of statistical significance is not the same as lack of importance. The significance of this 5 percentage-point difference is open to interpretation at both the individual MCP level and the state level.

## Quality Improvement References

The following references offer guidance on possible approaches to CAHPS-related QI activities.

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## Appendix A: Priority Matrix Data

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Adult	Ohio Medicaid	Rating of Health Plan	4	Q4. Got care as soon as needed	0.14	0.31	
Adult	Ohio Medicaid	Rating of Health Plan	6	Q6. Got an appointment as soon as needed	0.16	0.22	
Adult	Ohio Medicaid	Rating of Health Plan	10	Q10. Doctor explained reasons to take a medication	0.06	0.02	
Adult	Ohio Medicaid	Rating of Health Plan	11	Q11. Doctor explained reasons not to take a medication	0.32	0.03	
Adult	Ohio Medicaid	Rating of Health Plan	12	Q12. Doctor asked you what you thought was best for you	0.21	0.13	
Adult	Ohio Medicaid	Rating of Health Plan	14	Q14. Easy to get treatment needed	0.11	0.34	
Adult	Ohio Medicaid	Rating of Health Plan	17	Q17. Personal doctor explained things in an understandable way	0.07	0.20	
Adult	Ohio Medicaid	Rating of Health Plan	18	Q18. Personal doctor listened carefully	0.08	0.20	
Adult	Ohio Medicaid	Rating of Health Plan	19	Q19. Personal doctor showed respect for what you had to say	0.06	0.16	
Adult	Ohio Medicaid	Rating of Health Plan	20	Q20. Personal doctor spent enough time with you	0.09	0.23	
Adult	Ohio Medicaid	Rating of Health Plan	25	Q25. Easy to get appointment as soon as needed	0.15	0.27	
Adult	Ohio Medicaid	Rating of Health Plan	31	Q31. Received information or help from health plan	0.15	0.29	
Adult	Ohio Medicaid	Rating of Health Plan	32	Q32. Health plan customer service treated you with courtesy and respect	0.03	0.20	
Adult	Ohio Medicaid	Rating of Health Care	4	Q4. Got care as soon as needed	0.14	0.36	
Adult	Ohio Medicaid	Rating of Health Care	6	Q6. Got an appointment as soon as needed	0.16	0.20	
Adult	Ohio Medicaid	Rating of Health Care	10	Q10. Doctor explained reasons to take a medication	0.06	0.02	
Adult	Ohio Medicaid	Rating of Health Care	11	Q11. Doctor explained reasons not to take a medication	0.32	0.01	
Adult	Ohio Medicaid	Rating of Health Care	12	Q12. Doctor asked you what you thought was best for you	0.21	0.17	
Adult	Ohio Medicaid	Rating of Health Care	14	Q14. Easy to get treatment needed	0.11	0.38	
Adult	Ohio Medicaid	Rating of Health Care	17	Q17. Personal doctor explained things in an understandable way	0.07	0.31	
Adult	Ohio Medicaid	Rating of Health Care	18	Q18. Personal doctor listened carefully	0.08	0.33	
Adult	Ohio Medicaid	Rating of Health Care	19	Q19. Personal doctor showed respect for what you had to say	0.06	0.30	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Adult	Ohio Medicaid	Rating of Health Care	20	Q20. Personal doctor spent enough time with you	0.09	0.32	
Adult	Ohio Medicaid	Rating of Health Care	25	Q25. Easy to get appointment as soon as needed	0.15	0.25	
Adult	Ohio Medicaid	Rating of Health Care	31	Q31. Received information or help from health plan	0.15	0.19	
Adult	Ohio Medicaid	Rating of Health Care	32	Q32. Health plan customer service treated you with courtesy and respect	0.03	0.19	
Adult	Ohio Medicaid	Rating of Personal Doctor	4	Q4. Got care as soon as needed	0.14	0.24	
Adult	Ohio Medicaid	Rating of Personal Doctor	6	Q6. Got an appointment as soon as needed	0.16	0.16	
Adult	Ohio Medicaid	Rating of Personal Doctor	10	Q10. Doctor explained reasons to take a medication	0.06	0.07	
Adult	Ohio Medicaid	Rating of Personal Doctor	11	Q11. Doctor explained reasons not to take a medication	0.32	0.05	
Adult	Ohio Medicaid	Rating of Personal Doctor	12	Q12. Doctor asked you what you thought was best for you	0.21	0.14	
Adult	Ohio Medicaid	Rating of Personal Doctor	14	Q14. Easy to get treatment needed	0.11	0.33	
Adult	Ohio Medicaid	Rating of Personal Doctor	17	Q17. Personal doctor explained things in an understandable way	0.07	0.53	
Adult	Ohio Medicaid	Rating of Personal Doctor	18	Q18. Personal doctor listened carefully	0.08	0.59	
Adult	Ohio Medicaid	Rating of Personal Doctor	19	Q19. Personal doctor showed respect for what you had to say	0.06	0.51	
Adult	Ohio Medicaid	Rating of Personal Doctor	20	Q20. Personal doctor spent enough time with you	0.09	0.55	
Adult	Ohio Medicaid	Rating of Personal Doctor	25	Q25. Easy to get appointment as soon as needed	0.15	0.18	
Adult	Ohio Medicaid	Rating of Personal Doctor	31	Q31. Received information or help from health plan	0.15	0.10	
Adult	Ohio Medicaid	Rating of Personal Doctor	32	Q32. Health plan customer service treated you with courtesy and respect	0.03	0.10	
Adult	Buckeye	Rating of Health Plan	4	Q4. Got care as soon as needed	0.12	0.35	
Adult	Buckeye	Rating of Health Plan	6	Q6. Got an appointment as soon as needed	0.14	0.24	
Adult	Buckeye	Rating of Health Plan	10	Q10. Doctor explained reasons to take a medication	0.05	0.06	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Adult	Buckeye	Rating of Health Plan	11	Q11. Doctor explained reasons not to take a medication	0.32	0.00	
Adult	Buckeye	Rating of Health Plan	12	Q12. Doctor asked you what you thought was best for you	0.24	0.11	
Adult	Buckeye	Rating of Health Plan	14	Q14. Easy to get treatment needed	0.13	0.36	
Adult	Buckeye	Rating of Health Plan	17	Q17. Personal doctor explained things in an understandable way	0.07	0.15	
Adult	Buckeye	Rating of Health Plan	18	Q18. Personal doctor listened carefully	0.09	0.20	
Adult	Buckeye	Rating of Health Plan	19	Q19. Personal doctor showed respect for what you had to say	0.05	0.15	
Adult	Buckeye	Rating of Health Plan	20	Q20. Personal doctor spent enough time with you	0.08	0.14	
Adult	Buckeye	Rating of Health Plan	25	Q25. Easy to get appointment as soon as needed	0.17	0.38	
Adult	Buckeye	Rating of Health Plan	31	Q31. Received information or help from health plan	0.17	0.39	
Adult	Buckeye	Rating of Health Plan	32	Q32. Health plan customer service treated you with courtesy and respect	0.05	0.46	
Adult	Buckeye	Rating of Health Care	4	Q4. Got care as soon as needed	0.12	0.32	
Adult	Buckeye	Rating of Health Care	6	Q6. Got an appointment as soon as needed	0.14	0.22	
Adult	Buckeye	Rating of Health Care	10	Q10. Doctor explained reasons to take a medication	0.05	0.03	
Adult	Buckeye	Rating of Health Care	11	Q11. Doctor explained reasons not to take a medication	0.32	0.02	
Adult	Buckeye	Rating of Health Care	12	Q12. Doctor asked you what you thought was best for you	0.24	0.22	
Adult	Buckeye	Rating of Health Care	14	Q14. Easy to get treatment needed	0.13	0.39	
Adult	Buckeye	Rating of Health Care	17	Q17. Personal doctor explained things in an understandable way	0.07	0.38	
Adult	Buckeye	Rating of Health Care	18	Q18. Personal doctor listened carefully	0.09	0.37	
Adult	Buckeye	Rating of Health Care	19	Q19. Personal doctor showed respect for what you had to say	0.05	0.33	
Adult	Buckeye	Rating of Health Care	20	Q20. Personal doctor spent enough time with you	0.08	0.36	
Adult	Buckeye	Rating of Health Care	25	Q25. Easy to get appointment as soon as needed	0.17	0.30	
Adult	Buckeye	Rating of Health Care	31	Q31. Received information or help from health plan	0.17	0.25	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Adult	Buckeye	Rating of Health Care	32	Q32. Health plan customer service treated you with courtesy and respect	0.05	0.40	
Adult	Buckeye	Rating of Personal Doctor	4	Q4. Got care as soon as needed	0.12	0.14	
Adult	Buckeye	Rating of Personal Doctor	6	Q6. Got an appointment as soon as needed	0.14	0.20	
Adult	Buckeye	Rating of Personal Doctor	10	Q10. Doctor explained reasons to take a medication	0.05	0.09	
Adult	Buckeye	Rating of Personal Doctor	11	Q11. Doctor explained reasons not to take a medication	0.32	0.10	
Adult	Buckeye	Rating of Personal Doctor	12	Q12. Doctor asked you what you thought was best for you	0.24	0.24	
Adult	Buckeye	Rating of Personal Doctor	14	Q14. Easy to get treatment needed	0.13	0.35	
Adult	Buckeye	Rating of Personal Doctor	17	Q17. Personal doctor explained things in an understandable way	0.07	0.59	
Adult	Buckeye	Rating of Personal Doctor	18	Q18. Personal doctor listened carefully	0.09	0.65	
Adult	Buckeye	Rating of Personal Doctor	19	Q19. Personal doctor showed respect for what you had to say	0.05	0.56	
Adult	Buckeye	Rating of Personal Doctor	20	Q20. Personal doctor spent enough time with you	0.08	0.58	
Adult	Buckeye	Rating of Personal Doctor	25	Q25. Easy to get appointment as soon as needed	0.17	0.23	
Adult	Buckeye	Rating of Personal Doctor	31	Q31. Received information or help from health plan	0.17	0.12	
Adult	Buckeye	Rating of Personal Doctor	32	Q32. Health plan customer service treated you with courtesy and respect	0.05	0.19	
Adult	CareSource	Rating of Health Plan	4	Q4. Got care as soon as needed	0.13	0.26	
Adult	CareSource	Rating of Health Plan	6	Q6. Got an appointment as soon as needed	0.15	0.36	
Adult	CareSource	Rating of Health Plan	10	Q10. Doctor explained reasons to take a medication	0.07	0.09	
Adult	CareSource	Rating of Health Plan	11	Q11. Doctor explained reasons not to take a medication	0.26	0.02	
Adult	CareSource	Rating of Health Plan	12	Q12. Doctor asked you what you thought was best for you	0.18	0.30	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Adult	CareSource	Rating of Health Plan	14	Q14. Easy to get treatment needed	0.10	0.31	
Adult	CareSource	Rating of Health Plan	17	Q17. Personal doctor explained things in an understandable way	0.08	0.12	
Adult	CareSource	Rating of Health Plan	18	Q18. Personal doctor listened carefully	0.07	0.20	
Adult	CareSource	Rating of Health Plan	19	Q19. Personal doctor showed respect for what you had to say	0.05	0.11	
Adult	CareSource	Rating of Health Plan	20	Q20. Personal doctor spent enough time with you	0.09	0.18	
Adult	CareSource	Rating of Health Plan	25	Q25. Easy to get appointment as soon as needed	0.13	0.26	
Adult	CareSource	Rating of Health Plan	31	Q31. Received information or help from health plan	0.15	0.32	
Adult	CareSource	Rating of Health Plan	32	Q32. Health plan customer service treated you with courtesy and respect	0.06	0.06	
Adult	CareSource	Rating of Health Care	4	Q4. Got care as soon as needed	0.13	0.37	
Adult	CareSource	Rating of Health Care	6	Q6. Got an appointment as soon as needed	0.15	0.26	
Adult	CareSource	Rating of Health Care	10	Q10. Doctor explained reasons to take a medication	0.07	0.08	
Adult	CareSource	Rating of Health Care	11	Q11. Doctor explained reasons not to take a medication	0.26	0.12	
Adult	CareSource	Rating of Health Care	12	Q12. Doctor asked you what you thought was best for you	0.18	0.23	
Adult	CareSource	Rating of Health Care	14	Q14. Easy to get treatment needed	0.10	0.40	
Adult	CareSource	Rating of Health Care	17	Q17. Personal doctor explained things in an understandable way	0.08	0.35	
Adult	CareSource	Rating of Health Care	18	Q18. Personal doctor listened carefully	0.07	0.45	
Adult	CareSource	Rating of Health Care	19	Q19. Personal doctor showed respect for what you had to say	0.05	0.32	
Adult	CareSource	Rating of Health Care	20	Q20. Personal doctor spent enough time with you	0.09	0.37	
Adult	CareSource	Rating of Health Care	25	Q25. Easy to get appointment as soon as needed	0.13	0.30	
Adult	CareSource	Rating of Health Care	31	Q31. Received information or help from health plan	0.15	0.29	*
Adult	CareSource	Rating of Health Care	32	Q32. Health plan customer service treated you with courtesy and respect	0.06	0.01	*
Adult	CareSource	Rating of Personal Doctor	4	Q4. Got care as soon as needed	0.13	0.42	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Adult	CareSource	Rating of Personal Doctor	6	Q6. Got an appointment as soon as needed	0.15	0.32	
Adult	CareSource	Rating of Personal Doctor	10	Q10. Doctor explained reasons to take a medication	0.07	0.17	
Adult	CareSource	Rating of Personal Doctor	11	Q11. Doctor explained reasons not to take a medication	0.26	0.12	
Adult	CareSource	Rating of Personal Doctor	12	Q12. Doctor asked you what you thought was best for you	0.18	0.22	
Adult	CareSource	Rating of Personal Doctor	14	Q14. Easy to get treatment needed	0.10	0.41	
Adult	CareSource	Rating of Personal Doctor	17	Q17. Personal doctor explained things in an understandable way	0.08	0.48	
Adult	CareSource	Rating of Personal Doctor	18	Q18. Personal doctor listened carefully	0.07	0.58	
Adult	CareSource	Rating of Personal Doctor	19	Q19. Personal doctor showed respect for what you had to say	0.05	0.49	
Adult	CareSource	Rating of Personal Doctor	20	Q20. Personal doctor spent enough time with you	0.09	0.52	
Adult	CareSource	Rating of Personal Doctor	25	Q25. Easy to get appointment as soon as needed	0.13	0.31	
Adult	CareSource	Rating of Personal Doctor	31	Q31. Received information or help from health plan	0.15	0.22	*
Adult	CareSource	Rating of Personal Doctor	32	Q32. Health plan customer service treated you with courtesy and respect	0.06	0.04	*
Adult	Molina	Rating of Health Plan	4	Q4. Got care as soon as needed	0.14	0.37	
Adult	Molina	Rating of Health Plan	6	Q6. Got an appointment as soon as needed	0.16	0.22	
Adult	Molina	Rating of Health Plan	10	Q10. Doctor explained reasons to take a medication	0.06	0.06	
Adult	Molina	Rating of Health Plan	11	Q11. Doctor explained reasons not to take a medication	0.28	0.03	
Adult	Molina	Rating of Health Plan	12	Q12. Doctor asked you what you thought was best for you	0.20	0.10	
Adult	Molina	Rating of Health Plan	14	Q14. Easy to get treatment needed	0.11	0.38	
Adult	Molina	Rating of Health Plan	17	Q17. Personal doctor explained things in an understandable way	0.07	0.22	
Adult	Molina	Rating of Health Plan	18	Q18. Personal doctor listened carefully	0.08	0.24	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Adult	Molina	Rating of Health Plan	19	Q19. Personal doctor showed respect for what you had to say	0.07	0.22	
Adult	Molina	Rating of Health Plan	20	Q20. Personal doctor spent enough time with you	0.09	0.26	
Adult	Molina	Rating of Health Plan	25	Q25. Easy to get appointment as soon as needed	0.16	0.30	
Adult	Molina	Rating of Health Plan	31	Q31. Received information or help from health plan	0.16	0.13	
Adult	Molina	Rating of Health Plan	32	Q32. Health plan customer service treated you with courtesy and respect	0.02	0.01	
Adult	Molina	Rating of Health Care	4	Q4. Got care as soon as needed	0.14	0.38	
Adult	Molina	Rating of Health Care	6	Q6. Got an appointment as soon as needed	0.16	0.18	
Adult	Molina	Rating of Health Care	10	Q10. Doctor explained reasons to take a medication	0.06	0.03	
Adult	Molina	Rating of Health Care	11	Q11. Doctor explained reasons not to take a medication	0.28	0.02	
Adult	Molina	Rating of Health Care	12	Q12. Doctor asked you what you thought was best for you	0.20	0.20	
Adult	Molina	Rating of Health Care	14	Q14. Easy to get treatment needed	0.11	0.44	
Adult	Molina	Rating of Health Care	17	Q17. Personal doctor explained things in an understandable way	0.07	0.18	
Adult	Molina	Rating of Health Care	18	Q18. Personal doctor listened carefully	0.08	0.32	
Adult	Molina	Rating of Health Care	19	Q19. Personal doctor showed respect for what you had to say	0.07	0.27	
Adult	Molina	Rating of Health Care	20	Q20. Personal doctor spent enough time with you	0.09	0.31	
Adult	Molina	Rating of Health Care	25	Q25. Easy to get appointment as soon as needed	0.16	0.18	
Adult	Molina	Rating of Health Care	31	Q31. Received information or help from health plan	0.16	0.04	*
Adult	Molina	Rating of Health Care	32	Q32. Health plan customer service treated you with courtesy and respect	0.02	0.02	*
Adult	Molina	Rating of Personal Doctor	4	Q4. Got care as soon as needed	0.14	0.12	
Adult	Molina	Rating of Personal Doctor	6	Q6. Got an appointment as soon as needed	0.16	0.05	
Adult	Molina	Rating of Personal Doctor	10	Q10. Doctor explained reasons to take a medication	0.06	0.03	
Adult	Molina	Rating of Personal Doctor	11	Q11. Doctor explained reasons not to take a medication	0.28	0.02	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Adult	Molina	Rating of Personal Doctor	12	Q12. Doctor asked you what you thought was best for you	0.20	0.02	
Adult	Molina	Rating of Personal Doctor	14	Q14. Easy to get treatment needed	0.11	0.30	
Adult	Molina	Rating of Personal Doctor	17	Q17. Personal doctor explained things in an understandable way	0.07	0.48	
Adult	Molina	Rating of Personal Doctor	18	Q18. Personal doctor listened carefully	0.08	0.61	
Adult	Molina	Rating of Personal Doctor	19	Q19. Personal doctor showed respect for what you had to say	0.07	0.51	
Adult	Molina	Rating of Personal Doctor	20	Q20. Personal doctor spent enough time with you	0.09	0.55	
Adult	Molina	Rating of Personal Doctor	25	Q25. Easy to get appointment as soon as needed	0.16	0.06	
Adult	Molina	Rating of Personal Doctor	31	Q31. Received information or help from health plan	0.16	0.13	*
Adult	Molina	Rating of Personal Doctor	32	Q32. Health plan customer service treated you with courtesy and respect	0.02	0.03	*
Adult	Paramount	Rating of Health Plan	4	Q4. Got care as soon as needed	0.15	0.26	
Adult	Paramount	Rating of Health Plan	6	Q6. Got an appointment as soon as needed	0.16	0.15	
Adult	Paramount	Rating of Health Plan	10	Q10. Doctor explained reasons to take a medication	0.08	0.18	
Adult	Paramount	Rating of Health Plan	11	Q11. Doctor explained reasons not to take a medication	0.39	0.13	
Adult	Paramount	Rating of Health Plan	12	Q12. Doctor asked you what you thought was best for you	0.17	0.01	
Adult	Paramount	Rating of Health Plan	14	Q14. Easy to get treatment needed	0.08	0.30	
Adult	Paramount	Rating of Health Plan	17	Q17. Personal doctor explained things in an understandable way	0.05	0.22	
Adult	Paramount	Rating of Health Plan	18	Q18. Personal doctor listened carefully	0.06	0.15	
Adult	Paramount	Rating of Health Plan	19	Q19. Personal doctor showed respect for what you had to say	0.05	0.12	
Adult	Paramount	Rating of Health Plan	20	Q20. Personal doctor spent enough time with you	0.08	0.26	
Adult	Paramount	Rating of Health Plan	25	Q25. Easy to get appointment as soon as needed	0.12	0.08	
Adult	Paramount	Rating of Health Plan	31	Q31. Received information or help from health plan	0.16	0.30	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Adult	Paramount	Rating of Health Plan	32	Q32. Health plan customer service treated you with courtesy and respect	0.01	0.07	
Adult	Paramount	Rating of Health Care	4	Q4. Got care as soon as needed	0.15	0.38	
Adult	Paramount	Rating of Health Care	6	Q6. Got an appointment as soon as needed	0.16	0.15	
Adult	Paramount	Rating of Health Care	10	Q10. Doctor explained reasons to take a medication	0.08	0.11	
Adult	Paramount	Rating of Health Care	11	Q11. Doctor explained reasons not to take a medication	0.39	0.03	
Adult	Paramount	Rating of Health Care	12	Q12. Doctor asked you what you thought was best for you	0.17	0.04	
Adult	Paramount	Rating of Health Care	14	Q14. Easy to get treatment needed	0.08	0.35	
Adult	Paramount	Rating of Health Care	17	Q17. Personal doctor explained things in an understandable way	0.05	0.28	
Adult	Paramount	Rating of Health Care	18	Q18. Personal doctor listened carefully	0.06	0.23	
Adult	Paramount	Rating of Health Care	19	Q19. Personal doctor showed respect for what you had to say	0.05	0.22	
Adult	Paramount	Rating of Health Care	20	Q20. Personal doctor spent enough time with you	0.08	0.26	
Adult	Paramount	Rating of Health Care	25	Q25. Easy to get appointment as soon as needed	0.12	0.18	
Adult	Paramount	Rating of Health Care	31	Q31. Received information or help from health plan	0.16	0.18	*
Adult	Paramount	Rating of Health Care	32	Q32. Health plan customer service treated you with courtesy and respect	0.01	0.00	*
Adult	Paramount	Rating of Personal Doctor	4	Q4. Got care as soon as needed	0.15	0.19	
Adult	Paramount	Rating of Personal Doctor	6	Q6. Got an appointment as soon as needed	0.16	0.02	
Adult	Paramount	Rating of Personal Doctor	10	Q10. Doctor explained reasons to take a medication	0.08	0.15	
Adult	Paramount	Rating of Personal Doctor	11	Q11. Doctor explained reasons not to take a medication	0.39	0.04	
Adult	Paramount	Rating of Personal Doctor	12	Q12. Doctor asked you what you thought was best for you	0.17	0.05	
Adult	Paramount	Rating of Personal Doctor	14	Q14. Easy to get treatment needed	0.08	0.18	
Adult	Paramount	Rating of Personal Doctor	17	Q17. Personal doctor explained things in an understandable way	0.05	0.55	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Adult	Paramount	Rating of Personal Doctor	18	Q18. Personal doctor listened carefully	0.06	0.52	
Adult	Paramount	Rating of Personal Doctor	19	Q19. Personal doctor showed respect for what you had to say	0.05	0.50	
Adult	Paramount	Rating of Personal Doctor	20	Q20. Personal doctor spent enough time with you	0.08	0.50	
Adult	Paramount	Rating of Personal Doctor	25	Q25. Easy to get appointment as soon as needed	0.12	0.04	
Adult	Paramount	Rating of Personal Doctor	31	Q31. Received information or help from health plan	0.16	0.10	*
Adult	Paramount	Rating of Personal Doctor	32	Q32. Health plan customer service treated you with courtesy and respect	0.01	0.07	*
Adult	UnitedHealthcare	Rating of Health Plan	4	Q4. Got care as soon as needed	0.19	0.28	
Adult	UnitedHealthcare	Rating of Health Plan	6	Q6. Got an appointment as soon as needed	0.18	0.14	
Adult	UnitedHealthcare	Rating of Health Plan	10	Q10. Doctor explained reasons to take a medication	0.06	0.00	
Adult	UnitedHealthcare	Rating of Health Plan	11	Q11. Doctor explained reasons not to take a medication	0.36	0.01	
Adult	UnitedHealthcare	Rating of Health Plan	12	Q12. Doctor asked you what you thought was best for you	0.26	0.21	
Adult	UnitedHealthcare	Rating of Health Plan	14	Q14. Easy to get treatment needed	0.12	0.35	
Adult	UnitedHealthcare	Rating of Health Plan	17	Q17. Personal doctor explained things in an understandable way	0.08	0.36	
Adult	UnitedHealthcare	Rating of Health Plan	18	Q18. Personal doctor listened carefully	0.09	0.22	
Adult	UnitedHealthcare	Rating of Health Plan	19	Q19. Personal doctor showed respect for what you had to say	0.06	0.17	
Adult	UnitedHealthcare	Rating of Health Plan	20	Q20. Personal doctor spent enough time with you	0.10	0.38	
Adult	UnitedHealthcare	Rating of Health Plan	25	Q25. Easy to get appointment as soon as needed	0.16	0.22	
Adult	UnitedHealthcare	Rating of Health Plan	31	Q31. Received information or help from health plan	0.09	0.18	*
Adult	UnitedHealthcare	Rating of Health Plan	32	Q32. Health plan customer service treated you with courtesy and respect	0.03	0.26	*
Adult	UnitedHealthcare	Rating of Health Care	4	Q4. Got care as soon as needed	0.19	0.39	
Adult	UnitedHealthcare	Rating of Health Care	6	Q6. Got an appointment as soon as needed	0.18	0.20	
Adult	UnitedHealthcare	Rating of Health Care	10	Q10. Doctor explained reasons to take a medication	0.06	0.07	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Adult	UnitedHealthcare	Rating of Health Care	11	Q11. Doctor explained reasons not to take a medication	0.36	0.02	
Adult	UnitedHealthcare	Rating of Health Care	12	Q12. Doctor asked you what you thought was best for you	0.26	0.18	
Adult	UnitedHealthcare	Rating of Health Care	14	Q14. Easy to get treatment needed	0.12	0.31	
Adult	UnitedHealthcare	Rating of Health Care	17	Q17. Personal doctor explained things in an understandable way	0.08	0.34	
Adult	UnitedHealthcare	Rating of Health Care	18	Q18. Personal doctor listened carefully	0.09	0.27	
Adult	UnitedHealthcare	Rating of Health Care	19	Q19. Personal doctor showed respect for what you had to say	0.06	0.31	
Adult	UnitedHealthcare	Rating of Health Care	20	Q20. Personal doctor spent enough time with you	0.10	0.29	
Adult	UnitedHealthcare	Rating of Health Care	25	Q25. Easy to get appointment as soon as needed	0.16	0.26	
Adult	UnitedHealthcare	Rating of Health Care	31	Q31. Received information or help from health plan	0.09	0.15	*
Adult	UnitedHealthcare	Rating of Health Care	32	Q32. Health plan customer service treated you with courtesy and respect	0.03	0.19	*
Adult	UnitedHealthcare	Rating of Personal Doctor	4	Q4. Got care as soon as needed	0.19	0.37	
Adult	UnitedHealthcare	Rating of Personal Doctor	6	Q6. Got an appointment as soon as needed	0.18	0.24	
Adult	UnitedHealthcare	Rating of Personal Doctor	10	Q10. Doctor explained reasons to take a medication	0.06	0.04	
Adult	UnitedHealthcare	Rating of Personal Doctor	11	Q11. Doctor explained reasons not to take a medication	0.36	0.05	
Adult	UnitedHealthcare	Rating of Personal Doctor	12	Q12. Doctor asked you what you thought was best for you	0.26	0.25	
Adult	UnitedHealthcare	Rating of Personal Doctor	14	Q14. Easy to get treatment needed	0.12	0.39	
Adult	UnitedHealthcare	Rating of Personal Doctor	17	Q17. Personal doctor explained things in an understandable way	0.08	0.55	
Adult	UnitedHealthcare	Rating of Personal Doctor	18	Q18. Personal doctor listened carefully	0.09	0.58	
Adult	UnitedHealthcare	Rating of Personal Doctor	19	Q19. Personal doctor showed respect for what you had to say	0.06	0.46	
Adult	UnitedHealthcare	Rating of Personal Doctor	20	Q20. Personal doctor spent enough time with you	0.10	0.58	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Adult	UnitedHealthcare	Rating of Personal Doctor	25	Q25. Easy to get appointment as soon as needed	0.16	0.28	
Adult	UnitedHealthcare	Rating of Personal Doctor	31	Q31. Received information or help from health plan	0.09	0.12	*
Adult	UnitedHealthcare	Rating of Personal Doctor	32	Q32. Health plan customer service treated you with courtesy and respect	0.03	0.17	*
Child	Ohio Medicaid	Rating of Health Plan	4	Q4. Got care as soon as needed	0.05	0.03	
Child	Ohio Medicaid	Rating of Health Plan	6	Q6. Got an appointment as soon as needed	0.10	0.16	
Child	Ohio Medicaid	Rating of Health Plan	11	Q11. Doctor explained reasons to take a medication	0.03	0.01	
Child	Ohio Medicaid	Rating of Health Plan	12	Q12. Doctor explained reasons not to take a medication	0.28	0.02	
Child	Ohio Medicaid	Rating of Health Plan	13	Q13. Doctor asked you what you thought was best for you	0.16	0.08	
Child	Ohio Medicaid	Rating of Health Plan	15	Q15. Easy to get treatment needed	0.08	0.29	
Child	Ohio Medicaid	Rating of Health Plan	32	Q32. Personal doctor explained things in an understandable way	0.03	0.09	
Child	Ohio Medicaid	Rating of Health Plan	33	Q33. Personal doctor listened carefully	0.03	0.18	
Child	Ohio Medicaid	Rating of Health Plan	34	Q34. Personal doctor showed respect for what you had to say	0.03	0.18	
Child	Ohio Medicaid	Rating of Health Plan	37	Q37. Personal doctor spent enough time with you	0.07	0.18	
Child	Ohio Medicaid	Rating of Health Plan	46	Q46. Easy to get appointment as soon as needed	0.15	0.25	
Child	Ohio Medicaid	Rating of Health Plan	50	Q50. Received information or help from health plan	0.15	0.34	
Child	Ohio Medicaid	Rating of Health Plan	51	Q51. Health plan customer service treated you with courtesy and respect	0.06	0.20	
Child	Ohio Medicaid	Rating of Health Care	4	Q4. Got care as soon as needed	0.05	0.16	
Child	Ohio Medicaid	Rating of Health Care	6	Q6. Got an appointment as soon as needed	0.10	0.20	
Child	Ohio Medicaid	Rating of Health Care	11	Q11. Doctor explained reasons to take a medication	0.03	0.06	
Child	Ohio Medicaid	Rating of Health Care	12	Q12. Doctor explained reasons not to take a medication	0.28	0.04	
Child	Ohio Medicaid	Rating of Health Care	13	Q13. Doctor asked you what you thought was best for you	0.16	0.21	
Child	Ohio Medicaid	Rating of Health Care	15	Q15. Easy to get treatment needed	0.08	0.41	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Child	Ohio Medicaid	Rating of Health Care	32	Q32. Personal doctor explained things in an understandable way	0.03	0.17	
Child	Ohio Medicaid	Rating of Health Care	33	Q33. Personal doctor listened carefully	0.03	0.27	
Child	Ohio Medicaid	Rating of Health Care	34	Q34. Personal doctor showed respect for what you had to say	0.03	0.26	
Child	Ohio Medicaid	Rating of Health Care	37	Q37. Personal doctor spent enough time with you	0.07	0.26	
Child	Ohio Medicaid	Rating of Health Care	46	Q46. Easy to get appointment as soon as needed	0.15	0.19	
Child	Ohio Medicaid	Rating of Health Care	50	Q50. Received information or help from health plan	0.15	0.28	
Child	Ohio Medicaid	Rating of Health Care	51	Q51. Health plan customer service treated you with courtesy and respect	0.06	0.16	
Child	Ohio Medicaid	Rating of Personal Doctor	4	Q4. Got care as soon as needed	0.05	0.16	
Child	Ohio Medicaid	Rating of Personal Doctor	6	Q6. Got an appointment as soon as needed	0.10	0.18	
Child	Ohio Medicaid	Rating of Personal Doctor	11	Q11. Doctor explained reasons to take a medication	0.03	0.01	
Child	Ohio Medicaid	Rating of Personal Doctor	12	Q12. Doctor explained reasons not to take a medication	0.28	0.01	
Child	Ohio Medicaid	Rating of Personal Doctor	13	Q13. Doctor asked you what you thought was best for you	0.16	0.21	
Child	Ohio Medicaid	Rating of Personal Doctor	15	Q15. Easy to get treatment needed	0.08	0.30	
Child	Ohio Medicaid	Rating of Personal Doctor	32	Q32. Personal doctor explained things in an understandable way	0.03	0.21	
Child	Ohio Medicaid	Rating of Personal Doctor	33	Q33. Personal doctor listened carefully	0.03	0.41	
Child	Ohio Medicaid	Rating of Personal Doctor	34	Q34. Personal doctor showed respect for what you had to say	0.03	0.39	
Child	Ohio Medicaid	Rating of Personal Doctor	37	Q37. Personal doctor spent enough time with you	0.07	0.39	
Child	Ohio Medicaid	Rating of Personal Doctor	46	Q46. Easy to get appointment as soon as needed	0.15	0.12	
Child	Ohio Medicaid	Rating of Personal Doctor	50	Q50. Received information or help from health plan	0.15	0.21	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Child	Ohio Medicaid	Rating of Personal Doctor	51	Q51. Health plan customer service treated you with courtesy and respect	0.06	0.15	
Child	Buckeye	Rating of Health Plan	4	Q4. Got care as soon as needed	0.06	0.03	
Child	Buckeye	Rating of Health Plan	6	Q6. Got an appointment as soon as needed	0.09	0.23	
Child	Buckeye	Rating of Health Plan	11	Q11. Doctor explained reasons to take a medication	0.03	0.05	
Child	Buckeye	Rating of Health Plan	12	Q12. Doctor explained reasons not to take a medication	0.30	0.10	
Child	Buckeye	Rating of Health Plan	13	Q13. Doctor asked you what you thought was best for you	0.19	0.18	
Child	Buckeye	Rating of Health Plan	15	Q15. Easy to get treatment needed	0.09	0.39	
Child	Buckeye	Rating of Health Plan	32	Q32. Personal doctor explained things in an understandable way	0.04	0.07	
Child	Buckeye	Rating of Health Plan	33	Q33. Personal doctor listened carefully	0.04	0.15	
Child	Buckeye	Rating of Health Plan	34	Q34. Personal doctor showed respect for what you had to say	0.02	0.16	
Child	Buckeye	Rating of Health Plan	37	Q37. Personal doctor spent enough time with you	0.08	0.09	
Child	Buckeye	Rating of Health Plan	46	Q46. Easy to get appointment as soon as needed	0.18	0.45	*
Child	Buckeye	Rating of Health Plan	50	Q50. Received information or help from health plan	0.14	0.50	
Child	Buckeye	Rating of Health Plan	51	Q51. Health plan customer service treated you with courtesy and respect	0.08	0.12	
Child	Buckeye	Rating of Health Care	4	Q4. Got care as soon as needed	0.06	0.15	
Child	Buckeye	Rating of Health Care	6	Q6. Got an appointment as soon as needed	0.09	0.26	
Child	Buckeye	Rating of Health Care	11	Q11. Doctor explained reasons to take a medication	0.03	0.06	
Child	Buckeye	Rating of Health Care	12	Q12. Doctor explained reasons not to take a medication	0.30	0.14	
Child	Buckeye	Rating of Health Care	13	Q13. Doctor asked you what you thought was best for you	0.19	0.10	
Child	Buckeye	Rating of Health Care	15	Q15. Easy to get treatment needed	0.09	0.39	
Child	Buckeye	Rating of Health Care	32	Q32. Personal doctor explained things in an understandable way	0.04	0.18	
Child	Buckeye	Rating of Health Care	33	Q33. Personal doctor listened carefully	0.04	0.25	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Child	Buckeye	Rating of Health Care	34	Q34. Personal doctor showed respect for what you had to say	0.02	0.21	
Child	Buckeye	Rating of Health Care	37	Q37. Personal doctor spent enough time with you	0.08	0.19	
Child	Buckeye	Rating of Health Care	46	Q46. Easy to get appointment as soon as needed	0.18	0.24	*
Child	Buckeye	Rating of Health Care	50	Q50. Received information or help from health plan	0.14	0.33	
Child	Buckeye	Rating of Health Care	51	Q51. Health plan customer service treated you with courtesy and respect	0.08	0.37	
Child	Buckeye	Rating of Personal Doctor	4	Q4. Got care as soon as needed	0.06	0.23	
Child	Buckeye	Rating of Personal Doctor	6	Q6. Got an appointment as soon as needed	0.09	0.21	
Child	Buckeye	Rating of Personal Doctor	11	Q11. Doctor explained reasons to take a medication	0.03	0.01	*
Child	Buckeye	Rating of Personal Doctor	12	Q12. Doctor explained reasons not to take a medication	0.30	0.11	*
Child	Buckeye	Rating of Personal Doctor	13	Q13. Doctor asked you what you thought was best for you	0.19	0.16	*
Child	Buckeye	Rating of Personal Doctor	15	Q15. Easy to get treatment needed	0.09	0.27	
Child	Buckeye	Rating of Personal Doctor	32	Q32. Personal doctor explained things in an understandable way	0.04	0.21	
Child	Buckeye	Rating of Personal Doctor	33	Q33. Personal doctor listened carefully	0.04	0.39	
Child	Buckeye	Rating of Personal Doctor	34	Q34. Personal doctor showed respect for what you had to say	0.02	0.30	
Child	Buckeye	Rating of Personal Doctor	37	Q37. Personal doctor spent enough time with you	0.08	0.29	
Child	Buckeye	Rating of Personal Doctor	46	Q46. Easy to get appointment as soon as needed	0.18	0.07	*
Child	Buckeye	Rating of Personal Doctor	50	Q50. Received information or help from health plan	0.14	0.36	
Child	Buckeye	Rating of Personal Doctor	51	Q51. Health plan customer service treated you with courtesy and respect	0.08	0.50	
Child	CareSource	Rating of Health Plan	4	Q4. Got care as soon as needed	0.06	0.11	
Child	CareSource	Rating of Health Plan	6	Q6. Got an appointment as soon as needed	0.10	0.14	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Child	CareSource	Rating of Health Plan	11	Q11. Doctor explained reasons to take a medication	0.04	0.06	
Child	CareSource	Rating of Health Plan	12	Q12. Doctor explained reasons not to take a medication	0.34	0.06	
Child	CareSource	Rating of Health Plan	13	Q13. Doctor asked you what you thought was best for you	0.13	0.10	
Child	CareSource	Rating of Health Plan	15	Q15. Easy to get treatment needed	0.07	0.22	
Child	CareSource	Rating of Health Plan	32	Q32. Personal doctor explained things in an understandable way	0.02	0.07	
Child	CareSource	Rating of Health Plan	33	Q33. Personal doctor listened carefully	0.03	0.24	
Child	CareSource	Rating of Health Plan	34	Q34. Personal doctor showed respect for what you had to say	0.02	0.09	
Child	CareSource	Rating of Health Plan	37	Q37. Personal doctor spent enough time with you	0.05	0.18	
Child	CareSource	Rating of Health Plan	46	Q46. Easy to get appointment as soon as needed	0.21	0.32	*
Child	CareSource	Rating of Health Plan	50	Q50. Received information or help from health plan	0.15	0.27	
Child	CareSource	Rating of Health Plan	51	Q51. Health plan customer service treated you with courtesy and respect	0.07	0.32	
Child	CareSource	Rating of Health Care	4	Q4. Got care as soon as needed	0.06	0.09	
Child	CareSource	Rating of Health Care	6	Q6. Got an appointment as soon as needed	0.10	0.22	
Child	CareSource	Rating of Health Care	11	Q11. Doctor explained reasons to take a medication	0.04	0.13	
Child	CareSource	Rating of Health Care	12	Q12. Doctor explained reasons not to take a medication	0.34	0.05	
Child	CareSource	Rating of Health Care	13	Q13. Doctor asked you what you thought was best for you	0.13	0.25	
Child	CareSource	Rating of Health Care	15	Q15. Easy to get treatment needed	0.07	0.33	
Child	CareSource	Rating of Health Care	32	Q32. Personal doctor explained things in an understandable way	0.02	0.04	
Child	CareSource	Rating of Health Care	33	Q33. Personal doctor listened carefully	0.03	0.37	
Child	CareSource	Rating of Health Care	34	Q34. Personal doctor showed respect for what you had to say	0.02	0.22	
Child	CareSource	Rating of Health Care	37	Q37. Personal doctor spent enough time with you	0.05	0.17	
Child	CareSource	Rating of Health Care	46	Q46. Easy to get appointment as soon as needed	0.21	0.09	*

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Child	CareSource	Rating of Health Care	50	Q50. Received information or help from health plan	0.15	0.13	*
Child	CareSource	Rating of Health Care	51	Q51. Health plan customer service treated you with courtesy and respect	0.07	0.04	*
Child	CareSource	Rating of Personal Doctor	4	Q4. Got care as soon as needed	0.06	0.01	
Child	CareSource	Rating of Personal Doctor	6	Q6. Got an appointment as soon as needed	0.10	0.29	
Child	CareSource	Rating of Personal Doctor	11	Q11. Doctor explained reasons to take a medication	0.04	0.03	
Child	CareSource	Rating of Personal Doctor	12	Q12. Doctor explained reasons not to take a medication	0.34	0.05	
Child	CareSource	Rating of Personal Doctor	13	Q13. Doctor asked you what you thought was best for you	0.13	0.29	
Child	CareSource	Rating of Personal Doctor	15	Q15. Easy to get treatment needed	0.07	0.36	
Child	CareSource	Rating of Personal Doctor	32	Q32. Personal doctor explained things in an understandable way	0.02	0.13	
Child	CareSource	Rating of Personal Doctor	33	Q33. Personal doctor listened carefully	0.03	0.50	
Child	CareSource	Rating of Personal Doctor	34	Q34. Personal doctor showed respect for what you had to say	0.02	0.21	
Child	CareSource	Rating of Personal Doctor	37	Q37. Personal doctor spent enough time with you	0.05	0.33	
Child	CareSource	Rating of Personal Doctor	46	Q46. Easy to get appointment as soon as needed	0.21	0.09	*
Child	CareSource	Rating of Personal Doctor	50	Q50. Received information or help from health plan	0.15	0.12	*
Child	CareSource	Rating of Personal Doctor	51	Q51. Health plan customer service treated you with courtesy and respect	0.07	0.06	*
Child	Molina	Rating of Health Plan	4	Q4. Got care as soon as needed	0.05	0.02	
Child	Molina	Rating of Health Plan	6	Q6. Got an appointment as soon as needed	0.10	0.14	
Child	Molina	Rating of Health Plan	11	Q11. Doctor explained reasons to take a medication	0.02	0.09	
Child	Molina	Rating of Health Plan	12	Q12. Doctor explained reasons not to take a medication	0.24	0.03	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Child	Molina	Rating of Health Plan	13	Q13. Doctor asked you what you thought was best for you	0.18	0.10	
Child	Molina	Rating of Health Plan	15	Q15. Easy to get treatment needed	0.07	0.30	
Child	Molina	Rating of Health Plan	32	Q32. Personal doctor explained things in an understandable way	0.02	0.11	
Child	Molina	Rating of Health Plan	33	Q33. Personal doctor listened carefully	0.03	0.19	
Child	Molina	Rating of Health Plan	34	Q34. Personal doctor showed respect for what you had to say	0.04	0.25	
Child	Molina	Rating of Health Plan	37	Q37. Personal doctor spent enough time with you	0.08	0.27	
Child	Molina	Rating of Health Plan	46	Q46. Easy to get appointment as soon as needed	0.13	0.13	
Child	Molina	Rating of Health Plan	50	Q50. Received information or help from health plan	0.15	0.36	
Child	Molina	Rating of Health Plan	51	Q51. Health plan customer service treated you with courtesy and respect	0.06	0.32	
Child	Molina	Rating of Health Care	4	Q4. Got care as soon as needed	0.05	0.17	
Child	Molina	Rating of Health Care	6	Q6. Got an appointment as soon as needed	0.10	0.14	
Child	Molina	Rating of Health Care	11	Q11. Doctor explained reasons to take a medication	0.02	0.04	
Child	Molina	Rating of Health Care	12	Q12. Doctor explained reasons not to take a medication	0.24	0.00	
Child	Molina	Rating of Health Care	13	Q13. Doctor asked you what you thought was best for you	0.18	0.19	
Child	Molina	Rating of Health Care	15	Q15. Easy to get treatment needed	0.07	0.44	
Child	Molina	Rating of Health Care	32	Q32. Personal doctor explained things in an understandable way	0.02	0.18	
Child	Molina	Rating of Health Care	33	Q33. Personal doctor listened carefully	0.03	0.26	
Child	Molina	Rating of Health Care	34	Q34. Personal doctor showed respect for what you had to say	0.04	0.30	
Child	Molina	Rating of Health Care	37	Q37. Personal doctor spent enough time with you	0.08	0.34	
Child	Molina	Rating of Health Care	46	Q46. Easy to get appointment as soon as needed	0.13	0.27	
Child	Molina	Rating of Health Care	50	Q50. Received information or help from health plan	0.15	0.41	
Child	Molina	Rating of Health Care	51	Q51. Health plan customer service treated you with courtesy and respect	0.06	0.24	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Child	Molina	Rating of Personal Doctor	4	Q4. Got care as soon as needed	0.05	0.23	
Child	Molina	Rating of Personal Doctor	6	Q6. Got an appointment as soon as needed	0.10	0.11	
Child	Molina	Rating of Personal Doctor	11	Q11. Doctor explained reasons to take a medication	0.02	0.08	
Child	Molina	Rating of Personal Doctor	12	Q12. Doctor explained reasons not to take a medication	0.24	0.04	
Child	Molina	Rating of Personal Doctor	13	Q13. Doctor asked you what you thought was best for you	0.18	0.17	
Child	Molina	Rating of Personal Doctor	15	Q15. Easy to get treatment needed	0.07	0.28	
Child	Molina	Rating of Personal Doctor	32	Q32. Personal doctor explained things in an understandable way	0.02	0.18	
Child	Molina	Rating of Personal Doctor	33	Q33. Personal doctor listened carefully	0.03	0.32	
Child	Molina	Rating of Personal Doctor	34	Q34. Personal doctor showed respect for what you had to say	0.04	0.40	
Child	Molina	Rating of Personal Doctor	37	Q37. Personal doctor spent enough time with you	0.08	0.36	
Child	Molina	Rating of Personal Doctor	46	Q46. Easy to get appointment as soon as needed	0.13	0.03	
Child	Molina	Rating of Personal Doctor	50	Q50. Received information or help from health plan	0.15	0.21	
Child	Molina	Rating of Personal Doctor	51	Q51. Health plan customer service treated you with courtesy and respect	0.06	0.02	
Child	Paramount	Rating of Health Plan	4	Q4. Got care as soon as needed	0.04	0.02	*
Child	Paramount	Rating of Health Plan	6	Q6. Got an appointment as soon as needed	0.07	0.38	
Child	Paramount	Rating of Health Plan	11	Q11. Doctor explained reasons to take a medication	0.02	0.00	*
Child	Paramount	Rating of Health Plan	12	Q12. Doctor explained reasons not to take a medication	0.31	0.14	*
Child	Paramount	Rating of Health Plan	13	Q13. Doctor asked you what you thought was best for you	0.12	0.03	*
Child	Paramount	Rating of Health Plan	15	Q15. Easy to get treatment needed	0.06	0.25	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Child	Paramount	Rating of Health Plan	32	Q32. Personal doctor explained things in an understandable way	0.04	0.03	
Child	Paramount	Rating of Health Plan	33	Q33. Personal doctor listened carefully	0.04	0.08	
Child	Paramount	Rating of Health Plan	34	Q34. Personal doctor showed respect for what you had to say	0.05	0.11	
Child	Paramount	Rating of Health Plan	37	Q37. Personal doctor spent enough time with you	0.07	0.08	
Child	Paramount	Rating of Health Plan	46	Q46. Easy to get appointment as soon as needed	0.10	0.18	*
Child	Paramount	Rating of Health Plan	50	Q50. Received information or help from health plan	0.11	0.02	*
Child	Paramount	Rating of Health Plan	51	Q51. Health plan customer service treated you with courtesy and respect	0.02	0.08	*
Child	Paramount	Rating of Health Care	4	Q4. Got care as soon as needed	0.04	0.29	*
Child	Paramount	Rating of Health Care	6	Q6. Got an appointment as soon as needed	0.07	0.42	
Child	Paramount	Rating of Health Care	11	Q11. Doctor explained reasons to take a medication	0.02	0.10	*
Child	Paramount	Rating of Health Care	12	Q12. Doctor explained reasons not to take a medication	0.31	0.46	*
Child	Paramount	Rating of Health Care	13	Q13. Doctor asked you what you thought was best for you	0.12	0.25	*
Child	Paramount	Rating of Health Care	15	Q15. Easy to get treatment needed	0.06	0.45	
Child	Paramount	Rating of Health Care	32	Q32. Personal doctor explained things in an understandable way	0.04	0.26	
Child	Paramount	Rating of Health Care	33	Q33. Personal doctor listened carefully	0.04	0.22	
Child	Paramount	Rating of Health Care	34	Q34. Personal doctor showed respect for what you had to say	0.05	0.25	
Child	Paramount	Rating of Health Care	37	Q37. Personal doctor spent enough time with you	0.07	0.19	
Child	Paramount	Rating of Health Care	46	Q46. Easy to get appointment as soon as needed	0.10	0.51	*
Child	Paramount	Rating of Health Care	50	Q50. Received information or help from health plan	0.11	0.07	*
Child	Paramount	Rating of Health Care	51	Q51. Health plan customer service treated you with courtesy and respect	0.02	0.10	*
Child	Paramount	Rating of Personal Doctor	4	Q4. Got care as soon as needed	0.04	0.18	*
Child	Paramount	Rating of Personal Doctor	6	Q6. Got an appointment as soon as needed	0.07	0.31	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Child	Paramount	Rating of Personal Doctor	11	Q11. Doctor explained reasons to take a medication	0.02	0.00	*
Child	Paramount	Rating of Personal Doctor	12	Q12. Doctor explained reasons not to take a medication	0.31	0.09	*
Child	Paramount	Rating of Personal Doctor	13	Q13. Doctor asked you what you thought was best for you	0.12	0.05	*
Child	Paramount	Rating of Personal Doctor	15	Q15. Easy to get treatment needed	0.06	0.32	
Child	Paramount	Rating of Personal Doctor	32	Q32. Personal doctor explained things in an understandable way	0.04	0.27	
Child	Paramount	Rating of Personal Doctor	33	Q33. Personal doctor listened carefully	0.04	0.55	
Child	Paramount	Rating of Personal Doctor	34	Q34. Personal doctor showed respect for what you had to say	0.05	0.51	
Child	Paramount	Rating of Personal Doctor	37	Q37. Personal doctor spent enough time with you	0.07	0.59	
Child	Paramount	Rating of Personal Doctor	46	Q46. Easy to get appointment as soon as needed	0.10	0.50	*
Child	Paramount	Rating of Personal Doctor	50	Q50. Received information or help from health plan	0.11	0.16	*
Child	Paramount	Rating of Personal Doctor	51	Q51. Health plan customer service treated you with courtesy and respect	0.02	0.10	*
Child	UnitedHealthcare	Rating of Health Plan	4	Q4. Got care as soon as needed	0.06	0.03	*
Child	UnitedHealthcare	Rating of Health Plan	6	Q6. Got an appointment as soon as needed	0.10	0.00	
Child	UnitedHealthcare	Rating of Health Plan	11	Q11. Doctor explained reasons to take a medication	0.06	0.11	*
Child	UnitedHealthcare	Rating of Health Plan	12	Q12. Doctor explained reasons not to take a medication	0.19	0.16	*
Child	UnitedHealthcare	Rating of Health Plan	13	Q13. Doctor asked you what you thought was best for you	0.16	0.36	*
Child	UnitedHealthcare	Rating of Health Plan	15	Q15. Easy to get treatment needed	0.08	0.22	
Child	UnitedHealthcare	Rating of Health Plan	32	Q32. Personal doctor explained things in an understandable way	0.04	0.20	
Child	UnitedHealthcare	Rating of Health Plan	33	Q33. Personal doctor listened carefully	0.04	0.20	
Child	UnitedHealthcare	Rating of Health Plan	34	Q34. Personal doctor showed respect for what you had to say	0.04	0.18	

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Child	UnitedHealthcare	Rating of Health Plan	37	Q37. Personal doctor spent enough time with you	0.06	0.16	
Child	UnitedHealthcare	Rating of Health Plan	46	Q46. Easy to get appointment as soon as needed	0.13	0.29	*
Child	UnitedHealthcare	Rating of Health Plan	50	Q50. Received information or help from health plan	0.21	0.33	*
Child	UnitedHealthcare	Rating of Health Plan	51	Q51. Health plan customer service treated you with courtesy and respect	0.05	0.05	*
Child	UnitedHealthcare	Rating of Health Care	4	Q4. Got care as soon as needed	0.06	0.19	*
Child	UnitedHealthcare	Rating of Health Care	6	Q6. Got an appointment as soon as needed	0.10	0.11	
Child	UnitedHealthcare	Rating of Health Care	11	Q11. Doctor explained reasons to take a medication	0.06	0.33	*
Child	UnitedHealthcare	Rating of Health Care	12	Q12. Doctor explained reasons not to take a medication	0.19	0.10	*
Child	UnitedHealthcare	Rating of Health Care	13	Q13. Doctor asked you what you thought was best for you	0.16	0.36	*
Child	UnitedHealthcare	Rating of Health Care	15	Q15. Easy to get treatment needed	0.08	0.43	
Child	UnitedHealthcare	Rating of Health Care	32	Q32. Personal doctor explained things in an understandable way	0.04	0.19	
Child	UnitedHealthcare	Rating of Health Care	33	Q33. Personal doctor listened carefully	0.04	0.25	
Child	UnitedHealthcare	Rating of Health Care	34	Q34. Personal doctor showed respect for what you had to say	0.04	0.29	
Child	UnitedHealthcare	Rating of Health Care	37	Q37. Personal doctor spent enough time with you	0.06	0.30	
Child	UnitedHealthcare	Rating of Health Care	46	Q46. Easy to get appointment as soon as needed	0.13	0.10	*
Child	UnitedHealthcare	Rating of Health Care	50	Q50. Received information or help from health plan	0.21	0.15	*
Child	UnitedHealthcare	Rating of Health Care	51	Q51. Health plan customer service treated you with courtesy and respect	0.05	0.03	*
Child	UnitedHealthcare	Rating of Personal Doctor	4	Q4. Got care as soon as needed	0.06	0.16	*
Child	UnitedHealthcare	Rating of Personal Doctor	6	Q6. Got an appointment as soon as needed	0.10	0.19	
Child	UnitedHealthcare	Rating of Personal Doctor	11	Q11. Doctor explained reasons to take a medication	0.06	0.12	*
Child	UnitedHealthcare	Rating of Personal Doctor	12	Q12. Doctor explained reasons not to take a medication	0.19	0.22	*
Child	UnitedHealthcare	Rating of Personal Doctor	13	Q13. Doctor asked you what you thought was best for you	0.16	0.40	*

Type	Plan	Rating	Question	Question Label	Problem Score	Correlation	Asterisk <sup>1</sup>
Child	UnitedHealthcare	Rating of Personal Doctor	15	Q15. Easy to get treatment needed	0.08	0.36	
Child	UnitedHealthcare	Rating of Personal Doctor	32	Q32. Personal doctor explained things in an understandable way	0.04	0.38	
Child	UnitedHealthcare	Rating of Personal Doctor	33	Q33. Personal doctor listened carefully	0.04	0.46	
Child	UnitedHealthcare	Rating of Personal Doctor	34	Q34. Personal doctor showed respect for what you had to say	0.04	0.47	
Child	UnitedHealthcare	Rating of Personal Doctor	37	Q37. Personal doctor spent enough time with you	0.06	0.53	
Child	UnitedHealthcare	Rating of Personal Doctor	46	Q46. Easy to get appointment as soon as needed	0.13	0.06	*
Child	UnitedHealthcare	Rating of Personal Doctor	50	Q50. Received information or help from health plan	0.21	0.32	*
Child	UnitedHealthcare	Rating of Personal Doctor	51	Q51. Health plan customer service treated you with courtesy and respect	0.05	0.01	*

<sup>1</sup> \* indicates question scores were based on fewer than 100 responses