

Medicaid and MinnesotaCare Satisfaction Survey Results

Prepaid Medical Assistance Program (PMAP)

*

MinnesotaCare

*

Minnesota Senior Health Options (MSHO)

*

MinnesotaCare Limited Benefit Set

November 2005



Minnesota Department of **Human Services**

The Myers Group
2351 Henry Clower Boulevard, Suite D
Snellville, GA 30078-3107
www.themyersgroup.net

For More Information Contact:

Debra Stenseth, Supervisor
Performance Measurement and Quality Improvement
P.O. Box 64986
St. Paul, MN 55164-0986
Telephone: 651-431-2614
Fax: 651-431-7422
Email: deb.stenseth@state.mn.us

This information is available on the Minnesota Department Of Human Services website
<http://www.dhs.state.mn.us/healthcare/studies>

This information is available in other forms to people with disabilities by contacting us at:
651-431-2616

TDD/TTY users can call the Minnesota Relay at 711 or 1-800-627-3529
For the Speech-to-Speech Relay, call 1-877-627-3848

This report may be reproduced without restriction.
Citation of the source is appreciated.

November 2005

Medicaid and MinnesotaCare Satisfaction Survey Results

Table of Contents		Page
Introduction	Executive Summary	iii
Part I:	About the 2005 Survey	1
Part II:	Program Comparisons	6
Part III:	Plan-Specific Comparisons - PMAP	10
Part IV:	Program-Specific Results - MSHO	22
Part V:	Plan-Specific Comparisons - MinnesotaCare	26
Part VI:	Program-Specific Results - MinnesotaCare Limited Benefit Set	34
Part VII:	Custom Question Results- Program Comparisons	38
Part VIII:	Key Driver Analysis - Adult, Child, Seniors	40
Part IX:	SF-12v2 Survey Results - Program Comparison, Adults Only	46
APPENDIX A:	Technical Notes	48
APPENDIX B:	Respondent Characteristics	53

Executive Summary

The 2005 Medicaid and MinnesotaCare Satisfaction Survey is the fifth survey conducted since 1997 by the Minnesota Department of Human Services (DHS) using the Consumer Assessment of Health Plans Survey (CAHPS®) instrument and methodology. The purpose of these surveys is to assess and compare the satisfaction of adult and child enrollees in programs administered by DHS. The programs represented in this year's surveys include four managed care programs—the Prepaid Medical Assistance Program (PMAP), MinnesotaCare, the Minnesota Senior Health Options (MSHO), and MinnesotaCare Limited Benefit Set. The data was weighted in certain circumstances to more accurately reflect population health plan or age group percentages.

The core of the 2005 adult and child surveys plus optional Behavioral Health questions were conducted using the CAHPS® 3.0 Medicaid instruments. DHS custom questions added to the core survey tools include:

- Internet access, usage, and willingness to perform future on-line surveys (Adult, Senior and Child)
- Flu or pneumonia vaccinations received (Senior Only)
- Coordination of health care needs (Senior Only)

The survey tool also includes questions from the Medical Outcomes Study 12-Item Short Form (SF-12v2®) Survey, which measures enrollees' self-reported overall health status.

In addition to English, the survey instruments were capable of being translated and administered in the following five languages: Hmong, Russian, Spanish, Somali, and Vietnamese. The following table presents the total number of survey completes for each alternate language.

Language	Number of Surveys Completed
Hmong	0
Russian	0
Spanish	250
Somali	1
Vietnamese	0

An additional question regarding the respondent’s preferred spoken language was asked whether the survey was completed in English, Spanish or an alternate language. The total number of responses from those members who specified a language other than English or Spanish to the survey question “What language do you mainly speak at home?” is provided in the table below.

Language	Number of Responses	Percentage of Total “Other Language” Responses
Hmong	127	36.90%
Russian	49	14.24%
Vietnamese	33	9.59%
Somali	23	6.68%
Chinese	10	2.90%
Arabic	9	2.61%
Cambodian	9	2.61%
Amharic	7	2.03%
Filipino	7	2.03%
Laotian	7	2.03%
Tagalog	7	2.03%
Other*	56	16.35%

*The “Other” category consists of 4 or less responses from each of the following languages:

Anuak, Asian, Burmese, Cantonese, Czech, Farsi, Finnish, French, German, Gujarabi, Hindi, Indonesian, Italian, Karen, Khmera, Korean, Kurdish, Mandarin, Ojibwe, Pashto, Persian, Polish, Romanian, Sign Language, Soinke, Swahili, Swedish, Taiwanese, Tigrinya, Ukrainian, Yoruba, and Zapoteco.

In conclusion, out of 14,034 total responses, 251 surveys were completed in an alternate language, and 344 respondents answered that they mainly speak a language different from English or Spanish at home.

Noteworthy Findings and Conclusions

Information obtained from consumer surveys allows Managed Care Organizations (health plan or plans) to measure how well they are meeting their members' expectations and needs. It can also reveal areas of improvement and target areas where improvement is needed to increase the quality of care provided.

PMAP Findings

Ratings

- The PMAP weighted average shows the greatest satisfaction in the area of Rating of Doctor or Nurse and the lowest satisfaction in the area of Rating of Counseling or Treatment
- PMAP 18-64 consistently rates the lowest, while PMAP 65+ tends to rate the highest
- The greatest discrepancy between the age groups occurs in the area of Rating of Specialist. There is an 11% difference between rates given by PMAP 18-64 and PMAP 65+

Composites

How Well Doctors Communicate

- PMAP 65+ exhibits the highest level of satisfaction, while PMAP 18-64 displays the lowest, with a 5.5% difference between the two groups
- First Plan of Minnesota exhibits the highest score (96.4%), while Medica Health Plans displays the lowest score (84.4%)
- The greatest discrepancy between age groups is within Medica Health Plan: the <18 and 18-64 groups ranged from 94.2% to 84.4%

Courtesy, Respect, and Helpfulness of Office Staff

- PMAP 65+ exhibits the highest level of satisfaction, while PMAP 18-64 displays the lowest, with a 5.1% difference between the two groups
- South Country Health Alliance exhibits the highest score (97.4%), while Metropolitan Health Plan displays the lowest score (84.6%)
- The greatest discrepancy between age groups is within Metropolitan Health Plan: the 18-64 and 65+ groups ranged from 84.6% to 93.0%

Getting Needed Care

- PMAP <18 exhibits the highest level of satisfaction, while PMAP 18-64 displays the lowest, with a 6.2% difference between the two groups
- First Plan of Minnesota exhibits the highest score (90.9%), while UCare Minnesota displays the lowest score (74.0%)
- The greatest discrepancy between age groups is within HealthPartners: the < 18 and 18-64 groups ranged from 86.3% to 75.9%

Health Plan Customer Service

- PMAP <18 exhibits the highest level of satisfaction, while PMAP 65+ displays the lowest, with an 8.2% difference between the two groups
- First Plan of Minnesota exhibits the highest score (91.2%), while Medica Health Plan and PrimeWest Health System both display the lowest scores (61.7% each)
- The greatest discrepancy between age groups is within Medica Health Plan: the < 18 and 65+ groups ranged from 79.8% to 61.7%

MinnesotaCare Findings

Ratings

- The MinnesotaCare weighted average shows the greatest satisfaction in the area of Rating of Doctor or Nurse and the lowest satisfaction in the area of Rating of Counseling or Treatment
- MinnesotaCare <18 tends to rate the highest, while MinnesotaCare 18-64 tends to rate the lowest
- The greatest discrepancy between the age groups occurs in the area of Rating of Health Care. There is a 5.5% difference between rates given by MinnesotaCare <18 and MinnesotaCare 18-64

Composites

How Well Doctors Communicate

- MinnesotaCare <18 exhibits higher scores overall
- BluePlus exhibits the highest score (94.9%), while Metropolitan Health Plan displays the lowest score (88.9%)
- The greatest discrepancy between age groups is within UCare Minnesota: the <18 and 18-64 groups ranged from 94.1% to 89.1%

Courtesy, Respect, and Helpfulness of Office Staff

- MinnesotaCare <18 exhibits higher scores overall
- First Plan of Minnesota exhibits the highest score (96.4%), while UCare Minnesota displays the lowest score (89.8%)
- The greatest discrepancy between age groups is within UCare Minnesota: the <18 and 18-64 groups ranged from 94.7% to 89.8%

Getting Needed Care

- MinnesotaCare 18-64 exhibits higher scores overall
- Medica Health Plans exhibits the highest score (89.1%), while BluePlus displays the lowest score (77.1%)
- The greatest discrepancy between age groups is within Medica Health Plans: the <18 and 18-64 groups ranged from 89.1% to 81.6%

Health Plan Customer Service

- MinnesotaCare <18 exhibits higher scores overall
- First Plan of Minnesota exhibits the highest score (84.0%), while Itasca Medical Care displays the lowest score (63.0%)
- The greatest discrepancy between age groups is within First Plan of Minnesota: the <18 and 18-64 groups ranged from 84.0% to 74.3%

Minnesota Senior Health Options (MSHO) Findings

Ratings

- The Rating of Health Care exhibits the highest level of satisfaction with 85.0%, while the Rating of Counseling or Treatment displays the lowest level of satisfaction with 56.7%

Composites

- How Well Doctors Communicate and Courtesy, Respect and Helpfulness of Office Staff composites all score above 91%, while the Getting Needed Care and Health Plan Customer Service composites display lesser scores of 78.4% and 67.9%

MinnesotaCare Limited Benefit Set Findings

Ratings

- The Rating of Doctor or Nurse exhibits the highest level of satisfaction with 78.9%, while the Rating of Counseling or Treatment displays the lowest level of satisfaction with 51.2%

Composites

- The Courtesy, Respect and Helpfulness of Office Staff composite scores the highest with 92.1%, while the Health Plan Customer Service composite scores the lowest at 59.6%

Key Driver Analysis

PMAP < 18

- For PMAP <18 the How Well Doctors Communicate composite is most likely to be a “Monitor” and all of the Customer Service composites are considered a “Monitor”

PMAP 18-64

- PMAP 18-64 is most likely to have the How Well Doctors Communicate composite as a “Strength” and the Customer Service composite as a “Monitor” or “Opportunity”

MinnesotaCare < 18

- For MinnesotaCare <18 the How Well Doctors Communicate composite is more likely to be a “Strength” and the Customer Service composite is most likely to be a “Monitor”

MinnesotaCare 18-64

- Every MinnesotaCare 18-64 health plan has the How Well Doctors Communicate composite as a “Strength,” and there exists a nearly even distribution of the Customer Service composite as a “Monitor” or an “Opportunity” for the health plans

MSHO 65+

- For MSHO 65+ the How Well Doctors Communicate composite is a “Strength” and the Customer Service composite is an “Opportunity”

MinnesotaCare Limited Benefit Set 18-64

- For MinnesotaCare Limited Benefit Set the How Well Doctors Communicate composite is a “Monitor” and the Customer Service composite is an “Opportunity”

Part I: About the 2005 Survey

Who sponsored the survey?

The 2005 Medicaid and MinnesotaCare Satisfaction Survey was conducted by The Myers Group, an NCQA-certified CAHPS® vendor, under contract with the Minnesota Department of Human Services (DHS).

Why was the survey done?

The project was designed to assess and compare the satisfaction of adult and child enrollees of public programs administered by DHS. This survey has been conducted every two years since 1997.

What survey instruments were used?

The standardized survey instrument chosen for this study was the Consumer Assessment of Health Plans Survey (CAHPS®) 3.0 Medicaid Core Module. The instrument assesses topics such as: *How well doctors communicate; Helpfulness of office staff; Getting care that is needed; Health plan customer service; and Overall satisfaction with health plans and health care.* Also, 12 additional questions from the SF-12v2® survey instrument were added to two of the four survey tool versions (versions 2 and 4). The SF-12v2® is a standardized survey tool used to assess the self-reported functional health status of a defined population group. In summation, a total of four survey versions were implemented to collect data from the various population groups as presented below.

Survey Version 1 – Medicaid child survey used for PMAP and MinnesotaCare members

Survey Version 2 – Medicaid adult survey used for PMAP, MinnesotaCare and MinnesotaCare Limited Benefit Set members age 18 to 64

Survey Version 3 – Medicaid adult survey used for PMAP MCO's First Plan of Minnesota and Itasca Medical Care for members 18 and older

Survey Version 4 – Medicaid adult survey used for PMAP and MSHO members 65 and older

Who was surveyed?

The survey included four core population groups:

- Medical Assistance adult and children enrolled in managed care health plans
- MinnesotaCare adult and child enrollees that are enrolled in managed care health plans
- Medical Assistance senior enrollees that are enrolled in the Minnesota Senior Health Options (MSHO)
- MinnesotaCare adults without children enrollees that are enrolled in the MinnesotaCare Limited Benefit Set

Sampling and Analysis Matrix - Distribution of respondents by: Program, Health Plan, and Age

Age Ranges	Target Completions			Actual Completions		
	< 18	18-64	65+	< 18	18-64	65+
Prepaid Medical Assistance Program						
BluePlus	300	300	300	384	337	563
First Plan of Minnesota	300	300 (18 – 65+)		214	248	171
HealthPartners	300	300	300	356	287	425
Itasca Medical Care	300	300 (18 – 65+)		169	170	145
Medica Health Plans	300	300	300	358	354	384
Metropolitan Health Plan	300	300	300	372	267	186
PrimeWest Health System	300	300	300	328	474	427
South Country Health Alliance	300	300	300	355	358	371
UCare Minnesota	300	300	300	359	310	399
MinnesotaCare						
BluePlus	300	300		405	532	
First Plan of Minnesota	300	300		287	297	
HealthPartners	300	300		375	361	
Itasca Medical Care		300			294	
Medica Health Plans	300	300		382	370	
Metropolitan Health Plan		300			229	
UCare Minnesota	300	300		444	404	
MinnesotaCare Limited Benefit Set						
Adults without Children		300			433	
Minnesota Senior Health Options						
MSHO Community - Senior			300			450

How was the data collected?

From July through September of 2005, four survey tool versions were administered using a four-wave mail with a telephone follow-up methodology as follows:

- A personalized pre-notification letter
- An initial survey mail-out
- A postcard reminder
- A replacement survey to non-respondents
- Multiple attempt telephone survey follow-up of non-respondents (maximum of ten attempts)

Participation in the survey was entirely voluntary and confidential. The mail materials included a standard sentence translated in 5 languages that directed the enrollees to call a toll-free number for translation assistance.

Was the respondent information kept confidential?

Those asked to participate in the survey were told that they did not have to take part in the survey if they did not want to do so. Their answers are kept confidential and will never be matched with their names.

How was the survey data analyzed?

Three Levels of Analysis -

- Program and Age Level - overall comparisons of the four core population groups and the target age ranges.
- Health Plan Specific - comparisons of the managed care health plans participating in the Prepaid Medical Assistance Program (PMAP) and MinnesotaCare.
- Aggregate Level - adult and child analysis was completed for PMAP, MinnesotaCare, MSHO, and MinnesotaCare Limited Benefit Set by combining data for the different health programs in order to provide a Key Driver analysis by program.

Weighting of responses

In order to more accurately estimate population-level values, the data was weighted by program and age range in various circumstances. For example, when compiling the MinnesotaCare-level analyses, the responses from each plan were weighted to have the returns from the larger health plan have more impact on estimates than the returns from a smaller health plan. Weighting by age group was performed for PMAP and MinnesotaCare, and weighting by program was performed for the four program populations.

Topics for analysis

Results from the individual questions included in the survey were combined into nine topic areas (see below). The overall satisfaction scores are measured by responses to individual rating questions. The composite scores are an average of between two and four related individual questions. Custom questions, those topics chosen by DHS to facilitate further investigation, and SF-12v2 Survey results (those questions used to provide a standardized rating of overall physical and mental health) are also presented.

- **Five overall satisfaction scores**

- Overall rating of personal doctor or nurse
- Overall rating of specialist
- Overall rating of health care
- Overall rating of counseling or treatment for Behavioral Health (Adult and Senior Only)
- Overall rating of health plan

- **Four composite scores**

- How Well Doctors Communicate
- Courtesy, Respect, and Helpfulness of Office Staff
- Getting Needed Care
- Health Plan Customer Service

Summary of Response Rates

A response rate is only calculated for those members who were eligible and able to respond. According to NCQA protocol, ineligible members include those who are deceased, do not meet the eligible population criteria, have a language barrier, or are either mentally or physically incapacitated. NCQA also considers surveys that have been returned with less than 80% of the questions answered an incomplete survey.

$$\frac{\text{Completed mail and telephone surveys}}{\text{Sample size} - \text{Ineligible surveys}} = \text{Response rate}$$

Program Name	Average Response Rate	Number of Mail Responses	Number of Telephone Responses
Prepaid Medical Assistance Program (Adult)	35.5%	4126	1750
Prepaid Medical Assistance Program (Child)	32.0%	1695	1200
MinnesotaCare (Adult)	38.1%	1730	757
MinnesotaCare (Child)	34.4%	1341	552
Minnesota Senior Health Options (Adult)	44.6%	395	55
MinnesotaCare Limited Benefit Set (Senior)	35.2%	385	48

Part II: Program Comparisons

Introduction

This section of the report shows overall comparisons of the four core population groups:

- Prepaid Medical Assistance Program (PMAP)
- Minnesota Senior Health Options (MSHO)
- MinnesotaCare
- MinnesotaCare Limited Benefit Set

The scores for the Prepaid Medical Assistance Program are presented for the following age groups: < 18, 18-64 and 65+; MinnesotaCare scores are presented for two age groups: < 18 and 18-64. These are calculated by combining the scores for the specific health plans that are included under each program.

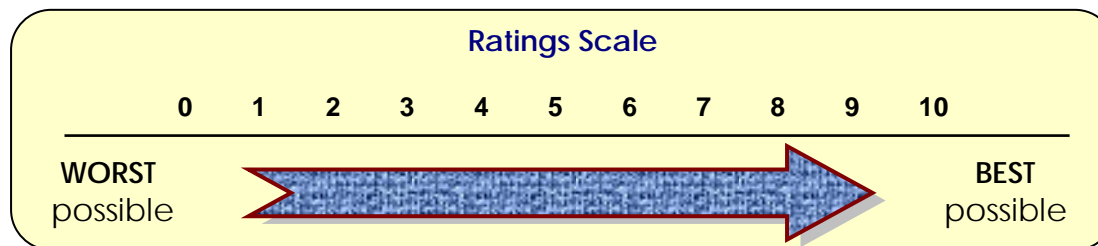
The results are weighted by age group within each plan and by program. The first pages in this section present a sum of the "8," "9" and "10" rating scores that the programs received on the five overall survey questions that asked enrollees to rate their doctor or nurse, specialist, health care, counseling or treatment, and health plan.

The next pages show the percentage of enrollees who responded most positively ("Always" and "Usually") to questions that formed two composite topics: *How well doctors communicate and Courtesy, respect and helpfulness of office staff.*

The last pages of this section show the percentage of enrollees who responded most positively ("Not a Problem") to questions that formed two composite topics: *Getting needed care and Health plan customer service.*

How Programs Compare—Overall Ratings

The survey included questions that asked respondents to rate the health care they received from their health plan and health care providers. These questions asked enrollees to give an overall rating by marking any number on a scale from 0 to 10, where 0 = "WORST possible" and 10 = "BEST possible."



Program Name	PMAP					MSHO	MinnesotaCare	MinnesotaCare	MinnesotaCare Limited Benefit Set
Age Range	< 18	18-64	65+ Total	65+ Greater MN	65+ Metro	65+	< 18	18-64	18-64
Rating of Doctor or Nurse	86.6%	82.8%	86.5%	87.7%	85.8%	83.8%	86.1%	81.5%	78.9%
Rating of Specialist	73.1%	69.0%	81.2%	82.4%	80.7%	83.3%	73.3%	72.3%	71.7%
Rating of Health Care	83.0%	74.0%	84.1%	86.8%	82.3%	85.0%	83.8%	78.3%	68.8%
Rating of Counseling or Treatment		59.8%	67.7%	73.2%	65.8%	56.7%		61.7%	51.2%
Rating of Health Plan	79.6%	72.6%	83.6%	86.8%	81.6%	83.8%	72.2%	72.8%	44.3%

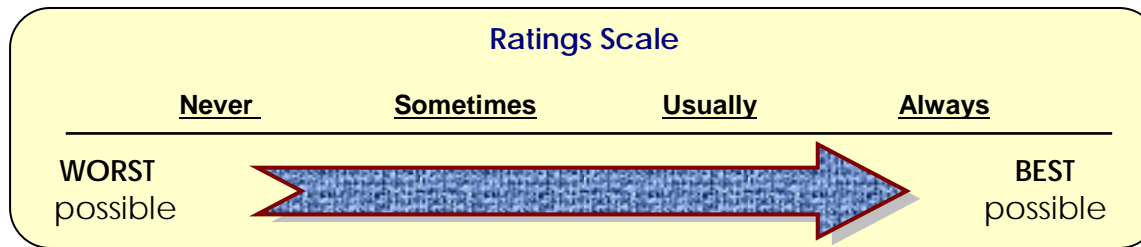
For each program, the number in the table shows the sum of the "8," "9" and "10" ratings given by enrollees who answered these questions.

How Programs Compare - Provider Communication and Service

The survey included a series of questions that asked respondents to rate how often:

- Their doctors communicated well
- Office staff were courteous, respectful, and helpful

These questions asked enrollees to give a rating by marking either: Never, Sometimes, Usually, or Always.



Program Name	PMAP					MSHO	MinnesotaCare	MinnesotaCare	MinnesotaCare Limited Benefit Set
Age Range	< 18	18-64	65+ Total	65+ Greater MN	65+ Metro	65+	< 18	18-64	18-64
How Well Doctors Communicate	90.8%	86.6%	92.3%	93.9%	91.3%	91.2%	93.9%	91.3%	88.5%
Courteous, Respectful, and Helpful Office Staff	91.5%	89.5%	94.6%	95.9%	93.8%	94.0%	94.5%	93.2%	92.1%

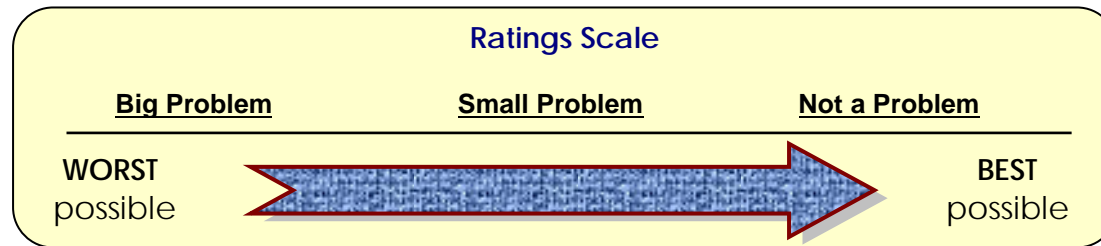
For each program, the numbers in the table show the average percent of people who responded positively (“Always” or “Usually”) to questions that comprise these composites.

How Programs Compare - Health Plan Service and Access to Care

The survey included a series of questions that asked respondents to rate how much of a problem they had with:

- Getting care that is needed
- Health plan customer service

These questions asked enrollees to give a rating by marking either: A Big Problem, A Small Problem, or Not a Problem.



Program Name	PMAP					MSHO	MinnesotaCare	MinnesotaCare	MinnesotaCare Limited Benefit Set
	Age Range	< 18	18-64	65+ Total	65+ Greater MN				
Getting Needed Care	84.3%	78.1%	81.4%	87.3%	78.1%	78.4%	80.6%	81.5%	76.5%
Health Plan Customer Service	76.2%	72.0%	68.0%	71.0%	66.8%	67.9%	68.9%	68.5%	59.6%

For each program, the numbers in the table show the average percent of people who responded positively ("Not a Problem") to questions that comprise these composites.

Part III: Plan-Specific Comparisons — Prepaid Medical Assistance Program (PMAP)

Introduction

This section of the report shows plan-specific comparisons of the managed care health plans participating in the Prepaid Medical Assistance Program (PMAP). The survey results for the health plans are presented for the following age groups: <18, 18-64 and 65+.

The first pages in this section present a sum of the "8," "9" and "10" rating scores that the health plans received on the five survey questions that asked enrollees to rate their doctor or nurse, specialist, health care, counseling or treatment, and health plan.

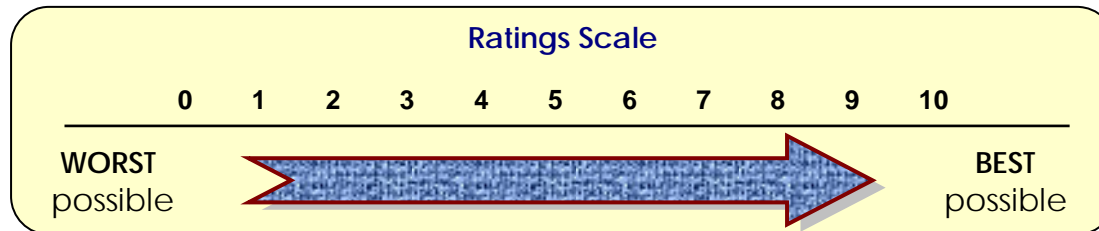
The next pages show the percentage of enrollees who responded most positively ("Always" and "Usually") to questions that formed the two composite topics: *How well doctors communicate* and *Courtesy, respect and helpfulness of office staff*. Then a graphical presentation of response options for each health plan is provided for the two composites.

The last pages of this section show the percentage of enrollees who responded most positively ("No Problem") to questions that formed the two composite topics: *Getting needed care and Health plan customer service*. Following, is a graphical presentation of response options for each health plan.

In this section, the overall PMAP weighted average is made available for reference purposes.

How Health Plans Compare - Overall Ratings

The survey included questions that asked respondents to rate the health care they received from their health plan and health care providers. These questions asked enrollees to give an overall rating by marking any number on a scale from 0 to 10, where 0 = "Worst possible" and 10 = "Best possible."



Rating Question	Rating of doctor or nurse			Rating of specialist			Rating of health care			Rating of counseling or treatment		Rating of health plan		
	< 18	18-64	65+	<18	18-64	65+	< 18	18-64	65+	18-64	65+	< 18	18-64	65+
BluePlus	87.3%	85.9%	87.2%	78.4%	68.3%	81.6%	85.7%	76.1%	85.9%	57.7%	77.1%	79.6%	75.3%	87.7%
First Plan of Minnesota	87.1%	86.7%	93.1%	71.4%	65.0%	87.9%	84.7%	79.0%	95.3%	68.8%	72.7%	79.6%	79.4%	90.6%
HealthPartners	84.6%	73.2%	86.9%	76.4%	69.3%	79.0%	82.2%	74.3%	82.7%	56.1%	70.6%	83.8%	77.8%	79.7%
Itasca Medical Care	89.8%	82.5%	92.7%	66.7%	55.3%	81.0%	87.0%	76.6%	86.8%	80.0%	100.0%	80.2%	72.1%	84.8%
Medica Health Plans	89.2%	83.2%	85.4%	81.0%	72.2%	78.7%	86.5%	73.4%	82.5%	60.0%	64.7%	85.3%	72.1%	83.0%
Metropolitan Health Plan	92.2%	83.8%	89.3%	78.4%	65.6%	77.5%	85.9%	76.3%	79.6%	62.1%	66.7%	86.2%	68.9%	83.9%
PrimeWest Health System	84.4%	84.0%	87.6%	64.3%	71.9%	81.8%	85.4%	76.5%	87.3%	55.3%	66.7%	72.9%	63.9%	82.8%
South Country Health Alliance	88.5%	83.6%	86.4%	78.1%	70.1%	86.5%	85.6%	76.2%	87.1%	72.9%	77.8%	77.7%	73.2%	85.4%
UCare Minnesota	85.5%	82.7%	84.5%	66.7%	64.2%	85.4%	79.4%	71.1%	82.2%	59.6%	58.8%	77.2%	69.1%	80.4%
PMAP Weighted Average	86.6%	82.8%	86.5%	73.1%	69.0%	81.2%	83.0%	74.0%	84.1%	59.8%	67.7%	79.6%	72.6%	83.6%

For each program, the number in the table shows the sum of the "8," "9" and "10" ratings given by enrollees who answered these questions.

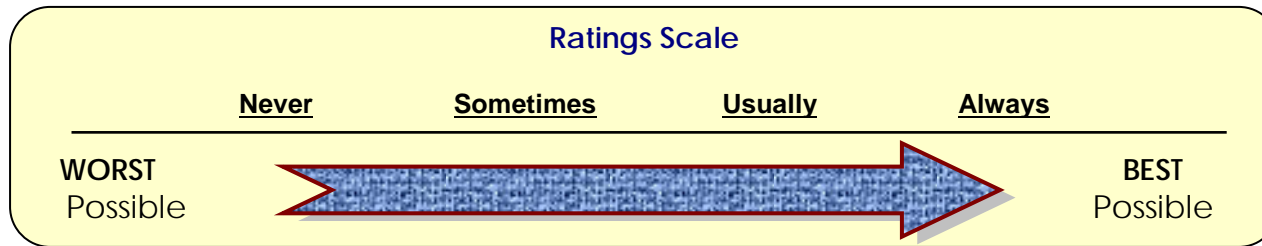
Note: Managed Care results are NOT weighted. Significant comparisons cannot be made between MCO's due to the presence of small valid n's (denominators less than 30) for certain questions within several organizations.

How Health Plans Compare - Provider Communication and Service

The survey included a series of questions that asked respondents to rate how often:

- Their doctors communicated well
- Office staff were courteous, respectful, and helpful

These questions asked enrollees to give a rating by marking either: Never, Sometimes, Usually, or Always.

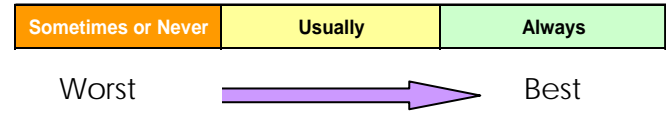


Composite	How Well Doctors Communicate			Courtesy, Respect, and Helpfulness of Office Staff			
	Age Range	<18	18-64	65+	< 18	18-64	65+
BluePlus		93.3%	89.0%	93.7%	92.8%	91.7%	96.5%
First Plan of Minnesota		92.9%	90.1%	96.4%	93.4%	94.4%	96.6%
HealthPartners		89.3%	86.7%	89.9%	90.1%	91.2%	95.8%
Itasca Medical Care		95.4%	90.2%	94.4%	94.7%	92.7%	96.8%
Medica Health Plans		94.2%	84.4%	91.0%	95.5%	88.6%	92.1%
Metropolitan Health Plan		90.0%	86.8%	92.0%	89.6%	84.6%	93.0%
PrimeWest Health System		93.2%	93.0%	94.7%	95.8%	95.5%	96.0%
South Country Health Alliance		92.1%	88.6%	94.2%	95.8%	91.1%	97.4%
UCare Minnesota		88.4%	85.9%	92.2%	89.7%	86.8%	94.0%
PMAP Weighted Average		90.8%	86.8%	92.3%	91.5%	89.5%	94.6%

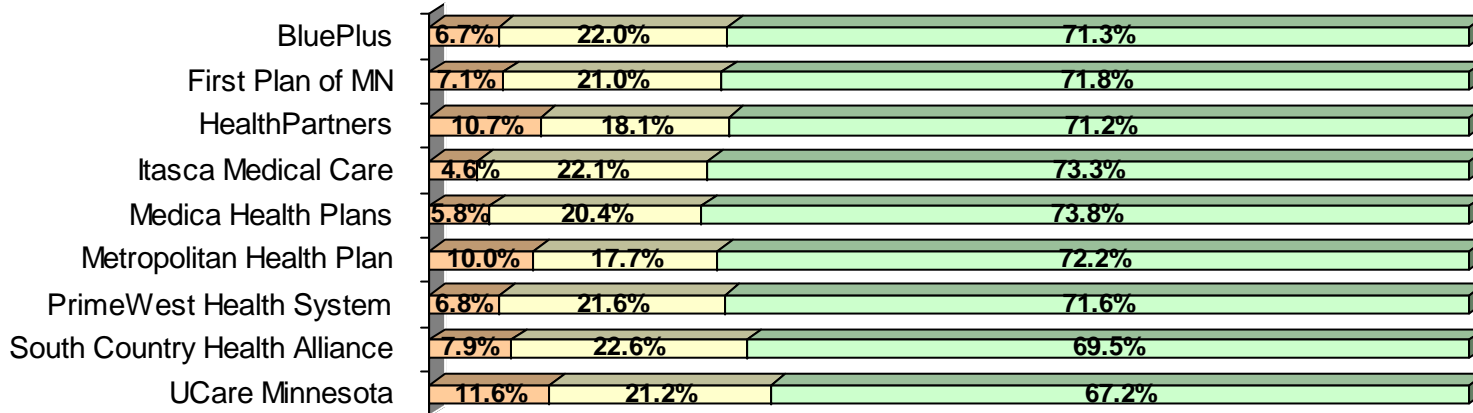
For each program, the numbers in the table show the average percent of people who responded positively (“Always” or “Usually”) to questions that comprise these composites.

Note: Managed Care results are NOT weighted. Significant comparisons cannot be made between MCO’s due to the presence of small valid n’s (denominators less than 30) for certain questions within several organizations.

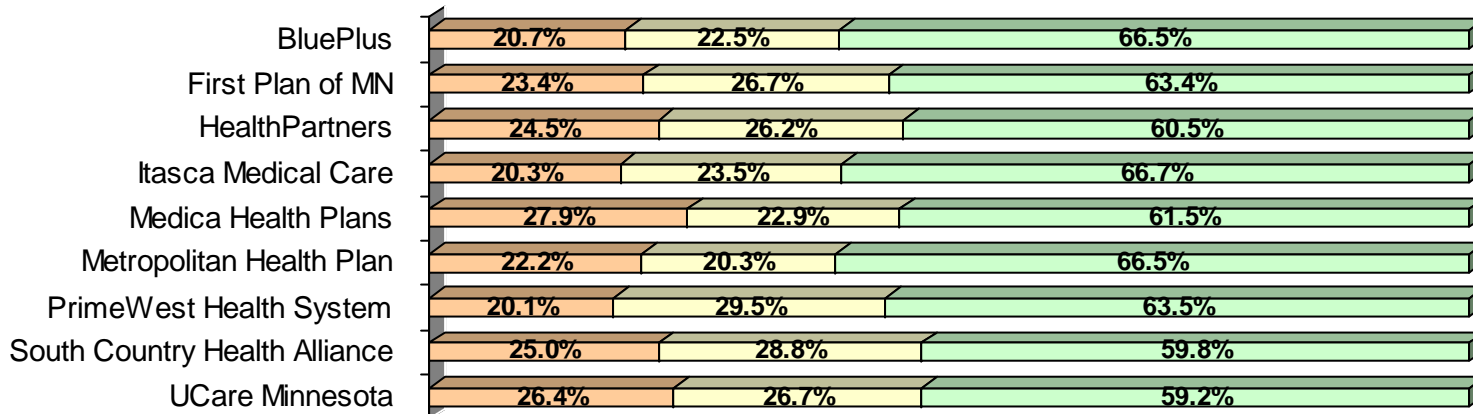
How Well Doctors Communicate



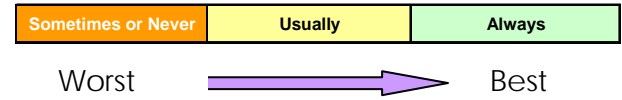
PMAP Younger than 18 (Child)



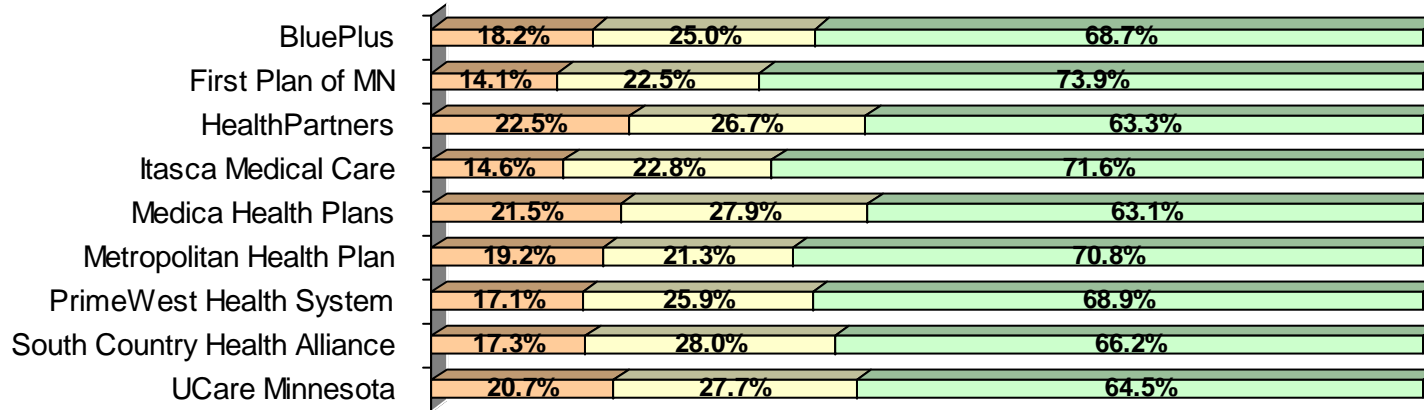
PMAP 18 - 64 (Adult)



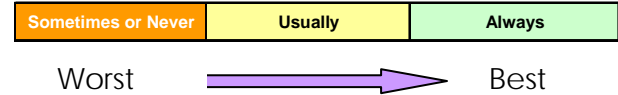
How Well Doctors Communicate



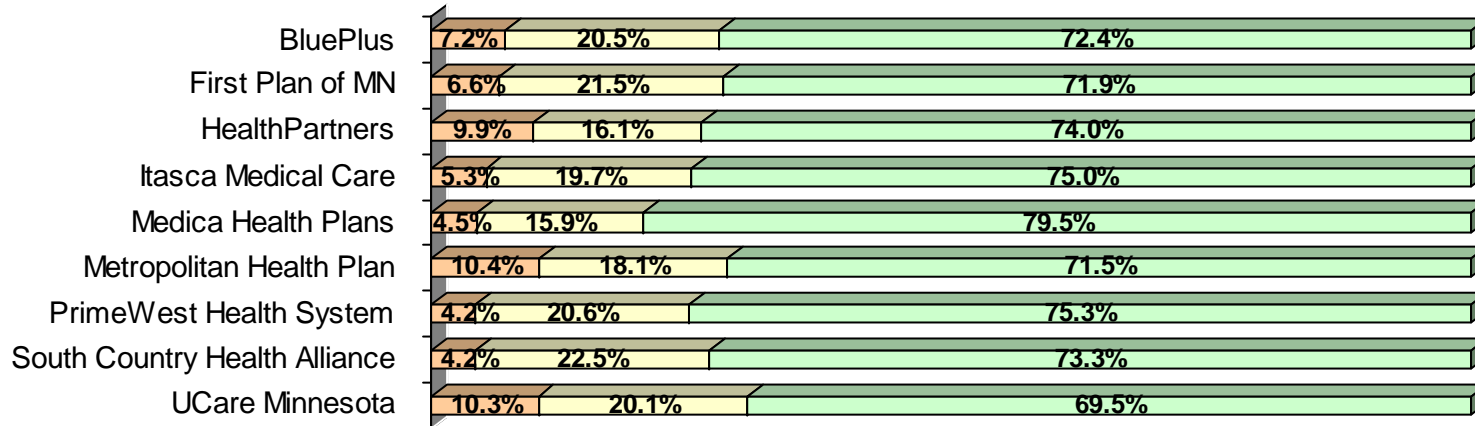
PMAP 65+ (Senior)



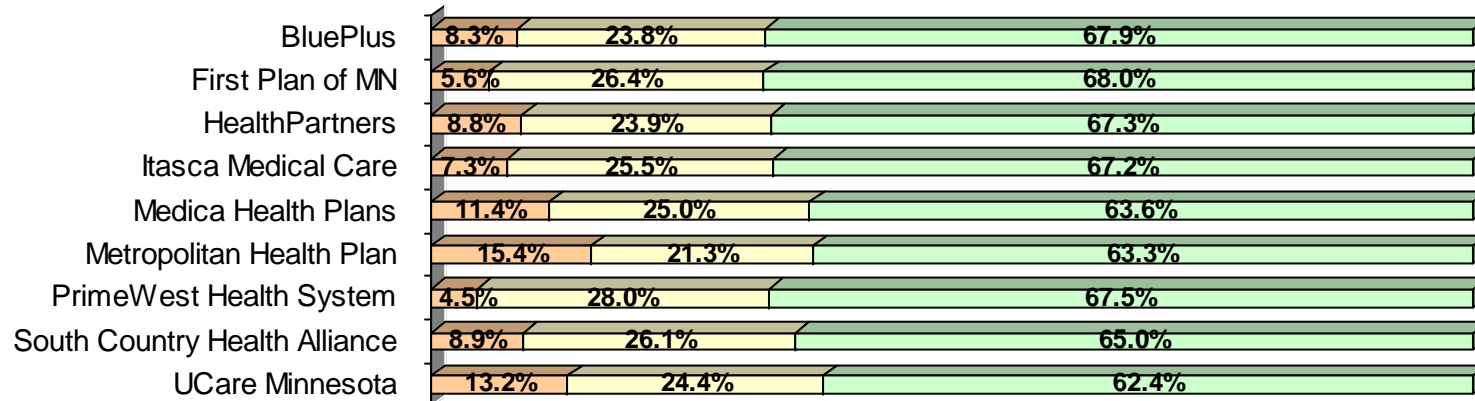
Courtesy, Respect, and Helpfulness of Office Staff



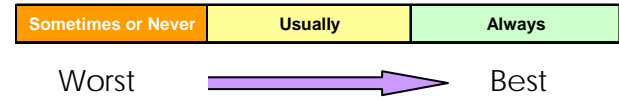
PMAP Younger than 18 (Child)



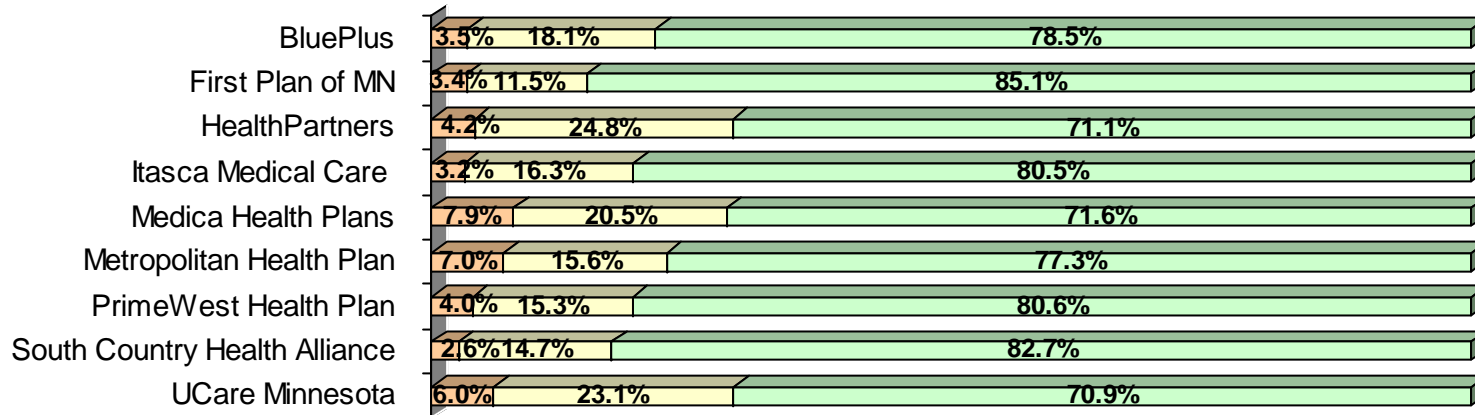
PMAP 18 - 64 (Adult)



Courtesy, Respect, and Helpfulness of Office Staff



PMAP 65+ (Senior)

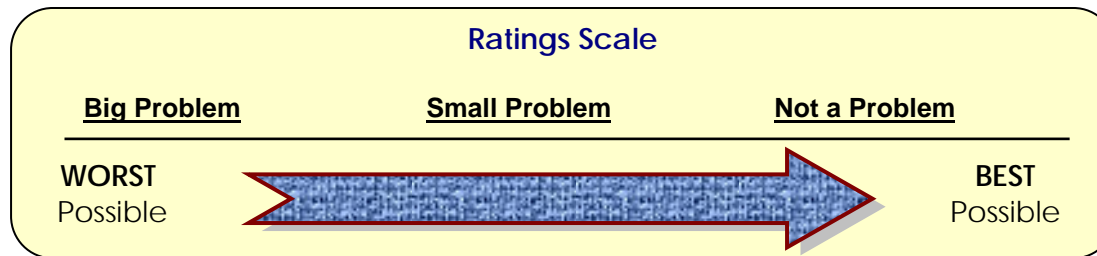


How Health Plans Compare - Access To Care and Health Plan Service

The survey included a series of questions that asked respondents to rate how much of a problem they had with:

- Getting care that is needed
- Health plan customer service

These questions asked enrollees to give a rating by marking either: A Big Problem, A Small Problem, or Not a Problem.




Composite	Getting Needed Care			Health Plan Customer Service			
	Age Range	< 18	18-64	65+	<18	18-64	65+
BluePlus		85.4%	81.1%	84.6%	73.2%	71.1%	66.9%
First Plan of Minnesota		90.9%	85.6%	87.9%	84.1%	81.0%	91.2%
HealthPartners		86.3%	75.9%	79.4%	83.0%	83.5%	66.1%
Itasca Medical Care		81.2%	84.8%	86.6%	74.1%	67.0%	77.7%
Medica Health Plans		84.9%	78.1%	76.5%	79.8%	70.3%	61.7%
Metropolitan Health Plan		78.7%	83.9%	84.3%	63.8%	67.2%	72.0%
PrimeWest Health System		86.5%	79.9%	89.6%	78.0%	61.7%	73.4%
South Country Health Alliance		86.9%	81.2%	87.7%	67.2%	70.8%	80.2%
UCare Minnesota		81.9%	74.0%	81.2%	78.2%	70.2%	72.3%
PMAP Weighted Average		84.3%	78.1%	81.4%	76.2%	72.0%	68.0%

For each program, the numbers in the table show the average percent of people who responded positively ("Not a Problem") to questions that comprise these composites.

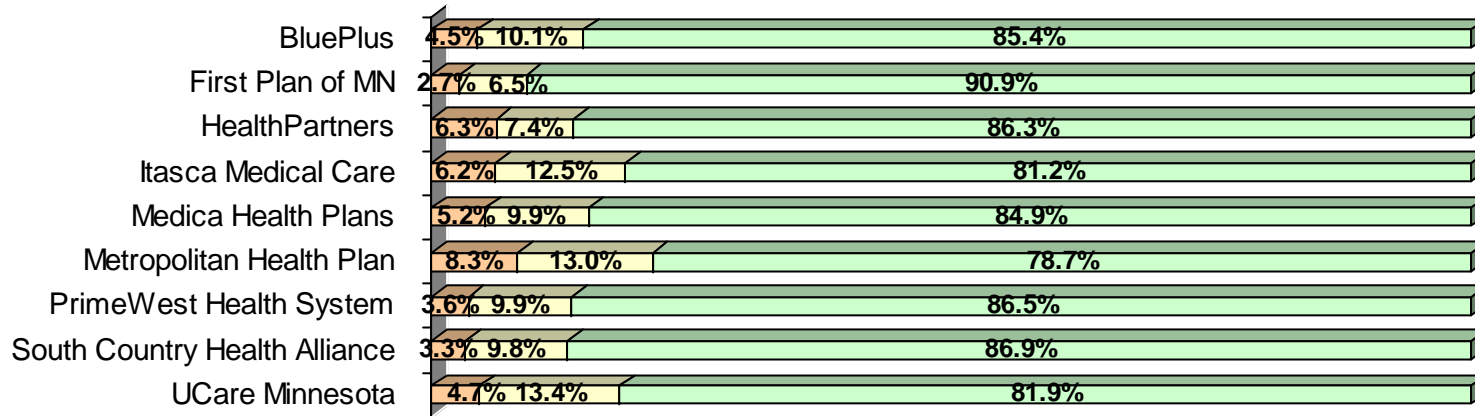
Note: Managed Care results are NOT weighted. Significant comparisons cannot be made between MCO's due to the presence of small valid n's (denominators less than 30) for certain questions within several organizations.

Getting Needed Care

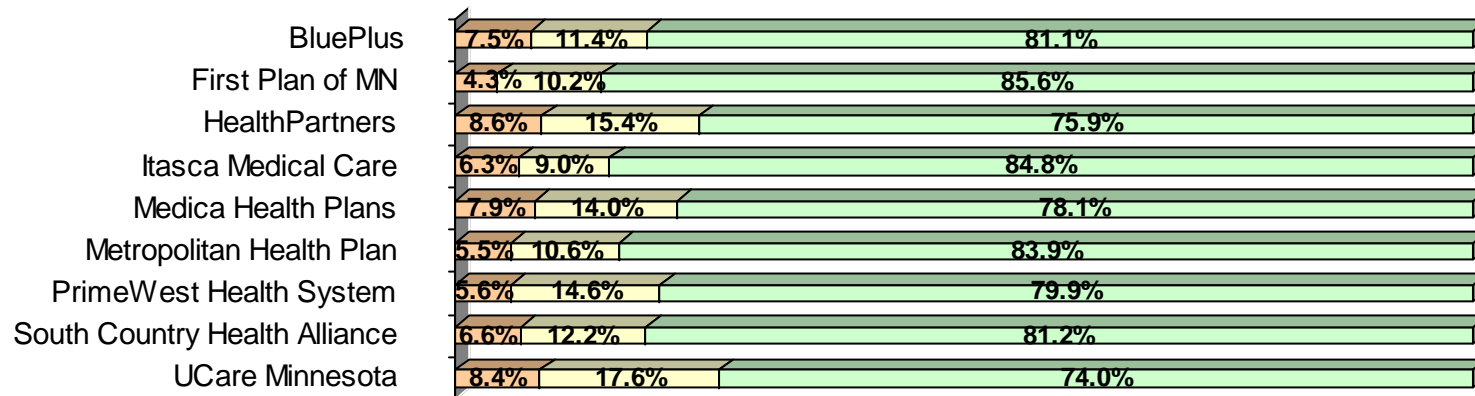
A Big Problem A Small Problem Not a Problem

Worst  Best

PMAP Younger than 18 (Child)



PMAP 18 - 64 (Adult)

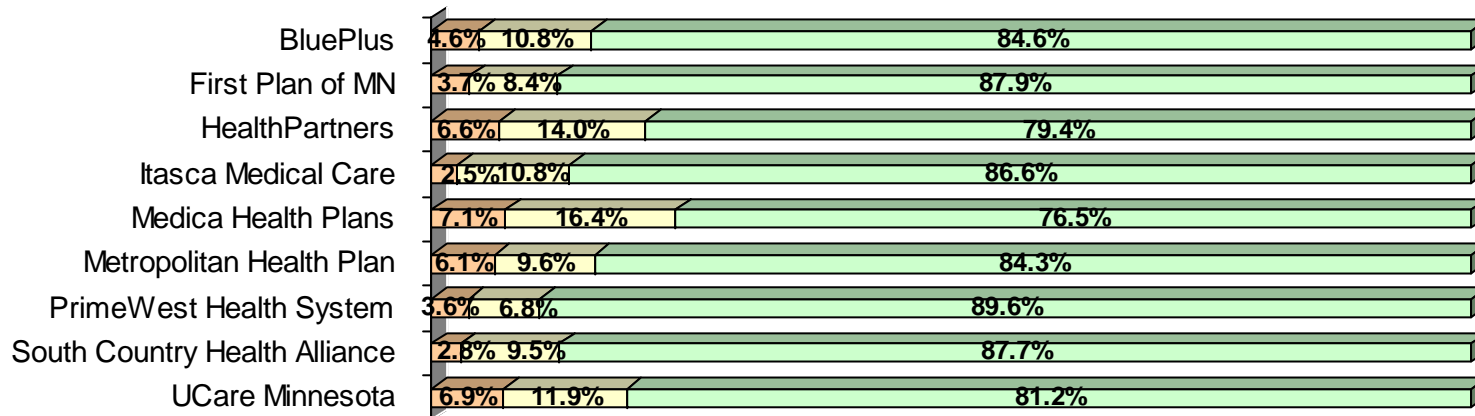


Getting Needed Care

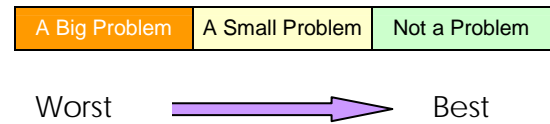
A Big Problem A Small Problem Not a Problem

Worst  Best

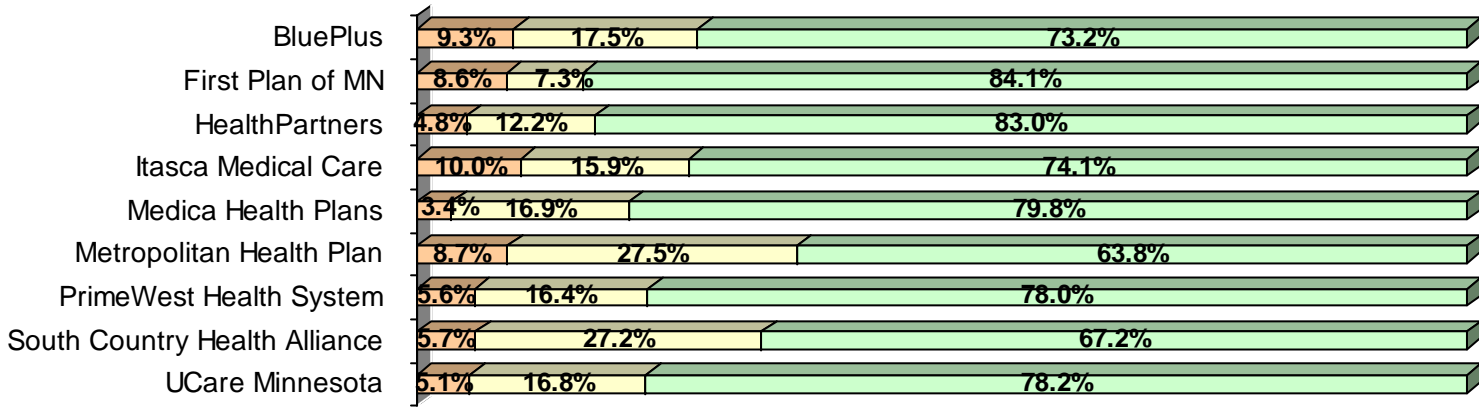
PMAP 65+ (Senior)



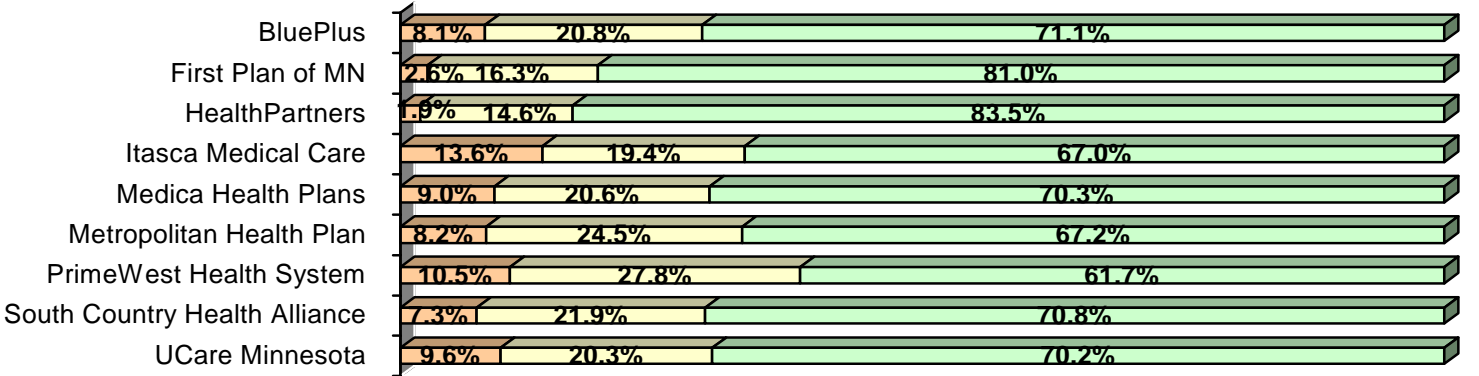
Health Plan Customer Service



PMAP Younger than 18



PMAP 18 - 64

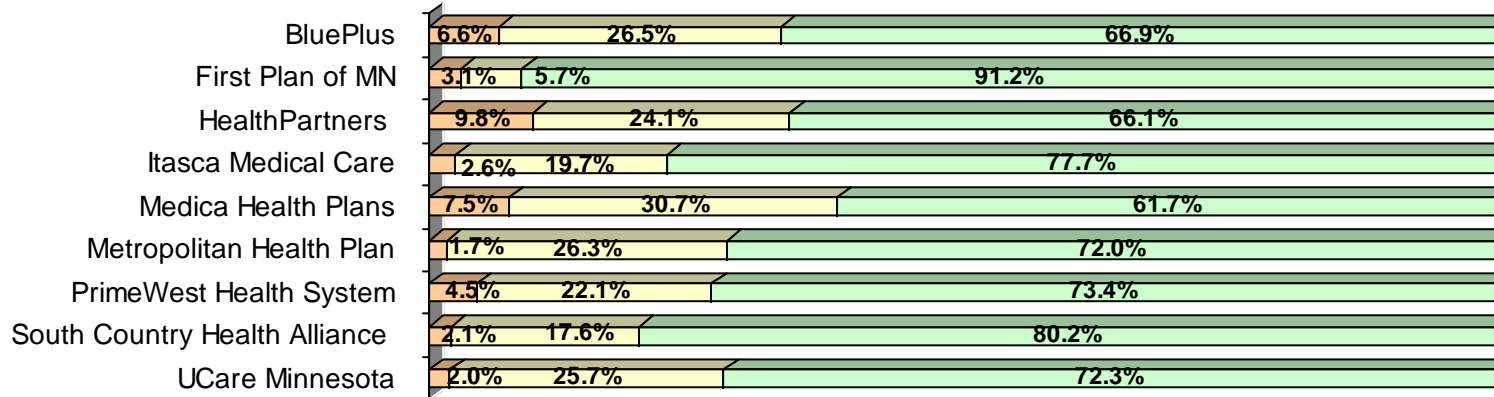


Health Plan Customer Service

A Big Problem A Small Problem Not a Problem

Worst  Best

PMAP 65+



Part IV: Program-Specific Results — MSHO

Introduction

This section of the report shows the survey results of the respondents participating in the Minnesota Senior Health Options program.

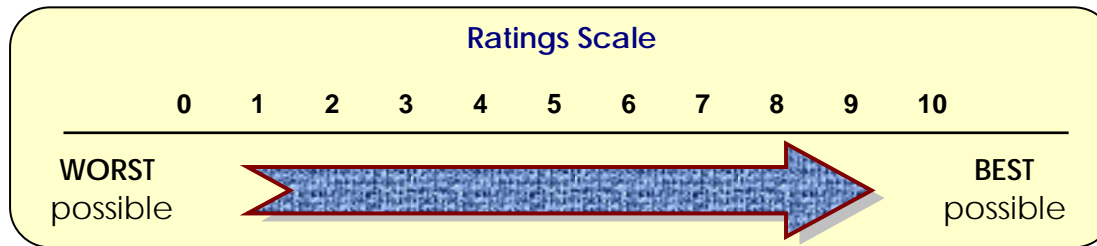
The first pages in this section present a sum of the “8,” “9” and “10” rating scores that the program received on the five survey questions that asked enrollees to rate their doctor or nurse, specialist, health care, counseling or treatment, and health plan.

The next pages show the percentage of enrollees who responded most positively (“Always” and “Usually”) to questions that formed the two composite topics: *How well doctors communicate* and *Courtesy, respect and helpfulness of office staff*. Then a graphical presentation of response options is provided for the two composites.

The last pages of this section show the percentage of enrollees who responded most positively (“Not a Problem”) to questions that formed the two composite topics: *Getting needed care* and *Health plan customer service*. Finally, a chart of response options is provided for the two composites.

Overall Ratings -

The survey included questions that asked respondents to rate the health care they received from their health plan and health care providers. These questions asked enrollees to give an overall rating by marking any number on a scale from 0 to 10, where 0 = "Worst possible" and 10 = "Best possible".



Rating Question	Rating of doctor or nurse	Rating of specialist	Rating of health care	Rating of counseling or treatment	Rating of health plan
Age Range	65+	65+	65+	65+	65+
MSHO	83.8%	83.3%	85.0%	56.7%	83.8%

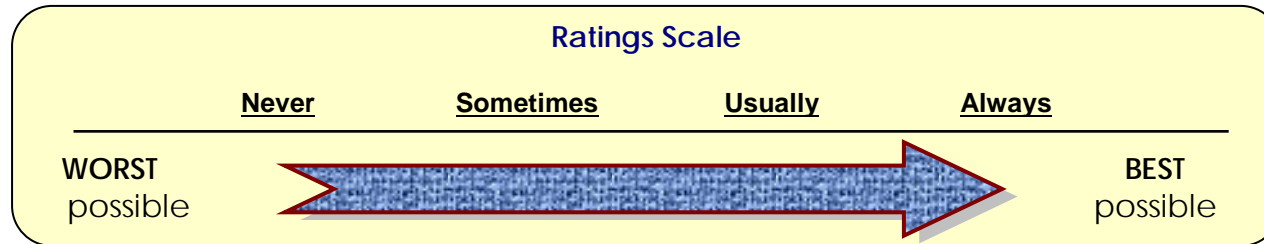
For each program, the number in the table shows the sum of the "8," "9" and "10" ratings given by enrollees who answered these questions.

Provider Communication and Service -

The survey included a series of questions that asked respondents to rate how often:

- Their doctors communicated well
- Office staff were courteous, respectful, and helpful

These questions asked enrollees to give a rating by marking either: Never, Sometimes, Usually, or Always.



Composite	How Well Doctors Communicate	Courtesy, Respect, and Helpfulness of Office Staff
Age Range	65+	65+
MSHO	91.2%	94.0%

For this program, the numbers in the above table show the average percent of people who responded positively (“Always” or “Usually”) to questions that comprise these composites.

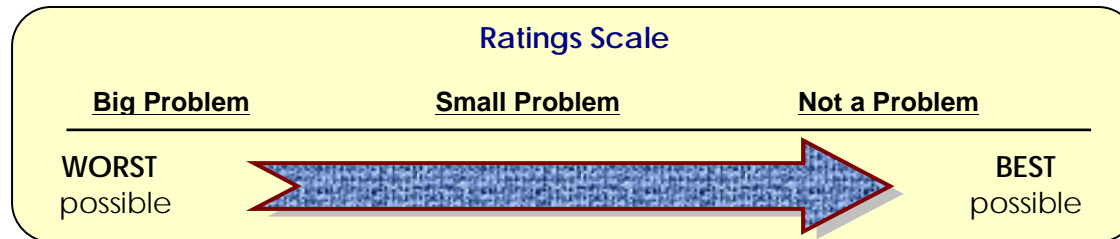
Composite Response Option Breakouts	Never or Sometimes	Usually	Always
How Well Doctors Communicate	22.6%	31.0%	60.2%
Courtesy, Respect, and Helpfulness of Office Staff	6.0%	24.5%	69.4%

Access to Care and Health Plan Service -

The survey included a series of questions that asked respondents to rate how much of a problem they had with:

- Getting care that is needed
- Health plan customer service

These questions asked enrollees to give a rating by marking either: A Big Problem, A Small Problem, or Not a Problem.



Composite	Getting Needed Care	Health Plan Customer Service
Age Range	65+	65+
MSHO	78.4%	67.9%

For this program, the numbers in the above table show the average percent of people who responded positively (“Not a Problem”) to questions that comprise these composites.

Composite Response Option Breakouts	A Big Problem	A Small Problem	Not A Problem
Getting Needed Care	6.9%	14.6%	78.4%
Customer Service	6.0%	26.1%	67.9%

Part V: **Plan-Specific Comparisons —** **MinnesotaCare**

Introduction

This section of the report shows plan-specific comparisons of the managed care health plans participating in the MinnesotaCare program. The survey results for the health plans are presented for the following age groups: <18 and 18-64.

The first pages in this section present a sum of the “8,” “9” and “10” rating scores that the health plans received on the five survey questions that asked enrollees to rate their doctor or nurse, specialist, health care, counseling or treatment, and health plan.

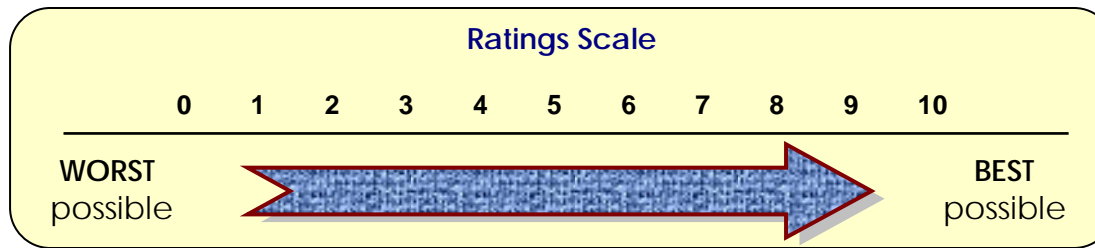
The next pages show the percentage of enrollees who responded most positively (“Always” and “Usually”) to questions that formed the two composite topics: *How well doctors communicate* and *Courtesy, respect and helpfulness of office staff*. Then a graphical presentation of response options for each health plan is provided for the two composites.

The last pages of this section show the percentage of enrollees who responded most positively (“Not a Problem”) to questions that formed the two composite topics: *Getting needed care and Health plan customer service*. Finally, a graphical presentation of response options for each health plan is provided for the two composites.

In this section, the overall MinnesotaCare weighted average is made available for reference purposes.

How Health Plans Compare - Overall Ratings

The survey included questions that asked respondents to rate the health care they received from their health plan and health care providers. These questions asked enrollees to give an overall rating by marking any number on a scale from 0 to 10, where 0 = "Worst possible" and 10 = "Best possible."



Rating Question	Rating of doctor or nurse		Rating of specialist		Rating of health care		Rating of counseling or treatment	Rating of health plan	
	< 18	18-64	< 18	18-64	< 18	18-64		< 18	18-64
Age Range									
BluePlus	84.6%	81.5%	69.7%	75.2%	81.6%	80.7%	69.1%	60.5%	72.6%
First Plan of Minnesota	87.8%	83.0%	71.4%	79.4%	84.6%	83.2%	62.9%	82.1%	77.2%
HealthPartners	88.8%	83.3%	71.2%	73.5%	83.9%	75.6%	48.3%	82.0%	71.9%
Itasca Medical Care		81.8%		68.6%		73.1%	68.8%		69.3%
Medica Health Plans	86.6%	80.3%	82.2%	61.5%	85.8%	77.3%	56.1%	84.1%	74.7%
Metropolitan Health Plan		84.8%		73.8%		78.2%	72.2%		71.4%
UCare Minnesota	87.2%	81.7%	71.1%	77.0%	86.2%	74.8%	62.3%	80.7%	71.0%
MinnesotaCare									
Weighted Average	86.1%	81.5%	73.3%	72.3%	83.8%	78.3%	61.7%	72.2%	72.8%

For each program, the number in the table shows the sum of the "8," "9" and "10" ratings given by enrollees who answered these questions.

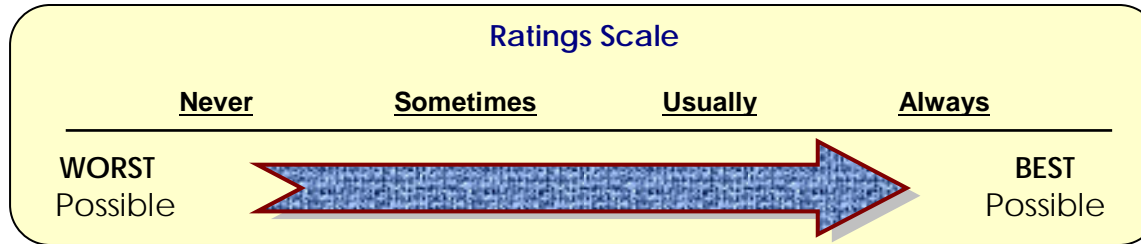
Note: Managed Care results are NOT weighted. Significant comparisons cannot be made between MCO's due to the presence of small valid n's (denominators less than 30) for certain questions within several organizations.

How Health Plans Compare - Provider Communication and Service

The survey included a series of questions that asked respondents to rate how often:

- Their doctors communicated well
- Office staff were courteous, respectful, and helpful

These questions asked enrollees to give a rating by marking either: Never, Sometimes, Usually, or Always.

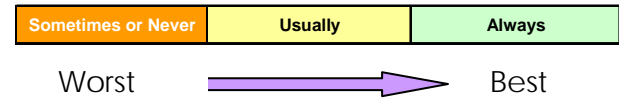


Composite	How Well Doctors Communicate		Courtesy, Respect, and Helpfulness of Office Staff		
	Age Range	< 18	18-64	< 18	18-64
BluePlus		94.9%	93.0%	95.9%	95.0%
First Plan of Minnesota		93.9%	92.5%	93.2%	96.4%
HealthPartners		90.1%	89.0%	90.5%	92.3%
Itasca Medical Care			90.4%		94.6%
Medica Health Plans		93.9%	90.8%	94.0%	92.4%
Metropolitan Health Plan			88.9%		91.3%
UCare Minnesota		94.1%	89.1%	94.7%	89.8%
MinnesotaCare Weighted Average		93.9%	91.3%	94.5%	93.2%

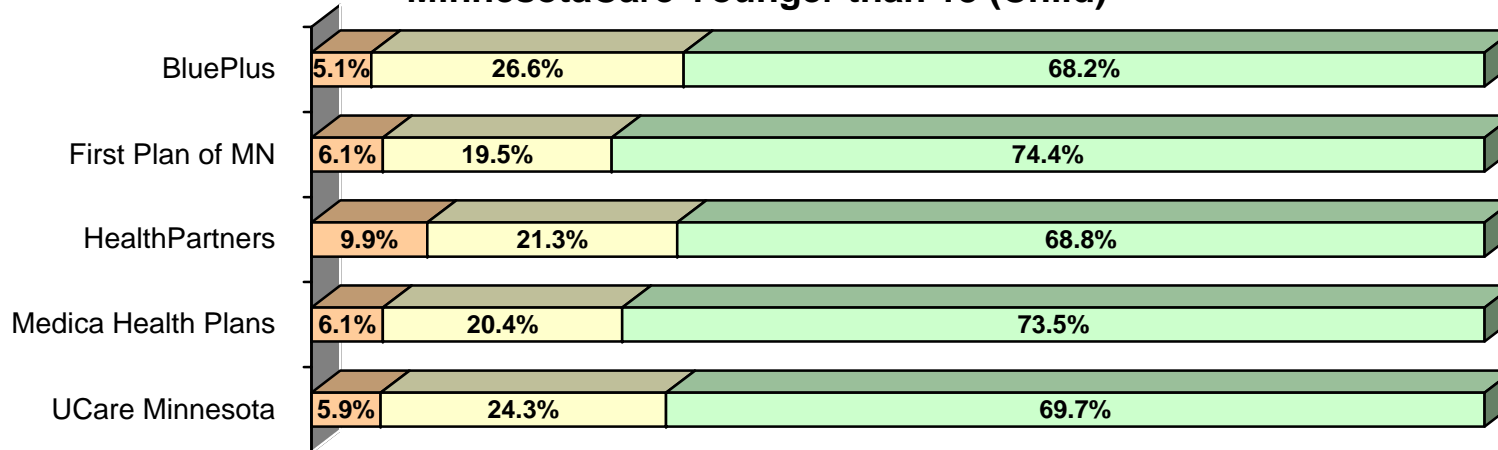
For each program, the numbers in the table show the average percent of people who responded positively (“Always” or “Usually”) to questions that comprise these composites.

Note: Managed Care results are NOT weighted. Significant comparisons cannot be made between MCO’s due to the presence of small valid n’s (denominators less than 30) for certain questions within several organizations.

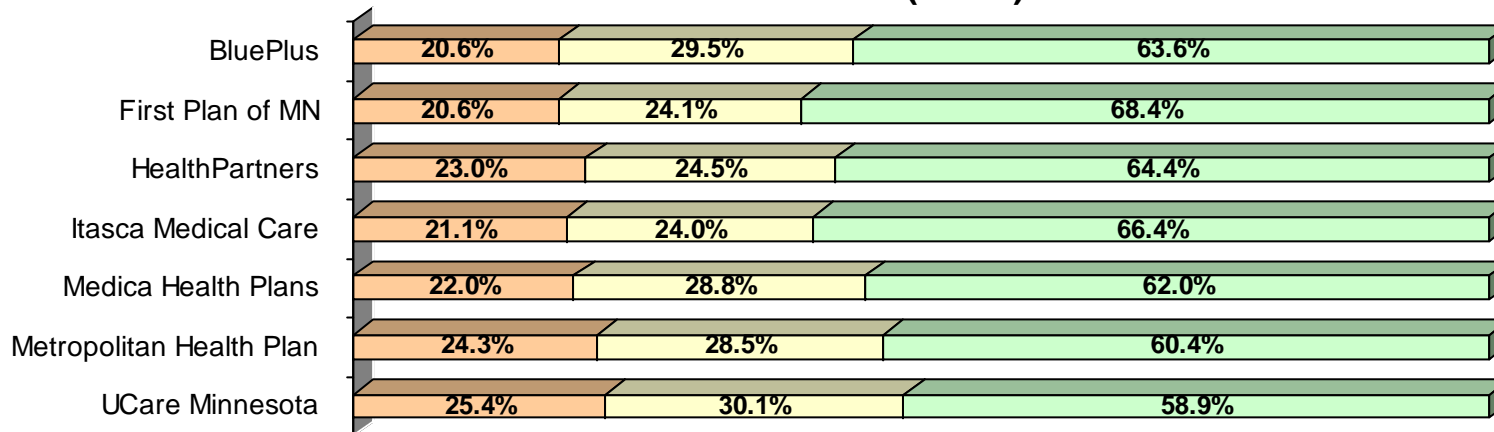
How Well Doctors Communicate



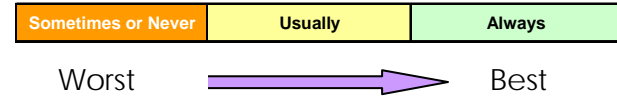
MinnesotaCare Younger than 18 (Child)



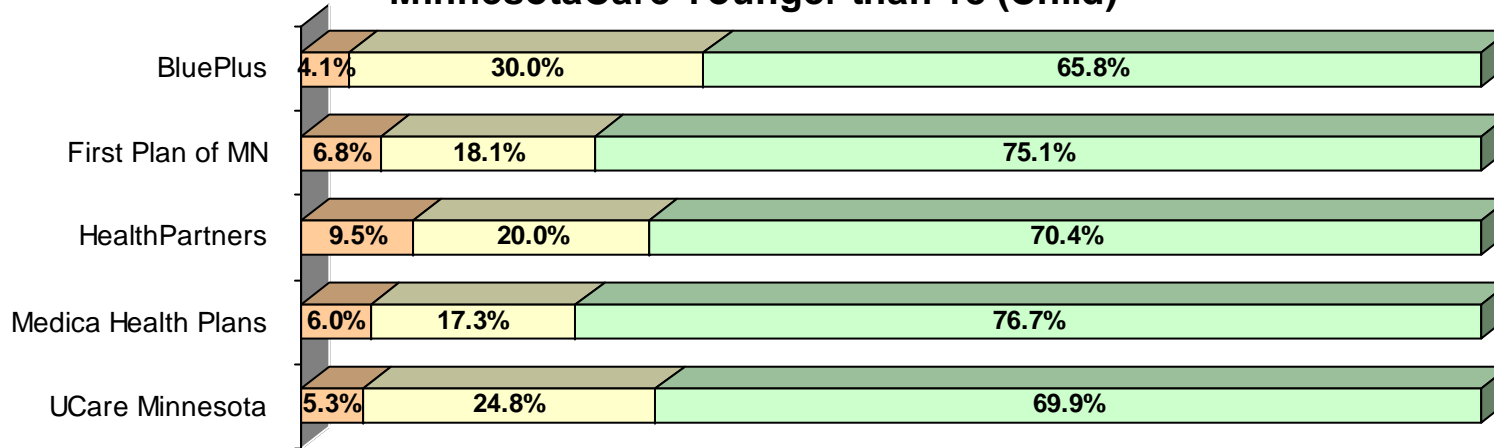
MinnesotaCare 18 - 64 (Adult)



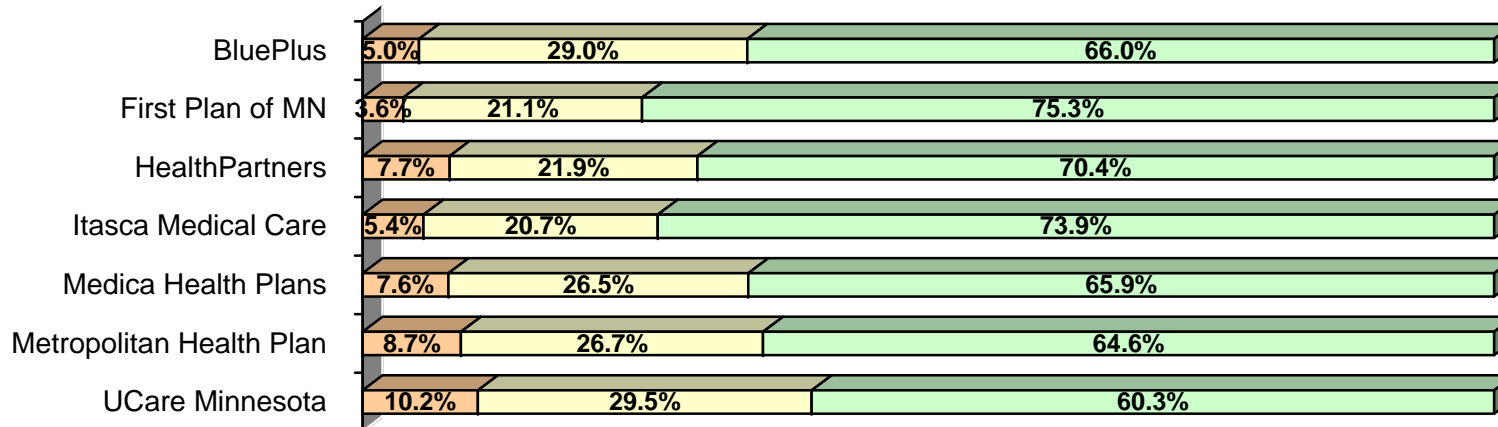
Courtesy, Respect, and Helpfulness of Office Staff



MinnesotaCare Younger than 18 (Child)



MinnesotaCare 18 - 64 (Adult)

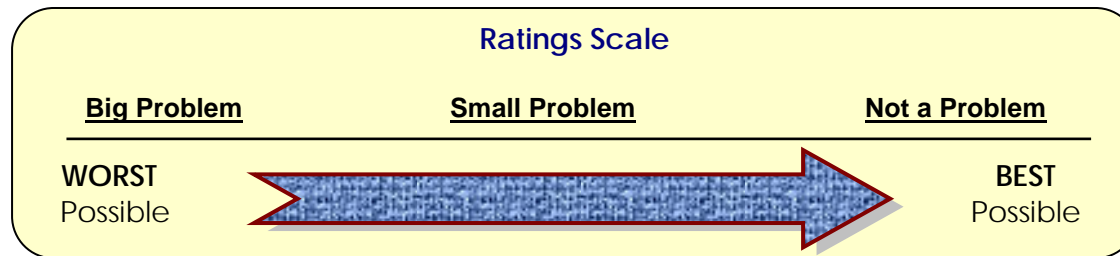


How Health Plans Compare - Access to Care and Health Plan Service

The survey included a series of questions that asked respondents to rate how much of a problem they had with:

- Getting care that is needed
- Health plan customer service

These questions asked enrollees to give a rating by marking either: A Big Problem, A Small Problem, or Not a Problem.



Composite	Getting Needed Care		Health Plan Customer Service	
	< 18	18-64	< 18	18-64
BluePlus	77.1%	82.2%	67.4%	66.8%
First Plan of Minnesota	85.4%	86.6%	84.0%	74.3%
HealthPartners	83.7%	76.9%	69.7%	74.5%
Itasca Medical Care		83.9%		63.0%
Medica Health Plans	89.1%	81.6%	74.3%	69.6%
Metropolitan Health Plan		84.0%		64.7%
UCare Minnesota	79.8%	81.9%	64.6%	67.3%
MinnesotaCare				
Weighted Average	80.6%	81.5%	68.9%	68.5%

For each program, the numbers in the table show the average percent of people who responded positively (“Not a Problem”) to questions that comprise these composites.

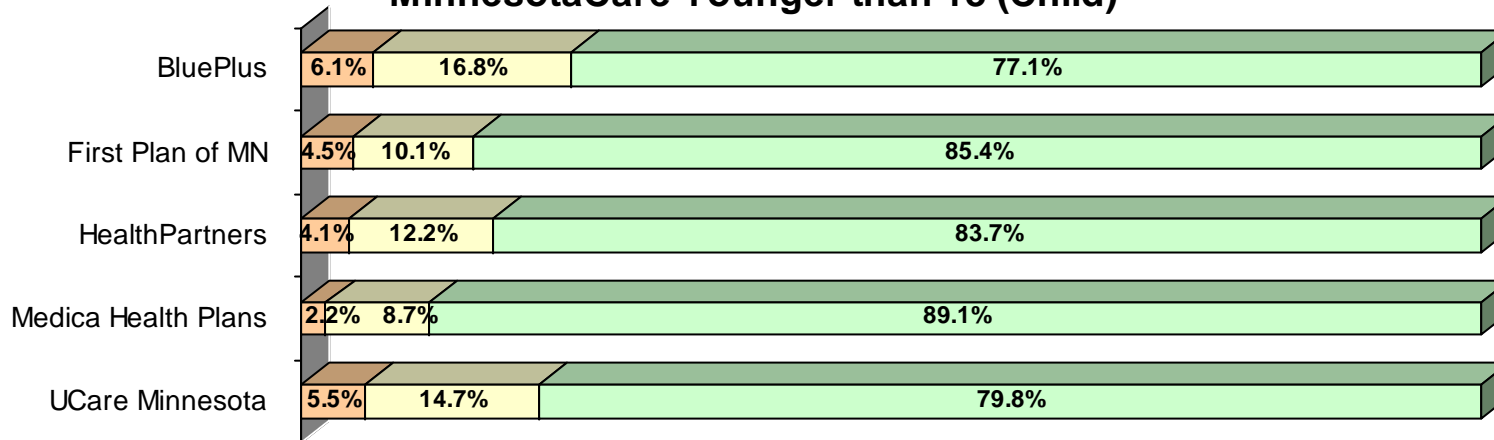
Note: Managed Care results are NOT weighted. Significant comparisons cannot be made between MCO’s due to the presence of small valid n’s (denominators less than 30) for certain questions within several organizations.

Getting Needed Care

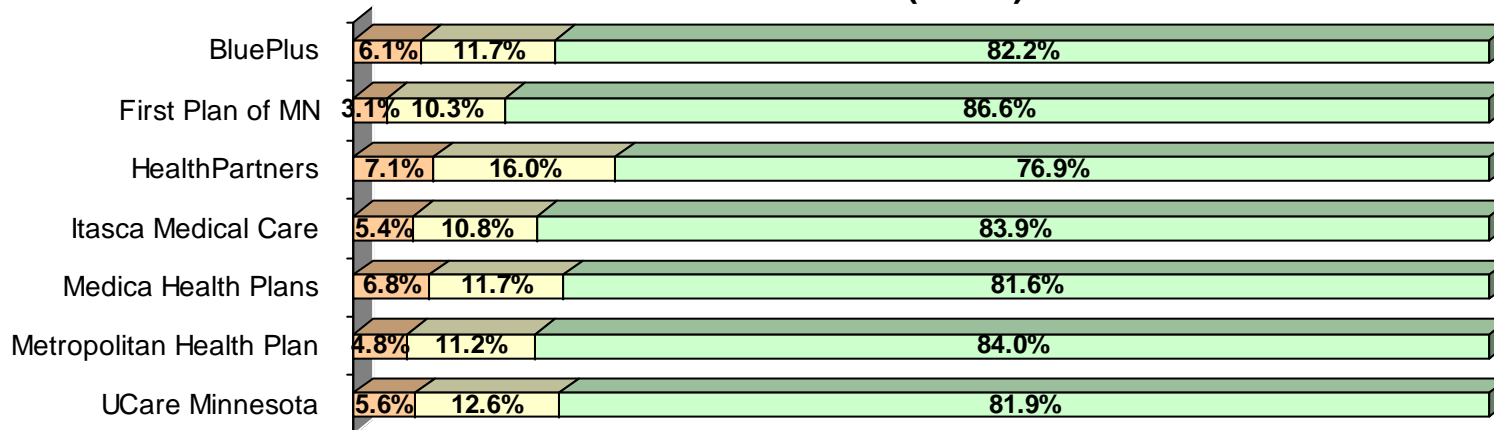
A Big Problem A Small Problem Not a Problem

Worst  Best

MinnesotaCare Younger than 18 (Child)



MinnesotaCare 18 - 64 (Adult)

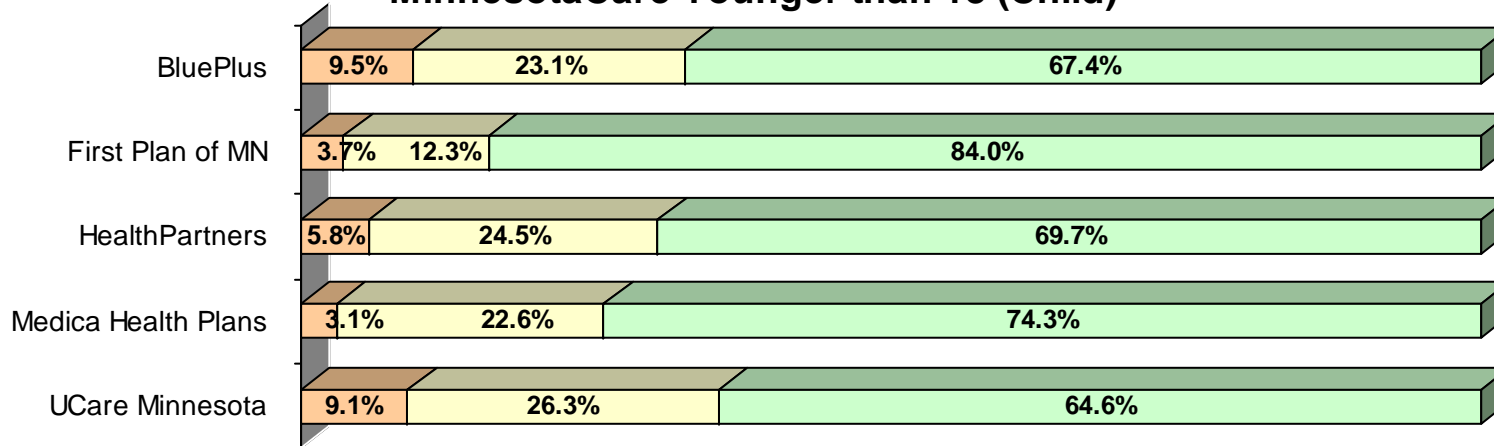


Health Plan Customer Service

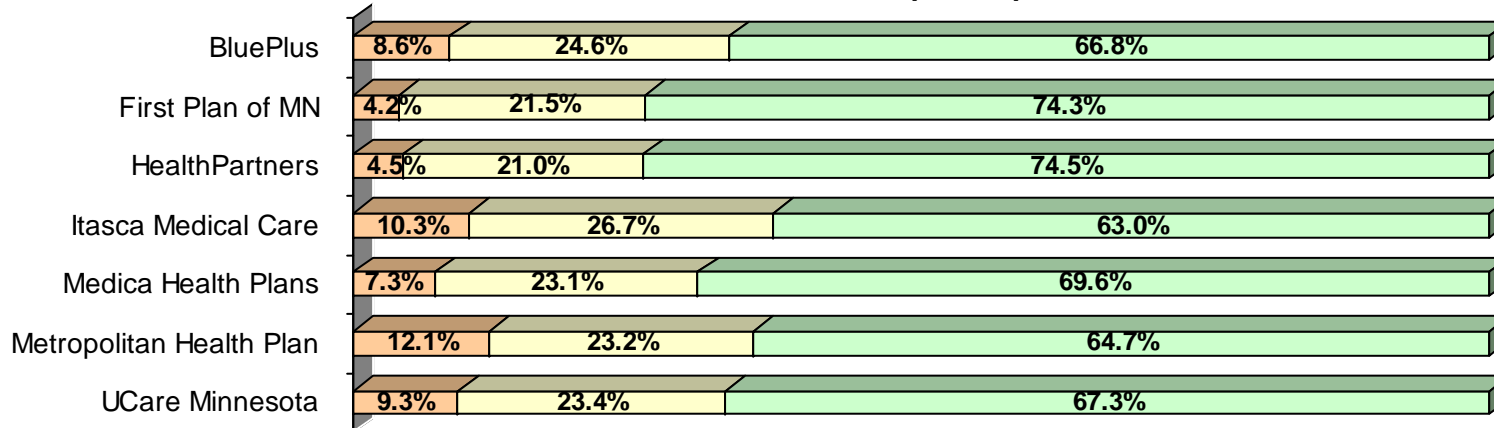
A Big Problem A Small Problem Not a Problem

Worst  Best

MinnesotaCare Younger than 18 (Child)



MinnesotaCare 18 - 64 (Adult)



Part VI: Program-Specific Results — MinnesotaCare Limited Benefit Set

Introduction

This section of the report shows the survey results of the respondents participating in the MinnesotaCare Limited Benefit Set program.

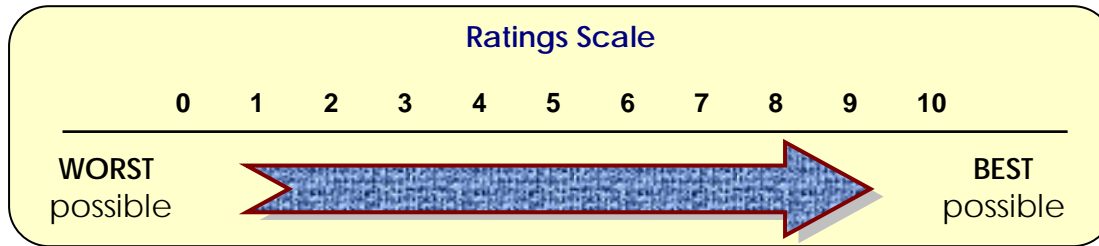
The first pages in this section present a sum of the “8,” “9” and “10” rating scores that the program received on the five survey questions that asked enrollees to rate their doctor or nurse, specialist, health care, counseling or treatment, and health plan.

The next pages show the percentage of enrollees who responded most positively (“Always” and “Usually”) to questions that formed the two composite topics: *How well doctors communicate* and *Courtesy, respect and helpfulness of office staff*. Then a chart of response option breakouts is provided for the two composites.

The last pages of this section show the percentage of enrollees who responded most positively (“Not a Problem”) to questions that formed the two composite topics: *Getting needed care and Health plan customer service*. Finally a chart of response option breakouts for is provided for the two composites.

Overall Ratings -

The survey had questions that asked respondents to rate the health care they received from their health plan and health care providers. These questions asked enrollees to give an overall rating by marking any number on a scale from 0 to 10, where 0 = "Worst possible" and 10 = "Best possible".



Rating Question	Rating of doctor or nurse	Rating of specialist	Rating of health care	Rating of counseling or treatment	Rating of health plan
Age Range	18-64	18-64	18-64	18-64	18-64
MinnesotaCare Limited Benefit Set	78.9%	71.7%	68.8%	51.2%	44.3%

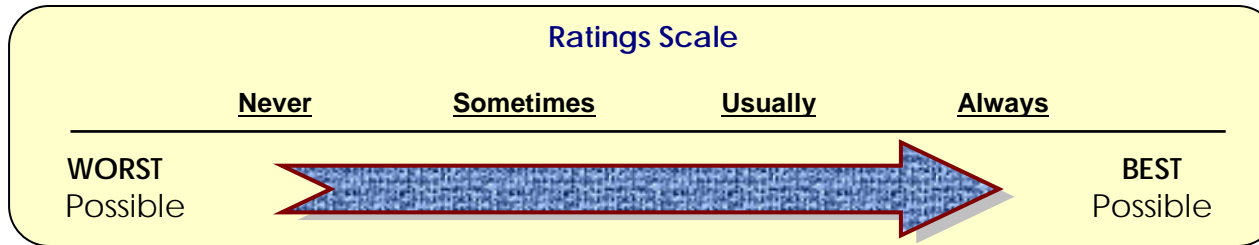
For each program, the numbers in the table show the average percent of people who responded positively ("Always" or "Usually") to questions that comprise these composites.

Provider Communication and Service -

The survey included a series of questions that asked respondents to rate how often:

- Their doctors communicated well
- Office staff were courteous, respectful, and helpful

These questions asked enrollees to give a rating by marking either: Never, Sometimes, Usually, or Always.



Composite	How Well Doctors Communicate	Courtesy, Respect, and Helpfulness of Office Staff
Age Range	18-64	18-64
MinnesotaCare Limited Benefit Set	88.5%	92.1%

For this program, the numbers in the above table show the average percent of people who responded positively (“Always” or “Usually”) to questions that comprise these composites.

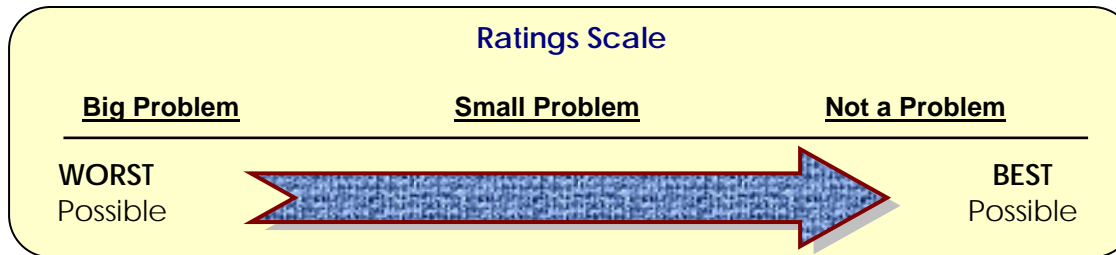
Composite Response Option Breakouts	Never or Sometimes	Usually	Always
How Well Doctors Communicate	27.7%	32.3%	56.2%
Courtesy, Respect, and Helpfulness of Office Staff	7.9%	31.0%	61.1%

Access to Care and Health Plan Service -

The survey included a series of questions that asked respondents to rate how much of a problem they had with:

- Getting care that is needed
- Health plan customer service

These questions asked enrollees to give a rating by marking either: A Big Problem, A Small Problem, or Not a Problem.



Composite	Getting Needed Care		Health Plan Customer Service
Age Range	18-64		18-64
MinnesotaCare Limited Benefit Set	76.5%		59.6%

For this program, the numbers in the table show the average percent of people who responded positively (“Not a Problem”) to questions that comprise these composites.

Composite Response Option Breakouts	A Big Problem	A Small Problem	Not A Problem
Getting Needed Care	9.3%	14.2%	76.5%
Customer Service	11.9%	28.4%	59.6%

Part VII: Custom Question Results — Program Comparisons

Custom questions, those topics chosen by DHS to facilitate further investigation, were added to the core survey tools and include the following subjects:

- Internet access, usage, and willingness to perform future on-line surveys (Adult, Senior and Child)
- Flu or pneumonia vaccinations received (Senior Only)
- Coordination of health care needs (Senior Only)

The Summary Rates shown represent the percentage of respondents who answered in a positive way.

Custom Questions - Use of Internet

Program Name	PMAP					MSHO	MinnesotaCare	MinnesotaCare	MinnesotaCare Limited Benefit Set
	< 18	18-64	65+ Total	65+ Greater MN	65+ Metro	65+	< 18	18-64	18-64
A computer in the household	57.9%	54.1%	23.2%	17.9%	26.5%	27.2%	79.9%	70.0%	55.1%
Use the computer at home	82.3%	82.6%	42.7%	45.8%	41.3%	38.1%	86.3%	84.4%	84.5%
Use Internet at home	77.1%	75.7%	39.0%	37.6%	39.6%	29.2%	82.6%	80.6%	82.4%
Would complete a survey like this on the Internet	40.2%	41.0%	11.1%	9.1%	12.4%	11.0%	43.7%	38.6%	32.9%
Would complete a survey like this if easy access to Internet	52.8%	53.2%	16.7%	13.8%	18.5%	20.0%	45.2%	47.7%	43.4%

Custom Questions - Vaccinations and Care Coordination

Program Name	PMAP			MSHO
	65+ Total	65+ Greater MN	65+ Metro	65+
Received a flu shot from September 2004 to February 2005	70.5%	70.9%	70.2%	70.2%
Received the flu shot through health plan or doctor	93.8%	92.5%	94.5%	94.2%
Received a pneumonia vaccination once in lifetime	68.6%	72.3%	66.4%	75.6%
Care coordinator formally assigned to coordinate medical and social health care needs	13.7%	12.4%	14.4%	44.7%
Overall satisfaction with the person who coordinated care	96.2%	96.5%	96.0%	97.3%

Optional Questions – Behavioral Health Counseling or Treatment

In addition, optional behavioral health questions were added to the adult and senior survey tools regarding the following subjects:

- Access and ease of receiving counseling or treatment (Adult and Senior Only)

Program Name	PMAP				MSHO	MinnesotaCare	MinnesotaCare Limited Benefit Set
	18-64	65+ Total	65+ Greater MN	65+ Metro	65+	18-64	18-64
Needed treatment or counseling for a personal or family problem	20.9%	8.3%	5.2%	10.3%	10.1%	15.4%	12.4%
Not a problem to get the treatment or counseling needed	66.1%	52.9%	73.4%	45.7%	51.3%	69.5%	54.3%

Part VIII: Key Driver Analysis — Adult, Child, and Senior

Introduction

Some composites will impact the rating of health plan satisfaction among the health plan members more than others, and are considered Key Drivers. Key Drivers are those health plan service areas (composites) that are positively tied to the overall rating of the health plan. A separate regression analysis was performed using the aggregate adult MCO data and the aggregate child MCO data. This analysis measures the relationship between each composite area and overall health plan rating. It is used to determine which areas of service have the greatest effect on members' overall satisfaction, thereby aiding participating MCO's to develop a strategy to focus attention on the Key Driver service measure.

Regression analysis produces a number called a beta coefficient (β), which represents the degree to which the composite area impacts overall satisfaction; the larger the beta coefficient, the greater the impact that area has on satisfaction. Two composites have been identified as Key Drivers based on the *adult* regression analysis: How Well Doctors Communicate ($\beta=0.889^1$) and Customer Service ($\beta=0.653$). Two composites have been identified as Key Drivers based on the *child* regression analysis: Customer Service ($\beta=0.636$) and How Well Doctors Communicate ($\beta=0.546$).

The Quality Compass (Public Report) benchmark is a collection of CAHPS® 3.0H mean summary ratings for those plan samples choosing to report their scores publicly into an aggregate, or national summary. Depending on the health plan's composite percentile ranking when compared to the adult or child Quality Compass 2004 (Public Report) benchmark, The Myers Group provides the categories on the following page for use in developing action plans.

¹ Numbers shown are beta coefficients (found with respondent-level composites scaled 0-3, See Regression Analysis in *Technical Notes*). Within the context of the statistical model, the larger the coefficient, the stronger its influence on the dependent variable (Overall Satisfaction with Health Plan), with all other composites held constant.

Strength (Market & Maintain)

The composite is a key driver of overall satisfaction among health plan members. When compared to the adult or child Quality Compass 2004 (Public Report) benchmark the Summary Rate for this area is at or above the 75th percentile and is, therefore, considered a health plan strength.

Opportunity (Investigate & Improve)

Although this composite is considered a key driver of overall satisfaction among health plan members, the Summary Rate falls below the 50th percentile when compared to the adult or child Quality Compass 2004 (Public Report) benchmark. Therefore, the composite is considered a health plan opportunity.

Monitor

The composite is a key driver of overall satisfaction among health plan members. However, when compared to the adult or child Quality Compass 2004 (Public Report) benchmark the Summary Rate is between the 50th and 75th percentile. While the composite is considered neither a strength nor an opportunity, it is nonetheless a topic of great importance to members. Therefore, the composite should be monitored, as it has a significant impact on member's overall rating of health plan.

A Key Driver Analysis is presented for the following categories:

- **PMAP 18-64 by health plan** (compared to *adult* Quality Compass 2004 [Public Report] benchmark)
- **MinnesotaCare 18-64 by health plan** (compared to *adult* Quality Compass 2004 [Public Report] benchmark)
- **PMAP <18 by health plan** (compared to *child* Quality Compass 2004 [Public Report] benchmark)
- **MinnesotaCare <18 by health plan** (compared to *child* Quality Compass 2004 [Public Report] benchmark)
- **MSHO 65+** (compared to *adult* Quality Compass 2004 [Public Report] benchmark)
- **MinnesotaCare Limited Benefit Set 65+** (compared to *adult* Quality Compass 2004 [Public Report] benchmark)

Key Driver Analysis – PMAP 18-64 (Adult)

Plan	Strength	Monitor	Opportunity
BluePlus 18-64	How Well Doctors Communicate	Customer Service	NA
First Plan of Minnesota 18-64	Customer Service	NA	NA
	How Well Doctors Communicate		
HealthPartners 18 - 64	Customer Service	How Well Doctors Communicate	NA
Itasca Medical Care 18 - 64	How Well Doctors Communicate	NA	Customer Service
Medica Health Plans 18 - 64	NA	Customer Service	How Well Doctors Communicate
Metropolitan Health Plan 18 - 64	NA	How Well Doctors Communicate	Customer Service
PrimeWest Health System 18 - 64	How Well Doctors Communicate	NA	Customer Service
South Country Health Alliance 18 - 64	How Well Doctors Communicate	Customer Service	NA
UCare Minnesota 18 - 64	NA	Customer Service	How Well Doctors Communicate

Key Driver Analysis – MinnesotaCare 18-64 (Adult)

Plan	Strength	Monitor	Opportunity
BluePlus 18-64	How Well Doctors Communicate	NA	Customer Service
First Plan of Minnesota 18-64	How Well Doctors Communicate	Customer Service	NA
HealthPartners 18 - 64	How Well Doctors Communicate	Customer Service	NA
Itasca Medical Care 18 - 64	How Well Doctors Communicate	NA	Customer Service
Medica Health Plans 18 - 64	How Well Doctors Communicate	Customer Service	NA
Metropolitan Health Plan 18 - 64	How Well Doctors Communicate	NA	Customer Service
UCare Minnesota 18 - 64	How Well Doctors Communicate	NA	Customer Service

Key Driver Analysis – PMAP <18 (Child)

Plan	Strength	Monitor	Opportunity
BluePlus <18	How Well Doctors Communicate	Customer Service	NA
First Plan of Minnesota <18	NA	How Well Doctors Communicate	NA
		Customer Service	
HealthPartners <18	NA	How Well Doctors Communicate	NA
		Customer Service	
Itasca Medical Care <18	How Well Doctors Communicate	Customer Service	NA
Medica Health Plans <18	How Well Doctors Communicate	Customer Service	NA
Metropolitan Health Plan <18	NA	How Well Doctors Communicate	NA
		Customer Service	
PrimeWest Health System <18	NA	How Well Doctors Communicate	NA
		Customer Service	
South Country Health Alliance <18	NA	How Well Doctors Communicate	NA
		Customer Service	
UCare Minnesota <18	NA	How Well Doctors Communicate	NA
		Customer Service	

Key Driver Analysis – MinnesotaCare <18 (Child)

Plan	Strength	Monitor	Opportunity
BluePlus <18	How Well Doctors Communicate	Customer Service	NA
First Plan of Minnesota <18	Customer Service	How Well Doctors Communicate	NA
HealthPartners <18	NA	How Well Doctors Communicate	NA
		Customer Service	
Medica Health Plans <18	How Well Doctors Communicate	Customer Service	NA
UCare Minnesota <18	How Well Doctors Communicate	Customer Service	NA

Key Driver Analysis – MSHO 65+ (Senior)

Plan	Strength	Monitor	Opportunity
MSHO 65+	How Well Doctors Communicate	NA	Customer Service

Key Driver Analysis – MinnesotaCare Limited Benefit Set 18-64 (Adult)

Plan	Strength	Monitor	Opportunity
MinnesotaCare Limited Benefit Set 65+	NA	How Well Doctors Communicate	Customer Service

Part IX:

SF-12v2 Survey Results — Program Comparisons – Adult Only

Often used in large population health surveys, the SF-12v2 Survey is a brief, reliable measure of overall health status. The SF-12v2 Survey enables the calculation of an eight-domain profile of scales, as well as two summary measures.

Eight domain scales:

- Physical Functioning – Ability to perform: moderate activities, climbing stairs
- Role Physical - Due to physical health problems: accomplished less, limited in work
- Bodily Pain - Pain interfered with normal work
- General Health - Health in general
- Vitality – Energy level
- Social Functioning - Physical/emotional problems interfered with social activity
- Role Emotional - Due to emotional health problems: accomplished less, worked less carefully
- Mental Health - Felt calm or downhearted

Two summary measures:

- Aggregate physical health (Physical Functioning, Role Physical, Bodily Pain and General Health)
- Aggregate mental health (Vitality, Social Functioning, Role Emotional and Mental Health)

The SF-12v2 Survey scoring methodology involves weighted item responses, which allows for standardized scores where the national average consists of the following comparisons for use: Mean = 50 (consists of respondents age 14 and older) and Standard Deviation = 10. Therefore, when reviewing mean scores, the national average mean for comparison is always 50.0.

SF-12v2 Survey Results by Adult Program

Program	PMAP	PMAP	MSHO	MinnesotaCare	MinnesotaCare Limited Benefit Set
Age Range	18-64	65+	65+	18-64	18-64
Physical Functioning	49.52	35.94	34.09	50.46	48.04
Role Physical	47.97	38.73	38.19	49.03	46.8
Bodily Pain	47.9	40.62	40.44	47.88	45.6
General Health	35.44	43.33	44.17	34.26	36.61
Vitality	49.41	46.44	46.22	51.26	50.14
Social Functioning	46.08	44.45	43.17	48.03	46.99
Role Emotional	46.43	43.1	41.47	48.55	47.18
Mental Health	47.37	50.0	48.62	49.3	48.61
Aggregate Physical Score	46.23	36.87	36.46	45.83	44.32
Aggregate Mental Score	46.86	50.15	49.02	49.33	48.76

Note: The U.S. National Average mean for comparison is 50.0 for respondents age 14 and older.

APPENDIX A: Technical Notes *(in alphabetical order following the Overview of Programs)*

Overview of Programs

The Medical Assistance Program (MA), also called Medicaid, uses a combination of federal and state tax dollars to help people pay for their medical care. Recipients include: low-income families, children, pregnant women, and people who are elderly (65 or older) or have disabilities.

- **Prepaid Medical Assistance Program (PMAP)** enrollees are in the managed care program. They must receive all of their medical care from their particular health plan, except in a life-threatening emergency.

MinnesotaCare is a state healthcare program for uninsured Minnesota residents who meet certain income and other eligibility requirements. MinnesotaCare offers a benefit package of services through prepaid managed care health plans. All enrollees in MinnesotaCare pay a premium. Premiums are determined based on a sliding scale of household income and the number of individuals covered.

Minnesota Senior Health Options (MSHO) integrates care for low-income senior citizens eligible for both Medicare and Medicaid. This demonstration is designed to simplify and coordinate care for seniors in a single, seamless system of care.

MinnesotaCare Limited Benefit Set Minnesota Limited Benefit Set (MLB) is a state health care program for uninsured adults without children who meet certain income and other eligibility requirements. All enrollees pay a premium based on a sliding fee scale. Outpatient hospital care, physician services, drugs, chiropractic services, laboratory and radiology services are covered up to \$5000 per calendar year. Inpatient hospitalization has a \$10,000 annual coverage limit, and 10% co pay for inpatient services (up to \$1000 per year).

Composites and Related Questions

Each individual composite presented in this report includes a series of related questions, as follows:

- For **“How Well Doctors Communicate,”** the survey asked people to rate how often doctors or other health providers: 1) *Listened carefully*; 2) *Explained things in an understandable way*; 3) *Showed respect for what they had to say*; and 4) *Spent enough time with them*.
- For **“Courtesy, Respect, and Helpfulness of Office Staff”** the survey asked people to rate how often the office staff at the clinic were: 1) *Courteous and respectful* and 2) *As helpful as they should be*.
- For **“Getting Needed Care”** the survey asked people to rate how much of a problem it was to: 1) *Get a personal doctor or nurse they are happy with*; 2) *Get specialist referrals*; 3) *Get necessary tests or treatments*; and 4) *Get health plan approval without delay*.
- For **“Health Plan Customer Service”** the survey asked people to rate how much of a problem it was to: 1) *Get needed help when calling health plan customer service* and 2) *Find needed information in their health plan’s written materials*.

Opportunity Analysis

A separate multiple linear regression analysis was run on both the aggregate adult MCO data and the aggregate child MCO data. The dependent variable is the overall health plan-rating question. The independent variables were the four respondent-level composite variables and indicator variables for the health plan. Those composite variables found to have a significant positive influence (as found by testing individual beta coefficients with a 0.05 level of significance) on overall satisfaction are reported as Key Drivers of overall satisfaction. The numbers reported next to each composite name are beta coefficients. These coefficients indicate the amount of change that takes place in the dependent variable for a one-unit change in the respondent level composite independent variable in the rescaled 0-3 units (with all other independent variables unchanged). Within the context of the model, the higher the beta score, the larger the effect the composite has on overall satisfaction, with all other composites held constant.

If the composite Summary Rate Score percentage is greater/equal to the 75th percentile of the 2004 adult or child Quality Compass (Public Report) Summary Rate Scores and the composite is determined to be a Key Driver by the multiple linear regression analysis, the composite is considered a plan Strength. If the composite is a Key Driver and the Summary Rate Score is less than the 50th percentile when compared to the 2004 adult or child Quality Compass (Public Report) Summary Rate Scores, the composite is considered an Opportunity. If a key driver has a Summary Rate Score that falls between the 50th and 75th percentile when compared to adult or child Quality Compass scores it is suggested that it be monitored as it could become a Strength or Opportunity in the future, depending on the health plan's success in that area.

Quality Compass 2004 CAHPS® Benchmark (Medicaid Adult- Public Report, File 6)

This benchmark is a collection of CAHPS® 3.0H mean summary ratings for those Medicaid adult plans (84 samples) choosing to report their scores publicly, in addition to submitting their scores to be compiled anonymously into a Quality Compass aggregate, or national summary.

Quality Compass 2004 CAHPS® Benchmark (Medicaid Child)

This benchmark is a collection of CAHPS® 3.0H mean summary ratings for the 25 Medicaid Child (Non CCC) plan samples which submitted data to NCOA in 2004.

Regression Analysis

Regression estimates are measures of association between independent variables and a dependent variable (overall satisfaction), while controlling for the effect of other variables through the use of a statistical model. A backward elimination, respondent-level, multiple linear regression model was fitted to the aggregate adult MCO data and the aggregate child MCO data. The dependent variable in the model is measured by the question "What number would you use to rate your health plan?" scaled from 0 to 10 ("Worst health plan possible" to "Best health plan possible").

All composite questions are evaluated as potential independent variables in the analysis. These questions are scaled from 0 to 3 for Three-Point scales (as 0, 1.5, and 3) and 0 to 3 (0, 1, 2, and 3) for four-point scales in the direction of least favorable response to most favorable response.

Sampling Error

Sampling error can be thought of as the extent to which survey results may differ from what would be obtained if every eligible member in the sample had been surveyed. The size of such error depends largely on the percentage distributions (i.e., the number of respondents selecting each answer category) and the number of members surveyed. The more disproportionate the percentage distributions or the larger the sample size, the smaller the error will be.

The following table may be used in estimating approximate sampling error. The table shows the range (plus or minus the figure shown) within which the population percentage could be expected to lay 95* out of 100 times a sample of that size and percentage distribution would be selected.

Valid Responses	Percentage Distribution				
	50/50	60/40	70/30	80/20	90/10
50	13.9	13.6	12.7	11.1	8.3
100	9.8	9.6	9.0	7.8	5.9
200	6.9	6.8	6.4	5.5	4.2
300	5.7	5.5	5.2	4.5	3.4
400	4.9	4.8	4.5	3.9	2.9
500	4.4	4.3	4.0	3.5	2.6
750	3.6	3.5	3.3	2.9	2.1
850	3.4	3.3	3.1	2.7	2.0

* 95% confidence interval

The sampling error table is used in the following manner. Assume that "overall satisfaction with the health plan" received a Summary Rate score of seventy percent (70.0%) from a sample of 500 valid responses. For a 95% confidence interval, look at the preceding table where the sample size of 500 intersects the percentage distribution of 70/30. The margin of error for this sample size is four percentage points (4.0%). Therefore, on average, in 95 out of 100 samples, the 95% confidence interval (e.g., 66.0% to 74.0%) will span the true unknown population percentage.

Summary Rate

Summary Rates are single statistics generated for a survey question as specified by NCQA. In general, Summary Rates represent the percentage of respondents who chose the most favorable response option(s) (“Always” and “Usually”, “Not a Problem” or “8” to “10”). Not all questions are assigned a Summary Rate by NCQA.

Summary Rate categories for the rating questions represent respondents who answered “8,” “9,” or “10.” In addition to the traditional NCQA Defined Summary Rate calculation for rating questions (responses “8”, “9”, and “10”), Summary Rates are also calculated using “9” and “10” (see banner tables for the new Summary Rates calculations).

Valid Surveys/Unanswered Questions

CAHPS® 3.0H prescribes that a survey will be included in the analysis only if the member appropriately responds to Question 1 (“Yes” response to “Our records show that you are now in (Plan Name). Is that right?”) and if the member appropriately responds to at least 80% of the standard survey questions. If a respondent did not answer a particular question, that response is considered “missing.” If a respondent answered a question by marking more than one response (not including the race question or other multi-mark questions), that response is considered a “multiple mark”. A missing/multiple mark response is NOT assigned any value or used to calculate satisfaction scores.

APPENDIX B: Respondent Characteristics

Overview

Several questions in the surveys ask about individual respondent characteristics. These questions include: gender, educational level, health status, ethnicity, and race. Table B-1 shows a summary of these characteristics for various subsets of the entire sample. There are two sets of percentages shown for each subset. The unweighted data represent the actual percentages of respondents in the sample. The weighted data represent the percentages after adjusting for the population numbers of individuals in each of the health plans.

Gender

For the adult programs, the majority of respondents were women (ranging from 73.1% to 87.8% of weighted data). However, gender was balanced for the child programs whether it be weighted or unweighted results, with females and males comprising a near equal portion of the respondents.

Educational Level

Educational level is coded into three categories: (1) high school or less, (2) some college, and (3) college graduate or more. For every program, the majority of respondents completed high school or less (ranging from 43.7% to 84.3%). PMAP 65+ members (65+ Total, 65+ Greater Minnesota, and 65+ Metro) and MSHO 65+ had the largest number of respondents reporting a high school education or less, whereas MinnesotaCare and MinnesotaCare Limited Benefit Set members had the lowest number of respondents reporting high school education or less. In turn, the MinnesotaCare and MinnesotaCare Limited Benefit Set members (adult and child surveys) reported the highest percentage of college graduate respondents.

Health Status

The adult health status question is: "In general, how would you rate your mental and emotional health now?" and the child health status question is "In general, how would you rate your child's overall health now?" The response choices are: Excellent, Very Good, Good, Fair, and Poor. Child members age 18 or less, followed by respondents between the ages of 18 and 64 are most likely to say that their health is Excellent or Very Good, whereas respondents over the age of 64 are most likely to select Fair or Poor.

Hispanic or Latino Ethnicity

The Hispanic or Latino ethnicity question is: "Are you of Hispanic or Latino origin or descent?" The response choices are: (1) Hispanic or Latino or (2) Not Hispanic or Latino. The PMAP <18 (child survey) reported the highest percentage of Hispanic or Latinos at 18.3%, followed by MinnesotaCare <18 (child survey) at 12.4%. The percentage of Hispanic or Latino respondents for the remaining adult and senior programs ranged from 1.9% to 6.6%.

Race

The race question is: "What is your race?" The majority of respondents in all programs chose White. Black/African American members were most prevalent among the respondents for PMAP <18 (19.3%), 18 to 64 (19.1%), and MinnesotaCare <18 (18.5%). Asians comprise more than 20% of MSHO 65+ respondents. Very few respondents selected Native or Other Pacific Islander (0% - 1.6%) or American Indian or Alaska Native (1.4% - 3.5%).

Table B-1: Respondent Characteristics

			Gender		Educational Level			Self-Reported Health Status		
			Male	Female	High School or Less	Some College	College Graduate or More	Excellent/Very Good	Good	Fair/Poor
PMAP	< 18	Weighted	50.4%	49.6%	55.9%	34.2%	9.9%	79.3%	17.5%	3.2%
		Unweighted	50.0%	50.0%	53.4%	35.4%	11.2%	80.0%	17.1%	2.8%
	18 to 64	Weighted	12.2%	87.8%	57.4%	36.5%	6.2%	52.8%	30.1%	17.1%
		Unweighted	9.6%	90.4%	52.1%	40.2%	7.8%	57.3%	29.3%	13.4%
	65+ Total	Weighted	22.8%	77.2%	76.2%	13.4%	10.4%	45.0%	35.3%	19.7%
		Unweighted	19.9%	80.1%	74.2%	19.1%	6.8%	47.5%	33.1%	19.3%
	65+ Greater Minnesota	Weighted	21.0%	79.0%	84.3%	13.0%	2.8%	49.2%	34.8%	15.9%
		Unweighted	21.4%	78.6%	85.5%	11.7%	2.7%	47.8%	35.0%	17.2%
	65+ Metro	Weighted	23.9%	76.1%	71.1%	13.7%	15.2%	42.2%	35.6%	22.1%
		Unweighted	19.0%	81.0%	67.4%	23.5%	9.2%	47.4%	32.1%	20.6%
Minnesota Care	< 18	Weighted	49.5%	50.5%	45.5%	39.0%	15.5%	88.2%	10.3%	1.5%
		Unweighted	49.5%	50.5%	42.7%	39.8%	17.5%	87.5%	10.7%	1.8%
Minnesota Care	18 to 64	Weighted	26.9%	73.1%	43.7%	38.8%	17.5%	61.2%	26.3%	12.4%
		Unweighted	28.4%	71.6%	42.8%	39.8%	17.5%	61.3%	26.7%	12.0%
MSHO	65+	Weighted	26.8%	73.2%	74.3%	14.8%	10.9%	41.1%	29.5%	29.3%
		Unweighted	26.3%	73.7%	74.0%	14.9%	11.0%	40.6%	30.3%	29.1%
Minnesota Care Limited Benefit Set	18 to 64	Weighted	26.9%	73.1%	48.6%	34.0%	17.5%	56.6%	26.0%	17.4%
		Unweighted	26.9%	73.1%	48.6%	34.0%	17.4%	56.6%	26.0%	17.4%

Table B-1: Respondent Characteristics

			Hispanic or Latino		Race*						
			Hispanic or Latino	Not Hispanic or Latino	White	Black or African-American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Other	
PMAP	< 18	Weighted	18.3%	81.7%	58.2%	19.3%	10.4%	1.6%	3.5%	7.1%	
		Unweighted	19.8%	80.2%	66.2%	16.1%	6.2%	1.2%	3.6%	6.7%	
	18 to 64	Weighted	6.6%	93.4%	61.0%	19.1%	10.3%	1.3%	3.3%	5.0%	
		Unweighted	5.0%	95.0%	90.5%	2.3%	0.9%	0.7%	3.2%	2.4%	
	65+ Total	Weighted	3.0%	97.0%	76.5%	6.8%	10.9%	0.7%	2.0%	3.2%	
		Unweighted	4.6%	95.4%	68.8%	13.5%	10.6%	0.9%	2.6%	3.7%	
	65+ Metro	Weighted	3.6%	96.4%	67.9%	9.9%	16.0%	0.8%	1.8%	3.6%	
		Unweighted	6.0%	94.0%	55.1%	20.4%	15.6%	1.1%	3.0%	4.6%	
	65+ Greater Minnesota	Weighted	2.1%	97.9%	90.2%	2.0%	2.7%	0.5%	2.3%	2.4%	
		Unweighted	2.4%	97.6%	92.4%	1.5%	2.0%	0.4%	1.8%	2.0%	
	Minnesota Care	< 18	Weighted	12.4%	87.6%	68.4%	18.5%	5.2%	1.1%	1.9%	4.9%
			Unweighted	9.8%	90.2%	72.1%	13.6%	6.1%	0.9%	2.0%	5.2%
Minnesota Care	18 to 64	Weighted	2.8%	97.2%	84.4%	6.1%	4.4%	0.6%	1.8%	2.7%	
		Unweighted	2.9%	97.1%	82.6%	7.1%	4.7%	0.4%	2.1%	3.0%	
MSHO	65+	Weighted	4.5%	95.5%	61.9%	9.0%	21.9%	1.9%	2.6%	2.6%	
		Unweighted	4.1%	95.9%	60.7%	8.2%	24.3%	1.9%	2.4%	2.4%	
Minnesota Care Limited Benefit Set	18 to 64	Weighted	1.9%	98.1%	84.6%	6.0%	5.0%	0.0%	1.4%	3.0%	
		Unweighted	1.9%	98.1%	84.6%	6.0%	5.0%	0.0%	1.4%	3.0%	

* Race percentages are determined for all those respondents who checked one or more responses to the race question.