

2015

**MINNESOTA MANAGED CARE PUBLIC PROGRAMS
CONSUMER SATISFACTION SURVEY RESULTS**

For

**Families and Children - MA
Hennepin Health
MinnesotaCare
Minnesota Senior Care Plus
Minnesota Senior Health Options
Special Needs Basic Care**

May 2015

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Project Background

The 2015 Minnesota Managed Care Public Programs Consumer Satisfaction Survey was conducted by DataStat, Inc., an NCQA-certified CAHPS® vendor, under contract with the Minnesota Department of Human Services (DHS).

The survey was designed to assess and compare the satisfaction of enrollees in managed care Minnesota health care programs (MC MHCP) administered by DHS on an annual basis utilizing the standardized survey instrument from the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) 5.0H Medicaid core survey.

The core instrument is 58 questions. The instrument assessed such topics as: *how well doctors communicate; getting care without long waits; getting care that is needed; health plan customer services; shared decision making; and overall satisfaction with health plans and health care*. DHS added questions to assess topics such as immunization, behavioral health and care coordination.

The survey included six core publicly funded managed care population groups:

Families and Children - MA (F&C-MA)

Hennepin Health (HH)

MinnesotaCare

Minnesota Senior Care Plus (MSC+)

Minnesota Senior Health Options (MSHO)

Special Needs Basic Care (SNBC)

The survey was administered from November 2014 through January 2015. Each respondent received up to four waves of mail with telephone interview call attempts made to non-responders. Participation in the survey was entirely voluntary and all data collected is kept confidential. The mailing materials were sent in English and contained instructions in Spanish that told respondents they could complete the questionnaire in Spanish by calling an 800 number. In addition, a language block on the backside of the letters in Hmong, Russian, Somali, and Vietnamese let respondents with these native languages know that the survey was being administered in English and Spanish, and that they could call DataStat to have their names removed from the sample list if they did not wish to participate.

The study had a goal of receiving at least 300 returned questionnaires for each health plan or group in each of the six program populations; 32 sample groups in all. See Appendix D for *Summary of Sampling Quantities and Response Rates*.

Key Findings

Information obtained from consumer satisfaction surveys allows managed care organizations (health plans) to measure how well they are meeting their members' expectations and needs. Surveys can also reveal areas of recent improvement and highlight other areas needing attention to improve the quality of care provided.

Key Findings are defined as those plan scores that are significantly higher or lower than the program average, for the program in which that plan participates.

Composite Scores: (results from individual questions in the survey were combined into five different topic areas, called Composites)

Health Plan	<i>Getting Needed Care</i>	<i>Getting Care Quickly</i>	<i>How Well Doctors Communicate</i>	<i>Customer Service</i>	<i>Shared Decision Making</i>
Lower than Average	HealthPartners (MSHO) PrimeWest Health (MinnesotaCare) UCare (MSC+, MSHO)	HealthPartners (MinnesotaCare, MSHO) PrimeWest Health (MinnesotaCare) UCare (MSHO)		UCare (MSHO)	HealthPartners (MinnesotaCare)
Higher than Average	BluePlus (MinnesotaCare, MSHO) Medica (SNBC) PrimeWest Health (MSHO)	BluePlus (MinnesotaCare) Medica (SNBC) PrimeWest Health (MSHO)	BluePlus (F&C-MA)	BluePlus (MSC+) PrimeWest Health (MSHO) South Country Health Alliance (SNBC)	BluePlus (F&C-MA) South Country Health Alliance (MSHO)

Rating Scores: (four questions rated the satisfaction of the enrollee with the health care received and are called Ratings)

Health Plan	<i>Rating of all health care</i>	<i>Rating of personal doctor</i>	<i>Rating of specialist seen most often</i>	<i>Rating of health plan</i>
Lower than Average	Medica (F&C-MA) UCare (MSHO)	UCare (MSHO)		PrimeWest Health (F&C-MA) UCare (MSHO)
Higher than Average	BluePlus (F&C-MA, MinnesotaCare) HealthPartners (F&C-MA)	BluePlus (F&C-MA, MinnesotaCare, MSC+)		BluePlus (F&C-MA, MSC+)

Data analysis was conducted in order to report results on three levels:

- Program level: overall results from the six core population groups listed above
- Health plan specific: results for the managed care health plans participating in the population groups
- Aggregate level: analysis was conducted at the combined program level in order to understand areas where improvement in quality and service can be made.

Average plan scores for satisfaction composites and ratings are compared using a difference-of-means statistical test.

Program Level Composite and Rating Results

This section of the report shows overall results for the six core managed care MHCP Program population groups:

- Families and Children - MA (F&C-MA)
- Hennepin Health (HH)
- MinnesotaCare
- Minnesota Senior Care Plus (MSC+)
- Minnesota Senior Health Options (MSHO)
- Special Needs Basic Care (SNBC)

The survey results were adjusted for age and health status for all six programs using a regression technique that statistically controlled for variations, so that managed care organizations with varying numbers of older or more ill people could be compared fairly with other managed care organizations. Statistical testing of differences between health plans was based on adjusted results.

The composite scores show the percentage of enrollees who responded most positively to the questions that formed the composite topics. Responses of "Yes" and "A lot" are used to calculate the Shared Decision Making composite. For all other composites a response of "Always" is used. The rating scores show the percentage of enrollees who responded most positively (9 or 10) on the four overall survey questions that asked enrollees to rate their health care, doctor, specialist, and health plan.

When comparing ratings and percentages, the reader should ignore small differences between numbers. These small differences may reflect sampling variation rather than real differences.

Composite Scores

Program	<i>Getting Needed Care</i>	<i>Getting Care Quickly</i>	<i>How Well Doctors Communicate</i>	<i>Customer Service</i>	<i>Shared Decision Making</i>
F&C-MA	55%	58%	79%	68%	50%
HH	48%	58%	73%	64%	52%
MinnesotaCare	59%	60%	80%	69%	49%
MSC+	59%	64%	80%	66%	51%
MSHO	60%	64%	75%	70%	49%
SNBC	52%	58%	72%	63%	51%

Rating Scores

Program	<i>Rating of all health care</i>	<i>Rating of personal doctor</i>	<i>Rating of specialist seen most often</i>	<i>Rating of health plan</i>
F&C-MA	54%	69%	65%	58%
HH	45%	64%	69%	55%
MinnesotaCare	55%	69%	66%	54%
MSC+	62%	76%	70%	69%
MSHO	60%	75%	73%	74%
SNBC	50%	68%	61%	58%

Plan Results

These tables provide plan-specific composite and overall satisfaction scores for each MHCP Program. The survey results for the health plans were adjusted for age and self-reported health status before testing for significant differences. The Program average is provided for evaluation purposes. For each composite and rating score, each plan was compared to the program average using a difference-of-means statistical test.

- Plans with a composite or rating score significantly lower than the program average have an indicator of * next to that rating or composite score.
- Plans with a composite or rating score significantly higher than the program average have an indicator of ** next to that rating or composite score.

Each individual composite includes a series of related questions. For each health plan, the numbers in the tables show the percent of all people who responded most positively to these questions. The series of questions asked people to rate how often:

- Their doctors communicated well
- They got care without long waits
- They got needed care
- Their health plan's customer service was helpful and courteous
- They talked with their doctor about prescription medicine

The rating scores show the percentage of enrollees who responded most positively (9 or 10) on the four overall survey questions that asked enrollees to rate their health care, doctor, specialist, and health plan.

F&C-MA Composite Scores

F&C-MA	<i>Getting Needed Care</i>	<i>Getting Care Quickly</i>	<i>How Well Doctors Communicate</i>	<i>Customer Service</i>	<i>Shared Decision Making</i>
F&C-MA Average	55%	58%	79%	68%	50%
BluePlus	54%	61%	83% **	72%	54% **
HealthPartners	57%	58%	75%	75%	50%
Itasca Medical Care	58%	62%	79%	64%	47%
Medica	53%	56%	79%	59%	48%
PrimeWest Health	56%	60%	79%	64%	50%
South Country Health Alliance	52%	54%	78%	62%	50%
UCare	54%	55%	80%	72%	49%

** / * indicates a rating significantly higher/lower than the F&C-MA program average
(see Appendix B: Technical Notes: Statistical Significance)

F&C-MA Overall Satisfaction Ratings

F&C-MA	<i>Rating of all health care</i>	<i>Rating of personal doctor</i>	<i>Rating of specialist seen most often</i>	<i>Rating of health plan</i>
F&C-MA Average	54%	69%	65%	58%
BluePlus	60% **	74% **	63%	64% **
HealthPartners	61% **	74%	70%	60%
Itasca Medical Care	50%	64%	68%	58%
Medica	45% *	65%	68%	54%
PrimeWest Health	49%	63%	58%	50% *
South Country Health Alliance	57%	73%	59%	58%
UCare	54%	74%	66%	57%

** / * indicates a rating significantly higher/lower than the F&C-MA program average
(see Appendix B: Technical Notes: Statistical Significance)

MinnesotaCare Composite Scores

MinnesotaCare	<i>Getting Needed Care</i>	<i>Getting Care Quickly</i>	<i>How Well Doctors Communicate</i>	<i>Customer Service</i>	<i>Shared Decision Making</i>
MinnesotaCare Average	59%	60%	80%	69%	49%
BluePlus	65% **	68% **	84%	66%	52%
HealthPartners	55%	53% *	77%	65%	44% *
Medica	59%	67%	79%	72%	56%
PrimeWest Health	49% *	50% *	77%	74%	45%
UCare	58%	58%	75%	68%	48%
IMC/SCHA	63%	63%	84%	71%	46%

** / * indicates a rating significantly higher/lower than the MinnesotaCare program average
(see Appendix B: Technical Notes: Statistical Significance)

MinnesotaCare Overall Satisfaction Ratings

MinnesotaCare	<i>Rating of all health care</i>	<i>Rating of personal doctor</i>	<i>Rating of specialist seen most often</i>	<i>Rating of health plan</i>
MinnesotaCare Average	55%	69%	66%	54%
BluePlus	62% **	76% **	73%	57%
HealthPartners	52%	75%	60%	54%
Medica	59%	63%	63%	56%
PrimeWest Health	51%	67%	60%	50%
UCare	52%	68%	67%	52%
IMC/SCHA	55%	66%	68%	57%

** / * indicates a rating significantly higher/lower than the MinnesotaCare program average
(see Appendix B: Technical Notes: Statistical Significance)

MSC+ Composite Scores

MSC+	<i>Getting Needed Care</i>	<i>Getting Care Quickly</i>	<i>How Well Doctors Communicate</i>	<i>Customer Service</i>	<i>Shared Decision Making</i>
MSC+ Average	59%	64%	80%	66%	51%
BluePlus	60%	66%	82%	74% **	51%
HealthPartners	57%	61%	78%	70%	49%
Medica	61%	61%	82%	62%	55%
UCare	50% *	64%	79%	59%	53%
IMC/MHP	60%	50% *	83%	59%	49%
PW/SCHA	63% **	72% **	77%	68%	50%

** / * indicates a rating significantly higher/lower than the MSC+ program average
(see Appendix B: Technical Notes: Statistical Significance)

MSC+ Overall Satisfaction Ratings

MSC+	<i>Rating of all health care</i>	<i>Rating of personal doctor</i>	<i>Rating of specialist seen most often</i>	<i>Rating of health plan</i>
MSC+ Average	62%	76%	70%	69%
BluePlus	59%	83% **	73%	74% **
HealthPartners	61%	73%	65%	65%
Medica	59%	75%	67%	63%
UCare	60%	72%	69%	65%
IMC/MHP	67%	74%	67%	69%
PW/SCHA	67%	75%	74%	73% **

** / * indicates a rating significantly higher/lower than the MSC+ program average
(see Appendix B: Technical Notes: Statistical Significance)

MSHO Composite Scores

MSHO	<i>Getting Needed Care</i>	<i>Getting Care Quickly</i>	<i>How Well Doctors Communicate</i>	<i>Customer Service</i>	<i>Shared Decision Making</i>
MSHO Average	60%	64%	75%	70%	49%
BluePlus	66% **	64%	76%	77%	47%
HealthPartners	55% *	60% *	73%	66%	47%
Medica	57%	60%	74%	70%	48%
PrimeWest Health	67% **	75% **	77%	78% **	49%
South Country Health Alliance	62%	67%	76%	67%	58% **
UCare	54% *	56% *	70%	59% *	46%
Itasca Medical Care / Metropolitan Health Plan	60%	67%	80%	76%	48%

** / * indicates a rating significantly higher/lower than the MSHO program average
(see Appendix B: Technical Notes: Statistical Significance)

MSHO Overall Satisfaction Ratings

MSHO	<i>Rating of all health care</i>	<i>Rating of personal doctor</i>	<i>Rating of specialist seen most often</i>	<i>Rating of health plan</i>
MSHO Average	60%	75%	73%	74%
BluePlus	65%	77%	78%	77%
HealthPartners	57%	73%	67%	69%
Medica	59%	75%	73%	75%
PrimeWest Health	61%	80%	81%	77%
South Country Health Alliance	61%	74%	72%	75%
UCare	53% *	68% *	71%	67% *
Itasca Medical Care / Metropolitan Health Plan	68%	82%	72%	79%

** / * indicates a rating significantly higher/lower than the MSHO program average
(see Appendix B: Technical Notes: Statistical Significance)

SNBC Composite Scores

SNBC	<i>Getting Needed Care</i>	<i>Getting Care Quickly</i>	<i>How Well Doctors Communicate</i>	<i>Customer Service</i>	<i>Shared Decision Making</i>
SNBC Average	52%	58%	72%	63%	51%
Medica	56% **	62% **	74%	63%	49%
Metropolitan Health Plan	51%	60%	71%	61%	54%
PrimeWest Health	52%	59%	71%	67%	50%
South Country Health Alliance	51%	53%	73%	67% **	52%
UCare	52%	55%	69%	54%	52%

** / * indicates a rating significantly higher/lower than the SNBC program average
(see Appendix B: Technical Notes: Statistical Significance)

SNBC Overall Satisfaction Ratings

SNBC	<i>Rating of all health care</i>	<i>Rating of personal doctor</i>	<i>Rating of specialist seen most often</i>	<i>Rating of health plan</i>
SNBC Average	50%	68%	61%	58%
Medica	47%	67%	67%	58%
Metropolitan Health Plan	52%	70%	54%	61%
PrimeWest Health	49%	70%	62%	55%
South Country Health Alliance	49%	69%	61%	61%
UCare	54%	63%	58%	54%

** / * indicates a rating significantly higher/lower than the SNBC program average
(see Appendix B: Technical Notes: Statistical Significance)

Opportunities for Improvement

AHPS® surveys offer the possibility of spotlighting opportunities for improvement, by allowing plans to identify areas of service or care that are highly associated with overall enrollee satisfaction but show lower levels of achievement.

Enrollee responses to survey questions can be summarized as achievement scores. Responses indicating a positive experience are labeled achievements, and an achievement score is computed equal to the proportion of responses qualifying as achievements.

Since achievement scores for survey questions represent the proportion of enrollees who indicate a positive experience, the lower the achievement score, the greater the need for a health plan to improve. For the purpose of identifying opportunities for improvement in this report, responses of "Yes", "A lot" and "Some" are considered achievements for the Shared Decision Making composite. For all other composites, responses of "Usually" or "Always" are considered achievements. Responses of 9 or 10 are considered achievements for the rating questions. An achievement score is considered high when the score is 80% or greater, and low if below 80%.

To help determine which of the satisfaction ratings and composite topics are most closely related to health plan satisfaction, a correlation analysis was performed. Correlation analysis is a statistical technique that shows how strongly various factors -- such as satisfaction with the doctor or the items in each composite -- influence overall satisfaction with the health plan. This information helps health plans know which areas of service or care are most important in the overall enrollee satisfaction, and, in turn, set priorities for improvement.

For each program and plan, the tables on the following pages show which ratings and composites were identified in this survey as highly related to overall satisfaction with the health plan and had achievement scores below 80%. An 'X' under a given rating or column thus represents an opportunity for improvement.

If a health plan has one or more opportunities for improvement, it will want to focus attention on those ratings and topics that are highly related to enrollee satisfaction with the plan. If the health plan has additional resources for improvement, it might then address areas less closely related to enrollee satisfaction. For ratings and topics where plans already have high achievement scores, ongoing monitoring would be needed to maintain high scores.

Highly Related to Health Plan Satisfaction with Achievement Scores <80%								
F&C-MA	<i>Rating of all health care</i>	<i>Rating of personal doctor</i>	<i>Rating of specialist seen most often</i>	<i>Getting Needed Care</i>	<i>Getting Care Quickly</i>	<i>How Well Doctors Communicate</i>	<i>Customer Service</i>	<i>Shared Decision Making</i>
Aggregate of Health Plans	X							
BluePlus	X		X					
HealthPartners	X	X						
Itasca Medical Care	X							
Medica	X							
PrimeWest Health	X							
South Country Health Alliance	X							
UCare	X	X						

Highly Related to Health Plan Satisfaction with Achievement Scores <80%								
HH	<i>Rating of all health care</i>	<i>Rating of personal doctor</i>	<i>Rating of specialist seen most often</i>	<i>Getting Needed Care</i>	<i>Getting Care Quickly</i>	<i>How Well Doctors Communicate</i>	<i>Customer Service</i>	<i>Shared Decision Making</i>
Hennepin Health	X	X	X					X

Highly Related to Health Plan Satisfaction with Achievement Scores <80%								
MinnesotaCare	<i>Rating of all health care</i>	<i>Rating of personal doctor</i>	<i>Rating of specialist seen most often</i>	<i>Getting Needed Care</i>	<i>Getting Care Quickly</i>	<i>How Well Doctors Communicate</i>	<i>Customer Service</i>	<i>Shared Decision Making</i>
Aggregate of Health Plans	X		X					
BluePlus	X		X					
HealthPartners	X		X					
Medica	X							
PrimeWest Health	X							
UCare	X	X	X					
IMC/SCHA	X							

Highly Related to Health Plan Satisfaction with Achievement Scores <80%

MSC+	<i>Rating of all health care</i>	<i>Rating of personal doctor</i>	<i>Rating of specialist seen most often</i>	<i>Getting Needed Care</i>	<i>Getting Care Quickly</i>	<i>How Well Doctors Communicate</i>	<i>Customer Service</i>	<i>Shared Decision Making</i>
Aggregate of Health Plans	X	X	X					
BluePlus	X							
HealthPartners	X	X	X					
Medica	X	X	X					
UCare	X	X	X					
IMC/MHP	X	X	X					
PW/SCHA	X	X	X					

Highly Related to Health Plan Satisfaction with Achievement Scores <80%

MSHO	<i>Rating of all health care</i>	<i>Rating of personal doctor</i>	<i>Rating of specialist seen most often</i>	<i>Getting Needed Care</i>	<i>Getting Care Quickly</i>	<i>How Well Doctors Communicate</i>	<i>Customer Service</i>	<i>Shared Decision Making</i>
Aggregate of Health Plans	X	X						
BluePlus	X							
HealthPartners	X	X	X					
Medica	X							
PrimeWest Health	X							
South Country Health Alliance	X	X	X					
UCare	X	X	X					
Itasca Medical Care / Metropolitan Health Plan	X							

Highly Related to Health Plan Satisfaction with Achievement Scores <80%

SNBC	<i>Rating of all health care</i>	<i>Rating of personal doctor</i>	<i>Rating of specialist seen most often</i>	<i>Getting Needed Care</i>	<i>Getting Care Quickly</i>	<i>How Well Doctors Communicate</i>	<i>Customer Service</i>	<i>Shared Decision Making</i>
Aggregate of Health Plans	X	X	X					
Medica	X		X					
Metropolitan Health Plan	X	X	X					
PrimeWest Health	X	X	X					
South Country Health Alliance	X							
UCare	X	X	X					

Appendices

Appendix A: Additional Questionnaire Items

The 2014 survey was based on the CAHPS® 5.0H Medicaid core module, which contains 58 standard questions. The addition of different sets of supplemental questions created two versions of the instrument. The domains covered by the supplemental questions and the program enrollees who were asked these questions are summarized below.

Supplemental Question Domains	Asked of Program Enrollees in:
Access to after hours care	F&C-MA, Hennepin Health, MinnesotaCare
Language concerns	F&C-MA, Hennepin Health, MinnesotaCare, MSC+, MSHO, SNBC
Access to health care and use of service	F&C-MA, Hennepin Health, MinnesotaCare, MSC+, MSHO, SNBC
Experience with care coordination	F&C-MA, Hennepin Health, MinnesotaCare, MSC+, MSHO, SNBC
Use of health plan online information	F&C-MA, Hennepin Health, MinnesotaCare
Internet Use	F&C-MA, Hennepin Health, MinnesotaCare, MSC+, MSHO, SNBC
Phone Use and DVD player in the home	F&C-MA, Hennepin Health, MinnesotaCare, MSC+, MSHO, SNBC
Participation in health care decision-making	MSC+, MSHO, SNBC
Health status changes and limits to activities	MSC+, MSHO, SNBC
Flu shots and pneumonia vaccination	F&C-MA, Hennepin Health, MinnesotaCare, MSC+, MSHO, SNBC
Medical assistance with smoking and tobacco use cessation	F&C-MA, Hennepin Health, MinnesotaCare, MSC+, MSHO, SNBC

The supplemental questions in each domain and their results are presented on the following pages. For each domain, an initial table shows the question texts, available response options, and the responses selected for reporting here. Subsequent tables display the results by program and plan.

Appendix A – Supplemental Questions

After Hours Care

Enrollees in F&C-MA, Hennepin Health, and MinnesotaCare were asked three questions to assess access to after hours care. Question text and response options are presented first, followed by program and plan results.

Questions in this domain	Response options	Responses reported
<i>After hours care is health care when your usual doctor's office or clinic is closed. In the last 6 months, did you need to visit a doctor's office or clinic for after hours care?</i>	Yes, No	Yes
<i>In the last 6 months, how often was it easy to get the after hours care you thought you needed?</i>	Never, Sometimes, Usually, Always	Always
<p><i>Were any of the following a reason it was not easy to get the after hours care you thought you needed? Please mark all that apply.</i></p> <ul style="list-style-type: none"> - You did not know where to go for after hours care - You weren't sure where to find a list of doctor's offices or clinics in your health plan or network that are open for after hours care - The doctor's office or clinic that had after hours care was too far away - Office or clinic hours for after hours care did not meet your needs 	Yes, No	Yes

F&C-MA	Needed after hours care	Always easy to get needed after hours care	Reasons not easy to get needed after hours care:				
			Didn't know where to go	Not sure where to find	Too far away	Office/clinic hours didn't meet needs	Other reason
F&C-MA Average	12%	57%	6%	8%	5%	9%	17%
BluePlus	14%	63%	3%	3%	6%	13%	19%
HealthPartners	16% **	51%	6%	12%	6%	3%	15%
Itasca Medical Care	12%	53%	10%	10%	5%	14%	29%
Medica	13%	49%	5%	14%	5%	7%	14%
PrimeWest Health	9%	68%	6%	0%	6%	18%	12%
South Country Health Alliance	7% *	47%	6%	12%	6%	18%	18%
UCare	11%	70%	7%	0%	0%	0%	17%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

HH	Needed after hours care	Always easy to get needed after hours care	Reasons not easy to get needed after hours care:				
			Didn't know where to go	Not sure where to find	Too far away	Office/clinic hours didn't meet needs	Other reason
Hennepin Health	10%	32%	13%	16%	13%	10%	6%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MinnesotaCare	Needed after hours care	Always easy to get needed after hours care	Reasons not easy to get needed after hours care:				
			Didn't know where to go	Not sure where to find	Too far away	Office/clinic hours didn't meet needs	Other reason
MinnesotaCare Average	8%	60%	4%	7%	8%	17%	27%
BluePlus	10%	63%	0%	0%	6%	19%	31%
HealthPartners	13% **	52%	5%	10%	10%	14%	33%
Medica	7%	73%	13%	38%	13%	25%	13%
PrimeWest Health	6%	50%	8%	8%	8%	33%	33%
UCare	7%	71%	0%	0%	7%	7%	14%
IMC/SCHA	8%	53%	6%	0%	6%	11%	28%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

Appendix A – Supplemental Questions

Language Concerns

Enrollees in all programs were asked three questions about languages spoken and the need for interpreters. Question text and response options are presented first, followed by program and plan results.

Questions in this domain	Response options	Responses reported
<i>An interpreter is someone who repeats or signs what one person says in a language used by another person. In the last 6 months, did you need an interpreter to help you speak with doctors or other health providers?</i>	Yes, No	Yes
<i>In the last 6 months, when you needed an interpreter to help you speak with doctors or other health providers, how often did you get one?</i>	Never, Sometimes, Usually, Always	Always
<i>What language do you mainly speak at home?</i>	English, Spanish, Vietnamese, Hmong, Russian, Somali, Some other language	All

F&C-MA	Needed interpreter	Always got interpreter	Language mainly spoken at home?						
			English	Spanish	Vietnamese	Hmong	Russian	Somali	Other
F&C-MA Average	3%	55%	94%	1%	1%	1%	0%	1%	1%
BluePlus	2%	67%	95%	1%	1%	0% *	1%	0%	1%
HealthPartners	5%	42%	86% *	2%	3% **	2%	0%	3% **	4% **
Itasca Medical Care	0%	X	100%	0%	0%	0%	0%	0%	0%
Medica	4%	55%	93%	3% **	0%	1%	1%	1%	1%
PrimeWest Health	0% *	100%	98% **	1%	0%	0%	0%	0%	0%
South Country Health Alliance	1% *	0%	99% **	0% *	0%	0%	0%	0%	0%
UCare	8% **	65%	87% *	1%	1%	5% **	0%	4% **	2%

** / * indicates a rating significantly higher/lower than the program average

X Comparative data not available

(see Appendix B: Technical Notes: Statistical Significance)

HH	Needed interpreter	Always got interpreter	Language mainly spoken at home?						
			English	Spanish	Vietnamese	Hmong	Russian	Somali	Other
Hennepin Health	4%	56%	92%	2%	1%	2%	0%	2%	2%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MinnesotaCare	Needed interpreter	Always got interpreter	Language mainly spoken at home?						
			English	Spanish	Vietnamese	Hmong	Russian	Somali	Other
MinnesotaCare Average	2%	64%	95%	1%	1%	0%	0%	0%	1%
BluePlus	1%	50%	97%	1%	1%	0%	0%	0%	1%
HealthPartners	4% **	44%	89% *	3%	2%	0%	0%	0%	4% **
Medica	3%	83%	91% *	3%	1%	0%	0%	1%	3%
PrimeWest Health	0% *	100%	99% **	0%	0%	0%	0%	0%	0% *
UCare	2%	100%	95%	1%	0%	1%	1%	1%	1%
IMC/SCHA	1%	0%	100% **	0% *	0%	0%	0%	0%	0%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MSC+	Needed interpreter	Always got interpreter	Language mainly spoken at home?						
			English	Spanish	Vietnamese	Hmong	Russian	Somali	Other
MSC+ Average	18%	73%	80%	2%	2%	2%	5%	2%	6%
BluePlus	9% *	67%	90% **	3%	1%	1%	1% *	1% *	3% *
HealthPartners	28% **	72%	68% *	2%	12% **	3%	1% *	1%	13% **
Medica	29% **	74%	67% *	2%	1% *	1% *	23% **	1%	5%
UCare	39% **	74%	57% *	3%	1% *	10% **	4%	10% **	15% **
IMC/MHP	12% *	73%	86%	2%	0%	2%	0%	2%	7%
PW/SCHA	3% *	63%	98% **	1% *	0% *	0% *	0%	0% *	1% *

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MSHO	Needed interpreter	Always got interpreter	Language mainly spoken at home?						
			English	Spanish	Vietnamese	Hmong	Russian	Somali	Other
MSHO Average	12%	63%	88%	1%	3%	2%	2%	1%	3%
BluePlus	4% *	50%	96% **	1%	1% *	1%	1% *	0%	0% *
HealthPartners	23% **	59%	74% *	2%	10% **	3%	2%	1%	9% **
Medica	18% **	77% **	79% *	2%	2%	1%	12% **	1%	4%
PrimeWest Health	1% *	50%	99% **	0%	0%	0%	0%	0%	1% *
South Country Health Alliance	3% *	67%	98% **	1%	0%	0% *	0%	0%	0% *
UCare	22% **	59%	74% *	2%	4%	11% **	1%	2%	6% **
Itasca Medical Care / Metropolitan Health Plan	8%	55%	96% **	2%	2%	0%	0%	0%	1% *

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

SNBC	Needed interpreter	Always got interpreter	Language mainly spoken at home?						
			English	Spanish	Vietnamese	Hmong	Russian	Somali	Other
SNBC Average	5%	48%	95%	1%	0%	1%	0%	1%	1%
Medica	4%	27%	99% **	0%	0%	1%	0%	0%	0%
Metropolitan Health Plan	7%	50%	94%	1%	0%	1%	0%	2%	2%
PrimeWest Health	2% *	60%	99% **	1%	0%	0%	0%	0%	0%
South Country Health Alliance	1% *	25%	98% **	1%	0%	0%	0%	0%	1%
UCare	12% **	55%	86% *	2%	1%	5% **	0%	4% **	2%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

Appendix A – Supplemental Questions

Access to Health Care and Use of Service

Supplemental questions about access to care and use of service were asked of enrollees in all six programs. Six of these questions, whose responses could be characterized as positive, are presented here. The question texts, target programs, response options available and reported are shown first. Results for the questions specific to each program and plan follow.

Questions in this domain	Asked of enrollees in	Response options	Responses reported
<i>In the last 6 months, not counting the times you needed health care right away, how many days did you usually have to wait between making an appointment and actually seeing a health provider? (Asked if respondent made appointment)</i>	<i>F&C-MA MinnesotaCare</i>	<i>Same day, 1 day, 2 to 3 days, 4 to 7 days, 8 to 14 days, 15 to 30 days, 31 to 60 days, 61 to 90 days, 91 days or longer</i>	<i>14 days or less</i>
<i>In the last 6 months, how many times did you go to an emergency room to get care for yourself?</i>	<i>All programs</i>	<i>None, 1, 2, 3, 4, 5 to 9, 10 or more</i>	<i>None</i>
<i>In the last 6 months, how often were you taken to the exam room within 15 minutes of your appointment? (Asked if respondent got care)</i>	<i>MSC+ MSHO SNBC</i>	<i>Never, Sometimes, Usually, Always</i>	<i>Always</i>
<i>In the last 6 months, how often did office staff at the doctor's office or clinic treat you with courtesy and respect? (Asked if respondent got care)</i>	<i>MSC+ MSHO SNBC</i>	<i>Never, Sometimes, Usually, Always</i>	<i>Always</i>
<i>In the last 6 months, how often were office staff at a doctor's office or clinic as helpful as you thought they should be? (Asked if respondent got care)</i>	<i>MSC+ MSHO SNBC</i>	<i>Never, Sometimes, Usually, Always</i>	<i>Always</i>
<i>In the last 6 months, how often was it easy to get a referral to a specialist that you needed to see? (Asked if respondent tried to make appointment)</i>	<i>F&C-MA MinnesotaCare</i>	<i>Never, Sometimes, Usually, Always</i>	<i>Always</i>

F&C-MA	<i>Wait for appt: 14 days or less</i>	<i>How many times to ER: None</i>	<i>How often easy to get referral to specialist: Always</i>
F&C-MA Average	88%	80%	64%
BluePlus	86%	81%	56% *
HealthPartners	92%	81%	65%
Itasca Medical Care	88%	83%	72%
Medica	87%	76% *	62%
PrimeWest Health	87%	77%	68%
South Country Health Alliance	89%	80%	61%
UCare	87%	82%	66%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

HH	<i>Wait for appt: 14 days or less</i>	<i>How many times to ER: None</i>	<i>How often easy to get referral to specialist: Always</i>
Hennepin Health	88%	76%	54%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MinnesotaCare	<i>Wait for appt: 14 days or less</i>	<i>How many times to ER: None</i>	<i>How often easy to get referral to specialist: Always</i>
MinnesotaCare Average	84%	87%	71%
BluePlus	84%	88%	77%
HealthPartners	90% **	86%	62%
Medica	84%	84%	75%
PrimeWest Health	80%	87%	62%
UCare	84%	88%	67%
IMC/SCHA	85%	89%	80% **

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MSC+	<i>How many times to ER: None</i>	<i>How often to exam room within 15 minutes: Always</i>	<i>How often office staff courteous/respectful: Always</i>	<i>How often office staff helpful: Always</i>
MSC+ Average	75%	37%	86%	71%
BluePlus	73%	35%	87%	69%
HealthPartners	79%	41%	83%	71%
Medica	69% *	38%	87%	74%
UCare	78%	36%	77% *	68%
IMC/MHP	79%	34%	86%	67%
PW/SCHA	75%	39%	89%	74%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MSHO	<i>How many times to ER: None</i>	<i>How often to exam room within 15 minutes: Always</i>	<i>How often office staff courteous/respectful: Always</i>	<i>How often office staff helpful: Always</i>
MSHO Average	74%	35%	85%	71%
BluePlus	74%	38%	87%	73%
HealthPartners	79% **	38%	79% *	68%
Medica	70%	32%	84%	70%
PrimeWest Health	78%	36%	89% **	75%
South Country Health Alliance	71%	38%	88%	75%
UCare	75%	27% *	81%	64% *
Itasca Medical Care / Metropolitan Health Plan	70%	39%	88%	72%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

SNBC	<i>How many times to ER: None</i>	<i>How often to exam room within 15 minutes: Always</i>	<i>How often office staff courteous/ respectful: Always</i>	<i>How often office staff helpful: Always</i>
SNBC Average	66%	32%	79%	61%
Medica	67%	35%	75%	62%
Metropolitan Health Plan	59% *	30%	82%	63%
PrimeWest Health	68%	34%	81%	58%
South Country Health Alliance	70%	35%	77%	63%
UCare	66%	27%	79%	61%

**** / *** indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

Appendix A – Supplemental Questions

Experience with Care Coordination

Enrollees in all six programs who reported getting care from a health provider other than their personal doctor were asked three questions to measure the experience with coordination of their care. Question text and response options available and reported are shown below, followed by program and plan results.

Questions in this domain	Response options	Responses reported
<i>In the last 6 months, did anyone from your health plan, doctor's office, or clinic help coordinate your care among these doctors or other health providers?</i>	Yes, No	Yes
<i>In the last 6 months, who helped coordinate your care?</i>	Someone from health plan Someone from doctor's office or clinic Someone from another organization Friend or family member Did it myself County case manager/staff person Interpreter	All
<i>How satisfied are you with the help you received to coordinate your care in the last 6 months?</i>	Very dissatisfied Dissatisfied Neither dissatisfied nor satisfied Satisfied Very satisfied	Very Satisfied

F&C-MA	Got help coordinating care	From...							Very satisfied with care coordination
		Health plan	Doctor's office or clinic	Another organization	Friend or family member	Did it myself	County case manager/staff person	Interpreter	
F&C-MA Average	59%	5%	73%	1%	3%	17%	0%	0%	54%
BluePlus	61%	5%	79%	2%	2%	10%	2%	0%	56%
HealthPartners	67%	15%	64%	0%	3%	18%	0%	0%	50%
Itasca Medical Care	71% **	2%	83%	2%	0%	13%	0%	0%	56%
Medica	52%	4%	69%	0%	0%	25%	0%	2%	57%
PrimeWest Health	62%	5%	67%	2%	14%	12%	0%	0%	45%
South Country Health Alliance	51%	0%	72%	0%	5%	23%	0%	0%	50%
UCare	57%	5%	73%	0%	0%	22%	0%	0%	60%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

HH	Got help coordinating care	From...							Very satisfied with care coordination
		Health plan	Doctor's office or clinic	Another organization	Friend or family member	Did it myself	County case manager/ staff person	Interpreter	
Hennepin Health	73%	18%	58%	3%	3%	12%	3%	3%	59%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MinnesotaCare	Got help coordinating care	From...							Very satisfied with care coordination
		Health plan	Doctor's office or clinic	Another organization	Friend or family member	Did it myself	County case manager/ staff person	Interpreter	
MinnesotaCare Average	63%	4%	81%	1%	2%	11%	0%	0%	62%
BluePlus	63%	6%	79%	0%	3%	11%	0%	0%	71%
HealthPartners	62%	9%	81%	0%	3%	6%	0%	0%	45%
Medica	55%	3%	78%	3%	3%	14%	0%	0%	72%
PrimeWest Health	63%	5%	81%	3%	0%	11%	0%	0%	64%
UCare	61%	0%	74%	2%	5%	16%	0%	2%	61%
IMC/SCHA	72%	2%	91%	0%	0%	7%	0%	0%	52%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MSC+	Got help coordinating care	From...							Very satisfied with care coordination
		Health plan	Doctor's office or clinic	Another organization	Friend or family member	Did it myself	County case manager/ staff person	Interpreter	
MSC+ Average	73%	5%	56%	4%	13%	10%	6%	5%	57%
BluePlus	70%	5%	60%	9%	13%	6%	4%	2%	59%
HealthPartners	80%	4%	60%	5%	16%	11%	2% *	4%	54%
Medica	70%	10%	44% *	4%	10%	12%	10%	12% **	59%
UCare	77%	7%	42% *	4%	22%	9%	7%	9%	60%
IMC/MHP	73%	3%	71%	0%	15%	6%	3%	3%	59%
PW/SCHA	73%	3%	65%	2%	7% *	15%	8%	0%	55%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MSHO	Got help coordinating care	From...							Very satisfied with care coordination
		Health plan	Doctor's office or clinic	Another organization	Friend or family member	Did it myself	County case manager/ staff person	Interpreter	
MSHO Average	68%	12%	52%	2%	13%	11%	8%	2%	53%
BluePlus	69%	3% *	52%	1%	11%	20% **	13%	0%	54%
HealthPartners	69%	23% **	38% *	1%	16%	5% *	10%	5%	51%
Medica	67%	15%	46%	3%	14%	14%	4%	4%	56%
PrimeWest Health	71%	8%	58%	2%	11%	11%	10%	0%	59%
South Country Health Alliance	69%	11%	62%	2%	11%	6%	9%	0%	49%
UCare	60%	13%	49%	4%	11%	15%	6%	2%	50%
Itasca Medical Care / Metropolitan Health Plan	76%	9%	63%	4%	17%	4% *	4%	0%	52%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

SNBC	Got help coordinating care	From...							Very satisfied with care coordination
		Health plan	Doctor's office or clinic	Another organization	Friend or family member	Did it myself	County case manager/ staff person	Interpreter	
SNBC Average	65%	10%	49%	5%	7%	19%	9%	1%	52%
Medica	68%	14%	47%	6%	11%	16%	6%	0%	60%
Metropolitan Health Plan	74% **	16%	44%	6%	8%	14%	11%	0%	53%
PrimeWest Health	62%	6%	57%	6%	2% *	18%	10%	1%	48%
South Country Health Alliance	61%	7%	46%	4%	5%	25%	12%	1%	45%
UCare	62%	10%	52%	0%	9%	21%	5%	3%	54%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

Appendix A – Supplemental Questions Use of Health Plan Online Information

Enrollees in F&C-MA, Hennepin Health, and MinnesotaCare who reported looking for information on the Internet about how their health plan works were asked two questions about use of their health plan's Internet site. Question text and response options available and reported are shown first, followed by program and plan results.

Questions in this domain	Response options	Responses reported
<i>When you looked for information in the last 6 months, did you go to your health plan's Internet site?</i>	Yes, No	Yes
<i>How useful was the information you found on your health plan's Internet site?</i>	<i>Not useful at all, A little useful, Somewhat useful, Very useful</i>	<i>Very and Somewhat useful</i>

F&C-MA	<i>Went to health plan's Internet site for info</i>	<i>Information very or somewhat useful</i>
F&C-MA Average	45%	82%
BluePlus	48%	76%
HealthPartners	49%	91%
Itasca Medical Care	45%	93%
Medica	45%	83%
PrimeWest Health	37%	64%
South Country Health Alliance	42%	85%
UCare	44%	81%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

HH	<i>Went to health plan's Internet site for info</i>	<i>Information very or somewhat useful</i>
Hennepin Health	58%	77%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MinnesotaCare	<i>Went to health plan's Internet site for info</i>	<i>Information very or somewhat useful</i>
MinnesotaCare Average	50%	68%
BluePlus	40% *	65%
HealthPartners	67%	77%
Medica	48%	70%
PrimeWest Health	43%	59%
UCare	64% **	71%
IMC/SCHA	35% *	56%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

Appendix A – Supplemental Questions Internet Use

All enrollees were asked about their use of the Internet and their interest in using the Internet to do surveys like CAHPS® and using the Internet to manage health care eligibility. Question texts and response options available and reported are shown first, followed by program and plan results.

Questions in this domain	Response options	Responses reported
<i>How often do you use the Internet?</i>	<i>Never, Less than once a month, 1 to 3 times each month, 1 to 3 times each week, Every day</i>	<i>All</i>
<i>Would you manage your health care eligibility on the Internet using your smart phone or computer?</i>	Yes, No	Yes
<i>Would you complete a survey like this one on the Internet using your smart phone or computer?</i>	Yes, No	Yes

F&C-MA	Uses Internet...					Would manage eligibility on Internet	Would complete survey on Internet
	Never	Less than once a month	1 to 3 times each month	1 to 3 times each week	Every day		
F&C-MA Average	13%	5%	6%	14%	61%	45%	47%
BluePlus	13%	6%	5%	15%	61%	43%	48%
HealthPartners	11%	7%	5%	15%	61%	50%	47%
Itasca Medical Care	18% **	5%	8%	13%	56%	44%	43%
Medica	11%	5%	4%	16%	64%	50%	53% **
PrimeWest Health	13%	6%	13% **	13%	56%	39% *	45%
South Country Health Alliance	16%	4%	5%	12%	62%	43%	43%
UCare	9% *	4%	7%	14%	67% **	47%	51%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

HH	Uses Internet...					Would manage eligibility on Internet	Would complete survey on Internet
	Never	Less than once a month	1 to 3 times each month	1 to 3 times each week	Every day		
Hennepin Health	19%	7%	8%	15%	51%	49%	57%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MinnesotaCare	Uses Internet...					Would manage eligibility on Internet	Would complete survey on Internet
	Never	Less than once a month	1 to 3 times each month	1 to 3 times each week	Every day		
MinnesotaCare Average	11%	4%	5%	12%	68%	58%	54%
BluePlus	10%	6%	4%	12%	69%	58%	53%
HealthPartners	10%	3%	3%	13%	70%	64%	62% **
Medica	10%	7% **	4%	13%	65%	62%	60%
PrimeWest Health	8%	4%	8%	13%	67%	57%	51%
UCare	11%	2% *	5%	13%	69%	57%	54%
IMC/SCHA	13%	3%	5%	10%	68%	54%	49%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MSC+	Uses Internet...					Would manage eligibility on Internet	Would complete survey on Internet
	Never	Less than once a month	1 to 3 times each month	1 to 3 times each week	Every day		
MSC+ Average	67%	6%	4%	6%	17%	10%	13%
BluePlus	64%	7%	4%	7%	18%	12%	16%
HealthPartners	61%	8%	3%	6%	21%	12%	16%
Medica	64%	7%	5%	8%	17%	8%	12%
UCare	66%	4%	5%	6%	19%	14%	13%
IMC/MHP	69%	6%	7%	7%	11%	12%	12%
PW/SCHA	74% **	4% *	4%	5%	14%	7% *	9% *

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MSHO	Uses Internet...					Would manage eligibility on Internet	Would complete survey on Internet
	Never	Less than once a month	1 to 3 times each month	1 to 3 times each week	Every day		
MSHO Average	74%	4%	3%	5%	13%	8%	9%
BluePlus	77%	5%	2%	4%	11%	6%	7%
HealthPartners	72%	4%	6% **	4%	14%	10%	10%
Medica	69% *	6%	5%	6%	14%	9%	10%
PrimeWest Health	75%	7%	2%	5%	11%	7%	9%
South Country Health Alliance	84% **	2% *	2%	3%	10% *	6%	7%
UCare	68% *	3%	3%	7%	19% **	10%	10%
Itasca Medical Care / Metropolitan Health Plan	74%	3%	2%	6%	16%	12%	13%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

SNBC	Uses Internet...					Would manage eligibility on Internet	Would complete survey on Internet
	Never	Less than once a month	1 to 3 times each month	1 to 3 times each week	Every day		
SNBC Average	36%	7%	8%	13%	35%	25%	30%
Medica	38%	6%	8%	11%	37%	27%	30%
Metropolitan Health Plan	36%	7%	9%	17%	30%	34% **	33%
PrimeWest Health	34%	6%	9%	15%	35%	24%	31%
South Country Health Alliance	37%	7%	8%	10%	38%	20% *	27%
UCare	34%	9%	9%	14%	34%	24%	30%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

Appendix A – Supplemental Questions

Phone Use and DVD player in the home

All enrollees were asked about the type of phone they use and if there is a DVD player in their home. Question texts and response options available and reported are shown first, followed by program and plan results.

Questions in this domain	Response options	Responses reported
<i>Is there a DVD player in the home?</i>	Yes, No	Yes
<i>Do you use a smart phone, iPhone or other similar device that has access to the Internet?</i>	Yes, No	Yes
<i>Do you have a land line (home phone)?</i>	Yes, No	Yes
<i>Is your mobile phone your primary phone?</i>	Yes, No	Yes

F&C-MA	<i>DVD player in the home</i>	<i>Uses a smart phone</i>	<i>Has a land line</i>	<i>Mobile phone is primary phone</i>
F&C-MA Average	88%	67%	47%	71%
BluePlus	91% **	65%	46%	72%
HealthPartners	86%	70%	44%	76%
Itasca Medical Care	89%	59% *	55% **	64% *
Medica	83% *	71%	44%	73%
PrimeWest Health	86%	64%	48%	70%
South Country Health Alliance	91%	66%	49%	71%
UCare	90%	70%	44%	73%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

HH	<i>DVD player in the home</i>	<i>Uses a smart phone</i>	<i>Has a land line</i>	<i>Mobile phone is primary phone</i>
Hennepin Health	73%	56%	31%	81%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MinnesotaCare	<i>DVD player in the home</i>	<i>Uses a smart phone</i>	<i>Has a land line</i>	<i>Mobile phone is primary phone</i>
MinnesotaCare Average	88%	67%	52%	64%
BluePlus	88%	67%	53%	61%
HealthPartners	89%	75% **	48%	69%
Medica	85%	69%	42% *	69%
PrimeWest Health	85%	63%	59% **	59%
UCare	88%	66%	50%	67%
IMC/SCHA	90%	67%	57%	60%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MSC+	<i>DVD player in the home</i>	<i>Uses a smart phone</i>	<i>Has a land line</i>	<i>Mobile phone is primary phone</i>
MSC+ Average	60%	21%	67%	46%
BluePlus	66% **	25%	66%	46%
HealthPartners	68% **	29% **	60% *	52%
Medica	55%	18%	72% **	43%
UCare	57%	26%	54% *	54% **
IMC/MHP	55%	17%	64%	46%
PW/SCHA	56%	14% *	76% **	41% *

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MSHO	<i>DVD player in the home</i>	<i>Uses a smart phone</i>	<i>Has a land line</i>	<i>Mobile phone is primary phone</i>
MSHO Average	60%	16%	75%	39%
BluePlus	60%	14%	79%	37%
HealthPartners	70% **	21% **	68% *	45% **
Medica	60%	18%	79%	35%
PrimeWest Health	56%	12% *	82% **	33% *
South Country Health Alliance	49% *	10% *	73%	40%
UCare	68% **	21% **	69% *	45% **
Itasca Medical Care / Metropolitan Health Plan	61%	18%	75%	37%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

SNBC	<i>DVD player in the home</i>	<i>Uses a smart phone</i>	<i>Has a land line</i>	<i>Mobile phone is primary phone</i>
SNBC Average	80%	49%	52%	62%
Medica	80%	50%	51%	60%
Metropolitan Health Plan	79%	52%	41% *	67%
PrimeWest Health	81%	50%	60% **	58%
South Country Health Alliance	83%	43% *	52%	59%
UCare	79%	50%	52%	64%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

Appendix A – Supplemental Questions

Participation in Health Care Decision-Making

Enrollees in MSC+, MSHO and SNBC who reported having a personal doctor were asked two questions about their involvement in making decisions about their health. Question texts and response options available and reported are shown first, followed by program and plan results.

Questions in this domain	Response options	Responses reported
<i>In the last 6 months, were any decisions made about your health care?</i>	Yes, No	Yes
<i>In the last 6 months, how often were you involved as much as you wanted in these decisions about your health care?</i>	Never, Sometimes, Usually, Always	Usually and Always

MSC+	<i>Decisions made about health care</i>	<i>Involved as much as wanted in decision-making</i>
MSC+ Average	60%	93%
BluePlus	65%	93%
HealthPartners	59%	90%
Medica	65%	94%
UCare	60%	95%
IMC/MHP	61%	90%
PW/SCHA	54% *	95%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MSHO	<i>Decisions made about health care</i>	<i>Involved as much as wanted in decision-making</i>
MSHO Average	55%	93%
BluePlus	55%	95%
HealthPartners	55%	88%
Medica	57%	91%
PrimeWest Health	56%	96%
South Country Health Alliance	52%	96%
UCare	55%	92%
Itasca Medical Care / Metropolitan Health Plan	56%	91%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

SNBC	<i>Decisions made about health care</i>	<i>Involved as much as wanted in decision- making</i>
SNBC Average	58%	89%
Medica	62%	94% **
Metropolitan Health Plan	70% **	84%
PrimeWest Health	57%	90%
South Country Health Alliance	52% *	90%
UCare	53%	88%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

Appendix A – Supplemental Questions

Health Status Changes and Limits to Activities

Enrollees in MSC+, MSHO and SNBC were asked a series of seven questions to measure changes in health status and any limitations that health problems may have created in their lives. Question texts and response options available and reported are shown first, followed by program and plan results.

Questions in this domain	Response options	Responses reported
<i>In general, how would you rate your overall health compared to one year ago?</i>	<i>Much better, Somewhat better, About the same, Somewhat worse, Much worse</i>	<i>Much better and Somewhat better</i>
<i>During the past 4 weeks, how much did physical health problems limit your usual physical activities (such as walking or climbing stairs)?</i>	<i>Not at all, Very little, Somewhat, Quite a lot, Could not do physical activities</i>	<i>Not at all and Very little</i>
<i>How much bodily pain have you had during the past 4 weeks?</i>	<i>None, Very mild, Mild, Moderate, Severe, Very Severe</i>	<i>None, Very Mild, and Mild</i>
<i>During the past 4 weeks, how much did your physical health or emotional problems limit your usual social activities with family or friends?</i>	<i>Not at all, Very little, Somewhat, Quite a lot, Could not do social activities</i>	<i>Not at all and Very little</i>
<i>During the past 4 weeks, how much have you been bothered by emotional problems (feeling anxious, depressed or irritable)?</i>	<i>Not at all, Slightly, Moderately, Quite a lot, Extremely</i>	<i>Not at all and Slightly</i>
<i>During the past 4 weeks, how much did personal or emotional problems keep you from doing your usual daily activities?</i>	<i>Not at all, Very little, Somewhat, Quite a lot, Could not do daily activities</i>	<i>Not at all and Very little</i>

MSC+	Overall health better than one year ago	Physical activities limited not at all or very little by physical health problems	No, very mild or mild bodily pain	Social activities limited not at all or very little by physical or emotional problems	Not at all or slightly bothered by emotional problems	Daily activities limited not at all or very little by personal or emotional problems
MSC+ Average	25%	42%	49%	55%	67%	65%
BluePlus	29%	39%	44%	54%	68%	67%
HealthPartners	27%	50% **	56% **	63% **	72%	73% **
Medica	20% *	34% *	44%	44% *	62% *	57% *
UCare	34% **	49% **	57% **	60%	64%	59% *
IMC/MHP	24%	49%	55%	58%	70%	69%
PW/SCHA	22% *	39%	46%	57%	70%	68%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MSHO	<i>Overall health better than one year ago</i>	<i>Physical activities limited not at all or very little by physical health problems</i>	<i>No, very mild or mild bodily pain</i>	<i>Social activities limited not at all or very little by physical or emotional problems</i>	<i>Not at all or slightly bothered by emotional problems</i>	<i>Daily activities limited not at all or very little by personal or emotional problems</i>
MSHO Average	21%	37%	46%	53%	68%	66%
BluePlus	20%	31% *	43%	52%	64%	65%
HealthPartners	24%	44% **	49%	56%	64%	66%
Medica	23%	33%	38% *	48%	67%	62%
PrimeWest Health	17%	38%	49%	52%	70%	67%
South Country Health Alliance	20%	35%	50%	55%	70%	66%
UCare	24%	42%	48%	56%	69%	70%
Itasca Medical Care / Metropolitan Health Plan	21%	40%	43%	56%	72%	66%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

SNBC	<i>Overall health better than one year ago</i>	<i>Physical activities limited not at all or very little by physical health problems</i>	<i>No, very mild or mild bodily pain</i>	<i>Social activities limited not at all or very little by physical or emotional problems</i>	<i>Not at all or slightly bothered by emotional problems</i>	<i>Daily activities limited not at all or very little by personal or emotional problems</i>
SNBC Average	27%	38%	43%	42%	48%	49%
Medica	31%	34%	36% *	33% *	46%	44%
Metropolitan Health Plan	37% **	35%	44%	38%	40% *	41% *
PrimeWest Health	27%	37%	44%	42%	51%	50%
South Country Health Alliance	21% *	44% **	53% **	50% **	55% **	56% **
UCare	24%	38%	39%	44%	46%	51%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

Appendix A – Supplemental Questions Flu Shots and Pneumonia Vaccination

All enrollees were asked a question to determine if they had received a flu shot. Enrollees in MSC+, MSHO and SNBC were asked two additional questions to determine where they had received flu shots and if they had received a pneumonia vaccination. Question texts and response options available and reported are shown first, followed by program and plan results.

Questions in this domain	Asked of enrollees in	Response options	Responses reported
<i>Have you had either a flu shot or flu spray in the nose since July 1, 2014?</i>	<i>All programs</i>	<i>Yes, No, Don't Know</i>	<i>Yes</i>
<i>Did you get a flu shot at your doctor's office or clinic or did you get it from another place like a store (for example, Cub Foods or Wal-Mart) or senior center?</i>	<i>MSC+ MSHO SNBC</i>	<i>Doctor's office or clinic; Another place: store or senior center</i>	<i>All</i>
<i>Have you ever had a pneumonia vaccination?</i>	<i>MSC+ MSHO SNBC</i>	<i>Yes, No, Don't Know</i>	<i>Yes</i>

F&C-MA	<i>Had flu shot</i>
F&C-MA Average	33%
BluePlus	30%
HealthPartners	39% **
Itasca Medical Care	26% *
Medica	32%
PrimeWest Health	36%
South Country Health Alliance	33%
UCare	39% **

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

HH	<i>Had flu shot</i>
Hennepin Health	43%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MinnesotaCare	<i>Had flu shot</i>
MinnesotaCare Average	35%
BluePlus	34%
HealthPartners	39%
Medica	38%
PrimeWest Health	29%
UCare	35%
IMC/SCHA	33%

**** / *** indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MSC+	<i>Had flu shot</i>	<i>Got flu shot at:</i>		<i>Had pneumonia vaccination</i>
		<i>Doctor's office or clinic</i>	<i>Another place</i>	
MSC+ Average	62%	72%	28%	75%
BluePlus	63%	61% *	39% **	78%
HealthPartners	62%	79%	21%	71%
Medica	62%	77%	23%	76%
UCare	64%	79%	21%	68%
IMC/MHP	63%	71%	29%	75%
PW/SCHA	61%	71%	29%	77%

**** / *** indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MSHO	<i>Had flu shot</i>	<i>Got flu shot at:</i>		<i>Had pneumonia vaccination</i>
		<i>Doctor's office or clinic</i>	<i>Another place</i>	
MSHO Average	70%	71%	29%	82%
BluePlus	71%	72%	28%	81%
HealthPartners	74%	77% **	23% *	81%
Medica	68%	72%	28%	81%
PrimeWest Health	67%	71%	29%	82%
South Country Health Alliance	71%	59% *	41% **	87% **
UCare	70%	64%	36%	77%
Itasca Medical Care / Metropolitan Health Plan	69%	81% **	19% *	86%

**** / *** indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

SNBC	Had flu shot	Got flu shot at:		Had pneumonia vaccination
		Doctor's office or clinic	Another place	
SNBC Average	54%	75%	25%	54%
Medica	57%	75%	25%	55%
Metropolitan Health Plan	55%	79%	21%	50%
PrimeWest Health	51%	78%	22%	50%
South Country Health Alliance	54%	73%	27%	61% **
UCare	54%	68%	32%	50%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

Appendix A – Supplemental Questions

Medical Assistance with Smoking and Tobacco Use Cessation

Enrollees in all programs were asked three questions to assess medical assistance with smoking and tobacco use cessation. Question text and response options are presented first, followed by program and plan results.

Questions in this domain	Response options	Responses reported
<i>In the last 6 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan?</i>	<i>Never, Sometimes, Usually, Always</i>	<i>Sometimes, Usually, Always</i>
<i>In the last 6 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication.</i>	<i>Never, Sometimes, Usually, Always</i>	<i>Sometimes, Usually, Always</i>
<i>In the last 6 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program.</i>	<i>Never, Sometimes, Usually, Always</i>	<i>Sometimes, Usually, Always</i>

F&C-MA	Advised to quit	Cessation medication recommended or discussed	Cessation strategies discussed or provided
F&C-MA Average	74%	50%	44%
BluePlus	74%	49%	49%
HealthPartners	67%	38% *	41%
Itasca Medical Care	70%	52%	41%
Medica	75%	50%	40%
PrimeWest Health	84% **	56%	52%
South Country Health Alliance	73%	50%	46%
UCare	72%	49%	38%

** / * indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

HH	<i>Advised to quit</i>	<i>Cessation medication recommended or discussed</i>	<i>Cessation strategies discussed or provided</i>
Hennepin Health	73%	59%	51%

**** / *** indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MinnesotaCare	<i>Advised to quit</i>	<i>Cessation medication recommended or discussed</i>	<i>Cessation strategies discussed or provided</i>
MinnesotaCare Average	69%	52%	45%
BluePlus	77%	60%	47%
HealthPartners	71%	56%	46%
Medica	71%	44%	54%
PrimeWest Health	58%	41%	42%
UCare	74%	54%	43%
IMC/SCHA	63%	54%	40%

**** / *** indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MSC+	<i>Advised to quit</i>	<i>Cessation medication recommended or discussed</i>	<i>Cessation strategies discussed or provided</i>
MSC+ Average	79%	61%	47%
BluePlus	86%	60%	38%
HealthPartners	83%	62%	55%
Medica	89%	63%	64%
UCare	69%	50%	45%
IMC/MHP	68%	55%	40%
PW/SCHA	73%	67%	44%

**** / *** indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

MSHO	<i>Advised to quit</i>	<i>Cessation medication recommended or discussed</i>	<i>Cessation strategies discussed or provided</i>
MSHO Average	82%	64%	45%
BluePlus	88%	70%	49%
HealthPartners	76%	64%	39%
Medica	87%	68%	48%
PrimeWest Health	85%	65%	51%
South Country Health Alliance	77%	55%	33%
UCare	76%	57%	39%
Itasca Medical Care / Metropolitan Health Plan	86%	66%	51%

**** / *** indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

SNBC	<i>Advised to quit</i>	<i>Cessation medication recommended or discussed</i>	<i>Cessation strategies discussed or provided</i>
SNBC Average	81%	61%	53%
Medica	83%	63%	61%
Metropolitan Health Plan	86%	70% **	62% **
PrimeWest Health	76%	56%	48%
South Country Health Alliance	78%	56%	43% *
UCare	82%	61%	54%

**** / *** indicates a rating significantly higher/lower than the program average
(see Appendix B: Technical Notes: Statistical Significance)

Appendix B: Technical Notes

MC MHCP. Managed Care Minnesota Health Care Programs (MC MHCP) are publically funded programs, which provide benefits through managed care organizations for more than 632,000 enrollees who are low income, aged or disabled. Over half of the individuals who qualify for MC MHCP are in the Families and Children Medical Assistance Program. A smaller segment of the population are 65 and over, enrolled in Minnesota Senior Health Options (MSHO) a program for seniors with Medicare Parts A, B, and D or Minnesota Senior Care Plus (MSC+). The remainder of the population is under age 64, certified disabled are enrolled in the Special Needs Basic Care (SNBC) Program.

Families and Children Medical Assistance (F&C-MA) formerly Prepaid Medical Assistance Plan or PMAP. F&C-MA is a state-administered managed care program that purchases health care services on a prepaid capitated basis from licensed managed care organizations (MCOs) and county-based purchasers (CBPs). The Families and Children MA Program provides health care services to low-income people who are blind or disabled, to children in families with low incomes, and children who are needy. Adults (except pregnant women) must meet specific income and asset requirements.

Hennepin Health. Hennepin County provides health and human services to more than 200,000 residents via its cooperative network, which includes Hennepin County Medical Center, NorthPoint Health and Wellness Center, Metropolitan Health Plan, and the Human Services and Public Health Department. Hennepin County's integrated health care delivery network (Hennepin Health) is designed to serve the unique needs of one of the most challenging and costly segments of the county's safety net population. By integrating medical, behavioral health, and human services in a patient-centered model of care, the project seeks to improve health outcomes dramatically and lower the total cost of providing care and services to this population.

The project went live January 1, 2012 and by 2013 there were 6,200 individuals enrolled in the program. The initial target population is 21 to 64 year-old adults, with no dependent children in the home, living in Hennepin County, with incomes at or below 75% of the Federal Poverty Guidelines who qualify for Medical Assistance (MA). This population often receives minimal preventive care, is at high risk for acute care needs, and has poor health outcomes and health status.

MinnesotaCare. MinnesotaCare is a state-funded health care program for working families and people who do not have access to affordable health insurance and meet certain income, asset and residency requirements. MinnesotaCare offers a benefit package of services through prepaid MCOs. Most enrollees in MinnesotaCare pay a premium, which is the monthly amount the enrollees must pay to continue health coverage. Premiums are determined on a sliding-fee scale based on family size and income.

Minnesota Senior Care Plus (MSC+). MSC+ is a mandatory managed care program for eligible persons age 65 and older, which provides most Medicaid State Plan services (as permitted under the 1915(b) waiver); Elderly Waiver (EW) services (as permitted under a 1915(c) waiver); and the first 180 days of care in a nursing facility, coverage then reverts to fee-for-service and is paid for by the state instead of the managed care organization. The program does not include Medicare services and enrollees must receive their Medicare Part D drugs by enrolling in a separate Medicare prescription drug plan. The MCO contracts with the state to deliver health care services under a capitated payment arrangement. In 2009, the MSC+ program expanded into all counties in the state and may include non-dual eligible enrollees.

Minnesota Senior Health Options (MSHO). MSHO is a voluntary managed care program for eligible persons, age 65 and older, operating under 1915(a) waiver. The program provides Medicaid State Plan services, and all Medicare services under parts A, B and D; Elderly Waiver (EW) services (as permitted under a 1915(c) waiver); and the first 180 days of care in a nursing facility, after which time coverage reverts to fee-for-service and is paid for by the state instead of the MCO. The managed care organization contracts with the state to deliver health care services under a capitated payment arrangement. As of Jan 1, 2010, enrollees must have both Medicare Parts A and B in addition to Medical Assistance (dual eligibility) to enroll in MSHO.

Special Needs Basic Care (SNBC). SNBC is a voluntary managed care program for people 18-64 years old, certified disabled and eligible for Medical Assistance. The program incorporates Medicare Parts A, B and D for enrollees who have that coverage. A care coordinator or navigator is assigned to each enrollee to help access health care and other support services. DHS contracts with five Medicare Advantage Special Needs Plans (SNPs) to provide SNBC. SNBC offers all medically necessary Medicaid State Plan Services with the exception of Home and Community Based Service (HCBS) waivers, Personal Care Attendant (PCA) and Private Duty Nursing (PDN). HCBS waiver services, PCA, and PDN services are paid by the MA fee-for-service program. If an enrollee is Medicare eligible, the SNBC plan covers all Medicare services, including medications covered by the Medicare prescription drug program (Part D), and any alternative services the health plan may choose to offer. The SNBC MCO pays for the first 100 days of nursing facility care for community enrollees who enter a nursing facility after enrollment. In calendar year 2014 three MCOs did not participate in the SNBC program, Blue Plus, HealthPartners and Itasca Medical Care.

Response Rate Calculation In its simplest form, the response rate is the total number of completed questionnaires divided by the total number of respondents selected.

Completed Questionnaire A questionnaire is considered complete if responders did not say "NO" to the question: "Our records show that you are now in (plan name), is that right?" and if they provided a valid response to at least one question.

Statistical Significance Difference-of-means statistical tests for significant differences were used in this report. Small differences between numbers should be ignored when comparing the ratings and percentages in the tables and graphs. These small differences may reflect sampling variation rather than real differences. In some instances, a difference between two numbers may be indicated as significant, but, in other instances, an equivalent difference is not indicated as significant. The ability to detect significant differences is related to the magnitude of the difference but also to the number of cases available for statistical analysis. Because the number of completed cases varied among the plans, equivalent differences could have varying statistical significance.

Readers should also note that results have been rounded to the nearest whole number. Thus, results between 0 and .5 appear as 0, but may still be considered statistically significant.

The findings in this report are subject to some limitations in survey design and analysis. These limitations should be considered carefully when interpreting or generalizing the findings presented. These limitations include:

Adjustments to the results. Before conducting significance tests, the data were adjusted for differences in enrollees' age and self-reported health status. Data were not adjusted, however, for enrollee variations that were not measured in the survey, such as income, employment status, specific health conditions, and beliefs or expectations.

Single point in time. The results of this survey represent a snapshot of health plans at a single point in time. These results may not reflect stable patterns of consumer ratings over time. Additional surveys over time using the same questions and methods will be needed to establish trends.

Subjective measurements only. The questions in this survey reflect the subjective evaluation and opinions of the respondents. The relationship between these responses and other measures of health plan performance and service quality have not been established.

Causal inference. Although this analysis examines whether enrollees of various health plans report differential satisfaction with various aspects of their plan, these differences cannot be attributed totally to the plan. People choose to become members of specific health plans for reasons that cannot be fully addressed in this analysis (such as income, prior medical experience, anticipated needs, and expectations).

Sampling error and confidence intervals. The scores presented in this report are based on a sample of each plan's membership, as opposed to a census of all members of the plan. Any time a sample is used, there is an associated sampling error for each estimate (each rating, each composite score, etc), which represents the difference between the true value of the rate and the value estimated from a sample. In this survey, the sampling error varies from about 4% to 7%. There's a range because each question was answered by somewhat different numbers of people, and the range of their responses differs from question to question. Smaller sampling errors are associated with a greater numbers of cases for analysis as well as a narrower range of responses to a particular question.

The confidence interval (or confidence level) is the range, defined by an upper and a lower limit, in which the true value lies, with a specified probability. All of the scores calculated in this report used a confidence interval of 95%, which is the interval most commonly used. So, for this survey, we can say that 19 times out of 20, the true value for each score calculated from the survey lies within the range defined by the score itself plus or minus the margin of error, which can be calculated for each score and varies no more than 4% to 7%.

Averages for programs. Programs such as the Families and Children - MA (F&C-MA) have several participating plans. This report shows results for each plan separately and also shows an average for the entire program. To calculate the program average, the responses from enrollees in all plans within the program were considered together.

Summary rates. Summary rates are single statistics calculated for a question according to CAHPS® specifications. Summary rates represent the percentage of respondents who choose the most positive response option ("always", or a "9" or "10").

Valid surveys and unanswered questions. In this survey, DHS adopted NCQA 5.0H guidelines for determining a completed questionnaire. According to these guidelines, questionnaires were considered complete if respondents did not say 'No' to Question 1 ("Our records show that you are now in (plan name). Is that right?") and if they provided a valid response to at least one question. While the majority of respondents who started the questionnaire provided responses to most items, some did not. Missing answers were not included in the results.

Survey Protocols - CAHPS® Consortium vs. NCQA HEDIS. DHS has chosen to follow the CAHPS® Consortium protocol which is not as narrowly defined as the NCQA HEDIS protocol. The NCQA HEDIS protocol is needed to standardize data collection methods primarily for comparison between commercial health plan product lines as an element for NCQA Accreditation. The CAHPS® Consortium protocol incorporates more flexibility and is more academically focused providing a more illuminating analysis that allows for quality improvement activities. For example, DHS samples across health plans in consideration of historical response rates, and with a focus on creating final analyzable cell conclusions which is not allowed in the NCQA HEDIS protocol. It is also possible to send surveys to viable addresses only. NCQA HEDIS protocol requires survey packets to be mailed to all sampled members including those with an incomplete address.

The analysis of survey responses is also influenced by the selection of a protocol. The reporting of "9 and 10" ratings as a positive experience and not including ratings of "8" (8, 9, and 10 NCQA

HEDIS protocol), is based on the premise that ratings of "8" is just a polite way of saying the respondent did not like the experience. The opposing perspective believes reporting "8, 9, 10" ratings reflect positive experiences, since many people may never consider scoring a "10" and a rating of "8" as very good. Either method is considered appropriate.

Appendix C: Composites and Related Questions

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

Getting needed care. The survey asked people to report how often they:

1. *Found it easy to get appointments with specialists*
2. *Got care, tests, or treatment they thought they needed*

Getting care without long waits. The survey asked people to report how often they:

1. *Got treated as soon as they wanted when sick or injured*
2. *Got an appointment as soon as they wanted for regular or routine care*

How well doctors communicate. The survey asked people to report 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*
4. *Spent enough time with them*

Health plan customer service. The survey asked people to report how often:

1. *Their health plan's customer service gave needed information or help*
2. *They were treated with courtesy and respect by their health plan's customer service*

Shared decision making. The survey asked people to report how often doctors or other health providers:

1. *Talked about reasons you might want to take a prescription medicine*
2. *Talked about reasons you might NOT want to take a prescription medicine*
3. *Asked what was best for you when starting or stopping a prescription medicine*

Appendix D: Summary of Sampling Quantities and Response Rates

The study had a goal of receiving at least 300 returned questionnaires for each health plan or group in each of the six program populations; 32 sample groups in all.

To achieve this goal, the sample was designed to select an appropriate number of enrollees from each of the 32 sample groups. An oversample design was used for the F&C-MA and Hennepin Health programs to address a multi-year pattern where the target number of completes was not reached. In addition, the sample design took into account a multi-year pattern of better than average response rates for the MSHO and MSC+ populations. All seven of the MSHO groups and the MSC+ Blue Plus group used a smaller than typical sample size allowing for the F&C-MA / Hennepin Health groups to use a larger than typical sample size. When individual health plans did not have an adequate number of enrollees to warrant an individual sample, health plans were combined and treated as a single reporting unit. For single plans with insufficient enrollees to achieve the respective target sample, all eligible enrollees were selected. A total of 27,938 enrollees across all programs were selected to participate in the survey.

Questionnaires were mailed to all selected enrollees. Enrollees who did not return a mail questionnaire received telephone calls and were offered the opportunity to complete the questionnaire over the telephone. During the course of the survey, some sampled enrollees were determined to be ineligible. Some were no longer enrolled; some were deceased; others had language problems or incapacities that prevented them from completing the interview.

The study response rate is the percentage of those who completed an interview among all those who were eligible to participate. Completed interviews were obtained from 8,818 enrollees. The study response rate was 33.7%.

Key to Managed Care Organizations:

- Blue Plus (Blue Plus)
- HealthPartners (HealthPartners)
- Itasca Medical Care (IMCare)
- Medica Health Plans (Medica)
- Metropolitan Health Plan (MHP)
- PrimeWest Health (PrimeWest)
- South Country Health Alliance (SCHA)
- UCare (UCare)

Population	Quantity mailed	Eligible for analysis	Response rate	Cases for analysis
F&C-MA				
BluePlus	1400	1382	27%	369
HealthPartners	1170	1146	22%	254
Itasca Medical Care	950	934	28%	260
Medica	1370	1345	25%	337
PrimeWest Health	955	943	28%	264
South Country Health Alliance	975	959	29%	278
UCare	1155	1116	24%	272
HH				
Hennepin Health	1470	1447	16%	225
MinnesotaCare				
BluePlus	900	894	38%	336
HealthPartners	900	887	24%	217
Medica	900	884	25%	224
PrimeWest Health	698	689	33%	228
UCare	900	881	31%	276
IMC/SCHA	802	792	34%	268
MSC+				
BluePlus	790	704	47%	331
HealthPartners	824	687	33%	229
Medica	900	712	45%	318
UCare	900	706	29%	205
IMC/MHP	474	401	34%	136
PW/SCHA	840	813	48%	391
MSHO				
BluePlus	540	490	58%	285
HealthPartners	715	608	48%	293
Medica	645	557	56%	311
PrimeWest Health	485	465	60%	281
South Country Health Alliance	515	479	58%	280
UCare	660	547	49%	266
Itasca Medical Care / Metropolitan Health Plan	605	498	40%	197
SNBC				
Medica	900	842	36%	301
Metropolitan Health Plan	900	842	30%	249
PrimeWest Health	900	866	38%	329
South Country Health Alliance	900	864	38%	330
UCare	900	824	34%	278

Appendix E: Respondent Characteristics

Several questions in the survey ask about respondent characteristics. These questions include gender, age, health status, educational level, and race and ethnicity. For each program, the percent of respondents within each of these categories is shown in the table below:

Respondent Characteristics		F&C-MA	HH	MinnesotaCare	MSC+	MSHO	SNBC
Gender	<i>Male</i>	40%	65%	37%	32%	27%	46%
	<i>Female</i>	60%	35%	63%	68%	73%	54%
Age	<i>18 to 24</i>	11%	4%	4%	0%	0%	4%
	<i>25 to 34</i>	22%	19%	16%	0%	0%	12%
	<i>35 to 44</i>	16%	17%	13%	0%	0%	12%
	<i>45 to 54</i>	22%	27%	21%	0%	0%	31%
	<i>55 to 64</i>	27%	32%	44%	1%	0%	39%
	<i>65 to 74</i>	1%	0%	1%	61%	43%	2%
	<i>75 or older</i>	0%	0%	0%	37%	56%	0%
Education Level	<i>HS or less</i>	43%	40%	34%	67%	72%	67%
	<i>Some college</i>	41%	32%	43%	20%	19%	28%
	<i>College graduate</i>	15%	29%	23%	13%	9%	6%
Self-Reported Health Status	<i>Excellent/Very Good</i>	46%	44%	54%	22%	20%	22%
	<i>Good</i>	36%	33%	36%	36%	37%	34%
	<i>Fair/Poor</i>	18%	24%	10%	42%	43%	45%
Hispanic or Latino	<i>Yes</i>	4%	6%	3%	4%	3%	5%
	<i>No</i>	96%	94%	97%	96%	97%	95%
Race	<i>White</i>	78%	48%	85%	68%	77%	69%
	<i>Black/African American</i>	6%	31%	4%	12%	7%	15%
	<i>Asian</i>	5%	5%	4%	9%	10%	3%
	<i>Pacific Islander</i>	1%	1%	0%	0%	0%	1%
	<i>American Indian</i>	4%	6%	1%	4%	2%	8%
	<i>Other</i>	4%	6%	3%	5%	2%	5%