

THE 2002 MEDICAID MANAGED CARE CUSTOMER SATISFACTION SURVEY

Detailed Findings

Prepared for: Ohio Department of Job and Family Services on
behalf of the Delmarva Foundation for Medical Care, Inc.

Prepared by: WB&A Market Research

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Background, Purpose and Research Approach

The Ohio Department of Job and Family Services (ODJFS) obtains feedback from Medicaid consumers about the services they receive from Managed Care Plans (MCPs) in Ohio. In 1998 and 2000, ODJFS conducted Customer Satisfaction surveys to determine consumers' ratings of and experiences with the medical care they receive. In 2001 and 2002, the Delmarva Foundation for Medical Care, Inc., commissioned WB&A Market Research (WB&A) to conduct the Medicaid managed care consumer satisfaction survey on behalf of ODJFS. The primary purpose of these studies was to assess perceptions of access to care and satisfaction with care received from the individual MCPs.

Members from six MCPs participated in the 2002 survey:

- CareSource, previously Dayton Area Health Plan;
- Family Health Plan (FHP);
- Paramount Care, Inc. (Paramount);
- Peoples Health Plan;
- QualChoice Health Plan (QualChoice); and
- SummaCare Health Plan (SummaCare).

Background, Purpose and Research Approach (cont'd)

A total of 1,523 adult and 1,916 child surveys (1,462 0-12 year olds; 454 13-17 year olds) were completed between November 20, 2002 and January 23, 2003. Specifically, a telephone (CATI) methodology was adhered to as follows:

- ODJFS provided a list of all eligible state Medicaid managed care members as of September 30, 2002. To qualify, members had to be continuously enrolled in the same MCP for 5 of the last 6 months. Adult members were classified as those 18 years of age and older as of the last day of the measurement year, while child members were defined as those 17 years of age and younger. (Note: In 2001, the CAHPS® 2.0H sampling protocol was used which excludes child members aged 13-17 from the survey sample. In 2002, although child members aged 13-17 years were included in the survey sample, they were excluded from the results and WB&A followed the CAHPS 2.0H protocol. Therefore, children aged 12 and younger were presented in the child analysis. In order to make comparisons between 2001 and 2002 surveys, only those results of children under 13 are presented in this report.)
- A sampling frame of 5,730 adult members and 6,971 child members was produced. For more information regarding the sampling frame, please see the Implementation Methodology Report.
- An advance letter was sent to the entire sampling frame with "Return Service Requested" and WB&A's toll-free number included. Those for whom WB&A did not have a correct phone number were asked to call WB&A's toll-free number to give their correct number. One week after the mailing of the letter, respondents were called to complete the survey. Up to fifteen (15) call attempts were made between the middle of November 2002 and the middle of January 2003 to each member in the sampling frame.
- The survey instrument was the CAHPS® 2.0H Medicaid managed care consumer satisfaction survey. The Special Health Care Needs (SHCN) screener was included for adults and children as well as the chronic conditions module for children. In addition, several recommended and supplemental questions were added under the direction of ODJFS. Separate surveys were conducted for adults and children. The child surveys were conducted by proxy, meaning that the sampled child's parent or caretaker who knows the most about their health care could answer the survey.
- The average telephone interview was approximately 20 minutes in length.

According to the various survey protocols for determining survey response rates, the total response rates are as follows:

Raw response rates:	Total: 26%	Adult: 27%	Child: 26%
CAHPS® -adjusted response rates:	Total: 27%	Adult: 27%	Child: 27%
NCQA-adjusted response rates:	Total: 42%	Adult: 45%	Child: 39%

Background, Purpose and Research Approach (cont'd)

For more information regarding the background and research approach, please see the Implementation Methodology Report.

The findings cover several domains: characteristics of respondents, overall ratings, composite scores, satisfaction with health plan, satisfaction with health care providers, access to care, chronic conditions measurement set, and utilization of services.

What follows are the results of the survey. (Please see the Appendix for examples of the surveys.)

Notes:

1. Survey results were tabulated and weighted to be representative of the total eligible number of adult and child Medicaid recipients per plan per county, that is, adult members 18 years of age and older and child members 12 years of age and younger who had been continuously enrolled in the same MCP for five of the last six months. (Please see the Implementation Methodology Report for more detailed information.)
2. Peoples Health Plan was not included in the results for 2002. In addition, child members aged 13-17 were not included in the results for 2002.
3. Case-mix adjustments for age and self-reported health status were conducted using the CAHPS Reporting Kit. Case-mix adjusted results were virtually no different from the unadjusted results and are, therefore, provided as a supplemental analysis to this report.
4. Percentages do not always add up to 100%. This may be due to the fact that not all respondents answered every question or, in some cases, it may be due to rounding.
5. Statistically significant differences between the program average and individual MCPs for 2002 were determined from the F-tests generated by Delmarva. In addition, statistically significant differences in the program average and the individual MCPs between 2001 and 2002 were determined from T-tests generated by WB&A.
6. Any differences between high and low utilizers of health care are noted in the text. In this report, *high utilizers* of health care are defined as those who have visited their personal doctor or nurse three or more times in the past six months, while *low utilizers* are defined as those who have visited their personal doctor or nurse less than three times in the past six months.
7. The adult survey consisted of 61 CAHPS® 2.0H core questions, 17 supplemental questions, and 14 Adult with Special Health Care Needs (ASHCN) questions, while the child survey consisted of 102 CAHPS® 2.0H core questions, 17 supplemental questions, and 14 Children with Special Health Care Needs (CSHCN) questions.
8. Proxy responses were not permitted for the adult surveys; the sampled member must have completed his or her own survey. For the child survey, any parent or caretaker who was familiar with the sampled child's health care could have completed the survey.

How to Read or Interpret the Results of This Report

This report includes the results of CAHPS® 2.0H survey questions about members' experiences with their health plan and medical care during the last six months. Results are shown based on the type of question asked and/or the content of the question:

Results from yes-no questions which asked members whether they had a particular experience in the previous six months;

Results from questions based on "how often" members had certain experiences using the scale of always, usually, sometimes or never, or "how much of a problem" using the scale of big, small or not a problem;

Results from Composite Scores were derived by combining the results for several questions that asked "how often" members had certain experiences using the scale of always, usually, sometimes or never or, "how much of a problem" using the scale of big, small or not a problem. The Composite Scores measure main issues of concern (e.g., *Health Plan Customer Service, Courteous and Helpful Office Staff, Doctors Who Communicate, Getting Needed Care, and Getting Care Without Long Waits*).

Results from survey questions which asked members to give their overall rating on a 0 - 10 scale, where a "0" means the worst possible and a "10" means the best possible.

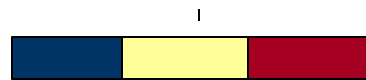
Notes:

What do the bar graphs mean?

The least positive answers (worse survey results) are always at the left end of the bar in blue.

In-between answers are always yellow.

The positive answers (better survey results) are always at the right end of the bar in red.



Look for differences in the size of the blue and red sections.

In the bar graphs, plans that did better than other plans have bigger red sections and smaller blue sections; and plans that did worse than other plans have smaller red sections and bigger blue sections.

When a "1" or "<1" is presented to the left of the bar graph, it means that "1%" or "<1%" gave the corresponding answer in the legend.

The data from this research were statistically analyzed by a number of variables. Statistically significant differences are noted on all bar charts using the following indicators:

Arrows (↑, ↓) indicate that the MCP is performing statistically better or worse in 2002 than it did in the 2001 survey at the 95% confidence level.

An asterisk (*) at the end of the chart title indicates statistically significant differences between at least one MCP and the program average for 2002.

Only statistically significant findings are discussed in the text of the report.

CHARACTERISTICS OF MEMBERS

Characteristics of Members

Adult members and parents or the guardians of child members who participated in the survey had the following characteristics:

- Average age was 33 years;
- 93% female;
- 62% reported having a high school diploma or less education, 38% indicated having at least some college education; and
- English was the language most often spoken at home (97%).

Exhibit 1-1

This table shows the demographics of the *adult and parent or guardian of child members excluding 13-17 year olds* surveyed (In percentages):

	Program Average		CareSource		FHP		Paramount		QualChoice		SummaCare	
	<u>2001</u>	<u>2002</u>	<u>2001</u>	<u>2002</u>	<u>2001</u>	<u>2002</u>	<u>2001</u>	<u>2002</u>	<u>2001</u>	<u>2002</u>	<u>2001</u>	<u>2002</u>
Age												
Mean (# of years)	32.9	32.9	34.4	32.9 ↓	33.0	32.6	31.8	31.5	32.7	33.7	31.8	33.0
Median (# of years)	31.5	31.4	32.5	31.5	31.4	31.6	30.5	29.9	31.2	31.9	30.7	31.5
Gender												
Male	6	7	7	6	7	7	8	7	5	8	5	8
Female	94	93	93	94	93	93	92	93	95	92	95	92
Education												
High school or less	64	62	67	65	66	66	65	56 ↓	59	55	61	59
Some college or more	35	38	33	35	33	34	34	44 ↑	41	45	38	41
Language Mainly Spoken at Home												
English	97	97	96	96	98	100	99	98	98	98	98	99
Spanish	1	1	<1	2 ↑	1	<1	1	1	<1	<1	-	<1
Other	2	1	4	1 ↓	1	<1	1	1	2	<1	2	1

Base = Those answering (AQ56-58,61/C101-104)

Characteristics of Members (cont'd)

Adult and child members (excluding 13-17 year olds) who participated in the survey had the following characteristics:

- 55% African-American, 44% Caucasian; and
- 64% reported being in excellent or very good health, 24% in good health, and 12% in fair or poor health.

Exhibit 1-2

This table shows the characteristics of the *adult and child members excluding 13-17 year olds* surveyed (In percentages):

	Program Average		CareSource		FHP		Paramount		QualChoice		SummaCare	
	2001	2002	2001	2002	2001	2002	2001	2002	2001	2002	2001	2002
Overall Health Status												
Excellent/Very Good	67	64 ↓	69	65 ↓	65	58	68	66	66	61	65	60
Good	23	24	21	23	24	26	23	22	23	26	25	29
Fair/Poor	10	12 ↑	10	12	11	16 ↑	10	12	10	13	10	11
Ethnic Background¹*												
Black/African-American	58	55	57	55	51	48	43	44	78	76	41	37
White/Caucasian	41	44 ↑	43	44	48	50	55	50	20	23	61	65
Hispanic/Latino	6	6	4	7 ↑	12	10	13	11	4	3	3	3
Other	3	3	4	3	4	3	4	5	2	3	3	3

Base = Those able to give a rating for their health status (AQ51,59,60/CQ91,99,100)

¹Base = Those answering/Multiple Responses Accepted

*There were statistically significant differences between at least one MCP and the overall average for 2002.

Characteristics of Members (cont'd)

Adult members who participated in the survey had the following characteristics:

- 50% have smoked at least 100 cigarettes in their lifetime;
 - 61% smoke every day, 20% smoke some days, 19% no longer smoke;
 - 83% of those who no longer smoke quit smoking more than six months ago; and
 - 34% of those who smoke every day or some days or had quit within the last six months had not been advised to quit smoking by a doctor or other health provider. On the other hand, 66% had been advised to quit by their doctor or other health provider during one or more visits.
- 43% currently need or take prescription medicine;
- 25% need or use medical care, mental health, or other health services on a regular basis;
- 10% have difficulty doing, or need assistance to do, day-to-day activities;
- 9% need or get special therapy, such as physical, occupational, speech, or respiratory therapy; and
- 8% need or get treatment or counseling for some kind of mental health, substance abuse, or emotional problem.
- 36% qualified as Adults with Special Health Care Needs (These adult members could have qualified in more than one of the following categories);
 - 32% qualified on prescription medicine use;
 - 18% qualified on service use;
 - 8% qualified on functional limitations;
 - 7% qualified on use of special therapies; and
 - 7% qualified on use of mental health services.

The following pages detail the characteristics of adult members participating in the survey.

Characteristics of Members (cont'd)

Exhibit 1-3

This table shows the health status characteristics of the *adult members* surveyed (In percentages):

	Program Average		CareSource		FHP		Paramount		QualChoice		SummaCare	
	2001	2002	2001	2002	2001	2002	2001	2002	2001	2002	2001	2002
Smoked 100 Cigarettes in Lifetime*												
Yes	48	50	48	54 ↑	51	53	48	44	38	37	57	56
No	52	49	51	46	48	46	52	54	61	61	42	43
Don't know	1	1	1	<1 ↓	1	1	<1	1	1	2	2	1
Currently Smoke ¹												
Every day	63	61	65	62	64	59	62	55	60	51	65	68
Some days	18	20	18	21	18	25	18	15	23	22	13	14
Not at all	18	19	18	17	19	16	20	30	17	27	22	18
Don't know	<1	<1	<1	1	-	-	<1	<1	1	-	-	-
How Long Since Quit Smoking ²												
6 months or less	20	17	21	14	13	36	15	21	14	27	28	-
More than 6 months	77	83	78	86	87	64	80	79	86	73	72	100
Don't know	2	-	1	-	-	-	5	-	-	-	-	-
# of Visits Advised to Quit Smoking ³												
None	37	34	40	34	34	31	32	29	41	38	38	28
1 visit	15	22 ↑	13	19	19	15	19	28	9	26 ↑	16	30 ↑
2 to 4 visits	27	27	26	30	28	33	27	27	28	15	22	21
5 to 9 visits	8	9	8	8	6	7	7	12	6	12	11	8
10 or more visits	13	9	13	8	12	14	15	5 ↓	16	9	14	12

Base = Those answering (AQ52-55)

¹Base = Those who have smoked at least 100 cigarettes in their lifetime and answering

²Base = Those who have smoked at least 100 cigarettes in their lifetime and currently do not smoke at all and answering

³Base = Those who currently smoke every day or some days or have quit smoking within the past 6 months and answering

*There were statistically significant differences between at least one MCP and the overall average for 2002.

Characteristics of Members (cont'd)

Exhibit 1-4

This table shows the characteristics of the *adult members* surveyed (In percentages):

	Program Average	CareSource	FHP	Paramount	QualChoice	SummaCare
	<u>2002</u>	<u>2002</u>	<u>2002</u>	<u>2002</u>	<u>2002</u>	<u>2002</u>
Prescription Medicine Use (% Yes)						
Currently needs or takes prescription medicine	43	40	49	44	43	52
Because of any medical, mental health or other health conditions ¹	88	88	87	89	91	88
Is a condition that lasted or is expected to last for at least 12 months ²	91	93	89	88	87	92
Service Use (% Yes)						
Needs or uses medical care, mental health or other health services on a regular basis	25	23	27	27	24	28
Because of any medical, mental health or other health conditions ³	82	79	79	85	88	85
Is a condition that lasted or is expected to last for at least 12 months ⁴	94	93	90	93	100	94
Functional Limitations (% Yes)						
Difficulty doing or need assistance to do day-to-day activities	10	10	13	13	9	7
Because of any medical, mental health or other health conditions ⁵	82	79	100	95	75	88
Is a condition that lasted or is expected to last for at least 12 months ⁶	97	100	91	100	86	100

Base = Those answering (AQ51a-51i)

¹Base = Those who currently need or take prescription medicine and answering

²Base = Those who currently need or take prescription medicine because of medical, mental health or other health conditions and answering

³Base = Those who need or use medical care, mental health or other health services on a regular basis and answering

⁴Base = Those who need or use medical care, mental health or other health services because of medical, mental health or other health conditions and answering

⁵Base = Those who have difficulty doing or need assistance to do day-to-day activities and answering

⁶Base = Those who have difficulty doing or need assistance to do day-to-day activities because of medical, mental health or other health conditions and answering

Note: These questions were not asked in 2001

Characteristics of Members (cont'd)

Exhibit 1-5

This table shows the characteristics of the *adult members* surveyed (In percentages):

	Program Average	CareSource	FHP	Paramount	QualChoice	SummaCare
	<u>2002</u>	<u>2002</u>	<u>2002</u>	<u>2002</u>	<u>2002</u>	<u>2002</u>
Special Therapies (% Yes)						
Needs or gets special therapy, such as physical, occupational, speech or respiratory therapy	9	7	11	9	13	7
Because of any medical, mental health or other health conditions ¹	91	89	91	100	95	81
Is a condition that lasted or is expected to last for at least 12 months ²	94	95	100	100	88	100
Mental Health Services (% Yes)						
Need or get treatment or counseling for any kind of mental health, substance abuse or emotional problem	8	8	9	9	7	12
Is a condition that lasted or is it expected to last for at least 12 months ³	90	91	92	89	89	86
Adult with Special Health Care Needs						
Qualified on prescription medicine use	32	30	36	34	32	40
Qualified on service use	18	17	18	19	21	21
Qualified on functional limitations	8	8	11	12	5	6
Qualified on use of special therapies	7	6	9	9	10	6
Qualified on use of mental health services	7	7	7	8	5	9
Met ASHCN screener						
Dependency	32	30	36	34	32	40
Service use	23	21	23	25	28	25
Functional limitations	8	8	11	12	5	6

Base = Those answering (AQ51j-51n)

¹Base = Those who need or get special therapy, such as physical, occupational, speech or respiratory therapy and answering

²Base = Those who need or get special therapy because of medical, mental health or other health conditions and answering

³Base = Those who need or get treatment or counseling for any kind of mental health, substance abuse or emotional problem and answering

Note: These questions were not asked in 2001

Characteristics of Members (cont'd)

Child members (excluding 13-17 year olds) who participated in the survey had the following characteristics:

- Average age was 6 years;
- 50% male, 50% female;
- English was the language child most often spoken at home (99%);
- 29% currently need or take prescription medicine;
- 14% need or use more medical care or educational services than is usual for most children their age;
- 12% are limited or prevented in some way in their ability to do things most children can do;
- 7% need or get special therapy, such as physical, occupational, or speech therapy;
- 11% have some kind of emotional, developmental, or behavioral problem for which they need to get treatment or counseling;
- 26% qualified as Children with Special Health Care Needs (These child members could have qualified in more than one of the following categories);
 - > 19% qualified on prescription medicine use;
 - > 11% qualified on service use;
 - > 7% qualified on functional limitations;
 - > 4% qualified on use of special therapies; and
 - > 9% qualified on use of mental health services.

And, the parents or guardian of the child members who participated in the survey had the following characteristics:

- 87% mother/father relationship, 9% grandparent relationship, 2% aunt/uncle relationship; and
- 96% were listed as the child's payee/caretaker.

The following pages detail the characteristics of the child members and their parents or guardians who participated in the survey.

Characteristics of Members (cont'd)

Exhibit 1-6

This table shows the demographics of the *child members excluding 13-17 year olds* surveyed (In percentages):

	Program Average		CareSource		FHP		Paramount		QualChoice		SummaCare	
	2001	2002	2001	2002	2001	2002	2001	2002	2001	2002	2001	2002
Age												
Mean (# of years)	6.5	5.9 ↓	6.9	5.9 ↓	6.4	6.2	6.2	5.4	6.5	6.2	6.1	5.5
Median (# of years)	7.0	6.0	7.0	5.0	6.0	6.0	6.0	5.0	6.0	6.0	6.0	5.0
Gender												
Male	52	50	50	50	52	52	57	46 ↓	52	54	50	43
Female	48	50	50	50	48	48	43	54 ↑	48	46	50	57
Language Child Speaks at Home												
English	na	99	na	98	na	100	na	100	na	99	na	99
Spanish	na	1	na	1	na	-	na	-	na	-	na	-
Other	na	<1	na	1	na	-	na	-	na	1	na	1
Relationship to Child												
Mother/Father	86	87	82	86 ↑	80	90 ↑	88	87	88	87	92	86 ↓
Grandparent	10	9	13	9 ↓	13	6 ↓	8	12	9	10	6	9
Aunt/Uncle	2	2	2	2	5	3	1	1	1	1	1	1
Listed as Child's Payee/Guardian												
Yes	95	96	96	96	94	96	94	96	95	95	98	97

Base = Those answering (CQ97,98,105-107)
na = Not asked in 2001

Characteristics of Members (cont'd)

Exhibit 1-7

This table shows the characteristics of the *child members excluding 13-17 year olds* surveyed (In percentages):

	Program Average		CareSource		FHP		Paramount		QualChoice		SummaCare	
	2001	2002	2001	2002	2001	2002	2001	2002	2001	2002	2001	2002
Prescription Medicine Use (% Yes)												
Currently needs or uses medicine prescribed by a doctor	27	29	29	29	32	36	29	26	27	31	25	26
Because of any medical, behavioral or other health conditions ¹	84	84	84	86	86	90	88	82	80	76	91	80
Is a condition that lasted or is expected to last for at least 12 months ²	88	84	89	84	93	89	86	87	89	81	88	83
Service Use (% Yes)												
Needs/uses more medical care, mental health or educational services than is usual for most children their age	15	14	16	14	15	18	15	10	12	11	16	14
Because of any medical, behavioral or other health conditions ³	84	86	87	81	86	92	85	100	81	96	93	91
Is a condition that lasted or is expected to last for at least 12 months ⁴	98	97	98	96	100	100	94	93	100	100	98	100
Functional Limitations (% Yes)												
Limited/Prevented in any way in their ability to do things most children can do	12	12	14	11 ↓	12	19 ↑	14	10	10	12	8	15 ↑
Because of any medical, behavioral or other health conditions ⁵	69	62	68	61	68	57	73	71	68	72	84	56 ↓
Is a condition that lasted or is expected to last for at least 12 months ⁶	95	98	98	99	88	100	88	100	92	100	89	91

Base = Those answering (CQ92-94b)

¹Base = Those whose child currently needs or uses medicine prescribed by a doctor and answering

²Base = Those whose child currently needs or uses medicine prescribed by a doctor because of medical, behavioral or other health conditions and answering

³Base = Those whose child needs or used more medical care, mental health, or educational services than most children their age and answering

⁴Base = Those whose child needs or uses more medical care, mental health, or educational services because of medical, behavioral or other health conditions and answering

⁵Base = Those whose child is limited or prevented in any way in their ability to things most children can do and answering

⁶Base = Those whose child is limited or prevented in any way in their ability to things most children can do because of medical, behavioral or other health conditions and answering

Characteristics of Members (cont'd)

Exhibit 1-8

This table shows the characteristics of the *child members excluding 13-17 year olds* surveyed (In percentages):

	Program Average		CareSource		FHP		Paramount		QualChoice		SummaCare	
	<u>2001</u>	<u>2002</u>	<u>2001</u>	<u>2002</u>	<u>2001</u>	<u>2002</u>	<u>2001</u>	<u>2002</u>	<u>2001</u>	<u>2002</u>	<u>2001</u>	<u>2002</u>
Special Therapies (% Yes)												
Needs or gets special therapy, such as physical, occupational, or speech therapy	9	7	11	8 ↓	7	6	9	5	8	4	9	8
Because of any medical, behavioral or other health conditions ¹	62	66	67	71	77	43	76	76	45	50	71	50
Is a condition that lasted or is expected to last for at least 12 months ²	93	94	91	94	100	100	88	100	100	100	86	84
Mental Health Services (% Yes)												
Has any kind of emotional, developmental, or behavioral problem for which they need or get treatment or counseling	13	11	15	12 ↓	15	17	14	13	8	7	15	12
Is a condition that lasted or is expected to last for at least 12 months ³	94	91	94	90	94	85	89	95	94	89	96	100
Children with Special Health Care Needs												
Qualified on prescription medicine use	19	19	21	19	25	28	21	16	18	17	19	16
Qualified on service use	11	11	13	10	12	15	11	9	9	9	14	12
Qualified on functional limitations	7	7	9	6 ↓	7	10	9	6	6	8	5	7
Qualified on use of special therapies	4	4	6	5 ↓	5	1 ↓	5	4	3	2	5	3
Qualified on use of mental health services	11	9 ↓	13	9 ↓	13	12	11	11	8	5	13	10
Met CSHCN screener												
Dependency	19	19	21	19	25	28	21	16	18	17	19	16
Service use	17	16	19	17	21	20	18	14	13	13	21	16
Functional limitations	7	7	9	6 ↓	7	10	9	6	6	8	5	7

Base = Those answering (CQ95-96a)

¹Base = Those whose child needs or gets special therapy, such as physical, occupational, or speech therapy and answering

²Base = Those whose child needs or gets special therapy because of medical, behavioral or other health conditions and answering

³Base = Those whose child has any kind of emotional, developmental, or behavioral problem for which they need or get treatment or counseling and answering

Characteristics of Members (cont'd)

Adult and child members (excluding 13-17 year olds) who participated in the survey reported the following:

- 48% reported going to a pediatrician, 44% visited a general doctor; and
- 21% reported going to their doctor less than 6 months; 23% have been going to their doctor 6 up to 12 months; 21% have been going to their doctor 12 up to 24 months; 23% had been going to their doctor 2 up to 5 years, and 12% had been going to their doctor for 5 or more years.

Exhibit 1-9

This table shows the characteristics of the *adult and child members excluding 13-17 year olds* surveyed (In percentages):

	Program Average	CareSource	FHP	Paramount	QualChoice	SummaCare
	<u>2002</u>	<u>2002</u>	<u>2002</u>	<u>2002</u>	<u>2002</u>	<u>2002</u>
Type of Doctor Seen						
Pediatrician*	48	45	48	45	58	42
General Doctor	44	46	43	46	35	49
Specialist Doctor	5	6	7	7	2	7
Nurse Practitioner	2	2	1	1	1	-
Physician Assistant	1	<1	1	1	3	2
Length of Time Been Going to Doctor						
Less than 6 months	21	25	20	23	13	14
6 up to 12 months	23	22	28	25	22	25
12 up to 24 months	21	19	14	23	29	20
2 up to 5 years	23	21	25	19	22	32
5 years or more	12	13	12	10	13	8

Base = Those who/whose child got a new personal doctor or nurse and answering (AQ3a,3b/CQ3a,3b)

*Asked only of child members

Characteristics of Members (cont'd)

Adult and child members (excluding 13-17 year olds) who participated in the survey had the following health plan characteristics:

- 86% reported being covered by a Medicaid managed care plan paid for by the State;
- 99% reported using the health plan for all or most of their health care;
- 34% had been members for 2 up to 5 years, 28% had been members for 12 up to 24 months, and 22% had been members for 6 up to 12 months (based upon survey responses not eligibility data files); and
- 68% chose their or their child's health plan, while 32% were assigned to their or their child's health plan.

Exhibit 1-10

This table shows the characteristics of the *adult members and child members excluding 13-17 year olds* surveyed (In percentages):

	Program Average		CareSource		FHP		Paramount		QualChoice		SummaCare	
	2001	2002	2001	2002	2001	2002	2001	2002	2001	2002	2001	2002
Covered by Medicaid (% Yes)	79	86 ↑	79	84 ↑	81	91 ↑	80	86 ↑	72	87 ↑	84	88
Use This Health Plan For All or Most of Health Care (% Yes) ¹	98	99	98	99	99	99	98	99	99	98	97	99
Length of Time They Have Been a Member (consecutively) ¹												
Less than 6 months	3	3	3	4	3	3	2	6 ↑	3	2	2	2
6 up to 12 months	16	22 ↑	13	23 ↑	18	19	15	22 ↑	17	21	20	16
12 up to 24 months	27	28	28	28	21	28	25	25	21	32 ↑	30	22 ↓
2 up to 5 years	39	34 ↓	40	33 ↓	35	28 ↓	39	33	44	32 ↓	37	44
5 up to 10 years	11	11	13	9 ↓	16	16	15	11	11	13	8	14 ↑
10 or more years	4	3	4	3	6	6	3	3	4	<1 ↓	3	2
Chose Their/Their Child's Health Plan ¹	72	68 ↓	67	64	78	69 ↓	80	75	84	79	79	71 ↓
Told Which Plan They Were/Their Child Was In ¹	28	32 ↑	33	36	22	31 ↑	20	25	16	21	21	29 ↑

Base = Those answering (AQ35-38/CQ72-75)

¹Base = Those who are/whose child is covered by Medicaid and answering

Characteristics of Non-Respondents

Non-respondents, those who did not complete a telephone interview, had the following characteristics:

- Average age of the adult non-respondent was 29 years, while the average age of the child non-respondent was 5 years;
- 60% female;
- 59% African-American, 36% Caucasian; and
- 80% from Health Families, 14% from Healthy Start, and 6% from SCHIP (Medicaid eligibility categories).

The following page details the characteristics of non-respondents who did not complete the survey.

Characteristics of Non-Respondents (cont'd)

Exhibit 1-10

This table shows the demographics of the *non-respondents* (In percentages):

	Program Average		CareSource		FHP		Paramount		QualChoice		SummaCare	
	<u>2001</u>	<u>2002</u>	<u>2001</u>	<u>2002</u>	<u>2001</u>	<u>2002</u>	<u>2001</u>	<u>2002</u>	<u>2001</u>	<u>2002</u>	<u>2001</u>	<u>2002</u>
Age of Adult												
Mean (# of years)	29.1	28.8	29.3	28.7	29.3	28.9	28.8	29.5	28.8	28.8	28.7	29.3
Median (# of years)	28.0	27.0	28.0	27.0	28.0	27.0	27.0	28.0	27.0	27.0	27.0	27.0
Age of Child												
Mean (# of years)	6.0	5.4 ↓	6.4	5.5 ↓	5.9	5.6	5.6	4.8 ↓	5.7	5.6	5.6	5.3
Median (# of years)	6.0	5.0	6.0	5.0	6.0	5.0	5.0	4.0	5.0	5.0	5.0	5.0
Gender												
Male	38	40	41	40	39	41	41	40	37	39	33	40 ↑
Female	62	60	59	60	61	59	59	60	63	61	67	60 ↓
Ethnic Background												
Black/African American	62	59 ↓	64	59 ↓	54	47 ↓	47	46	81	77	51	43 ↓
White/Caucasian	31	36 ↑	33	35	38	44 ↑	44	46	15	20 ↑	46	55 ↑
Hispanic	4	4	1	4 ↑	7	7	6	6	3	1 ↓	1	1
Other	3	2	2	2	1	1	2	2	2	2	2	2
Case Type												
Healthy Families	79	80	77	79 ↑	76	81 ↑	75	75	81	82	82	81
Healthy Start	12	14 ↑	12	14 ↑	14	15	16	19	10	10	11	14 ↑
SCHIP	na	6	na	7	na	4	na	6	na	8	na	5

na = Not available for 2001

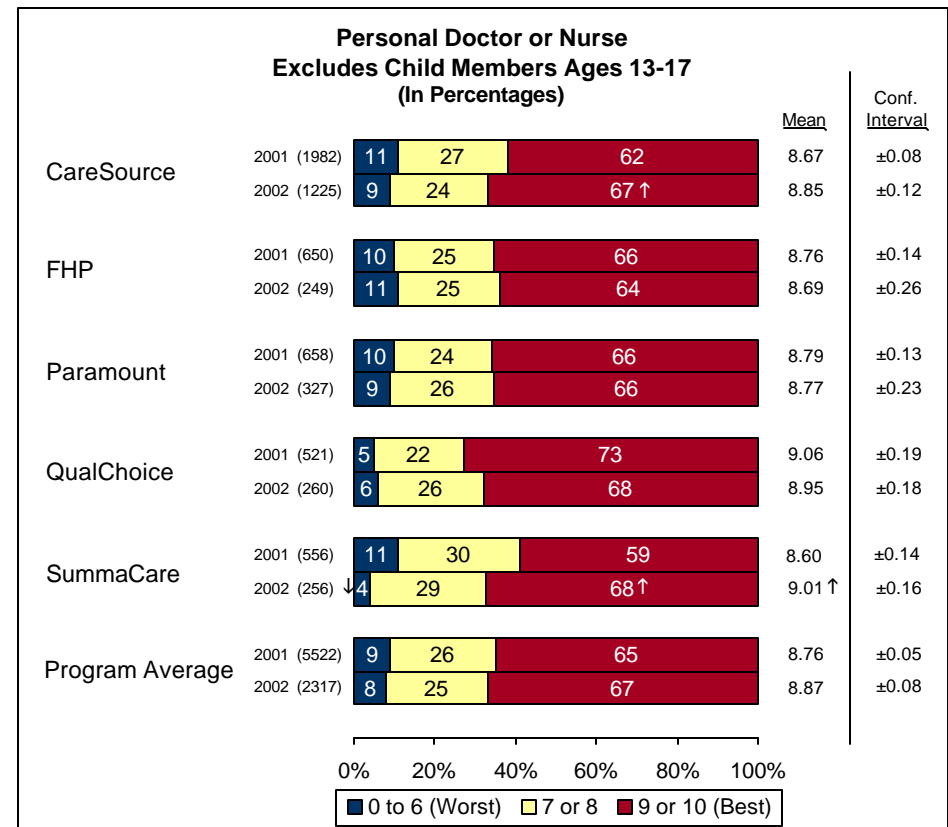
OVERALL RATINGS OF PERSONAL DOCTOR, SPECIALIST, HEALTH CARE AND HEALTH PLAN

Overall Ratings of Personal Doctor, Specialist, Health Care and Health Plan

Overall Rating of Personal Doctor or Nurse (Exhibit 2-1)

Members who have one person they think of as their/their child's personal doctor or nurse were asked to rate their health care provider overall, using a "0 to 10" scale, where a "0" means the worst personal doctor or nurse possible and a "10" means the best personal doctor or nurse possible.

- In 2002, members rated their/their child's personal doctor or nurse, on average, an 8.87. Specifically, in 2002, about two-thirds of the members (67%) gave a rating of 9 or 10 to their/their child's personal doctor or nurse, while 25% gave a rating of 7 or 8 and another 8% gave a rating of less than 7.
- There were no statistically significant differences in the program average between 2001 and 2002.
 - However, there were statistically significant differences in results for CareSource and SummaCare between 2001 and 2002: results improved for both plans.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



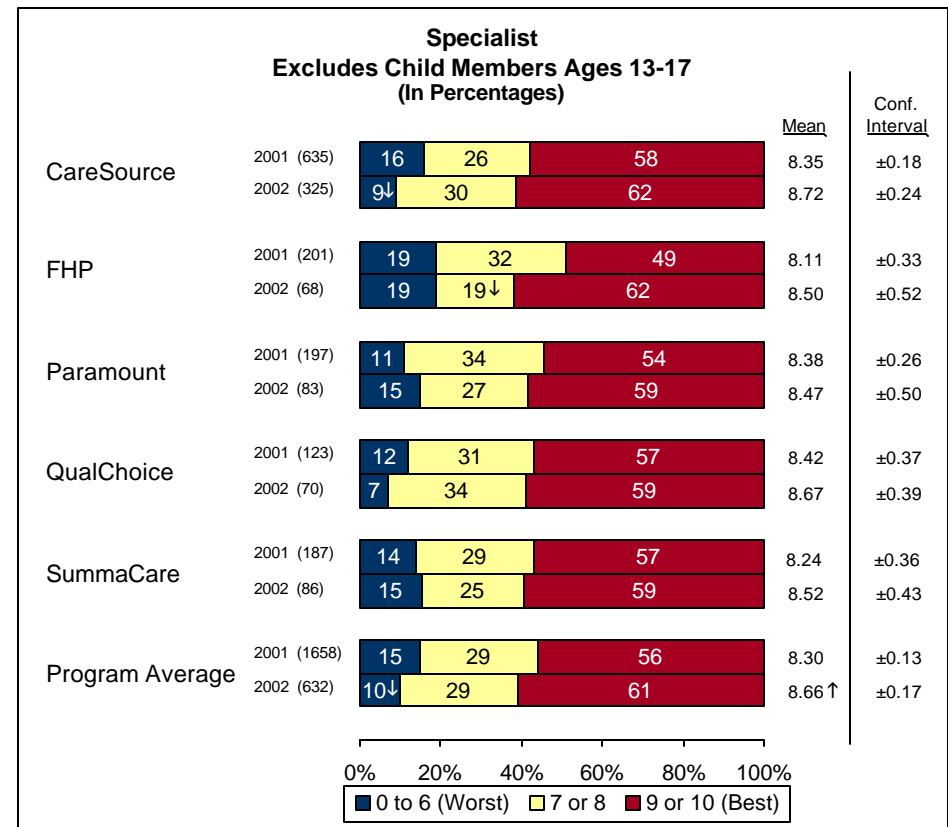
Base = Those able to rate based on experience (AQ6/CQ11)

Overall Ratings of Personal Doctor, Specialist, Health Care and Health Plan (cont'd)

Overall Rating of Specialist (Exhibit 2-2)

Members who have seen a specialist in the past six months were asked to rate their/their child's specialist overall, using a "0 to 10" scale, where a "0" means the worst specialist possible and a "10" means the best specialist possible.

- In 2002, members gave their/their child's specialist a rating of 8.66, on average.
- There were statistically significant differences between the program average for 2001 and 2002: ① members rated their/their child's specialist higher, on average (8.66, up from 8.30); and ② fewer members gave their/their child's specialist a rating of less than 7 (10%, down from 15%).
 - > There were also statistically significant differences among members of CareSource and FHP between 2001 and 2002: results for CareSource improved and the percent of FHP members rating their/their child's specialist a 7 or 8 decreased between 2001 and 2002.
- However, there were no statistically significant differences between the program average and any individual MCP for 2002.



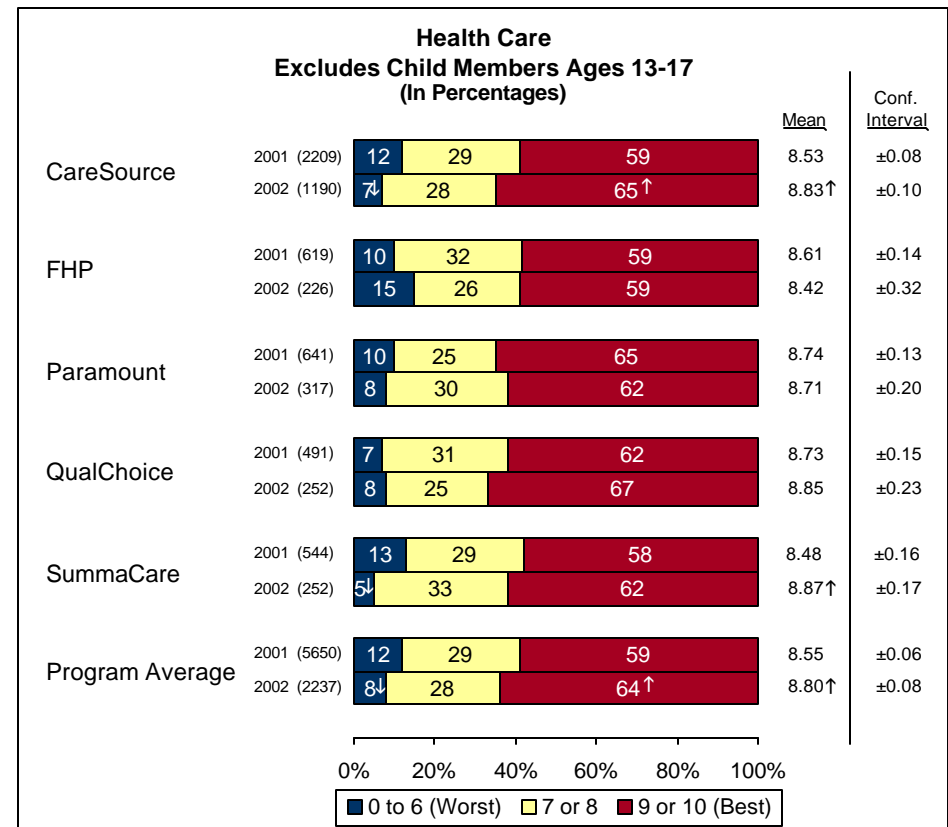
Base = Those able to rate based on experience (AQ10/CQ15)

Overall Ratings of Personal Doctor, Specialist, Health Care and Health Plan (cont'd)

Overall Rating of Health Care (Exhibit 2-3)

Members who went to a doctor's office or clinic in the past six months were asked to rate their/their child's health care overall, using a "0 to 10" scale, where a "0" means the worst health care possible and a "10" means the best health care possible.

- In 2002, members gave their/their child's health care overall a rating of 8.80, on average.
- There were statistically significant differences between the program average for 2001 and 2002: ① members gave higher ratings, on average for their/their child's health care overall (8.80, up from 8.55); ② more members gave a rating of 9 or 10 (64%, up from 59%); and ③ fewer members gave a rating of less than 7 (8%, down from 12%).
 - There were also statistically significant differences among members of CareSource and SummaCare between 2001 and 2002: results improved for both plans.
- However, there were no statistically significant differences between the program average and any individual MCP for 2002.



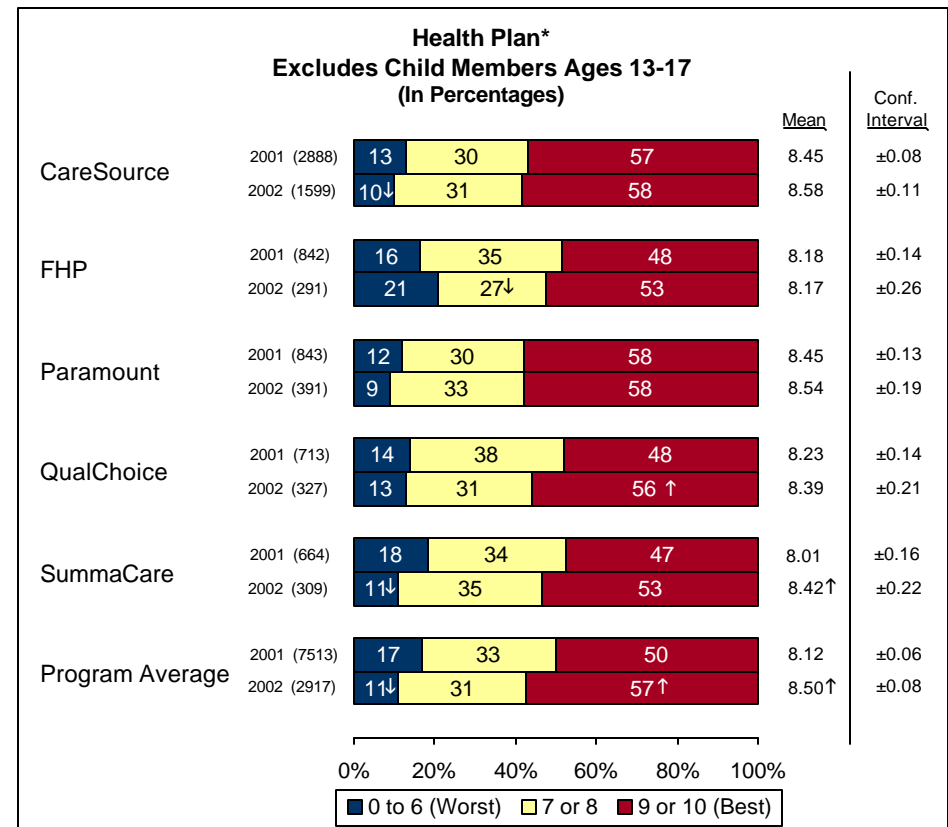
Base = Those able to rate based on experience (AQ32/CQ49)

Overall Ratings of Personal Doctor, Specialist, Health Care and Health Plan (cont'd)

Overall Rating of Health Plan (Exhibit 2-4)

Members were asked to rate their/their child's health plan overall, using a "0 to 10" scale, where a "0" means the worst health plan possible and a "10" means the best health plan possible.

- In 2002, members gave their/their child's health plan a rating of 8.50, on average.
- There were statistically significant differences between the program average for 2001 and 2002: ① members gave higher ratings, on average, to their/their child's health plan (8.50, up from 8.12); ② more members gave a rating of 9 or 10 (57%, up from 50%); and ③ fewer members gave a rating of less than 7 (11%, down from 17%).
 - There were also statistically significant differences among members of CareSource, FHP, QualChoice, and SummaCare between 2001 and 2002: results improved for CareSource, QualChoice, and SummaCare and the percent of FHP members rating their/their child's health plan a 7 or 8 decreased between 2001 and 2002.
- There was also a statistically significant difference between the program average and FHP for 2002: the percent who gave their/their child's health plan a rating of less than 7 was higher for FHP than the Program Average.



Base = Those able to rate based on experience (AQ50/CQ87)

*There were statistically significant differences between at least one MCP and the program average for 2002.

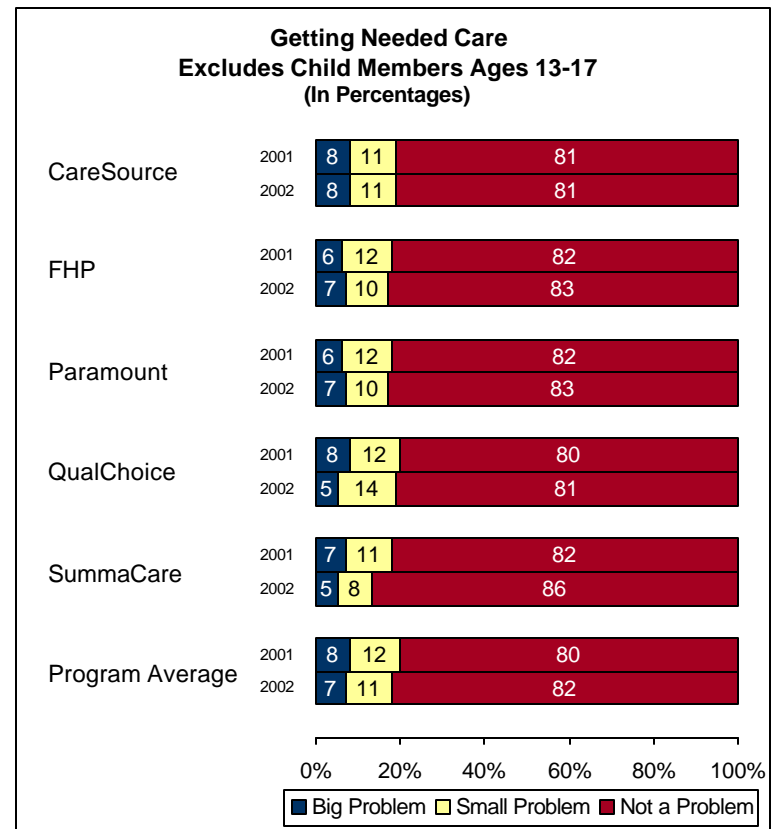
DETAILED COMPOSITE SCORES

Getting Needed Care

Composite Score for Getting Needed Care (Exhibit 3-1)

The composite scores for “Getting Needed Care”* indicated that the majority of members have had no problems with issues related to getting needed care within the last six months.

- The composite scores for “Getting Needed Care” in 2002 showed a rating of not a problem by about eight in ten members (82%), followed by 11% saying they had a small problem, and 7% saying they had a big problem.
- There were no statistically significant differences between the program average nor the individual MCPs for 2001 and 2002.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



*To get the percentages shown for the composite score “Getting Needed Care,” we averaged the answers to four individual survey questions. These questions asked members to tell how much of a problem, during the last six months, they had:

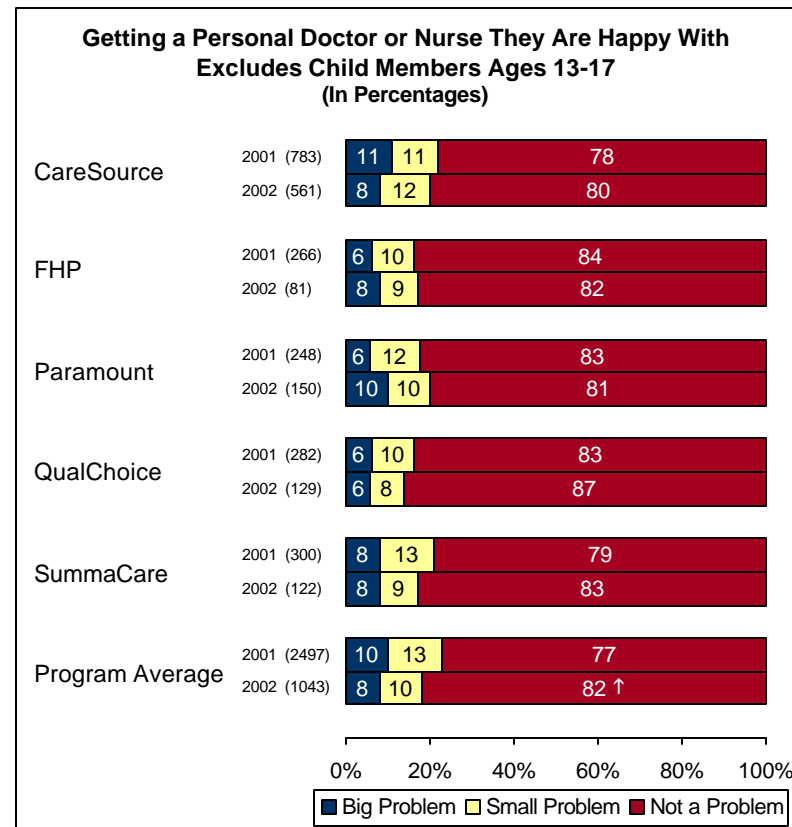
- > Getting a personal doctor or nurse they were happy with (AQ4/CQ4)
- > Getting a referral to a specialist that they needed to see (AQ8/CQ13)
- > Getting the care they or their doctor believed necessary (AQ22/CQ27)
- > With delays in health care while they waited for approval from their health plan (AQ23/CQ28)

Getting Needed Care (cont'd)

Getting a Personal Doctor or Nurse They are Happy With (Exhibit 3-2)

Members were asked to rate how much of a problem they/their child had during the last six months with getting a personal doctor or nurse with whom they are happy.

- 82% of members in 2002 have had no problems getting a personal doctor or nurse with whom they are happy.
- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were more likely to report that they/their child had no problems getting a personal doctor or nurse with whom they are happy (82%, up from 77% in 2001).
 - There were no statistically significant differences between the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and any individual MCP for 2002.



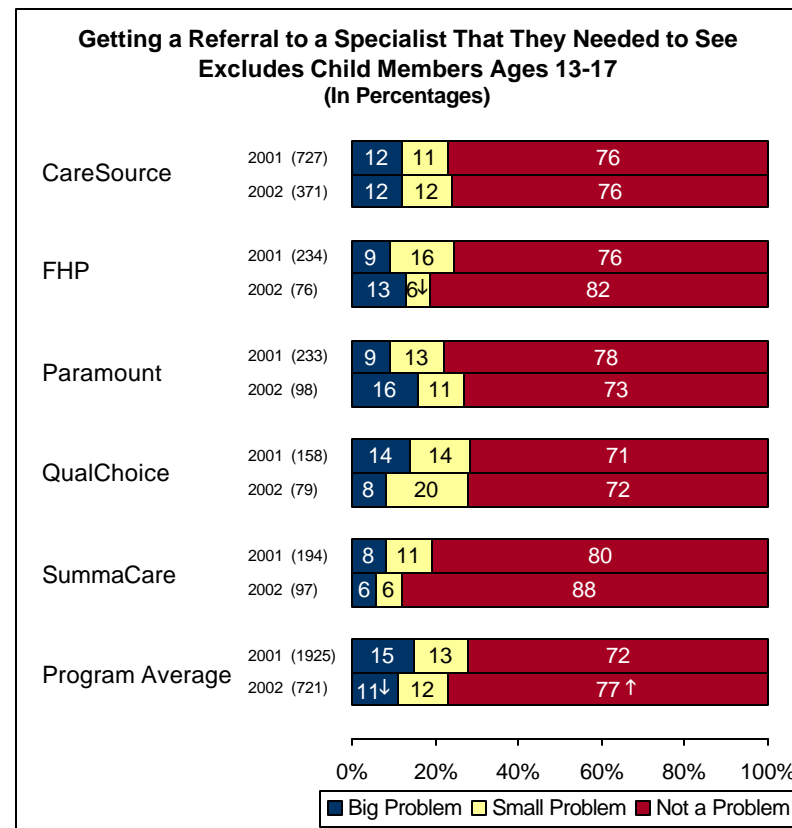
Base = Those who/whose child got a new personal doctor or nurse and able to rate (AQ4/CQ4)

Getting Needed Care (cont'd)

Getting a Referral to a Specialist That They Needed to See (Exhibit 3-3)

Members were asked to rate how much of a problem they had during the last six months with getting a referral to a specialist that they/their child needed to see.

- In 2002, 77% of members have had no problems getting a referral to a specialist that they/their child needed to see.
- There were statistically significant differences between the program average for 2001 and 2002: ① more members reported that they/their child had no problems getting a referral to a specialist that they/their child needed to see (77%, up from 72%); and ② fewer members reported having a big problem (11%, down from 15%).
 - There was also a statistically significant difference among members of FHP between 2001 and 2002: the percent of FHP members who reported that getting a referral to a specialist that they/their child needed to see was a small problem decreased between 2001 and 2002.
- However, there were no statistically significant differences between the program average and any individual MCP for 2002.



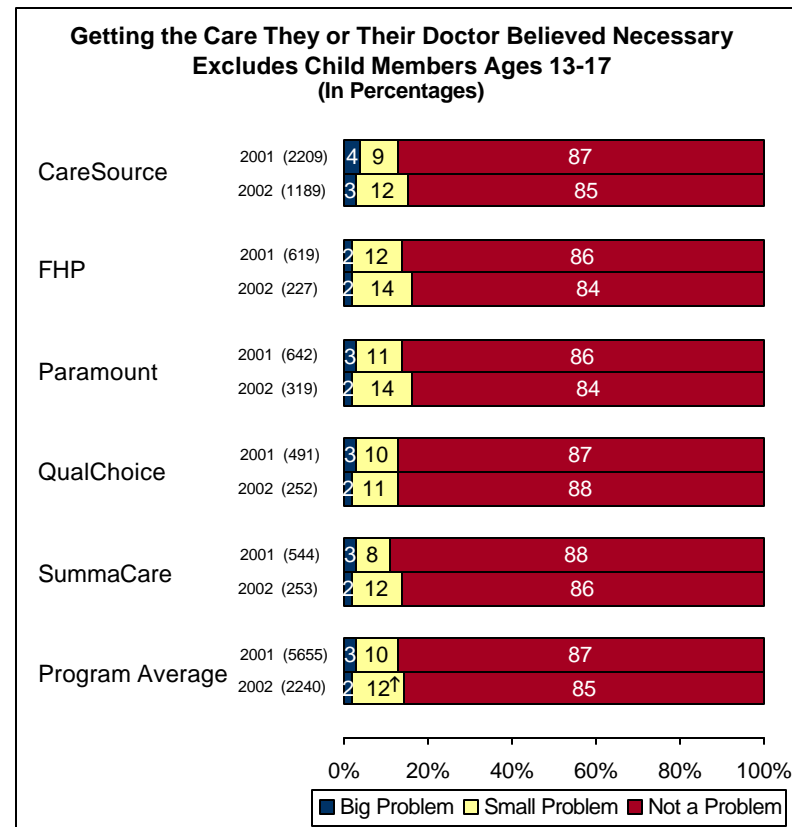
Base = Those who/whose child's doctor thought they/their child needed to see a specialist and able to rate (AQ8/CQ13)

Getting Needed Care (cont'd)

Getting the Care They or Their Doctor Believed Necessary (Exhibit 3-4)

Members were asked to rate how much of a problem they had during the last six months with getting care they or their/their child's doctor believed necessary.

- 85% of members in 2002 continue to have no problems getting the care they or their/their child's doctor believed necessary.
- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were more likely to report that they/their child had a small problem getting care they or their/their child's doctor believed necessary (12%, up from 10% in 2001).
 - There were no statistically significant differences between the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and any individual MCP for 2002.



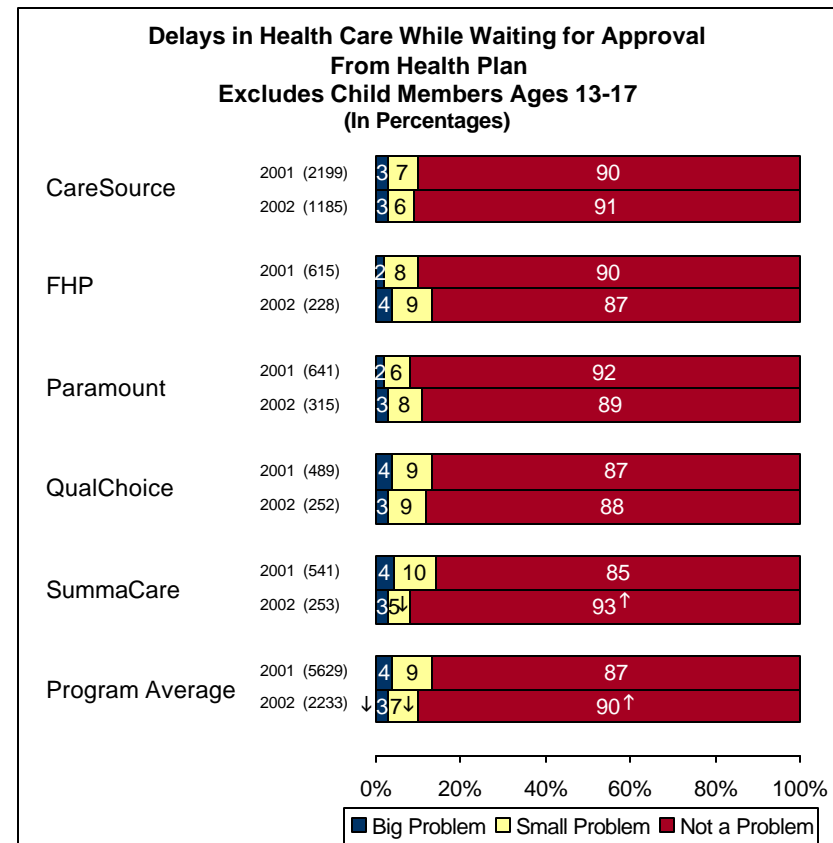
Base = Those who/whose child went to a doctor's office/clinic in the last 6 months and able to rate (AQ22/CQ27)

Getting Needed Care (cont'd)

Delays in Health Care While They Waited for Approval From Their Health Plan (Exhibit 3-5)

Members were asked to rate how much of a problem they had during the last six months with delays in health care while they waited for approval from their/their child's health plan.

- 90% of members in 2002 have had no problems with delays in their/their child's health care while they waited for approval from their/their child's health plan.
- There were statistically significant differences between the program average for 2001 and 2002: ① more members reported that delays in their/their child's health care while they waited for approval from their/their child's health plan were not a problem (90%, up from 87%); ② fewer members had a small problem (7%, down from 9%); and ③ fewer members had a big problem (3%, down from 4%).
 - > There were also statistically significant differences among members of SummaCare between 2001 and 2002: results for SummaCare improved.
- However, there were no statistically significant differences between the program average and any individual MCP for 2002.



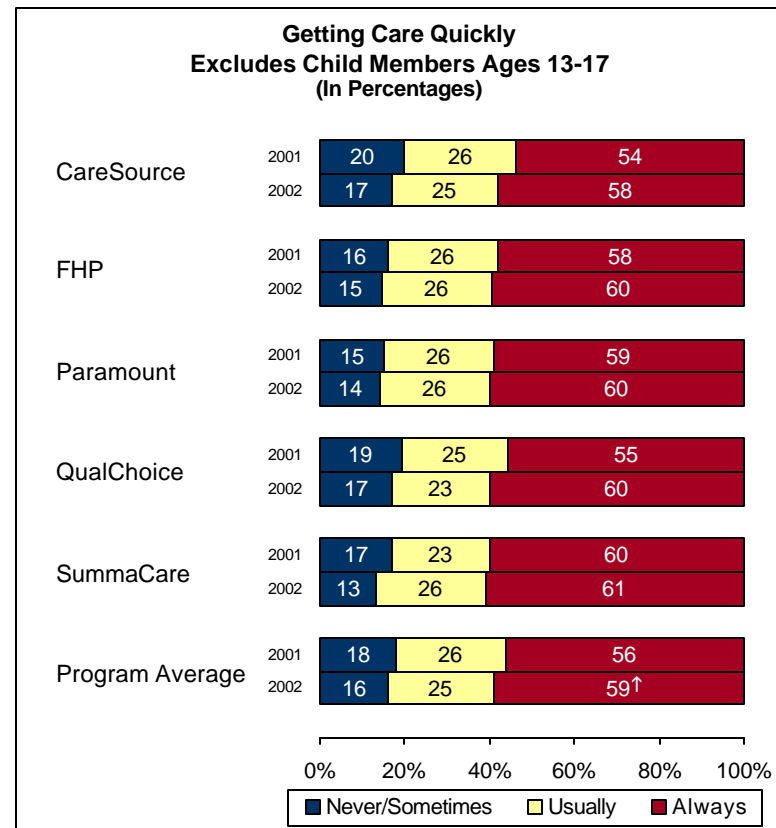
Base = Those who/whose child went to a doctor's office/clinic in the last 6 months and able to rate (AQ23/CQ28)

Getting Care Quickly

Composite Score for Getting Care Quickly (Exhibit 3-6)

The composite scores for “Getting Care Quickly”^{*} indicated that about six in ten members have received care quickly within the last six months.

- The composite scores for “Getting Care Quickly” in 2002 showed a rating of always or usually by 84% of members, while nearly two in ten (16%) gave a rating of never or only sometimes.
- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were more likely to report that they always got care quickly (59%, up from 56% in 2001).
 - There were no statistically significant differences between the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and any individual MCP for 2002.



^{*}To get the percentages shown for the composite score “Getting Care Quickly,” we averaged the answers to four individual survey questions. These questions asked members to tell how often, during the last six months, they:

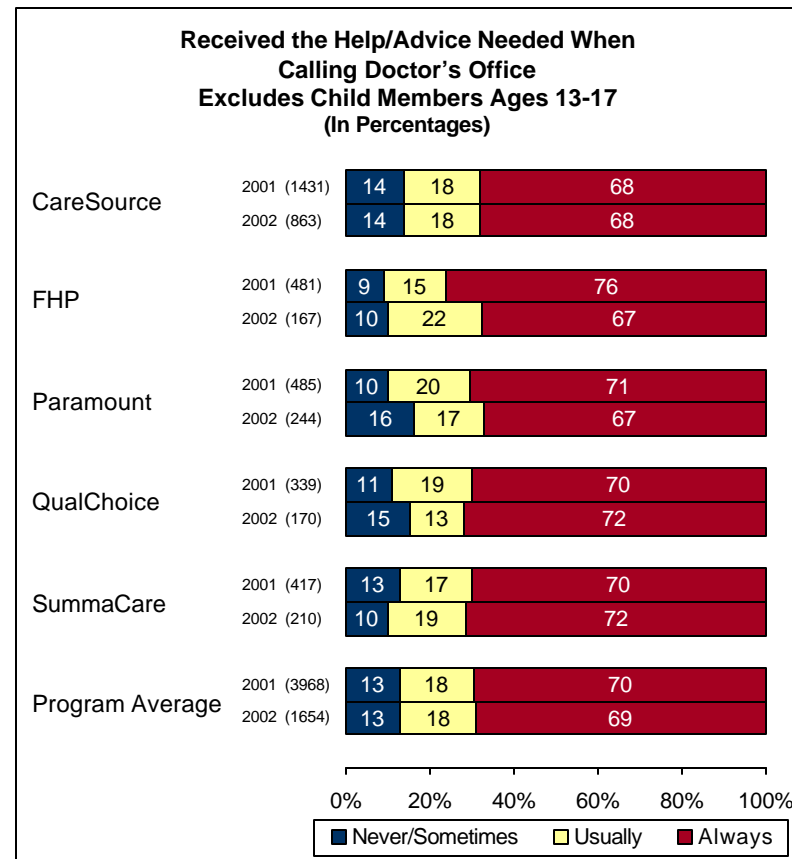
- Received the help or advice needed when calling during regular office hours (AQ13/CQ18)
- Received an appointment for regular/routine health care as soon as they wanted (AQ15/CQ20)
- Received the care needed for an illness/injury as soon as they wanted (AQ18/CQ23)
- Waited in the doctor’s office less than 30 minutes past their appointment time (AQ24/CQ29)

Getting Care Quickly (cont'd)

Received the Help or Advice Needed When Calling During Regular Office Hours (Exhibit 3-7)

Members were asked to rate how often during the last six months they received the help or advice they needed when calling their/their child's doctor's office during regular office hours.

- In 2002, more than eight in ten members (87%) reported that they always or usually received the help or advice they needed when they called their/their child's doctors during regular office hours, while 13% said they never or only sometimes did.
- There were no statistically significant differences between the program average nor the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and any individual MCP for 2002.



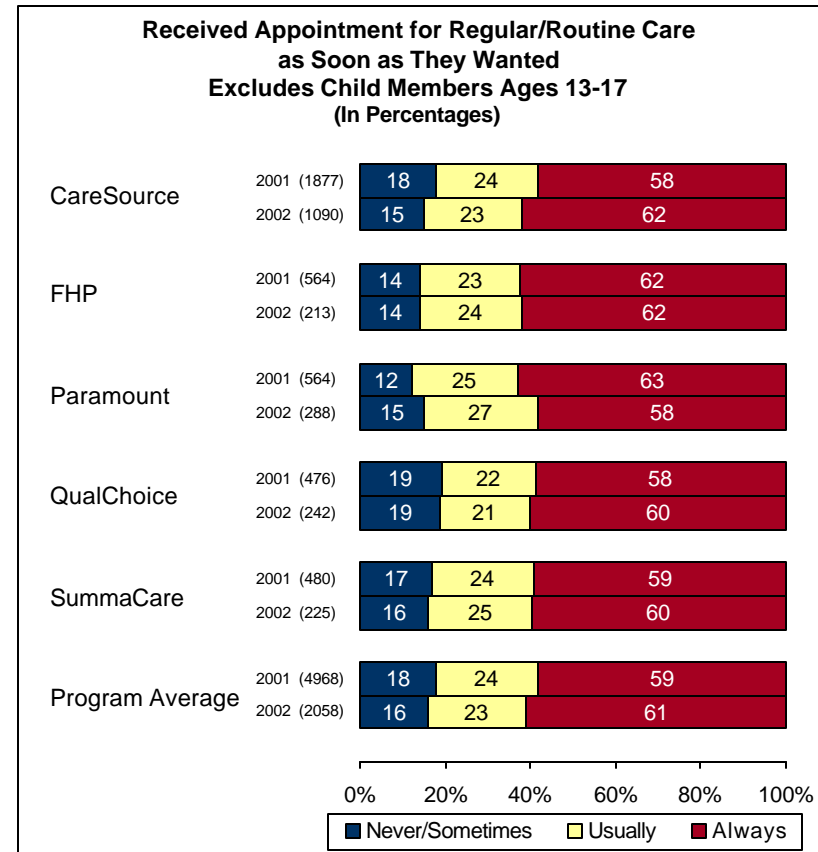
Base = Those who called a doctor's office/clinic during regular office hours to get help or advice for themselves/their child and able to rate (AQ13/CQ18)

Getting Care Quickly (cont'd)

Received an Appointment for Regular/Routine Health Care as Soon as They Wanted (Exhibit 3-8)

Members were asked to rate how often during the last six months they/their child received an appointment for regular or routine health care as soon as they wanted.

- In 2002, more than eight in ten members (84%) reported that they/their child always or usually received an appointment for regular or routine health care as soon as they wanted, while 16% said they never or only sometimes did.
- There were no statistically significant differences between the program average nor the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and any individual MCP for 2002.



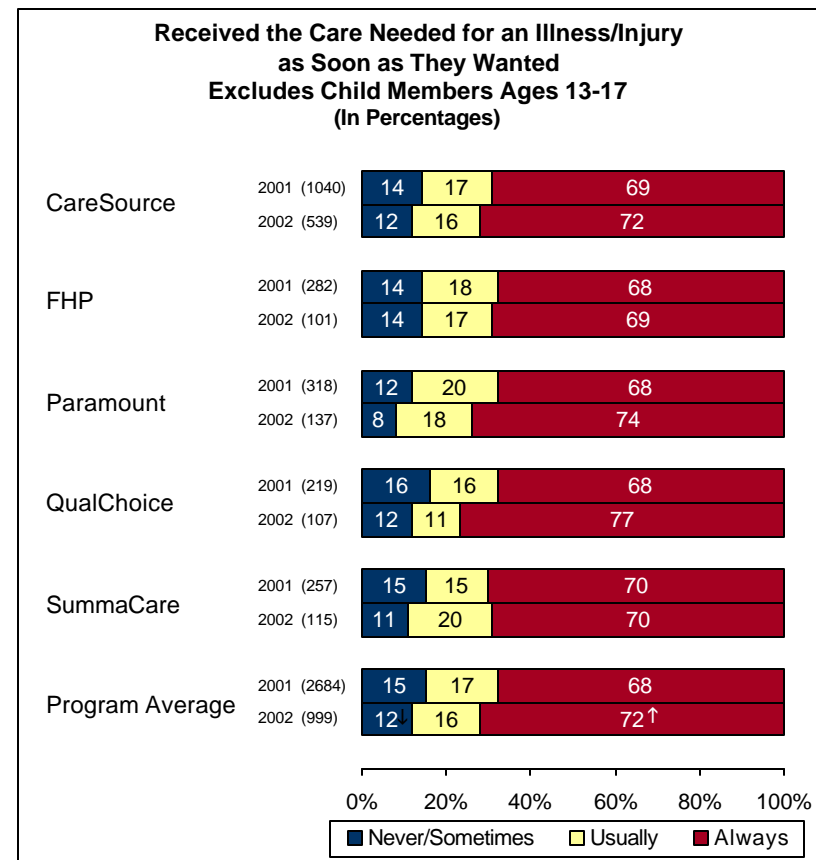
Base = Those who made an appointment for themselves/their child for regular/routine health care and able to rate (AQ15/CQ20)

Getting Care Quickly (cont'd)

Received the Care Needed for an Illness/Injury as Soon as They Wanted (Exhibit 3-9)

Members were asked to rate how often during the last six months they received the care they/their child needed for an illness or injury as soon as they wanted.

- In 2002, 72% of members reported that they/their child always or usually received the care they needed for an illness or injury.
- There were statistically significant differences between the program average for 2001 and 2002: ① more members reported that they/their child always received the care they needed for an illness or injury (72%, up from 68%); and ② fewer members said they/their child never or only sometimes received the care they needed (12%, down from 15%).
 - > There were no statistically significant differences between the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and any individual MCP for 2002.



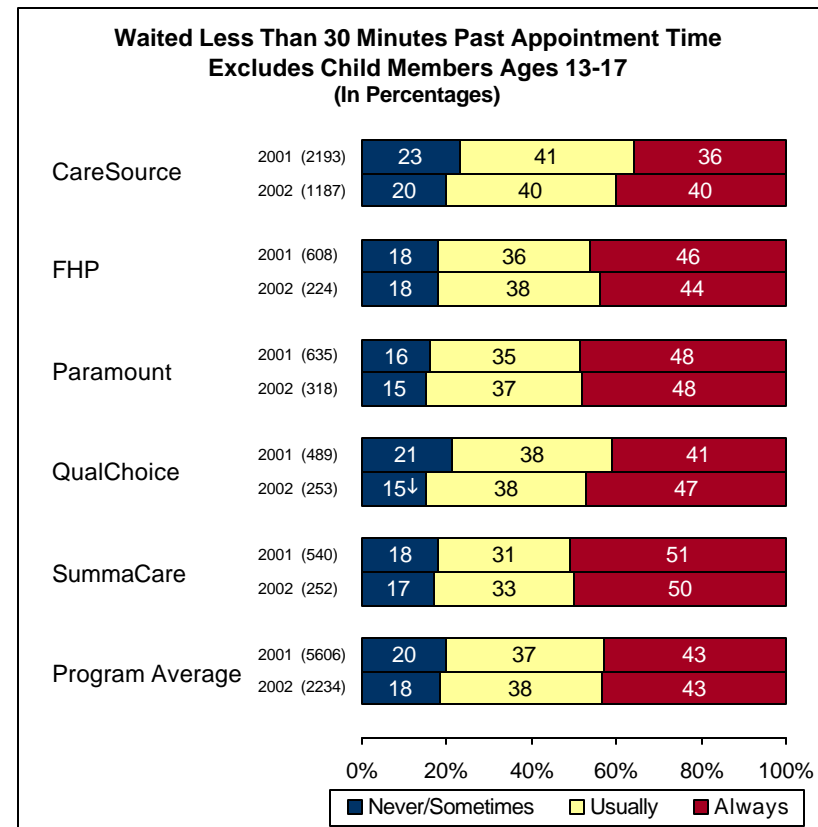
Base = Those who/whose child had an illness/injury that needed care right away and able to rate (AQ18/CQ23)

Getting Care Quickly (cont'd)

Waited in Doctor's Office Less Than 30 Minutes Past Their Appointment Time (Exhibit 3-10)

Members were asked to rate how often during the last six months they/their child waited in the doctor's office less than 30 minutes past their appointment time.

- In 2002, about eight in ten members (82%) said that they always or usually waited in the doctor's office less than 30 minutes past their appointment time, while almost two in ten (18%) said they never or only sometimes waited less than 30 minutes past their appointment time.
- There were no statistically significant differences between the program average for 2001 and 2002.
 - However, there was a statistically significant difference among members of QualChoice between 2001 and 2002: results for QualChoice improved.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



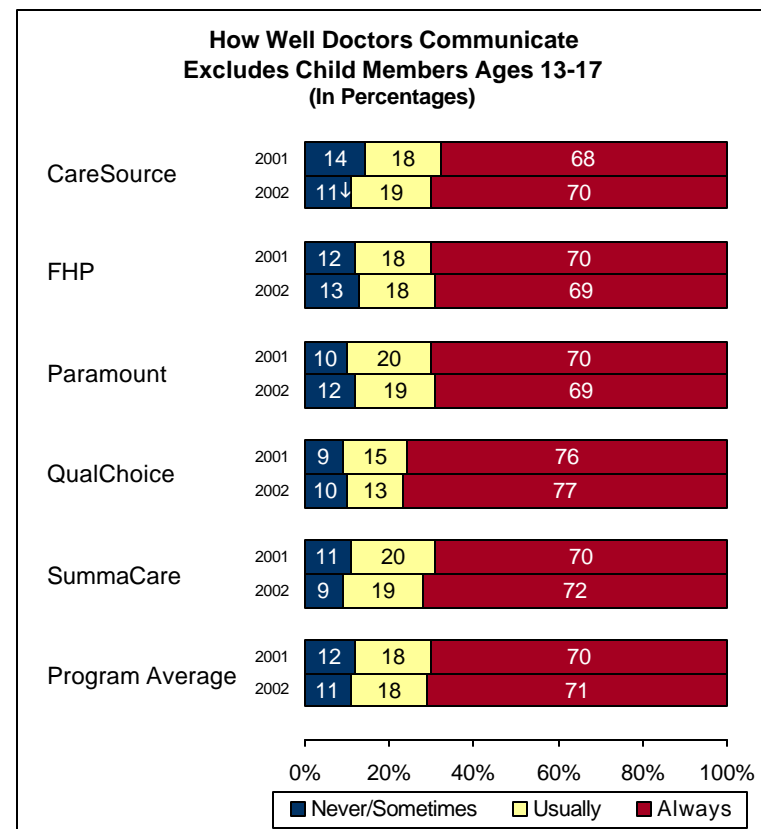
Base = Those who/whose child went to a doctor's office/clinic in the last 6 months and able to rate (AQ24/CQ29)

How Well Doctors Communicate

Composite Score for How Well Doctors Communicate (Exhibit 3-11)

The composite scores for “How Well Doctors Communicate”^{**} indicated that about seven in ten members feel that their/their child’s doctors always communicate well with them.

- The composite scores for “How Well Doctors Communicate” in 2002 showed a rating of always or usually by nearly nine in ten members (89%), while 11% gave a rating of never or only sometimes.
- There were no statistically significant differences between the program average for 2001 and 2002.
 - However, there was a statistically significant difference among members of CareSource between 2001 and 2002: results for CareSource improved.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



^{**}To get the percentages shown for the composite score “How Well Doctors Communicate,” we averaged the answers to four individual survey questions. These questions asked members to tell how often, during the last six months, doctors or other health providers:

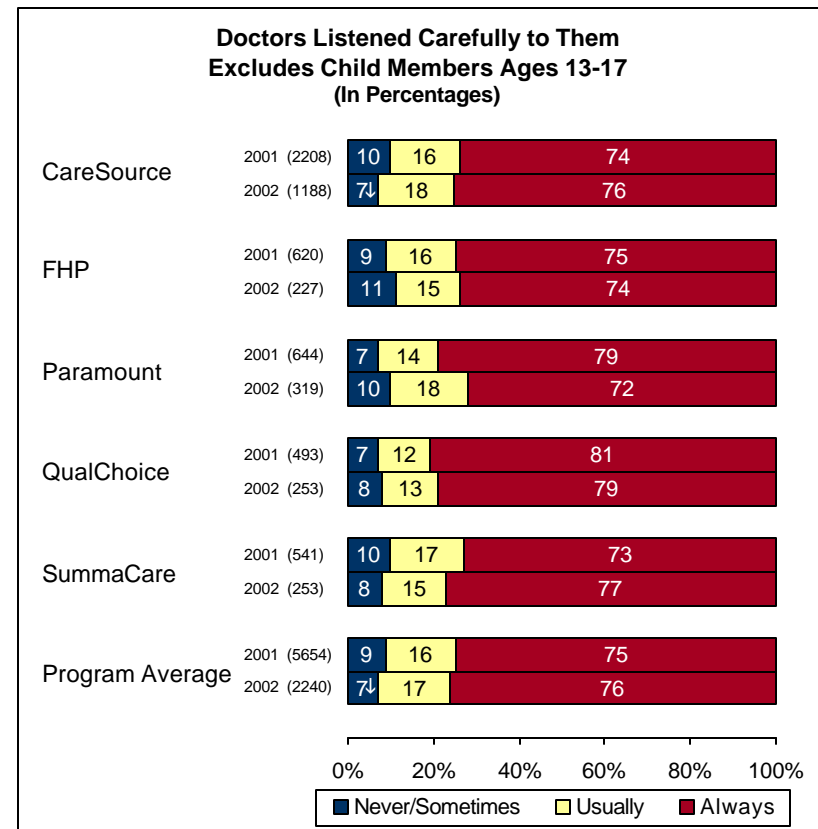
- Listened carefully to them (AQ27/CQ32)
- Explained things in a way they could understand (AQ29/CQ34)
- Showed respect for what they had to say (AQ30/CQ35)
- Spent enough time with them (AQ31/CQ39)

How Well Doctors Communicate (cont'd)

Doctors or Other Health Providers Listened Carefully to Them (Exhibit 3-12)

Members were asked to rate how often during the last six months their/their child's doctors or other health providers listened carefully to them.

- In 2002, 76% of members reported that their/their child's doctors or other health providers always or usually listened carefully to them.
- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were less likely to report that their/their child's doctors or other health providers never or only sometimes listened carefully to them (7%, down from 9% in 2001).
 - There was also a statistically significant difference among members of CareSource between 2001 and 2002: results for CareSource improved.
- However, there were no statistically significant differences in the program average nor the individual MCPs between 2001 and 2002.



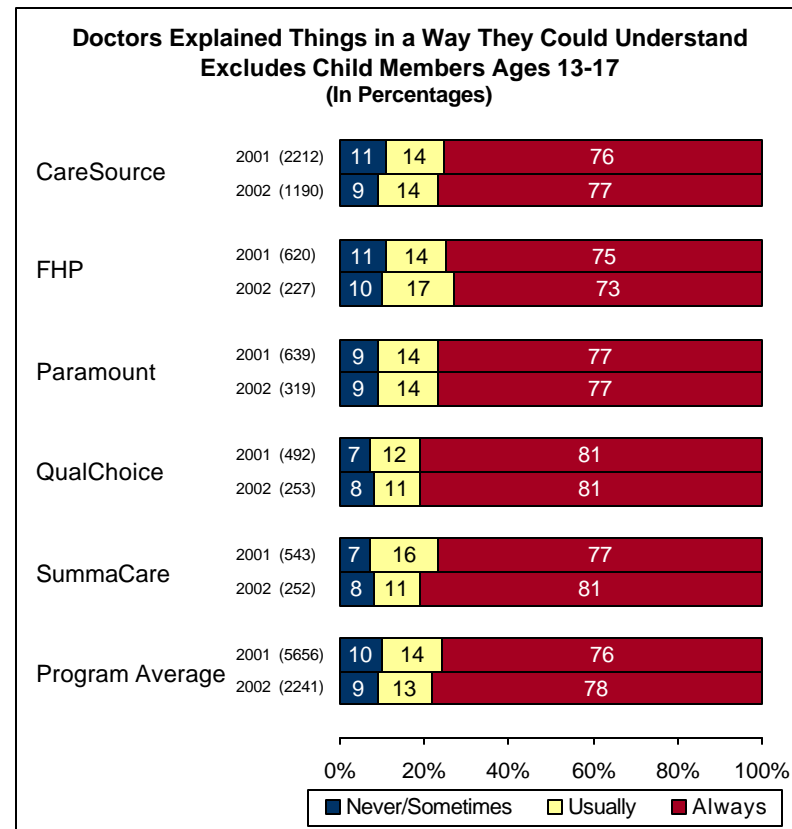
Base = Those who/whose child went to a doctor's office/clinic in the last 6 months and able to rate (AQ27/CQ32)

How Well Doctors Communicate (cont'd)

Doctors or Other Health Providers Explained Things in a Way They Could Understand (Exhibit 3-13)

Members were asked to rate how often during the last six months their/their child's doctors or other health providers explained things in a way they could understand.

- In 2002, about nine in ten members (91%) reported that their/their child's doctors or other health providers always or usually explained things in a way they could understand, while 9% said that they never or only sometimes did.
- There were no statistically significant differences between the program average nor the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and any individual MCP for 2002.



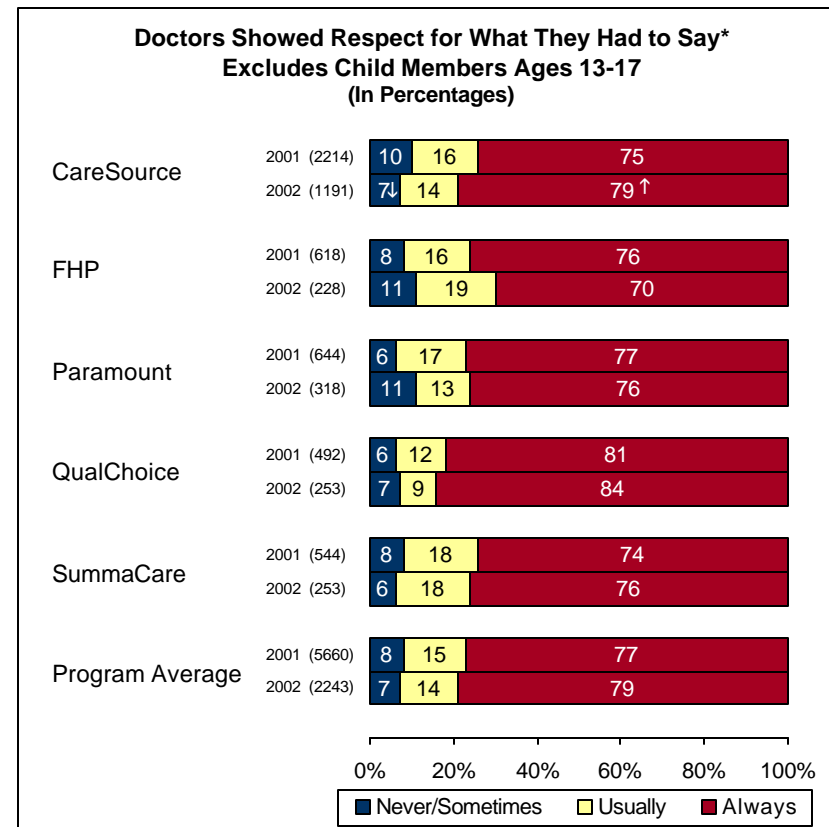
Base = Those who/whose child went to a doctor's office/clinic in the last 6 months and able to rate (AQ29/CQ34)

How Well Doctors Communicate (cont'd)

Doctors or Other Health Providers Showed Respect for What They Had to Say (Exhibit 3-14)

Members were asked to rate how often during the last six months their/their child's doctors or other health providers showed respect for what they had to say.

- In 2002, more than nine in ten members (93%) reported that their/their child's doctors or other health providers always showed respect for what they had to say, while 7% said that they never or only sometimes did.
- There were no statistically significant differences between the program average for 2001 and 2002.
 - > However, there were statistically significant differences among members of CareSource between 2001 and 2002: results for CareSource improved.
- There was also a statistically significant difference between the program average and FHP for 2002: the percent who reported that their/their child's doctors or other health providers never or only sometimes showed respect for what they had to say was higher for FHP than the program average.



Base = Those who/whose child went to a doctor's office/clinic in the last 6 months and able to rate (AQ30/CQ35)

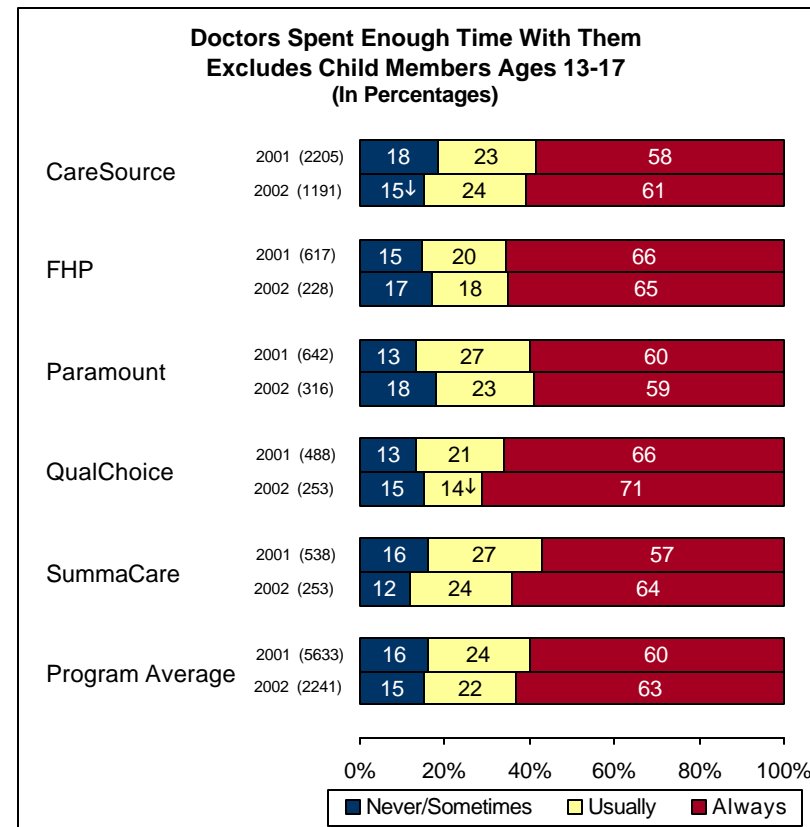
*There were statistically significant differences between at least one MCP and the program average for 2002.

How Well Doctors Communicate (cont'd)

Doctors or Other Health Providers Spent Enough Time with Them (Exhibit 3-15)

Members were asked to rate how often during the last six months their/their child's doctors or other health providers spent enough time with them.

- In 2002, more than eight in ten members (85%) reported that their/their child's doctors or other health providers always spent enough time with them, while 15% said that they never or only sometimes did.
- There were no statistically significant differences between the program average between 2001 and 2002.
 - However, there were statistically significant differences among members of CareSource and QualChoice between 2001 and 2002: results for CareSource improved and the percent of QualChoice members who reported that their/their child's doctors or other health providers usually spent enough time with them decreased between 2001 and 2002.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



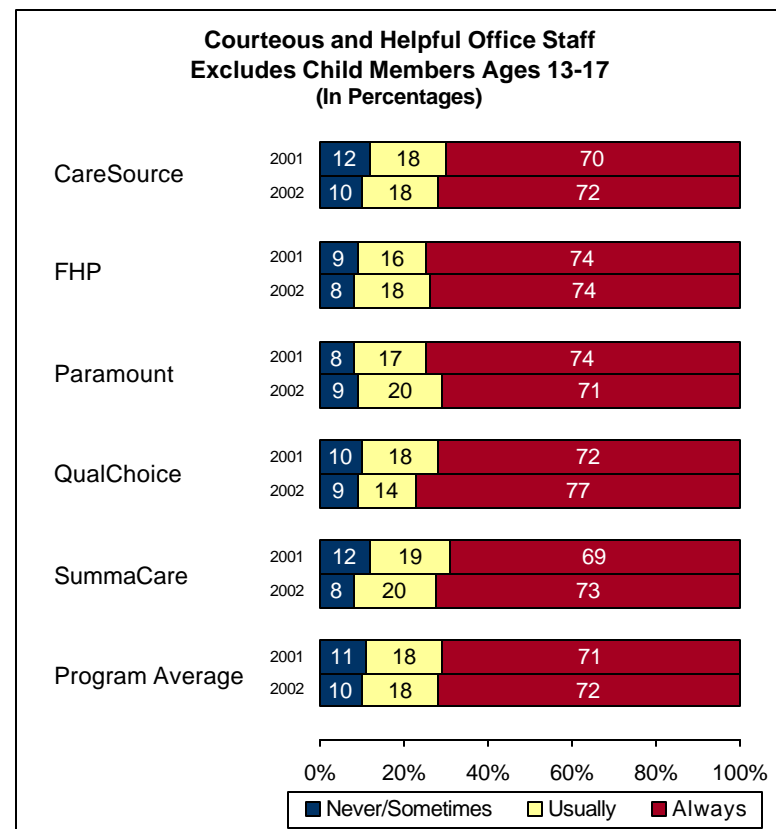
Base = Those who/whose child went to a doctor's office/clinic in the last 6 months and able to rate (AQ31/CQ39)

Courteous and Helpful Office Staff

Composite Score for Courteous and Helpful Office Staff (Exhibit 3-16)

The composite scores for “Courteous and Helpful Office Staff”* indicated that about seven in ten members report that the doctor’s office staff is always courteous and helpful.

- The composite scores for “Courteous and Helpful Office Staff” in 2002 showed a rating of always or usually by nine in ten members (90%), while 10% gave a rating of never or only sometimes.
- There were no statistically significant differences between the program average nor the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and any individual MCP for 2002.



*To get the percentages shown for the composite score “Courteous and Helpful Office Staff,” we averaged the answers to two individual survey questions. These questions asked members to tell how often, during the last six months, office staff at the doctor’s office or clinic:

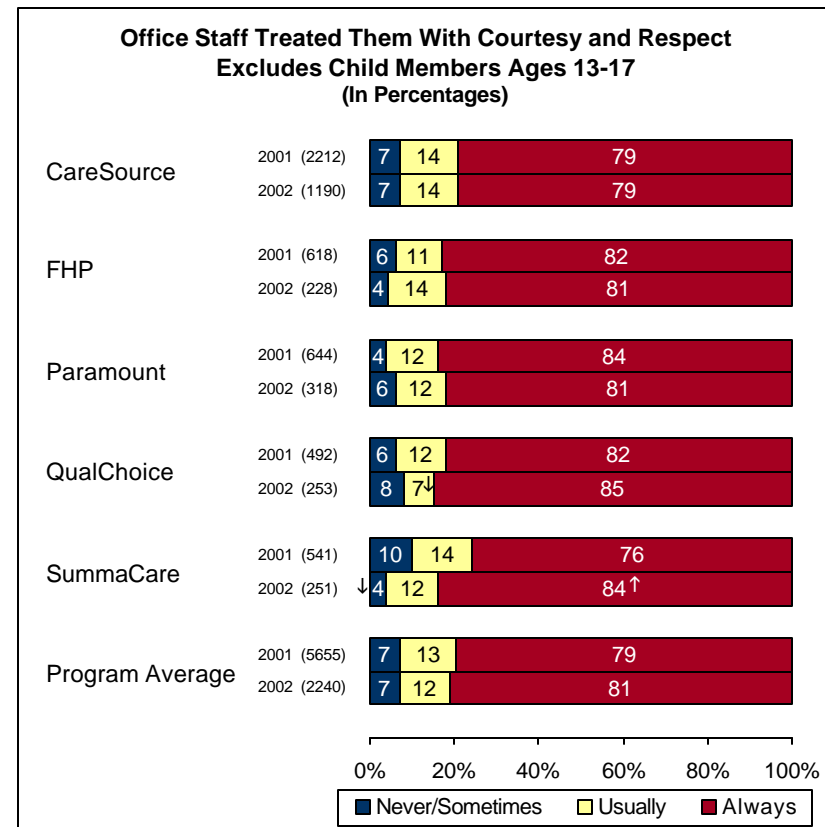
- Treated them with courtesy and respect (AQ25/CQ30)
- Were as helpful as they thought the staff should be (AQ26/CQ31)

Courteous and Helpful Office Staff (cont'd)

Office Staff Treated Them with Courtesy and Respect (Exhibit 3-17)

Members were asked to rate how often in the past six months the office staff at their/their child's doctor's office or clinic treated them with courtesy and respect.

- In 2002, more than nine in ten (93%) reported that the office staff at their/their child's doctor's office always or usually treated them with courtesy and respect, while 7% said that they never or only sometimes did.
- There were no statistically significant differences between the program average for 2001 and 2002.
 - In contrast, there were statistically significant differences among members of QualChoice and SummaCare between 2001 and 2002: results for SummaCare improved and the percent of QualChoice members who reported that the office staff at their/their child's doctor's office usually treated them with courtesy and respect decreased between 2001 and 2002.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



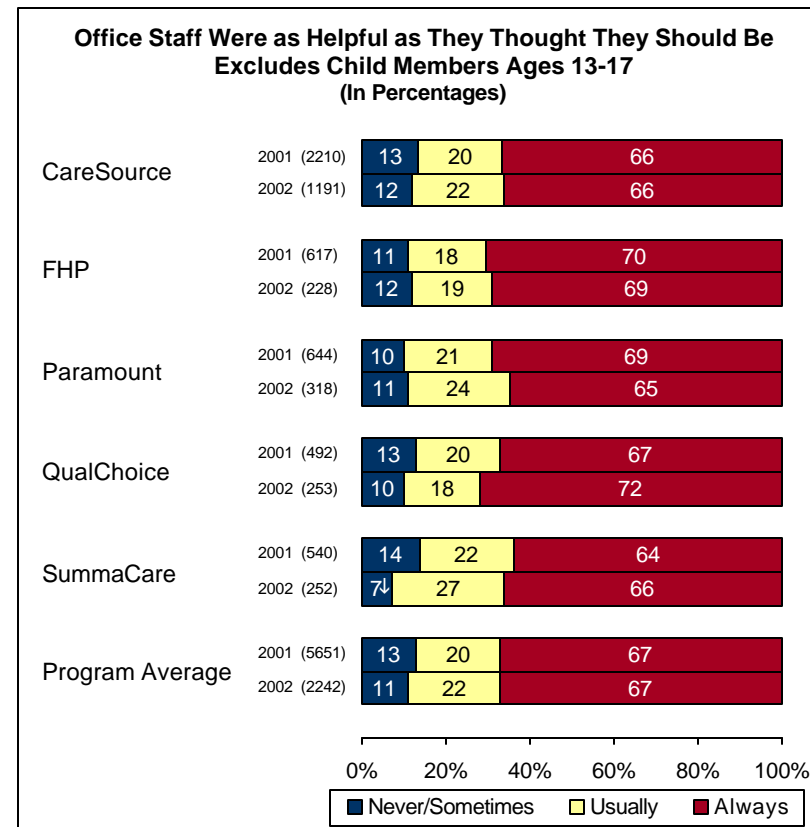
Base = Those who/whose child went to a doctor's office/clinic in the last 6 months and able to rate (AQ25/CQ30)

Courteous and Helpful Office Staff (cont'd)

Office Staff Were as Helpful as They Thought They Should Be (Exhibit 3-18)

Members were asked to rate how often in the past six months the office staff at their/their child's doctor's office or clinic were as helpful as they thought they should be.

- In 2002, roughly nine in ten members (89%) reported that the office staff at their/their child's doctor's office were always or usually as helpful as they thought they should be, while 11% said that they never or only sometimes were.
- There were no statistically significant differences between the program average for 2001 and 2002.
 - There was a statistically significant difference among members of SummaCare between 2001 and 2002: results for SummaCare improved.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



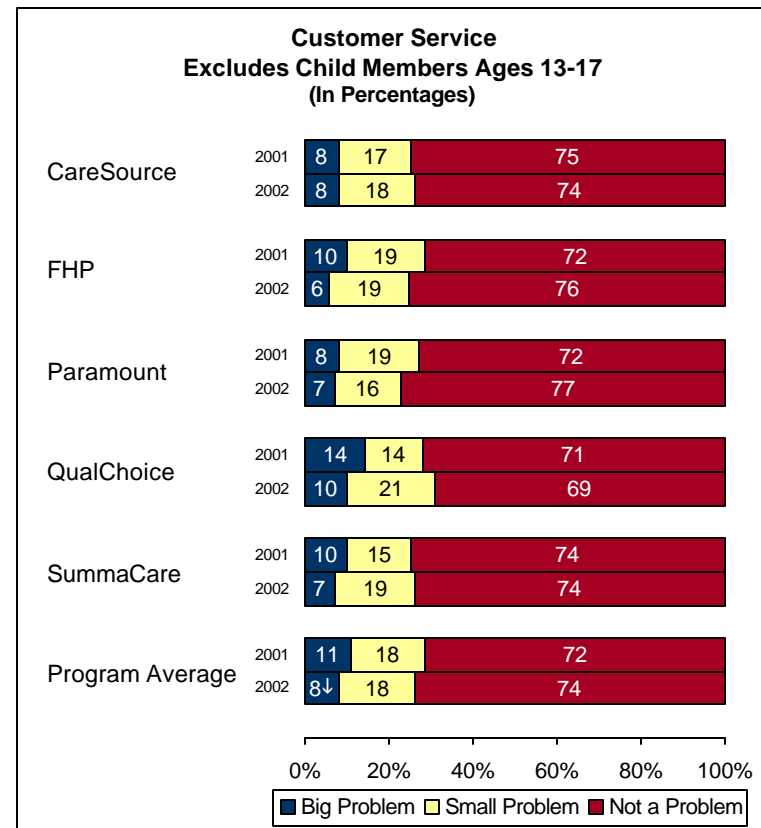
Base = Those who/whose child went to a doctor's office/clinic in the last 6 months and able to rate (AQ26/CQ31)

Customer Service

Composite Score for Customer Service (Exhibit 3-19)

The composite scores for “Customer Service”* indicated that more than seven in ten members have had no problems with issues related to customer service during the last six months.

- There were statistically significant differences between the program average for 2001 and 2002. Members in 2002 were less likely to report that they/their child had a big problem with issues related to customer service (8%, down from 11% in 2001).
 - In contrast, there were no statistically significant differences between the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and any individual MCP for 2002.



*To get the percentages shown for the composite score “Customer Service,” we averaged the answers to three individual survey questions. These questions asked members to tell how much of a problem, during the last six months, they had with:

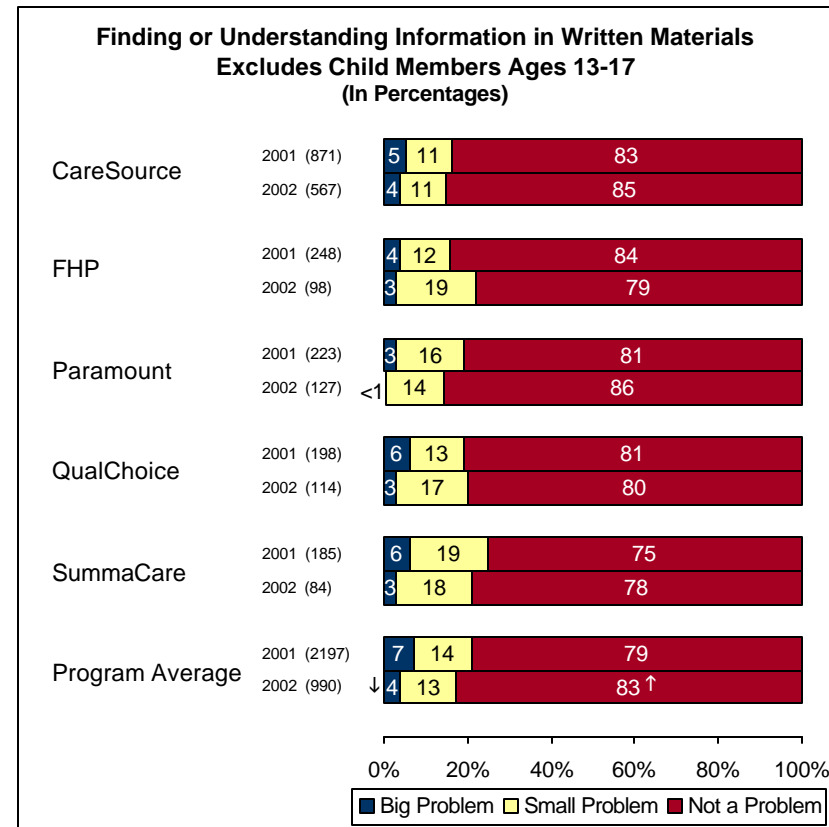
- Finding or understanding the information in the written materials (AQ42/CQ79)
- Getting the help needed when calling their health plan’s customer service (AQ44/CQ81)
- Paperwork for their health plan (AQ49/CQ86)

Customer Service (cont'd)

Finding or Understanding Information in Written Materials (Exhibit 3-20)

Members were asked to rate how much of a problem they had during the last six months with finding or understanding information in written materials from their/their child's health plan.

- 83% of members in 2002 reported that they had no problems finding or understanding information in written materials from their/their child's health plan.
- There were statistically significant differences between the program average for 2001 and 2002: ① more members reported that they had no problems finding or understanding information in written materials from their/their child's health plan (83%, up from 79%); and ② fewer members had a big problem (4%, down from 7%).
 - > In contrast, there were no statistically significant differences between the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and any individual MCP for 2002.



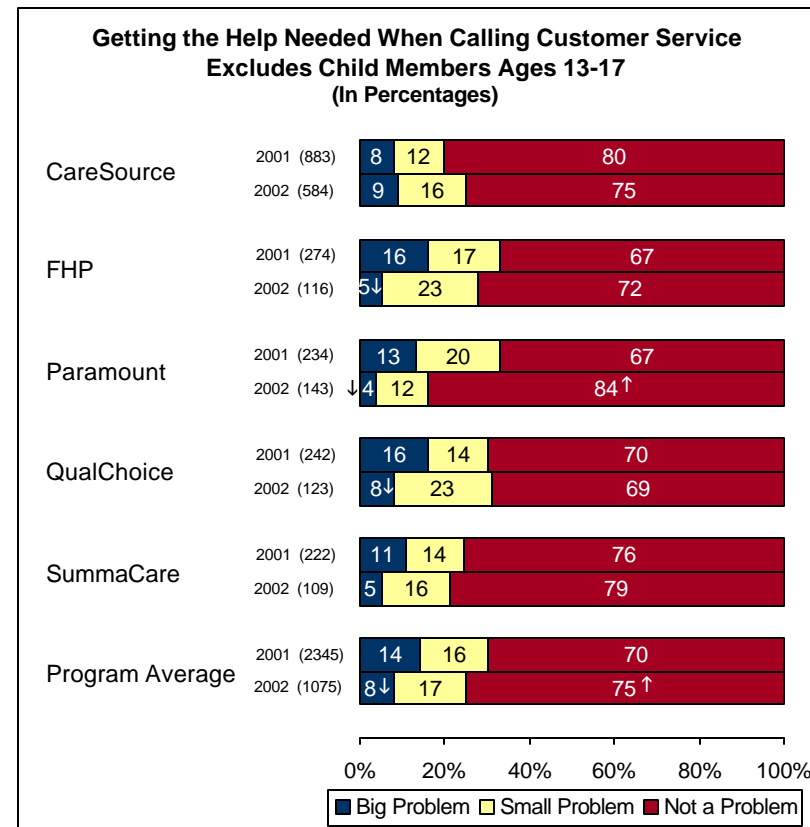
Base = Those who looked for information in written materials from their/their child's health plan and able to rate (AQ42/CQ79)

Customer Service (cont'd)

Getting the Help Needed When Calling Customer Service (Exhibit 3-21)

Members were asked to rate how much of a problem they had during the last six months with getting the help they/their child needed when calling customer service.

- 75% of members in 2002 reported that they had no problems getting the help they/their child needed when calling customer service.
- There were statistically significant differences between the program average for 2001 and 2002: ① more members reported that they had no problems getting the help they/their child needed when calling customer service (75%, up from 70%); and ② fewer members had a big problem (8%, down from 14%).
 - There were also statistically significant differences among members of FHP, Paramount, and QualChoice between 2001 and 2002: results improved for all three plans.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



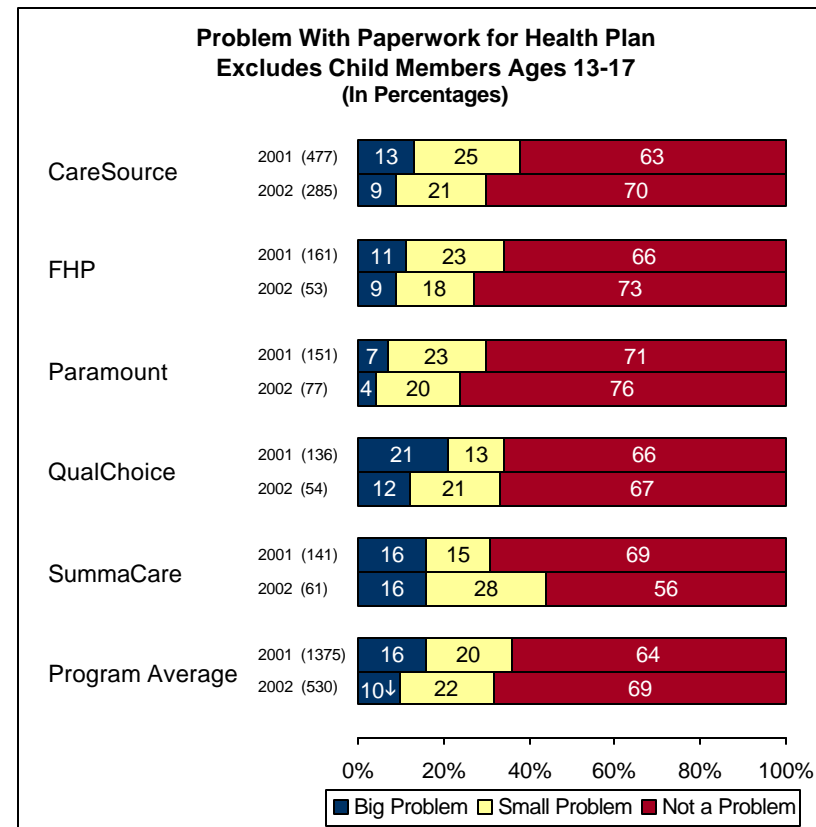
Base = Those who called the health plan's customer service to get information or help for themselves/their child and able to rate (AQ44/CQ81)

Customer Service (cont'd)

Problem with Paperwork for Their Health Plan (Exhibit 3-22)

Members were asked to rate how much of a problem they had during the last six months with paperwork for their/their child's health plan.

- 69% of members in 2002 reported that they had no problems with paperwork for their/their child's health plan.
- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were less likely to report that they had a big problem with paperwork for their/their child's health plan (10%, down from 16% in 2001).
 - However, there were no statistically significant differences between the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and any individual MCP for 2002.



Base = Those who had experiences with paperwork for their/their child's health plan in the last 6 months and able to rate (AQ49/CQ86)

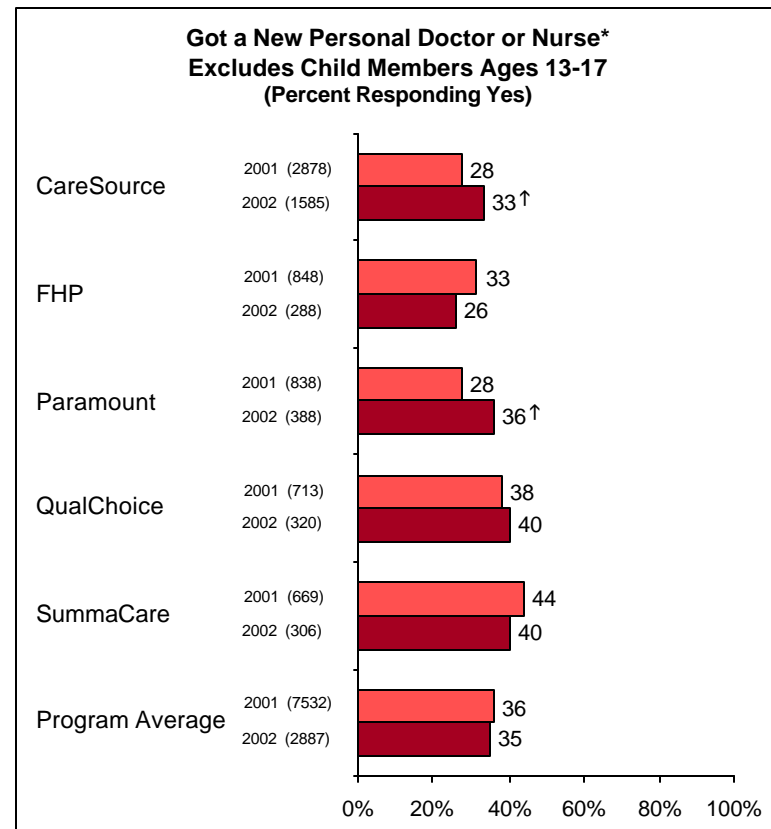
SATISFACTION WITH HEALTH PLAN

Satisfaction with Health Plan

Got a New Personal Doctor or Nurse (Exhibit 4-1)

Members were asked whether or not they/their child got a new personal doctor or nurse since they joined their health plan.

- In 2002, more than one-third of the members (35%) said that they/their child got a new personal doctor or nurse.
- There were no statistically significant differences between the program average for 2001 and 2002.
 - On the other hand, there were statistically significant differences among members of CareSource and Paramount between 2001 and 2002: results improved for both plans.
- There was also a statistically significant difference between the program average and FHP for 2002: the percent who reported that they/their child got a new personal doctor or nurse was lower for FHP than the program average.



Base = Those answering (AQ3/CQ3)

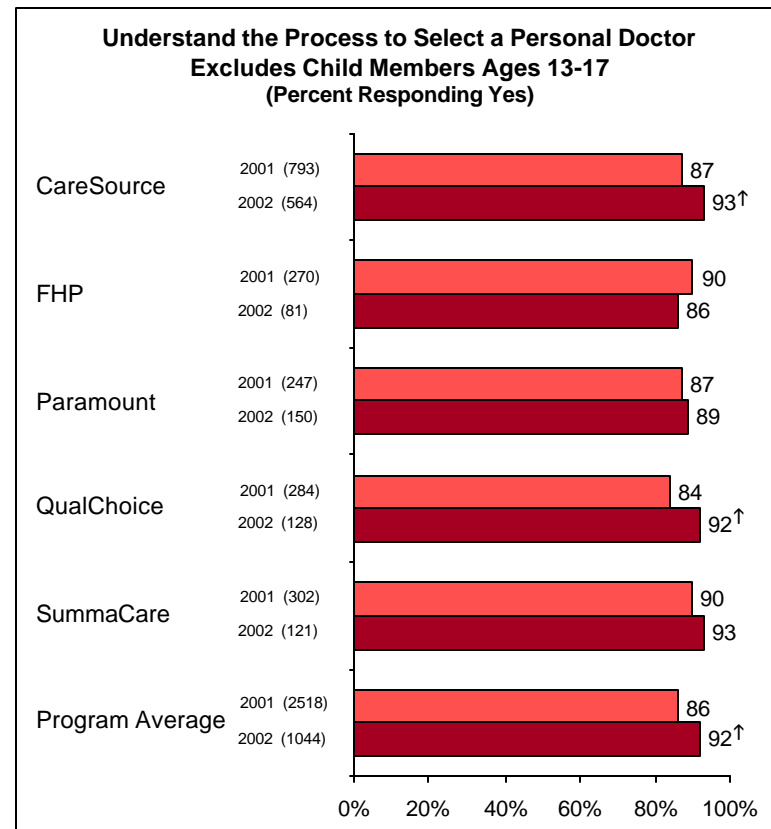
*There were statistically significant differences between at least one MCP and the overall average for 2002.

Satisfaction with Health Plan (cont'd)

Understand Process to Select Personal Doctor (Exhibit 4-2)

Members who got a new personal doctor or nurse were asked if they understood the process to select one.

- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were more likely to report that they understood the process to select a new doctor or nurse (92%, up from 86% in 2001).
 - There were also statistically significant differences among members of CareSource and QualChoice between 2001 and 2002: results improved for both plans.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



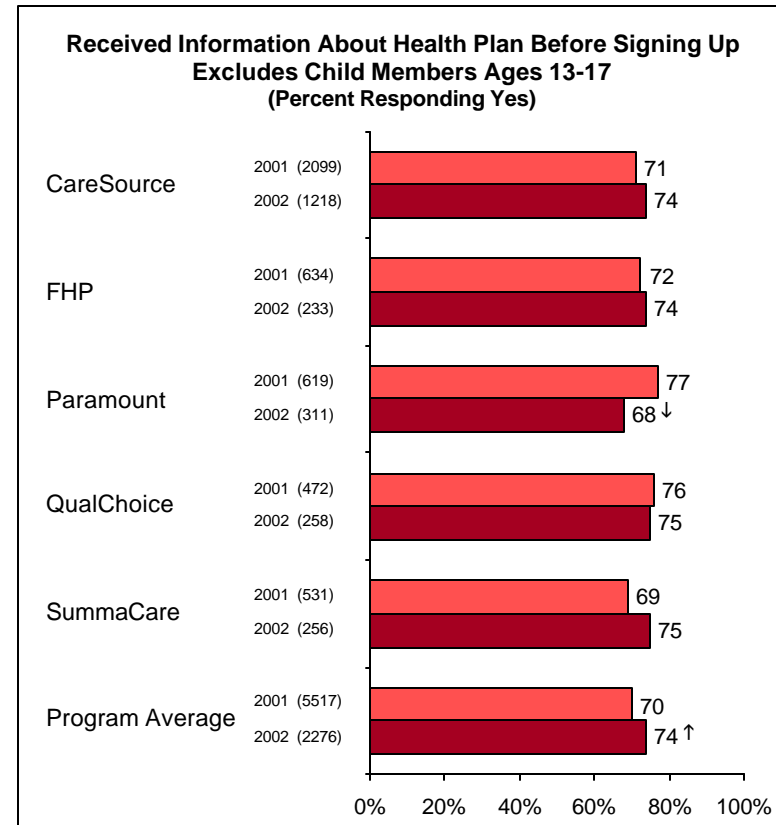
Base = Those who/whose child got a new personal doctor or nurse and answering (AQ4a/CQ4a)

Satisfaction with Health Plan (cont'd)

Received Information About Health Plan Before Signing Up (Exhibit 4-3)

Members who reported being covered by a Medicaid managed care plan paid for by the State Medicaid Program were asked whether they received information about their health plan before signing up.

- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were more likely to report that they received information about their health plan before signing up (74%, up from 70% in 2001).
 - There was also a statistically significant difference among members of Paramount between 2001 and 2002: results for Paramount decreased.
- There were no statistically significant differences between the program average and any individual MCP for 2002.
- Members tended to associate the information that they received before signing up for their health plan as coming from that plan. However, the information actually is sent by the state's enrollment contractor.



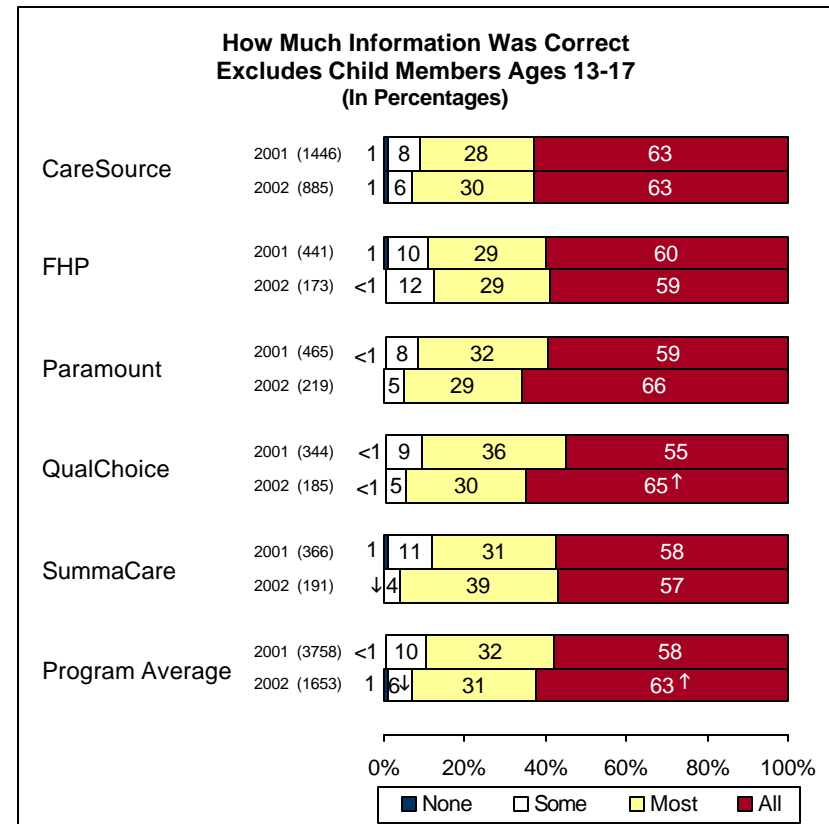
Base = Those who are/whose child is covered by Medicaid and answering (AQ39/CQ76)

Satisfaction with Health Plan (cont'd)

How Much Information Given Was Correct (Exhibit 4-4)

Those who reported being covered by a Medicaid managed care plan paid for by the State Medicaid Program and who received information about their plan before signing up were asked how much of the information they were given was correct.

- 63% of members in 2002 indicated that all or most of the information that they received was correct.
- There were statistically significant differences between the program average for 2001 and 2002: ① more members reported that all of the information was correct (63%, up from 58%); and ② fewer members said that only some of the information was correct (6%, down from 10%).
 - > There were also statistically significant differences among members of QualChoice and SummaCare between 2001 and 2002: results improved for both plans.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



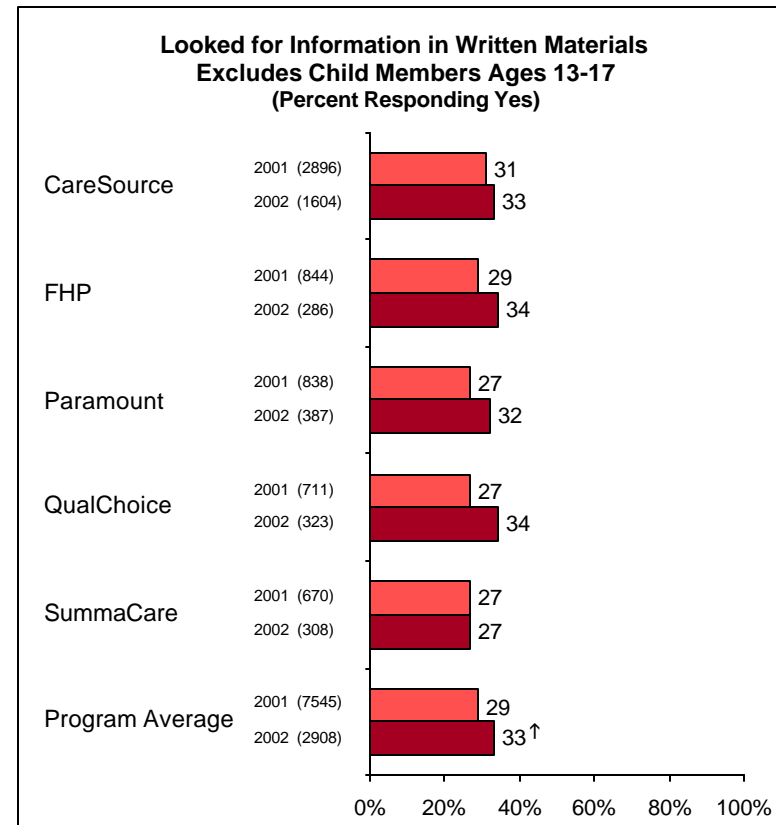
Base = Those who received information about their/their child's health plan before signing up and able to rate (AQ40/CQ77)

Satisfaction with Health Plan (cont'd)

Looked for Information in Written Materials (Exhibit 4-5)

All members were asked whether they looked for information in written materials from their health plan.

- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were more likely to say that they looked for information in their/their child's plan's written materials (33%, up from 29% in 2001).
 - However, there were no statistically significant differences between the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and any individual MCP for 2002.
- High utilizers of health care were more likely than low utilizers to report that they looked for information in their/their child's plan's written materials.



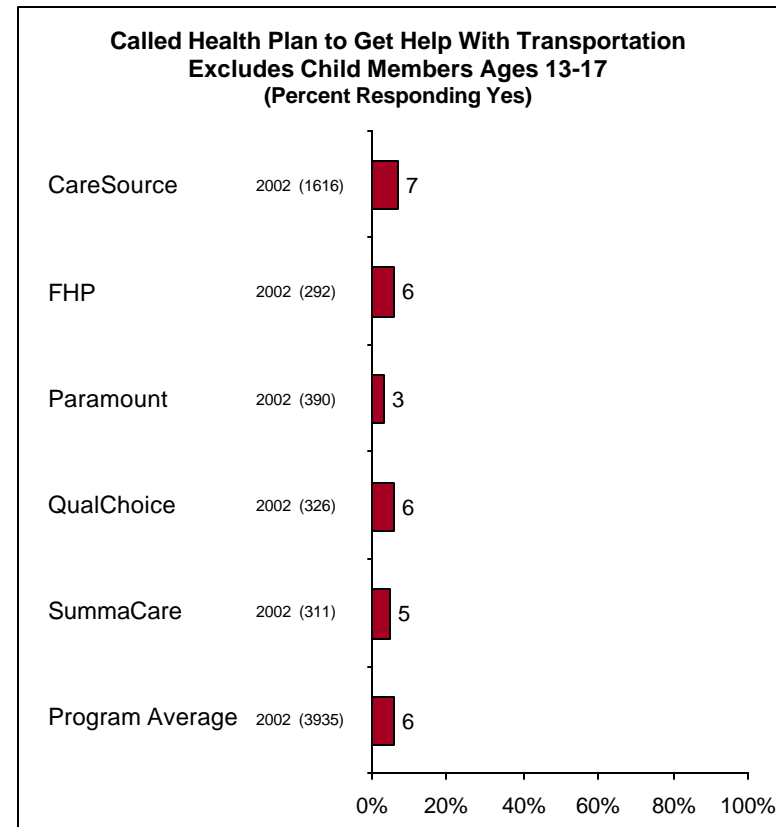
Base = Those answering (AQ41/CQ78)

Satisfaction with Health Plan (cont'd)

Called Health Plan to Get Help with Transportation (Exhibit 4-6)

Members were asked if they called their health plan to get help with transportation.

- In 2002, about one in twenty members (6%) reported that they called their/their child's health plan to get help with transportation.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



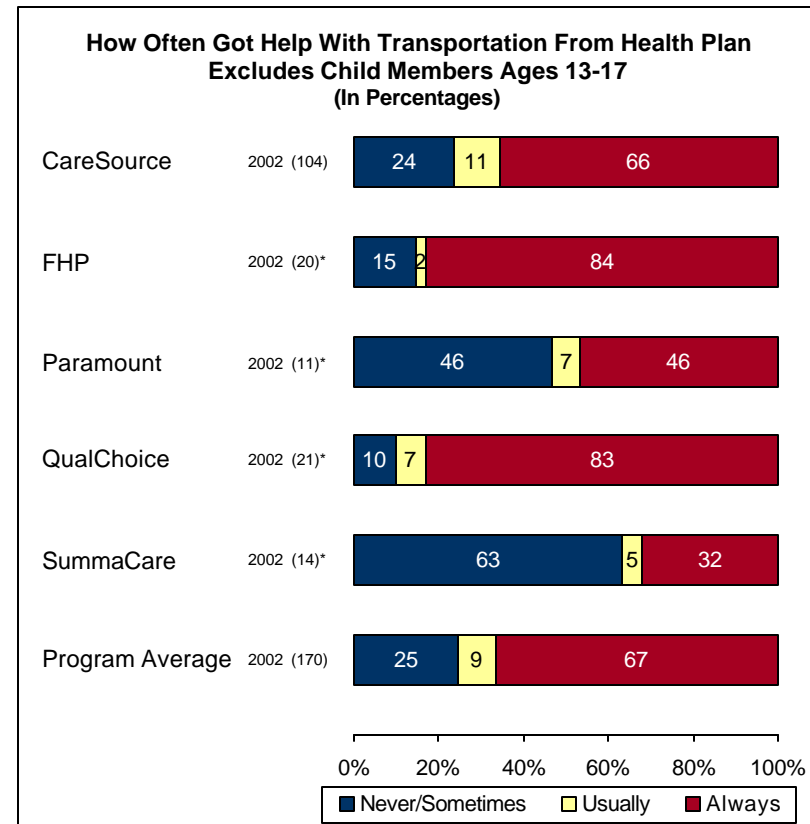
Base = Those answering
(AQ50a/CQ87a)

Satisfaction with Health Plan (cont'd)

How Often Got Help with Transportation From Health Plan (Exhibit 4-7)

Members who have called their health plan to get help with transportation were asked how often they received help with transportation.

- In 2002, three-fourths of these members (75%) reported that they always or usually got the help they needed with transportation from their/their child's health plan. However, one-fourth (25%) said that they never or only sometimes got the help they needed.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



Base = Those who called their/their child's health plan to get help with transportation and able to rate (AQ50b/CQ87b)

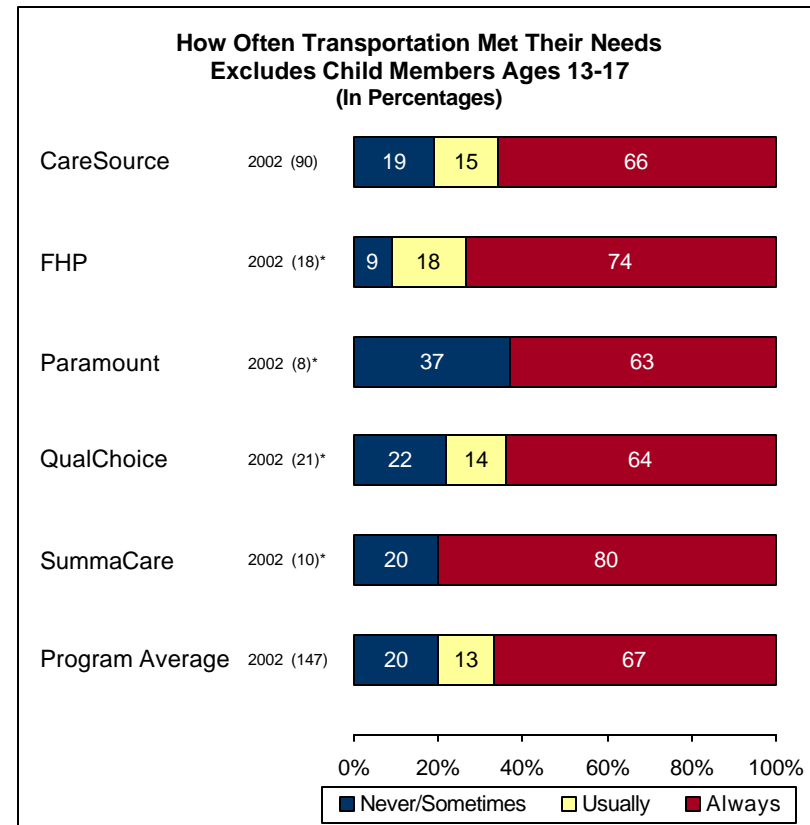
*Caution: Small Base

Satisfaction with Health Plan (cont'd)

How Often Transportation Met Their Needs (Exhibit 4-8)

Members who have called their health plan to get help with transportation were asked how often the help with transportation met their needs.

- In 2022, eight in ten of these members (80%) reported that the transportation they received always or usually met their needs, while 20% said that it never or only sometimes met their needs.
- There were no statistically significant differences between the program average and any individual MCP for 2022.



Base = Those who got help with transportation in the last 6 months and able to rate (AQ50c/CQ87c)

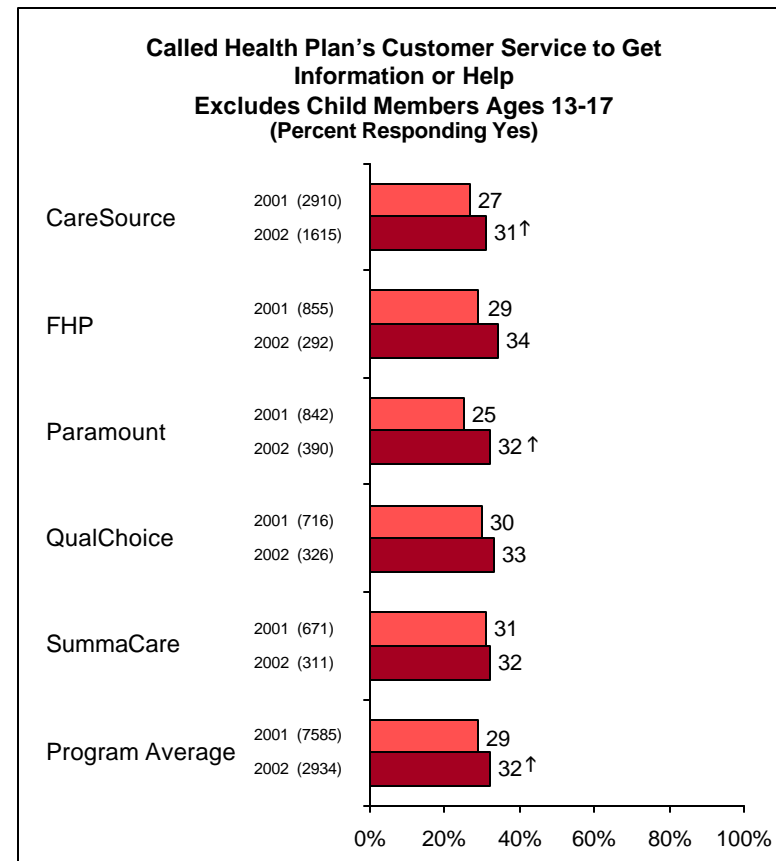
*Caution: Small Base

Satisfaction with Health Plan (cont'd)

Called Health Plan's Customer Service to Get Information or Help (Exhibit 4-9)

Members were asked whether they had called their health plan's customer service to get information or help.

- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were more likely to report that they contacted their plan's customer service to get information or help (32%, up from 29% in 2001).
 - There were also statistically significant differences among members of CareSource and Paramount between 2001 and 2002: results improved for both plans.
- There were no statistically significant differences between the program average and any individual MCP for 2002.
- High utilizers of health care were more likely than low utilizers to report that they contacted their plan's customer service to get information or help.



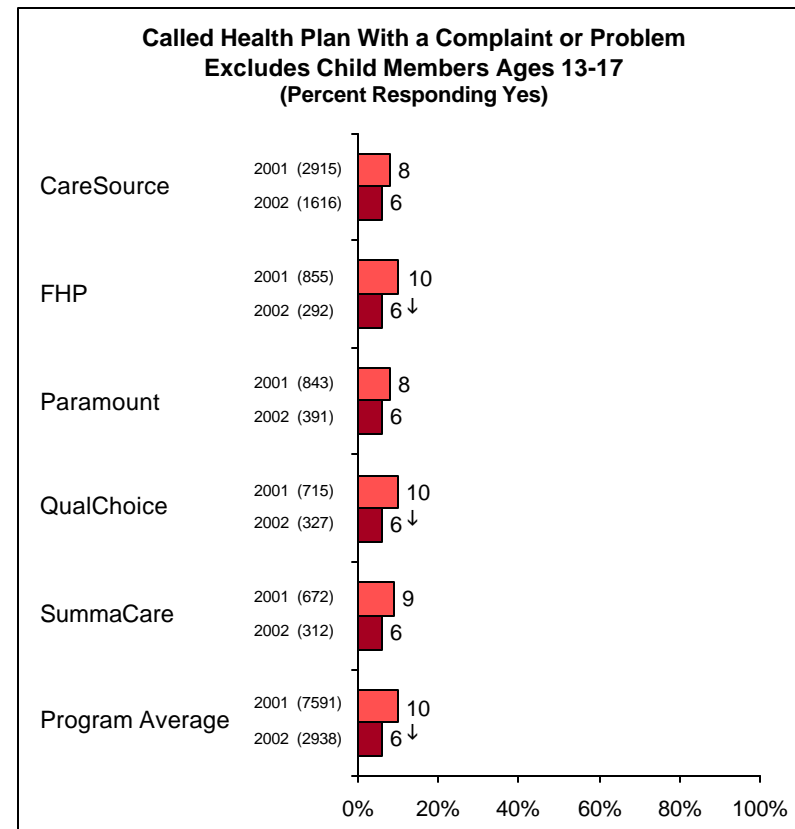
Base = Those answering (AQ43/CQ80)

Satisfaction with Health Plan (cont'd)

Called Health Plan with a Complaint or Problem (Exhibit 4-10)

Members were asked whether they had called or written their health plan with a complaint or problem in the previous six months.

- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were less likely to report that they have called or written their/their child's health plan with a complaint or problem (6%, down from 10% in 2001).
 - There were also statistically significant differences among members of FHP and QualChoice between 2001 and 2002: results improved for both plans.
- There were no statistically significant differences between the program average and any individual MCP for 2002.
- High utilizers of health care were more likely than low utilizers to report that they have called or written their/their child's health plan with a complaint or problem.



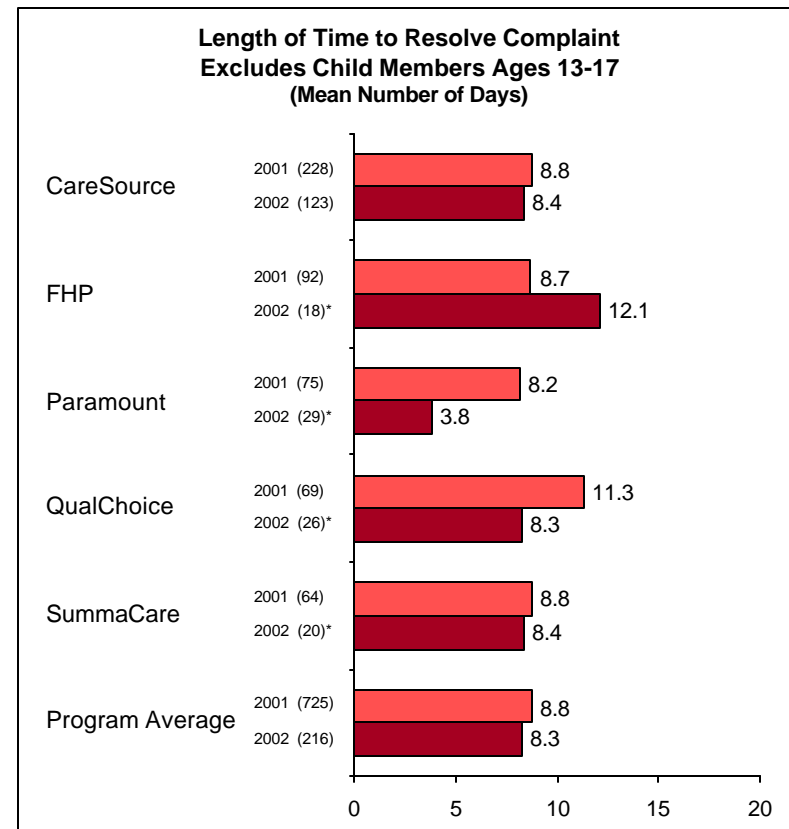
Base = Those answering
(AQ45/CQ82)

Satisfaction with Health Plan (cont'd)

Length of Time to Resolve Complaint (Exhibit 4-11)

Members who had called or written their health plan with a complaint or problem in the previous six months were then asked how long it took for the health plan to resolve their complaint or problem.

- In 2002, members reported that it took 8.3 days, on average, for their/their child's health plan to resolve their complaint or problem.
- There were no statistically significant differences between the program average nor the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and any individual MCP for 2002.



Base = Those who have called or written their/their child's health plan with a complaint/problem and answering (AQ46/CQ83)

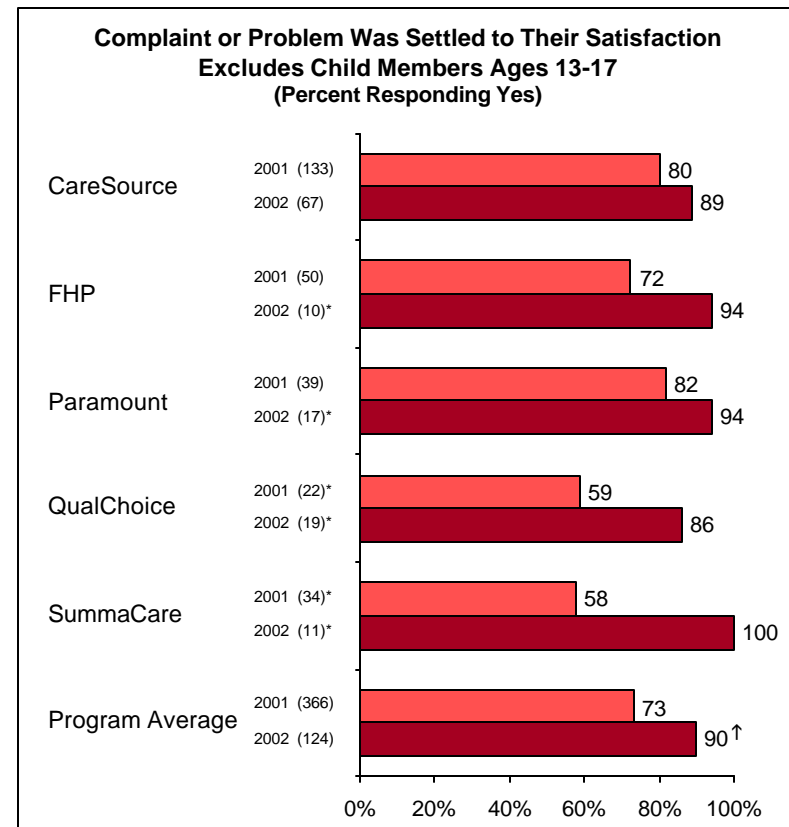
*Caution: Small Base

Satisfaction with Health Plan (cont'd)

Complaint or Problem Settled to Their Satisfaction (Exhibit 4-12)

Members who had called or written their health plan with a complaint or problem in the previous six months were asked if their complaint or problem had been settled to their satisfaction.

- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were more likely to report that their complaint or problem was settled to their satisfaction (90%, up from 73% in 2001).
 - There were no statistically significant differences between the individual MCPs for 2001 and 2002.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



Base = Those whose complaint or problem has been resolved and answering (AQ47/CQ84)

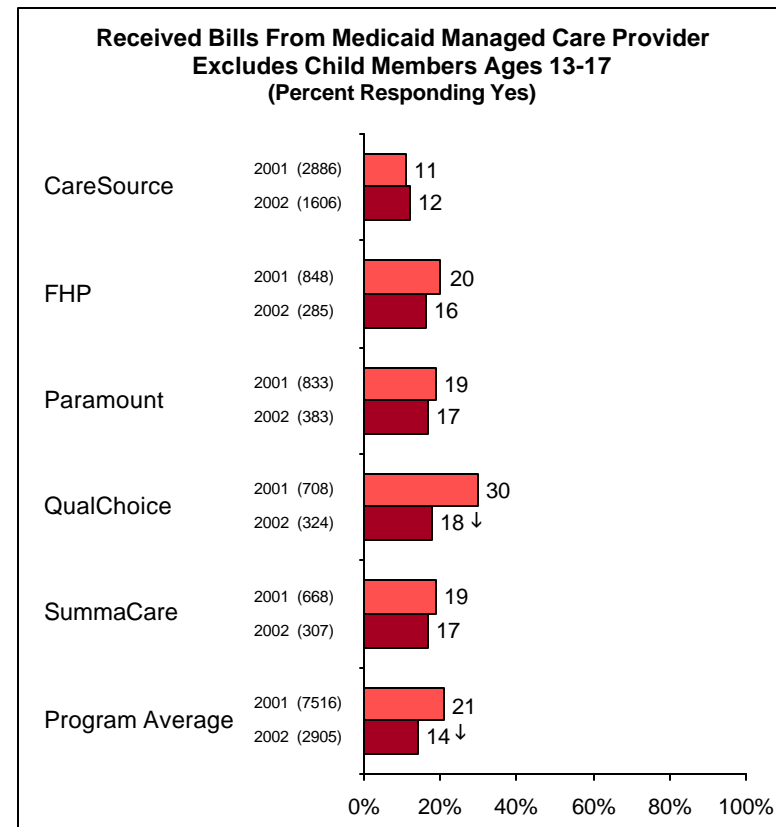
*Caution: Small Base

Satisfaction with Health Plan (cont'd)

Received Bills From Medicaid Managed Care Provider (Exhibit 4-13)

Members were asked if they received any bills from their Medicaid managed care provider.

- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were less likely to report that they received bills from their/their child's Medicaid managed care provider (14%, down from 21% in 2001).
 - There was also a statistically significant difference among members of QualChoice between 2001 and 2002: fewer QualChoice members in 2002 reported receiving bills from their Medicaid managed care provider.
- There were no statistically significant differences between the program average and any individual MCP for 2002.
- High utilizers of health care were more likely to report that they received bills from their/their child's Medicaid managed care provider compared to low utilizers.



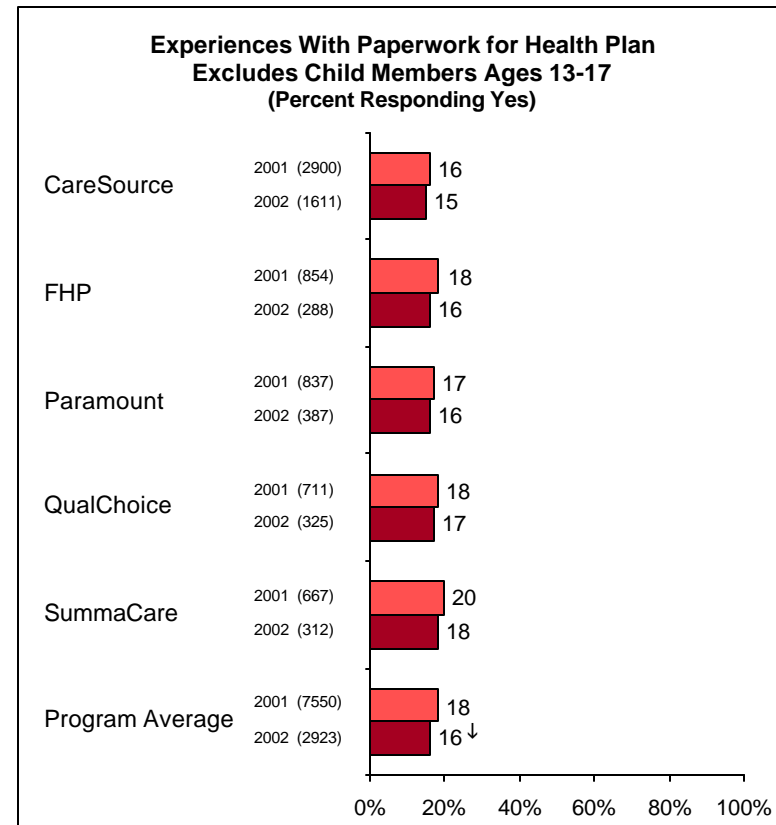
Base = Those answering (AQ47a/CQ84a)

Satisfaction with Health Plan (cont'd)

Experiences with Paperwork for Health Plan (Exhibit 4-14)

Members were asked whether they had any experiences with paperwork (e.g., getting their ID cards, having their records changed, processing forms, etc.) for their health plan.

- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were less likely to report having an experience with their plan's paperwork (16%, down from 18% in 2001).
 - There were no statistically significant differences between the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and any individual MCP for 2002.
- High utilizers of health care were more likely than low utilizers to report having an experience with their plan's paperwork.



Base = Those answering
(AQ48/CQ85)

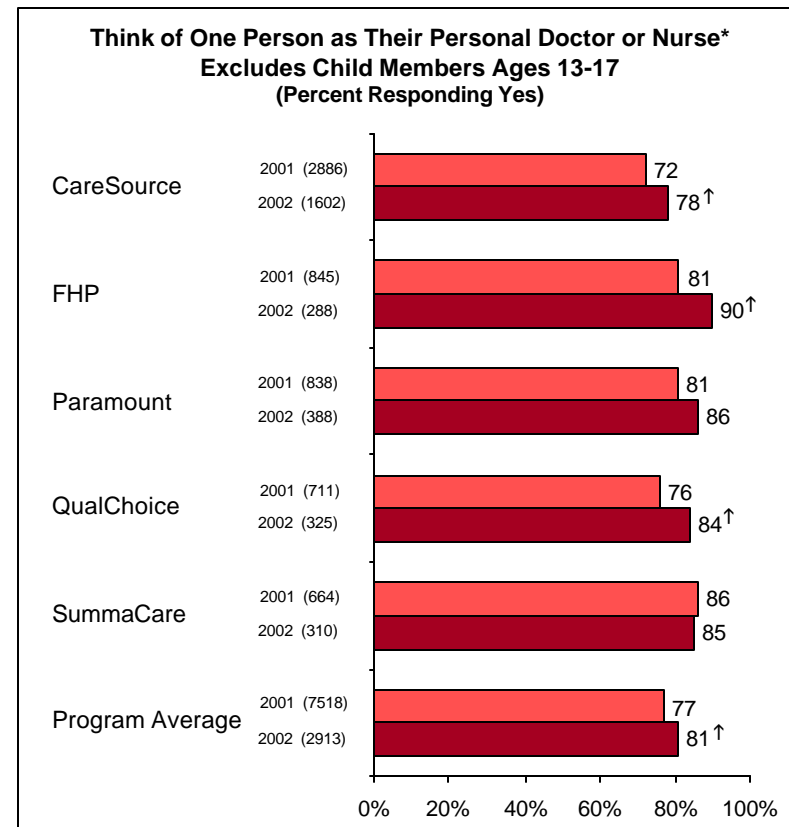
SATISFACTION WITH HEALTH CARE PROVIDERS

Satisfaction with Health Care Providers

Think of One Person as Their Personal Doctor or Nurse (Exhibit 5-1)

Members were asked if they have one person they think of as their personal doctor or nurse.

- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were more likely to report that they had one person they think of as their personal doctor or nurse (81%, up from 77% in 2001).
 - There were also statistically significant differences among members of CareSource, FHP, and QualChoice between 2001 and 2002: results improved for all three plans.
- There were statistically significant differences between results for the program average and CareSource and FHP for 2002. The percent who reported that they had one person they think of as their personal doctor or nurse is lower for CareSource than the program average, while it is higher for FHP.
- As might be expected, high utilizers of health care were more likely to report that they had one person they think of as their personal doctor or nurse compared to low utilizers.



Base = Those answering (AQ5/CQ5)

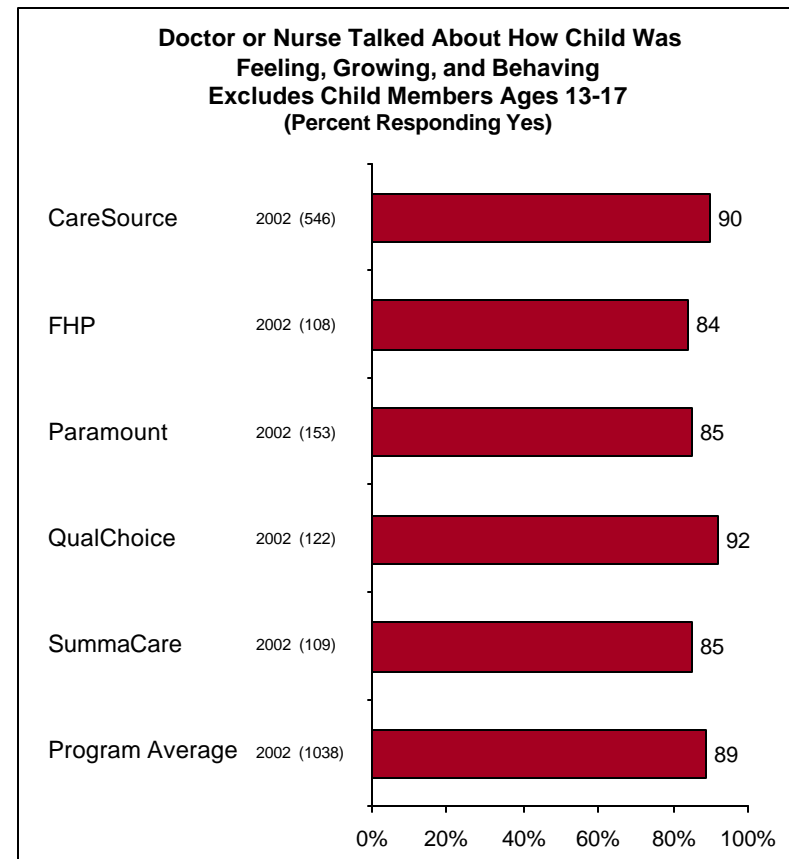
*There were statistically significant differences between at least one MCP and the overall average for 2002.

Satisfaction with Health Care Providers (cont'd)

Doctor or Nurse Talked About How Child Was Feeling, Growing, and Behaving (Exhibit 5-2)

In 2002, child members who had one person they think of as their child's personal doctor or nurse were asked if their personal doctor or nurse talked to them about how their child was feeling, growing and behaving.

- In 2002, nearly nine in ten members (89%) said that their child's doctor or nurse talked to them about how their child was feeling, growing, and behaving.
- There were no statistically significant differences between the program average and any individual MCP for 2002.
- High utilizers of health care were more likely to report that their child's doctor or nurse talked to them about how their child was feeling, growing, and behaving compared to low utilizers.



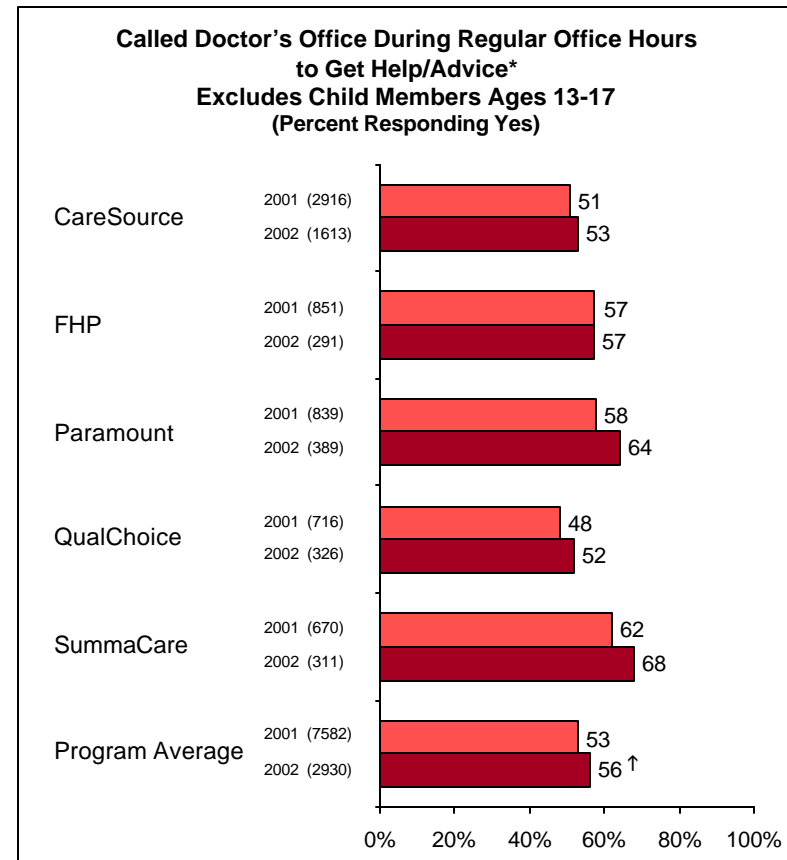
Base = Those who have one person they think of as their child's personal doctor/nurse, have visited their doctor in the last 6 months, and answering (CQ7)

Satisfaction with Health Care Providers (cont'd)

Called Doctor's Office During Regular Office Hours to Get Help or Advice (Exhibit 5-3)

Members were asked whether, in the previous six months, they had called their/their child's doctor's office or clinic during regular office hours to get help or advice.

- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were more likely to report that they called their doctor's office during regular office hours to get help or advice (56%, up from 53% in 2001).
 - However, there were no statistically significant differences between the individual MCPs for 2001 and 2002.
- There were statistically significant differences between the program average and Paramount and SummaCare for 2002: the percent who reported calling their/their child's doctor's office or clinic during regular office hours to get help or advice was higher for both Paramount and SummaCare than the program average.



Base = Those answering (AQ12/CQ17)

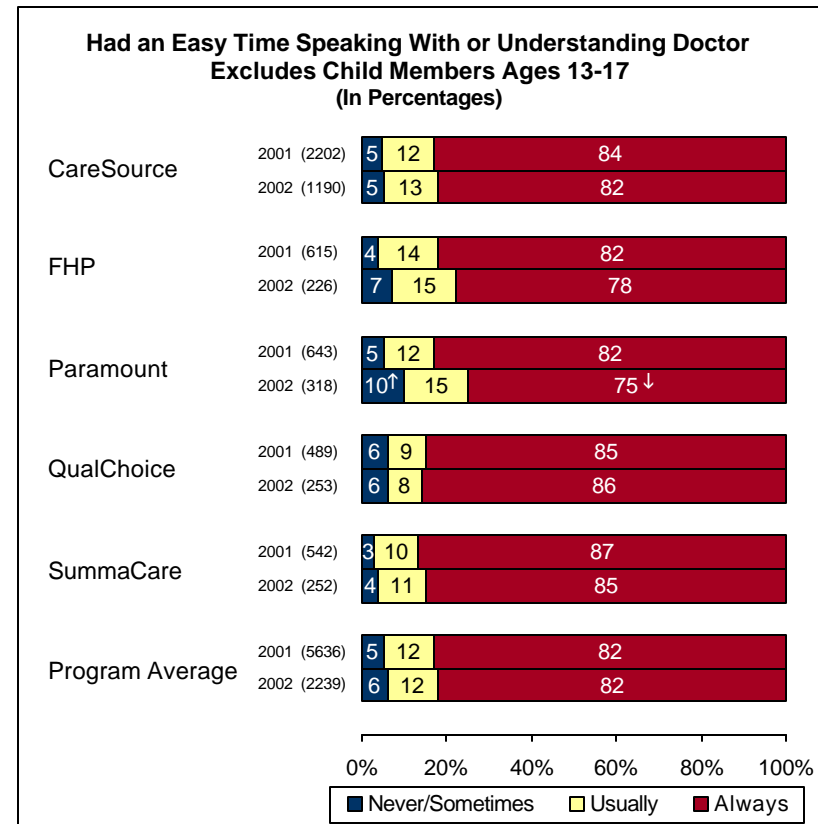
*There were statistically significant differences between at least one MCP and the overall average for 2002.

Satisfaction with Health Care Providers (cont'd)

Had an Easy Time Speaking with or Understanding Their Doctor (Exhibit 5-4)

Members who visited a doctor's office in the past six months were asked how often they had an easy time speaking with or understanding their/their child's doctor or other health provider.

- In 2002, more than nine in ten members (94%) reported that they always or usually had an easy time speaking with or understanding their/their child's personal doctor or nurse, while 6% said that they never or only sometimes did.
- There were no statistically significant differences between the program average for 2001 and 2002.
 - There were statistically significant differences among members of Paramount between 2001 and 2002: results for Paramount decreased.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



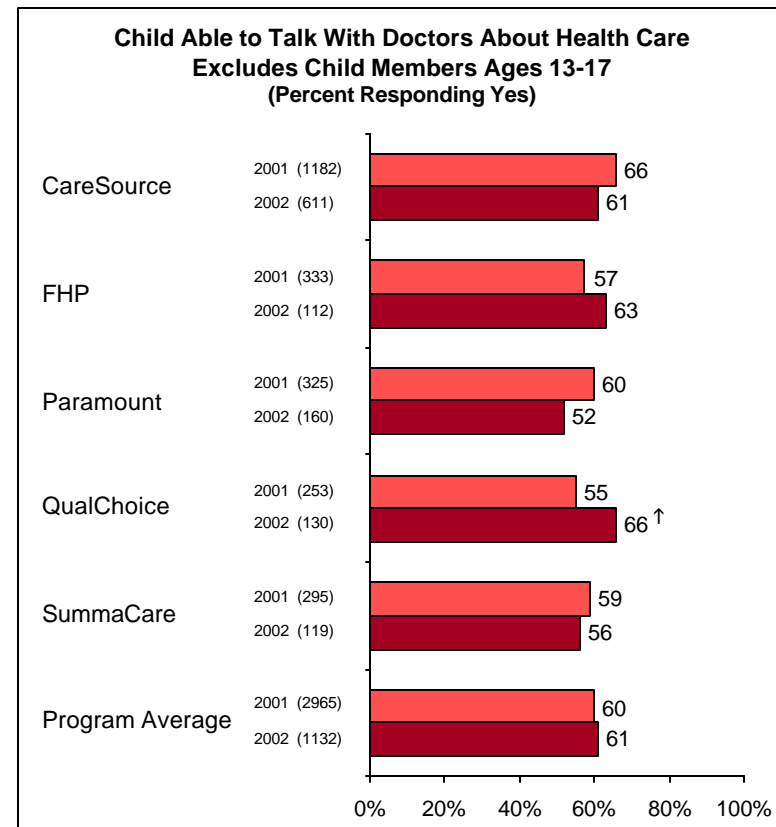
Base = Those who/whose child went to a doctor's office/clinic in the last 6 months and able to rate (AQ28/CQ33)

Satisfaction with Health Care Providers (cont'd)

Child Able to Talk with Doctors About Health Care (Exhibit 5-5)

Members whose child visited a doctor's office in the past six months were asked whether their child was able to talk to their doctor about their health and health care.

- In 2002, about six in ten (61%) said their child was able to talk to their doctor about their health care.
- There were no statistically significant differences between the program average for 2001 and 2002.
 - On the other hand, there was a statistically significant difference among members of QualChoice between 2001 and 2002: more QualChoice members in 2002 reported that their child was able to talk with their doctor about their health care.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



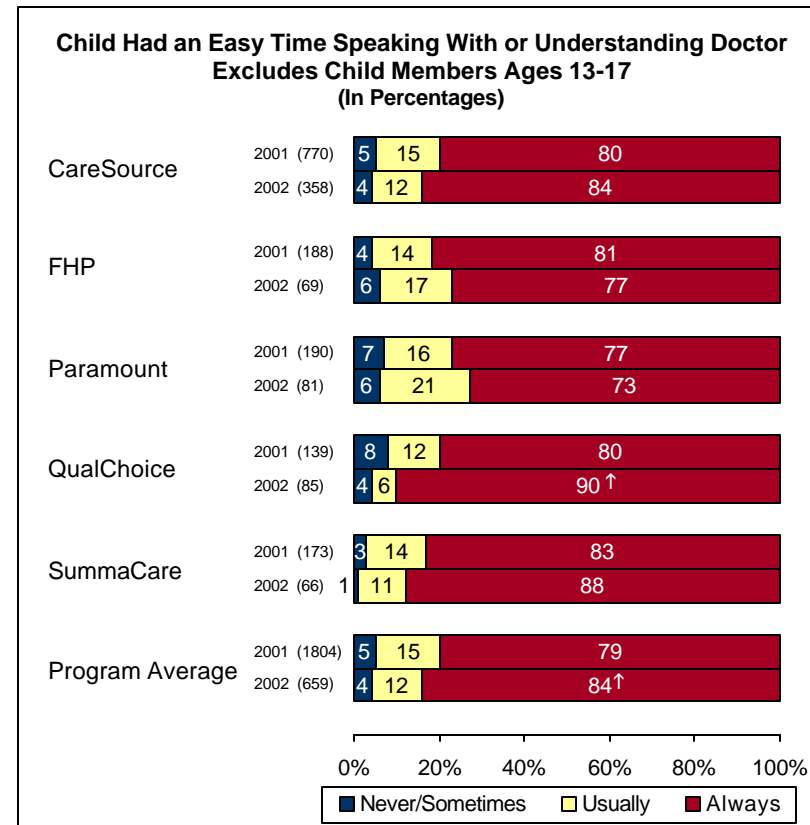
Base = Those whose child went to a doctor's office/clinic in the last 6 months and answering (CQ36)

Satisfaction with Health Care Providers (cont'd)

How Often Child Had an Easy Time Speaking with or Understanding Their Doctor (Exhibit 5-6)

Child members who visited a doctor's office in the past six months and were old enough to talk to their doctor were asked how often their child had an easy time speaking with the doctor.

- In 2002, 84% of members reported that their child always had an easy time speaking with their doctor.
- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were more likely to report that their child always had an easy time speaking with their doctor (84%, up from 79% in 2001).
 - There was also a statistically significant difference among members of QualChoice between 2001 and 2002: results for QualChoice improved.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



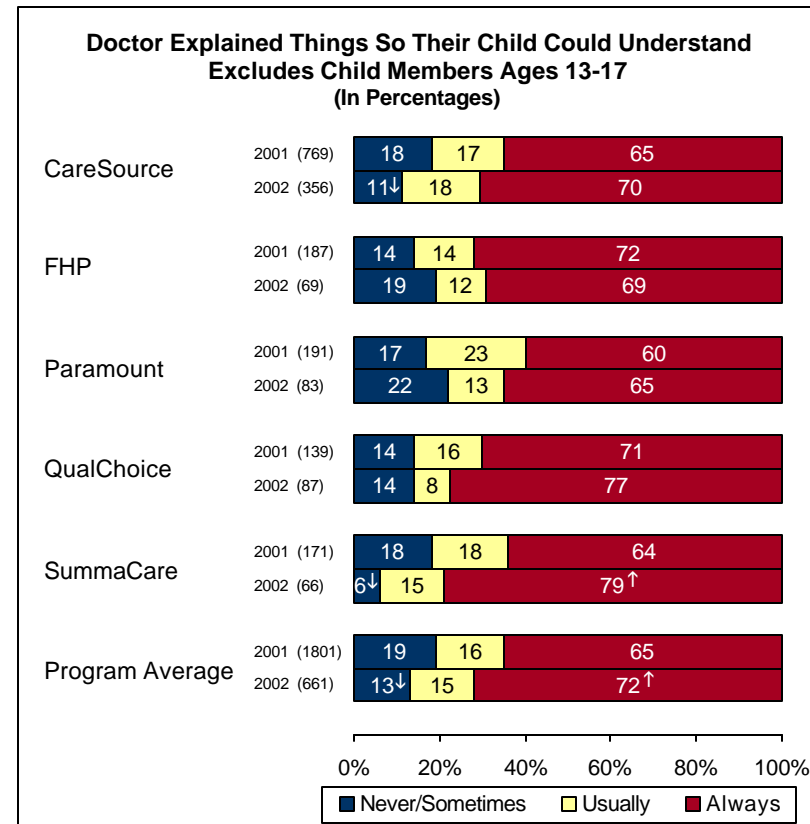
Base = Those whose child went to a doctor's office/clinic, able to talk with doctors about his or her health care and able to rate (CQ37)

Satisfaction with Health Care Providers (cont'd)

How Often Doctor Explained Things So Their Child Could Understand (Exhibit 5-7)

Child members who visited a doctor's office in the past six months and were old enough to talk to their doctor were asked how often their doctor explained things so the child could understand.

- In 2002, 72% of members reported that their child's doctor always or usually explained things clearly so that their child could understand.
- There were statistically significant differences between the program average for 2001 and 2002: ① more members reported that their child's doctor always explained things clearly so that their child could understand (72%, up from 65%); and ② fewer members said their child's doctor never or only sometimes did (13%, down from 19%) .
 - There were also statistically significant differences among members of CareSource and SummaCare between 2001 and 2002: results improved for both plans.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



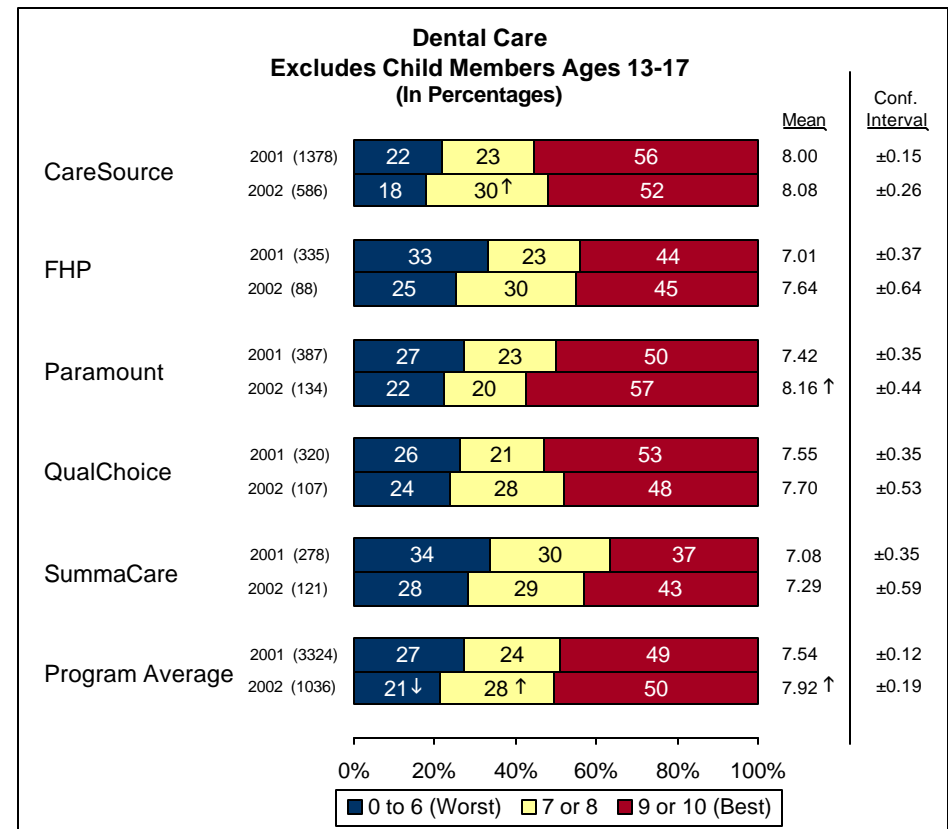
Base = Those whose child went to a doctor's office/clinic, able to talk with doctors about his or her health care and able to rate (CQ38)

Satisfaction with Health Care Providers (cont'd)

Overall Rating of Dental Care (Exhibit 5-8)

Members who went to a dentist or tried to get dental care in the last six months were asked to rate the dental care on a 0-10 scale, where a “0” means the worst dental care possible and a “10” means the best dental care possible.

- In 2002, members rated the dental care that they/their child received a 7.92, on average.
- There were statistically significant differences between the program average for 2001 and 2002: ① members rated the dental care that they/their child received higher, on average (7.92, up from 7.54); ② more members gave a rating of 7 or 8 (28%, up from 24%); and ③ fewer members rated the dental care they/their child received less than 7 (21%, down from 27%).
 - > There were also statistically significant differences among members of CareSource and Paramount between 2001 and 2002: results for Paramount improved and the percent of CareSource members rating their/their child's dental care a 7 or 8 increased between 2001 and 2002.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



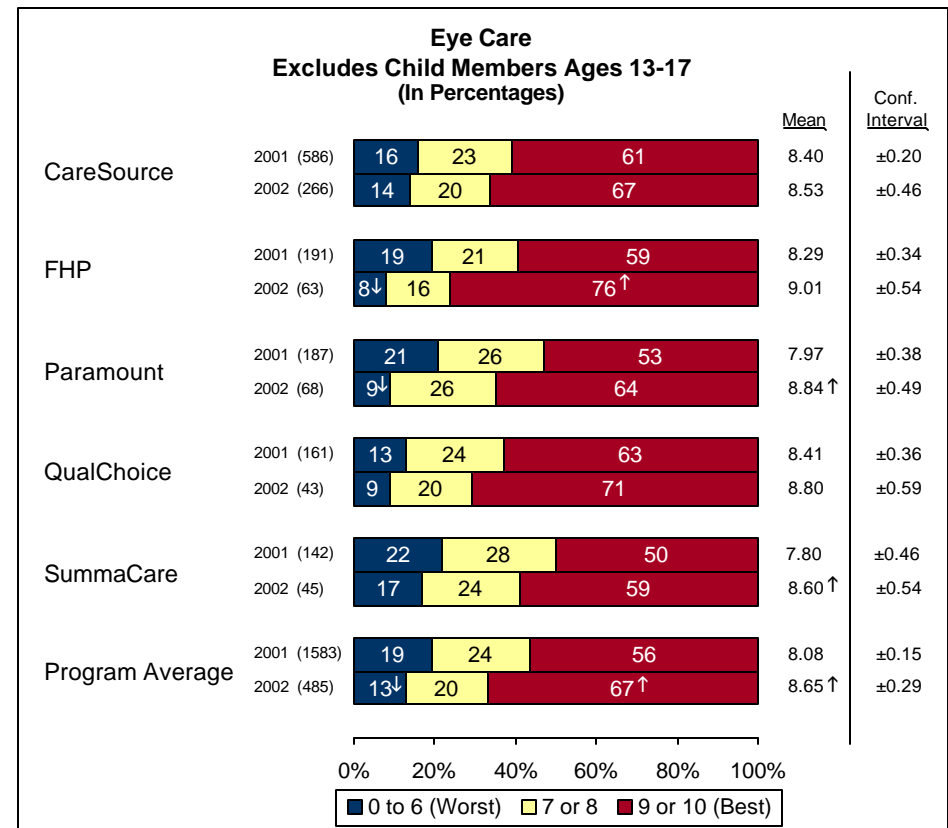
Base = Those who/whose child went to their dentist's office or dental clinic in the last 6 months and able to rate (AQ34e/CQ56e)

Satisfaction with Health Care Providers (cont'd)

Overall Rating of Eye Care (Exhibit 5-9)

Members who went to an eye doctor in the last six months were asked to rate their eye care on a 0-10 scale where a “0” means the worst eye care possible and a “10” means the best eye care possible.

- In 2002, members rated the eye care that they/their child received an 8.65, on average.
- There were statistically significant differences between the program average for 2001 and 2002: ① members rated the eye care that they/their child received higher, on average (8.65, up from 8.08); ② more members rated the eye care they/their child received a 9 or 10 (67%, up from 56%); and ③ fewer members rated the eye care they/their child received less than 7 (13%, down from 19%).
 - There were also statistically significant differences among members of FHP, Paramount, and SummaCare between 2001 and 2002: results improved for all three plans.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



Base = Those who/whose child went to their eye doctor in the last 6 months and able to rate (AQ34j/CQ56j)

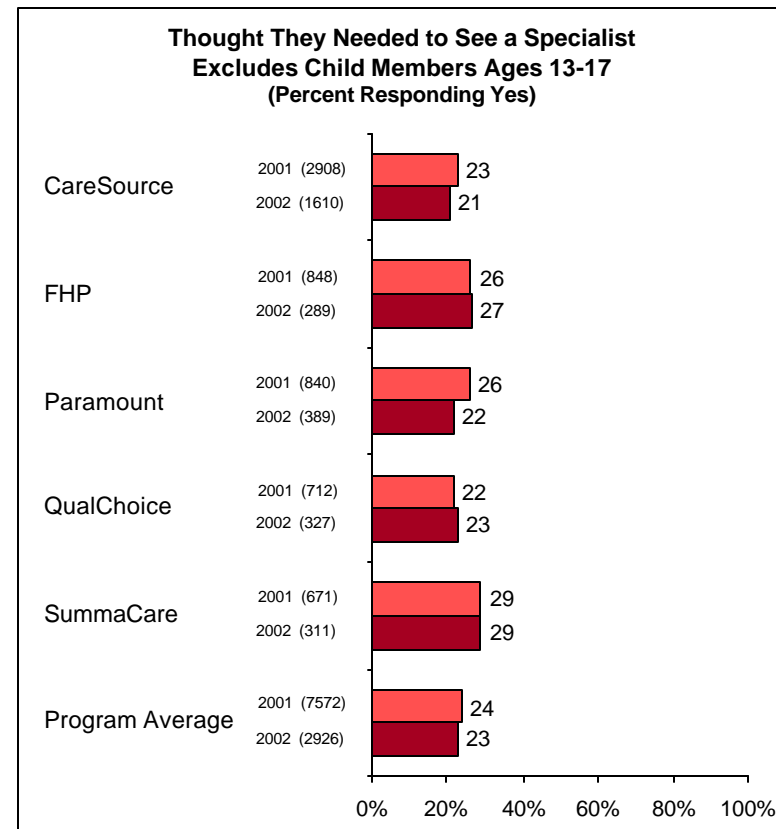
ACCESS TO CARE

Access to Care

Thought They Needed to See Specialist (Exhibit 6-1)

Members were asked whether, in the previous six months, they thought they/their child needed to see a specialist.

- In 2002, almost one-fourth of the members (23%) said they thought they/their child needed to see a specialist.
- There were no statistically significant differences between the program average nor the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and an individual MCP for 2002.
- High utilizers of health care were more likely to say they thought that they/their child needed to see a specialist compared to low utilizers.



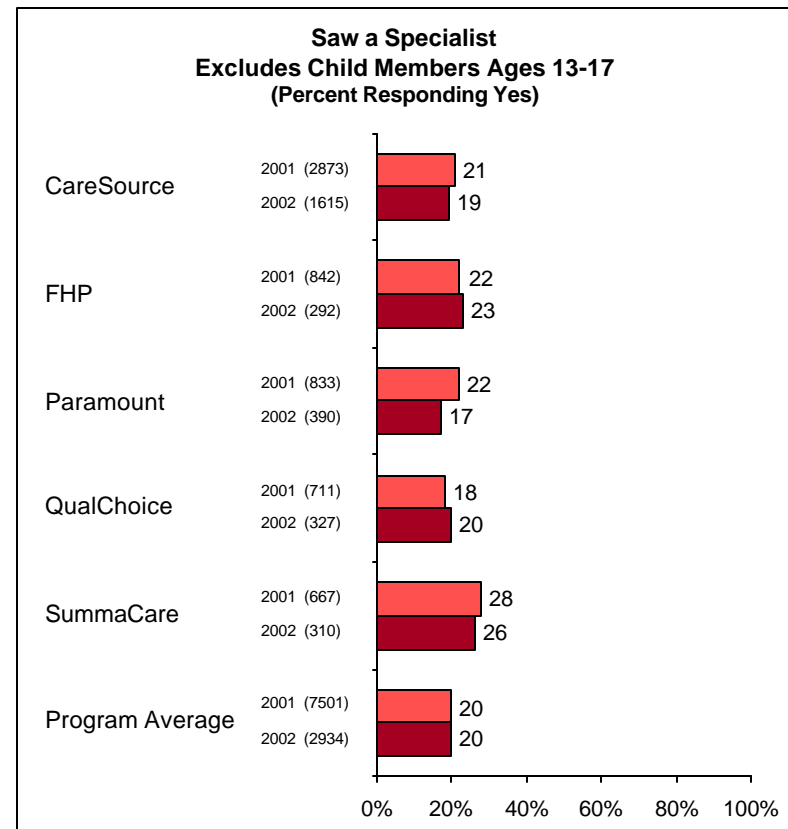
Base = Those answering (AQ7/CQ12)

Access to Care (cont'd)

Saw a Specialist (Exhibit 6-2)

Members were asked whether they/their child saw a specialist in the previous six months.

- In 2002, two in ten members (20%) reported that they/their child had seen a specialist in the past six months.
- There were no statistically significant differences between the program average nor the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and any individual MCP for 2002.
- High utilizers of health care were more likely to report that they/their child had seen a specialist compared to low utilizers.



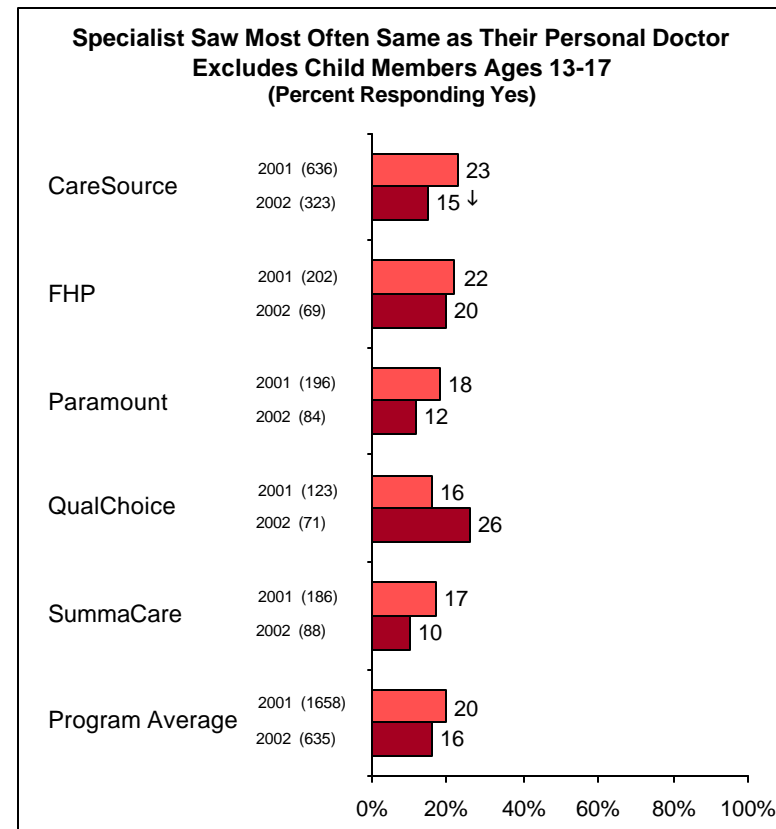
Base = Those answering
(AQ9/CQ14)

Access to Care (cont'd)

Specialist Saw Most Often Same as Personal Doctor (Exhibit 6-3)

Members who/whose child had seen a specialist were asked if this doctor was the same as their/their child's personal doctor.

- In 2002, about one in six of these members (16%) reported that their/their child's specialist was the same as their/their child's personal doctor.
- There were no statistically significant differences between the program average for 2001 and 2002.
 - There was a statistically significant difference among members of CareSource between 2001 and 2002: fewer CareSource members in 2002 reported that their/their child's specialist was the same as their/their child's personal doctor.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



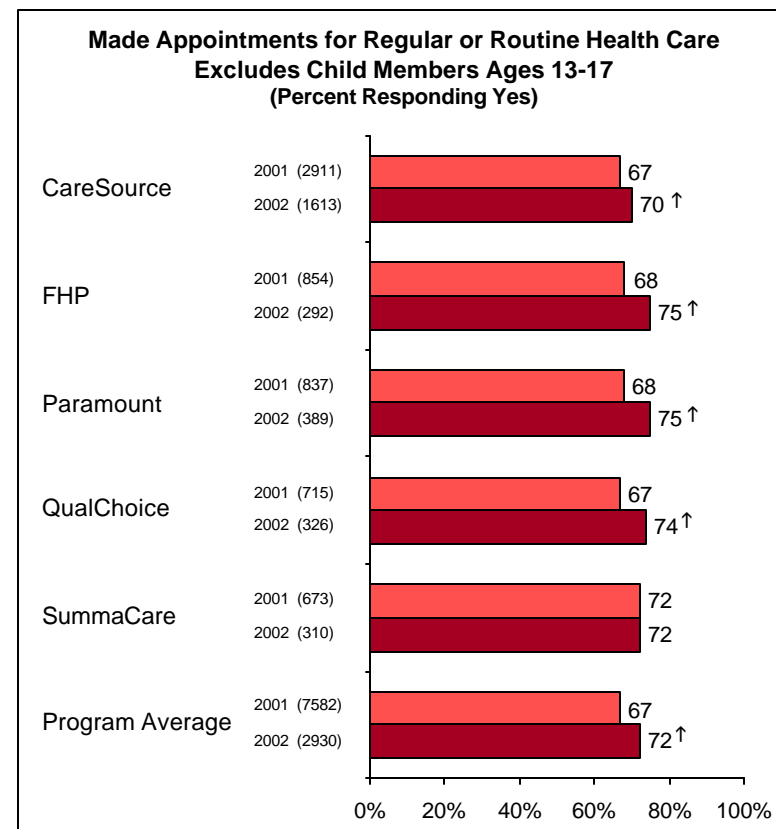
Base = Those who/whose child saw a specialist in the last 6 months and answering (AQ11/CQ16)

Access to Care (cont'd)

Made Appointments for Regular/Routine Health Care (Exhibit 6-4)

Members were asked whether they had made an appointment with a doctor or other health provider for regular or routine health care in the previous six months.

- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were more likely to report that they had made an appointment with a doctor or other health provider for regular or routine health care in the previous six months (72%, up from 67% in 2001).
 - There were also statistically significant differences among members of CareSource, FHP, Paramount, and QualChoice between 2001 and 2002: more members of CareSource, FHP, Paramount, and QualChoice in 2002 reported that they had made an appointment with a doctor or other health provider for regular or routine care.
- There were no statistically significant differences between the program average and any individual MCP for 2002.
- High utilizers of health care were more likely to report that they had made an appointment with a doctor or other health provider for regular or routine health care compared to low utilizers.



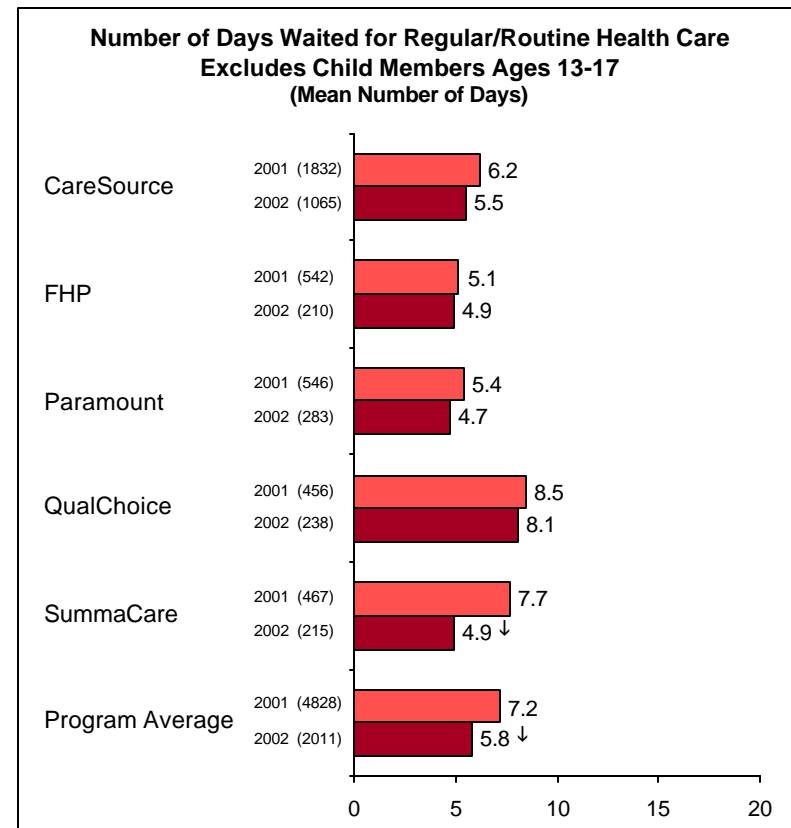
Base = Those answering
(AQ14/CQ19)

Access to Care (cont'd)

Number of Days Between Making Appointment and Seeing Provider for Regular/Routine Care (Exhibit 6-5)

Members who had made an appointment for routine health care were asked how many days they had to wait between making an appointment and seeing a provider.

- There was a statistically significant difference between the program average for 2001 and 2002. Members on 2002 reported waiting fewer days between making an appointment and seeing a provider (5.8 days, down from 7.2 days in 2001).
 - There was also a statistically significant difference among members of SummaCare between 2001 and 2002: results improved for SummaCare.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



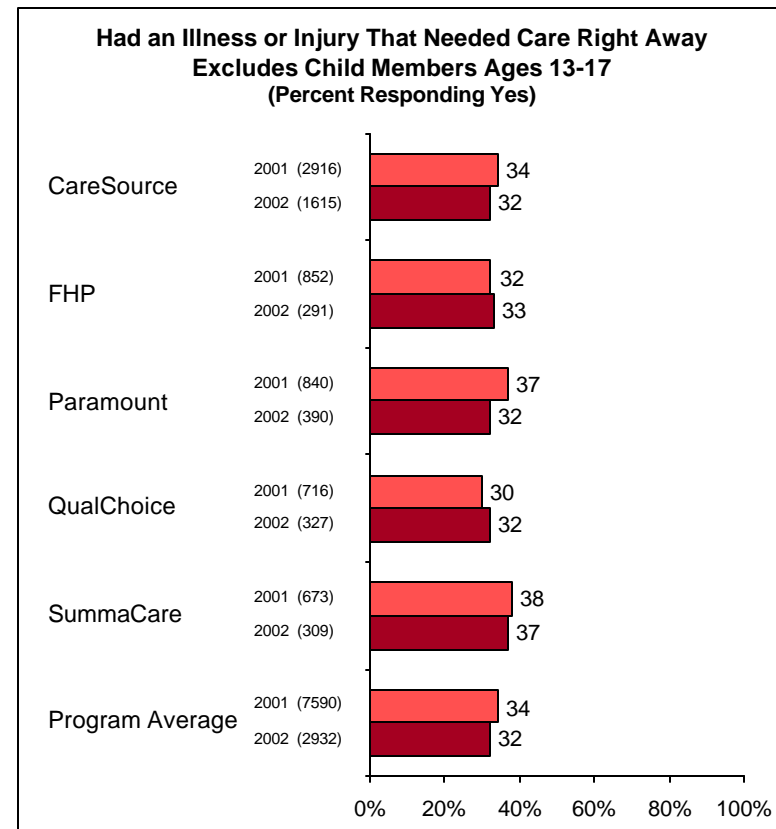
Base = Those who made appointments for themselves/their child for regular or routine health care and answering (AQ16/CQ21)

Access to Care (cont'd)

Had an Illness or Injury That Needed Care Right Away (Exhibit 6-6)

Members were asked if, in the last six months, they/their child had an illness or injury that needed care right away from a doctor's office, clinic, or emergency room.

- In 2002, about one-third of the members (32%) reported that they/their child had an injury or illness that needed care right away in the prior six months.
- There were no statistically significant differences between the program average nor the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and any individual MCP for 2002.
- High utilizers of health care were more likely to report that they they/their child had an injury or illness that needed care right away compared to low utilizers.



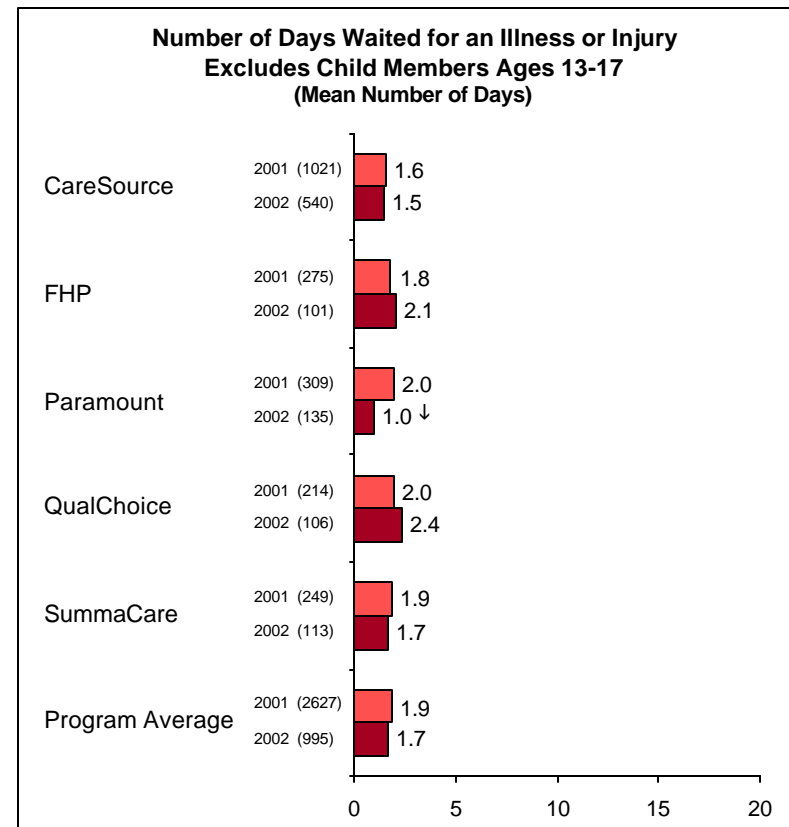
Base = Those answering
(AQ17/CQ22)

Access to Care (cont'd)

Number of Days Between Making Appointment and Seeing Provider for an Illness or Injury (Exhibit 6-7)

Members who/whose child had an illness or injury that needed care right away were asked how many days they waited between making an appointment and seeing a provider.

- In 2002, members who had an illness or injury that needed care right away reported waiting an average of two days (1.7 days) between making an appointment and seeing a provider.
- There were no statistically significant differences between the program average for 2001 and 2002.
 - There was a statistically significant difference among members of Paramount between 2001 and 2002: results for Paramount improved.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



Base = Those who/whose child had an illness or injury that needed care right away and answering (AQ19/CQ24)

Access to Care (cont'd)

Interpreter Services (Exhibit 6-8)

While only 1% of adult and child members in 2002 needed an interpreter, about one-third or more of these members (51% adult, 32% child) were never or only sometimes able to get an interpreter when they needed one.

This table shows the interpreter services of the *adult and child members* surveyed (In percentages):

		Program Average		CareSource		FHP		Paramount		QualChoice		SummaCare	
		2001	2002	2001	2002	2001	2002	2001	2002	2001	2002	2001	2002
Needed an Interpreter	n=	(7598)	(2937)	(2917)	(1616)	(853)	(292)	(842)	(390)	(717)	(327)	(675)	(312)
Yes		1	1	1	1	1	<1	1	1	<1	1	1	<1
No		99	99	99	99	99	100	99	99	100	99	99	100
Frequency of Getting Interpreter When Needed ¹	n=	(65)	(25)*	(28)*	(17)*	(8)*	(1)*	(9)*	(3)*	(2)*	(3)*	(5)*	(1)*
Never/Sometimes		70	51	71	65	27	100	59	51	50	-	67	-
Usually		13	15	-	11	9	-	15	-	50	48	17	-
Always		17	33	29	24	64	-	26	49	-	52	17	100
Child Needed an Interpreter	n=	(3919)	(1450)	(1536)	(804)	(443)	(137)	(420)	(193)	(371)	(164)	(353)	(152)
Yes		1	1	1	1	1	-	1	1	-	1	1	-
No		99	99	99	99	99	100	99	99	100	99	99	100
Frequency of Child Getting Interpreter When Needed ¹	n=	(31)*	(8)*	(15)*	(5)*	(4)*	(0)	(3)*	(2)*	(0)	(1)*	(2)*	(0)
Never/Sometimes		63	32	60	38	-	-	-	50	-	-	50	-
Usually		11	26	14	42	50	-	33	-	-	-	-	-
Always		26	42	26	20	50	-	67	50	-	100	50	-

Base = Those answering (AQ33,34/CQ53-56)

¹Base = Those who/whose child needed an interpreter to help speak with doctors or other health providers and able to rate

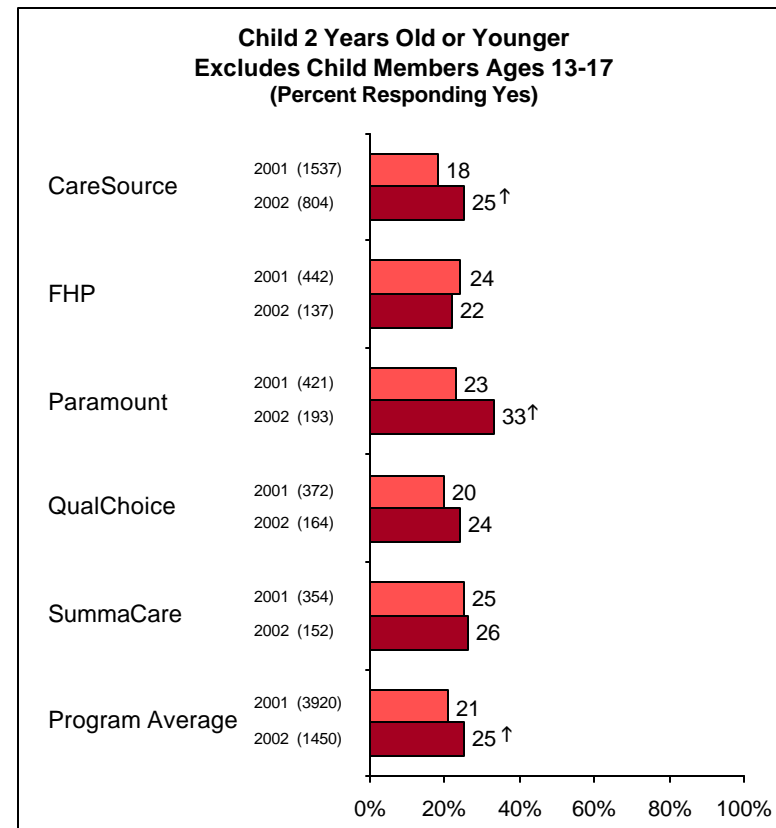
*Caution: Small Base

Access to Care (cont'd)

Child 2 Years Old or Younger (Exhibit 6-9)

Members were asked if their child is 2 years old or younger.

- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were more likely to report that their child is 2 years old or younger (25%, up from 21% in 2001).
 - There were also statistically significant differences among members of CareSource and Paramount between 2001 and 2002: more members of CareSource and Paramount in 2002 reported their child was 2 years old or younger.
- There were no statistically significant differences between the program average and any individual MCP for 2002.
- High utilizers of health care were more likely than low utilizers to report that their child is 2 years old or younger.



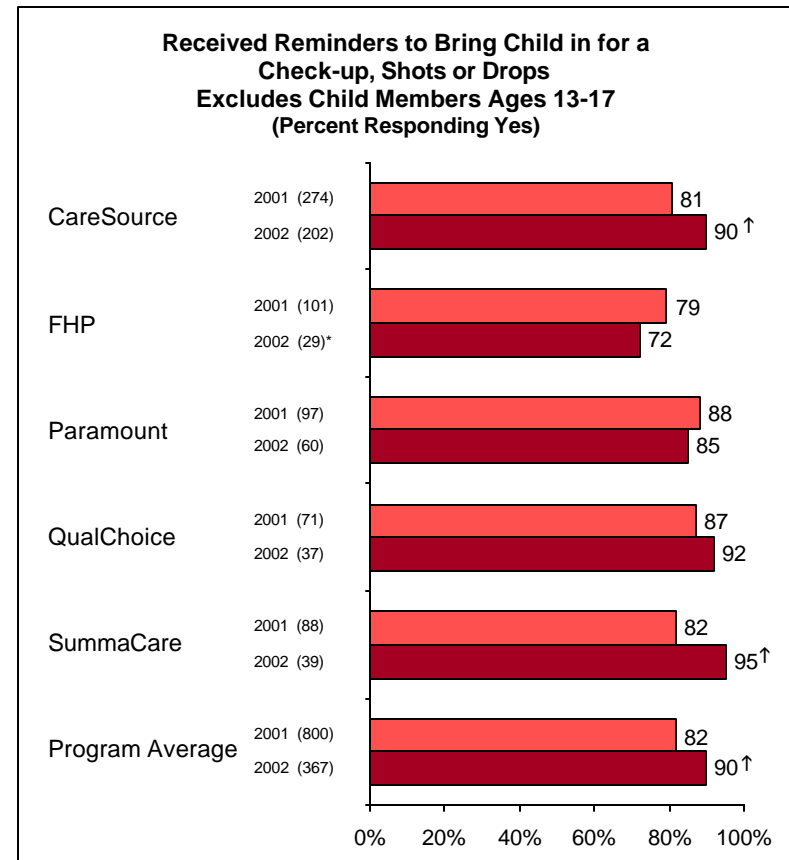
Base = Those answering
(CQ57)

Access to Care (cont'd)

Received Reminders to Bring Child in for a Check-up, Shots or Drops (Exhibit 6-10)

Members whose child is 2 years old or younger were asked if they had received reminders to bring him or her in for a check-up to see how he or she was doing, or for shots or drops.

- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were more likely to report that they have received reminders to bring their child in for a check-up, or for shots or drops (90%, up from 82% in 2001).
 - There were also statistically significant differences among members of CareSource and SummaCare between 2001 and 2002: results improved for both plans.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



Base = Those whose child is 2 years old or younger and answering (CQ58)

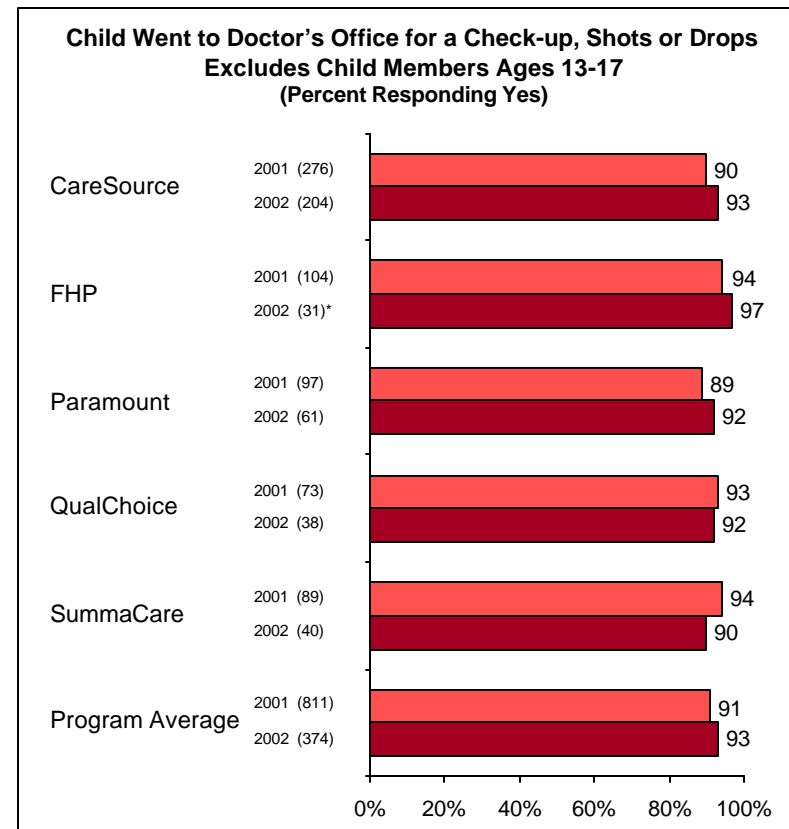
*Caution: Small Base

Access to Care (cont'd)

Child Went to Doctor's Office for Check-up, Shots or Drops (Exhibit 6-11)

Members whose child is 2 years old or younger were asked if their child has gone to a doctor or other health provider for a check-up, shots or drops since he or she was born.

- 93% in 2002 reported that their child has gone to the doctor for a check-up, shots or drops since he or she was born.
- There were no statistically significant differences between the program average nor the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and any individual MCP for 2002.



Base = Those whose child is 2 years old or younger and answering (CQ59)

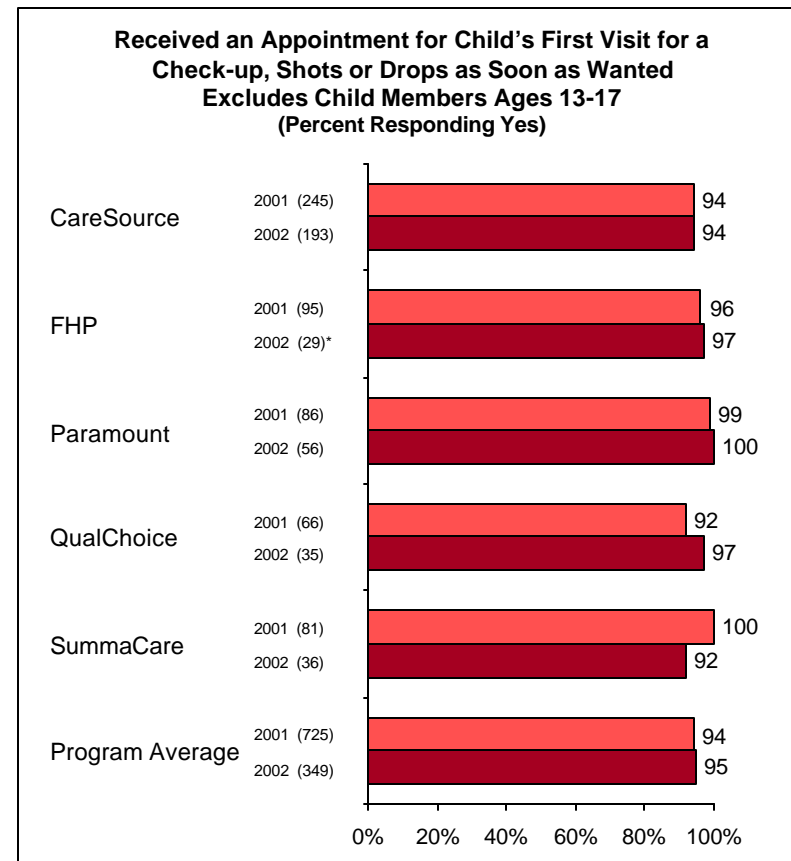
*Caution: Small Base

Access to Care (cont'd)

Received an Appointment for Child's First Visit for a Check-up, Shots or Drops as Soon as Wanted (Exhibit 6-12)

Members whose child is 2 years old or younger and has gone to a doctor or other health provider for a check-up, shots or drops were asked if they got an appointment for their child's first visit as soon as they wanted.

- 95% in 2002 reported that they got an appointment for their child's first visit as soon as they wanted.
- There were no statistically significant differences between the program average nor the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and any individual MCP for 2002.



Base = Those whose child went to a doctor for a check-up to see how he/she was doing or for shots or drops and answering (CQ60)

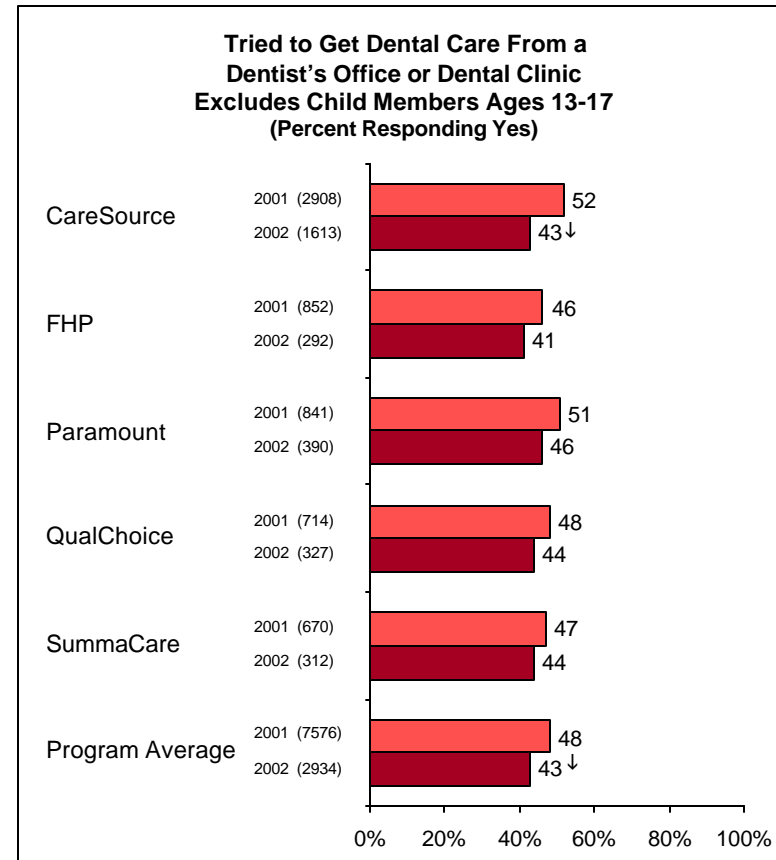
*Caution: Small Base

Access to Care (cont'd)

Tried to Get Dental Care From a Dentist's Office or Dental Clinic (Exhibit 6-13)

All members were asked if they had tried to get dental care from a dentist's office or dental clinic for themselves/their child in the last six months.

- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were less likely to report trying to get dental care from a dentist's office or dental clinic for themselves/their child (43%, down from 48% in 2001).
 - There was also a statistically significant difference among members of CareSource between 2001 and 2002: fewer CareSource members in 2002 reported trying to get dental care from a dentist's office or dental clinic for themselves/their child.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



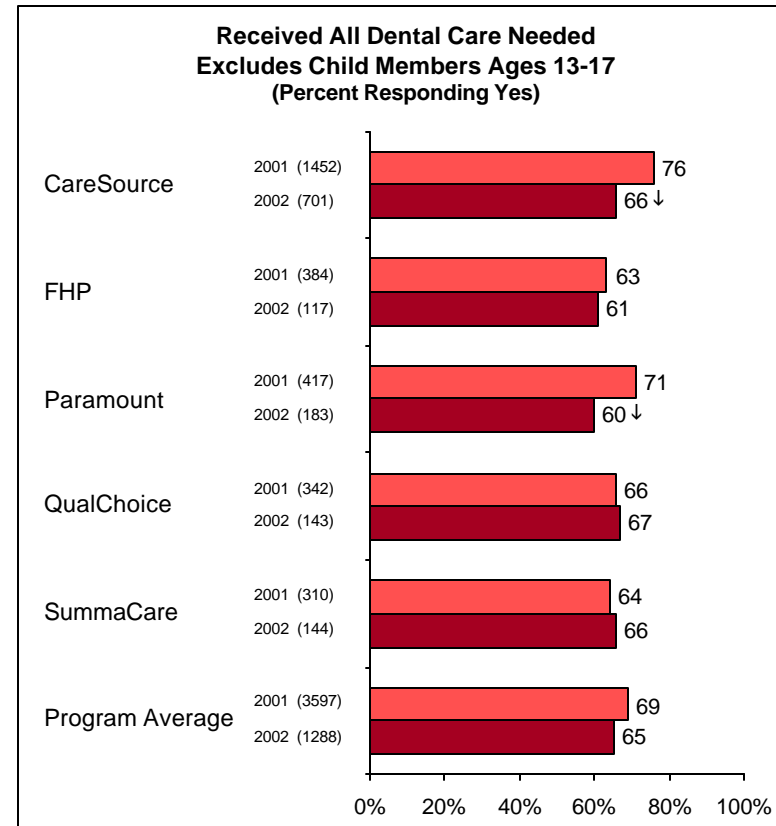
Base = Those answering (AQ34a/CQ56a)

Access to Care (cont'd)

Received All the Dental Care They Needed (Exhibit 6-14)

Those members who reported that they had tried to get dental care from a dentist's office or dental clinic for themselves or their child in the last six months were asked if they/their child received all of the dental care they needed.

- In 2002, more than six in ten members overall (65%) reported that they/their child had received all of the dental care they needed.
- There were no statistically significant differences between the program average for 2001 and 2002.
 - There were statistically significant differences among members of CareSource and Paramount between 2001 and 2002: results decreased for both plans.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



Base = Those who have tried to get dental care for themselves/their child and answering (AQ34b/CQ56b)

Access to Care (cont'd)

Main Reasons Did Not Receive Dental Care Needed (Exhibit 6-15)

- There were statistically significant differences between the program average for 2001 and 2002 regarding why members did not receive the dental care they/their child needed. The top reasons mentioned by members in 2002 who reported that they did not receive all of the dental care they/their child needed included that they had difficulty getting an appointment (22%, down from 35% in 2001) and/or the dentist did not accept their MCP (15%). Other reasons included that their insurance did not cover it (9%, down from 14% in 2001), the wait was too long in the clinic or office (6%, up from 2% in 2001), and/or the hours were not convenient for them (5%).
 - There were also statistically significant differences among members of CareSource, QualChoice, and SummaCare between 2001 and 2002: fewer members of CareSource and SummaCare in 2002 reported not getting all the dental care they needed because they had difficulty getting an appointment, while a greater percent of QualChoice members in 2002 reported they had to wait too long in the clinic or office as their reason for not getting all the dental care needed.
- There were no statistically significant differences between the program average and any individual MCP for 2002.

This table shows the reasons for not getting all of the dental care needed for *adult members and child members excluding 13-17 year olds* surveyed (In percentages):

	n=	Program Average		CareSource		FHP		Paramount		QualChoice		SummaCare	
		2001	2002	2001	2002	2001	2002	2001	2002	2001	2002	2001	2002
Reasons for Not Getting All Dental Care Needed		(965)	(469)	(310)	(239)	(120)	(46)	(103)	(75)	(109)	(55)	(101)	(54)
Difficulty getting an appointment		35	22 ↓	43	25 ↓	33	18	24	22	32	18	43	18 ↓
Dentist did not accept MCP		20	15	11	9	33	25	32	25	19	23	18	18
Insurance did not cover it		14	9 ↓	11	9	5	7	8	10	20	10	10	8
Wait too long in clinic/office		2	6 ↑	2	6	7	-	4	2	1	11 ↑	2	6
Hours not convenient		5	5	4	4	4	6	5	2	9	5	6	6

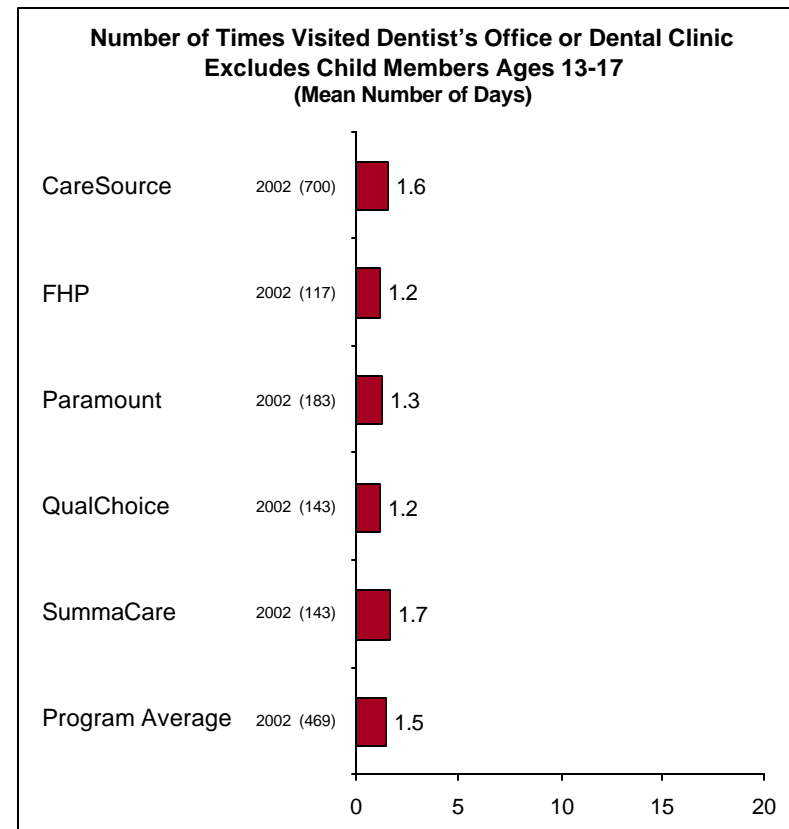
Base = Those who/whose child did not get all the dental care needed and answering (AQ34c/CQ56c)
Multiple Responses Accepted, Top Mentions

Access to Care (cont'd)

Number of Times Visited Dentist's Office or Dental Clinic (Exhibit 6-16)

In 2002, those members who reported that they had tried to get dental care from a dentist's office or dental clinic for themselves or their child in the last six months were asked how many times they visited a dentist's office or dental clinic within this same time frame.

- Members in 2002 reported that they visited a dentist's office or clinic an average of 1.5 times in the previous six months.
- There were no statistically significant differences between the program average and any individual MCP for 2002.
- High utilizers of health care reported visiting a dentist's office or clinic more often than low utilizers.



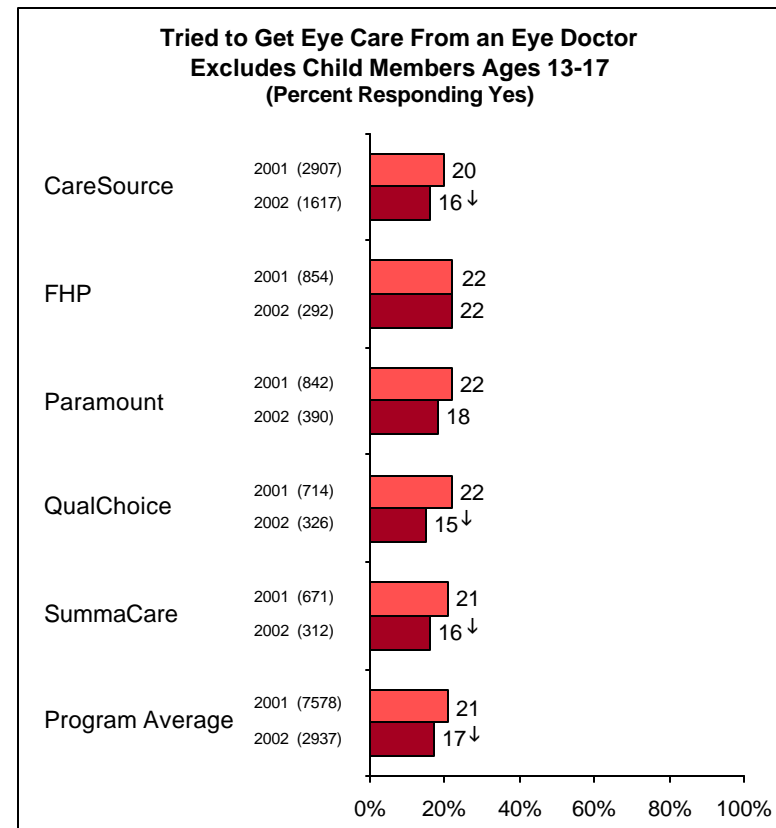
Base = Those who have tried to get dental care for themselves/their child and answering (AQ34d/CQ56d)

Access to Care (cont'd)

Tried to Get Eye Care From an Eye Doctor (Exhibit 6-17)

All members were asked if they had tried to get care from an eye doctor for themselves/their child in the last six months.

- There was a statistically significant difference between the program average for 2001 and 2002. Members in 2002 were less likely to report trying to get care from an eye doctor for themselves/their child in the last six months (17%, down from 21% in 2001).
 - There were also statistically significant differences among members of CareSource, QualChoice, and SummaCare between 2001 and 2002: fewer members of CareSource, QualChoice, and SummaCare in 2002 reported trying to get eye care from an eye doctor for themselves/their child.
- There were no statistically significant differences between the program average and any individual MCP for 2002.
- High utilizers of health care were more likely to report trying to get care from an eye doctor for themselves/their child compared to low utilizers.



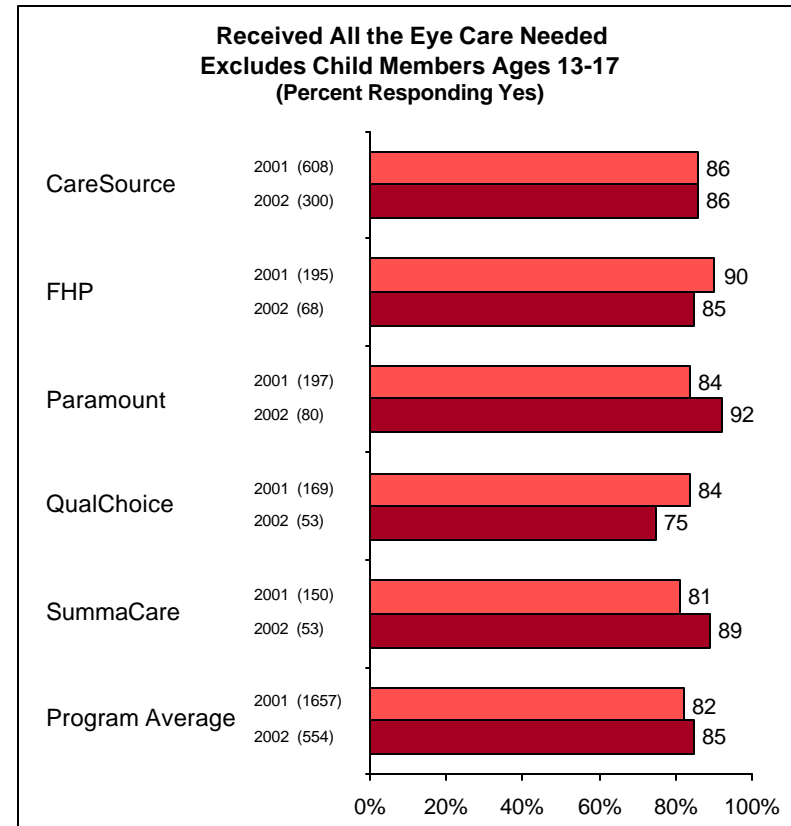
Base = Those answering
(AQ34f/CQ56f)

Access to Care (cont'd)

Received All the Eye Care They Needed (Exhibit 6-18)

Those members who reported that they had tried to get eye care from an eye doctor for themselves or their child in the last six months were asked if they/their child received all of the eye care they needed.

- In 2002, more than eight in ten members (85%) reported that they/their child received all of the eye care they needed.
- There were no statistically significant differences between the program average nor the individual MCPs for 2001 and 2002.
- There were also no statistically significant differences between the program average and any individual MCP for 2002.



Base = Those who have tried to get eye care for themselves/their child and answering (AQ34g/CQ56g)

Access to Care (cont'd)

Main Reasons Did Not Receive Eye Care Needed (Exhibit 6-19)

- There was a statistically significant difference between the program average for 2001 and 2002 regarding why members did not receive the eye care they/their child needed. The top reasons mentioned by members in 2002 who reported that they did not receive all the eye care they or their child needed included their eye doctor did not accept their MCP (17%), their insurance did not cover it (16%, down from 29% in 2001), they haven't had the appointment yet, or will go soon (11%), and/or they had difficulty getting an appointment (10%). Other reasons included their child is too young (6%), they missed or forgot about their appointment (5%), they have to wait for the doctor to prescribe eye glasses (5%), and/or they misplaced their insurance card (5%).
 - There was also a statistically significant difference among members of CareSource between 2001 and 2002: fewer members of CareSource reported not getting all the eye care they needed because they had difficulty getting an appointment.
- There were no statistically significant differences between the program average and any individual MCP for 2002.

This table shows the reasons for not getting all of the eye care needed for *adult members and child members excluding 13-17 year olds* surveyed (In percentages):

	Program Average		CareSource		FHP		Paramount		QualChoice		SummaCare	
	2001	2002	2001	2002	2001	2002	2001	2002	2001	2002	2001	2002
Reasons for Not Getting All The Eye Care Needed	n= (231)	(78)	(75)	(40)	(15)*	(9)*	(27)*	(9)*	(26)*	(13)*	(18)*	(7)*
Eye doctor did not accept MCP	18	17	17	6	14	13	8	15	26	36	10	37
Insurance did not cover it	29	16 ↓	15	13	37	37	24	15	45	7	23	38
Haven't had the appointment yet/Will go soon	-	11	-	17	-	-	-	-	-	8	-	-
Difficulty getting an appointment	13	10	31	12 ↓	18	15	8	42	-	-	20	-
Child too young	-	6	-	4	-	-	-	-	-	15	-	-
Missed the appointment/Forgot about the appointment	-	5	-	5	-	15	-	13	-	-	-	-
Have to wait for the doctor to prescribe eye glasses	-	5	-	5	-	15	-	-	-	-	-	13
Misplaced insurance card	-	5	-	10	-	-	-	-	-	-	-	-

Base= Those who/whose child did not get all the eye care needed and answering (AQ34h/CQ56h)

Multiple Responses Accepted, Top Mentions

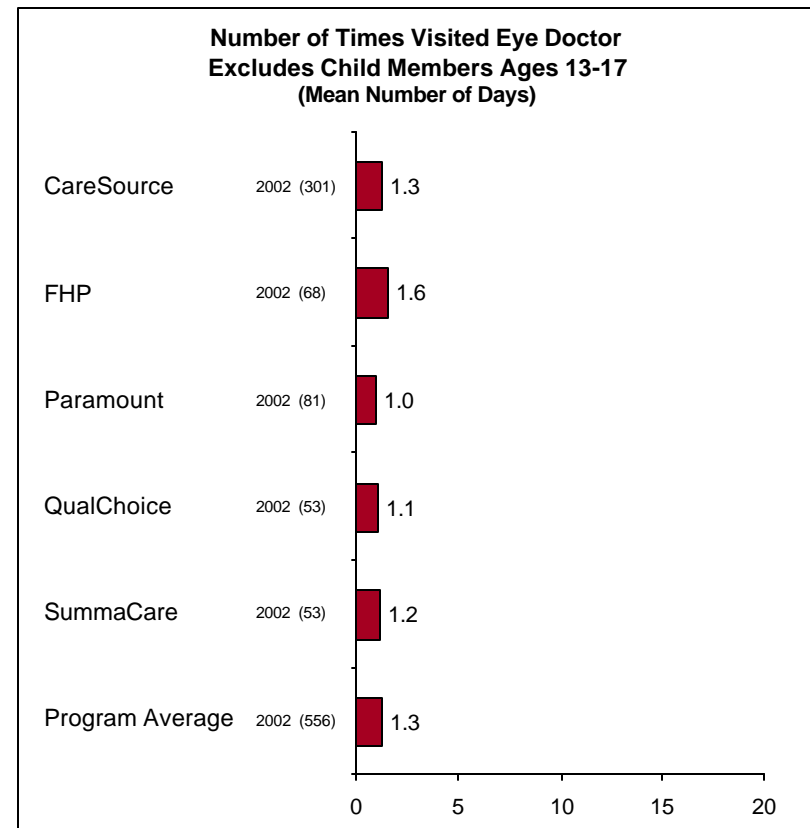
*Caution: Small Base

Access to Care (cont'd)

Number of Times Visited Eye Doctor (Exhibit 6-20)

In 2002, those members who reported that they had tried to get eye care from an eye doctor for themselves or their child in the last six months were asked how many times they visited an eye doctor within this same time frame.

- Members in 2002 reported that they visited an eye doctor an average of 1.3 times in the previous six months.
- There were no statistically significant differences between the program average and any individual MCP for 2002.



Base = Those who have tried to get eye care for themselves/their child and answering (AQ34i/CQ56i)

UTILIZATION OF SERVICES

Utilization of Services

Number of Visits to the Emergency Room and Doctor's Office or Clinic

Adult and child members were asked how many times they visited the emergency room in the past six months.

- About seven in ten members (69%) said that they did not visit the emergency room in the past six months. More than one-fourth (27%, up from 24% in 2001) reported that they had been to the emergency room one or two times. Meanwhile, only a few (4%) reported going three or more times in the past six months.
 - There was also a statistically significant difference among members of CareSource between 2001 and 2002: a greater percent of CareSource members reported visiting the emergency room one or two times in the past six months.
- There was a statistically significant difference between the program average and QualChoice for 2002: fewer QualChoice members reported visiting the emergency room compared to the program average.

Adult and child members were also asked how many times they visited their doctor's office or clinic in the past six months.

- More than two in ten (22%, down from 25% in 2001) said that they did not visit their doctor's office or clinic in the past six months. On average, members went to their doctor's office or clinic roughly three times (up from two times in 2001) in the past six months. In particular, more than four in ten (45%) reported that they had been to their doctor's office or clinic one or two times. And, one-third (33%, up from 28% in 2001) reported going three or more times in the past six months.
 - There were also statistically significant differences among members of CareSource, FHP, Paramount, and QualChoice between 2001 and 2002: members of CareSource, FHP, Paramount, and QualChoice in 2002 reported visiting their doctor's office or clinic more often than they did in 2001.
- There were no statistically significant differences between the program average and any individual MCP for 2002.

Those who have one person they think of as their child's personal doctor or nurse were asked how many times their child visited this doctor or nurse's office or clinic in the past six months.

- Only one in seven (14%) said that their child did not visit their personal doctor or nurse's office or clinic in the past six months. On average, child members went to their personal doctor or nurse's office or clinic approximately three times in the past six months. Specifically, about one-half (51%) reported that their child had been to their personal doctor or nurse's office or clinic one or two times in the past six months, while more than one-third (35%) said that their child went three or more times.
- There were no statistically significant differences between the program average nor the individual MCPs for 2001 and 2002.
- There were no statistically significant differences between the program average and any individual MCP for 2002.

Utilization of Services (cont'd)

Exhibit 7-1

This table shows the utilization of services among the *adult members and child members excluding 13-17 year olds* surveyed (In percentages):

	n=	Program Average		CareSource		FHP		Paramount		QualChoice		SummaCare	
		2001	2002	2001	2002	2001	2002	2001	2002	2001	2002	2001	2002
Number of Visits to the Emergency Room*	(7555)	(2920)	(2906)	(1608)	(846)	(292)	(840)	(388)	(712)	(326)	(668)	(306)	
None	71	69	71	67	71	67	68	73	75	74	71	70	
1 to 2 times	24	27 ↑	25	28 ↑	24	30	26	21	21	23	25	26	
3 or more times	4	4	4	4	5	3	5	6	4	2	4	4	
Mean (# of times)	0.51	0.53	0.49	0.55	0.45	0.53	0.57	0.90	0.48	0.35	0.50	0.45	
Number of Visits to a Doctor's Office/Clinic	(7614)	(2919)	(2924)	(1606)	(856)	(289)	(845)	(390)	(717)	(325)	(675)	(309)	
None	25	22 ↓	23	25	26	19 ↓	23	17 ↓	31	21 ↓	18	18	
1 to 2 times	46	45	46	42 ↓	45	48	46	51	45	51	49	47	
3 or more times	28	33 ↑	31	34	30	33	31	32	24	28	33	35	
Mean (# of times)	2.23	2.56 ↑	2.42	2.61	2.24	2.62	2.41	2.72	2.01	2.20	2.43	2.74	
Number of Times Child Visited Personal Doctor or Nurse's Office or Clinic ¹	na	(1218)	na	(644)	na	(127)	na	(171)	na	(144)	na	(132)	
None	na	14	na	14	na	15	na	11	na	14	na	17	
1 to 2 times	na	51	na	50	na	51	na	50	na	59	na	42	
3 or more times	na	35	na	36	na	35	na	39	na	27	na	42	
Mean (# of times)	na	2.57	na	2.65	na	2.29	na	2.95	na	2.07	na	2.87	

Base = Total answering (AQ20,21/CQ25,26,6)

¹Base = Those who have one person they think of as their child's personal doctor or nurse and answering

na = Not asked in 2001

*There were statistically significant differences between at least one MCP and the overall average for 2002.