

Member Satisfaction Survey Evaluation

Introduction and Background

A Member Satisfaction Survey which addressed quality, availability, and accessibility of care issues was mailed to all Jai Medical System members with *HealthBeat*, the member newsletter, in November 2023.

In 2020, the member satisfaction survey was reformatted and revised. The purpose of the changes were to improve member comprehension. This was achieved by including clearer instructions (especially for conditional questions that require members to skip to another question on the survey) and adding clarifying descriptors to certain questions that used terminology members may not be familiar with. The survey consisted of 20 questions and has been used every subsequent year including CY 2023.

Summary of Purpose

The purpose of the Member Satisfaction Survey is to measure and analyze member satisfaction and to identify areas that need improvement. Through survey results, Jai Medical Systems is able to identify issues, investigate sources of dissatisfaction, and implement action steps to follow up on the findings. This process is part of Jai Medical Systems' continuing goal of improving the delivery of care and services to its members.

Methodology

Member Satisfaction surveys are sent along with the member newsletters toward the end of the calendar year. The members are asked to fill out the survey and mail it back to Jai Medical Systems in the enclosed postage-paid envelope. The first 100 surveys that were returned were used in the analysis. Once the sample size of 100 was met, any surveys that came in after that were reviewed but not included in the analysis. Any survey that was received that needed follow-up was forwarded to the appropriate department. When appropriate, a corrective action plan will be considered, developed, and monitored by the Quality Assurance Committee when performance standards are not met.

After review and approval by the Consumer Advisory Board, the Quality Assurance Committee, and the Board of Directors, the member satisfaction survey results will be printed in *HealthBeat*, the member newsletter. Survey results are distributed to providers by the Provider Relations Department.

Findings

For CY 2023, we sampled the first 100 surveys that were returned. The responses were recorded and included in this analysis. All returned surveys were reviewed for responses and comments, and provided to the appropriate departments for follow-up when necessary. Some surveys did not contain responses to some questions, so the denominator will vary by question.

Jai Medical Systems has established standards related to the Member Satisfaction Survey to evaluate our performance and identify areas in need of improvement. Member satisfaction survey performance standards for questions that measure satisfaction only are as follows:

- Less than a 5% “poor” rating
- Greater than or equal to an 85% combined rating for “Excellent” and “Good” responses
- Questions with a “Yes” or “No” response should have at least an 80% “Yes” response rate for questions directly related to satisfaction with care.

A corrective action plan will be considered for any questions for which the survey responses that did not meet the above standards. Jai Medical Systems 2023 Member Satisfaction Survey results will also be reviewed to determine areas of strength and areas for improvement.

Overall Satisfaction Rates

Jai Medical Systems received an overall satisfaction rate of 99% for CY 2023, which is a significant increase from previous years and an 8-percentage point increase from 2022. Please below a 5-year trend of overall satisfaction rates:

	2018	2019	2020	2021	2022	2023
Overall Satisfaction Rate	97%	91%	95%	91%	91%	99%

CY 2023 Survey Questions Below Standards

There were 0 survey questions that fell below our minimum standards and no corrective action plans will be considered based on the survey results.

Survey Result Comparisons

In CY 2022, there were 7 survey questions that did not meet our minimum standards and corrective action plans were implemented. The following chart lists the 7 survey questions that required a corrective action plan and compares those questions to CY 2023 scores to see if improvements were made (positive changes are written in green while negative changes are written in red).

	CY 2022 Score	CY 2023 Score	Change
Customer service skills of the medical staff at your personal doctor's office	80% Excellent/Good 2% Poor	95% Excellent/Good 0% Poor	5 percentage point increase 2 percentage point decrease
Knowledge of the medical staff and ability to assist with your questions	83% Excellent/Good 4% Poor	100% Excellent/Good 0% Poor	17 percentage point increase 4 percentage point decrease
After arriving at your personal doctor's office for care, how would you rate the amount of time you waited before you see your personal doctor for a scheduled appointment	69% Excellent/Good 4% Poor	100% Excellent/Good 0% Poor	31 percentage point increase 4 percentage point decrease
After arriving at your personal doctor's office for care, how would you rate the amount of time you waited before you see your personal doctor <i>without</i> a scheduled appointment	73% Excellent/Good 5% Poor	100% Excellent/Good 0% Poor	27 percentage point increase 5 percentage point decrease
The referral process to see a specialist when recommended by your Primary Care Provider (PCP)	84% Excellent/Good 4% Poor	87% Excellent/Good 0% Poor	3 percentage point increase 4 percentage point decrease
Your ability to get an appointment with a specialist	81% Excellent/Good 11% Poor	100% Excellent/Good 0% Poor	19 percentage point increase 11 percentage point decrease
If you have ever needed to get health care from a specialist, such as an allergy doctor, heart doctor, or skin doctor, were you satisfied with the selection of specialists available?	73% Yes	85% Yes	12 percentage point increase

JMS was able to see great improvements in the scores for all questions, most of which saw double digit positive percentage point changes. No questions fell below the minimum standards.

Recommendations

All survey questions scored above our minimum standards. Our overall satisfaction increased by 8 percentage points from CY 2022. Additionally, all survey questions that fell below minimum standards in 2022 have seen significant improvement in 2023. It is recommended that changes

implemented due to unsatisfactory scores in 2022 be continued as best practices moving forward. It is also recommended that this survey continue to be distributed and the responses analyzed to ensure satisfaction and improve delivery of care and services to our members.

Consumer Assessment of Health Providers and Systems (CAHPS) Evaluation

2023 Consumer Assessment of Health Plans Survey (CAHPS®) Evaluation

As part of the federally required quality assurance plan, the Maryland Department of Health (MDH) conducted annual surveys to measure adult and child satisfaction with the services provided by the managed care organizations participating in the HealthChoice program. MDH contracted with The Myers Group, a National Committee for Quality Assurance (NCQA) certified vendor, to conduct satisfaction surveys for the 2004, 2005, 2006, and 2007 reports. In 2008, 2009, 2010, 2011, and 2012 MDH contracted with WB&A Market Research to complete the CAHPS® 4.0H for child enrollees in HealthChoice and 4.0H for adult enrollees in HealthChoice. In 2013, NCQA released the 5.0H version of the CAHPS® Adult Medicaid Satisfaction Survey, which was adopted by MDH. In 2013, 2014, 2015, 2016, and 2017 MDH continued their contract with WB&A Market Research, however the CAHPS® 5.0H surveys were used for both the HealthChoice child and adult surveys. In 2017, MDH contracted with the Center for the Study of Services (CCS), to administer and report the results of the 2018 CAHPS® Adult Medicaid Satisfaction Survey. MDH continued their contract with CCS from 2017 through 2022. These surveys are important to determine the members' ratings of and experiences with the medical care they received. It should be noted that the survey fielding period coincided with the rise of the COVID-19 pandemic. Survey results should be interpreted with caution because data collection took place during the height of the COVID-19 pandemic. The impact of the pandemic on member health experience is difficult to measure. NCQA also updated the CAHPS Health Plan Survey to version 5.1H. Several questions were reworded to include any care received "in person, by phone, or by video" during the past six months due the changes in consumer behavior and the shift towards telemedicine. References to "seeing a provider" or "visiting a doctor's office or clinic" were removed or replaced with more inclusive language to reflect this expanded array of care settings. To date, NCQA has not issued trending guidelines for the revised questionnaires.

IMPACT OF COVID-19 ON NCQA RATING

In response to the COVID-19 pandemic, NCQA permitted health plans and vendors to depart from the standards CAHPS data collection protocol as needed by reducing the number of mailings and/or telephone attempts, replacing the telephone interviewing portion of the protocol with an additional survey mailing, or stopping data collection entirely. NCQA acknowledged that a multitude of factors, such as wide regional variation in COVID-19 infection rates, consumer experience, stay-at-home orders, social distancing guidelines, difference in vendor practices and staffing models, "essential business" designations, and protocol decisions made by individual health plans might compromise the quality and validity of the data collected. For MY 2022, NCQA returned to most of the protocols established prior to the pandemic.

CAHPS® SURVEY REPORTS

There are three groups of member satisfaction results available from CAHPS® surveys. These are the CAHPS® 5.1H Adult Medicaid HealthChoice results, the 5.0H Medicaid Child HealthChoice results and the 5.0H Medicaid Child with Chronic Conditions (CCC) results. Within each of these types of surveys, there are particular categories of questions reported that are specific to the type of care a member receives.

Adult CAHPS

Within the CAHPS® 5.1H Adult Medicaid survey, there are four overall satisfaction questions and seven composite score categories made up of multiple similar questions. The four overall satisfaction questions include a rating of the *Personal Doctor, Specialist, Health Care Overall, and Health Plan Overall*. The composite score categories include *Getting Needed Care, Getting Care Quickly, How Well Doctor Communicates, Customer Service, and Coordination of Care*.

Child CAHPS (General Population and Children with Chronic Conditions)

The CAHPS® 5.0H Child Medicaid (with CCC) Survey was distributed to all eligible members 17 years of age and younger. These survey results contain two categories of children: the general population and children with chronic conditions (CCC). The general population includes all children enrolled in HealthChoice, including those with chronic conditions. The CCC population separates and analyzes the results of only those children with chronic conditions. The general population and CCC population are surveyed on the same questions regarding their care; however, an additional five composite measures, specific to the CCC population, are included in the CCC survey. The overall satisfaction questions that are identical between the two populations are ratings on *Personal Doctor, Health Plan, Specialist, and Health Care*. The identical composite measures between the two populations include *Getting Needed Care, Getting Care Quickly, Coordination of Care, How Well the Doctor Communicates, and Customer Service*. The additional five composite measures for the CCC population include: *Getting Needed Information, Personal Doctor Who Knows Child, Access to Prescription Medication, Coordination of Care for Children with Chronic Conditions, and Access to Specialized Services*.

CAHPS® SATISFACTION SURVEY ANALYSIS

Within each of the reports presented by CCS, there are multiple analyses of the results. The member ratings for each individual question are included, as well as comparisons to previous years, if available and a comparison to the HealthChoice aggregates. Detailed Performance Charts are provided for the rating questions and composite measures. Demographic analyses are presented at the beginning of the data to understand the sample size. Key drivers are discussed as well, indicating which specific measures are of high enough importance to drive the members to rate their overall health plan and overall health care as high, moderate, or low on the survey.

Detailed Performance Charts

CCS was able to include detailed charts for composite global proportions, rating question summary rates (QSRs), as well as additional QSRs for individual survey items. The charts trended scores over three consecutive years of data, and statistical comparisons between current-year rate and each of the prior-year rates, if available.

Demographic Analysis

CCS was able to include a demographic analysis along with the CAHPS® results. This analysis includes the health status, age, gender, level of education, and ethnicity/race of the members. Respondents were allowed to choose more than one ethnicity; therefore, the ethnicity percentages may be over 100%.

Adult HealthChoice

- 74.3 % rate their overall health at excellent, very good or good
- 72.8% rate their mental/emotional health at excellent, very good or good
- 38.6% female; 61.4% male
- 56.9% of members obtained an education of high school or less
- 73.0% African American; 20.0% White; 1.6% Hispanic/Latino; 5.4% Asian; 1.1% Native Hawaiian/other Pacific Islander; 4.9 % American Indian or Alaska Native

Children HealthChoice (General Population)

- 91.9% rate their overall health status at excellent, very good, or good
- 90.0% rate their mental/emotional health at excellent, very good, or good
- 82.6% female; 17.4% male
- 35.1% of the children have a parent/guardian with a high school education or less
- 71.1% African American; 21.6% White; 13.8% Hispanic; 9.5% Asian; 3.2% Native Hawaiian/other Pacific Islander, 5.8% American Indian or Alaska Native

Comparison to Aggregates

The Adult Medicaid HealthChoice and Children Medicaid survey results are compared to an aggregate of HealthChoice survey results in the state of Maryland. The following tables compare the results of survey overall ratings and composite measure scores between JMSMCO and the state aggregate. JMSMCO’s score is bolded if it was equal to or higher than the Maryland Aggregate.

Table 21: CAHPS® Results Comparison –Adult

Adult Medicaid HealthChoice		
	2023	HC Aggregate
Getting Needed Care	84%*	78%
Getting Care Quickly	85%*	78%
How Well Doctor Communicates	91%	92%
Customer Service	93%*	89%
Coordination of Care	90%*	83%
Health Care Overall	44%	55%
Personal Doctor	70%	65%
Specialist	61%*	62%
Health Plan Overall	48%	56%

*These scores were calculated based on a sample size of less than 100. These scores are not reportable and were calculated for internal use only.

Table 22: CAHPS® Results Comparison –Children

Children Medicaid (General Population)		
	2023	HC Aggregate
Getting Needed Care	86%*	78%
Getting Care Quickly	86%*	82%
How Well Doctor Communicates	93%	91%
Customer Service	92%*	83%
Coordination of Care	80%*	78%
Health Care Overall	70%	68%
Personal Doctor	79%	74%
Specialist	70%*	67%
Health Plan Overall	59%	67%

*These scores were calculated based on a sample size of less than 100. These scores are not reportable and were calculated for internal use only.

Table 23: CAHPS® Results Comparison – Children with Chronic Conditions

Children Medicaid (CCC Population)		
	2023	HC Aggregate
Getting Needed Care	79%*	79%
Getting Care Quickly	87%*	87%
How Well Doctor Communicates	95%*	92%
Customer Service	96%*	86%
Coordination of Care	87%*	79%
Access to Prescription Medication	91%*	88%
Access to Specialized Services	61%*	66%
Family Centered Care: Personal Doctor Who Knows Child	92%*	90%
Family Centered Care: Getting Needed Information	95%*	88%
Coordination of Care for Children with Chronic Conditions	77%*	70%
Health Care Overall	70%*	62%
Personal Doctor	79%*	71%
Specialist	50%*	67%
Health Plan Overall	61%	62%

*It is very important to note that all of the scores for CCC Child Measures had a sample size of less than 100. None of these scores listed above are reportable and were shared for internal use only.

TOP PRIORITIES FOR QUALITY IMPROVEMENT

CSS’s Key Driver Analysis identifies the areas of health plan performance and aspects of member experience that shape members’ overall assessment of their health plan. To the extent that these specific areas or experiences can be improved, the overall rating of the plan should reflect these gains.

Adult

Figure 5: Overall CAHPS® ratings - Adult

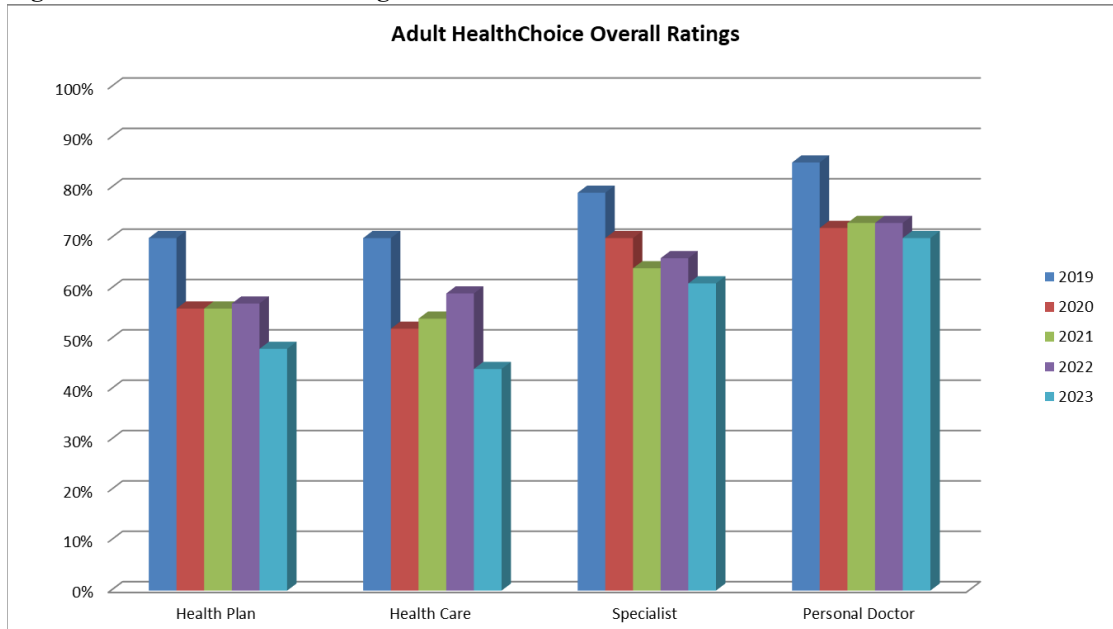
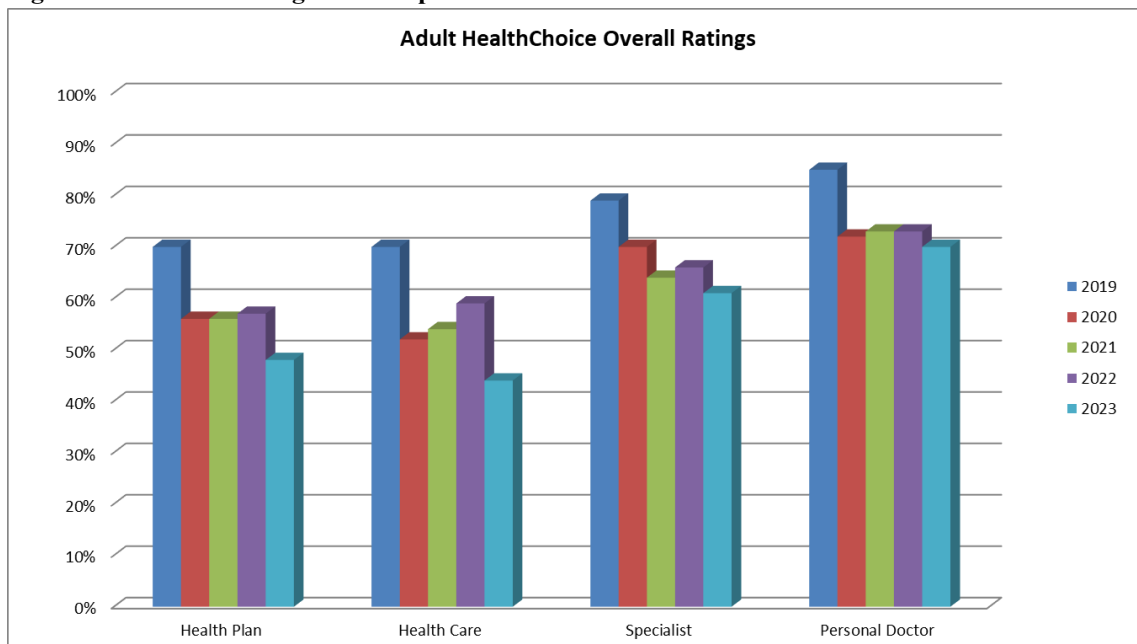


Figure 6: CAHPS® Ratings for Composite Measures – Adults



Children (General Population)

Figure 7: CAHPS® Overall Ratings –Children

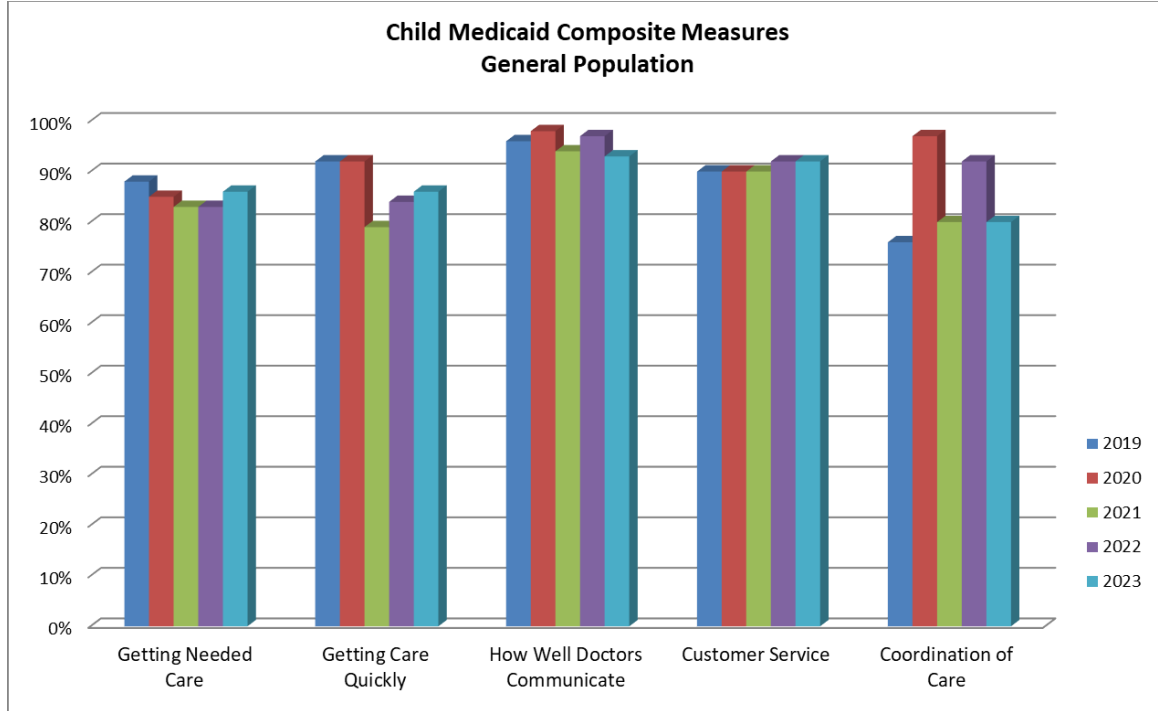
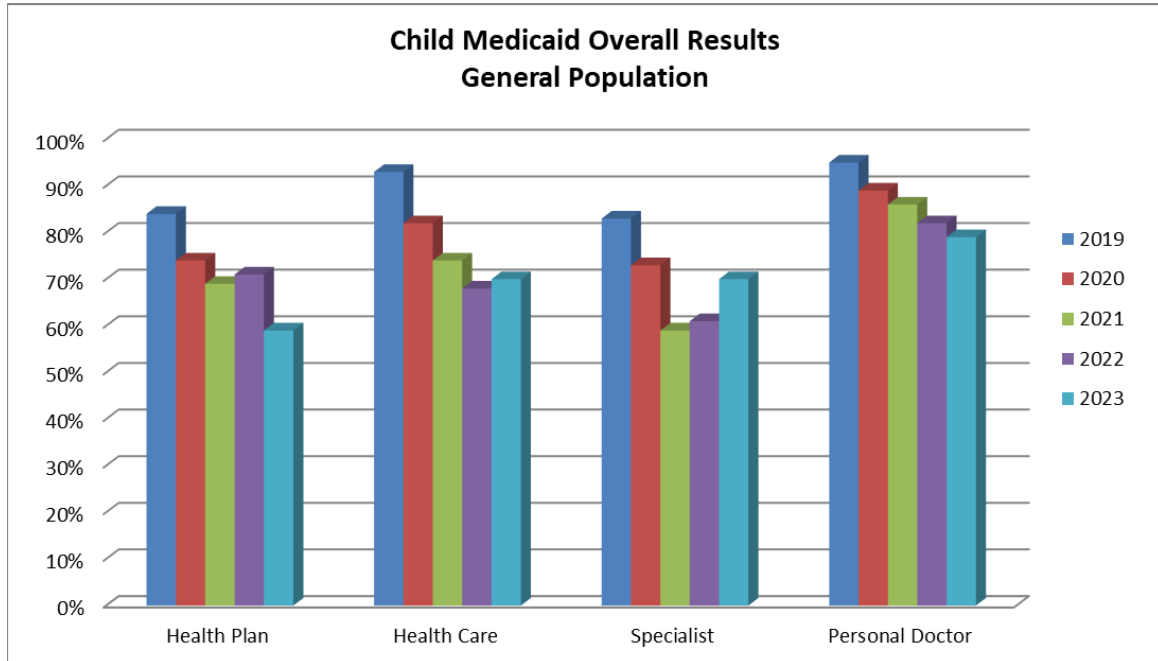


Figure 8: CAHPS® Ratings for Composite Measures –Children

Two measures (Shared Decision-Making and Health Promotion and Education) were significantly changed in 2013 and are not comparable to scores collected previous to this change.



Children (CCC Population)

Figure 9: CAHPS® Overall Ratings – Children with Chronic Conditions

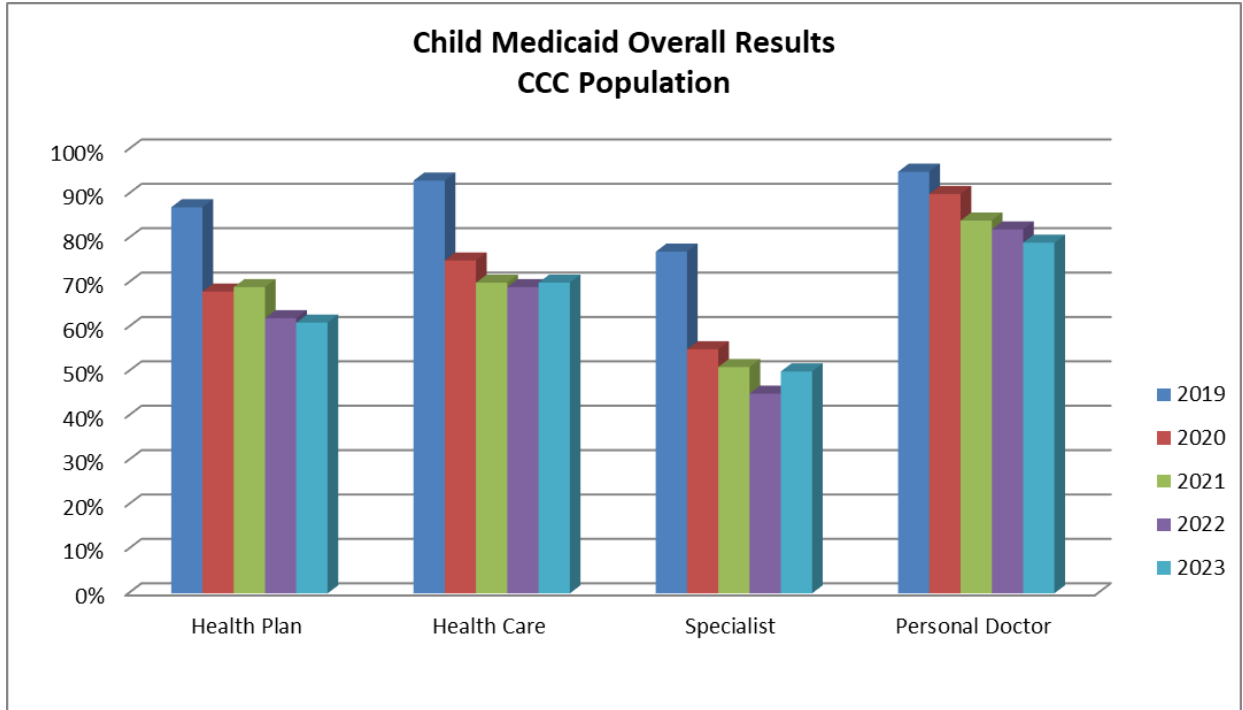


Figure 10: CAHPS® Ratings of Composite Measures – HealthChoice Children with Chronic Conditions

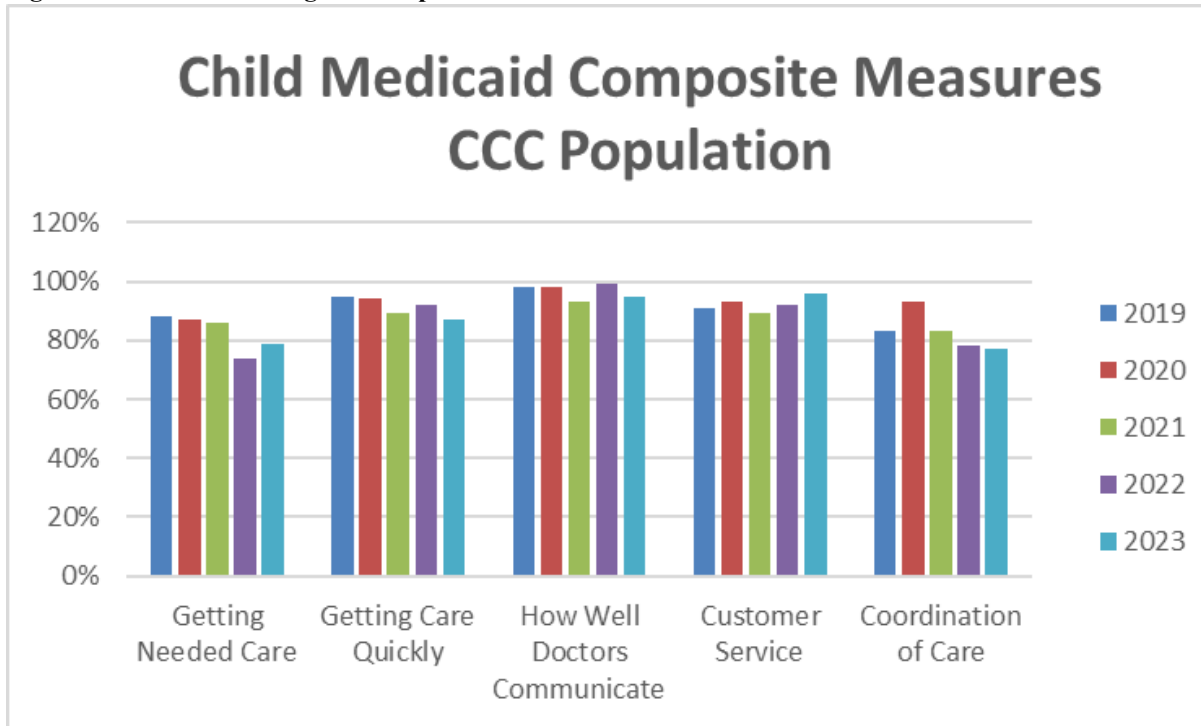
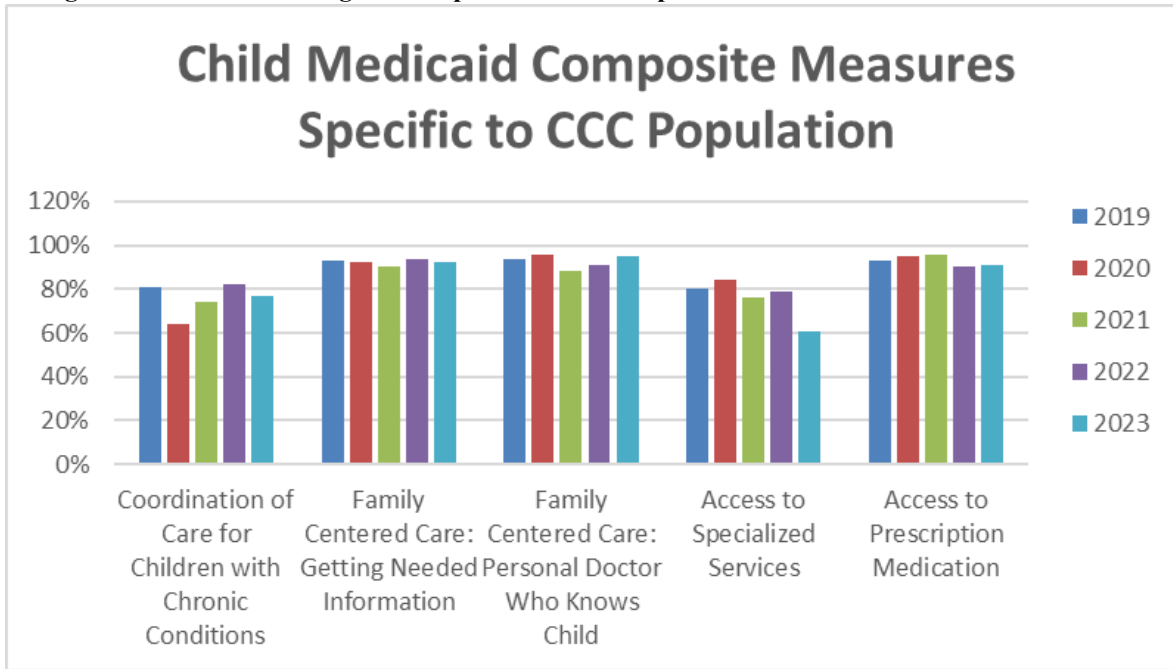


Figure 11: CAHPS® Ratings of Composite Measures Specific to Children with Chronic Conditions



Results:

2022 Jai Medical Systems Medicaid CAHPS Survey: Summary of Results

Adults:

Survey Measures	This Plan						Benchmark Comparisons				This Plan's Estimated 2023 NCQA Health Plan (Star) Rating	
	2023			2022			2023 HealthChoice Aggregate		2022 (MY 2021) NCQA Quality Compass National Average (All LOBs)			
	Rate	95% CI	(n)	Rate	Change	Rate	Change	Rate	Difference	Rate		Difference
<i>Patient Experience Measures Reported in NCQA Health Plan Ratings</i>												
Getting Care												
Getting Needed Care (% Always or Usually)	83.64%	(±7.66)	(90)	84.93%	[-1.29]	86.35%	[-2.71]	78.19%	[+5.45]	81.86%	[+1.78]	★★★★☆
Getting Care Quickly (% Always or Usually)	85.27%	(±7.45)	(87)	82.76%	[+2.51]	86.68%	[-1.41]	78.34%	[+6.93]	80.22%	[+5.05]	★★★★☆
Satisfaction With Plan Physicians												
Rating of Personal Doctor (% 9 or 10)	70.27%	(±7.36)	(148)	72.54%	[-2.26]	73.10%	[-2.83]	64.89%	[+5.38]	68.30%	[+1.97]	★★★★☆
Satisfaction With Plan and Plan Services												
Rating of Health Plan (% 9 or 10)	47.64%	(±7.08)	(191)	56.80%	[-9.16]	55.61%	[-7.97]	55.93%	[-8.29]	61.99%	[-14.35]	★★★★☆
Rating of All Health Care (% 9 or 10)	43.81%	(±9.49)	(105)	58.59%	[-14.78]	54.31%	[-10.50]	55.19%	[-11.38]	56.46%	[-12.65]	★★★★☆
<i>Additional Measures NOT Reported in NCQA Health Plan Ratings</i>												
Coordination of Care (% Always or Usually)	90.38%	(±8.01)	(52)	90.00%	[+0.38]	91.23%	[-0.84]	82.55%	[+7.83]	83.96%	[+6.42]	Not calculated
How Well Drs. Communicate (% Always or Usually)	91.42%	(±5.22)	(111)	93.90%	[-2.49]	95.29%	[-3.87]	91.78%	[-0.36]	92.51%	[-1.09]	
Customer Service (% Always or Usually)	92.98%	(±5.42)	(86)	93.15%	[-0.18]	88.36%	[+4.61]	88.60%	[+4.37]	88.91%	[+4.07]	
Rating of All Health Care (% 8, 9 or 10)	64.76%	(±9.14)	(105)	77.78%	[-13.02]	75.86%	[-11.10]	74.18%	[-9.42]	75.41%	[-10.65]	
Rating of Personal Doctor (% 8, 9 or 10)	82.43%	(±6.13)	(148)	85.92%	[-3.48]	88.28%	[-5.84]	81.41%	[+1.03]	82.38%	[+0.05]	
Rating of Specialist Seen Most Often (% 8, 9 or 10)	76.81%	(±9.96)	(69)	80.33%	[-3.52]	85.07%	[-8.26]	80.11%	[-3.30]	83.52%	[-6.71]	
Rating of Specialist Seen Most Often (% 9 or 10)	60.87%	(±11.52)	(69)	65.57%	[-4.70]	64.18%	[-3.31]	61.79%	[-0.92]	68.34%	[-7.47]	
Rating of Health Plan (% 8, 9 or 10)	73.30%	(±6.27)	(191)	73.37%	[-0.07]	72.19%	[+1.11]	76.28%	[-2.98]	77.98%	[-4.68]	

Children:

Survey Measures	This Plan						Benchmark Comparisons				This Plan's Estimated 2023 NCQA Health Plan (Star) Rating	
	2023			2022		2021		2023 HealthChoice Aggregate		2022 (MY 2021) NCQA Quality Compass National Average (All LOBs)		
	Rate	95% CI	(n)	Rate	Change	Rate	Change	Rate	Difference	Rate		Difference
Patient Experience Measures Reported in NCQA Health Plan Ratings (General Population)											☆☆☆☆☆	
Getting Care											☆☆☆☆☆	
Getting Needed Care (% Always or Usually)	85.91%	(±7.90)	(75)	82.61%	[+3.30]	82.68%	[+3.23]	77.99%	[+7.92]	84.19%	[+1.72]	☆☆☆☆☆
Getting Care Quickly (% Always or Usually)	86.10%	(±7.15)	(90)	83.77%	[+2.33]	79.35%	[+6.75]	81.67%	[+4.43]	86.74%	[-0.64]	☆☆☆☆☆
Satisfaction With Plan Physicians											☆☆☆☆☆	
Rating of Personal Doctor (% 9 or 10)	78.66%	(±6.27)	(164)	82.48%	[-3.82]	85.60%	[-6.94]	73.65%	[+5.01]	77.15%	[+1.51]	☆☆☆☆☆
Satisfaction With Plan and Plan Services											☆☆☆☆☆	
Rating of Health Plan (% 9 or 10)	59.43%	(±6.61)	(212)	71.20%	[-11.76]	69.18%	[-9.75]	66.83%	[-7.40]	71.99%	[-12.56]	☆☆☆☆☆
Rating of All Health Care (% 9 or 10)	70.00%	(±8.20)	(120)	68.18%	[+1.82]	74.23%	[-4.23]	67.84%	[+2.16]	70.77%	[-0.77]	☆☆☆☆☆
Additional Measures NOT Reported in NCQA Health Plan Ratings (General Population)											Not calculated	
Coordination of Care (% Always or Usually)	80.00%	(±12.40)	(40)	92.00%	[-12.00]	80.85%	[-0.85]	77.94%	[+2.06]	84.71%		[-4.71]
How Well Drs. Communicate (% Always or Usually)	93.22%	(±4.54)	(118)	96.83%	[-3.61]	93.99%	[-0.77]	90.77%	[+2.45]	94.18%		[-0.96]
Customer Service (% Always or Usually)	91.69%	(±6.95)	(61)	92.20%	[-0.51]	89.70%	[+2.00]	82.70%	[+9.00]	88.06%		[+3.63]
Rating of All Health Care (% 8, 9 or 10)	89.17%	(±5.56)	(120)	88.18%	[+0.98]	90.18%	[-1.02]	87.82%	[+1.34]	87.34%		[+1.83]
Rating of Personal Doctor (% 8, 9 or 10)	92.07%	(±4.13)	(164)	92.70%	[-0.63]	93.39%	[-1.31]	88.60%	[+3.48]	90.18%		[+1.89]
Rating of Specialist Seen Most Often (% 8, 9 or 10)	80.00%	(±17.53)	(20)	86.96%	[-6.96]	85.19%	[-5.19]	83.45%	[-3.45]	86.54%		[-6.54]
Rating of Specialist Seen Most Often (% 9 or 10)	70.00%	(±20.08)	(20)	60.87%	[+9.13]	59.26%	[+10.74]	67.36%	[+2.64]	73.04%		[-3.04]
Rating of Health Plan (% 8, 9 or 10)	79.72%	(±5.41)	(212)	86.41%	[-6.70]	87.42%	[-7.70]	85.23%	[-5.51]	86.48%	[-6.76]	
Children with Chronic Conditions Measures (CCC Population)											Not calculated	
Access to Prescription Meds (% Always or Usually)	90.54%	(±6.67)	(74)	90.48%	[+0.06]	95.92%	[-5.38]	88.35%	[+2.19]	90.55%		[-0.01]
Access to Specialized Services (% Always or Usually)	60.97%	(±17.65)	(29)	78.70%	[-17.74]	75.88%	[-14.91]	66.27%	[-5.30]	70.60%		[-9.63]
Getting Needed Information (% Always or Usually)	92.00%	(±6.14)	(75)	94.37%	[-2.37]	90.22%	[+1.78]	88.02%	[+3.98]	91.53%		[+0.47]
Personal Doctor Who Knows Child (% Yes)	94.72%	(±5.60)	(61)	91.16%	[+3.56]	87.89%	[+6.83]	90.18%	[+4.54]	91.55%		[+3.17]
Coordination of Care for CCC (% Yes)	77.27%	(±20.22)	(17)	81.67%	[-4.39]	73.72%	[+3.56]	70.15%	[+7.12]	76.27%	[+1.00]	