

CCHRI 2009 CAHPS 4.0H Member Survey – All Plans

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Facilitate cross-plan comparisons of member perceptions related to:

- Health Plan Overall
- Getting Needed Care
- Information on Costs
- Customer Service
- Claims Processing
- Overall Health Care
- Personal Doctor Overall
- Specialist Overall
- Getting Care Quickly
- How Well Doctors Communicate
- Shared Decision Making

Identification of target areas for cross-plan improvement

CCHRI Participating Health Plans

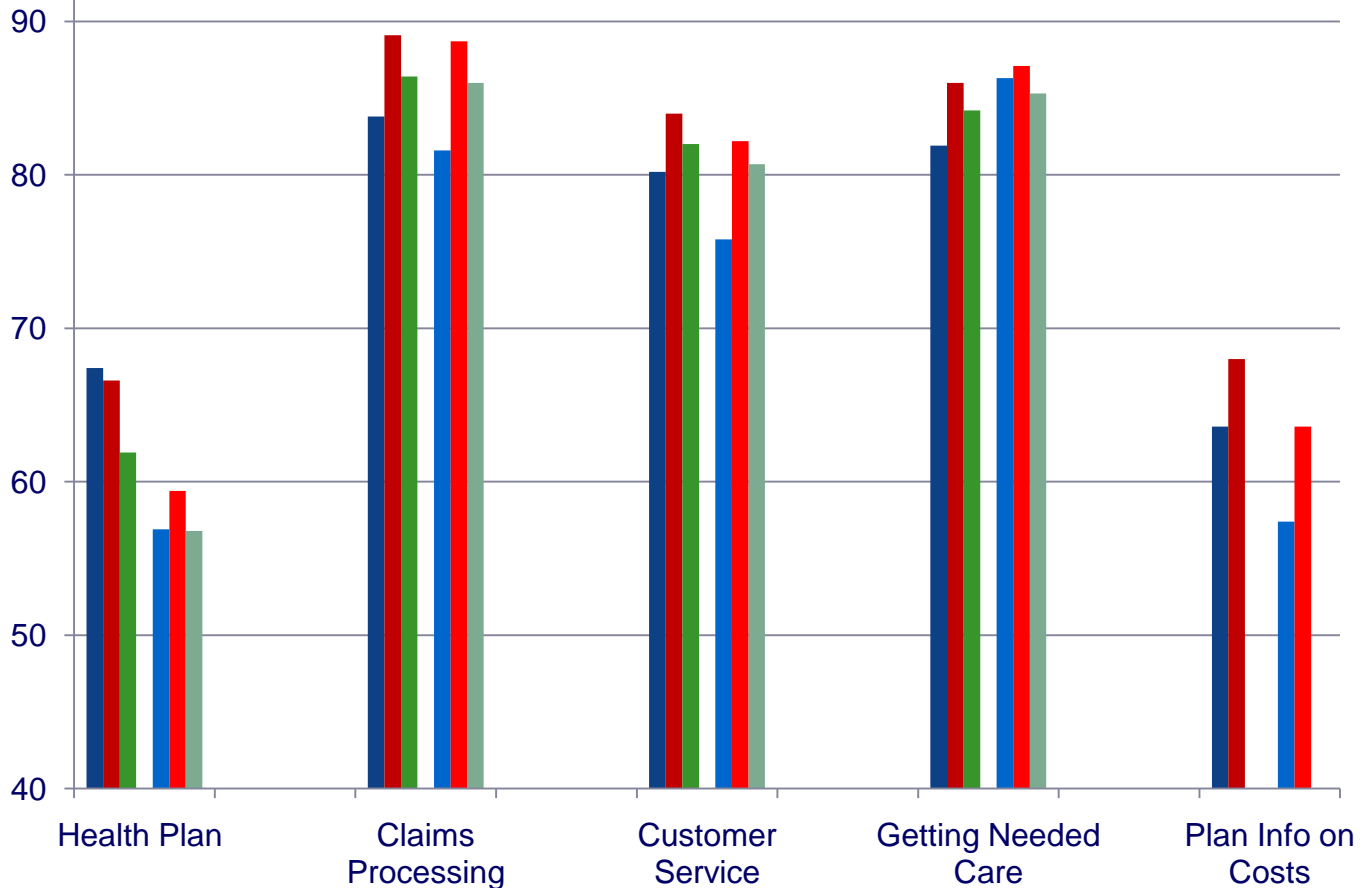
HMO	PPO
Aetna	Aetna
Anthem Blue Cross	Anthem Blue Cross
Blue Shield of CA	Blue Shield of CA
CIGNA	CIGNA
Health Net	Health Net
Kaiser Permanente N Cal	UnitedHealthCare
Kaiser Permanente S Cal	
PacifiCare	
Western Health Advantage	

2009 Project Statistics

	HMO	PPO
Number of plans	9	6
Sample size	1265 - 8690	1265 - 1925
Adj. Response Rate	23.90% - 37.32%	23.42% - 29.53%
Avg. Response Rate	30.80	26.99

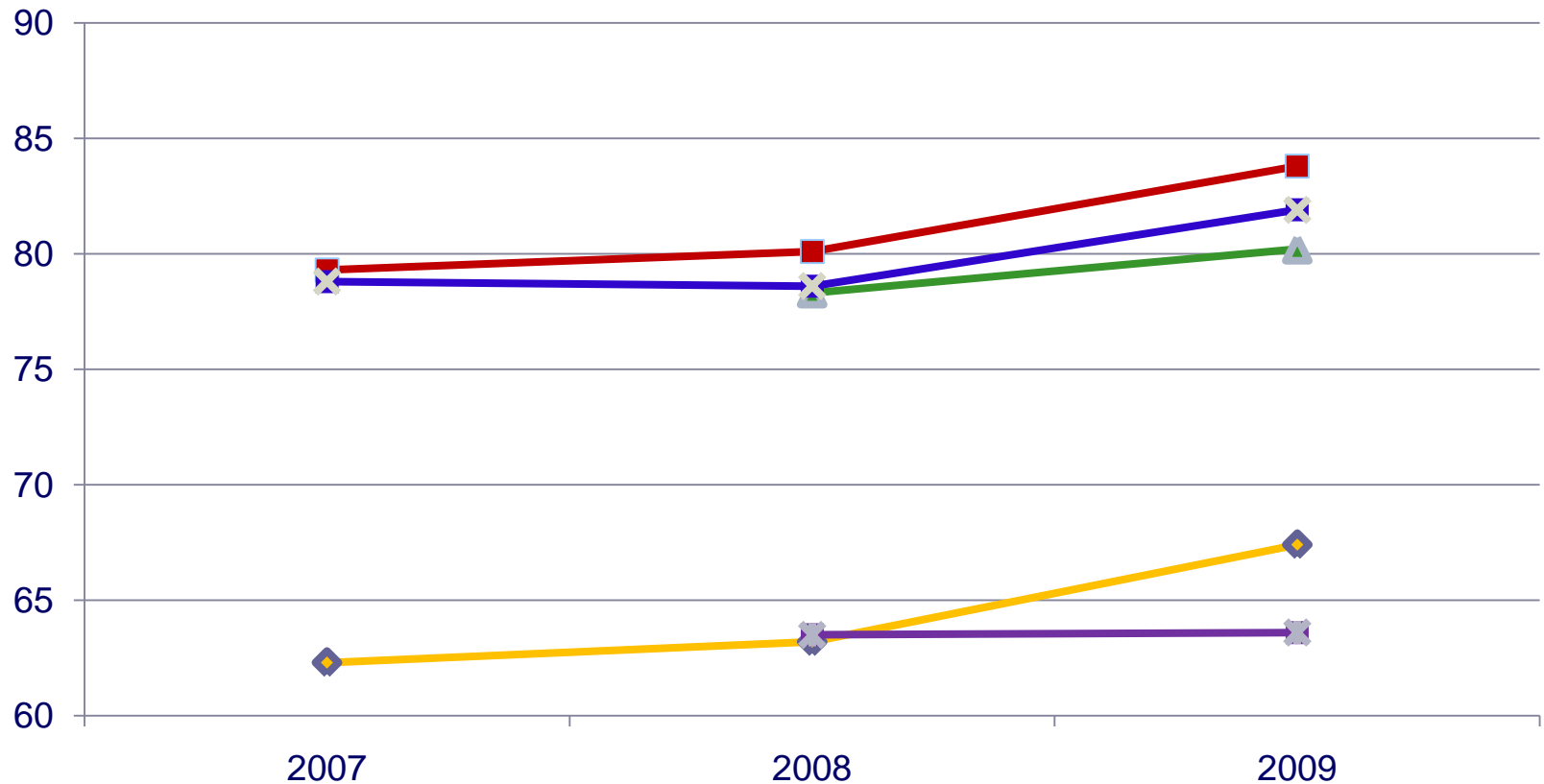
Member Experience with Plan

Member Experience with Plan – HMO, PPO and Benchmark



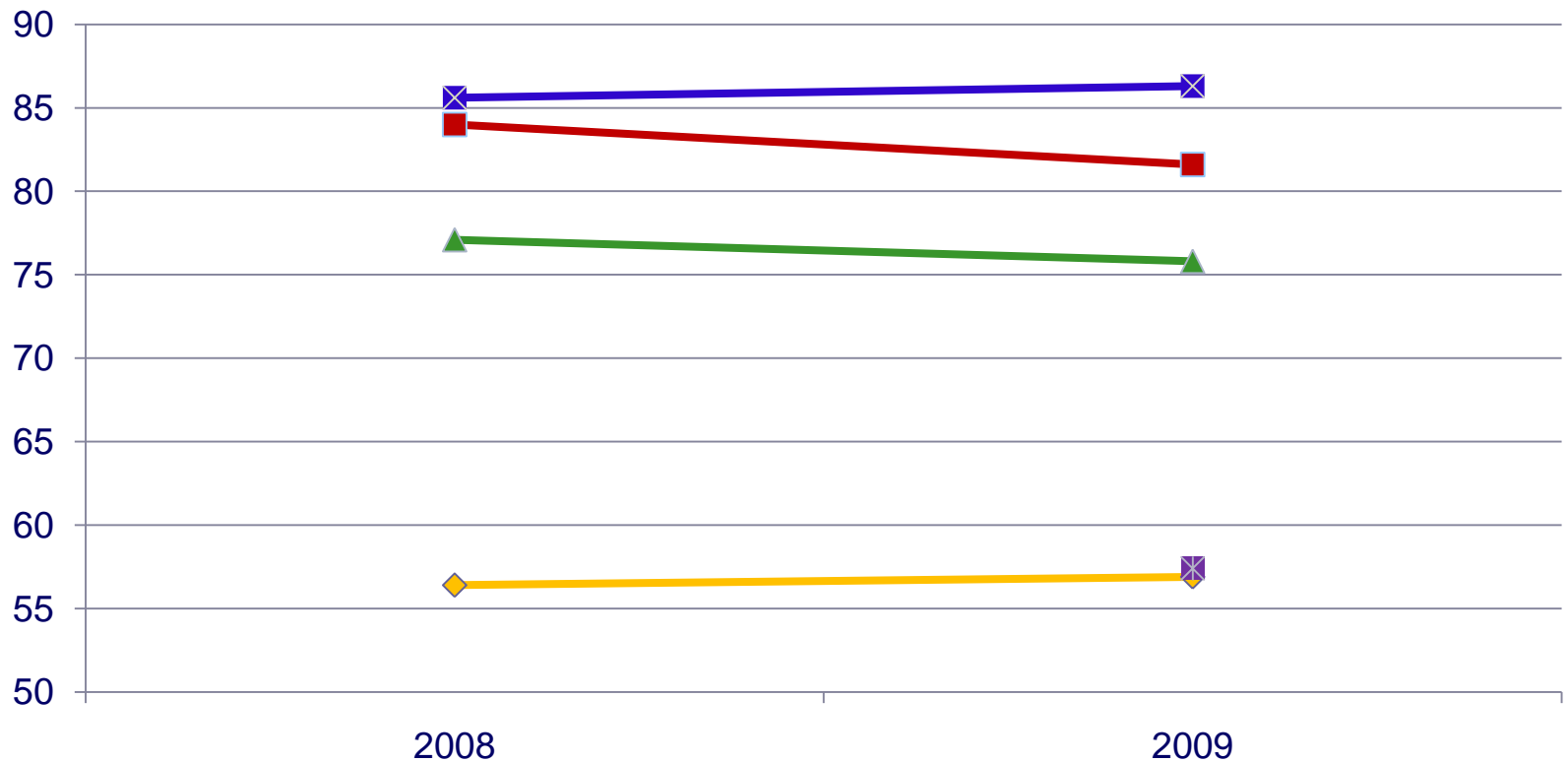
■ 2009 HMO ■ DSS HMO Avg ■ 2008 QC HMO Avg
■ 2009 PPO ■ DSS PPO Avg ■ 2008 QC PPO Avg

HMO Member Experience with Plan – 3 Year Trend



◆ Health Plan ■ Claims Processing ▲ Customer Service × Getting Needed Care × Plan Info on Costs

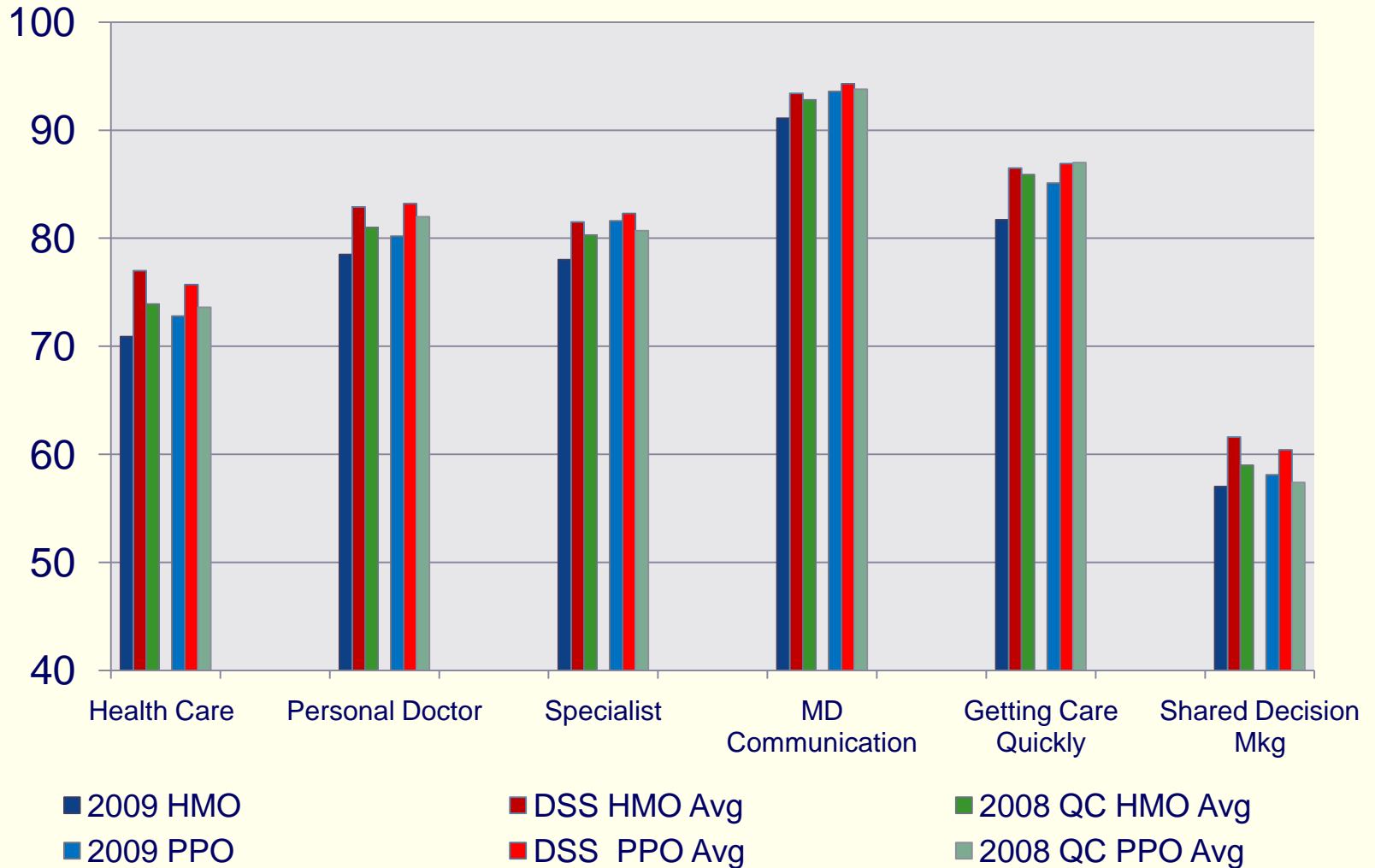
PPO Member Experience with Plan – 2 Year Trend



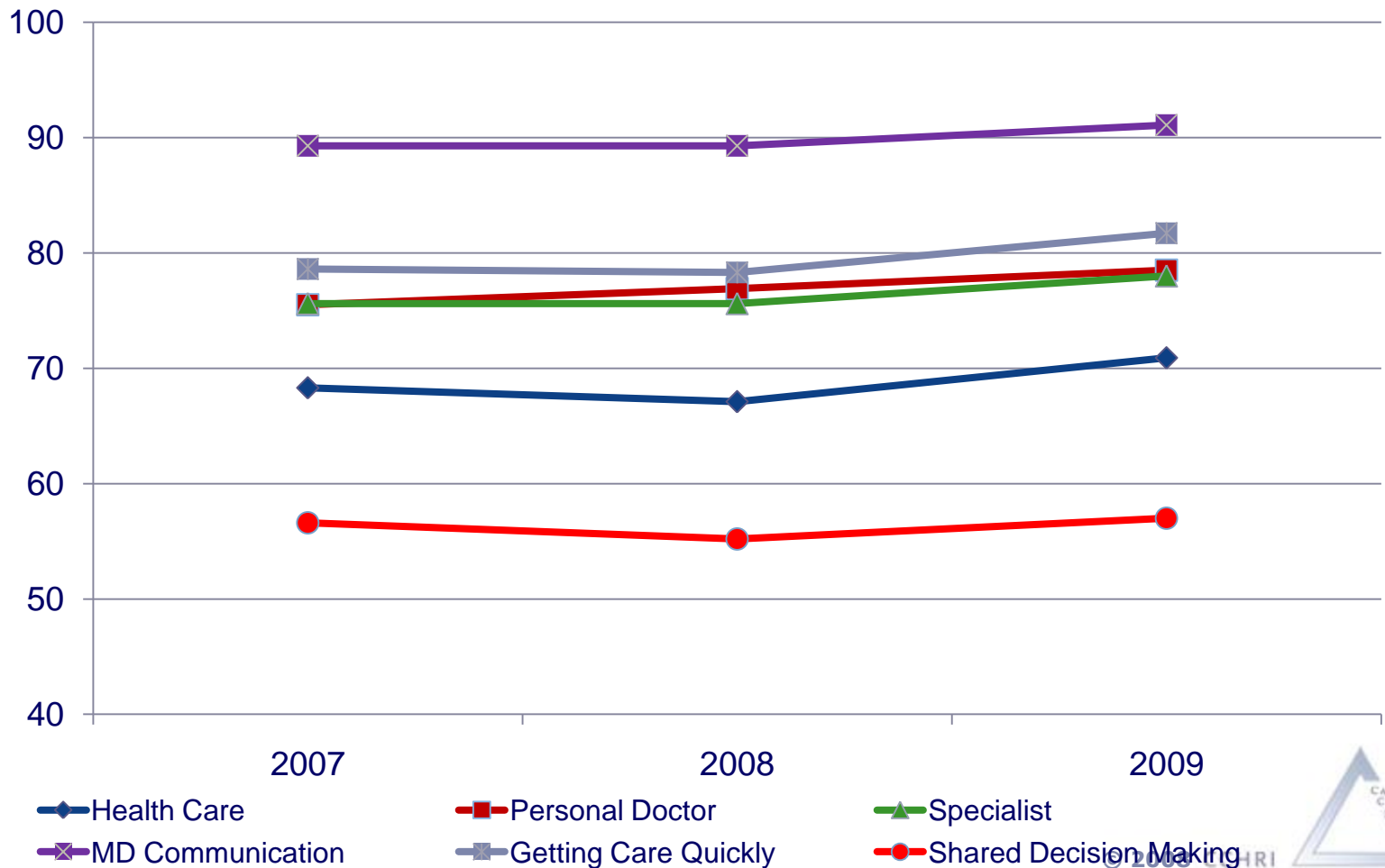
◆ Health Plan
 ■ Claims Processing
 ▲ Customer Service
 ✕ Getting Needed Care
 ✕ Plan Info on Costs

Member Experience with Providers

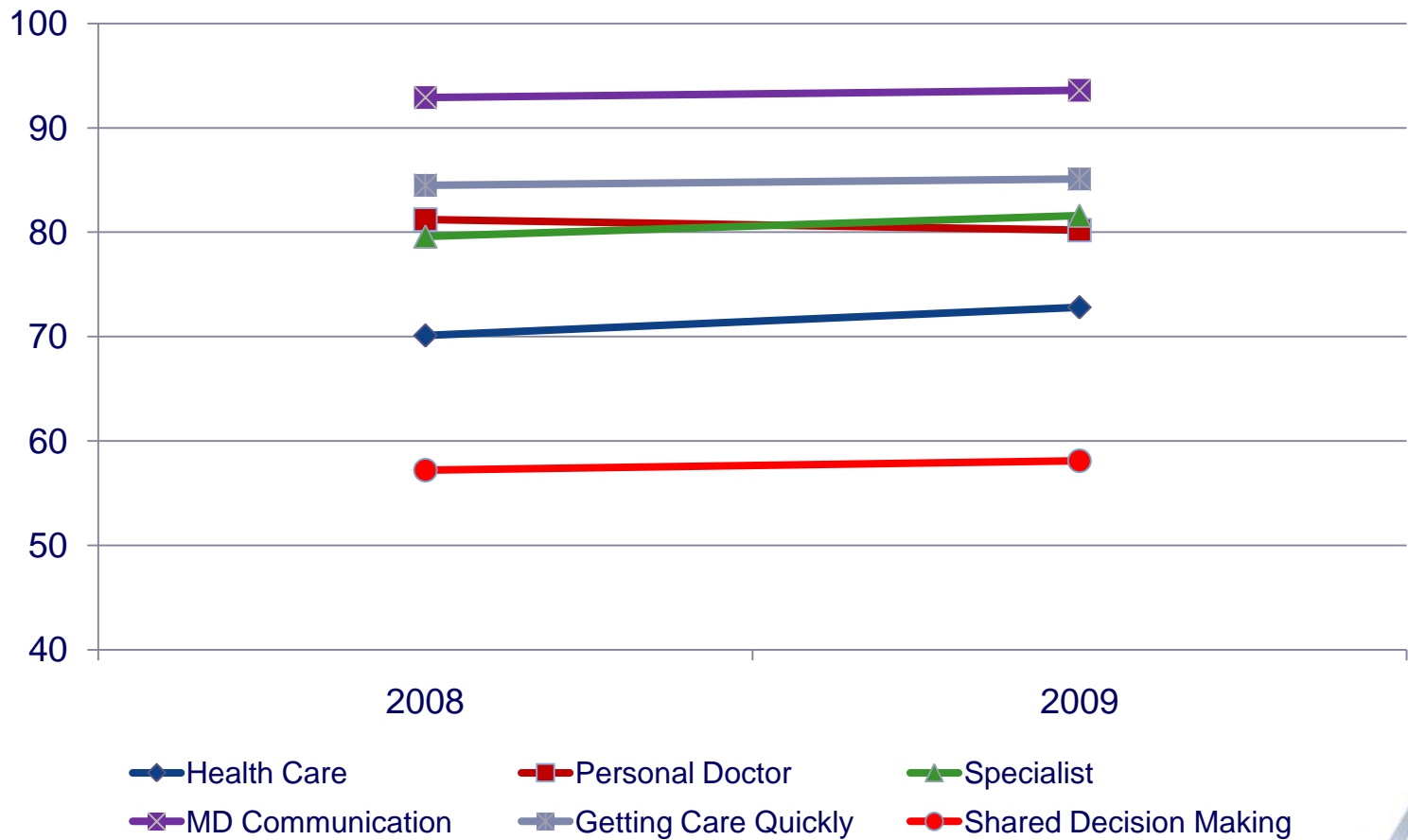
2009 Member Experience with Providers – HMO, PPO and Benchmark



HMO Member Experience with Providers – 3 Year Trend



PPO Member Experience with Provider – 2 Year Trend



DSS Key Driver Analysis – HMO

Opportunities for improvement – (in order of importance)

- Ability to choose personal doctor you're happy with
- Personal doctor overall
- Health care overall
- Satisfaction with plan website
- Customer service staff treated you with courtesy/respect
- Customer service staff gave information/ help needed
- Specialist overall
- Written materials/Internet provide information
- Claims handled quickly
- Claims handled correctly
- Doctor listens carefully
- Easy to get appointments with specialists
- Doctor shows respect

DSS Key Driver Analysis - PPO

Opportunities for improvement – (in order of importance)

- Claims handled correctly
- Claims handled quickly
- Satisfaction with resolution of written problem/complaint
- Customer service staff gave information/help needed
- Health care overall
- Customer service staff treated you with courtesy/respect
- Written materials/Internet provide information
- Specialist overall
- Personal doctor overall
- Easy to get care, tests, or treatment
- Got care right away when needed
- Forms easy to fill out

Summary

- Slight improvement but continues to be room for more – scores generally below DSS national average for both HMO and PPO
- Greatest variation between plans (12+point spread)

PPO	HMO
Health Plan overall rating	Claims processing
Plan information on costs	Health plan overall
Claims processing	Customer service

- Greatest opportunities

Plan Services	Provider – Access to care
Written materials/website	PCP
Customer service	Specialists
Claims processing	Getting appointments/care

Greatest Improvement 2008 - 2009

HMO

- Health plan overall-4.2
- Healthcare overall-3.8
- Claims Processing-3.7
- Getting care quickly-3.4
- Getting needed care-3.3

PPO

- Healthcare overall-2.7
- Specialist overall-2

Discussion