



# **MY 2023 CAHPS® COMMERCIAL ADULT NON-PPO 5.1H SURVEY**

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**ALAMEDA ALLIANCE FOR HEALTH**

ALAMEDA ALLIANCE FOR HEALTH

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# OVERVIEW

Press Ganey (PG), a National Committee for Quality Assurance (NCQA) certified HEDIS® Survey Vendor, was selected by Alameda Alliance for Health to conduct its MY 2023 CAHPS® 5.1H Commercial Adult Survey. NCQA requires health plans to submit CAHPS survey results in compliance with HEDIS® accreditation requirements.

**SURVEY OBJECTIVE** The overall objective of the CAHPS® study is to capture accurate and complete information about consumer-reported experiences with health care. Specifically, the survey aims to measure how well plans are meeting their members' expectations and goals; to determine which areas of service have the greatest effect on members' overall satisfaction; and to identify areas of opportunity for improvement, which can aid plans in increasing the quality of provided care.

**2024 NCQA CHANGES** NCQA made changes to the survey or program for 2024.

One question will be deleted from the 2024 Commercial Adult Survey and the 2024 Medicaid Adult Survey:

- Have you had either a flu shot or flu spray in the nose since July 1, 20XX?

Your Project Manager is Carrie-Ann Rojas (Carrie.Rojas@pressganey.com). Should you have any questions or comments regarding any aspect of the survey or reporting process, please feel free to email your Project Manager.

# METHODOLOGY

## DATA COLLECTION

The MY 2023 Commercial Adult version of the 5.1H CAHPS survey was administered via the following methodology:

First questionnaire  
mailed  
2/16/2024



Second questionnaire  
mailed  
3/22/2024



Initiate follow-up calls  
to non-responders  
4/12/2024 - 4/26/2024



Last day to accept  
completed surveys  
5/8/2024

## QUALIFIED RESPONDENTS

Included beneficiaries who were...

- 18 years and older (as of December 31<sup>st</sup> of the measurement year)
- Continuously enrolled in the plan, allowing for one gap of up to 45 days during the measurement year

## 2024 RESPONSE RATE CALCULATION

$$\frac{185 \text{ (Completed)}}{1100 \text{ (Sample)} - 49 \text{ (Ineligible)}} = \frac{185}{1051} = 17.6\%$$

## COMPLETES - MODALITY BY LANGUAGE

Language	Mail	Phone	Total
English	142	28	170
Spanish	10	5	15
<b>Total</b>	<b>152</b>	<b>33</b>	<b>185</b>

Total Number of Undeliverables: 18

Note: Respondents were given the option of completing the survey in Spanish. In place of the English survey, a Spanish survey was mailed to members who were identified by the plan as Spanish-speaking. A telephone number was also provided on the survey cover letter for all members to call if they would like to complete the survey in Spanish.

## RESPONSE RATE TRENDING

		2022	2023	2024
Completed	<b>SUBTOTAL</b>	<b>231</b>	<b>215</b>	<b>185</b>
Ineligible	Does not Meet Eligibility Criteria (01)	10	12	11
	Language Barrier (03)	16	13	38
	Mentally/Physically Incapacitated (04)	0	0	0
	Deceased (05)	0	0	0
	<b>SUBTOTAL</b>	<b>26</b>	<b>25</b>	<b>49</b>
Non-response	Break-off/Incomplete (02)	11	11	4
	Refusal (06)	30	15	13
	Maximum Attempts Made (07)	802	834	849
	Added to DNC List (08)	0	0	0
	<b>SUBTOTAL</b>	<b>843</b>	<b>860</b>	<b>866</b>
<b>Total Sample</b>		<b>1100</b>	<b>1100</b>	<b>1100</b>
<b>Oversampling %</b>		<b>0.0%</b>	<b>0.0%</b>	<b>0.0%</b>
<b>Response Rate</b>		<b>21.5%</b>	<b>20.0%</b>	<b>17.6%</b>
<b>PG Response Rate</b>		<b>12.2%</b>	<b>11.6%</b>	<b>10.3%</b>

# INDUSTRY TRENDS

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- Alameda Alliance for Health

# PG BOOK OF BUSINESS TRENDS

COMMERCIAL ADULT: Non-PPO

**Trend Highlights** The robust Press Ganey Book of Business is valuable in monitoring industry trends. On the right, we have provided a side-by-side comparison of aggregate PG Book of Business scores to help you understand broader trends in measure scoring over the past five years.

**Commercial Adult Non-PPO:** Among the Commercial Adult Non-PPO population, no measures declined by more than 1% compared to last year. The only increase by more than 1% was in *Coordination of Care*.

Every measure has decreased since 2020, with the greatest decrease in *Rating of Health Care* with a difference of 7.2%.

PG Book of Business Trends					
	2020	2021	2022	2023	2024
Rating Questions (% 9 or 10)					
Q31. Rating of Health Plan	46.8%	48.5%	47.0%	44.6%	44.6%
Q8. Rating of Health Care	57.0%	57.5%	53.5%	50.5%	49.8%
Q18. Rating of Personal Doctor	71.8%	70.6%	69.5%	68.0%	68.4%
Q22. Rating of Specialist	70.4%	71.0%	68.5%	66.8%	66.5%
Rating Questions (% 8, 9 or 10)					
Q31. Rating of Health Plan	68.4%	70.4%	68.7%	66.5%	66.5%
Q8. Rating of Health Care	80.0%	80.4%	77.5%	75.5%	74.6%
Q18. Rating of Personal Doctor	87.3%	86.2%	85.2%	84.5%	84.9%
Q22. Rating of Specialist	85.9%	86.6%	84.7%	84.1%	83.6%
Getting Needed Care (% A/U)					
Q9. Getting care, tests, or treatment	89.8%	88.9%	86.4%	84.8%	84.2%
Q20. Getting specialist appointment	83.0%	85.0%	80.8%	77.9%	77.3%
Getting Care Quickly (% A/U)					
Q4. Getting urgent care	88.0%	87.1%	83.7%	81.9%	81.6%
Q6. Getting routine care	81.8%	82.8%	79.9%	77.2%	76.6%
Claims Processing (% A/U)					
Q29. Handled claims quickly	87.8%	88.1%	87.1%	86.2%	85.7%
Q30. Handled claims correctly	90.0%	90.5%	89.4%	88.6%	88.5%
Coordination of Care (Q17) (% A/U)					
	84.8%	84.7%	83.6%	83.1%	84.2%

Increase of 1% or greater since 2023

Decrease of 1% or greater since 2023

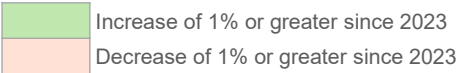
# PG BOOK OF BUSINESS TRENDS

COMMERCIAL ADULT: ALL LOB

**Commercial Adult All LOB:** Among the Commercial Adult population, no measures declined or increased by more than 1% compared to last year. The biggest decreases was in *Rating of Health Care*.

Every measure has decreased since 2020, with the greatest decrease in *Rating of Health Care* with a difference of 7.4%.

PG Book of Business Trends					
	2020	2021	2022	2023	2024
Rating Questions (% 9 or 10)					
Q31. Rating of Health Plan	46.2%	47.7%	46.1%	44.2%	43.9%
Q8. Rating of Health Care	56.7%	57.0%	52.5%	49.9%	49.3%
Q18. Rating of Personal Doctor	71.8%	70.7%	69.2%	68.0%	68.4%
Q22. Rating of Specialist	70.3%	70.5%	68.0%	66.1%	66.1%
Rating Questions (% 8, 9 or 10)					
Q31. Rating of Health Plan	68.2%	70.0%	68.4%	66.7%	66.3%
Q8. Rating of Health Care	80.3%	80.6%	77.5%	75.3%	74.5%
Q18. Rating of Personal Doctor	87.5%	86.5%	85.4%	84.8%	85.1%
Q22. Rating of Specialist	86.1%	86.6%	84.5%	83.8%	83.4%
Getting Needed Care (% A/U)					
Q9. Getting care, tests, or treatment	90.2%	89.4%	86.8%	85.2%	84.9%
Q20. Getting specialist appointment	83.5%	85.3%	80.8%	78.1%	77.6%
Getting Care Quickly (% A/U)					
Q4. Getting urgent care	88.4%	87.6%	84.3%	82.6%	82.6%
Q6. Getting routine care	82.4%	83.5%	80.3%	77.9%	77.7%
Claims Processing (% A/U)					
Q29. Handled claims quickly	88.0%	88.5%	86.6%	86.1%	85.5%
Q30. Handled claims correctly	90.5%	91.1%	89.6%	89.1%	89.0%
Coordination of Care (Q17) (% A/U)					
	84.8%	84.5%	83.3%	82.9%	83.7%



# EXECUTIVE SUMMARY

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- Alameda Alliance for Health



# OVERVIEW OF TERMS

**Summary Rates (SRS)** are defined by NCQA in its HEDIS MY 2023 CAHPS® 5.1H guidelines and generally represent the most favorable response percentages.

**Percentile Rankings** Your plan's approximate percentile rankings in relation to the Quality Compass® All Plans benchmark were calculated by Press Ganey using information derived from the NCQA 1-100 Benchmark.

**PG Benchmark Information** The source for data contained within the PG Book of Business is all submitting plans that contracted with PG for MY 2023. Submission occurred on May 24<sup>th</sup>, 2024.

**NCQA Benchmark Information** The source for data contained in this publication is Quality Compass® All Plans 2023. It is used with the permission of NCQA. Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass® is a registered trademark of NCQA.

**Significance Testing** All significance testing is performed at the 95% confidence level using a t-test.

**Small Denominator Threshold** NCQA will assign a measure result of NA to overall ratings or composites with a denominator (i.e., the average number of responses across all questions used to calculate the composite) less than 100.

**Non-Accreditation Notation** Throughout the report you will see a notation of “+” which indicates that the given measure is not utilized for accreditation score calculation.

**Technical Notes** Please refer to the Technical Notes for more information.

# 2024 DASHBOARD

COMMERCIAL ADULT: Non-PPO



185

Completed  
surveys

17.6%

Response Rate

**Stars:** PG **Estimated** NCQA  
Rating  
NA = Denominator < 100

**Scores:** All scores displayed  
are Summary Rate Scores

- Rating: % 9 or 10
- Composites: % Usually or Always
- Smoking: % Always, Usually, or Sometimes

**Significance Testing:** Current  
score is significantly  
higher/lower than 2023 (↑/↓) or  
2022 (↕/↗).

**Percentiles:** Based on the  
2024 PG Book of Business

**Health Plan Key Driver  
Classification:** Details can be  
found in the KDA section.

## Accreditation Measures

Rating of Health Plan ★★★★★				
Rating of Health Plan	53.6%	↕	78 <sup>th</sup>	---
Rating of Health Care ★★★★★				
Rating of Health Care	51.6%		51 <sup>st</sup>	Power
Rating of Personal Doctor ★★★★★				
Rating of Personal Doctor	67.6%	↕	38 <sup>th</sup>	Opportunity
Rating of Specialist (NA)				
Rating of Specialist	56.3%		<5 <sup>th</sup>	Opportunity
Coordination of Care (NA)				
Coordination of Care	78.2%		13 <sup>th</sup>	Wait

## Other Measures

Claims Processing +				
Composite	80.0%		13 <sup>th</sup>	---
Q29. Handled claims quickly	80.0%		22 <sup>nd</sup>	Wait
Q30. Handled claims correctly	80.0%		11 <sup>th</sup>	Wait
Customer Service +				
Composite	82.7%		19 <sup>th</sup>	---
Q24. Provided information or help	80.6%		54 <sup>th</sup>	Retain
Q25. Treated with courtesy and respect	84.8%		<5 <sup>th</sup>	Wait
Ease of Filling Out Forms +				
Ease of Filling Out Forms +	94.8%		20 <sup>th</sup>	Wait

## Getting Needed Care ★

Composite	71.1%		6 <sup>th</sup>	---
Q9. Getting care, tests, or treatment	69.6%		<5 <sup>th</sup>	Opportunity
Q20. Getting specialist appointment	72.5%		29 <sup>th</sup>	Wait

## Getting Care Quickly (NA)

Composite	65.0%		<5 <sup>th</sup>	---
Q4. Getting urgent care	76.8%	↑	20 <sup>th</sup>	Wait
Q6. Getting routine care	53.2%		<5 <sup>th</sup>	Opportunity

## How Well Doctors Communicate +

Composite	89.7%		<5 <sup>th</sup>	---
Q12. Dr. explained things	88.1%		<5 <sup>th</sup>	Opportunity
Q13. Dr. listened carefully	91.3%		12 <sup>th</sup>	Opportunity
Q14. Dr. showed respect	92.9%		8 <sup>th</sup>	Opportunity
Q15. Dr. spent enough time	86.5%	↕	6 <sup>th</sup>	Opportunity

## Advised to Quit Smoking: 2YR +

Advised to Quit Smoking: 2YR +	89.7%		85 <sup>th</sup>	---
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# ESTIMATED NCQA HEALTH INSURANCE PLAN RATINGS

COMMERCIAL ADULT: ALL LOB

	SCORE DEFINITION	2024 BASE	2024 HPR SCORE*	HPR 4 STAR THRESHOLD	HPR PERCENTILE BAND	PG ESTIMATED RATING
PATIENT EXPERIENCE						3
GETTING CARE						1
Getting Needed Care	Usually or Always	108	71.0%	86.7%	<10 <sup>th</sup>	1
Getting Care Quickly	Usually or Always	91	64.9%	86.8%	<10 <sup>th</sup>	NA
SATISFACTION WITH PLAN PHYSICIANS						3
Rating of Personal Doctor	9 or 10	145	67.5%	71.5%	33 <sup>rd</sup>	3
Rating of Specialist	9 or 10	80	56.2%	70.1%	<10 <sup>th</sup>	NA
Coordination of Care	Usually or Always	87	78.1%	85.9%	10 <sup>th</sup>	NA
SATISFACTION WITH PLAN AND PLAN SERVICES						3.5
Rating of Health Plan	9 or 10	179	53.6%	47.1%	67 <sup>th</sup>	4
Rating of Health Care	9 or 10	124	51.6%	55.1%	33 <sup>rd</sup>	3

## EXPLANATION

NCQA calculates health plan ratings (HPR) by evaluating plans in three categories: consumer satisfaction, clinical quality (includes prevention and treatment) and NCQA Accreditation Standards score.

The overall NCQA star rating is the weighted average of an organization’s HEDIS and CAHPS measure ratings, plus Accreditation bonus points (if the organization has NCQA Accreditation), rounded to the nearest half point.

The CAHPS measures are classified based on their national percentile (10th, 33rd, 67th and 90th) into scores ranging from 1 to 5 (in increments of 0.5), where 5 is the highest score and 1 is the lowest.

Results are summarized in the table to the left. **Percentiles and ratings are estimated by PG** based on the 2023 NCQA data and benchmarks.

Rating = 1	Rating = 2	Rating = 3	Rating = 4	Rating = 5
<10 <sup>th</sup> Percentile	10 <sup>th</sup> – 32 <sup>nd</sup> Percentile	33 <sup>rd</sup> – 66 <sup>th</sup> Percentile	67 <sup>th</sup> – 89 <sup>th</sup> Percentile	≥90 <sup>th</sup> Percentile

- Notes:
- NCQA will assign a measure result of NA to overall ratings or composites with a denominator (i.e., the average number of responses across all questions used to calculate the composite) less than 100.

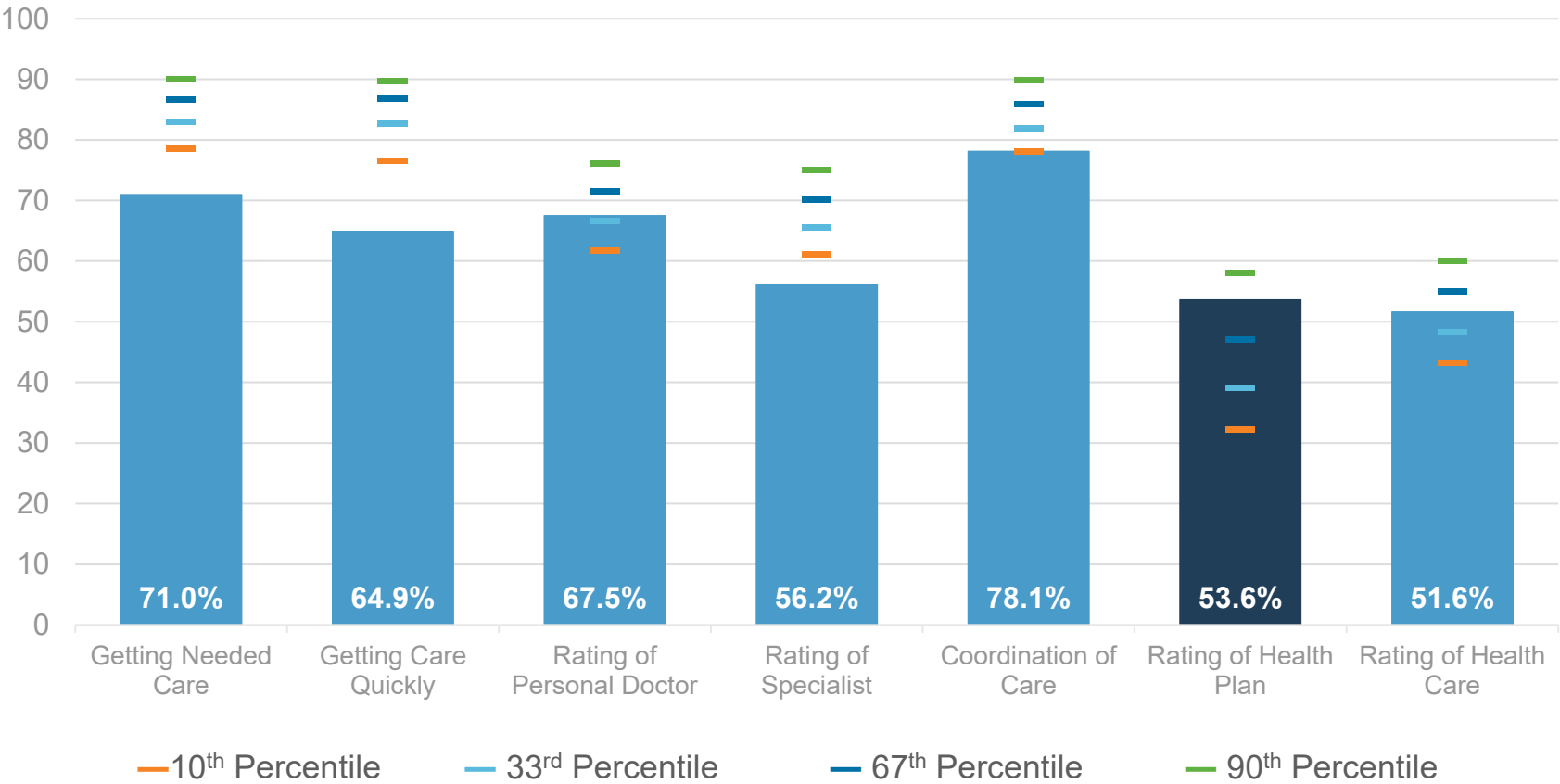
\*HPR scores are truncated to three digits (XX.X%) according to the NCQA calculation protocol for Health Plan Ratings. Please note that scores on this slide may differ slightly compared to scores found throughout the rest of the report.

# PERFORMANCE TO STAR CUT POINTS

COMMERCIAL ADULT: ALL LOB

## COMPARISON TO QUALITY COMPASS CUT POINTS

The graph shows how your plan's **Estimated Health Plan Rating (HPR) scores** used for accreditation ratings compare to the most recent All LOB Quality Compass thresholds published by NCQA (Fall 2023).



**Dark Blue** bar = Your plan's performance is at or above the 67<sup>th</sup> percentile




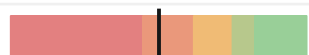







**Light Blue** bar = Your plan's performance is below the 67<sup>th</sup> percentile

**HPR scores** are **truncated** to three digits (XX.X%) according to the NCQA calculation protocol for Health Plan Ratings. Please note that scores on this slide may differ slightly compared to scores found throughout the rest of the report.

\* Scores are % 9 or 10, and % Always or Usually.

# MEASURE SUMMARY




COMMERCIAL ADULT: Non-PPO

MEASURE	SUMMARY RATE		CHANGE	2024 Non-PPO PG BOOK OF BUSINESS BENCHMARK				
	2023	2024		PERCENTILE DISTRIBUTION			PERCENTILE RANK	BoB SRS
				0	20	40		
Health Plan Domain								
Rating of Health Plan <i>% 9 or 10</i>	46.4%	53.6%	7.2				78 <sup>th</sup>	44.6% ▲
Getting Needed Care <i>% Usually or Always</i>	72.0%	71.1%	-0.9				6 <sup>th</sup>	80.8% ▼
Customer Service + <i>% Usually or Always</i>	82.9%	82.7%	-0.2				19 <sup>th</sup>	86.9%
Claims Processing + <i>% Usually or Always</i>	79.0%	80.0%	1.0				13 <sup>th</sup>	87.1%
Ease of Filling Out Forms + <i>% Usually or Always</i>	94.5%	94.8%	0.3				20 <sup>th</sup>	96.4%
Health Care Domain								
Rating of Health Care <i>% 9 or 10</i>	48.8%	51.6%	2.8				51 <sup>st</sup>	49.8%
Getting Care Quickly <i>% Usually or Always</i>	56.0%	65.0%	9.0				<5 <sup>th</sup>	79.1% ▼
How Well Doctors Communicate + <i>% Usually or Always</i>	87.5%	89.7%	2.2				<5 <sup>th</sup>	94.8%
Coordination of Care <i>% Usually or Always</i>	80.0%	78.2%	-1.8				13 <sup>th</sup>	84.2%
Rating of Personal Doctor <i>% 9 or 10</i>	57.6%	67.6%	10.0				38 <sup>th</sup>	68.4%
Rating of Specialist <i>% 9 or 10</i>	53.8%	56.3%	2.5				<5 <sup>th</sup>	66.5%

**Significance Testing** Current score is significantly higher/lower than the 2023 score (↑/↓) or benchmark score (▲/▼).

# MEASURE SUMMARY

COMMERCIAL ADULT: Non-PPO

MEASURE	SUMMARY RATE		CHANGE	2024 Non-PPO PG BOOK OF BUSINESS BENCHMARK						
	2023	2024		PERCENTILE DISTRIBUTION					PERCENTILE RANK	BoB SRS
				0	20	40	60	80		
Effectiveness of Care										
Advised to Quit Smoking: 2YR + <i>% Sometimes, Usually, or Always</i>	75.7%	89.7%	14.0						85 <sup>th</sup>	72.7%
Discussing Cessation Meds: 2YR + <i>% Sometimes, Usually, or Always</i>	44.4%	62.1%	17.7						75 <sup>th</sup>	49.3%
Discussing Cessation Strategies: 2YR + <i>% Sometimes, Usually, or Always</i>	54.1%	62.1%	8.0						79 <sup>th</sup>	45.1%

**Significance Testing** Current score is significantly higher/lower than the 2023 score (↑/↓) or benchmark score (▲/▼).

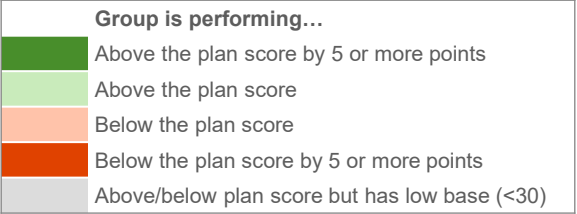
# HEALTH EQUITY







COMMERCIAL ADULT: Non-PPO

The infographic below highlights disparities in health equity among key demographic groups across the key metrics. Darker shading indicates a larger disparity.

Accreditation Measure

Other Measure



			Rating of Health Plan		Rating of Health Care		Getting Needed Care		Getting Care Quickly		Coordination of Care		Rating of Personal Doctor	
			SRS	△	SRS	△	SRS	△	SRS	△	SRS	△	SRS	△
Demographic	Category	Total	53.6%		51.6%		71.1%		65.0%		78.2%		67.6%	
 Gender	Male	n = 33		-2%		-4%		-5%		9%		-12%		3%
	Female	n = 143		1%		1%		2%		1%		2%		0%
 Age	18 – 34	n = 3		13%		48%		29%		-23%		22%		-1%
	35 – 44	n = 17		-22%		-2%		9%		-7%		22%		-5%
	45 – 54	n = 34		-4%		-4%		1%		1%		0%		-3%
	55 or older	n = 125		3%		-1%		-1%		2%		-1%		1%
 Overall Health	Excellent/Very Good	n = 66		18%		17%		9%		5%		4%		14%
	Good	n = 83		-17%		-13%		-8%		-7%		-5%		-14%
	Fair/Poor	n = 28		0%		1%		2%		9%		-1%		4%
 Mental Health	Excellent/Very Good	n = 93		1%		-3%		1%		-9%		2%		2%
	Good	n = 72		-2%		-1%		-2%		10%		-4%		-3%
	Fair/Poor	n = 13		0%		15%		3%		15%		5%		2%
 Education	HS Grad or less	n = 93		11%		-1%		-1%		3%		8%		9%
	Some college or more	n = 83		-14%		-2%		2%		-3%		-9%		-11%
 Race/ Ethnicity	White	n = 29		-2%		1%		5%		1%		-1%		2%
	Black/African-American	n = 27		-15%		-13%		11%		1%		11%		22%
	Asian	n = 107		2%		-1%		-7%		-1%		1%		-4%
	Native Hawaiian/Pacific Islander	n = 4		-29%		-2%		-59%		-40%		-12%		-1%
	American Indian or Alaska Native	n = 2		-4%		-2%		-21%		-15%		22%		32%
	Other	n = 20		11%		22%		13%		-4%		-6%		-5%
	Hispanic/Latino	n = 22		15%		1%		14%		11%		-9%		1%

# HEALTH EQUITY







COMMERCIAL ADULT: Non-PPO

The infographic below highlights disparities in health equity among key demographic groups across the key metrics. Darker shading indicates a larger disparity.

Accreditation Measure

Other Measure

Group is performing...	
<div></div>	Above the plan score by 5 or more points
<div></div>	Above the plan score
<div></div>	Below the plan score
<div></div>	Below the plan score by 5 or more points
<div></div>	Above/below plan score but has low base (<30)

			Rating of Specialist	Claims Processing +	Customer Service +	How Well Doctors Communicate +	Ease of Filling Out Forms +	Rating of Health Plan
			SRS	SRS	SRS	SRS	SRS	SRS
			△	△	△	△	△	△
Demographic	Category	Total	56.3%	80.0%	82.7%	89.7%	94.8%	53.6%
	Gender							
	Male	n = 33	-31%	-22%	6%	4%	-5%	-2%
	Female	n = 143	5%	6%	-3%	-1%	1%	1%
	Age							
	18 – 34	n = 3	44%	-80%	-33%	-23%	5%	13%
	35 – 44	n = 17	-13%	-26%	5%	10%	-1%	-22%
	45 – 54	n = 34	5%	20%	-1%	-4%	5%	-4%
	55 or older	n = 125	0%	4%	0%	1%	-2%	3%
	Overall Health							
	Excellent/Very Good	n = 66	17%	12%	5%	5%	0%	18%
	Good	n = 83	-8%	1%	-6%	-6%	0%	-17%
	Fair/Poor	n = 28	-6%	-43%	-1%	2%	-3%	0%
	Mental Health							
	Excellent/Very Good	n = 93	-1%	14%	2%	1%	2%	1%
	Good	n = 72	1%	-15%	-5%	-2%	-2%	-2%
	Fair/Poor	n = 13	-6%	-30%	5%	2%	-3%	0%
	Education							
	HS Grad or less	n = 93	-8%	-2%	1%	3%	-4%	11%
	Some college or more	n = 83	6%	1%	0%	-4%	4%	-14%
	Race/ Ethnicity							
	White	n = 29	-3%	3%	7%	-2%	5%	-2%
	Black/African-American	n = 27	-3%	-5%	4%	9%	1%	-15%
	Asian	n = 107	2%	-1%	-2%	0%	-2%	2%
	Native Hawaiian/Pacific Islander	n = 4	NA	-30%	-8%	-15%	5%	-29%
	American Indian or Alaska Native	n = 2	44%	NA	17%	10%	5%	-4%
	Other	n = 20	-11%	-9%	-2%	0%	0%	11%
	Hispanic/Latino	n = 22	1%	-55%	-3%	-9%	0%	15%



# MEASURE SUMMARY

COMMERCIAL ADULT: Non-PPO

## TOP THREE Performing Measures

Your plan’s percentile rankings for these measures were the highest compared to the 2024 PG Book of Business.

MEASURE	2024 Valid n	PLAN SUMMARY RATE SCORE			2023 Non-PPO QC			2024 Non-PPO PG BoB		
		2023	2024	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Rating of Health Plan (% 9 or 10)	179	46.4%	53.6%	7.2	43.2% ▲	10.4	82 <sup>nd</sup>	44.6% ▲	9.0	78 <sup>th</sup>
Rating of Health Care (% 9 or 10)	124	48.8%	51.6%	2.8	49.6%	2.0	62 <sup>nd</sup>	49.8%	1.8	51 <sup>st</sup>
Rating of Personal Doctor (% 9 or 10)	145	57.6%	67.6%	10.0	67.7%	-0.1	42 <sup>nd</sup>	68.4%	-0.8	38 <sup>th</sup>

## BOTTOM THREE Performing Measures

Your plan’s percentile rankings for these measures were the lowest compared to the 2024 PG Book of Business.

MEASURE	2024 Valid n	PLAN SUMMARY RATE SCORE			2023 Non-PPO QC			2024 Non-PPO PG BoB		
		2023	2024	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Rating of Specialist (% 9 or 10)	80^	53.8%	56.3%	2.5	66.7%	-10.4	5 <sup>th</sup>	66.5%	-10.2	<5 <sup>th</sup>
How Well Doctors Communicate + (% Usually or Always)	126	87.5%	89.7%	2.2	95.0%	-5.3	<5 <sup>th</sup>	94.8%	-5.1	<5 <sup>th</sup>
Getting Care Quickly (% Usually or Always)	91^	56.0%	65.0%	9.0	80.0% ▼	-15.0	<5 <sup>th</sup>	79.1% ▼	-14.1	<5 <sup>th</sup>

Significance Testing: Current score is significantly higher/lower than the 2023 score (↑/↓) or benchmark score (▲/▼).

^Denominator less than 100. NCQA will assign an NA to this measure.

# IMPROVEMENT STRATEGIES

## Improving Performance

These measures had the lowest percentile rankings in comparison to the 2024 PG Book of Business for your plan.

### Improvement Strategies – Rating of Specialist

- Analyze, investigate, and probe for weakness or QI opportunities among those measures or composites that are Key Drivers (or highly correlated) with rating of specialist or doctor. (e.g., HWDC, GCQ, GNC, Coordination Of Care).
- Review QI recommendations/actions for related CAHPS composite measures: How Well Doctors Communicate, Getting Care Quickly, Getting Needed Care, Coordination of Care.
- Provide resources, articles, tools and training sessions via multiple channels to support and drive improvement in physician-patient communication and patient-centered interviewing. Examples include: Listen to patients' concerns, Follow-up with the patient. Provide thorough explanations. Ensure that all questions and concerns are answered. All staff focus on being helpful and courteous to patients.
- Share, report and discuss relative CAHPS health care performance and feedback at the health system and/or within network level.
- Promote use of a secure online patient portal which allows patients access to their medical record and health care information of relevant to patient needs.
- Gather and analyze patient feedback on their recent office visit (i.e., patient "comment cards," follow up call/text/email, CG CAHPS survey, etc.)
- Assess adequacy of contracted specialist by specialty. If necessary, review quality of care information among specific specialties and/or identify practices of excellence.
- Explore ability of providers to share with patient's a summary of their medical record or health assessments to facilitate conversation about relevant health and wellness issues.
- Assess systems (e.g., EHRs) processes and/or procedures used to gather or facilitate distribution of patient information among providers.
- Suggest providers/practices periodically analyze appointment scheduling timeframes versus types of office visits.

### Improvement Strategies – How Well Doctors Communicate

- Cultivate a patient-centered care philosophy and programs across the provider network.
- Support, communicate and educate providers about the vital medical importance of effective doctor-patient communication (i.e., reduced hospitalizations & ER visits, improved adherence).
- Provide readily available recommendations, tools and guidance to all providers to support and enhance communication skills and effective conversation skills with patients. Providers need to: Provide thorough explanations, provide written materials, illustrations and/or examples to help patient's understand, repeat the patient's concern and then address the topic, ask clarifying questions, make eye contact, avoid medical jargon and technical language, avoid multi-tasking, avoid rushing the patient, use constructive verbal responses and non-verbal cues, apply empathy and interest in response to concerns, by kind, avoid condescending language or actions, address questions and concerns-as much time as necessary, schedule adequate time for each visit, and follow-up after tests or procedures.
- Collaborate and share with providers tools, resources, and best practices to support, or reinforce, a complete and effective information exchange with all patients (e.g., a summary of medical record or health assessment to facilitate an effective health or wellness discussion, patient testimonials - perhaps from focus groups - of effective and ineffective communication techniques, provide tips and/or testimonials in provider newsletters).
- Develop tools and guidance for patients to optimize appointment time and specific topic-based conversation guides or question checklists with providers (e.g., Doc Talk).
- Support patients with chronic illnesses/conditions and their providers with up-to-date tools, resources and conversation guides that address common clinical needs, continual review, modification and update of progress, next steps and self-management topics.

### Improvement Strategies – Getting Care Quickly

- Assess CAHPS data by health system, PO, and/or network. Communicate results and identify outliers. Correlate with HEDIS data, complaints, appeals and/or quality of care concerns, and communicate. Support and encourage providers to take innovative action to improve access.
- Support members and collaborate with providers to enhance routine and urgent access to care through innovative, proactive approaches within Care Management, Chronic Care, and Quality Management. Work with providers to identify and resolve opportunities.
- Discuss and engage providers/staff on scheduling best practices, how to improve access to routine/urgent care. Consider scheduling routine appointments well in advance, e.g., 12 months. Provide tools, resources, support and assessment.
- Support, encourage and assist in approaches toward open access scheduling. Allow a portion of each day open for urgent care and/or follow-up care.
- Contract with additional providers for urgent and after-hour appointments/availability.
- Explore partnering with 24-hour urgent care or walk-in clinics.
- Educate providers and staff about Plan and regulatory appointment wait time requirements or standards (i.e., CAHPS, CMS, States, etc.) . Identify opportunities for improvement.
- Provide members streamlined tools and resources (links, apps, etc.) about benefits, providers, referrals, scheduling appointments, etc. Identify options and hours available, and include alternatives, including practices with evening and weekend hours. Consider alternative sources of information, e.g., refrigerator magnets.
- Explore and support alternative telecommunication technologies to expand access to care: telephone, telehealth, telemedicine and patient portals.
- Encourage use of Nurse Hotline/Nurse on Call lines or live-chat via web for members to get health information and advice.

Full List of Improvement Strategies 

# KEY DRIVER ANALYSIS OF RATING OF HEALTH PLAN

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- Alameda Alliance for Health

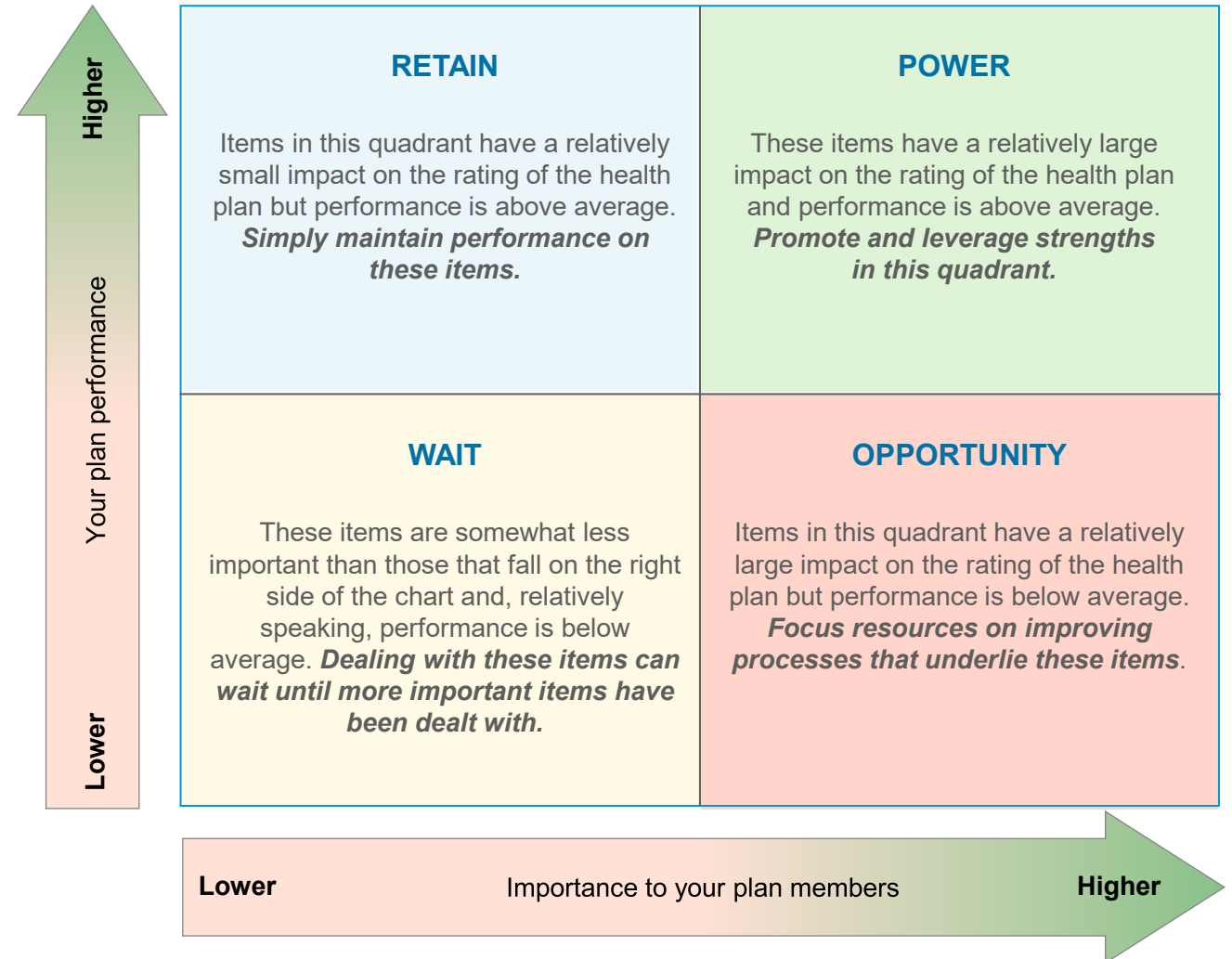
# POWeR CHART: EXPLANATION

## POWeR™ CHART CLASSIFICATION MATRIX

**Overview.** The SatisAction™ key driver statistical model is a powerful, proprietary statistical methodology used to identify the key drivers of the rating of the health plan and provide actionable direction for satisfaction improvement programs. This methodology is the result of a number of years of development and testing using health care satisfaction data. We have been successfully using this approach since 1997.

The model provides the following:

- Identification of the elements that are important in driving of the rating of the health plan.
- Measurement of the relative importance of each of these elements.
- Measurement of how well members think the plan performed on those important elements.
- Presentation of the importance/performance results in a matrix that provides clear direction for member satisfaction improvement efforts by the plan.

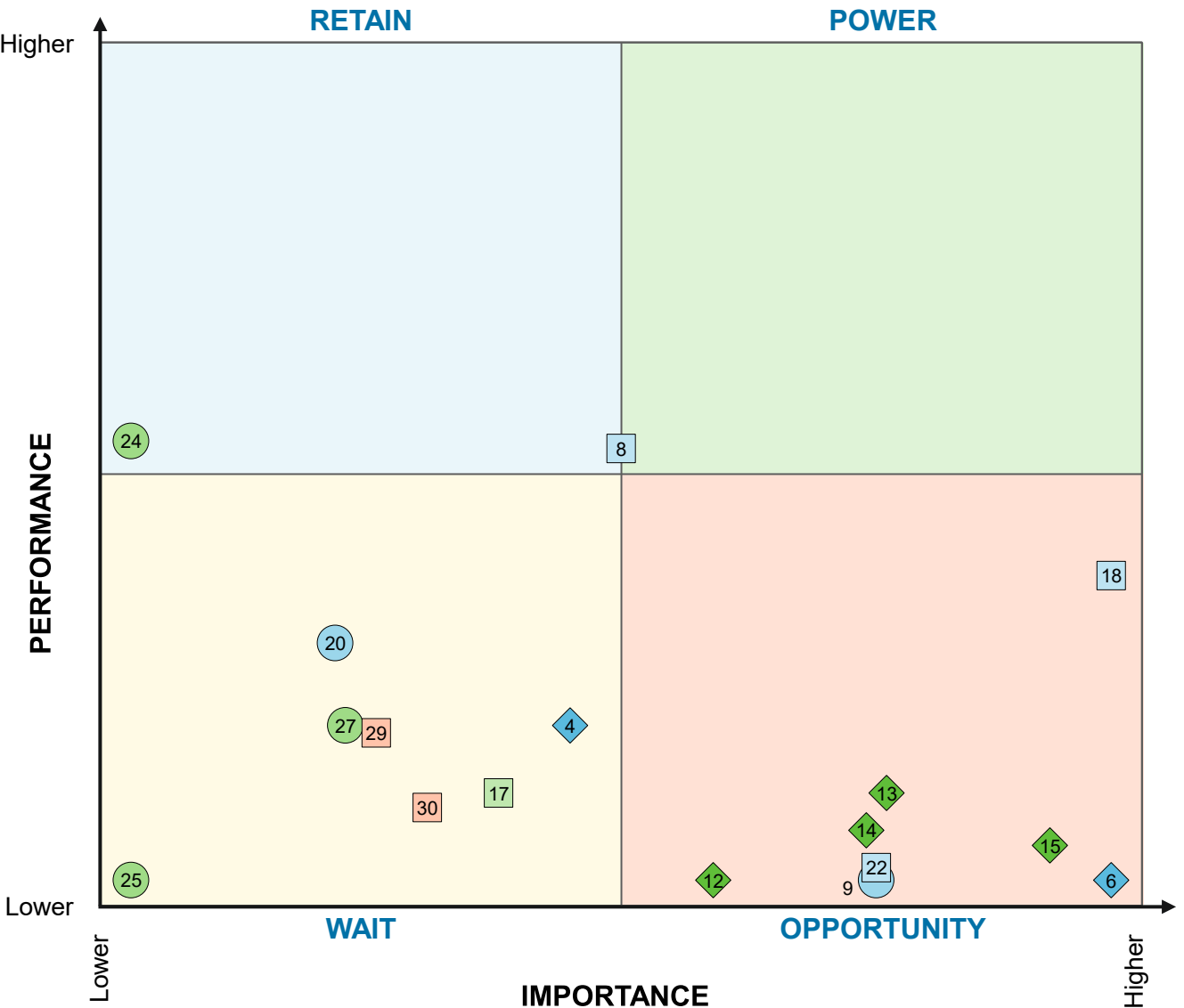


# POWER CHART: YOUR RESULTS

COMMERCIAL ADULT: Non-PPO

SURVEY MEASURE			2023		2024	
			SRS	%tile*	SRS	%tile*
POWER						
Rating	Q8	Rating of Health Care	48.8%	47 <sup>th</sup>	51.6%	51 <sup>st</sup>
OPPORTUNITY						
GCQ	Q6	Getting routine care	56.5%	<5 <sup>th</sup>	53.2%	<5 <sup>th</sup>
Rating	Q18	Rating of Personal Doctor	57.6%	6 <sup>th</sup>	67.6%	38 <sup>th</sup>
HWDC	Q15	Dr. spent enough time	84.4%	<5 <sup>th</sup>	86.5%	6 <sup>th</sup>
HWDC	Q13	Dr. listened carefully	87.8%	<5 <sup>th</sup>	91.3%	12 <sup>th</sup>
Rating	Q22	Rating of Specialist	53.8%	<5 <sup>th</sup>	56.3%	<5 <sup>th</sup>
GNC	Q9	Getting care, tests, or treatment	73.1%	<5 <sup>th</sup>	69.6%	<5 <sup>th</sup>
HWDC	Q14	Dr. showed respect	91.1%	<5 <sup>th</sup>	92.9%	8 <sup>th</sup>
HWDC	Q12	Dr. explained things	86.8%	<5 <sup>th</sup>	88.1%	<5 <sup>th</sup>
WAIT						
GCQ	Q4	Getting urgent care	55.4%	<5 <sup>th</sup>	76.8%	20 <sup>th</sup>
CC	Q17	Coordination of Care	80.0%	35 <sup>th</sup>	78.2%	13 <sup>th</sup>
CP	Q30	Handled claims correctly	81.8%	9 <sup>th</sup>	80.0%	11 <sup>th</sup>
CP	Q29	Handled claims quickly	76.2%	6 <sup>th</sup>	80.0%	22 <sup>nd</sup>
CS	Q27	Ease of Filling Out Forms +	94.5%	13 <sup>th</sup>	94.8%	20 <sup>th</sup>
GNC	Q20	Getting specialist appointment	70.8%	13 <sup>th</sup>	72.5%	29 <sup>th</sup>
CS	Q25	Treated with courtesy and respect	93.7%	50 <sup>th</sup>	84.8%	<5 <sup>th</sup>
RETAIN						
CS	Q24	Provided information or help	72.1%	20 <sup>th</sup>	80.6%	54 <sup>th</sup>

\*Percentiles based on the PG Book of Business of the listed year.



# KEY DRIVERS OF RATING OF HEALTH PLAN

COMMERCIAL ADULT: NON-PPO

		ALIGNMENT <i>Are your key drivers typical of the industry?</i>	KEY DRIVER RANK		ATTRIBUTE		SUMMARY RATE SCORE		PG BoB %TILE*	CLASSIFICATION	
			YOUR PLAN	INDUSTRY			YOUR PLAN	INDUSTRY		2023	2024
TOP 10 KEY DRIVERS					Q31	Rating of Health Plan	53.6%	44.6%	78 <sup>th</sup> (+11)		
YOUR PLAN	These items have a relatively large impact on the Rating of Health Plan. <b>Leverage</b> these questions since they are important to your members and the Rating of Health Plan score for this plan. They are listed in descending order of importance for your plan.	✓	1	5	Q6	Getting routine care	53.2%	76.6%	<5 <sup>th</sup> (-1)	Opp.	Opp.
			2	12	Q18	Rating of Personal Doctor	67.6%	68.4%	38 <sup>th</sup> (+32)	Opp.	Opp.
			3	14	Q15	Dr. spent enough time	86.5%	93.0%	6 <sup>th</sup> (+5)	Opp.	Opp.
			4	11	Q13	Dr. listened carefully	91.3%	94.5%	12 <sup>th</sup> (+12)	Opp.	Opp.
		✓	5	1	Q22	Rating of Specialist	56.3%	66.5%	<5 <sup>th</sup> (-1)	Opp.	Opp.
		✓	6	7	Q9	Getting care, tests, or treatment	69.6%	84.2%	<5 <sup>th</sup> (-4)	Opp.	Opp.
			7	13	Q14	Dr. showed respect	92.9%	96.2%	8 <sup>th</sup> (+8)	Opp.	Opp.
INDUSTRY	PG Book of Business regression analysis has identified <b>Key Drivers</b> of Rating of Health Plan. The numbers represent the ranked importance across the entire Book of Business.		8	15	Q12	Dr. explained things	88.1%	95.6%	<5 <sup>th</sup> (+0)	Wait	→ Opp.
		✓	9	4	Q8	Rating of Health Care	51.6%	49.8%	51 <sup>st</sup> (+4)	Wait	→ Power
		✓	10	9	Q4	Getting urgent care	76.8%	81.6%	20 <sup>th</sup> (+20)	Wait	Wait
			12	3	Q30	Handled claims correctly	80.0%	88.5%	11 <sup>th</sup> (+2)	Wait	Wait
			13	2	Q29	Handled claims quickly	80.0%	85.7%	22 <sup>nd</sup> (+16)	Wait	Wait
			15	10	Q20	Getting specialist appointment	72.5%	77.3%	29 <sup>th</sup> (+16)	Opp.	→ Wait
			16	6	Q25	Treated with courtesy and respect	84.8%	94.3%	<5 <sup>th</sup> (-50)	Wait	Wait
			17	8	Q24	Provided information or help	80.6%	79.4%	54 <sup>th</sup> (+34)	Wait	→ Retain

All Industry scores & rankings are calculated based on the 2024 PG Book of Business. Any items below the dotted line are Top 10 industry key drivers that are not identified as key drivers for your plan.

\*Differentials are based on comparisons to your plan's prior year percentile rankings.

# MEASURE ANALYSES

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Measure Details and Summary Rate Scores

- Alameda Alliance for Health

# SECTION INFORMATION

**Drilling Down Into Composites And Ratings** This section is designed to give your plan a detailed report on the performance of each Star Rating measure as well as a few other key metrics. The measure analysis section contains:

**Rating & Composite** level information including...

- Percentile ranking and benchmark performance
- Historic scores
- Market performance

**Attribute** level information for composites including...

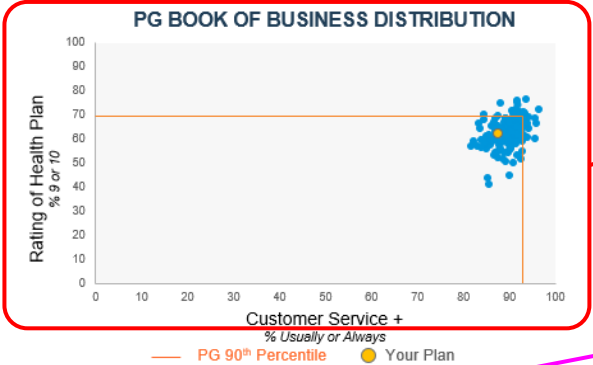
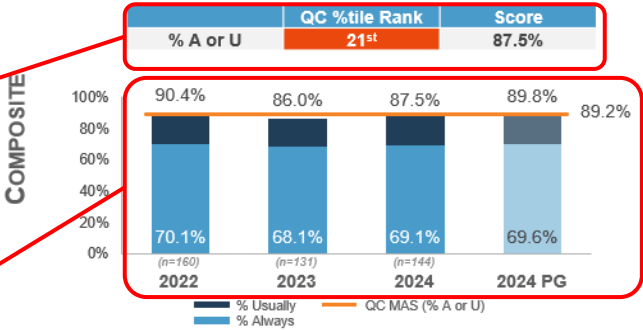
- Gate questions
- Percentile ranking and benchmark performance
- Summary rate score trending

All scores displayed in this section are summary rate scores (notated with 'SRS').

Percentile Bands		
≥90 <sup>th</sup>		
67 <sup>th</sup> – 89 <sup>th</sup>		
33 <sup>rd</sup> – 66 <sup>th</sup>		
10 <sup>th</sup> – 32 <sup>nd</sup>		
<10 <sup>th</sup>		

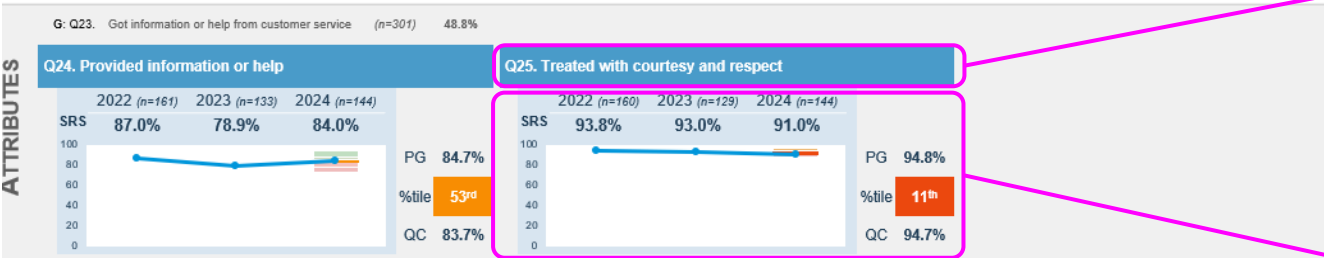
Your plan's performance ranking along with **Summary Rate Score** are displayed at the top for quick reference.

Your plan's current year **Summary Rate Score** and base size along with previous two years, PG BoB and Quality Compass national data are displayed.



Your plan's **Summary Rate Score** is plotted against the PG Book of Business to provide a visual representation of market performance. The orange line represents the PG 90<sup>th</sup> percentile.

Gate questions (indicated by "G:") for attributes are displayed above attributes – scores displayed are % Yes



For composites – all corresponding attributes that roll-up into the composite score are displayed:

- Historic bases and **Summary Rate Scores** along with significant changes in trend notated
- Benchmark comparisons along with significant differences notated
- Percentile ranking against **Quality Compass**
- Graphic representation of trend and 2023 **Quality Compass** percentile bands

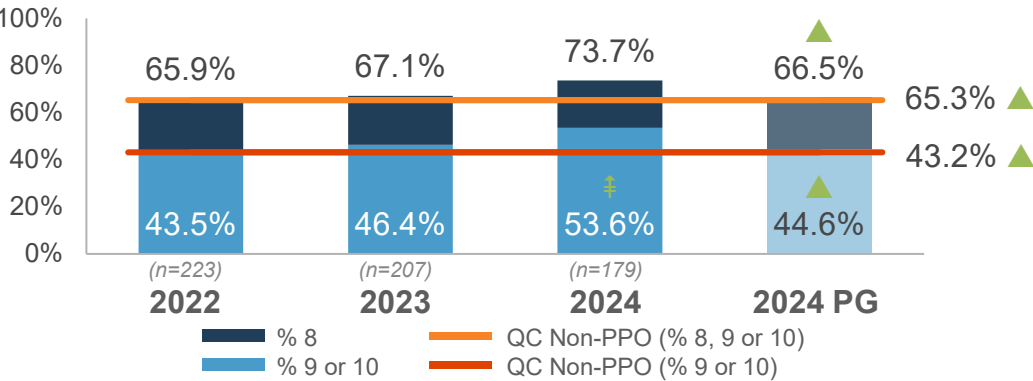


# RATINGS

COMMERCIAL ADULT: Non-PPO

## RATING OF HEALTH PLAN

	QC %tile Rank	Score
% 8, 9 or 10	79 <sup>th</sup>	73.7%
% 9 or 10	82 <sup>nd</sup>	53.6%



### Key Drivers Of The Rating Of The Health Plan

#### POWER

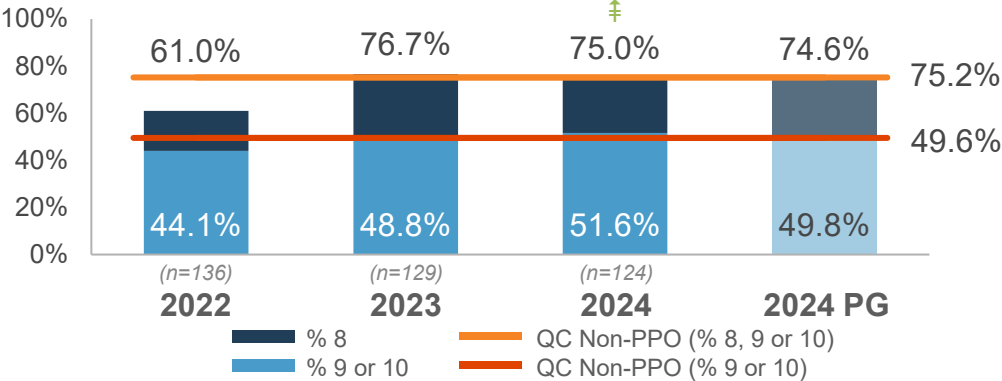
Q8 Rating of Health Care

#### OPPORTUNITIES

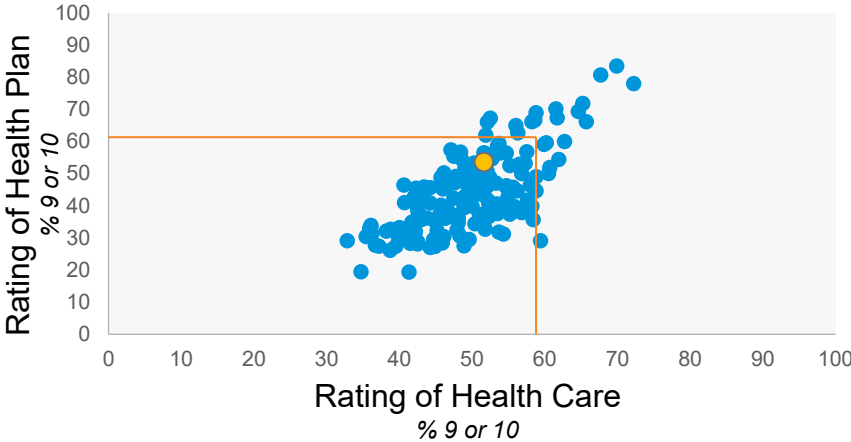
- Q6 Getting routine care
- Q18 Rating of Personal Doctor
- Q15 Dr. spent enough time
- Q13 Dr. listened carefully
- Q22 Rating of Specialist
- Q9 Getting care, tests, or treatment
- Q14 Dr. showed respect
- Q12 Dr. explained things

## RATING OF HEALTH CARE

	QC %tile Rank	Score
% 8, 9 or 10	48 <sup>th</sup>	75.0%
% 9 or 10	62 <sup>nd</sup>	51.6%



### PG BOOK OF BUSINESS DISTRIBUTION



**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↕/↕) or benchmark score (▲/▼).

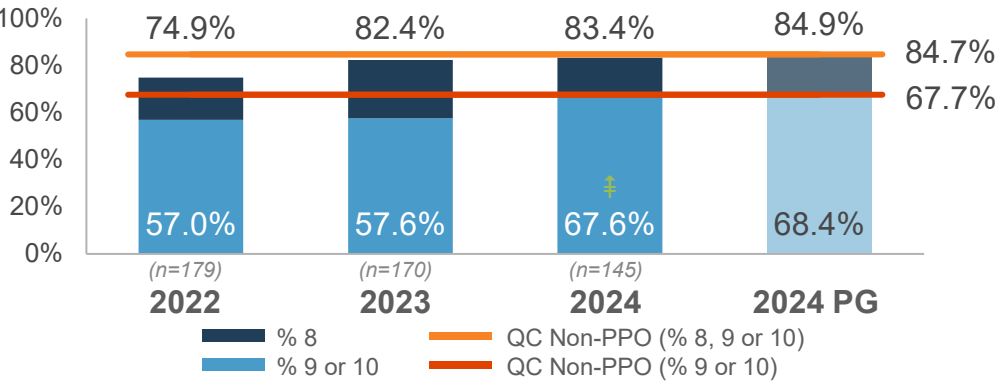
**Denominator less than 100. NCQA will assign an NA to this measure.**

# RATINGS

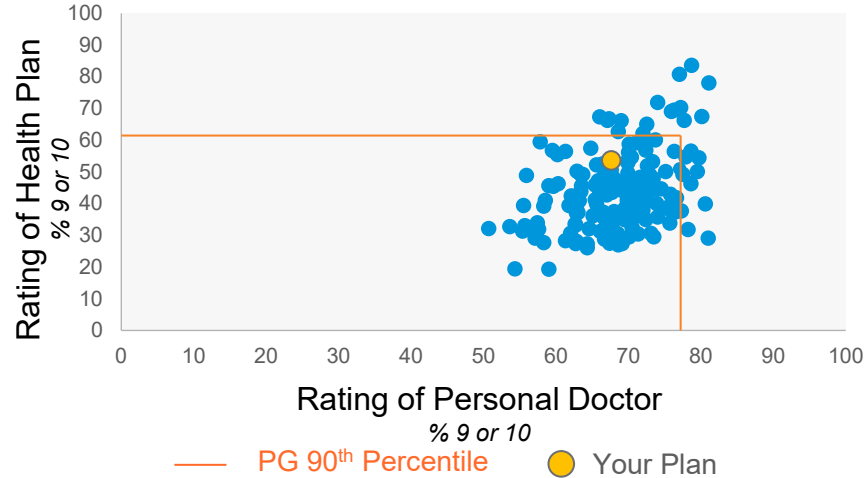
COMMERCIAL ADULT: Non-PPO

## RATING OF PERSONAL DOCTOR

	QC %tile Rank	Score
% 8, 9 or 10	35 <sup>th</sup>	83.4%
% 9 or 10	42 <sup>nd</sup>	67.6%



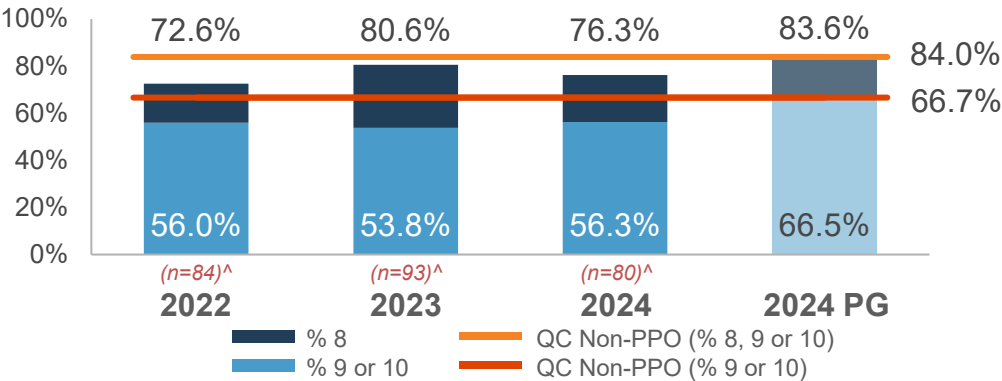
### PG BOOK OF BUSINESS DISTRIBUTION



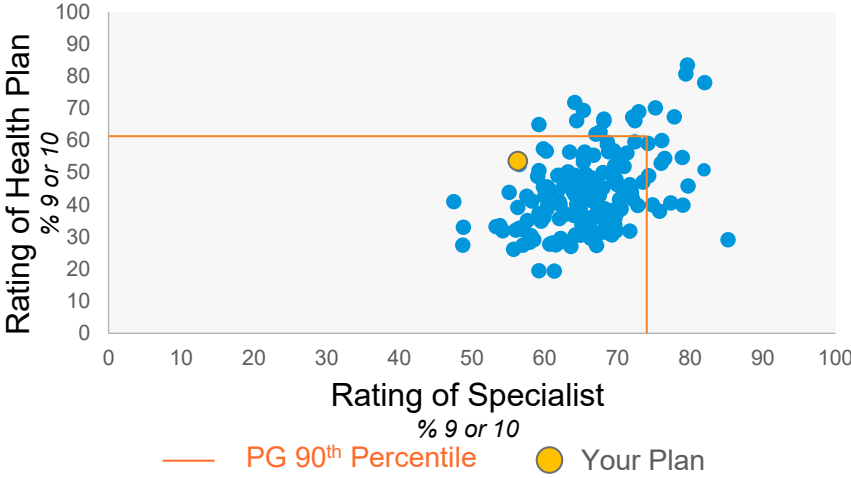
**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↕/↕) or benchmark score (▲/▼).

## RATING OF SPECIALIST

	QC %tile Rank	Score
% 8, 9 or 10	7 <sup>th</sup>	76.3%
% 9 or 10	5 <sup>th</sup>	56.3%



### PG BOOK OF BUSINESS DISTRIBUTION



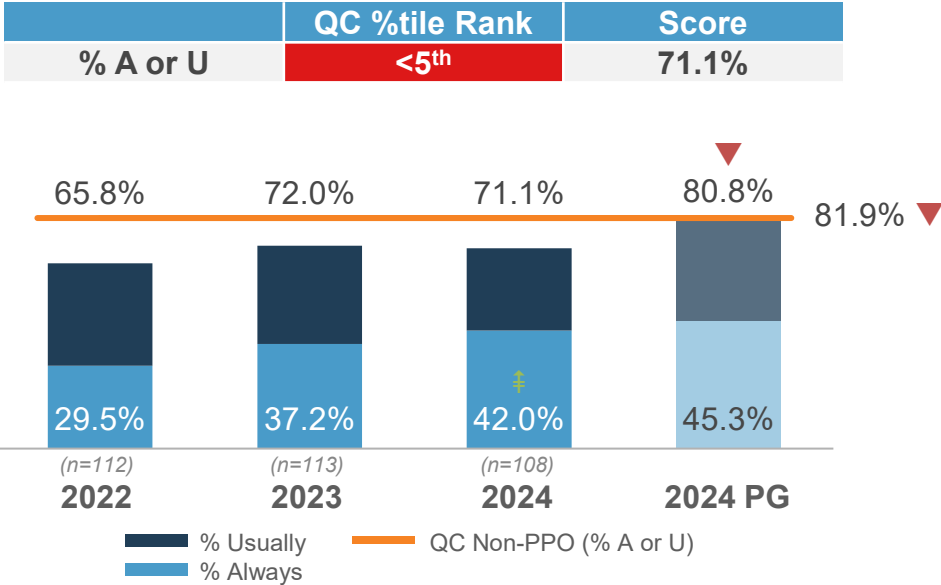
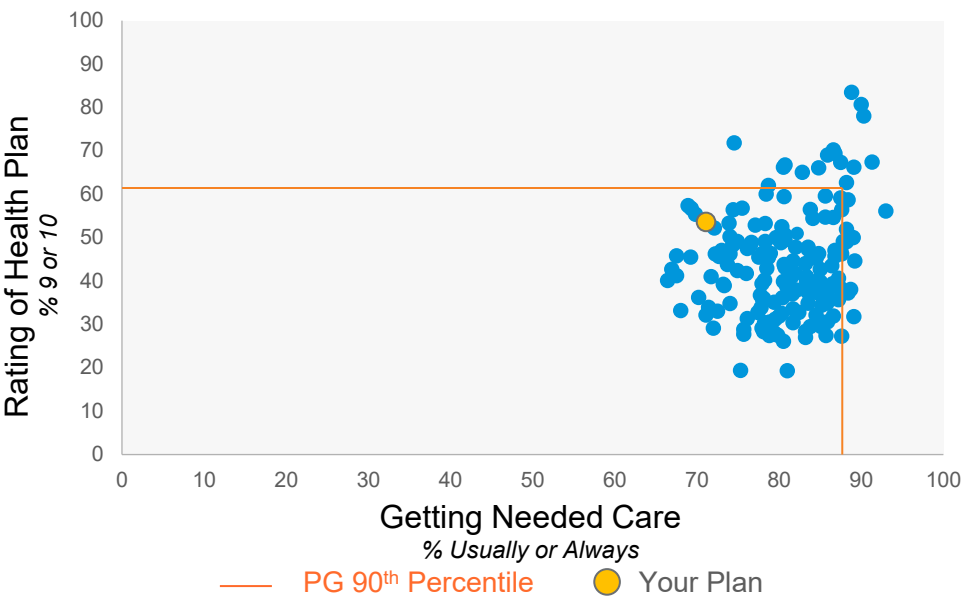
**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↕/↕) or benchmark score (▲/▼).

<sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.

# GETTING NEEDED CARE

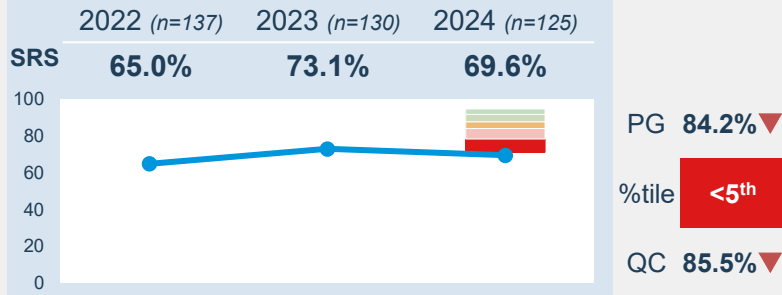
COMMERCIAL ADULT: Non-PPO

## PG BOOK OF BUSINESS DISTRIBUTION

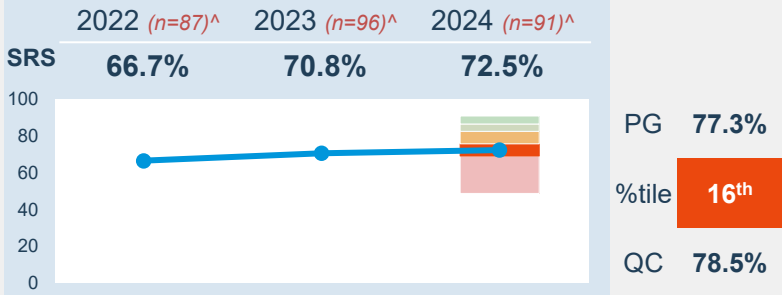


## ATTRIBUTES

### Q9. Getting care, tests, or treatment



### Q20. Getting specialist appointment



G: Q19. Made appointments to see a specialist in the last 6 months (n=185) 49.7%

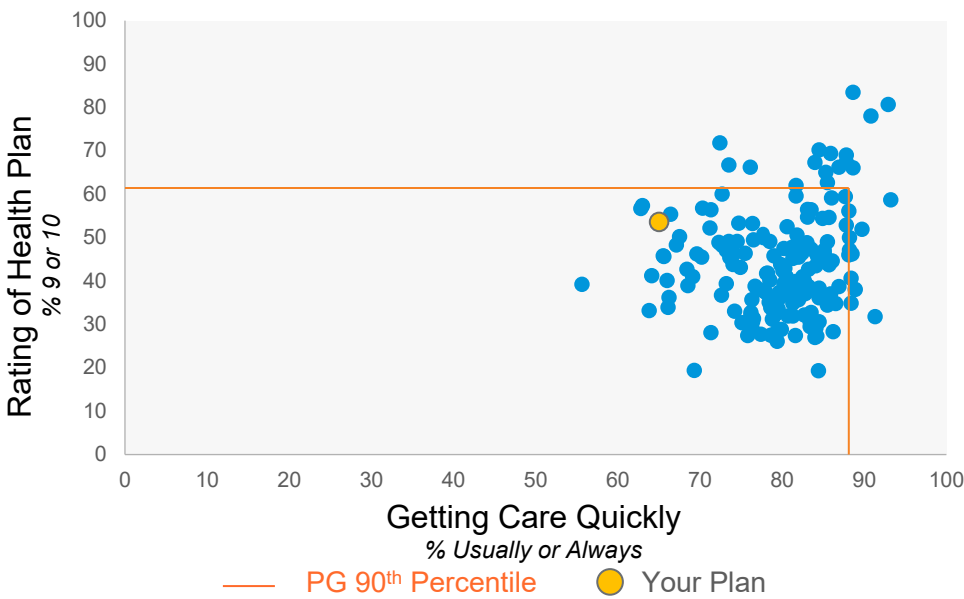
**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↕/↗) or benchmark score (▲/▼).

<sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.

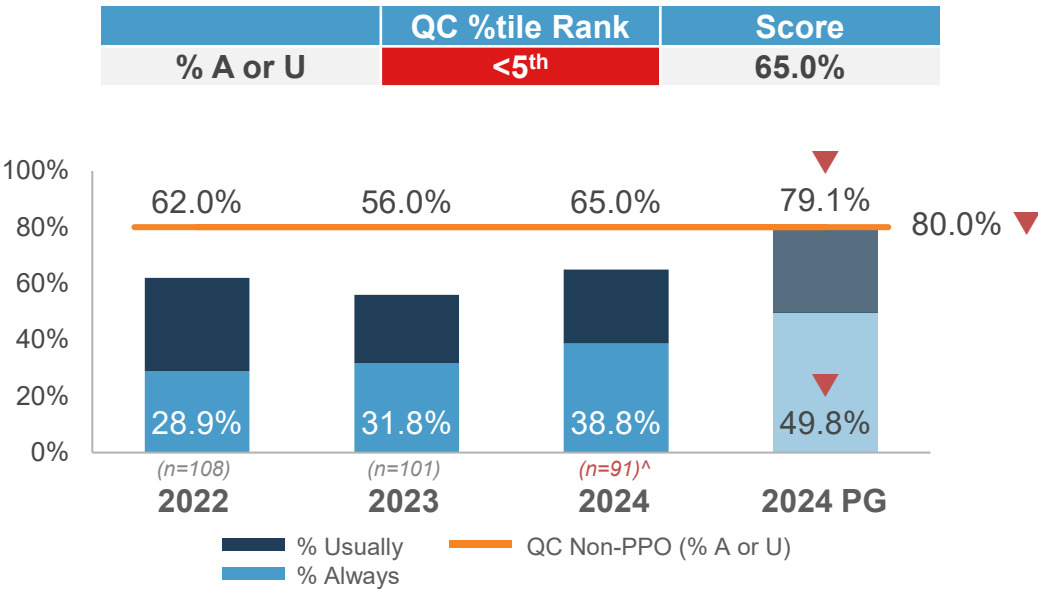
# GETTING CARE QUICKLY

COMMERCIAL ADULT: Non-PPO

PG BOOK OF BUSINESS DISTRIBUTION



COMPOSITE

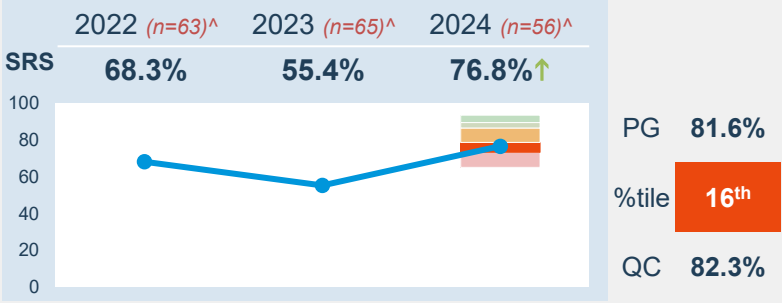


ATTRIBUTES

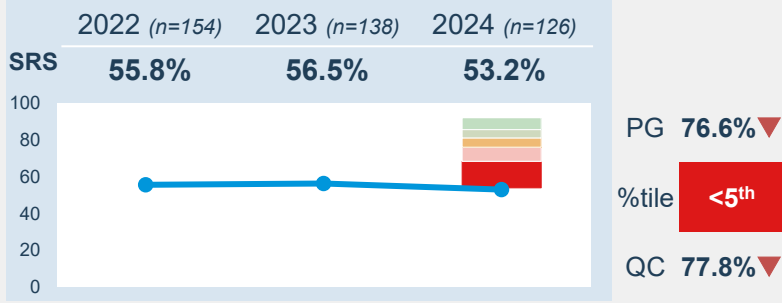
G: Q3. Had illness, injury or condition that needed care right away (n=181) 34.3%

G: Q5. Made appointments for check-ups or routine care at doctor's office or clinic (n=182) 74.2%

Q4. Getting urgent care



Q6. Getting routine care



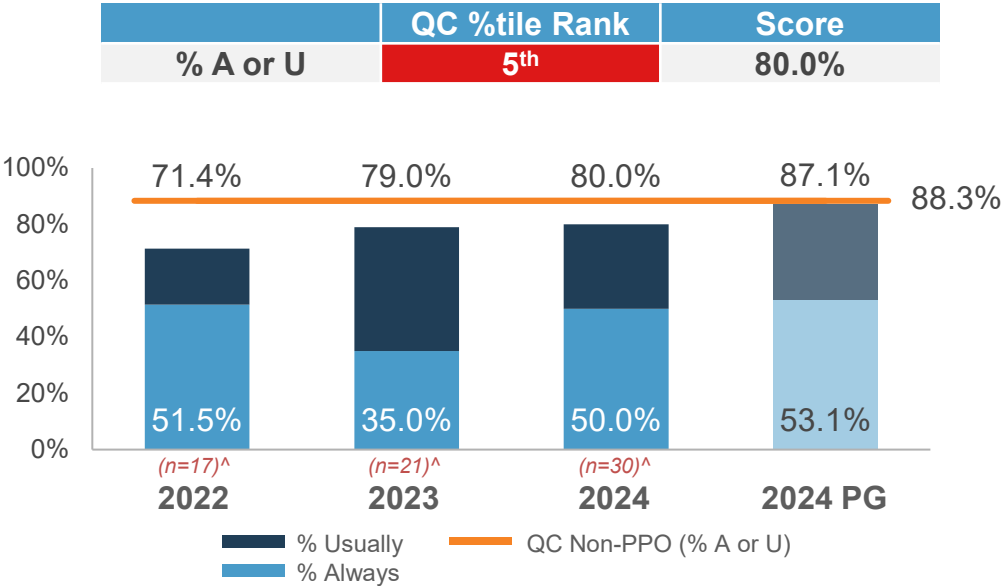
Significance Testing: Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼).

^Denominator less than 100. NCQA will assign an NA to this measure.

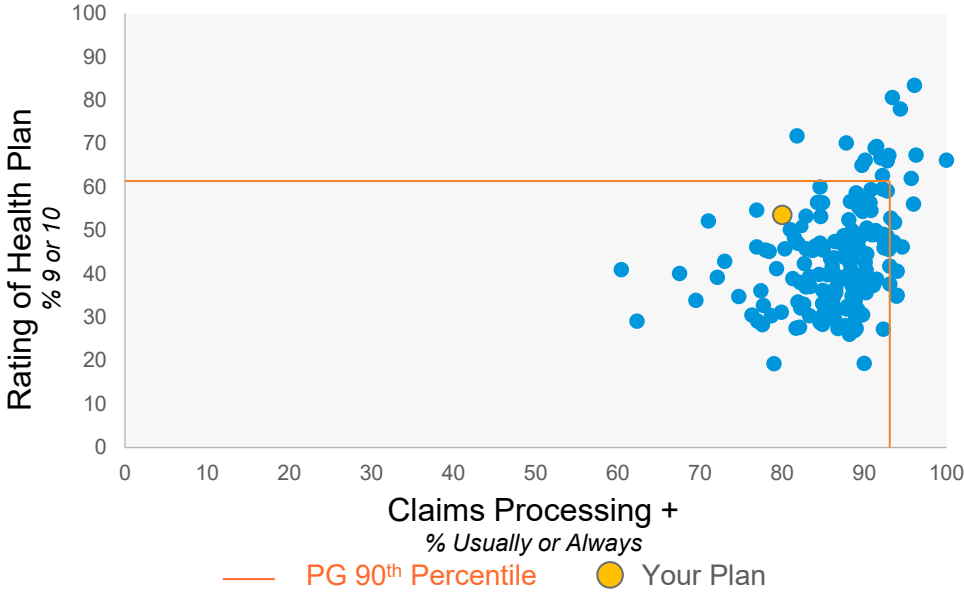
# CLAIMS PROCESSING +

COMMERCIAL ADULT: Non-PPO

COMPOSITE



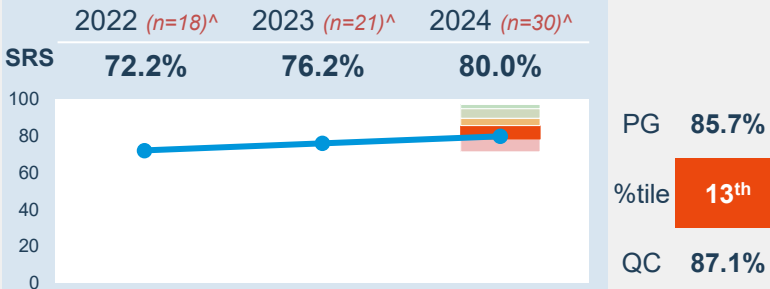
## PG BOOK OF BUSINESS DISTRIBUTION



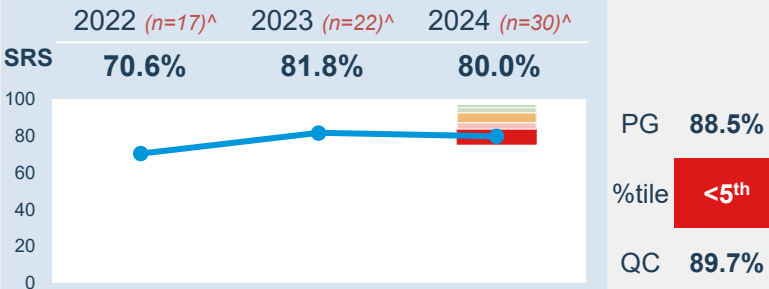
G: Q28. Sent in claims for care (n=140) 25.0%

ATTRIBUTES

### Q29. Handled claims quickly



### Q30. Handled claims correctly



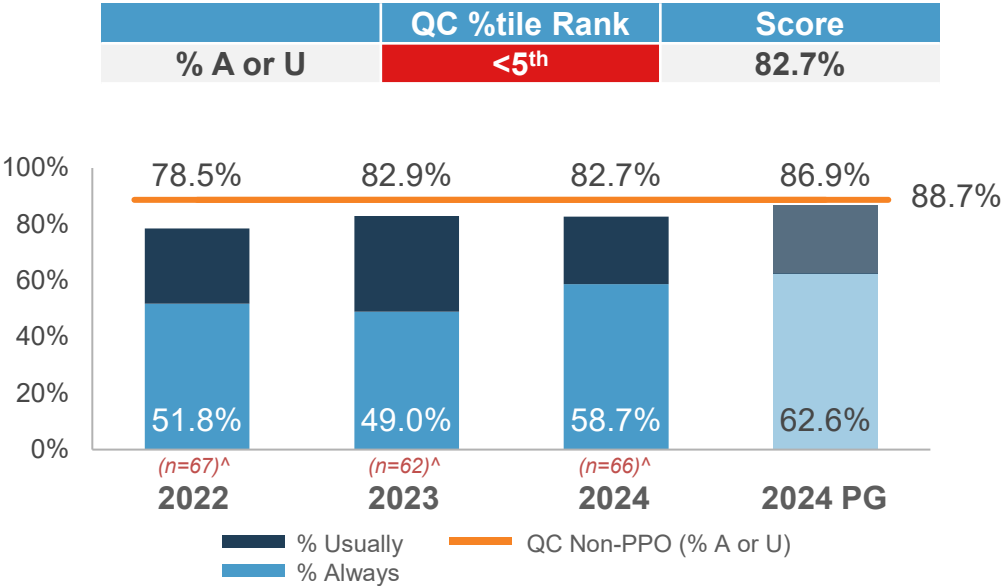
**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↕/↗) or benchmark score (▲/▼).

<sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.

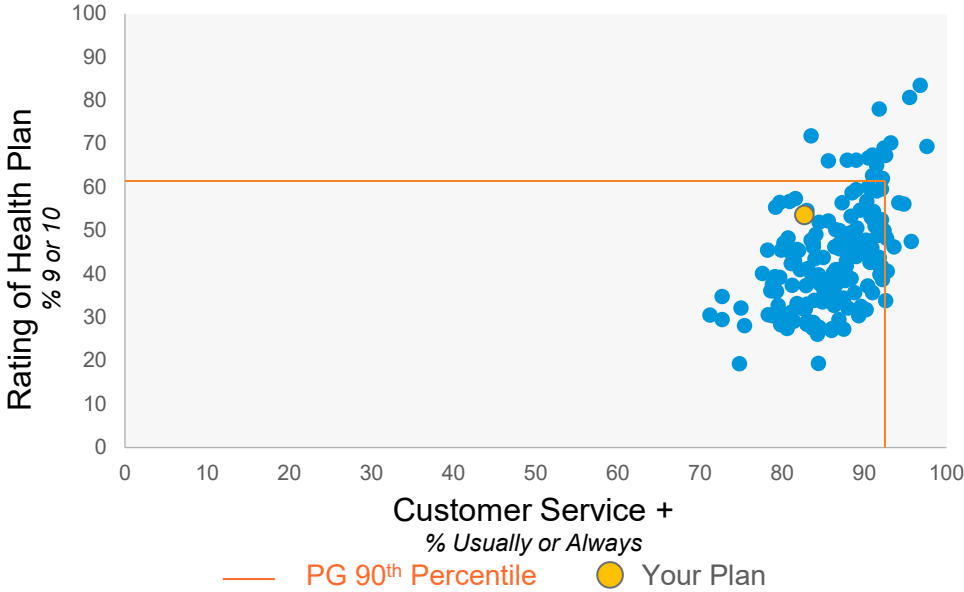
# CUSTOMER SERVICE +

COMMERCIAL ADULT: Non-PPO

COMPOSITE



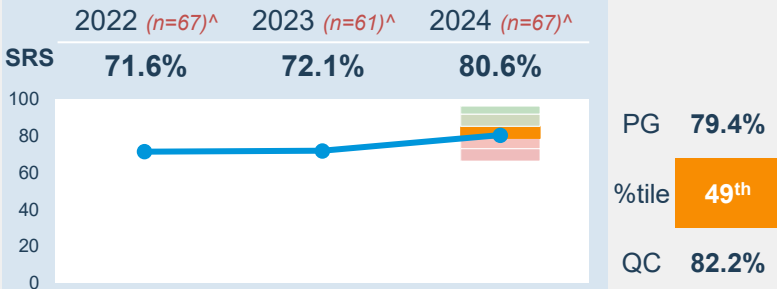
## PG BOOK OF BUSINESS DISTRIBUTION



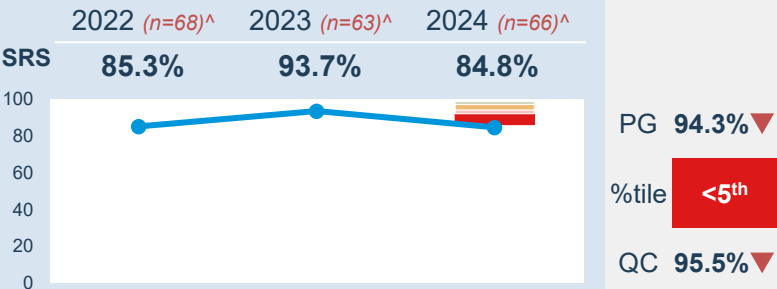
G: Q23. Got information or help from customer service (n=176) 38.6%

ATTRIBUTES

### Q24. Provided information or help



### Q25. Treated with courtesy and respect



**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↕/↗) or benchmark score (▲/▼).

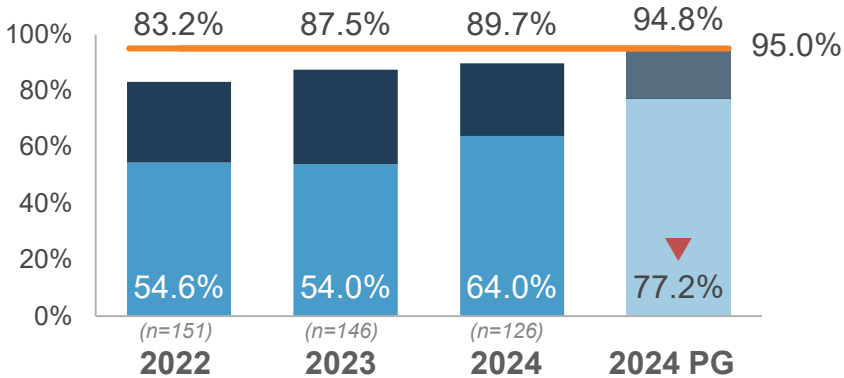
<sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.

# How Well Doctors Communicate +

COMMERCIAL ADULT: Non-PPO

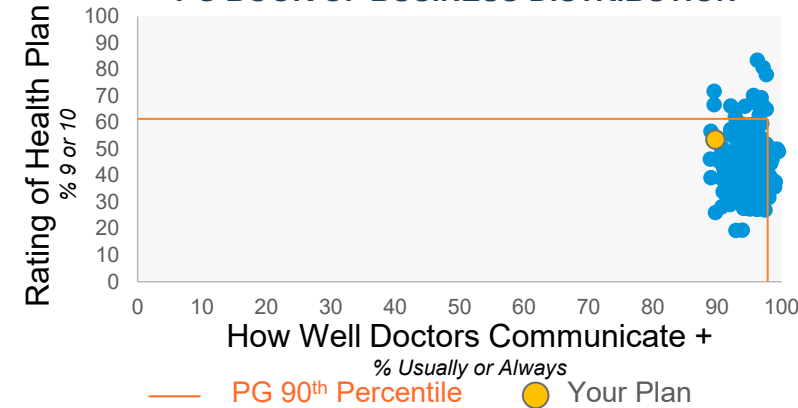
## COMPOSITE

	QC %tile Rank	Score
% A or U	<5 <sup>th</sup>	89.7%



■ % Usually    ■ % Always    — QC Non-PPO (% A or U)

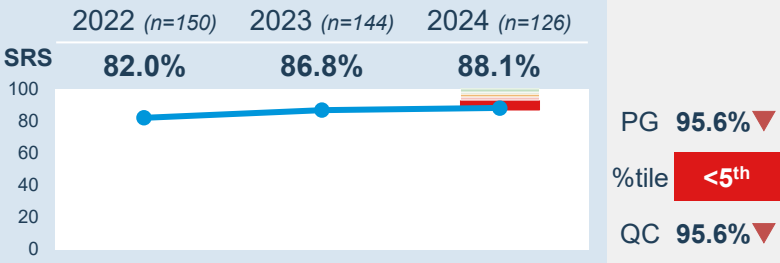
### PG BOOK OF BUSINESS DISTRIBUTION



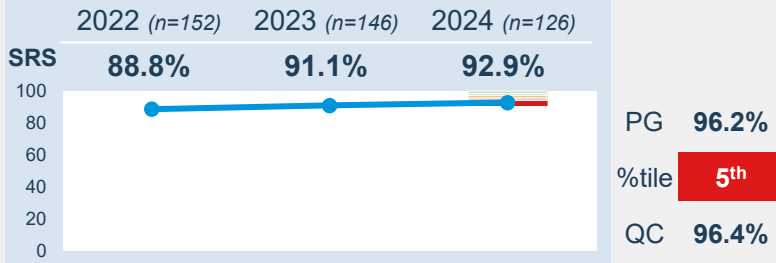
**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼).

## ATTRIBUTES

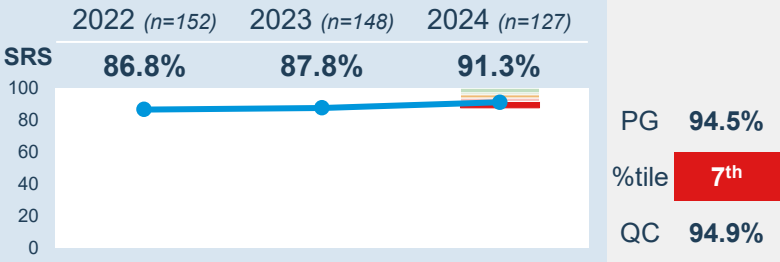
### Q12. Dr. explained things



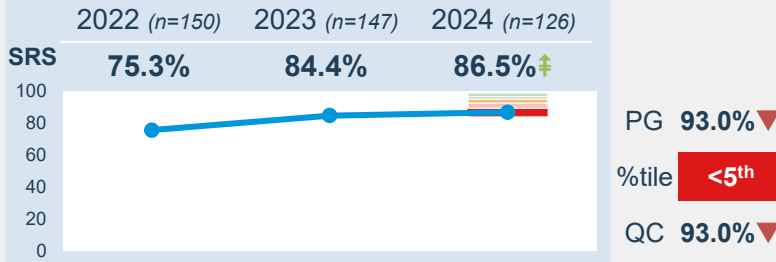
### Q14. Dr. showed respect



### Q13. Dr. listened carefully



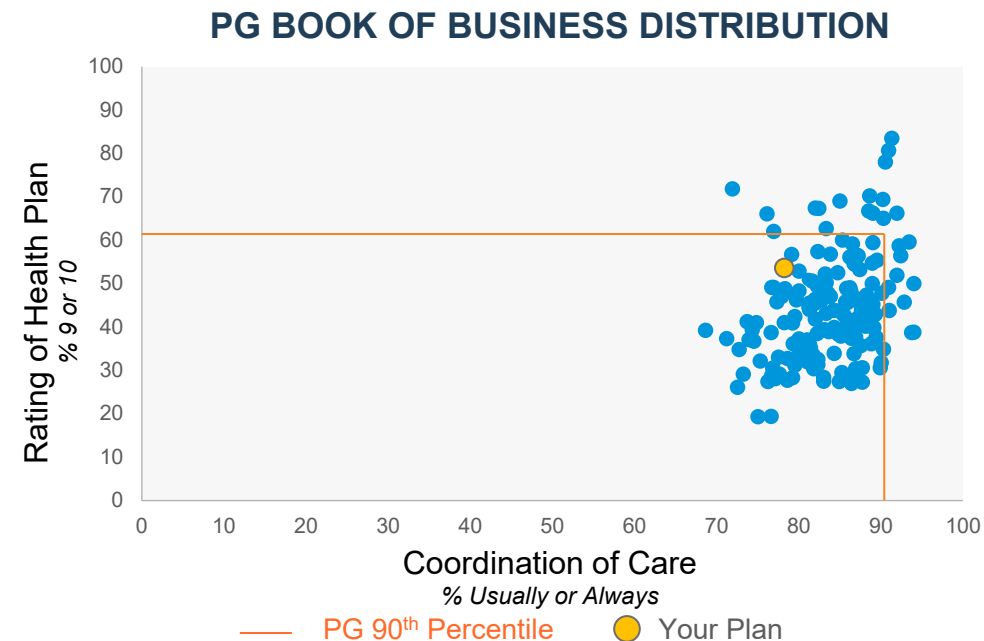
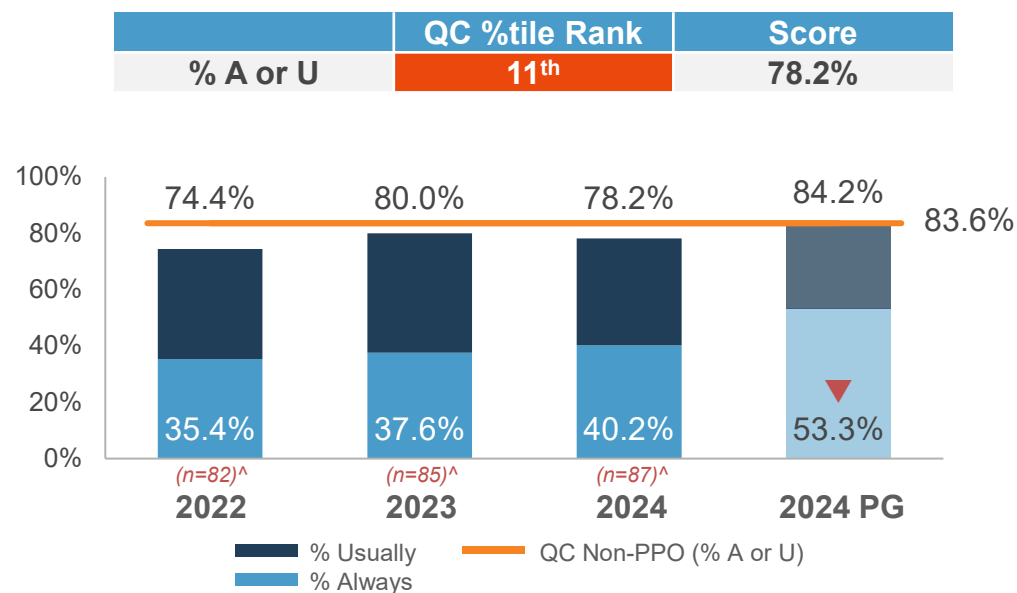
### Q15. Dr. spent enough time



<sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.

# COORDINATION OF CARE

COMMERCIAL ADULT: Non-PPO



**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↕/↕) or benchmark score (▲/▼).

<sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.



# SUMMARY OF TREND AND BENCHMARKS

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- Alameda Alliance for Health

# SECTION INFORMATION

**Trend and Benchmark Comparisons** The CAHPS® 5.1H survey is designed to use composite scores to facilitate the aggregation of information and the communication of results. Questions are combined into composite categories comprising a particular service area managed by your plan. These composites, the questions that make up composites (attributes), additional measures, and rating questions are shown on the following pages.

Summary Rate Scores: Shows how your plan's composite and key question Summary Rates compare to trend data (if applicable) and benchmark scores. To help you identify how your plan's population compares to other plans and to previous data, statistically significant differences are highlighted.

Plan Percentile Rankings: Shows your plan's Summary Rates and percentile rankings in relation to the benchmarks.

## Significance Testing

**Green** – Current year score is significantly higher than the 2023 score (↑), the 2022 score (⬆) or benchmark score (▲).

**Red** – Current year score is significantly lower than the 2023 score (↓), the 2022 score (⬆) or benchmark score (▼).

No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% confidence level.

# BENCHMARK INFORMATION

<div>Available Benchmarks</div> <div>The following benchmarks are used throughout the report.</div>			
	2023 Quality Compass® All Plans	2023 NCQA 1-100 Benchmark	2024 Press Ganey Book of Business
	Includes all Commercial Non-PPO Adult samples that submitted data to NCQA in 2023.	A percentile benchmark (with values ranging from the first through the one hundredth percentile) calculated by NCQA and derived from Commercial Non-PPO Adult data submitted to NCQA in 2023.	Includes all Commercial Non-PPO samples that contracted with Press Ganey to administer the MY 2023 CAHPS 5.1H survey and submitted data to NCQA.
PROS	<ul style="list-style-type: none"><li>Is presented in NCQA's The State of Health Care Quality</li></ul>	<ul style="list-style-type: none"><li>Utilized by Press Ganey to calculate approximate percentile ranking of plan scores in relation to the Quality Compass® All Plans benchmark</li></ul>	<ul style="list-style-type: none"><li>Provides a benchmark for each question from the survey</li><li>Permits precise percentile ranking of plan compared to benchmark</li></ul>
CONS	<ul style="list-style-type: none"><li>Only contains benchmarks for certain key questions, composites, and rating questions</li></ul>	<ul style="list-style-type: none"><li>Only contains benchmarks for certain key questions, composites, and rating questions</li></ul>	<ul style="list-style-type: none"><li>Contains fewer plans than the Quality Compass® All Plans Benchmarks</li></ul>
NON-PPO SIZE	236 Plans	236 Plans	133 Plans / 25,596 Respondents
ALL LOB SIZE	410 Plans	410 Plans	270 Plans / 48,727 Respondents

# SUMMARY RATE SCORES

COMMERCIAL ADULT

	2024 Valid n	2022	2023	2024	2024 Non-PPO PG BoB	2023 Non-PPO QC	2023 All LOB QC
<b>Rating Questions (% 9 or 10)</b>							
★ Q31. Rating of Health Plan	179	43.5%	46.4%	53.6%	44.6%	43.2%	43.3%
★ Q8. Rating of Health Care	124	44.1%	48.8%	51.6%	49.8%	49.6%	49.6%
★ Q18. Rating of Personal Doctor	145	57.0%	57.6%	67.6%	68.4%	67.7%	67.9%
★ Q22. Rating of Specialist	80^	56.0%	53.8%	56.3%	66.5%	66.7%	66.6%
<b>Rating Questions (% 8, 9 or 10)</b>							
Q31. Rating of Health Plan	179	65.9%	67.1%	73.7%	66.5%	65.3%	65.6%
Q8. Rating of Health Care	124	61.0%	76.7%	75.0%	74.6%	75.2%	75.2%
Q18. Rating of Personal Doctor	145	74.9%	82.4%	83.4%	84.9%	84.7%	84.9%
Q22. Rating of Specialist	80^	72.6%	80.6%	76.3%	83.6%	84.0%	84.1%
★ <b>Getting Needed Care (% Usually or Always)</b>	108	65.8%	72.0%	71.1%	80.8%	81.9%	82.5%
Q9. Getting care, tests, or treatment	125	65.0%	73.1%	69.6%	84.2%	85.5%	86.0%
Q20. Getting specialist appointment	91^	66.7%	70.8%	72.5%	77.3%	78.5%	79.1%
★ <b>Getting Care Quickly (% Usually or Always)</b>	91^	62.0%	56.0%	65.0%	79.1%	80.0%	81.2%
Q4. Getting urgent care	56^	68.3%	55.4%	76.8%	81.6%	82.3%	83.4%
Q6. Getting routine care	126	55.8%	56.5%	53.2%	76.6%	77.8%	78.8%
★ <b>Q17. Coordination of Care</b>	87^	74.4%	80.0%	78.2%	84.2%	83.6%	83.2%
<b>Effectiveness of Care (% Sometimes, Usually, or Always)</b>							
Q35. Advised to Quit Smoking: 2YR +	29^	77.8%	75.7%	89.7%	72.7%	NA	NA
Q36. Discussing Cessation Meds: 2YR +	29^	48.6%	44.4%	62.1%	49.3%	NA	NA
Q37. Discussing Cessation Strategies: 2YR +	29^	58.3%	54.1%	62.1%	45.1%	NA	NA

**Significance Testing:** Current score is significantly higher/lower than the 2023 score (/), the 2022 score (/) or benchmark score (/).

^Denominator less than 100. NCQA will assign an NA to this measure.

# SUMMARY RATE SCORES

COMMERCIAL ADULT

	2024 Valid n	2022	2023	2024	2024 Non-PPO PG BoB	2023 Non-PPO QC	2023 All LOB QC
<b>Claims Processing + (% Usually or Always)</b>	<b>30^</b>	<b>71.4%</b>	<b>79.0%</b>	<b>80.0%</b>	<b>87.1%</b>	<b>88.3%</b>	<b>88.8%</b>
Q29. Handled claims quickly	30^	72.2%	76.2%	80.0%	85.7%	87.1%	87.4%
Q30. Handled claims correctly	30^	70.6%	81.8%	80.0%	88.5%	89.7%	90.2%
<b>Customer Service + (% Usually or Always)</b>	<b>66^</b>	<b>78.5%</b>	<b>82.9%</b>	<b>82.7%</b>	<b>86.9%</b>	<b>88.7%</b>	<b>88.7%</b>
Q24. Provided information or help	67^	71.6%	72.1%	80.6%	79.4%	82.2%	82.1%
Q25. Treated with courtesy and respect	66^	85.3%	93.7%	84.8%	94.3% ▼	95.5% ▼	95.4% ▼
<b>How Well Doctors Communicate + (% Usually or Always)</b>	<b>126</b>	<b>83.2%</b>	<b>87.5%</b>	<b>89.7%</b>	<b>94.8%</b>	<b>95.0%</b>	<b>95.2% ▼</b>
Q12. Dr. explained things	126	82.0%	86.8%	88.1%	95.6% ▼	95.6% ▼	95.9% ▼
Q13. Dr. listened carefully	127	86.8%	87.8%	91.3%	94.5%	94.9%	95.1%
Q14. Dr. showed respect	126	88.8%	91.1%	92.9%	96.2%	96.4%	96.5%
Q15. Dr. spent enough time	126	75.3%	84.4%	86.5% ‡	93.0% ▼	93.0% ▼	93.3% ▼
<b>Q27. Ease of Filling Out Forms + (% Usually or Always)</b>	<b>173</b>	<b>94.9%</b>	<b>94.5%</b>	<b>94.8%</b>	<b>96.4%</b>	<b>96.5%</b>	<b>96.5%</b>

**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (‡/§) or benchmark score (▲/▼).

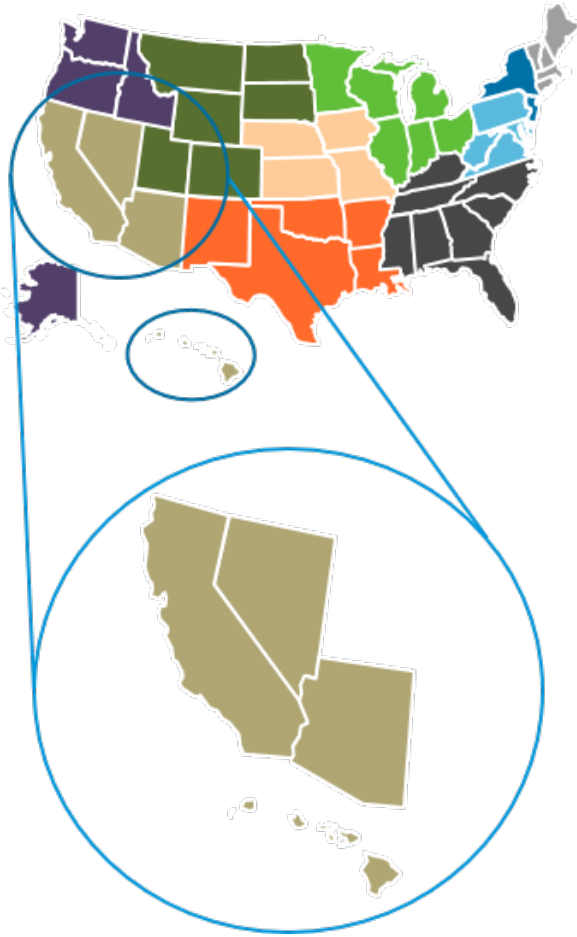
^Denominator less than 100. NCQA will assign an NA to this measure.

# REGIONAL PERFORMANCE

COMMERCIAL ADULT: Non-PPO

	SUMMARY RATE	2024 PG BoB REGION
Rating Questions (% 9 or 10)		
★ Q31. Rating of Health Plan	53.6%	48.8%
★ Q8. Rating of Health Care	51.6%	48.8%
★ Q18. Rating of Personal Doctor	67.6%	64.7%
★ Q22. Rating of Specialist	56.3%	64.4%
Rating Questions (% 8, 9 or 10)		
Q31. Rating of Health Plan	73.7%	69.8%
Q8. Rating of Health Care	75.0%	72.3%
Q18. Rating of Personal Doctor	83.4%	81.7%
Q22. Rating of Specialist	76.3%	81.4%
★ Getting Needed Care (% Usually or Always)	71.1%	75.4%
Q9. Getting care, tests, or treatment	69.6%	79.3% ❖
Q20. Getting specialist appointment	72.5%	71.4%
★ Getting Care Quickly (% Usually or Always)	65.0%	71.3%
Q4. Getting urgent care	76.8%	74.0%
Q6. Getting routine care	53.2%	68.5% ❖
★ Q17. Coordination of Care	78.2%	82.4%
Effectiveness of Care (% Sometimes, Usually, or Always)		
Q35. Advised to Quit Smoking: 2YR +	89.7%	75.8%
Q36. Discussing Cessation Meds: 2YR +	62.1%	52.8%
Q37. Discussing Cessation Strategies: 2YR +	62.1%	50.3%

**HHS Regions:** The regions used align with the U.S. Department of Health and Human Services regions.



- Region 9: San Francisco**
- American Samoa (not shown)
  - California
  - Hawaii
  - Arizona
  - Guam (not shown)
  - Nevada

Significance Testing

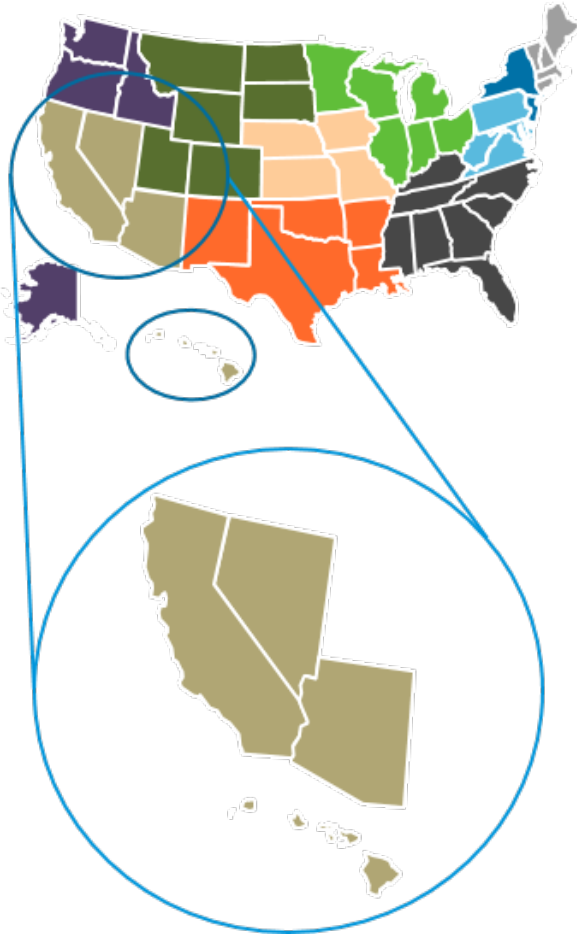
Current year score is significantly higher/lower (❖/❖) than the 2024 PG BoB Region score.

# REGIONAL PERFORMANCE

COMMERCIAL ADULT: Non-PPO

	SUMMARY RATE	2024 PG BoB REGION
<b>Claims Processing + (% Usually or Always)</b>	<b>80.0%</b>	<b>84.6%</b>
Q29. Handled claims quickly	80.0%	82.9%
Q30. Handled claims correctly	80.0%	86.3%
<b>Customer Service + (% Usually or Always)</b>	<b>82.7%</b>	<b>85.1%</b>
Q24. Provided information or help	80.6%	77.6%
Q25. Treated with courtesy and respect	84.8%	92.6%
<b>How Well Doctors Communicate + (% Usually or Always)</b>	<b>89.7%</b>	<b>92.7%</b>
Q12. Dr. explained things	88.1%	93.3%
Q13. Dr. listened carefully	91.3%	92.6%
Q14. Dr. showed respect	92.9%	94.7%
Q15. Dr. spent enough time	86.5%	90.1%
<b>Q27. Ease of Filling Out Forms + (% Usually or Always)</b>	<b>94.8%</b>	<b>96.0%</b>

**HHS Regions:** The regions used align with the U.S. Department of Health and Human Services regions.



- Region 9: San Francisco**
- American Samoa (not shown)
  - California
  - Hawaii
  - Arizona
  - Guam (not shown)
  - Nevada

**Significance Testing**

Current year score is significantly higher/lower (🍀/🍁) than the 2024 PG BoB Region score.

# PERCENTILE RANKINGS

COMMERCIAL ADULT: NON-PPO

		2024 Plan Score	QC %tile	National Percentiles from 2023 Quality Compass								PG %tile	National Percentiles from 2024 PG Book of Business									
				5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>		5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>
Rating Questions (% 9 or 10)																						
★	Q31. Rating of Health Plan	53.6%	82 <sup>nd</sup>	27.7	30.0	35.2	37.4	42.0	46.5	48.1	59.1	65.3	78 <sup>th</sup>	29.5	31.5	37.7	39.8	45.4	49.1	51.9	61.4	69.1
★	Q8. Rating of Health Care	51.6%	62 <sup>nd</sup>	38.1	39.9	44.8	46.3	49.1	52.4	54.5	59.8	61.9	51 <sup>st</sup>	40.3	42.4	46.1	48.1	51.0	53.5	55.2	58.8	63.3
★	Q18. Rating of Personal Doctor	67.6%	42 <sup>nd</sup>	57.6	59.2	64.2	65.8	68.3	70.2	71.3	74.5	77.1	38 <sup>th</sup>	58.8	61.9	66.0	67.0	70.0	72.4	73.5	77.2	78.3
★	Q22. Rating of Specialist	56.3%	5 <sup>th</sup>	56.3	60.1	63.0	64.2	67.2	69.2	70.5	74.3	76.5	<5 <sup>th</sup>	57.2	59.3	62.9	64.4	66.7	68.8	70.0	74.0	77.9
Rating Questions (% 8, 9 or 10)																						
	Q31. Rating of Health Plan	73.7%	79 <sup>th</sup>	50.0	52.0	58.2	60.6	64.9	69.6	72.4	77.6	82.9	70 <sup>th</sup>	51.1	55.0	60.5	62.9	69.2	72.9	75.0	81.1	85.2
	Q8. Rating of Health Care	75.0%	48 <sup>th</sup>	65.2	67.3	71.5	73.3	75.2	77.2	79.0	82.7	84.8	45 <sup>th</sup>	67.3	68.7	72.0	73.3	76.1	78.0	79.4	84.1	85.2
	Q18. Rating of Personal Doctor	83.4%	35 <sup>th</sup>	77.6	79.7	81.8	83.2	85.0	86.4	87.5	89.6	91.0	27 <sup>th</sup>	78.3	80.1	82.6	84.3	86.4	88.4	89.0	91.0	92.4
	Q22. Rating of Specialist	76.3%	7 <sup>th</sup>	75.6	77.8	81.5	82.5	84.7	86.4	87.1	89.2	90.5	5 <sup>th</sup>	76.2	78.7	81.2	81.6	83.9	85.7	87.3	89.3	90.4
★	Getting Needed Care (% U/A)	71.1%	<5 <sup>th</sup>	72.0	73.9	78.9	80.4	82.6	84.7	86.0	88.2	89.8	6 <sup>th</sup>	69.8	72.3	76.1	78.0	80.7	84.4	85.4	87.7	89.1
	Q9. Getting care, tests, or treatment	69.6%	<5 <sup>th</sup>	75.7	78.4	82.5	84.2	86.0	87.9	88.7	91.9	92.6	<5 <sup>th</sup>	74.4	77.4	80.7	82.4	84.5	87.4	88.4	92.4	92.9
	Q20. Getting specialist appointment	72.5%	16 <sup>th</sup>	67.1	69.3	74.6	75.9	78.9	82.7	83.7	86.7	87.7	29 <sup>th</sup>	63.9	66.9	71.2	72.8	77.4	81.2	82.2	85.0	86.9
★	Getting Care Quickly (% U/A)	65.0%	<5 <sup>th</sup>	67.7	71.7	76.3	78.8	81.0	83.3	84.5	87.8	88.9	<5 <sup>th</sup>	65.9	68.4	74.2	76.5	80.1	83.4	84.5	88.1	88.6
	Q4. Getting urgent care	76.8%	16 <sup>th</sup>	69.9	73.4	78.6	78.9	82.9	86.6	87.6	89.6	91.7	20 <sup>th</sup>	70.3	72.8	77.3	78.3	82.1	86.0	86.9	91.5	93.5
	Q6. Getting routine care	53.2%	<5 <sup>th</sup>	64.4	68.5	73.2	76.2	78.6	81.2	82.7	85.7	88.3	<5 <sup>th</sup>	61.6	64.5	70.4	73.0	77.8	81.3	82.3	87.0	88.3
★	Q17. Coordination of Care	78.2%	11 <sup>th</sup>	76.2	77.9	80.2	80.8	83.6	86.1	86.9	89.9	91.4	13 <sup>th</sup>	75.4	76.9	81.3	82.1	85.0	87.1	88.1	90.4	92.0
Effectiveness of Care (% S/U/A)																						
	Q35. Advised to Quit Smoking: 2YR +	89.7%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	85 <sup>th</sup>	50.0	55.8	66.7	70.0	75.0	81.7	84.5	93.0	100
	Q36. Discussing Cessation Meds: 2YR +	62.1%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	75 <sup>th</sup>	21.4	31.3	42.0	45.5	50.9	57.1	61.5	70.0	83.3
	Q37. Discussing Cessation Strategies: 2YR +	62.1%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	79 <sup>th</sup>	19.3	25.6	40.0	42.9	47.9	52.6	58.5	69.8	71.9



# PERCENTILE RANKINGS

COMMERCIAL ADULT: Non-PPO

	2024 Plan Score	QC %tile	National Percentiles from 2023 Quality Compass									PG %tile	National Percentiles from 2024 PG Book of Business								
			5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>		5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>
<b>Claims Processing + (% U/A)</b>	<b>80.0%</b>	<b>5<sup>th</sup></b>	<b>79.9</b>	<b>82.3</b>	<b>84.5</b>	<b>86.6</b>	<b>88.1</b>	<b>90.6</b>	<b>92.2</b>	<b>95.2</b>	<b>95.7</b>	<b>13<sup>th</sup></b>	<b>74.1</b>	<b>78.1</b>	<b>83.3</b>	<b>84.9</b>	<b>88.3</b>	<b>90.1</b>	<b>91.1</b>	<b>93.1</b>	<b>94.1</b>
Q29. Handled claims quickly	80.0%	13 <sup>th</sup>	77.4	78.5	84.0	85.7	88.1	89.8	90.8	95.0	95.5	22 <sup>nd</sup>	72.6	76.9	82.0	83.4	87.1	89.3	90.0	92.6	93.4
Q30. Handled claims correctly	80.0%	<5 <sup>th</sup>	81.4	83.8	86.2	87.4	90.2	92.7	93.1	95.5	96.9	11 <sup>th</sup>	74.3	78.4	85.0	86.5	89.7	91.8	92.5	94.9	96.0
<b>Customer Service + (% U/A)</b>	<b>82.7%</b>	<b>&lt;5<sup>th</sup></b>	<b>82.9</b>	<b>83.4</b>	<b>85.3</b>	<b>86.2</b>	<b>88.6</b>	<b>91.4</b>	<b>92.7</b>	<b>95.6</b>	<b>97.1</b>	<b>19<sup>th</sup></b>	<b>78.7</b>	<b>80.0</b>	<b>83.7</b>	<b>84.8</b>	<b>87.0</b>	<b>89.2</b>	<b>90.7</b>	<b>92.5</b>	<b>93.8</b>
Q24. Provided information or help	80.6%	49 <sup>th</sup>	72.6	73.3	76.0	78.8	82.0	85.5	88.0	92.0	95.2	54 <sup>th</sup>	66.4	69.3	74.5	76.3	79.7	82.9	84.1	88.2	91.0
Q25. Treated with courtesy and respect	84.8%	<5 <sup>th</sup>	91.7	92.2	94.2	94.4	95.4	97.2	97.3	99.0	99.1	<5 <sup>th</sup>	88.5	89.3	92.6	93.4	94.7	96.0	96.4	98.3	100
<b>How Well Doctors Communicate + (% U/A)</b>	<b>89.7%</b>	<b>&lt;5<sup>th</sup></b>	<b>90.7</b>	<b>92.3</b>	<b>94.1</b>	<b>94.4</b>	<b>95.3</b>	<b>96.0</b>	<b>96.3</b>	<b>97.4</b>	<b>97.7</b>	<b>&lt;5<sup>th</sup></b>	<b>90.6</b>	<b>91.2</b>	<b>93.4</b>	<b>93.9</b>	<b>95.2</b>	<b>96.2</b>	<b>96.8</b>	<b>97.8</b>	<b>98.5</b>
Q12. Dr. explained things	88.1%	<5 <sup>th</sup>	91.0	93.1	94.5	95.0	95.9	96.9	97.2	98.0	98.3	<5 <sup>th</sup>	90.9	92.3	93.7	94.7	96.1	97.1	97.6	98.8	99.2
Q13. Dr. listened carefully	91.3%	7 <sup>th</sup>	91.0	91.9	93.5	94.1	95.0	96.0	96.5	97.3	97.8	12 <sup>th</sup>	90.3	91.1	93.0	93.5	94.8	96.3	97.1	98.0	98.6
Q14. Dr. showed respect	92.9%	5 <sup>th</sup>	92.8	94.3	95.2	95.9	96.8	97.3	97.6	98.4	98.8	8 <sup>th</sup>	92.7	93.2	94.9	95.6	96.7	97.4	97.7	98.6	99.3
Q15. Dr. spent enough time	86.5%	<5 <sup>th</sup>	87.2	89.0	91.3	92.2	93.4	94.7	95.3	96.2	96.8	6 <sup>th</sup>	86.2	88.3	90.8	91.4	93.4	94.6	96.0	97.1	97.7
<b>Q27. Ease of Filling Out Forms + (% U/A)</b>	<b>94.8%</b>	<b>13<sup>th</sup></b>	<b>93.8</b>	<b>94.4</b>	<b>95.8</b>	<b>96.1</b>	<b>96.6</b>	<b>97.2</b>	<b>97.6</b>	<b>98.4</b>	<b>98.8</b>	<b>20<sup>th</sup></b>	<b>92.6</b>	<b>93.6</b>	<b>95.0</b>	<b>95.7</b>	<b>96.6</b>	<b>97.3</b>	<b>97.7</b>	<b>98.2</b>	<b>98.7</b>

# PERCENTILE RANKINGS

COMMERCIAL ADULT: ALL LOB

		2024 Plan Score	QC %tile	National Percentiles from 2023 Quality Compass								PG %tile	National Percentiles from 2024 PG Book of Business									
				5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>		5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>
Rating Questions (% 9 or 10)																						
★	Q31. Rating of Health Plan	53.6%	84 <sup>th</sup>	27.7	30.3	35.8	38.3	42.2	46.9	49.4	57.4	62.8	85 <sup>th</sup>	27.6	29.8	34.5	37.1	41.0	46.1	48.8	57.9	64.3
★	Q8. Rating of Health Care	51.6%	62 <sup>nd</sup>	38.1	40.2	45.0	46.4	49.4	52.6	54.4	59.2	61.0	62 <sup>nd</sup>	36.2	39.4	43.4	45.4	48.5	52.2	53.8	58.2	60.0
★	Q18. Rating of Personal Doctor	67.6%	43 <sup>rd</sup>	57.6	59.6	64.4	65.8	68.5	70.7	72.0	75.0	77.1	43 <sup>rd</sup>	57.4	59.7	64.1	66.0	69.0	71.5	72.4	76.1	77.7
★	Q22. Rating of Specialist	56.3%	5 <sup>th</sup>	56.3	59.5	63.0	64.2	67.0	69.2	70.2	74.2	76.2	6 <sup>th</sup>	55.2	58.1	61.4	63.2	65.8	67.9	69.2	72.8	75.6
Rating Questions (% 8, 9 or 10)																						
	Q31. Rating of Health Plan	73.7%	80 <sup>th</sup>	50.3	52.4	58.6	61.5	65.4	69.6	72.3	77.7	81.8	79 <sup>th</sup>	49.8	52.7	58.2	60.4	64.4	69.8	72.1	78.2	81.9
	Q8. Rating of Health Care	75.0%	49 <sup>th</sup>	64.4	67.3	71.4	73.1	75.2	77.7	79.3	83.1	84.8	52 <sup>nd</sup>	64.3	66.4	70.1	71.8	74.7	77.2	78.4	82.5	84.3
	Q18. Rating of Personal Doctor	83.4%	33 <sup>rd</sup>	77.9	79.5	82.1	83.3	85.3	86.9	87.6	89.8	90.9	32 <sup>nd</sup>	76.9	78.7	82.2	83.6	85.3	87.6	88.4	90.8	91.5
	Q22. Rating of Specialist	76.3%	5 <sup>th</sup>	76.0	78.4	81.5	82.5	84.7	86.4	87.1	89.1	90.5	8 <sup>th</sup>	75.3	77.0	80.0	81.3	83.8	85.1	86.1	88.5	90.0
★	Getting Needed Care (% U/A)	71.1%	<5 <sup>th</sup>	72.1	75.3	79.7	80.9	83.2	85.2	86.2	88.8	90.0	<5 <sup>th</sup>	71.1	73.6	77.8	78.9	81.7	84.7	85.6	87.8	88.8
	Q9. Getting care, tests, or treatment	69.6%	<5 <sup>th</sup>	76.9	79.1	83.3	84.4	86.5	88.3	89.4	92.3	93.1	<5 <sup>th</sup>	74.6	78.0	81.7	83.2	85.8	87.7	88.9	91.4	92.8
	Q20. Getting specialist appointment	72.5%	15 <sup>th</sup>	68.0	71.2	75.4	76.8	79.7	82.7	83.7	86.6	87.7	22 <sup>nd</sup>	66.1	68.0	72.9	74.9	78.3	81.3	82.9	85.6	86.6
★	Getting Care Quickly (% U/A)	65.0%	<5 <sup>th</sup>	71.4	73.6	78.2	79.7	81.7	84.1	85.3	88.5	89.7	<5 <sup>th</sup>	68.4	72.1	77.0	78.6	82.0	84.0	85.0	87.9	88.8
	Q4. Getting urgent care	76.8%	14 <sup>th</sup>	72.5	73.6	78.9	80.4	85.4	87.2	88.1	91.3	92.6	12 <sup>th</sup>	72.1	74.8	79.1	80.8	84.2	86.6	87.9	91.2	92.3
	Q6. Getting routine care	53.2%	<5 <sup>th</sup>	67.8	70.2	75.1	76.8	79.3	82.1	83.3	87.0	88.7	<5 <sup>th</sup>	64.4	67.6	74.0	75.9	79.6	81.9	83.0	86.8	88.1
★	Q17. Coordination of Care	78.2%	12 <sup>th</sup>	75.6	77.9	80.2	80.9	83.3	85.6	86.5	88.5	90.5	17 <sup>th</sup>	73.1	76.2	80.2	81.3	83.3	85.9	86.9	89.8	90.9
Effectiveness of Care (% S/U/A)																						
	Q35. Advised to Quit Smoking: 2YR +	89.7%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	88 <sup>th</sup>	44.6	50.7	63.6	66.7	73.3	80.0	82.6	91.7	100
	Q36. Discussing Cessation Meds: 2YR +	62.1%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	81 <sup>st</sup>	17.0	25.8	37.5	42.9	47.8	53.8	57.1	68.8	78.2
	Q37. Discussing Cessation Strategies: 2YR +	62.1%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	85 <sup>th</sup>	16.7	25.0	32.4	37.0	42.9	50.0	52.6	66.7	71.2

# PERCENTILE RANKINGS

COMMERCIAL ADULT: ALL LOB

	2024 Plan Score	QC %tile	National Percentiles from 2023 Quality Compass									PG %tile	National Percentiles from 2024 PG Book of Business								
			5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>		5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>
<b>Claims Processing + (% U/A)</b>	<b>80.0%</b>	<b>&lt;5<sup>th</sup></b>	<b>80.2</b>	<b>82.9</b>	<b>86.1</b>	<b>86.8</b>	<b>88.5</b>	<b>91.3</b>	<b>92.9</b>	<b>95.2</b>	<b>95.8</b>	<b>11<sup>th</sup></b>	<b>76.2</b>	<b>79.1</b>	<b>83.7</b>	<b>84.8</b>	<b>87.6</b>	<b>89.4</b>	<b>90.5</b>	<b>93.1</b>	<b>94.2</b>
Q29. Handled claims quickly	80.0%	9 <sup>th</sup>	77.4	80.6	84.2	85.2	87.6	90.1	91.9	95.0	95.5	21 <sup>st</sup>	72.3	76.9	81.0	82.6	85.9	88.4	89.6	92.2	94.0
Q30. Handled claims correctly	80.0%	<5 <sup>th</sup>	83.0	84.9	87.1	88.2	90.4	92.7	93.6	95.5	96.9	7 <sup>th</sup>	76.8	81.5	85.7	87.0	89.1	91.3	92.3	94.9	96.1
<b>Customer Service + (% U/A)</b>	<b>82.7%</b>	<b>5<sup>th</sup></b>	<b>81.5</b>	<b>83.4</b>	<b>84.9</b>	<b>86.0</b>	<b>88.6</b>	<b>91.5</b>	<b>92.8</b>	<b>95.6</b>	<b>97.1</b>	<b>23<sup>rd</sup></b>	<b>78.3</b>	<b>80.0</b>	<b>82.9</b>	<b>84.4</b>	<b>86.7</b>	<b>88.7</b>	<b>90.0</b>	<b>92.4</b>	<b>93.6</b>
Q24. Provided information or help	80.6%	49 <sup>th</sup>	69.9	73.3	75.5	76.9	82.0	87.1	88.3	92.0	95.2	58 <sup>th</sup>	66.7	69.0	73.5	75.4	78.4	81.8	83.8	88.1	89.5
Q25. Treated with courtesy and respect	84.8%	<5 <sup>th</sup>	91.7	92.2	94.0	94.4	95.3	96.5	97.3	99.0	99.2	<5 <sup>th</sup>	88.2	89.4	91.9	92.8	94.3	95.8	96.3	98.4	100
<b>How Well Doctors Communicate + (% U/A)</b>	<b>89.7%</b>	<b>&lt;5<sup>th</sup></b>	<b>91.9</b>	<b>92.8</b>	<b>94.2</b>	<b>94.6</b>	<b>95.4</b>	<b>96.0</b>	<b>96.5</b>	<b>97.4</b>	<b>97.8</b>	<b>&lt;5<sup>th</sup></b>	<b>90.9</b>	<b>92.2</b>	<b>93.9</b>	<b>94.6</b>	<b>95.4</b>	<b>96.2</b>	<b>96.6</b>	<b>97.8</b>	<b>98.2</b>
Q12. Dr. explained things	88.1%	<5 <sup>th</sup>	92.7	93.6	94.8	95.3	96.1	97.0	97.3	98.1	98.5	<5 <sup>th</sup>	92.2	92.7	94.6	95.2	96.3	97.2	97.7	98.5	99.1
Q13. Dr. listened carefully	91.3%	5 <sup>th</sup>	91.2	92.3	93.8	94.3	95.3	96.1	96.5	97.6	98.1	8 <sup>th</sup>	90.7	91.5	93.2	93.9	95.2	96.2	96.7	97.9	98.5
Q14. Dr. showed respect	92.9%	<5 <sup>th</sup>	93.0	94.4	95.5	96.1	96.8	97.3	97.6	98.4	99.1	5 <sup>th</sup>	92.8	93.8	95.3	95.9	96.8	97.4	97.8	98.7	99.2
Q15. Dr. spent enough time	86.5%	<5 <sup>th</sup>	88.3	89.4	91.6	92.5	93.6	94.7	95.2	96.3	97.1	<5 <sup>th</sup>	86.6	88.6	91.2	91.9	93.5	94.7	95.5	96.8	97.5
<b>Q27. Ease of Filling Out Forms + (% U/A)</b>	<b>94.8%</b>	<b>14<sup>th</sup></b>	<b>93.5</b>	<b>94.4</b>	<b>95.7</b>	<b>96.2</b>	<b>96.7</b>	<b>97.3</b>	<b>97.6</b>	<b>98.4</b>	<b>98.8</b>	<b>15<sup>th</sup></b>	<b>92.8</b>	<b>93.9</b>	<b>95.4</b>	<b>95.8</b>	<b>96.4</b>	<b>97.2</b>	<b>97.6</b>	<b>98.4</b>	<b>98.9</b>

# PROFILE OF SURVEY RESPONDENTS

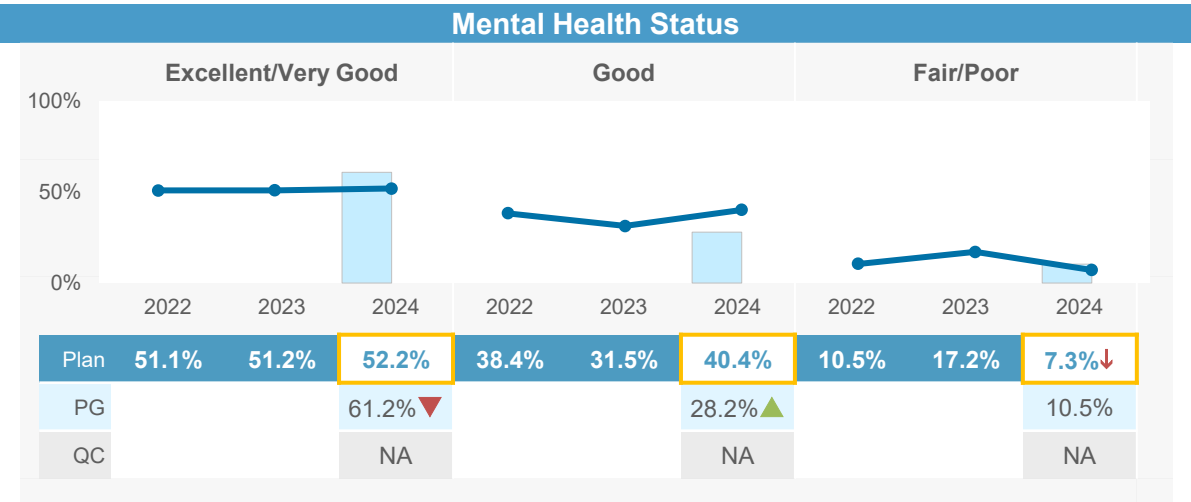
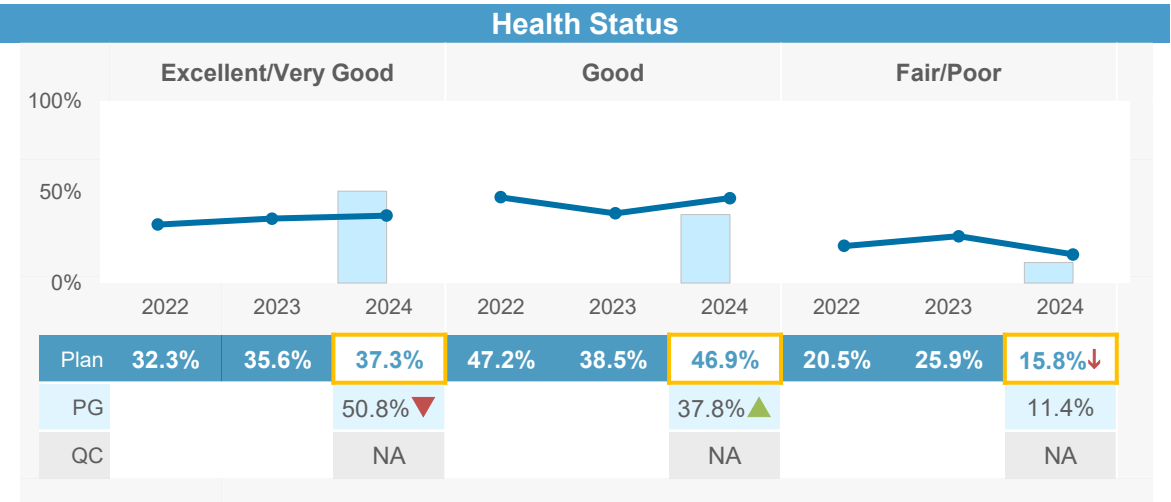
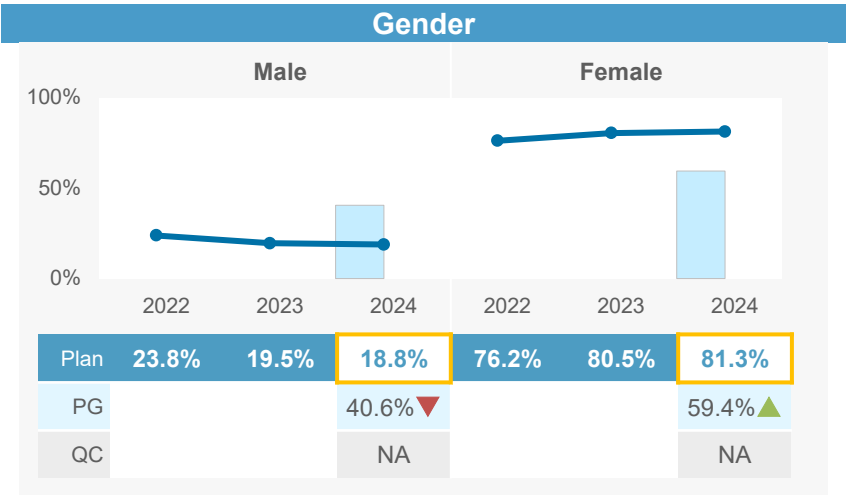
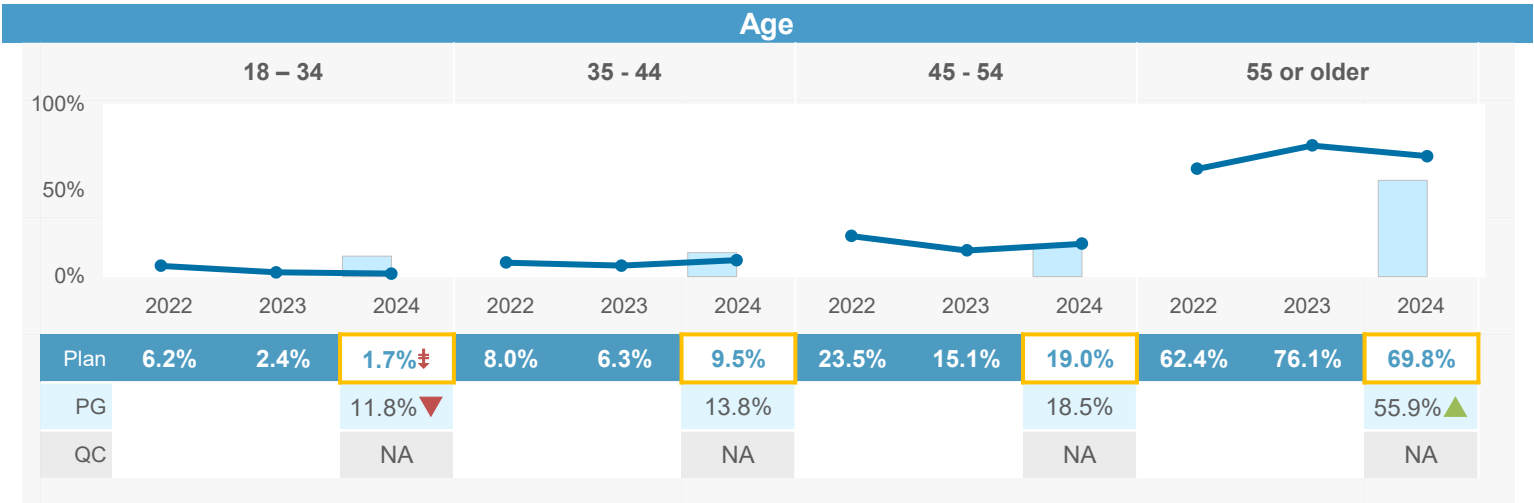
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## DEMOGRAPHIC COMPOSITION

- Alameda Alliance for Health

# PROFILE OF SURVEY RESPONDENTS

COMMERCIAL ADULT: Non-PPO

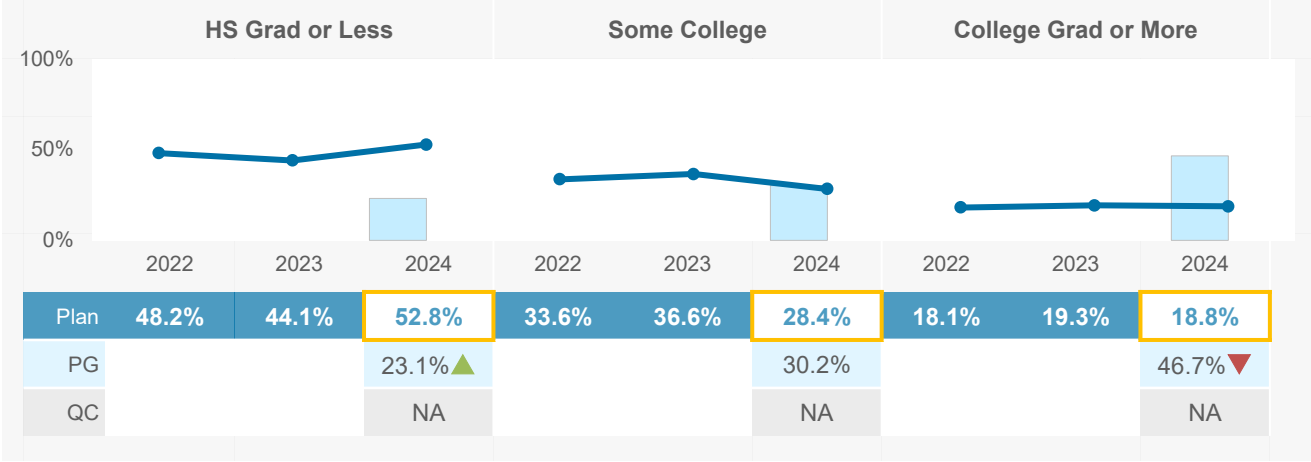


**Significance Testing:** Current score is significantly higher/lower than the 2023 score (▲/▼), the 2022 score (⬆/⬇) or benchmark score (▲/▼).  
**Benchmarks:** PG refers to the 2024 PG Book of Business benchmark. QC refers to the 2023 QC National Data benchmark. NCQA did not publish demographics for the 2023 benchmark.

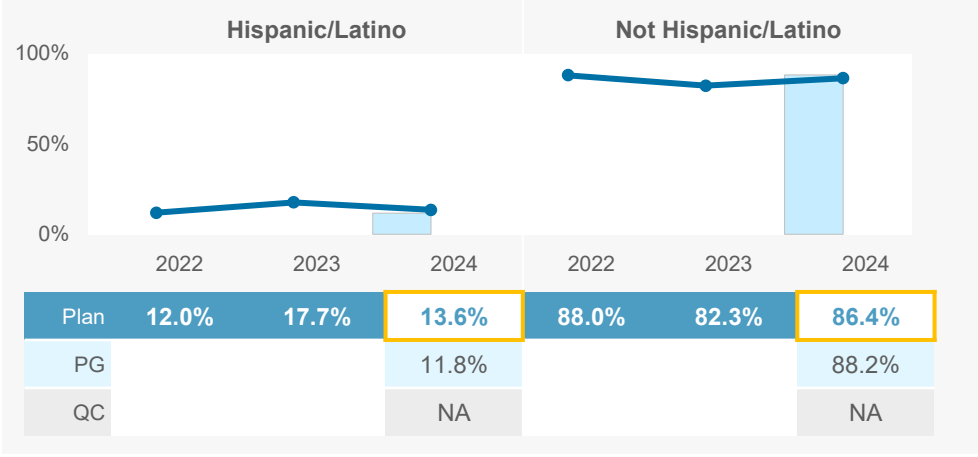
# PROFILE OF SURVEY RESPONDENTS

COMMERCIAL ADULT: Non-PPO

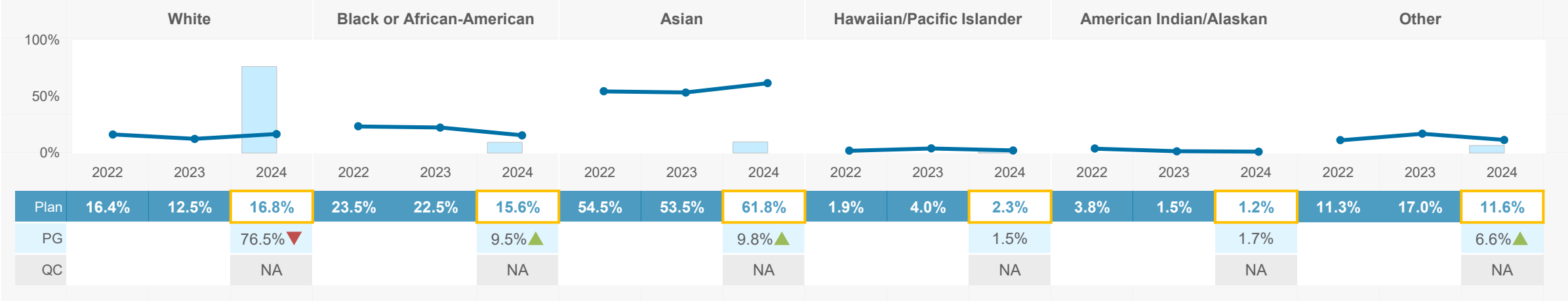
## Education



## Ethnicity



## Race



**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↕/↕) or benchmark score (▲/▼).  
**Benchmarks:** PG refers to the 2024 PG Book of Business benchmark. QC refers to the 2023 QC National Data benchmark. NCQA did not publish demographics for the 2023 benchmark.

# APPENDICES

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- APPENDIX A: CORRELATION ANALYSES
- APPENDIX B: QUESTIONNAIRE

# APPENDIX A: CORRELATIONS

COMMERCIAL ADULT: Non-PPO

## Highest Correlations

Below are the key measures with the highest correlations to the Rating measures.

### With Health Care Rating

<b>Q31</b>	Health plan overall	0.6833
<b>Q18</b>	Personal doctor overall	0.5879
<b>Q4</b>	Got urgent care	0.5794
<b>Q9</b>	Got care/tests/treatment	0.4288
<b>Q22</b>	Specialist overall	0.4264
<b>Q14</b>	Dr. showed respect	0.4217
<b>Q17</b>	Dr. informed about care	0.3780
<b>Q15</b>	Dr. spent enough time	0.3373
<b>Q12</b>	Dr. explained things	0.3355
<b>Q20</b>	Got specialist appt.	0.3351

### With Personal Doctor Rating

<b>Q15</b>	Dr. spent enough time	0.7644
<b>Q14</b>	Dr. showed respect	0.6808
<b>Q22</b>	Specialist overall	0.6366
<b>Q12</b>	Dr. explained things	0.6213
<b>Q13</b>	Dr. listened carefully	0.6192
<b>Q8</b>	Health care overall	0.5879
<b>Q17</b>	Dr. informed about care	0.5717
<b>Q25</b>	CS courtesy/respect	0.5316
<b>Q31</b>	Health plan overall	0.5313
<b>Q4</b>	Got urgent care	0.5001

### With Specialist Rating

<b>Q18</b>	Personal doctor overall	0.6366
<b>Q17</b>	Dr. informed about care	0.4480
<b>Q20</b>	Got specialist appt.	0.4328
<b>Q8</b>	Health care overall	0.4264
<b>Q15</b>	Dr. spent enough time	0.4247
<b>Q31</b>	Health plan overall	0.3959
<b>Q6</b>	Got routine care	0.3896
<b>Q12</b>	Dr. explained things	0.3188
<b>Q4</b>	Got urgent care	0.3066
<b>Q9</b>	Got care/tests/treatment	0.2999



# APPENDIX B: QUESTIONNAIRE

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ALAMEDA

Alliance

FOR HEALTH

33. In general, how would you rate your overall mental or emotional health?

- ☐ Excellent
- ☐ Very Good
- ☐ Good
- ☐ Fair
- ☐ Poor

34. Do you now smoke cigarettes or use tobacco every day, some days, or not at all?

- ☐ Every day
- ☐ Some days
- ☐ Not at all ➔ *If Not at all, Go to Question 38*
- ☐ Don't know ➔ *If Don't know, Go to Question 38*

35. In the last 12 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

36. In the last 12 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? *Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication.*

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

37. In the last 12 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? *Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program.*

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

38. What is your age?

- ☐ 18 to 24
- ☐ 25 to 34
- ☐ 35 to 44
- ☐ 45 to 54
- ☐ 55 to 64
- ☐ 65 to 74
- ☐ 75 or older

39. Are you male or female?

- ☐ Male
- ☐ Female

40. What is the highest grade or level of school that you have completed?

- ☐ 8th grade or less
- ☐ Some high school, but did not graduate
- ☐ High school graduate or GED
- ☐ Some college or 2-year degree
- ☐ 4-year college graduate
- ☐ More than 4-year college degree

41. Are you of Hispanic or Latino origin or descent?

- ☐ Yes, Hispanic or Latino
- ☐ No, Not Hispanic or Latino

42. What is your race? *Mark one or more.*

- ☐ White
- ☐ Black or African-American
- ☐ Asian
- ☐ Native Hawaiian or other Pacific Islander
- ☐ American Indian or Alaska Native
- ☐ Other

Thank You  
Please return the completed survey  
in the postage-paid envelope or send to:  
Press Ganey • P.O. Box 7315  
South Bend, IN 46699-0488

If you have any questions,  
please call 1-888-797-3605.

This information collection has been approved by the U.S. Office of Management and Budget (Control Number 3206-0274) and is in compliance with the Paperwork Reduction Act of 1995. We estimate that it will take an average of 20 minutes to complete, including the time to read instructions and to gather necessary information. You may send comments about our estimate or any suggestions for minimizing respondent burden, reducing completion time or any other aspect of this information collection to the U.S. Office of Personnel Management (OPM), Reports and Forms Officer, (OMB Number 3206-0274), Washington, DC 20415-7900. Your participation in this information collection is voluntary. The OMB Number, 3206-0274, is currently valid. OPM may not collect this information, and you are not required to respond, unless this number is displayed.

SURVEY INSTRUCTIONS

- ◆ Answer each question by marking the box to the left of your answer.
- ◆ You are sometimes told to skip over some questions in this survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:

- ☒ Yes ➔ *If Yes, Go to Question 1*
- ☐ No

*Personally identifiable information will not be made public and will only be released in accordance with federal laws and regulations.*

*You may choose to answer this survey or not. If you choose not to, this will not affect the benefits you get. You may notice a number on the back of this survey. This number is ONLY used to let us know if you returned your survey so we don't have to send you reminders.*

*If you want to know more about this study, please call 1-888-797-3605.*

1. Our records show that you are now in Alameda Alliance for Health (Alliance). Is that right?

- ☐ Yes ➔ *If Yes, Go to Question 3*
- ☐ No

2. What is the name of your health plan? *(Please print)*

YOUR HEALTH CARE IN THE LAST 12 MONTHS

*These questions ask about your own health care from a clinic, emergency room, or doctor's office. This includes care you got in person, by phone, or by video. Do not include care you got when you stayed overnight in a hospital. Do not include the times you went for dental care visits.*

3. In the last 12 months, did you have an illness, injury, or condition that needed care right away?

- ☐ Yes
- ☐ No ➔ *If No, Go to Question 5*

4. In the last 12 months, when you needed care right away, how often did you get care as soon as you needed?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

5. In the last 12 months, did you make any in person, phone, or video appointments for a check-up or routine care?

- ☐ Yes
- ☐ No ➔ *If No, Go to Question 7*

6. In the last 12 months, how often did you get an appointment for a check-up or routine care as soon as you needed?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

7. In the last 12 months, not counting the times you went to an emergency room, how many times did you get health care for yourself in person, by phone, or by video?

- ☐ None ➔ *If None, Go to Question 10*
- ☐ 1 time
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 to 9
- ☐ 10 or more times

8. Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 12 months?

- ☐ 0 Worst health care possible
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 Best health care possible

9. In the last 12 months, how often was it easy to get the care, tests, or treatment you needed?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always



YOUR PERSONAL DOCTOR

10. A personal doctor is the one you would talk to if you need a check-up, want advice about a health problem, or get sick or hurt. Do you have a personal doctor?
- ☐ Yes
- ☐ No ➔ If No, Go to Question 19
11. In the last 12 months, how many times did you have an in person, phone, or video visit with your personal doctor about your health?
- ☐ None ➔ If None, Go to Question 18
- ☐ 1 time
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 to 9
- ☐ 10 or more times
12. In the last 12 months, how often did your personal doctor explain things in a way that was easy to understand?
- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always
13. In the last 12 months, how often did your personal doctor listen carefully to you?
- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always
14. In the last 12 months, how often did your personal doctor show respect for what you had to say?
- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always
15. In the last 12 months, how often did your personal doctor spend enough time with you?
- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always
16. In the last 12 months, did you get care from a doctor or other health provider besides your personal doctor?
- ☐ Yes
- ☐ No ➔ If No, Go to Question 18

17. In the last 12 months, how often did your personal doctor seem informed and up-to-date about the care you got from these doctors or other health providers?
- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

18. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?
- ☐ 0 Worst personal doctor possible
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 Best personal doctor possible

GETTING HEALTH CARE FROM SPECIALISTS

When you answer the next questions, include the care you got in person, by phone, or by video. Do not include dental visits or care you got when you stayed overnight in a hospital.

19. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. In the last 12 months, did you make any appointments with a specialist?
- ☐ Yes
- ☐ No ➔ If No, Go to Question 23
20. In the last 12 months, how often did you get an appointment with a specialist as soon as you needed?
- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always
21. How many specialists have you talked to in the last 12 months?
- ☐ None ➔ If None, Go to Question 23
- ☐ 1 specialist
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 or more specialists

22. We want to know your rating of the specialist you talked to most often in the last 12 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?
- ☐ 0 Worst specialist possible
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 Best specialist possible

YOUR HEALTH PLAN

The next questions ask about your experience with your health plan.

23. In the last 12 months, did you get information or help from your health plan’s customer service?
- ☐ Yes
- ☐ No ➔ If No, Go to Question 26
24. In the last 12 months, how often did your health plan’s customer service give you the information or help you needed?
- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always
25. In the last 12 months, how often did your health plan’s customer service staff treat you with courtesy and respect?
- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always
26. In the last 12 months, did your health plan give you any forms to fill out?
- ☐ Yes
- ☐ No ➔ If No, Go to Question 28
27. In the last 12 months, how often were the forms from your health plan easy to fill out?
- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

28. Claims are sent to a health plan for payment. You may send in the claims yourself, or doctors, hospitals, or others may do this for you. In the last 12 months, did you or anyone else send in any claims for your care to your health plan?
- ☐ Yes
- ☐ No ➔ If No, Go to Question 31
- ☐ Don’t know ➔ If Don’t know, Go to Question 31

29. In the last 12 months, how often did your health plan handle your claims quickly?
- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always
- ☐ Don’t know

30. In the last 12 months, how often did your health plan handle your claims correctly?
- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always
- ☐ Don’t know

31. Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your health plan?
- ☐ 0 Worst health plan possible
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 Best health plan possible

ABOUT YOU

32. In general, how would you rate your overall health?
- ☐ Excellent
- ☐ Very Good
- ☐ Good
- ☐ Fair
- ☐ Poor



# **MY 2023 CAHPS® MEDICAID ADULT 5.1H SURVEY**

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**ALAMEDA ALLIANCE FOR HEALTH**

ALAMEDA ALLIANCE FOR HEALTH

# CONTENTS

- OVERVIEW
- METHODOLOGY
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- MEASURE ANALYSES
- SUMMARY OF TREND AND BENCHMARKS
- PROFILE OF SURVEY RESPONDENTS
- SUPPLEMENTAL QUESTIONS
- APPENDICES
  - A: CORRELATIONS
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# OVERVIEW

Press Ganey (PG), a National Committee for Quality Assurance (NCQA) certified HEDIS® Survey Vendor, was selected by Alameda Alliance for Health to conduct its MY 2023 CAHPS® 5.1H Medicaid Adult Survey. NCQA requires health plans to submit CAHPS survey results in compliance with HEDIS® accreditation requirements.

**SURVEY OBJECTIVE** The overall objective of the CAHPS® study is to capture accurate and complete information about consumer-reported experiences with health care. Specifically, the survey aims to measure how well plans are meeting their members' expectations and goals; to determine which areas of service have the greatest effect on members' overall satisfaction; and to identify areas of opportunity for improvement, which can aid plans in increasing the quality of provided care.

**2024 NCQA CHANGES** NCQA made changes to the survey or program for 2024.

One question was deleted from the 2024 Commercial Adult Survey and the 2024 Medicaid Adult Survey:

- Have you had either a flu shot or flu spray in the nose since July 1, 20XX?

Your Project Manager is Carrie-Ann Rojas (Carrie.Rojas@pressganey.com). Should you have any questions or comments regarding any aspect of the survey or reporting process, please feel free to email your Project Manager.

# METHODOLOGY

## DATA COLLECTION

The MY 2023 Medicaid Adult version of the 5.1H CAHPS survey was administered via the following methodology:

First questionnaire  
mailed  
2/16/2024



Second questionnaire  
mailed  
3/22/2024



Initiate follow-up calls  
to non-responders  
4/12/2024 - 4/26/2024



Last day to accept  
completed surveys  
5/1/2024

## QUALIFIED RESPONDENTS

Included beneficiaries who were...

- 18 years and older (as of December 31<sup>st</sup> of the measurement year)
- Continuously enrolled in the plan for at least five of the last six months of the measurement year

## 2024 RESPONSE RATE CALCULATION

$$\frac{181 \text{ (Completed)}}{1350 \text{ (Sample)} - 22 \text{ (Ineligible)}} = \frac{181}{1328} = 13.6\%$$

## COMPLETES - MODALITY BY LANGUAGE

Language	Mail	Phone	Total
English	108	27	135
Spanish	30	16	46
Total	138	43	181

Total Number of Undeliverables: 95

Note: Respondents were given the option of completing the survey in Spanish. In place of the English survey, a Spanish survey was mailed to members who were identified by the plan as Spanish-speaking. A telephone number was also provided on the survey cover letter for all members to call if they would like to complete the survey in Spanish.

## RESPONSE RATE TRENDING

		2022	2023	2024
Completed	SUBTOTAL	163	155	181
Ineligible	Does not Meet Eligibility Criteria (01)	22	11	12
	Language Barrier (03)	9	4	8
	Mentally/Physically Incapacitated (04)	1	5	2
	Deceased (05)	0	0	0
	SUBTOTAL	32	20	22
Non-response	Break-off/Incomplete (02)	6	7	11
	Refusal (06)	33	31	31
	Maximum Attempts Made (07)	1116	1137	1105
	Added to DNC List (08)	0	0	0
	SUBTOTAL	1155	1175	1147
Total Sample		1350	1350	1350
Oversampling %		0.0%	0.0%	0.0%
Response Rate		12.4%	11.7%	13.6%
PG Response Rate		12.2%	11.5%	11.1%

# INDUSTRY TRENDS

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- Alameda Alliance for Health



# PG BOOK OF BUSINESS TRENDS

MEDICAID ADULT

**Trend Highlights** The robust Press Ganey Book of Business is valuable in monitoring industry trends. On the right, we have provided a side-by-side comparison of aggregate PG Book of Business scores to help you understand broader trends in measure scoring over the past five years.

**Medicaid Adult:** Among the Medicaid Adult population, no measures declined by more than 1% compared to 2023. *Rating of Personal Doctor (%9 or 10)* and *Rating of Specialist (%9 or 10)* have increased by more than 1%.

All scores have decreased overall since 2020. *Rating of Health Care Quality* and *Getting Care Quickly* are the largest decrease of at least 2% lower than the 2020 scores.

	PG Book of Business Trends				
	2020	2021	2022	2023	2024
Rating Questions (% 9 or 10)					
Q28. Rating of Health Plan	64.6%	64.5%	64.0%	63.6%	63.1%
Q8. Rating of Health Care	58.8%	59.4%	57.0%	56.8%	57.3%
Q18. Rating of Personal Doctor	70.7%	70.4%	69.5%	69.2%	70.3%
Q22. Rating of Specialist	70.9%	69.7%	68.4%	67.4%	68.5%
Rating Questions (% 8, 9 or 10)					
Q28. Rating of Health Plan	80.3%	79.8%	79.6%	79.3%	78.7%
Q8. Rating of Health Care	76.9%	77.5%	75.8%	75.4%	75.8%
Q18. Rating of Personal Doctor	84.2%	83.8%	83.1%	83.2%	83.9%
Q22. Rating of Specialist	84.7%	83.9%	82.7%	82.3%	82.7%
Getting Needed Care (% A/U)					
Q9. Getting care, tests, or treatment	86.3%	85.8%	85.0%	84.8%	85.1%
Q20. Getting specialist appointment	80.7%	82.4%	79.6%	79.1%	79.1%
Getting Care Quickly (% A/U)					
Q4. Getting urgent care	85.0%	84.3%	81.7%	82.7%	82.7%
Q6. Getting routine care	80.4%	80.9%	80.0%	80.4%	79.7%
Coordination of Care (Q17) (% A/U)					
	85.9%	84.8%	85.0%	85.6%	86.0%

Increase of 1% or greater since 2023

Decrease of 1% or greater since 2023

# EXECUTIVE SUMMARY

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- Alameda Alliance for Health

# OVERVIEW OF TERMS

**Summary Rates (SRS)** are defined by NCQA in its HEDIS MY 2023 CAHPS® 5.1H guidelines and generally represent the most favorable response percentages.

**Percentile Rankings** Your plan's approximate percentile rankings in relation to the Quality Compass® All Plans benchmark were calculated by Press Ganey using information derived from the NCQA 1-100 Benchmark.

**PG Benchmark Information** The source for data contained within the PG Book of Business is all submitting plans that contracted with PG for MY 2023. Submission occurred on May 24<sup>th</sup>, 2024.

**NCQA Benchmark Information** The source for data contained in this publication is Quality Compass® All Plans 2023. It is used with the permission of NCQA. Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass® is a registered trademark of NCQA.

**Significance Testing** All significance testing is performed at the 95% confidence level using a t-test.

**Small Denominator Threshold** NCQA will assign a measure result of NA to overall ratings or composites with a denominator (i.e., the average number of responses across all questions used to calculate the composite) less than 100.

**Non-Accreditation Notation** Throughout the report you will see a notation of “+” which indicates that the given measure is not utilized for accreditation score calculation.

**Technical Notes** Please refer to the Technical Notes for more information.

# 2024 DASHBOARD

MEDICAID ADULT



181

Completed  
surveys

13.6%

Response Rate

**Stars:** PG **Estimated** NCQA  
Rating  
NA = Denominator < 100

**Scores:** All scores displayed  
are Summary Rate Scores

- Rating: % 9 or 10
- Composites: % Usually or Always
- Smoking: % Always, Usually, or Sometimes

**Significance Testing:** Current  
score is significantly  
higher/lower than 2023 (↑/↓) or  
2022 (↔/↕).

**Percentiles:** Based on the  
2024 PG Book of Business

**Health Plan Key Driver**

**Classification:** Details can be  
found in the KDA section.

## Accreditation Measures

Rating of Health Plan ★★ ★				
Rating of Health Plan	59.8%		27 <sup>th</sup>	---
Rating of Health Care ★★ ★				
Rating of Health Care	56.3%	↑	39 <sup>th</sup>	Opportunity
Rating of Personal Doctor ★★ ★				
Rating of Personal Doctor	66.1%		22 <sup>nd</sup>	Opportunity
Advised to Quit Smoking: 2YR (NA)				
Advised to Quit Smoking: 2YR	71.1%		42 <sup>nd</sup>	---

## Other Measures

Rating of Specialist +				
Rating of Specialist +	63.1%		15 <sup>th</sup>	Wait
Coordination of Care +				
Coordination of Care +	78.3%		7 <sup>th</sup>	Wait
Customer Service +				
Composite	87.3%		20 <sup>th</sup>	---
Q24. Provided information or help	81.7%		20 <sup>th</sup>	Wait
Q25. Treated with courtesy and respect	93.0%		20 <sup>th</sup>	Wait

## Getting Needed Care (NA)

Composite	73.6%		<5 <sup>th</sup>	---
Q9. Getting care, tests, or treatment	83.3%		30 <sup>th</sup>	Opportunity
Q20. Getting specialist appointment	63.8%		<5 <sup>th</sup>	Wait

## Getting Care Quickly (NA)

Composite	74.9%		10 <sup>th</sup>	---
Q4. Getting urgent care	76.8%		14 <sup>th</sup>	Opportunity
Q6. Getting routine care	73.0%		16 <sup>th</sup>	Opportunity

## Ease of Filling Out Forms +

Ease of Filling Out Forms +	92.9%		15 <sup>th</sup>	Wait
-----------------------------	-------	--	------------------	------

## How Well Doctors Communicate +

Composite	93.9%		68 <sup>th</sup>	---
Q12. Dr. explained things	95.8%	↑	86 <sup>th</sup>	Power
Q13. Dr. listened carefully	94.7%		74 <sup>th</sup>	Power
Q14. Dr. showed respect	94.7%		47 <sup>th</sup>	Opportunity
Q15. Dr. spent enough time	90.5%		39 <sup>th</sup>	Wait

# ESTIMATED NCQA HEALTH INSURANCE PLAN RATINGS

MEDICAID ADULT

	SCORE DEFINITION	2024 BASE	2024 HPR SCORE*	HPR 4 STAR THRESHOLD	HPR PERCENTILE BAND	PG ESTIMATED RATING
PATIENT EXPERIENCE						3
GETTING CARE						NA
Getting Needed Care	Usually or Always	85	73.5%	84.6%	<10 <sup>th</sup>	NA
Getting Care Quickly	Usually or Always	78	74.8%	83.8%	10 <sup>th</sup>	NA
SATISFACTION WITH PLAN PHYSICIANS						3
Rating of Personal Doctor	9 or 10	121	66.1%	71.1%	33 <sup>rd</sup>	3
SATISFACTION WITH PLAN AND PLAN SERVICES						3
Rating of Health Plan	9 or 10	174	59.7%	64.9%	33 <sup>rd</sup>	3
Rating of Health Care	9 or 10	103	56.3%	58.7%	33 <sup>rd</sup>	3
TREATMENT						
Smoking Advice: <i>Rolling Average</i>	Sometimes, Usually or Always	45	71.1%	75.4%	33 <sup>rd</sup>	NA

## EXPLANATION

NCQA calculates health plan ratings (HPR) by evaluating plans in three categories: consumer satisfaction, clinical quality (includes prevention and treatment) and NCQA Accreditation Standards score.

The overall NCQA star rating is the weighted average of an organization’s HEDIS and CAHPS measure ratings, plus Accreditation bonus points (if the organization has NCQA Accreditation), rounded to the nearest half point.

The CAHPS measures are classified based on their national percentile (10th, 33rd, 67th and 90th) into scores ranging from 1 to 5 (in increments of 0.5), where 5 is the highest score and 1 is the lowest.

Results are summarized in the table to the left. **Percentiles and ratings are estimated by PG** based on the 2023 NCQA data and benchmarks.

Rating = 1	Rating = 2	Rating = 3	Rating = 4	Rating = 5
<10 <sup>th</sup> Percentile	10 <sup>th</sup> – 32 <sup>nd</sup> Percentile	33 <sup>rd</sup> – 66 <sup>th</sup> Percentile	67 <sup>th</sup> – 89 <sup>th</sup> Percentile	≥90 <sup>th</sup> Percentile

### Notes:

- NCQA will assign a measure result of NA to overall ratings or composites with a denominator (i.e., the average number of responses across all questions used to calculate the composite) less than 100.
- Medicaid plans have the option to be scored on either Adult CAHPS or Child CAHPS data.

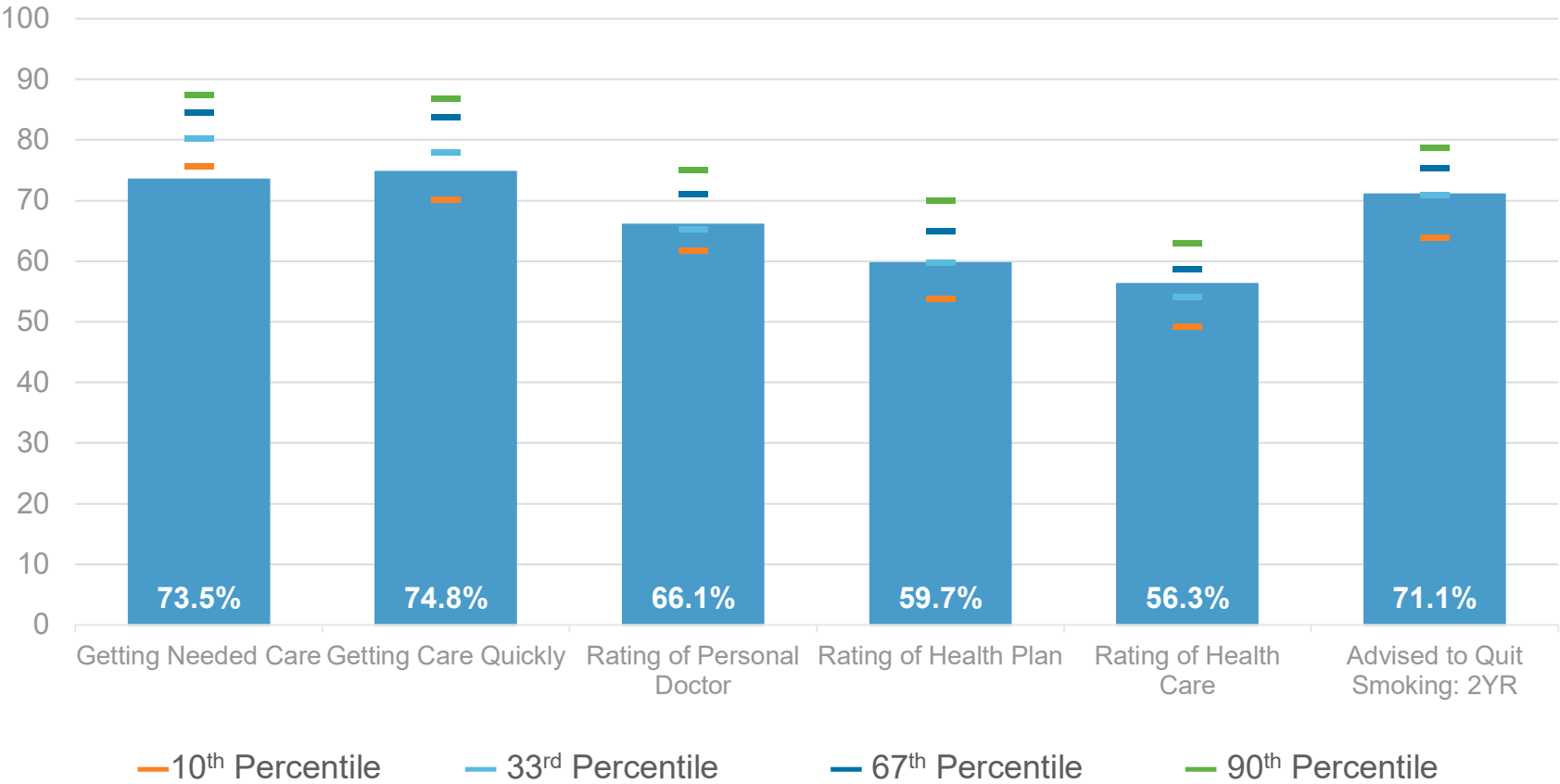
\*HPR scores are truncated to three digits (XX.X%) according to the NCQA calculation protocol for Health Plan Ratings. Please note that scores on this slide may differ slightly compared to scores found throughout the rest of the report.

# PERFORMANCE TO STAR CUT POINTS

MEDICAID ADULT

## COMPARISON TO QUALITY COMPASS CUT POINTS

The graph shows how your plan’s **Estimated Health Plan Rating (HPR) scores** used for accreditation ratings compare to the most recent Quality Compass thresholds published by NCQA (Fall 2023).



**Dark Blue** bar = Your plan’s performance is at or above the 67<sup>th</sup> percentile






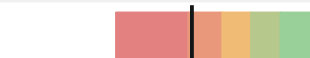
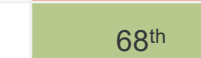
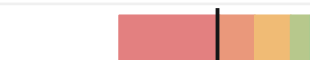
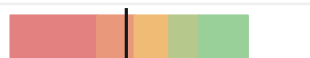

**Light Blue** bar = Your plan’s performance is below the 67<sup>th</sup> percentile

**HPR scores** are **truncated** to three digits (XX.X%) according to the NCQA calculation protocol for Health Plan Ratings. Please note that scores on this slide may differ slightly compared to scores found throughout the rest of the report.

\* Scores are % 9 or 10, % Always or Usually, and % Always, Usually or Sometimes (Smoking Advice: Rolling Average).

# MEASURE SUMMARY




MEDICAID ADULT

MEASURE	SUMMARY RATE		CHANGE	2024 PG BOOK OF BUSINESS BENCHMARK							
	2023	2024		PERCENTILE DISTRIBUTION				PERCENTILE RANK	BoB SRS		
				0	20	40	60	80	100		
Health Plan Domain											
Rating of Health Plan <i>% 9 or 10</i>	53.0%	59.8%	6.8							27 <sup>th</sup>	63.1%
Getting Needed Care <i>% Usually or Always</i>	75.2%	73.6%	-1.6							<5 <sup>th</sup>	82.1% ▼
Customer Service + <i>% Usually or Always</i>	88.7%	87.3%	-1.4							20 <sup>th</sup>	89.8%
Ease of Filling Out Forms + <i>% Usually or Always</i>	93.8%	92.9%	-0.9							15 <sup>th</sup>	94.8%
Health Care Domain											
Rating of Health Care <i>% 9 or 10</i>	40.0%	56.3% ↑	16.3							39 <sup>th</sup>	57.3%
Getting Care Quickly <i>% Usually or Always</i>	72.9%	74.9%	2.0							10 <sup>th</sup>	81.2%
How Well Doctors Communicate + <i>% Usually or Always</i>	87.5%	93.9%	6.4							68 <sup>th</sup>	93.2%
Coordination of Care + <i>% Usually or Always</i>	91.7%	78.3%	-13.4							7 <sup>th</sup>	86.0%
Rating of Personal Doctor <i>% 9 or 10</i>	63.5%	66.1%	2.6							22 <sup>nd</sup>	70.3%
Rating of Specialist + <i>% 9 or 10</i>	72.1%	63.1%	-9.0							15 <sup>th</sup>	68.5%

**Significance Testing** Current score is significantly higher/lower than the 2023 score (↑/↓) or benchmark score (▲/▼).

# MEASURE SUMMARY

MEDICAID ADULT

MEASURE	SUMMARY RATE		CHANGE	2024 PG BOOK OF BUSINESS BENCHMARK						
	2023	2024		PERCENTILE DISTRIBUTION					PERCENTILE RANK	BoB SRS
				0	20	40	60	80		
Effectiveness of Care										
Advised to Quit Smoking: 2YR <i>% Sometimes, Usually, or Always</i>	74.4%	71.1%	-3.3						42 <sup>nd</sup>	73.7%
Discussing Cessation Meds: 2YR + <i>% Sometimes, Usually, or Always</i>	57.8%	54.3%	-3.5						53 <sup>rd</sup>	53.4%
Discussing Cessation Strategies: 2YR + <i>% Sometimes, Usually, or Always</i>	53.3%	52.2%	-1.1						73 <sup>rd</sup>	47.1%

**Significance Testing** Current score is significantly higher/lower than the 2023 score (↑/↓) or benchmark score (▲/▼).



# HEALTH EQUITY

## MEDICAID ADULT

The infographic below highlights disparities in health equity among key demographic groups across the key metrics. Darker shading indicates a larger disparity.

Group is performing...

Above the plan score by 5 or more points

Above the plan score

Below the plan score

Below the plan score by 5 or more points

Above/below plan score but has low base (<30)

Accreditation Measure

Other Measure

# HEALTH EQUITY

## MEDICAID ADULT

Group is performing...

Above the plan score by 5 or more points

Above the plan score

Below the plan score

Below the plan score by 5 or more points

Above/below plan score but has low base (<30)

The infographic below highlights disparities in health equity among key demographic groups across the key metrics. Darker shading indicates a larger disparity.

Accreditation Measure

Other Measure

			Coordination of Care +	Customer Service +	How Well Doctors Communicate +	Ease of Filling Out Forms +
			SRS	SRS	SRS	SRS
			78.3%	87.3%	93.9%	92.9%
Gender	Male	n = 78				
	Female	n = 98				
Age	18 – 34	n = 34				
	35 – 44	n = 20				
	45 – 54	n = 37				
	55 or older	n = 85				
Overall Health	Excellent/Very Good	n = 61				
	Good	n = 63				
	Fair/Poor	n = 50				
Mental Health	Excellent/Very Good	n = 73				
	Good	n = 57				
	Fair/Poor	n = 42				
Education	HS Grad or less	n = 90				
	Some college or more	n = 81				
Race/ Ethnicity	White	n = 44				
	Black/African-American	n = 26				
	Asian	n = 64				
	Native Hawaiian/Pacific Islander	n = 1				
	American Indian or Alaska Native	n = 8				
	Other	n = 42				
	Hispanic/Latino	n = 60				

# MEASURE SUMMARY

MEDICAID ADULT

## TOP THREE Performing Measures

Your plan’s percentile rankings for these measures were the highest compared to the 2024 PG Book of Business.

MEASURE	2024 Valid n	PLAN SUMMARY RATE SCORE			2023 QC			2024 PG BoB		
		2023	2024	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
How Well Doctors Communicate + (% Usually or Always)	94^	87.5%	93.9%	6.4	92.5%	1.4	72 <sup>nd</sup>	93.2%	0.7	68 <sup>th</sup>
Rating of Health Care (% 9 or 10)	103	40.0%	56.3% ↑	16.3	55.7%	0.6	52 <sup>nd</sup>	57.3%	-1.0	39 <sup>th</sup>
Rating of Health Plan (% 9 or 10)	174	53.0%	59.8%	6.8	61.2%	-1.4	37 <sup>th</sup>	63.1%	-3.3	27 <sup>th</sup>

## BOTTOM THREE Performing Measures

Your plan’s percentile rankings for these measures were the lowest compared to the 2024 PG Book of Business.

MEASURE	2024 Valid n	PLAN SUMMARY RATE SCORE			2023 QC			2024 PG BoB		
		2023	2024	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Getting Care Quickly (% Usually or Always)	78^	72.9%	74.9%	2.0	80.4%	-5.5	17 <sup>th</sup>	81.2%	-6.3	10 <sup>th</sup>
Coordination of Care + (% Usually or Always)	46^	91.7%	78.3%	-13.4	84.6%	-6.3	8 <sup>th</sup>	86.0%	-7.7	7 <sup>th</sup>
Getting Needed Care (% Usually or Always)	85^	75.2%	73.6%	-1.6	81.0%	-7.4	5 <sup>th</sup>	82.1% ▼	-8.5	<5 <sup>th</sup>

**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓) or benchmark score (▲/▼).

^Denominator less than 100. NCQA will assign an NA to this measure.

# IMPROVEMENT STRATEGIES

## Improving Performance

These measures had the lowest percentile rankings in comparison to the 2024 PG Book of Business for your plan.

### Improvement Strategies – Getting Care Quickly

- Assess CAHPS data by health system, PO, and/or network. Communicate results and identify outliers. Correlate with HEDIS data, complaints, appeals and/or quality of care concerns, and communicate. Support and encourage providers to take innovative action to improve access.
- Support members and collaborate with providers to enhance routine and urgent access to care through innovative, proactive approaches within Care Management, Chronic Care, and Quality Management. Work with providers to identify and resolve opportunities.
- Discuss and engage providers/staff on scheduling best practices, how to improve access to routine/urgent care. Consider scheduling routine appointments well in advance, e.g., 12 months. Provide tools, resources, support and assessment.
- Support, encourage and assist in approaches toward open access scheduling. Allow a portion of each day open for urgent care and/or follow-up care.
- Contract with additional providers for urgent and after-hour appointments/availability.
- Explore partnering with 24-hour urgent care or walk-in clinics.
- Educate providers and staff about Plan and regulatory appointment wait time requirements or standards (i.e., CAHPS, CMS, States, etc.) . Identify opportunities for improvement.
- Provide members streamlined tools and resources (links, apps, etc.) about benefits, providers, referrals, scheduling appointments, etc. Identify options and hours available, and include alternatives, including practices with evening and weekend hours. Consider alternative sources of information, e.g., refrigerator magnets.
- Explore and support alternative telecommunication technologies to expand access to care: telephone, telehealth, telemedicine and patient portals.
- Encourage use of Nurse Hotline/Nurse on Call lines or live-chat via web for members to get health information and advice.

### Improvement Strategies – Coordination of Care

- Inform, support, remind and facilitate providers about coordination of care expectations, timely notification requirements, and standards of care for post-visit follow up to all PCPs. Explore options to encourage and support communications between specialists and PCPs.
- Develop on-going and timely reminders/messaging to promote and improve communication and reporting between all provider types, ideally based directly on available data/information.
- Assess the status and consistency of coordination of patient care, communication, and information shared within and across provider networks. Assure prompt feedback, standards.
- Support and facilitate a patient-centered care management approach within and across provider networks. Facilitate a complementary plan-based patient centered care management approach.
- Explore potential of aligning information flow/EHRs to better integrate, support or facilitate patient care, care coordination and vital medical and personal information among providers.
- Encourage providers to prompt patients AND patients to prompt providers, i.e., mutual interactions that review and discuss care, tests and/or treatments involving other providers.
- Encourage patients to bring a list of all medications, including dosage and frequency to all appointments. Encourage providers to prompt patients to do the same for their appointments.
- How do PCP's, providers, facilities and/or the plan assure common patient "touch points" to facilitate/support scheduling of appointments, tests and/or procedures? Where is the over-arching guidance and support for the patient/member?

### Improvement Strategies – Getting Needed Care

- Assess CAHPS data by health system, PO, and/or network. Communicate results and identify outliers. Evaluate with HEDIS data, complaints, appeals and/or quality of care concerns, and communicate. Identify issues, prioritize and implement improvement activities.
- Work with providers to support patients in navigating health care and remove obstacles. Support and encourage providers to take innovative action to improve access. Examples include: Serve patients quickly, treat urgent issues promptly, minimize wait times, follow-up about appointment times and test results. Another is to develop an in-depth referral/decision-making guide for PCP's to prepare for/with patients explaining need, urgency, patient expectations and responsibilities, and preparations for seeing a specialist.
- Support members and collaborate with providers to enhance access to care through innovative, proactive approaches within Care Management, Chronic Care, and Quality Management. Work with providers to identify and resolve opportunities.
- Continually assess, revisit and simplify plan requirements/processes (i.e., UM) impacting access to care, tests, or treatment. Seek opportunities to improve processes and procedures.
- Review and simplify precertification/auth/referral policies/procedures for both member and provider, including messages and communications. Cross-reference with complaints, concerns, and quality of care issues. Improve and clarify processes and communications.
- Evaluate and simplify member communications, assuring that members are clearly told why something is not approved. When appropriate, offer suggestions for next steps or alternatives.
- Ensure Customer Service representatives are able to accurately advise members of available alternatives for care, such as walk-in clinics, urgent care, specialists, labs, etc.
- Establish a specialist referral hotline for providers and members.

Full List of Improvement Strategies 

# KEY DRIVER ANALYSIS OF RATING OF HEALTH PLAN

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- Alameda Alliance for Health

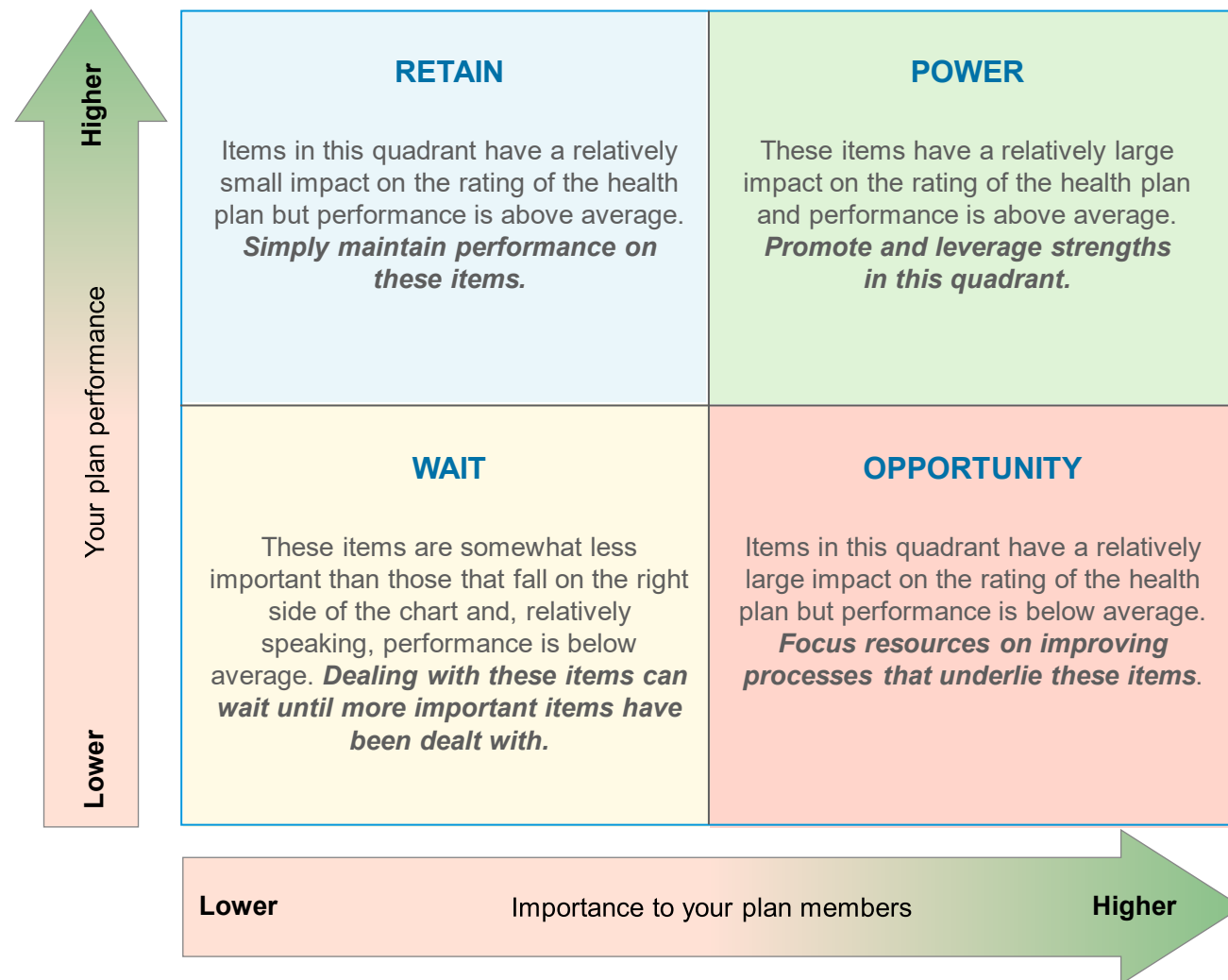
# POWeR CHART: EXPLANATION

## POWeR™ CHART CLASSIFICATION MATRIX

**Overview.** The SatisAction™ key driver statistical model is a powerful, proprietary statistical methodology used to identify the key drivers of the rating of the health plan and provide actionable direction for satisfaction improvement programs. This methodology is the result of a number of years of development and testing using health care satisfaction data. We have been successfully using this approach since 1997.

The model provides the following:

- Identification of the elements that are important in driving of the rating of the health plan.
- Measurement of the relative importance of each of these elements.
- Measurement of how well members think the plan performed on those important elements.
- Presentation of the importance/performance results in a matrix that provides clear direction for member satisfaction improvement efforts by the plan.



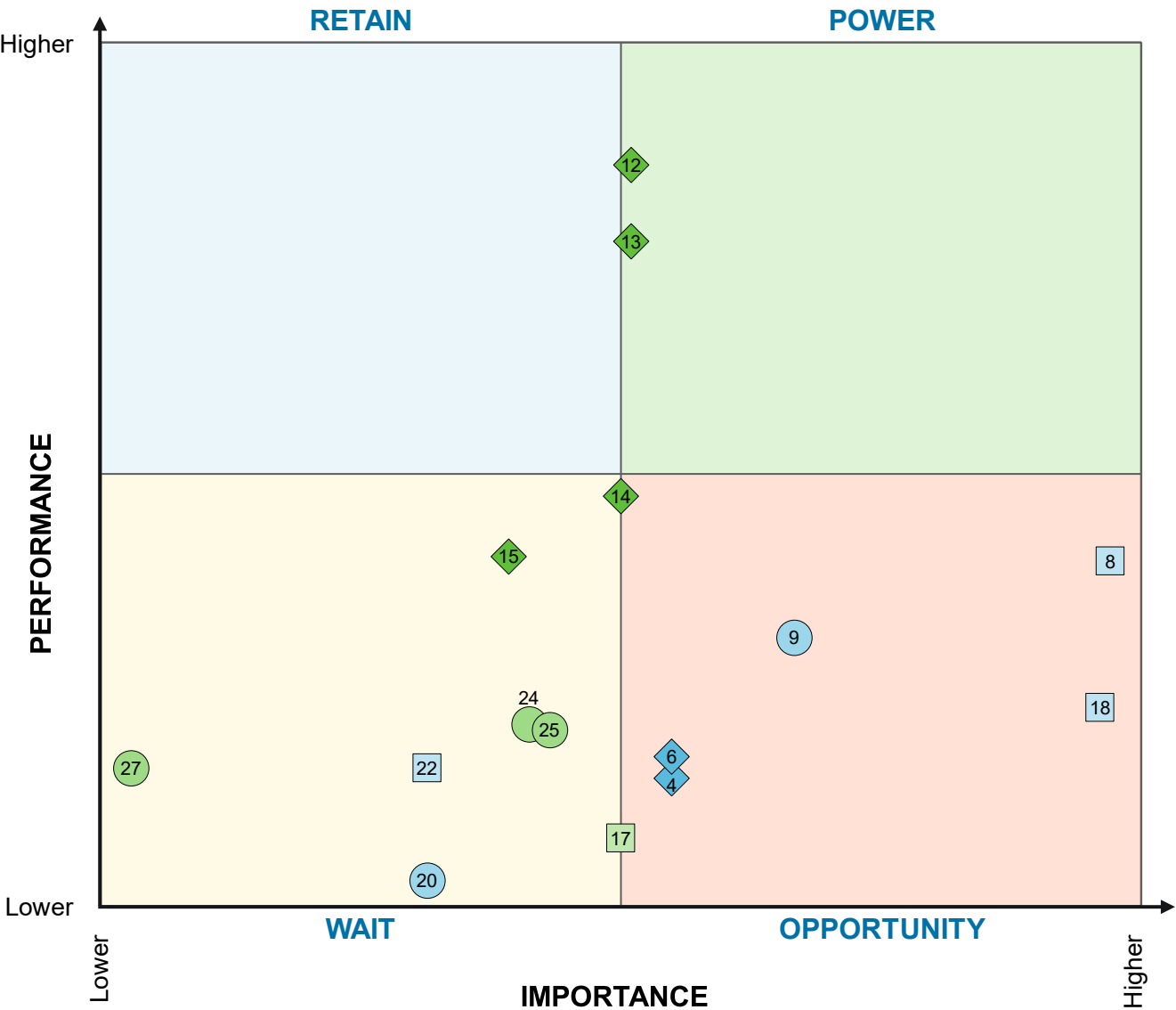
# POWER CHART: YOUR RESULTS

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SURVEY MEASURE			2023		2024	
			SRS	%tile*	SRS	%tile*
POWER						
◆ HWDC	Q12	Dr. explained things	82.3%	<5 <sup>th</sup>	95.8%	86 <sup>th</sup>
◆ HWDC	Q13	Dr. listened carefully	90.9%	21 <sup>st</sup>	94.7%	74 <sup>th</sup>
OPPORTUNITY						
■ Rating	Q8	Rating of Health Care	40.0%	<5 <sup>th</sup>	56.3%	39 <sup>th</sup>
■ Rating	Q18	Rating of Personal Doctor	63.5%	16 <sup>th</sup>	66.1%	22 <sup>nd</sup>
● GNC	Q9	Getting care, tests, or treatment	80.0%	18 <sup>th</sup>	83.3%	30 <sup>th</sup>
◆ GCQ	Q4	Getting urgent care	76.1%	12 <sup>th</sup>	76.8%	14 <sup>th</sup>
◆ GCQ	Q6	Getting routine care	69.7%	6 <sup>th</sup>	73.0%	16 <sup>th</sup>
◆ HWDC	Q14	Dr. showed respect	93.6%	30 <sup>th</sup>	94.7%	47 <sup>th</sup>
WAIT						
■ CC	Q17	Coordination of Care +	91.7%	94 <sup>th</sup>	78.3%	7 <sup>th</sup>
● CS	Q25	Treated with courtesy and respect	95.2%	47 <sup>th</sup>	93.0%	20 <sup>th</sup>
● CS	Q24	Provided information or help	82.3%	30 <sup>th</sup>	81.7%	20 <sup>th</sup>
◆ HWDC	Q15	Dr. spent enough time	83.1%	<5 <sup>th</sup>	90.5%	39 <sup>th</sup>
● GNC	Q20	Getting specialist appointment	70.3%	10 <sup>th</sup>	63.8%	<5 <sup>th</sup>
■ Rating	Q22	Rating of Specialist +	72.1%	82 <sup>nd</sup>	63.1%	15 <sup>th</sup>
● CS	Q27	Ease of Filling Out Forms +	93.8%	18 <sup>th</sup>	92.9%	15 <sup>th</sup>
RETAIN						

None

\*Percentiles based on the PG Book of Business of the listed year.



# KEY DRIVERS OF RATING OF HEALTH PLAN

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		ALIGNMENT <i>Are your key drivers typical of the industry?</i>	KEY DRIVER RANK		ATTRIBUTE		SUMMARY RATE SCORE		PG BoB %TILE*	CLASSIFICATION		
			YOUR PLAN	INDUSTRY			YOUR PLAN	INDUSTRY		2023	2024	
TOP 10 KEY DRIVERS					Q28	Rating of Health Plan	59.8%	63.1%	27 <sup>th</sup>	(+20)		
YOUR PLAN	These items have a relatively large impact on the Rating of Health Plan. <b>Leverage</b> these questions since they are important to your members and the Rating of Health Plan score for this plan. They are listed in descending order of importance for your plan.	✓	1	1	Q8	Rating of Health Care	56.3%	57.3%	39 <sup>th</sup>	(+39)	Opp.	Opp.
		✓	2	2	Q18	Rating of Personal Doctor	66.1%	70.3%	22 <sup>nd</sup>	(+6)	Opp.	Opp.
		✓	3	5	Q9	Getting care, tests, or treatment	83.3%	85.1%	30 <sup>th</sup>	(+12)	Wait	→ Opp.
		✓	4	6	Q4	Getting urgent care	76.8%	82.7%	14 <sup>th</sup>	(+2)	Wait	→ Opp.
		✓	5	4	Q6	Getting routine care	73.0%	79.7%	16 <sup>th</sup>	(+10)	Wait	→ Opp.
			6	13	Q12	Dr. explained things	95.8%	93.2%	86 <sup>th</sup>	(+86)	Opp.	→ Power
		✓	7	10	Q13	Dr. listened carefully	94.7%	93.3%	74 <sup>th</sup>	(+53)	Opp.	→ Power
INDUSTRY	PG Book of Business regression analysis has identified <b>Key Drivers</b> of Rating of Health Plan. The numbers represent the ranked importance across the entire Book of Business.		8	11	Q14	Dr. showed respect	94.7%	94.9%	47 <sup>th</sup>	(+17)	Opp.	Opp.
			9	14	Q17	Coordination of Care +	78.3%	86.0%	7 <sup>th</sup>	(-87)	Power	→ Wait
		✓	10	7	Q25	Treated with courtesy and respect	93.0%	94.8%	20 <sup>th</sup>	(-27)	Wait	Wait
			11	8	Q24	Provided information or help	81.7%	84.7%	20 <sup>th</sup>	(-10)	Wait	Wait
			13	9	Q20	Getting specialist appointment	63.8%	79.1%	<5 <sup>th</sup>	(-10)	Wait	Wait
All Industry scores & rankings are calculated based on the 2024 PG Book of Business. Any items below the dotted line are not in the top 10 key drivers.			14	3	Q22	Rating of Specialist +	63.1%	68.5%	15 <sup>th</sup>	(-67)	Power	→ Wait

All Industry scores & rankings are calculated based on the 2024 PG Book of Business. Any items below the dotted line are Top 10 industry key drivers that are not identified as key drivers for your plan.

\*Differentials are based on comparisons to your plan's prior year percentile rankings.



# MEASURE ANALYSES

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## Measure Details and Summary Rate Scores

- Alameda Alliance for Health

# SECTION INFORMATION

**Drilling Down Into Composites And Ratings** This section is designed to give your plan a detailed report on the performance of each Star Rating measure as well as a few other key metrics. The measure analysis section contains:

**Rating & Composite** level information including...

- Percentile ranking and benchmark performance
- Historic scores
- Market performance

**Attribute** level information for composites including...

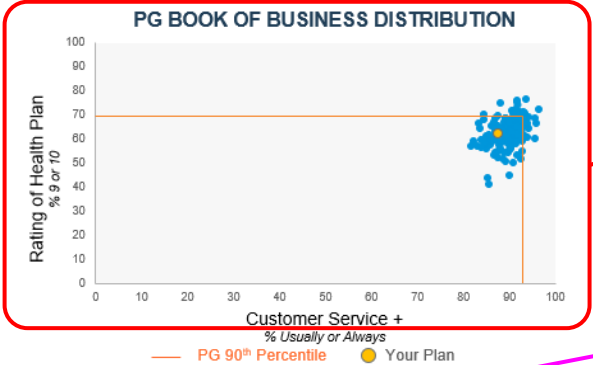
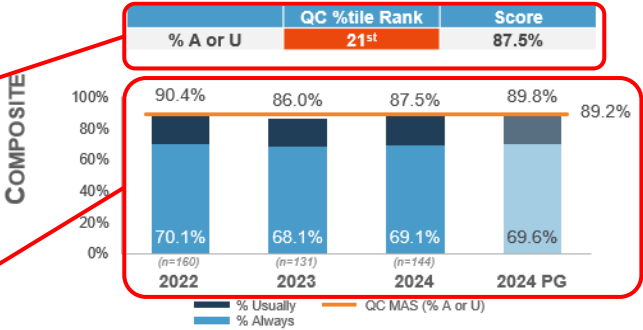
- Gate questions
- Percentile ranking and benchmark performance
- Summary rate score trending

All scores displayed in this section are summary rate scores (notated with 'SRS').

Percentile Bands		
≥90 <sup>th</sup>		
67 <sup>th</sup> – 89 <sup>th</sup>		
33 <sup>rd</sup> – 66 <sup>th</sup>		
10 <sup>th</sup> – 32 <sup>nd</sup>		
<10 <sup>th</sup>		

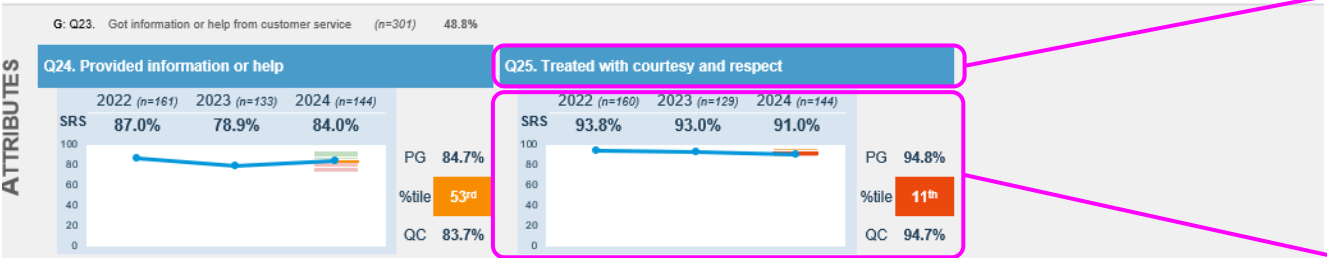
Your plan's performance ranking along with **Summary Rate Score** are displayed at the top for quick reference.

Your plan's current year **Summary Rate Score** and base size along with previous two years, PG BoB and Quality Compass national data are displayed.



Your plan's **Summary Rate Score** is plotted against the PG Book of Business to provide a visual representation of market performance. The orange line represents the PG 90<sup>th</sup> percentile.

Gate questions (indicated by "G:") for attributes are displayed above attributes – scores displayed are % Yes



For composites – all corresponding attributes that roll-up into the composite score are displayed:

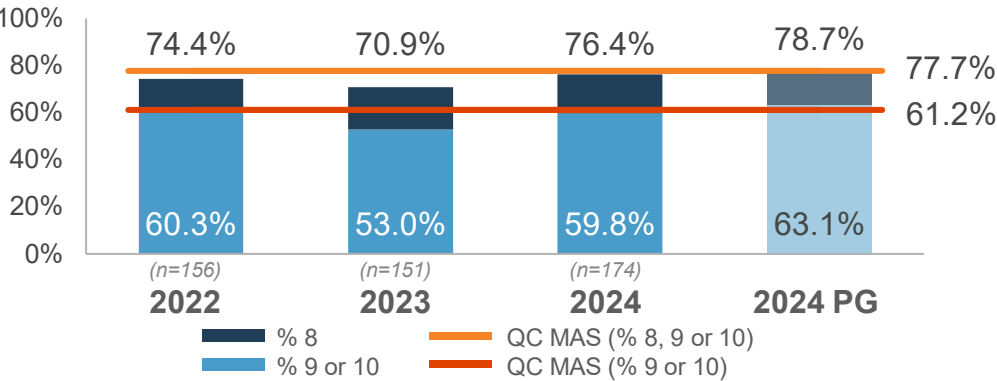
- Historic bases and **Summary Rate Scores** along with significant changes in trend notated
- Benchmark comparisons along with significant differences notated
- Percentile ranking against **Quality Compass**
- Graphic representation of trend and 2023 **Quality Compass** percentile bands

# RATINGS

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## RATING OF HEALTH PLAN

	QC %tile Rank	Score
% 8, 9 or 10	37 <sup>th</sup>	76.4%
% 9 or 10	37 <sup>th</sup>	59.8%



### Key Drivers Of The Rating Of The Health Plan

#### POWER

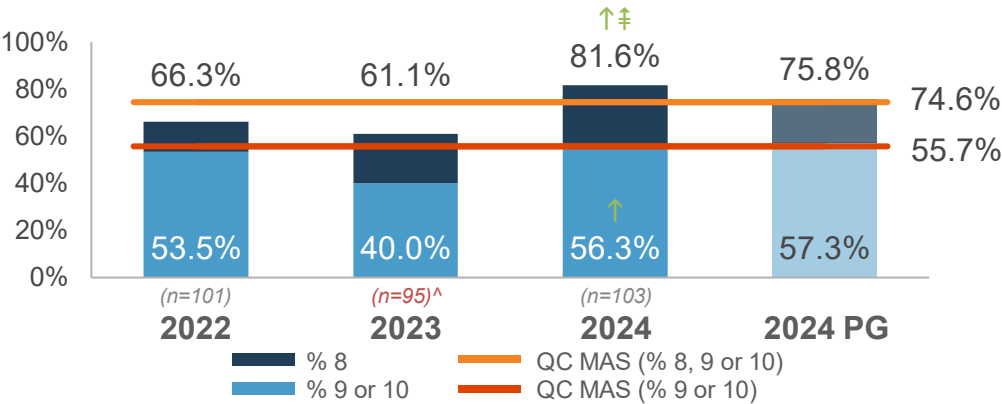
- Q12 Dr. explained things
- Q13 Dr. listened carefully

#### OPPORTUNITIES

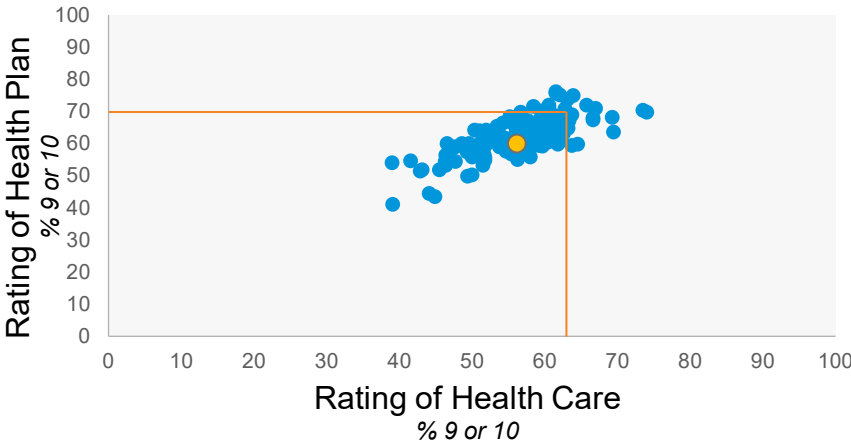
- Q8 Rating of Health Care
- Q18 Rating of Personal Doctor
- Q9 Getting care, tests, or treatment
- Q4 Getting urgent care
- Q6 Getting routine care
- Q14 Dr. showed respect

## RATING OF HEALTH CARE

	QC %tile Rank	Score
% 8, 9 or 10	94 <sup>th</sup>	81.6%
% 9 or 10	52 <sup>nd</sup>	56.3%



### PG BOOK OF BUSINESS DISTRIBUTION



PG 90<sup>th</sup> Percentile      Your Plan

**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼).

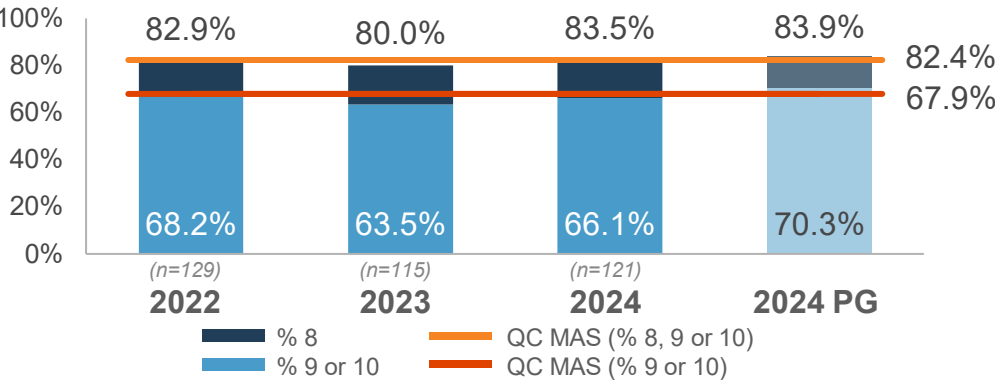
<sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.

# RATINGS

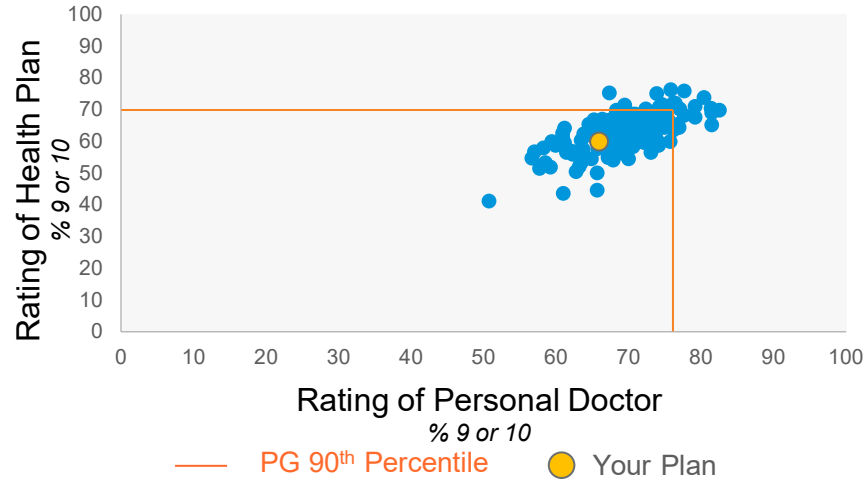
MEDICAID ADULT

## RATING OF PERSONAL DOCTOR

	QC %tile Rank	Score
% 8, 9 or 10	58 <sup>th</sup>	83.5%
% 9 or 10	37 <sup>th</sup>	66.1%



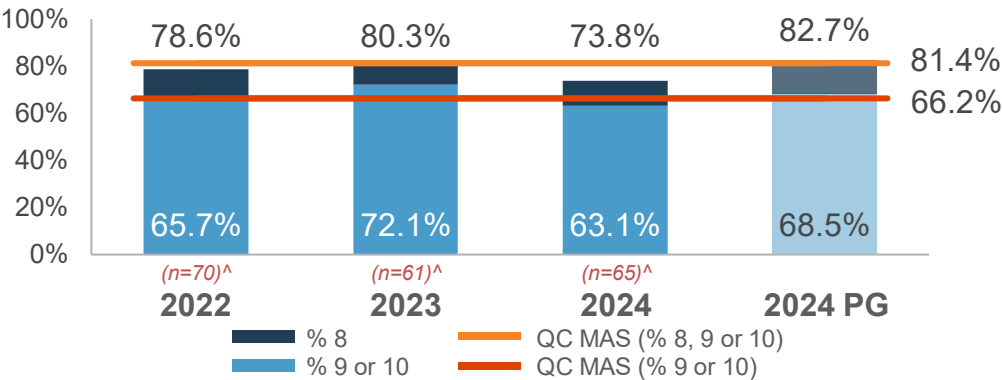
### PG BOOK OF BUSINESS DISTRIBUTION



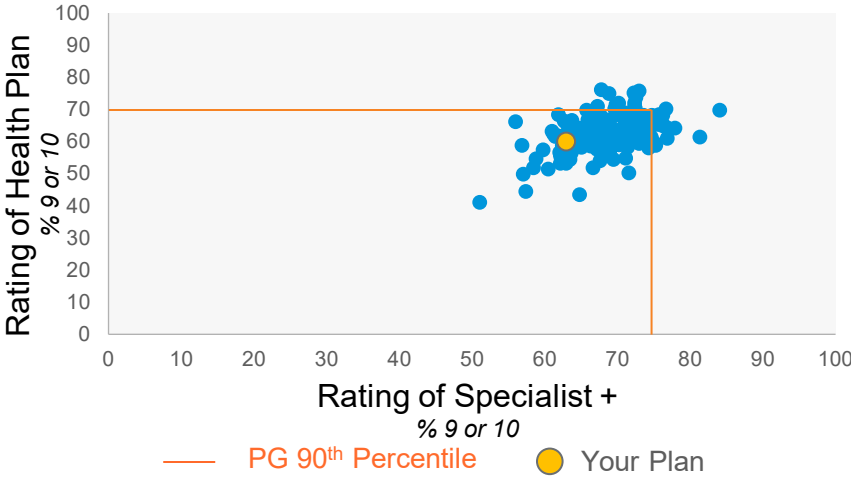
**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼).

## RATING OF SPECIALIST +

	QC %tile Rank	Score
% 8, 9 or 10	6 <sup>th</sup>	73.8%
% 9 or 10	22 <sup>nd</sup>	63.1%



### PG BOOK OF BUSINESS DISTRIBUTION



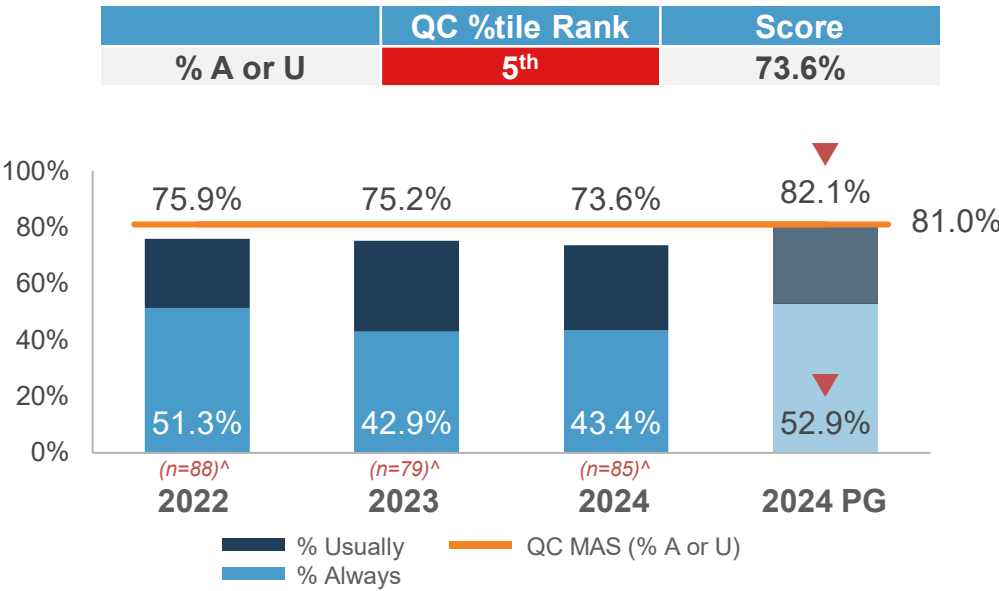
**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼).

<sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.

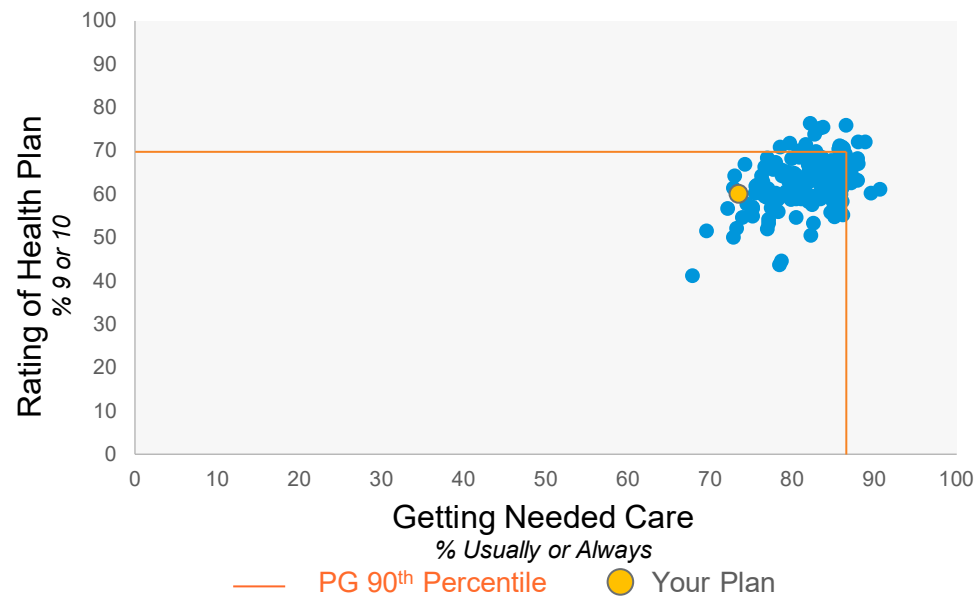
# GETTING NEEDED CARE

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COMPOSITE

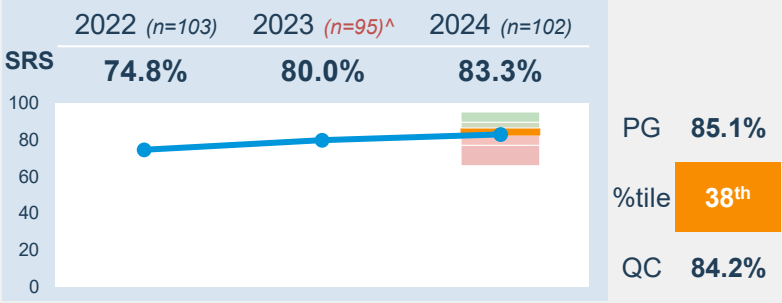


## PG BOOK OF BUSINESS DISTRIBUTION

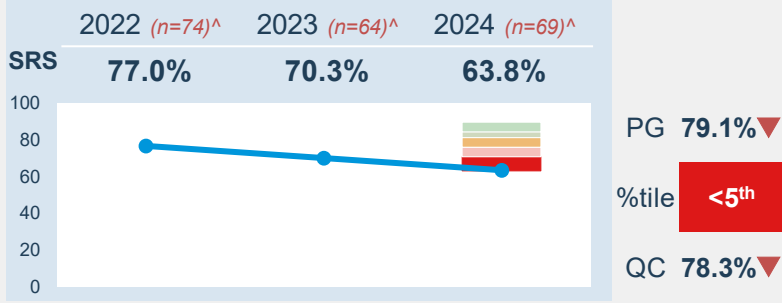


ATTRIBUTES

### Q9. Getting care, tests, or treatment



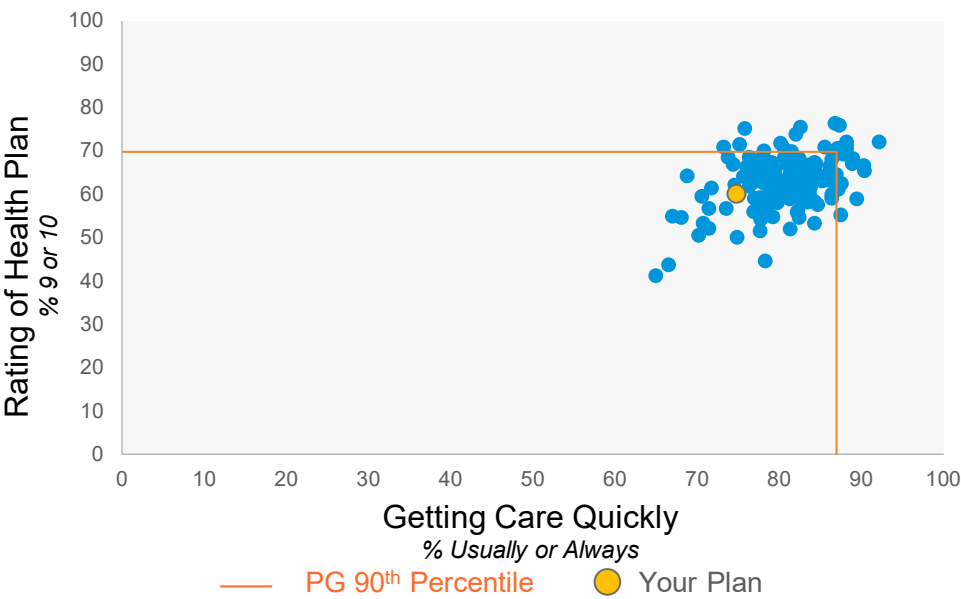
### Q20. Getting specialist appointment



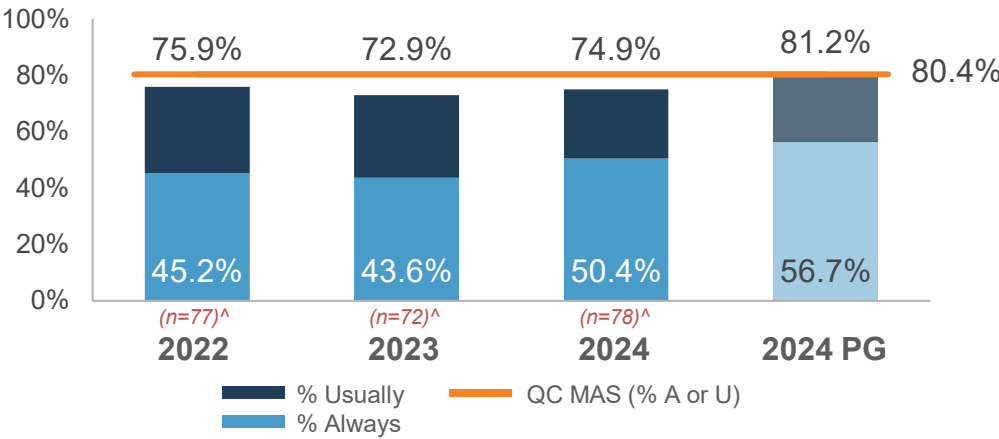
# GETTING CARE QUICKLY

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PG BOOK OF BUSINESS DISTRIBUTION



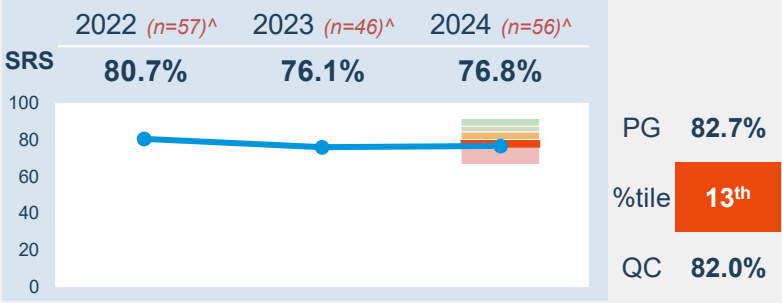
	QC %tile Rank	Score
% A or U	17 <sup>th</sup>	74.9%



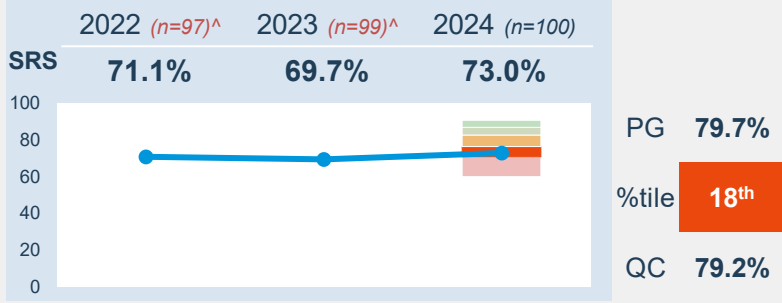
G: Q3. Had illness, injury or condition that needed care right away (n=179) 32.4%

G: Q5. Made appointments for check-ups or routine care at doctor's office or clinic (n=177) 58.2%

Q4. Getting urgent care



Q6. Getting routine care



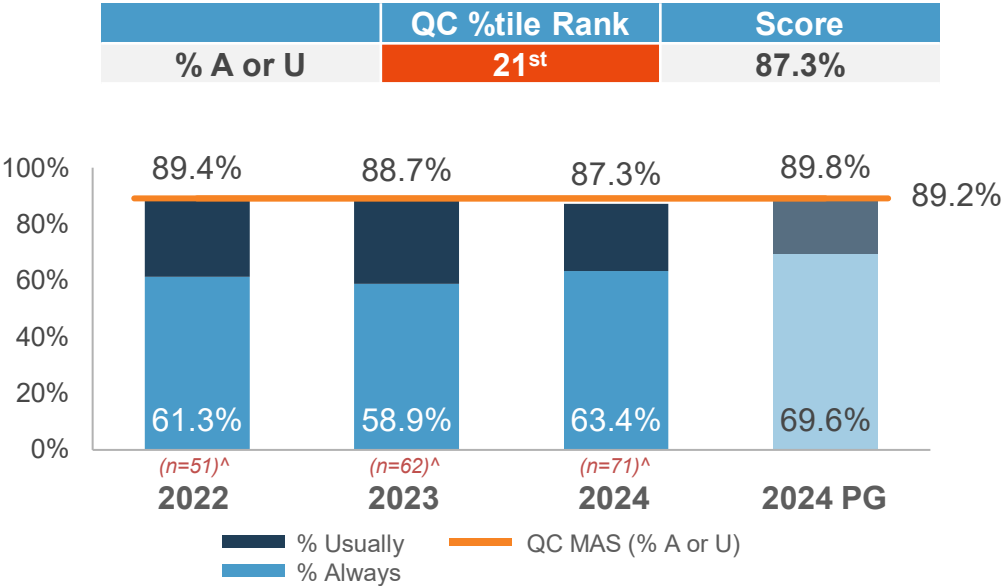
Significance Testing: Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼).

^Denominator less than 100. NCQA will assign an NA to this measure.

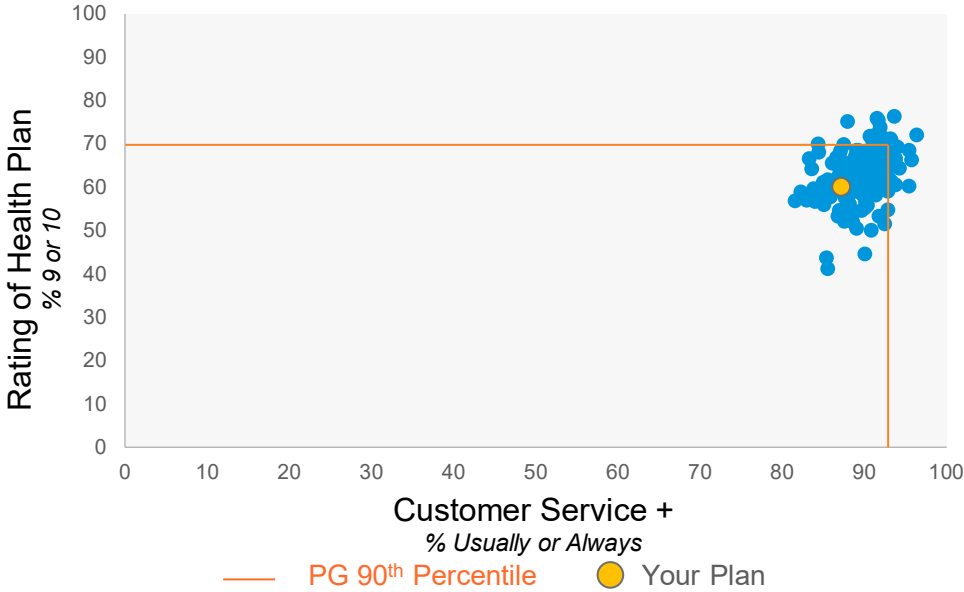
# CUSTOMER SERVICE +

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COMPOSITE



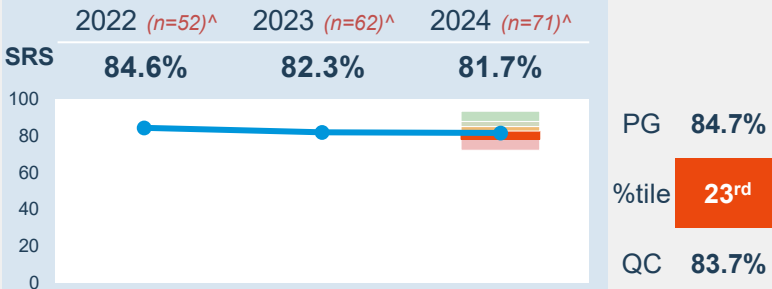
## PG BOOK OF BUSINESS DISTRIBUTION



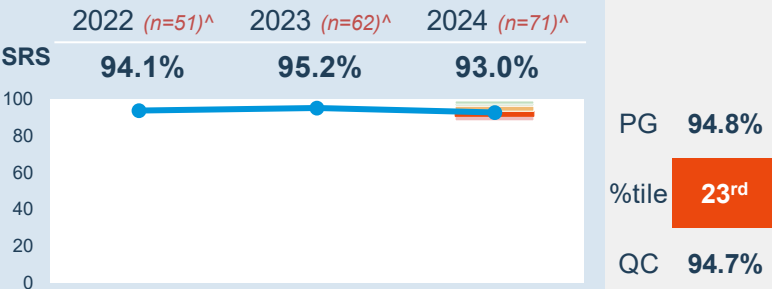
G: Q23. Got information or help from customer service (n=176) 42.0%

ATTRIBUTES

### Q24. Provided information or help



### Q25. Treated with courtesy and respect



**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼).

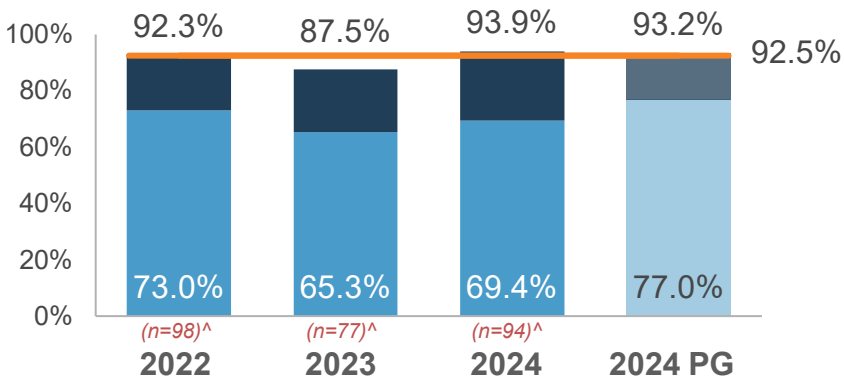
**^Denominator less than 100. NCQA will assign an NA to this measure.**

# How Well Doctors Communicate +

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## COMPOSITE

	QC %tile Rank	Score
% A or U	72 <sup>nd</sup>	93.9%

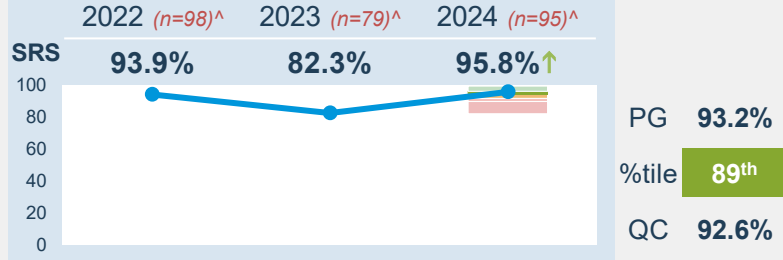


## PG BOOK OF BUSINESS DISTRIBUTION

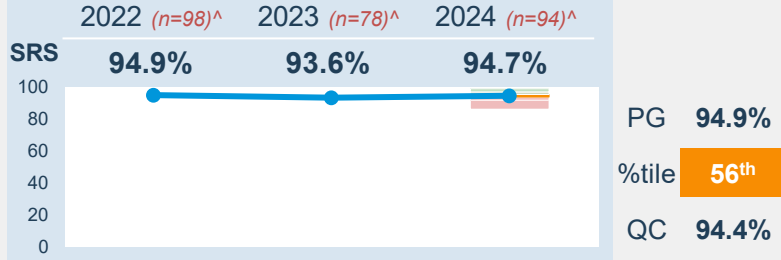


## ATTRIBUTES

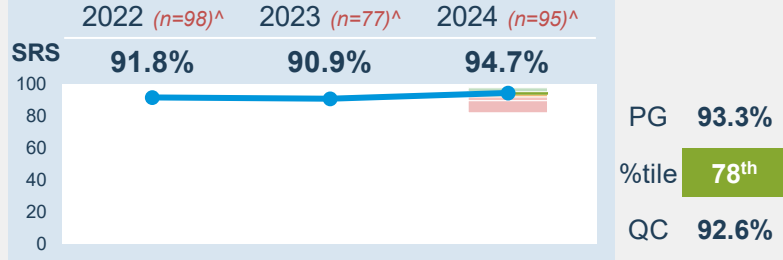
### Q12. Dr. explained things



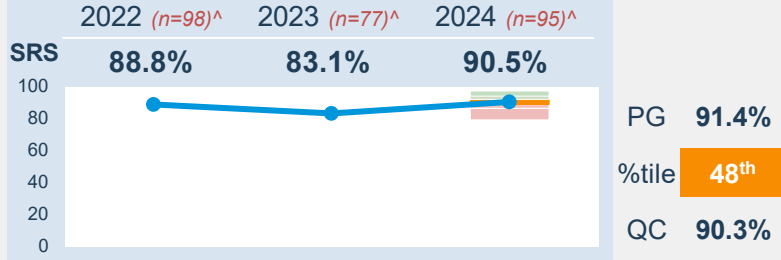
### Q14. Dr. showed respect



### Q13. Dr. listened carefully



### Q15. Dr. spent enough time



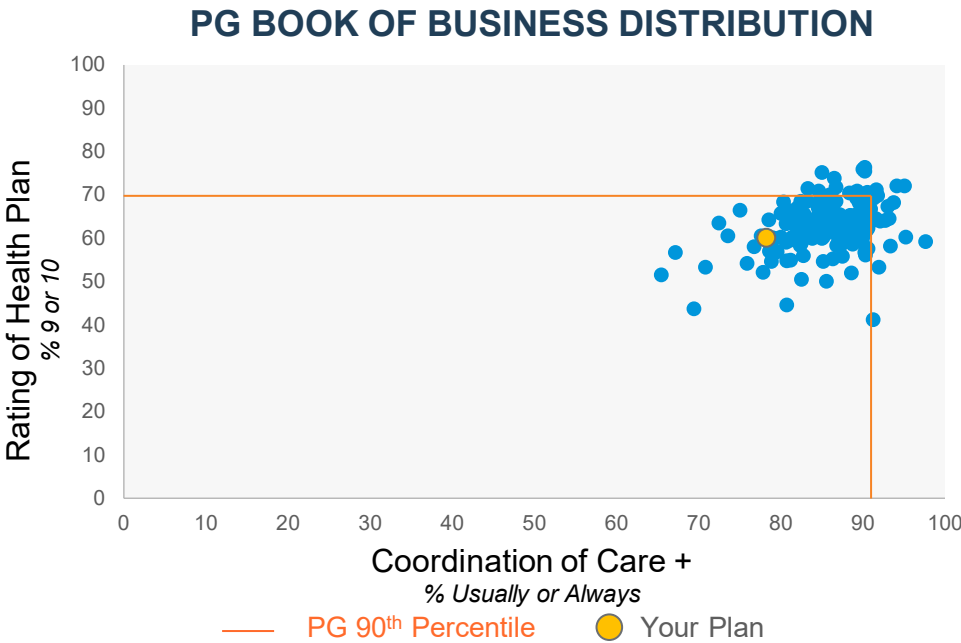
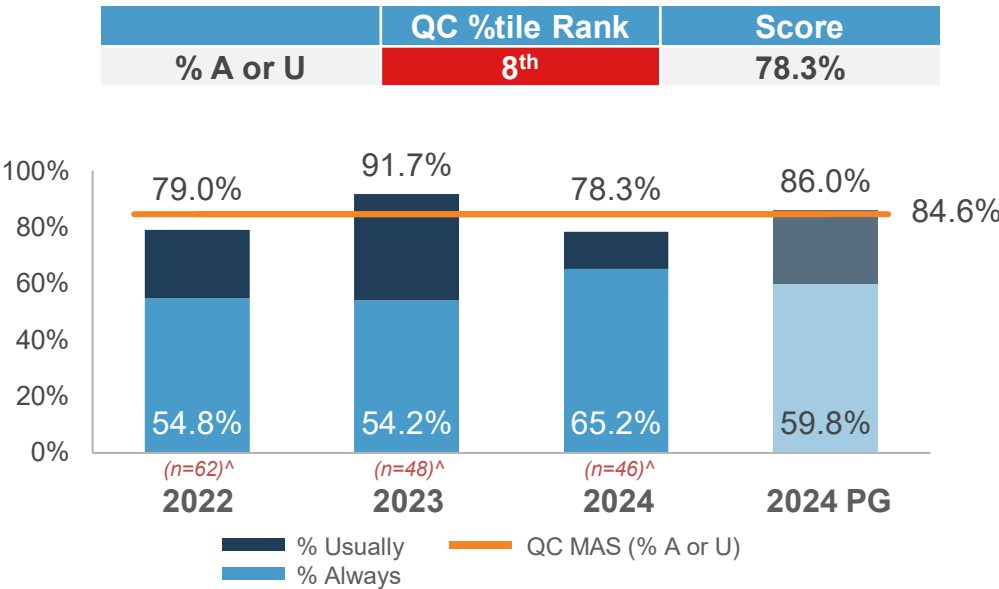
**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼).

<sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.



# COORDINATION OF CARE +

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# SUMMARY OF TREND AND BENCHMARKS

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- Alameda Alliance for Health

# SECTION INFORMATION

**Trend and Benchmark Comparisons** The CAHPS® 5.1H survey is designed to use composite scores to facilitate the aggregation of information and the communication of results. Questions are combined into composite categories comprising a particular service area managed by your plan. These composites, the questions that make up composites (attributes), additional measures, and rating questions are shown on the following pages.

Summary Rate Scores: Shows how your plan's composite and key question Summary Rates compare to trend data (if applicable) and benchmark scores. To help you identify how your plan's population compares to other plans and to previous data, statistically significant differences are highlighted.

Plan Percentile Rankings: Shows your plan's Summary Rates and percentile rankings in relation to the benchmarks.

## Significance Testing

**Green** – Current year score is significantly higher than the 2023 score (↑), the 2022 score (⬆) or benchmark score (▲).

**Red** – Current year score is significantly lower than the 2023 score (↓), the 2022 score (⬆) or benchmark score (▼).

No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% confidence level.

# BENCHMARK INFORMATION

<div>Available Benchmarks</div> <div>The following benchmarks are used throughout the report.</div>			
	2023 Quality Compass® All Plans	2023 NCQA 1-100 Benchmark	2024 Press Ganey Book of Business
	Includes all Medicaid Adult samples that submitted data to NCQA in 2023.	A percentile benchmark (with values ranging from the first through the one hundredth percentile) calculated by NCQA and derived from Medicaid Adult data submitted to NCQA in 2023.	Includes all Medicaid samples that contracted with Press Ganey to administer the MY 2023 CAHPS 5.1H survey and submitted data to NCQA.
PROS	<ul style="list-style-type: none"><li>Is presented in NCQA's The State of Health Care Quality</li></ul>	<ul style="list-style-type: none"><li>Utilized by Press Ganey to calculate approximate percentile ranking of plan scores in relation to the Quality Compass® All Plans benchmark</li></ul>	<ul style="list-style-type: none"><li>Provides a benchmark for each question from the survey</li><li>Permits precise percentile ranking of plan compared to benchmark</li></ul>
CONS	<ul style="list-style-type: none"><li>Only contains benchmarks for certain key questions, composites, and rating questions</li></ul>	<ul style="list-style-type: none"><li>Only contains benchmarks for certain key questions, composites, and rating questions</li></ul>	<ul style="list-style-type: none"><li>Contains fewer plans than the Quality Compass® All Plans Benchmarks</li></ul>
SIZE	189 Plans	189 Plans	174 Plans / 43,077 Respondents

# SUMMARY RATE SCORES

## MEDICAID ADULT

	2024 Valid n	2022	2023	2024	2024 PG BoB	2023 QC
<b>Rating Questions (% 9 or 10)</b>						
★ Q28. Rating of Health Plan	174	60.3%	53.0%	59.8%	63.1%	61.2%
★ Q8. Rating of Health Care	103	53.5%	40.0%	56.3% ↑	57.3%	55.7%
★ Q18. Rating of Personal Doctor	121	68.2%	63.5%	66.1%	70.3%	67.9%
Q22. Rating of Specialist +	65^	65.7%	72.1%	63.1%	68.5%	66.2%
<b>Rating Questions (% 8, 9 or 10)</b>						
Q28. Rating of Health Plan	174	74.4%	70.9%	76.4%	78.7%	77.7%
Q8. Rating of Health Care	103	66.3%	61.1%	81.6% ↑#	75.8%	74.6%
Q18. Rating of Personal Doctor	121	82.9%	80.0%	83.5%	83.9%	82.4%
Q22. Rating of Specialist +	65^	78.6%	80.3%	73.8%	82.7%	81.4%
★ <b>Getting Needed Care (% Usually or Always)</b>	85^	75.9%	75.2%	73.6%	82.1% ▼	81.0%
Q9. Getting care, tests, or treatment	102	74.8%	80.0%	83.3%	85.1%	84.2%
Q20. Getting specialist appointment	69^	77.0%	70.3%	63.8%	79.1% ▼	78.3% ▼
★ <b>Getting Care Quickly (% Usually or Always)</b>	78^	75.9%	72.9%	74.9%	81.2%	80.4%
Q4. Getting urgent care	56^	80.7%	76.1%	76.8%	82.7%	82.0%
Q6. Getting routine care	100	71.1%	69.7%	73.0%	79.7%	79.2%
<b>Effectiveness of Care (% Sometimes, Usually, or Always)</b>						
★ Q32. Advised to Quit Smoking: 2YR	45^	71.1%	74.4%	71.1%	73.7%	72.8%
Q33. Discussing Cessation Meds: 2YR +	46^	50.0%	57.8%	54.3%	53.4%	51.2%
Q34. Discussing Cessation Strategies: 2YR +	46^	50.0%	53.3%	52.2%	47.1%	45.4%

**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼).

^Denominator less than 100. NCQA will assign an NA to this measure.

# SUMMARY RATE SCORES

MEDICAID ADULT

	2024 Valid n	2022	2023	2024	2024 PG BoB	2023 QC
<b>Customer Service + (% Usually or Always)</b>	<b>71^</b>	<b>89.4%</b>	<b>88.7%</b>	<b>87.3%</b>	<b>89.8%</b>	<b>89.2%</b>
Q24. Provided information or help	71^	84.6%	82.3%	81.7%	84.7%	83.7%
Q25. Treated with courtesy and respect	71^	94.1%	95.2%	93.0%	94.8%	94.7%
<b>How Well Doctors Communicate + (% Usually or Always)</b>	<b>94^</b>	<b>92.3%</b>	<b>87.5%</b>	<b>93.9%</b>	<b>93.2%</b>	<b>92.5%</b>
Q12. Dr. explained things	95^	93.9%	82.3%	95.8% ↑	93.2%	92.6%
Q13. Dr. listened carefully	95^	91.8%	90.9%	94.7%	93.3%	92.6%
Q14. Dr. showed respect	94^	94.9%	93.6%	94.7%	94.9%	94.4%
Q15. Dr. spent enough time	95^	88.8%	83.1%	90.5%	91.4%	90.3%
<b>Q17. Coordination of Care +</b>	<b>46^</b>	<b>79.0%</b>	<b>91.7%</b>	<b>78.3%</b>	<b>86.0%</b>	<b>84.6%</b>
<b>Q27. Ease of Filling Out Forms + (% Usually or Always)</b>	<b>169</b>	<b>94.3%</b>	<b>93.8%</b>	<b>92.9%</b>	<b>94.8%</b>	<b>95.4%</b>

**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼).

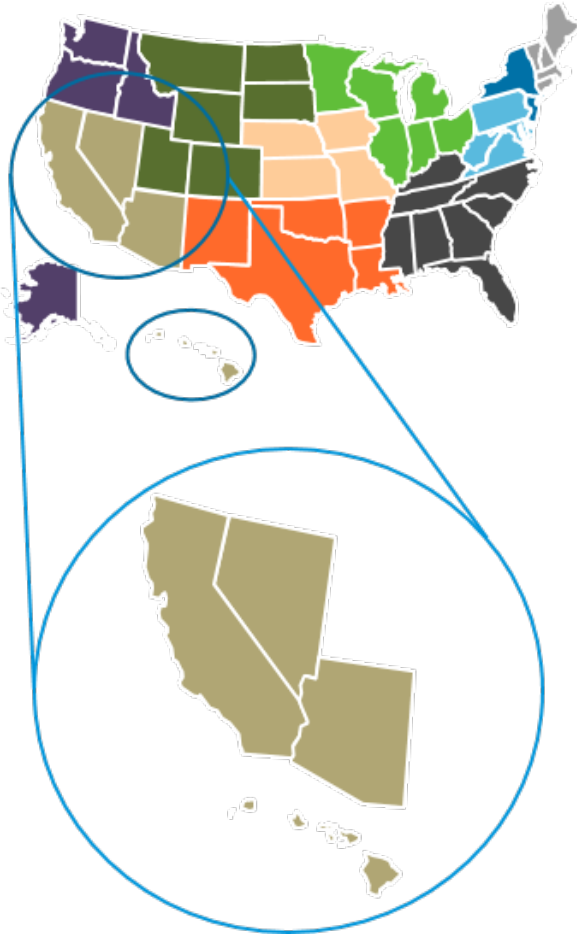
**^Denominator less than 100. NCQA will assign an NA to this measure.**

# REGIONAL PERFORMANCE

MEDICAID ADULT

	SUMMARY RATE	2024 PG BoB REGION
Rating Questions (% 9 or 10)		
★ Q28. Rating of Health Plan	59.8%	60.4%
★ Q8. Rating of Health Care	56.3%	53.4%
★ Q18. Rating of Personal Doctor	66.1%	66.8%
Q22. Rating of Specialist +	63.1%	67.0%
Rating Questions (% 8, 9 or 10)		
Q28. Rating of Health Plan	76.4%	76.4%
Q8. Rating of Health Care	81.6%	72.4% <span>◆</span>
Q18. Rating of Personal Doctor	83.5%	82.4%
Q22. Rating of Specialist +	73.8%	81.5%
★ Getting Needed Care (% Usually or Always)	73.6%	77.1%
Q9. Getting care, tests, or treatment	83.3%	80.2%
Q20. Getting specialist appointment	63.8%	74.0%
★ Getting Care Quickly (% Usually or Always)	74.9%	74.9%
Q4. Getting urgent care	76.8%	76.6%
Q6. Getting routine care	73.0%	73.2%
Effectiveness of Care (% Sometimes, Usually, or Always)		
★ Q32. Advised to Quit Smoking: 2YR	71.1%	66.7%
Q33. Discussing Cessation Meds: 2YR +	54.3%	47.0%
Q34. Discussing Cessation Strategies: 2YR +	52.2%	40.2%

**HHS Regions:** The regions used align with the U.S. Department of Health and Human Services regions.



- Region 9: San Francisco**
- American Samoa (not shown)
  - California
  - Hawaii
  - Arizona
  - Guam (not shown)
  - Nevada

Significance Testing

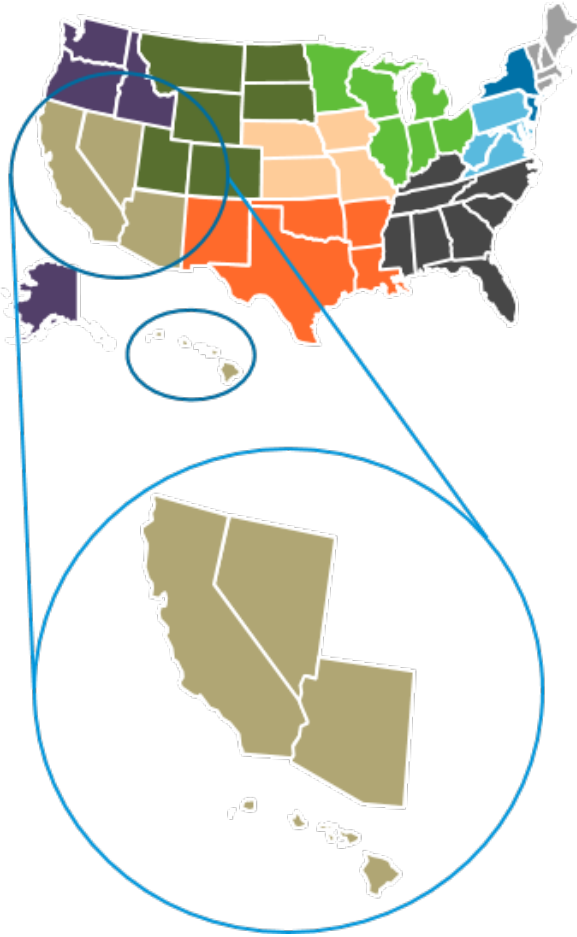
Current year score is significantly higher/lower (◆/◆) than the 2024 PG BoB Region score.

# REGIONAL PERFORMANCE

MEDICAID ADULT

	SUMMARY RATE	2024 PG BoB REGION
<b>Customer Service + (% Usually or Always)</b>	<b>87.3%</b>	<b>88.4%</b>
Q24. Provided information or help	81.7%	83.4%
Q25. Treated with courtesy and respect	93.0%	93.3%
<b>How Well Doctors Communicate + (% Usually or Always)</b>	<b>93.9%</b>	<b>91.9%</b>
Q12. Dr. explained things	95.8%	91.9%
Q13. Dr. listened carefully	94.7%	92.2%
Q14. Dr. showed respect	94.7%	93.8%
Q15. Dr. spent enough time	90.5%	89.5%
<b>Q17. Coordination of Care +</b>	<b>78.3%</b>	<b>81.4%</b>
<b>Q27. Ease of Filling Out Forms + (% Usually or Always)</b>	<b>92.9%</b>	<b>93.6%</b>

**HHS Regions:** The regions used align with the U.S. Department of Health and Human Services regions.



- Region 9: San Francisco**
- American Samoa (not shown)
  - California
  - Hawaii
  - Arizona
  - Guam (not shown)
  - Nevada

**Significance Testing**

Current year score is significantly higher/lower (🍀/🍁) than the 2024 PG BoB Region score.



# PERCENTILE RANKINGS

MEDICAID ADULT

		2024 Plan Score	QC %tile	National Percentiles from 2023 Quality Compass								PG %tile	National Percentiles from 2024 PG Book of Business									
				5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>		95 <sup>th</sup>	5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>
Rating Questions (% 9 or 10)																						
★	Q28. Rating of Health Plan	59.8%	37 <sup>th</sup>	49.1	52.7	57.9	59.3	61.8	64.0	65.4	68.7	70.1	27 <sup>th</sup>	53.0	55.5	59.5	60.3	63.2	65.1	66.7	69.8	71.4
★	Q8. Rating of Health Care	56.3%	52 <sup>nd</sup>	44.1	48.0	52.3	53.4	56.0	58.3	59.0	62.5	64.7	39 <sup>th</sup>	46.1	49.0	54.1	55.3	57.7	59.6	60.6	63.0	64.8
★	Q18. Rating of Personal Doctor	66.1%	37 <sup>th</sup>	59.8	61.8	64.2	65.4	68.2	70.6	71.9	74.0	75.8	22 <sup>nd</sup>	59.9	62.4	66.8	67.5	69.8	72.1	73.3	76.1	77.7
	Q22. Rating of Specialist +	63.1%	22 <sup>nd</sup>	57.6	60.6	63.4	64.5	66.4	68.3	68.9	72.3	73.3	15 <sup>th</sup>	60.4	62.2	64.8	66.3	68.5	70.9	72.0	74.7	76.3
Rating Questions (% 8, 9 or 10)																						
	Q28. Rating of Health Plan	76.4%	37 <sup>th</sup>	69.6	71.2	74.7	76.0	77.7	79.9	80.9	83.7	85.9	28 <sup>th</sup>	69.7	72.9	75.5	76.9	78.6	80.2	81.7	83.8	86.5
	Q8. Rating of Health Care	81.6%	94 <sup>th</sup>	66.7	69.4	72.3	73.1	74.8	76.5	77.7	79.9	82.4	89 <sup>th</sup>	67.0	68.3	72.2	73.5	76.0	78.1	79.1	81.6	82.9
	Q18. Rating of Personal Doctor	83.5%	58 <sup>th</sup>	75.8	77.9	80.4	81.5	82.7	84.3	84.9	86.9	87.4	43 <sup>rd</sup>	77.1	78.6	80.9	81.8	83.9	85.3	86.0	88.3	89.9
	Q22. Rating of Specialist +	73.8%	6 <sup>th</sup>	73.2	75.1	78.6	80.1	81.7	83.3	84.4	86.6	87.6	<5 <sup>th</sup>	75.8	77.1	79.4	80.9	83.2	84.6	85.4	87.3	88.5
★	Getting Needed Care (% U/A)	73.6%	5 <sup>th</sup>	73.5	75.0	77.8	79.8	81.7	83.1	84.5	86.5	87.2	<5 <sup>th</sup>	73.7	75.6	78.7	80.0	82.5	84.4	85.2	86.6	87.3
	Q9. Getting care, tests, or treatment	83.3%	38 <sup>th</sup>	75.6	77.2	81.4	82.7	84.6	86.7	87.4	89.7	91.0	30 <sup>th</sup>	77.5	79.2	82.3	83.6	85.2	87.0	87.7	89.7	91.1
	Q20. Getting specialist appointment	63.8%	<5 <sup>th</sup>	69.9	70.9	74.1	76.1	78.9	81.5	82.4	84.6	85.1	<5 <sup>th</sup>	68.3	70.7	75.0	77.1	79.6	81.9	82.7	85.1	86.8
★	Getting Care Quickly (% U/A)	74.9%	17 <sup>th</sup>	69.5	73.4	76.0	77.7	81.5	83.8	84.9	86.9	87.8	10 <sup>th</sup>	71.3	74.7	78.0	79.2	81.9	83.1	83.7	87.0	88.2
	Q4. Getting urgent care	76.8%	13 <sup>th</sup>	72.6	76.1	79.1	80.3	83.0	84.4	84.9	87.6	88.6	14 <sup>th</sup>	72.0	75.6	79.7	80.6	83.3	85.0	85.9	88.9	90.7
	Q6. Getting routine care	73.0%	18 <sup>th</sup>	68.6	70.9	74.8	76.7	80.0	82.9	83.8	86.9	88.1	16 <sup>th</sup>	68.6	71.2	75.9	77.3	80.4	82.3	83.6	86.7	87.8
Effectiveness of Care (% S/U/A)																						
★	Q32. Advised to Quit Smoking: 2YR	71.1%	36 <sup>th</sup>	60.9	65.1	68.7	70.6	73.0	75.0	76.9	80.4	82.8	42 <sup>nd</sup>	57.4	61.0	66.7	69.4	73.1	76.6	78.9	84.5	88.9
	Q33. Discussing Cessation Meds: 2YR +	54.3%	68 <sup>th</sup>	39.1	40.6	46.3	48.0	50.4	53.9	55.2	61.4	64.6	53 <sup>rd</sup>	33.3	38.2	45.7	48.1	53.6	57.5	59.9	64.8	68.6
	Q34. Discussing Cessation Strategies: 2YR +	52.2%	84 <sup>th</sup>	34.7	37.1	40.0	41.2	46.4	49.1	50.3	54.0	56.2	73 <sup>rd</sup>	30.6	34.1	40.0	41.5	46.2	50.0	52.4	58.8	65.9

# PERCENTILE RANKINGS

MEDICAID ADULT

	2024 Plan Score	QC %tile	National Percentiles from 2023 Quality Compass									PG %tile	National Percentiles from 2024 PG Book of Business								
			5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>		5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>
Customer Service + (% U/A)	87.3%	21 <sup>st</sup>	83.1	84.5	88.1	88.7	89.6	90.4	91.1	91.9	93.5	20 <sup>th</sup>	84.5	85.6	87.7	88.7	90.1	91.3	91.9	92.9	93.8
Q24. Provided information or help	81.7%	23 <sup>rd</sup>	76.4	78.2	82.0	82.8	83.8	85.3	86.2	88.1	89.5	20 <sup>th</sup>	76.8	79.0	82.2	83.2	85.2	86.9	87.5	89.4	90.9
Q25. Treated with courtesy and respect	93.0%	23 <sup>rd</sup>	90.3	91.0	93.0	93.7	95.4	96.3	96.7	97.4	97.7	20 <sup>th</sup>	90.6	91.5	93.3	93.9	95.0	96.0	96.5	97.6	98.2
How Well Doctors Communicate + (% U/A)	93.9%	72 <sup>nd</sup>	87.8	90.2	91.4	91.7	92.7	93.6	94.0	95.1	95.8	68 <sup>th</sup>	89.4	90.4	91.8	92.3	93.0	93.9	94.6	95.6	96.1
Q12. Dr. explained things	95.8%	89 <sup>th</sup>	86.9	89.8	91.1	91.7	92.7	93.9	94.6	95.9	96.6	86 <sup>th</sup>	89.1	89.7	91.1	92.0	93.3	94.5	95.0	96.0	96.2
Q13. Dr. listened carefully	94.7%	78 <sup>th</sup>	88.4	89.7	91.5	92.2	92.7	93.7	94.3	95.4	95.9	74 <sup>th</sup>	88.8	90.2	92.0	92.5	93.4	94.2	94.7	95.9	96.4
Q14. Dr. showed respect	94.7%	56 <sup>th</sup>	91.2	91.9	93.4	93.8	94.5	95.3	95.6	96.9	97.5	47 <sup>th</sup>	91.1	92.1	93.5	93.8	95.0	95.8	96.2	97.4	98.0
Q15. Dr. spent enough time	90.5%	48 <sup>th</sup>	84.8	86.3	88.4	89.0	90.5	92.0	92.4	94.2	95.0	39 <sup>th</sup>	86.1	87.5	89.2	90.0	91.5	92.6	93.3	95.3	95.8
Q17. Coordination of Care +	78.3%	8 <sup>th</sup>	77.5	78.5	82.2	83.2	85.3	86.7	87.2	89.0	89.4	7 <sup>th</sup>	76.5	78.9	82.3	83.6	86.3	88.4	89.3	91.0	92.7
Q27. Ease of Filling Out Forms + (% U/A)	92.9%	5 <sup>th</sup>	92.7	93.1	94.2	94.8	95.5	96.3	96.5	97.8	98.5	15 <sup>th</sup>	91.2	92.4	93.7	94.1	94.7	95.9	96.2	97.0	97.3

# PROFILE OF SURVEY RESPONDENTS

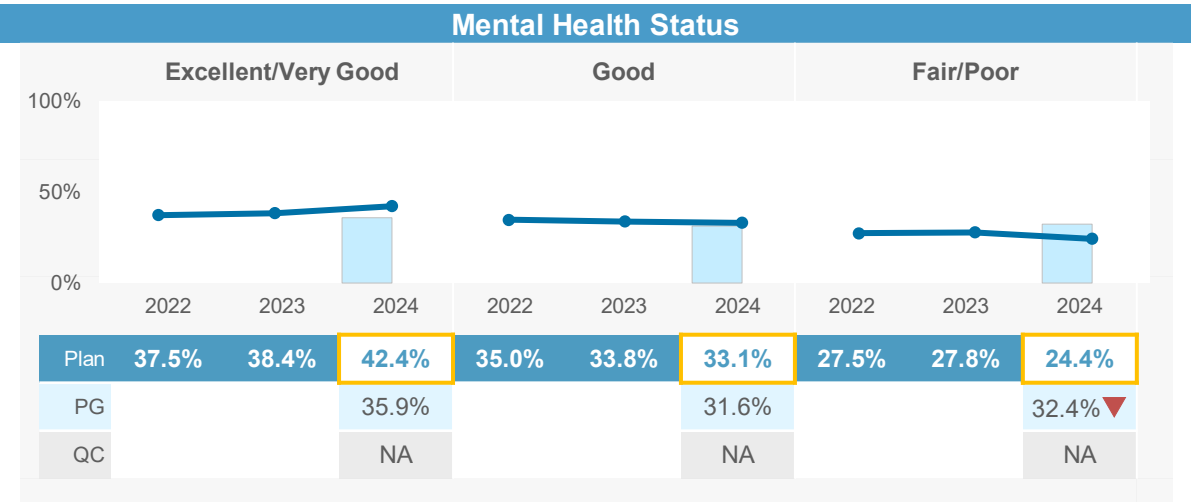
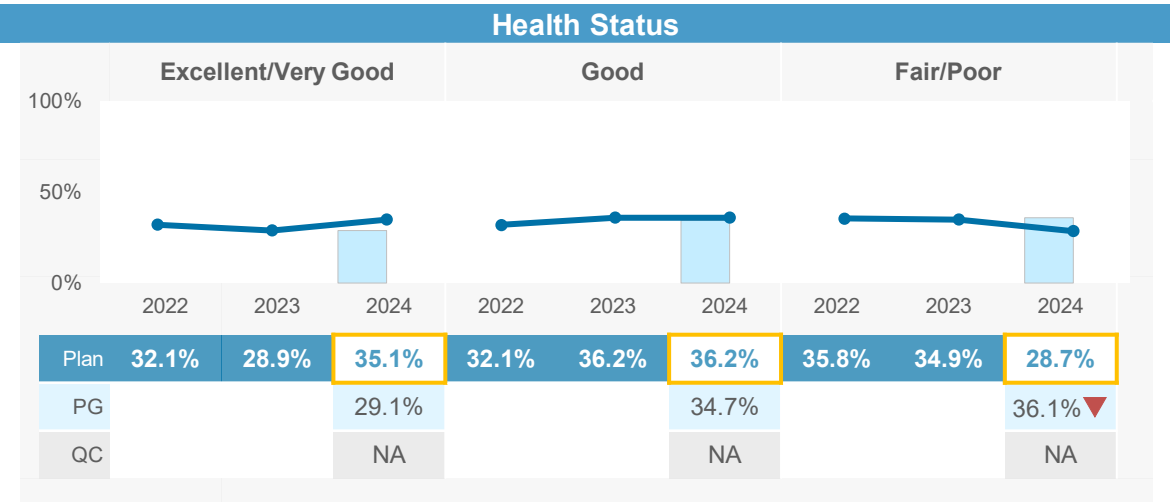
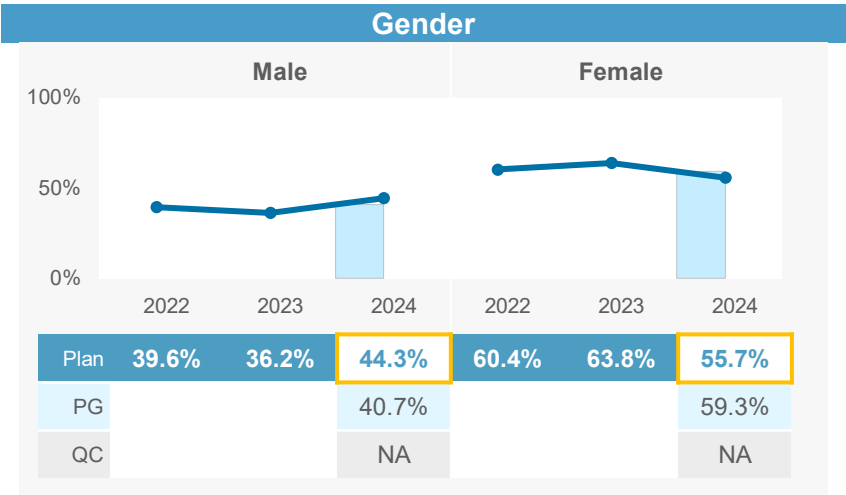
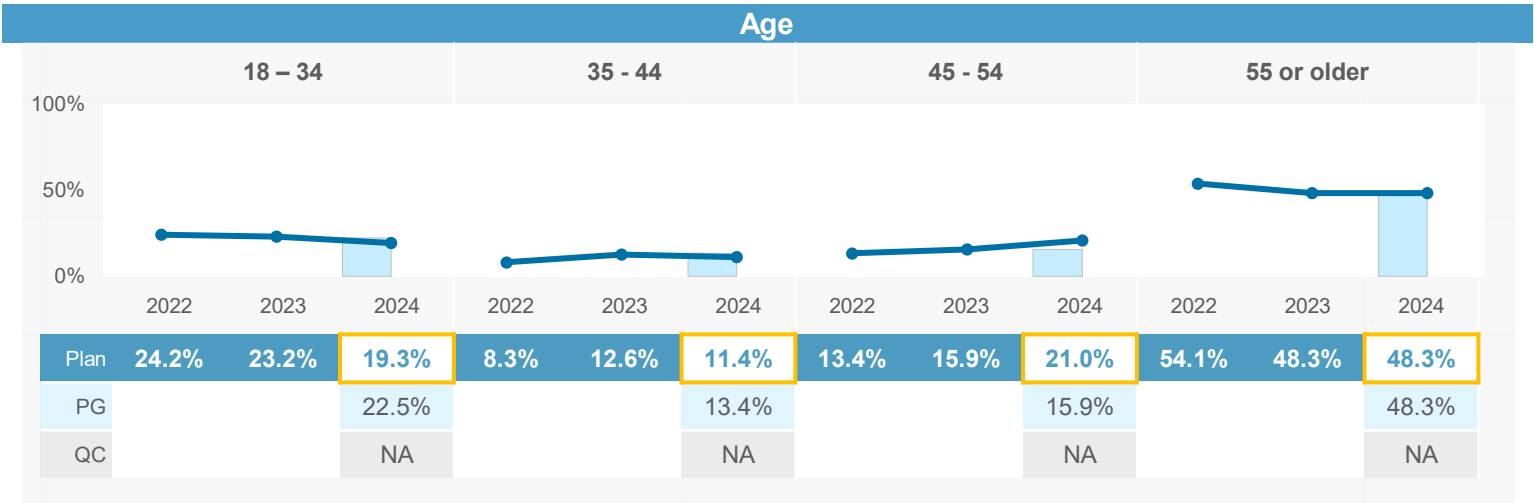
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## DEMOGRAPHIC COMPOSITION

- Alameda Alliance for Health

# PROFILE OF SURVEY RESPONDENTS

MEDICAID ADULT

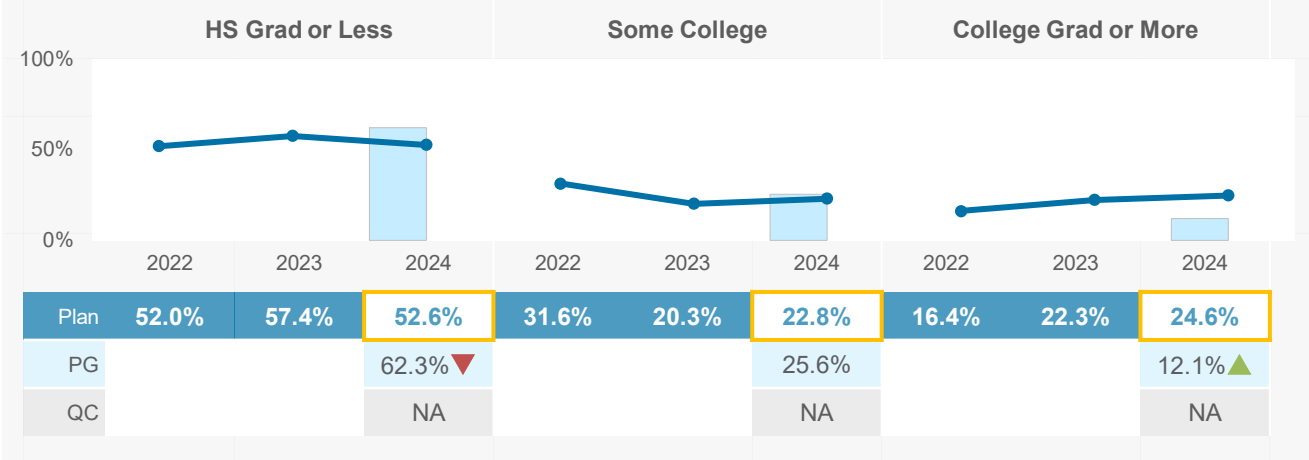


**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↕/↔) or benchmark score (▲/▼).  
**Benchmarks:** PG refers to the 2024 PG Book of Business benchmark. QC refers to the 2023 QC National Data benchmark. NCQA did not publish demographics for the 2023 benchmark.

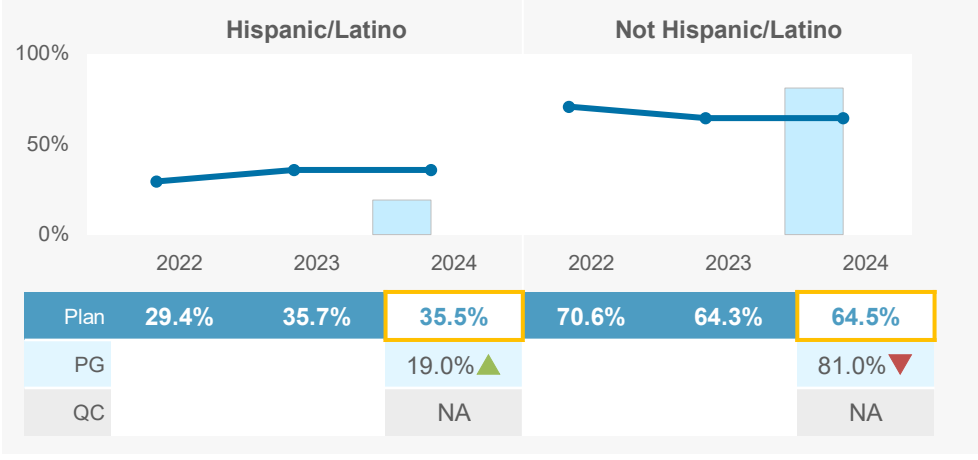
# PROFILE OF SURVEY RESPONDENTS

MEDICAID ADULT

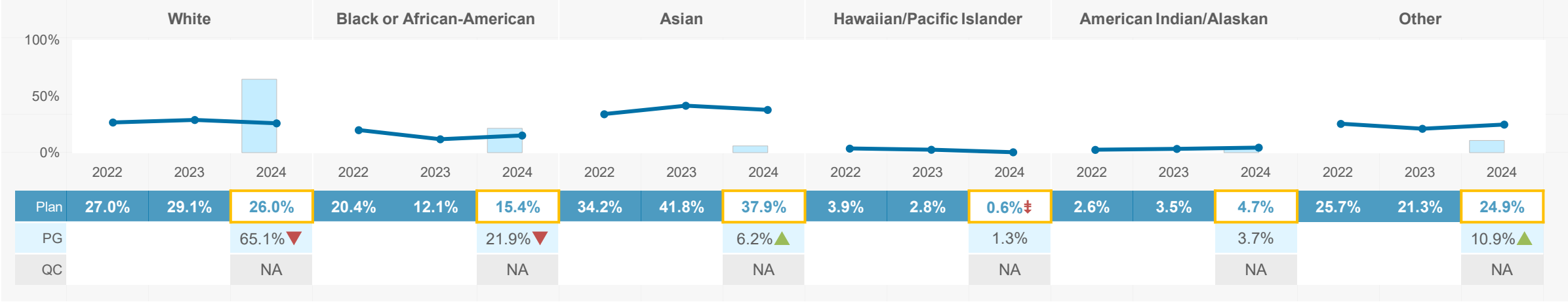
## Education



## Ethnicity



## Race



**Significance Testing:** Current score is significantly higher/lower than the 2023 score (▲/▼), the 2022 score (‡/‡) or benchmark score (▲/▼).  
**Benchmarks:** PG refers to the 2024 PG Book of Business benchmark. QC refers to the 2023 QC National Data benchmark. NCQA did not publish demographics for the 2023 benchmark.

# SUPPLEMENTAL QUESTIONS

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- Alameda Alliance for Health

# SUPPLEMENTAL QUESTIONS

MEDICAID ADULT

	Category Responses Based on Valid Responses Per Question				Summary Rate Score			2024 PG BoB	
					2022	2023	2024		
Q40. Will recommend health plan (% Definitely or Somewhat yes)	Valid Responses = 175								
	Definitely yes	Somewhat yes	Somewhat no	Definitely no	(n=152)	(n=148)	(n=175)	---	
	65.1%	27.4%	4.0%	3.4%	94.1%	94.6%	92.6%		
Q41. Likelihood to recommend health plan (% 9 or 10 - Extremely likely)	Valid Responses = 174								
	9 or 10 - Extremely likely	7-8	0-6		(n=154)	(n=149)	(n=174)	---	
	61.5%	25.9%	12.6%		61.7%	53.0%	61.5%		
NPS (% 9-10 - % 0-6)									
					(n=154)	(n=149)	(n=174)	---	
					44.8	33.6	48.9 ↑		
Q42. Would select plan again (% Definitely or Probably yes)	Valid Responses = 174								
	Definitely yes	Probably yes	Uncertain	Probably not	Definitely not	(n=154)	(n=144)	(n=174)	---
	59.8%	23.0%	10.3%	5.2%	1.7%	85.1%	81.9%	82.8%	

Significance Testing: Current year score is significantly higher/lower than 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼).

Low Base: ^Indicates a base size smaller than 20. Interpret results with caution.

# APPENDICES

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- APPENDIX A: CORRELATION ANALYSES
- APPENDIX B: QUESTIONNAIRE



# APPENDIX A: CORRELATIONS

## MEDICAID ADULT

### Highest Correlations

Below are the key measures with the highest correlations to the Rating measures.

#### With Health Care Rating

<b>Q28</b>	Health plan overall	0.7406
<b>Q18</b>	Personal doctor overall	0.6305
<b>Q4</b>	Got urgent care	0.5519
<b>Q9</b>	Got care/tests/treatment	0.5373
<b>Q20</b>	Got specialist appt.	0.5008
<b>Q22</b>	Specialist overall	0.4627
<b>Q6</b>	Got routine care	0.4158
<b>Q25</b>	CS courtesy/respect	0.3649
<b>Q12</b>	Dr. explained things	0.3548
<b>Q13</b>	Dr. listened carefully	0.3252

#### With Personal Doctor Rating

<b>Q17</b>	Dr. informed about care	0.7259
<b>Q13</b>	Dr. listened carefully	0.6504
<b>Q12</b>	Dr. explained things	0.6477
<b>Q8</b>	Health care overall	0.6305
<b>Q28</b>	Health plan overall	0.6231
<b>Q15</b>	Dr. spent enough time	0.5665
<b>Q14</b>	Dr. showed respect	0.5391
<b>Q9</b>	Got care/tests/treatment	0.5062
<b>Q22</b>	Specialist overall	0.4132
<b>Q6</b>	Got routine care	0.4095

#### With Specialist Rating

<b>Q15</b>	Dr. spent enough time	0.4670
<b>Q20</b>	Got specialist appt.	0.4631
<b>Q8</b>	Health care overall	0.4627
<b>Q13</b>	Dr. listened carefully	0.4429
<b>Q18</b>	Personal doctor overall	0.4132
<b>Q28</b>	Health plan overall	0.3908
<b>Q12</b>	Dr. explained things	0.3830
<b>Q14</b>	Dr. showed respect	0.3639
<b>Q17</b>	Dr. informed about care	0.3123
<b>Q4</b>	Got urgent care	0.3048

# APPENDIX B: QUESTIONNAIRE

---

SURVEY INSTRUCTIONS

- ◆

Answer each question by marking the box to the left of your answer.
- ◆

You are sometimes told to skip over some questions in this survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:

☒

Yes → *If Yes, Go to Question 1*

☐

No

*Personally identifiable information will not be made public and will only be released in accordance with federal laws and regulations. You may choose to answer this survey or not. If you choose not to, this will not affect the benefits you get. You may notice a number on the back of this survey. This number is ONLY used to let us know if you returned your survey so we don't have to send you reminders. If you want to know more about this study, please call 1-888-797-3605.*

1.

Our records show that you are now in Alameda Alliance for Health (Alliance). Is that right?

- ☐

Yes → *If Yes, Go to Question 3*
- ☐

No

2.

What is the name of your health plan?  
(Please print)

YOUR HEALTH CARE IN THE LAST 6 MONTHS

*These questions ask about your own health care from a clinic, emergency room, or doctor's office. This includes care you got in person, by phone, or by video. Do not include care you got when you stayed overnight in a hospital. Do not include the times you went for dental care visits.*

3.

In the last 6 months, did you have an illness, injury, or condition that needed care right away?

- ☐

Yes
- ☐

No → *If No, Go to Question 5*

4.

In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?

- ☐

Never
- ☐

Sometimes
- ☐

Usually
- ☐

Always

5.

In the last 6 months, did you make any in person, phone, or video appointments for a check-up or routine care?

- ☐

Yes
- ☐

No → *If No, Go to Question 7*

6.

In the last 6 months, how often did you get an appointment for a check-up or routine care as soon as you needed?

- ☐

Never
- ☐

Sometimes
- ☐

Usually
- ☐

Always

THANK YOU. Please return the completed survey in the postage-paid envelope.

PressGaney

P.O. Box 7315  
South Bend, IN 46699-0488

7. In the last 6 months, not counting the times you went to an emergency room, how many times did you get health care for yourself in person, by phone, or by video?

- ☐ None ➔ *If None, Go to Question 10*
- ☐ 1 time
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 to 9
- ☐ 10 or more times

8. Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 6 months?

- ☐ 0 Worst health care possible
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 Best health care possible

9. In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

YOUR PERSONAL DOCTOR

10. A personal doctor is the one you would talk to if you need a check-up, want advice about a health problem, or get sick or hurt. Do you have a personal doctor?

- ☐ Yes
- ☐ No ➔ *If No, Go to Question 19*

11. In the last 6 months, how many times did you have an in person, phone, or video visit with your personal doctor about your health?

- ☐ None ➔ *If None, Go to Question 18*
- ☐ 1 time
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 to 9
- ☐ 10 or more times

12. In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

13. In the last 6 months, how often did your personal doctor listen carefully to you?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

14. In the last 6 months, how often did your personal doctor show respect for what you had to say?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

15. In the last 6 months, how often did your personal doctor spend enough time with you?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

16. In the last 6 months, did you get care from a doctor or other health provider besides your personal doctor?

- ☐ Yes
- ☐ No ➔ *If No, Go to Question 18*

17. In the last 6 months, how often did your personal doctor seem informed and up-to-date about the care you got from these doctors or other health providers?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

18. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?

- ☐ 0 Worst personal doctor possible
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 Best personal doctor possible

GETTING HEALTH CARE FROM SPECIALISTS

When you answer the next questions, include the care you got in person, by phone, or by video. Do not include dental visits or care you got when you stayed overnight in a hospital.

19. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. In the last 6 months, did you make any appointments with a specialist?

- ☐ Yes
- ☐ No ➔ If No, Go to Question 23

20. In the last 6 months, how often did you get an appointment with a specialist as soon as you needed?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

21. How many specialists have you talked to in the last 6 months?

- ☐ None ➔ If None, Go to Question 23
- ☐ 1 specialist
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 or more specialists

22. We want to know your rating of the specialist you talked to most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

- ☐ 0 Worst specialist possible
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 Best specialist possible

YOUR HEALTH PLAN

The next questions ask about your experience with your health plan.

23. In the last 6 months, did you get information or help from your health plan’s customer service?

- ☐ Yes
- ☐ No ➔ If No, Go to Question 26

24. In the last 6 months, how often did your health plan’s customer service give you the information or help you needed?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

25. In the last 6 months, how often did your health plan’s customer service staff treat you with courtesy and respect?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

26. In the last 6 months, did your health plan give you any forms to fill out?

- ☐ Yes
- ☐ No ➔ *If No, Go to Question 28*

27. In the last 6 months, how often were the forms from your health plan easy to fill out?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

28. Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your health plan?

- ☐ 0 Worst health plan possible
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 Best health plan possible

ABOUT YOU

29. In general, how would you rate your overall health?

- ☐ Excellent
- ☐ Very Good
- ☐ Good
- ☐ Fair
- ☐ Poor

30. In general, how would you rate your overall mental or emotional health?

- ☐ Excellent
- ☐ Very Good
- ☐ Good
- ☐ Fair
- ☐ Poor

31. Do you now smoke cigarettes or use tobacco every day, some days, or not at all?

- ☐ Every day
- ☐ Some days
- ☐ Not at all ➔ *If Not at all, Go to Question 35*
- ☐ Don’t know ➔ *If Don’t know, Go to Question 35*

32. In the last 6 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

33. In the last 6 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? *Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication.*

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

34. In the last 6 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? *Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program.*

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

35. What is your age?

- ☐ 18 to 24
- ☐ 25 to 34
- ☐ 35 to 44
- ☐ 45 to 54
- ☐ 55 to 64
- ☐ 65 to 74
- ☐ 75 or older

36. Are you male or female?

- ☐ Male
- ☐ Female

37. What is the highest grade or level of school that you have completed?

- ☐ 8th grade or less
- ☐ Some high school, but did not graduate
- ☐ High school graduate or GED
- ☐ Some college or 2-year degree
- ☐ 4-year college graduate
- ☐ More than 4-year college degree

38. Are you of Hispanic or Latino origin or descent?

- ☐ Yes, Hispanic or Latino
- ☐ No, Not Hispanic or Latino

39. What is your race? *Mark one or more.*

- ☐ White
- ☐ Black or African-American
- ☐ Asian
- ☐ Native Hawaiian or other Pacific Islander
- ☐ American Indian or Alaska Native
- ☐ Other

ADDITIONAL QUESTIONS

Now we would like to ask a few more questions about the services your health plan provides.

40. Would you recommend your health plan to your family or friends?

- ☐ Definitely yes
- ☐ Somewhat yes
- ☐ Somewhat no
- ☐ Definitely no

41. On a scale from 0 to 10, where 0 means not at all likely, and 10 means extremely likely, how likely is it that you would recommend this health plan to a family member or friend?

- ☐ 0 Not at all likely
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 Extremely likely

42. If today you could select any health plan company in your area, would you select your current plan again?

- ☐ Definitely yes
- ☐ Probably yes
- ☐ Uncertain
- ☐ Probably not
- ☐ Definitely not

Thank You

Please return the completed survey in the postage-paid envelope or send to:  
Press Ganey • P.O. Box 7315  
South Bend, IN 46699-0488

If you have any questions, please call  
1-888-797-3605.



# **MY 2023 CAHPS® MEDICAID CHILD 5.1H SURVEY**

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**ALAMEDA ALLIANCE FOR HEALTH**

ALAMEDA ALLIANCE FOR HEALTH

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# OVERVIEW

Press Ganey (PG), a National Committee for Quality Assurance (NCQA) certified HEDIS® Survey Vendor, was selected by Alameda Alliance for Health to conduct its MY 2023 CAHPS® 5.1H Medicaid Child Survey. NCQA requires health plans to submit CAHPS survey results in compliance with HEDIS® accreditation requirements.

**SURVEY OBJECTIVE** The overall objective of the CAHPS® study is to capture accurate and complete information about consumer-reported experiences with health care. Specifically, the survey aims to measure how well plans are meeting their members' expectations and goals; to determine which areas of service have the greatest effect on members' overall satisfaction; and to identify areas of opportunity for improvement, which can aid plans in increasing the quality of provided care.

**2024 NCQA CHANGES** NCQA made changes to the survey or program for 2024.

One question was deleted from the 2024 Commercial Adult Survey and the 2024 Medicaid Adult Survey:

- Have you had either a flu shot or flu spray in the nose since July 1, 20XX?

Your Project Manager is Carrie-Ann Rojas (Carrie.Rojas@pressganey.com). Should you have any questions or comments regarding any aspect of the survey or reporting process, please feel free to email your Project Manager.

# METHODOLOGY

## DATA COLLECTION

The MY 2023 Medicaid Child version of the 5.1H CAHPS survey was administered via the following methodology:

First questionnaire  
mailed  
2/16/2024



Second questionnaire  
mailed  
3/22/2024



Initiate follow-up calls  
to non-responders  
4/12/2024 - 4/26/2024



Last day to accept  
completed surveys  
5/1/2024

## QUALIFIED RESPONDENTS

Included beneficiaries who were...

- *Parents of those 17 years and younger (as of December 31<sup>st</sup> of the measurement year)*
- *Continuously enrolled in the plan for at least five of the last six months of the measurement year*

## 2024 RESPONSE RATE CALCULATION

$$\frac{323 \text{ (Completed)}}{2079 \text{ (Sample)} - 34 \text{ (Ineligible)}} = \frac{323}{2045} = 15.8\%$$

## COMPLETES - MODALITY BY LANGUAGE

Language	Mail	Phone	Total
English	93	51	144
Spanish	78	101	179
<b>Total</b>	<b>171</b>	<b>152</b>	<b>323</b>

Total Number of Undeliverables: 116

Note: Respondents were given the option of completing the survey in Spanish. In place of the English survey, a Spanish survey was mailed to members who were identified by the plan as Spanish-speaking. A telephone number was also provided on the survey cover letter for all members to call if they would like to complete the survey in Spanish.

## RESPONSE RATE TRENDING

		2022	2023	2024
Completed	<b>SUBTOTAL</b>	<b>250</b>	<b>251</b>	<b>323</b>
Ineligible	Does not Meet Eligibility Criteria (01)	21	13	6
	Language Barrier (03)	12	16	28
	Mentally/Physically Incapacitated (04)	0	0	0
	Deceased (05)	0	0	0
	<b>SUBTOTAL</b>	<b>33</b>	<b>29</b>	<b>34</b>
Non-response	Break-off/Incomplete (02)	18	16	12
	Refusal (06)	29	25	27
	Maximum Attempts Made (07)	1733	1742	1683
	Added to DNC List (08)	0	0	0
	<b>SUBTOTAL</b>	<b>1780</b>	<b>1783</b>	<b>1722</b>
<b>Total Sample</b>		<b>2063</b>	<b>2063</b>	<b>2079</b>
<b>Oversampling %</b>		<b>25.0%</b>	<b>25.0%</b>	<b>26.0%</b>
<b>Response Rate</b>		<b>12.3%</b>	<b>12.3%</b>	<b>15.8%</b>
<b>PG Response Rate</b>		<b>10.2%</b>	<b>9.9%</b>	<b>9.4%</b>

# INDUSTRY TRENDS

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- Alameda Alliance for Health

# PG BOOK OF BUSINESS TRENDS

MEDICAID CHILD



Alameda Alliance for Health

**Trend Highlights** The robust Press Ganey Book of Business is valuable in monitoring industry trends. On the right, we have provided a side-by-side comparison of aggregate PG Book of Business scores to help you understand broader trends in measure scoring over the past five years.

**Medicaid Child:** Among the Medicaid Child population, no measures declined by more than 1% compared to 2023. *Rating of Specialist, Getting Needed Care, and Getting Care Quickly* have increased by more than 1% since 2023.

All scores have decreased overall since 2020. Rating of Health Care Quality and Getting Care Quickly are the largest decrease of at least 2% lower than the 2020 scores.

	PG Book of Business Trends				
	2020	2021	2022	2023	2024
<b>Rating Questions (% 9 or 10)</b>					
Q31. Rating of Health Plan	73.0%	73.3%	72.5%	72.0%	72.0%
Q8. Rating of Health Care	73.0%	74.4%	71.2%	69.6%	70.5%
Q21. Rating of Personal Doctor	79.1%	78.6%	77.4%	76.5%	77.2%
Q25. Rating of Specialist	75.0%	75.7%	73.9%	72.3%	73.7%
<b>Rating Questions (% 8, 9 or 10)</b>					
Q31. Rating of Health Plan	87.5%	87.3%	86.9%	86.8%	86.5%
Q8. Rating of Health Care	88.7%	88.7%	87.6%	86.8%	87.2%
Q21. Rating of Personal Doctor	91.2%	90.8%	90.3%	89.8%	89.9%
Q25. Rating of Specialist	88.2%	88.2%	87.5%	86.7%	86.9%
<b>Getting Needed Care (% A/U)</b>					
Q9. Getting care, tests, or treatment	90.8%	90.8%	89.2%	88.7%	90.3%
Q23. Getting specialist appointment	80.4%	82.4%	79.5%	77.5%	78.6%
<b>Getting Care Quickly (% A/U)</b>					
Q4. Getting urgent care	91.7%	91.7%	90.5%	89.8%	90.7%
Q6. Getting routine care	89.3%	83.8%	82.9%	81.8%	83.3%
<b>Coordination of Care (Q20) (% A/U)</b>					
	85.0%	84.9%	84.1%	84.2%	84.3%

 Increase of 1% or greater since 2023  
 Decrease of 1% or greater since 2023

# EXECUTIVE SUMMARY

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- Alameda Alliance for Health

# OVERVIEW OF TERMS

**Summary Rates (SRS)** are defined by NCQA in its HEDIS MY 2023 CAHPS® 5.1H guidelines and generally represent the most favorable response percentages.

**Percentile Rankings** Your plan's approximate percentile rankings in relation to the Quality Compass® All Plans benchmark were calculated by Press Ganey using information derived from the NCQA 1-100 Benchmark.

**PG Benchmark Information** The source for data contained within the PG Book of Business is all submitting plans that contracted with PG for MY 2023. Submission occurred on May 24<sup>th</sup>, 2024.

**NCQA Benchmark Information** The source for data contained in this publication is Quality Compass® All Plans 2023. It is used with the permission of NCQA. Any analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such analysis, interpretation, or conclusion. Quality Compass® is a registered trademark of NCQA.

**Significance Testing** All significance testing is performed at the 95% confidence level using a t-test.

**Small Denominator Threshold** NCQA will assign a measure result of NA to overall ratings or composites with a denominator (i.e., the average number of responses across all questions used to calculate the composite) less than 100.

**Non-Accreditation Notation** Throughout the report you will see a notation of “+” which indicates that the given measure is not utilized for accreditation score calculation.

**Technical Notes** Please refer to the Technical Notes for more information.

# 2024 DASHBOARD

MEDICAID CHILD

Alameda Alliance for Health



323

Completed  
surveys

15.8%

Response Rate

**Stars:** PG **Estimated** NCQA  
Rating  
NA = Denominator < 100

**Scores:** All scores displayed  
are Summary Rate Scores

- Rating: % 9 or 10
- Composites: % Usually or Always

**Significance Testing:** Current  
score is significantly  
higher/lower than 2023 (↑/↓) or  
2022 (↕/↗).

**Percentiles:** Based on the  
2024 PG Book of Business

**Health Plan Key Driver  
Classification:** Details can be  
found in the KDA section.

## Accreditation Measures

Rating of Health Plan ★★★★★				
Rating of Health Plan	77.7%	↑↕	83 <sup>rd</sup>	---
Rating of Health Care ★★★★★				
Rating of Health Care	71.4%		51 <sup>st</sup>	Power
Rating of Personal Doctor ★★★★★				
Rating of Personal Doctor	80.1%		72 <sup>nd</sup>	Power

Getting Needed Care ★★			
Composite	76.3%	8 <sup>th</sup>	---
Q9. Getting care, tests, or treatment	84.9%	10 <sup>th</sup>	Wait
Q23. Getting specialist appointment	67.7%	9 <sup>th</sup>	Wait
Getting Care Quickly ★			
Composite	78.3%	<5 <sup>th</sup>	---
Q4. Getting urgent care	80.5%	<5 <sup>th</sup>	Wait
Q6. Getting routine care	76.1%	↑ 12 <sup>th</sup>	Wait

## Other Measures

Rating of Specialist +			
Rating of Specialist +	73.7%	46 <sup>th</sup>	Wait
Coordination of Care +			
Coordination of Care +	84.3%	49 <sup>th</sup>	Opportunity
Customer Service +			
Composite	91.0%	69 <sup>th</sup>	---
Q27. Provided information or help	87.4%	77 <sup>th</sup>	Retain
Q28. Treated with courtesy and respect	94.7%	46 <sup>th</sup>	Wait

Ease of Filling Out Forms +			
Ease of Filling Out Forms +	94.4%	37 <sup>th</sup>	Wait
How Well Doctors Communicate +			
Composite	92.6%	21 <sup>st</sup>	---
Q12. Dr. explained things	93.8%	31 <sup>st</sup>	Opportunity
Q13. Dr. listened carefully	93.8%	21 <sup>st</sup>	Opportunity
Q14. Dr. showed respect	95.5%	18 <sup>th</sup>	Opportunity
Q17. Dr. spent enough time	87.4%	21 <sup>st</sup>	Opportunity

# ESTIMATED NCQA HEALTH INSURANCE PLAN RATINGS

MEDICAID CHILD

	SCORE DEFINITION	2024 BASE	2024 HPR SCORE*	HPR 4 STAR THRESHOLD	HPR PERCENTILE BAND	PG ESTIMATED RATING
PATIENT EXPERIENCE						3
GETTING CARE						1.5
Getting Needed Care	Usually or Always	115	76.3%	86.6%	10 <sup>th</sup>	2
Getting Care Quickly	Usually or Always	132	78.2%	89.3%	<10 <sup>th</sup>	1
SATISFACTION WITH PLAN PHYSICIANS						4
Rating of Personal Doctor	9 or 10	256	80.0%	78.8%	67 <sup>th</sup>	4
SATISFACTION WITH PLAN AND PLAN SERVICES						3.5
Rating of Health Plan	9 or 10	309	77.6%	74.4%	67 <sup>th</sup>	4
Rating of Health Care	9 or 10	168	71.4%	73.1%	33 <sup>rd</sup>	3

## EXPLANATION

NCQA calculates health plan ratings (HPR) by evaluating plans in three categories: consumer satisfaction, clinical quality (includes prevention and treatment) and NCQA Accreditation Standards score.

The overall NCQA star rating is the weighted average of an organization’s HEDIS and CAHPS measure ratings, plus Accreditation bonus points (if the organization has NCQA Accreditation), rounded to the nearest half point.

The CAHPS measures are classified based on their national percentile (10<sup>th</sup>, 33<sup>rd</sup>, 67<sup>th</sup> and 90<sup>th</sup>) into scores ranging from 1 to 5 (in increments of 0.5), where 5 is the highest score and 1 is the lowest.

Results are summarized in the table to the left. **Percentiles and ratings are estimated by PG** based on the 2023 NCQA data and benchmarks.

Rating = 1	Rating = 2	Rating = 3	Rating = 4	Rating = 5
<10 <sup>th</sup> Percentile	10 <sup>th</sup> – 32 <sup>nd</sup> Percentile	33 <sup>rd</sup> – 66 <sup>th</sup> Percentile	67 <sup>th</sup> – 89 <sup>th</sup> Percentile	≥90 <sup>th</sup> Percentile

Notes:

- NCQA will assign a measure result of NA to overall ratings or composites with a denominator (i.e., the average number of responses across all questions used to calculate the composite) less than 100.
- Medicaid plans have the option to be scored on either Adult CAHPS or Child CAHPS data.

\*HPR scores are truncated to three digits (XX.X%) according to the NCQA calculation protocol for Health Plan Ratings. Please note that scores on this slide may differ slightly compared to scores found throughout the rest of the report.

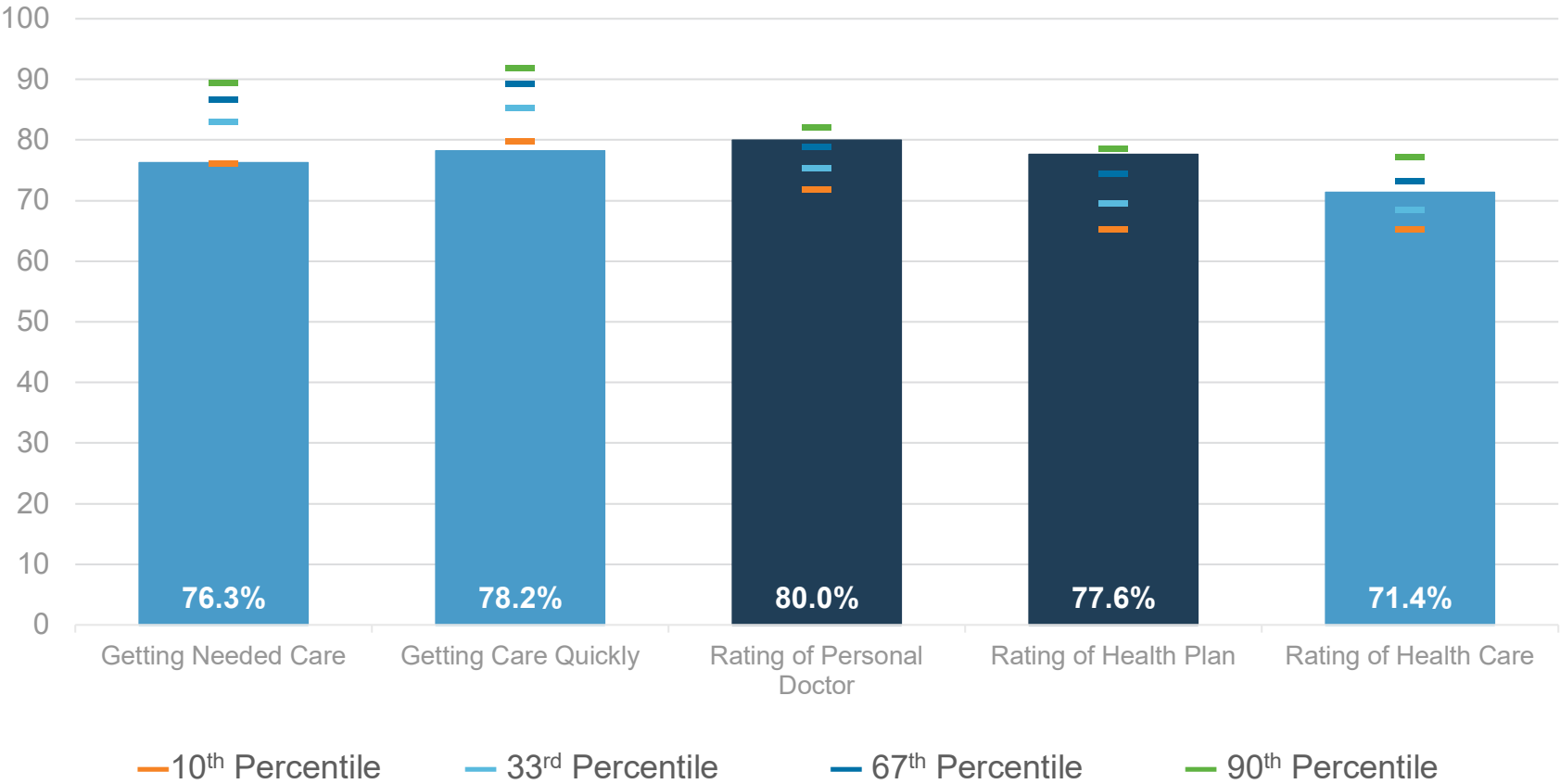


# PERFORMANCE TO STAR CUT POINTS

MEDICAID CHILD

## COMPARISON TO QUALITY COMPASS CUT POINTS

The graph shows how your plan’s **Estimated Health Plan Rating (HPR) scores** used for accreditation ratings compare to the most recent Quality Compass thresholds published by NCQA (Fall 2023).



**HPR scores** are **truncated** to three digits (XX.X%) according to the NCQA calculation protocol for Health Plan Ratings. Please note that scores on this slide may differ slightly compared to scores found throughout the rest of the report.

\* Scores are % 9 or 10, and % Always or Usually.

# MEASURE SUMMARY

MEDICAID CHILD

MEASURE	SUMMARY RATE		CHANGE	2024 PG BOOK OF BUSINESS BENCHMARK						
	2023	2024		PERCENTILE DISTRIBUTION					PERCENTILE RANK	BoB SRS
				0	20	40	60	80		
Health Plan Domain										
Rating of Health Plan <i>% 9 or 10</i>	69.5%	77.7% <span>↑</span>	8.2	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>					83 <sup>rd</sup>	72.0% <span>▲</span>
Getting Needed Care <i>% Usually or Always</i>	79.2%	76.3%	-2.9	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>					8 <sup>th</sup>	84.5% <span>▼</span>
Customer Service + <i>% Usually or Always</i>	92.1%	91.0%	-1.1	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>					69 <sup>th</sup>	88.8%
Ease of Filling Out Forms + <i>% Usually or Always</i>	93.7%	94.4%	0.7	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>					37 <sup>th</sup>	94.9%
Health Care Domain										
Rating of Health Care <i>% 9 or 10</i>	67.2%	71.4%	4.2	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>					51 <sup>st</sup>	70.5%
Getting Care Quickly <i>% Usually or Always</i>	73.0%	78.3%	5.3	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>					<5 <sup>th</sup>	87.0% <span>▼</span>
How Well Doctors Communicate + <i>% Usually or Always</i>	92.8%	92.6%	-0.2	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>					21 <sup>st</sup>	94.4%
Coordination of Care + <i>% Usually or Always</i>	83.0%	84.3%	1.3	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>					49 <sup>th</sup>	84.3%
Rating of Personal Doctor <i>% 9 or 10</i>	79.3%	80.1%	0.8	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>					72 <sup>nd</sup>	77.2%
Rating of Specialist + <i>% 9 or 10</i>	85.7%	73.7%	-12.0	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div>					46 <sup>th</sup>	73.7%

**Significance Testing** Current score is significantly higher/lower than the 2023 score (↑/↓) or benchmark score (▲/▼).

# HEALTH EQUITY

## MEDICAID CHILD

The infographic below highlights disparities in health equity among key demographic groups across the key metrics. Darker shading indicates a larger disparity.

Group is performing...

Above the plan score by 5 or more points

Above the plan score






Below the plan score

Below the plan score by 5 or more points

Above/below plan score but has low base (<30)

Accreditation Measure

Other Measure

			Rating of Health Plan		Rating of Health Care		Rating of Personal Doctor		Getting Needed Care		Getting Care Quickly	
			SRS	△	SRS	△	SRS	△	SRS	△	SRS	△
Demographic	Category	Total	77.7%		71.4%		80.1%		76.3%		78.3%	
 Child's Gender	Male	n = 157	<div></div>	9%	<div></div>	4%	<div></div>	6%	<div></div>	3%	<div></div>	-1%
	Female	n = 151	<div></div>	-9%	<div></div>	-3%	<div></div>	-7%	<div></div>	-2%	<div></div>	0%
 Child's Age	0 – 4	n = 65	<div></div>	-2%	<div></div>	12%	<div></div>	-2%	<div></div>	4%	<div></div>	9%
	5 – 8	n = 63	<div></div>	6%	<div></div>	9%	<div></div>	5%	<div></div>	1%	<div></div>	4%
	9 – 13	n = 90	<div></div>	2%	<div></div>	-5%	<div></div>	-2%	<div></div>	-4%	<div></div>	2%
	14 or older	n = 94	<div></div>	-2%	<div></div>	-10%	<div></div>	0%	<div></div>	0%	<div></div>	-18%
 Overall Health	Excellent/Very Good	n = 214	<div></div>	5%	<div></div>	7%	<div></div>	4%	<div></div>	8%	<div></div>	6%
	Good	n = 76	<div></div>	-12%	<div></div>	-10%	<div></div>	-13%	<div></div>	-11%	<div></div>	-16%
	Fair/Poor	n = 18	<div></div>	-13%	<div></div>	-26%	<div></div>	20%	<div></div>	-22%	<div></div>	-2%
 Mental Health	Excellent/Very Good	n = 222	<div></div>	4%	<div></div>	7%	<div></div>	5%	<div></div>	3%	<div></div>	3%
	Good	n = 73	<div></div>	-7%	<div></div>	-1%	<div></div>	-8%	<div></div>	-5%	<div></div>	-3%
	Fair/Poor	n = 16	<div></div>	-28%	<div></div>	-46%	<div></div>	-22%	<div></div>	-18%	<div></div>	-27%
 Race/ Ethnicity	White	n = 90	<div></div>	2%	<div></div>	12%	<div></div>	5%	<div></div>	5%	<div></div>	2%
	Black/African-American	n = 35	<div></div>	-12%	<div></div>	-13%	<div></div>	-9%	<div></div>	-10%	<div></div>	2%
	Asian	n = 61	<div></div>	-13%	<div></div>	-9%	<div></div>	-8%	<div></div>	-13%	<div></div>	-15%
	Native Hawaiian/Pacific Islander	n = 6	<div></div>	-44%	<div></div>	29%	<div></div>	20%	<div></div>	-76%	<div></div>	-78%
	American Indian or Alaska Native	n = 5	<div></div>	-38%	<div></div>	29%	<div></div>	20%	<div></div>	-76%	<div></div>	-78%
	Other	n = 114	<div></div>	4%	<div></div>	4%	<div></div>	2%	<div></div>	-3%	<div></div>	0%
	Hispanic/Latino	n = 205	<div></div>	4%	<div></div>	9%	<div></div>	4%	<div></div>	3%	<div></div>	5%

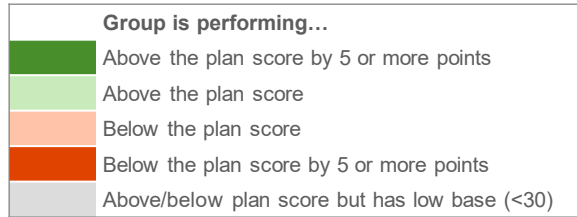
# HEALTH EQUITY













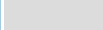

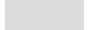







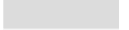




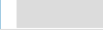
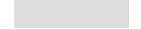









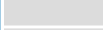

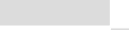


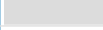

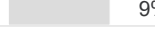













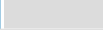

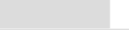
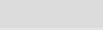


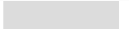











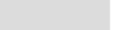




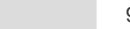
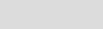




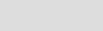
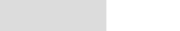
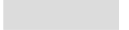









## MEDICAID CHILD

The infographic below highlights disparities in health equity among key demographic groups across the key metrics. Darker shading indicates a larger disparity.

Accreditation Measure

Other Measure



			Rating of Specialist +	Coordination of Care +	Customer Service +	How Well Doctors Communicate +	Ease of Filling Out Forms +
			SRS $\Delta$	SRS $\Delta$	SRS $\Delta$	SRS $\Delta$	SRS $\Delta$
Demographic	Category	Total	73.7%	84.3%	91.0%	92.6%	94.4%
 <b>Child's Gender</b>	Male	n = 157	 7%	 -2%	 1%	 3%	 1%
	Female	n = 151	 -4%	 4%	 0%	 -4%	 -1%
 <b>Child's Age</b>	0 – 4	n = 65	 -11%	 2%	 -7%	 1%	 -1%
	5 – 8	n = 63	 0%	 -4%	 -2%	 3%	 1%
	9 – 13	n = 90	 26%	 -4%	 4%	 -5%	 0%
	14 or older	n = 94	 -9%	 11%	 0%	 3%	 0%
 <b>Overall Health</b>	Excellent/Very Good	n = 214	 10%	 6%	 2%	 1%	 -1%
	Good	n = 76	 -15%	 -6%	 -10%	 -6%	 1%
	Fair/Poor	n = 18	 -40%	 -4%	 9%	 2%	 0%
 <b>Mental Health</b>	Excellent/Very Good	n = 222	 2%	 3%	 1%	 1%	 -1%
	Good	n = 73	 0%	 0%	 -2%	 -2%	 1%
	Fair/Poor	n = 16	 -24%	 -4%	 -11%	 -13%	 6%
 <b>Race/Ethnicity</b>	White	n = 90	 13%	 3%	 2%	 2%	 0%
	Black/African-American	n = 35	 -40%	 7%	 9%	 -8%	 -3%
	Asian	n = 61	 -7%	 1%	 -13%	 -3%	 0%
	Native Hawaiian/Pacific Islander	n = 6	 NA	 NA	 9%	 -93%	 6%
	American Indian or Alaska Native	n = 5	 NA	 NA	 NA	 -68%	 -34%
	Other	n = 114	 11%	 -2%	 3%	 -4%	 2%
	Hispanic/Latino	n = 205	 6%	 6%	 5%	 1%	 -1%

# MEASURE SUMMARY

MEDICAID CHILD

## TOP THREE Performing Measures

Your plan’s percentile rankings for these measures were the highest compared to the 2024 PG Book of Business.

MEASURE	2024 Valid n	PLAN SUMMARY RATE SCORE			2023 QC			2024 PG BoB		
		2023	2024	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
Rating of Health Plan (% 9 or 10)	309	69.5%	77.7%	8.2	70.9%	6.8	87 <sup>th</sup>	72.0%	5.7	83 <sup>rd</sup>
Rating of Personal Doctor (% 9 or 10)	256	79.3%	80.1%	0.8	75.6%	4.5	88 <sup>th</sup>	77.2%	2.9	72 <sup>nd</sup>
Customer Service + (% Usually or Always)	94 <sup>^</sup>	92.1%	91.0%	-1.1	87.6%	3.4	86 <sup>th</sup>	88.8%	2.2	69 <sup>th</sup>

## BOTTOM THREE Performing Measures

Your plan’s percentile rankings for these measures were the lowest compared to the 2024 PG Book of Business.

MEASURE	2024 Valid n	PLAN SUMMARY RATE SCORE			2023 QC			2024 PG BoB		
		2023	2024	CHANGE	SCORE	GAP	PERCENTILE	SCORE	GAP	PERCENTILE
How Well Doctors Communicate + (% Usually or Always)	176	92.8%	92.6%	-0.2	93.6%	-1.0	33 <sup>rd</sup>	94.4%	-1.8	21 <sup>st</sup>
Getting Needed Care (% Usually or Always)	115	79.2%	76.3%	-2.9	82.7%	-6.4	12 <sup>th</sup>	84.5%	-8.2	8 <sup>th</sup>
Getting Care Quickly (% Usually or Always)	132	73.0%	78.3%	5.3	85.5%	-7.2	9 <sup>th</sup>	87.0%	-8.7	<5 <sup>th</sup>

Significance Testing: Current score is significantly higher/lower than the 2023 score (/) or benchmark score (/)

<sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.

# IMPROVEMENT STRATEGIES

## Improving Performance

These measures had the lowest percentile rankings in comparison to the 2024 PG Book of Business for your plan.

### Improvement Strategies – How Well Doctors Communicate

- Cultivate a patient-centered care philosophy and programs across the provider network.
- Support, communicate and educate providers about the vital medical importance of effective doctor-patient communication (i.e., reduced hospitalizations & ER visits, improved adherence).
- Explain health care concepts clearly and simply to parents and children. Use simple terms for children. Be prepared to accommodate and overcome language /literacy limitations.
- Address all of the parents' and the child's concerns. When appropriate, involve the child. Maintain eye contact with both the parent and the child. Be kind, thoughtful and thorough.
- Speak directly to older children when discussing matters related to their health.
- Provide readily available recommendations, tools and guidance to all providers to support and enhance communication skills and effective conversation skills with patients. Providers need to: Provide thorough explanations, provide written materials, illustrations and/or examples to help patient's understand, repeat the patient's concern and then address the topic, ask clarifying questions, make eye contact, avoid medical jargon and technical language, avoid multi-tasking, avoid rushing the patient, use constructive verbal responses and non-verbal cues, apply empathy and interest in response to concerns, by kind, avoid condescending language or actions, address questions and concerns-as much time as necessary, schedule adequate time for each visit, and follow-up after tests or procedures.
- Collaborate and share with providers tools, resources, and best practices to support, or reinforce, a complete and effective information exchange with all patients (e.g., a summary of medical record or health assessment to facilitate an effective health or wellness discussion, patient testimonials - perhaps from focus groups - of effective and ineffective communication techniques, provide tips and/or testimonials in provider newsletters).

### Improvement Strategies – Getting Needed Care

- Assess CAHPS data by health system, PO, and/or network. Communicate results and identify outliers. Evaluate with HEDIS data, complaints, appeals and/or quality of care concerns, and communicate. Identify issues, prioritize and implement improvement activities.
- Work with providers to support patients in navigating health care and remove obstacles. Support and encourage providers to take innovative action to improve access. Examples include: Serve patients quickly, treat urgent issues promptly, minimize wait times, follow-up about appointment times and test results. Another is to develop an in-depth referral/decision-making guide for PCP's to prepare for/with patients explaining need, urgency, patient expectations and responsibilities, and preparations for seeing a specialist.
- Encourage and guide parents/families when and how to use/access alternative care settings, e.g., web-based, tele-health, urgent care, and emergency care.
- Support members and collaborate with providers to enhance access to care through innovative, proactive approaches within Care Management, Chronic Care, and Quality Management. Work with providers to identify and resolve opportunities.
- Continually assess, revisit and simplify plan requirements/processes (i.e., UM) impacting access to care, tests, or treatment. Seek opportunities to improve processes and procedures.
- Review and simplify precertification/auth/referral policies/procedures for both member and provider, including messages and communications. Cross-reference with complaints, concerns, and quality of care issues. Improve and clarify processes and communications.
- Evaluate and simplify member communications, assuring that members are clearly told why something is not approved. When appropriate, offer suggestions for next steps or alternatives.
- Ensure Customer Service representatives are able to accurately advise members of available alternatives for care, such as walk-in clinics, urgent care, specialists, labs, etc.

### Improvement Strategies – Getting Care Quickly

- Assess CAHPS data by health system, PO, and/or network. Communicate results and identify outliers. Correlate with HEDIS data, complaints, appeals and/or quality of care concerns, and communicate. Support and encourage providers to take innovative action to improve access.
- Support members and collaborate with providers to enhance routine and urgent access to care through innovative, proactive approaches within Care Management, Chronic Care, and Quality Management. Work with providers to identify and resolve opportunities.
- Discuss and engage providers/staff on scheduling best practices, how to improve access to routine/urgent care. Consider scheduling routine appointments well in advance, e.g., 12 months. Provide tools, resources, support and assessment.
- Support, encourage and assist in approaches toward open access scheduling. Allow a portion of each day open for urgent care and/or follow-up care.
- Contract with additional providers for urgent and after-hour appointments/availability.
- Explore partnering with 24-hour urgent care or walk-in clinics.
- Educate providers and staff about Plan and regulatory appointment wait time requirements or standards (i.e., CAHPS, CMS, States, etc.) . Identify opportunities for improvement.
- Provide members streamlined tools and resources (links, apps, etc.) about benefits, providers, referrals, scheduling appointments, etc. Identify options and hours available, and include alternatives, including practices with evening and weekend hours. Consider alternative sources of information, e.g., refrigerator magnets.
- Explore and support alternative telecommunication technologies to expand access to care: telephone, telehealth, telemedicine and patient portals.
- Encourage use of Nurse Hotline/Nurse on Call lines or live-chat via web for members to get health information and advice.

Full List of Improvement Strategies 

# KEY DRIVER ANALYSIS OF RATING OF HEALTH PLAN

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- Alameda Alliance for Health

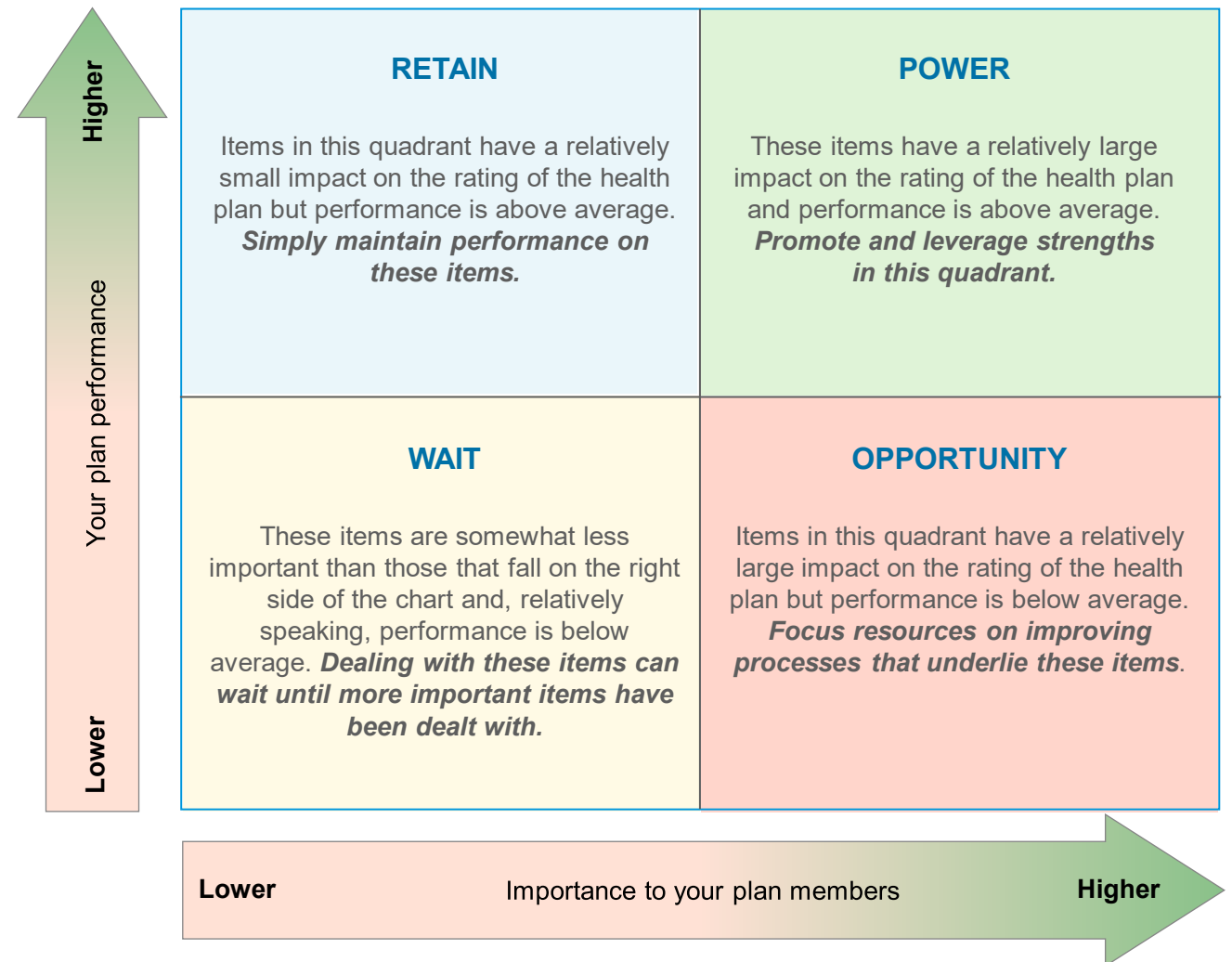
# POWeR CHART: EXPLANATION

## POWeR™ CHART CLASSIFICATION MATRIX

**Overview.** The SatisAction™ key driver statistical model is a powerful, proprietary statistical methodology used to identify the key drivers of the rating of the health plan and provide actionable direction for satisfaction improvement programs. This methodology is the result of a number of years of development and testing using health care satisfaction data. We have been successfully using this approach since 1997.

The model provides the following:

- Identification of the elements that are important in driving of the rating of the health plan.
- Measurement of the relative importance of each of these elements.
- Measurement of how well members think the plan performed on those important elements.
- Presentation of the importance/performance results in a matrix that provides clear direction for member satisfaction improvement efforts by the plan.



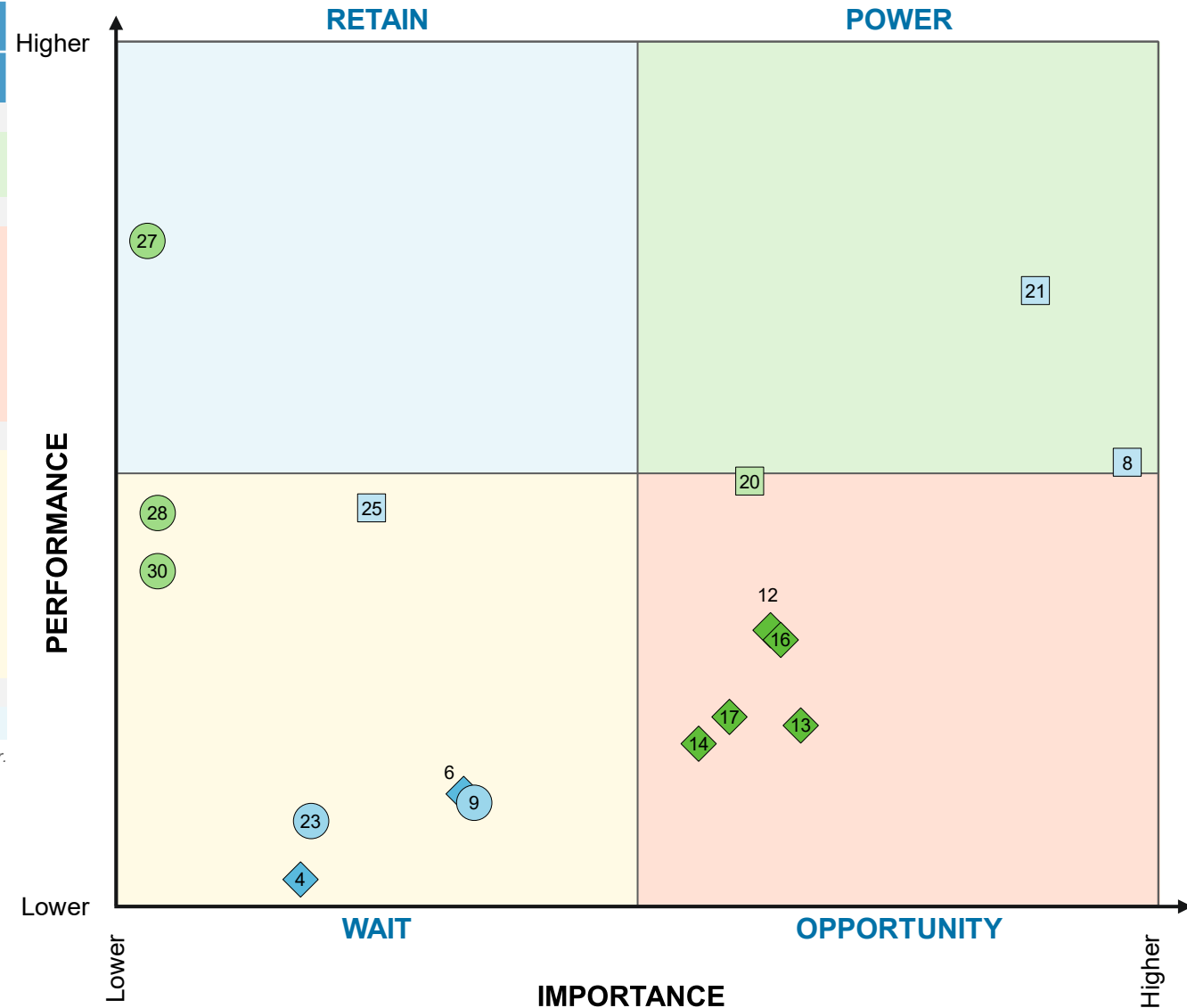


# POWER CHART: YOUR RESULTS

MEDICAID CHILD

SURVEY MEASURE				2023		2024	
				SRS	%tile*	SRS	%tile*
<b>POWER</b>							
Rating	Q8	Rating of Health Care		67.2%	34 <sup>th</sup>	71.4%	51 <sup>st</sup>
Rating	Q21	Rating of Personal Doctor		79.3%	77 <sup>th</sup>	80.1%	72 <sup>nd</sup>
<b>OPPORTUNITY</b>							
HWDC	Q13	Dr. listened carefully		93.6%	18 <sup>th</sup>	93.8%	21 <sup>st</sup>
HWDC	Q16	Dr. explained things to child		93.3%	35 <sup>th</sup>	92.6%	30 <sup>th</sup>
HWDC	Q12	Dr. explained things		94.4%	48 <sup>th</sup>	93.8%	31 <sup>st</sup>
CC	Q20	Coordination of Care +		83.0%	40 <sup>th</sup>	84.3%	49 <sup>th</sup>
HWDC	Q17	Dr. spent enough time		87.1%	29 <sup>th</sup>	87.4%	21 <sup>st</sup>
HWDC	Q14	Dr. showed respect		96.1%	33 <sup>rd</sup>	95.5%	18 <sup>th</sup>
<b>WAIT</b>							
GNC	Q9	Getting care, tests, or treatment		78.5%	<5 <sup>th</sup>	84.9%	10 <sup>th</sup>
GCQ	Q6	Getting routine care		65.4%	<5 <sup>th</sup>	76.1%	12 <sup>th</sup>
Rating	Q25	Rating of Specialist +		85.7%	98 <sup>th</sup>	73.7%	46 <sup>th</sup>
GNC	Q23	Getting specialist appointment		80.0%	64 <sup>th</sup>	67.7%	9 <sup>th</sup>
GCQ	Q4	Getting urgent care		80.6%	6 <sup>th</sup>	80.5%	<5 <sup>th</sup>
CS	Q28	Treated with courtesy and respect		96.9%	82 <sup>nd</sup>	94.7%	46 <sup>th</sup>
CS	Q30	Ease of Filling Out Forms +		93.7%	9 <sup>th</sup>	94.4%	37 <sup>th</sup>
<b>RETAIN</b>							
CS	Q27	Provided information or help		87.3%	75 <sup>th</sup>	87.4%	77 <sup>th</sup>

\*Percentiles based on the PG Book of Business of the listed year.



# KEY DRIVERS OF RATING OF HEALTH PLAN

MEDICAID CHILD

		ALIGNMENT <i>Are your key drivers typical of the industry?</i>	KEY DRIVER RANK		ATTRIBUTE		SUMMARY RATE SCORE		PG BoB %TILE*	CLASSIFICATION	
			YOUR PLAN	INDUSTRY			YOUR PLAN	INDUSTRY		2023	2024
TOP 10 KEY DRIVERS					Q31	Rating of Health Plan	77.7%	72.0%	83 <sup>rd</sup> (+49)		
YOUR PLAN	These items have a relatively large impact on the Rating of Health Plan. <b>Leverage</b> these questions since they are important to your members and the Rating of Health Plan score for this plan. They are listed in descending order of importance for your plan.	✓	1	1	Q8	Rating of Health Care	71.4%	70.5%	51 <sup>st</sup> (+17)	Opp.	→ Power
		✓	2	2	Q21	Rating of Personal Doctor	80.1%	77.2%	72 <sup>nd</sup> (-5)	Power	Power
		✓	3	8	Q13	Dr. listened carefully	93.8%	95.6%	21 <sup>st</sup> (+3)	Opp.	Opp.
			4	13	Q16	Dr. explained things to child	92.6%	94.3%	30 <sup>th</sup> (-5)	Opp.	Opp.
			5	12	Q12	Dr. explained things	93.8%	94.6%	31 <sup>st</sup> (-17)	Opp.	Opp.
			6	15	Q20	Coordination of Care +	84.3%	84.3%	49 <sup>th</sup> (+9)	Opp.	Opp.
			7	14	Q17	Dr. spent enough time	87.4%	90.2%	21 <sup>st</sup> (-8)	Opp.	Opp.
INDUSTRY	PG Book of Business regression analysis has identified <b>Key Drivers</b> of Rating of Health Plan. The numbers represent the ranked importance across the entire Book of Business.	✓	8	9	Q14	Dr. showed respect	95.5%	97.0%	18 <sup>th</sup> (-15)	Wait	→ Opp.
		✓	9	5	Q9	Getting care, tests, or treatment	84.9%	90.3%	10 <sup>th</sup> (+8)	Wait	Wait
		✓	10	10	Q6	Getting routine care	76.1%	83.3%	12 <sup>th</sup> (+12)	Wait	Wait
			11	3	Q25	Rating of Specialist +	73.7%	73.7%	46 <sup>th</sup> (-52)	Retain	→ Wait
			12	4	Q23	Getting specialist appointment	67.7%	78.6%	9 <sup>th</sup> (-55)	Retain	→ Wait
			14	6	Q28	Treated with courtesy and respect	94.7%	94.4%	46 <sup>th</sup> (-36)	Retain	→ Wait
			16	7	Q27	Provided information or help	87.4%	83.2%	77 <sup>th</sup> (+2)	Retain	Retain

All Industry scores & rankings are calculated based on the 2024 PG Book of Business. Any items below the dotted line are Top 10 industry key drivers that are not identified as key drivers for your plan.

\*Differentials are based on comparisons to your plan's prior year percentile rankings.

# MEASURE ANALYSES

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Measure Details and Summary Rate Scores

- Alameda Alliance for Health

# SECTION INFORMATION

**Drilling Down Into Composites And Ratings** This section is designed to give your plan a detailed report on the performance of each Star Rating measure as well as a few other key metrics. The measure analysis section contains:

**Rating & Composite** level information including...

- Percentile ranking and benchmark performance
- Historic scores
- Market performance

**Attribute** level information for composites including...

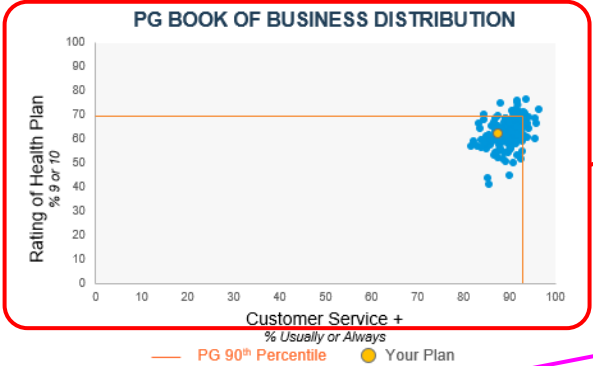
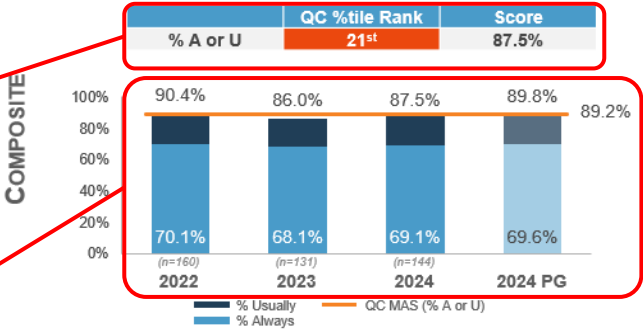
- Gate questions
- Percentile ranking and benchmark performance
- Summary rate score trending

All scores displayed in this section are summary rate scores (notated with 'SRS').

Percentile Bands		
≥90 <sup>th</sup>		
67 <sup>th</sup> – 89 <sup>th</sup>		
33 <sup>rd</sup> – 66 <sup>th</sup>		
10 <sup>th</sup> – 32 <sup>nd</sup>		
<10 <sup>th</sup>		

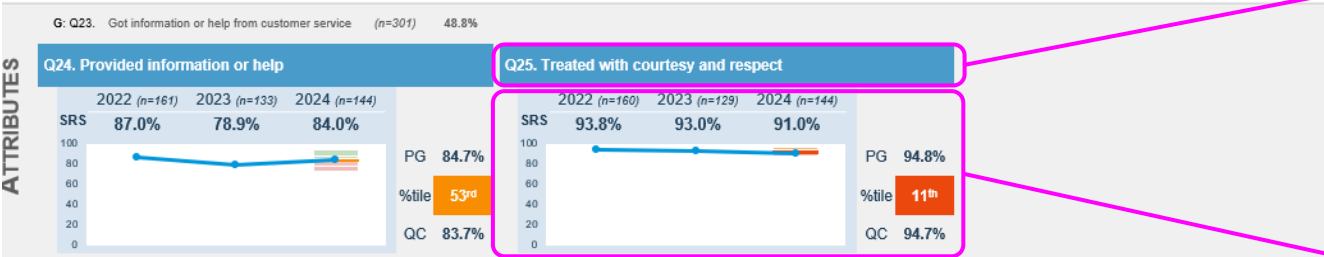
Your plan's performance ranking along with **Summary Rate Score** are displayed at the top for quick reference.

Your plan's current year **Summary Rate Score** and base size along with previous two years, PG BoB and Quality Compass national data are displayed.



Your plan's **Summary Rate Score** is plotted against the PG Book of Business to provide a visual representation of market performance. The orange line represents the PG 90<sup>th</sup> percentile.

Gate questions (indicated by "G:") for attributes are displayed above attributes – scores displayed are % Yes



For composites – all corresponding attributes that roll-up into the composite score are displayed:

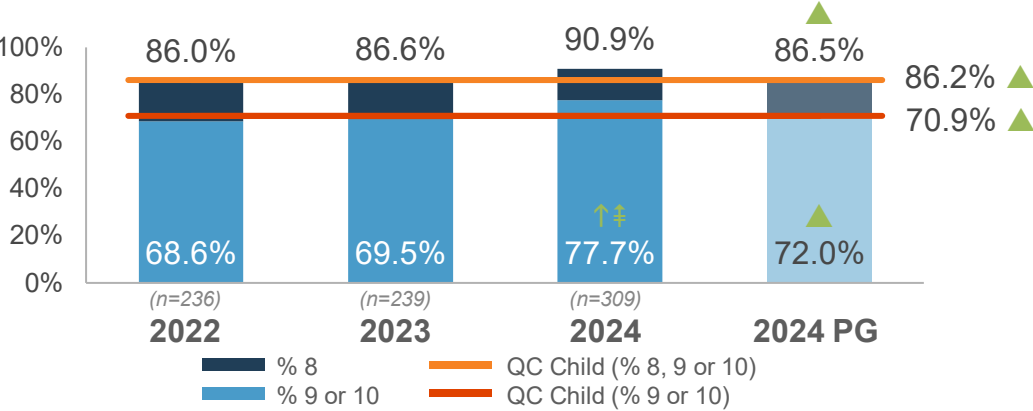
- Historic bases and **Summary Rate Scores** along with significant changes in trend notated
- Benchmark comparisons along with significant differences notated
- Percentile ranking against **Quality Compass**
- Graphic representation of trend and 2023 **Quality Compass** percentile bands

# RATINGS

MEDICAID CHILD

## RATING OF HEALTH PLAN

	QC %tile Rank	Score
% 8, 9 or 10	88 <sup>th</sup>	90.9%
% 9 or 10	87 <sup>th</sup>	77.7%



### Key Drivers Of The Rating Of The Health Plan

#### POWER

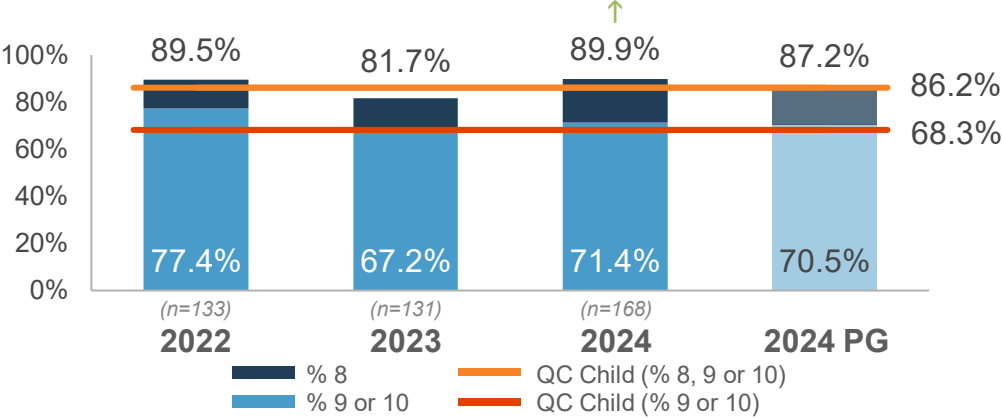
- Q8 Rating of Health Care
- Q21 Rating of Personal Doctor

#### OPPORTUNITIES

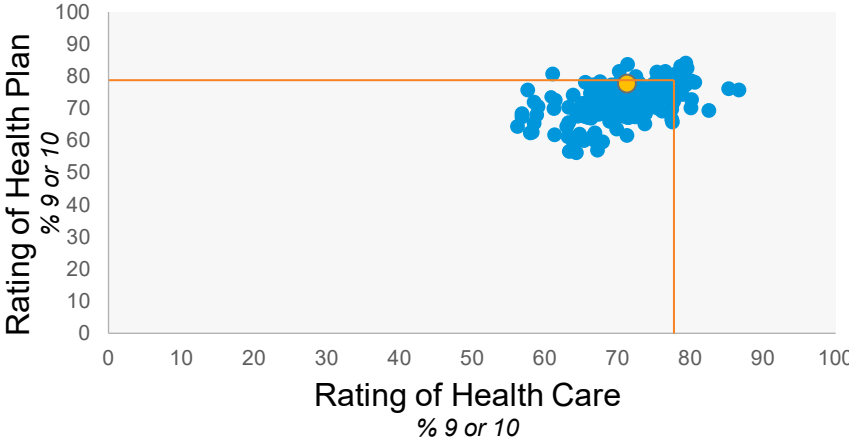
- Q13 Dr. listened carefully
- Q16 Dr. explained things to child
- Q12 Dr. explained things
- Q20 Coordination of Care +
- Q17 Dr. spent enough time
- Q14 Dr. showed respect

## RATING OF HEALTH CARE

	QC %tile Rank	Score
% 8, 9 or 10	87 <sup>th</sup>	89.9%
% 9 or 10	74 <sup>th</sup>	71.4%



### PG BOOK OF BUSINESS DISTRIBUTION



**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼).

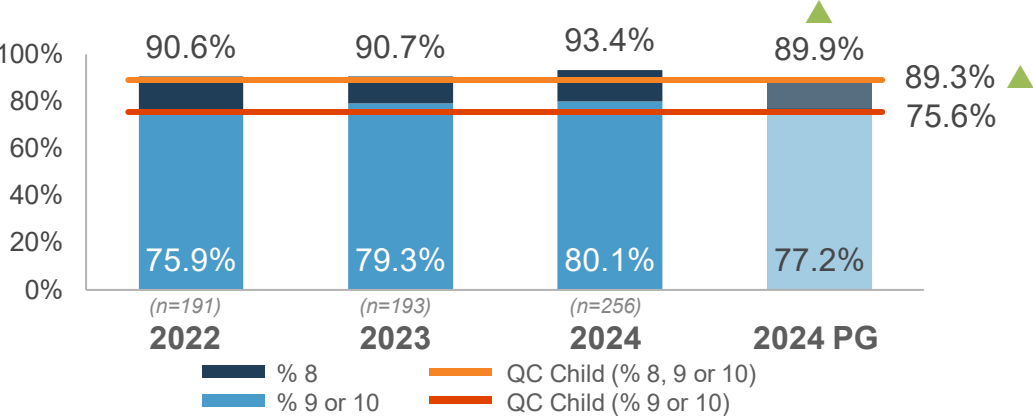
**Denominator less than 100. NCQA will assign an NA to this measure.**

# RATINGS

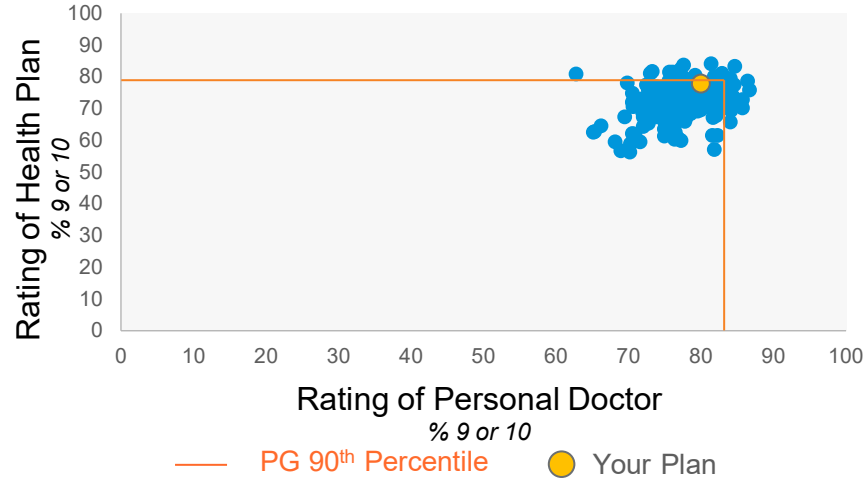
MEDICAID CHILD

## RATING OF PERSONAL DOCTOR

	QC %tile Rank	Score
% 8, 9 or 10	96 <sup>th</sup>	93.4%
% 9 or 10	88 <sup>th</sup>	80.1%



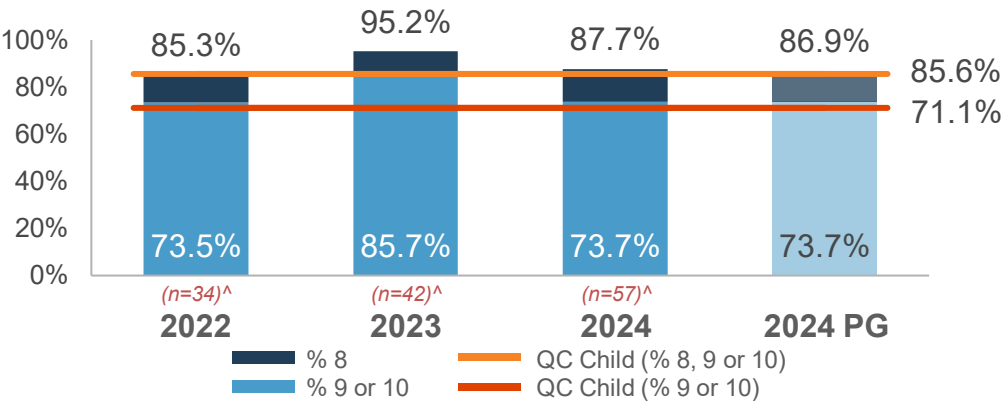
### PG BOOK OF BUSINESS DISTRIBUTION



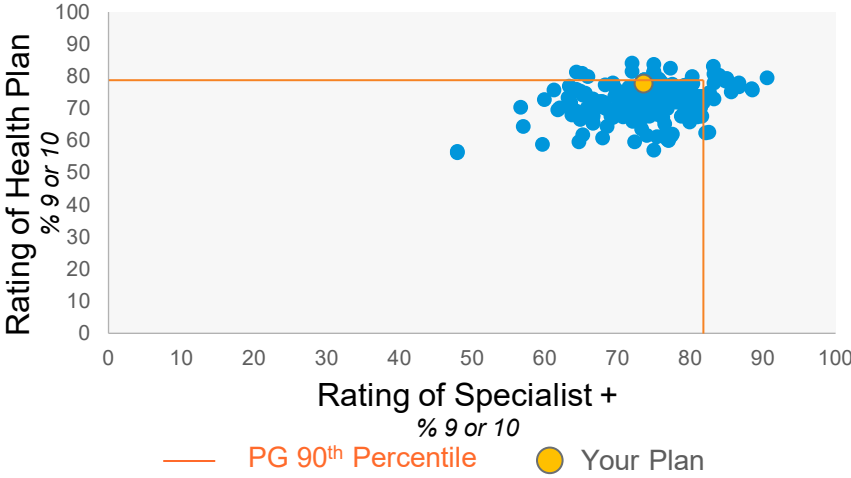
**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼).

## RATING OF SPECIALIST +

	QC %tile Rank	Score
% 8, 9 or 10	68 <sup>th</sup>	87.7%
% 9 or 10	68 <sup>th</sup>	73.7%



### PG BOOK OF BUSINESS DISTRIBUTION



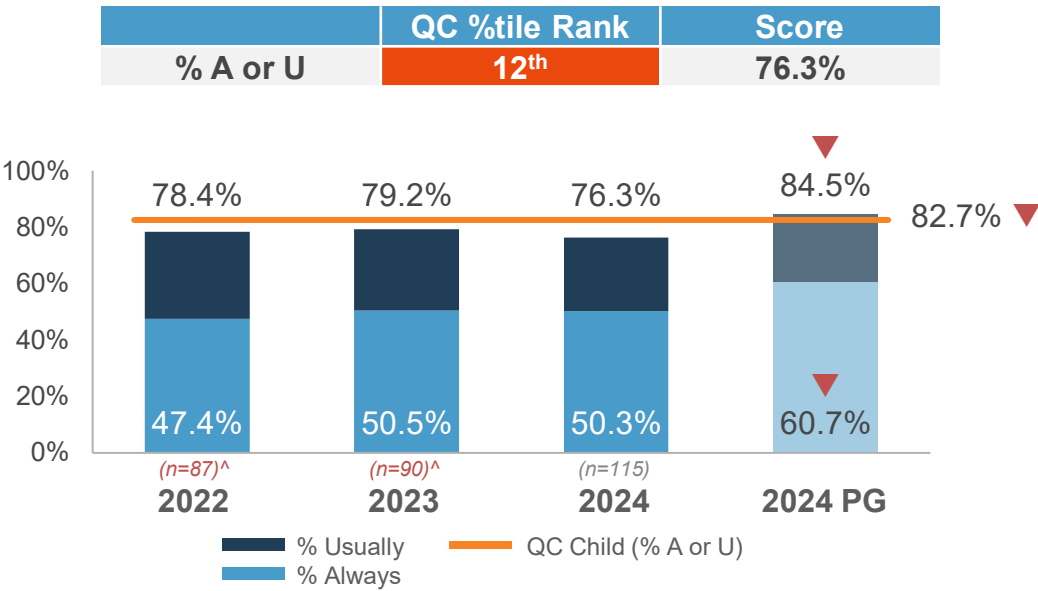
**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼).

<sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.

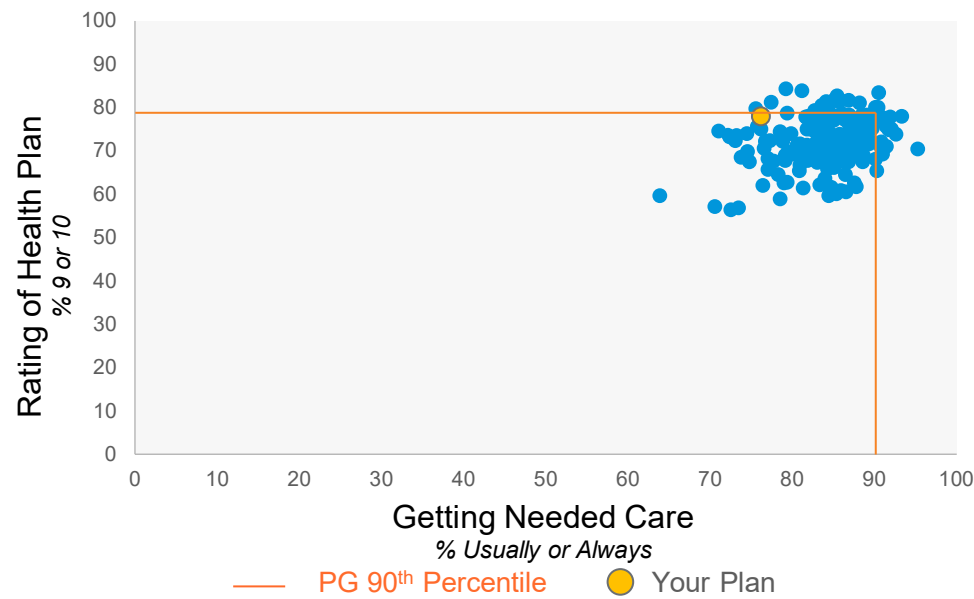
# GETTING NEEDED CARE

MEDICAID CHILD

COMPOSITE

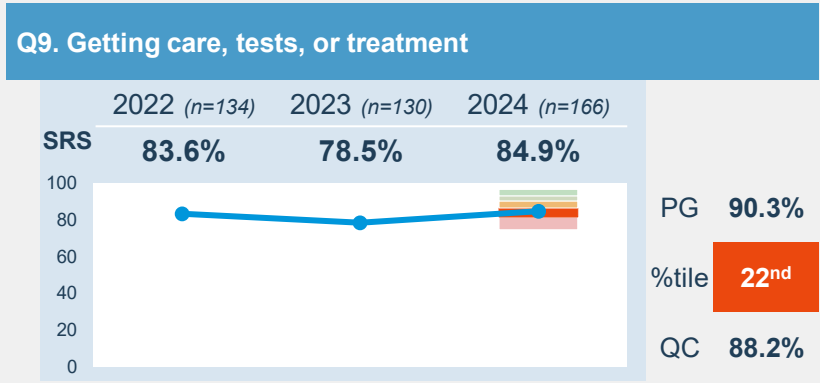


## PG BOOK OF BUSINESS DISTRIBUTION



ATTRIBUTES

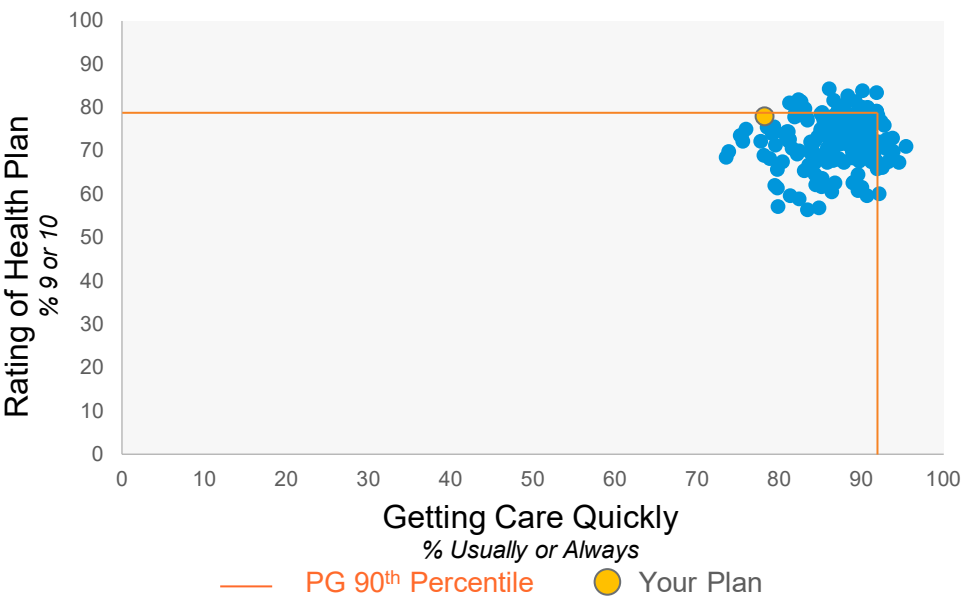
G: Q22. Made appointments to see a specialist in the last 6 months (n=320) 20.6%



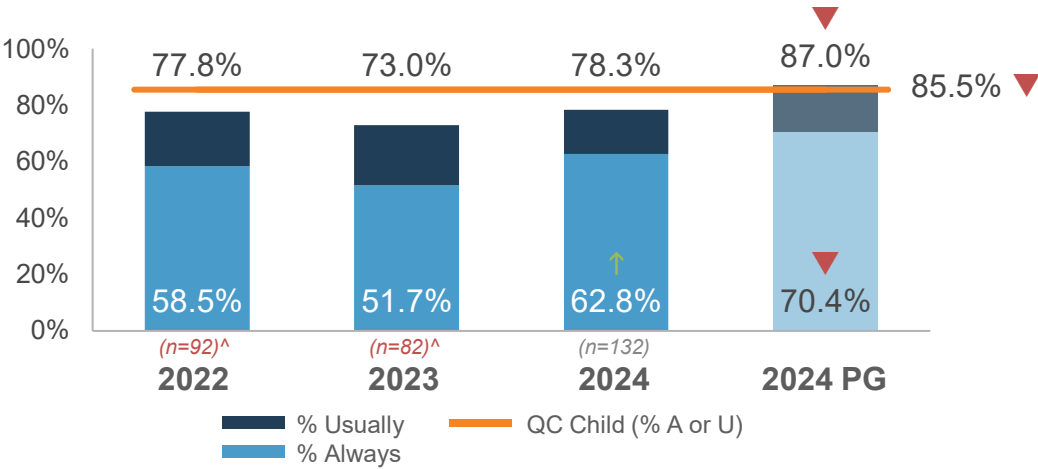
# GETTING CARE QUICKLY

MEDICAID CHILD

PG BOOK OF BUSINESS DISTRIBUTION



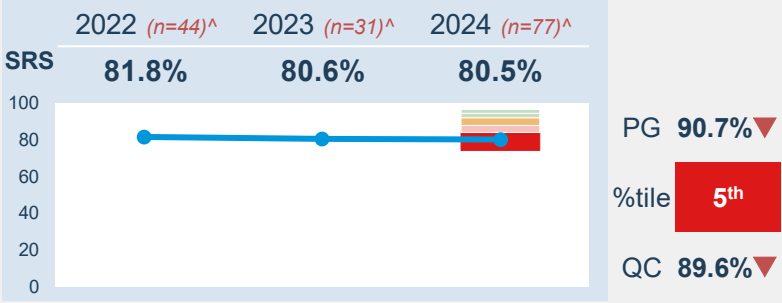
	QC %tile Rank	Score
% A or U	9 <sup>th</sup>	78.3%



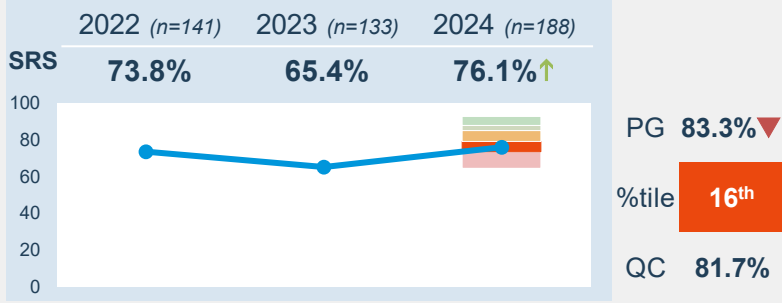
G: Q3. Had illness, injury or condition that needed care right away (n=317) 24.9%

G: Q5. Made appointments for check-ups or routine care at doctor's office or clinic (n=317) 60.9%

Q4. Getting urgent care



Q6. Getting routine care



Significance Testing: Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼).

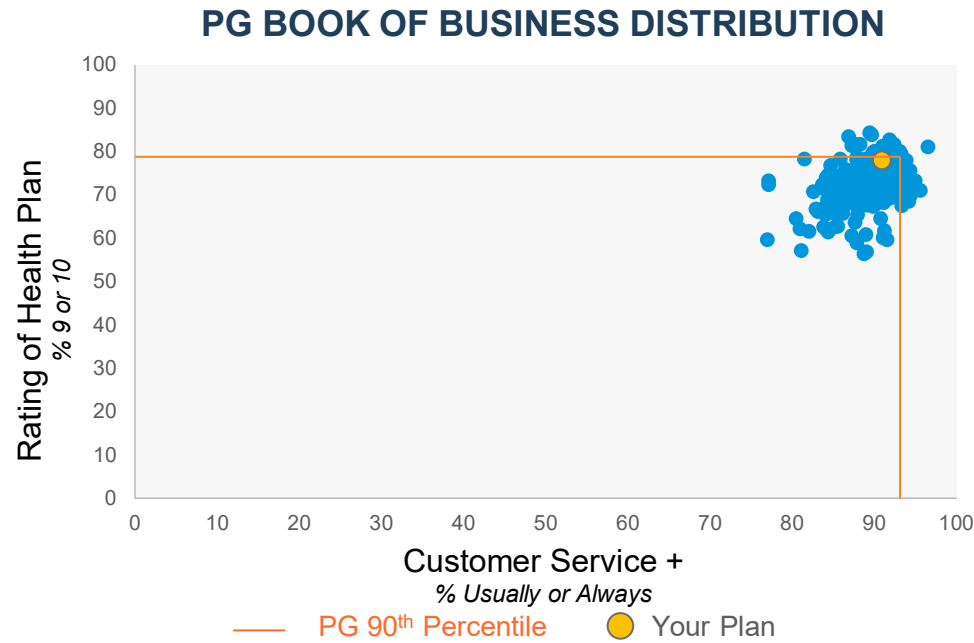
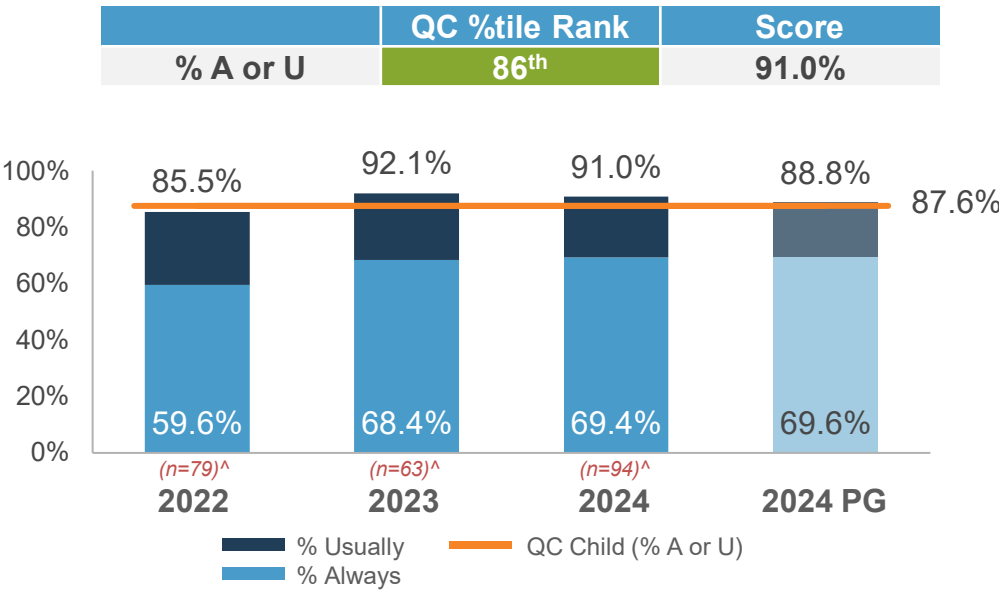
<sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.



# CUSTOMER SERVICE +

MEDICAID CHILD

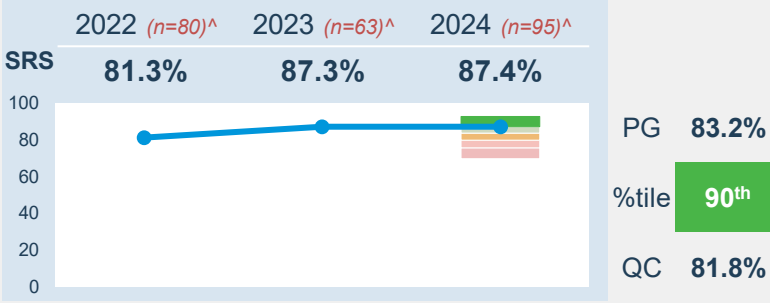
COMPOSITE



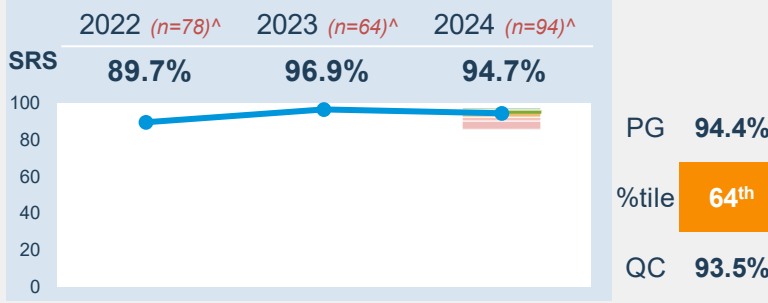
ATTRIBUTES

G: Q26. Got information or help from customer service (n=313) 30.7%

## Q27. Provided information or help



## Q28. Treated with courtesy and respect

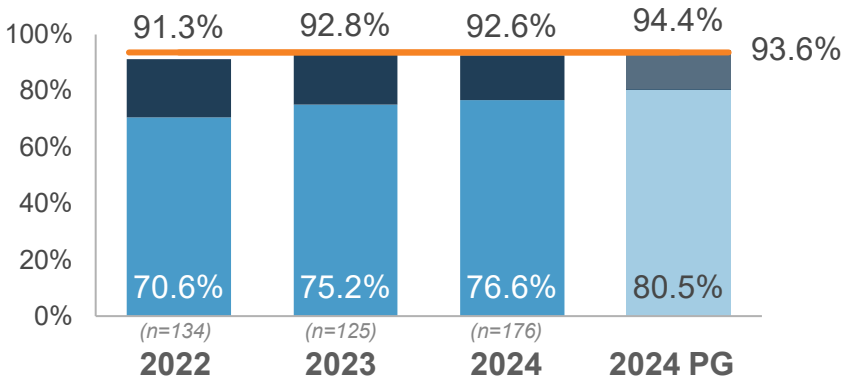


# How Well Doctors Communicate +

MEDICAID CHILD

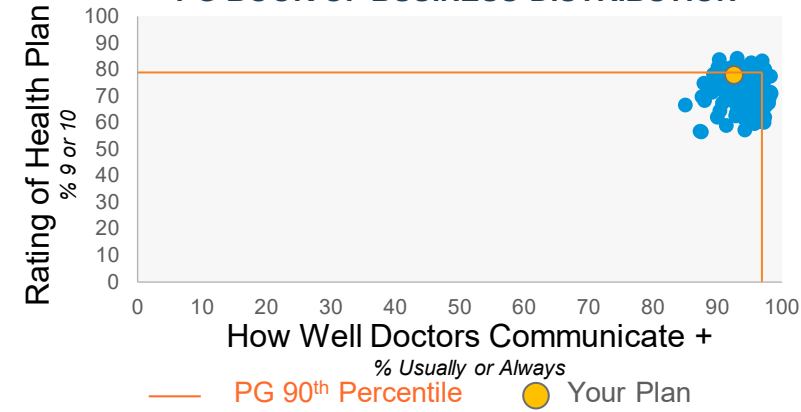
## COMPOSITE

	QC %tile Rank	Score
% A or U	33 <sup>rd</sup>	92.6%



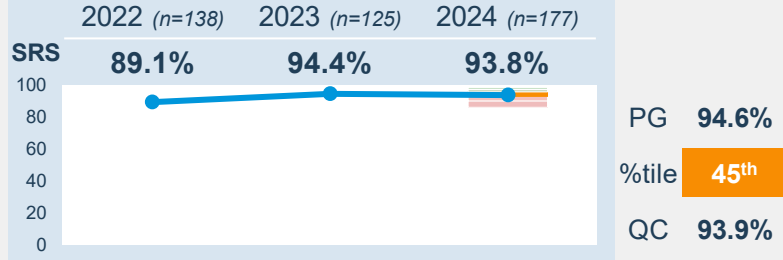
■ % Usually    ■ % Always    — QC Child (% A or U)

## PG BOOK OF BUSINESS DISTRIBUTION

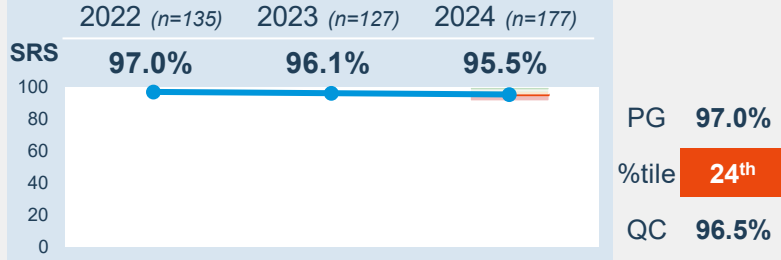


## ATTRIBUTES

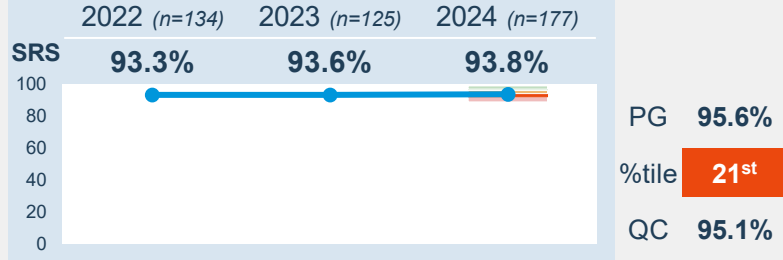
### Q12. Dr. explained things



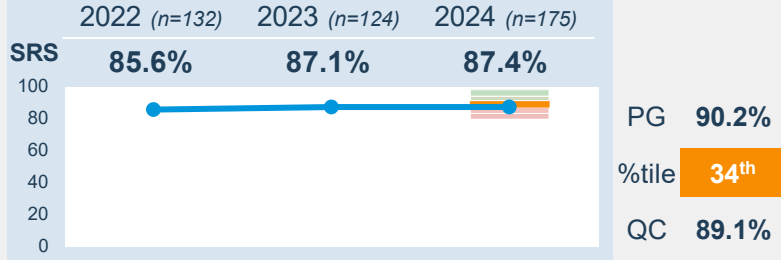
### Q14. Dr. showed respect



### Q13. Dr. listened carefully



### Q17. Dr. spent enough time

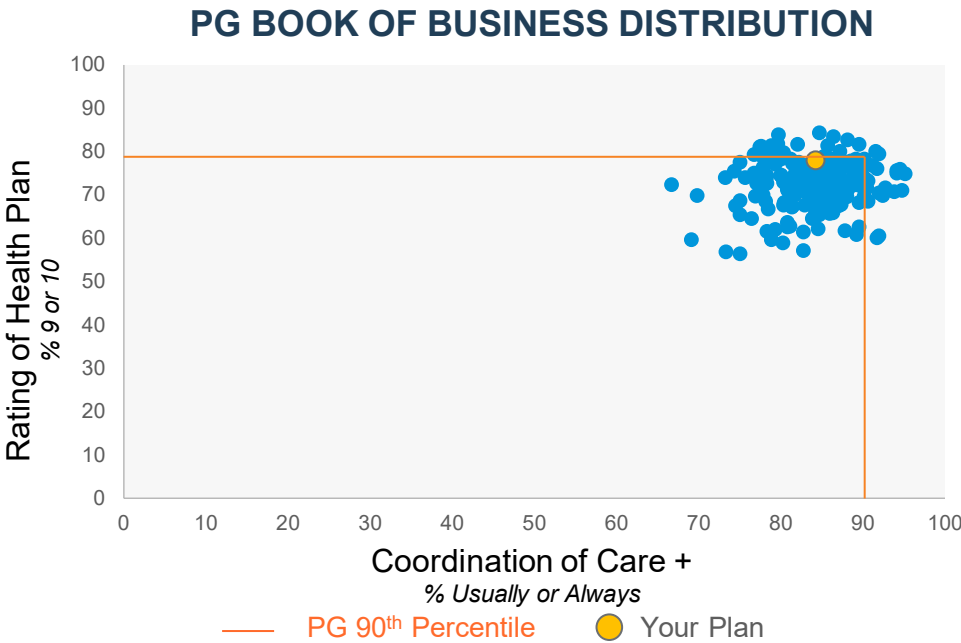
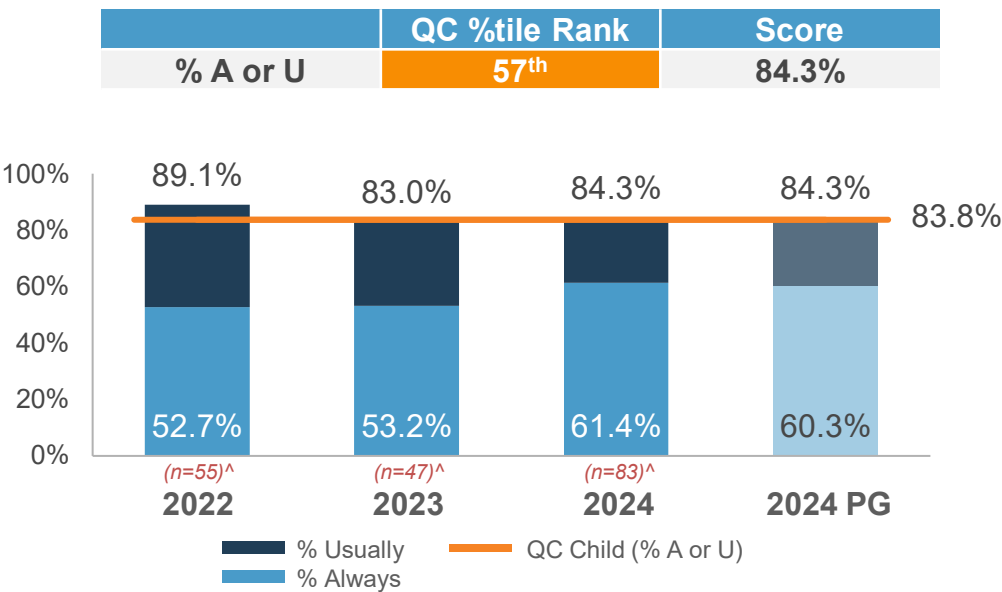


**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼).

<sup>^</sup>Denominator less than 100. NCQA will assign an NA to this measure.

# COORDINATION OF CARE +

MEDICAID CHILD



# SUMMARY OF TREND AND BENCHMARKS

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- Alameda Alliance for Health

# SECTION INFORMATION

**Trend and Benchmark Comparisons** The CAHPS® 5.1H survey is designed to use composite scores to facilitate the aggregation of information and the communication of results. Questions are combined into composite categories comprising a particular service area managed by your plan. These composites, the questions that make up composites (attributes), additional measures, and rating questions are shown on the following pages.

Summary Rate Scores: Shows how your plan's composite and key question Summary Rates compare to trend data (if applicable) and benchmark scores. To help you identify how your plan's population compares to other plans and to previous data, statistically significant differences are highlighted.

Plan Percentile Rankings: Shows your plan's Summary Rates and percentile rankings in relation to the benchmarks.

## Significance Testing

**Green** – Current year score is significantly higher than the 2023 score (↑), the 2022 score (⬆) or benchmark score (▲).

**Red** – Current year score is significantly lower than the 2023 score (↓), the 2022 score (⬆) or benchmark score (▼).

No color denotes that there was no significant difference between the percentages or that there was insufficient sample size to conduct the statistical test. All significance testing is performed at the 95% confidence level.

# BENCHMARK INFORMATION

<div>Available Benchmarks</div> <div>The following benchmarks are used throughout the report.</div>			
	2023 Quality Compass® All Plans	2023 NCQA 1-100 Benchmark	2024 Press Ganey Book of Business
	Includes all Medicaid Child samples that submitted data to NCQA in 2023.	A percentile benchmark (with values ranging from the first through the one hundredth percentile) calculated by NCQA and derived from Medicaid Child data submitted to NCQA in 2023.	Includes all Medicaid samples that contracted with Press Ganey to administer the MY 2023 CAHPS 5.1H survey and submitted data to NCQA.
PROS	<ul style="list-style-type: none"><li>Is presented in NCQA's The State of Health Care Quality</li></ul>	<ul style="list-style-type: none"><li>Utilized by Press Ganey to calculate approximate percentile ranking of plan scores in relation to the Quality Compass® All Plans benchmark</li></ul>	<ul style="list-style-type: none"><li>Provides a benchmark for each question from the survey</li><li>Permits precise percentile ranking of plan compared to benchmark</li></ul>
CONS	<ul style="list-style-type: none"><li>Only contains benchmarks for certain key questions, composites, and rating questions</li></ul>	<ul style="list-style-type: none"><li>Only contains benchmarks for certain key questions, composites, and rating questions</li></ul>	<ul style="list-style-type: none"><li>Contains fewer plans than the Quality Compass® All Plans Benchmarks</li></ul>
SIZE	177 Plans	177 Plans	200 Plans / 50,297 Respondents

# SUMMARY RATE SCORES

## MEDICAID CHILD

	2024 Valid n	2022	2023	2024	2024 PG BoB	2023 QC
<b>Rating Questions (% 9 or 10)</b>						
★ Q31. Rating of Health Plan	309	68.6%	69.5%	77.7%	72.0%	70.9%
★ Q8. Rating of Health Care	168	77.4%	67.2%	71.4%	70.5%	68.3%
★ Q21. Rating of Personal Doctor	256	75.9%	79.3%	80.1%	77.2%	75.6%
Q25. Rating of Specialist +	57^	73.5%	85.7%	73.7%	73.7%	71.1%
<b>Rating Questions (% 8, 9 or 10)</b>						
Q31. Rating of Health Plan	309	86.0%	86.6%	90.9%	86.5%	86.2%
Q8. Rating of Health Care	168	89.5%	81.7%	89.9%	87.2%	86.2%
Q21. Rating of Personal Doctor	256	90.6%	90.7%	93.4%	89.9%	89.3%
Q25. Rating of Specialist +	57^	85.3%	95.2%	87.7%	86.9%	85.6%
★ <b>Getting Needed Care (% Usually or Always)</b>	115	78.4%	79.2%	76.3%	84.5%	82.7%
Q9. Getting care, tests, or treatment	166	83.6%	78.5%	84.9%	90.3%	88.2%
Q23. Getting specialist appointment	65^	73.2%	80.0%	67.7%	78.6%	78.1%
★ <b>Getting Care Quickly (% Usually or Always)</b>	132	77.8%	73.0%	78.3%	87.0%	85.5%
Q4. Getting urgent care	77^	81.8%	80.6%	80.5%	90.7%	89.6%
Q6. Getting routine care	188	73.8%	65.4%	76.1%	83.3%	81.7%
<b>Q20. Coordination of Care +</b>	83^	89.1%	83.0%	84.3%	84.3%	83.8%
<b>Customer Service + (% Usually or Always)</b>	94^	85.5%	92.1%	91.0%	88.8%	87.6%
Q27. Provided information or help	95^	81.3%	87.3%	87.4%	83.2%	81.8%
Q28. Treated with courtesy and respect	94^	89.7%	96.9%	94.7%	94.4%	93.5%
<b>How Well Doctors Communicate + (% Usually or Always)</b>	176	91.3%	92.8%	92.6%	94.4%	93.6%
Q12. Dr. explained things	177	89.1%	94.4%	93.8%	94.6%	93.9%
Q13. Dr. listened carefully	177	93.3%	93.6%	93.8%	95.6%	95.1%
Q14. Dr. showed respect	177	97.0%	96.1%	95.5%	97.0%	96.5%
Q17. Dr. spent enough time	175	85.6%	87.1%	87.4%	90.2%	89.1%
<b>Q30. Ease of Filling Out Forms + (% Usually or Always)</b>	305	96.6%	93.7%	94.4%	94.9%	95.8%

**Significance Testing:** Current score is significantly higher/lower than the 2023 score (/), the 2022 score (///), or benchmark score (/).

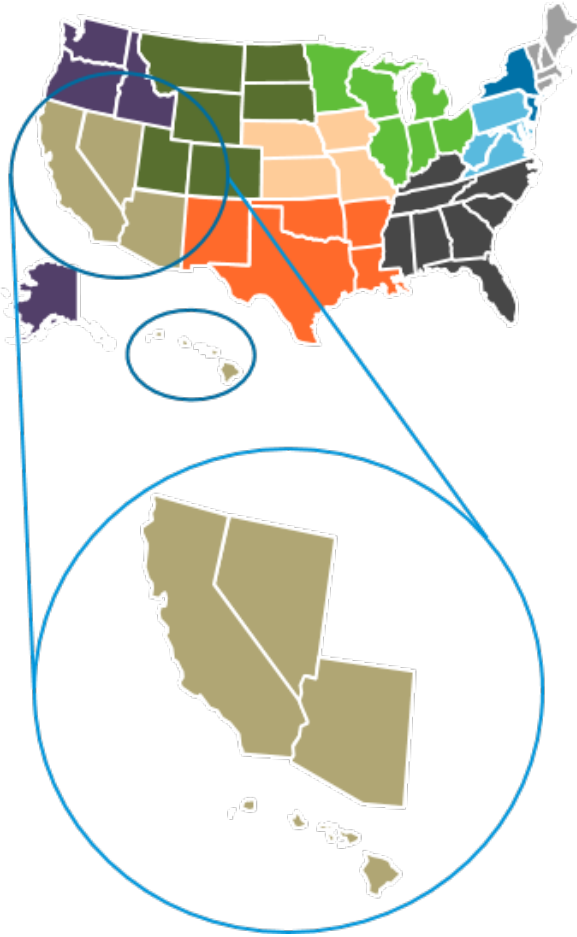
^Denominator less than 100. NCQA will assign an NA to this measure.

# REGIONAL PERFORMANCE

MEDICAID CHILD

	SUMMARY RATE	2024 PG BoB REGION
Rating Questions (% 9 or 10)		
★ Q31. Rating of Health Plan	77.7%	73.4%
★ Q8. Rating of Health Care	71.4%	68.7%
★ Q21. Rating of Personal Doctor	80.1%	75.0% <span>◆</span>
Q25. Rating of Specialist +	73.7%	73.3%
Rating Questions (% 8, 9 or 10)		
Q31. Rating of Health Plan	90.9%	88.2%
Q8. Rating of Health Care	89.9%	85.6%
Q21. Rating of Personal Doctor	93.4%	89.0% <span>◆</span>
Q25. Rating of Specialist +	87.7%	86.5%
★ Getting Needed Care (% Usually or Always)	76.3%	80.2%
Q9. Getting care, tests, or treatment	84.9%	85.9%
Q23. Getting specialist appointment	67.7%	74.4%
★ Getting Care Quickly (% Usually or Always)	78.3%	81.6%
Q4. Getting urgent care	80.5%	85.6%
Q6. Getting routine care	76.1%	77.6%
Q20. Coordination of Care +	84.3%	81.7%
Customer Service + (% Usually or Always)	91.0%	89.1%
Q27. Provided information or help	87.4%	84.0%
Q28. Treated with courtesy and respect	94.7%	94.3%
How Well Doctors Communicate + (% Usually or Always)	92.6%	92.0%
Q12. Dr. explained things	93.8%	92.0%
Q13. Dr. listened carefully	93.8%	94.0%
Q14. Dr. showed respect	95.5%	96.1%
Q17. Dr. spent enough time	87.4%	86.1%
Q30. Ease of Filling Out Forms + (% Usually or Always)	94.4%	94.7%

**HHS Regions:** The regions used align with the U.S. Department of Health and Human Services regions.



- Region 9: San Francisco**
- American Samoa (not shown)
  - California
  - Hawaii
  - Arizona
  - Guam (not shown)
  - Nevada

**Significance Testing**

Current year score is significantly higher/lower (◆/◆) than the 2024 PG BoB Region score.



# PERCENTILE RANKINGS

MEDICAID CHILD

		2024 Plan Score	QC %tile	National Percentiles from 2023 Quality Compass								PG %tile	National Percentiles from 2024 PG Book of Business									
				5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>		5 <sup>th</sup>	10 <sup>th</sup>	25 <sup>th</sup>	33 <sup>rd</sup>	50 <sup>th</sup>	67 <sup>th</sup>	75 <sup>th</sup>	90 <sup>th</sup>	95 <sup>th</sup>
Rating Questions (% 9 or 10)																						
★	Q31. Rating of Health Plan	77.7%	87 <sup>th</sup>	58.8	63.1	68.4	69.4	71.4	73.8	74.8	78.2	79.7	83 <sup>rd</sup>	61.4	64.5	69.1	70.3	72.3	74.7	76.1	78.8	81.1
★	Q8. Rating of Health Care	71.4%	74 <sup>th</sup>	60.4	62.2	65.2	66.4	68.8	70.7	71.4	74.2	76.2	51 <sup>st</sup>	59.7	63.3	67.0	68.9	71.2	73.0	74.8	77.8	79.3
★	Q21. Rating of Personal Doctor	80.1%	88 <sup>th</sup>	69.1	70.5	73.0	74.2	75.8	77.9	78.5	80.2	81.4	72 <sup>nd</sup>	70.4	71.8	74.4	75.5	77.3	79.3	80.6	83.2	84.2
	Q25. Rating of Specialist +	73.7%	68 <sup>th</sup>	63.0	64.4	66.4	68.0	70.8	73.6	75.0	77.1	81.0	46 <sup>th</sup>	63.2	64.4	68.3	70.9	74.4	76.4	77.8	81.8	83.7
Rating Questions (% 8, 9 or 10)																						
	Q31. Rating of Health Plan	90.9%	88 <sup>th</sup>	77.7	81.3	84.2	85.4	86.7	88.4	89.3	91.3	91.8	84 <sup>th</sup>	78.8	81.7	84.7	85.4	86.7	88.8	89.5	91.6	92.6
	Q8. Rating of Health Care	89.9%	87 <sup>th</sup>	81.0	81.6	84.1	84.9	86.5	88.0	88.5	90.2	91.0	73 <sup>rd</sup>	81.0	83.1	85.3	86.1	87.6	89.3	90.0	91.5	91.9
	Q21. Rating of Personal Doctor	93.4%	96 <sup>th</sup>	84.9	86.1	87.9	88.4	89.5	90.8	91.4	92.3	93.1	91 <sup>st</sup>	85.5	86.3	88.1	88.6	90.0	91.3	92.0	93.3	94.3
	Q25. Rating of Specialist +	87.7%	68 <sup>th</sup>	77.8	80.6	83.2	84.5	86.4	87.5	88.6	89.8	91.3	57 <sup>th</sup>	78.9	80.6	84.0	84.8	86.8	88.9	90.0	92.1	93.7
★	Getting Needed Care (% U/A)	76.3%	12 <sup>th</sup>	73.3	75.1	79.2	80.5	83.0	85.7	86.5	89.3	90.3	8 <sup>th</sup>	74.0	76.7	81.3	82.9	85.1	86.8	88.1	90.2	91.1
	Q9. Getting care, tests, or treatment	84.9%	22 <sup>nd</sup>	80.1	81.8	85.6	86.7	88.9	90.6	91.5	93.3	94.1	10 <sup>th</sup>	81.4	84.7	87.9	89.1	90.6	92.8	93.4	94.9	96.2
	Q23. Getting specialist appointment	67.7%	<5 <sup>th</sup>	70.0	71.7	74.8	75.3	77.4	79.8	81.1	85.7	88.0	9 <sup>th</sup>	65.1	68.1	73.5	76.1	79.6	82.0	83.3	86.6	88.3
★	Getting Care Quickly (% U/A)	78.3%	9 <sup>th</sup>	75.1	78.9	82.3	83.6	86.0	88.5	89.5	91.0	92.4	<5 <sup>th</sup>	78.7	80.2	84.2	85.4	87.7	89.6	90.4	92.0	92.7
	Q4. Getting urgent care	80.5%	5 <sup>th</sup>	78.6	84.3	87.3	87.9	90.4	92.2	93.0	94.7	95.5	<5 <sup>th</sup>	81.9	83.5	87.5	89.2	91.5	93.2	94.4	95.9	97.2
	Q6. Getting routine care	76.1%	16 <sup>th</sup>	72.0	73.8	78.3	79.2	82.0	85.2	86.0	88.2	89.6	12 <sup>th</sup>	73.4	75.5	80.3	81.7	84.6	86.3	87.4	89.4	90.6
	Q20. Coordination of Care +	84.3%	57 <sup>th</sup>	75.3	77.1	80.9	82.4	83.9	86.5	87.0	89.5	91.0	49 <sup>th</sup>	75.0	77.5	80.3	81.4	84.4	86.1	87.2	90.2	91.9
	Customer Service + (% U/A)	91.0%	86 <sup>th</sup>	82.6	83.6	85.9	86.7	87.8	89.0	89.9	91.3	92.4	69 <sup>th</sup>	83.0	84.3	86.9	87.7	89.1	90.8	91.4	93.1	93.8
	Q27. Provided information or help	87.4%	90 <sup>th</sup>	74.6	75.9	78.8	79.9	81.9	83.7	85.1	87.2	89.2	77 <sup>th</sup>	75.1	76.8	79.5	80.6	83.8	86.2	87.2	89.5	90.3
	Q28. Treated with courtesy and respect	94.7%	64 <sup>th</sup>	89.2	90.6	92.2	92.6	93.5	94.7	95.3	96.5	97.1	46 <sup>th</sup>	89.1	90.7	92.3	93.4	94.9	96.2	96.7	98.1	98.5
	How Well Doctors Communicate + (% U/A)	92.6%	33 <sup>rd</sup>	90.0	90.9	92.0	92.6	93.8	94.8	95.5	96.1	96.4	21 <sup>st</sup>	89.6	91.0	92.9	93.7	94.7	95.5	95.9	96.9	97.4
	Q12. Dr. explained things	93.8%	45 <sup>th</sup>	89.1	90.0	92.2	93.0	94.1	95.5	95.9	97.1	97.5	31 <sup>st</sup>	88.6	90.5	93.1	93.9	95.0	96.1	96.6	97.6	98.0
	Q13. Dr. listened carefully	93.8%	21 <sup>st</sup>	91.6	92.4	94.0	94.4	95.3	96.2	96.6	97.2	97.9	21 <sup>st</sup>	91.3	92.4	94.1	94.9	95.6	96.8	97.1	98.3	98.7
	Q14. Dr. showed respect	95.5%	24 <sup>th</sup>	94.1	94.5	95.5	95.8	96.6	97.1	97.5	98.2	98.8	18 <sup>th</sup>	94.0	94.8	95.9	96.3	97.0	97.9	98.3	99.0	99.2
	Q17. Dr. spent enough time	87.4%	34 <sup>th</sup>	82.1	83.1	86.5	87.2	89.5	91.2	92.4	93.9	95.2	21 <sup>st</sup>	81.9	83.4	88.0	89.0	90.8	92.3	93.3	94.9	95.9
	Q30. Ease of Filling Out Forms + (% U/A)	94.4%	19 <sup>th</sup>	93.2	93.8	94.7	95.1	95.9	96.6	97.0	97.8	98.3	37 <sup>th</sup>	91.3	92.1	93.7	94.2	95.1	96.3	96.6	97.3	97.9

# PROFILE OF SURVEY RESPONDENTS

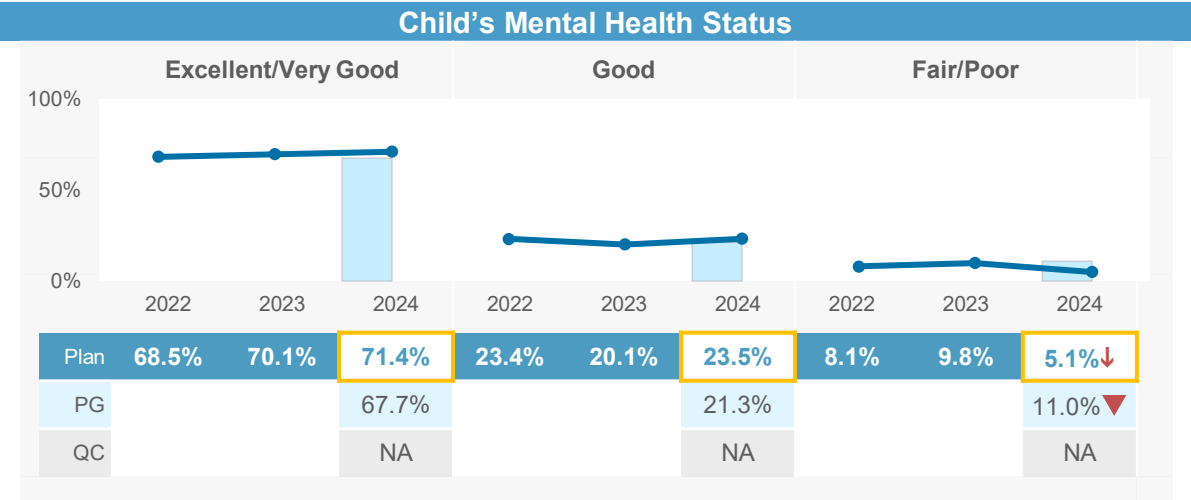
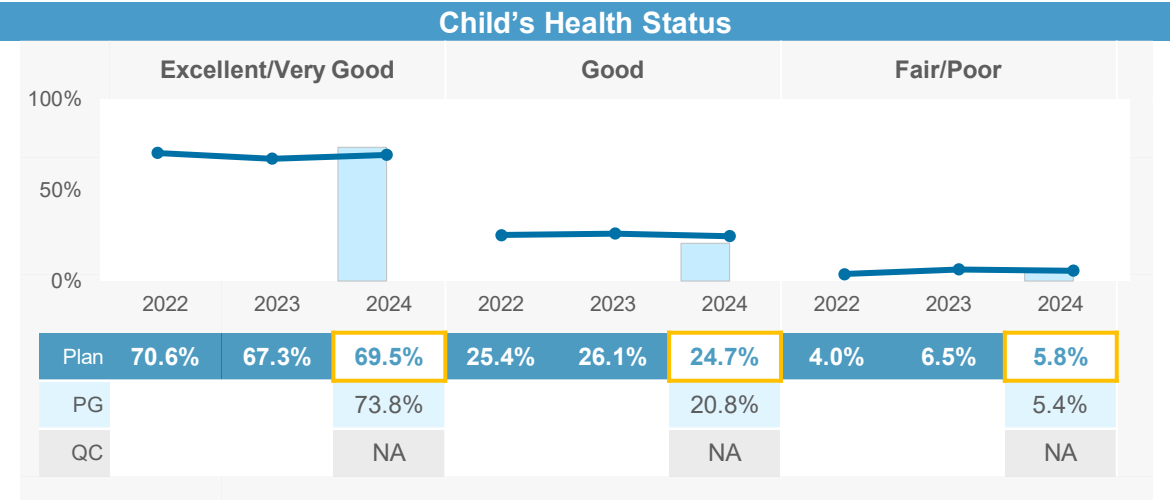
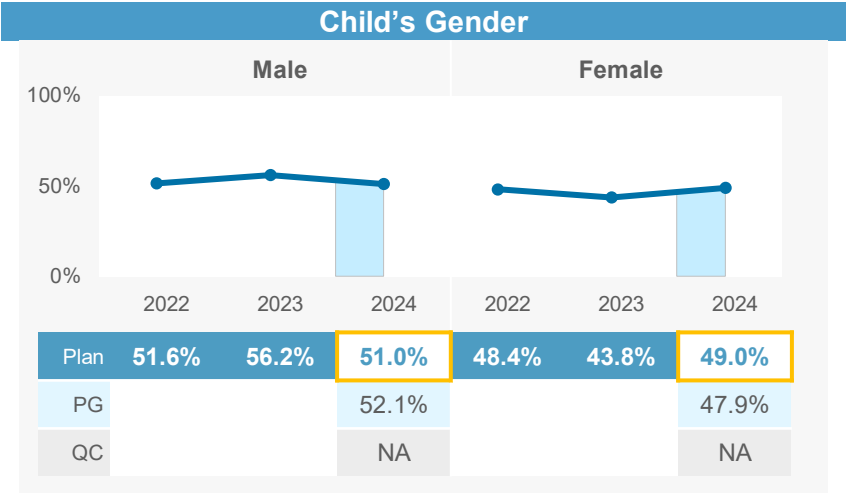
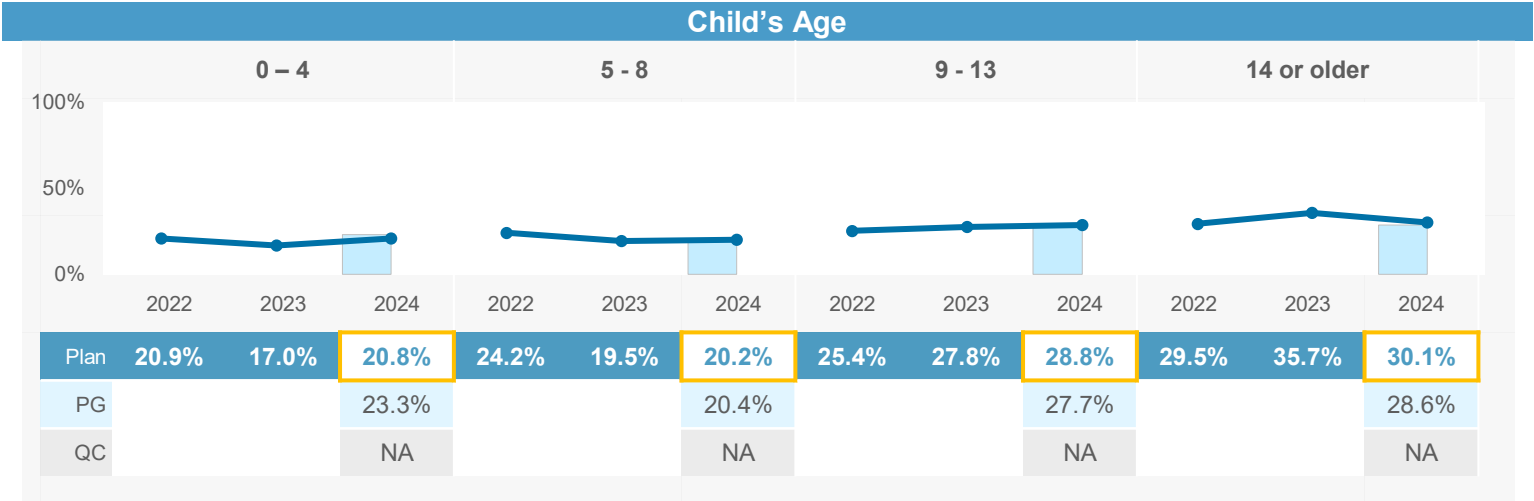
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## DEMOGRAPHIC COMPOSITION

- Alameda Alliance for Health

# PROFILE OF SURVEY RESPONDENTS

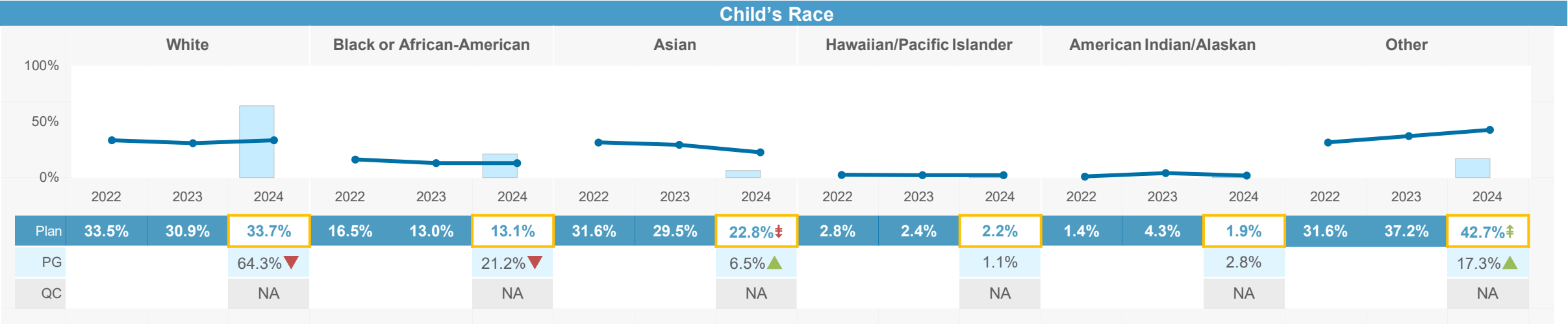
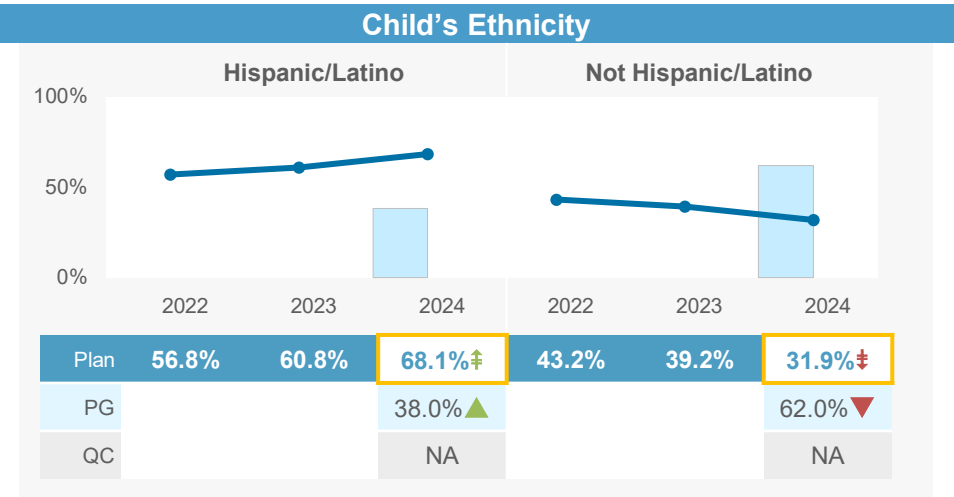
MEDICAID CHILD



**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼).  
**Benchmarks:** PG refers to the 2024 PG Book of Business benchmark. QC refers to the 2023 QC National Data benchmark. NCQA did not publish demographics for the 2023 benchmark.

# PROFILE OF SURVEY RESPONDENTS

MEDICAID CHILD

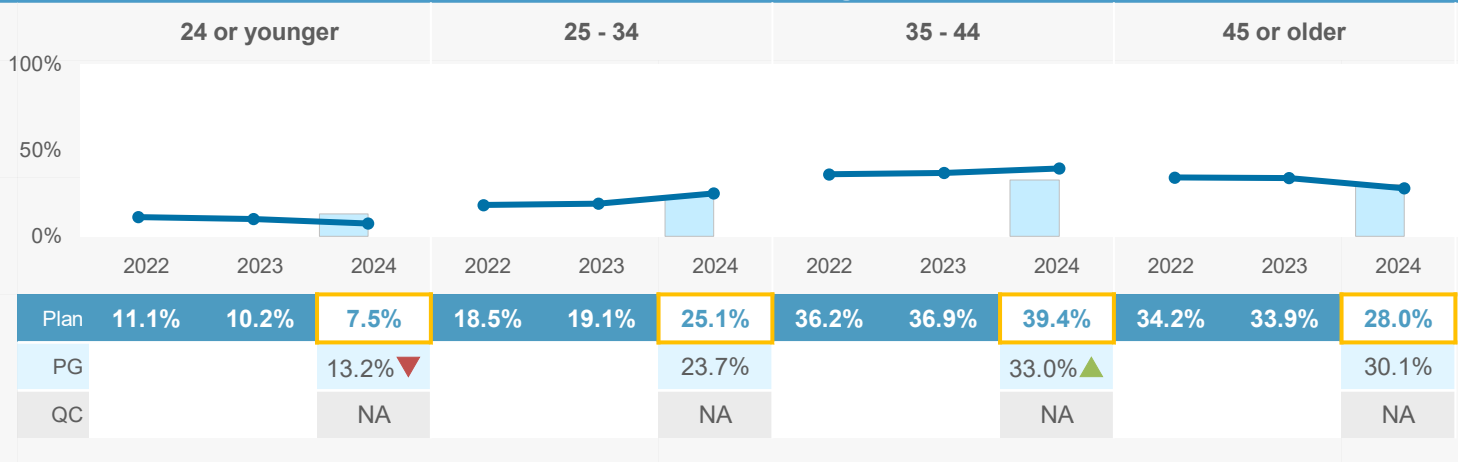


**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↕/↕) or benchmark score (▲/▼).  
**Benchmarks:** PG refers to the 2024 PG Book of Business benchmark. QC refers to the 2023 QC National Data benchmark. NCQA did not publish demographics for the 2023 benchmark.

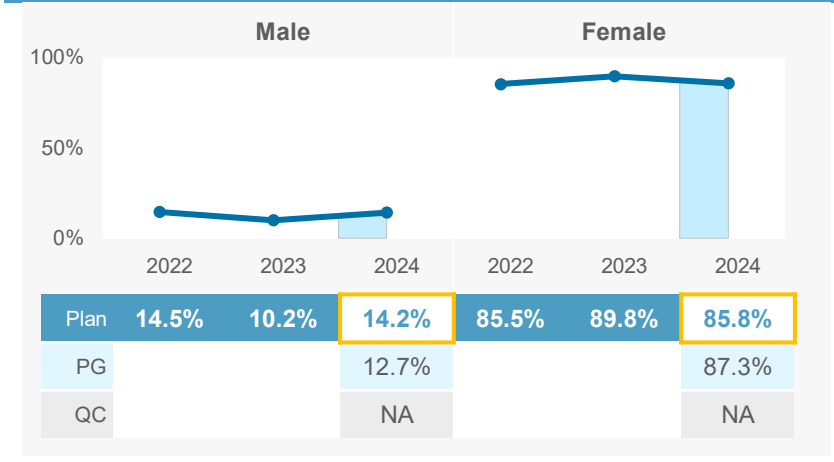
# PROFILE OF SURVEY RESPONDENTS

MEDICAID CHILD

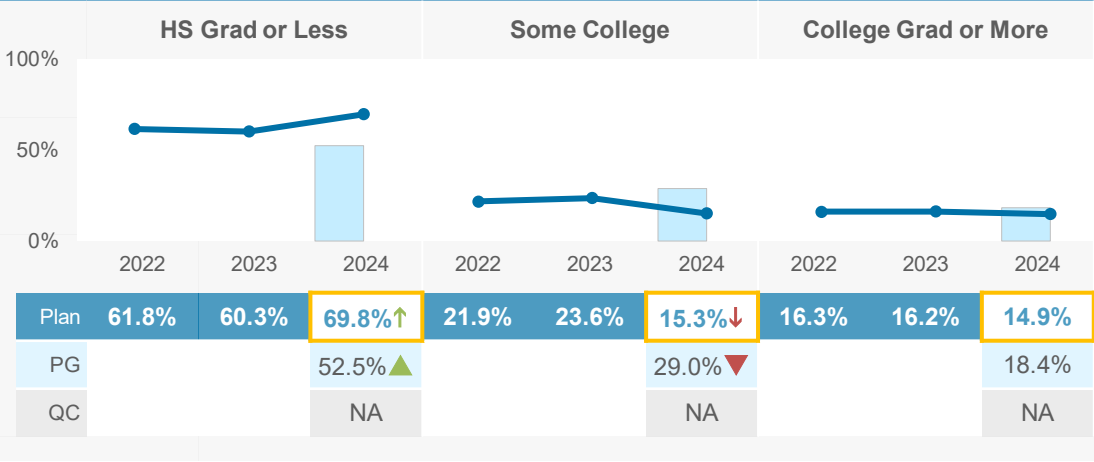
Respondent's Age



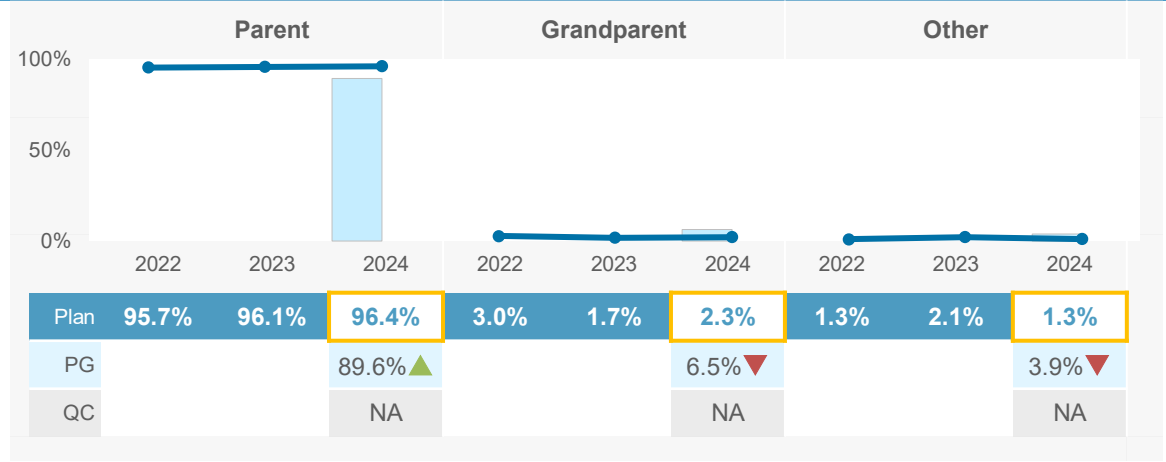
Respondent's Gender



Respondent's Education



Respondent's Relation to Child



**Significance Testing:** Current score is significantly higher/lower than the 2023 score (↑/↓), the 2022 score (↗/↘) or benchmark score (▲/▼).  
**Benchmarks:** PG refers to the 2024 PG Book of Business benchmark. QC refers to the 2023 QC National Data benchmark. NCQA did not publish demographics for the 2023 benchmark.

# SUPPLEMENTAL QUESTIONS

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- Alameda Alliance for Health

# SUPPLEMENTAL QUESTIONS

MEDICAID CHILD

	Category Responses Based on Valid Responses Per Question					Summary Rate Score			2024 PG BoB
						2022	2023	2024	
Q42. Likelihood to recommend health plan (% 9 or 10 - Extremely likely)	Valid Responses = 302								
	<u>9 or 10 - Extremely likely</u>					(n=236)	(n=234)	(n=302)	---
	78.5%	15.2%	0-6 6.3%			73.3%	70.9%	78.5% ↑	
NPS (% 9-10 - % 0-6)									
						(n=236)	(n=234)	(n=302)	---
						62.7	63.7	72.2 ↑⇅	
Q43. Would select plan again (% Definitely or Probably yes)	Valid Responses = 291								
	<u>Definitely yes</u> <u>Probably yes</u> <u>Uncertain</u> <u>Probably not</u> <u>Definitely not</u>					(n=233)	(n=226)	(n=291)	---
	64.9%	25.1%	5.8%	2.4%	1.7%	86.7%	85.8%	90.0%	

Significance Testing: Current year score is significantly higher/lower than 2023 score (↑/↓), the 2022 score (↕/↕) or benchmark score (▲/▼).

Low Base: ^Indicates a base size smaller than 20. Interpret results with caution.

# APPENDICES

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- APPENDIX A: CORRELATION ANALYSES
- APPENDIX B: QUESTIONNAIRE



# APPENDIX A: CORRELATIONS

## MEDICAID CHILD

### Highest Correlations

Below are the key measures with the highest correlations to the Rating measures.

#### With Health Care Rating

<b>Q21</b>	Personal doctor overall	0.5225
<b>Q25</b>	Specialist overall	0.5091
<b>Q31</b>	Health plan overall	0.4556
<b>Q28</b>	CS courtesy/respect	0.4232
<b>Q12</b>	Dr. explained things	0.4158
<b>Q27</b>	CS provided info./help	0.3870
<b>Q4</b>	Got urgent care	0.3798
<b>Q13</b>	Dr. listened carefully	0.3407
<b>Q9</b>	Got care/tests/treatment	0.3308
<b>Q16</b>	Dr. explained things for child	0.3019

#### With Personal Doctor Rating

<b>Q13</b>	Dr. listened carefully	0.5270
<b>Q8</b>	Health care overall	0.5225
<b>Q14</b>	Dr. showed respect	0.5140
<b>Q12</b>	Dr. explained things	0.5111
<b>Q20</b>	Dr. informed about care	0.4735
<b>Q31</b>	Health plan overall	0.4680
<b>Q17</b>	Dr. spent enough time	0.4543
<b>Q16</b>	Dr. explained things for child	0.4124
<b>Q27</b>	CS provided info./help	0.3445
<b>Q28</b>	CS courtesy/respect	0.3009

#### With Specialist Rating

<b>Q4</b>	Got urgent care	0.5820
<b>Q27</b>	CS provided info./help	0.5713
<b>Q8</b>	Health care overall	0.5091
<b>Q31</b>	Health plan overall	0.3826
<b>Q6</b>	Got routine care	0.3431
<b>Q9</b>	Got care/tests/treatment	0.2818
<b>Q16</b>	Dr. explained things for child	0.2716
<b>Q13</b>	Dr. listened carefully	0.2619
<b>Q23</b>	Got specialist appt.	0.2365
<b>Q20</b>	Dr. informed about care	0.2336

# APPENDIX B: QUESTIONNAIRE

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SURVEY INSTRUCTIONS

- ◆

Answer each question by marking the box to the left of your answer.
- ◆

You are sometimes told to skip over some questions in this survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:

☒

Yes

➔

If Yes, Go to Question 1

☐

No

Personally identifiable information will not be made public and will only be released in accordance with federal laws and regulations.

You may choose to answer this survey or not. If you choose not to, this will not affect the benefits your child receives. You may notice a number on the back of this survey. This number is ONLY used to let us know if you returned your survey so we don't have to send you reminders.

If you want to know more about this study, please call 1-888-797-3605.

Please answer the questions for the child listed on the letter. Please do not answer for any other children.

1.

Our records show that your child is now in Alameda Alliance for Health (Alliance). Is that right?

- ☐

Yes

➔

If Yes, Go to Question 3
- ☐

No

2.

What is the name of your child's health plan?  
(please print)

YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS

These questions ask about your child's health care from a clinic, emergency room, or doctor's office. This includes care your child got in person, by phone, or by video. Do not include care your child got when he or she stayed overnight in a hospital. Do not include the times your child went for dental care visits.

3.

In the last 6 months, did your child have an illness, injury, or condition that needed care right away?

- ☐

Yes

☐

No
- ➔

If No, Go to Question 5

4.

In the last 6 months, when your child needed care right away, how often did your child get care as soon as he or she needed?

- ☐

Never
- ☐

Sometimes
- ☐

Usually
- ☐

Always

5.

In the last 6 months, did you make any in person, phone, or video appointments for a check-up or routine care for your child?

- ☐

Yes

☐

No
- ➔

If No, Go to Question 7

6.

In the last 6 months, how often did you get an appointment for a check-up or routine care for your child as soon as your child needed?

- ☐

Never
- ☐

Sometimes
- ☐

Usually
- ☐

Always

7. In the last 6 months, not counting the times your child went to an emergency room, how many times did he or she get health care in person, by phone, or by video?

- ☐ None ➔ *If None, Go to Question 10*
- ☐ 1 time
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 to 9
- ☐ 10 or more times

8. Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your child’s health care in the last 6 months?

- ☐ 0 Worst health care possible
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 Best health care possible

9. In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

YOUR CHILD’S PERSONAL DOCTOR

10. A personal doctor is the one your child would talk to if he or she needs a check-up, has a health problem or gets sick or hurt. Does your child have a personal doctor?

- ☐ Yes
- ☐ No ➔ *If No, Go to Question 22*

11. In the last 6 months, how many times did your child have an in person, phone, or video visit with his or her personal doctor?

- ☐ None ➔ *If None, Go to Question 21*
- ☐ 1 time
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 to 9
- ☐ 10 or more times

12. In the last 6 months, how often did your child’s personal doctor explain things about your child’s health in a way that was easy to understand?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

13. In the last 6 months, how often did your child’s personal doctor listen carefully to you?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

14. In the last 6 months, how often did your child’s personal doctor show respect for what you had to say?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

15. Is your child able to talk with doctors about his or her health care?

- ☐ Yes
- ☐ No ➔ *If No, Go to Question 17*

16. In the last 6 months, how often did your child’s personal doctor explain things in a way that was easy for your child to understand?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

17. In the last 6 months, how often did your child’s personal doctor spend enough time with your child?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

18. In the last 6 months, did your child’s personal doctor talk with you about how your child is feeling, growing, or behaving?

- ☐ Yes
- ☐ No

19. In the last 6 months, did your child get care from a doctor or other health provider besides his or her personal doctor?

- ☐ Yes
- ☐ No ➔ If No, Go to Question 21

20. In the last 6 months, how often did your child’s personal doctor seem informed and up-to-date about the care your child got from these doctors or other health providers?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

21. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your child’s personal doctor?

- ☐ 0 Worst personal doctor possible
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 Best personal doctor possible

GETTING HEALTH CARE FROM SPECIALISTS

When you answer the next questions, include the care your child got in person, by phone, or by video. Do not include dental visits or care your child got when he or she stayed overnight in a hospital.

22. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. In the last 6 months, did you make any appointments for your child with a specialist?

- ☐ Yes
- ☐ No ➔ If No, Go to Question 26

23. In the last 6 months, how often did you get appointments for your child with a specialist as soon as he or she needed?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

24. How many specialists has your child talked to in the last 6 months?

- ☐ None ➔ If None, Go to Question 26
- ☐ 1 specialist
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 or more specialists

25. We want to know your rating of the specialist your child talked to most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

- ☐ 0 Worst specialist possible
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 Best specialist possible

YOUR CHILD’S HEALTH PLAN

The next questions ask about your experience with your child’s health plan.

26. In the last 6 months, did you get information or help from customer service at your child’s health plan?

- ☐ Yes
- ☐ No ➔ If No, Go to Question 29

27. In the last 6 months, how often did customer service at your child’s health plan give you the information or help you needed?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

28. In the last 6 months, how often did customer service staff at your child’s health plan treat you with courtesy and respect?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

29. In the last 6 months, did your child’s health plan give you any forms to fill out?

- ☐ Yes
- ☐ No ➔ If No, Go to Question 31

30. In the last 6 months, how often were the forms from your child’s health plan easy to fill out?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

31. Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your child’s health plan?

- ☐ 0 Worst health plan possible
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 Best health plan possible

ABOUT YOUR CHILD AND YOU

32. In general, how would you rate your child’s overall health?

- ☐ Excellent
- ☐ Very Good
- ☐ Good
- ☐ Fair
- ☐ Poor

33. In general, how would you rate your child’s overall mental or emotional health?

- ☐ Excellent
- ☐ Very Good
- ☐ Good
- ☐ Fair
- ☐ Poor

34. What is your child’s age?

- ☐ Less than 1 year old
- YEARS OLD (write in)

35. Is your child male or female?

- ☐ Male
- ☐ Female

36. Is your child of Hispanic or Latino origin or descent?

- ☐ Yes, Hispanic or Latino
- ☐ No, not Hispanic or Latino

37. What is your child’s race? *Mark one or more.*

- ☐ White
- ☐ Black or African-American
- ☐ Asian
- ☐ Native Hawaiian or other Pacific Islander
- ☐ American Indian or Alaska Native
- ☐ Other

38. What is your age?

- ☐ Under 18
- ☐ 18 to 24
- ☐ 25 to 34
- ☐ 35 to 44
- ☐ 45 to 54
- ☐ 55 to 64
- ☐ 65 to 74
- ☐ 75 or older

39. Are you male or female?

- ☐ Male
- ☐ Female

40. What is the highest grade or level of school that you have completed?

- ☐ 8th grade or less
- ☐ Some high school, but did not graduate
- ☐ High school graduate or GED
- ☐ Some college or 2-year degree
- ☐ 4-year college graduate
- ☐ More than 4-year college degree

41. How are you related to the child?

- ☐ Mother or father
- ☐ Grandparent
- ☐ Aunt or uncle
- ☐ Older brother or sister
- ☐ Other relative
- ☐ Legal guardian
- ☐ Someone else

ADDITIONAL QUESTIONS

Now we would like to ask a few more questions about the services your child’s health plan provides.

42. On a scale from 0 to 10, where 0 means not at all likely, and 10 means extremely likely, how likely is it that you would recommend your child’s health plan to a family member or friend?

- ☐ 0 Not at all likely
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10 Extremely likely

43. If today you could select any health plan company in your area for your child, would you select your child’s current plan again?

- ☐ Definitely yes
- ☐ Probably yes
- ☐ Uncertain
- ☐ Probably not
- ☐ Definitely not

Thank You  
Please return the completed survey in the postage-paid envelope or send to:  
Press Ganey • P.O. Box 7315  
South Bend, IN 46699-0488

If you have any questions, please call  
1-888-797-3605.