

**Arizona Complete Health  
Complete Care Plan – Acute  
Monthly Member Survey  
Survey Analysis  
CY18 Q4 Report**



## SCOPE OF WORK

Arizona Complete Health Complete Care Plan – Acute (AzCH-Acute) developed a Monthly Member Survey aimed at capturing member's satisfaction with their services and service delivery (see Appendix A). Survey results will assist AzCH-Acute with ongoing monitoring of member satisfaction, agency performance and assist with identifying areas of improvement.

The survey questions measure the following:

Question 1-5: Patient Experience

Question 6: Outcomes and Improved Functioning

Question 7-8: Access to Care

Question 9: Overall Satisfaction with Health Plan

Question 10: Coordination of Care

In an effort to receive complete and honest feedback, Quality Management has authorized a third party to administer the monthly member survey. MorPace sends out monthly mailers to AzCH-Acute members. They utilize a sample list sent to them by Quality Management each month. This process started officially February 2018.

### **Timeline**

Surveys results are due to AzCH-Acute quarterly, 15 business days after the end of the quarter.

AzCH-Acute will submit survey results to Arizona Health Care Cost Containment System (AHCCCS) quarterly, 30 business days after the end of the quarter.

AzCH-Acute will submit individual survey results to the corresponding providers quarterly, 30 business days after the end of the quarter.

Original Monthly Survey Start date: February 1, 2018

The submission of the survey analysis will occur on the following dates:

- April 30 CY18 Q2 (January 1 – March 31)
- July 30 CY18 Q3 (April 1 – June 30)
- October 30 CY18 Q4 (July 1 – September 30)

### **Methodology**

Data collection for the 2018 Member Satisfaction Survey is administered as a single-wave mail study. Monthly mailings are sent to 750 AzCH-Acute members during the first week of each month. The mailing packet consists of a single page cover letter and single page questionnaire, each printed double-sided English and Spanish, and a Business Return envelope.



## ANALYSIS

MorPace distributed surveys for the period of July 1, 2018 through September 30, 2018. The survey results were submitted to AzCH-Acute on October 15, 2018. The survey answers are weighted from one “Strongly Disagree” to five “Strongly Agree”, “Not Applicable” is not included when calculating answer averages. Results include an overall rating average from one (low) to five (high) based on the answer weights mentioned above, for each question. The minimum performance standard (MPS) is a rating average of 4 for each question. The AzCH-Acute rating average goal is 4.5+ for each question.

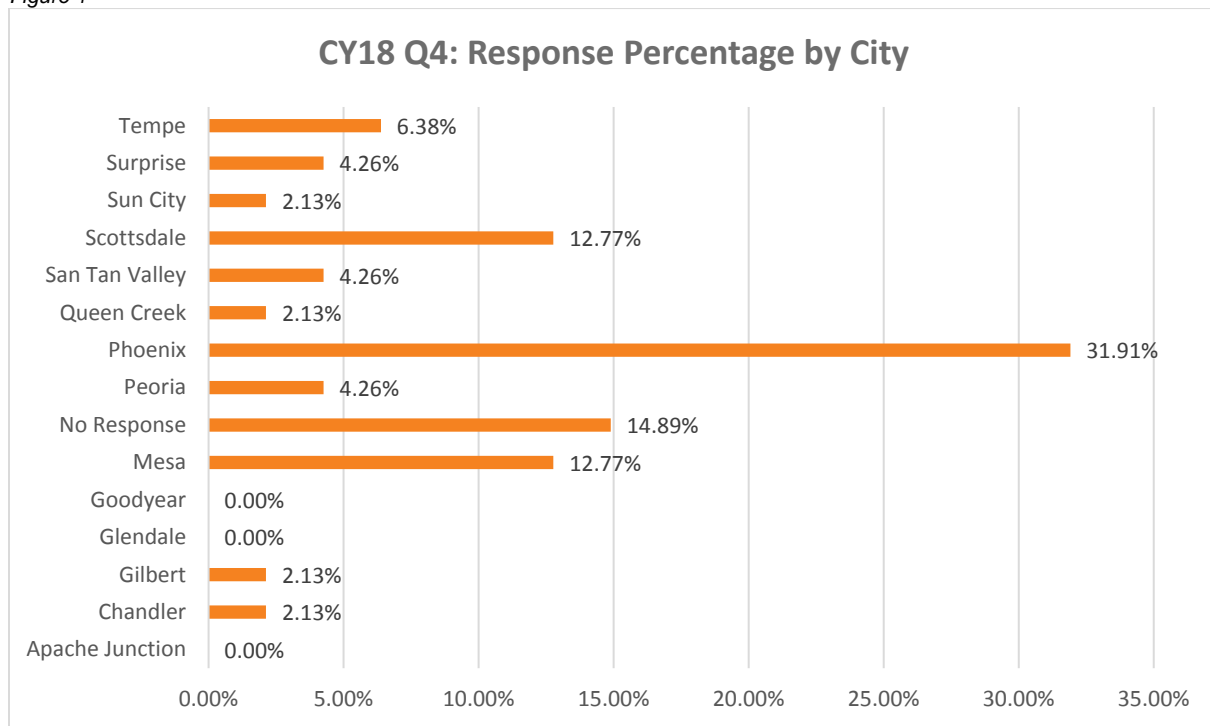
### Response Rate

Total response count for the administration period was 49. The response rate from Quarter 3 to Quarter 4 dropped by 0.2%.

	Total CY18 Q2	Total CY18 Q3	Total CY18 Q4	Total CY18 Year
Mail out size	2250	2250	2250	6750
Completed surveys	60	60	49	169
<b>Response rate</b>	<b>2.7%</b>	<b>2.7%</b>	<b>2.2%</b>	<b>2.5%</b>

Figure 1 displays the response percentage by location. Phoenix was identified by 31.91% of respondents identified Phoenix as their place of service, with a total count of 15. A total of 7 respondents did not answer the question.

Figure 1



### Response Rate Interventions

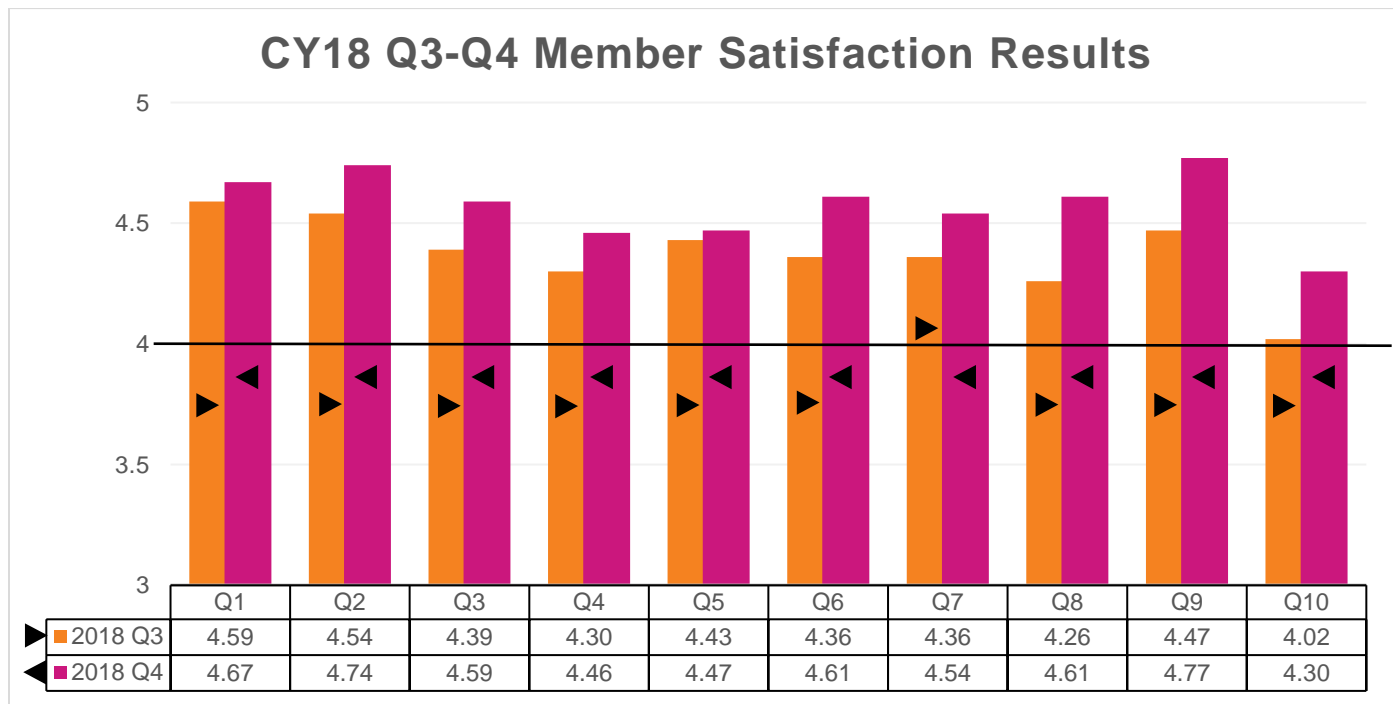
To continue improving the response rate AzCH-Acute is in the process of revising the current cover letter that is mailed out with the survey to generate more interest. This revised cover letter includes contact information for a member of the Quality Improvement department to assist any member who has received the survey with questions or comments they would like to give directly to AzCH-Acute.



### Survey Results

Figure 2 compares overall rating averages from the current reporting period against the previous reporting periods. Overall, the survey questions increased during this reporting period. The largest increase was Question 8: I receive services when I need them increased from a 4.26 rating to a 4.61 rating. The MPS is 4 and all survey questions met MPS. Highest rated question is Question 9: I am satisfied with Health Net Access as my Health Plan with an overall rating of 4.77. Lowest rated question is Question 10: My provider stays in touch with other providers/organizations in my life with an overall rating of 4.30. Please note that Question 10 has increased from the prior quarters.

Figure 2



In an attempt to determine whether the difference between the current and previous satisfaction scores for Questions 1 through 10 are statistically significant, unpaired two-sample t-tests were completed using an alpha level of .05 as the significance criterion and 95% confidence level. Question 8 and Question 9 showed significant statistical improvement.

Question 1: The provider’s office is safe, clean, comfortable and inviting.

Test results:  $t(107) = 0.7642, p < 0.4464$ . Therefore, it can be concluded that the increase in score for Question 1 is not statistically significant.

Question 2: I was treated in a friendly and welcoming manner.

Test results:  $t(107) = 1.8119, p < 0.0728$ . Therefore, it can be concluded that the increase in score for Question 2 is not quite statistically significant.

Question 3: The team listens to me and believes we can accomplish our goals.

Test results:  $t(107) = 1.4694, p < 0.1447$ . Therefore, it can be concluded that the increase in score for Question 3 is not statistically significant.

Question 4: I am working with staff on activities to improve my health and wellness.

Test results:  $t(107) = 1.1045, p < 0.2718$ . Therefore, it can be concluded that the increase in score for Question 4 is not statistically significant.



Question 5: I know who to call if I have a problem or need help.

Test results:  $t(107) = 0.2516$ ,  $p < 0.8018$ . Therefore, it can be concluded that the increase in score for Question 5 is not statistically significant.

Question 6: My services are helping me to get better.

Test results:  $t(107) = 1.7370$ ,  $p < 0.0853$ . Therefore, it can be concluded that the increase in score for Question 6 is not quite statistically significant.

Question 7: I receive services where I need them.

Test results:  $t(107) = 1.1995$ ,  $p < 0.2330$ . Therefore, it can be concluded that the increase in score for Question 7 is not statistically significant.

Question 8: I receive services when I need them.

Test results:  $t(107) = 2.1084$ ,  $p < 0.0373$ . Therefore, it can be concluded that the increase in score for Question 8 is statistically significant.

Question 9: I am satisfied with Cenpatco Integrated Care as my Health Plan.

Test results:  $t(107) = 2.2000$ ,  $p < 0.0300$ . Therefore, it can be concluded that the increase in score for Question 9 is statistically significant.

Question 10: My provider stays in touch with other providers/organizations in my life.

Test results:  $t(107) = 1.3894$ ,  $p < 0.1676$ . Therefore, it can be concluded that the increase in score for Question 10 is not statistically significant.

## **Survey Result Interventions**

### **Member focused interventions:**

- Automated Member Calls – These are automated calls that using a simulated real human voice are scheduled to communicate valuable information to: (1) onboard new members, verify PCP, complete an HRA; (2) close gaps in care and improve HEDIS outcomes; (3) improve how members manage their health and includes a live transfer for Members to Member Services to assist the member with appointment scheduling, transferring to their case manager or the EPSDT team. This program began May 2018. This intervention is driving the survey score increase for the following questions: Question 4: I am working with staff on activities to improve my overall health and wellness, Question 6: Services are helping me to get better, Question 8: I receive services when I need them, and Question 9: I am satisfied with Arizona Complete Health as my health plan.
- Member Benefits Quick Reference Guide – This quick reference guide is aimed at helping the member easily find how to contact AzCH-Acute via member services or the member portal. The guide contains an area for the member to list all health care provider contact information, prescription and over the counter medications. There is information regarding scheduling transportation, the peer warm line, crisis services, and the Nurse Advise line. It also gives tips to the member regarding how best to help manage their own care as well as general recommendations of who to contact when they have questions. There is a frequently asked question section to get the member on the right track and a commonly used term section to help the member fully understand. This intervention is driving the survey score increase for the following questions: Question 4: I am working with staff on activities to improve my overall health and wellness, Question 5: I know who to call if I have a problem or need help, Question 9: I am satisfied with Arizona Complete Health as my health plan.
- Appointment Availability Flyer – This flyer is aimed at helping the member differentiate between routine, urgent & emergency/crisis care. As well as how to schedule their routine or urgent care appointments with an expected timeline of how soon appointments should be made for by the health care provider. The flyer contains contact information for AzCH-Acute Member Services as well as



Nurse Advice Line, Peer Warm Line & Crisis Services. This intervention is driving the survey score increase for the following questions: Question 5: I know who to call if I have a problem or need help, Question 6: Services are helping me to get better, Question 7: I receive services where I need them, Question 8: I receive services when I need them, and Question 9: I am satisfied with Arizona Complete Health as my health plan.

- AzCH-Acute Case Management Satisfaction Survey – This is a short survey that is offered at the end of a case management call. The goal with this survey is to glean immediate issues the member may have with their care management interactions. Current process is under review due to possible bias since the care manager involved is the person reviewing the survey with the member. This intervention is driving the survey score increase for the following questions: Question 2: I was treated in a friendly and welcoming manner, Question 3: My team listens to me and believes I can accomplish my goals, Question 6: Services are helping me to get better and Question 9: I am satisfied with Arizona Complete Health as my Health Plan.

**Provider focused interventions:**

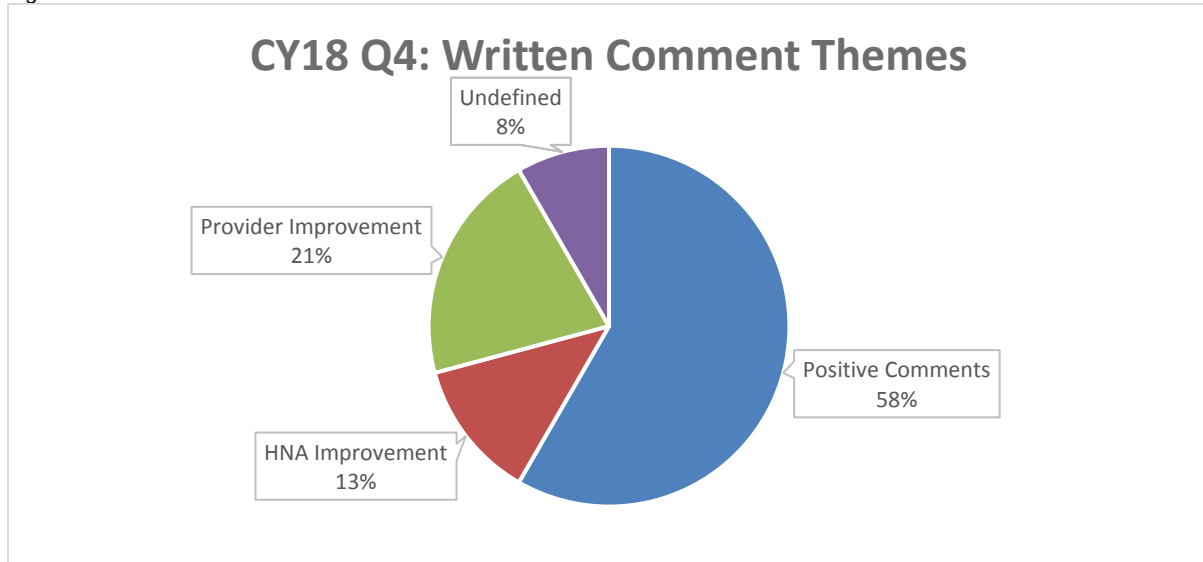
- Patient Experience Toolkit - This toolkit is a collaborative effort, developed by providers for providers and distributed to assist in improving the patient experience by offering useful guidelines, tips, and other materials. The toolkit is based on recommendations, feedback and best practices that were received from the participating providers. Toolkit was distributed to providers in July 2018. This intervention is driving the survey score increase for the following questions: Question 2: I was treated in a friendly and welcoming manner, Question 3: My team listens to me and believes I can accomplish my goals, Question 4: I am working with staff on activities to improve my overall health and wellness, Question 10: My provider stays in touch with the other providers/organizations in my life.
- Coordination of Care (COC) Protocol – This protocol is to assist health care providers coordinate care and develop comprehensive treatment plans with physical, specialty and behavioral health providers for all patients with a direct focus on complex care patients with a behavioral health and/or substance abuse diagnosis, and/or other comorbid chronic condition. This protocol is currently in development to be distributed to providers this quarter. This intervention is driving the survey score increase for the following questions: Question 3: My team listens to me and believes I can accomplish my goals, Question 4: I am working with staff on activities to improve my overall health and wellness, Question 7: I receive services where I need them, Question 8: I receive services when I need them and Question 10: My provider stays in touch with the other providers/organizations in my life.

**Written Comments**

The written comments are member responses to the open-ended statement at the end of the survey. The following statement was included on the survey: Please list your concerns or ideas for how we can improve. There were a total of 24 written comments. Figure 3 shows the main themes the written comments were organized into and the percentage of each.



Figure 3



Some of the positive comments submitted by members included the following:

- “Everything is great, thank you so much for your hard work.”
- “So far so good. Just so happy to have healthcare for my children after so long without. Thank YOU SO MUCH.”
- “We love Health Net Access and their services.”

Some of the comments regarding areas of improvement submitted by members included the following:

- AzCH-Acute:
  - “I can't find a dentist for endodontics for my son that accepts this insurance.”
  - “Need a better way of getting rides to and from places, doctors, etc.”
- Provider:
  - “I do wish the revolving door of doctors coming and going would stop.”
  - “Sometimes a left message to my provider and they call me back after three or four days. It's my only complaint.”