

Consumer Satisfaction with Medicaid Managed Care Plans

The Ohio Medicaid Managed Care Program is committed to ensuring access to, and quality of, health care services provided by managed care plans to Medicaid consumers. Monitoring of managed care plan (MCP) compliance with program requirements and evaluation tools is used to: protect consumers, meet their health care needs, and ensure their satisfaction with the program. Consumer surveys are one component of a comprehensive strategy designed to achieve and document consumer satisfaction.

Consumers enrolled in Ohio Medicaid MCPs are surveyed annually regarding their satisfaction with health plans, health care providers, health care services, and access to care, as well as their utilization of services and current health status. Survey results provide important feedback on MCP performance that is used to improve overall consumer satisfaction with the program.

Since 1998, the Medicaid Managed Care Program has surveyed individuals in the Covered Families and Children (CFC) Medicaid population. Future surveys will also include individuals in the Aged, Blind, or Disabled (ABD) Medicaid population, to whom the managed care program was expanded in 2007.

The survey is administered by an independent, external quality review organization (EQRO), selected by the Ohio Department of Job and Family Services (ODJFS). Survey results are submitted to ODJFS as well as the National Committee for Quality Assurance (NCQA), a preeminent organization dedicated to improving health care quality.

Overview of the 2007 Survey

Seven MCPs were included in the 2007 evaluation. Adult members and the parents or caretakers of child members from each MCP completed the surveys between February and May, 2007. Surveys were completed by a total of 3,758 adult members and 3,545 parents or caretakers of child members.

The survey instruments used in 2007 were the [Consumer Assessment of Healthcare Providers and Systems \(CAHPS\) 4.0H Adult Medicaid Health Plan Survey and the CAHPS 3.0H Child Medicaid Health Plan Survey \(with the chronic conditions measurement set\)](#). CAHPS satisfaction measures are derived from individual questions that ask for a general rating, as well as groups of questions that form composite measures.

The four reports listed below were created by the external quality review organization to provide ODJFS and NCQA with a comprehensive analysis of the 2007 survey.

- The [Full Report](#) - provides an in-depth analysis of the survey results;
- The [Executive Summary Report](#) - contains a high-level overview of the major CAHPS results presented in the Full Report;
- The [Children with Chronic Conditions Report](#) - examines the results of the CAHPS Child Medicaid survey; and
- The [Methodology Report](#) - provides a detailed description of the methodology utilized to perform the CAHPS analysis for the Ohio Medicaid managed care program.

The 2007 survey results demonstrate performance levels that are above or similar to the national average on key program variables, as highlighted below.

- Three out of five general child composite measures for Ohio's CFC Medicaid Managed Care Program are above the national average. These are composite measures for getting care quickly, how well doctors communicate, and courteous and helpful office staff. Ohio's result for the getting needed care general child composite measure is similar to the national average.
- Ohio's CFC Medicaid Managed Care Program general child ratings of all health care, personal doctor, and specialist seen most often are similar to the national average.
- The Ohio CFC Medicaid Managed Care Program adult average for the how well doctors communicate composite measure is above the national average. Ohio's results for the adult getting care quickly composite measure and the adult rating of personal doctor are similar to the national average.

For questions or comments regarding the consumer satisfaction surveys, please contact the Bureau of Managed Health Care at (614) 466-4693.