



2023 Louisiana CAHPS[®] Survey Full Report

Louisiana Department of Health

January 2024



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1. Executive Summary

Introduction

The Louisiana Department of Health (LDH) assesses the perceptions and experiences of adult and child members enrolled in the managed care organizations (MCOs) as part of its process for evaluating the quality of health care services provided to adult and child members in the Louisiana Medicaid Managed Care Program. LDH requires the MCOs to contract with a National Committee for Quality Assurance (NCQA)-certified Healthcare Effectiveness Data and Information Set (HEDIS[®]) survey vendor to conduct annual Consumer Assessment of Healthcare Providers and Systems (CAHPS[®]) Health Plan Surveys.^{1,2} LDH contracted with Health Services Advisory Group, Inc. (HSAG) to analyze and report the results of the CAHPS Health Plan Surveys for the Healthy Louisiana MCOs. The goal of the CAHPS Health Plan Surveys is to provide performance feedback that is actionable and that will aid in improving the overall experiences of adult members and parents/caretakers of child members.

This report presents the 2023 CAHPS results of adult members and the parents/caretakers who completed the survey on behalf of child members enrolled in an MCO. The surveys were completed from February to May 2023. The standardized survey instruments selected were the CAHPS 5.1H Adult Medicaid Health Plan Survey and the CAHPS 5.1H Child Medicaid Health Plan Survey with the children with chronic conditions (CCC) measurement set. HSAG presents statewide aggregate results and compares them to national Medicaid data and prior year's results, where appropriate. Table 1-1 provides a list of the MCOs that participated in the survey.

Table 1-1—Participating MCOs

Name	Abbreviation
Aetna Better Health	Aetna
AmeriHealth Caritas of Louisiana	AmeriHealth
Healthy Blue	Healthy Blue
Louisiana Healthcare Connections	LHCC
UnitedHealthcare Community	United

Results were used to assess the experience of care for three populations:

- **Adult members**—a general sample of adults from the entire eligible population. For detailed results, please refer to the Adult Results section beginning on page 9.

¹ HEDIS[®] is a registered trademark of the National Committee for Quality Assurance (NCQA).

² CAHPS[®] is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

- **General child members**—a general sample of children from the entire eligible population. For detailed results, please refer to the General Child Results section beginning on page 42.
- **Children with chronic conditions members** (CCC members)—children whose parents/caretakers reported their child needed or used specific services (e.g., specialty therapy, mental health counseling, prescription medicines) or had limitations in the ability to do what other children of the same age do. For detailed results, please refer to the CCC and Non-CCC Results section beginning on page 74.

Performance Highlights

The Adult Results, General Child Results, and CCC and Non-CCC Results sections of this report detail the CAHPS results for the MCOs' adult population, general child population, and population of children with chronic conditions, respectively. The following is a summary of the CAHPS performance highlights.

NCQA Comparisons and Trend Analysis

HSAG calculated achievement scores (i.e., rates of experience) for the measures. HSAG compared scores for each measure to the National Committee for Quality Assurance's (NCQA's) 2023 Quality Compass[®] Benchmark and Compare Quality Data.^{3,4} Based on this comparison, HSAG determined overall member experience (i.e., star ratings) of one (★) to five (★★★★★) stars for each measure, where one star is the lowest possible rating (i.e., Poor) and five stars is the highest possible rating (i.e., Excellent). The detailed results of the NCQA Comparisons are found in the Adult Results section beginning on page 15 and the General Child Results section beginning on page 51. In addition, a trend analysis was performed that compared the 2023 CAHPS results to their corresponding 2022 CAHPS results. The detailed results of this analysis are found in the Adult Results section beginning on page 16, General Child Results section beginning on page 52, and the CCC and Non-CCC Results section beginning on page 75.

Table 1-2 provides highlights of the NCQA Comparisons and Trend Analysis findings for the Healthy Louisiana Statewide Average for each measure for the adult, general child, and CCC populations. The percentages presented in the table represent the achievement scores, while the stars represent overall

³ National Committee for Quality Assurance. *Quality Compass[®]: Benchmark and Compare Quality Data 2023*. Washington, DC: NCQA, September 2023.

⁴ The source for the benchmark and compare quality data used for this comparative analysis is Quality Compass[®] 2023 data and is used with the permission of the National Committee for Quality Assurance (NCQA). Quality Compass[®] 2023 includes certain CAHPS data. Any data display, analysis, interpretation, or conclusion based on these data is solely that of the authors, and NCQA specifically disclaims responsibility for any such display, analysis, interpretation, or conclusion. Quality Compass[®] is a registered trademark of NCQA. CAHPS[®] is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

member experience ratings when the achievement scores are compared to NCQA Quality Compass Benchmark and Compare Quality Data.

Table 1-2—NCQA Comparisons and Trend Analysis—Healthy Louisiana Statewide Average

	Adult		General Child		CCC	
Measure	National Comparisons	Trend Analysis (2022 to 2023)	National Comparisons	Trend Analysis (2022 to 2023)	National Comparisons	Trend Analysis (2022 to 2023)
Global Ratings						
<i>Rating of Health Plan</i>	★★★★ 80.38%	—	★★★★ 86.74%	—	★★★★★ 86.68%	—
<i>Rating of All Health Care</i>	★★★★ 76.24%	—	★★★★★ 89.15%	—	★★★★★ 88.24%	—
<i>Rating of Personal Doctor</i>	★★★★★ 85.60%	—	★★★★ 90.72%	—	★★★★★ 91.39%	—
<i>Rating of Specialist Seen Most Often</i>	★★★★ 82.46%	—	★★★ 85.95%	—	★★★★ 88.27%	▲
Composite Measures						
<i>Getting Needed Care</i>	★★★ 80.47%	—	★★★★★ 89.06%	—	★★★★ 86.40%	—
<i>Getting Care Quickly</i>	★★★★ 82.54%	—	★★★★ 89.34%	—	★★★★ 90.35%	—
<i>How Well Doctors Communicate</i>	★★★★ 93.11%	—	★★★★★ 95.46%	—	★★★★ 95.26%	—
<i>Customer Service</i>	★★★★★ 92.14%	—	★★★★ 88.47%	—	★★★★ 90.14%	—
Individual Item Measures						
<i>Coordination of Care</i>	★★★★ 85.38%	—	★★★★★ 88.27%	▲	★★★★ 84.56%	—
<i>Flu Vaccination Received</i>	★★★ 36.17%	—	NA	NA	NA	NA
Medical Assistance With Smoking or Tobacco Use Cessation Items						
<i>Advising Smokers and Tobacco Users to Quit</i>	★★★ 72.41%	—	NA	NA	NA	NA
<i>Discussing Cessation Medications</i>	★★★ 47.79%	—	NA	NA	NA	NA
<i>Discussing Cessation Strategies</i>	★★★ 45.27%	—	NA	NA	NA	NA

	Adult		General Child		CCC	
Measure	National Comparisons	Trend Analysis (2022 to 2023)	National Comparisons	Trend Analysis (2022 to 2023)	National Comparisons	Trend Analysis (2022 to 2023)
CCC Composite Measures and Items						
<i>Access to Specialized Services</i>	NA	NA	NA	NA	★★★★ 72.22%	—
<i>Family-Centered Care (FCC): Personal Doctor Who Knows Child</i>	NA	NA	NA	NA	★★★★★ 92.54%	—
<i>Coordination of Care for Children with Chronic Conditions</i>	NA	NA	NA	NA	★★★ 78.09%	—
<i>FCC: Getting Needed Information</i>	NA	NA	NA	NA	★★★★ 92.49%	—
<i>Access to Prescription Medicines</i>	NA	NA	NA	NA	★★★★ 91.40%	—
<p>▲ Indicates the 2023 score is statistically significantly higher than the 2022 score. ▼ Indicates the 2023 score is statistically significantly lower than the 2022 score. — Indicates the 2023 score is not statistically significantly different than the 2022 score. NA Indicates this measure is not applicable for the population. Star Assignments Based on Percentiles: ★★★★★ 90th or Above ★★★★★ 75th-89th ★★★★ 50th-74th ★★★ 25th-49th ★ Below 25th</p>						

MCO Comparisons

HSAG compared the MCOs' results to the Healthy Louisiana Statewide Average to determine whether each MCO's score is statistically significantly different from the Healthy Louisiana Statewide Average. The detailed results of the comparative analysis are described in the Adult Results and General Child Results sections beginning on page 16 and 52, respectively. Table 1-3 shows a summary of the statistically significant results of this analysis. There were no statistically significant differences for Aetna, AmeriHealth, or LHCC.

Table 1-3—MCO Comparisons

Measures	Aetna	AmeriHealth	Healthy Blue	LHCC	United
Adult					
<i>Rating of Health Plan</i>	NS	NS	↑	NS	NS

Measures	Aetna	AmeriHealth	Healthy Blue	LHCC	United
General Child					
<i>How Well Doctors Communicate</i>	NS	NS	NS	NS	↑
↑ Indicates the score is statistically significantly higher than the Healthy Louisiana Statewide Average. ↓ Indicates the score is statistically significantly lower than the Healthy Louisiana Statewide Average. NS Indicates the score is not significantly different than the Healthy Louisiana Statewide Average.					

The following plans scored statistically significantly *higher* than the Healthy Louisiana Statewide Average:

- Healthy Blue—*Rating of Health Plan* (adult population)
- United—*How Well Doctors Communicate* (general child population)

CCC and Non-CCC Comparisons and Trend Analysis

HSAG compared the Healthy Louisiana Statewide Average CCC results to the non-CCC results to determine whether each population’s score is statistically significantly different from each other. In addition, a trend analysis was performed that compared the 2023 CAHPS results to their corresponding 2022 CAHPS results. The detailed results of the comparative analysis are described in the CCC and Non-CCC Results sections beginning on page 75. Table 1-4 shows a summary of the statistically significant results of this analysis.

Table 1-4—CCC and Non-CCC Comparisons and Trend Analysis—Healthy Louisiana Statewide Average

Measures	CCC		Non-CCC	
	Comparison	Trend Analysis	Comparison	Trend Analysis
<i>Rating of Specialist Seen Most Often</i>	NS	▲	NS	—
<i>Coordination of Care for Children with Chronic Conditions</i>	NS	—	NS	▲
<i>Access to Prescription Medicines</i>	NS	—	NS	▲
↑ Indicates the score is statistically significantly higher than the other population score. ↓ Indicates the score is statistically significantly lower than the other population score. NS Indicates the score is not significantly different than the other population score. ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score. ▼ Indicates the 2023 score is statistically significantly lower than the 2022 score. — Indicates the 2023 score is not statistically significantly different than the 2022 score.				

Key Drivers of Member Experience

In order to determine potential items for quality improvement efforts, HSAG conducted a key drivers analysis. HSAG focused the key drivers of member experience analysis on three measures: *Rating of Health Plan*, *Rating of All Health Care*, and *Rating of Personal Doctor*. HSAG evaluated these global ratings to determine if particular CAHPS items (i.e., questions) are strongly correlated with one or more of these measures. These individual CAHPS items, which HSAG refers to as “key drivers,” are driving respondents’ levels of experiences with each of the three measures. The detailed results of this analysis are described in the Key Drivers of Member Experience Analysis sections of the Adult Results and General Child Results beginning on pages 39 and 71, respectively. Table 1-5 provides a summary of the survey items identified as being key drivers of member experience (indicated by a ✓) for the Healthy Louisiana Statewide Average.

Table 1-5—Key Drivers of Member Experience Summary—Healthy Louisiana Statewide Average

Key Drivers	Rating of Health Plan	Rating of All Health Care	Rating of Personal Doctor
Adult			
Q4. Received care as soon as needed when care was needed right away		✓	
Q9. Ease of getting the care, tests, or treatment needed	✓	✓	
Q12. Personal doctor explained things in an understandable way			✓
Q15. Personal doctor spent enough time	✓	✓	✓
Q17. Personal doctor seemed informed and up-to-date about care from other doctors or health providers	✓		
Q20. Received appointment with a specialist as soon as needed	✓	✓	
General Child			
Q10. Ease of getting the care, tests, or treatment the child needed	✓	✓	
Q28. Child’s personal doctor listened carefully to the parent/caretaker			✓
Q32. Child’s personal doctor spent enough time with the child		✓	✓
Q35. Child’s personal doctor seemed informed and up-to-date about care the child received from other doctors or health providers			✓
Q45. Child’s health plan’s customer service gave the parent/caretaker the information or help needed	✓	✓	
✓ Indicates a key driver.			

2. Adult Results

Survey Respondents

Table 2-1 shows the total number of adult members sampled, total number of completed surveys, total number of eligible and ineligible records, and response rates for the Healthy Louisiana Statewide Average and all participating MCOs. A total of 8,424 adult members were surveyed, and a total of 1,163 adult surveys were completed. The overall adult response rate was 13.98 percent.

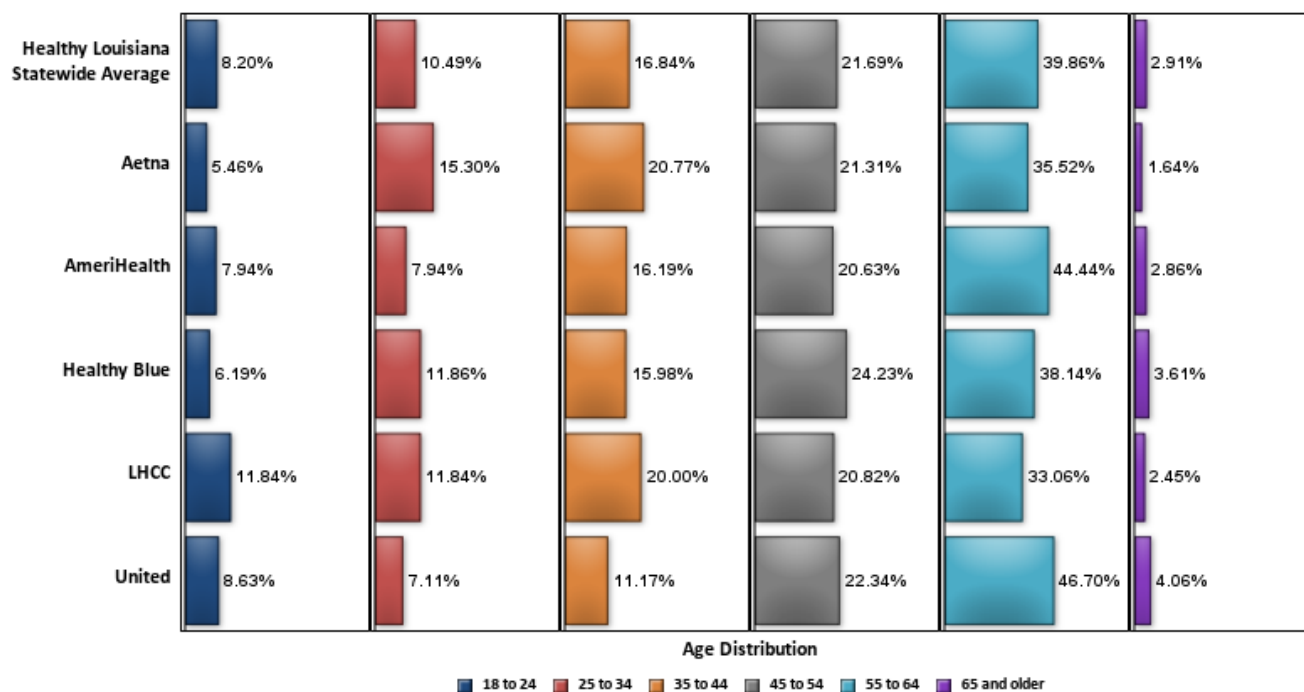
Table 2-1—Adult Survey Dispositions

Program/MCO	Total Sample	Ineligible Records	Eligible Records	Total Respondents	Response Rate
Healthy Louisiana Statewide Average	8,424	106	8,318	1,163	13.98%
Aetna	1,350	43	1,307	190	14.54%
AmeriHealth	2,079	22	2,057	322	15.65%
Healthy Blue	1,350	16	1,334	197	14.77%
LHCC	2,025	16	2,009	254	12.64%
United	1,620	9	1,611	200	12.41%

Demographics of Adult Members

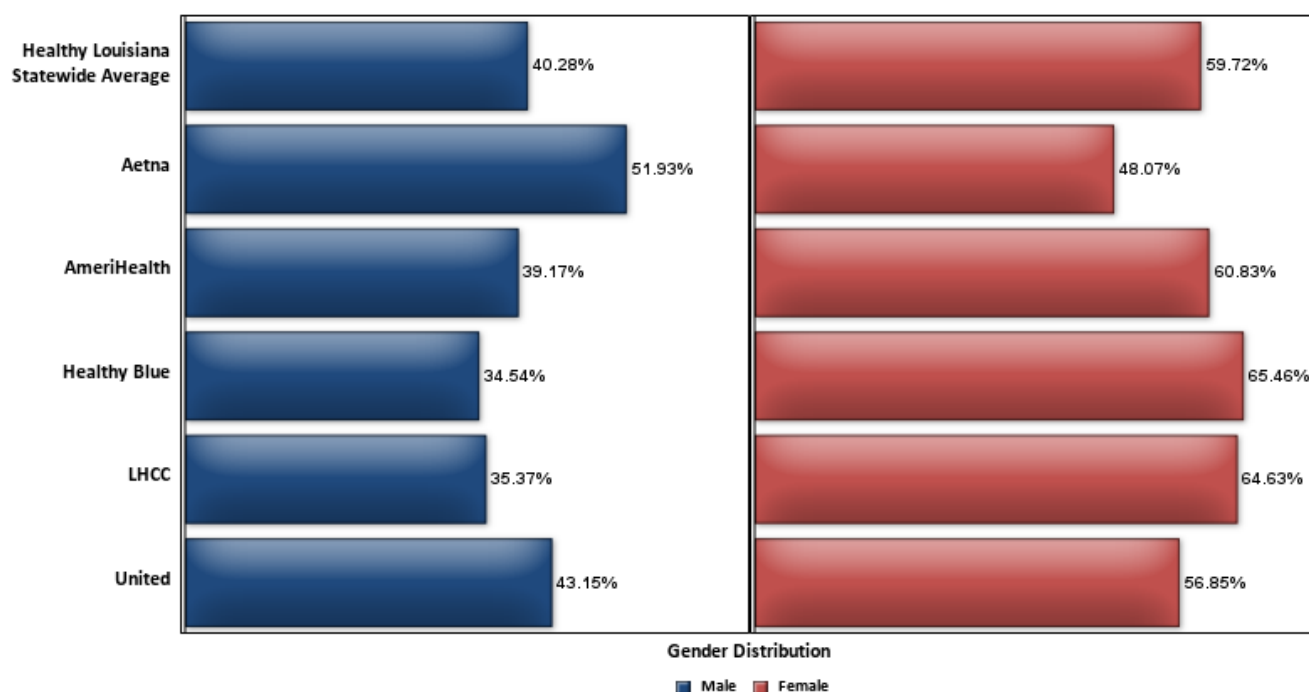
Figure 2-1 through Figure 2-7 present respondents' self-reported age, gender, education level, race, ethnicity, general health status, and mental or emotional health status.

Figure 2-1—Adult Member Demographics: Age



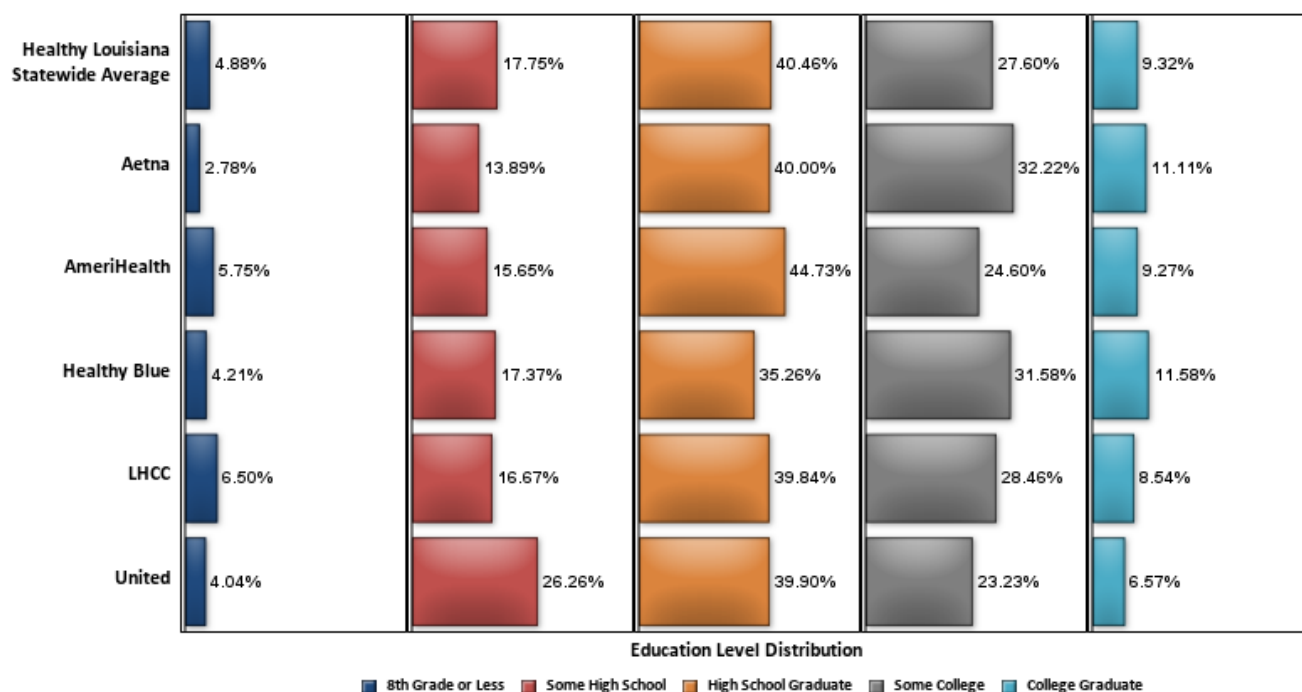
Some percentages may not total 100% due to rounding.

Figure 2-2—Adult Member Demographics: Gender



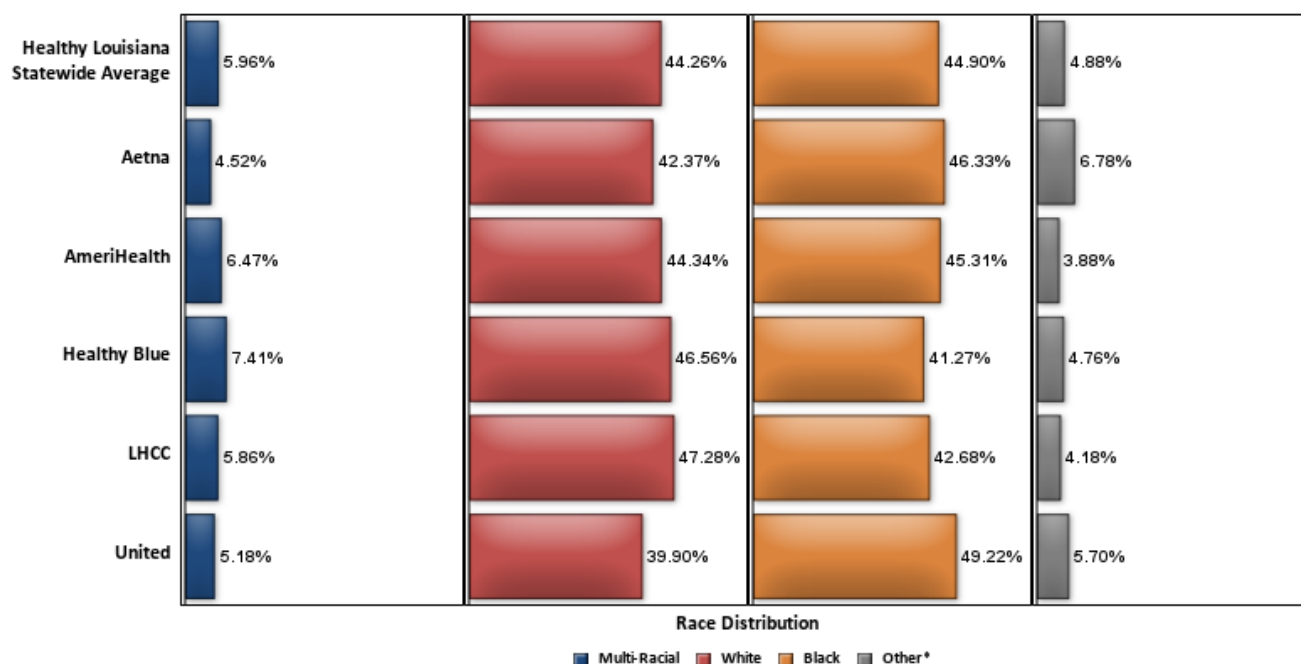
Some percentages may not total 100% due to rounding.

Figure 2-3—Adult Member Demographics: Education Level



Some percentages may not total 100% due to rounding.

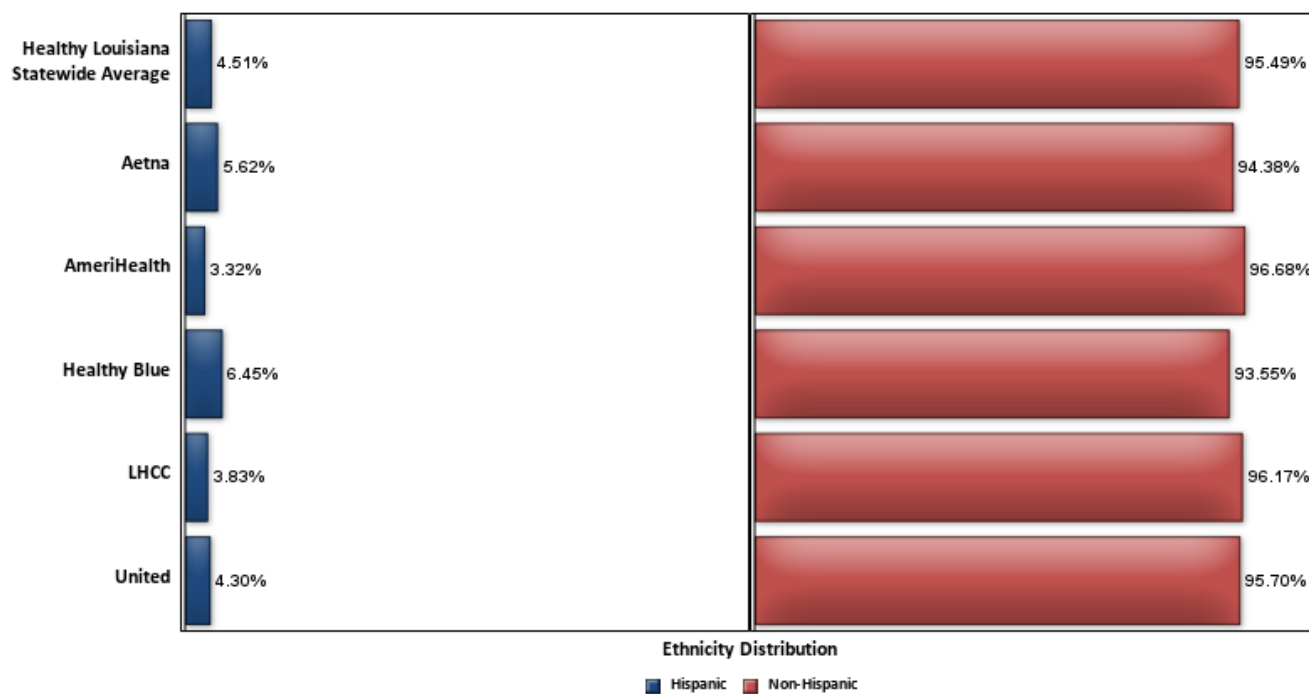
Figure 2-4—Adult Member Demographics: Race



Some percentages may not total 100% due to rounding.

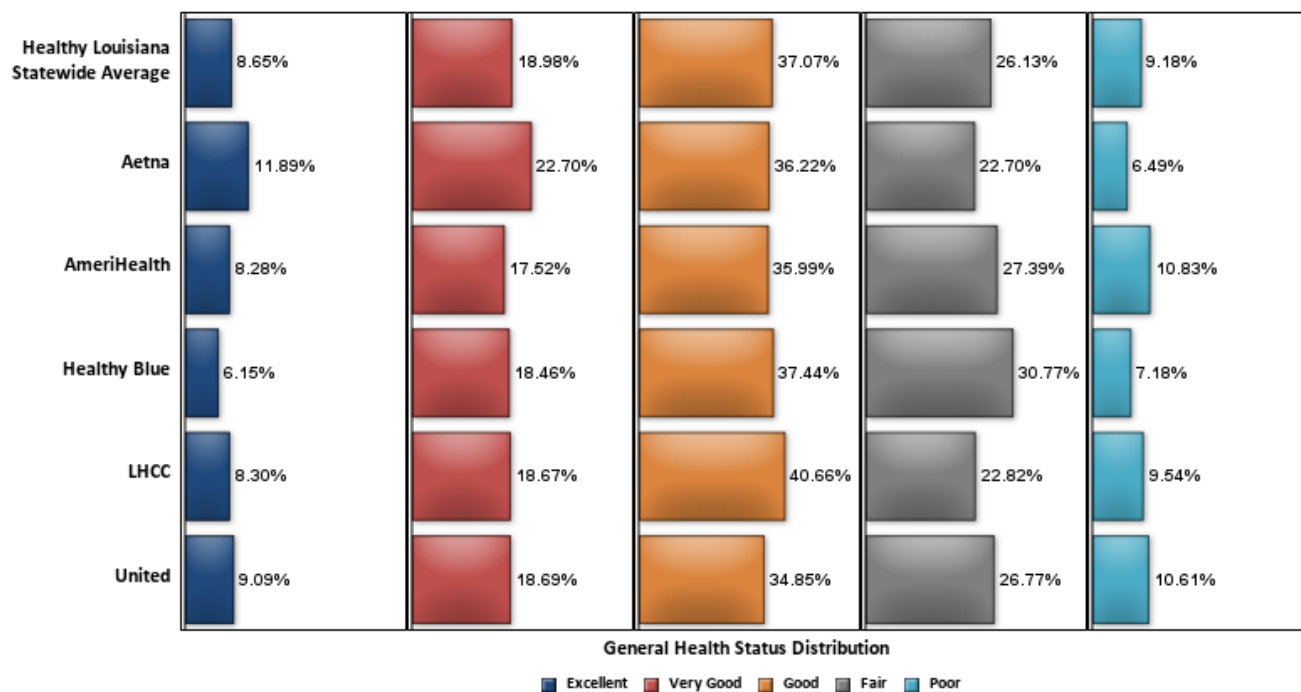
*The "Other" Race category includes responses of Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and Other.

Figure 2-5—Adult Member Demographics: Ethnicity



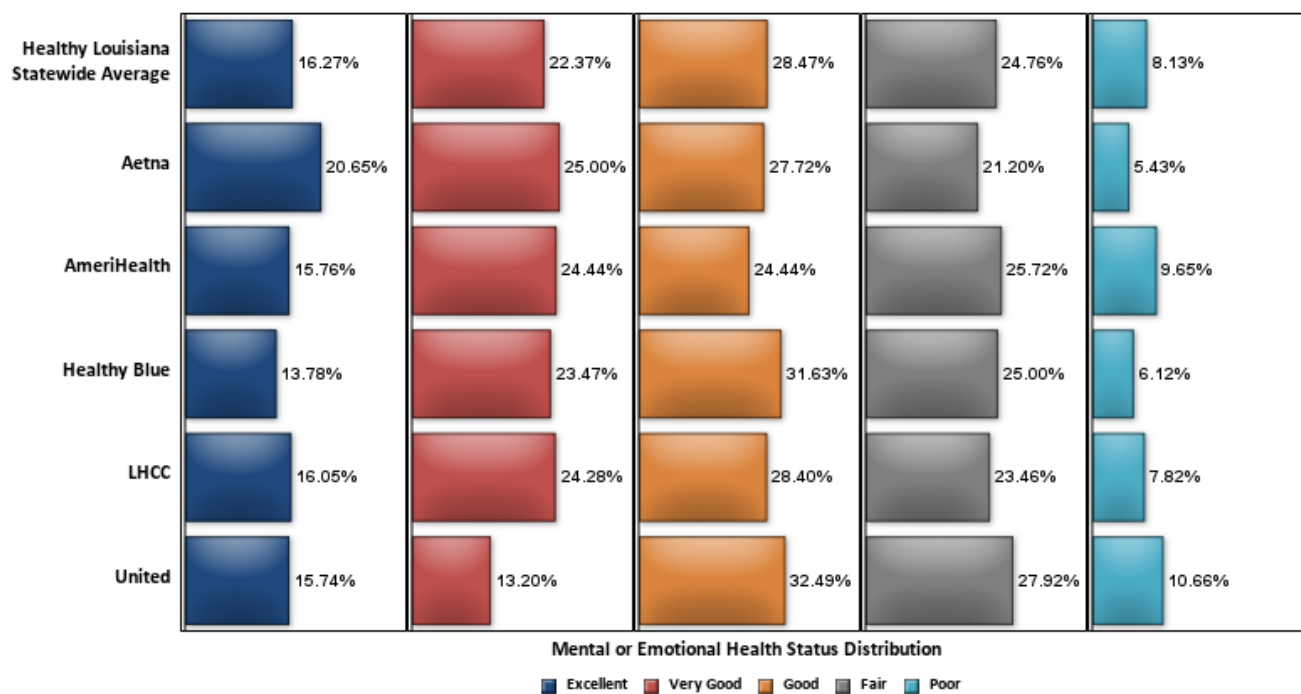
Some percentages may not total 100% due to rounding.

Figure 2-6—Adult Member Demographics: General Health Status



Some percentages may not total 100% due to rounding.

Figure 2-7—Adult Member Demographics: Mental or Emotional Health Status



Some percentages may not total 100% due to rounding.

Respondent Analysis

HSAG compared the gender of adult MCO survey respondents (i.e., respondent percentage) to the gender of non-respondents (i.e., non-respondent percentage) for statistically significant differences. Table 2-2 presents the results of the respondent analysis.

Please note that variables from the sample frame file were used as the data source for this analysis; therefore, these results will differ from those presented in the demographics subsection, which uses responses from the survey as the data source.

Table 2-2—Adult Respondent and Non-Respondent Profiles—Gender

Program/MCO		Male	Female
Healthy Louisiana Statewide Average	R NR	40.07% 41.40%	59.93% 58.60%
Aetna	R NR	51.05% 46.21%	48.95% 53.79%
AmeriHealth	R NR	38.82% 41.72%	61.18% 58.28%
Healthy Blue	R NR	34.01% 39.46%	65.99% 60.54%
LHCC	R NR	35.83%↓ 43.25%	64.17%↑ 56.75%
United	R NR	43.00% 36.34%	57.00% 63.66%
<p>An “R” indicates respondent percentage, and an “NR” indicates non-respondent percentages. ↑ Indicates the respondent percentage is significantly higher than the non-respondent percentage. ↓ Indicates the respondent percentage is significantly lower than the non-respondent percentage. Respondent percentages that are not statistically significantly different than the non-respondent percentages are not noted with arrows. Some percentages may not total 100% due to rounding.</p>			

NCQA Comparisons

In order to assess the overall performance of the adult population, HSAG compared scores for each measure to NCQA's 2023 Quality Compass Benchmark and Compare Quality Data.⁵ Based on this comparison, ratings of one (★) to five (★★★★★) stars were determined for each measure, where one is the lowest possible rating (i.e., Poor) and five is the highest possible rating (i.e., Excellent). The percentages in Table 2-3 represent the achievement scores, while the stars represent overall member experience ratings for each measure when the achievement scores were compared to NCQA's Quality Compass data.

Table 2-3—Healthy Louisiana MCO Adult NCQA Comparisons

	Healthy Louisiana Statewide Average	Aetna	AmeriHealth	Healthy Blue	LHCC	United
Global Ratings						
<i>Rating of Health Plan</i>	★★★★ 80.38%	★★ 76.09%	★★★★★ 81.21%	★★★★★ 87.63%	★★ 77.08%	★★★★★ 82.05%
<i>Rating of All Health Care</i>	★★★★ 76.24%	★★★★ 75.68%	★★★★★ 82.30%	★★★★★ 79.41%	★ 71.43%	★★★★★ 79.85%
<i>Rating of Personal Doctor</i>	★★★★★ 85.60%	★★★★ 84.56%	★★★★★ 85.77%	★★★★★ 87.50%	★★★★ 83.25%	★★★★★ 88.68%
<i>Rating of Specialist Seen Most Often</i>	★★★★ 82.46%	★ ⁺ 77.27% ⁺	★★ 79.72%	★★★★ ⁺ 82.28% ⁺	★★★★ ⁺ 81.91% ⁺	★★★★★ ⁺ 87.65% ⁺
Composite Measures						
<i>Getting Needed Care</i>	★★ 80.47%	★★★★★ ⁺ 84.63% ⁺	★★★★ 82.28%	★★ 80.58%	★ 75.06%	★★★★★ 87.02%
<i>Getting Care Quickly</i>	★★★★ 82.54%	★★ ⁺ 76.35% ⁺	★★★★★ 86.39%	★★ 81.45%	★★★★★ 85.07%	★★ 80.74%
<i>How Well Doctors Communicate</i>	★★★★ 93.11%	★★ 91.80%	★★★★ 93.41%	★★★★ 93.43%	★★★★ 92.80%	★★★★ 93.98%
<i>Customer Service</i>	★★★★★ 92.14%	★★ ⁺ 89.32% ⁺	★★★★★ 95.76%	★★ ⁺ 88.81% ⁺	★★★★★ ⁺ 94.22% ⁺	★★★★★ ⁺ 91.30% ⁺
Individual Item Measures						
<i>Coordination of Care</i>	★★★★ 85.38%	★★★★★ ⁺ 89.23% ⁺	★★★★ 86.13%	★★★★ ⁺ 86.57% ⁺	★★ ⁺ 82.35% ⁺	★★★★★ ⁺ 87.34% ⁺

⁵ National Committee for Quality Assurance. *Quality Compass®: Benchmark and Compare Quality Data 2023*. Washington, DC: NCQA, September 2023.

	Healthy Louisiana Statewide Average	Aetna	AmeriHealth	Healthy Blue	LHCC	United
<i>Flu Vaccination Received</i>	★★ 36.17%	★ 33.33%	★★★ 40.86%	★★ 35.98%	★★ 35.14%	★★ 37.77%
Medical Assistance With Smoking or Tobacco Use Cessation Items						
<i>Advising Smokers and Tobacco Users to Quit</i>	★★ 72.41%	★★ 71.93%	★★★★ 78.40%	★★★ 74.55%	★★ 72.73%	★ 67.65%
<i>Discussing Cessation Medications</i>	★★ 47.79%	★★ 46.49%	★★★ 53.62%	★★★ 50.91%	★ 45.16%	★★ 48.00%
<i>Discussing Cessation Strategies</i>	★★ 45.27%	★★★ 46.43%	★★★★ 50.74%	★★★ 50.00%	★ 39.52%	★★★ 48.51%
+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.						

MCO Comparisons, Trend Analysis, and Proportion of Responses

For purposes of the MCO comparisons and trend analysis, achievement scores were calculated for each measure in accordance with NCQA HEDIS Specifications for Survey Measures.⁶ For the MCO comparisons, achievement scores for each MCO were compared to the Healthy Louisiana Statewide Average to determine whether there were statistically significant differences. In order to evaluate trends in members' experiences, scores in 2023 score were compared to the corresponding 2022 score to determine whether there were statistically significant differences. In addition, responses were classified into categories and the proportion (or percentage) of respondents that fell into each response category was calculated for each measure. For additional details and information on the survey language and response options for the measures and the calculation of achievement scores, please refer to the Methodology report.

Figure 2-8 through Figure 2-29 show the results of the MCO comparisons, trend analysis, and proportion of responses. CAHPS scores with fewer than 100 respondents are denoted with a cross (+). Caution should be exercised when interpreting results for those measures with fewer than 100 respondents.

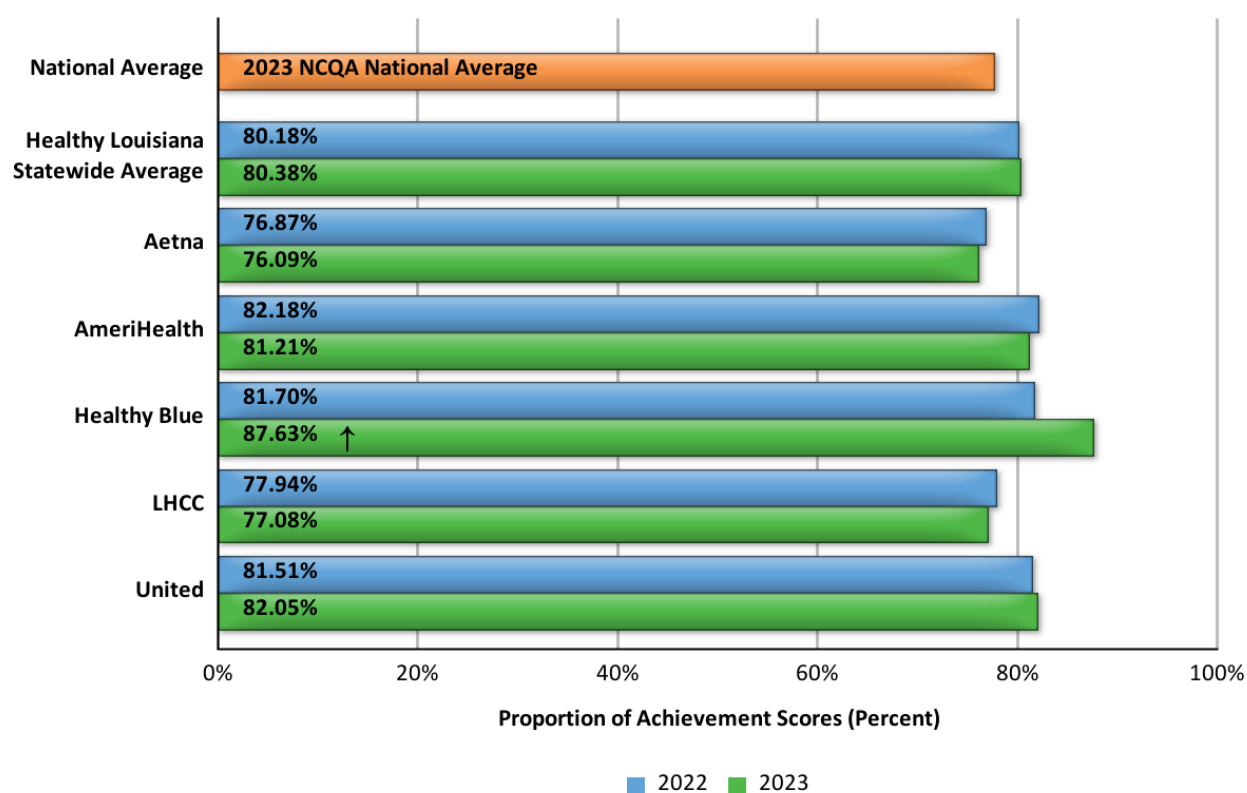
⁶ National Committee for Quality Assurance. *HEDIS® Measurement Year 2022 Volume 3: Specifications for Survey Measures*. Washington, DC: NCQA Publication, 2022.

Global Ratings

Rating of Health Plan

Respondents were asked to rate their health plan on a scale of 0 to 10, with 0 being the “worst health plan possible” and 10 being the “best health plan possible.” Ratings scoring an 8, 9, or 10 are considered achievement scores. Figure 2-8 shows the *Rating of Health Plan* achievement scores, including the MCO comparisons, trend analysis, and the 2023 NCQA adult Medicaid national average.

Figure 2-8—MCO Comparisons and Trend Analysis: Rating of Health Plan

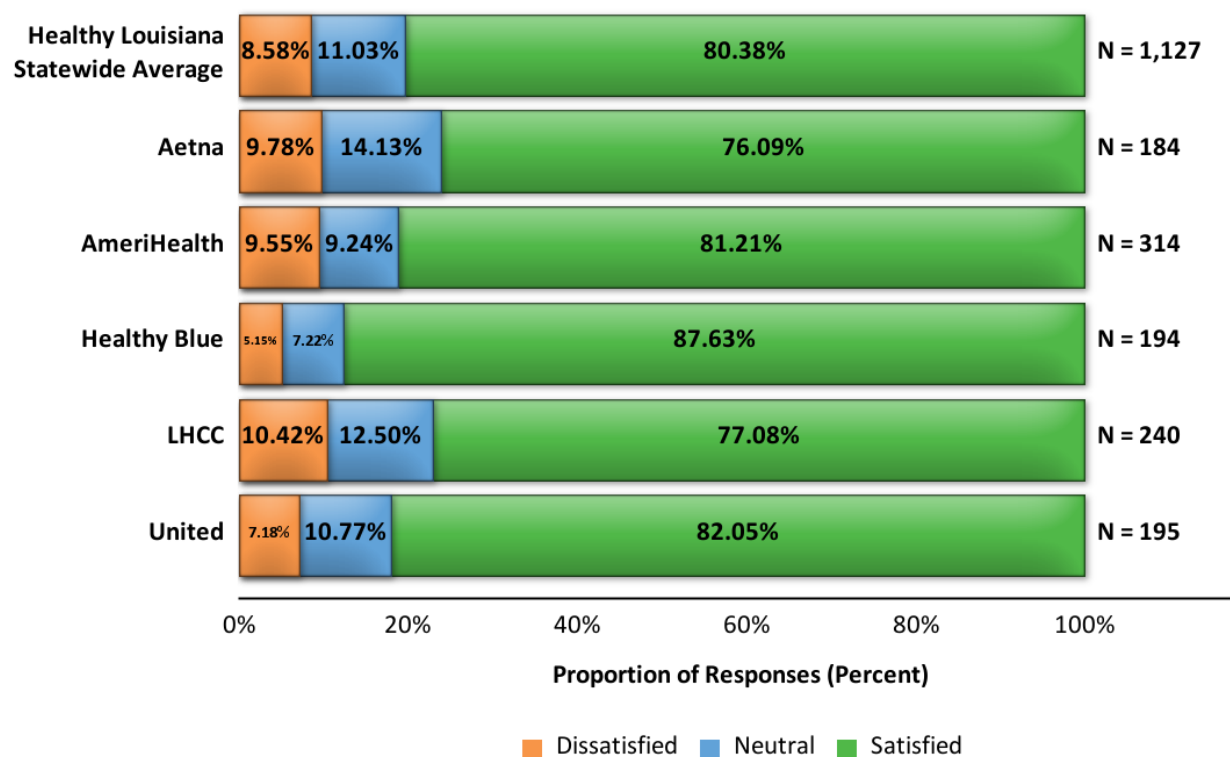


Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average

If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

Figure 2-9 depicts the proportion of respondents who fell into each response category for *Rating of Health Plan*.

Figure 2-9—Proportion of Responses: Rating of Health Plan

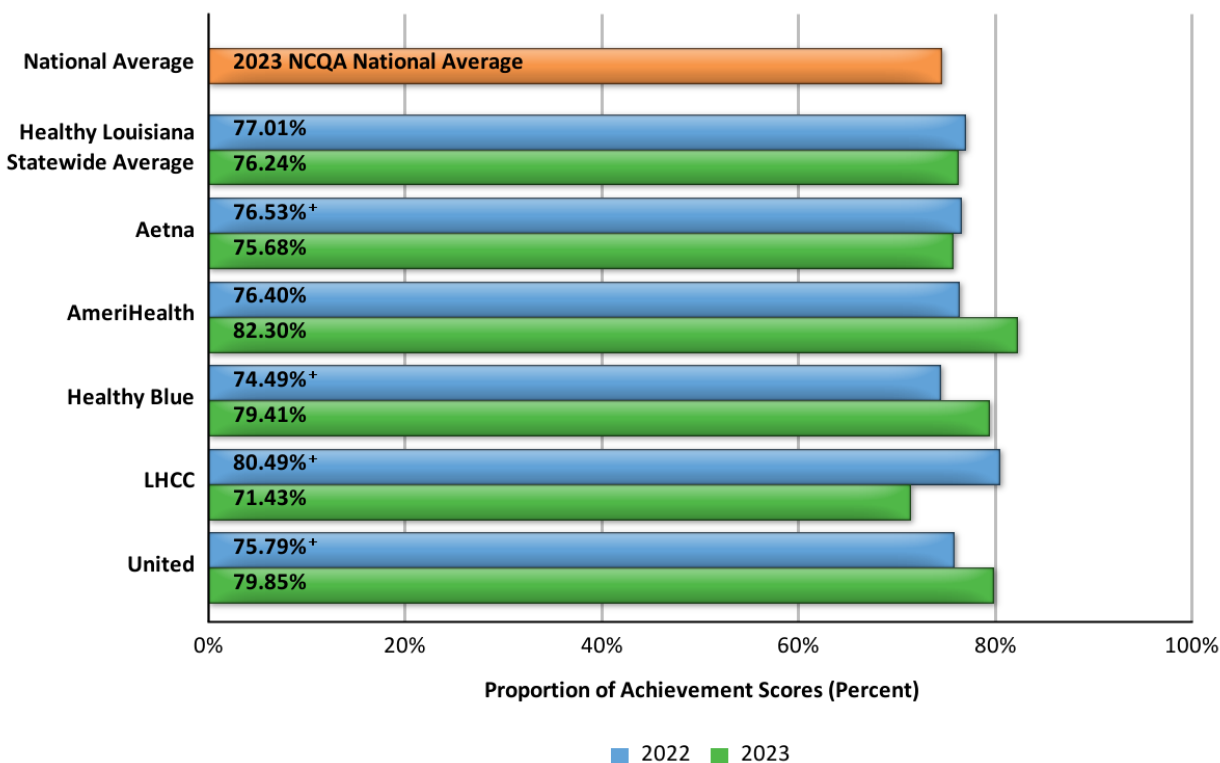


Some percentages may not total 100% due to rounding.

Rating of All Health Care

Respondents were asked to rate their health care on a scale of 0 to 10, with 0 being the “worst health care possible” and 10 being the “best health care possible.” Ratings scoring 8, 9, or 10 are considered achievement scores. Figure 2-10 shows the *Rating of All Health Care* achievement scores, including the MCO comparisons, trend analysis, and the 2023 NCQA adult Medicaid national average.

Figure 2-10—MCO Comparisons and Trend Analysis: Rating of All Health Care



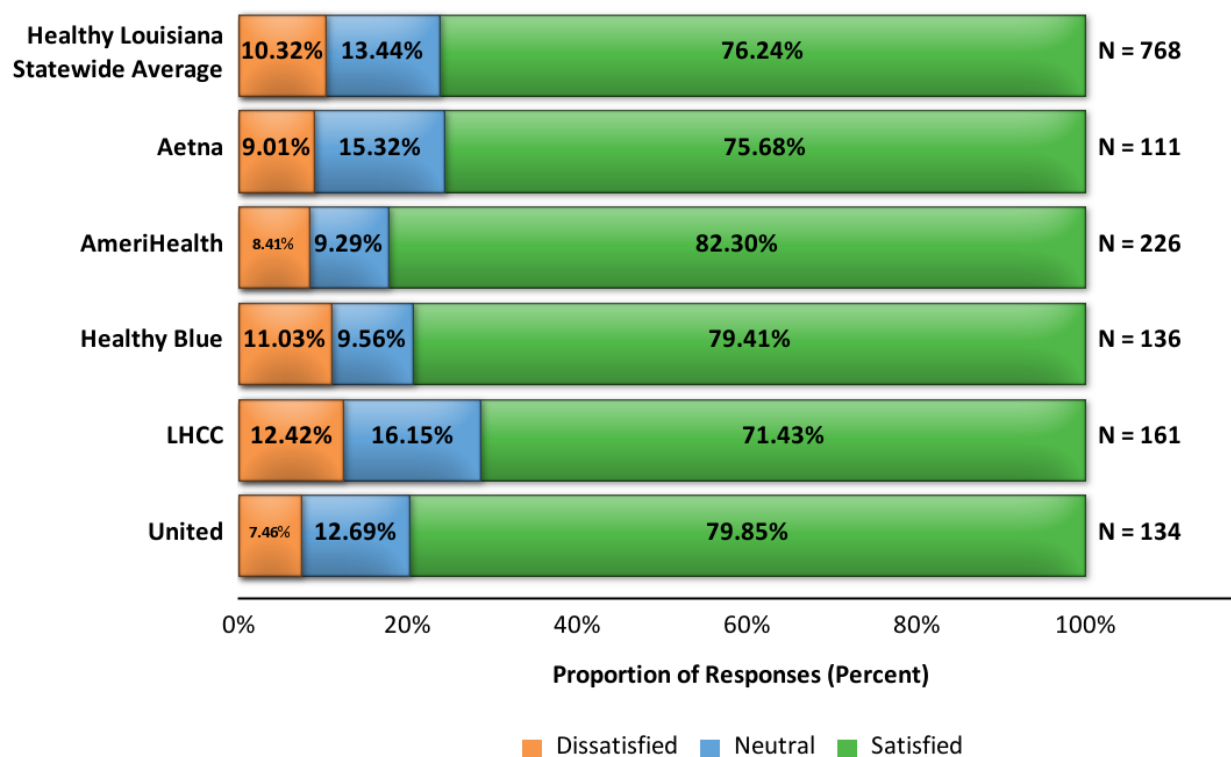
Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average

If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Figure 2-11 depicts the proportion of respondents who fell into each response category for *Rating of All Health Care*.

Figure 2-11—Proportion of Responses: Rating of All Health Care

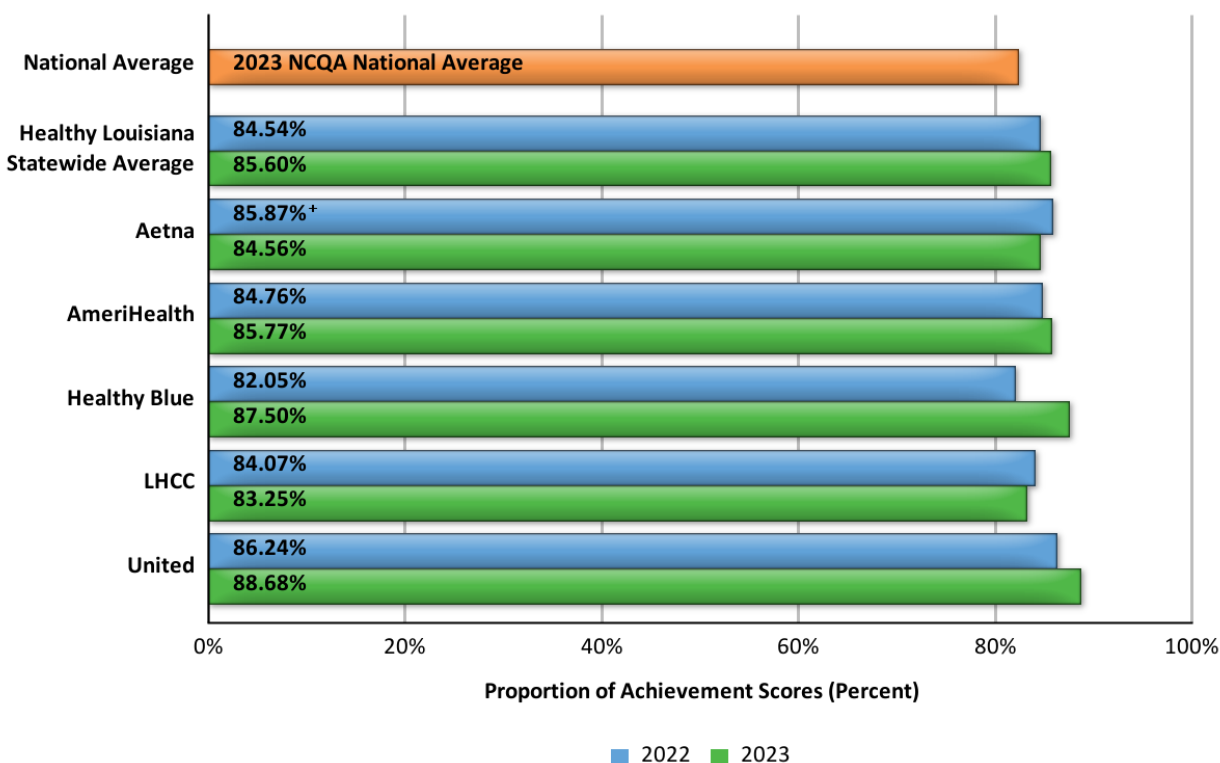


Some percentages may not total 100% due to rounding.

Rating of Personal Doctor

Respondents were asked to rate their personal doctor on a scale of 0 to 10, with 0 being the “worst personal doctor possible” and 10 being the “best personal doctor possible.” Ratings scoring 8, 9, or 10 are considered achievement scores. Figure 2-12 shows the *Rating of Personal Doctor* achievement scores, including the MCO comparisons, trend analysis, and 2023 NCQA adult Medicaid national average.

Figure 2-12—MCO Comparisons and Trend Analysis: Rating of Personal Doctor

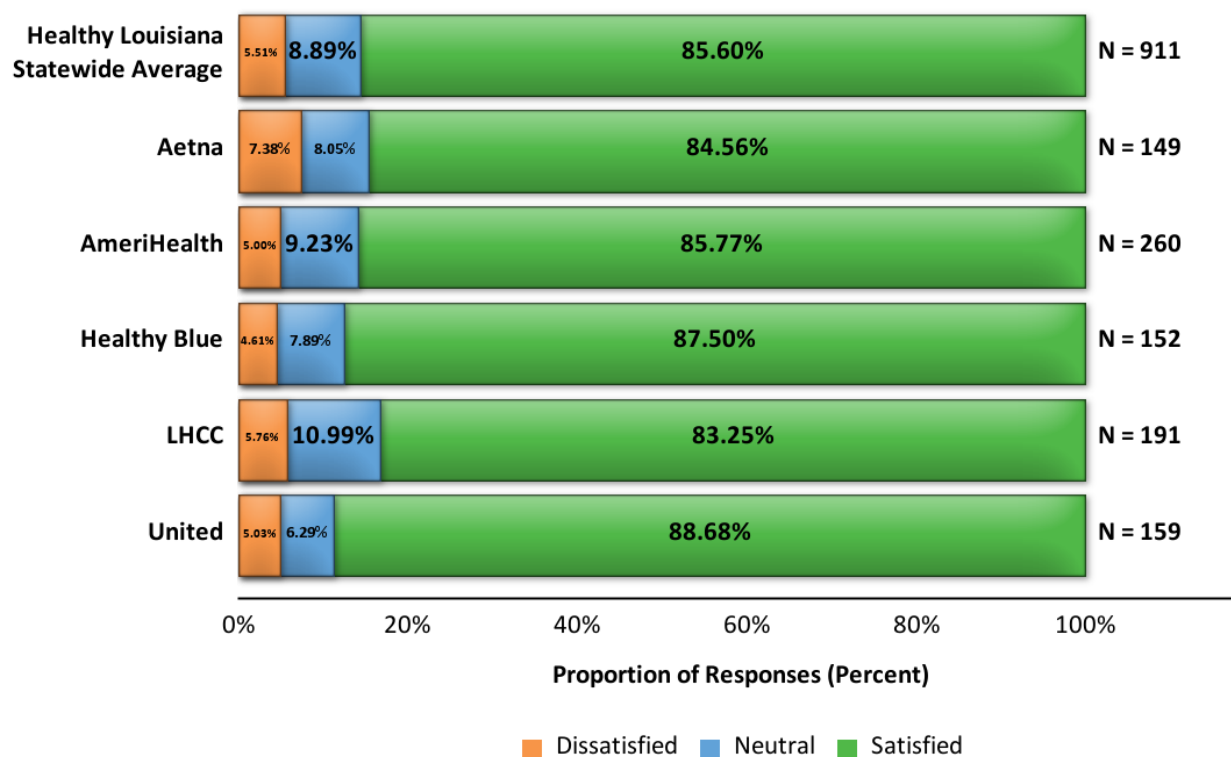


Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average

If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.
+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Figure 2-13 depicts the proportion of respondents who fell into each response category for *Rating of Personal Doctor*.

Figure 2-13—Proportion of Responses: Rating of Personal Doctor

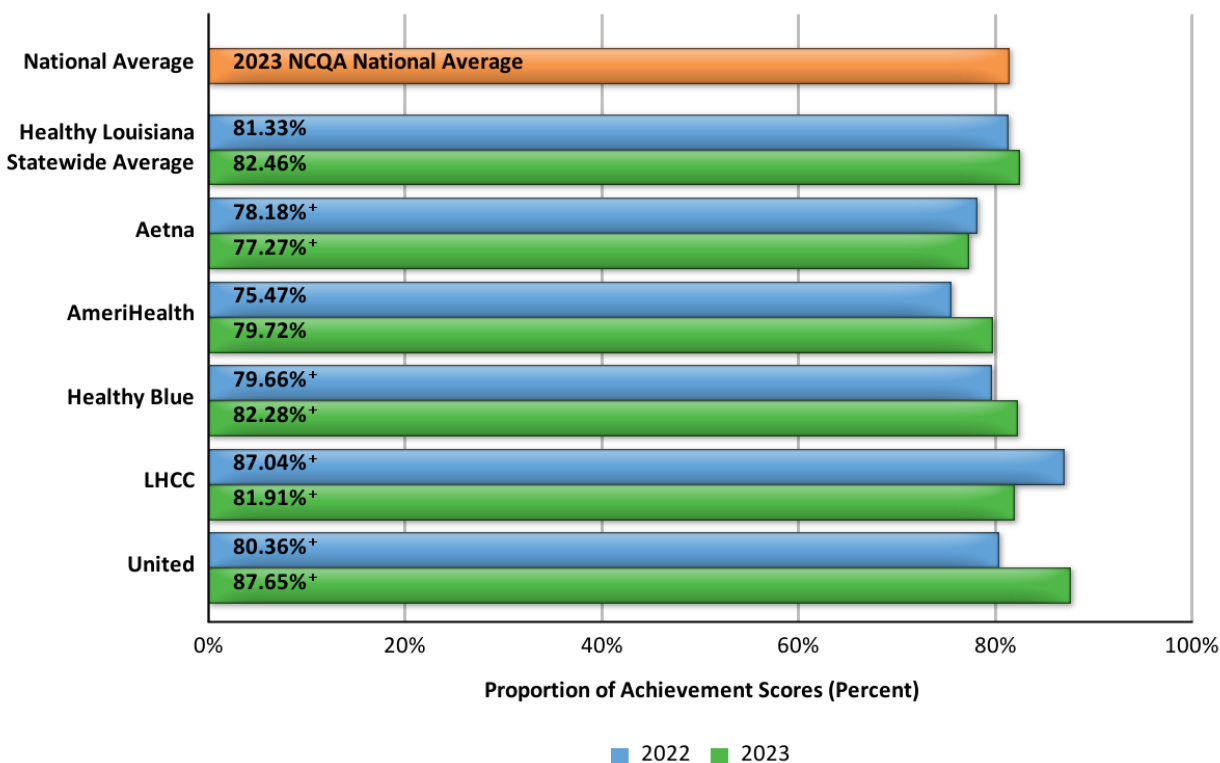


Some percentages may not total 100% due to rounding.

Rating of Specialist Seen Most Often

Respondents were asked to rate their specialist on a scale of 0 to 10, with 0 being the “worst specialist possible” and 10 being the “best specialist possible.” Ratings scoring an 8, 9, or 10 are considered achievement scores. Figure 2-14 shows the *Rating of Specialist Seen Most Often* achievement scores, including the MCO comparisons trend analysis, and the 2023 NCQA adult Medicaid national average.

Figure 2-14—MCO Comparisons and Trend Analysis: Rating of Specialist Seen Most Often



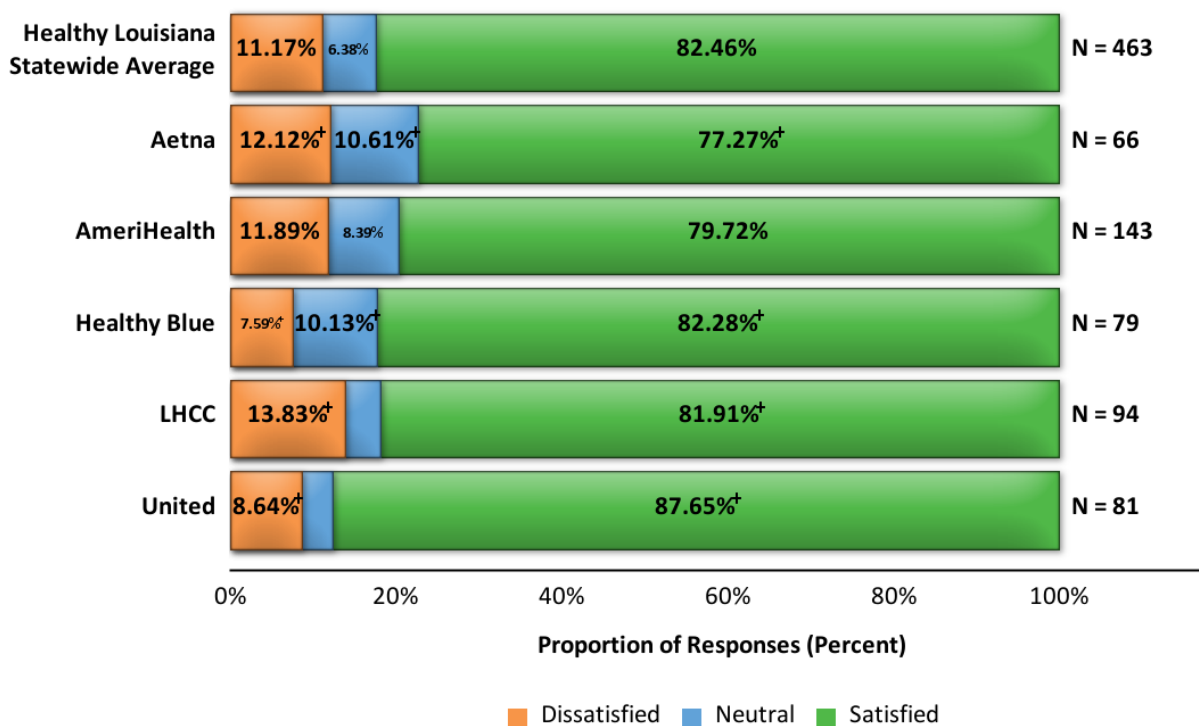
Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average

If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Figure 2-15 depicts the proportion of respondents who fell into each response category for *Rating of Specialist Seen Most Often*.

Figure 2-15—Proportion of Responses: Rating of Specialist Seen Most Often



Some percentages may not total 100% due to rounding.

+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Composite Measure

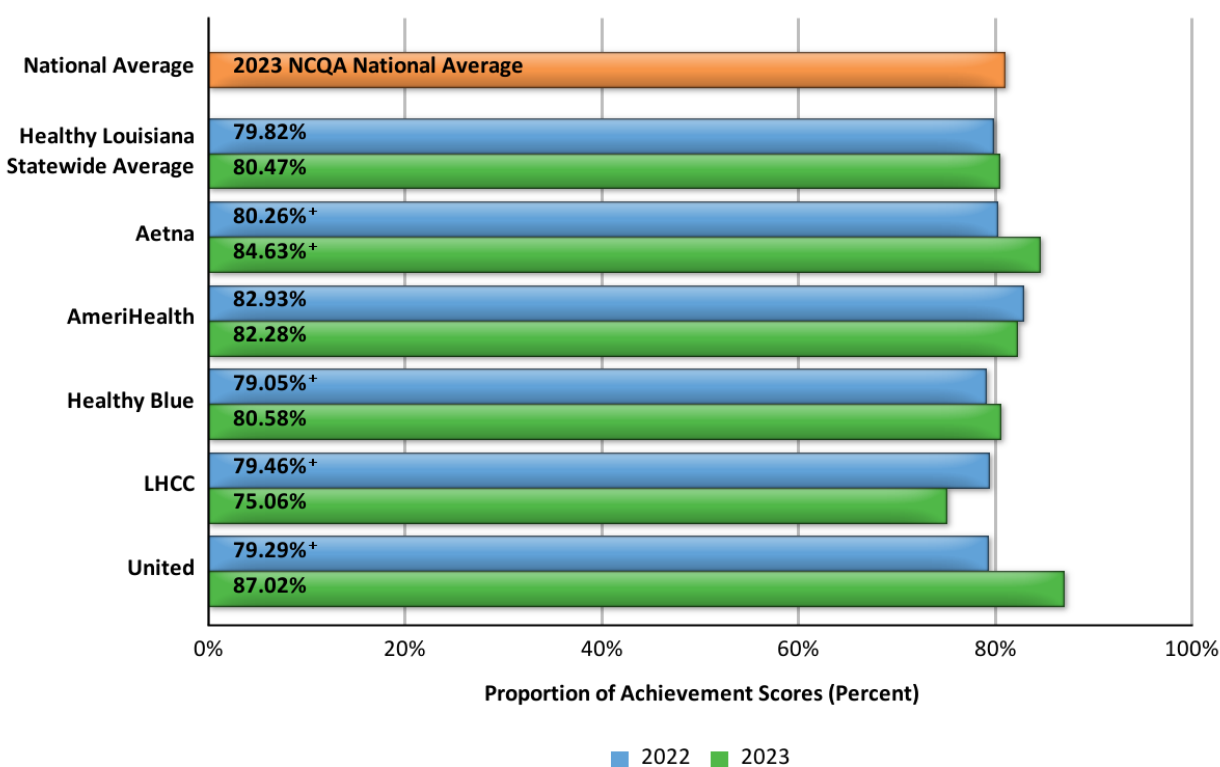
Getting Needed Care

Respondents were asked to assess how often (never, sometimes, usually, or always) it was easy to get needed care:

- In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?
- In the last 6 months, how often did you get an appointment with a specialist as soon as you needed?

Response options of Usually and Always are considered achievement scores. Figure 2-16 shows the *Getting Needed Care* achievement scores, including the MCO comparisons, trend analysis, and the 2023 NCQA adult Medicaid national average.

Figure 2-16—MCO Comparisons and Trend Analysis: Getting Needed Care



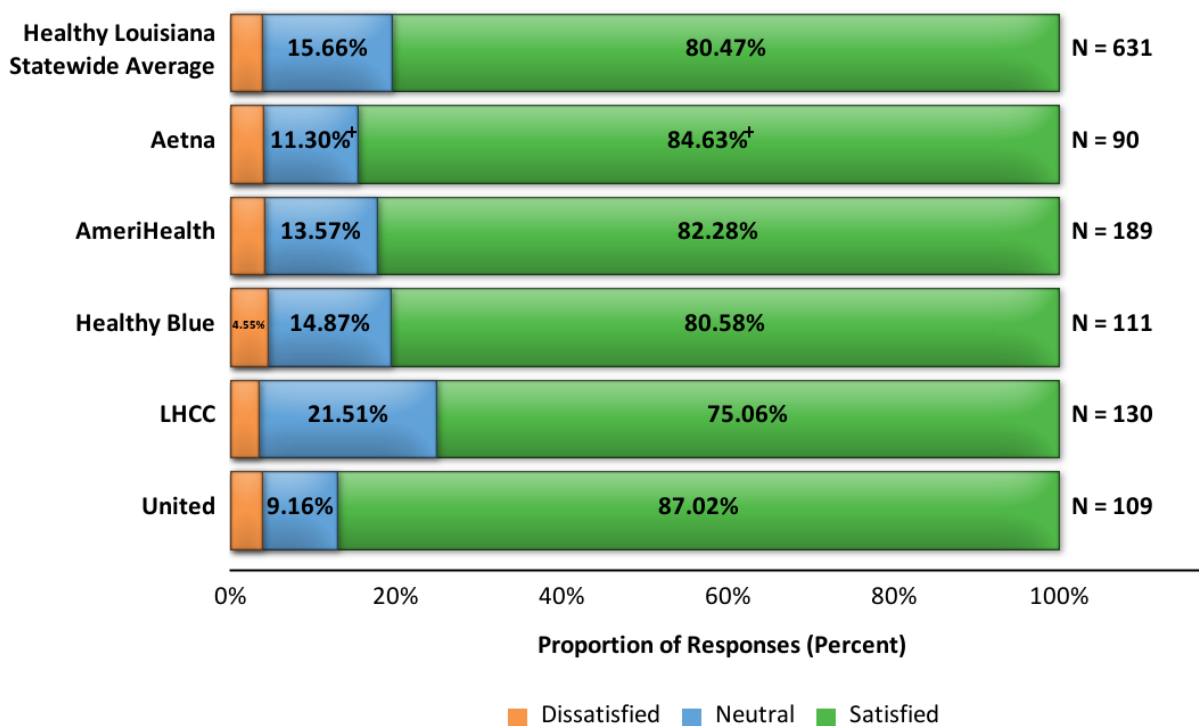
Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average

If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Figure 2-17 depicts the proportion of respondents who fell into each response category for *Getting Needed Care*.

Figure 2-17—Proportion of Responses: Getting Needed Care



Some percentages may not total 100% due to rounding.

+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

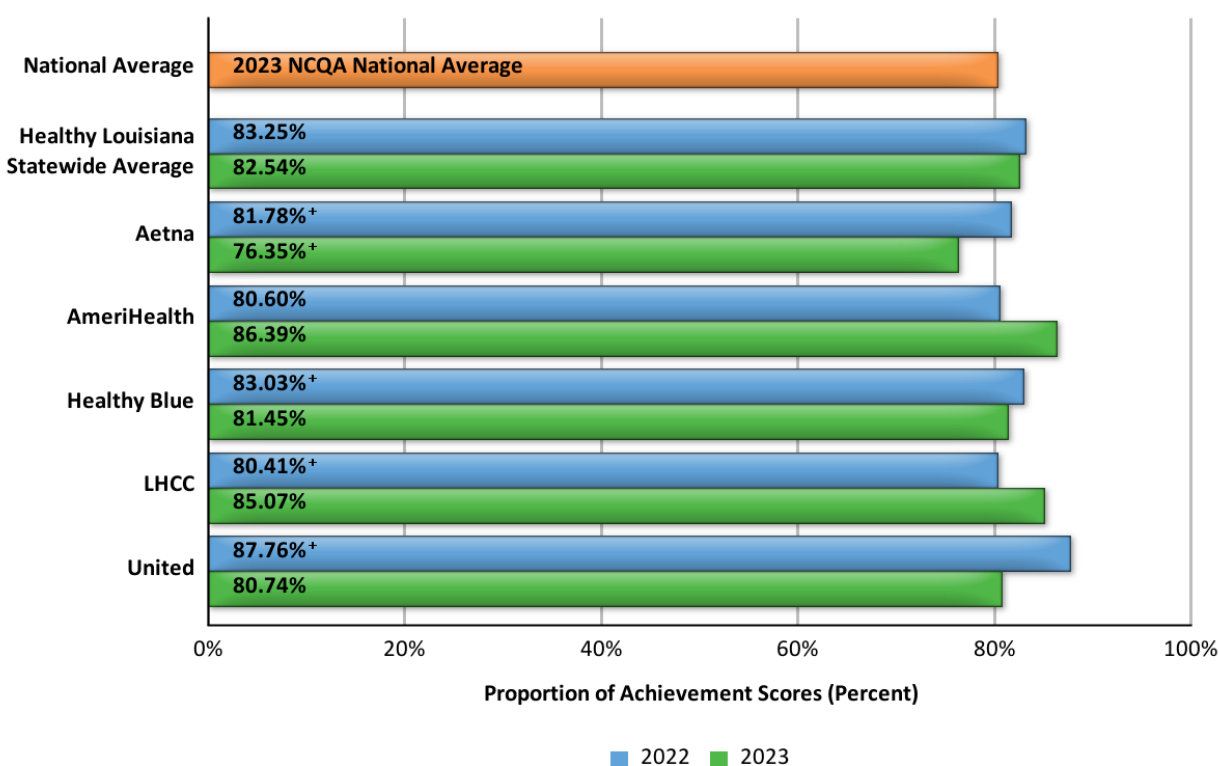
Getting Care Quickly

Respondents were asked to assess how often (never, sometimes, usually, or always) it was easy to get care quickly:

- In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?
- In the last 6 months, how often did you get an appointment for a check-up or routine care at a doctor's office or clinic as soon as you needed?

Response options of Usually and Always are considered achievement scores. Figure 2-18 shows the *Getting Care Quickly* achievement scores, including the MCO comparisons, trend analysis, and the 2023 NCQA adult Medicaid national average.

Figure 2-18—MCO Comparisons and Trend Analysis: Getting Care Quickly



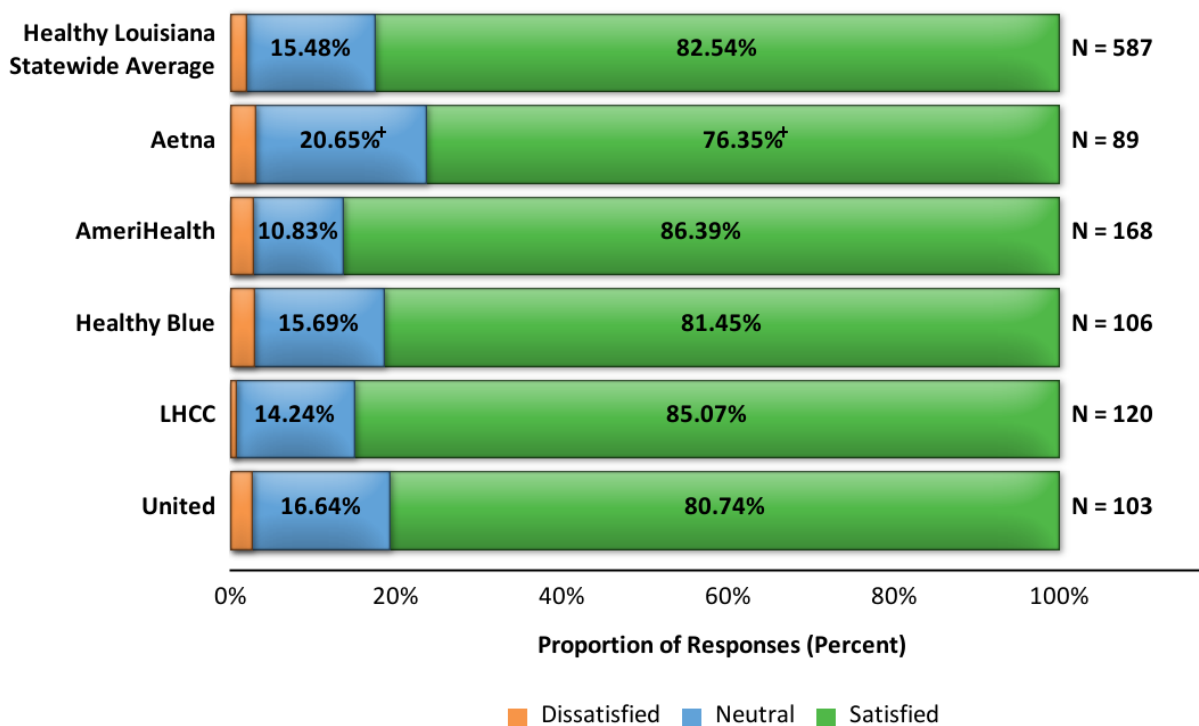
Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average

If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Figure 2-19 depicts the proportion of respondents who fell into each response category for *Getting Care Quickly*.

Figure 2-19—Proportion of Responses: Getting Care Quickly



Some percentages may not total 100% due to rounding.

+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

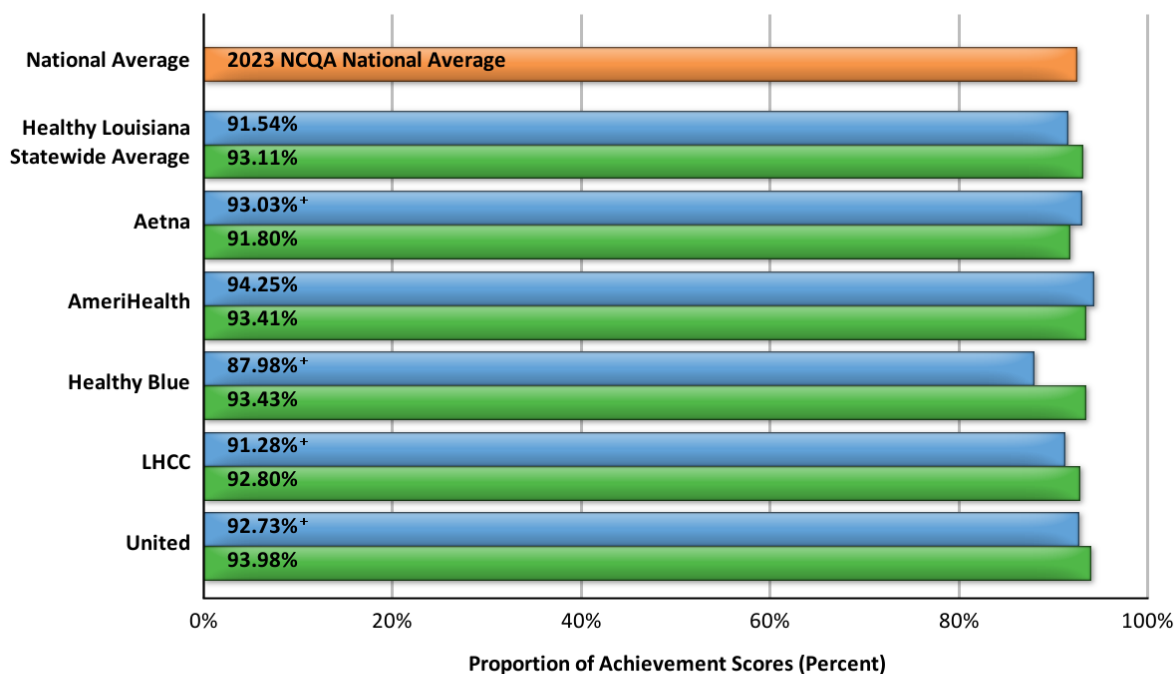
How Well Doctors Communicate

Respondents were asked to assess how often (never, sometimes, usually, or always) the respondent's personal doctor communicated well with them:

- In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand?
- In the last 6 months, how often did your personal doctor listen carefully to you?
- In the last 6 months, how often did your personal doctor show respect for what you had to say?
- In the last 6 months, how often did your personal doctor spend enough time with you?

Response options of Usually and Always are considered achievement scores. Figure 2-20 shows the *How Well Doctors Communicate* achievement scores, including the MCO comparisons, trend analysis, and the 2023 NCQA adult Medicaid national average.

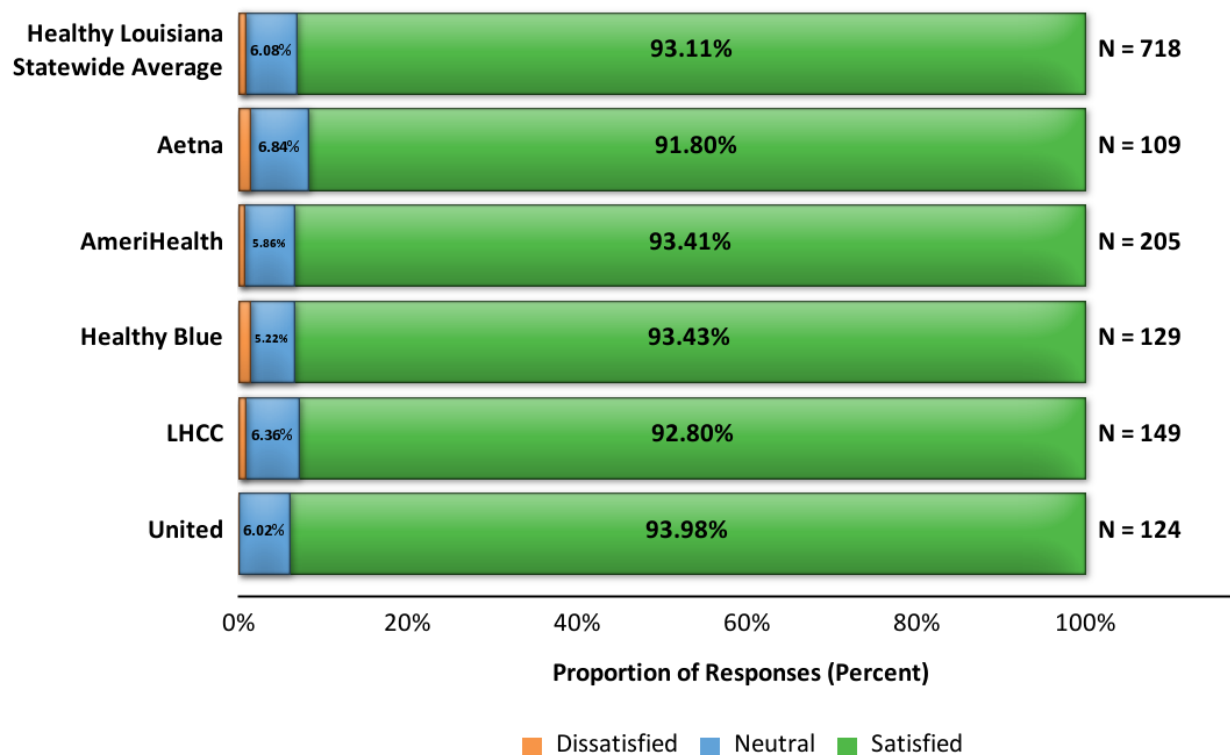
Figure 2-20—MCO Comparisons and Trend Analysis: How Well Doctors Communicate



Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average
If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.
+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Figure 2-21 depicts the proportion of respondents who fell into each response category for *How Well Doctors Communicate*.

Figure 2-21—Proportion of Responses: How Well Doctors Communicate



Some percentages may not total 100% due to rounding.

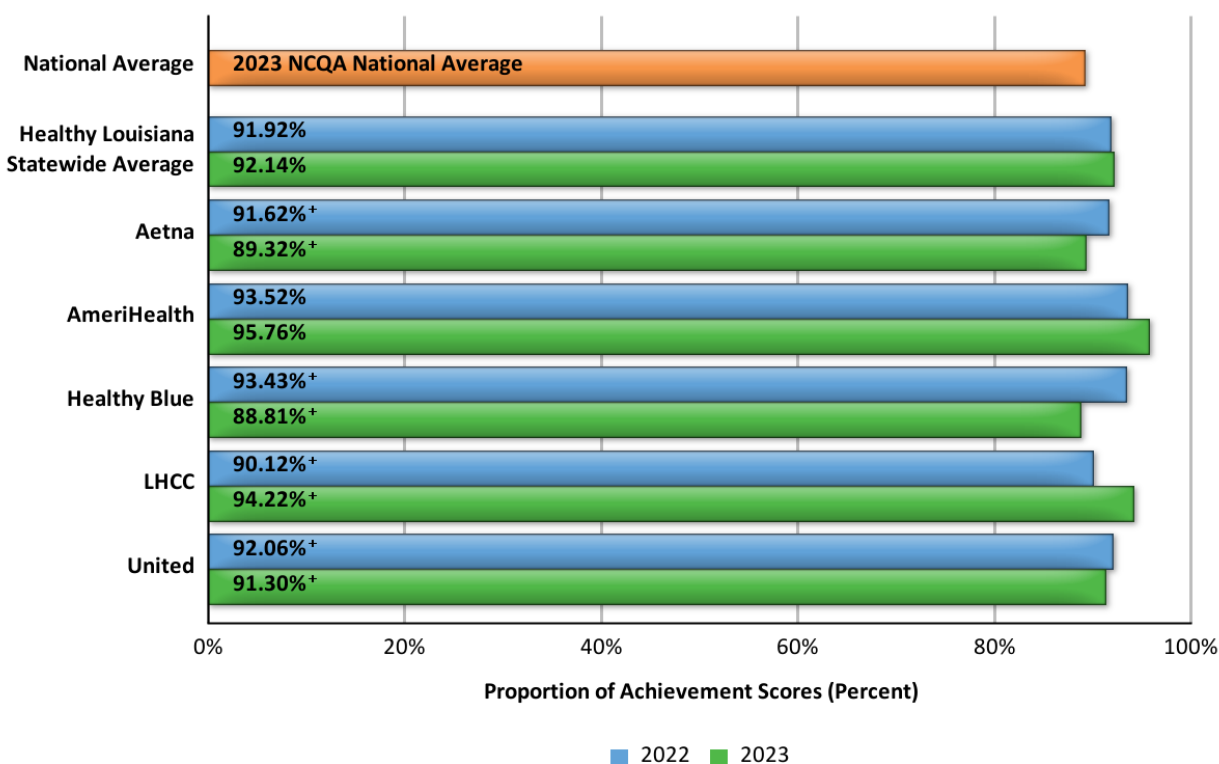
Customer Service

Respondents were asked to assess how often (never, sometimes, usually, or always) respondents had a positive experience with their plan's customer service:

- In the last 6 months, how often did your health plan's customer service give you information or help you needed?
- In the last 6 months, how often did your health plan's customer service staff treat you with courtesy and respect?

Response options of Usually and Always are considered achievement scores. Figure 2-22 shows the *Customer Service* achievement scores, including the MCO comparisons, trend analysis, and the 2023 NCQA adult Medicaid national average.

Figure 2-22—MCO Comparisons and Trend Analysis: Customer Service



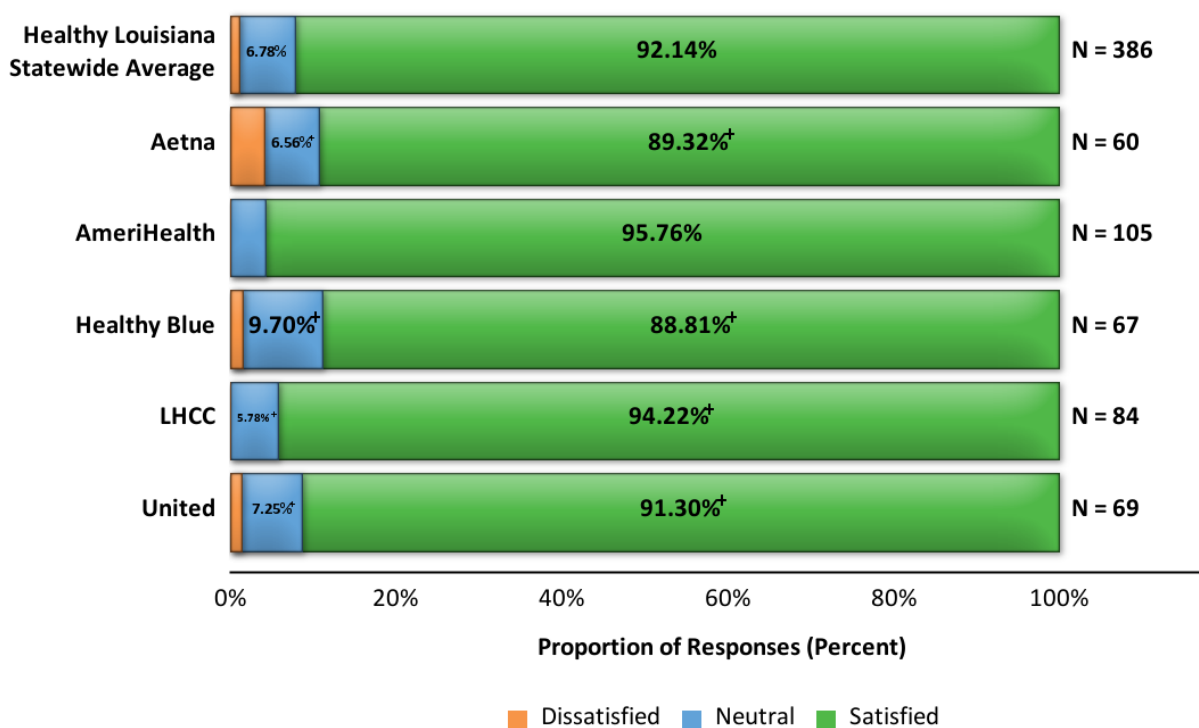
Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average

If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Figure 2-23 depicts the proportion of respondents who fell into each response category for *Customer Service*.

Figure 2-23—Proportion of Responses: Customer Service



Some percentages may not total 100% due to rounding.

+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Individual Item Measures

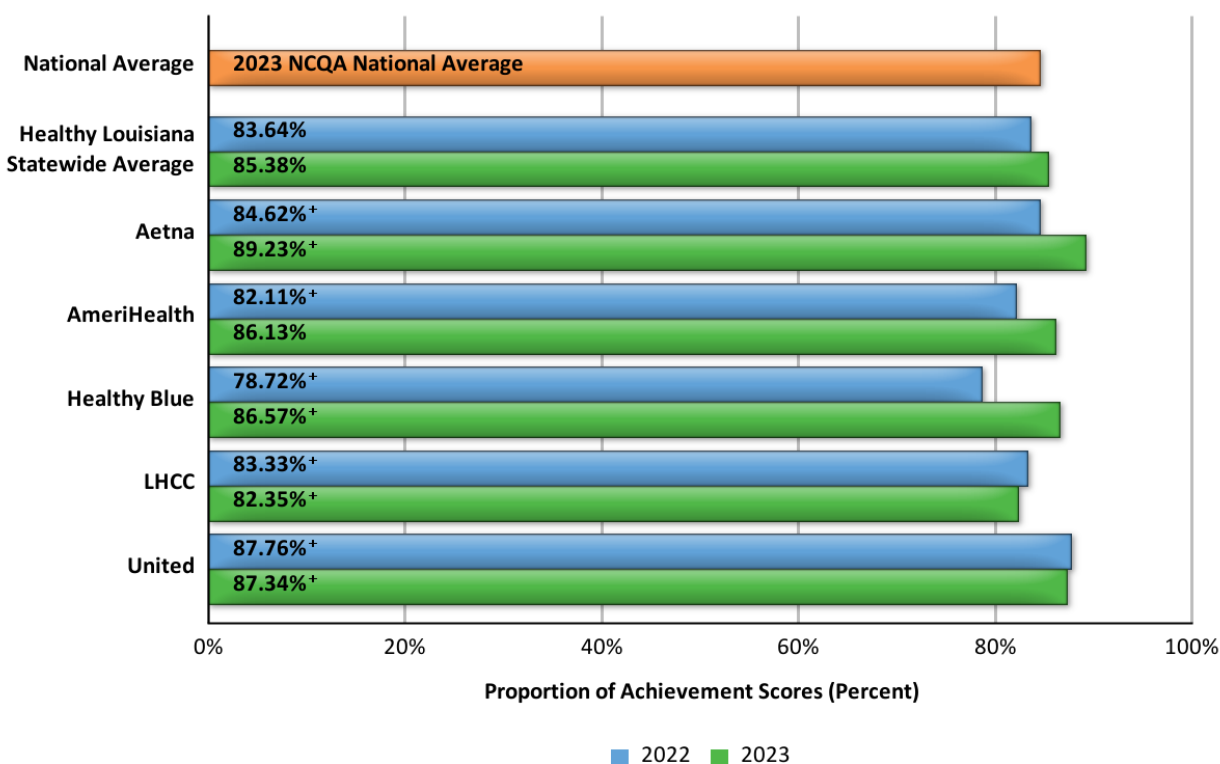
Coordination of Care

Respondents were asked to assess how often (never, sometimes, usually, or always) the respondent's personal doctor seemed informed and up-to-date:

- 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?

Response options of Usually and Always are considered achievement scores. Figure 2-24 shows the *Coordination of Care* achievement scores, including the MCO comparisons, trend analysis, and the 2023 NCQA adult Medicaid national average.

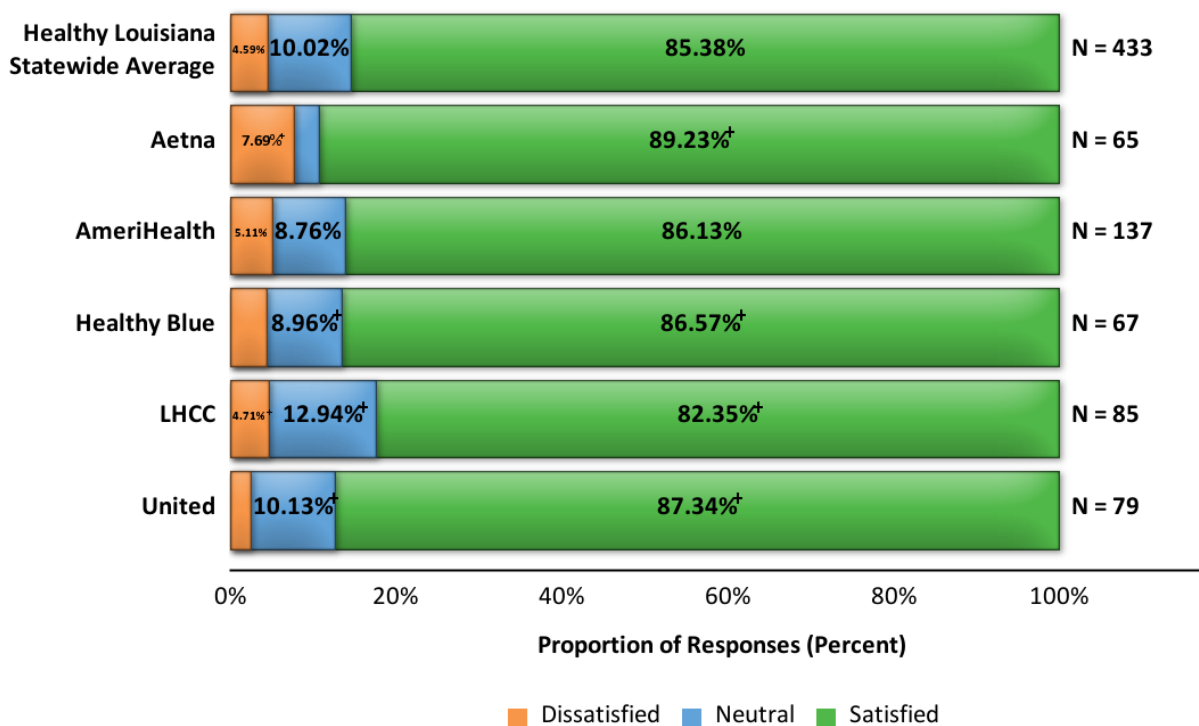
Figure 2-24—MCO Comparisons and Trend Analysis: Coordination of Care



Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average
+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Figure 2-25 depicts the proportion of respondents who fell into each response category for *Coordination of Care*.

Figure 2-25—Proportion of Responses: Coordination of Care



Some percentages may not total 100% due to rounding.

+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

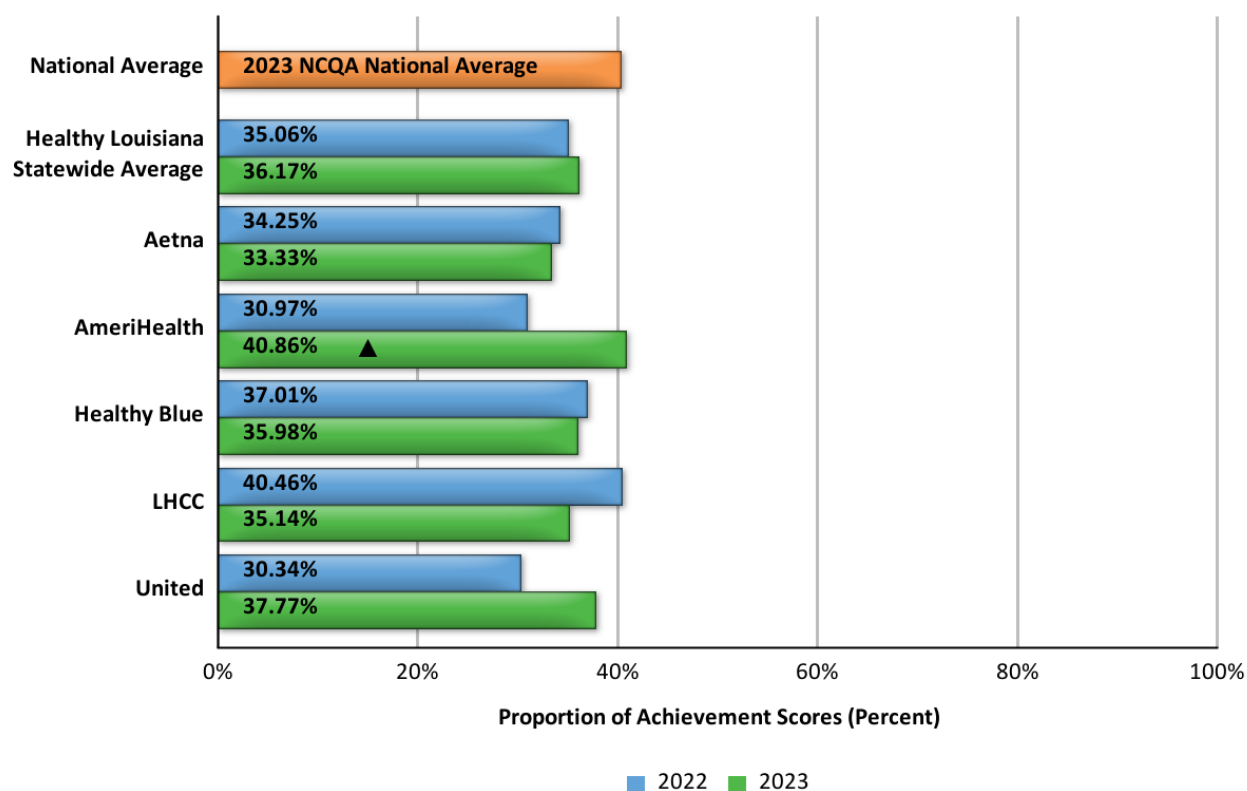
Flu Vaccination Received

Respondents were asked to assess (yes or no) if they received their flu vaccination since July 1, 2022:

- Have you had either a flu shot or flu spray in the nose since July 1, 2022?

A response option of Yes is considered an achievement score. Figure 2-26 shows the *Flu Vaccination Received* achievement scores, including the MCO comparisons, trend analysis, and the 2023 NCQA adult Medicaid national average.

Figure 2-26—MCO Comparisons and Trend Analysis: Flu Vaccination Received



Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average

If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

Medical Assistance With Smoking and Tobacco Use Cessation Items

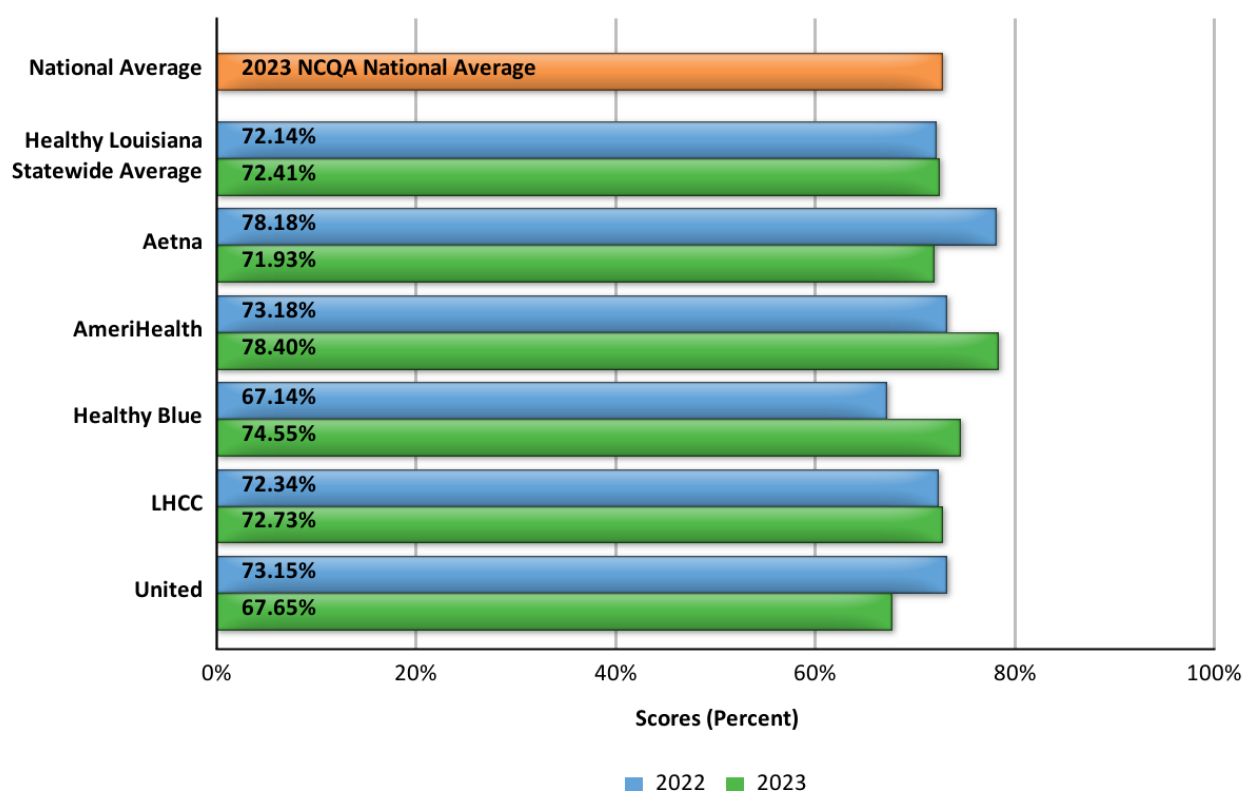
Advising Smokers and Tobacco Users to Quit

Respondents were asked to assess how often (never, sometimes, usually, or always) they were advised to quit smoking or using tobacco:

- 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?

Response options of Sometimes, Usually, and Always are considered achievement scores. Figure 2-27 shows the *Advising Smokers and Tobacco Users to Quit* scores, including the MCO comparisons, trend analysis, and the 2023 NCQA adult Medicaid national average.

Figure 2-27—MCO Comparisons and Trend Analysis: Advising Smokers and Tobacco Users to Quit



If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

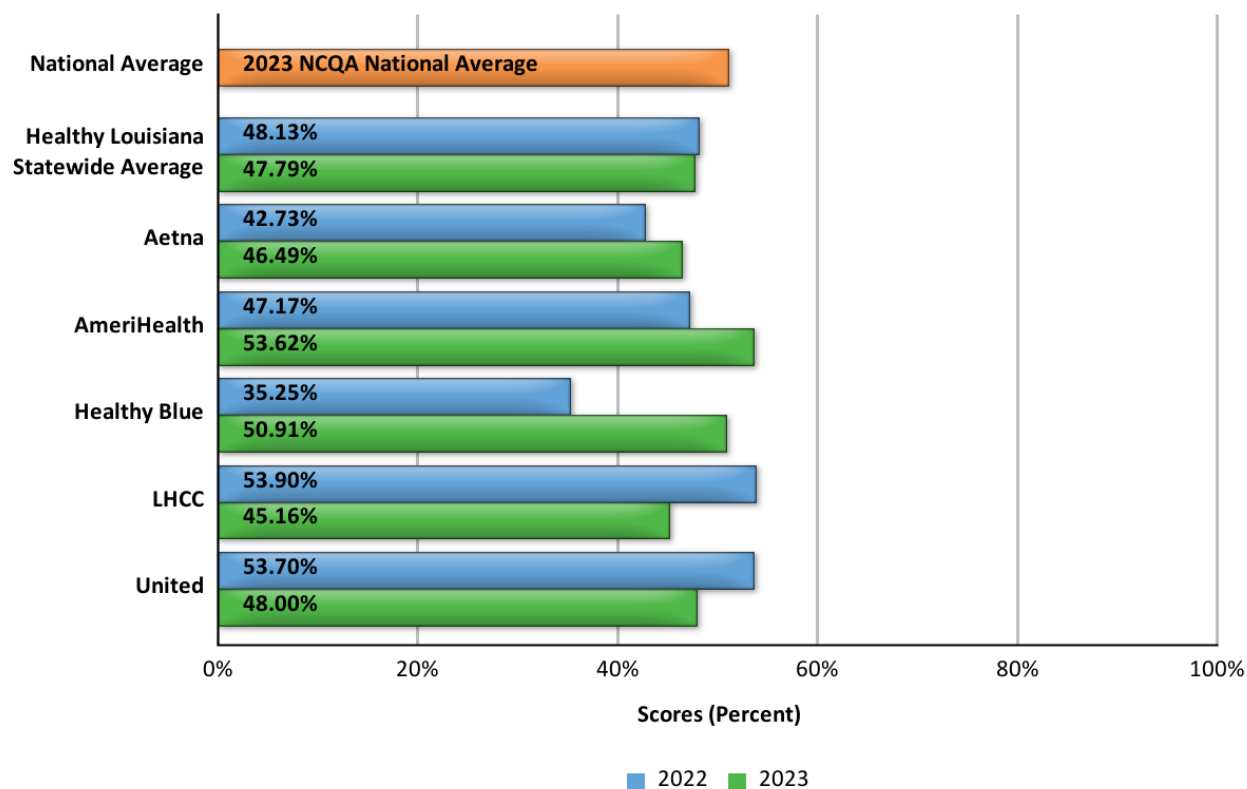
Discussing Cessation Medications

Respondents were asked to assess how often (never, sometimes, usually, or always) medication was recommended or discussed by a doctor or health provider to assist with quitting smoking or using tobacco:

- 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.

Response options of Sometimes, Usually, and Always are considered achievement scores. Figure 2-28 shows the *Discussing Cessation Medications* scores, including the MCO comparisons, trend analysis, and the 2023 NCQA adult Medicaid national average.

Figure 2-28—MCO Comparisons and Trend Analysis: Discussing Cessation Medications



Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average

If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

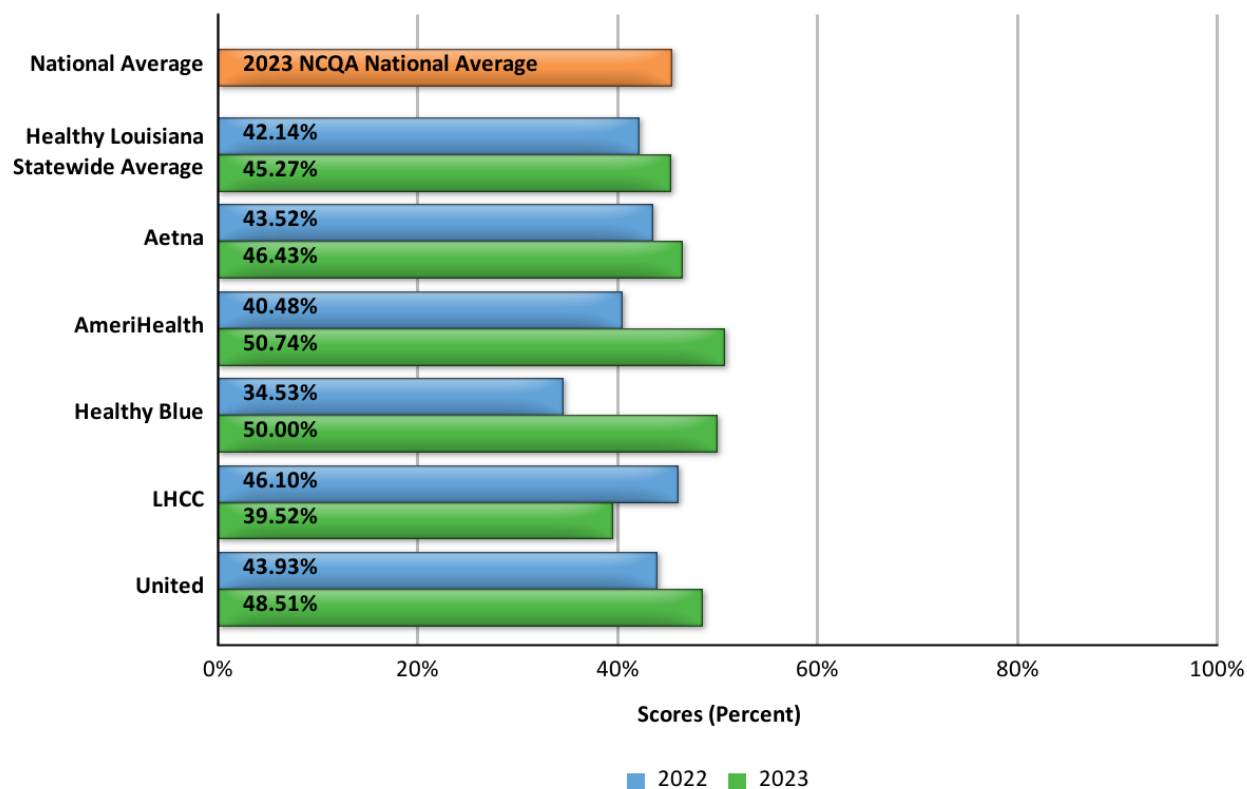
Discussing Cessation Strategies

Respondents were asked to assess how often (never, sometimes, usually, or always) doctors or health providers discussed or provided methods and strategies other than medication to assist with quitting smoking or using tobacco:

- 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.

Response options of Sometimes, Usually, and Always are considered achievement scores. Figure 2-29 shows the *Discussing Cessation Strategies* scores, including the MCO comparisons, trend analysis, and the 2023 NCQA adult Medicaid national average.

Figure 2-29—MCO Comparisons and Trend Analysis: Discussing Cessation Strategies



Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average

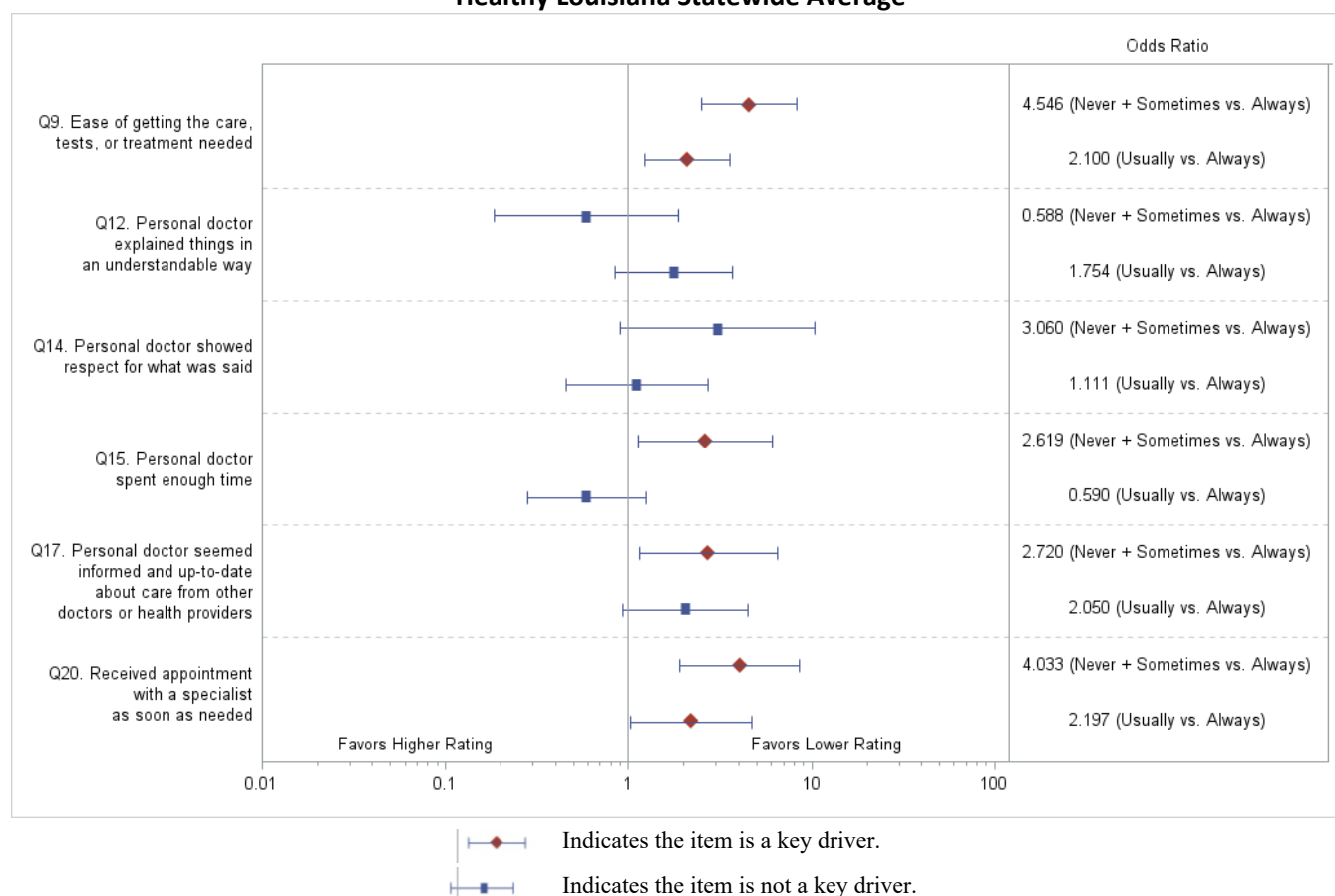
If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

Key Drivers of Member Experience Analysis

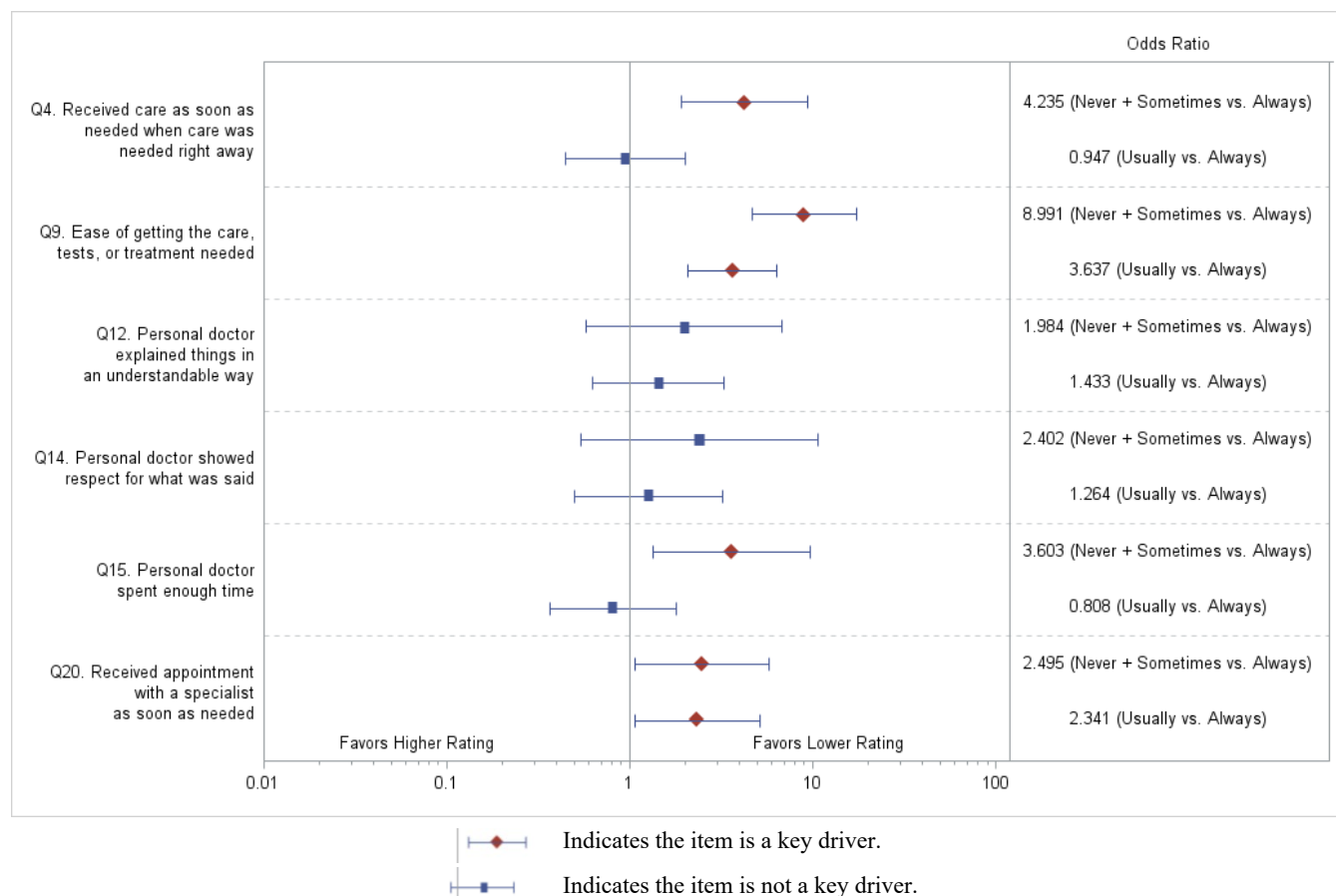
HSAG performed an analysis of key drivers of member experience for the following measures: *Rating of Health Plan*, *Rating of All Health Care*, and *Rating of Personal Doctor*. Key drivers allow LDH to draw overall conclusions from the survey results and identify priority improvement opportunities for LDH related to members' experiences with the services provided by the MCOs.

Figure 2-30 through Figure 2-32 depict those survey items identified for each of the three measures as being key drivers of member experience (i.e., items indicated with a red diamond) for the Healthy Louisiana Statewide Average.

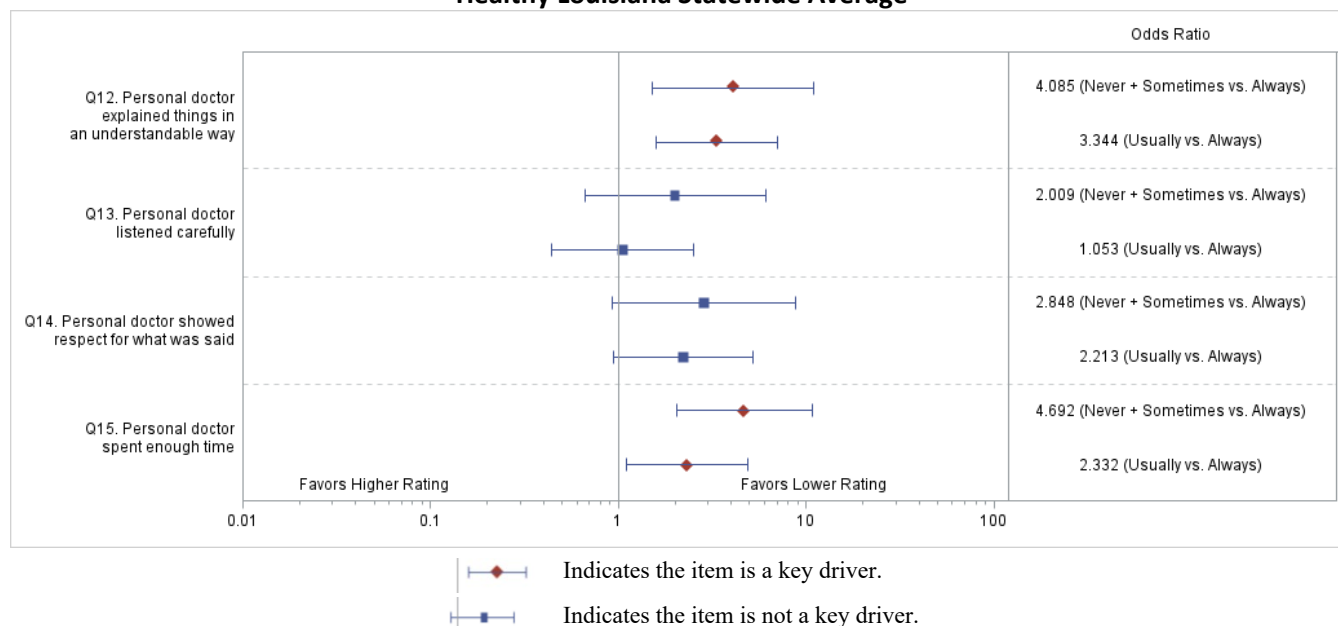
**Figure 2-30—Key Drivers of Member Experience: Rating of Health Plan—
Healthy Louisiana Statewide Average**



**Figure 2-31—Key Drivers of Member Experience: Rating of All Health Care—
Healthy Louisiana Statewide Average**



**Figure 2-32—Key Drivers of Member Experience: Rating of Personal Doctor—
Healthy Louisiana Statewide Average**



3. General Child Results

Survey Respondents

Table 3-1 shows the total number of general child members sampled, total number of completed surveys, total number of eligible and ineligible records, and response rates for the Healthy Louisiana Statewide Average and all participating MCOs. A total of 11,567 child members were surveyed, and a total of 1,209 child surveys were completed. The overall child response rate was 10.64 percent.

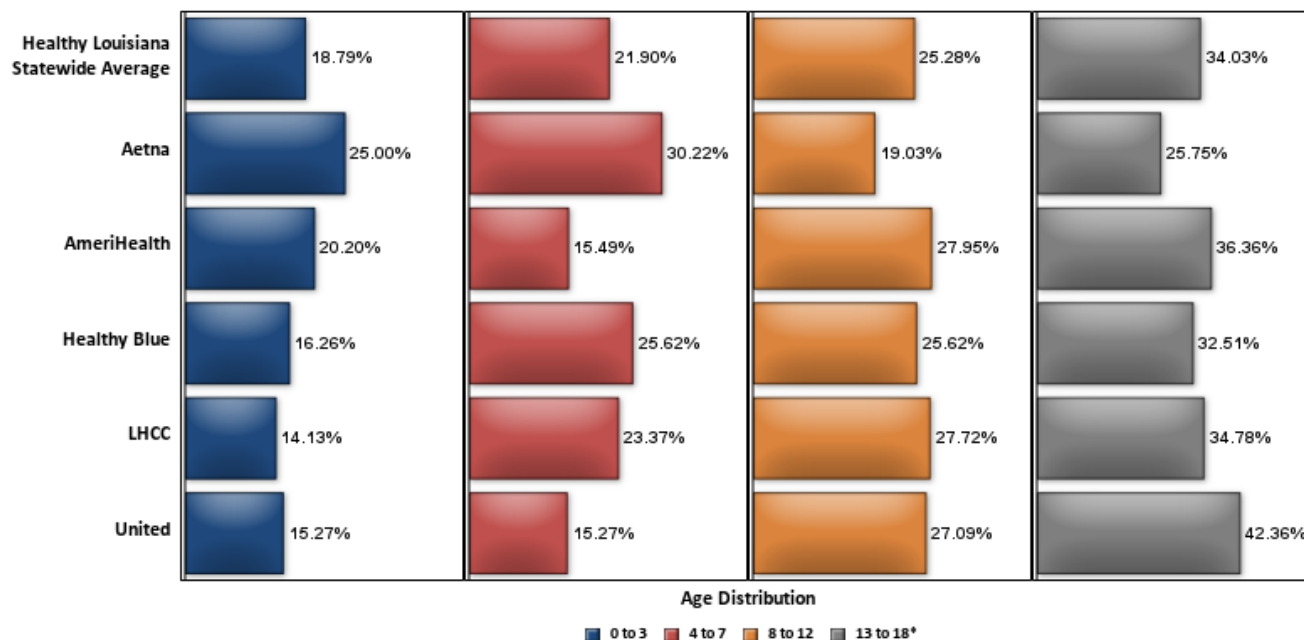
Table 3-1—Child Survey Dispositions

Program/MCO	Total Sample	Ineligible Records	Eligible Records	Total Respondents	Response Rate
Healthy Louisiana Statewide Average	11,567	207	11,360	1,209	10.64%
Aetna	2,888	129	2,759	287	10.40%
AmeriHealth	2,904	27	2,877	311	10.81%
Healthy Blue	1,650	21	1,629	210	12.89%
LHCC	1,815	19	1,796	191	10.63%
United	2,310	11	2,299	210	9.13%

Demographics of Child Members

Figure 3-1 through Figure 3-6 present the demographic characteristics of children for whom a parent/ caretaker completed a survey for age, gender, race, ethnicity, general health status, and mental or emotional health status.

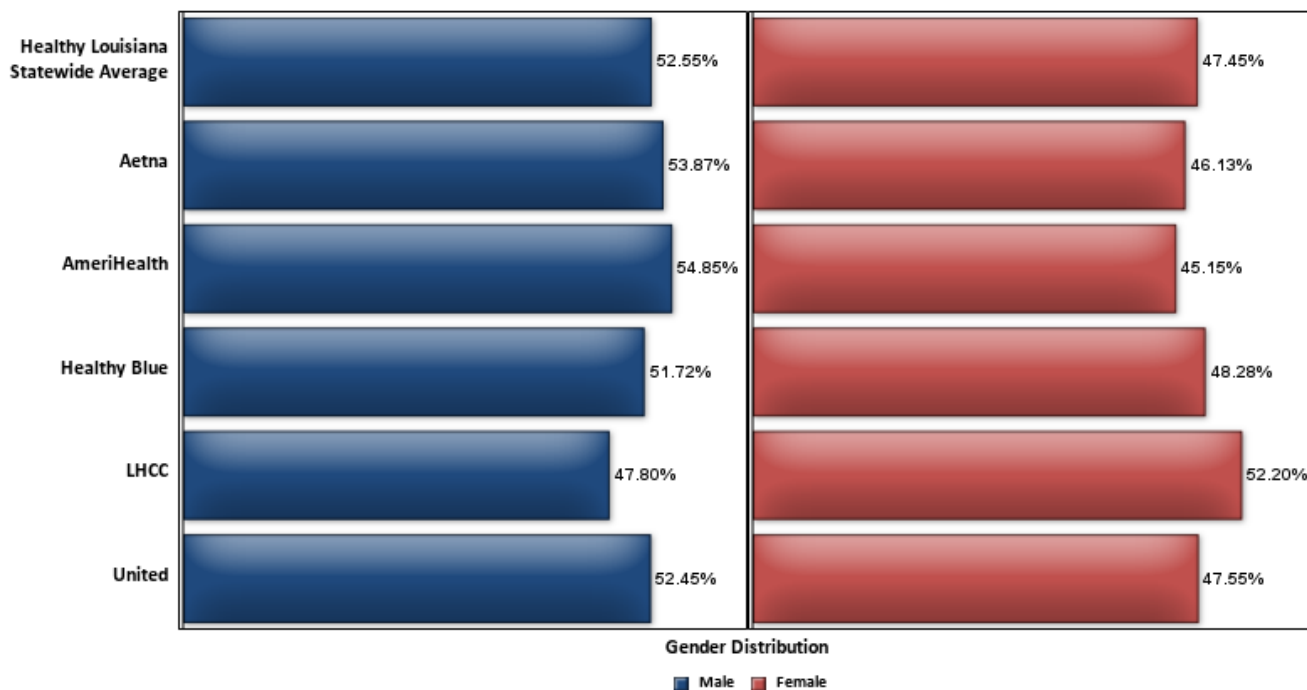
Figure 3-1—Child Member Demographics: Age



Some percentages may not total 100% due to rounding.

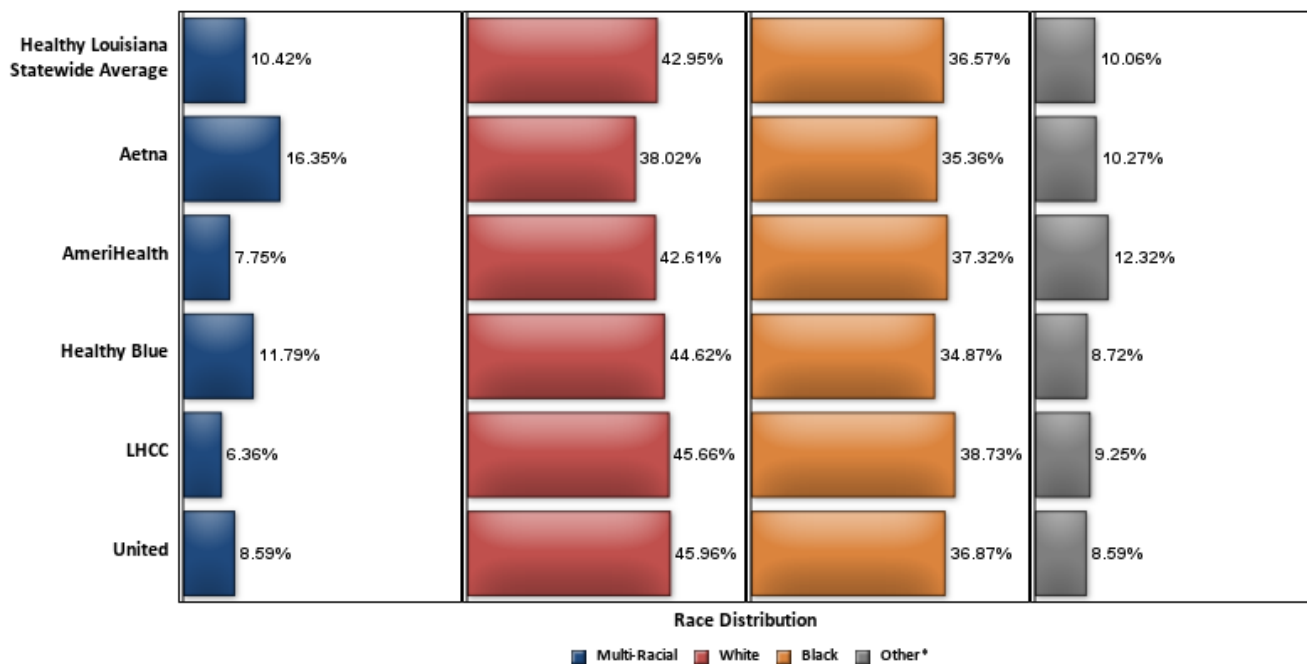
**Children were eligible for inclusion in CAHPS if they were 17 years of age or younger as of December 31, 2022. Some children eligible for the CAHPS Survey turned 18 between January 1, 2023, and the time of survey administration.*

Figure 3-2—Child Member Demographics: Gender



Some percentages may not total 100% due to rounding.

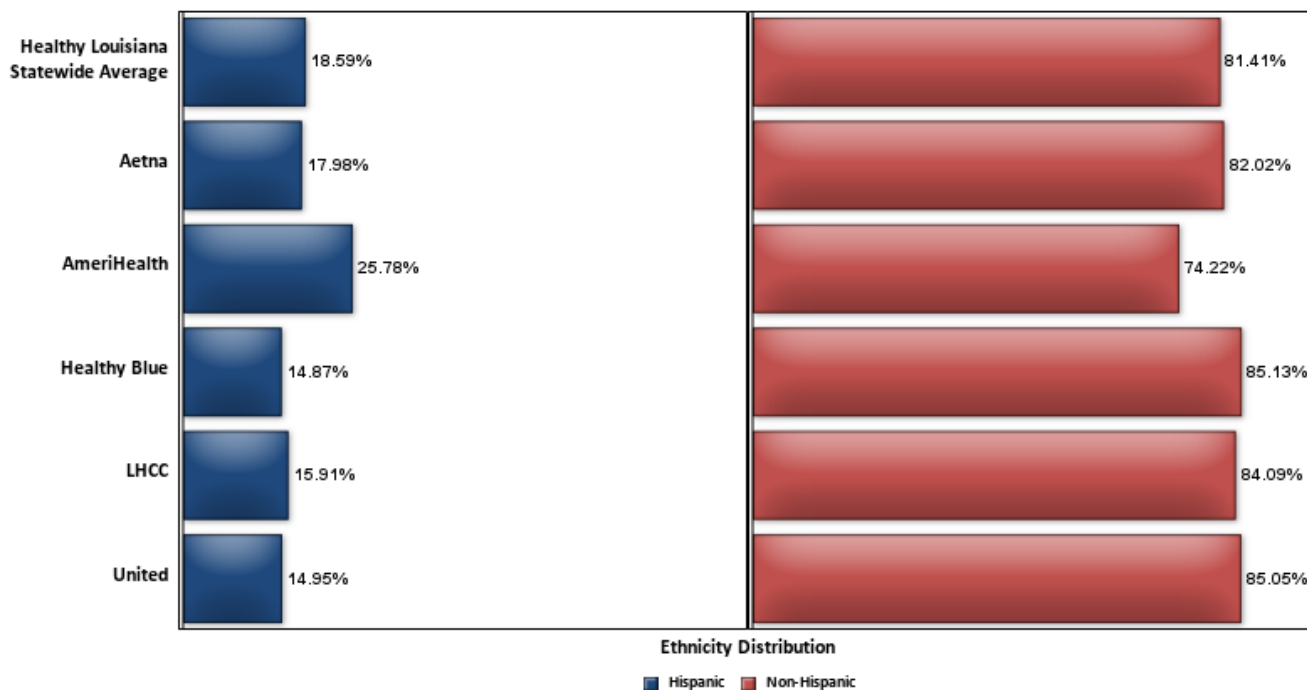
Figure 3-3—Child Member Demographics: Race



Some percentages may not total 100% due to rounding.

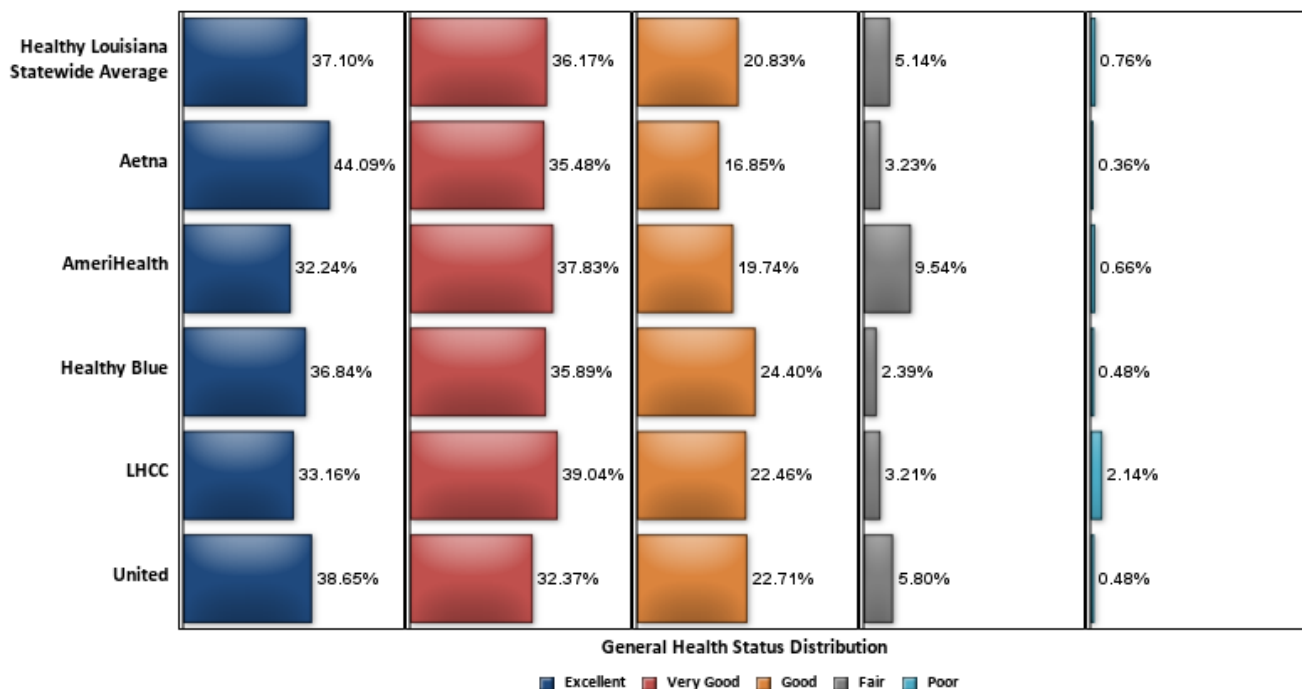
*The "Other" Race category includes responses of Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and Other.

Figure 3-4—Child Member Demographics: Ethnicity



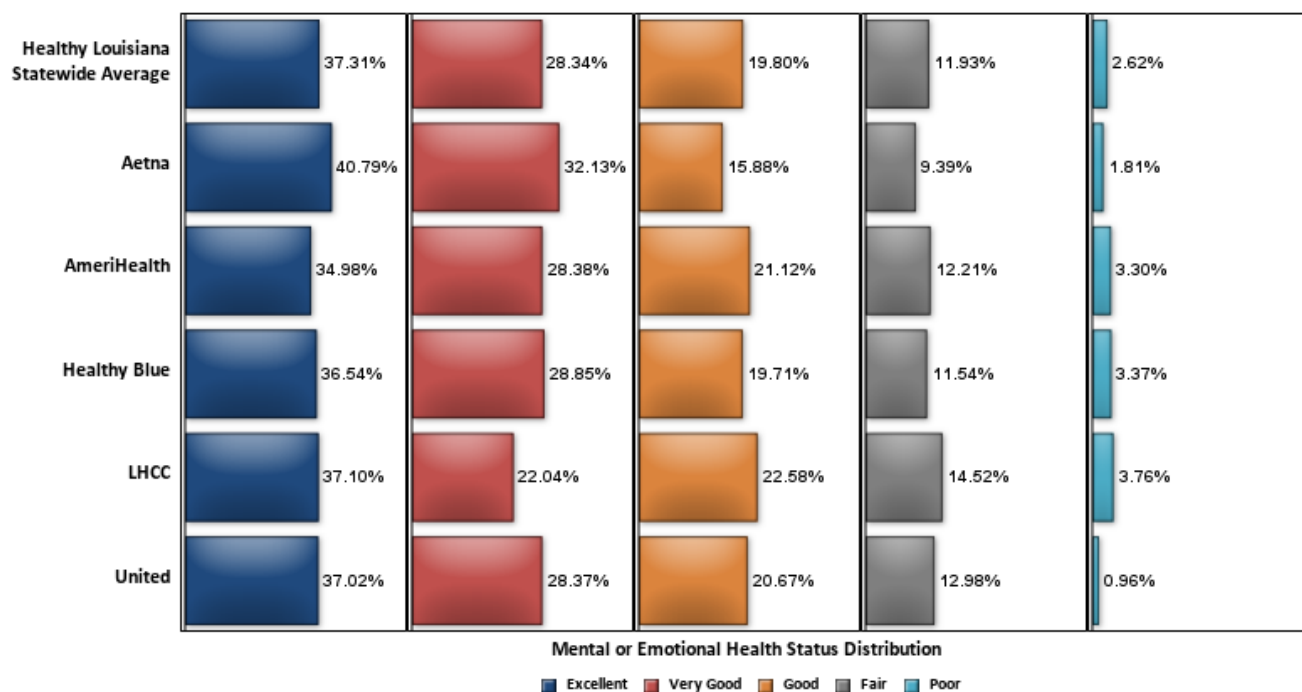
Some percentages may not total 100% due to rounding.

Figure 3-5—Child Member Demographics: General Health Status



Some percentages may not total 100% due to rounding.

Figure 3-6—Child Member Demographics: Mental or Emotional Health Status

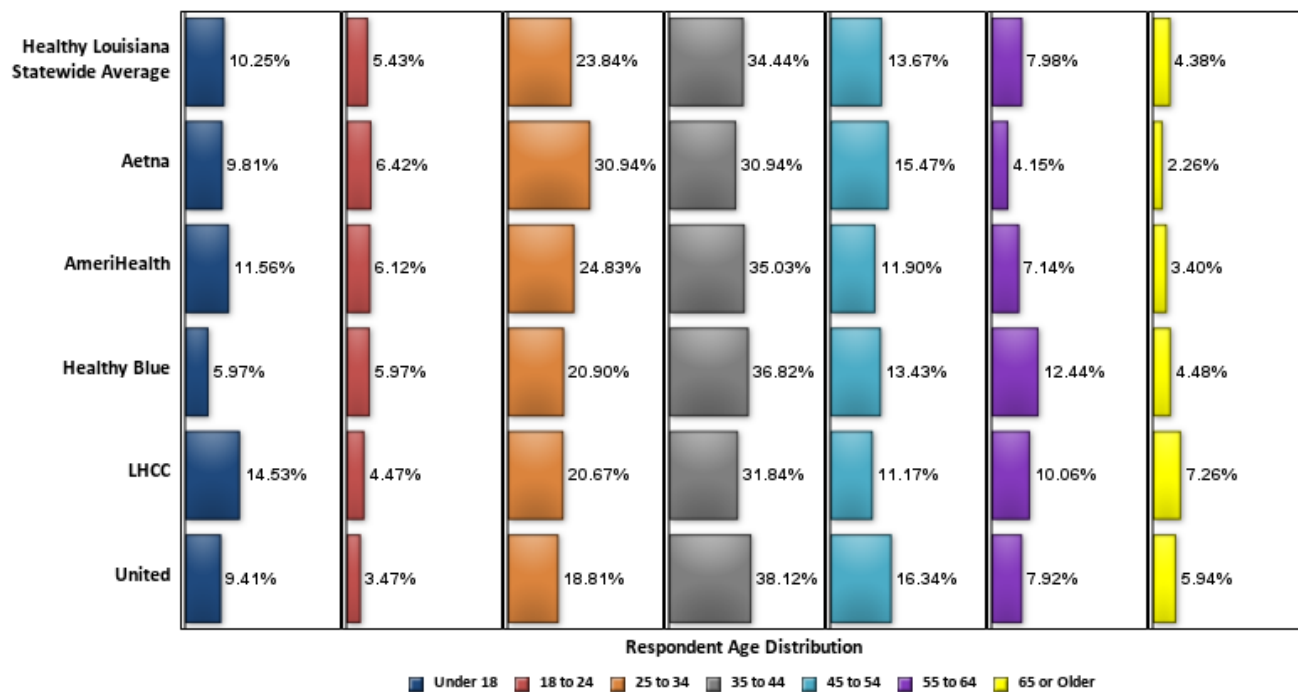


Some percentages may not total 100% due to rounding.

Demographics of Respondents

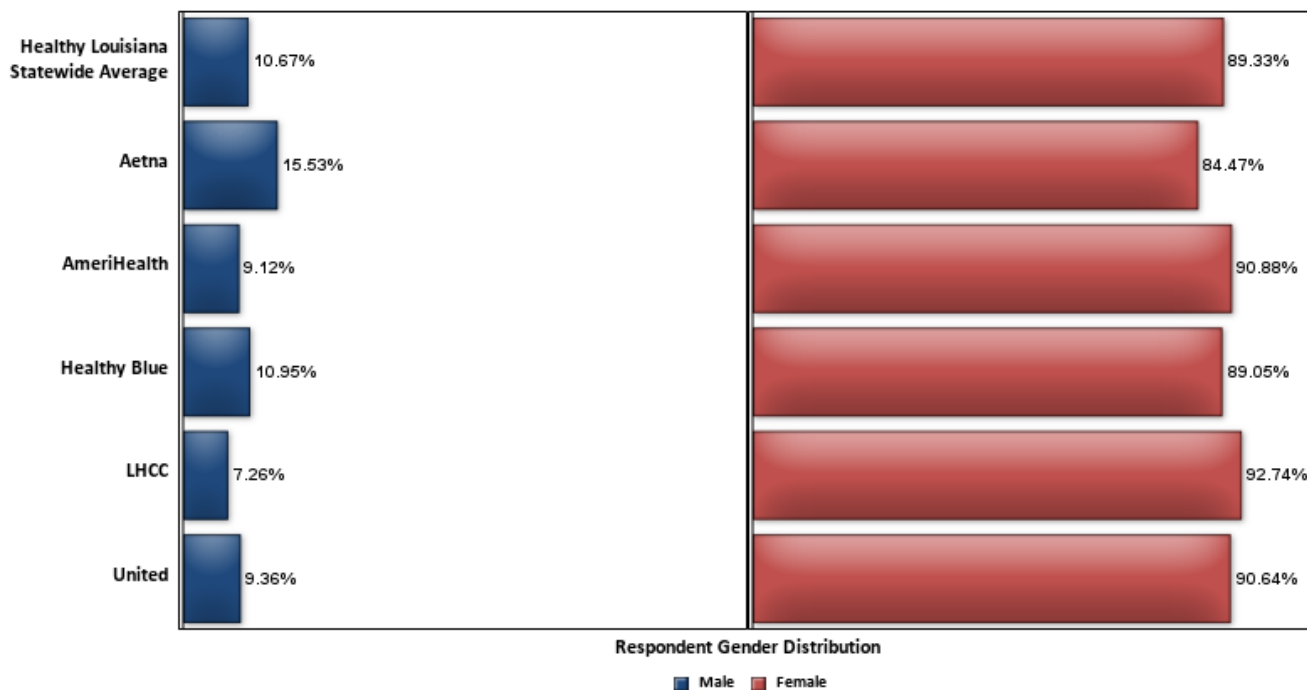
Figure 3-7 through Figure 3-10 present the demographic characteristics of parents/caretakers who completed a survey on behalf of the child member for respondent age, respondent gender, respondent education level, and respondent relationship to the child.

Figure 3-7—Respondent Demographics: Age



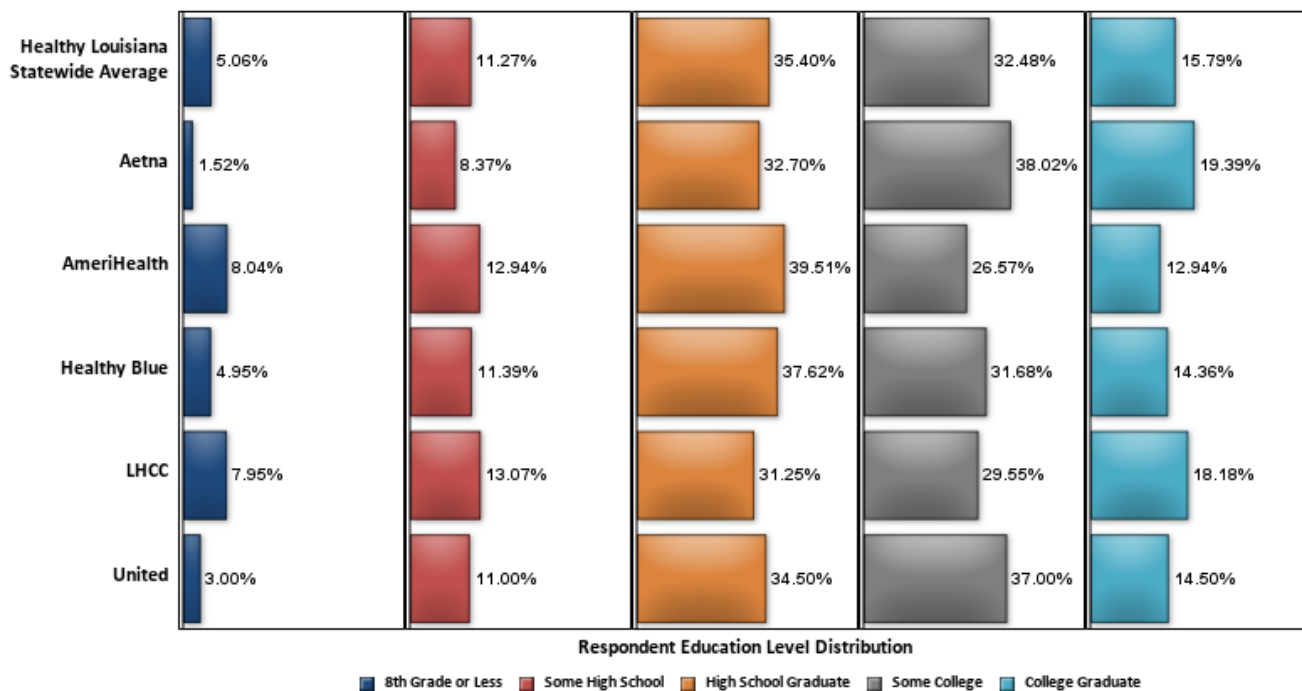
Some percentages may not total 100% due to rounding.

Figure 3-8—Respondent Demographics: Gender



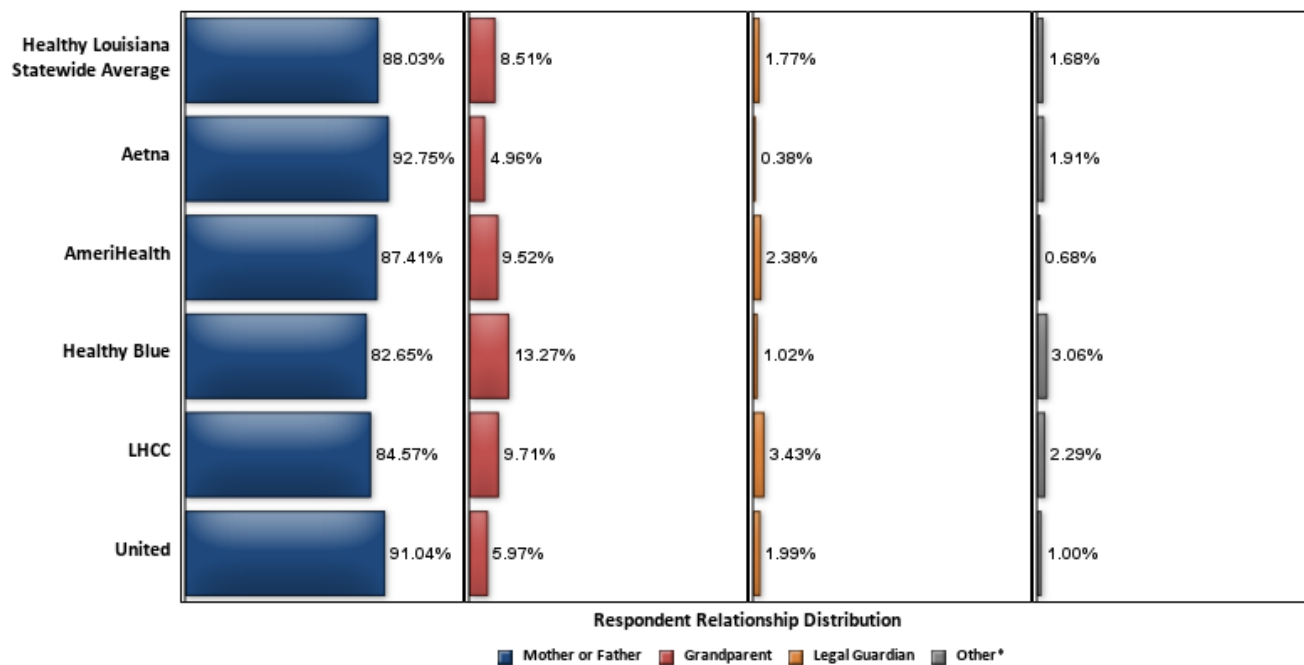
Some percentages may not total 100% due to rounding.

Figure 3-9—Respondent Demographics: Education Level



Some percentages may not total 100% due to rounding.

Figure 3-10—Respondent Demographics: Relationship to Child



Some percentages may not total 100% due to rounding.

**The "Other" Relationship to Child category includes responses of aunt or uncle, older brother or sister, other relative, or someone else.*

Respondent Analysis

HSAG compared the gender of child MCO members (i.e., respondent percentage) to the gender of non-respondents (i.e., non-respondent percentage) for statistically significant differences. Table 3-2 presents the results of the respondent analysis.

Please note that variables from the sample frame file were used as the data source for this analysis; therefore, these results will differ from those presented in the demographics subsection, which uses responses from the survey as the data source.

Table 3-2—Child Respondent and Non-Respondent Profiles—Gender

Program/MCO		Male	Female
Healthy Louisiana Statewide Average	R NR	52.52% 52.23%	47.48% 47.77%
Aetna	R NR	53.66% 51.86%	46.34% 48.14%
AmeriHealth	R NR	54.34% 54.18%	45.66% 45.82%
Healthy Blue	R NR	51.43% 55.00%	48.57% 45.00%
LHCC	R NR	47.64% 47.29%	52.36% 52.71%
United	R NR	53.81% 52.19%	46.19% 47.81%
<p>An “R” indicates respondent percentage, and an “NR” indicates non-respondent percentages. ↑ Indicates the respondent percentage is significantly higher than the non-respondent percentage. ↓ Indicates the respondent percentage is significantly lower than the non-respondent percentage. Respondent percentages that are not statistically significantly different than the non-respondent percentages are not noted with arrows. Some percentages may not total 100% due to rounding.</p>			

NCQA Comparisons

In order to assess the overall performance of the general child population, HSAG compared scores for each measure to NCQA's 2023 Quality Compass Benchmark and Compare Quality Data.⁷ Based on this comparison, ratings of one (★) to five (★★★★★) stars were determined for each measure, where one is the lowest possible rating (i.e., Poor) and five is the highest possible rating (i.e., Excellent). The percentages in Table 3-3 represent the achievement scores, while the stars represent overall member experience ratings for each measure when the achievement scores were compared to NCQA's Quality Compass data.

Table 3-3—Healthy Louisiana MCO Child NCQA Comparisons

	Healthy Louisiana Statewide Average	Aetna	AmeriHealth	Healthy Blue	LHCC	United
Global Ratings						
<i>Rating of Health Plan</i>	★★★★ 86.74%	★★★ 86.45%	★★★ 86.33%	★ 83.17%	★★★ 86.26%	★★★★★ 89.86%
<i>Rating of All Health Care</i>	★★★★★ 89.15%	★★★★ 88.30%	★★★★ 86.57%	★★★★ 87.90%	★★★★ 87.69%	★★★★★ 94.33%
<i>Rating of Personal Doctor</i>	★★★★ 90.72%	★★★★★ 92.27%	★★★★★ 91.85%	★★★★★ 92.82%	★★★ 89.38%	★★★★★ 91.79%
<i>Rating of Specialist Seen Most Often</i>	★★★ 85.95%	★★★★ ⁺ 87.50% ⁺	★★★★★ ⁺ 89.74% ⁺	★★★★ ⁺ 87.76% ⁺	★★★ ⁺ 83.33% ⁺	★★★★★ ⁺ 89.09% ⁺
Composite Measures						
<i>Getting Needed Care</i>	★★★★★ 89.06%	★★★★★ 89.56%	★★★★ 86.29%	★★★★★ ⁺ 88.53% ⁺	★★★★★ ⁺ 88.01% ⁺	★★★★★ 92.56%
<i>Getting Care Quickly</i>	★★★★ 89.34%	★★★★ 86.59%	★★★★★ 90.10%	★★★★★ 90.29%	★★★★★ ⁺ 90.03% ⁺	★★★★ 88.03%
<i>How Well Doctors Communicate</i>	★★★★★ 95.46%	★★★★★ 95.88%	★★★ 93.08%	★★★★ 93.90%	★★★★ 95.21%	★★★★★ 97.49%
<i>Customer Service</i>	★★★★ 88.47%	★ ⁺ 85.68% ⁺	★★★★★ ⁺ 90.96% ⁺	★★★ ⁺ 87.08% ⁺	★★★ ⁺ 87.50% ⁺	★★★★★ ⁺ 91.50% ⁺

⁷ National Committee for Quality Assurance. *Quality Compass®: Benchmark and Compare Quality Data 2023*. Washington, DC: NCQA, September 2023.

	Healthy Louisiana Statewide Average	Aetna	AmeriHealth	Healthy Blue	LHCC	United
Individual Item Measures						
<i>Coordination of Care</i>	★★★★ 88.27%	★★★★ ⁺ 88.41% ⁺	★★★ ⁺ 86.75% ⁺	★ ⁺ 79.10% ⁺	★★★★ ⁺ 89.39% ⁺	★★★★★ ⁺ 90.79% ⁺
+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.						

MCO Comparisons, Trend Analysis, and Proportion of Responses

For purposes of the MCO comparisons and trend analysis, achievement scores were calculated for each measure in accordance with NCQA HEDIS Specifications for Survey Measures.⁸ For purposes of the MCO comparisons, achievement scores for each MCO were compared to the Healthy Louisiana Statewide Average to determine whether there were statistically significant differences. In order to evaluate trends in members' experiences, scores in 2023 score were compared to the corresponding 2022 score to determine whether there were statistically significant differences. In addition, responses were classified into categories and the proportion (or percentage) of respondents that fell into each response category was calculated for each measure. For additional details and information on the survey language and response options for the measures and the calculation of achievement scores, please refer to the Methodology report.

Figure 3-11 through Figure 3-28 show the results of the MCO comparisons, trend analysis, and proportion of responses. CAHPS scores with fewer than 100 respondents are denoted with a cross (+). Caution should be exercised when interpreting results for those measures with fewer than 100 respondents.

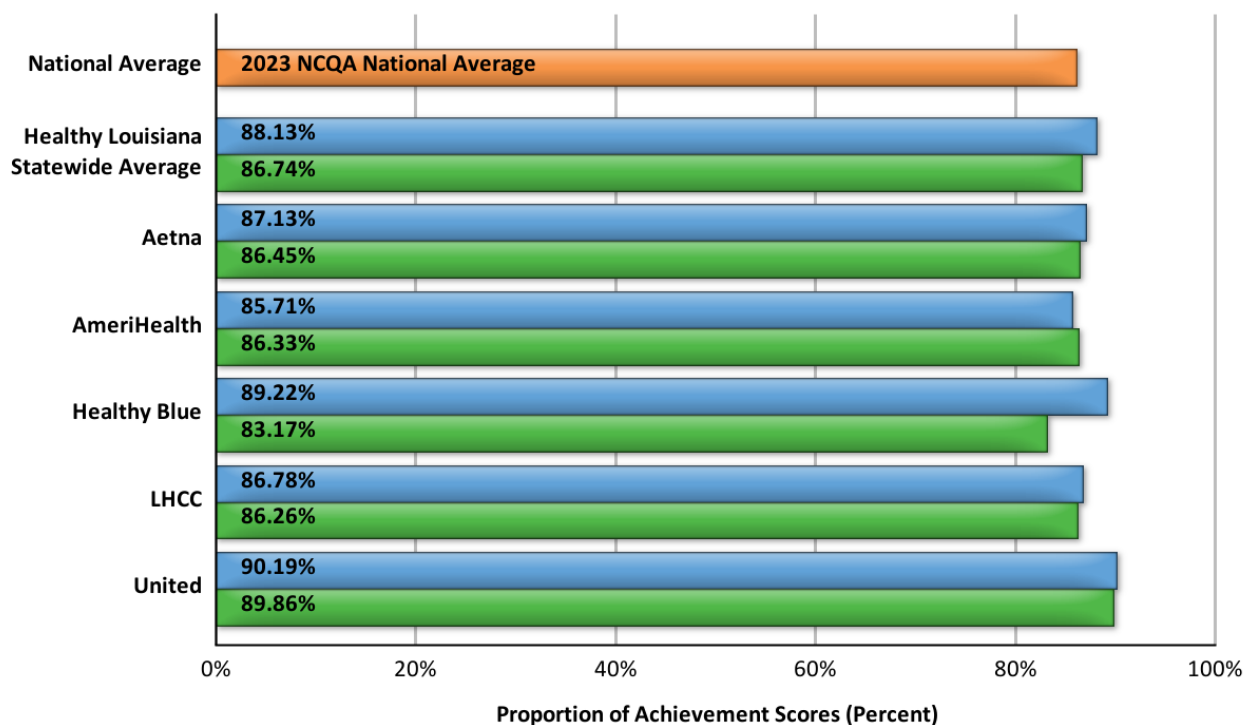
⁸ National Committee for Quality Assurance. *HEDIS® Measurement Year 2022 Volume 3: Specifications for Survey Measures*. Washington, DC: NCQA Publication, 2023.

Global Ratings

Rating of Health Plan

Respondents were asked to rate their child’s health plan on a scale of 0 to 10, with 0 being the “worst health plan possible” and 10 being the “best health plan possible.” Ratings scoring an 8, 9, or 10 are considered achievement scores. Figure 3-11 shows the *Rating of Health Plan* achievement scores, including the MCO comparisons, trend analysis, and the 2023 NCQA child Medicaid national average.

Figure 3-11—MCO Comparisons and Trend Analysis: Rating of Health Plan



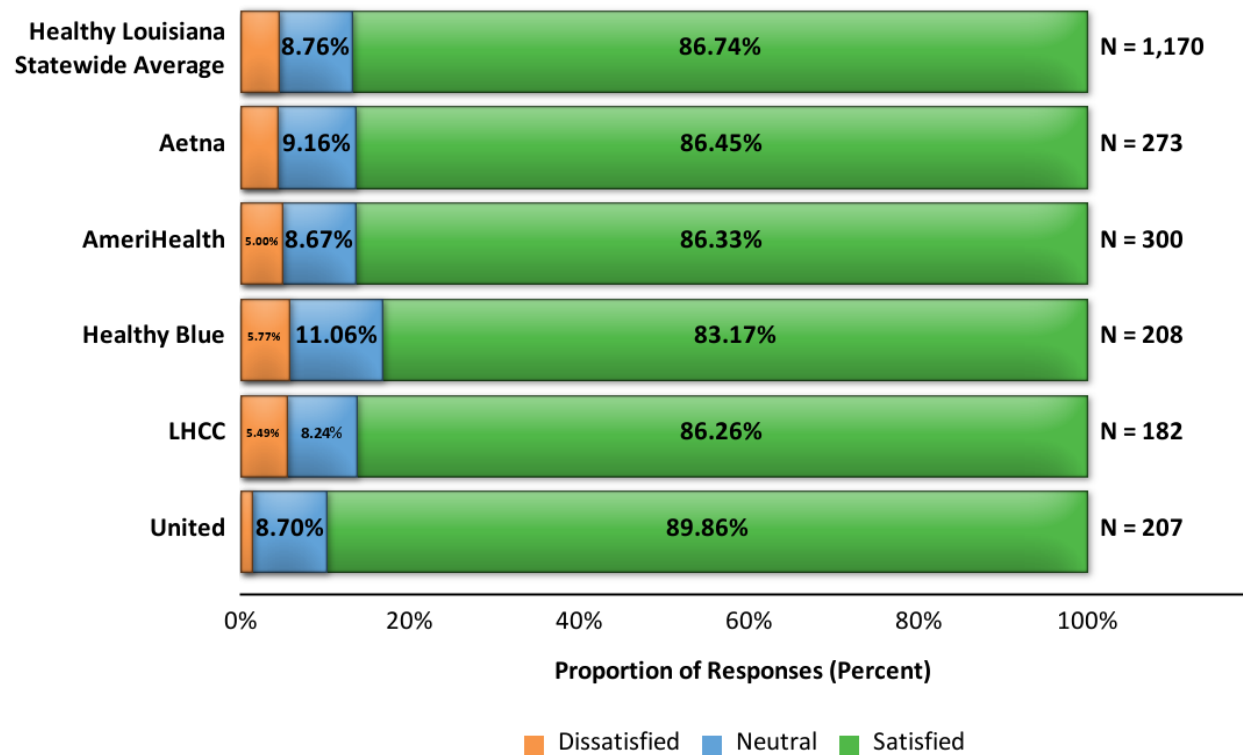
■ 2022 ■ 2023

Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average

If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

Figure 3-12 depicts the proportion of respondents who fell into each response category for *Rating of Health Plan*.

Figure 3-12—Proportion of Responses: Rating of Health Plan

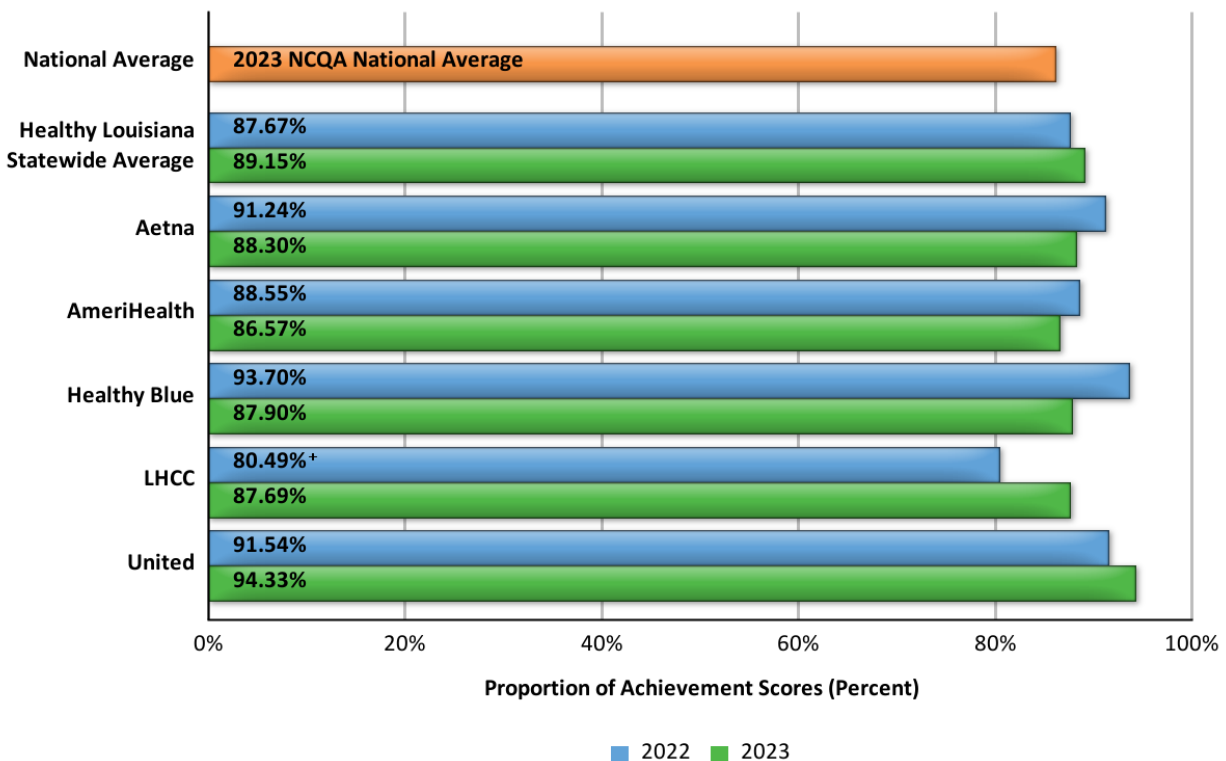


Some percentages may not total 100% due to rounding.

Rating of All Health Care

Respondents were asked to rate their child’s health care on a scale of 0 to 10, with 0 being the “worst health care possible” and 10 being the “best health care possible.” Ratings scoring 8, 9, or 10 are considered achievement scores. Figure 3-13 shows the *Rating of All Health Care* achievement scores, including the MCO comparisons, trend analysis, and the 2023 NCQA child Medicaid national average.

Figure 3-13—MCO Comparisons and Trend Analysis: Rating of All Health Care



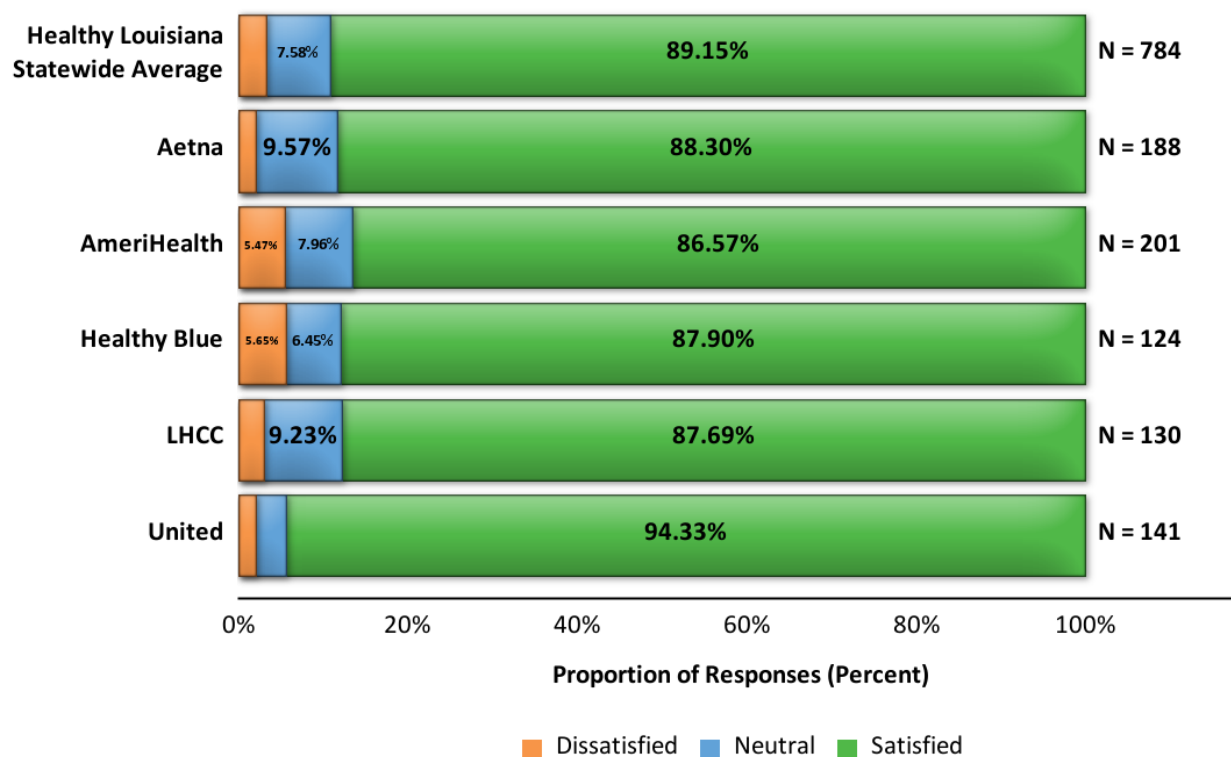
Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average

If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Figure 3-14 depicts the proportion of respondents who fell into each response category for *Rating of All Health Care*.

Figure 3-14—Proportion of Responses: Rating of All Health Care

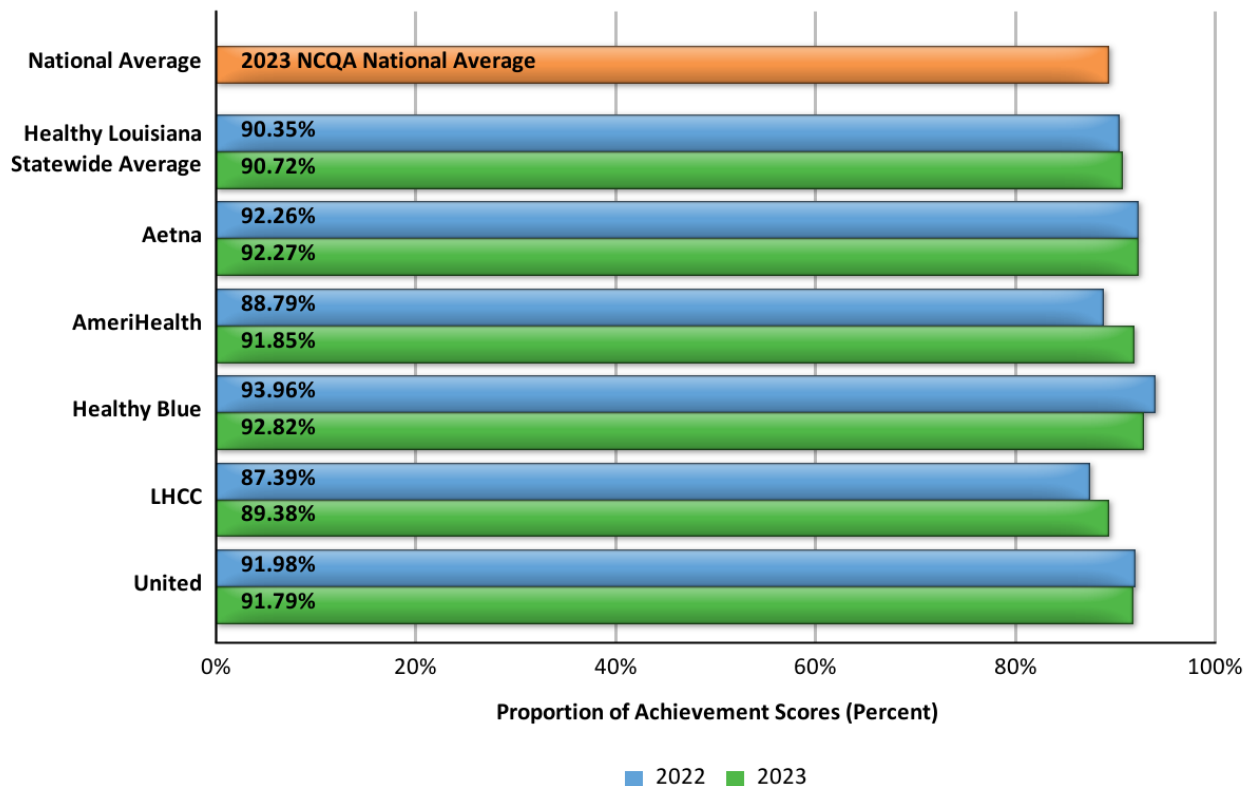


Some percentages may not total 100% due to rounding.

Rating of Personal Doctor

Respondents were asked to rate their child’s personal doctor on a scale of 0 to 10, with 0 being the “worst personal doctor possible” and 10 being the “best personal doctor possible.” Ratings scoring 8, 9, or 10 are considered achievement scores. Figure 3-15 shows the *Rating of Personal Doctor* achievement scores, including the MCO comparisons, trend analysis, and 2023 NCQA child Medicaid national average.

Figure 3-15—MCO Comparisons and Trend Analysis: Rating of Personal Doctor

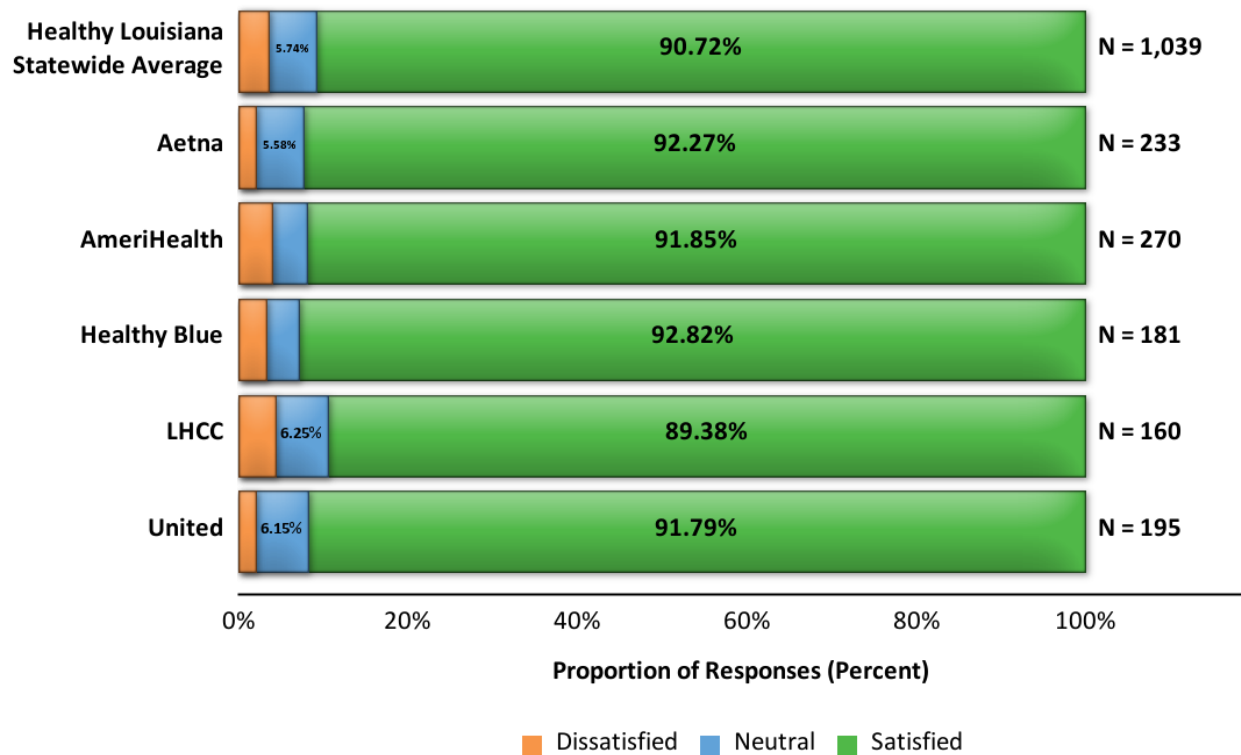


Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average

If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

Figure 3-16 depicts the proportion of respondents who fell into each response category for *Rating of Personal Doctor*.

Figure 3-16—Proportion of Responses: Rating of Personal Doctor

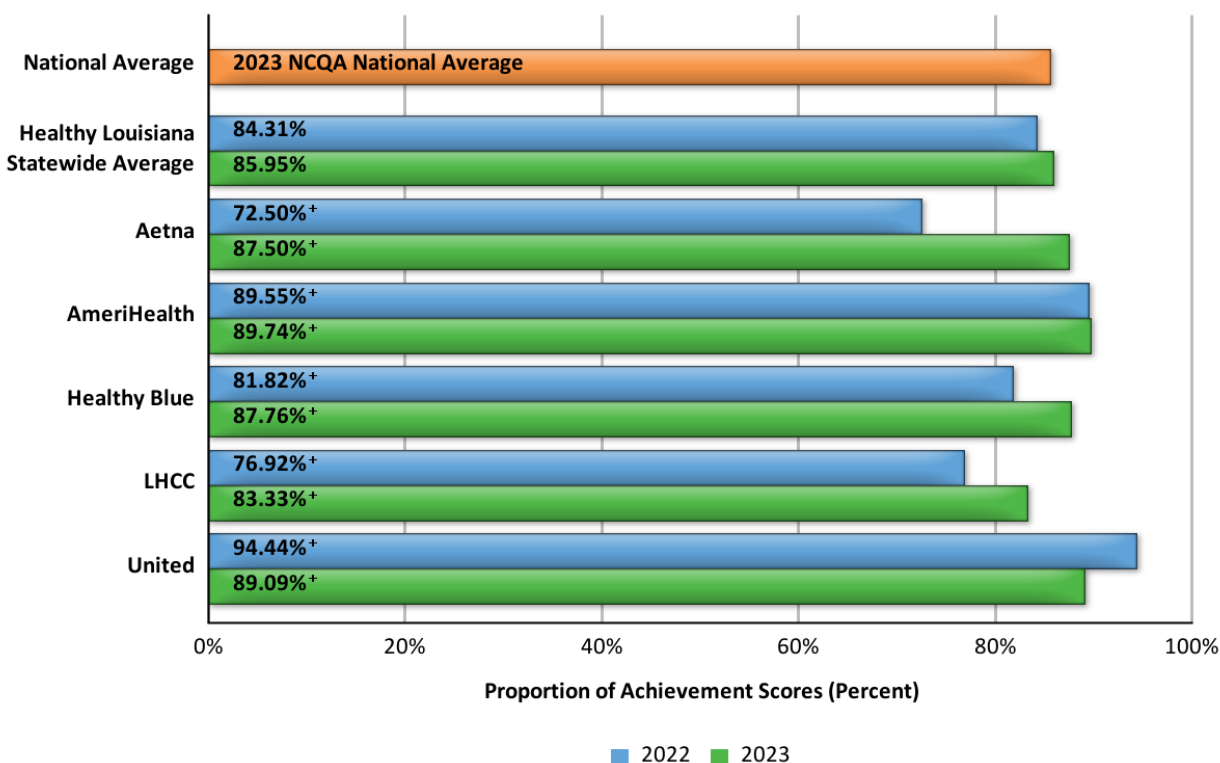


Some percentages may not total 100% due to rounding.

Rating of Specialist Seen Most Often

Respondents were asked to rate their child’s specialist on a scale of 0 to 10, with 0 being the “worst specialist possible” and 10 being the “best specialist possible.” Ratings scoring an 8, 9, or 10 are considered achievement scores. Figure 3-17 shows the *Rating of Specialist Seen Most Often* achievement scores, including the MCO comparisons, trend analysis, and the 2023 NCQA child Medicaid national average.

Figure 3-17—MCO Comparisons and Trend Analysis: Rating of Specialist Seen Most Often

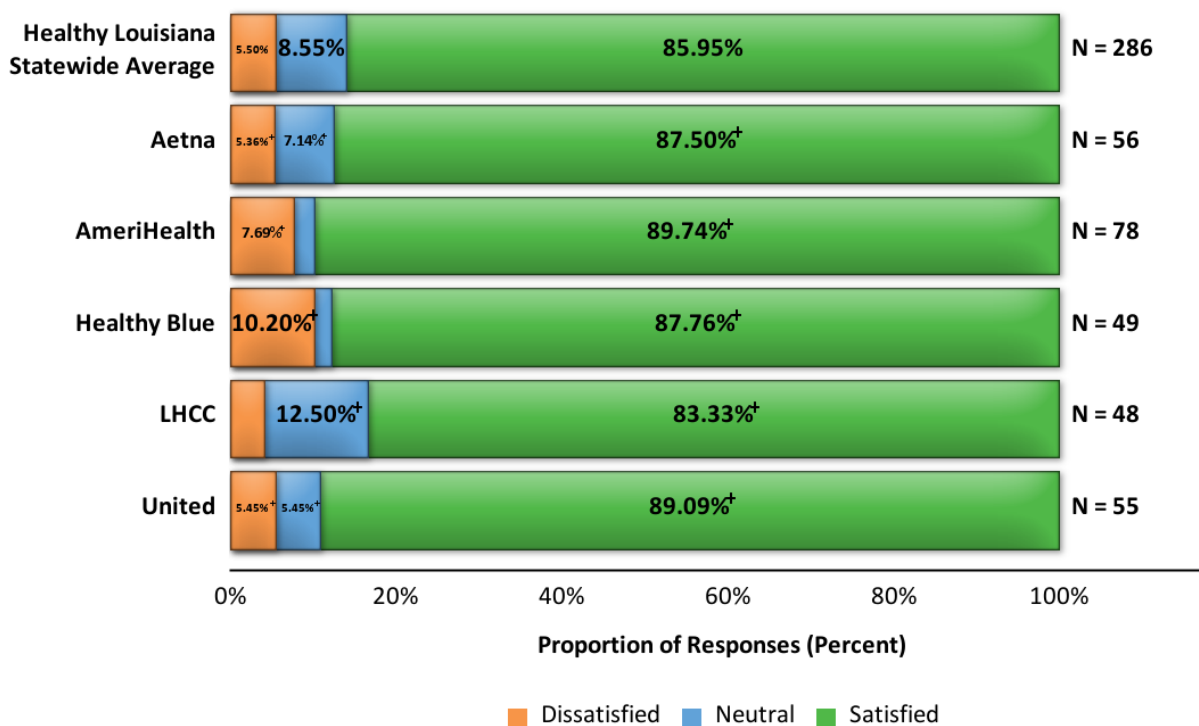


Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average

If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.
+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Figure 3-18 depicts the proportion of respondents who fell into each response category for *Rating of Specialist Seen Most Often*.

Figure 3-18—Proportion of Responses: Rating of Specialist Seen Most Often



Some percentages may not total 100% due to rounding.

+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Composite Measures

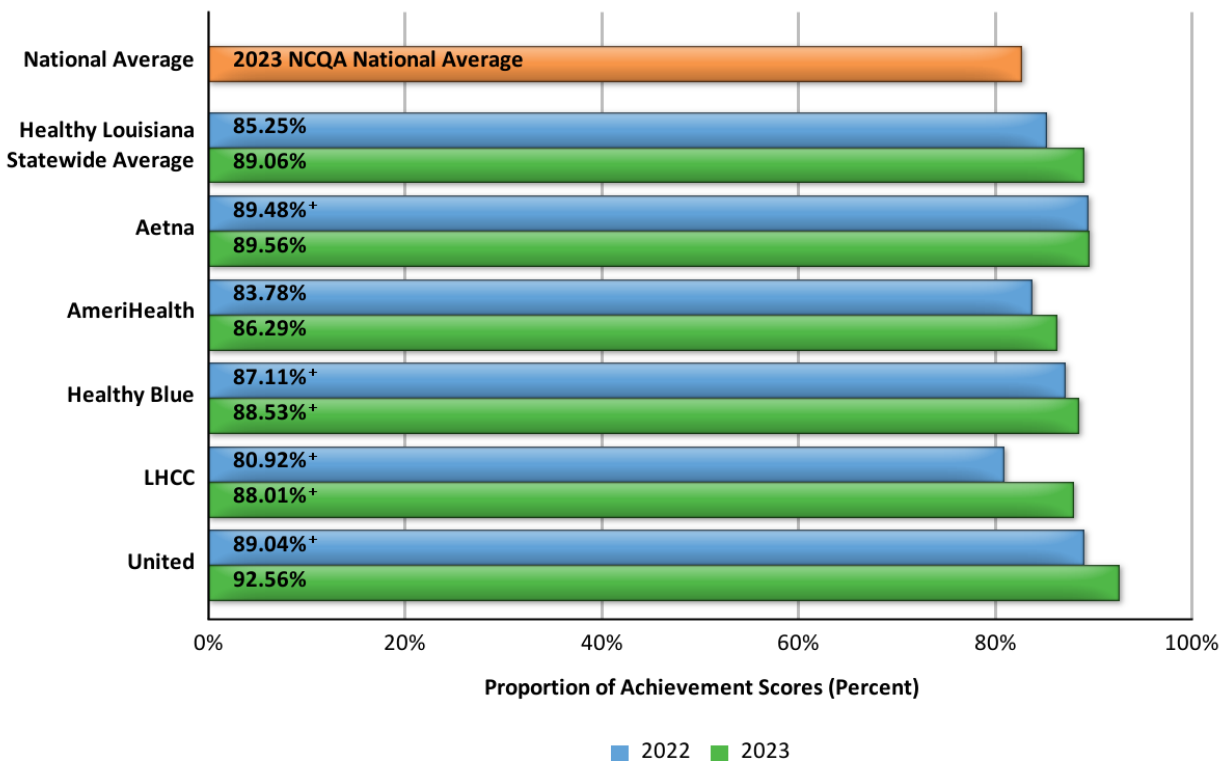
Getting Needed Care

Respondents were asked to assess how often (never, sometimes, usually, or always) it was easy for their child to get needed care:

- In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?
- In the last 6 months, how often did you get appointments for your child with a specialist as soon as he or she needed?

Response options of Usually and Always are considered achievement scores. Figure 3-19 shows the *Getting Needed Care* achievement scores, including the MCO comparisons, trend analysis, and the 2023 NCQA child Medicaid national average.

Figure 3-19—MCO Comparisons and Trend Analysis: Getting Needed Care



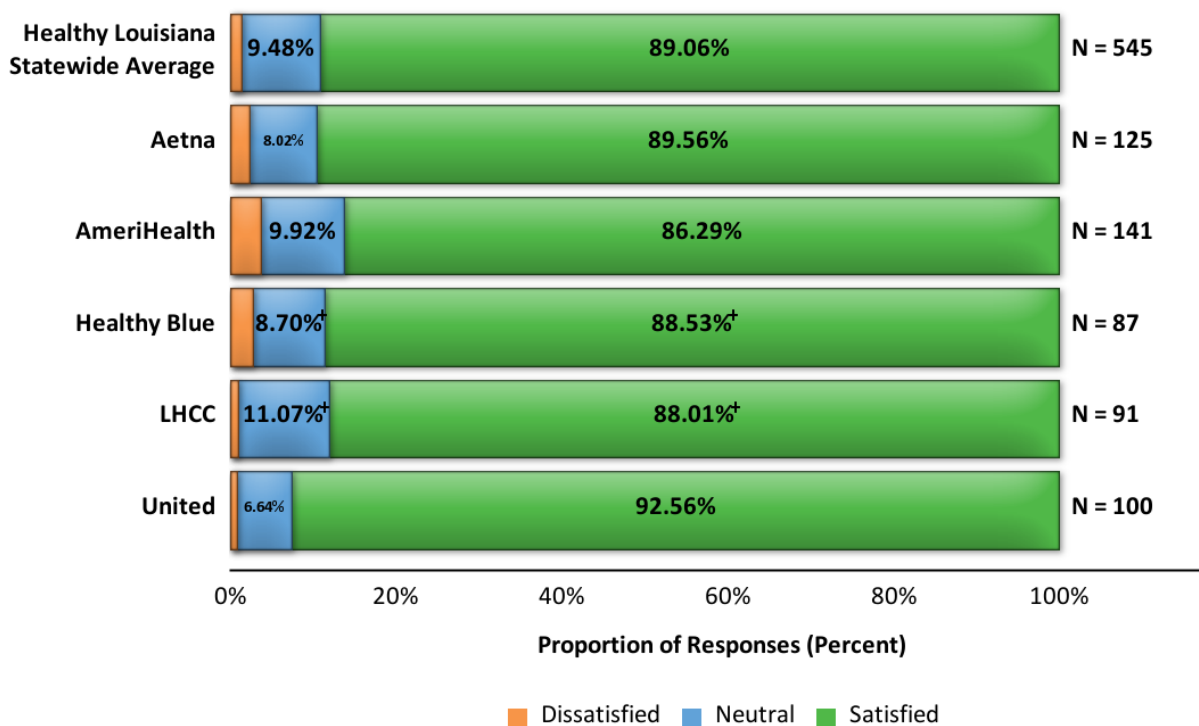
Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average

If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Figure 3-20 depicts the proportion of respondents who fell into each response category for *Getting Needed Care*.

Figure 3-20—Proportion of Responses: Getting Needed Care



Some percentages may not total 100% due to rounding.

+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

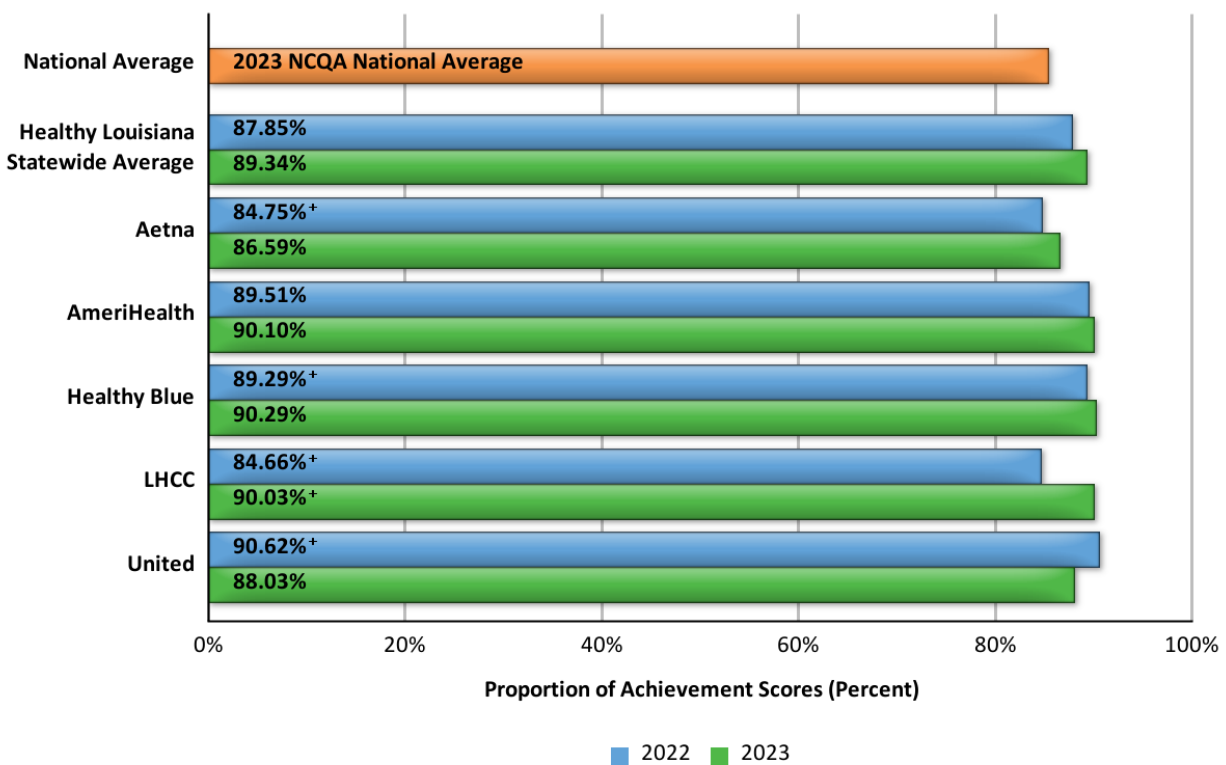
Getting Care Quickly

Respondents were asked to assess how often (never, sometimes, usually, or always) it was easy to get care quickly for their child:

- 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?
- 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?

Response options of Usually and Always are considered achievement scores. Figure 3-21 shows the *Getting Care Quickly* achievement scores, including the MCO comparisons, trend analysis, and the 2023 NCQA child Medicaid national average.

Figure 3-21—MCO Comparisons and Trend Analysis: Getting Care Quickly



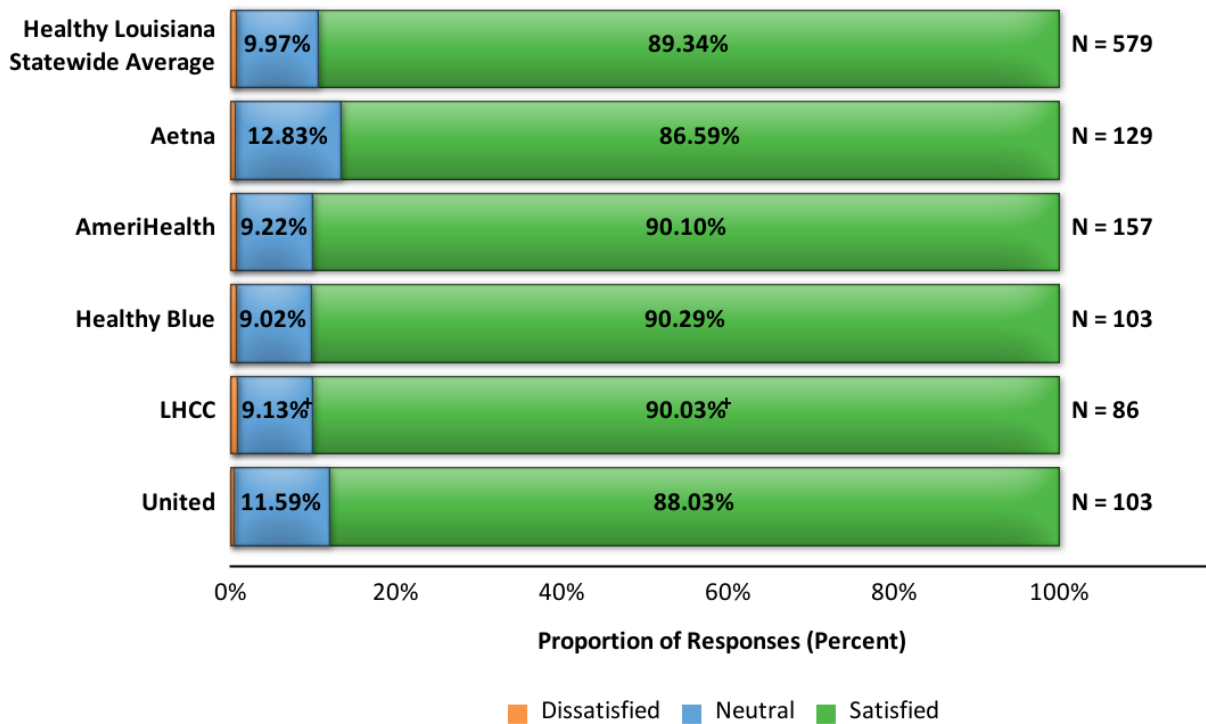
Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average

If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Figure 3-22 depicts the proportion of respondents who fell into each response category for *Getting Care Quickly*.

Figure 3-22—Proportion of Responses: Getting Care Quickly



Some percentages may not total 100% due to rounding.

+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

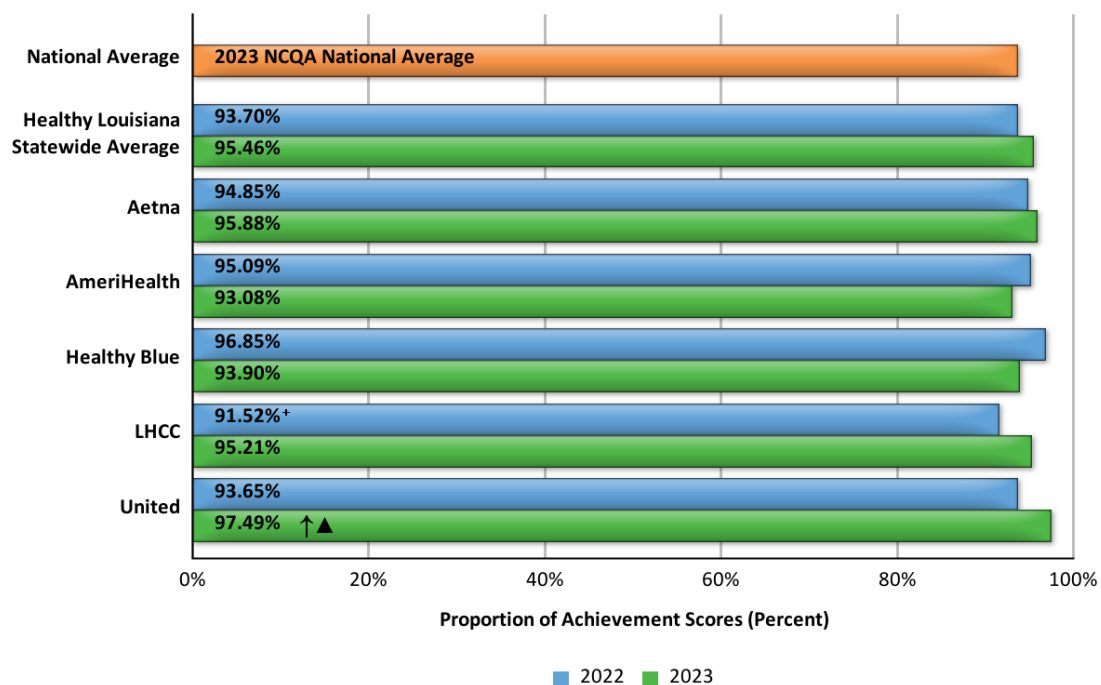
How Well Doctors Communicate

Respondents were asked to assess how often (never, sometimes, usually, or always) their child's personal doctor communicated well with them:

- 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?
- In the last 6 months, how often did your child's personal doctor listen carefully to you?
- In the last 6 months, how often did your child's personal doctor show respect for what you had to say?
- In the last 6 months, how often did your child's personal doctor spend enough time with your child?

Response options of Usually and Always are considered achievement scores. Figure 3-23 shows the *How Well Doctors Communicate* achievement scores, including the MCO comparisons, trend analysis, and the 2023 NCQA child Medicaid national average.

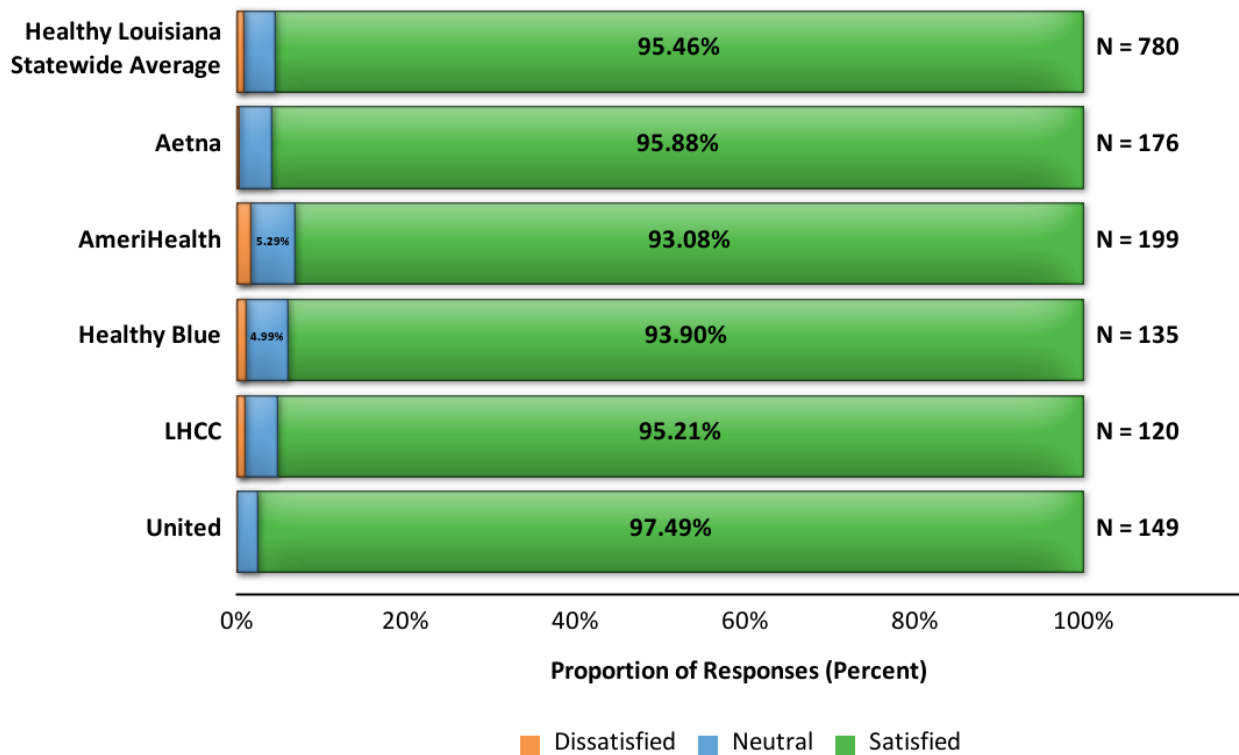
Figure 3-23—MCO Comparisons and Trend Analysis: How Well Doctors Communicate



Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average
If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.
+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Figure 3-24 depicts the proportion of respondents who fell into each response category for *How Well Doctors Communicate*.

Figure 3-24—Proportion of Responses: How Well Doctors Communicate



Some percentages may not total 100% due to rounding.

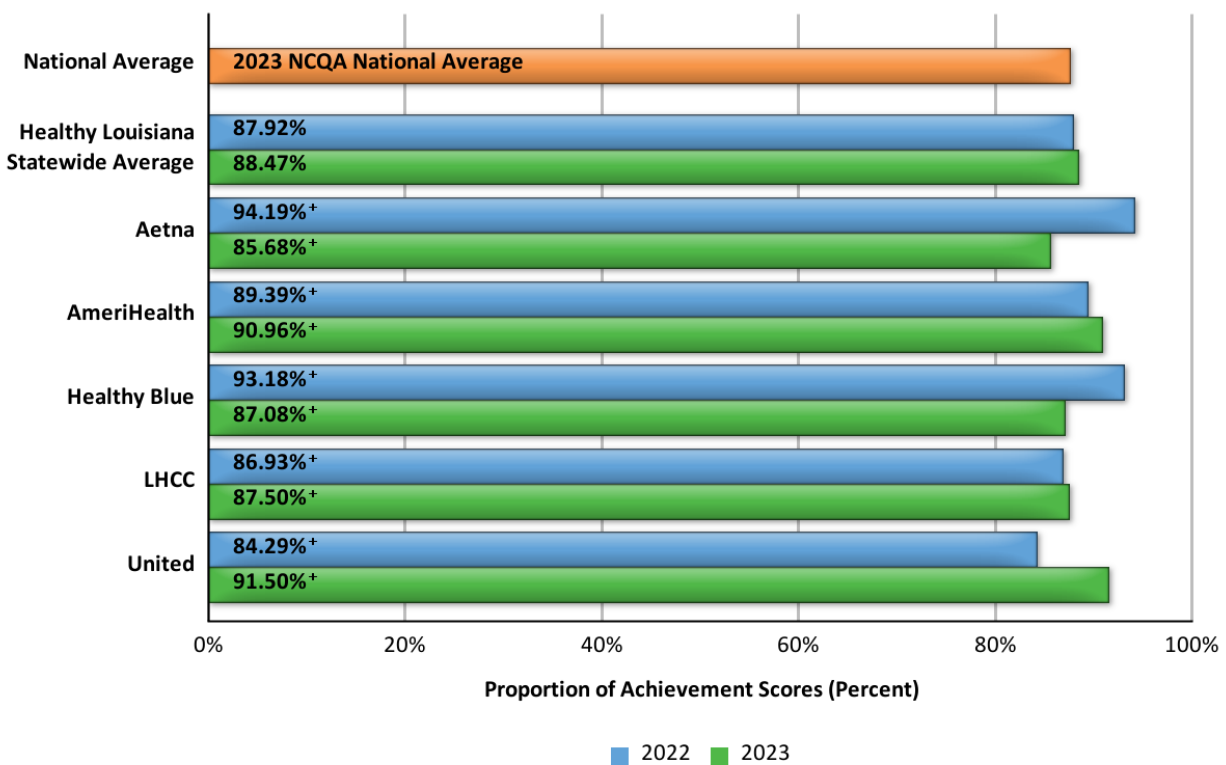
Customer Service

Respondents were asked to assess how often (never, sometimes, usually, or always) respondents had a positive experience with their child's plan's customer service:

- In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed?
- In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect?

Response options of Usually and Always are considered achievement scores. Figure 3-25 shows the *Customer Service* achievement scores, including the MCO comparisons, trend analysis, and the 2023 NCQA child Medicaid national average.

Figure 3-25—MCO Comparisons and Trend Analysis: Customer Service



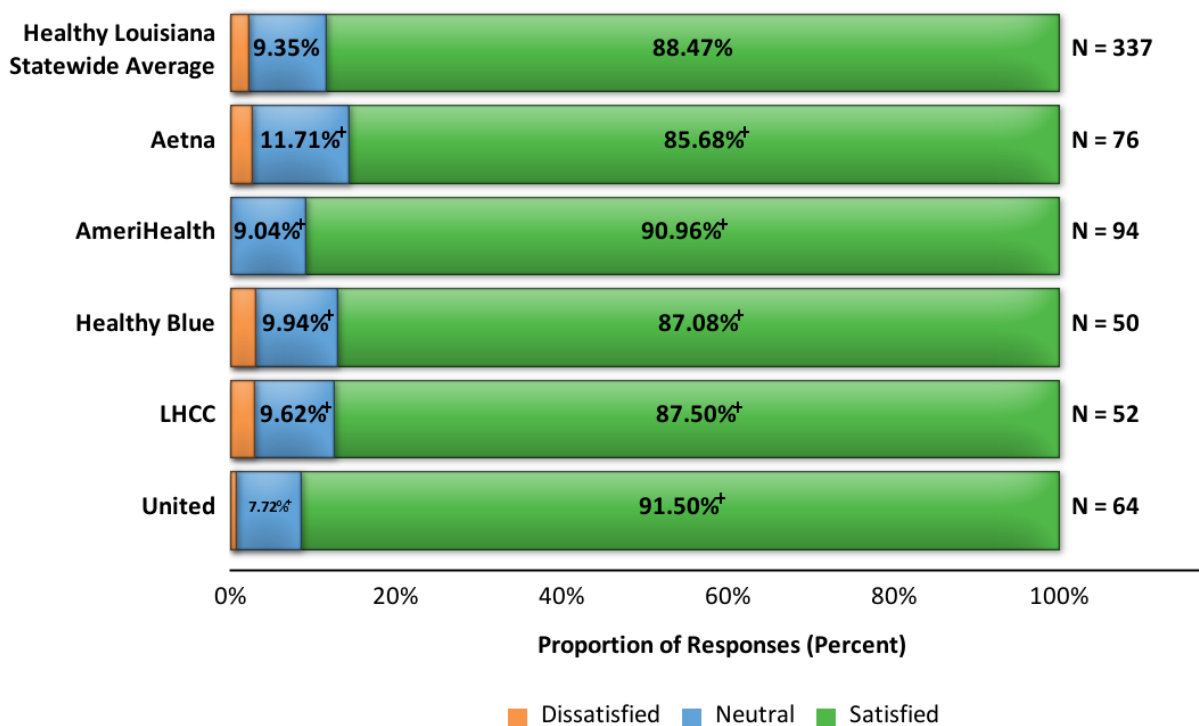
Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
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↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average

If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Figure 3-26 depicts the proportion of respondents who fell into each response category for *Customer Service*.

Figure 3-26—Proportion of Responses: Customer Service



Some percentages may not total 100% due to rounding.

+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Individual Item Measure

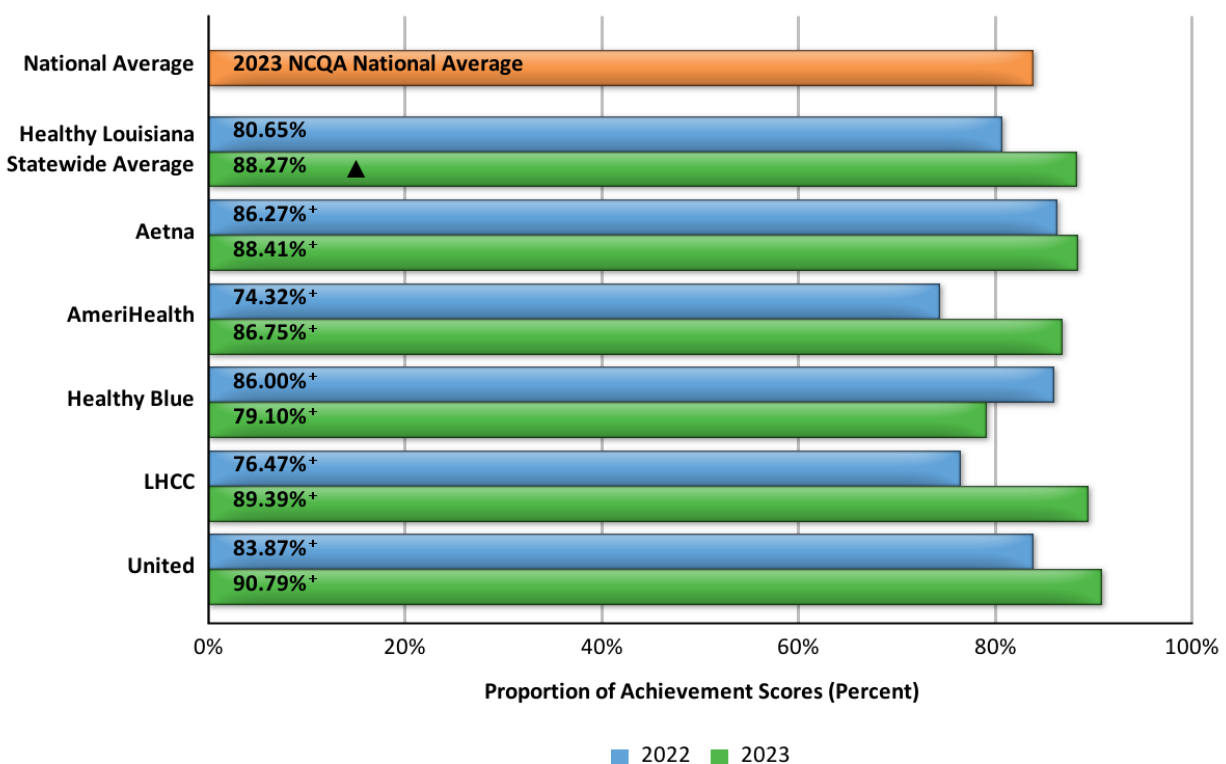
Coordination of Care

Respondents were asked to assess how often (never, sometimes, usually, or always) their child's personal doctor seemed informed and up-to-date:

- 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?

Response options of Usually and Always are considered achievement scores. Figure 2-27 shows the *Coordination of Care* achievement scores, including the MCO comparisons, trend analysis, and the 2023 NCQA child Medicaid national average.

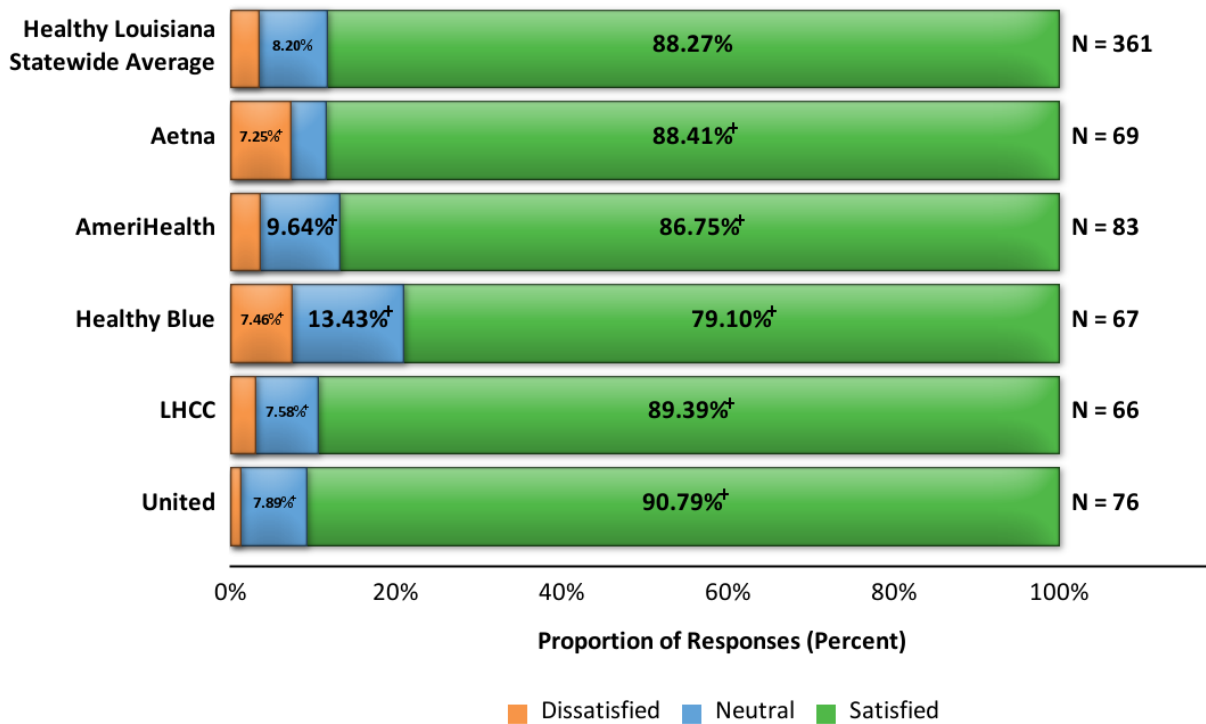
Figure 3-27—MCO Comparisons and Trend Analysis: Coordination of Care



Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score
 ▼ Indicates the 2023 score is statistically significantly lower than the 2022 score
 ↑ Indicates the score is statistically significantly higher than Healthy Louisiana Statewide Average
 ↓ Indicates the score is statistically significantly lower than Healthy Louisiana Statewide Average
 If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.
 + Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Figure 3-28 depicts the proportion of respondents who fell into each response category for *Coordination of Care*.

Figure 3-28—Proportion of Responses: Coordination of Care



Some percentages may not total 100% due to rounding.

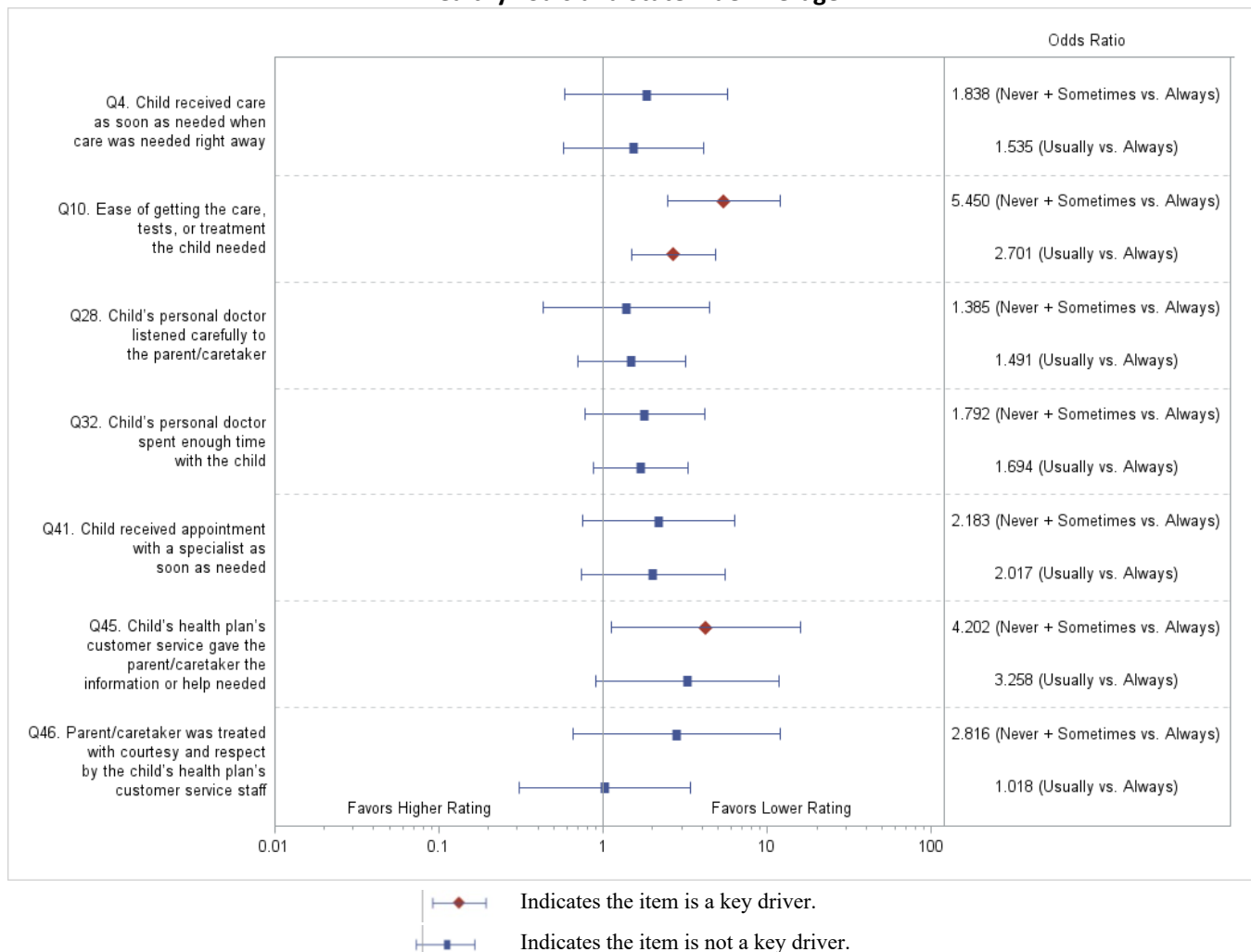
+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Key Drivers of Member Experience Analysis

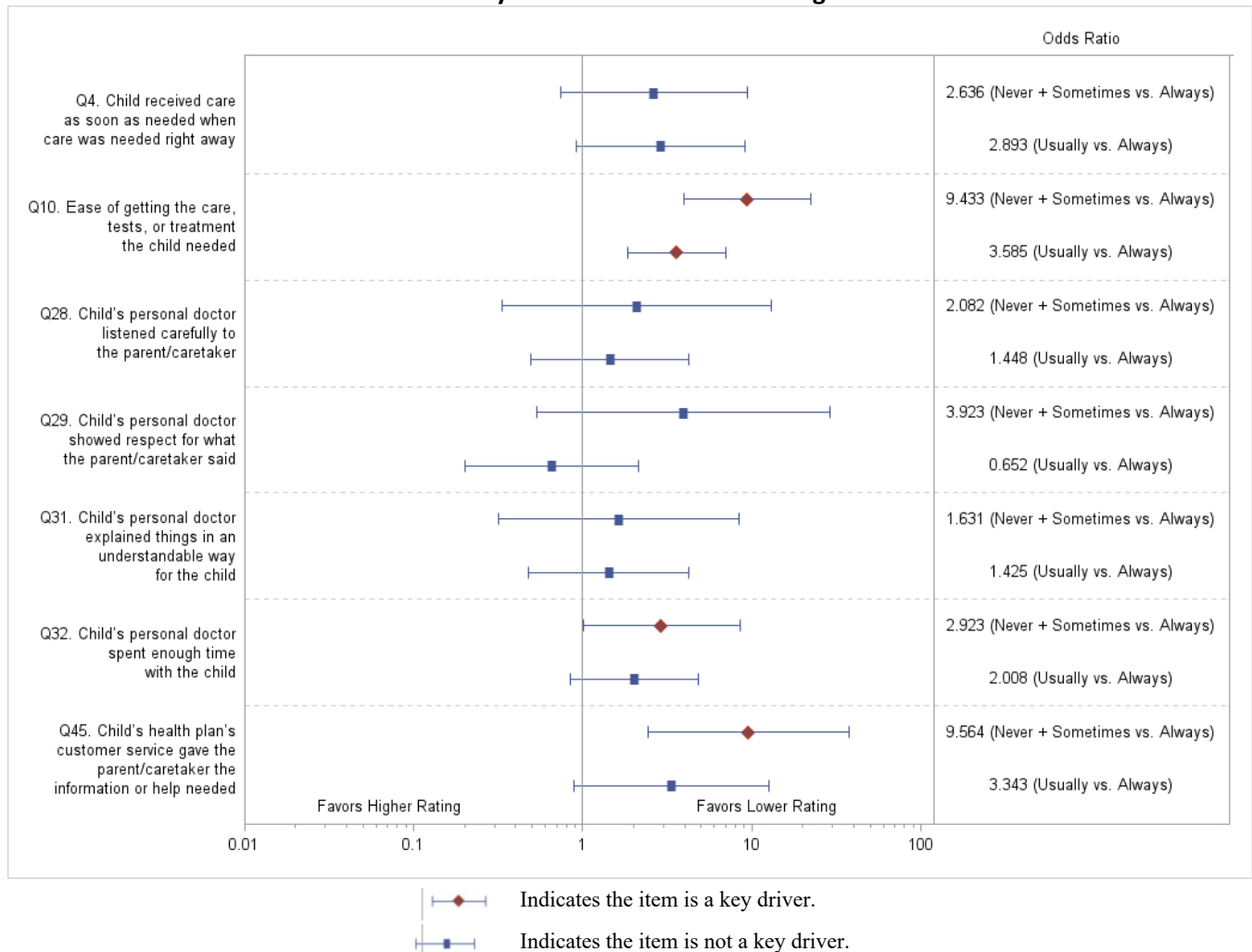
HSAG performed an analysis of key drivers of member experience for the following measures: *Rating of Health Plan*, *Rating of All Health Care*, and *Rating of Personal Doctor*. Key drivers allow LDH to draw overall conclusions from the survey results and identify priority improvement opportunities for LDH related to members' experiences with the services provided by the MCOs.

Figure 3-29 through Figure 3-31 depict those survey items identified for each of the three measures as being key drivers of member experience (i.e., items indicated with a red diamond) for the Healthy Louisiana Statewide Average.

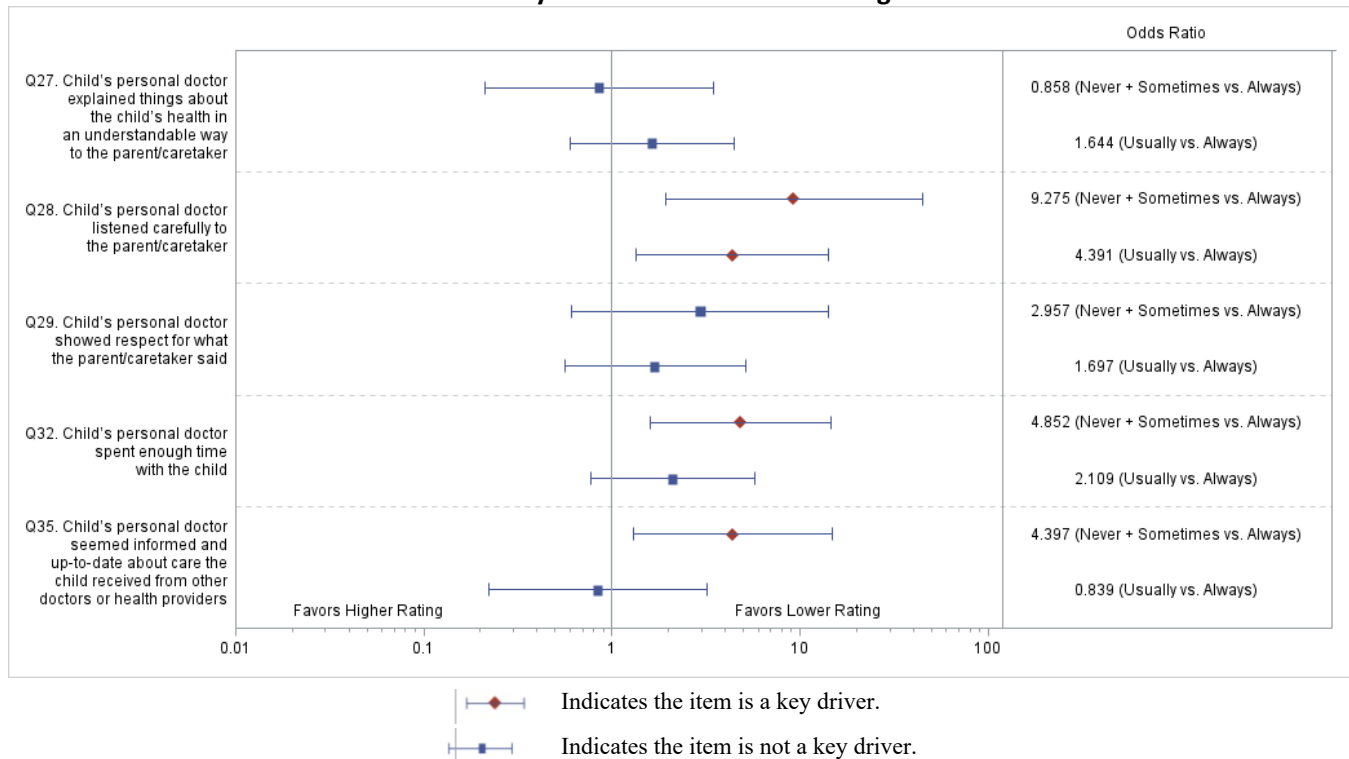
**Figure 3-29—Key Drivers of Member Experience: Rating of Health Plan—
Healthy Louisiana Statewide Average**



**Figure 3-30—Key Drivers of Member Experience: Rating of All Health Care—
Healthy Louisiana Statewide Average**



**Figure 3-31—Key Drivers of Member Experience: Rating of Personal Doctor—
Healthy Louisiana Statewide Average**



4. CCC and Non-CCC Results

CCC and Non-CCC Classification

A series of CCC screener questions included in the survey were used to identify children with chronic conditions. This series contains five sets of survey questions that focus on specific health care needs and conditions. Child members with affirmative responses to all the questions in at least one of the following five categories were considered to have a chronic condition:

- Child needed or used prescription medicine.
- Child needed or used more medical care, mental health services, or educational services than other children of the same age need or use.
- Child had limitations in the ability to do what other children of the same age do.
- Child needed or used special therapy.
- Child needed or used mental health treatment or therapy.

The survey responses for child members in the general child sample and the CCC supplemental sample were analyzed to determine which child members had chronic conditions (CCC population) and which did not (non-CCC population). Therefore, the CCC supplemental sample could have included children without chronic conditions based on the responses to the survey questions.

Demographics of CCC and Non-CCC Members

Table 4-1 presents the demographic characteristics of children for whom a parent/caretaker completed a survey for age, gender, race, ethnicity, general health status, and mental or emotional health status.

Table 4-1—CCC Member Demographics

	CCC	Non-CCC
Age		
0 to 3	8.71%	26.56%
4 to 7	17.60%	22.78%
8 to 12	28.34%	18.82%
13 to 18*	45.35%	31.84%
Gender		
Male	59.29%	51.05%
Female	40.71%	48.95%
Race		
Multi-Racial	10.07%	11.39%
White	49.22%	42.42%
Black	35.24%	33.88%

	CCC	Non-CCC
Other**	5.47%	12.30%
Ethnicity		
Hispanic	9.96%	22.48%
Non-Hispanic	90.04%	77.52%
General Health Status		
Excellent	22.40%	44.58%
Very Good	36.64%	35.70%
Good	28.06%	17.25%
Fair	11.32%	2.39%
Poor	1.58%	0.09%
Mental or Emotional Health Status		
Excellent	16.89%	49.27%
Very Good	24.08%	29.79%
Good	29.85%	15.62%
Fair	23.08%	4.89%
Poor	6.10%	0.43%
Some percentages may not total 100% due to rounding.		
*Children were eligible for inclusion in CAHPS if they were 17 years of age or younger (less than 18 years of age) as of December 31, 2022. Some children eligible for the CAHPS Survey turned 18 between January 1, 2023, and the time of survey administration.		
**The "Other" Race category includes responses of Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and Other.		

Demographics of Respondents

Table 4-2 presents the demographic characteristics of parents/caretakers who completed a survey on behalf of the child member for respondent age, respondent gender, respondent education level, and respondent relationship to the child.

Table 4-2—Respondent Demographics

	CCC	Non-CCC
Respondent Age		
Under 18	11.47%	9.88%
18 to 24	2.31%	6.94%
25 to 34	19.09%	28.47%
35 to 44	33.90%	30.25%
45 to 54	18.32%	12.63%
55 to 64	9.42%	6.58%
65 or Older	5.48%	5.25%
Respondent Gender		
Male	8.03%	11.60%
Female	91.97%	88.40%

	CCC	Non-CCC
Respondent Education Level		
8th Grade or Less	3.03%	6.01%
Some High School	11.43%	10.32%
High School Graduate	31.86%	36.45%
Some College	36.36%	32.23%
College Graduate	17.32%	14.99%
Respondent Relationship		
Mother or Father	84.67%	88.76%
Grandparent	9.96%	8.36%
Legal Guardian	3.26%	1.53%
Other*	2.11%	1.35%
Some percentages may not total 100% due to rounding.		
*The "Other" relationship to the child category includes responses of aunt or uncle, older brother or sister, other relative, or someone else.		

CCC and Non-CCC Comparisons and Trend Analysis

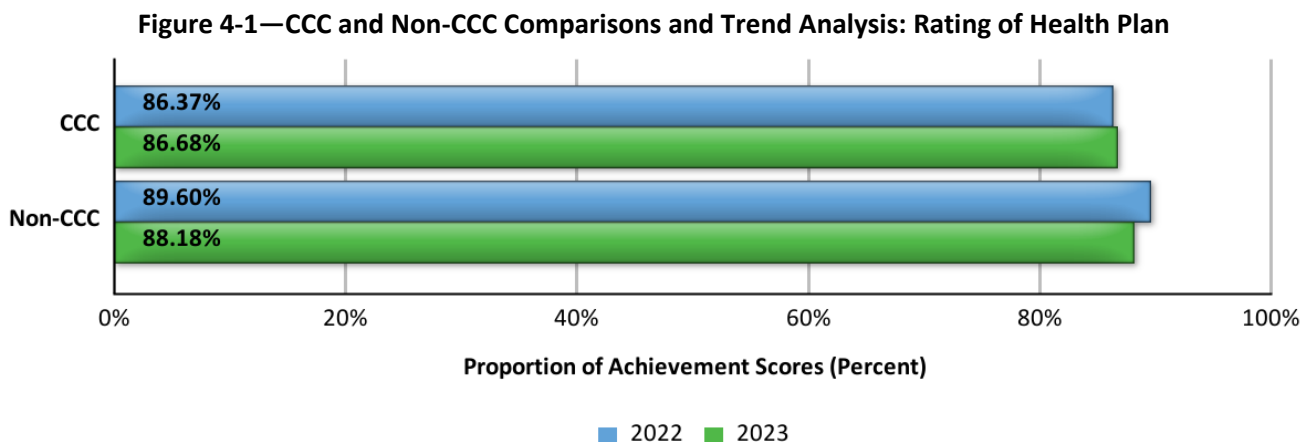
The CCC and non-CCC scores were compared to each other to identify statistically significant differences. In order to evaluate trends in members' experiences, scores in 2023 were compared to scores in 2022 to determine whether there were statistically significant differences for the CCC and non-CCC populations. For additional details and information on the survey language and response options for the measures and the calculation of achievement scores, please refer to the Methodology report.

Figure 4-1 through Figure 4-14 show the results of the CCC and non-CCC comparisons and trend analysis. CAHPS scores with fewer than 100 respondents are denoted with a cross (+). Caution should be exercised when interpreting results for those measures with fewer than 100 respondents.

Global Ratings

Rating of Health Plan

Respondents were asked to rate their child’s health plan on a scale of 0 to 10, with 0 being the “worst health plan possible” and 10 being the “best health plan possible.” Ratings scoring 8, 9, or 10 are considered achievement scores. Figure 4-1 shows the *Rating of Health Plan* achievement scores, including CCC and non-CCC comparisons and trend analysis.

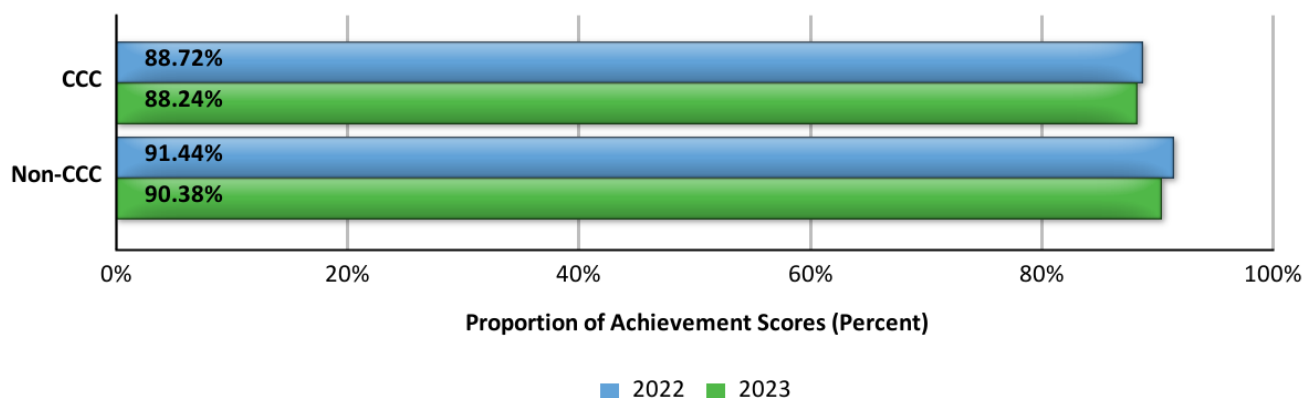


Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score.
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score.
↑ Indicates the score is statistically significantly higher than the other population score.
↓ Indicates the score is statistically significantly lower than the other population score.
If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

Rating of All Health Care

Respondents were asked to rate their child’s health care on a scale of 0 to 10, with 0 being the “worst health care possible” and 10 being the “best health care possible.” Ratings scoring 8, 9, or 10 are considered achievement scores. Figure 4-2 shows the *Rating of All Health Care* achievement scores, including CCC and non-CCC comparisons and trend analysis.

Figure 4-2—CCC and Non-CCC Comparisons and Trend Analysis: Rating of All Health Care

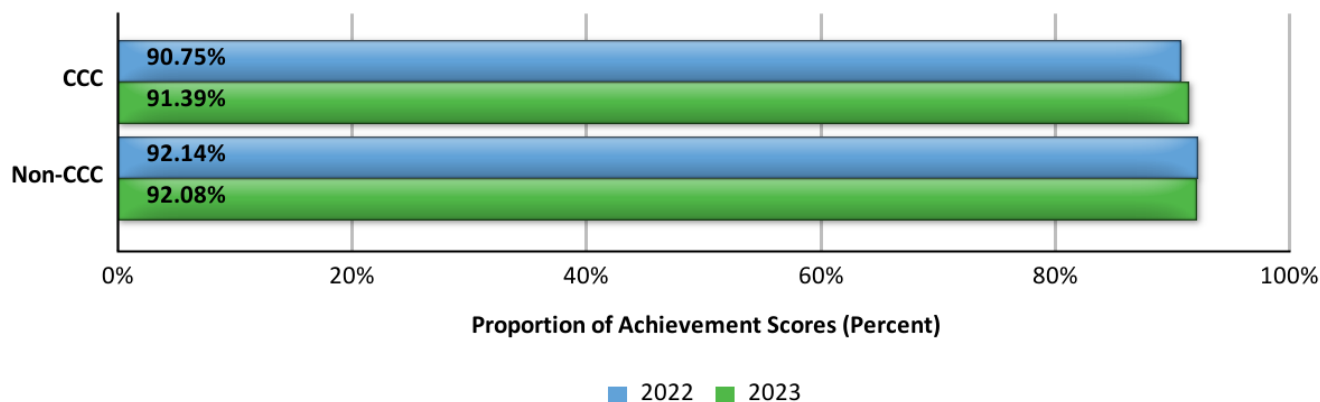


Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score.
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If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

Rating of Personal Doctor

Respondents were asked to rate their child’s personal doctor on a scale of 0 to 10, with 0 being the “worst personal doctor possible” and 10 being the “best personal doctor possible.” Ratings scoring 8, 9, or 10 are considered achievement scores. Figure 4-3 shows the *Rating of Personal Doctor* achievement scores, including CCC and non-CCC comparisons and trend analysis.

Figure 4-3—CCC and Non-CCC Comparisons and Trend Analysis: Rating of Personal Doctor

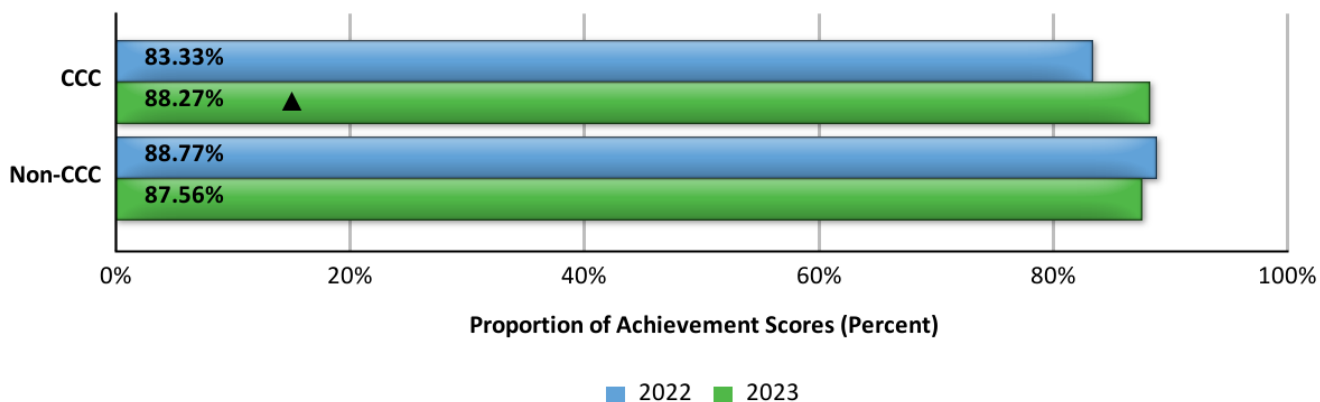


Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score.
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score.
↑ Indicates the score is statistically significantly higher than the other population score.
↓ Indicates the score is statistically significantly lower than the other population score.
If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

Rating of Specialist Seen Most Often

Respondents were asked to rate their child’s specialist on a scale of 0 to 10, with 0 being the “worst specialist possible” and 10 being the “best specialist possible.” Ratings scoring 8, 9, or 10 are considered achievement scores. Figure 4-4 shows the *Rating of Specialist Seen Most Often* achievement scores, including CCC and non-CCC comparisons and trend analysis.

Figure 4-4—CCC and Non-CCC Comparisons and Trend Analysis: Rating of Specialist Seen Most Often



Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score.
▼ Indicates the 2023 score is statistically significantly lower than the 2022 score.
↑ Indicates the score is statistically significantly higher than the other population score.
↓ Indicates the score is statistically significantly lower than the other population score.
If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

Composite Measures

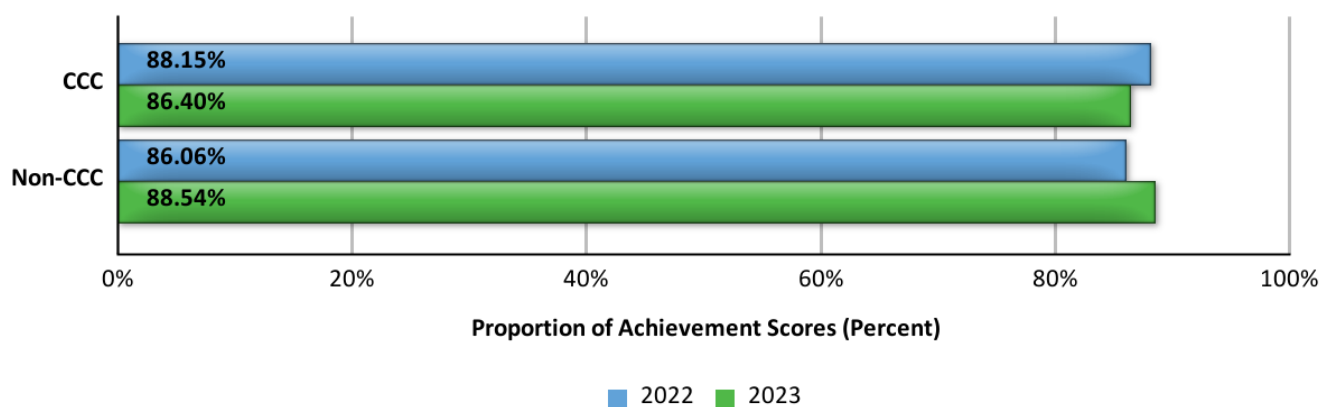
Getting Needed Care

Respondents were asked to assess how often (never, sometimes, usually, or always) it was easy for their child to get needed care:

- In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?
- In the last 6 months, how often did you get appointments for your child with a specialist as soon as he or she needed?

Response options of Usually and Always are considered achievement scores. Figure 4-5 shows the *Getting Needed Care* achievement scores, including CCC and non-CCC comparisons and trend analysis.

Figure 4-5—CCC and Non-CCC Comparisons and Trend Analysis: Getting Needed Care



Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score.

▼ Indicates the 2023 score is statistically significantly lower than the 2022 score.

↑ Indicates the score is statistically significantly higher than the other population score.

↓ Indicates the score is statistically significantly lower than the other population score.

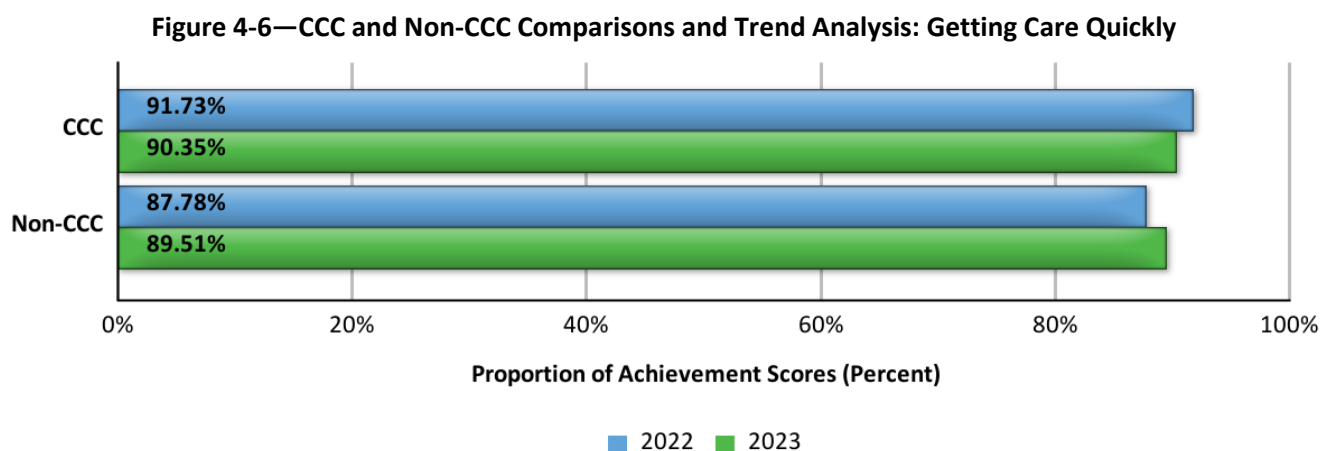
If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

Getting Care Quickly

Respondents were asked to assess how often (never, sometimes, usually, or always) it was easy to get care quickly for their child:

- 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?
- 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?

Response options of Usually and Always are considered achievement scores. Figure 4-6 shows the *Getting Care Quickly* achievement scores, including CCC and non-CCC comparisons and trend analysis.



Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score.
 ▼ Indicates the 2023 score is statistically significantly lower than the 2022 score.
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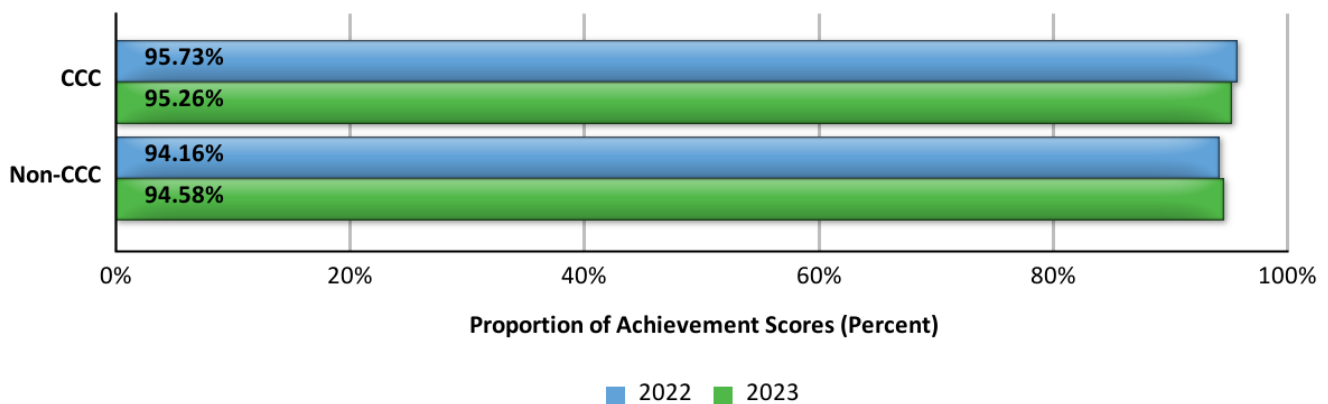
How Well Doctors Communicate

Respondents were asked to assess how often (never, sometimes, usually, or always) their child's personal doctor communicated well with them:

- 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?
- In the last 6 months, how often did your child's personal doctor listen carefully to you?
- In the last 6 months, how often did your child's personal doctor show respect for what you had to say?
- In the last 6 months, how often did your child's personal doctor spend enough time with your child?

Response options of Usually and Always are considered achievement scores. Figure 4-7 shows the *How Well Doctors Communicate* achievement scores, including CCC and non-CCC comparisons and trend analysis.

Figure 4-7—CCC and Non-CCC Comparisons and Trend Analysis: How Well Doctors Communicate



Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score.

▼ Indicates the 2023 score is statistically significantly lower than the 2022 score.

↑ Indicates the score is statistically significantly higher than the other population score.

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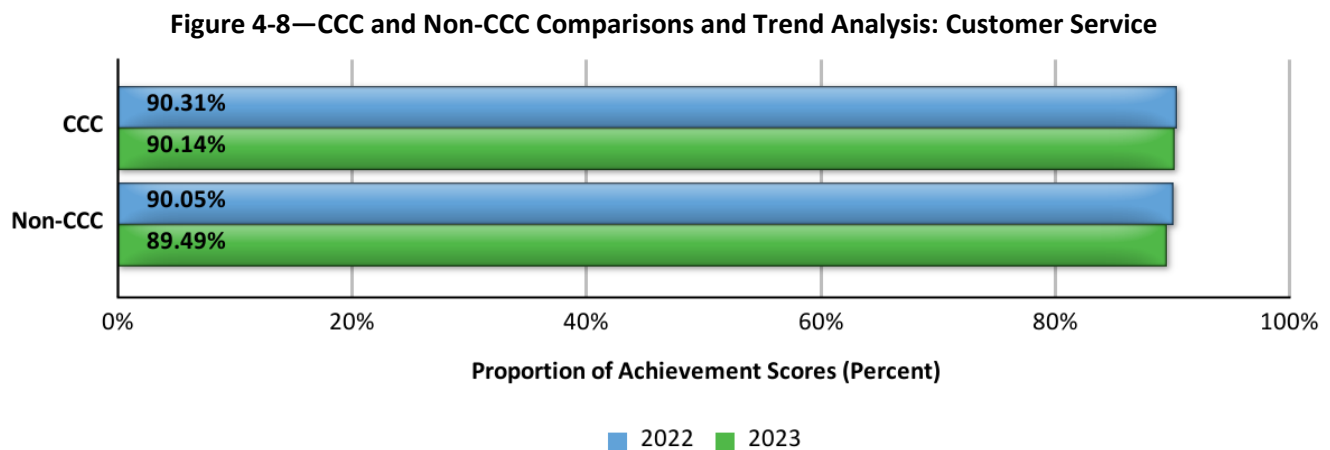
If no statistically significant differences were found, no indicators (↑, ↓ or ▲, ▼) appear on the figure.

Customer Service

Respondents were asked to assess how often (never, sometimes, usually, or always) respondents had a positive experience with their child's plan's customer service:

- In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed?
- In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect?

Response options of Usually and Always are considered achievement scores. Figure 4-8 shows the *Customer Service* achievement scores, including CCC and non-CCC comparisons and trend analysis.



Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score.
 ▼ Indicates the 2023 score is statistically significantly lower than the 2022 score.
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Individual Item Measure

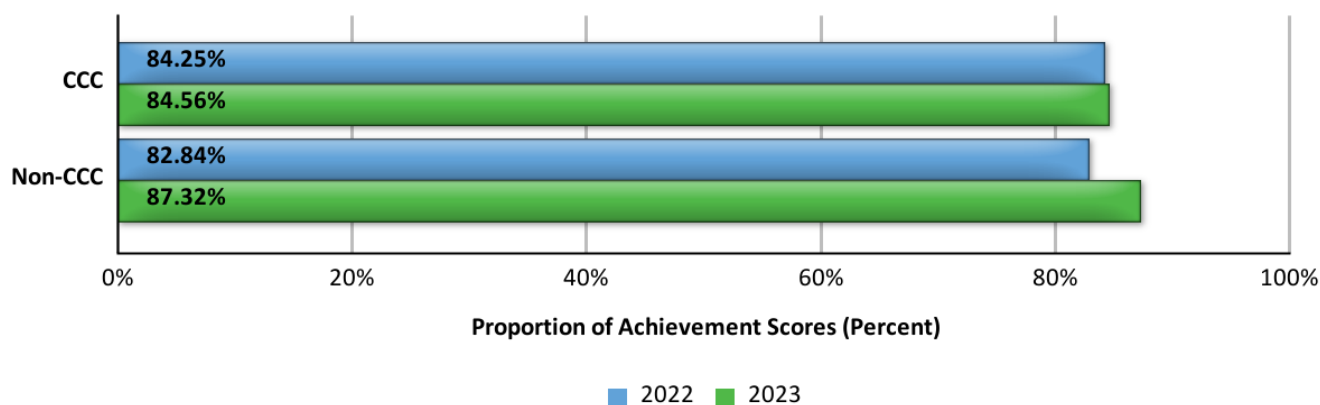
Coordination of Care

Respondents were asked to assess how often (never, sometimes, usually, or always) their child's personal doctor seemed informed and up-to-date:

- 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?

Response options of Usually and Always are considered achievement scores. Figure 4-9 shows the *Coordination of Care* achievement scores, including CCC and non-CCC comparisons and trend analysis.

Figure 4-9—CCC and Non-CCC Comparisons and Trend Analysis: Coordination of Care



Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score.
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CCC Composite Measures

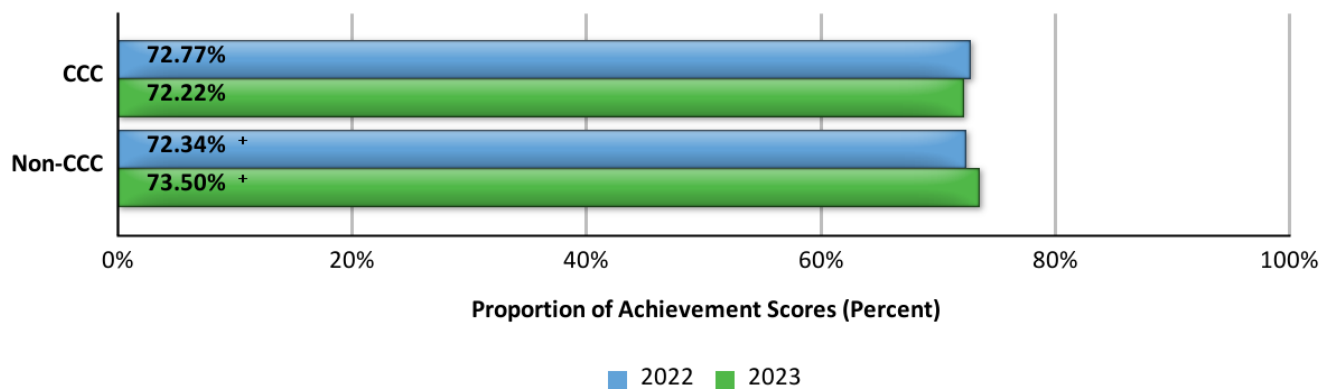
Access to Specialized Services

Respondents were asked to assess how often (never, sometimes, usually, or always) it was easy for respondents to access specialized services for their child:

- In the last 6 months, how often was it easy to get special medical equipment or devices for your child?
- In the last 6 months, how often was it easy to get this therapy for your child?
- In the last 6 months, how often was it easy to get this treatment or counseling for your child?

Response options of Usually and Always are considered achievement scores. Figure 4-10 shows the *Access to Specialized Services* achievement scores, including CCC and non-CCC comparisons and trend analysis.

Figure 4-10—CCC and Non-CCC Comparisons and Trend Analysis: Access to Specialized Services



Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score.

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+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

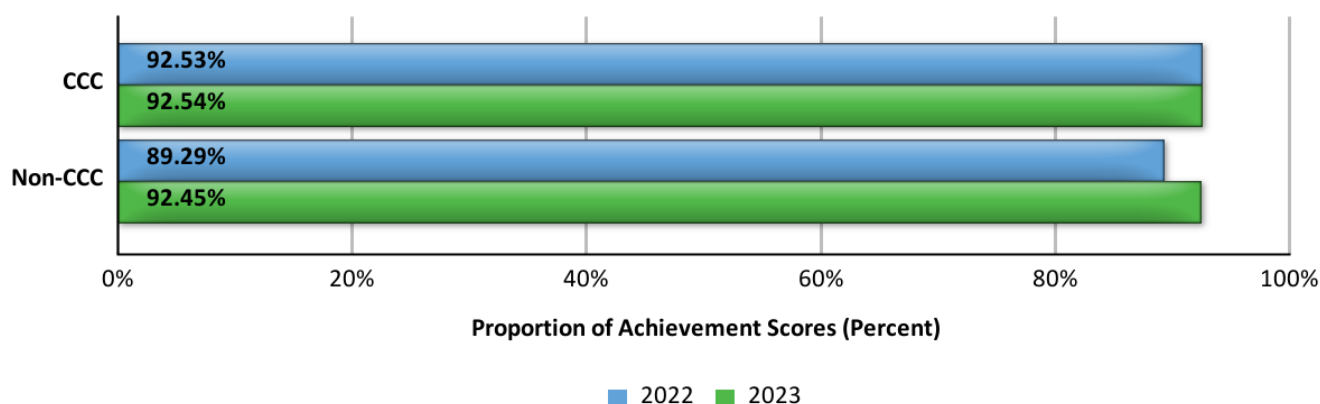
Family-Centered Care (FCC): Personal Doctor Who Knows Child

Respondents were asked to assess if the respondent's child's personal doctor knew their child (yes or no):

- In the last 6 months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?
- Does your child's personal doctor understand how these medical, behavioral, or other health conditions affect your child's day-to-day life?
- Does your child's personal doctor understand how your child's medical, behavioral, or other health conditions affect your family's day-to-day life?

A response option of Yes is considered an achievement score. Figure 4-11 shows the *FCC: Personal Doctor Who Knows Child* achievement scores, including CCC and non-CCC comparisons and trend analysis.

Figure 4-11—CCC and Non-CCC Comparisons and Trend Analysis: FCC: Personal Doctor Who Knows Child



Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score.
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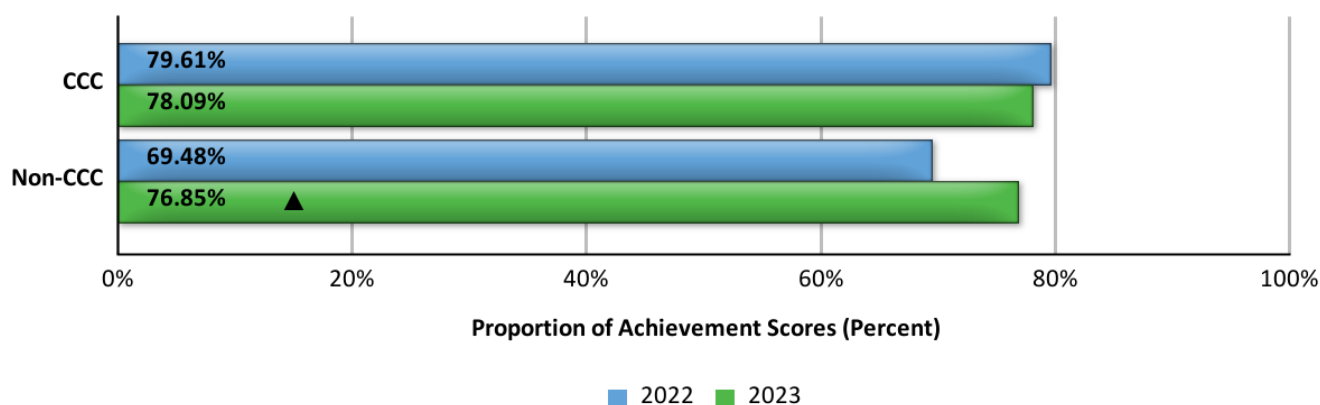
Coordination of Care for Children with Chronic Conditions

Respondents were asked to assess if the respondent's child had coordinated care (yes or no):

- In the last 6 months, did you get the help you needed from your child's doctors or other health providers in contacting your child's school or daycare?
- In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these different providers or services?

A response option of Yes is considered an achievement score. Figure 4-12 shows the *Coordination of Care for Children with Chronic Conditions* achievement scores, including CCC and non-CCC comparisons and trend analysis.

Figure 4-12—CCC and Non-CCC Comparisons and Trend Analysis: Coordination of Care for Children with Chronic Conditions



Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score.
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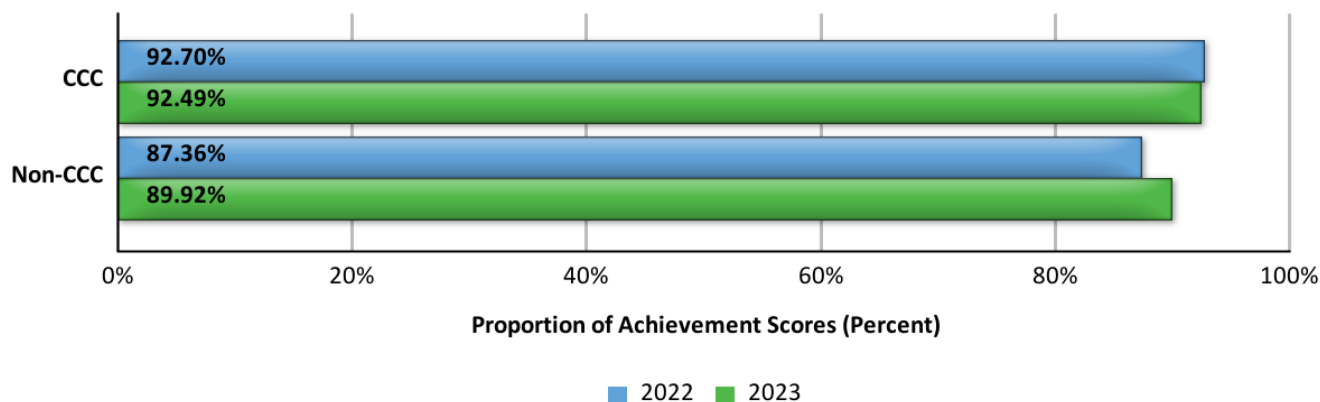
FCC: Getting Needed Information

Respondents were asked to assess how often (never, sometimes, usually, or always) the child's personal doctor or health provider answered the respondent's questions:

- In the last 6 months, how often did you have your questions answered by your child's doctors or other health providers?

Response options of Usually and Always are considered achievement scores. Figure 4-13 shows the *FCC: Getting Needed Information* achievement scores, including CCC and non-CCC comparisons and trend analysis.

Figure 4-13—CCC and Non-CCC Comparisons and Trend Analysis: FCC: Getting Needed Information



Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score.

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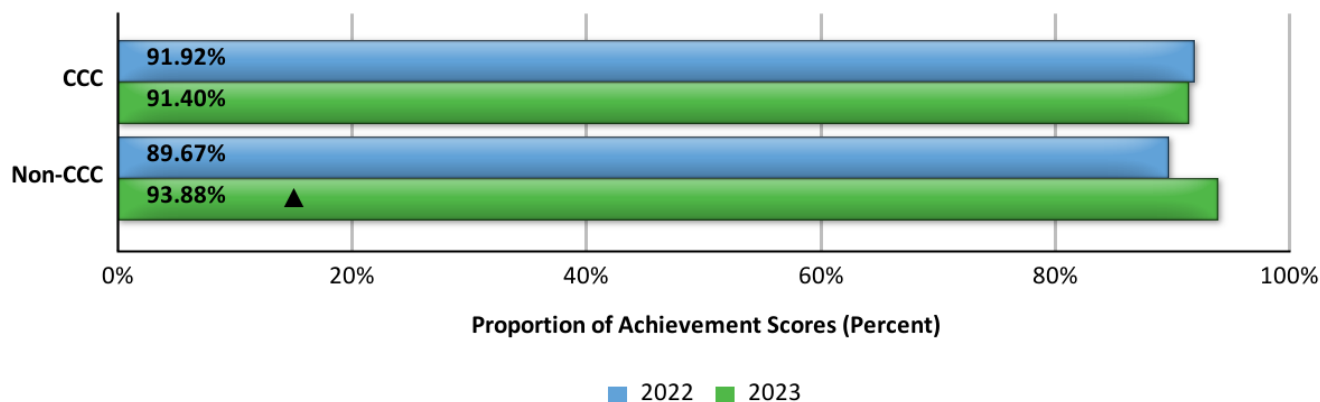
Access to Prescription Medicines

Respondents were asked to assess how often (never, sometimes, usually, or always) it was easy for the respondent to get prescription medicine for their child:

- In the last 6 months, how often was it easy to get prescription medicines for your child through his or her health plan?

Response options of Usually and Always are considered achievement scores. Figure 4-14 shows the *Access to Prescription Medicines* achievement scores, including CCC and non-CCC comparisons and trend analysis.

Figure 4-14—CCC and Non-CCC Comparisons and Trend Analysis: Access to Prescription Medicines



Statistical Significance Note: ▲ Indicates the 2023 score is statistically significantly higher than the 2022 score.

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5. Conclusions and Recommendations

Conclusions

Adult Results

When results for the adult population were compared to the 2023 national Medicaid percentiles, the Healthy Louisiana Statewide Average's performance was at or above the 50th percentile for all measures except *Getting Needed Care*, *Flu Vaccination Received*, and all three Medical Assistance With Smoking or Tobacco Use Cessation items. The achievement score for *Rating of Personal Doctor* was at or between the 75th and 89th percentiles, and *Customer Service* was at or above the 90th percentile.

For the adult population, AmeriHealth and United had the highest results when compared to national percentiles (i.e., seven measures were at or above the 75th percentile), while Aetna and LHCC had the lowest results. Aetna had two measures below the 25th percentile, and six measures were at or between the 25th and 49th percentiles. LHCC had four measures below the 25th percentile, and four measures were at or between the 25th and 49th percentiles.

In addition, the trend analysis did not reveal significant differences for the adult population between the 2023 and 2022 Healthy Louisiana Statewide Average achievement scores. AmeriHealth's 2023 achievement score for *Flu Vaccination Received* was significantly higher than the 2022 achievement score.

The MCO comparisons analysis revealed significant differences for the adult population when the MCOs' achievement scores were compared to the Healthy Louisiana Statewide Average achievement scores. Healthy Blue's achievement score for *Rating of Health Plan* was statistically significantly higher than the Healthy Louisiana Statewide Average.

Based on the Healthy Louisiana Statewide Average results, respondents may rate their health plan, overall health care, and personal doctor higher if the following key areas were improved:

- They received the care they needed as soon as they needed it when care was needed right away.
- The care, test, or treatments that they needed were easier to get.
- Their personal doctor explained things in an understandable way.
- Their personal doctor spent enough time with them.
- Their personal doctor was informed and up-to-date about the care they received from other doctors or health providers.
- They received an appointment with a specialist as soon as needed.

General Child Results

When results for the general child population were compared to the 2023 national Medicaid percentiles, the Healthy Louisiana Statewide Average's performance was at or above the 50th percentile for all measures except *Rating of Specialist Seen Most Often*. No measures were at or above the 90th percentile.

For the general child population, United had the highest results when compared to national percentiles (i.e., eight measures were at or above the 75th percentile), while Aetna, Healthy Blue, and LHCC had the lowest results. Aetna had one measure below the 25th percentile and one measure at or between the 25th and 49th percentiles. Healthy Blue had two measures below the 25th percentile and one measure at or between the 25th and 49th percentiles. Additionally, LHCC had four measures that were at or between the 25th and 49th percentiles.

In addition, the trend analysis revealed significant differences for the general child population between the 2023 and 2022 Healthy Louisiana Statewide Average achievement scores. The Healthy Louisiana Statewide Average achievement score for *Coordination of Care* was statistically significantly higher in 2023 than 2022. United's achievement score for *How Well Doctors Communicate* was statistically significantly higher in 2023 than 2022.

The MCO comparisons analysis revealed significant differences for the general child population when the MCOs' achievement scores were compared the Healthy Louisiana Statewide Average achievement scores. United's achievement score for *How Well Doctors Communicate* was statistically significantly higher than the Healthy Louisiana Statewide Average.

Based on the Healthy Louisiana Statewide Average results, parent/caretaker respondents may rate their child's health plan, overall healthcare, and personal doctor higher if the following key areas were improved:

- The care, test, or treatments that their child needed were easier to get.
- Their child's personal doctor spent enough time with the child.
- Their child's personal doctor listened carefully to them.
- Their child's personal doctor was informed and up-to-date about the care their child received from other doctors or health providers.
- Their child's health plan's customer service gave the parent/caretaker the information or help they needed.

CCC and Non-CCC Results

The trend analysis revealed significant differences for CCC and non-CCC populations between the 2023 and 2022 Healthy Louisiana Statewide Average achievement scores. The Healthy Louisiana Statewide Average achievement score for *Rating of Specialist Seen Most Often* was statistically significantly higher in 2023 than 2022 for the CCC population and achievement scores for *Coordination of Care for Children with Chronic Conditions* and *Access to Prescription Medicines* were statistically significantly higher in 2023 than 2022 for the non-CCC population.

The CCC and non-CCC comparison did not reveal significant differences between the CCC and non-CCC populations.

Recommendations

HSAG recommends LDH leverage the CAHPS Health Plan Survey data and report findings to support the development of relevant major initiatives, quality improvement strategies and interventions, and performance monitoring and evaluation activities. For example, CAHPS data may be analyzed to identify potential health disparities among key demographics. This type of information could inform initiatives aimed at identifying and addressing access to care barriers. LDH and the MCOs could explore ways to direct members and parents/caretakers of child members to useful and reliable sources of information by expanding websites to include easily accessible health information and relevant tools for obtaining timely care, as well as links to related information.

This report's findings establish priority areas for targeting quality improvement efforts in order to improve CAHPS ratings for the health plan, all health care, and personal doctor. A review of the CAHPS measure results (e.g., customer service, smoking cessation) may impact the development of related quality improvement strategies, performance measurement and accountability systems, and program monitoring activities. In these and other ways, CAHPS data are valuable resources for patient-centered approaches to population health management and improving health outcomes.

Appendix A: Composite Measure Ratings

This section highlights the results of respondents who answered “Always” for four composite measures (i.e., *Getting Needed Care*, *Getting Care Quickly*, *How Well Doctors Communicate*, and *Customer Service*) for the adult, general child, CCC, and non-CCC populations.

Table A-1—Composite Measure Ratings: Responses of “Always”: Adult Results

Composite Measures	Aetna	AmeriHealth	Healthy Blue	LHCC	United	Healthy Louisiana Statewide Average
<i>Getting Needed Care</i>	60.16% ⁺	55.87%	53.62%	53.38%	58.44%	55.55%
<i>Getting Care Quickly</i>	57.75% ⁺	65.63%	60.59%	61.98%	60.25%	61.18%
<i>How Well Doctors Communicate</i>	80.86%	80.38%	82.42%	79.59%	82.36%	80.94%
<i>Customer Service</i>	66.17% ⁺	81.15%	70.15% ⁺	76.52% ⁺	77.54% ⁺	74.74%

⁺ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Table A-2—Composite Measure Ratings: Responses of “Always”: General Child Results

Composite Measures	Aetna	AmeriHealth	Healthy Blue	LHCC	United	Healthy Louisiana Statewide Average
<i>Getting Needed Care</i>	71.64%	66.94%	75.21% ⁺	71.08% ⁺	72.37%	71.54%
<i>Getting Care Quickly</i>	75.82%	75.75%	79.35%	78.01% ⁺	79.52%	78.14%
<i>How Well Doctors Communicate</i>	83.81%	83.51%	86.13%	80.87%	86.92%	83.24%
<i>Customer Service</i>	68.69% ⁺	78.19% ⁺	66.24% ⁺	68.27% ⁺	70.61% ⁺	69.39%

⁺ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Table A-3—Composite Measure Ratings: Responses of “Always”: CCC and Non-CCC Results

Composite Measures	CCC	Non-CCC
<i>Getting Needed Care</i>	65.52%	72.89%
<i>Getting Care Quickly</i>	77.06%	78.60%
<i>How Well Doctors Communicate</i>	84.98%	84.67%
<i>Customer Service</i>	72.80%	73.33%

Appendix B: Reader's Guide

This section discusses limitations and cautions related to survey design, analysis, and interpretations that should be considered when interpreting or generalizing the findings. It is designed to provide supplemental information to the reader that may aid in the interpretation and use of the CAHPS results presented in this report.⁹

Limitations and Cautions

The findings presented in this report are subject to some limitations in the survey design, analysis, and interpretation. LDH should consider these limitations when interpreting or generalizing the findings.

Case-Mix Adjustment

The demographics of adult members or parents/caretakers and their children (i.e., response group) may impact respondents' experiences. Therefore, differences in the demographics of the response group may impact CAHPS results. NCQA does not recommend case-mix adjusting Medicaid CAHPS results to account for these differences; therefore, no case-mix adjusting was performed on these results.

Causal Inferences

Although this report examines whether respondents report differences with various aspects of their or their child's health care, these differences may not be completely attributable to the MCOs. These analyses identify whether respondents give different ratings of experience with their or their child's health plan. The survey by itself does not necessarily reveal the exact cause of these differences.

Non-Response Bias

The experiences of the survey respondent population may be different than that of non-respondents with respect to their health care services and may vary by MCO. According to research, late respondents (i.e., respondents who submitted a survey later than the first mailing/round) could potentially be non-respondents if the survey had ended earlier.¹⁰ To identify potential non-response bias, HSAG compared the scores of early respondents (i.e., respondents who submitted a survey during the first mailing/round) to late respondents for each measure. Results indicate that late respondents of the general child

⁹ By submitting data, records, documents, and information to HSAG as required by LDH and in support of this external quality review (EQR) activity, the MCO attests, based on best knowledge, information, and belief as to the accuracy, completeness and truthfulness of the documents and data it submits to HSAG.

¹⁰ Korkeila, K., et al. "Non-response and related factors in a nation-wide health survey." European journal of epidemiology 17.11 (2001): 991-999.

population are statistically significantly more likely to provide a higher top-box response than early respondents for the *Rating of Specialist Seen Most Often* global rating. LDH should consider that potential non-response bias may exist when interpreting CAHPS results.