

**Arizona Complete Health  
Complete Care Plan – ACC  
Monthly Member Survey  
Survey Analysis  
CY19 Q1 Report**



## SCOPE OF WORK

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

The survey questions measure the following:

Question 1-5: Patient Experience

Question 6: Outcomes and Improved Functioning

Question 7-8: Access to Care

Question 9: Overall Satisfaction with Health Plan

Question 10: Coordination of Care

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

### Timeline

Survey results are due to AzCH-CCP ACC quarterly, 15 business days after the end of the quarter.

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

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

Original Monthly Survey Start date: February 1, 2018

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

- January 31 CY19 Q1 (October 1 – December 31)
- April 30 CY19 Q2 (January 1 – March 31)
- July 30 CY19 Q3 (April 1 – June 30)
- October 30 CY19 Q4 (July 1 – September 30)

### Methodology

Data collection for the CY2019 Member Satisfaction Survey is administered as a single-wave mail study. Monthly mailings are sent to 1,125 AzCH-CCP ACC members during the first week of each month. The mailing packet consists of a single page cover letter and single page questionnaire, each printed double-sided English and Spanish, and a Business Return envelope.



## ANALYSIS

MorPace distributed surveys for the period of October 1, 2018 through December 30, 2018. The survey results were submitted to AzCH-CCP ACC on January 15, 2019. The survey answers are weighted from one “Strongly Disagree” to five “Strongly Agree”, “Not Applicable” is not included when calculating answer averages. Results include an overall rating average from one (low) to five (high) based on the answer weights mentioned above, for each question. The minimum performance standard (MPS) is a rating average of 4 for each question. The AzCH-CCP ACC rating average goal is 4.5+ for each question.

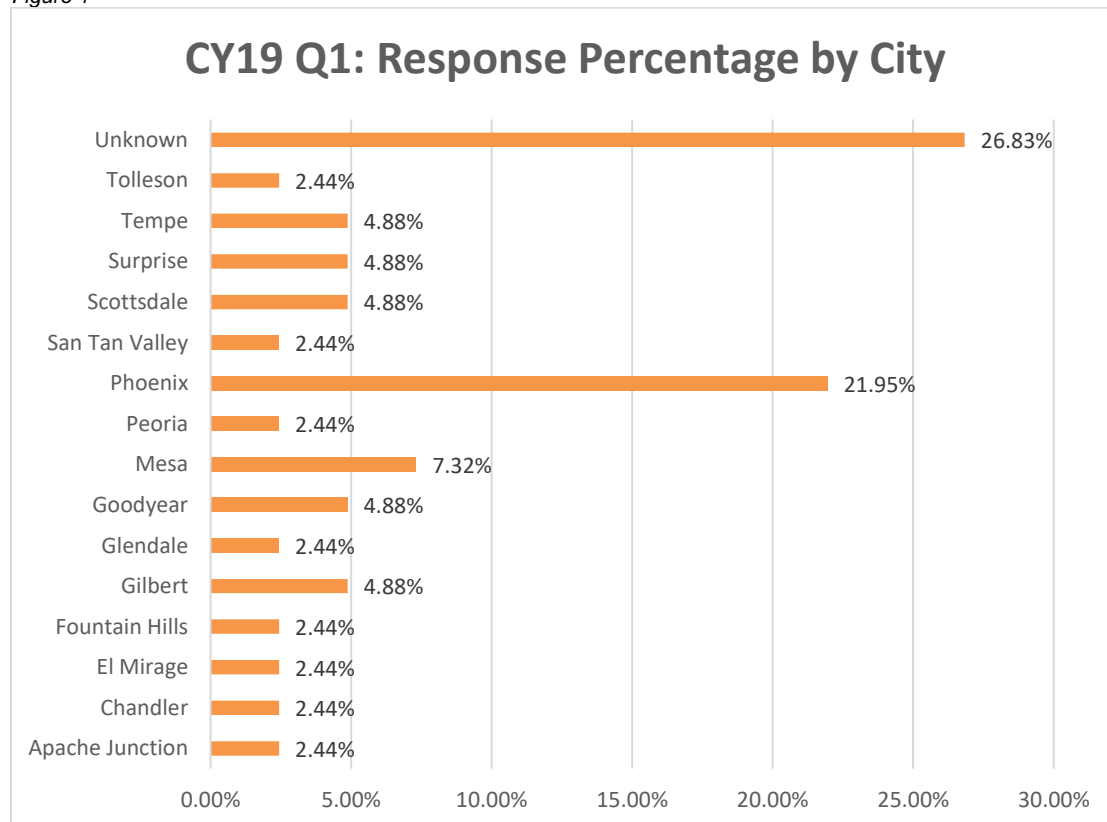
### Response Rate

The total count for Member Satisfaction Surveys sent during CY2018 Q2 through Q4 was 6,750 with an annual response rate of 2.5%. Total response count for the CY2019 Q1 period was 41. The count of surveys mailed out to members was 2,025 for CY2019 Q1 with a response rate of 2.0%, 0.5% lower than the annual response rate for CY2018.

	Total CY18 Q2 - Q4	Total CY19 Q1
	CCP	CCP
Mail out size	6,750	2,025
Completed surveys	169	41
Response rate	2.5%	2.0%

Figure 1 displays the response percentage by location. Phoenix was identified by 21.95% of respondents identified as their place of service, with a total count of 9. A total of 11 respondents, 26.83%, did not answer the question.

Figure 1





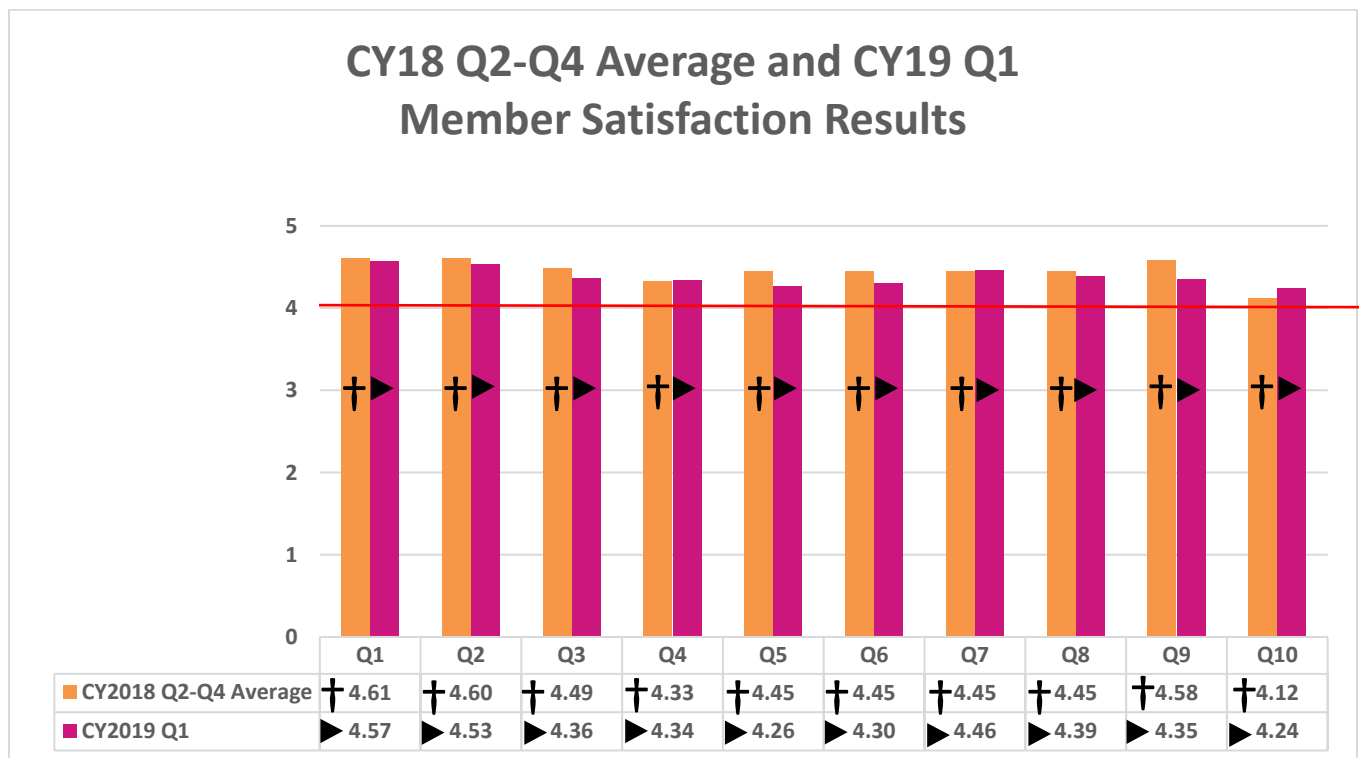
**Response Rate Interventions**

To continue improving the response rate, AzCH-CCP ACC worked with Morpace to revise the CY2018 cover letter that is mailed out with the survey to generate more interest. This revised cover letter includes contact information for a member of the Quality Improvement department to assist any member who has received the survey with questions or comments they would like to give directly to AzCH-CCP ACC.

**Survey Results**

Figure 2 compares overall rating averages from the CY2018 reporting period with the CY2019 Q1 reporting period. Overall, the survey questions remained above the MPS of four for member satisfaction response as an average for CY2018 as well as for CY2019 Q1. The largest increase was Question 10: My provider stays in touch with other providers/organizations in my life, which increased from a CY2018 average of 4.12 rating to a 4.24 rating. The MPS is 4 and all survey questions met MPS. The highest rated question for CY2019 Q1 is Question 1: The provider’s office is safe, clean, comfortable and inviting with an overall rating of 4.57. The lowest rated question for CY2019 Q1 was Question 10: My provider stays in touch with other providers/organizations in my life, with an overall rating of 4.24. Question 10 continues to increase from the prior quarters.

Figure 2



In an attempt to determine whether the difference between the current and previous satisfaction scores for Questions 1 through 10 are statistically significant, unpaired two-sample t-tests were completed using an alpha level of .05 as the significance criterion and 90% confidence level. Table 1 provides an assessment of the statistical significance between the CY2018 average ratings to the CY2019 Q1 ratings. A green or red arrow next to the percent of “Strongly Agree” and “Agree” response rates in CY2019 Q1 indicates a statistically significant change from CY2018 total average. No questions showed statistically significant improvement. One question, Question 5 showed a statistically significant decrease from the CY2018 average to CY2019 Q1.



Table 1. (% Strongly Agree/Agree)

Question	CCP	
	2018 Q1 – Q3 average	2018 Q4
<i>Sample Size</i>	<i>(n = 176)</i>	<i>(n = 41)</i>
1. The provider’s office is safe, clean, comfortable and inviting.	96.4%	91.9%
2. I was treated in a friendly and welcoming manner.	96.8%	94.7%
3. The team listens to me and believes we can accomplish our goals.	91.6%	86.2%
4. I am working with staff on activities to improve my health and wellness.	84.3%	87.5%
5. I know who to call if I have a problem or need help.	88.1%	76.9% ↓
6. My services are helping me to get better.	89.1%	86.4%
7. I receive services where I need them.	91.0%	92.3%
8. I receive services when I need them.	90.5%	92.1%
9. I am satisfied with Arizona Complete Health as my Health Plan.	92.3%	87.5%
10. My provider stays in touch with other providers/organizations in my life.	76.7%	85.3%

### Survey Result Interventions

#### **Member focused interventions:**

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



appointments with an expected timeline of how soon appointments should be made for by the health care provider. The flyer contains contact information for AzCH-CCP ACC Member Services as well as Nurse Advice Line, Peer Warm Line & Crisis Services. This intervention is driving the survey score increase for the following questions: Question 5: I know who to call if I have a problem or need help, Question 6: Services are helping me to get better, Question 7: I receive services where I need them, Question 8: I receive services when I need them, and Question 9: I am satisfied with Arizona Complete Health as my health plan.

- AzCH-CCP ACC Case Management Satisfaction Survey – This is a short survey that is offered at the end of a case management call. The goal with this survey is to glean immediate issues the member may have with their care management interactions. Current process is under review due to possible bias since the care manager involved is the person reviewing the survey with the member. A new case management survey methodology is being developed in CY2019 Q2 with implementation scheduled for CY2019 Q2 or Q3. The change in the methodology is to reduce the potential results bias and improve the acquisition of meaningful and actionable results. This intervention is driving the survey score increase for the following questions: Question 2: I was treated in a friendly and welcoming manner, Question 3: My team listens to me and believes I can accomplish my goals, Question 6: Services are helping me to get better and Question 9: I am satisfied with Arizona Complete Health as my Health Plan.

#### **Provider focused interventions:**

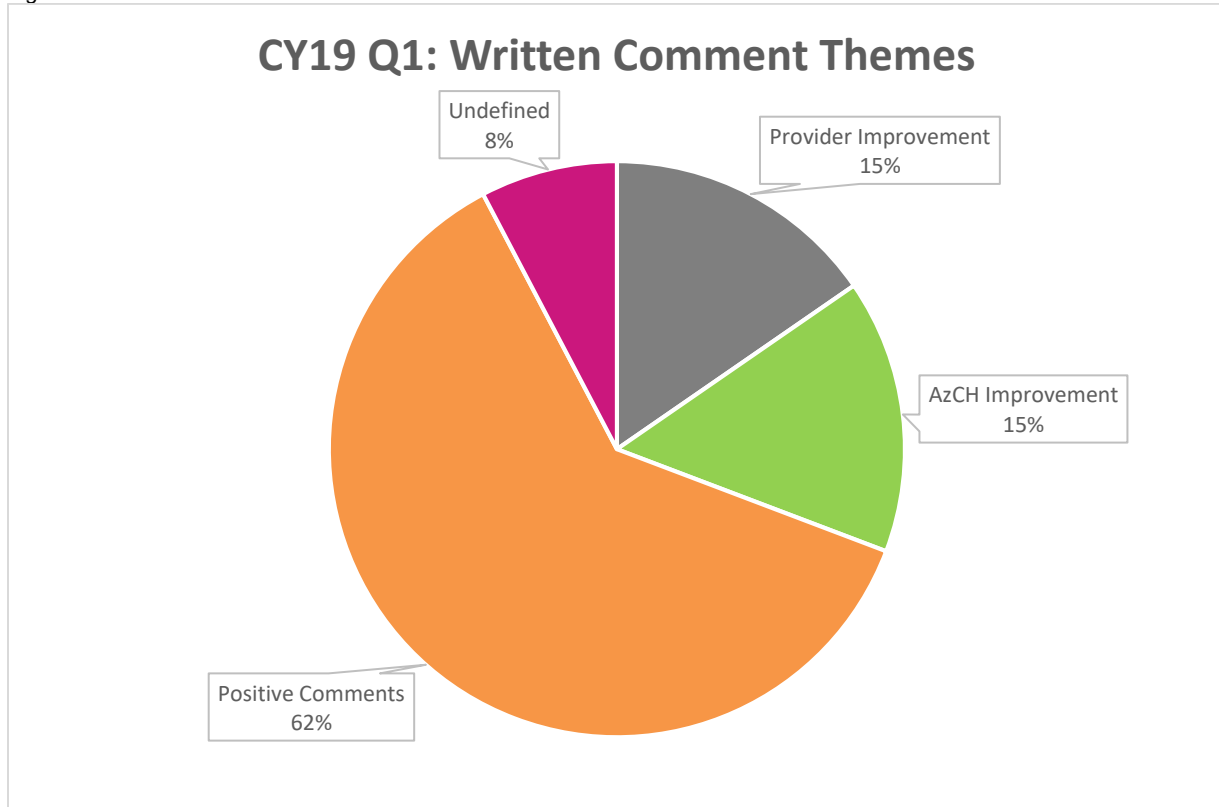
- Patient Experience Toolkit - This toolkit is a collaborative effort, developed by providers for providers and distributed to assist in improving the patient experience by offering useful guidelines, tips, and other materials. The toolkit is based on recommendations, feedback and best practices that were received from the participating providers. Toolkit was distributed to providers in July 2018. Follow up with providers who received the Toolkit in July 2018 will occur in CY2019 Q3 to determine the utilization uptake and identification of barriers/successes of implementation. This intervention is driving the survey score increase for the following questions: Question 2: I was treated in a friendly and welcoming manner, Question 3: My team listens to me and believes I can accomplish my goals, Question 4: I am working with staff on activities to improve my overall health and wellness, Question 10: My provider stays in touch with the other providers/organizations in my life.
- Coordination of Care (COC) Protocol – This protocol is to assist health care providers coordinate care and develop comprehensive treatment plans with physical, specialty and behavioral health providers for all patients with a direct focus on complex care patients with a behavioral health and/or substance abuse diagnosis, and/or other comorbid chronic condition. This protocol is currently in development to be distributed to providers this quarter. This intervention is driving the survey score increase for the following questions: Question 3: My team listens to me and believes I can accomplish my goals, Question 4: I am working with staff on activities to improve my overall health and wellness, Question 7: I receive services where I need them, Question 8: I receive services when I need them and Question 10: My provider stays in touch with the other providers/organizations in my life.

#### **Written Comments**

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



Figure 3



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

- “Thank you for all that you do”
- “My cholesterol getting better”
- “I’m glad that you are out there to insure me. I don’t have much money. I get paid Social Security and that isn’t much. You’ve helped me a lot. Your checkups from the nurse is great. I’m just glad that I can get health insurance. I’m not very healthy. I’d say my health is very poor. Thank you so much for all you’ve done.”

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

- AzCH-CCP ACC:
  - I love my doctor (Linda Eller). The only problem I have is trying to get my doctor’s name on my insurance card. Have tried and been told three times I would have a new card in seven to ten days. Still waiting. Started this process September 27, 2018.
    - **Response Actions/Interventions:** AzCH-CCP ACC strives to ensure timely and successful follow up on member requests. AzCH-ACC has an established process to ensure efficient distribution of accurate member ID cards. When possible, AzCH-ACC staff will continue to utilize these established processes to send member ID cards in a timely manner and help identify potential barriers to receipt if members report multiple instances of not receiving their ID card.
- Provider:
  - Provider is fine, it’s when I get referred to other doctors, they just give pills, not much answers.
    - **Response Actions/Interventions:** AzCH-ACC’s Patient Experience Toolkit has been sent to providers to increase adoption of best practices aimed at enhancing the experience members receive across the continuum of care. This is an established intervention beginning CY2018 Q4.