



Complete Summary

TITLE

Health plan members' experiences: percentage of parents of health plan members who reported how much of a problem they had with health plan customer service for their children.

SOURCE(S)

CAHPS® Health Plan Survey and Reporting Kit 2002. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2002.

Welcome to the CAHPS Survey Users Network (CAHPS-SUN). [internet]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); [cited 2004 Apr 15]. [3 p].

Brief Abstract

DESCRIPTION

This measure assesses the percentage of respondents who indicated how much of a problem ("Not a problem," "A small problem," or "A big problem") they had with their children's health plan customer service. The "Health Plan Customer Service" composite measure is based on three questions in the CAHPS 3.0 Health Plan Survey (Child Questionnaire).

RATIONALE

The Agency for Healthcare Research and Quality (AHRQ) (then called the Agency for Health Care Policy and Research, or AHCPR) initiated the CAHPS program in October 1995 to develop standardized survey tools for obtaining and reporting information on consumers' experiences with health care. The CAHPS consortium began by developing the CAHPS Health Plan Survey, an integrated set of carefully tested and standardized questionnaires and report formats that can be used to produce meaningful, reliable, and comparable information about the experiences of consumers enrolled in health plans.

The CAHPS Health Plan Survey is designed to generate information that consumers can use to choose health plans, that purchasers can use to assess the value of services they buy, and that health plans can use to assess their performance and improve their products and services. As AHRQ had intended, the survey can be used with all types of health insurance consumers--including Medicaid recipients, Medicare beneficiaries, and those who are commercially insured--and across the full range of health care delivery systems, from fee-for-service to managed care plans. The instruments also capture information about

special groups, including individuals with chronic conditions and disabilities and families with children.

The National Committee for Quality Assurance (NCQA) requires health plans to submit measures from the CAHPS Health Plan Survey as part of their HEDIS submission and for accreditation purposes.

PRIMARY CLINICAL COMPONENT

Health plan; members' experiences; customer service; information; paperwork

DENOMINATOR DESCRIPTION

Health plan members 17 years and younger, who have been enrolled in the health plan for 12 months or longer (commercial) or 6 months or longer (Medicaid), with no more than one break in enrollment of up to 45 days during the enrollment period, whose parent answered the, "Health Plan Customer Service," questions on the CAHPS 3.0 Health Plan Survey (Child Questionnaire)

NUMERATOR DESCRIPTION

The number of health plan members from the denominator whose parent indicated "Not a problem," "A small problem," or "A big problem" on the three questions regarding their experiences with their children's health plan customer service

Evidence Supporting the Measure

PRIMARY MEASURE DOMAIN

Patient Experience

SECONDARY MEASURE DOMAIN

Not applicable

EVIDENCE SUPPORTING THE MEASURE

A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences
One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Use of this measure to improve performance
Wide variation in quality for the performance measured

EVIDENCE SUPPORTING NEED FOR THE MEASURE

What consumers say about the quality of their health plans and medical care.
National CAHPS Benchmarking Database 2003 chartbook. Rockville (MD): Agency
for Healthcare Research and Quality (AHRQ); 2003 Sep 1. 25 p.

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Accreditation
Decision-making by businesses about health-plan purchasing
Decision-making by consumers about health plan/provider choice
External oversight/Department of Defense/TRICARE
External oversight/Medicaid
External oversight/State government program
Internal quality improvement
National health care quality reporting
Quality of care research

Application of Measure in its Current Use

CARE SETTING

Managed Care Plans

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Measure is not provider specific

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

TARGET POPULATION AGE

Age less than or equal to 17 years

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Unspecified

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

End of Life Care
Getting Better
Living with Illness
Staying Healthy

IOM DOMAIN

Patient-centeredness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

Health plan members 17 years or younger, who have been enrolled in the health plan for 12 months or longer (commercial) or 6 months or longer (Medicaid), with no more than one break in enrollment of up to 45 days during the enrollment period

DENOMINATOR SAMPLING FRAME

Enrollees or beneficiaries

DENOMINATOR (INDEX) EVENT

Patient Characteristic

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

Health plan members 17 years and younger, who have been enrolled in the health plan for 12 months or longer (commercial) or 6 months or longer (Medicaid), with no more than one break in enrollment of up to 45 days during the enrollment period, whose parent answered the, "Health Plan Customer Service," questions on the CAHPS 3.0 Health Plan Survey (Child Questionnaire). Include refusals, non-response, and bad addresses/phone numbers.

Exclusions

- Individuals with coverage other than primary health coverage, such as dental-only plan
- Deceased
- Ineligible (not enrolled in the plan)

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

The number of health plan members from the denominator whose parent indicated "Not a problem," "A small problem," or "A big problem" on the three questions regarding their children's health plan customer service

Includes all completed questionnaires; a questionnaire is considered complete if responses are available for 10 or more of a selected list of key CAHPS Health Plan Survey items.

Exclusions

Unspecified

DENOMINATOR TIME WINDOW

Time window precedes index event

NUMERATOR TIME WINDOW

Fixed time period

DATA SOURCE

Administrative data and patient survey

LEVEL OF DETERMINATION OF QUALITY

Not Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Non-weighted Score/Composite/Scale

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Analysis by subgroup (stratification on patient factors)
Case-mix adjustment

DESCRIPTION OF ALLOWANCE FOR PATIENT FACTORS

CAHPS recommends adjusting the data for respondent age, education, and general health status.

If the sample size is sufficient, responses may be analyzed for specific sub-populations, such as respondents with chronic conditions.

STANDARD OF COMPARISON

External comparison at a point in time
External comparison of time trends
Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

The CAHPS Health Plan Survey has probably been tested more completely than any previously used consumer survey.

There are two different and complementary approaches to assessing the reliability and validity of a questionnaire (1) cognitive testing, which bases its assessments on feedback from interviews with people who are asked to react to the survey questions, and (2) psychometric testing, which bases its assessments on the analysis of data collected by using the questionnaire. Although many existing

consumer questionnaires about health care have been tested primarily or exclusively using a psychometric approach, the CAHPS team views the combination of cognitive and psychometric approaches as essential to producing the best possible survey instruments. Consequently, both methods have been included in the development of the CAHPS survey.

The cognitive testing method provided useful information on respondents' perceptions of the response task, how respondents recalled and reported events, and how they interpreted specified reference periods. It also helped identify words that could be used to describe health care providers accurately and consistently across a range of consumers (e.g., commercially insured, Medicaid, fee-for-service, managed care, lower socioeconomic status [SES], middle SES, low literacy, higher literacy) and helped explore whether key words and concepts included in the core questions worked equally well in both English and Spanish.

The CAHPS consortium also tested each CAHPS reporting composite in focus groups with plan members. Cognitive interviews with consumers were conducted to ensure that the reporting composites and their labels were easily understood. Psychometric analyses using data collected during pilot tests were also conducted. These analyses indicated that both the composites and the items in each composite were reliable and valid measures of members' experiences. In addition, items in each reporting composite were tested and found to be internally consistent. For example, reliability coefficients (Cronbach's alpha) in one pilot test involving four health plans using the instrument that most resembled the final CAHPS 2.0 instrument ranged from a low of 0.68 for the "Getting Needed Care" composite to a high of 0.90 for the "How Well Doctors Communicate" composite. These composites are positively associated with members' ratings of overall care provided by doctors and nurses and ratings of health plans.

In addition, the CAHPS development team, together with researchers from the National Committee on Quality Assurance (NCQA), conducted a detailed comparative analysis of the items in the CAHPS questionnaire and NCQA's Member Satisfaction Survey (MSS) from the fall of 1997 to the spring of 1998. These questionnaires were merged to form the current CAHPS questionnaire. This testing is noteworthy because it was so extensive and because of the wide array of techniques used. These included focus groups, in-depth cognitive testing, pilot studies, methodological experiments, and large demonstration studies, such as the demonstrations in Washington State, Kansas, and New Jersey.

EVIDENCE FOR RELIABILITY/VALIDITY TESTING

Welcome to the CAHPS Survey Users Network (CAHPS-SUN). [internet]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); [cited 2004 Apr 15]. [3 p].

Identifying Information

ORIGINAL TITLE

Parents' experiences with health plan customer service, information, and paperwork.

MEASURE COLLECTION

[CAHPS Health Plan Survey](#)

MEASURE SET NAME

[CAHPS 3.0 Health Plan Survey, Child Questionnaire](#)

SUBMITTER

Agency for Healthcare Research and Quality

DEVELOPER

Agency for Healthcare Research and Quality
CAHPS Consortium
Centers for Medicare and Medicaid Services

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

1997 Mar

REVISION DATE

2002 Oct

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

CAHPS® Health Plan Survey and Reporting Kit 2002. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2002.

Welcome to the CAHPS Survey Users Network (CAHPS-SUN). [internet]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); [cited 2004 Apr 15]. [3 p].

MEASURE AVAILABILITY

The individual measure, "Parents' Experiences with Health Plan Customer Service, Information, and Paperwork," is published in the "CAHPS Health Plan Survey and Reporting Kit 2002." This Kit may be downloaded at the [CAHPS-SUN](#) Web site.

COMPANION DOCUMENTS

The following are available:

- Welcome to the CAHPS Survey Users Network (SUN). [Web site]. Available at www.cahps-sun.org.
- National CAHPS Benchmarking Database (NCBD). [Web site]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); [cited 2003 Aug 21]. Available at <http://ncbd.cahps.org/> or from the [CAHPS-SUN](http://www.cahps-sun.org) Web site.
- What consumers say about the quality of their health plans and medical care. National CAHPS Benchmarking Database 2003 chartbook. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2003 Sep 1. 25 p. Available in Portable Document Format (PDF) from the [NCBD](http://www.ncbd.org) Web site.
- Compare your health plan choices. Health plan quality from the consumer's point of view [adult guide]. Rockville (MD): CAHPS, Agency for Health Care Research and Quality; 17 p. Available from the [CAHPS-SUN](http://www.cahps-sun.org) Web site.
- Compare your health plan choices. Health plan quality from the consumer's point of view [adult & child guide]. Rockville (MD): CAHPS, Agency for Healthcare Research and Quality; 25 p. Available from the [CAHPS-SUN](http://www.cahps-sun.org) Web site.

NQMC STATUS

This NQMC summary was completed by ECRI on March 15, 2004. The information was verified by the measure developer on April 9, 2004.

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