

2024 Healthy Michigan Plan CAHPS® Dental Survey Report

*Michigan Department of Health and Human
Services*

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1. Executive Summary

Introduction

The Michigan Department of Health and Human Services (MDHHS) contracted with Health Services Advisory Group, Inc. (HSAG) to administer and report the results of the Adult Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Dental Plan Survey (CAHPS Dental Survey) as part of its process for evaluating the quality of dental services provided to adult Medicaid members enrolled in the Healthy Michigan Plan (HMP) Program and receiving dental benefits through one of the MDHHS contracted Medicaid Health Plans (MHPs).¹⁻¹ The goal of the survey is to provide performance feedback that is actionable and will aid in improving the dental care and services of adult members enrolled in the HMP Program.¹⁻² Results presented in this report include four global ratings, three composite measures, and one individual item measure. Table 1-1 provides a list of the MHPs that participated in the survey.

Table 1-1—Participating MHPs

MHP Name
Aetna Better Health of Michigan
Blue Cross Complete of Michigan
HAP CareSource
McLaren Health Plan
Meridian Health Plan of Michigan
Molina Healthcare of Michigan
Priority Health Choice
UnitedHealthcare Community Plan
Upper Peninsula Health Plan

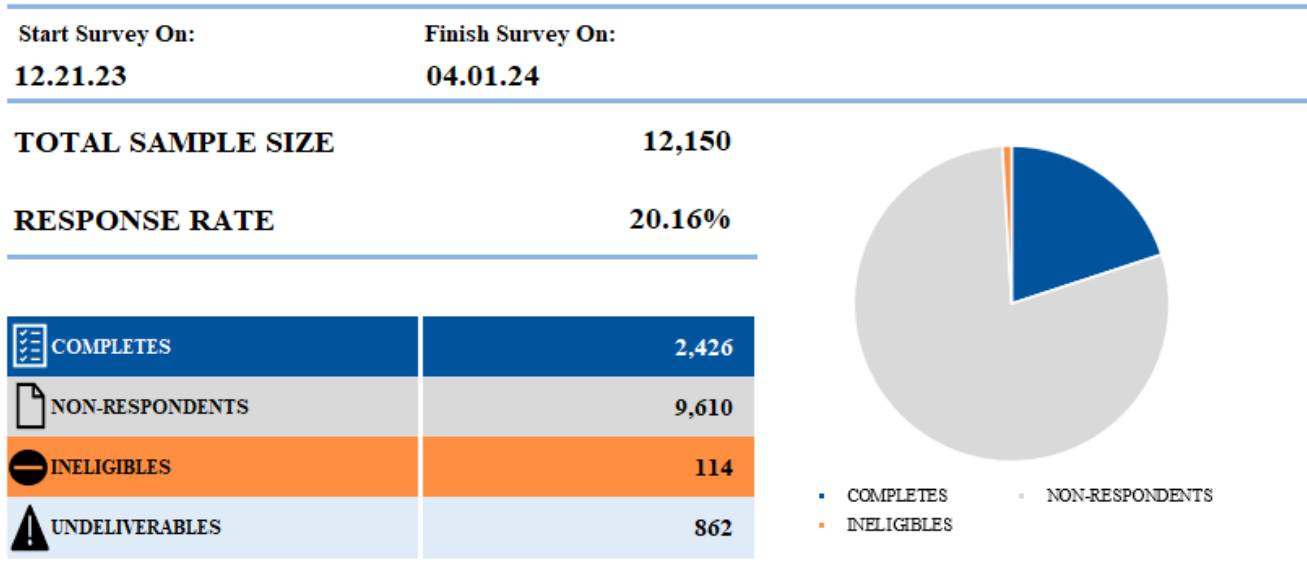
¹⁻¹ CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

¹⁻² The HMP Program results presented in this report are derived from the combined results of the participating MHPs (i.e., aggregate).

Survey Administration Overview

Figure 1-1 displays a summary of the survey dispositions for the HMP Program.

Figure 1-1—Survey Administration Overview: HMP Program



DETAILS

	Mail 1	Mail 2	Mail 3	Web*
Completes	1,102	684	309	331
	Refusals		No Response	
Non-Respondents	14	9,596		
	Not Enrolled		Deceased	Language Barrier
Ineligibles	108	5	1	

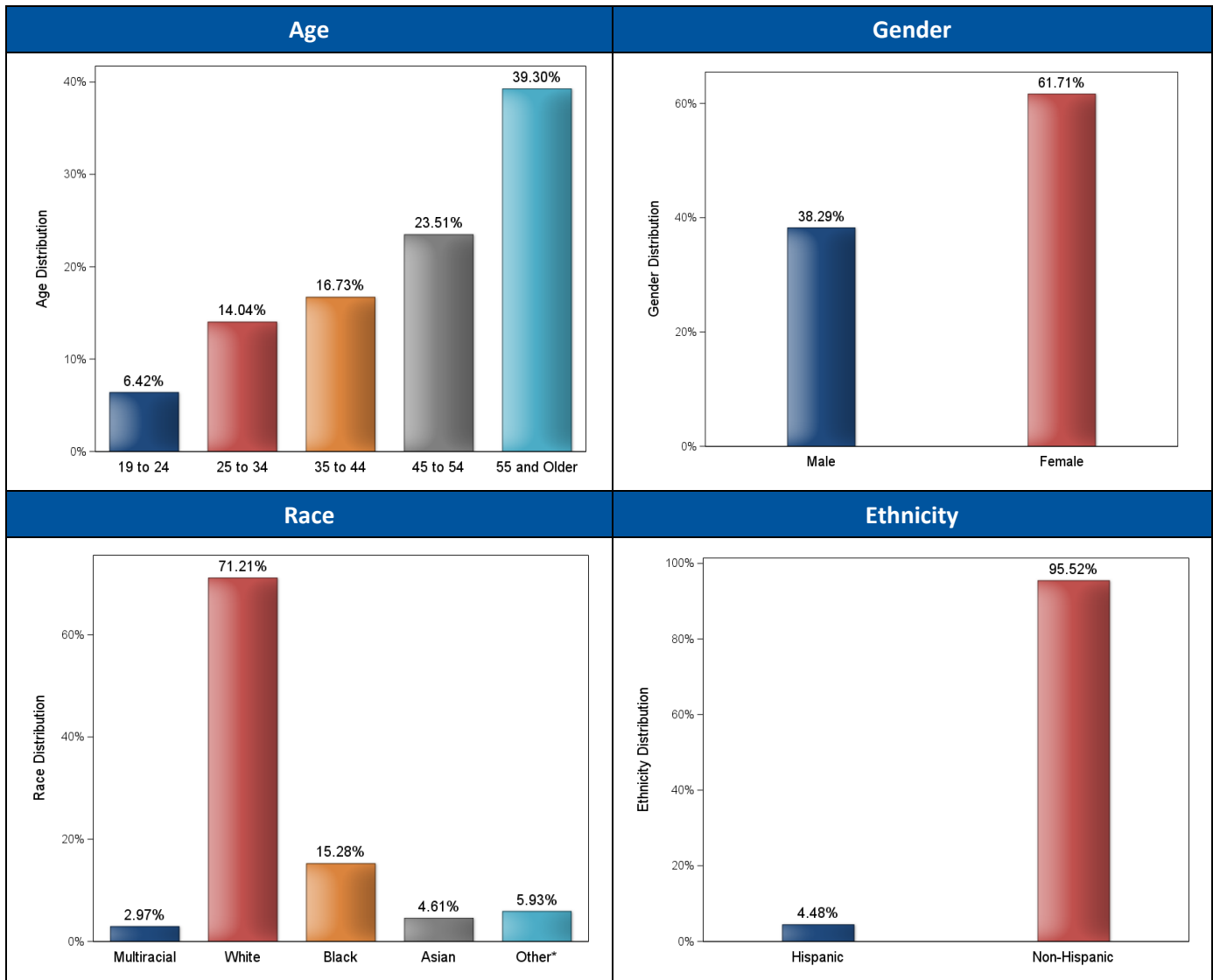
* There were six surveys completed in Spanish via web.

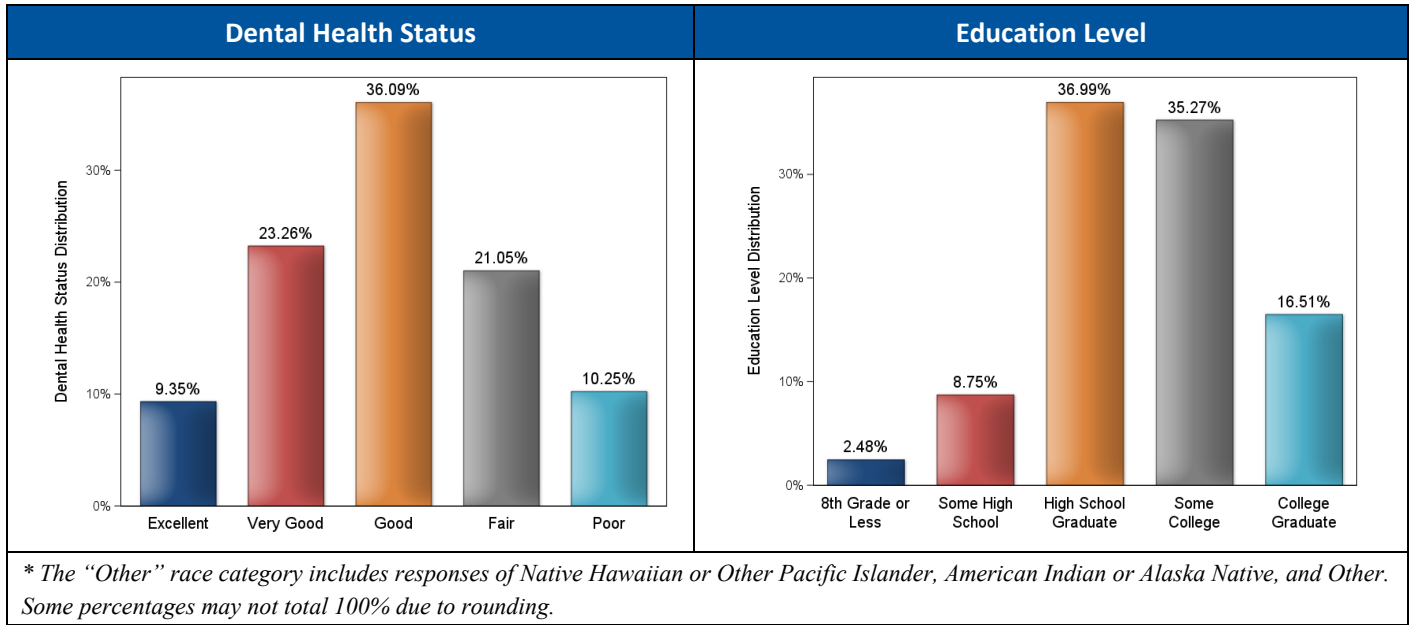
Key Findings

Demographics

Table 1-2 provides an overview of the demographic characteristics of members who completed a survey for the HMP Program. The detailed results are found in the Results section beginning on page 3-5.

Table 1-2—Respondent Demographics: HMP Program





MHP Comparisons

HSAG compared individual MHP results to the HMP Program results to determine if plan results were statistically significantly different from the program-wide results. The detailed results of this analysis are in the MHP Comparisons subsection beginning on page 3-8. Table 1-3 shows a summary of the statistically significant results of this analysis. There were no statistically significant differences for the *Rating of Regular Dentist*, *Rating of Finding a Dentist*, and *Rating of Dental Plan* global ratings.

Table 1-3—MHP Comparisons Summary: Statistically Significant Results

Measure	Aetna Better Health of Michigan	Blue Cross Complete of Michigan	HAP CareSource	Priority Health Choice	UnitedHealthcare Community Plan	Upper Peninsula Health Plan
<i>Rating of All Dental Care</i>	—	↓	↑	—	—	↑
<i>Care from Dentists and Staff</i>	↓	—	↑	↑	—	—
<i>Access to Dental Care</i>	↓	—	↑	—	—	—
<i>Dental Plan Information and Services</i>	—	—	↑ ⁺	—	↓	—
<i>Would Recommend Dental Plan</i>	↓	—	↑	—	—	—
+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results. ↑ Indicates the 2024 MHP's score is statistically significantly higher than the HMP Program. ↓ Indicates the 2024 MHP's score is statistically significantly lower than the HMP Program. — Indicates the 2024 MHP's score is not statistically significantly different than the HMP Program.						

Trend Analysis

A trend analysis was performed that compared 2024 scores to the 2023 and 2022 scores. The detailed results of this analysis are in the Trend Analysis section beginning on page 4-1. Table 1-4 shows a summary of the most recent statistically significant results of this analysis (i.e., 2024 results compared to 2023 results). There were no statistically significant differences for the *Rating of All Dental Care* and *Rating of Finding a Dentist* global ratings.

Table 1-4—Trend Analysis Summary: Statistically Significant Results

<i>Program/Plan Name</i>	<i>Rating of Regular Dentist</i>	<i>Rating of Dental Plan</i>	<i>Care from Dentists and Staff</i>	<i>Access to Dental Care</i>	<i>Dental Plan Information and Services</i>	<i>Would Recommend Dental Plan</i>
HMP Program	—	▲	—	—	▲	▲
Aetna Better Health of Michigan	—	—	▼	—	—	—
HAP CareSource	—	▲	—	—	—	▲
McLaren Health Plan	—	—	—	—	▲	▲
Meridian Health Plan of Michigan	▼	—	—	—	—	—
Upper Peninsula Health Plan	—	—	▼	▼	—	—

▲ Indicates the 2024 score is statistically significantly higher than 2023.
 ▼ Indicates the 2024 score is statistically significantly lower than 2023.
 — Indicates the 2024 score is not statistically significantly different than in 2023.

Key Drivers of Member Experience Analysis

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 All Dental Care*, *Rating of Dental Plan*, and *Would Recommend Dental Plan*. HSAG refers to the individual items (i.e., questions) for which the odds ratio is statistically significantly greater than 1 as “key drivers” since these items are driving members’ levels of experience with each of the three measures. The detailed results of this analysis are described in the Key Drivers of Member Experience Analysis section beginning on page 5-1. Table 1-5 provides a summary of the survey items identified for each of the three measures as being key drivers of member experience (indicated by a ✓) for the HMP Program.

Table 1-5—Key Drivers of Member Experience: HMP Program

Key Drivers	Response Options	Rating of All Dental Care	Rating of Dental Plan	Would Recommend Dental Plan
Q7. Dentist listened carefully to you	Sometimes vs. Always	✓	NS	NS
	Usually vs. Always	✓	NS	NS
Q8. Dentist treated you with courtesy and respect	Sometimes vs. Always	✓	NS	NS
Q9. Dentist spent enough time with you	Sometimes vs. Always	✓	NS	NS
	Usually vs. Always	✓	NS	NS
Q11. Dentist or dental staff did everything they could to help you feel comfortable during dental work	Never vs. Always	✓	NS	NS
	Sometimes vs. Always	✓	NS	NS
	Usually vs. Always	✓	NS	NS
Q12. Dentist or dental staff explained what they were doing while treating you	Never vs. Always	✓	NS	NS
	Sometimes vs. Always	✓	NS	NS
	Usually vs. Always	✓	NS	NS
Q13. Received dental appointments as soon as wanted	Never vs. Always	NS	✓	✓
	Sometimes vs. Always	NS	✓	✓
	Usually vs. Always	NS	✓	✓
Q14. Got to see dentist as soon as wanted because of dental emergency	Never vs. Always	NS	NS	✓
	Usually vs. Always	NS	NS	✓
Q15. Got appointment with dentist who specializes in particular type of dental care as soon as wanted	Never vs. Always	NS	✓	NS
	Sometimes vs. Always	NS	✓	NS
	Usually vs. Always	NS	✓	NS
Q19. Dental plan covered all services you thought were covered	Never vs. Always	NA	✓	✓
	Sometimes vs. Always	NA	✓	✓
	Usually vs. Always	NA	✓	✓
Q20. Dental plan covered what you and your family needed to get done	Never vs. Always	NA	✓	✓
	Sometimes vs. Always	NA	✓	✓
	Usually vs. Always	NA	✓	✓

Key Drivers	Response Options	Rating of All Dental Care	Rating of Dental Plan	Would Recommend Dental Plan
Q24. Information helped find dentist you are happy with	Never vs. Always	NA	✓	✓
	Sometimes vs. Always	NA	✓	✓
	Usually vs. Always	NA	✓	✓
<p>NA Indicates that this question was not evaluated for this measure. NS Indicates that the calculated odds ratio estimate is not statistically significantly higher than 1.0; therefore, respondents' answers for those responses do not significantly affect their rating.</p>				

This section provides a comprehensive overview of the CAHPS Dental Survey, including the survey administration protocol and analytic methodology. It is designed to provide supplemental information to the reader that may aid in the interpretation and use of the results presented in this report.

Performance Measures

The CAHPS Dental Survey yielded eight measures that include four global rating measures, three composite measures, and one individual item measure. The global rating measures reflect overall experience with regular dentists, dental care, ease of finding a dentist, and the dental plan. The composite measures are sets of questions grouped together to assess different aspects of dental care (e.g., *Care from Dentists and Staff* and *Access to Dental Care*). The individual item measure is an individual question that looks at whether the member would recommend the dental plan.

Figure 2-1 lists the measures included in the survey.

Figure 2-1—CAHPS Dental Survey Measures

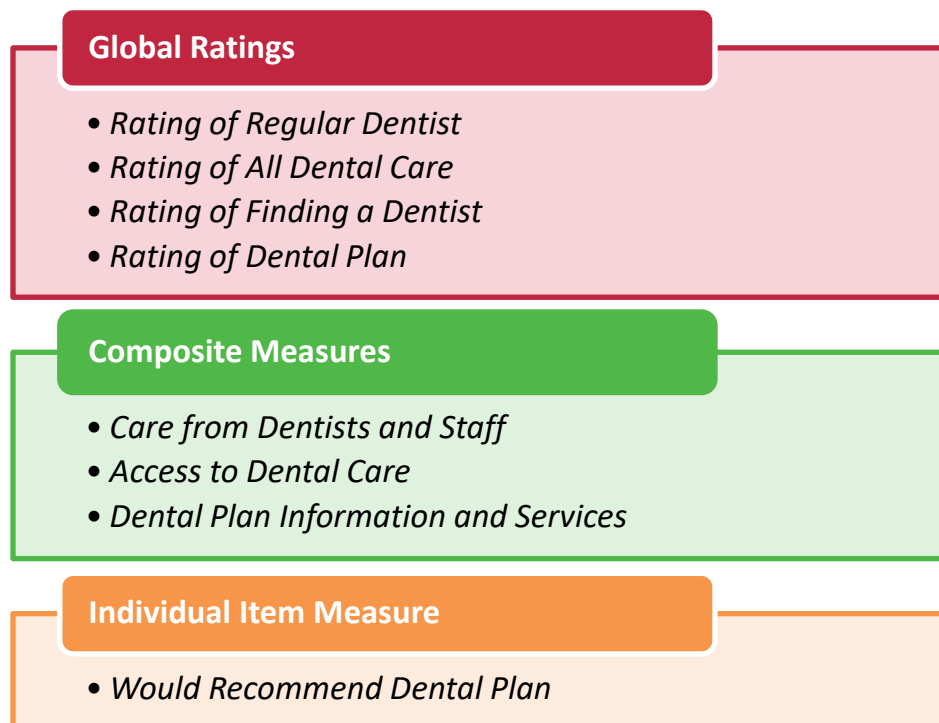


Table 2-1 presents the survey language and response options for each measure. Please note that the CAHPS Dental Survey has questions that are gate items that include skip-pattern instructions that instruct each respondent to skip specific questions if they are not receiving certain services, which results in fewer responses. The measures that are affected by these gate items are noted below.

Table 2-1—Question Language and Response Categories

Question Language	Response Categories
Global Ratings	
<i>Rating of Regular Dentist</i> ²⁻¹	
10. Using any number from 0 to 10, where 0 is the worst regular dentist possible and 10 is the best regular dentist possible, what number would you use to rate your regular dentist?	0–10 Scale
<i>Rating of All Dental Care</i>	
18. Using any number from 0 to 10, where 0 is the worst dental care possible and 10 is the best dental care possible, what number would you use to rate all of the dental care you personally received in the last 12 months?	0–10 Scale
<i>Rating of Finding a Dentist</i> ²⁻²	
25. Using any number from 0 to 10, where 0 is extremely difficult and 10 is extremely easy, what number would you use to rate how easy it was for you to find a dentist?	0–10 Scale
<i>Rating of Dental Plan</i>	
29. Using any number from 0 to 10, where 0 is the worst dental plan possible and 10 is the best dental plan possible, what number would you use to rate your dental plan?	0–10 Scale
Composite Measures	
<i>Care from Dentists and Staff</i> ²⁻³	
6. In the last 12 months, how often did your regular dentist explain things in a way that was easy to understand?	Never, Sometimes, Usually, Always
7. In the last 12 months, how often did your regular dentist listen carefully to you?	Never, Sometimes, Usually, Always
8. In the last 12 months, how often did your regular dentist treat you with courtesy and respect?	Never, Sometimes, Usually, Always

²⁻¹ For *Rating of Regular Dentist*, the gate questions ask respondents if they have a regular dentist and if they have seen their regular dentist in the last 12 months. If respondents answer “No” to these questions, they are directed to skip the question that comprises the *Rating of Regular Dentist* measure.

²⁻² For *Rating of Finding a Dentist*, the gate question asks respondents if they used any information from the dental plan to help them find a new dentist in the last 12 months. If respondents answer “No” to this question, they are directed to skip the question that comprises the *Rating Finding a Dentist* measure.

²⁻³ For *Care from Dentists and Staff*, the gate questions ask respondents if they have a regular dentist and if they have seen their regular dentist in the last 12 months. If respondents answer “No” to these questions, they are directed to skip questions that collectively comprise the *Care from Dentists and Staff* measure.

Question Language	Response Categories
9. In the last 12 months, how often did your regular dentist spend enough time with you?	Never, Sometimes, Usually, Always
11. In the last 12 months, how often did the dentists or dental staff do everything they could to help you feel as comfortable as possible during your dental work?	Never, Sometimes, Usually, Always
12. In the last 12 months, how often did the dentists or dental staff explain what they were doing while treating you?	Never, Sometimes, Usually, Always
Composite Measures	
<i>Access to Dental Care</i>	
13. In the last 12 months, how often were your dental appointments as soon as you wanted?	Never, Sometimes, Usually, Always
14. If you needed to see a dentist right away because of a dental emergency in the last 12 months, did you get to see a dentist as soon as you wanted?	Definitely Yes, Somewhat Yes, Somewhat No, Definitely No ²⁻⁴
15. If you tried to get an appointment for yourself with a dentist who specializes in a particular type of dental care (such as root canals or gum disease) in the last 12 months, how often did you get an appointment as soon as you wanted?	Never, Sometimes, Usually, Always ²⁻⁵
16. In the last 12 months, how often did you have to spend more than 15 minutes in the waiting room before you saw someone for your appointment? ²⁻⁶	Never, Sometimes, Usually, Always ²⁻⁷
17. If you had to spend more than 15 minutes in the waiting room before you saw someone for your appointment, how often did someone tell you why there was a delay or how long the delay would be?	Never, Sometimes, Usually, Always
<i>Dental Plan Information and Services</i> ²⁻⁸	
19. In the last 12 months, how often did your dental plan cover all of the services you thought were covered?	Never, Sometimes, Usually, Always
20. In the last 12 months, did your dental plan cover what you and your family needed to get done?	Definitely Yes, Somewhat Yes, Somewhat No, Definitely No

²⁻⁴ “I did not have a dental emergency in the last 12 months” was also a valid response option for this question. However, this response option is not assessed as part of this question (i.e., this response is treated as missing data).

²⁻⁵ “I did not try to get an appointment with a specialist dentist for myself in the last 12 months” was also a valid response option for this question. However, this response option is not assessed as part of this question (i.e., this response is treated as missing data).

²⁻⁶ For *Access to Dental Care*, if respondents answer “Never” to this gate question (i.e., question 16), they are directed to skip one of the questions that collectively comprise the *Access to Dental Care* measure.

²⁻⁷ The response option scale was reversed so responses of “Sometimes/Never” were considered top-box scores.

²⁻⁸ For *Dental Plan Information and Services*, the gate questions ask respondents if they tried finding out how their dental plan works by calling their 800 number, visiting their website, or reading printed materials; if they used any information from their dental plan to help them find a new dentist; and if they tried to get information or help from their dental plan’s customer service in the last 12 months. If respondents answer “No” to these questions, they are directed to skip the questions that collectively comprise the *Dental Plan Information and Services* measure.

Question Language	Response Categories
22. In the last 12 months, how often did the 800 number, written materials, or website provide the information you wanted?	Never, Sometimes, Usually, Always
24. Did this information (from your dental plan) help you find a dentist that you were happy with?	Definitely Yes, Somewhat Yes, Somewhat No, Definitely No
27. In the last 12 months, how often did your dental plan's customer service give you the information or help you needed?	Never, Sometimes, Usually, Always
28. In the last 12 months, how often did your dental plan's customer service staff treat you with courtesy and respect?	Never, Sometimes, Usually, Always
Individual Item Measure	
<i>Would Recommend Dental Plan</i>	
30. Would you recommend this dental plan to people who want to join?	Definitely Yes, Probably Yes, Probably No, Definitely No

How Survey Results Were Collected

Sampling Procedures

MDHHS provided HSAG with a list of all eligible adult members in the HMP Program for the sampling frame. HSAG inspected the records to check for any apparent problems with the files, such as missing address elements. HSAG sampled adult members who met the following criteria:

- Were 19 years or older as of September 30, 2023.
- Were currently enrolled in an MHP.
- Were enrolled continuously in the MHP during the last 12 months of the measurement period (October 1, 2022, to September 30, 2023).²⁻⁹
- Had a paid or denied dental claim during the measurement year.

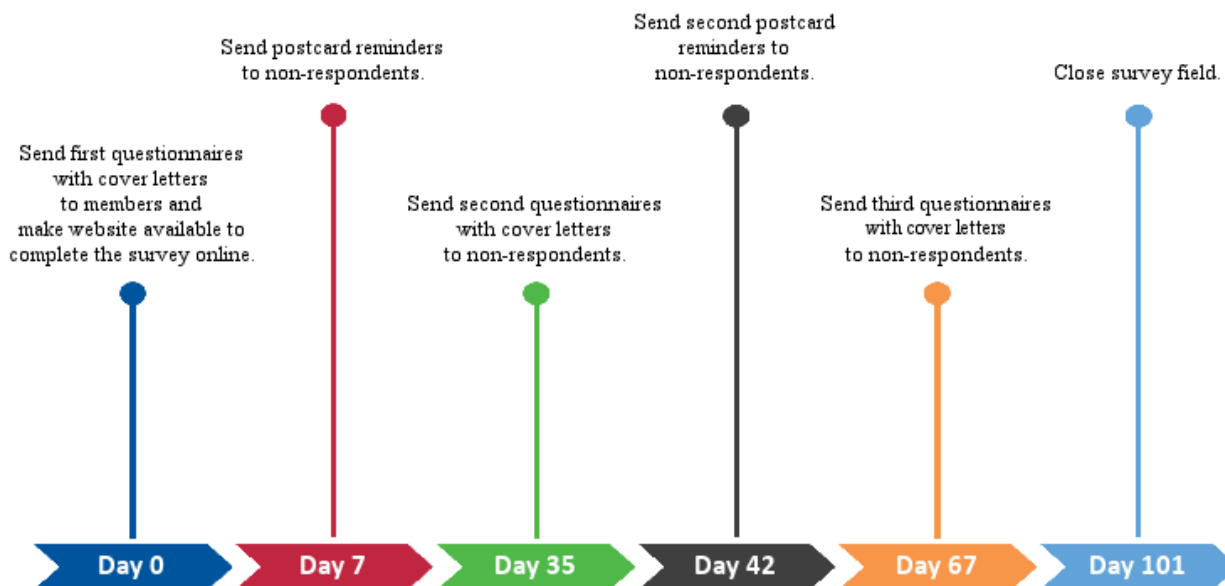
A sample of 1,350 members was selected from each MHP for inclusion in the survey. No more than one member per household was selected as part of the survey samples. HSAG tried to obtain new addresses for members selected for the sample by processing sampled members' addresses through the United States Postal Service's National Change of Address (NCOA) system.

²⁻⁹ To determine continuous enrollment, no more than one gap in the enrollment period of up to 45 days, or for a member for whom enrollment is verified monthly, up to a one-month gap in the enrollment period was allowed.

Survey Protocol

The survey administration protocol employed was a mixed-mode methodology, which allowed for two methods by which adult members could complete a survey: (1) mail or (2) Internet. A cover letter that was mailed to adult members provided them the option to (1) complete the paper-based survey in English and return it using the pre-addressed, postage-paid return envelope; or (2) complete the web-based survey in English or Spanish via a link and username or quick response (QR) code. Non-respondents received a reminder postcard, followed by a second survey mailing and reminder postcard. Finally, a third survey mailing was sent to all non-respondents. The survey administration started in December 2023, and the survey field remained open until closing in April 2024. Figure 2-2 shows the timeline used for the survey administration.

Figure 2-2—CAHPS Dental Survey Timeline



How Survey Results Were Calculated

HSAG developed a scoring approach, based in part on scoring standards devised by the Agency for Healthcare Research and Quality (AHRQ), the sponsor of CAHPS, to comprehensively assess member experience. In addition to individual plan results, HSAG combined results from the MHPs to calculate an HMP Program score. This section provides an overview of each analysis.

Who Responded to the Survey

The response rate was defined as the total number of completed surveys divided by all eligible members of the sample. HSAG considered a survey completed if at least one question was answered. Eligible members included the entire sample minus ineligible members. Ineligible members met at least one of the following criteria: they were deceased, were invalid (did not meet the eligible population criteria on page 2-4), were mentally or physically incapacitated, or had a language barrier (the survey was made available in both English and Spanish).

$$\text{Response Rate} = \frac{\text{Number of Completed Surveys}}{\text{Sample} - \text{Ineligibles}}$$

Respondent Analysis

HSAG evaluated the demographic characteristics (i.e., age, gender, race, and ethnicity) of members as part of the respondent analysis. HSAG performed a *t* test to determine whether the demographic characteristics of members who responded to the survey (i.e., respondent percentages) were statistically significantly different from the demographic characteristics of all members in the sample frame (i.e., sample frame percentages). A difference was considered statistically significant if the two-sided *p* value of the *t* test was less than 0.05. The two-sided *p* value of the *t* test is the probability of observing a test statistic as extreme as or more extreme than the one actually observed by chance. Respondent percentages within a particular demographic category that were statistically significantly higher or lower than the sample frame percentages are noted with black arrows in the tables. MDHHS should exercise caution when extrapolating the survey results to the entire population if the respondent population differs significantly from the actual population of the plan or program.

Demographics of Respondents

The demographics analysis evaluated demographic information of adult members based on responses to the survey. The demographic characteristics of adults included age, gender, race, ethnicity, education level, and dental health status.

Scoring Calculations

HSAG calculated top-box scores by assigning top-box responses a score of one, with all other responses receiving a score of zero. A “top-box” response was defined as follows:

- “9” or “10” for the global ratings.
- “Usually/Always,” “Probably Yes/Definitely Yes,” or “Somewhat Yes/Definitely Yes” for the composite measures and individual item measure.

The exception to this was Question 16 in the *Access to Dental Care* composite measure, where the response option scale was reversed so responses of “Sometimes/Never” were considered top-box responses.

Weighting

HSAG calculated a weighted HMP Program score based on the total eligible population for each MHP. The HMP Program includes the results from the nine MHPs.

MHP Comparisons

The results of the MHPs were compared to the HMP Program to determine if the results were statistically significantly different. Two types of hypothesis tests were applied to these results. First, a global F test was calculated, which determined whether the difference between MHP scores was significant. If the F test demonstrated MHP-level differences (i.e., p value < 0.05), then a t test was performed for each MHP. The t test determined whether each MHP's score was statistically significantly different from the HMP Program. This analytic approach follows AHRQ's recommended methodology for identifying significant plan-level performance differences. Statistically significant differences were noted using colors in the figures. Green bars indicate a score that was statistically significantly higher than the HMP Program. Conversely, red bars indicate a score that was statistically significantly lower than the HMP Program. Blue bars represent scores that were not statistically significantly different from the HMP Program.

Trend Analysis

HSAG performed a t test to determine whether results in 2024 were statistically significantly different from results in 2023 and 2022. A difference was considered statistically significant if the two-sided p value of the t test was less than 0.05. The two-sided p value of the t test is the probability of observing by chance a test statistic as extreme as or more extreme than the value actually observed by chance under the assumption of no difference between years.

Scores that were statistically significantly higher in 2024 than in 2023 or 2022 are noted with black upward (▲) triangles. Scores that were statistically significantly lower in 2024 than in 2023 or 2022 are noted with black downward (▼) triangles. Scores in 2024 that were not statistically significantly different from scores in 2023 or 2022 are noted with a dash (—).

Key Drivers of Member Experience Analysis

HSAG performed an analysis of key drivers of member experience for the following three measures: *Rating of All Dental Care*, *Rating of Dental Plan*, and *Would Recommend Dental Plan*. The purpose of the key drivers of member experience analysis is to help decision makers identify specific aspects of care that will most benefit from quality improvement activities.

Table 2-2 depicts the survey items (i.e., questions) that were analyzed for each measure in the key drivers of member experience analysis as indicated by a checkmark (✓), as well as each survey item's baseline response that was used in the statistical calculation.

Table 2-2—Potential Key Drivers

Question Number	Rating of All Dental Care	Rating of Dental Plan	Would Recommend Dental Plan	Baseline Response
Q6. Dentist explained things in understandable way	✓	✓	✓	Always
Q7. Dentist listened carefully to you	✓	✓	✓	Always
Q8. Dentist treated you with courtesy and respect	✓	✓	✓	Always
Q9. Dentist spent enough time with you	✓	✓	✓	Always
Q11. Dentist or dental staff did everything they could to help you feel comfortable during dental work	✓	✓	✓	Always
Q12. Dentist or dental staff explained what they were doing while treating you	✓	✓	✓	Always
Q13. Received dental appointments as soon as wanted	✓	✓	✓	Always
Q14. Got to see dentist as soon as wanted because of dental emergency	✓	✓	✓	Definitely Yes
Q15. Got appointment with dentist who specializes in particular type of dental care as soon as wanted	✓	✓	✓	Always
Q16. Spent more than 15 minutes in waiting room before appointment	✓	✓	✓	Never
Q17. Someone explained delay for spending more than 15 minutes in waiting room before appointment	✓	✓	✓	Always
Q19. Dental plan covered all services you thought were covered		✓	✓	Always
Q20. Dental plan covered what you and your family needed to get done		✓	✓	Definitely Yes

Question Number	Rating of All Dental Care	Rating of Dental Plan	Would Recommend Dental Plan	Baseline Response
Q22. 800 number, written materials, or website provided you with wanted information		✓	✓	Always
Q24. Information helped find dentist you are happy with		✓	✓	Definitely Yes
Q27. Dental plan's customer service staff gave you the information or help needed		✓	✓	Always
Q28. Dental plan's customer service staff treated you with courtesy and respect		✓	✓	Always

HSAG assessed each measure's performance by assigning the responses into a three-point scale as follows:

- 0 to 6/Definitely No = 1 (Dissatisfied)
- 7 to 8/Probably Yes or Probably No = 2 (Neutral)
- 9 to 10/Definitely Yes = 3 (Satisfied)

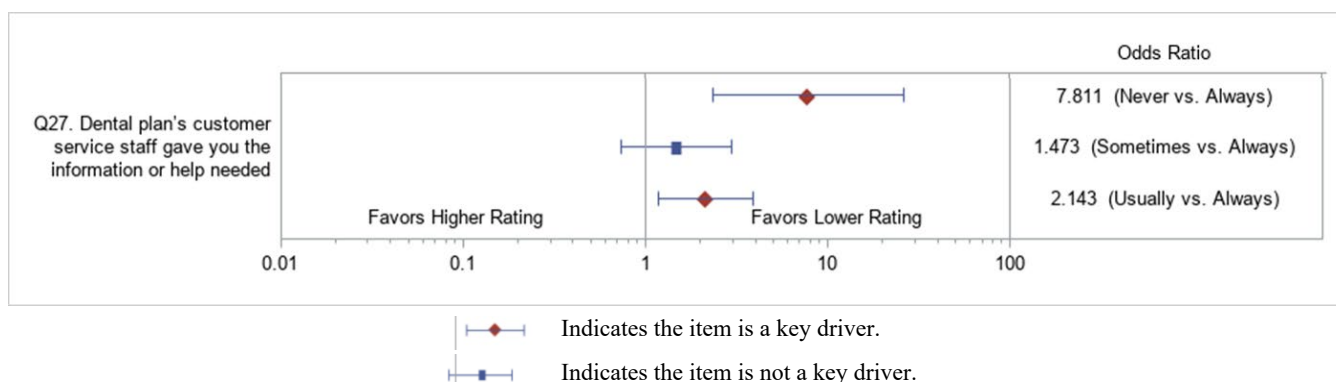
For each item evaluated, HSAG calculated the relationship between the item's response and performance on each of the three measures using a polychoric correlation, which is used to estimate the correlation between two theorized normally distributed continuous latent variables, from two observed ordinal variables. HSAG then prioritized items based on their correlation to each measure.

The correlation can range from -1 to 1, with negative values indicating an inverse relationship between overall member experience and a particular survey item. However, the correlation analysis conducted is not focused on the direction of the correlation, but rather on the degree of correlation. Therefore, the absolute value of correlation is used in the analysis, and the range is 0 to 1. A zero indicates no relationship between the response to a question and the member's experience. As the value of correlation increases, the importance of the question to the respondent's overall experience increases.

After prioritizing items based on their correlation to each measure, HSAG estimated the odds ratio, which is used to quantify respondents' tendency to choose a lower rating over a higher rating based on their responses to the evaluated items. The odds ratio can range from 0 to infinity. Key drivers are those items for which the odds ratio is statistically significantly greater than 1. If a response to an item has an odds ratio value that is statistically significantly greater than 1, then a respondent who provides a response other than the baseline (e.g., "Always") is more likely to provide a lower rating on the measure than respondents who provide the baseline response. As the odds ratio value increases, the tendency for a respondent who provides a non-baseline response to choose a lower rating increases.

In Figure 2-3, which is an example figure, the results indicate that respondents who answered "Never," "Sometimes," or "Usually" to Question 27 are 7.811, 1.473, or 2.143 times, respectively, more likely to provide a lower rating for their dental plan than respondents who answered "Always." The items identified as key drivers are indicated with a red diamond.

Figure 2-3—Key Drivers of Member Experience: Rating of Dental Plan



Limitations and Cautions

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

Causal Inferences

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

Lack of National Data for Comparisons

Currently AHRQ does not collect survey results from the CAHPS Dental Survey; therefore, national benchmark data were not available for comparisons.

Non-Response Bias

The experiences of the survey respondent population may be different than that of non-respondents with respect to their dental care services and may vary by plan or program. 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.²⁻¹⁰ To identify potential non-response bias, HSAG compared the top-box scores from late respondents to early respondents (i.e., respondents who submitted a survey during the first mailing/round) for each measure. Results indicate that early

²⁻¹⁰ Korkeila, K., et al. “Non-response and related factors in a nation-wide health survey.” *European journal of epidemiology* 17.11 (2001): 991-999.

respondents are statistically significantly more likely to provide a higher top-box response for the following measures: *Access to Dental Care* (2023, 2024), *Care from Dentists and Staff* (2023, 2024), *Dental Plan Information and Services* (2023, 2024), and *Rating of All Dental Care* (2023, 2024). MDHHS should consider that potential non-response bias exists when interpreting CAHPS Dental Survey results.

Who Responded to the Survey

Table 3-1 shows the total number of members sampled, the number of surveys completed, the number of ineligible members, and the response rates. For additional information on the calculation of response rates, please refer to page 2-5 of the Reader’s Guide section.

Table 3-1—Total Number of Respondents and Response Rates

Program/Plan Name	Sample Size	Completes	Ineligibles	Response Rate
HMP Program	12,150	2,426	114	20.16%
Aetna Better Health of Michigan	1,350	183	8	13.64%
Blue Cross Complete of Michigan	1,350	273	18	20.50%
HAP CareSource	1,350	209	8	15.57%
McLaren Health Plan	1,350	300	13	22.44%
Meridian Health Plan of Michigan	1,350	267	13	19.97%
Molina Healthcare of Michigan	1,350	240	9	17.90%
Priority Health Choice	1,350	288	10	21.49%
UnitedHealthcare Community Plan	1,350	271	10	20.22%
Upper Peninsula Health Plan	1,350	395	25	29.81%

Respondent Analysis

HSAG compared the demographic characteristics of member survey respondents (i.e., respondent percentage) to the demographic characteristics of all members in the sample frame (i.e., sample frame percentage) for statistically significant differences. The demographic characteristics evaluated as part of the respondent analysis included age, gender, race, and ethnicity. Table 3-2 through Table 3-5 present the results of the respondent analysis. Respondent percentages within a particular demographic category that were statistically significantly higher or lower than the sample frame percentages are noted with black arrows in the tables. Please note that variables from the sample frame were used as the data source for this analysis; therefore, these results will differ from those presented in the demographics subsection, which use responses from the survey as the data source. MDHHS should exercise caution when extrapolating the CAHPS Dental Survey results to the entire population if the average characteristics of respondents differ significantly from the plan or program population as a whole. For additional information on the respondent analysis, please refer to page 2-6 of the Reader’s Guide section.

Table 3-2—Respondent Analysis: Age

Program/Plan Name		19 to 24	25 to 34	35 to 44	45 to 54	55 or older
HMP Program	R	7.05%↓	14.01%↓	16.69%↓	24.07%↑	38.17%↑
	SF	14.30%	27.35%	21.16%	19.31%	17.88%
Aetna Better Health of Michigan	R	6.56%↓	14.75%↓	16.39%	24.04%	38.25%↑
	SF	15.46%	29.58%	20.24%	19.53%	15.19%
Blue Cross Complete of Michigan	R	7.33%↓	13.55%↓	16.12%	25.27%↑	37.73%↑
	SF	12.09%	29.23%	19.87%	19.58%	19.24%
HAP CareSource	R	6.70%↓	14.83%↓	15.79%	16.75%	45.93%↑
	SF	12.90%	30.97%	19.49%	17.63%	19.02%
McLaren Health Plan	R	8.33%↓	10.33%↓	18.33%	24.67%↑	38.33%↑
	SF	13.81%	27.31%	21.87%	19.03%	17.98%
Meridian Health Plan of Michigan	R	4.87%↓	14.98%↓	20.22%	25.47%↑	34.46%↑
	SF	13.40%	27.39%	22.44%	19.29%	17.48%
Molina Healthcare of Michigan	R	6.67%↓	13.33%↓	14.58%↓	27.92%↑	37.50%↑
	SF	17.71%	26.44%	20.27%	19.15%	16.43%
Priority Health Choice	R	8.68%↓	14.24%↓	15.28%↓	23.26%	38.54%↑
	SF	14.09%	27.17%	21.49%	18.76%	18.50%
UnitedHealthcare Community Plan	R	8.86%↓	16.24%↓	18.82%	24.35%	31.73%↑
	SF	16.82%	25.41%	20.51%	20.14%	17.12%
Upper Peninsula Health Plan	R	5.57%↓	14.43%↓	14.94%↓	23.80%	41.27%↑
	SF	12.31%	23.57%	23.22%	19.73%	21.17%

An “R” indicates respondent percentage, and an “SF” indicates sample frame percentage.
 ↑ Indicates the respondent percentage is significantly higher than the sample frame percentage.
 ↓ Indicates the respondent percentage is significantly lower than the sample frame percentage.
 Respondent percentages that are not statistically significantly different than the sample frame percentages are not noted with arrows.
 Some percentages may not total 100% due to rounding.

Table 3-3—Respondent Analysis: Gender

Program/Plan Name		Male	Female
HMP Program	R	38.71%↓	61.29%↑
	SF	42.74%	57.26%
Aetna Better Health of Michigan	R	46.99%	53.01%
	SF	49.29%	50.71%
Blue Cross Complete of Michigan	R	42.49%	57.51%
	SF	45.29%	54.71%
HAP CareSource	R	36.84%↓	63.16%↑
	SF	49.30%	50.70%
McLaren Health Plan	R	37.67%↓	62.33%↑
	SF	43.30%	56.70%

Program/Plan Name		Male	Female
Meridian Health Plan of Michigan	R	34.08%↓	65.92%↑
	SF	40.64%	59.36%
Molina Healthcare of Michigan	R	33.33%↓	66.67%↑
	SF	41.42%	58.58%
Priority Health Choice	R	40.63%	59.38%
	SF	40.88%	59.12%
UnitedHealthcare Community Plan	R	40.59%	59.41%
	SF	43.79%	56.21%
Upper Peninsula Health Plan	R	37.72%	62.28%
	SF	41.03%	58.97%

An “R” indicates respondent percentage, and an “SF” indicates sample frame percentage.
 ↑ Indicates the respondent percentage is significantly higher than the sample frame percentage.
 ↓ Indicates the respondent percentage is significantly lower than the sample frame percentage.
 Respondent percentages that are not statistically significantly different than the sample frame percentages are not noted with arrows.
 Some percentages may not total 100% due to rounding.

Table 3-4—Respondent Analysis: Race

Program/Plan Name		White	Black	Asian	Other
HMP Program	R	79.21%↑	16.09%↓	2.98%↑	1.72%↑
	SF	70.26%	26.40%	2.25%	1.10%
Aetna Better Health of Michigan	R	54.60%↑	41.72%↓	1.84%	1.84%
	SF	40.29%	57.23%	1.77%	0.71%
Blue Cross Complete of Michigan	R	69.51%↑	25.61%↓	4.07%	0.81%
	SF	60.18%	36.29%	2.49%	1.04%
HAP CareSource	R	64.09%↑	29.83%↓	3.31%	2.76%
	SF	49.71%	47.61%	1.83%	0.85%
McLaren Health Plan	R	86.59%↑	9.42%↓	2.90%	1.09%
	SF	80.06%	17.24%	1.35%	1.35%
Meridian Health Plan of Michigan	R	88.16%↑	9.39%↓	1.63%	0.82%
	SF	76.28%	20.95%	1.74%	1.04%
Molina Healthcare of Michigan	R	72.69%↑	23.61%↓	3.24%	0.46%
	SF	62.33%	33.71%	3.09%	0.86%
Priority Health Choice	R	82.13%↑	11.41%↓	5.70%↑	0.76%
	SF	73.52%	23.37%	1.89%	1.23%
UnitedHealthcare Community Plan	R	77.14%↑	16.33%↓	4.49%	2.04%
	SF	71.16%	24.15%	3.92%	0.77%

Program/Plan Name		White	Black	Asian	Other
Upper Peninsula Health Plan	R	95.24%	0.26%↓	0.53%	3.97%
	SF	95.04%	1.35%	0.44%	3.17%

An “R” indicates respondent percentage, and an “SF” indicates sample frame percentage.
 ↑ Indicates the respondent percentage is significantly higher than the sample frame percentage.
 ↓ Indicates the respondent percentage is significantly lower than the sample frame percentage.
 Respondent percentages that are not statistically significantly different than the sample frame percentages are not noted with arrows.
 Some percentages may not total 100% due to rounding.

Table 3-5—Respondent Analysis: Ethnicity

Program/Plan Name		Hispanic	Non-Hispanic
HMP Program	R	3.46%↓	96.54%↑
	SF	5.25%	94.75%
Aetna Better Health of Michigan	R	3.28%	96.72%
	SF	3.46%	96.54%
Blue Cross Complete of Michigan	R	4.76%	95.24%
	SF	4.71%	95.29%
HAP CareSource	R	4.31%	95.69%
	SF	4.26%	95.74%
McLaren Health Plan	R	3.33%↓	96.67%↑
	SF	5.47%	94.53%
Meridian Health Plan of Michigan	R	3.75%	96.25%
	SF	4.92%	95.08%
Molina Healthcare of Michigan	R	4.58%	95.42%
	SF	6.23%	93.77%
Priority Health Choice	R	2.43%↓	97.57%↑
	SF	8.06%	91.94%
UnitedHealthcare Community Plan	R	2.95%	97.05%
	SF	4.11%	95.89%
Upper Peninsula Health Plan	R	2.53%	97.47%
	SF	2.09%	97.91%

An “R” indicates respondent percentage, and an “SF” indicates sample frame percentage.
 ↑ Indicates the respondent percentage is significantly higher than the sample frame percentage.
 ↓ Indicates the respondent percentage is significantly lower than the sample frame percentage.
 Respondent percentages that are not statistically significantly different than the sample frame percentages are not noted with arrows.
 Some percentages may not total 100% due to rounding.

Demographics of Respondents

Figure 3-1 through Figure 3-6 depict the self-reported demographic characteristics of members who completed a survey. For additional information on the respondent demographics, please refer to page 2-6 of the Reader’s Guide section.

Figure 3-1—Respondent Demographics: Age

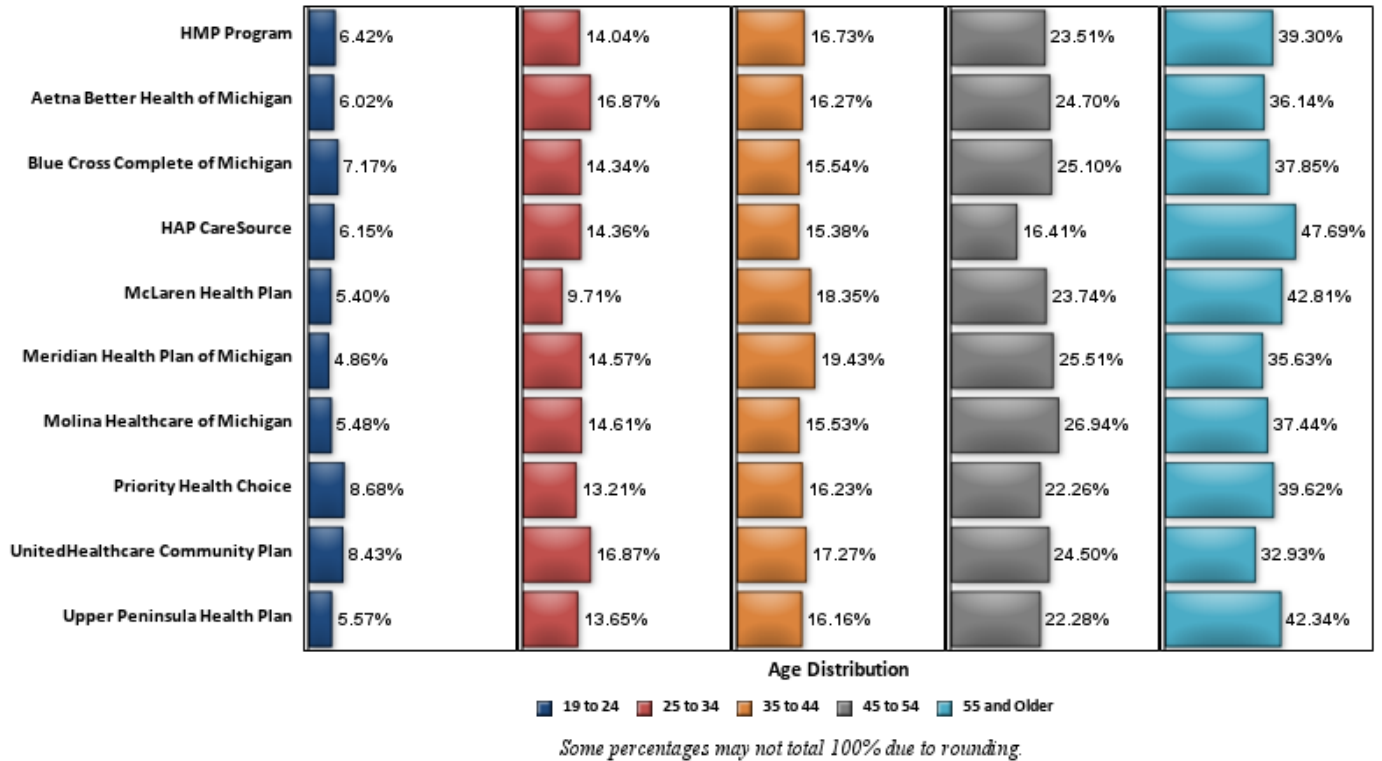
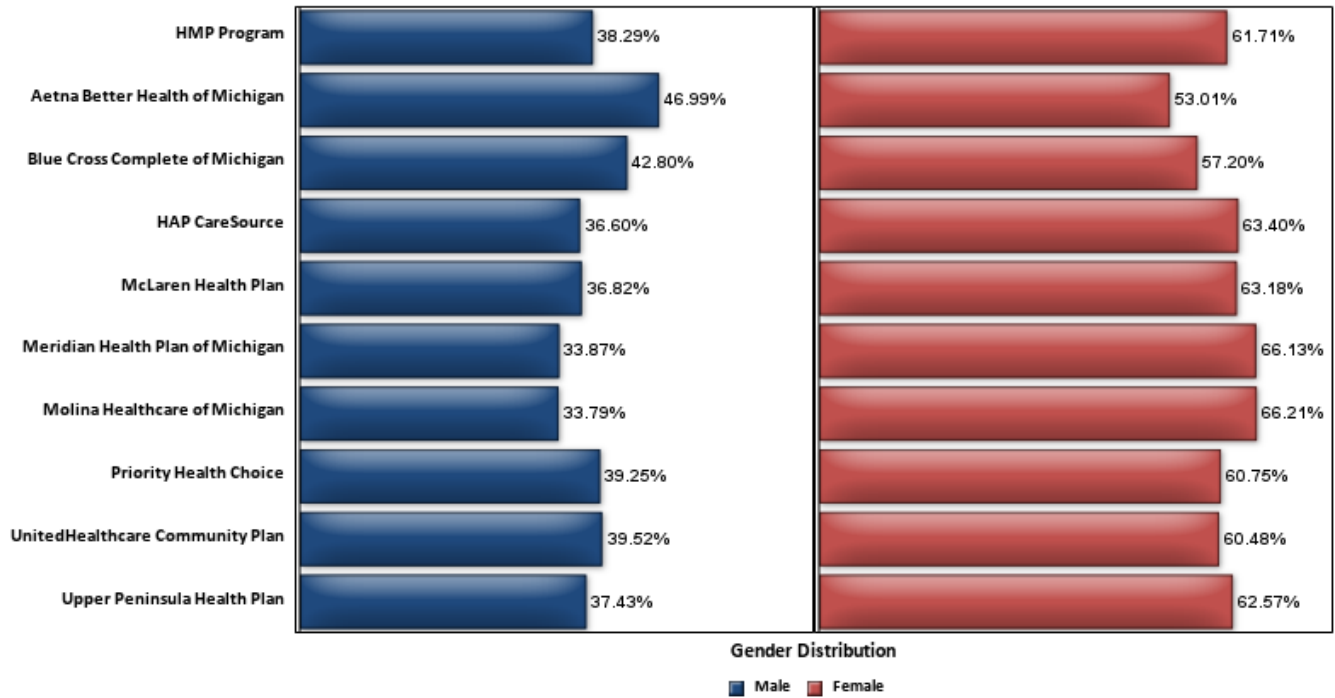
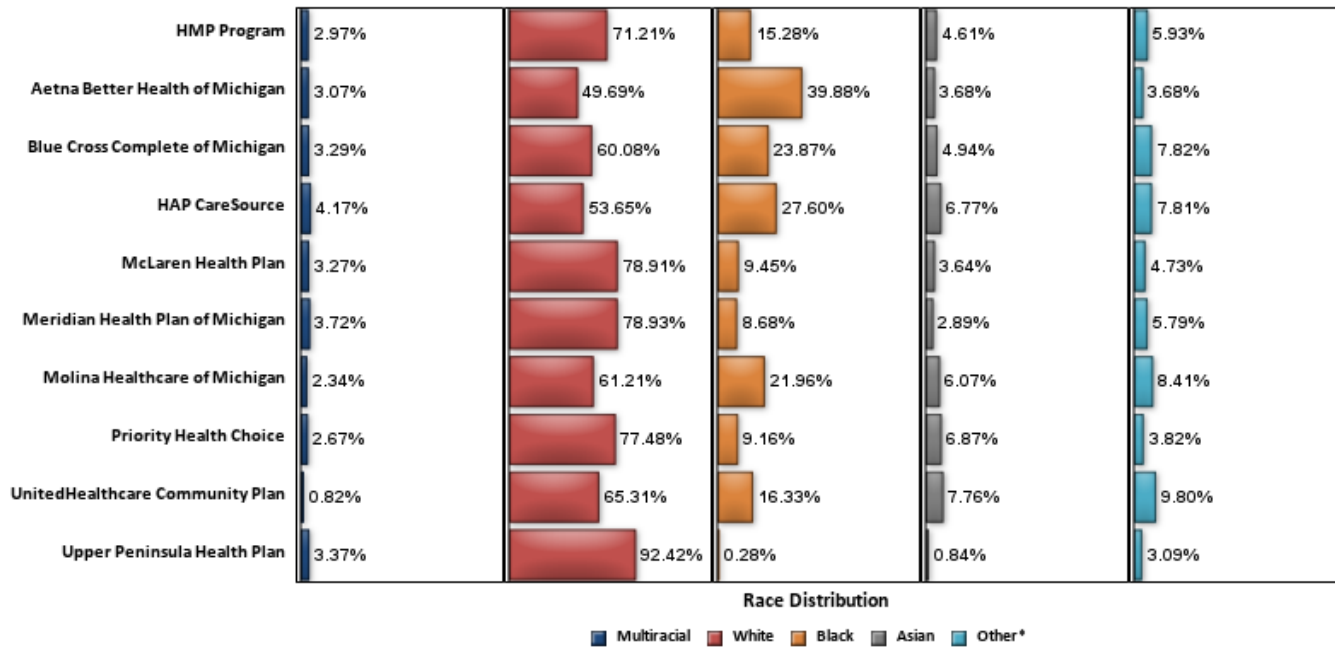


Figure 3-2—Respondent Demographics: Gender



Some percentages may not total 100% due to rounding.

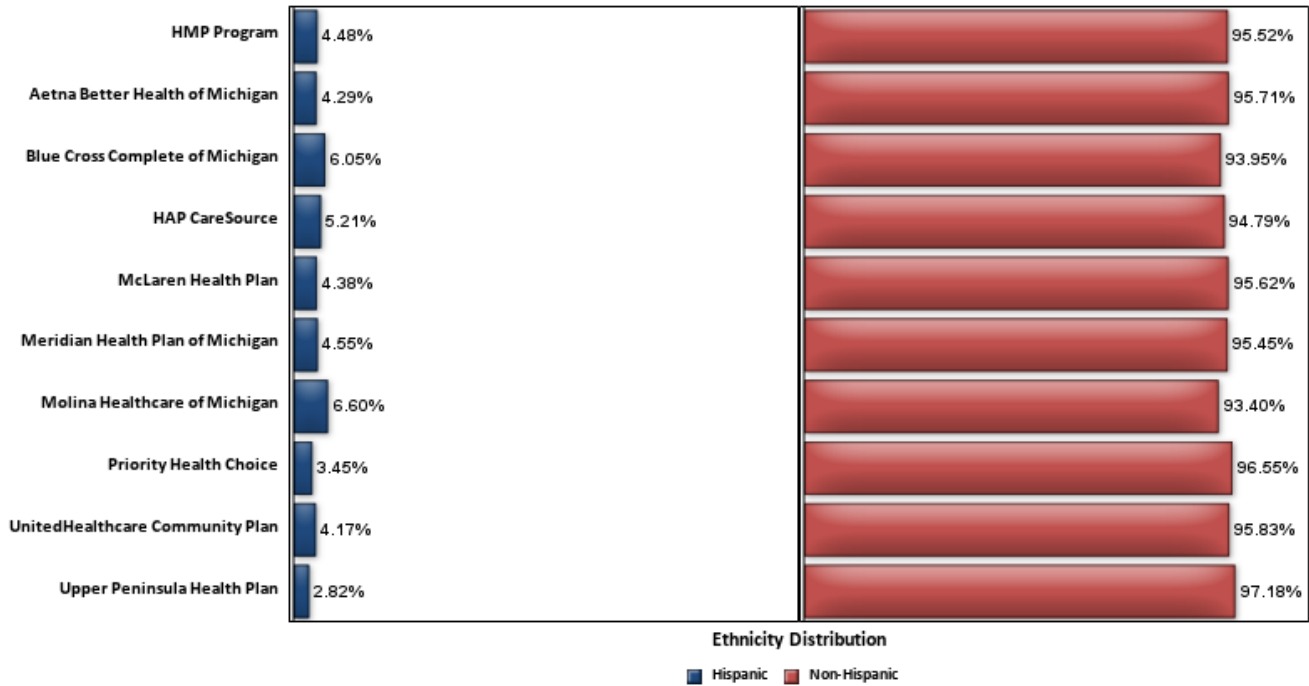
Figure 3-3—Respondent Demographics: Race



Some percentages may not total 100% due to rounding.

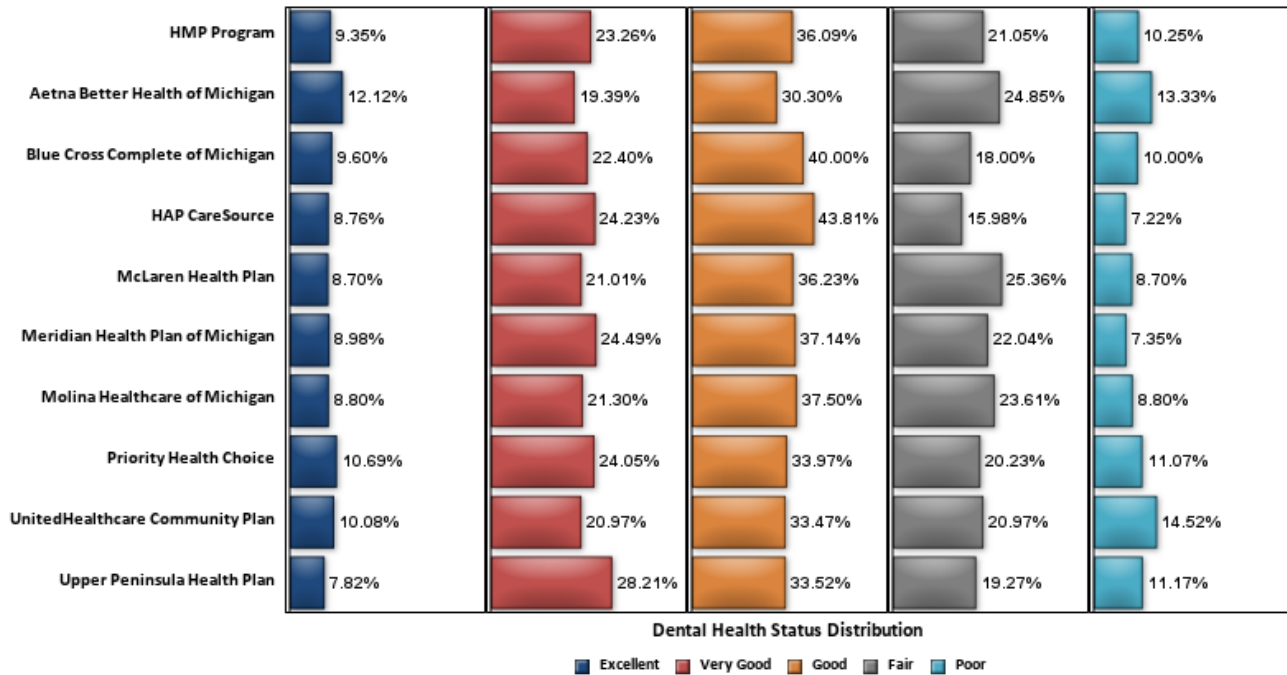
**The "Other" race category includes responses of Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and Other.*

Figure 3-4—Respondent Demographics: Ethnicity



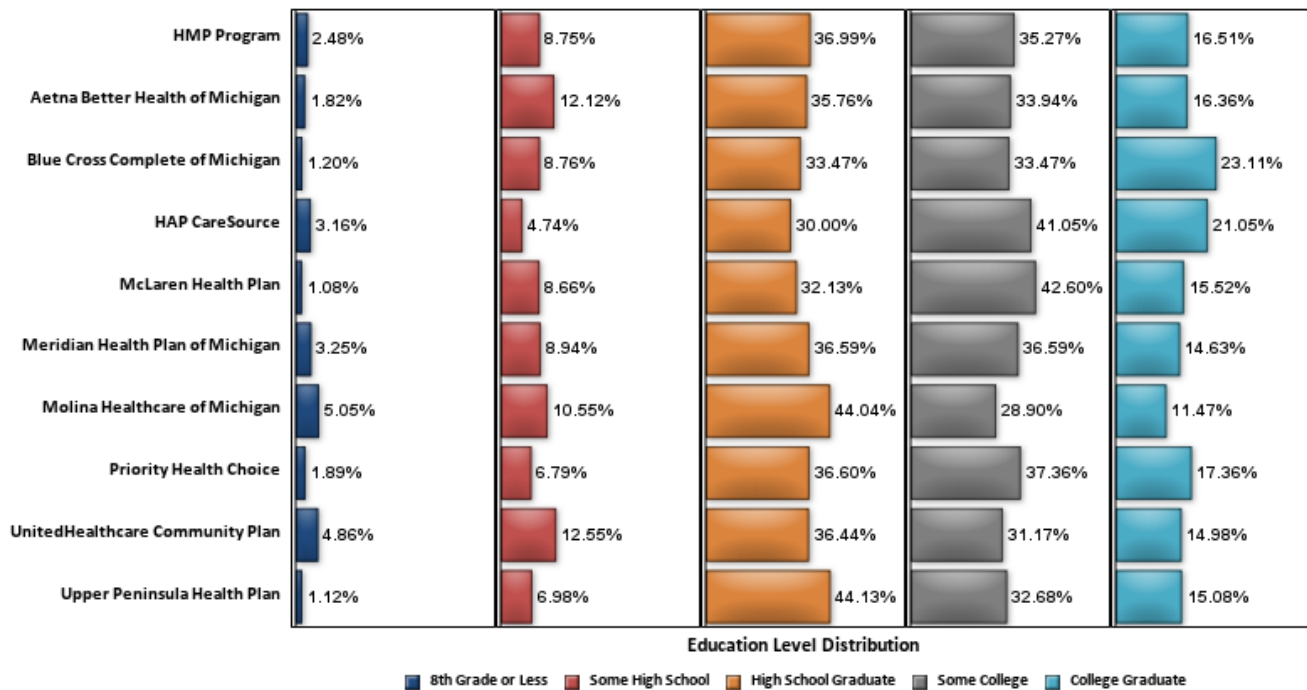
Some percentages may not total 100% due to rounding.

Figure 3-5—Respondent Demographics: Dental Health Status



Some percentages may not total 100% due to rounding.

Figure 3-6—Respondent Demographics: Education Level



Some percentages may not total 100% due to rounding.

MHP Comparisons

For purposes of the MHP Comparisons analysis, HSAG calculated top-box scores for each measure. For additional information on the MHP comparisons, please refer to page 2-7 of the Reader’s Guide section. For additional information on the survey language and response options for the measures, please refer to page 2-2 of the Reader’s Guide section.

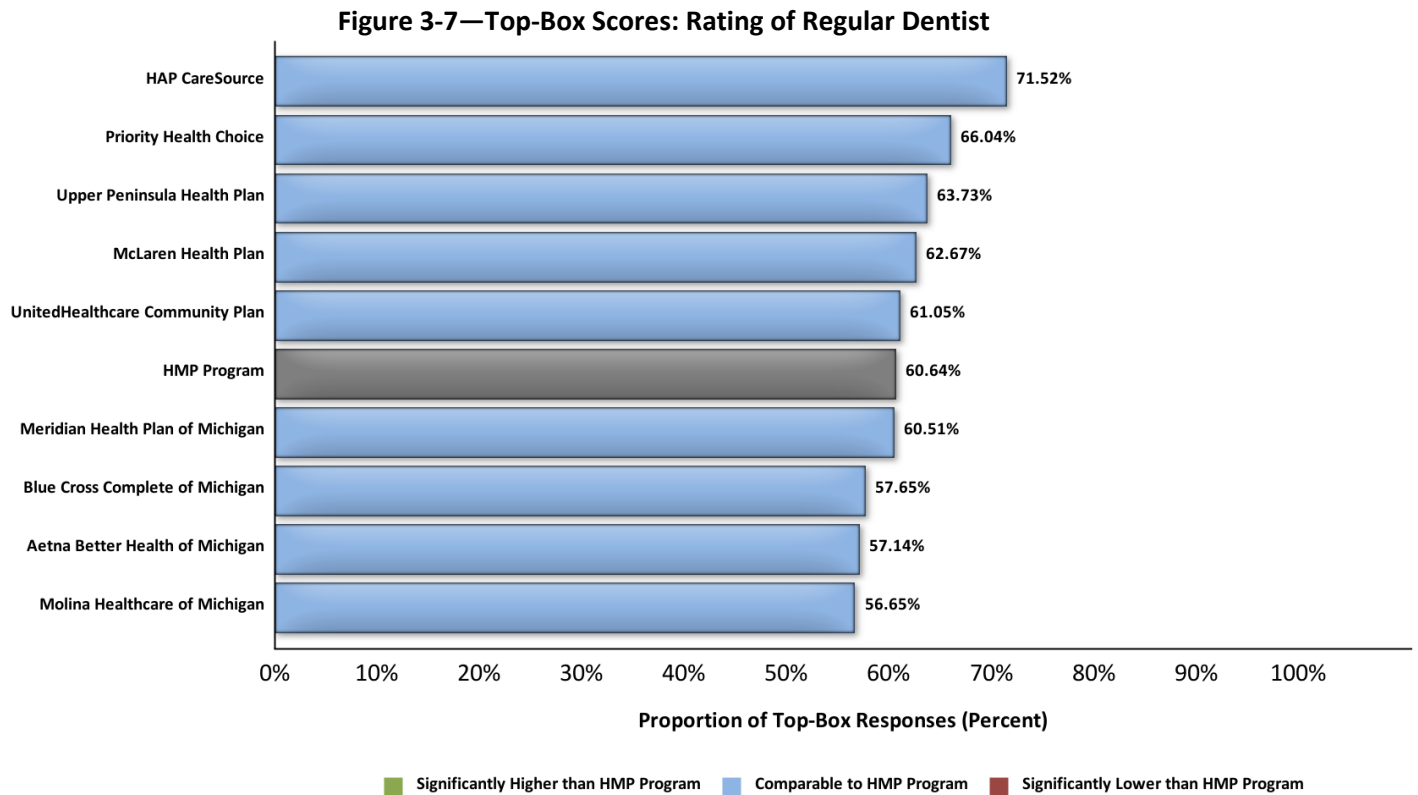
The HMP Program results were weighted based on the eligible population for each MHP. HSAG compared the MHP results to the HMP Program to determine if the MHP results were statistically significantly different than the HMP Program. Colors in the figures note statistically significant differences. MHP scores with fewer than 100 respondents are denoted with a cross (+). Caution should be used when evaluating scores derived from fewer than 100 respondents.

In some instances, the top-box scores presented for two MHPs may be similar, but one was statistically significantly different from the HMP Program and the other was not. In these instances, it was the difference in the number of respondents between the two plans that explains the different statistical results. It is more likely that a significant result will be found in a plan with a larger number of respondents.

Global Ratings

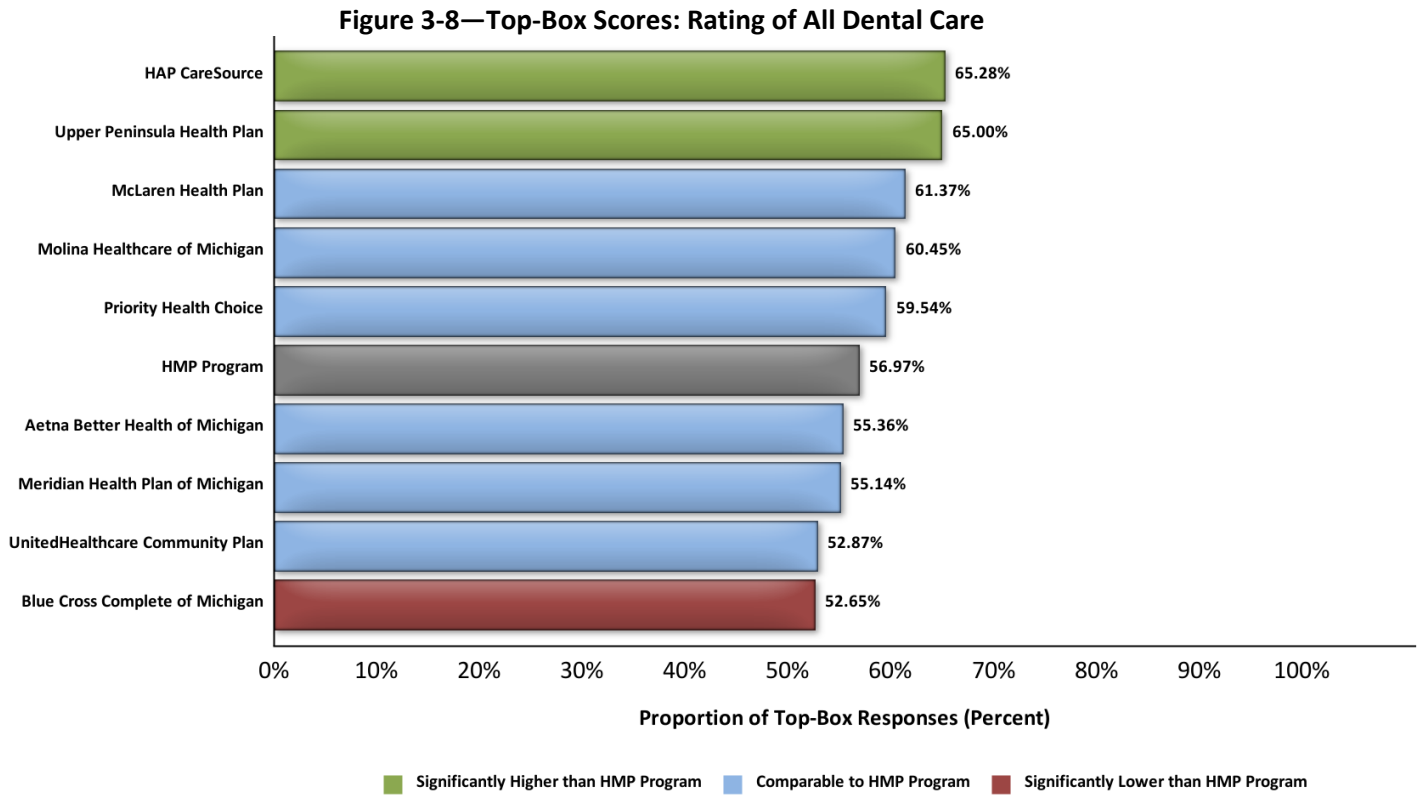
Rating of Regular Dentist

Figure 3-7 shows the *Rating of Regular Dentist* top-box scores.



Rating of All Dental Care

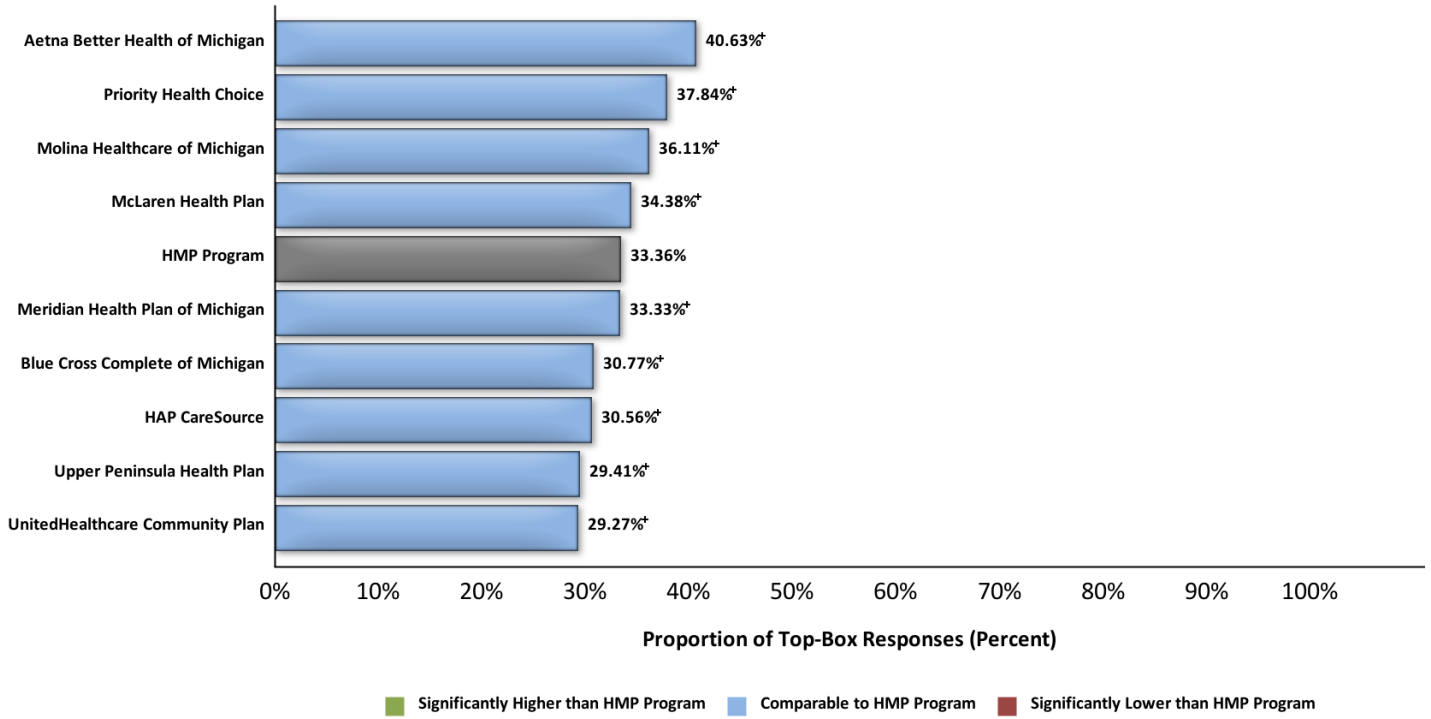
Figure 3-8 shows the *Rating of All Dental Care* top-box scores.



Rating of Finding a Dentist

Figure 3-9 shows the *Rating of Finding a Dentist* top-box scores.

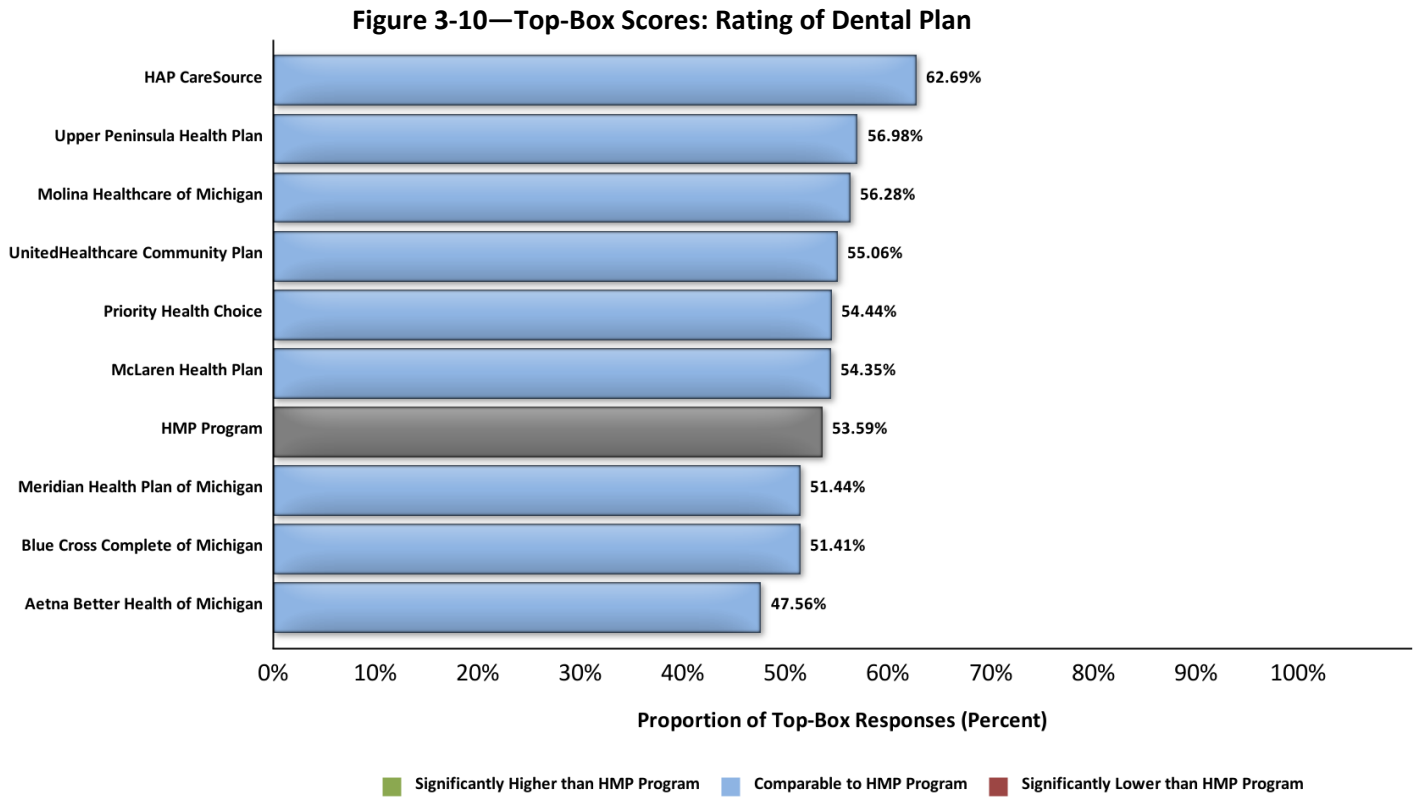
Figure 3-9—Top-Box Scores: Rating of Finding a Dentist



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

Rating of Dental Plan

Figure 3-10 shows the *Rating of Dental Plan* top-box scores.

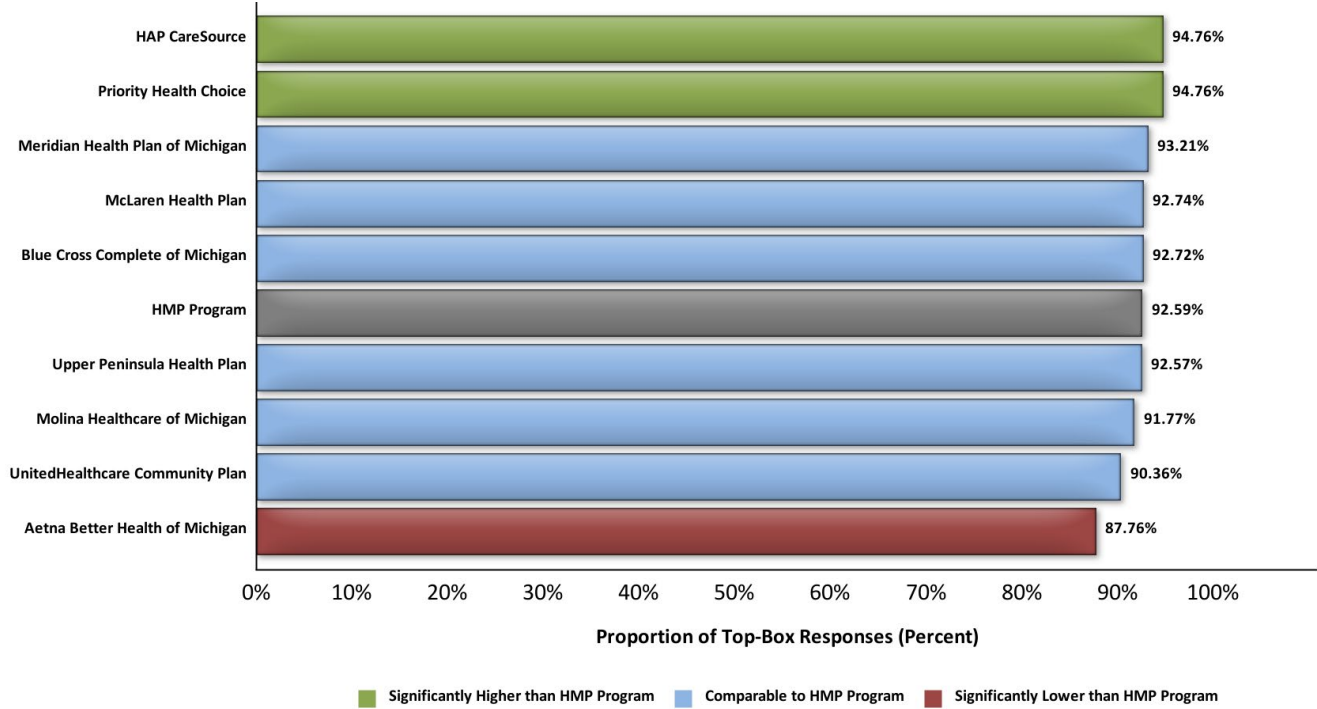


Composite Measures

Care from Dentists and Staff

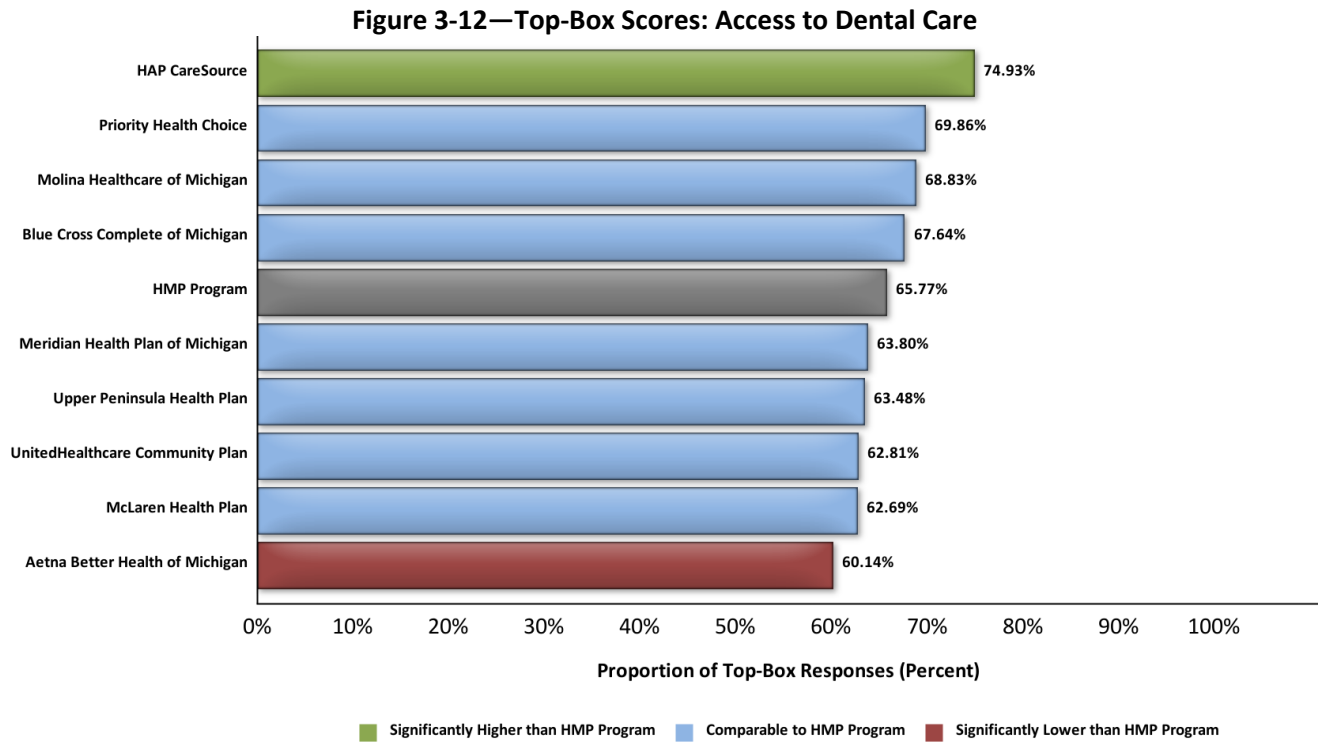
Figure 3-11 shows the *Care from Dentists and Staff* top-box scores.

Figure 3-11—Top-Box Scores: Care from Dentists and Staff



Access to Dental Care

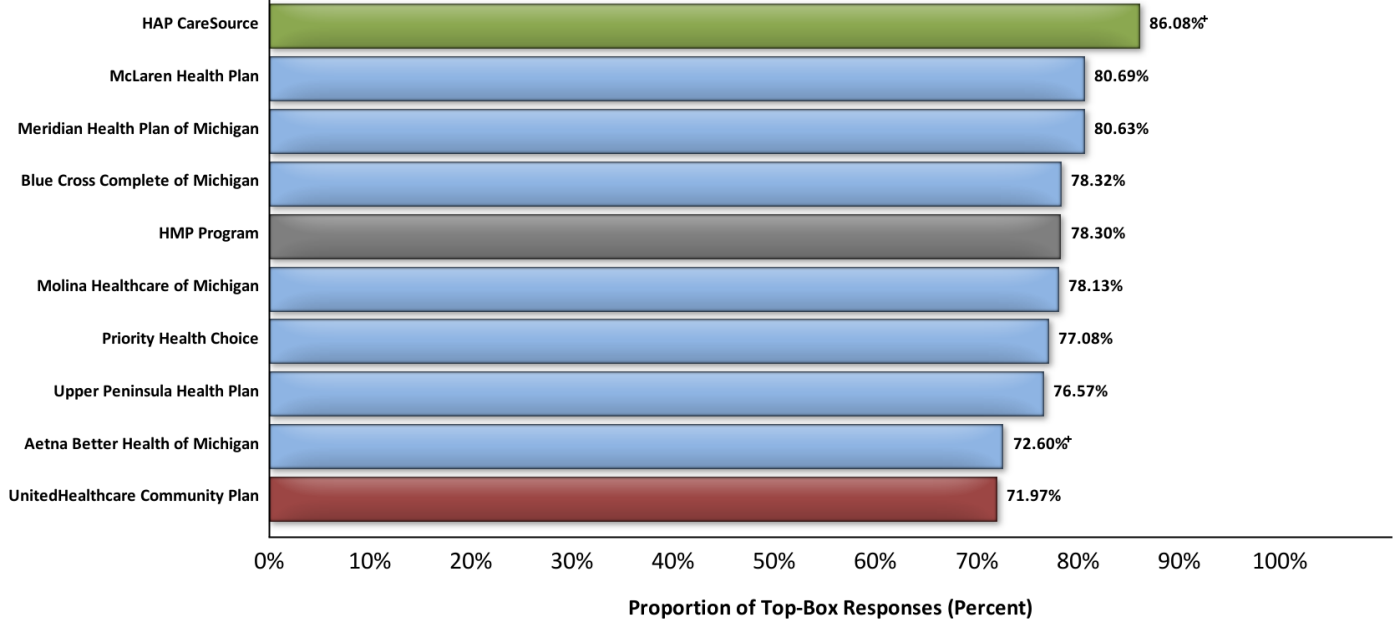
Figure 3-12 shows the *Access to Dental Care* top-box scores.



Dental Plan Information and Services

Figure 3-13 shows the *Dental Plan Information and Services* top-box scores.

Figure 3-13—Top-Box Scores: Dental Plan Information and Services



■ Significantly Higher than HMP Program ■ Comparable to HMP Program ■ Significantly Lower than HMP Program

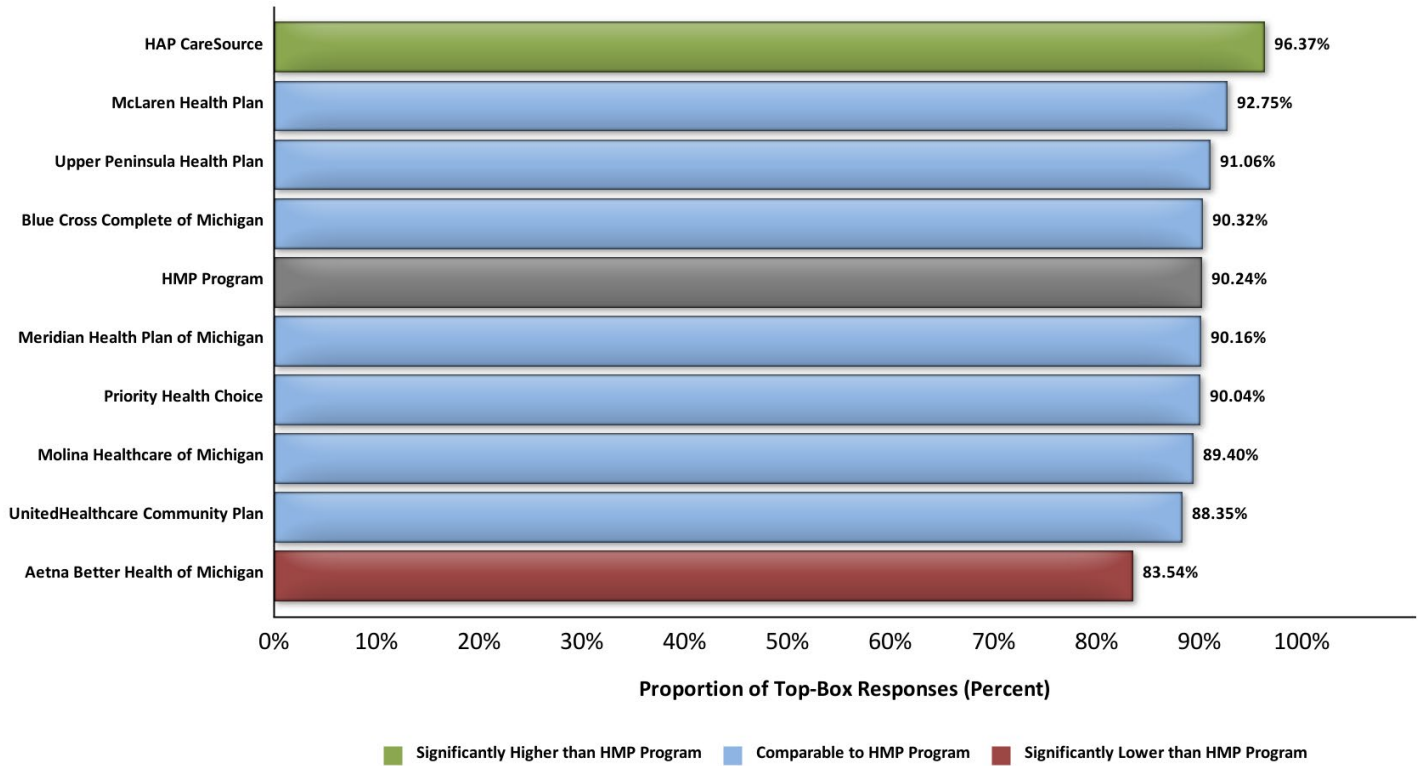
+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

Individual Item Measure

Would Recommend Dental Plan

Figure 3-14 shows the *Would Recommend Dental Plan* top-box scores.

Figure 3-14—Top-Box Scores: Would Recommend Dental Plan



4. Trend Analysis

A total of 2,660, 2,423, and 2,426 surveys were completed by members enrolled in the HMP Program in 2022, 2023, and 2024, respectively. The results from the 2022, 2023, and 2024 completed CAHPS Dental Surveys were used to perform the trend analysis presented in this section.⁴⁻¹ The 2024 scores were compared to the 2023 and 2022 scores to determine whether there were statistically significant differences. Statistically significant results are noted with triangles. Scores with fewer than 100 respondents are denoted with a cross (+). Caution should be used when evaluating scores derived from fewer than 100 respondents. For more detailed information regarding this analysis, please refer to page 2-7 of the Reader’s Guide section.

Global Ratings

Rating of Regular Dentist

Table 4-1 shows the 2022, 2023, and 2024 top-box scores and trend results for *Rating of Regular Dentist*.

Table 4-1—Trend Analysis: Rating of Regular Dentist

Program/Plan Name	2022	2023	2024	Trend Results (2024 Compared to 2022)	Trend Results (2024 Compared to 2023)
HMP Program	59.30%	62.84%	60.64%	—	—
Aetna Better Health of Michigan	70.34%	62.26%	57.14%	▼	—
Blue Cross Complete of Michigan	53.41%	60.95%	57.65%	—	—
HAP CareSource	61.98%	70.80%	71.52%	—	—
McLaren Health Plan	61.04%	58.29%	62.67%	—	—
Meridian Health Plan of Michigan	63.24%	70.79%	60.51%	—	▼
Molina Healthcare of Michigan	53.01%	59.75%	56.65%	—	—
Priority Health Choice	68.37%	60.10%	66.04%	—	—
UnitedHealthcare Community Plan	54.43%	56.65%	61.05%	—	—
Upper Peninsula Health Plan	66.35%	66.47%	63.73%	—	—

▲ Indicates the 2024 score is statistically significantly higher than the trend year.
▼ Indicates the 2024 score is statistically significantly lower than the trend year.
— Indicates the 2024 score is not statistically significantly different than the trend year.

⁴⁻¹ HSAG recalculated the 2022 and 2023 top-box scores to report scores out to two decimal places. Therefore, the 2022 and 2023 results in this report will not match the previous reports.

Rating of All Dental Care

Table 4-2 shows the 2022, 2023, and 2024 top-box scores and trend results for *Rating of All Dental Care*.

Table 4-2—Trend Analysis: Rating of All Dental Care

Program/Plan Name	2022	2023	2024	Trend Results (2024 Compared to 2022)	Trend Results (2024 Compared to 2023)
HMP Program	57.16%	59.34%	56.97%	—	—
Aetna Better Health of Michigan	61.25%	55.40%	55.36%	—	—
Blue Cross Complete of Michigan	51.30%	60.63%	52.65%	—	—
HAP CareSource	66.47%	69.57%	65.28%	—	—
McLaren Health Plan	56.21%	59.27%	61.37%	—	—
Meridian Health Plan of Michigan	61.89%	59.39%	55.14%	—	—
Molina Healthcare of Michigan	51.71%	57.48%	60.45%	—	—
Priority Health Choice	64.43%	62.59%	59.54%	—	—
UnitedHealthcare Community Plan	54.35%	53.60%	52.87%	—	—
Upper Peninsula Health Plan	68.56%	66.83%	65.00%	—	—
<p>▲ Indicates the 2024 score is statistically significantly higher than the trend year. ▼ Indicates the 2024 score is statistically significantly lower than the trend year. — Indicates the 2024 score is not statistically significantly different than the trend year.</p>					

Rating of Finding a Dentist

Table 4-3 shows the 2022, 2023, and 2024 top-box scores and trend results for *Rating of Finding a Dentist*.

Table 4-3—Trend Analysis: Rating of Finding a Dentist

Program/Plan Name	2022	2023	2024	Trend Results (2024 Compared to 2022)	Trend Results (2024 Compared to 2023)
HMP Program	34.71%	34.89%	33.36%	—	—
Aetna Better Health of Michigan	40.00% ⁺	21.74% ⁺	40.63% ⁺	—	—
Blue Cross Complete of Michigan	26.67% ⁺	39.02% ⁺	30.77% ⁺	—	—
HAP CareSource	55.56% ⁺	29.63% ⁺	30.56% ⁺	▼	—
McLaren Health Plan	32.50% ⁺	27.27% ⁺	34.38% ⁺	—	—
Meridian Health Plan of Michigan	41.46% ⁺	42.86% ⁺	33.33% ⁺	—	—
Molina Healthcare of Michigan	25.81% ⁺	28.00% ⁺	36.11% ⁺	—	—
Priority Health Choice	28.57% ⁺	31.82% ⁺	37.84% ⁺	—	—
UnitedHealthcare Community Plan	44.12% ⁺	35.14% ⁺	29.27% ⁺	—	—
Upper Peninsula Health Plan	43.33% ⁺	28.95% ⁺	29.41% ⁺	—	—
<p>⁺ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results. [▲] Indicates the 2024 score is statistically significantly higher than the trend year. [▼] Indicates the 2024 score is statistically significantly lower than the trend year. — Indicates the 2024 score is not statistically significantly different than the trend year.</p>					

Rating of Dental Plan

Table 4-4 shows the 2022, 2023, and 2024 top-box scores and trend results for *Rating of Dental Plan*.

Table 4-4—Trend Analysis: Rating of Dental Plan

Program/Plan Name	2022	2023	2024	Trend Results (2024 Compared to 2022)	Trend Results (2024 Compared to 2023)
HMP Program	46.57%	48.11%	53.59%	▲	▲
Aetna Better Health of Michigan	49.69%	42.75%	47.56%	—	—
Blue Cross Complete of Michigan	41.05%	44.29%	51.41%	▲	—
HAP CareSource	55.62%	49.72%	62.69%	—	▲
McLaren Health Plan	53.59%	48.18%	54.35%	—	—
Meridian Health Plan of Michigan	47.13%	49.81%	51.44%	—	—
Molina Healthcare of Michigan	41.30%	47.66%	56.28%	▲	—
Priority Health Choice	52.01%	47.79%	54.44%	—	—
UnitedHealthcare Community Plan	43.53%	48.88%	55.06%	▲	—
Upper Peninsula Health Plan	62.38%	58.47%	56.98%	—	—
▲ Indicates the 2024 score is statistically significantly higher than the trend year. ▼ Indicates the 2024 score is statistically significantly lower than the trend year. — Indicates the 2024 score is not statistically significantly different than the trend year.					

Composite Measures

Care from Dentists and Staff

Table 4-5 shows the 2022, 2023, and 2024 top-box scores and trend results for the *Care from Dentists and Staff* composite measure.

Table 4-5—Trend Analysis: Care from Dentists and Staff

Program/Plan Name	2022	2023	2024	Trend Results (2024 Compared to 2022)	Trend Results (2024 Compared to 2023)
HMP Program	92.89%	92.79%	92.59%	—	—
Aetna Better Health of Michigan	94.63%	93.89%	87.76%	▼	▼
Blue Cross Complete of Michigan	90.42%	92.84%	92.72%	—	—
HAP CareSource	93.34%	96.19%	94.76%	—	—
McLaren Health Plan	93.49%	91.68%	92.74%	—	—
Meridian Health Plan of Michigan	95.04%	93.76%	93.21%	—	—
Molina Healthcare of Michigan	90.66%	92.55%	91.77%	—	—
Priority Health Choice	95.85%	93.19%	94.76%	—	—
UnitedHealthcare Community Plan	91.41%	89.93%	90.36%	—	—
Upper Peninsula Health Plan	95.19%	96.45%	92.57%	—	▼
<p>▲ Indicates the 2024 score is statistically significantly higher than the trend year. ▼ Indicates the 2024 score is statistically significantly lower than the trend year. — Indicates the 2024 score is not statistically significantly different than the trend year.</p>					

Access to Dental Care

Table 4-6 shows the 2022, 2023, and 2024 top-box scores and trend results for the *Access to Dental Care* composite measure.

Table 4-6—Trend Analysis: Access to Dental Care

Program/Plan Name	2022	2023	2024	Trend Results (2024 Compared to 2022)	Trend Results (2024 Compared to 2023)
HMP Program	67.20%	66.67%	65.77%	—	—
Aetna Better Health of Michigan	70.78%	67.17% ⁺	60.14%	▼	—
Blue Cross Complete of Michigan	61.80%	70.13%	67.64%	—	—
HAP CareSource	73.99%	74.17%	74.93%	—	—
McLaren Health Plan	66.98%	61.76%	62.69%	—	—
Meridian Health Plan of Michigan	71.18%	66.76%	63.80%	▼	—
Molina Healthcare of Michigan	65.94%	63.69%	68.83%	—	—
Priority Health Choice	68.33%	69.33%	69.86%	—	—
UnitedHealthcare Community Plan	64.83%	66.00%	62.81%	—	—
Upper Peninsula Health Plan	73.48%	69.76%	63.48%	▼	▼

+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.
 ▲ Indicates the 2024 score is statistically significantly higher than the trend year.
 ▼ Indicates the 2024 score is statistically significantly lower than the trend year.
 — Indicates the 2024 score is not statistically significantly different than the trend year.

Dental Plan Information and Services

Table 4-7 shows the 2022, 2023, and 2024 top-box scores and trend results for the *Dental Plan Information and Services* composite measure.

Table 4-7—Trend Analysis: Dental Plan Information and Services

Program/Plan Name	2022	2023	2024	Trend Results (2024 Compared to 2022)	Trend Results (2024 Compared to 2023)
HMP Program	74.14%	73.21%	78.30%	—	▲
Aetna Better Health of Michigan	70.54% ⁺	70.06% ⁺	72.60% ⁺	—	—
Blue Cross Complete of Michigan	69.06%	76.76%	78.32%	▲	—
HAP CareSource	72.06% ⁺	80.88% ⁺	86.08% ⁺	▲	—
McLaren Health Plan	71.77%	69.38%	80.69%	▲	▲
Meridian Health Plan of Michigan	77.99%	73.53%	80.63%	—	—
Molina Healthcare of Michigan	76.86%	73.24% ⁺	78.13%	—	—
Priority Health Choice	70.00%	71.87%	77.08%	—	—
UnitedHealthcare Community Plan	74.60%	70.02% ⁺	71.97%	—	—
Upper Peninsula Health Plan	79.94%	80.93%	76.57%	—	—

⁺ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.
 ▲ Indicates the 2024 score is statistically significantly higher than the trend year.
 ▼ Indicates the 2024 score is statistically significantly lower than the trend year.
 — Indicates the 2024 score is not statistically significantly different than the trend year.

Individual Item Measure

Would Recommend Dental Plan

Table 4-8 shows the 2022, 2023, and 2024 top-box scores and trend results for the *Would Recommend Dental Plan* individual item measure.

Table 4-8—Trend Analysis: Would Recommend Dental Plan

Program/Plan Name	2022	2023	2024	Trend Results (2024 Compared to 2022)	Trend Results (2024 Compared to 2023)
HMP Program	85.40%	85.79%	90.24%	▲	▲
Aetna Better Health of Michigan	85.71%	80.58%	83.54%	—	—
Blue Cross Complete of Michigan	82.53%	87.61%	90.32%	▲	—
HAP CareSource	85.21%	85.87%	96.37%	▲	▲
McLaren Health Plan	90.10%	86.45%	92.75%	—	▲
Meridian Health Plan of Michigan	86.54%	85.27%	90.16%	—	—
Molina Healthcare of Michigan	79.57%	84.43%	89.40%	▲	—
Priority Health Choice	85.42%	86.25%	90.04%	—	—
UnitedHealthcare Community Plan	85.78%	83.26%	88.35%	—	—
Upper Peninsula Health Plan	93.07%	94.26%	91.06%	—	—

▲ Indicates the 2024 score is statistically significantly higher than the trend year.
▼ Indicates the 2024 score is statistically significantly lower than the trend year.
— Indicates the 2024 score is not statistically significantly different than the trend year.

5. Key Drivers of Member Experience Analysis

HSAG performed an analysis of key drivers of member experience for the following measures: *Rating of All Dental Care*, *Rating of Dental Plan*, and *Would Recommend Dental Plan*. Key drivers of member experience are defined as those items for which the odds ratio is statistically significantly greater than 1. For additional information on the statistical calculation, please refer to page 2-8 of the Reader’s Guide section.

Figure 5-1 through Figure 5-3 depict the results of the analysis for the HMP Program. The items identified as key drivers are indicated with a red diamond.

Figure 5-1—Key Drivers of Member Experience: Rating of All Dental Care—HMP Program

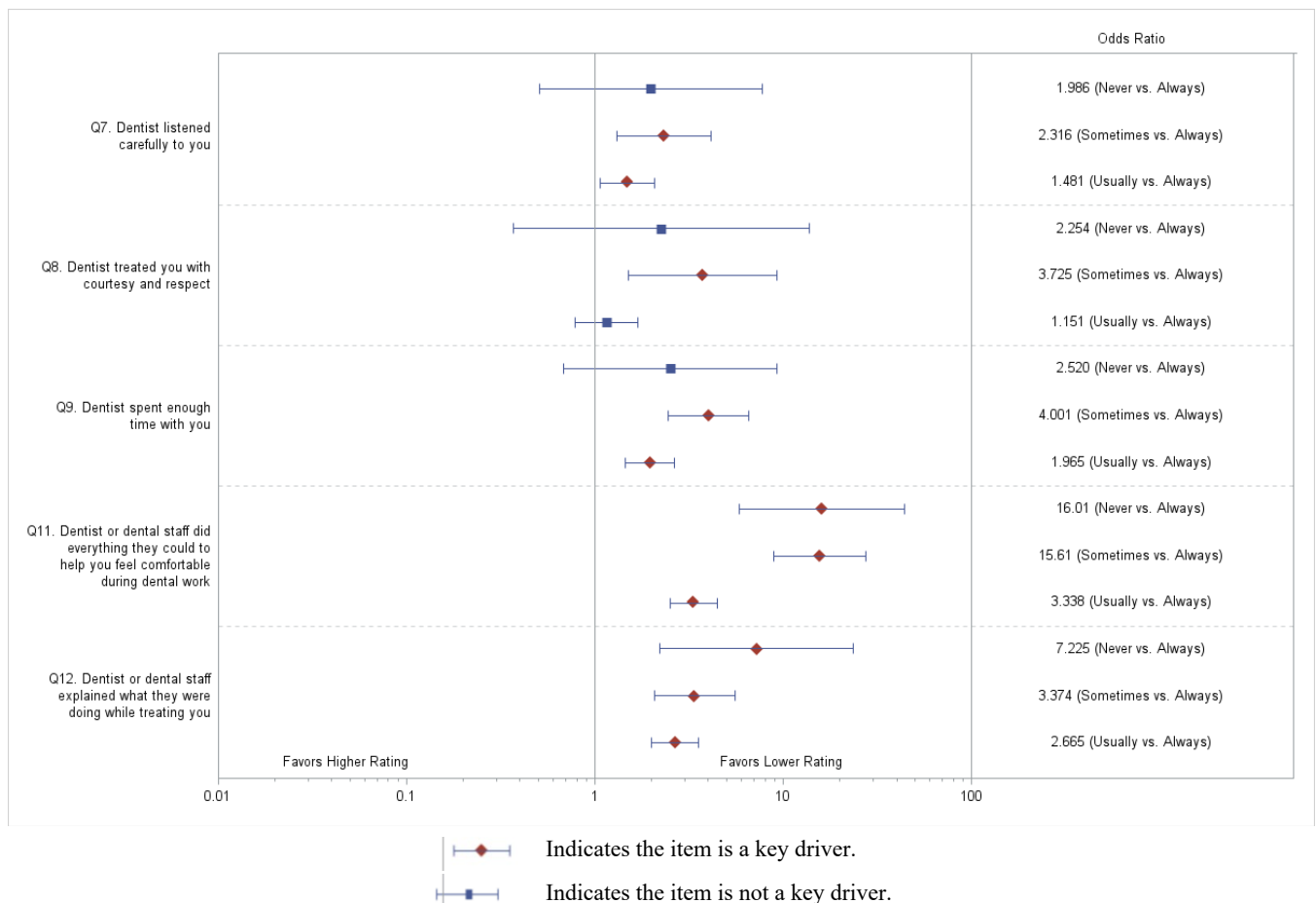
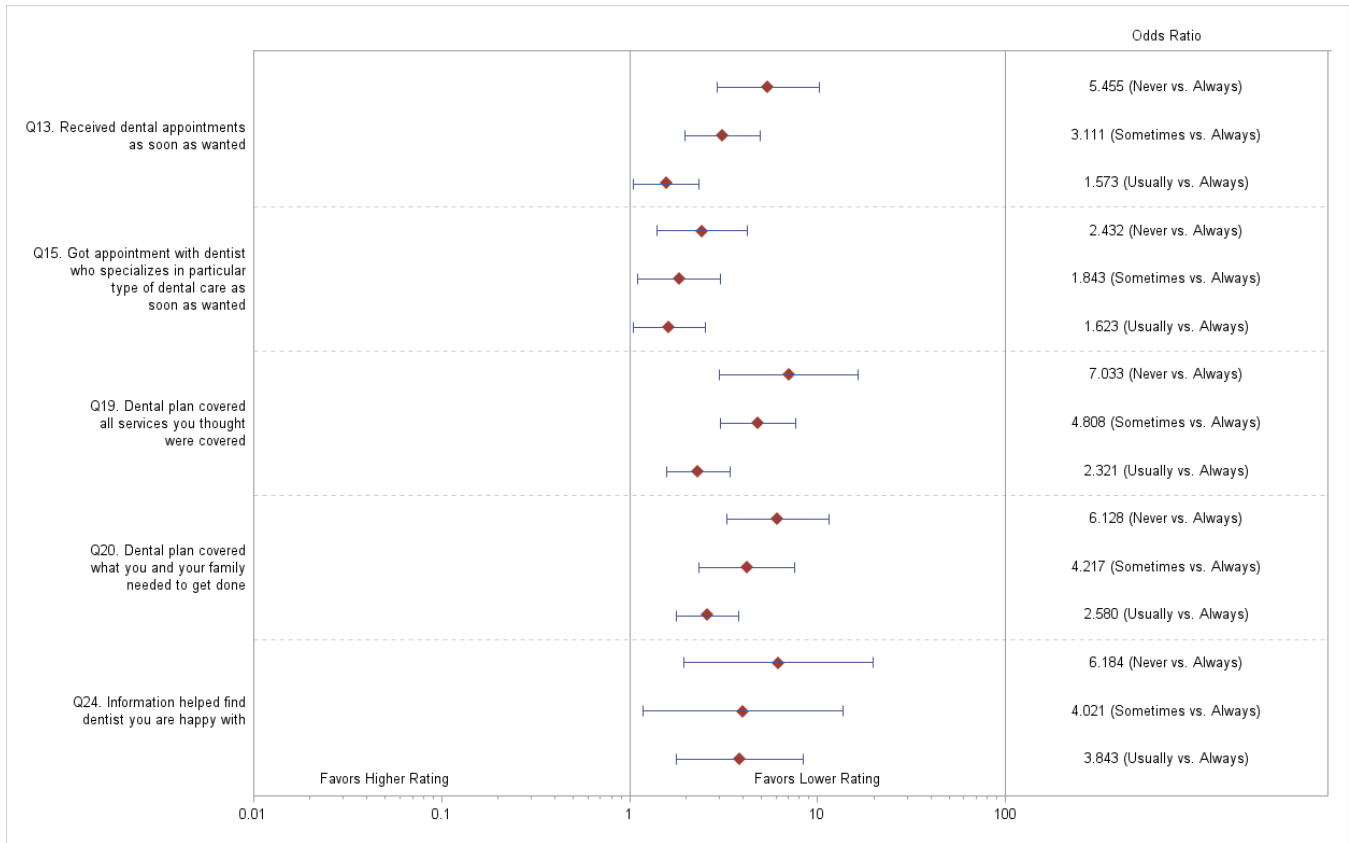


Figure 5-2—Key Drivers of Member Experience: Rating of Dental Plan—HMP Program





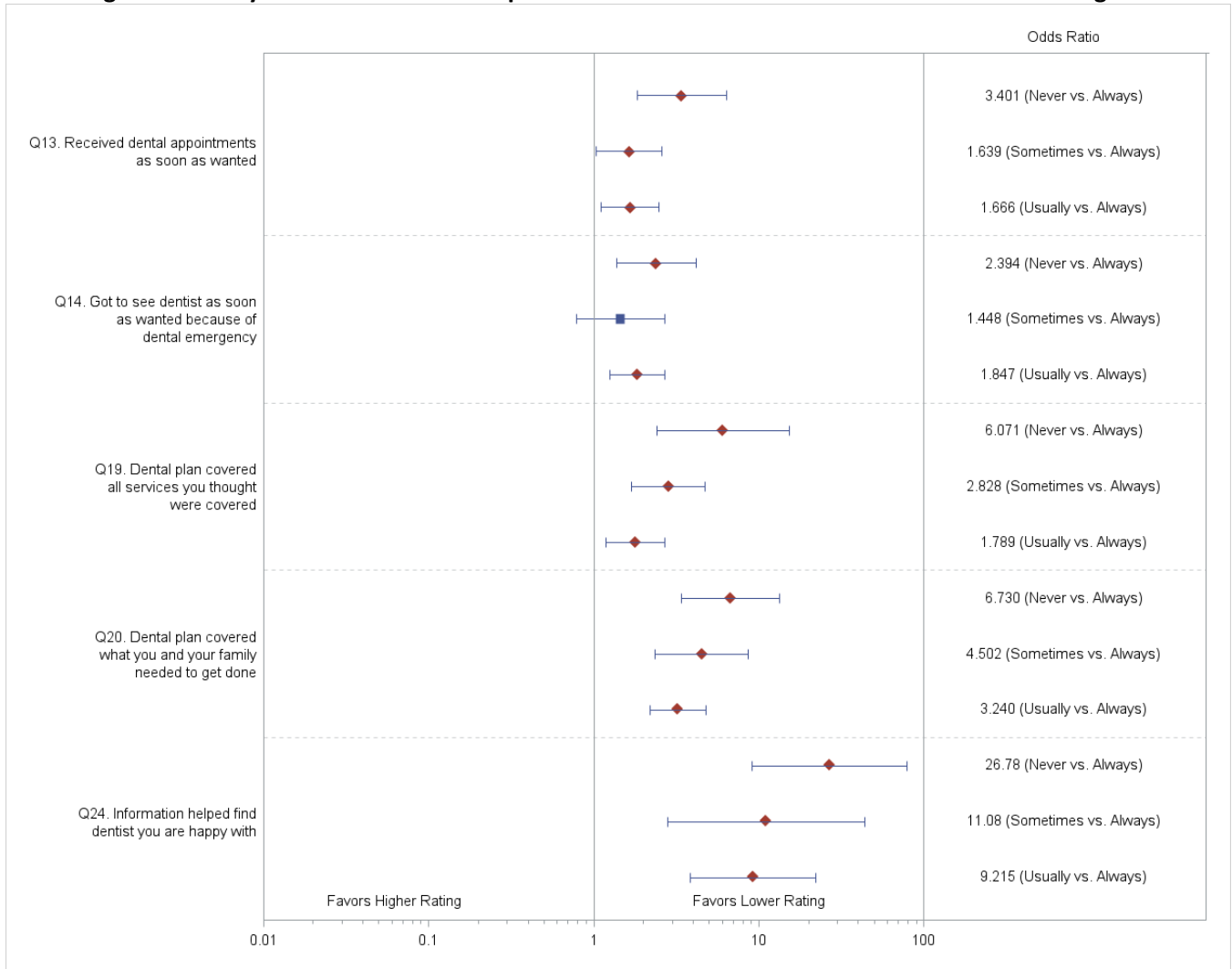
 Indicates the item is a key driver.
 Indicates the item is not a key driver.

Figure 5-3—Key Drivers of Member Experience: Would Recommend Dental Plan—HMP Program



Indicates the item is a key driver.
 Indicates the item is not a key driver.

Appendix A. Survey Instrument

This section provides a copy of the survey instrument administered to adult members receiving dental services through the HMP Program.



Your privacy is protected. The research staff will not share your personal information with anyone without your OK. Personally identifiable information will not be made public and will only be released in accordance with Federal laws and regulations.

You may choose to answer this survey or not. If you choose not to, this will not affect the dental care you get. You may notice a number on the cover of this survey. This number is ONLY used to let us know if you returned your survey so we don't have to send you reminders.

If you want to know more about this study, please call 1-877-455-3393.

SURVEY INSTRUCTIONS

- Please be sure to fill the response circle completely. Use only black or blue ink or dark pencil to complete the survey.

Correct Mark 

Incorrect Marks   

- You are sometimes told to skip over some questions in the survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:

Yes → *Go to Question 1*
 No

↓ **START HERE** ↓

1. Our records show that you are now in (insert dental plan name). Is that right?

Yes → *Go to Question 3*
 No

2. What is the name of your dental plan? (Please print)



3. In the last 12 months, did you go to a dentist's office or clinic for care?

- Yes → **Go to Question 4**
- No → **Please stop and return this survey in the postage-paid envelope. Thank you.**

Your Regular Dentist

4. A regular dentist is one you would go to for check-ups and cleanings or when you have a cavity or tooth pain. Do you have a regular dentist?

- Yes
- No → **Go to Question 11**

5. Have you seen your regular dentist in the last 12 months?

- Yes
- No, I've seen someone else → **Go to Question 11**

6. In the last 12 months, how often did your regular dentist explain things in a way that was easy to understand?

- Never
- Sometimes
- Usually
- Always

7. In the last 12 months, how often did your regular dentist listen carefully to you?

- Never
- Sometimes
- Usually
- Always

8. In the last 12 months, how often did your regular dentist treat you with courtesy and respect?

- Never
- Sometimes
- Usually
- Always

9. In the last 12 months, how often did your regular dentist spend enough time with you?

- Never
- Sometimes
- Usually
- Always

10. Using any number from 0 to 10, where 0 is the worst regular dentist possible and 10 is the best regular dentist possible, what number would you use to rate your regular dentist?

-
- 0 1 2 3 4 5 6 7 8 9 10
- Worst Best
- Regular Dentist Regular Dentist
- Possible Possible

Your Dental Care In The Last 12 Months

So far, the questions on this survey have been about your regular dentist. The next set of questions asks about any dental care you had in the last 12 months, including dental care with your regular dentist or with someone else.

11. In the last 12 months, how often did the dentists or dental staff do everything they could to help you feel as comfortable as possible during your dental work?

- Never
- Sometimes
- Usually
- Always

12. In the last 12 months, how often did the dentists or dental staff explain what they were doing while treating you?

- Never
- Sometimes
- Usually
- Always

13. In the last 12 months, how often were your dental appointments as soon as you wanted?

- Never
- Sometimes
- Usually
- Always

14. If you needed to see a dentist right away because of a dental emergency in the last 12 months, did you get to see a dentist as soon as you wanted?

- I did not have a dental emergency in the last 12 months
- Definitely yes
- Somewhat yes
- Somewhat no
- Definitely no

15. If you tried to get an appointment for yourself with a dentist who specializes in a particular type of dental care (such as root canals or gum disease) in the last 12 months, how often did you get an appointment as soon as you wanted?

- I did not try to get an appointment with a specialist dentist for myself in the last 12 months
- Never
- Sometimes
- Usually
- Always

16. In the last 12 months, how often did you have to spend more than 15 minutes in the waiting room before you saw someone for your appointment?

- Never → *Go to Question 18*
- Sometimes
- Usually
- Always

17. If you had to spend more than 15 minutes in the waiting room before you saw someone for your appointment, how often did someone tell you why there was a delay or how long the delay would be?

- Never
- Sometimes
- Usually
- Always

27. In the last 12 months, how often did your dental plan's customer service give you the information or help you needed?

- Never
- Sometimes
- Usually
- Always

28. In the last 12 months, how often did your dental plan's customer service staff treat you with courtesy and respect?

- Never
- Sometimes
- Usually
- Always

29. Using any number from 0 to 10, where 0 is the worst dental plan possible and 10 is the best dental plan possible, what number would you use to rate your dental plan?

-
- 0 1 2 3 4 5 6 7 8 9 10
- Worst Best
Dental Plan Dental Plan
Possible Possible

30. Would you recommend this dental plan to people who want to join?

- Definitely yes
- Probably yes
- Probably no
- Definitely no

About You

31. In general, how would you rate the overall condition of your teeth and gums?

- Excellent
- Very good
- Good
- Fair
- Poor

32. What is your age?

- 18 to 24
- 25 to 34
- 35 to 44
- 45 to 54
- 55 to 64
- 65 to 74
- 75 or older

33. Are you male or female?

- Male
- Female

34. What is the highest grade or level of school that you have completed?

- 8th grade or less
- Some high school, but did not graduate
- High school graduate or GED
- Some college or 2-year degree
- 4-year college graduate
- More than 4-year college degree

35. Are you of Hispanic or Latino origin or descent?

- Yes, Hispanic or Latino
- No, Not Hispanic or Latino

◆

36. What is your race? Mark one or more.

- White
- Black or African-American
- Asian
- Native Hawaiian or other Pacific Islander
- American Indian or Alaska Native
- Other

37. Did someone help you complete this survey?

- Yes → ***Go to Question 38***
- No → ***Thank you. Please return the completed survey in the postage-paid envelope.***

38. How did that person help you? Mark one or more.

- Read the questions to me
- Wrote down the answers I gave
- Answered the questions for me
- Translated the questions into my language
- Helped in some other way

Thanks again for taking the time to complete this survey! Your answers are greatly appreciated.

When you are done, please use the enclosed prepaid envelope to mail the survey to:

DataStat, 3975 Research Park Drive, Ann Arbor, MI 48108

