

# 2025 Adult Dental CAHPS® 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 Adult Dental Program and receiving dental benefits through one of the MDHHS contracted Medicaid Health Plans (MHPs).<sup>1-1</sup> 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 Adult Dental Program.<sup>1-2</sup> 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	Abbreviation
Aetna Better Health of Michigan	AET
Blue Cross Complete of Michigan	BCC
HAP CareSource	HCS
McLaren Health Plan	MCL
Meridian Health Plan of Michigan	MER
Molina Healthcare of Michigan	MOL
Priority Health Choice	PRI
UnitedHealthcare Community Plan	UNI
Upper Peninsula Health Plan	UPP

<sup>1-1</sup> CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

<sup>1-2</sup> The Adult Dental Program results presented in this report are derived from the combined results of the participating MHPs (i.e., aggregate).





## Survey Administration Overview

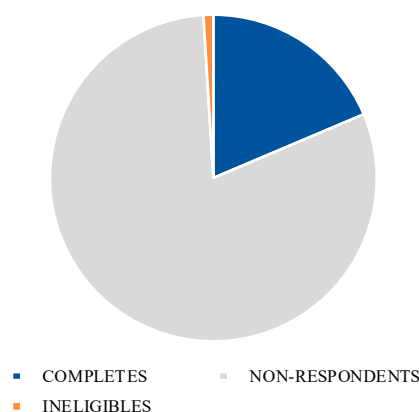
Figure 1-1 shows the distribution of survey dispositions and response rate for the Adult Dental Program.

**Figure 1-1—Survey Administration Overview: Adult Dental Program**

### Survey Administration

Start Survey On:	Finish Survey On:
12.20.24	04.04.25
<b>TOTAL SAMPLE SIZE</b>	<b>12,150</b>
<b>RESPONSE RATE</b>	<b>18.81%</b>

 <b>COMPLETES</b>	<b>2,263</b>
 <b>NON-RESPONDENTS</b>	<b>9,769</b>
 <b>INELIGIBLES</b>	<b>118</b>
 <b>UNDELIVERABLES</b>	<b>763</b>



### DETAILS

	Mail 1	Mail 2	Mail 3	Web*
<b>Completes</b>	<b>938</b>	<b>681</b>	<b>307</b>	<b>337</b>
	<b>Refusals</b>	<b>No Response</b>		
<b>Non-Respondents</b>	<b>3</b>	<b>9,766</b>		
	<b>Invalid</b>	<b>Incapacitated</b>		
<b>Ineligibles</b>	<b>114</b>	<b>4</b>		

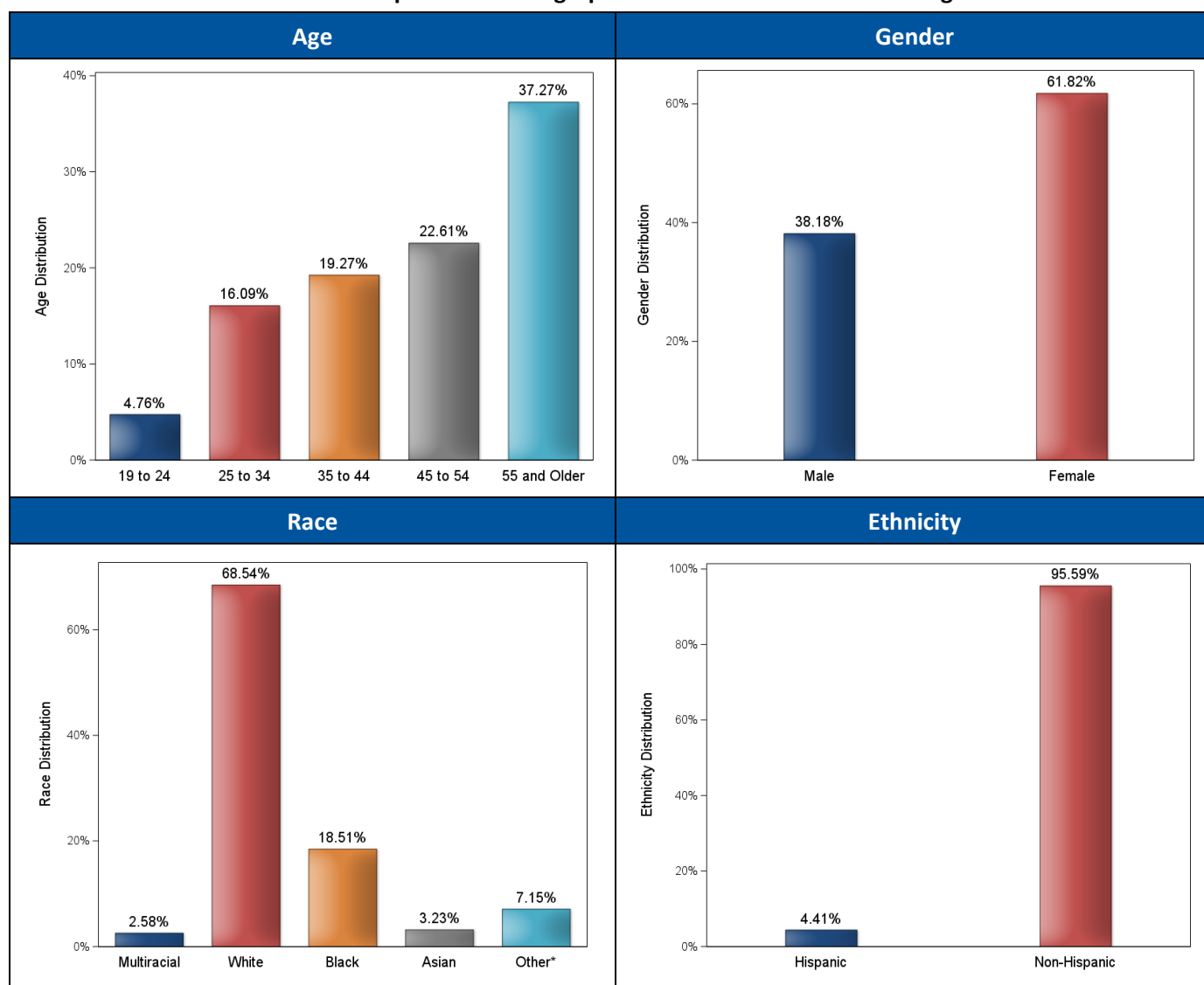
\* There were 10 surveys completed in Spanish via web.

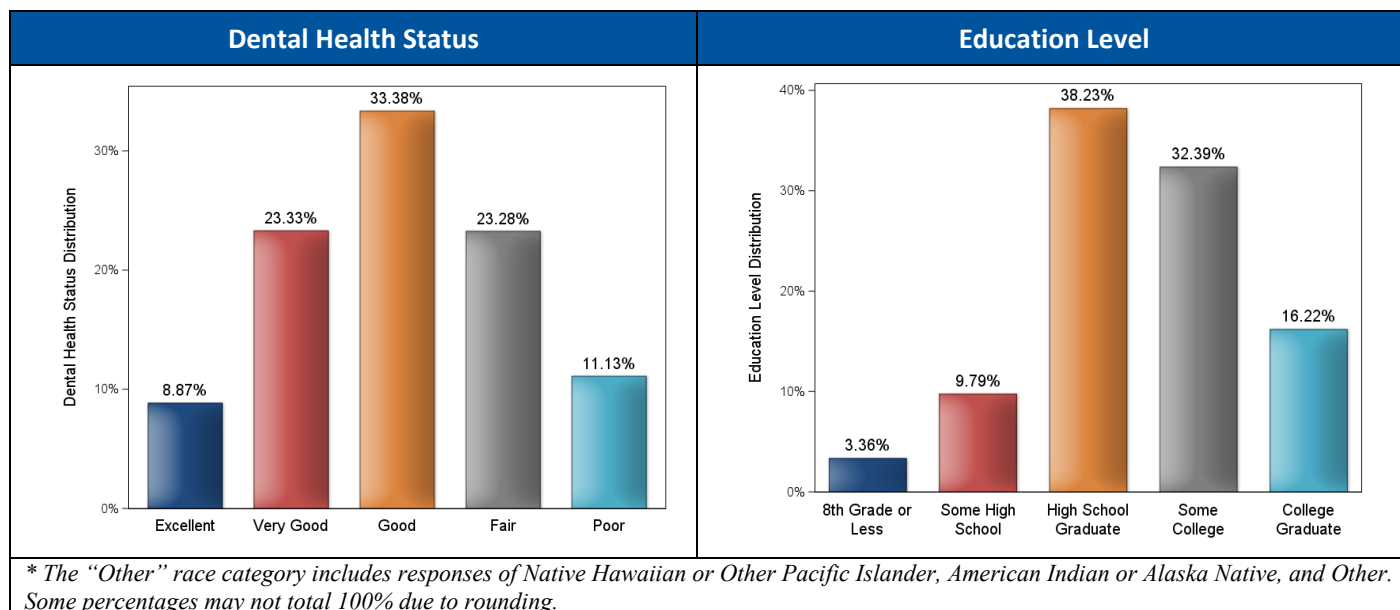
## Key Findings

### Respondent Demographics

Table 1-2 provides an overview of the self-reported demographic characteristics of members who completed a survey for the Adult Dental Program. For the detailed results of the demographics analysis, please refer to the Results section beginning on page 3-4.

**Table 1-2—Respondent Demographics Overview: Adult Dental Program**





## MHP Comparisons

HSAG compared the individual MHP scores to the Adult Dental Program scores to determine if the MHP scores were statistically significantly different from the program-wide scores. Table 1-3 shows the summary of the MHP comparisons with statistically significant results; measures or MHPs with no statistically significant results are not shown. For the detailed results of the MHP comparisons, please refer to the Results section beginning on page 3-8.

**Table 1-3—MHP Comparisons Summary: Statistically Significant Results<sup>1-3, 1-4</sup>**

Measure	BCC	HCS	UPP
Rating of Regular Dentist	—	▲	—
Rating of Dental Plan	▼	—	▲
Dental Plan Information and Services	—	—	▼
▲ Indicates the 2025 score is statistically significantly higher than the Adult Dental Program. ▼ Indicates the 2025 score is statistically significantly lower than the Adult Dental Program. — Indicates the 2025 score is not statistically significantly different than the Adult Dental Program.			

<sup>1-3</sup> For Rating of Finding a Dentist, there were fewer than 100 respondents for all MHPs. Caution should be exercised when evaluating these results.

<sup>1-4</sup> For Dental Plan Information and Services, there were fewer than 100 respondents for AET, BCC, MER, MOL, and UNI. Caution should be exercised when evaluating these results.

## Trend Analysis

HSAG compared the 2025 scores to the 2024 and 2023 scores to determine if the scores were statistically significantly different. Table 1-4 shows the summary of the trend analysis with the most recent statistically significant results (i.e., 2025 scores compared to 2024 scores). For the detailed results of the trend analysis, please refer to the Trend Analysis section beginning on page 4-1.

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

Measure	Adult Dental Program	AET	BCC	HCS	MER	PRI	UNI
<i>Rating of Regular Dentist</i>	—	▲	—	—	—	—	—
<i>Rating of All Dental Care</i>	▲	▲	—	—	▲	—	—
<i>Rating of Finding a Dentist</i>	▲	—	▲ <sup>+</sup>	▲ <sup>+</sup>	—	—	—
<i>Rating of Dental Plan</i>	—	▲	—	—	—	▲	—
<i>Access to Dental Care</i>	—	▲	—	—	—	—	—
<i>Dental Plan Information and Services</i>	—	—	—	—	—	—	▲ <sup>+</sup>
▲ Indicates the 2025 score is statistically significantly higher than the 2024 score. ▼ Indicates the 2025 score is statistically significantly lower than the 2024 score. — Indicates the 2025 score is not statistically significantly different than the 2024 score. + Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.							

## Key Drivers of Member Experience Analysis

To determine potential items for quality improvement (QI) efforts, HSAG conducted a key drivers of member experience analysis for the Adult Dental Program.

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 respondents’ levels of experience with each of the three measures.

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 Adult Dental Program. For the detailed results of the key drivers of member experience analysis, please refer to the Key Drivers of Member Experience Analysis section beginning on page 5-1.



**Table 1-5—Key Drivers of Member Experience Analysis Summary: Adult Dental Program**

Survey Item	Response Options	Key Drivers		
		Rating of All Dental Care	Rating of Dental Plan	Would Recommend Dental Plan
Q7. Dentist listened carefully to you	Never + Sometimes vs. Always	✓	✓	✓
	Usually vs. Always	✓	NS	✓
Q9. Dentist spent enough time with you	Never + 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 + Sometimes vs. Always	✓	NS	NS
	Usually vs. Always	✓	NS	NS
Q12. Dentist or dental staff explained what they were doing while treating you	Never + Sometimes 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 + Sometimes vs. Always	NS	✓	✓
	Usually vs. Always	NS	NS	✓
Q19. Dental plan covered all services you thought were covered	Never + Sometimes vs. Always	NA	✓	✓
	Usually vs. Always	NA	✓	✓
Q20. Dental plan covered what you and your family needed to get done	Never + Sometimes vs. Always	NA	✓	✓
	Usually vs. Always	NA	✓	✓
Q22. 800 number, written materials, or website provided you with wanted information	Never + Sometimes vs. Always	NA	✓	NS
Q24. Information helped find dentist you are happy with	Never + Sometimes vs. Always	NA	NS	✓
Q27. Dental plan's customer service staff gave you the information or help needed	Never + Sometimes vs. Always	NA	✓	✓
Q28. Dental plan's customer service staff treated you with courtesy and respect	Never + Sometimes vs. Always	NA	✓	✓
	Usually vs. Always	NA	✓	NS
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, improvements of those responses may not significantly affect the rating.				

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 questions, three composite measures, and one individual item measure. The global ratings 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**

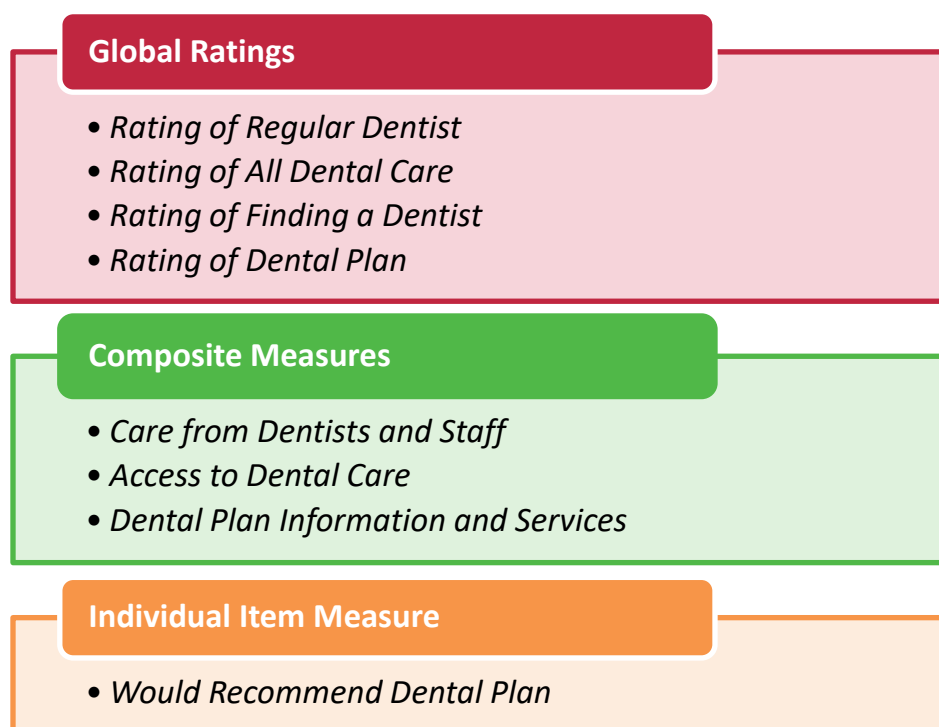


Table 2-1 shows the survey language and response options for each measure. The survey includes gate items, also known as screening items, that instruct respondents to skip specific questions if they are not receiving certain services, which results in fewer responses for the measures. Questions with these skip-patterns likely have fewer responses. The measures that are affected by these gate items are noted within footnotes in Table 2-1.

**Table 2-1—Question Language and Response Categories**

Question Language	Response Categories
<b>Global Ratings</b>	
<b><i>Rating of Regular Dentist</i><sup>2-1</sup></b>	
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
<b><i>Rating of All Dental Care</i></b>	
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
<b><i>Rating of Finding a Dentist</i><sup>2-2</sup></b>	
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
<b><i>Rating of Dental Plan</i></b>	
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
<b>Composite Measures</b>	
<b><i>Care from Dentists and Staff</i><sup>2-3</sup></b>	
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

<sup>2-1</sup> 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.

<sup>2-2</sup> 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 of Finding a Dentist* measure.

<sup>2-3</sup> 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
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
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
<b><i>Access to Dental Care</i></b>	
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 <sup>2-4</sup>
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 <sup>2-5</sup>
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? <sup>2-6</sup>	Never, Sometimes, Usually, Always <sup>2-7</sup>
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
<b><i>Dental Plan Information and Services</i></b> <sup>2-8</sup>	
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

<sup>2-4</sup> “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).

<sup>2-5</sup> “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).

<sup>2-6</sup> 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 comprises the *Access to Dental Care* measure.

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

<sup>2-8</sup> 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
<b>Individual Item Measure</b>	
<i><b>Would Recommend Dental Plan</b></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

The sampling procedures and survey protocol that HSAG adhered to are described below.

### Sampling Procedures

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

- Were 19 years or older as of September 30, 2024.
- Were currently enrolled in an MHP.
- Were enrolled continuously in the MHP during the last 12 months of the measurement period (October 1, 2023, to September 30, 2024).<sup>2-9</sup>
- Had a paid or denied dental claim during the measurement period.

A random sample of 1,350 members was selected from each MHP for inclusion in the survey, which represents the adult dental population. No more than one member per household was selected as part of the survey sample. After the sample was selected, the entire sample of records was passed through the

<sup>2-9</sup> To determine continuous enrollment, no more than one gap in the measurement 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.

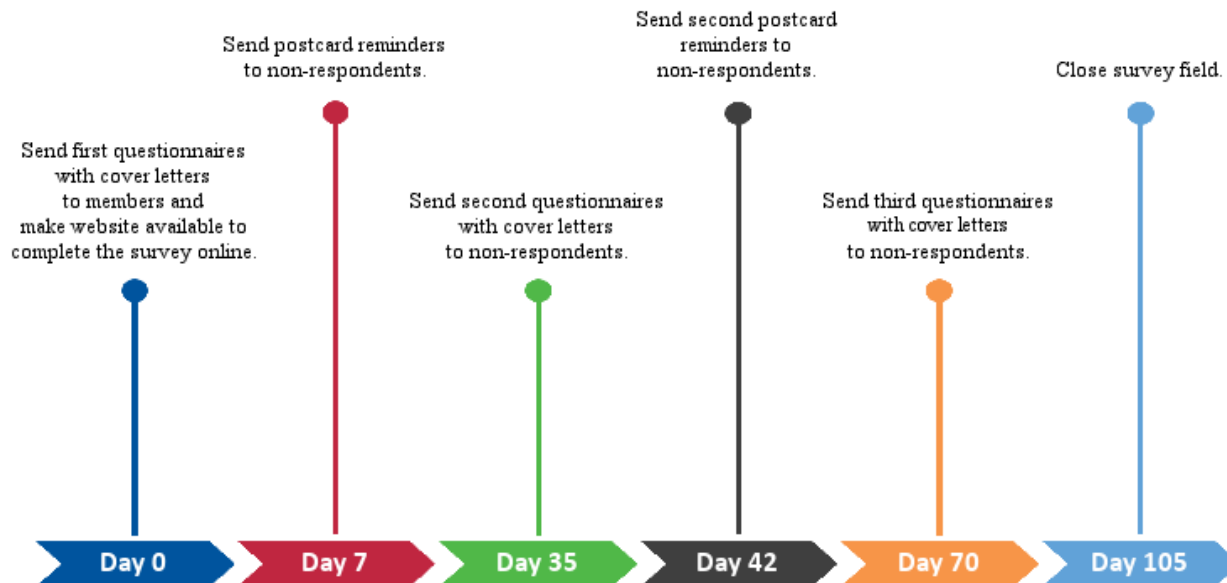
United States Postal Service's National Change of Address (NCOA) system to obtain new addresses for members who had moved (if they had given the Postal Service a new address).

## Survey Protocol

The survey administration protocol employed was a mixed-mode methodology, which allowed for two methods by which members could complete a survey: (1) mail or (2) Internet. A cover letter was mailed to all adult members that provided two options by which they could complete the survey: (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 URL link or quick response (QR) code and designated username. 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 MHP name was included in the questionnaires and letters; the letters bore the signature of a high-ranking state official; and the questionnaire packages included a postage-paid reply envelope addressed to the organization conducting the surveys. The survey administration started in December 2024, and the survey field remained open until closing in April 2025.

Figure 2-2 shows the timeline used for the survey administration

**Figure 2-2—CAHPS Dental Survey Timeline**



## Methodology

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 MHP results, HSAG combined results from the MHPs to calculate an Adult Dental Program aggregate. This section provides an overview of each analysis.

### Response Rates

The response rate was defined as the total number of completed surveys divided by all eligible members of the sample. A survey is assigned a disposition code of “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 described 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). 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 section, which uses responses from the survey as the data source. 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 (↑ or ↓) in the tables. Caution should be exercised when extrapolating the survey results to the entire population if the average characteristics of respondents differ significantly from the plan or program population as a whole.

### Respondent Demographics

The demographics analysis evaluated demographic information of adult members based on responses to the survey. Table 2-2 shows the survey question numbers that are associated with the respective demographic categories that were analyzed.

**Table 2-2—Respondent Demographic Items Analyzed**

Demographic Category	Survey Question Number
Age	32
Gender	33
Race	36
Ethnicity	35
Dental Health Status	31
Education Level	34

## Scoring Calculations

HSAG classified responses into one of two categories in order to present the proportion (i.e., percentage) of top-box responses (i.e., top-box score) for each measure. The response categories were defined as follows:

- “9” or “10” for the global ratings.
- “Usually/Always,” “Probably Yes/Definitely Yes,” or “Somewhat Yes/Definitely Yes” for the *Care from Dentists and Staff*, *Access to Dental Care*, and *Dental Plan and Information Services* composite measures; and *Would Recommend Dental Plan* for the 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 Adult Dental Program score based on the total eligible population for each MHP. The Adult Dental Program includes the results from the nine MHPs.

## MHP Comparisons

For purposes of the MHP comparisons, HSAG applied two types of hypothesis tests to the scores. First, HSAG calculated a global *F* test, 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 HSAG performed a *t* test for each MHP. The *t* test determined whether each MHP’s score was statistically significantly different from the Adult Dental Program. This analytic approach follows AHRQ’s recommended methodology for identifying significant plan-level performance differences. Statistically significant differences are noted with black triangles (▲ or ▼) in the figures.



## Trend Analysis

HSAG performed a *t* test to determine whether scores in 2025 were statistically significantly different (i.e., *p* value < 0.05) from the prior years' scores. Scores that were statistically significantly higher in 2025 than in 2024 or 2023 are denoted with black upward triangles (▲). Scores that were statistically significantly lower in 2025 than in 2024 or 2023 are denoted with black downward triangles (▼). Scores in 2025 that were not statistically significantly different in from 2024 or 2023 are denoted with a dash (—).

## Key Drivers of Member Experience Analysis

HSAG performed an analysis of key drivers of member experience for the following three global ratings: *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 QI activities.

Table 2-3 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 2-3—Potential Key Drivers**

Survey Item	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

Survey Item	Rating of All Dental Care	Rating of Dental Plan	Would Recommend Dental Plan	Baseline Response
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
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.

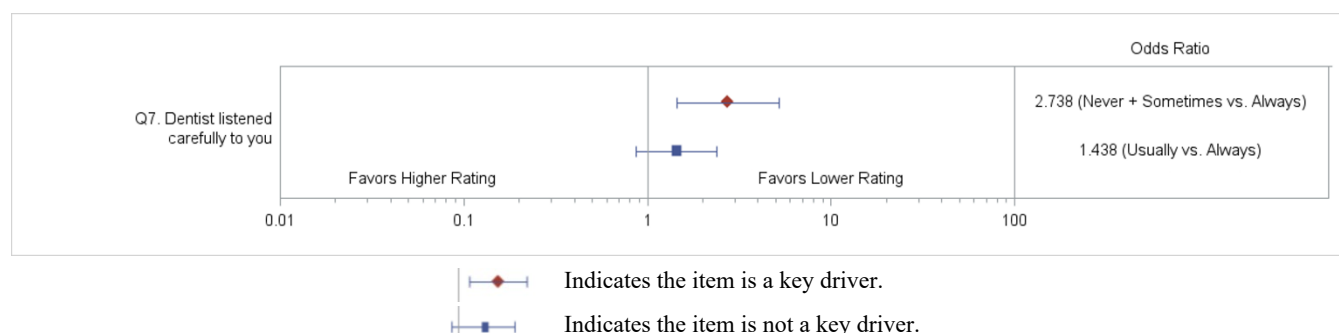
The correlation can range from -1 to 1, with negative values indicating an inverse relationship between overall member experience and a particular survey item. However, the correlation analysis conducted is not focused on the direction of the correlation, but rather on the degree of correlation. Therefore, 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, the results indicate that respondents who answered “Never/Sometimes” or “Usually” to Question 7 are 7.738, 1.438 times 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. For the detailed results of the key drivers of member experience analysis, please refer to the Key Drivers of Member Experience Analysis section beginning on page 5-1.

**Figure 2-3—Key Drivers of Member Experience Analysis: 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. The limitations are discussed below.

### 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 Adult Dental 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. To identify potential non-response bias, HSAG compared the scores from late respondents to early respondents (i.e., respondents who submitted a survey during the first mailing/round) for each measure. Table 2-4 presents the results of the non-response bias analysis for the Adult Dental Program. MDHHS should consider that potential non-response bias may exist when interpreting the survey results.

**Table 2-4—Non-Response Bias Analysis: Adult Dental Program**

Measure	2023	2024	2025
<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>	↑	↑	—
↑ Indicates that early respondents are statistically significantly more likely to provide a higher response for the measure (i.e., potential non-response bias). ↓ Indicates that early respondents are statistically significantly more likely to provide a lower response for the measure (i.e., potential non-response bias). — Indicates that early respondents are not statistically significantly more likely to provide a higher or lower response for the measure.			

### Who Responded to the Survey

The response rate is the total number of completed surveys divided by all eligible members of the sample. Table 3-1 shows the distribution of survey dispositions and the response rates. For additional information on the calculation of response rates, please refer to page 2-6 of the Reader's Guide section.

**Table 3-1—Distribution of Surveys and Response Rates**

Program/Plan Name	Sample Size	Completes	Ineligibles	Response Rates
<b>Adult Dental Program</b>	<b>12,150</b>	<b>2,263</b>	<b>118</b>	<b>18.81%</b>
AET	1,350	191	5	14.20%
BCC	1,350	218	13	16.31%
HCS	1,350	246	9	18.34%
MCL	1,350	269	11	20.09%
MER	1,350	242	27	18.29%
MOL	1,350	233	11	17.40%
PRI	1,350	256	22	19.28%
UNI	1,350	248	14	18.56%
UPP	1,350	360	6	26.79%

### 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 show the results of the respondent analysis for the MHPs and Adult Dental Program. Respondent percentages within a particular demographic category that were statistically significantly higher or lower than the sample frame percentages are noted with black arrows (↑ or ↓) 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. Caution should be exercised when extrapolating the 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
Adult Dental Program	R	4.82%↓	15.91%↓	19.71%↓	22.58%↑	36.99%↑
	SF	9.81%	30.03%	25.35%	18.10%	16.70%
AET	R	4.19%↓	16.23%↓	16.75%↓	19.90%	42.93%↑
	SF	11.13%	32.26%	22.81%	18.47%	15.32%
BCC	R	6.88%	18.35%↓	16.97%↓	23.39%	34.40%↑
	SF	8.73%	31.20%	24.60%	18.61%	16.86%
HCS	R	5.28%↓	18.29%↓	15.04%↓	19.92%	41.46%↑
	SF	8.37%	35.04%	22.81%	16.67%	17.11%
MCL	R	4.46%↓	15.99%↓	19.70%↓	20.82%	39.03%↑
	SF	9.49%	30.90%	25.41%	17.53%	16.66%
MER	R	4.96%↓	17.36%↓	21.90%	22.73%	33.06%↑
	SF	9.21%	30.42%	26.81%	17.49%	16.07%
MOL	R	6.87%↓	12.02%↓	20.60%	24.46%↑	36.05%↑
	SF	11.72%	29.21%	24.99%	17.94%	16.15%
PRI	R	4.69%↓	19.14%↓	23.05%	19.53%	33.59%↑
	SF	9.63%	31.79%	25.46%	17.09%	16.04%
UNI	R	5.24%↓	11.69%↓	21.37%	26.61%↑	35.08%↑
	SF	10.55%	26.19%	24.29%	20.33%	18.64%
UPP	R	2.22%↓	14.72%↓	20.56%↓	24.72%↑	37.78%↑
	SF	8.48%	26.27%	28.44%	17.75%	19.05%

An “R” indicates respondent percentage, and an “SF” indicates sample frame percentage.  
↑ Indicates the respondent percentage is statistically significantly higher than the sample frame percentage.  
↓ Indicates the respondent percentage is statistically 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
Adult Dental Program	R	38.80%↑	61.20%↓
	SF	35.43%	64.57%
AET	R	36.13%	63.87%
	SF	37.42%	62.58%
BCC	R	39.45%	60.55%
	SF	37.77%	62.23%
HCS	R	41.06%	58.94%
	SF	42.06%	57.94%
MCL	R	37.55%	62.45%
	SF	35.69%	64.31%
MER	R	39.26%	60.74%
	SF	33.56%	66.44%

Program/Plan Name		Male	Female
MOL	R	36.05%	63.95%
	SF	34.05%	65.95%
PRI	R	39.84%	60.16%
	SF	33.90%	66.10%
UNI	R	38.31%	61.69%
	SF	36.98%	63.02%
UPP	R	40.28%	59.72%
	SF	36.26%	63.74%

*An “R” indicates respondent percentage, and an “SF” indicates sample frame percentage.*  
*↑ Indicates the respondent percentage is statistically significantly higher than the sample frame percentage.*  
*↓ Indicates the respondent percentage is statistically 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
<b>Adult Dental Program</b>	<b>R</b>	<b>75.61%↑</b>	<b>20.97%↓</b>	<b>1.08%↑</b>	<b>2.35%</b>
	<b>SF</b>	<b>67.46%</b>	<b>29.37%</b>	<b>0.62%</b>	<b>2.56%</b>
AET	R	36.52%	62.36%	0.56%	0.56%
	SF	33.18%	64.62%	0.56%	1.64%
BCC	R	71.29%↑	24.75%↓	0.99%	2.97%
	SF	59.75%	36.85%	0.86%	2.54%
HCS	R	56.83%↑	37.89%↓	3.52%↑	1.76%
	SF	48.03%	48.95%	0.87%	2.15%
MCL	R	88.58%↑	9.45%↓	1.18%	0.79%↓
	SF	77.97%	19.46%	0.38%	2.19%
MER	R	85.59%↑	12.66%↓	0.44%	1.31%
	SF	73.78%	23.66%	0.45%	2.11%
MOL	R	70.56%↑	26.64%↓	0.47%	2.34%
	SF	59.20%	37.05%	0.69%	3.07%
PRI	R	78.60%↑	16.87%↓	0.82%	3.70%
	SF	69.41%	27.92%	0.52%	2.15%
UNI	R	75.42%↑	19.07%↓	2.12%	3.39%
	SF	68.01%	27.80%	0.89%	3.30%
UPP	R	95.42%	1.15%	0.00%	3.44%
	SF	94.46%	1.21%	0.10%	4.23%

*An “R” indicates respondent percentage, and an “SF” indicates sample frame percentage.*  
*↑ Indicates the respondent percentage is statistically significantly higher than the sample frame percentage.*  
*↓ Indicates the respondent percentage is statistically 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

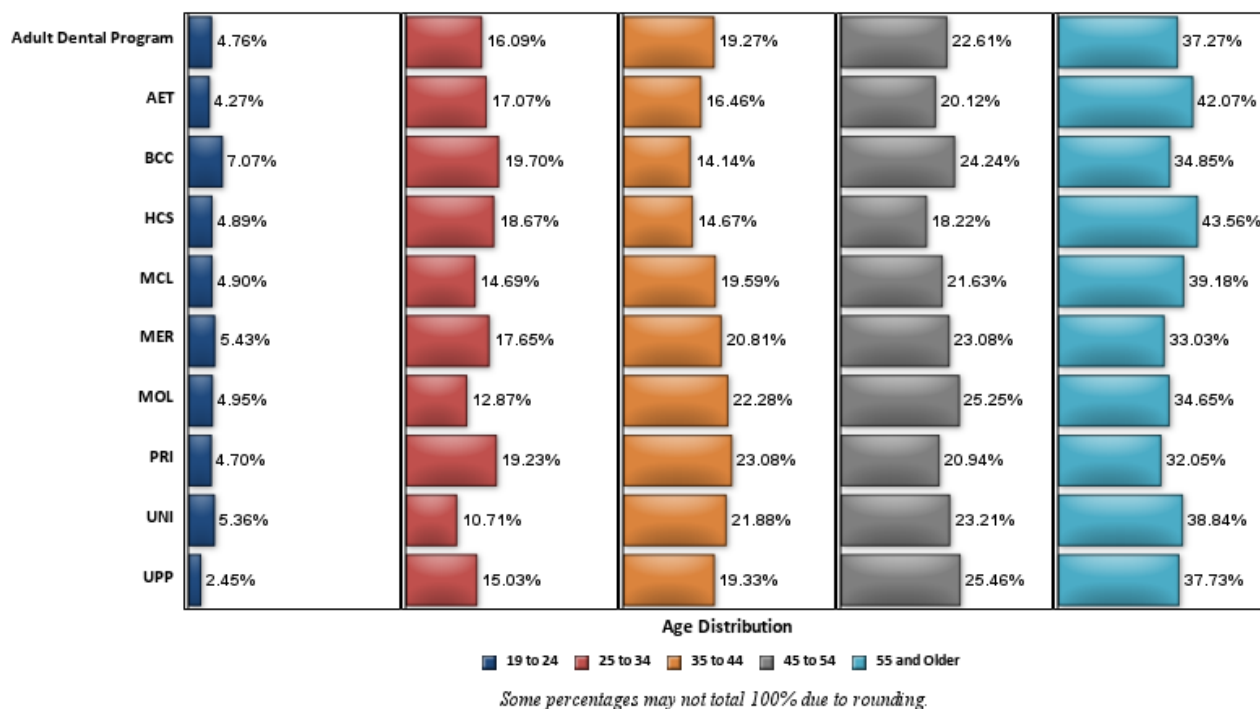
Program/Plan Name		Hispanic	Non-Hispanic
Adult Dental Program	R SF	3.02%↓ 4.49%	96.98%↑ 95.51%
AET	R SF	2.62% 3.27%	97.38% 96.73%
BCC	R SF	4.19% 4.35%	95.81% 95.65%
HCS	R SF	2.04% 3.05%	97.96% 96.95%
MCL	R SF	2.61%↓ 4.64%	97.39%↑ 95.36%
MER	R SF	3.33% 4.13%	96.67% 95.87%
MOL	R SF	3.90% 4.83%	96.10% 95.17%
PRI	R SF	5.14% 6.80%	94.86% 93.20%
UNI	R SF	2.02% 3.75%	97.98% 96.25%
UPP	R SF	1.94% 1.72%	98.06% 98.28%
<p>An “R” indicates respondent percentage, and an “SF” indicates sample frame percentage.  ↑ Indicates the respondent percentage is statistically significantly higher than the sample frame percentage.  ↓ Indicates the respondent percentage is statistically 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.</p>			

## Respondent Demographics

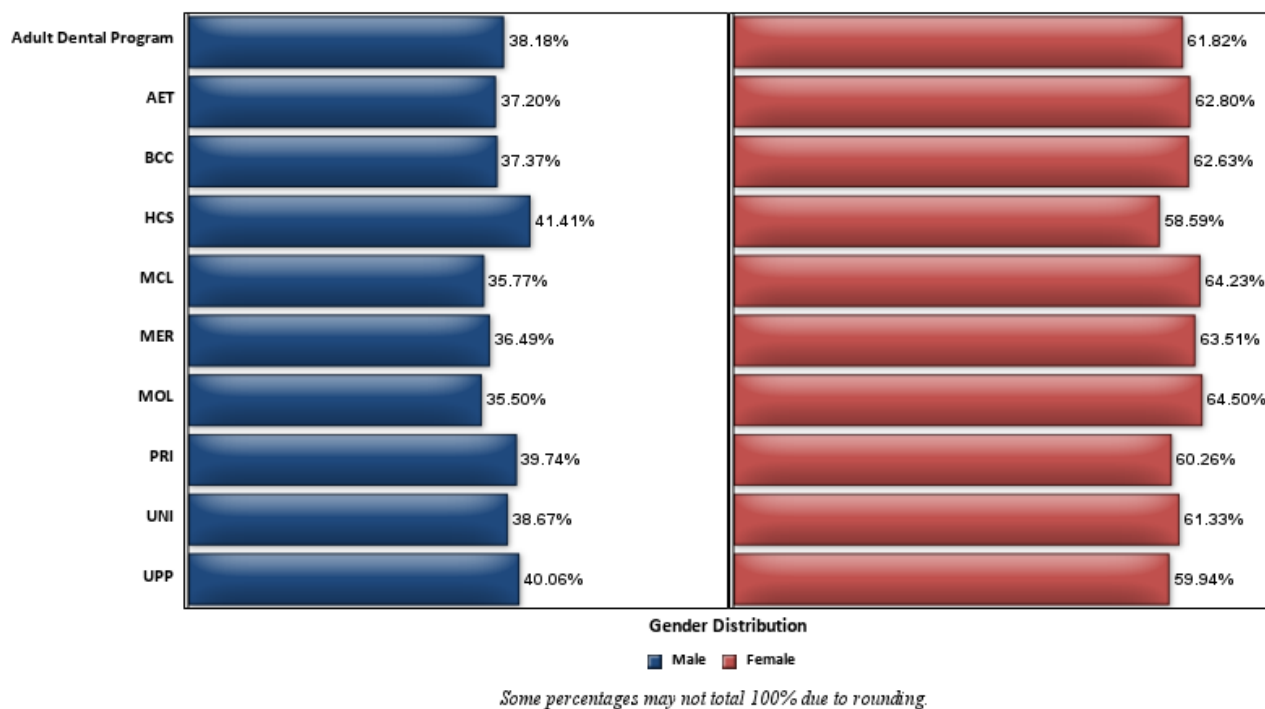
Figure 3-1 through Figure 3-6 show the self-reported age, gender, race, ethnicity, dental health status, and education level for the members who completed a survey. For additional information on the respondent demographics, please refer to page 2-6 of the Reader’s Guide section.



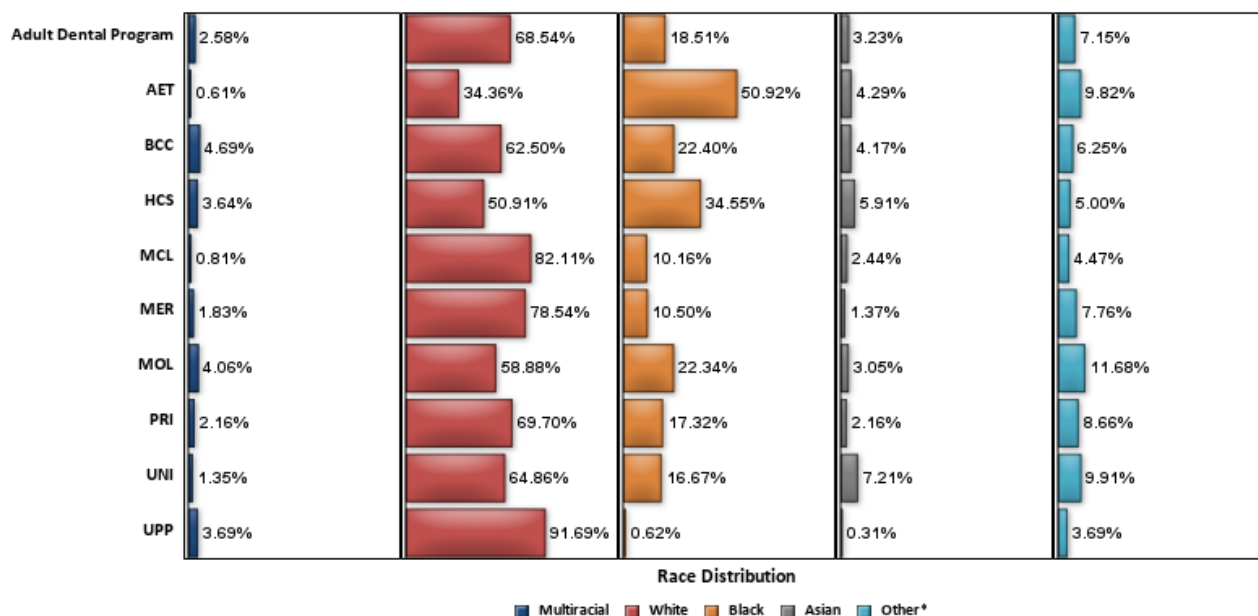
**Figure 3-1—Respondent Demographics: Age**



**Figure 3-2—Respondent Demographics: Gender**



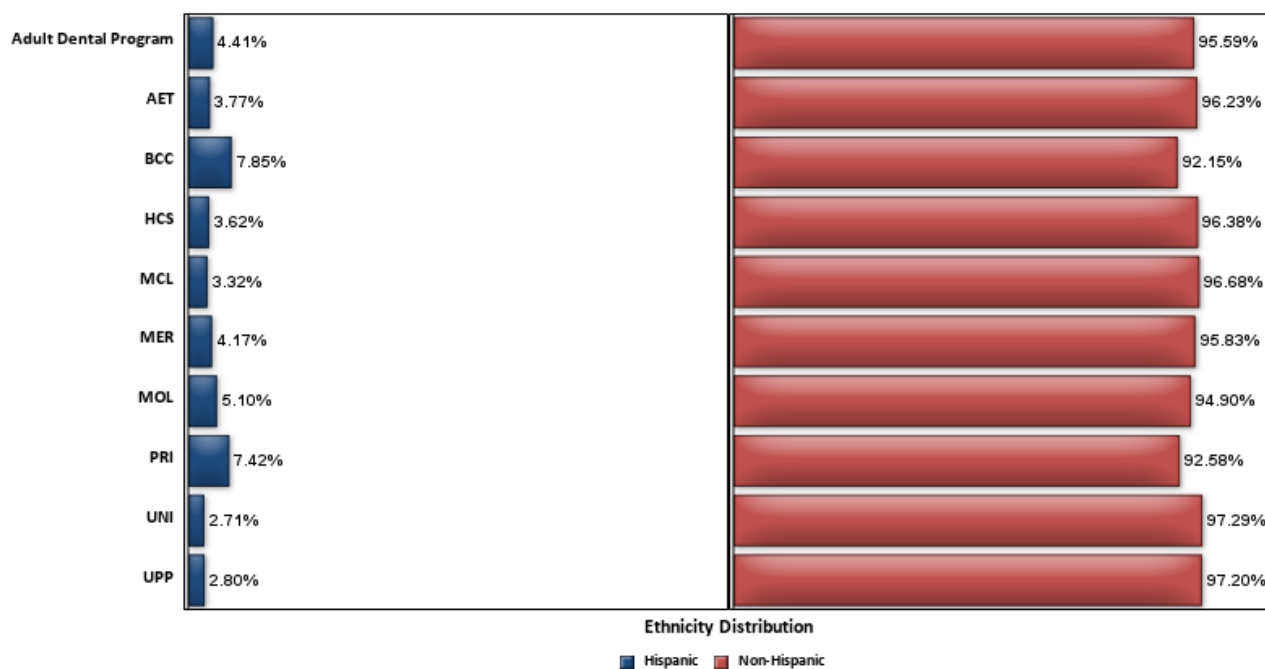
**Figure 3-3—Respondent Demographics: Race**



*Some percentages may not total 100% due to rounding.*

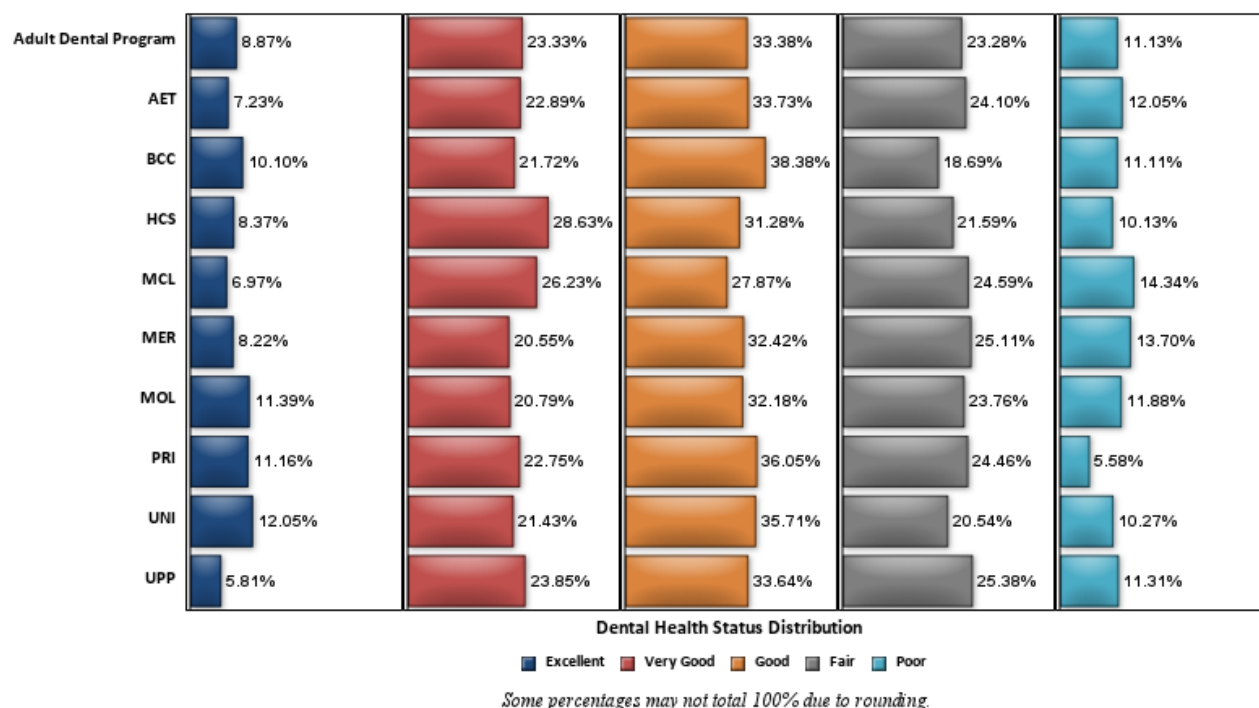
*\*The "Other" race category includes responses of Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and Other.*

**Figure 3-4—Respondent Demographics: Ethnicity**

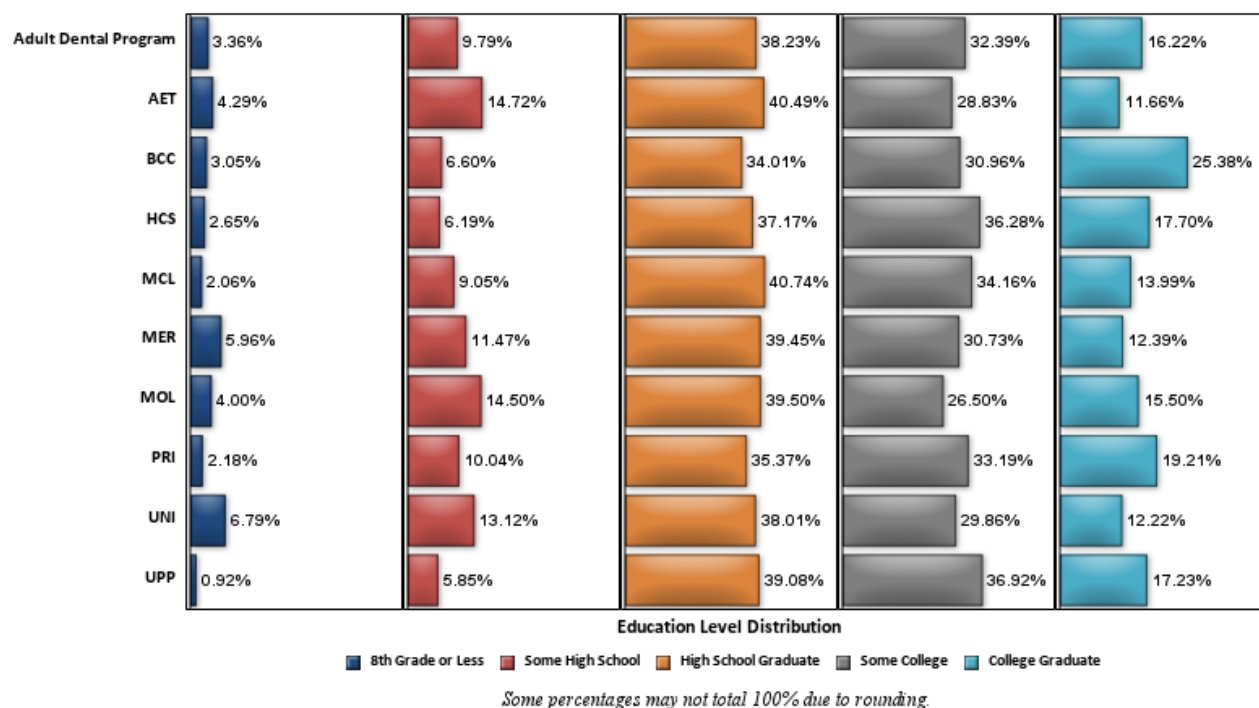


*Some percentages may not total 100% due to rounding.*

**Figure 3-5—Respondent Demographics: Dental Health Status**



**Figure 3-6—Respondent Demographics: Education Level**



## 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.

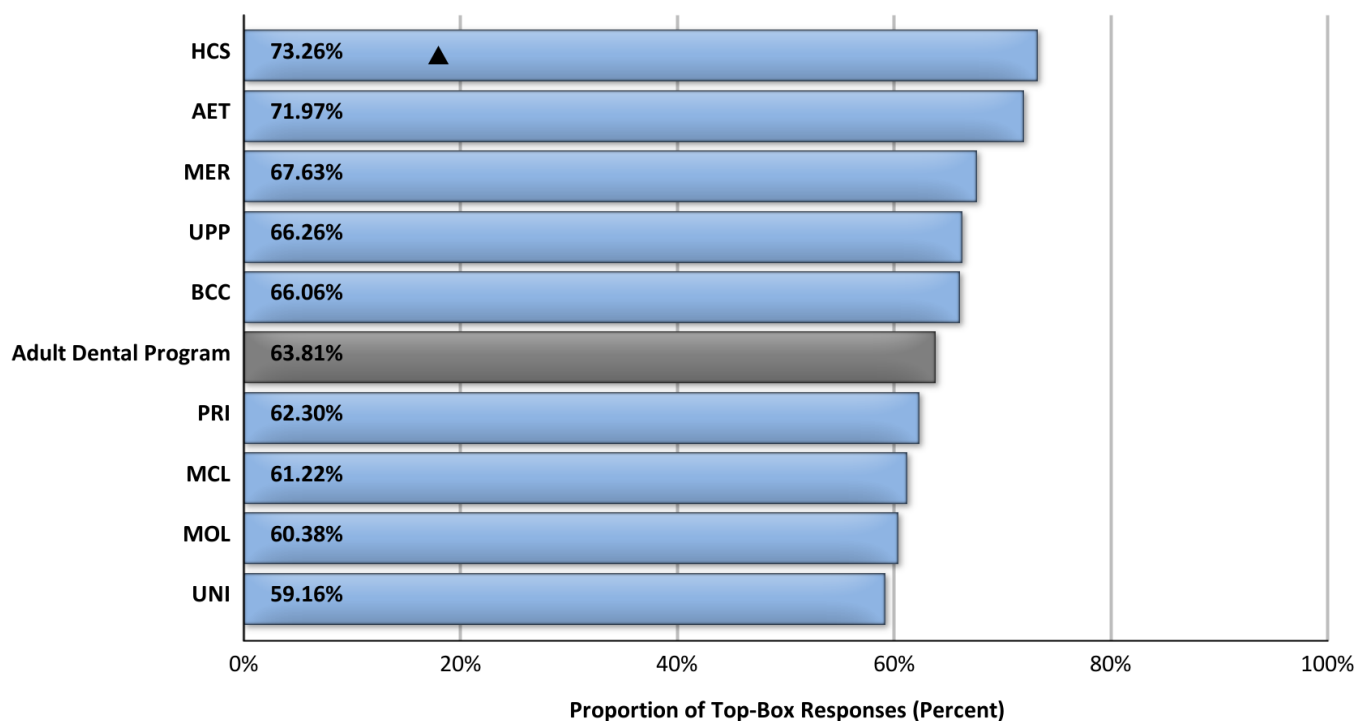
The Adult Dental Program results were weighted based on the eligible population for each MHP. HSAG compared the MHP scores to the Adult Dental Program to determine whether there were statistically significant differences. Statistically significant differences were noted with black triangles (▲ or ▼) in the figures. There may be a difference in significance between MHPs with similar scores since MHPs with a greater number of respondents are more likely to have statistical significance. MHP scores with fewer than 100 respondents are denoted with a cross (+). Caution should be exercised when evaluating scores derived from fewer than 100 respondents. For additional information on the MHP comparisons, please refer to page 2-7 of the Reader's Guide section.

## Global Ratings

### Rating of Regular Dentist

Figure 3-7 shows the top-box scores, including the MHP comparisons, for the *Rating of Regular Dentist* global rating.

**Figure 3-7—MHP Comparisons: Rating of Regular Dentist**



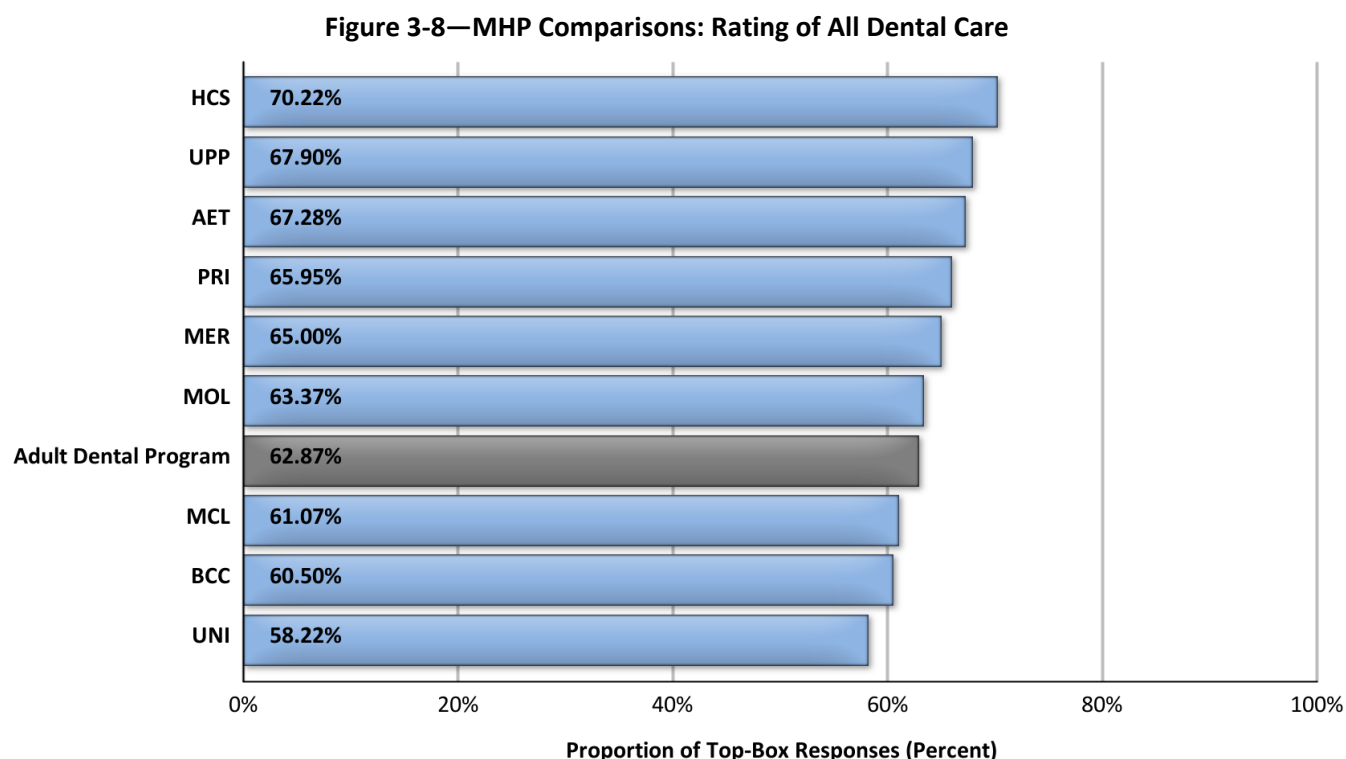
Statistical Significance Note: ▲ Indicates the score is statistically significantly higher than the Adult Dental Program.

▼ Indicates the score is statistically significantly lower than the Adult Dental Program.

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

## Rating of All Dental Care

Figure 3-8 shows the top-box scores, including the MHP comparisons, for the *Rating of All Dental Care* global rating.



Statistical Significance Note: ▲ Indicates the score is statistically significantly higher than the Adult Dental Program.

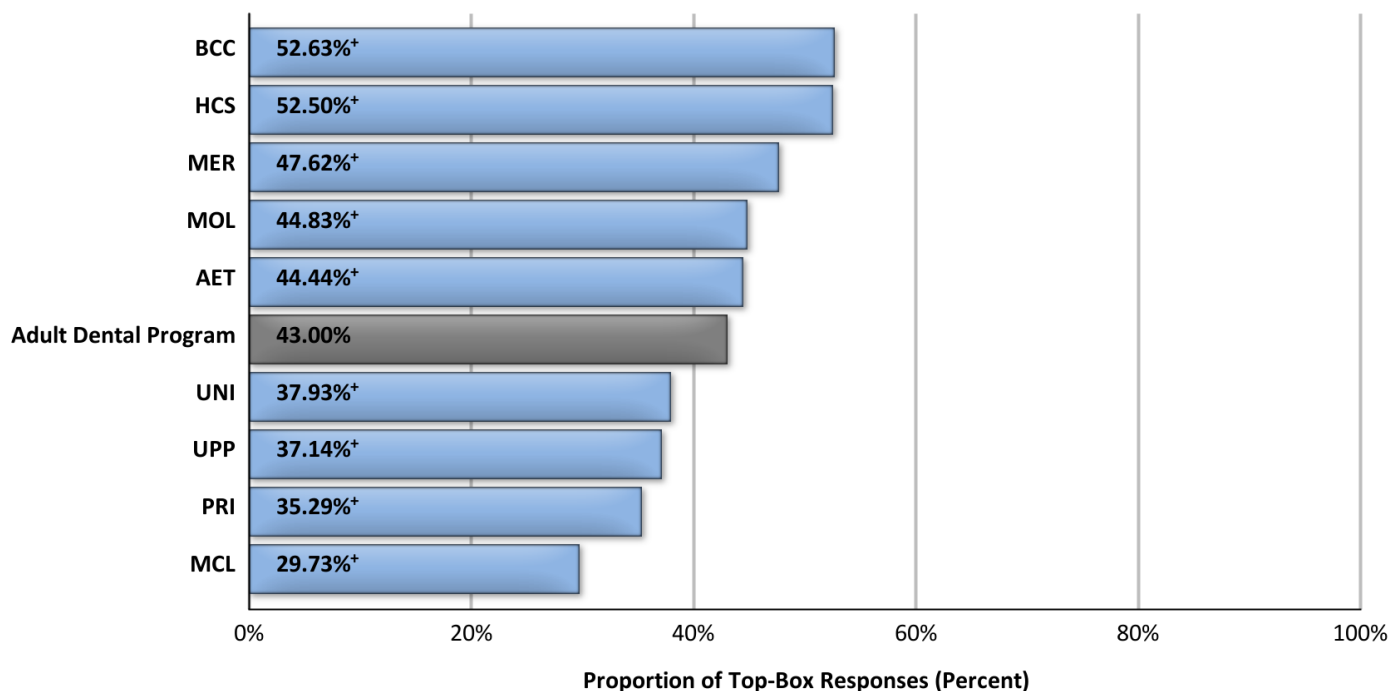
▼ Indicates the score is statistically significantly lower than the Adult Dental Program.

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

## Rating of Finding a Dentist

Figure 3-9 shows the top-box scores, including the MHP comparisons, for the *Rating of Finding a Dentist* global rating.

**Figure 3-9—MHP Comparisons: Rating of Finding a Dentist**



Statistical Significance Note: ▲ Indicates the score is statistically significantly higher than the Adult Dental Program.

▼ Indicates the score is statistically significantly lower than the Adult Dental Program.

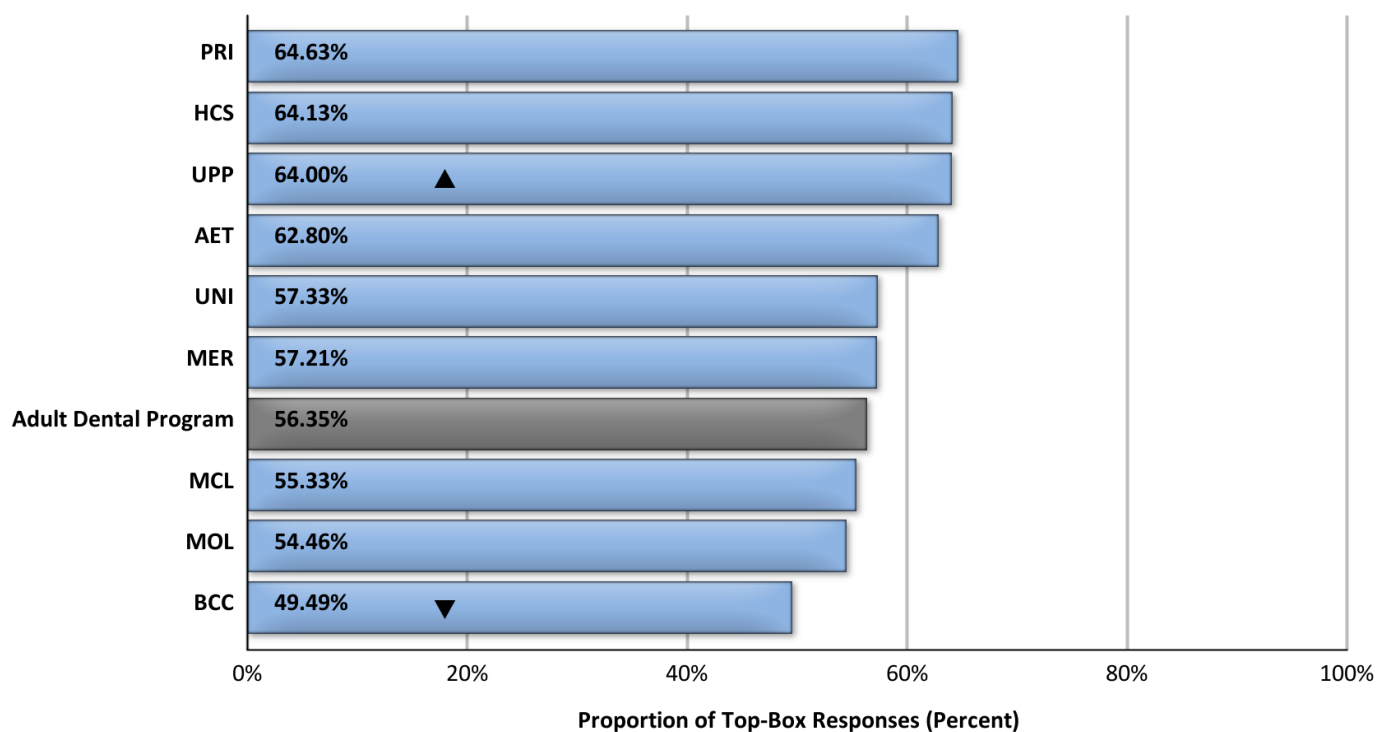
If no statistically significant differences were found, no indicators (▲ or ▼) appear on the figure.

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

## Rating of Dental Plan

Figure 3-10 shows the top-box scores, including the MHP comparisons, for the *Rating of Dental Plan* global rating.

**Figure 3-10—MHP Comparisons: Rating of Dental Plan**



Statistical Significance Note: ▲ Indicates the score is statistically significantly higher than the Adult Dental Program.

▼ Indicates the score is statistically significantly lower than the Adult Dental Program.

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

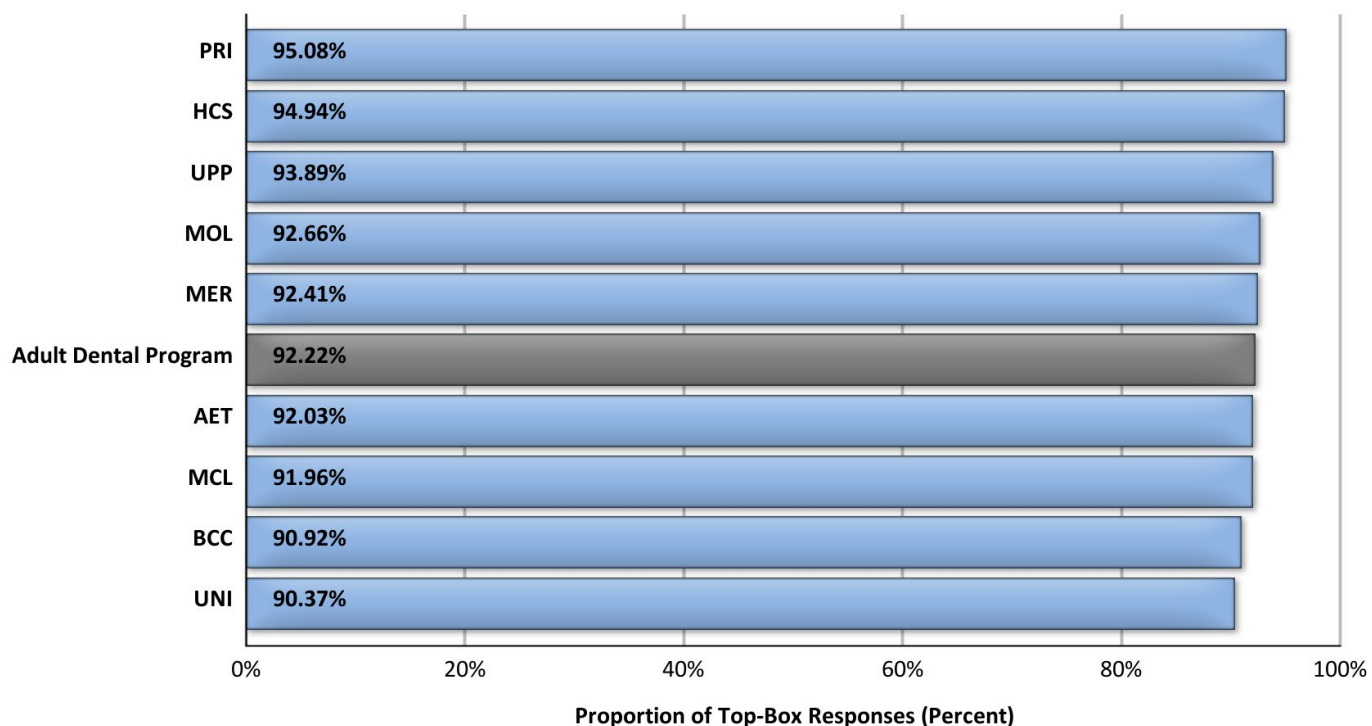


## Composite Measures

### Care from Dentists and Staff

Figure 3-11 shows the top-box scores, including the MHP comparisons, for the *Care from Dentists and Staff* composite measure.

**Figure 3-11—MHP Comparisons: Care from Dentists and Staff**



Statistical Significance Note: ▲ Indicates the score is statistically significantly higher than the Adult Dental Program.

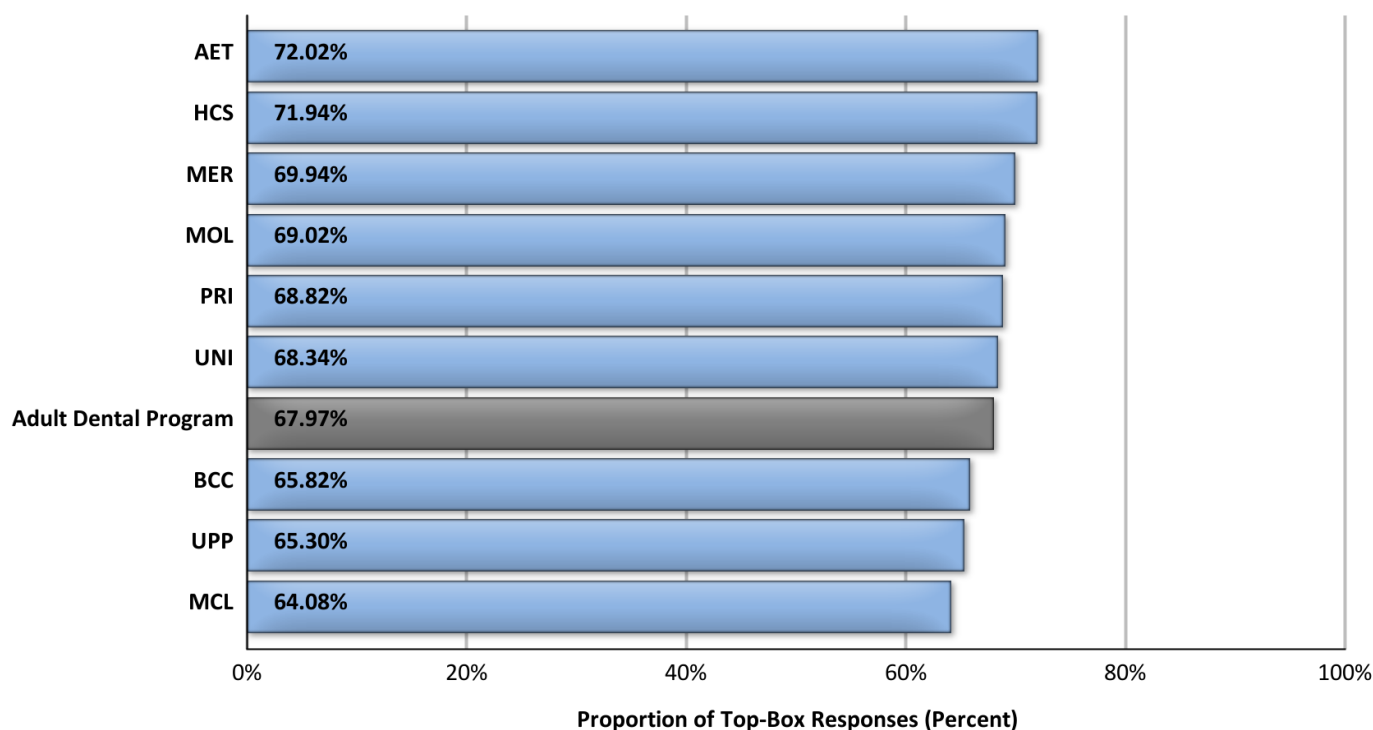
▼ Indicates the score is statistically significantly lower than the Adult Dental Program.

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

## Access to Dental Care

Figure 3-12 shows the top-box scores, including the MHP comparisons, for the *Access to Dental Care* composite measure.

**Figure 3-12—MHP Comparisons: Access to Dental Care**



Statistical Significance Note: ▲ Indicates the score is statistically significantly higher than the Adult Dental Program.

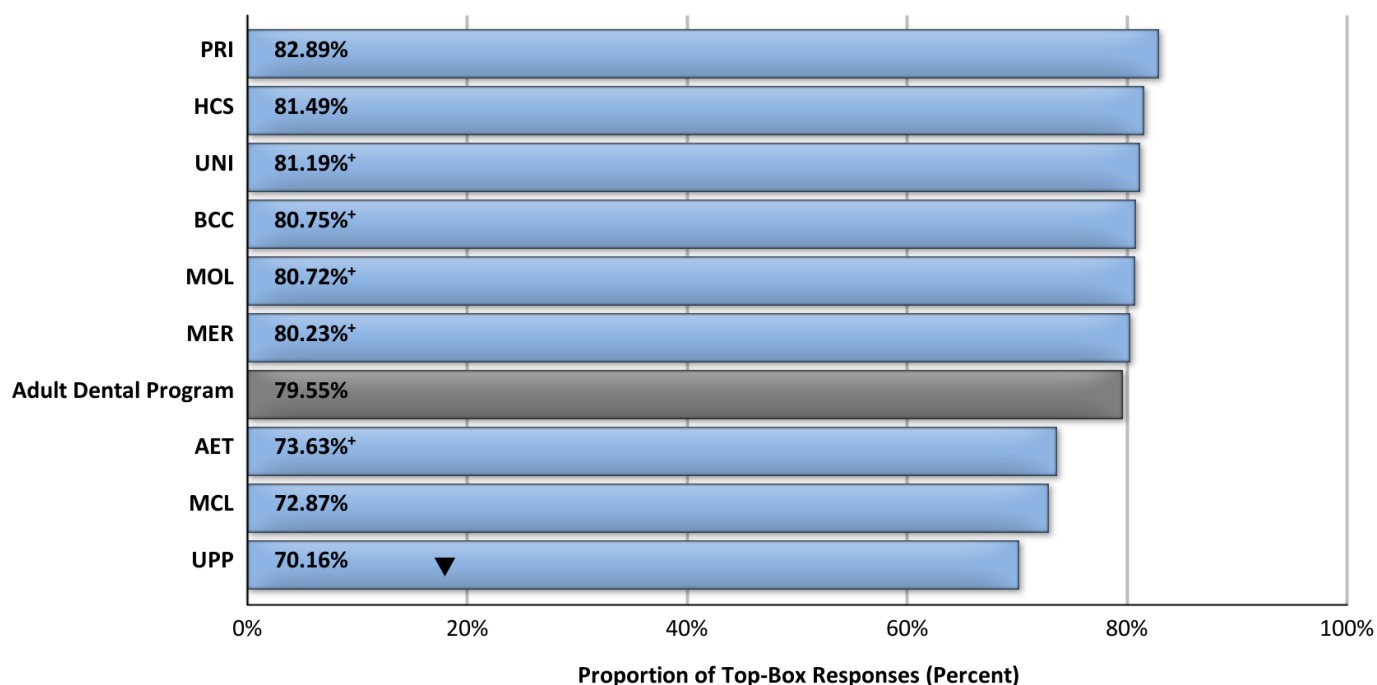
▼ Indicates the score is statistically significantly lower than the Adult Dental Program.

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

## Dental Plan Information and Services

Figure 3-13 shows the top-box scores, including the MHP comparisons, for the *Dental Plan Information and Services* composite measure.

**Figure 3-13—MHP Comparisons: Dental Plan Information and Services**



Statistical Significance Note: ▲ Indicates the score is statistically significantly higher than the Adult Dental Program.

▼ Indicates the score is statistically significantly lower than the Adult Dental Program.

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

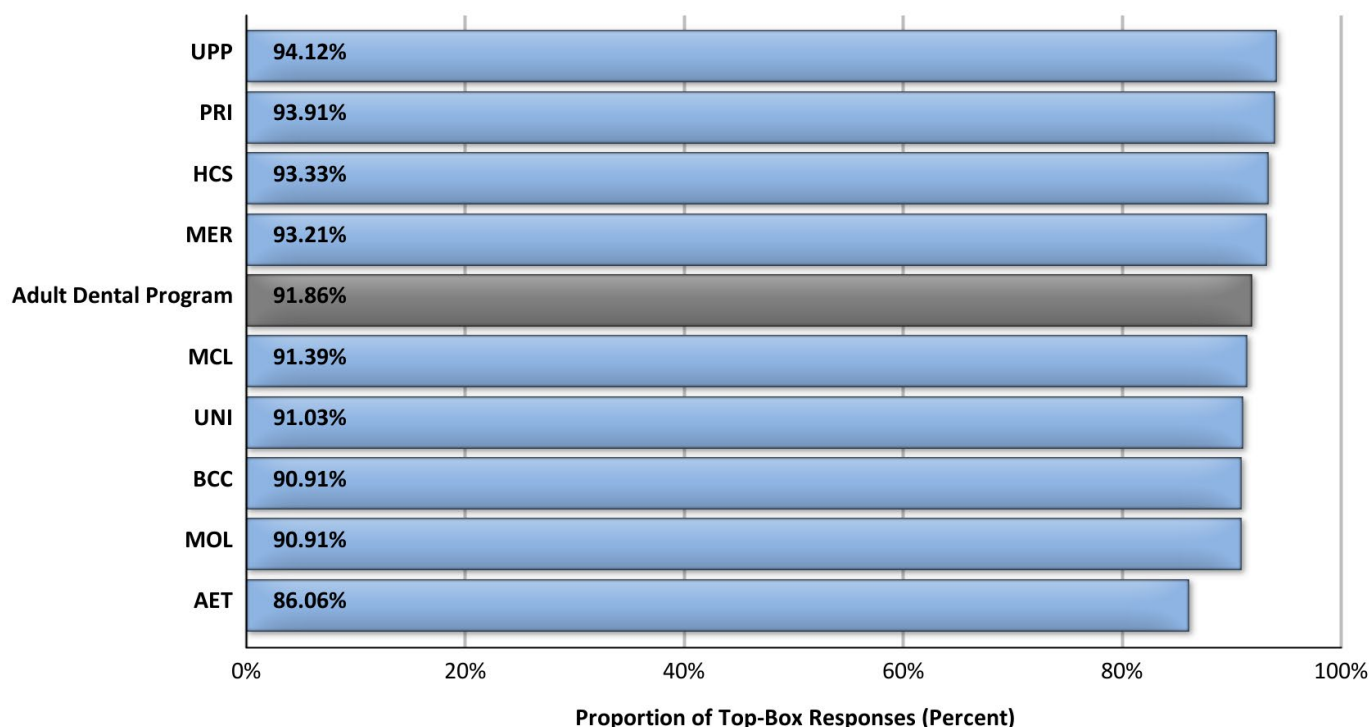
+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.

## Individual Item Measure

### Would Recommend Dental Plan

Figure 3-14 shows the top-box scores, including the MHP comparisons, for the *Would Recommend Dental Plan* individual item.

**Figure 3-14—MHP Comparisons: Would Recommend Dental Plan**



Statistical Significance Note: ▲ Indicates the score is statistically significantly higher than the Adult Dental Program.

▼ Indicates the score is statistically significantly lower than the Adult Dental Program.

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

## 4. Trend Analysis

HSAG compared the MHP and Adult Dental Program 2025 scores to the 2024 and 2023 scores to determine whether there were statistically significant differences.<sup>4-1</sup> Statistically significant results are denoted with triangles (▲ or ▼). Scores with fewer than 100 respondents are denoted with a cross (+). Caution should be exercised when evaluating scores derived from fewer than 100 respondents. For additional information on the trend analysis, please refer to page 2-8 of the Reader’s Guide section.

### Global Ratings

#### Rating of Regular Dentist

Table 4-1 shows the 2023, 2024, and 2025 top-box scores and trend analysis results for the *Rating of Regular Dentist* global rating.

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

Program/Plan Name	2023	2024	2025	Trend Results (2025 Compared to 2023)	Trend Results (2025 Compared to 2024)
<b>Adult Dental Program</b>	<b>62.84%</b>	<b>60.64%</b>	<b>63.81%</b>	—	—
AET	62.26%	57.14%	71.97%	—	▲
BCC	60.95%	57.65%	66.06%	—	—
HCS	70.80%	71.52%	73.26%	—	—
MCL	58.29%	62.67%	61.22%	—	—
MER	70.79%	60.51%	67.63%	—	—
MOL	59.75%	56.65%	60.38%	—	—
PRI	60.10%	66.04%	62.30%	—	—
UNI	56.65%	61.05%	59.16%	—	—
UPP	66.47%	63.73%	66.26%	—	—
▲ Indicates the 2025 score is statistically significantly higher than the trend year’s score. ▼ Indicates the 2025 score is statistically significantly lower than the trend year’s score. — Indicates the 2025 score is not statistically significantly different than the trend year’s score.					

<sup>4-1</sup> HSAG recalculated the 2023 scores to report scores out to two decimal places. Therefore, the 2023 results in this report will not match the 2023 report.

## Rating of All Dental Care

Table 4-2 shows the 2023, 2024, and 2025 top-box scores and trend analysis results for the *Rating of All Dental Care* global rating.

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

Program/Plan Name	2023	2024	2025	Trend Results (2025 Compared to 2023)	Trend Results (2025 Compared to 2024)
<b>Adult Dental Program</b>	<b>59.34%</b>	<b>56.97%</b>	<b>62.87%</b>	—	▲
AET	55.40%	55.36%	67.28%	▲	▲
BCC	60.63%	52.65%	60.50%	—	—
HCS	69.57%	65.28%	70.22%	—	—
MCL	59.27%	61.37%	61.07%	—	—
MER	59.39%	55.14%	65.00%	—	▲
MOL	57.48%	60.45%	63.37%	—	—
PRI	62.59%	59.54%	65.95%	—	—
UNI	53.60%	52.87%	58.22%	—	—
UPP	66.83%	65.00%	67.90%	—	—
▲ Indicates the 2025 score is statistically significantly higher than the trend year's score. ▼ Indicates the 2025 score is statistically significantly lower than the trend year's score. — Indicates the 2025 score is not statistically significantly different than the trend year's score.					

## Rating of Finding a Dentist

Table 4-3 shows the 2023, 2024, and 2025 top-box scores and trend analysis results for the *Rating of Finding a Dentist* global rating.

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

Program/Plan Name	2023	2024	2025	Trend Results (2025 Compared to 2023)	Trend Results (2025 Compared to 2024)
<b>Adult Dental Program</b>	<b>34.89%</b>	<b>33.36%</b>	<b>43.00%</b>	—	▲
AET	21.74% <sup>+</sup>	40.63% <sup>+</sup>	44.44% <sup>+</sup>	—	—
BCC	39.02% <sup>+</sup>	30.77% <sup>+</sup>	52.63% <sup>+</sup>	—	▲
HCS	29.63% <sup>+</sup>	30.56% <sup>+</sup>	52.50% <sup>+</sup>	—	▲
MCL	27.27% <sup>+</sup>	34.38% <sup>+</sup>	29.73% <sup>+</sup>	—	—
MER	42.86% <sup>+</sup>	33.33% <sup>+</sup>	47.62% <sup>+</sup>	—	—
MOL	28.00% <sup>+</sup>	36.11% <sup>+</sup>	44.83% <sup>+</sup>	—	—
PRI	31.82% <sup>+</sup>	37.84% <sup>+</sup>	35.29% <sup>+</sup>	—	—
UNI	35.14% <sup>+</sup>	29.27% <sup>+</sup>	37.93% <sup>+</sup>	—	—
UPP	28.95% <sup>+</sup>	29.41% <sup>+</sup>	37.14% <sup>+</sup>	—	—
<p>▲ Indicates the 2025 score is statistically significantly higher than the trend year's score.  ▼ Indicates the 2025 score is statistically significantly lower than the trend year's score.  — Indicates the 2025 score is not statistically significantly different than the trend year's score.  + Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.</p>					

## Rating of Dental Plan

Table 4-4 shows the 2023, 2024, and 2025 top-box scores and trend analysis results for the *Rating of Dental Plan* global rating.

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

Program/Plan Name	2023	2024	2025	Trend Results (2025 Compared to 2023)	Trend Results (2025 Compared to 2024)
<b>Adult Dental Program</b>	<b>48.11%</b>	<b>53.59%</b>	<b>56.35%</b>	▲	—
AET	42.75%	47.56%	62.80%	▲	▲
BCC	44.29%	51.41%	49.49%	—	—
HCS	49.72%	62.69%	64.13%	▲	—
MCL	48.18%	54.35%	55.33%	—	—
MER	49.81%	51.44%	57.21%	—	—
MOL	47.66%	56.28%	54.46%	—	—
PRI	47.79%	54.44%	64.63%	▲	▲
UNI	48.88%	55.06%	57.33%	—	—
UPP	58.47%	56.98%	64.00%	—	—
▲ Indicates the 2025 score is statistically significantly higher than the trend year's score. ▼ Indicates the 2025 score is statistically significantly lower than the trend year's score. — Indicates the 2025 score is not statistically significantly different than the trend year's score.					



## Composite Measures

### Care from Dentists and Staff

Table 4-5 shows the 2023, 2024, and 2025 top-box scores and trend analysis results for the *Care from Dentists and Staff* composite measure.

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

Program/Plan Name	2023	2024	2025	Trend Results (2025 Compared to 2023)	Trend Results (2025 Compared to 2024)
<b>Adult Dental Program</b>	<b>92.79%</b>	<b>92.59%</b>	<b>92.22%</b>	—	—
AET	93.89%	87.76%	92.03%	—	—
BCC	92.84%	92.72%	90.92%	—	—
HCS	96.19%	94.76%	94.94%	—	—
MCL	91.68%	92.74%	91.96%	—	—
MER	93.76%	93.21%	92.41%	—	—
MOL	92.55%	91.77%	92.66%	—	—
PRI	93.19%	94.76%	95.08%	—	—
UNI	89.93%	90.36%	90.37%	—	—
UPP	96.45%	92.57%	93.89%	▼	—
<p>▲ Indicates the 2025 score is statistically significantly higher than the trend year's score.  ▼ Indicates the 2025 score is statistically significantly lower than the trend year's score.  — Indicates the 2025 score is not statistically significantly different than the trend year's score.</p>					

## Access to Dental Care

Table 4-6 shows the 2023, 2024, and 2025 scores and trend analysis results for the *Access to Dental Care* composite measure.

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

Program/Plan Name	2023	2024	2025	Trend Results (2025 Compared to 2023)	Trend Results (2025 Compared to 2024)
<b>Adult Dental Program</b>	<b>66.67%</b>	<b>65.77%</b>	<b>67.97%</b>	—	—
AET	67.17% <sup>+</sup>	60.14%	72.02%	—	▲
BCC	70.13%	67.64%	65.82%	—	—
HCS	74.17%	74.93%	71.94%	—	—
MCL	61.76%	62.69%	64.08%	—	—
MER	66.76%	63.80%	69.94%	—	—
MOL	63.69%	68.83%	69.02%	—	—
PRI	69.33%	69.86%	68.82%	—	—
UNI	66.00%	62.81%	68.34%	—	—
UPP	69.76%	63.48%	65.30%	—	—
▲ Indicates the 2025 score is statistically significantly higher than the trend year's score. ▼ Indicates the 2025 score is statistically significantly lower than the trend year's score. — Indicates the 2025 score is not statistically significantly different than the trend year's score. + Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.					

## Dental Plan Information and Services

Table 4-7 shows the 2023, 2024, and 2025 top-box scores and trend analysis results for the *Dental Plan Information and Services* composite measure.

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

Program/Plan Name	2023	2024	2025	Trend Results (2025 Compared to 2023)	Trend Results (2025 Compared to 2024)
<b>Adult Dental Program</b>	<b>73.21%</b>	<b>78.30%</b>	<b>79.55%</b>	▲	—
AET	70.06% <sup>+</sup>	72.60% <sup>+</sup>	73.63% <sup>+</sup>	—	—
BCC	76.76%	78.32%	80.75% <sup>+</sup>	—	—
HCS	80.88% <sup>+</sup>	86.08% <sup>+</sup>	81.49%	—	—
MCL	69.38%	80.69%	72.87%	—	—
MER	73.53%	80.63%	80.23% <sup>+</sup>	—	—
MOL	73.24% <sup>+</sup>	78.13%	80.72% <sup>+</sup>	—	—
PRI	71.87%	77.08%	82.89%	▲	—
UNI	70.02% <sup>+</sup>	71.97%	81.19% <sup>+</sup>	▲	▲
UPP	80.93%	76.57%	70.16%	▼	—
▲ Indicates the 2025 score is statistically significantly higher than the trend year's score. ▼ Indicates the 2025 score is statistically significantly lower than the trend year's score. — Indicates the 2025 score is not statistically significantly different than the trend year's score. + Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.					

## Individual Item Measure

### Would Recommend Dental Plan

Table 4-8 shows the 2023, 2024, and 2025 top-box scores and trend analysis results for the *Would Recommend Dental Plan* individual item.

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

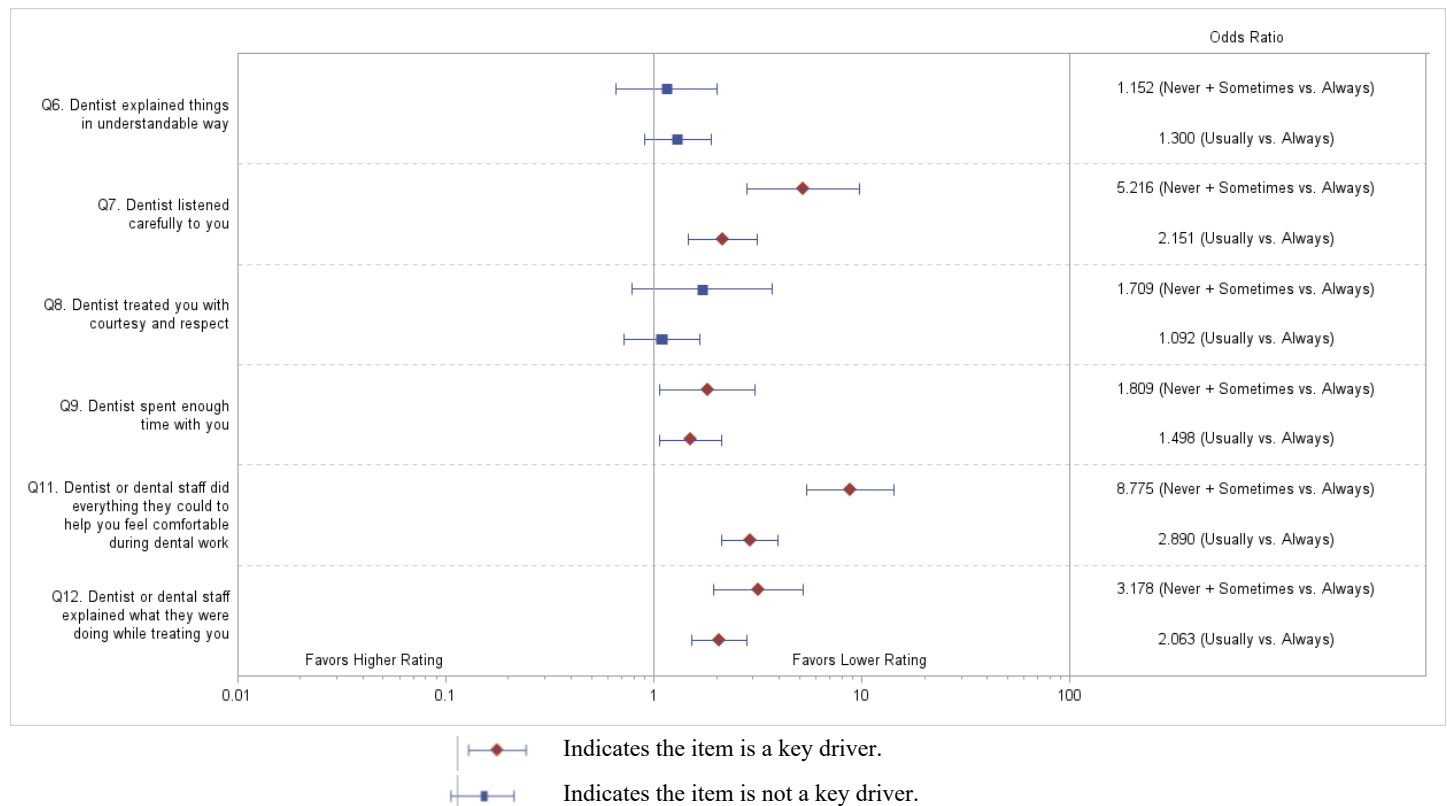
Program/Plan Name	2023	2024	2025	Trend Results (2025 Compared to 2023)	Trend Results (2025 Compared to 2024)
<b>Adult Dental Program</b>	<b>85.79%</b>	<b>90.24%</b>	<b>91.86%</b>	<b>▲</b>	<b>—</b>
AET	80.58%	83.54%	86.06%	—	—
BCC	87.61%	90.32%	90.91%	—	—
HCS	85.87%	96.37%	93.33%	▲	—
MCL	86.45%	92.75%	91.39%	—	—
MER	85.27%	90.16%	93.21%	▲	—
MOL	84.43%	89.40%	90.91%	▲	—
PRI	86.25%	90.04%	93.91%	▲	—
UNI	83.26%	88.35%	91.03%	▲	—
UPP	94.26%	91.06%	94.12%	—	—
▲ Indicates the 2025 score is statistically significantly higher than the trend year's score. ▼ Indicates the 2025 score is statistically significantly lower than the trend year's score. — Indicates the 2025 score is not statistically significantly different than the trend year's score.					

## 5. Key Drivers of Member Experience Analysis

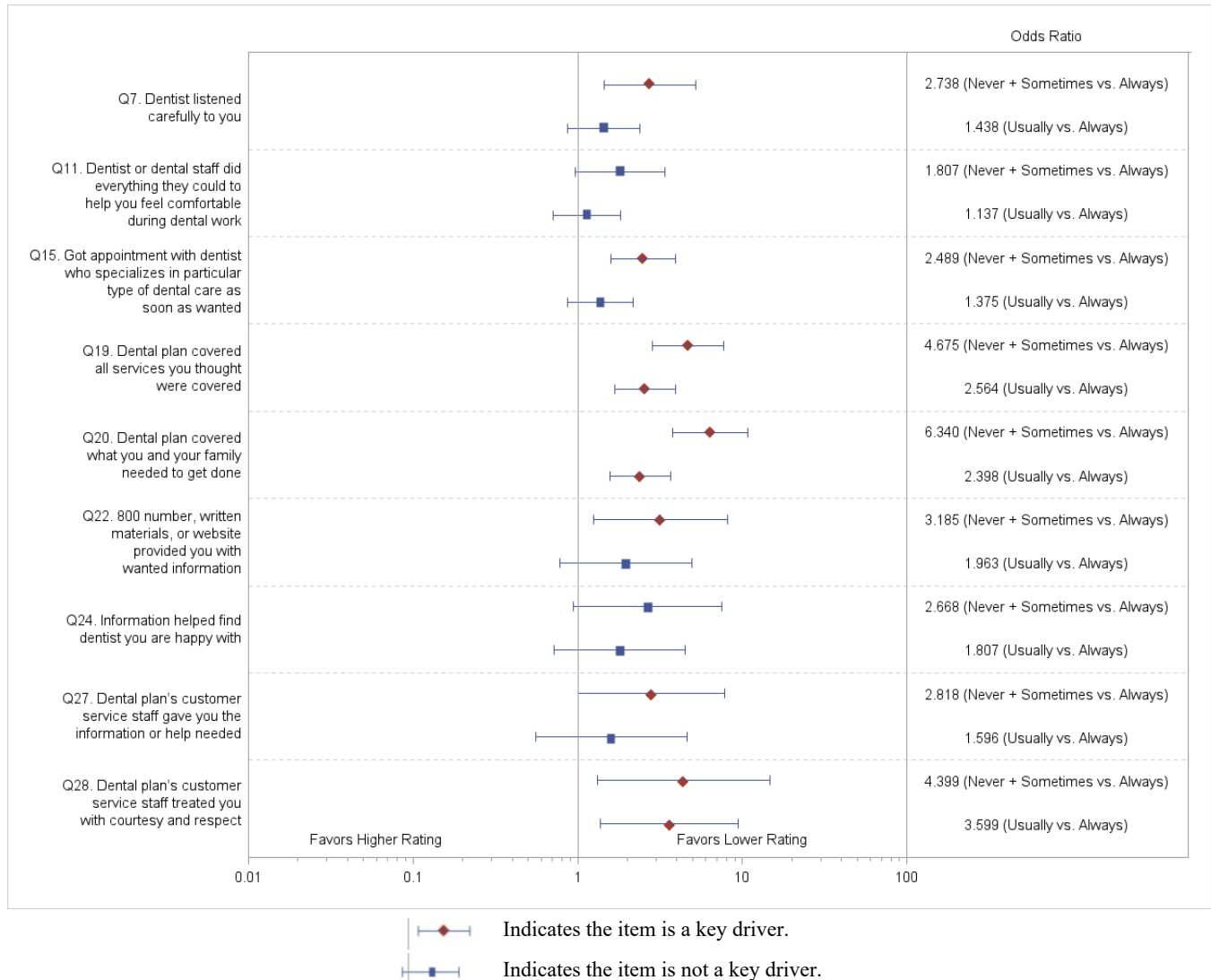
HSAG performed an analysis of key drivers of member experience for the following measures: *Rating of All Dental Care*, *Rating of Dental Plan*, and *Would Recommend Dental Plan*. Key drivers of member experience are defined as those items for which the odds ratio is statistically significantly greater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

Figure 5-1 through Figure 5-3 show the key drivers of member experience analysis results for each of the three measures for the Adult Dental Program. The items identified as key drivers are indicated with a red diamond.

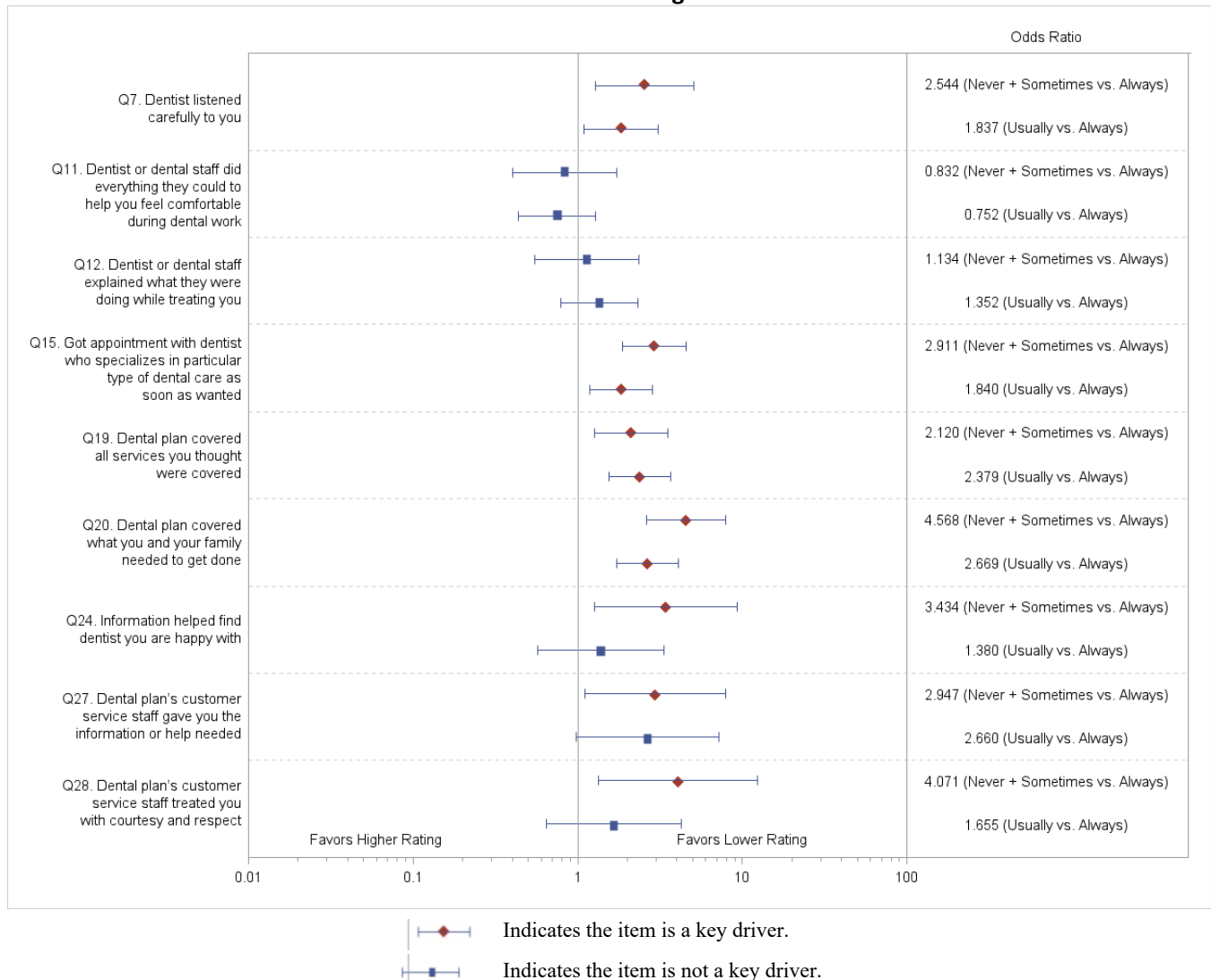
**Figure 5-1—Key Drivers of Member Experience Analysis: Rating of All Dental Care—Adult Dental Program**



**Figure 5-2—Key Drivers of Member Experience Analysis: Rating of Dental Plan—Adult Dental Program**



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



## Appendix A. Survey Instrument

The survey instrument administered in 2025 was the CAHPS Dental Survey. This section provides a copy of the survey instrument.



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 [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?

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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

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 1 2 3 4 5 6 7 8 9 10

Worst Best  
Dental Care Dental Care  
Possible Possible

### DENTAL PLAN

The next set of questions asks about your dental plan. For these questions, answer only about your dental plan.

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

21. In the last 12 months, did you try to find out how your dental plan works by calling their 800 number, visiting their website, or reading printed materials?

☐ Yes  
☐ No → Go to Question 23

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

23. In the last 12 months, did you use any information from the dental plan to help you find a new dentist?

☐ Yes  
☐ No → Go to Question 26

24. Did this information help you find a dentist you were happy with?

☐ Definitely yes  
☐ Somewhat yes  
☐ Somewhat no  
☐ Definitely no

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 1 2 3 4 5 6 7 8 9 10

Extremely Extremely  
Difficult Easy

26. In the last 12 months, did you try to get information or help from your dental plan's customer service?

☐ Yes  
☐ No → Go to Question 29

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?

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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**