2020 Healthy Michigan Plan CAHPS Dental Survey Report

Michigan Department of Health and Human Services

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HSAG HEALTH SERVICES ADVISORY GROUP

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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 MDHHS Healthy Michigan Plan (HMP) health plans.[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 in the HMP Program. Table 1-1 provides a list of the HMP health plans that participated in the survey.

Table 1-1—Participating Health Plans

Plan Name
Aetna Better Health of Michigan
Blue Cross Complete of Michigan
HAP Empowered
McLaren Health Plan
Meridian Health Plan of Michigan
Molina Healthcare of Michigan
Priority Health Choice, Inc.
Total Health Care, Inc.
UnitedHealthcare Community Plan
Upper Peninsula Health Plan

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

Report Overview

Plan-level and aggregate statewide results (i.e., the MDHHS HMP Program) presented in this report include:[1-2]

- Four global ratings: *Rating of Regular Dentist*, *Rating of All Dental Care*, *Rating of Finding a Dentist*, and *Rating of Dental Plan*.
- Three composite measures: *Care from Dentists and Staff*, *Access to Dental Care*, and *Dental Plan Information and Services*.
- One individual item measure: *Would Recommend Dental Plan*.

Key Findings

Survey Demographics and Dispositions

Table 1-2 provides an overview of the demographic characteristics and survey dispositions of members who completed a survey for the MDHHS HMP Program. Please note, some percentages displayed in the table below may not total 100 percent due to rounding.

Table 1-2—Member Demographics and Survey Dispositions

Age	Gender

Age:
- 19 to 24: 6.9%
- 25 to 34: 14.4%
- 35 to 44: 17.1%
- 45 to 54: 24.9%
- 55 and Older: 36.7%

Gender:
- Male: 39.4%
- Female: 60.6%
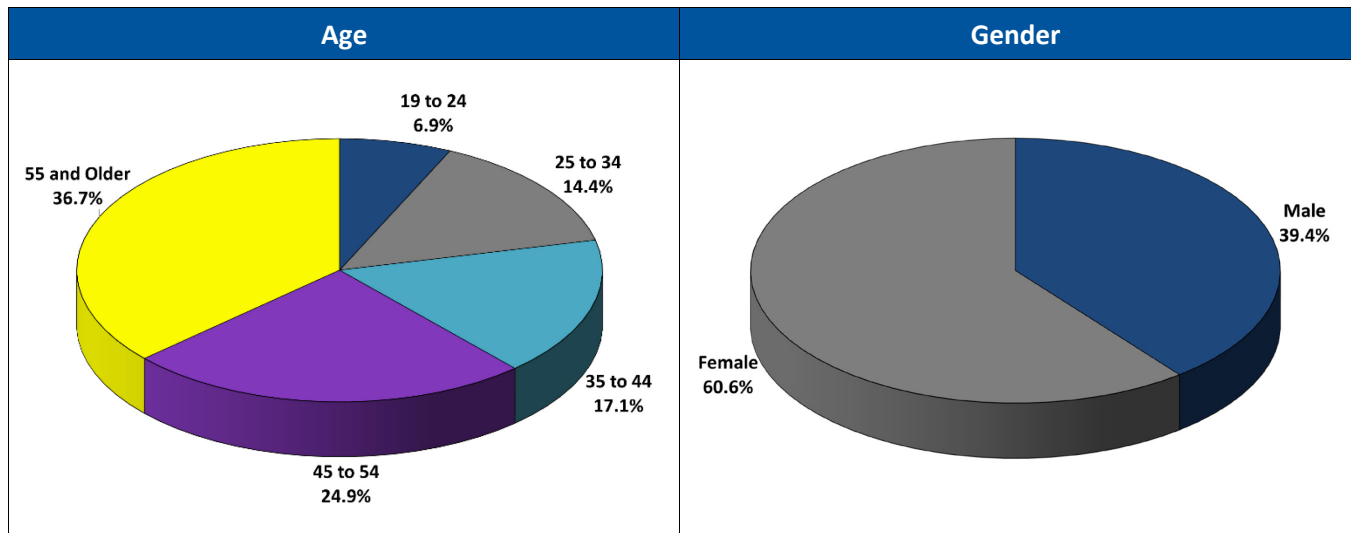
[1-2] The MDHHS HMP Program aggregate results presented in this report are derived from the combined results of the participating HMP health plans.

Race

Asian 2.8%
Other 5.5%
Multi-Racial 5.4%
Black 18.2%
White 68.1%

Ethnicity

Hispanic 4.8%
Non-Hispanic 95.2%

Education

College Graduate 15.7%
8th Grade or Less 1.4%
Some High School 9.6%
Some College 35.5%
High School Graduate 37.7%

Dental Health Status

Poor 9.4%
Excellent 8.5%
Fair 21.7%
Very Good 25.1%
Good 35.3%

Survey Dispositions

RESPONSE RATE = 38.97%

Respondents 4,860
Non-Respondents 7,612
Ineligible 195
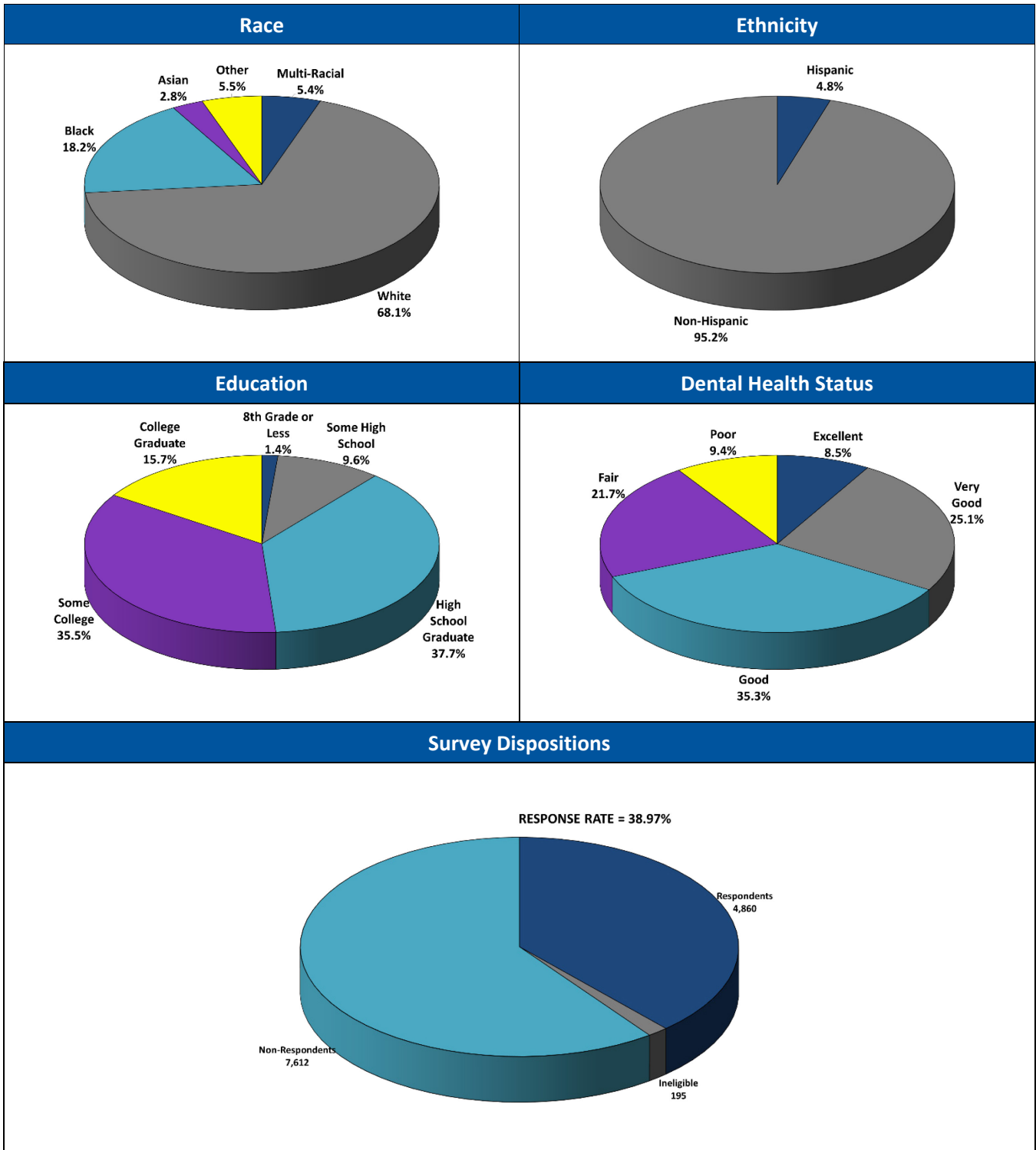
Statewide Comparisons

HSAG calculated top-box scores for each measure. HSAG compared the HMP health plan results to the MDHHS HMP Program average to determine if plan results were statistically significantly different from the MDHHS HMP Program average. Table 1-3 shows the statistically significant results of this analysis. There were no statistically significant differences for the following measures: *Rating of Regular Dentist*, *Rating of Finding a Dentist*, *Access to Dental Care*, and *Dental Plan Information and Services*.

Table 1-3—Statewide Comparisons Summary

Plan Name	Rating of Dental Plan	Rating of All Dental Care	Care from Dentists and Staff	Would Recommend Dental Plan
Aetna Better Health of Michigan	—	—	—	↓
Blue Cross Complete of Michigan	—	—	—	—
HAP Empowered	—+	—	—+	—+
McLaren Health Plan	—	—	—	↑
Meridian Health Plan of Michigan	—	—	—	—
Molina Healthcare of Michigan	—	—	↓	—
Priority Health Choice, Inc.	—	—	↑	↑
Total Health Care, Inc.	↓	—	—	—
UnitedHealthcare Community Plan	↓	↓	—	—
Upper Peninsula Health Plan	↑	↑	↑	↑
+ *Indicates fewer than 100 responses. Caution should be exercised when evaluating these results.*				
↑ *Indicates the plan's score is statistically significantly above the MDHHS HMP Program average.*				
↓ *Indicates the plan's score is statistically significantly below the MDHHS HMP Program average.*				
— *Indicates the plan's score is not statistically significantly different than the MDHHS HMP Program average.*				

Dental Plan Performance Measures

The Adult 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.

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

Table 2-1—Adult CAHPS Dental Survey Measures

Global Ratings	Composite Measures	Individual Item Measure
Rating of Regular Dentist	*Care from Dentists and Staff*	*Would Recommend Dental Plan*
Rating of All Dental Care	*Access to Dental Care*	
Rating of Finding a Dentist	*Dental Plan Information and Services*	
Rating of Dental Plan		

Table 2-2 presents the survey language and response options for the measures.

Table 2-2—Question Language and Response Categories

Question Language	Response Categories
Global Ratings	
Rating of Regular Dentist	
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
Rating of All Dental Care	
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
Rating of Finding a Dentist	
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
Rating of Dental Plan	

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	

Care from Dentists and Staff	
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
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

Access to Dental Care	
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[2-1]
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[2-2]
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, 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

Dental Plan Information and Services	
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

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[2-1] "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 composite (i.e., this response is treated as missing data).

[2-2] "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 composite (i.e., this response is treated as missing data).

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
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	
Would Recommend Dental Plan	
31. 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 MDHHS 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 October 31, 2019.
- Were currently enrolled in a health plan (e.g., Aetna Better Health of Michigan or Blue Cross Complete of Michigan).
- Had been continuously enrolled in the health plan for at least 11 out of 12 months during the measurement year (November 1, 2018 to October 31, 2019).
- Had a paid or denied dental claim during the measurement year.

A sample of 1,350 members was selected from each health plan for inclusion in the survey. No more than one member per household was selected as part of the survey samples. HAP Empowered had fewer than 1,350 adult members who were eligible for inclusion in the survey; therefore, each member from HAP Empowered's eligible population was included in the sample following deduplication. 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.

Survey Protocol

The survey administration protocol employed was a mixed-mode methodology, which allowed for two methods by which members could complete a survey. The first phase, or mail phase, consisted of sampled members receiving a survey via mail. All sampled members received an English version of the survey, with the option of completing the survey in Spanish. Non-respondents received a reminder postcard, followed by a second survey mailing and postcard reminder.

The second phase, or telephone phase, consisted of Computer Assisted Telephone Interviewing (CATI) of members who did not mail in a completed survey. Up to three CATI calls to each non-respondent were attempted. It has been shown that the addition of the telephone phase aids in the reduction of non-response bias by increasing the number of respondents who are more demographically representative of a plan's population.[2-3]

Table 2-3 shows the mixed-mode (i.e., mail followed by telephone follow-up) timeline used for the survey administration.

Table 2-3—CAHPS Dental Survey Mixed-Mode Methodology Timeline

Task	Timeline
Send first questionnaire with cover letter to the member.	0 days
Send a postcard reminder to non-respondents seven days after mailing the first questionnaire.	7 days
Send a second questionnaire (and letter) to non-respondents 28 days after mailing the first questionnaire.	28 days
Send a second postcard reminder to non-respondents seven days after mailing the second questionnaire.	35 days
Initiate CATI interviews for non-respondents 28 days after mailing the second questionnaire.	56 days
Initiate systematic contact for all non-respondents such that up to three telephone calls are attempted at different times of the day, on different days of the week, and in different weeks.	56–91 Days
Telephone follow-up sequence completed (i.e., completed interviews obtained or maximum calls reached for all non-respondents) 35 days after initiation.	91 days

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[2-3] Fowler FJ Jr., Gallagher PM, Stringfellow VL, et al. "Using Telephone Interviews to Reduce Nonresponse Bias to Mail Surveys of Health Plan Members." *Medical Care*. 2002; 40(3): 190-200.

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 developers of CAHPS, to comprehensively assess member experience. In addition to individual plan results, HSAG calculated an MDHHS HMP Program average. HSAG combined results from the HMP health plans to calculate the HMP Program aggregate scores. 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), were mentally or physically incapacitated, or had a language barrier.

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

Respondent Demographics

The demographics analysis evaluated demographic information of adult members based on responses to the surveys. The demographic characteristics included age, gender, race, ethnicity, level of education, and dental health status. Caution should be exercised when extrapolating the survey results to the entire population if the respondent population differs significantly from the actual population of the plan.

Statewide Comparisons

Global Ratings, Composite Measures, and Individual Item Measure

HSAG calculated top-box scores for each measure. The scoring involved 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

For purposes of the dental plan comparisons, HSAG calculated a weighted score for the MDHHS HMP Program's aggregate based on the total eligible population for each HMP health plan.

Health Plan Comparisons

The results of the HMP health plans were compared to the MDHHS HMP Program average. Two types of hypothesis tests were applied to these results. First, a global F test was calculated, which determined whether the difference between each HMP health plan's mean was significant. If the F test demonstrated plan-level differences (i.e., p value < 0.05), then a t test was performed for each HMP health plan. The t test determined whether each HMP health plan's mean was statistically significantly different from the MDHHS HMP Program average. 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.

Key Drivers of Member Experience Analysis

HSAG performed an analysis of key drivers of member experience for the following measures: *Rating of Dental Plan*, *Rating of All Dental Care*, and *Would Recommend Dental Plan*. The purpose of the key drivers of experience analysis is to help decision makers identify specific aspects of care that will most benefit from QI activities. The analysis provides information on: 1) how **well** the MDHHS HMP Program is performing on the survey item, and 2) how **important** that item is to overall experience.

Table 2-4 depicts the survey items that were analyzed for each measure in the key drivers of member experience analysis as indicated by a checkmark (✓).

Table 2-4–Correlation Matrix

	Rating of All Dental Care	Rating of Dental Plan	Would Recommend Dental Plan
Q6. Dentist Explained Things in Understandable Way	✓	✓	✓
Q7. Dentist Listened Carefully	✓	✓	✓
Q8. Dentist Treated Patient with Courtesy and Respect	✓	✓	✓
Q9. Dentist Spent Enough Time with Patient	✓	✓	✓
Q11. Dentists or Dental Staff Helped Patient Feel Comfortable During Dental Work	✓	✓	✓
Q12. Dentists or Dental Staff Explained During Treatment	✓	✓	✓
Q13. Received Appointment as Soon as Wanted	✓	✓	✓
Q14. Saw Dentist as Soon as Wanted	✓	✓	✓

Q15. Received Appointment as Soon as Wanted for Specialized Dentist and Dental Care	✓	✓	✓
Q16. Spent More Than 15 Minutes in Waiting Room Before Appointment	✓	✓	✓
Q17. Someone Explained Delay for Spending More Than 15 Minutes in Waiting Room Before Appointment	✓	✓	✓
Q19. Dental Plan Covered All Services Thought Covered		✓	✓
Q20. Dental Plan Covered What Needed		✓	✓
Q22. 800 Number, Written Materials, or Website Provided with Wanted Information		✓	✓
Q24. Information Helped Find Dentist Patient Happy With		✓	✓
Q27. Dental Plan's Customer Service Staff Gave the Information or Help Needed		✓	✓
Q28. Dental Plan's Customer Service Staff Treated Patient with Courtesy and Respect		✓	✓

The performance on a survey item was measured by calculating a problem score, in which a negative experience with care was defined as a problem and assigned a "1," and a positive experience with care (i.e., non-negative) was assigned a "0." The higher the problem score, the lower the member experience with the aspect of service measured by that question. The problem score could range from 0 to 1. Table 2-5 depicts the problem score assignments for the different response categories.

Table 2-5—Assignment of Problem Scores

Response Category	Classification	Code
Never/Sometimes/Usually/Always Format[2-4]		
Never	Problem	1
Sometimes	Problem	1
Usually	Not a problem	0
Always	Not a problem	0
No Answer	Not classified	Missing
Definitely Yes/Somewhat Yes/Somewhat No/Definitely No		
Definitely No	Problem	1
Somewhat No	Problem	1
Somewhat Yes	Not a problem	0
Definitely Yes	Not a problem	0
No Answer	Not classified	Missing

[2-4] The response option classification for Question 16 was reversed so responses of "Sometimes" and "Never" were considered "not a problem."

For each item evaluated, HSAG calculated the relationship between the item's problem score 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 overall problem score and 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 r is used in the analysis, and the range for r is 0 to 1. An r of zero indicates no relationship between the response to a question and the member's experience. As r increases, the importance of the question to the respondent's overall experience increases.

A problem score at or above the median problem score is considered to be "high." A correlation at or above the median correlation is considered to be "high." Key drivers are those items for which the problem score and correlation are both at or above their respective medians. The median, rather than the mean, is used to ensure that extreme problem scores and correlations do not have disproportionate influence in prioritizing individual questions.

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.

Baseline Results

It is important to note that in state fiscal year 2019–2020, members in the MDHHS HMP Program who received dental services were surveyed for the first time. The 2020 results presented in the report represent a baseline assessment of members' experiences of the dental care and services received through the HMP health plans.

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 MDHHS HMP Program. 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. Therefore, MDHHS should consider the potential for non-response bias when interpreting the survey results.

Who Responded to the Survey

A total of 12,667 surveys were mailed to members enrolled in the MDHHS HMP Program. A total of 4,860 surveys were completed for the MDHHS HMP Program.

Table 3-1 shows the total number of members sampled, the number of surveys completed, the number of ineligible members, and the response rates.

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

	Sample Size	Completes	Ineligibles	Response Rates
MDHHS HMP Program	**12,667**	**4,860**	**195**	**38.97%**
Aetna Better Health of Michigan	1,350	417	12	31.17%
Blue Cross Complete of Michigan	1,350	526	21	39.58%
HAP Empowered	517	126	6	24.66%
McLaren Health Plan	1,350	571	10	42.61%
Meridian Health Plan of Michigan	1,350	536	21	40.33%
Molina Healthcare of Michigan	1,350	503	24	37.93%
Priority Health Choice, Inc.	1,350	559	15	41.87%
Total Health Care, Inc.	1,350	531	24	40.05%
UnitedHealthcare Community Plan	1,350	483	52	37.21%
Upper Peninsula Health Plan	1,350	608	10	45.37%

Respondent Demographics

Table 3-2 depicts the age of members who completed a survey.

Table 3-2—Respondent Demographics: Age

	19 to 24	25 to 34	35 to 44	45 to 54	55 and older
MDHHS HMP Program	**6.9%**	**14.4%**	**17.1%**	**24.9%**	**36.7%**
Aetna Better Health of Michigan	6.1%	16.5%	13.7%	27.4%	36.3%
Blue Cross Complete of Michigan	5.3%	14.5%	16.7%	27.5%	35.9%
HAP Empowered	2.0%	5.9%	22.5%	29.4%	40.2%
McLaren Health Plan	5.5%	13.3%	18.3%	24.4%	38.6%
Meridian Health Plan of Michigan	8.2%	16.0%	17.9%	22.6%	35.2%
Molina Healthcare of Michigan	8.6%	12.6%	18.6%	26.7%	33.6%
Priority Health Choice, Inc.	6.0%	13.9%	15.1%	23.8%	41.1%
Total Health Care, Inc.	7.0%	16.0%	16.7%	25.6%	34.7%
UnitedHealthcare Community Plan	11.9%	17.7%	18.1%	26.0%	26.3%
Upper Peninsula Health Plan	5.5%	12.4%	16.6%	21.2%	44.2%
Please note, percentages may not total 100% due to rounding.					

Table 3-3 depicts the gender of members who completed a survey.

Table 3-3—Respondent Demographics: Gender

	Male	Female
MDHHS HMP Program	**39.4%**	**60.6%**
Aetna Better Health of Michigan	39.3%	60.7%
Blue Cross Complete of Michigan	44.2%	55.8%
HAP Empowered	44.7%	55.3%
McLaren Health Plan	39.3%	60.7%
Meridian Health Plan of Michigan	37.1%	62.9%
Molina Healthcare of Michigan	38.2%	61.8%
Priority Health Choice, Inc.	34.3%	65.7%
Total Health Care, Inc.	42.3%	57.7%
UnitedHealthcare Community Plan	41.0%	59.0%
Upper Peninsula Health Plan	38.6%	61.4%
Please note, percentages may not total 100% due to rounding.		

Table 3-4 depicts the race of members who completed a survey.

Table 3-4—Respondent Demographics: Race

	White	Black	Asian	Other	Multi-Racial
MDHHS HMP Program	**68.1%**	**18.2%**	**2.8%**	**5.5%**	**5.4%**
Aetna Better Health of Michigan	42.8%	47.3%	2.3%	3.7%	4.0%
Blue Cross Complete of Michigan	60.9%	22.5%	3.8%	5.4%	7.4%
HAP Empowered	44.6%	46.5%	4.0%	3.0%	2.0%
McLaren Health Plan	83.8%	5.1%	2.0%	4.7%	4.3%
Meridian Health Plan of Michigan	75.1%	10.7%	3.4%	4.8%	6.1%
Molina Healthcare of Michigan	57.1%	23.7%	2.6%	9.6%	7.0%
Priority Health Choice, Inc.	82.0%	5.8%	2.7%	4.6%	5.0%
Total Health Care, Inc.	45.2%	38.4%	4.2%	6.4%	5.9%
UnitedHealthcare Community Plan	61.3%	18.7%	4.4%	9.2%	6.3%
Upper Peninsula Health Plan	92.8%	0.2%	0.7%	2.7%	3.6%
Please note, percentages may not total 100% due to rounding.					

Table 3-5 depicts the ethnicity of members who completed a survey.

Table 3-5—Respondent Demographics: Ethnicity

	Hispanic	Non-Hispanic
MDHHS HMP Program	**4.8%**	**95.2%**
Aetna Better Health of Michigan	4.5%	95.5%
Blue Cross Complete of Michigan	5.8%	94.2%
HAP Empowered	2.0%	98.0%
McLaren Health Plan	4.8%	95.2%
Meridian Health Plan of Michigan	4.0%	96.0%
Molina Healthcare of Michigan	7.8%	92.2%
Priority Health Choice, Inc.	8.0%	92.0%
Total Health Care, Inc.	2.9%	97.1%
UnitedHealthcare Community Plan	5.9%	94.1%
Upper Peninsula Health Plan	1.3%	98.7%
Please note, percentages may not total 100% due to rounding.		

Table 3-6 depicts the level of education of members who completed a survey.

Table 3-6—Respondent Demographics: Education

	8th Grade or Less	Some High School	High School Graduate	Some College	College Graduate
MDHHS HMP Program	**1.4%**	**9.6%**	**37.7%**	**35.5%**	**15.7%**
Aetna Better Health of Michigan	0.8%	11.7%	35.6%	36.7%	15.3%
Blue Cross Complete of Michigan	1.3%	9.5%	31.6%	36.2%	21.4%
HAP Empowered	2.0%	13.9%	39.6%	31.7%	12.9%
McLaren Health Plan	0.6%	8.9%	41.3%	33.9%	15.4%
Meridian Health Plan of Michigan	1.9%	6.2%	37.4%	38.9%	15.6%
Molina Healthcare of Michigan	1.7%	13.3%	43.2%	31.1%	10.7%
Priority Health Choice, Inc.	2.0%	7.9%	38.2%	35.8%	16.1%
Total Health Care, Inc.	2.6%	12.6%	34.6%	34.8%	15.4%
UnitedHealthcare Community Plan	2.4%	12.8%	36.5%	34.1%	14.3%
Upper Peninsula Health Plan	0.0%	5.2%	39.2%	38.4%	17.2%
Please note, percentages may not total 100% due to rounding.					

Table 3-7 depicts the dental health status of members who completed a survey.

Table 3-7—Respondent Demographics: Dental Health Status

	Excellent	Very Good	Good	Fair	Poor
MDHHS HMP Program	**8.5%**	**25.1%**	**35.3%**	**21.7%**	**9.4%**
Aetna Better Health of Michigan	9.8%	25.4%	30.2%	20.1%	14.5%
Blue Cross Complete of Michigan	7.2%	24.1%	37.5%	23.5%	7.7%
HAP Empowered	6.9%	22.8%	33.7%	27.7%	8.9%
McLaren Health Plan	10.5%	25.3%	36.8%	20.0%	7.5%
Meridian Health Plan of Michigan	8.8%	27.6%	34.2%	20.2%	9.3%
Molina Healthcare of Michigan	9.3%	19.9%	37.6%	23.2%	10.0%
Priority Health Choice, Inc.	8.3%	27.2%	34.8%	21.3%	8.3%
Total Health Care, Inc.	7.7%	24.1%	29.5%	26.7%	11.9%
UnitedHealthcare Community Plan	8.9%	23.5%	37.2%	21.3%	9.1%
Upper Peninsula Health Plan	6.9%	28.1%	38.3%	18.7%	8.0%
Please note, percentages may not total 100% due to rounding.					

Statewide Comparisons

HSAG calculated top-box scores for each measure. 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. For additional information on the survey language and response options for the measures, please refer to the Reader's Guide beginning on page 2-1.

The MDHHS HMP Program results were weighted based on each health plan's eligible population. HSAG compared the HMP health plan results to the MDHHS HMP Program average to determine if the HMP health plan results were statistically significantly different than the MDHHS HMP Program average. Colors in the figures note statistically significant differences. Green indicates a top-box score that was statistically significantly higher than the MDHHS HMP Program average. Conversely, red indicates a top-box score that was statistically significantly lower than the MDHHS HMP Program average. Blue represents top-box scores that were not statistically significantly different from the MDHHS HMP Program average. Health plan 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 plans may be similar, but one was statistically significantly different from the MDHHS HMP Program average, 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 3-1 shows the *Rating of Regular Dentist* top-box scores.

Figure 3-1—Rating of Regular Dentist Top-Box Scores
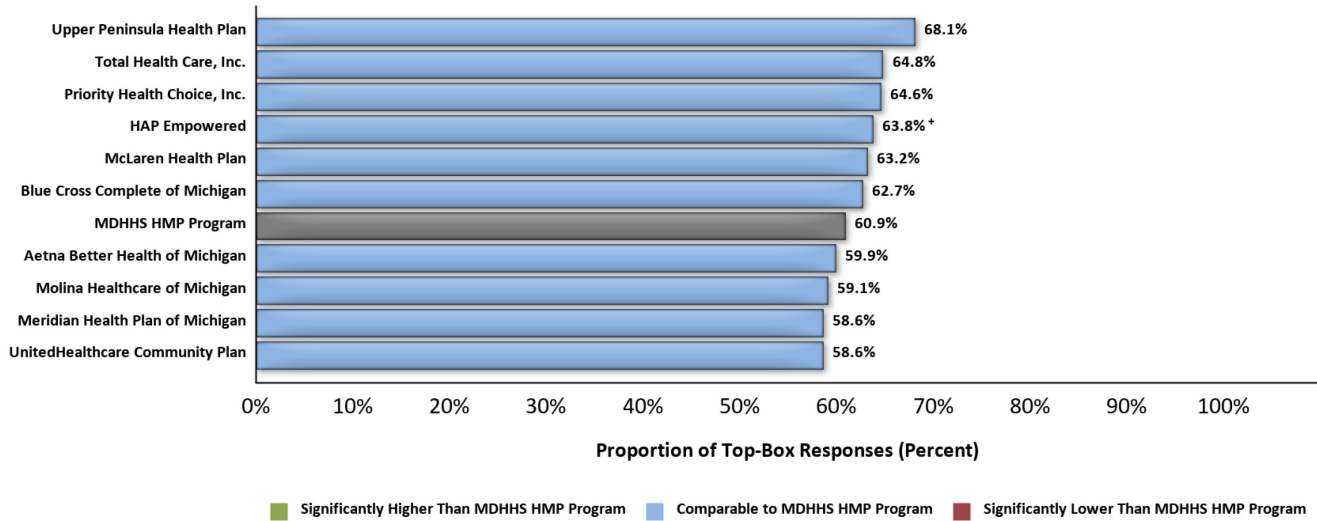
+ Indicates fewer than 100 responses. Caution should be exercised when evaluating these results.

Rating of All Dental Care

Figure 3-2 shows the *Rating of All Dental Care* top-box scores.

Figure 3-2—Rating of All Dental Care Top-Box Scores

Plan	Score
Upper Peninsula Health Plan	70.2%
Priority Health Choice, Inc.	63.4%
McLaren Health Plan	62.2%
HAP Empowered	62.1%
Meridian Health Plan of Michigan	60.4%
MDHHS HMP Program	59.7%
Blue Cross Complete of Michigan	59.0%
Total Health Care, Inc.	58.1%
Molina Healthcare of Michigan	57.9%
Aetna Better Health of Michigan	57.6%
UnitedHealthcare Community Plan	54.2%

Proportion of Top-Box Responses (Percent)

■ Significantly Higher Than MDHHS HMP Program   ■ Comparable to MDHHS HMP Program   ■ Significantly Lower Than MDHHS HMP Program

Rating of Finding a Dentist

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

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

Plan	Score
Priority Health Choice, Inc.	51.1%[+]
Aetna Better Health of Michigan	50.8%[+]
Molina Healthcare of Michigan	48.4%[+]
HAP Empowered	47.1%[+]
Total Health Care, Inc.	43.1%[+]
MDHHS HMP Program	41.8%
Meridian Health Plan of Michigan	41.5%[+]
Blue Cross Complete of Michigan	39.1%[+]
McLaren Health Plan	39.1%[+]
UnitedHealthcare Community Plan	37.3%[+]
Upper Peninsula Health Plan	32.4%[+]

Proportion of Top-Box Responses (Percent)

■ Significantly Higher Than MDHHS HMP Program   ■ Comparable to MDHHS HMP Program   ■ Significantly Lower Than MDHHS HMP Program
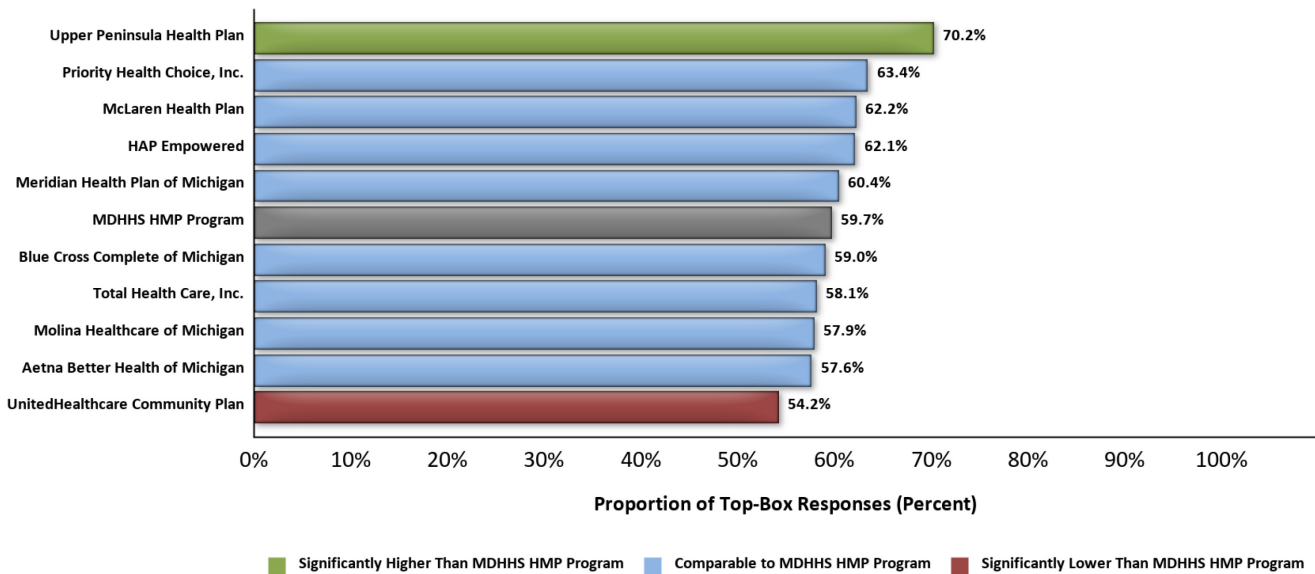
+ Indicates fewer than 100 responses. Caution should be exercised when evaluating these results.

Rating of Dental Plan

Figure 3-4 shows the *Rating of Dental Plan* top-box scores.

Figure 3-4—Rating of Dental Plan Top-Box Scores

Plan	Top-Box Score
Upper Peninsula Health Plan	59.7%
Priority Health Choice, Inc.	53.5%
McLaren Health Plan	51.1%
Aetna Better Health of Michigan	50.8%
Molina Healthcare of Michigan	50.4%
MDHHS HMP Program	49.6%
HAP Empowered	49.5%+
Meridian Health Plan of Michigan	49.1%
Blue Cross Complete of Michigan	48.6%
UnitedHealthcare Community Plan	45.1%
Total Health Care, Inc.	44.6%

Proportion of Top-Box Responses (Percent)

■ Significantly Higher Than MDHHS HMP Program ■ Comparable to MDHHS HMP Program ■ Significantly Lower Than MDHHS HMP Program

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

Composite Measures

Care from Dentists and Staff

Figure 3-5 shows the *Care from Dentists and Staff* top-box scores.

Figure 3-5—Care from Dentists and Staff Top-Box Scores

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

Access to Dental Care

Figure 3-6 shows the *Access to Dental Care* top-box scores.

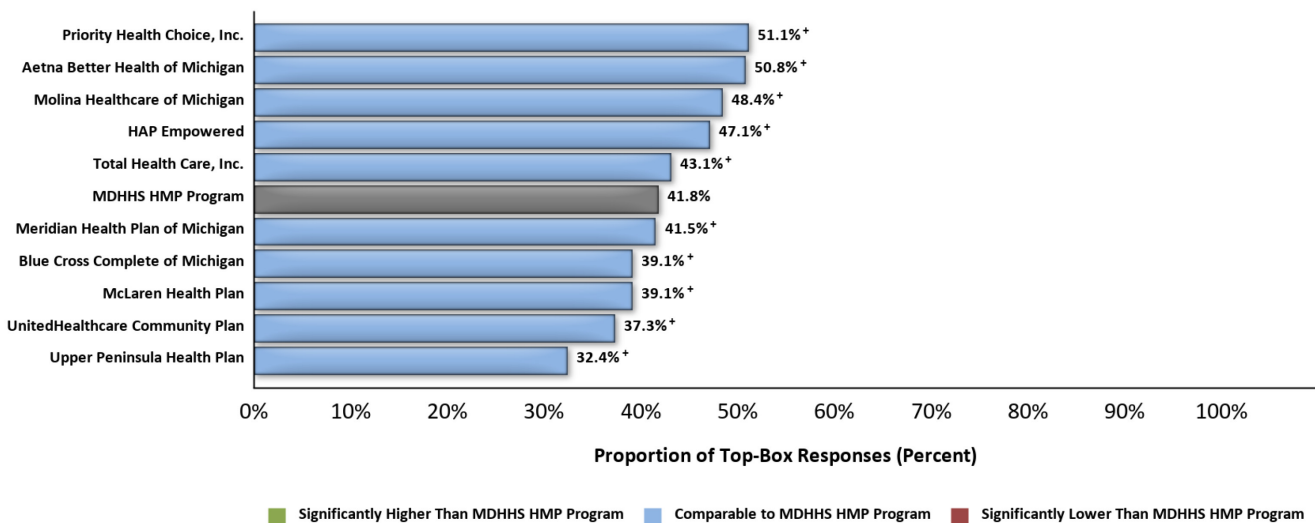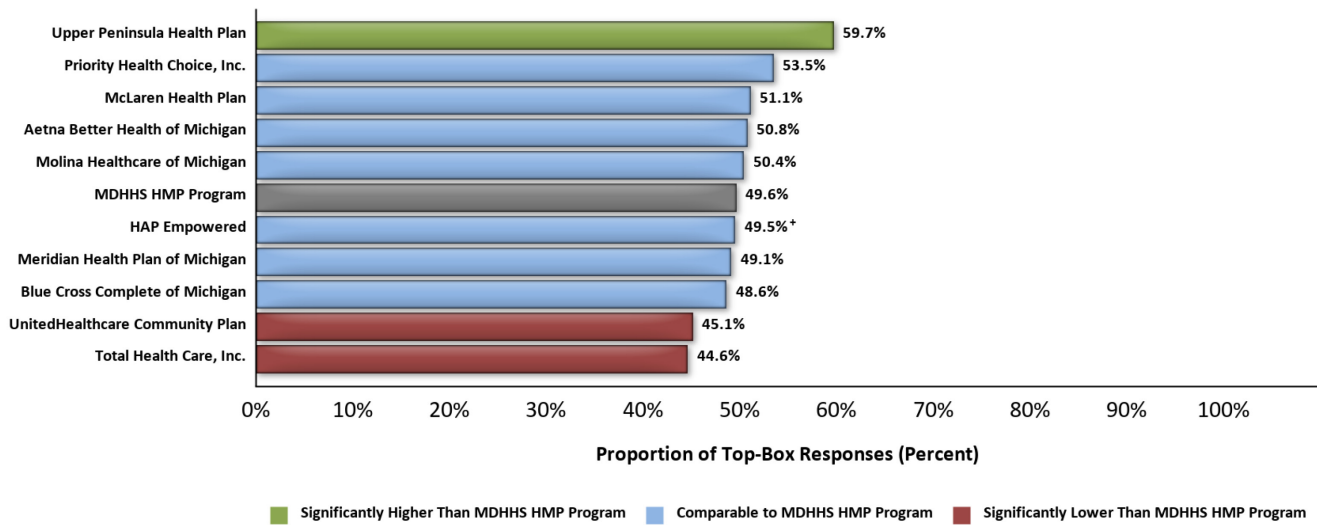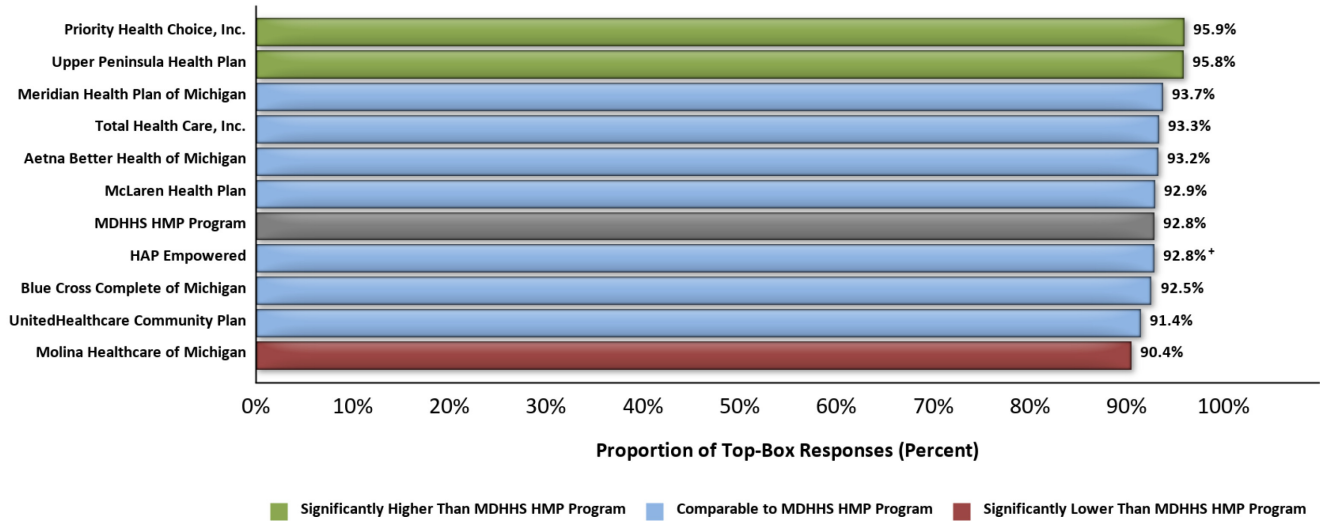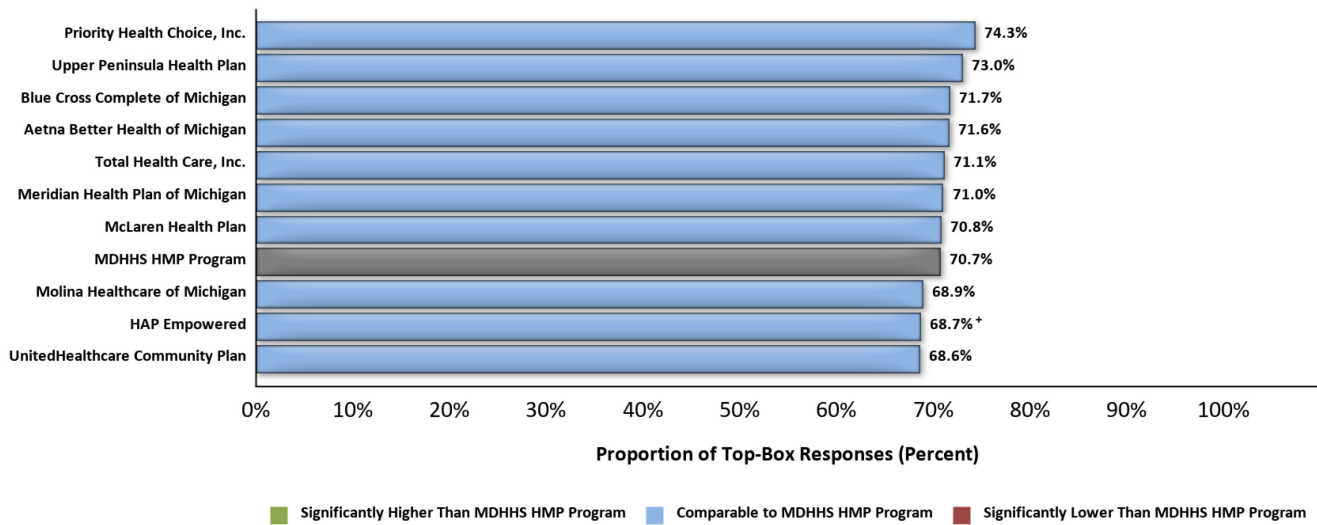**Figure 3-6—Access to Dental Care Top-Box Scores**

Plan	Score
Priority Health Choice, Inc.	74.3%
Upper Peninsula Health Plan	73.0%
Blue Cross Complete of Michigan	71.7%
Aetna Better Health of Michigan	71.6%
Total Health Care, Inc.	71.1%
Meridian Health Plan of Michigan	71.0%
McLaren Health Plan	70.8%
MDHHS HMP Program	70.7%
Molina Healthcare of Michigan	68.9%
HAP Empowered	68.7% +
UnitedHealthcare Community Plan	68.6%

Proportion of Top-Box Responses (Percent)

■ Significantly Higher Than MDHHS HMP Program   ■ Comparable to MDHHS HMP Program   ■ Significantly Lower Than MDHHS HMP Program

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

Dental Plan Information and Services

Figure 3-7 shows the *Dental Plan Information and Services* top-box scores.

Figure 3-7—Dental Plan Information and Services Top-Box Scores

Plan	Score
Priority Health Choice, Inc.	83.3%
Upper Peninsula Health Plan	82.1%
McLaren Health Plan	80.3%
Meridian Health Plan of Michigan	80.0%
HAP Empowered	79.9% +
MDHHS HMP Program	78.7%
Aetna Better Health of Michigan	77.3%
Molina Healthcare of Michigan	77.3%
Blue Cross Complete of Michigan	76.8%
UnitedHealthcare Community Plan	76.0%
Total Health Care, Inc.	74.6%

Proportion of Top-Box Responses (Percent)

■ Significantly Higher Than MDHHS HMP Program   ■ Comparable to MDHHS HMP Program   ■ Significantly Lower Than MDHHS HMP Program

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

Individual Item Measure

Would Recommend Dental Plan

Figure 3-8 shows the *Would Recommend Dental Plan* top-box scores.
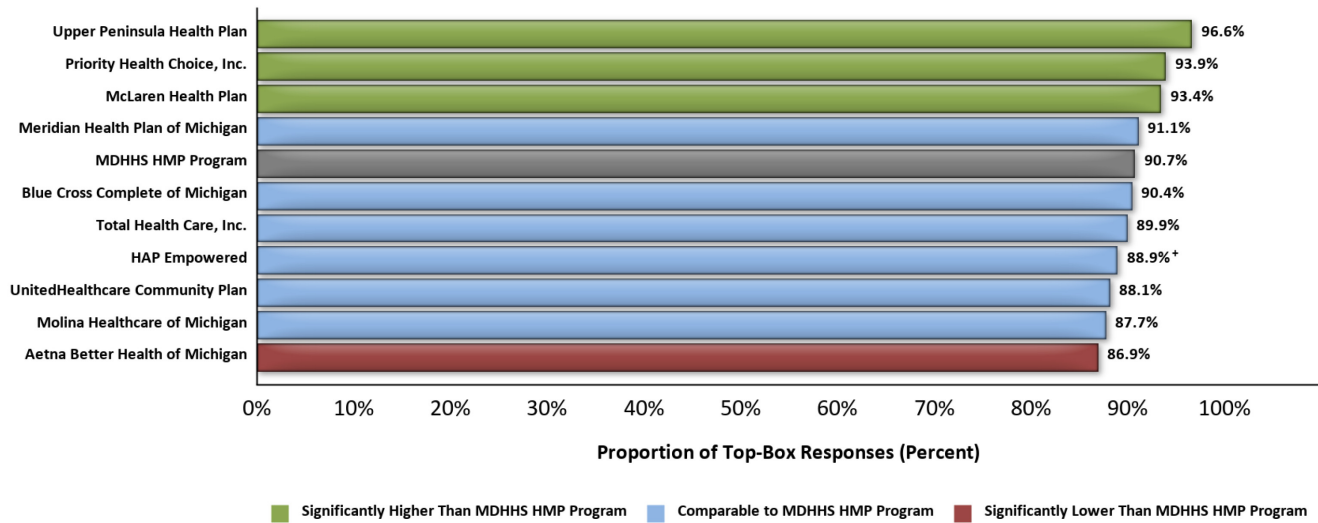
Figure 3-8—Would Recommend Dental Plan Top-Box Scores

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

Key Drivers of Member Experience

HSAG performed an analysis of key drivers for three measures: *Rating of Dental Plan*, *Rating of All Dental Care*, and *Would Recommend Dental Plan*. The analysis provides information on: (1) how well the MDHHS HMP Program is performing on the survey item (i.e., question), and (2) how important the item is to overall experience.

Key drivers of member experience are defined as those items that (1) have a problem score that is greater than or equal to the program's median problem score for all items examined, and (2) have a correlation that is greater than or equal to the program's median correlation for all items examined. For additional information on the assignment of problem scores, please refer to the Reader's Guide section. Table 4-1 depicts the survey items identified for each of the three measures as being key drivers of member experience for the MDHHS HMP Program (as indicated by a ✓).

Table 4-1—MDHHS HMP Program Key Drivers of Member Experience

Key Drivers	*Rating of All Dental Care*	*Rating of Dental Plan*	*Would Recommend Dental Plan*
Respondents reported that their regular dentist did not always spend enough time with them.	✓		
Respondents reported that their dental plan did not always cover all of the services they thought were covered.	NA	✓	✓
Respondents reported that their dental plan did not cover what they and their family needed to get done.	NA	✓	✓
Respondents reported that the toll-free number, website, or written materials did not always provide the information they wanted about how their dental plan works.	NA	✓	✓
Respondents reported that the information from their dental plan did not help them find a dentist that they were happy with.	NA	✓	✓
Respondents reported that customer service at their dental plan did not always give them the information or help they needed.	NA	✓	✓
NA indicates that this question was not evaluated for this measure.			

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

SURVEY INSTRUCTIONS

➤ **Please be sure to fill the response circle <u>completely</u>. Use only <u>black or blue ink</u> or <u>dark pencil</u> 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 the (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

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?

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

30. Would you say that your dental plan is worth the cost?

- ○ Definitely yes
- ○ Somewhat yes
- ○ Somewhat no
- ○ Definitely no

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

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

About You

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

- ○ Excellent
- ○ Very good
- ○ Good
- ○ Fair
- ○ Poor

33. 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

34. Are you male or female?

- ○ Male
- ○ Female

35. 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

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

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

37. 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

38. Did someone help you complete this survey?

- ○ Yes ➔ *Go to Question 39*
- ○ No ➔ *Thank you. Please return the completed survey in the postage-paid envelope.*

39. 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