CAHPS Sponsor ReportThe ACAP Experience

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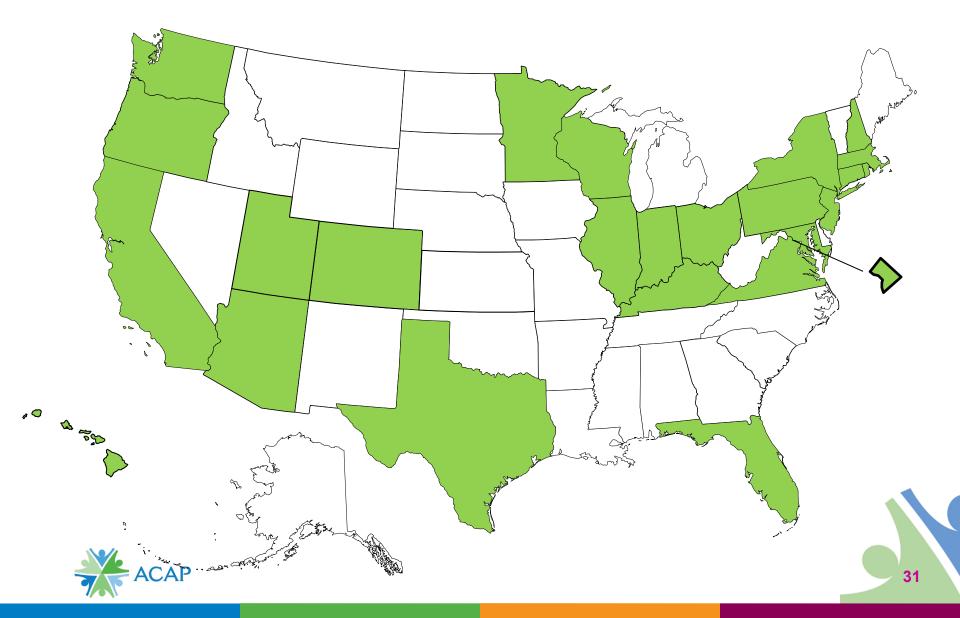




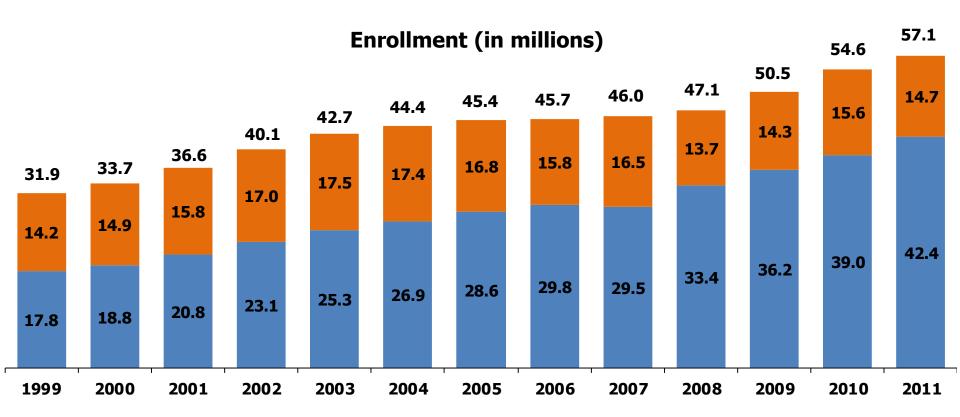
- Who is ACAP?
- Growing role of health plans
- What is a sponsor report?
- How do the ACAP Plans utilize the ACAP sponsor report?
- Why is the sponsor report important to ACAP as an organization?



ACAP's 58 Plans are in 25 States



Medicaid Managed Care and Traditional Enrollment 1999 - 2011



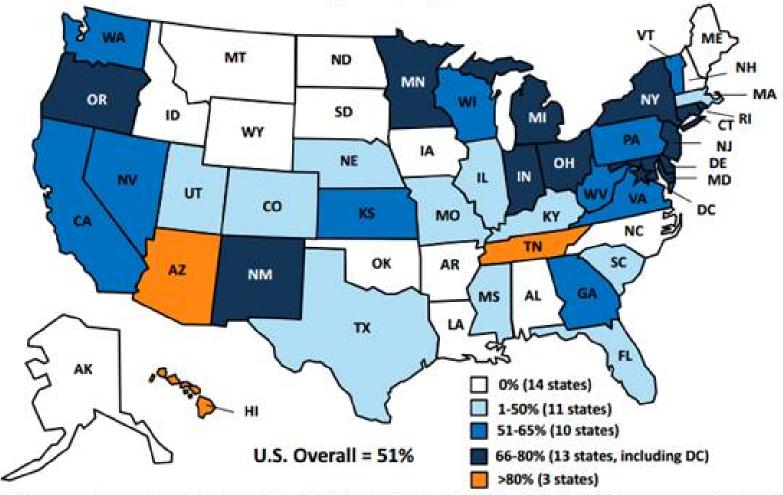
■ Number Enrolled in Traditional Medicaid Programs

■ Number Enrolled in Medicaid Managed Care



In 26 states, over half of Medicaid beneficiaries are enrolled in comprehensive risk-based plans.

Penetration of comprehensive risk-based managed care, July 1, 2011:



NOTE: Comprehensive risk-based managed care includes Health Insuring Organizations (HIOs), comprehensive managed care organizations (MCO), and Program of All-Inclusive Care for the Elderly (PACE).

SOURCE: Medicaid Managed Care Enrollment Report, Summary Statistics as of July 1, 2011, CMS, 2012.



Medicaid Managed Care is No Longer Just Moms and Kids

- 24 ACAP plans operate SNPs
- 10 ACAP plans operate Managed Long-Term Care Plans
- 18 ACAP plans will participate in Duals Demonstrations
- 16 ACAP plans are participating in Federal and State Marketplaces



What is a Sponsor Report?

- Based on submissions to CAHPS Database
- ACAP works with Westat to obtain authorizations (health plan and states) to use data to create sponsor report
- Report allows ACAP to benchmark how ACAP health plans are doing as a group
- Also allows individual health plans to benchmark against other plans and national averages



2013 ACAP Sponsor Report

- ACAP members submitted
 - 31 Adult Medicaid plan samples
 - 29 Child Medicaid plan samples
- Plans used several different survey vendors
- CAHPS Database combined submissions to create a single report displaying ACAP member plan scores compared to:
 - Each other
 - The ACAP sponsor average
 - The national Medicaid plan average
- Each submitting plan or state receives their own report

Sample ACAP Report View

Admin

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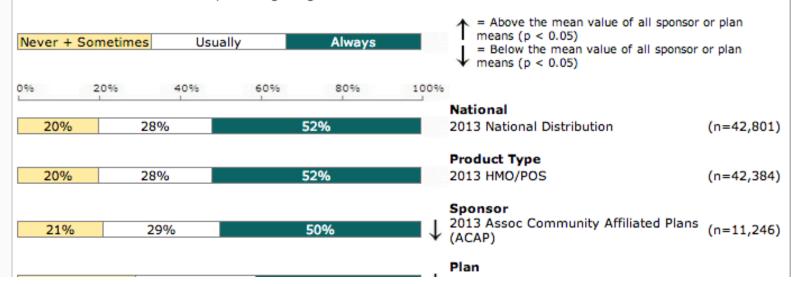
CAHPSDatabase@westat.com

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🔤 E-mail Updates

2013 Adult Medicaid 5.0 Assoc Community Affiliated Plans (ACAP)

Getting Needed Care Composite Combines responses from two questions regarding how much of a problem, if any, consumers had with various aspects of getting needed care.





Why is CAHPS Benchmark Data Important to Plans?

- Consumer Experience
- Consumer Engagement
- Access
- Screening
- Prevention
- Education
- Post treatment support
- Potential disparities



ACAP Use of Sponsor Report

- Provides comparable quality reporting
- Allows ACAP to focus on areas that need improvement
- Allows ACAP to identify what plans are doing well on specific composite measures
- Plans working together on quality issues
- Helps to identify issues of concern regarding the CAHPS process (i.e., translation)
- Broader communication efforts



ACAP CAHPS Analysis

ACAP-specific averages result from an ACAP analysis of CAHPS data from AHRQ's CAHPS Database

CAHPS Overall Health Plan Rating, 2011

■ Rating of 9 or 10 ■ Rating of 7 or 8

