2023-2024 CAHPS CHIP Survey Results Summary

Wyoming Department of Health, Division of Healthcare Financing

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1 CAHPS Survey Summary

The Wyoming Department of Health (WDH), Division of Healthcare Financing (DHCF) partnered with Public Knowledge® (PK) to administer the 2023–2024 Consumer Assessment of Healthcare Providers and Systems (CAHPS) Survey to participants in the Children's Health Insurance Program (CHIP). PK used the survey provided by CAHPS with no modifications. The survey was comprised of quantitative questions to allow for precise data analytics. The questions focused on:

- · Recipient's health in the last 6 months
- Recipient's personal doctor
- · Receiving healthcare from specialists
- Recipient's health plan experience
- Demographic information

The survey was open from February 9, 2024, through May 15, 2024. Survey participants received an initial mailing with a paper survey and an email with the online survey link. Follow-up weekly reminders were sent through email and text message, and reminder calls started on April 30th. **Figure 1** below shows the responses by campaign tool and survey activities over the duration of the survey period.

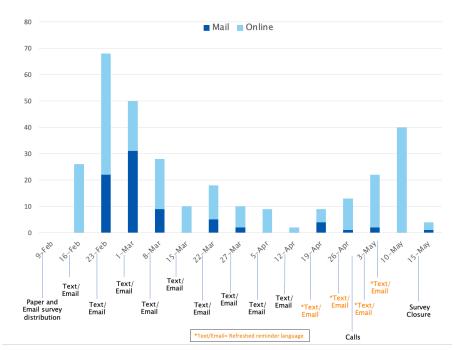


Figure 1. Survey Campaign and Responses



PK released the survey to 2,104 CHIP participants identified by the Division. The response rate was 14.70% with 309 valid responses. This 2023–2024 response rate exceeded the minimum requirement of 300 responses. Of the 309 responses received, 77 were from paper mail-in surveys and 232 were electronic.

Figure 1 shows survey response rates from February 9th to May 15th, with distinct spikes following email reminders, indicating their effectiveness. Online responses consistently outnumber mail responses. Notable increases in responses occurred around February 23rd, March 1st, March 22nd, and May 7th, corresponding with email reminders. The email language was refreshed on April 19th, contributing to a significant increase in response rates in May. Weekly text message reminders contributed to maintaining steady response rates throughout the period.



2 Overview of CAHPS Survey Results

This report provides an overview of the results and highlights PK's findings. In addition, an interactive results summary of the 2023–2024 CAHPS CHIP Survey Results is available that features detailed results of all survey questions.

Table 1 provides results for key indications of the CHIP program's overall effectiveness and member satisfaction over the last five years. The 2023–2024 survey ratings yielded the following notable outcomes highlighted below:

- Health plan rating (88.8%) continues to rise year over year with a 5.5% increase over the past year.
- Customer service ratings (90.8%) have improved and are the highest they have been in the last five years, with an increase of 2.3% over the last year.
- Receiving urgent care ratings (93.8%) have decreased over the last year with a decrease of 0.9% over the last year's rating.
- The Coordination of Care rating (87.6%) decreased slightly over the previous year's rating of 89.5%.

Table 1. CAHPS Survey Results Over Four Years

Measure	2019– 2020	2020– 2021 (Pandemic Year)	2021- 2022	2022- 2023	2023- 2024	Change from Previous Year
Health Plan Rating* (Q29)	78.0%	76.5%	81.3%	83.3%	88.8%	+5.5%
Health Care Rating* (Q8)	82.7%	86.6%	80.9%	80.1%	86.3%	+6.2%
Personal Care Doctor Rating* (Q19)	84.3%	88.0%	88.4%	87.6%	91.8%	+4.2%
Specialist Rating* (Q23)	94.6%	78.4%	81.8%	79.3%	91.3%	+12%
Customer Service Rating** (Q25)	87.8%	80.5%	84.4%	88.5%	90.8%	+2.3%



Measure	2019- 2020	2020– 2021 (Pandemic Year)	2021- 2022	2022- 2023	2023- 2024	Change from Previous Year
Receiving Needed Care Rating** (Q9)	90.4%	91.7%	93.7%	91.5%	91.8%	+0.3%
Receiving Urgent Care Rating** (Q4)	94.2%	95.5%	89.8%	94.7%	93.8%	-0.9%
Coordination of Care Rating** (Q6)	97.6%	85.0%	87.8%	89.5%	87.6%	-1.9%

Key

^{*%} based on ratings of 8-10

^{**%} based on ratings of "Usually" and "Always"



3 Findings and Recommendations

Based on the survey data collected and analyzed, the section below details findings and recommendations for the CHIP program. These recommendations are strategies to increase the impact and quality of the CHIP program.

3.1 Important CHIP Program Findings

3.1.1 Overall Health

The 2023–2024 survey results indicate that CHIP participants' overall physical and mental health were positive. **Table 2** provides ratings from survey respondents related to overall health.

Table 2. Overall Health

Question	Survey Results					
Q30: In general, how would you rate your child's overall health?	93% of respondents rated their child's health as good, very good or excellent.					
Q31: In general, how would you rate your child's overall mental or emotional health?	87% of respondents rated their children's mental or emotional health as good, very good, or excellent.					

Recommendations

Based on these results, PK recommends that the CHIP program:

- Distribute provider and parent education resources to support children's mental and emotional health.
- Use social media and text messaging to engage clients and promote services, supplemental resources, and well-being programs.

3.1.2 Access to Care

The 2023–2024 survey results indicate that CHIP participants are more reliant on urgent care services based on responses to Question 3. **Table 3** provides a statistical view of CHIP participants' perspectives on urgent care, personal doctors, and routine care.



Table 3. Access to Care

Question	Survey Results
Q6: In the last 6 months, how often did you get an appointment for a check-up or routine care for your child at a doctor's office or clinic as soon as your child needed?	88% of respondents indicated that they always get an appointment for check-ups and routine care when needed.
Q3: In the last 6 months, did your child have an illness, injury, or condition that needed care right away in a clinic, emergency room, or doctor's office?	52% of respondents indicated that their child has had a need for urgent care.
Q10: A personal doctor is the one your child would see if he or she needs a check-up, has a health problem, or gets sick or hurt. Does your child have a personal doctor?	15% of respondents indicated that their child does not have a personal doctor.

Recommendations

Based on survey data, PK recommends that the CHIP program:

- Implement outreach programs to inform families about the benefits of having a personal doctor.
- Conduct research to understand the root cause of why some CHIP participants are not getting appointments when needed. This research will also assist with understanding actions that can be taken to increase health equity.
- Conduct regular surveys and focus groups to identify barriers preventing some families from obtaining routine and preventative care for their children.

3.2 Areas of Strength

Health Plan Rating

The recent 5.5% increase in satisfaction ratings for the CHIP healthcare plan represents a significant achievement, marking the highest level of satisfaction since 2019. This improvement underscores effective strategies aimed at enhancing service quality and meeting the healthcare needs of children effectively. It reflects a commitment to continuous improvement and ensuring that CHIP remains a reliable and valued healthcare option for families.



Healthcare Rating

The overall healthcare rating as indicated by participants increased 5.5% from the previous year. This is a notable improvement in the survey findings. This achievement reflects an upward trend in satisfaction levels, indicating improved perceptions of service quality. It underscores our commitment to continually raising the bar in healthcare standards, ensuring optimal outcomes for children and their families.

Specialist Rating

The 12% increase in the ratings of the specialists recipients interacted with over the past 6 months, as shown in Table 1, is a significant strength highlighted by the CHIP survey results. This rise demonstrates a growing satisfaction with the quality of care provided by specialists to CHIP recipients. This positive trend emphasizes the commitment to continually improving services within the CHIP healthcare plan, ensuring the best possible outcomes for children and their families.

3.3 Areas of Opportunity

Table 4, below, provides more in-depth information and recommendations on areas of opportunity for the CHIP Program based on decreases in ratings in survey results as compared to last year.

Table 4. Areas of Opportunity

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Area	2021- 2022	2022- 2023	2023- 2024	Recommendations and Comments
Coordination of Care	87.8%	89.5%	87.8%	The score indicates a 1.9% decrease from the previous year.
				Consider conducting focus groups to identify barriers faced by providers and CHIP participants in accessing routine care. DHCF can conduct outreach to providers discussing the value of extended clinic hours and improving participant assistance with flexible scheduling,



Area	2021- 2022	2022- 2023	2023- 2024	Recommendations and Comments
				transportation aid, and participant navigation services.
Provider Communication	92.4%	92.8%	92.6%	The scores indicate a decrease of 0.2% from the prior year.
				Consider surveying participants to determine the cause for the communication breakdown between providers and participants. DHCF can provide parental advocacy resources to patients to equip them with skills to advocate for their needs with providers. DHCF can offer trainings or outreach to providers to address these communication barriers.

3.4 Survey Process Recommendations

The following recommendations are based on the 2023-2024 survey for consideration with future surveys:

- Continue to engage CHIP participants electronically by email and text message as participation increases each time a reminder is sent.
- Consider providing some context regarding the CHIP program in the survey or in the letter that is included in the survey. Many survey participants were confused about whether their child was on CHIP or Medicaid.
- Establish and rotate through multiple subject lines and reminder messages that are sent via email and text message so the participants know it is not spam communication and to mitigate reminder fatigue.
- Collaborate with the Customer Service Center to see if they could provide reminders to CHIP participants when calling in for help.



4 Conclusion

Overall, Kid Care CHIP participants indicated that they were satisfied with the program and provider experiences. Ongoing monitoring of participant satisfaction is critical to the improvement of the program. The survey will aid DHCF in the development of strategies to continue to increase the quality of care for participants. Proving this information to the CAHPS database could aid in further data analysis by comparing Wyoming data to similar programs in other states. This database also serves as a primary source of data for approved research related to patient and consumer assessment of program quality. DHCF should continue to monitor trends in this survey to aid in the growth of the Kid Care CHIP program.