



2024–2025 CAHPS General Children Population Medicaid Survey Results Summary

Wyoming Department of Health (WDH), Division
of Healthcare Financing (DHCF)

June 20, 2025



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1 Introduction

The Wyoming Department of Health (WDH), Division of Healthcare Financing (DHCF), partnered with Public Knowledge® (PK) to administer the 2024–2025 Consumer Assessment of Healthcare Providers and Systems (CAHPS) Medicaid Survey to recipients of the Children's Medicaid Program and the recipients of the Child Health Insurance Program (CHIP). This year, WDH administered two CAHPS surveys to two children's populations. The identified populations included the General Children Population and the Children with Chronic Conditions Population. Each of these surveys was comprised of participants active under two health care plans. The first is identified as the Children's Health Insurance Program (CHIP), and the other is the Children's Medicaid Program. This is a change from last year, as the CAHPS program surveyed the CHIP and Medicaid populations separately. This year, participants from both insurance policies were surveyed based on the population they fall under (General or Chronic). This report will focus on the General Children's population survey results summary. PK utilized the survey provided by CAHPS with no modifications. The survey consisted of quantitative questions to allow for precise data analytics. The survey included questions regarding:

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

The survey was open online from March 3, 2025, to May 21, 2025. Recipients received both a mail-in survey and an email with the online survey link. Eleven (11) email reminders were distributed by the Division.

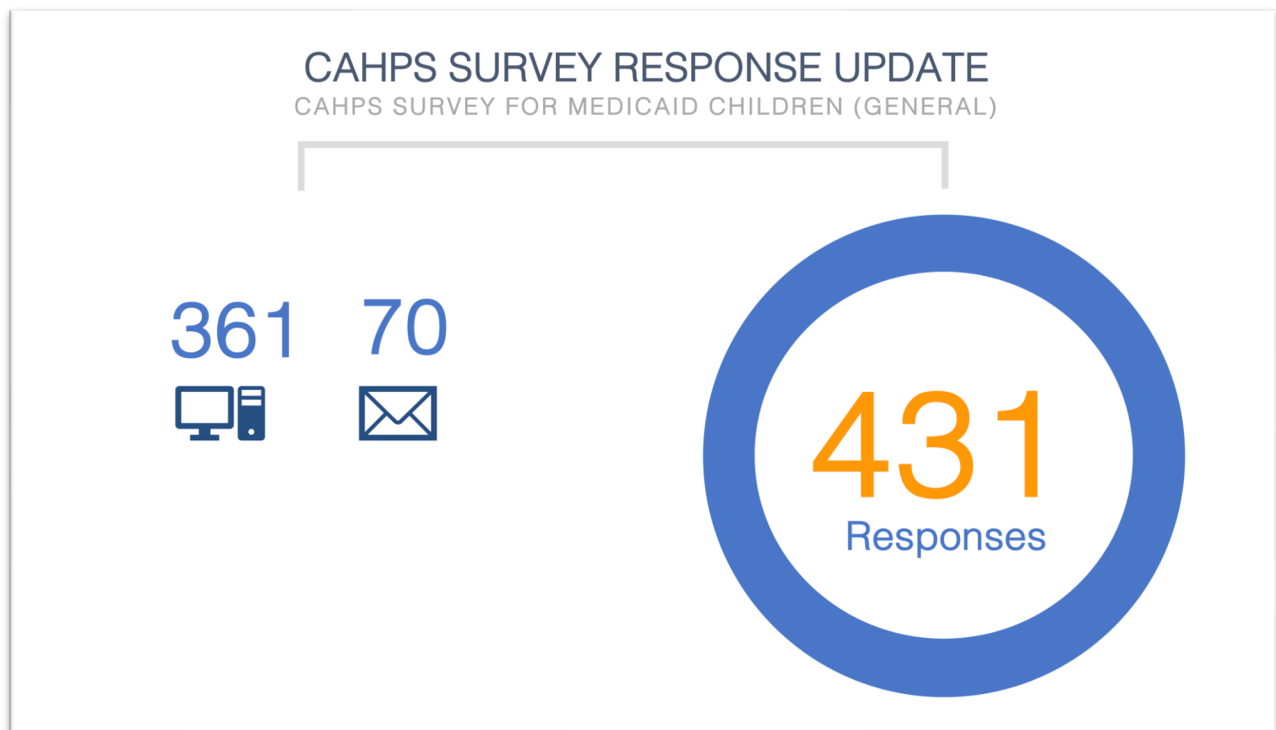
2 Methodology

Two (2) surveys this year with specific implementation and completion criteria. The implementation of the survey distributed to caregivers of the General Children population must have met the sample size requirement of 411 completed surveys to reach the goal requirement for the CAHPS. Within the sample population, 229 respondents were registered under CHIP, and 3,072 were registered under the Medicaid Children's Insurance Program. These respondents received the survey directed toward the General Children population.



For the General Children’s population, PK released the survey to a total of 3,301 Medicaid and CHIP recipients’ caregivers, all receiving both electronic and hard copy versions of the survey. The response rate was 13.6% with 451 total responses. Of the 451 responses, 431 or 13.1% of those were considered valid. This response total exceeded the minimum requirement of 411 responses. A large portion of the hard copy mailed-in survey responses were received in the first four weeks of survey distribution, but tapered off after April. **Figure 1** below shows the breakdown of the 431 responses received: 66 were from paper mail-in surveys, and 365 were electronic.

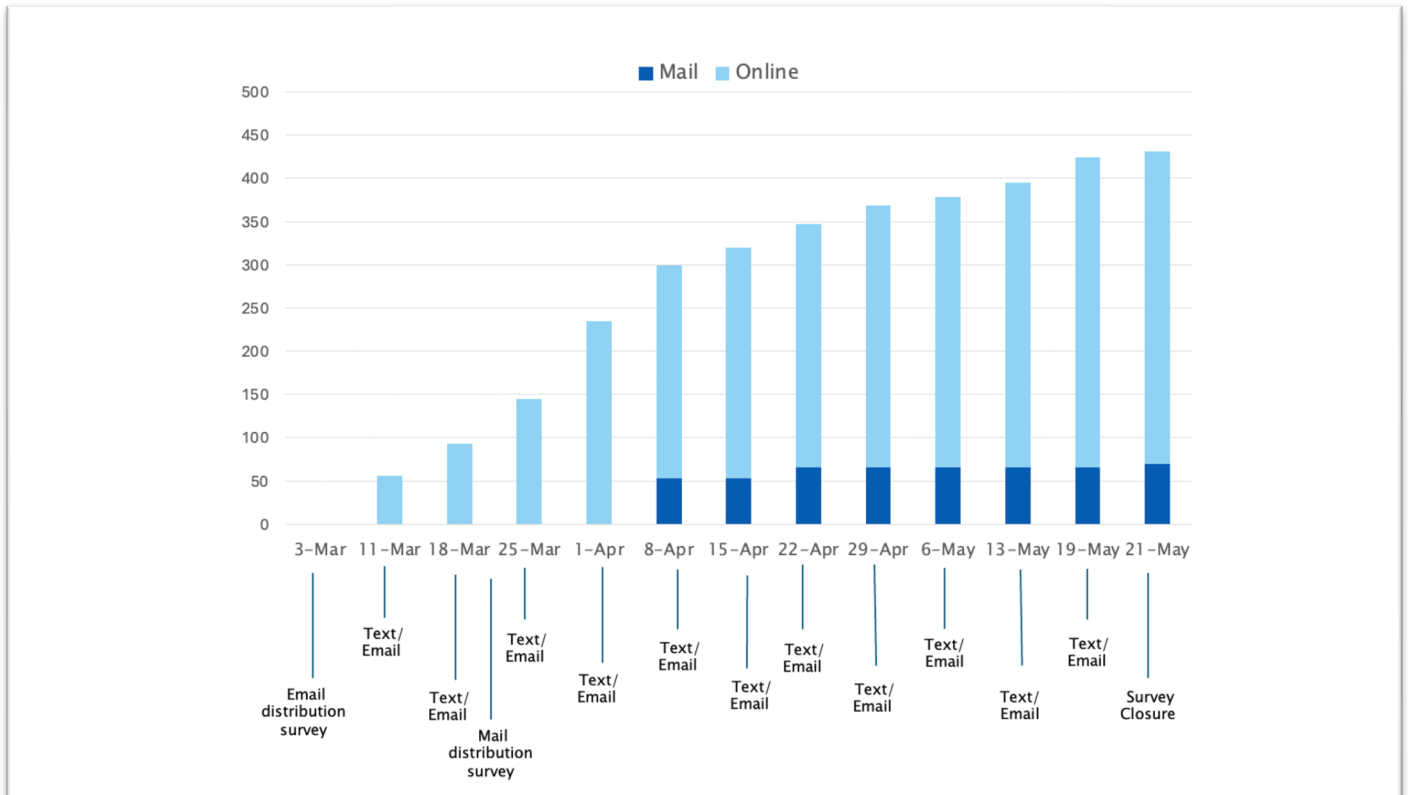
Figure 1. Survey Results



Following the distribution of the survey, reminders were sent out every week to encourage participants to complete and submit their surveys. The reminder language was updated and modified monthly to ensure surveyors were getting informative emails from the Division. Refreshing the language proved effective, yielding a high response of completed surveys, which assisted in pushing the needed responses over the minimum number required. **Figure 2** demonstrates the survey distribution dates, closure date, and the paper and electronic responses based on the reminder language.



Figure 2. Email and Text Reminders



3 Overview of CAHPS Survey Results

This report provides an overview of the results of the General Children's Population survey and highlights PK's findings. In addition, an interactive dashboard of the [2024-2025 CAHPS General Population Medicaid Survey Results](#) is available that features detailed results and survey questions.

Table 1 provides results for key indicators of the Medicaid and CHIP program's overall effectiveness and recipient satisfaction. It is important to note that this year, it was a combined population of CHIP recipients and Medicaid recipients. The data from the 2023-2024 year reflects only those who received Medicaid coverage. Overall, the survey respondents' ratings of the following items are a combined total, creating a new data baseline.



Table 1. CAHPS Survey Results

Measure	2023–2024	2024–2025	Changes from Previous Years
Health Plan Rating* (Q49)	86.4%	80.6%	–5.8%
Health Care Rating* (Q9)	84.3%	83.5%	–0.8%
Personal Care Doctor Rating* (Q36)	93.3%	84.9%	–8.4%
Specialist Rating* (Q43)	86.1%	84.6%	–1.5%
Receiving Needed Care Rating** (Q4)	90.8%	93.7%	+2.9%

Key

* % based on ratings of 8–10

** based on ratings of “Usually” or “Always”

4 Findings and Recommendations

Based on the survey data collected and analyzed, the section below details findings and recommendations for the Child Medicaid and CHIP program with emphasis on the General Children’s population. These recommendations are strategies to increase the impact and quality of the Wyoming Medicaid and CHIP program for recipients.

4.1 Important Medicaid Program Findings

4.1.1 Overall Health

The 2024–2025 survey results indicate that the General Children’s Medicaid and CHIP recipients’ overall physical and mental health are viewed positively. **Table 2** provides detailed information on the question and ratings of overall health.



Table 2. Overall Health

Question	Survey Results
Q53: In general, how would you rate your child's overall health?	94.1% of respondents rated their child's health as good, very good or excellent.
Q54: In general, how would you rate your child's overall mental or emotional health?	86.5% 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 Medicaid and CHIP program:

- Create mental health programs, workshops, and newsletters for families to participate in and learn more about mental and emotional health awareness.
- Provide information on the State website that allows families to access resources and providers that support or treat mental and emotional health.

4.1.2 Health Plan Customer Service

The 2024–2025 survey results indicate that respondents do not communicate with or receive helpful information from their child's health plan customer service representatives. When asked if forms for their child's health plan were easy to fill out, 51.4% reported that they are usually or sometimes easy to fill out. **Table 3** below highlights an opportunity to improve customer service strategies among children's health plans.

Table 3. Customer Service

Question	Survey Result
Q44: In the last 6 months, did you get information or help from customer service at your child's health plan?	77.0% of respondents reported they did not get information or help from customer service for their child's health plan.
Q45: In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed?	51.5% of respondents indicated that in the last 6 months they have only been given information or the help they need sometimes, usually or never.



Table 3. Customer Service

Question	Survey Result
Q48: In the last 6 months, how often were the forms from your child's health plan easy to fill out?	51.4% of respondents indicated that the forms they are asked to fill out are never, sometimes or usually easy to fill out.

Recommendations:

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

- Provide opportunities through education, newsletters, social media, or email to communicate with customer service representatives.
- Create educational resources or step-by-step guides on best practices for filling out health plan forms.
- Implement training or provide a desk guide to customer service representatives on explaining benefits and working with Medicaid and CHIP recipients.

4.2 Areas of Strength

The 2024–2025 survey highlighted six (6) questions as areas of strength. Overall, these areas of strength are specific to accessing and receiving immediate care, tests, and treatments, as well as doctors' active listening and effective communication skills. The highest survey rating (95.9%) was the level of respect doctors showed to Medicaid and CHIP recipients and their parents, which is foundational to care and is a contributing factor to Medicaid and CHIP recipients' health and program satisfaction. **Table 4** details additional identified strengths and ratings.

Table 4. Areas of Strength

Question	Survey Results
Q4: In the last 6 months, when your child needed care right away, how often did your child get care as soon as he or she needed?	93.7% of respondents indicated that their child got care always or usually as he or she needed.
Q8: In the last 6 months, how often did you have your questions answered by your child's doctor or other health providers?	90.1% of respondents indicated that their questions were answered by the doctor or health providers always or usually.



Table 4. Areas of Strength

Question	Survey Results
Q10: In the last 6 months, how often was it easy to get the care, tests and treatment your child needed?	92.1% of respondents indicated it was always or usually easy to get the care, tests and treatment for their child.
Q27: In the last 6 months, how often did your child's personal doctor explain things about your child's health in a way that was easy to understand?	94.3% of respondents indicated that their child's doctor explained things about their child's health always or usually.
Q28: In the last 6 months, how often did your child's personal doctor listen carefully to you?	94.3% of respondents indicated that their child's doctor listened always or usually.
Q29: In the last 6 months, how often did your child's personal doctor show respect for what you had to say?	95.9% of respondents indicated that their child's doctor shows respect always or usually.

Areas of Opportunity

Although the survey yielded positive results overall, areas of opportunity exist for specialist availability and form accessibility. **Table 5**, below, provides detailed information and recommendations for the Medicaid and CHIP programs.

Table 5. Areas of Opportunity

Area	2024–2025	Recommendations
<u>Specialist Availability</u> Q41: In the last 6 months, how often did you get appointments for your child with a specialist as soon as he or she needed?	77.8%	Conduct a study to determine why more specialists are not enrolled in Medicaid. Create promotional materials for specialists to consider benefits of enrolling.
<u>Health Plan Forms:</u>	86.0%	Provide educational opportunities or step by step guides for families to practice and

Table 5. Areas of Opportunity

Area	2024– 2025	Recommendations
Q48: In the last 6 months, how often were the forms from your child’s health plan easy to fill out?		familiarize themselves with health plan forms.

4.3 Survey Process Recommendations

The following recommendations are based on the 2024–2025 survey for consideration for future surveys:

- Continue to remind survey non-respondents frequently. **Figure 1**, above, shows that weekly survey reminders are effective in encouraging participation. These reminders were sent electronically by email and text message.
- Consider sending different electronic reminders during the week. For example, emails on Tuesday and text messages on Friday, or vice versa.
- Continue to rotate through multiple subject lines and reminder messages that are sent through email and text, so the participants know the survey is not spam and to mitigate reminder fatigue.
- Consider using only the Medicaid populations for the General and Chronic Children’s surveys if the CHIP population will continue being surveyed in the fall.
- Consider providing some context about Medicaid specifically in the survey or in the letter that goes out with the survey. Many survey participants were confused about whether their child was on CHIP or Medicaid.
- If the Division continues to distribute paper surveys, use different colored paper for the different populations being surveyed.

5 Summary

This year, the CAHPS Program distributed surveys to two populations that fall under the Medicaid and CHIP program. Although this is a change from last year, this new data can determine the health and efficiency of both programs and create a baseline for the Division to evaluate. Following this year, the data will be analyzed and used to make improvements to two programs using one survey.



Overall, Medicaid and 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. Providing 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. Moving forward, the 2024–2025 CAHPS Medicaid Survey results will serve as a baseline, and DHCF should continue to monitor trends in this survey to aid in the growth of the Medicaid program.