2025-2026 CAHPS Children Chronic Population Medicaid Survey Results Summary

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

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1 CAHPS Children with Chronic Conditions Survey Summary

The Wyoming Department of Health (WDH), Division of Healthcare Financing (DHCF), partnered with Public Knowledge® (PK) to administer the 2025-2026 Consumer Assessment of Healthcare Providers and Systems (CAHPS) Survey to Medicaid and CHIP members with chronic conditions.

The CAHPS Health Plan Survey is a standardized survey developed by the Agency for Healthcare Research and Quality (AHRQ) to collect information about Medicaid members' experiences with their health plans and the care they receive. The survey collects information about key aspects of health care, including access to services, provider quality, plan quality, communication, and frequency of care. Wyoming Medicaid uses the CAHPS survey results to better understand the experiences of its members, monitor health plan performance, and identify opportunities to improve the quality of care provided to members.

Wyoming Medicaid health plans provide critical health plan coverage to children who live with chronic health conditions. This represents a very important subset of the overall population of children receiving Medicaid coverage in Wyoming. Survey respondents provided data for the Children's Health Insurance Program (CHIP) and Children's Medicaid.

The AHRQ survey was used for distribution with no modifications. The survey consisted of 68 quantitative questions to allow for precise data analytics. This report focuses on the Children with Chronic Conditions population survey results. The questions focused on:

- Member health in the last six months
- Frequency and quality of medical care received by members from specialists and personal doctors
- Member experience with their health plan's customer service
- Utilization of primary care services and personal doctors
- Members' age category, gender, and race

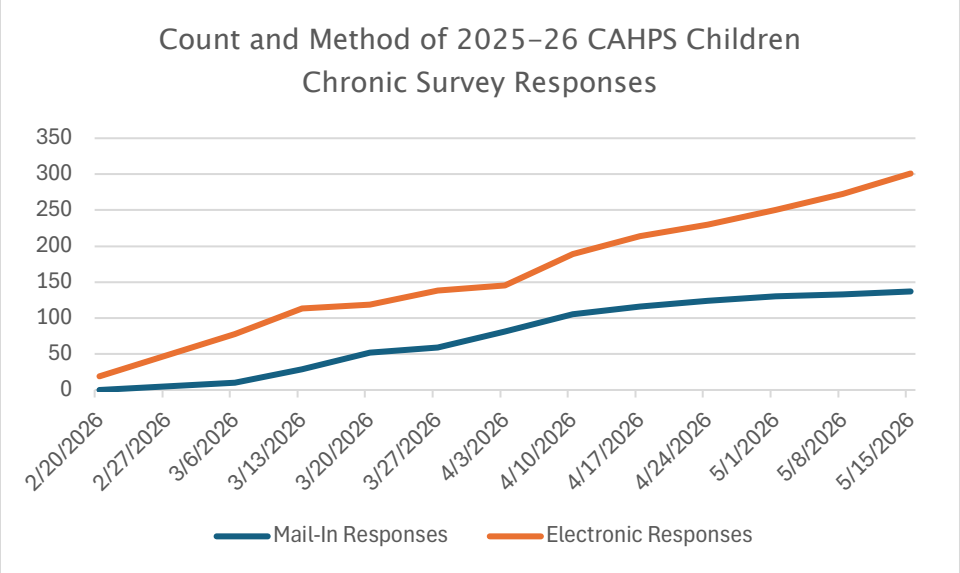
A random sample of Medicaid and CHIP members was selected to receive the survey. Survey participants received an initial email with a link to complete the survey, as well as a hard copy delivered by mail. This allowed participants flexibility in how they chose to complete the survey. The survey remained open from February 13, 2026 to May 15, 2026. During that time, DHCF distributed twelve email reminders and eleven text message reminders to encourage participation. Survey distribution information is detailed in **Table 1.**

Table 1. CAHPS Chronic Survey Information

Date Electronic Survey Opened	February 13, 2026
Date Electronic Survey Closed	May 15, 2026
Minimum Number of Valid Responses	411
Caregivers of Children Who Received Survey	4,140
Total Valid Responses Received	**438**
Electronic Valid Responses	301
Mail-In Valid Responses	137

Figure 1 demonstrates the cumulative number of CAHPS Chronic Children Survey responses received by submission from February 20, 2026 to May 15, 2026. Survey reminders were distributed every Friday by email and text message during the survey window. Electronic responses increased steadily throughout the survey period, rising from 19 responses on February 20, 2026 to 301 responses on May 15, 2026. Mail-in responses grew more quickly during the early weeks of the survey, increasing to 52 responses on March 20, 2026 before leveling off and reaching 137 total responses on May 15, 2026.

Figure 1. Count and Method of CAHPS responses from 2/20-5/15



2 Overview of CAHPS: Children with Chronic Conditions Survey Results

Survey results and findings are detailed in this section along with an interactive dashboard of the 2025-2026 CAHPS Children with Chronic Conditions Population Medicaid Survey Results. The dashboard features detailed respondent answers and data graphics.

Table 2 provides results for key indicators of overall health plan effectiveness and respondent satisfaction. The survey indicates strong overall experiences with member health plans (82.4%) and provider ratings (above 80% for all types). Overall, survey respondents rated the Medicaid and CHIP programs favorably, with positive ratings for health plans, health care professionals, and customer service.

Table 2. CAHPS Survey Results

Measure	2025-2026
Health Plan Rating* (Q49)	82.4%
Health Care Rating in Past Six Months* (Q9)	82.2%
Personal Care Doctor Rating* (Q36)	87.8%
Specialist Rating* (Q43)	82.0%
Customer Service Rating** (Q46)	90.2%
Receiving Needed Care Rating** (Q4)	95.9%
Coordination of Care Rating** (Q10)	92.1%

Key

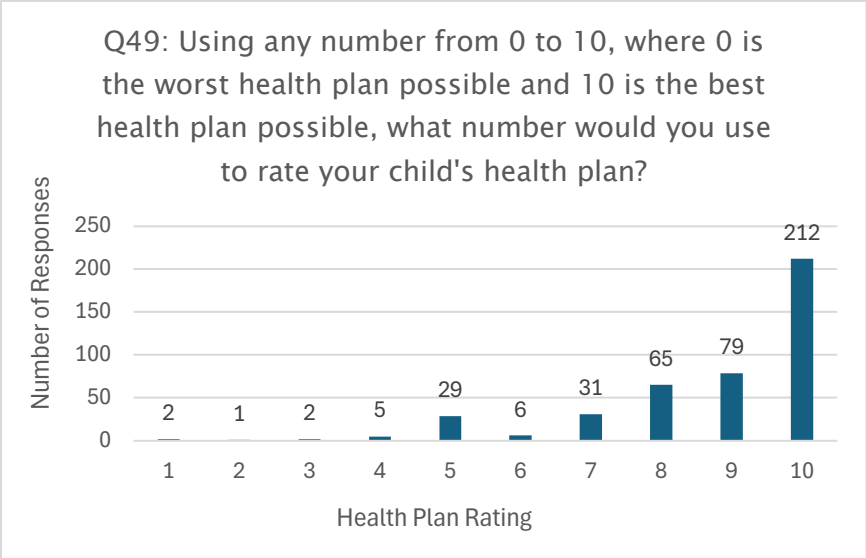
** % based on ratings of 8-10*

*** based on ratings of "Usually" or "Always"*

2.1 Summary Question Results

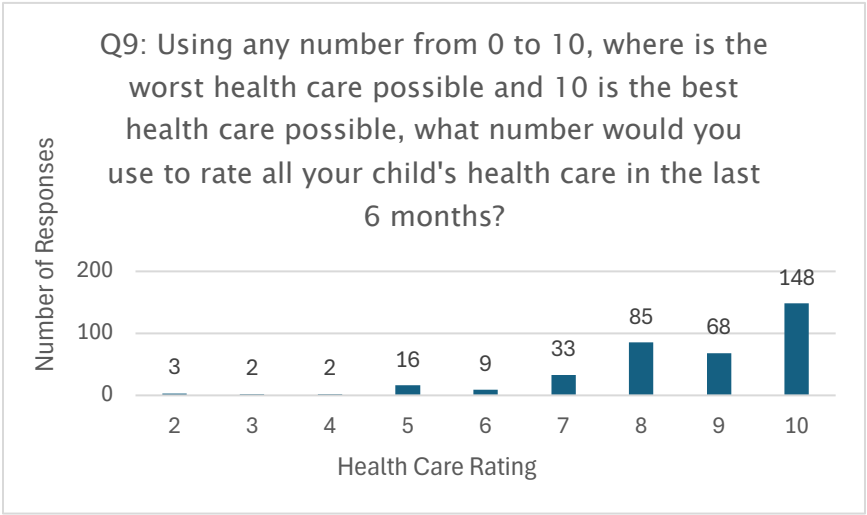
Figures 2 through 8 below show the response data for each of the "Key Indicator" questions identified in **Table 2**.

Figure 2. CAHPS Chronic Q49 Results



Health Plan Rating. Question 49 asked caregivers to provide an overall rating for their child's health plan. Out of the 434 caregiver responses to Q49, 82.4% rated their child's health plan as an 8 or above. Another 15.3% provided ratings between 5 and 7, and 2.3% rated their plan lower than a 4. The results indicate a very positive experience with child health plans among caregivers, with a moderate but notable subset reporting mid-grade experiences of 5 to 7.

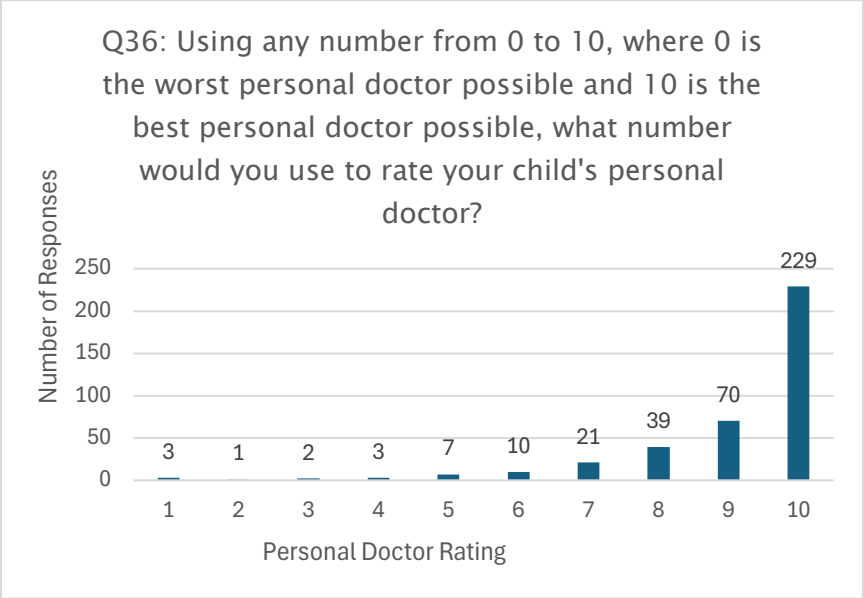
Figure 3. CAHPS Chronic Q9 Results



Health Care Rating. Question 9 asked caregivers to rate their child's overall health care from the past six months. Out of the 366 caregiver responses received for Q9, 82.2% rated their child's health care an 8 or above. Fifty-eight caregivers (15.8%) rated the health care their child received between a 5 and 7, while the remaining seven caregivers rated their child's health care as a 4 or below (1.9%). Results demonstrate that most caregivers felt

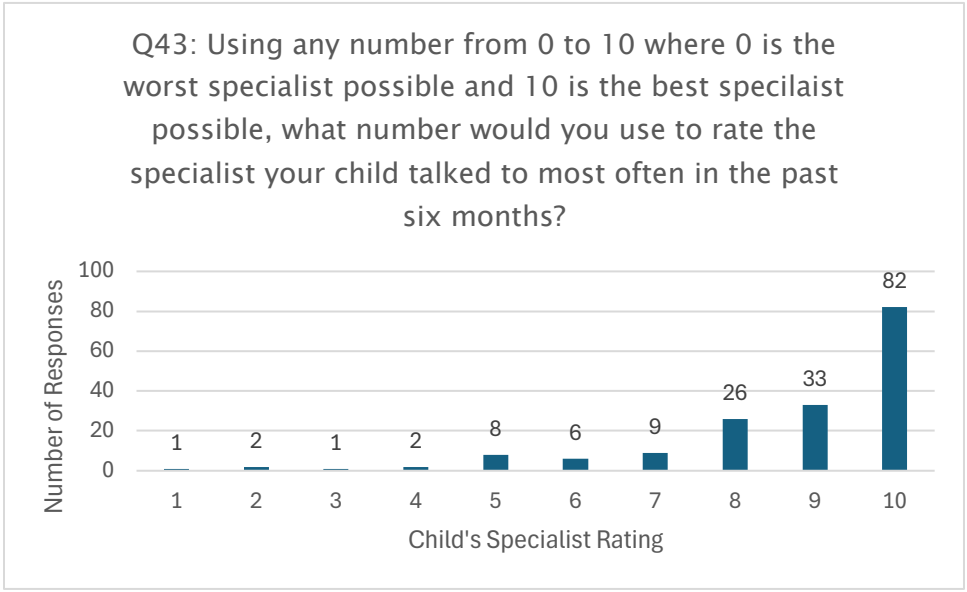
positively about their child's recent health care, with a very small percentage reporting negative perception.

Figure 4. CAHPS Chronic Q36 Results



Personal Doctor Rating. Question 36 asked caregivers to rate their child's personal doctor. Out of the 385 caregiver responses received for Q36, 87.8% rated their child's doctor an 8 or above. Only 1.6% rated their child's doctor below a 4, demonstrating strong perceptions of members' personal doctors.

Figure 5. CAHPS Chronic Q43 Results

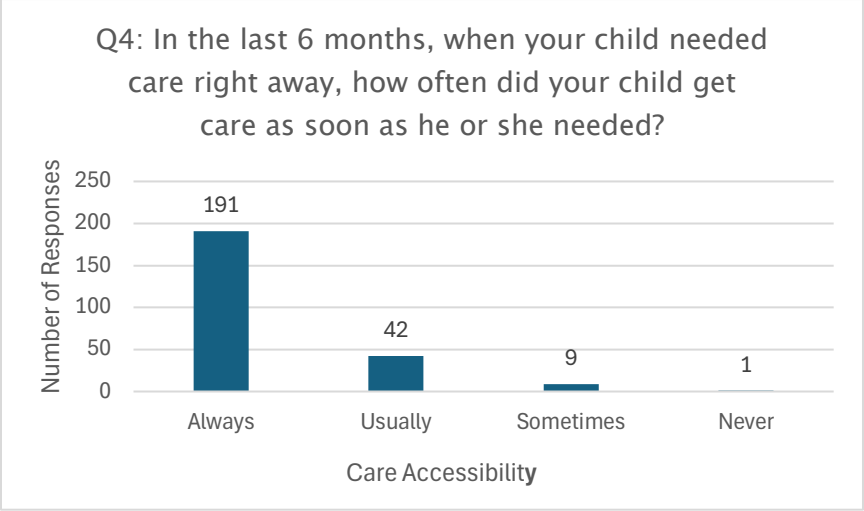


Specialist Rating. Question 43 gathered information pertaining to specialists visited in the past six months. Among the 170 caregiver responses to Q43, ratings were generally strong. Most (82.0%) respondents rated the specialist at 8 or above. Only 2.3% rated their child's specialist below a 4. Almost half of all responses selected the highest rating of 10, indicating a very strong perception of members' interactions with their specialists.

Figure 6. CAHPS Chronic Q46 Results

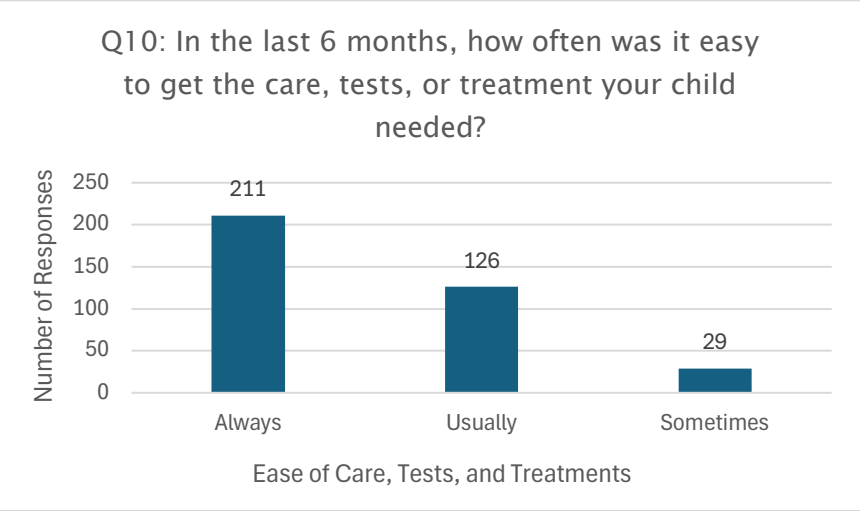
Customer Service Experiences. Question 46 asked respondents about their experience with health plan customer service support. Among the 122 caregiver responses to Q46, an overwhelming majority (90.2%) reported that customer service staff always or usually treated them with courtesy and respect. Only 12 (9.8%) respondents indicated negative experiences with customer service. The high concentration of responses at "Always" suggests that most caregivers are receiving positive and productive customer service.

Figure 7. CAHPS Chronic Q4 Results



Care Accessibility. Question 4 asked respondents about their ability to receive prompt care when needed during the past 6 months. Among the 243 caregivers who responded to Q4, 95.9% reported that their child always or usually received care as soon as needed in the past six months. Of all respondents, 78.6% selected "Always" and 17.3% selected "Usually", while 3.7% selected "Sometimes".

Figure 8. CAHPS Chronic Q10 Results



Ease of Care, Tests, and Treatments. Question 10 evaluated the level of ease members experienced when receiving care, tests, or treatment. Of the 366 caregiver responses to Q10, nearly all caregivers reported their child was able to access needed care, tests, and treatments. A combined 92.1% of respondents indicated they were always or usually able to access needed services. The remaining 29 members (7.9%) experienced some difficulty receiving these services and selected "Sometimes".

3 Care Frequency Data

This section summarizes how frequently caregivers for children with chronic conditions interacted with different health care systems. Most respondent caregivers had some type of contact with the health care system for their child in the past six months. In total, 83.7% had received care at least once and 83.3% had a visit with their personal doctor. Routine care was very common among respondents, with 77.1% of caregivers making an appointment for a check-up or routine visit. Specialist visits were common but less frequent, with 66.5% of caregivers visiting a provider outside of their child's personal doctor.

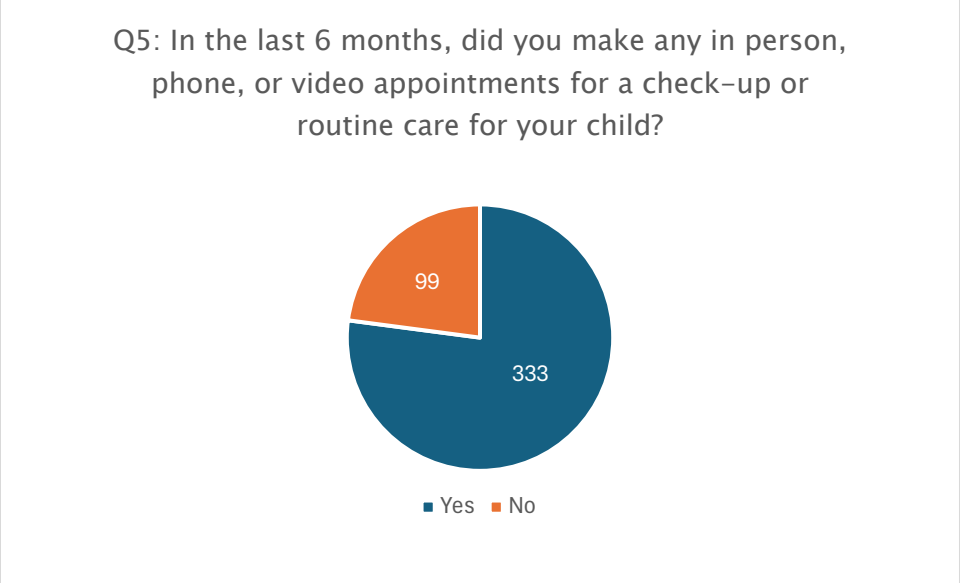
Overall, survey results indicate a high level of utilization and engagement in health care services. This includes routine primary care as well as specialist care. **Table 3** provides response data for care frequency.

Table 3. CAHPS Children with Chronic Conditions Interactions with Health Care System

Measure	Response
Caregivers who made in person, phone, or video appointments for a check-up or routine care for their child (Q5)	77.1%
Recipients who received health care at least once in person, by phone, or by video in the last six months (Q7)	83.7%
Recipients who had a visit with their personal doctor in person, by phone, or by video (Q26)	83.3%
Recipients who received care from a doctor or health provider besides their personal doctor (Q34)	66.5%
Caregivers who made an appointment with a specialist for their child (Q40)	59.0%

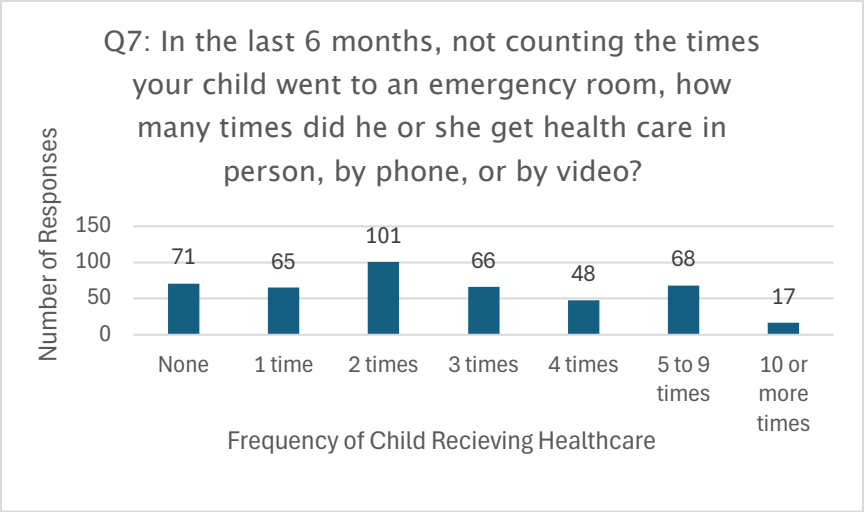
Figures 9 through 13 below demonstrate the health care measures represented in **Table 3** above.

Figure 9. CAHPS Chronic Q5 Results



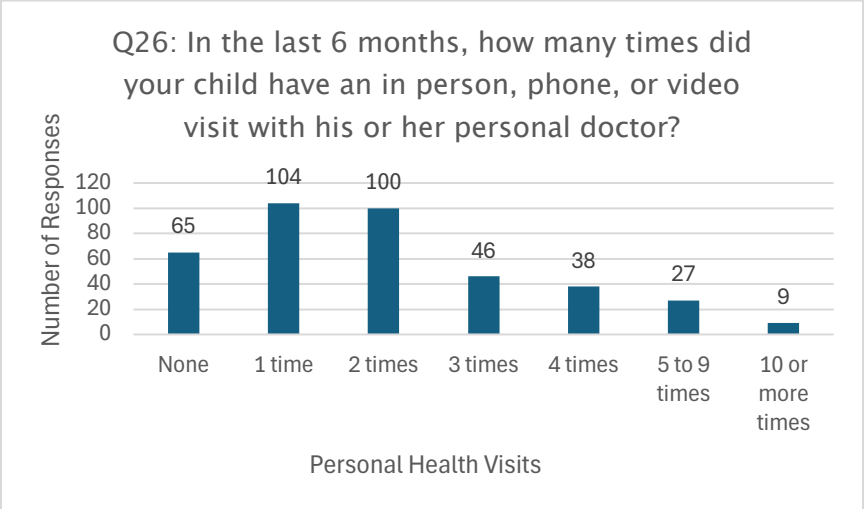
Routine Care Appointments. Question 5 asked respondents whether or not they made appointments for their child. Of the 432 caregiver responses to Q5, 333 (77.1%) of them stated that they made in-person, phone, or video appointments for routine care or a check-up within the past six months. The remaining 99 (22.9%) caregiver respondents stated that they did not do so.

Figure 10. CAHPS Chronic Q7 Results



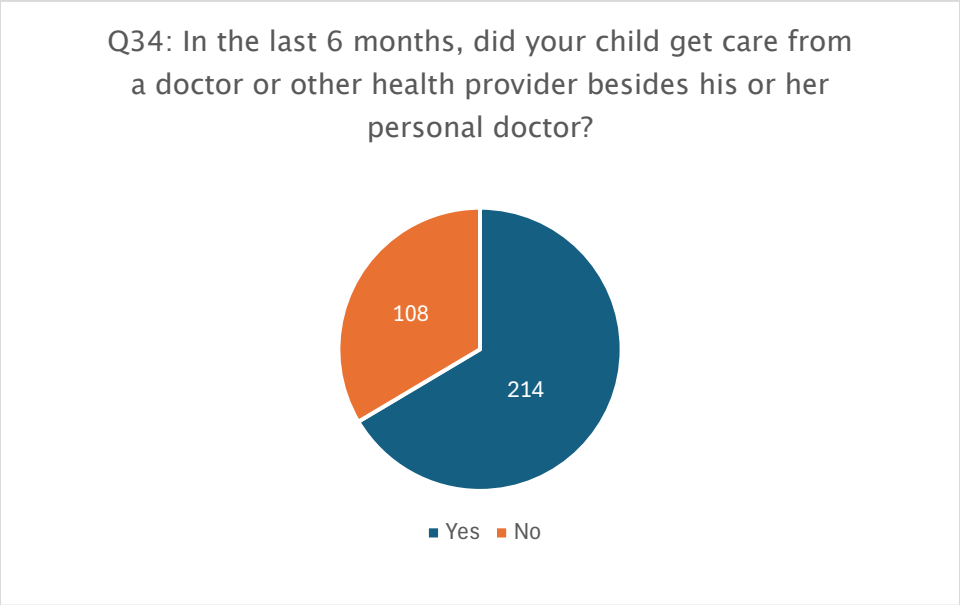
Health Care Frequency. Question 7 measured the number of health care interactions by members in the past six months. Of the 434 caregiver responses to Q7, 83.6% reported their child had received health care at least once in the past six months, and only 16.4% reported no visits. Responses were concentrated among multiple visits, with 69.1% having two or more interactions with the health care system, including 64.1% who had between one and four visits and 19.6% who had five or more visits.

Figure 11. CAHPS Chronic Q26 Results



Personal Health Visits. Question 26 measured the frequency with which caregivers had visits with their child's personal doctor. Of the 389 caregivers who responded to Q26, most reported one or more visits with their child's personal doctor in the past 6 months (83.3%) while only 16.7% reported no visits with their child's personal doctor. 74.0% of caregivers had between one and four visits, representing the highest concentration.

Figure 12. CAHPS Chronic Q34 Results



Additional Provider Utilization. Question 34 quantified the number of visits members had with providers outside of their personal doctor. Of the 322 caregiver responses to Q34, 66.5% (214) stated that they received care from a doctor or other health provider besides their personal doctor, while 33.5% (104) stated that they did not.

Figure 13. CAHPS Chronic Q40 Results

Specialist Appointments. Question 40 measured whether caregivers made appointments with a specialist in the past six months. Of the 437 caregiver responses to Q40, 59.0% reported making an appointment with a specialist for their child in the past six months,

and 41.0% did not. This indicates that slightly more than half of respondents had contact with a specialist provider.

4 Findings and Recommendations

The section below details survey findings and high-level recommendations for Wyoming Medicaid and CHIP programs based on the 2025-2026 CAHPS survey results.

4.1 Medicaid and CHIP Program Findings

4.1.1 Overall Health

The 2025-2026 survey results indicate that the caregivers of Children with Chronic Conditions population being served by the Medicaid and Children's Health Insurance Program (CHIP) programs report overall positive experiences with their child's health plan. The majority of children had interactions with the healthcare system in the past six months. Over 80% of children received care and had at least one visit with a personal doctor during that timeframe. Routine care was common amongst respondents (77.1%), with 66.5% receiving care from another provider other than their personal doctor and 59.0% seeing a specialist.

Respondents also indicated a strong and clear access to care with 95.9% indicating it was usually or always easy to get care, tests, or treatment. Additionally, members reported positive experiences with their health plan providers with more than 82% of caregivers rating their child's doctor an 8 or higher. In addition, 90.2% of respondents had positive encounters with customer service.

Key findings related to member health experiences and health plan quality include:

- **Strong Ratings of Providers.** A strong majority of caregivers rated their child's personal doctor and specialists an 8 or higher (80%) indicating positive relationships and interactions with healthcare professionals and related services.
- **Strong Ratings of Health Plans.** 82% of respondents rated their child's health plan an 8 or higher, demonstrating healthy correlation between health needs and plan offerings.
- **Positive Customer Service Experiences.** A strong majority of respondents indicated healthy and positive interactions with customer service, demonstrating a strong system of support for member questions, inquiries, and needs.
- **Consistent Utilization of Primary and Routine Care.** Over 83% of children saw a personal doctor in the past six months with 77.1% receiving routine or preventative care during that time period.

- **Variability in Specialty Care Utilization.** Even amongst children who have chronic diagnoses, not all utilized specialty care to support those health needs. Only 59.0% of respondents reporting seeing a specialist and 66.5% received care beyond their personal doctor. This suggests that many chronic health needs are being cared for in the primary setting.

Table 4 provides detailed information on the question and ratings of overall health along with corresponding recommendations and justifications, while **Figure 14** compares the 2025-2026 results for Overall Member Health with those from the 2024-2025 survey.

Table 4. Overall Health

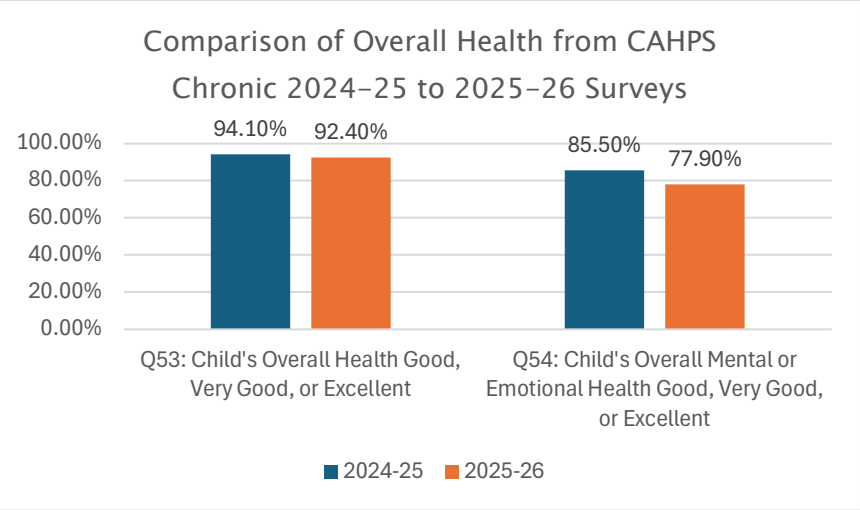
Question	Survey Results	Corresponding Recommendations	Justification for Recommendations
Q53. In general, how would you rate your child's overall health?	92.4% rated their child's health as good, very good or excellent.	Continue to support primary care and patient relationships with personal doctors.	While 92.4% of caregivers rated their child's health as positive, 7.6% of caregiver respondents rated their child's health as below good. Continuing to emphasize strong primary and routine care will maintain these strong reported relationships and capture existing patients who are in need of enhanced support.
Q54. In general, how would you rate your child's overall mental or emotional health?	77.9% rated their children's mental or emotional health as good, very good or excellent.	Expand access to behavioral health services in the primary care setting.	22.1% of caregivers reported fair or poor mental health for their child, a substantially larger gap than physical health. Given that primary care relationships are both strong and frequent, enhancing behavioral health supports in the primary care setting allows behavioral and emotional health needs to

Table 4. Overall Health

Question	Survey Results	Corresponding Recommendations	Justification for Recommendations
			be addressed more quickly and organically.

Figure 14 compares the 2025–2026 results for Overall Child Health with those from the 2024–2025 survey.

Figure 14. CAHPS Chronic Overall Health Comparison to 2024–25



Overall Member Health. Q53 and Q54 ask respondents to rate their child's overall and emotional health. The percentage of caregiver respondents who reported their child's overall health as good, very good, or excellent decreased by 1.7% between the 2024–2025 survey and the 2025–2026 survey. The percentage of caregiver respondents who reported their child's mental health as good, very good, or excellent decreased by 7.6% between the 2024–2025 and 2025–2026 surveys. This decrease is notable and is misaligned with reported physical health.

4.1.2 Recommendations

Most caregivers indicated positive perceptions of their child's overall physical health, with 92.4% providing ratings of good, very good, or excellent. However, perceptions of mental and emotional health were notably lower. Only 77.9% of caregivers felt their child's emotional health was positive. Caregivers reported a high frequency of healthcare visits, making this disparity between emotional and physical health notable. 83.7% received care in the past six months and 95.9% reported care was received as soon as needed. 92.1% of these respondents also felt that it as easy to obtain that needed care. These results

suggest a strong access to and utilization of care consistent with positive physical outcomes. However, a gap exists in that care translating to emotional health and wellbeing.

Based on the results, the Children's Medicaid and CHIP programs should consider the following actions to support members with chronic conditions:

- **Expand Access to Behavioral Health Services in the Primary Care Setting.** The frequency and perceived quality of primary and routine care among the respondent population suggests that these settings, where patients are able to interact with their personal doctor, have a high rate of success. Nearly one fourth of caregivers reported their child's emotional health as below good, while most reported positive physical health. These findings suggest that expanding awareness and access of behavioral health services in the primary care setting can support the emotional needs of members. By increasing the awareness, skillset, and support of behavioral health needs amongst primary care providers (e.g., doctors, nurses), they can address behavioral needs in a setting where the patient feels both comfortable and reports positive experiences.
- **Support Existing Enrolled Primary and Personal Doctors.** Caregivers reported overwhelmingly positive experiences with their child's primary care doctor as well as their specialist. The majority of caregivers also reported their child's physical health as good. These two data points indicate that having positive and regular relationships with a personal doctor translates to positive physical health outcomes for respondents. These relationships should continue to be supported through robust provider enrollment and customer service supports to ensure that Medicaid has both the quantity and quality of providers enrolled in its health plans. Providing robust customer service to enrolled providers ensures that the relationship between provider offices and Medicaid health plans is strong.
- **Examine Member Customer Service Practices.** An exceptionally high number of respondents reported positive experiences with customer support services for their health plan. This does not align with perceptions of customer service in the Adult plan. By examining the current processes, personnel, or vendor support for customer service for this population, Medicaid can enhance perceptions of and experiences with customer service for other populations.

4.1.3 Prescription Medication Access

The survey results indicate that many recipients regularly need prescription medication and refills. Over half of caregiver respondents (54.3%) indicated their child is currently on prescription medication. This survey information can provide Medicaid with the opportunity to streamline prescription medication processes and provide recipients with the best information for acquiring prescriptions. **Table 5** provides the results of these questions as

well as corresponding recommendations and their justifications, while **Figure 15** provides a comparison of these results to the 2024–2025 survey results.

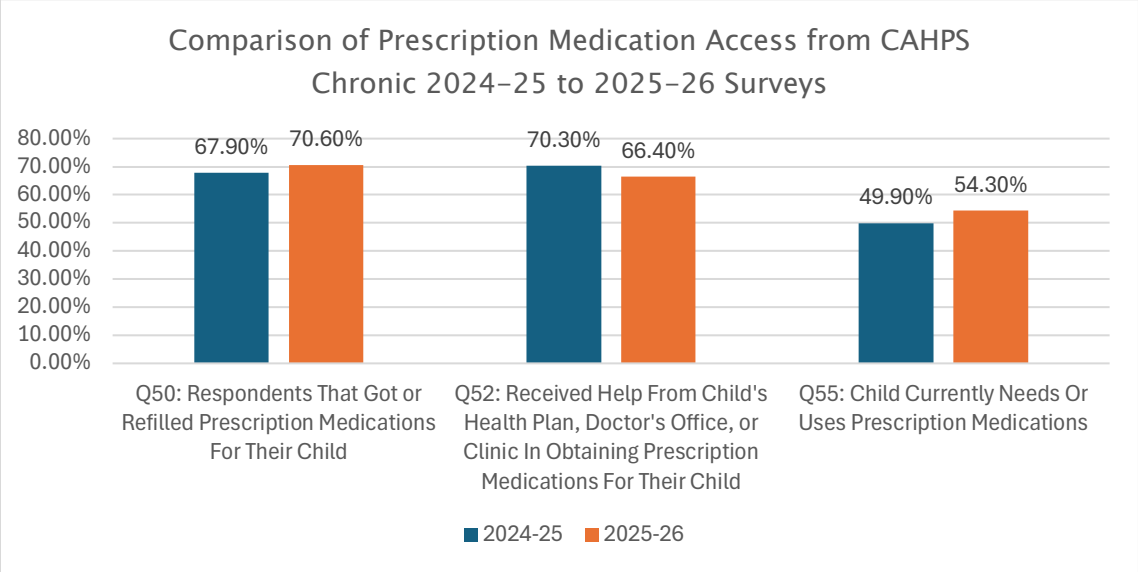
Table 5. Prescription Medications

Question	Survey Results	Corresponding Recommendations	Justification for Recommendations
Q50. In the last 6 months, did you get or refill any prescription medicines for your child?	70.6% of caregiver respondents indicated they refilled or were on a prescription medication.	Support prescription and pharmacy education for members.	Nearly two-thirds of caregivers refilled a prescription for their child in the past six months. This high level of pharmacy utilization suggests that ongoing efforts to support families in filling prescriptions and understanding what is covered by their plan will affect a large subset of members.
Q52. Did anyone from your child's health plan, doctor's office, or clinic help you get your child's prescription medicines?	66.4% indicated that they received help from their child's health plan, doctor's office, or clinic.	Support engagement in Medicaid and CHIP prescription coverage and processes.	Nearly 30% of caregivers reported not receiving help from their child's provider or health plan for prescription processes. Investing in pharmacy plan education and patient outreach for providers and offices can capture the one-third of members not currently receiving support.
Q55. Does your child currently need or use medicine prescribed by a	54.3% indicated that their child is currently on prescribed medication.	Support engagement in Medicaid and CHIP prescription coverage and processes.	As over half of caregiver respondents indicated that their child is currently on prescription medication. Supporting materials and ongoing education can

Table 5. Prescription Medications

Question	Survey Results	Corresponding Recommendations	Justification for Recommendations
doctor (other than vitamins)?			help families navigate pharmacy coverage.

Figure 15. Comparison of Prescription Medication Access Results to 2024–25 Survey



5 Recommendations

Of the survey respondents, approximately two-thirds reported refilling prescriptions for their child in the past six months and 54.30% reported their child needed or currently uses prescription medications. Of those respondents, about one-third reported not having received help with filling those prescriptions from their doctor, doctor's office, or their health plan. These findings suggest that while a large percentage of caregivers fill prescriptions for their child, a notable subset of those caregivers are not currently receiving support with filling those medications through their pharmacy plan. Additionally, a little over half of this population reported currently using or needing prescriptions in an ongoing basis. Based on these results, PK recommends that the Medicaid and CHIP programs:

- **Educate Caregivers and Families on Prescription and Pharmacy Processes:** Create educational handouts, newsletters, or emails for recipients and families to familiarize themselves with current pharmacy processes. These resources can include price

breakdowns, pharmacies known to carry needed prescriptions, and questions to ask providers or health plan representatives.

- **Encourage Provider Outreach Regarding Prescriptions**: Encourage providers to reach out and support the population that requires prescriptions. This could include communication channels to ensure recipients and families understand the pharmacy program.

5.1 Areas of Strength

Six survey questions emerged as areas of strength for the overall Wyoming Medicaid program. These primarily relate to provider quality, frequency of primary care, ease of access, and timeliness of care. Results suggest that most caregivers view their doctors and other provider types as respectful, helpful, and attentive. **Table 6** details additional identified strengths and ratings.

Table 6. 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?	95.9% of caregiver respondents indicated that their child always or usually got care as soon as needed.
Q8. In the last 6 months, how often did you have your questions answered by your child's doctor or other health providers?	92.9% of caregiver respondents indicated that their questions were always or usually answered by the doctor or health providers.
Q10. In the last 6 months, how often was it easy to get the care, tests and treatment your child needed?	92.1% of caregiver respondents indicated it was always or usually easy to get 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?	96.6% of respondents indicated that their child's doctor always or usually explained things about their child's health.
Q28. In the last 6 months, how often did your child's personal doctor listen carefully to you?	96.0% of respondents indicated that their child's doctor always or usually listened.

Table 6. Areas of Strength

Question	Survey Results
Q29. In the last 6 months, how often did your child's personal doctor show respect for what you had to say?	97.5% of respondents indicated that their child's doctor always or usually shows respect.

5.2 Areas of Opportunity

In addition to the opportunities noted in individual sections of the results, three areas of overall program improvement emerged. Although the survey yielded positive results, areas for improvement exist in primary care-based behavioral health, pharmacy support, and accessing medical equipment. **Table 7 provides** detailed information and recommendations for the Medicaid program.

Table 7. Areas of Opportunity

Question	2025-2026
Q15. In the last 6 months, how often was it easy to get special medical equipment or devices for your child?	69.2%
Q54. In general, how would you rate your child's overall mental or emotional health?	77.9%
Q52. Did anyone from your child's health plan, doctor's office, or health clinic help you get your child's prescription medicines?	66.4%

6 Methodology

Survey results were evaluated using multiple methods. Quantitative data was collected through both paper and electronic surveys, with follow-up reminders sent via email and text messages. The survey was open from February 13, 2026, to May 15, 2026. Participants received an initial mailing of the survey along with an email containing the online survey link. Additionally, DHCF distributed twelve email reminders and eleven text message reminders throughout the data collection period to encourage participation.

The Child CAHPS Survey targets child enrollees in both the Medicaid and CHIP programs as part of the standardized national instruments developed under the CAHPS program. To qualify, participants must have experienced no more than one enrollment gap of up to 45 days within the continuous enrollment period. Participants were required to be actively enrolled at the time of survey completion. These criteria ensured that the survey targeted individuals with consistent Medicaid coverage during the specified period. The CAHPS Health Plan Survey remains part of the Medicaid Core Set reporting requirements that are mandatory for states. The survey aimed to gather insights into participants' experiences with their health plans and identify areas for improvement, in accordance with Center for Medicare and Medicaid (CMS) requirements for the CAHPS survey. PK collaborated with the Department of Healthcare Financing (DHCF) to finalize the survey questions and coordinate distribution logistics.

Responses were consolidated into a standardized database for analysis. Upon completion of data collection, PK analyzed the responses and prepared a comprehensive report of the findings.

7 Conclusion

This report summarizes findings from the 2025-2026 CAHPS Children Medicaid and CHIP Survey for members with Chronic Conditions with data collected from February 13, 2026 through May 15, 2026, through online and mail-in responses from 4,140 sampled participants. The survey was conducted through a partnership between the Wyoming Department of Health and Public Knowledge®. Response activity was concentrated in early April, with steady participation maintained through weekly reminders. Overall, the effort successfully achieved the minimum response rate, providing valuable insights into participant experiences within the Medicaid program.

Overall results indicate that caregivers of Medicaid and CHIP members with chronic conditions had positive experiences with their health plan, doctors, and related support services. Caregivers reported strong physical health outcomes with 92.4% rating their child's physical health as good, very good, or excellent. This strong indication of physical health is seen in tandem with high utilization of regular primary care and personal doctor interactions with 83.7% of children receiving care, 83.3% visiting a personal doctor, and 77.1% receiving routine care in the past six months. Respondent's experience with care interactions is also strong with a majority reporting timely care (95.9%) and 92.1% reporting ease of accessing care. Ratings of emotional and mental health were notably lower with nearly one-third of respondents reporting less than good mental and emotional health. This gap suggests that enhanced behavioral healthcare access in the primary care

setting may have a meaningful impact on mental health outcomes for respondent's children.

Survey findings offer quantifiable data to support ongoing quality improvement efforts for Wyoming Medicaid and CHIP health plans. Continuing to emphasize primary care and members' relationships with a personal doctor will support the already healthy existing foundation of routine care. Ensuring members continue to have appropriate supports for services such as pharmacy and medical equipment will ease frustration and reduce access barriers. Furthermore, continuing to support provider enrollment in Medicaid and CHIP program will ensure continuity of care and strong health outcomes for children with chronic conditions across Wyoming.