# the link

## Prime Enrollees Consumer Watch

# 88th Med Grp-Wright-Patterson FY 2017 Defense Health Cost Assessment & Program Evaluation

88th Med Grp-Wright-Patterson: Sample size-2,982 Response rate-20.5%

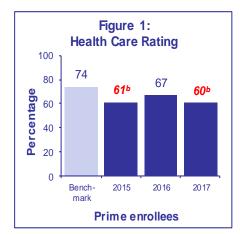
Source: Health Care Survey of DoD Beneficiaries

#### **Inside Consumer Watch**

TRICARE Consumer Watch shows what Prime enrollees at your MTF say about their healthcare in the Health Care Survey of DoD Beneficiaries (HCSDB). Every quarter, representative sample of TRICARE beneficiaries are asked about their care in the last 12 months. Responses are adjusted for age and health status. Results from FY2015 to FY2017 are reported here. Starting in FY2013, results include scores from surveys fielded in only three quarters. The survey for quarter four was canceled as a result of sequestration.

The HCSDB includes questions from the Consumer Assessment of Healthcare Providers and Systems (CAHPS), a survey designed to help consumers choose among health plans. Benchmark data, from the National Committee for Quality Assurance (NCQA) for 2015, are used in calculating benchmarks.

a Significantly exceeds benchmark (p<.05).</li>
b Significantly falls short of benchmark (p<.05).</li>
See appendix for table data.

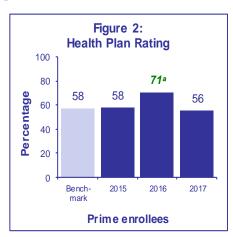


#### **Health Care**

Prime enrollees were asked to rate their healthcare from 0 to 10, where 0

is worst and 10 is best. Figure 1 shows the percentage who rated their healthcare 8 or above for each of the following time periods: 2015, 2016, and 2017.

Labels refer to the year a survey was fielded. Numbers in red italics are significantly different from the benchmark (p<.05). Health care ratings depend on things like access to care, and how patients get along with the doctors, nurses, and other care providers who treat them.



#### **Health Plan**

Prime enrollees were asked to rate their health plan from 0 to 10, where 0 is worst and 10 is best. Figure 2 shows the percentage who rated their plan 8 or above for each reporting period.

Health plan ratings depend on access to care and how the plan handles things like claims, referrals and customer complaints.

#### **Personal Provider**

Prime enrollees who have a personal provider were asked to rate their personal provider from 0 to 10, where 0 is worst and 10 is best.

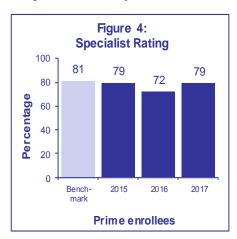


Figure 3 shows the percentage who rated their doctor 8 or above for each reporting period. Personal doctor ratings depend on how the patient gets along with the one doctor responsible for their basic care.

#### **Specialist**

Enrollees who have consulted specialist physicians were asked to rate from 0 to 10 the specialist they had seen most in the previous 12 months.

Figure 4 shows the proportion of enrollees who rated their specialist 8 or above for each reporting period. Specialist ratings depend on beneficiaries' access to doctors with the special skills they need.



### 88th Med Grp-Wright-Patterson FY 2017

#### **Health Care Topics**

Health Care Topics scores average together results for related questions. Each score is the percentage who "usually" or "always" got treatment they wanted or had "no problem" getting a desired service.

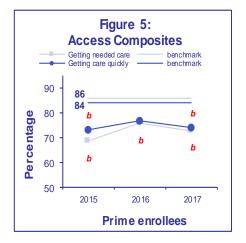
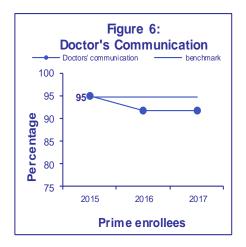


Figure 5 (Access Composites) includes the composites "Getting needed care" and "Getting care quickly." Scores in "Getting needed care" are based on getting referral to a specialist and getting needed treatments. "Getting care quickly" scores concern how long patients wait for an appointment or urgent care.

Figure 6 (Doctor's Communication) includes the composite for "How well doctors communicate." Scores in "How well doctors communicate" are based on whether the personal doctor spends enough time with patients, treats them respectfully and answers their questions.

Figure 7 (Claims/Service Composites) includes composite scores for "Customer service" and "Claims processing." Scores in the "Customer service" composite concern patients' ability to get courteous service and information about their health plan.

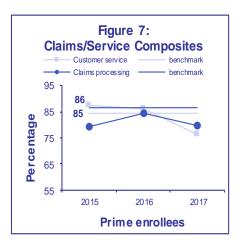
"Claims processing" scores are based on both timeliness and correctness.



#### **Preventive Care**

The preventive care table compares Prime enrollees' rates for diagnostic screening tests and smoking cessation with goals from Healthy People 2020, a government initiative to improve Americans' health by preventing illness.

The mammography rate shown is the proportion of women 40 or above with a mammogram in the past two years. Pap smear is the proportion of adult women screened for cervical cancer in the past three years.



Hypertension is the proportion of adults whose blood pressure was checked in the past two years and who know whether their pressure is too high. Prenatal care is the proportion of women pregnant now or in the past 12 months who received prenatal care in their first trimester. Percent not obese is the proportion with a body mass index below 30. The non-smoking rate is the proportion of adults who currently do not smoke. Counseled to quit is the number of smokers or tobacco users whose doctor told them to quit, over the number of smokers and tobacco users with an office visit in the past 12 months.

#### **Preventive Care**

Type of Care	2015	2016	2017	Healthy People 2020 Goal
Mammography (women ≥ 40)	75	82	<b>91</b> a (67)	81
Pap Smear (women ≥ 18)	74 <sup>b</sup>	85 <sup>b</sup>	<b>65</b> <sup>b</sup> (130)	93
Hypertension Screen (adults)	95	91	95 (226)	95
Prenatal Care (in 1st trimester)	-	-	-	78
Percent Not Obese (adults)	75	81ª	<b>78ª</b> (215)	69
Non-Smokers (adults)	982	93	<b>96</b> <sup>a</sup> (222)	88
Counseled to Quit (adults)	-	-	-	-

<sup>&</sup>lt;sup>a</sup>Numbers in green significantly exceed the Healthy People 2020 goal (p<.05).

<sup>&</sup>lt;sup>b</sup>Numbers in red significantly fall short of the Healthy People 2020 goal (p<.05).

The number of responding beneficiaries for each type of care is in parentheses.

**Figure 1: Health Care Rating** 

Year/Benchmark	Prime enrollee	
Benchmark	74	
2015	61 b	
2016	67	
2017	60 b	

Figure 2: Health Plan Rating

Year/Benchmark	Prime enrollee	
Benchmark	58	
2015	58	
2016	71 <sup>a</sup>	
2017	56	

**Figure 3: Personal Provider Rating** 

Year/Benchmark	Prime enrollee	
Benchmark	82	
2015	72	
2016	74	
2017	71 <sup>b</sup>	

Figure 4: Specialist Rating

Year/Benchmark	Prime enrollee	
Benchmark	81	
2015	79	
2016	72	
2017	79	

**Figure 5: Access Composites** 

Year	Getting Needed Care	Benchmark For Getting Needed Care	Getting Care Quickly	Benchmark For Getting Care Quickly
2015	69 <sup>b</sup>	86	73 <sup>b</sup>	84
2016	<b>76</b> <sup>b</sup>	86	77	84
2017	<b>73</b> <sup>b</sup>	86	<b>74</b> <sup>b</sup>	84

Figure 6: Doctor's Communication

Year	Doctor's Communication	Benchmark
2015	95	95
2016	92	95
2017	92	95

**Figure 7: Claims/Service Composites** 

Year	Customer Service	Benchmark For Customer Service	Claims Processing	Benchmark For Claims Processing
2015	87	85	79	86
2016	86	85	85	86
2017	76	85	80	86

### **Preventive Care**

Type of Care	FY 2015	FY 2016	FY 2017	Healthy People 2020 Goal
Mammography (women >= 40)	75	82	91 <sup>a</sup> (67)	81
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Counseled to Quit (adults)	-	-	-	-

a. Numbers in green significantly exceed the Healthy People 2020 goal (p< .05). b. Numbers in red significantly fall short of the Healthy People 2020 goal (p< .05). The number of responding beneficiaries for each type of care is in parentheses.