Prime Enrollees Consumer Watch

NH Okinawa • Fiscal Year 2021

DIRECTORATE OF STRATEGY, PLANNING AND FUNCTIONAL INTEGRATION (J-5)



Inside Consumer Watch

TRICARE Consumer Watch shows what TRICARE Prime enrollees in your MTF say about their health care in the Health Care Survey of DoD Beneficiaries (HCSDB). Every quarter, a representative sample of adult TRICARE beneficiaries are asked about the care they received in the last 12 months, and the results are adjusted for age and health status. This publication reports results for beneficiaries younger than 65. These results are compared to civilian benchmarks that are adjusted for age and health status to match the population of TRICARE beneficiaries.

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 comes from the National Committee for Quality Assurance (NCQA) for 2019 and from the U.S. Department of Health and Human Services Healthy People 2020 (HP2020) goals.

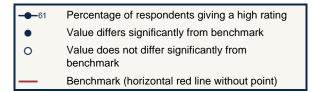
Results

Source: Health Care Survey of DoD Beneficiaries

In this section, a series of charts shows the percentages of beneficiaries who rated a certain aspect of their care highly in the surveys fielded in fiscal year 2021 and each of the previous two fiscal years. These ratings are compared to the civilian benchmark¹, which is indicated with a horizontal line. Percentages that differ significantly from the benchmark are indicated with filled points, and percentages that do not differ significantly from the benchmark are indicated with open points.

The same information shown in Figures 1–6 is shown in tabular form in the corresponding tables in the appendix.

How to read the charts:



Health Care

Prime enrollees were asked to rate their health care on a scale from 0 to 10, where 0 is worst rating, and 10 is the best. For each reporting period, Figure 1 shows the percentage who gave their health care a rating of 8 or higher. 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.

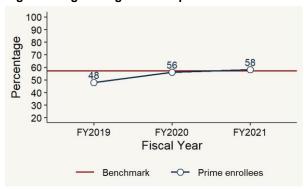
Figure 1. High rating of health care



Health Plan

Prime enrollees were asked to rate their health plan on a scale from 0 to 10, where 0 is the worst rating, and 10 is the best. For each reporting period, Figure 2 shows the percentage who gave their plan a rating of 8 or higher. Health plan ratings depend on access to care and how the plan handles things like claims, referrals, and customer complaints.

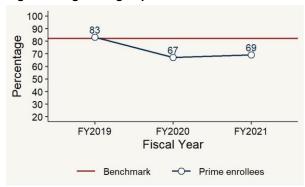
Figure 2. High rating of health plan



Personal Doctor

Prime enrollees who have a personal doctor were asked to rate this doctor on a scale from 0 to 10, where 0 is the worst rating, and 10 is the best. For each reporting period, Figure 3 shows the percentage who gave their doctor a rating of 8 or higher. Personal doctor ratings depend on how patients get along with the doctor responsible for their basic care.

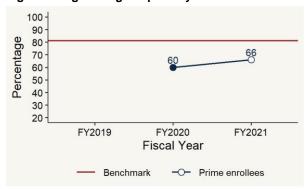
Figure 3. High rating of personal doctor



Specialist

Prime enrollees who have consulted specialist physicians were asked to rate the specialist they had seen most in the previous 12 months on a scale from 0 to 10, where 0 is the worst rating, and 10 is the best. For each reporting period, Figure 4 shows the percentage who gave their specialist a rating of 8 or higher. Specialist ratings depend on beneficiaries' access to doctors with the special skills they need.

Figure 4. High rating of specialty care

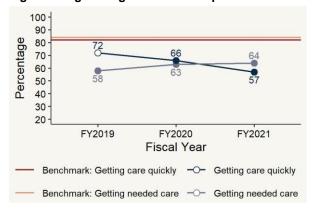


Health Care Topics

Health care topics scores are averages of the scores for sets of related questions. Each score is the percentage of Prime enrollees who "usually" or "always" got the treatment they wanted, or had "no problem" getting a desired service.

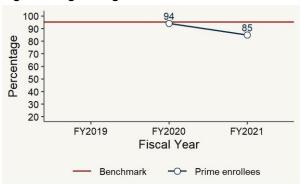
For each reporting period, Figure 5 shows the percentage of enrollees who were able to get needed care and to get care quickly. Scores for getting needed care are based on getting to see a specialist and getting needed treatments. Scores for getting care quickly reflect how long patients wait for an appointment or for urgent care.

Figure 5. High rating of access composites



For each reporting period, Figure 6 shows the percentage of enrollees who gave a high rating for doctor communication. Scores in this composite are based on whether the personal doctor spends enough time with patients, treats them respectfully, listens to them, and explains things in an understandable way.

Figure 6. High rating of doctor communication



Preventive Care

Table 1 compares Prime enrollees' rates for diagnostic screening tests, smoking cessation, and obesity to goals from Healthy People 2020, a government initiative to improve Americans' health by preventing illness.

The mammography rate shown is the proportion of women age 40 or older who had a mammogram in the past two years. The pap smear rate refers to the proportion of adult women screened for cervical cancer in the past three years. The hypertension rate is the proportion of adults whose blood pressure was checked in the past two years, and who know whether their pressure is too high. The prenatal care rate is the proportion of women who are pregnant now or have been in the past 12 months who received prenatal care in their first trimester.

The percentage not obese is the proportion of adults with a body mass index below 30. The nonsmoking rate is the proportion of adults who currently do not smoke. The percentage counseled to quit is the proportion of smokers or tobacco users, with an office visit in the past 12 months, whose doctor advised them to quit smoking.

Table 1. Preventive care

Type of Care	FY2019	FY2020	FY2021	HP2020 Goal
Mammography	-	-	-	81
Pap smear	-	76	72 ^b	93
Hypertension	85	82 ^b	72 ^b	95
Prenatal care (in 1st trimester)	-	-	-	85
Percent not obese	95 ^a	87 ^a	79	69
Non-smokers (adults)	95 ^a	94 ^a	97 ^a	88
Counseled to quit (adults)	-	-	-	76

^a Significantly exceeded the Healthy People 2020 goal (p < .05).

^b Significantly fell short of the Healthy People 2020 goal (p < .05).

⁻ Suppressed because of small sample size.

^{1:} In tests of significance, FY 2019 and FY 2020 estimates are compared to FY 2020 benchmarks. FY 2021 estimates are compared to FY 2021 benchmarks.

Appendix

Tables in the Appendix show the same information shown in Figures 1–6 and in Table 1.

Table A.1. High rating of health care

Group	Percentage	Significance	
Benchmark FY2021	73	NA	
Prime enrollees FY2019	51	Significantly lower than benchmark (p < .05)	
Prime enrollees FY2020	39	Significantly lower than benchmark (p < .05)	
Prime enrollees FY2021	51	Significantly lower than benchmark (p < .05)	

Table A.2. High rating of health plan

Group	Percentage	Significance
Benchmark FY2021	57	NA
Prime enrollees FY2019	48	Value is not significantly different than benchmark
Prime enrollees FY2020	56	Value is not significantly different than benchmark
Prime enrollees FY2021	58	Value is not significantly different than benchmark

Table A.3. High rating of personal doctor

Group	Percentage	Significance
Benchmark FY2021	82	NA
Prime enrollees FY2019	83	Value is not significantly different than benchmark
Prime enrollees FY2020	67	Value is not significantly different than benchmark
Prime enrollees FY2021	69	Value is not significantly different than benchmark

Table A.4. High rating of specialty care

Group	Percentage	Significance	
Benchmark FY2021	81	NA	
Prime enrollees FY2019	-	NA	
Prime enrollees FY2020	60	Significantly lower than benchmark (p < .05)	
Prime enrollees FY2021	66	Value is not significantly different than benchmark	

Table A.5. High rating of access composites

Composite	Group	Percentage	Significance
Getting needed care	Benchmark FY2021	84	NA
Getting needed care	Prime enrollees FY2019	58	Significantly lower than benchmark (p < .05)
Getting needed care	Prime enrollees FY2020	63	Significantly lower than benchmark (p < .05)
Getting needed care	Prime enrollees FY2021	64	Significantly lower than benchmark (p < .05)
Getting care quickly	Benchmark FY2021	82	NA
Getting care quickly	Prime enrollees FY2019	72	Value is not significantly different than benchmark
Getting care quickly	Prime enrollees FY2020	66	Significantly lower than benchmark (p < .05)
Getting care quickly	Prime enrollees FY2021	57	Significantly lower than benchmark (p < .05)

Table A.6. High rating of doctor communication

Group	Percentage	Significance
Benchmark FY2021	95	NA
Prime enrollees FY2019	-	NA
Prime enrollees FY2020	94	Value is not significantly different than benchmark
Prime enrollees FY2021	85	Value is not significantly different than benchmark

Table A.7. Preventive care

Type of Care	Group	Percentage	Significance
Mammography	Benchmark FY2021	81	NA
Mammography	Prime enrollees FY2019	-	NA
Mammography	Prime enrollees FY2020	-	NA
Mammography	Prime enrollees FY2021	-	NA
Pap smear	Benchmark FY2021	93	NA
Pap smear	Prime enrollees FY2019	-	NA
Pap smear	Prime enrollees FY2020	76	Value is not significantly different than benchmark
Pap smear	Prime enrollees FY2021	72	Significantly lower than benchmark (p < .05)
Hypertension	Benchmark FY2021	95	NA
Hypertension	Prime enrollees FY2019	85	Value is not significantly different than benchmark
Hypertension	Prime enrollees FY2020	82	Significantly lower than benchmark (p < .05)
Hypertension	Prime enrollees FY2021	72	Significantly lower than benchmark (p < .05)
Prenatal care (in 1st trimester)	Benchmark FY2021	85	NA
Prenatal care (in 1st trimester)	Prime enrollees FY2019	-	NA
Prenatal care (in 1st trimester)	Prime enrollees FY2020	-	NA
Prenatal care (in 1st trimester)	Prime enrollees FY2021	-	NA
Percent not obese	Benchmark FY2021	69	NA
Percent not obese	Prime enrollees FY2019	95	Significantly higher than benchmark (p < .05)
Percent not obese	Prime enrollees FY2020	87	Significantly higher than benchmark (p < .05)
Percent not obese	Prime enrollees FY2021	79	Value is not significantly different than benchmark
Non-smokers (adults)	Benchmark FY2021	88	NA
Non-smokers (adults)	Prime enrollees FY2019	95	Significantly higher than benchmark (p < .05)
Non-smokers (adults)	Prime enrollees FY2020	94	Significantly higher than benchmark (p < .05)
Non-smokers (adults)	Prime enrollees FY2021	97	Significantly higher than benchmark (p < .05)
Counseled to quit (adults)	Benchmark FY2021	76	NA
Counseled to quit (adults)	Prime enrollees FY2019	-	NA
Counseled to quit (adults)	Prime enrollees FY2020	-	NA
Counseled to quit (adults)	Prime enrollees FY2021	-	NA