



CAHPS: Satisfaction with Care

Measure Basic Information

Name and date of specifications used: HEDIS® 2017, Volume 3: Specifications for Survey Measures, Customer Service Composite

URL of Specifications: N/A

Measure Type:

HEDIS PQI Survey Other Specify:

Measure Utility:

CCO Incentive Core Performance CMS Adult Set CHIP Set State Performance

Other Specify:

Data Source: OHP – CAHPS Health Plan Survey 5.0H, Adult and Child Versions

Measurement Period: January 1, 2017 – December 31, 2017. The 2018 CAHPS survey will field in Q1 2018 and will reflect member experience during 2017.

2013 Benchmark: 84%; from the average of the 2012 National Medicaid 75th percentiles for adult and child rates.

2014 Benchmark: 89%; from the average of the 2013 National Medicaid 75th percentiles for adult and child rates.

2015 Benchmark: 89.6%; from the weighted average of the 2014 National Medicaid 75th percentiles for adult and child rates.

2016 Benchmark: 89.2%; from the weighted average of the 2015 National Medicaid 75th percentiles for adult and child rates.

2017 Benchmark: 89.7%; from the weighted average of the 2016 National Medicaid 75th percentiles for adult and child rates.

Incentive Measure changes in specifications from 2016 to 2017:

N/A

Denied claims: Included: N/A Not included: N/A

Measure Details

Data elements required denominator: The CAHPS 5.0H Customer Service Composite is based on two items from the CAHPS adult survey and two from the child survey:

- Health Plan's customer service gave needed information or help.
- Treated with courtesy and respect by Health Plan's customer service staff.

The rate used for the CCO incentive measure is a weighted average across the adult and child survey composite scores. See HEDIS® 2017, Volume 3: Specifications for Survey Measures for details.



The calculation methodology for each composite can be found in the “Banner Book” report published for each CCO. For example, details about how the composite is based on a weighted average can be found in the Banner Book. Banner Books are available online at:

<http://www.oregon.gov/oha/Analytics/Pages/cahps.aspx>

Required exclusions for denominator: None.

Deviations from cited specifications for denominator: None.

Data elements required numerator: See HEDIS® 2017, Volume 3: Specifications for Survey Measures for details. OHA includes both ‘always’ and ‘usually’ as valid responses for the numerator.

Required exclusions for numerator: None.

Deviations from cited specifications for numerator: None.

What are the continuous enrollment criteria: Members must have 6 months experience with Medicaid/OHP to be eligible for the survey sample.

What are allowable gaps in enrollment: Members are allowed a total 45 day gap.

Define Anchor Date (if applicable): None.