STATE OF MARYLAND EXECUTIVE SUMMARY REPORT

FOR

2025 HEALTHCHOICE PCP SATISFACTION SURVEY

Prepared for:
Maryland Department of Health

Prepared by:
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PCP Satisfaction Survey

Background and Purpose

Center for the Study of Services (CSS) administered the 2025 PCP Satisfaction Survey for the Maryland Department of Health (MDH) about HealthChoice Managed Care Organizations (MCOs). PCPs were asked to rate their satisfaction with a specified MCO they participated with. The survey included questions on claims, preauthorization, customer service, and provider relations. PCPs participating with each of the following nine MCOs that provide Medicaid services in the HealthChoice program participated in this study.

- Aetna Better Health of Maryland (ABH)
- CareFirst Community Health Plan (CFCHP)
- Jai Medical Systems (JMS)
- Kaiser Permanente (KPMAS)
- Maryland Physicians Care (MPC)
- MedStar Family Choice (MSFC)
- Priority Partners (PPMCO)
- UnitedHealthcare (UHC)
- Wellpoint Maryland (WPM)

The HealthChoice MCOs provided the population files of participating PCPs. Prior to sampling, any PCPs with an address outside of Maryland or a bordering state were marked as ineligible for the sample. The population file was deduplicated such that a PCP was only selected for one MCO. This was done in a two-step process. First, the PCPs were deduplicated using the PCP National Provider Identifier (NPI). Then, the remaining eligible PCPs were deduplicated using the PCP name and address. All eligible PCPs after the deduplication process were selected for the sample.

The final survey sample included 8,742 PCPs from the nine HealthChoice MCOs.

CSS administered the PCP Satisfaction Survey using a mixed methodology that consisted of mail, email, and fax with telephone follow-up. The survey protocol included two questionnaire mailings, each followed by a reminder postcard. PCPs with fax numbers were sent two faxes instead of the first mail survey outreach. The cover letter in the mailed questionnaire and the faxed questionnaire, and the reminder postcard contained information on how to complete the survey online. PCPs with email addresses were also contacted by email two times. Non-respondents to the mail, fax, and email outreach were contacted by telephone.

Response Rate

Among all the PCPs who met eligibility criteria, 1,303 completed the survey, resulting in an adjusted response rate of 16.05%. Surveys were marked as partial completes when only the PCP practice-related questions (questions 28 through 33) were answered. Additional dispositions at the end of data collection are provided in Exhibit 1.

EXHIBIT 1: PCP SATISFACTION SURVEY: DISPOSITIONS AND RESPONSE RATE

	2025 Number	2025 % Initial Sample	2024 Number	2024 % Initial Sample	2023 Number	2023 % Initial Sample
Initial Sample	8,742		8,378		8,113	
Disposition						
Complete and Eligible - Mail	312	3.57%	368	4.39%	217	2.67%
Complete and Eligible - Phone	568	6.50%	439	5.24%	275	3.39%
Complete and Eligible - Web*	199	2.28%	247	2.95%	201	2.48%
Complete and Eligible - Fax	224	2.56%	200	2.39%	207	2.55%
Complete and Eligible - Total	1,303	14.91%	1,254	14.97%	900	11.09%
Partial Completes	0	0.00%	0	0.00%	5	0.06%
Does not meet Eligible criteria	187	2.14%	246	2.94%	79	0.97%
Deceased	9	0.10%	5	0.06%	3	0.04%
Language Barrier	0	0.00%	0	0.00%	0	0.00%
Retired, No Longer Working at Office	427	4.88%	385	4.60%	222	2.74%
Refusals	175	2.00%	256	3.06%	154	1.90%
Nonresponse after maximum attempts	6,641	75.97%	6,232	74.39%	6,750	83.20%
Adjusted Response Rate **		16.05%		16.20%		11.53%

* All responses collected online. These include responses collected through email outreach, and respondents who used the online login information on mailing materials and fax materials.

** Adjusted response rate= Complete and Eligible Surveys/[Complete and Eligible + Refusal + Nonresponse after maximum attempts]

The following table shows the unadjusted response rate by MCO.

EXHIBIT 2: 2025 PCP SATISFACTION SURVEY: RESPONSE RATE BY MCO

MCO	Sample Size	Number of Completes	Unadjusted Response Rate
Aetna Better Health of Maryland	313	99	31.6%
CareFirst Community Health Plan Maryland	418	93	22.2%
Jai Medical Systems	312	76	24.4%
Kaiser Permanente	413	46	11.1%
Maryland Physicians Care	1,013	191	18.9%
MedStar Family Choice	624	102	16.3%
Priority Partners	1,071	185	17.3%
UnitedHealthcare	1,851	257	13.9%
Wellpoint Maryland, Inc.	2,727	254	9.3%

Survey Results and Analysis

SURVEY MEASURES

The PCP Satisfaction Survey includes four ***composite measures***. Composite measures combine results from related survey questions into a single measure to summarize performance in the areas listed below.

Overall Satisfaction combines responses to three survey questions about overall satisfaction and recommending MCO to providers and patients:

- What is your overall satisfaction with *Specified MCO*?
- Would you recommend *Specified MCO* to patients?
- Would you recommend *Specified MCO* to other providers?

Claims combines responses to three survey questions about claims processing:

- Accuracy of claims processing
- Timeliness of initial claims processing
- Timeliness of adjustment and appeal claims processing

Preauthorization combines responses to six survey questions about timeliness of the authorization process:

- Timeliness of obtaining authorization for medication
- Overall experience in obtaining **prior authorization** for medication
- Timeliness of obtaining authorization for **outpatient** services
- Overall experience in obtaining authorization for **outpatient** services
- Timeliness of obtaining authorization for **inpatient** services
- Overall experience in obtaining authorization for **inpatient** services

Customer Service and Provider Relations combines responses to eight survey questions about communications from the MCO, customer service interactions, member eligibility information, and adequacy of specialist network:

- Process for obtaining member eligibility information
- Quality of written communications, policy bulletins, and manuals
- Ease of contacting the correct customer service representative
- Timeliness and courtesy of the MCO's customer service and provider relations representative
- Accuracy of responses and/or ability to resolve problems
- Accuracy and accessibility of the drug formulary and formulary updates
- Overall, how would you rate Customer Service/Provider Relations?

- How would you rate the number and quality of specialists in the *Specified MCO* network?

In addition, two single-item measures are reported:

- Overall, how would you rate *Specified MCO* on Coordination of Care/Case Management?
- What percentage of your scheduled *Specified MCO* HealthChoice appointments are "no-show" appointments each week?

Composite Global Proportions are calculated by first determining the proportion of respondents selecting the reported response(s) on each survey question contributing to the composite and subsequently averaging these proportions across all items in the composite.

- For *Claims*, *Preauthorization*, *Customer Service and Provider Relations* composite measures, and questions that contribute to the composites, results are reported as the proportion of providers selecting *Excellent* or *Very good*.
- For the *Overall Satisfaction* composite and questions that contribute to the composite, results are reported as the proportion of providers selecting *Very satisfied, Somewhat satisfied,* or *Definitely yes, Probably yes.*
- For *Coordination of Case/Case Management* measure, results are reported as the proportion of providers selecting *Excellent* or *Very good*.
- For *No-Show Specified MCO HealthChoice Appointments*, results are reported as the proportion of providers selecting *None* or *1% to 25%.*

EXHIBIT 3: SUMMARY RATES OF COMPOSITES – OVERALL SATISFACTION AND CLAIMS

	COMPOSITES					
	Overall Satisfaction			Claims		
	2025	2024	2023	2025	2024	2023
HealthChoice Aggregate	84.6%	84.6%	83.4%	51.7%	52.0%	53.5%
ABH	83.1%	84.7%	84.6%	52.7%	51.1%	49.1%
CFCHP	87.8%	90.3%	89.1%	49.9%	51.2%	71.3% ↓
JMS	87.1%	82.8%	89.9%	66.8% ▲	66.7%	78.8%
KPMAS	94.0%	93.1%	88.3%	99.3% ▲	86.8%	85.4%
MPC	89.7%	85.8%	90.0%	55.2%	56.5%	52.0%
MSFC	87.3%	87.9%	93.7%	52.3%	50.1%	57.7%
PPMCO	78.4% ▼	83.2%	80.2%	42.9% ▼	48.3%	50.2%
UHC	74.9% ▼	76.3%	65.4% ↑	38.5% ▼	43.5%	37.5%
WPM	90.1% ▲	88.7%	89.8%	54.7%	51.7%	56.5%

All statistical tests are conducted at the 95% confidence level. Statistically significant differences between current-year MCO rate and the HealthChoice aggregate rate are marked next to the 2025 rate as upward-pointing triangle (▲) when the current-year rate is higher or downward-pointing triangle (▼) when it is lower. Statistically significant differences between current-year rate and prior year rates are marked next to the prior year rates as upward arrow (↑) when the current-year rate is higher or downward arrow (↓) when it is lower.

EXHIBIT 4: SUMMARY RATES OF COMPOSITES – PREAUTHORIZATION AND CUSTOMER SERVICE/PROVIDER RELATIONS

	COMPOSITES					
	Preauthorization			Customer Service Provider Relations		
	2025	2024	2023	2025	2024	2023
HealthChoice Aggregate	43.9%	44.7%	41.5%	50.1%	52.5%	50.2%
ABH	35.8%	45.3%	40.0%	48.6%	54.9%	49.6%
CFCHP	49.4%	40.8%	61.0%	48.7%	54.1%	59.7%
JMS	69.6% ▲	71.2%	82.2%	64.3% ▲	67.3%	81.4%
KPMAS	93.7% ▲	83.9%	86.7%	90.1% ▲	77.4%	82.5%
MPC	42.6%	48.3%	40.9%	55.5%	56.9%	52.0%
MSFC	47.8%	51.0%	47.2%	53.7%	55.8%	58.2%
PPMCO	40.1%	35.1%	27.9%	42.1%	46.0%	47.0%
UHC	28.3% ▼	34.4%	24.0%	39.0% ▼	42.1%	31.6%
WPM	40.2%	41.7%	41.0%	51.0%	53.7%	52.5%

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EXHIBIT 5: SUMMARY RATE OF QUESTIONS CONTRIBUTING TO OVERALL SATISFACTION COMPOSITE

	OVERALL SATISFACTION								
	OVERALL SATISFACTION			Recommend MCO to Patients			Recommend MCO to other Physicians		
	2025	2024	2023	2025	2024	2023	2025	2024	2023
HealthChoice Aggregate	77.7%	76.4%	77.6%	88.1%	88.4%	86.2%	88.0%	89.0%	86.5%
ABH	75.3%	76.7%	78.9%	87.9%	86.3%	87.5%	86.0%	91.2%	87.4%
CFCHP	79.1%	85.1%	83.6%	92.7%	93.0%	91.2%	91.6%	92.9%	92.6%
JMS	86.6%	80.0%	87.9%	89.6%	84.4%	90.9%	85.3%	84.1%	90.9%
KPMAS	93.3% ▲	93.8%	85.0%	95.5%	93.8%	95.0%	93.2%	91.7%	85.0%
MPC	82.1%	80.1%	83.5%	93.2% ▲	88.1%	93.3%	93.8% ▲	89.3%	93.3%
MSFC	81.9%	77.9%	92.8% ↓	90.5%	93.6%	92.8%	89.5%	92.3%	95.5%
PPMCO	70.6% ▼	69.6%	70.0%	81.9% ▼	90.3% ↓	85.0%	82.8%	89.7%	85.6%
UHC	66.8% ▼	65.7%	60.8%	78.5% ▼	81.7%	67.5% ↑	79.3% ▼	81.6%	67.9% ↑
WPM	82.8%	82.1%	83.2%	93.3% ▲	91.0%	93.1%	94.2% ▲	93.0%	93.1%

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EXHIBIT 6: SUMMARY RATES OF QUESTIONS CONTRIBUTING TO **CLAIMS** COMPOSITE

	CLAIMS								
	Accuracy of claims processing			Timeliness of initial claims processing			Timeliness of adjustment/appeal claims processing		
	2025	2024	2023	2025	2024	2023	2025	2024	2023
HealthChoice Aggregate	55.1%	54.6%	56.7%	55.1%	54.5%	57.1%	45.0%	46.9%	46.6%
ABH	60.2%	52.4%	51.6%	54.8%	56.6%	52.7%	43.2%	44.3%	43.2%
CFCHP	53.5%	51.8%	74.6% ↓	55.2%	52.9%	74.2% ↓	41.2%	48.8%	65.1% ↓
JMS	68.1% ▲	69.8%	75.8%	70.8% ▲	65.1%	81.8%	61.5% ▲	65.1%	78.8%
KPMAS	97.8% ▲	86.7%	89.5%	100.0% ▲	91.1%	88.9%	100.0% ▲	82.6%	77.8%
MPC	59.9%	58.4%	55.3%	57.8%	60.1%	59.1%	48.0%	50.9%	41.7%
MSFC	53.8%	53.1%	61.2%	55.9%	52.6%	59.7%	47.3%	44.4%	52.3%
PPMCO	44.3% ▼	52.8%	55.7%	47.0%	49.4%	53.6%	37.5%	42.6%	41.4%
UHC	44.8% ▼	46.2%	40.8%	42.4% ▼	47.2%	39.2%	28.3% ▼	37.0%	32.4%
WPM	56.4%	55.0%	59.5%	57.5%	52.3%	61.0%	50.2%	47.7%	49.0%

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EXHIBIT 7: SUMMARY RATES OF QUESTIONS CONTRIBUTING TO PREAUTHORIZATION COMPOSITE

	PREAUTHORIZATION								
	Timeliness of obtaining authorization for medication			Overall experience in obtaining prior authorization for medications			Timeliness of obtaining authorization of outpatient services		
	2025	2024	2023	2025	2024	2023	2025	2024	2023
HealthChoice Aggregate	41.9%	43.9%	40.5%	40.3%	41.4%	38.6%	43.0%	43.6%	39.1%
ABH	36.0%	45.9%	37.8%	29.9%	48.8% ↓	40.0%	35.8%	46.4%	35.9%
CFCHP	45.9%	44.6%	51.9%	52.1%	40.8%	55.6%	47.6%	39.4%	52.2%
JMS	65.0% ▲	65.9%	83.9%	67.8% ▲	59.1%	80.6%	68.4% ▲	69.0%	83.3%
KPMAS	95.5% ▲	86.7%	85.0%	90.7% ▲	77.8%	84.2%	95.6% ▲	85.1%	90.0%
MPC	39.1%	46.2%	42.4%	39.5%	44.1%	41.0%	42.2%	44.9%	32.6%
MSFC	46.3%	50.0%	47.6%	42.5%	48.8%	50.0%	47.1%	50.6%	49.1%
PPMCO	37.6%	32.7%	32.1%	38.1%	29.1%	29.2%	37.5%	36.0%	29.5%
UHC	29.6% ▼	34.3%	25.0%	27.1% ▼	31.0%	20.7%	25.3% ▼	32.2%	23.1%
WPM	39.5%	42.2%	40.3%	35.8%	41.4%	34.7%	41.9%	39.5%	40.0%

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EXHIBIT 8: SUMMARY RATES OF QUESTIONS CONTRIBUTING TO PREAUTHORIZATION COMPOSITE

	PREAUTHORIZATION								
	Overall experience in obtaining prior authorization of outpatient services			Timeliness of obtaining authorization of inpatient services			Overall experience in obtaining prior authorization of inpatient services		
	2025	2024	2023	2025	2024	2023	2025	2024	2023
HealthChoice Aggregate	41.8%	43.1%	38.8%	48.1%	48.2%	45.7%	48.1%	48.1%	45.9%
ABH	33.8%	42.9%	38.8%	37.8%	44.4%	44.2%	41.3%	43.4%	43.2%
CFCHP	50.7%	38.0%	53.3%	52.2%	41.8%	73.5%	47.7%	40.4%	79.4% ↓
JMS	66.1% ▲	70.7%	80.0%	74.0% ▲	80.0%	82.8%	76.6% ▲	82.4%	82.8%
KPMAS	91.1% ▲	83.0%	85.0%	94.6% ▲	85.3%	88.2%	94.6% ▲	85.3%	87.5%
MPC	41.1%	45.7%	35.1%	48.4%	53.0%	47.2%	45.2%	55.8%	47.1%
MSFC	44.6%	46.8%	49.1%	52.3%	55.0%	42.5%	54.3%	55.0%	44.7%
PPMCO	38.1%	34.0%	26.7%	44.2%	40.4%	25.0% ↑	45.0%	38.5%	25.0% ↑
UHC	24.6% ▼	34.3% ↓	21.7%	32.2% ▼	38.0%	28.2%	31.0% ▼	36.8%	25.0%
WPM	39.3%	39.4%	39.7%	41.2%	43.4%	45.2%	43.6%	44.1%	46.0%

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EXHIBIT 9: SUMMARY RATES OF QUESTIONS THAT CONTRIBUTE TO CUSTOMER SERVICE/PROVIDER RELATIONS COMPOSITE

	CUSTOMER SERVICE/PROVIDER RELATIONS								
	Process for obtaining member eligibility information			Quality of written communications, policy bulletins, and manuals			Ease of contacting the correct customer service representative		
	2025	2024	2023	2025	2024	2023	2025	2024	2023
HealthChoice Aggregate	61.7%	63.2%	62.4%	53.5%	56.4%	55.0%	46.8%	48.9%	47.5%
ABH	63.8%	65.4%	62.9%	53.7%	60.6%	55.8%	42.6%	53.9%	45.9%
CFCHP	57.3%	60.0%	63.2%	53.9%	54.5%	65.6%	44.3%	47.3%	61.5% ↓
JMS	70.0%	69.6%	84.8%	63.8%	64.4%	84.8% ↓	61.4% ▲	66.7%	84.8% ↓
KPMAS	93.3% ▲	85.1%	85.0%	97.7% ▲	85.1%	95.0%	81.8% ▲	68.1%	75.0%
MPC	64.3%	65.7%	62.8%	59.3%	59.6%	51.7%	50.6%	56.7%	49.2%
MSFC	60.2%	60.4%	65.7%	57.3%	60.0%	56.3%	57.7% ▲	52.0%	60.0%
PPMCO	57.3%	59.4%	56.8%	42.8% ▼	48.9%	54.3%	38.3% ▼	42.5%	43.9%
UHC	53.5% ▼	60.3%	50.6%	45.4% ▼	49.8%	35.8%	34.5% ▼	36.0%	28.0%
WPM	64.1%	62.7%	68.3%	51.5%	56.7%	60.4%	49.6%	51.5%	47.0%

All statistical tests are conducted at the 95% confidence level. Statistically significant differences between current-year MCO rate and the HealthChoice aggregate rate are marked next to the 2025 rate as upward-pointing triangle (▲) when the current-year rate is higher or downward-pointing triangle (▼) when it is lower. Statistically significant differences between current-year rate and prior year rates are marked next to the prior year rates as upward arrow (↑) when the current-year rate is higher or downward arrow (↓) when it is lower.

EXHIBIT 10: SUMMARY RATES OF QUESTIONS THAT CONTRIBUTE TO CUSTOMER SERVICE/PROVIDER RELATIONS COMPOSITE

	CUSTOMER SERVICE/PROVIDER RELATIONS								
	Timeliness and courtesy of the MCO's customer service and provider relations representative			Accuracy of responses and/or ability to resolve problems			Accuracy and accessibility of the drug formulary and formulary updates		
	2025	2024	2023	2025	2024	2023	2025	2024	2023
HealthChoice Aggregate	50.5%	53.3%	50.5%	46.7%	49.3%	47.8%	45.2%	47.9%	46.2%
ABH	46.8%	55.8%	50.5%	47.4%	55.2%	42.3%	43.5%	47.0%	46.7%
CFCHP	47.1%	58.0%	55.4%	44.7%	54.0%	63.6% ↓	43.7%	50.6%	51.6%
JMS	71.4% ▲	66.7%	81.8%	60.6% ▲	66.0%	78.8%	61.5% ▲	63.8%	84.8% ↓
KPMAS	90.9% ▲	87.2%	90.0%	84.1% ▲	76.6%	80.0%	90.9% ▲	68.1% ↑	80.0%
MPC	57.1%	57.7%	51.2%	53.3%	51.5%	49.2%	50.3%	52.1%	48.2%
MSFC	57.4%	54.1%	58.6%	49.5%	54.6%	56.3%	51.0%	52.5%	57.1%
PPMCO	38.9% ▼	46.9%	48.7%	36.1% ▼	40.2%	45.1%	37.8%	40.2%	44.1%
UHC	37.2% ▼	40.6%	30.6%	35.8% ▼	36.6%	28.4%	33.6% ▼	39.9%	28.5%
WPM	53.0%	55.7%	54.2%	48.5%	52.0%	50.9%	43.8%	48.5%	44.4%

All statistical tests are conducted at the 95% confidence level. Statistically significant differences between current-year MCO rate and the HealthChoice aggregate rate are marked next to the 2025 rate as upward-pointing triangle (▲) when the current-year rate is higher or downward-pointing triangle (▼) when it is lower. Statistically significant differences between current-year rate and prior year rates are marked next to the prior year rates as upward arrow (↑) when the current-year rate is higher or downward arrow (↓) when it is lower.

EXHIBIT 11: SUMMARY RATES OF QUESTIONS THAT CONTRIBUTE TO CUSTOMER SERVICE/PROVIDER RELATIONS COMPOSITE

	CUSTOMER SERVICE/PROVIDER RELATIONS					
	Overall, how would you rate Customer Service Provider Relations?			How would you rate the number and quality of specialists in the Specified MCO network?		
	2025	2024	2023	2025	2024	2023
HealthChoice Aggregate	53.2%	53.4%	49.2%	43.5%	47.2%	43.2%
ABH	52.1%	60.8%	51.0%	38.6%	40.4%	41.3%
CFCHP	52.9%	57.3%	63.1%	45.5%	51.2%	53.2%
JMS	71.4% ▲	75.6%	78.8%	53.8%	65.9%	72.7%
KPMAS	93.2% ▲	80.4%	75.0%	88.9% ▲	68.8% ↑	80.0%
MPC	60.4%	60.2%	53.3%	48.9%	51.8%	50.0%
MSFC	56.4%	59.6%	59.7%	39.8%	53.1%	51.4%
PPMCO	44.0% ▼	44.1%	43.9%	41.3%	45.3%	39.3%
UHC	38.6% ▼	37.7%	27.6% ↑	33.2% ▼	35.7%	23.3% ↑
WPM	55.2%	54.7%	50.9%	42.1%	47.4%	44.1%

All statistical tests are conducted at the 95% confidence level. Statistically significant differences between current-year MCO rate and the HealthChoice aggregate rate are marked next to the 2025 rate as upward-pointing triangle (▲) when the current-year rate is higher or downward-pointing triangle (▼) when it is lower. Statistically significant differences between current-year rate and prior year rates are marked next to the prior year rates as upward arrow (↑) when the current-year rate is higher or downward arrow (↓) when it is lower.

EXHIBIT 12: SUMMARY RATES OF OTHER ITEMS

	OTHER ITEMS					
	Coordination of Case Management			No-Show Specified MCO HealthChoice Appointments		
	2025	2024	2023	2025	2024	2023
HealthChoice Aggregate	48.2%	46.0%	44.8%	84.3%	81.9%	82.0%
ABH	49.2%	47.9%	37.8%	86.4%	89.2%	90.3%
CFCHP	51.6%	42.6%	62.7%	89.9%	88.9%	87.7%
JMS	72.5% ▲	75.0%	81.3%	52.2% ▼	46.5%	27.3% ↑
KPMAS	86.7% ▲	73.9%	70.0%	100.0% ▲	95.7%	95.0%
MPC	49.0%	52.4%	40.6%	86.4%	80.2%	85.2%
MSFC	51.3%	43.6%	57.4%	85.1%	72.8% ↑	79.7%
PPMCO	41.5%	38.5%	36.0%	82.1%	77.8%	81.9%
UHC	32.1% ▼	35.5%	34.5%	86.5%	87.2%	85.0%
WPM	47.3%	44.4%	41.9%	85.9%	83.1%	80.5%

All statistical tests are conducted at the 95% confidence level. Statistically significant differences between current-year MCO rate and the HealthChoice aggregate rate are marked next to the 2025 rate as upward-pointing triangle (▲) when the current-year rate is higher or downward-pointing triangle (▼) when it is lower. Statistically significant differences between current-year rate and prior year rates are marked next to the prior year rates as upward arrow (↑) when the current-year rate is higher or downward arrow (↓) when it is lower.

Loyalty Analysis

PCP loyalty analysis is performed by examining responses to the following questions:

- Q22. What is your overall satisfaction with *Specified MCO*?
- Q23. Would you recommend *Specified MCO* to patients?
- Q24. Would you recommend *Specified MCO* to other providers?

All PCPs used in this analysis provided a valid response to all three questions.

- A PCP is considered **loyal** if they are very satisfied with the specified HealthChoice MCO and would definitely or probably recommend the specified MCO to patients and other providers.
- A PCP is considered **not loyal** if they are very dissatisfied with the specified HealthChoice MCO and would definitely not or probably not recommend the specified MCO to patients and other providers.
- All other response combinations are categorized as **indifferent**.

Scores are calculated as the proportion of respondents selecting the response option combinations described above.

EXHIBIT 13: LOYALTY ANALYSIS RESULTS

	Loyal			Indifferent			Not Loyal		
	2025	2024	2023	2025	2024	2023	2025	2024	2023
HealthChoice Aggregate	37.9%	37.0%	36.1%	60.0%	60.5%	61.6%	2.1%	2.5%	2.3%
ABH	41.8%	43.6%	29.5%	54.9%	54.5%	68.4%	3.3%	2.0%	2.1%
CFCHP	42.0%	32.9%	41.8%	56.8%	67.1%	56.7%	1.2%	0.0%	1.5%
JMS	54.5%	61.4%	78.8% ▼	45.5%	36.4%	21.2% ▲	0.0%	2.3%	0.0%
KPMAS	79.5%	62.5%	60.0%	20.5%	37.5%	40.0%	0.0%	0.0%	0.0%
MPC	40.0%	41.0%	38.7%	59.4%	55.4%	59.7%	0.6%	3.6%	1.7%
MSFC	41.5%	31.9%	52.3%	57.4%	64.8%	47.7%	1.1%	3.3%	0.0%
PPMCO	32.5%	33.1%	34.2%	64.9%	64.5%	62.4%	2.6%	2.3%	3.4%
UHC	21.1%	24.3%	19.3%	72.8%	71.7%	74.5%	6.1%	4.0%	6.2%
WMP	38.5%	40.4%	35.7%	61.1%	58.1%	64.3%	0.5%	1.5%	0.0%

All statistical tests are conducted at the 95% confidence level.
Statistically significant differences between current-year rate and prior-year rates are marked next to the prior-year rates as upward pointing triangle (▲) when the current-year rate is higher or downward pointing triangle (▼) when it is lower.

Correlation Analysis

Correlation analysis is a tool for identifying program attributes that are strengths and attributes in need of improvement. The attribute importance (correlation) and attribute performance (score) are plotted in a graph, which is divided into four quadrants, to identify the attributes that are strengths and attributes that are in need of improvement. The four quadrants are:

- LEVERAGE (high importance, high performance)
- MAINTAIN (low importance, high performance)
- MONITOR (low importance, low performance)
- IMPROVE (high importance, low performance)

Correlation analysis was performed between overall satisfaction with the specified MCO question and the program attributes.

Data Analysis and Conclusions

Analysis revealed there were five attributes in the IMPROVE quadrant and four attributes were identified in the LEVERAGE quadrant for overall satisfaction with specified MCOs at the aggregate level.

ATTRIBUTES IN THE IMPROVE AND LEVERAGE QUADRANT FOR OVERALL SATISFACTION WITH SPECIFIED MCOS

IMPROVE	LEVERAGE
• Ease of contacting the correct customer service representative • Accuracy of responses and/or ability to resolve problems • Overall experience in obtaining prior authorization of outpatient services • Timeliness of obtaining authorization of inpatient services • Overall experience in obtaining prior authorization of inpatient services	• Accuracy of claims processing • Ease of contacting the correct customer service representative • Overall rating of customer service and provider relations • Coordination of Care/Case Management

Glossary of Terms

Term	Description
Attributes	Areas of MCO performance and PCP experience assessed with the PCP Satisfaction Survey.
Confidence Level	A confidence level is associated with tests of statistical significance of observed differences in survey scores. It is expressed as a percentage and represents how often the observed difference (e.g., between the plan's current-year rate and the relevant benchmark rate) is real and not simply due to chance. A 95% confidence level associated with a statistical test means that if repeated samples were surveyed, in 95 out of 100 samples the observed measure score would be truly different from the comparison score.
Correlation	A degree of association between two variables or attributes, typically measured by the *Pearson correlation coefficient*. The coefficient value of 1 indicates a strong positive relationship; -1 indicates a strong negative relationship; zero indicates no relationship at all.
Denominator (*N*, or Usable Responses)	Number of valid (appropriately answered) responses available to calculate a measure result. Examples of inappropriately answered questions include ambiguously marked answers, multiple marks when a single answer choice is expected, and responses that violate survey skip patterns. The denominator for an individual question is the total number of valid responses to that question. The denominator for a composite is the average number of responses across all questions in the composite.
Disposition	The final status given to a PCP record in the survey sample at the end of the study (e.g., completed survey, refusal, non-response, etc.). See *Response Rate*.
Quadrant Map	Scatter plot graph of attribute importance and performance that is divided into four rectangular areas or quadrants. The four quadrants are defined as follows: 1. LEVERAGE (high importance, high performance); 2. MAINTAIN (low importance, high performance); 3. MONITOR (low importance, low performance); 4. IMPROVE (high importance, low performance).
Question Summary Rate	Question Summary Rates (QSRs) express the proportion of respondents selecting the response option(s) of interest (typically representing the most favorable outcome(s) from a given question on the survey). Many survey items use an *Excellent, Very good, Good, Fair or Poor* response scale, with *Excellent* being the most favorable outcome. Results are typically reported as the proportion of PCPs selecting *Excellent* or *Very good*.

Response Rate	Survey response rate is calculated using the following formula: **Response Rate = [Complete and Eligible Surveys]/[Complete and Eligible + Incomplete (but Eligible) + Refusal + Nonresponse after maximum attempts]**
Sample size	Number of PCPs selected for the survey.
Statistically Significant Difference	When survey results are calculated based on sample data and compared to a benchmark score (e.g., the NCQA National Average rate, the CSS Book-of-Business average, or the plan's prior-year rate), the question is whether the observed difference is real or due to chance. A difference is said to be statistically significant at a given confidence level (e.g., 95%) if it has a 95% chance of being true.