



Agenda Item 10

March 18, 2014

ITEM NAME: Member Satisfaction with Health Plans

PROGRAM: Health Benefits

ITEM TYPE: Information

EXECUTIVE SUMMARY

This agenda item reports the results of the 2013 Health Plan Member Survey. The agenda item summarizes the methodology and notable findings from the Member Survey.

STRATEGIC PLAN

This directly relates to Goal A of the Strategic Plan: "Improve long-term pension and health benefits sustainably." This Goal includes the Strategic Initiative, "Expand member and employer access to information regarding the cost and quality of health care and ways to impact those trends."

BACKGROUND

The California Public Employees' Retirement System (CalPERS) annually conducts the Health Plan Member Survey to assess members' satisfaction with their health plan during the previous 12 month period. The survey uses a modified version of the Consumer Assessment of Healthcare Providers and Systems (CAHPS) Survey, a standard tool for measuring health plans. To be eligible to complete the survey, members had to be:

- Age 18 or over (as of December 31, 2012)
- Continuously enrolled from January 1 to December 31, 2012 (allowing for one 45-day gap)
- Enrolled at the time of the survey (March 18 – May 10, 2013)

For the 2013 Health Plan Member Survey, our contracted vendor, DSS Research, randomly selected 1,100 members from each Basic and Medicare plan having at least 2,000 members. In total, 17,600 members across 16 health plans received a survey. Members could respond to the survey via the Internet or by mail. In 2013, about 16 percent of the responses were via the Internet. As in past years, the response rate for Medicare plans was higher than for Basic plans – 65 percent compared with 33 percent, respectively. In total, CalPERS received 8,262 completed surveys, for an overall response rate of 47 percent.

ANALYSIS

The 2013 Health Plan Member Survey included 57 questions in areas including: Overall Rating of Health Plan; Personal Doctors and Specialists; Access to Routine or Specialist Care; Access to Urgent and Emergency Care; Pharmacy Services; and, Customer Service. Attachment 1 contains graphs of the overall ratings of Basic and Medicare health plans in 2013. (Results for Association plans are not included due to restricted membership.) Notable findings include:

- Overall member ratings of health plans were higher for Medicare plans than for the corresponding Basic plans.
- Kaiser received the highest overall member rating among Basic plans, and PERS Select received the lowest rating.
- Kaiser also topped overall member ratings for Medicare plans, while Blue Shield of California (BSC) 65+ was rated the lowest.
- On average, Medicare members rated both their Personal Doctor and their Specialist higher than Basic members.
- An average of 88 percent of Medicare members felt it was “usually” or “always” easy to get appointments with specialists, while 80 percent of Basic members felt that way.
- When it came to getting prescriptions easily, there was room for improvement. Only about 66 percent of Medicare members and 61 percent of Basic members reported it was “always” easy to get prescriptions.
- In the area of customer service, BSC NetValue was the highest rated Basic plan, while PERS Select was the lowest.
- For Medicare plans, Kaiser received the highest customer service ratings, and PERS Care received the lowest.

Development of the 2014 Health Plan Member Survey is currently underway. This year, staff in CalPERS Center for Innovation are reviewing and revising the questions to align with key issues impacting the CalPERS population and to be consistent with the CAHPS Survey. This will allow CalPERS to compare our results to the large pool of CAHPS users found in their national database. The survey is scheduled to be disseminated by our contracted vendor, DSS Research, in the first week of April 2014.

BUDGET AND FISCAL IMPACTS

Not Applicable

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ATTACHMENTS

Attachment 1 – 2013 Health Plan Member Survey Findings

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