# Prime Enrollees Consumer Watch Pacific\*Quarter 1 FY 2018

**DEFENSE HEALTH COST ASSESSMENT & PROGRAM EVALUATION** 

Pacific: Sample size-4,501 Response rate-9.1%

Source: Health Care Survey of DoD Beneficiaries

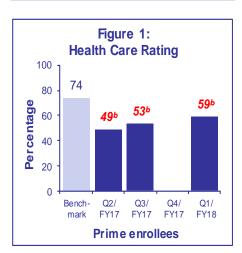
#### **Inside Consumer Watch**

TRICARE Consumer Watch shows what TRICARE Prime enrollees in your region say about their healthcare in the Health Care Survey of DoD Beneficiaries (HCSDB). Every quarter, a representative sample of TRICARE beneficiaries are asked about their care in the last 12 months and the results are adjusted for age and health status and reported in this publication. The survey for quarter four of FY2017 was canceled.

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 2017, are used in calculating benchmarks.

- <sup>a</sup> Significantly exceeds benchmark (p< .05).
- b Significantly falls short of benchmark (p<.05).</li>

See appendix for table data.

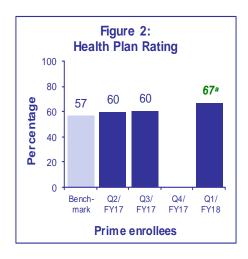


#### **Health Care**

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 in the survey fielded in the first quarter of fiscal year 2018, describing the period October 2016 to September 2017, and each of the 3 previous quarters. 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**

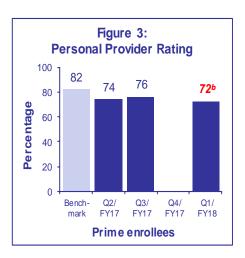
Prime enrollees were asked to rate their health plan from 0 to 10, where 0 is worst and 10 is best. Figure 2 shows the percentage who rated their plan 8 or above for each reporting period.

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

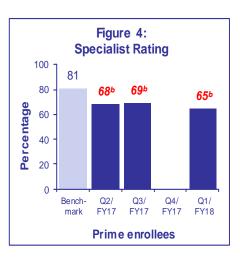


reporting period. Personal doctor ratings depend on how the patient gets along with the one doctor responsible for their basic care.

## **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.



# **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.

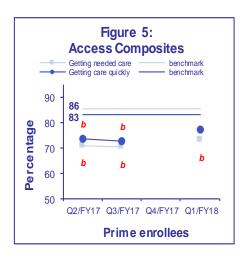
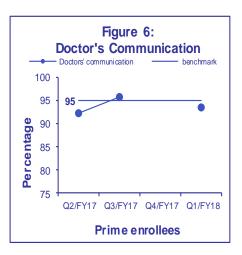


Figure 6 (Doctor's Communication) includes the composite for "How well doctors communicate." Scores in "How well doctors communicate" are based on whether the personal doctor spends enough time with patients, treats them respectfully and answers their questions.

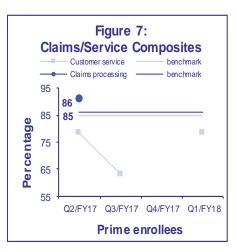
Figure 7 (Claims/Service Composites) includes composite scores for "Customer service" and "Claims processing." Scores in the "Customer service" composite concern patients' ability to get courteous service and information about their health plan. "Claims processing" scores are based on both the timeliness and correctness of plan's claims handling.



#### **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	Qtr 2 FY 2017	Qtr 3 FY 2017	Qtr 4 FY 2017	Qtr 1 FY 2018	Healthy People 2020 Goal
Mammography (women > 40)	87	-	-	-	81
Pap Smear (women ≥ 18)	85	85 <sup>b</sup>	-	<b>82</b> <sup>b</sup> (76)	93
Hypertension Screen (adults)	85 <sup>b</sup>	82 <sup>b</sup>	-	<b>87</b> <sup>b</sup> (318)	95
Prenatal Care (in 1st trimester)	-	-	-	-	78
Percent Not Obese (adults)	86²	80ª	-	<b>84</b> <sup>a</sup> (289)	69
Non-Smokers (adults)	92ª	90	-	85 (304)	88
Counseled to Quit (adults)	82	83	-	90 (54)	-

<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** 

Qtr/Yr/Benchmark	Prime enrollee
Benchmark	74
Q2/FY17	<b>49</b> <sup>b</sup>
Q3/FY17	<b>53</b> <sup>b</sup>
Q4/FY17	-
Q1/FY18	59 b

Figure 2: Health Plan Rating

Qtr/Yr/Benchmark	Prime enrollee
Benchmark	57
Q2/FY17	60
Q3/FY17	60
Q4/FY17	-
Q1/FY18	67 <sup>a</sup>

**Figure 3: Personal Provider Rating** 

Qtr/Yr/Benchmark	Prime enrollee
Benchmark	82
Q2/FY17	74
Q3/FY17	76
Q4/FY17	-
Q1/FY18	<b>72</b> <sup>b</sup>

Figure 4: Specialist Rating

Qtr/Yr/Benchmark	Prime enrollee
Benchmark	81
Q2/FY17	68 <sup>b</sup>
Q3/FY17	<b>69</b> <sup>b</sup>
Q4/FY17	-
Q1/FY18	65 <sup>b</sup>

**Figure 5: Access Composites** 

Qtr/Yr	Getting Needed Care	Benchmark For Getting Needed Care	Getting Care Quickly	Benchmark For Getting Care Quickly
Q2/FY17	71 <sup>b</sup>	86	<b>74</b> <sup>b</sup>	83
Q3/FY17	70 <sup>b</sup>	86	73 <sup>b</sup>	83
Q4/FY17	-	86	-	83
Q1/FY18	<b>73</b> <sup>b</sup>	86	77	83

**Figure 6: Doctor's Communication** 

Qtr/Yr	Doctor's Communication	Benchmark
Q2/FY17	92	95
Q3/FY17	96	95
Q4/FY17	-	95
Q1/FY18	94	95

**Figure 7: Claims/Service Composites** 

Qtr/Yr	Customer Service	Benchmark For Customer Service	Claims Processing	Benchmark For Claims Processing
Q2/FY17	79	85	91	86
Q3/FY17	63	85	-	86
Q4/FY17	-	85	-	86
Q1/FY18	78	85	-	86

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