OUTCOMES RESEARCH IN REVIEW

Patient Quality Ratings of Health Plans


Study Overview

Objective. To identify relationships among items in Consumer Assessment of Health Plans Survey (CAHPS) reports that predict members’ perceptions of quality in their health plans.

Design. A comparison of findings gleaned from data from mailed patient surveys.

Setting and participants. 89,419 Medicare beneficiaries enrolled in 212 Medicare managed care (MMC) health plans who responded to CAHPS in 1998.

Main outcome measures. Survey items measuring member experiences and satisfaction. The CAHPS-MMC Survey included all items of the CAHPS Adult Core Instrument [1] and 28 additional MMC-specific items [2]. Of 85 items, 4 elicited overall ratings of the plan, personal doctor, care received overall, and care received from specialists, 34 elicited information on respondent experiences, and the remainder dealt with demographic characteristics, health status, and health care utilization.

Main results. Four domains explained 75% of the variance in the reports: (1) interactions around delivery of care in the doctor’s office; (2) the plan’s customer service; (3) access to medical services provided by the plan (eg, specialist care, equipment, therapy, or drugs); and (4) advice on health-promoting activities. Factors associated with the domain “delivery of care” were strongly predictive of patients’ overall ratings of care, doctor, and specialist. Customer service factors were strongly predictive of overall ratings of the plan.

Conclusion

Four domains of CAHPS measures predict patients’ perceptions of quality of care and can be used to distinguish among differing levels of quality across health plans. Understanding these relationships permits observers to better determine which factors contribute to patients’ satisfaction with their health plans.

Commentary

Over the past decade, purchasers of health care have paid more attention to consumer reports of patients’ satisfaction with care and its quality. The CAHPS currently is used by many purchasers of health care, including the Health Care Financing Administration (HCFA), major employers, and purchasing groups, and it recently became a component of the accreditation process administered by the National Committee for Quality Assurance (NCQA) [3]. This study by Zaslavsky and colleagues contributes to our understanding of the factors that drive patients’ satisfaction with health plans, namely, effective care delivery in the physician’s office, the plan’s customer service, access to desired medical services, and advice on health promotion.

Applications for Clinical Practice

Health care providers should carefully note the factors associated with patient satisfaction since they significantly impact patients’ ratings of health plans. Overall, these factors are what one would expect to be driving patient satisfaction. How positive was the experience at the physician’s office? How positive was the plan’s customer service? How good was access to desired services? How much did the plan provide to assist in health promotion? Meeting these relatively simple needs should result in positive consumer reports for health plans.

References


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