



MHQP 2019 Patient Experience Survey Report

Pediatric Care

*Detailed Medical Group Report
prepared for*

Northeast PHO, Inc.

October 2019

MHQP 2019 Patient Experience Survey Report

Table of Contents

About Your Report	1
Table of Publicly Reported Survey Questions	3
Patients' Experiences with Your Medical Group: Summary Results	
Comparison to Statewide Mean	5
Question Response Frequencies for Your Patient Survey Sample	7
Patients' Experiences with Your Medical Group: Comparative Results	
Practices Comparison to Medical Group	27
Composite Score Trend	36
Listing of Sampled Providers	37
Appendices	
Massachusetts Statewide and Regional Performance	A1
Performance on PCMH Measures	B1
Selected Tools and References for Quality Improvement	C1
Questions and Answers	D1
Technical Appendix	E1
Acknowledgements	F1
About MHQP	G1

About Your Report

The 2019 MHQP Patient Experience Survey Report (PES Report) summarizes results for your provider organization from the 2019 statewide survey of adult and pediatric primary care patients. The 2019 MHQP Patient Experience Survey is based on the CG-CAHPS 3.0 survey developed by the National Committee for Quality Assurance (NCQA) and the Agency for Healthcare Research and Quality (AHRQ), and also includes Patient-Centered Medical Home (PCMH) survey items. The 2019 adult and child Patient Experience Surveys (PES) had 39 items and 54 items, respectively.

The survey was fielded in the spring of 2019 and sampled patients from 771 adult and 315 pediatric primary care practices statewide, representing over 4,000 primary care providers (PCPs). Results for adult and pediatric primary care are reported separately.

Answers to the survey questions were combined to create summary measures of patients' experiences:

Quality of Doctor-Patient Interactions

- Communication
- Integration of Care
- Knowledge of the Patient
- Adult Behavioral Health (Adult reports only)
- Pediatric Preventative Care (Pediatric reports only)
- Pediatric Growth and Development (Pediatric reports only)

Organizational Features of Care

- Organizational Access
- Self-Management Support
- Office Staff

Your report also includes the results from the global rating item "Willingness to Recommend to Family and Friends."

Sample sizes were estimated according to the number of providers at a practice in order to obtain reliable information at the practice site level.

MHQP will release a public report of the 2019 Statewide Patient Experience Survey results **at the practice level only** in the winter of 2020 on MHQP's website for healthcare consumers, www.healthcarecompassma.org. Only practices with three or more providers will be included in MHQP's public reporting. **No provider or medical group level results will be reported on MHQP's consumer website, Healthcare Compass.**

About Your Report

Your organization's report contains these results:

- **Comparison to Statewide Mean** – This chart graphs patients' experiences within your organization across the summary measures as compared with the state mean.
- **Detailed Question-Level Results** – This section provides detailed results for each question and a question level percentile ranking icon to help your practice make question-by-question decisions about quality improvement. Please note that we have added the top box score (i.e., the percentage of patients whose responses reflect the highest possible category/rating for a given question) and the statewide top box score for comparison purposes. This section also summarizes the demographic and health characteristics reported by respondents from your practice. Please note that we have included results for self-reported chronic conditions back into this section.
- **Medical Group Comparison Charts** – This chart compares the performance of each medical group in your network against your network score for each of the summary measures
- **Practice Site Comparison Charts (in Medical Group reports only)** – If your medical group has at least two practice sites included in the MHQP survey, your report contains a chart comparing the performance of each practice site in your medical group against your group score for each of the summary measures.
- **Trending Data** – This chart displays trending data from 2018 to 2019, reflecting the number of respondents and Composite Scores. The significant difference identifies statistically significant increase or decrease to prior year results.
- **Providers from Your Organization Included in the Survey Report** – This section indicates the names of all providers (PCPs) from your organization whose patients were surveyed as part of the 2019 survey. Information regarding PCPs at each practice site was obtained directly from the practice site or medical group through MHQP's Massachusetts Provider Database (MPD). All provider rosters used for this survey were updated as of December 31, 2018.

Appendices

Your report also contains supplemental material, available in the appendices. The appendices contain the following sections:

- **Selected Tools and References for Quality Improvement** – This section provides links to tools to help practices implement quality improvement efforts and a list of relevant literature.
- **Statewide and Regional Scores** – This section provides regional average scores and the statewide 10th, 25th, 50th, 75th, 80th, 90th and 99th percentile ranking scores for each reported composite.
- **Patient-Centered Medical Home Measurement Chart** – This chart represents Patient-Centered Medical Home (PCMH) composite and item level measures as defined by NCQA. MHQP's standard Communication and Access composites differ slightly from the CAHPS® PCMH composites for the same areas. When CAHPS® PCMH composites are different from MHQP composites, we have also provided PCMH composite results within this section.
- **Questions and Answers** – This section contains a list of commonly asked questions about the MHQP Patient Experience Survey and the corresponding answers.
- **Technical Appendix** – This section contains a description of MHQP's sampling process and benchmark methodology.
- **About MHQP** – This section contains information about MHQP and its role in Massachusetts' quality reporting.

Table of Publicly Reported Survey Questions - Pediatric Care

Quality of Provider-Patient Interaction

<i>Summary Measure</i>	<i>Survey Questions</i>
<i>Communication (4 questions)</i>	<p>In the last 12 months, how often did this provider explain things about your child's health in a way that was easy to understand?</p> <p>In the last 12 months, how often did this provider listen carefully to you?</p> <p>In the last 12 months, how often did this provider show respect for what you had to say?</p> <p>In the last 12 months, how often did this provider spend enough time with your child?</p>
<i>Integration of Care (2 questions)</i>	<p>In the last 12 months, how often did the provider named in Question 1 seem informed and up-to-date about the care your child got from specialists?</p> <p>In the last 12 months, when this provider ordered a blood test, x-ray, or other test for your child, how often did someone from this provider's office follow up to give you these results?</p>
<i>Knowledge of Patient (2 questions)</i>	<p>In the last 12 months, how often did this provider seem to know the important information about your child's medical history?</p> <p>How would you rate this provider's knowledge about your child as a person – special abilities, concerns, fears?</p>
<i>Pediatric Preventive Care (6 questions)</i>	<p>In the last 12 months, did you and anyone in this provider's office talk about things you can do to keep your child from getting injured?</p> <p>In the last 12 months, did anyone in this provider's office give you information about how to keep your child from getting injured?</p> <p>In the last 12 months, did you and anyone in this provider's office talk about how much time your child spends on a computer and in front of a TV?</p> <p>In the last 12 months, did you and anyone in this provider's office talk about how much or what kind of food your child eats?</p> <p>In the last 12 months, did you and anyone in this provider's office talk about how much or what kind of exercise your child gets?</p> <p>In the last 12 months, did you and anyone in this provider's office talk about whether there are any problems in your household that might affect your child?</p>

*Child Development
(5 questions)*

In the last 12 months, did you and anyone in this provider's office talk about your child's learning ability?

In the last 12 months, did you and anyone in this provider's office talk about the kinds of behaviors that are normal for your child at this age?

In the last 12 months, did you and anyone in this provider's office talk about how your child's body is growing?

In the last 12 months, did you and anyone in this provider's office talk about your child's moods and emotions?

In the last 12 months, did you and anyone in this provider's office talk about how your child gets along with others?

Organization/Structural Features of Care

Summary Measure	Survey Questions
<i>Organizational Access (3 questions)</i>	<p>In the last 12 months, when you called this provider's office for an appointment for care your child needed right away, how often did you get an appointment as soon as your child needed?</p> <p>In the last 12 months, when you made an appointment for a check-up or routine care for your child with this provider, how often did you get an appointment as soon as your child needed?</p> <p>In the last 12 months, when you called this provider's office during regular office hours, how often did you get an answer to your medical question that same day?</p>
<i>Self-Management Support (2 questions)</i>	<p>In the last 12 months, did you and anyone in this provider's office talk about specific goals for your child's health?</p> <p>In the last 12 months, did anyone in this provider's office ask you if there are things that make it hard for you to take care of your child's health?</p>
<i>Office Staff (2 questions)</i>	<p>In the last 12 months, how often were the front office staff at this provider's office as helpful as you thought they should be?</p> <p>In the last 12 months, how often did the front office staff at this provider's office treat you with courtesy and respect?</p>

Global Rating

Summary Measure	Survey Questions
<i>Willingness to Recommend (1 question)</i>	<p>Would you recommend this provider to your family and friends?</p>

Comparison to Statewide Mean

The summary chart displays your mean score and a comparison of your mean score to the Statewide Mean for each of the summary measures. The information below is provided to help you interpret the chart. MHQP will release a public report of the 2019 Statewide Patient Experience Survey results **at the practice level only** in the winter of 2020 on MHQP's website for healthcare consumers, www.healthcarecompassma.org. Only practices with three or more providers will be included in MHQP's public reporting. No provider or medical group level results will be reported on MHQP's consumer website, Healthcare Compass.

Sample Size

The number of your patients responding to the survey is indicated in the title of the chart. Sampling design considers how many primary care providers are in each practice and the number of respondents needed to achieve highly reliable results. For private reporting, results are included for practices with at least 16 respondents. This minimum threshold allows practices to receive some information from the survey, even when sample sizes are limited.

Mean Scores Used for Comparison

The *Statewide Mean* represents the statewide average score including all respondents to the 2019 Patient Experience Survey and can be used as a benchmark for comparison to your own score. We also list your adjusted mean score. Your scores have been case-mix adjusted so that patient characteristics match the overall characteristics of patients throughout the state as reflected in the statewide results, creating a fair comparison of performance. Results data are adjusted according to age, gender, education, race, language, health plan, and region.

Statistical Significance

Using symbols to note the mean score for each measure, the chart indicates whether scores are statistically above, equivalent, or lower than the Statewide Mean. The p-value ($p \leq 0.05$) expresses that there is a 95% probability that the score represents "true" performance relative to the Statewide Mean score (indicated by a vertical line).

Confidence Interval

A confidence interval represents the range of scores within which you can be confident that your "true" mean score falls. The confidence interval is represented by the horizontal bar around each measure's reported mean score. For the purposes of this report, there is 95% estimated probability that your "true" mean score falls within the reported confidence intervals (also expressed as $p \leq 0.05$).

Northeast PHO, Inc. - Pediatric Care

Patients' Experiences with Your Medical Group (n = 306)
Compared with the Statewide Mean

Summary Measures	Comparison to State Mean	Group Mean	State Mean
<i>Quality of Provider-Patient Interaction</i>	0 20 40 60 80 100		
Communication		97.8	97.4
Integration of Care		92.5	89.2
Knowledge of Patient		94.0	93.6
Pediatric Preventive Care		75.5	75.8
Child Development		77.2	80.0
<i>Organization/Structural Features of Care</i>	0 20 40 60 80 100		
Organizational Access		94.8	93.4
Self-Management Support		49.8	52.7
Office Staff		91.8	92.6

Comparison Symbol Legend	
<i>Benchmark...</i>	
	Statewide Mean
<i>Your score...</i>	
▲	Statistically significantly above the benchmark ($p \leq 0.05$)
●	Statistically equivalent to the benchmark
▼	Statistically significantly below the benchmark ($p \leq 0.05$)
<i>Confidence Interval...</i>	
—	95% confidence interval around the adjusted mean ($p \leq 0.05$)



Northeast PHO, Inc. - Pediatric Care

Question Response Frequencies for Your Patient Survey Sample



To assist you in interpreting the summary scores shown on the previous graphs, your individual results for each survey question are provided below. These results show the distribution of your patients' responses to each survey question across the continuum of response options available for that question. Each question is shown as part of the measure in which it was scored.

Communication (4 items) Adjusted Mean Score = 97.8



In the last 12 months, how often did this provider explain things about your child's health in a way that was easy to understand?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	0	0%		27	0%
Sometimes	1	0%		91	1%
Usually	13	4%		899	5%
Always	290	95%		16,926	94%
Total applicable respondents	304			17,943	
No response	2			186	
Top Box Percentage	95%			94%	

In the last 12 months, how often did this provider listen carefully to you?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	0	0%		41	0%
Sometimes	1	0%		166	1%
Usually	18	6%		1,017	6%
Always	286	94%		16,706	93%
Total applicable respondents	305			17,930	
No response	1			199	
Top Box Percentage	94%			93%	

In the last 12 months, how often did this provider show respect for what you had to say?




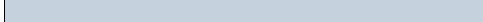
	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	0	0%		35	0%
Sometimes	1	0%		144	1%
Usually	10	3%		770	4%
Always	294	96%		16,985	95%
Total applicable respondents	305			17,934	
No response	1			195	
Top Box Percentage	96%			95%	

Northeast PHO, Inc. - Pediatric Care

Question Response Frequencies for Your Patient Survey Sample




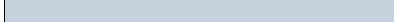
Communication (4 items) Adjusted Mean Score = 97.8

In the last 12 months, how often did this provider spend enough time with your child?





	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	0	0%		37	0%
Sometimes	4	1%		172	1%
Usually	26	9%		1,354	8%
Always	275	90%		16,364	91%
Total applicable respondents	305			17,927	
No response	1			202	
Top Box Percentage	90%			91%	

Integration of Care (2 items) Adjusted Mean Score = 92.5

In the last 12 months, how often did the provider named in Question 1 seem informed and up-to-date about the care your child got from specialists?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	1	1%		112	2%
Sometimes	3	3%		329	5%
Usually	23	23%		1,454	21%
Always	73	73%		4,940	72%
Total applicable respondents	100			6,835	
No response	206			11,294	
Top Box Percentage	73%			72%	

In the last 12 months, when this provider ordered a blood test, x-ray, or other test for your child, how often did someone from this provider's office follow up to give you these results?




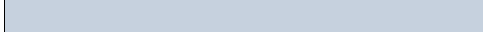
	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	0	0%		186	3%
Sometimes	1	1%		216	3%
Usually	3	4%		674	11%
Always	71	95%		5,170	83%
Total applicable respondents	75			6,246	
No response	231			11,883	
Top Box Percentage	95%			83%	

Northeast PHO, Inc. - Pediatric Care






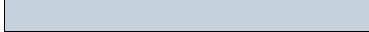
Question Response Frequencies for Your Patient Survey Sample

Knowledge of Patient (2 items) Adjusted Mean Score = 94.0

In the last 12 months, how often did this provider seem to know the important information about your child's medical history?


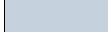
	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	0	0%		41	0%
Sometimes	4	1%		219	1%
Usually	27	9%		1,818	10%
Always	274	90%		15,852	88%
Total applicable respondents	305			17,930	
No response	1			199	
Top Box Percentage	90%			88%	

How would you rate this provider's knowledge about your child as a person – special abilities, concerns, fears?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Very poor	1	0%		29	0%
Poor	1	0%		59	0%
Fair	3	1%		285	2%
Good	20	7%		1,134	6%
Very good	70	23%		3,883	22%
Excellent	210	69%		12,525	70%
Total applicable respondents	305			17,915	
No response	1			214	
Top Box Percentage	69%			70%	

Pediatric Preventive Care (6 items) Adjusted Mean Score = 75.5

In the last 12 months, did you and anyone in this provider's office talk about things you can do to keep your child from getting injured?


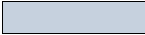
	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	243	80%		13,466	76%
No	60	20%		4,342	24%
Total applicable respondents	303			17,808	
No response	3			321	
Top Box Percentage	80%			76%	

Northeast PHO, Inc. - Pediatric Care



Question Response Frequencies for Your Patient Survey Sample

Pediatric Preventive Care (6 items) Adjusted Mean Score = 75.5



In the last 12 months, did anyone in this provider's office give you information about how to keep your child from getting injured?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	220	73%		12,273	69%
No	81	27%		5,409	31%
Total applicable respondents	301			17,682	
No response	5			447	
Top Box Percentage	73%			69%	



In the last 12 months, did you and anyone in this provider's office talk about how much time your child spends on a computer and in front of a TV?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	202	67%		12,327	69%
No	98	33%		5,453	31%
Total applicable respondents	300			17,780	
No response	6			349	
Top Box Percentage	67%			69%	

In the last 12 months, did you and anyone in this provider's office talk about how much or what kind of food your child eats?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	280	93%		16,393	92%
No	22	7%		1,409	8%
Total applicable respondents	302			17,802	
No response	4			327	
Top Box Percentage	93%			92%	

In the last 12 months, did you and anyone in this provider's office talk about how much or what kind of exercise your child gets?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	242	80%		14,723	83%
No	61	20%		3,062	17%
Total applicable respondents	303			17,785	
No response	3			344	
Top Box Percentage	80%			83%	

Northeast PHO, Inc. - Pediatric Care

Question Response Frequencies for Your Patient Survey Sample

Pediatric Preventive Care (6 items) Adjusted Mean Score = 75.5

In the last 12 months, did you and anyone in this provider's office talk about whether there are any problems in your household that might affect your child?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	172	57%	<div style="width: 57%;"></div>	11,526	65%
No	129	43%	<div style="width: 43%;"></div>	6,208	35%
Total applicable respondents	301			17,734	
No response	5			395	
Top Box Percentage	57%			65%	

Child Development (5 items) Adjusted Mean Score = 77.2

In the last 12 months, did you and anyone in this provider's office talk about your child's learning ability?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	193	64%	<div style="width: 64%;"></div>	11,803	66%
No	109	36%	<div style="width: 36%;"></div>	5,999	34%
Total applicable respondents	302			17,802	
No response	4			327	
Top Box Percentage	64%			66%	

In the last 12 months, did you and anyone in this provider's office talk about the kinds of behaviors that are normal for your child at this age?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	255	84%	<div style="width: 84%;"></div>	14,934	84%
No	49	16%	<div style="width: 16%;"></div>	2,896	16%
Total applicable respondents	304			17,830	
No response	2			299	
Top Box Percentage	84%			84%	

In the last 12 months, did you and anyone in this provider's office talk about how your child's body is growing?



	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	271	89%	<div style="width: 89%;"></div>	16,295	91%
No	33	11%	<div style="width: 11%;"></div>	1,551	9%
Total applicable respondents	304			17,846	
No response	2			283	
Top Box Percentage	89%			91%	

Northeast PHO, Inc. - Pediatric Care



Question Response Frequencies for Your Patient Survey Sample

Child Development (5 items) Adjusted Mean Score = 77.2

In the last 12 months, did you and anyone in this provider's office talk about your child's moods and emotions?



	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	227	75%		14,300	80%
No	76	25%		3,526	20%
Total applicable respondents	303			17,826	
No response	3			303	
Top Box Percentage	75%			80%	

In the last 12 months, did you and anyone in this provider's office talk about how your child gets along with others?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	224	75%		13,877	78%
No	76	25%		3,878	22%
Total applicable respondents	300			17,755	
No response	6			374	
Top Box Percentage	75%			78%	

Organizational Access (3 items) Adjusted Mean Score = 94.8

In the last 12 months, when you called this provider's office for an appointment for care your child **needed right away**, how often did you get an appointment as soon as your child needed?


	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	0	0%		28	0%
Sometimes	2	1%		210	2%
Usually	19	9%		1,423	12%
Always	181	90%		10,695	87%
Total applicable respondents	202			12,356	
No response	104			5,773	
Top Box Percentage	90%			87%	

Northeast PHO, Inc. - Pediatric Care

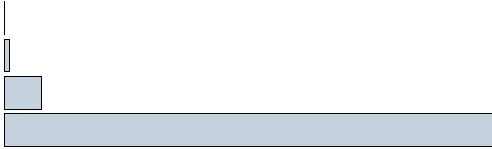
Question Response Frequencies for Your Patient Survey Sample

Organizational Access (3 items) Adjusted Mean Score = 94.8

In the last 12 months, when you made an appointment for a **check-up or routine care** for your child with this provider, how often did you get an appointment as soon as your child needed?


	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	1	0%		58	0%
Sometimes	5	2%		566	3%
Usually	39	14%		3,200	19%
Always	242	84%		13,344	78%
Total applicable respondents	287			17,168	
No response	19			961	
Top Box Percentage	84%			78%	

In the last 12 months, when you called this provider's office during regular office hours, how often did you get an answer to your medical question that same day?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	0	0%		25	0%
Sometimes	2	1%		211	2%
Usually	15	7%		1,504	13%
Always	198	92%		10,081	85%
Total applicable respondents	215			11,821	
No response	91			6,308	
Top Box Percentage	92%			85%	

Self-Management Support (2 items) Adjusted Mean Score = 49.8

In the last 12 months, did you and anyone in this provider's office talk about specific goals for your child's health?



	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	193	64%		11,137	63%
No	109	36%		6,578	37%
Total applicable respondents	302			17,715	
No response	4			414	
Top Box Percentage	64%			63%	

Northeast PHO, Inc. - Pediatric Care

Question Response Frequencies for Your Patient Survey Sample




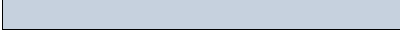
Self-Management Support (2 items) Adjusted Mean Score = 49.8

In the last 12 months, did anyone in this provider's office ask you if there are things that make it hard for you to take care of your child's health?




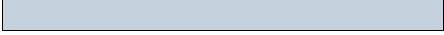
	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	102	34%		7,454	42%
No	197	66%		10,205	58%
Total applicable respondents	299			17,659	
No response	7			470	
Top Box Percentage	34%			42%	

Office Staff (2 items) Adjusted Mean Score = 91.8

In the last 12 months, how often were the front office staff at this provider's office as helpful as you thought they should be?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	1	0%		55	0%
Sometimes	6	2%		505	3%
Usually	71	23%		3,766	21%
Always	225	74%		13,500	76%
Total applicable respondents	303			17,826	
No response	3			303	
Top Box Percentage	74%			76%	

In the last 12 months, how often did the front office staff at this provider's office treat you with courtesy and respect?





	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	0	0%		33	0%
Sometimes	5	2%		323	2%
Usually	49	16%		2,186	12%
Always	249	82%		15,285	86%
Total applicable respondents	303			17,827	
No response	3			302	
Top Box Percentage	82%			86%	

Northeast PHO, Inc. - Pediatric Care




Question Response Frequencies for Your Patient Survey Sample

Overall Ratings (2 items)

Using any number from 0 to 10, where 0 is the worst provider possible and 10 is the best provider possible, what number would you use to rate this provider?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
0 Worst provider possible	1	0%		15	0%
1	0	0%		4	0%
2	0	0%		9	0%
3	0	0%		12	0%
4	0	0%		36	0%
5	0	0%		66	0%
6	0	0%		82	0%
7	5	2%		327	2%
8	20	7%		1,338	7%
9	57	19%		3,501	20%
10 Best provider possible	221	73%		12,518	70%
Total applicable respondents	304			17,908	
No response	2			221	
Top Box Percentage	73%			70%	

Would you **recommend** this provider to your family and friends?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Definitely not	1	0%		156	1%
Probably not	0	0%		100	1%
Not sure	2	1%		211	1%
Probably yes	24	8%		1,509	8%
Definitely yes	276	91%		15,939	89%
Total applicable respondents	303			17,915	
No response	3			214	
Top Box Percentage	91%			89%	

Northeast PHO, Inc. - Pediatric Care

Question Response Frequencies for Your Patient Survey Sample

Communication (PCMH) (5 items) Adjusted Mean Score = 97.5
--

In the last 12 months, how often did this provider explain things about your child's health in a way that was easy to understand?

	<i>frequency</i> <i>percent</i>			<i>state frequency</i> <i>state percent</i>	
Never	0	0%		27	0%
Sometimes	1	0%		91	1%
Usually	13	4%	<div style="width: 4%;"></div>	899	5%
Always	290	95%	<div style="width: 95%;"></div>	16,926	94%
Total applicable respondents	304			17,943	
No response	2			186	
Top Box Percentage	95%			94%	

In the last 12 months, how often did this provider listen carefully to you?

	<i>frequency</i> <i>percent</i>			<i>state frequency</i> <i>state percent</i>	
Never	0	0%		41	0%
Sometimes	1	0%		166	1%
Usually	18	6%	<div style="width: 6%;"></div>	1,017	6%
Always	286	94%	<div style="width: 94%;"></div>	16,706	93%
Total applicable respondents	305			17,930	
No response	1			199	
Top Box Percentage	94%			93%	

In the last 12 months, how often did this provider seem to know the important information about your child's medical history?

	<i>frequency</i> <i>percent</i>			<i>state frequency</i> <i>state percent</i>	
Never	0	0%		41	0%
Sometimes	4	1%	<div style="width: 1%;"></div>	219	1%
Usually	27	9%	<div style="width: 9%;"></div>	1,818	10%
Always	274	90%	<div style="width: 90%;"></div>	15,852	88%
Total applicable respondents	305			17,930	
No response	1			199	
Top Box Percentage	90%			88%	

Northeast PHO, Inc. - Pediatric Care

Question Response Frequencies for Your Patient Survey Sample

Communication (PCMH) (5 items) Adjusted Mean Score = 97.5

In the last 12 months, how often did this provider show respect for what you had to say?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	0	0%		35	0%
Sometimes	1	0%		144	1%
Usually	10	3%	<div style="width: 3%;"></div>	770	4%
Always	294	96%	<div style="width: 96%;"></div>	16,985	95%
Total applicable respondents	305			17,934	
No response	1			195	
Top Box Percentage	96%			95%	

In the last 12 months, how often did this provider spend enough time with your child?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	0	0%		37	0%
Sometimes	4	1%	<div style="width: 1%;"></div>	172	1%
Usually	26	9%	<div style="width: 9%;"></div>	1,354	8%
Always	275	90%	<div style="width: 90%;"></div>	16,364	91%
Total applicable respondents	305			17,927	
No response	1			202	
Top Box Percentage	90%			91%	

Organizational Access (PCMH) (3 items) Adjusted Mean Score = 94.8

In the last 12 months, when you called this provider's office for an appointment for care your child **needed right away**, how often did you get an appointment as soon as your child needed?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	0	0%		28	0%
Sometimes	2	1%	<div style="width: 1%;"></div>	210	2%
Usually	19	9%	<div style="width: 9%;"></div>	1,423	12%
Always	181	90%	<div style="width: 90%;"></div>	10,695	87%
Total applicable respondents	202			12,356	
No response	104			5,773	
Top Box Percentage	90%			87%	

Northeast PHO, Inc. - Pediatric Care

Question Response Frequencies for Your Patient Survey Sample

Organizational Access (PCMH) (3 items) Adjusted Mean Score = 94.8

In the last 12 months, when you made an appointment for a **check-up or routine care** for your child with this provider, how often did you get an appointment as soon as your child needed?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	1	0%	<div style="width: 0%;"></div>	58	0%
Sometimes	5	2%	<div style="width: 2%;"></div>	566	3%
Usually	39	14%	<div style="width: 14%;"></div>	3,200	19%
Always	242	84%	<div style="width: 84%;"></div>	13,344	78%
Total applicable respondents	287			17,168	
No response	19			961	
Top Box Percentage	84%			78%	

In the last 12 months, when you called this provider's office during regular office hours, how often did you get an answer to your medical question that same day?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	0	0%	<div style="width: 0%;"></div>	25	0%
Sometimes	2	1%	<div style="width: 1%;"></div>	211	2%
Usually	15	7%	<div style="width: 7%;"></div>	1,504	13%
Always	198	92%	<div style="width: 92%;"></div>	10,081	85%
Total applicable respondents	215			11,821	
No response	91			6,308	
Top Box Percentage	92%			85%	

Communication: Provider Explains Clearly to Child (1 item) Adjusted Mean Score = 97.4

In the last 12 months, how often did this provider explain things in a way that was easy for **your child** to understand?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	0	0%	<div style="width: 0%;"></div>	10	0%
Sometimes	1	1%	<div style="width: 1%;"></div>	100	1%
Usually	9	6%	<div style="width: 6%;"></div>	687	8%
Always	131	93%	<div style="width: 93%;"></div>	7,881	91%
Total applicable respondents	141			8,678	
No response	165			9,451	
Top Box Percentage	93%			91%	

Northeast PHO, Inc. - Pediatric Care

Question Response Frequencies for Your Patient Survey Sample

Communication: Provider Listens to Child (1 item) Adjusted Mean Score = 98.4

In the last 12 months, how often did this provider listen carefully to **your child**?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	0	0%	<div style="width: 0%;"></div>	7	0%
Sometimes	2	1%	<div style="width: 1%;"></div>	82	1%
Usually	3	2%	<div style="width: 2%;"></div>	439	5%
Always	136	96%	<div style="width: 96%;"></div>	8,146	94%
Total applicable respondents	141			8,674	
No response	165			9,455	
Top Box Percentage	96%			94%	

Communication: Information for Child Follow-Up (1 item) Adjusted Mean Score = 98.3

Did this provider give you enough information about what you needed to do to follow up on your child's care?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	154	98%	<div style="width: 98%;"></div>	9,708	99%
No	3	2%	<div style="width: 2%;"></div>	66	1%
Total applicable respondents	157			9,774	
No response	149			8,355	
Top Box Percentage	98%			99%	

Coordination: Follow-Up About Test Results (1 item) Adjusted Mean Score = 97.6

In the last 12 months, when this provider ordered a blood test, x-ray, or other test for your child, how often did someone from this provider's office follow up to give you these results?



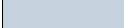
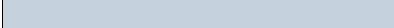
	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	0	0%	<div style="width: 0%;"></div>	186	3%
Sometimes	1	1%	<div style="width: 1%;"></div>	216	3%
Usually	3	4%	<div style="width: 4%;"></div>	674	11%
Always	71	95%	<div style="width: 95%;"></div>	5,170	83%
Total applicable respondents	75			6,246	
No response	231			11,883	
Top Box Percentage	95%			83%	

Northeast PHO, Inc. - Pediatric Care

Question Response Frequencies for Your Patient Survey Sample

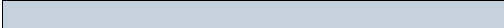

Coordination: Provider Up to Date About Specialists (1 item) Adjusted Mean Score = 89.0

In the last 12 months, how often did the provider named in Question 1 seem informed and up-to-date about the care your child got from specialists?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Never	1	1%		112	2%
Sometimes	3	3%		329	5%
Usually	23	23%		1,454	21%
Always	73	73%		4,940	72%
Total applicable respondents	100			6,835	
No response	206			11,294	
Top Box Percentage	73%			72%	

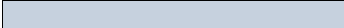
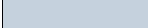

Information: About Care After Hours (1 item) Adjusted Mean Score = 93.5

Did this provider's office give you information about what to do if your child needed care during evenings, weekends, or holidays?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	286	94%		16,692	93%
No	19	6%		1,271	7%
Total applicable respondents	305			17,963	
No response	1			166	
Top Box Percentage	94%			93%	

Self Assessment of Health (1 item)

In general, how would you rate your child's overall health?





	<i>frequency percent</i>			<i>state frequency state percent</i>	
Excellent	194	64%		11,096	62%
Very good	83	27%		5,550	31%
Good	25	8%		1,034	6%
Fair	1	0%		124	1%
Poor	0	0%		14	0%
Total applicable respondents	303			17,818	
No response	3			311	
Top Box Percentage	64%			62%	

Northeast PHO, Inc. - Pediatric Care

Question Response Frequencies for Your Patient Survey Sample





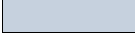
Self Assessment of Emotional Health (1 item)

In general, how would you rate your child's overall
mental or emotional health?



	<i>frequency percent</i>			<i>state frequency state percent</i>	
Excellent	173	57%		9,997	56%
Very good	91	30%		5,532	31%
Good	31	10%		1,726	10%
Fair	7	2%		465	3%
Poor	0	0%		85	0%
Total applicable respondents	302			17,805	
No response	4			324	
Top Box Percentage	57%			56%	

Demographics (20 items)

What is your child's age?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Less than 2 years old	45	15%		2,330	13%
2 to 4 years old	52	17%		2,874	16%
5 to 9 years old	53	17%		3,736	21%
10 to 14 years old	79	26%		4,622	25%
15 to 18 years old	77	25%		4,567	25%
Total applicable respondents	306			18,129	
No response	0			0	
Top Box Percentage	N/A			N/A	

Is your child male or female?



	<i>frequency percent</i>			<i>state frequency state percent</i>	
Male	166	54%		9,393	52%
Female	140	46%		8,736	48%
Total applicable respondents	306			18,129	
No response	0			0	
Top Box Percentage	N/A			N/A	

Northeast PHO, Inc. - Pediatric Care



Question Response Frequencies for Your Patient Survey Sample

Demographics (20 items)



Is your child of Hispanic or Latino origin or descent?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
No, not Hispanic or Latino	283	95%		16,567	93%
Yes, Hispanic or Latino	15	5%		1,154	7%
Total applicable respondents	298			17,721	
No response	8			408	
Top Box Percentage	N/A			N/A	



What is your child's race?: **White**

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	289	94%		15,747	87%
No	17	6%		2,382	13%
Total applicable respondents	306			18,129	
No response	0			0	
Top Box Percentage	N/A			N/A	

What is your child's race?: **Black or African American**

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	5	2%		728	4%
No	301	98%		17,401	96%
Total applicable respondents	306			18,129	
No response	0			0	
Top Box Percentage	N/A			N/A	

What is your child's race?: **Asian**


	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	13	4%		1,410	8%
No	293	96%		16,719	92%
Total applicable respondents	306			18,129	
No response	0			0	
Top Box Percentage	N/A			N/A	

Northeast PHO, Inc. - Pediatric Care

Question Response Frequencies for Your Patient Survey Sample

Demographics (20 items)

What is your child's race?: **Native Hawaiian or Other Pacific Islander**

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	1	0%		55	0%
No	305	100%		18,074	100%
Total applicable respondents	306			18,129	
No response	0			0	
Top Box Percentage	N/A			N/A	

What is your child's race?: **American Indian or Alaska Native**

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	0	0%		72	0%
No	306	100%		18,057	100%
Total applicable respondents	306			18,129	
No response	0			0	
Top Box Percentage	N/A			N/A	

What is your child's race?: **Other**

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	3	1%		673	4%
No	303	99%		17,456	96%
Total applicable respondents	306			18,129	
No response	0			0	
Top Box Percentage	N/A			N/A	

Has a provider ever told you that your child had: **Diabetes**



	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	1	0%		62	0%
No	301	100%		17,747	100%
Total applicable respondents	302			17,809	
No response	4			320	
Top Box Percentage	N/A			N/A	

Northeast PHO, Inc. - Pediatric Care



Question Response Frequencies for Your Patient Survey Sample

Demographics (20 items)



Has a provider ever told you that your child had: **Asthma**

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	27	9%		2,266	13%
No	275	91%		15,543	87%
Total applicable respondents	302			17,809	
No response	4			320	
Top Box Percentage	N/A			N/A	



Has a provider ever told you that your child had: **The problem of being overweight or excessive weight gain**

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	14	5%		1,096	6%
No	288	95%		16,713	94%
Total applicable respondents	302			17,809	
No response	4			320	
Top Box Percentage	N/A			N/A	

Has a provider ever told you that your child had: **Attention Disorder such as ADD or ADHD**

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	22	7%		1,458	8%
No	280	93%		16,351	92%
Total applicable respondents	302			17,809	
No response	4			320	
Top Box Percentage	N/A			N/A	

Has a provider ever told you that your child had: **Depression or other emotional problem**



	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	25	8%		1,176	7%
No	277	92%		16,633	93%
Total applicable respondents	302			17,809	
No response	4			320	
Top Box Percentage	N/A			N/A	

Northeast PHO, Inc. - Pediatric Care



Question Response Frequencies for Your Patient Survey Sample

Demographics (20 items)



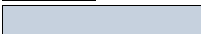
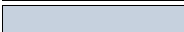

Has a provider ever told you that your child had: **Autism, intellectual disability, or other developmental problems**

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	15	5%		690	4%
No	287	95%		17,119	96%
Total applicable respondents	302			17,809	
No response	4			320	
Top Box Percentage	N/A			N/A	

Has a provider ever told you that your child had: **Other chronic (long term) health condition**

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Yes	19	6%		1,250	7%
No	283	94%		16,559	93%
Total applicable respondents	302			17,809	
No response	4			320	
Top Box Percentage	N/A			N/A	

What is **your** age?



	<i>frequency percent</i>			<i>state frequency state percent</i>	
Under 18	4	1%		157	1%
18 to 24	0	0%		56	0%
25 to 34	52	17%		2,503	14%
35 to 44	112	37%		6,942	39%
45 to 54	103	34%		6,596	37%
55 to 64	29	10%		1,342	8%
65 to 74	0	0%		105	1%
75 or older	0	0%		9	0%
Total applicable respondents	300			17,710	
No response	6			419	
Top Box Percentage	N/A			N/A	

Northeast PHO, Inc. - Pediatric Care






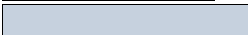
Question Response Frequencies for Your Patient Survey Sample

Demographics (20 items)

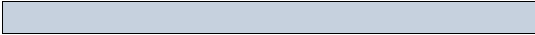






Are you male or female?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
Male	49	16%		2,773	16%
Female	252	84%		14,945	84%
Total applicable respondents	301			17,718	
No response	5			411	
Top Box Percentage	N/A			N/A	

What is the highest grade or level of school that you have completed?

	<i>frequency percent</i>			<i>state frequency state percent</i>	
8th grade or less	0	0%		56	0%
Some high school, but did not graduate	2	1%		57	0%
High school graduate or GED	10	3%		762	4%
Some college or 2-year degree	32	11%		2,603	15%
4-year college graduate	119	40%		5,231	30%
More than 4-year college degree	138	46%		8,969	51%
Total applicable respondents	301			17,678	
No response	5			451	
Top Box Percentage	N/A			N/A	

How are you related to the child?




	<i>frequency percent</i>			<i>state frequency state percent</i>	
Mother or father	301	100%		17,661	100%
Grandparent	0	0%		40	0%
Aunt or uncle	0	0%		1	0%
Older brother or sister	0	0%		3	0%
Other relative	0	0%		3	0%
Legal guardian	1	0%		23	0%
Someone else	0	0%		7	0%
Total applicable respondents	302			17,738	
No response	4			391	
Top Box Percentage	N/A			N/A	

Northeast PHO, Inc. - Pediatric Care

Comparative Performance Charts

The symbols and reliability definitions illustrated below relate to each of the Comparative Performance Charts appearing on the following pages. These charts are being provided for internal use by your organization for quality improvement. It is important to note that while the adjusted mean score is presented for each reported entity as a point of reference, any comparison based on the adjusted mean score is not a meaningful way to differentiate one from another and will result in an unacceptably high risk of misclassification.

In using these charts for quality improvement purposes, it is the symbol indicating performance relative to the benchmark that should be considered in interpreting performance. Therefore, results are grouped according to whether the adjusted mean score achieved for the measure is significantly above (green triangle), no different than (blue circle), or significantly below (red triangle) the benchmark.

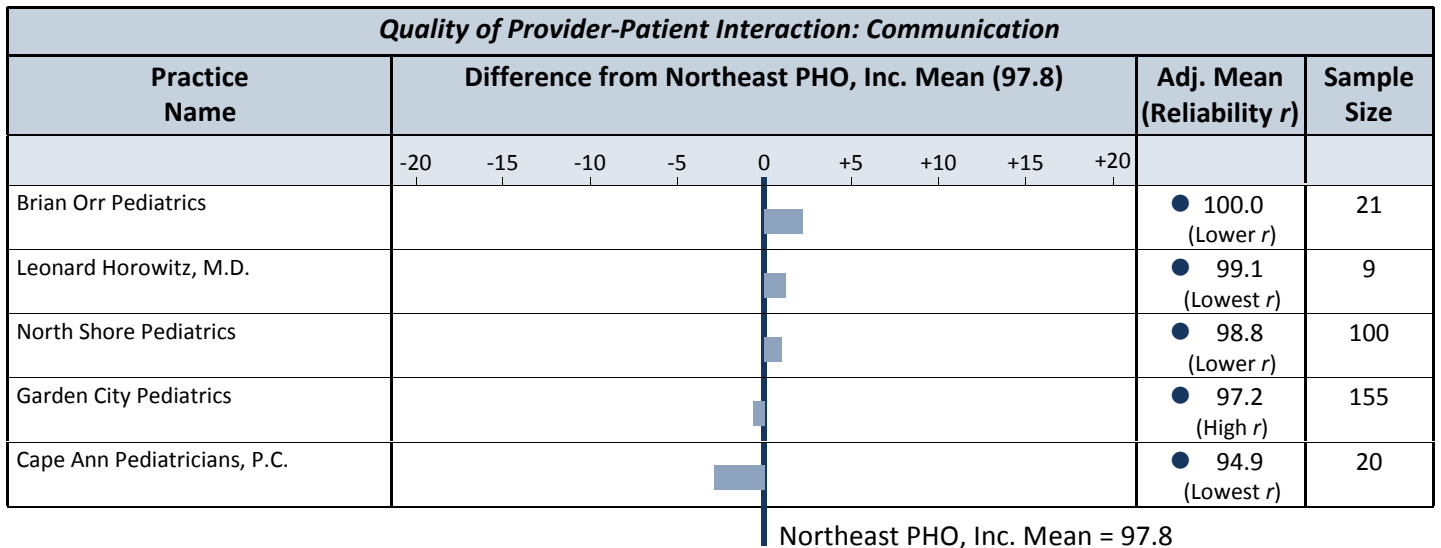
Comparison Symbol Legend	
	Statistically significantly above the benchmark ($p \leq 0.05$)
	Statistically equivalent to the benchmark
	Statistically significantly below the benchmark ($p \leq 0.05$)

As an additional point of reference for interpreting these results, the charts also include the sample size and reliability of the measure for each reported entity. Please refer to the reliability definitions in the table below to interpret reliability numbers. Smaller sample sizes lead to larger confidence intervals around adjusted mean scores and may decrease the likelihood of capturing differences in performance that are statistically significant.

Reliability Legend	
Highest r $\geq .70$	Available sample for this measure meets or exceeds reliability standards for highly reliable estimates of performance.
High r .50 to .69	Available sample for this measure is slightly less than optimal. Your performance relative to the state average is very likely correct, but your actual score could differ somewhat in a sample including a larger number of your patients.
Lower r .35 to .49	Available sample size for this measure is less than optimal. Your performance relative to the state average is likely correct, but your actual score could vary considerably in a sample including a larger number of your patients.
Lowest r $\leq .34$	Available sample for this measure is too small to provide a useful estimate of your performance or your position relative to other practices statewide.

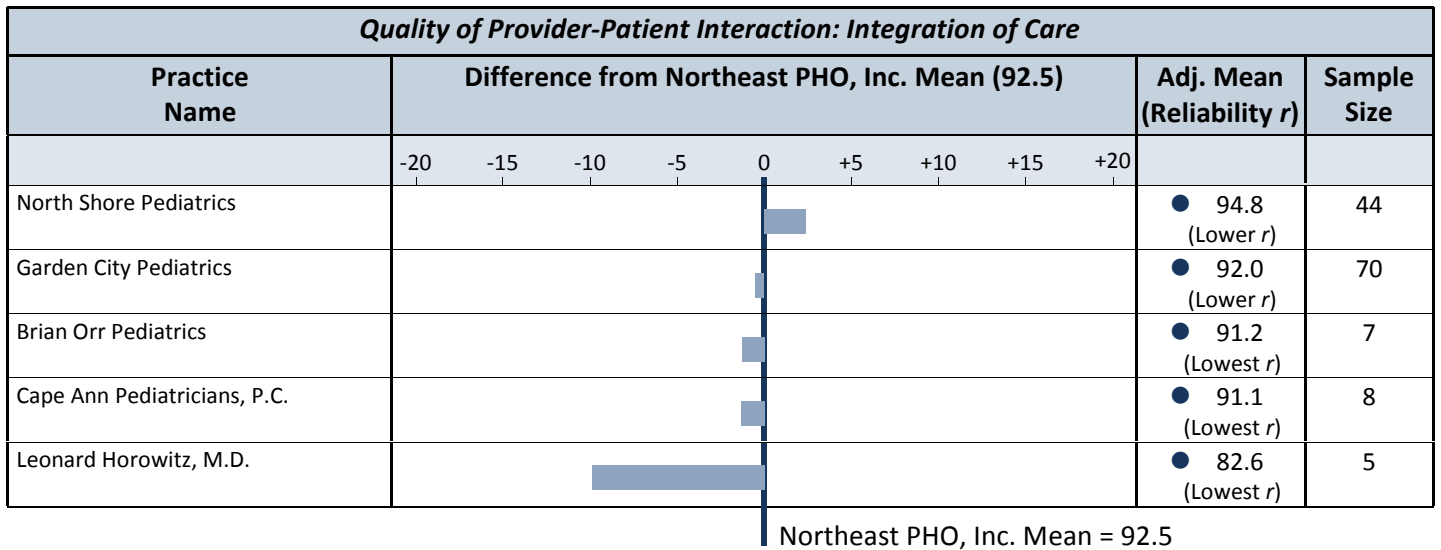
Northeast PHO, Inc. - Pediatric Care

Practices compared with Northeast PHO, Inc. Mean



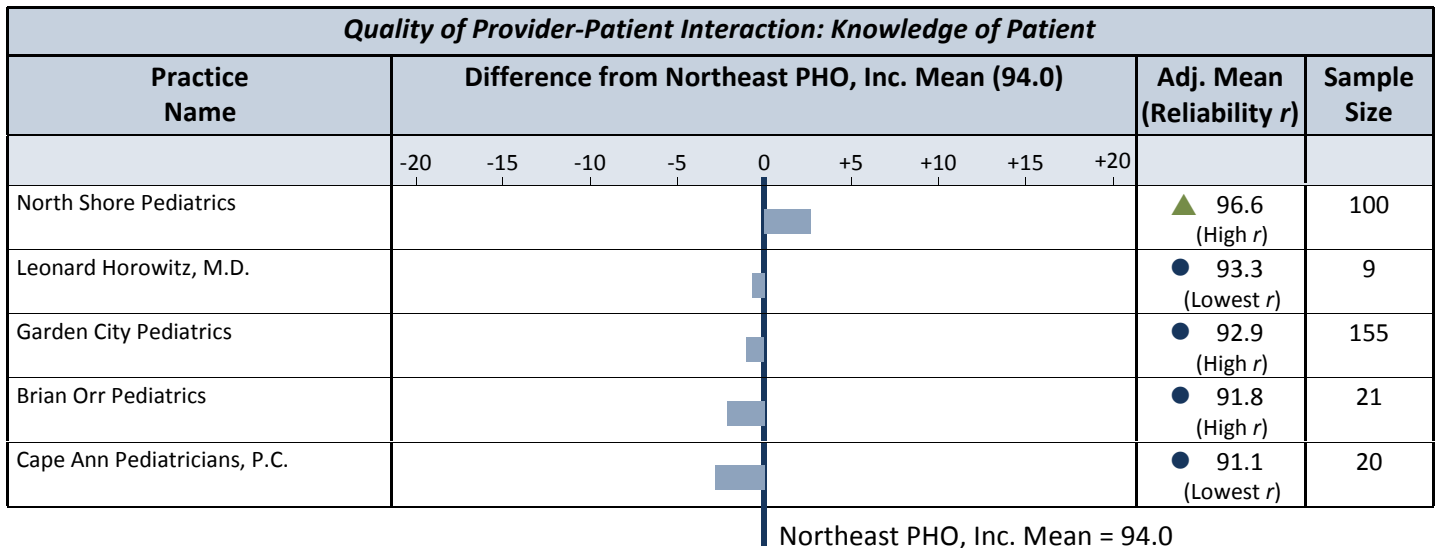
Northeast PHO, Inc. - Pediatric Care

Practices compared with Northeast PHO, Inc. Mean



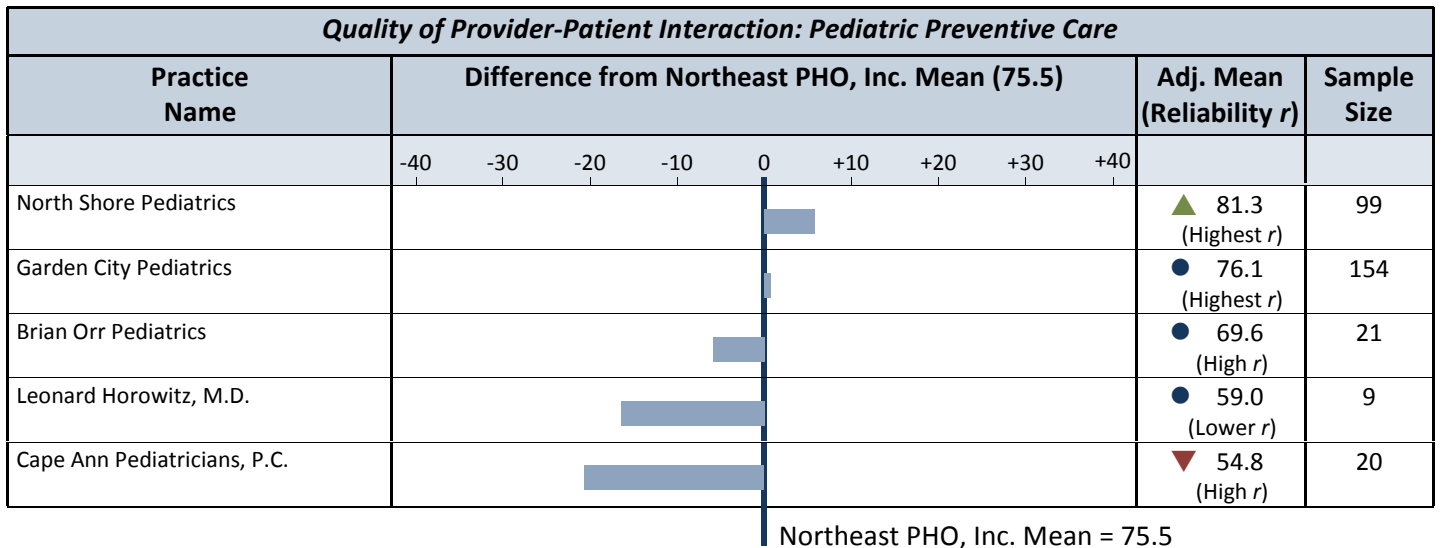
Northeast PHO, Inc. - Pediatric Care

Practices compared with Northeast PHO, Inc. Mean



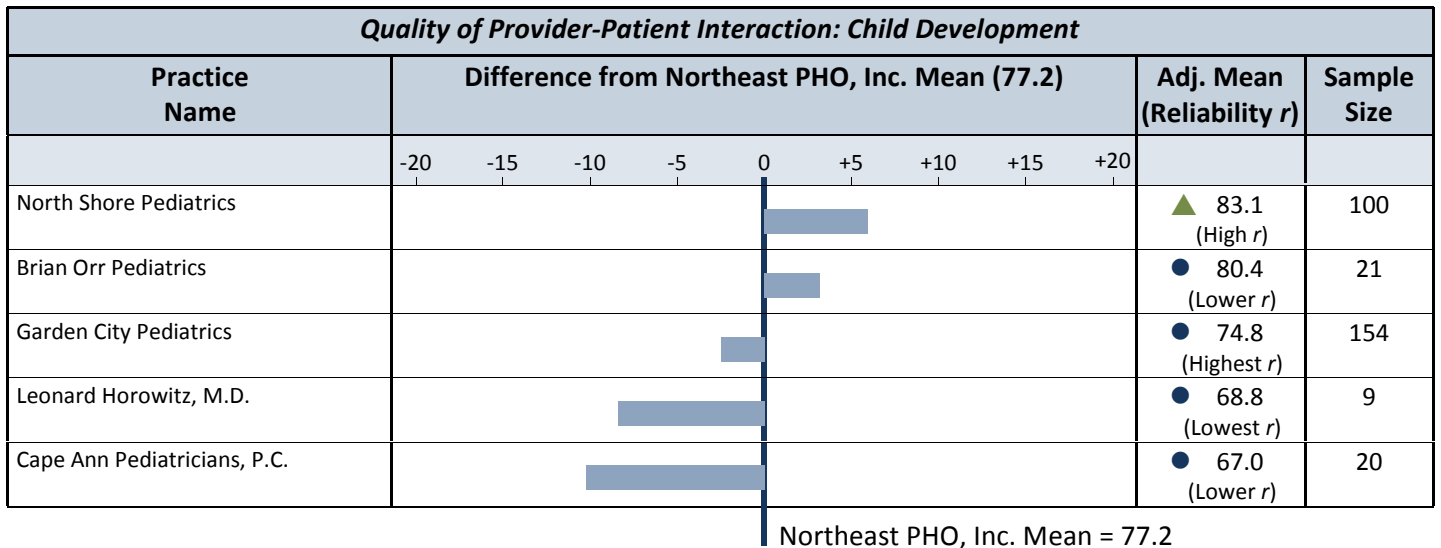
Northeast PHO, Inc. - Pediatric Care

Practices compared with Northeast PHO, Inc. Mean



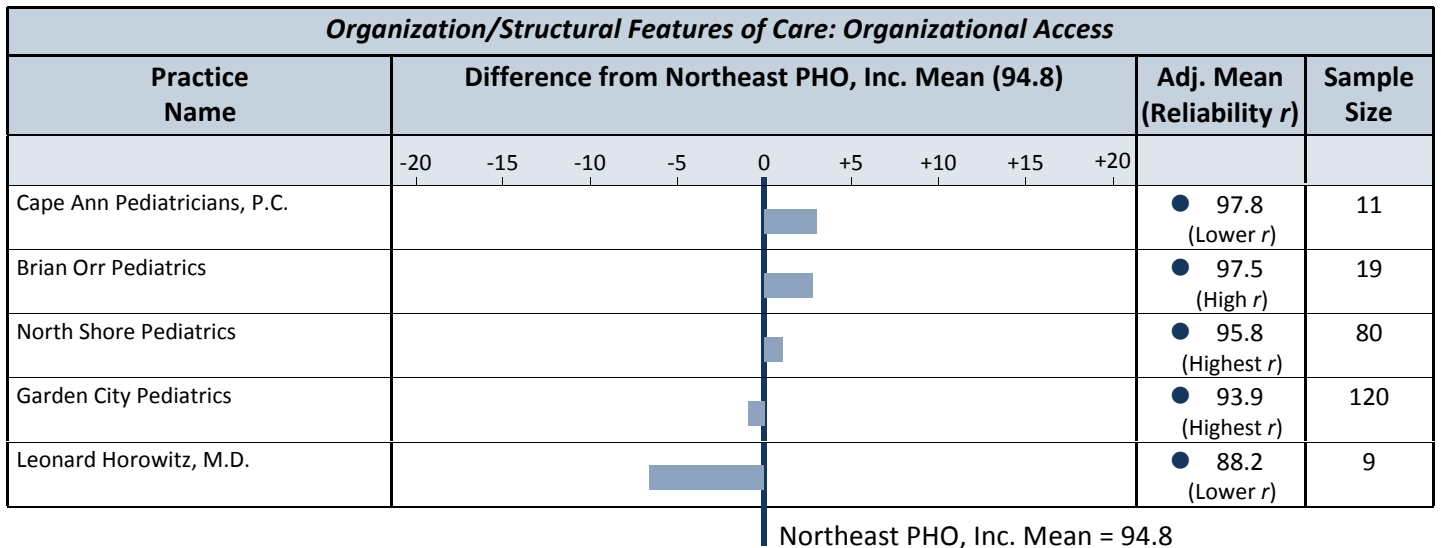
Northeast PHO, Inc. - Pediatric Care

Practices compared with Northeast PHO, Inc. Mean



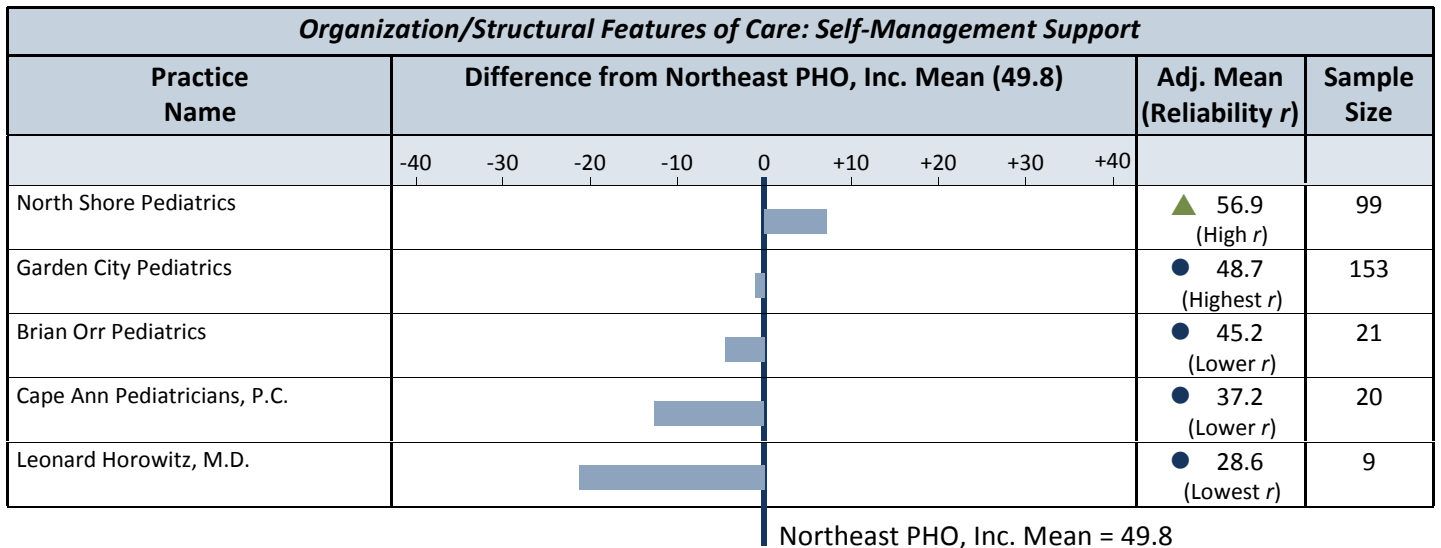
Northeast PHO, Inc. - Pediatric Care

Practices compared with Northeast PHO, Inc. Mean



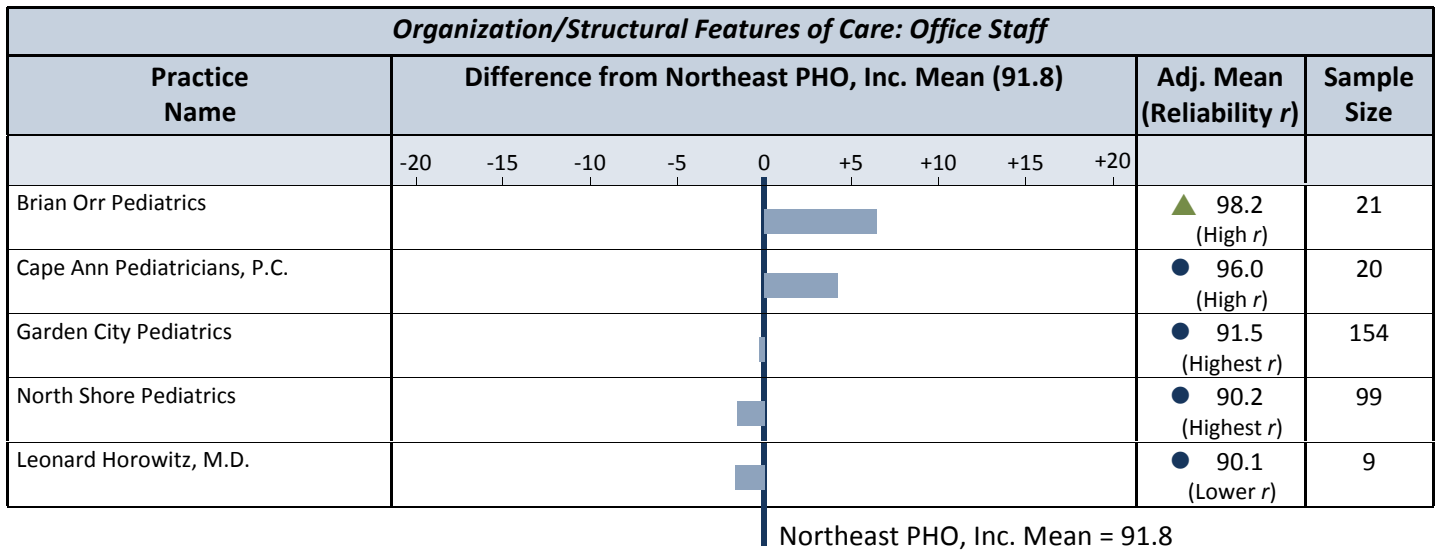
Northeast PHO, Inc. - Pediatric Care

Practices compared with Northeast PHO, Inc. Mean



Northeast PHO, Inc. - Pediatric Care

Practices compared with Northeast PHO, Inc. Mean



Northeast PHO, Inc. - Pediatric Care

Composite Score Trend				Sig Diff
	Year	Respondents	Mean	-1
Quality of Provider-Patient Interaction				
Communication	2019	305	97.82	●
	2018	359	97.15	
Integration of Care	2019	134	92.45	▲
	2018	155	86.75	
Knowledge of Patient	2019	305	93.95	●
	2018	359	92.51	
Pediatric Preventive Care	2019	303	75.46	●
	2018	350	76.72	
Child Development	2019	304	77.23	●
	2018	352	77.39	
Organization/Structural Features of Care				
Organizational Access	2019	239	94.78	●
	2018	278	93.71	
Office Staff	2019	303	91.80	▲
	2018	353	89.15	
Self-Management Support	2019	302	49.78	●
	2018	350	46.66	
Global Rating				
Willingness to Recommend	2019	303	97.56	●
	2018	355	96.43	

Note: analysis includes publicly reportable sites only

▲ = Significantly above prior year

● = No Significant Change

▼ = Significantly below prior year

Northeast PHO, Inc. - Pediatric Care

Listing of Sampled Providers

Brian Orr Pediatrics
Northeast PHO, Inc.

ORR, BRIAN

Cape Ann Pediatricians, P.C.
Northeast PHO, Inc.

CARBONE, THOMAS

STOCKMAN, JEFFREY

Garden City Pediatrics
Northeast PHO, Inc.

DEAN, JOHN

GOLDSTEIN, ERICA

GRAVES, SUZANNE

HUMPHREYS, ELIZABETH

KRITEMAN, JACOB

SILVA, SHERYL

SKLAVER, IAN

SLEEPER, ERIC

Leonard Horowitz, M.D.
Northeast PHO, Inc.

HOROWITZ, LEONARD

North Shore Pediatrics
Northeast PHO, Inc.

DANIS, DAVID

DUFRESNE, SHANNON

GOODMAN, LANCE

MATHEWS, MAUREEN

SEMAN, THOMAS

Appendices

Northeast PHO, Inc. - Pediatric Care

Massachusetts Statewide and Regional Means

Summary Measures	MA State Mean	Metro Boston	Metro West	Northeast MA	Southeast MA	Central MA	Western MA
<i>Quality of Provider-Patient Interaction</i>							
Communication	97.4	● 97.7	● 97.4	● 97.3	● 97.3	● 97.3	● 97.4
Integration of Care	89.2	● 89.7	● 89.2	● 89.3	● 88.9	● 89.2	● 88.7
Knowledge of Patient	93.6	▲ 94.4	● 93.8	● 93.4	● 93.6	● 93.3	● 93.6
Pediatric Preventive Care	75.8	▲ 77.2	● 75.3	● 75.4	● 76.1	● 74.8	● 76.6
Child Development	80.0	▲ 81.4	● 80.2	● 79.7	● 80.1	● 79.1	● 80.5
<i>Organization/Structural Features of Care</i>							
Organizational Access	93.4	● 93.2	● 93.7	● 93.5	● 93.5	● 93.2	● 92.9
Self-Management Support	52.7	▲ 55.3	● 52.7	● 52.0	● 52.6	● 52.0	● 53.1
Office Staff	92.6	● 92.7	● 92.3	● 92.7	● 92.9	● 92.6	● 92.3

Comparison Symbol Legend

- ▲ Statistically significantly above the MA Statewide Mean ($p \leq 0.05$)
- Statistically equivalent to the MA Statewide Mean
- ▼ Statistically significantly below the MA Statewide Mean ($p \leq 0.05$)

Northeast PHO, Inc. - Pediatric Care

Massachusetts Statewide Performance Percentiles

Summary Measures	10th Percentile	25th Percentile	50th Percentile	75th Percentile	80th Percentile	90th Percentile	99th Percentile
------------------	-----------------	-----------------	-----------------	-----------------	-----------------	-----------------	-----------------

Quality of Provider-Patient Interaction

Publicly Reported Measures

Communication	96.0	97.0	97.6	98.0	98.0	98.7	100.0
Integration of Care	83.0	87.0	88.9	92.0	92.0	93.7	98.0
Knowledge of Patient	91.0	93.0	93.8	95.0	95.0	95.8	97.0
Pediatric Preventive Care	68.0	73.0	76.5	80.0	81.0	83.9	87.0
Child Development	74.0	77.0	80.1	83.0	84.0	86.4	89.0

Organization/Structural Features of Care

Publicly Reported Measures

Organizational Access	90.0	91.0	93.3	95.0	95.0	96.2	98.0
Self-Management Support	43.0	47.0	53.6	58.0	59.0	63.7	72.0
Office Staff	88.0	90.0	92.7	94.0	95.0	96.1	98.0

Northeast PHO, Inc. - Pediatric Care

Patients' Experiences with Your Medical Group (n = 306)
PCMH Measure Results Compared with the Statewide Mean

PCMH Measures	Measure Set *	Group Mean	State Mean
<i>Composite Measures</i>			
Communication (PCMH)	PCMH	● 97.5	97.0
Pediatric Preventive Care	PCMH & MHQP	● 75.5	75.8
Child Development	PCMH & MHQP	● 77.2	80.0
Organizational Access (PCMH)	PCMH	● 94.8	93.4
Self-Management Support	PCMH & MHQP	● 49.8	52.7
Office Staff	PCMH & MHQP	● 91.8	92.6
<i>Single Item Measures</i>			
Communication: Provider Explains Clearly to Child	PCMH	● 97.4	96.4
Communication: Provider Listens to Child	PCMH	● 98.4	97.6
Communication: Information for Child Follow-Up	PCMH	● 98.3	99.3
Coordination: Follow-Up About Test Results	PCMH	▲ 97.6	91.1
Coordination: Provider Up to Date About Specialists	PCMH	● 89.0	88.1
Information: About Care After Hours	PCMH	● 93.5	92.9

* This survey contains additional questions and composites that correspond to the CAHPS PCMH survey. The measure set column indicates whether the composite measures are part of the Patient Centered Medical Home (PCMH) survey questions or part of the standard MHPQ survey or both.

Comparison Symbol Legend	
▲	Statistically significantly above the MA Statewide Mean ($p \leq 0.05$)
●	Statistically equivalent to the MA Statewide Mean
▼	Statistically significantly below the MA Statewide Mean ($p \leq 0.05$)

Reliability Legend	
Highest $r \geq .70$	Available sample for this measure meets or exceeds reliability standards for highly reliable estimates of performance.
High $r .50$ to $.70$	Available sample for this measure is slightly less than optimal. Your performance relative to the state average is very likely correct, but your actual score could differ somewhat in a sample including a larger number of your patients.
Lower $r .34$ to $.50$	Available sample size for this measure is less than optimal. Your performance relative to the state average is likely correct, but your actual score could vary considerably in a sample including a larger number of your patients.
Lowest $r < .34$	Available sample for this measure is too small to provide a useful estimate of your performance or your position relative to other practices statewide.

Tables of Survey Questions - Pediatric Care

PCMH Composite Measures

Summary Measure	Survey Questions
<i>Communication (PCMH)</i> (5 questions)	<p>In the last 12 months, how often did this provider explain things about your child's health in a way that was easy to understand?</p> <p>In the last 12 months, how often did this provider listen carefully to you?</p> <p>In the last 12 months, how often did this provider seem to know the important information about your child's medical history?</p> <p>In the last 12 months, how often did this provider show respect for what you had to say?</p> <p>In the last 12 months, how often did this provider spend enough time with your child?</p>
<i>Pediatric Preventive Care</i> (6 questions)	<p>In the last 12 months, did you and anyone in this provider's office talk about things you can do to keep your child from getting injured?</p> <p>In the last 12 months, did anyone in this provider's office give you information about how to keep your child from getting injured?</p> <p>In the last 12 months, did you and anyone in this provider's office talk about how much time your child spends on a computer and in front of a TV?</p> <p>In the last 12 months, did you and anyone in this provider's office talk about how much or what kind of food your child eats?</p> <p>In the last 12 months, did you and anyone in this provider's office talk about how much or what kind of exercise your child gets?</p> <p>In the last 12 months, did you and anyone in this provider's office talk about whether there are any problems in your household that might affect your child?</p>
<i>Child Development</i> (5 questions)	<p>In the last 12 months, did you and anyone in this provider's office talk about your child's learning ability?</p> <p>In the last 12 months, did you and anyone in this provider's office talk about the kinds of behaviors that are normal for your child at this age?</p> <p>In the last 12 months, did you and anyone in this provider's office talk about how your child's body is growing?</p> <p>In the last 12 months, did you and anyone in this provider's office talk about your child's moods and emotions?</p> <p>In the last 12 months, did you and anyone in this provider's office talk about how your child gets along with others?</p>

<i>Organizational Access</i> (PCMH) (3 questions)	<p>In the last 12 months, when you called this provider’s office for an appointment for care your child needed right away, how often did you get an appointment as soon as your child needed?</p> <p>In the last 12 months, when you made an appointment for a check-up or routine care for your child with this provider, how often did you get an appointment as soon as your child needed?</p> <p>In the last 12 months, when you called this provider’s office during regular office hours, how often did you get an answer to your medical question that same day?</p>
<i>Self-Management Support</i> (2 questions)	<p>In the last 12 months, did you and anyone in this provider’s office talk about specific goals for your child’s health?</p> <p>In the last 12 months, did anyone in this provider’s office ask you if there are things that make it hard for you to take care of your child’s health?</p>
<i>Office Staff</i> (2 questions)	<p>In the last 12 months, how often were the front office staff at this provider’s office as helpful as you thought they should be?</p> <p>In the last 12 months, how often did the front office staff at this provider’s office treat you with courtesy and respect?</p>
<i>Communication: Provider Explains Clearly to Child</i> (1 question)	<p>In the last 12 months, how often did this provider explain things in a way that was easy for your child to understand?</p>
<i>Communication: Provider Listens to Child</i> (1 question)	<p>In the last 12 months, how often did this provider listen carefully to your child?</p>
<i>Communication: Information for Child Follow-Up</i> (1 question)	<p>Did this provider give you enough information about what you needed to do to follow up on your child’s care?</p>
<i>Coordination: Follow-Up About Test Results</i> (1 question)	<p>In the last 12 months, when this provider ordered a blood test, x-ray, or other test for your child, how often did someone from this provider’s office follow up to give you these results?</p>
<i>Coordination: Provider Up to Date About Specialists</i> (1 question)	<p>In the last 12 months, how often did the provider named in Question 1 seem informed and up-to-date about the care your child got from specialists?</p>
<i>Information: About Care After Hours</i> (1 question)	<p>Did this provider’s office give you information about what to do if your child needed care during evenings, weekends, or holidays?</p>

Selected Tools and References for Quality Improvement

Tools for Improving Patient Experience		
Source	Description	Website Link
Developing and Implementing a QI Plan	A module highlighting the important role of an effective QI plan in improving performance of your organization's health care system.	https://www.hrsa.gov
Improving Patient Experience: A Hands-on Guide for Safety-Net Clinics	This guide offers clinics and small practices a four-step approach to identify areas in need of patient experience improvement efforts and subsequent quality improvement interventions.	Transforming Patient Experience Powerpoint
Improving the Patient Experience Change Package	A guide of nine proven changes to improve patient experience ratings.	http://www.calquality.org/storage/Improving_Pt_Experience_Spread_Change_Pkg_UpdatedMay2011.pdf
Institute for HealthCare Improvement – Model for Improvement	The IHI model for improvement utilizes PDSA (Plan-Do-Study-Act) cycles to test change in an organization. This model of improvement is meant to establish what your organization is trying to accomplish, how you will determine if the changes made are in fact an improvement, and what changes can be made that result in improvement.	http://www.ihi.org
Six Ways to Use CAHPS to Improve Patient Experience	This 1-minute animated video helps show clinicians and healthcare staff how their CAHPS (Consumer Assessment of Healthcare Providers and Systems) survey results can improve patient experience.	https://www.youtube.com/watch?v=prE6Ty2qDq8
The CAHPS Ambulatory Care Improvement Guide	Practical Strategies for Improving Patient Experience	https://www.ahrq.gov/sites/default/files/wysiwyg/cahps/quality-improvement/improvement-guide/cahps-ambulatory-care-guide-full.pdf
Tools and Strategies for Quality Improvement and Patient Safety	This chapter discusses strategies and tools for quality improvement—including failure modes and effects analysis, Plan-Do-Study-Act, Six Sigma, Lean, and root-cause analysis—used to improve the quality and safety of health care.	https://www.ncbi.nlm.nih.gov/books/NBK2682/

Other Related Tools & References

Source	Description	Website Link/Journal
A Tool Kit for Creating a Patient and Family Advisory Council	This guide provides information on developing and implementing a Patient and Family Advisory Council (PFAC), which, in turn, can help advise a practice on how to improve the patient and family experiences of care.	https://cdn.ymaws.com/www.thebervylinstitute.org/reso/urce
Agency for Healthcare Research and Quality: Quality Improvement in Primary Care	A synopsis of how to achieve quality improvement in primary care settings.	http://www.ahrq.gov
Engaging Primary Care Practices in Quality Improvement	A paper written for practice facilitators and the organizations that train and deploy QI efforts within primary care practice sites.	https://pcmh.ahrq.gov/sites/default/files/attachments/QI-strategies-practices.pdf
Facilitating Improvement in Primary Care: The Promise of Practice Coaching (The Commonwealth Fund)	Practice coaching, also called practice facilitation, assists physician practices with the desire to improve in such areas as patient access, chronic and preventive care, electronic medical record use, patient-centeredness, cultural competence, and team-building. This issue brief offers guidance on how best to structure and design these programs in primary care settings.	https://www.commonwealthfund.org/sites/default/files/documents
Gleeson, H., Calderon, A., Swami, V., Deighton, J., Wolpert, M., Edbrooke-Childs, J. (2016)	Systematic review of approaches to using patient experience data for quality improvement in healthcare settings	BMJ Open 2016;6:e011907
Martino, S., Shaller, D., Schlesinger, M., Parker, A., Rybowski, L., Grob, R., Cerully, J., Finucane, M. (2017)	CAHPS and comments: How closed-ended survey questions and narrative accounts interact in the assessment of patient experience	Journal of Patient Experience
Martino, S., Shaller, D., Schlesinger, M., Parker, A., Rybowski, L., Grob, R., Cerully, J., Finucane, M. (2018)	A framework for conceptualizing how narratives from health-care consumers might improve or impede the use of information about provider quality	Patient Experience Journal: Vol. 5 : Issue 1 , Article 5

Other Related Tools & References Continued...

Source	Description	Website Link/Journal
Massachusetts Health Quality Partners (MHQP) and California Healthcare Performance Information System (CHPI)- Patient Experience Measurement: Building a Statewide Short Form Program	This guide is intended to provide information on the steps involved in the development of a patient experience program. It focuses on two organizations' experiences developing an electronic short form instrument. The toolkit is a comprehensive guide for those who may be considering developing their own short form and/or electronic patient experience survey program.	http://www.nrhi.org/uploads/fielding-guide-patient-experience-survey.pdf
Massachusetts Health Quality Partners, California Healthcare Performance Information System	The current state of patient experience surveying and future innovations	https://www.nrhi.org/uploads/lit-review-for-patient-experience-pilot.pdf
Price, R. A., Elliott, M. N., Zaslavsky, A. M., Hays, R. D., Lehrman, W. G., Rybowski, L., & Cleary, P. D. (2014).	Examining the role of patient experience surveys in measuring health care quality	Medical Care Research and Review, 71(5), 522-554.
Schlesinger, M., Grob, R., Shaller, D., Martino, S. C., Parker, A. M., Finucane, M. L., & Rybowski, L. (2015).	Taking patients' narratives about clinicians from anecdote to science	The New England Journal of Medicine, 373(7), 675-679.

The MHQP 2019 Patient Experience Survey

Questions and Answers

Note: This section answers general questions about the survey. Detailed information about statistical methods behind survey administration and scoring can be found in the Technical Appendix.

What is the MHQP Patient Experience Survey?

The 2019 MHQP Patient Experience Survey is based on the CG-CAHPS 3.0 survey developed by the National Committee for Quality Assurance (NCQA) and the Agency for Healthcare Research and Quality (AHRQ), and also includes Patient-Centered Medical Home (PCMH) survey items. The 2019 adult and child Patient Experience Surveys (PES) had 39 items and 54 items, respectively.

Prior to using these survey versions, MHQP used longer versions, based on CG-CAHPS 2.0. MHQP arrived at its shorter survey versions based on the following: multi-stakeholder input on what was needed, past years' experience regarding the performance of items and composites, requirements imposed by risk contracts, and Massachusetts PCMH certification requirements. MHQP's surveys are generally consistent with the CG-CAHPS 3.0 versions, but do have minor differences related to the make-up of survey composites; however, all composite questions in the CG-CAHPS 3.0 surveys are included in the MHQP short survey versions.

MHQP's objective in collecting and reporting results of the survey is to provide valid and reliable information to help primary care providers improve the quality of care they deliver to their patients and to help consumers take an active role in making informed decisions about their health care.

Why are patient experiences with care an important component of quality measurement?

In 2001, the Institute of Medicine report entitled *Crossing the Quality Chasm* first identified patient-centered care as one of the six essential pillars for an outstanding healthcare system. Patient experience surveys have been developed and validated for over 15 years and are now fundamental tools to evaluate patient-centered care and to help clinicians and organizations improve this dimension of health care quality. The measures of patients' care experiences that are available today provide detailed and specific information from patients about both clinical interactions (e.g., communication quality) and organizational features of care (e.g., access to care).

According to a 2014 study in *Medical Care Research and Review*, patient experience surveys are helping to drive improvement in patient-centered care and quality improvement. For example, some of the key characteristics measured in patient experience surveys, such as physician-patient communication, are found to be associated with health outcomes and adherence to recommended care.¹ Evidence from this study also indicated that physicians are becoming increasingly responsive to publicly reported surveys of patient experience and are subsequently motivated to make changes to improve and/or maintain performance. In addition, there are increasing financial incentives tied to these measurements.

¹ *Examining the Role of Patient Experience Surveys in Measuring Health Care Quality*; Medical Care Research and Review, 2014; Price RA, Elliott, M, Zaslavsky, A, Hays, R, Lehrman, W, Rybowski, L, Edgman-Levitan, S, Cleary, P.

How is MHQP's Patient Experience Survey funded and how do funders use results?

Since 2005, the statewide survey and public reporting have been supported by the state's major health plans: Blue Cross Blue Shield of Massachusetts, Harvard Pilgrim Health Care, and Tufts Health Plan. This year, eleven provider organizations, representing nearly half of the state's primary care physicians, added their financial support: Affiliated Pediatric Practices, Lowell General PHO, Mount Auburn Cambridge IPA, New England Quality Care Alliance, Newton Wellesley PHO, Northeast PHO, Partners HealthCare System Inc., Steward Healthcare System, The Pediatric Physicians' Organization at Children's Hospital Boston, Tri-county Medical Associates, and UMass Memorial Healthcare. Additionally, recognizing the value of patient experience information, which is part of the Standard Quality Measure Set (SQMS), the Center for Health Information and Analysis (CHIA), an independent Massachusetts state agency, has purchased PES results in recent years and incorporated them into CHIA's Annual Reports on the Performance of the Massachusetts Health Care System. Continued plan and provider organization support of MHQP's survey efforts has made Massachusetts a leader in this area of health quality measurement. Improving patient experience is now recognized as an essential component of system transformation to patient-centered care, and provider organizations increasingly use patient experience survey results to support quality improvement for performance and recognition programs.

What survey instrument was used?

The MHQP 2019 Patient Experience Survey Instrument for adults is a 39 question tool and the pediatric version has 54 items. These instruments are based on the CAHPS Patient-Centered Medical Home (PCMH) Survey, developed by the National Committee for Quality Assurance (NCQA) and the Agency for Health Care Research and Quality (AHRQ). The adult survey is designed to be completed by the adult patient of the named primary care provider. The pediatric survey is designed to be completed by the parent or guardian of the child patient of the named primary care provider.

How were the questions and summary measures on these survey instruments developed and validated?

The survey questions were developed and validated over a period of several years, and build upon work conducted over a 15-year period by a team of internationally recognized survey scientists in the health care field. The primary care survey's conceptual model corresponds to the Institute of Medicine's definition of primary care (1996).² Beginning in 2013, new survey questions were added to address measurement of the patient-centered home model of care. These questions are also included in the 2019 instrument. Each survey question has undergone cognitive testing to ensure that the wording is interpreted consistently and is clear to individuals across a wide continuum of English literacy skills. All survey questions and composite measures have undergone extensive psychometric testing to ensure reliability, validity, and data quality.

Why is MHQP collecting patient comments?

MHQP routinely captures free-text information in a systematic way. Specifically, we incorporate the beta version of the CAHPS Narrative Elicitation Protocol, which is a set of open-ended questions that prompts survey respondents to tell a clear and comprehensive story about their experience with a health care provider. The ultimate objective of obtaining patient comments is to provide additional, more textured information to help providers and practices understand what they can do to improve their care and/or continue with strategies that are positively impacting patients' experiences.

² *Primary Care: America's Health in a New Era*; National Academy Press, 1996; Donaldson, M. S., Yordy, K. D., Lohr, K. N., & Vanselow, N. A.

How was my practice selected to be included in the survey?

To be included in the survey, practices were required to have at least three eligible primary care providers of the same specialty (adult or pediatric), each having a panel size of at least 20 eligible patients across the participating health plans. Solo and dual practice sites were only included in the survey if they or their provider organization opted to fund the sampling of their patients. These solo and dual practices will not be included in MHQP's public reporting of the survey results. Practice site groupings are based on where providers were practicing as of December 31, 2018.

I did not receive results for certain practices and providers. Why?

For private reporting, results are included for practices with at least **16** respondents. This minimum threshold allows practices to receive some information from the survey, even when sample sizes are limited. For provider level reports, results are included for providers with at least **seven** respondents. There are no minimum thresholds for the reporting of medical groups or networks.

How many patients were selected to participate in the survey?

The survey was sent to over 190,000 adult patients and to the parents of over 114,000 children.

What was the overall response rate to the survey?

The overall response rate to the survey was 19.47%. This response rate is typical for recent large scale surveys of this kind and is similar to response rates achieved in other regional health care survey efforts. The response rate in 2018 was 19.16%. The decline in response rates for traditional survey administration via mailed paper-based instruments points to the need to develop valid electronic surveys. In our statewide provider level survey, the response rate for those who received an e-mail invitation and completed the survey was 29.25%. This figure is substantially higher than the response rate from our traditional mailed survey and underscores the importance of moving in new directions towards electronic surveying.

What is the value of using e-mails?

E-mails return higher response rates and are less costly than traditional mail surveys. In addition, emails enable respondents to take the survey online in non-English languages (i.e., Chinese, Portuguese, Russian, and Spanish) and provide comments to a series of open-ended questions.

Isn't it true that the most disgruntled patients are the ones who respond to surveys like this—so the results are not a fair representation of patient experiences?

Several decades of survey research show that the reverse is true. When a survey is administered using the protocol applied here (mailing/e-mail, with mail follow-up of non-respondents), patients with more favorable care experiences are more likely to respond than those who are disgruntled. In fact, patients who respond sooner to our survey consistently rate their provider with higher scores than patients who respond later. There is strong and consistent evidence that patients who have the most negative care experiences are *less* likely to respond, and are therefore under-represented in surveys of this type.

When will MHQP publicly report 2019 PES results?

MHQP will publicly report practice site results in the winter of 2020 on MHQP's website for healthcare consumers, www.healthcarecompassma.org. MHQP will allow all provider organizations across the state that did not contribute financially to this PES project to review their results shortly before the public report. Network, medical group, and individual provider results **will not** be publicly reported by MHQP.

Do you need a certain number of responses to be publicly reported on the website?

Yes, a practice site needs a minimum of 16 responses to be included.

Do you need a certain number of reportable composites in order to be included on the website?

Yes, you need at least two composites with a reliability of 0.70 or greater to be included; willingness to recommend is counted as one of the two composites.

How can I find out more about the MHQP Patient Experience Survey?

MHQP maintains an organizational website; www.mhqp.org, that includes updates on our Patient Experience initiatives. MHQP also maintains a consumer-friendly public reporting website, www.healthcarecompassma.org, that hosts the publicly reported survey results. Questions may be directed to Amy Stern, Sr. Project Manager for Patient Experience Surveys at astern@mhqp.org.

The MHQP 2019 Patient Experience Survey

Technical Appendix

Overview

MHQP's 2019 Patient Experience Survey was conducted in the spring of 2019 and included patients sampled from commercial adult and pediatric practice sites in MHQP's Massachusetts Provider Database (MPD) with at least three primary care providers (PCPs). The survey asked patients to report about their experiences with a particular named primary care provider and his or her practice.

Survey Instrument

The 2019 MHQP Patient Experience Survey is based on the CG-CAHPS 3.0 survey developed by the National Committee for Quality Assurance (NCQA) and the Agency for Healthcare Research and Quality (AHRQ), and also includes Patient-Centered Medical Home (PCMH) survey items. The 2019 adult and child Patient Experience Surveys (PES) had 39 items and 54 items, respectively.

Prior to using these survey versions, MHQP used longer versions, based on CG-CAHPS 2.0. MHQP arrived at its shorter survey versions based on the following: multi-stakeholder input on what was needed, past years' experience regarding the performance of items and composites, requirements imposed by risk contracts, and Massachusetts PCMH certification requirements. MHQP's surveys are generally consistent with the CG-CAHPS 3.0 versions, but do have minor differences related to the make-up of survey composites; however, all composite questions in the CG-CAHPS 3.0 surveys are included in the MHQP short survey versions.

Eligible Providers and Practice Sites

Over the past decade of its measurement work, MHQP has developed a Massachusetts Provider Database (MPD). The MPD is a unique data source that allows mapping of primary care providers, nurse practitioners, and physician assistants to the locations where they provide care. The MPD includes providers' organizational hierarchy and links to health plan data from Massachusetts' four largest commercial plans. Plans and provider organizations update MHQP's MPD information on an annual basis just prior to survey administration. Practice-site groupings are based on where a provider was practicing as of December 31, 2018. Changes in practice-site composition after this date are not reflected in the 2019 MHQP survey.

Physicians with primary care specialty designations of Internal Medicine, Pediatric, Family Medicine or General Medicine and practicing as primary care providers are eligible for the survey. Nurse practitioners and physician assistants practicing as primary care providers are also included. Providers must also have a panel size of at least 20 eligible patients across the participating health plans to be included in the survey.

Practices having at least three providers meeting the above eligibility criteria are included in the statewide survey. Once a practice has at least three PCPs eligible for the survey, any remaining PCPs having at least 20 patients are included in the practice-level sample. Using health plan claims visit data, each provider is classified as either "adult" or "child," based on

the age of the majority of his or her patients in the sample pool (child=ages 0-17; adult=ages 18 and older). Practice sites are also classified as follows:

- Practice sites are classified as "adult" if there are three or more providers, each with 20 or more eligible adult patients. Practice sites are classified as "child" if there are three or more providers, each with 20 or more eligible child patients. Practice sites are classified as "mixed" if they meet both sets of criteria (adult and child practice site) and the smaller population must be at least 25 percent of the total patient panel.
- Based on the number of adult and pediatric providers within each practice site, the composition of the survey sample(s) is drawn using the following criteria (applied in the order listed):
 1. If a practice site was classified as "mixed", two patient samples were drawn, consisting of adult and child patients; and
 2. If a practice site was either "adult" or "child" (but not mixed), a single survey sample was drawn consisting of adult or child.

Eligible Patients

The adult and pediatric patients surveyed for each provider were randomly drawn based on visit and membership data from the participating health plans. To be eligible for surveying, patients had to meet the following criteria:

- Current enrollment in one of the participating commercial health plans;
- Commercial member in an HMO, POS, or PPO health plan product;
- Age 18 and older to receive an adult survey;
- Age 17 or younger to receive a pediatric survey; and
- Patients of Massachusetts primary care providers.

MHQP used both visit data and health plan membership data to link patients to their primary care providers. The attribution methodology considers whether the patient received primary care services, and how often and recently the patient saw the primary care provider. Once patients had been assigned to providers, patients are aggregated across health plans at the provider level and then the practice level.

To ensure that only active patients of a provider were included in analysis and data reports, the survey instrument included some initial questions that served to confirm the following:

- The patient considered the provider named on the survey to be his or her primary care provider (adult survey) or his or her child's primary provider (pediatric survey); and
- The patient had at least one visit with that provider in the previous 12 months.

Responses of patients who reported that the named provider was not their (or their child's) primary provider and/or reported having no visits with that provider in the past 12 months were not included in the analysis completed for this report.

Survey Sampling

Sample sizes are designed to provide information at the *practice-site level*. Site-level surveys do not survey enough patients to reliably measure each provider's performance. For this reason, some provider organizations elected to purchase additional surveys to obtain provider-level results. Provider-level results are not publicly reported.

MHQP uses a variable sampling protocol based on the type (adult or pediatric) and size of the practice site being surveyed. Previous survey analyses have demonstrated that the individual provider is a larger source of variation than the practice site for most measures. Therefore, the number of patients required to obtain reliable and stable information about a practice site increases with the number of providers at a site.

At each practice site, starting samples were drawn by randomly sampling an equal number of patients from each provider's panel. A range of the targeted number of completed surveys and initial sample sizes are provided in the table below. Statistical analysis indicated that larger samples sizes were needed to obtain statistically reliable results for pediatric practices, in part because there is less variability in performance among pediatric practices.

Table 1 - Variable Sample Sizes

Number of Providers per site	Starting sample – Adult survey (assuming 20.6% mail response rate)	Starting sample – Pediatric survey (assuming 15.5% mail response rate)
3	277	607
4-9	331-496	723-1,084
10-13	515-564	1,130-1,239
14-19	578-627	1,265-1,375
20-28	636-680	1,394-1,491
29-55	685-734	1,497-1,633

Survey Administration

Core sample of patients for the core survey

This year, both e-mail and mail protocols were used in the core survey. The Center for the Study of Services (CSS), the survey vendor, mailed up to two surveys to each patient in the sample through non-profit mail. Non-respondents to the first survey mailing were sent a second survey package, identical to the first, five weeks after the initial mailing. The initial personalized mailing package included:

- A cover letter to the patient explaining the survey and its importance;
- A web address for the patient to access the survey on the internet; and
- A paper copy of the survey.

The sender of the mail surveys was identified as both the plan and MHQP on the outside of the envelope.

The cover letter was signed by MHQP's President & CEO and the signature of an official from the patient's health plan. The bottom of the letter also included a note in Spanish, Russian, Portuguese, and Chinese to inform sample members that they had the option to complete the survey online in one of the non-English languages. Patients were given the option of responding through the mail or going to a website and completing the survey online.

Sampled patients with e-mail addresses

Patients selected for the statewide level survey who had a valid e-mail address were sent up to three e-mail invitations to the survey. MHQP sent e-mail invitations with a link to the online survey to 14% of the sampled population. The response rate for those who received e-mails and completed the survey was 29.25% as compared with a response rate of 17.8% for mailed surveys. E-mails came from two provider organizations and one health plan. We plan to field future

surveys using technology and approaches that patients prefer while also allowing us to achieve valid results more cost effectively. We are working with provider organizations and health plans to implement these changes.

We conducted our standard random survey sampling of all eligible patients regardless of whether or not the patient had an e-mail address listed. The survey vendor then selected a random sample of these patients to be surveyed. This is the standard process we have used for sampling since 2005. If the patient who was randomly selected as part of the core sample had an e-mail address, we sent the survey via e-mail invitation to complete the survey online. Patients without an e-mail address were mailed the survey using our traditional two-wave mail protocol. Once the core sample was selected, we then randomly selected additional sample members for provider-level sampling. For this expanded sample, those with an e-mail address were sent an e-mail invitation to complete the survey online. Patients without an e-mail address were mailed the survey using our traditional two-wave mail protocol. Finally, patients who were sent the survey via e-mail, but did not respond, were sent a follow-up mailed survey. A subset of sampled patients was sent a second survey in the mail. This additional survey mailing was limited to providers with relatively low e-mail response rates.

Survey Reliability

All survey questions and summary measures have undergone extensive psychometric testing. A key criterion by which all survey measures were evaluated is their site level reliability. Site-level reliability is a metric that indicates how accurately a survey measure captures information about a particular practice site. Specifically, the site-level reliability coefficient indicates the extent to which patients of a given practice site report similarly about their experiences with that practice. In other words, site-level reliability indicates the consistency of the information provided by patients of a given practice site. Reliability scores range from 0.0 to 1.0 where:

- 1.0 signifies a measure for which every patient of the site reports an experience identical to every other patient in the practice; and
- 0.0 signifies a measure for which there is no consistency or commonality of experiences reported by patients of a given practice.

Targeted sample sizes were designed to achieve results with very high site-level reliability (0.70 or higher), in accordance with psychometric standards and principles. For all measures except those with very high overall performance, **site-level results must achieve a reliability threshold of 0.70 to be publicly reported.**

Performance Categories for Public Reporting

In order to allow Massachusetts practices to measure their performance against stable benchmarks from year to year, MHQP had used the same performance categories between 2013 and 2017. In 2018 we created new benchmarks in order to: 1) reflect changes to our survey instrument- i.e., we are using a shorter form survey instrument and some composites have changed slightly, and 2) update standards that are reflective of how practices are performing today. These benchmarks have not changed in 2019.

MHQP uses three methodologies to develop performance benchmarks depending on the amount of discrimination between practice scores:

- The first statistical methodology, known as the Beta-Binomial method, fits performance data to a theoretical model that has been shown to fit the distribution of performance scores well. In this model, the true distribution of scores (if they could be measured without error) would follow a normalized beta distribution. Classification is based on the calculated 20th and 80th percentiles of the beta distribution. The relative performance levels differentiate those practices that are truly higher or lower in performance than those practices in the middle range of performance with relatively low error rates. Measures whose classification is based on observed

relative performance percentiles include Adult Knowledge of Patient, Adult Behavioral Health, Adult/Pediatric Organizational Access, Pediatric Preventive Care, and Adult/Pediatric Office Staff.

- When it is difficult to properly classify most practices using the Beta-Binomial method, a second method of performance classification is used. The Hochberg method, named after the statistician who developed it, is the method MHQP uses for these measures. This method defines performance level by comparing practice performance with median performance. Practice scores are statistically evaluated to determine whether they are close enough to the median practice score to be in the middle category or significantly higher or lower than the median practice score, after accounting for multiple comparisons. Cut-points are defined by determining the exact point at which no practice is significantly lower than or higher than the median. Measures whose classification is based on the Hochberg method include Adult/Pediatric Communication, Adult/Pediatric Integration of Care, Pediatric Knowledge of Patient, Child Development, and Adult/Pediatric Self-Management Support.
- For measures with high overall performance, MHQP has moved both the middle and high range of performance into the high performance category, and set a benchmark judged by experts to be suitably excellent. All Hochberg measures are classified in this manner, with the exception of Adult and Pediatric Self-Management Support. Since overall performance is low for Self-Management, the middle and high performance categories are combined into the middle performance category.

Cut-points are set in the baseline year (originally 2013 and now 2018) and used in subsequent years in order to give practices a consistent achievement target. In subsequent years, measures based on Beta-Binomial methods are evaluated using the established cut-points if enough practices can be classified with 70% reliability. All other measures are classified using a combination of the established benchmarks and the Hochberg method. A practice is classified as below average if it is below the established low cut-point and is statistically significant using the multiple-comparison Hochberg method. Similarly, practices above the upper cut-point are classified as above average if they are significantly above the upper cut-point. Practices are classified as average if their scores lie between the two cut-points and they have enough patients to be reasonably sure that their scores lie in the middle range. All other practices lack a sufficient number of patients to be classified as described.

MHQP will publicly report practice site results for patient experience in the winter of 2020 on its website for healthcare consumers, www.healthcarecompassma.org.

Misclassification Risk and Buffer Zones

MHQP's public reporting establishes performance categories so that meaningful differences in performance among practices are represented. The number of performance categories is limited in order to highlight differences and reduce the chance that a practice could be misclassified in a category that is lower than it should be. For measures using observed relative performance benchmarks, MHQP also defines a buffer zone around each performance cut-point to further reduce the possibility of incorrectly categorizing a practice in a lower category. The Hochberg method protects against misclassification through a statistical process which reduces the chance of error. Therefore, measures using this method to set benchmarks do not require buffers.

“Top Performance” Designation

MHQP continues to identify practices achieving the highest level of performance in private and public reporting. Practices reaching this level of performance were identified using the Beta-Binomial method. Practices achieving “Highest Performance” designation are at or above the 99th percentile of the Beta-Binomial distribution for a given measure. The Beta-Binomial 99th percentile can be used to set achievable quality improvement goals for existing measures.

The highest performance designation point value for measures is provided below.

Table 2 – Highest Performance Designation Thresholds

	Measure	Score Needed for “Highest Performance” Designation
Adult	Communication	98.1
	Integration of Care	93.3
	Knowledge of Patient	95.5
	Adult Behavioral Health	88.9
	Organizational Access	94.1
	Self-Management Support	74.0
	Office Staff	94.9
Pediatric	Communication	99.0
	Knowledge of Patient	96.7
	Pediatric Preventive Care	87.3
	Child Development	86.6
	Organizational Access	97.3
	Self-Management Support	63.1
	Office Staff	97.6

Below are some frequently asked questions regarding statistical and methodological terms and analytic procedures used in scoring the data.

Sampling thresholds- what are they and how are they determined?

Table 3 – PES Sampling Thresholds

2019 PES Sampling Thresholds	
Provider-Level	<ul style="list-style-type: none"> • Ideal: 140 adult patients/provider and 140 pediatric patients/provider, however will include providers with 90 patients or more. • The provider organization can request samples <90 in their contract however, the provider being sampled must have at least 20 patients.
Practice-Level	<ul style="list-style-type: none"> • Practice must have 3+ providers. • Depending on how many providers practice at the site, the practice must meet the sample size threshold (See Table 1). • Any one provider must have at least 20 patients to be included as part of the 3+ practice site.
Practices Serving Both Adult and Pediatric Patients	<ul style="list-style-type: none"> • If a practice serves both adult and pediatric patients, at least 25% of their patients must be in the second patient population to be surveyed.

How were sampling thresholds for the Provider-Level Survey (PLS) Program determined?

After the practice level sample is drawn, the provider level sample is drawn to add respondents, which allows for calculation of meaningful provider level results. For example, for an adult practice with three providers, we target a practice level sample size of 277, about 92 patients per provider. If the three providers at that practice were included in the provider level sample, we would then draw an additional sample of 48 patients per provider so each provider would have a total sample size of 140.

How is the willingness to recommend correlation calculated for each composite measure?

Each composite measure is ranked on a 0-100 scale (see the practice's adjusted mean score for that composite). We use the Pearson correlation coefficient to determine if the score on willingness to recommend is significantly correlated with each composite. If performance on the composite measure is correlated with willingness to recommend at the 0.45 level, we consider that the measure influences patients' willingness to recommend the provider.

What is case-mix adjustment and why do you adjust for patient characteristics?

Certain patient characteristics that are not under the control of the provider, such as age and education, may be related to the patient's survey responses. For example, several studies have found that younger and more educated patients provide less positive evaluations of healthcare. If such differences occur, it is necessary to adjust for such respondent characteristics before comparing providers' results. The goal of adjusting for patient characteristics is to estimate how different providers' scores would be if they all provided care to comparable groups of patients. Case-mix adjustment allows for comparability of providers without different patient characteristics confounding the results. We provide adjusted results for public reporting and pay-for-performance financial incentive programs. Proper adjustment for differences in patient characteristics is critical to ensure fair comparisons across health care providers serving different patient populations.

What variables are used in case-mix adjustment and how are they selected?

In MHQP's results, scores have been case-mix adjusted so that patient characteristics match the overall characteristics of patients throughout the state as reflected in the statewide results, creating a fair comparison of performance. In developing our case-mix adjustment model, we sought important and statistically significant predictors of patients' reports of their experiences. Research has shown that practices with younger patients, more ethnic minority patients and patients living in more socioeconomically deprived areas are more likely to gain from case-mix adjustment. Age and race/ethnicity are the most influential adjusters. Results data are adjusted according to age, gender, education, race, language, health plan, and region.

Why are other variables not used in the case-mix adjustment equation?

Other variables are not used because they do not have a significant impact on results. For example, our research showed that e-mail had no case-mix adjustment utility. In addition, the length of time one has seen the provider and the number of visits one has had with the provider/practice has no case-mix adjustment utility as reported by the CAHPS team.

What is the adjusted mean score?

The adjusted mean score is the mean score of an item that has been case-mix adjusted by sociodemographic characteristics and patient-reported health status.

How are the survey responses scored?

All survey responses are coded to a 0 to 100 scale so that questions with different response options may be easily combined. Higher values indicate more positive responses.

For example, a question with four response options would be assigned the following values:

Response	Value
Always	= 100.00
Usually	= 66.67
Sometimes	= 33.33
Never	= 0.00

A question with two response options would be assigned the following values:

Response	Value
Yes	= 100.00
No	= 0.00

Composites are calculated as a simple average of the response values for each of the component questions. If fewer than half of the questions have valid responses for a given survey respondent, then the composite cannot be calculated and is considered missing.

For example, a composite that is comprised of five questions would be calculated as follows:

	Q1	Q2	Q3	Q4	Q5	Composite
Respondent A	66.67	66.67	0.00	.	.	44.45
Respondent B	100.00	66.07	100.00	100.00	100.00	93.21
Respondent C	100.00	100.00	100.00	66.67	66.67	86.67
Respondent D	33.33	.	.	66.67	.	.
Respondent E	66.67	100.00	50.00	100.00	66.67	76.67

Acknowledgments

MHQP would like to thank all the individuals whose expertise, hard work, and commitment to exacting standards of measurement and reporting contributed to bringing the 2019 Statewide Patient Experience Survey to fruition.

We are especially grateful to MHQP's Physician Council, Health Plan Council, and Consumer Health Council for their insights and advice on all of MHQP's quality measurement initiatives. Their guidance is invaluable in helping MHQP fulfill its goal of providing valid and actionable patient experience data to Massachusetts providers.

Further, we would like to acknowledge MHQP's Board of Directors for their foresight and willingness to undertake groundbreaking initiatives that improve the quality of care provided in Massachusetts.

We are very grateful for our partners from the participating health plans: Blue Cross Blue Shield of Massachusetts, Harvard Pilgrim Health Care, and Tufts Health Plan, for providing their time, expertise, and data resources, without which this project would not have been possible.

We are also grateful to the following provider organizations that partnered with us: Affiliated Pediatric Practices, Lowell General PHO, Mount Auburn Cambridge IPA, New England Quality Care Alliance, Newton Wellesley PHO, Northeast PHO, Partners HealthCare System Inc., Steward Healthcare System, The Pediatric Physicians' Organization at Children's Hospital Boston, Tri-county Medical Associates, and UMass Memorial Healthcare.

Special thanks and recognition go to Bill Rogers for his methodological leadership and expertise; Hong Chang for his statistical analysis; and Paul Kallaur, Jacqueline Cho, and Travis Gervais at the Center for the Study of Services for their professional management of survey administration.

Finally, we are indebted to the MHQP staff who worked so hard to develop this project and create this report – Amy Stern, Raji Rajan, Jim Courtemanche, Jason Leistikow, and Emily Berk.

About MHQP

Since 1995, MHQP has been leveraging its unique position as an independent coalition of key stakeholder groups (providers, payers and patients) in Massachusetts healthcare to help provider organizations, health plans, and policy makers improve the quality of patient care experiences throughout the state.

We do this by:

- 1. Measuring and publicly reporting non-biased, trusted and comparable patient experience data;**
- 2. Sharing tools, guidelines and best practices to help support improvement efforts; and**
- 3. Catalyzing collaboration to find breakthrough solutions to shared challenges.**

MHQP's work is driven by and organized around the principle that the challenges facing healthcare can only be solved through collaboration and innovation across key stakeholder groups – including patients, whom we believe are the most underutilized resources in the healthcare system. MHQP is the neutral body that brings these organizations and individuals together to find shared interests and solve problems that none can solve alone.

MHQP Board of Directors 2019

James Roosevelt, Jr., JD

Counsel
Verrill Dana LLP
Chair, Board of Directors

Barbara Spivak, MD

President and CEO
Mount Auburn Cambridge Independent Practice
Association
Vice Chair, Board of Directors
MHQP Physician Council

Lois Cornell, JD

Executive Vice President
Massachusetts Medical Society

Michelle Davis

Chief Marketing Officer
Wentworth Institute of Technology

Nancy Finn

Healthcare Journalist & Author
Communications Resources
MHQP Consumer Health Council

Eileen McAnneny

President
Massachusetts Taxpayers Foundation

John Moore, MD, PhD

Medical Director
Fitbit, Inc.

Lucilia Prates

Director, MA Senior Medicare Patrol Program
Elder Services of Merrimack Valley
Chair, MHQP Consumer Health Council

Barbra Rabson, MPH

President and CEO
Massachusetts Health Quality Partners
Ex-Officio Member

Meredith Rosenthal, PhD

Professor of Health Economics and Policy
Senior Associate Dean for Academic Affairs
Harvard T.H. Chan School of Public Health

Thomas Scornavacca, DO

Senior Medical Director
UMass Memorial Population Health
Chair, MHQP Physician Council

Richard B. Siegrist, Jr., MS, MBA, CPA

Director of Innovation and Entrepreneurship
Department of Health Policy and Management
Harvard T.H. Chan School of Public Health

Patricia Toro, MD, MPH

Associate Medical Director
Harvard Pilgrim Health Care
Chair, MHQP Health Plan Council

Jean Yang, MBA

President of Public Plans
Tufts Health Plan
MHQP Health Plan Council

MHQP Physician Council Members 2019

Thomas Scornavacca, DO*

Senior Medical Director
UMass Memorial Population Health
Chair, MHQP Physician Council

Kim Ariyabuddhiphongs, MD

Associate Chief Medical Officer – Southern Region
Beth Israel Lahey Performance Network (BILPN)

Nicholas Cordella, MD, MSc

Associate Director of Quality Strategy
Boston Medical Center

Christian Dankers, MD

Associate Chief Quality and Safety Officer
Partners HealthCare

Jatin Dave, MD

Chief Medical Officer
New England Quality Care Alliance

Steven Defossez, MD, EMHL, CPE

Vice President, Clinical Integration
Massachusetts Health & Hospital Association

David Elvin, MD

Senior Medical Director Accountable Care Organization
Cambridge Health Alliance

Jonathan Hatoun, MD, MPH, MS

Associate Medical Director
Pediatric Physicians' Organization at Children's

Thomas Isaac, MD, MBA, MPH

Medical Director of Quality within Clinical Performance
Excellence
Atrius Health

Deborah Kovacs, MD

Chief of Medicine
Action Medical Associates

Benjamin Kruskal, MD, PhD

Medical Director
Performance Excellence
New England Quality Care Alliance

Mark Mandell, MD

Chief Pediatric Medical Officer
Steward Health Care Network

Judith Melin, MA, MD

Associated Chief Quality & Safety Officer
Lahey Health

Yael R. Miller, MBA

Director of Practice Management & Medical Economics
Massachusetts Medical Society

Julita Mir, MD

Chief Medical Officer
Community Care Cooperative

James Moses, MD, MPH

Vice President of Quality and Safety,
Chief Quality Officer
Boston Medical Center

Charles Rollinger, MD, MPH

Senior Medical Director, Insurance Products
Steward Health Care Systems LLC

Barbara Spivak, MD*

President
Mount Auburn Cambridge IPA

** MHQP Board Representative*

MHQP Health Plan Council Members 2019

Patricia Toro, MD, MPH*

Associate Medical Director
Harvard Pilgrim Health Care
Chair, Health Plan Council

Linda Brenner

Director, Quality Measurement and Performance
Tufts Health Plan

Kenneth Duckworth, MD

Medical Director, Behavioral Health
Blue Cross Blue Shield of MA

Beth Foley, RN, M.Ed

Vice President, Quality and Clinical Operations
Fallon Health

Carolyn Langer, MD

Chief Medical Officer
Fallon Health

Angela Li, MPH

Director, Performance
Measurement & Improvement
Blue Cross Blue Shield of MA

Jill Morrow-Gorton, MD, MBA

Acting Chief Medical Director
Commonwealth Medicine

Lisa Scarfo, MD

Medical Director
Neighborhood Health Plan

Linda Shaughnessy, MBA

Director, MassHealth Quality Office
MassHealth

Jean Yang*

President of Public Plans
Tufts Health Plan

**MHQP Board Representative*

MHQP Consumer Health Council 2019

Lucilia Prates*

Director, MA Senior Medicare Patrol Program
Elder Services of Merrimack Valley
Chair, MHQP Consumer Health Council

Judy Danielson

Health Market Strategy Consultant

Nancy Finn*

Healthcare Journalist & Author
Communications Resources

Denice Garrett

Coordinator for Clinical Billing and Data Operations
Action for Boston Community Development, Inc.

Cyrus Hopkins

Retired

Rosalind Joffe

President
CICoach.com

Jim Lomastro

Retired

Nancy Michaels

Healthcare and Inspirational Keynote Speaker

Pamela Ressler, RN, MS

Founder, Stress Resources
Adjunct Clinical Assistant Professor at
Tufts University School of Medicine

Tami Rich

ePatient / Family Leader
Healthcare QI / Transformation Coach

Rochelle Shokoti

Television Program Host and Producer, "BridginGaps"
Cambridge Community Television

Bonnie Thompson

Family-Centered Child Health Care Advocate

**MHQP Board Representative*