STATE OF MARYLAND EXECUTIVE SUMMARY REPORT
FOR
2018 RARE AND EXPENSIVE CASE MANAGEMENT PROGRAM SURVEY

Prepared for:

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Background and Purpose

Maryland's Rare and Expensive Case Management (REM) Program is a case managed fee for service alternative for HealthChoice Managed Care Organization (MCO) participants with specified rare and expensive medical conditions. REM program participants are assigned a case manager. A REM case manager is either a registered nurse or a licensed social worker and has experience and knowledge to assist with the health care and services available to participant. The REM survey is a new survey and was administered for the first time in 2018. The survey is designed to measure satisfaction of REM participants with the services received through the REM program, interactions with and assistance received from the member's case manager. The survey was conducted separately on adult and child populations.

CSS administered both versions of the of the 2018 REM survey on behalf of Maryland Department of Health between March 1, 2018 and May 25, 2018. The final survey sample for adult survey included 1,474 members. 612 adult members completed the survey, resulting in the adjusted response rate of 43.22%. The final survey sample for child survey included 2,628 members. 969 child members completed the survey, resulting in the adjusted response rate of 37.72%.

Results are based on the rates of members answering:
- *8, 9, or 10* for ratings;
- *Usually* or *Always* for questions with response scale of Never; Sometimes; Usually; Always;
- *Yes, Definitely* for questions with response scale of Yes, Definitely; Yes, Sometimes; No and the response is the most favorable response to the question. In the following 2 questions, summary rates are calculated based on the rates of members answering *No* and the responses scale is Yes, Definitely; Yes, Sometimes; No.
    - Q3. Were there any service interruptions as you moved from your former HealthChoice MCO to the REM program?
    - Q19. Do you find it burdensome to have a REM case manager?

Adult Summary Rates of Ratings

Question	Summary Rate
Rating of REM case manager	84.5%
Rating of Healthcare	78.5%
Rating of REM program	84.3%

Child Summary Rates of Ratings

Question	Summary Rate
Rating of REM case manager	85.2%
Rating of Healthcare	86.6%
Rating of REM program	90.3%

Survey Administration Protocol

CSS administered the REM Survey using a mixed (mail with telephone follow-up) methodology. Survey protocol include two questionnaire mailings, each followed by a reminder postcard. Non-respondents to the mail survey are contacted by telephone.
The standard data collection protocol consisted of the following milestones:

- An initial questionnaire with cover letter, which was mailed on March 1, 2018;

- An initial reminder/thank-you postcard, which was mailed on March 6, 2018;

- A replacement questionnaire with cover letter, which was mailed on April 8, 2018;

- An additional reminder/thank-you postcard, which was mailed on April 13, 2018 and

- Telephone outreach began on April 24, 2018

- Data collection closed on May 25, 2018.

Members were given the option to request Spanish materials by mail or complete the survey in Spanish on the phone.

The REM sample frame was de-duplicated such that only 1 member per household is selected for either the adult survey or the child survey. CSS used standardized address to de-duplicate the population file. All eligible members after the de-duplication process were selected for the sample.

The final survey sample for the adult survey included 1,474 members. The final survey sample for the child survey included 2,628 members.

Response Rate

Among all the members of the adult sample who met eligibility criteria, 621 completed the survey, resulting in the adjusted response rate of 43.22 percent. Among all the members of the child sample who met eligibility criteria, 969 completed the survey, resulting in the adjusted response rate of 37.72 percent. Additional detail of sample member status at the of data collection is provided below.

EXHIBIT 1. ADULT DISPOSITIONS AND RESPONSE RATE

	Number	% Initial Sample
Initital Sample	1474	
Disposition		
Complete and Eligible - Mail	580	39.35%
Complete and Eligible - Phone	41	2.78%
Complete and Eligible - Total	621	42.13%
Does not meet Eligible criteria	9	0.61%
Deceased	2	0.14%
Language Barrier	6	0.41%
Mentally or physically incapacitated	20	1.36%
Refusals	24	1.63%
Nonresponse after maximum attempts	792	53.73%
Adjusted Response Rate *		43.22%

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

ADULT MODE AND LANGUAGE OF COMPLETE SURVEYS

	Language	
Mode	English	Spanish
Mail	580	0
Phone	40	1

EXHIBIT 2. CHILD DISPOSITIONS AND RESPONSE RATE

	Number	% Initial Sample
Initial Sample	2,628	
Disposition		
Complete and Eligible - Mail	786	29.91%
Complete and Eligible - Phone	183	6.96%
Complete and Eligible - Total	969	36.87%
Does not meet Eligible criteria	10	0.38%
Deceased	0	0.00%
Language Barrier	48	1.83%
Mentally or physically incapacitated	1	0.04%
Refusals	90	3.42%
Nonresponse after maximum attempts	1510	57.46%
Adjusted Response Rate *		37.72%

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

CHILD MODE AND LANGUAGE OF COMPLETE SURVEYS

| Mode | Language | |
	English	Spanish
Mail	777	9
Phone	166	17

Survey Results and Analysis

Summary rates are calculated as proportion of respondents who answered the question favorably (such as *Usually/Always*, or *Yes, definitely*). For question where *No* is the most favorable response, summary rates are calculated as proportion of respondents who answered *No* to the question. The denominator used for calculation of proportion is the number of valid responses to the question and is displayed in column N in the summary of survey results tables below. Results of any question where the denominator is low should be interpreted with caution.

REM Program		Adult		Child	
Question	Summary Rate Responses	N	Rate	N	Rate
Q3. Service interruptions when moving to REM program	No	39	71.8%	67	71.6%
Q22. New REM case manager assigned as quickly as needed	Yes, definitely	4	50.0%	15	46.7%
Q25. Satisfaction with handling of complaints about REM case manager	Usually/Always	1	0.0%	10	60.0%
Q50. Satisfaction with handling of REM program complaints	Usually/Always	4	0.0%	5	80.0%
Q51. Rating of REM program	8, 9 or 10	593	84.3%	924	90.3%

REM Case Manager		Adult		Child	
Question	Summary Rate Responses	N	Rate	N	Rate
Q5. REM case manager called often as I wanted	Yes, definitely	589	89.1%	915	89.7%
Q6. REM case manager visited often as I wanted	Yes, definitely	587	88.8%	911	88.5%
Q7. Able to contact REM case manager as soon as needed	Usually /Always	581	90.7%	908	88.8%
Q8. REM case manager spent enough time with me	Usually /Always	579	88.6%	904	84.0%
Q9. REM case manager answered questions to satisfaction	Usually /Always	580	92.8%	908	92.4%
Q10. REM case manager respected culture/racial/religious/ethnic background	Yes, definitely	578	96.7%	902	95.9%
Q11. REM case manager provided emotional support	Usually/Always	566	86.0%	891	88.1%
Q13. Satisfied with help in finding Primary Care Provider	Yes, definitely	77	79.2%	106	81.1%
Q14. REM case manager gave information about healthcare services	Usually/Always	577	79.0%	899	78.2%
Q15. REM case manager gave information about community resources	Usually/Always	572	69.4%	891	72.4%
Q16. REM case manager explanations easy to understand	Usually/Always	580	92.6%	903	92.5%
Q17. Helpful to have REM case manager	Yes, definitely	581	83.0%	903	81.1%
Q19. Burdensome to have REM case manager	No	567	92.4%	884	87.2%
Q26. Rating of REM case manager	8, 9 or 10	579	84.5%	904	85.2%

Healthcare		Adult		Child	
Question	Summary Rate Responses	N	Rate	N	Rate
Q27. Got routine care appointment as soon as needed	Usually/Always	554	94.0%	890	93.7%
Q28. PCP has understanding of my special needs	Yes, definitely	600	80.8%	939	87.4%
Q30. Ease of getting specialists appts as soon as needed	Usually/Always	382	83.2%	681	84.9%
Q31. Specialists I saw have understanding of my special needs	Yes, definitely	366	84.4%	670	86.1%
Q32. Able to reach doctors by telephone when needed	Usually/Always	569	87.0%	881	85.9%
Q33. Ease of getting second opinions as soon as needed	Usually/Always	240	72.1%	398	73.6%
Q34. Saw providers within 15 minutes of appointment time	Usually/Always	589	57.6%	929	61.4%
Q35. Ease of getting appropriate inpatient hospital services	Usually/Always	235	79.1%	450	83.1%
Q36. Ease of getting dental services	Usually/Always	437	79.6%	760	86.7%
Q37. Ease of emergency room services	Usually/Always	231	80.5%	459	88.2%
Q38. Ease of getting durable medical equipment	Usually/Always	359	62.4%	483	67.1%
Q39. Ease of getting disposable medical equipment	Usually/Always	446	91.5%	579	88.1%
Q40. Ease of getting adaptive equipment	Usually/Always	156	62.8%	290	65.5%
Q41. Ease of getting nursing home services	Usually/Always	276	77.5%	301	67.1%
Q42. Ease of getting home health aide services	Usually/Always	271	77.1%	276	63.8%
Q43. Ease of getting prescription medicines	Usually/Always	568	94.0%	848	91.7%
Q44. Ease of getting therapy services	Usually/Always	250	67.6%	612	81.5%
Q45. Ease of getting laboratory services	Usually/Always	391	93.6%	592	90.7%
Q46. Ease of getting nutritional services	Usually/Always	286	87.8%	493	85.4%
Q47. Ease of getting transportation services	Usually/Always	198	68.7%	231	49.4%
Q48. Rating of healthcare	8, 9 or 10	591	78.5%	924	86.6%

Correlation Analysis

Correlation analysis is a tool for identifying program attributes that are strengths and areas in need of improvement. Correlation analysis was performed for the following items:

- Rating of REM case manager

- Rating of Healthcare

- Rating of the REM program

The attribute importance (correlation) and attribute performance (score) are plotted in a graph and the graph is divided into four quadrants to identify the attributes that are strengths and attributes that are in need of improvement. The four quadrants are:

- LEVERAGE (high importance, high performance)

- IMPROVE (high importance, low performance)

- MAINTAIN (low importance, high performance)

- MONITOR (low importance, low performance)

Adult Results:

For the Adult survey, 3 attributes were identified in the IMPROVE quadrant and 4 attributes were identified in the LEVERAGE quadrant for the rating of REM case manager.

ATTRIBUTES IN THE IMPROVE AND MAINTAIN QUADRANT FOR RATING OF REM CASE MANAGER

IMPROVE	LEVERAGE
• Satisfaction with help in finding Primary Care Provider • REM case manager gave information about healthcare services • REM case manager gave information about community resources	• REM case manager spent enough time with me • REM case manager answered questions to satisfaction • REM case manager provided emotional support • REM case manager explanations easy to understand

5 attributes were identified in the IMPROVE quadrant and 6 attributes were identified in the LEVERAGE quadrant for the rating of healthcare.

ATTRIBUTES IN THE IMPROVE AND MAINTAIN QUADRANT FOR RATING OF HEALTHCARE

IMPROVE	LEVERAGE
• Ease of getting second opinions as soon as needed • Saw providers within 15 minutes of appointment time • Ease of getting adaptive equipment • Ease of getting therapy services • Ease of getting transportation services	• Primary Care Provider has understanding of my special needs • Able to reach doctors by telephone when needed • Ease of getting appropriate inpatient hospital services • Ease of getting nursing home services • Ease of getting prescription medicines • Ease of getting nutritional services

2 attributes were identified in the IMPROVE quadrant and 12 attributes were identified in the LEVERAGE quadrant for the rating of REM program.

ATTRIBUTES IN THE IMPROVE AND MAINTAIN QUADRANT FOR RATING OF REM PROGRAM

IMPROVE	LEVERAGE
• Ease of getting adaptive equipment • REM case manager gave information about community resources	• REM case manager called often as I wanted • REM case manager visited often as I wanted • REM case manager spent enough time with me • REM case manager answered questions to satisfaction • REM case manager provided emotional support • Satisfied with help in finding Primary Care Provider • REM case manager gave information about healthcare services • REM case manager explanations easy to understand • Rating of REM case manager • Ease of getting nursing home services • Ease of getting home health aide services • Rating of healthcare

Based on the correlation analysis of the 3 ratings summary rates, '*REM case manager gave information about community resources*' attribute was found to be in the IMPROVE quadrant for both rating of REM case manager and rating of REM program quadrant maps. '*Ease of getting adaptive equipment*' attribute was found to in the IMPROVE quadrant for rating of healthcare and rating of REM program quadrant maps. These attributes should be prioritized in order to improve the ratings measures for the Adult REM population.

Child Results:

For the child survey, 2 attributes were identified in the IMPROVE quadrant and 6 attributes were identified in the LEVERAGE quadrant for the rating of REM case manager.

ATTRIBUTES IN THE IMPROVE AND MAINTAIN QUADRANT FOR RATING OF REM CASE MANAGER

IMPROVE	LEVERAGE
• REM case manager gave information about healthcare services • REM case manager gave information about community resources	• REM case manager called often as I wanted • REM case manager spent enough time with me • REM case manager answered questions to satisfaction • REM case manager provided emotional support • Satisfaction with help in finding Primary Care Provider • REM case manager explanations easy to understand

5 attributes were identified in the IMPROVE quadrant and 2 attributes were identified in the LEVERAGE quadrant for the rating of healthcare.

ATTRIBUTES IN THE IMPROVE AND MAINTAIN QUADRANT FOR RATING OF HEALTHCARE

IMPROVE	LEVERAGE
• Ease of getting second opinions as soon as needed • Ease of getting durable medical equipment • Ease of getting adaptive equipment • Ease of getting nursing home services • Ease of getting home health aide services	• Ease of getting specialists appointments as soon as needed • Ease of getting dental services

4 attributes were identified in the IMPROVE quadrant and 11 attributes were identified in the LEVERAGE quadrant for the rating of REM program.

ATTRIBUTES IN THE IMPROVE AND MAINTAIN QUADRANT FOR RATING OF REM PROGRAM

IMPROVE	LEVERAGE
• REM case manager gave information about community resources • Ease of getting adaptive equipment • Ease of getting nursing home services • Ease of getting home health aide services	• REM case manager called often as I wanted • REM case manager visited often as I wanted • Able to contact REM case manager as soon as needed • REM case manager spent enough time with me • REM case manager answered questions to satisfaction • REM case manager provided emotional support • Satisfied with help in finding Primary Care Provider • REM case manager gave information about healthcare services • REM case manager explanations easy to understand • Rating of REM case manager • Rating of healthcare

Based on the correlation analysis of the 3 ratings summary rates, 'REM case manager gave information about community resources' attribute was found to be in the IMPROVE quadrant for both rating of REM case manager and rating of REM program quadrant maps. 'Ease of getting adaptive equipment', 'Ease of getting nursing home services', 'Ease of getting home health aide services' attributes were found to be in the IMPROVE quadrant for rating of healthcare and rating of REM program quadrant maps. These attributes should be prioritized in order to improve the ratings measures for the child population.

Glossary of Terms

Attributes	Areas of health plan performance and member experience assessed with the CAHPS survey
Confidence Level	A confidence level is associated with tests of statistical significance of observed differences in survey scores. It is expressed as a percentage and represents how often the observed difference (e.g., between the plan's current-year rate and the relevant benchmark rate) is real and not simply due to chance. A 95% confidence level associated with a statistical test means that if repeated samples were surveyed, in 95 out of 100 samples the observed measure score would be truly different from the comparison score.
Correlation	A degree of association between two variables, or attributes, typically measured by the *Pearson correlation coefficient*. The coefficient value of 1 indicates a strong positive relationship; -1 indicates a strong negative relationship; zero indicates no relationship at all.
Denominator (*N*, or Usable Responses)	Number of valid (appropriately answered) responses available to calculate a measure result. Examples of inappropriately answered questions include ambiguously marked answers, multiple marks when a single answer choice is expected, and responses that violate survey skip patterns. The denominator for an individual question is the total number of valid responses to that question. The denominator for a composite is the average number of responses across all questions in the composite.
Disposition	The final status given to a member record in the survey sample at the end of the study (e.g., completed survey, refusal, non-response, etc.). See *Response Rate*.
Question Summary Rate	Question Summary Rates (QSRs) express the proportion of respondents selecting the response option(s) of interest (typically representing the most favorable outcome(s) from a given question on the survey). Many survey items use a *Never*, *Sometimes*, *Usually*, or *Always* response scale, with *Always* being the most favorable outcome. Results are typically reported as the proportion of members selecting *Usually* or *Always*.
Response Rate	Survey response rate is calculated by NCQA using the following formula:

$$\text{Response Rate} = \frac{\text{Complete and Eligible Surveys}}{[\text{Complete and Eligible + Incomplete (but Eligible) + Refusal + Nonresponse after maximum attempts}]}$$

Sample size	Number of members selected for the survey.

Statistically Significant Difference	When survey results are calculated based on sample data and compared to a benchmark score (e.g., the NCQA National Average rate, the CSS Book-of-Business average, or the plan's own prior-year rate), the question is whether the observed difference is real or due to chance. A difference is said to be statistically significant at a given confidence level (e.g., 95%) if it has a 95% chance of being true.