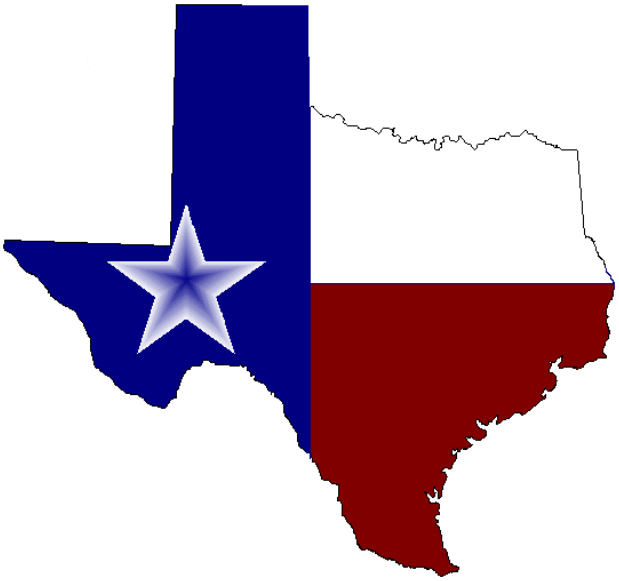
COMPARING TEXAS HMOs 2015

HEALTH PLAN QUALITY FROM THE CONSUMER'S POINT OF VIEW



All Regions Included:

Central Texas
East Texas
Gulf Coast Texas
North Texas
Panhandle/Plains Texas
South Texas
West Texas

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Comparing Texas HMOs

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1. The CAHPS® 5.0H Survey is a part of the Healthcare Effectiveness Data and Information Set (HEDIS), which is compiled by the National Committee for Quality Assurance (NCQA). NCQA is a non-profit organization dedicated to improving healthcare quality. The CAHPS® 5.0H Surveys are designed to capture accurate and reliable information from consumers about their experience with healthcare. More information about the survey is provided on pages 2 and 114.

About the Report

The Office of Public Insurance Counsel (OPIC) is an independent state agency that advocates on behalf of insurance consumers as a class in the state of Texas. In 1997, the 75th Texas Legislature directed OPIC to issue annual reports comparing Health Maintenance Organizations (HMOs) in the state of Texas.

Comparing Texas HMOs 2015 reflects the experience of Texans enrolled in HMOs during 2014. Section One of the report offers background information on the report, information on consumer rights, and information on types of health plans. Section Two provides the results of the Consumer Assessment of Healthcare Providers and Systems, Version 5.0H (CAHPS® 5.0H), by service area. Section Three contains information on HMO complaints, appeals, and independent review organizations. Section Four provides HMO market share data and financial information, HMO customer service contact information, additional sources of healthcare information, and information on the survey.

About the Survey

The CAHPS® 5.0H survey was performed by independent vendors certified by the National Committee for Quality Assurance (NCQA), a private, non-profit organization.

The survey comprises the consumer satisfaction measure for the Healthcare Effectiveness Data and Information Set (HEDIS®). Texas law requires HMOs to submit HEDIS® measures—including consumer satisfaction data—on an annual basis.

The survey data was compiled from answers from 4,550 adults enrolled in commercial health plans across the state of Texas. The surveyors mailed questionnaires to approximately 21,500 plan members eligible to participate and followed up by telephone with those who did not respond. Participants answered questions about their satisfaction with the healthcare services they received in the previous twelve months.

The report does not include data for Medicare, Medicaid, or Employee Retirement Income Security Act of 1974 (ERISA) plans. ERISA plans include government and self-funded plans. Pages 117-119 contain contact information regarding Medicare, Medicaid, and ERISA plans.

About HMOs

Health Maintenance Organizations (HMOs) are managed care plans that provide healthcare services to members through networks of doctors, hospitals, and other healthcare providers. An HMO member must select a primary care physician who oversees medical care and provides referrals to specialists. HMOs require members to pay a set copayment for covered services within the network. The table on page 5 provides more information on HMOs and compares HMOs to other types of health plans.

How to Use the Report

Choosing an HMO can feel overwhelming. When you select an HMO, you are not only choosing health plan benefits, but also the network of doctors, hospitals, and other providers who deliver your care as well as the administrators who review and approve recommended care. You can obtain information on service area, benefits, cost, and available providers directly from the HMOs. However, consumer satisfaction information can be difficult to find. *Comparing Texas HMOs 2015* provides this information for you.

Choosing an HMO

When you choose an HMO, you will want to make an apples-to-apples comparison of the plans. This section lists a few points of comparison to consider. This is not an exhaustive list, but it is intended to help you break down a complicated decision into smaller pieces. You may use the table below to take notes on the HMOs you consider.

- *Service-Area Availability*
  HMOs cover specific service areas. Review the HMOs' membership information to find one with a service area close to where you live or work.

- *Benefits*
  Individuals utilize different services based on medical conditions, age, and family needs. Review HMO benefit information for coverage of medications or services that you use. You may need to contact the plans to get all your questions answered.

- *Affordability*
  Your overall healthcare costs will include your premiums as well as other out-of-pocket costs. To compare affordability, estimate your annual healthcare needs and calculate the total out-of-pocket cost you would pay with each HMO.

- *Provider Availability*
  Some consumers find it important to receive care from specific doctors or hospitals. Review provider directories for information on in-network providers.

- *Consumer Satisfaction*
  The survey data in this report provide an aggregate look at consumer satisfaction for members currently enrolled in HMOs. Review the information in this report to find out how current plan enrollees rate the plan quality of the HMOs you are considering.

HMO	Service Area Availability	Benefits	Affordability	Provider Availability	Consumer Satisfaction

Your Rights as a Consumer

An HMO must provide requested information regarding the terms and conditions of the plan including:

- covered services
- exclusions and limitations
- prior authorization requirements
- continuity of treatment
- approved prescription drugs
- complaint resolution
- the HMO's toll-free telephone number

You have the right to certain consumer protections under federal and state law.

Under Federal Law:

- Health plans must provide a required set of preventive services to enrollees, waiving applicable in-network deductibles, copays, and coinsurance.
- Health plans may not require referrals for in-network pediatric and OB-GYN care.
- Health plans may not require prior approval for emergency care.
- Health plans that offer dependent coverage must allow adult children who lack access to employer-sponsored coverage the option of remaining on a parent's plan up to age 26.
- Health plans may not deny coverage or apply pre-existing condition exclusions to coverage.
- Health plans may not impose lifetime dollar limits.
- Health plans may not rescind health insurance coverage.
- Consumers have a right to internal and external appeals of claim and coverage denials.

Under Texas State Law:

- Health plans must provide access to specialist care and prescription drugs.
- Health plans must provide access to regular physical examinations.
- Health plans must provide emergency care, including care at out-of-network hospitals.
- Health plans must provide continuity of care when your doctor leaves the network.
- Health plans must provide a procedure for complaints, appeals, and independent review of adverse determinations.
- Health plans may not provide financial rewards to doctors for withholding necessary care.
- Health plans must allow members to change primary care physicians at least four times per year.
- Health plans may not prohibit doctors from discussing treatment options with patients.
- Health plans must provide covered healthcare services within a certain distance of a consumer's home.
- Consumers have the right to request mediation for certain out-of-network claims.
- Consumers may take legal action against a non-ERISA HMO plan for harm caused by its treatment decisions.
- Providers may not bill patients for covered services if the HMO fails to pay.
- Hospitals and doctors must provide an itemized statement of billed services and/or an estimate of charges upon request.

The Texas Department of Insurance publishes a brochure describing your rights entitled "Health Maintenance Organizations." You may access this document on TDI's website at http://www.tdi.texas.gov/pubs/consumer/cb069.html or by calling 1-800-252-3439 to request a copy.

Types of Health Plans

	HMO *Health Maintenance Organization*	PPO *Preferred Provider Organization*	EPO *Exclusive Provider Organization*	HMO/POS *Health Maintenance Organization with Point-of-Service Option*	Traditional Insurance *Fee-for-Service*
Type of Network	**Closed** You must use in-network doctors, hospitals, and specialists.	**Open** You may use in-network doctors, hospitals, and specialists or go outside the network.	**Closed** You must use in-network doctors, hospitals, and specialists.	**Open** You may use in-network doctors, hospitals, and specialists or go outside the network.	**No Network** You may use any doctor, hospital, or specialist you choose.
Limits on your choice of doctors	HMO plans typically require you to choose a primary care physician (PCP) from the HMO's network. With some exceptions, you must obtain a referral from your PCP before seeing other doctors in the network.	Many PPOs permit you to see any doctor in the network without a referral. However, some PPOs do require you to choose a PCP and obtain a referral before seeing other doctors in the PPO's network. Verify referral requirements with the PPO before making an appointment.	EPOs typically permit you to see any network provider without a referral. Verify referral requirements with the EPO before making an appointment.	An HMO/POS will typically require you to choose a PCP and obtain a referral from that doctor before making an appointment with other doctors in the network.	No limitations.
Incentives to use network doctors	Except in an emergency, an HMO will not cover services provided by out-of-network providers.	The PPO will typically reimburse a higher percentage of the cost of your healthcare services if you use in-network providers.	Except in limited circumstances (such as an emergency), an EPO will not cover services provided by out-of-network providers.	An HMO/POS will typically reimburse a higher percentage of the cost of your healthcare services if you use in-network providers.	Not applicable.
Payment for services	When you access the HMO network, you will pay designated copays for covered services. Typically, you will not pay a deductible or coinsurance. An in-network provider cannot bill you for any remaining balance after you meet your copay.	When you access the PPO network, you typically pay a copay for covered services. You may also pay a percentage of the overall cost of the service. When you use an out-of-network provider, you will be responsible for your deductible, coinsurance, and any remaining balance charged by the healthcare provider.	When you access the EPO network, you may pay copays, coinsurance, or deductibles for covered services. When you use an out-of-network provider, you will typically pay the entire cost of the service.	When you access the HMO network, you will pay designated copays. When you use an out-of-network provider, you will be responsible for your deductible, coinsurance, and any remaining balance charged by the healthcare provider.	Fee-for-Service insurance plans partially pay for the medical services you receive. You will be responsible for coinsurance plus any remaining balance charged by the healthcare provider.

Section 2:
Survey Results

CAHPS® 5.0H Survey Results for

Central Texas Plans

The counties included in the Central Texas area are:

Bastrop	Burnet	Grimes	Leon	Mills
Bell	Caldwell	Hamilton	Limestone	Robertson
Blanco	Coryell	Hays	Llano	San Saba
Bosque	Falls	Hill	Madison	Travis
Brazos	Fayette	Lampasas	McLennan	Washington
Burleson	Freestone	Lee	Milam	Williamson

This section features survey results for plans that serve the Central Texas area. It includes HMOs with a service area that extends into at least one county in the region. The city/area shown after the name indicates the primary area of service. Contact plans directly for details on specific service areas.

An HMO may be exempt from participation in the survey due to low enrollment or limited participation in the Texas commercial HMO market during 2014.

NCQA requires 100 responses to report survey results. OPIC has opted to report data based on 30 or more responses to provide consumers with greater access to data to compare HMOs.

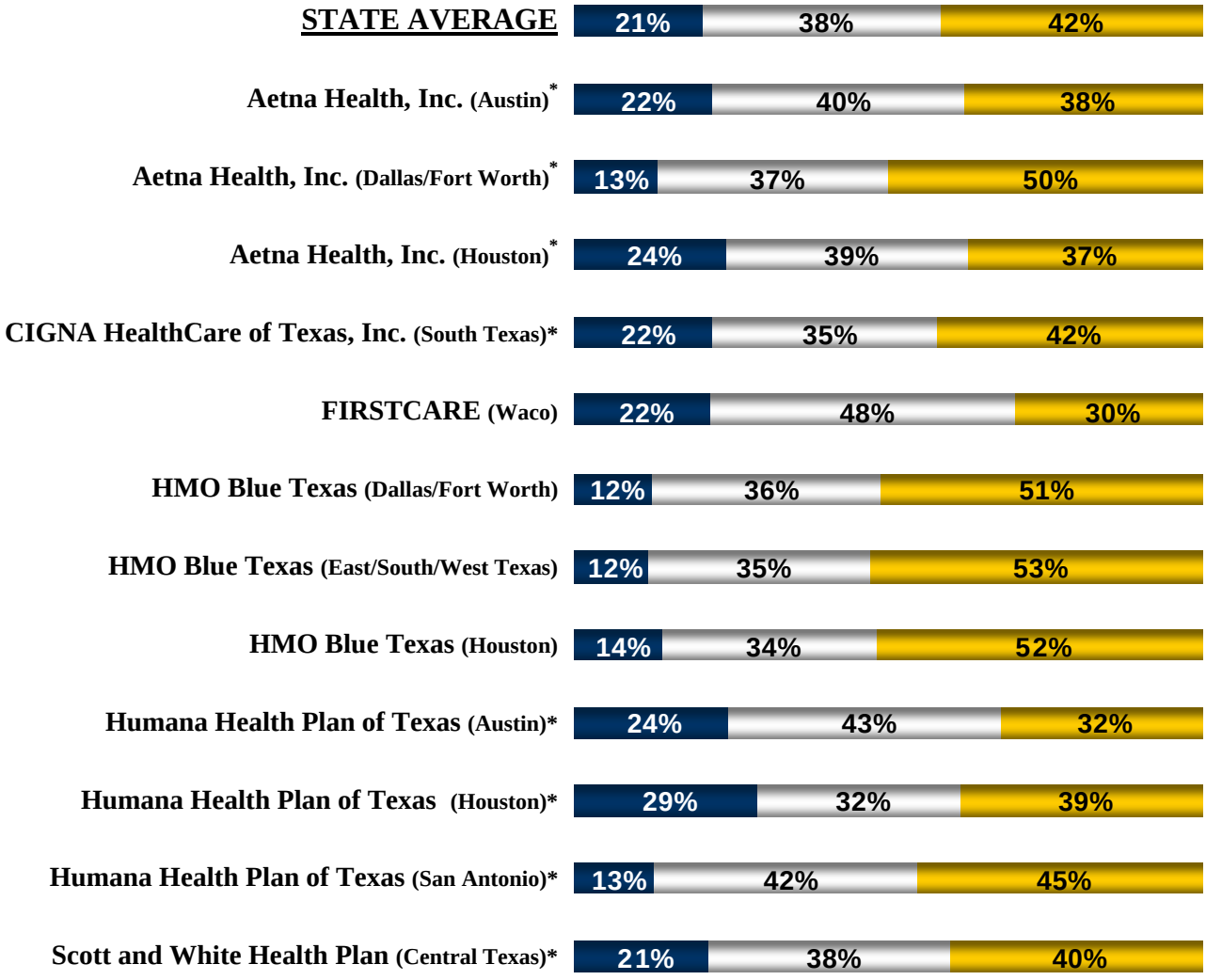
How people rated their health plan

CAHPS® 5.0H Survey Results

Percentage who rated their plan **6 or lower**	Percentage who rated their plan **7 or 8**	Percentage who rated their plan **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their health plan** on a scale from:

0 = "worst health plan possible" to **10** = "best health plan possible"



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

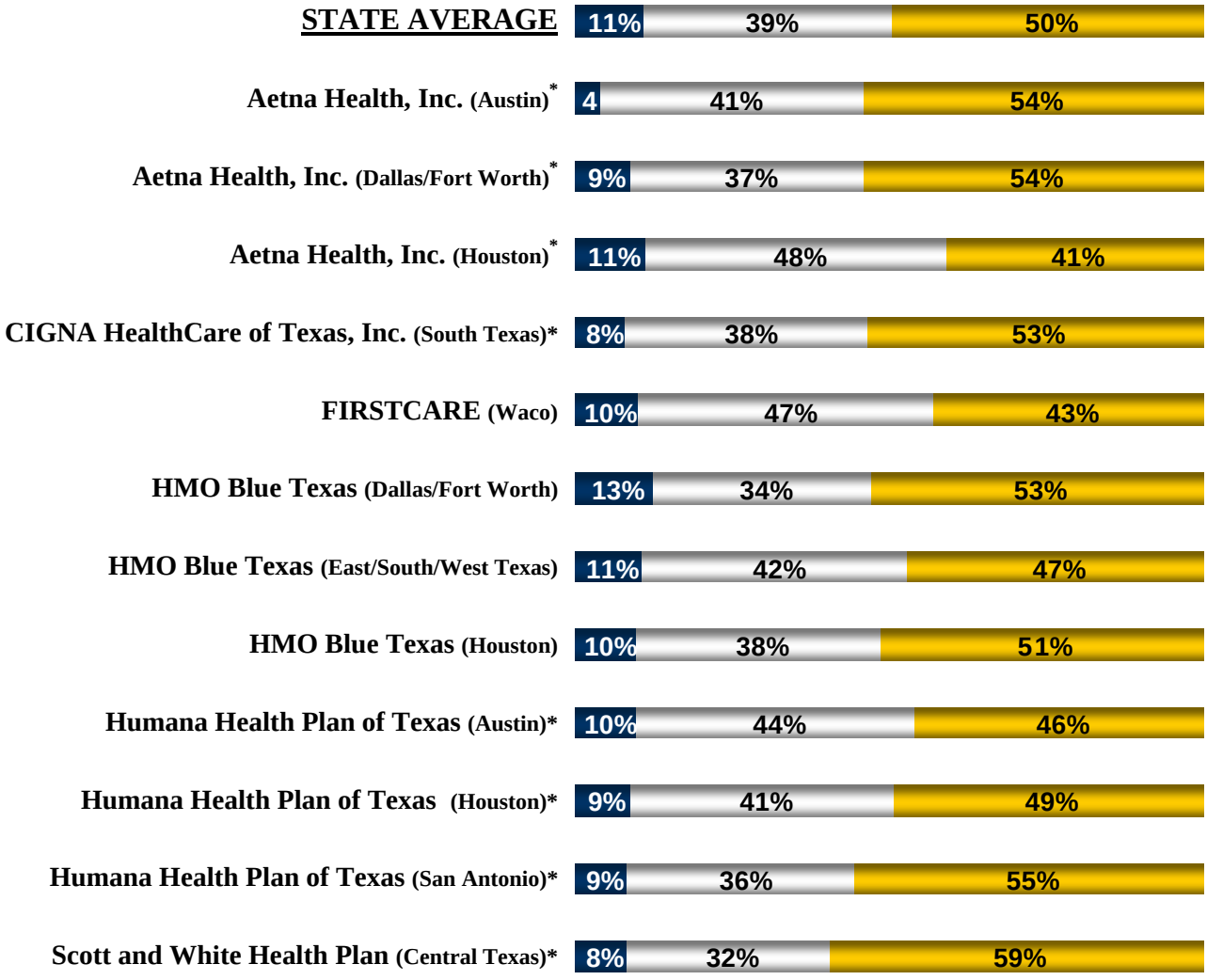
How people rated their healthcare

CAHPS® 5.0H Survey Results

Percentage who rated their care **6 or lower**	Percentage who rated their care **7 or 8**	Percentage who rated their care **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their healthcare** on a scale from:

0 = "worst healthcare possible" to **10** = "best healthcare possible"



Due to rounding, percentages may not add up to 100%.

CAHPS® 5.0H Survey Results - Central Texas

* *Includes HMO & POS products. (See page 5 for explanation.)*

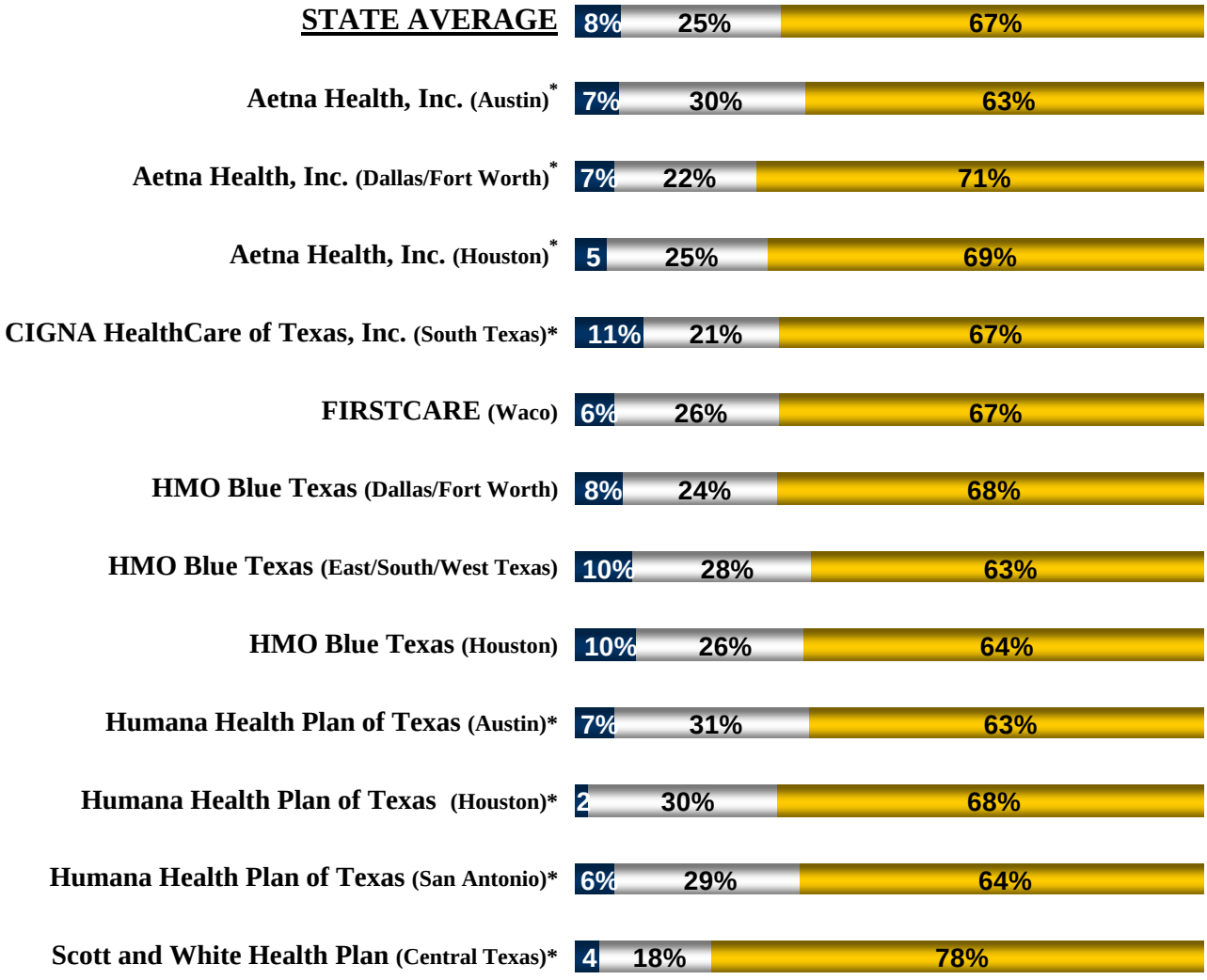
How people rated their personal doctor

CAHPS® 5.0H Survey Results

Percentage who rated their personal doctor **6 or lower**	Percentage who rated their personal doctor **7 or 8**	Percentage who rated their personal doctor **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their personal doctor** on a scale from:

0 = "worst personal doctor possible" to **10** = "best personal doctor possible"



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

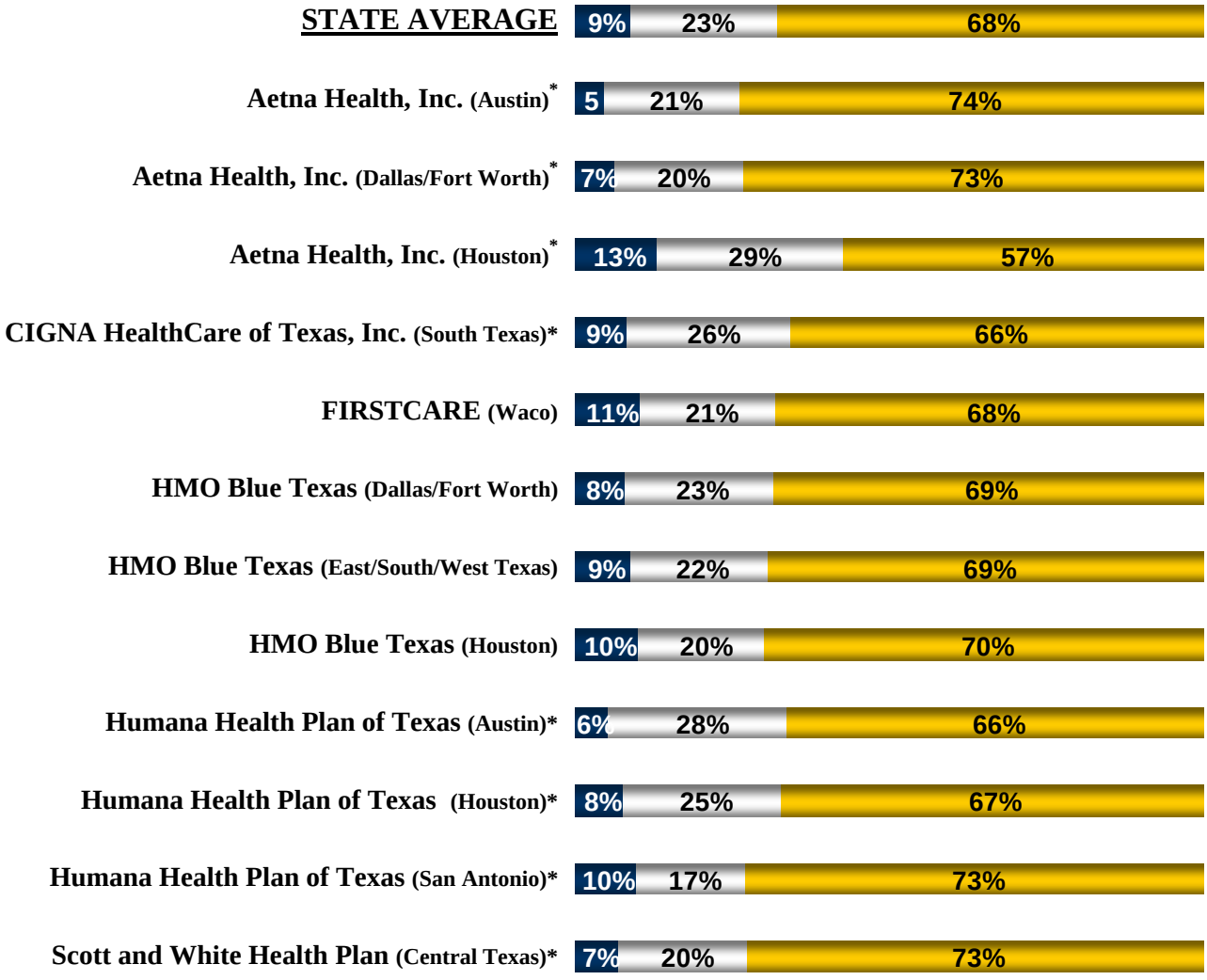
How people rated their specialist

CAHPS® 5.0H Survey Results

Percentage who rated their specialist **6 or lower**	Percentage who rated their specialist **7 or 8**	Percentage who rated their specialist **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their specialist** on a scale from:

0 = "worst specialist possible" to **10** = "best specialist possible"



Due to rounding, percentages may not add up to 100%.

CAHPS® 5.0H Survey Results - Central Texas

* *Includes HMO & POS products. (See page 5 for explanation.)*

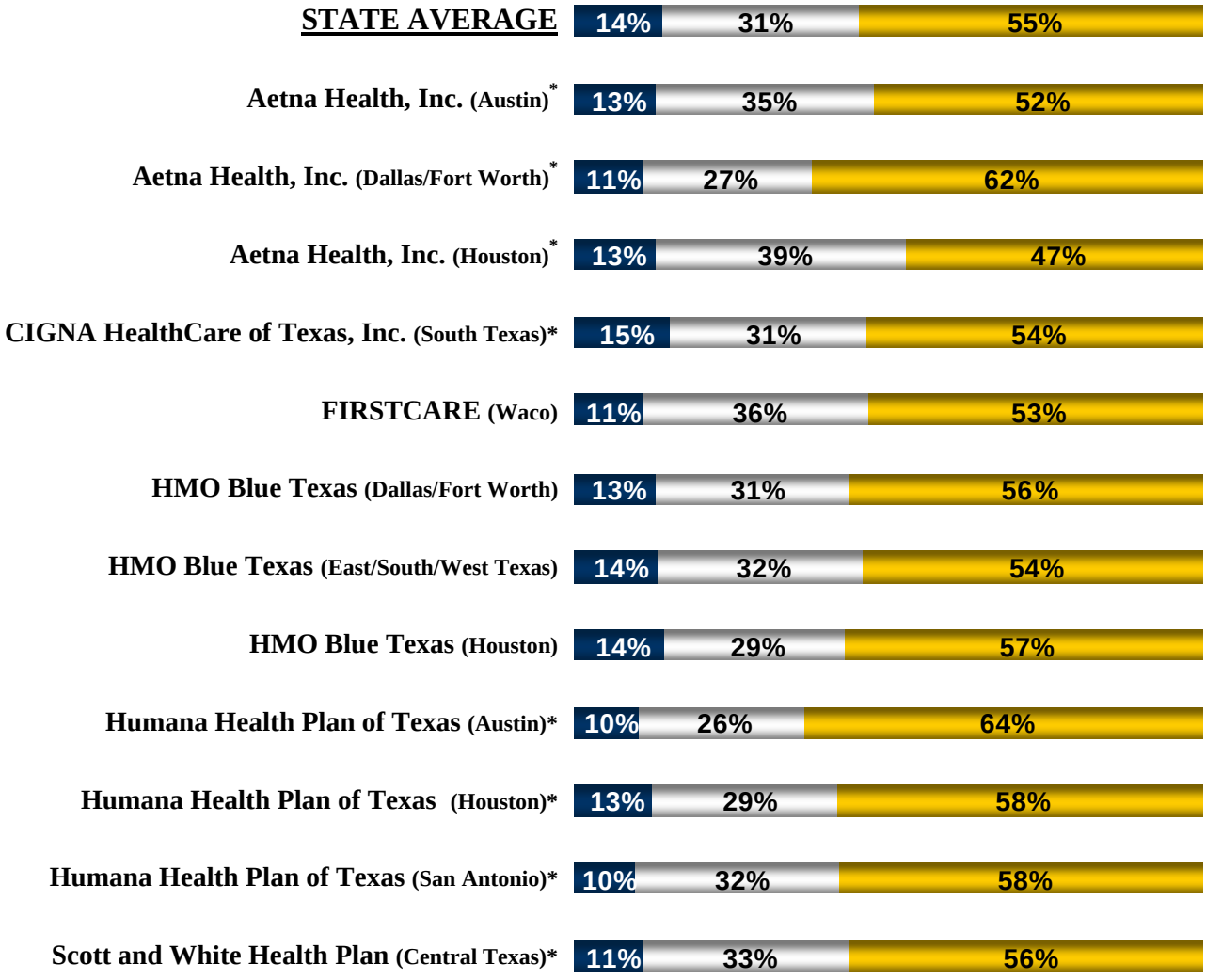
Getting needed care

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** received care that was needed	Percentage who said they **usually** received care that was needed	Percentage who said they **always** received care that was needed

The bar graphs show answers to survey questions that asked people **how often** it was easy for them to:

- Get appointments with specialists.
- Get care, tests, or treatment they needed through their health plan.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

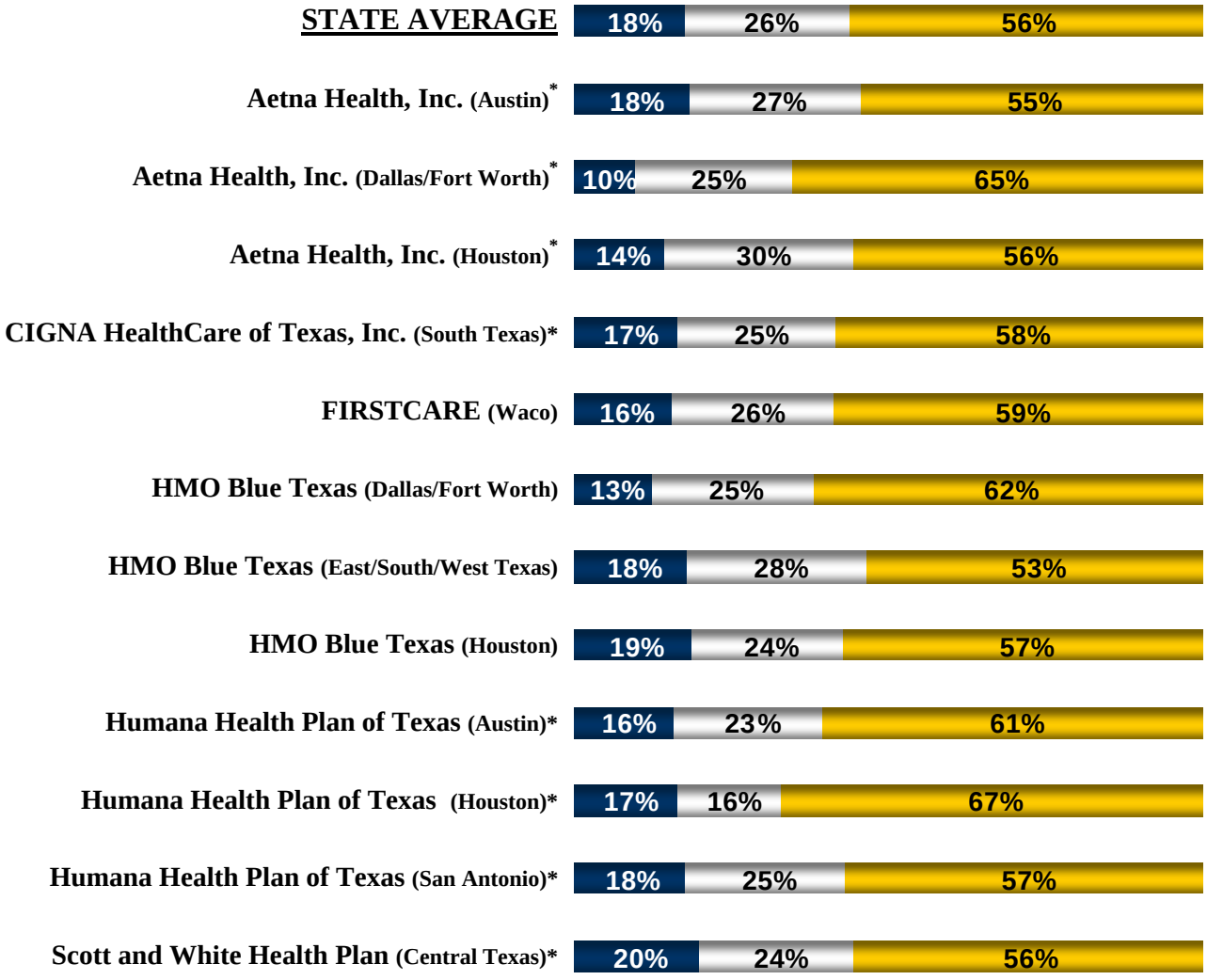
Getting care quickly

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** got care quickly	Percentage who said they **usually** got care quickly	Percentage who said they **always** got care quickly

The bar graphs show answers to survey questions that asked people **how often** they:

- Got care as soon as they thought they needed when they needed care right away.
- Got an appointment as soon as they thought they needed when they did not need care right away.



Due to rounding, percentages may not add up to 100%.

CAHPS® 5.0H Survey Results - Central Texas

* *Includes HMO & POS products. (See page 5 for explanation.)*

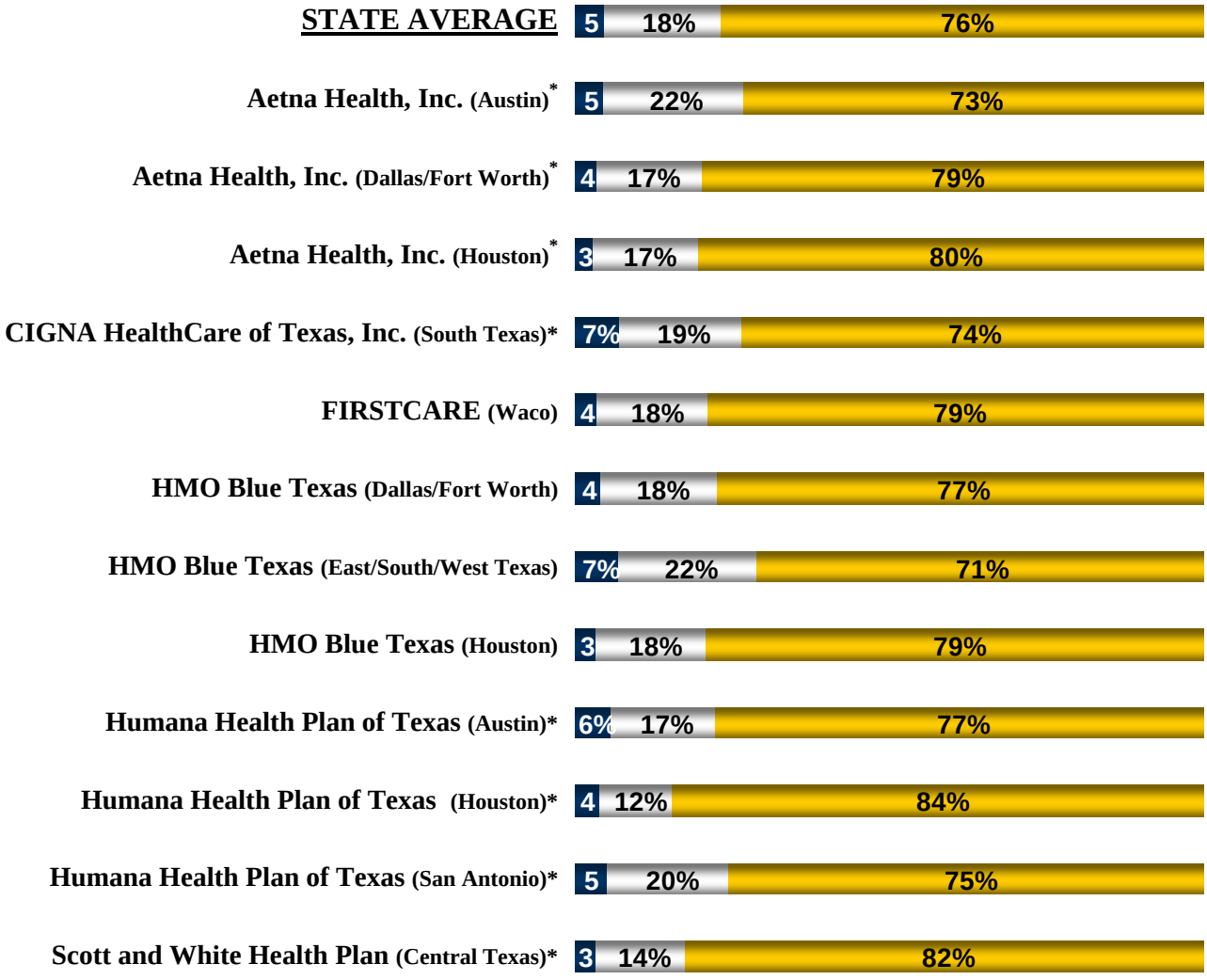
How well doctors communicate

CAHPS® 5.0H Survey Results

Percentage who said their doctors **sometimes or never** communicated well	Percentage who said their doctors **usually** communicated well	Percentage who said their doctors **always** communicated well

The bar graphs show answers to survey questions that asked people **how often** their personal doctor:

- Explained things in a way that was easy for them to understand.
- Listened carefully to them.
- Showed respect for what they had to say.
- Spent enough time with them.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

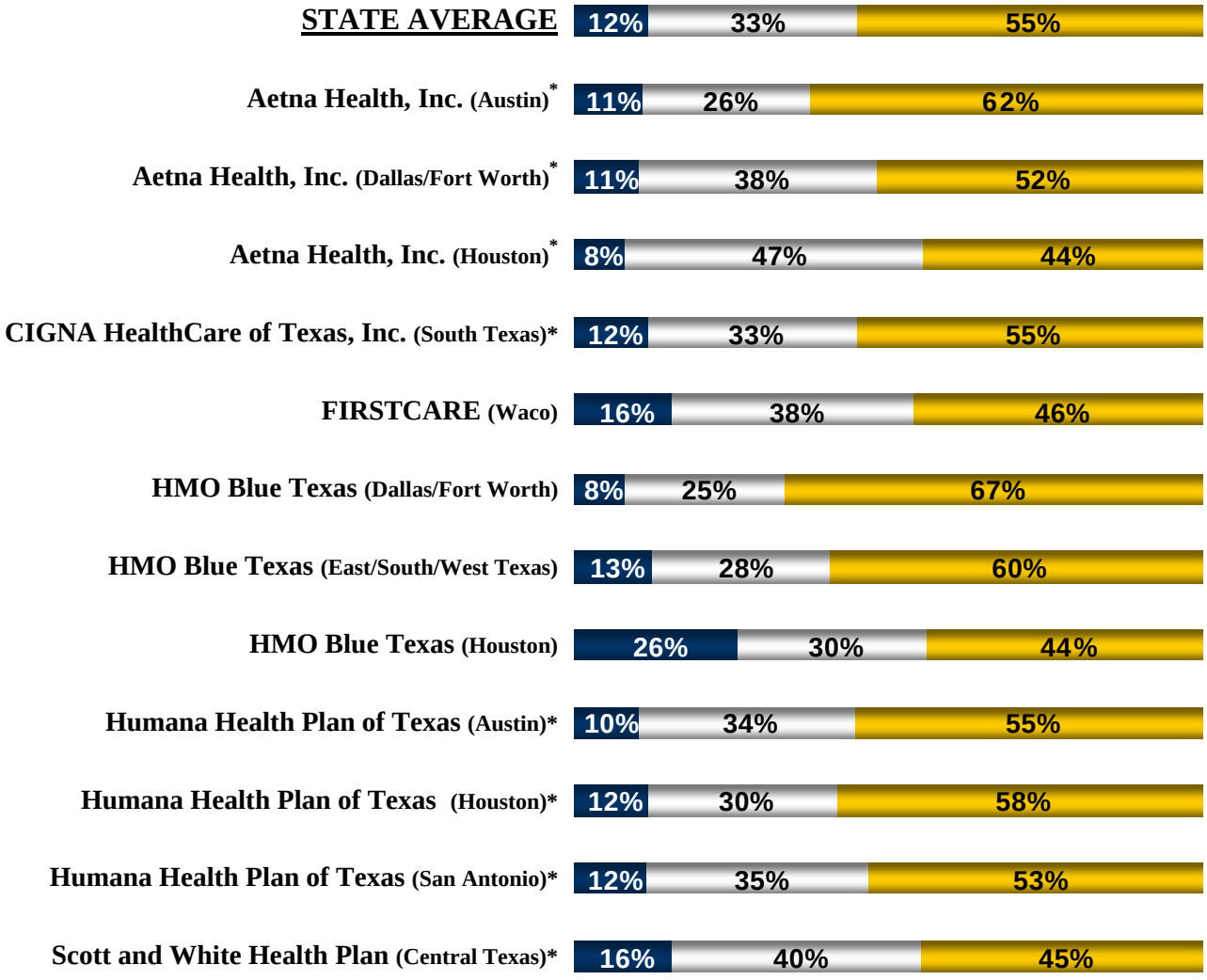
Handling of claims quickly and correctly

CAHPS® 5.0H Survey Results

Percentage who said their plan **sometimes or never** handled claims quickly and correctly	Percentage who said their plan **Usually** handled claims quickly and correctly	Percentage who said their plan **Always** handled claims quickly and correctly

The bar graphs show answers to survey questions that asked people **how often** their health plan:

- Handled claims quickly.
- Handled claims correctly.



Due to rounding, percentages may not add up to 100%.

CAHPS® 5.0H Survey Results - Central Texas

* *Includes HMO & POS products. (See page 5 for explanation.)*

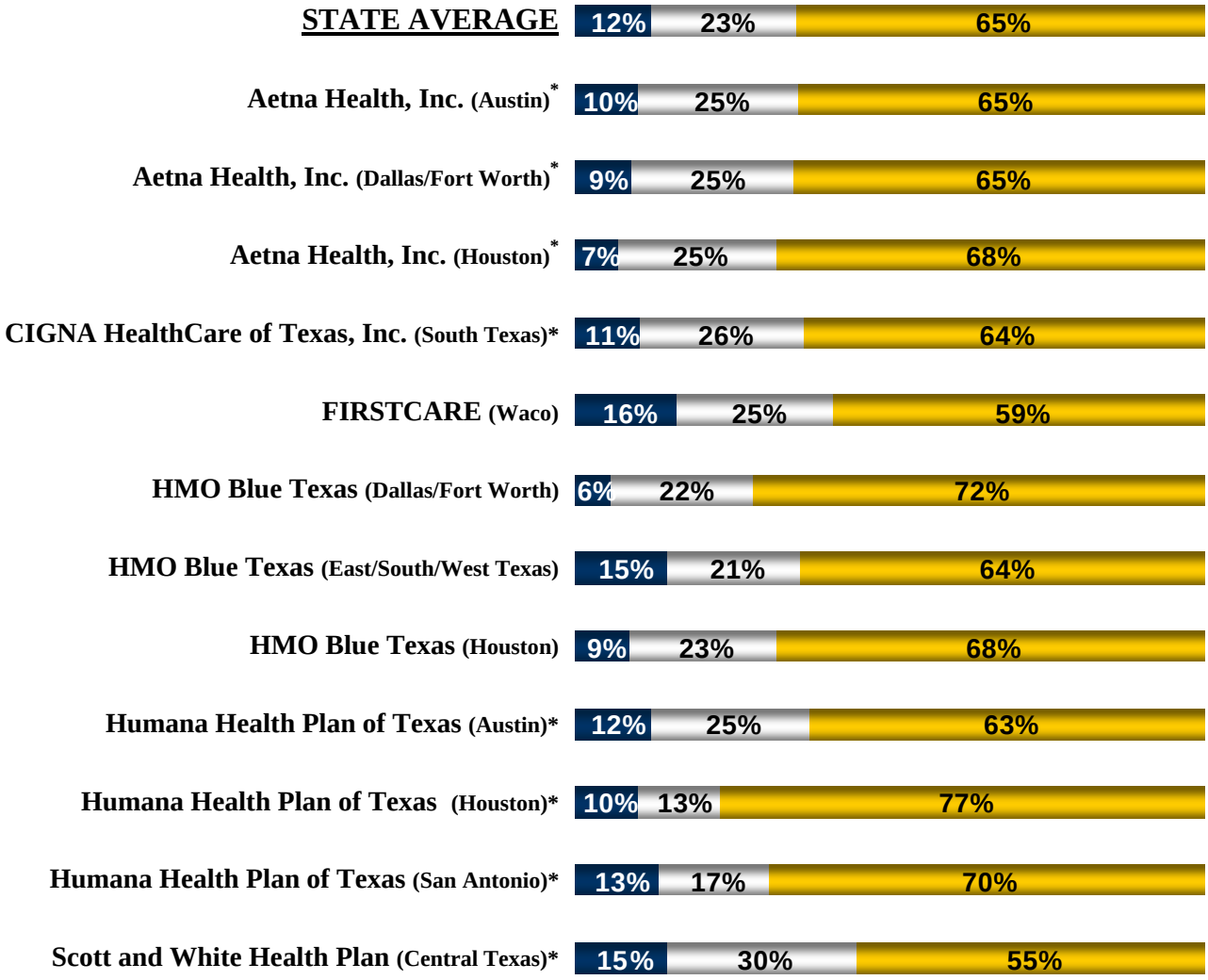
Health plan customer service

CAHPS® 5.0H Survey Results

Percentage who said customer service was **sometimes or never** efficient and helpful	Percentage who said customer service was **usually** efficient and helpful	Percentage who said customer service was **always** efficient and helpful

The bar graphs show answers to survey questions that asked people **how often**:

- They got the information or help they needed from their health plan's customer service.
- Their health plan's customer service staff treated them with courtesy and respect.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

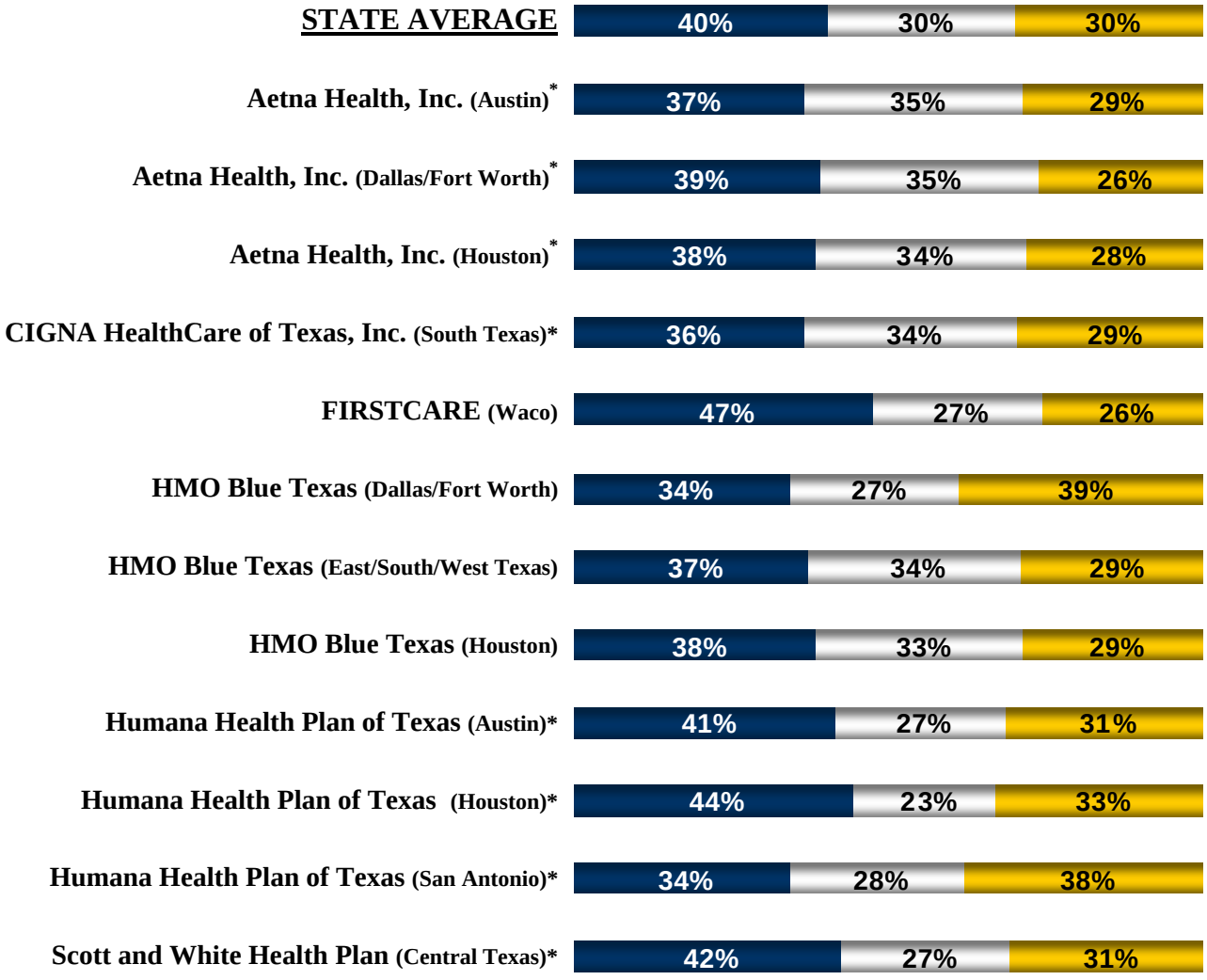
Plan information on costs

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** were able to find out cost info	Percentage who said they **Usually** were able to find out cost info	Percentage who said they **Always** were able to find out cost info

The bar graphs show answers to survey questions that asked people **how often** they were able to find out from their plan:

- How much would have to be paid for a healthcare service or equipment.
- How much would have to be paid for specific prescription medicines.



Due to rounding, percentages may not add up to 100%.

CAHPS® 5.0H Survey Results - Central Texas

* *Includes HMO & POS products. (See page 5 for explanation.)*

Shared Decision Making

CAHPS® 5.0H Survey Results

Percentage who said **No**, there was no shared decision making	Percentage who said **Yes,** there was shared decision making

The bar graphs show answers to survey questions that asked **whether** when starting or stopping a medicine:

- A doctor or other health provider talk about the reasons you might want to take a medicine?
- A doctor or other health provider talk about the reasons you might not want to take a medicine?
- A doctor or other health provider ask you what you thought was best for you?

	No	Yes
STATE AVERAGE	20%	80%
Aetna Health, Inc. (Austin)*	21%	79%
Aetna Health, Inc. (Dallas/Fort Worth)*	19%	81%
Aetna Health, Inc. (Houston)*	20%	80%
CIGNA HealthCare of Texas, Inc. (South Texas)*	19%	81%
FIRSTCARE (Waco)	19%	81%
HMO Blue Texas (Dallas/Fort Worth)	20%	80%
HMO Blue Texas (East/South/West Texas)	23%	77%
HMO Blue Texas (Houston)	20%	80%
Humana Health Plan of Texas (Austin)*	22%	78%
Humana Health Plan of Texas (Houston)*	18%	82%
Humana Health Plan of Texas (San Antonio)*	21%	79%
Scott and White Health Plan (Central Texas)*	16%	84%

Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

Response rate for all plans in the survey

Response rate = (completed surveys / [total sample – ineligible])

State Average = 23%

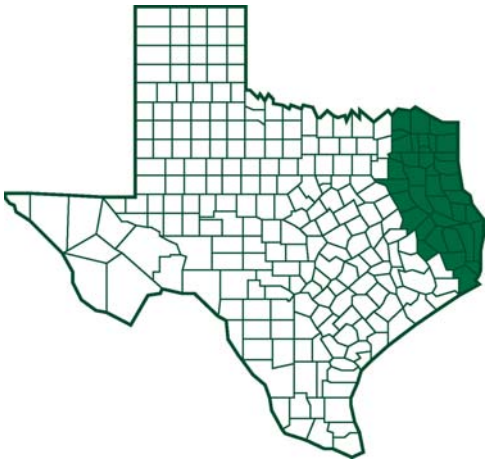
Aetna Health, Inc. (Austin)	**17%**
Aetna Health, Inc. (Dallas/Fort Worth)	**23%**
Aetna Health, Inc. (Houston)	**15%**
Aetna Health, Inc. (San Antonio/Corpus Christi)	16%
Allegian Health Plans, Inc. (Harlingen)	17%
CIGNA HealthCare of Texas, Inc. (South Texas)	**16%**
Community First Health Plans (San Antonio)	27%
FIRSTCARE (Abilene)	25%
FIRSTCARE (Amarillo)	32%
FIRSTCARE (Lubbock)	28%
FIRSTCARE (Waco)	**25%**
HMO Blue Texas (Dallas/Fort Worth)	**19%**
HMO Blue Texas (East/South/West Texas)	**20%**
HMO Blue Texas (Houston)	**18%**
Humana Health Plan of Texas (Austin)	**25%**
Humana Health Plan of Texas (Corpus Christi)	27%
Humana Health Plan of Texas (Houston)	**20%**
Humana Health Plan of Texas (San Antonio)	**25%**
Scott and White Health Plan (Central Texas)	**33%**

CAHPS® 5.0H Survey Results for

East Texas Plans

The counties included in the East Texas area are:

Anderson	**Delta**	**Hopkins**	**Morris**	**Rains**	**Shelby**	**Van Zandt**
Angelina	**Franklin**	**Houston**	**Nacogdoches**	**Red River**	**Smith**	**Wood**
Bowie	**Gregg**	**Jasper**	**Newton**	**Rusk**	**Titus**	
Camp	**Hardin**	**Jefferson**	**Orange**	**Sabine**	**Trinity**	
Cass	**Harrison**	**Lamar**	**Panola**	**San Augustine**	**Tyler**	
Cherokee	**Henderson**	**Marion**	**Polk**	**San Jacinto**	**Upshur**	



This section features survey results for plans that serve the East Texas area. It includes HMOs with a service area that extends into at least one county in the region. The city/area shown after the name indicates the primary area of service. Contact plans directly for details on specific service areas.

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NCQA requires 100 responses to report survey results. OPIC has opted to report data based on 30 or more responses to provide consumers with greater access to data to compare HMOs.

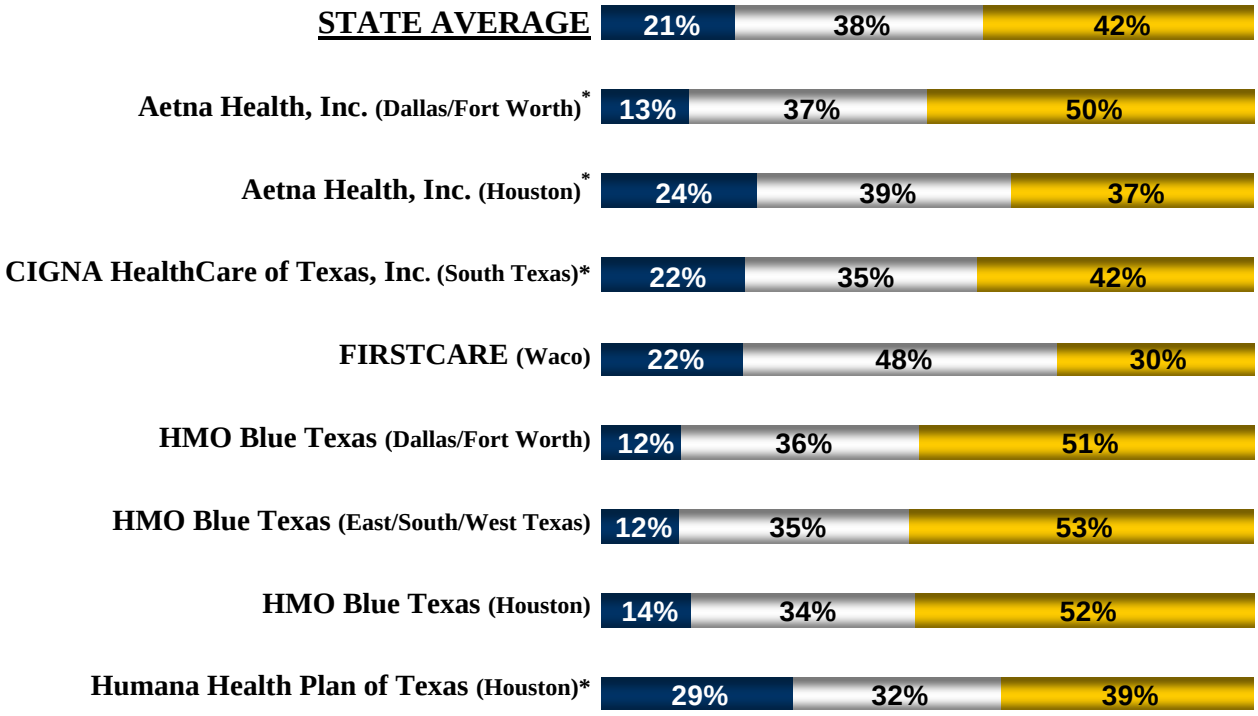
How people rated their health plan

CAHPS® 5.0H Survey Results

Percentage who rated their plan **6 or lower**	Percentage who rated their plan **7 or 8**	Percentage who rated their plan **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their health plan** on a scale from:

0 = "worst health plan possible" to **10** = "best health plan possible"



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

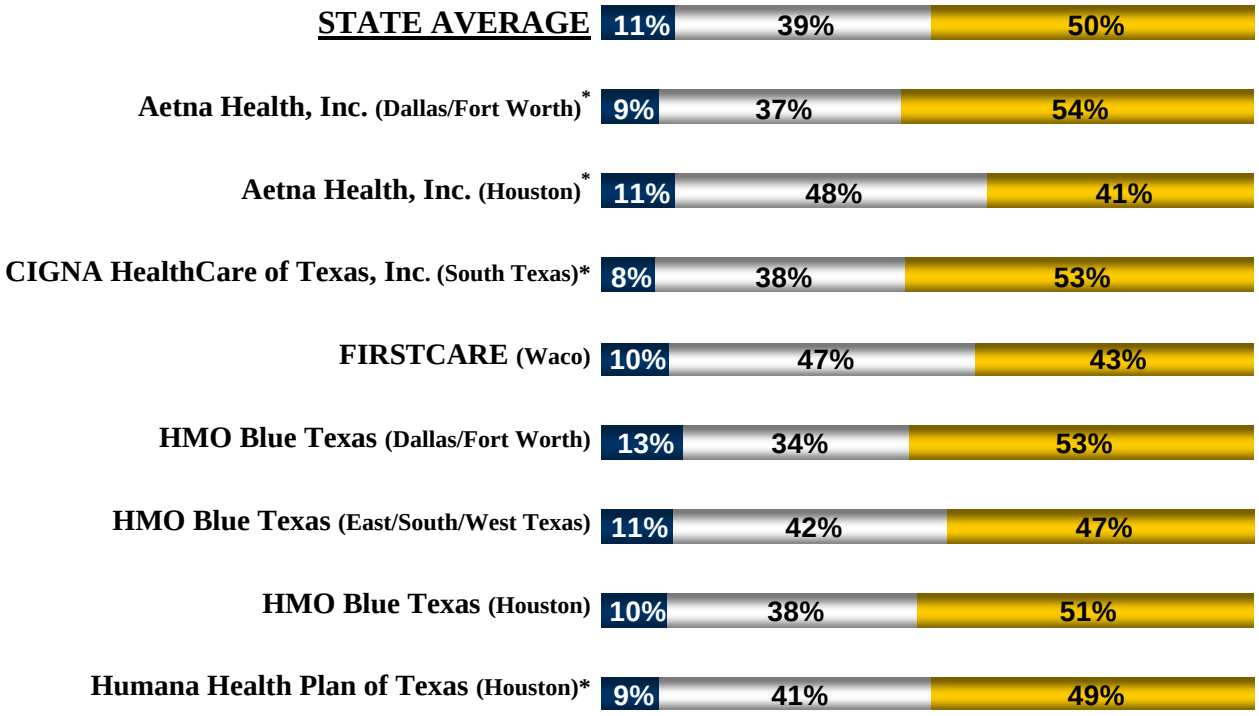
How people rated their healthcare

CAHPS® 5.0H Survey Results

Percentage who rated their care **6 or lower**	Percentage who rated their care **7 or 8**	Percentage who rated their care **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their healthcare** on a scale from:

0 = "worst healthcare possible" to **10** = "best healthcare possible"



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CAHPS® 5.0H Survey Results - East Texas

* *Includes HMO & POS products. (See page 5 for explanation.)*

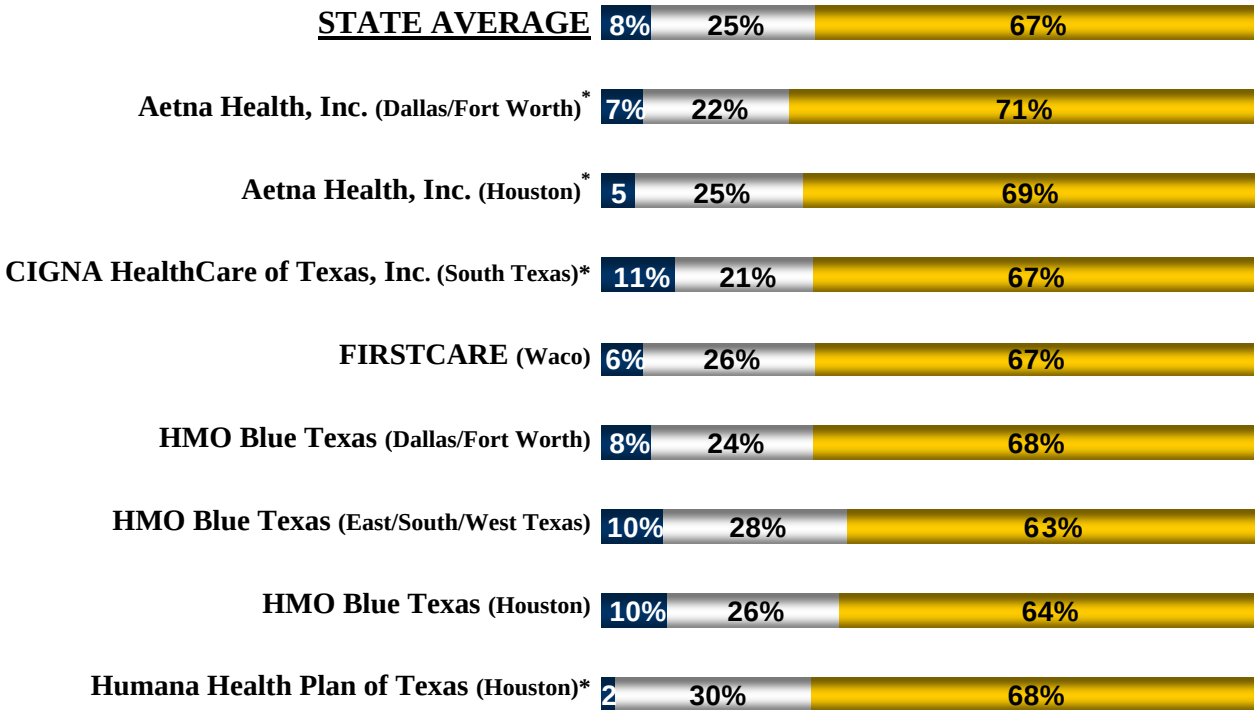
How people rated their personal doctor

CAHPS® 5.0H Survey Results

Percentage who rated their personal doctor **6 or lower**	Percentage who rated their personal doctor **7 or 8**	Percentage who rated their personal doctor **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their personal doctor** on a scale from:

0 = "worst personal doctor possible" to **10** = "best personal doctor possible"



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

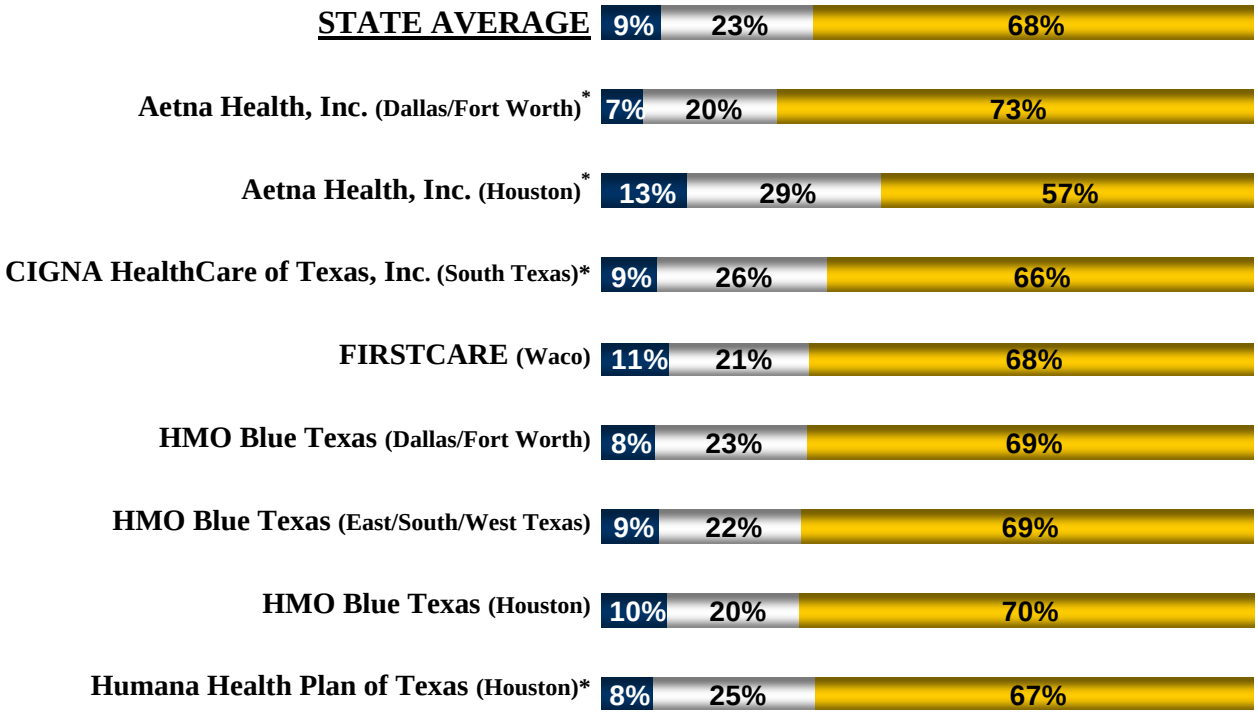
How people rated their specialist

CAHPS® 5.0H Survey Results

Percentage who rated their specialist **6 or lower**	Percentage who rated their specialist **7 or 8**	Percentage who rated their specialist **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their specialist** on a scale from:

0 = "worst specialist possible" to **10** = "best specialist possible"



Due to rounding, percentages may not add up to 100%.

CAHPS® 5.0H Survey Results - East Texas

* *Includes HMO & POS products. (See page 5 for explanation.)*

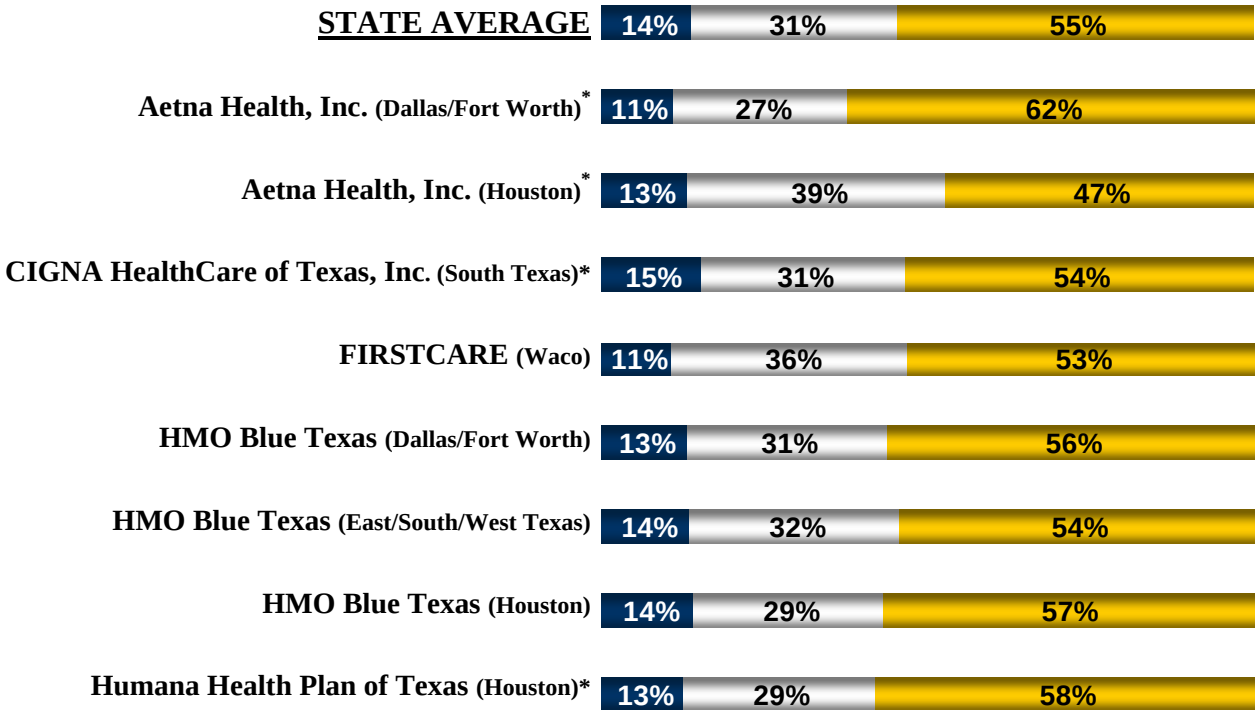
Getting needed care

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** received care that was needed	Percentage who said they **usually** received care that was needed	Percentage who said they **always** received care that was needed

The bar graphs show answers to survey questions that asked people **how often** it was easy for them to:

- Get appointments with specialists.
- Get care, tests or treatment they needed through their health plan.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

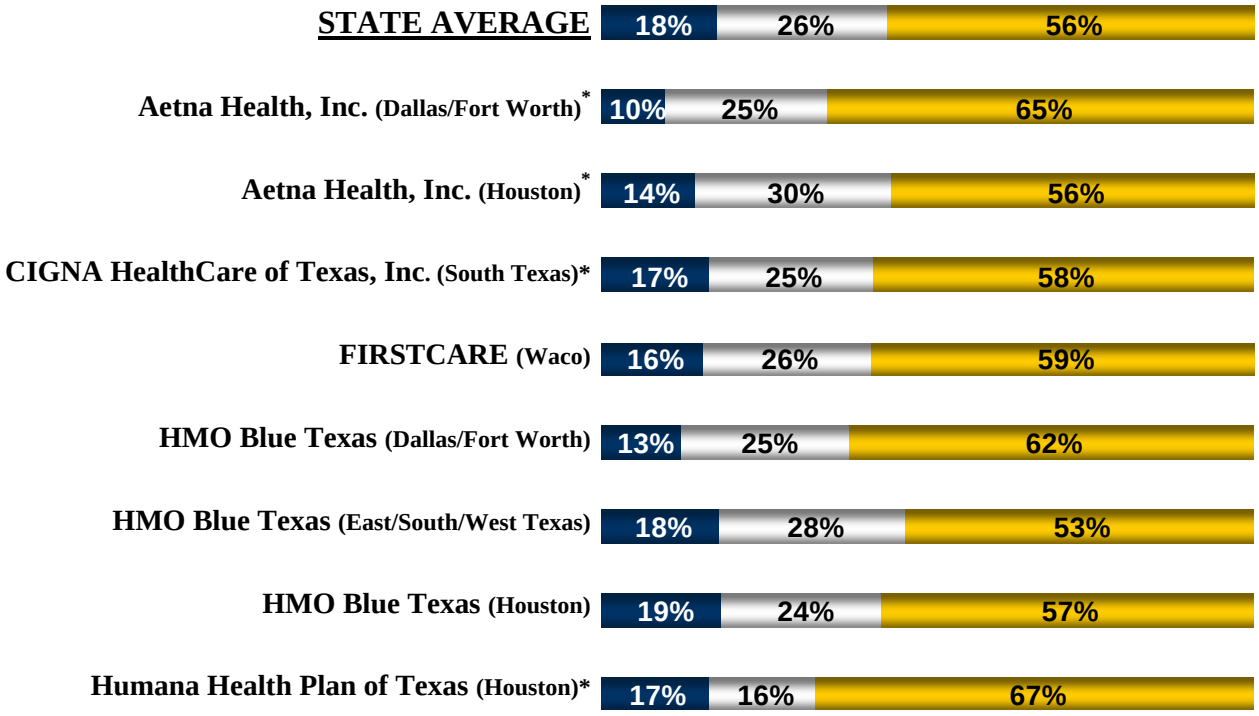
Getting care quickly

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** got care quickly	Percentage who said they **usually** got care quickly	Percentage who said they **always** got care quickly

The bar graphs show answers to survey questions that asked people **how often** they:

- Got care as soon as they thought they needed when they needed care right away.
- Got an appointment as soon as they thought they needed when they did not need care right away.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

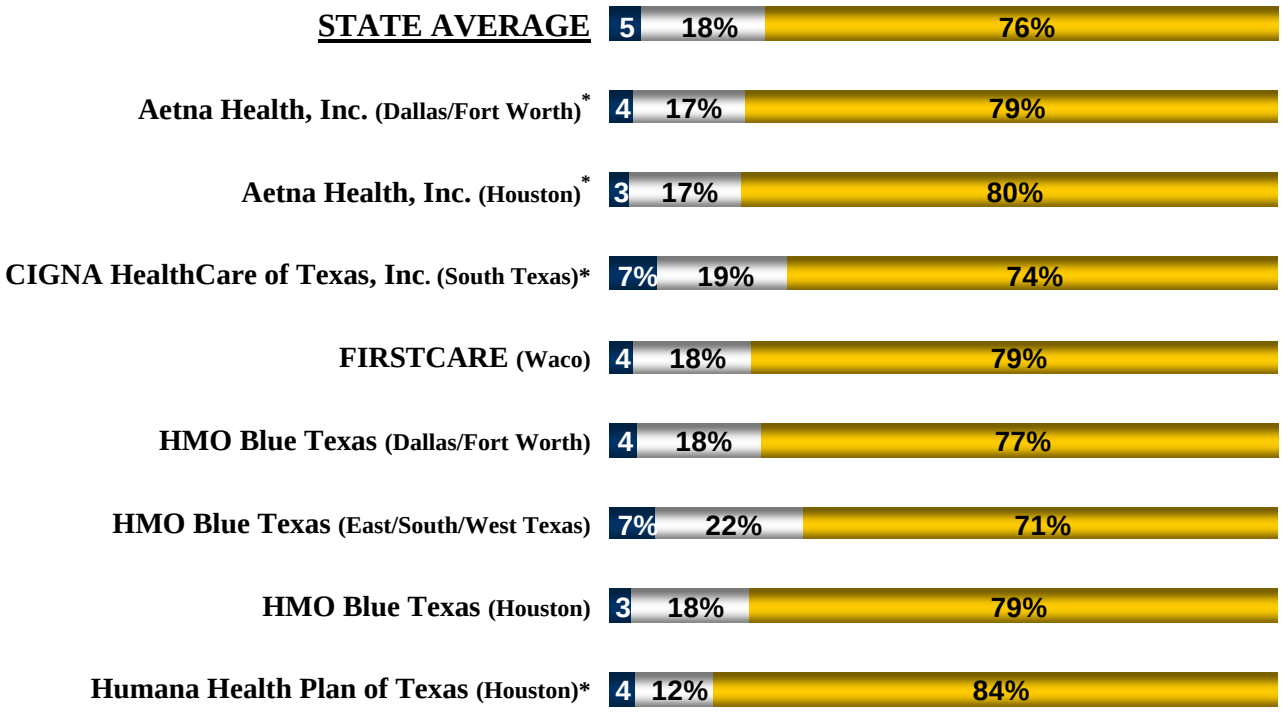
How well doctors communicate

CAHPS® 5.0H Survey Results

Percentage who said their doctors **sometimes or never** communicated well	Percentage who said their doctors **usually** communicated well	Percentage who said their doctors **always** communicated well

The bar graphs show answers to survey questions that asked people **how often** their personal doctor:

- Explained things in a way that was easy for them to understand.
- Listened carefully to them.
- Showed respect for what they had to say.
- Spent enough time with them.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

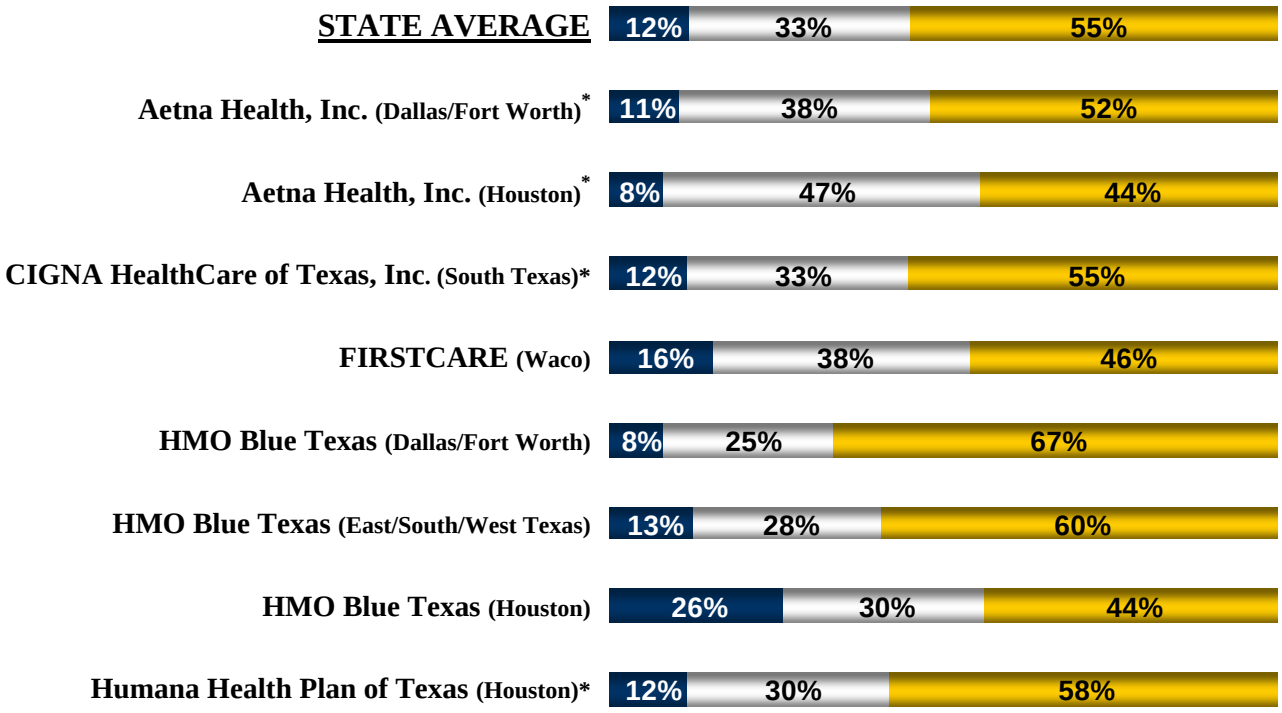
Handling of claims quickly and correctly

CAHPS® 5.0H Survey Results

Percentage who said their plan **sometimes or never** handled claims quickly and correctly	Percentage who said their plan **Usually** handled claims quickly and correctly	Percentage who said their plan **Always** handled claims quickly and correctly

The bar graphs show answers to survey questions that asked people **how often** their health plan:

- Handled claims quickly.
- Handled claims correctly.



Due to rounding, percentages may not add up to 100%.

CAHPS® 5.0H Survey Results - East Texas

* *Includes HMO & POS products. (See page 5 for explanation.)*

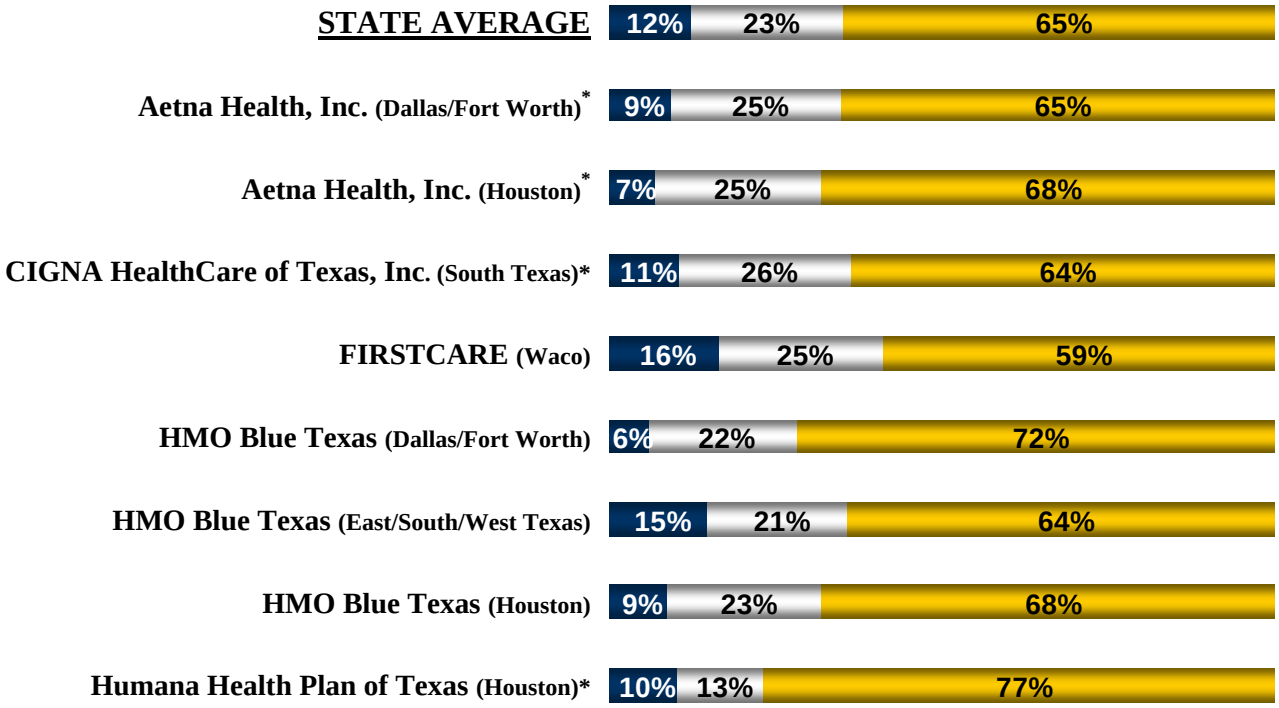
Health plan customer service

CAHPS® 5.0H Survey Results

Percentage who said customer service was **sometimes or never** efficient and helpful	Percentage who said customer service was **usually** efficient and helpful	Percentage who said customer service was **always** efficient and helpful

The bar graphs show answers to survey questions that asked people **how often**:

- They got the information or help they needed from their health plan's customer service.
- Their health plan's customer service staff treated them with courtesy and respect.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

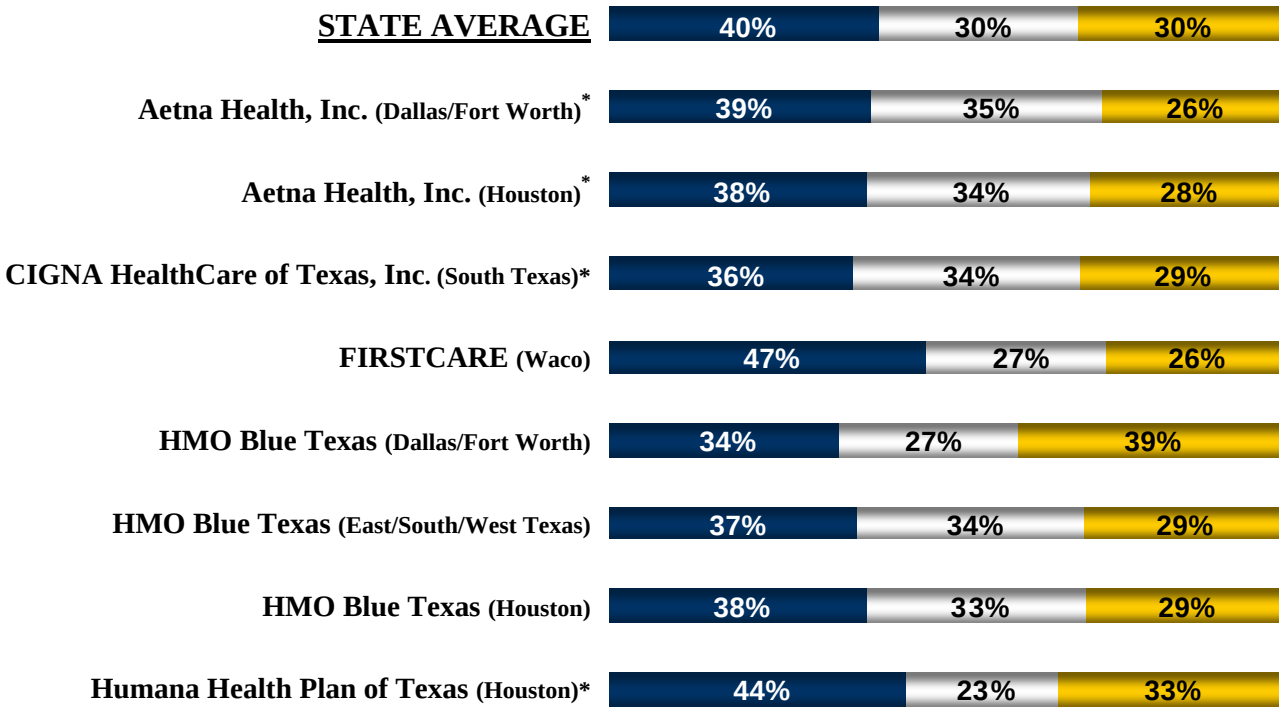
Plan information on costs

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** were able to find out cost info	Percentage who said they **Usually** were able to find out cost info	Percentage who said they **Always** were able to find out cost info

The bar graphs show answers to survey questions that asked people **how often** they were able to find out from their plan:

- How much would have to be paid for a healthcare service or equipment.
- How much would have to be paid for specific prescription medicines.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

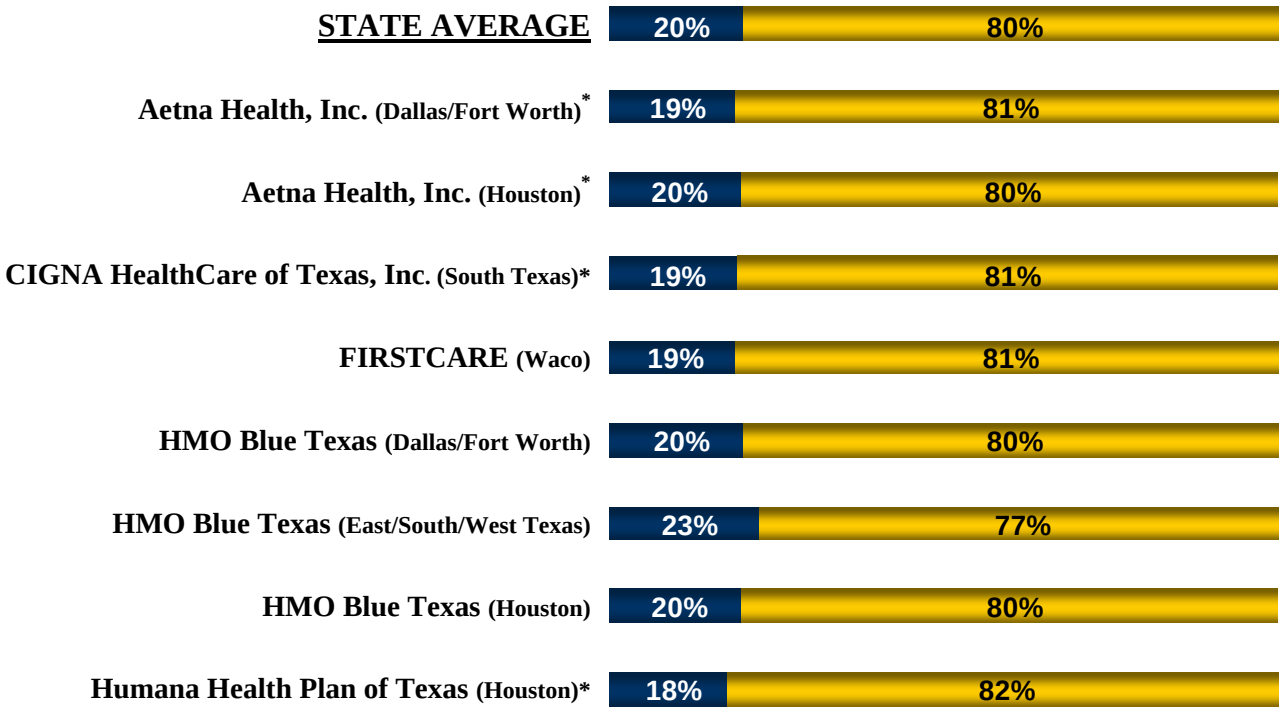
Shared Decision Making

CAHPS® 5.0H Survey Results

Percentage who said **No**, there was no shared decision making	Percentage who said **Yes,** there was shared decision making

The bar graphs show answers to survey questions that asked **whether** when starting or stopping a medicine:

- A doctor or other health provider talk about the reasons you might want to take a medicine?
- A doctor or other health provider talk about the reasons you might not want to take a medicine?
- A doctor or other health provider ask you what you thought was best for you?



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

Response rate for all plans in the survey

Response rate = (completed surveys / [total sample – ineligible])

State Average = 23%

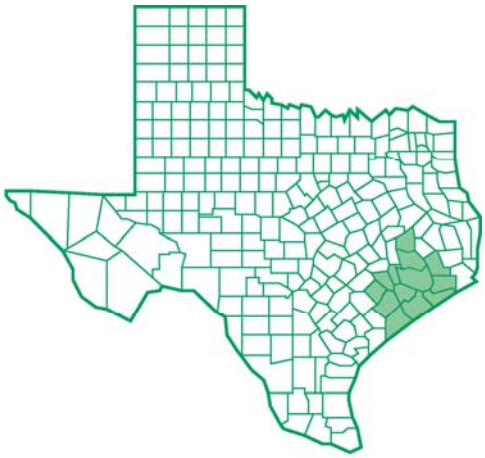
Aetna Health, Inc. (Austin)	17%
Aetna Health, Inc. (Dallas/Fort Worth)	**23%**
Aetna Health, Inc. (Houston)	**15%**
Aetna Health, Inc. (San Antonio/Corpus Christi)	16%
Allegian Health Plans, Inc. (Harlingen)	17%
CIGNA HealthCare of Texas, Inc. (South Texas)	**16%**
Community First Health Plans (San Antonio)	27%
FIRSTCARE (Abilene)	25%
FIRSTCARE (Amarillo)	32%
FIRSTCARE (Lubbock)	28%
FIRSTCARE (Waco)	**25%**
HMO Blue Texas (Dallas/Fort Worth)	**19%**
HMO Blue Texas (East/South/West Texas)	**20%**
HMO Blue Texas (Houston)	**18%**
Humana Health Plan of Texas (Austin)	25%
Humana Health Plan of Texas (Corpus Christi)	27%
Humana Health Plan of Texas (Houston)	**20%**
Humana Health Plan of Texas (San Antonio)	25%
Scott and White Health Plan (Central Texas)	33%

CAHPS® 5.0H Survey Results for

Gulf Coast Texas Plans

The counties included in the Gulf Coast Texas area are:

Austin	Galveston	Walker
Brazoria	Harris	Waller
Chambers	Liberty	Wharton
Colorado	Matagorda	
Fort Bend	Montgomery	



This section features survey results for plans that serve the Gulf Coast Texas area. It includes HMOs with a service area that extends into at least one county in the region. The city/area shown after the name indicates the primary area of service. Contact plans directly for details on specific service areas.

An HMO may be exempt from participation in the survey due to low enrollment or limited participation in the Texas commercial HMO market during 2014.

NCQA requires 100 responses to report survey results. OPIC has opted to report data based on 30 or more responses to provide consumers with greater access to data to compare HMOs.

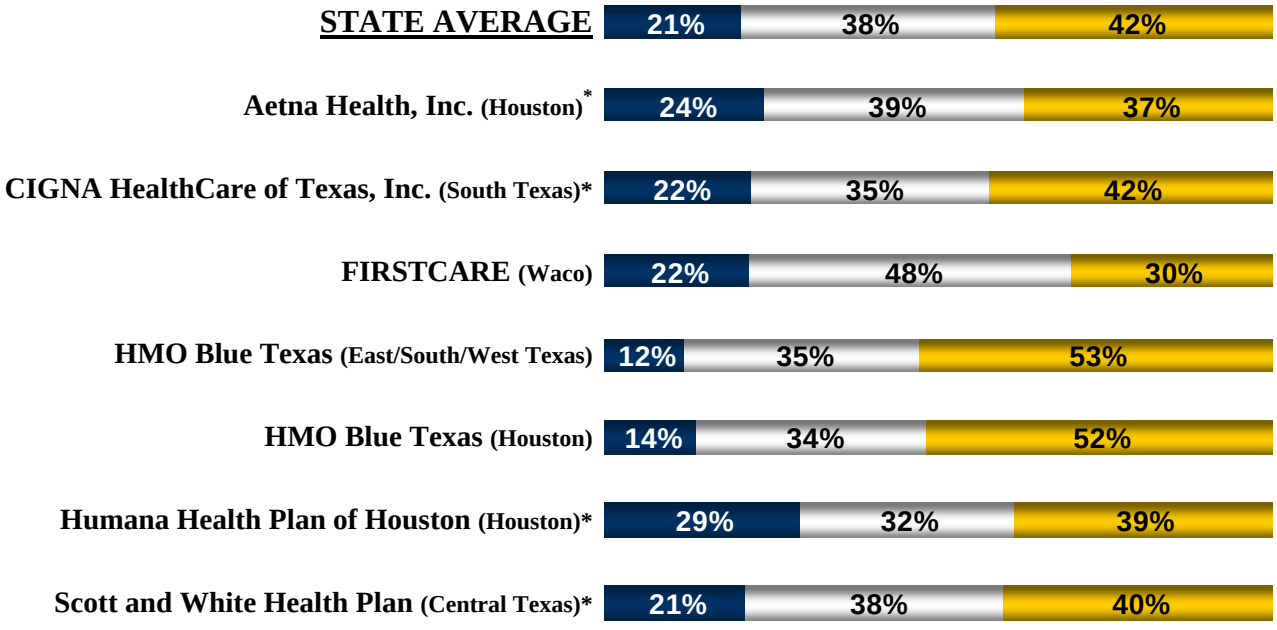
How people rated their health plan

CAHPS® 5.0H Survey Results

Percentage who rated their plan **6 or lower**	Percentage who rated their plan **7 or 8**	Percentage who rated their plan **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their health plan** on a scale from:

0 = "worst health plan possible" to **10** = "best health plan possible"



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

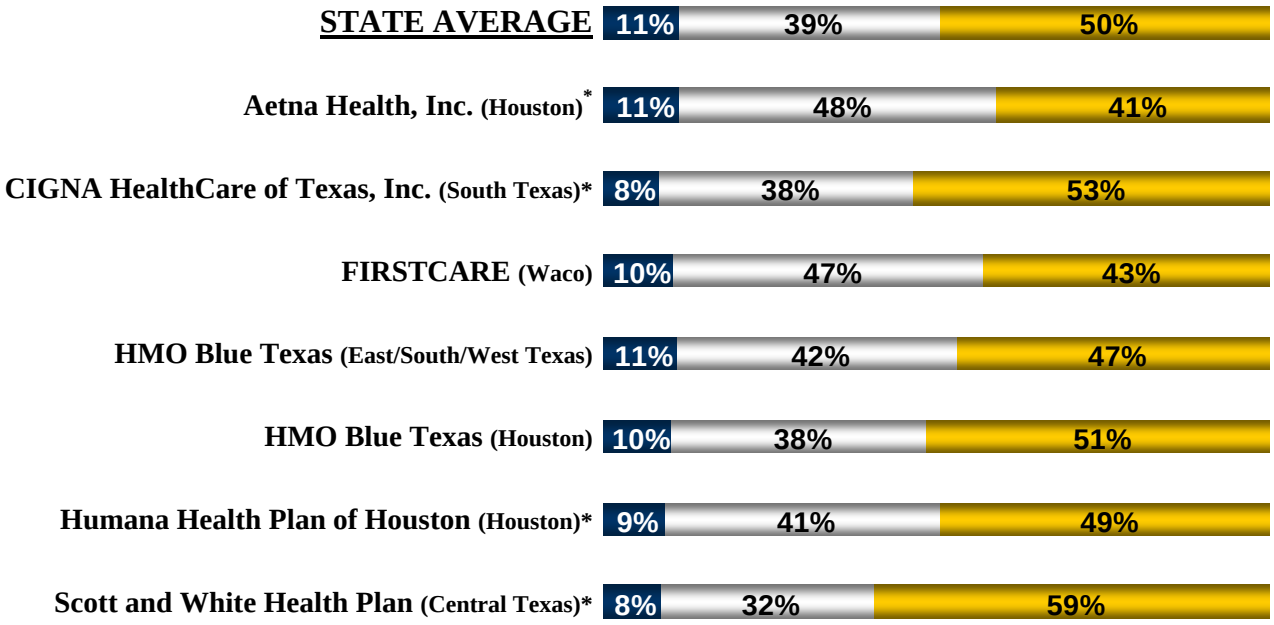
How people rated their healthcare

CAHPS® 5.0H Survey Results

Percentage who rated their care **6 or lower**	Percentage who rated their care **7 or 8**	Percentage who rated their care **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their healthcare** on a scale from:

0 = "worst healthcare possible" to **10** = "best healthcare possible"



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

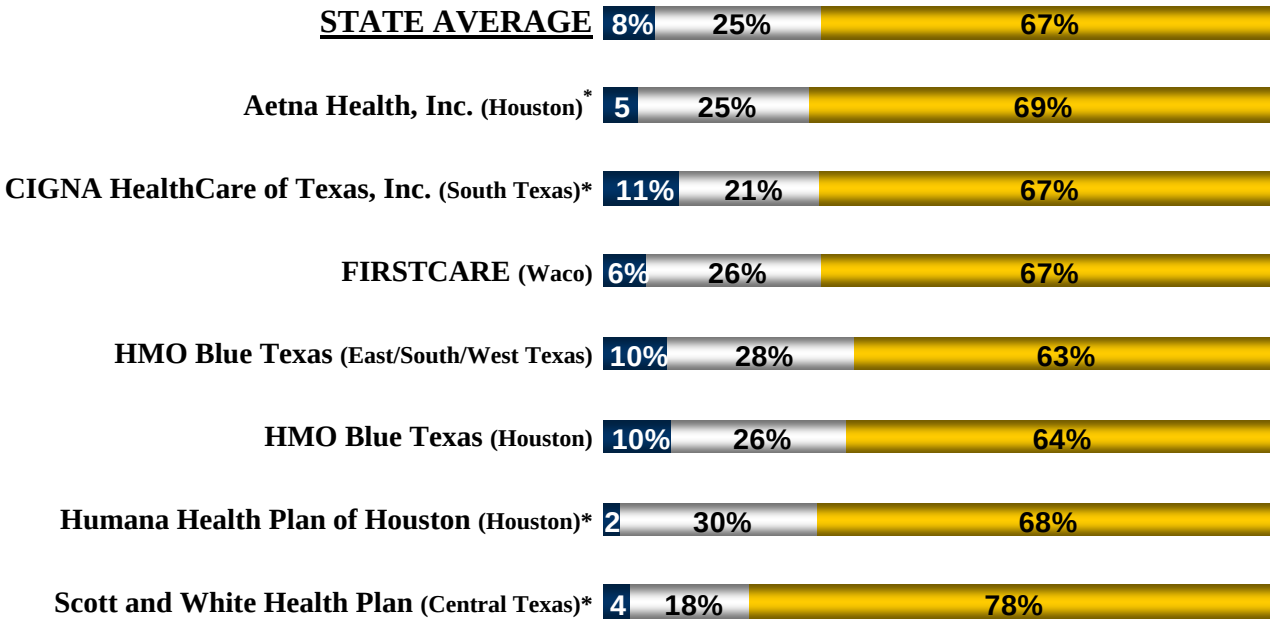
How people rated their personal doctor

CAHPS® 5.0H Survey Results

Percentage who rated their personal doctor **6 or lower**	Percentage who rated their personal doctor **7 or 8**	Percentage who rated their personal doctor **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their personal doctor** on a scale from:

0 = "worst personal doctor possible" to **10** = "best personal doctor possible"



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

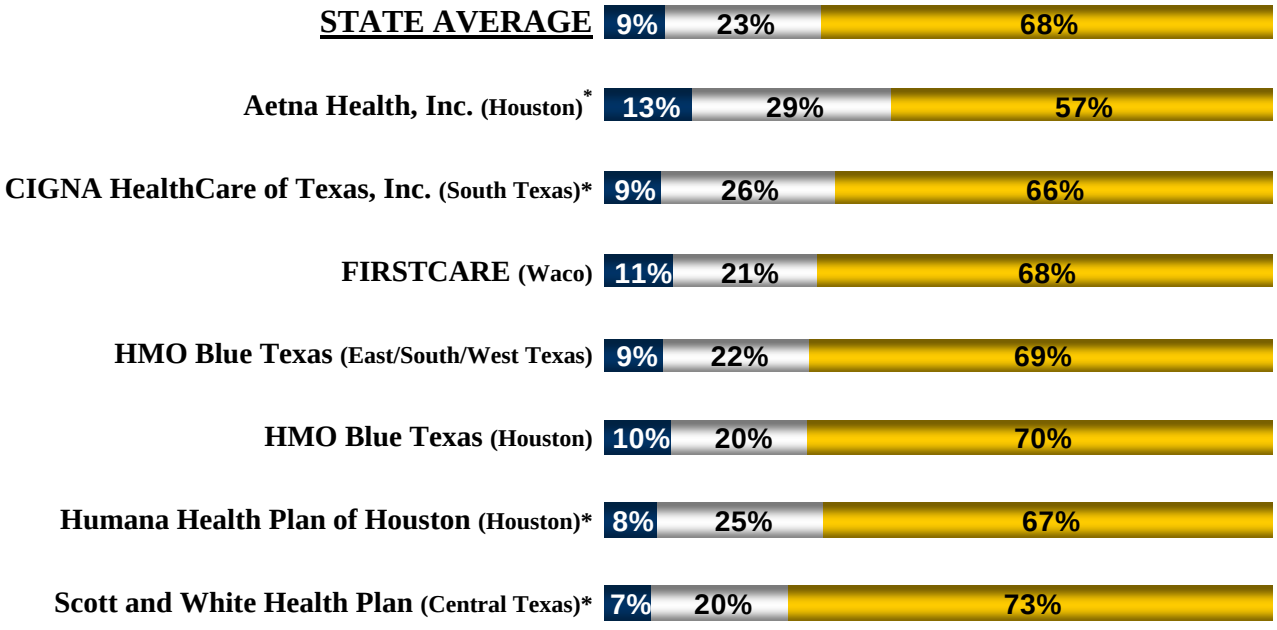
How people rated their specialist

CAHPS® 5.0H Survey Results

Percentage who rated their specialist **6 or lower**	Percentage who rated their specialist **7 or 8**	Percentage who rated their specialist **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their specialist** on a scale from:

0 = "worst specialist possible" to **10** = "best specialist possible"



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

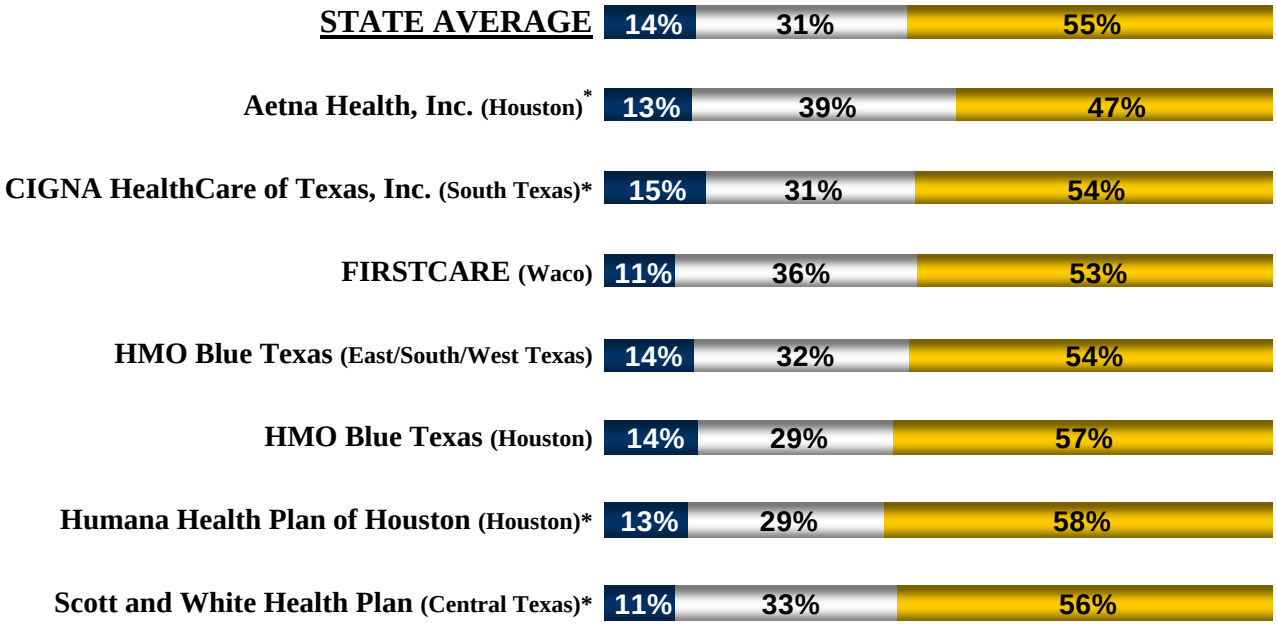
Getting needed care

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** received care that was needed	Percentage who said they **usually** received care that was needed	Percentage who said they **always** received care that was needed

The bar graphs show answers to survey questions that asked people **how often** it was easy for them to:

- Get appointments with specialists.
- Get care, tests or treatment they needed through their health plan.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

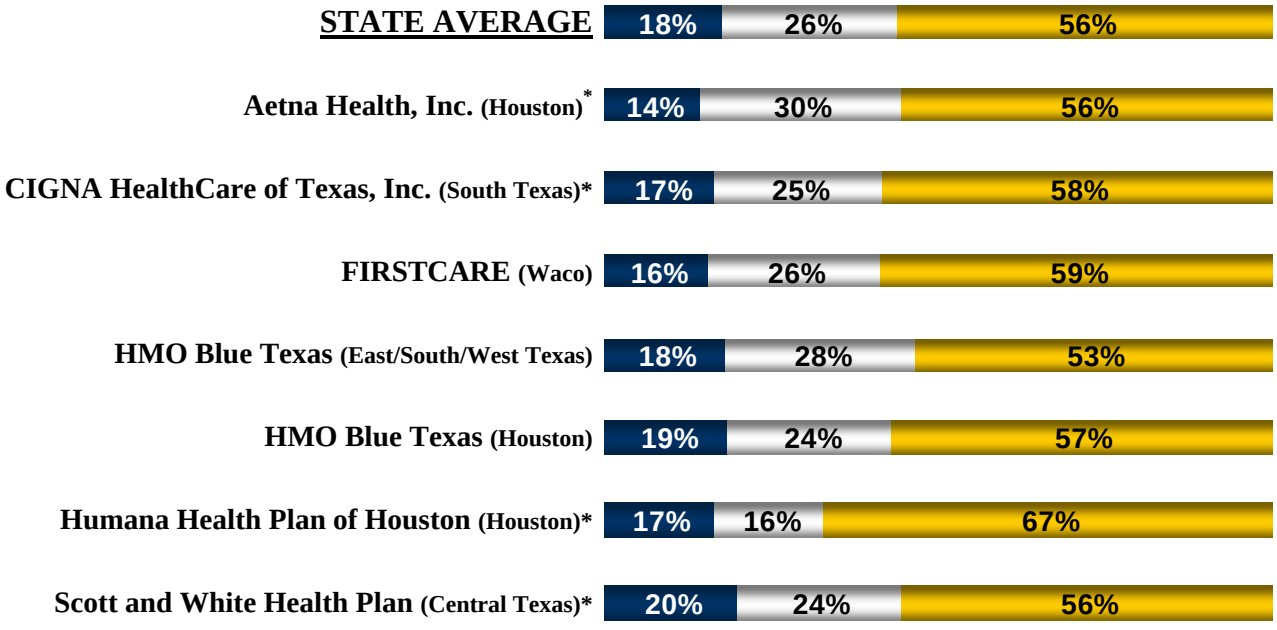
Getting care quickly

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** got care quickly	Percentage who said they **usually** got care quickly	Percentage who said they **always** got care quickly

The bar graphs show answers to survey questions that asked people **how often** they:

- Got care as soon as they thought they needed when they needed care right away.
- Got an appointment as soon as they thought they needed when they did not need care right away.



Due to rounding, percentages may not add up to 100%.

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How well doctors communicate

CAHPS® 5.0H Survey Results

Percentage who said their doctors **sometimes or never** communicated well	Percentage who said their doctors **usually** communicated well	Percentage who said their doctors **always** communicated well

The bar graphs show answers to survey questions that asked people **how often** their personal doctor:

- Explained things in a way that was easy for them to understand.
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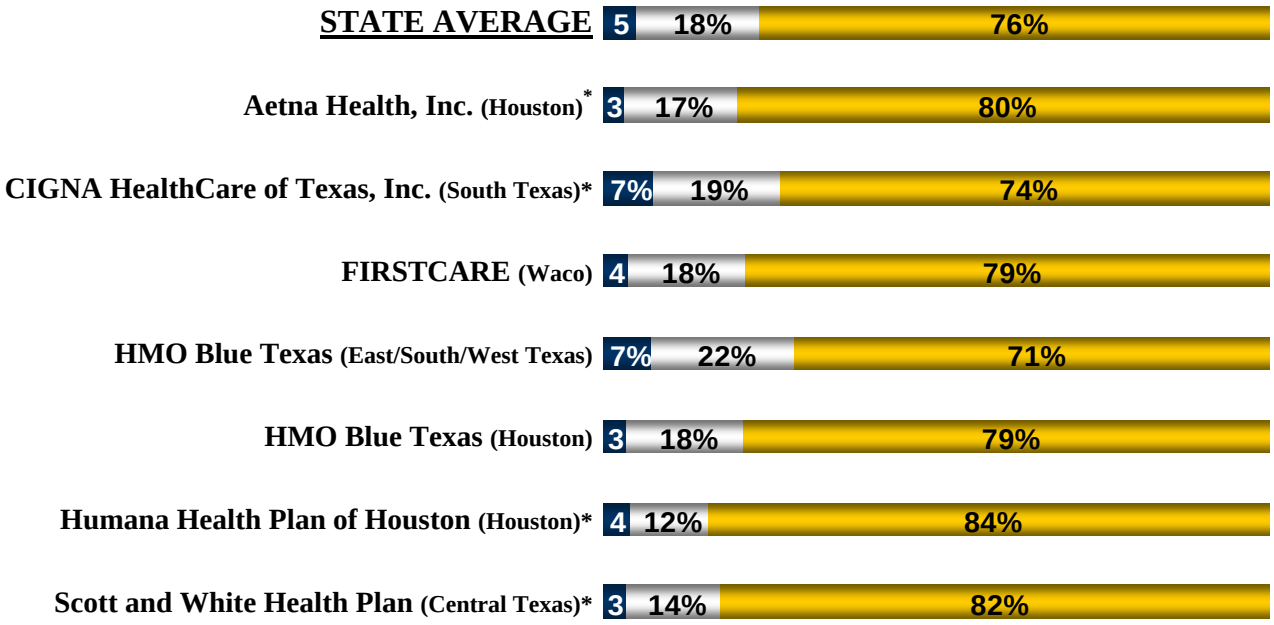


Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

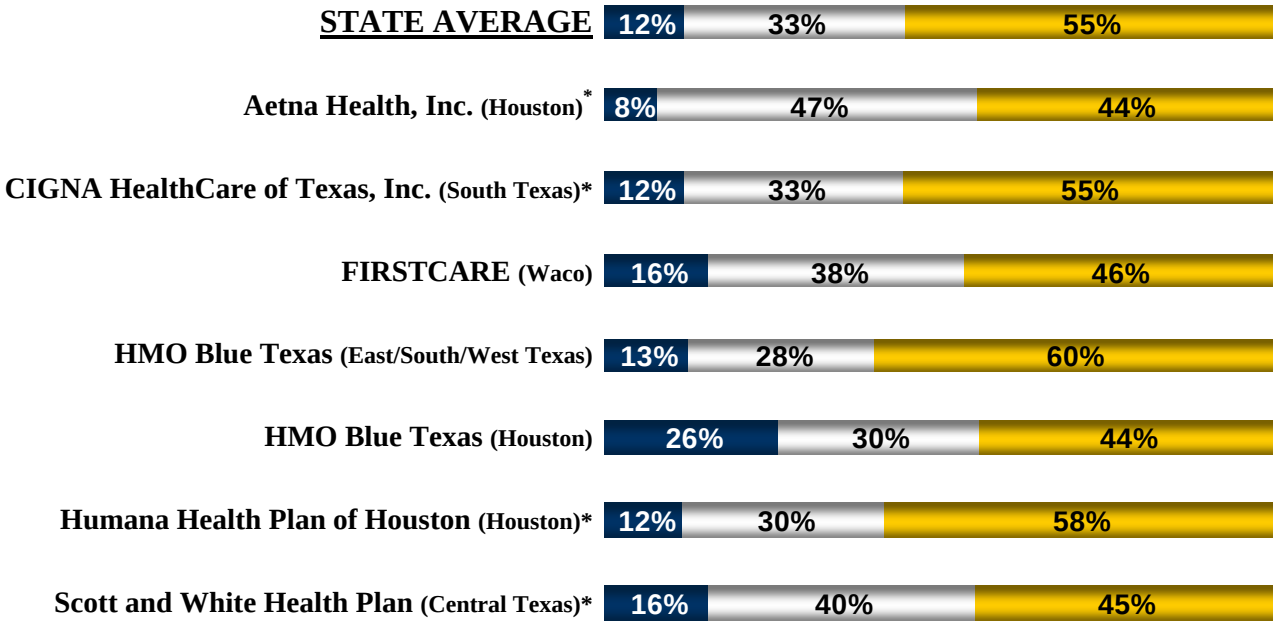
Handling of claims quickly and correctly

CAHPS® 5.0H Survey Results

Percentage who said their plan **sometimes or never** handled claims quickly and correctly	Percentage who said their plan **Usually** handled claims quickly and correctly	Percentage who said their plan **Always** handled claims quickly and correctly

The bar graphs show answers to survey questions that asked people **how often** their health plan:

- Handled claims quickly.
- Handled claims correctly.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

Health plan customer service

CAHPS® 5.0H Survey Results

Percentage who said customer service was **sometimes or never** efficient and helpful	Percentage who said customer service was **usually** efficient and helpful	Percentage who said customer service was **always** efficient and helpful

The bar graphs show answers to survey questions that asked people **how often**:

- They got the information or help they needed from their health plan's customer service.
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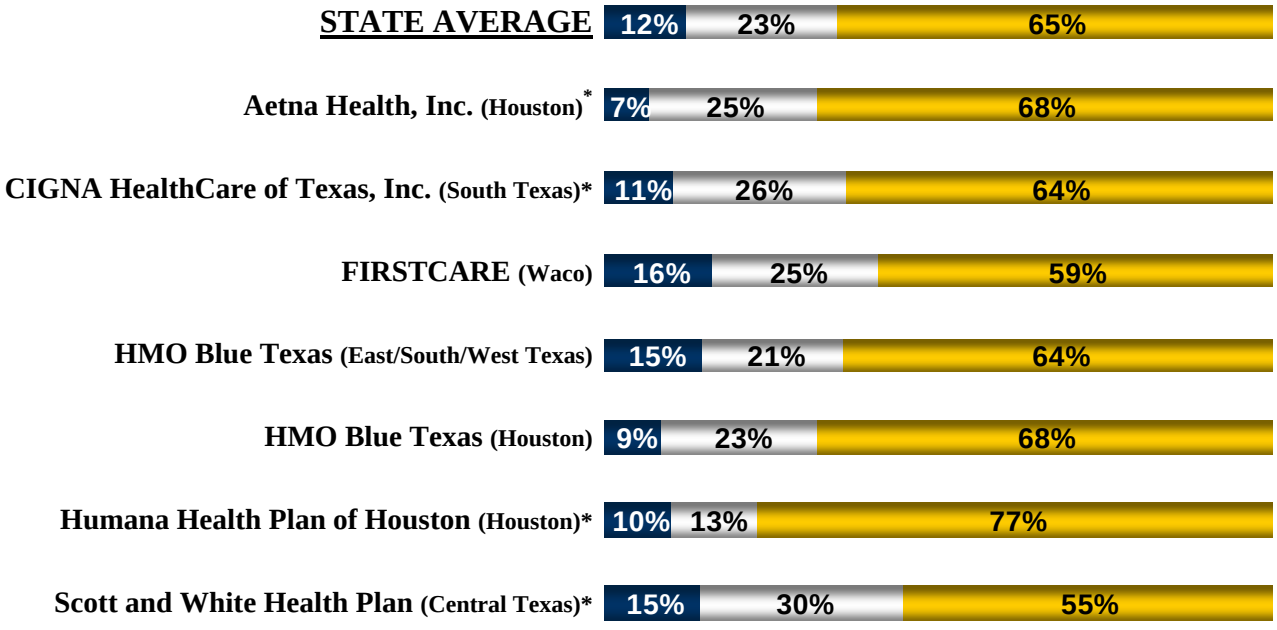

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* *Includes HMO & POS products. (See page 5 for explanation.)*

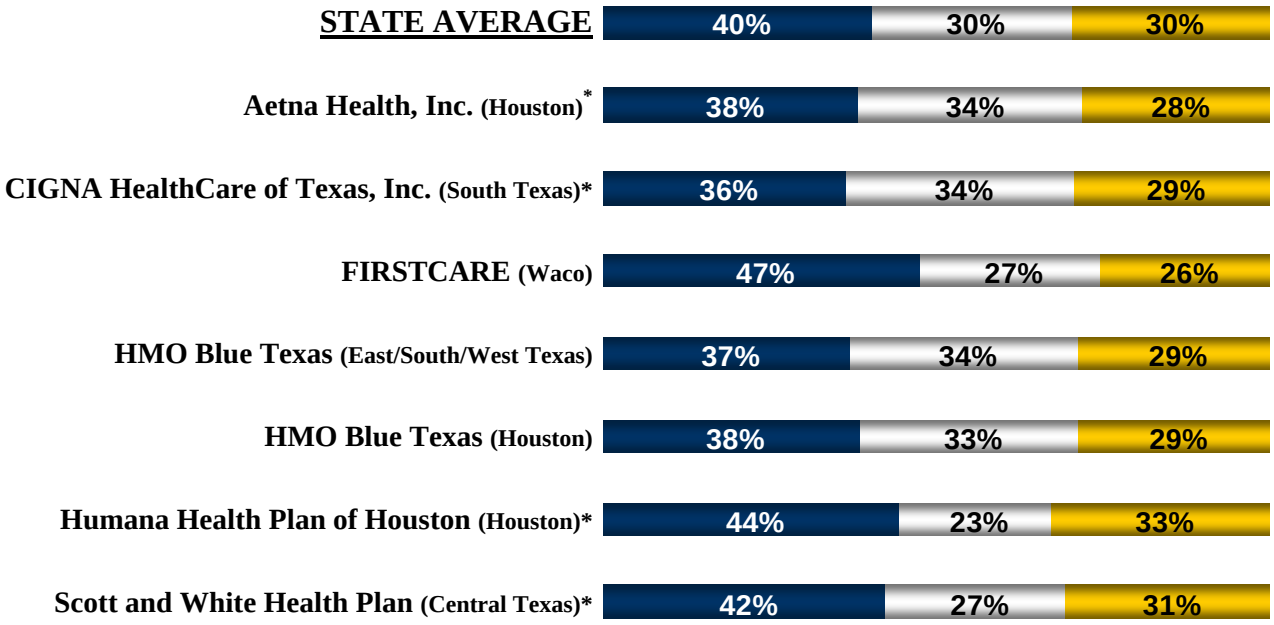
Plan information on costs

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** were able to find out cost info	Percentage who said they **Usually** were able to find out cost info	Percentage who said they **Always** were able to find out cost info

The bar graphs show answers to survey questions that asked people **how often** they were able to find out from their plan:

- How much would have to be paid for a healthcare service or equipment.
- How much would have to be paid for specific prescription medicines.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

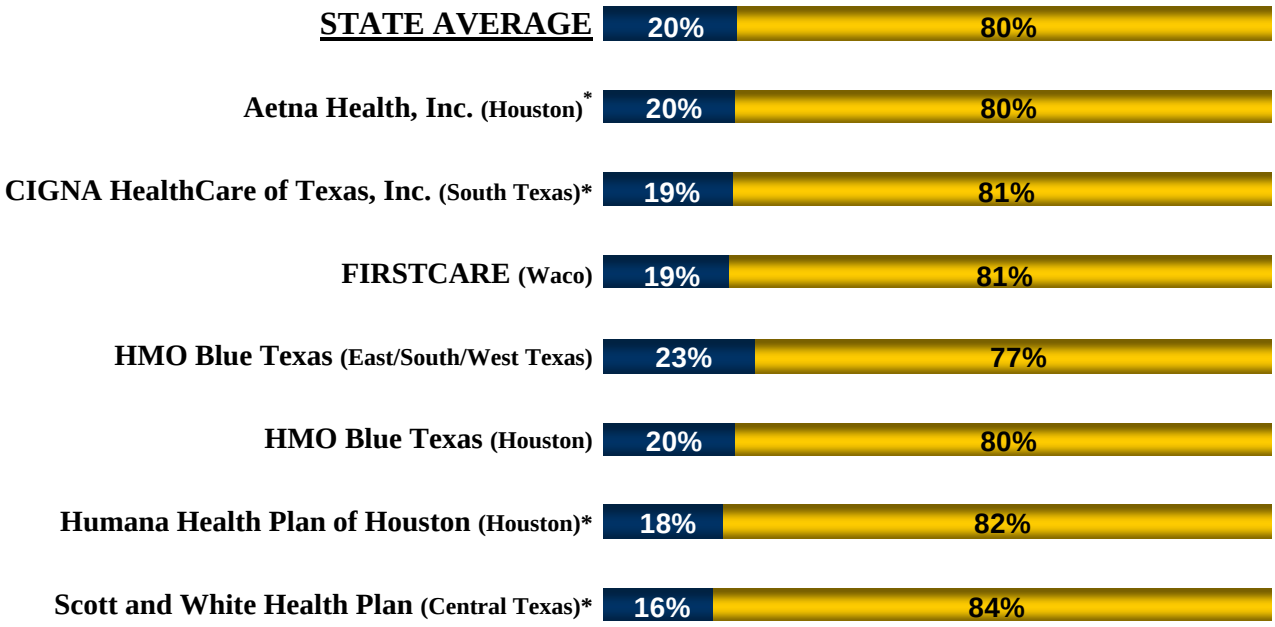
Shared Decision Making

CAHPS® 5.0H Survey Results

Percentage who said **No**, there was no shared decision making	Percentage who said **Yes,** there was shared decision making

The bar graphs show answers to survey questions that asked **whether** when starting or stopping a medicine:

- A doctor or other health provider talk about the reasons you might want to take a medicine?
- A doctor or other health provider talk about the reasons you might not want to take a medicine?
- A doctor or other health provider ask you what you thought was best for you?



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Aetna Health, Inc. (Houston)	**15%**
Aetna Health, Inc. (San Antonio/Corpus Christi)	16%
Allegian Health Plans, Inc. (Harlingen)	17%
CIGNA HealthCare of Texas, Inc. (South Texas)	**16%**
Community First Health Plans (San Antonio)	27%
FIRSTCARE (Abilene)	25%
FIRSTCARE (Amarillo)	32%
FIRSTCARE (Lubbock)	28%
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HMO Blue Texas (Dallas/Fort Worth)	19%
HMO Blue Texas (East/South/West Texas)	**20%**
HMO Blue Texas (Houston)	**18%**
Humana Health Plan of Texas (Austin)	25%
Humana Health Plan of Texas (Corpus Christi)	27%
Humana Health Plan of Texas (Houston)	**20%**
Humana Health Plan of Texas (San Antonio)	25%
Scott and White Health Plan (Central Texas)	**33%**

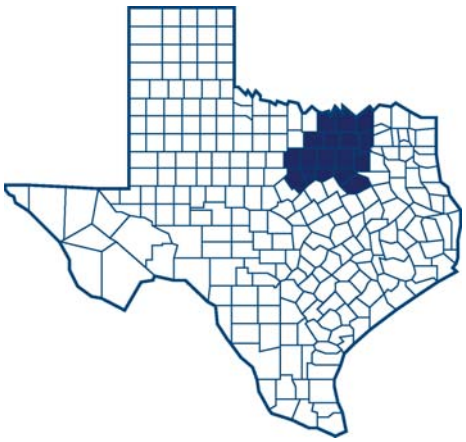
CAHPS® 5.0H Survey Results

for

North Texas Plans

The counties included in the North Texas area are:

Collin	**Fannin**	**Navarro**	**Wise**
Cooke	**Grayson**	**Palo Pinto**	
Dallas	**Hood**	**Parker**	
Denton	**Hunt**	**Rockwall**	
Erath	**Johnson**	**Somervell**	
Ellis	**Kaufman**	**Tarrant**	



This section features survey results for plans that serve the North Texas area. It includes HMOs with a service area that extends into at least one county in the region. The city/area shown after the name indicates the primary area of service. Contact plans directly for details on specific service areas.

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NCQA requires 100 responses to report survey results. OPIC has opted to report data based on 30 or more responses to provide consumers greater access to data to compare HMOs.

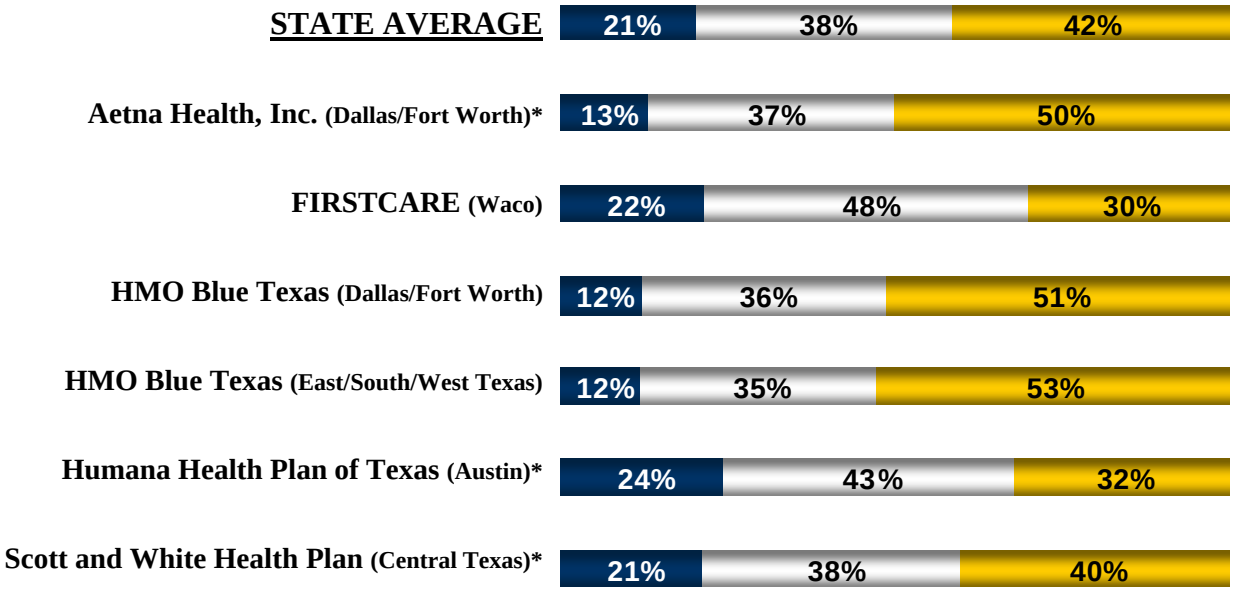
How people rated their health plan

CAHPS® 5.0H Survey Results

Percentage who rated their plan **6 or lower**	Percentage who rated their plan **7 or 8**	Percentage who rated their plan **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their health plan** on a scale from:

0 = "worst health plan possible" to **10** = "best health plan possible"



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

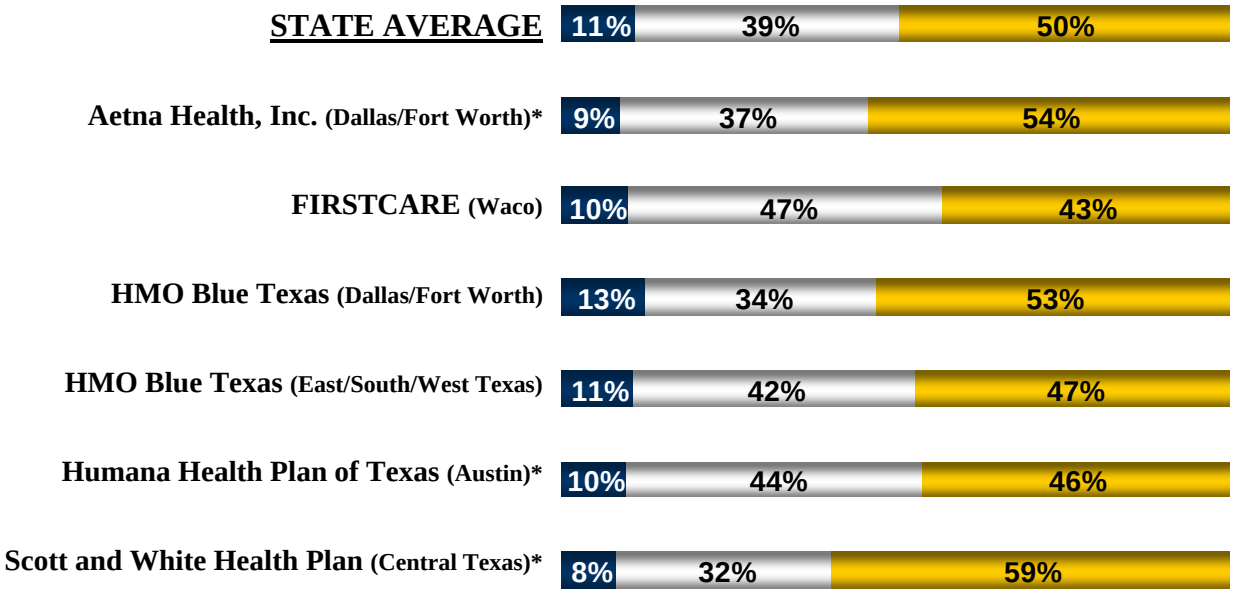
How people rated their healthcare

CAHPS® 5.0H Survey Results

Percentage who rated their care **6 or lower**	Percentage who rated their care **7 or 8**	Percentage who rated their care **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their healthcare** on a scale from:

0 = "worst healthcare possible" to **10** = "best healthcare possible"



Due to rounding, percentages may not add up to 100%.

CAHPS® 5.0H Survey Results - North Texas

* *Includes HMO & POS products. (See page 5 for explanation.)*

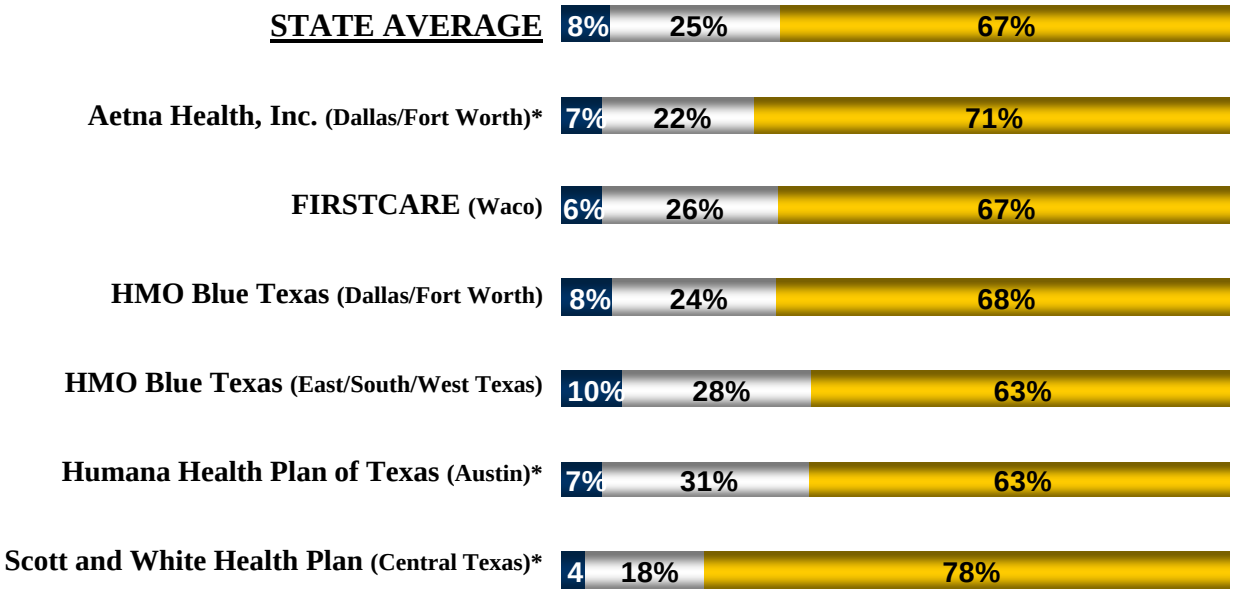
How people rated their personal doctor

CAHPS® 5.0H Survey Results

Percentage who rated their personal doctor **6 or lower**	Percentage who rated their personal doctor **7 or 8**	Percentage who rated their personal doctor **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their personal doctor** on a scale from:

0 = "worst personal doctor possible" to **10** = "best personal doctor possible"



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

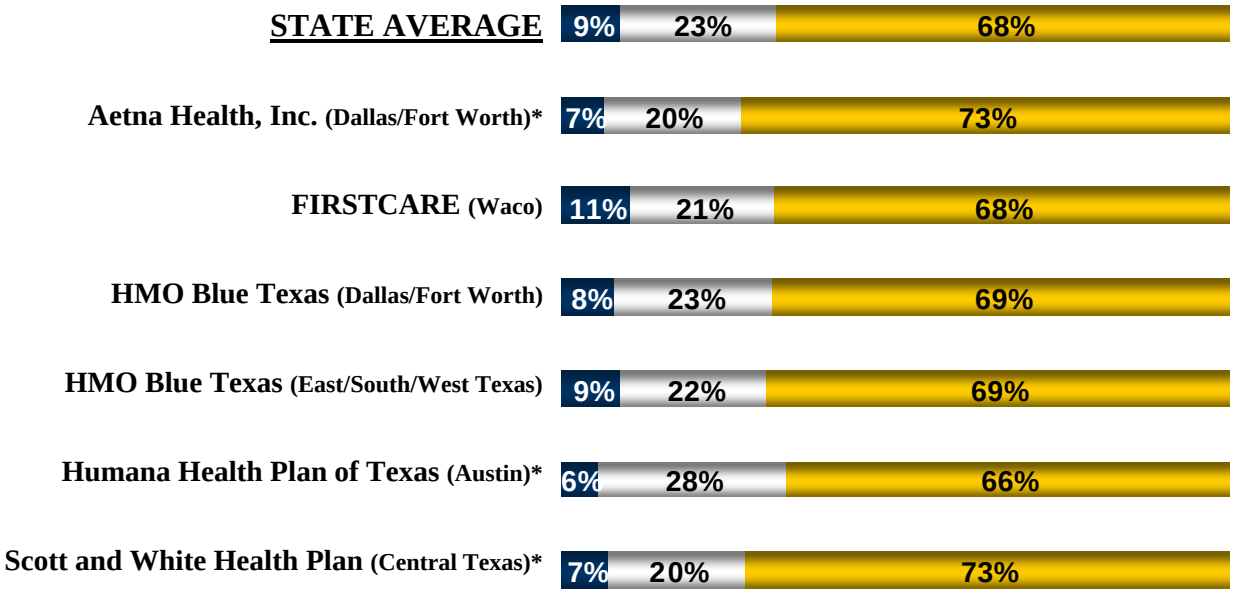
How people rated their specialist

CAHPS® 5.0H Survey Results

Percentage who rated their specialist **6 or lower**	Percentage who rated their specialist **7 or 8**	Percentage who rated their specialist **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their specialist** on a scale from:

0 = "worst specialist possible" to **10** = "best specialist possible"



Due to rounding, percentages may not add up to 100%.

CAHPS® 5.0H Survey Results - North Texas

* *Includes HMO & POS products. (See page 5 for explanation.)*

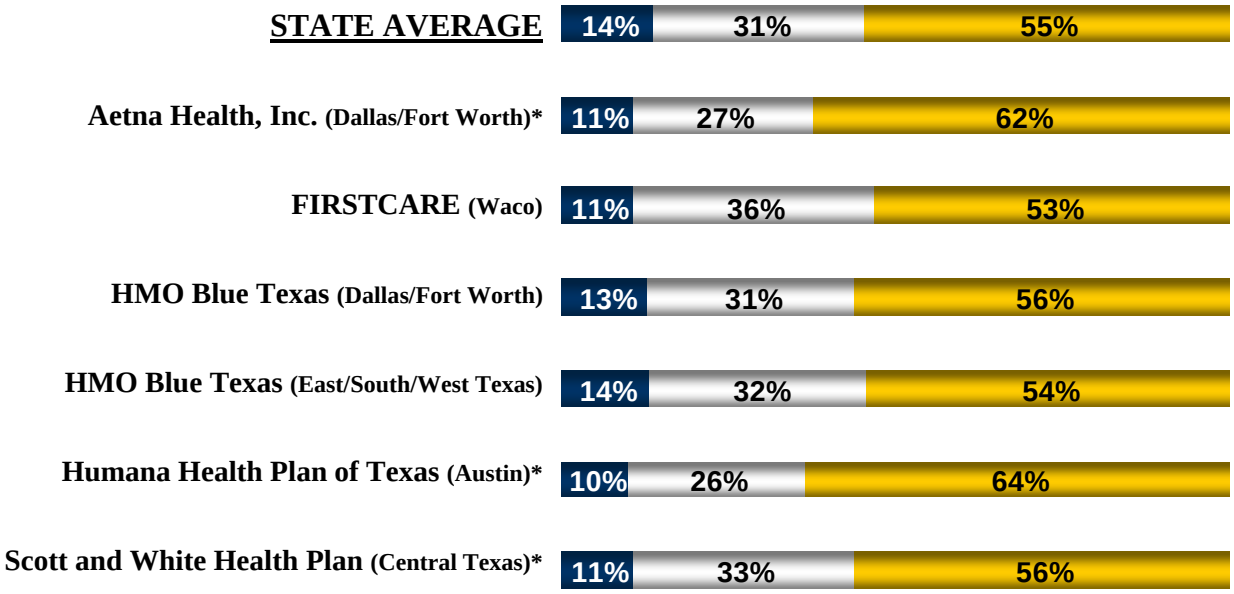
Getting needed care

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** received care that was needed	Percentage who said they **usually** received care that was needed	Percentage who said they **always** received care that was needed

The bar graphs show answers to survey questions that asked people **how often** it was easy for them to:

- Get appointments with specialists.
- Get care, tests or treatment they needed through their health plan.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

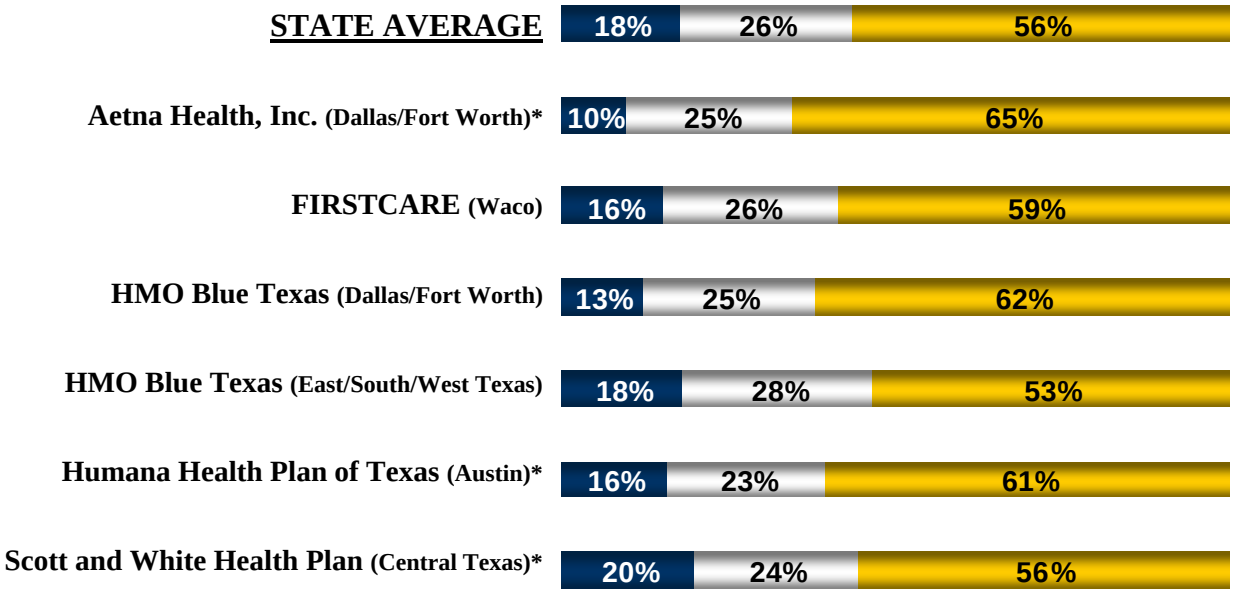
Getting care quickly

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** got care quickly	Percentage who said they **usually** got care quickly	Percentage who said they **always** got care quickly

The bar graphs show answers to survey questions that asked people **how often** they:

- Got care as soon as they thought they needed when they needed care right away.
- Got an appointment as soon as they thought they needed when they did not need care right away.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

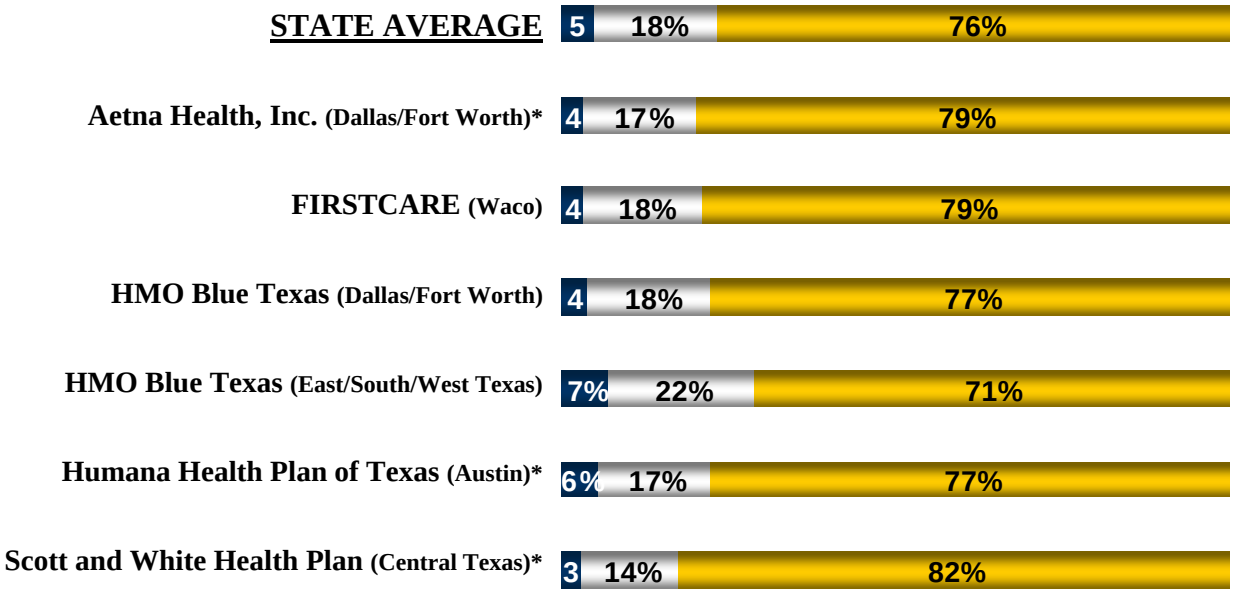
How well doctors communicate

CAHPS® 5.0H Survey Results

Percentage who said their doctors **sometimes or never** communicated well	Percentage who said their doctors **usually** communicated well	Percentage who said their doctors **always** communicated well

The bar graphs show answers to survey questions that asked people **how often** their personal doctor:

- Explained things in a way that was easy for them to understand.
- Listened carefully to them.
- Showed respect for what they had to say.
- Spent enough time with them.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

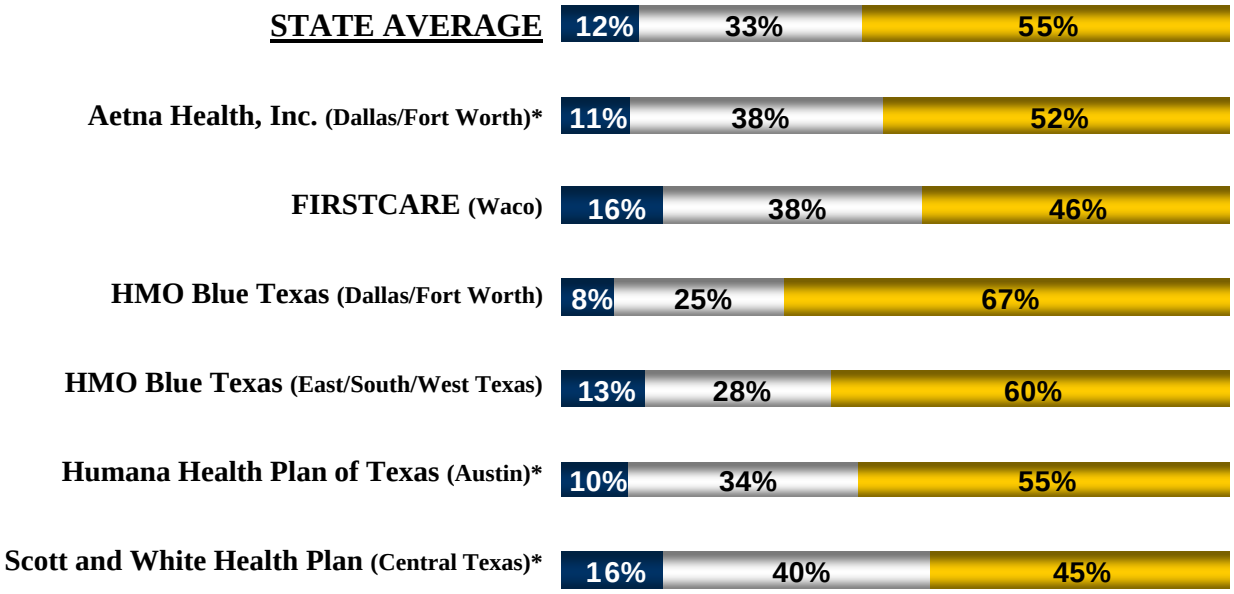
Handling of claims quickly and correctly

CAHPS® 5.0H Survey Results

Percentage who said their plan **sometimes or never** handled claims quickly and correctly	Percentage who said their plan **Usually** handled claims quickly and correctly	Percentage who said their plan **Always** handled claims quickly and correctly

The bar graphs show answers to survey questions that asked people **how often** their health plan:

- Handled claims quickly.
- Handled claims correctly.



Due to rounding, percentages may not add up to 100%.

CAHPS® 5.0H Survey Results - North Texas

* *Includes HMO & POS products. (See page 5 for explanation.)*

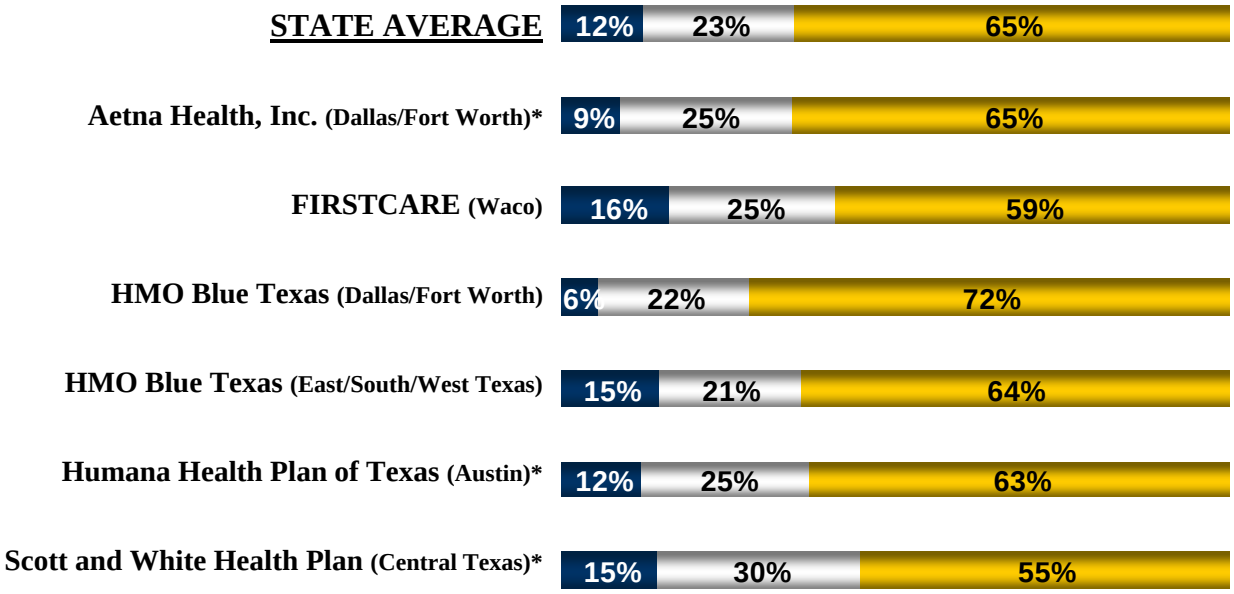
Health plan customer service

CAHPS® 5.0H Survey Results

Percentage who said customer service was **sometimes or never** efficient and helpful	Percentage who said customer service was **usually** efficient and helpful	Percentage who said customer service was **always** efficient and helpful

The bar graphs show answers to survey questions that asked people **how often**:

- They got the information or help they needed from their health plan's customer service.
- Their health plan's customer service staff treated them with courtesy and respect.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

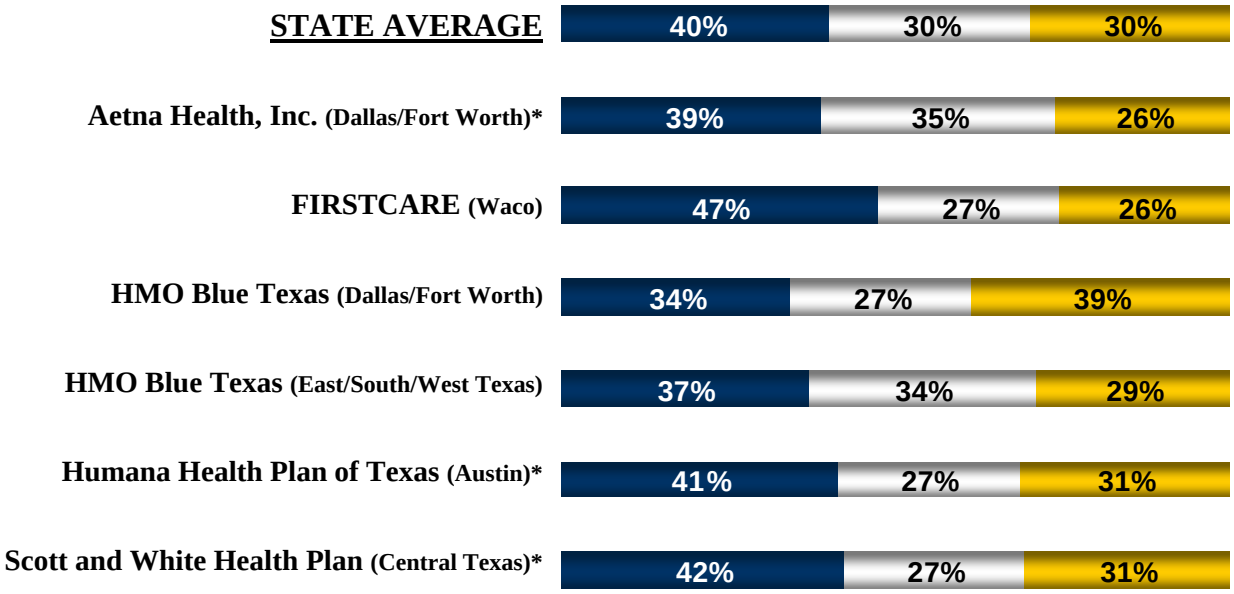
Plan information on costs

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** were able to find out cost info	Percentage who said they **Usually** were able to find out cost info	Percentage who said they **Always** were able to find out cost info

The bar graphs show answers to survey questions that asked people **how often** they were able to find out from their plan:

- How much would have to be paid for a healthcare service or equipment.
- How much would have to be paid for specific prescription medicines.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

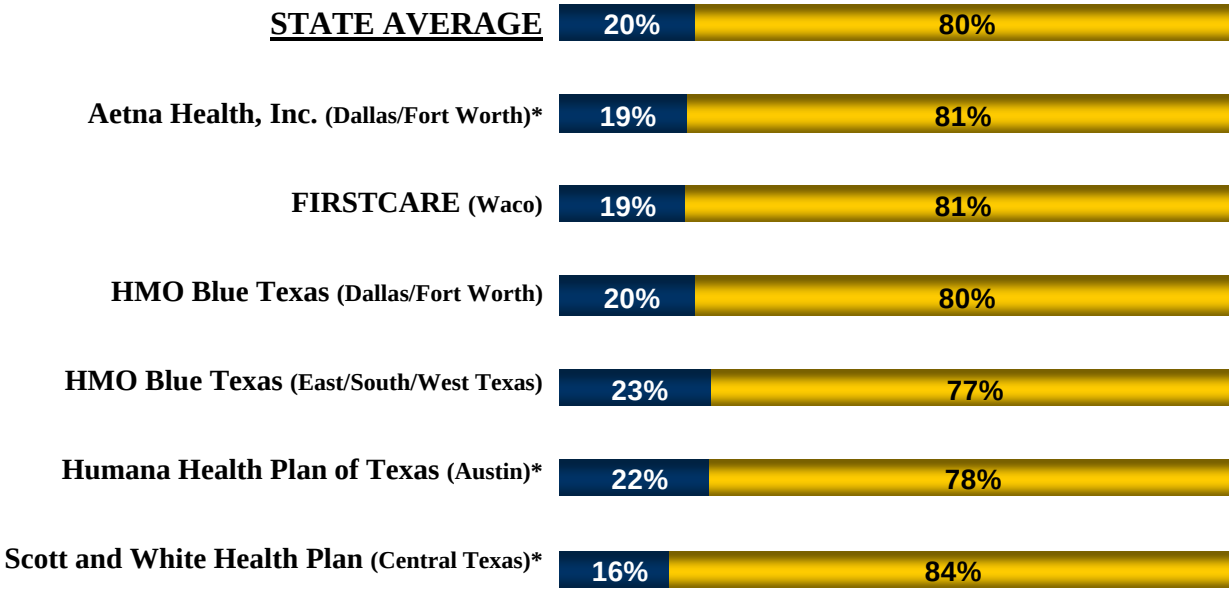
Shared Decision Making

CAHPS® 5.0H Survey Results

Percentage who said **No**, there was no shared decision making	Percentage who said **Yes**, there was shared decision making

The bar graphs show answers to survey questions that asked **whether** when starting or stopping a medicine:

- A doctor or other health provider talk about the reasons you might want to take a medicine?
- A doctor or other health provider talk about the reasons you might not want to take a medicine?
- A doctor or other health provider ask you what you thought was best for you?



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

Response rate for all plans in the survey

Response rate = (completed surveys / [total sample – ineligible])

State Average = 23%

Aetna Health, Inc. (Austin)	17%
Aetna Health, Inc. (Dallas/Fort Worth)	**23%**
Aetna Health, Inc. (Houston)	15%
Aetna Health, Inc. (San Antonio/Corpus Christi)	16%
Allegian Health Plans, Inc. (Harlingen)	17%
CIGNA HealthCare of Texas, Inc. (South Texas)	16%
Community First Health Plans (San Antonio)	27%
FIRSTCARE (Abilene)	25%
FIRSTCARE (Amarillo)	32%
FIRSTCARE (Lubbock)	28%
FIRSTCARE (Waco)	**25%**
HMO Blue Texas (Dallas/Fort Worth)	**19%**
HMO Blue Texas (East/South/West Texas)	**20%**
HMO Blue Texas (Houston)	18%
Humana Health Plan of Texas (Austin)	**25%**
Humana Health Plan of Texas (Corpus Christi)	27%
Humana Health Plan of Texas (Houston)	20%
Humana Health Plan of Texas (San Antonio)	25%
Scott and White Health Plan (Central Texas)	**33%**

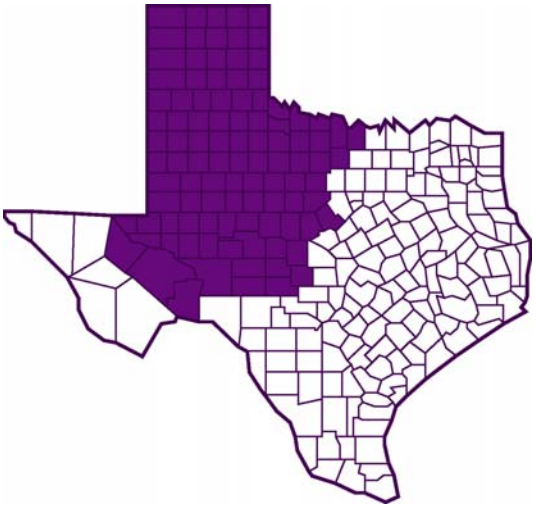
CAHPS® 5.0H Survey Results

for

Panhandle/Plains Texas Plans

The counties included in the Panhandle/Plains Texas area are:

Andrews	Briscoe	Cochran	Crane	Donley	Hutchinson	Montague	Sterling
Archer	Brown	Coke	Crockett	Eastland	Irion	Moore	Stonewall
Armstrong	Callahan	Coleman	Crosby	Ector	Jack	Motley	Sutton
Bailey	Carson	Collingsworth	Dallam	Fisher	Jones	Nolan	Swisher
Baylor	Castro	Comanche	Dawson	Floyd	Kent	Ochiltree	Taylor
Borden	Childress	Concho	Deaf Smith	Foard	Kimble	Oldham	Terrell
	Clay	Cottle	Dickens	Gaines	King	Parmer	Terry
				Garza	Knox	Pecos	Throckmorton
				Glasscock	Lamb	Potter	Tom Green
				Gray	Lipscomb	Randall	Upton
				Hale	Loving	Reagan	Ward
				Hall	Lubbock	Reeves	Wheeler
				Hansford	Lynn	Roberts	Wichita
				Hardeman	Martin	Runnels	Wilbarger
				Hartley	Mason	Schleicher	Winkler
				Haskell	McCulloch	Scurry	Yoakum
				Hemphill	Menard	Shackelford	Young
				Hockley	Midland	Sherman	
				Howard	Mitchell	Stephens	



This section features survey results for plans that serve the Panhandle/Plains Texas area. It includes HMOs with a service area that extends into at least one county in the region. The city/area shown after the name indicates the primary area of service. Contact plans directly for details on specific service areas.

An HMO may be exempt from participation in the survey due to low enrollment or limited participation in the Texas commercial HMO market during 2014.

NCQA requires 100 responses to report survey results. OPIC has opted to report data based on 30 or more responses to provide consumers greater access to data to compare HMOs.

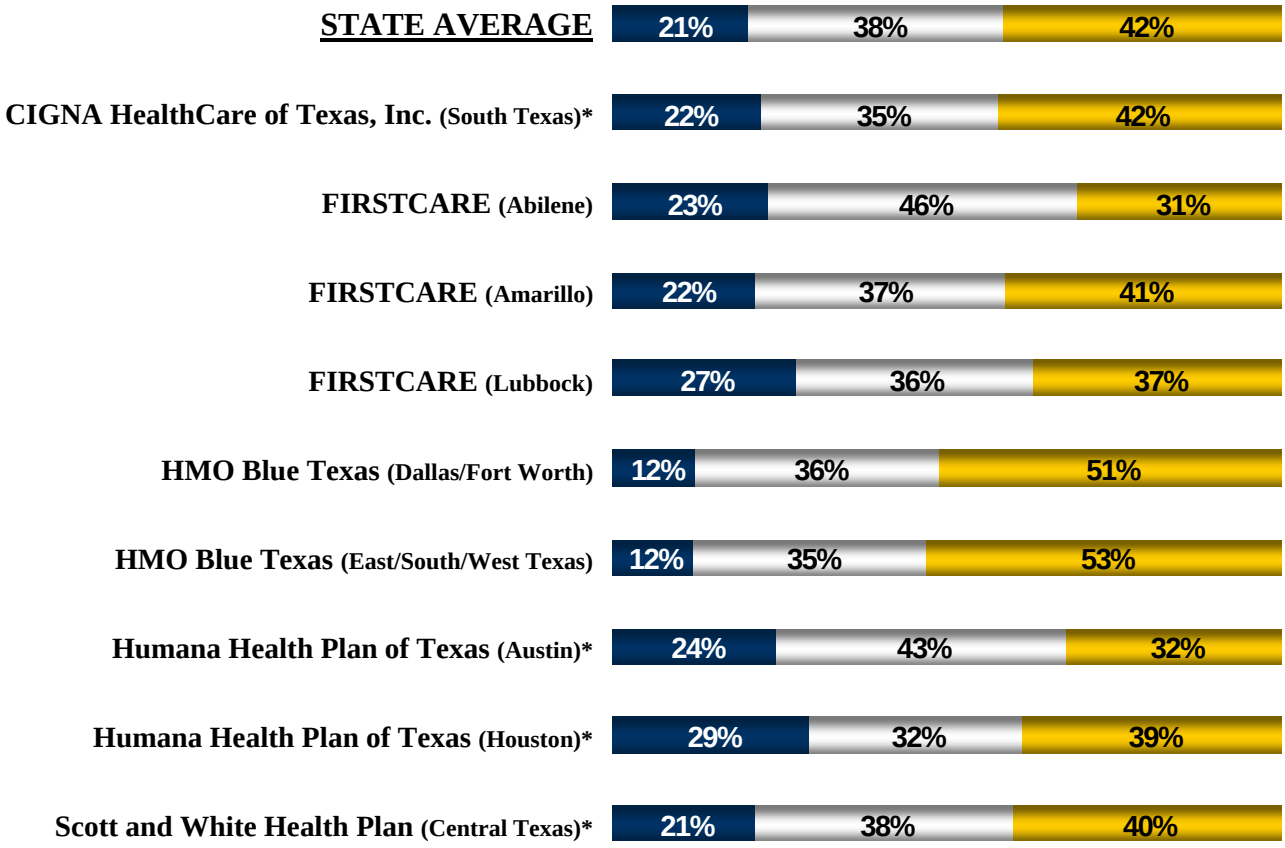
How people rated their health plan

CAHPS® 5.0H Survey Results

Percentage who rated their plan **6 or lower**	Percentage who rated their plan **7 or 8**	Percentage who rated their plan **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their health plan** on a scale from:

0 = "worst health plan possible" to **10** = "best health plan possible"



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

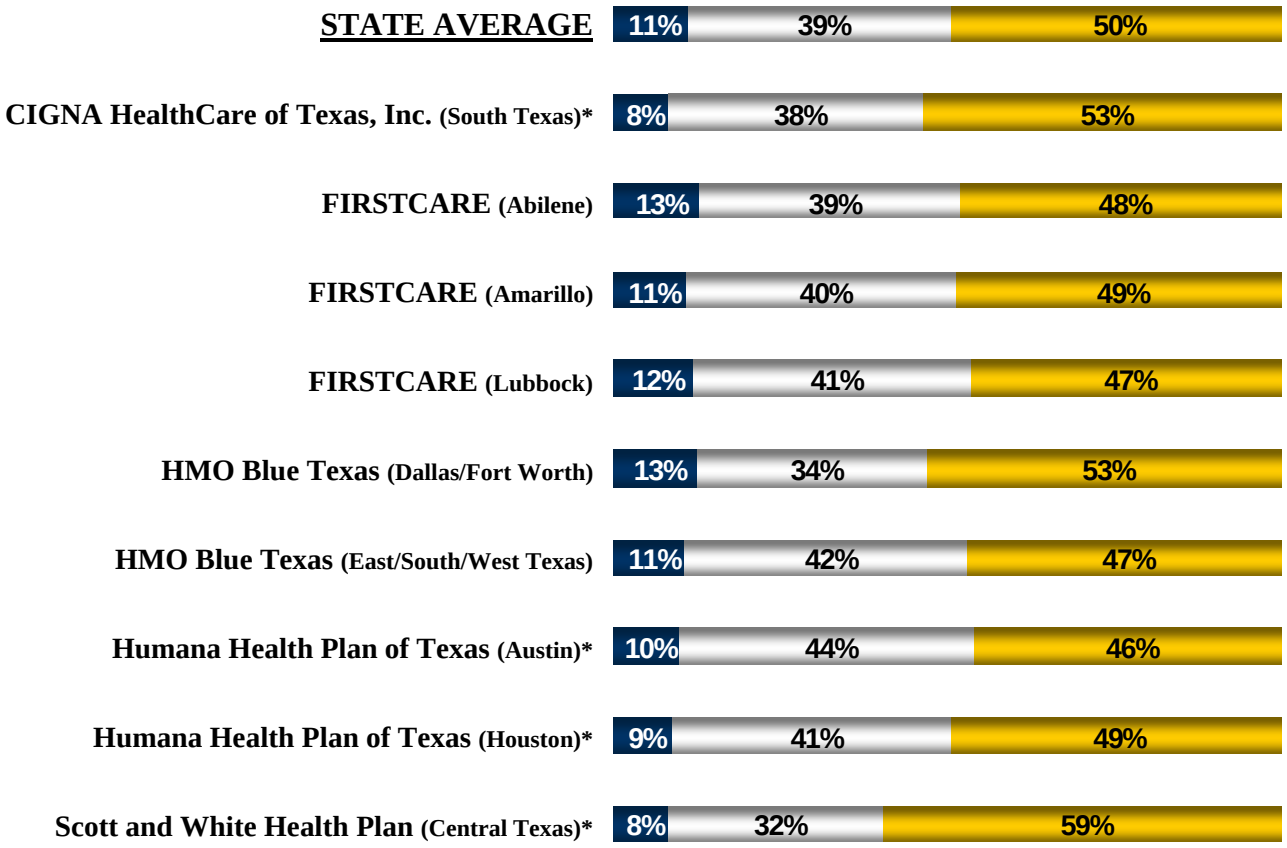
How people rated their healthcare

CAHPS® 5.0H Survey Results

Percentage who rated their care **6 or lower**	Percentage who rated their care **7 or 8**	Percentage who rated their care **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their healthcare** on a scale from:

0 = "worst healthcare possible" to **10** = "best healthcare possible"



Due to rounding, percentages may not add up to 100%.

CAHPS® 5.0H Survey Results - Panhandle/Plains Texas

* *Includes HMO & POS products. (See page 5 for explanation.)*

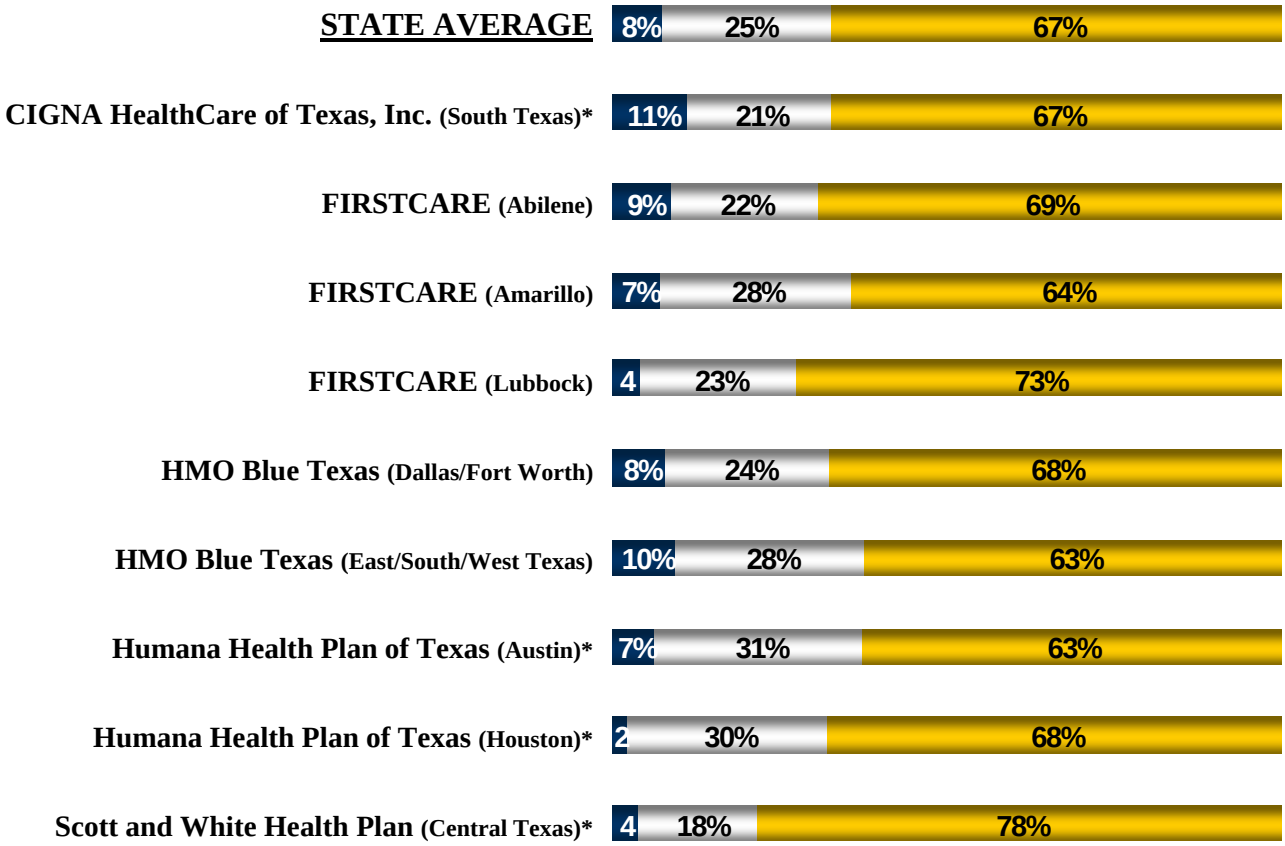
How people rated their personal doctor

CAHPS® 5.0H Survey Results

Percentage who rated their personal doctor **6 or lower**	Percentage who rated their personal doctor **7 or 8**	Percentage who rated their personal doctor **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their personal doctor** on a scale from:

0 = "worst personal doctor possible" to **10** = "best personal doctor possible"



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

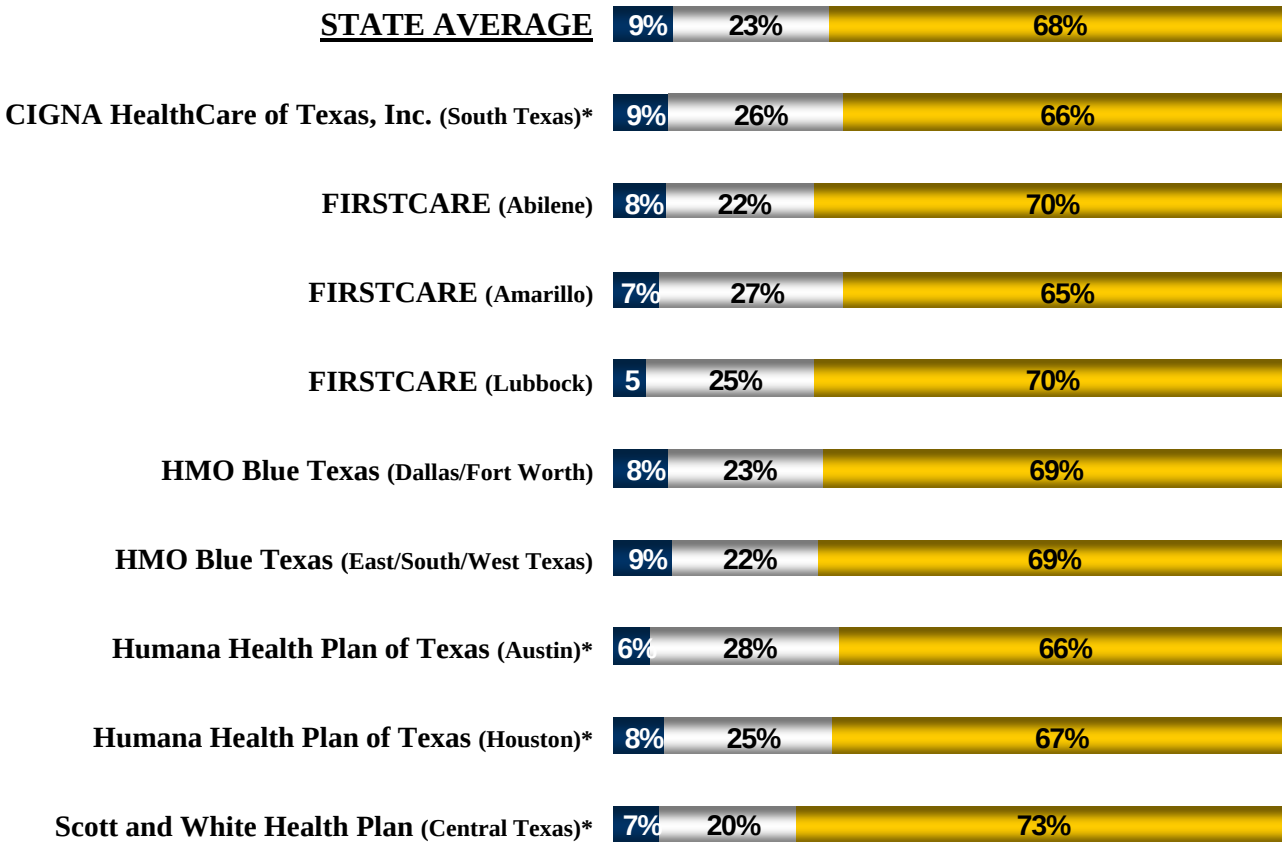
How people rated their specialist

CAHPS® 5.0H Survey Results

Percentage who rated their specialist **6 or lower**	Percentage who rated their specialist **7 or 8**	Percentage who rated their specialist **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their specialist** on a scale from:

0 = "worst specialist possible" to **10** = "best specialist possible"



Due to rounding, percentages may not add up to 100%.

CAHPS® 5.0H Survey Results - Panhandle/Plains Texas

* *Includes HMO & POS products. (See page 5 for explanation.)*

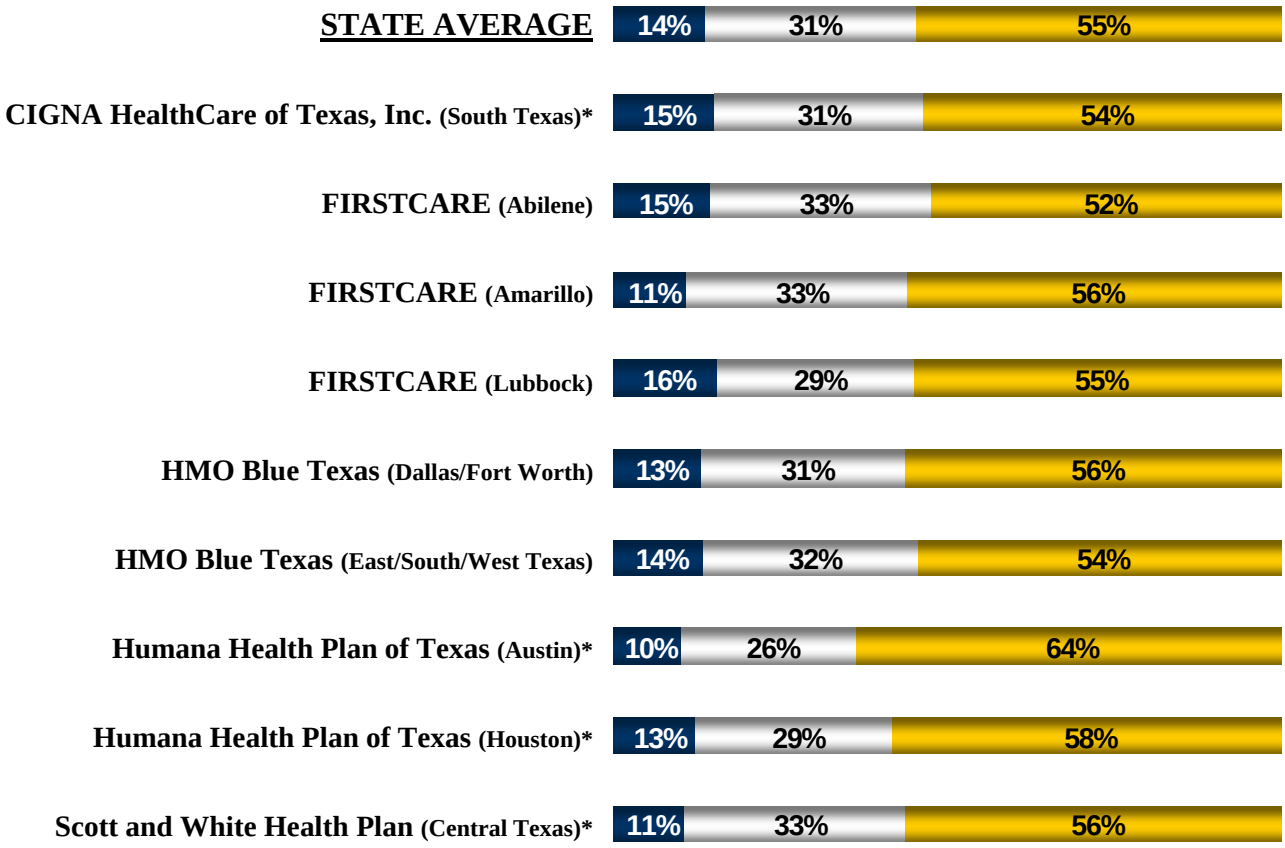
Getting needed care

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** received care that was needed	Percentage who said they **usually** received care that was needed	Percentage who said they **always** received care that was needed

The bar graphs show answers to survey questions that asked people **how often** it was easy for them to:

- Get appointments with specialists.
- Get care, tests or treatment they needed through their health plan.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

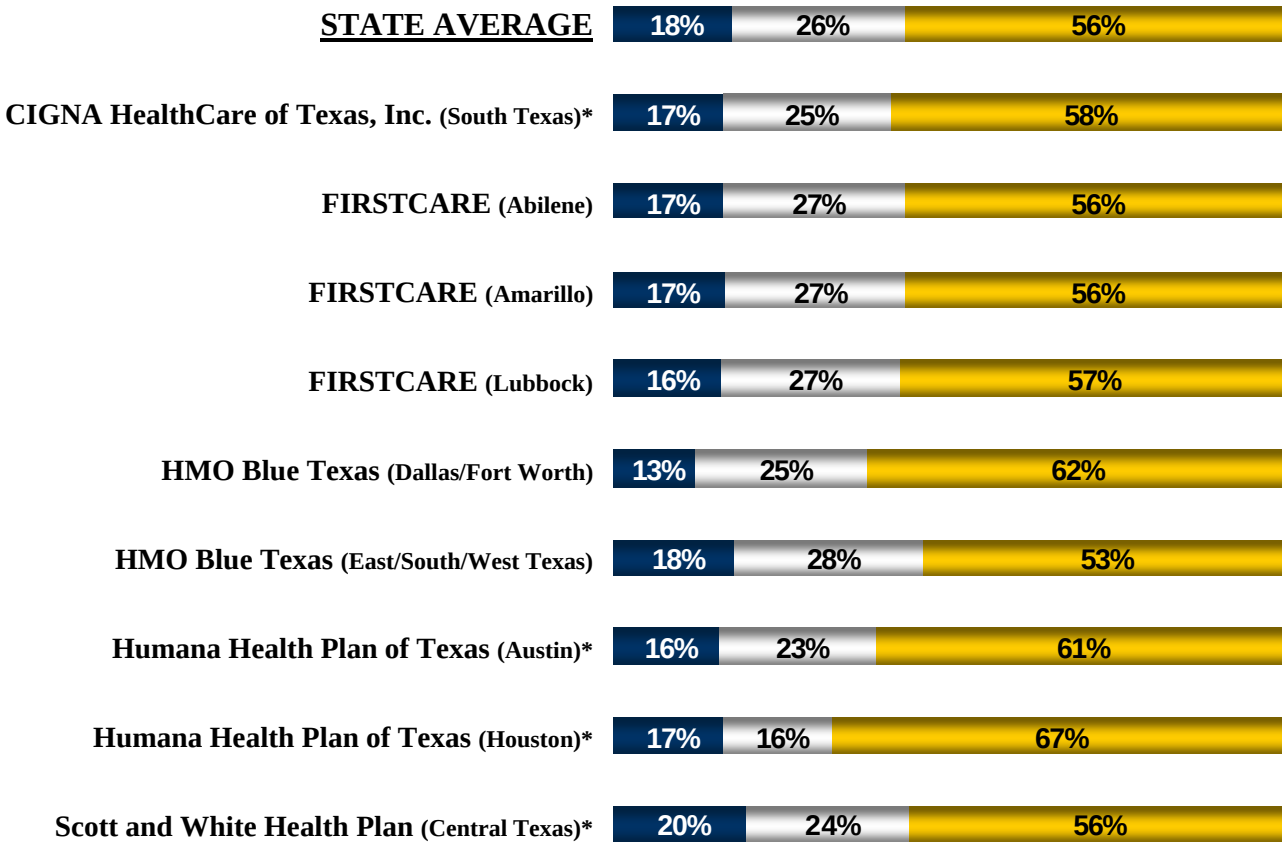
Getting care quickly

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** got care quickly	Percentage who said they **usually** got care quickly	Percentage who said they **always** got care quickly

The bar graphs show answers to survey questions that asked people **how often** they:

- Got care as soon as they thought they needed when they needed care right away.
- Got an appointment as soon as they thought they needed when they did not need care right away.



Due to rounding, percentages may not add up to 100%.

CAHPS® 5.0H Survey Results - Panhandle/Plains Texas

* *Includes HMO & POS products. (See page 5 for explanation.)*

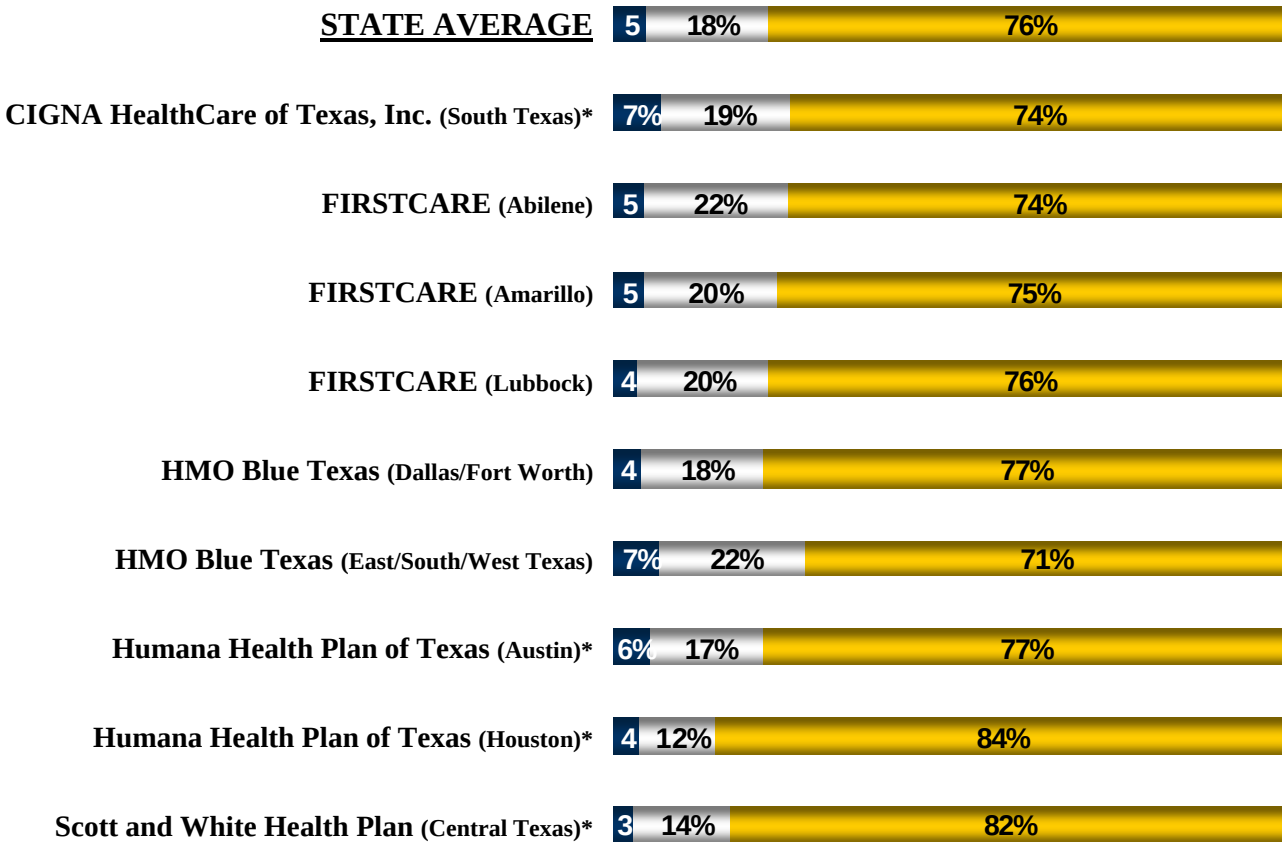
How well doctors communicate

CAHPS® 5.0H Survey Results

Percentage who said their doctors **sometimes or never** communicated well	Percentage who said their doctors **usually** communicated well	Percentage who said their doctors **always** communicated well

The bar graphs show answers to survey questions that asked people **how often** their personal doctor:

- Explained things in a way that was easy for them to understand.
- Listened carefully to them.
- Showed respect for what they had to say.
- Spent enough time with them.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

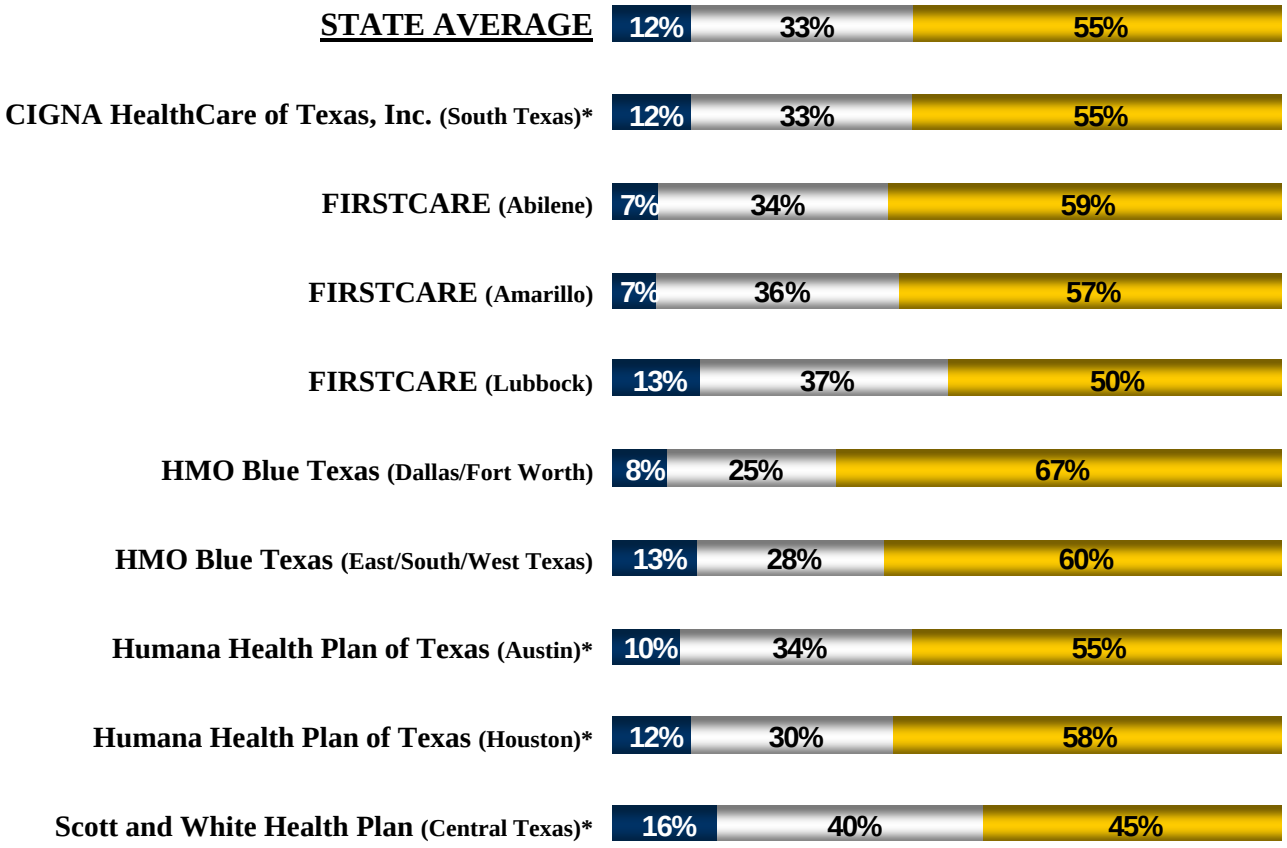
Handling of claims quickly and correctly

CAHPS® 5.0H Survey Results

Percentage who said their plan **sometimes or never** handled claims quickly and correctly	Percentage who said their plan **Usually** handled claims quickly and correctly	Percentage who said their plan **Always** handled claims quickly and correctly

The bar graphs show answers to survey questions that asked people **how often** their health plan:

- Handled claims quickly.
- Handled claims correctly.



Due to rounding, percentages may not add up to 100%.

CAHPS® 5.0H Survey Results - Panhandle/Plains Texas

* *Includes HMO & POS products. (See page 5 for explanation.)*

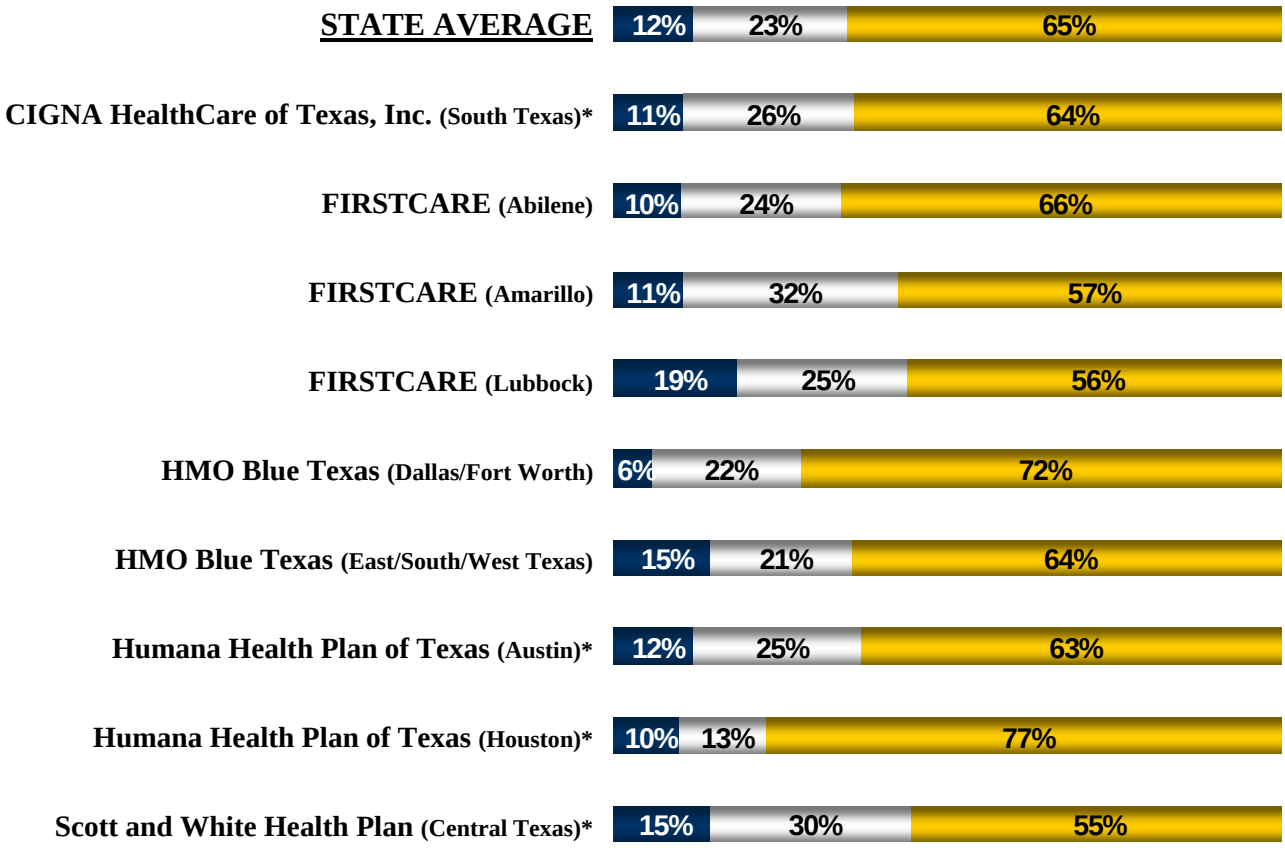
Health plan customer service

CAHPS® 5.0H Survey Results

Percentage who said customer service was **sometimes or never** efficient and helpful	Percentage who said customer service was **usually** efficient and helpful	Percentage who said customer service was **always** efficient and helpful

The bar graphs show answers to survey questions that asked people **how often**:

- They got the information or help they needed from their health plan's customer service.
- Their health plan's customer service staff treated them with courtesy and respect.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

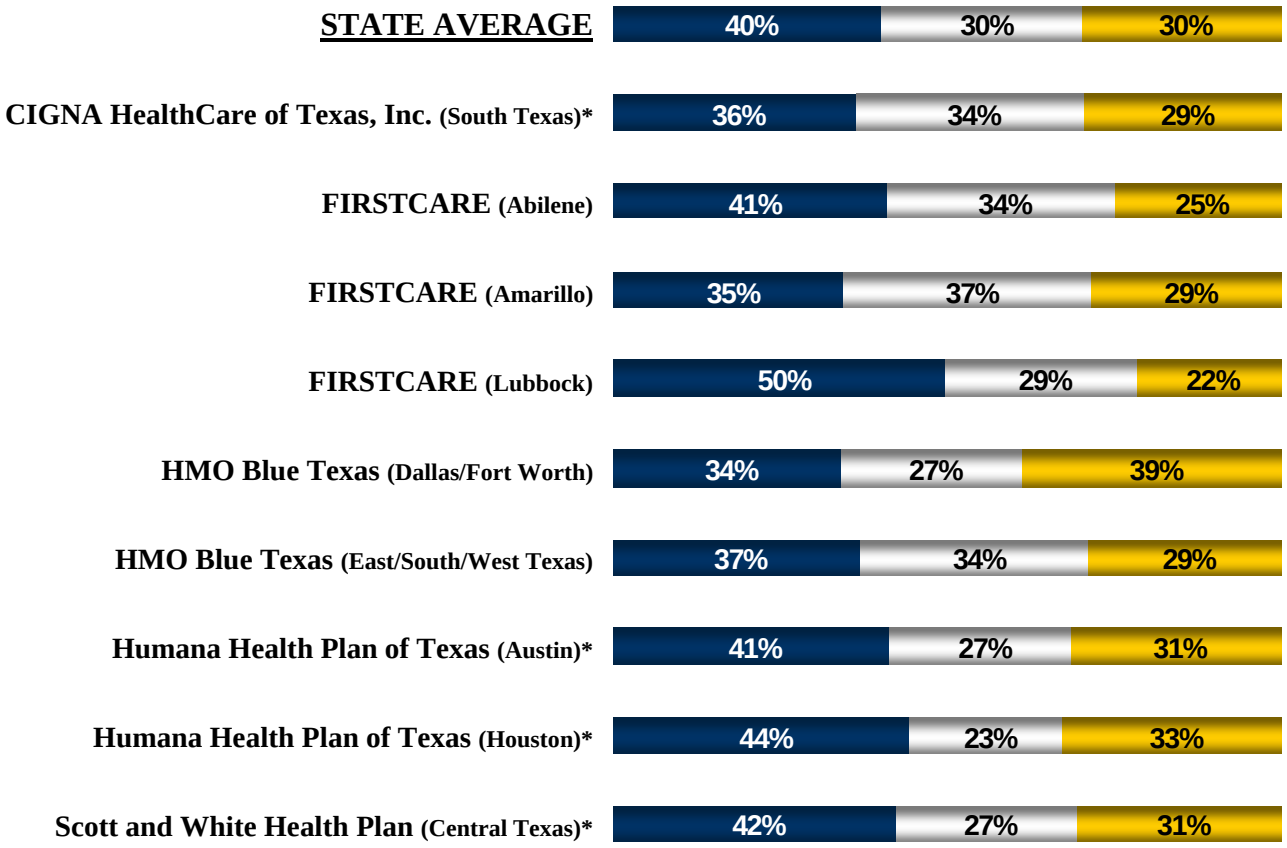
Plan information on costs

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** were able to find out cost info	Percentage who said they **Usually** were able to find out cost info	Percentage who said they **Always** were able to find out cost info

The bar graphs show answers to survey questions that asked people **how often** they were able to find out from their plan:

- How much would have to be paid for a healthcare service or equipment.
- How much would have to be paid for specific prescription medicines.



Due to rounding, percentages may not add up to 100%.

CAHPS® 5.0H Survey Results - Panhandle/Plains Texas

* *Includes HMO & POS products. (See page 5 for explanation.)*

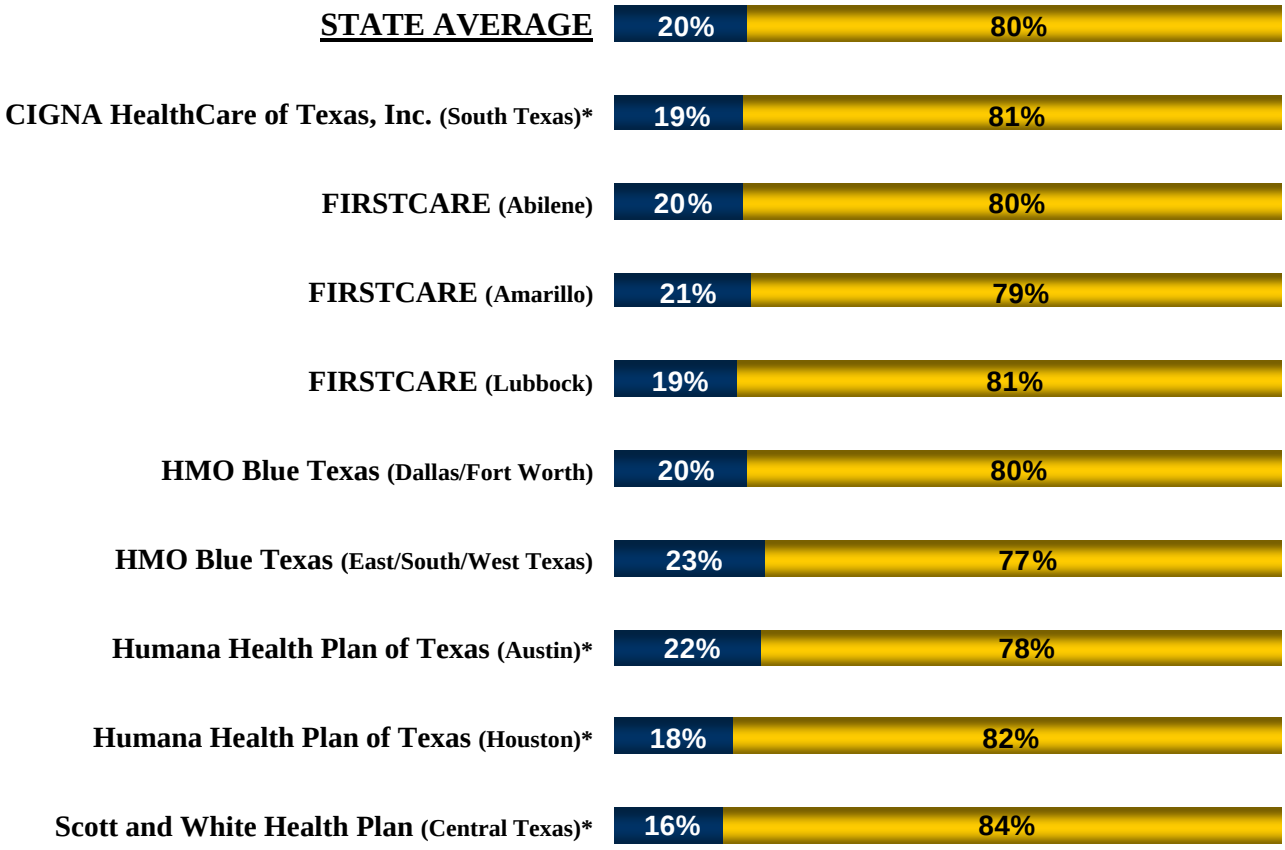
Shared Decision Making

CAHPS® 5.0H Survey Results

Percentage who said **No**, there was no shared decision making	Percentage who said **Yes**, there was shared decision making

The bar graphs show answers to survey questions that asked **whether** when starting or stopping a medicine:

- A doctor or other health provider talk about the reasons you might want to take a medicine?
- A doctor or other health provider talk about the reasons you might not want to take a medicine?
- A doctor or other health provider ask you what you thought was best for you?



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Response rate for all plans in the survey

Response rate = (completed surveys / [total sample – ineligible])

State Average = 23%

Aetna Health, Inc. (Austin)	17%
Aetna Health, Inc. (Dallas/Fort Worth)	23%
Aetna Health, Inc. (Houston)	15%
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Allegian Health Plans, Inc. (Harlingen)	17%
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Humana Health Plan of Texas (Austin)	**25%**
Humana Health Plan of Texas (Corpus Christi)	27%
Humana Health Plan of Texas (Houston)	**20%**
Humana Health Plan of Texas (San Antonio)	25%
Scott and White Health Plan (Central Texas)	**33%**

CAHPS® 5.0H Survey Results

for

South Texas Plans

The counties included in the South Texas area are:

Aransas	Cameron	Gillespie	Jim Wells	La Salle	Real	Webb
Atascosa	Comal	Goliad	Karnes	Lavaca	Refugio	Willacy
Bandera	De Witt	Gonzales	Kendall	Live Oak	San Patricio	Wilson
Bee	Dimmitt	Guadalupe	Kenedy	Maverick	Starr	Zapata
Bexar	Duval	Hidalgo	Kerr	McMullen	Uvalde	Zavala
Brooks	Edwards	Jackson	Kinney	Medina	Val Verde	
Calhoun	Frio	Jim Hogg	Kleberg	Nueces	Victoria	

This section features survey results for plans that serve the South Texas area. It includes HMOs with a service area that extends into at least one county in the region. The city/area shown after the name indicates the primary area of service. Contact plans directly for details on specific service areas.

An HMO may be exempt from participation in the survey due to low enrollment or limited participation in the Texas commercial HMO market during 2014.

NCQA requires 100 responses to report survey results. OPIC has opted to report data based on 30 or more responses to provide consumers greater access to data to compare HMOs.

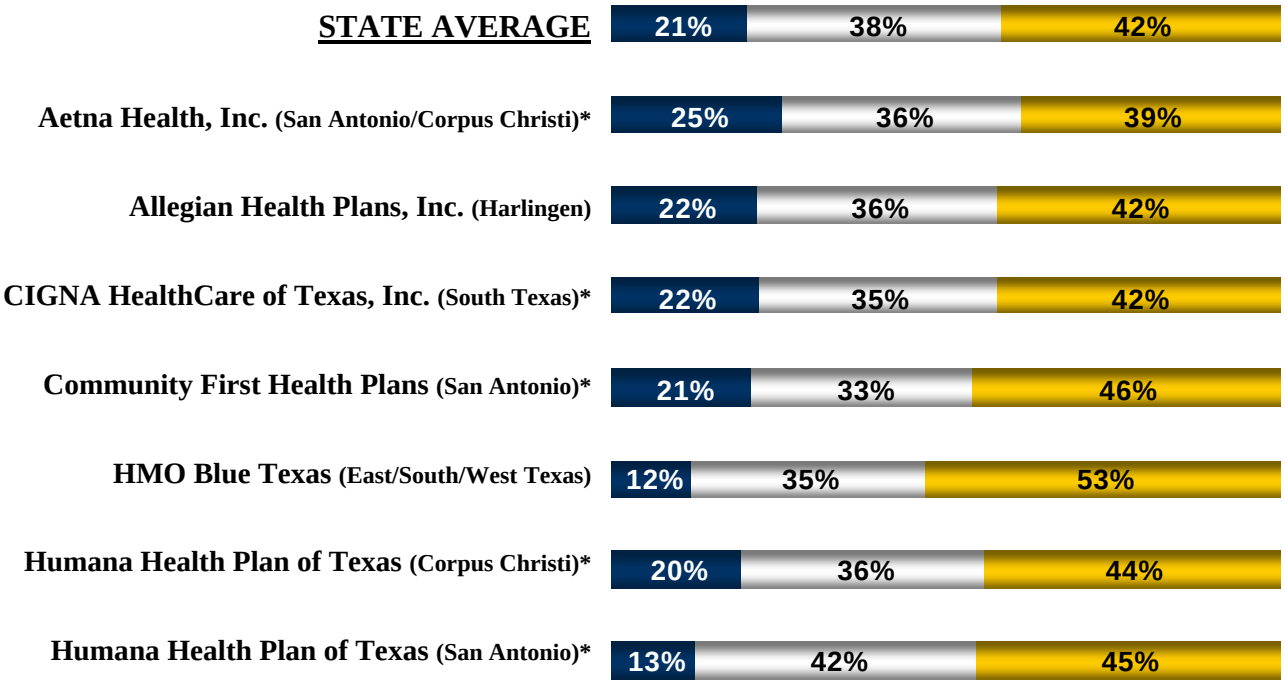
How people rated their health plan

CAHPS® 5.0H Survey Results

Percentage who rated their plan **6 or lower**	Percentage who rated their plan **7 or 8**	Percentage who rated their plan **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their health plan** on a scale from:

0 = "worst health plan possible" to **10** = "best health plan possible"



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

How people rated their healthcare

CAHPS® 5.0H Survey Results

Percentage who rated their care **6 or lower**	Percentage who rated their care **7 or 8**	Percentage who rated their care **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their healthcare** on a scale from:

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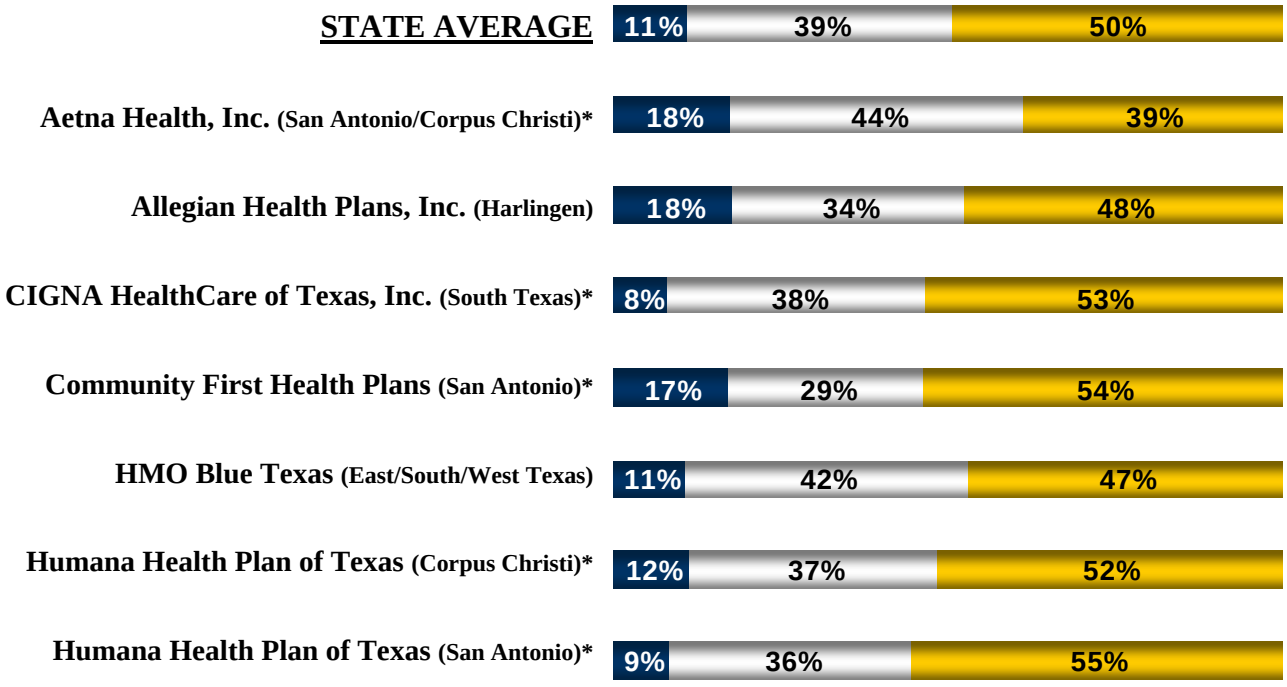

Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

How people rated their personal doctor

CAHPS® 5.0H Survey Results

Percentage who rated their personal doctor **6 or lower**	Percentage who rated their personal doctor **7 or 8**	Percentage who rated their personal doctor **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their personal doctor** on a scale from:

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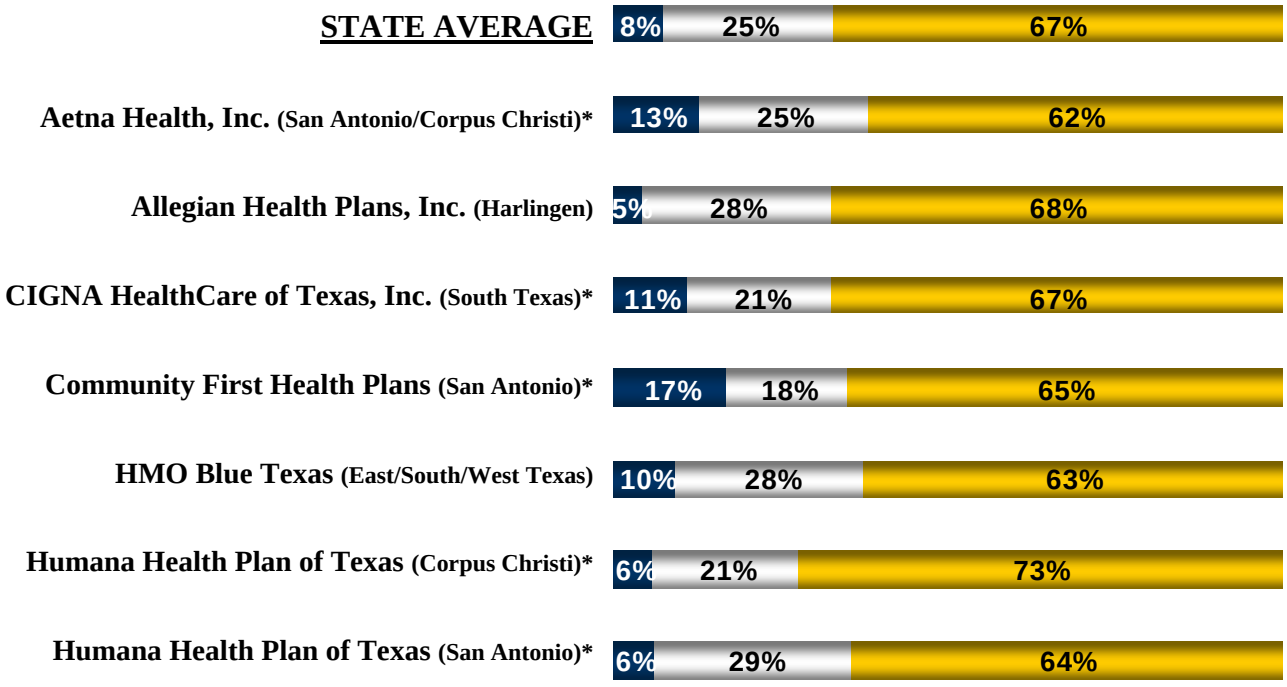

Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

How people rated their specialist

CAHPS® 5.0H Survey Results

Percentage who rated their specialist **6 or lower**	Percentage who rated their specialist **7 or 8**	Percentage who rated their specialist **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their specialist** on a scale from:

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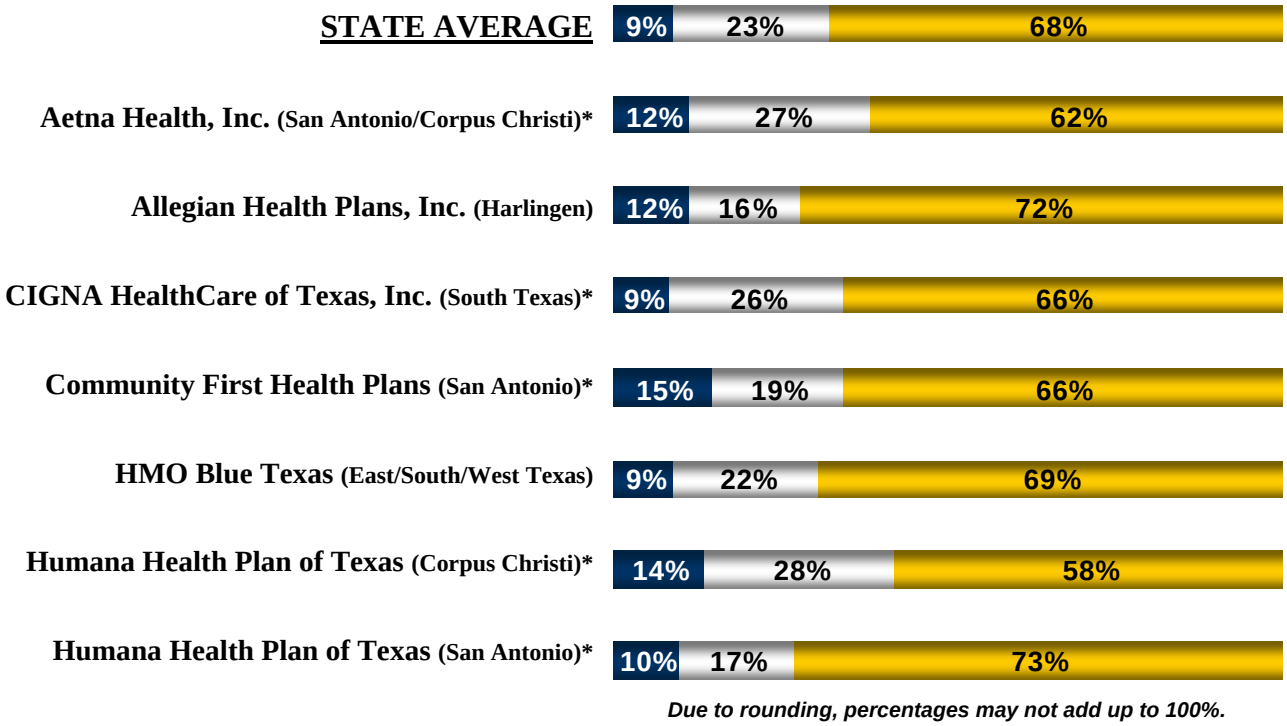


Due to rounding, percentages may not add up to 100%.

CAHPS® 5.0H Survey Results - South Texas

* *Includes HMO & POS products. (See page 5 for explanation.)*

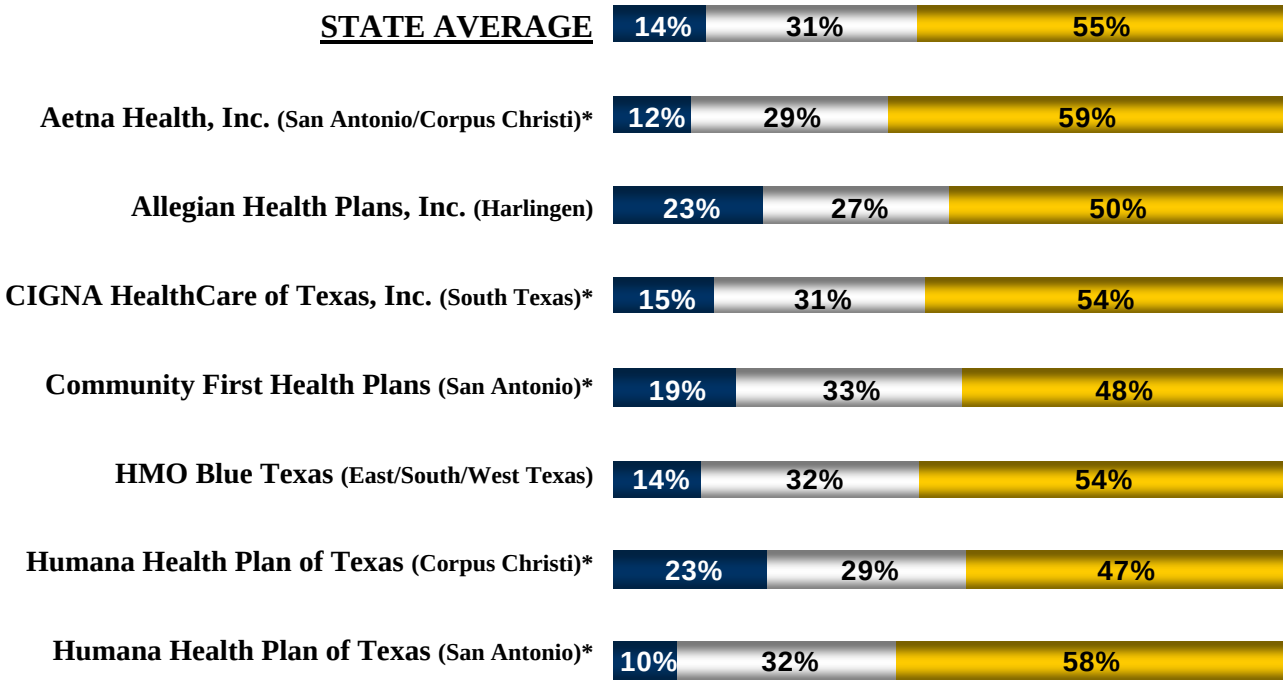
Getting needed care

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** received care that was needed	Percentage who said they **usually** received care that was needed	Percentage who said they **always** received care that was needed

The bar graphs show answers to survey questions that asked people **how often** it was easy for them to:

- Get appointments with specialists.
- Get care, tests or treatment they needed through their health plan.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

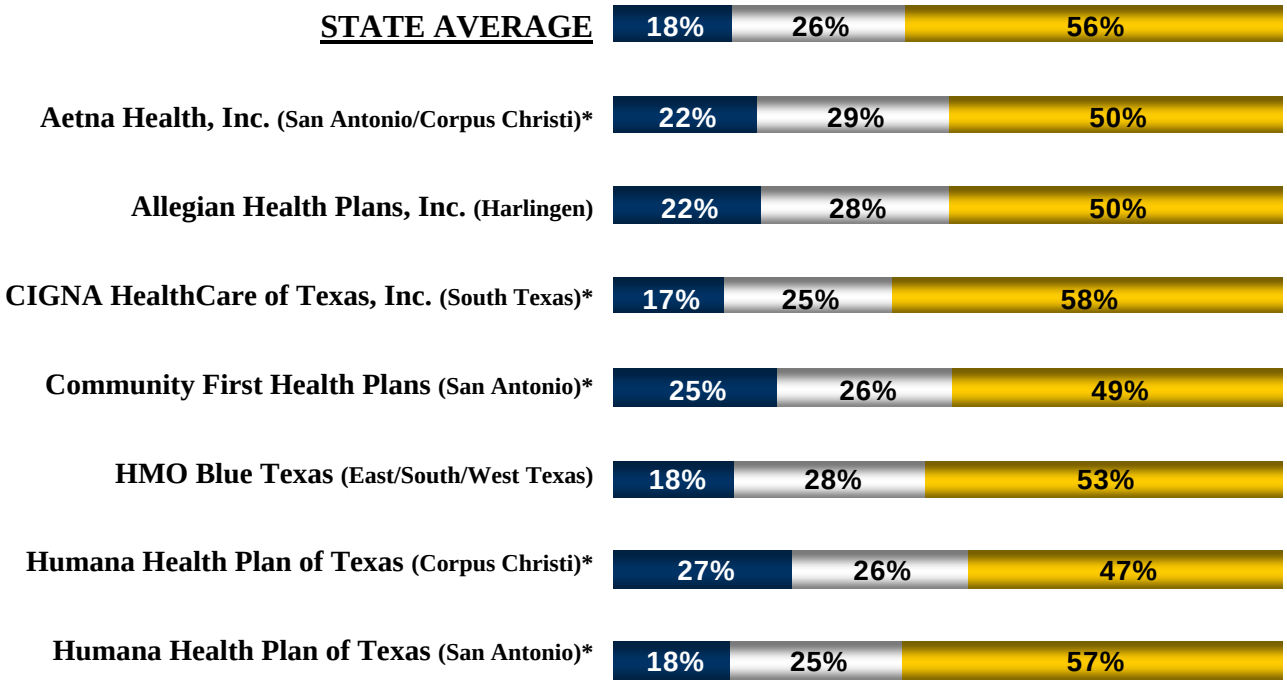
Getting care quickly

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** got care quickly	Percentage who said they **usually** got care quickly	Percentage who said they **always** got care quickly

The bar graphs show answers to survey questions that asked people **how often** they:

- Got care as soon as they thought they needed, when they needed care right away.
- Got an appointment as soon as they thought they needed when they did not need care right away.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

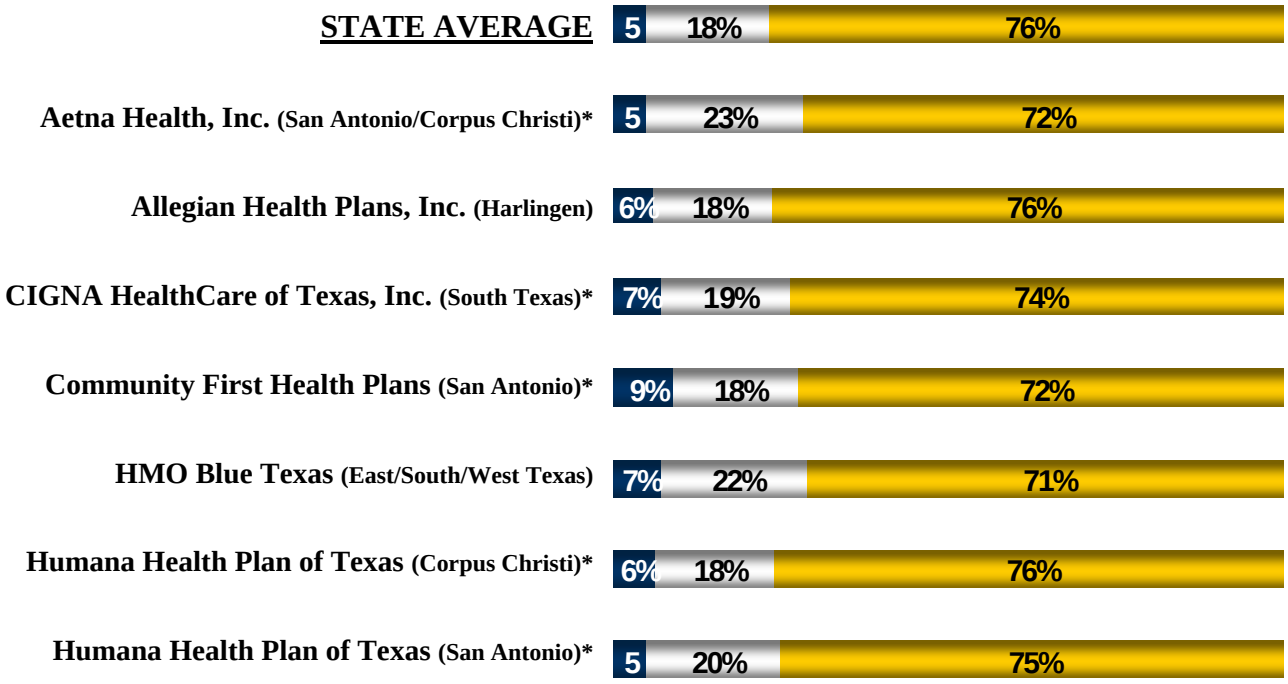
How well doctors communicate

CAHPS® 5.0H Survey Results

Percentage who said their doctors **sometimes or never** communicated well	Percentage who said their doctors **usually** communicated well	Percentage who said their doctors **always** communicated well

The bar graphs show answers to survey questions that asked people **how often** their personal doctor:

- Explained things in a way that was easy for them to understand.
- Listened carefully to them.
- Showed respect for what they had to say.
- Spent enough time with them.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

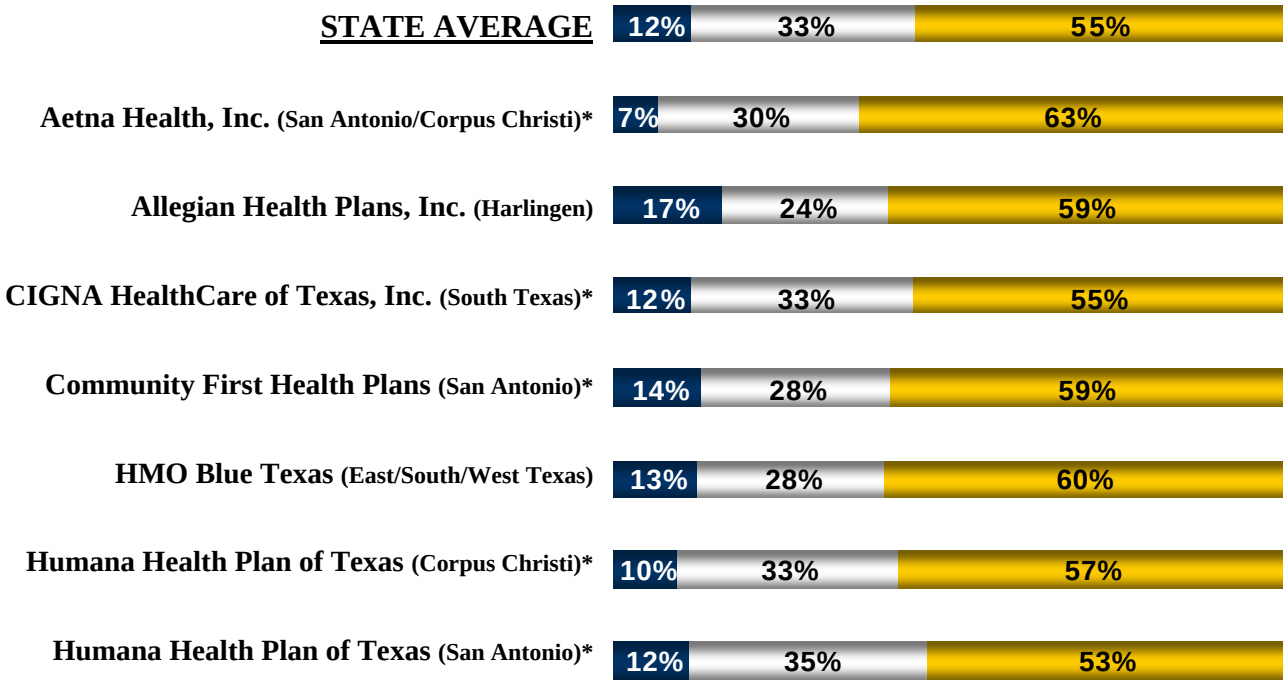
Handling of claims quickly and correctly

CAHPS® 5.0H Survey Results

Percentage who said their plan **sometimes or never** handled claims quickly and correctly	Percentage who said their plan **Usually** handled claims quickly and correctly	Percentage who said their plan **Always** handled claims quickly and correctly

The bar graphs show answers to survey questions that asked people **how often** their health plan:

- Handled claims quickly.
- Handled claims correctly.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

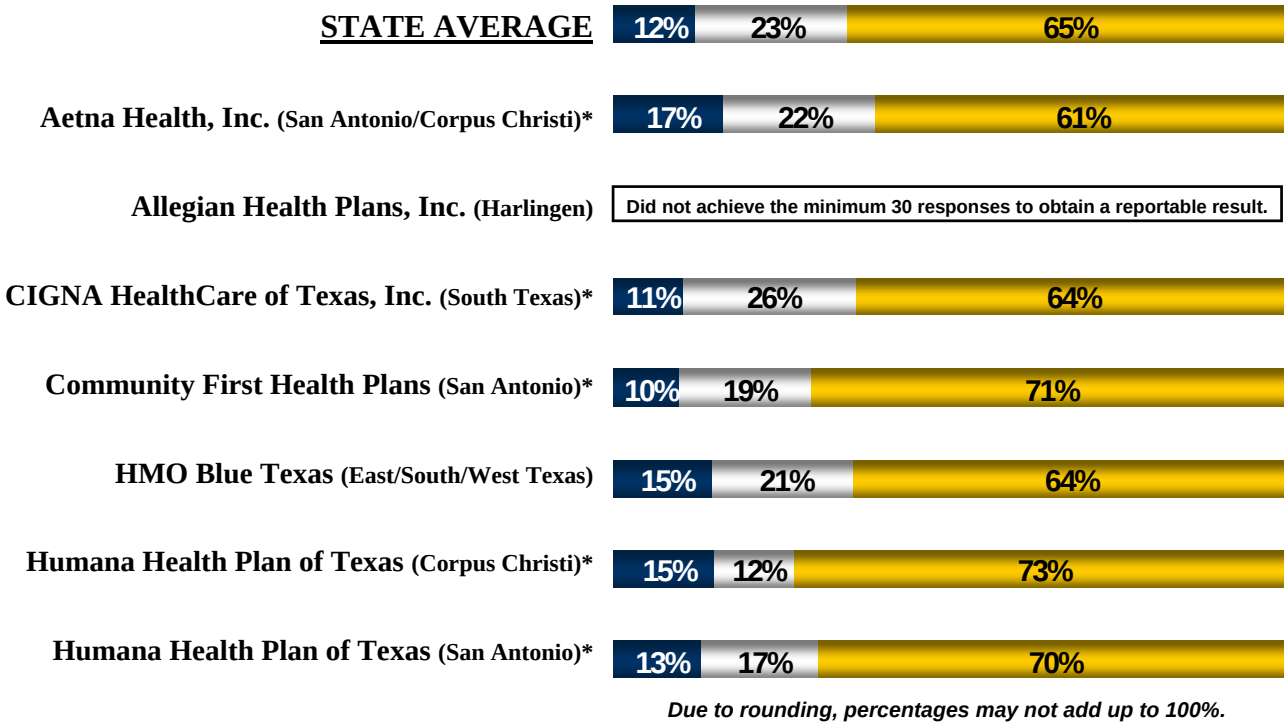
Health plan customer service

CAHPS® 5.0H Survey Results

Percentage who said customer service was **sometimes or never** efficient and helpful	Percentage who said customer service was **usually** efficient and helpful	Percentage who said customer service was **always** efficient and helpful

The bar graphs show answers to survey questions that asked people **how often**:

- They got the information or help they needed from their health plan's customer service.
- Their health plan's customer service staff treated them with courtesy and respect.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

Plan information on costs

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** were able to find out cost info	Percentage who said they **Usually** were able to find out cost info	Percentage who said they **Always** were able to find out cost info

The bar graphs show answers to survey questions that asked people **how often** they were able to find out from their plan:

- How much would have to be paid for a healthcare service or equipment.
- How much would have to be paid for specific prescription medicines.

	Sometimes or never	Usually	Always
STATE AVERAGE	40%	30%	30%
Aetna Health, Inc. (San Antonio/Corpus Christi)*	40%	29%	30%
Allegian Health Plans, Inc. (Harlingen)	Did not achieve the minimum 30 responses to obtain a reportable result.		
CIGNA HealthCare of Texas, Inc. (South Texas)*	36%	34%	29%
Community First Health Plans (San Antonio)*	39%	27%	34%
HMO Blue Texas (East/South/West Texas)	37%	34%	29%
Humana Health Plan of Texas (Corpus Christi)*	38%	36%	27%
Humana Health Plan of Texas (San Antonio)*	34%	28%	38%

Due to rounding, percentages may not add up to 100%.

CAHPS® 5.0H Survey Results - South Texas

* *Includes HMO & POS products.* *(See page 5 for explanation.)*

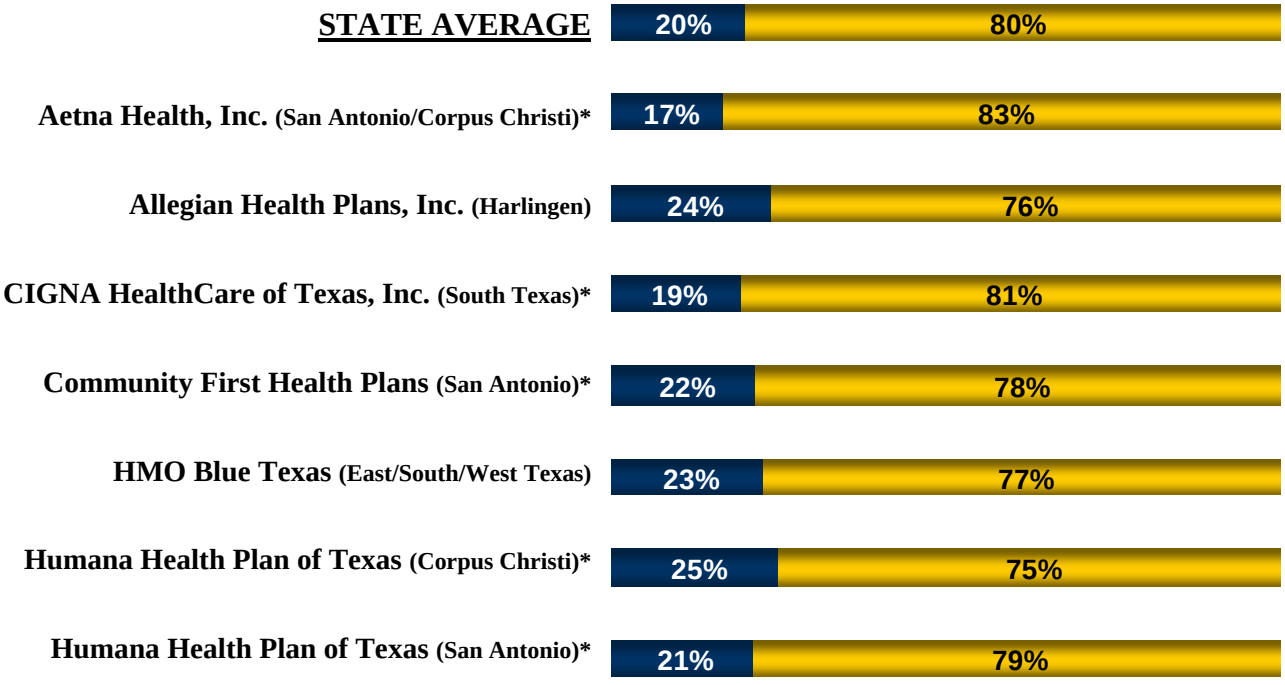
Shared Decision Making

CAHPS® 5.0H Survey Results

Percentage who said **No**, there was no shared decision making	Percentage who said **Yes**, there was shared decision making

The bar graphs show answers to survey questions that asked **whether** when starting or stopping a medicine:

- A doctor or other health provider talk about the reasons you might want to take a medicine?
- A doctor or other health provider talk about the reasons you might not want to take a medicine?
- A doctor or other health provider ask you what you thought was best for you?



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

Response rate for all plans in the survey

Response rate = (completed surveys / [total sample – ineligible])

State Average = 23%

Aetna Health, Inc. (Austin)	17%
Aetna Health, Inc. (Dallas/Fort Worth)	23%
Aetna Health, Inc. (Houston)	15%
Aetna Health, Inc. (San Antonio/Corpus Christi)	**16%**
Allegian Health Plans, Inc. (Harlingen)	**17%**
CIGNA HealthCare of Texas, Inc. (South Texas)	**16%**
Community First Health Plans (San Antonio)	**27%**
FIRSTCARE (Abilene)	25%
FIRSTCARE (Amarillo)	32%
FIRSTCARE (Lubbock)	28%
FIRSTCARE (Waco)	25%
HMO Blue Texas (Dallas/Fort Worth)	19%
HMO Blue Texas (East/South/West Texas)	**20%**
HMO Blue Texas (Houston)	18%
Humana Health Plan of Texas (Austin)	25%
Humana Health Plan of Texas (Corpus Christi)	**27%**
Humana Health Plan of Texas (Houston)	20%
Humana Health Plan of Texas (San Antonio)	**25%**
Scott and White Health Plan (Central Texas)	33%

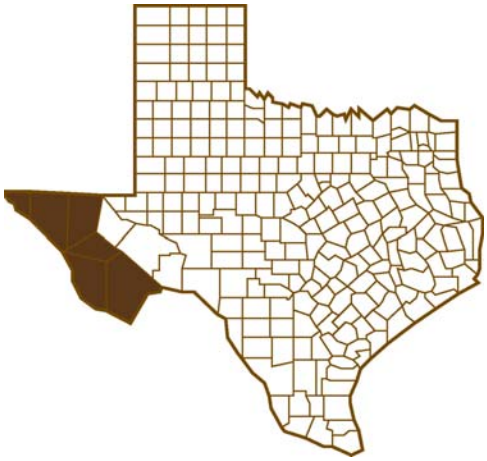
CAHPS® 5.0H Survey Results

for

West Texas Plans

The counties included in the West Texas area are:

Brewster	**Hudspeth**
Culberson	**Jeff Davis**
El Paso	**Presidio**



This section features survey results for plans that serve the West Texas area. It includes HMOs with a service area that extends into at least one county in the region. The city/area shown after the name indicates the primary area of service. Contact plans directly for details on specific service areas.

An HMO may be exempt from participation in the survey due to low enrollment or limited participation in the Texas commercial HMO market during 2014.

NCQA requires 100 responses to report survey results. OPIC has opted to report data based on 30 or more responses to provide consumers greater access to data to compare HMOs.

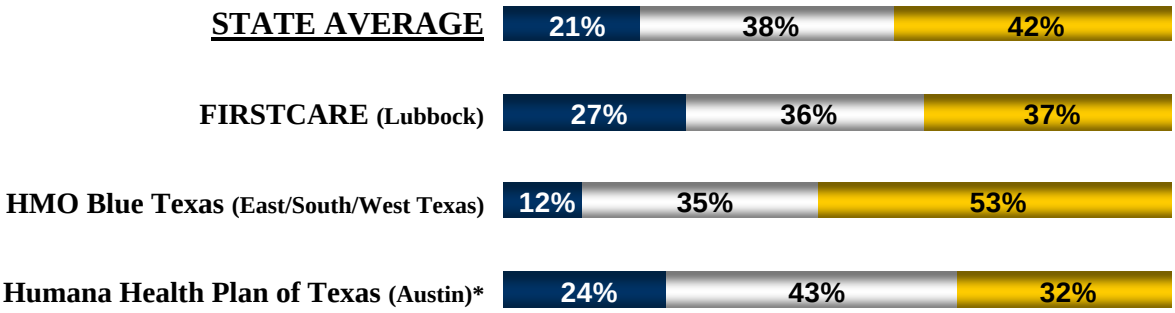
How people rated their health plan

CAHPS® 5.0H Survey Results

Percentage who rated their plan **6 or lower**	Percentage who rated their plan **7 or 8**	Percentage who rated their plan **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their health plan** on a scale from:

0 = "worst health plan possible" to **10** = "best health plan possible"



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

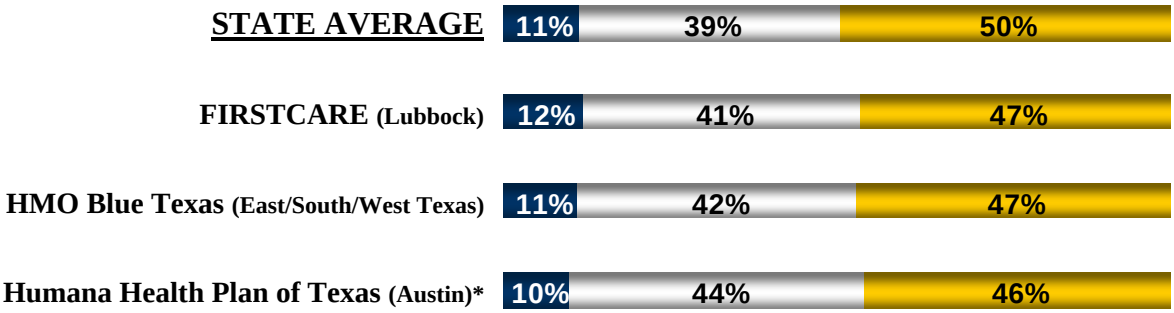
How people rated their healthcare

CAHPS® 5.0H Survey Results

Percentage who rated their care **6 or lower**	Percentage who rated their care **7 or 8**	Percentage who rated their care **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their healthcare** on a scale from:

0 = "worst healthcare possible" to **10** = "best healthcare possible"



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

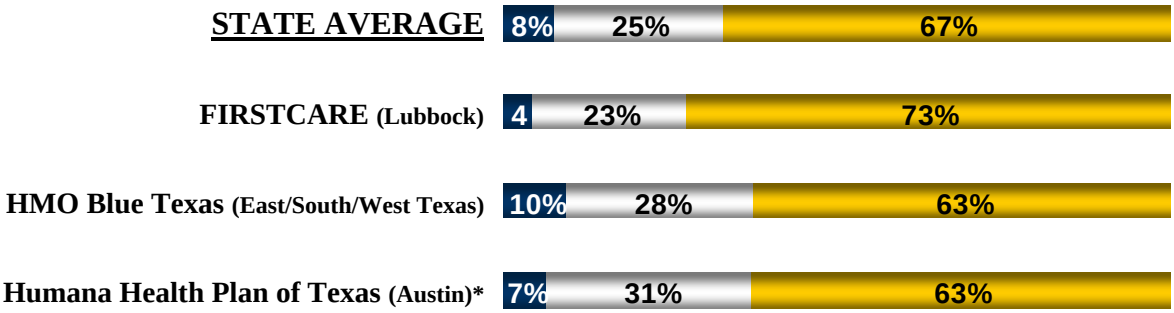
How people rated their personal doctor

CAHPS® 5.0H Survey Results

Percentage who rated their personal doctor **6 or lower**	Percentage who rated their personal doctor **7 or 8**	Percentage who rated their personal doctor **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their personal doctor** on a scale from:

0 = "worst personal doctor possible" to **10** = "best personal doctor possible"



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

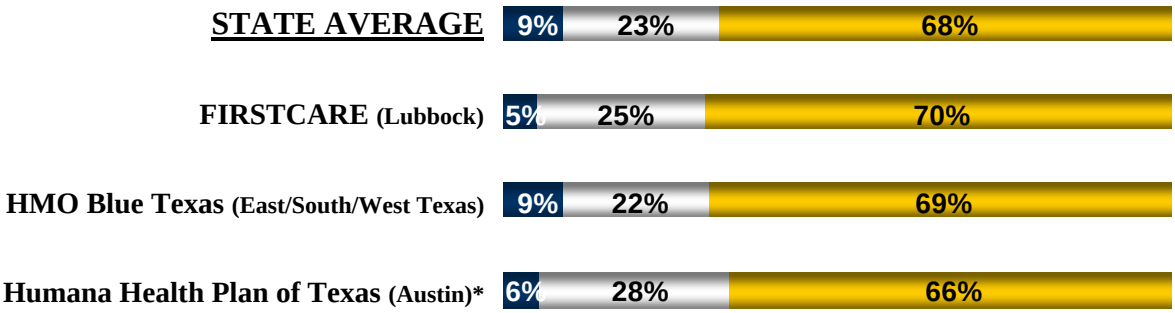
How people rated their specialist

CAHPS® 5.0H Survey Results

Percentage who rated their specialist **6 or lower**	Percentage who rated their specialist **7 or 8**	Percentage who rated their specialist **9 or 10**

The bar graphs show answers to a survey question that asked people to **rate their specialist** on a scale from:

0 = "worst specialist possible" to **10** = "best specialist possible"



Due to rounding, percentages may not add up to 100%.

CAHPS® 5.0H Survey Results - West Texas

* *Includes HMO & POS products. (See page 5 for explanation.)*

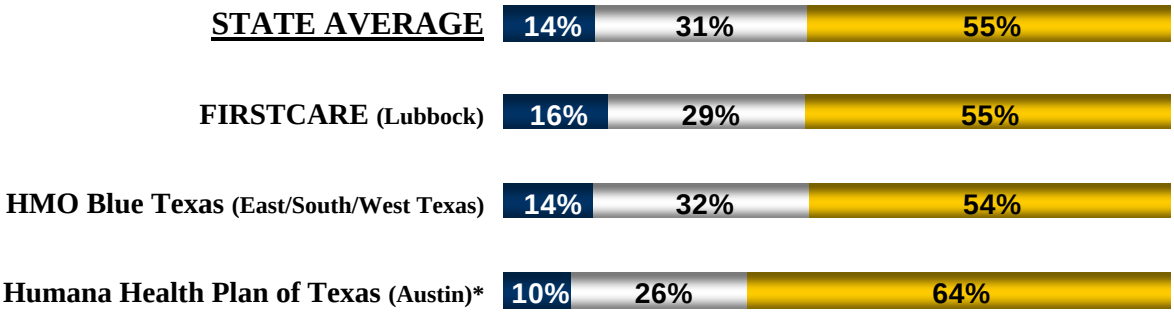
Getting needed care

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** received care that was needed	Percentage who said they **usually** received care that was needed	Percentage who said they **always** received care that was needed

The bar graphs show answers to survey questions that asked people **how often** it was easy for them to:

- Get appointments with specialists.
- Get care, tests or treatment they needed through their health plan.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

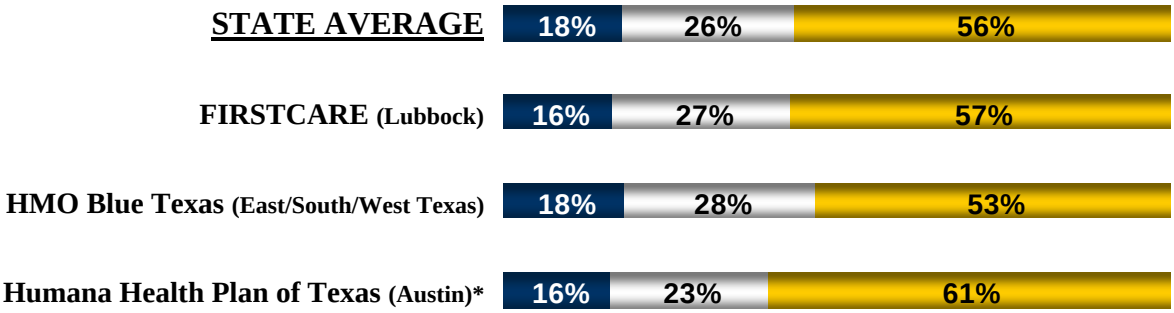
Getting care quickly

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** got care quickly	Percentage who said they **usually** got care quickly	Percentage who said they **always** got care quickly

The bar graphs show answers to survey questions that asked people **how often** they:

- Got care as soon as they thought they needed, when they needed care right away.
- Got an appointment as soon as they thought they needed when they did not need care right away.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

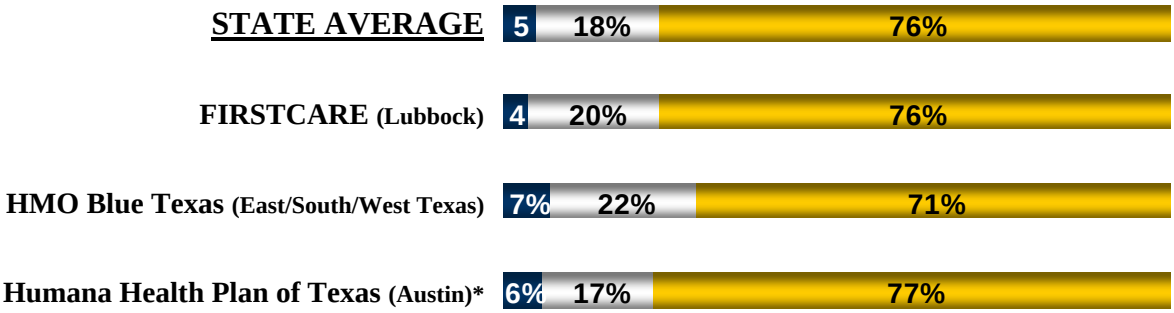
How well doctors communicate

CAHPS® 5.0H Survey Results

Percentage who said their doctors **sometimes or never** communicated well	Percentage who said their doctors **usually** communicated well	Percentage who said their doctors **always** communicated well

The bar graphs show answers to survey questions that asked people **how often** their personal doctor:

- Explained things in a way that was easy for them to understand.
- Listened carefully to them.
- Showed respect for what they had to say.
- Spent enough time with them.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

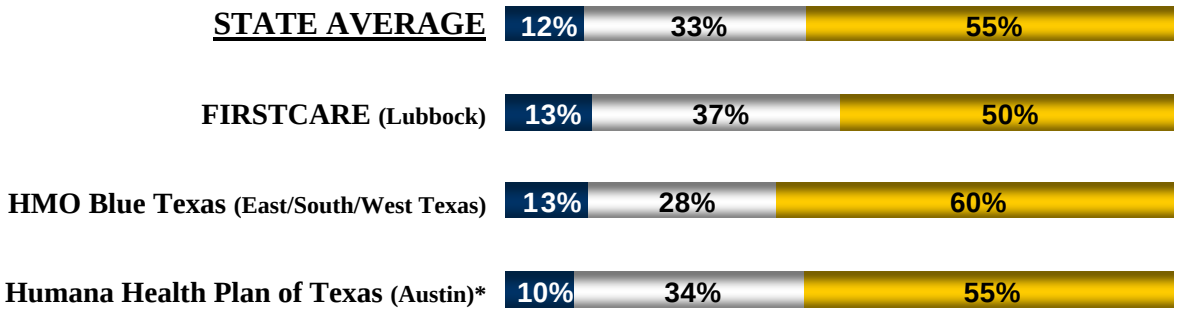
Handling of claims quickly and correctly

CAHPS® 5.0H Survey Results

Percentage who said their plan **sometimes or never** handled claims quickly and correctly	Percentage who said their plan **Usually** handled claims quickly and correctly	Percentage who said their plan **Always** handled claims quickly and correctly

The bar graphs show answers to survey questions that asked people **how often** their health plan:

- Handled claims quickly.
- Handled claims correctly.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

Health plan customer service

CAHPS® 5.0H Survey Results

Percentage who said customer service was **sometimes or never** efficient and helpful	Percentage who said customer service was **usually** efficient and helpful	Percentage who said customer service was **always** efficient and helpful

The bar graphs show answers to survey questions that asked people **how often**:

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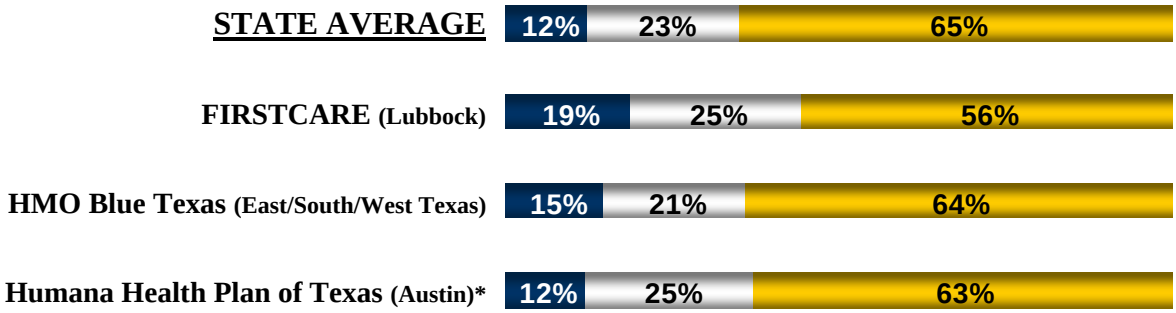

Due to rounding, percentages may not add up to 100%.

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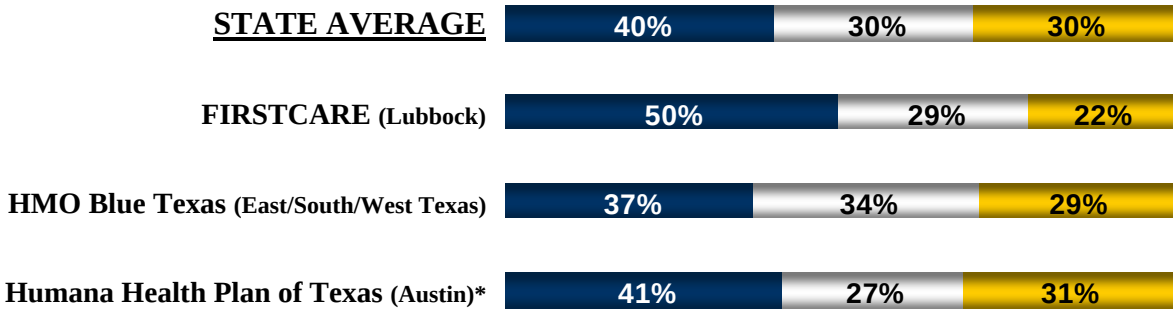
Plan information on costs

CAHPS® 5.0H Survey Results

Percentage who said they **sometimes or never** were able to find out cost info	Percentage who said they **Usually** were able to find out cost info	Percentage who said they **Always** were able to find out cost info

The bar graphs show answers to survey questions that asked people **how often** they were able to find out from their plan:

- How much would have to be paid for a healthcare service or equipment.
- How much would have to be paid for specific prescription medicines.



Due to rounding, percentages may not add up to 100%.

* *Includes HMO & POS products. (See page 5 for explanation.)*

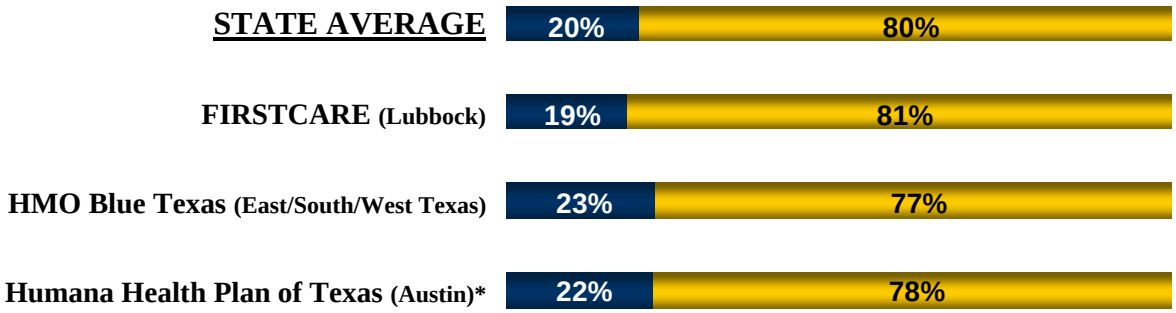
Shared Decision Making

CAHPS® 5.0H Survey Results

Percentage who said **No**, there was no shared decision making	Percentage who said **Yes**, there was shared decision making

The bar graphs show answers to survey questions that asked **whether** when starting or stopping a medicine:

- A doctor or other health provider talk about the reasons you might want to take a medicine?
- A doctor or other health provider talk about the reasons you might not want to take a medicine?
- A doctor or other health provider ask you what you thought was best for you?



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Response rate for all plans in the survey

Response rate = (completed surveys / [total sample – ineligible])

State Average = 23%

Aetna Health, Inc. (Austin)	17%
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Aetna Health, Inc. (Houston)	15%
Aetna Health, Inc. (San Antonio/Corpus Christi)	16%
Allegian Health Plans, Inc. (Harlingen)	17%
CIGNA HealthCare of Texas, Inc. (South Texas)	16%
Community First Health Plans (San Antonio)	27%
FIRSTCARE (Abilene)	25%
FIRSTCARE (Amarillo)	32%
FIRSTCARE (Lubbock)	**28%**
FIRSTCARE (Waco)	25%
HMO Blue Texas (Dallas/Fort Worth)	19%
HMO Blue Texas (East/South/West Texas)	**20%**
HMO Blue Texas (Houston)	18%
Humana Health Plan of Texas (Austin)	**25%**
Humana Health Plan of Texas (Corpus Christi)	27%
Humana Health Plan of Texas (Houston)	20%
Humana Health Plan of Texas (San Antonio)	25%
Scott and White Health Plan (Central Texas)	33%

Section 3: Complaints Against HMOs and Appeals

HMO Complaint Data

The Texas Department of Insurance (TDI) handles complaints against HMOs regarding the quality and availability of medical care as well as an HMO's administrative procedures (claims, billing, enrollment, appeals, etc.). A high frequency of justified complaints against an HMO can indicate high consumer or provider dissatisfaction with the company.

This section reports data as maintained by TDI. Only complaints TDI deems justified are published. TDI defines a complaint as justified "if there is an apparent violation of a policy provision, contract provision, rule, or statute, or there is a valid concern that a prudent layperson would regard as a practice or service that is below customary business or medical practice." The top eight reasons for complaint as a percentage of total complaints are listed in the table below. OPIC does not audit or independently verify (1) the validity of complaints, (2) TDI's determination of justified complaints, or (3) the enrollment data reported in this section.

For more information on TDI's complaint process, contact the Consumer Help Line at (800) 252-3439 or visit www.tdi.texas.gov/consumer/complfrm.html. You may direct complaints against healthcare providers to the appropriate licensing agency.

Common Reasons for Complaint **July 1, 2014—June 30, 2015**		**Percentage of Total Complaints**
Delays in Policyholder Service	Consumer complaint that HMO failed to promptly respond to an inquiry	15.5%
Delays in Claims Handling	Provider or consumer complaint regarding the timeliness of claims handling	9.2%
Denial of Claim	Provider or consumer complaint related to denial of coverage for healthcare service	9.2%
Refund of Premium	Consumer complaint that the company failed to refund an unearned premium	7.3%
Unsatisfactory Settlement Offer	Provider complaint regarding HMO compensation for services	5.8%
Premium Notice	Consumer complaint that the insurer failed to send the insured a notice that a premium payment is due in order to maintain coverage, or that the premium has increased or decreased	5.4%
Enrollment, Cancelation, Renewal Of Enrollee	Consumer complaint concerning a delay in enrollment into a health plan, cancellation of coverage or renewal of coverage	5.1%
Customer Service	Consumer service-related complaints including allegations that the HMO gave incorrect information regarding coverage of losses, failed to return phone calls, etc.	3.7%

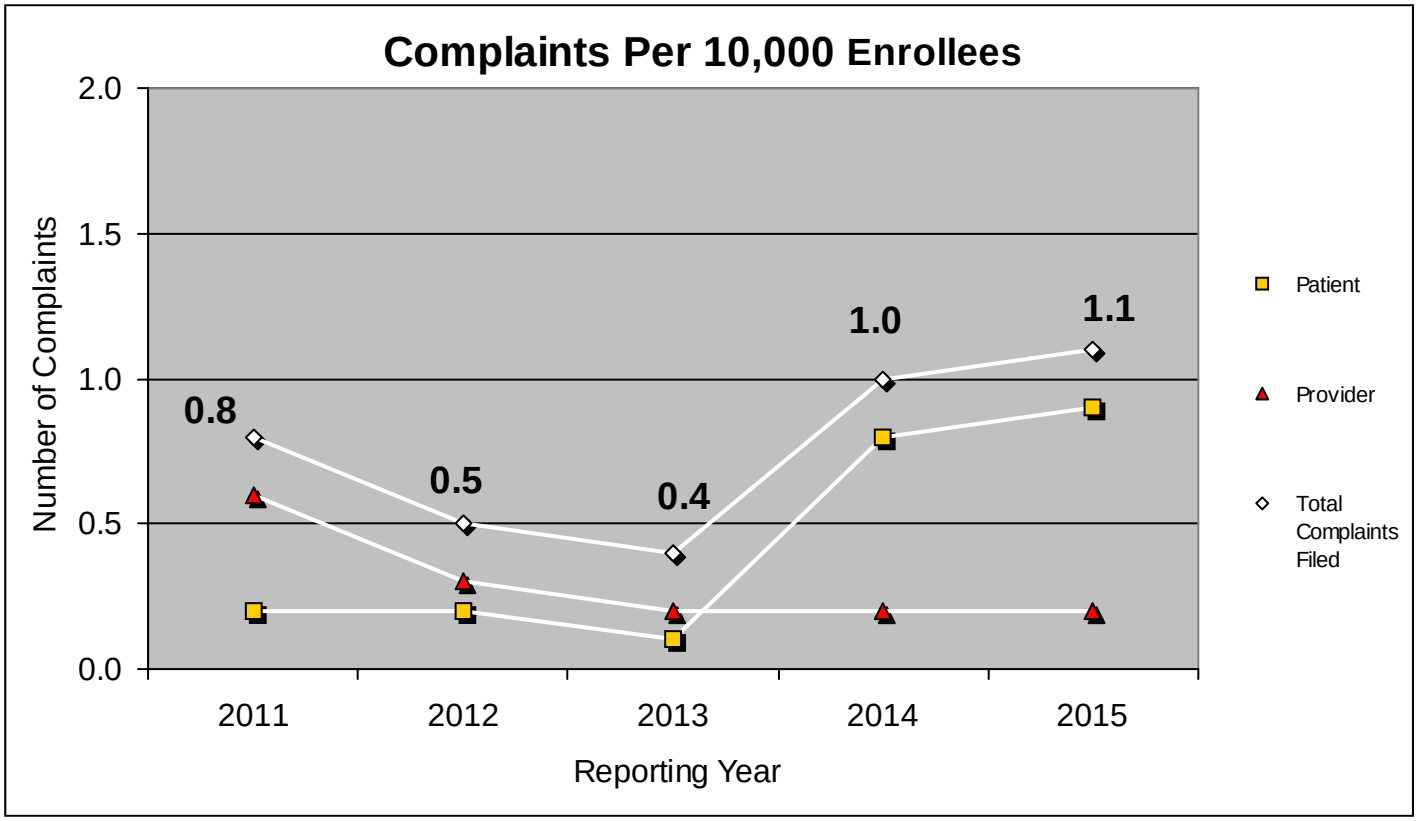
Source: Texas Department of Insurance
July 1, 2014–June 30, 2015

Complaint Trends: Basic Service HMOs

The chart below illustrates the rate of justified complaints (number of justified complaints per 10,000 enrollees) for all basic service HMOs. While the rate of justified complaints filed by providers has decreased steadily since 2010, the justified complaint rate for consumers/patients continued to increase in 2015. This increase is attributed to a significant increase in complaints from January 1, 2014 to June 30, 2015 coinciding with the ongoing implementation of the Affordable Care Act. The increase in complaints includes many administrative complaints such as delays in furnishing information to consumers, failure to properly disclose provider networks, failure to properly inform consumers of prescription drug coverage/copays/limits, and improperly expecting additional payment. This results in an overall continued increase in the rate of justified complaints (consumers/patients and providers combined) in 2015.

Complaint Frequency: 2011-2015 Reporting Years

Basic Service HMOs



Source: Texas Department of Insurance
July 1, 2010–June 30, 2015

Complaint Trends:
Basic Service HMOs with Commercial Enrollment Over 1,000

The chart below reports complaint data for basic service HMOs with commercial enrollment over 1,000. The chart provides justified complaint data for the 2015 reporting year.

Complaint Data: 2015 Reporting Year
Basic Service HMOs with Commercial Enrollment over 1,000

HMO	Commercial Enrollment March 2015	Consumer Complaints	Healthcare Provider Complaints	Consumer and Provider Complaints (Combined)	Consumer Complaints Per 10,000 Enrollment	Healthcare Provider Complaints Per 10,000 Enrollment	Consumer and Provider Complaints (Combined) Per 10,000 Enrollment
Aetna Health, Inc.	40,300	13	5	18	3.2	1.2	4.5
CIGNA HealthCare of Texas, Inc.	11,195	6	3	9	5.4	2.7	8.0
Community First Health Plans, Inc.	6,674	3	0	3	4.5	0.0	4.5
FIRSTCARE	52,132	13	16	29	2.5	3.1	5.6
HMO Blue Texas	554,801	262	20	282	4.7	0.4	5.1
Humana Health Plan of Texas, Inc.	305,285	94	25	119	3.1	0.8	3.9
Molina Healthcare of Texas, Inc.	16,409	1	3	4	0.6	1.8	2.4
Scott and White Health Plan	108,260	21	6	27	1.9	0.6	2.5
Sendero Health Plans, Inc.	4,692	2	0	2	4.3	0.0	4.3
Superior HealthPlan, Inc.	9,837	7	0	7	7.1	0.0	7.1
UnitedHealthCare of Texas, Inc.	4,021	0	1	1	0.0	2.5	2.5
TOTAL/AVERAGE* BASIC SERVICE	**1,113,606**	**422**	**79**	**501**	**3.4**	**1.1**	**4.4**

**Average complaint ratios are calculated excluding the high and low value in each column.*

Source: Texas Department of Insurance
July 1, 2014–June 30, 2015

Source Data: Texas Department of Insurance (TDI) Internet Complaints Information Systems (ICIS) complaint data was downloaded from the TDI's website for use in this report. Complaints were counted as follows: (a) Subject of Complaint = Home Maintenance Organization, (b) Line of Coverage = Accident & Health and using a combination of unique complaint ID, reason for complaint and correspondent. The chart excludes additional records with the same ID and reason for complaint as those already counted.

Denials, Appeals, and Independent Review Organizations

Your HMO will review your coverage for a treatment, service, or prescription either before or after your claim is filed. If your health plan refuses to pay for medically necessary services, treatments, or medications, you have the right to appeal the decision through the HMO's internal appeals process. Contact your HMO or your employer for details on the appeals process.

If you have exhausted your internal appeal rights, you may have the right to have the decision reviewed by an independent review organization (IRO). Your health plan must provide an independent review form if it denies payment based on a decision that the treatment is unnecessary, inappropriate, experimental, or investigational. Your health plan must pay for the review and must comply with the IRO's decision.

The IRO must issue a decision within twenty days for non-emergency treatment and within five days for emergency treatment.

The law does not require an HMO to provide an IRO for services it does not cover. It also does not require certain types of plans—Medicare, Medicaid, and ERISA plans, for example—to participate in the IRO process.

For more information on IROs, contact TDI's Health and Workers' Compensation Network Certification and Quality Assurance Office at 1-866-554-4926.

IRO Appeals

HMO	Cases	Cases Decided in Favor of the HMO	Cases Decided in Favor of the Patient / Enrollee	Cases Decided Partially in Favor of Both
Aetna Health, Inc.	3	2	1	0
Community First Health Plans, Inc.	1	1	0	0
HMO Blue Texas	11	7	4	0
Humana Health Plan of Texas, Inc.	15	9	6	0
Scott and White Health Plan	2	2	0	0
UnitedHealthCare of Texas, Inc.	9	2	7	0
TOTAL	**41**	**23**	**18**	**0**

Source: Texas Department of Insurance
IRO Database
July 1, 2014–June 30, 2015

Section 4:
Additional Information

About the Survey

Who performed the survey?

Independent survey vendors certified by the National Committee for Quality Assurance (NCQA) performed the CAHPS® 5.0H survey. NCQA is a not-for-profit organization committed to assessing, reporting on, and improving the quality of healthcare.

State law requires Texas HMOs to submit consumer satisfaction data to the Department of State Health Services.

Who was surveyed?

The CAHPS® 5.0H survey was sent to approximately 21,500 adult plan members across the state of Texas. Overall, 4,550 enrollees responded: 2,344 completed the survey by mail, 1,872 by phone, and 334 online. Only members who were enrolled continuously in an HMO from January 1, 2014 to December 31, 2014 were eligible to complete the survey. Members surveyed answered only questions pertaining to healthcare services they received during the survey period. Each survey result section contains the consumer response rate by plan.

How was the survey performed?

The survey vendors administered the survey primarily by mail with a telephone follow-up of those who did not respond to the mailed questionnaire. The survey was voluntary and confidential.

The survey asked HMO members questions about their experiences with their health plans and medical care such as:

- Were your claims handled quickly and correctly?
- Were you able to get the care you needed?
- Could you get appointments quickly?
- Could you get the information you needed from your health plan?

HMO Market Share Data

This table reports HMO enrollment and market share information for the first quarter of 2015. The data on the left side of the chart indicate total enrollment for basic service HMOs. The data on the right side provide enrollment information for basic service HMOs with commercial enrollment.

HMO	Total Ending Enrollment	Total Market Share	Commercial Ending Enrollment	Commercial Market Share
Aetna Health Inc.	136,079	2.7%	40,300	3.5%
CHRISTUS Health Plan	7,860	0.2%	267	0.0%
Cigna Healthcare of Texas, Inc.	11,195	0.2%	11,195	1.0%
Community First Health Plans, Inc.	133,425	2.7%	6,674	0.6%
Community Health Choice, Inc.	300,352	6.0%	38,343	3.3%
Health Care Service Corp. (HMO Blue Texas)	584,717	11.7%	554,801	47.6%
Humana Health Plan of Texas, Inc.	393,695	7.9%	305,285	26.2%
Molina Healthcare of Texas, Inc.	233,678	4.7%	16,409	1.4%
Scott & White Health Plan	177,444	3.5%	108,260	9.3%
Sendero Health Plans, Inc.	19,179	0.4%	4,692	0.4%
SHA, L.L.C. (FIRSTCARE)	153,346	3.1%	52,132	4.5%
Superior Healthplan, Inc.	455,357	9.1%	9,837	0.8%
UnitedHealthcare Benefits of Texas, Inc.	201,688	4.0%	1,695	0.1%
Unitedhealthcare of Texas, Inc.	4,021	0.1%	4,021	0.3%
UTMB Health Plans, Inc.	296	0.0%	296	0.0%
Valley Baptist Insurance Company	13,365	0.3%	11,564	1.0%
All other HMOs (including Medicare & Medicaid)	2,187,378	43.6%	0	0.0%
TOTAL BASIC SERVICE	5,013,075	100.0%	1,165,771	100.0%

Source: Texas Department of Insurance
HMO Financial Report
First Quarter 2015

HMO Financial Information

The financial condition of a health plan can impact its ability to timely pay claims and, in extreme cases, may affect quality of care. OPIC encourages consumers to review all available information about an HMO's financial strength before contracting with the HMO. For financial strength ratings of Texas health plans, you may contact the following organizations:

A.M. Best Company	(908) 439-2200	www.ambest.com
Fitch Ratings, Ltd.	(212) 908-0500	www.fitchratings.com
Moody's Investors Service	(212) 553-0377	www.moodys.com
Standard and Poor's Financial Services	(212) 438-2400	www.standardandpoors.com
TheStreet.com Ratings, Inc.	(800) 289-9222	www.thestreetratings.com

You can obtain additional information by calling the Texas Department of Insurance customer service line at 1-800-252-3439. TDI also makes financial information available online via its "Check Companies" link at www.tdi.texas.gov.

Plans Available Through the Federal Marketplace

As of the date of publication, the following companies are selling HMO or Point of Service plans through the federal marketplace:

- Allegian Health Plans
- Blue Cross and Blue Shield of Texas
- Cigna Healthcare
- Community First Health Plans, Inc.
- Community Health Choice
- Humana Health Plan of Texas, Inc.
- Molina Marketplace (Molina Healthcare of Texas, Inc.)
- Prominence HealthFirst of Texas
- Scott and White Health Plan

Please note that not all companies may sell plans in your area.

You may purchase a plan through the federal marketplace at www.healthcare.gov or by calling 1-800-318-2516 (TTY 1-855-889-4325).

Additional Sources of Information

STATE RESOURCES

Office of Public Insurance Counsel (OPIC)
William P. Hobby State Office Building
333 Guadalupe, Suite 3-120
Austin, Texas 78701
(877) 611-6742
www.opic.texas.gov

OPIC is an independent state agency representing the interests of insurance consumers in Texas as a class on matters involving rates, rules, and policy forms affecting personal lines of insurance such as auto, homeowners, title, and credit insurance, and in rulemaking for life, accident, and health insurance.

Texas Department of Insurance (TDI)
P.O. Box 149104
Austin, Texas 78714-9104
(800) 252-3439
www.tdi.texas.gov

TDI regulates HMOs in the state, including complaints, appeals, quality of care and financial stability. TDI has information about HMOs and health insurance in general, both in printed form and on the website.

CHIP & Children's Medicaid
P.O. Box 14200
Midland, Texas 79711-4200
(877) 543-7669
www.chipmedicaid.org

The Texas Health and Human Services Commission offers two health insurance programs for children: Children's Health Insurance Program (CHIP) and Children's Medicaid. Applications, eligibility information and other related information can be obtained in printed form and from the website.

Texas Health and Human Services Commission (HHSC)
4900 N. Lamar Blvd.
Austin, Texas 78751-2316
(800) 252-8263 or 2-1-1
www.hhsc.state.tx.us

HHSC has oversight responsibilities for designated HHSC agencies, and administers certain health and human services programs including the Texas Medicaid Program and CHIP.

Texas Health and Human Services Commission Office of the Ombudsman
P. O. Box 13247
Austin, Texas 78711-3247
(877) 787-8999
www.hhs.state.tx.us/ombudsman

The Office of the Ombudsman assists consumers when the agency's normal complaint process cannot, or does not, satisfactorily resolve the individual's concerns. The Ombudsman supports inquiries and complaints about programs and services related to HHSC, Department of Aging and Disability Services (DADS), Department of Assistive and Rehabilitative Services (DARS), Department of Family and Protective Services (DFPS), and Department of State Health Services (DSHS).

Texas Health and Human Services Commission Medicaid Managed Care Helpline (MMCH)
P. O. Box 13247
Austin, Texas 78711-3247
(866) 566-8989
www.hhs.state.tx.us/ombudsman

MMCH assists Medicaid clients who are experiencing barriers to health and long term care services through their Texas Medicaid managed care programs: STAR, STAR+PLUS, or PCCM.

Texas Department of Aging and Disability Services (DADS)
P.O. Box 149030
Austin, Texas 78714-9030
(800) 252-9240
www.dads.state.tx.us

DADS coordinates a system of services and support for individuals over the age of 60 and individuals with disabilities.

Employees Retirement System of Texas (ERS)
P.O. Box 13207
Austin, Texas 78711-3207
(877) 275-4377
(512) 867-7711 (Austin)
www.ers.state.tx.us

ERS administers health, retirement, and other benefits for state agency and higher education employees whose employers participate in the Texas Uniform Group Insurance Program.

Teacher Retirement System of Texas (TRS)
1000 Red River Street
Austin, Texas 78701
(800) 223-8778
(512) 542-6400 (Austin)
www.trs.state.tx.us

TRS administers health insurance and provides retirement and related benefits for active and retired employees of public schools, colleges, and universities supported by the state. TRS is the state's largest public retirement system.

Texas Health Care Information Collection (THCIC)
Department of State Health Services (DSHS)
Center for Health Statistics, Mail Code 1898
P.O. Box 149347
Austin, Texas 78714-9347
(512) 458-7261
www.dshs.state.tx.us/thcic

THCIC collects data from hospitals and HMOs about quality of care and makes the information available to the public.

Health Information, Counseling and Advocacy Program (HICAP)
(800) 458-9858
www.tdi.texas.gov/consumer/hicap

HICAP is a partnership of the Texas Department of Insurance, Texas Legal Services Center, the Texas Department of Aging and Disabilities, and the Texas Area Agencies on Aging. The program provides information on health insurance and public benefits to individuals age 65 and older and individuals with disabilities.

FEDERAL RESOURCES

Centers for Medicare and Medicaid Services (CMS)
Region VI
1301 Young Street, Suite 714
Dallas, Texas 75202
(214) 767-6427
www.cms.hhs.gov

CMS oversees Medicare, Medicaid, the Children's Insurance Program (CHIP), HIPPA, and the Clinical Laboratory Improvement Amendments Program.

United States Department of Labor
Employee Benefits Security Administration (EBSA)
(Dallas Regional Office)
525 South Griffin Street, Room 900
Dallas, Texas 75202-5025
(972) 850-4500
www.dol.gov/ebsa

EBSA administers and enforces provisions of Title I of the Employee Retirement Income Security Act of 1974 (ERISA). EBSA publishes numerous documents and guides to provide workers with information regarding their benefit rights.

United States Office of Personnel Management
Federal Employees Health Benefit Program
San Antonio Service Center
8610 Broadway, Room 305
San Antonio, Texas 78217-0001
(210) 805-2423
www.opm.gov

The Office of Personnel Management publishes the *Federal Employees Health Benefits Program Handbook*, an annual guide on health benefit plans for federal civilian employees. The handbook compares and rates HMOs, fee-for-service and managed care health plans available to federal workers.

Healthcare.gov

Healthcare.gov is the health insurance marketplace portal for Texas. The site allows consumers to compare and purchase health coverage. Consumers can also find information on their rights.

NON-PROFIT RESOURCE

Kaiser Family Foundation
2400 Sand Hill Road
Menlo Park, California 94025
(650) 854-9400
www.kff.org

The Kaiser Family Foundation is a non-profit, private foundation focusing on major health issues in the United States. It provides information and analysis for the public.

HMO Customer Service Contact Information

Aetna Health, Inc.	(800) 872-3862	www.aetna.com
Allegian Health Plans	(855) 381-3442	www.allegianhealthplans.com
CIGNA Healthcare of Texas, Inc.	(800) 244-6224	www.cigna.com
Community First Health Plans, Inc.	(800) 434-2347	www.cfhp.com
Health Care Service Corp. (HMO Blue Texas)	(877) 299-2377	www.bcbstx.com
Humana Health Plan of Texas, Inc.	(800) 486-2620	www.humana.com
Scott and White Health Plan	(800) 321-7947	www.sw.org
SHA, L.L.C. (FIRST CARE)	(800) 884-4901	www.firstcare.com
United HealthCare Benefits (formerly PacifiCare of Texas)	(800) 458-5653	www.uhcwest.com
UTMB Health Plans, Inc.	(866) 735-3281	www.utmbhcs.org
Valley Baptist Insurance Co.	(877) 423-4400	www.valleybaptist.net

Please send questions or comments to:

Office of Public Insurance Counsel

Deeia Beck, Public Counsel
info@opic.texas.gov
William P. Hobby State Office Building
333 Guadalupe, Suite 3-120
Austin, Texas 78701
512-322-4143
1-877-611-6742
fax 512-322-4148
http://www.opic.texas.gov
TTY Users Call 1-800-RELAY TX or 7-1-1

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