



CAHPS® Health Plan Survey Database

2025 Medicaid and Children's Health Insurance Program (CHIP) Chartbook

*What Enrollees Say About Their Experiences With
Their Health Plans and Medical Care*

December 2025

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1. Overview



2025 Health Plan Survey Database Summary Results

This overview of results summarizes how Medicaid and Children's Health Insurance Program (CHIP) health plan enrollees assess their experience with their health plan based on the 2025 Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Health Plan Survey Database.

HEALTH PLAN DATABASE RESPONDENTS

82,042 Adult Medicaid Respondents

143,235 Child Medicaid Respondents

37,035 CHIP Respondents

ACROSS THE THREE ENROLLEE POPULATIONS...

Lowest Scoring Measure



Getting Needed Care

Percent of respondents reporting that they could always get needed care

Adult Medicaid 52%

Child Medicaid 59%

CHIP 59%

Highest Scoring Measure



How Well Doctors Communicate

Percent of respondents reporting that doctors always communicated well

Adult Medicaid 77%

Child Medicaid 79%

CHIP 80%

Highest Overall Rating



Personal Doctor

Percent of respondents giving their personal doctor the highest overall rating (9 or 10)

Adult Medicaid 70%

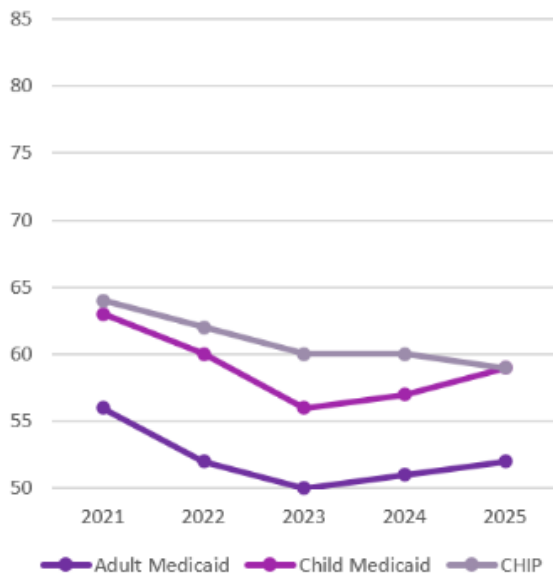
Child Medicaid 76%

CHIP 76%

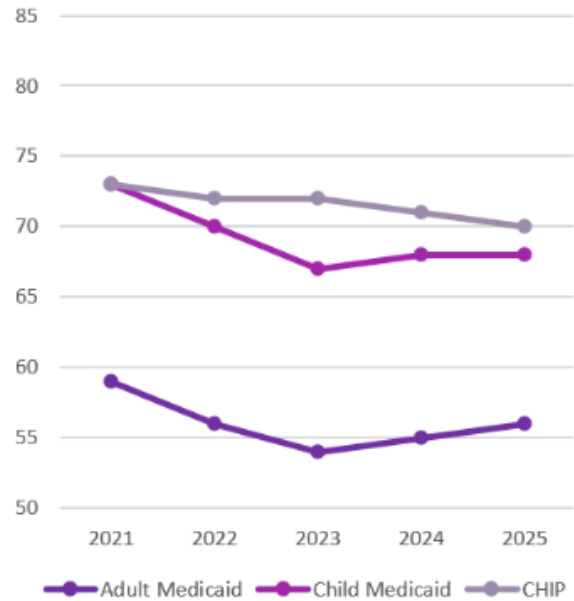
Trends in Health Plan Composite Measure Results by Respondent Population

Following notable declines across all composite measures between 2021–2023, survey scores remained stable or increased from 2024–2025 for most measures and populations.

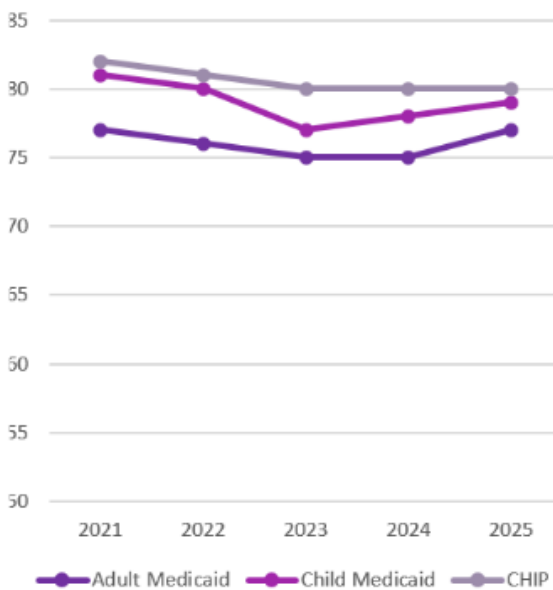
Getting Needed Care



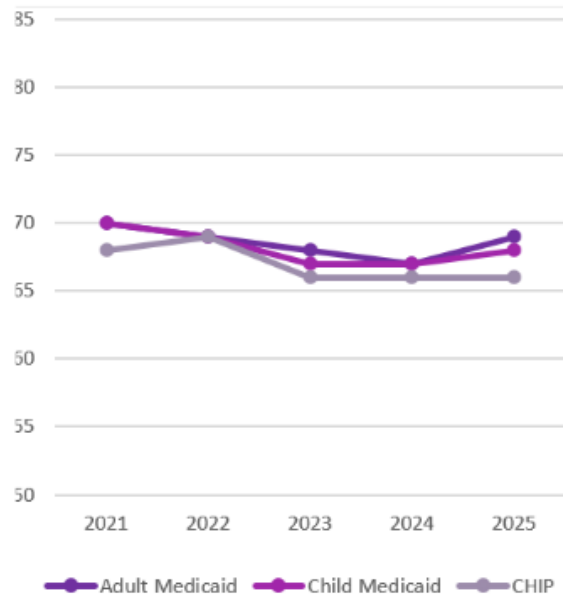
Getting Care Quickly



How Well Doctors Communicate



Health Plan Information and Customer Service



2. Introduction

The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Health Plan Survey Database receives data voluntarily submitted by state agencies and health plans that have administered the CAHPS Health Plan Survey Version 5.1/5.1H: (<https://www.ahrq.gov/cahps/surveys-guidance/hp/index.html>). The CAHPS Database aggregates the data to facilitate comparisons of CAHPS survey results.

This chartbook presents unweighted, aggregated summary-level results calculated from CAHPS Health Plan Survey data submitted in 2025 for the following enrollee populations:

- Adult Medicaid
- Child Medicaid
- Children’s Health Insurance Program (CHIP)

Results for each enrollee population are provided for the core survey composite measures, individual question items (including Healthcare Effectiveness Data and Information Set [HEDIS]¹ and Children With Chronic Conditions [CCC]² Item Set) and ratings. Trend results for 2015–2025 are presented for each enrollee population.

This report also includes seven appendixes:

- Appendix A provides the distribution of responses for each enrollee population by response mode (i.e., mail, telephone, and internet).
- Appendix B provides the demographic characteristics of the respondents for each enrollee population.
- Appendix C provides the responses to the utilization type questions (e.g., number of visits to personal doctor, doctor’s office, and specialist) for each enrollee population.
- Appendix D provides the number of respondents by state and territory for each enrollee population.
- Appendix E provides the top box scores by product type (HMO/POS and FFS) for Adult Medicaid and Child Medicaid.
- Appendix F provides the listing of item wording for each composite measure, item, HEDIS measure, and Children With Chronic Conditions items.
- Appendix G provides details on how the results in this chartbook were calculated.

Results are also presented on the CAHPS Data Tools (<https://datatools.ahrq.gov/cahps>), an online platform that allows users to explore the results for survey composite measures, ratings, and individual question items. The CAHPS Data Tools site is updated when new data are added to the CAHPS Health Plan Survey findings.

¹ <https://www.ncqa.org/hedis/>

² <https://www.ahrq.gov/cahps/surveys-guidance/item-sets/children-chronic/index.html>

3. Key Findings

Some notable findings from the 2025 CAHPS Health Plan survey data include the following:

- Health plan enrollee experience scores continued to slowly improve in 2025, following a trend from 2023–2024. These scores, which had dipped in the years following the COVID-19 pandemic, are now much closer to pre-2021 levels. This was true for most measures. The exceptions to this trend were CHIP composite measure top box scores, which continued a gradual downward trend. However, this occurred alongside a doubling in sample size for the CHIP population.
 - Notably, this same trend of improvement in scores after a dip following the COVID-19 pandemic also occurred for provider and staff assessments of safety culture as shown in the [Surveys on Patient Safety Culture \(SOPS\) Hospital Survey 2.0: 2024 User Database Report \(Part 1\)](#).
- There was a significant improvement in the volume of Health Plan survey data submitted from 2024 to 2025. The total number of plan submissions went from 515 to 644 (25% increase), and total respondents went from 201,683 to 262,312 (30% increase).
 - The improvement in submissions was particularly pronounced for the CHIP population, with the number of plans doubling from 48 to 96 and the number of respondents increasing by 82 percent from 20,345 to 37,035.
- Due to the significant improvement in CHIP submissions, a regional breakdown of CHIP data is now available in all four regions (Northeast, Midwest, South, and West) for the first time (see Table 11).
- Due to the improvement in Adult Medicaid and Child Medicaid submissions, enough data is now available to provide a breakdown of top box scores by Product Type. This is reflected in Appendix E.
 - Note that the sample size is still too small to report on this for CHIP in 2025.
- Consistent with previous years, health plan enrollee experience scores continue to be lower overall for Adult Medicaid than Child Medicaid and CHIP, especially for Getting Care Quickly and Rating of Health Care. The only exceptions are Health Plan Information and Customer Service, for which Adult Medicaid scores were slightly higher than Child Medicaid and CHIP.
- Over the past 10 years, the highest scoring composite measure for all survey types has consistently been How Well Doctors Communicate, while the lowest has been Getting Needed Care.
- During this same time period, the highest scoring rating for all survey types has been Rating of Personal Doctor, while the lowest continues to be Rating of Health Care.

Table 1 presents the “top box” scores (percentage of respondents reporting the most positive survey response options) for the composite and rating measures of the three enrollee populations.

Table 1. 2025 Top Box Scores by Enrollee Population			
Composite Measure/Rating	Adult Medicaid	Child Medicaid	CHIP
Number of Plans	257	291	96
Number of Respondents	82,042	143,235	37,035
Composite Measure^a			
Getting Needed Care	52%	59%	59%
Getting Care Quickly	56%	69%	70%
How Well Doctors Communicate	77%	79%	80%
Health Plan Information and Customer Service	69%	68%	66%
Rating^b			
Rating of Personal Doctor	70%	77%	76%
Rating of Specialist	68%	73%	73%
Rating of Health Care	57%	69%	69%
Rating of Health Plan	61%	70%	68%

a. Percent of respondents reporting “always” on a 4-point “always-never scale”

b. Percent of respondents rating 9 or 10 on a scale of 0–10

4. Data Sources, Limitations, and Research Datasets

Data Sources

The data presented in this chartbook were compiled from CAHPS Health Plan Survey responses submitted to the CAHPS Database by State and Territory Medicaid agencies, CHIP programs, and individual health plans. The 2025 results are based on survey data collected between June 2024 and June 2025.

As shown in Table 2, all the data submitted were collected with the 5.1 or 5.1H version of the CAHPS Health Plan Survey. The HEDIS designation (H) refers to supplemental questions added to the survey as part of the Healthcare Effectiveness Data and Information Set (HEDIS) sponsored by the National Committee on Quality Assurance (NCQA). The 5.1H version of the survey is included in both the 2025 Adult and Child Core Health Care Quality Measurement Sets sponsored by the Center for Medicaid and CHIP Services. Table 2 also shows the number of plans and respondents for the Child Medicaid and CHIP populations that included the 5.1H survey with the supplemental Item Set for Children with Chronic Conditions. These are supplemental questions designed to assess the experiences of children with special health care needs.

Table 2. 2025 Survey Versions By Enrollee Population			
Population	Survey Version	Number of Plans	Number of Respondents
Adult Medicaid	5.1	23	5,371
	5.1H	234	76,671
Adult Medicaid Combined		257	82,042
Child Medicaid	5.1	6	2,098
	5.1 with Chronic Conditions	25	9,362
	5.1H	102	36,280
	5.1H with Chronic Conditions Items	158	95,495
Child Medicaid Combined		291	143,235*
CHIP	5.1	1	331
	5.1 with Chronic Conditions	16	4,443
	5.1H	17	5,028
	5.1H with Chronic Conditions Items	62	27,233
CHIP Combined		96	37,035*

* Based on respondents who received the Chronic Conditions supplemental item set but all may not qualify as Children With Chronic Conditions.

This chartbook presents combined results for the core survey measures for the 5.1/5.1H Adult Medicaid versions of the CAHPS Health Plan Survey. In addition, results for the core survey measures for the Child Medicaid and CHIP populations have been combined to include the 5.1/5.1H versions both with and without the Children With Chronic Conditions Item Set.

Data Limitations

The organizations that voluntarily contribute data to the CAHPS Database do not represent a statistically drawn sample of all U.S. health plans, state agencies, or CHIP programs. Therefore, the data presented here are not representative of all U.S. Medicaid or CHIP health plans or enrollee populations. In addition, the number and mix of survey sponsors contributing data vary slightly from year to year. Furthermore, all three enrollee populations had varying nonresponse rates to questions. Therefore, caution should be used to interpret the current results as well as to compare the current year with previous years. Users of these data should also note that variations in health plan benefit and program design and other factors might also affect patterns of survey responses and nonresponses.

Research Datasets and Technical Assistance

Deidentified CAHPS Health Plan Survey data research files are available upon request according to the CAHPS Database Data Release Policy. To learn more, visit <https://www.ahrq.gov/cahps/cahps-database>.

Questions or comments regarding this chartbook or the CAHPS Health Plan Survey Database may be directed to the CAHPS Database by email CAHPSDatabase@westat.com.

5. Results by Enrollee Population

Summary results for each of the three health plan enrollee populations included in the 2025 CAHPS Health Plan Survey Database are presented in the sections that follow. Results are presented for the four composite measures, the individual question items that compose each composite measure, the four ratings, HEDIS questions, and Children With Chronic Conditions measures.

Survey results are presented in the following order:

- Adult Medicaid
- Child Medicaid
- CHIP

To provide context for the 2025 results, selected respondent demographic characteristics are shown at the beginning of each section. Regarding the Child Medicaid and CHIP surveys, the respondent characteristics refer to the parent, relative, or guardian completing the survey on behalf of the child. The respondent also provides information on the characteristics of the child. Detailed tables of respondent characteristics are provided in Appendix B.

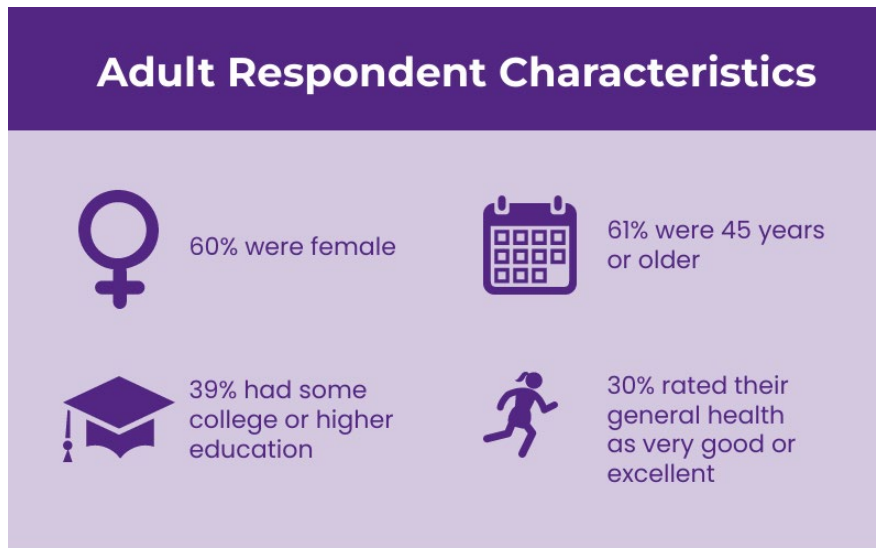
Each section presents the number of survey respondents by state and territory and a set of bar charts showing the distribution of scores for each response category. Next, a table showing the distribution of results for selected percentiles is shown, followed by a table showing the distribution of results by census region. Each section concludes with a series of line graphs showing trend data for the period 2015 to 2025, followed by a table that provides the number of plans and respondents for each year. Note that some totals may equal slightly less or more than 100 percent due to rounding. Due to missing data and appropriately skipped questions (i.e., gate questions in which the question is only asked based on previous responses), the sample sizes for each item and composite measures vary and are smaller than the total number of survey respondents.

All results presented in the bar charts and trends were calculated at the respondent level, and percentiles were calculated at the health plan level (see Appendix G for details on calculations). The Adult Medicaid survey, Child Medicaid survey, and CHIP survey also each have varying nonresponses at the question level.

Adult Medicaid

This section describes results for 82,042 Adult Medicaid respondents in the 2025 CAHPS Health Plan Survey Database.

Respondent Characteristics Highlights



2025 Adult Medicaid Number of Survey Respondents by State and Territory

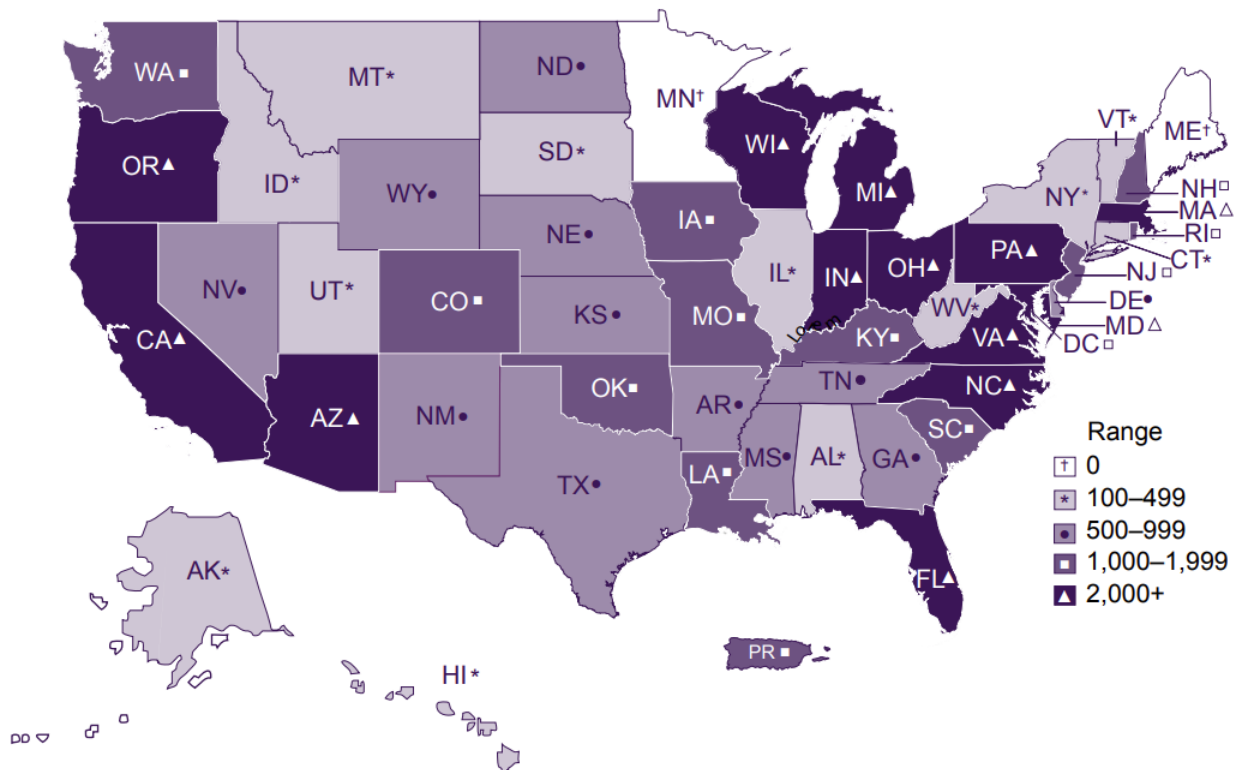
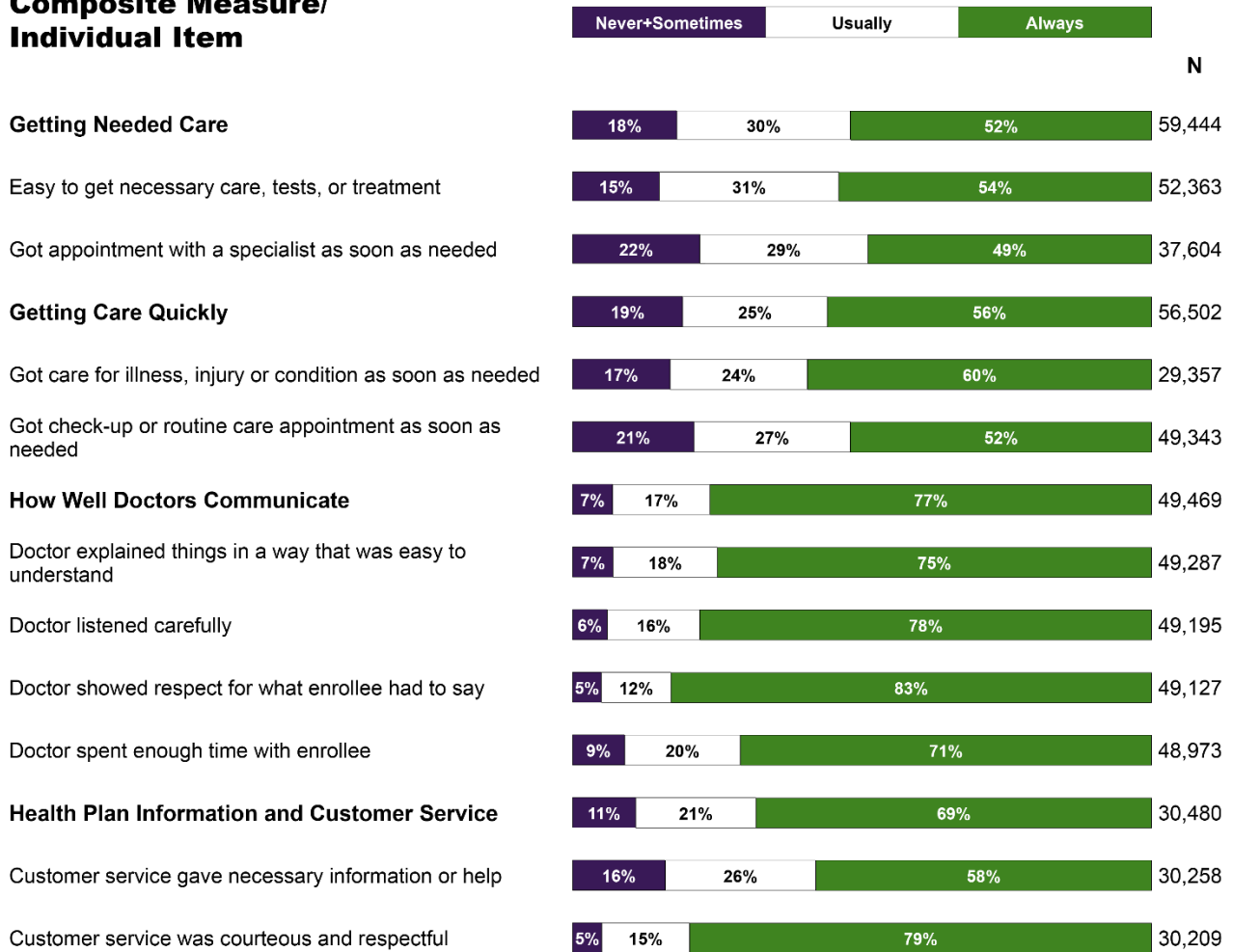


Chart 4-1. Composite Measure and Item Results—Adult Medicaid 2025 (Page 1 of 2)

Adult Medicaid 2025 Results

**Composite Measure/
Individual Item**



Rating

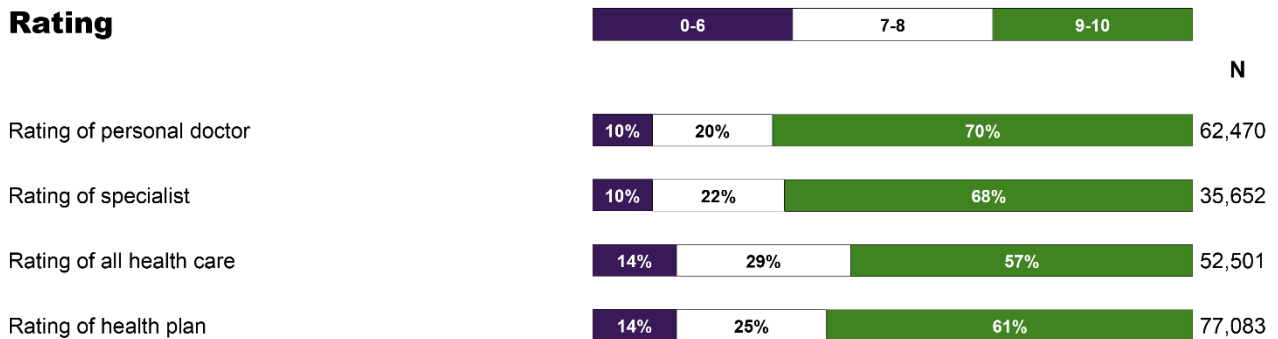


Chart 4-1. Composite Measure and Item Results—Adult Medicaid 2025 (Page 2 of 2)

Adult Medicaid 2025 Results (continued)

HEDIS Items

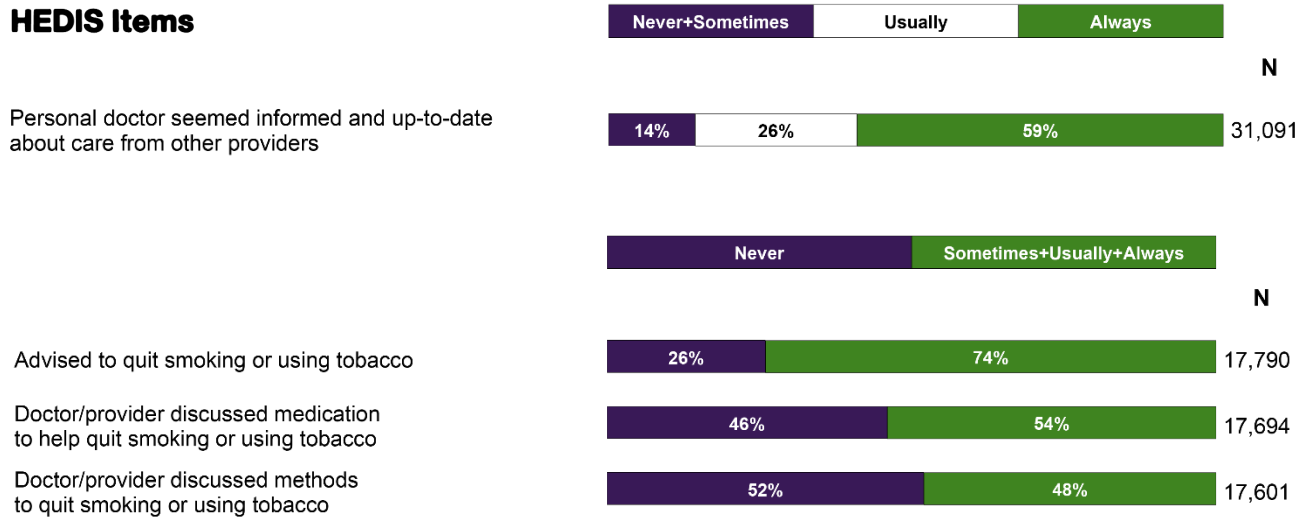


Table 3 presents the Adult Medicaid health plan average, standard deviation, and percentiles for each composite measure, rating, and selected HEDIS items based on the average across health plan-level top box scores.

Table 3. 2025 Adult Medicaid Health Plan Average and Percentiles									
Measure	Health Plan Average	Standard Deviation	Top Box Percentiles						
			Lowest Score	10 th Percentile	25 th Percentile	50 th Percentile	75 th Percentile	90 th Percentile	Highest Score
Composite Measure									
Getting Needed Care	51%	6.29	31%	43%	47%	52%	57%	59%	64%
Getting Care Quickly	56%	6.61	32%	46%	51%	57%	61%	63%	69%
How Well Doctors Communicate	77%	4.87	60%	71%	73%	77%	80%	82%	87%
Health Plan Information and Customer Service	68%	6.46	48%	60%	64%	68%	73%	76%	87%
Ratings									
Rating of personal doctor	70%	5.29	52%	63%	67%	70%	74%	77%	85%
Rating of specialist	68%	6.11	46%	60%	64%	68%	72%	75%	85%
Rating of health care	57%	6.06	35%	49%	53%	57%	60%	65%	74%
Rating of health plan	61%	7.08	35%	53%	56%	61%	65%	71%	79%
HEDIS Items									
Personal doctor seemed informed and up-to-date about care from other providers	59%	7.46	39%	50%	54%	58%	64%	69%	81%
Advised to quit smoking or using tobacco*	74%	8.86	30%	63%	69%	74%	79%	84%	92%
Doctor/provider discussed medication to help quit smoking or using tobacco*	53%	10.22	13%	38%	47%	53%	59%	65%	80%
Doctor/provider discussed methods to quit smoking or using tobacco*	47%	9.73	17%	36%	42%	48%	53%	60%	80%

* HEDIS Items top box score includes the following response options: Always, Usually, Sometimes

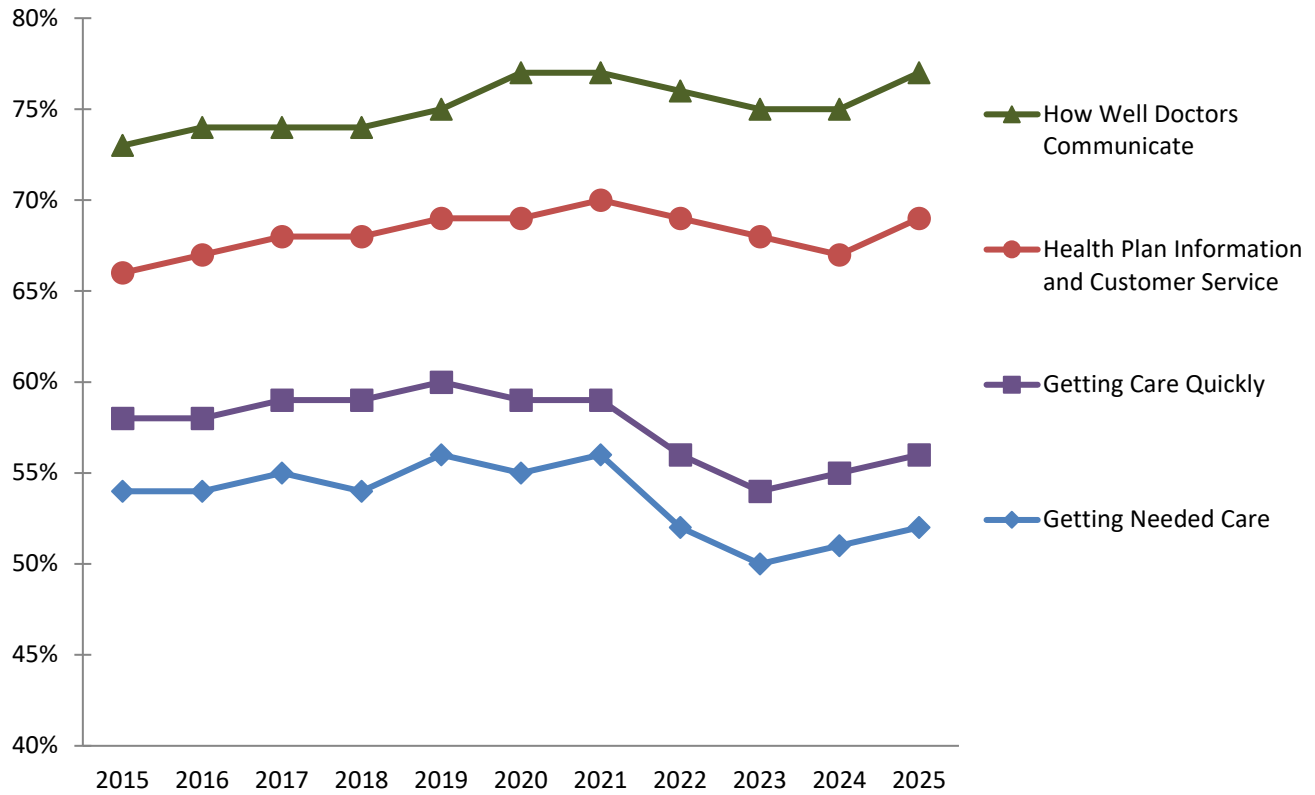
Note: Results in this table are based on health plan-level top box scores, therefore the health plan average may not match the Database Overall scores, which are based on respondent-level top box scores. The Health Plan Average and Database Overall scores differ by up to 1 percentage point between the two methods. Refer to Appendix G for more details.

Table 4 presents the Adult Medicaid top box scores by region.

Table 4. 2025 Adult Medicaid Top Box Scores by Census Region					
Adult Medicaid Composite Measure/Individual Item	Database Overall	Northeast Region	Midwest Region	South Region	West Region
Number of Plans	257	42	58	86	71
Number of Respondents	82,042	13,890	18,394	24,418	25,340
Getting Needed Care	52%	52%	55%	55%	45%
Easy to get necessary care, tests, or treatment	54%	55%	58%	57%	48%
Got appointment with a specialist as soon as needed	49%	49%	52%	52%	43%
Getting Care Quickly	56%	58%	59%	59%	49%
Got care for illness, injury or condition as soon as needed	60%	62%	63%	62%	54%
Got check-up or routine care appointment as soon as needed	52%	54%	56%	55%	45%
How Well Doctors Communicate	77%	78%	78%	79%	73%
Doctor explained things in a way that was easy to understand	75%	76%	77%	78%	71%
Doctor listened carefully	78%	79%	79%	80%	74%
Doctor showed respect for what enrollee had to say	83%	84%	84%	85%	80%
Doctor spent enough time with enrollee	71%	72%	74%	73%	66%
Health Plan Information and Customer Service	69%	70%	70%	71%	64%
Customer service gave necessary information or help	58%	58%	60%	60%	53%
Customer service was courteous and respectful	79%	81%	81%	82%	75%
Overall Ratings					
Rating of personal doctor	70%	72%	70%	71%	68%
Rating of specialist	68%	70%	67%	69%	66%
Rating of health care	57%	58%	57%	58%	54%
Rating of health plan	61%	66%	61%	61%	58%
HEDIS Items					
Personal doctor seemed informed and up-to-date about care from other providers	59%	62%	61%	61%	54%
Advised to quit smoking or using tobacco (Always, Sometimes, Usually)	74%	79%	75%	75%	69%
Doctor/provider discussed medication to help quit smoking or using tobacco (Always, Sometimes, Usually)	53%	58%	55%	54%	48%
Doctor/provider discussed methods to quit smoking or using tobacco (Always, Sometimes, Usually)	47%	51%	48%	49%	43%

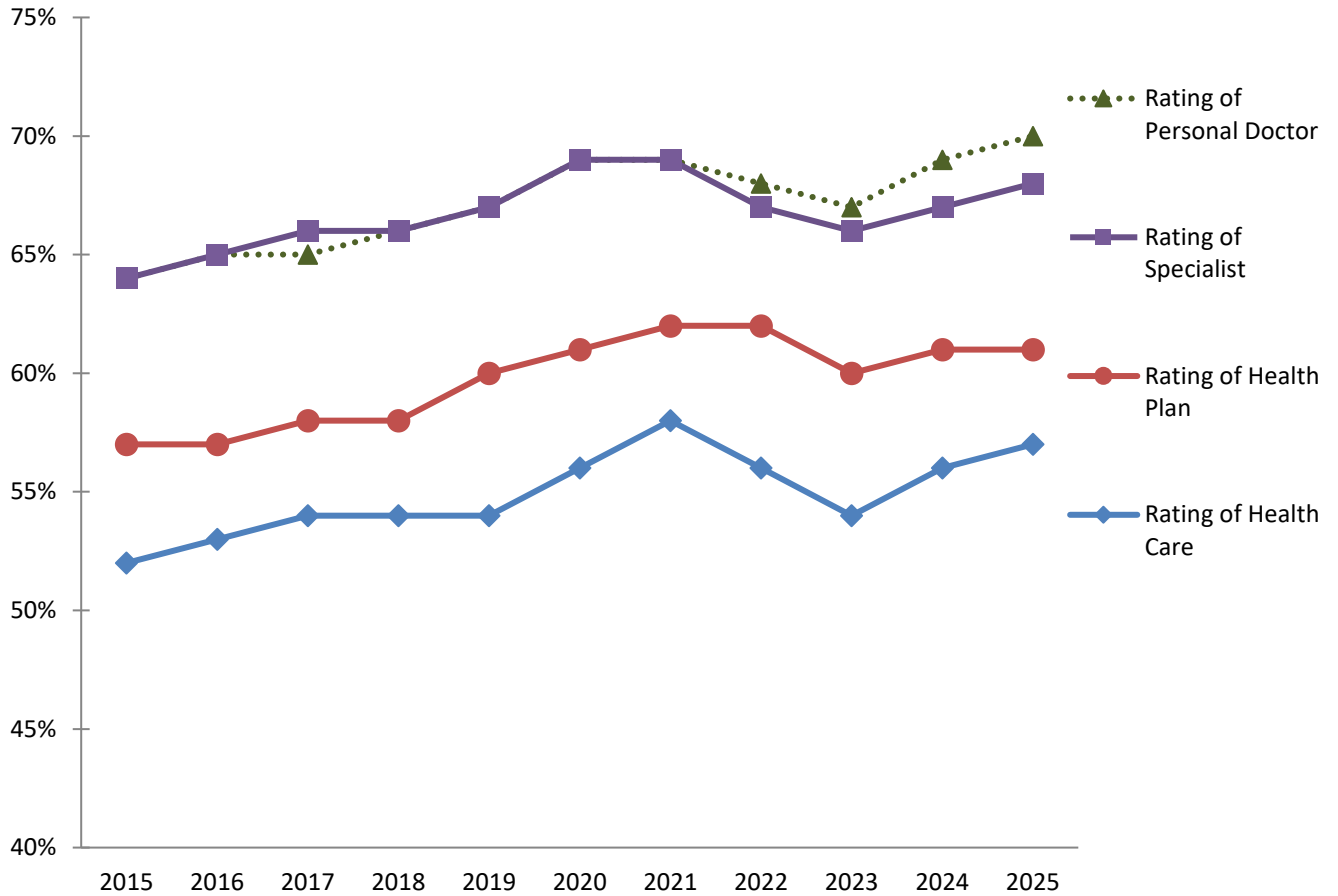
Adult Medicaid Trends

Figure 1. Adult Medicaid Top Box Composite Measure Scores 2015–2025



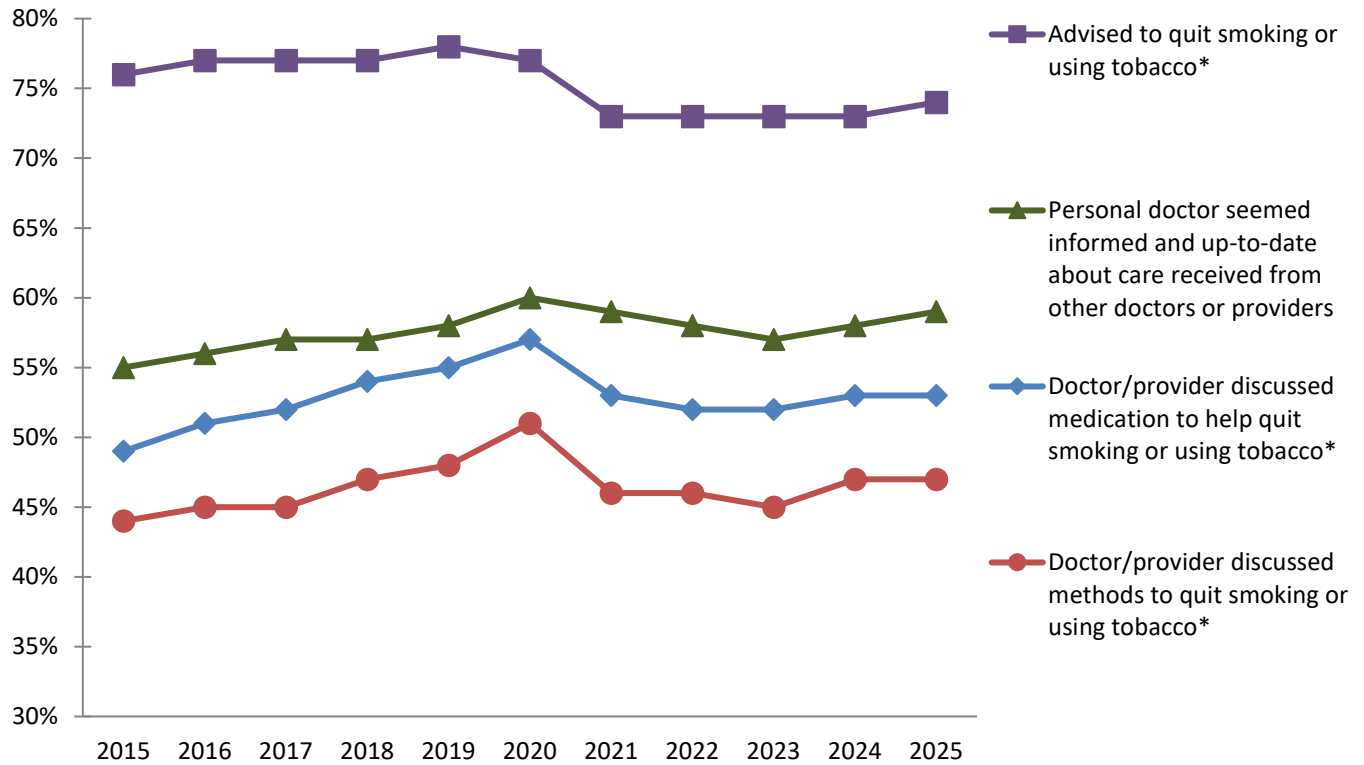
Adult Medicaid Trends (continued)

Figure 2. Adult Medicaid Top Box Rating Scores 2015–2025



Adult Medicaid Trends (continued)

Figure 3. Adult Medicaid Top Box Scores for Selected HEDIS Measures 2015–2025



* HEDIS Items top box scores include the following response options: Always, Usually, and Sometimes.

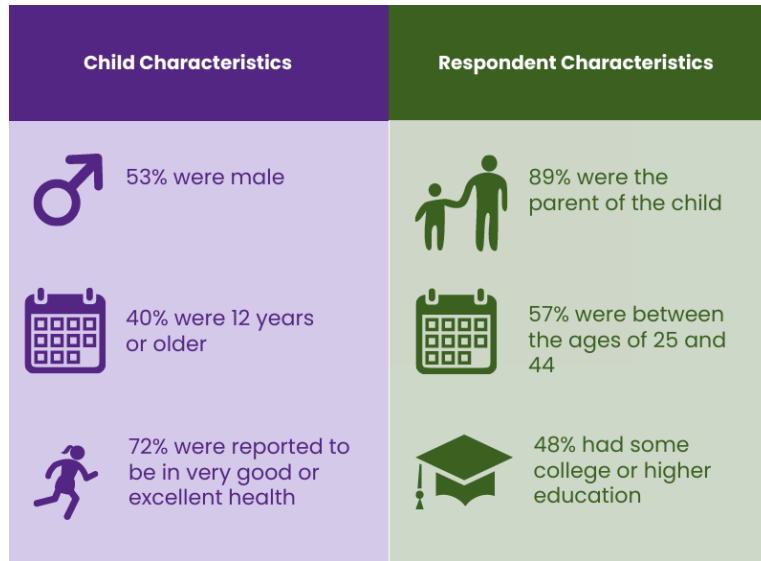
Category	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Number of Plans	133	157	152	146	131	159	162	197	221	233	257
Number of Respondents	61,369	73,155	65,053	54,362	43,588	51,211	49,997	50,336	65,261	69,505	82,042

Notes: (1) From 2014 to 2020, the database reported Adult Medicaid version 5.0. (2) Beginning in 2021, the database reported Adult Medicaid versions 5.0 and 5.1 combined. Beginning in 2023, the database began reporting Adult Medicaid version 5.1 only.

Child Medicaid

This section describes results for 143,235 Child Medicaid respondents in the 2025 CAHPS Health Plan Survey Database.

Respondent Characteristics Highlights



2025 Child Medicaid Number of Survey Respondents by State and Territory

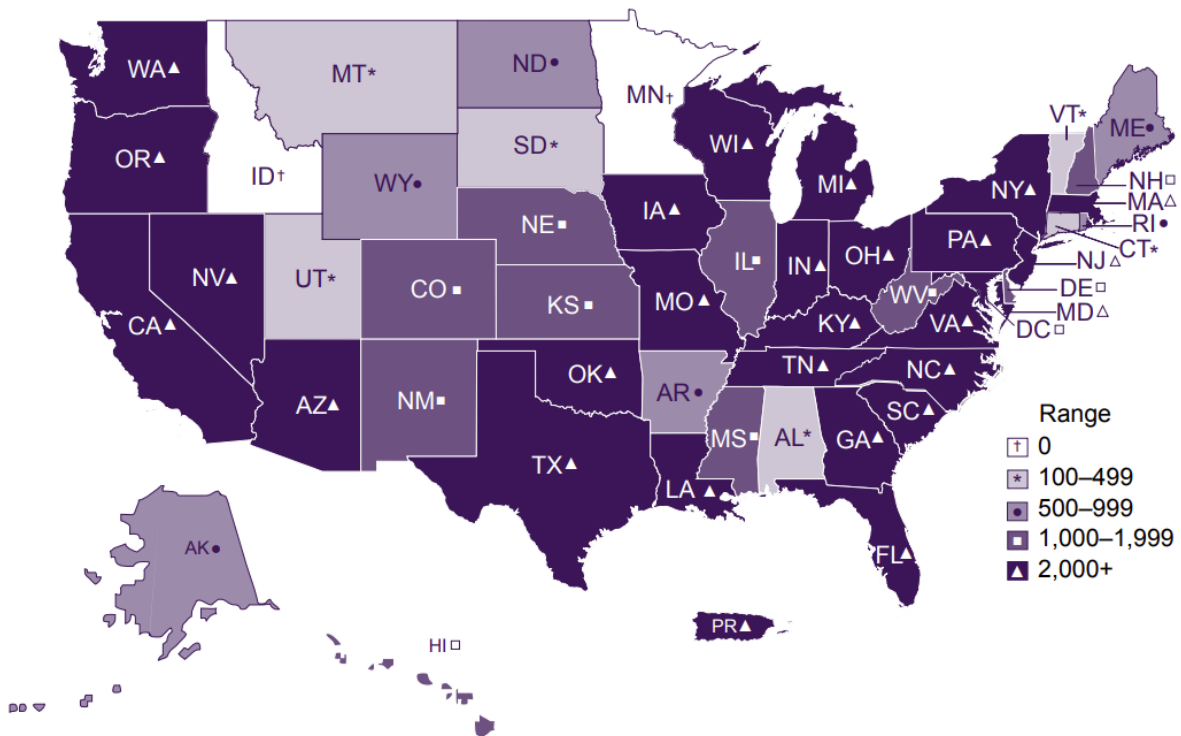
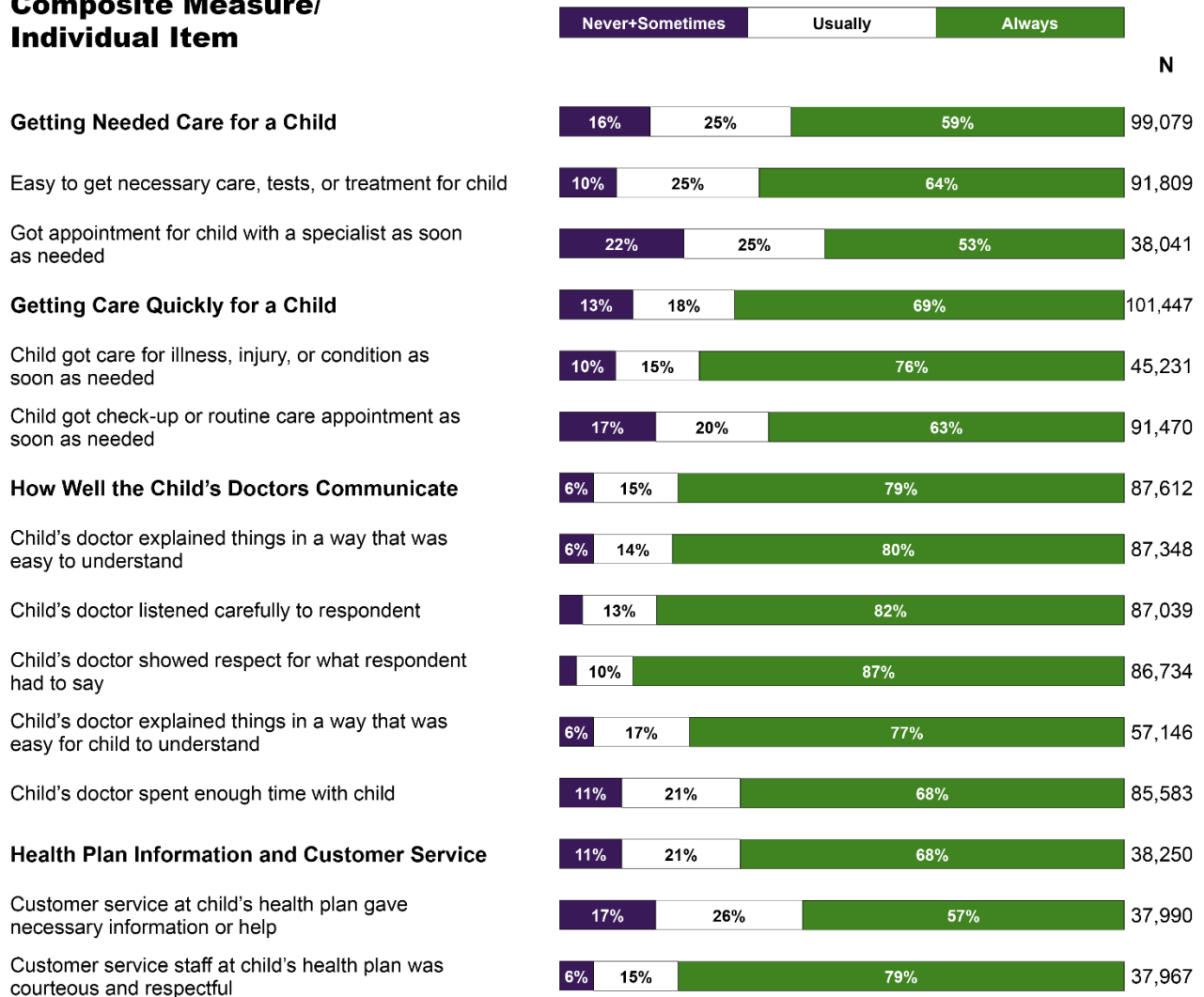


Chart 4-2. Composite Measure and Item Results—Child Medicaid 2025 (Page 1 of 2)

Child Medicaid 2025 Results

**Composite Measure/
Individual Item**



Rating

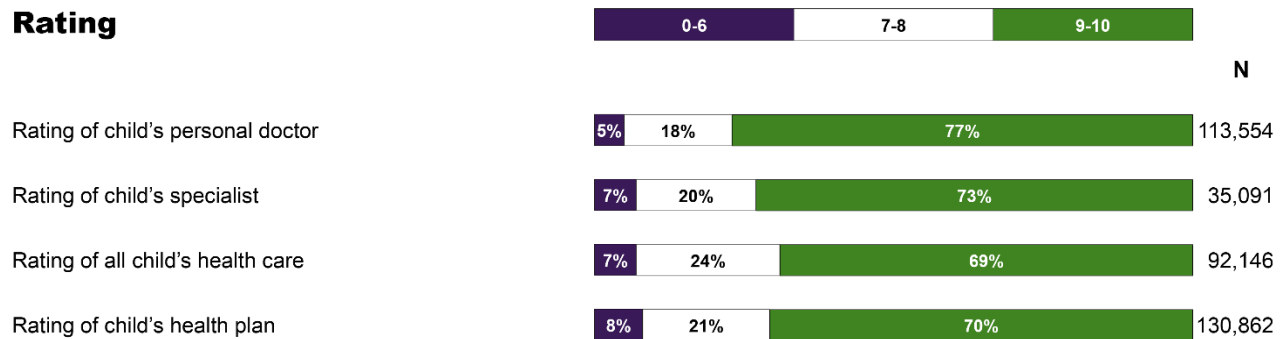
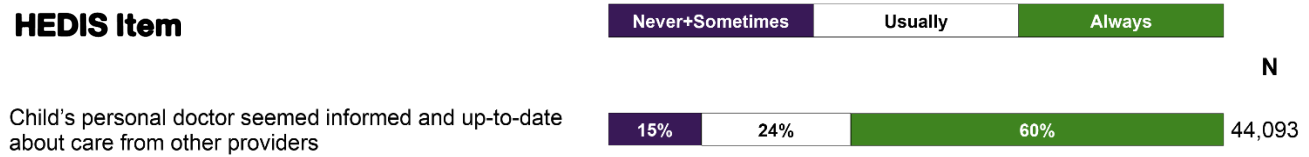


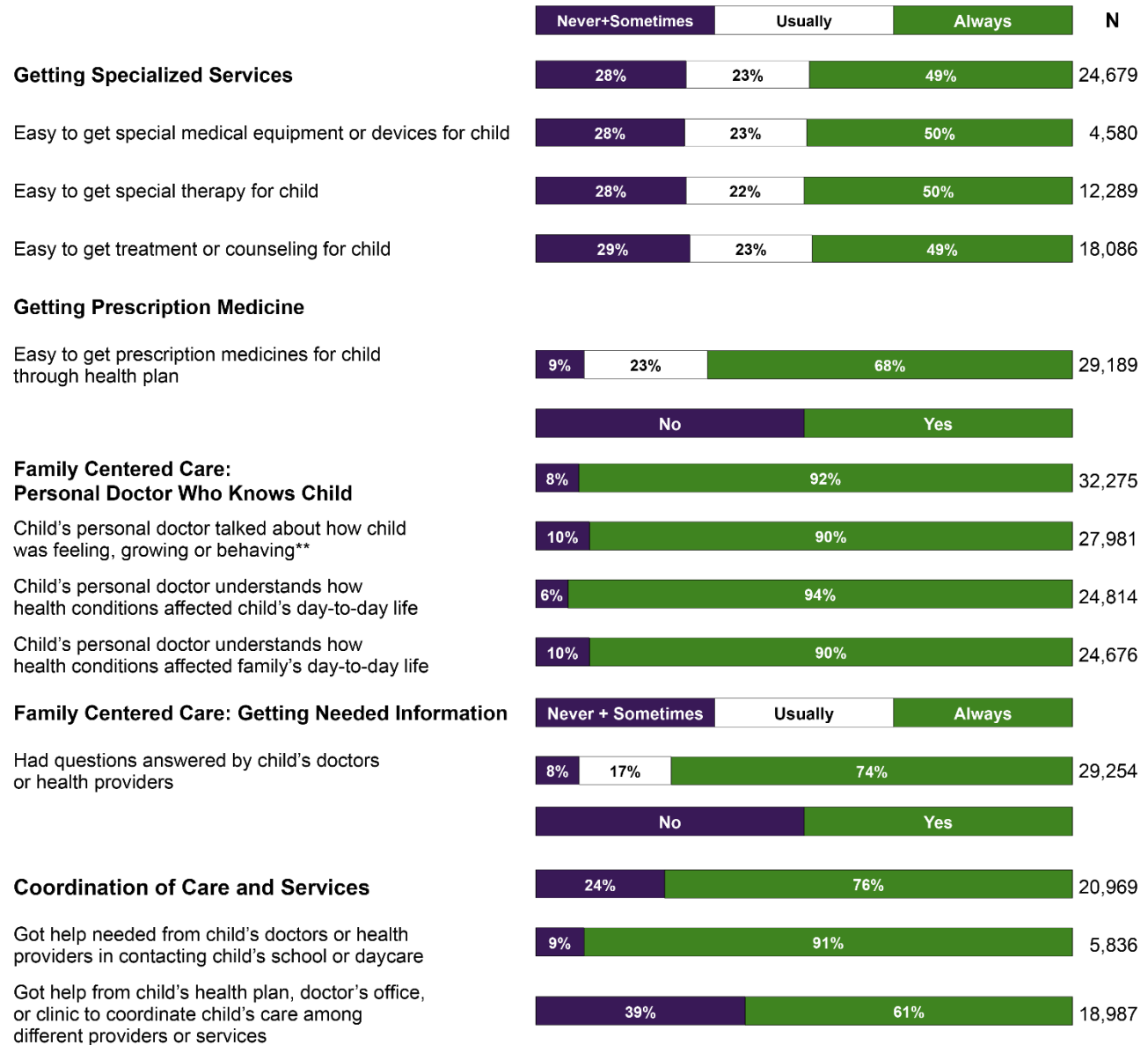
Chart 4-2. Composite Measure and Item Results—Child Medicaid 2025 Results (Page 2 of 2)

Child Medicaid 2025 Results (continued)

HEDIS Item



Children With Chronic Conditions Item Set Composite Measure/Individual Item



Note: “Getting Prescription Medicine” and “Family Centered Care: Getting Needed Information” are single item measures.

**This item is not part of the Children With Chronic Conditions Item Set but is included in the “Family Centered Care: Personal Doctor Who Knows Child” composite measure.

Table 6 presents the Child Medicaid health plan average, standard deviation, and percentiles for each composite measure, rating, HEDIS item, and chronic condition measures based on the average across health plan-level top box scores.

Table 6. 2025 Child Medicaid Health Plan Average and Percentiles									
Measure	Health Plan Average	Standard Deviation	Top Box Percentiles						
			Lowest Score	10 th Percentile	25 th Percentile	50 th Percentile	75 th Percentile	90 th Percentile	Highest Score
Composite Measures									
Getting Needed Care for a Child	59%	8.19	31%	47%	54%	59%	64%	68%	80%
Getting Care Quickly for a Child	69%	8.18	46%	56%	64%	70%	74%	78%	84%
How Well the Child’s Doctors Communicate	79%	4.79	62%	73%	76%	80%	82%	84%	92%
Health Plan Information and Customer Service	68%	6.89	48%	58%	64%	68%	73%	76%	90%
Ratings									
Rating of child’s personal doctor	77%	3.90	63%	72%	75%	78%	80%	82%	87%
Rating of child’s specialist	73%	5.99	56%	66%	70%	73%	77%	81%	94%
Rating of child’s health care	69%	5.61	48%	62%	66%	70%	73%	76%	80%
Rating of child’s health plan	70%	6.58	44%	63%	66%	70%	75%	78%	83%
HEDIS Items									
Child’s personal doctor seemed informed and up-to-date about care from other providers	61%	7.78	33%	52%	56%	61%	66%	69%	85%
Children With Chronic Conditions Measures									
Getting Specialized Services (composite)	50%	8.37	26%	38%	45%	50%	55%	61%	69%
Getting Prescription Medicine (single-item)	68%	7.09	36%	59%	65%	69%	72%	76%	84%
Family Centered Care: Personal Doctor Who Knows Child (composite)	92%	2.73	83%	88%	90%	92%	93%	94%	100%
Family Centered Care: Getting Needed Information (single-item)	74%	5.68	54%	66%	70%	75%	78%	81%	87%
Coordination of Care and Services (composite)	77%	4.86	61%	71%	74%	77%	80%	83%	90%

Note: Results in this table are based on health plan-level top box scores, therefore the health plan average may not match the Database Overall scores, which are based on respondent-level top box scores. The Health Plan Average and Database Overall scores differ by up to 1 percentage point between the two methods. Refer to Appendix G for more details.

Table 7 presents the Child Medicaid top box scores by region and Table 8 breaks out the results for the General Child and Children With Chronic Conditions populations.

Table 7. 2025 Child Medicaid Top Box Scores by Census Region					
Child Medicaid Composite Measure/Individual Item	Database Overall	Northeast Region	Midwest Region	South Region	West Region
Number of Plans	291	45	65	108	73
Number of Respondents	143,235	19,845	28,971	58,540	35,879
Getting Needed Care for a Child	59%	55%	62%	63%	50%
Easy to get necessary care, tests, or treatment for child	64%	62%	67%	69%	55%
Got appointment for child with a specialist as soon as needed	53%	49%	56%	57%	45%
Getting Care Quickly for a Child	69%	67%	73%	73%	60%
Child got care for illness, injury, or condition as soon as needed	76%	74%	79%	79%	67%
Child got check-up or routine care appointment as soon as needed	63%	60%	66%	67%	53%
How Well the Child's Doctors Communicate	79%	78%	81%	81%	74%
Child's doctor explained things in a way that was easy to understand	80%	79%	83%	82%	74%
Child's doctor listened carefully to respondent	82%	82%	85%	84%	78%
Child's doctor showed respect for what respondent had to say	87%	86%	88%	89%	84%
Child's doctor explained things in a way that was easy for child to understand	77%	77%	77%	79%	73%
Child's doctor spent enough time with child	68%	67%	73%	70%	62%
Health Plan Information and Customer Service	68%	67%	69%	71%	64%
Customer service at child's health plan gave necessary information or help	57%	56%	58%	60%	53%
Customer service staff at child's health plan was courteous and respectful	79%	79%	80%	81%	74%
Overall Ratings					
Rating of child's personal doctor	77%	76%	78%	79%	74%
Rating of child's specialist	73%	72%	73%	75%	72%
Rating of all child's health care	69%	68%	68%	72%	65%
Rating of child's health plan	70%	70%	68%	72%	69%
HEDIS Item					
Child's personal doctor seemed informed and up-to-date about care from other providers	60%	61%	63%	62%	54%

Table 7. 2025 Child Medicaid Top Box Scores by Census Region (cont'd)

Child Medicaid Composite Measure/Individual Item	Database Overall	Northeast Region	Midwest Region	South Region	West Region
Children With Chronic Conditions Measures					
Getting Specialized Services	49%	47%	52%	51%	42%
Easy to get special medical equipment or devices for child	50%	49%	49%	53%	43%
Easy to get special therapy for child	50%	48%	55%	51%	41%
Easy to get treatment or counseling for child	49%	43%	52%	50%	43%
Getting Prescription Medicine					
Easy to get prescription medicines for child through health plan	68%	67%	68%	69%	64%
Family Centered Care: Personal Doctor Who Knows Child	92%	91%	92%	92%	89%
Child's personal doctor talked about how child was feeling, growing or behaving**	90%	90%	91%	91%	88%
Child's personal doctor understands how health conditions affected child's day-to-day life	94%	94%	94%	94%	92%
Child's personal doctor understands how health conditions affected family's day-to-day life	90%	90%	91%	91%	87%
Family Centered Care: Getting Needed Information					
Had questions answered by child's doctors or health providers	74%	71%	76%	77%	69%
Coordination of Care and Services	76%	74%	77%	76%	79%
Got help needed from child's doctors or health providers in contacting child's school or daycare	91%	90%	94%	90%	92%
Got help from child's health plan, doctor's office, or clinic to coordinate child's care among different providers or services	61%	58%	60%	63%	65%

** This item is not part of the Children With Chronic Conditions Items Set, but is included in the "Family Centered Care: Personal Doctor Who Knows Child" composite measure.

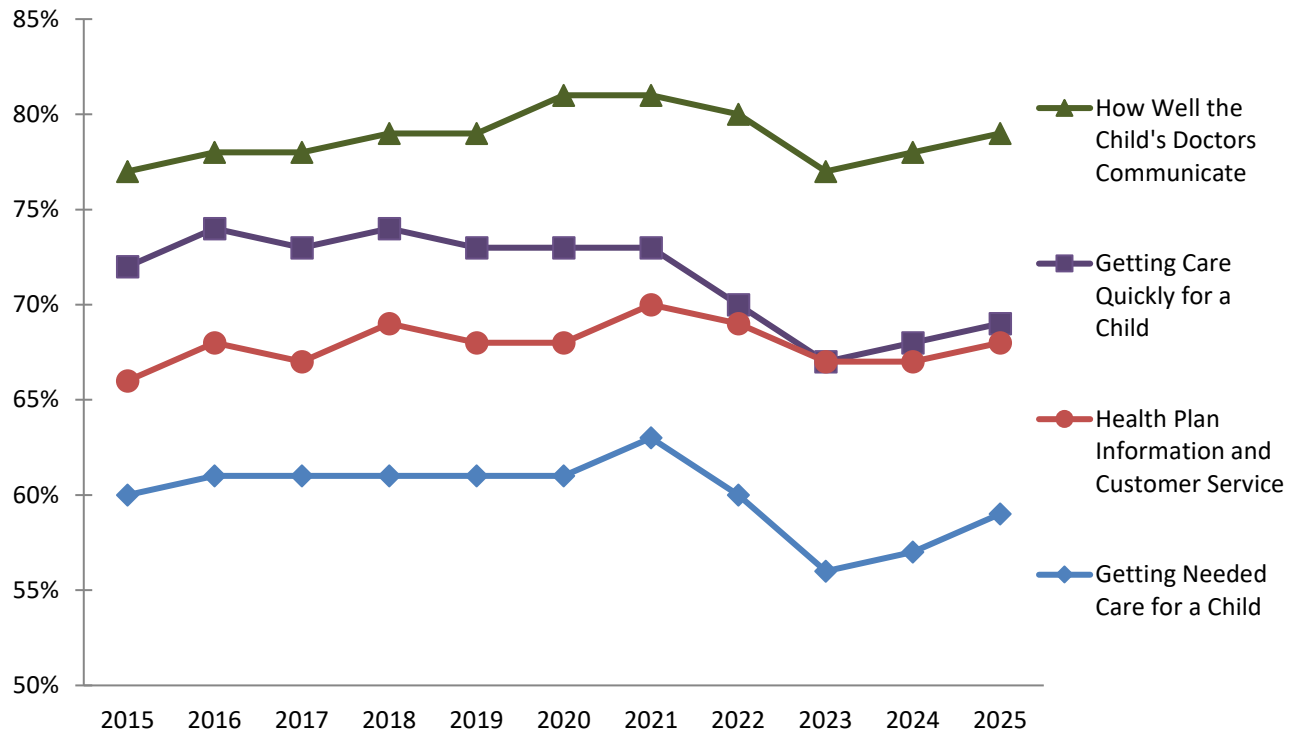
Table 8. Child Composite Measures Top Box by General Child and Children With Chronic Conditions

Child Medicaid Composite Measure/Individual Item	Database Overall	General Child	Children With Chronic Conditions
Number of Plans	291	291	183
Number of Respondents	143,235	105,174	38,061*
Getting Needed Care for a Child	59%	59%	58%
Easy to get necessary care, tests, or treatment for child	64%	65%	63%
Got appointment for child with a specialist as soon as needed	53%	53%	54%
Getting Care Quickly for a Child	69%	68%	71%
Child got care for illness, injury, or condition as soon as needed	76%	75%	78%
Child got check-up or routine care appointment as soon as needed	63%	61%	65%
How Well the Child's Doctors Communicate	79%	79%	80%
Child's doctor explained things in a way that was easy to understand	80%	79%	81%
Child's doctor listened carefully to respondent	82%	83%	82%
Child's doctor showed respect for what respondent had to say	87%	87%	87%
Child's doctor explained things in a way that was easy for child to understand	77%	77%	76%
Child's doctor spent enough time with child	68%	67%	72%
Health Plan Information and Customer Service	68%	68%	69%
Customer service at child's health plan gave necessary information or help	57%	57%	58%
Customer service staff at child's health plan was courteous and respectful	79%	78%	81%
Overall Ratings			
Rating of child's personal doctor	77%	78%	76%
Rating of child's specialist	73%	74%	72%
Rating of child's health care	69%	70%	67%
Rating of child's health plan	70%	72%	66%
HEDIS Items			
Child's personal doctor seemed informed and up-to-date about care from other providers	60%	61%	60%

* Includes only responses that qualified as Children With Chronic Conditions.

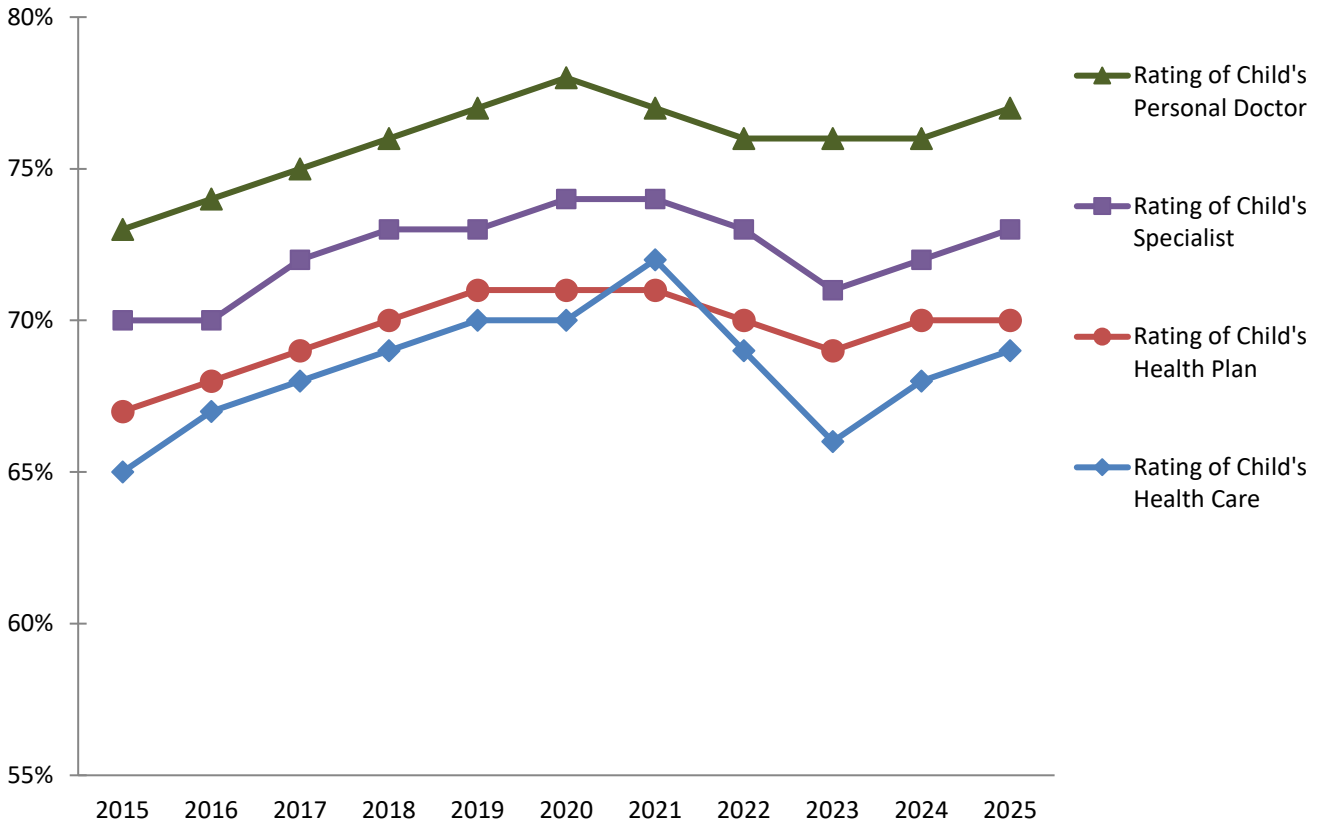
Child Medicaid Trends

Figure 4. Child Medicaid Top Box Composite Measure Scores 2015–2025



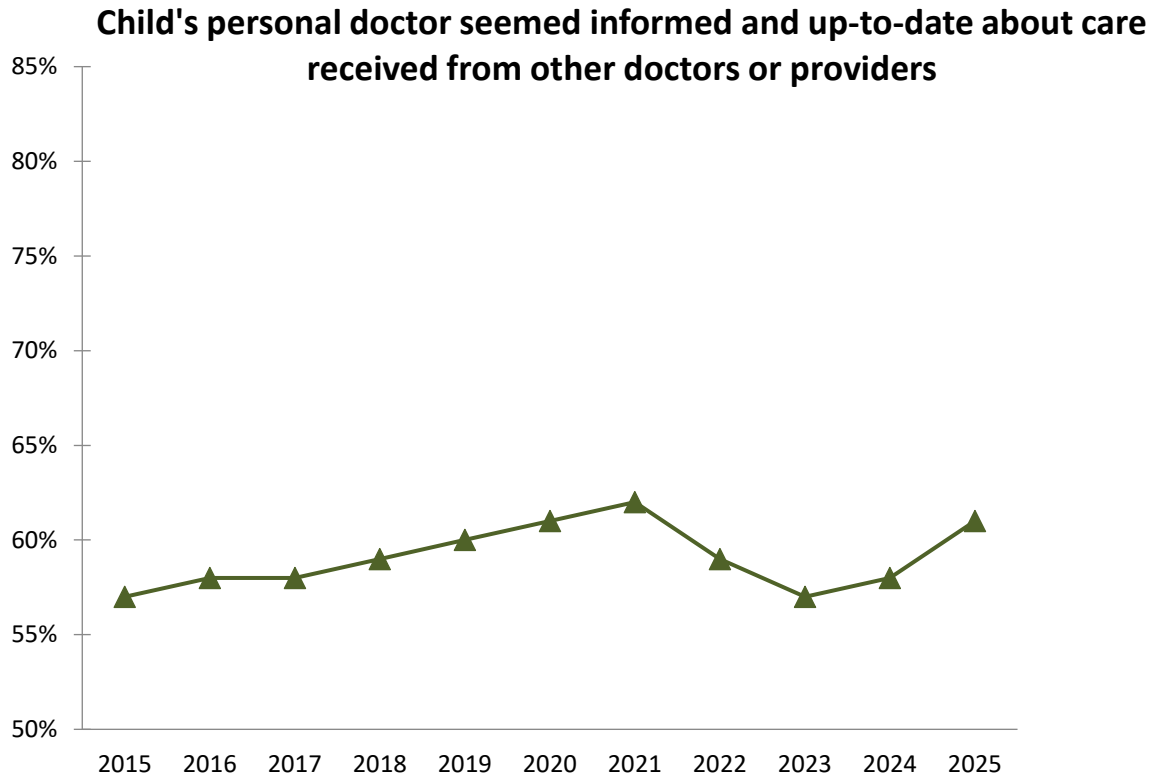
Child Medicaid Trends (continued)

Figure 5. Child Medicaid Top Box Rating Scores 2015–2025



Child Medicaid Trends (continued)

Figure 6. Child Medicaid Top Box HEDIS Score 2015–2025



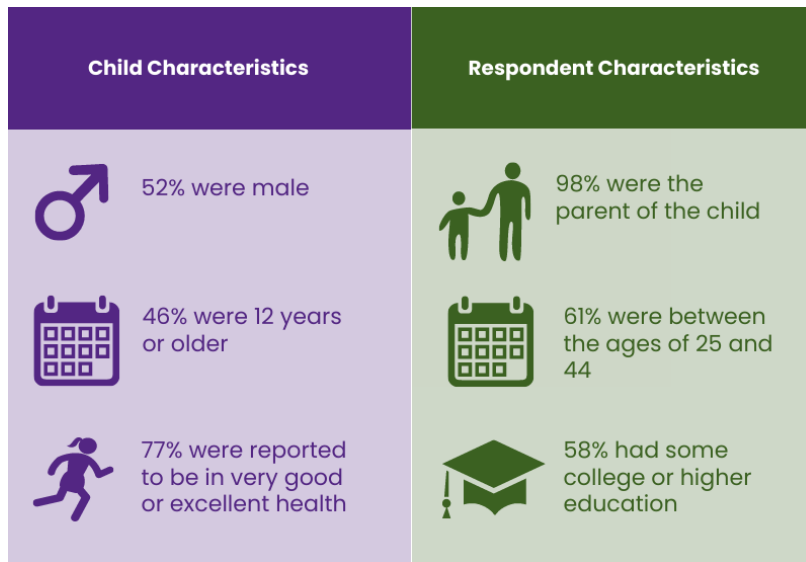
Category	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Number of Plans	136	132	169	150	152	137	175	166	233	234	291
Number of Respondents	91,049	79,058	103,283	79,736	72,429	56,311	86,597	66,182	103,515	111,833	143,235

Notes: (1) From 2014 to 2020, the database reported Child Medicaid version 5.0. (2) Beginning in 2021, the database reported Child Medicaid versions 5.0 and 5.1 combined. Beginning in 2023, the database reported Child Medicaid version 5.1 only.

Children’s Health Insurance Program (CHIP)

This section describes results for 37,035 CHIP respondents in the 2025 CAHPS Health Plan Survey Database.

Respondent Characteristics Highlights



2025 CHIP Number of Survey Respondents by State and Territory

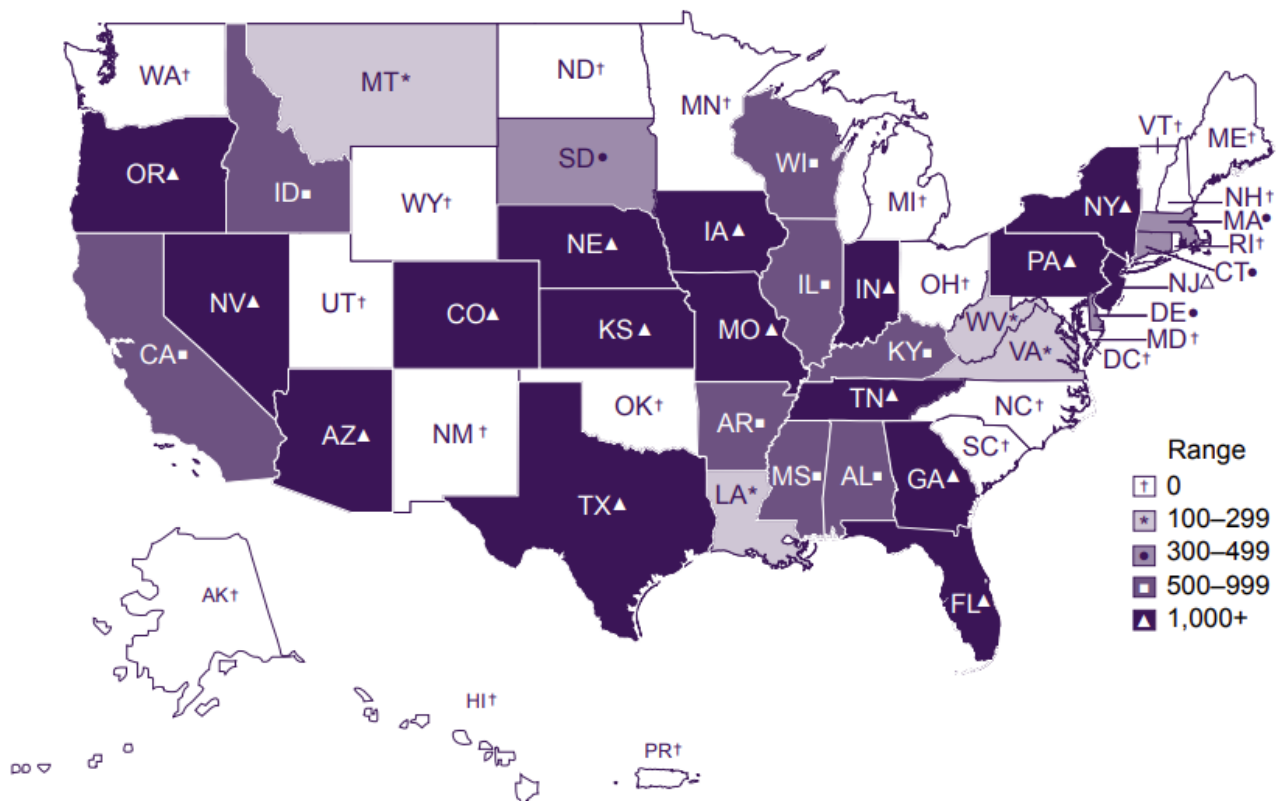
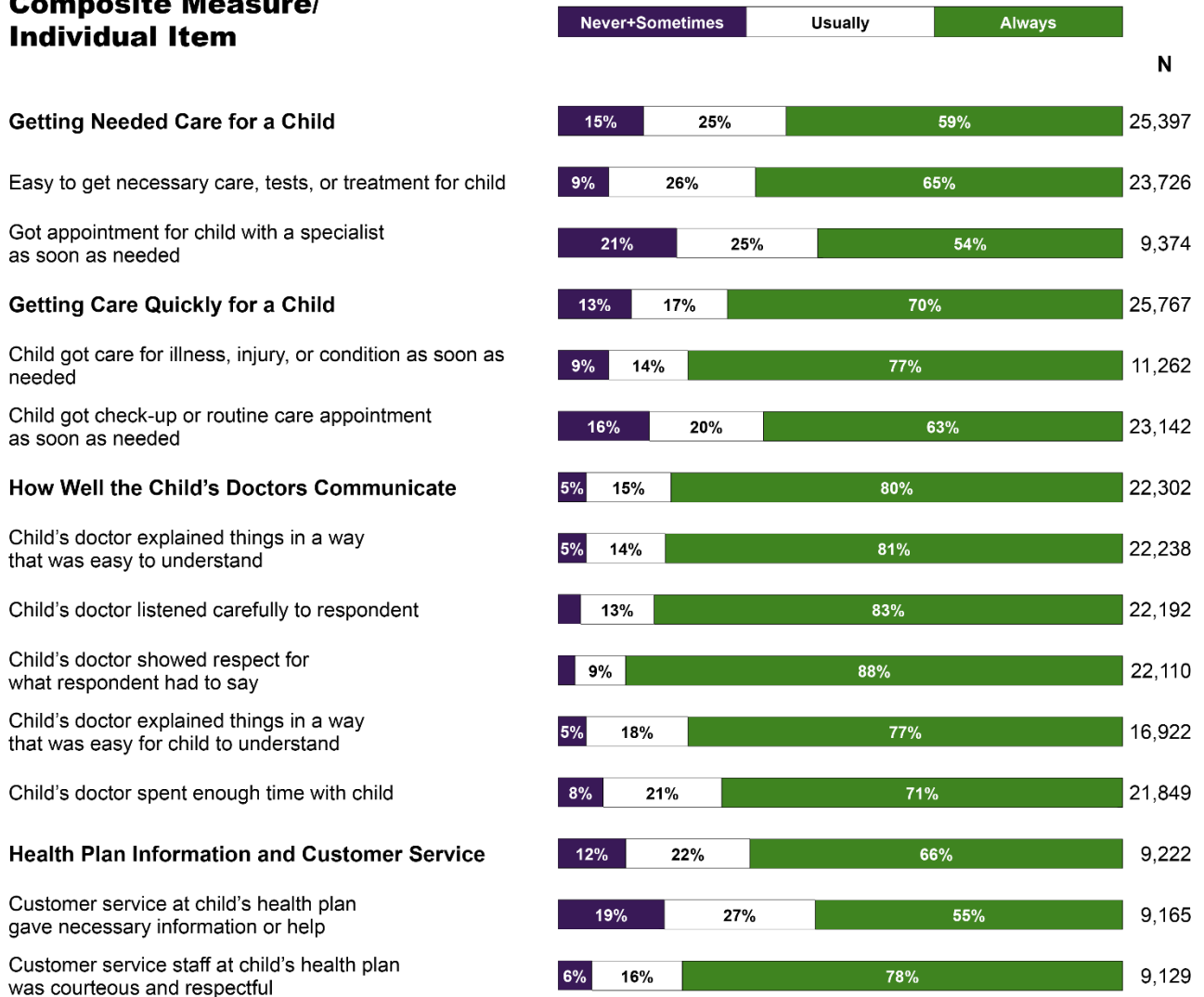


Chart 4-3. Composite Measure and Item Results—CHIP 2025 (Page 1 of 2)

CHIP 2025 Results

**Composite Measure/
Individual Item**



Rating

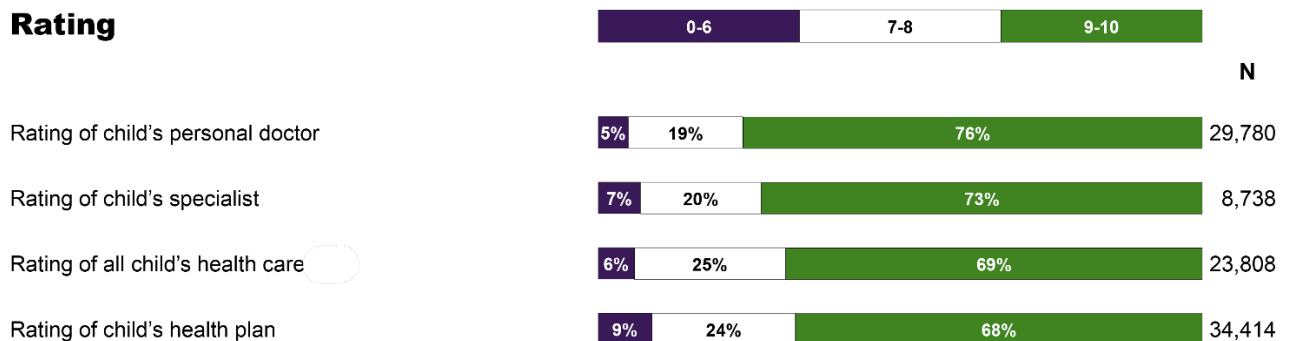


Chart 4-3 Composite Measure and Item Results—CHIP 2025 Results (Page 2 of 2)

CHIP 2025 Results (continued)

HEDIS Item



Child’s personal doctor seemed informed and up-to-date about care from other providers



N

Children With Chronic Conditions Item Set Composite Measure/Individual Item



Getting Specialized Services



N

Easy to get special medical equipment or devices for child



802

Easy to get special therapy for child



2,226

Easy to get treatment or counseling for child



3,783

Getting Prescription Medicine

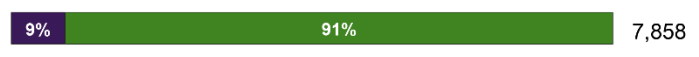
Easy to get prescription medicines for child through health plan



7,261



Family Centered Care: Personal Doctor Who Knows Child



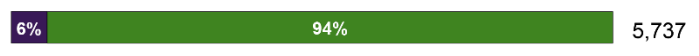
7,858

Child’s personal doctor talked about how child was feeling, growing or behaving**



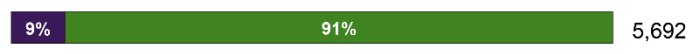
6,842

Child’s personal doctor understands how health conditions affected child’s day-to-day life



5,737

Child’s personal doctor understands how health conditions affected family’s day-to-day life



5,692

Family Centered Care: Getting Needed Information



Had questions answered by child’s doctors or health providers



7,361

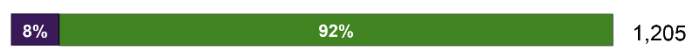


Coordination of Care and Services



4,990

Got help needed from child’s doctors or health providers in contacting child’s school or daycare



1,205

Got help from child’s health plan, doctor’s office, or clinic to coordinate child’s care among different providers or services



4,581

Note: “Getting Prescription Medicine” and “Family Centered Care: Getting Needed Information” are single item measures.

**This item is not part of the Children With Chronic Conditions Items Set but is included in the “Family Centered Care: Personal Doctor Who Knows Child” composite measure.

Table 10 presents the CHIP health plan average and percentiles for each composite measure, rating, HEDIS item, and chronic condition measures based on the average across health plan-level top box scores.

Table 10. 2025 CHIP Health Plan Average and Percentiles									
Measure	Health Plan Average	Standard Deviation	Top Box Percentiles						
			Lowest Score	10 th Percentile	25 th Percentile	50 th Percentile	75 th Percentile	90 th Percentile	Highest Score
Composite Measures									
Getting Needed Care for a Child	60%	7.70	37%	50%	55%	61%	65%	68%	77%
Getting Care Quickly for a Child	70%	7.65	41%	60%	66%	71%	75%	78%	84%
How Well the Child’s Doctors Communicate	80%	4.08	66%	75%	78%	80%	82%	85%	88%
Health Plan Information and Customer Service	66%	6.58	42%	58%	62%	67%	70%	73%	82%
Ratings									
Rating of child’s personal doctor	77%	4.04	66%	72%	75%	77%	79%	82%	91%
Rating of child’s specialist	73%	6.55	52%	66%	70%	74%	77%	82%	89%
Rating of child’s health care	69%	5.84	55%	60%	67%	70%	73%	77%	81%
Rating of child’s health plan	68%	6.62	50%	61%	64%	68%	73%	77%	83%
HEDIS Items									
Child’s personal doctor seemed informed and up-to-date about care from other providers	58%	7.21	36%	48%	53%	59%	63%	67%	73%
Children With Chronic Conditions Measures									
Getting Specialized Services (composite)	50%	10.78	22%	36%	44%	48%	55%	66%	77%
Getting Prescription Medicine (single-item)	68%	6.17	56%	61%	64%	66%	74%	77%	82%
Family Centered Care: Personal Doctor Who Knows Child (composite)	92%	3.09	84%	88%	90%	92%	94%	96%	99%
Family Centered Care: Getting Needed Information (single-item)	73%	6.82	54%	64%	68%	74%	78%	81%	84%
Coordination of Care and Services (composite)	76%	6.36	22%	36%	44%	48%	55%	66%	77%

Note: Results in this table are based on health plan-level top box scores, therefore the health plan average may not match Database Overall scores, which are based on respondent-level top box scores. The health plan average matches the Database Overall scores for 2025 CHIP results. Refer to Appendix G for more details.

Table 11 presents the CHIP top box scores by region, and Table 12 breaks out for the General Child and Children With Chronic Conditions populations.

Table 11. 2025 CHIP Top Box scores by Census Region					
CHIP Composite Measure/Individual Item	Database Average	Northeast Region	Midwest Region	South Region	West Region
Number of Plans	96	24	25	27	20
Number of Respondents	37,035	8,691	9,756	10,077	8,511
Getting Needed Care for a Child	59%	55%	61%	65%	55%
Easy to get necessary care, tests, or treatment for child	65%	62%	67%	70%	60%
Got appointment for child with a specialist as soon as needed	54%	48%	56%	59%	49%
Getting Care Quickly for a Child	70%	68%	72%	75%	64%
Child got care for illness, injury, or condition as soon as needed	77%	76%	80%	81%	70%
Child got check-up or routine care appointment as soon as needed	63%	61%	65%	68%	57%
How Well the Child's Doctors Communicate	80%	79%	81%	82%	77%
Child's doctor explained things in a way that was easy to understand	81%	79%	83%	84%	77%
Child's doctor listened carefully to respondent	83%	82%	84%	86%	80%
Child's doctor showed respect for what respondent had to say	88%	88%	89%	90%	86%
Child's doctor explained things in a way that was easy for child to understand	77%	77%	76%	79%	75%
Child's doctor spent enough time with child	71%	70%	73%	72%	66%
Health Plan Information and Customer Service	66%	64%	66%	71%	63%
Customer service at child's health plan gave necessary information or help	55%	51%	56%	60%	51%
Customer service staff at child's health plan was courteous and respectful	78%	76%	76%	82%	75%
Overall Ratings					
Rating of child's personal doctor	76%	75%	77%	78%	76%
Rating of child's specialist	73%	70%	74%	76%	70%
Rating of child's health care	69%	66%	68%	72%	68%
Rating of child's health plan	68%	62%	70%	69%	69%
HEDIS Items					
Child's personal doctor seemed informed and up-to-date about care from other providers	58%	56%	60%	61%	55%

Table 11. 2025 CHIP Medicaid Top Box Scores by Census Region (cont'd)					
CHIP Composite Measure/Individual Item	Database Average	Northeast Region	Midwest Region	South Region	West Region
Children With Chronic Conditions Measures					
Getting Specialized Services	49%	49%	51%	50%	44%
Easy to get special medical equipment or devices for child	54%	64%	48%	56%	50%
Easy to get special therapy for child	47%	45%	52%	48%	43%
Easy to get treatment or counseling for child	46%	38%	53%	46%	41%
Getting Prescription Medicine					
Easy to get prescription medicines for child through health plan	66%	68%	67%	66%	64%
Family Centered Care: Personal Doctor Who Knows Child	91%	91%	92%	93%	89%
Child's personal doctor talked about how child was feeling, growing or behaving**	90%	90%	90%	91%	89%
Child's personal doctor understands how health conditions affected child's day-to-day life	94%	93%	95%	94%	91%
Child's personal doctor understands how health conditions affected family's day-to-day life	91%	90%	92%	92%	88%
Family Centered Care: Getting Needed Information					
Had questions answered by child's doctors or health providers	74%	71%	75%	79%	68%
Coordination of Care and Services	76%	71%	77%	77%	77%
Got help needed from child's doctors or health providers in contacting child's school or daycare	92%	92%	94%	92%	90%
Got help from child's health plan, doctor's office, or clinic to coordinate child's care among different providers or services	60%	50%	61%	62%	65%

Note:

- Northeast: Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Puerto Rico, Rhode Island, Vermont
- Midwest: Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota, Wisconsin
- South: Alabama, Arkansas, Delaware, DC, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, West Virginia
- West: Alaska, Arizona, California, Colorado, Hawaii, Idaho, Montana, Nevada, New Mexico, Oregon, Utah, Washington, Wyoming

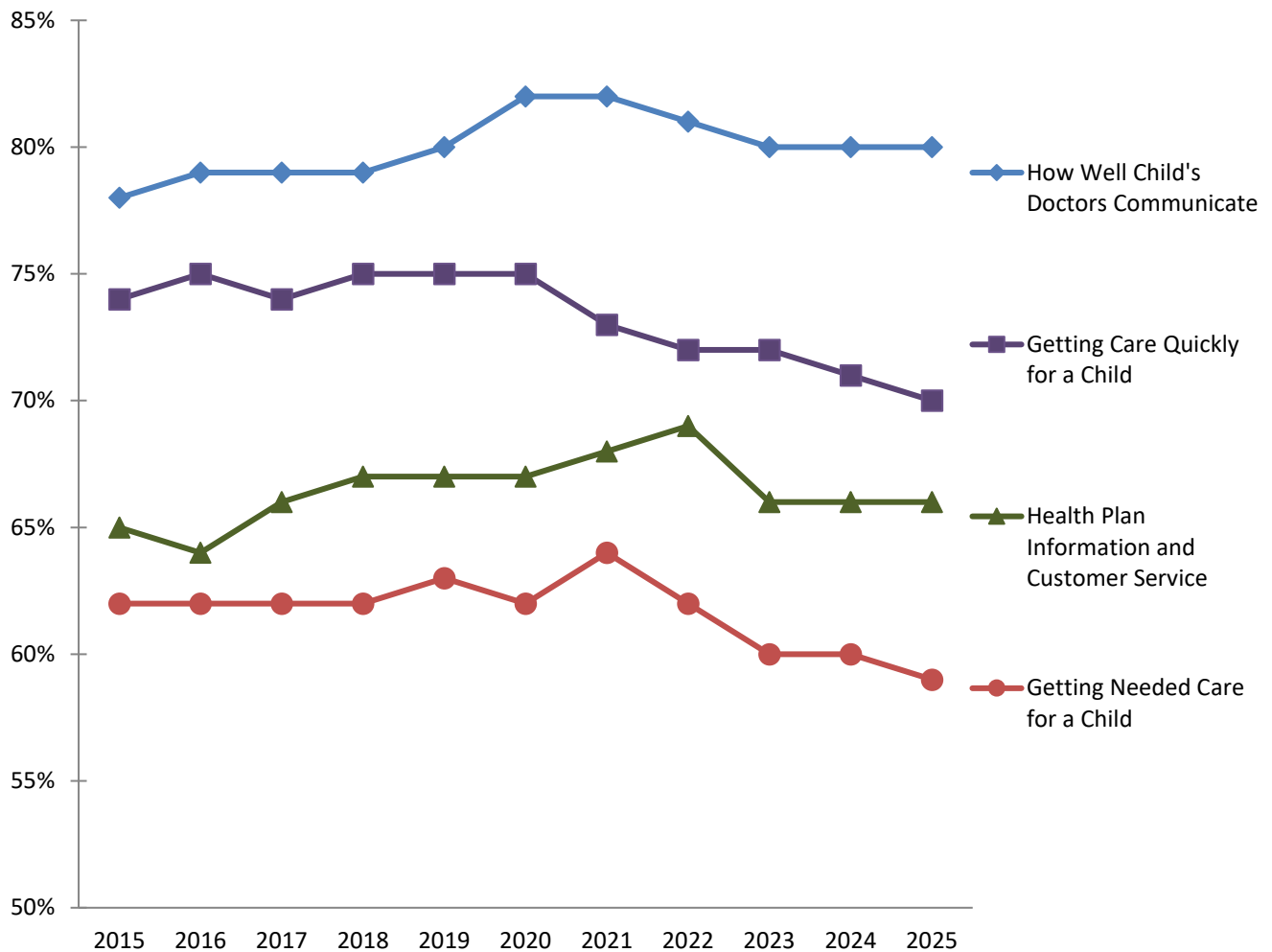
Table 12. CHIP Composite Measures Top Box by General Child and Children With Chronic Conditions

Composite Measure/Individual Item	Database Overall	General Child	Children With Chronic Conditions
Number of Plans	96	96	78
Number of Respondents	37,035	27,722	9,313*
Getting Needed Care for a Child	59%	61%	56%
Easy to get necessary care, tests, or treatment for child	65%	67%	61%
Got appointment for child with a specialist as soon as needed	54%	55%	52%
Getting Care Quickly for a Child	70%	71%	70%
Child got care for illness, injury, or condition as soon as needed	77%	78%	75%
Child got check-up or routine care appointment as soon as needed	63%	63%	64%
How Well the Child's Doctors Communicate	80%	80%	79%
Child's doctor explained things in a way that was easy to understand	81%	81%	81%
Child's doctor listened carefully to respondent	83%	84%	82%
Child's doctor showed respect for what respondent had to say	88%	89%	87%
Child's doctor explained things in a way that was easy for child to understand	77%	78%	75%
Child's doctor spent enough time with child	71%	70%	72%
Health Plan Information and Customer Service	66%	66%	66%
Customer service at child's health plan gave necessary information or help	55%	55%	54%
Customer service staff at child's health plan was courteous and respectful	78%	77%	78%
Overall Ratings			
Rating of child's personal doctor	76%	77%	75%
Rating of child's specialist	73%	74%	71%
Rating of child's health care	69%	71%	65%
Rating of child's health plan	68%	69%	63%
HEDIS Items			
Child's personal doctor seemed informed and up-to-date about care from other providers	58%	60%	56%

* Includes only responses that qualified as Children With Chronic Conditions.

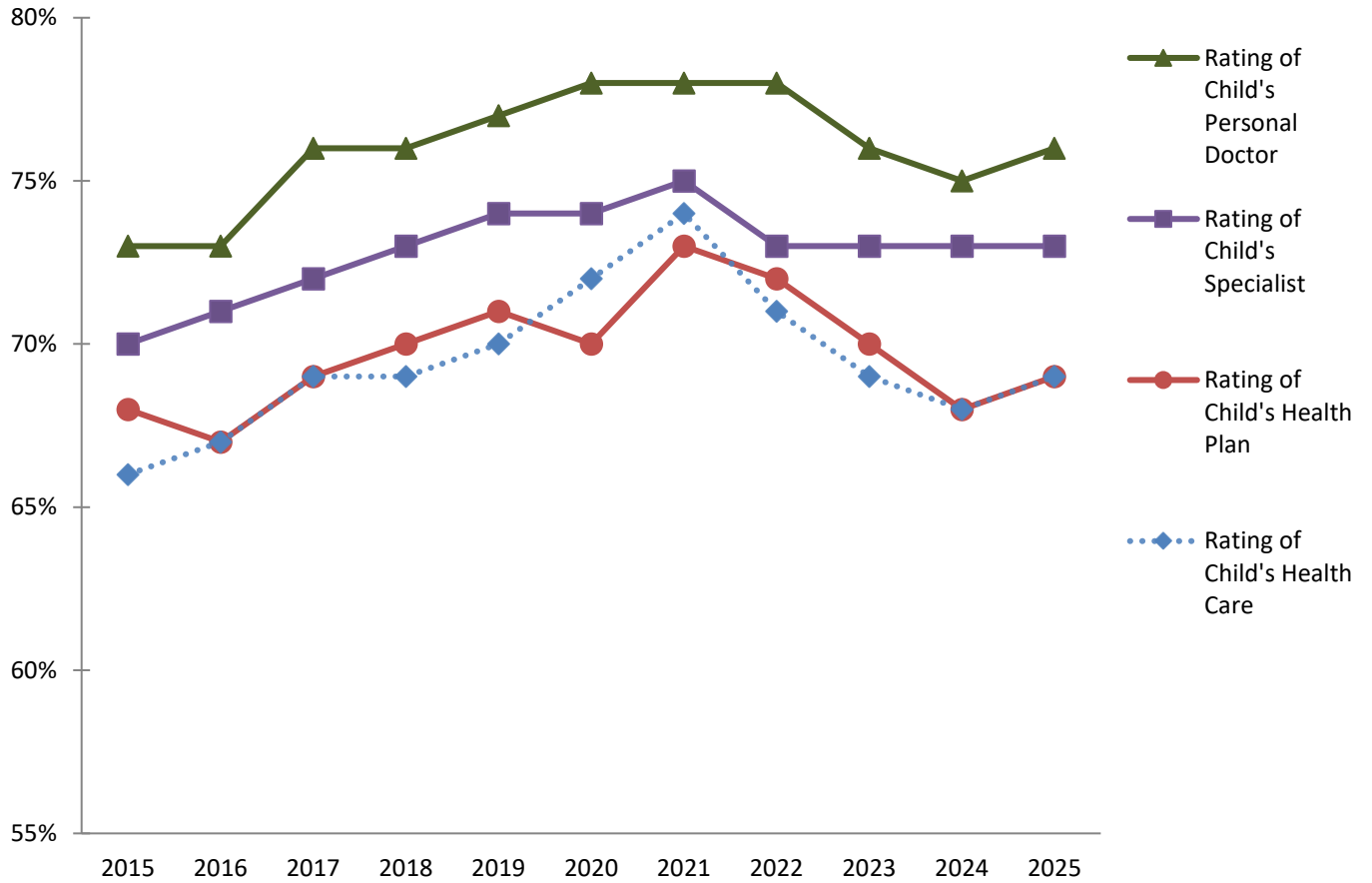
CHIP Trends

Figure 7. CHIP Top Box Composite Measure Scores 2015–2025



CHIP Trends (continued)

Figure 8. CHIP Top Box Rating Scores 2015–2025



CHIP Trends (continued)

Figure 9. CHIP Top Box HEDIS Score 2015–2025

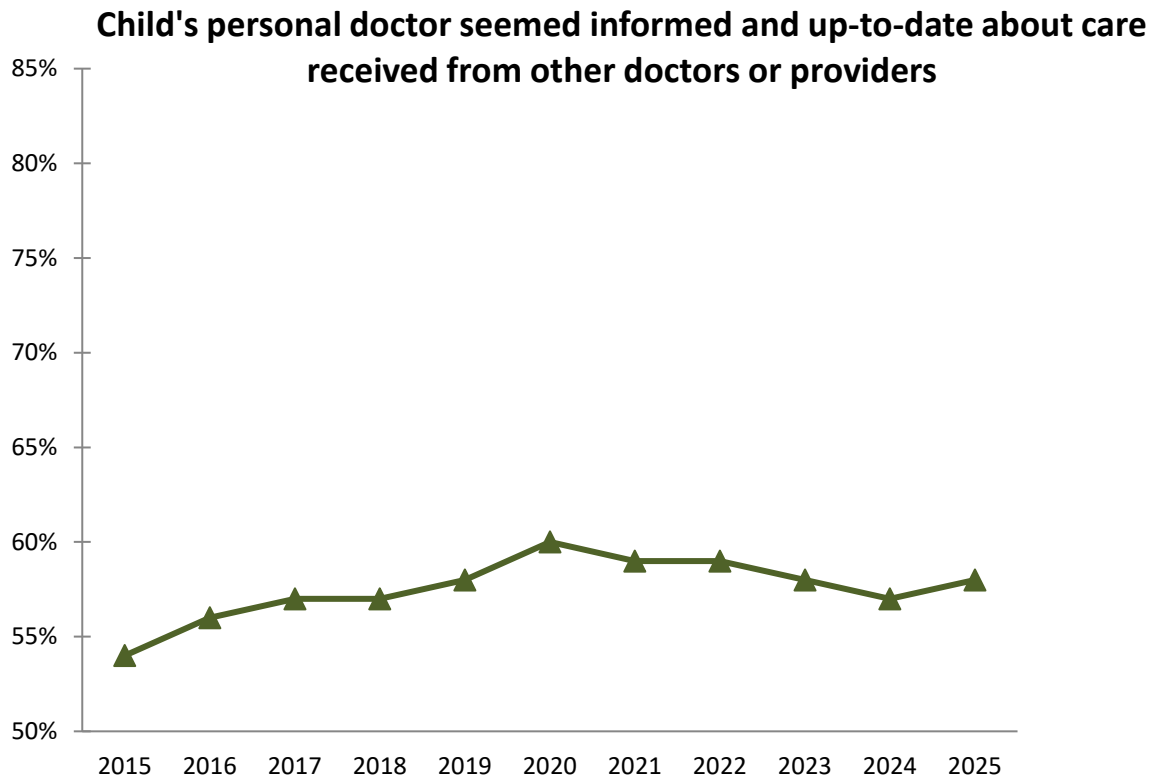


Table 13. CHIP Composition of the CAHPS Health Plan Survey Database 2015–2025											
Category	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Number of Plans	19	21	23	25	48	42	52	59	69	48	96
Number of Respondents	13,466	14,999	15,221	13,933	18,090	12,448	17,615	18,592	23,008	20,345	37,035

Notes: (1) From 2013 to 2020, the database reported Child Medicaid version 5.0. (2) Beginning in 2021, the database reported Child Medicaid versions 5.0 and 5.1 combined. Beginning in 2023, the database reported CHIP version 5.1 only.

Appendix A

Distribution of Responses by Response Mode

Table A-1. Distribution of 2025 CAHPS Health Plan Database Respondents by Response Mode

Response Mode	Adult Medicaid	Child Medicaid	CHIP
Mail	59%	41%	46%
Telephone	23%	34%	31%
Internet	18%	25%	23%

Appendix B

Respondent Demographic Characteristics

Demographic Characteristics	Percent
Sex	
Male	40%
Female	60%
Age	
18 - 24	10%
25 - 34	14%
35 - 44	15%
45 - 54	16%
55 - 64	28%
65 - 74	11%
75+	6%
Education	
8th grade or less	7%
Some high school, but did not graduate	14%
High school graduate or GED	40%
Some college or 2-year degree	26%
4-year college graduate	8%
More than 4-year college degree	5%
General Health Status	
Excellent	10%
Very Good	20%
Good	34%
Fair	28%
Poor	8%
Mental Health Status	
Excellent	16%
Very Good	21%
Good	32%
Fair	24%
Poor	7%

Demographic Characteristics	Child Medicaid Percent	CHIP Percent
Sex (Respondent)		
Male	13%	15%
Female	87%	85%
Sex (Child)		
Male	53%	52%
Female	47%	48%

Demographic Characteristics	Child Medicaid Percent	CHIP Percent
Age (Respondent)		
< 18	7%	7%
18 - 24	4%	2%
25 - 34	23%	21%
35 - 44	34%	40%
45 - 54	19%	23%
55 - 64	8%	5%
65 - 74	5%	1%
75+	1%	0%
Age (Child)		
0 - 3 years	19%	12%
4 - 7 years	20%	19%
8 - 11 years	21%	24%
12+ years	40%	46%
Education (Respondent)		
8th grade or less	8%	7%
Some high school, but did not graduate	11%	8%
High school graduate or GED	33%	29%
Some college or 2-year degree	29%	31%
4-year college graduate	11%	15%
More than 4-year college degree	8%	10%
General Health Status of child (as Reported by Respondent)		
Excellent	37%	39%
Very Good	35%	37%
Good	22%	20%
Fair	6%	4%
Poor	0%	0%
Mental Health Status of child (as Reported by Respondent)		
Excellent	37%	40%
Very Good	27%	31%
Good	23%	21%
Fair	11%	7%
Poor	2%	1%
Relationship to the child (as Reported by Respondent)		
Mother or Father	89%	98%
Grandparent	7%	1%
Aunt or Uncle	1%	0%
Older Brother or Sister	0%	0%
Other Relative	0%	0%
Legal Guardian	3%	1%

Appendix C

Respondent Utilization Data

Table C-1. 2025 CAHPS Health Plan Survey Respondent Utilization Data

Respondent Utilization Questions	Adult Medicaid	Child Medicaid	CHIP
Have a personal doctor?			
Yes	83%	86%	87%
No	17%	14%	13%
Number of visits to personal doctor?			
None	21%	23%	26%
1 time	28%	33%	37%
2	22%	21%	20%
3	12%	11%	9%
4	7%	5%	4%
5 to 9	8%	5%	3%
10 or more times	2%	1%	1%
Number of visits to doctor's office or clinic?			
None	32%	32%	32%
1 time	16%	21%	24%
2	16%	18%	19%
3	11%	12%	11%
4	8%	7%	6%
5 to 9	12%	7%	6%
10 or more times	6%	3%	2%
Made an appointment to see a specialist?			
Yes	50%	29%	27%
No	50%	71%	73%
Number of specialists seen?			
None	3%	6%	5%
1	42%	54%	62%
2	28%	23%	22%
3	15%	9%	7%
4	6%	4%	2%
5+	6%	4%	2%

Appendix D

Survey Respondents by State and Territory

Table D-1. 2025 Survey Respondents by State and Territory

State	Adult Medicaid	Child Medicaid	CHIP
Alabama	340	491	504
Alaska	181	510	-
Arkansas	502	731	669
Arizona	2,454	2,535	1,958
California	11,356	16,135	519
Colorado	1413	1,777	1,036
Connecticut	446	476	437
Delaware	758	1,396	482
District of Columbia	1,537	1,877	-
Florida	2,815	7,017	2,662
Georgia	716	3,110	1,023
Hawaii	307	1,831	-
Idaho	228	-	982
Illinois	429	1,160	711
Indiana	2,487	2,540	1,405
Iowa	1,095	2,653	2,155
Kansas	872	1,574	1,618
Kentucky	1,378	2,905	518
Louisiana	1,557	3,847	191
Maine	-	833	-
Maryland	2,744	10,292	-
Massachusetts	2,569	2,297	400
Michigan	3,441	2,950	-
Minnesota	-	-	-
Mississippi	747	1,711	968
Missouri	1,200	3,758	1,387
Montana	171	232	227
Nebraska	709	1,439	1,161
Nevada	998	2,066	1,097
New Hampshire	1,072	1,966	-
New Jersey	1,479	4,646	2,791
New Mexico	683	1,312	-
New York	411	2,188	1,080
North Carolina	4,780	5,298	-
North Dakota	514	693	-
Ohio	4,827	6,974	-
Oklahoma	1,213	4,703	-

Table D-1. 2025 Survey Respondents by State and Territory (cont'd)			
State	Adult Medicaid	Child Medicaid	CHIP
Oregon	5,719	4,213	2,692
Pennsylvania	5,031	3,726	3,983
Puerto Rico	1,510	2,303	-
Rhode Island	1,007	922	-
South Carolina	1,006	2,955	-
South Dakota	344	321	393
Tennessee	721	3,126	1,325
Texas	892	3,446	1,202
Utah	246	479	-
Vermont	365	488	-
Virginia	2,247	4,141	241
Washington	1,058	3,921	-
West Virginia	465	1,494	292
Wisconsin	2,476	4,909	926
Wyoming	526	868	-
Total	82,042	143,235	37,035

Appendix E

Top Box Scores by Product Type

Table E-1. 2025 Adult Medicaid Top Box Scores by Product Type

Adult Medicaid Composite Measure/Individual Item	Database Overall	HMO/POS*	FFS*
Number of Plans	257	241	11
Number of Respondents	82,042	76,019	3,527
Getting Needed Care	52%	52%	50%
Easy to get necessary care, tests, or treatment	54%	54%	52%
Got appointment with a specialist as soon as needed	49%	49%	49%
Getting Care Quickly	56%	56%	56%
Got care for illness, injury or condition as soon as needed	60%	60%	60%
Got check-up or routine care appointment as soon as needed	52%	52%	52%
How Well Doctors Communicate	77%	77%	75%
Doctor explained things in a way that was easy to understand	75%	75%	74%
Doctor listened carefully	78%	78%	76%
Doctor showed respect for what enrollee had to say	83%	83%	81%
Doctor spent enough time with enrollee	71%	71%	70%
Health Plan Information and Customer Service	69%	69%	64%
Customer service gave necessary information or help	58%	58%	53%
Customer service was courteous and respectful	79%	80%	75%
Overall Ratings			
Rating of personal doctor	70%	70%	69%
Rating of specialist	68%	68%	66%
Rating of health care	57%	57%	53%
Rating of health plan	61%	62%	54%
HEDIS Items			
Personal doctor seemed informed and up-to-date about care from other providers	59%	59%	55%
Advised to quit smoking or using tobacco (Always, Sometimes, Usually)	74%	74%	75%
Doctor/provider discussed medication to help quit smoking or using tobacco (Always, Sometimes, Usually)	54%	54%	51%
Doctor/provider discussed methods to quit smoking or using tobacco (Always, Sometimes, Usually)	48%	48%	45%

*HMO – Health Maintenance Organization; POS – Point of Service; FFS – Fee-for-Service

Table E-2. 2025 Child Medicaid Top Box Scores by Product Type			
Child Medicaid Composite Measure/Individual Item	Database Overall	HMO/POS*	FFS*
Number of Plans	291	274	13
Number of Respondents	143,235	136,096	5,219
Getting Needed Care for a Child	59%	59%	56%
Easy to get necessary care, tests, or treatment for child	64%	64%	62%
Got appointment for child with a specialist as soon as needed	53%	53%	50%
Getting Care Quickly for a Child	69%	69%	70%
Child got care for illness, injury, or condition as soon as needed	76%	76%	76%
Child got check-up or routine care appointment as soon as needed	63%	62%	63%
How Well the Child’s Doctors Communicate	79%	79%	79%
Child’s doctor explained things in a way that was easy to understand	80%	80%	81%
Child’s doctor listened carefully to respondent	82%	83%	81%
Child’s doctor showed respect for what respondent had to say	87%	87%	86%
Child’s doctor explained things in a way that was easy for child to understand	77%	77%	73%
Child’s doctor spent enough time with child	68%	68%	71%
Health Plan Information and Customer Service	68%	68%	64%
Customer service at child’s health plan gave necessary information or help	57%	57%	52%
Customer service staff at child’s health plan was courteous and respectful	79%	79%	75%
Overall Ratings			
Rating of child’s personal doctor	77%	77%	74%
Rating of child’s specialist	73%	74%	67%
Rating of all child’s health care	69%	69%	60%
Rating of child’s health plan	70%	71%	62%
HEDIS Items			
Child’s personal doctor seemed informed and up-to-date about care from other providers	60%	61%	57%

*HMO – Health Maintenance Organization; POS – Point of Service; FFS – Fee-for-Service

Appendix F

Definition of Composite Measures, Ratings, HEDIS Items, and Children With Chronic Condition Items

The following tables present the composite measures, individual items and ratings for the 5.1 Adult Medicaid and Child versions of the CAHPS Health Plan Survey. The table for the 5.1 Child versions also presents the supplemental item set for Children With Chronic Conditions.

Table F-1. Adult Medicaid Composite Measures and Rating Items for 5.1 Version of CAHPS Health Plan Survey	
Question Text	Response Options
Getting Needed Care	
In the last 6 months, how often did you get an appointment with a specialist as soon as you needed?	Response Options <ul style="list-style-type: none"> • Never • Sometimes • Usually • Always
In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?	
Getting Care Quickly	
In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?	Response Options <ul style="list-style-type: none"> • Never • Sometimes • Usually • Always
In the last 6 months, how often did you get an appointment for a check-up or routine care as soon as you needed?	
How Well Doctors Communicate	
In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand?	Response Options <ul style="list-style-type: none"> • Never • Sometimes • Usually • Always
In the last 6 months, how often did your personal doctor listen carefully to you?	
In the last 6 months, how often did your personal doctor show respect for what you had to say?	
In the last 6 months, how often did your personal doctor spend enough time with you?	
Health Plan Information & Customer Service	
In the last 6 months, how often did your health plan’s customer service give you the information or help you needed?	Response Options <ul style="list-style-type: none"> • Never • Sometimes • Usually • Always
In the last 6 months, how often did your health plan’s customer service staff treat you with courtesy and respect?	
Overall Ratings	
Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 6 months?	Response Options <ul style="list-style-type: none"> • 0-10
Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?	
Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate the specialist?	
Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your health plan?	

Table F-1. Adult Medicaid Composite Measures and Rating Items for 5.1 Version of CAHPS Health Plan Survey (cont'd)

Question Text	Response Options
HEDIS Items	
In the last 6 months, how often did your personal doctor seem informed and up-to-date about the care you got from these doctors or other health providers?	<p>Response Options</p> <ul style="list-style-type: none"> • Never • Sometimes • Usually • Always
In the last 6 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan?	
In the last 6 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication.	
In the last 6 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program.	

Table F-2. Child Medicaid and CHIP Composite Measures and Rating Items for the 5.1 Version of CAHPS Health Plan Survey	
Question Text	Response Options
Getting Needed Care	
In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?	Response Options <ul style="list-style-type: none"> • Never • Sometimes • Usually • Always
In the last 6 months, how often did you get appointments for your child with a specialist as soon as he or she needed?	
Getting Care Quickly	
In the last 6 months, when your child needed care right away, how often did your child get care as soon as he or she needed?	Response Options <ul style="list-style-type: none"> • Never • Sometimes • Usually • Always
In the last 6 months, how often did you get an appointment for a check-up or routine care for your child as soon as your child needed?	
How Well Doctors Communicate	
In the last 6 months, how often did your child’s personal doctor explain things about your child’s health in a way that was easy to understand?	Response Options <ul style="list-style-type: none"> • Never • Sometimes • Usually • Always
In the last 6 months, how often did your child’s personal doctor listen carefully to you?	
In the last 6 months, how often did your child’s personal doctor show respect for what you had to say?	
In the last 6 months, how often did your child’s personal doctor explain things in a way that was easy for your child to understand?	
In the last 6 months, how often did your child’s personal doctor spend enough time with your child?	
Health Plan Information & Customer Service	
In the last 6 months, how often did customer service at your child’s health plan give you the information or help you needed?	Response Options <ul style="list-style-type: none"> • Never • Sometimes • Usually • Always
In the last 6 months, how often did customer service staff at your child’s health plan treat you with courtesy and respect?	
Overall Ratings	
Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your child’s personal doctor?	Response Options <ul style="list-style-type: none"> • 0-10
Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate the specialist?	
Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your child’s health care in the last 6 months?	
Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your child’s health plan?	
HEDIS Item	
In the last 6 months, how often did your child’s personal doctor seem informed and up-to-date about the care your child got from these doctors or other health providers?	Response Options <ul style="list-style-type: none"> • Never • Sometimes • Usually • Always
In the last 6 months, did anyone from your child’s health plan, doctor’s office, or clinic help coordinate your child’s care among these different providers or services?	

Table F-2. Child Medicaid and CHIP Composite Measures and Rating Items for the 5.1 Version of CAHPS Health Plan Survey (cont'd)

Question Text	Response Options
Children With Chronic Conditions Item Set	
Getting Specialized Services	
In the last 6 months, how often was it easy to get special medical equipment or devices for your child?	Response Options <ul style="list-style-type: none"> • Never • Sometimes • Usually • Always
In the last 6 months, how often was it easy to get this therapy for your child?	
In the last 6 months, how often was it easy to get this treatment or counseling for your child?	
Getting Prescription Medicine	
In the last 6 months, how often was it easy to get prescription medicines for your child through his or her health plan?	Response Options <ul style="list-style-type: none"> • Never • Sometimes • Usually • Always
Family Centered Care: Personal Doctor Who Knows Child	
In the last 6 months, did your child’s personal doctor talk with you about how your child is feeling, growing, or behaving?*	Response Options <ul style="list-style-type: none"> • Yes • No
Does your child’s personal doctor understand how these medical, behavioral, or other health conditions affect your child’s day-to-day life?	
Does your child’s personal doctor understand how your child’s medical, behavioral, or other health conditions affect your family’s day-to-day life?	
Family Centered Care: Getting Needed Information	
In the last 6 months, how often did you have your questions answered by your child’s doctors or other health providers?	Response Options <ul style="list-style-type: none"> • Never • Sometimes • Usually • Always
Coordination of Care and Services	
In the last 6 months, did you get the help you needed from your child’s doctors or other health providers in contacting your child’s school or daycare?	Response Options <ul style="list-style-type: none"> • Yes • No

Appendix G

How Results Are Calculated

This appendix provides an overview of how the results were calculated. Note that all results presented are unweighted.

Survey Inclusion Rules for the Database

Both complete and partially complete surveys are included in the CAHPS Health Plan Survey Database. A completed survey has responses to 50 percent or more of the key items and a response for one or more composite measures or rating items. A partially complete survey has responses for one or more core composite measures or rating items but less than 50 percent of the key items. A list of the key items can be found in the [Fielding the CAHPS Health Plan Survey](#) guidelines.

Levels of Results

CAHPS Health Plan Survey Database results are calculated at both the respondent and health plan levels.

- **Respondent:** A respondent is defined as an individual enrollee who has completed or partially completed a CAHPS Health Plan Survey. Respondent-level survey results are calculated across **all** respondents in the database, ignoring their association with a particular health plan. All but the percentile results are calculated at the respondent level.
- **Health Plan:** Health plan-level survey results are calculated across the respondents within a specific health plan. Health plan-level results are used for the percentiles only.

Types of Results

Top Box and Proportional Scores

Top box scores for survey items are created by calculating the percentage of respondents who chose the most positive response on a given item's response scale (e.g., "Always" on the "Always-Never" scale). The CAHPS Health Plan Survey uses several different response scales. Table H-1 displays the different response scales and how the options are categorized for top box and proportional scoring.

Response Scale	Lower Proportion	Middle Proportion	Top Box Score
Dichotomous Yes/No	No	--	Yes
4-point response scale	Never, Sometimes	Usually	Always
Global ratings	0–6	7–8	9–10

Note: The top box and proportional scoring results exclude "missing" in the calculation of percentages.

Calculating top box and other proportional scores for an individual survey item: Top box and other proportional scores are calculated by aggregating results across respondents for the health plan, sponsor or Database. For example, if 400 out of 1,000 total respondents answered "Always" to a particular item, the top box score for that item would be 40 percent [i.e., $(400 \div 1,000) * 100 = 40\%$].

Calculating top box and other proportional scores for a composite measure: The scores for a composite measure are equal to the average or mean of the proportion of responses (excluding missing data) in each response category across the items in the composite. The following steps show how those proportions are calculated:

- Step 1—Calculate the proportion of responses in each proportional score category for **each question** in a composite measure.

- Step 2—Calculate the average proportion responding to each category **across the questions** in the composite measure.

As shown in Table H-2, top box scores for composite measures are calculated by averaging the top box scores across the items within the composite measure. This methodology can be applied to any of the CAHPS composite measures. For example, the “Getting Needed Care” composite measure has two items. If the top box score for the first item is 68 percent and the second item is 72 percent, the composite measure score would be 70 percent (i.e., [68 percent + 72 percent] ÷ 2 = 70 percent). The same method is used for the other proportional scores.

Table G-2. Sample Calculation of Top Box and Proportional Scores

CAHPS Health Plan Composite Measure: Getting Needed Care Composite

Items in Composite Measure	Response Scale	Lower Proportion (Never, Sometimes)	Middle Proportion (Usually)	Top Box Score (Always)
Got appointment for urgent care as soon as needed	Never, Sometimes, Usually, Always	12%	20%	68%
Got appointment for check-up or routine care as soon as needed	Never, Sometimes, Usually, Always	7%	21%	72%
Composite Measure Proportional Score	--	10% = (12% + 7%) / 2	21% = (20% + 21%) / 2	70% = (68% + 72%) / 2

As shown in this computation, each item is given equal weight when calculating the composite measure results. Computationally, this implies calculating the score of each item and then finding the average across the item scores to obtain the composite measure score. The items are weighted equally.

The Database Overall displays the percentage of all respondents in the database who selected a response in the lower proportion, middle proportion, or top box categories.

Health Plan Average

The Health Plan Average was calculated by first determining the top box scores for each health plan and then averaging those scores across all health plans. This approach gives equal weight to each health plan, regardless of its size. Unlike other sections of the report, where top box scores are summarized for all respondents, regardless of health plan, the Health Plan Average is first calculated at the health plan level before calculating the average.

Standard Deviation

The standard deviation is a measure of the spread or variability of health plan-level scores around the Health Plan Average. A low standard deviation indicates that most of the scores are close to the average, while a high standard deviation indicates greater variability around the average.

Percentiles

Percentile scores are calculated at the health plan level and represent the percentage of health plans that scored at or below the top box score for a particular item or composite measure. For example, the 50th percentile, or the median, is the top box score at or below which 50 percent of all health plan top box scores fall. Percentiles range from 0 to 100.

Data Suppression Rules

There are circumstances under which certain item or composite measure scores or reporting categories are suppressed (i.e., 'NA' is displayed). There are also times when certain health plans are excluded from percentile calculations. These instances of data suppression and/or exclusion are due to one or more of the following factors:

- too few respondents responding to an item,
- a health plan having too few completed surveys, or
- too few health plans for a particular reporting category.

The rules for data suppression and exclusion are described below.

1. Item Suppression

If there are fewer than 20 valid responses available for any item, the item's results are suppressed.

2. Health Plan Suppression

If there are fewer than 20 completed surveys for a given health plan, the health plan is excluded from percentile calculations. The health plan's results are still included in overall database results.

3. Reporting Category Suppression

When displaying scores by health plan characteristic (e.g., region), a particular characteristic's results are suppressed if there are fewer than 10 health plans for that category.

