

# 2023 Adult and Child NC Medicaid CAHPS® Aggregate Report in Summary

## Survey Overview

The North Carolina (NC) Department of Health and Human Services Division of Health Benefits (DHB) administered the 2023 Consumer Assessment of Healthcare Providers and Systems (CAHPS®)<sup>1</sup> survey to promote actionable performance feedback to improve overall care.

## Survey Administration

The survey was administered to beneficiaries of the five Standard Plans<sup>2</sup> (referred to throughout this report as Prepaid Health Plans or PHPs), the Eastern Band of Cherokee Indians (EBCI) Tribal Option, Medicaid Direct, Foster Care children, and those in Medicaid Direct who qualify for Tailored Plans<sup>3</sup> (TPs).

Adult and parents/caretakers of child respondents provided feedback on their experiences with health plans and health care by mail or online between July 28 and October 20, 2023.

Adults were administered a survey with 40 core questions, and an additional nine supplemental questions added by DHB, and parents/caretakers of child members were administered a survey with 41 core questions, and an additional eight supplemental questions added by DHB. Results were used to assess the experience of adults and children enrolled in NC Medicaid. Populations surveyed were compared to the national average and the two aggregate populations (NC Medicaid Program and NC PHP Aggregate) to test for significant differences. For more details, please refer to the full report [here](#).

## Key Takeaways

### Response Rates

Table 1 outlines the total number of beneficiaries sampled, the number of responses (i.e., completed surveys), and the response rate for the adult and child populations.

Table 1. Adult and Child Survey: 2023 CAHPS Survey Administration Outcome and Response Rates

Survey Type	Total Eligible Sample	Total Respondents	Response Rate <sup>^</sup>
Adult	60,805	4,883	8.03%
Child	61,460	6,028	9.81%

<sup>^</sup>Race and ethnicity oversamples for the Black and Hispanic beneficiary populations are included in the sample sizes and total respondents in this table.

- Response rates for CAHPS surveys have been declining nationally in recent years.<sup>4</sup> To combat this, NC DHB refined the sampling strategies used for the 2023 CAHPS Survey administration and included substantial oversamples for each population in addition to introducing a web-component as a new modality for surveying. These efforts were successful in obtaining a large volume of responses and preserving a similar response rate to the 2022 administration (i.e., **response rates did not decline**, resisting the typical trend).

### Experience of Overall Care

- Year over year trends for respondents' ratings of their experience with NC Medicaid Program health care were not significantly different, but do indicate that **experience with all health care remains largely positive and has improved over time**. Figure 1 shows how experience with health care has changed between 2018 to 2023.

<sup>1</sup> CAHPS® is a registered trademark of the Agency of Healthcare Research and Quality (AHRQ)

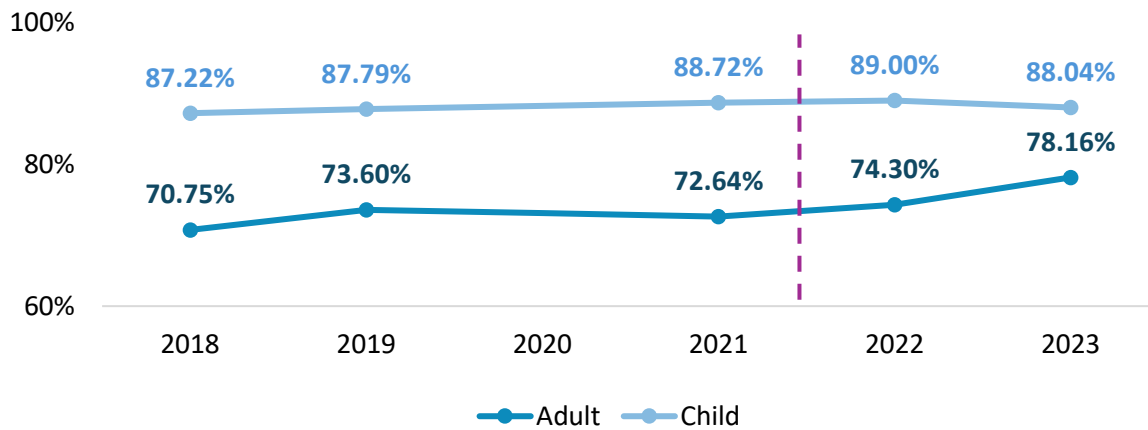
<sup>2</sup> The five PHPs include AmeriHealth Caritas of North Carolina, Inc.; Carolina Complete Health, Inc.; Healthy Blue of North Carolina; UnitedHealthcare of North Carolina, Inc.; and WellCare of North Carolina, Inc.

<sup>3</sup> Tailored Plans were unlaunched managed care programs at the time of the NC CAHPS 2023 Survey. TPs are health plans specifically oriented to those with higher behavioral health needs. Those eligible for TPs are Medicaid beneficiaries who have mental health needs, intellectual/developmental disabilities (I/DD), traumatic brain injuries, or severe substance use disorders.

<sup>4</sup> Cynthia Bland et al, Challenges Facing CAHPS Surveys and Opportunities for Modernization (Research Triangle Park NC: RTI Press, 2022).

- In 2023, **78.16% of adult respondents rated their health care positively and 88.04% of parents/caretakers of child respondents rated their child’s health care positively.**

Figure 1. Year over Year Comparisons: Percentage of Respondents Who Rate All Their/Their Child’s Health Care Positively for the NC Medicaid Program



The vertical, dashed line indicates the implementation of Medicaid Managed Care.  
Data were not collected in 2020.

### Race/Ethnicity Stratifications

- Differences in experience of care varied by race and ethnicity within the NC Medicaid population:
  - **Adult and child beneficiaries who identified as Hispanic ethnicity reported significantly better positive experiences across several measures**, including Rating of Health Plan and How Well Doctors Communicate.
  - **Child beneficiaries who identified as Other<sup>5</sup> race reported significantly worse positive experiences across several measures**, including Getting Needed Care, Getting Care Quickly, and Coordination of Care.
  - **Adult and child beneficiaries who identified as Other race both reported significantly worse positive ratings for How Well Doctors Communicate.**

### Rural/Urban Stratifications

- Very few significant differences were found between beneficiaries that live in urban counties compared to those that live in rural counties. The following significant differences were found for the NC Medicaid population:
  - **Adult respondents living in rural counties reported significantly worse positive experiences with their personal doctor** when compared to respondents living in urban counties.
  - **Child respondents living in rural counties reported significantly better positive experiences with their child’s ability to get needed care** when compared to respondents living in urban counties.

### Supplemental Items

- DHB added questions to assess more specific beneficiary experiences:
  - Among **adults who sought counseling or mental health treatment, the majority (75.48%) usually or always received an appointment as soon as they needed.** Likewise for children, **71.94% usually or always received an appointment as soon as they needed** among parent/caretaker respondents who sought counseling or mental health treatment for them.
  - Primary reasons adult respondents reported being **treated in an unfair or insensitive way** from healthcare staff were because of a **health condition, disability, and income.** Parent/caretaker respondents of child beneficiaries primarily reported that their child was being **treated in an unfair or insensitive way** because of their **health condition, language or accent, and age.**

<sup>5</sup> The Other race category includes: Asian, Native Hawaiian or other Pacific Islander, and Other.