

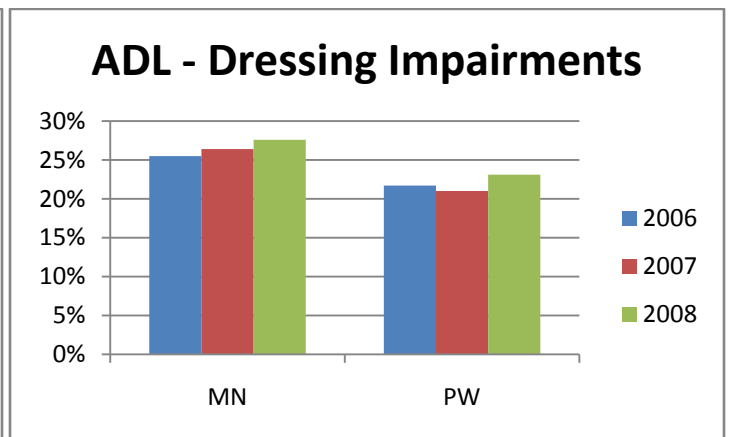
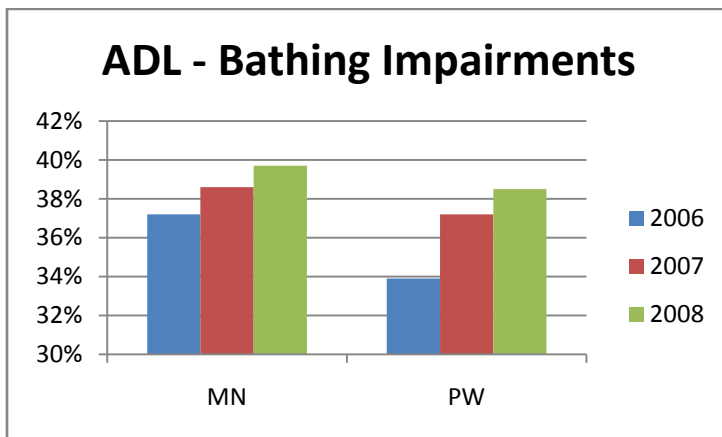
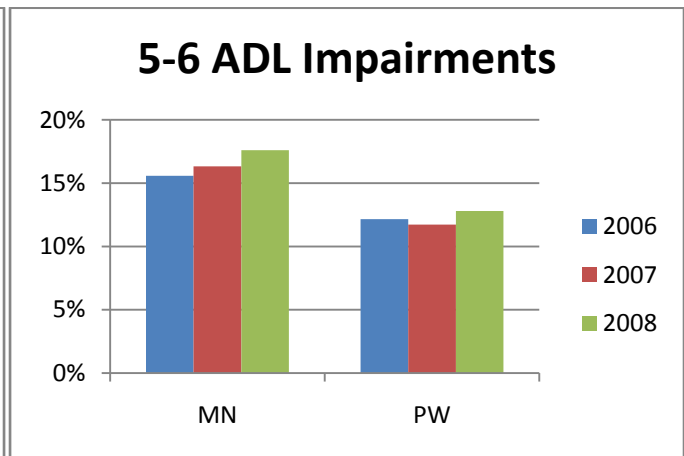
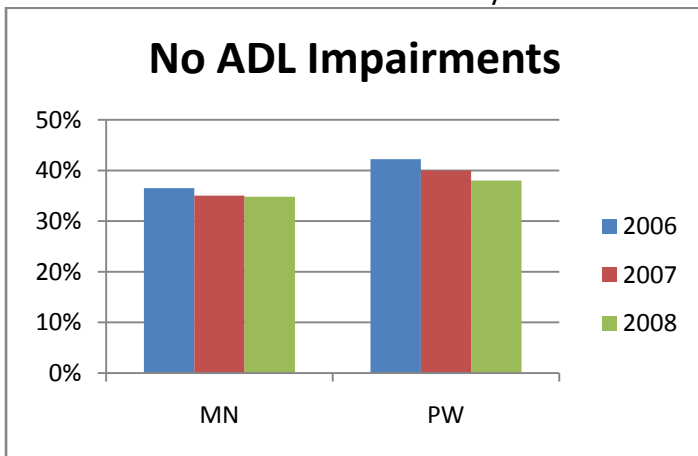
2008 HOS – M Summary

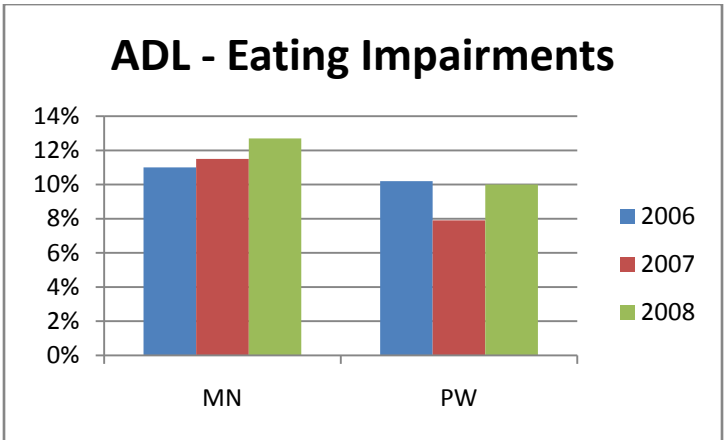
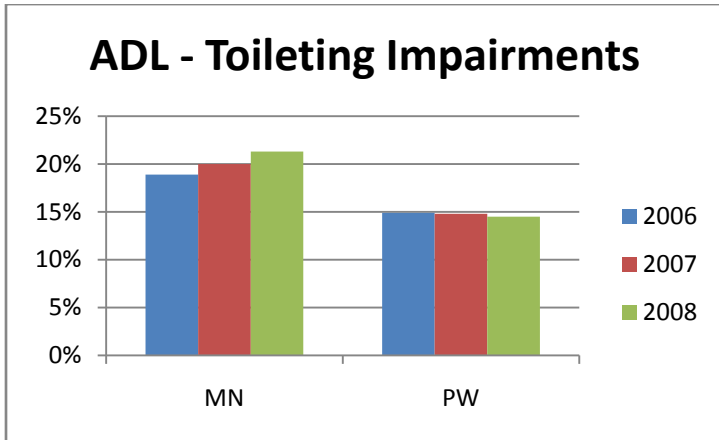
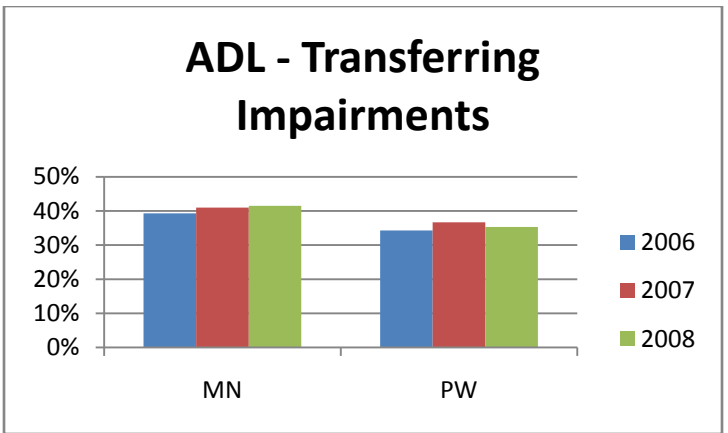
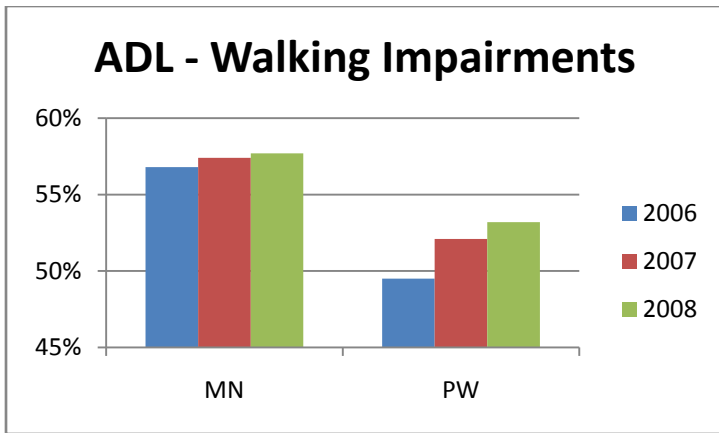
The Modified Health Outcomes Survey (HOS-M) is a survey the Centers for Medicare and Medicaid Services (CMS) requires dual eligible plans to participate in. It collects information on dually eligible, age 55+ members living in the community to calculate frailty factors which are then used by CMS in addition to the diagnosis-based risk adjustment formula for health plan payment purposes. HOS-M is also used to assess a health plans ability to maintain or improve the physical and mental health functioning of its dually eligible members.

The survey was comprised of sixteen questions for the respondent and three additional questions for the proxy (if applicable). The questions include activities of daily living (ADL) questions, twelve health status questions, a question on memory loss as it interferes with daily activities and a question about urinary incontinence. The ADL questions involve ability/difficulty in bathing, dressing, walking, transferring, toileting and eating. The health status questions are in two areas: physical (physical functioning, pain and general health) and mental (vitality, social-functioning, emotional and mental health). The responses to the health status questions are incorporated into two composite scores, Physical (PCS) and Mental (MCS).

ADL Impairments

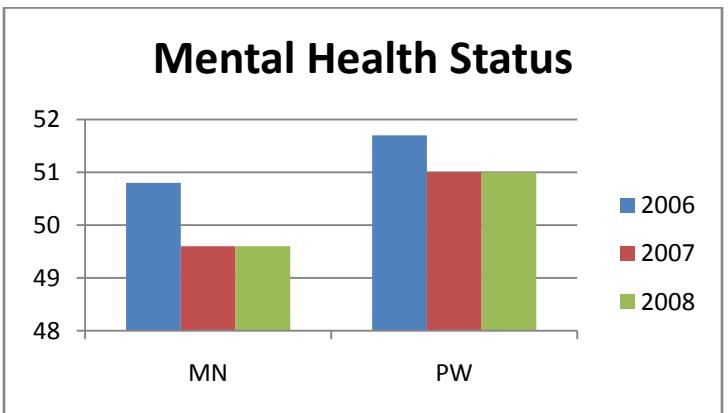
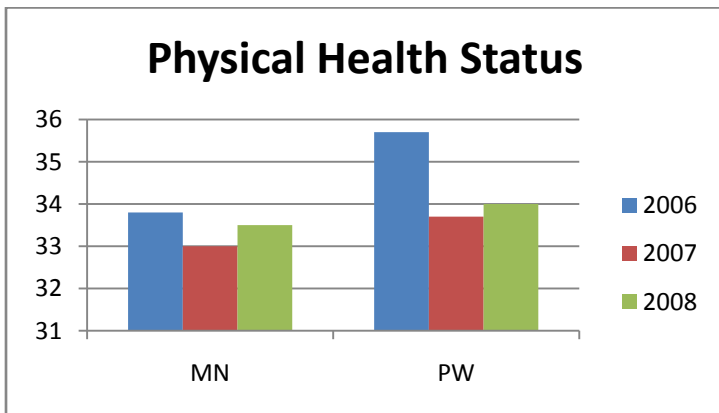
Respondents were asked if they had difficulty and/or needed any help with any of the ADLs. No ADL impairments is ideal and indicates a minimum frailty level.





Physical and Mental Functioning

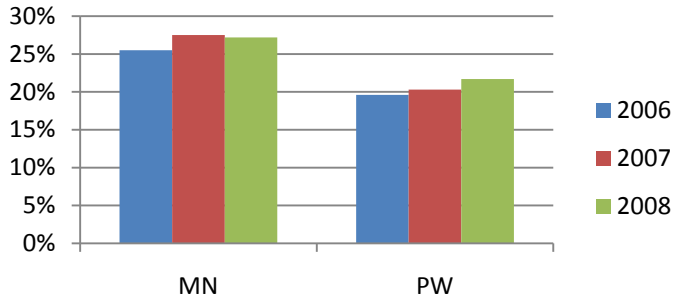
The Physical (PCS) and Mental (MCS) scores correspond with levels of functioning (higher = better functioning). PW had the 3rd highest score amongst MSHO/MnDHO plans for PCS and was the top plan for MCS (as compared to all 51 other plans in the report) for the second year in a row.



Urinary Incontinence and Memory Loss

Respondents were asked if they have difficulty controlling urination. The rate went down slightly from 19.2% in 2007 to 18.5% in 2008 and is still below the combined MSHO/MnDHO rate of 22.9% and was the second lowest rate for all MSHO/MnDHO plans. Respondents were asked if they experience memory loss that interferes with daily activities. From 2007 to 2008 the overall rate increased by 0.4% but was the lowest rate for all MSHO/MnDHO plans.

Reported Memory Loss



Reported Incontinence

