
2025 CONSUMER ASSESSMENT OF HEALTHCARE PROVIDERS AND SYSTEMS (CAHPS®)¹

Families and Children, MinnesotaCare, Minnesota Senior Care Plus (MSC+), PrimeWest Senior Health Complete (HMO SNP), and Prime Health Complete (HMO SNP)/Special Needs BasicCare (SNBC)

SURVEY OVERVIEW AND RESPONSE RATES

Since 2005, the Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey has been administered annually to PrimeWest Health members. A total of four CAHPS surveys are administered: the Minnesota Department of Human Services (DHS) requires two versions to be administered for managed care public programs—one for adults and one for children, the Centers for Medicare & Medicaid Services (CMS) requires a version to be administered for Medicare plans, and the National Committee for Quality Assurance (NCQA) requires a version for accreditation.

These surveys measure how well health plans are meeting their members' expectations and needs, and questions vary based on the population being surveyed. To be eligible for the adult DHS, CMS, and NCQA surveys, members had to be currently and continuously enrolled for at least five out of six months as of December 31, 2024, and members had to be at least age 18.

The child CAHPS survey was added in 2025. To be eligible for this survey, members had to be currently and continuously enrolled for at least five of the last six months and be age 17 or under as of December 31, 2024. Questions were included in the survey to identify children with chronic conditions (CCCs). The following results of the child CAHPS survey were split out by child members with chronic conditions, without chronic conditions, and total results combined.

DHS Survey

The Health Services Advisory Group (HSAG) administered the 2025 DHS survey using the CAHPS 5.1 Adult Medicaid Health Plan Survey and the CAHPS 5.1 Child Medicaid Health Plan Survey standardized survey instruments. The survey consists of 40 core questions yielding nine measures of experience, one individual item measure, and four global rating questions. The programs surveyed were Families and Children-Medical Assistance (F&C-MA DHS)², MinnesotaCare (MNCare), Minnesota Senior Care Plus (MSC+), and Prime Health Complete (HMO SNP) (PHC)/Special Needs BasicCare (SNBC). Results by health plan were grouped in

¹ CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ)

² Families and Children was previously known as Prepaid Medical Assistance Program (PMAP)

instances where there was not an adequate number of members to warrant an individual sample. HSAG grouped PrimeWest Health's results as follows:

- MSC+ results were grouped with South Country Health Alliance (SCHA) and Itasca Medical Care (IMC)

HSAG also supplied raw data for all programs so that rates specific to PrimeWest Health could be calculated. The rates reported here are those specific to PrimeWest Health unless otherwise indicated.

HSAG administered the DHS survey from June through August 2025. Each member received up to four mailings, and telephone interview attempts were made if no response was received from the member. Participation in the survey was voluntary. Members identified as Spanish-speaking through administrative data were mailed a Spanish version of the survey and members not identified as Spanish-speaking received an English version of the survey. Instructions informing members of a number they could call for assistance interpreting the materials were included in multiple alternative languages. For the survey to be considered complete, members had to have provided valid responses for at least three out of five identified questions.

The adult DHS survey was not administered in 2024 due to contract negotiation delays between DHS and their vendor. Therefore, there is no DHS data for 2024 to present from PrimeWest Health's Families and Children (F&C), MinnesotaCare (MNCare), Minnesota Senior Care Plus (MSC+), and Prime Health Complete (HMO SNP) (PHC)/Special Needs BasicCare (SNBC) populations; as such, DHS survey results for 2025 were compared to survey results from 2023, where applicable.

NCQA Survey

DataStat administered the 2025 NCQA survey using the Adult Medicaid 5.1H CAHPS survey instrument that consists of 40 questions. The NCQA survey was given to Families and Children-Medical Assistance (F&C-MA NCQA) members in addition to the DHS survey. Some questions were not asked in the NCQA survey that were asked in the DHS and CMS surveys.

DataStat administered the NCQA survey from February through May 2025. The survey was offered in both English and Spanish. Instructions informing members of a number they could call if they needed assistance interpreting the materials were included in multiple alternative languages. For the survey to be considered complete, the member could not answer "No" to the first question. In addition, the NCQA survey required members to have a valid response for at least three out of five identified questions.

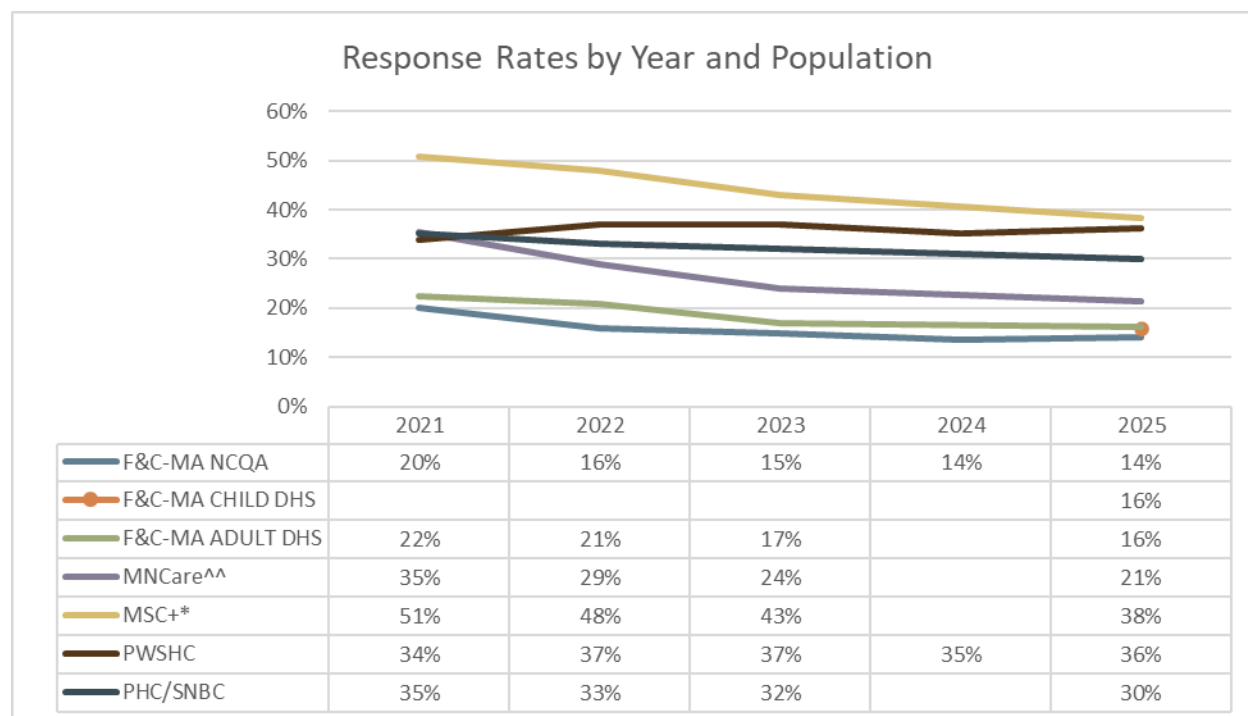
CMS Survey

DataStat administered the 2025 CMS survey using the Medicare Advantage & Prescription Drug Plan (MA & PDP) CAHPS survey, which includes many of the same questions as the DHS survey as well as questions about prescription drugs. PrimeWest Senior Health Complete (HMO SNP) (PWSHC) is the only program surveyed using the MA & PDP instrument. Because member-level responses have not been given to PrimeWest Health, the information in this report comes from summary reports provided by CMS, which suppress any area that has fewer than 11 responses.

DataStat administered the CMS survey from March through June 2025. The survey was offered in both English and Spanish. Instructions informing members of a number they could call if they needed assistance interpreting the materials were included in multiple alternative languages. Members had to answer at least one reportable measure question for the survey to be considered completed.

Response Rates

Random samples of members in each program received the surveys with varying response rates as indicated in the following.



^^PrimeWest Health data combined with data from other health plans for 2021 – 2023

*PrimeWest Health data combined with data from other health plans for all years.

Response rates were lower for most populations in 2025 compared to 2023, with the exception of PrimeWest Senior Health Complete. In addition, the F&C population for the NCQA survey was completed in 2024 and the response rate was the same for 2025. The PrimeWest Senior Health Complete survey was also completed in 2024 and saw a one percent increase in 2025. When reviewing this data, it is important to note that DHS did not perform that CAHPS survey in 2024 due to delays in contract negotiations with their vendor.

RESULTS

All rates that follow are specific to PrimeWest Health members only. The following results for the overall satisfaction and composite scores represent the percentage of members who responded most favorably to the questions; for example, responding with a score of “8,” “9,” or “10” in an overall rating. Where available, PrimeWest Health’s scores for the prior four years are trended and displayed alongside the 2025 PrimeWest Health score.

Overall Satisfaction Scores

Members were asked to rate the health care they received from their health plan and health care providers using a scale of 0 – 10, where “0” is the worst possible rating and “10” is the best possible rating. The satisfaction score represents the percent of members who responded most favorably (“8,” “9,” or “10”) to the questions in that area.

There were no statistically significant changes in any of the categories included in the following table from 2023 (or 2024, where rates are available). As this was the first year the child CAHPS survey was administered, there is no historical data to include. However, it should be noted that the child CAHPS scores were among the highest in each of the following categories when compared to the other populations. Child CAHPS scores were most favorable among our populations for Rating of All Health Care, and received the second highest rating in all other categories, as shown in the following table.

		2021	2022	2023	2024	2025	Change from 2023 or 2024 (percentage points)
Rating of Health Plan	F&C-MA NCQA	78.6%	80.3%	80.5%	77.1%	76.2%	-0.9
	F&C-MA DHS	79.7%	83.1%	80.1%	-	78.0%	-2.1
	F&C-MA Child non CCC DHS	-	-	-	-	84.5%	-
	F&C-MA Child CCC DHS	-	-	-	-	86.0%	-
	F&C-MA Child Total DHS	-	-	-	-	85.2%	-
	MNCare	74.6%	83.3%	82.8%	-	78.5%	-4.3
	MSC+	84.9%	84.9%	83.9%	-	80.3%	-3.6
	PWSHC	89.8%	84.5%	83.0%	86.1%	90.8%	4.7
	PHC/SNBC	77.5%	77.1%	76.4%	-	81.7%	5.3
Rating of All Health Care	F&C-MA NCQA	81.5%	78.2%	79.0%	82.2%	71.8%	-10.4
	F&C-MA DHS	74.6%	76.2%	80.6%	-	79.9%	-0.7
	F&C-MA Child non CCC DHS	-	-	-	-	82.0%	-
	F&C-MA Child CCC DHS	-	-	-	-	86.6%	-
	F&C-MA Child Total DHS	-	-	-	-	84.4%	-
	MNCare	82.6%	86.0%	84.0%	-	80.3%	-3.7
	MSC+	84.7%	85.0%	81.7%	-	79.0%	-2.7
	PWSHC	83.1%	80.1%	78.6%	78.3%	81.9%	3.6

2025 Consumer Assessment of Healthcare Providers and Systems (CAHPS)

		2021	2022	2023	2024	2025	Change from 2023 or 2024 (percentage points)
	PHC/SNBC	76.1%	75.0%	70.6%	-	76.0%	5.4
Rating of Personal Doctor	F&C-MA NCQA	89.1%	86.1%	84.6%	84.6%	86.5%	1.9
	F&C-MA DHS	90.5%	90.3%	86.4%	-	87.9%	1.5
	F&C-MA Child non CCC DHS	-	-	-	-	89.9%	-
	F&C-MA Child CCC DHS	-	-	-	-	90.5%	-
	F&C-MA Child Total DHS	-	-	-	-	90.2%	-
	MNCare	91.5%	83.5%	92.1%	-	88.3%	-3.8
	MSC+	90.4%	88.3%	89.2%	-	86.5%	-2.7
	PWSHC	91.4%	89.7%	86.5%	90.8%	92.5%	1.7
	PHC/SNBC	86.4%	86.4%	84.2%	-	86.4%	2.2
Rating of Specialist Seen Most Often	F&C-MA NCQA	79.8%	85.1%	79.4%	84.7%	80.3%	-4.4
	F&C-MA DHS	82.4%	86.0%	81.8%	-	80.8%	-1.0
	F&C-MA Child non CCC DHS	-	-	-	-	87.1%	-
	F&C-MA Child CCC DHS	-	-	-	-	87.2%	-
	F&C-MA Child Total DHS	-	-	-	-	87.2%	-
	MNCare	85.9%	86.2%	93.9%	-	89.8%	-4.1
	MSC+	89.2%	86.7%	86.7%	-	78.6%	-8.1
	PWSHC	86.3%	83.2%	84.1%	85.4%	84.8%	-0.6
	PHC/SNBC	85.0%	79.5%	79.6%	-	81.3%	1.7%

Note: Cells left blank indicate measures for which no data is available.

As part of the adult DHS CAHPS survey, members were asked their race and ethnicity and were attributed to each race and/or ethnicity they identified as. The following is a breakout of the overall satisfaction scores by the race and ethnicity categories that had at least 30 responses

from the populations surveyed by DHS (F&C-MA, MinnesotaCare, MSC+, and Prime Health Complete/SNBC).

When broken out by race and/or ethnicity, ratings fluctuated from -13.8 to 4.5 percentage points; however, none of the changes were considered statically significant given the low number of respondents. 2025 rates for Hispanic, Black, and Native American respondents were compared to the 2025 rates for white respondents. Hispanic rates were significantly greater for both Rating of Health Plan and Rating of All Health Care.

DHS Survey						
			2022	2023	2025	Change from 2023 (percentage points)
Rating of Health Plan	Hispanic		90.6%	84.4%	88.9%	4.5
	Black	-	-	-	81.8%	-
	Native American		84.4%	78.8%	75.8%	-3.0
	White		81.9%	80.5%	81.9%	1.4
Rating of All Health Care	Hispanic		-	-	88.4%	-
	Black	-	-	-	81.4%	-
	Native American		83.0%	79.1%	71.8%	-7.3
	White		80.3%	77.0%	80.3	3.3
Rating of Personal Doctor	Hispanic	-	-	-	93.0%	-
	Black	-	-	-	80.0%	-
	Native American		88.7%	83.3%	83.6%	0.3
	White		87.7%	87.3%	88.8%	1.5
Rating of Specialist Seen Most Often	Hispanic		-	-	84.2%	-
	Black	-	-	-	-	-
	Native American		83.0%	81.8%	68.0%	-13.8
	White		80.3%*	83.7%	84.9%	1.2

*Statistically significant change

Composite Scores

Members were also asked questions relating to their ability to get needed care, how quickly they got care, how often doctors communicated well, and how often their health plan's customer service was friendly and helpful. They could respond "Never," "Sometimes," "Usually," or "Always" to all composite questions. The score represents a composite of the percent of members who responded favorably ("Usually" or "Always") to the questions in that area.

Questions in each area are as follows:

- Getting Needed Care
 - In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?
 - In the last 6 months, how often did you get an appointment to see a specialist as soon as 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?
 - In the last 6 months, how often did you get an appointment for a checkup or routine care at a doctor's office or clinic 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?
 - 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?
- **Customer Service**
 - In the last 6 months, how often did your health plan's customer service give you the information or help you needed?
 - In the last 6 months, how often did your health plan's customer service staff treat you with courtesy and respect?

Because respondent-level data for the PrimeWest Senior Health Complete population is not available, and because some of the question-level rates are suppressed, composite rates for the PrimeWest Senior Health Complete population cannot be calculated in the same way as the other populations. As such, they are calculated differently and displayed separately. In addition to the questions outlined previously, PrimeWest Senior Health Complete members were also asked questions related to their drug plan experience.

The following table shows the results for the DHS and NCQA surveys. When tested using a difference of means with 95 percent confidence, two of the rates had significant changes from 2023 to 2025. The F&C-MA NCQA rate for Getting Care Quickly was significantly lower in 2025 compared to 2023; however, it should be noted that the same population surveyed by DHS had the same score for this composite and did *not* show a statistically significant decline from 2023. In addition, the MNCare rate for How Well Doctors Communicate was also significantly lower in 2025 compared to 2023. While the child CAHPS results cannot be compared to previous years, it should be noted that the lowest result for this survey was 85 percent in Getting Needs Care for the F&C – MA Child DHS CCC population. All rates met our 80 percent goal.

		2021	2022	2023	2024	2025	Change from 2023 or 2024 (percentage points)
Getting Needed Care	F&C-MA NCQA	88.8%	87.5%	87.1%	88.2%	82.8%	-5.4
	F&C-MA DHS	86.0%	83.5%	85.4%	-	82.8%	-2.6
	F&C-MA Child DHS non CCC	-	-	-	-	88.7%	-

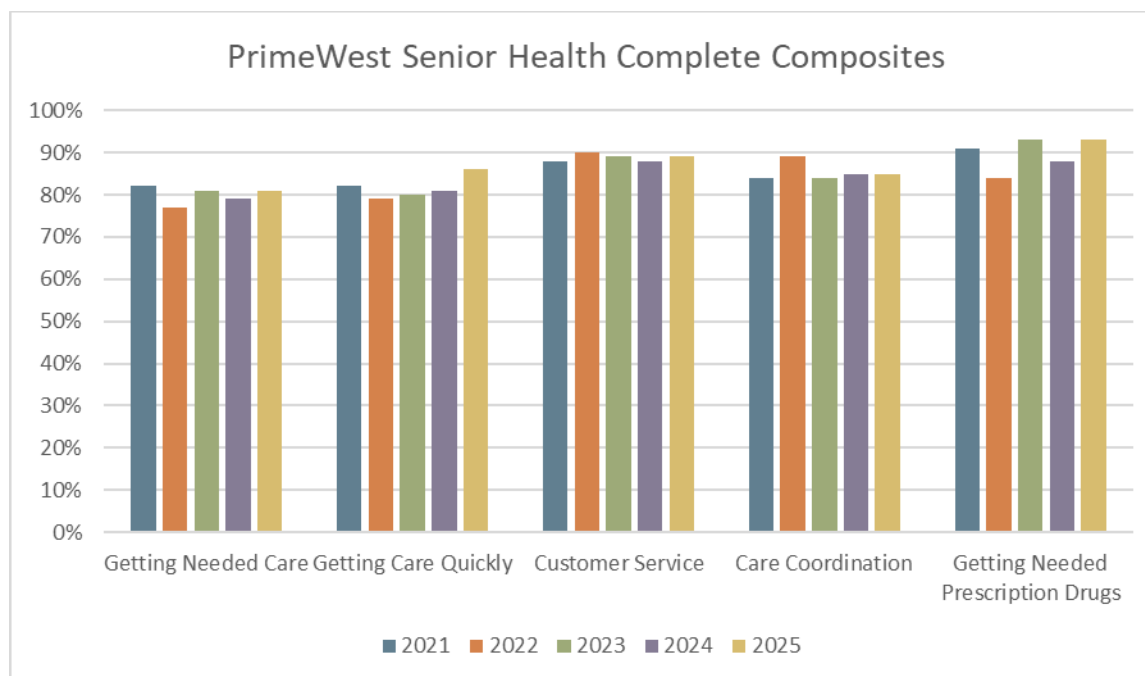
2025 Consumer Assessment of Healthcare Providers and Systems (CAHPS)

		2021	2022	2023	2024	2025	Change from 2023 or 2024 (percentage points)
	F&C-MA Child DHS CCC	-	-	-	-	85.0%	-
	F&C-MA Child DHS Total	-	-	-	-	86.5%	-
	MNCare	91.5%	89.4%	88.7%	-	85.8%	-2.9
	MSC+	92.6%	91.0%	90.8%	-	87.7%	-3.1
	PHC/SNBC	84.0%	86.8%	82.5%	-	86.4%	3.9
Getting Care Quickly	F&C-MA NCQA	85.4%	87.0%	94.4%	88.4%	80.6%	-7.8
	F&C-MA DHS	85.3%	88.9%	90.3%	-	85.2%	-5.1
	F&C-MA Child DHS non CCC	-	-	-	-	92.1%	-
	F&C-MA Child DHS CCC	-	-	-	-	86.3%	-
	F&C-MA Child DHS Total	-	-	-	-	88.9%	-
	MNCare	89.9%	83.6%	86.6%	-	84.2%	-2.4
	MSC+	94.8%	92.0%	89.5%	-	85.3%	-4.2
	PHC/SNBC	85.8%	87.3%	88.0%	-	88.6%	0.6
How Well Doctors Communicate	F&C-MA NCQA	95.8%	97.8%	98.1%	97.6%	96.3%	-1.3
	F&C-MA DHS	94.5%	97.3%	94.0%	-	97.1%	3.1
	F&C-MA Child DHS non CCC	-	-	-	-	97.1%	-
	F&C-MA Child DHS CCC	-	-	-	-	95.6%	-
	F&C-MA Child DHS Total	-	-	-	-	96.3%	-
	MNCare	97.7%	96.8%	100.0%	N/A	97.4%	-2.6
	MSC+	95.6%	96.4%	95.8%	N/A	95.0%	-0.8

		2021	2022	2023	2024	2025	Change from 2023 or 2024 (percentage points)
	PHC/SNBC	95.2%	92.7%	93.5%	N/A	95.2%	1.7
Customer Service	F&C-MA NCQA	88.2%	88.8%	95.6%	90.7%	96.4%	5.7
	F&C-MA DHS	87.3%	94.2%	92.6%	N/A	88.7%	-3.9
	F&C-MA Child DHS non CCC	-	-	-	-	94.8%	-
	F&C-MA Child DHS CCC	-	-	-	-	91.9%	-
	F&C-MA Child DHS Total	-	-	-	-	93.3%	-
	MNCare	94.0%	92.9%	88.5%	N/A	87.9%	-0.6
	MSC+	95.7%	94.4%	93.1%	N/A	82.8%	-10.3
	PHC/SNBC	93.0%	87.0%	89.5%	N/A	89.6%	0.1

The following table and chart show the case-mix adjusted mean scores for the composites for PrimeWest Senior Health Complete. All ratings included increased except for Care Coordination, which stayed the same when compared to 2024. The ratings for Getting Care Quickly and Getting Needed Prescription Drugs increased by at least 5 percentage points, while the ratings for Getting Needed Care and Customer Service increased by at least 1 percentage point in 2025.

PrimeWest Senior Health Complete					
	2021	2022	2023	2024	2025
Getting Needed Care	82%	77%	81%	79%	81%
Getting Care Quickly	82%	79%	80%	81%	86%
Customer Service	88%	90%	89%	88%	89%
Care Coordination	84%	89%	84%	85%	85%
Getting Needed Prescription Drugs	91%	84%	93%	88%	93%



The following table shows a breakout of the composite scores by the race and ethnicity identified by the survey respondents. This table includes only the populations surveyed by DHS (F&C-MA, MinnesotaCare, MSC+, and Prime Health Complete/SNBC), and race/ethnicity categories for which there were at least 30 respondents.

	DHS Survey					
		2021	2022	2023	2025	Change from 2023 (percentage points)
Getting Needed Care	Hispanic	-	-	-	82.0%	-
	Black	-	-	-	81.7%	-
	Native American		88.2%	82.4%	81.2%	-1.2
	White	87.9%	88.1%	86.4%	86.9%	0.5
Getting Care Quickly	Hispanic	-	-	-	85.9%	-
	Black	-	-	-	-	-
	Native American	81.4%	88.9%	85.4%	83.3%	-2.1
	White	88.9%	89.3%	88.8%	88.4%	-0.4
How Well Doctors Communicate	Hispanic	95.1%	-	-	93.0%	-
	Black	-	-	-	94.9%	-
	Native American	91.7%	90.8%	93.5%	94.8%	1.3
	White	96.1%	95.5%	95.1%	96.6%	1.5
Customer Service	Hispanic	-	-	-	87.3%	-
	Black	-	-	-	-	-

	DHS Survey					
	Native American	-	-	-	88.8%	-
	White	92.9%	92.4%	91.3%	90.5%	-0.8

While PrimeWest Health strives to have the best data available regarding race and ethnicity, we did not receive a high enough response rate from all races and ethnicities to make a statistically meaningful comparison of race and ethnicity data across all categories. The only population with sufficient responses to rate in all four categories was white respondents. Scores for white respondents in 2025 had mixed results when compared to 2023 rates, but no rates differed significantly from 2023 to 2025. Available 2025 rates for white respondents were compared to the 2025 rates for Native American, Black, and Hispanic respondents, and none were significantly different.

Influenza and Pneumonia Vaccinations

PrimeWest Senior Health Complete members were asked if they had had a flu shot on or after July 1. They were also asked whether they had ever had a pneumonia vaccination. Rates for both the flu shot and pneumonia vaccination decreased by at least 2 percentage points. Rates are shown in the following table.

	2021	2022	2023	2024	2025
Had flu shot on or after July 1 of previous year					
PWSHC	79%	76%	72%	74%	71%
Had a pneumonia vaccination					
PWSHC	76%	63%	69%	74%	72%

Key Strengths and Opportunities for Improvement

Key strengths and opportunities for improvement are shown in the following. Opportunities for improvement are identified by ratings or composites with achievement scores below 80 percent. The following table lists the scores for each overall rating and composite, with the bold numbers indicating an opportunity for improvement and the non-bold numbers indicating strengths.

	F&C-MA NCQA	F&C-MA DHS	F&C-MA Child DHS non CCC	F&C-MA Child DHS CCC	F&C-MA Child DHS Total	MNCare	MSC+	PWSHC	PHC/SNBC
Rating of Health Plan	76.2%	78.0%	84.5%	86.0%	85.2%	78.5%	80.3%	90.8%	81.7%
Rating of All Health Care	71.8%	79.9%	82.0%	86.6%	84.4%	80.3%	79.0%	81.9%	76.0%
Rating of Personal Doctor	86.5%	87.9%	89.9%	90.5%	90.2%	88.3%	86.5%	92.5%	86.4%
Rating of Specialist Seen Most Often	80.3%	80.8%	87.1%	87.2%	87.2%	89.8%	78.6%	84.8%	81.3%
Getting Needed Care	82.8%	82.8%	88.7%	85.0%	86.5%	85.8%	87.7%	81.4%*	86.4%
Getting Care Quickly	80.6%	85.2%	92.1%	86.3%	88.9%	94.2%	85.3%	85.6%*	88.6%
How Well Doctors Communicate	96.3%	97.1%	97.1%	95.6%	96.3%	97.4%	95.0%	90.9%*	95.2%
Customer Service	96.4%	88.7%	94.8%	91.9%	93.3%	87.9%	82.8%	88.8%*	89.6%

*Case-mix adjusted rates

Opportunities for Improvement

- Rating of Health Plan (F&C- MA NCQA, F&C-MA DHS, MNCare)
- Rating of All Health Care (F&C-MA NCQA, F&C-MA DHS, MSC+, Prime Health Complete/SNBC)
- Rating of Specialist Seen Most Often (MSC+)
- Getting Care Quickly (F&C MA-NCQA)
 - While this measure was not below 80 percent, it was determined to consider this an opportunity for improvement due to the statistically significant rate decrease from the previous year.

The CAHPS data was emailed to the PrimeWest Health Population Health & Equity Advisory Committee (PHEAC) on March 6, 2026, for review and to provide feedback. All survey results were discussed at length, including root cause analysis, barriers, and potential intervention ideas.

- The PHEAC discussed the following methods to improve identified areas of opportunity:
 - Share CAHPS results with providers
 - Expand technology efforts to reach members.
 - PrimeWest Health sends text messages to members whose records indicate they have not been seen by their primary care provider within the year
 - In 2025, PrimeWest Health added a QR code to incentive vouchers and implemented an electronic option for completing surveys in some areas. Efforts will continue in this area in 2026.
 - Expand benefits, where able
 - Supplemental benefits include a healthy foods allowance, dental benefits, eyeglasses, and over-the-counter (OTC) benefits
 - Continue to collaborate with the Health Equity Council, which was implemented to improve diversity in our governance with the goal of better serving minority communities.
 - Seek feedback via community events.
 - In 2025, PrimeWest Health attended approximately 50 community events. These ranged from community night out events to community baby showers.
 - Provide education about access to care
 - Members' understanding of appropriate wait times has improved over prior years. Member & Provider Services staff will continue to provide education related to community standards for wait times. The hope is that this education helps manage expectations and reduces feelings of disappointment when a member is unable to be seen immediately for non-urgent care.
 - Enhance coordination of care
 - PrimeWest Health has two community health workers and one LPN community health specialist who provide face-to-face services to members and who help connect members to resources.
 - PrimeWest Health's Care & Population Health Management department has developed the following programs:
 - Focused Wellness: a condition management program for members with chronic conditions. The programs aims to promote the health and well-being of members by providing support, coaching, education, and resources.
 - Tobacco Cessation Program: delivered over the phone by PrimeWest Health's Certified Tobacco Treatment Specialist, this program aims to support members who wish to reduce or quit use of tobacco. This program is available to members ages 18 and over.

- PrimeWellness: a comprehensive health and wellness program to support whole-person well-being, including physical health, mental well-being, and overall quality of life. This program is accessible to all members ages 18 and over.
- Continue to evaluate mailings sent to PrimeWest Senior Health Complete members in order to reduce confusion.
 - In 2025 PrimeWest Health developed the newsletter **PrimeWise** targeted at PrimeWest Health's senior members. The goal of the newsletter is to help these members make the most of their coverage and help them access resources available in their community.
- Member education
 - PrimeWest Health has a member newsletter article titled **PrimeLines**. The newsletter is published quarterly and provides education to members on various topics, including the following:
 - Information on PrimeWest Health's 24-hour nurse line
 - How to access the PrimeWest Health secure member portal
 - Information on preventive health care needs
- Member outreach
 - In December 2025, PrimeWest Health performed outreach to our senior members to remind them to get their annual flu shot