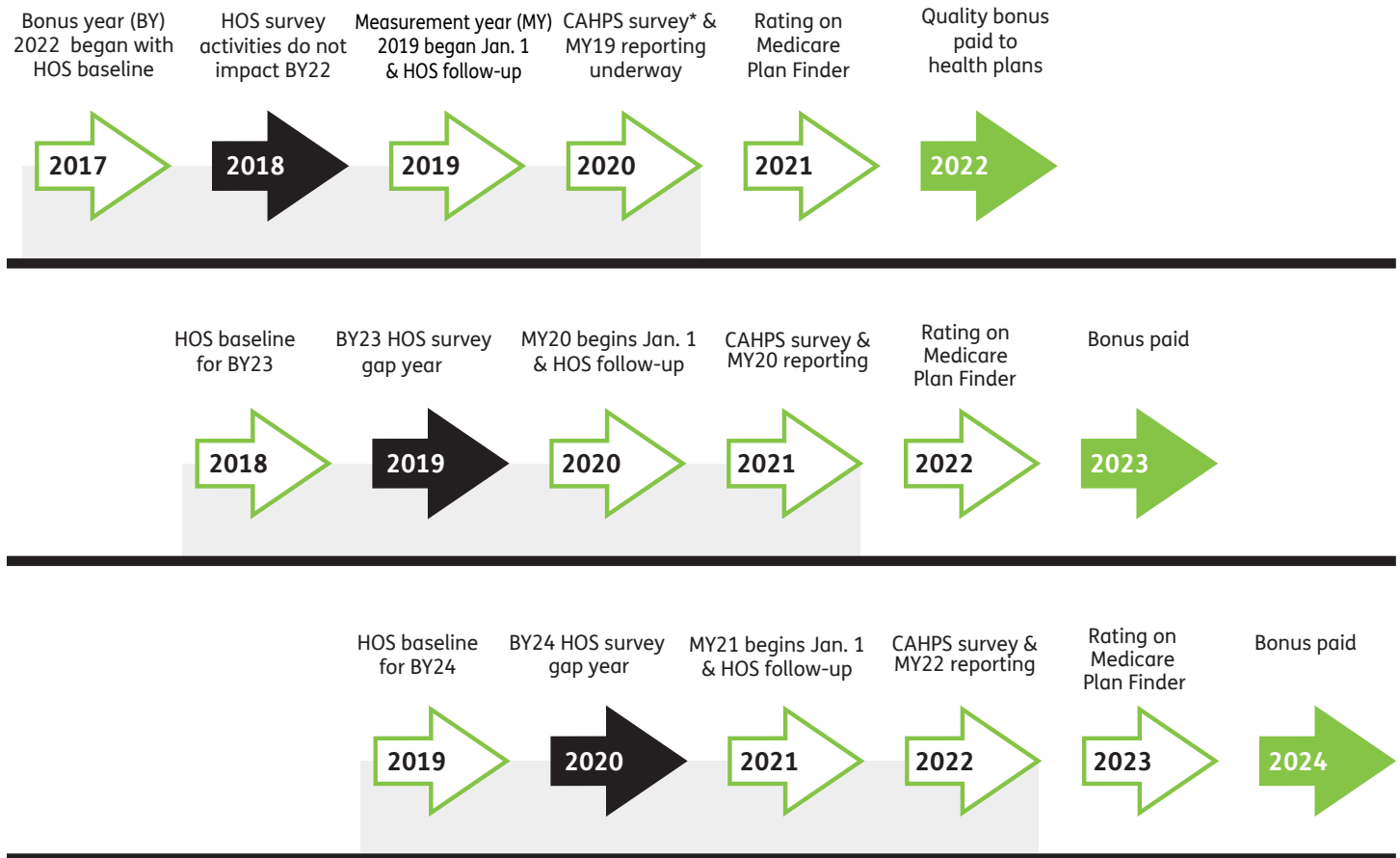


CMS PART C AND D STAR RATINGS CUT POINT TREND

CYCLE OF MEASUREMENT – RESULTS – PAYMENT



UNDERSTANDING THE CHART

- Historical cut point, or threshold, information is provided for various Star measures that may be influenced by physicians and other healthcare providers.
- Star measures assessed via the Healthcare Effectiveness Data and Information Set (HEDIS®), Patient Safety, Centers for Medicare & Medicaid Services (CMS), Consumer Assessment of Healthcare Providers and Systems (CAHPS®) and Health Outcomes Survey (HOS) data sources are represented.
- Three years of data for both 4- and 5-star levels are included for these measures.

IMPORTANT INSIGHTS

Due to the COVID-19 public health emergency (PHE), the same cut point values used to determine the 2020 Star Ratings for HEDIS and CAHPS measures were used to determine their 2021 Star Ratings. For the Patient Safety measures, we continue to observe cut point increases at both the 4- and 5-star rating levels.

THREE-YEAR TREND ANALYSIS

Many of the measures trending in an upward direction relate to managing long-term conditions and prescription drug quality. This is an indicator that CMS has higher expectations of Medicare Advantage Organizations (MAOs), such as Humana, to improve the health outcomes of members selecting our health plans.

PART D MEASURE CUT POINTS

CMS includes measures to assess prescription drug plan (Part D) quality and performance in the Star Rating Program. These measures apply to both Medicare Advantage prescription drug (MAPD) plans and prescription drug plans (PDP), and cut point values may vary. On the accompanying chart, MAPD cut point values are provided.

NEW MEASURE AWARENESS

Measures new to the Star Rating Program—or on display—have N/A populated instead of a percentage. This indicates the measure did not impact Star Ratings for that bonus year and, therefore, there are no cut points for accomplishing 4- or 5-star levels.

DISPLAY MEASURE AWARENESS

Within Final Rule 4182-F, CMS advised that any substantive changes to a Star measure would result in the measure moving to the display page for two years. While on display, a measure does not impact health plan Star Ratings nor quality bonus earning potential. Upon returning to the Star Rating Program, these measures are considered new and will have a weight of 1 for their first year in the program. In subsequent years, the measure will be assigned the weight associated with its category.

Using Controlling Blood Pressure (CBP) as an example: Due to substantive changes made to the measure by the National Committee for Quality Assurance (NCQA), CMS temporarily moved CBP to the display page for the 2020 and 2021 Star Ratings. CBP will move back into the program with a weight of 1 for the 2022 Star Ratings. These ratings will be based on activity in measurement year 2020 (MY20) and impact quality bonuses paid to health plans in bonus year 2023 (BY23). CBP's measure category is intermediate outcome, which is assigned a weight of 3. CBP will regain its weight of 3 for MY21 impacting BY24.

Example:

Controlling Blood Pressure (CBP)	75%	82%	N/A	N/A	N/A	N/A
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