

How States Can Use Medicare Advantage Star Ratings to Assess D-SNP Quality and Performance

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What are Medicare Advantage (MA) Star Ratings?

The Centers for Medicare & Medicaid Services (CMS) uses a five-star quality rating system to evaluate the performance of Medicare Advantage (MA) health plans. This Star Rating system enables beneficiaries, payers, and others to compare plans across multiple dimensions. CMS publishes the Star Ratings each year – usually in October – to help beneficiaries find the best plan for them and to determine MA quality bonus payments to plans. The lowest-ranking plans receive one star, and the highest ranking plans receive five stars. The 2020 Star Ratings are now available on CMS’ website:

<https://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovGenIn/PerformanceData.html>, including a 15-page Fact Sheet with highlights from the actual Star Rating data tables, which are provided within a zip file: <https://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovGenIn/Downloads/2020-Star-Ratings-Data-Table-Oct-10-2019.zip>

Why are the MA Star Ratings useful to states?

States can use the MA star ratings to assess the quality and performance of MA plans operating in their state, especially Dual Eligible Special Needs Plans (D-SNPs) that are required to have contracts with states to coordinate and provide Medicaid services for dually eligible enrollees. Star Ratings can help inform states as they work with the D-SNPs in their state and make D-SNP contracting decisions.

Keep in mind

Star Ratings are assigned at the contract level, not at the individual plan level. A single MA contract may include more than one type of Special Needs Plan (SNP) (i.e., chronic condition, institutional, and/or dual eligible), as well as non-SNP MA plans. A single MA contract may also include plans in more than one state. The star rating assigned to the contract applies to all plans under the contract.

How are MA Star Ratings calculated?

MA Star Ratings are comprised of a variety of quality and performance measures within five domains of services covered by Medicare Part C¹:

- 1. Staying Healthy: Screenings, Tests and Vaccines.** This domain has seven measures, including Colorectal Cancer Screening, Improving or Maintaining Physical Health, and Improving or Maintaining Mental Health;

¹ Medicare “Part C” refers to coverage of Part A and B services that is provided by MA managed care plans, including D-SNPs.

- 2. Managing Chronic (Long Term) Conditions.** This domain has 14 measures and includes four Special Needs Plan (SNP) specific measures: SNP Care Management and three Care for Older Adults measures – Medication Review, Functional Status Assessment, and Pain Assessment;
- 3. Member Experience with Health Plan.** This domain has six measures, including Members' Ratings of the Health Plan and Care Coordination;
- 4. Member Complaints and Changes in the Health Plan's Performance.** This domain has three measures, including Complaints about the Health Plan and Members Choosing to Leave the Plan; and
- 5. Health Plan Customer Service.** This domain has three measures, including Plan Makes Timely Decisions about Appeals.

In addition to these domains, there are four domains for Part D drug coverage, which include:

- 1. Drug Plan Customer Service.** This domain has three measures, including Appeals Upheld;
- 2. Member Complaints and Changes in the Drug Plan's Performance.** This domain has three measures, including Complaints about the Drug Plan and Members Choosing to Leave the Plan;
- 3. Member Experience with Drug Plan.** This domain has two measures, including Rating of Drug Plan and Getting Needed Prescription Drugs; and
- 4. Drug Safety and Accuracy of Drug Pricing.** This domain has six measures, including Medication Adherence measures for Diabetes, Hypertension, and Cholesterol medications.

Star Rating measures are drawn from multiple data sources, including the Healthcare Effectiveness Data and Information Set (HEDIS), the Medicare Health Outcomes Survey (HOS), the Consumer Assessment of Healthcare Providers and Systems (CAHPS), and others.

How can I find Star Ratings for D-SNPs in my state?

1. Locate the **Contract Number** for each D-SNP in your state.
 - Use the most recent monthly **SNP Comprehensive Report** (<https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MCRAdvPartDEnrolData/Special-Needs-Plan-SNP-Data.html>) and filter or sort by state and SNP type (D-SNP) to find all of the D-SNPs in your state and their contract numbers.
2. Open the 2020 Medicare Report Card **Master Table**:
 - Click on the 2020 Part C and D Medicare Star Ratings Data Table zip file (Oct 10, 2019) (<https://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovGenIn/PerformanceData.html>). Or, download the zip file directly: (<https://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovGenIn/Downloads/2020-Star-Ratings-Data-Table-Oct-10-2019.zip>)
 - Open the 2020 Star Ratings Data Table (Oct 10 2019).xlsx file
 - Go to the "Summary Rating" tab.
3. Find the D-SNPs in your state by their contract number and scroll to the right to find the corresponding Part C, Part D, and **Overall Star Rating** in each overall contract.

Other information in the Master Table

- Use the first three tabs to identify how each D-SNP performed on specific domains and measures.
- The Master Table also contains a “Low Performing Contracts” tab for contracts that had Part C and/or Part D ratings of 2.5 stars or less from 2018 through 2020. These contracts are assigned a “Low Performing Icon” (LPI) in the Star Ratings and are subject to termination by CMS.
- Also see the **2020 Technical Notes** (<https://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovGenIn/Downloads/Star-Ratings-Technical-Notes-Oct-10-2019.pdf>) for an overview of Star Ratings and changes for 2020, as well as more detailed information on how the Star Ratings are calculated.

Other related D-SNP contracting performance monitoring documents for state use

- **SNP HEDIS Public Use File** (<https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MCRAdvPartDEnrolData/SNP-HEDIS-Public-Use-Files.html>): States can use the SNP HEDIS measures to compare D-SNP performance on 14 quality measures to other D-SNPs in the state and to overall D-SNP performance nationally. For example, measures include “Follow up after Hospitalization for Mental Illness,” and “Care for Older Adults.” Note that unlike the Star Rating measures, the HEDIS measures are assigned at the individual plan level (i.e., D-SNP level).
- **Program Audit Results** (<https://www.cms.gov/Medicare/Compliance-and-Audits/Part-C-and-Part-D-Compliance-and-Audits/ProgramAuditResults.html>): The CMS health plan program audit results can be used to help states identify D-SNP audit results and the number and types of Corrective Actions Required (CAR). CMS audits D-SNPs on a variety of compliance measures, such as timely performance of health risk assessments, and plans receive an audit score based on the number of CARs received. Note that program audit results are provided at the parent organization level and may include other contracts in addition to D-SNPs.
- **Ad hoc Corrective Action Plans (CAPs)** (<https://www.cms.gov/Medicare/Compliance-and-Audits/Part-C-and-Part-D-Compliance-and-Audits/PartCandPartDComplianceActions.html>): Reviewing CMS Ad hoc Corrective Action Plans can help states identify which D-SNP sponsors in their state were issued an Ad hoc Corrective Action Plan for persistent and/or serious plan performance issues, such as failure to achieve at least three stars for the overall Star Rating.
- **Past Performance Outlier Results** (<https://www.cms.gov/Medicare/Compliance-and-Audits/Part-C-and-Part-D-Compliance-and-Audits/PartCandPartDComplianceActions.html>): States can check the health plan past performance outlier results to determine if the organizations that operate D-SNPs performed poorly on specific quality measures or compliance with Medicare requirements.

Other resources

- **2020 SNP Landscape Source Files** (<https://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovGenIn/index.html>): A preliminary list of D-SNPs continuing or entering the market in 2020 by state and county.

- **How States Can Monitor Dual Eligible Special Needs Plan Performance: A Guide to Using CMS Data Resources** (ICRC TA Tool, January 2018)
(https://www.integratedcareresourcecenter.com/PDFs/ICRC_How_States_Can_Monitor_DSNP_Performance%201.26.18.pdf): A guide to the various data sources available on the Centers for Medicare & Medicaid Services website that may be useful to states in designing, developing, refining, and monitoring programs that use contracts with D-SNPs to coordinate Medicare and Medicaid services for dually eligible beneficiaries.

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