



Choosing a High-Quality Marketplace Health Plan

Health Insurance Marketplace® plans have different premiums and out-of-pocket costs. The quality of services and benefits they offer may differ, too. When you're choosing a health plan, it's important to understand and consider these differences. To help you decide which plan is right for you, the Marketplace displays quality ratings (or "star" ratings). These ratings give you an objective snapshot of how each health plan's quality compares to that of other Marketplace plans in your state and across the country.

How are health plans rated?

Star ratings for all health plans are calculated the same way from the same sources, using information that health plans provide each year.

When you compare plans on [HealthCare.gov](https://www.healthcare.gov), you'll find an overall "star rating" from 1 – 5 stars.

Star Rating ★	Performance (compared to other Marketplace plans across the country each year)
5 stars	Highest performing health plans
3 to 4 stars	Majority of health plans nationwide
1 to 2 stars	Lowest performing health plans

A star rating isn't a complete picture of the types of services and care a health plan provides. Each year, ratings may change because of information that health plans provide or changes to how the ratings are calculated.

Note: Ratings are calculated on a 5-star scale and may change from year to year. Ratings displayed with the 2024 Open Enrollment Period (November 1–January 15) are based on data provided in 2023. In some cases — like when plans are new or have low enrollment — ratings aren't available. This doesn't mean the plans are low quality.

What are star ratings based on?

A health plan's overall rating is based on the quality of health care services and member's experiences with their health plan. You'll find this overall rating for the health plan and additional ratings for each of these 3 categories:

■ Member Experience

- How easy it is to get the care you need, when you need it
- How other plan members rate their doctors and the care they get

■ Medical Care

- How well the doctors, hospitals, and others in the plan's network improve or maintain member health through appropriate screenings, vaccines, and other basic health services
- How informed and up to date your doctors are about your health care status, blood tests, and X-ray results

■ Plan Administration

- If the plan coordinates the care that members get from different providers
- How well the plan provides access to information members need

Will I get higher quality health care if I pay more for a health plan?

Not always. Many people assume that higher quality for any product or service has to cost more. Just like other products you buy, a higher price doesn't always mean better quality. With star ratings, you can choose a plan based on the issues you care about most. Find more information about health plan quality on [HealthCare.gov/quality-ratings](https://www.healthcare.gov/quality-ratings).

How can I learn more?

To learn more about coverage through the Marketplace or your benefits and protections, visit **HealthCare.gov** or call the Marketplace Call Center at 1-800-318-2596. TTY users can call 1-855-889-4325.

You have the right to get your information in an accessible format, like large print, braille, or audio.

You also have the right to file a complaint if you feel you've been discriminated against.

Visit [CMS.gov/About-CMS/Agency-Information/Aboutwebsite/CMSNondiscriminationNotice](https://www.cms.gov/About-CMS/Agency-Information/Aboutwebsite/CMSNondiscriminationNotice)

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Health Insurance Marketplace

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