

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, Maryland 21244-1850



CENTER FOR MEDICARE

TO: Medicare Compliance Officers, Part C & D Sponsors

FROM: Cynthia G. Tudor, Ph.D., Director, Medicare Drug Benefit and C & D Data Group

SUBJECT: Second Plan Preview of 2012 Part C and D Plan Ratings Data

DATE: September 7, 2011

CMS will again release Parts C and D Plan Ratings during this fall's 2012 open enrollment period. Medicare beneficiaries will be able to view these Plan Ratings via the Medicare Plan Finder (MPF) on www.medicare.gov. This memo is to inform Part C and Part D sponsors about the second plan preview period scheduled to begin on September 8, 2011. This preview period allows you to review your Plan Ratings data and star assignments in HPMS prior to display on the MPF.

For both Part C and Part D Plan Ratings, CMS will display star assignments for each measure, domain, summary and overall level by contract. The Consumer Assessment of Healthcare Providers and Systems (CAHPS) data and star assignments will also be available during this preview.

Cut-points and thresholds for each measure will also be provided and additional information about the methodologies used for these ratings has been incorporated into the technical notes. Lastly, there will be an indicator of whether the low performer icon or high performer icon will be shown on the MPF for each contract.

For 2012, some enhancements have been introduced into the Plan Ratings. Improvements include weighting of measures and reducing Plan Ratings for contracts with serious compliance issues. Please review the technical notes for an explanation of the weighting methodology and sanction reductions. We also made some changes in the technical notes based on the comments received from plans during the first preview period.

Steps for accessing Plan Ratings preview data in HPMS:

- To access the Part C Plan Ratings preview in HPMS, from the left navigation bar select: "Quality and Performance", then "Part C Performance Metrics", then "Part C Report Card Master Table" and then select 2012 for the report period.
- To access the Part D Plan Ratings preview, from the left navigation bar select: "Quality and Performance", then "Part D Performance Metrics and Reports", then "Part D Report Card Master Table" and then select 2012 for the report period.
- Technical notes for Part C and D are available via the "Technical Notes" link found on the "Summary View" tab of the Master Tables.

Changes made to the measures since the 1st Plan Preview:

- Final list of new Part C and D measures. (See Attachment 2)
- Final list of retired Part C and D measures. (See Attachment 2)

MA-PD and MA-only Measures

- C25 - Plan All-Cause Readmissions - Added exclusion criteria.
- C33 - Members Choosing to Leave the Plan – Added more exclusions.
- C34 - Plan Makes Timely Decisions about Appeals – Fixed exclusion criteria.
- C35 - Reviewing Appeals Decisions - Fixed exclusion criteria.

MA-PD and PDP Measures

- D13 - High Risk Medication measure - Change to the MA-PD 4-star threshold .
- D08 - Members Choosing to Leave the Plan - Added more exclusions.

CMS will hold the 2nd User Group call about 2012 Plan Ratings on September 8, from 3:30-5 pm. Please wait to attend this call before submitting questions to CMS.

During this plan preview period, CMS expects sponsors to closely review the methodology and their posted data for each measure. Please alert CMS immediately of any suspected data issues or errors in order to allow sufficient time to investigate and process any necessary data corrections. Attachment 1 of this memo lists the information necessary for CMS to process plans' comments. Please be sure to include all listed information in your email to CMS to ensure timely responses. Comments and questions will be addressed on a rolling basis and must be received no later than 5:00 p.m. Eastern time on September 16, 2011.

Comments or questions about Part C Plan Ratings should be sent to PartCRatings@cms.hhs.gov.

Comments or questions about Part D Plan Ratings should be sent to PartDMetrics@cms.hhs.gov.

Thank you for your continued commitment to ensuring the success of the Medicare health and prescription drug programs.

Attachment 1: Required Information for Plan Comments

In order for CMS to efficiently process all plan comments during plan preview periods, the following information must be provided when submitting comments. Failure to provide this information may prevent CMS from responding to comments or questions.

Identifying information:

- Contract ID(s) (all that apply)
- Contract Names
- PBM/ Contractor (if applicable)
- Contact Name
- Contact Email
- Contact Phone
- Plan Rating Type (Part C or D)

Detailed Information:

- Measure Name
- Question/Concern (provide as much detail as possible)

Attachment 2: New and Retired Measures for 2012

1. New Measures

- a) Part C measure: C12 - Adult BMI Assessment
- b) Part C measure: C13 - Care for Older Adults – Medication Review
- c) Part C measure: C14 - Care for Older Adults – Functional Status Assessment
- d) Part C measure: C15 - Care for Older Adults – Pain Screening
- e) Part C measure: C25 - Plan All-Cause Readmissions
- f) Part C measure: C33 - Members Choosing to Leave the Plan
- g) Part D measure: D05 - Enrollment Timeliness
- h) Part C measure: D08 - Members Choosing to Leave the Plan
- i) Part D measure: D15 - Part D Medication Adherence for Oral Diabetes Medications
- j) Part D measure: D16 - Part D Medication Adherence for Hypertension (ACEI or ARB)
- k) Part D measure: D17 - Part D Medication Adherence for Cholesterol (Statins)

2. Retired measures

- a) Part C measure: Appropriate Monitoring for Patients Taking Long Term Medications
- b) Part C measure: Osteoporosis Testing
- c) Part C measure: Doctors who Communicate Well
- d) Part C measure: Testing to Confirm Chronic Obstructive Pulmonary Disease (COPD)
- e) Part C measure: Call Center – Customer Hold Time
- f) Part C measure: Call Center – Information Accuracy
- g) Part D measure: Call Center – Beneficiary Hold Time
- h) Part D measure: Call Center – Information Accuracy
- i) Part D measure: Drug Plan Provides Pharmacists with Up-to-Date and Complete Enrollment Information about Plan Members
- j) Part D measure: Completeness of the Drug Plan's Information on Members Who Need Extra Help