Table of Contents

INTRODUCTION ................................................................................................................................. 1

PART C MEASURES ............................................................................................................................. 3

PART D MEASURES ............................................................................................................................. 36
INTRODUCTION

One of CMS’ most important strategic goals is to improve quality of care and general health status for Medicare beneficiaries, and we continue to make enhancements to the current Star Ratings methodology to further align it with our policy goals. Predetermined 4-star thresholds were first introduced to the CY2011 Star Ratings for a subset of the performance measures as an attempt to help contracts set achievement goals. CMS’ predetermined 4-star thresholds are based on analysis of historical trends in plans’ performance in a specific measure and aimed to drive quality improvement across all plans. CMS continued to set additional predetermined 4-star thresholds over time as more measures developed adequate performance history.

In the 2015 Request for Comments, we proposed moving from the current scoring methodology to a new methodology for the 2016 Star Ratings where the predetermined measure thresholds would be removed. For measures that previously had predetermined thresholds, starting in 2016 we will follow the methodology we currently use for measures without predetermined thresholds. The current methodology for all measures is available at http://www.cms.gov/Medicare/Health-Plans/HealthPlansGenInfo/ReportingRequirements.html. While CMS’ initial intention for establishing predetermined 4-star thresholds was to create clear expectations about performance and to give plans specific measure-level targets to achieve, we no longer feel it necessary to set artificial thresholds for quality. The Star Ratings program has continued to evolve since being introduced by CMS in 2006. Plan sponsors have more experience with CMS’ rating system and our expectations of high performance. Additionally, CMS provides the industry up to two years of advance notice of potential future changes through an annual Request for Comments and the Call Letter process.

For the 2014 Star Ratings, about half of the measures did not have a predetermined threshold. The 4-star thresholds were set for 25 out of 51 (49%) Part C measures and only 5 out of 15 (33%) Part D measures. Along with contributing to misclassification in star assignments, the presence of 4-star thresholds also creates perverse incentives in encouraging plans to concentrate their resources on measures with fixed known thresholds instead of focusing on a more holistic approach of higher quality for all measures. Our analysis has shown that on average only 32% of contracts improved across the 23 Part C measures with 4-star thresholds, compared to 52% of contracts that improved across the eight Part C measures without 4-star thresholds. For Part D, on average, only 21% of contracts showed improvement across the five measures with 4-star thresholds, while 56% of contracts showed improvement across the five Part D measures without 4-star thresholds. In the graphs of the measures that have a predetermined threshold, the 4-star threshold appears as a flat horizontal line, in contrast to the other stars’ cut points for that measure that have changed over time.

In this document, we display graphical trends of star cut points at the measure level, along with each measure’s definition, data source, and whether or not there has been a preset threshold for each measure. Over the years, unless there were specification changes, we generally see gradual changes in star cut points. This relative stability in cut points from year to year should enable plans to establish a baseline for performance for each measure.

Note: The Medicare Plan Finder (MPF) pricing measures are not included due to changes in measure specifications and the narrow range of thresholds. The Beneficiary Access and Performance Problems measure was also not included since all cut points for this measure are set by CMS.
Measure description: Percent of female plan members aged 40-69 who had a mammogram during the past 2 years.
- Data source: HEDIS.
- **4-star threshold was predetermined at 74% since 2011.**
- The 5-star cut points for this measure have slightly decreased from 82% in 2011 to 81% in 2014.
- The 2-star cut points have greatly decreased from 59% in 2011 to 50% in 2014.
- General Trend: Higher is better.
Measure description: Percent of plan members aged 50-75 who had appropriate screening for colon cancer.
Data source: HEDIS.
4-star threshold was predetermined at 58% since 2011.
The 5-star cut points for this measure have remained largely unchanged.
The 2-star cut points have increased from 36% in 2011 to 40% in 2014.
General Trend: Higher is better.
Measure description: Percent of plan members aged 18-75 with heart disease who have had a test for “bad” (LDL) cholesterol within the past year.

Data source: HEDIS.

4-star threshold was predetermined at 85% since 2011.

The 5-star cut points for this measure have decreased from 93% in 2011 to 89% in 2014.

The 2-star cut points have increased from 72% in 2011 to 78% in 2014.

General Trend: Higher is better.
**Measure description:** Percent of plan members aged 18-75 with diabetes who have had a test for "bad" (LDL) cholesterol within the past year.

- Data source: HEDIS.
- **4-star threshold was predetermined at 85% since 2011.**
- The 5-star cut points for this measure have increased from 89% in 2011 to 93% in 2014.
- The 2-star cut points have increased from 73% in 2011 to 79% in 2014.
- General Trend: Higher is better.
Trends in Part C & D Star Rating Measure Cut Points

- Measure description: Percent of senior plan members who got a glaucoma eye exam for early detection.
- Data source: HEDIS.
- **4-star threshold was predetermined at 70% since 2011.**
- The 5-star cut points for this measure have slightly increased from 76% in 2011 to 77% in 2014.
- The 2-star cut points have decreased from 51% in 2011 to 29% in 2014.
- General Trend: Higher is better.
Trends in Part C & D Star Rating Measure Cut Points

Measure description: Percent of plan members who got a vaccine (flu shot) prior to flu season.
Data source: CAHPS

4-star threshold was predetermined at 71% since 2012.
The 5-star cut points for this measure have increased from 73% in 2011 to 78% in 2014.
The 2-star cut points have increased from 57% in 2011 to 64% in 2014.
General Trend: Higher is better.
- Measure description: Percent of all plan members whose physical health was the same or better than expected after two years.
- Data source: HOS.
- 4-star threshold was predetermined at 60% since 2011.
- The 5-star cut points for this measure have slightly decreased from 68% in 2011 to 67% in 2014.
- The 2-star cut points have slightly increased from 57% in 2011 to 58% in 2014.
- General Trend: Higher is better.
Measure description: Percent of all plan members whose mental health was the same or better than expected after two years.

Data source: HOS.

4-star threshold was predetermined at 85% since 2011.

The 5-star cut points for this measure have decreased from 95% in 2011 to 86% in 2014.

The 2-star cut points have largely remained stable.

General Trend: Higher is better.
• Measure description: Percent of senior plan members who discussed exercise with their doctor and were advised to start, increase or maintain their physical activity during the year.
• Data source: HEDIS / HOS.
• 4-star threshold was predetermined at 60% since 2011.
• The 5-star cut points for this measure have greatly decreased from 85% in 2011 to 64% in 2014.
• The 2-star cut points have decreased from 46% in 2011 to 43% in 2014.
• General Trend: Higher is better.
• Measure description: Percent of plan members aged 18-74 with an outpatient visit who had their Body Mass Index (BMI) calculated from their height and weight and recorded in their medical records.
• Data source: HEDIS.
• There is no predetermined 4-star threshold for this measure.
• This measure was first introduced to the Star Ratings in 2012; therefore, no previous data are included in this graph.
• The 5-star cut points for this measure have increased from 73% in 2012 to 89% in 2014.
• The 2-star cut points have decreased from 27% in 2012 to 52% in 2014.
• General Trend: Higher is better.
- Measure description: Percent of plan members 66 years and older whose doctor or clinical pharmacist has reviewed a list of everything they take (prescription and non-prescription drugs, vitamins, herbal remedies, other supplements) at least once a year. (This information about a yearly review of medications is collected for Medicare Special Needs Plans only. These plans are a type of Medicare Advantage Plan designed for certain types of people with Medicare. Some Special Needs Plans are for people with certain chronic diseases and conditions, some are for people who have both Medicare and Medicaid, and some are for people who live in an institution such as a nursing home.)

- Data source: HEDIS.
- There is no predetermined 4-star threshold for this measure.
- The 5-star cut points for this measure have increased from 82% in 2012 to 92% in 2014.
- The 2-star cut points have increased from 24% in 2012 to 51% in 2014.
- General Trend: Higher is better.
• Measure description: Percent of plan members 66 years and older whose doctor has done a “functional status assessment” to see how well they are able to do “activities of daily living” (such as dressing, eating, and bathing). (This information about the yearly assessment is collected for Medicare Special Needs Plans only. These plans are a type of Medicare Advantage Plan designed for certain types of people with Medicare. Some Special Needs Plans are for people with certain chronic diseases and conditions, some are for people who have both Medicare and Medicaid, and some are for people who live in an institution such as a nursing home.)

• Data source: HEDIS.

• There is no predetermined 4-star threshold for this measure.

• The 5-star cut points for this measure have increased from 78% in 2012 to 87% in 2014.

• The 2-star cut points have increased from 22% in 2012 to 30% in 2014.

• General Trend: Higher is better.
Measure description: Percent of plan members 66 years and older who had a pain screening or pain management plan at least once during the year. (This information about pain screening or pain management is collected for Medicare Special Needs Plans only. These plans are a type of Medicare Advantage Plan designed for certain types of people with Medicare. Some Special Needs Plans are for people with certain chronic diseases and conditions, some are for people who have both Medicare and Medicaid, and some are for people who live in an institution such as a nursing home.)

- Data source: HEDIS.
- There is no predetermined 4-star threshold for this measure.
- The 5-star cut points for this measure have increased from 87% in 2012 to 91% in 2014.
- The 2-star cut points have increased from 24% in 2012 to 36% in 2014.
- General Trend: Higher is better.
Trends in Part C & D Star Rating Measure Cut Points

- Measure description: Percent of female plan members aged 67 and older who broke a bone and got screening or treatment for osteoporosis within 6 months.
- Data source: HEDIS.
- **4-star threshold was predetermined at 60% since 2011.**
- The 5-star cut points for this measure have decreased from 85% in 2011 to 70% in 2014.
- The 2-star cut points have decreased from 23% in 2011 to 16% in 2014.
- General Trend: Higher is better.
- Measure description: Percent of plan members with diabetes aged 18-75 who had an eye exam to check for damage from diabetes during the year.
- Data source: HEDIS.
- **4-star threshold was predetermined at 64% since 2011.**
- The 5-star cut points for this measure have decreased from 75% in 2011 to 70% in 2014.
- The 2-star cut points have decreased from 45% in 2011 to 41% in 2014.
- General Trend: Higher is better.
- Measure description: Percent of plan members with diabetes aged 18-75 who had a kidney function test during the year.
- Data source: HEDIS.
- **4-star threshold was predetermined at 85% since 2011.**
- The 5-star cut points for this measure have slightly decreased from 90% in 2011 to 89% in 2014.
- The 2-star cut points have slightly increased from 79% in 2011 to 80% in 2014.
- General Trend: Higher is better.
• Measure description: Percent of plan members with diabetes aged 18-75 who had an A-1-C lab test during the year that showed their average blood sugar is under control.
• Data source: HEDIS.
• 4-star threshold was predetermined at 80% since 2011.
• The 5-star cut points for this measure have slightly decreased from 87% in 2011 to 84% in 2014.
• The 2-star cut points have increased from 24% in 2011 to 48% in 2014.
• General Trend: Higher is better.
Measure description: Percent of plan members with diabetes aged 18-75 who had a cholesterol test during the year that showed an acceptable level of “bad” (LDL) cholesterol.

Data source: HEDIS.

4-star threshold was predetermined at 53% since 2011.

The 5-star cut points for this measure have slightly decreased from 61% in 2011 to 59% in 2014.

The 2-star cut points have slightly increased from 30% in 2011 to 31% in 2014.

General Trend: Higher is better.
• Measure description: Percent of plan members with high blood pressure aged 18-85 who got treatment and were able to maintain a healthy pressure.
• Data source: HEDIS.
• **4-star threshold was predetermined at 63% since 2011.**
• The 5-star cut points for this measure have increased from 74% in 2011 to 77% in 2014.
• The 2-star cut points have decreased from 26% in 2011 to 37% in 2014.
• General Trend: Higher is better.
• Measure description: Percent of plan members with Rheumatoid Arthritis who got one or more prescription(s) for an anti-rheumatic drug.
• Data source: HEDIS.
• **4-star threshold was predetermined at 78% since 2011.**
• The 5-star cut points for this measure have largely remained stable.
• The 2-star cut points have increased from 46% in 2011 to 51% in 2014.
• General Trend: Higher is better.
- Measure description: Percent of plan members 65 years of age or older with a urine leakage problem who discussed the problem with their doctor and got treatment for it within 6 months.
- Data source: HEDIS / HOS.
- **4-star threshold was predetermined at 60% since 2011.**
- The 5-star cut points for this measure have decreased from 85% in 2011 to 71% in 2014.
- The 2-star cut points have slightly decreased from 32% in 2009 to 31% in 2014.
- General Trend: Higher is better.
Measure description: Percent of plan members 65 years of age or older with a problem falling, walking or balancing who discussed it with their doctor and got treatment for it during the year.

Data source: HEDIS / HOS.

4-star threshold was predetermined at 59% since 2011.

The 5-star cut points for this measure have increased from 65% in 2011 to 71% in 2014.

The 2-star cut points have slightly decreased from 51% in 2009 to 50% in 2014.

General Trend: Higher is better.
Measure description: Readmission to a Hospital within 30 Days of Being Discharged (lower percentages are better because it means fewer members are being readmitted). Percent of senior plan members discharged from a hospital stay who were readmitted to a hospital within 30 days, either for the same condition as their recent hospital stay or for a different reason. (Patients may have been readmitted back to the same hospital or to a different one. Rates of readmission take into account how sick patients were when they went into the hospital the first time. This “risk-adjustment” helps make the comparisons between plans fair and meaningful.)

- Data source: HEDIS.
- There is no predetermined 4-star threshold for this measure.
- The 2-star cut points for this measure have decreased from 32% in 2012 to 21% in 2014.
- The 5-star cut points have increased from 5% in 2012 to 9% in 2014.
- General Trend: Lower is better.
- Measure description: Percent of the best possible score the plan earned on how easy it is for members to get needed care, including care from specialists.
- Data source: CAHPS.
- **4-star threshold was predetermined at 85% since 2011.**
- The 5-star cut points for this measure have slightly increased from 87% in 2011 to 88% in 2014.
- The 2-star cut points have slightly increased from 80% in 2011 to 81% in 2014.
- General Trend: Higher is better.
Trends in Part C & D Star Rating Measure Cut Points

- Measure description: Percent of the best possible score the plan earned on how quickly members get appointments and care.
- Data source: CAHPS.
- **4-star threshold was predetermined at 75% since 2012.**
- The 5-star cut points for this measure have slightly increased from 78% in 2010 to 79% in 2014.
- The 2-star cut points have slightly increased from 70% in 2010 to 72% in 2014.
- General Trend: Higher is better.
• Measure description: Percent of the best possible score the plan earned on how easy it is for members to get information and help from the plan when needed.

• Data source: CAHPS.

• **4-star threshold was predetermined at 88% since 2012.**

• The 5-star cut points for this measure have remained at 91% (except for year 2012).

• The 2-star cut points have slightly increased from 84% in 2011 to 85% in 2014.

• General Trend: Higher is better.
- **Measure definition:** Percent of the best possible score the plan earned from members who rated the quality of the health care they received.
- **Data source:** CAHPS.
- **4-star threshold was predetermined at 85% since 2011.**
- Due to rounding and the placement of the predetermined 4-star cutoff, no contracts were assigned 3 base stars in 2012 and 2013; all contracts meeting the cutoff for 3 base stars also met the cutoff for 4 base stars. However, after application of the further criteria of significance and reliability, some plans with fewer than 3 base stars may have been assigned 3 final stars.
- The 5-star cut points for this measure have slightly increased from 86% in 2011 to 88% in 2014.
- The 2-star cut points have increased from 81% in 2011 to 84% in 2014.
- **General Trend:** Higher is better.
• Measure description: Percent of the best possible score the plan earned from members who rated the health plan.
• Data source: CAHPS.
• 4-star threshold was predetermined at 85% since 2012.
• The 5-star cut points for this measure have remained around 88%.
• The 2-star cut points have increased from 78% in 2011 to 83% in 2014.
• General Trend: Higher is better.
• Measure description: Complaints about the Health Plan (number of complaints for every 1,000 members) (lower numbers are better because it means fewer complaints).
• Data source: CTM.
• There is no predetermined 4-star threshold for this measure.
• All star cut points have decreased from 2011 to 2014, indicating improvement in this measure.
• The 2-star cut points for this measure have decreased from 1.51 per 1,000 members in 2011 to 0.50 per 1,000 members in 2014.
• The 5-star cut points have slightly decreased from 0.23 per 1,000 members in 2011 to 0.10 per 1,000 members in 2014.
• General Trend: Lower is better.
- Measure description: The percent of plan members who chose to leave the plan in the measurement year (lower percentages are better because it means fewer members choose to leave the plan). (This does not include members who did not choose to leave the plan, such as members who moved out of the service area.)
- Data source: Medicare Beneficiary Database Suite of Systems.
- There is no predetermined 4-star threshold for this measure.
- The 2-star cut points for this measure have slightly increased from 19% in 2012 to 20% in 2014.
- The 5-star cut points have slightly increased from 7% in 2012 to 8% in 2014.
- General Trend: Lower is better.
• Measure description: Percent of plan members who got a timely response when they made an appeal request to the health plan about a decision to refuse payment or coverage.
• Data source: IRE.
• **4-star threshold was predetermined at 85% since 2011.**
• The 5-star cut points for this measure have slightly increased from 91% in 2011 to 92% in 2014.
• The 2-star cut points have decreased from 55% in 2011 to 44% in 2014.
• General Trend: Higher is better.
- **Measure description:** This measure/rating shows how often an Independent Reviewer thought the health plan’s decision to deny an appeal was fair. This includes appeals made by plan members and out-of-network providers. (This rating is not based on how often the plan denies appeals, but rather *how fair* the plan is when they do deny an appeal.)
- **Data source:** IRE.
- **4-star threshold was predetermined at 87% since 2011.**
- The 5-star cut points for this measure have increased from 92% in 2011 to 95% in 2014.
- The 2-star cut points have increased from 64% in 2008 to 69% in 2014.
- **General Trend:** Higher is better.
• Measure description: Percent of the time that the TTY services and foreign language interpretation were available when needed by prospective members who called the health plan’s prospective enrollee customer service phone number.
• Data source: Call Center
• 4-star threshold was only predetermined in 2012, at 78%. There was no predetermined 4-star threshold in other years.
• The 5-star cut points for this measure have increased from 80% in 2011 to 93% in 2014.
• The 2-star cut points have slightly increased from 34% in 2011 to 32% in 2014.
• General Trend: Higher is better.
Trends in Part C & D Star Rating Measure Cut Points

Call Center – Foreign Language Interpreter and TTY Availability: PDP

- Measure Description: Percent of the time that the TTY services and foreign language interpretation were available when needed by prospective members who called the drug plan's prospective enrollee customer service phone number.
- Data Source: Call Center.
- There is no predetermined 4-star threshold for this measure.
- Since 2010, thresholds for each star value have increased, indicating improved performance every year.
- General Trend: Higher is better.
Measure Description: Percent of plan members who got a timely response when they made an appeal request to the drug plan about a decision to refuse payment or coverage.

Data Source: IRE.

4-star threshold since 2011: MA-PD: ≤ 1.3, PDP: ≤ 1.0.

The 2-star cut points for PDPs fluctuate from year to year. The 2-star cut points for MA-PDs show a large increase from 2012 to 2013 and a similar decrease from 2013 to 2014. MA-PD thresholds for 4 and 5 stars remain constant.

General Trend: Lower is better.
Measure Description: This measure/rating shows how often an Independent Reviewer thought the drug plan’s decision to deny an appeal was fair. This includes appeals made by plan members and out-of-network providers.

Data Source: IRE.

4-star threshold since 2011: MA-PD: ≥ 72%, PDP: ≥ 68.0%

The 5-star cut points for MA-PDs decreased from 2013 to 2014 while PDPs showed a slight increase.

General Trend: Higher is better.
Measure Description: How many complaints Medicare received about the drug plan.
Data Source: CTM.
There is no predetermined 4-star threshold for this measure.
Cut points for each star level have decreased from 2013 to 2014 indicating a higher level of performance.
General Trend: Lower is better.
• Measure Description: The percent of plan members who chose to leave the plan.
• Data Source: Medicare Beneficiary Database Suite of Systems.
• There is no predetermined 4-star threshold for this measure.
• 4-star and 5-star cut points show a fall (improvement) from 2013 to 2014 for PDPs, while MA-PDs show an increase (decline) for all cut points except the 3-star cut point which has remained the same.
• General Trend: Lower is better.
Trends in Part C & D Star Rating Measure Cut Points

Measure Description: Percent of the best possible score the plan earned from members who rated the prescription drug plan.

Data Source: CAHPS.

4-star threshold since 2012: MA-PD: ≥ 84%, PDP: ≥ 81%.

Due to rounding and the placement of the predetermined 4-star cutoff, no PDP contracts were assigned 3 stars in 2013 and 2014.

Star cut points for both MA-PDs and PDPs remained the same in 2014 compared to 2013.

General Trend: Higher is better.
• Measure Description: Percent of the best possible score the plan earned on how easy it is for members to get the prescription drugs they need using the plan.
• Data Source: CAHPS.
• 4-star threshold since 2012: MA-PD: $\geq 91\%$, PDP: $\geq 89\%$.
• 5-star cut point for PDPs showed a slight decrease in 2014 while the MA-PD 5-star cut point remained the same.
• Due to rounding and the placement of the predetermined 4-star cutoff, no PDP contracts were assigned 3 stars in 2013 and 2014.
• General Trend: Higher is better.
Trends in Part C & D Star Rating Measure Cut Points

Measure Description: The percent of plan members who got prescriptions for certain drugs with a high risk of serious side effects, when there may be safer drug choices.

Data Source: Prescription Drug Event (PDE) data.

There is no predetermined 4-star threshold for this measure.

Previously established 4-star thresholds were removed for 2013 due to specification changes. CMS increased the number of HRM fills from one to two fills. This change may be contributing to the steep decrease (lower is better) in thresholds for each star level.

For 2014, cut points for each star level, other than 2 stars, have fallen (improved).

General Trend: Lower is better.
Measure Description: When people with diabetes also have high blood pressure, there are certain types of blood pressure (BP) medication recommended. This tells what percent got one of the recommended types of BP medicine.

Data Source: Prescription Drug Event (PDE) data.

4-star threshold since 2012: MA-PD: ≥ 86%, PDP: ≥ 83%

There is slight decrease from 2013 to 2014 for the 5-star cut points.

General Trend: Higher is better
Measure Description: Percent of plan members with a prescription for oral diabetes medication who fill their prescription often enough to cover 80% or more of the time they are supposed to be taking the medication.

Data Source: Prescription Drug Event (PDE) data; Inpatient (IP) Data File.

There is no predetermined 4-star threshold for this measure.

For 2014, at each star level, PDPs show an increase in cut points while MA-PDs show a decrease.

General Trend: Higher is better.
**Trends in Part C & D Star Rating Measure Cut Points**

**Part D Medication Adherence for Hypertension: PDP**

**Measure Description:** Percent of plan members with a prescription for a blood pressure medication who fill their prescription often enough to cover 80% or more of the time they are supposed to be taking the medication.

**Data Source:** Prescription Drug Event (PDE) data; Inpatient (IP) Data File.

**General Trend:** Higher is better.

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**Part D Medication Adherence for Hypertension: MA-PD**

**Measure Description:**

- There is no predetermined 4-star threshold for this measure.
- There is slight increase from 2013 to 2014 for the PDP 4 and 5-star cut points.
- General Trend: Higher is better.

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46
- **Measure Description:** Percent of plan members with a prescription for a cholesterol medication (a statin drug) who fill their prescription often enough to cover 80% or more of the time they are supposed to be taking the medication.
- **Data Source:** Prescription Drug Event (PDE) data; Inpatient (IP) Data File.
- **There is no** predetermined 4-star threshold for this measure.
- **There is slight or no shifts in cut points from 2013 to 2014 for each star level.**
- **General Trend:** Higher is better.