



FACT SHEET

October 6, 2022

Contact: CMS Media Relations
(202) 690-6145 | [CMS Media Inquiries](#)

2023 Medicare Advantage and Part D Star Ratings

Note: The information included in this Fact Sheet is based on the 2023 Star Ratings published on the Medicare Plan Finder on October 6, 2022. For details on the Medicare Advantage (MA) and Part D Star Ratings, please refer to the 2023 Part C & D Star Ratings Technical Notes available at <http://go.cms.gov/partcanddstarratings>.

Introduction

The Centers for Medicare & Medicaid Services (CMS) publishes the Medicare Advantage (Medicare Part C) and Medicare Part D Star Ratings each year to measure the quality of health and drug services received by consumers enrolled in Medicare Advantage (MA) and Prescription Drug Plans (PDPs or Part D plans). The Star Ratings system helps Medicare consumers compare the quality of Medicare health and drug plans being offered so they are empowered to make the best health care decisions for them. An important component of this effort is to provide Medicare consumers and their caregivers with meaningful information about quality alongside information about benefits and costs to assist them in being informed and active health care consumers.

Highlights of Contract Performance in 2023 Star Ratings¹

Changes in the Methodology for the 2023 Star Ratings

Medicare Advantage with prescription drug (Part D) coverage (MA-PD) contracts are rated on up to 38 unique quality and performance measures; MA-only contracts (without prescription drug coverage, or Part D) are rated on up to 28 measures; and stand-alone Part D (PDP) contracts are rated on up to 12 measures. As finalized in previous rulemaking, the updated Controlling Blood Pressure (Part C) measure was re-specified and was transitioned off the display page and into the 2023 Star Ratings as a new measure.² This measure has a weight of 1 for the first year

¹ Percentages in the tables may not sum to 100 due to rounding.

² See CY 2020 and 2021 final rule (CMS-4185-F) at [Federal Register :: Medicare and Medicaid Programs; Policy and Technical Changes to the Medicare Advantage, Medicare Prescription Drug Benefit, Programs of All-Inclusive Care for the Elderly \(PACE\), Medicaid Fee-For-Service, and Medicaid Managed Care Programs for Years 2020 and 2021](#). See also the CY 2022 Rate Announcement at [Announcement of Calendar Year \(CY\) 2022 Medicare](#)

(2023 Star Ratings) and a weight of 3 thereafter. Starting with the 2023 Star Ratings, the Rheumatoid Arthritis Management (Part C) measure was retired and the updated Statin Use in Persons with Diabetes (Part D) measure weighting category was implemented (changed from an intermediate outcome measure with a weight of 3 to a process measure with a weight of 1).³

Guardrails⁴ were introduced in the 2023 Star Ratings for all measures that have been in the Part C and D Star Rating program for more than three years except the Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey and the Part C and Part D improvement measures. Guardrails are bi-directional caps that restrict upward and downward movement of a measure's cut points for the current year's measure-level Star Ratings compared to the prior year's measure-threshold specific cut points. The weight of patient experience/complaints and access measures increased from 2 to 4 for the 2023 Star Ratings.⁵

For the 2023 Star Ratings, the only adjustments for the impact of the COVID-19 public health emergency (PHE) are the measure-level adjustments for three Healthcare Effectiveness Data and Information Set (HEDIS) measures derived from the 2021 Health Outcomes Survey (HOS).⁶ The 2022 Star Ratings included measure-level adjustments for other (non-HOS) measures under the extreme and uncontrollable circumstances rules as a result of the COVID-19 PHE. For example, for most measures, if a measure-level Star Rating was lower for the 2022 Star Ratings relative to the prior year, the measure-level Star Rating (and numeric score) reverted to the rating (and numeric score) from the 2021 Star Ratings (see 42 C.F.R. §§ 422.166(i), 423.186(i)).

Measure Level Changes

Data from the 2019 through 2021 measurement periods help us understand how the PHE impacted the care delivery system. Tables 1-3 below include information at the national level about the overall change in contract-level average measure scores (i.e., unweighted by the size of the contract) from the 2021 to 2023 Star Ratings (for all measures without a substantive specification change across the three years). The scores are shown prior to any adjustments under the extreme and uncontrollable circumstances rules; thus, they reflect actual performance during the measurement period. The measures in Tables 1-3 are shown in order of which have the largest increases to the largest decreases in scores from the 2021 to 2022 Star Ratings. The

[Advantage \(MA\) Capitation Rates and Part C and Part D Payment Policies \(cms.gov\)](#) (explaining how the change in the collection of HEDIS data in 2020 resulted in this measure being on the display page for the 2021 and 2022 Star Ratings to comply with § 422.164(d)(2)).

³ See CY 2021 final rule (CMS-4190-F) at [Federal Register :: Medicare Program; Contract Year 2021 Policy and Technical Changes to the Medicare Advantage Program, Medicare Prescription Drug Benefit Program, and Medicare Cost Plan Program](#).

⁴ The introduction of guardrails was initially finalized for the 2022 Star Ratings in the CY 2020 and 2021 final rule (CMS-4185-F). Implementation was delayed by one year in an interim final rule with comment that appeared in the Federal Register on April 2, 2020, so cut points for the 2022 Star Ratings (based on 2020 measurement year) could change by more than 5 percentage points if national performance declined as a result of the COVID-19 PHE. See Interim final rule with comment (CMS-1744-IFC) at [Federal Register :: Medicare and Medicaid Programs; Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency](#).

⁵ See CY 2021 final rule (CMS-4190-F).

⁶ See CY 2023 final rule (CMS-4192-F) at [Federal Register :: Medicare Program; Contract Year 2023 Policy and Technical Changes to the Medicare Advantage and Medicare Prescription Drug Benefit Programs; Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency; Additional Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency](#).

arrows indicate whether the change in scores is positive or negative from the 2022 to 2023 Star Ratings. The last column of these tables highlights more substantive changes of 2 percentage points or more in either direction.

- Part C measures are displayed in Table 1 for MA contracts. Scores for most measures for the 2023 Star Ratings show a negligible change in both directions compared to data from the prior year at the national level. The *Diabetes Care — Blood Sugar Controlled* and *Osteoporosis Management in Women Who Had a Fracture* measures show larger increases. Two of the HEDIS measures collected through HOS (*Improving Bladder Control* and *Reducing the Risk of Falling*), the measure *Call Center — Foreign Language Interpreter and TTY Availability*, and the measure *Members Choosing to Leave the Plan* show larger declines.
- Part D measures are displayed in Tables 2 and 3 for MA-PD and PDP contracts, respectively. Most measure score changes between the 2022 and 2023 Star Ratings were small overall in both directions.

Table 1: Changes in Part C Measure Scores from 2021 to 2023 Star Ratings for MA Contracts

Measure	2021 National Average	2022 National Average	2023 National Average	Change in Average from 2022 to 2023	Increase / Decrease in Performance from 2022 to 2023	Change from 2022 to 2023 > 2 points
Special Needs Plan (SNP) Care Management	69.86	72.74	72.75	0.01	↑	
Statin Therapy for Patients with Cardiovascular Disease*	80.86	83.32	84.50	1.18	↑	
Medication Reconciliation Post-Discharge*	64.53	66.93	68.04	1.11	↑	
Improving Bladder Control	43.75	45.46	43.42	-2.04	↓	> 2 points
Reviewing Appeals Decisions	92.26	93.94	94.80	0.86	↑	
Rating of Health Plan*	86.28	87.41	86.77	-0.64	↓	
Rating of Health Care Quality*	86.18	87.14	86.31	-0.83	↓	
Getting Appointments and Care Quickly*	78.14	78.96	77.28	-1.68	↓	
Annual Flu Vaccine*	72.64	73.07	72.34	-0.73	↓	
Customer Service*	90.55	90.87	90.18	-0.69	↓	
Care Coordination*	85.99	86.21	85.62	-0.59	↓	
Complaints about the Plan**	0.19	0.21	0.30	0.09	↓	
Getting Needed Care*	83.13	83.01	81.21	-1.80	↓	
Plan Makes Timely Decisions about Appeals	95.86	94.98	94.04	-0.94	↓	
Reducing the Risk of Falling	56.30	55.30	53.28	-2.02	↓	> 2 points
Diabetes Care – Kidney Disease Monitoring*	95.64	94.43	95.15	0.72	↑	
Call Center – Foreign Language Interpreter and TTY Availability	93.30	92.09	89.87	-2.22	↓	> 2 points
Colorectal Cancer Screening*	74.23	72.87	72.33	-0.54	↓	
Monitoring Physical Activity	50.94	49.52	48.47	-1.05	↓	
Members Choosing to Leave the Plan**	13.16	14.68	17.15	2.47	↓	> 2 points
Care for Older Adults – Pain Assessment*	92.86	90.37	89.40	-0.97	↓	
Care for Older Adults – Medication Review*	92.42	89.78	89.83	0.05	↑	
Breast Cancer Screening*	74.73	71.17	70.43	-0.74	↓	

Measure	2021 National Average	2022 National Average	2023 National Average	Change in Average from 2022 to 2023	Increase / Decrease in Performance from 2022 to 2023	Change from 2022 to 2023 > 2 points
Diabetes Care – Blood Sugar Controlled*	80.26	76.35	78.92	2.57	↑	> 2 points
Diabetes Care – Eye Exam*	75.00	70.51	72.30	1.79	↑	
Osteoporosis Management in Women who had a Fracture*	48.03	39.64	45.00	5.36	↑	> 2 points

* Measures from HEDIS and CAHPS used data from the 2020 Star Ratings (collected in 2019 and unaffected by the COVID-19 PHE).

**For *Complaints about the Plan* and *Members Choosing to Leave the Plan* a lower score is better. An increase in scores for these 2 measures is a decrease in performance. The *Complaints about the Plan* measure is a rate of complaints about the plan per 1,000 members.

Table 2: Changes in Part D Measure Scores from 2021 to 2023 Star Ratings for MA-PD Contracts

Measure	2021 National Average	2022 National Average	2023 National Average	Change in Average from 2022 to 2023	Increase/ Decrease in Performance from 2022 to 2023	Change from 2022 to 2023 > 2 points
MTM Program Completion Rate for CMR	76.89	83.35	82.64	-0.71	↓	
Medication Adherence for Cholesterol (Statins)	82.35	86.24	86.05	-0.19	↓	
Medication Adherence for Diabetes Medications	82.61	86.03	85.75	-0.28	↓	
Statin Use in Persons with Diabetes	80.25	82.86	84.84	1.98	↑	
Medication Adherence for Hypertension (RAS antagonists)	84.58	87.04	87.20	0.16	↑	
Rating of Drug Plan*	85.05	86.43	86.26	-0.17	↓	
Getting Needed Prescription Drugs*	90.06	91.05	90.26	-0.79	↓	
Complaints about the Plan**	0.19	0.21	0.32	0.11	↓	
Call Center – Foreign Language Interpreter and TTY Availability	91.74	91.02	89.66	-1.36	↓	
Members Choosing to Leave the Plan**	13.16	14.68	17.54	2.86	↓	> 2 points

* Measures from CAHPS used data from the 2020 Star Ratings (collected in 2019 and unaffected by the COVID-19 PHE).

**For *Complaints about the Plan* and *Members Choosing to Leave the Plan* a lower score is better. An increase in scores for these 2 measures is a decrease in performance. The *Complaints about the Plan* measure is a rate of complaints about the plan per 1,000 members.

Table 3: Changes in Part D Measure Scores from 2021 to 2023 Star Ratings for PDP Contracts

Measure	2021 National Average	2022 National Average	2023 National Average	Change in Average from 2022 to 2023	Increase/ Decrease in Performance from 2022 to 2023	Change from 2022 to 2023 > 2 points
MTM Program Completion Rate for CMR	44.54	53.74	53.47	-0.27	↓	
Medication Adherence for Cholesterol (Statins)	84.32	87.08	87.24	0.16	↑	
Medication Adherence for Diabetes Medications	84.65	86.68	86.41	-0.27	↓	
Medication Adherence for Hypertension (RAS antagonists)	86.62	88.45	88.68	0.23	↑	
Statin Use in Persons with Diabetes	78.73	80.34	82.25	1.91	↑	

Measure	2021 National Average	2022 National Average	2023 National Average	Change in Average from 2022 to 2023	Increase/Decrease in Performance from 2022 to 2023	Change from 2022 to 2023 > 2 points
Getting Needed Prescription Drugs*	89.97	90.56	89.55	-1.01	↓	
Rating of Drug Plan*	83.61	84.15	82.53	-1.62	↓	
Complaints about the Plan**	0.04	0.06	0.08	0.02	↓	
Members Choosing to Leave the Plan**	9.71	10.65	10.98	0.33	↓	
Call Center – Foreign Language Interpreter and TTY Availability	92.43	88.71	89.45	0.74	↑	

* Measures from CAHPS used data from the 2020 Star Ratings (collected in 2019 and unaffected by the COVID-19 PHE).

**For *Complaints about the Plan* and *Members Choosing to Leave the Plan* a lower score is better. An increase in scores for these 2 measures is a decrease in performance. The *Complaints about the Plan* measure is a rate of complaints about the plan per 1,000 members.

Rating Distribution

The last row in Table 4 shows the trend in the average overall Star Ratings weighted by enrollment for MA-PDs from 2020 to 2023, after any adjustments for extreme and uncontrollable circumstances. The change in distribution from 2022 to 2023 Star Ratings is influenced by changes in measure scores, in both positive and negative directions, and the unusual circumstance of nearly all contracts qualifying for the regulatory adjustment for extreme and uncontrollable circumstances for the 2022 Star Ratings for most measures, resulting in higher than normal 2022 Star Ratings distributions.

- Approximately 51% of MA-PDs (260 contracts) that will be offered in 2023 earned 4 stars or higher for their 2023 overall rating.
- Weighted by enrollment, approximately 72% of MA-PD enrollees are currently in contracts that will have 4 or more stars in 2023.

Table 4: 2020 - 2023 Overall Star Rating Distribution for MA-PD Contracts

Overall Rating	2020			2021			2022			2023		
	# of Contracts	%	Weighted by Enrollment	# of Contracts	%	Weighted by Enrollment	# of Contracts	%	Weighted by Enrollment	# of Contracts	%	Weighted by Enrollment
5 stars	20	4.99	10.96	21	5.25	9.15	74	15.71	26.59	57	11.24	21.87
4.5 stars	72	17.96	31.41	63	15.75	21.92	96	20.38	33.21	67	13.21	25.92
4 stars	118	29.43	38.82	110	27.50	45.76	152	32.27	29.87	136	26.82	24.26
3.5 stars	131	32.67	15.82	141	35.25	18.97	122	25.90	8.49	116	22.88	18.71
3 stars	55	13.72	2.93	61	15.25	4.14	25	5.31	1.80	90	17.75	6.73
2.5 stars	4	1.00	0.05	4	1.00	0.06	2	0.42	0.03	37	7.30	2.39
2 stars	1	0.25	0.02	0	0	0	0	0	0	4	0.79	0.12
Total Rated Contracts	401	100		400	100		471	100		507	100	
Average Star Rating*	4.16			4.06			4.37			4.15		

* The average Star Rating is weighted by enrollment.

The last row in Table 5 shows the trend in the average Part D Ratings weighted by enrollment for stand-alone PDPs from 2020 to 2023 after any adjustments for extreme and uncontrollable circumstances.

- Approximately 31% of PDPs (16 contracts) that will be active in 2023 received 4 or more stars for their 2023 Part D Rating.
- Weighted by enrollment, about 9% of PDP enrollees are in contracts with 4 or more stars.

Table 5: 2020 - 2023 Part D Rating Distribution for PDPs

Part D Rating	2020			2021			2022			2023		
	# of Contracts	%	Weighted by Enrollment	# of Contracts	%	Weighted by Enrollment	# of Contracts	%	Weighted by Enrollment	# of Contracts	%	Weighted by Enrollment
5 stars	2	3.70	0.76	5	9.09	0.13	10	18.52	0.93	2	3.85	0.06
4.5 stars	7	12.96	1.78	7	12.73	2.38	5	9.26	4.74	7	13.46	0.90
4 stars	7	12.96	25.04	11	20.00	14.13	14	25.93	36.21	7	13.46	7.89
3.5 stars	21	38.89	42.12	19	34.55	81.24	20	37.04	52.84	11	21.15	36.89
3 stars	14	25.93	29.45	9	16.36	1.01	3	5.56	3.84	16	30.77	49.10
2.5 stars	3	5.56	0.84	4	7.27	1.10	2	3.70	1.44	4	7.69	3.18
2 stars	0	0	0	0	0	0	0	0	0	4	7.69	0.58
1.5 stars	0	0	0	0	0	0	0	0	0	1	1.92	1.39
Total Rated Contracts	54	100		55	100		54	100		52	100	
Average Star Rating*	3.50			3.58			3.70			3.25		

5-Star Contracts

A total of 62 contracts are highlighted on the Medicare Plan Finder with a high performing icon⁷ indicating they earned 5 stars; 57 are MA-PD contracts (Table A1 in Appendix), three are 1876 Cost Contracts (Table A2 in Appendix), and two are PDPs (Table A3 in Appendix). For 2023, 11 contracts receiving the high performing icon did not receive it in 2022.

Consistently Low Performers

There is one contract identified on the Medicare Plan Finder with a low performing icon⁸ for 2023 for consistently low quality ratings. Last year, no contracts received this warning.

Tax Status and Performance

Organizations that are non-profit more frequently earn higher ratings than organizations that are for-profit. For MA-PDs, approximately 72% of the non-profit contracts received 4 or more stars compared to 43% of the for-profit MA-PDs. Similarly, for PDPs approximately 42% of non-profit PDPs received 4 or more stars compared to 25% of the for-profit PDPs.

⁷ 42 C.F.R. §§ 422.166(h)(1)(i), 423.186(h)(1)(i).

⁸ 42 C.F.R. §§ 422.166(h)(1)(ii), 423.186(h)(1)(ii).

Below is the ratings distribution by tax status for MA-PD (Table 6) and PDP (Table 7) contracts after any adjustments for extreme and uncontrollable circumstances.

Table 6: Distribution of 2023 Overall Star Ratings for For-profit and Non-profit MA-PDs

2023 Overall Rating	Count For-Profit	% For-Profit	Weighted By Enrollment For-Profit	Count Non-Profit	% Non-Profit	Weighted By Enrollment Non-Profit
5 stars	25	6.98	15.39	32	21.48	43.15
4.5 stars	39	10.89	24.55	28	18.79	30.42
4 stars	89	24.86	27.27	47	31.54	14.38
3.5 stars	89	24.86	21.90	27	18.12	8.23
3 stars	77	21.51	7.69	13	8.72	3.57
2.5 stars	35	9.78	3.04	2	1.34	0.26
2 stars	4	1.12	0.15	0	0	0
Total Rated Contracts	358			149		

Table 7: Distribution of 2023 Part D Ratings for For-profit and Non-profit PDPs

2023 Part D Rating	Count For-Profit	% For-Profit	Weighted By Enrollment For-Profit	Count Non-Profit	% Non-Profit	Weighted By Enrollment Non-Profit
5 stars	0	0	0	2	10.53	2.17
4.5 stars	4	12.50	0.47	3	15.79	17.31
4 stars	4	12.50	6.95	3	15.79	45.54
3.5 stars	8	25.00	37.34	2	10.53	1.69
3 stars	8	25.00	50.00	8	42.11	29.70
2.5 stars	4	12.50	3.29	0	0	0
2 stars	3	9.38	0.50	1	5.26	3.58
1.5 stars	1	3.13	1.44	0	0	0
Total Rated Contracts	32			19		

Length of Time in Program and Performance

Generally, higher overall Star Ratings are associated with contracts that have more experience in the MA program. MA-PDs with 10 or more years in the program are more likely to have 4 or more stars compared to contracts with fewer than five years in the program. For PDPs, the relationship is similar in that PDPs with 10 or more years in the program do better in the Star Ratings relative to contracts with less experience. The tables below show the distribution of ratings by the number of years in the program (MA-PDs are shown in Table 8 and PDPs in Table 9 after adjustments for extreme and uncontrollable circumstances).

Table 8: Distribution of 2023 Overall Star Ratings by Length of Time in Program for MA-PDs

2023 Overall Rating	Number of Contracts with less than 5 Years	% Less than 5 Years	Number of Contracts with 5 years to Less than 10 Years	% 5 Years to Less than 10 Years	Number of Contracts with 10 or More Years	% 10 or More Years
5 stars	8	4.94	8	10.39	41	15.30
4.5 stars	14	8.64	3	3.90	50	18.66

2023 Overall Rating	Number of Contracts with less than 5 Years	% Less than 5 Years	Number of Contracts with 5 years to Less than 10 Years	% 5 Years to Less than 10 Years	Number of Contracts with 10 or More Years	% 10 or More Years
4 stars	41	25.31	27	35.06	68	25.37
3.5 stars	38	23.46	22	28.57	56	20.90
3 stars	35	21.60	14	18.18	41	15.30
2.5 stars	22	13.58	3	3.90	12	4.48
2 stars	4	2.47	0	0	0	0
Total Rated Contracts	162		77		268	

Table 9: Distribution of 2023 Part D Ratings by Length of Time in Program for PDPs

2023 Part D Rating	Number of Contracts with less than 5 Years	% Less than 5 Years	Number of Contracts with 5 years to Less than 10 Years	% 5 Years to Less than 10 Years	Number of Contracts with 10 or More Years	% 10 or More Years
5 stars	0	0	1	20.00	1	2.38
4.5 stars	0	0	2	40.00	5	11.90
4 stars	0	0	0	0	7	16.67
3.5 stars	1	20.00	1	20.00	9	21.43
3 stars	0	0	1	20.00	15	35.71
2.5 stars	0	0	0	0	4	9.52
2 stars	3	60.00	0	0	1	2.38
1.5 stars	1	20.00	0	0	0	0
Total Rated Contracts	5		5		42	

Average Star Rating for Each Measure

Below we list the average Star Ratings for 2021, 2022, and 2023 Part C and D measures (Tables 10, 11, and 12) using all measure scores for contracts that are publicly reported in a given year. All Star Ratings referenced in Tables 10, 11, and 12 are after the adjustments to address concerns about collecting CAHPS and HEDIS data for the 2021 Star Ratings, regulatory adjustments for extreme and uncontrollable circumstances triggered by the COVID-19 PHE for the 2023 Star Ratings (for non-HOS measures), and the regulatory disaster adjustments for extreme and uncontrollable circumstances triggered by the COVID-19 PHE for HOS measures, and other qualifying extreme and uncontrollable circumstances,⁹ for the 2021 performance period have been applied. Please note that Star Rating measure averages (means) do not always reflect performance changes, as measure-level cut points change to reflect significant changes in industry performance and distribution of scores.¹⁰

⁹ The qualifying extreme and uncontrollable circumstances for the 2021 performance period include Texas winter storms and Hurricane Ida. See 2023 Rate Announcement at <https://www.cms.gov/files/document/2023-announcement.pdf>.

¹⁰ For more information about cut points, see CY 2020 and 2021 final rule (CMS-4185-F).

Table 10: 2021 - 2023 Average Star Rating by Part C Measure

Measure	2021 Average Star	2022 Average Star	2023 Average Star
Breast Cancer Screening	3.5	3.9	3.7
Colorectal Cancer Screening	3.9	3.9	3.8
Annual Flu Vaccine	3.2	3.4	3.2
Monitoring Physical Activity	3.5	3.1	3.2
Special Needs Plan (SNP) Care Management	3.4	3.6	3.3
Care for Older Adults – Medication Review	4.3	4.4	4.4
Care for Older Adults – Pain Assessment	4.5	4.4	4.3
Osteoporosis Management in Women who had a Fracture	3.1	3.1	2.6
Diabetes Care – Eye Exam	3.8	3.8	3.7
Diabetes Care – Kidney Disease Monitoring	4.2	4.2	3.9
Diabetes Care – Blood Sugar Controlled	4.2	4.3	4.1
Rheumatoid Arthritis Management	3.6	3.7	NA
Controlling Blood Pressure	NA	NA	3.5
Reducing the Risk of Falling	3.0	2.5	2.9
Improving Bladder Control	3.2	2.7	3.3
Medication Reconciliation Post-Discharge	3.0	3.5	3.4
Statin Therapy for Patients with Cardiovascular Disease	3.1	3.5	3.5
Getting Needed Care	3.3	3.6	3.4
Getting Appointments and Care Quickly	3.4	3.6	3.5
Customer Service	3.5	3.8	3.4
Rating of Health Care Quality	3.3	3.6	3.4
Rating of Health Plan	3.2	3.5	3.2
Care Coordination	3.4	3.7	3.5
Complaints about the Plan	4.8	4.7	4.3
Members Choosing to Leave the Plan	4.0	4.1	3.5
Health Plan Quality Improvement	3.2	3.7	2.6
Plan Makes Timely Decisions about Appeals	4.3	4.6	4.6
Reviewing Appeals Decisions	4.5	4.6	4.4
Call Center – Foreign Language Interpreter and TTY Availability	4.3	4.6	4.3

Table 11: 2021 - 2023 Average Star Rating by Part D Measure for MA-PDs

Measure	2021 MA-PD Average Star	2022 MA-PD Average Star	2023 MA-PD Average Star
Call Center – Foreign Language Interpreter and TTY Availability	4.4	4.5	4.4
Complaints about the Plan	4.8	4.7	4.3
Members Choosing to Leave the Plan	4.0	4.1	3.5
Drug Plan Quality Improvement	3.5	4.2	2.7
Rating of Drug Plan	3.0	3.4	3.2

Measure	2021 MA-PD Average Star	2022 MA-PD Average Star	2023 MA-PD Average Star
Getting Needed Prescription Drugs	3.5	3.8	3.4
MPF Price Accuracy	4.9	4.0	4.2
Medication Adherence for Diabetes Medications	3.7	3.7	3.0
Medication Adherence for Hypertension (RAS antagonists)	3.2	3.9	3.4
Medication Adherence for Cholesterol (Statins)	3.3	3.6	3.1
MTM Program Completion Rate for CMR	3.7	4.0	3.9
Statin Use in Persons with Diabetes (SUPD)	3.1	3.4	3.1

Table 12: 2021 – 2023 Average Star Rating by Part D Measure for PDPs

Measure	2021 PDP Average Star	2022 PDP Average Star	2023 PDP Average Star
Call Center – Foreign Language Interpreter and TTY Availability	4.2	4.2	4.1
Complaints about the Plan	4.9	4.8	4.4
Members Choosing to Leave the Plan	4.1	4.2	4.0
Drug Plan Quality Improvement	4.1	4.1	2.2
Rating of Drug Plan	3.5	3.8	3.3
Getting Needed Prescription Drugs	3.6	3.9	3.5
MPF Price Accuracy	4.9	3.3	3.5
Medication Adherence for Diabetes Medications	3.9	3.9	2.9
Medication Adherence for Hypertension (RAS antagonists)	3.1	3.5	2.7
Medication Adherence for Cholesterol (Statins)	3.6	3.6	3.1
MTM Program Completion Rate for CMR	3.6	3.7	3.1
Statin Use in Persons with Diabetes (SUPD)	3.0	3.3	2.9

APPENDIX

Table A1: MA-PD Contracts Receiving the 2023 High Performing Icon

Contract ID	Contract Name	Parent Organization	10/2022 Enrollment	5 Star Last Year	Includes SNP Plan Benefit Packages
H0154	VIVA HEALTH, INC.	Triton Health Systems, L.L.C.	52,988	Yes	Yes
H0292	HUMANA HEALTH PLAN OF OHIO, INC.	Humana Inc.	8,284	Yes	No
H0332	KS PLAN ADMINISTRATORS, LLC	UnitedHealth Group, Inc.	43,987	Yes	No
H0524	KAISER FOUNDATION HP, INC.	Kaiser Foundation Health Plan, Inc.	1,335,875	Yes	Yes
H0630	KAISER FOUNDATION HP OF CO	Kaiser Foundation Health Plan, Inc.	113,260	Yes	Yes
H0710	SIERRA HEALTH AND LIFE INSURANCE COMPANY, INC.	UnitedHealth Group, Inc.	44,001	Yes	Yes
H1170	KAISER FOUNDATION HP OF GA, INC.	Kaiser Foundation Health Plan, Inc.	36,895	Yes	Yes
H1230	KAISER FOUNDATION HP, INC.	Kaiser Foundation Health Plan, Inc.	35,305	Yes	Yes
H1537	CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE CO.	UnitedHealth Group, Inc.	2,079	Yes	No
H1951	HUMANA HEALTH BENEFIT PLAN OF LOUISIANA, INC.	Humana Inc.	196,857	Yes	Yes

Contract ID	Contract Name	Parent Organization	10/2022 Enrollment	5 Star Last Year	Includes SNP Plan Benefit Packages
H1961	PEOPLES HEALTH, INC.	UnitedHealth Group, Inc.	89,264	Yes	Yes
H1994	SELECTHEALTH, INC.	Intermountain Health Care, Inc.	43,380	Yes	Yes
H2001	SIERRA HEALTH AND LIFE INSURANCE COMPANY, INC.	UnitedHealth Group, Inc.	1,696,070	Yes	No
H2172	KAISER FDTN HLTH PLAN OF THE MID-ATLANTIC STATES	Kaiser Foundation Health Plan, Inc.	109,714	Yes	No
H2256	TUFTS ASSOCIATED HEALTH MAINTENANCE ORGANIZATION	Point32Health, Inc.	105,492	Yes	No
H2292	CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE CO.	UnitedHealth Group, Inc.	8,992	Yes	Yes
H2320	PRIORITY HEALTH	BHSH	138,202	No	No
H2425	HMO Minnesota	Aware Integrated, Inc.	8,901	Yes	Yes
H2610	ESSENCE HEALTHCARE, INC.	Essence Group Holdings Corporation	64,129	Yes	Yes
H2697	DEVOTED HEALTH PLAN OF OHIO, INC.	Devoted Health, Inc.	6,985	No	Yes
H3305	MVP HEALTH PLAN, INC.	MVP Health Care, Inc.	28,451	No	Yes
H3344	INDEPENDENT HEALTH BENEFITS CORPORATION	Independent Health Association, Inc.	5,691	Yes	No
H3351	EXCELLUS HEALTH PLAN, INC.	Lifetime Healthcare, Inc.	94,821	Yes	No
H3362	INDEPENDENT HEALTH ASSOCIATION, INC.	Independent Health Association, Inc.	60,142	Yes	Yes
H3388	CAPITAL DISTRICT PHYSICIANS' HEALTH PLAN, INC.	Capital District Physicians' Health Plan, Inc.	43,497	Yes	Yes
H3557	BLUE CROSS & BLUE SHIELD OF RHODE ISLAND	Blue Cross & Blue Shield of Rhode Island	10,470	Yes	No
H3660	SUMMACARE INC.	Summa Health	22,935	No	No
H3664	AULTCARE HEALTH INSURING CORPORATION	Aultman Health Foundation	14,564	Yes	No
H3907	UPMC HEALTH PLAN, INC.	UPMC Health System	153,883	Yes	No
H3916	HIGHMARK SENIOR HEALTH COMPANY	Highmark Health	185,355	Yes	No
H3952	KEYSTONE HEALTH PLAN EAST, INC.	Independence Health Group, Inc.	81,418	Yes	No
H3957	HIGHMARK CHOICE COMPANY	Highmark Health	64,611	Yes	No
H4152	BLUE CROSS & BLUE SHIELD OF RHODE ISLAND	Blue Cross & Blue Shield of Rhode Island	56,341	Yes	Yes
H4461	CARITEN HEALTH PLAN INC.	Humana Inc.	152,860	Yes	Yes
H4497	MEDICAL MUTUAL OF OHIO	Medical Mutual of Ohio	9,330	Yes	No
H4513	HEALTHSPRING LIFE & HEALTH INSURANCE COMPANY, INC.	Cigna	228,911	No	Yes
H4590	UNITEDHEALTHCARE BENEFITS OF TEXAS, INC.	UnitedHealth Group, Inc.	350,815	Yes	Yes
H4882	HEALTHPARTNERS, INC.	HealthPartners, Inc.	37,115	Yes	No
H5042	CDPHP UNIVERSAL BENEFITS, INC.	Capital District Physicians' Health Plan, Inc.	8,617	Yes	No
H5106	HIGHMARK SENIOR SOLUTIONS COMPANY	Highmark Health	8,905	No	No
H5215	NETWORK HEALTH INSURANCE CORPORATION	Network Health, Inc.	69,870	Yes	Yes
H5262	QUARTZ HEALTH PLAN CORPORATION	University of Wisconsin Hospitals and Clinics Autho	27,175	Yes	Yes
H5296	ALIGNMENT HEALTH PLAN OF NORTH CAROLINA, INC.	Alignment Healthcare USA, LLC	1,273	No	Yes
H5322	CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE CO.	UnitedHealth Group, Inc.	89,116	No	Yes
H5386	SHARP HEALTH PLAN	Sharp Healthcare	10,473	Yes	No
H5431	HEALTHSUN HEALTH PLANS, INC.	Elevance Health, Inc.	53,985	Yes	Yes
H5526	Highmark Western and Northeastern New York Inc.	Highmark Health	23,338	Yes	No

Contract ID	Contract Name	Parent Organization	10/2022 Enrollment	5 Star Last Year	Includes SNP Plan Benefit Packages
H5533	UPMC HEALTH NETWORK, INC.	UPMC Health System	7,781	Yes	No
H5591	MARTIN'S POINT GENERATIONS ADVANTAGE, INC.	Martin's Point Health Care, Inc.	62,324	Yes	Yes
H5594	OPTIMUM HEALTHCARE, INC.	Elevance Health, Inc.	56,857	Yes	Yes
H5652	SIERRA HEALTH AND LIFE INSURANCE COMPANY, INC.	UnitedHealth Group, Inc.	5,723	Yes	Yes
H6723	MEDICAL MUTUAL OF OHIO	Medical Mutual of Ohio	26,063	No	No
H7917	BLUECROSS BLUESHIELD OF TENNESSEE, INC.	BlueCross BlueShield of Tennessee	138,347	No	No
H8142	SCOTT AND WHITE HEALTH PLAN	Baylor Scott & White Holdings	25,800	No	No
H9096	DEAN HEALTH PLAN, INC.	Medica Holding Company	10,457	Yes	No
H9808	CARE N' CARE INSURANCE COMPANY OF NORTH CAROLINA	Moses H. Cone Memorial Hospital Corp.	13,944	Yes	No
H9834	QUARTZ HEALTH PLAN MN CORPORATION	University of Wisconsin Hospitals and Clinics Authority	3,231	Yes	No

Table A2: 1876 Cost Contracts Receiving the 2023 High Performing Icon*

Contract ID	Contract Name	Parent Organization	10/2022 Enrollment	5 Star Last Year
H1651	MEDICAL ASSOCIATES HEALTH PLAN, INC.	Medical Associates Clinic, P.C.	14,516	Yes
H5256	MEDICAL ASSOCIATES CLINIC HEALTH PLAN	Medical Associates Clinic, P.C.	3,772	Yes
H5264	DEAN HEALTH PLAN, INC.	Medica Holding Company	14,479	Yes

*1876 Cost Contracts do not offer SNPs

Table A3: PDP Contracts Receiving the 2023 High Performing Icon

Contract ID	Contract Name	Parent Organization	10/2022 Enrollment	5 Star Last Year
S3521	EXCELLUS HEALTH PLAN, INC.	Lifetime Healthcare, Inc.	5,871	Yes
S4501	INDEPENDENT HEALTH BENEFITS CORPORATION	Independent Health Association, Inc.	7,179	Yes

###