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# FACT SHEET

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**2027 Medicare Advantage and Part D Star Ratings**

*Note: The information included in this Fact Sheet is based on the 2027 Medicare Advantage (MA) and Part D Star Ratings published on the Medicare Plan Finder on Oct. 8, 2026. For details on the methodology of the MA and Part D Star Ratings, please refer to the 2027 Part C & D Star Ratings Technical Notes available at http://go.cms.gov/partcanddstarratings.*

Ensuring that Medicare works for seniors and people with disabilities and that people with Medicare have access to robust, stable, high-quality, and affordable options for the coverage they need are top priorities for the Centers for Medicare & Medicaid Services (CMS). CMS continues to implement enhancements to the Medicare Advantage (MA) and Medicare Part D Star Ratings programs to incentivize plans to strive for ongoing quality improvement and to help ensure that Medicare enrollees receive high-quality care.

CMS publishes the MA (Medicare Part C) and Part D Star Ratings each year to measure the quality of health and prescription drug services received by consumers enrolled in MA and Part D prescription drug plans (PDPs or Part D plans). An important component of the Star Ratings is to provide people with Medicare and their caregivers with meaningful information about the quality of plans in Medicare Plan Finder, alongside information about benefits and costs, to assist them in comparing Medicare health and drug plans and choosing the Medicare coverage option that best fits their health needs.

The 2027 Star Ratings announced today appear on Medicare Plan Finder for 2027 Open Enrollment, which begins on October 15, 2026 and runs through December 7, 2026, and will impact 2028 MA quality bonus payments.

**Highlights of Contract Performance in 2027 Star Ratings**

MA Prescription Drug (MA-PD) contracts are rated on up to 43 unique quality and performance measures; MA-only contracts (without Part D coverage) are rated on up to 32 measures; and standalone PDP contracts are rated on up to 13 measures. For each measure, CMS establishes

thresholds called “cut points” that are used to determine whether each contract’s performance for that measure receives a one, two, three, four, or five-star rating.

### *Changes in the Methodology for the 2027 Star Ratings*

CMS made changes to the methodology for the 2027 Star Ratings through previous notice and comment rulemaking. There are two new measures added beginning with the 2027 Star Ratings: Concurrent Use of Opioids and Benzodiazepines (COB) and Polypharmacy: Use of Multiple Anticholinergic Medications in Older Adults (Poly-ACH).[i] The Care for Older Adults — Functional Status Assessment measure is returning to the 2027 Star Ratings after substantive specification changes.[i] The respecified Colorectal Cancer Screening measure was moved into the 2027 Star Ratings as a new measure, replacing the legacy Colorectal Cancer Screening measure.[i] All of these measures are process measures developed from evidence-based clinical treatment guidelines, each with a weight of one. These clinical process measures are critical for measuring healthcare and medication use quality, ensuring that care is delivered effectively, and preventing long-term health consequences by addressing potential health concerns early in the beneficiary’s care. The weight of the Improving or Maintaining Physical Health and Improving or Maintaining Mental Health measures increased from a weight of one for the 2026 Star Ratings to a weight of three beginning with the 2027 Star Ratings following a substantive measure specification change.

The Medication Therapy Management (MTM) Program Completion Rate for Comprehensive Medication Review (Part D) measure[i] was transitioned to the display page for measurement years 2025 and 2026 and will return to the Star Ratings as a new measure beginning with the 2029 Star Ratings (measurement year 2027). Additionally, the Care for Older Adults — Pain Assessment (Part C)[ii] and Medication Reconciliation Post-Discharge (Part C)[i] measures were retired from the Star Ratings.

For the 2027 Star Ratings, CMS began using data collected through the Part C Reporting Requirements (as described at § 422.516(a)) to confirm the completeness of the Independent Review Entity (IRE) data used in the calculation of the Plan Makes Timely Decisions about Appeals and Reviewing Appeals Decisions measures.[i] As codified at § 422.164(g)(1)(iii), CMS used these data to implement scaled reductions data integrity issues were identified.

### *Rating Distribution[iii]*

The last row in Table 1 shows the trend in the average overall Star Ratings weighted by enrollment for MA-PDs from 2024-2027 after any adjustments for extreme and uncontrollable circumstances.[iv]

- Approximately 37% of MA-PDs (188 contracts) that will be offered in 2027 earned four stars or higher for their 2027 overall rating.
- Weighted by enrollment, approximately 71% of MA-PD enrollees are currently in contracts that will have four or more stars in 2027.

Changes in Star Ratings year-over-year are normal and expected and vary by measure. Star Ratings are intended to capture a contract's performance during the measurement period, with some contracts performing better or worse in different years. The cut points are recalculated each year based on performance during the measurement period. The 2026 overall rating data reflect the updates for MA contracts that had their 2027 Quality Bonus Payment rating updated in June 2026 and their 2026 overall rating updated in Medicare Plan Finder in July 2026.

**Table 1: Overall Star Rating Distribution for MA-PD Contracts (2024 – 2027)**

| Overall Rating | 2024 | | | 2025 | | | 2026 | | | 2027 | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | #[a] | % | Weighted by Enrollment | #[a] | % | Weighted by Enrollment | #[a] | % | Weighted by Enrollment | #[a] | % | Weighted by Enrollment |
| 5 stars | 38 | 6.97 | 7.64 | 9 | 1.73 | 1.98 | 22 | 4.26 | 2.43 | 15 | 2.95 | 2.25 |
| 4.5 stars | 81 | 14.86 | 31.76 | 85 | 16.31 | 29.73 | 89 | 17.25 | 38.78 | 65 | 12.80 | 32.70 |
| 4 stars | 123 | 22.57 | 36.94 | 120 | 23.03 | 32.15 | 118 | 22.87 | 25.95 | 108 | 21.26 | 35.78 |
| 3.5 stars | 141 | 25.87 | 15.89 | 170 | 32.63 | 29.19 | 166 | 32.17 | 25.50 | 164 | 32.28 | 19.71 |
| 3 stars | 126 | 23.12 | 6.77 | 115 | 22.07 | 5.96 | 98 | 18.99 | 6.82 | 124 | 24.41 | 8.75 |
| 2.5 stars | 32 | 5.87 | 0.96 | 21 | 4.03 | 0.99 | 21 | 4.07 | 0.48 | 31 | 6.10 | 0.81 |
| 2 stars | 4 | 0.73 | 0.03 | 1 | 0.19 | 0.01 | 2 | 0.39 | 0.04 | 1 | 0.20 | 0.01 |
| Total Rated Contracts | 545 | | | 521 | | | 516 | | | 508 | | |
| **Average Star Rating[b]** | **4.07** | | | **3.95** | | | **4.01** | | | **3.99** | | |

[a] Number of contracts

[b] The average overall MA-PD Star Rating is weighted by enrollment. The overall rating is a weighted average of the Part C and D measure stars.

The last row in Table 2 shows the average Part D Ratings weighted by enrollment for stand-alone PDPs from 2024-2027 after any adjustments for extreme and uncontrollable circumstances.[iv]

- Approximately 27% of PDPs (11 contracts) that will be active in 2027 received four or more stars for their 2027 Part D Rating.
- Weighted by enrollment, approximately 22% of PDP enrollees are currently in contracts that will have four or more stars in 2027, an increase from 2% in 2026.

**Table 2: Part D Rating Distribution for PDPs (2024 – 2027)**

| Part D Rating | 2024 | | | 2025 | | | 2026 | | | 2027 | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | #[c] | % | Weighted by Enrollment | #[c] | % | Weighted by Enrollment | #[c] | % | Weighted by Enrollment | #[c] | % | Weighted by Enrollment |
| 5 stars | 2 | 4.17 | 0.04 | 2 | 4.88 | 0.04 | 2 | 5 | 0.04 | 0 | 0 | 0 |
| 4.5 stars | 4 | 8.33 | 0.60 | 6 | 14.63 | 0.94 | 5 | 12.5 | 0.87 | 3 | 7.32 | 16.39 |
| 4 stars | 12 | 25.00 | 22.82 | 3 | 7.32 | 3.60 | 2 | 5 | 0.94 | 8 | 19.51 | 5.93 |
| 3.5 stars | 10 | 20.83 | 24.45 | 11 | 26.83 | 53.61 | 6 | 15 | 35.65 | 4 | 9.76 | 4.43 |
| 3 stars | 14 | 29.17 | 49.56 | 10 | 24.39 | 4.04 | 18 | 45 | 36.54 | 14 | 34.15 | 51.27 |
| 2.5 stars | 2 | 4.17 | 0.04 | 8 | 19.51 | 36.23 | 5 | 12.5 | 13.90 | 11 | 26.83 | 21.97 |
| 2 stars | 4 | 8.33 | 2.48 | 1 | 2.44 | 1.54 | 2 | 5 | 12.07 | 0 | 0 | 0 |
| 1.5 stars | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 2.44 | 0.00[e] |
| Total Rated Contracts | 48 | | | 41 | | | 40 | | | 41 | | |
| **Average Star Rating[d]** | **3.34** | | | **3.12** | | | **3.01** | | | **3.22** | | |

[c] Number of contracts
[d] The average Star Rating is weighted by enrollment.
[e] The contract with 1.5 stars is very small.

### *Five-Star Contracts*

A total of 15 MA-PD contracts are highlighted on the Medicare Plan Finder with a high-performing icon[v] indicating they earned five stars (Table A1 in Appendix). For 2027, eight of the contracts receiving the high-performing icon also received it in 2026.

### *Consistently Low Performers*

There are four MA-PD contracts identified on the Medicare Plan Finder with a low-performing icon (LPI)[vi] for 2027 for consistently low-quality ratings (Table A2 in Appendix). Last year, four contracts received this icon.

### *Tax Status and Performance*

Nonprofit organizations more frequently earn higher ratings than organizations that are for-profit. For MA-PDs, approximately 44% of nonprofit contracts received four or more stars compared to 34% of for-profit MA-PDs. For PDPs, approximately 28% of nonprofit PDPs received four or more stars compared to 27% of for-profit PDPs.

Below are the ratings distributions by tax status for MA-PD (Table 3) and PDP (Table 4) contracts after any adjustments for extreme and uncontrollable circumstances.[iv]

## Table 3: Distribution of 2027 Overall Star Ratings for For-profit and Nonprofit MA-PDs

| 2027 Overall Rating | Number of For-Profit Contracts | % For-Profit | Weighted By Enrollment For-Profit | Number of Nonprofit Contracts | % Nonprofit | Weighted By Enrollment Nonprofit |
|---|---|---|---|---|---|---|
| 5 stars | 14 | 3.80 | 2.82 | 1 | 0.71 | 0.28 |
| 4.5 stars | 40 | 10.87 | 29.81 | 25 | 17.86 | 42.64 |
| 4 stars | 72 | 19.57 | 37.26 | 36 | 25.71 | 30.68 |
| 3.5 stars | 120 | 32.61 | 19.72 | 44 | 31.43 | 19.67 |
| 3 stars | 94 | 25.54 | 9.58 | 30 | 21.43 | 5.93 |
| 2.5 stars | 27 | 7.34 | 0.81 | 4 | 2.86 | 0.80 |
| 2 stars | 1 | 0.27 | 0.01 | 0 | 0 | 0 |
| Total Rated Contracts | 368 | | | 140 | | |

## Table 4: Distribution of 2027 Part D Ratings for For-profit and Nonprofit PDPs[f]

| 2027 Part D Rating | Number of For-Profit Contracts | % For-Profit | Weighted By Enrollment For-Profit | Number of Nonprofit Contracts | % Nonprofit | Weighted By Enrollment Nonprofit |
|---|---|---|---|---|---|---|
| 5 stars | 0 | 0 | 0 | 0 | 0 | 0 |
| 4.5 stars | 1 | 4.55 | 17.67 | 2 | 11.11 | 0.80 |
| 4 stars | 5 | 22.73 | 5.17 | 3 | 16.67 | 17.77 |
| 3.5 stars | 3 | 13.64 | 4.78 | 1 | 5.56 | 0.10 |
| 3 stars | 6 | 27.27 | 53.44 | 7 | 38.89 | 11.78 |
| 2.5 stars | 6 | 27.27 | 18.92 | 5 | 27.78 | 69.56 |
| 2 stars | 0 | 0 | 0 | 0 | 0 | 0 |
| 1.5 stars | 1 | 4.55 | 0[g] | 0 | 0 | 0 |
| Total Rated Contracts | 22 | | | 18 | | |

[f] One PDP is missing information about tax status.
[g] The contract with 1.5 stars is very small.

### *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 four or more stars compared to MA-PDs with less experience in the program. There are very few PDPs with less than 10 years of experience in the program so the relationship is not as clear. There are only five PDPs with less than 10 years of experience, and they all earned 3.5 or fewer stars. The tables below show the distribution of ratings by the number of years in the program (MA-PDs are shown in Table 5 and PDPs in Table 6 after adjustments for extreme and uncontrollable circumstances).[iv]

**Table 5: Distribution of 2027 Overall Star Ratings by Length of Time in Program for MA-PDs**

| 2027 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 | 2 | 2.13 | 6 | 4.35 | 7 | 2.54 |
| 4.5 stars | 10 | 10.64 | 17 | 12.32 | 38 | 13.77 |
| 4 stars | 16 | 17.02 | 20 | 14.49 | 72 | 26.09 |
| 3.5 stars | 30 | 31.91 | 45 | 32.61 | 89 | 32.25 |
| 3 stars | 23 | 24.47 | 38 | 27.54 | 63 | 22.83 |
| 2.5 stars | 12 | 12.77 | 12 | 8.70 | 7 | 2.54 |
| 2 stars | 1 | 1.06 | 0 | 0 | 0 | 0 |
| Total Rated Contracts | 94 | | 138 | | 276 | |

## Table 6: Distribution of 2027 Part D Ratings by Length of Time in Program for PDPs

| 2027 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 | 0 | 0 | 0 | 0 |
| 4.5 stars | 0 | 0 | 0 | 0 | 3 | 8.33 |
| 4 stars | 0 | 0 | 0 | 0 | 8 | 22.22 |
| 3.5 stars | 0 | 0 | 1 | 100.00 | 3 | 8.33 |
| 3 stars | 2 | 50.00 | 0 | 0 | 12 | 33.33 |
| 2.5 stars | 1 | 25.00 | 0 | 0 | 10 | 27.78 |
| 2 stars | 0 | 0 | 0 | 0 | 0 | 0 |
| 1.5 stars | 1 | 25.00 | 0 | 0 | 0 | 0 |
| Total Rated Contracts | 4 | | 1 | | 36 | |

## Average Star Rating for Each Measure

The tables below list the average Star Ratings for 2024, 2025, 2026, and 2027 Part C and D measures (Tables 7, 8, and 9) using all measure stars for contracts that are publicly reported in a given year. All Star Ratings referenced in Tables 7-9 are after adjustments for extreme and uncontrollable circumstances have been applied.[iv]

## Table 7: Average Star Rating by Part C Measure (2024 – 2027)

| Measure | 2024 | 2025 | 2026 | 2027 |
|---|---|---|---|---|
| Breast Cancer Screening | 3.7 | 3.4 | 3.2 | 3.3 |
| Colorectal Cancer Screening | 3.7 | 3.4 | 3.8 | 3.4 |
| Annual Flu Vaccine | 3.1 | 3.2 | 3.2 | 3.1 |
| Improving or Maintaining Physical Health | - | - | 3.2 | 3.0 |
| Improving or Maintaining Mental Health | - | - | 3.2 | 3.2 |
| Monitoring Physical Activity | 3.0 | 3.1 | 3.1 | 2.8 |
| Special Needs Plan (SNP) Care Management | 3.4 | 3.4 | 3.5 | 3.4 |
| Care for Older Adults – Medication Review | 4.1 | 4.1 | 4.2 | 4.2 |
| Care for Older Adults – Pain Assessment | 4.0 | 4.2 | 3.9 | 4.0 |
| Osteoporosis Management in Women who had a Fracture | 2.8 | 2.7 | 2.8 | 2.8 |
| Diabetes Care – Eye Exam | 3.5 | 3.4 | 3.4 | 3.2 |
| Diabetes Care — Blood Sugar Controlled | 3.8 | 3.7 | 3.6 | 3.7 |

| Measure | 2024 | 2025 | 2026 | 2027 |
|---|---|---|---|---|
| Kidney Health Evaluation for Patients with Diabetes | - | - | 3.5 | 3.2 |
| Controlling Blood Pressure | 3.4 | 3.0 | 3.4 | 3.0 |
| Reducing the Risk of Falling | 2.9 | 2.6 | 2.7 | 2.7 |
| Improving Bladder Control | 3.2 | 3.0 | 2.7 | 3.1 |
| Plan All-Cause Readmissions | 2.9 | 3.1 | 2.9 | 3.4 |
| Statin Therapy for Patients with Cardiovascular Disease | 3.3 | 3.0 | 3.3 | 3.3 |
| Transitions of Care | 2.5 | 3.0 | 3.1 | 3.4 |
| Follow-up after Emergency Department Visit for People with Multiple High-Risk Chronic Conditions | 3.0 | 3.2 | 2.8 | 2.5 |
| Getting Needed Care | 3.4 | 3.3 | 3.4 | 3.3 |
| Getting Appointments and Care Quickly | 3.5 | 3.5 | 3.5 | 3.7 |
| Customer Service | 3.6 | 3.5 | 3.5 | 3.4 |
| Rating of Healthcare Quality | 3.3 | 3.5 | 3.4 | 3.4 |
| Rating of Health Plan | 3.1 | 3.2 | 3.4 | 3.4 |
| Care Coordination | 3.6 | 3.6 | 3.5 | 3.5 |
| Complaints about the Plan | 4.1 | 4.2 | 4.1 | 4.0 |
| Members Choosing to Leave the Plan | 3.6 | 3.6 | 3.7 | 3.7 |
| Health Plan Quality Improvement | 2.9 | 3.6 | 3.5 | 3.3 |
| Plan Makes Timely Decisions about Appeals | 4.3 | 4.2 | 4.1 | 3.9 |
| Reviewing Appeals Decisions | 3.7 | 3.7 | 3.7 | 3.9 |
| Call Center – Foreign Language Interpreter and TTY Availability | 4.5 | 4.0 | 4.2 | 4.4 |

## Table 8: Average Star Rating by Part D Measure for MA-PDs (2024 – 2027)

| Measure | 2024 | 2025 | 2026 | 2027 |
|---|---|---|---|---|
| Call Center — Foreign Language Interpreter and TTY Availability | 4.5 | 4.2 | 4.4 | 4.4 |
| Complaints about the Plan | 4.1 | 4.2 | 4.1 | 4.0 |
| Members Choosing to Leave the Plan | 3.6 | 3.6 | 3.7 | 3.7 |
| Drug Plan Quality Improvement | 3.4 | 3.3 | 3.4 | 3.1 |
| Rating of Drug Plan | 3.2 | 3.4 | 3.3 | 3.5 |
| Getting Needed Prescription Drugs | 3.5 | 3.3 | 3.5 | 3.6 |
| MPF Price Accuracy | 3.6 | 3.4 | 4.6 | 4.2 |
| Medication Adherence for Diabetes Medications | 3.3 | 3.2 | 3.1 | 2.7 |
| Medication Adherence for Hypertension (RAS antagonists) | 3.4 | 3.3 | 3.3 | 3.4 |
| Medication Adherence for Cholesterol (Statins) | 3.2 | 3.3 | 3.2 | 3.3 |
| Statin Use in Persons with Diabetes (SUPD) | 2.7 | 2.8 | 3.3 | 3.1 |
| Concurrent Use of Opioids and Benzodiazepines (COB) | - | - | - | 3.5 |
| Polypharmacy: Use of Multiple Anticholinergic Medications in Older Adults (Poly-ACH) | - | - | - | 3.3 |

## Table 9: Average Star Rating by Part D Measure for PDPs (2024 – 2027)

| Measure | 2024 | 2025 | 2026 | 2027 |
|---|---|---|---|---|
| Call Center — Foreign Language Interpreter and TTY Availability | 3.6 | 3.8 | 4.2 | 4.5 |
| Complaints about the Plan | 4.6 | 4.6 | 4.5 | 4.2 |
| Members Choosing to Leave the Plan | 3.9 | 3.7 | 3.5 | 3.0 |
| Drug Plan Quality Improvement | 3.0 | 3.0 | 3.2 | 2.8 |
| Rating of Drug Plan | 3.4 | 3.5 | 3.5 | 3.5 |
| Getting Needed Prescription Drugs | 3.5 | 3.7 | 3.6 | 3.4 |
| MPF Price Accuracy | 3.6 | 3.1 | 4.7 | 4.4 |
| Medication Adherence for Diabetes Medications | 2.6 | 2.4 | 2.7 | 2.9 |
| Medication Adherence for Hypertension (RAS antagonists) | 2.6 | 2.9 | 2.6 | 3.1 |
| Medication Adherence for Cholesterol (Statins) | 3.0 | 2.9 | 2.7 | 2.9 |
| Statin Use in Persons with Diabetes (SUPD) | 2.4 | 2.7 | 3.3 | 3.5 |
| Concurrent Use of Opioids and Benzodiazepines (COB) | - | - | - | 3.3 |
| Polypharmacy: Use of Multiple Anticholinergic Medications in Older Adults (Poly-ACH) | - | - | - | 2.7 |

## APPENDIX

## Table A1: MA-PD Contracts Receiving the 2027 High-Performing Icon

| Contract ID | Contract Name | Parent Organization | 10/2026 Enrollment | Five Stars Last Year |
|---|---|---|---|---|
| H0710 | Care Improvement Plus South Central Insurance Co. | UnitedHealth Group, Inc. | 45,252 | No |
| H1644 | Longevity Health Plan of Florida, Inc | Longevity Health Founders, LLC | 818 | No |
| H2292 | Care Improvement Plus South Central Insurance Co. | UnitedHealth Group, Inc. | 8,859 | No |
| H2960 | Kaiser Foundation Health Plan of Nevada | Kaiser Foundation Health Plan, Inc. | 22,016 | Yes |
| H4286 | Leon Health, Inc. | LMC Family Holdings, LLC | 40,630 | Yes |
| H5141 | Clover Insurance Company | Clover Health Holdings, Inc. | 155,135 | No |
| H5374 | Longevity Health Plan of North Carolina, Inc. | Longevity Health Founders, LLC | 904 | Yes |
| H5577 | MCS Advantage, Inc. | MHH Healthcare, L.P. | 360,519 | Yes |
| H5652 | Sierra Health and Life Insurance Company, Inc. | UnitedHealth Group, Inc. | 6,996 | Yes |
| H5774 | Triple S Advantage, Inc. | Guidewell Mutual Holding Corporation | 120,943 | No |
| H6988 | Anthem HP, LLC | Elevance Health, Inc. | 9,636 | Yes |
| H7557 | Longevity Health Plan of Michigan, Inc. | Longevity Health Founders, LLC | 1,354 | No |
| H8947 | Peak Health Insurance Corporation | West Virginia United Health System, Inc. | 12,789 | No |
| H9590 | Longevity Health Plan of Illinois, Inc. | Longevity Health Founders, LLC | 985 | Yes |
| H9942 | Longevity Health Plan of New Jersey Insurance Comp | Longevity Health Founders, LLC | 1,126 | Yes |

## Table A2: Contracts Receiving the Low Performing Icon for the 2027 Star Ratings

| Contract ID | Contract Name | Parent Organization | Reason for Low Performance Warning | 10/2026 Enrollment |
|---|---|---|---|---|
| H3814 | Atrio Health Plans | ATRIO Health Plans | Part C | 2,000 |
| H4982 | Aetna Better Health of California Inc. | CVS Health Corporation | Part C or D | 9,358 |
| H7389 | HealthSpring Life & Health Insurance Company, Inc. | Health Care Service Corporation | Part C | 0 |
| H9066 | Visiting Nurse Association of Central New York | VISITING NURSE ASSOCIATION OF CENTRAL NEW YORK | Part D | 654 |

[i] Changes to the Medicare Advantage and the Medicare Prescription Drug Benefit Program for Contract Year 2024-Remaining Provisions and Contract Year 2025 Policy and Technical Changes to the Medicare Advantage Program, Medicare Prescription Drug Benefit Program, Medicare Cost Plan Program, and Programs of All-Inclusive Care for the Elderly (PACE). https://www.federalregister.gov/documents/2024/04/23/2024-07105/medicare-program-changes-to-the-medicare-advantage-and-the-medicare-prescription-drug-benefit

[ii] Announcement of Calendar Year (CY) 2025 Medicare Advantage (MA) Capitation Rates and Part C and Part D Payment Policies. https://www.cms.gov/files/document/2025-announcement.pdf

[iii] Percentages in the tables may not sum to 100 due to rounding.

[iv] The qualifying extreme and uncontrollable circumstances for the 2025 performance period include wildfires in California and severe storms in Texas. See the 2027 Rate Announcement at https://www.cms.gov/files/document/2027-announcement.pdf.

[v] 42 C.F.R. §§ 422.166(h)(1)(i), 423.186(h)(1)(i).

[vi] 42 C.F.R. §§ 422.166(h)(1)(ii), 423.186(h)(1)(ii).