



...helping people with Medicare make informed health care decisions

## 5-STAR PLAN RATINGS

Medicare uses information from member satisfaction surveys, plans, and health care providers to give overall performance star ratings to plans. These ratings help you compare plans based on quality and performance. A plan can get a rating from one to five stars. A 5-star rating is considered excellent. The overall plan rating gives you a single summary score that makes it easy for you to compare plans based on quality and performance. Visit the Medicare Plan Finder Tool on [www.medicare.gov](http://www.medicare.gov) to learn more about plans and see their ratings.

### What do the plan ratings measure?

#### Medicare Health Plans

For plans covering health services, the overall score for quality of those services covers 36 different topics in five categories:

- **Staying healthy**  
Includes how often members got various screening tests, vaccines, and other check-ups that help them stay healthy.
- **Managing chronic (long-term) conditions**  
Includes how often members with different conditions got certain tests and treatments that help them manage their condition.
- **Ratings of health plan responsiveness and care**  
Includes ratings of member satisfaction with the plan.
- **Health plan member complaints and appeals**  
Includes how often members filed a complaint against the plan.
- **Health plan telephone customer service**  
Includes how well the plan handles calls from members.

#### Medicare Drug Plans

For plans covering drug services, the overall score for quality of those services covers 17 different topics in four categories:

- **Drug plan customer service**  
Includes how well the drug plan handles calls and makes decisions about member appeals.
- **Drug plan member complaints and Medicare audit findings**  
Includes how often members filed a complaint about the drug plan and findings from Medicare's audit of the plan.
- **Member experience with drug plan**  
Includes member satisfaction information.
- **Drug pricing and patient safety**  
Includes how well the drug plan prices prescriptions and provides updated information on the Medicare website. Includes information on how often members with certain medical conditions get prescription drugs that are considered safer and clinically recommended for their condition.

For plans covering both health and drug services, the overall score for quality of those services covers all of the topics listed above.

## What is the 5-star Special Enrollment Period?

Starting December 8, 2011, you will have a 5-star special enrollment period that you may use one time between December 8 and November 30 of the following year. You can switch to a 5-star Medicare Advantage-only plan, a 5-star Medicare Advantage Plan with prescription drug coverage, or a 5-star Medicare Prescription Drug Plan at any time during the year, provided you meet the plan's enrollment requirements (e.g., living within the service area, meeting requirements regarding end-stage renal disease, etc).

People enrolled in a plan with a 5-star overall rating may also switch to a different plan with a 5-star overall rating. The enrollment effective date is the first day of the month following the month in which the plan receives the enrollment request.

You may also use this special enrollment period to disenroll from a Medicare Advantage plan or prescription drug plan and enroll in an open Medicare Cost Plan that has a 5-star rating. CMS also created a coordinating special enrollment period for prescription drug plans to allow people who enroll in certain types of 5-star plans without drug coverage to select a prescription drug plan, if this combination is permitted under CMS rules.

## It's Important That You Make a Careful Decision

You may lose your prescription drug coverage if you move from a Medicare Advantage Plan that has drug coverage to a Medicare Advantage Plan that doesn't. You will have to wait until the next open enrollment period to get drug coverage, and you may have to pay a late enrollment penalty.

If you move from a Medicare Advantage-only or Medicare Advantage-Prescription Drug coordinated care plan to a 5-star rated Prescription Drug Plan, you will lose your Medicare Advantage coverage and will revert to Original Medicare for basic medical coverage.

**Example 1:** Acme Medicare Advantage Plan has an overall rating of 4.5 stars in 2012 and 5-star for 2013. You could use the 5-star special enrollment period to enroll in the Acme Plan starting on December 8, 2012, for an effective date of January 1, 2013. But you could not use the 5-star special enrollment period to enroll in the Acme Plan for an effective date on or before December 1, 2012. The enrollment effective dates available during that period are before the calendar year for which Acme Plan has received a 5-star overall rating.

**Example 2:** Acme Medicare Advantage Plan has an overall rating of 5-stars for 2013 but loses the 5-star rating for 2014. You could use the 5-star special enrollment period to request enrollment in the Acme Plan for the first day of the next month until November 30, 2013, with the last possible effective date available being December 1, 2013. You could not use the 5-star special enrollment period to enroll in Acme Plan on or after December 1, 2013, as the enrollment effective dates available during that period are after the calendar year for which Acme Plan has received a 5-star overall rating.

**Example 3:** Mr. Miller enrolls in a 5-star Medicare Cost Plan without prescription drug coverage. Under the updated 5-star special enrollment policy, Mr. Miller can enroll in the Cost Plans optional Part D benefit (if the plan offers one).