



Optimizing Health by Advancing the Quality of Medication Use

Medicare 2023 Star Ratings Update

November 17, 2022

Webinar Logistics

- **Send us your questions.** Use the “Q&A” feature at the bottom of the screen to send speakers your questions to the throughout today’s presentation.
- **Today’s forum is being recorded.** A copy of the slides and recording will be shared with PQA members within a week.
- **Give us your feedback.** A quick survey will launch at the end of today’s webinar.

Today's Presenter

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Medicare 2023 Star Ratings Update

November 17, 2022

Andy Thorne, PharmD, MS
Sr. Manager, Data Analytics



Agenda

- Review the importance and structure of Medicare Star Ratings
- Describe the CMS 2023 Star Ratings and performance trends associated with medication-related quality measures
- “State Star Ratings” → State-level performance
- Highlights from the 2022 Industry Trend Report on Pharmacy Quality

Importance of Medicare Star Ratings: For Plans

MA-PD Plans

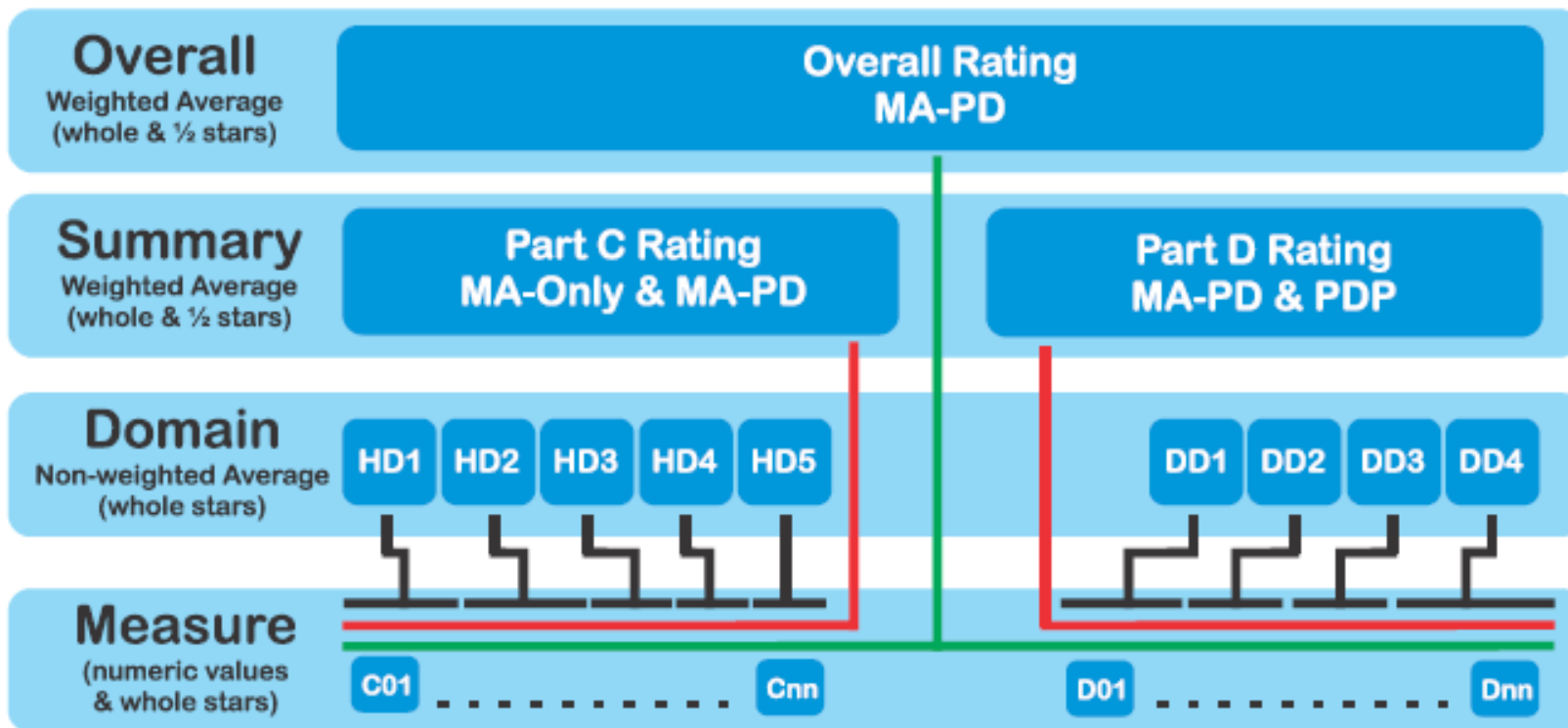
- Quality bonus payments for top performers
 - Bonus payments to support initiatives and lower premiums
 - Maintain competitiveness
- Marketing opportunities
- Extended open enrollment periods
- Penalty for consistent poor performance

PDP Plans

- Marketing opportunities
- Extended open enrollment periods
- Penalty for consistent poor performance
- ***PDP plans not eligible to receive quality bonus payments***

Medicare Star Ratings: Four Levels

- Annual ratings of Medicare plans that are made available on [Medicare Plan Finder](#) and CMS website (began in 2008, QBP's in 2012)



Additional Context for 2022

- Max of 9 domains and 40 measures
- 38 unique measures
 - 28 Part C
 - 12 Part D
- 2-year data lag (2023 Ratings represent 2021 data)
- Ratings: 1 to 5 stars
 - 5 = Excellent
 - 1 = Poor

Ratings of all Medicare plans can be found at: <http://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovGenIn/PerformanceData.html>

Part D Star Rating: 2023 Overview

Medicare Drug Plan Rating

- Receive Summary Star Rating on quality as well as four (4) domains
- Twelve (12) individual measures

Included PQA Measures (2023)

“Clinical Care” (2)

- CMR Completion Rate (was new in 2016)
- Statin Use in Persons with Diabetes (new in 2019)

Medication adherence (3)

- Non-insulin diabetes medications
- Cholesterol medication (statins)
- Blood pressure (RASA)

Part D Star Ratings Measures

Measure ID	Measure Name	Weighting Category	Part D Summary and MA-PD Overall
D01	Call Center – Foreign Language Interpreter and TTY Availability	Measures Capturing Access	4
D02	Complaints about the Drug Plan	Patients' Experience and Complaints Measure	4
D03	Members Choosing to Leave the Plan	Patients' Experience and Complaints Measure	4
D04	Drug Plan Quality Improvement	Improvement Measure	5
D05	Rating of Drug Plan	Patients' Experience and Complaints Measure	4
D06	Getting Needed Prescription Drugs	Patients' Experience and Complaints Measure	4
D07	MPF Price Accuracy	Process Measure	1
* D08*	Medication Adherence for Diabetes Medications	Intermediate Outcome Measure	3
* D09*	Medication Adherence for Hypertension (RAS antagonists)	Intermediate Outcome Measure	3
* D10*	Medication Adherence for Cholesterol (Statins)	Intermediate Outcome Measure	3
* D11	MTM Program Completion Rate for CMR	Process Measure	1
* D12	Statin Use in Persons with Diabetes (SUPD)	Process Measure	1

PQA measure weighting only changed for SUPD, but D01, D02, D03, D05, and D06 moved from 2x to 4x weighting, reducing the overall weighted proportion of PQA measures in Part D Star Ratings

* PQA Measure

Guardrails and Hold Harmless

Implementation of Guardrails

- Caps increase or decrease of cut point values by +/- 5% YOY
- Delayed from 2022 Star Ratings, implemented now for 2023 Star Ratings
- Guardrails not applied to:
 - Part C and D improvement measures
 - Measures in the program for 3 years or less

Hold Harmless Provision

- Applied in 2023 Star Ratings to new measures for contracts with 25% or more members affected by a major disaster
- In contrast, this provision was expanded to include all contracts for the 2022 summary and overall ratings

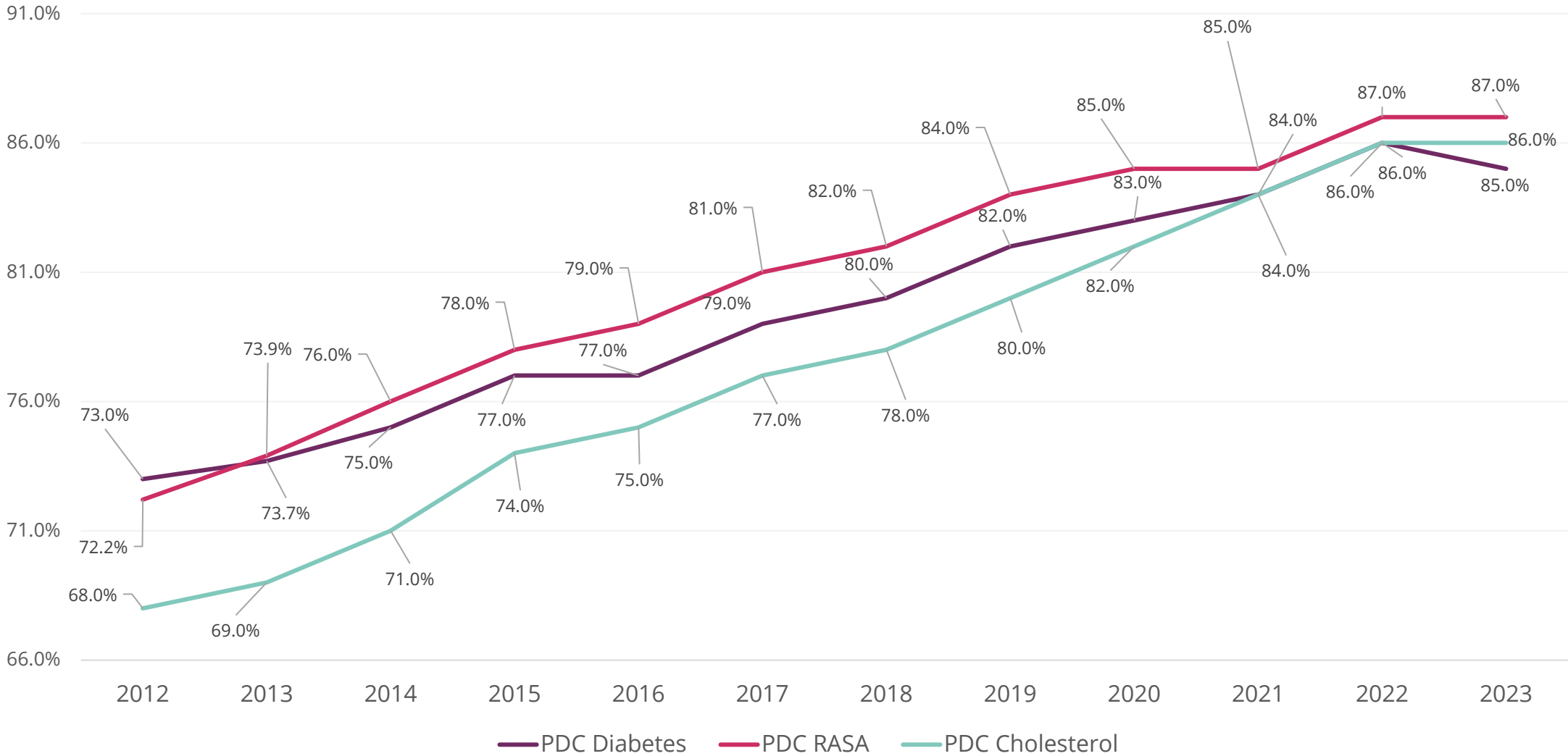
Other Star Ratings Update Items

Controlling Blood Pressure (Part C) transitioned into the 2023 Star Ratings as a new measure

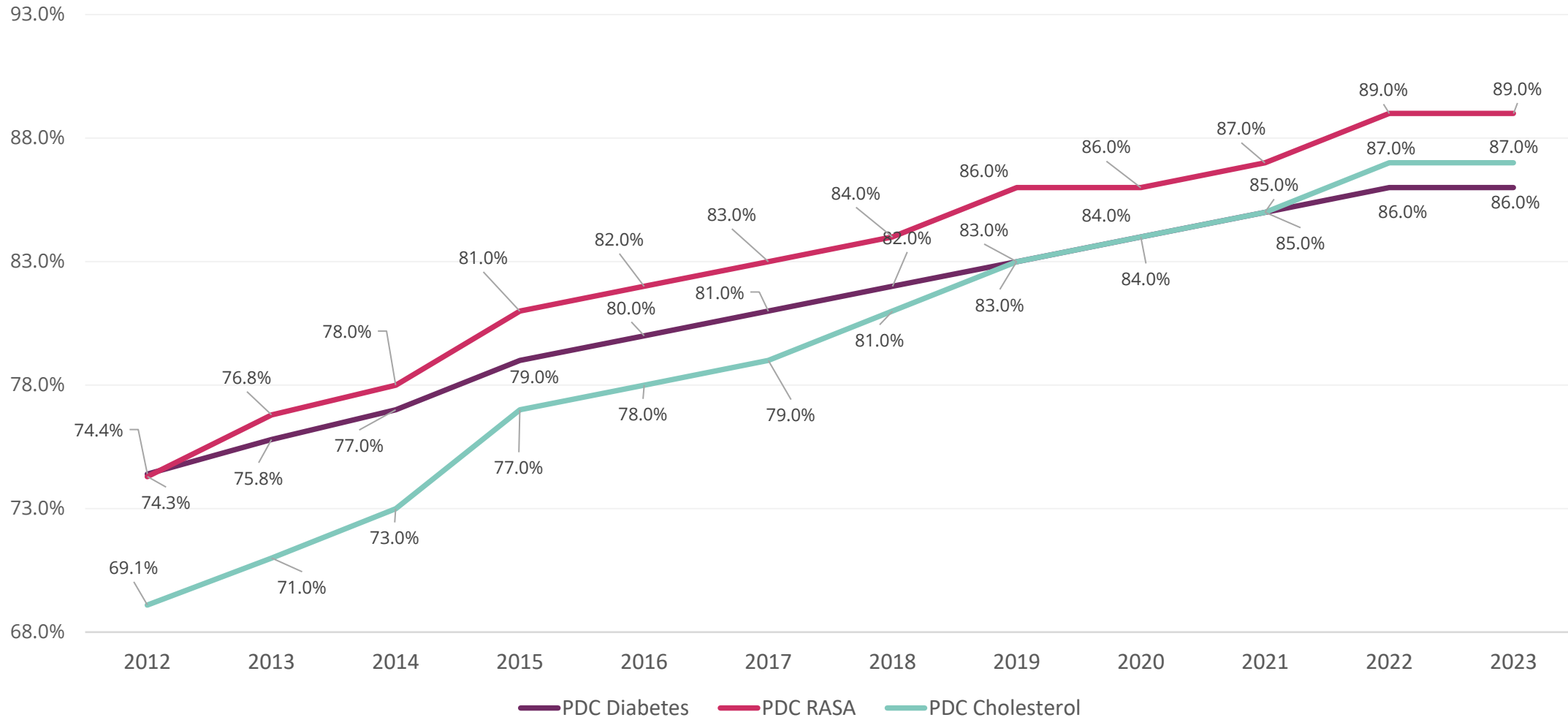
This measure has a weight of 1 for 2023 and will increase to a triple weighted measure for 2024

Statin Use in Persons with Diabetes (Part D) has been updated which will change this measure from a triple-weighted intermediate outcome measure to a process measure with a weight of 1

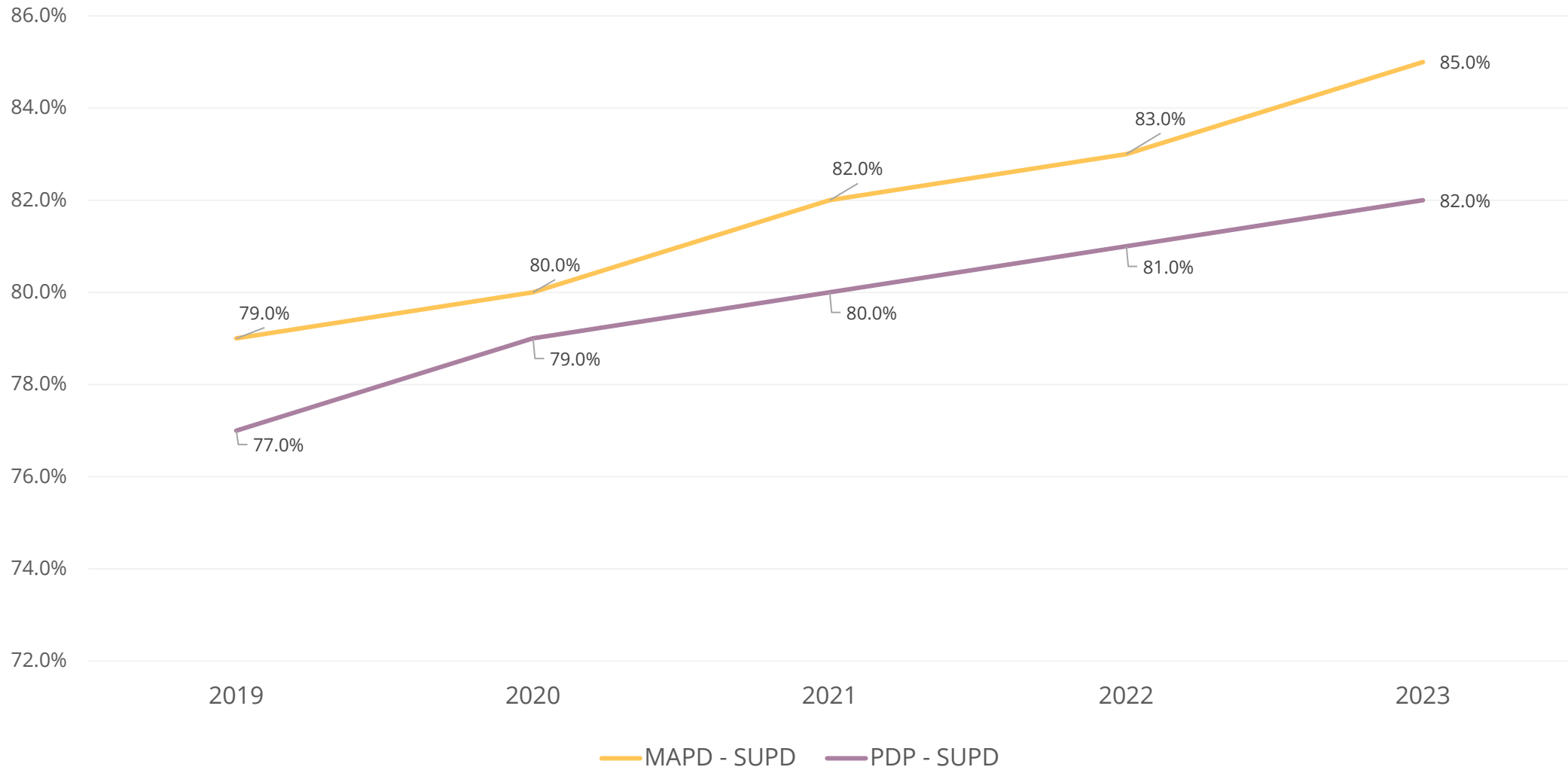
MAPD - Adherence Measure Averages



PDP - Adherence Measure Averages



SUPD - Measure Averages (MAPD and PDP)



4 & 5 Star Ratings Threshold Changes:

MAPD 2022-2023



Measure Name	4 Star			5 Star		
	2022	2023	Δ (%)	2022	2023	Δ (%)
PDC Diabetes	87.0%	88.0%	1.0% ↑	91.0%	92.00%	1.0% ↑
PDC Hypertension	87.0%	89.0%	2.0% ↑	90.0%	91.00%	1.0% ↑
PDC Cholesterol	87.0%	88.0%	1.0% ↑	91.0%	92.00%	1.0% ↑
CMR Completion Rate	82.0%	82.0%	0.0%	89.0%	89.00%	0.0%
SUPD	84.0%	86.0%	2.0% ↑	88.0%	90.00%	2.0% ↑

4 & 5 Star Rating Threshold Changes: PDP 2021-2022

Measure Name	4 Star			5 Star		
	2022	2023	Δ (%)	2022	2023	Δ (%)
PDC Diabetes	88.0%	88.0%	0.0%	90.0%	90.00%	0.0%
PDC Hypertension	89.0%	91.0%	2.0% ↑	91.0%	96.00%	5.0% ↑
PDC Cholesterol	88.0%	88.0%	0.0%	90.0%	90.00%	0.0%
CMR Completion Rate	61.0%	62.0%	1.0% ↑	74.0%	78.00%	4.0% ↑
SUPD	82.0%	84.0%	2.0% ↑	84.0%	86.00%	2.0% ↑

2022 Star Ratings Summary

Average MAPD Star Ratings decreased for all adherence measures

- 2022 average: 4.37 stars
- 2023 average: 4.15 stars

Average PDP Star Ratings also decreased for adherence

- 2022 average: 3.70 stars
- 2023 average: 3.25 stars

of contracts that will have 5 Stars in 2023 decreased

- MAPD: 57 contracts in 2023, down from 74 in 2022
- PDP: 2 contracts in 2023, down from 10 in 2022

State Star Rating

State-Level Stars Analysis by Measure

Overview

CMS Star Ratings Analysis

- Star Ratings currently only at a Medicare contract-level
- Contracts can span multiple states
- Multiple plans can roll up to one contract



State Star Rating

- Gain a regional view on performance, by measure
- Identify target opportunities for performance improvement
- Note: States do not get CMS Star Ratings

State Star Rating Analysis Overview



Area

1

Included Contracts

2

Enrollment

3

Included Measures

4

Calculation for
"State Star Rating"

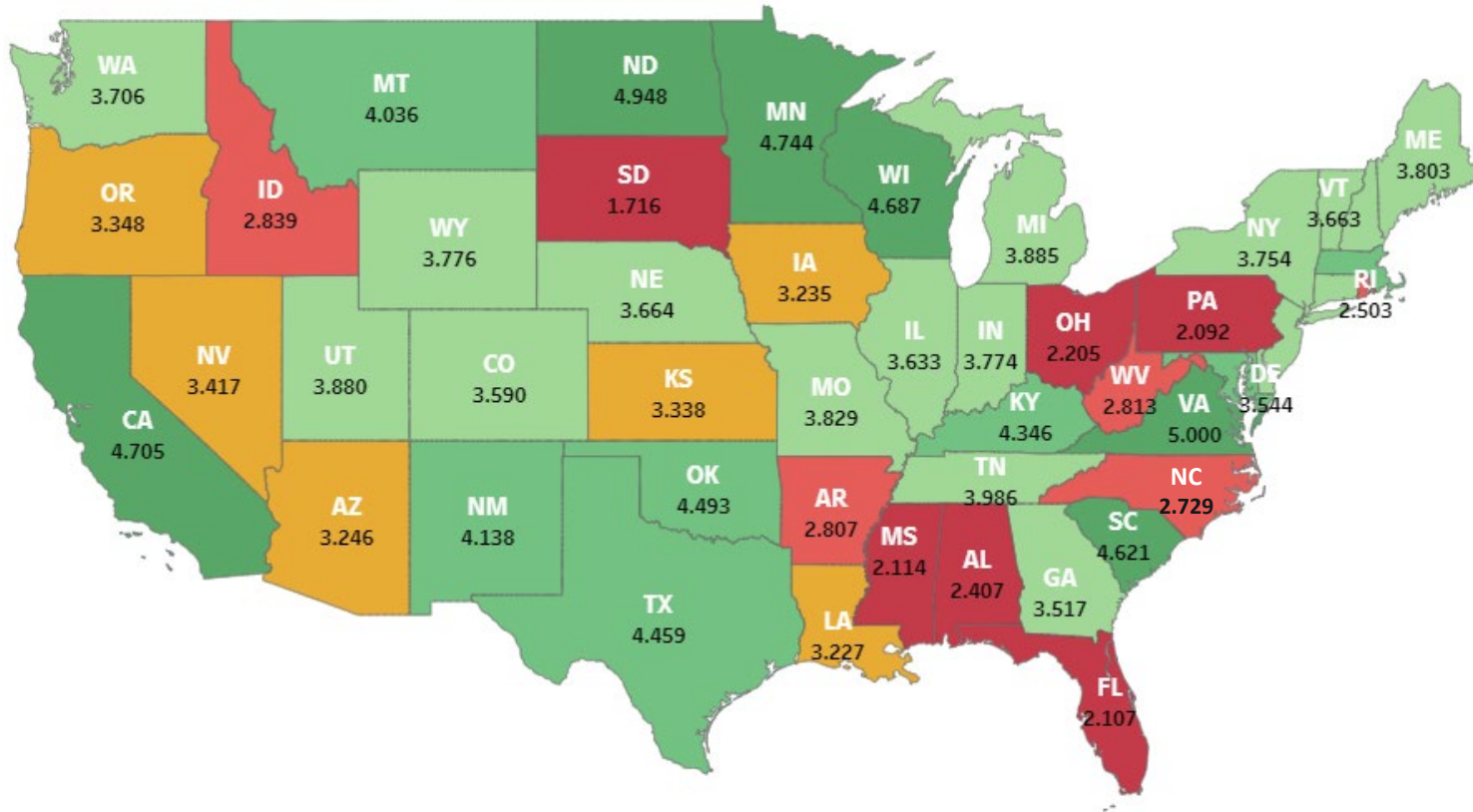
Approach

- MAPD Only
- Included contracts for 2023 Star Ratings
- December 2021 MAPD enrollment
- 25M+ total MAPD enrollees
- Annual Flu Vaccine
- 3 Adherence Measures
- Statin Therapy in Cardio. Disease
- SUPD

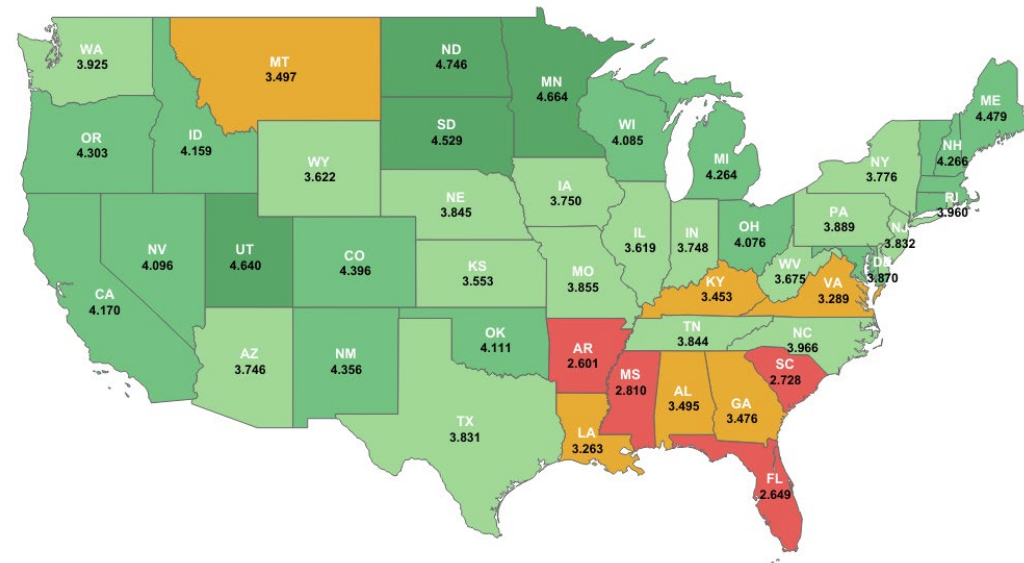
$$\text{State Star Rating} = \sum_{\text{all contracts in state}} \left[\text{contract star rating} \times \frac{\text{members in contract in state}}{\text{all members in contracts in state}} \right]$$

Annual Flu Vaccine

2023



2022



Weighted State Star Ratings



Annual Flu Vaccine

Top 10 States		
State	"Star Rating"	Δ (from '22)
VA	5.00	1.71
ND*	4.95	0.20
MN*	4.74	0.08
CA	4.71	0.54
WI	4.69	0.60
SC	4.62	1.89
OK	4.49	0.38
TX	4.46	0.63
MD*	4.45	0.01
KY	4.35	0.89

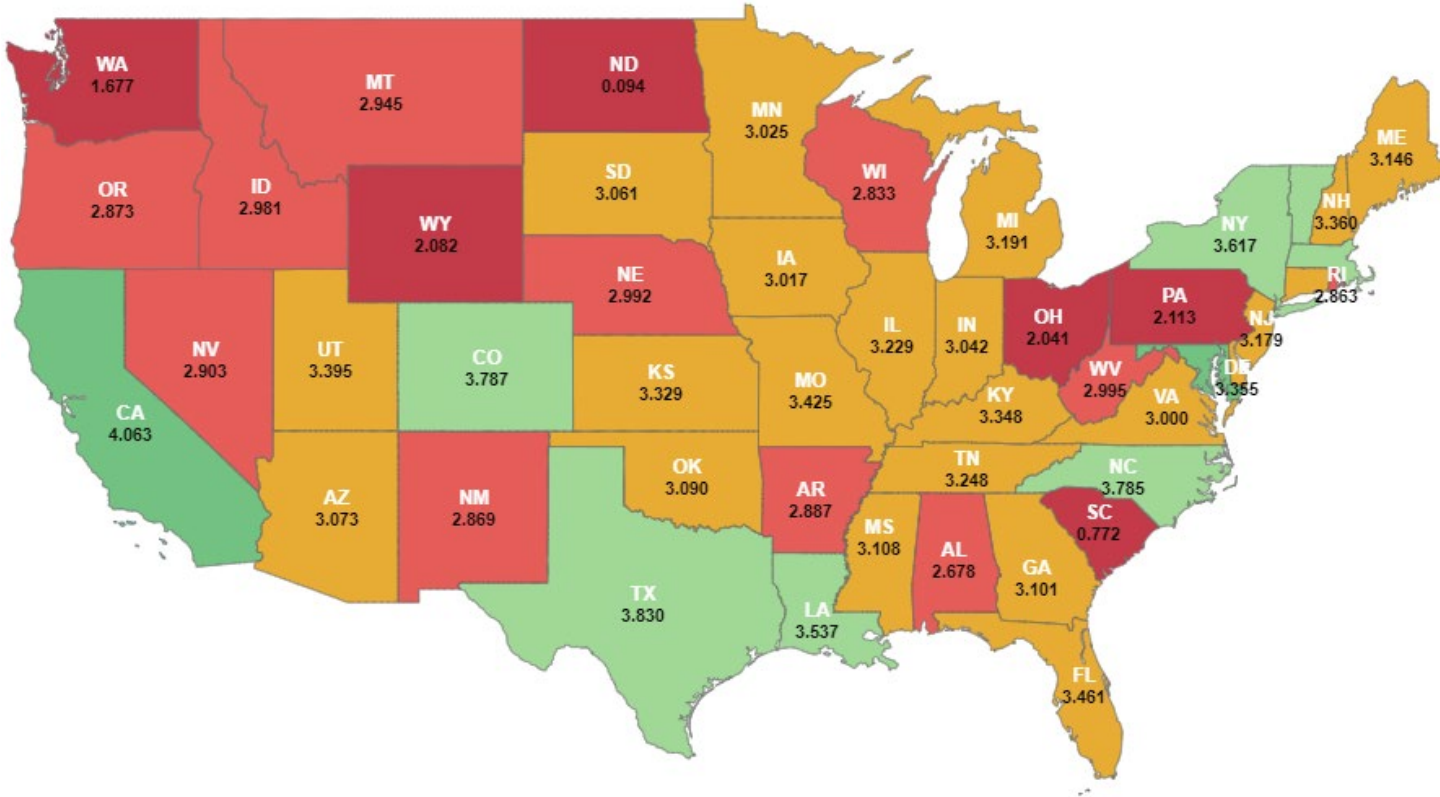
Bottom 10		
State	"Star Rating"	Δ (from '22)
SD	1.72	(-2.81)
PA	2.09	(-1.80)
FL*	2.11	(-0.54)
MS*	2.11	(-0.70)
OH	2.21	(-1.87)
AL*	2.41	(-1.09)
RI	2.50	(-1.46)
AK	2.56	(-1.13)
NC	2.73	(-1.24)
AR*	2.81	0.21

Key Takeaways

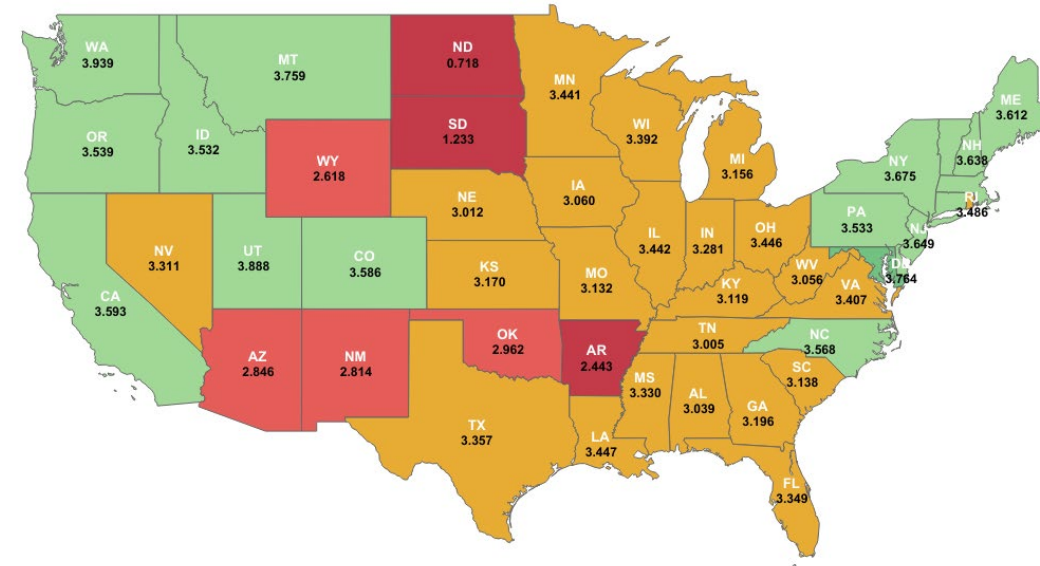
- Regional trends similar to 2022
- Most states still above 3.5 stars
- Some individual states saw wide swings

Statin Therapy in Cardiovascular Disease

2023



2022



Weighted State Star Ratings



Statin Therapy in Cardiovascular Disease

Top 10 States		
State	"Star Rating"	Δ (from '22)
MD*	4.42	0.27
CA	4.06	0.47
TX	3.83	0.47
CO	3.79	0.20
NC	3.78	0.22
DC*	3.70	(-0.02)
VT*	3.62	(-0.29)
NY*	3.62	(-0.06)
LA	3.54	0.09
MA*	3.53	(-0.39)

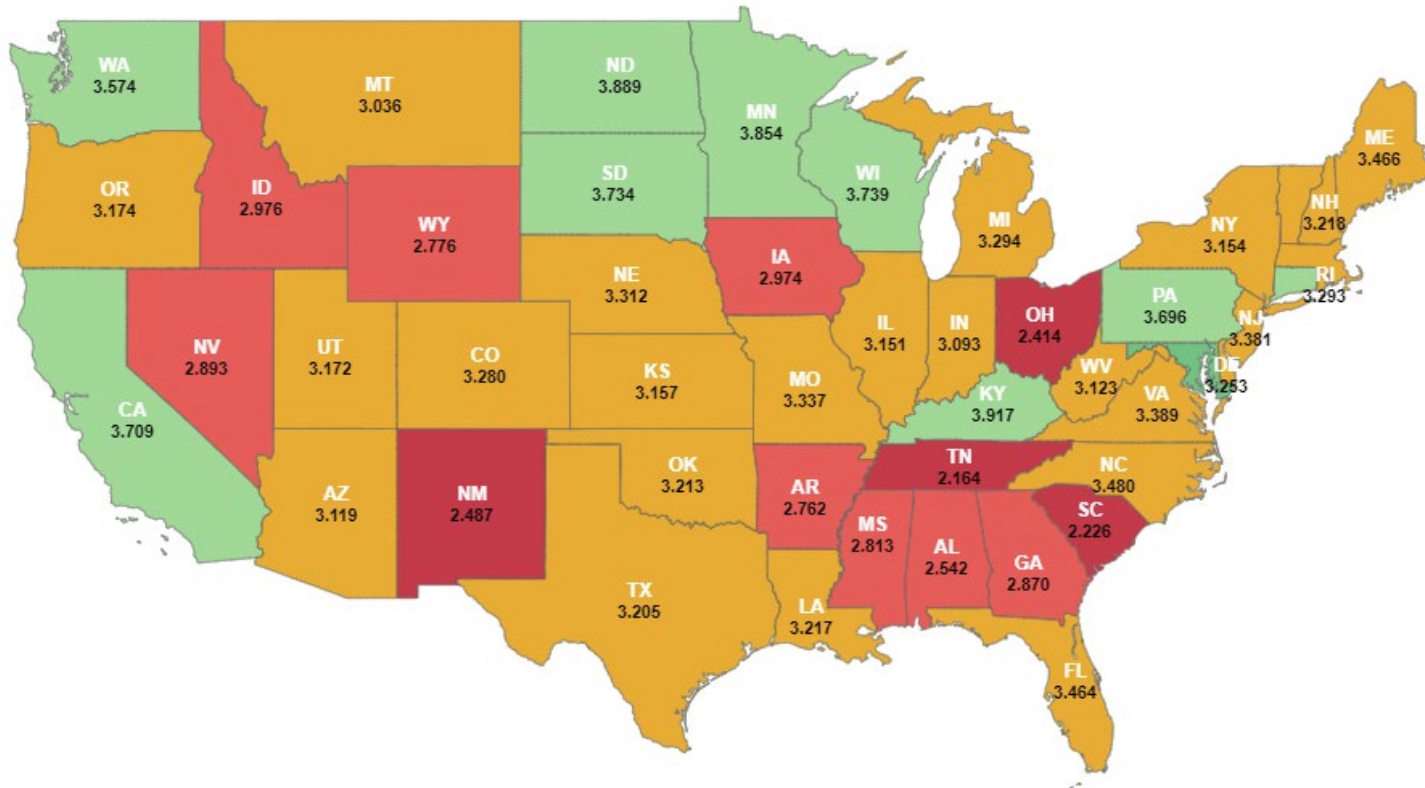
Bottom 10		
State	"Star Rating"	Δ (from '22)
ND*	0.09	(-0.62)
SC	0.77	(-2.37)
AK*	1.54	(-1.25)
WA	1.68	(-2.26)
OH	2.04	(-1.40)
WY*	2.08	(-0.54)
PA	2.11	(-1.42)
AL	2.68	(-0.36)
WI	2.83	(-0.56)
RI	2.86	(-0.62)

Key Takeaways

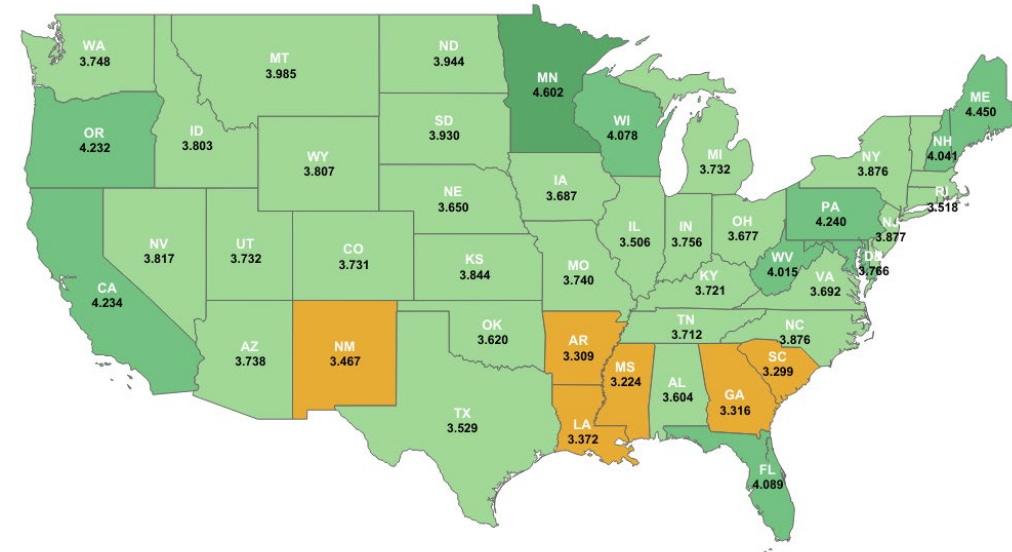
- Pacific Northwest dropped significantly
- Exceptionally wide range of Star Ratings (0.09 to 4.42)
- Many states fewer than 3 stars

Diabetes Adherence

2023



2022



Weighted State Star Ratings



Diabetes Adherence

Top 10 States		
State	"Star Rating"	Δ (from '22)
MD*	4.12	(-0.03)
KY	3.92	0.20
ND	3.89	(-0.05)
MN*	3.85	(-0.75)
WI*	3.74	(-0.34)
SD	3.73	(-0.20)
CA*	3.71	(-0.52)
PA*	3.70	(-0.54)
HI	3.68	(-0.20)
CT	3.62	(-0.33)

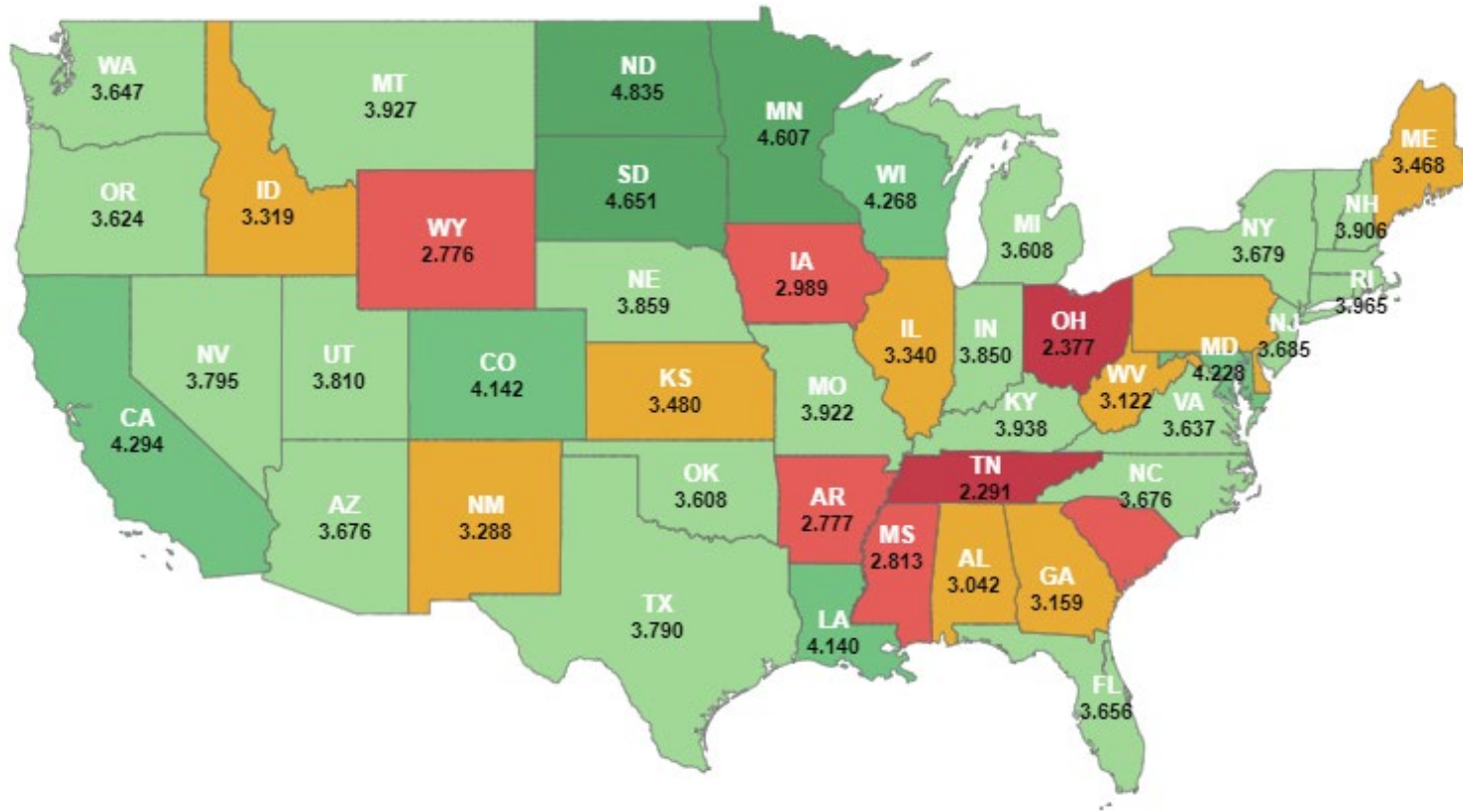
Bottom 10		
State	"Star Rating"	Δ (from '22)
AK	2.05	(-1.95)
TN	2.16	(-1.55)
SC*	2.23	(-1.07)
OH	2.41	(-1.26)
NM*	2.49	(-0.98)
AL*	2.54	(-1.06)
AR*	2.76	(-0.55)
WY	2.78	(-1.03)
MS*	2.81	(-0.41)
GA*	2.87	(-0.45)

Key Takeaways

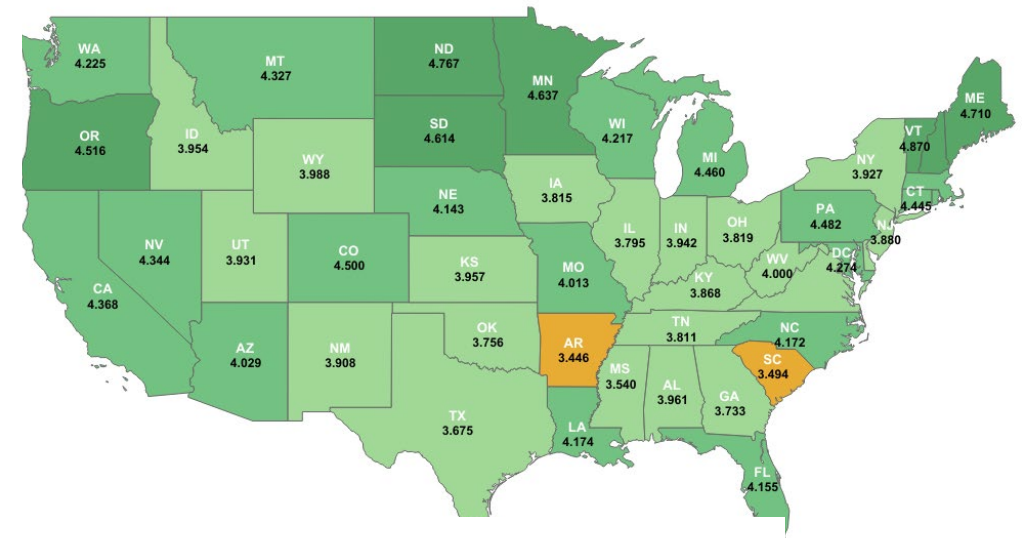
- Trends holding compared to 2022
- Only one state higher than 4 stars

RASA Adherence

2023



2022



Weighted State Star Ratings



RASA Adherence

Top 10 States		
State	"Star Rating"	Δ (from '22)
ND*	4.83	0.07
SD*	4.65	0.04
MN*	4.61	(-0.03)
CA	4.29	(-0.07)
HI	4.27	0.14
WI	4.27	0.05
MD	4.23	(-0.08)
DC	4.17	(-0.10)
CO*	4.14	(-0.36)
LA	4.14	(-0.03)

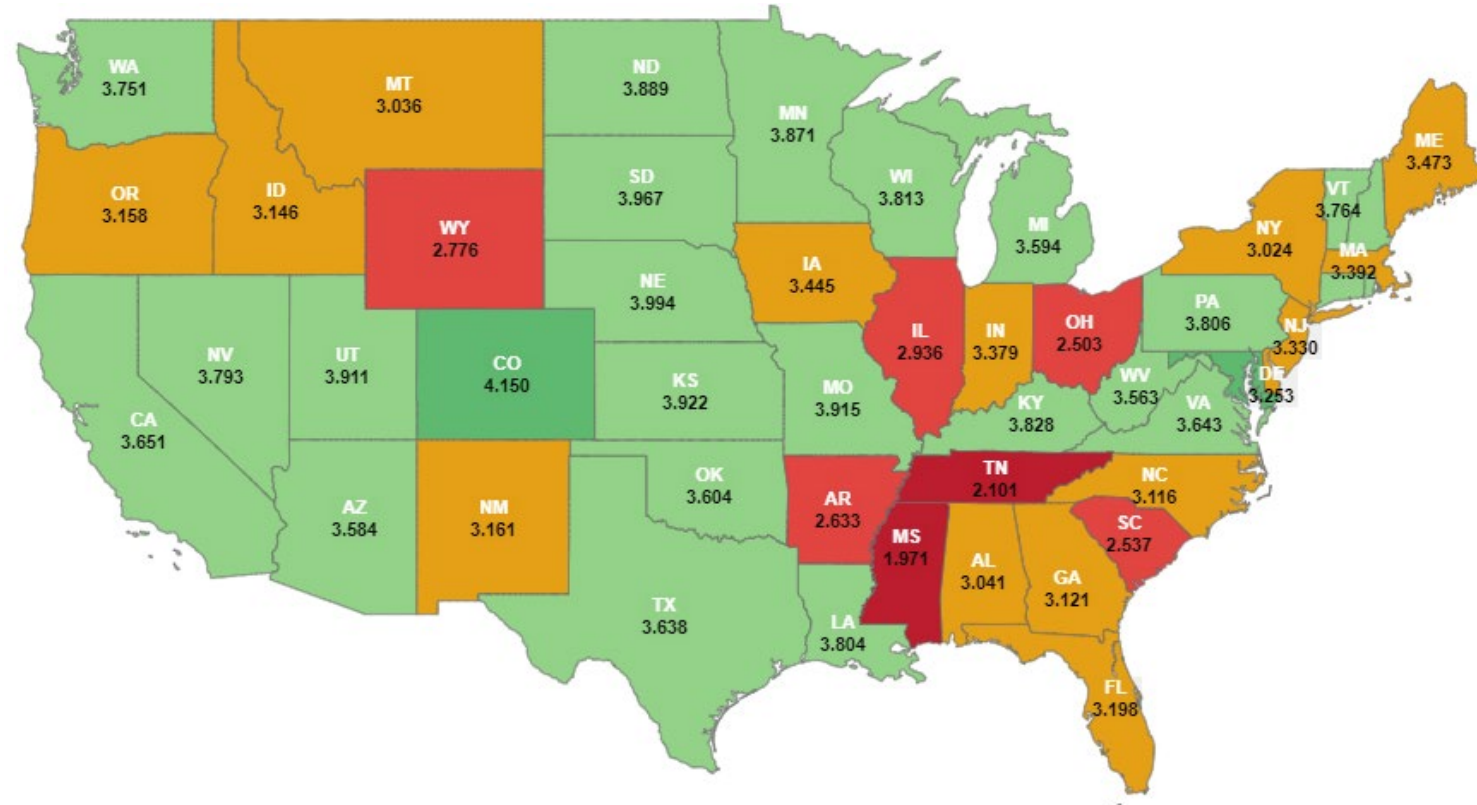
Bottom 10		
State	"Star Rating"	Δ (from '22)
AK	2.05	(-2.11)
TN*	2.29	(-1.52)
OH	2.38	(-1.44)
SC*	2.59	(-0.90)
WY	2.78	(-1.21)
AR*	2.78	(-0.67)
MS*	2.81	(-0.73)
IA*	2.99	(-0.83)
AL	3.04	(-0.92)
WV	3.12	(-0.88)

Key Takeaways

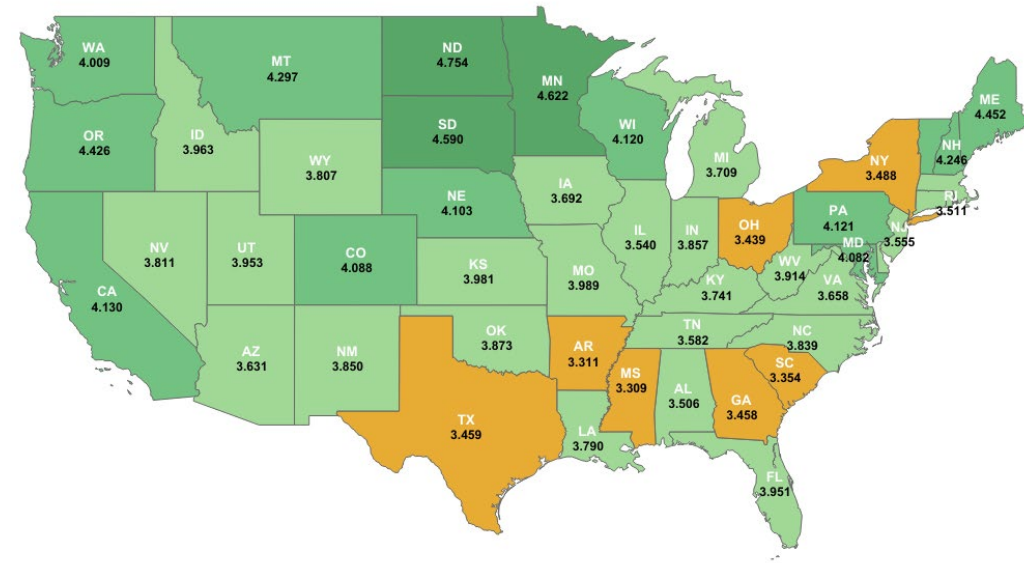
- Highest star ratings among the three core PDC measures
- Some overlap of low performing states with other PDC measures

Statin Adherence

2023



2022



Weighted State Star Ratings



Statin Adherence

Top 10 States		
State	"Star Rating"	Δ (from '22)
MD	4.23	0.15
CO	4.15	0.06
VA	3.64	(-0.01)
NE	3.99	(-0.11)
RI	3.98	0.47
SD*	3.97	(-0.62)
KS	3.92	(-0.06)
MO	3.92	(-0.07)
UT	3.91	(-0.04)
ND*	3.89	(-0.87)

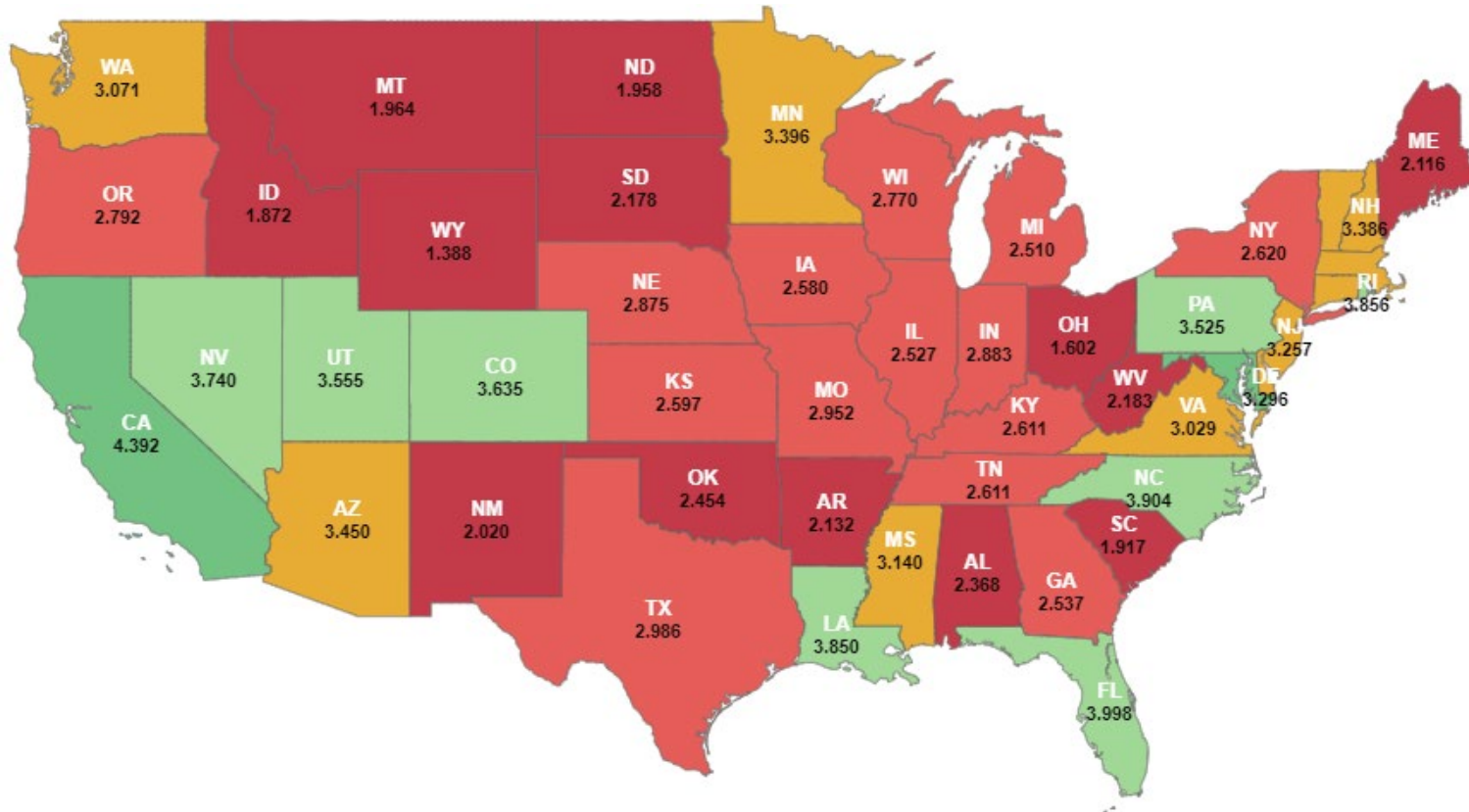
Bottom 10		
State	"Star Rating"	Δ (from '22)
MS*	1.97	(-1.34)
AK	2.05	(-1.69)
TN	2.10	(-1.48)
OH*	2.50	(-0.94)
SC*	2.54	(-0.82)
AR*	2.63	(-0.68)
WY	2.78	(-1.03)
IL*	2.94	(-0.60)
NY*	3.02	(-0.46)
MT	3.04	(-1.26)

Key Takeaways

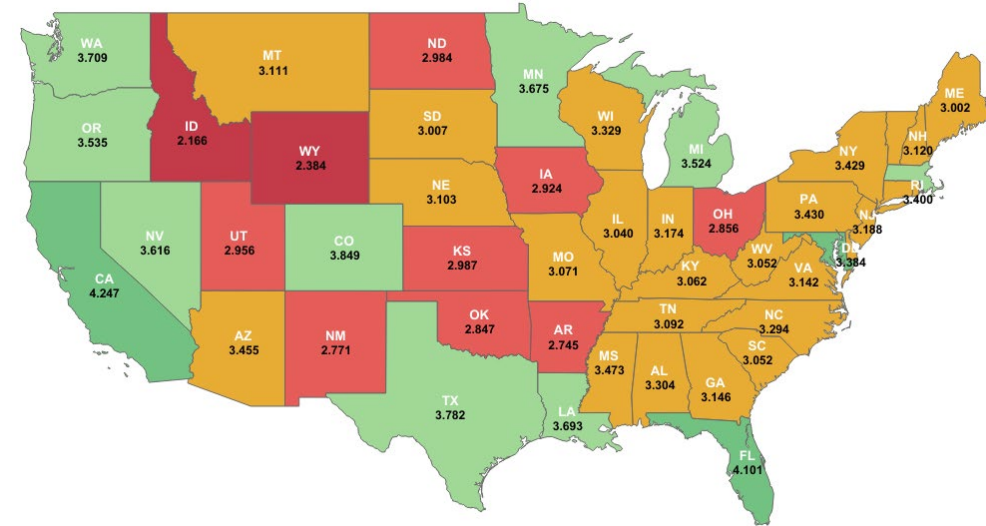
- Higher star ratings than for Diabetes PDC
- Some overlap of low performing states with other PDC measures

Statin Use with Persons with Diabetes

2023



2022



Weighted State Star Ratings



Statin Use with Persons with Diabetes

Top 10 States		
State	"Star Rating"	Δ (from '22)
CA*	4.39	0.15
MD*	4.28	0.28
HI	4.01	0.16
FL*	4.00	(-0.10)
NC	3.90	0.61
RI	3.86	0.46
LA*	3.85	0.16
NV	3.74	0.12
DC*	3.67	0.01
CO*	3.63	(-0.21)

Bottom 10		
State	"Star Rating"	Δ (from '22)
AK	1.02	(-1.99)
WY	1.39	(-1.00)
OH	1.60	(-1.25)
ID	1.87	(-0.29)
SC	1.92	(-1.14)
ND	1.96	(-1.03)
MT	1.96	(-1.15)
NM	2.02	(-0.75)
ME	2.12	(-0.89)
AR	2.13	(-0.61)

Key Takeaways

- Very low Star Ratings across the country
- Some pockets of higher ratings

Key Takeaways

- Some changes in regional performance trends
- States in the top 10 and bottom 10 mostly change year over year
- Overall, lower Star Ratings than for 2022
 - Performance was generally flat
 - Thresholds were increased

Key Takeaways



- *Most Improved* in state performance
- Improved by 20 or more state ranks from 2022 to 2023
 - Flu
 - RASA PDC
 - Diabetes PDC
 - Statin PDC
 - Statins in CVD

Key Takeaways



- *Overall Best Performance* in State Stars
- Top 10 in every measure examined
- #1 in 3 measures
 - Diabetes PDC
 - Statin PDC
 - Statins in CVD

2022

INDUSTRY TREND REPORT

in Pharmacy Quality



 **PQS**
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2022

PQS Industry Trend Report

Available for download at
www.pharmacyquality.com



Trend Report Chapters

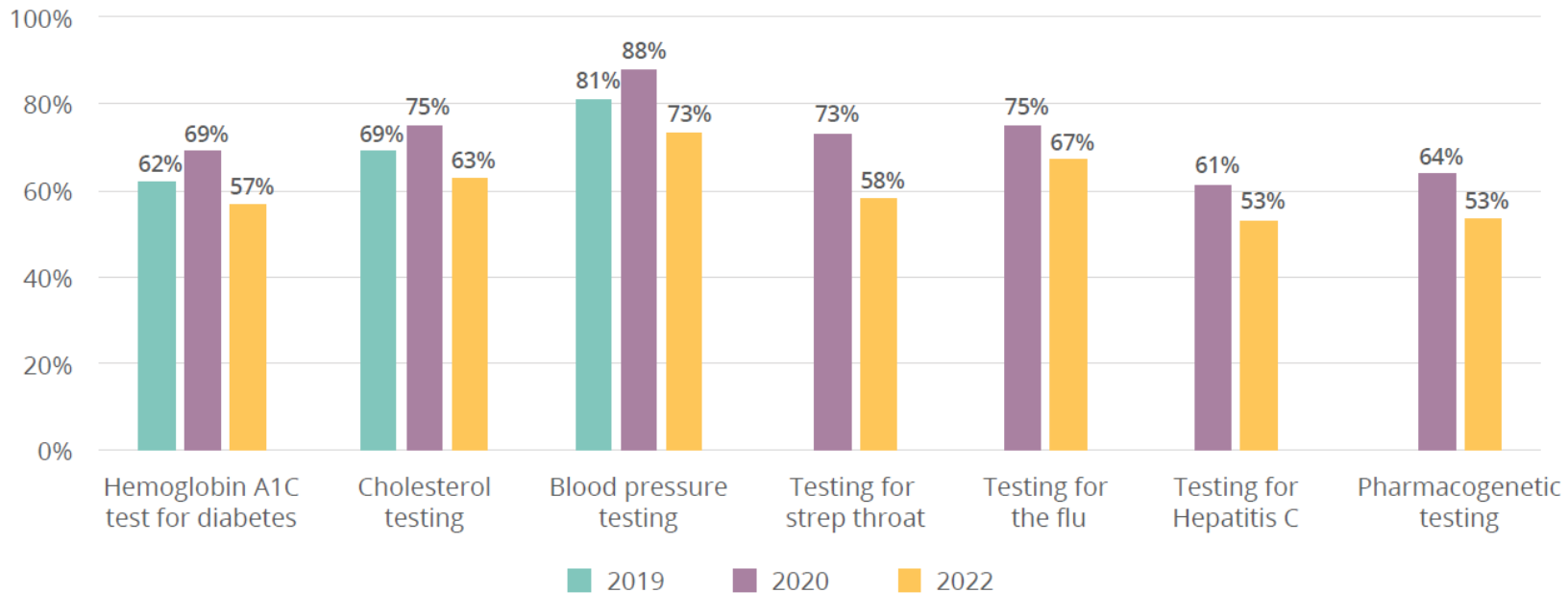
Consumer Survey

**Pharmacy Readiness for
Outcomes-Based
Measurement**

**Payer Challenges and
Opportunities with
Performance Improvement**

Chapter 1: Consumer Survey

LIKELIHOOD OF RECEIVING TESTS FROM PHARMACISTS 2019–2022



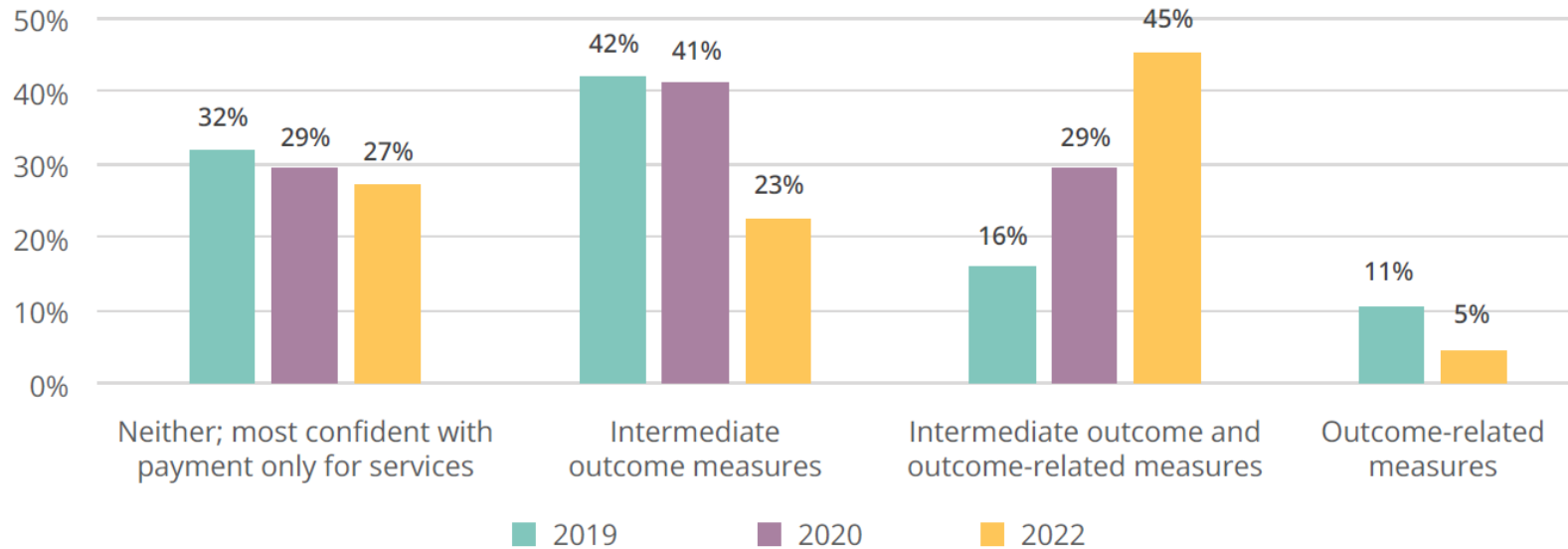
- When asked if they were likely to utilize tests offered in the pharmacy setting, the majority of patients told us they would be likely to receive those tests
- Most likely tests were blood pressure, flu, and cholesterol

Chapter 2: Pharmacy Readiness for Outcomes-Based Measurement



CONFIDENCE IN LINKING PERFORMANCE TO REIMBURSEMENT

If your pharmacy organization were to be held accountable on the basis of quality measures, which option would you feel most confident linking to reimbursement?



Note: 2019 N = 19, 2020 N = 17, 2022 N = 22. Percentages may not sum to 100 due to rounding.

Highlights

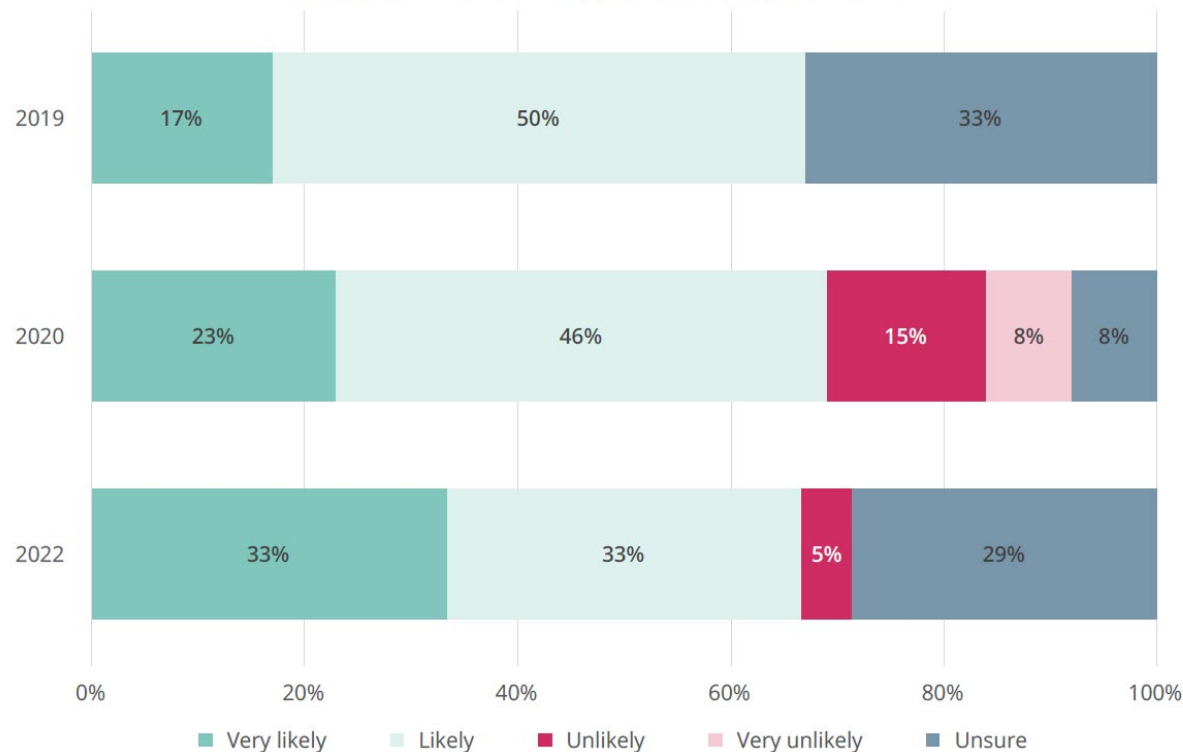
- More than ever, pharmacies are confident linking reimbursement to intermediate and outcome-related measures
- Consistent increase in this option from 2019 to present
- Still a spread across the full spectrum

Chapter 3: Payer Challenges and Opportunities with Performance Improvement



LIKELIHOOD TO CONTRACT WITH COMMUNITY PHARMACIES TO PERFORM APPROVED TESTS OR ASSESSMENTS

If community pharmacies could submit agreed-upon evidence of biometric test results or physical assessment findings for a quality measure in accordance with data source mandates, how likely are you to contract with community pharmacies to perform them?



Note: 2019 N = 12, 2020 N = 13, 2022 N = 21.

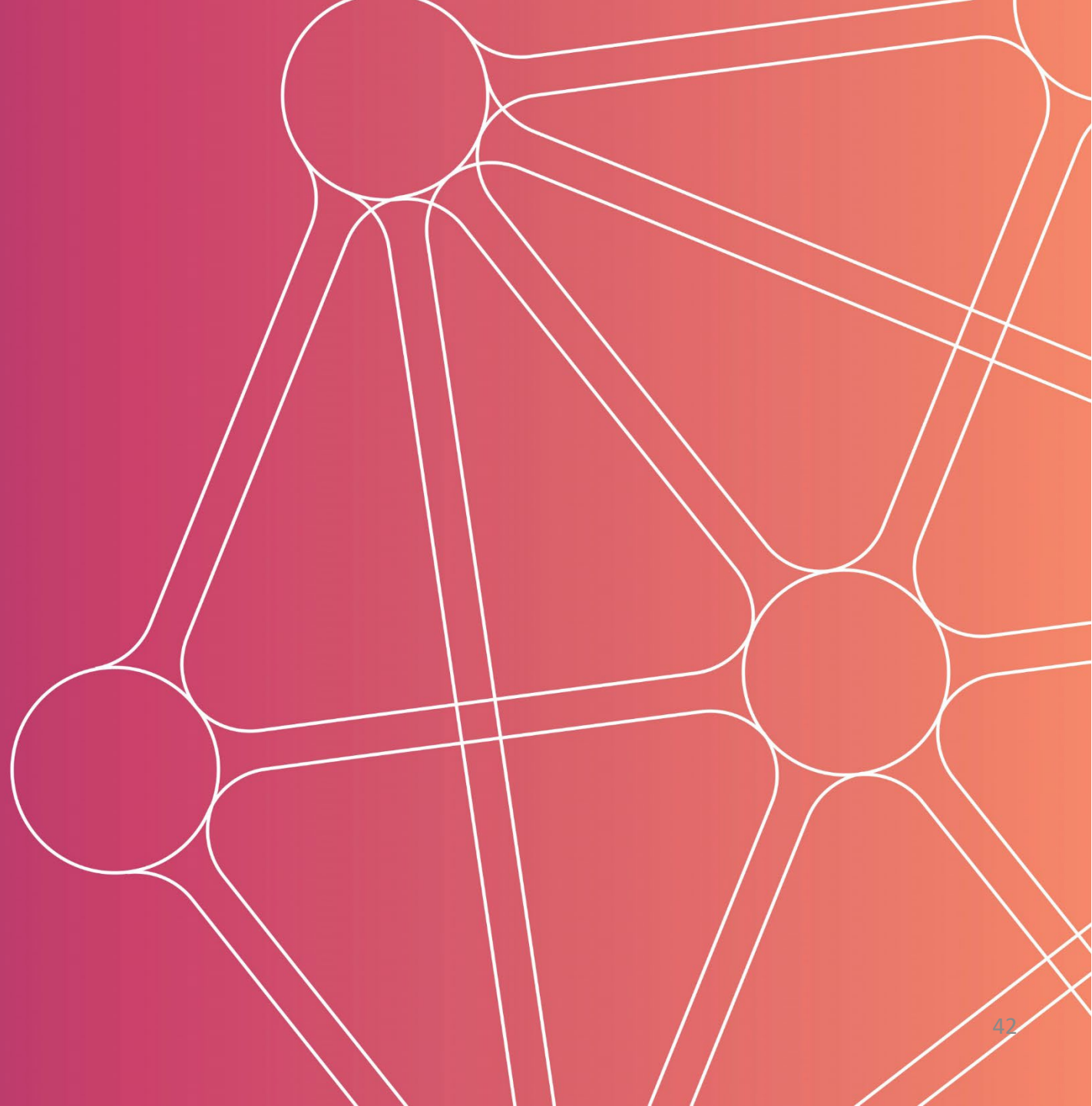
Highlights

- Payers are increasingly 'very likely' to contract with pharmacies to perform testing
- This has increased consistently from 2019 to 2022

We value your input!

- Please contact us with your questions, comments and suggestions at info@pharmacyquality.com
- Specific comments and thoughts regarding the PQS Trend Report should be directed to trendreport@pharmacyquality.com

Thank you!



Questions



Use the "Q&A" feature at the bottom of the screen to send speakers your questions

PQA All-Member Webinar

PQA staff will discuss the measures being considered for endorsement and retirement and will address your questions.

Thursday, December 1, 2022
1-2:30 pm ET

Registration information in the Member Resources Library



We Value Your Feedback



Please provide your feedback in the **survey** that launches at the end of the webinar.



Optimizing Health by Advancing the Quality of Medication Use

Thank You. Join Us Again in January



Next Quality Forum Webinar:

Thursday, January 19, 2023, 1-2 pm ET

*PQA Social Determinants of Health Resource
Guide Second Edition*



Optimizing Health by Advancing the Quality of Medication Use

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