PQA

Optimizing Health by Advancing the Quality of Medication Use

Quality Forum
Medicare 2018 Star Ratings Update

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Objectives

- Describe the CMS 2018 Star Ratings and performance trends associated with medication-related quality measures

- Review top and low performers and trends among Medicare plan sponsors

- Discuss how quality measures are evolving the payment marketplace

- Identify performance improvement strategies for the Star Ratings

- Review changes for CMS display measures

- Discuss newly endorsed PQA measures and measures in the pipeline

Importance of Star Ratings – For Plans
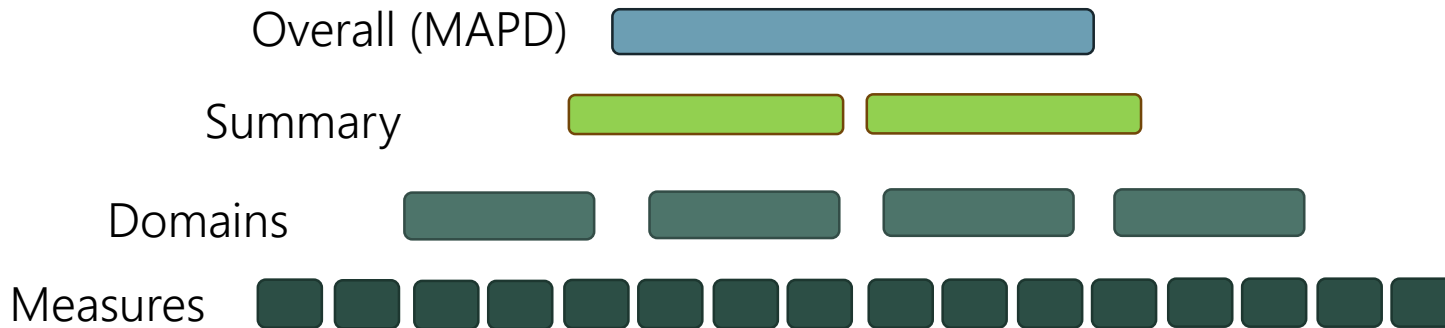
MA-PD Plans

- **Additional revenue in the form of quality bonus payments provided to top performing plans**
  - ✓ Revenue used to support initiatives and to keep member premiums low
  - ✓ Bonus payments necessary to maintain competitive stance in marketplace
- **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 are not eligible to receive quality bonus payments**

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Medicare Star Ratings

- **Annual ratings of Medicare plans that are made available on Medicare Plan Finder and CMS website (began in 2008)**
  - **2 year data lag; 2018 Ratings represent 2016 CY performance**
- **Ratings are displayed as 1 to 5 stars**
- **Stars are calculated for each measure, as well as each domain, summary, and overall (applies to MA-PDs) level**

Overall (MAPD)

Summary

Domains

Measures

[In 2018 - 34 Part C; 14 Part D]

Ratings of all Medicare plans can be found at:

http://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovGenIn/PerformanceData.html

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Part D Stars

- Medicare drug plans receive a summary rating on quality as well as four domains, and individual measures (14 individual measures)

- Four measures are from PQA (2018):

- 1 measure of "Clinical Care"
  - CMR Completion Rate [was new in 2016]

- 3 measures of medication adherence
  - Non-insulin diabetes medications
  - Cholesterol medication (statins)
  - Blood pressure (renin-angiotensin system antagonists)

Due to the higher weighting, the PQA measures account for 36% of Part D summary ratings for 2018

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2018 Part D Measure Weighting

| Measure ID	Measure Name	Part D Summary	MA-PD Overall
D01	Call Center – Foreign Language Interpreter and TTY Availability	1.5	1.5
D02	Appeals Auto–Forward	1.5	1.5
D03	Appeals Upheld	1.5	1.5
D04	Complaints about the Drug Plan	1.5	1.5
D05	Members Choosing to Leave the Plan	1.5	1.5
D06	Beneficiary Access and Performance Problems	1.5	1.5
D07	Drug Plan Quality Improvement	5	5
D08	Rating of Drug Plan	1.5	1.5
D09	Getting Needed Prescription Drugs	1.5	1.5
D10	MPF Price Accuracy	1	1
D11	Medication Adherence for Diabetes Medications	3	3
D12	Medication Adherence for Hypertension (RAS antagonists)	3	3
D13	Medication Adherence for Cholesterol (Statins)	3	3
D14	MTM Program Completion Rate for CMR	1	1

2018 Part D Measures Used in Improvement Measure

Measure ID	Measure Name	Measure Usage	Correlation
D01	Call Center – Foreign Language Interpreter and TTY Availability	Included	0.528235
D02	Appeals Auto–Forward	Included	0.251229
D03	Appeals Upheld	Included	0.434947
D04	Complaints about the Drug Plan	Included	0.818964
D05	Members Choosing to Leave the Plan	Included	0.735636
D06	Beneficiary Access and Performance Problems	Not Included	-
D07	Drug Plan Quality Improvement	Not Included	-
D08	Rating of Drug Plan	Included	0.802165
D09	Getting Needed Prescription Drugs	Included	0.67983
D10	MPF Price Accuracy	Not Included	-
D11	Medication Adherence for Diabetes Medications	Included	0.837213
D12	Medication Adherence for Hypertension (RAS antagonists)	Included	0.873421
D13	Medication Adherence for Cholesterol (Statins)	Included	0.913449
D14	MTM Program Completion Rate for CMR	Included	0.571178

2017

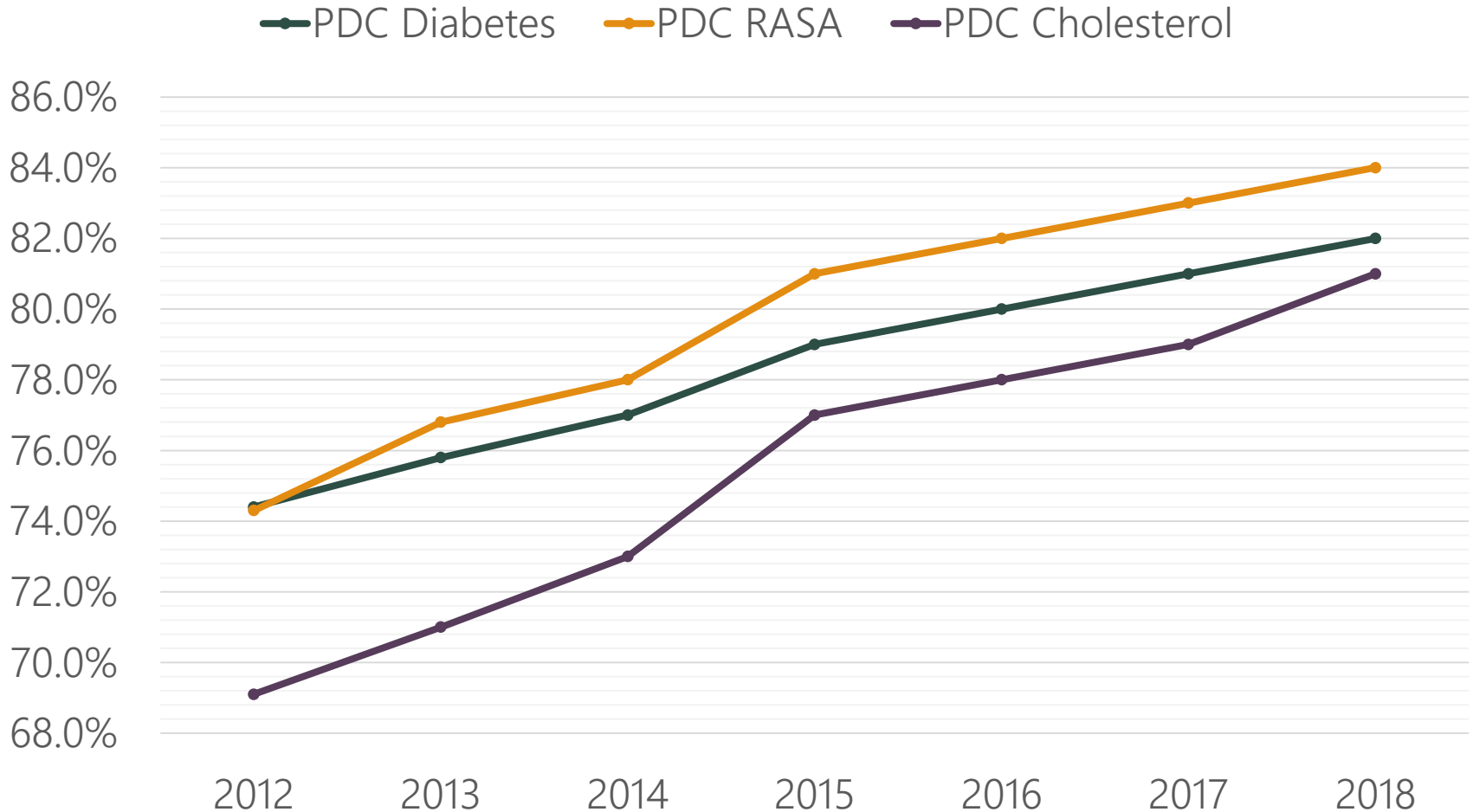| |
|---|
| 0.862311 |
| 0.868757 |
| 0.920025 |
| 0.719847 |
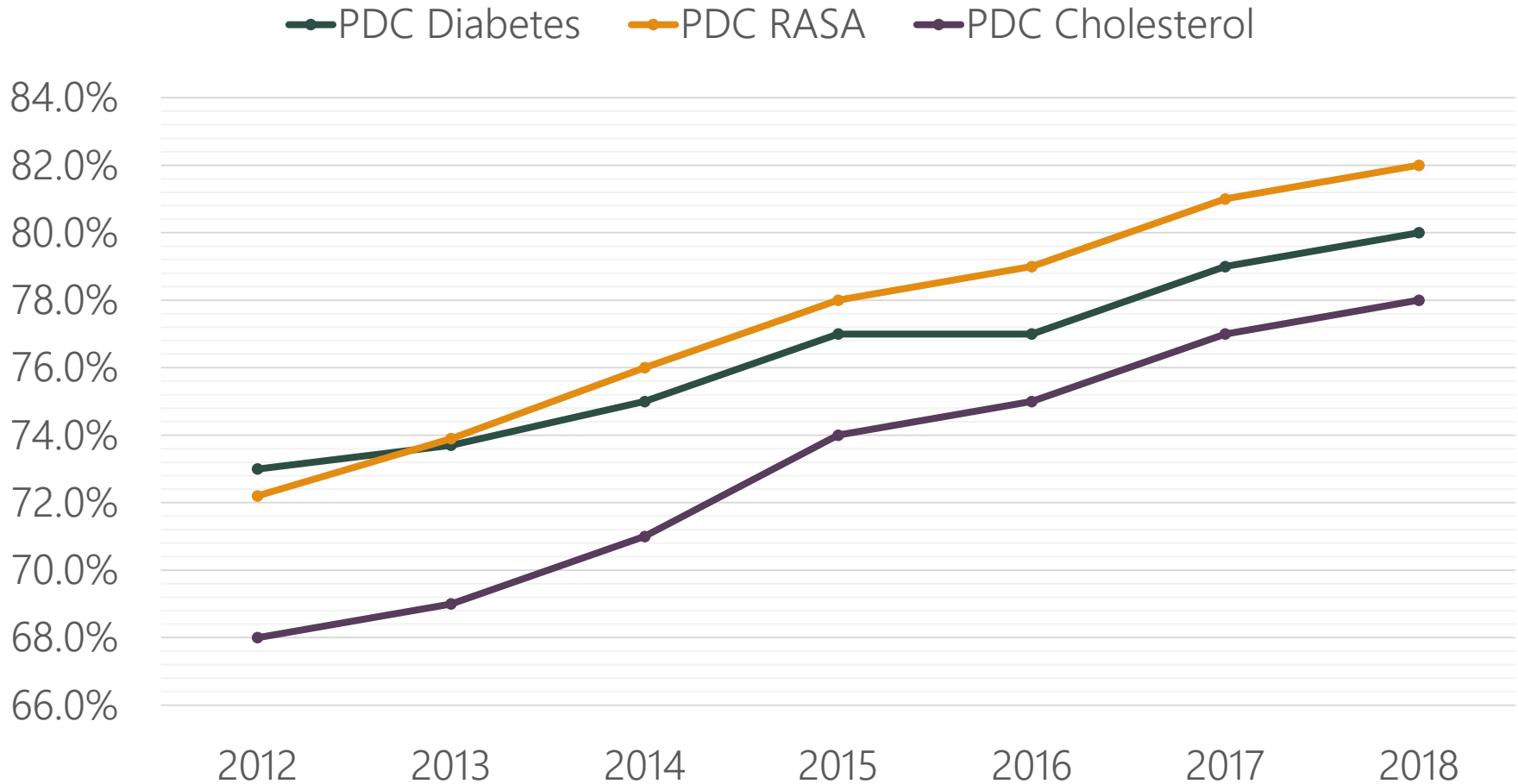
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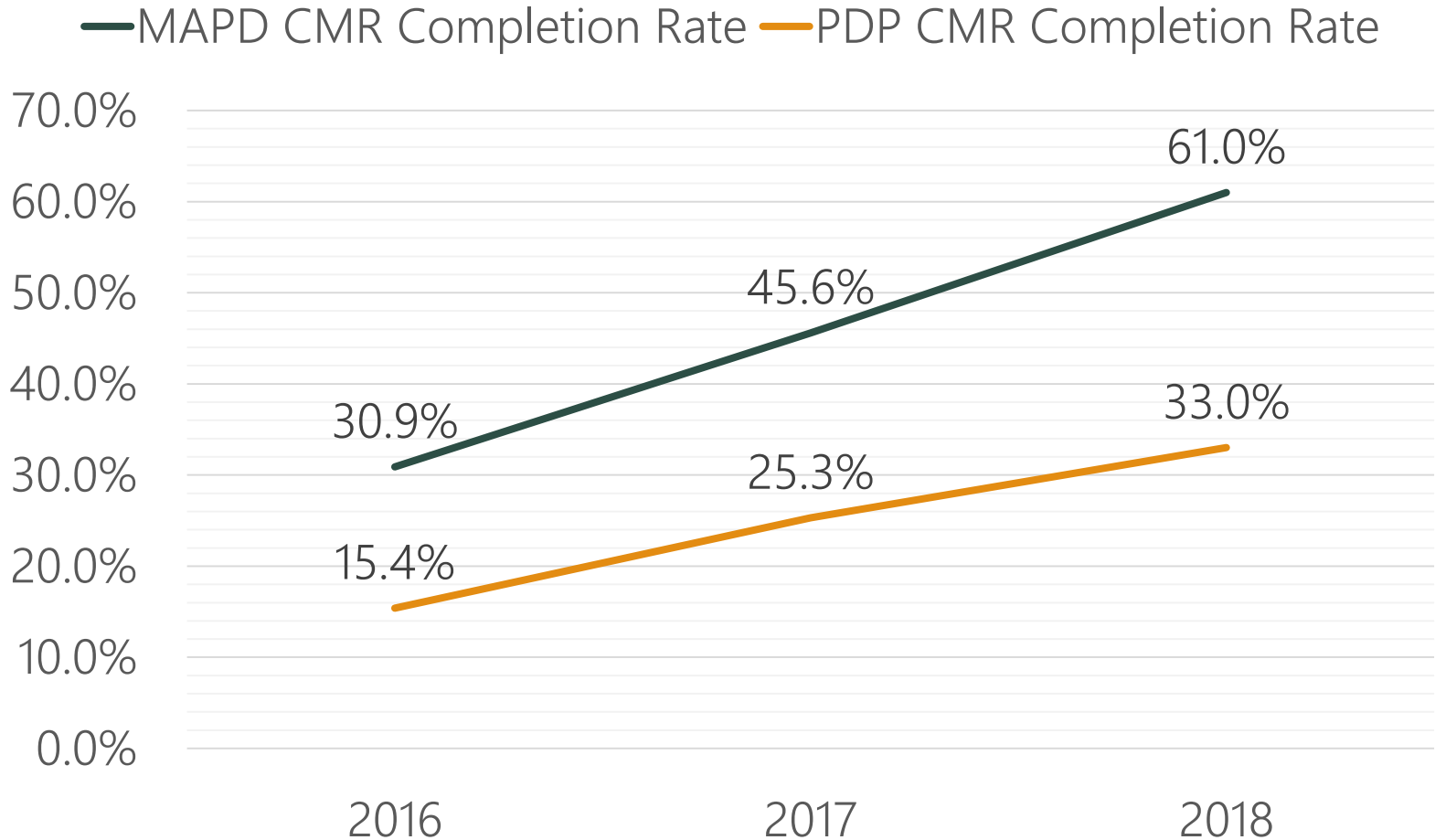
MAPD Adherence Measure Averages

Centers for Medicare & Medicaid Services. Analysis from Medicare Part C and D Star Rating Technical Notes 2012-2018.

PDP Adherence Measure Averages

Centers for Medicare & Medicaid Services. Analysis from Medicare Part C and D Star Rating Technical Notes 2012-2018.
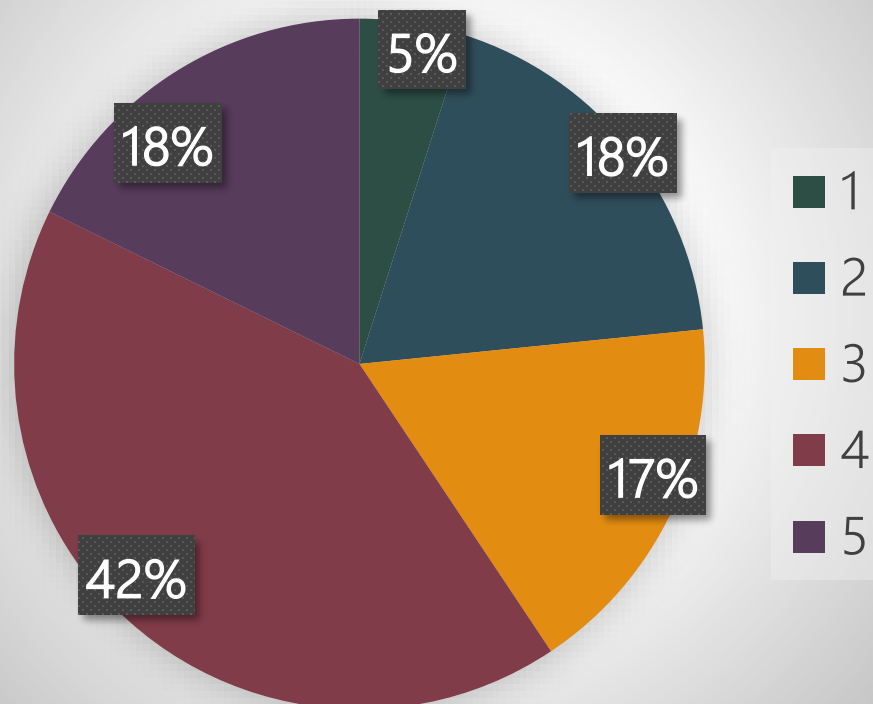
CMR Completion Rate Measure Averages

Centers for Medicare & Medicaid Services. Analysis from Medicare Part C and D Star Rating Technical Notes 2016-2018.
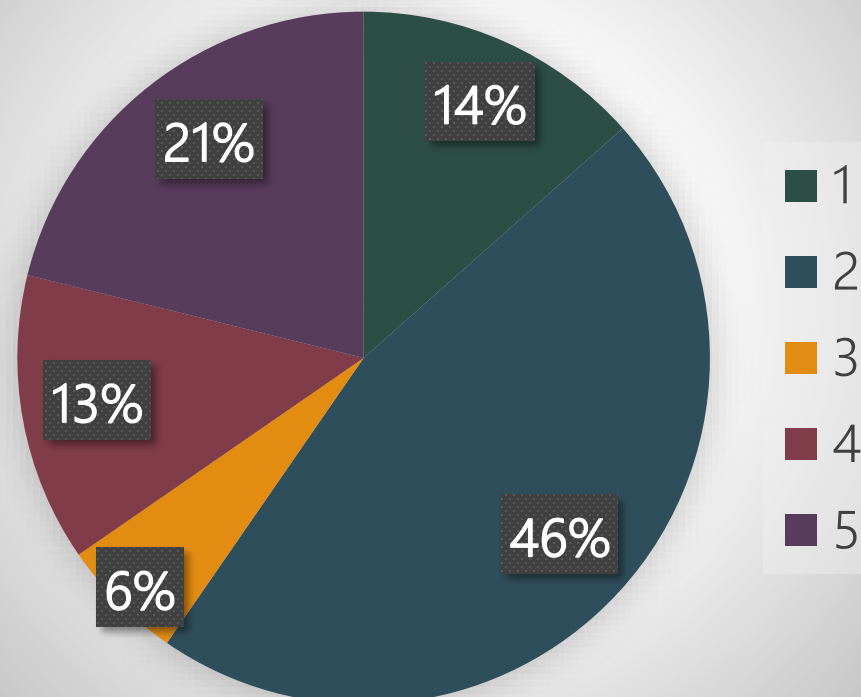
Distribution of Stars – CMR Comp. Rate

MAPD - % of Contracts*

- 1
- 2
- 3
- 4
- 5

*406 Contracts

156 with no data, not enough, not req. to report, or too new.

PDP - % of Contracts*

- 1
- 2
- 3
- 4
- 5

*52 Contracts

8 with no data, not enough, not req., or too new.

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Changes in 4- & 5-Star Rating Thresholds from '17-'18

MAPD						
Measure Name	2017 5 Star	2018 5 Star	Change	2017 4 Star	2018 4 Star	Change
PDC Diabetes	83.00%	86.00%	3.00%	79.00%	81.00%	2.00%
PDC Hypertension	83.00%	85.00%	2.00%	79.00%	82.00%	3.00%
PDC Cholesterol	82.00%	85.00%	3.00%	77.00%	80.00%	3.00%
CMR Completion Rate	76.80%	75.00%	-1.80%	58.10%	59.00%	0.90%

Centers for Medicare & Medicaid Services. Analysis from Medicare Part C and D Star Rating Technical Notes 2017-2018.

Changes in 4- & 5-Star Rating Thresholds from '17-'18

PDP						
Measure Name	**2017 5 Star**	**2018 5 Star**	**Change**	**2017 4 Star**	**2018 4 Star**	**Change**
PDC Diabetes	**86.00%**	**86.00%**	0.00%	**82.00%**	**84.00%**	2.00%
PDC Hypertension	**85.00%**	**89.00%**	4.00%	**83.00%**	**86.00%**	3.00%
PDC Cholesterol	**84.00%**	**86.00%**	2.00%	**80.00%**	**82.00%**	2.00%
CMR Completion Rate	**51.60%**	**53.00%**	1.40%	**33.90%**	**39.00%**	5.10%

Centers for Medicare & Medicaid Services. Analysis from Medicare Part C and D Star Rating Technical Notes 2017-2018.

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CMR Completion Rate – Thresholds & Averages

MAPD - 2018					
Measure Name	**1 Star**	**2 Star**	**3 Star**	**4 Star**	**5 Star**
CMR Completion Rate	<33%	33%	51%	59%	75%

PDP - 2018					
Measure Name	**1 Star**	**2 Star**	**3 Star**	**4 Star**	**5 Star**
CMR Completion Rate	<17%	17%	31%	39%	53%

National Averages

| 2018	2017
MAPD: 61% *3.5 stars* PDP: 33% *2.8 stars*	MAPD: 45.6% *2.4 stars* PDP: 25.3% *2.8 stars*

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Distribution of Overall Star Ratings - MAPD

Overall Rating	2017 Number of Contracts	2017 %	2017 Weighted By Enrollment	2018 Number of Contracts	2018 %	2018 Weighted By Enrollment
5 stars	14	3.86	9.81	15	3.91	11.17
4.5 stars	70	19.28	24.45	57	14.84	22.47
4 stars	96	26.45	34.90	98	25.52	39.24
3.5 stars	109	30.03	22.06	139	36.2	22.45
3 stars	65	17.91	8.17	61	15.89	4.20
2.5 stars	9	2.48	0.62	12	3.13	0.46
2 stars	0	0.00	0.00	2	0.52	0.02
Total Number of Rated Contracts	➡ 363			➡ 384		
Average Star Rating*	4.02			4.06		

The average Star Rating is weighted by enrollment.

Centers for Medicare & Medicaid Services. 2018 Star Ratings Fact Sheet

Distribution of Overall Star Ratings – PDP

Part D Rating	2017 Number of Contracts	2017 %	2017 Weighted By Enrollment	2018 Number of Contracts	2018 %	2018 Weighted By Enrollment
5 stars	6	10.91	2.28	7	12.96	2.03
4.5 stars	8	14.55	0.65	5	9.26	0.28
4 stars	13	23.64	37.74	16	29.63	45.03
3.5 stars	16	29.09	25.55	17	31.48	36.39
3 stars	9	16.36	31.84	5	9.26	8.00
2.5 stars	3	5.45	1.94	2	3.70	4.60
2 stars	0	0.00	0.00	2	3.70	3.66
1.5 stars	0	0.00	0.00	0	0.00	0.00
Total Number of Rated Contracts	➡ 55			➡ 54		
Average Star Rating*	3.55			3.62		

*The average Star Rating is weighted by enrollment.

Centers for Medicare & Medicaid Services. 2018 Star Ratings Fact Sheet
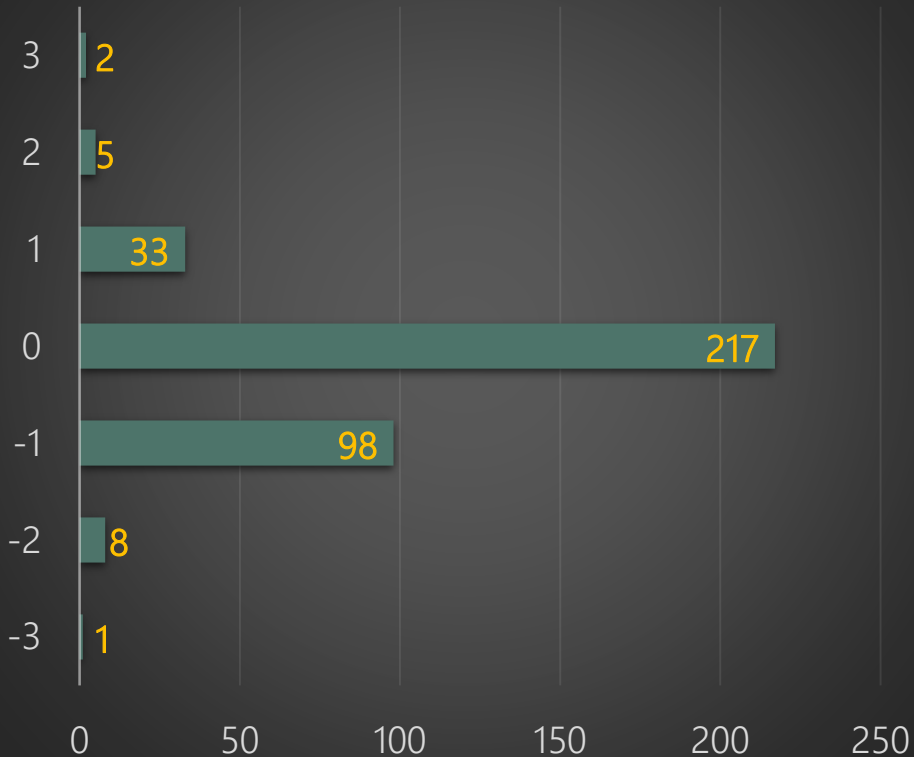
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Measure-Level Star Ratings Changes from 2017-2018

Only contracts with reported stars for both the 2017 and 2018 Star Ratings were compared from year to year.
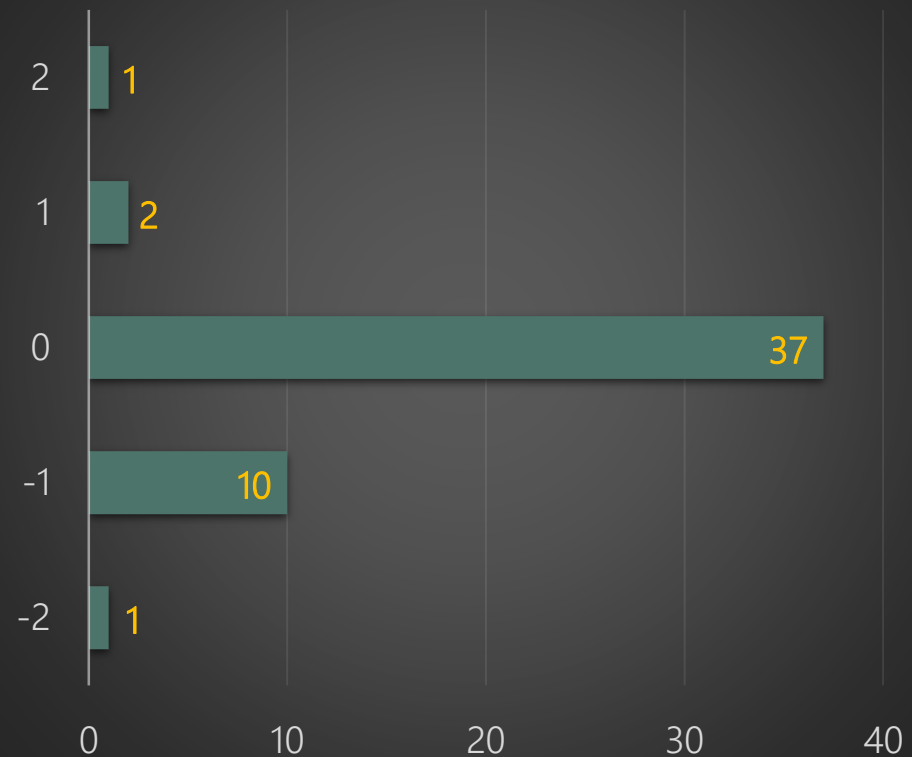
Part D Measure Analysis

MAPD – PDC Diabetes

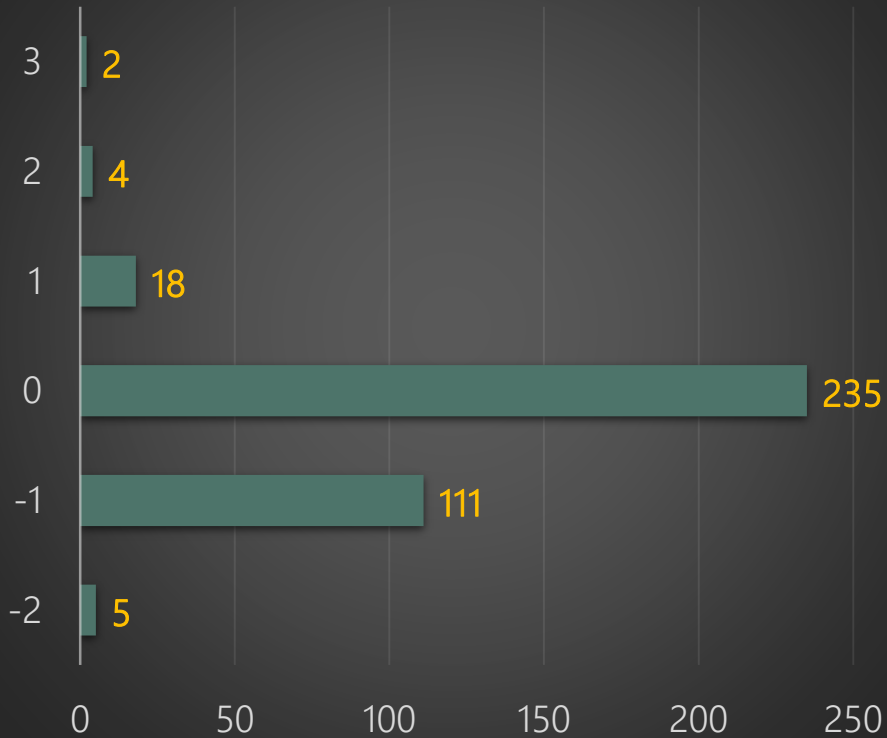| Value	Count
3	2
2	5
1	33
0	217
-1	98
-2	8
-3	1

*364 Contracts Compared Year to Year

PDP – PDC Diabetes

Value	Count
2	1
1	2
0	37
-1	10
-2	1

*51 Contracts Compared Year to Year
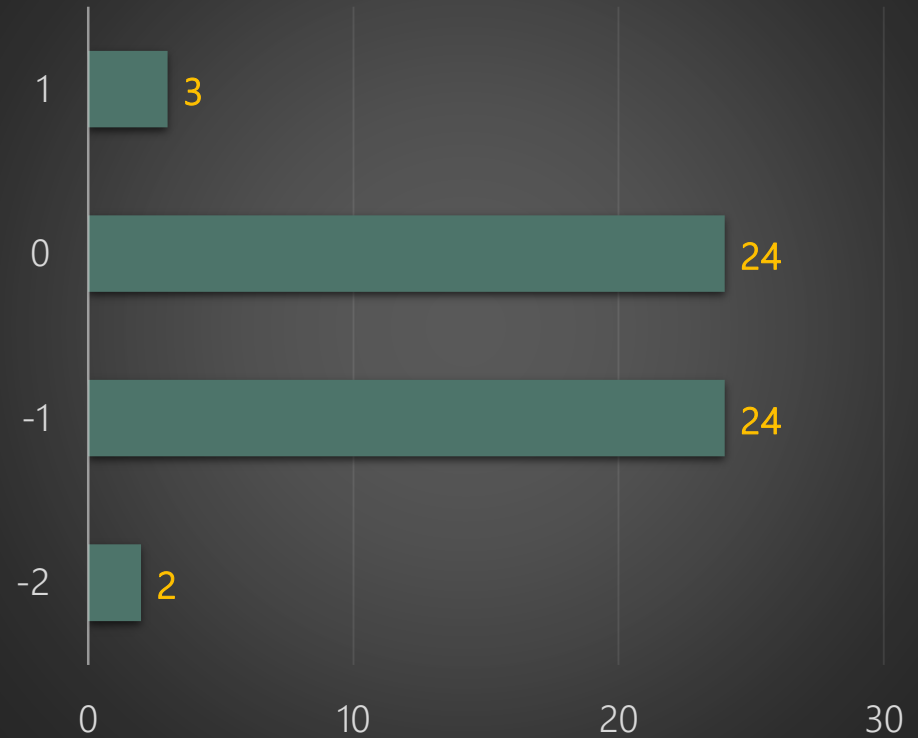
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Part D Measure Analysis

MAPD - PDC RASA

*375 Contracts Compared Year to Year

PDP - PDC RASA

*53 Contracts Compared Year to Year

Part D Measure Analysis

MAPD - PDC Statins

Value	Count
3	1
2	1
1	23
0	247
-1	101
-2	4
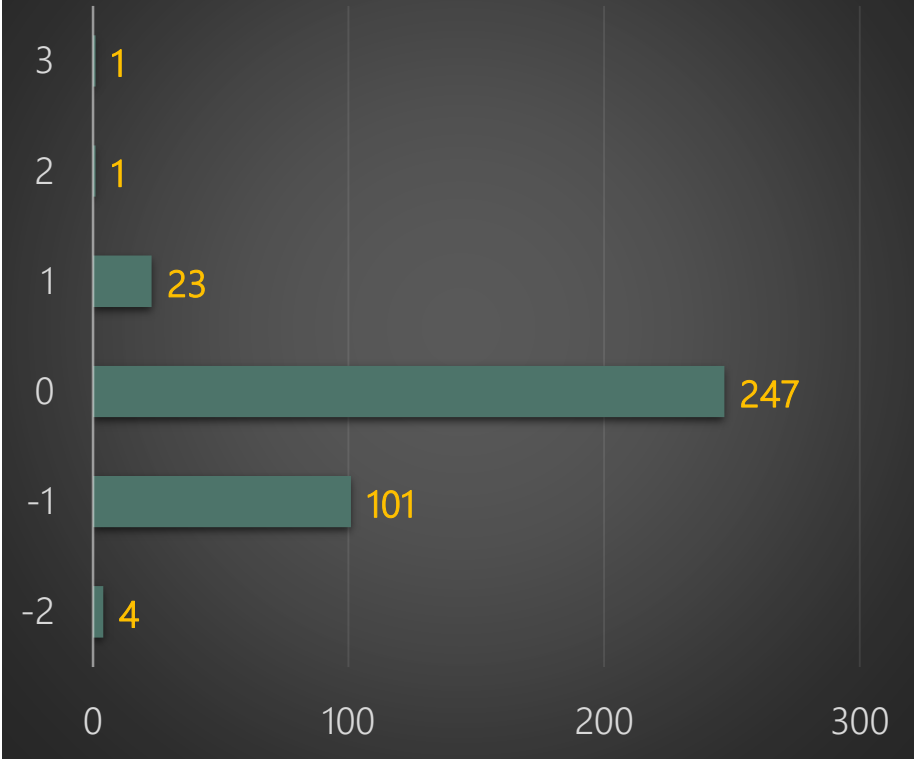
*377 Contracts Compared Year to Year

PDP - PDC Statins

Value	Count
1	2
0	35
-1	14
-2	1
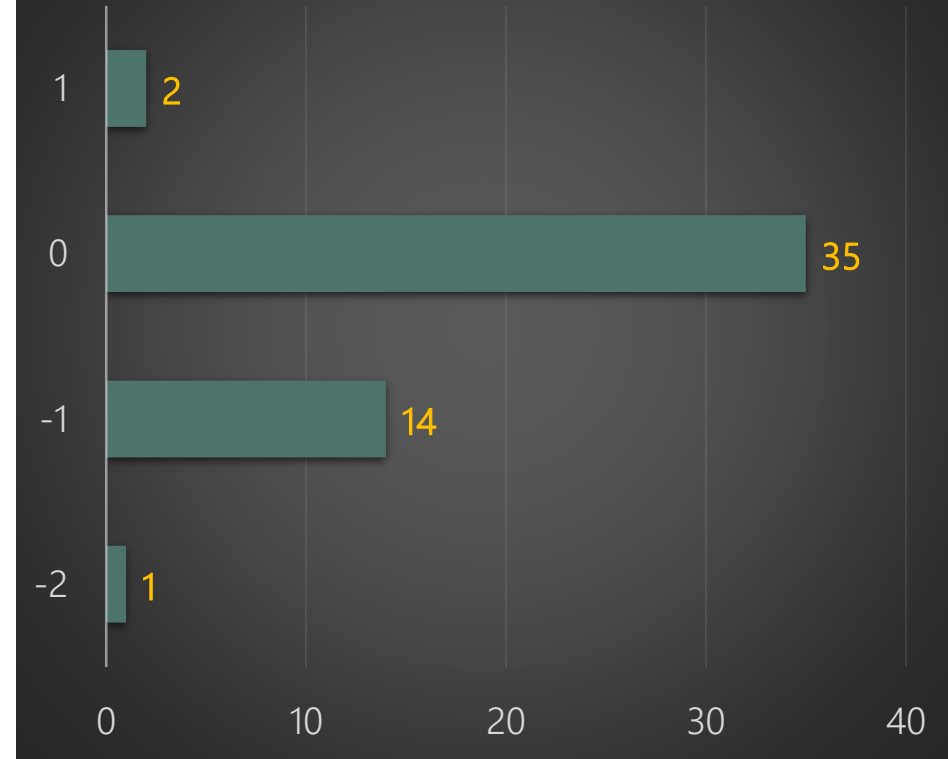
*52 Contracts Compared Year to Year

Part D Measure Analysis

MAPD - CMR Comp. Rate
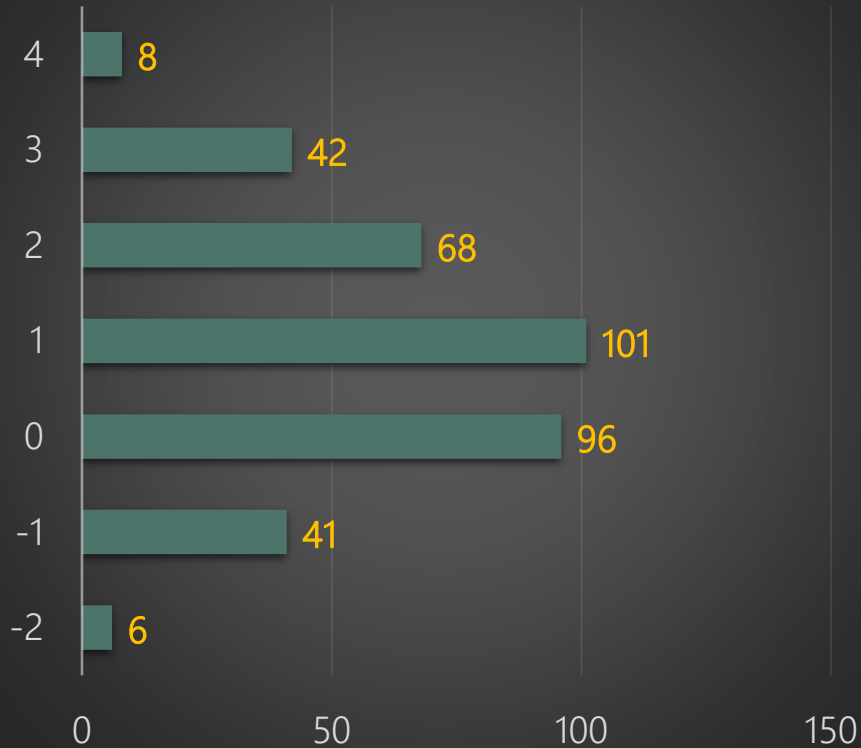
Value	Count
4	8
3	42
2	68
1	101
0	96
-1	41
-2	6

*362 Contracts Compared Year to Year

PDP - CMR Comp. Rate

Value	Count
4	1
2	4
1	10
0	17
-1	15
-2	4

*51 Contracts Compared Year to Year

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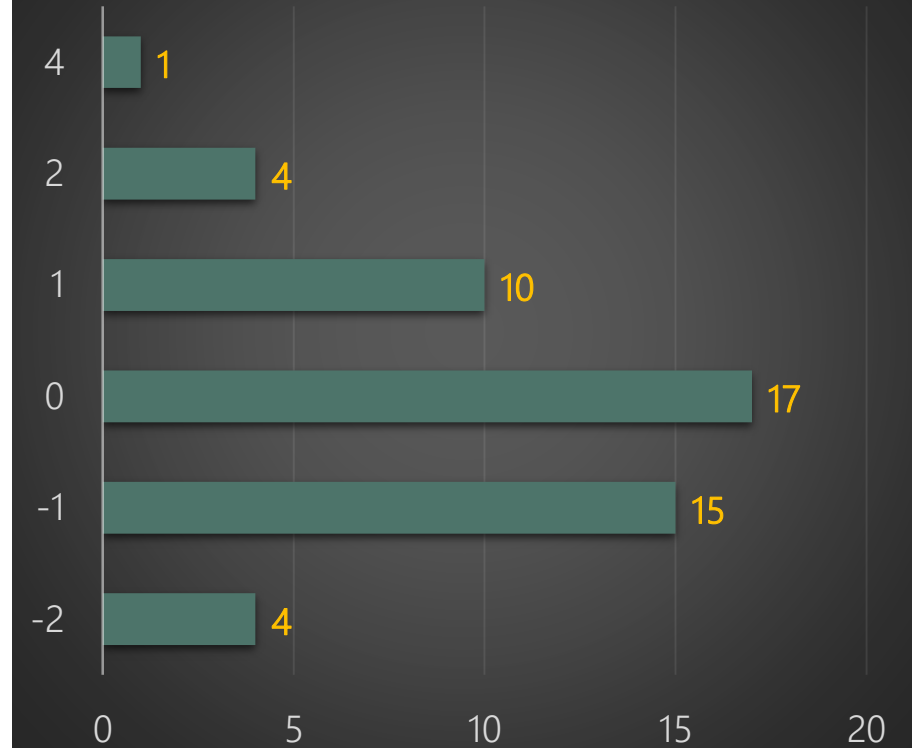
High Performer Icon - 2018

MAPD

Contract	Contract Name	Enrolled 10/2017	5 Star Last Year
H0332	Ks Plan Administrators, Llc	31,481	Yes
H0524	Kaiser Foundation Hp, Inc.	1,137,797	Yes
H0630	Kaiser Foundation Hp Of Co	108,915	Yes
H1230	Kaiser Foundation Hp, Inc.	31,427	No
H2150*	Kaiser Fndn Hp Of The Mid-Atlantic Sts	73,415	Yes
H2256	Tufts Associated HMO	101,005	Yes
H2461	Blue Cross And Blue Shield Of Minnesota	251,069	No
H5042	Cdphp Universal Benefits, Inc.	3,954	Yes
H5262	Gundersen Health Plan	14,827	Yes
H5431	Healthsun Health Plans, Inc.	39,534	No
H5594	Optimum Healthcare, Inc.	53,203	Yes
H7728	Anthem Health Plans Of New Hampshire, Inc.	2,003	No
H9003	Kaiser Foundation Hp Of The NW	89,048	Yes
H9047	Providence Health Assurance	52,895	No
H9096	Dean Health Plan, Inc.	2,517	No

PDP

Contract	Contract Name	5 Star Last Year
S0655	Tufts Insurance Company	Yes
S1822	HealthPartners, Inc.	No
S2893	Anthem Insurance Co. & Bcbsma & Bcbsri & Bcbsvt	Yes
S3521	Excellus Health Plan, Inc.	Yes
S4219	Health Alliance Medical Plans	No
S5743	Wellmark Ia & Sd, & Bcbs Mn, Mt, Ne, Nd,& Wy	Yes
S9701	Dean Health Insurance, Inc.	Yes

MA - Only

Contract	Contract Name	5 Star Last Year
H5256	Medical Associates Clinic Health Plan	No

2017 – 14 MAPD contracts were 5 star (6 first time). 6 PDP were 5 Star (5 first time)

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Low Performer Icon - 2018

- Medicare contracts may receive a low-performer icon if the contract received less than 3 stars for 3 years in a row on either Part C or Part D summary ratings

- Since CMS began displaying the Low-Performer Icon on Medicare Plan Finder, 2018 represents the first year where no contracts will receive the LPI.
  - Note 2 contracts were terminated for 2017 based upon the LPI status
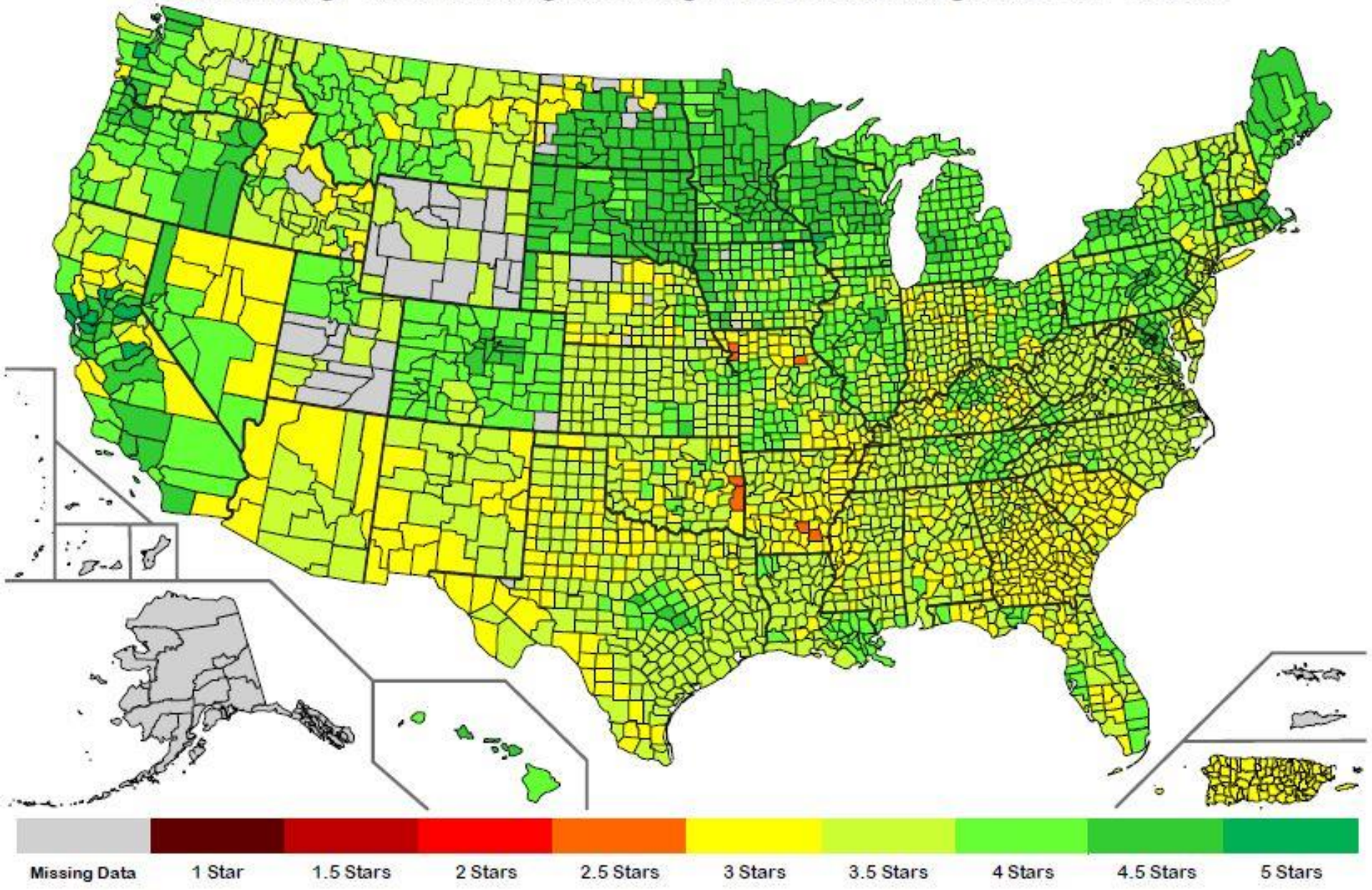
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MAPD Star Ratings Based Upon Length of Time in Program

2018 Overall Rating	Count Less than 5 years	% Less than 5 years	Count 5 years to less than 10 years	% 5 years to less than 10 years	Count Greater than 10 years	% Greater than 10 years
5 stars	2	2.17	2	2.86	11	4.95
4.5 stars	5	5.43	5	7.14	47	21.17
4 stars	10	10.87	19	27.14	69	31.08
3.5 stars	41	44.57	28	40.00	70	31.53
3 stars	23	25.00	14	20.00	24	10.81
2.5 stars	9	9.78	2	2.86	1	0.45
2 stars	2	2.17	0	0.00	0	0.00
1.5 stars	0	0.00	0	0.00	0	0.00
1 star	0	0.00	0	0.00	0	0.00
Total Number of Rated Contracts	92		70		222	

2018 Star Ratings - Enrollment Weighted Average MA-PD Overall Rating in Non-EGHP Counties
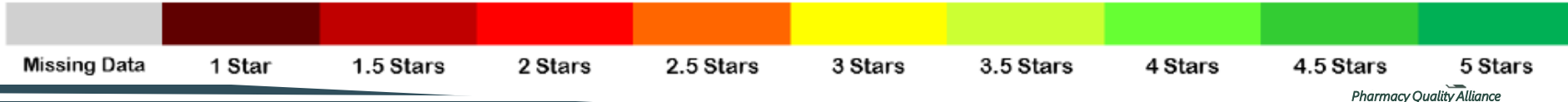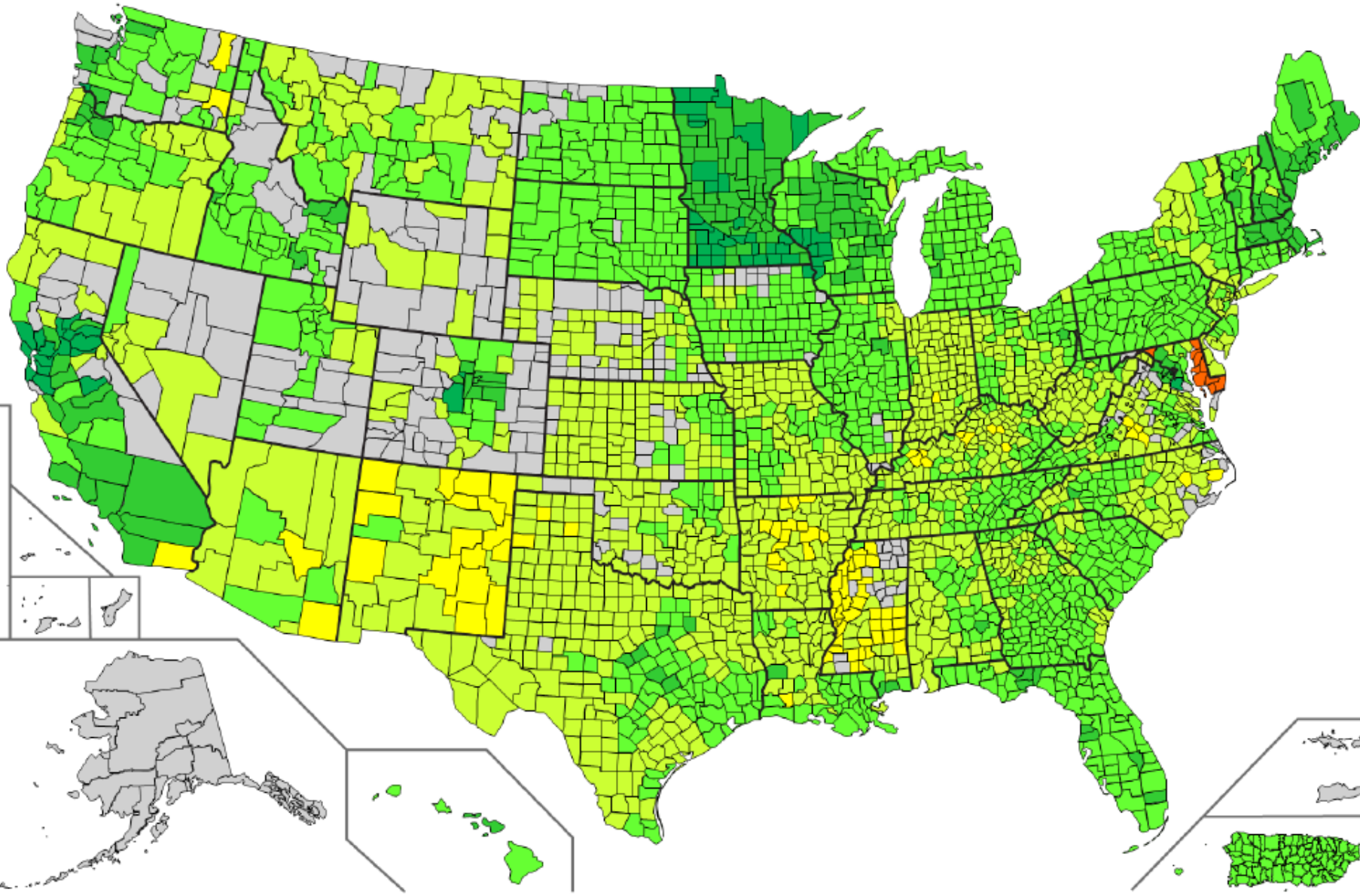
Legend: Missing Data | 1 Star | 1.5 Stars | 2 Stars | 2.5 Stars | 3 Stars | 3.5 Stars | 4 Stars | 4.5 Stars | 5 Stars

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2014 Star Ratings - Enrollment Weighted Average MA-PD Overall Rating in Non-EGHP Counties

| Missing Data | 1 Star | 1.5 Stars | 2 Stars | 2.5 Stars | 3 Stars | 3.5 Stars | 4 Stars | 4.5 Stars | 5 Stars |

2018 Star Ratings – Enrollment Weighted Average PDP Part D Rating in Non-EGHP Counties
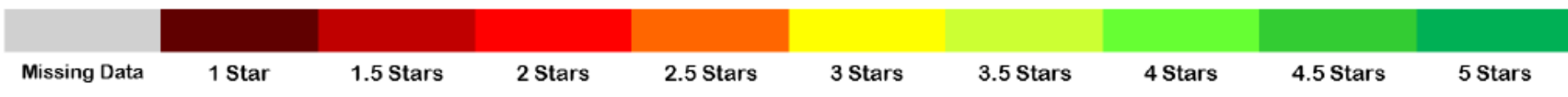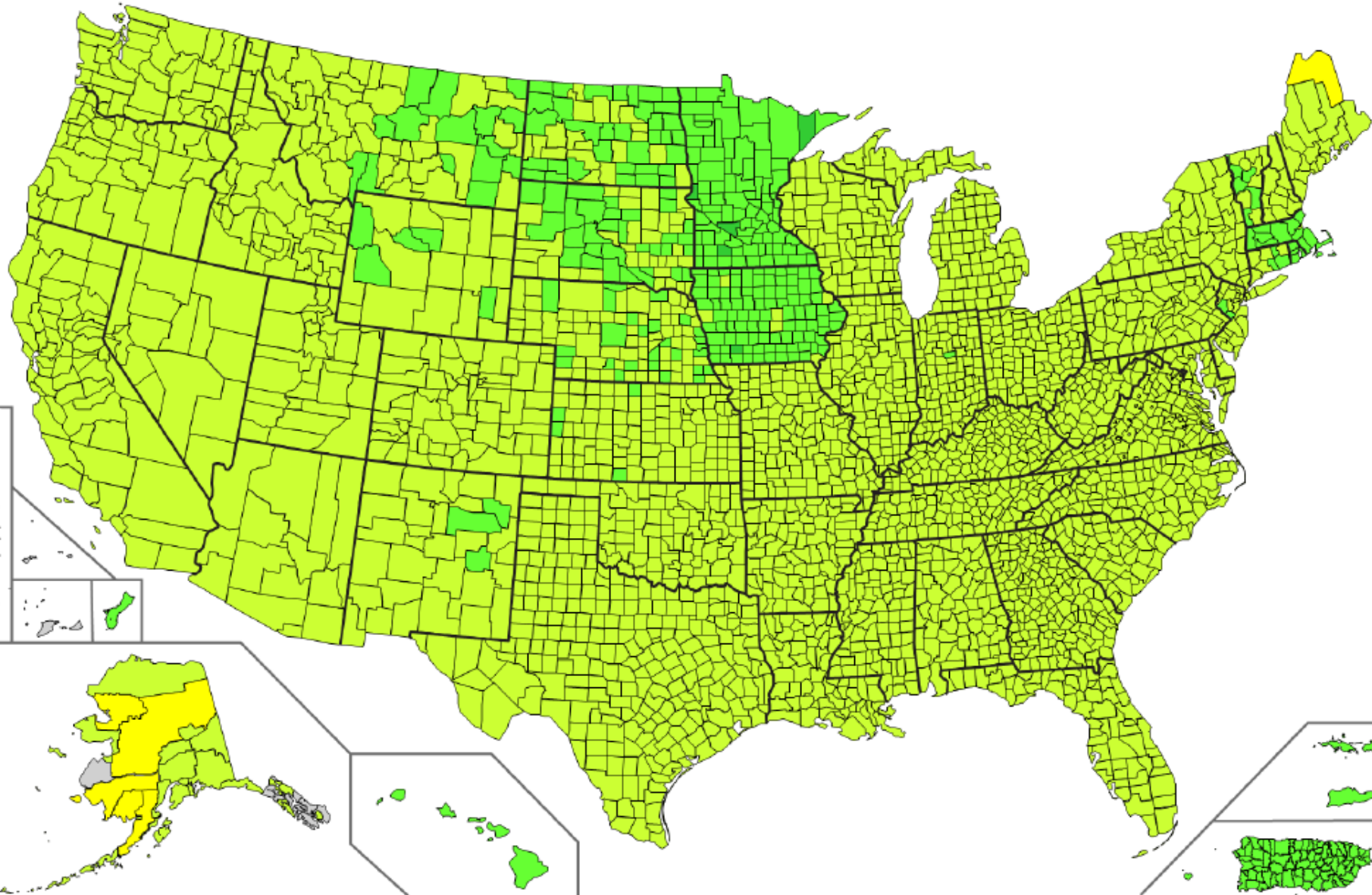
| Missing Data | 1 Star | 1.5 Stars | 2 Stars | 2.5 Stars | 3 Stars | 3.5 Stars | 4 Stars | 4.5 Stars | 5 Stars |
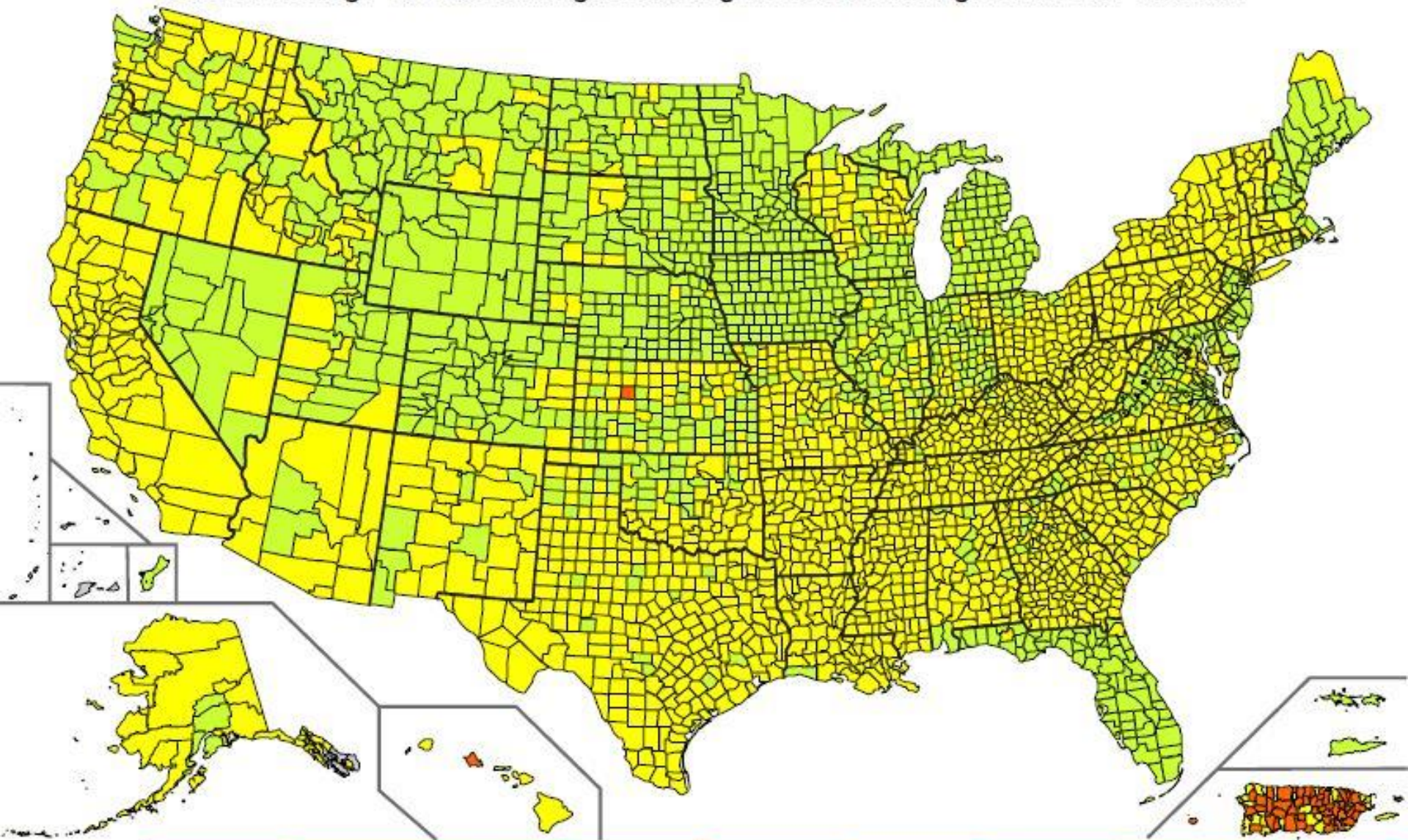
2014 Star Ratings - Enrollment Weighted Average PDP Part D Rating in Non-EGHP Counties

Other Key Notes Related to Potential Pharmacy Impact

- Annual Flu Vaccine
  - Despite current measure design via CAHPS survey, plan sponsors have been recommending a shift to claims-based measurement.
  - Average Star Rating over the past few years has been static.

2018 Measure Number	Measure	2015 Average Star	2016 Average Star	2017 Average Star	2018 Average Star
C03	Annual Flu Vaccine	3.3	3.3	3.3	3.2

- Other Key Part C Measures with Low Average Star Rating:
  - Osteoporosis Management in Women who Had a Fracture (2.6)
  - Medication Reconciliation Post Discharge (3.3)*
  - Controlling Blood Pressure (3.2)
  - Rheumatoid Arthritis Management (3.4)

*Ave. Score is 50%

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Part D Stars Summary

- MAPD stars remained consistent with an average of 4 stars overall
    - Threshold increases for key Part D measures for 4 and 5 stars and only 5 Star CMR Completion Rate had a drop in threshold.

- PDP average increased slightly from 3.55 in 2017 to 3.62 stars in 2018.
    - Average scores for PQA measures improved with CMR Completion Rate measure averages increasing the most (+15% MAPD, +8% PDP)

- 73% of MAPD <u>enrollees</u> are in contracts with 4 or more stars

- 47% of PDP <u>enrollees</u> are in contracts with 4 or more stars

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Industry Trends on Approaches to Drive Performance

- Formularies, clinical strategies, provider contracts, marketing/promotions, all aligning with Star Ratings measures

- Recognizing the importance of engagement strategies with network providers that have an impact on performance measures

- Increasing prevalence of **medication-related** or **immunization-related** quality measures
  - Key opportunities to assess the level of care provided by pharmacies

- Plans/PBMs continue to engage the pharmacy network to maximize the quality of medication use or care provided by pharmacies

- *In 2018, PQS estimates that approximately 50% of Medicare beneficiaries will be in a plan where network pharmacies have some type of performance-based program related to Part D measures.*
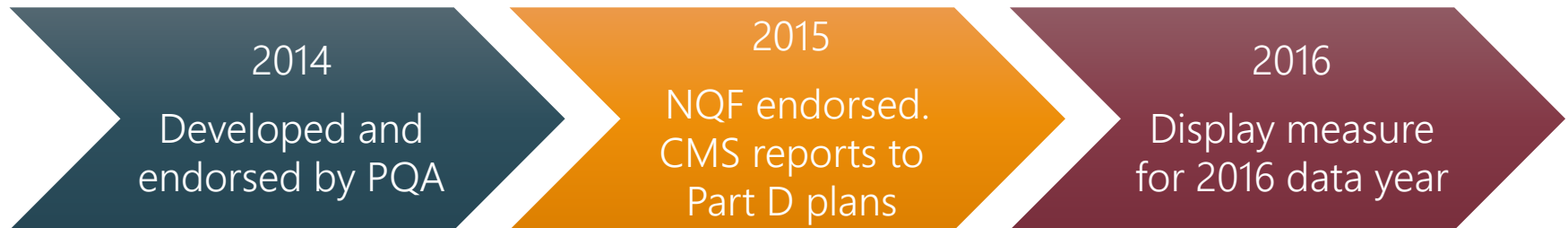
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Pharmacy Value-Based Networks

- Quality and Value have become key criteria for selection of preferred pharmacies
  - Minimum quality expectations spelled out in preferred contracts
  - May lead to adjustment of DIR rates
- Some PBMs and health plans are creating Quality-Based Networks or Value-Based Networks
  - May be a subset of preferred pharmacy network
  - May include requirements / incentives related to quality

What's Next?

Statin Use in Persons with Diabetes

2014 Developed and endorsed by PQA	2015 NQF endorsed. CMS reports to Part D plans	2016 Display measure for 2016 data year

- Based on 2013 ACC/AHA guidelines [1]
- Proposed for inclusion in Star Ratings for 2019 (2017 data year)
  - Denominator: Any person age 40-75 years with two or more prescription fills for any hypoglycemic medication
  - Numerator: One fill of any statin medication in the measurement year

1. Stone NJ, Robinson JG, Lichtenstein AH, et al. 2013 ACC/AHA guidelines on the treatment of blood cholesterol to reduce atherosclerotic cardiovascular risk in adults: a report of the American College of Cardiology/American Heart Association Task Force on Practice Guidelines. *J Am Coll Cardiol.* 2014;63(25 Pt B):2889-934.

Changes in Display Measures

- Display measures are not a part of the Star Ratings, but are used to provide benchmarks and feedback to plans
- CMS monitors display measures to assess plan performance; poor performance can lead to compliance actions by CMS
- Current Part D display measures (from PQA):
  - High Risk Medications Use in the Elderly
    - Updated drug list planned for 2019 display measure (based on Beers Criteria 2015 update)
  - Drug-Drug Interactions
    - Updated drug list planned for 2019 display measure
  - Excessive doses of oral diabetes medications

Changes to Display Measures (cont)

- Current Part D display measures (from PQA) cont'd:
  - Antipsychotic Use in Persons with Dementia (APD)
    - Overall APD measure added to 2018 display page
    - Two population subgroups reported – Community-only and long term Nursing Home residents
  - Use of Opioids at High Dosage and/or from Multiple Providers in Persons without Cancer
    - Adopted PQA non-substantial changes starting with 2017 Patient Safety Reports
    - CMS plans to add Use of Opioids at High Dosage and from Multiple Providers (OHDMP) to 2019 display page
    - CMS does not propose adding opioid measures to Star Ratings at this time

PQA Newly Endorsed Measures

Concurrent Use of Opioids and Benzodiazepines

- Recommended for Medicaid Adult Core Set

Adherence to Non-Infused Disease Modifying Agents Used to Treat Multiple Sclerosis

- Included in the PQA Specialty Set of Measure

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PQA Newly Endorsed Measures (cont.)

Treatment of Chronic Hepatitis C: Completion of Therapy

- Included in the PQA Specialty Set of Measures

Two Polypharmacy Measures:

Use of CNS Active Medications in Older Adults

Use of Multiple Anticholinergic Medications in Older Adults

- Based on AGS 2015 Beers Criteria[2]

2. American Geriatrics Society 2015 Beers Criteria Update Expert Panel. American Geriatrics Society 2015 Updated Beers Criteria for Potentially Inappropriate Medication Use in Older Adults. *J Am Geriatr Soc.* 2015;63(11):2227-46.

PQA Measures in Testing

Inappropriate Use of Duplicate Therapy

Adherence to Anti-retroviral Medications – 3 ARVs

Adherence to Non-infused Biologic Medications Treating Rheumatoid Arthritis

Hospital Admission or ED Visit Associated with:

Anti-Hyperglycemic Medications

Anticoagulants

Opioids

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PQA Measures using SNOMED codes – New Opportunities

Potential Measures for Enhanced MTM

- MTM: Medication Therapy Problem Resolution

- Immunization Status within MTM

- ACIP Compliance following Immunization Assessment within MTM
  - Data Source: SNOMED CT and RxNorm reported from MTM encounter data
  - Potential Use: Enhanced MTM Model monitoring measures, Part D MTM, other MTM programs/practices

(ACIP – Advisory Committee on Immunization Practices)

MTM Medication Therapy Problem Resolution

Description

- Evaluates the percentage of medication therapy interventions that resolve medication therapy problems among individuals participating in an MTM program.

- Based on the Medication Therapy Problem Categories Framework.[3]

Intended Use

- To monitor and report the status of medication therapy interventions performed by MTM providers in a standardized fashion.

Testing

- By programs in the Enhanced MTM program

3. Medication Therapy Problem Categories Framework for PQA Measures. http://pqaalliance.org/images/uploads/files/PQA%20MTP%20Categories%20Framework.pdf

Thank You

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