



## **2024 Medicare Part C & D Star Ratings Technical Notes Summary**



On October 13, 2023, CMS released the Medicare 2024 Part C & D Star Ratings Technical Notes. In this document, Pharmacy Quality Solutions (PQS) provides a high-level summary and trends of performance associated with key Part C & D measures.

The 2024 Star Ratings for Medicare Part C & D plans are displayed on the Medicare Plan Finder found at [www.medicare.gov](http://www.medicare.gov). Starting on October 15, 2023, Medicare beneficiaries can view the 2024 Star Ratings when selecting their Medicare Advantage with Prescription Drug Coverage (MAPD) or Prescription Drug Plan (PDP or standalone drug plan) for the 2024 benefit year during the open enrollment period, which will continue through December 7, 2023.

Effective with the November EQUIPP® performance refresh, PQS will display the updated 2024 Star Rating thresholds in EQUIPP for the CMS Star MAPD thresholds within the Goal Set drop-down menu on the Performance Measures Dashboard. However, most plans, PBMs,

and associated programs will continue to maintain customized, programmatic goals which would be detailed in the Quality Improvement Program (QIP) table in addition to any applicable “My Programs” displays.

As a partner for improving quality, PQS has provided key highlights from the 2024 Part C & D Star Ratings Technical Notes that impact pharmacy-based quality measures. The complete version of the CMS Technical Notes can be found [here](#).

*Note: Refer to Appendix I for the 2024 MAPD and PDP thresholds and Appendix II for average performance trends (2012- 2024).*

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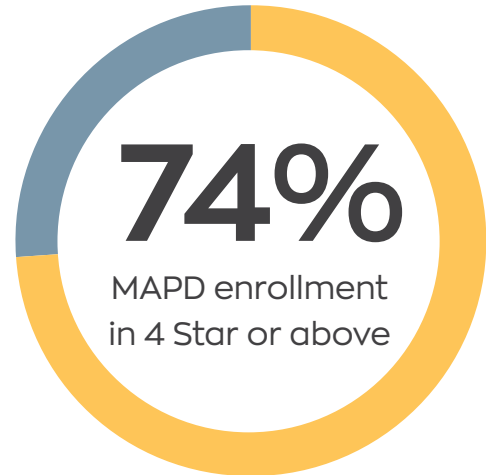
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# Medicare 2024 Part C & D Star Ratings

## Technical Notes Highlights

- **Up to 40 Ratings Measures:** MAPD contracts are rated on up to 40 unique quality and performance measures.
  - ▶ MA-only contracts (without prescription drug coverage, or Part D) are rated on up to 30 measures.
  - ▶ Standalone Part D (PDP) contracts are rated on up to 12 measures.
- **Controlling Blood Pressure now triple-rated:** The recently revised measure (Part C) transitioned to a triple-weighted measure for 2024 as anticipated.
- **Plan All-Cause Readmissions new for 2024:** Respecified Part C measure moved into the 2024 Star Ratings as a new measure (weight of 1).
- **Tukey outer fence outlier deletion included:** Added to the existing clustering methodology used to assign cut points for non-CAHPS Stars measures.
- **Two New Part C Measures added for 2024:**
  - ▶ Transitions of Care (weight of 1)
  - ▶ Follow-up after Emergency Department Visit for People with Multiple High-Risk Chronic Conditions (weight of 1)
- **Decrease in Average Overall MAPD Star Ratings:** Decreased to 4.04 stars (down 0.10 Stars), which is the lowest overall Star Rating in the last 4 years.
  - ▶ 5-star MAPD health plans for 2024 declined to 31 individual contracts, compared to 57 plans in 2023.
- **Decrease in Average PDP Star Ratings:** Decreased to 3.11 (from 3.25 stars in 2023), which is also the lowest overall Star Rating since 2021.
  - ▶ 5-star PDP health plans for 2024 remain steady at 2 individual contracts in 2024.
  - ▶ Only 2% of PDP members are currently enrolled in contracts that will have 4-stars or above in 2024 (weighted by enrollment). This is the lowest enrollment in 4-star or above since 2021.
- **Thirty-Six Plans earned 5-Stars:** 31 are MAPD contracts, 2 are PDP contracts, and 11 contracts are new to receiving this high-performing designation in 2024.



The percentage of members currently enrolled in a MAPD plan with 4-Star or above for 2024 has increased from ~51% to ~74%, with the majority of those members (67%) enrolled in a 4 or 4.5 Star plan.

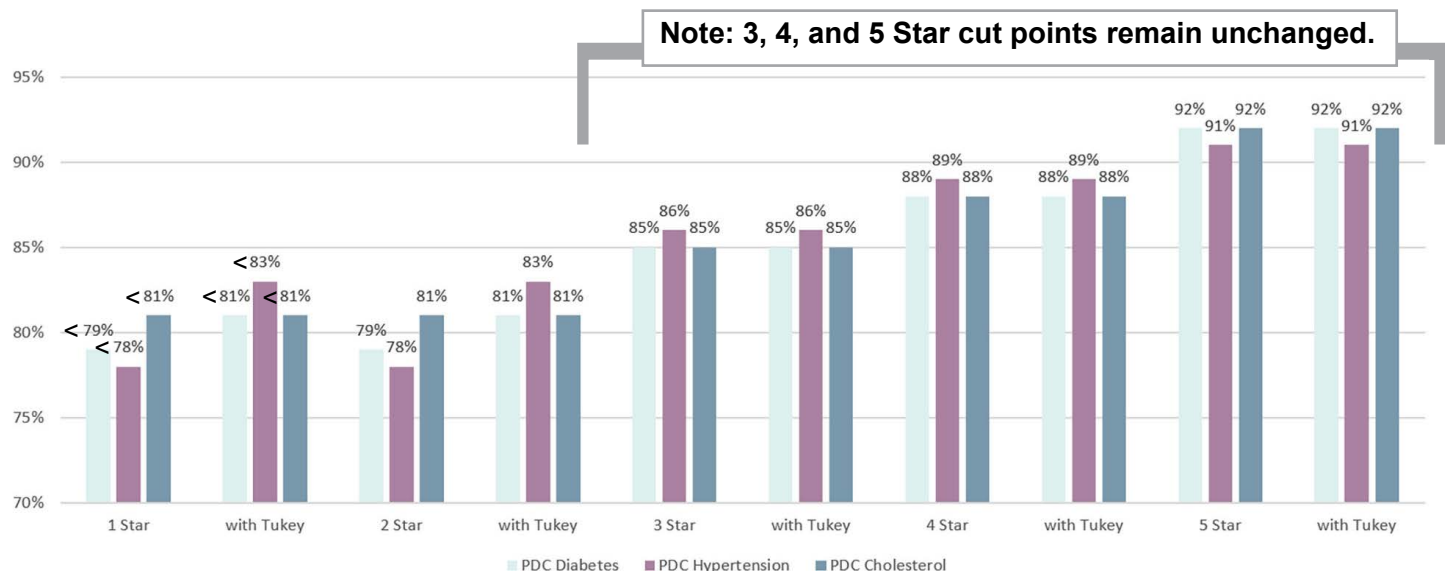
# Impact of the Tukey Deletion of Outlying Contracts

As promised in prior CMS rulemaking, Star Ratings for the 2023 plan year have been recalculated with the application of the Tukey outlier deletion. The Tukey outlier deletion involves removing outlier performance scores from a data set prior to cut points being determined. For the purposes of calculating the guardrails for the 2024 Star Ratings, the 2023 Star Ratings cut points were rerun including mean resampling, Tukey outlier deletion, and no guardrails. This provides transparency and consistency between 2023 and 2024.

Below are the rerun 2023 Star Ratings cut points for the three adherence PDC (Proportion of Days Covered) measures to serve as the basis for applying the guardrails for the 2024 Star Ratings. The data demonstrate that there would have been no noted changes for 3, 4, or 5 Star Ratings cut points in 2023 with the additional Tukey application.

MAPD Star Ratings Cut Points - 2023										
Measure Name	1 Star	with Tukey	2 Star	with Tukey	3 Star	with Tukey	4 Star	with Tukey	5 Star	with Tukey
PDC Diabetes	<79%	<81%	79%	81%	85%	85%	88%	88%	92%	92%
PDC Hypertension	<78%	<83%	78%	83%	86%	86%	89%	89%	91%	91%
PDC Cholesterol	<81%	<81%	81%	81%	85%	85%	88%	88%	92%	92%

## MAPD 2023 Star Ratings: With Tukey Application



# Medication-Related Part D Measures: Focused Updates



## Medication Adherence Measures



### 2024 Average Star Ratings

The average MAPD Star Ratings remains mostly steady for all three adherence (PDC) measures in 2024.

Measure	2024	2023
RASA PDC	3.4	3.4
Statin PDC	3.2	3.1
Diabetes PDC	3.3	3.0

### KEY TAKEAWAYS

- MAPD average score for PDC measures: All 3 PDCs increased by 1 percent in 2024 across MAPD plans:
  - ▶ Diabetes PDC: 86%
  - ▶ RASA PDC: 88%
  - ▶ Statin PDC: 87%
- MAPD 5-star cut points: Decrease in 2024 for Diabetes and Cholesterol PDC, while RASA PDC sees no change
- MAPD 4-star cut points: No change in 2024 and remain stagnant compared to 2023
- PDP average scores for PDC measures: No changes from 2023 to 2024; however, 5-star cut points see significant change

### 2024 MAPD 5-Star Thresholds

Diabetes	Hypertension	Cholesterol
<b>90%</b>	<b>91%</b>	<b>91%</b>
(-2%)	(NA)	(-1%)

### 2024 PDP 5-Star Thresholds

Diabetes	Hypertension	Cholesterol
<b>93%</b>	<b>94%</b>	<b>93%</b>
(+3%)	(-2%)	(+2%)

Note: Figures in parentheses represent change from prior year.

### MEASURE DETAILS

- Measures the percentage of eligible members with a PDC rate at 80% or over for the specific drug classes (e.g., diabetes, hypertension, and cholesterol medications)
- Patients with one or more claims for sacubitril/valsartan are excluded from the hypertension/RASA adherence measure
- Patients with one or more prescriptions for insulin are excluded from the Diabetes PDC measure
- End-stage renal disease (ESRD) exclusions have been applied to measure results according to the most recent specifications from the measure steward. Additionally, patients indicating hospice enrollment during the treatment period are also excluded from the adherence measures.



## Statin Use in Persons with Diabetes (SUPD)

### KEY TAKEAWAYS

#### 2024 Average Star Ratings

Plan	2024	2023
MAPD	2.7	3.1
PDP	2.4	2.9

#### 2024 SUPD 5-Star Ratings

MAPD	PDP
<b>92%</b> (+2%)	<b>87%</b> (+1%)

Note: Figures in parentheses represent change from prior year.

### MEASURE DETAILS

- Measures the percentage of beneficiaries 40-75 years old who were dispensed at least two diabetes medication fills and received a statin medication fill at any point during the measurement period
- Exclusions include members with ESRD or who are enrolled in hospice.



## Statin Therapy for Patients with Cardiovascular Disease (SPC) - Part C

### KEY TAKEAWAYS

#### 2024 National Averages

- Part C national average: 3.3 Stars (slight decrease from 3.5 Stars in 2023)
- National average performance score: Up slightly (0.5%) to 85.0%

### MEASURE DETAILS

- Measures the percentage of males 21–75 years of age and females 40–75 years of age during the measurement year, who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and were dispensed at least one high or moderate-intensity statin medication during the measurement year
- Several exclusions exist with other conditions including ESRD and hospice.
- Key differences from the Part D SUPD measure:
  - ▶ The use of medical data to identify patients with ASCVD
  - ▶ The intensity of the statin is relevant to the measure
  - ▶ For SPC, only moderate- to high-intensity statins qualify patients for numerator status
  - ▶ SPC has a one-year look back period to identify the qualifying population



# MTM Program Completion Rate for Comprehensive Medication Review (CMR)

## KEY TAKEAWAYS

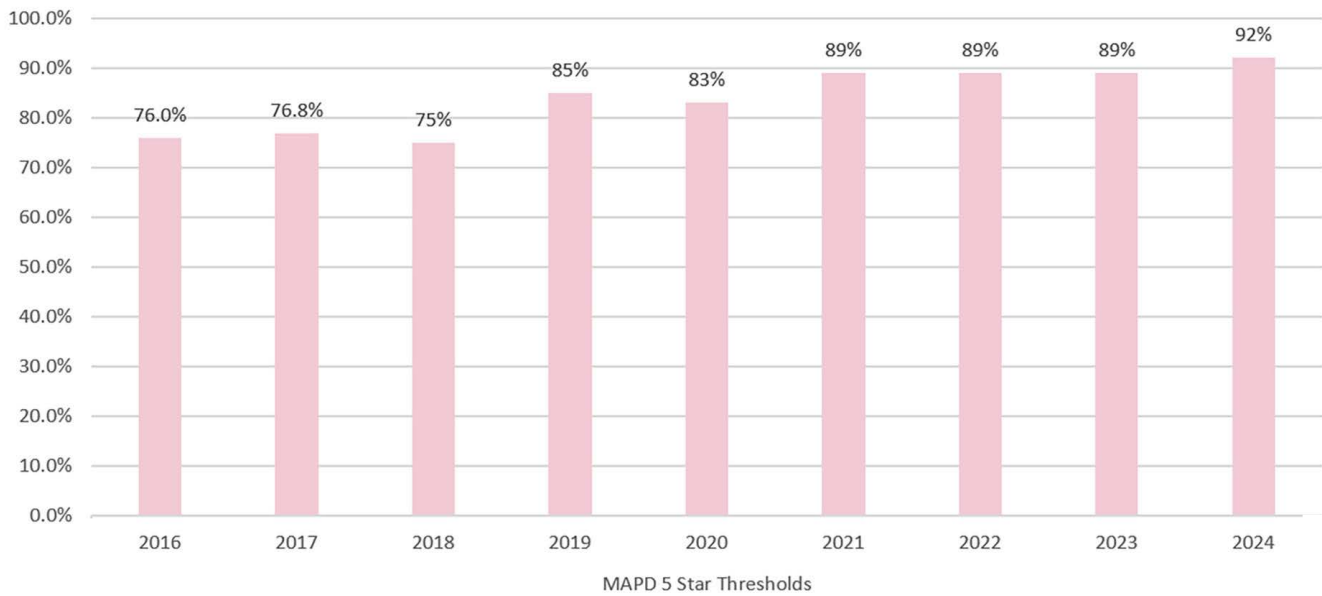
### 2024 Average Star Ratings

Plan	2024	2023
MAPD	3.5	3.9
PDP	3.2	3.1

Average performance scores for the CMR Completion Rate measure varied across Lines of Business

- ▶ MAPD increased from 82.6% to 84%
- ▶ PDP increased from 53.4% to 56%

CMR Completion Rate



## MEASURE DETAILS

- CMR Completion Rate measures the percent of MTM eligible members that have received a CMR during the measurement period.
- Special logic is applied to members enrolled for fewer than 60 days:
  - ▶ Members enrolled for fewer than 60 days who received a CMR will be included in the numerator and denominator for the measure.
  - ▶ Members enrolled for fewer than 60 days who did not receive a CMR will be excluded from the measure.



# Controlling Blood Pressure (CBP) - Part C

## KEY TAKEAWAYS

### 2024 Average Star Ratings

Controlling Blood Pressure (CBP) quality measure is one of the 40 quality measures included in Medicare Part C Stars. For 2024, this measure is **triple-weighted**.



The 2024 average Star Rating for CBP fell to 3.4 stars (3.5 in 2023).

## MEASURE DETAILS

- This measures the percent of members 18 - 85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled (<140-90mm Hg).
  - ▶ Members that are enrolled in institutional special needs plans (I-SNP) along with those living in a long-term institution are excluded from the measure.
  - ▶ Additionally, members diagnosed with frailty, receiving palliative care, and those dispensed medications for dementia are excluded.

Controlling Blood Pressure: MAPD 2023 - 2024

Year	1 Star	2 Star	3 Star	4 Star	5 Star
2024	<58%	58%	68%	74%	82%
2023	<48%	48%	63%	73%	80%





# NEW! Diabetes Care - Blood Sugar Controlled - Part C

## KEY TAKEAWAYS

### 2024 Average Star Ratings

The Diabetes Care – Blood Sugar Controlled quality measure is one of the 40 quality measures included in Medicare Part C Stars. For 2024, this measure continues to be **triple-weighted**.



**The average Star Rating for Diabetes Care - Blood Sugar Controlled fell significantly in 2024 from 4.1 to 3.6.**

## MEASURE DETAILS

- This measures the percent of plan members with diabetes who had an A1c lab test during the year that showed their average blood sugar is under control (>9.0%).
  - ▶ Members that are enrolled in institutional special needs plans (I-SNP) along with those living in a long-term institution are excluded from the measure.
  - ▶ Additionally, members diagnosed with frailty, receiving palliative care, and those dispensed medications for dementia are excluded.

Diabetes - Blood Sugar Controlled: MAPD 2023 - 2024

Year	1 Star	2 Star	3 Star	4 Star	5 Star
2024	<58%	58%	72%	80%	87%
2023	<39%	39%	62%	75%	83%

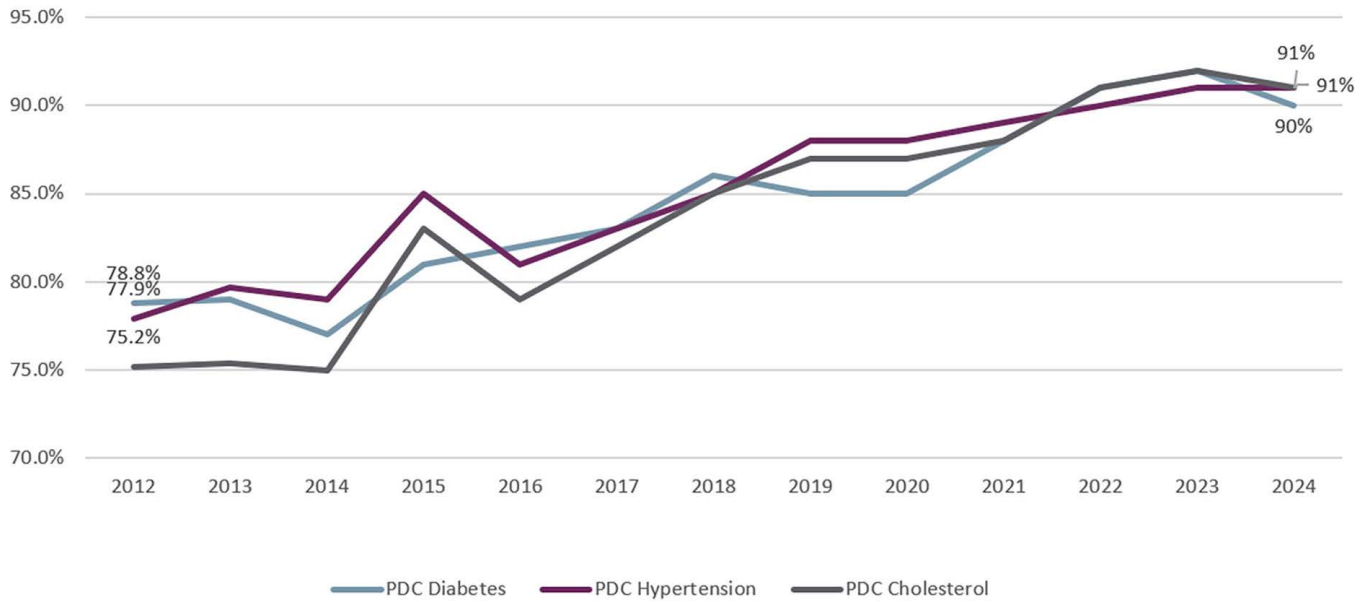
## Appendix I: 2024 MAPD & PDP Thresholds

MAPD 2024 Star Ratings Thresholds					
Measure Name	1 Star	2 Star	3 Star	4 Star	5 Star
PDC Diabetes	<80%	80%	84%	88%	90%
PDC Hypertension	<82%	82%	86%	89%	91%
PDC Cholesterol	<82%	82%	86%	88%	91%
CMR Completion Rate	<67%	67%	77%	85%	92%
Statin Use in Persons with Diabetes	<81%	81%	86%	88%	92%
Statin Therapy for Patients with Cardiovascular Disease	<79%	79%	84%	86%	90%

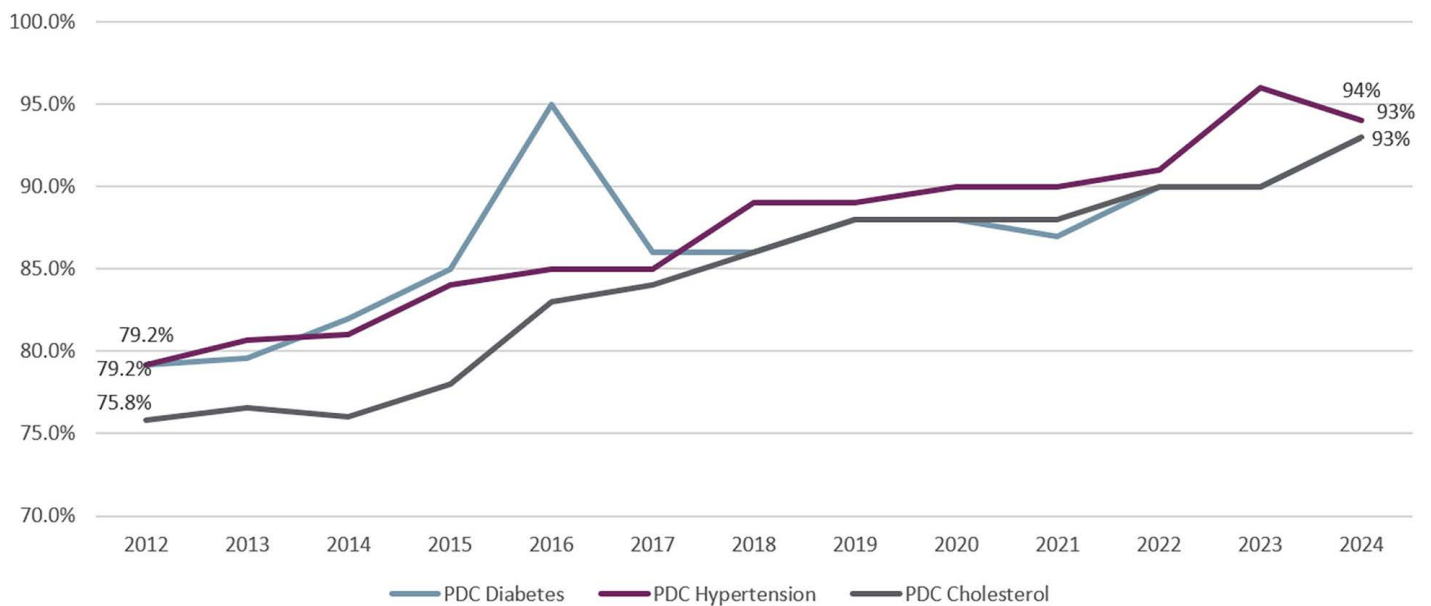
PDP 2024 Star Ratings Thresholds					
Measure Name	1 Star	2 Star	3 Star	4 Star	5 Star
PDC Diabetes	<84%	84%	87%	89%	93%
PDC Hypertension	<87%	87%	89%	91%	94%
PDC Cholesterol	<84%	84%	87%	89%	93%
CMR Completion Rate	<34%	34%	52%	63%	77%
SUPD	<81%	81%	83%	85%	87%

# Appendix II: 2024 MAPD & PDP Performance Trends

## MAPD 5-Star Threshold Trends

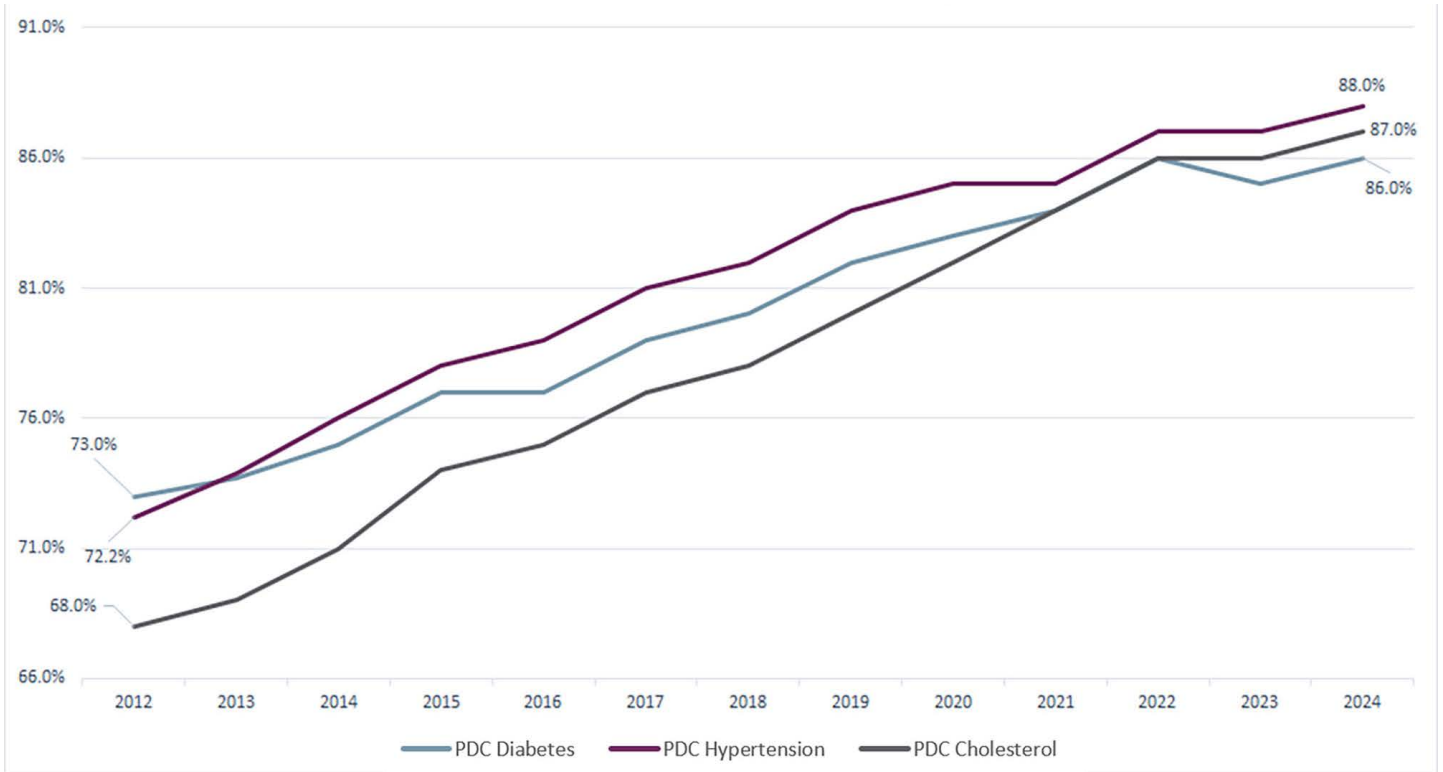


## PDP 5-Star Threshold Trends

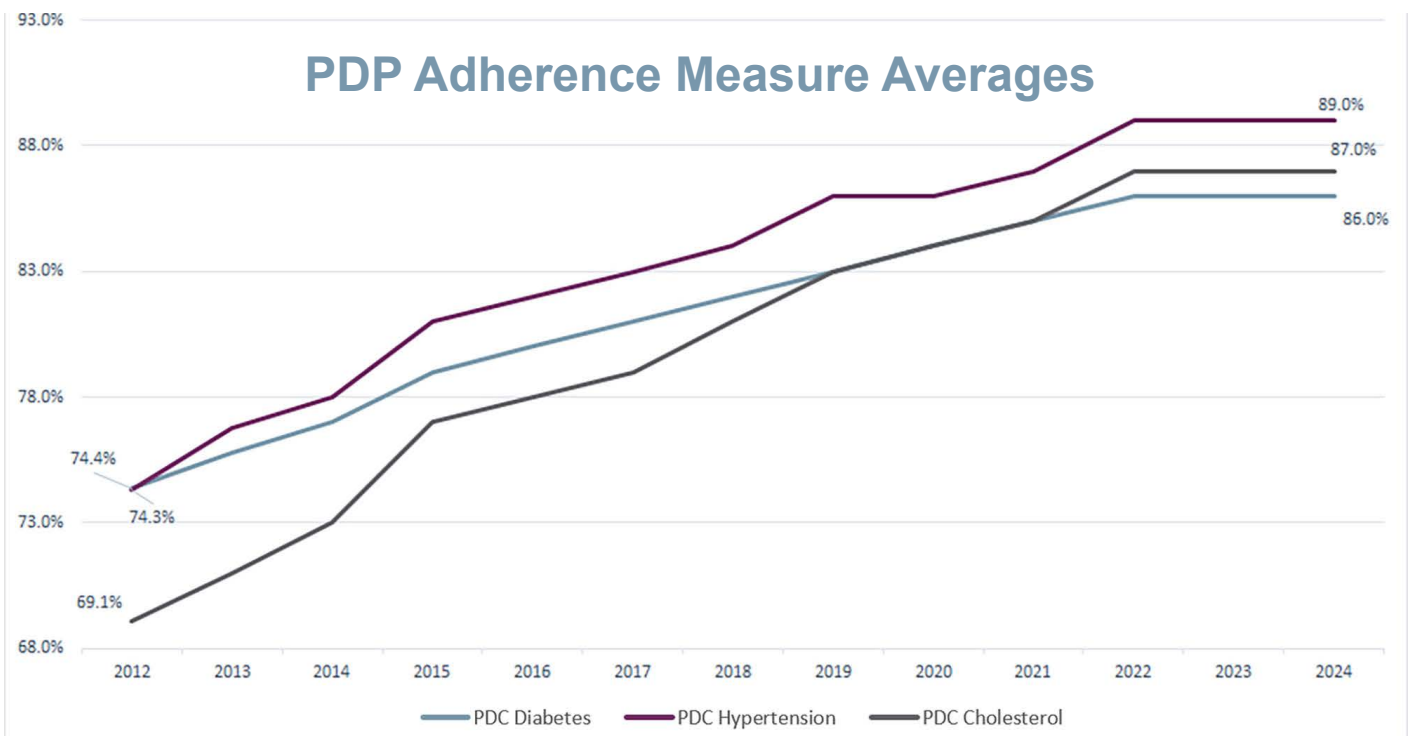


# Appendix II: 2024 MAPD & PDP Performance Trends

## MAPD Adherence Measure Averages



## PDP Adherence Measure Averages





## About Pharmacy Quality Solutions, Inc. (PQS)

PQS aligns healthcare payers and pharmacies to achieve their shared goals of better patient outcomes and healthcare quality performance. As a neutral, trusted intermediary supporting the evolution of value-based care, PQS facilitates nationwide pharmacy-based care through our partners and the EQUIPP® platform. Utilizing deep clinical pharmacy knowledge and over a decade of performance management experience, we help clients develop strategies, implement quality improvement programs, and optimize the quality of healthcare for their Medicare, Medicaid, and commercial populations.

### About Enhanced Services Programs

**Controlling High Blood Pressure (CBP) Gap Closure Program:** Data collection for this measure is viable through the pharmacy channel with this revised CBP measure (triple-weighted). To support performance improvement strategies in this quality measure, PQS has created this comprehensive program to work with community pharmacies to collect blood pressure readings and help manage the patient population's health outcomes.

#### Program Highlights

- ▶ Emphasizes the pharmacy-member relationship to capture blood pressure readings and address gaps in care, while managing the patient's hypertension disease state.
- ▶ Utilizes EQUIPP®, accessible by ~95% of all community pharmacies, to host patient lists and enable documentation.
- ▶ Provides a HEDIS® supplemental data file to payers with data that can be incorporated into their performance scores for the CBP quality measure.
- ▶ Enables incentives for pharmacies to complete blood pressure screenings at the point of care and counsel patients whose readings are not considered under control.

**Hemoglobin A1c (HbA1c) Data Gap Closure Program:** This comprehensive program is designed to work with community pharmacies to capture and collect HbA1c test results and support patient health improvement.

#### Program Highlights

- ▶ Emphasizes the pharmacy-member relationship to capture A1c readings and address gaps in care.
- ▶ Utilizes EQUIPP®, accessible by ~95% of all community pharmacies, to host patient lists and enable documentation.
- ▶ Provides a HEDIS® supplemental data file with data to support payers with their performance scores for the Blood Sugar Controlled quality measure.
- ▶ Enables incentives for pharmacies to complete HbA1c testing at the point of care.

For additional information on how PQS can support you, please visit [www.pharmacyquality.com](http://www.pharmacyquality.com).