

APRIL, 2022

Medicare Advantage (MA)

Star Ratings program overview - 2024



What is the purpose of the Medicare Star Rating?

We use the rating to improve our members' experience, health, and cost of care. The measurement system represents the quality of services that a health plan provides to its members, including:

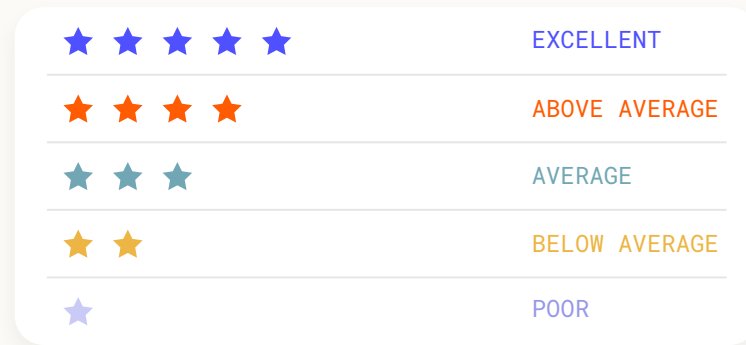
- Care provided by the physician network
- Experience in provider offices and with the health plan
- Care provided by the health plan's clinical management teams
- Operational efficiencies and plan designs

Our mission is to create an exceptional experience for our members through best-in-class plans and technology, easing their access to care and affordable plans.



Star Ratings measurement

What does each Star rating represent?



- Ranges from 1 to 5 stars in ½ star increments
- Calculated from the average of 41 individual weighted measure scores
- Individual measures are weighted from 1x to 5x each
- Each individual measure has a Star Rating
- Individual Star measures and the overall Star Ratings are recalculated annually based on the results of all plans

Stars Data Sources - 2024 Stars

● MEMBER EXPERIENCE:

CAHPS (35%) – CONSUMER ASSESSMENT OF HEALTHCARE PROVIDERS & SYSTEMS:

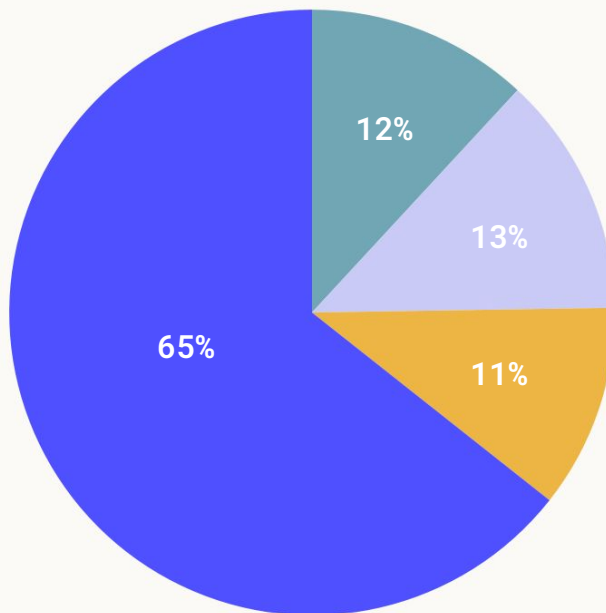
- Member experience with the health plan and physician network

ADMINISTRATION (26%)

- Voluntary disenrollments, CTMs, appeals timeliness and accuracy, call center TTY/FL

HOS (3%) – HEALTH OUTCOMES SURVEY

- Patient-reported outcomes measure on mental and physical health, physical activity, falling, etc.



● HEDIS (12%) – HEALTH EFFECTIVENESS DATA AND INFORMATION SET:

- Care Gaps

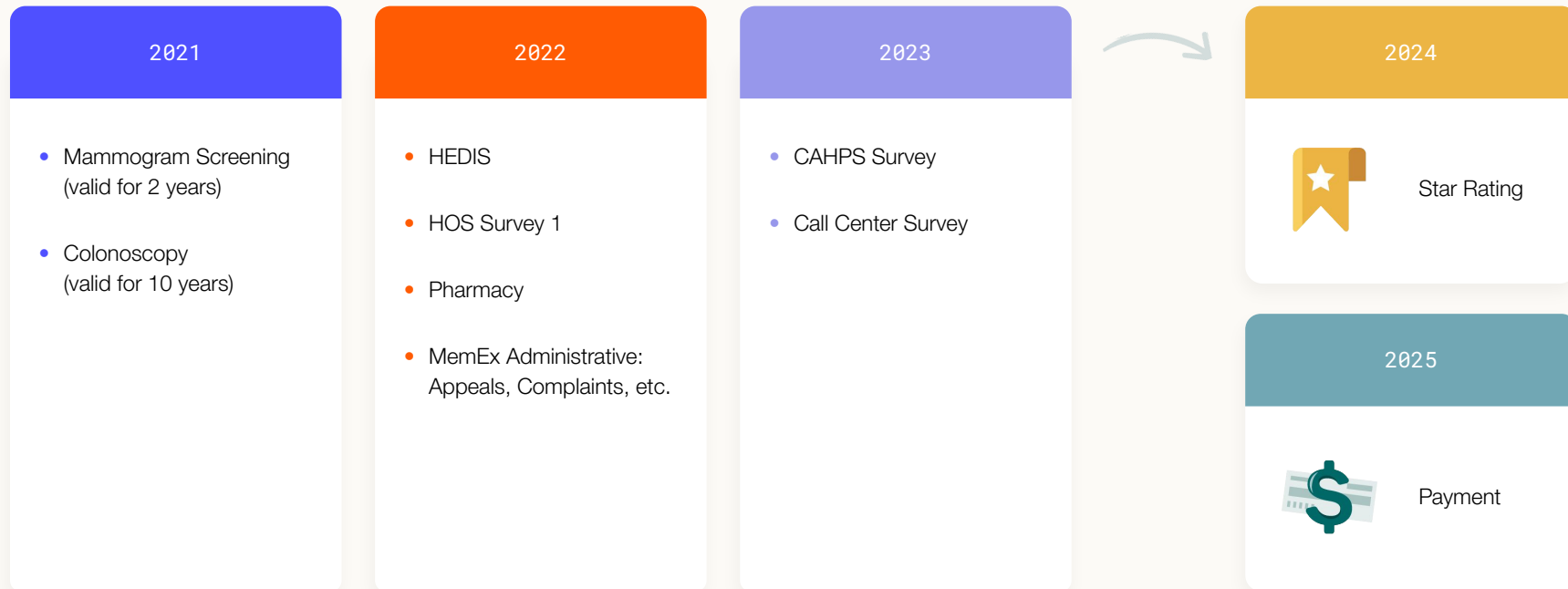
● PHARMACY (13%)

- Medication Adherence (x3), MTM, Rx Price Accuracy, and SUPD

● QI (11%) QUALITY IMPROVEMENT:

- Year-over-year change in nearly every measure, summarized by Part C and Part D

MA Star Rating spans multiple years



CAHPS

(Consumer Assessment of Healthcare Providers and Systems)

- CAHPS® Survey is conducted annually to assess members' experience with the health plan and physician network.
- Survey consists of multiple composites with several counting towards the Medicare Star Rating.
 - CAHPS Star measures have recently increased from 2 to 4 weight.
- CAHPS Star measures are case-mix adjusted by CMS in October.
 - Case-mix adjusted = Statistically adjusted to correct for differences in the mix of patients across providers. This adjustment ensures that plans are not punished for having a sicker population.



CAHPS

MEDICARE CAHPS STAR MEASURE (COMPOSITE)	COMPOSITES CONSIST OF MULTIPLE QUESTIONS ASKED TO MEMBERS
Annual flu vaccine	Did you get your flu shot since July of last year?
Getting care needed	Appointments with specialists; getting care, tests, or treatments necessary
Getting appointments & care quickly	Obtaining emergent and routine appts.; wait times <15 min.
Customer service	Treated with courtesy and respect; getting info/help needed; forms easy to fill out
Rating of healthcare quality	Rate healthcare quality 1 - 10
Rating of health plan	Rate health plan 1 - 10
Care coordination	Test results as soon as needed; Dr. talked about Rx meds; Dr. up-to-date about specialty care; Dr. had medical records; got help managing care
Rating of drug plan	Rate Drug Plan 1-10
Getting prescription drugs needed	Ease of using health plan to get Rx meds; ease of using health plan to fill Rx by local pharmacy or mail

Administration

Admin measures have also recently increased in weight from 2 to 4:

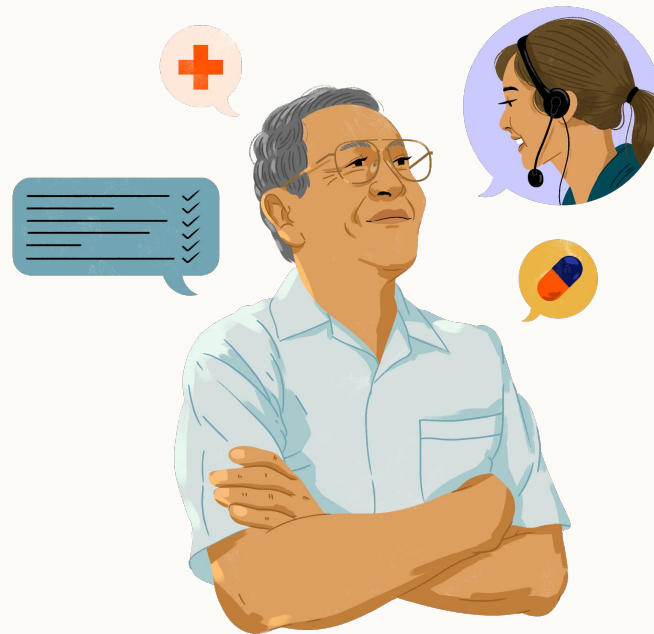
- Complaints about the health plan (CTMs)
- Appeal decisions
- Appeal timeliness
- Member choosing to leave the plan
- Prospective call center: foreign language and TTY availability

HOS

(Health Outcomes Survey)

- Patient-reported outcomes measure on mental and physical health, physical activity, falling, and bladder control
- Survey sent to **sample** of ~1200 beneficiaries
 - 5 measures with 2 of the measures currently on display.
- Focuses on interaction with physicians
- HOS measures are 1-3x weighted

After two years, the same group of members is surveyed again to evaluate how effectively the MA plan has maintained or improved their health.



HOS

C04: IMPROVING OR MAINTAINING PHYSICAL HEALTH (ON DISPLAY)

Six questions:

1. General Health
2. Moderate activities
3. Climbing stairs
4. Accomplished less
5. Limited in work
6. Pain interference

C05: IMPROVING OR MAINTAINING MENTAL HEALTH (ON DISPLAY)

Six questions:

1. Calm & peaceful
2. Downhearted & blue
3. A lot of energy
4. Social interference
5. Accomplished less
6. Work less carefully

C06: MONITORING PHYSICAL ACTIVITY

Two questions:

1. Talked with Dr. or other health provider about level of physical activity
2. Did doctor advise to start, increase, or maintain level of physical activity

C17: REDUCING THE RISK OF FALLING

Four questions:

1. Talked with Dr. or health provider about falling or balance problems
2. Have a fall
3. Have walking or balance problems
4. Dr. or health provider helped prevent falls or treat problems with balance

C18: IMPROVING BLADDER CONTROL

Two questions:

1. Experienced leaking of urine in past 6 months
2. Talked with a doctor, nurse, or other healthcare provider about approaches to control or manage

Pharmacy

- The PDE measures make up about 13% of the Star Rating
- Three adherence measures, all 3 weighted
 - Ensuring members take prescribed medications
 - Three measures: diabetes, cholesterol, hypertension
 - Refills must occur enough to cover 80% of the year
- Medication Therapy Management: Ensuring safety of members on multiple medications
- Prescription Pricing Accuracy

HEDIS

(Health Effectiveness Data and Information Set)

All HEDIS® measures are 1 weighted, except for the 3 weighted blood sugar control and controlling blood pressure

- Diabetes care: Blood sugar control, kidney and eye
- Controlling blood pressure
- Breast cancer screening
- Colorectal cancer screening
- Readmissions
- Transitions of care
- Follow-up after ED visit
- Statin therapy for CVD



Additional complexity

EACH CONTRACT IS SCORED UNIQUELY

Oscar does not receive an overall score, but a score for each contract we operate across the county

GRADED ON A CURVE

Individual Star Measure assignments are based on EOY national results

UNKNOWN CUT-POINTS & TARGETS

Official cut-points are not released until the final Star Rating is released

MULTI-YEAR LOOK BACK

Some 20214 Star measures will use survey data from 2020

40+ DISPLAY MEASURES

- Should be monitored in addition to official Star measures
- Any could become an official Star measure in the next 3 years
- Measurement year is over by the time decision is made

REWARD FACTOR

Additional points are given when results are released based on national ranking & stability in performance

MA Star: Quality bonus payment



~\$50 PMPM

QUALITY BONUS PAYMENT
WITH 4+ STAR PERFORMANCE

REINVEST:

- Reducing premiums
- Reducing beneficiary cost share
- Providing additional benefits

