

ONLINE APPENDIXES

# 12

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**The Medicare Advantage  
program: Status report**

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# 12-A

ONLINE APPENDIX

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## **Measures composing the star system**

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**TABLE  
12-A1**

**Measures composing the star system by source of the measure and status as hybrid measure in HEDIS<sup>®</sup>, Part C**

<b>HEDIS<sup>®</sup></b>	<b>HOS</b>	<b>CAHPS<sup>®</sup></b>	<b>Contract performance</b>
<p><b>Hybrid measures</b></p> <ul style="list-style-type: none"> <li>• Colorectal cancer screening*</li> <li>• Cardiovascular care—cholesterol screening</li> <li>• Diabetes care—cholesterol screening</li> <li>• Diabetes care—eye exam</li> <li>• Diabetes care—kidney disease monitoring</li> <li>• Diabetes care—blood sugar controlled</li> <li>• Diabetes care—cholesterol controlled</li> <li>• Controlling blood pressure</li> </ul> <p><b>Nonhybrid measures</b></p> <ul style="list-style-type: none"> <li>• Breast cancer screening</li> <li>• Glaucoma testing</li> <li>• Appropriate monitoring for patients taking long-term medications</li> <li>• Access to primary care doctor visits</li> <li>• Osteoporosis management in women who had a fracture</li> <li>• Rheumatoid arthritis management</li> <li>• Testing to confirm chronic obstructive pulmonary disease</li> </ul>	<ul style="list-style-type: none"> <li>• Improving or maintaining physical health</li> <li>• Improving or maintaining mental health</li> <li>• Osteoporosis testing</li> <li>• Monitoring physical activity</li> <li>• Improving bladder control</li> <li>• Reducing the risk of falling</li> </ul>	<ul style="list-style-type: none"> <li>• Annual flu vaccine</li> <li>• Pneumonia vaccine</li> <li>• Getting needed care without delays</li> <li>• Doctors who communicate well</li> <li>• Getting appointments and care quickly</li> <li>• Customer service</li> <li>• Overall rating of health care quality</li> <li>• Overall rating of plan</li> </ul>	<ul style="list-style-type: none"> <li>• Complaints tracking module</li> <li>• Plan makes timely decisions about appeals</li> <li>• Reviewing appeals decisions</li> <li>• Corrective action plans</li> <li>• Call center—hold time</li> <li>• Call center—information accuracy</li> <li>• Call center—foreign language interpreter and TTY/TDD availability</li> </ul>

Note: HEDIS<sup>®</sup> (Healthcare Effectiveness Data and Information Set), HOS (Health Outcomes Survey), CAHPS<sup>®</sup> (Consumer Assessment of Healthcare Providers and Systems), PPO (preferred provider organization), TTY/TDD (telephone typewriter/telecommunications device for the deaf). Hybrid measures are reported based on administrative data and on review of medical records. Except as noted, PPOs may, at their option, use medical record review in reporting hybrid measures. \*PPOs are not allowed to use medical record review but this measure is not used in determining PPO overall star rating.

Source: CMS description of star rating system.

**TABLE  
12-A2****Measures composing the star system by type of measure and source, Part D, for MA prescription drug plans****Measure****Contract performance measures**

1. Time on hold when customer calls drug plan
2. Time on hold when pharmacist calls drug plan
3. Accuracy of information members get when they call the drug plan
4. Availability of TTY/TDD services and foreign language interpretation when members call the drug plan
5. Drug plan's timeliness in giving a decision for members who make an appeal
6. Fairness of drug plan's denials to member appeals, based on an independent reviewer
7. Drug plan provides pharmacists with up-to-date and complete enrollment information about plan members
8. Beneficiary access problems Medicare found during an audit of the drug plan
9. Completeness of the drug plan's information on members who need extra help
10. Drug plan provides accurate price information for Medicare's plan finder website and keeps drug prices stable during the year

**Patient experience measures from CAHPS®**

11. Drug plan provides information or help when members need it
12. Members' overall rating of drug plan
13. Members' ability to get prescriptions filled easily when using the drug plan

**Clinical quality measures**

14. Drug plan members 65 or older who receive prescriptions for certain drugs with a high risk of side effects, when there may be safer drug choices
15. Using the kind of blood pressure medication that is recommended for people with diabetes

**Part D complaint tracking measures used for stand-alone drug plans not MA-PD plan**

16. Complaints about joining and leaving the drug plan\*
17. All other complaints about the drug plan\*

Note: MA (Medicare Advantage), TTY/TDD (telephone typewriter/telecommunications device for the deaf), CAHPS® (Consumer Assessment of Healthcare Providers and Systems), FFS (fee-for-service), MA-PD (Medicare Advantage-Prescription Drug [plan]).

\*Used for stand-alone drug plans only; plan-level complaint information used for Part C and Part D for MA-PD plans.

Source: CMS description of star rating system.