

# Fact Sheet - 2021 Part C and D Star Ratings

*Note: The information included in this Fact Sheet is based on the 2021 Star Ratings published on the Medicare Plan Finder on October 8, 2020. For details on the Medicare Advantage (MA) and Part D Star Ratings, please refer to the 2021 Part C & D Star Ratings Technical Notes available at <http://go.cms.gov/partcanddstarrratings>.*

## Introduction

The Centers for Medicare & Medicaid Services (CMS) publishes the Medicare Part C and D Star Ratings each year to measure the quality of health and drug services received by beneficiaries enrolled in Medicare Advantage (MA) and Prescription Drug Plans (PDPs or Part D plans). The Star Ratings also reflect the experiences of beneficiaries and assist beneficiaries in finding the best plan for them. The Star Ratings support CMS's efforts to put the patient first in all of our programs. As part of this effort, patients should be empowered to work with their health care providers to make health care decisions that are best for them. An important component of this effort is to provide Medicare beneficiaries and their family members with meaningful information about quality and cost to assist them in being informed and active health care consumers.

## Highlights of Contract Performance in 2021 Star Ratings<sup>1</sup>

Medicare Advantage with prescription drug coverage (MA-PD) contracts are rated on up to 44 unique quality and performance measures; MA-only contracts (without prescription drug coverage) are rated on up to 32 measures; and stand-alone PDP contracts are rated on up to 14 measures. Each year, CMS conducts a comprehensive review of the measures that make up the Star Ratings by assessing the reliability of the data, clinical recommendations, and feedback received from stakeholders. There are no new measures introduced for 2021 Star Ratings. CMS increased the weight of patient experience/complaints and access measures from 1.5 to 2 reflecting CMS's commitment to serve Medicare beneficiaries by putting patients first, including their assessments of the care received by plans. Additional changes made through rulemaking include moving the All-Cause Readmissions measure to the display page on [www.cms.gov](http://www.cms.gov) due to a substantive change in the measure specifications and increasing the weight of the Statin Use in Persons with Diabetes (SUPD) measure from a weight of 1 to 3.

CMS has been monitoring the impact of the 2019 Novel Coronavirus (COVID-19) public health emergency (PHE) on Star Ratings and adopted some changes to address the impact of the PHE in the Medicare and Medicaid Programs; Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency Interim Final Rule with comment period, effective March 31, 2020 (85 FR 19230, April 6, 2020) ("March 31<sup>st</sup> COVID-19 IFC"). The March 31<sup>st</sup> COVID-19 IFC adopted changes to the 2021 Star Ratings to accommodate disruption to data collection posed by the PHE as well as changes to the 2022 Star Ratings to account for expected changes in plan performance. The intent of these changes was to eliminate some of the data collection requirements because of the public health and safety concerns with collecting the data, and to enable plans to focus on the care and safety of Medicare beneficiaries and their employees. Given the extraordinary circumstances under which the healthcare system is operating, CMS wanted plans to have some degree of certainty related to Star Ratings program requirements and wanted to

---

<sup>1</sup> Percentages in the Tables may not sum to 100 due to rounding.

make sure plans were focused on what was most important: ensuring that Medicare beneficiaries received the care and treatment they needed. The issues facing the health care system, including significant differences across regions and demographic groups, create unique challenges for the 2021 and 2022 Star Ratings calculations. Due to these concerns, CMS eliminated the requirement to submit Healthcare Effectiveness Data and Information Set (HEDIS) and Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey data for the 2021 Star Ratings and used the data from the prior year for the 2021 Star Ratings calculations, including carrying forward the measure-level change scores for HEDIS and CAHPS for the Improvement measures. All other measures were updated using the most recent data.

### ***Rating Distribution***

The last row in Table 1 details the trend in the average overall Star Ratings weighted by enrollment for MA contracts offering prescription drug coverage (MA-PDs) from 2018 to 2021.

- Approximately 49 percent of MA-PDs (195 contracts) that will be offered in 2021 earned 4 stars or higher for their 2021 overall rating.
- Weighted by enrollment, approximately 77 percent of MA-PD enrollees are currently in contracts that will have 4 or more stars in 2021.

**Table 1: 2018 - 2021 Overall Star Rating Distribution for MA-PD Contracts**

Overall Rating	2018 Number of Contracts	2018 %	2018 Weighted by Enrollment	2019 Number of Contracts	2019 %	2019 Weighted by Enrollment	2020 Number of Contracts	2020 %	2020 Weighted by Enrollment	2021 Number of Contracts	2021 %	2021 Weighted by Enrollment
5 stars	16	4.16	11.17	14	3.72	8.93	20	4.99	10.96	21	5.25	9.15
4.5 stars	58	15.06	23.52	64	17.02	26.35	72	17.96	31.41	64	16.00	22.00
4 stars	97	25.19	38.19	94	25.00	40.08	118	29.43	38.82	110	27.50	45.90
3.5 stars	139	36.10	22.45	124	32.98	17.41	131	32.67	15.82	140	35.00	18.80
3 stars	61	15.84	4.20	66	17.55	7.00	55	13.72	2.93	61	15.25	4.14
2.5 stars	12	3.12	0.46	14	3.72	0.23	4	1	0.05	4	1	0.06
2 stars	2	0.52	0.02	0	0.00	0.00	1	0.25	0.02	0	0	0
Total Rated Contracts	385	100		376	100		401	100		400	100	
Average Star Rating*	4.07			4.06			4.16			4.06		

\* The average Star Rating is weighted by enrollment.

The last row in Table 2 details the trend in the average Part D Ratings weighted by enrollment for stand-alone PDPs from 2018 to 2021.

- Approximately 42 percent of PDPs (23 contracts) that will be active in 2021 received 4 or more stars for their 2020 Part D Rating.
- Weighted by enrollment, about 17 percent of PDP enrollees are in contracts with 4 or more stars. Another 81 percent of PDP enrollees are in 3.5 star contracts. Close to 98 percent of PDP enrollees are in contracts with 3.5 or more stars.

**Table 2: 2018 - 2021 Part D Rating Distribution for PDPs**

Overall Rating	2018 Number of Contracts	2018 %	2018 Weighted by Enrollment	2019 Number of Contracts	2019 %	2019 Weighted by Enrollment	2020 Number of Contracts	2020 %	2020 Weighted by Enrollment	2021 Number of Contracts	2021 %	2021 Weighted by Enrollment
5 stars	7	12.96	2.03	4	7.69	1.92	2	3.70	0.76	5	9.09	0.13
4.5 stars	5	9.26	0.28	5	9.62	0.69	7	12.96	1.78	7	12.73	2.38
4 stars	16	29.63	45.03	7	13.46	0.83	7	12.96	25.04	11	20.0	14.13
3.5 stars	17	31.48	36.39	15	28.85	68.61	21	38.89	42.12	19	34.55	81.24
3 stars	5	9.26	8.00	16	30.77	21.77	14	25.93	29.45	9	16.36	1.01
2.5 stars	2	3.70	4.60	2	3.85	0.37	3	5.56	0.84	4	7.27	1.10
2 stars	2	3.70	3.66	2	3.85	5.45	0	0.00	0.00	0	0.00	0.00
1.5 stars	0	0.00	0.00	1	1.92	0.35	0	0.00	0.00	0	0.00	0.00
Total Number of Contracts	54	100		52	100		54	100		55	100	
Average Star Rating*	3.62			3.34			3.50			3.58		

\* The average Star Rating is weighted by enrollment.

### 5-Star Contracts

A total of 28 contracts are highlighted on the Medicare Plan Finder with a high performing indicator indicating they earned 5 stars; 21 are MA-PD contracts (Table 3), two are 1876 Cost contracts (Table 4), and five are PDPs (Table 5). This is an increase from 23 5-star contracts for the 2020 Star Ratings.

For 2021, 13 contracts receiving the high performing indicator did not receive it in 2020. The contracts receiving the high performing indicator in 2021 that did not receive it in 2020 are highlighted, and the contract number and name are italicized. The tables below show both the Employer Group Health Plan (EGHP) service areas, if applicable, and the non-EGHP service areas.

**Table 3: MA-PD Contracts Receiving the 2021 High Performing Indicator**

Contract	Contract Name	Parent Organization	Enrolled 10/2020	Non-EGHP Service Area	EGHP Service Area	SNP
H0332	KS Plan Administrators, LLC	Kelsey-Seybold Medical Group, PLLC	38,318	13 counties in TX	242 counties in TX	No
H0524	Kaiser Foundation HP, Inc.	Kaiser Foundation Health Plan, Inc.	1,258,886	32 counties in CA	Not applicable	Yes
H0630	Kaiser Foundation HP of CO	Kaiser Foundation Health Plan, Inc.	111,172	14 counties in CO	Not applicable	Yes
<i>H0710</i>	<i>Sierra Health and Life Insurance Company, Inc.</i>	<i>UnitedHealth Group, Inc.</i>	<i>39,998</i>	<i>Most of the U.S.</i>	<i>Most of the U.S.</i>	<i>Yes</i>
H1019	CarePlus Health Plans, Inc.	Humana Inc.	166,821	18 counties in FL	Not applicable	Yes
H1170	Kaiser Foundation HP of GA, Inc.	Kaiser Foundation Health Plan, Inc.	32,235	12 counties in GA	9 counties in GA	Yes
H1230	Kaiser Foundation HP, Inc.	Kaiser Foundation Health Plan, Inc.	33,576	3 counties in HI	Not applicable	Yes
H1537	Care Improvement Plus South Central Insurance Co.	UnitedHealth Group, Inc.	2,113	1 county in NY	Most of the U.S.	No
H2172	Kaiser Foundation Health Plan of the Mid-Atlantic	Kaiser Foundation Health Plan, Inc.	77,053	1 county in DC, 11 counties in MD, and 12 counties in VA	Not applicable	No
<i>H2226</i>	<i>United Healthcare Insurance Co.</i>	<i>UnitedHealth Group, Inc.</i>	<i>19,233</i>	<i>10 counties in MA</i>	<i>Not applicable</i>	<i>Yes</i>
H2256	Tufts Associated Health Maintenance Organization	Tufts Health Plan, Inc	103,970	10 counties in MA	Not applicable	Yes
H2422	HealthPartners, Inc.	HealthPartners, Inc.	4,343	12 counties in MN	Not applicable	Yes
<i>H5042</i>	<i>CDPHP Universal Benefits, Inc.</i>	<i>Capital District Physicians' Health Plan, Inc.</i>	<i>5,287</i>	<i>23 counties in NY</i>	<i>39 counties in NY</i>	<i>No</i>
H5262	Quartz Health Plan Corporation	University of Wisconsin Hospitals and Clinics Autho	18,544	5 counties in IA, 5 counties in IL, and 27 counties in WI	Not applicable	No
H5410	Healthspring of Florida, Inc.	CIGNA	56,279	20 counties in FL	47 counties in FL	Yes
H5431	Healthsun Health Plans, Inc.	Anthem Inc.	52,906	3 counties in FL	Not applicable	Yes

This communication is printed, published, or produced and disseminated at U.S. taxpayer expense.

Contract	Contract Name	Parent Organization	Enrolled 10/2020	Non-EGHP Service Area	EGHP Service Area	SNP
H5526	HealthNow New York Inc.	HealthNow New York Inc.	15,298	18 counties in NY	Most of the U.S.	No
H5591	Martin's Point Generations Advantage, Inc.	Martin's Point Health Care, Inc.	48,182	16 counties in ME, 10 counties in NH	Not applicable	Yes
H5652	Serra Health and Life Insurance Company, Inc.	UnitedHealth Group, Inc.	4,902	1 county in CO, 1 county in FL, 1 county in KS, 2 counties in MA, 3 counties in MD, 1 county in MI, 1 county in NC, 3 counties in NJ, 2 counties in PA, 2 counties in TX, and 2 counties in VA	Not applicable	Yes
H9003	Kaiser Foundation HP of the NW	Kaiser Foundation Health Plan, Inc.	98,035	10 counties in OR and 3 counties in WA	1 county in OR and 1 county in WA	No
H9834	Quartz Health Plan MN Corporation	University of Wisconsin Hospitals and Clinics Autho	2,255	4 counties in MN	Not applicable	No

**Table 4: 1876 Cost Contracts Receiving the 2021 High Performing Indicator<sup>2</sup>**

Contract	Contract Name	Parent Organization	Enrolled 10/2020	Non-EGHP Service Area	EGHP Service Area
H1651	Medical Associates Health Plan, Inc.	Medical Associates Clinic, P.C.	13,455	52 counties in IA, 13 counties in IL, and 13 counties in NE	Not applicable
H5264	Dean Health Plan, Inc.	SSM Healthcare Corporation	17,175	8 counties in WI	Not applicable

**Table 5: PDP Contracts Receiving the 2021 High Performing Indicator**

Contract	Contract Name	Parent Organization	Enrolled 10/2020	Non-EGHP Service Area	EGHP Service Area
S0655	Tufts Insurance Company	Tufts Health Plan, Inc	8,713	Not applicable	35 regions
S1822	HealthPartners, Inc.	HealthPartners, Inc.	15,240	Not applicable	35 regions
S3389	UPMC Health Benefits, Inc.	UPMC Health System	1,073	Not applicable	39 regions
S3521	Excellus Health Plan, Inc.	Lifetime Healthcare, Inc.	7,626	Not applicable	39 regions
S4219	Health Alliance Medical Plans	The Carle Foundation	764	Not applicable	39 regions

### ***Consistently Low Performers***

There is only one contract identified on the Medicare Plan Finder with a low performance warning for consistently low quality ratings as detailed in Table 6. This contract is receiving the warning for Part C and/or Part D summary ratings of 2.5 or fewer stars from at least 2018 through 2021.

<sup>2</sup> 1876 Cost contracts do not offer SNPs.

**Table 6: 2021 Contract(s) with a Low Performance Warning**

Contract	Contract Name	Parent Organization	Reason for Low Performance Warning	Enrolled 10/2019	SNP
H7680	Prominence HealthFirst of Texas	Universal Health Services, Inc.	Part C or D	1,384	No

***Length of Time in Program and Performance***

Overall, higher Star Ratings are associated with contracts that have more experience in the MA program. MA-PDs with 10 or more years in the program are more than twice as likely to have 4 or more stars compared to contracts with less than 5 years in the program. For PDPs, the relationship is similar in that PDPs with 10 or more years in the program do better in the Star Ratings relative to contracts with less experience. The tables below show the distribution of ratings by the number of years in the program (MA-PDs are shown in Table 7 and PDPs in Table 8).

**Table 7: Distribution of Overall Star Ratings by Length of Time in Program for MA-PDs**

2021 Overall Rating	Number of Contracts with Less than 5 Years	% Less than 5 Years	Number of Contracts with 5 years to Less than 10 Years	% 5 Years to Less than 10 Years	Number of Contracts with 10 or More Years	% 10 or More Years
5 stars	1	1.45	2	2.78	18	6.95
4.5 stars	9	13.04	5	6.94	49	18.92
4 stars	9	13.04	16	22.22	85	32.82
3.5 stars	30	43.48	33	45.83	78	30.12
3 stars	18	26.09	14	19.44	29	11.2
2.5 stars	2	2.90	2	2.78	0	0.00
Total Number of Contracts	69		72		259	

**Table 8: Distribution of Part D Ratings by Length of Time in Program for PDPs**

2021 Overall Rating	Number of Contracts with Less than 5 Years	% Less than 5 Years	Number of Contracts with 5 Years to Less than 10 Years	% 5 Years to Less than 10 Years	Number of Contracts with 10 or More Years	% 10 or More Years
5 stars	0	0.00	1	16.67	4	8.89
4.5 stars	0	0.00	3	50.00	4	8.89
4 stars	0	0.00	0	0.00	11	24.44
3.5 stars	0	0.00	1	16.67	18	40.00
3 stars	1	25.00	1	16.67	7	15.56
2.5 stars	3	75.00	0	0.00	1	2.22
Total Number of Contracts	4		6		45	

## ***Geographic Variation***

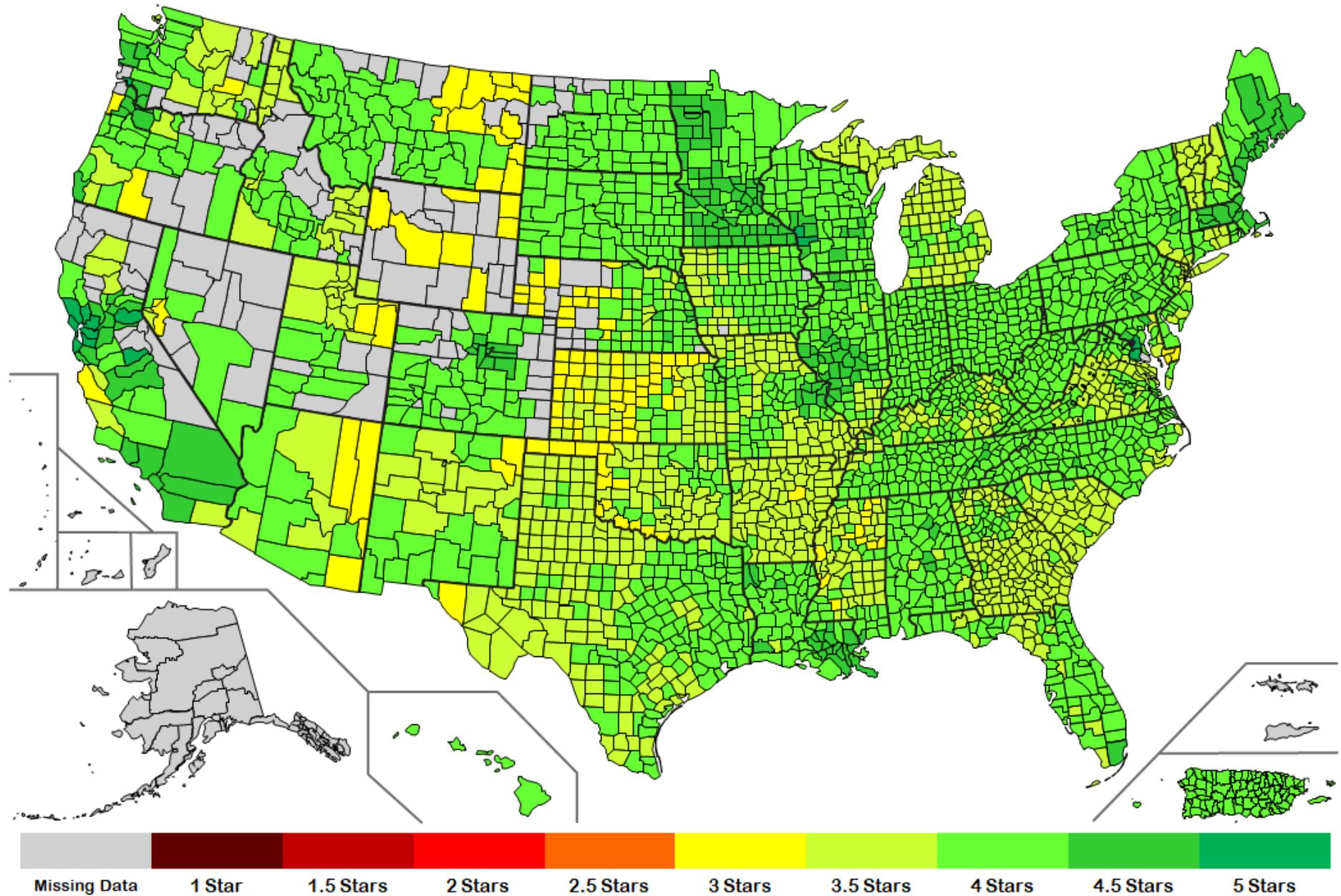
The following eight maps illustrate the average Star Ratings from 2018 to 2021 weighted by enrollment per county for MA-PDs and PDPs across the U.S., including territories.<sup>3</sup> These maps exclude EGHPs. Counties shaded in green indicate that the enrollment-weighted mean for the overall Star Rating in the county for MA-PDs or Part D Rating for PDPs is 4 or more stars. Similarly, counties shaded in yellow indicate that the enrollment-weighted mean rating is 3 stars, and areas shaded in orange indicate that the enrollment-weighted mean rating is less than 3 stars. Please note that the weight of patient experience/complaints and access measures increased from the 2020 to the 2021 Star Ratings from 1.5 to 2 so some of the changes from the prior year would be from the change in weighting. Areas in gray indicate data are not available for those counties. Among the changes and updates from previous years are:

- Highly rated (4 stars or greater) MA-PDs continue to be available in the vast majority of regions across the country. Between 2020 and 2021, there was a small downward shift in the enrollment-weighted mean rating.
- In the period from 2018 through 2020, the ratings of PDPs across the country generally increased (evidenced by the greater percentage of green shaded regions on the maps over time).

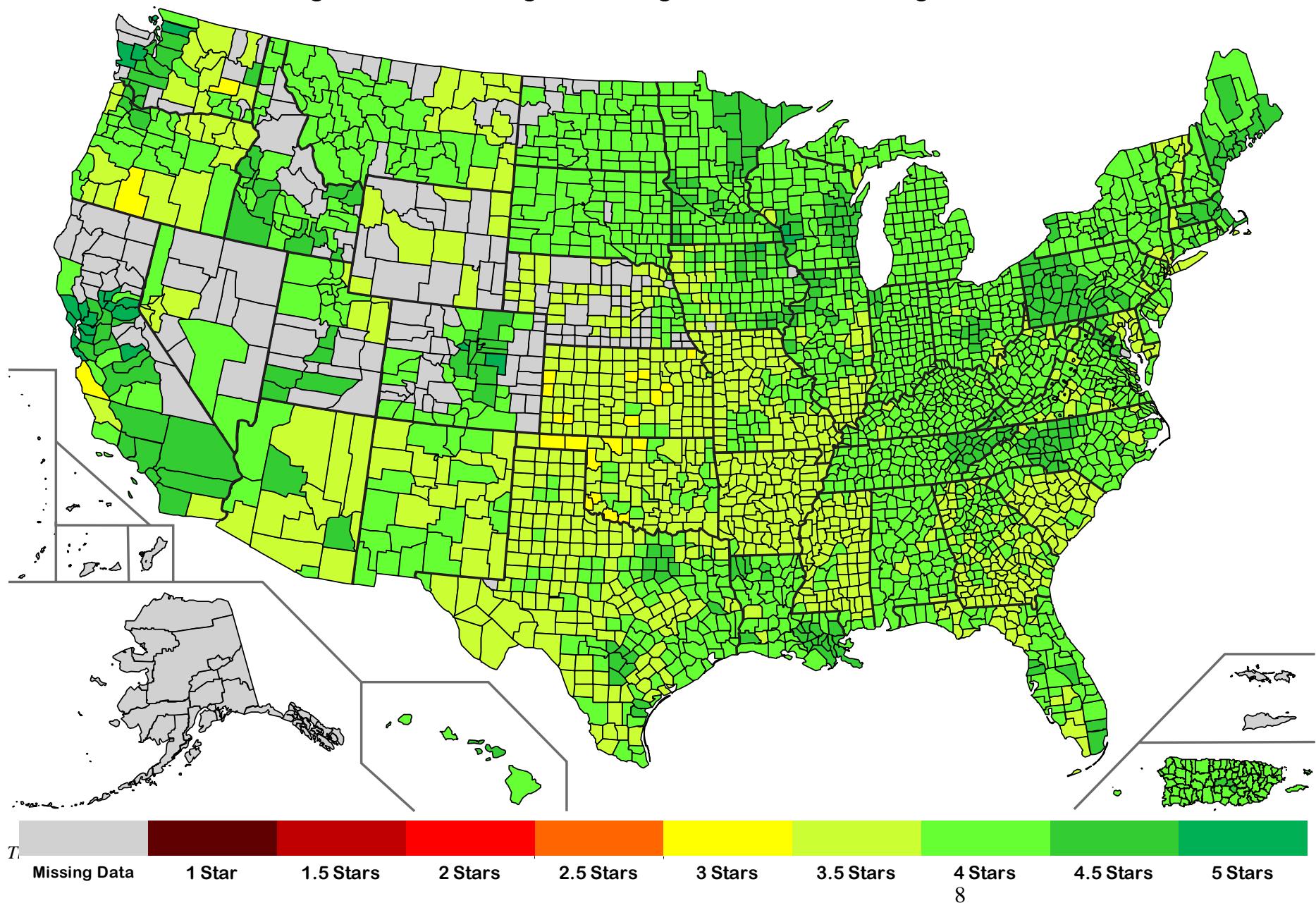
---

<sup>3</sup> Comparisons of Star Ratings across years do not reflect annual revisions made by CMS to the Star Ratings methodology or measure set.

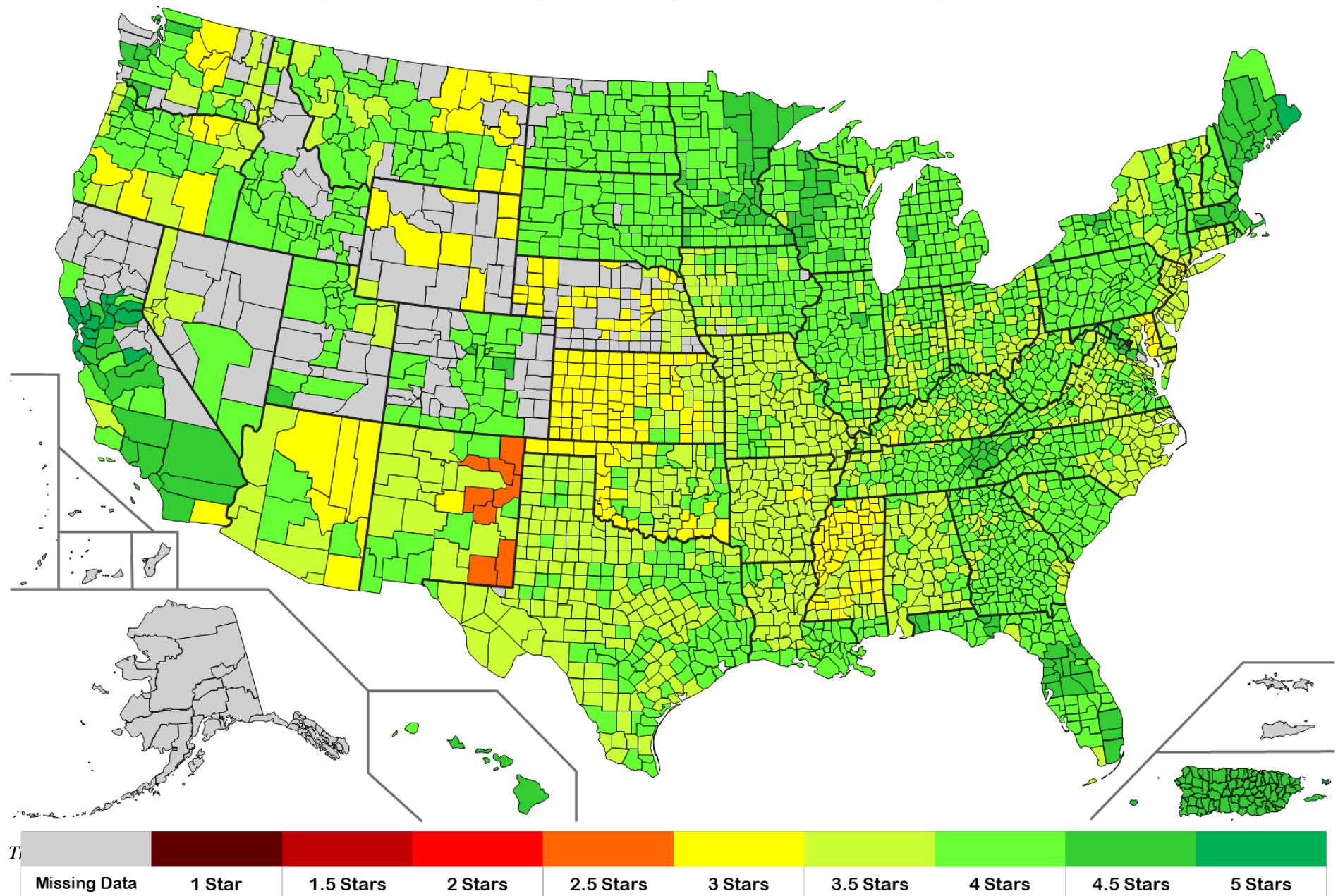
## 2021 Star Ratings - Enrollment Weighted Average MA-PD Overall Rating in Non-EGHP Counties



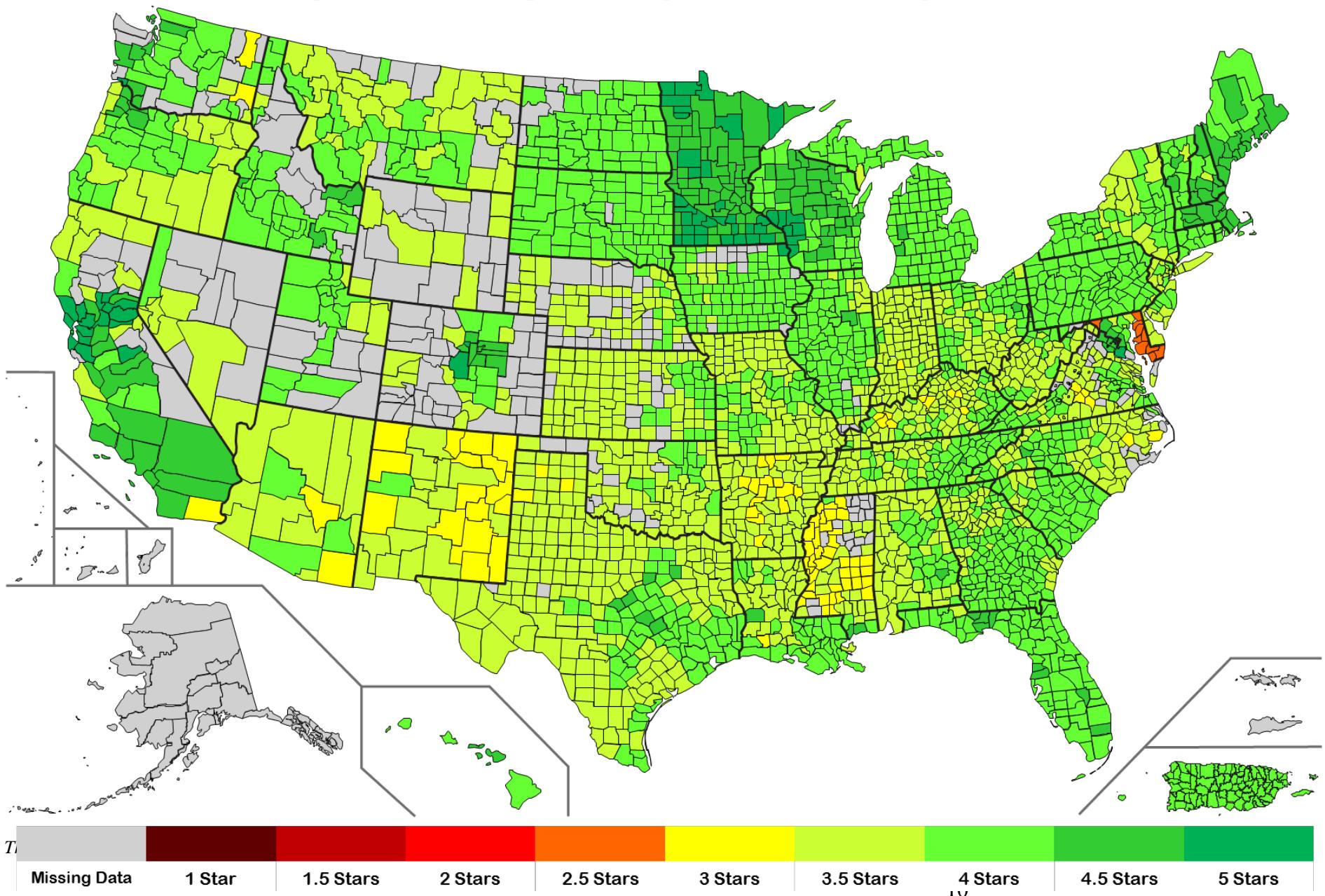
## 2020 Star Ratings - Enrollment Weighted Average MA-PD Overall Rating in Non-EGHP Counties



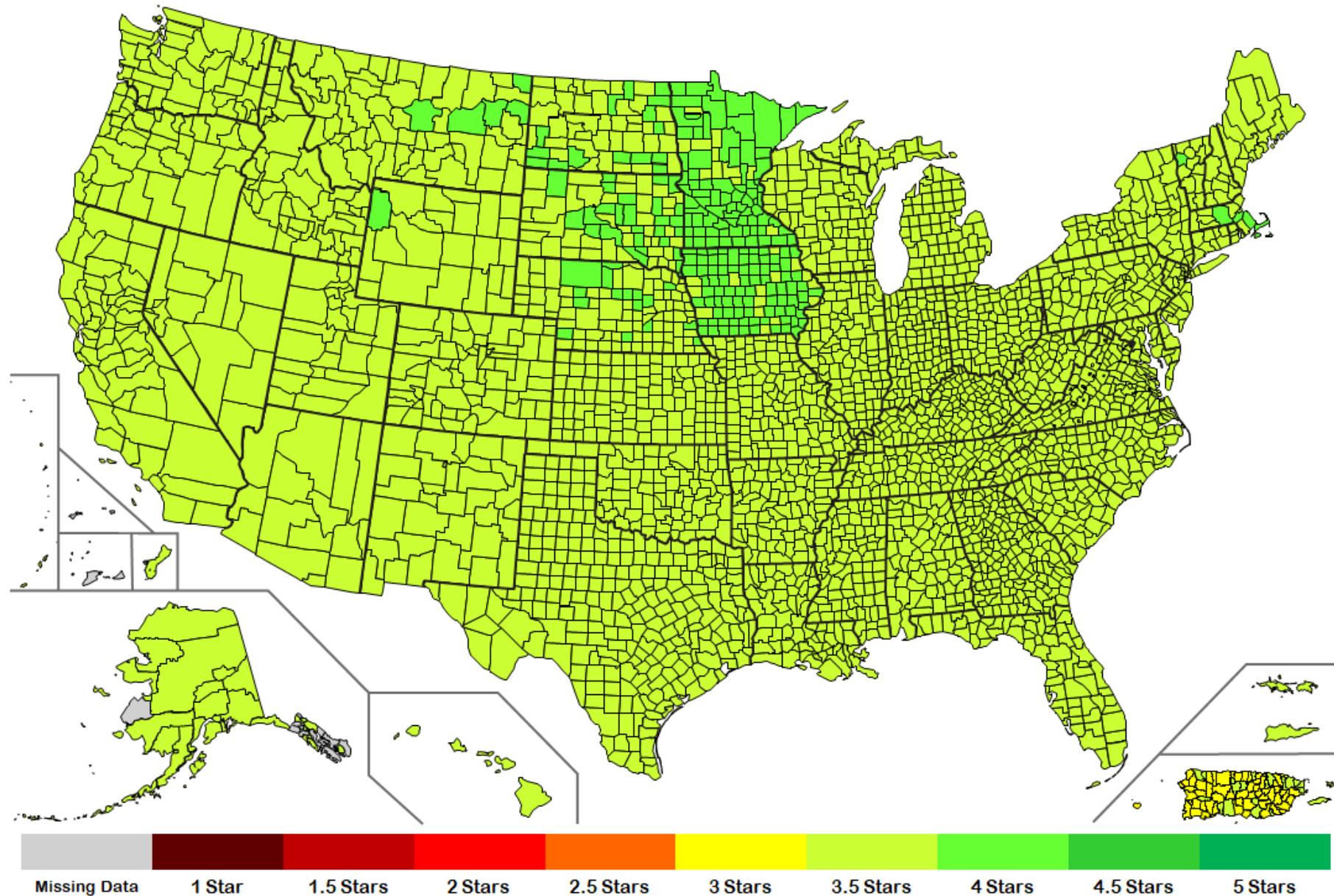
## 2019 Star Ratings - Enrollment Weighted Average MA-PD Overall Rating in Non-EGHP Counties



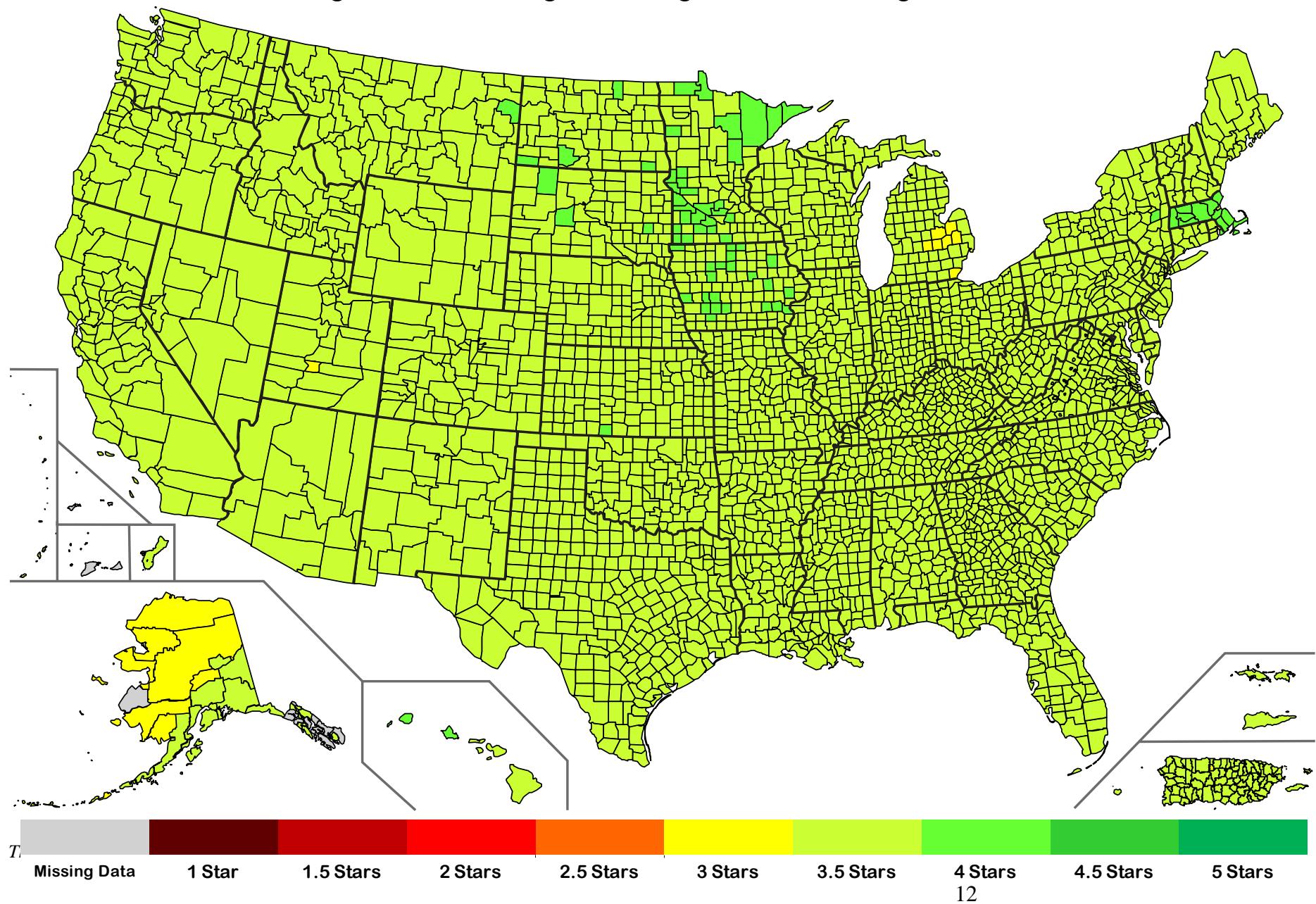
## 2018 Star Ratings - Enrollment Weighted Average MA-PD Overall Rating in Non-EGHP Counties



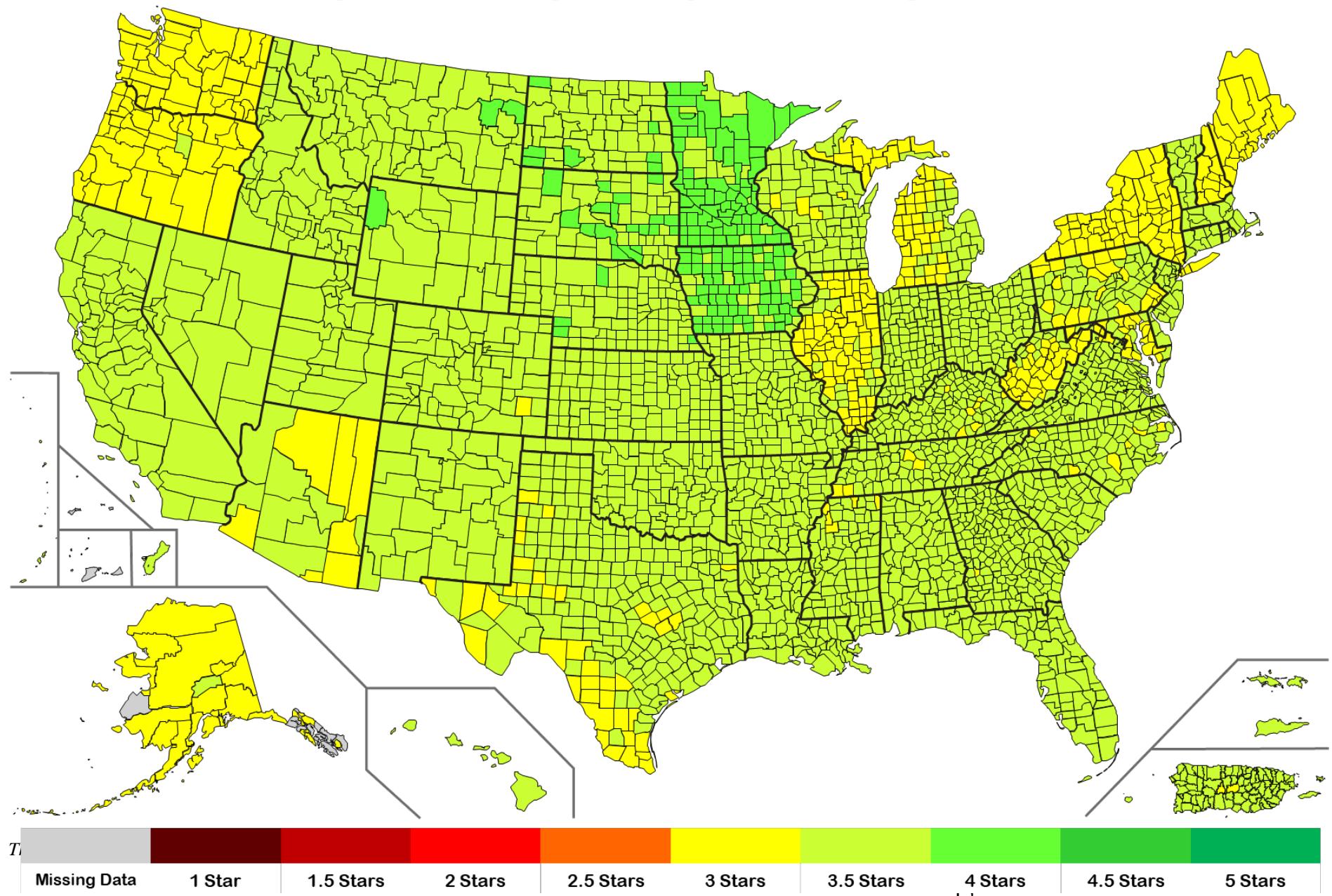
### 2021 Star Ratings - Enrollment Weighted Average PDP Part D Rating in Non-EGHP Counties



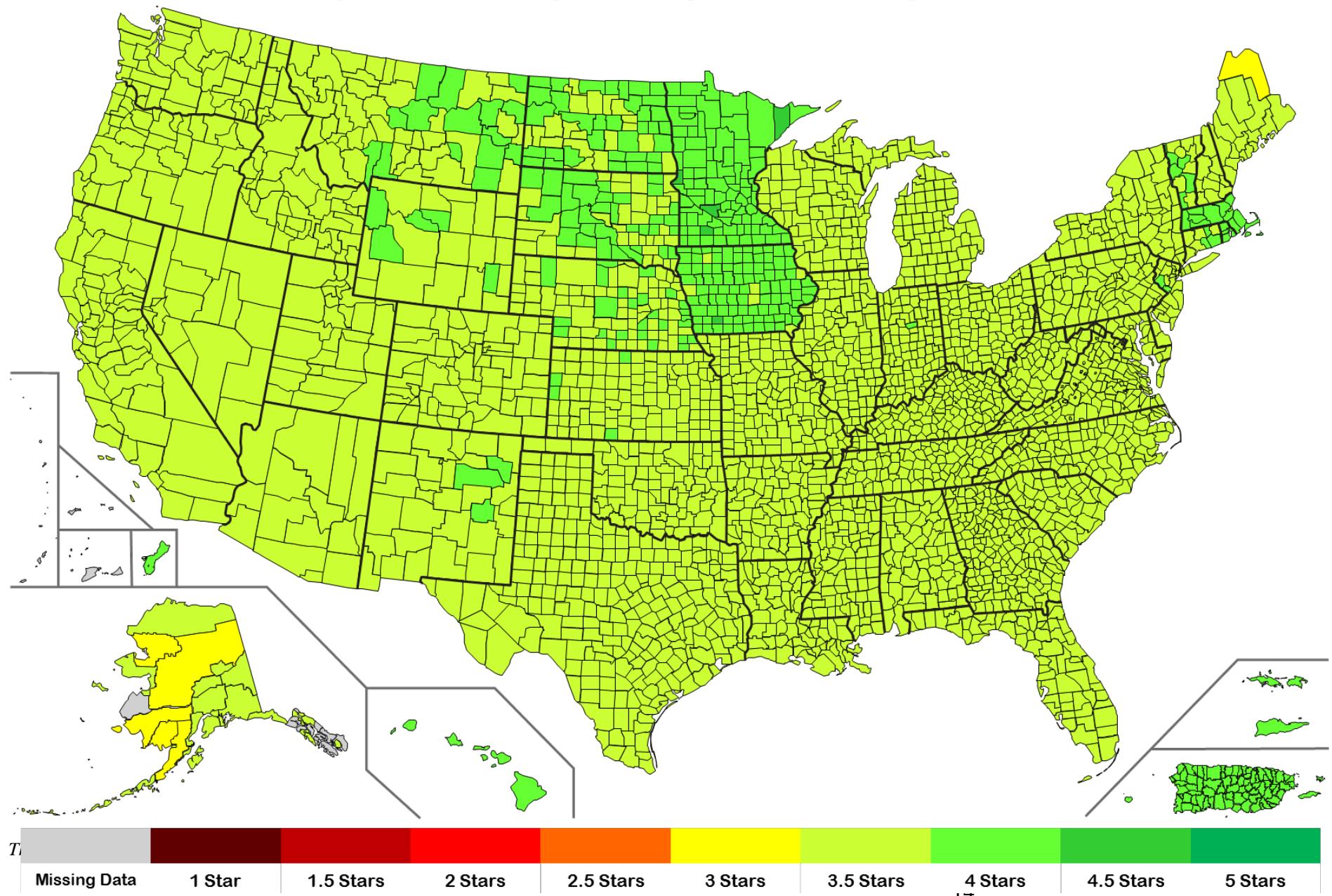
## 2020 Star Ratings - Enrollment Weighted Average PDP Part D Rating in Non-EGHP Counties



## 2019 Star Ratings - Enrollment Weighted Average PDP Part D Rating in Non-EGHP Counties



## 2018 Star Ratings - Enrollment Weighted Average PDP Part D Rating in Non-EGHP Counties



## Average Star Rating for Each Measure

Below we list the average Star Ratings for 2018, 2019, 2020 and 2021 Part C and D measures (Tables 9, 10 and 11) using all measure scores for contracts that are publically reported in a given year.<sup>4</sup> For HEDIS and CAHPS measures, the 2021 average star does not always equal the 2020 average star even though data from the 2020 Star Ratings were used for those measures because the set of contracts has changed slightly from last year.

**Table 9: Average Star Rating by Part C Measure**

2021 Measure Number	Measure	2018 Average Star	2019 Average Star	2020 Average Star	2021 Average Star
C01	Breast Cancer Screening	3.1	3.4	3.5	3.5
C02	Colorectal Cancer Screening	3.4	3.8	3.8	3.9
C03	Annual Flu Vaccine	3.2	3.2	3.2	3.2
C04	Improving or Maintaining Physical Health	2.9	3	3.2	3.2
C05	Improving or Maintaining Mental Health	3.7	3.3	3.9	3.3
C06	Monitoring Physical Activity	2.9	2.8	3.2	3.5
C07	Adult BMI Assessment	4.1	4.4	4.2	4.3
C08	Special Needs Plan (SNP) Care Management	3.2	3.2	3.1	3.4
C09	Care for Older Adults – Medication Review	4.1	4.4	4.3	4.3
C10	Care for Older Adults – Functional Status Assessment	4	4.1	4	4
C11	Care for Older Adults – Pain Assessment	4.4	4	4.4	4.5
C12	Osteoporosis Management in Women who had a Fracture	2.6	2.6	3.1	3.1
C13	Diabetes Care – Eye Exam	3.6	3.7	3.8	3.8
C14	Diabetes Care – Kidney Disease Monitoring	3.7	4.2	4.1	4.2
C15	Diabetes Care – Blood Sugar Controlled	4.2	3.7	4.2	4.2
C16	Rheumatoid Arthritis Management	3.4	3	3.6	3.6
C17	Reducing the Risk of Falling	2.5	3	2.5	3
C18	Improving Bladder Control	3.1	3.1	3.2	3.2
C19	Medication Reconciliation Post-Discharge	3.3	2.9	3	3
C20	Statin Therapy for Patients with Cardiovascular Disease	n/a - new in 2019	3.3	3.1	3.1
C21	Getting Needed Care	3.4	3.3	3.3	3.3
C22	Getting Appointments and Care Quickly	3.3	3.4	3.4	3.4
C23	Customer Service	3.4	3.4	3.5	3.5
C24	Rating of Health Care Quality	3.4	3.3	3.3	3.3
C25	Rating of Health Plan	3.2	3.3	3.2	3.2
C26	Care Coordination	3.3	3.4	3.4	3.4
C27	Complaints about the Health Plan	4.3	4	4.9	4.8
C28	Members Choosing to Leave the Plan	4	3.9	3.9	4
C29	Health Plan Quality Improvement	3.6	3.4	3.4	3.2
C30	Plan Makes Timely Decisions about Appeals	4	4.2	4.4	4.3

<sup>4</sup>Changes in the average (mean) measure-level Star Rating do not always reflect changes in performance since for some measures there have been significant changes in industry performance and shifts in the distribution of scores.

2021 Measure Number	Measure	2018 Average Star	2019 Average Star	2020 Average Star	2021 Average Star
C31	Reviewing Appeals Decisions	4	3.9	4.1	4.5
C32	Call Center – Foreign Language Interpreter and TTY Availability	4.5	4.3	4.3	4.3

**Table 10: Average Star Rating by Part D Measure for MA-PDs**

2021 Measure Number	Measure	2018 MA-PD Average Star	2019 MA-PD Average Star	2020 MA-PD Average Star	2021 MA-PD Average Star
D01	Call Center – Foreign Language Interpreter and TTY Availability	4.5	4.3	4.6	4.4
D02	Appeals Auto-Forward	4.8	4.5	4.7	4.2
D03	Appeals Upheld	3.9	3.9	3.8	3.6
D04	Complaints about the Drug Plan	4.3	4	4.9	4.8
D05	Members Choosing to Leave the Plan	3.9	3.9	3.9	4
D06	Drug Plan Quality Improvement	3.7	4.2	3.7	3.5
D07	Rating of Drug Plan	3.2	3.2	3	3
D08	Getting Needed Prescription Drugs	3.4	3.5	3.5	3.5
D09	MPF Price Accuracy	4.7	4.8	4.8	4.9
D10	Medication Adherence for Diabetes Medications	3.3	3.7	3.9	3.7
D11	Medication Adherence for Hypertension (RAS antagonists)	3.7	3.1	3.3	3.2
D12	Medication Adherence for Cholesterol (Statins)	3.3	3.2	3.4	3.3
D13	MTM Program Completion Rate for CMR	3.5	3.3	3.6	3.7
D14	Statin Use in Persons with Diabetes (SUPD)	n/a - new in 2019	3.3	3.5	3.1

**Table 11: Average Star Rating by Part D Measure for PDPs**

2021 Measure Number	Measure	2018 PDP Average Star	2019 PDP Average Star	2020 PDP Average Star	2021 PDP Average Star
D01	Call Center – Foreign Language Interpreter and TTY Availability	3.9	4.2	4.1	4.2
D02	Appeals Auto-Forward	4.4	4.2	4.5	4.1
D03	Appeals Upheld	3.5	3.1	3.3	3.1
D04	Complaints about the Drug Plan	4.2	3.6	4.4	4.9
D05	Members Choosing to Leave the Plan	3.6	4.1	3.8	4.1
D06	Drug Plan Quality Improvement	3.9	4.2	3.7	4.1
D07	Rating of Drug Plan	3.4	3.3	3.5	3.5
D08	Getting Needed Prescription Drugs	3.4	3.4	3.5	3.6
D09	MPF Price Accuracy	4.6	4.6	4.8	4.9
D10	Medication Adherence for Diabetes Medications	3.2	2.6	3.3	3.9
D11	Medication Adherence for Hypertension (RAS antagonists)	3.2	3	3.2	3.1
D12	Medication Adherence for Cholesterol (Statins)	3.3	3.1	3.3	3.6
D13	MTM Program Completion Rate for CMR	2.8	2.6	3.3	3.6
D14	Statin Use in Persons with Diabetes (SUPD)	n/a - new in 2019	2.9	3	3

*This communication is printed, published, or produced and disseminated at U.S. taxpayer expense.*