DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard Baltimore, Maryland 21244-1850



CENTER FOR MEDICARE

DATE:	April 23,	2015
-------	-----------	------

- **TO:** Part C and D Sponsors, excluding PACE organizations
- FROM: Amy K. Larrick, Acting Director, Medicare Drug Benefit and C & D Data Group
- SUBJECT: Sponsors' review of data used for Star Ratings

It is important that Part C and D sponsors continuously review their underlying measure data that are the basis for the Star Ratings. The purpose of this memo is to remind sponsors of the various datasets and reports available for ongoing monitoring purposes. CMS expects sponsors to routinely monitor these data and immediately alert CMS if errors or anomalies are identified. Contracts that wait to raise issues with their data until CMS' plan preview periods may find there is inadequate time to investigate and resolve them within the production schedule for the fall release of the Star Ratings. For measures that are based on data reported directly from sponsors, any issues or problems should be raised well in advance of CMS' plan preview periods. Results from CMS' reviews for data integrity will be provided to sponsors prior to CMS' first plan preview this summer. Sponsors should send questions about these reviews to CMS during the plan preview period.

The table below provides information about data available for ongoing review of many of the Star Ratings measures. Most of the data are posted in HPMS, under Quality and Performance, and either under the Part C Performance Metrics link, or the Part D Performance Metrics and Reports link. In the table below, we have provided the paths to each dataset. Please note that these datasets often provide much more information than what is used for CMS' Star Ratings. The Star Ratings Technical Notes also provide detailed information about each of the measure calculations.

Measure	Data Source
	Official CAHPS preview reports will be emailed to the Medicare Compliance Officer in August. Official CAHPS plan reports will be mailed (on a CD) to the Medicare Compliance Officer in late September/early October.

Measure	Data Source
HOS measures (Part C)	 HPMS HOS Star Ratings Validation page To access HOS Star Ratings Validation, from the top navigation bar select: "Quality and Performance," then "HOS," then "Star Ratings Validation." Select the appropriate cohort and contract number/name.
	The Cohort 14 (2011-2013) data are currently posted. The Cohort 15 (2012-2014) will be posted by early August.
Complaints about the Health/Drug Plan (Part C and D)	 HPMS Performance pages To access the Complaint Rates Reports, from the left navigation bar select: "Quality and Performance," then "Part D Performance Metrics and Reports," then "Complaint Rates." Select the appropriate report period.
	CMS makes every effort to assign complaints to plans when it is within their control to resolve. Complaints will be re-assigned as described in the CTM Plan Standard Operating Procedures (SOP) Scenario H. Some plans have requested that CMS retroactively reassign CTM cases as a "CMS Issue" after the complaint has been addressed and closed. It is inappropriate for a plan to request retroactive reassignment during the plan preview periods of the Star Ratings data.
	The 2014 reports are currently posted. The 1 st quarter 2015 report will be released by the end of April.
Beneficiary Access and Performance Problems (Part C and D)	Compliance notices
Plan Makes Timely Decisions about Appeals (Part C)	www.medicareappeal.com (see HPMS memo 9/27/12)
	Information regarding the Part C reconsideration process has been available to Medicare Advantage (MA) organizations on the www.medicareappeal.com website for several years. The data available on this website is updated daily; therefore, MA organizations that notice discrepancies or have questions about

Measure	Data Source
	the data should bring these issues to the attention of MAXIMUS as they arise. MA organizations are encouraged to submit any questions they may have about the data to the email box linked under the 'Contact Us' tab on the MAXIMUS Part C appeals website.
Reviewing Appeals Decisions (Part C)	(see HPMS memo 9/27/12) Information regarding the Part C reconsideration process has been available to Medicare Advantage (MA) organizations on the www.medicareappeal.com website for several years. The data available on this website is updated daily; therefore, MA organizations that notice discrepancies or have questions about the data should bring these issues to the attention of MAXIMUS as they arise. MA organizations are encouraged to submit any questions they may have about the data to the email box linked under the 'Contact Us' tab on the MAXIMUS Part C appeals website.
Call Center – Foreign Language Interpreter and TTY Availability (Part C and D)	 HPMS Performance pages To access the Part C Call Center Reports, from the left navigation bar select: "Quality and Performance," then "Part C Performance Metrics," then "Prospective Beneficiary Customer Service Call Center Performance Metrics." To access the Part D Call Center Reports, from the left navigation bar select: "Quality and Performance," then "Part D Performance Metrics and Reports," then "Prospective Beneficiary Customer Service Call Center Performance Metrics." The next set of FL/TTY reports will be released in July 2015.
Appeals Auto–Forward (Part D)	http://www.medicarepartdappeals.com (see HPMS memo 9/27/12)
	Part D plan sponsors should use this website to

Measure	Data Source
	monitor their appeal timeliness and effectuation compliance data to ensure accuracy. The data available on this website is updated daily; therefore, plan sponsors that notice discrepancies or have questions about the data should bring these issues to the attention of MAXIMUS as they arise. Plan sponsors are encouraged to submit any questions about the data to the email box linked under the 'Contact Us' tab on the Part D website.
	 HPMS Performance pages To access the Part D Appeals Reports, from the left navigation bar select: "Quality and Performance," then "Part D Performance Metrics and Reports," then "Appeals Performance" and then select the appropriate report period.
	The 2014 reports are currently posted. The 1 st quarter 2015 report will be released mid-May.
Appeals Upheld (Part D)	http://www.medicarepartdappeals.com (see HPMS memo 9/27/12) Part D plan sponsors should use this website to monitor their appeal timeliness and effectuation compliance data to ensure accuracy. The data available on this website is updated daily; therefore, plan sponsors that notice discrepancies or have questions about the data should bring these issues to the attention of MAXIMUS as they arise. Plan sponsors are encouraged to submit any questions about the data to the email box linked under the 'Contact Us' tab on the Part D website.
	 HPMS Performance pages To access the Part D Appeals Reports, from the left navigation bar select: "Quality and Performance," then "Part D Performance Metrics and Reports," then "Appeals Performance." Select the appropriate report period.
	The 2014 reports are currently posted. The 1 st quarter 2015 report will be released mid-May.

Measure	Data Source
High Risk Medication (Part D)	Patient Safety Analysis Website - https://PartD.ProgramInfo.US/PatientSafety
	Access to this website is granted via each contract's compliance officer.
Medication Adherence for Oral Diabetes Medications (Part D)	Patient Safety Analysis Website - https://PartD.ProgramInfo.US/PatientSafety
	Access to this website is granted via each contract's compliance officer.
Medication Adherence for Hypertension (RAS antagonists) (Part D)	Patient Safety Analysis Website - https://PartD.ProgramInfo.US/PatientSafety
	Access to this website is granted via each contract's compliance officer.
Medication Adherence for Cholesterol (Statins) (Part D)	Patient Safety Analysis Website - https://PartD.ProgramInfo.US/PatientSafety
	Access to this website is granted via each contract's compliance officer.
SNP Care Management (Part C)	HPMS Plan Reporting Data Validation page-
	To access this page, from the top menu select "Monitoring," then "Plan Reporting Data Validation." Select the appropriate contract year. Select the PRDVM Reports. Select "Score Detail Report." Select the Special Needs Care (SNP) Management reporting section.
Members Who Had a Comprehensive Review of Their Medications by a Pharmacist (or Other Health Professional) (Part D)	HPMS Plan Reporting Data Validation page-
	To access this page, from the top menu select "Monitoring," then "Plan Reporting Data Validation." Select the appropriate contract year. Select the PRDVM Reports. Select "Score Detail Report." Select the Medication Therapy Management Program reporting section.

Please submit questions about Part C and D Star Ratings measures to <u>PartCandDStarRatings@cms.hhs.gov</u>. Please do not submit secure emails requiring CMS to login to access the questions as multiple staff triage your emails, and it is difficult to create and share login information. If you need to share personally identifying information (PII) with us, please contact us with an unsecure email to discuss a safe way to transfer the secure data. You should add the ratings mailbox to your safe sender list so our messages are not flagged as spam. Thank you for your continued support of CMS' Star Ratings.