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A CUT ABOVE THE REST: SUMMARY OF 2025 STAR RATING CUT POINT CHANGES

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CMS released the 2025 Medicare Star Rating Technical Notes in the Second Plan Preview on Friday, September 6th. The publication of this document allows for analysis of the measure-level cut points changes. This paper analyzes the latest cut point changes to understand how Tukey, guardrails, and changes in the overall quality performance have led to the highest Star Rating cut points in the history of the Star Ratings program.

Refresher on the CMS Star Rating Cut Points

For each quality measure within the Medicare Star Rating program, CMS establishes a set of "cut points" or thresholds that Medicare Advantage and Part D (MA-PD) contracts need to meet in order to receive a 2, 3, 4, or 5-star rating for that individual measure. Contracts with measure scores CMS identifies to be based on inaccurate or biased data receive 1 star. These cut points are determined based on a clustering algorithm that groups contracts with similar measure-level performance. For this reason, if all contracts were to decline in quality performance, cut points would likely decline as well.

The Tukey Outer Fence Outlier removal logic ("Tukey") was applied for the first time within the 2024 Star Ratings. The initially published 2024 Star Ratings (October 2023) applied guardrails limiting the movement by 5% between the CMS-simulated 2023 cut points with Tukey and the 2024 cut points. On June 19, 2024, CMS published new cut points with guardrails instead limiting the movement by 5% between the actual 2023 cut points, without Tukey (rather than the simulated Tukey 2023 cut points), and the 2024 cut points.

As the final planned step in improving cut point stability, Tukey removes contracts' data points that are deemed as "outlier performers" before applying the clustering logic to the measure-level cut points. Because there are often more low-performing outliers than high-performing outliers – demonstrated by the historically volatile 2 and 3 star cut points – this change increased many cut points for 2024, but the changes were bound by the updated application of guardrails. As this change limited the movement in 2024, we are now seeing a significant change in 2025 Star Ratings cut points again due to the ongoing migration towards Tukey cut points. This migration continues to make it harder each year for contracts to improve or maintain their Star Rating overall.

The discussion that follows attempts to summarize the changes in MA-PD Part C and Part D cut points. For the full list of 2025 Star Rating cut points, refer to Appendix A. While Part D Plan (PDP) cut points have also changed significantly, they have been excluded from this summary.

Summary of Cut Point Changes

Far more cut points have increased than decreased, indicating a combined impact of the continual movement to Tukey methodology and improved contract performance between the 2022 and 2023 measurement years. Figures 1 through 4 below show the number of Part C and Part D measure-level cut points that have increased and decreased and the magnitude of their change. Appendix B of this report also lists all measures and shows which cut points have increased and decreased. Overall, more measure-level cut points have seen increases than decreases between the 2024 and 2025 Star Ratings. The biggest drivers of these changes are the continued implementation of the Tukey Outer Fence Outlier removal logic and improved performance between the 2022 and 2023 measurement years.
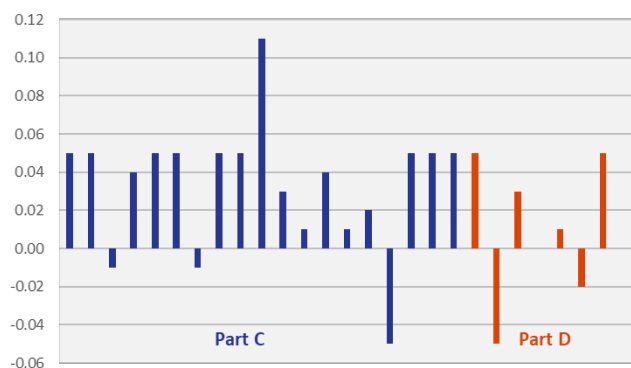

Figure 1

2 Star Cutpoint Changes

Figure 2
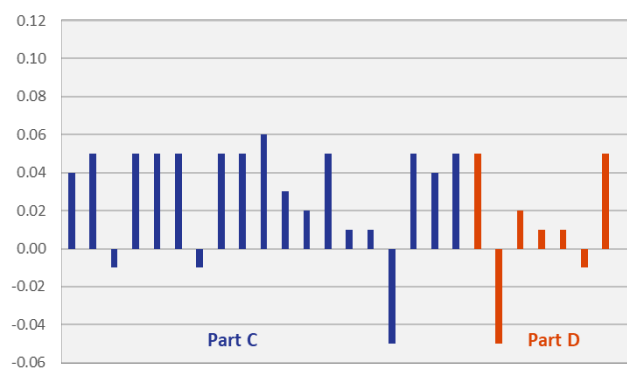
3 Star Cutpoint Changes

Figure 3
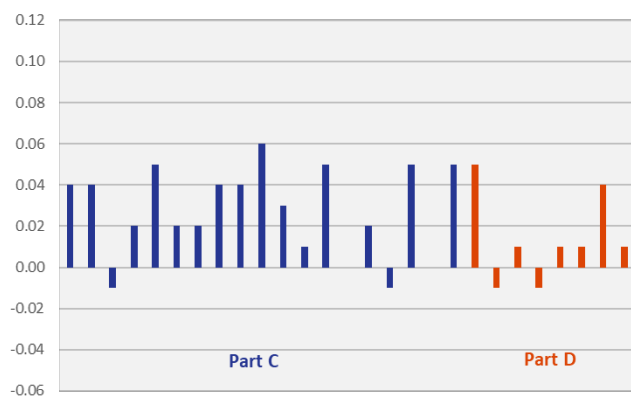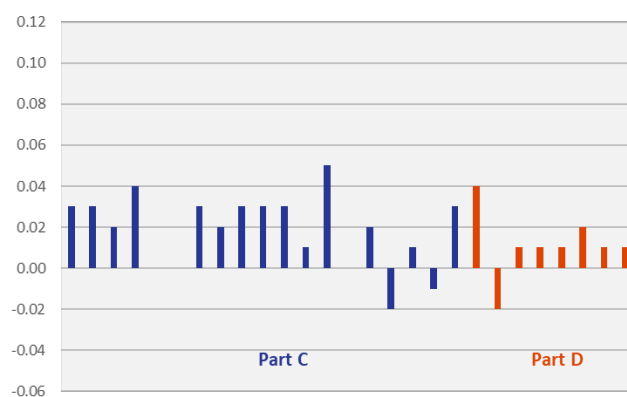
4 Star Cutpoint Changes

Figure 4

5 Star Cutpoint Changes

The figures above exclude the following measures:

- *Part C and D Improvement Measures, Complaints About the Health Plan, and Complaints About the Drug Plan*. These measures are excluded for illustrative purposes only because they are not measured on a 0 to 1 scale. All of the measures shown above use the same 0 to 100 scale.

- *CAHPS measures*. Cut points for these measures do not use the clustering methodology and the 5% guardrails do not apply.

More information on the excluded measures can be found in the appendices.

Additionally, the 5% guardrails do not apply for measures in their first three years of the Star Rating program. Controlling Blood Pressure returned to the Star Rating program in 2023; therefore, this measure is now in its 3rd year and guardrails do not apply. This is the measure showing changes above 5% in Figures 1-3 above.

Larger variation in 2 and 3 star cut points. Overall, we see more variation and more movement in the 2 and 3 star cut points. This is consistent with historical performance where the industry has seen more variability in low-performing contracts, and the trend continues even with the implementation of the Tukey methodology.

Guardrails continue to significantly limit cut point movement. Due to the change in Tukey implementation in the June release of 2024 Star Ratings cut points, the full impact of the change in methodology was restricted in the initial implementation year. Many cut points have an additional Tukey impact that is now playing a part in reaching the 5% guardrails for the second year in a row.

Chart 1 below shows the number of Part C and Part D measure-level cut points that have changed by 5% between the 2024 and 2025 Star Ratings. These counts exclude the same measures as Figures 1 through 4, indicating the number of measures that reached the guardrail limit for 2025.

Chart 1

SY2025	2 Star	3 Star	4 Star	5 Star	Total
Part C	10	10	4	1	25
Part D	3	3	1	0	7
Total	13	13	5	1	32

For comparison, Chart 2 below shows the same figures for the changes between the 2023 and final 2024 Star Ratings.

Chart 2

SY2024	2 Star	3 Star	4 Star	5 Star	Total
Part C	10	10	7	2	29
Part D	2	3	1	1	7
Total	12	13	8	3	36

While the number of cut points reaching the guardrail limit is high, there is actually a decrease from the prior cycle. This aligns with the expectation that the migration towards Tukey, limited by the guardrails, will take a few years to completely play out, but changes should decrease in each subsequent year.

Cut Point Changes by Measure Type

The discussion that follows summarizes cut point changes by measure type, in descending order of measure weight.

CAHPS. Consumer Assessment of Healthcare Provider and Systems (CAHPS) survey measures comprise 32% of the total 2025 Overall Star Ratings. CAHPS cut points are not determined using the clustering methodology and therefore are not impacted by Tukey. Most of the Part C and Part D cut points are either unchanged or slightly increased, indicating that contract performance for these measures is similar between 2025 (2023 measurement period) and 2024 (2022 measurement period).

Measure	Type	Weight	Cutpoint Change			
			2 Star	3 Star	4 Star	5 Star
C03: Annual Flu Vaccine	Part C	1	-0.02	-0.02	-0.03	-0.02
C19: Getting Needed Care	Part C	4	0.01	0.01	0.01	0.00
C20: Getting Appointments and Care Quickly	Part C	4	0.06	0.06	0.06	0.06
C21: Customer Service	Part C	4	0.00	0.00	0.01	0.00
C22: Rating of Health Care Quality	Part C	4	0.00	0.00	0.00	0.00
C23: Rating of Health Plan	Part C	4	0.00	0.01	0.00	0.00
C24: Care Coordination	Part C	4	0.01	0.01	0.01	0.01
D05: Rating of Drug Plan	Part D - MAPD	4	0.00	0.01	0.00	0.00
D06: Getting Needed Prescription Drugs	Part D - MAPD	4	0.00	-0.01	0.00	0.00
D05: Rating of Drug Plan	Part D - PDP	4	-0.01	0.01	0.02	0.00
D06: Getting Needed Prescription Drugs	Part D - PDP	4	-0.01	-0.01	-0.01	-0.01

Administrative. Administrative measures comprise 25% of the total 2025 Overall Star Ratings weight. Cut points for these measures have almost all increased, many of them by the maximum amount allowed by the guardrails. Note that some of the administrative measures (Complaints about the Health/Drug Plan and Members Choosing to Leave the Plan) are "lower is better" measures, so the direction of the cut point change should be considered in the opposite direction as other measures. In addition, Complaints about the Health/Drug Plan measures reflect the rate of complaints about the health/drug plan per 1,000 members; these are not measured on a 0 to 100 scale. While this measure is bound by the guardrails, the calculation of the guardrail is different than for all other measures – it is 5 percent of the difference between the minimum and maximum measure values after the removal of Tukey outliers.

Measure	Type	Weight	Cutpoint Change			
			2 Star	3 Star	4 Star	5 Star
C05: Special Needs Plan (SNP) Care Management	Part C	1	🔴 0.04	🔴 0.05	🔴 0.02	🔴 0.04
C25: Complaints about the Health Plan * **	Part C	4	🔴 -0.07	🔴 -0.07	🔴 -0.07	🔴 -0.02
C26: Members Choosing to Leave the Plan *	Part C	4	🔴 -0.05	🔴 -0.05	🔴 -0.01	🔴 -0.02
C28: Plan Makes Timely Decisions about Appeals	Part C	4	🔴 0.05	🔴 0.05	🔴 0.05	🔴 0.01
C29: Reviewing Appeals Decisions	Part C	4	🔴 0.05	🔴 0.04	🟡 0.00	🟢 -0.01
C30: Call Center – Foreign Language Interpreter and TTY Availability	Part C	4	🔴 0.05	🔴 0.05	🔴 0.05	🔴 0.03
D01: Call Center – Foreign Language Interpreter and TTY Availability	Part D - MAPD	4	🔴 0.05	🔴 0.05	🔴 0.05	🔴 0.04
D02: Complaints about the Drug Plan * **	Part D - MAPD	4	🔴 -0.07	🔴 -0.07	🔴 -0.07	🔴 -0.02
D03: Members Choosing to Leave the Plan *	Part D - MAPD	4	🔴 -0.05	🔴 -0.05	🔴 -0.01	🔴 -0.02
D01: Call Center – Foreign Language Interpreter and TTY Availability	Part D - PDP	4	🔴 0.05	🔴 0.05	🔴 0.02	🟡 0.00
D02: Complaints about the Drug Plan * **	Part D - PDP	4	🔴 -0.01	🔴 -0.01	🔴 -0.01	🔴 -0.01
D03: Members Choosing to Leave the Plan *	Part D - PDP	4	🔴 -0.03	🔴 -0.01	🔴 -0.02	🔴 -0.02

"Lower is better" measure: lower cutpoints are more difficult to achieve

*** Measure on differing scale: measure values are not on a 0-100% scale*

HEDIS. HEDIS measures represent 19% of the total 2025 Overall Star Ratings weight. Cut points for these measures have almost all increased, many of them to the maximum amount allowed by the guardrails.

Measure	Type	Weight	Cutpoint Change			
			2 Star	3 Star	4 Star	5 Star
C01: Breast Cancer Screening	Part C	1	🔴 0.05	🔴 0.04	🔴 0.04	🔴 0.03
C02: Colorectal Cancer Screening	Part C	1	🔴 0.05	🔴 0.05	🔴 0.04	🔴 0.03
C06: Care for Older Adults – Medication Review	Part C	1	🔴 0.05	🔴 0.05	🔴 0.05	🟡 0.00
C07: Care for Older Adults – Pain Assessment	Part C	1	🔴 0.05	🔴 0.05	🔴 0.02	🟡 0.00
C08: Osteoporosis Management in Women who had a Fracture	Part C	1	🟢 -0.01	🟢 -0.01	🔴 0.02	🔴 0.03
C09: Diabetes Care – Eye Exam	Part C	1	🔴 0.05	🔴 0.05	🔴 0.04	🔴 0.02
C10: Diabetes Care – Blood Sugar Controlled	Part C	3	🔴 0.05	🔴 0.05	🔴 0.04	🔴 0.03
C11: Controlling Blood Pressure	Part C	3	🔴 0.11	🔴 0.06	🔴 0.06	🔴 0.03
C14: Medication Reconciliation Post-Discharge	Part C	1	🔴 0.04	🔴 0.05	🔴 0.05	🔴 0.05
C15: Plan All Cause Readmissions *	Part C	3	🟢 0.01	🟢 0.01	🟡 0.00	🟡 0.00
C16: Statin Therapy for Patients with Cardiovascular Disease	Part C	1	🔴 0.02	🔴 0.01	🔴 0.02	🔴 0.02
C17: Transitions of Care	Part C	1	🔴 0.04	🟡 0.00	🟢 -0.01	🟢 -0.01
C18: Follow-Up after Emergency Department Visit for People with Multiple H	Part C	1	🟢 -0.05	🟡 0.00	🟡 0.00	🔴 0.01

"Lower is better" measure: lower cutpoints are more difficult to achieve

Pharmacy. Pharmacy measures make up 12% of the total 2025 Overall Star Ratings weight. As with other measure types, most of the pharmacy measure cut points increased. The upward trend in Medication Adherence measure cut points has slowed for the second year in a row, with a few of the cutpoints staying the same or decreasing.

Measure	Type	Weight	Cutpoint Change			
			2 Star	3 Star	4 Star	5 Star
D07: MPF Price Accuracy	Part D - MAPD	1	🔴 0.03	🔴 0.02	🔴 0.01	🔴 0.01
D08: Medication Adherence for Diabetes Medications	Part D - MAPD	3	🟡 0.00	🔴 0.01	🟢 -0.01	🔴 0.01
D09: Medication Adherence for Hypertension (RAS antagonists)	Part D - MAPD	3	🔴 0.01	🔴 0.01	🔴 0.01	🔴 0.01
D10: Medication Adherence for Cholesterol (Statins)	Part D - MAPD	3	🟢 -0.02	🟢 -0.01	🔴 0.01	🔴 0.02
D11: MTM Program Completion Rate for CMR	Part D - MAPD	1	🔴 0.05	🔴 0.05	🔴 0.04	🔴 0.01
D12: Statin Use in Persons with Diabetes (SUPD)	Part D - MAPD	1	🟡 0.00	🟡 0.00	🔴 0.01	🔴 0.01
D07: MPF Price Accuracy	Part D - PDP	1	🔴 0.01	🔴 0.01	🔴 0.01	🔴 0.01
D08: Medication Adherence for Diabetes Medications	Part D - PDP	3	🔴 0.01	🟡 0.00	🟡 0.00	🟡 0.00
D09: Medication Adherence for Hypertension (RAS antagonists)	Part D - PDP	3	🟡 0.00	🟡 0.00	🟢 -0.01	🟢 -0.02
D10: Medication Adherence for Cholesterol (Statins)	Part D - PDP	3	🔴 0.02	🔴 0.01	🟡 0.00	🟢 -0.01
D11: MTM Program Completion Rate for CMR	Part D - PDP	1	🟢 -0.04	🔴 0.03	🔴 0.05	🔴 0.03
D12: Statin Use in Persons with Diabetes (SUPD)	Part D - PDP	1	🟢 -0.01	🟡 0.00	🟡 0.00	🟡 0.00

Improvement. Improvement measures comprise about 10% of the total 2025 Overall Star Ratings weight, and most of the Part C and Part D cut points increased in 2025. Note that the 3 Star cut point remains unchanged because CMS sets this cut point to 0.00 every year.

Measure	Type	Weight	Cutpoint Change			
			2 Star	3 Star	4 Star	5 Star
C27: Health Plan Quality Improvement **	Part C	5	🔴 0.08	🟡 0.00	🟢 -0.02	🔴 0.04
D04: Drug Plan Quality Improvement **	Part D - MAPD	5	🔴 0.03	🟡 0.00	🔴 0.04	🔴 0.04
D04: Drug Plan Quality Improvement **	Part D - PDP	5	🟢 -0.16	🟡 0.00	🔴 0.10	🔴 0.19

"Lower is better" measure: lower cutpoints are more difficult to achieve

** *Measure on differing scale: measure values are not on a 0-100% scale*

HOS. HOS measures make up about 3% of the total 2025 Overall Star Ratings weight. The majority of cut points are increased with Monitoring Physical Activity being the outlier. Previous analyses have shown that Tukey has almost no impact on these measures, so these changes are expected to be primarily driven by changes in performance.

Measure	Type	Weight	Cutpoint Change			
			2 Star	3 Star	4 Star	5 Star
C04: Monitoring Physical Activity	Part C	1	🟢 -0.01	🟢 -0.01	🟢 -0.01	🔴 0.02
C12: Reducing the Risk of Falling	Part C	1	🔴 0.03	🔴 0.03	🔴 0.03	🔴 0.03
C13: Improving Bladder Control	Part C	1	🔴 0.01	🔴 0.02	🔴 0.01	🔴 0.01

Conclusion

The Tukey Outer Fence Outlier removal logic was applied for the first time within the 2024 Star Ratings cut points. Initially, the full impact of Tukey was evident in the initial 2024 Star Ratings, but the updated 2024 Star Ratings restricted the application of guardrails and limited the impact of Tukey in a single year. Because of this change, the impact of Tukey will be spread out over a few years, causing many measure-level cut points to reach the 5% guardrail for the second year in a row. Similar to last year, there is more

movement in the 2 and 3 star cut points due to the increased variability in low-performing contracts which continues even after the Tukey removal of outer fence outliers.

While Tukey will eventually reduce year-over-year cut point volatility, for the next few years we will continue to see large changes in cut points. The increase in 2025 Star Ratings cut points will lead to a decline in contract-level 2025 Overall Star Ratings and a reduction in 2026 MA Quality-Based Payments, or QBPs. Over the next few years, cut points will likely continue to increase, making it even more important for Medicare Advantage Organizations to increase their focus and investment on Star Ratings.

Please contact Lisa Winters at Lisa.Winters@wakely.com or Suzanna-Grace Tritt at SuzannaGrace.Tritt@wakely.com with any questions or to follow up on any of the concepts presented here.

Appendix A: 2025 Measure-Level Cut Points

The table below contains the 2025 cut points released by CMS on Friday, September 6th.

Measure	Type	Cut Point Change from 2024 to 2025			
		2 Star	3 Star	4 Star	5 Star
C01: Breast Cancer Screening	Part C	0.05	0.04	0.04	0.03
C02: Colorectal Cancer Screening	Part C	0.05	0.05	0.04	0.03
C03: Annual Flu Vaccine	Part C	-0.02	-0.02	-0.03	-0.02
C04: Monitoring Physical Activity	Part C	-0.01	-0.01	-0.01	0.02
C05: Special Needs Plan (SNP) Care Management	Part C	0.04	0.05	0.02	0.04
C06: Care for Older Adults – Medication Review	Part C	0.05	0.05	0.05	0.00
C07: Care for Older Adults – Pain Assessment	Part C	0.05	0.05	0.02	0.00
C08: Osteoporosis Management in Women who had a Fracture	Part C	-0.01	-0.01	0.02	0.03
C09: Diabetes Care – Eye Exam	Part C	0.05	0.05	0.04	0.02
C10: Diabetes Care – Blood Sugar Controlled	Part C	0.05	0.05	0.04	0.03
C11: Controlling Blood Pressure	Part C	0.11	0.06	0.06	0.03
C12: Reducing the Risk of Falling	Part C	0.03	0.03	0.03	0.03
C13: Improving Bladder Control	Part C	0.01	0.02	0.01	0.01
C14: Medication Reconciliation Post-Discharge	Part C	0.04	0.05	0.05	0.05
C16: Statin Therapy for Patients with Cardiovascular Disease	Part C	0.02	0.01	0.02	0.02
C17: Transitions of Care	Part C	0.04	0.00	-0.01	-0.01
C18: Follow-Up after ED Visit for People with Multiple Conditions	Part C	-0.05	0.00	0.00	0.01
C19: Getting Needed Care	Part C	0.01	0.01	0.01	0.00
C20: Getting Appointments and Care Quickly	Part C	0.06	0.06	0.06	0.06
C21: Customer Service	Part C	0.00	0.00	0.01	0.00
C22: Rating of Health Care Quality	Part C	0.00	0.00	0.00	0.00
C23: Rating of Health Plan	Part C	0.00	0.01	0.00	0.00
C24: Care Coordination	Part C	0.01	0.01	0.01	0.01
C28: Plan Makes Timely Decisions about Appeals	Part C	0.05	0.05	0.05	0.01
C29: Reviewing Appeals Decisions	Part C	0.05	0.04	0.00	-0.01
C30: Call Center – Foreign Language Interpreter and TTY Availability	Part C	0.05	0.05	0.05	0.03
D01: Call Center – Foreign Language Interpreter and TTY Availability	Part D	0.05	0.05	0.05	0.04
D05: Rating of Drug Plan	Part D	0.00	0.01	0.00	0.00
D06: Getting Needed Prescription Drugs	Part D	0.00	-0.01	0.00	0.00
D07: MPF Price Accuracy	Part D	0.03	0.02	0.01	0.01
D08: Medication Adherence for Diabetes Medications	Part D	0.00	0.01	-0.01	0.01
D09: Medication Adherence for Hypertension (RAS antagonists)	Part D	0.01	0.01	0.01	0.01
D10: Medication Adherence for Cholesterol (Statins)	Part D	-0.02	-0.01	0.01	0.02
D11: MTM Program Completion Rate for CMR	Part D	0.05	0.05	0.04	0.01
D12: Statin Use in Persons with Diabetes (SUPD)	Part D	0.00	0.00	0.01	0.01

Measure	Type	Cut Point Change from 2024 to 2025			
		2 Star	3 Star	4 Star	5 Star
"Lower is better" measures					
C15: Plan All Cause Readmissions	Part C	🟢 0.01	🟢 0.01	🟡 0.00	🟡 0.00
C26: Members Choosing to Leave the Plan	Part C	🔴 -0.05	🔴 -0.05	🔴 -0.01	🔴 -0.02
D03: Members Choosing to Leave the Plan	Part D	🔴 -0.05	🔴 -0.05	🔴 -0.01	🔴 -0.02
Measures not on 0-100 scale					
C25: Complaints about the Health Plan*	Part C	🔴 -0.07	🔴 -0.07	🔴 -0.07	🔴 -0.02
C27: Health Plan Quality Improvement	Part C	🔴 0.08	🟡 0.00	🟢 -0.02	🔴 0.04
D02: Complaints about the Drug Plan*	Part D	🔴 -0.07	🔴 -0.07	🔴 -0.07	🔴 -0.02
D04: Drug Plan Quality Improvement	Part D	🔴 0.03	🟡 0.00	🔴 0.04	🔴 0.04

Appendix B: 2024 and 2025 Measure-Level Cut Point Changes

The table below describes the measure-level cut point changes between 2024 and 2025 Star Ratings. Green shading indicates that it is easier to achieve that level of star rating than previously (or in other words, the cut point has decreased), yellow indicates no change, and red indicates that it is harder than before to achieve that measure level star rating.

Measure	Type	Cut Point Change from 2024 to 2025			
		2 Star	3 Star	4 Star	5 Star
C01: Breast Cancer Screening	Part C	0.05	0.04	0.04	0.03
C02: Colorectal Cancer Screening	Part C	0.05	0.05	0.04	0.03
C03: Annual Flu Vaccine	Part C	-0.02	-0.02	-0.03	-0.02
C04: Monitoring Physical Activity	Part C	-0.01	-0.01	-0.01	0.02
C05: Special Needs Plan (SNP) Care Management	Part C	0.04	0.05	0.02	0.04
C06: Care for Older Adults – Medication Review	Part C	0.05	0.05	0.05	0.00
C07: Care for Older Adults – Pain Assessment	Part C	0.05	0.05	0.02	0.00
C08: Osteoporosis Management in Women who had a Fracture	Part C	-0.01	-0.01	0.02	0.03
C09: Diabetes Care – Eye Exam	Part C	0.05	0.05	0.04	0.02
C10: Diabetes Care – Blood Sugar Controlled	Part C	0.05	0.05	0.04	0.03
C11: Controlling Blood Pressure	Part C	0.11	0.06	0.06	0.03
C12: Reducing the Risk of Falling	Part C	0.03	0.03	0.03	0.03
C13: Improving Bladder Control	Part C	0.01	0.02	0.01	0.01
C14: Medication Reconciliation Post-Discharge	Part C	0.04	0.05	0.05	0.05
C15: Plan All Cause Readmissions	Part C	0.01	0.01	0.00	0.00
C16: Statin Therapy for Patients with Cardiovascular Disease	Part C	0.02	0.01	0.02	0.02
C17: Transitions of Care	Part C	0.04	0.00	-0.01	-0.01
C18: Follow-Up after ED Visit for People with Multiple Conditions	Part C	-0.05	0.00	0.00	0.01
C19: Getting Needed Care	Part C	0.01	0.01	0.01	0.00
C20: Getting Appointments and Care Quickly	Part C	0.06	0.06	0.06	0.06
C21: Customer Service	Part C	0.00	0.00	0.01	0.00
C22: Rating of Health Care Quality	Part C	0.00	0.00	0.00	0.00
C23: Rating of Health Plan	Part C	0.00	0.01	0.00	0.00
C24: Care Coordination	Part C	0.01	0.01	0.01	0.01
C28: Plan Makes Timely Decisions about Appeals	Part C	0.05	0.05	0.05	0.01
C29: Reviewing Appeals Decisions	Part C	0.05	0.04	0.00	-0.01
C30: Call Center – Foreign Language Interpreter and TTY Availability	Part C	0.05	0.05	0.05	0.03
D01: Call Center – Foreign Language Interpreter and TTY Availability	Part D	0.05	0.05	0.05	0.04
D05: Rating of Drug Plan	Part D	0.00	0.01	0.00	0.00
D06: Getting Needed Prescription Drugs	Part D	0.00	-0.01	0.00	0.00
D07: MPF Price Accuracy	Part D	0.03	0.02	0.01	0.01
D08: Medication Adherence for Diabetes Medications	Part D	0.00	0.01	-0.01	0.01
D09: Medication Adherence for Hypertension (RAS antagonists)	Part D	0.01	0.01	0.01	0.01
D10: Medication Adherence for Cholesterol (Statins)	Part D	-0.02	-0.01	0.01	0.02
D11: MTM Program Completion Rate for CMR	Part D	0.05	0.05	0.04	0.01
D12: Statin Use in Persons with Diabetes (SUPD)	Part D	0.00	0.00	0.01	0.01

Measure	Type	Cut Point Change from 2024 to 2025			
		2 Star	3 Star	4 Star	5 Star
"Lower is better" measures					
C26: Members Choosing to Leave the Plan	Part C	● -0.05	● -0.05	● -0.01	● -0.02
D03: Members Choosing to Leave the Plan	Part D	● -0.05	● -0.05	● -0.01	● -0.02
Measures not on 0-100 scale					
C25: Complaints about the Health Plan	Part C	● -0.07	● -0.07	● -0.07	● -0.02
C27: Health Plan Quality Improvement	Part C	● 0.08	● 0.00	● -0.02	● 0.04
D02: Complaints about the Drug Plan	Part D	● -0.07	● -0.07	● -0.07	● -0.02
D04: Drug Plan Quality Improvement	Part D	● 0.03	● 0.00	● 0.04	● 0.04

Appendix C: 2024 Initial and Updated Measure-Level Cut Points

The table below describes the measure-level cut point changes between the initial and updated 2024 Star Ratings. Green shading indicates that it is easier to achieve that level of star rating than previously (or in other words, the cut point has decreased), yellow indicates no change, and red indicates that it is harder than before to achieve that measure level star rating.

Measure	Type	Cut Point Change from Initial to Updated 2024			
		2 Star	3 Star	4 Star	5 Star
C01: Breast Cancer Screening	Part C	-0.04	0.00	0.00	0.00
C02: Colorectal Cancer Screening	Part C	-0.02	-0.01	0.00	0.00
C03: Annual Flu Vaccine	Part C	0.00	0.00	0.00	0.00
C04: Monitoring Physical Activity	Part C	0.00	0.00	0.00	0.00
C05: Special Needs Plan (SNP) Care Management	Part C	0.00	0.00	0.00	0.00
C06: Care for Older Adults – Medication Review	Part C	-0.24	-0.09	-0.06	0.00
C07: Care for Older Adults – Pain Assessment	Part C	-0.19	-0.07	-0.01	0.00
C08: Osteoporosis Management in Women who had a Fracture	Part C	-0.01	-0.02	-0.05	-0.03
C09: Diabetes Care – Eye Exam	Part C	0.00	0.00	0.00	0.00
C10: Diabetes Care – Blood Sugar Controlled	Part C	-0.14	-0.05	0.00	0.00
C11: Controlling Blood Pressure	Part C	0.00	0.00	0.00	0.00
C12: Reducing the Risk of Falling	Part C	0.00	0.00	0.00	0.00
C13: Improving Bladder Control	Part C	0.00	0.00	0.00	0.00
C14: Medication Reconciliation Post-Discharge	Part C	0.00	0.00	0.00	0.00
C15: Plan All Cause Readmissions	Part C	0.00	0.00	0.00	0.00
C16: Statin Therapy for Patients with Cardiovascular Disease	Part C	0.00	0.00	0.00	0.00
C17: Transitions of Care	Part C	0.00	0.00	0.00	0.00
C18: Follow-Up after ED Visit for People with Multiple Conditions	Part C	0.00	0.00	0.00	0.00
C19: Getting Needed Care	Part C	0.00	0.00	0.00	0.00
C20: Getting Appointments and Care Quickly	Part C	0.00	0.00	0.00	0.00
C21: Customer Service	Part C	0.00	0.00	0.00	0.00
C22: Rating of Health Care Quality	Part C	0.00	0.00	0.00	0.00
C23: Rating of Health Plan	Part C	0.00	0.00	0.00	0.00
C24: Care Coordination	Part C	0.00	0.00	0.00	0.00
C28: Plan Makes Timely Decisions about Appeals	Part C	-0.20	-0.08	-0.04	0.00
C29: Reviewing Appeals Decisions	Part C	-0.14	-0.04	0.00	0.00
C30: Call Center – Foreign Language Interpreter and TTY Availability	Part C	-0.31	-0.19	-0.04	0.00
D01: Call Center – Foreign Language Interpreter and TTY Availability	Part D	-0.38	-0.17	-0.11	-0.03
D05: Rating of Drug Plan	Part D	0.00	0.00	0.00	0.00
D06: Getting Needed Prescription Drugs	Part D	0.00	0.00	0.00	0.00
D07: MPF Price Accuracy	Part D	0.00	0.00	0.00	0.00
D08: Medication Adherence for Diabetes Medications	Part D	0.00	0.00	0.00	0.00
D09: Medication Adherence for Hypertension (RAS antagonists)	Part D	0.00	0.00	0.00	0.00
D10: Medication Adherence for Cholesterol (Statins)	Part D	0.00	0.00	0.00	0.00
D11: MTM Program Completion Rate for CMR	Part D	-0.15	-0.05	0.00	0.00
D12: Statin Use in Persons with Diabetes (SUPD)	Part D	0.00	0.00	0.00	0.00

Measure	Type	Cut Point Change from Initial to Updated 2024			
		2 Star	3 Star	4 Star	5 Star
"Lower is better" measures					
C26: Members Choosing to Leave the Plan	Part C	🟡 0.00	🟡 0.00	🟡 0.00	🟡 0.00
D03: Members Choosing to Leave the Plan	Part D	🟡 0.00	🟡 0.00	🟡 0.00	🟡 0.00
Measures not on 0-100 scale					
C25: Complaints about the Health Plan	Part C	🟢 0.64	🟢 0.26	🟢 0.05	🔴 -0.02
C27: Health Plan Quality Improvement	Part C	🔴 0.07	🟡 0.00	🟡 0.00	🔴 0.03
D02: Complaints about the Drug Plan	Part D	🟢 0.64	🟢 0.26	🟢 0.05	🔴 -0.02
D04: Drug Plan Quality Improvement	Part D	🔴 0.03	🟡 0.00	🔴 0.05	🔴 0.04

OUR STORY

Five decades. Wakely began in 1969 and eventually evolved into several successful divisions. In 1999, the actuarial arm became the current-day Wakely Consulting Group, LLC, which specializes in providing actuarial expertise in the healthcare industry. Today, there are few healthcare topics our actuaries cannot tackle.

Wakely is now a subsidiary of Health Management Associates. HMA is an independent, national research and consulting firm specializing in publicly funded healthcare and human services policy, programs, financing, and evaluation. We serve government, public and private providers, health systems, health plans, community-based organizations, institutional investors, foundations, and associations. Every client matters. Every client gets our best. With more than 20 offices and over 400 multidisciplinary consultants coast to coast, our expertise, our services, and our team are always within client reach.

Broad healthcare knowledge. Wakely is experienced in all facets of the healthcare industry, from carriers to providers to governmental agencies. Our employees excel at providing solutions to parties across the spectrum.

Your advocate. Our actuarial experts and policy analysts continually monitor and analyze potential changes to inform our clients' strategies – and propel their success.

Our Vision: To partner with clients to drive business growth, accelerate success, and propel the health care industry forward.

Our Mission: We empower our unique team to serve as trusted advisors with a foundation of robust data, advanced analytics, and a comprehensive understanding of the health care industry.

Learn more about Wakely Consulting Group at www.wakely.com