Like a report card, Medicare’s star rating system for Medicare Advantage health plans is a powerful tool for driving plan behavior. By grading plans between 1 and 5 stars for their performance on various measures (with high performers receiving financial rewards), the system pushes plans to focus on specific areas for improvement.

Beginning in 2019, CMS is making important changes to how it calculates plan ratings. Notably, it is providing significant new weight to patient access and experience measures. These assess topics like how patients rate the quality of their health plan, the quality of their healthcare, how well their care is coordinated, and whether the health plan responds in a timely way to appeals.

The increased emphasis on patient access and experience is a welcome affirmation that patient experience matters—that it is an essential driver of health plan quality. And although these CMS reforms represent an important step forward, a recent analysis of person-centered care measures in the star rating system conducted by the Center for Consumer Engagement in Health Innovation found ample room for improving both plan performance and how the ratings measure patient-centeredness.

Progress on Person-Centeredness Lags Behind Other Measures

The most recent star rating (2016-2017) reflects performance on 34 measures, of which 10 are classified by CMS as part of the person-centered framework. The good news is that from 2010 to 2017, plans performed better on person-centered measures compared with the other measures in the star rating set. On average, plans scored 3.4 on person-centered measures compared with 3.0 on other measures.

However, our analysis also shows that performance on person-centered measures has not budged appreciably over time. The improvement in average ratings in the 2010-2013 period compared with the 2014-2017 period was 5% for person-centered star measures compared with a 30% improvement in the other quality metrics. Between 70% and 80% of the Medicare Advantage plans are hitting the minimum threshold of a 3-star rating on person-centered measures.

Will 2019 Kick Off a New Era in Person-Centered Care?

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ABSTRACT

Medicare’s star rating system for Medicare Advantage health plans is a powerful tool for driving plan behavior and, beginning in 2019, CMS is providing new weight to patient access and experience measures.

As the shift begins, a recent analysis of person-centered care measures in the star rating system conducted by the Center for Consumer Engagement in Health Innovation found ample room for improving both plan performance and how the ratings measure patient-centeredness.

Although from 2010 to 2017, plans performed better on person-centered measures compared with the other measures in the star rating set (3.4 vs 3.0), our analysis also shows that performance on patient-centered measures has not comparatively budged appreciably over time.

This may indicate that improvement initiatives focused on non-person-centered star measures have not had a spillover effect on the person-centered measures, or that plans may feel that once a minimum threshold on person-centered measures is met, they need not focus attention on further improvements.

At the same time, we need a more comprehensive assessment of person-centeredness. The CMS star measures classified as person-centered are limited in scope and do not constitute a comprehensive view of what it actually means to be person-centered.

The new weighting of patient access and experience measures in the CMS star rating system will press plans to refocus their managerial attention, allocate internal assets, and improve their performance, but we also need new measures that are more closely aligned with the domains that describe person-centered care.
One interpretation is that improvement initiatives focused on non–person-centered star measures have not had a spillover effect on the person-centered measures. Or, plans may feel that once a minimum threshold on person-centered measures is met, they need not focus attention on further improvements. We hope the increased weighting of person-centered measures in the star ratings system will reinvigorate plan efforts to improve patient experience.

Needed: Better Measures for Rating Person-Centeredness

At the same time, we need a more comprehensive assessment of person-centeredness. The CMS star measures classified as person-centered are limited in scope and do not constitute a comprehensive view of what it actually means to be person-centered. For example, the Institute of Medicine endorsed 6 dimensions for person-centered care—that it should be respectful to patients’ values, preferences, and expressed needs; be coordinated and integrated; provide information, communication, and education; ensure physical comfort; provide emotional support; and involve family and friends. Few of these dimensions are reflected in the current star measure set.

Person-centeredness is a foundational element of high-quality care and can help generate important improvements throughout the health system. We trust that the new weighting of patient access and experience measures in the CMS star rating system will press plans to refocus their managerial attention, allocate internal assets, and improve their performance. Still, if we want to usher in a new era of person-centeredness this year, we also need new measures that are more closely aligned with the domains that best describe person-centered care.

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