

2021 Stars measures cutpoints



Stars measures, their weighting, and their cut-off points are determined by CMS each year. The data below are based on measurement year 2020. New cut-off points will be updated in October 2022 based on measurement year 2021. Use this information to set your team's future performance goals.

Star Measure		2 Stars	3 Stars	4 Stars	5 Stars
Clinical Part C	Diabetes Care – Eye Exam (1x): % of diabetic MA members aged 18 – 75 with diabetes (type 1 and type 2) who had an eye exam during the measurement year.	≥ 52% to < 62%	≥ 62 % to < 71 %	≥ 71 % to < 79 %	≥ 79 %
	Diabetes Care – Blood Sugar Controlled (3x): % of diabetic members aged 18 – 75 who had an A1C lab test during the measurement year with HbA1c < 9%.	≥ 41 % to < 60 %	≥ 60 % to < 72 %	≥ 72 % to < 81 %	≥ 81 %
	Controlling Blood Pressure (3x): % of members aged 18 – 85 diagnosed with hypertension and whose BP was <140/90 mm Hg during the measurement year.	≥ 51% to < 62%	≥ 62% to < 75%	≥ 75% to < 82%	≥ 82%
	Statin Therapy for Patients with Cardiovascular Disease (1x): % of males aged 21 – 75 and females aged 40 – 75 who were identified as having clinical atherosclerotic cardiovascular disease and were given 1 or more high or moderate-intensity statin medication during the measurement year.	≥ 76% to < 81%	≥ 81% to < 84%	≥ 84% to < 89%	≥ 89%
	Colorectal Cancer Screening (1x): % of members aged 50 – 75 who had appropriate screening for colon cancer.	≥ 49% to < 62%	≥ 62% to < 71%	≥ 71% to < 80%	≥ 80%
	Breast Cancer Screening (1x): % of female plan members aged 52 – 74 who had a mammogram during the past 2 measurement years.	≥ 42% to < 61%	≥ 61% to < 69%	≥ 69% to < 76%	≥ 76%
	Osteoporosis Management in Women Who Had a Fracture (1x): % of female members aged 67 – 85 who suffered a fracture and who had either a bone mineral density test or were given a drug to treat osteoporosis in the following 6 months.	≥ 27% to < 40%	≥ 40% to < 50%	≥ 50% to < 68%	≥ 68%
	*Transitions of Care (1x): % of discharges for members aged 18+ who had each of the following 4 reported rates:	≥ 28% to < 46%	≥ 46% to < 48%	≥ 48% to < 60%	≥ 60%
	(1) Notification of Inpatient Admission: Documentation of receipt of notification of inpatient admission on the day of admission through 2 days after the admission (3 total days).	≥ 1% to < 12%	≥ 12% to < 16%	≥ 16% to < 47%	≥ 47%
(2) Receipt of Discharge Information: Documentation of receipt of discharge information on the day of discharge through 2 days after the discharge (3 total days).	≥ 1% to < 8%	≥ 8% to < 10%	≥ 10% to < 3%	≥ 33%	

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Clinical Part C	(3) Patient Engagement After Inpatient Discharge: Documentation of patient engagement (e.g., office visits, visits to the home, telehealth) provided within 30 days after discharge.	≥ 78% to < 89%	≥ 89% to < 92%	≥ 92% to < 96%	≥ 96%
	(4) Medication Reconciliation Post-Discharge: Documentation of medication reconciliation on the date of discharge through 30 days after discharge (31 total days).	≥ 33% to < 66%	≥ 66% to < 72%	≥ 72% to < 90%	≥ 90%
	*Follow-Up After Emergency Department Visit for People with Multiple High-Risk Chronic Conditions (1x): % of emergency department visits for members aged 18+ with multiple high-risk chronic conditions who had a follow-up service within 7 days of the visit.	≥ 51% to < 62%	≥ 62% to < 64%	≥ 64% to < 69%	≥ 69%
	*Plan All Cause Readmission (1x): For members aged 18+, the number of acute inpatient and observation stays during the measurement year that were followed by an unplanned acute readmission for any diagnosis within 30 days and the predicted probability of an acute readmission.	≤ 15% to > 13%	13%	≤ 13% to > 9%	≤ 9%
Clinical Part C - SNP Only	Care for Older Adults: Medication Review (1x): % of members whose doctor or clinical pharmacist reviewed a list of prescription and non-prescription drugs, vitamins, herbal remedies, and other supplements they take at least once a year.	≥ 48% to < 71%	≥ 71% to < 84%	≥ 84% to < 95%	≥ 95%
	Care for Older Adults: Functional Status Assessment (1x): % of members whose doctor completed a functional status assessment to see how well they can do Activities of Daily Living such as dressing, eating, and bathing.	≥ 55% to < 71%	≥ 71% to < 85%	≥ 85% to < 93%	≥ 93%
	Care for Older Adults: Pain Assessment (1x): % of members who had a pain screening at least once during the measurement year.	≥ 55% to < 76%	≥ 76% to < 87%	≥ 87% to < 96%	≥ 96%
Rx Event Part D	Medication Adherence for Diabetes Medications (3x): % of members with a prescription for diabetes medication who fill their prescription 80% or more of the time they're supposed to be taking the medication.	≥ 80% to < 85%	≥ 85% to < 87%	≥ 87% to < 91%	≥ 91%
	Medication Adherence for Hypertension (RAS antagonists) (3x): % of members with a prescription for a blood pressure medication who fill their prescription 80% or more of the time they're supposed to be taking the medication.	≥ 74% to < 82%	≥ 82% to < 87%	≥ 87% to < 90%	≥ 90%
	Medication Adherence for Cholesterol (Statins) (3x): % of members with a prescription for a cholesterol medication (a statin drug) who fill their prescription 80% or more of the time they're supposed to be taking the medication.	≥ 78% to < 83%	≥ 83% to < 87%	≥ 87% to < 91%	≥ 91%
	Statin Use in Persons with Diabetes (SUPD) (1x): % of Medicare Part D beneficiaries aged 40 – 75 who were given 2 or more diabetes medication fills and a statin medication fill during the measurement year.	≥ 76% to < 80%	≥ 80% to < 84%	≥ 84% to < 88%	≥ 88%

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CAHPS	Annual Flu Vaccine (1x): % of plan members who got a flu shot.	≥ 65 to < 70	≥ 70 to < 76	≥ 76 to < 80	≥ 80
	Getting Needed Care (4x): % score the plan earned for how easy it is for members to get needed care, including care from specialists.	≥ 79 to < 82	≥ 82 to < 84	≥ 84 to < 85	≥ 85
	Getting Appointments and Care Quickly (4x): % score the plan earned for how quickly members get appointments and care.	≥ 75 to < 77	≥ 77 to < 80	≥ 80 to < 82	≥ 82
	Customer Service (4x): % score the plan earned for how easy it is for members to get information and help from the plan when needed.	≥ 88 to < 89	≥ 89 to < 91	≥ 91 to < 92	≥ 92
	Rating of Health Care Quality (4x): % score the plan earned from members who rated the quality of the care they received.	≥ 85 to < 86	≥ 86 to < 88	≥ 88 to < 89	≥ 89
	Rating of Health Plan (4x): % score the plan earned from members who rated the health plan.	≥ 85 to < 8	≥ 86 to < 88	≥ 88 to < 90	≥ 90
	Care Coordination (4x): % score the plan earned on how well the plan coordinates members' care, including whether doctors had the records and information they needed about members' care, and how quickly members got their test results.	≥ 84 to < 85	≥ 85 to < 87	≥ 87 to < 88	≥ 88
	Rating of Drug Plan (4x): % score the plan earned from members who rated the prescription drug plan.	≥ 84 to < 85	≥ 85 to < 87	≥ 87 to < 88	≥ 88
	Getting Needed Prescription Drugs (4x): % score the plan earned for how easy it is for members to get the prescription drugs they need using the plan.	≥ 89 to < 90	≥ 90 to < 91	≥ 91 to < 92	≥ 92
HOPS	Improving Bladder Control (1x): % of plan members with a urine leakage problem in the past 6 months who discussed treatment options with their doctor.	≥ 42% to < 45%	> 45% to < 49%	> 49 % to < 53 %	> 53 %
	Monitoring Physical Activity (1x): % of plan members who discussed exercise with their doctor and were advised to start, increase, or maintain their physical activity during the measurement year.	≥ 42% to < 47%	> 47% to < 52%	> 52 % to < 57 %	> 57 %
	Reducing the Risk of Falling (1x): % of plan members who have a problem walking or balancing, or have fallen, and received a recommendation from their doctor during the measurement year to prevent falls.	≥ 48% to < 55%	> 55% to < 64%	> 64 % to < 72 %	> 72 %

Questions? Email us at starsandriskmgmt@devoted.com.

*Projections for new measures are estimates based off of display data and are subject to change.

Devoted Health is an HMO and PPO plan with a Medicare contract. Our D-SNPs also have contracts with State Medicaid programs. Enrollment in our plans depends on contract renewal.