



Are You Prepared for the 2024 Medicare Advantage Final Rule Changes?

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Our Panelists



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Finalized Provisions from the Final Rule 2024 and Final Rule Cliffhangers



A Second Final Rule?!

- “CMS intends to address all of the remaining proposals from the December 2022 proposed rule in subsequent rulemaking. Therefore, CMS plans to make provisions adopted in the subsequent, **second final rule applicable to coverage beginning no earlier than January 1, 2025.**”
- CMS also noted they are not addressing comments received on these provisions in this first Final Rule and will “...address them at a later time, in a subsequent rulemaking document, as appropriate.”



Summary of Stars Ratings–Related Changes



2022

2023

2024

2025

2026



2024

2025

2026

2027

2028

Removal of Part C Diabetes Care – Kidney Disease Monitoring

Tukey Outlier Deletion

EUC 60% Rule discontinued after this year

CAHPS

- Add web-based survey mode and telehealth (2024 Survey)
- Remove 15-minute wait time question

Significant Weight Changes:

- **Patient Experience/Complaints and Access Measures from 4x to 2x**

Revised Measures

- **Implement Continuous Enrollment to the 3 Medication Adherence Measures**

New Measure

- Add Part C Kidney Health Evaluation for Patients with Diabetes (KED) Measure

Health Equity Index (HEI) Reward to replace the Reward Factor

Medication Adherence Updates:

- All three measures to be risk adjusted and excluded from CAI
- Remove Inpatient/Skilled Nursing Facility (IP/SNF) stay adjustment from all three measures

Changes Still Outstanding

- **Measurement Changes:** Improvement Measure Hold Harmless to only apply to 5-Star contracts
- **Returning Measures:** Care for Older Adults – Functional Status Assessment (Part C)
- **Retired Measures:** Medication Reconciliation Post-Discharge (MRP) – Stand alone
- **Cut-Point Methodology Changes:** Guardrails to be removed

New Measures

- Concurrent Use of Opioids and Benzodiazepines (COB) (Part D)
- Polypharmacy Use of Multiple Anticholinergic Medications in Older Adults (Poly-ACH) (Part D)
- Polypharmacy Use of Multiple Central Nervous System Active Medications in Older Adults (Poly-CNS) (Part D)
- Colorectal Cancer Screening (Part C)





Final Rule 2024 Star Ratings Provisions



Health Equity Index Reward Factor



Measure to reward reduction of disparities in those with Social Risk Factors (SRFs), namely Low-Income Subsidies (LIS)/Dual-Eligible (DE)/Disability

Based on two years of data, starting with calendar year 2024-2025 (Star year 2026-2027) to be applied in Star year 2027

Will replace existing Reward Factor to **promote reduction of disparities as opposed to high performance/low variability**

Added to unrounded Summary and Overall scores

Measures included will be **announced annually** in the Payment and Risk Adjustment policies in section 1853(b) of the Act – At this time, we don't know what measures will be used



RF vs. HEI

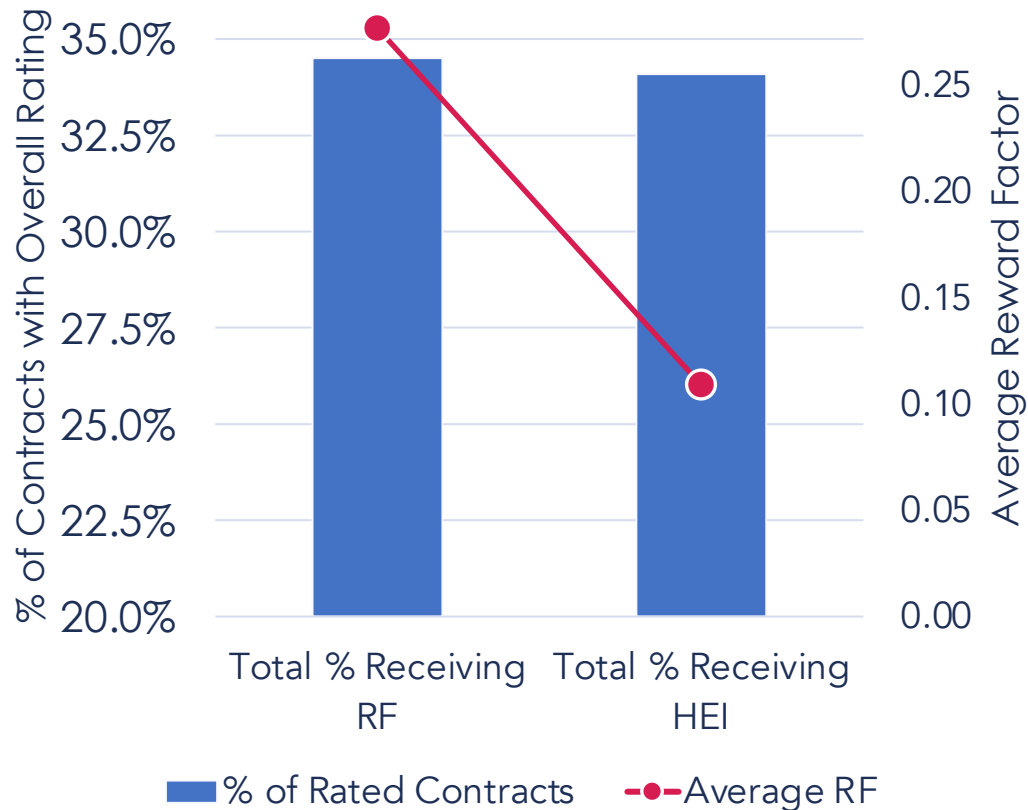
RF vs. HEI

Roughly the same percentage of plans will receive a Health Equity Index Reward

HOWEVER

the average magnitude of that reward is only about 40% of the average current Reward Factor

(0.28 vs. 0.11)



What Are the Member Experience Measures?

**Getting Needed
Care (CAHPS)**

**Getting
Appointments and
Care Quickly
(CAHPS)**

**Customer Service
(CAHPS)**

**Rating of Health
Care Quality
(CAHPS)**

**Rating of Health
Plan (CAHPS)**

**Care
Coordination
(CAHPS)**

**Complaints about
the Health/Drug
Plan**

**Members
Choosing to
Leave the Plan**

**Plan Makes Timely
Decision about
Appeals**

**Reviewing
Appeals Decisions**

**Call Center-
Foreign Language
Interpreter and TTY
Availability**

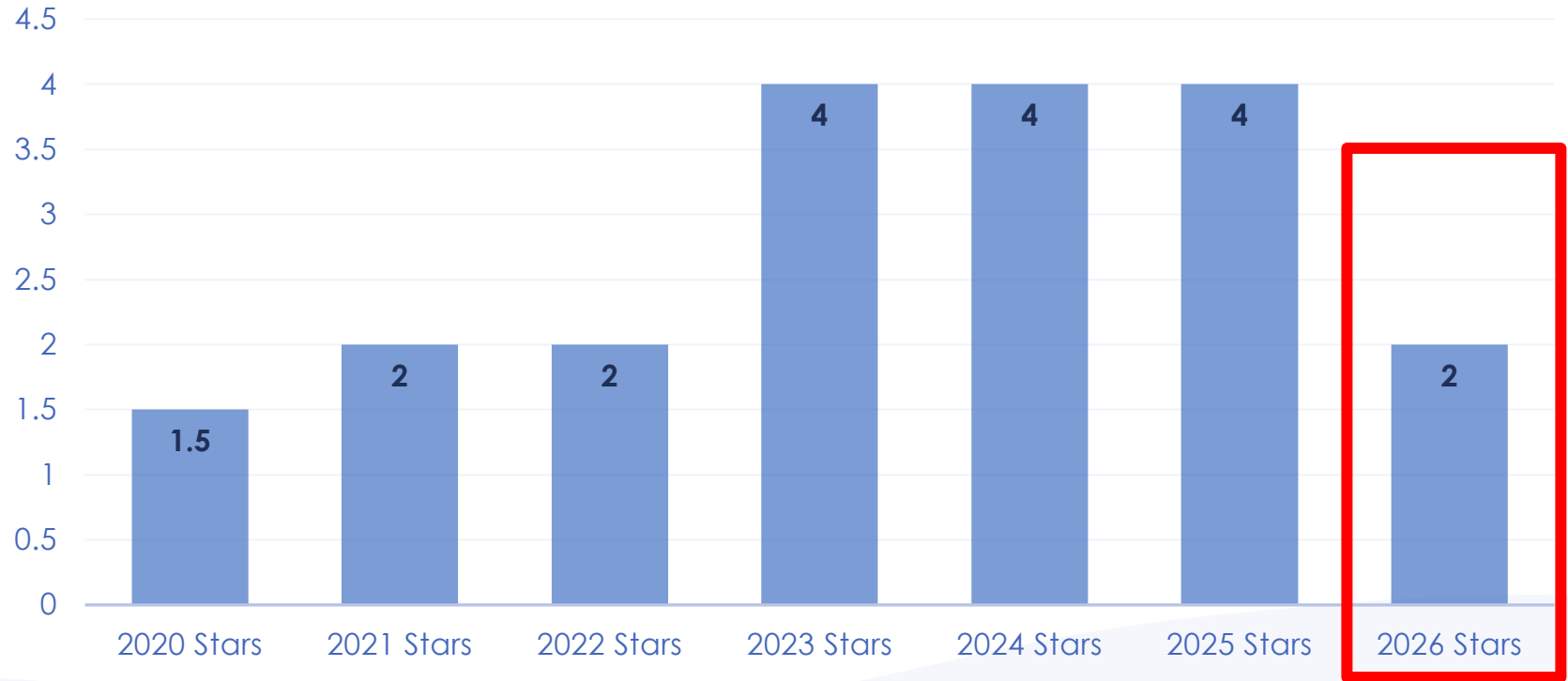
**Call Center-
Foreign Language
Interpreter and TTY
Availability**

**Rating of Drug
Plan (CAHPS)**

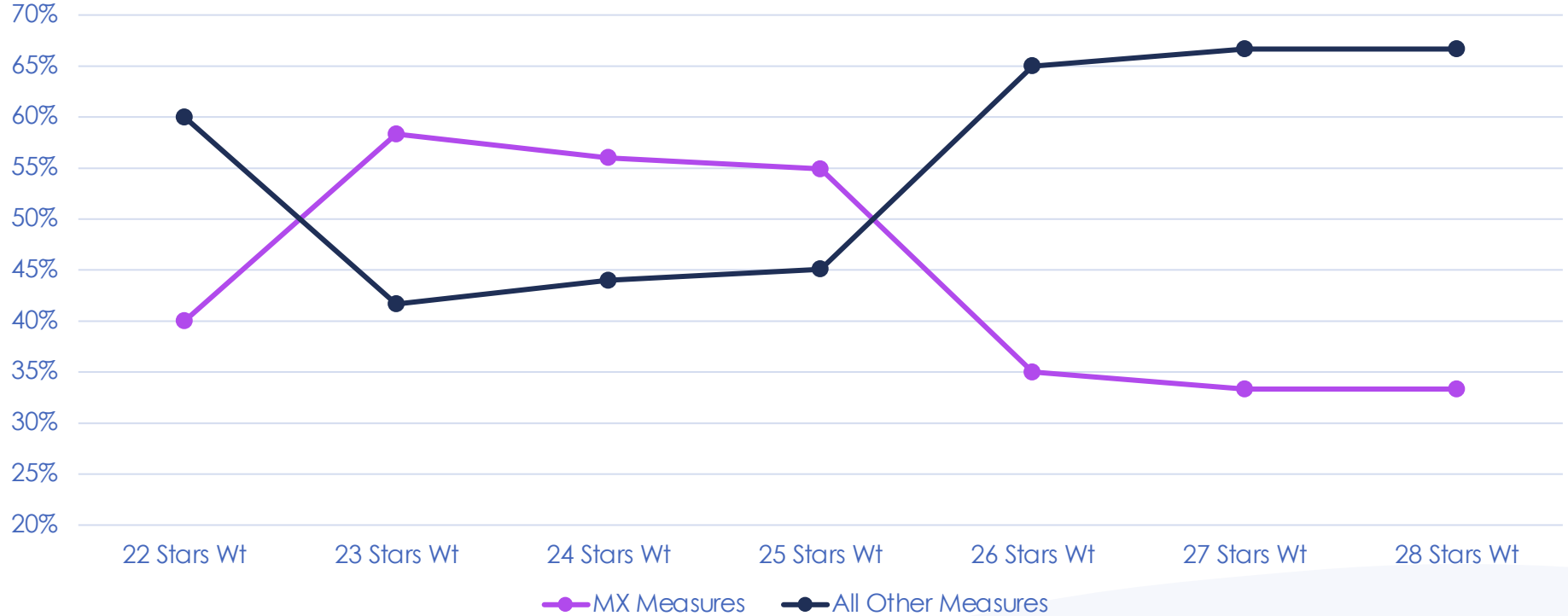
**Getting Needed
Prescription Drugs
(CAHPSD)**



Member Experience Weight Whiplash

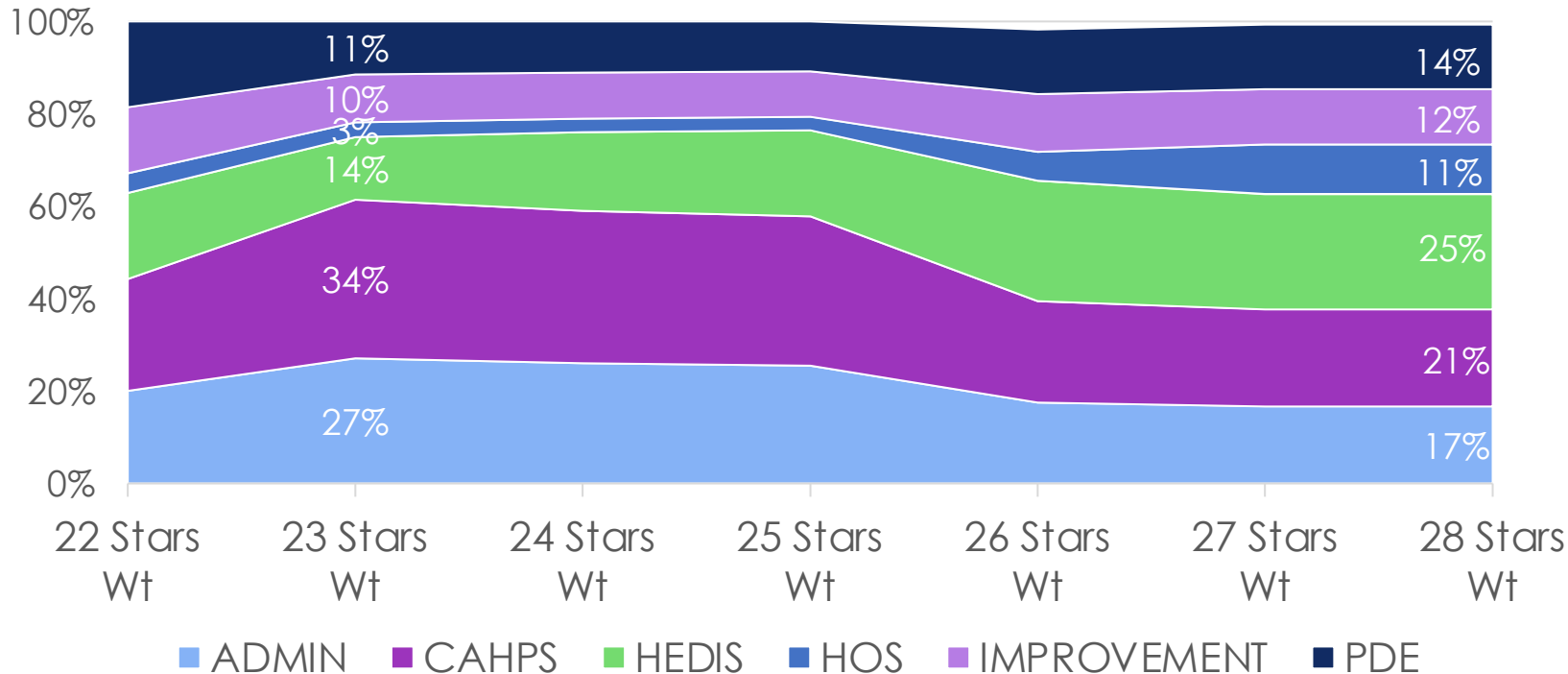


Member Experience Weight Rollercoaster



The Resurrection of HEDIS

The reduction in member experience measure weights, along with the addition of both new and returning HEDIS measures, will return HEDIS to the most heavily-weighted domain.



Medication Adherence Measure Changes

Risk-Adjusted/Case Mix Adjusted

- To reflect differences in member populations, all three medication adherence measures will be risk adjusted based on the following sociodemographic status (SDS) characteristics:
 - Age
 - Gender
 - Dual Eligibility/Low-Income Subsidy
 - Disability
- Measure reporting should be stratified by these 4 SDS characteristics to help plans identify disparities and understand how member mix impacts measure rates.
- Current measures will remain in Star Ratings while these modifications will become display measures for MY2024-2025 then move to weight of 1 for MY2026/ SY2028
- The “new” measures will be removed from the CAI calculation

Transition to Continuous Enrollment

- To fully align with Pharmacy Quality Alliance (PQA), CMS will use continuous enrollment and no longer adjust for member-years for the medication adherence measures starting in MY2024/SY2026
 - Members with more than 1-day gap in enrollment during the treatment period will be excluded

IP/SNF Stay Adjustment Removed

- To fully align with Pharmacy Quality Alliance (PQA), CMS will no longer adjust for inpatient (IP) or skilled nursing facility (SNF) stays for MY2026/SY2028



Have More Questions?



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