



# Health Insurance Marketplace Quality Rating Information (Pilot Program)



*Guidance for Navigators and  
Assisters*

*Information for Marketplace  
2018 Open Enrollment Period*

*November 1, 2017 - December 15, 2017*

*September 8, 2017*

# Objectives

- To provide guidance about the Centers for Medicare & Medicaid Services' (CMS's) Health Insurance Marketplace Quality Rating information to help you:
  - ✓ Educate enrollees about the Marketplace quality ratings
  - ✓ Advise enrollees on how to use the quality ratings to compare qualified health plans (QHPs) in their Marketplaces
  - ✓ Answer questions from enrollees about the Marketplace quality ratings

# What is the Marketplace Quality Rating Information?

- Also referred to as “quality ratings”
- Another way to compare qualified health plans (QHPs) offered through a Marketplace by
  - Quality of health care services
  - Enrollee experience
- Can still compare by cost and other factors too.
  - Premium price range, yearly deductible, Marketplace health plan category (Bronze, Silver, Gold, Platinum, Catastrophic), health plan type (e.g. HMO or PPO), Health Savings Account (HSA) eligibility

# Sample of star ratings display

Example Plan HMO

★★★★☆  
 Overall Rating ⓘ

Bronze | HMO | Plan ID: 12345VA1234567

<b>Estimated monthly premium</b> <span style="font-size: 1.2em; font-weight: bold;">\$248.43</span>	<b>Deductible</b> <span style="font-size: 1.2em; font-weight: bold;">\$6,500</span> <small>Individual Total</small>	<b>Out-of-pocket maximum</b> <span style="font-size: 1.2em; font-weight: bold;">\$7,150</span> <small>Individual Total</small>	<b>Copayments / Coinsurance</b> <small>Emergency room care: 40% Coinsurance after deductible</small> <small>Generic drugs: 40% Coinsurance after deductible</small> <small>Primary doctor: \$50/40% Coinsurance after deductible</small> <small>Specialist doctor: 40% Coinsurance after deductible</small>	<b>Estimated total yearly costs</b> <div style="background-color: #0056b3; color: white; text-align: center; padding: 2px 5px; margin-top: 5px;">EDIT</div>	<b>Doctors, facilities &amp; drugs covered</b> <div style="background-color: #0056b3; color: white; text-align: center; padding: 2px 5px; margin-top: 5px;">EDIT</div>
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**Documents**  

- 📄 Summary of Benefits
- 📄 Plan brochure
- 📄 Provider directory

**Dental**  

- ✓ Child Dental Benefit Included
- ✓ Adult Dental Benefit Included

\$4,700: Typical cost for a healthy pregnancy and normal delivery.

\$5,380: Typical yearly cost for managing type 2 diabetes for one person.

**Member Experience** ⓘ  
★★★★☆  
**Medical Care** ⓘ  
★★★★☆  
**Plan Administration** ⓘ  
★★★★☆

*Details and explanation of the star ratings display are provided on slide 8*

# How are quality ratings determined?

- CMS collects clinical and survey measure data
  - Calculates an overall quality rating—between 1 and 5 stars
  - Combines quality category data across three quality categories
    - Member Experience
    - Medical Care
    - Plan Administration



Each category will have its own rating between 1 and 5 stars

# What quality topics are included?

- The topics include, but aren't limited to:
  - How easy it is to get care when needed
  - If the doctors, hospitals, and others in the plan's network give members health care that achieves the best results
  - Member experience (i.e., how other plan members rate their doctors and the care they receive)
  - How informed and up-to-date doctors are about a patient's health care status, blood tests, and X-ray results
  - If the plan coordinates the care members get from different providers

# Quality ratings

Number of Stars	Quality Rating
5	Highest
3	Average
1	Lowest

# Explanation of star ratings display

**Example Plan HMO**  
Bronze | HMO | Plan ID: 12345VA1234567

Estimated monthly premium	Deductible	Out-of-pocket maximum	Copayments / Coinsurance	Estimated total yearly costs	Doctors, facilities & drugs covered
\$248.43	\$6,500 Individual Total	\$7,150 Individual Total	Emergency room care: 40% Coinsurance after deductible Generic drugs: 40% Coinsurance after deductible Primary doctor: \$50/40% Coinsurance after deductible Specialist doctor: 40% Coinsurance after deductible	<a href="#">EDIT</a>	<a href="#">EDIT</a>

**Documents**

- Summary of Benefits
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**Dental**

- ✓ Child Dental Benefit Included
- ✓ Adult Dental Benefit Included

\$4,700: Typical cost for a healthy pregnancy and normal delivery.

\$5,380: Typical yearly cost for managing type 2 diabetes for one person.

**Overall Rating** ★★★★★

**Member Experience** ★★★★★

**Medical Care** ★★★★★

**Plan Administration** ★★★★★

**Overall Rating**  
Summary rating that includes member experience, medical care, and plan administration

**Member Experience**

**Medical Care**  
(how well plans' network providers improve or maintain their member's care.)

**Plan Administration**  
(how well a plan is run)



# When star ratings aren't available

- In some cases – like when plans are new or have low enrollment – ratings aren't available
  - This doesn't mean the plans are low quality
- In addition, some types of QHPs (such as child-only QHPs and stand-alone dental plans) offered through a Marketplace are not currently required to collect quality ratings data

# Sample of new plan rating display

CMS only rates plans that have existed on the Marketplace for three consecutive years and meet the enrollment standards.

New plan - rating unavailable

## Example Plan EPO

Bronze | EPO | Plan ID: 12345VA1234567

Estimated monthly premium

**\$248.56**

Deductible

**\$5,750**

Individual Total

Out-of-pocket maximum

**\$7,150**

Individual Total

Copayments / Coinsurance

Emergency room care: 50%  
Coinsurance after deductible  
Generic drugs: 50%  
Coinsurance after deductible  
Primary doctor: 50%  
Coinsurance after deductible  
Specialist doctor: 50%  
Coinsurance after deductible

Estimated total yearly costs

EDIT

DOCTORS, FACILITIES & DRUGS COVERED

EDIT

# What are the benefits of the Quality Rating Information?

- Gives consumers:
  - A snapshot of the quality of available QHPs offered through the Marketplace in their state
  - Objective information on how QHPs perform in the Marketplace
  - An easy way to compare the quality of QHPs offered through the Marketplaces
    - All QHPs offered through the Marketplaces are rated with the same criteria

# Which Federally-facilitated Marketplace (FFM) states are involved in the 2018 pilot program?

- Two Federally-facilitated Marketplace states whose consumers use HealthCare.gov
  - Virginia
  - Wisconsin
- Chosen for their
  - Large and diverse community of QHPs offered on the Marketplaces
  - Mix of quality ratings among QHPs offered on the Marketplaces, based on 2017 QHP quality rating data

# What is the goal of the 2018 Quality Rating pilot program?

- To get feedback from consumers about their experience using the Marketplace quality ratings to select a QHP offered on the Marketplaces
- To help CMS improve and refine the display quality rating information before nationwide public reporting

# What about the non-pilot program states whose consumers use HealthCare.gov?

- Consumers in non-pilot program states whose consumers use HealthCare.gov won't see quality ratings displayed for QHPs offered through the Marketplaces on HealthCare.gov in 2018
- Anticipated nationwide launch during 2019 Open Enrollment Period for
  - Federally-facilitated Marketplaces (including states that perform plan management functions)
  - State-based Marketplaces whose consumers use HealthCare.gov

# What about State-based Marketplaces whose consumers don't use HealthCare.gov?

- State-based Marketplaces whose consumers *don't use* HealthCare.gov:
  - May *choose* to display quality ratings for QHPs offered on the Marketplaces on their respective websites during the 2018 Open Enrollment Period
  - Can wait until 2019 Open Enrollment Period to display quality ratings

# For more information

- Marketplace Service Desk (reference “Marketplace Quality Initiatives”)
  - [CMS\\_FEPS@cms.hhs.gov](mailto:CMS_FEPS@cms.hhs.gov) or 1-855-CMS-1515 (1-855-267-1515)
- Marketplace Quality Initiatives Website
  - <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityInitiativesGenInfo/ACA-MQI/ACA-MQI-Landing-Page.html>
- QHP Enrollee Survey Website
  - <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityInitiativesGenInfo/ACA-MQI/Consumer-Experience-Surveys/Surveys-page.html>
- 2018 Pilot Program Guidance
  - <https://www.CMS.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityInitiativesGenInfo/Downloads/2017-Quality-Rating-Information-Bulletin.pdf>
- FAQs on Different QHP types for different needs
  - <https://marketplace.cms.gov/outreach-and-education/5-questions-to-ask-choosing-a-plan.pdf>