

CMS Star Ratings assist

Predict. Prioritize. Perform.



Overview

Medicare Advantage (MA) plans are facing mounting challenges. In 2024, the average Star Rating dropped to 4.04, the lowest since 2021. Only 42% of MA-PD contracts achieved 4 stars or higher, compared to 68% in 2022. Volatile CMS cut points and the loss of Quality Bonus Payments (QBP) for ratings below 4 stars can significantly impact revenue, costing a 1 million-member plan as much as \$600 – \$800 million annually.

To navigate this environment, health plans need proactive strategies that address evolving measures and the growing emphasis on health equity, such as the reduced weighting of CAHPS from 4x to 2x in 2025. They must prioritize high-impact metrics like blood pressure control (weighted 3x) and adapt to new care coordination requirements, unpredictable cut points and increasing enrollment, with 32.8 million beneficiaries (54% of eligibles) now enrolled in MA plans.

This calls for advanced capabilities—leveraging technologies like GenAI, real-time analytics, monitoring and predictive modeling, to generate actionable strategies. These tools enable a sustainable, continuous improvement program grounded in a deeper understanding of both members and provider partners.



Solution

HCLTech's star rating assist is a GenAI-powered solution designed for health plans to stay competitive and compliant with CMS requirements, gain excellence in the star ratings program and regain lost reimbursements.

Built on an Agentic AI framework, our solution empowers health plans to monitor and enhance CMS star ratings through a concrete data-driven framework. We expedite the establishment of a robust data and intelligence infrastructure to swiftly fulfill program requirements, engage with members, caregivers and create a satisfying brand experience anchored in preventive and proactive care.

HCLTech Star Rating assist

Stakeholders (MA plans | TPAs | Health plans)

Quality managers | Compliance officers | Clinical leads
Plan executives | Medical groups/staff | Practitioners

User experience and engagements

Role-specific workflows | Dashboards | Portals | Collaboration features
Reports | Content (documents) | Mobile enablement | NLP search | Conversational AI

Functional features

Measures tracking

Realtime monitoring
Performance dashboards
Alerts

Star Ratings performance optimization

Cut point forecasting
What-if simulations

Member engagement

Automated reminders
Adherence tracking
HEI analysis

Recommendations

Risk stratification
Star Rating uplift strategies

Workflow automation

Task assignments and routing | Reporting
SLA tracking

Care management

Member outreach
Care plans | Assessments | Provider communication | SDOH integration

Integration

Administrative (Claims, membership, enrollment) | Clinical (FHIR/HL7, Labs)
External integrations (CMS, SDOH) | Custom APIs

Data sources

Claims | A&G | Clinical data (EHRs) | HEDIS and quality performance data | Cut point archives | CAHPS surveys
Hybrid medical records | Star Ratings benchmark history (CMS) | PDE | SDOH | HEI | Provider network

Key tenets include:



Data integration: Aggregates data from claims, clinical records, CAHPS surveys and equity metrics across health plan and provider systems to provide a unique and holistic view of the member population



Real-time tracking: Continuously monitors the performance and effectiveness of initiatives, such as care gaps and new measures like transitions of care and follow-up after ED visits, reducing identification delays by 50%



Automated notifications and suggestions: Identifies key focus areas, offers proactive alerts and provides tailored recommendations to address high-weight measures like controlling blood pressure (3x) and plan all-cause readmissions



Cut-point predictions and simulation: Uses AI to forecast cut-points with 88% accuracy and simulate rating scenarios based on CMS's Tukey method and HEI impact



Interactive dashboards and reporting: Seamless reporting across all star domains and metrics, coupled with customizable visualizations, enables tracking of performance, analysis of LIS/DE disparities and sharing actionable insights with stakeholders for effective outreach planning and interventions

Differentiators

With more than 20 years of health plan experience, we bring the capabilities baked with next-generation technologies that focus on adaptability, accuracy and health plan-specific needs to drive sustainable star rating improvements.

Star ratings assist distinguishes itself through:

AI-powered precision:

Predictive models that adapt to CMS methodology changes, delivering 88% accurate cut-point forecasts and simulations



Real-time data ingestion:

Integrates diverse data sources via secure APIs, offering faster updates on clinical and equity performance



Predictive intelligence:

Utilizes advanced analytics to forecast provider performance on key measures, identifying necessary interventions and recommending engagement strategies



CMS-aligned expertise:

Combines deep knowledge of star ratings measures with strategies for high-impact areas like intermediate outcomes and health equity



Star rating gains:

Achieving an average increase of 0.5 stars results in an annual revenue boost of \$400 – \$600 per member.



Operational efficiency:

Reduced manual reporting efforts by 60%, allowing resources to be redirected towards quality improvement initiatives



HCLTech | Supercharging Progress™

HCLTech is a global technology company, home to more than 223,000 people across 60 countries, delivering industry-leading capabilities centered around digital, engineering, cloud and AI, powered by a broad portfolio of technology services and products. We work with clients across all major verticals, providing industry solutions for Financial Services, Manufacturing, Life Sciences and Healthcare, Technology and Services, Telecom and Media, Retail and CPG, and Public Services. Consolidated revenues as of 12 months ending March 2025 totaled \$13.8 billion. To learn how we can supercharge progress for you, visit hcltech.com.

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