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**PQS**

**2025 Medicare Part C & D  
Star Ratings Technical Notes Summary**



On October 10, 2024, CMS released the Medicare 2025 Part C & D Star Ratings Technical Notes. In this document, Pharmacy Quality Solutions (PQS) provides a high-level summary and trends of performance associated with key Part C & D measures.

The 2025 Star Ratings for Medicare Part C & D plans are displayed on the Medicare Plan Finder found at [www.medicare.gov](http://www.medicare.gov). Starting on October 15, 2024, Medicare beneficiaries can view the 2025 Star Ratings when selecting their Medicare Advantage with Prescription Drug Coverage (MAPD) or Prescription Drug Plan (PDP or standalone drug plan) for the 2025 benefit year during the open enrollment period, which will continue through December 7, 2024.

Effective with the November EQUIPP® performance refresh, PQS will display the updated 2025 Star Rating thresholds in EQUIPP for the CMS Star MAPD thresholds within the Goal Set drop-down menu on the Performance Measures Dashboard. However, most plans, PBMs,

and associated programs will continue to maintain customized, programmatic goals which would be detailed in the Quality Improvement Program (QIP) table in addition to any applicable “My Programs” displays.

As a partner for improving quality, PQS has provided key highlights from the 2025 Part C & D Star Ratings Technical Notes that impact pharmacy-based quality measures. The complete version of the CMS Technical Notes can be found [here](#).

*Note: Refer to Appendix I for the 2025 MAPD and PDP thresholds and Appendix II for average performance trends (2012- 2025).*

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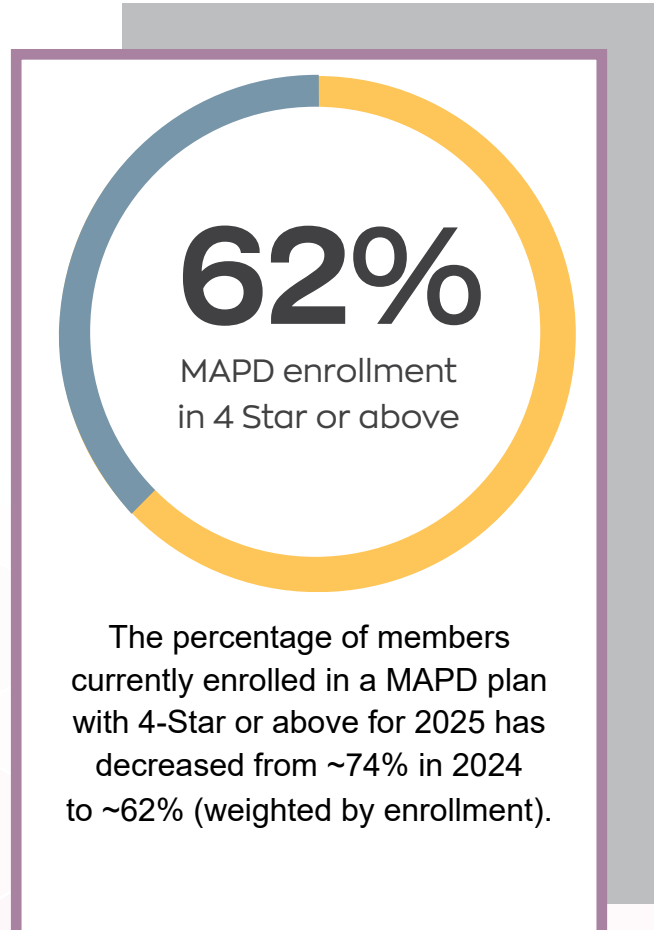
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# Medicare 2025 Part C & D Star Ratings Technical Notes Highlights

- **Up to 40 Measures with Ratings:** MAPD contracts are rated on up to 40 unique quality and performance measures.
  - ▶ MA-only contracts (without prescription drug coverage, or Part D) are rated on up to 30 measures.
  - ▶ Standalone Part D (PDP) contracts are rated on up to 12 measures.
- **Controlling Blood Pressure for 2025:** The recently revised measure (Part C) maintains its triple-weighted status for 2025.
- **Plan All-Cause Readmissions for 2025:** The recently revised measure (Part C) moved into the 2025 Star Ratings as a new measure (weight of three).
- **Decrease in Average Overall MAPD Star Rating:** Decreased to 3.92 stars (down 0.15 stars), which is the lowest overall Star Rating in the last four years.
  - ▶ The number of MAPD contracts with 5-Star Overall Ratings decreased from 38 contract IDs in 2024 to only seven contracts for 2025.
- **Decrease in Average PDP Star Ratings:** Decreased to 3.06 (down from 3.34 stars in 2024), which is also the lowest overall Star Rating in the last four years.
  - ▶ 5-star PDP health plans for 2024 remain steady at two individual contracts in 2025.
  - ▶ Weighted by enrollment, ~5% of PDP enrollees are currently in contracts that will have four or more stars in 2025.
- **Increase in Low Performing Contracts:** Eight contracts (up from six plans in 2024) received an overall rating of less than 3 stars.
  - ▶ Seven contracts are MAPD, and one is PDP. Two of the MAPD contracts have D-SNP plan benefit packages.
- Forty percent of MAPD contracts (209) offered in 2025 earned a 4-star or higher for their 2025 overall rating.



The percentage of members currently enrolled in a MAPD plan with 4-Star or above for 2025 has decreased from ~74% in 2024 to ~62% (weighted by enrollment).



# Medication-Related Part D Measures: Focused Updates



## Medication Adherence Measures



### 2025 Average Star Ratings

The average MAPD Star Ratings remains mostly steady for all three adherence (PDC) measures in 2025.

Measure	2025	2024
Diabetes PDC	3.2	3.3
RASA PDC	3.3	3.4
Statin PDC	3.3	3.2

### KEY TAKEAWAYS

- MAPD average score for PDC measures: PDC scores increased by 1 percent in 2025 across RASA and Statin with a 0% change in Diabetes:
  - ▶ Diabetes PDC: 86%
  - ▶ RASA PDC: 89%
  - ▶ Statin PDC: 88%
- MAPD 5-star cut points: Increased in 2025 for all 3 metrics
- MAPD 4-star cut points: Increased in 2025 for Diabetes, but decreased for RASA and Statin
- PDP average scores for PDC measures: No changes from 2024 to 2025; however, 5-star cut points see significant change

### 2025 MAPD 5-Star Thresholds

Diabetes	Hypertension	Cholesterol
<b>91%</b> (+1%)	<b>92%</b> (+1%)	<b>93%</b> (+2%)

### 2025 PDP 5-Star Thresholds

Diabetes	Hypertension	Cholesterol
<b>93%</b> (NA)	<b>92%</b> (-2%)	<b>92%</b> (-1%)

Note: Figures in parentheses represent change from prior year.

### MEASURE DETAILS

- Measures the percentage of eligible members with a PDC rate at 80% or over for the specific drug classes (e.g., diabetes, hypertension, and cholesterol medications)
- Patients with one or more claims for sacubitril/valsartan are excluded from the hypertension/RASA adherence measure
- Patients with one or more prescriptions for insulin are excluded from the Diabetes PDC measure
- End-stage renal disease (ESRD) exclusions have been applied to measure results according to the most recent specifications from the measure steward. Additionally, patients indicating hospice enrollment during the treatment period are also excluded from the adherence measures.



## Statin Use in Persons with Diabetes (SUPD)

### KEY TAKEAWAYS

#### 2025 Average Star Ratings



Plan	2025	2024
MAPD	2.8	2.7
PDP	2.7	2.4

#### 2025 Average SUPD Scores

MAPD	PDP
<b>86%</b> (+1%)	<b>83%</b> (+1%)

Note: Figures in parentheses represent change from prior year.

### MEASURE DETAILS

- Measures the percentage of beneficiaries 40-75 years old who were dispensed at least two diabetes medication fills and received a statin medication fill at any point during the measurement period
- Exclusions include members with ESRD or who are enrolled in hospice.



## Statin Therapy for Patients with Cardiovascular Disease (SPC) - Part C

### KEY TAKEAWAYS

#### 2025 National Averages



- Part C national average: 3.0 Stars (decrease from 3.3 Stars in 2024)



- National average performance score: Up (1%) to 86.0%

### MEASURE DETAILS

- Measures the percentage of males 21–75 years of age and females 40–75 years of age during the measurement year, who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and were dispensed at least one high or moderate-intensity statin medication during the measurement year
- Several exclusions exist with other conditions including ESRD and hospice.
- Key differences from the Part D SUPD measure:
  - ▶ The use of medical data to identify patients with ASCVD
  - ▶ The intensity of the statin is relevant to the measure
  - ▶ For SPC, only moderate- to high-intensity statins qualify patients for numerator status
  - ▶ SPC has a one-year look back period to identify the qualifying population



# MTM Program Completion Rate for Comprehensive Medication Review (CMR)

## KEY TAKEAWAYS

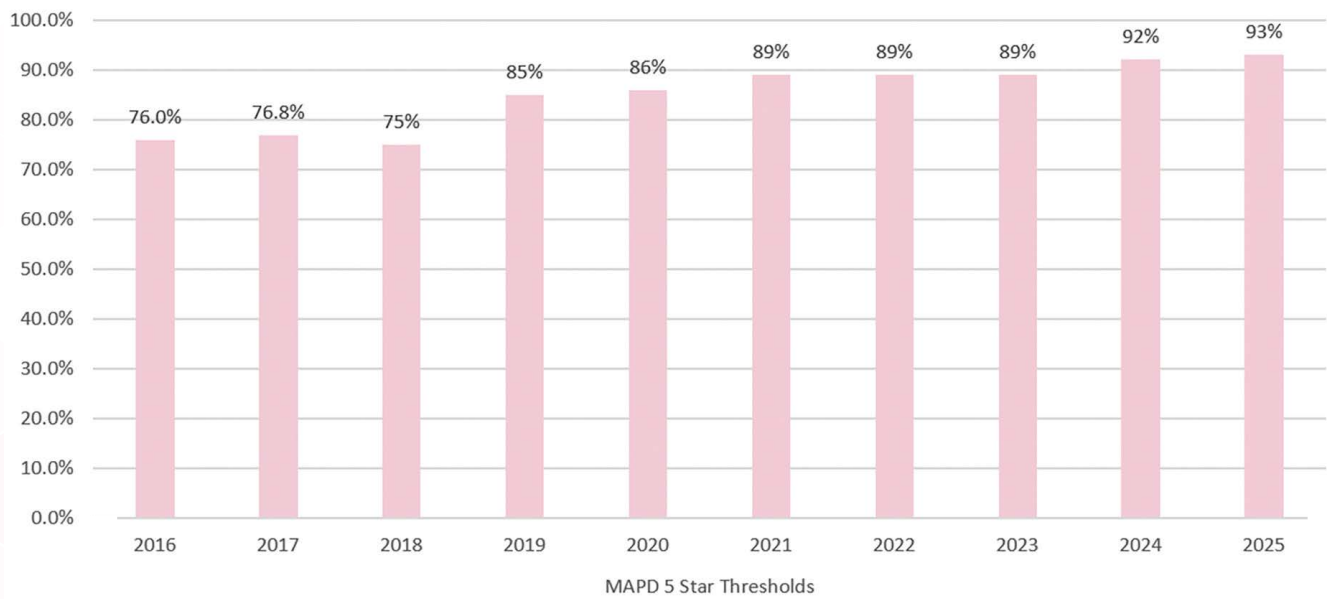
### 2025 Average Star Ratings

Plan	2025	2024
MAPD	3.7	3.6
PDP	3.0	3.2

Changes in average performance scores for the CMR Completion Rate measure varied across Lines of Business

- ▶ MAPD increased from 84% to 87%
- ▶ PDP decreased from 56% to 55%

CMR Completion Rate



## MEASURE DETAILS

- CMR Completion Rate measures the percent of MTM eligible members that have received a CMR during the measurement period.
- Special logic is applied to members enrolled for fewer than 60 days:
  - ▶ Members enrolled for fewer than 60 days who received a CMR will be included in the numerator and denominator for the measure.
  - ▶ Members enrolled for fewer than 60 days who did not receive a CMR will be excluded from the measure.



# Controlling Blood Pressure (CBP) - Part C

## KEY TAKEAWAYS

### 2025 Average Star Ratings

Controlling Blood Pressure (CBP) quality measure is one of the 40 quality measures included in Medicare Part C Stars. For 2025, this measure maintains a **triple-weight**.



The 2025 average Star Rating for CBP fell to 3.0 stars (3.4 in 2024).

## MEASURE DETAILS

- This measures the percent of members 18 - 85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled (<140-90mm Hg).
  - ▶ Members that are enrolled in institutional special needs plans (I-SNP) along with those living in a long-term institution are excluded from the measure.
  - ▶ Additionally, members diagnosed with frailty, receiving palliative care, and those dispensed medications for dementia are excluded.

Controlling Blood Pressure: MAPD 2023 - 2025

Year	1 Star	2 Star	3 Star	4 Star	5 Star
2025	<69%	69%	74%	80%	85%
2024	<58%	58%	68%	74%	82%
2023	<48%	48%	63%	73%	80%



# Diabetes Care - Blood Sugar Controlled - Part C

## KEY TAKEAWAYS

### 2025 Average Star Ratings

The Diabetes Care – Blood Sugar Controlled quality measure is one of the 40 quality measures included in Medicare Part C Stars. For 2025, this measure continues to be **triple-weighted**.



**The average Star Rating for Diabetes Care - Blood Sugar Controlled fell in 2025 from 3.8 to 3.7.**

## MEASURE DETAILS

- This measures the percent of plan members with diabetes who had an A1c lab test during the year that showed their average blood sugar is under control (>9.0%).
  - ▶ Members that are enrolled in institutional special needs plans (I-SNP) along with those living in a long-term institution are excluded from the measure.
  - ▶ Additionally, members diagnosed with frailty, receiving palliative care, and those dispensed medications for dementia are excluded.

Diabetes - Blood Sugar Controlled: MAPD 2023 - 2025

Year	1 Star	2 Star	3 Star	4 Star	5 Star
2025	<49%	49%	72%	84%	90%
2024	<58%	58%	72%	80%	87%
2023	<39%	39%	62%	75%	83%



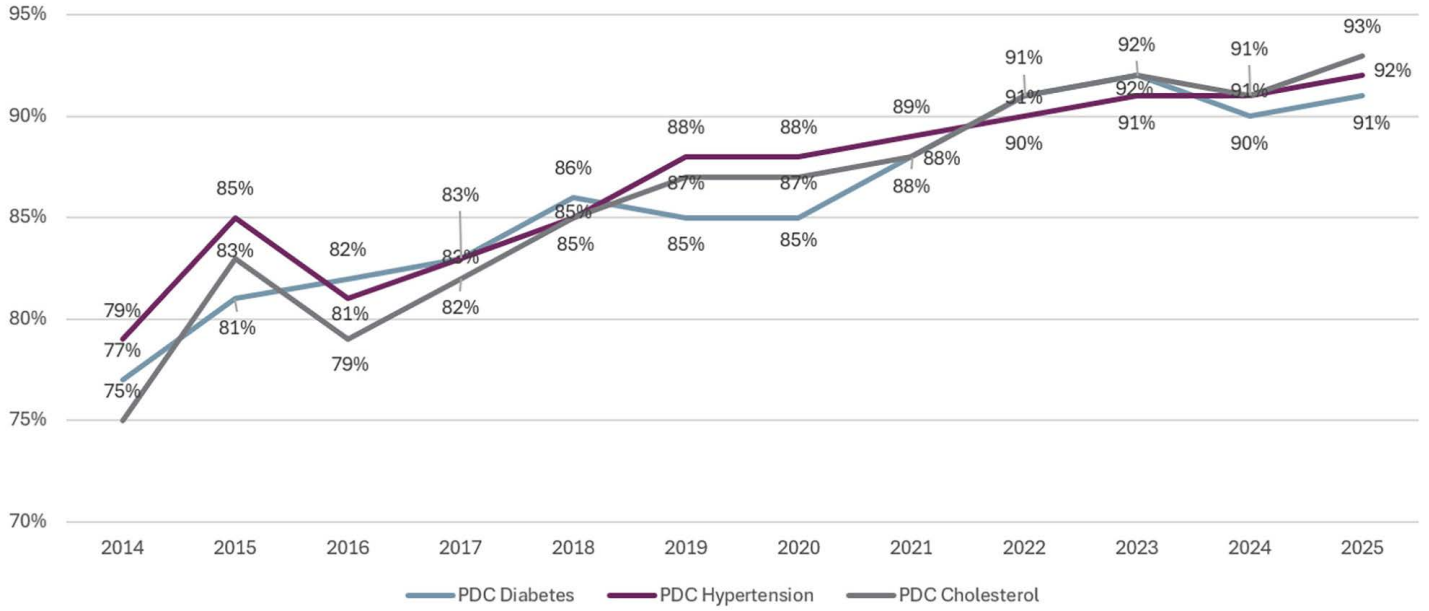
## Appendix I: 2025 MAPD & PDP Thresholds

MAPD 2025 Star Ratings Thresholds					
Measure Name	1 Star	2 Star	3 Star	4 Star	5 Star
PDC Diabetes	<80%	80%	85%	87%	91%
PDC Hypertension	<83%	83%	87%	90%	92%
PDC Cholesterol	<80%	80%	85%	89%	93%
CMR Completion Rate	<57%	57%	77%	89%	93%
Statin Use in Persons with Diabetes	<81%	81%	86%	89%	93%
Statin Therapy for Patients with Cardiovascular Disease	<81%	81%	85%	88%	92%

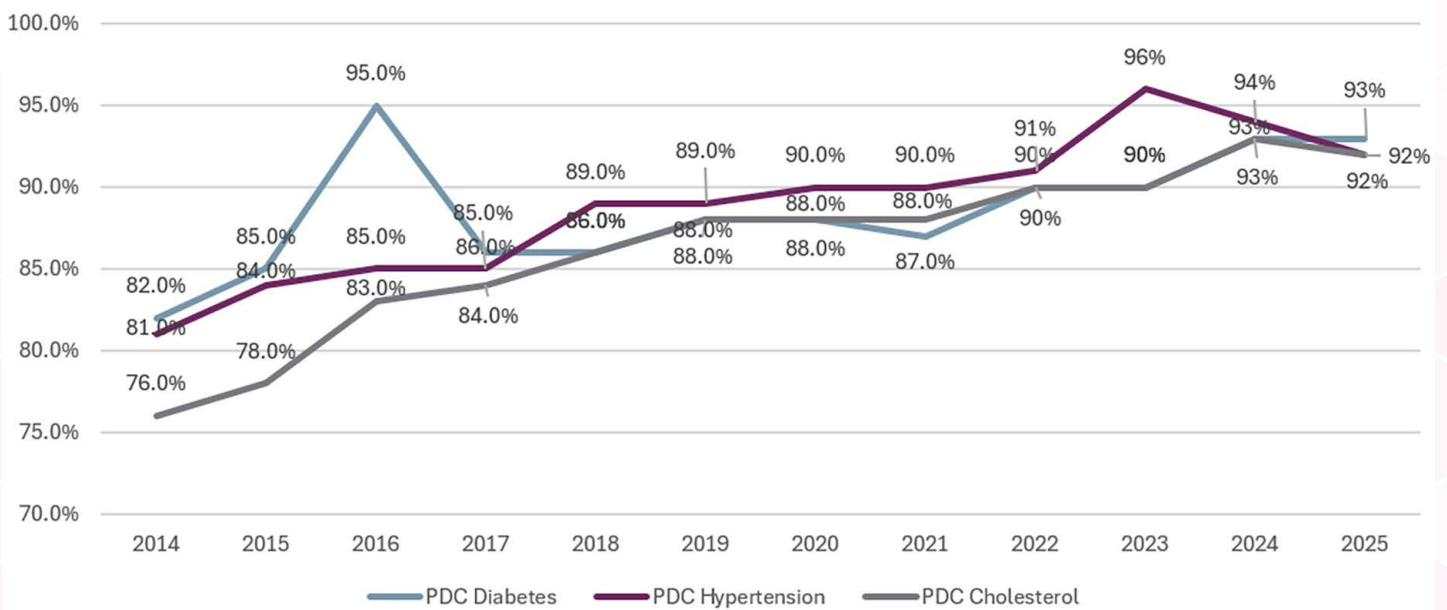
PDP 2025 Star Ratings Thresholds					
Measure Name	1 Star	2 Star	3 Star	4 Star	5 Star
PDC Diabetes	<85%	85%	87%	89%	93%
PDC Hypertension	<87%	87%	89%	90%	92%
PDC Cholesterol	<86%	86%	88%	89%	92%
CMR Completion Rate	<30%	30%	55%	68%	80%
SUPD	<80%	80%	83%	85%	87%

# Appendix II: 2025 MAPD & PDP Performance Trends

## MAPD 5-Star Threshold Trends

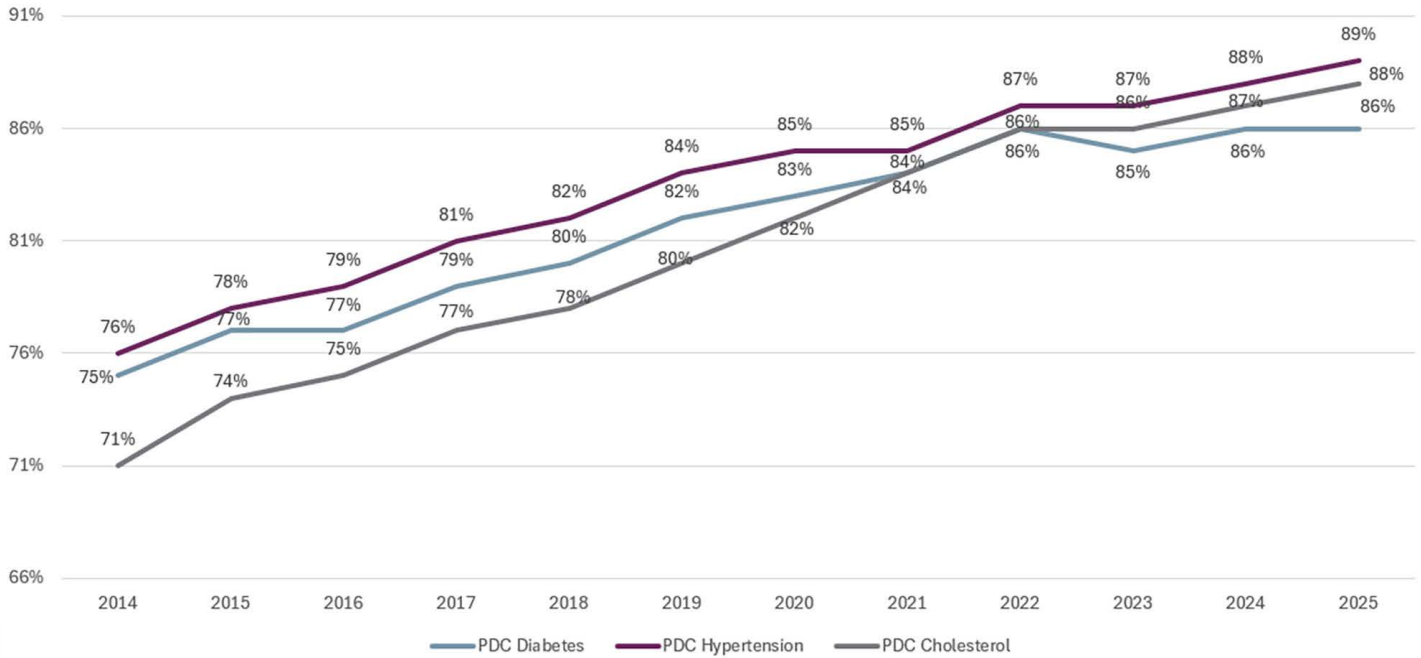


## PDP 5-Star Threshold Trends

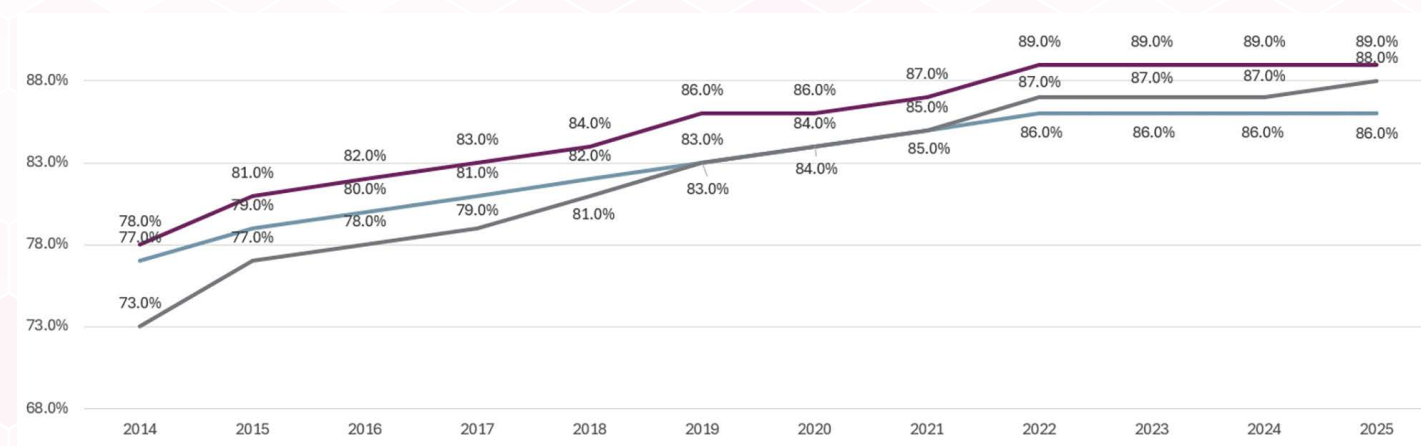


# Appendix II: 2025 MAPD & PDP Performance Trends

## MAPD Adherence Measure Averages



## PDP Adherence Measure Averages





## About Pharmacy Quality Solutions, Inc. (PQS) by Innovaccer

PQS by Innovaccer aligns healthcare payers and pharmacies to achieve their shared goals of better patient outcomes and healthcare quality performance. As a neutral, trusted intermediary supporting the evolution of value-based care, PQS facilitates nationwide pharmacy-based care through our partners and the EQUIPP® platform. Utilizing deep clinical pharmacy knowledge and over a decade of performance management experience, we help clients develop strategies, implement quality improvement programs, and optimize the quality of healthcare for their Medicare, Medicaid, and commercial populations.

### About Enhanced Services Programs

**Controlling High Blood Pressure (CBP) Gap Closure Program:** Data collection for this measure is viable through the pharmacy channel with this revised CBP measure (triple-weighted). To support performance improvement strategies in this quality measure, PQS has created this comprehensive program to work with community pharmacies to collect blood pressure readings and help manage the patient population's health outcomes.

#### Program Highlights

- ▶ Emphasizes the pharmacy-member relationship to capture blood pressure readings and address gaps in care, while managing the patient's hypertension disease state.
- ▶ Utilizes EQUIPP®, accessible by ~95% of all community pharmacies, to host patient lists and enable documentation.
- ▶ Provides a HEDIS® audited supplemental data file to payers with data that can be incorporated into their performance scores for the CBP quality measure.
- ▶ Enables incentives for pharmacies to complete blood pressure screenings at the point of care and counsel patients whose readings are not considered under control.

**Hemoglobin A1c (HbA1c) Data Gap Closure Program:** This comprehensive program is designed to work with community pharmacies to capture and collect HbA1c test results and support patient health improvement.

#### Program Highlights

- ▶ Emphasizes the pharmacy-member relationship to capture A1c readings and address gaps in care.
- ▶ Utilizes EQUIPP®, accessible by ~95% of all community pharmacies, to host patient lists and enable documentation.
- ▶ Provides a HEDIS® audited supplemental data file with data to support payers with their performance scores for the Blood Sugar Controlled quality measure.
- ▶ Enables incentives for pharmacies to complete HbA1c testing at the point of care.

For additional information on how PQS can support you, please visit [www.pharmacyquality.com](http://www.pharmacyquality.com).