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Choose Higher Quality for Better Health Care

Information on quality can help you better compare Medicare plans

Higher quality means better care and value. Each fall, you should review your current Medicare plan and compare with other options to make sure you get the best value for your needs. The Medicare Plan Finder at Medicare.gov/find-a-plan has tools to help you compare Medicare health and prescription drug plans in your area. When comparing plans, you should consider the plan's quality in addition to looking at the plan's costs and coverage. Looking at the plan's quality tells you how well the plan performs overall and in different categories.

Medicare measures how well health and prescription drug plans perform on more than 50 items, which are grouped into different categories:

Medicare health plans are rated on how well they perform in 5 different categories:

1. Staying healthy: screenings, tests, and vaccines
2. Managing chronic (long-term) conditions
3. Member experience with the health plan
4. Member complaints, problems getting services, and improvement in the health plan's performance
5. Health plan customer service

Medicare drug plans are rated on how well they perform in 4 different categories:

1. Drug plan customer service
2. Member complaints, problems getting services, and improvement in the drug plan's performance
3. Member experience with the drug plan
4. Patient safety and accuracy of drug pricing

What the “star” ratings mean

Medicare health and prescription drug plans get overall and/or summary ratings that summarize all categories and measures into a single “star” rating. The star rating of the plan’s performance makes it easy for you to compare plans. If you’re interested in more detail, you can look at the health or drug plan summary scores, or you can “drill down” to the star ratings category details (like member experience with drug plan) or to individual measures within the categories (like members’ ability to get prescriptions filled easily when using the plan). A plan’s star rating is calculated each year and results are available each fall.

A plan can get ratings between 1 and 5 stars. (Some plans may be too new or not have enough data to be rated.)

★★★★★ “Excellent” ★★★★★ “Above average” ★★★ “Average”
★★ “Below average” ★ “Poor”

How you can use this information

Use the star ratings, in addition to cost and coverage information, to compare plans and find a plan that’s good for you.

- Find out if the plan performed better this year than last year.
- See how plans in your area compare to Original Medicare (for some measures).
- Use the high and low performer symbols to quickly identify plans with an overall 5-star rating or plans that consistently get low ratings.

Note: You can switch to a plan that has an overall 5-star rating (if one is available in your area) at any time during the year. You can only make a switch to a 5-star plan one time each year.

- If the plan you’re interested in consistently gets low ratings, review the star ratings details of the plan to make sure it’s a good choice for you.

For more information & to get star ratings

1. Visit [Medicare.gov/find-a-plan](https://www.Medicare.gov/find-a-plan). Enter the appropriate information for a general or personalized search. Once you see the list of plans, you can view the star ratings by selecting the plan name. Or, you can select up to 3 plans to compare.
2. Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

