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The Stars Strategy Playbook:
Smart Plays for Member Engagement and Ratings Wins

Scouting the Field: Why Member Engagement is Your MVP Strategy

The Challenge

If you're working in Medicare Advantage, you've probably felt the pressure: The Centers for Medicare & Medicaid Services (CMS) Star Ratings are getting harder to maintain, and the stakes are higher than ever.

A drop in Star ratings, especially below four stars, affects funding, trust and competitiveness – and it's happening more often.

Why It's Happening

Market competition keeps raising the bar. Even small improvements by peer plans can raise the benchmark for everyone. As CMS updates its scoring methods – including a reduced emphasis on member experience – health plans must adapt quickly to stay ahead. This means a market-wide push toward better quality, faster.

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Rulebook Rewrites:

CMS continues to evolve the Star Ratings program to reflect its priorities: access, experience, outcomes, and digital measurement. Annual shifts in methodology impact how plans are scored – and where they must focus.

Key updates to note:

- **Weight adjustments**
- **New & retired measures**
- **Digital push**

These changes signal a shift from compliance to member-centered engagement. Staying competitive means adapting fast–and aligning with what CMS values most.

Bottom line:

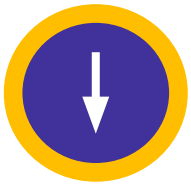
The rules are changing, and so is the path to success. Plans that embrace agility, data-driven decision-making and member-centric engagement will be more likely to thrive.

What's Ahead in This Playbook

In the following sections, we'll explore key strategic "plays" that leading plans are using to improve star ratings performance.

These plays are designed to help you:

- Focus your resources
- Drive measurable impact
- Build a future-ready star ratings strategy



Quick Snapshot:

What's New for the 2026 and 2027 Star Ratings

Added measures

- Improving/Maintaining Physical and Mental Health
- Kidney Health for Patients with Diabetes
- Care for Older Adults - Functional Status Assessment
- Polypharmacy and Concurrent Opioid/Benzodiazepine Use

Removed measures

- Care for Older Adults - Pain Assessment
- Medication Reconciliation Post-Discharge
- Medication Therapy Management (MTM) Criteria (moved to display)

Weight adjustments

- Improving/Maintaining Physical and Mental Health measure increased to three times the weight in 2027 ratings
- Consumer Assessment of Healthcare Providers and Systems (CAHPS) and administrative measures reduced to two times the weight in 2026 ratings

Reward program update

CMS will replace the Reward Factor with Excellent Health Outcomes for All (EHO4all) in 2027 ratings, shifting incentives toward plans that improve care for members with social risk factors.

Running the Plays:
Strategies That Move the Ratings Needle

Play 1

Read the Field with Actionable Data

What's the challenge?

Plans often have mountains of data but struggle to know where to start. Which members need outreach? Which providers are underperforming? Which measures are most at risk?

What this play does:

Helps you zero in on the data that matters most for Stars success, so you can deploy resources where they'll have the biggest impact.

Play action:

- Identify high-weighted measures with low performance
- Segment members by risk, eligibility and engagement history
- Map provider performance to measures that directly affect your star rating
- Prioritize interventions based on ROI potential

Why it works:

Targeted action beats blanket outreach. By focusing on the right members and providers, plans can improve scores faster and more efficiently.

Play 2

Activate Your Offense: Member Engagement at Scale

What's the challenge?

Engaging members – especially those who are underserved, dual-eligible or hard to reach – is one of the biggest hurdles in improving star ratings. Traditional outreach methods often fall flat or fail to reach the right people at the right time.

What this play does:

Helps you build personalized engagement strategies that drive action and improve outcomes.

Play action:

- Tailor multichannel outreach (text, email, phone, mail) to member preferences
- Personalize messaging based on member demographics, health status and engagement history
- Incorporate culturally competent communication and incentives
- Track engagement and adjust tactics in real time

Why it works:

Members are more likely to respond when outreach feels relevant, timely and easy to act on. This play helps plans move from generic campaigns to meaningful connections.

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Play 3

Coach Your Providers to Win

What's the challenge?

Even the best member engagement strategy can fall short if providers aren't aligned with Stars goals. Many providers don't have visibility into how their actions affect ratings – or what they can do to help.

What this play does:

Brings providers into the strategy by giving them the data, tools and support they need to improve performance.

Play action:

- Share provider-level performance dashboards tied to star ratings measures
- Offer training and resources on processes that directly impact star ratings
- Create incentive programs that reward Stars-aligned behavior
- Build feedback loops between providers and plan teams

Why it works:

When providers understand their impact and feel supported, they're more likely to take action – leading to better outcomes and higher ratings.

Play 4

Upgrade Your Gear: Modernize Infrastructure

What's the challenge?

CMS is moving toward digital quality measurement, and many plans are still relying on outdated systems and manual processes. That creates delays, data gaps and missed opportunities.

What this play does:

Helps you build personalized engagement strategies that drive action and improve outcomes.

Play action:

- Audit current systems and identify gaps in data flow and reporting
- Invest in platforms that support digital data collection and real-time interventions
- Align your Stars strategy with how care is delivered, how risk is managed and how members are engaged
- Partner with vendors who offer scalable, AI-powered tools

Why it works:

Modern infrastructure enables faster decision-making, better coordination and more accurate reporting, giving plans a competitive edge in a rapidly evolving environment.

Coaching from the Sidelines: Leadership Moves That Drive Ratings

Here are five ways executives and cross-functional teams can turn strategy into sustained performance:

Set Clear Priorities

Focus on the measures and member segments that will move the needle most. Use data to identify:

- High-weighted measures at risk
- Member populations with gaps in care
- Provider groups with low performance

Align your strategy with broader organizational goals like member retention, continuous quality improvement and cost containment.

Huddle Up

Stars success touches every part of the organization. Build in actions that break down silos:

- Create shared dashboards across Quality, Risk Adjustment, Member Experience and Ops
- Hold regular strategy syncs to track progress and adjust tactics
- Empower teams with clear roles and accountability

Play the Long Game

The Stars timeline spans multiple years – from data collection to survey administration to ratings release. Build your strategy around key milestones:

- Member engagement campaigns aligned with CAHPS and the Health Outcomes Survey (HOS) topics and timeline
- Provider outreach aligned with Healthcare Effectiveness Data and Information Set (HEDIS) measure requirements and measurement periods
- Infrastructure upgrades timed to CMS rulemaking and measure changes

Stay Agile

CMS updates measures and scoring methods regularly. Plans should stay flexible to adapt to CMS updates:

- Monitor regulatory updates and proposed rule changes
- Run performance scenarios to stay ahead of CMS scoring shifts
- Build flexible engagement and reporting systems

Align your strategy with broader organizational goals like member retention, continuous quality improvement and cost containment.

Lead Like a Champion

The most successful plans don't just chase ratings – they build programs that deliver real value to members. That starts with leadership that:

- Champions member-centered care
- Invests in modern infrastructure
- Fosters a culture of continuous improvement

Star Ratings Timeline

The Stars cycle spans four years. Here's a simplified view:

- **Year 1**: Members use benefits, care is delivered and HOS survey is sent out
- **Year 2**: CAHPS surveys are sent, clinical measure data is submitted and CMS calculates ratings
- **Year 3**: Plan uses star rating in their bids
- **Year 4**: Ratings impact payments

Next Season Starts Now: Prep for the Ratings Win

Whether your plan is navigating a dip in Star ratings, preparing for upcoming CMS changes or looking to strengthen member engagement, the path forward starts with clarity, coordination and commitment.

Start with your team:

- Share this playbook across departments: Quality, Risk Adjustment, Member Experience and Operations.
- Identify which plays are most relevant to your current challenges.
- Build a cross-functional workgroup to prioritize and execute.

Run readiness drills:

- Do you have the data you need to target the right members?
- Are your providers equipped to support Stars-critical measures?
- Is your infrastructure ready for digital quality measurement?

If not, now's the time to evaluate your gaps – and explore solutions that can help you close them.

Call in the Specialists – That's Zelis

Zelis works with health plans to strengthen Medicare and Medicaid programs through smarter member engagement. From personalized outreach to technology that grows with your needs, our solutions are designed to help you improve outcomes and elevate your star ratings.

Let's Talk

Ready to take the next step? **Connect with us** or **learn more** about how Zelis can support your Stars strategy.

About Zelis

Zelis is modernizing the healthcare financial experience by providing a connected platform that bridges the gaps and aligns interests across payers, providers, and healthcare consumers. This platform serves more than 750 payers, including the top 5 national health plans, regional health plans, TPAs and self-in`sured employers, and millions of healthcare providers and consumers. Zelis sees across the system to identify, optimize, and solve problems holistically with technology built by healthcare experts – driving real, measurable results for clients.

Learn more at **zelis.com** and follow us on **LinkedIn** to get the latest news.

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