

2024 EDITION

CMS Call Center Monitoring Study

Partner with LanguageLine Solutions® to Maximize Your Star Rating





You strive to meet the needs of your limited English proficient (LEP) members and prospective enrollees to improve health equity and reduce barriers to care. It also makes financial sense for your organization given our rapidly shifting demographics.

The latest U.S. Census population data was just released. In 2023, there were 26.5 million limited English proficient residents in the U.S., and another 12 million+ were Deaf or Hard of Hearing. According to the Centers for Medicare and Medicaid Services (CMS), approximately half of all Hispanic beneficiaries are LEP. Meeting their needs is essential to advance health equity for LEP populations as outlined in the 2024 Medicare Advantage and Part D Final Rule.

Medicare plans that provide high-quality interpreting services and translation of written content can:

- · Improve member satisfaction
- · Attract new members
- · Improve health equity and outcomes
- · Increase understanding and accessibility
- Earn 5 stars on the Accuracy and Accessibility Study

CMS monitors the call centers of Medicare plans each year from February through early June to ensure that Medicare Advantage and Medicare Prescription Drug Benefit Plans are enabling effective communication for all seniors.

CMS Star Quality Ratings

CMS rates Medicare plans on a 1-to-5-star system where 1 indicates poor performance and 5 excellent performance. The star rating system was created by CMS to measure the quality of the plans and assist seniors in choosing the most appropriate plan. Plans that secure 4 stars or more receive a 5% bonus from CMS. In 2023, this equated to approximately \$12.8 billion in Medicare Advantage (MA) quality bonus payments.

CMS releases the Medicare Part C&D ratings each fall and refers to the ratings using the year of the upcoming open enrollment. For example, the ratings released by CMS in October are referred to as the "2024 Medicare Part C & D Star Ratings." According to CMS, only 36 contracts earned 5 stars in the 2024 Star Ratings compared to 57 in the 2023 ratings. The percentage of MA plans that offer prescription drug coverage earning an overall rating of 4 stars or higher dropped from 51% in 2023 to 42% for their 2024 Star Ratings. The average star rating in the Call Center—Foreign Language Interpreter and TTY Availability measure remained the same as the prior year for MA plans - 4.3. However, the average rating in that measure for both MA-PD and PDPs declined considerably: MA-PD: 3.7 (down from 4.4 in 2023) and PDP: 3.0 (down from 4.1 in 2023).

The steep drop in star ratings over the past two years has been attributed to the phase out of disaster provisions applied during the COVID-19 pandemic and a new methodology used to calculate star ratings, making it more difficult for plans to meet the cut points needed to secure a 5-star rating. This makes it even more critical that Medicare sponsors partner with a trusted language access provider with a stringent process in place to optimize success.



CMS Star Rating Calculations

The CMS weighting system for the star rating measures is complex. It examines measures across these five aspects of the patient journey:

- 1. Outcomes: Improvements in a beneficiary's health
- 2. Intermediate Outcomes: Actions taken to assist in improving a beneficiary's health status, such as controlling blood pressure
- 3. Patient Experience: Beneficiaries' perspectives of the care they received
- **4. Access:** Processes and issues that could create barriers to receiving care, including interpreter accessibility
- **5. Process:** Services provided to assist in maintaining, monitoring, or improving health status

For the 2024 Star Ratings, CMS assigned the highest weight to the measures focused on improvement, followed by patient experience and access measures, then outcome and intermediate outcome measures, and process measures at the lowest level along with any new measures.

The Accuracy and Accessibility Study

Data obtained from the study is used by CMS in the calculation of a plan's star rating. CMS conducts the study annually from February through June by placing calls to prospective beneficiary call centers to ensure quality. Part of this study measures performance in assisting callers in their preferred language.

This includes measuring both the availability of an interpreter and the accuracy of the information provided by the Medicare plan customer service representatives (CSRs) in these languages: Spanish, Mandarin, Cantonese, French, Vietnamese and Tagalog. Test calls are made from 8 a.m. to 8 p.m. local time, according to the service areas of the plans. For plans with a service area exclusively in Puerto Rico, English is tested as a foreign language.

The following requirements must be met by plans to ensure success in the CMS Accuracy and Accessibility study:



Once the CMS test caller initiates a call, **a maximum of 10 minutes** is allowed to navigate the interactive voice response (IVR) process, including any "hold" time, **to reach a live customer service representative.**



The next measure is "complete" once the CMS test caller has an interpreter on the line and an introductory question is answered before beginning the first of 3 survey questions within 8 minutes of reaching a plan CSR. Depending on the type of plan, this question is typically, "Are you the right person to answer questions about Medicare Part C/Part D?"



The final measure includes **3 survey questions** asked of the plan CSR by the test caller. Each of 3 questions is allowed **a maximum of 7 minutes**. The questions are taken from CMS publications such as <u>Medicare and You</u> and plan-specific benefit information.

CMS calculates the number of "completed" calls out of all of the foreign language test calls made to the plan and uses that figure in their scoring and to ensure a plan's compliance. A plan may pass the compliance portion during the test call process with a score above 75% (and therefore not be subject to corrective action). CMS uses another metric for assigning the star ratings. The star rating cut points are based on the data from the previous year's audit and can be found in the Medicare Part C & D Star Rating Technical Notes. View the cut points used to determine the 2024 cut points here: <u>Medicare 2024 Part C & D Star Ratings Technical Notes</u>.

While each plan wants to achieve a successful compliance grade, they also want to score much higher to achieve a 5-star rating. According to CMS, cut points aren't set for call center measures until CMS has all the data to be rated. Therefore, the cut points for the data collected during the upcoming test period won't be published until after the test period has ended.

Recommendations for a Plan's Success

As an organization that aims to provide an excellent experience regardless of language or culture, it is vital that you be able to deliver language access wherever and whenever it is needed. Ensuring on-demand access to professional medical interpreters improves health equity and wellness, increases efficiencies, ensures outstanding customer care and maximizes reimbursements.





Understand the CMS requirements and their
impact on your organization.



Train your customer service agents on how to effectively partner with an interpreter.



Partner with LanguageLine
Solutions. We provide our
healthcare clients with
on-demand medical interpreters
on any mobile device in over
240 languages, including
American Sign Language.

Educating Your Customer Service Representatives

It's essential that you educate your representatives about the CMS Study requirements and how best to prepare, including the following recommendations:

- 1 Confirm that the call centers are aware of the test period and are open and staffed appropriately from 8 a.m. to 8 p.m. local time during the test period to ensure the availability of CSRs.
- 2 Make sure that CSRs are reminded that the study is being conducted—so they can be alert to any calls coming in from CMS test callers.
- Make sure that the CSRs know how to quickly access a LanguageLine Solutions interpreter.

 Ensure they have easy access to Quick Reference Guides that provide the toll-free number, Client ID, and any additional information your plan requires.
- 4 Make use of our <u>Please Hold Guide</u> to let callers know, in their own language, to remain on the line until an interpreter is reached.
- 5 Remind the CSRs to remain on the line once an interpreter is connected.

- 6 Educate the CSRs on how to partner with an interpreter to communicate effectively throughout the call. To learn more or for a complimentary training, please contact your LanguageLine Account Executive or our CMS specialist.
- 7 Ensure that the CSRs are aware of and know the contents of the publication <u>Medicare & You 2024</u> as well as the specifics of their plans.
- 8 Remind CSRs to be prepared for multiple similar or seemingly "artificial" calls.
- 9 CMS recommends that the CSR notate on the beneficiary's call center record their preferred language, if other than English.
- Have your call center agents practice conferencing-in an interpreter in advance of the test period.



Partner with LanguageLine Solutions

LanguageLine is committed to helping our clients succeed in this important CMS study. We understand the impact these test calls have on your organization's ability to secure additional federal dollars and successfully market your plans. LanguageLine provides the fastest connect times to the best interpreters in the industry.

Tips to Optimize Support from LanguageLine Solutions:

- Meet LanguageLine Account Executives, our CMS Specialist, and Medicare plan representatives should meet prior to the start of the study period. Working together, they can proactively address any needs they identify such as consolidating accounts for tracking purposes, review call flows to make sure they are streamlined, or secure plan-specific information to share with interpreters for training purposes.
- Work with LanguageLine to set up a dedicated CMS line for enhanced tracking and reporting and an IVR call menu in the 6 tested CMS languages to expedite access to the interpreter in the selected language.
- Share plan resource materials such as plan job aids with your LanguageLine Account Executive. These materials can be shared with LanguageLine's interpreters and housed in our CMS Interpreter Resource Library for training purposes.

- Identify any issues as soon as possible.

 Contact your LanguageLine Account

 Executive or Customer Service, or submit a

 Voice of the Customer feedback form, as

 soon as an issue occurs so that it can be
 resolved in anticipation of additional test calls.
 - Voice of the Customer Feedback Form
 - Call 1-800-752-6096 or email Customer Service
- Ask LanguageLine for additional training for call center staff on how to access interpreter services. LanguageLine can also provide quick reference guides and best practices for partnering with an interpreter.
- Conduct weekly or bi-weekly meetings
 with your Account Executive to review the
 calls, and discuss any improvements needed.



We're the Only Language Solutions Provider Working to Earn You a 5-Star Rating



Ongoing Contact with CMS

LanguageLine staff works throughout the year to stay on top of changes in the process, such as languages to be tested, CMS scoring changes, and issues with the auditors.



Optimized Interpreter Staffing

LanguageLine's Workforce Management Team ensures appropriate interpreter staffing levels for CMS targeted languages during the test period.



Interpreter Training and Refreshed and Ongoing Quality Assurance

LanguageLine's Training Department incorporates the meaningful use of Medicare-related terminology into the training and assessment provided to our interpreters so that they will be comfortable and proficient with the terminology used in the questions. LanguageLine's Senior Language Specialists monitor calls and conduct coaching to ensure the highest level of interpreter quality.



Dedicated CMS Line

LanguageLine provides clients with the option of creating a dedicated CMS line for streamlined calls and enhanced tracking and reporting.



Real-Time Process Improvement

LanguageLine works with clients as quickly as possible to identify problems and escalate resolutions to ensure your ongoing success.



