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## 42 C.F.R. § 422.164

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### Adding, updating, and removing measures.

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- (a) *General.* CMS adds, updates, and removes measures used to calculate the Star Ratings as provided in this section. CMS lists the measures used for a particular Star Rating each year in the Technical Notes or similar guidance document with publication of the Star Ratings.
- (b) *Review of data quality.* CMS reviews the quality of the data on which performance, scoring and rating of a measure is based before using the data to score and rate performance or in calculating a Star Rating. This includes review of variation in scores among MA organizations and Part D plan sponsors, and the accuracy, reliability, and validity of measures and performance data before making a final determination about inclusion of measures in each year's Star Ratings.
- (c) *Adding measures.* (1) CMS will continue to review measures that are nationally endorsed and in alignment with the private sector, such as measures developed by National Committee for Quality Assurance (NCQA) and the Pharmacy Quality Alliance (PQA), or endorsed by the National Quality Forum for adoption and use in the Part C and Part D Quality Ratings System. CMS may develop its own measures as well when appropriate to measure and reflect performance specific to the Medicare program.
- (2) In advance of the measurement period, CMS will announce potential new measures and solicit feedback through the process described for changes in and adoption of payment and risk adjustment policies in section 1853(b) of the Act and then subsequently will propose and finalize new measures through rulemaking.
- (3) New measures added to the Part C Star Ratings program will be on the display page on [www.cms.gov](http://www.cms.gov) for a minimum of 2 years prior to becoming a Star Ratings measure.
- (4) A measure will remain on the display page for longer than 2 years if CMS finds reliability or validity issues with the measure specification.
- (d) *Updating measures—*(1) *Non-substantive updates.* For measures that are already used for Star Ratings, CMS will update measures so long as the changes in a measure are not substantive. CMS will announce non-substantive updates to measures that occur (or are announced by the measure steward) during or in advance of the measurement period through the process described for changes in and adoption of payment and risk adjustment policies in section 1853(b) of the Act. Non-substantive measure specification updates include those that—
- (i) Narrow the denominator or population covered by the measure;
  - (ii) Do not meaningfully impact the numerator or denominator of the measure;
  - (iii) Update the clinical codes with no change in the target population or the intent of the measure;
  - (iv) Provide additional clarifications:
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- (A) Adding additional tests that would meet the numerator requirements;
- (B) Clarifying documentation requirements;
- (C) Adding additional instructions to identify services or procedures; or

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