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From Spreadsheet to Spotlight: Your CMS Star Rating Explained

Introducing Medisolv's New Hospital Star Rating Analyzer Module

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Presenters

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Deciphering the Blackbox: Medisolv's Hospital Star Rating Module

Transitioning from retroactive reporting to predictive performance management

Dynamic Ratings

- Star Ratings are no longer a static scorecard. They are a moving target.

- Cutoff volatility and methodology changes make performance harder to anticipate.

- Waiting means reacting after reputational damage occurs.

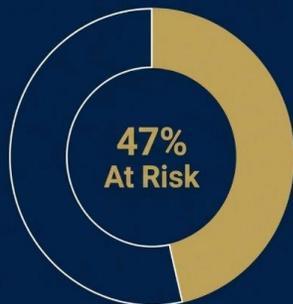- Leaders need foresight, not hindsight.

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Volatility Is the New Normal

- A single measure shift possibly can change your Star.

- Hospitals near thresholds are one reporting period away from impact.

- Without forecasting, leaders are flying blind.

53% of Hospitals Saw No Change. That Means Nearly Half Did.
Volatility is the new normal in the 2026 Star Ratings.

47% At Risk

The Safe Zone is Shrinking: Significant churn occurred for hospitals close to cutoff points.

Peer Group Volatility: Peer Group 4 had the largest increase in number of hospitals included.

The Drivers: Shifts in Mortality (HWM) and Patient Experience (OAS CAHPS) were primary drivers.

Hospital A
★★★

Hospital B
★★★

Performance near threshold and decreased measure performance

Same performance but 2026 measures addition pushed to peer group 4

★★☆

★★☆

The Cost of The Star

Patient **acquisition**

Star Ratings are the public face on Care Compare.

Reputation risk

A drop can undo years of brand investment.

Market pressure

Consumers, employers, and payers actively compare ratings.

Financial reality

The cost of this module is a fraction of the value of a single Star.

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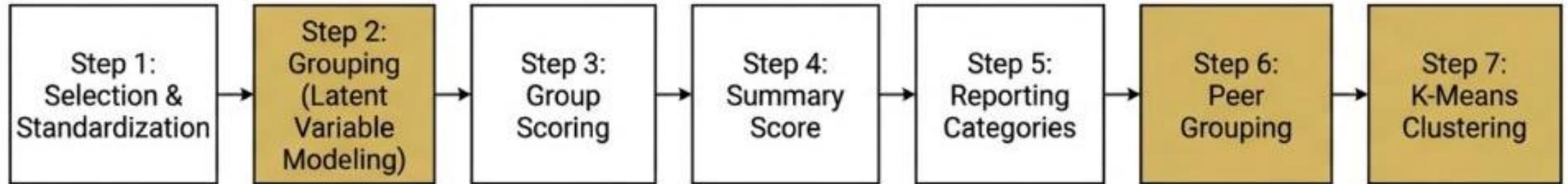# Changes 2026 and Beyond

2026: Methodology Shifts

- 6 new measures introduced

- All 5 stars hospitals drop to 4 star if they're in the lowest quartile for 'Safety of Care'

- Hospitals near cut points experienced significant rating volatility
  ...and changes continue

2027 and Beyond: Safety Penalty Era

- Hospitals in the lowest Safety quartile will lose 1 star across all rating levels

The Math Trap:
Why You Can't Calculate This in Excel

| Step 1: Selection & Standardization | Step 2: Grouping (Latent Variable Modeling) | Step 3: Group Scoring | Step 4: Summary Score | Step 5: Reporting Categories | Step 6: Peer Grouping | Step 7: K-Means Clustering |

"You are trying to hit a moving target. One measure shift changes your Z-score, which changes your Group Score, which changes y your Peer Group."

The Executive Brief: Why This Matters Now

The Reality

2026 Star Ratings are shifting. Updates to Peer Grouping and Mortality/Safety emphasis mean past performance is no longer a predictor of future rating.

The Problem

Hospitals typically lack visibility until the CMS Preview Period—a 30-day window that is too late to effect change.

The Solution

Medisolv's new module does not estimate. It replicates the CMS 7-step methodology where applicable using your submitted data.

The Outcome

Simulate measure improvements. Predict score movement. Prioritize resources before the data is locked.

The Glass Box:
Medisolv's Hospital Star Rating Analyzer Module

01 Replicates the full CMS methodology including peer grouping and leveraging CMS k means clustering for complete transparency

02 Forecasts Star Ratings using recently published data to reveal risk and safe zone positioning

03 Shows how each measure impacts Z scores, group scores, and the final Star outcome

04 Shows how each measure impacts Z scores, group scores, and the final Star outcome

05 Simulates improvement scenarios to prioritize actions that change the rating

06 Enables proactive strategy year-round instead of reacting during the 30-day preview period

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Star Scenario Engine: Simulate Your Success

Star Simulator
Model future star rating scenarios by adjusting individual measure performance and selecting target years for strategic planning

🕐 RESET PREDICTION   SAVE SETTINGS   OPEN SAVED ▼

Current 2025 Rating ⓘ
★★★☆☆

0.03

1	2	3	4	5
-2.468	-0.666	-0.276	0.074	0.460

Choose A Projection Year

2026	2027	2028

Set Target Rating
★ ★ ★ ☆ ☆

Projected Rating ⓘ
★★★☆☆

0.03

1	2	3	4	5
-2.468	-0.666	-0.276	0.074	0.460

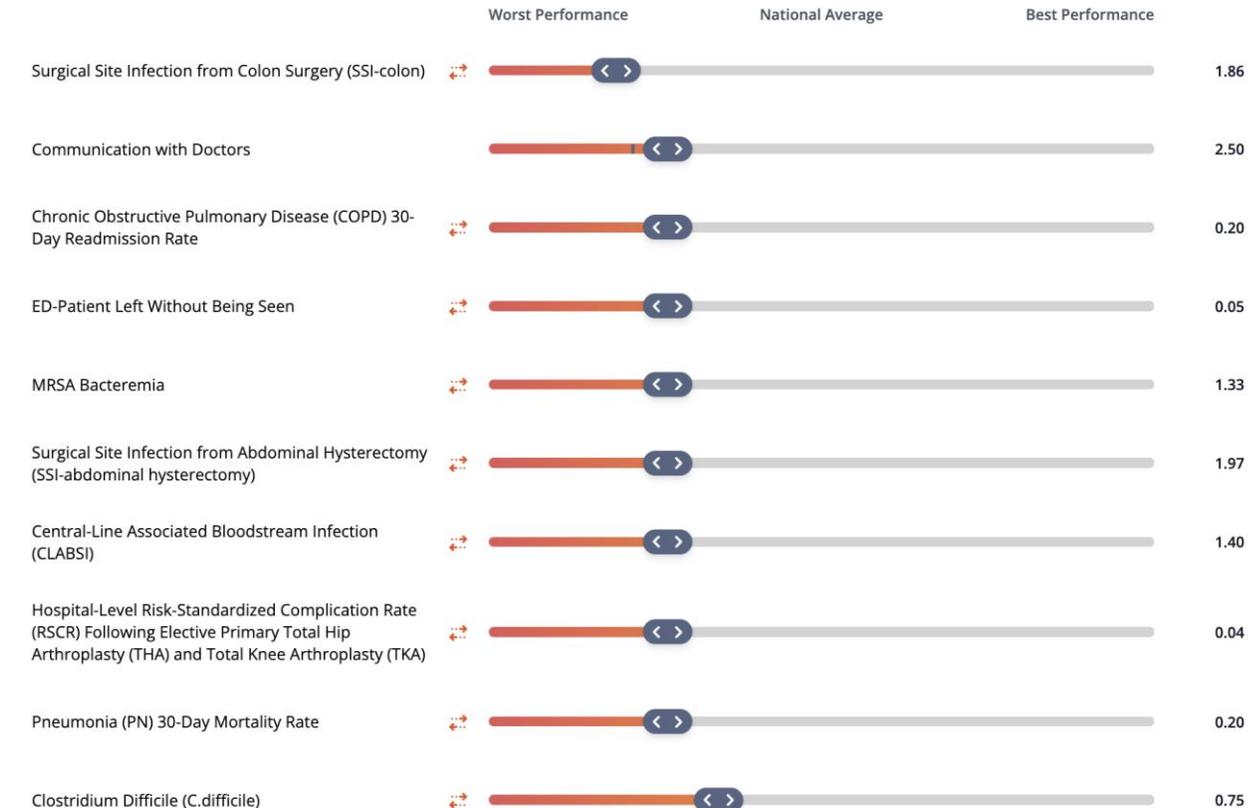## Top 10 Underperforming Measures Adjustment ⓘ
See how improving key individual measures can affect your overall score and star rating. Select a projection year for Medisolv suggestions or drag the slider to model more granular performance improvements for each quality measure and view your target score.

	Worst Performance	National Average	Best Performance	
Surgical Site Infection from Colon Surgery (SSI-colon)				1.86
Communication with Doctors				2.50
Chronic Obstructive Pulmonary Disease (COPD) 30-Day Readmission Rate				0.20
ED-Patient Left Without Being Seen				0.05
MRSA Bacteremia				1.33
Surgical Site Infection from Abdominal Hysterectomy (SSI-abdominal hysterectomy)				1.97
Central-Line Associated Bloodstream Infection (CLABSI)				1.40
Hospital-Level Risk-Standardized Complication Rate (RSCR) Following Elective Primary Total Hip Arthroplasty (THA) and Total Knee Arthroplasty (TKA)				0.04
Pneumonia (PN) 30-Day Mortality Rate				0.20
Clostridium Difficile (C.difficile)				0.75

Not All-Star Reporting Is Equal

EHR Reporting

- Data Silos
- Lacks National Peer Group Data

Manual/ Consultants

- Static Snapshot
- Slow & Expensive

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- Automated & Continuous
- Certified CMS Data
- Methodology Integrity

Product Reveal + Guided Demo

Designed For You, Validated By Peers

- Built in coordination with existing hospital partners using real workflows and real data

- Validated through multiple client engagements and advisory collaborations

- Clients are actively using the module to evaluate Star improvement strategies

- Designed to align quality, finance, and executive teams around a shared Star strategy

- Proven demand with a clear client call to action: prioritize measures and act before submission deadlines

Questions?

Ready to Improve Your Star Rating?

medisolv.com/hospital-star-rating