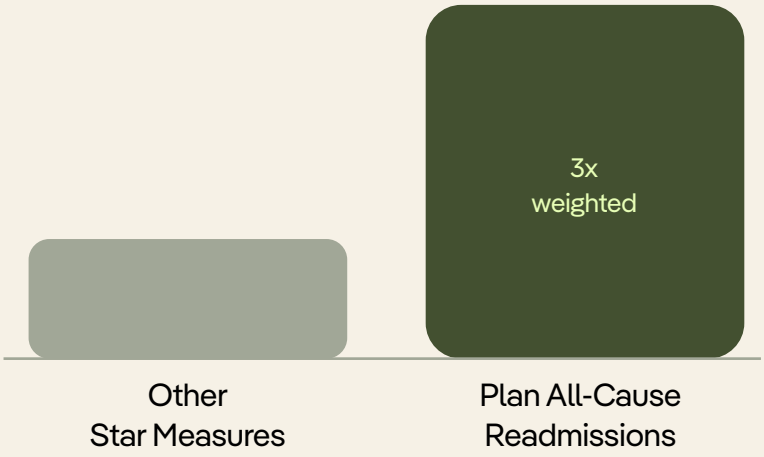
PointClickCare®

Turn a Stronger Star Rating into Millions in Quality Bonus Revenue

As 4.0 Stars gets harder to reach, the financial stakes are rising. For a 50,000-member Medicare Advantage plan, the difference between 3.5 and 4.0 Stars could be roughly $23 million in additional annual revenue.

THE BAR IS RISING: 4.0 Stars Is Getting Harder

CMS continues to shift weight toward clinical outcome measures, the ones that are hardest to move. Plan All-Cause Readmissions alone is triple-weighted in the Star methodology.



These measures don't improve through administrative effort alone. They improve when care teams have the right information at exactly the right moment: **at discharge, when the intervention window is days wide, not weeks.**

THE FINANCIAL CASE FOR THE NEXT HALF-STAR

What could a move from 3.5 to 4.0 Stars be worth for your Medicare Advantage plan?

Let's imagine your plan has

50,000

Medicare Advantage Members

~$1,200

Per Member Per Month (PMPM)

At 4.0 Stars, CMS applies a 5% Quality Bonus to the benchmark.

★★★★☆

At 4.0 Stars

+5%

Quality Bonus Applied.

★★★½☆

Below 4.0 Stars?

$0

The Bonus is $0.

After rebate retention, your plan keeps approximately 65% of the bonus. For a 50,000-member plan, that can add up to roughly:

~$23 million

per year

or about

$400-$500

per member annually.[1]

1 Illustrative. Hypothetical 50K-member plan. ~1,200 PMPM benchmark, 5% Quality bonus, 65% rebate retention. Actual results vary materially by county benchmark, bid-to-benchmark gap, and enrollment mix. Confirm against CMS Rate Announcement.

WHY IT PAYS THREE WAYS

One Half-Star Improvement. Three Financial Tailwinds.

Quality Bonus

THE PRIMARY DRIVER

CMS Quality Bonus payments apply only at 4.0 Stars and above. The bonus adds 5% to the county benchmark (value that goes directly to the bottom line).

Richer Rebate Dollars

MORE TO REINVEST IN MEMBERS

Rebates average $2,400+ per member per year[2] – the dollars that fund the supplemental benefits members compare and shop on. A higher Star rating amplifies the value available to invest in those offerings.

Growth & Retention Flywheel

A COMPOUNDING ADVANTAGE

Plans rated 2.5-3.5 Stars see nearly double the member switch rate of 4-Star plans, or roughly 20% vs. 11% annually. [3] Higher-rated plans attract more members at AEP, retain them longer, and earn stronger broker relationships, building a compounding competitive advantage year over year.

2 CMS CY26 Advance Notice Fact Sheet.
3 Medicare Market Insights / AEP 2026 enrollment analysis. Source: medicaremarketinginsights.com

TWO APPROACHES TO STAR PERFORMANCE

How much is the gap between reactive and proactive costing your plan?

Without Real-Time Visibility	With Real-Time Visibility
Discharges surface through claims weeks or months after they happen	Discharges are visible the same day across 2,800+ hospitals and 3,600+ clinics
High-risk members surface too late for days-wide measure windows	High-risk members with the most time-critical gaps are prioritized first
Outreach is disconnected from the member's most recent encounter	Outreach is guided by recent encounter context, helping teams address barriers and move members forward faster
Quality teams chase data across siloed systems	Worklists show days remaining, deadlines, open dates, and measures at the list and member level
Readmissions erode Star scores one encounter at a time	Teams focus effort where the window is closing to protect revenue, retain members, and strengthen Star performance

HOW POINTCLICKCARE GETS YOU THERE

Claims Data Isn't Enough. We Enable the Real-Time Visibility and Intelligent Workflows that Star-Moving Measures Require.

Real-Time Gap Detection

ADT signals from 2,800+ hospitals and 3,600+ clinics help your team identify time-sensitive member events as they happen.

Urgency-Based Prioritization

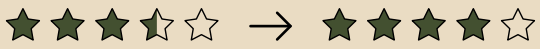
Worklists show days remaining, deadlines, open dates, and measures at the list and member level, helping teams focus effort where the window is closing.

One Outreach. Multiple Measures Closed.

When post-discharge gaps overlap, one coordinated outreach can move multiple quality measures at once, without adding more work.

The Result?

Plans that act before the window closes move the measures that matter and build the Star Performance that unlocks millions in Quality Bonus revenue, year after year.



SEE WHAT YOUR HALF-STAR GAIN COULD BE WORTH

Your plan's potential gain depends on enrollment, county benchmarks, and current Star performance. See how real-time visibility and coordinated workflows can help protect quality revenue.

Request a Demo >

PointClickCare is a leading health tech company with one simple mission: to help every provider **deliver exceptional care.**

PointClickCare®

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