



February 13, 2025

Centers for Medicare & Medicaid Services
Attention: OMB Control Number: 0938-0701
7500 Security Boulevard
Baltimore, MD 21244-1850

Submitted Electronically: <https://www.reginfo.gov/public/do/PRAMain>

Re: Medicare Health Outcomes Survey

Dear Sir/Madam:

UnitedHealthcare (UHC) is responding to the Information Collection Request (ICR) for the Medicare Health Outcomes Survey (HOS). The ICR was published by the Centers for Medicare & Medicaid Services (CMS) in the Federal Register on January 14, 2025 (90 FR 3222).

UnitedHealthcare offers a full range of health benefits, enabling affordable coverage, simplifying the health care experience and delivering access to high-quality care. UnitedHealthcare is the health benefits business of UnitedHealth Group, a health care and well-being company working to help build a modern, high-performing health system through improved access, affordability, outcomes and experiences. We are committed to a future where every person has access to high-quality, affordable health care and a modern, high-performing health system that reduces disparities, improves outcomes, and lessens the burden of disease.

PCS and MCS Scoring Calculations

After reviewing CMS's response to our December 9, 2024 comment recommending re-evaluation of the mental component score (MCS) and physical component score (PCS) calculation, UHC reiterates that this is an issue worth investigating further. These are independent and distinct Star Ratings measures, and their individual calculations should be able to logically stand on their own. MCS and PCS scoring use a regression model with specific coefficients for each of the twelve VR-12 questions, with the coefficients differing by measure (MCS, PCS). The answers to all 12 questions are used in the calculation in both the mental and physical component scores. The regression-based coefficients can sometimes lead to unexpected and unintuitive results. For MCS, the score calculation includes six questions relating to physical health that have negative coefficients, meaning better self-reported physical health results in lower MCS scores. Additionally, the PCS score calculation includes five questions relating to mental health where better reported mental health results in lower PCS scores. This can lead to confounding results for a respondent between the baseline and follow-up survey. There are cases where over a two-year period a respondent reports improved mental health but their PCS score declines, even in the absence of any reported decline in the physical health VR-12 domains and vice versa. In a specific example, if a member gave the most negative response to question 6c (asking if they have felt downhearted and blue) on the baseline survey and then gave the most positive response to the same question on the follow-up survey two

years later, they would see a multiple point drop in PCS even if no other response on the other 11 questions had changed between the baseline and follow-up surveys. Using our own member-level survey data from the 2022 CMS HOS follow-up survey, UHC was able to identify over 5% of our respondents who had significant improvements to question 6c from the 2020 baseline survey to the 2022 follow-up survey (significant meaning at least a two-level improvement in response, e.g., changing from “a good bit of the time” to “all the time”). On average, members who *improved* on this question alone had a PCS score that was over two points lower at follow-up compared to members who had *significant declines* in this question alone.

UHC recommends re-calculating the coefficients used to calculate MCS and PCS by limiting the questions to those that are directly associated with each component (PCS, MCS). For PCS, that would include questions 1, 2a, 2b, 3a, 3b and 5. For MCS, that includes questions 4a, 4b, 6a, 6b, 6c and 7.

Table: MCS and PCS model coefficients

Component	Q#	Item	Model Coefficients	
			MCS	PCS
Physical Health	Q1	Your health	-0.001	0.078
	Q2a	Moderate Activities	-0.035	0.065
	Q2b	Several stairs	-0.032	0.075
	Q3a	Accomplished less	-0.025	0.072
	Q3b	Limited in work	-0.025	0.074
	Q5	Pain interference	-0.024	0.134
Mental Health	Q4a	Accomplished less	0.127	-0.058
	Q4b	Work less carefully	0.081	-0.032
	Q6a	Calm and peaceful	0.109	-0.042
	Q6b	A lot of Energy	0.069	0.030
	Q6c	Downhearted/blue	0.149	-0.053
	Q7	Social Interference	0.109	0.005

Source: Methodology documentation from Boston University

Thank you for your thoughtful consideration of our comments. Should you have any questions, please do not hesitate to contact me.

Sincerely,



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