QRS Preview Report for 45142-NV-HMO

Introduction

The table below includes the QRS ratings for the eligible reporting unit defined above. A rating (on a 5-star scale) is provided for the global result and summary indicator levels of the QRS hierarchy.

CMS continuously refines the QRS program and QHP Enrollee Survey based on a variety of factors, including stakeholder feedback, clinical guideline changes, Agency priorities and advances in quality measurement and survey administration that impact each year's ratings. Any refinements (e.g., changes to the rating methodology, changes to the QRS measure set) may impact the ability to trend results across years. External factors (e.g., churn of Exchange enrollees, changes in product offerings) may impact year-over-year comparisons.

Ratings Status Codes

The following codes are used when a rating could not be calculated:

- **CSR-I**: Insufficient data to calculate a score or rating according to the QRS rating methodology.
- **CSR-NS**: Measure data for this component not included in QRS scoring this year for all reporting units.
- **NG**: No Global - insufficient data to calculate a global rating. This code applies to the global rating only.

Resources

For more information about the QRS rating methodology, please see the *Quality Rating System and Qualified Health Plan Enrollee Experience Survey: Technical Guidance for 2025* document available for download at the CMS Health Insurance Marketplace Quality Initiatives (MQI) website at: https://www.cms.gov/files/document/qrs-and-qhp-enrollee-survey-technical-guidance-2025.pdf

Please submit questions about the QRS ratings no later than 5:00PM ET on the last day of the preview period. Include "MQI-QRS Preview" in the subject line of the email.

- QHP issuers, Exchange administrators, and all other entities should submit questions to CMS' Marketplace Service Desk (MSD) via e-mail at CMS_FEPS@cms.hhs.gov or via phone at 1-855-267-1515.

Preview Report ID: 2025-49-59-45142-NV-HMO

COMPONENT	RATING
GLOBAL RATING	★★★★★
Summary Indicator: Clinical Quality Management	★★★★★
Summary Indicator: Enrollee Experience	★★★★★
Summary Indicator: Plan Efficiency, Affordability and Management	★★★★★