

## Quality Performance Results

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**Table 1. Summary Information**

Domain	Points Earned without Quality Improvement Points	Quality Improvement Reward Points [1]	Points Earned with Quality Improvement Reward Points [2]	Domain Score	Quality Performance Standard Status [3]
Patient/Caregiver Experience	14.05	0.00	14.05	87.81%	Completely reported on 100% of measures and met minimum attainment on 100% of measures
Care Coordination/Patient Safety	17.70	0.00	17.70	98.33%	Completely reported on 100% of measures and met minimum attainment on 100% of measures
Preventive Health	14.50	3.56	16.00	100.00%	Completely reported on 100% of measures and met minimum attainment on 100% of measures
At Risk Population	6.65	2.24	8.00	100.00%	Completely reported on 100% of measures and met minimum attainment on 100% of measures
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Initial Quality Score [4]	96.54%				
ACO completely reported on 100% of measures:	Yes				
ACO achieved minimum attainment on at least one measure in each domain:	Yes				
ACO achieved minimum attainment on at least 70% of measures in each domain:	Yes				
QMV Audit Overall Match Rate [5]	98.00%				
Final Quality Score [6]:	96.54%				

[1] ACOs beyond the first performance year can earn a maximum of 4 quality improvement reward points per domain. Please note, quality improvement can only be calculated for measures with 2 consecutive years of reported data.

[2] ACOs cannot earn more than the maximum possible points in each domain.

[3] "Minimum Attainment" defined as 30 percent or the 30th percentile of the performance benchmark for P4P measures and complete reporting for P4R measures.

[4] ACOs in PY1: An Overall Quality Score of 100% is indicative of complete reporting. For ACOs beyond the first year of their first agreement period, the ACO Overall Quality Score is calculated by averaging the four domain scores.

[5] For ACOs that participated in the QMV Audit, equal to your ACO's QMV audit match rate (i.e., total number of audited records that match the information reported in the Web Interface divided by the total number of records audited). More information can be found in Table 6 and in the detailed audit report that was delivered in June 2019.

[6] Equal to Initial ACO Overall Quality Score if ACO's QMV Audit Overall Match Rate was at least 90%. Else, equal to Initial Overall Quality Score  $\times$  QMV Audit Match Rate. ACOs in their first performance year will not have their Initial Quality Score adjusted.

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Table 2. Patient/Caregiver Experience [1]										Domain Improvement Score [2]: 0%				
Measure Number	Measure Name	P4P or P4R		Number of Surveys Completed	Your ACO Performance Rate	Completely Reported?	Quality Improvement Reward Information [3]	Points Earned [4]	Total Possible Points	Prior Year Performance Rate [5]	Current Year Mean Performance Rate (NextGen ACOs)	Current Year Mean Performance Rate (All ACOs)	30th Percentile Benchmark	90th Percentile Benchmark
ACO-1	CAHPS: Getting Timely Care, Appointments, and Information	P	—	237	88.25	Yes	No Significant Change	1.85	2	87.61	86.37	86.17	30.00	90.00
ACO-2	CAHPS: How Well Your Providers Communicate	P	—	263	95.01	Yes	No Significant Change	2	2	93.35	94.10	93.95	30.00	90.00
ACO-3	CAHPS: Patients' Rating of Provider	P	—	258	92.74	Yes	No Significant Change	2	2	91.81	92.78	92.49	30.00	90.00
ACO-4	CAHPS: Access to Specialists	P	—	177	81.83	Yes	No Significant Change	1.85	2	79.40	81.16	81.46	30.00	90.00
ACO-5	CAHPS: Health Promotion and Education	P	—	272	58.34	Yes	No Significant Change	1.55	2	53.94	60.83	59.45	54.18	63.44
ACO-6	CAHPS: Shared Decision Making	P	—	251	58.35	Yes	No Significant Change	1.55	2	56.40	61.11	61.84	54.75	62.76
ACO-7	CAHPS: Health Status/Functional Status	R	—	278	72.71	Yes	No Significant Change	2	2	71.82	73.98	73.43	N/A	N/A
ACO-34	CAHPS: Stewardship of Patient Resources	P	—	260	26.46	Yes	No Significant Change	1.25	2	19.87	25.29	26.14	24.25	33.43

Table 3. Care Coordination/Patient Safety										Domain Improvement Score [2]: 0%				
Measure Number	Measure Name	P4P or P4R	Numerator	Denominator	Your ACO Performance Rate	Completely Reported?	Quality Improvement Reward Information [3]	Points Earned [4]	Total Possible Points	Prior Year Performance Rate [5]	Current Year Mean Performance Rate (NextGen ACOs)	Current Year Mean Performance Rate (All ACOs)	30th Percentile Benchmark	90th Percentile Benchmark
ACO-8	Risk Standardized, All Condition Readmission	R	—	—	15.11	Yes	Significant Decline	2	2	14.78	15.19	15.00	15.18	14.27
ACO-35	Skilled Nursing Facility 30-Day All-Cause Readmission measure (SNFRM)	R	—	—	20.03	Yes	Significant Decline	2	2	18.22	19.02	18.63	19.22	16.85
ACO-36	All-Cause Unplanned Admissions for Patients with Diabetes [2]	R	—	—	34.24	Yes	Significant Decline	2	2	33.08	36.88	37.00	39.00	23.12
ACO-37	All-Cause Unplanned Admissions for Patients with Heart Failure	R	—	—	76.74	Yes	Significant Improvement	2	2	80.11	78.83	76.92	82.32	50.99
ACO-38	All-Cause Unplanned Admissions for Patients with Multiple Chronic Conditions	R	—	—	56.85	Yes	Significant Improvement	2	2	58.63	60.02	59.09	65.99	41.39
ACO-43	Ambulatory Sensitive Condition Acute Composite (AHRQ® Prevention Quality Indicator (PQI #91))	R	—	—	1.77	Yes	Significant Decline	2	2	1.66	1.85	1.97	N/A	N/A
ACO-12	Medication Reconciliation Post-Discharge	R	215	245	87.76%	Yes	Significant Improvement	2	2	44.04%	80.75%	85.46%	N/A	N/A
ACO-13	Falls: Screening for Future Fall Risk	P	217	279	77.78%	Yes	Significant Improvement	1.7	2	61.93%	80.83%	79.82%	43.42%	90.73%
ACO-44	Use of Imaging Studies for Low Back Pain	R	—	—	77.78%	Yes	No Significant Change	2	2	61.54%	67.02%	64.58%	N/A	N/A

Table 4. Preventive Health										Domain Improvement Score [2]: 85.71%				
Measure Number	Measure Name	P4P or P4R	Numerator	Denominator	Your ACO Performance Rate	Completely Reported?	Quality Improvement Reward Information [3]	Points Earned [4]	Total Possible Points	Prior Year Performance Rate [5]	Current Year Mean Performance Rate (NextGen ACOs)	Current Year Mean Performance Rate (All ACOs)	30th Percentile Benchmark	90th Percentile Benchmark
ACO-14	Preventive Care and Screening: Influenza Immunization	P	216	295	73.22%	Yes	Significant Improvement	1.7	2	48.84%	71.39%	72.60%	30.00%	90.00%
ACO-15	Pneumonia Vaccination Status for Older Adults	P	192	257	74.71%	Yes	Significant Improvement	1.7	2	53.11%	78.09%	76.15%	30.00%	90.00%
ACO-16	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow Up	P	327	388	84.28%	Yes	Significant Improvement	1.85	2	72.46%	72.05%	76.43%	30.00%	90.00%
ACO-17	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	R	18	25	72.00%	Yes	Not Eligible	2	2	N/A	70.77%	72.65%	N/A	N/A
ACO-18	Preventive Care and Screening: Screening for Clinical Depression and Follow-up Plan	P	201	454	44.27%	Yes	Significant Improvement	1.25	2	26.70%	65.96%	66.68%	30.00%	90.00%
ACO-19	Colorectal Cancer Screening	R	273	389	70.18%	Yes	Significant Improvement	2	2	56.92%	71.87%	68.57%	30.00%	90.00%
ACO-20	Breast Cancer Screening	R	360	545	66.06%	Yes	Significant Improvement	2	2	60.30%	73.80%	72.12%	30.00%	90.00%
ACO-42	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	R	198	252	78.57%	Yes	No Significant Change	2	2	76.86%	79.17%	81.28%	N/A	N/A

Table 5. At-Risk Population						Domain Improvement Score [2]: 50%								
Measure Number	Measure Name	P4P or P4R	Your ACO			Completely Reported?	Quality Improvement Reward Information [3]	Points Earned [4]	Total Possible Points	Prior Year Performance Rate [5]	Current Year Mean Performance Rate (NextGen ACOs)	Current Year Mean Performance Rate (All ACOs)	30th Percentile Benchmark	90th Percentile Benchmark
			Numerator	Denominator	Performance Rate									
ACO-40	Depression Remission at Twelve Months	R	2	58	3.45%	Yes	Significant Decline	2	2	13.73%	6.69%	8.59%	N/A	N/A
Diabetes Composite	Diabetes Composite (All or Nothing Scoring)	P	81	251	32.27%	Yes	Significant Improvement	1.1	2	20.43%	47.93%	46.89%	29.90%	60.37%
ACO-27	Diabetes Mellitus: Hemoglobin A1c Poor Control	P	25	251	9.96%	Yes	Not Applicable	N/A	N/A	22.56%	15.42%	15.51%	N/A	N/A
ACO-41	Diabetes: Eye Exam	P	92	251	36.65%	Yes	Not Applicable	N/A	N/A	23.98%	52.93%	52.47%	N/A	N/A
ACO-28	Hypertension (HTN): Controlling High Blood Pressure	P	406	534	76.03%	Yes	Significant Improvement	1.7	2	69.00%	74.42%	73.21%	30.00%	90.00%
ACO-30	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic	P	211	250	84.40%	Yes	Significant Improvement	1.85	2	73.68%	88.11%	88.85%	30.00%	90.00%

[1] CAHPS measures combine responses to several questions, some of which have different response options (e.g., never, sometimes, usually, or always, and yes; definitely, yes, somewhat, or no). Performance rates for CAHPS measures do not represent a percentage but rather your ACO's mean (average) performance

[2] A domain improvement score of at least 90% receives 4 Quality Improvement Reward points; ≥80% receives 3.56 points; ≥70% receives 3.12 points; ≥60% receives 2.68 points; ≥50% receives 2.24 points; ≥40% receives 1.8 points; ≥30% receives 1.36 points; ≥20% receives 0.92 points; ≥10% receives 0.48 points. A domain improvement score less than 10% receives 0 Quality Improvement Reward points.

This field will display "Not Eligible" if the measure is not eligible for use in the Quality Improvement Reward (e.g., your ACO did not completely report the measure in either the current or previous year); "Not Applicable" if the measure is new and thus not used in the Quality Improvement Reward; "Significant Improvement" if your ACO demonstrated significant improvement between last year and this year; "Significant Decline" if your ACO demonstrated significant decline between last year and this year; "No Significant Change" if your ACO did not demonstrate significant change between last year and this year; and "Held Harmless" if their performance on a measure significantly declined, but remained above 90% (or in the case of certain measures, above the 90th percentile benchmark) in both the current year and previous year. Significant improvement and significant decline are determined by a t-test at the 95% significance level.

[3] An ACO will be held harmless if their performance on a measure significantly declined, but remained above 90% (or in the case of certain measures, above the 90th percentile benchmark) in both the current year and previous year.

[4] For P4P measures: Points are calculated based on the ACO's performance compared to the 2018 quality measure benchmarks; For P4R measures: Full points are awarded if the ACO completely reports.

[5] The prior year performance rates for several measures have been updated. Specifically: performance rates in the Patient/Caregiver Experience domain have been updated to reflect the revised 2018 CAHPS for ACOs survey, to allow for comparability; the ACO-36 performance rate has been updated to correct a non-material technical error, as announced in the Next Generation ACO newsletter.

N/A = Not Applicable

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### Table 6. Quality Measures Validation Audit Summary Results

Measure Number	Measure Name	Number of Matches	Number of Records Audited
ACO-13	Falls: Screening for Future Fall Risk	50	50
ACO-20	Breast Cancer Screening	50	50
ACO-27	Diabetes Mellitus: Hemoglobin A1c Poor Control	46	50
ACO-28	Hypertension (HTN): Controlling High Blood Pressure	50	50
<b>Total:</b>		196	200
<b>Overall QMV Audit Match Rate [1]:</b>		98.00%	

Note:

[1] Because your ACO's match rate met or exceeded 90%, your ACO's initial quality score was not adjusted.