

Accountable Care Organization (ACO) 2014 Quality Performance Report

Prepared For:
(A1196) Methodist Patient Centered ACO

About this Report

Who provides this report?	<ul style="list-style-type: none"> The Centers for Medicare and Medicaid Services (CMS) provides this Quality Performance Report to all Accountable Care Organizations participating in the Shared Savings Program (SSP) after the completion of each contract year. This report is for the calendar year (CY) 2014.
What information is contained in this report?	<ul style="list-style-type: none"> This report contains information on: <ul style="list-style-type: none"> Your ACO's performance rate for each of the 33 ACO quality measures for the 2014 reporting period, regardless of whether or not your ACO completely reported on that measure. A summary score for each of the four quality measure domains, calculated as the sum of the points earned in the domain divided by the total possible points in the domain Summary statistics (means and medians) of each of the 33 measures across all ACOs in the SSP for relative comparison. The percent of Pay for Performance (P4P) measures in <u>each domain</u> where your ACO's performance achieved minimum attainment, to identify areas requiring attention. For each measure, your ACO's performance rate is calculated based on a representative sample of beneficiaries assigned or aligned to your ACO.
Why is this report provided to you?	<ul style="list-style-type: none"> The purpose of this report is to enable you to see how your ACO performed on a set of quality metrics in CY 2014, and compare how your ACO performed relative to the average performance of other SSP ACOs. This information will help you to identify areas for quality improvement in the next reporting period. An ACO's final overall quality score is multiplied by the ACO's maximum sharing rate to determine the final sharing rate. For more information, please refer to the Shared Savings and Losses and Assignment Methodology Specifications http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharesavingsprogram/Financial-and-Assignment-Specifications.html.
What's different in this report relative to last year's report?	<ul style="list-style-type: none"> A column has been added to the "Summary Information" table to indicate the percentage of Pay for Performance measures the ACO passed the minimum attainment threshold¹. A column has been added to the tables on pages 4-6 to indicate which measures are pay for reporting (P4R) or P4P. The right-most columns of the report now display the 30th percentile benchmark and the 90th percentile benchmark in lieu of summary statistics. Several summary statistics columns have been removed in the interest of space.
How to interpret this report?	<ul style="list-style-type: none"> Please see the document entitled <i>Shared Savings Program Quality Performance Report Supplemental Documentation</i> for a detailed explanation of how to interpret this report.

NOTE: ¹ "Minimum Attainment" defined as 30 percent or the 30th percentile of the performance benchmark per §425.502(b)(3) of the 2011 Medicare Shared Savings Program Final Rule.

About this Report, continued

What's Next?

- If your ACO completely and accurately reported and met minimum attainment on at least one P4P measure in each domain, then your ACO will be eligible to share in any savings earned.
- If your ACO failed to completely and accurately report or failed to meet minimum attainment on at least 70% of P4P measures in each domain, then your ACO may be placed on a corrective action plan (CAP).
- Additionally, if your ACO has completely and accurately reported each ACO Group Practice Reporting Option (GPRO) Web Interface measure for the 2014 reporting period, your ACO participants with eligible professionals will receive incentive payments under the Physician Quality Reporting System (PQRS) for the 2014 reporting period in Fall 2015 and avoid the PQRS payment adjustment in 2016.
- For more information on quality reporting in 2015, please refer to resources available to you on the Shared Savings Program Quality Measures, Reporting and Performance Standards webpage and the Shared Savings Program ACO Portal.
- All ACO measures are available for public reporting. Those ACO GPRO and CAHPS quality measures that are chosen for public reporting will be reported on Physician Compare with the same plain language measure titles and descriptions as used for the equivalent group practices that are reported under PQRS.
- CMS encourages you to share your results with your ACO providers so that they can help you identify ways to improve and assist your ACO in capturing the required data efficiently.

Summary Information

Domain	Points Earned/ Total Possible Points	Domain Score	Minimum Attainment by Domain ¹
Patient/Caregiver Experience	11.55/14 points	82.50%	Met minimum attainment on 5 of 6 (83.33%) P4P measures
Care Coordination/ Patient Safety	10.05/14 points	71.79%	Met minimum attainment on 5 of 6 (83.33%) P4P measures
Preventive Health	14.65/16 points	91.56%	Met minimum attainment on 5 of 5 (100.00%) P4P measures
At Risk Population	13.25/14 points	94.64%	Met minimum attainment on 3 of 3 (100.00%) P4P measures

NOTE: ¹“Minimum Attainment” defined as 30 percent or the 30th percentile of the performance benchmark per §425.502(b)(3) of the 2011 MSSP Final Rule.

ACO Quality Score: 85.12%

ACO completely reported on 100% of measures;

ACO achieved minimum attainment on at least one P4P measure in each domain;

ACO achieved minimum attainment on at least 70% of P4P measures in each domain.

P4P or P4R ¹	Measure	Your ACO Performance Rate	Points Earned/Total Possible Points ²	30 th Percentile Benchmark ³	90 th Percentile Benchmark
-	Domain: Patient/Caregiver Experience⁴	319 Surveys Completed	-	-	-
P	Getting Timely Care, Appointments, and Information (ACO-1)	83.12	1.85/2	30.00	90.00
P	How Well Your Doctors Communicate (ACO-2)	92.38	2.00/2	30.00	90.00
P	Patients' Rating of Doctor (ACO-3)	91.49	2.00/2	30.00	90.00
P	Access to Specialists (ACO-4)	85.48	1.85/2	30.00	90.00
P	Health Promotion and Education (ACO-5)	59.24	1.85/2	54.71	60.71
P	Shared Decision Making (ACO-6)	71.64	0.00/2	72.87	76.71
R	Health Status/Functional Status (ACO-7)	69.34	2.00/2	Not Applicable	Not Applicable
-	Points Earned in Domain:	-	11.55/14	-	-

NOTES: ¹ P = Pay for Performance, R = Pay for Reporting; ² Points are calculated based on the ACO's performance compared to the quality measure benchmarks; ³ For a complete list of benchmarks for each measure, please see the [MSSP Quality Measure Benchmarks for the 2014 Reporting Year document](#); ⁴ For more information on CAHPS performance rates, please refer to the detailed CAHPS report provided separately.

P4P or P4R ¹	Measure	Denominator	Numerator	Your ACO Performance Rate	Points Earned/Total Possible Points ²	30 th Percentile Benchmark ³	90 th Percentile Benchmark
-	Domain: Care Coordination/Patient Safety	-	-	-	-	-	-
R	Risk Standardized, All Condition Readmissions ^{4,5} (ACO-8)	-	-	14.55	2.00/2	16.62	15.45
P	ASC Admissions: COPD or Asthma in Older Adults ^{4,6} (ACO-9)	0.06	0.06	1.04	1.40/2	1.75	0.27
P	ASC Admission: HF ^{4,6} (ACO-10)	0.16	0.14	0.92	1.40/2	1.33	0.38
P	Percent of PCPs who Qualified for EHR Incentive Payment ⁷ (ACO-11)	90	71	78.89%	3.40/4	51.53%	90.91%
P	Medication Reconciliation (ACO-12)	376	60	15.96%	0.00/2	30.00%	90.00%
P	Falls: Screening for Fall Risk (ACO-13)	467	269	57.60%	1.85/2	17.12%	73.38%
-	Points Earned in Domain:	-	-	-	10.05/14	-	-

P4P or P4R ¹	Measure	Denominator	Numerator	Your ACO Performance Rate	Points Earned/Total Possible Points ²	30 th Percentile Benchmark ³	90 th Percentile Benchmark
-	Domain: Preventive Health	-	-	-	-	-	-
P	Influenza Immunization (ACO-14)	391	278	71.10%	1.55/2	29.41%	100.00%
P	Pneumococcal Vaccination (ACO-15)	426	336	78.87%	1.55/2	23.78%	100.00%
P	Adult Weight Screening and Follow-up (ACO-16)	421	287	68.17%	1.55/2	40.79%	100.00%
P	Tobacco Use Assessment and Cessation Intervention (ACO-17)	439	406	92.48%	2.00/2	30.00%	90.00%
P	Depression Screening (ACO-18)	388	268	69.07%	2.00/2	5.31%	51.81%
R	Colorectal Cancer Screening (ACO-19)	441	278	63.04%	2.00/2	19.81%	100.00%
R	Mammography Screening (ACO-20)	450	321	71.33%	2.00/2	28.59%	99.56%
R	Proportion of Adults who had blood pressure screened in past 2 years (ACO-21)	362	121	33.43%	2.00/2	30.00%	90.00%
-	Points Earned in Domain:	-	-	-	14.65/16	-	-
-	Domain: At Risk Population	-	-	-	-	-	-
-	Subdomain: Diabetes	-	-	-	-	-	-
R	Beneficiaries with diabetes who met of all the following criteria:	425	124	29.18%	2.00/2	17.39%	36.50%
-	Hemoglobin A1c Control (HbA1c) (<8 percent) (ACO-22)*	425	293	68.94%	-	Not Applicable	Not Applicable
-	Low Density Lipoprotein (LDL) (< 100 mg/dL) (ACO-23)*	425	254	59.76%	-	Not Applicable	Not Applicable
-	Blood Pressure (BP) < 140/90 (ACO-24)*	425	312	73.41%	-	Not Applicable	Not Applicable
-	Tobacco Non-Use (ACO-25)*	425	352	82.82%	-	Not Applicable	Not Applicable
-	Aspirin Use (ACO-26)*	144	139	96.53%	-	Not Applicable	Not Applicable
P	Percent of beneficiaries with diabetes whose HbA1c in poor control (>9 percent)⁴ (ACO-27)	425	87	20.47%	1.70/2	70.00%	10.00%

P4P or P4R ¹	Measure	Denominator	Numerator	Your ACO Performance Rate	Points Earned/Total Possible Points ²	30 th Percentile Benchmark ³	90 th Percentile Benchmark
-	Subdomain: Hypertension	-	-	-	-	-	-
P	Percent of beneficiaries with hypertension whose BP < 140/90 (ACO-28)	417	309	74.10%	1.85/2	60.00%	79.65%
-	Subdomain: Ischemic Vascular Disease (IVD)	-	-	-	-	-	-
R	Percent of beneficiaries with IVD with complete lipid profile and LDL control < 100mg/dl (ACO-29)	416	255	61.30%	2.00/2	35.00%	78.81%
P	Percent of beneficiaries who use Aspirin or other antithrombotic (ACO-30)	416	360	86.54%	1.70/2	45.44%	97.91%
-	Subdomain: Heart Failure	-	-	-	-	-	-
R	Beta-Blocker Therapy for LVSD (ACO-31)	141	116	82.27%	2.00/2	30.00%	90.00%
-	Subdomain: Coronary Artery Disease (CAD)	-	-	-	-	-	-
R	Percent of beneficiaries with CAD who met all of the following criteria:	433	312	72.06%	2.00/2	54.08%	79.84%
-	Drug Therapy for Lowering LDL-Cholesterol (ACO-32)*	426	330	77.46%	--	Not Applicable	Not Applicable
-	ACE Inhibitor or ARB Therapy for Patients with CAD and Diabetes and/or LVSD (ACO-33)*	204	173	84.80%	--	Not Applicable	Not Applicable
-	Points Earned in Domain:	-	-	-	13.25/14	-	-

NOTES:

¹ P = Pay for Performance, R = Pay for Reporting;

² Points are calculated based on the ACO's performance compared to the quality measure benchmarks displayed in the Appendix

³ For a complete list of benchmarks for each measure, please see the [MSSP Quality Measure Benchmarks for the 2014 Reporting Year document](#)

⁴ For ACO-8, ACO-9, ACO-10, and ACO-27, a lower performance rate indicates better performance.

⁵ The measure reports a single summary Risk Standardized Readmission Rate, derived from the volume-weighted results of five different models, one for each of the following specialty cohorts (groups of discharge condition categories or procedure categories): surgery/gynecology, general medicine, cardiorespiratory, cardiovascular, and neurology.

⁶ ACO-9 and ACO-10 are expressed as a ratio of "observed" over expected rate. Hence, a ratio >1.00 indicates the ACO has higher than expected admission rate, thus poorer quality

⁷ ACO-11, Percent of PCPs who Successfully Qualify for an EHR Incentive Program Payment, is double-weighted for scoring purposes.

* Measure is scored as part of either the Diabetes composite or the Coronary Artery Disease composite measure

Appendix: Summary Statistics

Measure	Description	Mean	Median
ACO-1	Getting Timely Care, Appointments, and Information	80.13	80.56
ACO-2	How Well Your Doctors Communicate	92.39	92.67
ACO-3	Patients' Rating of Doctor	91.58	91.89
ACO-4	Access to Specialists	83.97	84.08
ACO-5	Health Promotion and Education	58.29	58.21
ACO-6	Shared Decision Making	74.60	74.65
ACO-7	Health Status/Functional Status	71.10	71.31
ACO-8	Risk Standardized, All Condition Readmissions	15.15	15.11
ACO-9	ASC Admissions: COPD or Asthma in Older Adults	1.08	1.03
ACO-10	ASC Admission: Heart Failure	1.19	1.18
ACO-11	Percent of PCPs who Qualified for EHR Incentive Payment	76.71	80.46
ACO-12	Medication Reconciliation	82.61	91.62
ACO-13	Falls: Screening for Fall Risk	45.60	44.63
ACO-14	Influenza Immunization	57.51	58.16
ACO-15	Pneumococcal Vaccination	55.03	56.79
ACO-16	Adult Weight Screening and Follow-up	66.75	67.86
ACO-17	Tobacco Use Assessment and Cessation Intervention	86.79	91.24
ACO-18	Depression Screening	39.27	36.66
ACO-19	Colorectal Cancer Screening	56.14	57.72
ACO-20	Mammography Screening	61.41	62.98
ACO-21	Proportion of Adults who had blood pressure screened in past 2 years	60.24	58.97
Diabetes Composite through ACO-26	ACO-22. Hemoglobin A1c Control (HbA1c) (<8 percent) ACO-23. Low Density Lipoprotein (LDL) (<100 mg/dL) ACO-24. Blood Pressure (BP) < 140/90 ACO-25. Tobacco Non Use ACO-26. Aspirin Use	25.41	26.30
ACO-27	Percent of beneficiaries with diabetes whose HbA1c in poor control (>9 percent)	20.35	17.83
ACO-28	Percent of beneficiaries with hypertension whose BP < 140/90	68.02	69.39
ACO-29	Percent of beneficiaries with IVD with complete lipid profile and LDL control < 100mg/dl	57.29	58.78
ACO-30	Percent of beneficiaries with IVD who use Aspirin or other antithrombotic	80.79	85.49
ACO-31	Beta-Blocker Therapy for LVSD	82.71	87.72
CAD Composite through ACO-33	ACO-32. Drug Therapy for Lowering LDL Cholesterol ACO-33. ACE Inhibitor or ARB Therapy for Patients with CAD and Diabetes and/or LVSD	66.90	69.36

NOTES: Statistics include ACOs participating in the Shared Savings Program in 2014. The total number of SSP ACOs ranges from 322 to 333, depending on the measure.