

Accountable Care Organization (ACO) 2014 Quality Performance Report

Prepared For:
(A2163) Rochester General Health System 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 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. 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.
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.

About this Report, continued

What's Next?

- If your ACO meets the quality performance standard of complete and accurate reporting for the 2014 reporting period, your ACO will be eligible to share in savings.
- 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	Complete Reporting by Domain
Patient/Caregiver Experience	14.00/14 points	100.00%	Completely reported on 100% of measures
Care Coordination/ Patient Safety	14.00/14 points	100.00%	Completely reported on 100% of measures
Preventive Health	16.00/16 points	100.00%	Completely reported on 100% of measures
At Risk Population	14.00/14 points	100.00%	Completely reported on 100% of measures

ACO Quality Score: 100.00%

ACO completely reported on 100% of measures.

In your first year in the Shared Savings Program, ACOs are awarded an overall quality score of 100% if they completely report. The quality score of 100% reflects complete reporting.

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	279 Surveys Completed	-	-	-
R	Getting Timely Care, Appointments, and Information (ACO-1)	80.87	2.00/2	30.00	90.00
R	How Well Your Doctors Communicate (ACO-2)	91.41	2.00/2	30.00	90.00
R	Patients' Rating of Doctor (ACO-3)	91.57	2.00/2	30.00	90.00
R	Access to Specialists (ACO-4)	83.90	2.00/2	30.00	90.00
R	Health Promotion and Education (ACO-5)	57.99	2.00/2	54.71	60.71
R	Shared Decision Making (ACO-6)	72.02	2.00/2	72.87	76.71
R	Health Status/Functional Status (ACO-7)	72.55	2.00/2	Not Applicable	Not Applicable
-	Points Earned in Domain:	-	14.00/14	-	-

NOTES: ¹ P = Pay for Performance, R = Pay for Reporting; ² Full points are awarded if the ACO completely reports; 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)	-	-	15.20	2.00/2	16.62	15.45
R	ASC Admissions: COPD or Asthma in Older Adults ^{4,6} (ACO-9)	0.06	0.06	0.97	2.00/2	1.75	0.27
R	ASC Admission: HF ^{4,6} (ACO-10)	0.16	0.20	1.26	2.00/2	1.33	0.38
R	Percent of PCPs who Qualified for EHR Incentive Payment ⁷ (ACO-11)	128	101	78.91%	4.00/4	51.53%	90.91%
R	Medication Reconciliation (ACO-12)	507	435	85.80%	2.00/2	30.00%	90.00%
R	Falls: Screening for Fall Risk (ACO-13)	576	248	43.06%	2.00/2	17.12%	73.38%
-	Points Earned in Domain:	-	-	-	14.00/14	-	-

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	-	-	-	-	-	-
R	Influenza Immunization (ACO-14)	559	342	61.18%	2.00/2	29.41%	100.00%
R	Pneumococcal Vaccination (ACO-15)	601	367	61.06%	2.00/2	23.78%	100.00%
R	Adult Weight Screening and Follow-up (ACO-16)	594	254	42.76%	2.00/2	40.79%	100.00%
R	Tobacco Use Assessment and Cessation Intervention (ACO-17)	543	466	85.82%	2.00/2	30.00%	90.00%
R	Depression Screening (ACO-18)	511	148	28.96%	2.00/2	5.31%	51.81%
R	Colorectal Cancer Screening (ACO-19)	593	328	55.31%	2.00/2	19.81%	100.00%
R	Mammography Screening (ACO-20)	605	370	61.16%	2.00/2	28.59%	99.56%
R	Proportion of Adults who had blood pressure screened in past 2 years (ACO-21)	466	228	48.93%	2.00/2	30.00%	90.00%
-	Points Earned in Domain:	-	-	-	16.00/16	-	-
-	Domain: At Risk Population	-	-	-	-	-	-
-	Subdomain: Diabetes	-	-	-	-	-	-
R	Beneficiaries with diabetes who met of all the following criteria:	576	159	27.60%	2.00/2	17.39%	36.50%
-	Hemoglobin A1c Control (HbA1c) (<8 percent) (ACO-22)*	576	385	66.84%	-	Not Applicable	Not Applicable
-	Low Density Lipoprotein (LDL) (< 100 mg/dL) (ACO-23)*	576	348	60.42%	-	Not Applicable	Not Applicable
-	Blood Pressure (BP) < 140/90 (ACO-24)*	576	396	68.75%	-	Not Applicable	Not Applicable
-	Tobacco Non-Use (ACO-25)*	576	462	80.21%	-	Not Applicable	Not Applicable
-	Aspirin Use (ACO-26)*	148	127	85.81%	-	Not Applicable	Not Applicable
R	Percent of beneficiaries with diabetes whose HbA1c in poor control (>9 percent)⁴ (ACO-27)	587	123	20.95%	2.00/2	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	-	-	-	-	-	-
R	Percent of beneficiaries with hypertension whose BP < 140/90 (ACO-28)	555	376	67.75%	2.00/2	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)	509	307	60.31%	2.00/2	35.00%	78.81%
R	Percent of beneficiaries who use Aspirin or other antithrombotic (ACO-30)	509	441	86.64%	2.00/2	45.44%	97.91%
-	Subdomain: Heart Failure	-	-	-	-	-	-
R	Beta-Blocker Therapy for LVSD (ACO-31)	67	63	94.03%	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:	559	345	61.72%	2.00/2	54.08%	79.84%
-	Drug Therapy for Lowering LDL-Cholesterol (ACO-32)*	548	374	68.25%	--	Not Applicable	Not Applicable
-	ACE Inhibitor or ARB Therapy for Patients with CAD and Diabetes and/or LVSD (ACO-33)*	235	173	73.62%	--	Not Applicable	Not Applicable
-	Points Earned in Domain:	-	-	-	14.00/14	-	-

NOTES:

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

² Full points are awarded if the ACO completely reports

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	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-32 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.