I. Background

This second version of OneCare’s benchmarking report adds an additional year of data (2022), now spanning 2019-2022, and includes enhancements reflecting input from OneCare, the GMCB, and the benchmarking vendor. Overall, the report continues to demonstrate that Vermont providers generate excellent cost and other outcomes relative to both the National Peer ACO Comparison Cohort Average (20 ACOs deemed similar to OneCare) and the National All ACO Cohort (475 ACOs). There are also areas of opportunity identified and, when aligned with OneCare’s priorities, action plans are in place to address them.

II. Enhancements

- **Attribution Improvement**: Improved beneficiary assignment methodology to better mimic the attribution and assignment process that CMS uses in their ACO models. This includes an update to ESRD identification. *Note: these improvements will impact results from timeframes previously reported (2019-2021)*
- **Refreshed Data**: 2021 data source updated from CMS quarterly files with 3 months of claims runout to CMS annual files with full 12 months of claims runout. *Note: this improved data completeness will impact results for 2021.*
- **Greater Insights**: Enhanced percentile analyses, including National All ACO Cohort deciles and an imputed percentile for OneCare to allow for greater granularity of information.
- **Structural Adjustments: GMCB-Requested Edits from 8/10/23**: Within the time allotted to provide an updated report, OneCare’s vendor was able to make the following changes to the report as requested by GMCB in its August 10, 2023 communication:
  - Add standard background/methodology language and an Executive Summary. *See ReadMe tab.*
  - Describe the comparison cohort and exclusion criteria and limitations, caveats, and interpretation notes. *See ReadMe tab.*
  - Description of Appendix A contents: reflects OneCare’s comprehensive list of Medicare providers for each reported year. *See OCV Provider Lists section of ReadMe tab.*
Provide HSA or Provider level results: OneCare prefers to keep this benchmarking analysis at a global OneCare perspective rather than reporting HSA or provider detail to inform OneCare strategy at a high level based on Medicare results. HSA level analyses will occur for all payers within OneCare’s new data analytics platform.

Enhance data trending capabilities: See Trend Report tab.
- OneCare trend and National All ACO Cohort 90th Percentile trends for each successive year versus prior year and for 2022 results compared with 2019 results.
- Functionality to select a measure and view a graph of yearly trend line for OneCare and the National All ACO Cohort 90th Percentile.

Add OneCare Focus Areas to all report years: given the tight timeframe, OneCare was able to include the 2022 report tab and will request this for additional years for the next report.

III. Trend Analysis

OneCare has highlighted selected areas of strength and opportunity below, drawing attention to the results described in detail in the accompanying reports.

Favorable Outcomes

**Total Cost of Care**: OneCare maintains TCOC as a key metric of success within its value-based care contracts.
- **Peer Cohort**: Lower than the National Peer ACO Cohort for all measured years (2019-2022).
- **National Cohort**: Lower than the National All ACO Cohort 90th percentile for all measured years (2019 to 2022).
- **Four Year Trend Graph: Total Cost of Care PBPM**: As demonstrated in the trend tab, OneCare remains a national leader in risk-adjusted total cost of care, but its lead on others is narrowing since 2019. This trend analysis aligns with other publicly available Medicare analyses showing the low cost of care in Vermont.¹

¹ Evaluation of the Vermont All-Payer Accountable Care Organization Model, Third Evaluation Report (cms.gov)
**Inpatient Facility:** inpatient facility spend is included in cost of care accountability for OneCare. This report shows low inpatient facility spend across all measured years.

- **Medical TCOC PBPY:** 6.8% lower than the National Peer ACO Cohort Average in 2022 and imputed 76th percentile performance within the National All ACO cohort in 2022.
- **Medical Inpatient Facility – Four Year Trend Total Inpatient Cost of Care PBPM:** OneCare performance aligns with the National Peer ACO 90th percentile in 2019 and 2020, but appears to be rising in comparison in recent years.

**Surgical:** 12.0% lower than the National Peer ACO Cohort Average in 2022 and imputed better than 90th percentile performance within the National All ACO cohort in 2022.

- **Four Year Trend: Inpatient Facility – Surgical – Total Inpatient Cost of Care PBPM:** OneCare’s performance exceeds the National Peer ACO 90th percentile in 2019 and 2020, but appears to be converging in recent years.

**Outpatient Surgery:** outpatient facility spend is included in cost of care accountability for OneCare. This report shows low outpatient surgery spend across all measured years.

- **Facility component of Outpatient Surgery:** 20.1% lower than the National Peer ACO Cohort Average in 2022 and imputed 82nd percentile performance within the National All ACO cohort in 2022.
- **Four Year Trend - Outpatient Facility – Surgery – Outpatient Surgery Cost of Care PBPM:** OneCare performance aligns with the National Peer ACO 90th percentile in 2019 and 2020, but appears to be rising in comparison in recent years.
- **Professional** component of Outpatient Surgery cost is **66.8% lower** than the National Peer ACO Cohort Average in 2022 and imputed **above 90th percentile** performance within the National All ACO cohort in 2022.

- **Four Year Trend: Professional – Outpatient Surgery – Outpatient Surgery cost PBPM:** Professional component of outpatient surgery cost PBPM, OneCare is vastly outperforming the National Peer All ACO 90th percentile for all reported years.

**Inpatient Facility Rehabilitation:** inpatient rehabilitation spend is included in cost of care accountability for OneCare. This report shows Low inpatient facility rehabilitation spend across all measured years.

- **75.8% lower** than the National Peer ACO Cohort average in 2022.
- Imputed **above 90th percentile** performance within the National All ACO Cohort in 2022.

- **Four Year Trend Graph: Post Acute Care- Inpatient Facility – Rehabilitation Cost of Care PBPM:** OneCare trend is quite favorable as compared to National All ACO Cohort 90th percentile across all years, its lead increasing with each successive reporting period.
**Preference Sensitive or Outpatient Sensitive Admissions**: hospital admissions involving significant patient tradeoffs which may affect patients’ quality of life. This report shows low preference sensitive or outpatient sensitive preventable admissions across all measured years.

- 45.5% lower than the National Peer ACO Comparison Cohort Average in 2022.
- Imputed 86th percentile performance within the National All ACO Cohort in 2022
- 14 of 15 measures of individual Preference Sensitive or Outpatient Sensitive Preventable Admissions per 1000 consistently demonstrated higher than average performance against both the National Peer ACO Comparison Cohort and National All ACO Cohort

**Inpatient Discharge to Home Health**: inpatient discharge to home health services allows patients to convalesce in their home with the right support, as appropriate, so higher is presumably better for this metric. This report shows a high percentage of inpatient admissions discharged to Home Health across all measured years.

- 12.5% higher than the National Peer ACO Comparison Cohort Average in 2022
- 0.9% higher than the National All ACO Cohort 80th percentile (shows up as the 20th percentile on the report due to the inverse nature of the measure) in 2022
- This measure excluded from trend report as the vendor advised against the use of trending for percentages.

**Opportunities for Improvement: OneCare Priority Areas**

**Emergency Department (ED) Utilization and PBPM**: ED utilization is a priority area for OneCare and is included in both the 2023 and 2024 Population Health Model (PHM). OneCare is actively pursuing improvement in these measures. The report indicates high emergency department utilization and cost across all measured years.

- ED Visits/1000:
  - 37.9% higher than the National Peer ACO Comparison Cohort Average in 2022
  - Imputed higher than 10th percentile performance within the National All ACO Cohort in 2022
- **Four Year Trend: Emergency Department – ED Visits/1000**

  ![Graph showing ED visits trend](image)

  - **ED Cost of Care PBPM**
    - **36.3% higher** than the National Peer ACO Cohort Average in 2022
    - Imputed higher than 10th percentile performance within the National All ACO Cohort in 2022.

- **Four Year Trend: Emergency Department – ED Cost of Care PBPM**

  ![Graph showing ED cost trend](image)

  - **Interpretation**: ED visit rates and costs are much higher than National All ACO Cohort 90th percentile for all reported years as shown above.
  - **OneCare Actions**: Even before receiving benchmarking data, OneCare had identified avoidable ED use as a significant area of concern and lever to improve quality and cost outcomes. OneCare designed the PHM program to address these concerns through reduced potentially avoidable ED visits in 2023 and through follow-up after ED visit for those with multiple chronic conditions in 2024. Through the PHM, OneCare is providing reporting and analysis, incentives, and support to address this area of opportunity.

**Primary Care Utilization and Rate of Annual Wellness Visits**: these are both priority focus areas within both the 2023 and 2024 PHM. OneCare is actively pursuing improvement in these areas. Low primary care utilization and rate of annual wellness visits across all measured years

  - **Percent of members with a primary care visit**:
    - **16.5% lower** than the National Peer ACO Cohort Average in 2022
- Imputed lower than 10\textsuperscript{th} percentile performance within the National All ACO Cohort in 2022 (shows up as the 90\textsuperscript{th} percentile on the report due to the inverse nature of the measure)
- OneCare performed at or near the lowest 10\textsuperscript{th} percentile for all reported years (shows up as the 90\textsuperscript{th} percentile on the report due to the inverse nature of the measure)
- This measure is excluded from the trend report as the vendor advised against the use of trending for percentages.

\begin{itemize}
  \item Primary Care Visits/1000:
    \begin{itemize}
    \item 26.1\% lower than the National Peer ACO Comparison Cohort Average in 2021
    \item Imputed lower than 10\textsuperscript{th} percentile performance within the National All ACO Cohort in 2022 (shows up as the 90\textsuperscript{th} percentile on the report due to the inverse nature of the measure)
    \item OneCare’s imputed percentile within the National All ACO Cohort ranged from 82\textsuperscript{nd} to above the 90\textsuperscript{th} for reported years (shows up as higher percentile on the report due to the inverse nature of the measure)
    \item Four Year Trend: Professional Office Visits – Primary Care Visits/1000
    \end{itemize}
\end{itemize}

\begin{itemize}
  \item Percent of members with an annual wellness visit (AWV):
    \begin{itemize}
    \item 14.4\% lower than the National Peer ACO Comparison Cohort Average in 2022 (note a pattern of decreasing utilization of AWV from pre-pandemic (3.1\% lower in 2019) to during pandemic (2020-2022))
    \item Imputed 87\textsuperscript{th} percentile performance within the National All ACO Cohort in 2022 (shows up as higher percentile on the report due to the inverse nature of the measure)
    \item OneCare’s imputed percentile within the National All ACO Cohort ranged from 71\textsuperscript{st} to 87\textsuperscript{th} for reported years (shows up as higher percentile on the report due to the inverse nature of the measure)
    \item This measure is excluded from trend report as the vendor advised against the use of trending for percentages.
    \end{itemize}
\end{itemize}
o **Interpretation:** opportunity exists to improve patient utilization of primary care, as evidenced by primary care visits PKPY and percentage of members with a wellness visit.

o **OneCare Actions:** OneCare designed the PHM program to address low wellness visit rates and primary care utilization by incentivizing wellness visits in 2023 and 2024. Through the PHM, OneCare is providing reporting and analysis, incentives, and support to address this area of opportunity.

**IV. Conclusion and Next Steps**

OneCare’s most recent benchmarking report indicates both positive results and identifies areas of opportunity. The many strengths discussed within reflect high quality and low cost of care for OneCare’s ACO attributed lives. Note that the findings from 2022 highlight opportunities that are consistent with those identified in OneCare’s prior benchmarking report submission and that these opportunity areas are included as priorities for OneCare as outlined in its PHM for both 2023 and 2024.

OneCare’s work of 2023 and planned work for 2024 include various means to improve the results identified within this benchmarking report. OneCare’s integrated PHM approach continues to encourage improvement in quality and patient outcomes by offering technical assistance, data and reporting, and financial incentives for meeting or exceeding the performance targets for PHM measures. These activities are further described in OneCare’s 2024 budget submission.