

Vermont Medicare ACO Initiative

Quality Measures Results
Performance Year: 2023

Measure	Status	Benchmarks							Rate	Num	Den	Bonus Points	Quality Points
		30th	40th	50th	60th	70th	80th	90th					
Patient/Caregiver Experience													
CAHPS: Getting Timely Care, Appointments, and Information	P	81.42	82.75	83.96	84.84	85.70	86.44	87.47	83.30	271	N/A	N/A	0.75
CAHPS: How Well Your Providers Communicate	P	92.28	92.84	93.26	93.62	93.98	94.38	94.88	94.54	290	N/A	N/A	1.75
CAHPS: Patients' Rating of Provider	P	90.82	91.46	91.80	92.24	92.62	93.01	93.43	93.38	282	N/A	N/A	1.75
CAHPS: Access to Specialists	P	75.49	76.79	77.79	78.86	79.87	80.73	81.81	72.91	188	N/A	N/A	0.00
CAHPS: Health Promotion and Education	P	57.56	59.19	60.64	61.81	62.79	63.96	65.18	65.07	311	N/A	N/A	1.75
CAHPS: Shared Decision Making	P	57.30	58.88	59.87	60.88	62.00	63.05	64.10	61.15	281	N/A	N/A	1.25
CAHPS: Health Status/Functional Status	R	-	-	-	-	-	-	-	79.97	314	N/A	N/A	2.00
CAHPS: Stewardship of Patient Resources	P	20.19	21.76	23.14	24.43	25.48	26.69	28.27	20.04	296	N/A	N/A	0.00
CAHPS: Courteous and Helpful Office Staff	P	90.23	91.09	91.59	92.20	92.70	93.15	93.81	92.44	284	N/A	N/A	1.25
CAHPS: Care Coordination	P	83.65	84.43	85.17	85.80	86.42	87.02	87.62	84.98	315	N/A	N/A	0.75
Care Coordination/Patient Safety													
Hospital Wide, 30-Day, All-Cause Unplanned Readmission	R	-	-	-	-	-	-	-	11.13	N/A	N/A	N/A	2.00
Risk Standardized All-Cause Unplanned Admissions for Patients with MCC	R	-	-	-	-	-	-	-	29.20	N/A	N/A	N/A	2.00
Preventive Health													
Influenza Immunization	P	30.00	40.00	50.00	60.00	70.00	80.00	90.00	81.01	354	437	N/A	1.75
Tobacco Use: Screening and Cessation Intervention	P	30.00	40.00	50.00	60.00	70.00	80.00	90.00	81.25	26	32	N/A	1.75
Screening for Clinical Depression and Follow-Up Plan	P	30.00	40.00	50.00	60.00	70.00	80.00	90.00	71.03	179	252	N/A	1.50
Colorectal Cancer Screening	P	30.00	40.00	50.00	60.00	70.00	80.00	90.00	72.87	231	317	N/A	1.50
At-Risk Population													
Diabetes Mellitus: Hemoglobin A1c Poor Control (>9%)	P	70.00	60.00	50.00	40.00	30.00	20.00	10.00	8.12	29	357	N/A	2.00
Hypertension: Controlling High Blood Pressure	P	30.00	40.00	50.00	60.00	70.00	80.00	90.00	71.02	321	452	N/A	1.50
30 Day Follow-Up after Discharge from the ED for AOD Dependence	R	-	-	-	-	-	-	-	73.64	81	110	N/A	2.00
30 Day Follow-Up after Discharge from the ED for Mental Health	R	-	-	-	-	-	-	-	51.53	84	163	N/A	N/A
Initiation of AOD Treatment	R	-	-	-	-	-	-	-	32.56	309	949	N/A	2.00
Engagement of AOD Treatment	R	-	-	-	-	-	-	-	3.69	35	949	N/A	N/A

Footnotes:

1. P - Payment Measure, R - Reporting Measure, N/A - Not Applicable
2. Diabetes Mellitus: Hemoglobin A1c Poor Control (>9%), Risk Standardized All Condition Readmission, and All-Cause Unplanned Admissions for Patients with MCC are inverse measures, lower rate indicates better performance.
3. The full name of the "Risk-Standardized Hospital Admit Rates for Patients with MCC" measure is "Clinician and Clinician Group Risk-Standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions."

Points Earned: 29.25

Total Possible Points: 40.00

Final Score: 73.13%

Information

1. All ACOs are required to completely and accurately report quality data used to assess their quality performance.
2. Quality points were awarded to payment measures (indicated by "P") on a scale of 0 to 2
 - ≥90th Percentile: 2.00 quality points
 - ≥80th - 89th Percentile: 1.75 quality points
 - ≥70th - 79th Percentile: 1.50 quality points
 - ≥60th - 69th Percentile: 1.25 quality points
 - ≥50th - 59th Percentile: 1.00 quality points
 - ≥40th - 49th Percentile: 0.75 quality points
 - ≥30th - 39th Percentile: 0.50 quality points
 - <30th Percentile: 0.00 quality points
3. 2.00 quality points were awarded to reporting measures (indicated by "R").
4. Performance rates for CAHPS measures do not represent a percentage, but rather the ACO's mean (average).
5. Benchmark source(s): CMS