

2023 Nebraska Medicare Shared Savings Program ACO Quality & Financial Performance Summary

Bob Rauner, MD, MPH, Ted Fraser, MS - November 2024

Background:

Medicare has publicly released the 2023 results for all Medicare Shared Savings Program (MSSP) Accountable Care Organizations (ACOs). Full public data is available here – <https://data.cms.gov/medicare-shared-savings-program/performance-year-financial-and-quality-results> On the 2nd page of this report is a brief summary of results with more detail on pages 3 and 4. There are seven Nebraska-based MSSP ACOs caring for 109,544 Nebraska Medicare Fee for Service patients, plus many individual Nebraska clinics that are part of nine other national or regional MSSP ACOs. The seven Nebraska-based ACOs are:

1. Bryan Health Connect ACO, a regional hospital system ACO headquartered in Lincoln - <https://www.bryanhealth.com/bryan-health-connect/aco/>
2. CHI Health Partners ACO, a regional hospital system ACO headquartered in Omaha - <https://www.chihealthpartners.org/about/alegent-health-partners>
3. Midwest Health Coalition ACO, a regional independent practice association-based ACO headquartered in Omaha - <https://midwestippa.com/ACO>
4. Nebraska Health Network, a regional hospital system ACO headquartered in Omaha - <https://nebraskahealthnetwork.com/public-reporting/>
5. NPG Health Collaborative, a rural hospital ACO headquartered in Lincoln - <https://www.phvne.com/wp-content/uploads/2023/02/NPG-Health-Collaborative-Public-Reporting-1-2.pdf>
6. OneHealth Nebraska ACO, a regional independent practice association-based ACO headquartered in Lincoln - <https://onehealthne.com/aco/>
7. Think ACO, an Omaha-based ACO - <https://think-aco.org/>

Summary:

Six of the seven Nebraska-based ACOs reported quality measures for 2023. All showed savings compared to their benchmarks according to CMS (Medicare), total savings for all seven was ~\$55.7 million, and five received shared savings bonuses from CMS. From a quality perspective, the six reporting Nebraska ACOs performed well with performance on most quality measures higher than national averages.

Context for the ALIGN Group and Statewide Quality Initiatives (<https://healthynebraska.org/what-we-do/align-nebraska-project.html>):

The past joint voluntary Nebraska Patient-Centered Medical Home (PCMH) agreements have used Medicare Shared Savings Program (MSSP) quality measure specifications for the list of adult measures. Blue Cross Blue Shield's ACO contracts, Centers for Medicare & Medicaid Innovation's Primary Care First Programs, and UDS HRSA measures used by Federally Qualified Health Centers (FQHC) draw from these measures as well. These provide a common method of comparison for Nebraska PCMH, ACO, and other value-based contracts. There are seven MSSP ACOs based in Nebraska plus regional and national ACOs that include Nebraska clinics, so these measures are in use by the majority of Nebraska primary care clinicians.



| PY2023 Nebraska Medicare Shared Savings Program ACO Quality & Financial Performance Summary | Bryan Health Connect ACO | CHI Health Partners | Midwest Health Coalition ACO | Nebraska Health Network | NPG Health Collaborative | OneHealth Nebraska ACO | Think ACO |
|------------------------------------------------------------------------------------------------|-----------------------------|------------------------|------------------------------------|-------------------------------|-----------------------------|---------------------------|-----------|
| Assigned Beneficiaries | 18,757 | 20,618 | 6,649 | 34,730 | 13,458 | 8,933 | 6,399 |
| COST and UTILIZATION | | | | | | | |
| Savings Rate | 6.49% | 6.08% | 0.23% | 1.76% | 0.55% | 8.87% | 11.31% |
| Quality Score | 84.8% | 90.6% | 93.1% | 89.7% | 87.3% | 91.6% | 93.9% |
| Per Capita Expenditures | 12,204 | 11,112 | 10,815 | 11,990 | 13,990 | 10,096 | 10,591 |
| Per Capita Savings (generated saving/total person years) | \$847 | \$719 | \$25 | \$214 | \$77 | \$983 | \$1,350 |
| *Inpatient Discharges per 1K Person Years | 215 | 241 | 217 | 256 | 229 | 181 | 200 |
| *ED Visits per 1K Person Years | 507 | 567 | 497 | 582 | 561 | 389 | 443 |
| Primary Care Services per 1K Person Years | 9,134 | 8,463 | 10,563 | 9,795 | 9,702 | 9,925 | 10,915 |
| CONSUMER SATISFACTION - CAHPS | | | | | | | |
| Getting Timely Care, Appointments, and Information | 85.2 | 87.6 | 88.0 | 84.7 | 82.6 | 89.5 | 89.1 |
| How Well Your Providers Communicate | 94.9 | 95.1 | 94.0 | 95.1 | 90.4 | 95.6 | 94.3 |
| Patients' Rating of Provider | 92.3 | 92.4 | 93.0 | 93.2 | 91.4 | 94.5 | 93.4 |
| Access to Specialists | 77.9 | 77.7 | 78.3 | 79.5 | 82.8 | 80.8 | 80.7 |
| Health Promotion and Education | 62.9 | 64.6 | 63.5 | 65.6 | 55.0 | 64.5 | 72.9 |
| Shared Decision Making | 64.1 | 62.2 | 64.7 | 61.8 | 56.6 | 68.9 | 70.2 |
| Health Status/Functional Status | 74.7 | 77.5 | 74.1 | 75.0 | 74.6 | 77.3 | 76.9 |
| Stewardship of Patient Resources | 29.8 | 27.3 | 30.4 | 34.9 | 33.3 | 33.7 | 30.9 |
| Courteous and Helpful Office Staff | 92.0 | 94.3 | 93.2 | 94.9 | 91.5 | 95.1 | 93.7 |
| Care Coordination | 86.2 | 88.7 | 87.7 | 88.1 | 82.7 | 88.7 | 88.8 |
| CLINICAL QUALITY | | | | | | | |
| *Hospital-Wide 30-day Readmission Rate | 0.151 | 0.155 | 0.136 | 0.157 | 0.138 | 0.156 | 0.157 |
| Falls: Screening for Future Fall Risk | 94.1 | 97.2 | | 96.9 | 74.5 | 95.9 | 96.5 |
| Influenza Immunization | 76.5 | 80.4 | | 82.8 | 81.1 | 80.0 | 90.8 |
| Screening for Depression and Follow-Up Plan | 93.0 | 88.1 | | 92.3 | 76.9 | 94.0 | 96.6 |
| Colorectal Cancer Screening | 84.7 | 82.2 | | 87.4 | 80.5 | 85.2 | 91.5 |
| Breast Cancer Screening | 87.1 | 82.9 | | 89.9 | 82.1 | 88.6 | 93.3 |
| Statins for Prevention & Treatment of Cardiovascular Disease | 83.3 | 90.4 | | 91.9 | 89.8 | 80.3 | 89.2 |
| Depression Remission at 12 Months | 9.6 | 7.1 | | 5.3 | 36.1 | 18.8 | 7.1 |
| *Diabetes: Hemoglobin A1c Poor Control (>9%) | 6.6 | 2.8 | | 5.2 | 8.6 | 3.9 | 2.1 |
| Controlling High Blood Pressure | 81.7 | 87.0 | | 73.6 | 81.8 | 84.0 | 91.7 |

*Inverse Measures - lower scores are better

Green highlighted fields - where ACO's performance was better than national averages.

(Light green better than average, medium green >75th percentile, dark green >90th percentile)

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| PY2023 Nebraska Medicare Shared Savings Program ACO Performance Summary | Bryan Health Connect ACO | CHI Health Partners | Midwest Health Coalition ACO | Nebraska Health Network | NPG Health Collaborative | OneHealth Nebraska ACO | Think ACO | National Average |
|------------------------------------------------------------------------------------|-------------------------------------|--------------------------------|-----------------------------------------|----------------------------------------|-------------------------------------|-----------------------------------|------------------|-----------------------------|
| Start Date | 7/1/2019 | 7/1/2019 | 1/1/2020 | 1/1/2020 | 1/1/2020 | 1/1/2020 | 7/1/2019 | - |
| Current Level | Basic D | Enhanced | Basic B | Basic E | Basic B | Basic E | Enhanced | - |
| Assigned Beneficiaries | 18,757 | 20,618 | 6,649 | 34,730 | 13,458 | 8,933 | 6,399 | 22,112 |
| Risk Model | Two-Sided | Two-Sided | One-Sided | Two-Sided | One-Sided | Two-Sided | Two-Sided | - |
| Savings Rate | 6.49% | 6.08% | 0.23% | 1.76% | 0.55% | 8.87% | 11.31% | 4.17% |
| Minimum Savings Rate | 1.00% | 1.00% | 3.47% | 1.00% | 2.79% | 1.00% | 0.00% | 1.90% |
| Benchmark Minus Expenditures | \$15,525,699 | \$14,508,713 | \$164,920 | \$7,285,771 | \$1,010,940 | \$8,641,783 | \$8,520,074 | \$11,385,186 |
| Generated Savings/Losses | \$15,525,699 | \$14,508,713 | \$0 | \$7,285,771 | \$0 | \$8,641,783 | \$8,520,074 | \$11,031,385 |
| Earned Savings | \$7,607,593 | \$10,663,904 | \$0 | \$3,570,028 | \$0 | \$4,234,474 | \$6,262,254 | \$6,799,650 |
| Updated Benchmark | \$13,051 | \$11,831 | \$10,840 | \$12,204 | \$14,067 | \$11,078 | \$11,942 | \$12,922 |
| Historic Benchmark | \$11,305 | \$10,044 | \$9,621 | \$10,808 | \$12,305 | \$9,843 | \$9,911 | \$11,577 |
| Total Benchmark Expenditures | \$239,300,661 | \$238,653,007 | \$70,627,220 | \$415,012,985 | \$184,437,691 | \$97,410,211 | \$75,346,167 | \$282,273,940 |
| Total Expenditures | \$223,774,962 | \$224,144,293 | \$70,462,300 | \$407,727,214 | \$183,426,751 | \$88,768,428 | \$66,826,093 | \$270,888,754 |
| Maximum Sharing Rate | 50% | 75% | 40% | 50% | 40% | 50% | 75% | 55% |
| High/Low Revenue ACO | High Revenue | High Revenue | Low Revenue | Low Revenue | High Revenue | Low Revenue | Low Revenue | - |
| Per capita ESRD expenditures | \$78,278 | \$89,477 | \$73,267 | \$99,570 | \$77,795 | * | * | \$89,359 |
| Per capita disabled expenditures | \$11,727 | \$10,264 | \$10,667 | \$11,662 | \$13,404 | \$9,960 | \$11,057 | \$11,899 |
| Per capita aged/dual expenditures | \$24,552 | \$18,131 | \$18,895 | \$21,920 | \$21,860 | \$18,087 | \$15,693 | \$17,864 |
| Per capita aged/non-dual expenditures | \$11,668 | \$10,622 | \$10,497 | \$11,580 | \$13,468 | \$9,956 | \$10,369 | \$11,678 |
| Per capita Expenditures | \$12,204 | \$11,112 | \$10,815 | \$11,990 | \$13,990 | \$10,096 | \$10,591 | \$12,358 |
| Average ESRD HCC Risk Score | 0.853 | 0.967 | 0.941 | 1.046 | 0.846 | * | * | 0.976 |
| Average disabled HCC Risk Score | 0.949 | 0.942 | 0.907 | 1.137 | 0.919 | 0.874 | 1.062 | 0.983 |
| Average Aged/Dual HCC Risk Score | 1.078 | 1.088 | 1.06 | 1.174 | 0.99 | 1.148 | 1.076 | 0.980 |
| Average Aged/Non-Dual HCC Risk Score | 0.92 | 0.972 | 0.898 | 1.008 | 0.909 | 0.919 | 1.113 | 1.016 |
| Total assigned Beneficiaries, age 0-64 | 1,221 | 1,956 | 449 | 1,832 | 1,037 | 373 | 275 | 2,029 |
| Total assigned Beneficiaries, age 65-74 | 9,397 | 10,440 | 3,629 | 17,605 | 6,333 | 4,816 | 3,018 | 10,670 |
| Total assigned Beneficiaries, age 75-84 | 5,734 | 6,092 | 1,950 | 11,244 | 4,017 | 2,799 | 2,269 | 7,276 |
| Total assigned Beneficiaries, age 85+ | 2,405 | 2,130 | 621 | 4,049 | 2,071 | 945 | 837 | 2,620 |
| Total assigned Beneficiaries, non-Hispanic White | 18,030 | 18,780 | 6,195 | 32,165 | 13,049 | 8,477 | 5,946 | 19,724 |
| Total assigned Beneficiaries, Black | 51 | 703 | 96 | 872 | 13 | 47 | 131 | 1,321 |
| Total assigned Beneficiaries, Asian | 63 | 162 | * | 162 | * | 48 | * | 397 |
| Total assigned Beneficiaries, Hispanic | 64 | 118 | 46 | 105 | 58 | * | * | 367 |
| Total assigned Beneficiaries, North American Native | 22 | 27 | * | 42 | * | * | * | 69 |
| Total assigned Beneficiaries, other | 65 | 146 | * | 225 | 42 | 41 | 32 | 357 |
| Total assigned Beneficiaries, unknown | 462 | 682 | 230 | 1159 | 283 | 296 | 266 | 599 |

| PY2023 Nebraska Medicare Shared Savings Program ACO Performance Summary | Bryan Health Connect ACO | CHI Health Partners | Midwest Health Coalition ACO | Nebraska Health Network | NPG Health Collaborative | OneHealth Nebraska ACO | Think ACO | National Average |
|------------------------------------------------------------------------------------|-------------------------------------|--------------------------------|-----------------------------------------|----------------------------------------|-------------------------------------|-----------------------------------|------------------|-----------------------------|
| Inpatient Expenditures | \$2,874 | \$3,058 | \$2,572 | \$3,106 | \$3,311 | \$2,253 | \$2,494 | \$3,331 |
| Short term acute care hospital (IPPS/CAH) expenditures | \$2,672 | \$2,801 | \$2,366 | \$2,889 | \$3,162 | \$2,067 | \$2,240 | \$2,884 |
| Long term care hospital expenditures | \$47 | \$81 | \$58 | \$80 | \$47 | * | \$95 | \$83 |
| Inpatient rehabilitation facility (IRF) expenditures | \$139 | \$151 | \$143 | \$145 | \$87 | \$141 | \$159 | \$355 |
| Inpatient psychiatric hospital expenditures | \$21 | \$36 | * | \$15 | \$23 | \$5 | * | \$56 |
| Hospice Expenditures | \$301 | \$189 | \$155 | \$342 | \$317 | \$122 | \$95 | \$349 |
| SNF Expenditures | \$1,096 | \$738 | \$669 | \$816 | \$1,694 | \$500 | \$648 | \$774 |
| Outpatient Expenditures | \$4,053 | \$2,839 | \$2,507 | \$3,241 | \$5,850 | \$2,096 | \$2,353 | \$2,986 |
| Part B Expenditures | \$3,295 | \$3,667 | \$4,312 | \$3,783 | \$2,564 | \$4,306 | \$4,371 | \$4,206 |
| Ambulance Expenditures | \$100 | \$77 | \$84 | \$88 | \$154 | \$56 | \$62 | \$144 |
| Home Health Expenditures | \$289 | \$425 | \$385 | \$462 | \$229 | \$282 | \$449 | \$536 |
| Durable Medical Equipment expenditures | \$397 | \$332 | \$371 | \$391 | \$365 | \$377 | \$312 | \$355 |
| Inpatient Hospital Discharges | \$215 | \$241 | \$217 | \$256 | \$229 | \$181 | \$200 | \$259 |
| Short Term Hospital Discharges | \$205 | \$230 | \$207 | \$248 | \$222 | \$171 | \$192 | \$237 |
| Outpatient ED Visits | \$507 | \$567 | \$497 | \$582 | \$561 | \$389 | \$443 | \$623 |
| ED Visits that Lead to a Hospitalization | \$100 | \$177 | \$160 | \$183 | \$44 | \$131 | \$143 | \$186 |
| CTs per 1K Person Years | 635 | 769 | 736 | 728 | 648 | 681 | 678 | 736 |
| MRIs per 1K Person Years | 176 | 221 | 228 | 219 | 182 | 202 | 237 | 243 |
| Primary Care Services/Person Years | 9,134 | 8,463 | 10,563 | 9,795 | 9,702 | 9,925 | 10,915 | 11,827 |
| Primary Care Services by a PCP/Person Years | 1,978 | 3,193 | 5,334 | 3,640 | 150 | 4,615 | 4,908 | 3,834 |
| Primary Care Services by a Specialist/1K Person Years | 2,794 | 3,250 | 3,263 | 3,842 | 2,442 | 3,122 | 3,971 | 4,542 |
| Primary Care Services by a NP-PA-CNS/1K Person Years | 1,763 | 1,915 | 1,958 | 2,167 | 938 | 2,172 | 2,021 | 2,327 |
| Primary Care Services at a FQHC-RHC/1K Person Years | 2,599 | 105 | 8 | 145 | 6,172 | 15 | 15 | 1,134 |
| SNF Discharges per 1K Person Years | 55 | 46 | 45 | 56 | 66 | 35 | 44 | 48 |
| Skilled nursing facility length of stay | 26 | 26 | 28 | 28 | 26 | 25 | 27 | 27 |
| Skilled nursing facility payment per stay | \$19,669 | \$15,501 | \$14,469 | \$14,347 | \$25,174 | \$13,333 | \$14,279 | \$15,035 |
| Number of CAHs | 14 | 2 | 0 | 0 | 24 | 0 | 0 | 2 |
| Number of RHCs | 23 | 2 | 0 | 0 | 37 | 0 | 0 | 5 |
| Number of short-term acute care hospitals | 2 | 5 | 0 | 0 | 0 | 0 | 0 | 2 |
| Number of other facility types | 13 | 4 | 0 | 0 | 18 | 0 | 0 | 7 |
| Number of participating PCPs | 290 | 267 | 53 | 535 | 430 | 37 | 34 | 380 |
| Number of participating specialists | 720 | 912 | 3 | 1,269 | 1,037 | 1 | 52 | 722 |
| Number of participating nurse practitioners | 325 | 510 | 32 | 550 | 365 | 13 | 8 | 345 |
| Number of participating physician assistants | 280 | 240 | 25 | 377 | 266 | 15 | 9 | 191 |
| Proportion of Dual Beneficiaries | 6.24% | 7.13% | 4.68% | 5.10% | 8.18% | 2.66% | 2.55% | 11.45% |
| Share of Beneficiaries with COVID-19 diagnosis | 5.28% | 5.02% | 6.09% | 6.51% | 3.27% | 8.12% | 6.24% | 6.49% |
| Share of Beneficiaries with COVID-19 episode | 0.52% | 0.48% | 0.54% | 0.73% | 0.42% | 0.38% | 0.33% | 0.57% |
| Share of long-term institutionalized Beneficiaries | 3.12% | 1.04% | 4 1.34% | 1.82% | 5.21% | 0.55% | 0.77% | 2.08% |