

2024 Nebraska Medicare Shared Savings Program ACO Quality & Financial Performance Summary

Bob Rauner, MD, MPH, Ted Fraser, MS – October 2025

Background:

Medicare has publicly released 2024 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 111,324 attributed Medicare Fee for Service patients, plus many individual Nebraska clinics that are part of nine other national or regional MSSP ACOs. >60% of Nebraska Fee for Service Medicare patients are cared for by these ACOs. The seven Nebraska-based ACOs are:

1. Alegant Health Partners ACO, a regional hospital system ACO based in Omaha. Alegant/CHI merged with a regional Common Spirit ACO for 2025.
2. Bryan Health Connect ACO, a regional hospital system ACO based in Lincoln - <https://www.bryanhealth.com/bryan-health-connect/aco/>
3. Midwest Health Coalition ACO, a regional independent practice association ACO based in Omaha - <https://midwestippa.com/>
4. Nebraska Health Network, a regional hospital system ACO based in Omaha - <https://nebraskahealthnetwork.com/public-reporting/>
5. NPG Health Collaborative, a rural hospital ACO based 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 ACO based in Lincoln - <https://onehealthne.com/aco/>
7. Think ACO, an Omaha-based ACO - <https://think-aco.org/>

A regional ACO example is shown given the number of Nebraska clinics that are members of these types of ACOs. Aledade Accountable Care 151 includes clinics in Auburn and Columbus and has a Nebraska-based Medical Director - <https://aledade.com/northern-territories-mssp-enhanced>

Summary:

All Nebraska-based ACOs reported quality measures for 2024 and showed savings compared to their benchmarks according to CMS (Medicare), total savings for all seven was ~\$62.6 million, and five received shared savings bonuses from CMS. From a quality perspective, the Nebraska ACOs performed well with performance on most quality measures higher than national averages. The Aledade ACO example is shown for comparison.

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

Past joint voluntary Nebraska Patient-Centered Medical Home (PCMH) agreements had 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 pilots, Nebraska Medicaid MCOs, 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 because these measures are in use by the majority of Nebraska clinics.



PY2024 Nebraska Medicare Shared Savings Program ACO Quality & Financial Performance Summary	Alegent Health Partners, LLC	Bryan Health Connect ACO, LLC	Midwest Health Coalition ACO LLC	Nebraska Health Network, LLC	NPG Health Collaborative LLC	OneHealth Nebraska ACO, LLC	Think ACO, LLC	Aledade Accountable Care 151, LLC
Assigned Beneficiaries	19,338	21,853	5,179	35,290	13,029	10,477	6,158	12,007
COST and UTILIZATION								
Savings Rate	3.89%	5.83%	3.50%	2.13%	2.59%	9.31%	9.81%	5.29%
Quality Score	90.5%	90.0%	88.4%	90.3%	82.1%	91.6%	93.7%	88.0%
Per Capita Expenditures	\$12,080	\$13,420	\$11,203	\$12,571	\$14,922	\$10,838	\$11,494	\$12,406
Per Capita Savings (generated saving/total person years)	\$488	\$830	\$407	\$273	\$397	\$1,113	\$1,251	\$693
*Inpatient Discharges per 1K Person Years	255	227	228	246	243	187	216	209
*ED Visits per 1K Person Years	581	548	498	576	581	407	475	573
Primary Care Services per 1K Person Years	9,478	9,905	11,579	11,386	8,154	10,958	14,286	9,676
CONSUMER SATISFACTION - CAHPS								
Getting Timely Care, Appointments, and Information	83.5	86.6	87.9	86.4	82.7	90.5	87.9	84.7
How Well Your Providers Communicate	95.0	95.1	95.4	94.7	93.1	95.9	93.9	93.3
Patients' Rating of Provider	94.1	92.7	93.9	94.7	92.8	93.6	92.5	92.0
Access to Specialists	80.1	79.6	80.7	80.8	77.1	80.8	76.7	77.7
Health Promotion and Education	64.8	66.8	67.3	71.2	57.5	69.4	69.4	65.4
Shared Decision Making	66.0	63.3	65.4	64.7	64.9	67.2	68.1	60.8
Health Status/Functional Status	76.3	75.1	75.8	75.2	72.5	75.8	79.0	74.4
Stewardship of Patient Resources	28.5	36.8	34.8	39.8	35.3	35.9	25.8	29.4
Courteous and Helpful Office Staff	95.9	92.9	93.3	93.8	93.5	94.9	93.8	93.7
Care Coordination	88.8	88.7	88.3	90.1	85.4	90.2	88.5	85.5
CLINICAL QUALITY								
*Hospital-Wide 30-day Readmission Rate	0.157	0.144	0.161	0.155	0.164	0.150	0.147	0.143
Falls: Screening for Future Fall Risk	92.9	89.7	97.9	94.5	76.0	93.5	97.2	78.0
Influenza Immunization	78.7	73.0	91.5	79.3	79.5	76.3	89.4	67.5
Screening for Depression and Follow-Up Plan	86.8	90.3	95.6	90.4	77.5	92.7	96.4	86.1
Colorectal Cancer Screening	82.5	85.9	94.2	86.3	84.0	88.9	92.1	72.0
Breast Cancer Screening	83.7	87.8	90.9	94.5	82.8	87.3	91.6	79.3
Statins for Prevention & Treatment of Cardiovascular Disease	90.7	89.2	98.4	89.3	93.8	84.1	90.4	83.7
Depression Remission at 12 Months	1.4	5.6	17.7	4.7	34.3	6.1	7.1	24.1
*Diabetes: Hemoglobin A1c Poor Control (>9%)	8.3	5.3	3.6	5.9	5.0	4.6	2.3	7.7
Controlling High Blood Pressure	89.8	77.6	91.2	79.1	84.0	83.2	88.1	74.7

*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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Start Date	1/1/2024	7/1/2019	1/1/2020	1/1/2024	1/1/2020	1/1/2020	7/1/2019		1/1/2024	*
Current Level	Enhanced	Basic E	Basic B	Enhanced	Basic B	Basic E	Enhanced		Enhanced	*
Assigned Beneficiaries	19,338	21,853	5,179	35,290	13,029	10,477	6,158		12,007	21,694
Risk Model	Two-Sided	Two-Sided	One-Sided	Two-Sided	One-Sided	Two-Sided	Two-Sided		Two-Sided	*
Savings Rate	3.89%	5.83%	3.50%	2.13%	2.59%	9.31%	9.81%		5.29%	4.73%
Minimum Savings Rate	1.00%	1.00%	3.85%	1.00%	2.82%	1.00%	0.00%		0.00%	1.74%
Benchmark Minus Expenditures	\$9,247,294	\$17,711,847	\$2,061,397	\$9,471,019	\$5,042,075	\$11,471,341	\$7,565,141		\$8,141,830	\$13,826,779
Generated Savings/Losses	\$9,247,294	\$17,711,847	\$0	\$9,471,019	\$0	\$11,471,341	\$7,565,141		\$8,141,830	\$13,695,495
Earned Savings	\$6,796,761	\$8,678,805	\$0	\$6,961,199	\$0	\$5,620,957	\$5,560,379		\$5,984,245	\$8,622,353
Updated Benchmark	\$12,568	\$14,250	\$11,609	\$12,844	\$15,320	\$11,950	\$12,744		\$13,099	\$13,980
Historic Benchmark	\$11,553	\$11,286	\$10,009	\$11,963	\$12,298	\$9,858	\$9,892		\$11,825	\$12,079
Total Benchmark Expenditures	\$237,926,912	\$303,990,704	\$58,861,642	\$445,526,314	\$194,434,431	\$123,224,404	\$77,096,751		\$153,879,727	\$293,513,861
Total Expenditures	\$228,679,618	\$286,278,858	\$56,800,245	\$436,055,295	\$189,392,355	\$111,753,064	\$69,531,610		\$145,737,897	\$279,687,083
Maximum Sharing Rate	75%	50%	40%	75%	40%	50%	75%		75%	56%
High/Low Revenue ACO	High Revenue	High Revenue	Low Revenue	Low Revenue	High Revenue	Low Revenue	Low Revenue		Low Revenue	*
Per capita ESRD expenditures	\$97,510	\$103,514	\$92,331	\$101,654	\$79,645	*	*		\$88,937	\$95,371
Per capita disabled expenditures	\$10,467	\$13,652	\$8,744	\$12,104	\$14,390	\$9,805	\$10,100		\$13,199	\$12,679
Per capita aged/dual expenditures	\$19,328	\$24,092	\$19,725	\$21,801	\$25,487	\$21,958	\$14,392		\$22,332	\$19,303
Per capita aged/non-dual expenditures	\$11,694	\$12,861	\$10,941	\$12,243	\$14,333	\$10,741	\$11,426		\$11,777	\$12,622
Per capita Expenditures	\$12,080	\$13,420	\$11,203	\$12,571	\$14,922	\$10,838	\$11,494		\$12,406	\$13,283
Average ESRD HCC Risk Score	0.984	0.986	0.963	1.014	0.98	*	*		0.841	0.972
Average disabled HCC Risk Score	0.949	0.991	0.862	1.127	0.938	0.924	1.05		0.935	0.966
Average Aged/Dual HCC Risk Score	1.092	1.097	1.156	1.106	0.971	1.045	1.015		0.987	0.962
Average Aged/Non-Dual HCC Risk Score	0.99	0.951	0.889	1.009	0.915	0.924	1.073		0.942	1.004
Total assigned Beneficiaries, age 0-64	1,774	1,521	359	1,617	923	436	288		1,130	1,854
Total assigned Beneficiaries, age 65-74	9,677	10,836	2,842	17,882	6,217	5,608	2,828		6,139	10,153
Total assigned Beneficiaries, age 75-84	5,934	6,818	1,489	11,846	3,932	3,417	2,261		3,532	7,163
Total assigned Beneficiaries, age 85+	1,953	2,678	489	3,945	1,957	1,016	781		1,206	2,523
Total assigned Beneficiaries, non-Hispanic White	17,649	20,971	4,833	32,740	12,641	9,926	5,715		11,437	18,906
Total assigned Beneficiaries, Black	626	60	73	781	*	55	136		18	1,216
Total assigned Beneficiaries, Asian	154	76	33	162	*	56	*		31	411
Total assigned Beneficiaries, Hispanic	111	92	45	112	63	*	*		124	388
Total assigned Beneficiaries, North American Native	28	27	*	34	*	*	0		49	74
Total assigned Beneficiaries, other	121	80	*	226	34	57	32		79	339
Total assigned Beneficiaries, unknown	649	547	162	1235	266	349	255		269	594

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Inpatient Expenditures	\$3,346	\$3,153	\$2,839	\$3,092	\$3,678	\$2,373	\$2,743		\$3,240	\$3,625
Short term acute care hospital (IPPS/CAH) expenditures	\$3,040	\$2,941	\$2,583	\$2,887	\$3,499	\$2,177	\$2,510		\$2,991	\$3,127
Long term care hospital expenditures	\$93	\$36	*	\$69	\$86	*	*		*	\$82
Inpatient rehabilitation facility (IRF) expenditures	\$204	\$158	\$201	\$148	\$98	\$171	\$191		\$231	\$410
Inpatient psychiatric hospital expenditures	\$29	\$29	*	\$14	\$23	\$6	*		\$12	\$59
Hospice Expenditures	\$176	\$239	\$196	\$328	\$333	\$122	\$152		\$182	\$378
SNF Expenditures	\$790	\$1,043	\$789	\$843	\$1,788	\$547	\$682		\$840	\$872
Outpatient Expenditures	\$3,049	\$4,715	\$2,474	\$3,576	\$6,296	\$2,191	\$2,492		\$3,928	\$3,249
Part B Expenditures	\$4,016	\$3,605	\$4,360	\$4,001	\$2,573	\$4,829	\$4,770		\$3,413	\$4,407
Ambulance Expenditures	\$91	\$111	\$89	\$92	\$153	\$62	\$75		\$154	\$156
Home Health Expenditures	\$434	\$309	\$382	\$453	\$232	\$282	\$441		\$292	\$537
Durable Medical Equipment expenditures	\$413	\$465	\$390	\$440	\$405	\$397	\$360		\$487	\$410
Inpatient Hospital Discharges	\$255	\$227	\$228	\$246	\$243	\$187	\$216		\$209	\$264
Short Term Hospital Discharges	\$243	\$216	\$217	\$239	\$235	\$177	\$209		\$198	\$241
Outpatient ED Visits	\$581	\$548	\$498	\$576	\$581	\$407	\$475		\$573	\$640
ED Visits that Lead to a Hospitalization	\$187	\$120	\$168	\$179	\$41	\$137	\$159		\$111	\$190
CTs per 1K Person Years	823	745	739	786	687	735	736		692	771
MRIs per 1K Person Years	240	219	231	228	187	215	224		205	253
Primary Care Services/Person Years	9,478	9,905	11,579	11,386	8,154	10,958	14,286		9,676	12,920
Primary Care Services by a PCP/Person Years	3,575	2,563	5,958	4,245	167	4989	7,284		3,506	4,313
Primary Care Services by a Specialist/1K Person Years	3,593	3,358	3,508	4,500	2,560	3,373	4,609		2,809	5,004
Primary Care Services by a NP-PA-CNS/1K Person Years	2,236	2,169	2,102	2,515	1,028	2582	2,384		1,983	2,765
Primary Care Services at a FQHC-RHC/1K Person Years	74	1,815	11	127	4,400	14	9		1,378	845
SNF Discharges per 1K Person Years	47	54	48	53	67	38	44		38	47
Skilled nursing facility length of stay	27	27	25	28	25	25	27		27	27
Skilled nursing facility payment per stay	\$15,656	\$18,894	\$15,494	\$15,036	\$25,511	\$13,517	\$14,530		\$19,554	\$16,543
Number of CAHs	2	14	0	0	22	0	0		3	2
Number of RHCs	2	24	0	0	37	0	0		3	6
Number of short-term acute care hospitals	5	4	0	0	0	0	0		0	2
Number of other facility types	3	13	0	0	6	0	0		1	5
Number of participating PCPs	259	327	37	567	412	45	34		121	385
Number of participating specialists	977	1,074	2	1,323	1,014	1	55		219	732
Number of participating nurse practitioners	534	443	24	595	384	13	11		136	375
Number of participating physician assistants	265	380	17	395	271	25	14		113	200
Proportion of Dual Beneficiaries	6.2%	6.1%	4.2%	4.1%	7.3%	2.1%	2.1%		7.3%	10.9%
Share of long-term institutionalized Beneficiaries	1.1%	2.8%	1.2%	1.5%	5.0%	0.4%	0.6%		1.6%	2.4%