

Nebraska Medicare Shared Savings Program ACO 2019 Quality Summary

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Background:

Medicare has publicly released the 2019 results for all Medicare Shared Savings Program (MSSP) Accountable Care Organizations (ACOs). Full public data is available here –

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram>

On the 2nd page of this report are the full quality results and on the 3rd page is the financial summary for the 9 Nebraska-based MSSP ACOs who reported this past year (caring for 149,074 Nebraska Medicare Fee for Service patients).

1. Alegent Health Partners (CHI Omaha)
2. Bryan Health Connect ACO (Lincoln-based, but includes clinics in Beatrice, Central City, Crete and Wahoo)
3. Midwest Health Partners ACO (Omaha-based IPA, but includes clinics in other communities - Grand Island, Kearney & Lincoln)
4. Nebraska Health Network (UNMC, Methodist, Fremont)
5. NPG Health Collaborative (Prairie Health Ventures, mostly rural)
6. OneHealth Nebraska ACO (Lincoln-based IPA)
7. SERPA ACO (statewide IPA with clinics spread from Bellevue & Falls City, to McCook, North Platte & Broken Bow)
8. Think ACO (Omaha based)
9. TPN Health Partners (CHI clinics outside of the Omaha area, Lincoln, Kearney, Grand Island).

Noting that some Nebraska clinics are also members of regional and national ACOs (e.g., Caravan Health), this means that more than half of Nebraska's citizens receive care from ACOs.

The quality measures are grouped into 2 major categories/sources of data:

1. Patient Satisfaction (ACO 1-7, 34) – Data Source: Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey
2. Clinical Quality Measures – Data Source: combination of Medicare claims data and physician medical records

Summary:

All 9 Nebraska-based ACOs successfully reported for quality measures in 2019, 5 showed net savings according to CMS of approximately ~\$37.5 million combined with 4 receiving shared savings bonuses from CMS. From a quality perspective, all 9 Nebraska ACOs performed well with performance on most quality measures higher than national averages.

Context for the ALIGN Group and Statewide Quality Initiatives:

The past joint voluntary Nebraska 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 as well as the CPC+ Program, UDS HRSA measures used by FQHCs, and the Merit-Based Incentive Payment System also draw from these measures. These provide a common method of comparison for Nebraska PCMH & ACO initiatives. Because all 517 MSSP ACOs in the United States use these quality specifications, we should consider using these measures for future Nebraska initiatives to measure quality in adult populations. There are now 9 MSSP ACOs based in Nebraska, so these measures are in use by the majority of Nebraska primary care clinics.

ACO Name	Alegent Health Partners, LLC	Bryan Health Connect ACO, LLC	Midwest Health Coalition ACO	Nebraska Health Network, LLC	NPG Health Collaborative LLC	OneHealth Nebraska ACO, LLC	SERPA-ACO	Think ACO, LLC	TPN Health Partners, LLC	National Average
Quality Score	92.78	P4R**	98.54	92.17	93.50	98.00	95.16	99.13	95.63	94.41
ACO1 Timely Access to Care	86.42	85.88	91.22	89.38	86.44	90.01	87.13	88.47	89.64	85.97
ACO2 Physician Communication	93.96	94.29	94.66	94.76	93.36	94.89	94.54	94.48	95.24	93.88
ACO3 Patient Rating of Provider	93.25	92.80	92.84	93.79	92.22	93.50	92.19	94.24	94.28	92.43
ACO4 Access to Specialists	81.74	81.97	85.89	82.25	84.46	86.78	84.43	84.68	84.67	81.78
ACO5 Health Promotion	61.05	54.93	58.31	61.00	51.42	62.80	56.83	68.84	58.85	60.38
ACO6 Shared Decision Making	65.05	63.87	61.16	60.66	59.24	67.52	64.82	67.09	64.31	62.57
ACO7 Health Status	71.48	74.85	74.03	76.85	72.42	77.20	75.89	75.53	74.71	73.59
ACO34 Resource Stewardship	29.19	28.44	25.22	28.66	28.47	30.83	28.23	31.97	26.44	26.40
ACO45 Courteous/Helpful Staff	93.90	91.65	94.45	95.65	91.84	93.67	92.30	94.20	94.95	92.46
ACO46 Care Coordination	87.31	87.92	87.36	87.62	86.73	90.54	86.57	89.47	90.25	86.48
ACO8 Readmissions*	14.80	14.25	14.41	14.28	13.98	14.61	14.30	13.92	14.46	14.87
ACO38 Chronic Condition Admits*	57.19	59.45	56.00	61.71	54.08	50.74	56.90	43.33	50.99	57.88
ACO43 Preventable Admits*	1.54	1.73	1.59	2.10	2.26	1.32	2.41	1.27	1.20	1.86
ACO13 Fall Risk Screening	93.63	69.39	95.29	90.61	70.45	89.29	80.90	95.56	89.52	85.06
ACO14 Influenza Vaccination	79.08	76.80	91.37	86.58	85.04	83.66	86.14	95.24	66.67	75.34
ACO18 Depression Screening	90.32	76.12	93.57	86.00	70.40	73.39	80.20	83.06	56.05	71.56
ACO19 Colorectal Cancer Screening	70.33	68.75	84.65	81.51	72.22	83.36	81.26	89.92	71.77	71.34
ACO20 Breast Cancer Screening	76.63	74.21	83.46	83.36	74.82	82.59	81.98	92.68	69.35	74.32
ACO42 CVD Statin Therapy	85.47	71.58	95.63	81.70	89.30	78.15	77.19	89.04	86.75	82.68
ACO27 A1c Poor Control*	8.73	13.06	8.27	9.51	11.56	9.35	9.43	6.32	14.52	13.65
ACO28 Blood Pressure Control	80.23	71.64	86.87	78.39	82.12	75.47	81.35	88	69.76	75.29

Note: *Italicized results are for measures where a lower score is better. **Bryan Health Connect is in its first year (pay for reporting), so does not have a quality score calculated on performance for 2029. Green highlighted fields are where Nebraska ACO's performance was higher than national averages (light green better than average, medium green >75th percentile, dark green >90th percentile).

Financial reporting for 2019 listed below is more complicated than prior years because several ACOs started or changed tracks mid-year, this makes ACO to ACO comparison more difficult for 2019. Additionally, Medicare calculates benchmarks differently based on contract year, uses varying degrees of historical and regional benchmarking, and does not publish each ACO's risk weights. Because of this, benchmark and cost comparisons between ACOs are not apples to apples comparisons.

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Initial Start Date	1/1/2013	1/1/2013	7/1/2019	1/1/2014	1/1/2017	1/1/2017	1/1/2017	1/1/2013	1/1/2016	1/1/2016	1/1/2016	1/1/2016	-
Initial Level	Track 1	Track 3	Basic A	Track 1	Track 1	Track 1	Track 1	Track 1	Track 1	Track 1	Track 1	Track 1	-
Current Start Date	1/1/2016	7/1/2019	7/1/2019	1/1/2017	1/1/2017	1/1/2017	1/1/2017	1/1/2016	1/1/2016	7/1/2019	1/1/2016	7/1/2019	-
Current Level	Track 3 Two-Sided	Enhanced Two-Sided	Basic A	Track 1	Track 1	Track 1	Track 1	Track 1	Track 1	Enhanced Two-Sided	Track 1	Basic B	-
Number of Patients	18,468	18,486	11,082	14,083	36,746	18,062	7,155	18,087	7,312	7,299	5,066	5,714	21,048
Historical Benchmark	\$9,493	\$10,224	\$11,082	\$9,217	\$9,849	\$11,611	\$8,786	\$10,138	\$8,991	\$9,971	\$9,213	\$11,422	\$10,802
Updated Benchmark	\$10,833	\$10,647	\$11,518	\$10,012	\$10,831	\$12,745	\$9,625	\$11,518	\$10,402	\$10,378	\$11,028	\$11,918	\$11,711
Total Benchmark Expenditures	\$98,172,152	\$96,586,323	\$62,212,899	\$137,548,841	\$387,604,017	\$223,298,535	\$67,580,616	\$101,409,827	\$37,380,069	\$37,228,051	\$27,274,372	\$33,270,687	\$195,410,602
Total Expenditures	\$92,207,542	\$92,177,798	\$63,537,732	\$133,000,906	\$374,441,761	\$219,174,230	\$67,733,482	\$103,084,954	\$35,018,025	\$34,978,356	\$29,739,578	\$32,510,328	\$191,258,898
Benchmark minus Expenditures	\$5,964,611	\$4,408,526	(\$1,324,833)	\$4,547,935	\$13,162,256	\$4,124,305	(\$152,866)	(\$1,675,127)	\$2,362,044	\$2,249,695	(\$2,465,206)	\$760,359	\$4,151,705
Minimum Savings Rate	1.0%	1.0%	2.94%	2.75%	2.33%	2.58%	3.37%	2.58%	3.34%	0%	3.88%	3.69%	2.6%
Savings Rate	6.08%	4.56%	-2.13%	3.31%	3.40%	1.85%	-0.23%	-1.65%	6.32%	6.04%	-9.04%	2.29%	2.5%
Quality Sharing Rate	75%	75%	40%	50%	50%	50%	50%	50%	50%	75%	50%	40%	51.8%
Quality Score	92.8	92.8	P4R**	98.5	92.2	93.5	98.0	95.2	99.1	99.1	95.6	95.6	94.4
Final Sharing Rate	70%	70%	40%	49%	46%	47%	49%	48%	50%	74%	48%	38%	48.9%
Total Savings/Losses	\$5,964,611	\$4,408,526	\$0	\$4,547,935	\$13,162,256	\$0	\$0	\$0	\$2,362,044	\$2,249,695	(\$2,465,206)	\$0	\$3,883,703
Earned Shared Savings Payment/Loss	\$4,150,530	\$3,067,714	\$0	\$2,240,711	\$6,065,704	\$0	\$0	\$0	\$1,170,688	\$1,672,508	\$0	\$0	\$2,353,435

**Pay for Performance