Quality Performance Results, continued - Measure Results 2021 Medicare Shared Savings Program Quality Performance Report A4923 - ACCOUNTABLE CARE ORGANIZATION OF THE NORTH COUNTRY, LLC

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Table 2. APP - CMS Web Interface Measure Set

					Reported Performance	Current Year Mean Performance Rate (SSP
Measure #	Measure Name	Eligible For Scoring ¹	Numerator	Denominator	Rate	ACOs)
001	Diabetes: Hemoglobin A1c (HbA1c) Poor Control ²	Y	27	283	9.54	12.46
134	Preventative Care and Screening: Screening for Depression and Follow-up Plan	N	271	366	74.04	74.38
236	Controlling High Blood Pressure	Y	400	503	79.52	74.87
318	Falls: Screening for Future Fall Risk	Υ	322	339	94.99	87.03
110	Preventative Care and Screening: Influenza Immunization	Y	346	405	85.43	80.52
226	Preventative Care and Screening: Tobacco Use: Screening and Cessation Intervention	Y	19	19	100.00	80.97
113	Colorectal Cancer Screening	Y	284	338	84.02	73.63
112	Breast Cancer Screening	Y	272	336	80.95	75.11
438	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	N	305	345	88.41	84.24
321	CAHPS for MIPS ³	Υ	N/A	N/A	N/A	N/A
479	Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Groups ²	Y			0.1745	0.1540
MCC1	All-Cause Unplanned Admissions for Patients with Multiple Chronic Conditions for ACOs (MCC) ²	Y			34.31	33.99

^[1] For PY 2021, measures #134, #438, and #370 do not have CMS Web Interface benchmarks and are not scored as a result.

^[2] A lower performance rate corresponds to higher quality.

^[3] CAHPS for MIPS is a composite measure, so numerator, denominator, and performance rate values are not applicable (N/A). See Table 4 for details on CAHPS for MIPS performance.

Table 3. APP - eCQM/MIPS CQM Measure Set

Measure #	Measure Name	Eligible For Scoring ¹	Numerator	Denominator	Rate	Performance Rate (SSP
001	Diabetes: Hemoglobin A1c (HbA1c) Poor Control ²	Y				
134	Preventative Care and Screening: Screening for Depression and Follow-	Υ				
	up Plan					
236	Controlling High Blood Pressure	Y				
321	CAHPS for MIPS ³	Y	N/A	N/A	N/A	N/A
479	Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate	Υ				
	for MIPS Groups ²					
MCC1	All-Cause Unplanned Admissions for Patients with Multiple Chronic	Υ				
	Conditions for ACOs (MCC) ²					

^[1] For PY 2021, all six measures in the eCQM/MIPS CQM Measure set are eligible for scoring.

Table 4. APP - CAHPS for MIPS Measures

			Reported Performance	Current Year Mean Performance Rate (SSP
Measure ID	Measure Name	Eligible For Scoring	Rate	ACOs)
CAHPS-1	Getting Timely Care, Appointments, and Information	Y	87.45	84.67
CAHPS-2	How Well Providers Communicate	Y	91.59	93.56
CAHPS-3	Patient's Rating of Provider	Y	90.91	92.19
CAHPS-4	Access to Specialists	N	70.81	78.80
CAHPS-5	Health Promotion and Education	Y	59.55	61.61
CAHPS-6	Shared Decision Making	Y	63.03	60.89
CAHPS-7	Health Status and Functional Status	N	70.52	71.78
CAHPS-8	Care Coordination	Y	84.08	85.66
CAHPS-9	Courteous and Helpful Office Staff	Y	91.83	91.88
CAHPS-11	Stewardship of Patient Resources	Y	17.24	24.71

^[2] A lower performance rate corresponds to higher quality.

^[3] CAHPS for MIPS is a composite measure, so numerator, denominator, and performance rate values are not applicable (N/A). See Table 4 for details on CAHPS for MIPS performance.