



ACO ASSESSMENT TOOLKIT

APPENDIX III. SAMPLE ACO MEASURES

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JUNE 2017



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Appendix III. Sample ACO Measures

As ACOs have proliferated, so have the variety of performance standards, quality measures and reporting metrics in use by purchasers, health plans and provider organizations. While purchasers prioritize accountability for health outcomes and the total cost of care, health plans and providers may also use a variety of measures geared to quality improvement and reducing care variation. A standard measure set for use in the commercial ACO market has the potential of focusing resources on value drivers and health outcomes, while streamlining data collection and reducing reporting burden. Existing collaborations have included:

1. Measures recommended by Pacific Business Group on Health and Catalyst for Payment Reform (CPR) in their guide to Model ACO Contract Language¹⁵
2. Measures used in the Integrated Healthcare Association (IHA) Value Based Pay for Performance Common Measure Set¹⁶
3. Core Quality Measures recommended by America's Health Insurance Plans, Centers for Medicare & Medicaid Services and the National Quality Forum¹⁷

What follows is a proposed measure set developed with input from PBGH, CPR and IHA, including representatives from health plans, provider organizations, National Committee for Quality Assurance, RAND and other stakeholders. The measures that are bolded represent preferred purchaser measures for adoption and development.

¹⁵ Model ACO Contract Language: Contracting for Value through Accountable Care Organizations, Appendix A: Quality, Patient Experience, Cost and Utilization Measures, June 2014. Accessed at: http://www.pbgh.org/storage/documents/CPR_PBGH_Model_ACO_Contract_FINAL.pdf

¹⁶ Value Based P4P Common Measure Set. Accessed at: <http://www.ihc.org/our-work/accountability/value-based-p4p/measure-set>

¹⁷ Core Quality Measure Collaborative. Accessed at: <https://www.cms.gov/medicare/quality-initiatives-patient-assessment-instruments/qualitymeasures/core-measures.html>

NQF #	Measure	Steward	Description
Asthma			
1800	Asthma Medication Ratio	NCQA	The percentage of patients 5–64 years of age who were identified as having persistent asthma and had a ratio of controller medications to total asthma medications of 0.50 or greater during the measurement year.
Cancer Screening			
2372	Breast Cancer Screening	NCQA	The percentage of women 50-74 years of age who had a mammogram to screen for breast cancer.
0032	Cervical Cancer Screening	NCQA	Percentage of women 21–64 years of age who were screened for cervical cancer using either of the following criteria: <ul style="list-style-type: none"> • Women age 21–64 who had cervical cytology performed every 3 years. • Women age 30–64 who had cervical cytology/human papillomavirus (HPV) co-testing performed every 5 years.
N/A	Cervical Cancer Overscreening	IHA/NCQA	The percentage of women 21–64 years of age who received more cervical cancer screenings than necessary according to evidence-based guidelines, using either of the following criteria: <ul style="list-style-type: none"> • Women age 21–64 who had cervical cytology performed every 3 years. <p>Women age 30–64 who had cervical cytology/human papillomavirus (HPV) co-testing performed every 5 years.</p>
0034	Colorectal Cancer Screening	NCQA	The percentage of patients 50–75 years of age who had appropriate screening for colorectal cancer.
Cardiovascular			
N/A	Controlling High Blood Pressure	IHA/NCQA	The percentage of patients 18 to 85 years of age who had a diagnosis of hypertension (HTN) and whose blood pressure (BP) was adequately controlled (<140/90) during the measurement year.
N/A	Statin Therapy for Patients with Cardiovascular Disease	NCQA	The percentage of males 21–75 years of age and females 40–75 years of age during the measurement year, who were identified as having clinical atherosclerotic cardiovascular disease (ASCVD) and met the following criteria: <ol style="list-style-type: none"> 1. Received Statin Therapy. 2. Statin Adherence 80%.
0068	Ischemic Vascular Disease: Aspirin Use	NCQA	The percentage of patients 18 years of age and older who were discharged from an inpatient setting with an acute myocardial infarction (AMI), coronary artery bypass graft (CABG) or percutaneous coronary intervention (PCI) during the 12 months prior to the measurement year, or who had a diagnosis of ischemic vascular disease (IVD) during the measurement year and the year prior to the measurement year and who had documentation of routine use of aspirin or another antiplatelet during the measurement year.

NQF #	Measure	Steward	Description
Cardiovascular (cont.)			
0071	Persistent Beta Blocker Treatment after Heart Attack	NCQA	The percentage of patients 18 years of age and older during the measurement year who were hospitalized and discharged from July 1 of the year prior to the measurement year to June 30 of the measurement year with a diagnosis of acute myocardial infarction (AMI) and who received persistent beta-blocker treatment for six months after discharge
Behavioral Health			
0711	Depression Remission at 6 months	MNCM	Adult patients age 18 and older with major depression or dysthymia and an initial PHQ-9 score > 9 who demonstrate a response to treatment at six months defined as a PHQ-9 score that is reduced by 50% or greater from the initial PHQ-9 score.
0418	Screening for Clinical Depression & Follow Up Plan	CMS	Percentage of patients aged 12 years and older screened for clinical depression using an age appropriate standardized tool AND follow-up plan documented
0004	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment	NCQA	The percentage of adolescent and adult patients with a new episode of alcohol or other drug (AOD) dependence who received initiation or engagement of AOD treatment.
Diabetes			
0729	Optimal Diabetes Care Combination	MNCM	The percentage of adult diabetes patients who have optimally managed modifiable risk factors to prevent/reduce future complications associated with poorly managed diabetes. Patients ages 18 - 75 with a diagnosis of diabetes, who meet all the numerator targets of this composite measure: A1c < 8.0, Blood Pressure < 140/90, Statin use unless contraindications or exceptions, Tobacco non-user and for patients with diagnosis of ischemic vascular disease daily aspirin use unless contraindicated.
0731	Comprehensive Diabetes Care	NCQA	The percentage of patients 18–75 years of age with diabetes (type 1 and type 2) who had each of the following: <ul style="list-style-type: none"> • Hemoglobin A1c (HbA1c) testing (NQF#0057) • HbA1c poor control (>9.0%) (NQF#0059) • HbA1c control (<8.0%) (NQF#0575) • Medical attention for nephropathy (NQF#0062) • BP control (<140/90 mm Hg) (NQF#0061)
N/A	Statin Therapy for Patients with Diabetes	NCQA	“The percentage of members 40–75 years of age during the measurement year, with diabetes who do not have clinical atherosclerotic cardiovascular disease (ASCVD) and met the following criteria. The following rates are reported: <ol style="list-style-type: none"> 1. Received Statin Therapy. 2. Statin Adherence 80%.
Low Back Pain			
0052	Use of Imaging Studies for Low Back Pain	NCQA	The percentage of members with a primary diagnosis of low back pain who did not have an imaging study (plain x-ray, MRI, CT scan) within 28 days of the diagnosis.

NQF #	Measure	Steward	Description
Maternity			
0471	NTSV C-Section	TJC	Nulliparous women with a term, singleton baby in a vertex position delivered by cesarean section
1517	Prenatal and Postpartum Care	NCQA	The percentage of deliveries of live births between November 6 of the year prior to the measurement year and November 5 of the measurement year. For these women, the measure assesses the following facets of prenatal and postpartum care: Timeliness of Prenatal Care and Postpartum Care.
Respiratory			
0002	Appropriate Testing for Children with Pharyngitis	NCQA	The percentage of children 2–18 years of age who were diagnosed with pharyngitis, dispensed an antibiotic and received a group A streptococcus (strep) test for the episode. A higher rate represents better performance (i.e., appropriate testing).
0058	Avoidance of Antibiotic Treatment of Adults with Acute Bronchitis	NCQA	The percentage of adults 18–64 years of age with a diagnosis of acute bronchitis who were not dispensed an antibiotic prescription.
Person Centeredness			
0005 0006	CG-CAHPS (ACO)	AHRQ	The CAHPS Survey for Accountable Care Organizations (ACOs) is a version of the CAHPS Clinician & Group Survey for accountable care organizations. The CAHPS Survey for ACOs expands on the measures generated by the core CAHPS Clinician & Group Survey. Federal programs rely on either version of the ACO survey: ACO-9 and ACO-12.
N/A	Patient Reported Outcomes	N/A	Defined roadmap and timeline for adoption of condition-specific patient reported outcomes such as HOOS (Hip disability and Osteoarthritis Outcome Score) or KOOS (knee injury and osteoarthritis outcome score) for joint surgery, average Change in Functional Status following Lumbar Spine Fusion Surgery (MN Community Measurement), or International Consortium for Health Outcomes Measurement (ICHOM) Standard Set for Pregnancy And Childbirth.
Population Health			
0421	Adult BMI Screening & Follow Up	CMS	Percentage of patients aged 18 years and older with a documented BMI during the current encounter or during the previous six months AND when the BMI is outside of normal parameters, a follow-up plan is documented during the encounter or during the previous six months of the encounter. Normal Parameters: Age 65 years and older BMI > or = 23 and < 30 Age 18-64 years BMI > or = 18.5 and < 25

NQF #	Measure	Steward	Description
Population Health (cont.)			
0038	Childhood Immunization Status: Combination 10	NCQA	Percentage of children 2 years of age who had four DtaP; three polio (IPV); one MMR; three HiB; three HepB; one VZV; four PCV; one HepA; RV; and two flu vaccines by their second birthday.
0033	Chlamydia Screening in Women	NCQA	The percentage of women 16–24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.
1407	Immunizations for Adolescents	NCQA	The percentage of adolescents 13 years of age who had one dose of meningococcal conjugate vaccine, one tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap) vaccine and three doses of the human papillomavirus (HPV) vaccine by their 13 th birthday.
0039	Flu Vaccinations for Adults 18-64	NCQA	The percentage of adults 18 years of age and older who self-report receiving an influenza vaccine within the measurement period. This measure is collected via the CAHPS 5.0H adults survey for Medicare, Medicaid, and commercial populations. It is reported as two separate rates stratified by age: 18-64 and 65 years of age and older.
Utilization			
1768	All Cause Readmissions	NCQA	For patients 18 years of age and older, the number of acute inpatient stays during the measurement year that were followed by an unplanned acute readmission for any diagnosis within 30 days and the predicted probability of an acute readmission.
N/A	ED Visits	NCQA	The number of emergency department (ED) visits during the measurement year.
N/A	Total Cost of Care	IHA	All costs associated with treating members including professional, facility inpatient and outpatient, pharmacy, lab, radiology, ancillary and behavioral health services.
N/A	AHRQ Prevention Quality Indicator #90: Ambulatory Sensitive Admissions	AHRQ	11-item composite constructed by summing the hospitalizations across the component conditions and dividing by the population. Rates will be adjusted for age and gender when comparing across regions or demographic groups.
N/A	Potentially Avoidable ER Visits	NYU	The number of potentially avoidable emergency department visits.
Prevention			
0028	Preventive Care & Screening: Tobacco Use: Screening & Cessation Intervention	AMA-PCPI	Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco user
N/A	Use of Opioids at High Dosage OR Concurrent Use of Opioids & Benzodiazepines (pending testing)	PQA	Percentage of individuals 18 years and older with concurrent use of prescription opioids and benzodiazepines.
0024	Weight Assessment & Counseling for Nutrition and Physical Activity for Children/Adolescents	NCQA	Percentage of patients 3-17 years of age who had an outpatient visit with a primary care physician (PCP) or an OB/GYN and who had evidence of the following during the measurement year: Body mass index (BMI) percentile documentation, Counseling for nutrition, & Counseling for physical activity.

