

**Table 1. Shared Savings Quality Scoring and Eligibility**

|   | AR        | CO       | NJ       | NY       | OH       | OK       | OR       | All-Regions |
|---|-----------|----------|----------|----------|----------|----------|----------|-------------|
| <b>Total Practices in 2016</b>  | 57        | 67       | 53       | 63       | 75       | 60       | 64       | 439         |
| <b>No. of Practices Successful at eCQM Reporting</b>  | 57 (100%) | 62 (93%) | 51 (96%) | 62 (98%) | 74 (99%) | 59 (98%) | 62 (97%) | 427 (97%)   |
| <b>No. of Practices Eligible for Shared Savings Based on Quality Requirements<sup>1</sup></b> | 54 (95%)  | 62 (93%) | 51 (96%) | 62 (98%) | 74 (99%) | 59 (98%) | 62 (97%) | 424 (97%)   |

**Table 2. 2016 Medicare Gross and Net Savings Performance**

|   | AR           | CO           | NJ            | NY            | OH            | OK           | OR           | All-Regions   |
|---|--------------|--------------|---------------|---------------|---------------|--------------|--------------|---------------|
| <b>Gross Savings (%)</b>                    | 4.6%         | -0.1%        | -2.9%         | -3.6%         | -5.0%         | 5.7%         | 1.0%         | 0.2%          |
| <b>Gross Savings (\$)</b>                   | \$21,528,033 | -\$518,952   | -\$12,047,920 | -\$13,594,621 | -\$21,753,536 | \$26,880,173 | \$4,712,569  | \$5,205,746   |
| <b>Net Savings (%)</b>                      | 2.7%         | -2.1%        | -4.5%         | -5.4%         | -6.8%         | 4.0%         | -0.9%        | -1.7%         |
| <b>Net Savings (\$)</b>                     | \$12,546,153 | -\$9,118,168 | -\$18,661,564 | -\$20,417,887 | -\$29,902,376 | \$18,776,095 | -\$4,485,217 | -\$51,262,964 |
| <b>Total Amount Earned<sup>2</sup> (\$)</b> | \$1,052,683  | \$0          | \$0           | \$0           | \$0           | \$9,127,320  | \$0          | \$10,180,003  |

<sup>1</sup> In 2015 and 2016, practices must achieve a minimum of half of the total points that were available to them, depending on the number of eCQMs they reported. Practices were required to report 9 eCQMs. If a practice reported more than 9 eCQMs, the practice was scored for the 9 highest-scoring measures. Total possible points ranged from 154 to 175, depending on which eCQMs practices reported.

<sup>2</sup>As of April 1, 2013, all Medicare expenditures are reduced by 2% due to sequestration, which include shared savings.

**Table 3. 2016 Medicare Expenditures Targets and Actual Expenditures, Per Beneficiary Per Month (PBPM)**

|                                    | AR       | CO       | NJ       | NY       | OH       | OK       | OR       | All-Regions |
|------------------------------------|----------|----------|----------|----------|----------|----------|----------|-------------|
| <b>Beneficiary months</b>          | 598,957  | 578,564  | 445,262  | 461,098  | 545,291  | 539,956  | 615,551  | 3,784,679   |
| <b>Expenditures target (PBPM)</b>  | \$789.23 | \$733.23 | \$922.17 | \$825.95 | \$805.56 | \$880.06 | \$787.40 | \$815.80    |
| <b>Actual expenditures (PBPM)</b>  | \$753.28 | \$734.13 | \$949.23 | \$855.43 | \$845.46 | \$830.28 | \$779.74 | \$829.34    |
| <b>Care Management Fees (PBPM)</b> | \$15.00  | \$14.86  | \$14.85  | \$14.80  | \$14.94  | \$15.01  | \$14.94  | \$14.92     |
| <b>Gross Savings (%)</b>           | 4.6%     | -0.1%    | -2.9%    | -3.6%    | -5.0%    | 5.7%     | 1.0%     | 0.2%        |
| <b>Gross Savings (PBPM)</b>        | \$35.94  | -\$0.90  | -\$27.06 | -\$29.48 | -\$39.89 | \$49.78  | \$7.66   | \$1.38      |
| <b>Net Savings (%)</b>             | 2.7%     | -2.1%    | -4.5%    | -5.4%    | -6.8%    | 4.0%     | -0.9%    | -1.7%       |
| <b>Net Savings (PBPM)</b>          | \$20.95  | -\$15.76 | -\$41.91 | -\$44.28 | -\$54.84 | \$34.77  | -\$7.29  | -\$13.54    |

**Table 4. Claims-Based Quality Measure Performance (Region-Level Scores)**

|  | AR     | CO     | NJ     | NY     | OH     | OK     | OR     | All-Regions |
|--|--------|--------|--------|--------|--------|--------|--------|-------------|
| <b>All-Cause Hospital Readmissions<sup>3</sup></b> | 15.54% | 11.69% | 14.29% | 15.65% | 15.25% | 14.32% | 13.63% | 14.34%      |
| <b>Heart Failure Admissions<sup>4</sup></b>        | 0.83   | 0.72   | 0.85   | 1.01   | 0.88   | 0.85   | 0.80   | 0.85        |
| <b>COPD Admissions<sup>5</sup></b>                 | 0.95   | 0.38   | 0.82   | 0.97   | 0.92   | 0.97   | 0.66   | 0.81        |

<sup>3</sup> Performance is measured as the risk-standardized percentage of hospital discharges (as defined in the specifications) that resulted in a readmission. There are three performance benchmarks (lower percentage indicates better performance): 14.81%, 15.07%, 15.40%.

<sup>4</sup> Performance is measured as the ratio of the observed to expected number of hospital admissions for heart failure in the region. There are three performance benchmarks (lower ratio indicates better performance): 0.75, 1.08, 1.47.

<sup>5</sup> Performance is measured as the ratio of the observed to expected number of hospital admissions for COPD or asthma in the region. There are three performance benchmarks (lower ratio indicates better performance): 0.50, 0.92, 1.55.

**Table 5. CAHPS Patient Experience Performance (Percent of Practices that Earned Quality Points by Exceeding a Performance Benchmark)**

|   | <b>AR</b> | <b>CO</b> | <b>NJ</b> | <b>NY</b> | <b>OH</b> | <b>OK</b> | <b>OR</b> | <b>All-Regions</b> |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|--------------------|
| <b>Getting Timely Appointments, Care, and Information<sup>6</sup></b>     | 98%       | 93%       | 100%      | 100%      | 97%       | 92%       | 97%       | 97%                |
| <b>How Well Providers Communicate with Patient<sup>5</sup></b>            | 100%      | 100%      | 98%       | 100%      | 100%      | 98%       | 100%      | 100%               |
| <b>Patient Rating of Provider and Care<sup>5</sup></b>                    | 98%       | 97%       | 98%       | 100%      | 97%       | 98%       | 100%      | 98%                |
| <b>Attention to Care from Other Providers<sup>5</sup></b>                 | 100%      | 100%      | 100%      | 100%      | 100%      | 98%       | 100%      | 100%               |
| <b>Providers Support Patient in Taking Care of Own Health<sup>5</sup></b> | 98%       | 100%      | 96%       | 100%      | 99%       | 97%       | 100%      | 99%                |

For more information about CMS' benchmarking and calculations, please see the [CPC 2017 Medicare Shared Savings Methodology Paper](#).

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<sup>6</sup> We calculate performance rates for each of the patient experience measures for each practice using the Consumer Assessment of Health Care Providers and Systems (CAHPS) Analysis Program, version 4.1, developed by AHRQ.

**Table 6. Electronic Clinical Quality Measures Performance (eCQMS) (Percent of Practices that Earned Quality Points by Exceeding a Performance Benchmark)<sup>7</sup>**

| Electronic Clinical Quality Measures   | All-Regions 2015 | All-Regions 2016 | Variance (2015 – 2016) |
|--|------------------|------------------|------------------------|
| Controlling High Blood Pressure  | 90%              | 93%              | +3%                    |
| Tobacco Use: Screening and Cessation Intervention                                  | 66%              | 76%              | +10%                   |
| Breast Cancer Screening  | 97%              | 97%              | 0%                     |
| Colorectal Cancer Screening  | 99%              | 100%             | +1%                    |
| Influenza Immunization   | 99%              | 99%              | 0%                     |
| Diabetes: Low Density Lipoprotein Management                                       | 93%              | 93%              | 0%                     |
| Ischemic Vascular Disease (IVD): Complete Lipid Panel and LDL Control <sup>8</sup> | 91%              | 88%              | (3%)                   |
| HF: Beta- Blocker Therapy for LVSD   | 54%              | 67%              | +13%                   |
| Screening for Future Fall Risk   | 87%              | 92%              | +5%                    |
| Screening for Clinical Depression & Follow-Up Plan                                 | 100%             | 100%             | 0%                     |
| Documentation of Current Medications   | 86%              | 94%              | +8%                    |

For more information about CMS' eCQM benchmarking, please see the [CPC eCQM Benchmarking Methodology Report](#).

<sup>7</sup> These 2015 and 2016 results also include practices that exceeded the second and third benchmarks.

<sup>8</sup> We used the first of two performance rates for CMS182v4/NQF0075. We did not create benchmarks for the second performance rate because of a technical error in the measure logic.