

Table 1 Measures for Use in Establishing Quality Performance Standards that ACOs Must Meet for Shared Savings

	Domain	Measure Title	NQF Measure #/ Measure Steward	Method of Data Submission	Pay for Performance Phase In		
					R = Reporting Performance Year 1	P=Performance Year 2	Year 3
AIM: Better Care for Individuals							
1.	Patient/Caregiver Experience	CAHPS: Getting Timely Care, Appointments, and Information	NQF #5, AHRQ	Survey	R	P	P
2.	Patient/Caregiver Experience	CAHPS: How Well Your Doctors Communicate	NQF #5 AHRQ	Survey	R	P	P
3.	Patient/Caregiver Experience	CAHPS: Patients' Rating of Doctor	NQF #5 AHRQ	Survey	R	P	P
4.	Patient/Caregiver Experience	CAHPS: Access to Specialists	NQF #5 AHRQ	Survey	R	P	P
5.	Patient/Caregiver Experience	CAHPS: Health Promotion and Education	NQF #5 AHRQ	Survey	R	P	P
6.	Patient/Caregiver Experience	CAHPS: Shared Decision Making	NQF #5 AHRQ	Survey	R	P	P
7.	Patient/Caregiver Experience	CAHPS: Health Status/Functional Status	NQF #6 AHRQ	Survey	R	R	R
8.	Care Coordination/ Patient Safety	Risk-Standardized, All Condition Readmission*	NQF #TBD CMS	Claims	R	R	P
9.	Care Coordination/ Patient Safety	Ambulatory Sensitive Conditions Admissions: Chronic Obstructive Pulmonary Disease (AHRQ Prevention Quality Indicator (PQI) #5)	NQF #275 AHRQ	Claims	R	P	P
10.	Care Coordination/ Patient Safety	Ambulatory Sensitive Conditions Admissions: Congestive Heart Failure (AHRQ Prevention Quality Indicator (PQI) #8)	NQF #277 AHRQ	Claims	R	P	P
11.	Care Coordination/ Patient Safety	Percent of PCPs who Successfully Qualify for an EHR Incentive Program Payment	CMS	EHR Incentive Program Reporting	R	P	P
12.	Care Coordination/ Patient Safety	Medication Reconciliation: Reconciliation After Discharge from an Inpatient Facility	NQF #97 AMA-PCPI/NCQA	GPRO Web Interface	R	P	P
13.	Care Coordination/ Patient Safety	Falls: Screening for Fall Risk	NQF #101 NCQA	GPRO Web Interface	R	P	P
AIM: Better Health for Populations							
14.	Preventive Health	Influenza Immunization	NQF #41 AMA-PCPI	GPRO Web Interface	R	P	P

	Domain	Measure Title	NQF Measure #/ Measure Steward	Method of Data Submission	Pay for Performance Phase In		
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15.	Preventive Health	Pneumococcal Vaccination	NQF #43 NCQA	GPRO Web Interface	R	P	P
16.	Preventive Health	Adult Weight Screening and Follow-up	NQF #421 CMS	GPRO Web Interface	R	P	P
17.	Preventive Health	Tobacco Use Assessment and Tobacco Cessation Intervention	NQF #28 AMA-PCPI	GPRO Web Interface	R	P	P
18.	Preventive Health	Depression Screening	NQF #418 CMS	GPRO Web Interface	R	P	P
19.	Preventive Health	Colorectal Cancer Screening	NQF #34 NCQA	GPRO Web Interface	R	R	P
20.	Preventive Health	Mammography Screening	NQF #31 NCQA	GPRO Web Interface	R	R	P
21.	Preventive Health	Proportion of Adults 18+ who had their Blood Pressure Measured within the preceding 2 years	CMS	GPRO Web Interface	R	R	P
22.	At Risk Population - Diabetes	Diabetes Composite (All or Nothing Scoring): Hemoglobin A1c Control (<8 percent)	NQF #0729 MN Community Measurement	GPRO Web Interface	R	P	P
23.	At Risk Population - Diabetes	Diabetes Composite (All or Nothing Scoring): Low Density Lipoprotein (<100)	NQF #0729 MN Community Measurement	GPRO Web Interface	R	P	P
24.	At Risk Population - Diabetes	Diabetes Composite (All or Nothing Scoring): Blood Pressure <140/90	NQF #0729 MN Community Measurement	GPRO Web Interface	R	P	P
25.	At Risk Population - Diabetes	Diabetes Composite (All or Nothing Scoring): Tobacco Non Use	NQF #0729 MN Community Measurement	GPRO Web Interface	R	P	P
26.	At Risk Population - Diabetes	Diabetes Composite (All or Nothing Scoring): Aspirin Use	NQF #0729 MN Community Measurement	GPRO Web Interface	R	P	P
27.	At Risk Population - Diabetes	Diabetes Mellitus: Hemoglobin A1c Poor Control (>9 percent)	NQF #59 NCQA	GPRO Web Interface	R	P	P
28.	At Risk Population - Hypertension	Hypertension (HTN): Blood Pressure Control	NQF #18 NCQA	GPRO Web Interface	R	P	P

	Domain	Measure Title	NQF Measure #/ Measure Steward	Method of Data Submission	Pay for Performance Phase In		
					R = Reporting Performance Year 1	P=Performance Year 2	Performance Year 3
29.	At Risk Population – Ischemic Vascular Disease	Ischemic Vascular Disease (IVD): Complete Lipid Profile and LDL Control <100 mg/dl	NQF #75 NCQA	GPRO Web Interface	R	P	P
30.	At Risk Population – Ischemic Vascular Disease	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic	NQF #68 NCQA	GPRO Web Interface	R	P	P
31.	At Risk Population – Heart Failure	Heart Failure: Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)	NQF #83 AMA-PCPI	GPRO Web Interface	R	R	P
32.	At Risk Population – Coronary Artery Disease	Coronary Artery Disease (CAD) Composite: All or Nothing Scoring: Drug Therapy for Lowering LDL-Cholesterol	NQF #74 CMS (composite) / AMA-PCPI (individual component)	GPRO Web Interface	R	R	P
33.	At Risk Population – Coronary Artery Disease	Coronary Artery Disease (CAD) Composite: All or Nothing Scoring: Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy for Patients with CAD and Diabetes and/or Left Ventricular Systolic Dysfunction (LVSD)	NQF # 66 CMS (composite) / AMA-PCPI (individual component)	GPRO Web Interface	R	R	P

*We note that this measure has been under development and that finalization of this measure is contingent upon the availability of measures specifications before the establishment of the Shared Savings Program on January 1, 2012.

Table 2: ACO Agreement Period Pay for Performance Phase-In Summary

	Performance Year 1	Performance Year 2	Performance Year 3
Pay for Performance	0	25	32
Pay for Reporting	33	8	1
Total	33	33	33

TABLE 5. SHARED SAVINGS PROGRAM OVERVIEW

Issue	One-Sided Model		Two-Sided Model	
	Proposed	Final	Proposed	Final
Transition to Two-Sided Model	Transition in third year of first agreement period	First agreement period under one-sided model. Subsequent agreement periods under two-sided model	Not Applicable	Not Applicable
Benchmark	Option 1 reset at the start of each agreement period.	Finalizing proposal	Option 1 reset at the start of each agreement period.	Finalizing proposal.
Adjustments for health status and demographic changes	Benchmark expenditures adjusted based on CMS-HCC model.	Historical benchmark expenditures adjusted based on CMS-HCC model. Performance year: newly assigned beneficiaries adjusted using CMS-HCC model; continuously assigned beneficiaries (using demographic factors alone unless CMS-HCC risk scores result in a lower risk score). Updated benchmark adjusted relative to the risk profile of the performance year.	Benchmark expenditures adjusted based on CMS-HCC model.	Historical benchmark expenditures adjusted based on CMS-HCC model. Performance year: newly assigned beneficiaries adjusted using CMS-HCC model; continuously assigned beneficiaries (using demographic factors alone unless CMS-HCC risk scores result in a lower risk score). Updated benchmark adjusted relative to the risk profile of the performance year.
Adjustments for IME and DSH	Include IME and DSH payments	IME and DSH excluded from benchmark and performance expenditures	Include IME and DSH payments	IME and DSH excluded from benchmark and performance expenditures

Issue	One-Sided Model		Two-Sided Model	
	Proposed	Final	Proposed	Final
Payments outside Part A and B claims excluded from benchmark and performance year expenditures;	Exclude GME, PQRS, eRx, and EHR incentive payments for eligible professionals, and EHR incentive payments for hospitals	Finalize proposal	Exclude GME, PQRS, eRx, and EHR incentive payments for eligible professionals, and EHR incentive payments for hospitals	Finalize proposal
Other adjustments	Include other adjustment based in Part A and B claims such as geographic payment adjustments and HVBP payments	Finalize proposal	Include other adjustment based in Part A and B claims such as geographic payment adjustments and HVBP payments	Finalize proposal
Maximum Sharing Rate	Up to 52.5 percent based on the maximum quality score plus incentives for FQHC/RHC participation	Up to 50 percent based on the maximum quality score	Up to 65 percent based on the maximum quality score plus incentives for FQHC/RHC participation	Up to 60 percent based on the maximum quality score
Quality Sharing Rate	Up to 50 percent based on quality performance	Finalizing proposal	Up to 60 percent based on quality performance	Finalizing proposal
Participation Incentives	Up to 2.5 percentage points for inclusion of FQHCs and RHCs	No additional incentives	Up to 5 percentage points for inclusion of FQHCs and RHCs	No additional incentives
Minimum Savings Rate	2.0 percent to 3.9 percent depending on number of assigned beneficiaries	Finalizing proposal based on number of assigned beneficiaries	Flat 2 percent	Finalizing proposal: Flat 2 percent
Minimum Loss Rate	2.0 percent	Shared losses removed from Track 1	2.0 percent	Finalizing proposal
Performance Payment Limit	7.5 percent	10 percent	10 percent	15 percent
Performance payment withhold	25 percent	No withhold	25 percent	No withhold
Shared Savings	Sharing above 2 percent threshold once MSR is exceeded	First dollar sharing once MSR is met or exceeded.	First dollar sharing once MSR is exceeded.	First dollar sharing once MSR is met or exceeded.
Shared Loss Rate	One minus final sharing rate	Shared losses removed from Track 1	One minus final sharing rate	One minus final sharing rate applied to first dollar losses once minimum loss rate is met or exceeded; shared loss rate not to exceed 60 percent

Issue	One-Sided Model		Two-Sided Model	
	Proposed	Final	Proposed	Final
Loss Sharing Limit	5 percent in first risk bearing year (year 3).	Shared losses removed from Track 1.	Limit on the amount of losses to be shared phased in over 3 years: starting at 5 percent in year 1; 7.5 percent in year 2; and 10 percent in year 3. Losses in excess of the annual limit would not be shared.	Finalizing proposal

TABLE 8: ESTIMATED NET FEDERAL SAVINGS, COSTS AND BENEFITS, CYs 2012 THROUGH 2015

	CY 2012	CY 2013	CY 2014	CY 2015	CYs (2012-2015)
Net Federal Savings					
10 th Percentile	-\$30 Million	-\$20 Million	\$10 Million	\$0 Million	\$0 Million
Median	\$20 Million	\$90 Million	\$160 Million	\$190 Million	\$470 Million
90 th Percentile	\$70 Million	\$210 Million	\$320 Million	\$370 Million	\$940 Million
ACO Bonus Payments					
10 th Percentile	\$60 Million	\$180 Million	\$280 Million	\$360 Million	\$890 Million
Median	\$100 Million	\$280 Million	\$410 Million	\$520 Million	\$1,310 Million
90 th Percentile	\$170 Million	\$420 Million	\$600 Million	\$740 Million	\$1,900 Million
Costs	The estimated start-up investment costs for participating ACOs range from \$29 million to \$157 million, with annual ongoing costs ranging from \$63 million to \$342 million, for the anticipated range of 50 to 270 participating ACOs. With the mean participation of ACOs, the estimated aggregate average start-up investment and four year operating costs is \$451 million.				
Benefits	Improved healthcare delivery and quality of care and better communication to beneficiaries through patient centered-care.				

*Note that the percentiles for each individual year do not necessarily sum to equal the percentiles estimated for the total four year impact, in the column labeled CYs 2012-2015, due to the annual and overall distributions being constructed independently.

