

# Performance-Based Payments: Quality Composite and Utilization Measure Scoring

Vermont Blueprint for Health

# **QUALITY MEASURES – BASED ON HSA OUTCOMES**

# Scoring and Payment Eligibility

- Total potential score for each measure: 3
  - Sum of state average threshold point (1 point) and improvement points (1 or 2 points)
- OR
- 3 point for High Achiever
- Total possible points: 12
- Payment eligibility based on total score (3 payment levels):
  - $\geq 3$  points: \$0.07
  - $\geq 6$  points: \$0.13
  - $\geq 9$  points: \$0.25

# Thresholds and Scores

Measure	State Averages	High Achiever †
Adolescent Well Visit	51.8%	64.1%
Developmental Screening, Age Three and Under	57.8%	62.3%
Controlling High Blood Pressure	66.0%	73.0%
Diabetes, Poor Control, HbA1c > 9%	12.0%	11.879%

†High Achiever threshold is the 90<sup>th</sup> percentile or an average or rate that is a statistically significant improvement (4 sigma improvement) over the state average, whichever is higher.

Scoring	Points
Being at or above the state average	1 point
Being at or above High Achiever	3 points

# Improvement and Scores

If not High Achiever , the following change scores apply	Points
Worsening of percent or index score	0 points
Maintaining (or not achieving minimum improvement)	1 point
Improving at or above the minimum improvement	2 points

## Minimum Improvement:

- Absolute percentage difference: Minimum difference 5%
- Note: In order receive Minimum Improvement points for a measure, the sample size for that measure must be greater than or equal to 30 in both the current and prior performance periods.

# Quality Measures: Description of Model

- Based on HSA performance
- Denom. = denominator for sample
  - If denominator is less than 30, receives no points
  - IS = Insufficient Data, less than 30 in denominator
- RY15-16 = Rolling Year July 2015 to June 2016
- CY2016 = Calendar Year Jan. 2016 to Dec. 2016
- Percentage difference = absolute difference between percentages over two measurement periods

# Adjusted\* Adolescent Well Visit, Average Percent

\* adjusted for payer mix, demographics, and health status

HSA	Denom.	RY15-16	Demon.	CY2016	Percentage Difference
Barre	2,964	41.5%	3,506	53.3%	11.8%
Bennington	1,910	39.9%	2,155	50.8%	11.0%
Brattleboro	1,609	40.8%	1,711	51.9%	11.0%
Burlington	7,051	41.1%	8,660	52.5%	11.4%
Middlebury	1,656	40.8%	1,905	52.3%	11.4%
Morrisville	1,691	40.2%	1,923	50.6%	10.4%
Newport	1,363	37.7%	1,490	49.3%	11.5%
Randolph	712	40.1%	805	50.7%	10.6%
Rutland	3,389	40.3%	3,481	51.4%	11.1%
Springfield	1,225	39.6%	1,186	49.7%	10.1%
St. Albans	2,086	39.9%	2,394	51.2%	11.3%
St. Johnsbury	1,706	40.3%	1,765	51.5%	11.2%
White River Jct	1,977	41.5%	2,152	52.6%	11.1%

# Adjusted\* Developmental Screening, Age Three and Under, Average Percent

\* adjusted for payer mix, demographics, and health status

HSA	Denom.	RY15-16	Demon.	CY2016	Percentage Difference
Barre	1,172	58.0%	1,105	62.91%	4.9%
Bennington	718	46.5%	697	50.89%	4.4%
Brattleboro	686	50.3%	640	53.68%	3.4%
Burlington	3,261	60.8%	2,988	64.27%	3.5%
Middlebury	701	55.8%	648	59.25%	3.5%
Morrisville	594	52.8%	575	54.08%	1.3%
Newport	471	33.7%	425	39.86%	6.1%
Randolph	287	42.8%	276	52.51%	9.7%
Rutland	1,268	48.6%	1,164	53.02%	4.4%
Springfield	391	46.2%	256	49.72%	3.6%
St. Albans	922	50.4%	932	52.60%	2.2%
St. Johnsbury	594	46.6%	565	52.48%	5.8%
White River Jct	609	55.9%	605	59.69%	3.8%



# Adjusted\* Controlling High Blood Pressure, Average Percent

\* adjusted for payer mix, demographics, and health status

HSA	Denom.	RY15-16	Demon.	CY2016	Percentage Difference
Barre	4,880	66.5%	5,939	66.15%	-0.3%
Bennington	1,348	66.5%	1,496	66.28%	-0.2%
Brattleboro	1,323	65.9%	1,513	65.81%	-0.1%
Burlington	6,169	66.2%	10,005	66.04%	-0.1%
Middlebury	509	66.6%	558	66.51%	-0.1%
Morrisville	394	66.7%	1,088	65.98%	-0.7%
Newport	2,279	65.7%	2,984	65.48%	-0.2%
Randolph	119	67.0%	126	66.56%	-0.4%
Rutland	584	66.7%	722	66.42%	-0.3%
Springfield	70	66.1%	2,333	65.77%	-0.3%
St. Albans	3,790	66.2%	3,462	65.93%	-0.3%
St. Johnsbury	273	66.6%	1,199	65.69%	-0.90%
White River Jct	196	66.4%	289	66.20%	-0.2%

# Adjusted\* Diabetes, Poor Control, Hb A1c > 9%, Average Percent

\* adjusted for payer mix, demographics, and health status

HSA	Denom.	RY15-16	Demon.	CY2016	Percentage Difference
Barre	1590	11.8%	1,769	11.883%	0.1%
Bennington	490	12.8%	456	11.878%	-1.0%
Brattleboro	417	13.6%	436	12.97%	-0.6%
Burlington	1003	11.9%	2,101	11.52%	-0.4%
Middlebury	137	11.8%	169	12.40%	0.5%
Morrisville	201	11.8%	476	12.07%	0.3%
Newport	845	13.2%	1,140	12.41%	-0.8%
Randolph	34	11.1%	43	12.38%	1.3%
Rutland	72	8.6%	107	12.03%	3.4%
Springfield	15	14.4%	858	12.39%	-2.0%
St. Albans	1073	12.7%	554	11.91%	-0.8%
St. Johnsbury	34	13.7%	346	12.80%	-0.9%
White River Jct	42	12.4%	60	12.55%	0.18%

# Measure Scores Using Absolute Percentage Change Methodology

HSA	Adolescent	Development	Hypertension	Diabetes
Barre	3	3	1	1
Bennington	2	1	1	3
Brattleboro	3	1	0	1
Burlington	3	3	1	3
Middlebury	3	2	1	0
Morrisville	2	1	0	0
Newport	2	2	0	1
Randolph	2	2	1	0
Rutland	2	1	1	0
Springfield	2	1	0	0
St. Albans	2	1	0	2
St. Johnsbury	2	2	0	1
White River Jct	3	2	1	0

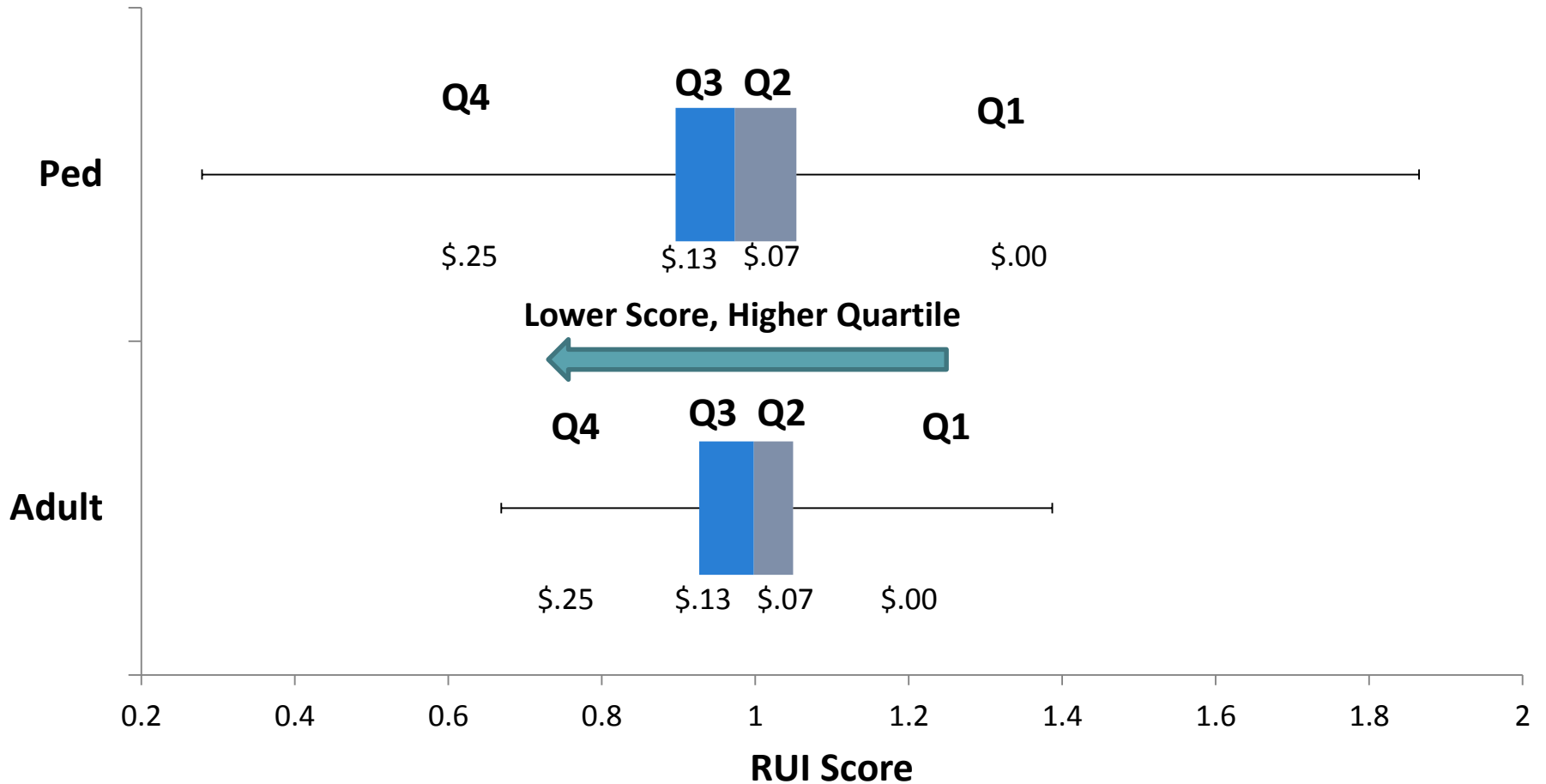
# Total Scores and Payments Using Absolute Percentage Change Methodology

HSA	Total Score	Eligible payment amount	Population Distribution	Statewide Weighted Average Payment
Barre	8	\$0.13	10.7%	\$0.14
Bennington	7	\$0.13	5.9%	
Brattleboro	5	\$0.07	4.8%	
Burlington	10	\$0.25	30.4%	
Middlebury	6	\$0.13	4.9%	
Morrisville	3	\$0.07	6.3%	
Newport	5	\$0.07	4.6%	
Randolph	5	\$0.07	2.7%	
Rutland	4	\$0.07	9.8%	
Springfield	3	\$0.07	3.7%	
St. Albans	5	\$0.07	7.0%	
St. Johnsbury	5	\$0.07	4.3%	
White River Jct	6	\$0.13	4.9%	

**UTILIZATION MEASURE –  
BASED ON PRACTICE TOTAL  
RESOURCE USE INDEX SCORE**

# Utilization Quartile Ranges

\*Q1, Q2, & Q3 are Quartile Thresholds



# Utilization Quartile Ranges

Quartile	Adult Quartile Range	Ped. Quartile Range	Payment Eligibility
Q4	$\leq 0.934$	$\leq 0.899$	\$0.25
Q3	0.935 - 0.986	0.900 - 0.989	\$0.13
Q2	0.987 - 1.045	0.990 - 1.077	\$0.07
Q1	$\geq 1.046$	$\geq 1.078$	\$0.00

# Utilization – Based on Practice Performance

- Total Resource Use Index (RUI) Score
  - In Blueprint practice profiles: lower right hand corner table on page 2 in adult and pediatric profiles
  - Improvement measurements from one period to the next are not available due to nature of index scoring (i.e. an improvement for one practice corresponds with worsening for another practice)



# Index Scoring by Practice Population

- Most practices had both pediatric and adult populations, each with separate RUI
  - RUI associated with majority population used for assigning payment unless minority population made up more than 25% of practice population; then used better RUI for payment.
  - Only 4 practices had minority populations that made up more than 25% of the total practice population AND had a higher RUI score.
  - PMPM applied to total practice population to calculate total monthly payments

# Summary of Performance and Total PMPM Payments

<b>Statewide Average PMPM – Utilization</b>	<b>\$0.11</b>
<b>Statewide Average PMPM – Quality</b>	<b>\$0.13</b>
<b>Combined Statewide Average PMPM</b>	<b>\$0.24</b>
<b>Performance + Base Payment</b>	<b>\$3.24</b>