

Quality performance results are based on the CMS Web Interface collection type.

Measure #	Measure Title	Collection Type	Performance Rate	Current Year Mean Performance Rate (Shared Savings Program ACOs)
321	CAHPS for MIPS	CAHPS for MIPS Survey	8.35	6.67
479*	Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Groups	Administrative Claims	0.1693	0.1517
484*	Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions (MCC)	Administrative Claims	-	37
318	Falls: Screening for Future Fall Risk	CMS Web Interface	92.37	88.99
110	Preventative Care and Screening: Influenza Immunization	CMS Web Interface	85.79	68.6
226	Preventative Care and Screening: Tobacco Use: Screening and Cessation Intervention	CMS Web Interface	100	79.98
113	Colorectal Cancer Screening	CMS Web Interface	90.24	77.81
112	Breast Cancer Screening	CMS Web Interface	90.66	80.93
438	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	CMS Web Interface	87.84	86.5
370	Depression Remission at Twelve Months	CMS Web Interface	11.11	17.35
001*	Diabetes: Hemoglobin A1c (HbA1c) Poor Control	CMS Web Interface	8	9.44
134	Preventative Care and Screening: Screening for Depression and Follow-up Plan	CMS Web Interface	88.12	81.46
236	Controlling High Blood Pressure	CMS Web Interface	90.49	79.49
CAHPS-1	Getting Timely Care, Appointments, and Information	CAHPS for MIPS Survey	87.43	83.7
CAHPS-2	How Well Providers Communicate	CAHPS for MIPS Survey	95.64	93.96
CAHPS-3	Patient's Rating of Provider	CAHPS for MIPS Survey	93.35	92.43
CAHPS-4	Access to Specialists	CAHPS for MIPS Survey	74.96	75.76
CAHPS-5	Health Promotion and Education	CAHPS for MIPS Survey	74.62	65.48
CAHPS-6	Shared Decision Making	CAHPS for MIPS Survey	64.06	62.31

CAHPS-7	Health Status and Functional Status	CAHPS for MIPS Survey	74.39	74.14
CAHPS-8	Care Coordination	CAHPS for MIPS Survey	87.98	85.89
CAHPS-9	Courteous and Helpful Office Staff	CAHPS for MIPS Survey	93.03	92.89
CAHPS-11	Stewardship of Patient Resources	CAHPS for MIPS Survey	27.27	26.98

For previous years' Financial and Quality Performance Results, please visit: [Data.cms.gov](https://data.cms.gov)

*For Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%) [Quality ID #001], Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Eligible Clinician Groups [Measure #479], and Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions (MCC) [Measure #484], a lower performance rate indicates better measure performance.

*For Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions (MCC) [Measure #484], patients are excluded if they were attributed to Qualifying Alternative Payment Model (APM) Participants (QPs). Most providers participating in Track E and ENHANCED track ACOs are QPs, and so performance rates for Track E and ENHANCED track ACOs may not be representative of the care provided by these ACOs' providers overall. Additionally, many of these ACOs do not have a performance rate calculated due to not meeting the minimum of 18 beneficiaries attributed to non-QP providers.