

Clinical Efficiencies Performance Summary, SFY 2021: All MCOs

	Total withheld ¹	Percent earned	Total earned	Total unearned
M4	\$ 14,434,566.84	75.52%	\$ 10,900,689.60	\$ (3,533,877.24)
CCC+	\$ 15,983,681.28	68.17%	\$ 10,895,391.98	\$ (5,088,289.30)
<i>Total</i>	<i>\$ 30,418,248.12</i>	<i>71.65%</i>	<i>\$ 21,796,081.58</i>	<i>\$ (8,622,166.54)</i>

By-measure performance breakdown

Program	Measure	Numerator	Denominator	MCO Rate ²	Percent earned	Measure weight	Withhold available	Withhold earned
M4	PPA	3,608	14,516,862	0.249	64.86%	35.00%	\$ 5,052,098.40	\$ 3,276,906.78
M4	PPED	218,849	15,302,448	14.30	100.00%	47.00%	\$ 6,784,246.42	\$ 6,784,246.42
M4	Readmissions	4,595	69,389	6.62%	32.31%	18.00%	\$ 2,598,222.03	\$ 839,536.41
CCC+	PPA	3,706	1,491,678	2.484	86.35%	61.00%	\$ 9,750,045.58	\$ 8,419,143.72
CCC+	PPED	47,621	1,589,795	29.95	100.00%	5.00%	\$ 799,184.06	\$ 799,184.06
CCC+	Readmissions	4,845	26,329	18.40%	30.86%	34.00%	\$ 5,434,451.64	\$ 1,677,064.20

1. Total withheld represents 0.25% of capitation payments made to all MCOs in SFY 2021.

2. Final rates are determined per specifications from DMAS website. Final rates for PPA and PPED = Numerator / Denominator * 1000.

Potentially Preventable Hospital Admissions (PPA) - All MCOs

Commonwealth Coordinated Care Plus - Performance Target

All MCOs SFY21 ³ PPA Measure Rate	Year	Percent Improvement	Corresponding PPA Rate ²	Percent of PPA Weighted Withhold Earned	Percent of Total Withhold Earned
2.484	SFY 2021	2.50%	2.868	25%	15.3%
All MCOs Base Year (CY19) PPA Measure Rate		5.00%	2.794	50%	30.5%
		7.50%	2.721	75%	45.8%
		(Target) 10%	2.647	100%	61.0%
	Annual Target Percent Improvement ⁵	2.50%	2.581	25%	15.3%
10%	SFY 2022	5.00%	2.515	50%	30.5%
Measure weight ¹ within threshold		7.50%	2.449	75%	45.8%
		(Target) 10%	2.383	100%	61.0%
		<p>Legend: PPA* (61%), PPED (5%), Readmissions (34%)</p>	2.50%	2.323	25%
	SFY 2023 ⁴		5.00%	2.264	50%
7.50%			2.204	75%	45.8%
(Target) 10%			2.144	100%	61.0%

1. Measure weights represent the approximate portion of inefficiencies identified in the base CE analysis conducted by Mercer.
2. These rates are rounded for purposes in this report.
3. Rates reflect SFY21 (July 2020 - June 2021) performance.
4. SFY 2023 targets in this report are for illustrative purposes only. Formal targets will be set in advance of SFY 2023.
5. DMAS will cap the PPA annual performance improvement target at 10% for SFY 2022.

Potentially Preventable Hospital Admissions (PPA) Demographics - All MCOs

Commonwealth Coordinated Care Plus - SFY21 Performance

PPA rate (SFY21) ¹	PPA rate (SFY21) Numerator ²	PPA rate (SFY21) Denominator			Potentially Avoidable Admissions	Percent of total	
2.484	3,706	1,491,678					
Rate by Region 							
Rate by Age 							
Rate by Expansion 							
				Code	Description		
				PQI 01	DIABETES S-T	515	13.9%
				PQI 03	DIABETES L-T	438	11.8%
				PQI 05	COPD/ASTHMA	571	15.4%
				PQI 07	HYPERTENSION	140	3.8%
				PQI 08	HEART FAILURE	1238	33.4%
				PQI 11	COMMUNITY-ACQUIRED PNEU	254	6.9%
				PQI 12	UTI	153	4.1%
				PQI 14	UNCONTROLLED DIABETES	136	3.7%
				PQI 15	ASTHMA IN YOUNGER ADULT	28	0.8%
				PQI 16	LOWER-EXTREM AMPUTAT W/	159	4.3%
				PDI 14	ASTHMA	15	0.4%
				PDI 15	DIABETES S-T COMPL	17	0.5%
				PDI 16	GASTROENTERITIS	21	0.6%
				PDI 18	UTI	21	0.6%
				Total		3,706	100.0%

Notes

1. Rates represent SFY21 performance (July 2020 - June 2021).
2. Numerator is the total count of PPAs. Denominator is qualifying member months.

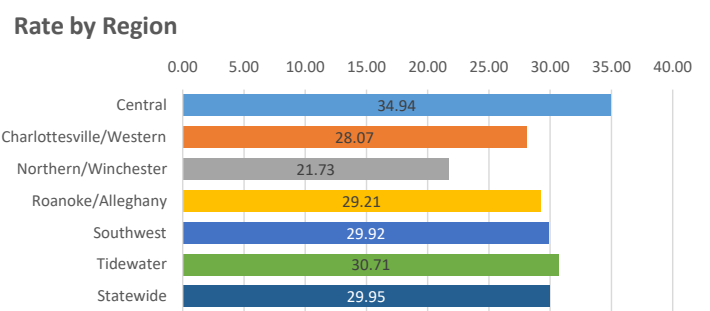
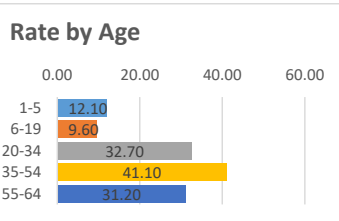
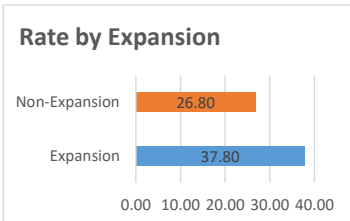
Potentially Preventable Emergency Department (PPED) Visits - All MCOs

Commonwealth Coordinated Care Plus - Performance Target

All MCOs SFY21 ³ PPED Measure Rate		Year	Percent Improvement	Corresponding PPED Rate ²	Percent of PPED Weighted Withhold Earned	Percent of Total Withhold Earned
29.95		SFY 2021	0.25%	42.97	25%	1.3%
All MCOs Base Year (CY19) PPED Measure Rate			0.50%	42.86	50%	2.5%
			0.75%	42.76	75%	3.8%
			(Target) 1%	42.65	100%	5.0%
		43.08		SFY 2022	0.25%	42.54
Annual Target Percent Improvement		0.50%	42.44		50%	2.5%
		0.75%	42.33		75%	3.8%
		(Target) 1%	42.22		100%	5.0%
		1%		SFY 2023 ⁴	0.25%	42.12
Measure weight ¹ within threshold		0.50%	42.01		50%	2.5%
		0.75%	41.91		75%	3.8%
		(Target) 1%	41.80		100%	5.0%
		<p>Legend: PPA (61%), PPED* (5%), Readmissions (34%)</p>		<p>1. Measure weights represent the approximate portion of inefficiencies identified in the base CE analysis conducted by Mercer.</p> <p>2. These rates are rounded for purposes in this report.</p> <p>3. Rates reflect SFY21 (July 2020 - June 2021) performance.</p> <p>4. SFY 2023 targets in this report are for illustrative purposes only. Formal targets will be set in advance of SFY 2023.</p>		

Potentially Preventable Emergency Department (PPED) Visits Demographics - All MCOs

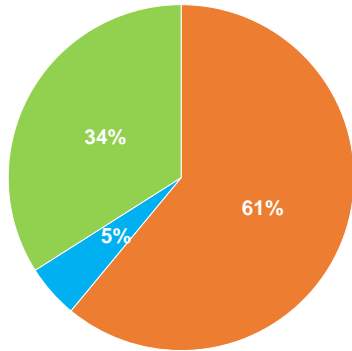
Commonwealth Coordinated Care Plus - SFY21 Performance

PPED Rate (SFY21) ¹	PPED Rate (SFY21) Numerator ²	PPED Rate (SFY21) Denominator ²	Rank	Code	Description	PPED Visits	Percent of total
29.95	47,621	1,589,795					
Rate by Region 							
Rate by Age 							
Rate by Expansion 							
Notes 1. Rates represent SFY21 performance (July 2020 - June 2021). 2. Numerator is the total PPED visits, adjusted for preventability (%) and rounded to nearest whole number. Denominator is qualifying member months.							
			1	N390	Urinary tract infection, site not specified	2005	4.2%
			2	M545	Low back pain	1725	3.6%
			3	R112	Nausea with vomiting, unspecified	1625	3.4%
			4	R109	Unspecified abdominal pain	1402	2.9%
			5	J069	Acute upper respiratory infection, unspecified	1381	2.9%
			6	J441	Chronic obstructive pulmonary disease with (acute) exacerbation	1348	2.8%
			7	E1165	Type 2 diabetes mellitus with hyperglycemia	1206	2.5%
			8	R05	Cough	1079	2.3%
			9	R42	Dizziness and giddiness	984	2.1%
			10	R1084	Generalized abdominal pain	920	1.9%
			11	K047	Periapical abscess without sinus	862	1.8%
			12	J029	Acute pharyngitis, unspecified	787	1.7%
			13	K529	Noninfective gastroenteritis and colitis, unspecified	762	1.6%
			14	R1013	Epigastric pain	707	1.5%
			15	I10	Essential (primary) hypertension	698	1.5%
			16	J189	Pneumonia, unspecified organism	679	1.4%
			17	J45901	Unspecified asthma with (acute) exacerbation	633	1.3%
			18	M542	Cervicalgia	626	1.3%
			19	N3000	Acute cystitis without hematuria	624	1.3%
			20	J209	Acute bronchitis, unspecified	608	1.3%
			21	M25561	Pain in right knee	506	1.1%
			22	R197	Diarrhea, unspecified	494	1.0%
			23	R51	Headache	488	1.0%
			24	Z760	Encounter for issue of repeat prescription	484	1.0%
			25	M25562	Pain in left knee	460	1.0%
				Total		23,093	48.5%

Hospital Readmissions - All MCOs

Commonwealth Coordinated Care Plus - Performance Target

All MCOs SFY21 ³ Readmissions Measure Rate	Year	Percent Improvement	Corresponding Readmissions Rate ²	Percent of Readmissions Weighted Withhold Earned	Percent of Total Withhold Earned
18.40%	SFY 2021	2.00%	18.40%	25%	8.5%
All MCOs Base Year (CY19) Readmissions Measure Rate		4.00%	18.02%	50%	17.0%
		6.00%	17.65%	75%	25.5%
		(Target) 8%	17.27%	100%	34.0%
Annual Target Percent Improvement	SFY 2022	2.00%	16.93%	25%	8.5%
8%		4.00%	16.58%	50%	17.0%
Measure weight ¹ within threshold		6.00%	16.24%	75%	25.5%
		(Target) 8%	15.89%	100%	34.0%
	SFY 2023 ⁴	2.00%	15.57%	25%	8.5%
4.00%		15.25%	50%	17.0%	
6.00%		14.94%	75%	25.5%	
(Target) 8%		14.62%	100%	34.0%	



1. Measure weights represent the approximate portion of inefficiencies identified in the base CE analysis conducted by Mercer.
2. These rates are rounded for purposes in this report.
3. Rates reflect SFY21 (July 2020 - June 2021) performance.
4. SFY 2023 targets in this report are for illustrative purposes only. Formal targets will be set in advance of SFY 2023.

Hospital Readmissions Demographics - All MCOs

Commonwealth Coordinated Care Plus - SFY21 Performance

Readmissions Rate (SFY21) ¹	Readmissions Rate (SFY21) Numerator ²	Readmissions Rate (SFY21) Denominator ²	Rank	Code	Description	Readmissions	Percent of total
18.40%	4,845	26,329					
Rate by Region 							
Rate by Age 							
Rate by Expansion 							
Notes 1. Rates represent SFY21 performance (July 2020 - June 2021). 2. Numerator is total qualifying readmissions. Denominator is qualifying admissions.							
			1	F25	Schizoaffective disorders	552	11.4%
			2	F33	Major depressive disorder, recurrent	303	6.3%
			3	F31	Bipolar disorder	300	6.2%
			4	A41	Other sepsis	288	5.9%
			5	F10	Alcohol related disorders	266	5.5%
			6	I13	Hypertensive heart and chronic kidney disease	185	3.8%
			7	F20	Schizophrenia	159	3.3%
			8	E11	Type 2 diabetes mellitus	119	2.5%
			9	I11	Hypertensive heart disease	111	2.3%
			10	D57	Sickle-cell disorders	100	2.1%
			11	E10	Type 1 diabetes mellitus	96	2.0%
			12	J96	Respiratory failure, not elsewhere classified	91	1.9%
			13	F32	Major depressive disorder, single episode	71	1.5%
			14	K70	Alcoholic liver disease	69	1.4%
			15	J44	Other chronic obstructive pulmonary disease	69	1.4%
			16	N17	Acute kidney failure	59	1.2%
			17	K85	Acute pancreatitis	59	1.2%
			18	T82	Complications of cardiac and vascular prosth dev/grft	58	1.2%
			19	E87	Other disorders of fluid, electrolyte and acid-base balance	56	1.2%
			20	T81	Complications of procedures, not elsewhere classified	53	1.1%
			21	T83	Complications of genitourinary prosth dev/grft	47	1.0%
			22	J18	Pneumonia, unspecified organism	46	0.9%
			23	F19	Other psychoactive substance related disorders	44	0.9%
			24	I63	Cerebral infarction	39	0.8%
			25	U07	COVID-19	39	0.8%
				Total		3,279	67.7%

Potentially Preventable Hospital Admissions (PPA) - All MCOs

Medallion 4.0 - Performance Target

All MCOs SFY21 ³ PPA Measure Rate	Year	Percent Improvement	Corresponding PPA Rate ²	Percent of PPA Weighted Withhold Earned	Percent of Total Withhold Earned	
0.249	SFY 2021	2.50%	0.267	25%	8.8%	
All MCOs Base Year (CY19) PPA Measure Rate		5.00%	0.260	50%	17.5%	
		7.50%	0.253	75%	26.3%	
		(Target) 10%	0.246	100%	35.0%	
	0.274	SFY 2022	2.50%	0.240	25%	8.8%
Annual Target Percent Improvement ⁵	5.00%		0.234	50%	17.5%	
	10%		7.50%	0.228	75%	26.3%
	Measure weight ¹ within threshold		(Target) 10%	0.222	100%	35.0%
		<p>Legend: PPA* (35%), PPED (47%), Readmissions (18%)</p>	2.50%	0.216	25%	8.8%
SFY 2023 ⁴			5.00%	0.211	50%	17.5%
			7.50%	0.205	75%	26.3%
	(Target) 10%		0.200	100%	35.0%	

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4. SFY 2023 targets in this report are for illustrative purposes only. Formal targets will be set in advance of SFY 2023.
5. DMAS will cap the PPA annual performance improvement target at 10% for SFY 2022.

Potentially Preventable Hospital Admissions (PPA) Demographics - All MCOs

Medallion 4.0 - SFY21 Performance

PPA rate (SFY21) ¹	PPA rate (SFY21) Numerator ²	PPA rate (SFY21) Denominator	Code	Description	Potentially Avoidable Admissions	Percent of total
0.249	3,608	14,516,862				
Rate by Region 			PQI 01	DIABETES S-T	975	27.0%
Rate by Age 			PQI 03	DIABETES L-T	332	9.2%
Rate by Expansion 			PQI 05	COPD/ASTHMA	245	6.8%
			PQI 07	HYPERTENSION	204	5.7%
			PQI 08	HEART FAILURE	730	20.2%
			PQI 11	COMMUNITY-ACQUIRED PNEU	219	6.1%
			PQI 12	UTI	162	4.5%
			PQI 14	UNCONTROLLED DIABETES	113	3.1%
			PQI 15	ASTHMA IN YOUNGER ADULT	91	2.5%
			PQI 16	LOWER-EXTREM AMPUTAT W/	112	3.1%
			PDI 14	ASTHMA	141	3.9%
			PDI 15	DIABETES S-T COMPL	167	4.6%
			PDI 16	GASTROENTERITIS	50	1.4%
			PDI 18	UTI	67	1.9%
			Total		3,608	100.0%

Notes

- Rates represent SFY21 performance (July 2020 - June 2021).
- Numerator is the total count of PPAs. Denominator is qualifying member months.

Potentially Preventable Emergency Department (PPED) Visits - All MCOs

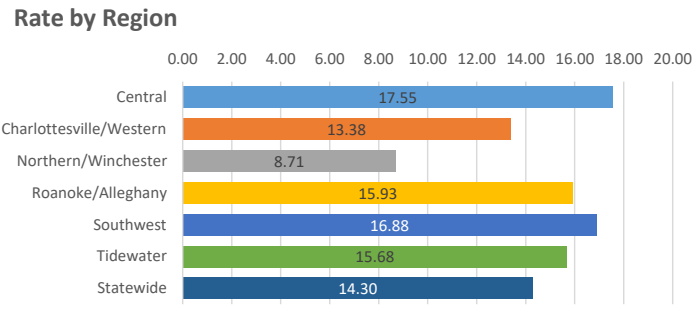
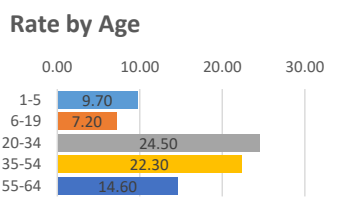
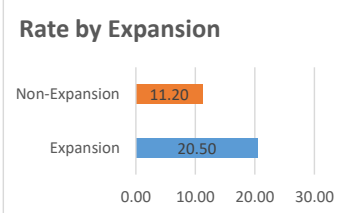
Medallion 4.0 - Performance Target

All MCOs SFY21 ³ PPED Measure Rate	Year	Percent Improvement	Corresponding PPED Rate ²	Percent of PPED Weighted Withhold Earned	Percent of Total Withhold Earned	
14.30	SFY 2021	0.75%	26.81	25%	11.8%	
All MCOs Base Year (CY19) PPED Measure Rate		1.50%	26.61	50%	23.5%	
		2.25%	26.41	75%	35.3%	
		(Target) 3%	26.21	100%	47.0%	
	27.02	SFY 2022	0.75%	26.01	25%	11.8%
Annual Target Percent Improvement	1.50%		25.81	50%	23.5%	
	3%		25.62	75%	35.3%	
	Measure weight ¹ within threshold		(Target) 3%	25.42	100%	47.0%
		<p>Measure weight¹ within threshold</p> <p>PPA 35% PPED* 47% Readmissions 18%</p>	SFY 2023 ⁴	0.75%	25.23	25%
1.50%				25.04	50%	23.5%
2.25%				24.85	75%	35.3%
(Target) 3%	24.66			100%	47.0%	

1. Measure weights represent the approximate portion of inefficiencies identified in the base CE analysis conducted by Mercer.
2. These rates are rounded for purposes in this report.
3. Rates reflect SFY21 (July 2020 - June 2021) performance.
4. SFY 2023 targets in this report are for illustrative purposes only. Formal targets will be set in advance of SFY 2023.

Potentially Preventable Emergency Department (PPED) Visits Demographics - All MCOs

Medallion 4.0 - SFY21 Performance

PPED Rate (SFY21) ¹	PPED Rate (SFY21) Numerator ²	PPED Rate (SFY21) Denominator ²	Rank	Code	Description	PPED Visits	Percent of total
14.30	218,849	15,302,448					
Rate by Region 							
Rate by Age 							
Rate by Expansion 							
Notes 1. Rates represent SFY21 performance (July 2020 - June 2021). 2. Numerator is the total PPED visits, adjusted for preventability (%) and rounded to nearest whole number. Denominator is qualifying member months.							
			1	J069	Acute upper respiratory infection, unspecified	12619	5.8%
			2	N390	Urinary tract infection, site not specified	8929	4.1%
			3	R112	Nausea with vomiting, unspecified	7787	3.6%
			4	J029	Acute pharyngitis, unspecified	7350	3.4%
			5	M545	Low back pain	6111	2.8%
			6	R05	Cough	5612	2.6%
			7	R109	Unspecified abdominal pain	5197	2.4%
			8	K047	Periapical abscess without sinus	4419	2.0%
			9	K529	Noninfective gastroenteritis and colitis, unspecified	3777	1.7%
			10	R42	Dizziness and giddiness	3484	1.6%
			11	J45901	Unspecified asthma with (acute) exacerbation	3418	1.6%
			12	N760	Acute vaginitis	3393	1.6%
			13	R1084	Generalized abdominal pain	3209	1.5%
			14	R1013	Epigastric pain	3087	1.4%
			15	R21	Rash and other nonspecific skin eruption	3045	1.4%
			16	J020	Streptococcal pharyngitis	2856	1.3%
			17	N3000	Acute cystitis without hematuria	2740	1.3%
			18	M542	Cervicalgia	2617	1.2%
			19	R1031	Right lower quadrant pain	2585	1.2%
			20	R1110	Vomiting, unspecified	2530	1.2%
			21	I10	Essential (primary) hypertension	2414	1.1%
			22	R197	Diarrhea, unspecified	2386	1.1%
			23	J209	Acute bronchitis, unspecified	2235	1.0%
			24	R51	Headache	2220	1.0%
			25	N939	Abnormal uterine and vaginal bleeding, unspecified	2177	1.0%
				Total		106,197	48.5%

Hospital Readmissions - All MCOs

Medallion 4.0 - Performance Target

All MCOs SFY21 ³ Readmissions Measure Rate	Year	Percent Improvement	Corresponding Readmissions Rate ²	Percent of Readmissions Weighted Withhold Earned	Percent of Total Withhold Earned
6.62%	SFY 2021	1.25%	6.35%	25%	4.5%
All MCOs Base Year (CY19) Readmissions Measure Rate 6.43%		2.50%	6.27%	50%	9.0%
		3.75%	6.19%	75%	13.5%
		(Target) 5%	6.11%	100%	18.0%
	Annual Target Percent Improvement 5%	SFY 2022	1.25%	6.03%	25%
2.50%			5.96%	50%	9.0%
3.75%			5.88%	75%	13.5%
(Target) 5%			5.80%	100%	18.0%
Measure weight¹ within threshold <p style="text-align: center;"> ■ PPA ■ PPED ■ Readmissions* </p>	SFY 2023 ⁴	1.25%	5.73%	25%	4.5%
		2.50%	5.66%	50%	9.0%
		3.75%	5.59%	75%	13.5%
		(Target) 5%	5.51%	100%	18.0%

1. Measure weights represent the approximate portion of inefficiencies identified in the base CE analysis conducted by Mercer.

2. These rates are rounded for purposes in this report.

3. Rates reflect SFY21 (July 2020 - June 2021) performance.

4. SFY 2023 targets in this report are for illustrative purposes only. Formal targets will be set in advance of SFY 2023.

Hospital Readmissions Demographics - All MCOs

Medallion 4.0 - SFY21 Performance

Readmissions Rate (SFY21) ¹	Readmissions Rate (SFY21) Numerator ²	Readmissions Rate (SFY21) Denominator ²	Rank	Code	Description	Readmissions	Percent of total
6.62%	4,595	69,389					
Rate by Region							
Rate by Age							
Rate by Expansion							
Notes 1. Rates represent SFY21 performance (July 2020 - June 2021). 2. Numerator is total qualifying readmissions. Denominator is qualifying admissions.							
			1	F33	Major depressive disorder, recurrent	448	9.7%
			2	F31	Bipolar disorder	345	7.5%
			3	F10	Alcohol related disorders	321	7.0%
			4	F32	Major depressive disorder, single episode	200	4.4%
			5	F25	Schizoaffective disorders	175	3.8%
			6	A41	Other sepsis	159	3.5%
			7	E10	Type 1 diabetes mellitus	119	2.6%
			8	F34	Persistent mood [affective] disorders	90	2.0%
			9	K70	Alcoholic liver disease	85	1.8%
			10	T81	Complications of procedures, not elsewhere classified	83	1.8%
			11	E11	Type 2 diabetes mellitus	80	1.7%
			12	K85	Acute pancreatitis	76	1.7%
			13	O99	Oth maternal diseases classd elsw but compl preg/chldbrth	75	1.6%
			14	I13	Hypertensive heart and chronic kidney disease	69	1.5%
			15	F20	Schizophrenia	68	1.5%
			16	F11	Opioid related disorders	66	1.4%
			17	O86	Other puerperal infections	59	1.3%
			18	F43	Reaction to severe stress, and adjustment disorders	52	1.1%
			19	N17	Acute kidney failure	49	1.1%
			20	I11	Hypertensive heart disease	44	1.0%
			21	U07	COVID-19	41	0.9%
			22	F15	Other stimulant related disorders	39	0.8%
			23	F19	Other psychoactive substance related disorders	36	0.8%
			24	F39	Unspecified mood [affective] disorder	35	0.8%
			25	E87	Other disorders of fluid, electrolyte and acid-base balance	35	0.8%
				Total		2,849	62.0%