

BENCHMARK MEANS AND STANDARD DEVIATIONS FOR MEASURES INCLUDED IN THE PERFORMANCE YEAR 2012 QUALITY AND RESOURCE USE REPORTS

Administrative Claims-Based Quality Indicators for Groups that Did Not Participate in the Physician Quality Reporting System Group Practice Reporting Option, the Medicare Shared Savings Program, or the Pioneer ACO Model in 2012

Performance Measures	Groups with 25 or More Eligible Providers		Groups with 100 or More Eligible Providers	
	Mean	Standard Deviation	Mean	Standard Deviation
Osteoporosis Management in Women \geq 67 Who Had a Fracture	18.9	6.5	19.1	6.2
Use of Spirometry Testing to Diagnose COPD	31.6	9.4	31.9	8.0
Dilated Eye Exam for Beneficiaries \leq 75 with Diabetes	55.9	9.0	56.6	8.6
Hba1c Testing for Beneficiaries \leq 75 with Diabetes	87.8	8.8	88.1	8.8
Nephropathy Screening Test or Evidence of Existing Nephropathy for Beneficiaries \leq 75 with Diabetes	77.0	7.4	78.5	6.5
Lipid Profile for Beneficiaries \leq 75 with Diabetes	82.3	11.0	82.4	11.3
Lipid Profile for Beneficiaries with Ischemic Vascular Disease	77.9	9.3	77.5	9.4
Adherence to Statin Therapy for Beneficiaries with Coronary Artery Disease	66.6	7.5	66.8	7.0
Antidepressant Treatment for Depression:				
1. <i>Acute Phase Treatment (at least 12 weeks)</i>	57.1	8.6	57.1	8.2
2. <i>Continuation Phase Treatment (at least 6 months)</i>	39.9	8.5	39.8	8.1
Lipid Profile for Beneficiaries Who Started Lipid-Lowering Medications	40.4	6.9	39.9	6.6
Breast Cancer Screening for Women Ages 40–69	65.0	8.9	65.7	7.9
Use of High-Risk Medications in the Elderly*				
1. <i>Patients Who Receive At Least One Drug to be Avoided</i>	19.8	5.1	19.4	4.7
2. <i>Patients Who Receive At Least Two Different Drugs to be Avoided</i>	3.6	2.0	3.5	1.8
Lack of Monthly INR Monitoring for Beneficiaries on Warfarin	33.0	7.8	32.5	6.7
Follow-Up After Hospitalization for Mental Illness				
1. <i>Percentage of Patients Receiving Follow-Up Within 30 Days</i>	63.3	12.8	64.1	11.8
2. <i>Percentage of Patients Receiving Follow-Up Within 7 Days</i>	35.6	11.9	36.1	11.3

Care Coordination Quality Indicators

Performance Measures		Groups with 25 or More Eligible Providers		Groups with 100 or More Eligible Providers	
		Mean	Standard Deviation	Mean	Standard Deviation
CMS-1	Acute Conditions Composite	8.4	3.7	8.2	3.2
	<i>PQI-11 Bacterial Pneumonia</i>	12.7	6.0	12.4	4.9
	<i>PQI-12 Urinary Tract Infection</i>	7.6	4.6	7.5	3.9
	<i>PQI-10 Dehydration</i>	4.8	2.5	4.7	2.1
CMS-2	Chronic Conditions Composite	58.5	15.5	58.6	13.0
	<i>Diabetes (composite of 4 indicators)</i>	20.4	12.4	20.5	10.4
	<i>PQI-5 COPD or Asthma</i>	83.4	28.5	82.5	24.0
	<i>PQI-8 Heart Failure</i>	107.6	31.2	108.6	25.8
CMS-3	All-Cause Hospital Readmissions	16.2	1.2	16.1	1.2

Physician Quality Reporting System Quality Indicators for Groups that Participated in the 2012 Group Practice Reporting Option

Performance Measures	Mean	Standard Deviation
COPD-1 COPD: Bronchodilator Therapy	Not Available	Not Available
CAD-1 CAD: Antiplatelet Therapy	82.8	6.0
CAD-2 CAD: Lipid Control	88.8	11.2
CAD-7 CAD: ACE Inhibitor or ARB Therapy for Patients with CAD and Diabetes and/or LVSD	69.0	15.1
DM-2 DM: Hemoglobin A1c Poor Control in DM (>9.0)	21.3	12.4
DM-3 DM: High Blood Pressure Control in DM	69.0	6.7
DM-5 DM: LDL-C Control in DM	56.2	9.4
DM-7 DM: Dilated Eye Exam in Diabetic Patient	55.6	18.9
DM-8 DM: Foot Exam	64.3	20.1
DM-10 DM: Hemoglobin A1c Control (< 8.0)	Not Available	Not Available
DM-11 DM: Daily Aspirin Use for Patients with Diabetes and Ischemic Vascular Disease	Not Available	Not Available
DM-12 DM: Tobacco Non-Use	Not Available	Not Available
HF-1 HF: LVEF Assessment	81.6	18.4
HF-2 HF: LVF Testing	88.6	10.1
HF-5 HF: Patient Education	54.9	21.7
HF-6 HF: Beta Blocker Therapy for LVSD	76.7	13.6
HF-7 HF: ACE Inhibitor or ARB Therapy for LVSD	71.2	11.4
HTN-2 HTN: Controlling High Blood Pressure	67.3	9.3
IVD-1 IVD: Complete Lipid Profile and LDL-C Control	Not Available	Not Available
IVD-2 IVD: Use of Aspirin or Another Antithrombotic	81.0	17.0
Prev-5 Prev: Screening Mammography	50.8	11.5
Prev-6 Prev: Colorectal Cancer Screening	48.0	17.2
Prev-8 Prev: Pneumonia Vaccination for Patients \geq 65	52.6	22.9
Prev-7 Prev: Influenza Immunization	Not Available	Not Available
Prev-9 Prev: BMI Screening and Follow-Up	45.2	17.4
Prev-10 Prev: Tobacco Use: Screening and Cessation Intervention	Not Available	Not Available
Prev-11 Prev: Screening for High Blood Pressure	Not Available	Not Available
Care-1 Medication Reconciliation: Reconciliation After Discharge from an Inpatient Facility	95.1	4.9
Care-2 Falls: Screening for Future Fall Risk	Not Available	Not Available

Not Available: 2012 benchmarks are not available for quality measures without a comparable measure in the year preceding the performance period (2011).

Physician Quality Reporting System Quality Indicators for Groups that Participated in the Medicare Shared Savings Program or the Pioneer ACO Model in 2012

Performance Measures	Mean	Standard Deviation
. CAD Composite (All or Nothing Scoring)	Not Available	Not Available
. CAD-2 CAD: Lipid Control	88.8	11.2
. CAD-7 CAD: ACE Inhibitor or ARB Therapy for Patients with CAD and Diabetes and/or LVSD	69.0	15.1
DM-2 DM: Hemoglobin A1c Poor Control in DM (>9.0)	21.3	12.4
. DM Composite (All or Nothing Scoring)	Not Available	Not Available
. DM-13 DM: High Blood Pressure Control	Not Available	Not Available
. DM-14 DM: LDL-C Control	Not Available	Not Available
. DM-15 DM: Hemoglobin A1c Control (< 8.0)	Not Available	Not Available
. DM-16 DM: Daily Aspirin Use for Patients with Diabetes and Ischemic Vascular Disease	Not Available	Not Available
. DM-17 DM: Tobacco Non-Use	Not Available	Not Available
HF-6 HF: Beta Blocker Therapy for LVSD	76.7	13.6
HTN-2 HTN: Controlling High Blood Pressure	67.3	9.3
IVD-1 IVD: Complete Lipid Profile and LDL-C Control	Not Available	Not Available
IVD-2 IVD: Use of Aspirin or Another Antithrombotic	81.0	17.0
Prev-5 Prev: Screening Mammography	50.8	11.5
Prev-6 Prev: Colorectal Cancer Screening	48.0	17.2
Prev-8 Prev: Pneumonia Vaccination for Patients ≥ 65	52.6	22.9
Prev-7 Prev: Influenza Immunization	Not Available	Not Available
Prev-9 Prev: BMI Screening and Follow-Up	45.2	17.4
Prev-10 Prev: Tobacco Use: Screening and Cessation Intervention	Not Available	Not Available
Prev-11 Prev: Screening for High Blood Pressure	Not Available	Not Available
Care-1 Medication Reconciliation: Reconciliation After Discharge from an Inpatient Facility	95.1	4.9
Care-2 Falls: Screening for Future Fall Risk	Not Available	Not Available

Not Available: 2012 benchmarks are not available for quality measures without a comparable measure in the year preceding the performance period (2011).

Per Capita Costs For Attributed Medicare Beneficiaries

Performance Measures	Groups with 25 or More Eligible Providers		Groups with 100 or More Eligible Providers	
	Mean (\$)	Standard Deviation (\$)	Mean (\$)	Standard Deviation (\$)
All Beneficiaries	10,337	1,857	10,265	1,543
Beneficiaries with Specific Conditions				
Diabetes	14,923	2,841	14,788	2,410
COPD	24,249	4,930	24,153	4,313
Coronary Artery Disease	17,315	3,378	17,265	2,850
Heart Failure	26,189	5,536	26,013	4,776