# MassHealth 2023 Managed Care Plan Quality Performance

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#### Background

In accordance with CFR 438.340, MassHealth annually reports performance on a slate of quality measures identified in its managed care plan (MCP) contracts. Most of the measures are reported by more than one MassHealth program, with 13 measures being reported by three or more MassHealth programs. Measure rates reflect performance in calendar year 2022, with data collection occurring in calendar year 2023.

#### Data Collection

MassHealth receives quality measure and survey data either directly from managed care plans or from analytic vendors who contract with MassHealth to provide data.

- Plan-level rates are presented in tables for each MassHealth managed care program that operated in CY 2022. These include Accountable Care Organizations (ACO), Managed Care Organizations (MCO), the Primary Care Clinician (PCC) Plan, Senior Care Organizations (SCO), One Care plans, and the Massachusetts Behavioral Health Partnership (BH PIHP). In addition to plan-level rates, the tables also present a MassHealth Weighted Mean (MHWM), which is a weighted average and reflects the overall performance of all plans reporting data for that measure. For HEDIS measures, MHWM rates are compared to national HEDIS benchmarks, where such benchmarks are available, with arrows representing performance relative to the benchmarks (for example, ↑ signifies that MHWM performance exceeds a benchmark). HEDIS benchmark data were obtained from the NCQA Quality Compass database (Medicaid and Medicare).
- For HEDIS measures, Plan performance is compared to the 90<sup>th</sup> and 75<sup>th</sup> percentiles for either or both Medicaid and Medicare, as specified below. The 90<sup>th</sup> percentile represents a level of performance that was met or exceeded by the top 10% of Medicaid plans that submitted HEDIS MY 2022 data to NCQA. MassHealth uses the Medicaid 90<sup>th</sup> percentile as the primary benchmark against which plan performance is compared. The Medicaid 75<sup>th</sup> percentile is used to reflect a minimum standard of performance. This percentile represents a level of performance met or exceeded by the top 25% of Medicaid plans that submitted HEDIS MY 2022 data to NCQA. For non-HEDIS measures, benchmark comparisons are not available.
- For non-HEDIS measures, Plan performance is compared to either state-defined or other national benchmarks and are noted where applicable.
- MCO, PCC Plan, BH PIHP, and ACO weighted mean rates are compared to the national Medicaid 90<sup>th</sup> and 75<sup>th</sup> percentiles. (MCO and PCC Plan rates are grouped together in a single weighted mean.)
- SCO and One Care weighted mean rates are compared to both the national Medicaid and the national Medicare 90<sup>th</sup> and 75<sup>th</sup> percentiles (where available).

**Table 1 - MassHealth Public Reporting Measures Slate (By Program)** 

Measure Name	Steward	NQF#	ACO	мсо	PCCP	sco	One Care	BH PIHP
Weasure Warne	Steward	IVQI #	ACO	IVICO	recr		One care	Diffili
		,						
Access to LTS Coordinator	EHS	N/A					Х	
Advanced Care Planning (ACP)	NCQA	0326				Х		
Antidepressant Medication Management (AMM)	NCQA	0105				Х	Х	Х
Asthma Medication Ratio (AMR)	NCQA	1800	Х	Х	Х			
Behavioral Health Community Partners	EHS	N/A	X	X				
Engagement (BH CPE)	NOCA	2272						
Breast Cancer Screening (BCS)	NQCA	2372	.,				Х	
CG- CAHPS	AHRQ	N/A	Х					
Community Tenure (CT)	EHS	N/A	Х	Х				
Controlling High Blood Pressure (CBP)	NCQA	0018	Х	Х	Х	Х	Х	
Childhood Immunization Status (CIS)	NCQA	0038	Х	Х	Х			
Colorectal Cancer Screening (COL)	NCQA	0034				Х	Х	
Depression Remission or Response (DRR)	EHS	N/A	Х					
Diabetes Screening for People with Schizophrenia	NCQA	1932						X
or Bipolar Disorder who are using Antipsychotic								
Medications (SSD)	FUC	N1 / A						
Documentation of Care Plan Goals  ED visits for members 18-65 identified with a	EHS EHS	N/A N/A	Х	X			Х	
diagnosis of serious mental illness, substance	ЕПЭ	IN/A	^	^				
addiction, or co-occurring conditions (ED								
SMI/SUD)								
Follow-up After Emergency Department Visit for	NCQA	3489		Х	Х		Х	Х
Substance Use (FUA)								
Follow-up After Emergency Department Visit for	NCQA	3488	Х	Х	Х		Х	Х
Mental Illness (FUM)								
Follow-Up After Hospitalization for Mental Illness	NCQA	0576	X	X	X	X	X	X
(FUH)	NCOA	0100						V
Follow-up Care for Children Prescribed ADHD Medication (ADD)	NCQA	0108						X
Health Related Social Needs Screening (HRSN)	EHS	N/A	Х					
Hemoglobin A1c Control for Patients with	NCQA	XXX	X	Х	Х		X	
Diabetes (HBD)	Near	XXX	_ ^	^	^		^	
Immunization for Adolescents (IMA)	NCQA	1407	Х	Х	Х			
Influenza Vaccination (FVO)	NCQA					Х	Х	
Initiation and Engagement of Substance Use	NCQA	0004	Х	Х	Х		Х	Х
Disorder Treatment (IET)								
Long Term Services and Supports Community	EHS	N/A	Х	Х				
Partner Engagement (LTSS CPE)								
Medicare Advantage Prescription Drug Plan	CMS					X	X	
CAHPS								
Timely Assessment	CMS	N/A					Х	
Metabolic Monitoring for Children and	NCQA	2800	Х	Х	Х			Х
Adolescents on Antipsychotics (APM)	11.50/1	2500		_ ^				
Oral Health Evaluation (OHE)	EHS		Х	Х				
Osteoporosis Management in Women Who Had a	NCQA	0053				Х		
Fracture (OMW)								
Persistence of Beta-Blocker Treatment After Heart	NCQA	0071				Х	Х	
Attack (PBH)								
Pharmacotherapy for Opioid Use Disorder (POD)	NCQA							Х

Measure Name	Steward	NQF#	ACO	МСО	PCCP	sco	One Care	BH PIHP
Pharmacotherapy Management of COPD Exacerbation (PCE)	NCQA	0549				Х		
Plan All-Cause Readmission (PCR)	NCQA	1768	X	Х	Х	Х	Х	
Potentially Harmful Drug Disease Interactions in the Elderly (DDE)	NCQA	2993				Х		
Timeliness of Prenatal Care (PPC)	NCQA	1517	Х	Х	Χ			
Screening for Depression and Follow-up Plan (DSF)	EHS		Х					
Tracking of Demographic Information	EHS						Х	
Transitions of Care (TRC) - Medication Reconciliation Post Discharge	NCQA	N/A				Х	Х	
Use of High-Risk Medications in the Elderly (DAE)	NCQA	0022				Х		
Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)	NCQA	0577				Х	Х	

# Table 1 - MCO and PCC Plan Performance Measures, 2023 (Measurement Period: Calendar Year 2022)

<sup>\* ↑ =</sup> Weighted Mean Performance Better Than Benchmark  $\downarrow$  = Weighted Mean Performance Worse Than Benchmark

Measure Code	Measure Name	THP	WLS	PCCP	MH Weighted Mean	Nat'l Medicaid 75th Percentile*	Nat'l Medicaid 90th Percentile*
AMR	Asthma Medication Ratio (Total)	50.9%	61.4%	60.1%	57.6%	↓	<b>↓</b>
АРМ	Metabolic Monitoring for Children and Adolescents on Antipsychotics (Total)	54.5%	49.0%	40.0%	43.1%	1	<b>V</b>
СВР	Controlling High Blood Pressure	58.0%	67.4%	65.9%	63.9%	↓ ↓	$\downarrow$
CIS	Childhood Immunization Status (Combo 10)	32.8%	32.6%	45.0%	39.9%	<b>↑</b>	↓
CPE - BH	Behavioral Health Community Partner Engagement	3.7%	4.3%	N/A	4.0%	N/A	N/A
CPE - LTSS	LTSS Community Partner Engagement	11.5%	4.5%	N/A	8.4%	N/A	N/A
CT - BSP	Community Tenure - BSP (Risk adjusted O/E ratio) <sup>1</sup>	0.53	1.13	N/A	0.78	N/A	N/A
CT - LTSS	Community Tenure - LTSS (non-BSP) Risk adjusted O/E ratio <sup>1</sup>	0.82	1.01	N/A	0.92	N/A	N/A
ED SMI/SUD	Risk adjusted ratio (obs/exp) of ED visits for members with SMI/SUD/co-occurring conditions <sup>1</sup>	0.75	0.78	N/A	0.77	N/A	N/A
FUA - 7	Follow-Up After Emergency Department Visit for Substance Use (7 days)	44.1%	46.2%	44.9%	45.3%	<b>↑</b>	<b>↑</b>
FUH - 7	Follow-Up After Hospitalization for Mental Illness (7 days)	40.5%	41.1%	45.4%	42.9%	<b>\</b>	<b>V</b>
FUM - 7	Follow-Up After Emergency Department Visit for Mental Illness (7 days)	74.4%	72.7%	81.8%	78.1%	<b>1</b>	<b>↑</b>
HBD - Poor	Hemoglobin A1c Control for Patients with Diabetes - Poor HbA1c Control 1	37.5%	32.5%	39.4%	37.6%	<b>↑</b>	<b>↑</b>
IET - Eng Total	Initiation and Engagement of Substance Use Disorder Treatment (Engagement Total)	22.7%	23.5%	24.3%	23.6%	<b>↑</b>	<b>V</b>
IET - Init Total	Initiation and Engagement of Substance Use Disorder Treatment (Initiation Total)	53.1%	55.7%	51.6%	53.1%	<b>↑</b>	$\downarrow$
IMA	Immunization for Adolescents (Combo 2)	39.0%	21.6%	32.6%	33.2%	<b>\</b>	↓
OHE	Oral Health Evaluation	50.9%	48.4%	N/A	50.1%	N/A	N/A
PCR	Plan All-Cause Readmission (observed to expected ratio) <sup>1</sup>	10.8%	12.5%	10.2%	10.9%	<b>↑</b>	<b>↑</b>
PPC	Timeliness of Prenatal Care	90.2%	84.6%	84.6%	86.4%	<b>\</b>	$\downarrow$

<sup>&</sup>lt;sup>1</sup> A lower score represents better performance

MCO and PCC plans are compared to the national Medicaid 75<sup>th</sup> and 90<sup>th</sup> percentile benchmarks in the table above, where benchmark data are available. Weighted means are presented for administrative (claims only) measures, while median rates are shown for hybrid measures (claims and medical record review).

- The MassHealth Weighted Mean (MHWM) rates for FUA and FUM were above the national Medicaid 90<sup>th</sup> percentile benchmark.
- The MWHM rates for APM, CIS (Combination 10) and IET (both initiation and engagement sub measures) were below the 90<sup>th</sup> percentile, but above the 75<sup>th</sup> percentile.
- The MHWM rates for AMR, CBP, FUH, IMA (Combination 2), and PPC (timeliness submeasure) were below the 75<sup>th</sup> percentile.
- The MHWM rate for HBD poor control cohort and PCR were higher than the 90<sup>th</sup> percentile, meaning that plan performance failed to meet those benchmarks (because a lower rate signifies better performance).

### Table 2 - SCO Performance Measures, 2023 (Measurement Period: Calendar Year 2022)

- <sup>1</sup> A lower score represents better performance.
- <sup>2</sup> Individual plan rates not included because denominator (number of members eligible for measure) < 30, but plan denominator and numerator included in weighted mean calculation.
- \* ↑ = Weighted Mean Performance Better Than Benchmark 🗸 = Weighted Mean Performance Worse Than Benchmark

Measure Code	Measure Name	CCA	FHP	SWH	ТНР	UHC	WLS	MH Weighted Mean	Nat'l Medicare 75th Percentile*	Nat'l Medicare 90th Percentile*	Nat'l Medicaid 75th Percentile*	Nat'l Medicaid 90th Percentile*
АСР	Advanced Care Planning	33.2%	74.1%	41.2%	N/A	59.0%	16.7%	49.6%	N/A	N/A	N/A	N/A
AMM - Acute	Antidepressant Medication Management - Effective Acute Phase	80.6%	84.6%	92.4%	82.1%	79.2%	80.4%	85.4%	<b>↑</b>	<b>\</b>	<b>↑</b>	<b>↑</b>
AMM - Cont	Antidepressant Medication Management - Effective Continuation Phase	72.9%	68.0%	87.1%	68.1%	64.8%	68.6%	75.6%	<b>↑</b>	<b>↑</b>	<b>↑</b>	<b>↑</b>
СВР	Controlling High Blood Pressure	74.7%	66.7%	56.7%	74.5%	76.7%	77.4%	70.7%	<b>\</b>	$\downarrow$	<b>↑</b>	<b>V</b>
COL	Colorectal Cancer Screening	78.8%	66.2%	75.7%	72.5%	88.1%	77.6%	79.1%	<b>↑</b>	$\downarrow$	N/A	N/A
DAE Total	Use of High-Risk Medications in the Elderly - 2+ High Risk Medications (Total) <sup>1</sup>	25.6%	25.1%	18.3%	19.0%	21.4%	17.0%	21.6%	<b>↑</b>	<b>↑</b>	N/A	N/A
DDE Total	Potentially Harmful Drug Disease Interactions in the Elderly (Total) <sup>1</sup>	31.4%	36.3%	27.8%	31.4%	32.6%	29.3%	31.5%	<b>↑</b>	<b>↑</b>	N/A	N/A
FUH - 30	Follow-Up After Hospitalization for Mental Illness (30 days)	70.5%	61.1%	N/A	77.8%	N/A	N/A	63.0%	<b>↑</b>	$\downarrow$	<b>\</b>	<b>\</b>
FUH - 7	Follow-Up After Hospitalization for Mental Illness (7 days)	48.9%	38.9%	N/A	50.0%	19.1%	N/A	39.3%	<b>↑</b>	$\downarrow$	$\rightarrow$	<b>V</b>
FVO	Influenza Vaccination	78.0%	80.0%	79.0%	82.0%	81.0%	78.0%	80.0%	N/A	N/A	N/A	N/A
OMW	Osteoporosis Management in Women Who Had a Fracture	38.5%	67.6%	20.5%	23.7%	43.2%	N/A	36.1%	<b>\</b>	<b>\</b>	N/A	N/A
РВН	Persistence of Beta-Blocker Treatment After Heart Attack	N/A	75.0%	N/A	92.9%	N/A	N/A	83.6%	<b>\</b>	<b>\</b>	<b>\</b>	<b>V</b>
PCE - Bronch	Pharmacotherapy Management of COPD Exacerbation - Bronchodilator	87.8%	87.3%	N/A	93.4%	N/A	94.4%	89.3%	<b>↑</b>	<b>\</b>	<b>↑</b>	<b>V</b>

PCE - Cort	Pharmacotherapy Management of COPD Exacerbation - Systemic Corticosteroid	66.6%	78.5%	75.6%	77.5%	79.5%	68.5%	74.6%	<b>V</b>	<b>\</b>	<b>\</b>	<b>V</b>
PCR	Plan All-Cause Readmission (observed to expected ratio) <sup>1</sup>	1.48	1.05	1.20	1.37	1.17	1.16	1.25	<b>↑</b>	$\uparrow$	<b>↑</b>	<b>↑</b>
SPR	Use of Spirometry Testing in the Assessment and Diagnosis of COPD	22.0%	25.7%	19.4%	22.1%	22.8%	N/A	22.1%	<b>\</b>	$\downarrow$	<b>\</b>	<b>\</b>
TRC	Transitions of Care: Medication Reconciliation Post-Discharge	86.1%	89.5%	57.2%	55.7%	73.5%	82.1%	74.4%	<b>→</b>	$\downarrow$	N/A	N/A

SCO plans are compared to both the national Medicare and Medicaid 90<sup>th</sup> and 75<sup>th</sup> percentile benchmarks in the table above, where benchmark data are available.

- The MassHealth Weighted Mean (MHWM) rate for AMM (Continuation) is above the 90<sup>th</sup> percentile for both Medicare and Medicaid.
- The MHWM rate for PCE (Bronchodilator) is above the 75<sup>th</sup> percentile, but below the 90<sup>th</sup> percentile for both Medicare and Medicaid.
- The MHWM rate for AMM (Acute) is above the 75<sup>th</sup> but below the 90<sup>th</sup> percentile for Medicare, but above the 90<sup>th</sup> percentile for Medicaid.
- The MHWM rate for CBP is below the 75<sup>th</sup> percentile for Medicare, but above the 75<sup>th</sup> percentile for Medicaid.
- The MHWM rates for FUH 7 and 30 day cohorts are above the 75<sup>th</sup> percentile for Medicare, but below the 75<sup>th</sup> percentile for Medicaid
- The MHWM rate for COL is above the 75<sup>th</sup>, but below the 90<sup>th</sup>, percentile for Medicare. COL has no Medicaid benchmark.
- The MHWM rates for PBH, SPR, and PCE (Corticosteroid) are below the 75<sup>th</sup> percentile for both Medicare and Medicaid.
- The MHWM rates for TRC and OMW are below the 75<sup>th</sup> percentile for Medicare. Neither of these measures has a Medicare benchmark.
- The MHWM rate for PCR is higher than both the 75<sup>th</sup> and 90<sup>th</sup> percentile for both Medicare and Medicaid, meaning that plan performance failed to meet those benchmarks (because a lower rate signifies better performance).
- The MHWM rates for DAE (Total) and DDE (Total) were higher than both the 75<sup>th</sup> and 90<sup>th</sup> percentile for Medicare, meaning that plan performance failed to meet that benchmark (because a lower rate signifies better performance). Neither measure has a Medicaid benchmark.

# Table 4 - One Care Performance Measures, 2023 (Measurement Period: Calendar Year 2022)

Table 4.a: HEDIS Measures

Measure Code	Measure Name	CCA	ТНР	UHC	MH Weighted Mean	Nat'l Medicare 75th Percentile*	Nat'l Medicare 90th Percentile*	Nat'l Medicaid 75th Percentile*	Nat'l Medicaid 90th Percentile*
AMM - Acute	Antidepressant Medication Management - Effective Acute Phase	78.4%	75.1%	N/A	78.09%	$\downarrow$	<b>\</b>	<b>↑</b>	<b>↑</b>
AMM - Cont	Antidepressant Medication Management - Effective Continuation Phase	67.7%	62.2%	N/A	67.1%	<b>V</b>	<b>\</b>	<b>↑</b>	<b>↑</b>
BCS	Breast Cancer Screening	67.6%	64.1%	N/A	67.2%	$\downarrow$	$\downarrow$	<b>↑</b>	<b>↑</b>
СВР	Controlling High Blood Pressure	73.2%	67.2%	35.0%	72.6%	$\downarrow$	<b>\</b>	<b>↑</b>	<b>↑</b>
COL	Colorectal Cancer Screening	59.6%	52.1%	N/A	58.9%	$\downarrow$	<b>\</b>	N/A	N/A
FUA - 7	Follow-Up After Emergency Department Visit for Substance Use (7 days)	47.8%	49.6%	38.2%	47.7%	<b>↑</b>	<b>↑</b>	<b>↑</b>	<b>↑</b>
FUH - 30	Follow-Up After Hospitalization for Mental Illness (30 days)	62.2%	69.9%	45.3%	62.2%	<b>↑</b>	<b>\</b>	<b>\</b>	<b>V</b>
FUH - 7	Follow-Up After Hospitalization for Mental Illness (7 days)	41.2%	54.4%	29.1%	42.0%	<b>↑</b>	<b>\</b>	<b>\</b>	<b>V</b>
FUM - 7	Follow-Up After Emergency Department Visit for Mental Illness (7 days)	80.4%	73.5%	72.7%	79.6%	<b>↑</b>	<b>↑</b>	1	<b>↑</b>
HBD - Poor	Hemoglobin A1c Control for Patients with Diabetes - Poor HbA1c Control 1	36.3%	29.2%	N/A	35.7%	<b>↑</b>	<b>↑</b>	<b>↑</b>	<b>↑</b>
IET - Eng Total	Initiation and Engagement of Substance Use Disorder Treatment (Engagement Total)	10.6%	11.1%	N/A	10.7%	<b>↑</b>	<b>↑</b>	<b>\</b>	<b>\</b>
IET - Init Total	Initiation and Engagement of Substance Use Disorder Treatment (Initiation Total)	38.9%	38.2%	N/A	38.7%	<b>V</b>	<b>\</b>	<b>\</b>	<b>\</b>
РВН	Persistence of Beta-Blocker Treatment After Heart Attack	96.4%	N/A	N/A	95.5%	<b>↑</b>	<b>↑</b>	<b>↑</b>	<b>↑</b>

<sup>&</sup>lt;sup>1</sup> A lower score represents better performance.

<sup>\* ↑ =</sup> Weighted Mean Performance Better Than Benchmark  $\downarrow$  = Weighted Mean Performance Worse Than Benchmark

Measure Code	Measure Name	CCA	ТНР	инс	MH Weighted Mean	Nat'l Medicare 75th Percentile*	Nat'l Medicare 90th Percentile*	Nat'l Medicaid 75th Percentile*	Nat'l Medicaid 90th Percentile*
PCR	Plan All-Cause Readmission (observed to expected ratio) <sup>1</sup>	1.38	0.98	N/A	1.34	<b>↑</b>	<b>↑</b>	<b>↑</b>	<b>↑</b>
SPR	Use of Spirometry Testing in the Assessment and Diagnosis of COPD	20.0%	19.0%	N/A	19.8%	<b>\</b>	<b>\</b>	<b>\</b>	<b>\</b>
TRC	Transitions of Care: Medication Reconciliation Post-Discharge	68.5%	37.5%	59.5%	65.2%	$\downarrow$	<b>\</b>	N/A	N/A

One Care plans are compared to both the national Medicare and Medicaid 75<sup>th</sup> and 90<sup>th</sup> percentile benchmarks in the table above, where benchmark data are available.

- The MassHealth Weighted Mean (MHWM) rates for FUM (7 day), FUA (7 day) and PBH are above the 90<sup>th</sup> percentile for both Medicare and Medicaid.
- The MHWM rate for IET (Engagement) is above the 90<sup>th</sup> percentile for Medicare, but below the 75<sup>th</sup> percentile for Medicaid.
- The MHWM rates for AMM (both submeasures), CBP, and BCS are below the 75<sup>th</sup> percentile for Medicare, but above the 90<sup>th</sup> percentile for Medicaid
- The MHWM rate for FUH (both submeasures) is above the 75<sup>th</sup> for Medicare, but below the 75<sup>th</sup> percentile for Medicaid.
- The MHWM rates for SPR and IET (Initiation) are below the 75<sup>th</sup> percentile for both Medicare and Medicaid.
- The MHWM rates for COL and TRC (Medication Reconciliation) are below the 75<sup>th</sup> percentile for Medicare. COL and TRC have no Medicaid benchmark.
- The MHWM rates for PCR and the mean for HBD (Poor Control) were higher than both the 75<sup>th</sup> and 90<sup>th</sup> percentile for both Medicare and Medicaid, meaning that plan performance failed to meet those benchmarks (because a lower rate signifies better performance).

Table 4.b: State-Defined and MA PDP CAHPS Measures

Measure Code	Measure Name	CCA	ТНР	UHC	MH Weighted Mean	Medicare Advantage FFS Average Score	MMP Quality Withhold Benchmark Goal
N/A	Access to LTS Coordinator - Percent of members with LTSS needs who have a referral to an LTS Coordinator within 90 days of enrollment	99.9%	71.4%	33.7%	68.9%	N/A	<b>\</b>
N/A	Tracking of Demographic Information - Percent of members whose demographic data are collected and maintained in the MMP Centralized Enrollee Record (race/ethnicity/ primary language/homelessness/disability type/LGBTQ identity	75.5%	69.9%	61.0%	73.3%	N/A	<b>\</b>
N/A	Timely Assessment - Percent of members with an initial assessment completed within 90 days of enrollment	91.1%	96.2%	51.1%	81.1%	N/A	<b>\</b>
N/A	Documentation of Care Plan Goals - Percent of members with documented discussions of care goals	100%	97.6%	98.3%	99.0%	N/A	1
FVA	Influenza Vaccination	69.0%	67.0%	67.0%	69.0%	<b>\</b>	N/A
MA PDP CAHPS	Medicare Advantage Prescription Drug Plan CAHPS – Getting Needed Care Composite	79.0%	75.0%	N/A	78.0%	<b>\</b>	N/A
MA PDP CAHPS	Medicare Advantage Prescription Drug Plan CAHPS – Getting Appointments and Care Quickly	76.0%	N/A	N/A	76.0%	<b>↑</b>	N/A
MA PDP CAHPS	Medicare Advantage Prescription Drug Plan CAHPS – Customer Service	90.0%	N/A	N/A	90.0%	<b>↑</b>	N/A
MA PDP CAHPS	Medicare Advantage Prescription Drug Plan CAHPS – Rating of Health Plan	90.0%	86.0%	N/A	89.0%	<b>↑</b>	N/A
MA PDP CAHPS	Medicare Advantage Prescription Drug Plan CAHPS – Care Coordination	84.0%	N/A	N/A	84.0%	<b>\</b>	N/A

For state-defined measures, One Care plans are compared to MMP quality withhold benchmarks that were determined by MassHealth in consultation with CMS. For the Medicare Advantage Prescription Drug Plan (MA PDP) CAHPS, One Care plans are compared to the Medicare Advantage (MA) Fee for Service (FFS) average.

• The MassHealth Weighted Mean (MHWM) rates for three of the four state-defined measures (LTS Coordinator, Tracking Demographic information, and Timely Assessment) were lower than the Quality withhold benchmarks.

• The MHWM rates for three of the six the MA PDP CAHPS composite measures (Getting Appointments/Care Quickly, Customer Service, and Rating of Health Plan) were above the MA FFS average while three (Getting Needed Care, Care Coordination, and Flu Vaccine) were below the MA FFS average.

# Table 5 - Massachusetts Behavioral Health Partnership (BH PIHP) Measures, 2023 (Measurement Period: Calendar Year 2022)

\*  $\uparrow$  = BH PIHP Performance Better Than Benchmark  $\downarrow$  = BH PIHP Performance Worse Than Benchmark

Measure Code	Measure Name	Measure Rate	Nat'l Medicaid 75th Percentile*	Nat'l Medicaid 90th Percentile*
ADD - Cont	Follow-Up Care for Children Prescribed ADHD Medication - Continuation and Maintenance Phase	44.7%	<b>\</b>	<b>V</b>
ADD - Init	Follow-Up Care for Children Prescribed ADHD Medication - Initiation Phase	39.8%	<b>\</b>	<b>\</b>
AMM - Acute	Antidepressant Medication Management - Effective Acute Phase	71.4%	<b>↑</b>	<b>V</b>
AMM - Cont	Antidepressant Medication Management - Effective Continuation Phase	56.1%	<b>↑</b>	$\downarrow$
АРМ	Metabolic Monitoring for Children and Adolescents on Antipsychotics (Total)	36.4%	<b>V</b>	<b>V</b>
FUA - 30	Follow-Up After Emergency Department Visit for Substance Use (30 days)	53.2%	<b>↑</b>	<b>\</b>
FUA - 7	Follow-Up After Emergency Department Visit for Substance Use (7 days)	41.3%	<b>↑</b>	<b>↑</b>
FUH - 30	Follow-Up After Hospitalization for Mental Illness (30 days)	64.3%	<b>\</b>	<b>\</b>
FUH - 7	Follow-Up After Hospitalization for Mental Illness (7 days)	42.5%	<b>\</b>	<b>\</b>
FUM - 30	Follow-Up After Emergency Department Visit for Mental Illness (30 days)	83.7%	<b>↑</b>	<b>↑</b>
FUM - 7	Follow-Up After Emergency Department Visit for Mental Illness (7 days)	77.3%	<b>↑</b>	<b>↑</b>
IET - Eng Total	Initiation and Engagement of Substance use Disorder Treatment (Engagement Total)	16.9%	<b>V</b>	<b>\</b>
IET - Init Total	Initiation and Engagement of Substance use Disorder Treatment (Initiation Total)	44.2%	<b>\</b>	<b>\</b>
POD	Pharmacotherapy for Opioid Use Disorder	47.2%	<b>↑</b>	<b>↑</b>
SSD	Diabetes Screening for People with Schizophrenia or Bipolar Disorder who are using Antipsychotic Medications	77.8%	<b>V</b>	<b>V</b>

Massachusetts Behavioral Health Partnership (BH PIHP) measures are compared to the Medicaid 90<sup>th</sup> and 75<sup>th</sup> percentiles in the table above.

- The MassHealth Weighted Mean (MHWM) rates for FUM (7 and 30 day follow-up), FUA (7 day follow-up) and POD are above the national Medicaid 90<sup>th</sup> percentile benchmark.
- The MHWM rates for AMM (Acute and Continuation) and FUA (30 day follow-up), are above the Medicaid 75<sup>th</sup> percentile.
- The MHWM rates for ADD (both cohorts), APM, FUH (7 and 30 day follow-up), IET (initiation and engagement sub measures), and SSD are below the Medicaid 75<sup>th</sup> percentile.

# Tables 6 & 7 - ACO Performance Measures, 2023 (Measurement Period: Calendar Year 2022) Table 6 - ACO Performance Measures, Allways Health Plan - Fallon

Table 6.a: HEDIS Measures

Measure Code	Measure Name	АНР	СЗ	FH 365	FH BERK	FH WFC	HNE	LAHEY	MGB	STEWARD	ACO MHWM	Nat'l Medicaid 75 <sup>th</sup> Percentile*	Nat'l Medicaid 90th Percentile*
AMR	Asthma Medication Ratio (Total)	61.9%	63.4%	58.9%	55.3%	55.6%	58.4%	56.9%	58.5%	58.0%	60.7%	$\downarrow$	<b>\</b>
АРМ	Metabolic Monitoring for Children and Adolescents on Antipsychotics (Total)	52.1%	57.3%	31.5%	30.0%	32.8%	51.0%	14.3%	33.8%	43.6%	41.8%	<b>\</b>	<b>V</b>
СВР	Controlling High Blood Pressure	69.3%	67.9%	70.4%	67.9%	67.2%	54.2%	68.6%	60.9%	73.5%	67.2%	$\downarrow$	$\downarrow$
CIS	Childhood Immunization Status (Combo 10)	33.1%	58.2%	60.4%	45.1%	49.4%	36.0%	20.0%	54.5%	48.3%	52.5%	<b>↑</b>	<b>↑</b>
FUH - 7	Follow-Up After Hospitalization for Mental Illness (7 days)	35.5%	45.3%	49.5%	48.4%	39.5%	50.7%	47.5%	48.4%	42.0%	46.4%	<b>↑</b>	<b>\</b>
FUM - 7	Follow-Up After Emergency Department Visit for Mental Illness (7 days)	74.7%	68.7%	85.1%	73.9%	80.7%	80.9%	74.7%	75.2%	72.7%	74.7%	<b>↑</b>	<b>↑</b>
HBD - Poor	Hemoglobin A1c Control for Patients with Diabetes - Poor HbA1c Control 1	30.9%	37.0%	25.3%	35.0%	29.8%	38.3%	23.7%	43.3%	36.2%	34.1%	<b>↑</b>	<b>↑</b>
IET - Eng Total	Initiation and Engagement of Substance use Disorder Treatment (Engagement Total)	12.8%	32.8%	18.0%	28.3%	15.8%	36.4%	22.1%	18.3%	22.6%	22.9%	<b>↑</b>	<b>\</b>
IET - Init Total	Initiation and Engagement of Substance use Disorder Treatment (Initiation Total)	38.5%	56.2%	74.6%	69.1%	41.9%	64.2%	51.1%	44.6%	46.8%	50.9%	<b>↑</b>	<b>\</b>
IMA	Immunization for Adolescents (Combo 2)	33.1%	58.2%	60.4%	45.1%	49.4%	36.0%	20.0%	54.5%	48.3%	52.5%	<b>↑</b>	<b>↑</b>
PCR	Plan All-Cause Readmission (observed to expected ratio) <sup>1</sup>	1.33	1.19	1.56	1.36	1.60	1.31	1.33	1.09	1.02	1.29	<b>↑</b>	<b>↑</b>
PPC	Timeliness of Prenatal Care	96.0%	92.5%	95.0%	88.6%	74.4%	84.2%	78.1%	75.0%	90.7%	86.8%	$\rightarrow$	$\downarrow$

<sup>&</sup>lt;sup>1</sup>A lower score represents better performance.

<sup>&</sup>lt;sup>2</sup> ACO weighted mean includes the 17 ACOs in Table 6 and Table 7.

<sup>\* ↑ =</sup> Weighted Mean Performance Better Than Benchmark 🔱 = Weighted Mean Performance Worse Than Benchmark

Table 6.b: State-Defined and CG-CAHPS Measures

Measure Code	Measure Name	АНР	СЗ	FH 365	FH BERK	FH WFC	HNE	LAHEY	MGB	STEWARD	ACO MHWM	Attainment	Goal
CG-CAHPS AD Communication	Adult: Overall Rating and Care Delivery: Communication	85.9%	84.5%	87.7%	87.4%	88.5%	86.1%	86.4%	89.9%	88.3%	86.9%	<b>↑</b>	$\downarrow$
CG-CAHPS AD Integration	Adult: Person-Centered Integrated Care: Integration of Care	72.4%	72.7%	79.8%	76.1%	79.2%	75.8%	78.4%	80.2%	77.6%	78.1%	<b>↑</b>	$\downarrow$
CG-CAHPS AD Knowledge	Adult: Person-Centered Integrated Care: Knowledge of Patient	80.0%	78.4%	82.7%	82.2%	84.5%	80.6%	81.2%	84.7%	82.9%	81.5%	<b>↑</b>	$\downarrow$
CG-CAHPS AD Willingness	Adult: Overall Rating and Care Delivery: Willingness to recommend	83.2%	79.9%	87.5%	86.1%	85.6%	83.0%	84.1%	88.0%	85.1%	84.5%	<b>↑</b>	$\downarrow$
CG-CAHPS CH Communication	Child: Overall Rating and Care Delivery: Communication	89.4%	89.0%	91.6%	87.3%	91.1%	89.8%	96.7%	91.8%	90.9%	90.4%	<b>↑</b>	$\downarrow$
CG-CAHPS CH Integration	Child: Person-Centered Integrated Care: Integration of Care	73.3%	73.0%	78.3%	76.1%	77.6%	72.9%	95.2%	78.3%	79.3%	78.6%	<b>↑</b>	$\downarrow$
CG-CAHPS CH Knowledge	Child: Person-Centered Integrated Care: Knowledge of Patient	82.5%	84.3%	87.5%	81.5%	87.5%	85.0%	86.5%	87.8%	87.3%	86.2%	<b>↑</b>	$\downarrow$
CG-CAHPS CH Willingness	Child: Overall Rating and Care Delivery: Willingness to recommend	86.2%	86.8%	91.0%	82.8%	91.2%	87.2%	98.2%	90.8%	90.5%	89.2%	<b>↑</b>	$\downarrow$
CPE - BH	Behavioral Health Community Partner Engagement	13.3%	8.1%	10.3%	15.3%	26.6%	11.9%	8.8%	10.0%	8.5%	10.6%	<b>↑</b>	$\downarrow$
CPE - LTSS	LTSS Community Partner Engagement	13.6%	10.1%	12.8%	6.3%	23.4%	3.7%	10.5%	7.4%	4.5%	7.5%	<b>↑</b>	$\downarrow$
CT - BSP	Community Tenure - BSP (Risk adjusted O/E ratio) <sup>1</sup>	0.70	1.13	0.49	0.58	0.85	0.73	0.71	1.18	1.17	0.82	<b>↑</b>	$\downarrow$
CT - LTSS	Community Tenure - LTSS Risk adjusted O/E ratio <sup>1</sup>	1.33	1.86	0.50	0.75	0.96	0.82	1.08	1.57	1.71	1.13	<b>↑</b>	$\downarrow$
DRR	Depression Remission or Response	5.6%	7.9%	3.6%	6.0%	7.0%	0.5%	5.3%	2.4%	2.5%	6.6%	<b>↑</b>	$\downarrow$
CDF	Screening for Depression and Follow- Up Plan	38.4%	51.9%	42.2%	26.8%	41.1%	42.3%	34.1%	41.8%	40.4%	46.2%	<b>↑</b>	$\downarrow$
ED SMI/SUD	Risk adjusted ratio (obs/exp) of ED visits for members with SMI/SUD/co-occurring conditions <sup>1</sup>	0.98	1.03	0.61	0.83	0.94	0.74	0.86	0.83	1.00	0.87	<b>↑</b>	<b>↑</b>
HRSN	Health-Related Social Needs Screening	24.1%	28.7%	22.6%	4.9%	10.5%	22.4%	N/A	34.1%	8.8%	29.5%	<b>↑</b>	<b>↑</b>
OHE	Oral Health Evaluation	54.3%	53.7%	57.7%	36.5%	55.1%	50.6%	42.8%	56.0%	50.7%	53.3%	$\uparrow$	$\uparrow$

#### **Table 7 - ACO Performance Measures, Health New England - Tufts**

Table 7.a: HEDIS Measures

Measure Code	Measure Name	THP ATRIUS	THP BIDCO	THP CHA	THP CHILDREN'S	WLS BACO	WLS MERCY	WLS SCOAST	WLS SIGN	ACO MHWM	Nat'l Medicaid 75th Percentile *	Nat'l Medicaid 90th Percentile *
AMR	Asthma Medication Ratio (Total)	61.5%	58.0%	52.1%	65.9%	61.9%	68.8%	61.6%	64.0%	60.7%	<b>\</b>	<b>\</b>
APM	Metabolic Monitoring for Children and Adolescents on Antipsychotics (Total)	46.3%	28.6%	31.0%	41.0%	46.7%	42.4%	34.9%	66.7%	41.8%	<b>\</b>	<b>\</b>
СВР	Controlling High Blood Pressure	78.0%	67.4%	65.6%	62.3%	63.5%	68.4%	70.1%	78.6%	67.2%	↓	$\downarrow$
CIS	Childhood Immunization Status (Combo 10)	56.2%	55.6%	56.1%	56.1%	53.6%	36.5%	34.3%	49.3%	52.5%	1	<b>↑</b>
FUH - 7	Follow-Up After Hospitalization for Mental Illness (7 days)	41.1%	42.0%	57.5%	52.2%	43.2%	51.5%	48.0%	54.3%	46.4%	<b>↑</b>	<b>V</b>
FUM - 7	Follow-Up After Emergency Department Visit for Mental Illness (7 days)	77.8%	71.8%	73.7%	83.9%	71.4%	69.4%	71.6%	77.8%	74.7%	<b>↑</b>	<b>↑</b>
HBD - Poor	Hemoglobin A1c Control for Patients with Diabetes - Poor HbA1c Control <sup>1</sup>	30.0%	25.9%	32.9%	58.3%	29.8%	37.0%	37.7%	19.5%	34.1%	1	<b>↑</b>
IET - Eng Total	Initiation and Engagement of Substance Use Treatment (Engagement Total)	18.6%	17.6%	19.3%	28.2%	19.2%	21.0%	16.0%	22.5%	22.9%	<b>↑</b>	<b>V</b>
IET - Init Total	Initiation and Engagement of Substance Use Treatment (Initiation Total)	35.8%	49.9%	63.3%	51.4%	48.8%	46.2%	38.9%	53.0%	50.9%	<b>↑</b>	<b>V</b>
IMA	Immunization for Adolescents (Combo 2)	56.2%	55.6%	56.1%	56.1%	53.6%	36.5%	34.3%	49.3%	52.5%	<b>↑</b>	<b>↑</b>
PCR	Plan All-Cause Readmission (observed to expected ratio) <sup>1</sup>	1.33	1.21	1.27	1.40	1.27	1.28	0.94	1.37	1.29	<b>↑</b>	<b>↑</b>
PPC	Timeliness of Prenatal Care	69.8%	83.7%	87.8%	63.7%	88.2%	73.9%	92.9%	87.7%	86.8%	$\downarrow$	$\downarrow$

<sup>&</sup>lt;sup>1</sup> A lower score represents better performance.

<sup>&</sup>lt;sup>2</sup> ACO weighted mean includes the 17 ACOs in Table 6 and Table 7.

<sup>\* 🕆 =</sup> Weighted Mean Performance Better Than Benchmark 🔍 = Weighted Mean Performance Worse Than Benchmark

Table 7.b: State-Defined and CG-CAHPS Measures

Measure Code	Measure Name	THP ATRIUS	THP BIDCO	THP CHA	THP CHILDREN'S	WLS BACO	WLS MERCY	WLS SCOAST	WLS SIGN	ACO MHWM	Attainment	Goal
CG-CAHPS AD Communication	Adult: Overall Rating and Care Delivery: Communication	89.1%	86.4%	86.0%	92.5%	86.2%	80.2%	88.1%	85.0%	86.9%	<b>↑</b>	$\downarrow$
CG-CAHPS AD Integration	Adult: Person-Centered Integrated Care: Integration of Care	81.5%	78.3%	77.0%	82.0%	74.9%	70.8%	79.8%	74.7%	78.1%	<b>↑</b>	$\downarrow$
CG-CAHPS AD Knowledge	Adult: Person-Centered Integrated Care: Knowledge of Patient	84.6%	81.3%	80.6%	88.9%	80.6%	72.8%	82.7%	78.5%	81.5%	<b>↑</b>	$\downarrow$
CG-CAHPS AD Willingness	Adult: Overall Rating and Care Delivery: Willingness to recommend	88.2%	84.3%	85.7%	91.7%	84.1%	75.0%	86.9%	82.4%	84.5%	<b>↑</b>	$\downarrow$
CG-CAHPS CH Communication	Child: Overall Rating and Care Delivery: Communication	91.7%	88.6%	88.0%	92.5%	89.3%	84.6%	92.8%	88.6%	90.4%	<b>↑</b>	$\downarrow$
CG-CAHPS CH Integration	Child: Person-Centered Integrated Care: Integration of Care	79.3%	76.3%	74.4%	80.7%	73.8%	79.6%	80.7%	71.4%	78.6%	<b>↑</b>	$\downarrow$
CG-CAHPS CH Knowledge	Child: Person-Centered Integrated Care: Knowledge of Patient	88.1%	84.4%	83.5%	88.5%	85.1%	79.5%	89.2%	82.0%	86.2%	<b>↑</b>	$\downarrow$
CG-CAHPS CH Willingness	Child: Overall Rating and Care Delivery: Willingness to recommend	92.4%	87.5%	90.1%	91.6%	86.8%	79.0%	92.4%	84.8%	89.2%	<b>↑</b>	<b>V</b>
CPE - BH	Behavioral Health Community Partner Engagement	25.1%	12.0%	10.0%	N/A	11.6%	7.3%	14.2%	16.3%	10.6%	<b>↑</b>	$\downarrow$
CPE - LTSS	LTSS Community Partner Engagement	35.4%	13.0%	13.1%	14.7%	7.9%	6.8%	9.0%	8.4%	7.5%	<b>↑</b>	$\downarrow$
CT - BSP	Community Tenure - BSP (Risk adjusted O/E ratio) <sup>1</sup>	0.51	0.74	0.53	0.52	1.09	1.02	0.95	1.03	0.82	<b>↑</b>	$\downarrow$
CT - LTSS	Community Tenure - LTSS Risk adjusted O/E ratio <sup>1</sup>	0.72	1.22	1.12	0.87	1.40	1.01	0.98	1.24	1.13	<b>↑</b>	$\downarrow$
DRR	Depression Remission or Response	3.9%	9.2%	4.3%	8.2%	12.2%	9.1%	2.4%	32.7%	6.6%	<b>↑</b>	$\downarrow$
DSF	Screening for Depression and Follow- Up Plan	35.3%	43.6%	42.1%	63.0%	57.1%	28.7%	44.5%	70.0%	46.2%	<b>↑</b>	$\downarrow$
ED SMI/SUD	Risk adjusted ratio (obs/exp) of ED visits for members with SMI/SUD/co-occurring conditions <sup>1</sup>	0.74	0.95	1.04	0.85	1.00	0.83	0.78	0.85	0.87	<b>↑</b>	<b>↑</b>
HRSN	Health-Related Social Needs Screening	37.5%	14.1%	42.3%	56.2%	38.9%	24.8%	33.4%	42.1%	29.5%	<b>↑</b>	<b>↑</b>
OHE	Oral Health Evaluation	56.0%	57.7%	52.4%	54.2%	48.5%	54.5%	46.5%	53.4%	53.3%	<b>↑</b>	<b>↑</b>

- The MHWM rates for CIS (Combo 10), IMA (Combo 2) and FUM (7 day) were above the Medicaid 90<sup>th</sup> percentile.
- The MHWM rates for FUH (7 day) and IET (both cohorts) were above the Medicaid 75<sup>th</sup> percentile, but below the Medicaid 90<sup>th</sup> percentile.
- The MHWM rates for APM, PPC (Timeliness), CBP, and AMR were below the Medicaid 75<sup>th</sup> percentile.
- The MHWM rates for HBD (Poor Control) and PCR were higher than both the 90<sup>th</sup> and 75<sup>th</sup> percentile, meaning that plan performance failed to meet those benchmarks (because a lower rate signifies better performance).
- The MHWM rates for all State-Defined and CG-CAHPS measures were above the Attainment thresholds set by EHS.
- The MHWM rates for ED SMI/SUD, HRSN, and OHE were higher than the Goal benchmark set by EHS; rates for all other State-Defined and CG-CAHPS measures were below the Goal benchmark.