# MassHealth 2024 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 6 measures being reported by three or more MassHealth programs. Measure rates reflect performance in calendar year 2023, with data collection occurring in calendar year 2024.

*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 2023. 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 90th and 75th percentiles for either or both Medicaid and Medicare, as specified below. The 90th percentile represents a level of performance that was met or exceeded by the top 10% of Medicaid plans that submitted HEDIS MY 2023 data to NCQA. MassHealth uses the Medicaid 90th percentile as the primary benchmark against which plan performance is compared. The Medicaid 75th 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 2023 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 90th and 75th 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 90th and 75th percentiles (where available).

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

| **Measure Name** | **Steward** | **NQF #** | **ACO** | **MCO** | **PCCP** | **SCO** | **One Care** | **BH PIHP** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Antidepressant Medication Management (AMM)** | NCQA | 0105 |  |  |  | X |  | X |
| **Asthma Medication Ratio (AMR)** | NCQA | 1800 |  |  | X |  |  |  |
| **Breast Cancer Screening (BCS)** | NQCA | 2372 |  |  |  |  | X |  |
| **CAHPS** | AHRQ | N/A | X | X |  | X | X |  |
| **Care for Older Adults (COA)** | NCQA | 0553 |  |  |  | X |  |  |
| **Childhood Immunization Status (CIS)** | NCQA | 0038 |  |  | X |  |  |  |
| **Colorectal Cancer Screening (COL)** | NCQA | 0034 |  |  |  | X |  |  |
| **Controlling High Blood Pressure (CBP)** | NCQA | 0018 |  |  |  | X | X |  |
| **Diabetes Screening for People with Schizophrenia or Bipolar and Antipsychotics (SSD)** | NCQA | 1932 |  |  |  |  |  | X |
| **Follow-Up After ED Visit for Mental Illness (FUM)** | NCQA | 3488 | X | X | X |  |  | X |
| **Follow-Up After ED Visit for SUD (FUA)** | NCQA | 3489 | X | X | X |  |  | X |
| **Follow-Up After Hospitalization for Mental Illness (FUH)** | NCQA | 0576 | X | X | X | X | X | X |
| **Follow-Up Care for Children Prescribed ADHD Medication (ADD)** | NCQA | 0108 |  |  |  |  |  | X |
| **Hemoglobin A1c Control for Patients with Diabetes (HBD)** | NCQA | 0059 |  |  |  |  | X |  |
| **Initiation and Engagement of Substance Use Disorder Treatment (IET)** | NCQA | 0004 | X | X | X | X | X | X |
| **Managed Long-Term Services and Supports Minimizing Facility Length of Stay (MLTSS-7)** | CMS | N/A |  |  |  | X | X |  |
| **Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)** | NCQA | 2800 |  |  |  |  |  | X |
| **Osteoporosis Management in Women Who Had a Fracture (OMW)** | NCQA | 0053 |  |  |  | X |  |  |
| **Persistence of Beta-Blocker Treatment After a Heart Attack (PBH)** | NCQA | 0071 |  |  |  | X |  |  |
| **Pharmacotherapy for Opioid Use Disorder (POD)** | NCQA | N/A |  |  |  |  |  | X |
| **Pharmacotherapy Management of COPD Exacerbation (PCE)** | NCQA | 0549 |  |  |  | X |  |  |
| **Plan All-Cause Readmission (PCR)** | NCQA | 1768 |  |  |  | X | X |  |
| **Potentially Harmful Drug-Disease Interactions in Older Adults (DDE)** | NCQA | 2993 |  |  |  | X |  |  |
| **Prenatal and Postpartum Care (PPC)** | NCQA | 1517 | X | X | X |  |  |  |
| **Screening for Depression and Follow-up Plan (CDF)** | EHS | N/A | X |  |  |  |  |  |
| **Transitions of Care (TRC)** | NCQA | N/A |  |  |  | X | X |  |
| **Use of High-Risk Medications in Older Adults (DAE)** | NCQA | 0022 |  |  |  | X |  |  |
| **Use of Pharmacotherapy for Opioid Use Disorder (OUD)** | CMS | N/A |  |  |  |  |  | X |
| **Use of Spirometry Testing in the Assessment and Diagnosis of COPD (SPR)** | NCQA | 0577 |  |  |  | X |  |  |
| **30-Day Unplanned Readmission Following Psychiatric Hospitalization (CMS IPFQR Measure)** | CMS | N/A |  |  |  |  |  | X |

Table 2 - MCO and PCC Plan Performance Measures, 2024 (Measurement Period: Calendar Year 2023)

Table Legend:

\* ↑ = Weighted Mean Performance Better Than Benchmark ↓ = Weighted Mean Performance Worse Than Benchmark

Table 2.a: HEDIS Measures

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure Code** | **Measure Name** | **PCCP** | **THP** | **WLS** | **MH Weighted Mean** | **Nat'l Medicaid 75th Percentile\*** | **Nat'l Medicaid 90th Percentile\*** |
| **AMR** | **Asthma Medication Ratio (Total)** | 67.7% | N/A | N/A | N/A | ↓ | ↓ |
| **CIS-Combo 10** | **Childhood Immunization Status - Combo 10** | 37.5% | N/A | N/A | N/A | ↑ | ↓ |
| **FUA-7** | **Follow-Up After ED Visit for SUD - 7 Days (Total)** | 38.5% | 45.5% | 40.5% | 41.2% | ↑ | ↑ |
| **FUH-7** | **Follow-Up After Hospitalization for Mental Illness - 7 Days (Total)** | 45.8% | 42.0% | 48.3% | 45.3% | ↓ | ↓ |
| **FUM-7** | **Follow-Up After ED Visit for Mental Illness - 7 Days (Total)** | 80.3% | 68.5% | 73.3% | 76.3% | ↑ | ↑ |
| **IET-E** | **Engagement of Substance Use Disorder Treatment (Total)** | 24.1% | 25.4% | 18.2% | 22.0% | ↑ | ↓ |
| **IET-I** | **Initiation of Substance Use Disorder Treatment (Total)** | 49.8% | 48.8% | 48.5% | 49.3% | ↓ | ↓ |
| **PPC-P** | **Prenatal and Postpartum Care - Postpartum Care** | 85.8% | 84.7% | 80.2% | 84.3% | ↓ | ↓ |
| **PPC-T** | **Prenatal and Postpartum Care - Timeliness of Prenatal Care** | 86.1% | 92.9% | 88.8% | 87.9% | ↑ | ↓ |

MCO and PCC plans are compared to the national Medicaid 75th and 90th 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 90th percentile benchmark.
* The MWHM rates for PPC (timeliness sub measure), and IET (engagement sub measure) and the PCCP rate for CIS (combination 10) were below the 90th percentile, but above the 75th percentile.
* The MHWM rates for AMR, FUH, PPC (postpartum sub measure) and IET (initiation sub measure) were below the 75th percentile.

Table 2.b: CG-CAHPS Measures

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Measure Code** | **Measure Name** | **THP** | **WLS** | **ACO-MCO Score** | **Attainment** | **Goal** |
| **CG-CAHPS AD Communication** | **Adult: Overall Rating and Care Delivery: Communication** | 92.1% | 91.7% | 92.9% | ↑ | ↑ |
| **CG-CAHPS AD Integration** | **Adult: Person-Centered Integrated Care: Integration of Care** | 84.8% | 84.3% | 85.1% | ↑ | ↑ |
| **CG-CAHPS AD Knowledge** | **Adult: Person-Centered Integrated Care: Knowledge of Patient** | 85.9% | 86.1% | 86.4% | ↑ | ↑ |
| **CG-CAHPS AD Willingness** | **Adult: Overall Rating and Care Delivery: Willingness to recommend** | 85.7% | 85.5% | 87.5% | ↑ | ↓ |
| **CG-CAHPS CH Communication** | **Child: Overall Rating and Care Delivery: Communication** | 92.8% | 96.6% | 95.7% | ↑ | ↑ |
| **CG-CAHPS CH Integration** | **Child: Person-Centered Integrated Care: Integration of Care** | 83.8% | 82.7% | 85.2% | ↑ | ↓ |
| **CG-CAHPS CH Knowledge** | **Child: Person-Centered Integrated Care: Knowledge of Patient** | 89.0% | 91.1% | 89.4% | ↑ | ↓ |
| **CG-CAHPS CH Willingness** | **Child: Overall Rating and Care Delivery: Willingness to recommend** | 90.3% | 92.5% | 91.3% | ↑ | ↓ |

* The overall ACO-MCO score for all CG-CAHPS measures were above the Attainment thresholds set by EHS.
* Four of the eight overall ACO-MCO CG-CAHPS scores (AD-Communication, AD-Integration, AD-Knowledge, and CH-Communication) were also above the Goal threshold set by EHS. The remaining four overall ACO-MCO CH-CAHPS scores (AD-Willingness, CH-Integration, CH-Knowledge, and CH-Willingness were below the Goal threshold set by EHS.

Table 3 - SCO Performance Measures, 2024 (Measurement Period: Calendar Year 2023)

Table Legend:

1 A lower score represents better performance.

2 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

Table 3.a: HEDIS Measures

| **Measure Code** | **Measure Name** | **CCA** | **FHP** | **SWH** | **THP** | **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\*** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **AMM-A** | **Antidepressant Medication Management - Effective Acute Phase** | 73.7% | 78.5% | 77.0% | 82.0% | 82.0% | 81.6% | 78.6% | ↓ | ↓ | ↑ | ↑ |
| **AMM-C** | **Antidepressant Medication Management - Effective Continuation Phase** | 57.5% | 65.1% | 64.5% | 65.1% | 66.3% | 63.2% | 63.4% | ↓ | ↓ | ↑ | ↑ |
| **CBP** | **Controlling High Blood Pressure** | 83.9% | 71.4% | 67.0% | 76.6% | 80.8% | 82.8% | 77.1% | ↓ | ↓ | ↑ | ↑ |
| **COA-FSA** | **Care for Older Adults: Functional Status Assessment** | 100.0% | 100.0% | 93.7% | 97.9% | 94.9% | 73.2% | 96.2% | NA | N/A | N/A | N/A |
| **COA-Med** | **Care for Older Adults: Medication Review** | 99.1% | 95.8% | 94.3% | 86.4% | 95.4% | 95.8% | 94.8% | N/A | N/A | N/A | N/A |
| **COA-PA** | **Care for Older Adults: Pain Assessment** | 100.0% | 100.0% | 97.9% | 98.4% | 98.0% | 96.8% | 98.7% | N/A | N/A | N/A | N/A |
| **COL** | **Colorectal Cancer Screening (Total)** | 79.8% | 68.5% | 76.1% | 72.8% | 87.3% | 74.9% | 79.1% | ↑ | ↓ | ↑ | ↑ |
| **DAE**1 | **Use of High-Risk Medications in Older Adults (Total)** | 25.6% | 25.5% | 17.0% | 20.3% | 21.2% | 17.9% | 21.6% | ↓ | ↓ | N/A | N/A |
| **DDE** 1 | **Potentially Harmful Drug-Disease Interactions in Older Adults (Total)** | 34.2% | 38.7% | 30.0% | 34.0% | 32.6% | 34.8% | 33.4% | ↓ | ↓ | N/A | N/A |
| **FUH-30** | **Follow-Up After Hospitalization for Mental Illness - 30 Days (Total)** | 71.4% | 45.1% | 48.6% | 69.6% | 54.4% | N/A | 60.5% | ↑ | ↓ | ↓ | ↓ |
| **FUH-7** | **Follow-Up After Hospitalization for Mental Illness - 7 Days (Total)** | 52.0% | 23.5% | 31.4% | 47.8% | 31.6% | N/A | 39.5% | ↑ | ↓ | ↓ | ↓ |
| **IET-E** | **Engagement of Substance Use Disorder Treatment (Total)** | 6.6% | 5.0% | 5.2% | 4.2% | 2.9% | 6.7% | 4.6% | ↓ | ↓ | ↓ | ↓ |
| **IET-I** | **Initiation of Substance Use Disorder Treatment (Total)** | 40.7% | 38.8% | 53.8% | 32.1% | 30.4% | 61.3% | 38.1% | ↓ | ↓ | ↓ | ↓ |
| **MLTSS-7** | **Managed Long-Term Services and Supports Minimizing Facility Length of Stay** | 1.47 | 0.96 | 1.35 | 1.15 | 0.97 | 1.10 | 1.17 | N/A | N/A | N/A | N/A |
| **OMW** | **Osteoporosis Management in Women Who Had a Fracture** | 12.1% | 73.3% | 18.9% | 27.8% | 36.0% | N/A | 30.1% | ↓ | ↓ | N/A | N/A |
| **PBH** | **Persistence of Beta-Blocker Treatment After a Heart Attack** | N/A | N/A | N/A | N/A | N/A | N/A | 78.1% | ↑ | ↓ | ↑ | ↑ |
| **PCE-B** | **Pharmacotherapy Management of COPD Exacerbation - Bronchodilator** | 91.8% | 86.5% | 87.4% | 86.1% | 92.2% | 92.7% | 89.5% | ↑ | ↓ | ↑ | ↓ |
| **PCE-C** | **Pharmacotherapy Management of COPD Exacerbation - Corticosteroid** | 76.4% | 74.8% | 73.6% | 74.7% | 77.0% | 87.3% | 76.1% | ↓ | ↓ | ↓ | ↓ |
| **PCR** 1 | **Plan All-Cause Readmission - 30 day readmits (Total 65+) (O/E ratio)** | 1.36 | 1.01 | 1.01 | 1.01 | 1.16 | 1.08 | 1.12 | ↓ | ↓ | N/A | N/A |
| **SPR** | **Use of Spirometry Testing in the Assessment and Diagnosis of COPD** | 26.7% | 23.3% | 19.9% | 28.1% | 22.7% | 21.1% | 23.5% | ↓ | ↓ | ↓ | ↓ |
| **TRC-Eng** | **Transitions of Care - Patient Engagement After Inpatient Discharge (65+)** | 89.5% | 88.1% | 87.6% | 91.2% | 95.4% | 90.8% | 90.8% | ↓ | ↓ | N/A | N/A |
| **TRC-IP** | **Transitions of Care - Notification of Inpatient Admission (65+)** | 79.8% | 32.6% | 13.4% | 32.6% | 19.0% | 49.4% | 39.3% | ↓ | ↓ | N/A | N/A |
| **TRC-MRP** | **Transitions of Care - Medication Reconciliation Post-Discharge (65+)** | 85.3% | 92.7% | 57.7% | 54.5% | 86.4% | 83.7% | 77.8% | ↓ | ↓ | N/A | N/A |
| **TRC-RD** | **Transitions of Care - Receipt of Discharge Information (65+)** | 75.6% | 21.9% | 15.3% | 24.6% | 26.5% | 64.2% | 38.6% | ↑ | ↓ | N/A | N/A |

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

* The MHWM rate for PCE (Bronchodilator) is above the 75th percentile, but below the 90th percentile for both Medicare and Medicaid.
* The MHWM rates for COL and PBH are above the 75th but below the 90th percentile for Medicare, but above the 90th percentile for Medicaid.
* The MHWM rates for AMM (both the acute and continuation cohorts), CBP is below the 75th percentile for Medicare, but above the 75th percentile for Medicaid.
* The MHWM rates for FUH 7- and 30-day cohorts are above the 75th percentile for Medicare, but below the 75th percentile for Medicaid.
* The MHWM rates for IET (both engagement and initiation cohorts), SPR, and PCE (Corticosteroid) are below the 75th percentile for both Medicare and Medicaid.
* The MHWM rate for TRC-RD is above the national Medicare 75th percentile benchmark; rates for all other TRC sub-measures were below the national Medicare 75th percentile benchmark. This measure does not have a Medicaid benchmark.
* The MHWM rate for PCR performed worse that 75th percentile for both Medicare and Medicaid.
* The MHWM rate for DDE (Total) and DAE (Total) performed worse than both the Medicare 75th percentile for Medicare. These measure do not have a Medicaid benchmark.

Table 3.b: MA PDP CAHPS Measures

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure Code** | **Measure Name** | **CCA** | **FHP** | **SWH** | **THP** | **UHC** | **WLS** | **MH Weighted Mean** | **Medicare Advantage 2024 National Mean Score** |
| **MA-PDP CAHPS** | **Getting Needed Care** | 81.0% | 79.0% | 77.0% | 76.0% | 77.0% | 78.0% | 78.0% | ↓ |
| **MA-PDP CAHPS** | **Getting Appointments and Care Quickly** | 82.0% | 82.0% | 82.0% | 81.0% | 78.0% | 80.0% | 81.0% | ↓ |
| **MA-PDP CAHPS** | **Customer Service** | 91.0% | 89.0% | 87.0% | 87.0% | 88.0% | 89.0% | 88.0% | ↓ |
| **MA-PDP CAHPS** | **Rating of Health Care Quality** | 88.0% | 86.0% | 84.0% | 83.0% | 86.0% | 86.0% | 86.0% | ↓ |
| **MA-PDP CAHPS** | **Rating of Health Plan** | 90.0% | 90.0% | 86.0% | 86.0% | 89.0% | 87.0% | 88.0% | -- |
| **MA-PDP CAHPS** | **Care Coordination** | 84.0% | 83.0% | 85.0% | 82.0% | 86.0% | 85.0% | 84.0% | ↓ |
| **MA-PDP CAHPS** | **Annual Flu Vaccine** | 73.0% | 75.0% | 80.0% | 78.0% | 76.0% | 77.0% | 76.0% | ↑ |
| **MA-PDP CAHPS** | **Pneumonia Vaccine** | 68.0% | 77.0% | 65.0% | 75.0% | 70.0% | 70.0% | 70.0% | N/A |
| **MA-PDP CAHPS** | **Getting Needed Prescription Drugs** | 87.0% | 89.0% | 87.0% | 87.0% | 87.0% | 87.0% | 87.0% | ↓ |
| **MA-PDP CAHPS** | **Rating of Prescription Drug Plan** | 90.0% | 90.0% | 86.0% | 86.0% | 88.0% | 87.0% | 88.0% | -- |

For the Medicare Advantage Prescription Drug Plan (MA PDP) CAHPS, SCO plans are compared to the Medicare Advantage 2024 National Mean Score.

* The MHWM rate Annual Flu Vaccine was above the Medicare Advantage 2024 National Mean Score.
* The MHWM rates for two of the compositive measures (Rating of Health Plan and Rating of Prescription Drug Plan) were the same as the Medicare Advantage 2024 National Mean Score.
* All other MHWM rates (Getting Needed Care, Getting Appointments and Care Quickly, Rating of Health Care Quality, Care Coordination, and Getting Needed Prescription Drugs) were below the Medicare Advantage 2024 National Mean Score.

Table 4 - One Care Performance Measures, 2024 (Measurement Period: Calendar Year 2023)

Table Legend:

1 A lower score represents better performance.

\* ↑ = Weighted Mean Performance Better Than Benchmark ↓ = Weighted Mean Performance Worse Than Benchmark

Table 4.a: HEDIS Measures

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure Code** | **Measure Name** | **CCA** | **THP** | **UHC** | **MH Weighted Mean** | **Nat'l Medicare 75th Percentile\*** | **Nat'l Medicare 90th Percentile\*** | **Nat'l Medicaid 75th Percentile\*** | **Nat'l Medicaid 90th Percentile\*** |
| **BCS** | **Breast Cancer Screening** | 71.6% | 67.5% | N/A | 71.2% | ↓ | ↓ | ↑ | ↑ |
| **CBP** | **Controlling High Blood Pressure** | 78.7% | 73.2% | 49.3% | 76.2% | ↓ | ↓ | ↑ | ↑ |
| **FUH-30** | **Follow-Up After Hospitalization for Mental Illness - 30 Days (Total)** | 65.0% | 71.5% | 58.3% | 65.4% | ↑ | ↓ | ↑ | ↓ |
| **FUH-7** | **Follow-Up After Hospitalization for Mental Illness - 7 Days (Total)** | 44.6% | 46.7% | 31.3% | 43.6% | ↑ | ↓ | ↑ | ↓ |
| **HBD <8%** | **Hemoglobin A1c Control for Patients with Diabetes - HbA1c <8%** | 66.7% | 64.0% | 58.9% | 65.9% | ↓ | ↓ | ↑ | ↑ |
| **HBD-Poor** 1 | **Hemoglobin A1c Control for Patients with Diabetes - Poor HbA1c Control** | 22.8% | 27.4% | 32.4% | 24.0% | ↓ | ↓ | ↑ | ↑ |
| **IET-E** | **Engagement of Substance Use Disorder Treatment (Total)** | 10.5% | 8.9% | 7.2% | 10.0% | ↑ | ↓ | ↓ | ↓ |
| **IET-I** | **Initiation of Substance Use Disorder Treatment (Total)** | 41.9% | 34.4% | 43.3% | 40.7% | ↓ | ↓ | ↓ | ↓ |
| **PCR** 1 | **Plan All-Cause Readmission - 30 day readmits (Total <65) (O/E ratio)** | 1.43 | 1.33 | 1.84 | 1.43 | ↓ | ↓ | ↓ | ↓ |
| **TRC-Eng** | **Transitions of Care - Patient Engagement After Inpatient Discharge (Ages 18-64)** | 90.8% | 78.1% | 85.2% | 88.4% | ↑ | ↓ | N/A | N/A |
| **TRC-IP** | **Transitions of Care - Notification of Inpatient Admission (Ages 18-64)** | 77.5% | 10.7% | 22.1% | 62.7% | ↑ | ↓ | N/A | N/A |
| **TRC-MRP** | **Transitions of Care - Medication Reconciliation Post-Discharge (Ages 18-64)** | 59.4% | 33.8% | 71.8% | 56.3% | ↓ | ↓ | N/A | N/A |
| **TRC-RD** | **Transitions of Care – Receipt of Discharge Information (Ages 18-64)** | 80.6% | 10.0% | 20.0% | 64.8% | ↑ | ↑ | N/A | N/A |

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

* The MHWM rates HBD A1c Control, CBP, and BCS are below the 75th percentile for Medicare, but above the 90th percentile for Medicaid
* The MHWM rate for FUH (both sub-measures) is above the 75th percentile for Medicaid and Medicare.
* The MHWM rate for IET (engagement) is above the 75th percentile for Medicare, but below the 75th percentile for Medicaid.
* The MHWM rate for IET (Initiation) is below the 75th percentile for both Medicare and Medicaid.
* The MHWM rates for PCR and the mean for HBD (Poor Control) were higher than both the 75th and 90th percentile for both Medicare and Medicaid, meaning that plan performance failed to meet those benchmarks (because a lower rate signifies better performance).
* The MHWM rate for TRC-RD was above the 90th percentile for Medicare, the MHWM rates for TRC-ENG and TRC-IP were above the 75th percentile but below the 90th percentile, while the MHWM for TRC-MRP was below the 75th percentile. This measure does not have a Medicaid benchmark.

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

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure Code** | **Measure Name** | **CCA** | **THP** | **UHC** | **MH Weighted Mean** | **Medicare Advantage FFS Average Score** | **MMP Quality Withhold Benchmark Goal** |
| **LTS Coord.** | **Access to LTS Coordinator** | 99.8% | 98.4% | 35.5% | 79.6% | N/A | ↓ |
| **Care Plan Goals** | **Documentation of Care Plan Goals** | 100.0% | 93.5% | 98.1% | 99.2% | N/A | ↑ |
| **MLTSS 7** | **Minimizing Facility Length of Stay** | 1.72 | 1.62 | 1.07 | 1.61 | N/A | ↑ |
| **Timely Assessment** | **Timely Assessment of New members** | 92.0% | 95.3% | 64.7% | 88.0% | N/A | ↓ |
| **Demo Info** | **Tracking Demographic Information** | 86.2% | 68.5% | 84.9% | 82.9% | N/A | ↓ |
| **MA-PDP CAHPS** | **Getting Needed Care** | 79.0% | N/A | 78.0% | 79.0% | ↓ | N/A |
| **MA-PDP CAHPS** | **Getting Appointments and Care Quickly** | 81.0% | N/A | 80.0% | 81.0% | ↓ | N/A |
| **MA-PDP CAHPS** | **Customer Service** | 90.0% | N/A | 88.0% | 90.0% | ↑ | N/A |
| **MA-PDP CAHPS** | **Rating of Health Care Quality** | 87.0% | N/A | 86.0% | 87.0% | ↑ | N/A |
| **MA-PDP CAHPS** | **Rating of Health Plan** | 88.0% | N/A | 83.0% | 87.0% | ↑ | N/A |
| **MA-PDP CAHPS** | **Care Coordination** | 83.0% | N/A | 85.0% | 83.0% | ↓ | N/A |
| **MA-PDP CAHPS** | **Annual Flu Vaccine** | 64.0% | 71% | 58.0% | 65.0% | ↓ | N/A |
| **MA-PDP CAHPS** | **Pneumonia Vaccine** | 53.0% | 52% | 45.0% | 52.0% | N/A | N/A |
| **MA-PDP CAHPS** | **Getting Needed Prescription Drugs** | 90.0% | N/A | 86.0% | 89.0% | N/A | N/A |
| **MA-PDP CAHPS** | **Rating of Prescription Drug Plan** | 90.0% | N/A | 86.0% | 89.0% | N/A | 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 MHWM rates for three of the five state-defined measures (LTS Coord., Timely Assessment, and Demo Info) were below the MMP Quality Withhold Benchmark Goal. The MHWM rates for the remaining two state-defined measures (Care Plan Goals and MLTSS 7) were above the Quality withhold benchmarks.
* The MHWM rates for four of the ten MA-PDP CAHPS composite measures (Getting Needed Care, Getting Appointments and Care Quickly, Care Coordination, and Annual Flu Vaccine) were below the Medicare Advantage FFS Average.
* Three of the ten the MA-PDP CAHPS composite measures (Customer Service, Rating of HealthCare Quality, and Rating of Health Plan) were above the MA FFS average. The remaining MA-PDP CAHPS composite measures did not have a FFS Average score benchmark.

Table 5 - Massachusetts Behavioral Health Partnership (BH PIHP) Measures, 2024 (Measurement Period: Calendar Year 2023)

\* ↑ = BH PIHP Performance Better Than Benchmark ↓ = BH PIHP Performance Worse Than Benchmark

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Measure Code** | **Measure Name** | **Measure Rate** | **Nat'l Medicaid 75th Percentile\*** | **Nat'l Medicaid 90th Percentile\*** |
| **ADD-I** | **Follow-Up Care for Children Prescribed ADHD Medication - Initiation** | 36.5% | ↓ | ↓ |
| **ADD-C** | **Follow-Up Care for Children Prescribed ADHD Medication - Continuation** | 37.0% | ↓ | ↓ |
| **AMM-A** | **Antidepressant Medication Management - Effective Acute Phase** | 71.3% | ↑ | ↓ |
| **AMM-C** | **Antidepressant Medication Management - Effective Continuation Phase** | 57.1% | ↑ | ↓ |
| **APM** | **Metabolic Monitoring for Children and Adolescents on Antipsychotics - Metabolic Testing (Total)** | 35.1% | ↓ | ↓ |
| **FUA-30** | **Follow-Up After ED Visit for SUD - 30 Days (Total)** | 49.2% | ↑ | ↓ |
| **FUA-7** | **Follow-Up After ED Visit for SUD - 7 Days (Total)** | 37.1% | ↑ | ↓ |
| **FUH-30** | **Follow-Up After Hospitalization for Mental Illness - 30 Days (Total)** | 61.1% | ↓ | ↓ |
| **FUH-7** | **Follow-Up After Hospitalization for Mental Illness - 7 Days (Total)** | 41.3% | ↓ | ↓ |
| **FUM-30** | **Follow-Up After ED Visit for Mental Illness - 30 Days (Total)** | 81.9% | ↑ | ↑ |
| **FUM-7** | **Follow-Up After ED Visit for Mental Illness - 7 Days (Total)** | 74.3% | ↑ | ↑ |
| **IET-E** | **Engagement of Substance Use Disorder Treatment (Total)** | 18.8% | ↓ | ↓ |
| **IET-I** | **Initiation of Substance Use Disorder Treatment (Total)** | 46.6% | ↓ | ↓ |
| **IPFQR-30 Day** | **30-Day Unplanned Readmission Following Psychiatric Hospitalization** | 23.0% | N/A | N/A |
| **OUD** | **Use of Pharmacotherapy for Opioid Use Disorder** | 86.0% | N/A | N/A |
| **POD** | **Pharmacotherapy for Opioid Use Disorder (Total)** | 46.0% | ↑ | ↑ |
| **SSD** | **Diabetes Screening for People with Schizophrenia or Bipolar and Antipsychotics** | 78.9% | ↓ | ↓ |

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

* The MassHealth Weighted Mean (MHWM) rates for FUM (7 and 30 day follow-up) and POD are above the national Medicaid 90th percentile benchmark.
* The MHWM rates for AMM (Acute and Continuation) and FUA (both the 7 and 30 day follow-up), are above the Medicaid 75th percentile, and below the 90th 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 75th percentile.

Tables 6 & 7 - ACO Performance Measures, 2024 (Measurement Period: Calendar Year 2023)

Table 6 - ACO Performance Measures, Community Care Cooperative - Tufts UMass Memorial Health

Table Legend:

1 ACO weighted mean includes the 17 ACOs in Table 6 and Table 7.

\* ↑ = Weighted Mean Performance Better Than Benchmark ↓ = Weighted Mean Performance Worse Than Benchmark

Table 6a: HEDIS Measures

| **Measure Code** | **Measure Name** | **C3** | **FH 365** | **FH ATRIUS** | **FH BERK** | **HNE** | **MGB** | **STEWARD** | **THP CHA** | **THP UMMS** | **ACO WM**1 | **Nat’l Medicaid 75th Percentile\*** | **Nat'l Medicaid 90th Percentile\*** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **CDF** | **Screening for Depression and Follow-up Plan** | 51.5% | 34.7% | 39.6% | 23.6% | 54.3% | 68.1% | 50.0% | 38.7% | 52.8% | 50.7% | N/A | N/A |
| **FUA-7** | **Follow-Up After ED Visit for SUD - 7 Days (Total)** | 38.8% | 31.2% | 25.0% | 45.6% | 35.1% | 37.4% | 37.0% | 36.8% | 37.2% | 37.7% | ↑ | ↑ |
| **FUH-7** | **Follow-Up After Hospitalization for Mental Illness - 7 Days (Total)** | TBD | 43.3% | 42.8% | 47.6% | 30.1% | 47.2% | TBD | 49.5% | 41.9% | 43.6% | ↓ | ↓ |
| **FUM-7** | **Follow-Up After ED Visit for Mental Illness - 7 Days (Total)** | 70.7% | 77.3% | 68.9% | 85.4% | 66.0% | 69.0% | 75.5% | 62.5% | 73.1% | 72.4% | ↑ | ↑ |
| **IET-E** | **Engagement of Substance Use Disorder Treatment (Total)** | 28.9% | 13.4% | 10.1% | 36.7% | 25.2% | 17.3% | 18.3% | 21.5% | 16.9% | 20.8% | ↑ | ↓ |
| **IET-I** | **Initiation of Substance Use Disorder Treatment (Total)** | 55.0% | 33.8% | 33.7% | 59.5% | 55.1% | 38.2% | 44.6% | 49.5% | 39.2% | 50.6% | ↑ | ↓ |
| **PPC-P** | **Prenatal and Postpartum Care - Postpartum Care** | 79.6% | 86.8% | 79.4% | 90.9% | 79.8% | 87.0% | 81.0% | 93.2% | 84.5% | 84.7% | ↑ | ↓ |
| **PPC-T** | **Prenatal and Postpartum Care - Timeliness of Prenatal Care** | 82.7% | 89.8% | 89.9% | 89.9% | 90.8% | 93.2% | 89.8% | 98.1% | 95.0% | 90.0% | ↑ | ↓ |

Table 6b: State-Defined and MA PDP CAHPS Measures

| **Measure Code** | **Measure Name** | **C3** | **FH 365** | **FH ATRIU** | **FH BERK** | **HNE** | **MGB** | **STEWARD** | **THP CHA** | **THP UMMS** | **ACO -MCO Score** | **Attainment** | **Goal** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **CG-CAHPS AD Communication** | **Adult: Overall Rating and Care**  **Delivery: Communication** | 92.7% | 95.4% | 93.7% | 93.1% | 92.5% | 93.1% | 93.8% | 93.2% | 92.3% | 92.9% | ↑ | ↑ |
| **CG-CAHPS AD Integration** | **Adult: Person-Centered Integrated**  **Care: Integration of Care** | 86.5% | 87.6% | 87.1% | 86.4% | 84.3% | 85.5% | 85.6% | 84.2% | 83.5% | 85.1% | ↑ | ↑ |
| **CG-CAHPS AD Knowledge** | **Adult: Person-Centered Integrated**  **Care: Knowledge of Patient** | 84.9% | 88.7% | 87.5% | 87.3% | 85.5% | 87.0% | 87.9% | 86.2% | 86.6% | 86.4% | ↑ | ↑ |
| **CG-CAHPS AD Willingness** | **Adult: Overall Rating and Care**  **Delivery: Willingness to recommend** | 87.4% | 91.0% | 89.1% | 88.0% | 86.5% | 88.4% | 89.1% | 88.0% | 87.1% | 87.5% | ↑ | ↓ |
| **CG-CAHPS CH Communication** | **Child: Overall Rating and Care Delivery: Communication** | 94.2% | 96.5% | 96.3% | 97.9% | 92.8% | 96.7% | 96.5% | 94.9% | 95.6% | 95.7% | ↑ | ↑ |
| **CG-CAHPS CH Integration** | **Child: Person-Centered Integrated Care: Integration of Care** | 76.5% | 89.1% | 87.9% | 89.1% | 78.5% | 86.7% | 86.4% | 80.6% | 85.9% | 85.2% | ↑ | ↓ |
| **CG-CAHPS CH Knowledge** | **Child: Person-Centered Integrated Care: Knowledge of Patient** | 86.0% | 91.0% | 91.4% | 91.7% | 86.2% | 92.2% | 90.1% | 88.5% | 89.8% | 89.4% | ↑ | ↓ |
| **CG-CAHPS CH Willingness** | **Child: Overall Rating and Care Delivery: Willingness to recommend** | 88.3% | 94.0% | 94.1% | 92.4% | 87.2% | 93.3% | 92.1% | 88.8% | 91.3% | 91.3% | ↑ | ↓ |

Table 7 - ACO Performance Measures, WellSense Community Alliance - WellSense Signature

Table Legend:

1 ACO weighted mean includes the 17 ACOs in Table 6 and Table 7.

\* ↑ = Weighted Mean Performance Better Than Benchmark ↓ = Weighted Mean Performance Worse Than Benchmark

Table 7a: HEDIS Measures

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Measure Code** | **Measure Name** | **WLS BACO** | **WLS BCH** | **WLS BILH** | **WLS CARE** | **WLS EBNHC** | **WLS MERCY** | **WLS SCOAST** | **WLS SIGN** | **ACO WM**1 | **Nat’l Medicaid 75th Percentile\*** | **Nat'l Medicaid 90th Percentile\*** |
| **CDF** | **Screening for Depression and Follow-up Plan** | 48.2% | 59.8% | 40.5% | 47.5% | 64.3% | 27.5% | 42.6% | 59.3% | 50.7% | N/A | N/A |
| **FUA-7** | **Follow-Up After ED Visit for SUD - 7 Days (Total)** | 39.3% | 28.7% | 37.8% | 32.9% | 42.8% | 38.8% | 37.9% | 43.2% | 37.7% | ↑ | ↑ |
| **FUH-7** | **Follow-Up After Hospitalization for Mental Illness - 7 Days (Total)** | 46.4% | 53.5% | 44.5% | 40.0% | 46.7% | 57.0% | 49.7% | 56.6% | 43.6% | ↓ | ↓ |
| **FUM-7** | **Follow-Up After ED Visit for Mental Illness - 7 Days (Total)** | 71.8% | 82.4% | 69.6% | 68.0% | 69.1% | 85.2% | 81.0% | 66.3% | 72.4% | ↑ | ↑ |
| **IET-E** | **Engagement of Substance Use Disorder Treatment (Total)** | 19.8% | 11.3% | 18.2% | 20.4% | 12.6% | 22.4% | 15.9% | 21.9% | 20.8% | ↑ | ↓ |
| **IET-I** | **Initiation of Substance Use Disorder Treatment (Total)** | 52.5% | 43.3% | 48.8% | 54.3% | 48.4% | 49.8% | 43.3% | 60.5% | 50.6% | ↑ | ↓ |
| **PPC-P** | **Prenatal and Postpartum Care - Postpartum Care** | 91.2% | 83.2% | 87.9% | 81.8% | 93.0% | 88.7% | 90.6% | 87.0% | 84.7% | ↑ | ↓ |
| **PPC-T** | **Prenatal and Postpartum Care - Timeliness of Prenatal Care** | 93.4% | 92.6% | 95.5% | 93.4% | 96.3% | 91.7% | 95.0% | 93.3% | 90.0% | ↑ | ↓ |

Table 7b: CG-CAHPS Measures

| **Measure Code** | **Measure Name** | **WLS BACO** | **WLS BCH** | **WLS BILH** | **WLS CARE** | **WLS EBNHC** | **WLS MERCY** | **WLS SCOAST** | **WLS SIGN** | **ACO -MCO Score** | **Attainment** | **Goal** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **CG-CAHPS AD Communication** | **Adult: Overall Rating and Care**  **Delivery: Communication** | 94.3% | 95.1% | 93.9% | 91.5% | 94.0% | 89.1% | 94.0% | 92.4% | 92.9% | ↑ | ↑ |
| **CG-CAHPS AD Integration** | **Adult: Person-Centered Integrated**  **Care: Integration of Care** | 84.4% | 86.0% | 86.7% | 84.6% | 80.9% | 81.9% | 88.6% | 84.4% | 85.1% | ↑ | ↑ |
| **CG-CAHPS AD Knowledge** | **Adult: Person-Centered Integrated**  **Care: Knowledge of Patient** | 87.6% | 90.3% | 87.0% | 85.3% | 87.7% | 81.6% | 87.6% | 85.5% | 86.4% | ↑ | ↑ |
| **CG-CAHPS AD Willingness** | **Adult: Overall Rating and Care**  **Delivery: Willingness to recommend** | 89.0% | 91.5% | 88.1% | 85.5% | 89.7% | 81.9% | 89.1% | 86.6% | 87.5% | ↑ | ↓ |
| **CG-CAHPS CH Communication** | **Child: Overall Rating and Care Delivery: Communication** | 96.4% | 96.8% | 95.5% | 95.4% | 95.0% | 93.1% | 98.8% | 93.1% | 95.7% | ↑ | ↑ |
| **CG-CAHPS CH Integration** | **Child: Person-Centered Integrated Care: Integration of Care** | 85.9% | 87.8% | 86.9% | 86.2% | 86.5% | 85.2% | 93.9% | 81.8% | 85.2% | ↑ | ↓ |
| **CG-CAHPS CH Knowledge** | **Child: Person-Centered Integrated Care: Knowledge of Patient** | 89.4% | 92.4% | 87.8% | 87.8% | 89.4% | 85.4% | 92.7% | 86.0% | 89.4% | ↑ | ↓ |
| **CG-CAHPS CH Willingness** | **Child: Overall Rating and Care Delivery: Willingness to recommend** | 91.4% | 94.4% | 89.2% | 90.5% | 91.1% | 86.7% | 94.7% | 87.9% | 91.3% | ↑ | ↓ |

Results in the table represent performance on both adult and child CG-CAHPS. The adult survey results are indicated by AD and the child survey results are indicated by CH.

* The MHWM rates for FUA (7 day) and FUM (7 day) are above the Medicaid 90th percentile.
* The MHWM rates for IET (both cohorts) and PCC (both the timeliness and postpartum cohorts) are above the Medicaid 75th percentile, but below the Medicaid 90th percentile.
* The MHWM rate for FUH (7 day) is below the Medicaid 75th percentile.
* The overall ACO-MCO score for all CG-CAHPS measures were above the Attainment thresholds set by EHS.
* Four of the eight overall ACO-MCO CG-CAHPS scores (AD-Communication, AD-Integration, AD-Knowledge, and CH-Communication) were also above the Goal threshold set by EHS. The remaining four overall ACO-MCO CH-CAHPS scores (AD-Willingness, CH-Integration, CH-Knowledge, and CH-Willingness were below the Goal threshold set by EHS.