

2020-2021 Annual Report Bassett Accountable Care Partners, LLC

A Multi-Payer Report of Quality Performance Results



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Overview

The New York State Accountable Care Organization Scorecard Report is a multi-payer view of performance results on a set of seven quality measures for Accountable Care Organizations (ACOs) that have been issued a certificate of authority by the New York State Department of Health (NYSDOH). Public Health Law (PHL) Article 29-E requires the NYSDOH to establish a program governing the approval of Accountable Care Organizations. PHL § 2999-p defines an ACO as "an organization of clinically integrated health care providers that work together to provide, manage, and coordinate health care (including primary care) for a defined population; with a mechanism for shared governance; the ability to negotiate, receive, and distribute payments; and accountability for the quality, cost, and delivery of health care to the ACO's patients" and that has been issued a certificate of authority by the NYSDOH.

ACO Profile and Quality Scorecard Report

The ACO profile presented in the following pages is intended to provide consumers with a better understanding of Bassett Accountable Care Partners, LLC's structure as an all-payer ACO. The profile includes the following information:

- Characteristics of the organization
- Type of ACO (e.g., Hospital, Provider-led, Hybrid)
- Regions where services are provided
- Number or participants and provider/suppliers contracted by the ACO
- Number of patients attributed to the ACO
- Quality of care provided under the ACO umbrella
- Endeavors to implement evidence-based care services, telemedicine, use of electronic medical records, and other initiatives intended to accomplish the goals of accountable care.

Each profile was created from supplemental, non-confidential information submitted by the ACO through ACO certification, a survey disseminated by NYSDOH to the ACO, and other publicly available data.

This report displays performance results based on data submitted by the ACO contracted managed care organizations (MCOs). Details on how data is collected can be found in the technical notes section of this report. This report does not contain Protected Health Information (PHI), and results are shared with each ACO prior to publication

Section 1. Bassett Accountable Care Partners, LLC Profile

ACO Type: Academic/Teaching



Academic/Teaching Hospitals



Service Area: Bassett Accountable Care Partners, LLC's Providers by County

ACO Provided Care Coordination Highlights

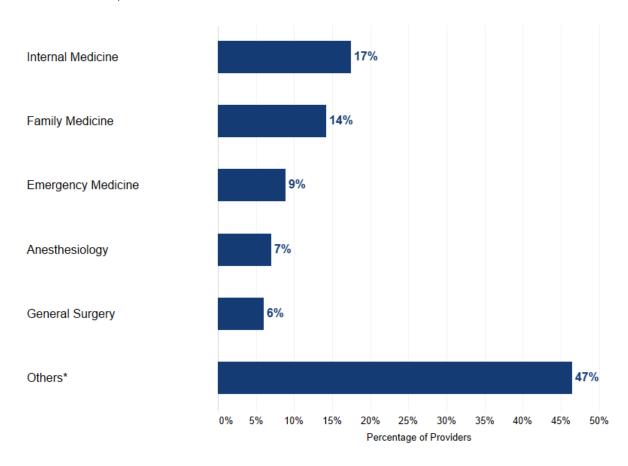
Bassett Accountable Care Partners LLC (Bassett) is an Accountable Care Organization (ACO) in the Central region of New York State. The ACO participates in the Centers for Medicare & Medicaid Services' (CMS) Medicare Shared Savings Program (MSSP). The MSSP program allows groups of providers and suppliers in the Bassett Healthcare network to agree to be held accountable for the quality, cost, and experience of care of an assigned Medicare fee-for-service (FFS) beneficiary population. As an integrated network, all Bassett providers are connected to a single electronic health record system.

One of the major foundations of the Bassett ACO is their Ambulatory Intensive Pharmacotherapeutics (AIP) program, which uses a Clinical Pharmacy Specialist to optimize medication regimens that match established best practices, through intensive medical chart review, with the optimal formulary options. The AIP advanced medication reconciliation service reduces medication-related adverse events, improves patient care, and reduces cost. Bassett ACO also supports various Bassett Healthcare initiatives, including opioid addiction treatment in primary care, care management, reducing unnecessary opioid prescribing in the Department of Surgery, low-dose CT scanning for lung cancer, chronic disease self-management programs, and telehealth initiatives to further improve member health and reduce spending.

Section 2. Bassett Accountable Care Partners, LLC Report

2.1 Distribution of Specialties for Providers in Bassett Accountable Care Partners, LLC's Network

Figure 1. Most Common Specialties for Providers in Bassett Accountable Care Partners, LLC's Network

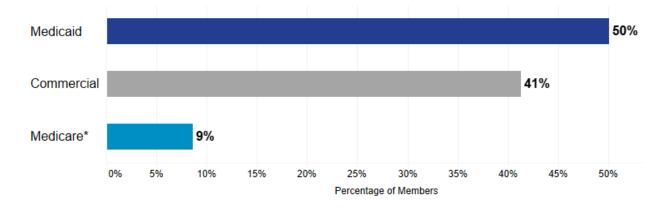


^{*} The Others category includes all other specialty types including but not limited to Pediatrics (5%), Orthopedic Surgery (4%), and Cardiology (4%).

Note: Provider information was collected in 2020 for Measurement Year (MY) 2020. See: **Technical Notes.**

2.2 Distribution of Members Attributed to a Provider with Bassett Accountable Care Partners, LLC by Payer

Figure 2. Members Qualifying for a Quality Measure Attributed to a Participating Provider with Bassett Accountable Care Partners, LLC by Payer



^{*} Medicare Advantage results only. See: **Technical Notes**.

Note: This table represents a defined subset of members in the ACO's network. Inclusion criteria was limited to members who met denominator criteria for one or more health care quality measures during the MY 2020. Member attribution information was collected from January 1 – December 31, 2020, for the MY 2020.

Member attribution to a given product is not dependent on whether there is a defined contract, as noted in Table 1, between the ACO and the health plan's payer.

2.3 Quality Measure Results of Members in Bassett Accountable Care Partners, LLC

Table 1. 2020-2021 Quality Measure Results for Eligible Members in Bassett Accountable Care Partners, LLC by Payer

		Overall Results						Payer Results	
Domain	Measure	Denominator	Numerator	Percent	Commercial (%)	Medicaid (%)	Medicare* (%)		
Prevention	Breast Cancer Screening	6,359	4,957	78	82	65	79		
	Cervical Cancer Screening	13,249	9,337	70	76	64			
	Childhood Immunization Status Combo 3	672	534	79	74	81			
	Chlamydia Screening in Women (16-24 Years)	2,436	1,253	51	49	54	-		
	Colorectal Cancer Screening	13,578	8,737	64	68	52	67		
Chronic Disease	Comprehensive Diabetes Care Eye Exams	3,620	1,994	55	53	51	65		
	Comprehensive Diabetes Care HbA1c Testing	2,811	2,434	87	86	87			

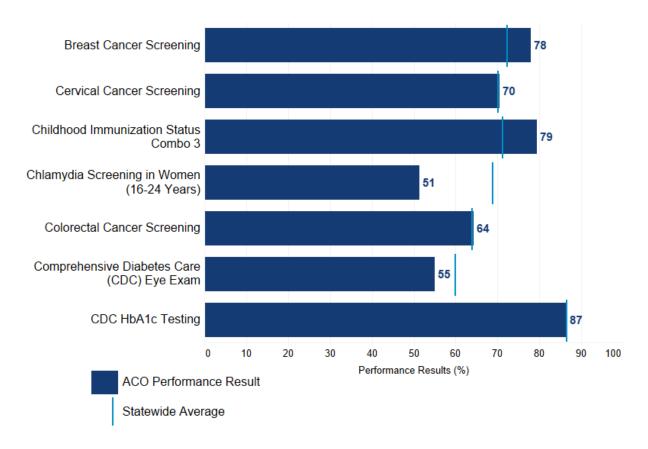
⁻⁻ Measure result not reported

Note: Results are based on MY 2020. Diabetes denominators differ across measures because not all diabetes measures are calculated and reported for all payers. See Appendix A for full description of each of the measures included in this table. See Appendices B, C, and D for payer-specific denominator and numerator values.

^{*} Medicare Advantage results only.

Section 3. Statewide Benchmark Comparisons

Figure 3. 2020-2021 Bassett Accountable Care Partners, LLC Quality Measure Results Compared with the Statewide Average



Note: Results shown are averaged across all Payers (Commercial, Medicaid, Medicare). Results are based on MY 2020. This table includes results averaged across all products. For Medicare members, only Medicare Advantage results are included.

Technical Notes

DEFINITIONS

Domain

The measures are categorized by two domains: Prevention and Chronic Disease.

Denominator, Numerator, Percent

For each measure, the denominator represents the total number of members that are eligible for that measure, and the numerator represents the number of members who meet the specific criteria for the measure. The Percent represents the numerator divided by the denominator, multiplied by 100 unless otherwise noted.

Measures

Data included in this report were collected during calendar year 2021, from January 1, 2020 through December 31, 2020 for the 2020 Measurement Year (MY 2020) using the 2020 NYS ACO Core Measure Set.

The quality measures in the NYS ACO Core Measure Set are from the Healthcare Effectiveness Data and Information Set (HEDIS®) measures established by the National Committee for Quality Assurance (NCQA). Please refer to Appendix A of this report for a list of the measures and measure descriptions. Results for these measures were calculated using health plan reported results for members attributed to practices participating in the ACO"s network.

Methods

Health plans operating in NYS submitted Patient-Centered Medical Home (PCMH) files containing quality measurement results for members who were included in at least one of the ACO quality measure core set during MY 2020. In addition to primary care provider (PCP) information for each member, the file contained member-specific details on denominator inclusion and numerator compliance for each measure in the ACO core set. The National Provider Identifier (NPI) to whom the member was attributed was matched to the NPI and provider Practice Tax Identification Number (TIN) supplied by each ACO; this indicated that the practice was part of the ACO provider network. Members were attributed to provider practices using each health plan's attribution method (see section below: Member Attribution). Member-level data was aggregated across health plans linking the Practice TIN of the PCP to whom the member was attributed to a list of participating providers reported by the ACO. Linking quality measurement information for members to ACO-participating providers allows NYSDOH to produce aggregated results at the ACO level for selected quality measures.

Statewide benchmarks were calculated using the MY 2020 health-plan submitted PCMH files.

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Member Attribution

Each health plan employed its own member attribution methodology to link members to primary care provider practices. Each ACO provided NYSDOH a list of participating providers and practices.

Measure Selection

A parsimonious set of primary care relevant measures were selected for the 2020-2021 NYS ACO Core Measure Set to examine the quality of care for the population attributed to ACO organizations for quality improvement and monitoring. See Appendix A for detailed descriptions of each measure. Note this measure set may change or expand over time.

Measure Calculation

Administrative data were used to calculate each measure. For measures with both hybrid and administrative specifications, the administrative method was used.

Product results were calculated using all practices for which data were available and were stratified by payer (Commercial, Medicaid, Medicare).

Medicaid Managed Care Results

Please note that the Medicare advantage results shown in this report do not represent the Medicare Shared Savings Program (MSSP). This report includes Medicaid quality scores only in the case of ACO contracts with Medicare Advantage health plans. This report does not include quality scores for Medicare patients covered by the conventional Medicare program, MSSP.

The CMS quality score data for ACOs is available using the following link:

https://www.cms.gov/Medicare/Medicare-Fee-for-Service-

Payment/sharedsavingsprogram/Downloads/MSSP-ACO-data.pdf.

For more information on Medicare fee-for-service, please refer to the CMS website https://www.cms.gov/Medicare/Medicare.html.

Data Source

Member-level data from the 2020-2021 HEDIS® data were submitted by the health plans.

Report Interpretation Limitations

Please note the following limitations of this ACO Report:

- 1. This ACO report includes claims-based data pooled from multiple payers. The performance results represent the quality of care provided to a larger number of members than reports distributed by individual health plans that reflect the quality of care for members insured by that health plan alone. This report is not a replacement for performance reports or gap analyses provided by individual payers or Medicare Advantage Stars, Medicare ACOs Scorecards, or other transformation or payment programs. The report does not display member-level data.
- 2. These ACO results do not account for the entire panel population. Only those members meeting continuous enrollment criteria at the payer and plan level were included in these quality measure results.

ACO Program Information

For information about New York State's Accountable Care Program, including information about how to apply for a Certificate of Authority, and to find answers to frequently asked questions, please visit the NYS website at:

https://www.health.ny.gov/health_care/medicaid/redesign/aco/

If you have any questions about the New York State's Accountable Care Program, please contact us:

Center for Health Care Policy and Resource Development Corning Tower, Room 1695 Empire State Plaza Albany, New York 12237

Telephone: (518) 408-1833 Fax: (518) 474-0572

Email: acobml@health.ny.gov

Feedback

We welcome suggestions and comments on this publication. Please contact us at:

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E-mail: nvsgarr@health.nv.gov

Appendix A – 2020-2021 NYS ACO Core Measure Set

Measure (NQF#/Developer)	Description
Breast Cancer Screening (2372/HEDIS)	Percentage of women 50-74 years of age who had a mammogram to screen for breast cancer.
Cervical Cancer Screening (0032/HEDIS)	Percentage of women 21–64 years of age who were screened for cervical cancer using either of the following criteria: - Women age 21–64 who had cervical cytology performed every 3 years. - Women age 30–64 who had cervical high-risk human papillomavirus (HPV) testing performed within the last 5 years. - Women age 30–64 who had cervical cytology/human papillomavirus (HPV) co-testing performed every 5 years.
Childhood Immunization Status – Combo 3 (0038/HEDIS)	Percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DTaP); three polio (IPV); one measles, mumps and rubella (MMR); three haemophilus influenza type B (HiB); three hepatitis B (HepB), one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (HepA); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday. The measure calculates a rate for each vaccine and nine separate combination rates.
Chlamydia Screening for Women (0033/HEDIS)	Percentage of women 16–24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year. Reported as three rates: 1. Patients of age 16 – 20 years 2. Patients of age 21 – 24 years 3. Total
Colorectal Cancer Screening (0034/HEDIS)	Percentage of members 50-75 years of age who had appropriate screening for colorectal cancer.
Comprehensive Diabetes Care: HbA1c Testing (0057/HEDIS)	Percentage of members 18–75 years of age with diabetes (type 1 and type 2) who received a Hemoglobin A1c (HbA1c) test during the measurement year.
Comprehensive Diabetes Care: Eye Exam (Retinal) Performed (0055/HEDIS)	Percentage of members 18–75 years of age with diabetes (type 1 and type 2) who had an eye exam (retinal) performed.

Appendix B – Quality Measure Results by Payer

B.1 Quality Measure Results of Bassett Accountable Care Partners, LLC for Commercial Providers

Table 2. 2020-2021 Quality Measure Results for Eligible Members in Bassett Accountable Care Partners, LLC for Commercial Providers

Domain	Measure	Denominator	Numerator	Percent
Prevention	Breast Cancer Screening	3,867	3,167	82
	Cervical Cancer Screening	7,056	5,372	76
	Childhood Immunization Status Combo 3	181	134	74
	Chlamydia Screening in Women (16-24 Years)	1,078	524	49
	Colorectal Cancer Screening	8,042	5,459	68
Chronic Disease	Comprehensive Diabetes Care Eye Exams	1,625	857	53
	Comprehensive Diabetes Care HbA1c Testing	1,625	1,405	86

⁻⁻ Measure result not reported

Note: Overall denominator and numerator results shown represents the eligible population in the ACO. Quality measurement (QM) results for contracted MCOs were calculated from eligible population that was in an MCO that had a risk contract with the ACO. QM results for non-contracted MCOs were calculated from the eligible population that was in an MCO that did not have a risk contract with the ACO.

B.2 Quality Measure Results of Bassett Accountable Care Partners, LLC for Medicaid Providers

Table 3. 2020-2021 Quality Measure Results for Eligible Members in Bassett Accountable Care Partners, LLC for Medicaid Providers

Domain	Measure	Denominator	Numerator	Percent
Prevention	Breast Cancer Screening	1,244	808	65
	Cervical Cancer Screening	6,193	3,965	64
Childhood Immunization Status Combo 3		491	400	81
	Chlamydia Screening in Women (16-24 Years)	1,358	729	54
	Colorectal Cancer Screening	2,782	1,446	52
Chronic Disease	Comprehensive Diabetes Care Eye Exams	1,186	608	51
	Comprehensive Diabetes Care HbA1c Testing	1,186	1,029	87

⁻⁻ Measure result not reported

Note: Overall denominator and numerator results shown represents the eligible population in the ACO. Quality measurement (QM) results for contracted MCOs were calculated from eligible population that was in an MCO that had a risk contract with the ACO. QM results for non-contracted MCOs were calculated from the eligible population that was in an MCO that did not have a risk contract with the ACO.

B.3 Quality Measure Results of Bassett Accountable Care Partners, LLC for Medicare Providers

Table 4. 2020-2021 Quality Measure Results for Eligible Members in Bassett Accountable Care Partners, LLC for Medicare Providers

Domain	Measure	Denominator	Numerator	Percent
Prevention	Breast Cancer Screening	1,248	982	79
	Cervical Cancer Screening		-	
	Childhood Immunization Status Combo 3			
	Chlamydia Screening in Women (16-24 Years)		-	
	Colorectal Cancer Screening	2,754	1,832	67
Chronic Disease	Comprehensive Diabetes Care Eye Exams	809	529	65
	Comprehensive Diabetes Care HbA1c Testing			

⁻⁻ Measure result not reported

Note: Overall denominator and numerator results shown represents the eligible population in the ACO. Quality measurement (QM) results for contracted MCOs were calculated from eligible population that was in an MCO that had a risk contract with the ACO. QM results for non-contracted MCOs were calculated from the eligible population that was in an MCO that did not have a risk contract with the ACO. Medicare fee-for-service results are not included in this table; Medicare Advantage results only.

SS Sample size less than 30

Appendix C – Web-Accessible Data Tables

C.1 Quality Measure Results of Members in Bassett Accountable Care Partners, LLC – Data Table

Table 1. 2020-2021 Quality Measure Results for Eligible Members in Bassett Accountable Care Partners, LLC by Payer

		O	verall Results			Payer Results	
Domain	Measure	Denominator	Numerator	Percent	Commercial (%)	Medicaid (%)	Medicare* (%)
	Breast Cancer Screening	6359	4957	78	82	65	79
	Cervical Cancer Screening	13249	9337	70	76	64	
Prevention	Childhood Immunization Status Combo 3	672	534	79	74	81	
	Chlamydia Screening in Women (16-24 Years)	2436	1253	51	49	54	
	Colorectal Cancer Screening	13578	8737	64	68	52	67
Chronic Disease	Comprehensive Diabetes Care Eye (Retinal) Exams Performed	3620	1994	55	53	51	65
Chronic	Comprehensive Diabetes Care HbA1c Testing	2811	2434	87	86	87	

⁻⁻ Measure result not reported

Note: Results are based on MY 2020. Diabetes denominators differ across measures because not all diabetes measures are calculated and reported for all payers. See Appendix A for full description of each of the measures included in this table. See Appendices B, C, and D for payer-specific denominator and numerator values.

^{*} Medicare Advantage results only.

C.2 Quality Measure Results of Bassett Accountable Care Partners, LLC for Commercial Providers – Data Table

Table 2. 2020-2021 Quality Measure Results for Eligible Members in Bassett Accountable Care Partners, LLC for Commercial Providers

		Overall Commercial Results			
Domain	Measure	Denominator	Numerator	Percent	
	Breast Cancer Screening	3867	3167	82	
u o	Cervical Cancer Screening	7056	5372	76	
Prevention	Childhood Immunization Status Combo 3	181	134	74	
Pre	Chlamydia Screening in Women (16-24 Years)	1078	524	49	
	Colorectal Cancer Screening	8042	5459	68	
Chronic Disease	Comprehensive Diabetes Care Eye (Retinal) Exams Performed	1625	857	53	
C. Dis	Comprehensive Diabetes Care HbA1c Testing	1625	1405	86	

-- Measure result not reported

Note: Overall denominator and numerator results shown represents the eligible population in the ACO. Quality measurement (QM) results for contracted MCOs were calculated from eligible population that was in an MCO that had a risk contract with the ACO. QM results for noncontracted MCOs were calculated from the eligible population that was in an MCO that did not have a risk contract with the ACO.

C.3 Quality Measure Results of Bassett Accountable Care Partners, LLC for Medicaid Providers – Data Table

Table 3. 2020-2021 Quality Measure Results for Eligible Members in Bassett Accountable Care Partners, LLC for Medicaid Providers

		Overall Medicaid Results			
Domain	Measure	Denominator	Numerator	Percent	
	Breast Cancer Screening	1244	808	65	
L.	Cervical Cancer Screening	6193	3965	64	
Prevention	Childhood Immunization Status Combo 3	491	400	81	
Pre	Chlamydia Screening in Women (16-24 Years)	1358	729	54	
	Colorectal Cancer Screening	2782	1446	52	
Chronic Disease	Comprehensive Diabetes Care Eye (Retinal) Exams Performed	1186	608	51	
	Comprehensive Diabetes Care HbA1c Testing	1186	1029	87	

-- Measure result not reported

Note: Overall denominator and numerator results shown represents the eligible population in the ACO. Quality measurement (QM) results for contracted MCOs were calculated from eligible population that was in an MCO that had a risk contract with the ACO. QM results for noncontracted MCOs were calculated from the eligible population that was in an MCO that did not have a risk contract with the ACO.

C.4 Quality Measure Results of Bassett Accountable Care Partners, LLC for Medicare Providers – Data Table

Table 5. 2020-2021 Quality Measure Results for Eligible Members in Bassett Accountable Care Partners, LLC for Medicare Providers

		Overall Medicare Results			
Domain	Measure	Denominator	Numerator	Percent	
	Breast Cancer Screening	1248	982	79	
L.	Cervical Cancer Screening				
Prevention	Childhood Immunization Status Combo 3				
Prey	Chlamydia Screening in Women (16-24 Years)				
	Colorectal Cancer Screening	2754	1832	67	
Chronic Disease	Comprehensive Diabetes Care Eye (Retinal) Exams Performed	809	529	65	
Ch Dis	Comprehensive Diabetes Care HbA1c Testing				

⁻⁻ Measure result not reported

Note: Overall denominator and numerator results shown represents the eligible population in the ACO. Quality measurement (QM) results for contracted MCOs were calculated from eligible population that was in an MCO that had a risk contract with the ACO. QM results for non-contracted MCOs were calculated from the eligible population that was in an MCO that did not have a risk contract with the ACO. Medicare fee-for-service results are not included in this table; Medicare Advantage results only.

SS Sample size less than 30