

Performance Results	Time Period	Status	RAE1	RAE2	RAE3	RAE4	RAE5	RAE6	RAE7	ACC
<b>Key Performance Indicators (KPIs)</b>										
ED visits (per thousand members per year, risk-adjusted)	SFY20-21 Q1	Result	529.7	525.7	560.3	473.2	550.1	507.6	619.8	542.9
Well visits	SFY20-21 Q1	Result	28.88%	22.55%	30.05%	20.99%	30.05%	25.50%	25.67%	26.90%
Behavioral health engagement	SFY20-21 Q1	Result	15.21%	15.50%	16.05%	18.71%	20.20%	19.43%	18.06%	17.44%
Dental visits	SFY20-21 Q1	Result	38.69%	36.09%	39.78%	34.67%	40.60%	36.53%	36.29%	37.80%
Prenatal care	SFY20-21 Q1	Result	56.41%	63.23%	60.00%	70.49%	73.85%	56.93%	65.64%	63.50%
Health Neighborhood Part 1 (Care Compacts)	SFY20-21 Q1	Result	51.98%	3.33%	17.62%	0.88%	22.99%	51.91%	62.63%	30.19%
Health Neighborhood Part 2 (Referral within 60 days to specialist)	SFY20-21 Q1	Result	1.63%	3.09%	1.66%	2.76%	1.75%	1.76%	1.23%	1.84%
Potentially avoidable costs	SFY20-21 Q3	Interim	Met	Met	Met	Met	Met	Met	Met	100%
<b>Performance Pool</b>										
Extended care coordination	SFY19-20 Q4	Result	13.93%	64.07%	39.73%	56.56%	50.59%	42.99%	61.00%	46.22%
Premature birth rate	SFY20-21 Q1	Interim	8.80%	12.00%	9.20%	12.00%	10.80%	12.70%	14.30%	9.60%
Behavioral health engagement for the DOC population	SFY20-21 Q2	Interim	11.87%	12.14%	6.77%	15.10%	9.29%	9.45%	12.30%	10.57%
Inpatient Psychiatric Discharges (per thousand full-time equivalent members)	SFY20-21 Q2	Interim	11.51	6.99	8.4	7.21	11.05	13.41	17.35	10.6
Risk-adjusted PMPM	SFY19-20 Q4	Baseline	\$563	\$518	\$609	\$544	\$541	\$617	\$610	\$581
Medication Adherence: Asthma	SFY20-21 Q2	Baseline	<b>47.73%</b>	41.92%	<b>45.10%</b>	<b>38.08%</b>	<b>41.13%</b>	<b>47.60%</b>	<b>46.98%</b>	<b>44.71%</b>
Medication Adherence: COPD	SFY20-21 Q2	Baseline	<b>40.71%/54.66%</b>	43.75%/53.82%	<b>45.03%/58.81%</b>	39.81%/49.34%	<b>45.04%/61.62%</b>	49.61%/62.21%	45.92%/59.40%	<b>42.76%/55.76%</b>
Medication Adherence: Depression	SFY20-21 Q2	Baseline	62.53%/43.71%	<b>63.14%/43.79%</b>	68.93%/49.03%	<b>60.30%/41.74%</b>	61.80%/41.46%	58.75%/50.80%	65.86%/47.71%	<b>64.78%/45.92%</b>
Medication Adherence: RASA (Hypertension)	SFY20-21 Q2	Baseline	65.88%	<b>67.94%</b>	67.75%	67.35%	63.83%	<b>69.09%</b>	<b>67.36%</b>	<b>66.45%</b>
Medication Adherence: Diabetes	SFY20-21 Q2	Baseline	<b>61.51%</b>	<b>62.14%</b>	<b>64.14%</b>	<b>60.43%</b>	<b>64.40%</b>	<b>65.51%</b>	<b>65.60%</b>	<b>63.18%</b>
Medication Adherence: Contraception	SFY20-21 Q2	Baseline	42.65%	42.83%	39.28%	48.95%	42.78%	36.10%	35.84%	<b>40.62%</b>
<b>Behavioral Health Incentive Pool (BHIP)</b>										
Engagement in Outpatient Substance Use Disorder Treatment	SFY19-20 Q4	Result	41.72%	42.34%	38.84%	38.98%	31.19%	35.29%	46.37%	38.84%
7 Day follow up from mental health inpatient stay	SFY19-20 Q4	Result	47.66%	74.23%	64.71%	79.61%	71.20%	73.69%	77.93%	68.71%
7 Day follow up from SUD emergency room visit	SFY19-20 Q4	Result	30.85%	39.25%	31.97%	43.83%	37.85%	37.42%	35.41%	36.02%
Follow up after positive depression screening	SFY19-20 Q4	Result	51.47%	53.25%	41.50%	42.87%	34.64%	45.87%	61.75%	51.94%
Behavioral health assessment for children in the foster care system	SFY19-20 Q4	Result	13.57%	23.00%	12.17%	27.78%	23.70%	20.79%	21.51%	19.99%

### Definitions and Notes

[Definitions: Measures are defined in more detail in specification documents.](#)

[Graphs: To view trends over time, the ACC Public Reporting page provides graphs.](#)

**Time Period:** The performance period for all three measure sets is the state fiscal year, July - June. The data displayed in this table is the most current point-in-time available.

**Status:** Data is either a "result," meaning final performance tied to payment; a "baseline," meaning a benchmark against which future performance is assessed; or "interim," meaning a data point used solely for tracking progress.

**Color:** Indicates whether the RAE hit the performance goal for a measure.

Green = goal achieved.

Red = goal not achieved.

KPIs are unique in that there are two tiers of achievement. Yellow indicates the lower tier goal was achieved and Green indicates the higher tier was achieved.

A lack of color indicates that the most recent data is not a final result that is tied to payment but rather an interim result or a baseline.

### Measure Specific Notes:

Potentially Avoidable Costs, or PAC, is a KPI with multiple components. PAC is intended to quantify cost savings through avoidable health care interventions. RAEs submit PAC plans annually on three conditions with high costs and have milestone deliverable submissions. This submission is qualitative, so RAEs are evaluated on whether they have successfully submitted complete and timely deliverables.

RAEs select three medication adherence measures tied to conditions out of the menu of seven measures. Measures in bold text reflect the measures that the RAEs have selected and for which they have the opportunity earn incentive payment.

Some measures have two goals and RAEs must achieve both goals to receive payment.

Performance Pool measures changed between SFY19-20 and SFY20-21 with the addition of the Risk-Adjusted PMPM measure and medication adherence measures.

Performance Pool graphs only represent SFY19-20 results at this time.

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