

Center for Medicare

Medicare Shared Savings Program: Performance Scores that Equate to the 30th and 40th Percentile MIPS Quality Performance Category Scores for Performance Years 2018 to 2022

August 2023

Quality Reporting Requirements

Shared Savings Program Accountable Care Organizations (ACOs) are required to report quality data via the Alternative Payment Model (APM) Performance Pathway (APP) to meet the quality performance standard used to determine shared savings and shared losses.

Quality Performance Standard

The quality performance standard is the minimum performance level ACOs must achieve to be eligible to share in savings at the maximum rate available for the ACO's risk model. Meeting the quality performance standard also allows an ACO to potentially avoid maximum shared losses (for ACOs participating in the ENHANCED track) and to avoid quality-related compliance actions for the performance year.

For performance year 2022, ACOs that report quality data via the APP can meet the quality performance standard via one of three pathways:

- Achieving a quality performance score that is equivalent to or higher than the 30th percentile across all MIPS Quality performance category (QPC) scores, excluding entities/providers eligible for facility-based scoring;
- Meeting the criteria for the electronic clinical quality measure (eCQM)/Merit-based Incentive Payment System (MIPS) CQM reporting incentive: If the ACO reports the three eCQMs/MIPS CQMs, meeting the MIPS data completeness and case minimum requirements for all three measures, and achieves a quality performance score equivalent to or higher than the 10th percentile of the performance benchmark on at least one of the four outcome measures in the APP measure set and a quality performance score equivalent to or higher than the 30th percentile of the performance benchmark on at least one of the remaining five measures in the APP measure set; or
- Being a 1st year ACO that meets reporting criteria: For the first performance year of an ACO's first agreement period, if the ACO reports the ten CMS Web Interface measures or the three eCQMs/MIPS CQMs and administers a Consumer Assessment of Healthcare Providers and Systems (CAHPS) for MIPS Survey under the APP and meets MIPS data completeness and case minimum requirements for all of the measures.

Quality Performance Score

An ACO's Shared Savings Program quality performance score will be calculated using the ACO's quality measures reported under the APP that are scored for purposes of the MIPS QPC (including quality improvement points) as described at 42 CFR § 414.1380(b)(1)(vii). The methodology used to calculate MIPS QPC scores is described in the "2022 APM Performance Pathway Scoring Guide" found within the "PY 2022 APM Performance Pathway (APP) Toolkit" that is available on the [Quality Payment Program Resource Library website](#). ACOs that are unable to successfully report will have their quality performance score set to the 30th percentile MIPS QPC score under the Shared Savings Program Extreme and Uncontrollable Circumstances (EUC) policy for quality.

MIPS Quality Performance Category Score

Table 1 below shows the MIPS QPC scores that equate to the 30th and 40th percentile across all MIPS QPC scores for PYs 2018–2022 based on the unweighted distribution of all MIPS QPC scores, excluding entities and providers eligible for facility-based scoring.

Table 1: Historical MIPS Quality Performance Category Scores (Unweighted)

PERFORMANCE YEAR	30TH PERCENTILE OF THE MIPS QPC SCORE	40TH PERCENTILE OF THE MIPS QPC SCORE
2018	59.30	70.80
2019	58.00	70.82
2020	63.90	75.59
2021	61.73	77.83
2022	70.63 ¹	77.73 ²

eCQM/MIPS CQM REPORTING INCENTIVE

ACOs reporting eCQMs/MIPS CQMs may meet the quality performance standard through the eCQM/MIPS CQM reporting incentive. The requirements for meeting the incentive are described above.

Table 2 below shows the 10th percentile of the performance benchmarks for outcome measures and the 30th percentile of the performance benchmarks for all non-suppressed measures. Note: The 10th percentile of the performance benchmarks is only available for PY 2022.

Table 2: PY 2022 10th and 30th Percentiles of Performance Benchmarks for ACOs Reporting eCQMs/MIPS CQMs

MEASURE	MEASURE TYPE	COLLECTION TYPE	10TH PERCENTILE OF THE PERFORMANCE BENCHMARKS	30TH PERCENTILE OF THE PERFORMANCE BENCHMARKS
Quality ID# 001: Diabetes: Hemoglobin A1c (HbA1c) Poor Control	Outcome	eCQM	90.00	70.00
		MIPS CQM	90.00	70.00

¹ These data reflect the 30th percentile MIPS QPC score, consistent with the PY 2022 MIPS performance feedback data provided by the Quality Payment Program during the MIPS Final Score Preview period.

² These data reflect the 40th percentile MIPS QPC score, consistent with the PY 2022 MIPS performance feedback data provided by the Quality Payment Program during the MIPS Final Score Preview period.

MEASURE	MEASURE TYPE	COLLECTION TYPE	10TH PERCENTILE OF THE PERFORMANCE BENCHMARKS	30TH PERCENTILE OF THE PERFORMANCE BENCHMARKS
Quality ID# 134: Preventative Care and Screening: Screening for Depression and Follow-up Plan	Process ³	eCQM ⁴	N/A	N/A
		MIPS CQM	N/A	66.96
Quality ID# 236: Controlling High Blood Pressure	Outcome	eCQM ⁴	N/A	N/A
		MIPS CQM	10.00	30.00
Quality ID# 321: CAHPS for MIPS ⁵	PRO-PM ³	CAHPS for MIPS Survey	N/A	5.19
Quality ID# 479: Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Groups	Outcome	Administrative Claims	0.1668	0.1570
Quality ID# 484: Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions	Outcome	Administrative Claims	38.97	33.79

Use of ACO Quality Performance in Calculating Shared Savings and Shared Losses

For information on how shared savings and shared losses are calculated, please refer to the Medicare Shared Savings Program, Shared Savings and Losses and Assignment Methodology Specifications, available on the Shared Savings Program website under [Program Guidance & Specifications](#) (e.g., in Version 10, refer to Section 4.3 Performance Year Financial Reconciliation Calculations).

³ Only the 10th percentile of the performance benchmarks values for outcome measures are relevant to ACOs for the eCQM/MIPS CQM reporting incentive. Therefore, the 10th percentile values for process and patient reported outcome (PRO)-based performance measures (PMs) are not applicable (N/A).

⁴ The eCQM versions of measures #134 and #236 were suppressed in PY 2022 and will not be scored against a benchmark. Therefore, they do not have percentiles for the performance benchmarks and are not applicable (N/A).

⁵ Under MIPS, quality benchmarks and scoring are based on comparisons to decile ranges.