

February 25, 2013

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Center for Medicare and Medicaid Innovation
Hubert H. Humphrey Building
200 Independence Avenue, S.W.
Washington, DC 20201

Centers for Medicare and Medicaid Innovation:

We are writing to express concern over the proposed quality benchmarks for performance year 2013 for the Pioneer ACO initiative. We remain committed to the aims of this program—to demonstrate robust quality, exceptional patient experience and achieve more affordable care. To further these aims, we recommend CMS and Pioneers collaborate to develop quality benchmark methodology, in particular in response to the flat percentage approach. As Pioneers, we have extensive experience with performance based contracts and quality performance reporting; our hope is that CMS and CMMI will leverage that experience to vet benchmarking methodology.

As proposed, nineteen out of thirty-one measures have flat percentage benchmarks without anchoring methodology. This reflects the difficulty and lack of data surrounding these measures. We understand the metrics are not yet mature and want to work with you to create a credible pool of data from which to pull empirical benchmarks. Using reported data from the Pioneers and MSSP ACOs will help to build such a database.

Secondly, for mature measures with proven track records, best in class performance is often no higher than 70%. The proposed benchmarks are higher than standards set in commercial contracts and in Medicaid; the flat percentages are even higher than other Pioneer benchmarks, such as colorectal cancer screening (54%), HTN (69%) and Mammography (78%). We suggest that using the ACO database to determine best in class performance for the new measures will help set and scale percentiles accordingly. In addition to our concerns with flat percentages, we are concerned with benchmarks based on the Medicare Advantage experience. We believe there are fundamental differences between the experience of non-managed and managed populations that warrant consideration when establishing pay-related benchmarks.

Pioneers strongly support outcomes based contracts, and we applaud CMS and CMMI for introducing a payment model that centers on quality. We want to work closely with you to bring the collective experience of our groups' efforts to build a validated model to truly improve quality of care for the population we serve together.

Both to give you the data you need to build a robust reporting system, and to engage Pioneers in meeting clearly measured and achievable goals, we strongly recommend that you hold Pioneers

in reporting-only status for performance year 2013, to build the benchmarks for 2014 performance along the lines described above.

Pioneers need to know *before April 2, 2013*, if you accept our recommendations, so that we can make informed decisions regarding our ongoing participation.

Sincerely,

Allina Health
Atrius Health
Banner Health Network
Beacon/Eastern Maine Healthcare
System
Bellin Theda Healthcare Partners
Beth Israel Deaconess Care
Organization (BIDCO)
Brown and Toland Medical Group
Dartmouth-Hitchcock Healthcare ACO
Fairview Health Systems
Franciscan Alliance

Health Care Partners of CA/Healthcare
Partners Medical Group
Health Care Partners of Nevada

JSA Medical Group/HealthCare
Partners of FL
Mount Auburn Cambridge Independent
Practice Association (MACIPA)
Michigan Pioneer ACO
Monarch HealthCare
Montefiore ACO
Plus/ North Texas ACO
OSF Healthcare System
Park Nicollet Health Services
Partners Healthcare
Physician Health Partners
Presbyterian Healthcare Services
Prime Care Medical Network, Inc
Renaissance Health Network
Seton Health Alliance
Sharp HealthCare ACO

Steward Health Care System
Trinity Pioneer ACO
University of Michigan