CYE 2023 Benchmark Setting Methodology:

In order to establish the VBP Threshold Benchmark and the High Performing Benchmark, AHCCCS conducted a comparison of the line of business aggregate performance measure rate with the associated measure's NCQA Quality Compass percentile data. The NCQA Quality Compass percentile data were then utilized to inform the selection of an appropriate benchmark. For the CYE 2023 VBP benchmark selection, AHCCCS utilized CY 2021 line of business aggregate rates and the associated measure's 2022 NCQA Quality Compass percentile data.

ACC Primary Measures								
Measure Name	Acronym	Weighting	Associated Threshold Benchmark		Associated High Performing Benchmark			
			Current Percentile	Benchmark	Current Percentile	Benchmark		
Well Child Visits in the First 30 Months of Life – Well- Child Visits in the First 15 Months (Rate 1)	W30	17%	75thPercentile	61.2%	90thPercentile	67.6%		
Child and Adolescent Well-Care Visits – Total	WCV	17%	25thPercentile	43.5%	50thPercentile	48.9%		
Prenatal and Postpartum Care: Timeliness of Prenatal Care	РРС	17%	25thPercentile	81.3%	50thPercentile	85.4%		
Follow-Up after Hospitalization for Mental Illness - 7 Day (Total)	FUH	17%	50thPercentile	38.0%	75thPercentile	46.0%		
Breast Cancer Screening	BCS	17%	33.33thPercentile	47.8%	66.67thPercentile	54.0%		
Plan All Cause Readmissions - Observed/Expected (O/E) Ratio * ¹	PCR	15%	50thPercentile	0.996	66.67thPercentile	0.944		

ACC Secondary Measures								
Measure Name	Acronym	Weighting	Associated Threshold Benchmark		Associated High Performing Benchmark			
			Current Percentile	Benchmark	Current Percentile	Benchmark		
Use of Opioids at High Dosage *	HDO	TBD	25thPercentile	8.3%	50thPercentile	4.7%		
Cervical Cancer Screening	CCS	TBD	25thPercentile	52.4%	50thPercentile	57.6%		
Antidepressant Medication Management - Effective Acute Phase Treatment	AMM	TBD	33.33thPercentile	57.5%	50thPercentile	60.4%		
Follow-Up After Emergency Department Visit for Mental Illness - 7 Day (Total)	FUM	TBD	66.67thPercentile	45.4%	75thPercentile	50.4%		
Hemoglobin A1c (HbA1c) Poor Control for Patients with Diabetes: HBA1c Poor Control (>9.0%) *	HBD	TBD	50thPercentile	39.9%	66.67thPercentile	37.0%		

Performance Measures rates shall be calculated and reported as part of the Performance Measure Validation (PMV) process utilizing NCQA HEDIS® technical specifications for the associated measurement year and in accordance with AHCCCS instructions (measures shall be reflective of NCQA age range reporting).

Note: all benchmark values have been rounded.

Reflective of Measurement Year 2023 performance.

¹ The Performance Improvement Score will not be assessed for this measure.

* Lower rate indicates better performance

ACC performance measure rates to be limited to the Contractor ACC population only (i.e., not inclusive of the RBHA population for the ACC-RBHA Contractors).

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ALTCS-EPD Primary Measures							
Measure Name	Acronym	Weighting	Associated Threshold Benchmark		Associated High Performing Benchmark		
			Current Percentile	Benchmark	Current Percentile	Benchmark	
Controlling High Blood Pressure	CBP	33%	90thPercentile	69.2%	95thPercentile	71.5%	
Breast Cancer Screening	BCS	33%	5thPercentile	36.9%	10thPercentile	40.7%	
Hemoglobin A1c (HbA1c) Poor Control for Patients with	HBD	34%	75thPercentile	35.5%	95thPercentile	28.4%	
Diabetes: HBA1c Poor Control (>9.0%) *	пвр	54%	75thFercentile	33.5%	sourercentile	20.4%	

ALTCS-EPD Secondary Measures							
Measure Name	Acronym	Weighting	Associated Threshold Benchmark		Associated High Performing Benchmark		
			Current Percentile	Benchmark	Current Percentile	Benchmark	
Cervical Cancer Screening	CCS	TBD	Median	31.9%	5thPercentile	37.2%	

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Note: all benchmark values have been rounded.

Reflective of Measurement Year 2023 performance.

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