## 4.5.3 Benchmark Results

Table 4-7 lists the 30th and 70th percentiles of eCQMs and CAHPS measure benchmarks and the 50th and 80th percentiles of utilization measure benchmarks.

Table 4-7
Benchmark Results for the Quality and Utilization Measures in CPC+

CMS ID#	MIPS ID#	Measure Title	Benchmarks	Benchmarks
CAHPS			P30	P70
N/A	N/A	CAHPS Summary Score	78.77	82.44
eCQMs			P30	P70
CMS165v5	236	Controlling High Blood Pressure	55.40%	71.01%
CMS122v5	001	Diabetes: Hemoglobin A1c (HbA1c) Poor Control (> 9%)ª	35.90%	9.09%
CMS125v5	112	Breast Cancer Screening	22.22%	55.26%
CMS130v5	113	Colorectal Cancer Screening	15.98%	56.20%
CMS124v5	309	Cervical Cancer Screening	15.09%	45.00%
CMS131v5	117	Diabetes: Eye Exam	80.69%	98.58%
CMS134v6	119	Diabetes: Medical Attention for Nephropathy	72.92%	89.96%
CMS50v5	374	Closing the Referral Loop: Receipt of Specialist Report	6.25%	36.96%
CMS156v5	238	Use of High-Risk Medications in the Elderly <sup>a</sup>	21.22%	0.90%
CMS2v7	134	Preventive Care and Screening: Screening for Depression and Follow-Up Plan	2.94%	30.30%
CMS160v6	371	Depression Utilization of the PHQ-9 Tool	1.96%	12.24%
CMS149v6	281	Dementia: Cognitive Assessment	17.57%	88.14%
CMS138v6	226	Preventive Care and Screening: 81.60% Tobacco Use: Screening and Cessation Intervention		94.68%
CMS137v5	305	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment	0.95%	5.13%
CMS139v5	318	Falls: Screening for Future Fall Risk	17.93%	81.05%
CMS147v7	110	Preventive Care and Screening: Influenza Immunization	18.58%	47.87%



CMS ID#	MIPS ID#	Measure Title	Benchmarks	Benchmarks
CMS127v6	111	Pneumococcal Vaccination Status for Older Adults	63.61%	
CMS164v6	204	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet	82.00%	
CMS347v1	438	Statin Therapy for the 65.41% Prevention and Treatment of Cardiovascular Disease		77.22%
Utilization			P50	P80
N/A	N/A	Inpatient hospital utilization <sup>a</sup>	1.17	0.89
N/A	N/A	Emergency department utilization <sup>a</sup>	1.42	1.07

<sup>&</sup>lt;sup>a</sup> This measure is reverse-scored.

## 4.6 Illustrative Example of Performance Incentive Retained

## 4.6.1 Calculation of Performance Incentive Retained for Quality Component

Table 4-8 shows the measures that Main Street CPC+ reported, the corresponding performance rates, CPC+ minimum and maximum threshold for Program Year 2018, and the normalized score for each eCQM and CAHPS measure.

Table 4-8
Percent Payment Retained by Measure—Illustrative Example for Main Street CPC

Measure	Performance Rate	2018 Minimum Threshold	2018 Maximum Threshold	Meet Minimum Threshold	Meet Maximum Threshold	Percent Payment Retained
CAHPS Summary Score	81.00	78.77	82.44	Yes	No	20.10%
MIPS 236, Controlling High Blood Pressure	68%	55.40%	71.01%	Yes	No	7.53%
MIPS 001, Diabetes: Hemoglobin A1c (HbA1c) Poor Control (> 9%)ª	9%	35.90%	9.09%	Yes	Yes	8.33%
MIPS 374, Closing the Referral Loop: Receipt of Specialist Report	26.2%	6.25%	36.96%	Yes	No	6.87%
MIPS 318, Falls: Screening for Future Fall Risk	50%	17.93%	81.05%	Yes	No	6.28%
MIPS 113, Colorectal Cancer Screening	69%	15.98%	56.20%	Yes	Yes	8.33%
MIPS 117, Diabetes: Eye Exam	95%	80.69%	98.58%	Yes	No	7.50%