

2020-2021 Annual Report

Mount Sinai Health Partners IPA, LLC

A Multi-Payer Report of Quality Performance Results



Contents

- Overview 3**
- Section 1. Mount Sinai Health Partners IPA, LLC Profile 4**
- Section 2. Mount Sinai Health Partners IPA, LLC Report..... 5**
 - 2.1 Distribution of Specialties for Providers in Mount Sinai Health Partners IPA, LLC's Network..... 5
 - 2.2 Distribution of Members Attributed to a Provider with Mount Sinai Health Partners IPA, LLC by Payer..... 6
 - 2.3 Quality Measure Results of Members in Mount Sinai Health Partners IPA, LLC ... 7
- Section 3. Statewide Benchmark Comparisons 8**
- Technical Notes 9**
- Report Interpretation Limitations 11**
- Appendix A – 2020-2021 NYS ACO Core Measure Set 12**
- Appendix B – Quality Measure Results by Payer 13**
 - B.1 Quality Measure Results of Mount Sinai Health Partners IPA, LLC for Commercial Providers..... 13
 - B.2 Quality Measure Results of Mount Sinai Health Partners IPA, LLC for Medicaid Providers..... 14
 - B.3 Quality Measure Results of Mount Sinai Health Partners IPA, LLC for Medicare Providers..... 15
- Appendix C – Web-Accessible Data Tables 16**
 - C.1 Quality Measure Results of Members in Mount Sinai Health Partners IPA, LLC – Data Table 16
 - C.2 Quality Measure Results of Mount Sinai Health Partners IPA, LLC for Commercial Providers – Data Table 17
 - C.3 Quality Measure Results of Mount Sinai Health Partners IPA, LLC for Medicaid Providers – Data Table 18
 - C.4 Quality Measure Results of Mount Sinai Health Partners IPA, LLC for Medicare Providers – Data Table 19

Overview

The New York State Accountable Care Organization Scorecard Report is a multi-payer view of performance results on a set of seven quality measures for Accountable Care Organizations (ACOs) that have been issued a certificate of authority by the New York State Department of Health (NYSDOH). Public Health Law (PHL) Article 29-E requires the NYSDOH to establish a program governing the approval of Accountable Care Organizations. PHL § 2999-p defines an ACO as "an organization of clinically integrated health care providers that work together to provide, manage, and coordinate health care (including primary care) for a defined population; with a mechanism for shared governance; the ability to negotiate, receive, and distribute payments; and accountability for the quality, cost, and delivery of health care to the ACO's patients" and that has been issued a certificate of authority by the NYSDOH.

ACO Profile and Quality Scorecard Report

The ACO profile presented in the following pages is intended to provide consumers with a better understanding of Mount Sinai Health Partners IPA, LLC's structure as an all-payer ACO. The profile includes the following information:

- Characteristics of the organization
- Type of ACO (e.g., Hospital, Provider-led, Hybrid)
- Regions where services are provided
- Number of participants and provider/suppliers contracted by the ACO
- Number of patients attributed to the ACO
- Quality of care provided under the ACO umbrella
- Endeavors to implement evidence-based care services, telemedicine, use of electronic medical records, and other initiatives intended to accomplish the goals of accountable care.

Each profile was created from supplemental, non-confidential information submitted by the ACO through ACO certification, a survey disseminated by NYSDOH to the ACO, and other publicly available data.

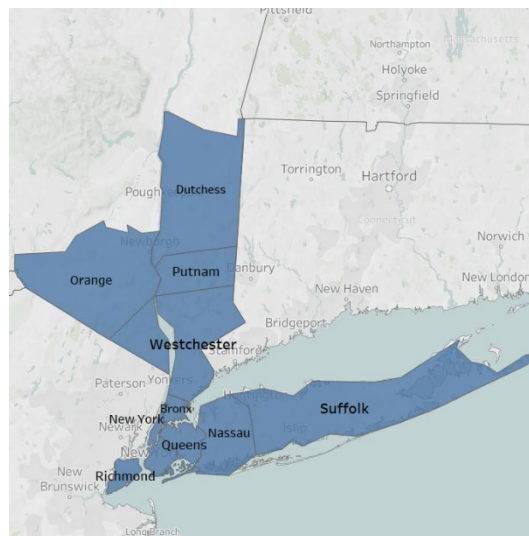
This report displays performance results based on data submitted by the ACO contracted managed care organizations (MCOs). Details on how data is collected can be found in the technical notes section of this report. This report does not contain Protected Health Information (PHI), and results are shared with each ACO prior to publication

Section 1. Mount Sinai Health Partners IPA, LLC Profile

ACO Type: Academic/Teaching Hospital



Academic/Teaching Hospital



Service Area: *Mount Sinai Health Partners IPA, LLC's Providers by County*

Table 1. Contracted Relationships with Managed Care Organizations (MCOs)

MCO	Commercial Contract	Medicaid Contract	Medicare Contract
Aetna	X		
Empire BlueCross BlueShield	X		X
Oxford Health Insurance of New York	X		
UnitedHealthcare	X		X

ACO Provided Care Coordination Highlights

Mount Sinai Health Partners IPA, LLC (MSHP) is a clinically integrated network of over 4,000 community-based and employed primary and specialty care providers, urgent care practices, Federally Qualified Health Centers, and eight hospitals spanning the five boroughs of New York City and Long Island.

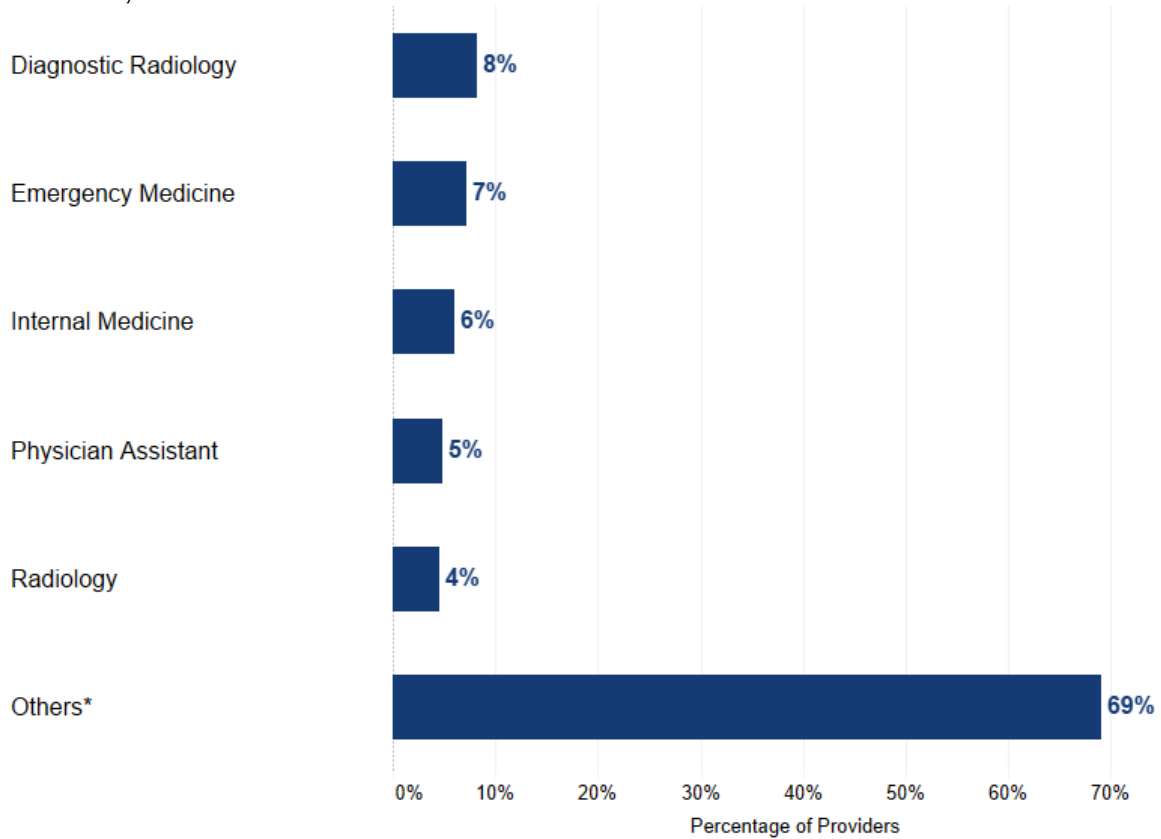
MSHP's clinical leadership has established a clinical "gold-standard" approach to improve quality and safety in patient care based on evidence-based medicine across Mount Sinai's network. MSHP's Behavioral Health Workgroup is composed of a multidisciplinary team of MSHP providers includes nursing, social work, pharmacy, and other disciplines, which are aligned to ensure patients receive the highest quality of care based on their needs regardless of how they entered the care management system.

MSHP also employs a sophisticated analytics infrastructure capable of integrating clinical and claims data from multiple sources to provide actionable insights to manage quality, cost, and utilization. Data gathered from the Workgroup, along with ongoing collaborations with MSHP's Data Analytics team, help identify behavioral health needs for patients. This allows the ACO to utilize the strengths of each role on the care team to provide an individualized approach for patients.

Section 2. Mount Sinai Health Partners IPA, LLC Report

2.1 Distribution of Specialties for Providers in Mount Sinai Health Partners IPA, LLC's Network

Figure 1. Most Common Specialties for Providers in Mount Sinai Health Partners IPA, LLC's Network

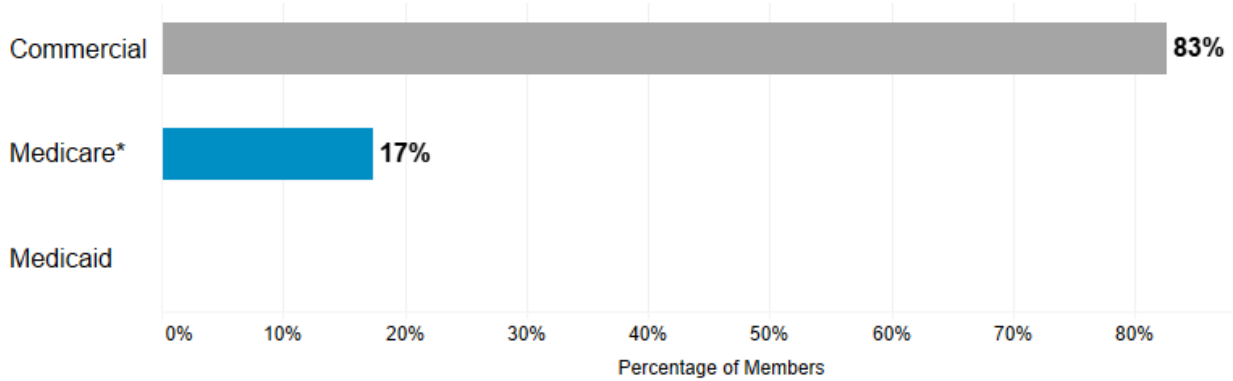


* The Others category includes all other specialty types including but not limited to Psychiatry (4%), Nurse Practitioner (4%), and Cardiovascular Disease (3%).

Note: Provider information was collected in 2020 for Measurement Year (MY) 2020. See: **Technical Notes.**

2.2 Distribution of Members Attributed to a Provider with Mount Sinai Health Partners IPA, LLC by Payer

Figure 2. Members Qualifying for a Quality Measure Attributed to a Participating Provider with Mount Sinai Health Partners IPA, LLC by Payer



* Medicare Advantage results only. See: **Technical Notes**.

Note: This table represents a defined subset of members in the ACO's network. Inclusion criteria was limited to members who met denominator criteria for one or more health care quality measures during the MY 2020. Member attribution information was collected from January 1 – December 31, 2020, for the MY 2020.

Member attribution to a given product is not dependent on whether there is a defined contract, as noted in Table 1, between the ACO and the health plan's payer.

2.3 Quality Measure Results of Members in Mount Sinai Health Partners IPA, LLC

Table 2. 2020-2021 Quality Measure Results for Eligible Members in Mount Sinai Health Partners IPA, LLC by Payer

Domain	Measure	Overall Results			Payer Results		
		Denominator	Numerator	Percent	Commercial (%)	Medicaid (%)	Medicare* (%)
Prevention	Breast Cancer Screening	14,562	10,211	70	70	--	70
	Cervical Cancer Screening	26,187	20,848	80	80	--	--
	Childhood Immunization Status Combo 3	514	307	60	60	--	--
	Chlamydia Screening in Women (16-24 Years)	2,270	1,479	65	65	--	--
	Colorectal Cancer Screening	32,962	19,308	59	56	--	69
Chronic Disease	Comprehensive Diabetes Care Eye Exams	7,914	4,140	52	45	--	68
	Comprehensive Diabetes Care HbA1c Testing	5,517	4,603	83	83	--	--

-- Measure result not reported

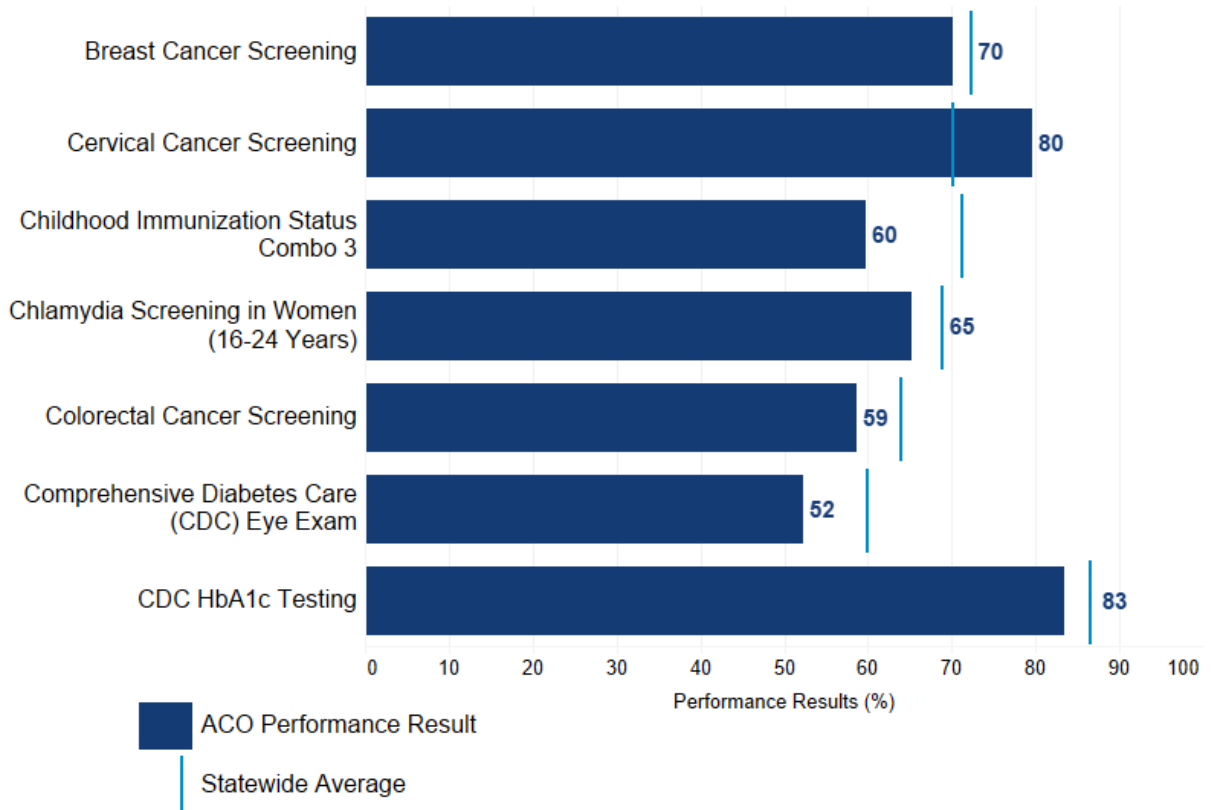
* Medicare Advantage results only.

Note: Results are based on MY 2020. Diabetes denominators differ across measures because not all diabetes measures are calculated and reported for all payers. See Appendix A for full description of each of the measures included in this table. See Appendices B, C, and D for payer-specific denominator and numerator values.

For Data Table version, see [Appendix C](#).

Section 3. Statewide Benchmark Comparisons

Figure 3. 2020-2021 Mount Sinai Health Partners IPA, LLC Quality Measure Results Compared with the Statewide Average



Note: Results shown are averaged across all Payers (Commercial, Medicaid, Medicare). Results are based on MY 2020. This table includes results averaged across all products. For Medicare members, only Medicare Advantage results are included.

Technical Notes

DEFINITIONS

Domain

The measures are categorized by two domains: Prevention and Chronic Disease.

Denominator, Numerator, Percent

For each measure, the denominator represents the total number of members that are eligible for that measure, and the numerator represents the number of members who meet the specific criteria for the measure. The Percent represents the numerator divided by the denominator, multiplied by 100 unless otherwise noted.

Measures

Data included in this report were collected during calendar year 2021, from January 1, 2020 through December 31, 2020 for the 2020 Measurement Year (MY 2020) using the 2020 NYS ACO Core Measure Set.

The quality measures in the NYS ACO Core Measure Set are from the Healthcare Effectiveness Data and Information Set (HEDIS®) measures established by the National Committee for Quality Assurance (NCQA). Please refer to Appendix A of this report for a list of the measures and measure descriptions. Results for these measures were calculated using health plan reported results for members attributed to practices participating in the ACO's network.

Methods

Health plans operating in NYS submitted Patient-Centered Medical Home (PCMH) files containing quality measurement results for members who were included in at least one of the ACO quality measure core set during MY 2020. In addition to primary care provider (PCP) information for each member, the file contained member-specific details on denominator inclusion and numerator compliance for each measure in the ACO core set. The National Provider Identifier (NPI) to whom the member was attributed was matched to the NPI and provider Practice Tax Identification Number (TIN) supplied by each ACO; this indicated that the practice was part of the ACO provider network. Members were attributed to provider practices using each health plan's attribution method (see section below: Member Attribution). Member-level data was aggregated across health plans linking the Practice TIN of the PCP to whom the member was attributed to a list of participating providers reported by the ACO. Linking quality measurement information for members to ACO-participating providers allows NYSDOH to produce aggregated results at the ACO level for selected quality measures.

Statewide benchmarks were calculated using the MY 2020 health-plan submitted PCMH files.

Mount Sinai Health Partners IPA, LLC 2020-2021 Annual Report

Member Attribution

Each health plan employed its own member attribution methodology to link members to primary care provider practices. Each ACO provided NYSDOH a list of participating providers and practices.

Measure Selection

A parsimonious set of primary care relevant measures were selected for the 2020-2021 NYS ACO Core Measure Set to examine the quality of care for the population attributed to ACO organizations for quality improvement and monitoring. See Appendix A for detailed descriptions of each measure. Note this measure set may change or expand over time.

Measure Calculation

Administrative data were used to calculate each measure. For measures with both hybrid and administrative specifications, the administrative method was used.

Product results were calculated using all practices for which data were available and were stratified by payer (Commercial, Medicaid, Medicare).

Medicaid Managed Care Results

Please note that the Medicare advantage results shown in this report do not represent the Medicare Shared Savings Program (MSSP). This report includes Medicaid quality scores only in the case of ACO contracts with Medicare Advantage health plans. This report does not include quality scores for Medicare patients covered by the conventional Medicare program, MSSP.

The CMS quality score data for ACOs is available using the following link:

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/Downloads/MSSP-ACO-data.pdf>.

For more information on Medicare fee-for-service, please refer to the CMS website <https://www.cms.gov/Medicare/Medicare.html>.

Data Source

Member-level data from the 2020-2021 HEDIS® data were submitted by the health plans.

Report Interpretation Limitations

Please note the following limitations of this ACO Report:

1. This ACO report includes claims-based data pooled from multiple payers. The performance results represent the quality of care provided to a larger number of members than reports distributed by individual health plans that reflect the quality of care for members insured by that health plan alone. This report is not a replacement for performance reports or gap analyses provided by individual payers or Medicare Advantage Stars, Medicare ACOs Scorecards, or other transformation or payment programs. The report does not display member-level data.
2. These ACO results do not account for the entire panel population. Only those members meeting continuous enrollment criteria at the payer and plan level were included in these quality measure results.

ACO Program Information

For information about New York State's Accountable Care Program, including information about how to apply for a Certificate of Authority, and to find answers to frequently asked questions, please visit the NYS website at:

https://www.health.ny.gov/health_care/medicaid/redesign/aco/

If you have any questions about the New York State's Accountable Care Program, please contact us:

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Appendix A – 2020-2021 NYS ACO Core Measure Set

Measure (NQF#/Developer)	Description
Breast Cancer Screening (2372/HEDIS)	Percentage of women 50-74 years of age who had a mammogram to screen for breast cancer.
Cervical Cancer Screening (0032/HEDIS)	Percentage of women 21–64 years of age who were screened for cervical cancer using either of the following criteria: - Women age 21–64 who had cervical cytology performed every 3 years. - Women age 30–64 who had cervical high-risk human papillomavirus (HPV) testing performed within the last 5 years. - Women age 30–64 who had cervical cytology/human papillomavirus (HPV) co-testing performed every 5 years.
Childhood Immunization Status – Combo 3 (0038/HEDIS)	Percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DTaP); three polio (IPV); one measles, mumps and rubella (MMR); three haemophilus influenza type B (HiB); three hepatitis B (HepB), one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (HepA); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday. The measure calculates a rate for each vaccine and nine separate combination rates.
Chlamydia Screening for Women (0033/HEDIS)	Percentage of women 16–24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year. Reported as three rates: 1. Patients of age 16 – 20 years 2. Patients of age 21 – 24 years 3. Total
Colorectal Cancer Screening (0034/HEDIS)	Percentage of members 50-75 years of age who had appropriate screening for colorectal cancer.
Comprehensive Diabetes Care: HbA1c Testing (0057/HEDIS)	Percentage of members 18–75 years of age with diabetes (type 1 and type 2) who received a Hemoglobin A1c (HbA1c) test during the measurement year.
Comprehensive Diabetes Care: Eye Exam (Retinal) Performed (0055/HEDIS)	Percentage of members 18–75 years of age with diabetes (type 1 and type 2) who had an eye exam (retinal) performed.

Appendix B – Quality Measure Results by Payer

B.1 Quality Measure Results of Mount Sinai Health Partners IPA, LLC for Commercial Providers

Table 3. 2020-2021 Quality Measure Results for Eligible Members in Mount Sinai Health Partners IPA, LLC for Commercial Providers

Domain	Measure	Overall Results			Contracted Results			Non-Contracted Results		
		Denominator	Numerator	Percent	Denominator	Numerator	Percent	Denominator	Numerator	Percent
Prevention	Breast Cancer Screening	14,128	9,919	70	11,119	7,800	70	3,009	2,119	70
	Cervical Cancer Screening	33,794	26,011	77	26,187	20,848	80	7,607	5,163	68
	Childhood Immunization Status Combo 3	571	346	61	514	307	60	57	39	68
	Chlamydia Screening in Women (16-24 Years)	2,895	1,890	65	2,270	1,479	65	625	411	66
	Colorectal Cancer Screening	32,396	17,913	55	25,637	14,278	56	6,759	3,635	54
Chronic Disease	Comprehensive Diabetes Care Eye Exams	7,543	3,451	46	5,517	2,503	45	2,026	948	47
	Comprehensive Diabetes Care HbA1c Testing	7,543	6,310	84	5,517	4,603	83	2,026	1,707	84

-- Measure result not reported

Note: Overall denominator and numerator results shown represents the eligible population in the ACO. Quality measurement (QM) results for contracted MCOs were calculated from eligible population that was in an MCO that had a risk contract with the ACO. QM results for non-contracted MCOs were calculated from the eligible population that was in an MCO that did not have a risk contract with the ACO.

For Data Table version, see [Appendix C](#).

B.2 Quality Measure Results of Mount Sinai Health Partners IPA, LLC for Medicaid Providers

Table 4. 2020-2021 Quality Measure Results for Eligible Members in Mount Sinai Health Partners IPA, LLC for Medicaid Providers

Domain	Measure	Overall Results			Contracted Results			Non-Contracted Results		
		Denominator	Numerator	Percent	Denominator	Numerator	Percent	Denominator	Numerator	Percent
Prevention	Breast Cancer Screening	7,636	5,087	67	--	--	--	7,636	5,087	67
	Cervical Cancer Screening	28,714	19,315	67	--	--	--	28,714	19,315	67
	Childhood Immunization Status Combo 3	1,199	731	61	--	--	--	1,199	731	61
	Chlamydia Screening in Women (16-24 Years)	3,621	2,609	72	--	--	--	3,621	2,609	72
	Colorectal Cancer Screening	15,323	8,447	55	--	--	--	15,323	8,447	55
Chronic Disease	Comprehensive Diabetes Care Eye Exams	6,692	3,823	57	--	--	--	6,692	3,823	57
	Comprehensive Diabetes Care HbA1c Testing	6,692	5,727	86	--	--	--	6,692	5,727	86

-- Measure result not reported

Note: Overall denominator and numerator results shown represents the eligible population in the ACO. Quality measurement (QM) results for contracted MCOs were calculated from eligible population that was in an MCO that had a risk contract with the ACO. QM results for non-contracted MCOs were calculated from the eligible population that was in an MCO that did not have a risk contract with the ACO.

For Data Table version, see [Appendix C](#).

B.3 Quality Measure Results of Mount Sinai Health Partners IPA, LLC for Medicare Providers

Table 5. 2020-2021 Quality Measure Results for Eligible Members in Mount Sinai Health Partners IPA, LLC for Medicare Providers

Domain	Measure	Overall Results			Contracted Results			Non-Contracted Results		
		Denominator	Numerator	Percent	Denominator	Numerator	Percent	Denominator	Numerator	Percent
Prevention	Breast Cancer Screening	8,467	6,300	74	3,443	2,411	70	5,024	3,889	77
	Cervical Cancer Screening	--	--	--	--	--	--	--	--	--
	Childhood Immunization Status Combo 3	--	--	--	--	--	--	--	--	--
	Chlamydia Screening in Women (16-24 Years)	--	--	--	--	--	--	--	--	--
	Colorectal Cancer Screening	18,734	13,171	70	7,325	5,030	69	11,409	8,141	71
Chronic Disease	Comprehensive Diabetes Care Eye Exams	7,388	5,378	73	2,397	1,637	68	4,991	3,741	75
	Comprehensive Diabetes Care HbA1c Testing	--	--	--	--	--	--	--	--	--

-- Measure result not reported
 SS Sample size less than 30

Note: Overall denominator and numerator results shown represents the eligible population in the ACO. Quality measurement (QM) results for contracted MCOs were calculated from eligible population that was in an MCO that had a risk contract with the ACO. QM results for non-contracted MCOs were calculated from the eligible population that was in an MCO that did not have a risk contract with the ACO. Medicare fee-for-service results are not included in this table; Medicare Advantage results only.

For Data Table version, see [Appendix C](#).

Appendix C – Web-Accessible Data Tables

C.1 Quality Measure Results of Members in Mount Sinai Health Partners IPA, LLC – Data Table

Table 2. 2020-2021 Quality Measure Results for Eligible Members in Mount Sinai Health Partners IPA, LLC by Payer

Domain	Measure	Overall Results			Payer Results		
		Denominator	Numerator	Percent	Commercial (%)	Medicaid (%)	Medicare* (%)
Prevention	Breast Cancer Screening	14562	10211	70	70	--	70
	Cervical Cancer Screening	26187	20848	80	80	--	--
	Childhood Immunization Status Combo 3	514	307	60	60	--	--
	Chlamydia Screening in Women (16-24 Years)	2270	1479	65	65	--	--
	Colorectal Cancer Screening	32962	19308	59	56	--	69
Chronic Disease	Comprehensive Diabetes Care Eye (Retinal) Exams Performed	7914	4140	52	45	--	68
	Comprehensive Diabetes Care HbA1c Testing	5517	4603	83	83	--	--

-- Measure result not reported

* Medicare Advantage results only.

Note: Results are based on MY 2020. Diabetes denominators differ across measures because not all diabetes measures are calculated and reported for all payers. See Appendix A for full description of each of the measures included in this table. See Appendices B, C, and D for payer-specific denominator and numerator values.

C.2 Quality Measure Results of Mount Sinai Health Partners IPA, LLC for Commercial Providers – Data Table

Table 3. 2020-2021 Quality Measure Results for Eligible Members in Mount Sinai Health Partners IPA, LLC for Commercial Providers

Domain	Measure	Overall Commercial Results			Contracted Results			Non-Contracted results		
		Denominator	Numerator	Percent	Denominator	Numerator	Percent	Denominator	Numerator	Percent
Prevention	Breast Cancer Screening	36505	26455	72	23084	16633	72	13421	9822	73
	Cervical Cancer Screening	80086	61758	77	49287	39488	80	30799	22270	72
	Childhood Immunization Status Combo 3	2706	1477	55	2266	1230	54	440	247	56
	Chlamydia Screening in Women (16-24 Years)	11437	7209	63	7682	4771	62	3755	2438	65
	Colorectal Cancer Screening	83052	47690	57	54894	32369	59	28158	15321	54
Chronic Disease	Comprehensive Diabetes Care Eye (Retinal) Exams Performed	21673	10004	46	12890	6051	47	8783	3953	45
	Comprehensive Diabetes Care HbA1c Testing	21673	18049	83	12890	10741	83	8783	7308	83

-- Measure result not reported

Note: Overall denominator and numerator results shown represents the eligible population in the ACO. Quality measurement (QM) results for contracted MCOs were calculated from eligible population that was in an MCO that had a risk contract with the ACO. QM results for non-contracted MCOs were calculated from the eligible population that was in an MCO that did not have a risk contract with the ACO.

C.3 Quality Measure Results of Mount Sinai Health Partners IPA, LLC for Medicaid Providers – Data Table

Table 4. 2020-2021 Quality Measure Results for Eligible Members in Mount Sinai Health Partners IPA, LLC for Medicaid Providers

Domain	Measure	Overall Medicaid Results			Contracted Results			Non-Contracted results		
		Denominator	Numerator	Percent	Denominator	Numerator	Percent	Denominator	Numerator	Percent
Prevention	Breast Cancer Screening	7636	5087	67	--	--	--	7636	5087	67
	Cervical Cancer Screening	28714	19315	67	--	--	--	28714	19315	67
	Childhood Immunization Status Combo 3	1199	731	61	--	--	--	1199	731	61
	Chlamydia Screening in Women (16-24 Years)	3621	2609	72	--	--	--	3621	2609	72
	Colorectal Cancer Screening	15323	8447	55	--	--	--	15323	8447	55
Chronic Disease	Comprehensive Diabetes Care Eye (Retinal) Exams Performed	6692	3823	57	--	--	--	6692	3823	57
	Comprehensive Diabetes Care HbA1c Testing	6692	5727	86	--	--	--	6692	5727	86

-- Measure result not reported

Note: Overall denominator and numerator results shown represents the eligible population in the ACO. Quality measurement (QM) results for contracted MCOs were calculated from eligible population that was in an MCO that had a risk contract with the ACO. QM results for non-contracted MCOs were calculated from the eligible population that was in an MCO that did not have a risk contract with the ACO.

C.4 Quality Measure Results of Mount Sinai Health Partners IPA, LLC for Medicare Providers – Data Table

Table 5. 2020-2021 Quality Measure Results for Eligible Members in Mount Sinai Health Partners IPA, LLC for Medicare Providers

Domain	Measure	Overall Medicare Results			Contracted Results			Non-Contracted results		
		Denominator	Numerator	Percent	Denominator	Numerator	Percent	Denominator	Numerator	Percent
Prevention	Breast Cancer Screening	8467	6300	74	3443	2411	70	5024	3889	77
	Cervical Cancer Screening	--	--	--	--	--	--	--	--	--
	Childhood Immunization Status Combo 3	--	--	--	--	--	--	--	--	--
	Chlamydia Screening in Women (16-24 Years)	--	--	--	--	--	--	--	--	--
	Colorectal Cancer Screening	18734	13171	70	7325	5030	69	11409	8141	71
Chronic Disease	Comprehensive Diabetes Care Eye (Retinal) Exams Performed	7388	5378	73	2397	1637	68	4991	3741	75
	Comprehensive Diabetes Care HbA1c Testing	--	--	--	--	--	--	--	--	--

-- Measure result not reported

SS Sample size less than 30

Note: Overall denominator and numerator results shown represents the eligible population in the ACO. Quality measurement (QM) results for contracted MCOs were calculated from eligible population that was in an MCO that had a risk contract with the ACO. QM results for non-contracted MCOs were calculated from the eligible population that was in an MCO that did not have a risk contract with the ACO. Medicare fee-for-service results are not included in this table; Medicare Advantage results only.