| | | | | IHP Performance Measure Set | | | | | | | | | | |
|---|---|--|---|--|----------------------------|-----------------------|--------------------|-----------------------------|-----------------------------------|------|------------|--|---|--|
| | nspire | | | Calendar Year 2019 | | | | | | | | | # | 1 |
| | *************************************** | | li li | ncentive Payment Distribution For | mula | | | | | | | | | |
| # | Measurement Level | Earn | Condition | Measure | Data Source | Target Performance | Category Weight | Available Incentive Pool | Number of Particip ating | | | Individual PCP Incentive Opportunity | Individual Peds Incentive opportunity | Individual Specialist Incentive Opportunity |
| | | | | Primary Care Physicians | | | | | PCPS & NPs 40+12 | Peds | Specialist | | | |
| 1 | Individual | Individual | CMS definition 5 metrics - quarterly | As per attached CMS incentive measures Panel-based attribution | EPIC & Phyel | See attached | 60% | \$150,000.00 | 52 | | | \$2,884.62 | | |
| | | | | | | | Total | \$150,000.00 | | | | | | |
| | | | | Dodintrisions - | | | | | | | | | | |
| | | | Pediatricians Inspire patients - | | | | | | | | | | | |
| 1 | Individual | Individual | Individual monthly As per attached Inspire incentive measures Poindexter See attached 3% \$7,500.00 | | | | | | | | | | | |
| 2 | Individual | CMS definition measures - quarterly As per attached CMS incentive measures for Columbus Peds EPIC CMS 2% \$5,000.0 | | | | | | \$5,000.00 | | 13 | | | \$961.54 | |
| | | | | | | | | \$12,500.00 | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | Specialist Physicians | | | | | | | | | | |
| 1 | Group | Individual | Quality Measure | As per attached quality measures for selected specialty practices | Hospital/ Self-Reported | See Attached | 10% | \$25,000.00 | | | 165 | | | \$303.03 |
| 2 | Individual | Individual | Patient Experience | Policy & Procedure - Practices will choose their own slogan | Guide | Guide | 10% | \$25,000.00 | | | | | | |
| | | | | | | | Total | \$50,000.00 | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | Physician engagement - All | | | | | | | | | | |
| 1 | Individual | Individual | Compliance | Physician engagement (Inspire or AMH meetings/educational session attendance/reading articles) | Engagement Policy | 100% | 7% | \$17,500.00 | | 230 | | \$76.09 | \$76.09 | \$76.09 |
| | | | | | | | Total | \$17,500.00 | | | | | | |
| | | | | Group Measure | | | | | | | | | | |
| 1 | Hospital | Individual | Readmission rate | 30 day all cause readmission rate | Hospital data | 7% | 8% | \$20,000.00 | | 230 | | \$86.96 | \$86.96 | \$86.96 |
| | | | | | | | Total | \$20,000.00 | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | TOTAL | 100% | \$250,000.00 | | | | \$3,047.66 | \$1,124.58 | \$466.07 |
| | | | | | | | | | | | | | | |

IHP Performance Measure Set
Calendar Year 2019
Incentive Payment Distribution Formula - CMS Definition Quarterly Measures

| | | | #2 | | | | | | |
|--------------|------------|------------|---|--|---------------|------------------|---------------------|---|--|
| Inc | centive Pa | yment Dist | tribution Fo | ormula - CMS Definition Quarterly N | neasures fo | or PCP | | 2018 Avg Scores will be considered as baseline | |
| # | Measure | Earn | Condition | Measure | Data Source | Inspire Target | Available Points | Points Earned (B-Improvement from Baseline) | Points Earned (C-Performance Above Target) |
| | | | | Primary Care Physicians | | | | | |
| 1 | Individual | Individual | Pneumococcal Vaccination Status for Older Adults | (CMS-127/Prev-8) Percentage of patients 65 years of age and older who have ever received a pneumococcal vaccine. | EPIC & Phytel | 90% | 17 | 11 | 17 |
| 2 | Individual | Individual | Prev: Colorectal Cancer Screening | (CMS-130/Prev-6) Percentage of adults 50-75 years of age who had appropriate screening for colorectal cancer. | EPIC & Phytel | 50% | 20 | 12 | 20 |
| 3 | Individual | Individual | Prev: Breast Cancer Screening | (CMS-125/Prev-5) Percentage of women 50 - 74 years of age who had a mammogram to screen for breast cancer. | EPIC & Phytel | 70% | 20 | 12 | 20 |
| 4 | Individual | Individual | DM: Medical Attention for Nephropathy | (CMS-134) Percentage of diabetic patients 18-75 years of age who have received a nephropathy screening test or evidence of nephropathy during the measurement period. | EPIC & Phytel | 90% | 18 | 10 | 18 |
| 5 | Individual | Individual | DM: HgbA1c Poor Control (>9) | (CMS-122/DM-2) Percentage of patients 18 - 75 years of age with diabetes who had hemoglobin A1c > 9.0% during the measurement period. | EPIC & Phytel | < 15% | 25 | 15 | 25 |
| | | | | | | Available Points | 100 | 60 | 100 |
| Audit metric | Hospital | Individual | Diabetes: Eye Exam | (CMS-131/DM-7) Percentage of patients 18 - 75 years of age with diabetes who had a retinal or dilated eye exam by an eyecare professional during the measurement period or a negative retinal or dilated eye exam (no evidence of retinopathy) in the 12 months prior to the measurement period. | EPIC & Phytel | 20% | | | |



IHP Performance Measure Set Calendar Year 2019

Primary Care Provider Incentive Pool Realization Formula

#2a

| Category Weight | Category Incentive Pool | Number of Participating PCPs | Individual Incentive Pool | PCP Composite Performance Score | Incentive Realization | li | ndividual ncentive Earned |
|--------------------|----------------------------|------------------------------------|---------------------------------|---------------------------------|--------------------------|----|---------------------------------|
| | | | | ≥ 90 points | 100% | \$ | 2,884.62 |
| | | | | < 90 points and ≥ 80 points | 90% | \$ | 2,596.15 |
| 60.00% | \$ 150,000.00 | 52 | \$ 2,885 | < 80 points and ≥ 70 points | 75% | \$ | 2,163.46 |
| | 7 -23,223.00 | | | < 70 points and ≥ 60 points | 50% | \$ | 1,442.31 |
| | | | | < 60 points | 0% & Remediation | \$ | - |



IHP Performance Measure Set - 2018 Calendar Year 2019

#3

Incentive Payment Distribution Formula - CMS Definition Measures - For peds

| # | Earn & Measure | Condition | Measure | Inspire Target Performance | | 2018 self- reported scores will be considered as baseline | | |
|---|----------------|---|--|----------------------------|---------------------|---|---|--|
| | | | Pediatricians | | | | | |
| | | | | Target | Available Points | Points Earned (A-Met Baseline) | Points Earned (B-Improvement from Baseline) | Points Earned (C-Performance Above AvgTarget) |
| 1 | Group | Immun: HEDIS (CIS)- Childhood Immun Status | (CMS-117) 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 H influenza type B (HiB); three hepatitis B (Hep B); one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (Hep A); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday; Or had documented history of illness, had a seropositive test result, or had an allergic reaction to the vaccine by their second birthday. | 55% | 30 | 20 | 25 | 30 |
| 2 | Group | Approp testing for children with pharyngitis | (CMS-146) Initial Population/Denom: Children 3-18 years of age who had an outpatient or emergency department (ED) visit with a diagnosis of pharyngitis during the measurement period and an antibiotic ordered on or three days after the visit. Exclusions: Children who are taking antibiotics in the 30 days prior to the diagnosis of pharyngitis. Numerator: Children with a group A streptococcus test in the 7-day period from 3 days prior through 3 days after the diagnosis of pharyngitis. | 75% | 30 | 20 | 25 | 30 |
| 3 | Group | Appropriate Treatment for Children with Upper Respiratory Infection (URI) | (CMS-154) Percentage of children 3 months-18 years of age who were diagnosed with upper respiratory infection (URI) and were not dispensed an antibiotic prescription on or three days after the episode | 85% | 40 | 30 | 35 | 40 |
| | | | | | 100 | 70 | 85 | 100 |



IHP Performance Measure Set - CMS Measures Calendar Year 2019

#3a

Peds Incentive Pool Realization Formula - CMS measures

| Category Weight | Category Incentive Pool | Number of Participating PCPs | Individual Incentive Pool | PCP Composite Performance Score | Incentive Realization | Individual Incentive Earned | | |
|--------------------|----------------------------|------------------------------------|---------------------------------|------------------------------------|-----------------------|-----------------------------------|-----|--|
| | | | | ≥ 90 points | 100% | \$ | 385 | |
| 2% | \$ 5.000.00 | 13 | \$ 385 | < 90 points and ≥ 80 points | 90% | \$ | 308 | |
| 2/0 | \$ 5,000.00 | 13 | \$ 385 | < 80 points and ≥ 70 points | 75% | \$ | 231 | |
| | | | | < 70 points and ≥ 60 points | 50% | \$ | 192 | |
| | | | | < 60 points | 0% & Remediation | \$ | - | |

| | IHP Performance Measure Set Calendar Year 2019 Incentive Payment Distribution Formula - for Inspire patients - Claims Data/Poindexter - for Pe | | | | | | | | | | | | |
|-----|--|------------|--|--|-------------|-----------------------|--------------------------|------------------|-------------------------|--|--|--|--|
| # | Earn & Measure | itive ra | Measure Measure | - 101 maprie patients - Claims | Data Source | Target Performance | Attributed Peds Care Gap | | | | | | |
| Рe | | | | | | Target | Total Patients | Care Gaps Met | Care Gaps not Met | | | | |
| dia | | | | | | | | | | | | | |
| 1 | Individual | HEDIS | PEDS: One Adolescent Well-Care Visit Within the Previous 12 Months (Age: 12-21) | Members 12-21 years of age and had one well-care primary care physician office visit at any time within the previous 12 months. | Poindexter | 65% | 447 | 276 | 171 | | | | |
| 2 | Individual | HEDIS | PEDS: One Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life Within the Previous 12 Months (Age: 3-6) | Members 3-6 years of age and had one well-care primary care physician office visit at any time within the previous 12 months. | Poindexter | 85% | 267 | 209 | 58 | | | | |
| 3 | Individual | Poindexter | PEDS: Five or More Well-Child Visits in the First 15 Months of Life (Age: 15 Mo.) | Members who turned 15 years of age in the past 12 months and had five or more well-child primary care physician office visit at any time within the first 15 months of life. | Poindexter | 80% | 65 | 53 | 12 | | | | |
| | | | | Grand Total for Measures from Poindexter | Poindexter | 77% | 779 | 538 | 241 | | | | |



IHP Performance Measure Set - Inspire Population/Poindexter Calendar Year 2019

#4a

Peds Provider Incentive Pool Realization Formula

| Category Weight | Category Incentive Pool | Number of Participating Peds | Individual Incentive Pool | PCP Composite Performance Score | Incentive Realization | Individual Incentive Earned | | |
|--------------------|----------------------------|------------------------------------|---------------------------------|------------------------------------|--------------------------|-----------------------------------|--------|--|
| | | | | ≥ 77% | 100% | \$ | 576.92 | |
| | | | | ≥ 70% | 90% | \$ | 519.23 | |
| 3.00% | \$ 7,500.00 | 13 | \$ 577 | ≥ 65 | 80% | \$ | 461.54 | |
| | | | | ≥ 61 | 50% | \$ | 288.46 | |
| | | | | < 60 points | 0% & Remediation | \$ | - | |

| | | | Special | ist Physicians Incentive Pro | gram - 20 | 019 | | | | 2018 self- reported scores will be considered | | | | 2019 Re | eporting | |
|----------|--|---|----------------------|--|---------------------------|---|-------------------------------|--|---------------------|--|---|--|-------------|-------------|-------------|-------------|
| Location | Earn & Measure | Reporting | Name of the practice | Measure | Data Source | Last 2 years average scores Baseline | Denominator & Numerator | Target | Available Points | Points Earned (A-Met Baseline) | Points Earned (B- Improveme nt from Baseline) | Points Earned (C- Performance Above AvgTarget) | 1st Quarter | 2nd Quarter | 3rd Quarter | 4th Quarter |
| Columbus | Group | Quarterly | Orthopedics | CMS - Complication Rate Following Elective Primary Total Hip | Cerner | 1.40% | 7/495 | 1.3% (10% improvement) | 100 | 70 | 80 | 100 | | | | |
| Seymour | GIGGP | quarterry | Orthopeales | Arthroplasty and/or Total Knee Arthroplasty | CareDiscovery | 2.90% | 5/144 | 2.6% (10% improvement) | 100 | 70 | 80 | 100 | | | | |
| Columbus | Group | Quarterly (cases only - SIR yearly) | General Surg | Surgical Site Infection (SSI) - all CMS colon designated | NHSN | 2016 SIR 2.039 | 6/2.942 | < 2 | 100 | 70 | 80 | 100 | | | | |
| Seymour | | Quarterly | | procedures | Meditech | 3.78 | 2/61 | < 2% | 100 | 70 | 80 | 100 | | | | |
| Columbus | Group | Quarterly | Urology | Assessment of Presence or Absence of Urinary Incontinence in women age 65 years and older | SIU | 31% | Registry Average 47.00% | 40% (CMS Benchmark 54.95%) | 100 | 70 | 80 | 100 | | | | |
| Seymour | | , | | Risk Assessment for Hereditary Cancer Syndromes on Patients Undergoing Prostate Biopsy | LSS | | - | 80% | 100 | 70 | 80 | 100 | | | | |
| Seymour | Group | Quarterly | ENT | T&A (OPS/OBV/Inpt) Cases Returns to the OR within 30 Days | Schneck - No p | erior tracking | . Building repor | t to collect | 100 | 70 | 80 | 100 | | | | |
| Columbus | Group | Quarterly | Podiatry | Healing Percentage (# wounds healed at discharge/# treated wounds) | l Heal | 2016 - 2017 94% | 599/634 | ≥ 97% (less than 5% improvement) | 100 | 70 | 80 | 100 | | | | |
| Columbus | Group | Quarterly | Obstetrics | Nulliparous women with a term, singleton baby in a vertex position delivered by c section at or greater than 37 weeks gestation | Cerner | (2017) 26.9% | 115/426 | ≤ 27% | 100 | 70 | 80 | 100 | | | | |
| Seymour | | | | | Meditech | (2017) 20.9% | 50/239 | 24.2% (10% improvement) (Anthem Distinction requires < 27%) | 100 | 70 | 80 | 100 | | | | |
| Columbus | Group | Quarterly | Cardiology | 30 day inpatient to inpatient CHF readmission -all cause/all | Cerner | Dec 2016 - Oct 2017 11% | 35/329 | 9.9% (10% improvement) | 100 | 70 | 80 | 100 | | | | |
| Seymour | | | | payers | Meditech | 2016 - Oct 2017 11.76% | 14/119 | 11.76% | 100 | 70 | 80 | 100 | | | | |
| Columbus | Group | Quarterly | Gastroenterology | Appropriate follow-up interval for normal colonoscopy in average risk patients | Cerner | 65% (2016) | 81/125 | 85% | 100 | 70 | 80 | 100 | | | | |
| Seymour | | | | | Meditech | 92.1% (2016 | 245/266 | 92.1% | 100 | 70 | 80 | 100 | | | | |
| Columbus | Group | Quarterly | Pulmonology | 30 day inpatient to inpatient COPD readmission -all cause/all | Cerner | (2016 - 9/2017) 12.3% | 53/430 | 11.1% (10% improvement) | 100 | 70 | 80 | 100 | | | | |
| Seymour | · | ŕ | | payers | Meditech | (2016 - 9/2017) 8.14% | 18/221 | 11.10% | 100 | 70 | 80 | 100 | | | | |
| Seymour | Group | Quarterly | Neurology | 30 day inpatient to inpatient stroke readmission -all cause | Meditech | 2016 & 9mo 2017 2.29% | 2/87 | 3% | 100 | 70 | 80 | 100 | | | | |
| | New addition of Specialty Practices in the program | | | | | | | | | | | | | | | |
| Columbus | Group | Quarterly | Rad Onc | Radiation therapy is administered within 1 year (365 days) of diagnosis for women under age 70 receiving breast conserving surgery for breast cancer | Cancer Center Registry | Current 2018 97.7% | n= 42 | 98% | 100 | 70 | 80 | 100 | | | | |
| Columbus | Group | Quarterly | Med Onc | Tamosifen or third generation aromatase inhibitor is considered or administered within 1 year [555 days] of diagnosis for women with ALCC TLCNOMO or stage 18-III hormane receptor positive breast cancer | Cancer Center Registry | Current 2018 98.2% | n = 54 | 98% | 100 | 70 | 80 | 100 | | | | |
| | 2017 and six months | | | | | | | | | | | | | | | |



IHP Performance Measure Set Calendar Year 2019



Specialist Incentive Pool Realization Formula

| Category Weight | Category Incentive Pool | Number of Participating PCPs | pating Incentive PCP Composite Perform | | Incentive Realization | Individual Incentive Earned |
|--------------------|----------------------------|------------------------------------|--|-----------------------------|---------------------------------|-----------------------------------|
| | | | | ≥ 90 points | 100% | 152 |
| | \$ 25,000.00 | | | < 90 points and ≥ 80 points | 90% | 136 |
| 10% | | 165 | \$ 152 | < 80 points and ≥ 70 points | 75% | 114 |
| | | | | | < 70 points and ≥ 60 points 50% | 50% |
| | | | | < 60 points | 0% & Remediation | 0 |
| | | | | | | |



IHP Performance Measure Set Calendar Year 2019

#5d

Specialists Physicians Guide to PCPs

| L | | | | | | |
|---|----------------------|------------|------------|--------------------|-------------|-----------------------|
| L | | | | | | |
| 1 | Measurement Level | Earn | Condition | Measure | Data Source | Target Performance |
| : | Individual | Individual | Specialist | Policy & Procedure | Document | 100% |
| r | | | | | | |
| | | | | | | |



IHP Performance Measure Set - AMH Calendar Year 2019

#5e

Specialist Provider "Guide to PCP" Incentive Pool Realization Formula

| Category Weight | Category Incentive Pool | Number of Participating PCPs | Individual Incentive Pool | Specialist Composite Performance Score | Incentive Realization | Individual Incentive Earned |
|--------------------|----------------------------|------------------------------------|---------------------------------|---|--------------------------|-----------------------------------|
| 10.00% | \$ 25,000.00 | 165 | \$ 152 | Policy & Procedure | 100% | \$ 152 |
| | | | | | 0% | \$ - |
| | | | | | | |

| IHP Performance Measure Set Calendar Year 2019 Group Incentive Pool Realization Formula #6 | | | | | | | | | | | |
|--|----------------------|------------|---------------------|-----------------------------------|---------------|-----------------------|--------------------|----------------------------|-----------------------------------|------|-------------------------|
| | | | | | | | | | PCP+Peds+ Specialist | | |
| # | Measurement Level | Earn | Category | Measure | Data Source | Target Performance | Category Weight | Category Incentive Pool | Number of Participating MDs | Ince | vidual entive ool |
| 1 | CRH & Schneck | Individual | Readmission Rate | 30 day all cause readmission rate | Hospital data | 7.00% | 8% | \$ 20,000.00 | 231 | \$ | 87 |
| | | | | | | | | TOTAL | | \$ | 87 |
| | | | | | | | | | | | |