



Simplifying ACO Quality Reporting:

How to Succeed with eCQMs, MIPS CQMs, and Medicare CQMs

NAACOS Conference
Fall, 2025

www.mdinteractive.com
support@mdinteractive.com
1-800-634-4731

Meeting Agenda

- About MDinteractive
- Our ACO Partners: 2024 Snapshot
- Maximizing Shared Savings
- Supporting ACOs Where They Are
- From Data to Action
- Strategies & Tools for Performance
- Q&A

About MDinteractive

- Disease management registry for over 20 years
- CMS Qualified Registry since 2010
- Submitted CMS quality measures (eCQMs and CQMs) for thousands of clinicians
- ONC and SOC II Certified and FHIR ready
- Known for our exceptional support
- **Tools, technology, and support dedicated to CMS Quality programs**

Our ACO Partners: 2024 Snapshot

Types of ACOs We Currently Serve

**Health
system-led**
(includes several
large Academic
Medical Centers)

**Physician-Le
d**

**Value-Based
Care Enabler**

Who We Serve: By the Numbers

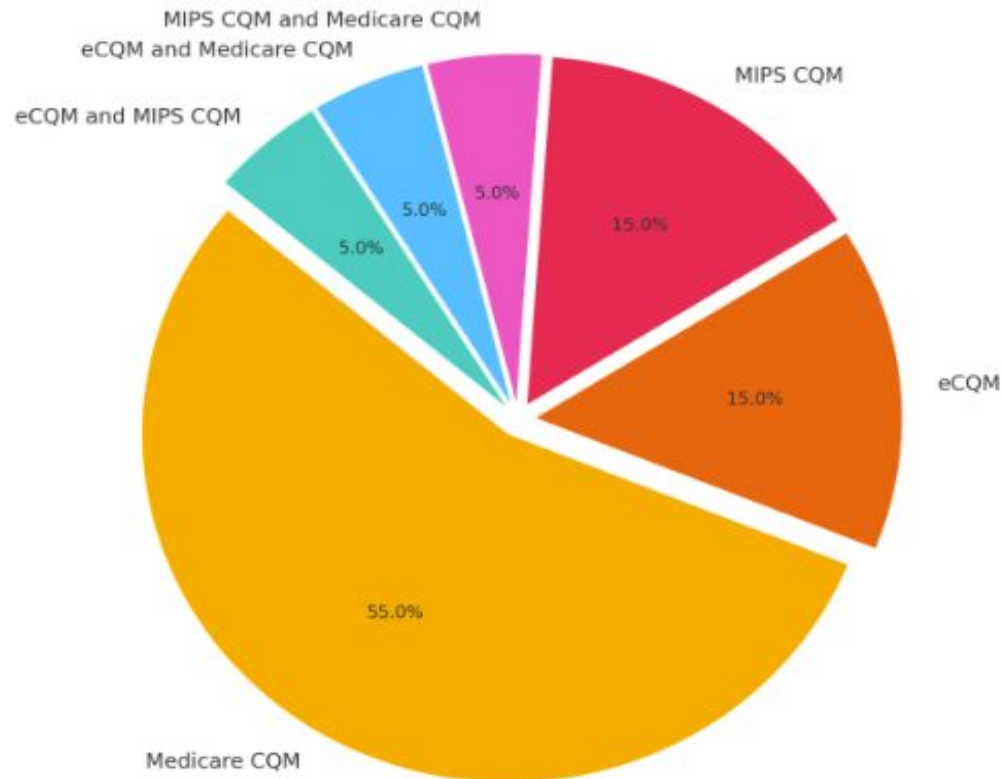
- 25+ ACOs nationwide
- Size ranges:
 - 1–110 TINs per ACO
 - 37 to 7,080 clinicians per ACO
 - Median = 50 TINs and 1,320 clinicians
- EHR mix: single, multi (up to 30), and some paper

Our Partner ACOs Earned \$205M in 2024

- ACO Results (2024)
 - **\$205M** in total earned savings
 - Represents **~5% of all MSSP** shared-savings payments in PY2024
 - One client earned **\$42M**
 - Another achieved a **13.8%** shared-savings rate

2024 Partner ACO Quality Reporting Experience

PY2024
Submissions
by
Collection
Type



Best Paths for ACOs to Maximize Shared Savings

Shared Savings: 3 Paths for Quality in 2025

**Meet the 40th percentile in the MIPS Quality performance category: 76.70 pts
(eCQMs, MIPS CQMs, Medicare CQMs)**

Meet the 10/40 Rule (eCQMs/MIPS CQMs)
≥10th percentile on 1 outcome measure and
≥40th percentile on 1 other measure

Meet the Alternative Quality Performance Standard
≥10th percentile on 1 outcome measure
(*reduced shared savings*)

Shared Savings: Impact of Moving to Medicare CQMs

Category	ACO Count	Percent of WI ACOs	Earnings Impact (Range)
Met Full Standard ($\geq 76.7\%$)	326	78.0%	Full (100% of maximum)
Met Alternative ($< 76.7\%$)	90	21.5%	Only 46–75% of maximum (avg –\$1.7M)

Choosing the Right Path

ACO Quality Performance Calculator - 2025 Medicare CQMs

Quality Measure	Performance (%)	MIPS Score
Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%) <small>Quality ID: 001SSP (2025 Benchmarks)</small>	60	5.00
Breast Cancer Screening <small>Quality ID: 112SSP (2025 Benchmarks)</small>	40	5.00
Preventive Care and Screening: Screening for Depression and Follow-Up Plan <small>Quality ID: 134SSP (2025 Benchmarks)</small>	40	5.00
Controlling High Blood Pressure <small>Quality ID: 236SSP (2025 Benchmarks)</small>	40	5.00
CAHPS Average Score <small>Enter or edit MIPS score (calculated from 2023 data)</small>	-	5
Measure 479 Score <small>Hospital-Wide All-Cause Unplanned Readmission (calculated from 2023 data)</small>	-	5
ACO Quality Performance Score:		50.00%

Linking last year's results to this year's

ACO Overview			
Financial Performance			
Quality Metrics			
Beneficiary Data			
Utilization			
Providers			
Per Capita			
Risk Scores			
Contact Info			
ACO Participants			
Savings and Benchmarks			
Savings Rate:	13.80%		
Minimum Savings Percentage:	<div> <div>Performance Data Source</div> <div>Contact Info Source</div> <div>Participants Source</div> </div>		
Benchmark Minimum Expenditure:	<div> <div>ACO Overview</div> <div>Financial Performance</div> <div>Quality Metrics</div> <div>Beneficiary Data</div> <div>Utilization</div> <div>Providers</div> <div>Per Capita</div> <div>Risk Scores</div> <div>Contact Info</div> <div>ACO Participants</div> </div>		
Generated Savings/Loss:	<div>Quality Measures with MIPS Scores (2023 Benchmarks)</div>		
Disaster Adjustment:	<div> <div>Measure</div> <div>Performance</div> <div>MIPS Score</div> </div>		
Impact of Mid-Year Termination:	<div> <div>CAHPS Average</div> <div>Average of 9 CAHPS component(s)</div> <div>-</div> <div>6.58</div> </div>		
Earned Savings/Loss:	<div> <div>CAHPS 1</div> <div>Measure ID: CAHPS_1</div> <div>80.58</div> <div>2.64</div> </div>		
Updated Benchmark:	<div> <div>CAHPS 2</div> <div>Measure ID: CAHPS_2</div> <div>93.22</div> <div>4.90</div> </div>		
Historical Benchmark:	<div> <div>CAHPS 3</div> <div>Measure ID: CAHPS_3</div> <div>91.84</div> <div>5.09</div> </div>		
Total AB Benchmark:	<div> <div>CAHPS 4</div> <div>Measure ID: CAHPS_4</div> <div>77.56</div> <div>4.77</div> </div>		
Total AB Expenditure:	<div> <div>CAHPS 5</div> <div>Measure ID: CAHPS_5</div> <div>70.34</div> <div>10.00</div> </div>		
Final Shared Savings Rate:	<div> <div>CAHPS 6</div> <div>Measure ID: CAHPS_6</div> <div>62.98</div> <div>7.93</div> </div>		

Quality Performance Calculator on Our Website

MD interactive

Search...



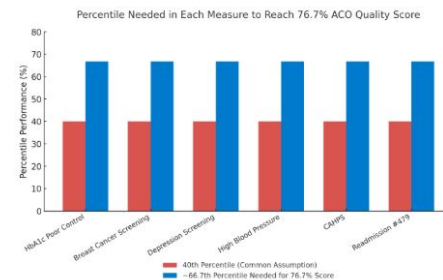
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ACO Quality Score Calculator: Why 40% in Each Measure Still Falls Short with Medicare CQMs

Posted on Wed, 08/13/2025 - 05:13

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As Accountable Care Organizations (ACOs) prepare for the 2025 performance year, our **ACO Quality Performance Score Calculator** can help you estimate whether you'll meet the **76.7% Quality Performance Standard** needed to earn the maximum shared savings under Medicare CQMs:

ACO Quality Performance Calculator - 2025 Medicare CQMs

Enter ACO ID: [Load ACO Data](#)

CREATE ACCOUNT

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CMS Proposes 2026 Updates to the Medicare Shared Savings Program

Posted on Tue, 07/29/2025 - 18:29

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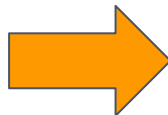
Simplifying MIPS: Your Guide to 2025 Improvement Activities

Posted on Thu, 07/03/2025 - 03:46



Blogs

Enter ACO
Entity ID



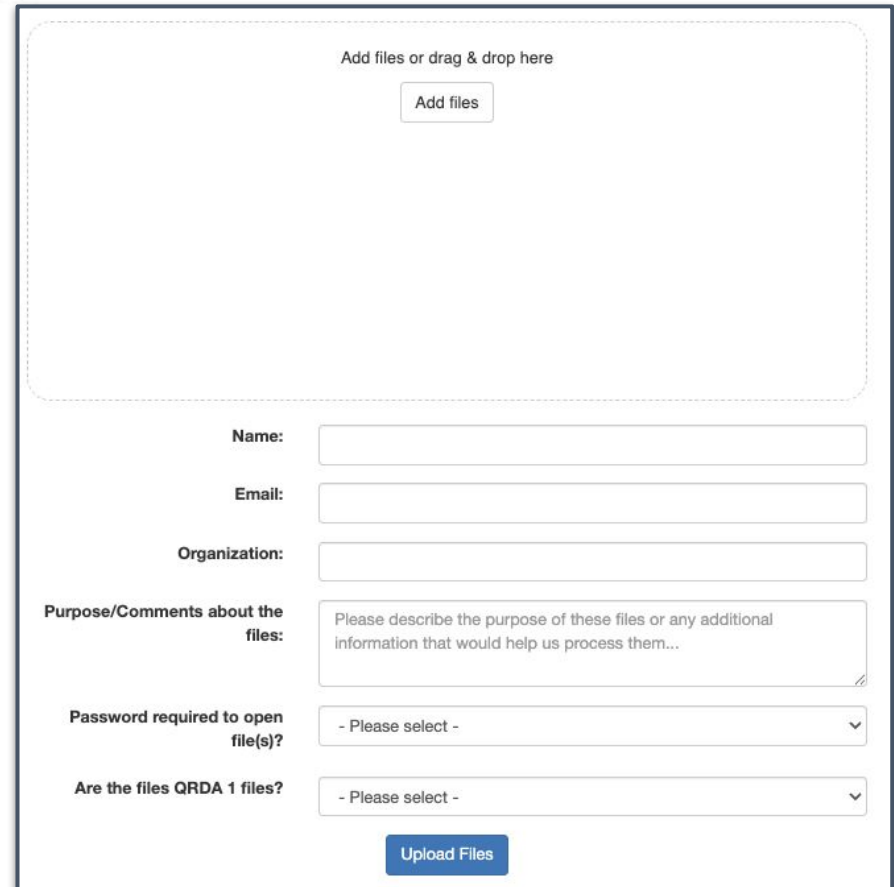
Meeting Clients Where They Are

Why Data Collection is Hard

- Every EHR and billing system works differently
- File extraction is tricky — secure delivery adds a step
- ACO practices need simple, flexible solutions

How We Simplify Data Collection

- Secure Portal
- MDibox Secure Link
- FHIR API



The image shows a web form for uploading files. At the top, there is a dashed box containing the text "Add files or drag & drop here" and a button labeled "Add files". Below this, the form contains several input fields and dropdown menus. The fields are labeled "Name:", "Email:", and "Organization:". Below these is a text area labeled "Purpose/Comments about the files:" with placeholder text "Please describe the purpose of these files or any additional information that would help us process them...". Below the text area are two dropdown menus. The first is labeled "Password required to open file(s)?" and the second is labeled "Are the files QRDA 1 files?". Both dropdown menus have a default selection of "- Please select -". At the bottom right of the form is a blue button labeled "Upload Files".

Add files or drag & drop here

Add files

Name:

Email:

Organization:

Purpose/Comments about the files:

Password required to open file(s)?

Are the files QRDA 1 files?

Upload Files

Driving Success with Project Manager Support

- Each ACO is has a dedicated project manager.
- Main partner for data collection and reporting.
- Works with ACO and practice staff to solve challenges.
- Provides training, guidance, and support.

The screenshot displays a project management interface with two main sections: 'Getting Started' and '2025 Year-to-Date Data'.

Getting Started

- Urgent Care Clinic**
 - Data Contact: Steven
 - Data Email: steven@gmail.com
 - Hypertension: Billing File
 - Diabetes: Billing File
 - Depression: Patient List
 - Breast Cancer: FHIR
- Lake Physicians**
 - Data Contact: Cindy
 - Data Email: cindy@gmail.com
 - Data Phone: (963)789-5263
 - EHR: Athena Provider Type: PCP
 - Number of Providers: 10
- + Add a card**

2025 Year-to-Date Data

- Internal Medicine Associates**
 - Data Contact: Sara
 - Data Email: sara@gmail.com
 - Data Phone: (981)678-5241
 - EHR: eCW Provider Type: Specialist
 - Number of Providers: 14
 - Hypertension: QRDA I
 - Diabetes: QRDA I
 - Depression: QRDA I
 - Breast Cancer: QRDA I
 - Status: Data Ready for ACO Review
- Suzanne Dole, MD**
 - Data Contact: Suzanne Dole
 - Data Email: sdole@gmail.com
 - Data Phone: (587)852-7410
 - EHR: Practice Fusion
 - Provider Type: Specialist
 - Number of Providers: 2
 - Hypertension: FHIR Diabetes: FHIR
 - Depression: FHIR Breast Cancer: FHIR
 - Status: Files Uploaded

Client Success Story: Large Academic Medical Center

Year
One

Building the Foundation



ACO scale: 4,612 NPIs, 70 TINs
~30 EHRs + paper-based practices



Burden: Repeated outreach required
(10–105 requests)



Effort: On-site visits by ACO staff



Barriers: Uncertified EHRs, missing
data, QRDA/FHIR errors

From Burden to Routine: Streamlining Data Collection

Building Momentum



Year 2: Practices familiar with team and process → stronger collaboration, fewer delays



Year 3: Emphasis on certified EHR adoption + quality improvement



Outcome: Data collection now efficient, reliable, and timely; delays are rare



Year
Three

Client Success Story: Enabler ACO

Challenge: Closing the Gaps



ACO Scale: 49 small practices / 140 NPIs



Mixed readiness: Some still paper-based; others on EHRs unable to generate QRDA I files



Impact: Data gaps and incomplete reporting

Training & Manual Abstraction

Achieving Complete Reporting



Partnership: Project manager worked with ACO + practice staff



Support & Guidance: Trained non-EHR practices on manual abstraction and helped teams edit and improve data within our system



Results: Improved data completeness and performance

Finding & Explaining QRDA I Errors

Helping ACOs Improve Data Quality

- **Challenge:** QRDA I files often contain missing or incomplete data.
- **Solution:** MDinteractive developed the **QRDA I Viewer** to explain file errors
- **Impact:** Visualize missing data for the ACO, their practices and EHRs

Client Success Story: The QRDA I Viewer



Issue: Practice flagged missing HgbA1c values with 20 patient examples



Validation: Viewer confirmed values missing in QRDA I files



Collaboration: Practice, EHR vendor, and MDi reviewed cases



Resolution: EHR vendor corrected the errors

Inside the QRDA I Viewer

All errors in one view:

Validation Status: Issues Found

- ERROR: Missing required template ID: QRDA Category I Framework (2.16.840.1.113883.10.20.24.1.1)
- ERROR: Missing required template ID: QDM-Based QRDA (2.16.840.1.113883.10.20.24.1.2)
- ERROR: Missing required template ID: QRDA Category I Report - CMS (2.16.840.1.113883.10.20.24.1.3)
- INFO: LOINC codes detected
- INFO: SNOMED CT codes detected

Client Success Story: Hospital-Based ACO (Bulk FHIR)

#	FHIR Resource Type	Last Checked
1.	Condition	08/06/2025 03:23:02
2.	DiagnosticReport	08/24/2025 03:01:01
3.	DocumentReference	08/11/2025 22:21:02
4.	Encounter	08/05/2025 03:25:02
5.	MedicationRequest	08/12/2025 03:31:02
6.	Observation	08/07/2025 10:13:02
7.	Patient	08/05/2025 00:07:01
8.	Practitioner	08/04/2025 21:29:01

- **ACO Scale:** 6300 clinicians, ~\$14M earned savings (2024)
- **EHR:** eClinicalWorks
- **Objective:** CQMs for 4 measures , 377 NPIs
- **Process:** Bulk FHIR Bulk export (20 days)
- **Results:** Calculated performance for ~20,000 patients and generated CQMs for 4 ACO measures

Client Success Story: Academic ACO (Patient-Level FHIR)

Available FHIR Endpoints:

Observation DiagnosticReport

Extractable Fields:

- LAB_HEMOGLOBIN_A1C (Type: value)
- DATETIME_LAB_DRAW (Type: date)

Extracted Data:

- DATETIME_LAB_DRAW: 05/13/2025
- LAB_HEMOGLOBIN_A1C: 6.5

Populate Form Fields

- **ACO Scale:** 4000 clinicians, ~\$12M earned savings (2024)
- **EHR:** Epic
- **Objective:** Retrieve HgA1c values for ~35,000 diabetes patients
- **Process:** Patient-level FHIR API queries for lab observations (~5 hours)
- **Results:** Identified ~5,000 new HgA1c labs and improved performance by 5 points

AI-Powered Deduplication & Aggregation

- Integrated DedupliFHIR (CMS open-source) into our platform
- AI learns from ACO's data and naming patterns to detect duplicates and merge related records
- Handles variations & typos (e.g., “Katherine” vs “Catherine”)

Turning Complex Data Into Action

From Collected Data to Actionable Insights

- Monitor ACO-wide performance at a glance
- Track results by measure with built-in analytics
- Drill down for deeper insights and root causes
- View reports at the TIN, NPI, and patient level

ACO Data at a Glance

ACO Performance Across Measures

ID	Measure	Measure Type	Priority	Period	Option	Num Den - Exc	Performance	Data Completeness	Points
001	Diabetes: Glycemic Status Assessment Greater Than 9% (more info) <small>Measure submitted through a appPlus program</small>	OUTCOME	YES	-01	CQM	19 40 - 0	47.50% (53.65%)	100.00% (40)	6.25 Pts
112	Breast Cancer Screening (more info) <small>Measure submitted through a appPlus program</small>	NOT OUTCOME	NO	-01	CQM	26 44 - 0	59.09% (36.59%)	100.00% (44)	4.1203 Pts ? (Picked at 3)
134	Preventive Care and Screening: Screening for Depression and Follow-Up Plan (more info) <small>Measure submitted through a appPlus program</small>	NOT OUTCOME	NO	-01	CQM	31 75 - 12	49.21% (24.88%)	100.00% (75)	1.7975 Pts ? (Picked at 4)
236	Controlling High Blood Pressure (more info) <small>Measure submitted through a appPlus program</small>	OUTCOME	YES	-01	CQM	17 40 - 0	42.50% (67.14%)	100.00% (40)	5.25 Pts ? (Picked at 2)

Percentiles:

1 =< 99
10 =< 90
20 =< 80
30 =< 70
40 =< 60
50 =< 50
60 =< 40
70 =< 30
80 =< 20
90 =< 10
99 =< 1

Registry percentiles

2025-12-31

Meeting the Quality Performance Standard

ACO Quality Performance Score vs CMS Standard

ACO Quality Performance Score: **47.35%**

(unadjusted, without CAHPS and readmission scores)

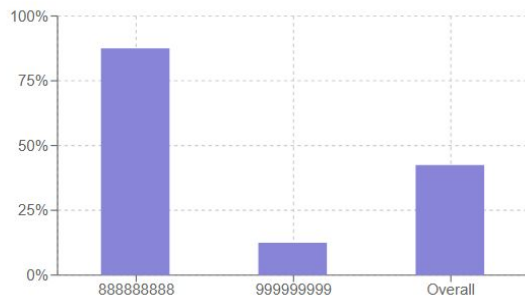


Met the alternative quality performance standard by achieving the ≥ 10 th percentile on one outcome measure

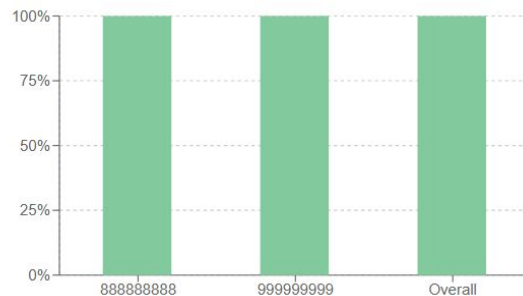
ACO-Level Data Analytics

All Analytics in One View

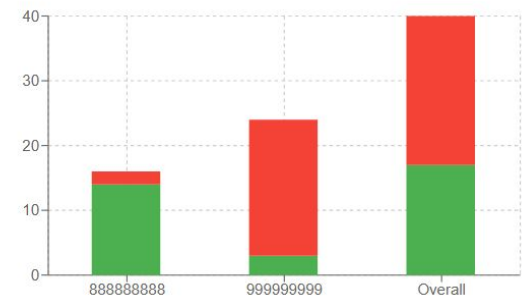
Performance (%)



Data Completeness (%)



Patient Counts (Absolute)



Drill Down for Insights

And drill
it down!

NPI Summary

Copy CSV Excel PDF Print

Search:

NPI	TIN	Practice Name	Provider Last Name	Provider First Name	Measure	Performance	Data Completeness	Patient Count
1144334038	999999999	Lakeview Medicine	Andre	Paulo	236	14.29%	100%	7
1316013006	888888888	PRATT NEUROLOGY ASSOCIATES INC	Griever	William	236	87.5%	100%	16
1982630968	999999999	Lakeview Medicine	Northrop	Mead	236	11.76%	100%	17

TIN Summary

Copy CSV Excel PDF Print

Search:

TIN	Practice Name	Measure	Performance	Data Completeness	Patient Count
888888888	PRATT NEUROLOGY ASSOCIATES INC	236	87.5%	100%	16
999999999	Lakeview Medicine	236	12.5%	100%	24

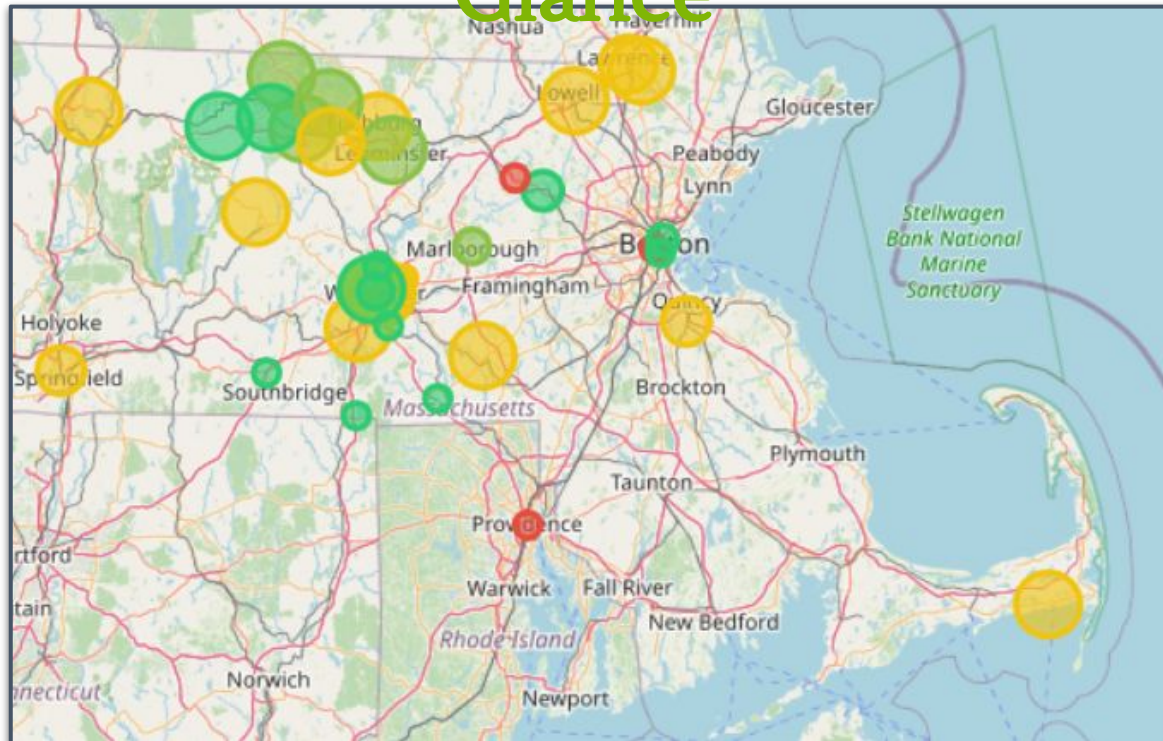
View Performance by Provider Type

Identify Variation Across Provider Types

Provider Type	Measure	Performance	Data Completeness	Patient Count
Podiatry	236	27.03%	100.00%	37
Family Practice	236	75.72%	100.00%	552
Cardiology	236	68.89%	100.00%	675
Internal Medicine	236	70.19%	100.00%	1221
Endocrinology	236	71.32%	100.00%	136
Pulmonary Disease	236	54.55%	100.00%	44
Hematology-Oncology	236	66.67%	100.00%	60
Gastroenterology	236	50.00%	100.00%	10

Provider Performance Across Locations

Understand Geographic Trends at a Glance



Strategies and Tools to Drive Performance

Operational Best Practices for ACOs & Practices



**Pre-Visit
Planning (PVP)**



**Panel
Management**



**Standing Orders
& Protocols**



**Team-Based
Care**



**Monthly
Huddles**

Quick Wins to Boost Quality Scores

- ✓ **Standing Orders:** Vaccines & Screenings (flu, pneumonia, CRC)
- ✓ **Pre-Visit Lab Orders:** HbA1c, lipid panels
- ✓ **Outreach Campaigns:** Phone/SMS for top 5 measures
- ✓ **Templates:** Ensure numerator logic capture
- ✓ **Early Pilots:** Start in 1–2 clinics, then scale

Export Patient Lists for Follow-up

SUR_FF	DEPRESSION_SCREEN	PQRS_134	FORM_DATETIME	PERFORMANCE		
	Not Done	Yes	5/29/2025	not met		
	Positive screen, follow	Yes	5/29/2025	not met		
	Positive screen, follow	Yes	5/29/2025	not met		
	Not Done	Yes	5/29/2025	not met		
	Positive screen, follow	Yes	5/29/2025	not met		
	Not Done	Yes	5/29/2025	not met		
	Positive screen, follow	Yes	5/29/2025	not met		
	Not Done	Yes	5/29/2025	not met		
	Not Done	Yes	5/29/2025	not met		
	Not Done	Yes	5/29/2025	not met		
	Not Done	Yes	5/29/2025	not met		
	Not Done	Yes	5/29/2025	not met		
	Not Done	Yes	5/29/2025	not met		
	Not Done	Yes	5/29/2025	not met		
	Positive screen, follow	Yes	5/29/2025	not met		
	Not Done	Yes	5/29/2025	not met		
	Positive screen, follow	Yes	5/29/2025	not met		
	Not Done	Yes	5/29/2025	not met		
	Positive screen, follow	Yes	5/29/2025	not met		
	Positive screen, follow	Yes	5/29/2025	not met		
	Positive screen, follow	Yes	5/29/2025	not met		
	Positive screen, follow	Yes	5/29/2025	not met		

Provider Outreach: Acting on Care Gaps

Provider follow-up



September 22, 2025

Dear Provider,

As part of our Quality Improvement Program, we are sharing a list of your patients who are due for preventive care screening. Regular preventive screenings help with early detection and prevention of diseases, supporting quality care standards.

Patients Due for Preventive Care Screening

Patient Name	DOB
Jane Doe	03/04/1960
John Doe	03/05/1960
Jane Smith	03/09/1960
John Smith	03/10/1960

Patient Outreach: Acting on Care Gaps

Patient reminders & pre-visit labs



Paulo Andre, MD

September 22, 2025

Janet Doe

|

Dear Jane,

Our records show you may be due for an important diabetes test called the Hemoglobin A1c (HbA1c). This test shows how well your blood sugar has been controlled over the last 2-3 months. Keeping this test up to date is an important step in staying healthy and avoiding diabetes problems.

What you should do: Please schedule a lab visit for your HbA1c test if you haven't had one recently. Bring this letter to your lab visit. Ask the lab to send the results to our office. Schedule a follow-up visit with us to review your results.

Lab Order

Diagnosis: Type 2 diabetes without complications (E11.9)

Let's Wrap It Up!

- ACO quality reporting is complex — but manageable
- eCQMs, MIPS CQMs, Medicare CQMs = unique challenges & opportunities
- MDinteractive builds tools for every pathway

We Are Here to Help!

MDinteractive, a **CMS Qualified Registry** for APP Reporting

The Right Partner - Forward thinking organization with the tools, talent and deep expertise reporting eCQM and CQMs to CMS.

The Right Price - Service oriented and affordable.

The Right Focus - Your success is our priority.

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