

All-Payer Model Results, CY 2014- 2017

Performance Measures	Targets	2014 Results	2015 Results	2016 Results	2017 Results
All-Payer Hospital Revenue Growth	≤ 3.58% per capita annually	1.47% growth per capita	2.31% growth per capita	0.80% growth per capita ¹	3.54% growth per capita
Medicare Savings in Hospital Expenditures	≥ \$330m cumulative over 5 years (Lower than national average growth rate from 2013 base year)	\$120 m (2.21% below national average growth)	\$275 cumulative (2.63% below national average growth since 2013)	\$586m cumulative ¹ (5.50% below national average growth since 2013)	\$916m cumulative (5.63% below national average growth since 2013)
Medicare Savings in Total Cost of Care	Lower than the national average growth rate for total cost of care from 2013 base year	\$142m (1.62% below national average growth)	\$263m cumulative (1.31% below national average growth since 2013)	\$461m cumulative ¹ (2.08% below national average growth since 2013)	\$599m cumulative (1.36% below national average growth since 2013)
All-Payer Quality Improvement Reductions in PPCs under MHAC Program	30% reduction over 5 years	25% reduction	34% reduction since 2013	44% reduction since 2013	53% reduction since 2013
Readmissions Reductions for Medicare	≤ National average over 5 years	19% reduction in gap above nation	58% reduction in gap above nation since 2013	79% reduction in gap above nation since 2013	116% reduction in gap above nation since 2013 (Currently 0.19% lower than National RR)
Hospital Revenue to Global or Population-Based	≥ 80% by year 5	95%	96%	100%	100%

¹During the last six months of CY 2016 (July – December of 2016), Hospitals undercharged their Global Budget Revenue mid-year targets by approximately 1 percent (\$25M dollars). The measures reported have been adjusted to ‘add back’ the undercharge to the period of July – December 2016 to offset the decline in savings for January – June 2017.

- The “Targets” are from the All-Payer Model Agreement, with the exception of the “Medicare Savings in Total Cost of Care” measure, which is a limitation of the Agreement.
- For the All Payer Hospital Growth measure, the data is from the HSCRC monthly hospital volume and revenue data.
- The MHAC data is derived from Maryland’s All Payer Hospital Acquired Conditions Program results.
- For the other measures, Maryland calculated the data from CMS monitoring data, which were included in final reports for the applicable years.