



ARCADIA

NOBLE HOSPITAL CENTER ALL PAYER PERFORMANCE SCORECARD

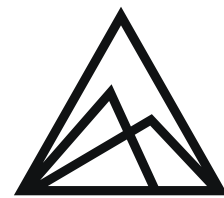
PERIOD: JAN 2017 - DEC 2017

Report run on: 2.12.2019

Claims paid through

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PERFORMANCE REPORT: NOBLE HOSPITAL CENTER
PERIOD: JAN 2017 - DEC 2017 | SUMMARY PAGE



COST & BUDGET BY PAYER

PAYER	ACTIVE MBRS	CUM. MBRS	MMS	COST	PMPM	BUDGET	DIFF TO BUDGET	RISK	NET. RISK	% CHG RISK
Cigna	4,569	5,024	52,949.0	\$2,980,543	\$56.29	\$58.70	-2.1%	0.35	0.36	8.9% ↑
Cigna MA	121	137	488.0	\$720,439	\$1,476.31	\$1,323.52	18.5%	1.20	1.11	61.9% ↑
BCBS	12,304	13,330	143,818.7	\$10,538,474	\$73.28	\$57.42	19.8%	0.33	0.32	4.8% ↑
MSSP	218	225	2,673.0	\$1,657,368	\$620.04	\$1,519.75	-59.8%	2.23	2.24	-0.0% →
United MA	119	174	1,152.0	\$704,909	\$611.90	\$713.98	-7.3%	0.81	0.90	-23.1% ↓
BCBS MA	296	302	3,220.0	\$316,869	\$98.41	\$104.53	3.6%	0.60	0.60	35.6% ↑
Aetna	20,695	26,692	252,068.0	\$247,247,660	\$980.88	\$822.28	12.2%	0.79	0.74	3.0% ↑
TOTALS	38,322	45,884	456,368.7	\$264,166,262	\$578.84	\$491.93	11.0%	0.60	0.56	3.8% ↑

QUALITY MEASURES

MEASURE	PERFORMANCE	Δ TO NEXT TARGET	PRIOR PERIOD	TREND	PROVIDERS AT TARGET
DM A1c <= 9	41.0% 1,862 / 4,494	298	43%		82 of 22 @48.05% 62 of 22 @53.24%
Pneumo Vaccine	80.0% 984 / 1,237	0	79%		139 of 2 @70.36% 136 of 2 @73.33%
Depression Screen/Follow-Up	41.0% 20,316 / 49,302	65	41%		153 of 2 @34.82% 137 of 2 @41.34%
Influenza Imm	32.0% 4,454 / 14,083	478	33%		152 of 2 @27.80% 97 of 27 @35.02%
Colorectal Cancer Screening	75.0% 10,318 / 13,774	0	75%		217 of 2 @48.72% 206 of 206 @52.85%

TOP 10 CONDITIONS

CONDITION	MBRS	% POP.	PMPM	RISK
Major Depressive, Bi...	5,038	10.9%	\$1,827.91	1.50
Diabetes without Co...	2,138	4.9%	\$1,589.53	1.30
Diabetes with Chroni...	2,083	4.7%	\$2,719.85	2.08
Drug / Alcohol Depen...	1,947	4.3%	\$2,525.25	1.96
Breast, Prostate, and ...	1,732	3.9%	\$1,820.55	1.36
Rheumatoid Arthritis ...	1,495	3.3%	\$2,975.64	2.08
Specified Heart Arrhy...	1,459	3.2%	\$3,353.09	2.43
HIV / AIDS	1,436	3.2%	\$1,570.85	1.18

IP UTILZATION

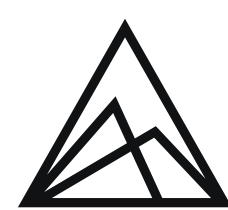
SVC CATEGORY	EVENTS	PMPM	DIFF TO NET.	EVENTS / K	DIFF TO NET.	COST / EVENT
IP Surgical (Adult)	373	\$56.73	8%	10	2%	\$69,406
IP Medical (Adult)	454	\$29.32	6%	12	-1%	\$29,478
IP Maternity	459	\$20.25	9%	12	7%	\$20,130
IP Behavioral Health	28	\$1.44	17%	1	-13%	\$23,550
IP SNF	50	\$1.44	14%	1	-4%	\$13,129
IP Surgical (Pediatric)	4	\$0.34	-36%	0	-25%	\$39,264
IP Other	15	\$0.34	-41%	0	6%	\$10,323
IP Medical (Pediatric)	5	\$0.30	-43%	0	-55%	\$27,691
TOTALS	1,388	\$110.17	7%	36	2%	\$36,223

OP & ANCILLARY UTILIZATION

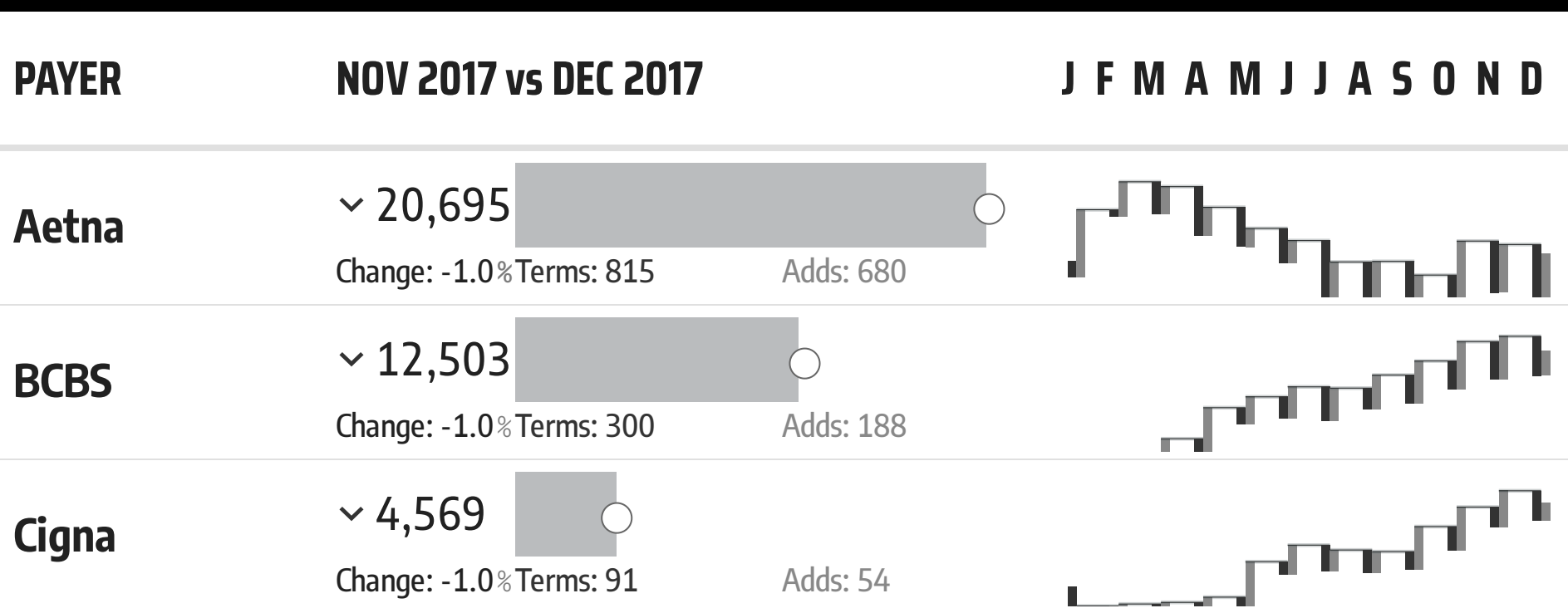
SVC CATEGORY	EVENTS	PMPM	DIFF TO NET.	EVENTS / K	DIFF TO NET.	COST / EVENT
OP Procedures	25,586	\$126.19	15%	673	11%	\$2,251
Pharmacy	327,209	\$70.24	17%	8,604	3%	\$98
Clinic Visits	41,382	\$50.85	58%	1,088	51%	\$561
Radiology	34,595	\$43.97	15%	910	10%	\$580
Lab	58,457	\$29.55	20%	1,537	7%	\$231
PCP Visits	41,211	\$28.41	-14%	1,084	-14%	\$315
Specialist Visits	45,741	\$24.86	4%	1,203	4%	\$248
ED Visits	4,468	\$20.19	-1%	117	-4%	\$2,062
Medical Pharmacy	5,148	\$19.27	14%	135	10%	\$1,708
Other	17,395	\$13.13	9%	457	2%	\$344
All Other (7)	109,945	\$42.02	13%	2,891	12%	\$174
TOTALS	711,137	\$468.68	15%	18,699	6%	\$301

PERFORMANCE REPORT: NOBLE HOSPITAL CENTER

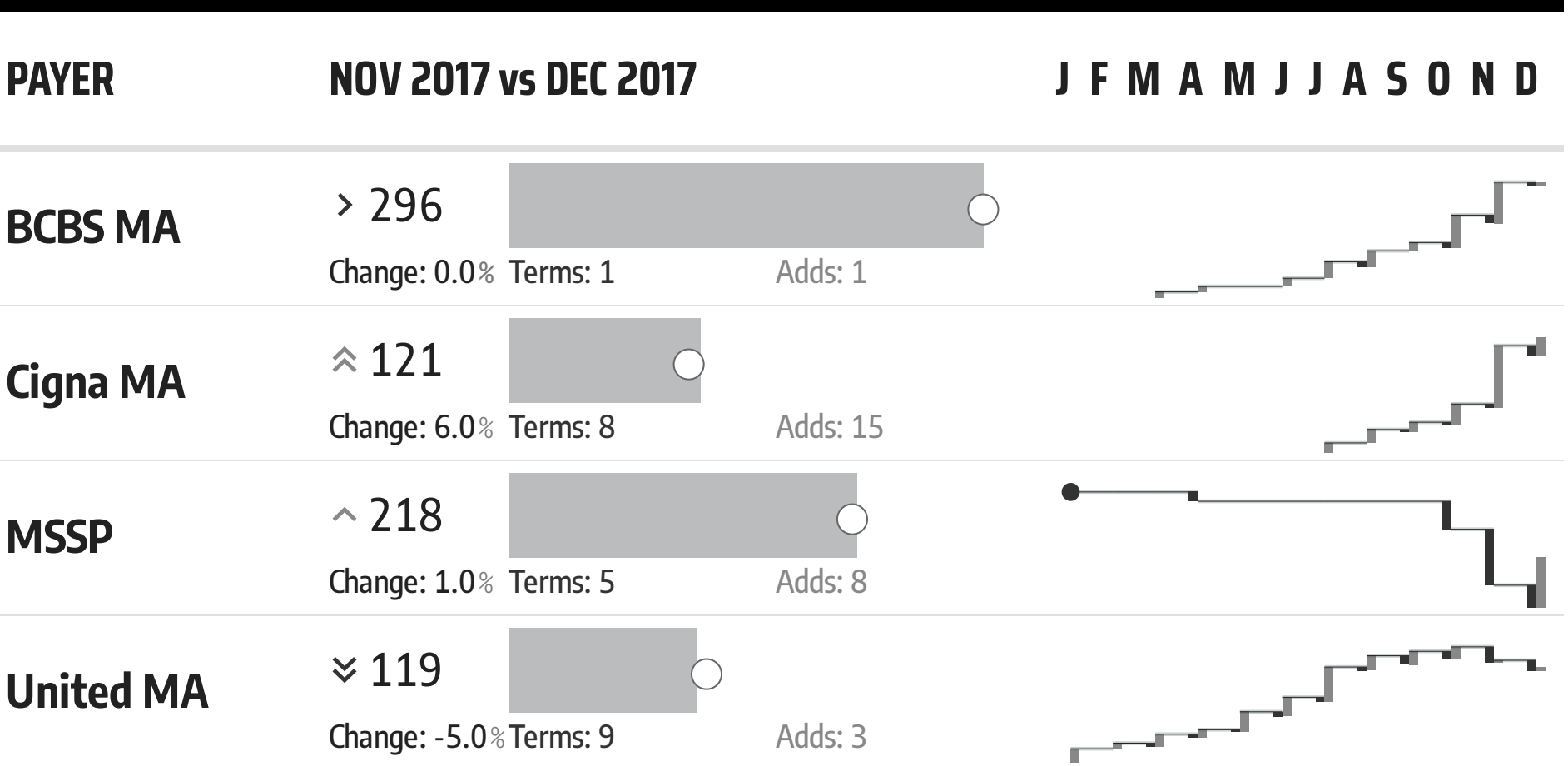
PERIOD: JAN 2017 - DEC 2017 | MEMBERSHIP & DEMOGRAPHICS



MEMBERSHIP (COMMERCIAL)



MEMBERSHIP (MEDICARE)



DEMOGRAPHICS (MALE)

AGE	ACTIVE MBRS	RISK	PMPM	% OF TCOC	RISK ADJ. NET.	% TO RA NET.
85-119	39	1.91	\$1,684.48	1%	\$1,086.33	56%⊗
75-84	240	1.43	\$1,781.21	4%	\$1,753.55	1%⊗
65-74	1,733	0.88	\$985.36	16%	\$939.71	6%⊗
50-64	6,957	0.60	\$633.04	42%	\$593.41	1%⊗
40-49	4,203	0.45	\$426.37	17%	\$381.02	3%⊗
30-39	4,695	0.37	\$304.87	12%	\$272.37	3%⊗
20-29	2,540	0.35	\$326.35	7%	\$248.36	18%⊗
10-19	445	0.27	\$240.67	1%	\$203.36	11%⊗
0-9	287	0.34	\$425.54	1%	\$279.69	25%⊗
TOTALS	21,139	0.52	\$525.62	100%	\$459.65	15%⊗

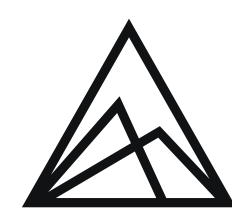
DEMOGRAPHICS (FEMALE)

AGE	ACTIVE MBRS	RISK	PMPM	% OF TCOC	RISK ADJ. NET.	% TO RA NET.
85-119	39	1.91	\$1,684.48	1%	\$1,086.33	56%⊗
75-84	240	1.43	\$1,781.21	4%	\$1,753.55	1%⊗
65-74	1,733	0.88	\$985.36	16%	\$939.71	6%⊗
50-64	6,957	0.60	\$633.04	42%	\$593.41	1%⊗
40-49	4,203	0.45	\$426.37	17%	\$381.02	3%⊗
30-39	4,695	0.37	\$304.87	12%	\$272.37	3%⊗
20-29	2,540	0.35	\$326.35	7%	\$248.36	18%⊗
10-19	445	0.27	\$240.67	1%	\$203.36	11%⊗
0-9	287	0.34	\$425.54	1%	\$279.69	25%⊗
TOTALS	21,139	0.52	\$525.62	100%	\$459.65	15%⊗

COST BREAKOUT

COST RANGE	MBRS	COST	PMPM	AVG. RISK	% OF IP	% OF ED	% OF COST	% OF MMS
400K-900K	16	\$10,199,775	\$46,787.96	7.44	5%	1%	4%	0%
300K-400K	14	\$5,826,913	\$29,768.79	7.42	3%	0%	2%	0%
200K-300K	38	\$12,117,783	\$23,529.68	5.36	5%	1%	5%	0%
150K-200K	61	\$12,028,117	\$15,302.95	3.97	6%	2%	5%	0%
100K-150K	158	\$22,320,855	\$10,605.52	2.92	12%	3%	9%	0%
75K-100K	166	\$16,909,271	\$7,867.78	2.56	9%	3%	7%	0%
50K-75K	386	\$26,542,488	\$5,381.42	2.05	14%	5%	10%	1%
25K-50K	1,255	\$50,911,183	\$3,196.72	1.54	30%	15%	20%	3%
15K-25K	1,299	\$28,034,245	\$1,753.88	1.40	8%	14%	11%	4%
4K-15K	5,843	\$53,582,889	\$734.65	0.93	6%	39%	21%	16%
500-4K	8,018	\$19,896,455	\$208.86	0.53	1%	18%	8%	21%
0-500	21,049	\$789,104	\$3.22	0.30	0%	1%	0%	54%
TOTALS	38,303	\$259,159,078	\$568.06	0.59	100%	100%	100%	100%

PERFORMANCE REPORT: NOBLE HOSPITAL CENTER
PERIOD: JAN 2017 - DEC 2017 | INPATIENT DETAIL



TOP SERVICE LINES (MED)

SVC LINE	ADMITS	ADMITS / K	\$ / ADMIT	LOS	LEAKAGE	NET. LEAKAGE
Gastroenterology	88	2	\$18,858	2.6	44%	57%
Pulmonology	54	1	\$28,417	3.4	35%	44%
Medical Cardiology	51	1	\$25,770	4.0	59%	57%
Infectious Disease	50	1	\$43,771	6.3	48%	53%
Oncology (Medical)	31	1	\$42,701	7.4	52%	41%
Other General Medicine	25	1	\$35,427	8.0	60%	59%
Nephrology	21	1	\$16,045	3.5	48%	49%
Stroke and Transient Isch...	15	0	\$35,435	3.0	40%	40%
Endocrinology	14	0	\$16,882	4.4	43%	51%
All Other (21)	110	3	\$31,911	5.6	48%	52%
TOTALS	459	12	\$29,458	4.7	47%	52%

TOP SERVICE LINES (SURG)

SVC LINE	ADMITS	ADMITS / K	\$ / ADMIT	LOS	LEAKAGE	NET. LEAKAGE
Joint Replacement	79	2	\$61,704	2.6	56%	51%
Other General Surgery	35	1	\$95,077	6.9	51%	52%
Colorectal / Lower GI	24	1	\$52,880	3.9	67%	64%
Bariatric / Obesity	20	1	\$45,069	2.0	60%	68%
Fusion	19	0	\$92,317	3.4	32%	48%
General Surgical Gynecol...	17	0	\$26,563	1.5	71%	59%
Brain	15	0	\$92,676	11.4	47%	50%
Sports Medicine	14	0	\$54,584	2.6	50%	50%
Cardiac Cath	14	0	\$65,560	2.4	50%	63%
All Other (28)	140	4	\$74,250	4.8	49%	53%
TOTALS	377	10	\$69,086	4.2	52%	54%

TOP OON FACILITIES (MED)

FACILITY	ADMITS	ADMITS / K	\$ / ADMIT	LOS	EMERG... %	READMIT %
Great River Medical Cent...	106	3	\$29,882	3.8	56%	11%
Summerfield Communit...	16	0	\$40,755	5.6	81%	19%
Bellevue Community Ho...	13	0	\$35,969	6.2	77%	15%
Pine Rest Medical Center	11	0	\$33,708	3.8	36%	-
Desert Springs Medical C...	6	0	\$13,083	4.7	83%	-
Pinevale Medical Clinic	4	0	\$42,395	24.0	100%	-
All Other (48)	85	2	\$23,496	4.1	85%	6%
TOTALS	241	6	\$28,644	4.5	69%	9%

TOP OON FACILITIES (SURG)

FACILITY	ADMITS	ADMITS / K	\$ / ADMIT	LOS	EMERG... %	READMIT %
Great River Medical Cent...	93	2	\$58,749	3.5	23%	4%
Summerfield Communit...	14	0	\$91,649	8.3	36%	14%
Bellevue Community Ho...	14	0	\$93,923	2.6	7%	14%
Cherry Blossom Hospital	13	0	\$52,616	3.2	-	-
Meadowview Hospital	4	0	\$22,174	1.8	-	-
Golden Oak Hospital	3	0	\$141,744	4.0	-	-
All Other (30)	39	1	\$74,202	5.4	41%	13%
TOTALS	180	5	\$67,519	4.2	24%	7%

TOP IIN FACILITIES (MED)

FACILITY	ADMITS	ADMITS / K	\$ / ADMIT	LOS	EMERG... %	READMIT %
Grand View Medical Clinic	91	2	\$29,913	3.4	46%	2%
Peace Forest General Ho...	13	0	\$31,058	4.5	62%	-
Rosemary Hospital	10	0	\$9,329	3.0	90%	-
Grand Mountain General...	10	0	\$16,694	2.0	90%	-
Diamond Grove Commu...	7	0	\$71,846	18.9	86%	14%
Desert Springs Clinic	6	0	\$33,106	7.0	83%	-
All Other (46)	81	2	\$31,239	5.9	85%	5%
TOTALS	218	6	\$30,358	4.9	68%	3%

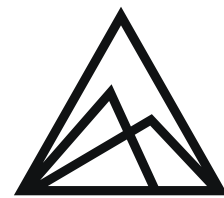
TOP IIN FACILITIES (SURG)

FACILITY	ADMITS	ADMITS / K	\$ / ADMIT	LOS	EMERG... %	READMIT %
Grand View Medical Clinic	101	3	\$73,603	4.0	18%	6%
Peace Forest General Ho...	12	0	\$162,387	11.6	33%	-
Twin Mountains Medical...	12	0	\$57,764	2.1	-	8%
White Petal Hospital	10	0	\$74,777	4.5	20%	-
Clearview Clinic	9	0	\$51,021	6.0	22%	22%
Lakeside Clinic	6	0	\$34,388	2.3	33%	-
All Other (27)	47	1	\$51,130	3.2	38%	11%
TOTALS	197	5	\$70,518	4.2	23%	7%

TOP MEDICATION CLASSES

MED CLASS (LVL 2)	SCRIPTS / K	\$ / SCRIPT	NET \$ / SCRIPT	GENERIC %	NET % GENERIC	DIFF % GENERIC	% BY PCP	NET % PCP
ANTIVIRALS	\$18.37	\$765	\$765	3%	4%	-1%✔	57%	52%
ANALGESICS - ANTI-INFLAMMATORY	\$8.83	\$518	\$518	5%	5%	-1%✔	31%	32%
ANTIDIABETICS	\$4.89	\$164	\$164	4%	4%	-1%✔	45%	49%
ANTINEOPLASTICS AND ADJUNCTIVE T...	\$4.01	\$778	\$778	7%	8%	-1%✔	3%	2%
DERMATOLOGICALS	\$2.92	\$97	\$97	6%	6%	-0%○	23%	24%
ENDOCRINE AND METABOLIC AGENTS ...	\$2.90	\$559	\$559	5%	5%	0%○	21%	21%
ANTIASTHMATIC AND BRONCHODILAT...	\$2.86	\$105	\$105	1%	2%	-1%✔	49%	48%
GASTROINTESTINAL AGENTS - MISC.	\$1.95	\$359	\$359	2%	3%	-1%✔	10%	11%
PSYCHOTHERAPEUTIC AND NEUROLO...	\$1.84	\$841	\$841	5%	6%	-1%✔	39%	29%
ADHD / ANTI-NARCOLEPSY / ANTI-OBE...	\$1.69	\$92	\$92	4%	5%	-1%✔	24%	25%
CARDIOVASCULAR AGENTS - MISC.	\$1.59	\$184	\$184	-	0%	-0%○	58%	60%
MISCELLANEOUS THERAPEUTIC CLASS...	\$1.49	\$518	\$518	10%	11%	-1%✔	7%	5%
ANTIDEPRESSANTS	\$1.29	\$15	\$15	6%	7%	-1%✔	37%	40%
HEMATOPOIETIC AGENTS	\$1.27	\$483	\$483	11%	11%	-0%○	30%	35%
ANTICONVULSANTS	\$1.22	\$43	\$43	7%	8%	-1%✔	24%	26%
CONTRACEPTIVES	\$0.98	\$30	\$30	6%	6%	-0%○	35%	32%
OPHTHALMIC AGENTS	\$0.81	\$61	\$61	4%	5%	-1%✔	6%	6%
VAGINAL PRODUCTS	\$0.77	\$141	\$141	3%	3%	0%○	28%	24%
DIAGNOSTIC PRODUCTS	\$0.68	\$119	\$119	-	-	-	28%	35%
ANTIHYPERLIPIDEMICS	\$0.66	\$18	\$18	7%	8%	-1%✔	68%	70%
ANTICOAGULANTS	\$0.66	\$138	\$138	5%	5%	-1%✔	37%	41%
ANTI-INFECTIVE AGENTS - MISC.	\$0.57	\$101	\$101	6%	7%	-1%✔	15%	15%
ANALGESICS - OPIOID	\$0.56	\$37	\$37	8%	8%	-0%○	29%	29%
ANDROGENS-ANABOLIC	\$0.50	\$166	\$166	6%	7%	-1%✔	38%	40%
ULCER DRUGS	\$0.48	\$20	\$20	6%	8%	-1%✔	46%	47%
ANTIPSYCHOTICS / ANTIMANIC AGENTS	\$0.42	\$58	\$58	7%	7%	0%○	9%	8%
THYROID AGENTS	\$0.38	\$14	\$14	6%	6%	1%✖	53%	53%
MIGRAINE PRODUCTS	\$0.36	\$66	\$66	7%	6%	1%✖	50%	47%
HEMATOLOGICAL AGENTS - MISC.	\$0.34	\$188	\$188	12%	10%	1%✖	24%	29%
BETA BLOCKERS	\$0.30	\$14	\$14	8%	9%	-1%✔	58%	58%
All Other (56)	\$4.67	\$21	\$21	6%	7%	-31%✔	42%	41%
TOTALS	\$70.24	\$98	\$98	6%	6%	-44%✔	40%	40%

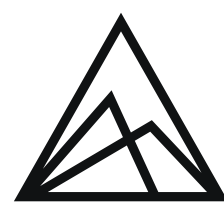
PERFORMANCE REPORT: NOBLE HOSPITAL CENTER
PERIOD: JAN 2017 - DEC 2017 | APPENDIX



TOP UROLOGY PROCEDURES

PROCEDURE	EVENTS	EVENTS / K	DIFF EVENTS / K	\$ / EVENT	DIFF \$ / EVENT	LEAKAGE	DIFF LEAKAGE
Diagnostic procedures, male genital	431	11	<div><div></div>1⊗</div>	\$1,447	\$135⊗	64%	<div><div></div>-18%🔗</div>
Endoscopy and endoscopic biopsy of the urinar...	221	6	<div><div></div>0⊗</div>	\$1,938	\$373⊗	64%	<div><div></div>-15%🔗</div>
Other non-OR therapeutic procedures, male ge...	142	4	<div><div></div>1⊗</div>	\$1,532	\$149⊗	89%	<div><div></div>1%⊗</div>
Indwelling catheter	57	1	<div><div></div>0⊗</div>	\$656	\$38⊗	65%	<div><div></div>-1%🔗</div>
Circumcision	52	1	<div><div></div>0⊗</div>	\$1,051	-\$68🔗	92%	<div><div></div>-</div>
Extracorporeal lithotripsy, urinary	49	1	<div><div></div>-0🔗</div>	\$12,679	\$698⊗	65%	<div><div></div>5%⊗</div>
Transurethral excision, drainage, or removal uri...	46	1	<div><div></div>-0🔗</div>	\$3,727	\$467⊗	70%	<div><div></div>-12%🔗</div>
Other OR therapeutic procedures, male genital	26	1	<div><div></div>-0🔗</div>	\$10,382	\$787⊗	58%	<div><div></div>3%⊗</div>
Procedures on the urethra	16	0	<div><div></div>-0🔗</div>	\$2,060	\$360⊗	88%	<div><div></div>-7%🔗</div>
Other non-OR therapeutic procedures of urinar...	14	0	<div><div></div>-0🔗</div>	\$352	-\$317🔗	86%	<div><div></div>-1%🔗</div>
Ureteral catheterization	14	0	<div><div></div>0⊗</div>	\$6,209	-\$950🔗	79%	<div><div></div>-12%🔗</div>
Other diagnostic procedures of urinary tract	11	0	<div><div></div>0⊗</div>	\$5,345	\$1,177⊗	64%	<div><div></div>-17%🔗</div>
Genitourinary incontinence procedures	11	0	<div><div></div>-0🔗</div>	\$10,707	\$1,274⊗	82%	<div><div></div>10%⊗</div>
Transurethral resection of prostate (TURP)	8	0	<div><div></div>-0🔗</div>	\$11,280	\$2,083⊗	63%	<div><div></div>-17%🔗</div>
Nephrotomy and nephrostomy	7	0	<div><div></div>0⊗</div>	\$6,029	-\$1,641🔗	57%	<div><div></div>-18%🔗</div>
Other OR therapeutic procedures of urinary tract	7	0	<div><div></div>-0🔗</div>	\$5,051	-\$1,339🔗	43%	<div><div></div>-4%🔗</div>
Open prostatectomy	5	0	<div><div></div>0⊗</div>	\$2,740	\$783⊗	80%	<div><div></div>12%⊗</div>
Extracorporeal shock wave, other than urinary	4	0	<div><div></div>0○</div>	\$793	-\$3,334🔗	100%	<div><div></div>-</div>
Nephrectomy, partial or complete	1	0	<div><div></div>0○</div>	\$5,589	\$355⊗	100%	<div><div></div>-</div>
TOTALS	1,122	30	<div><div></div>30⊗</div>	\$2,599	\$1,029⊗	70%	<div><div></div>-5%🔗</div>

PERFORMANCE REPORT: NOBLE HOSPITAL CENTER
PERIOD: JAN 2017 - DEC 2017 | GLOSSARY OF TERMS



TERM	DEFINITION
Reporting Period	The time period that was selected for inclusion in the report book. This is typically the contract year to date, such as 3/1/2018 to 6/30/2018.
Paid Thru Date	The date on which the last claim was paid in the data set used to process the report books. This is typically the date that Arcadia last received claims data.
Active Members	The set of unique members with any active eligibility (of any length) during the last month of the Reporting Period.
Cumulative Members	The set of unique members with any active eligibility (of any length) during the Reporting Period.
Member Months	A sum of fractional member months (MMs), calculated by the number of eligible days a unique member has in a month divided by the number of days in that month, and summed across a selected month in the Reporting Period, or across all months in the Reporting Period. The default is summed across the full reporting period.
TCOC	Total Cost of Care is the sum of the reported amount (in this case paid amount) on all/any adjudicated claims with a service date (or incurred date) during the Reporting Period and before the Paid Thru Date. TCOC is available in 2 forms: <ul style="list-style-type: none">• TCOC w/o IBNR: This is the sum of the reported amount on any applicable adjudicated claims. This is generally used when reporting on or investigating specific service types, or events.• TCOC w/ IBNR: This is the sum of a calculation completed for any applicable adjudicated claims. The calculation is the reported amount multiplied by the IBNR ratio provided for any claims with a service date in a given time period. This is generally used when reporting on or investigating costs across a given population.
PMPM	Per Member Per Month costs are calculated as TCOC divided by Member Months and is available in 2 forms: <ul style="list-style-type: none">• PMPM w/o IBNR: This is TCOC w/o IBNR divided by Member Months• PMPM w/ IBNR: This is TCOC w/ IBNR divided by Member Months
IBNR	Incurred But Not Reported claims cost. IBNR factors are calculated by Arcadia based on claims history and used to adjust total cost of care and PMPM values.
Carveouts	Costs (TCOC) in the report book are net of carveouts (i.e. a service that has been specified as not at risk). Carveouts are identified by an indicator on the claim and claim_rx lines, and include: <ul style="list-style-type: none">• CBHI• ABA• High Cost Drugs• Drug Condition
Ambulatory Sensitive Conditions (ASC)	Potentially Preventable Admits for IP. Additional details can be found here: http://docs.arcadiaanalytics.com/Arcadia_Concepts/Ambulatory-Sensitive-Condition/ . There are 13 ASCs coded based on various PQIs managed by AHRQ. These are based on ICD-9 and ICD-10 codes on the claims feeds.
Avoidable EDs	This is based on the NYU classification
Non-Avoidable EDs	This is the inverse of the NYU classification
Budgets	The budget is defined by rate data shared by the payers and based on the ACO, Pod, Chapter, Product, and Time Period. The budget used throughout the report book is: <ul style="list-style-type: none">• Risk Adjusted Budget w/ Maternity: The base rate, risk adjusted, with any eligible Maternity Kick Payments.
Emergent IP Events	IP events that were preceded by an ED or ambulance service based on the service categorization and using the NYU algorithm. For additional detail: http://docs.arcadiaanalytics.com/Utilization/ED_Classification/#emergency-room-classification
Facility	The facility is the servicing facility on the claim. In the case of an inpatient event, this is the facility on the claim line with the room and board revenue code. In the case of outpatient events (including ED and Observation visits) this is the facility where the visit occurred.
Inpatient Events (IP)	If the event has a positive cost room and board code, the algorithm will look at the admit/discharge date on the claim and chain multiple claims and lines together based on claim type and/or facility so that multiple stays are merged into one and all relevant costs are included in the cost of that event. In addition, the event is attributed to the month the patient was admitted.
LOS	Length of Stay (LOS) is the average number of consecutive inpatient episode days per stay.
Medication Class	Derived from the drug group associated with the NDC code in Medi-Span.
Prevalence	Percentage of the Active Members with a diagnosis.
Rating Category	The rate code category provided on the eligibility segment for the member.
Readmit	An episode will be categorized as a readmission based on the NCQA HEDIS All-Cause Readmission Measure. Additional detail can be found here: http://docs.arcadiaanalytics.com/Arcadia_Concepts/Episodes/#readmission-logic
Risk	Risk scores are currently calculated by Arcadia using the Johns Hopkins ACG model.
Service Categories	The Service Categories are based on Arcadia's V3 Claims Grouper. Further details can be found here .
Quality Measures	The Quality Measures included are those in the selected Contract Initiative. The period used is most recent trailing year period that the book is run for (i.e. if it is run March 2018 through May 2018, the measure period is Trailing Year May 2018)
Utilization per K	Events, admits and scripts per thousand are generally presented in the application as Events / K. Events and Admits are calculated as Events * MMs / 12000, and scripts is calculated as Scripts * MMs / 1000
Network	Through out the report book, Network is used for comparative purposes. In this report book, Network is defined as all of the participating ACOs in the availalbe claims data. For example, Network PMPM is the PMPM for that item at the network level. Same with Util per K.
Conditions	The conditions used through the report book are based on CMS's HCC model.
Risk Adjusted Network Metrics	Through out the report book, Network metrics, such as costs, or events/k are risk adjusted (referred to as RA Net.) to allow for more compelling comparisons. These metrics are adjusted using the following calculation: (Subject Risk / Network Risk) * Network Value

Note: links provided above can be accessed by navigating to the link after logging into the UAT or PRD Arcadia Analytics environment.