

ACO Name and Location

Accountable Care Coalition of Georgia, LLC.
4888 Loop Central Drive
Suite 300
Houston, TX 77081

ACO Primary Contact

Karen Holt
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Organizational Information

ACO Participants:

| ACO Participants | ACO Participant in Joint Venture |
|---|----------------------------------|
| Diversity Health Center, Inc. | N |
| Health Education Assessment and Leadership, Inc | N |
| J.C. Lewis Primary Healthcare Center, Inc | N |
| Primary Care of Southwest Georgia, Inc | N |
| Coastal Community Health Services, Inc. | N |
| Curtis V. Cooper Primary Health Care Inc | N |
| Palmetto Health Council, Inc | N |
| Georgia Highlands Medical Services, Inc | N |
| Primary Health Care Center Of Dade, Inc | N |
| Oakhurst Medical Centers, Inc | N |
| Center for Pan Asian Community Services, Inc. | N |
| Georgia Mountains Health Services, Inc | N |
| Valley Healthcare System, Inc | N |
| South Central Primary Care Center, Inc | N |
| Mckinney Community Health Center, Inc | N |
| Oconee Valley Healthcare, Inc. | N |

ACO Governing Body:

| Member Last Name | Member First Name | Member Title/Position | Member's Voting Power(Expressed as a percentage or number) | Membership Type | ACO Participant Legal Business Name and D/B/A, if applicable |
|-------------------------|--------------------------|------------------------------|--|---|---|
| Tanner | Amy | Voting Member | 23% | Other: ACO Affiliate (CHS) Representative | Collaborative Health Systems |
| Miracle | Steven | Chair, Voting Member | 10.7% | ACO participant representative | Georgia Mountains Health Services, Inc. |
| Jacobs, M.D. | Theresa | Voting Member | 10.7% | ACO participant representative | Oakhurst Medical Centers, Inc. |
| DiPaula | Raymond | Voting Member | 2% | Medicare Beneficiary Representative | N/A – (Medicare Beneficiary) |
| Uzzle, M.D. | Raulnina | Voting Member | 10.7% | ACO participant representative | Oakhurst Medical Centers, Inc. |
| Lang | Sarah | Voting Member | 10.7% | ACO participant representative | Valley Healthcare System, Inc. |
| Allen | Diana | Voting Member | 10.7% | ACO participant representative | Primary Health Care Center Of Dade, Inc. |
| Grandy | Albert | Voting Member | 10.7% | ACO participant representative | Curtis V. Cooper Primary Health Care Inc. |
| Meyers | Barbara | Voting Member | 10.7% | ACO participant representative | Coastal Community Health Services, Inc. |

Key ACO Clinical and Administrative Leadership:

ACO Executive: Karen Holt

Medical Director: Theresa Jacobs, MD

Compliance Officer: Lori-Don Gregory

Quality Assurance/Improvement Officer: Theresa Jacobs, MD

Associated Committees and Committee Leadership:

| Committee Name | Committee Leader Name and Position |
|--|---|
| Quality Improvement Care Coordination (QICC) | Raulnina Uzzle, M.D. Chair |

Types of ACO Participants, or Combinations of Participants, That Formed the ACO:

- Federally Qualified Health Center (FQHC)

Shared Savings and Losses

Amount of Shared Savings/Losses:

- Third Agreement Period
 - Performance Year 2020, \$1,430,738
 - Performance Year 2019, \$ 1,145,746

Note: Our ACO participated in multiple performance years during Calendar Year 2019. Shared savings/losses amount reported for Performance Year 2019 therefore represents net shared savings or losses across all performance years in 2019 and is shown under all agreement periods in which the ACO operated during Calendar Year 2019.

- Second Agreement Period
 - Performance Year 2019, \$ 1,145,746
 - Performance Year 2018, \$0
 - Performance Year 2017, \$0
 - Performance Year 2016, \$0

Note: Our ACO participated in multiple performance years during Calendar Year 2019. Shared savings/losses amount reported for Performance Year 2019 therefore represents net shared savings or losses across all performance years in 2019 and is shown under all agreement periods in which the ACO operated during Calendar Year 2019.

- First Agreement Period
 - Performance Year 2015, \$0
 - Performance Year 2014, \$0
 - Performance Year 2013, \$0

Shared Savings Distribution:

- Third Agreement Period
 - Performance Year 2020
 - Proportion invested in infrastructure: 19%
 - Proportion invested in redesigned care processes/resources: 62%
 - Proportion of distribution to ACO participants: 19%

- - Performance Year 2019
 - Proportion invested in infrastructure: 17%
 - Proportion invested in redesigned care processes/resources: 65%
 - Proportion of distribution to ACO participants: 17%

Note: Our ACO participated in multiple performance years during Calendar Year 2019. Distribution of shared savings reported for Performance Year 2019 therefore represents the distribution of the net shared savings across all performance years in 2019 and is shown under all agreement periods in which the ACO operated during Calendar Year 2019.

- Second Agreement Period
 - Performance Year 2019
 - Proportion invested in infrastructure: 17%
 - Proportion invested in redesigned care processes/resources: 65%
 - Proportion of distribution to ACO participants: 17%

Note: Our ACO participated in multiple performance years during Calendar Year 2019. Distribution of shared savings reported for Performance Year 2019 therefore represents the distribution of the net shared savings across all performance years in 2019 and is shown under all agreement periods in which the ACO operated during Calendar Year 2019.

- Performance Year 2018
 - Proportion invested in infrastructure: N/A
 - Proportion invested in redesigned care processes/resources: N/A
 - Proportion of distribution to ACO participants: N/A
- Performance Year 2017
 - Proportion invested in infrastructure: N/A
 - Proportion invested in redesigned care processes/resources: N/A
 - Proportion of distribution to ACO participants: N/A
- Performance Year 2016
 - Proportion invested in infrastructure: N/A
 - Proportion invested in redesigned care processes/resources: N/A
 - Proportion of distribution to ACO participants: N/A

- First Agreement Period

- Performance Year 2015
 - Proportion invested in infrastructure: N/A
 - Proportion invested in redesigned care processes/resources: N/A
 - Proportion of distribution to ACO participants: N/A
- Performance Year 2014
 - Proportion invested in infrastructure: N/A
 - Proportion invested in redesigned care processes/resources: N/A
 - Proportion of distribution to ACO participants: N/A
- Performance Year 2013
 - Proportion invested in infrastructure: N/A
 - Proportion invested in redesigned care processes/resources: N/A
 - Proportion of distribution to ACO participants: N/A

Quality Performance Results

2020 Quality Performance Results:

| ACO Quality Measure Number | Measure Name | Rate | ACO Mean |
|----------------------------|--|-------|----------|
| ACO-43 | Ambulatory Sensitive Condition Acute Composite (AHRQ Prevention Quality Indicator (PQI #91)) | 0.92 | 0.95 |
| ACO-13 | Falls: Screening for Future Fall Risk | 91.02 | 84.97 |
| ACO-14 | Preventive Care and Screening: Influenza Immunization | 51.28 | 76.03 |
| ACO-17 | Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention | 81.95 | 81.67 |
| ACO-18 | Preventive Care and Screening: Screening for Clinical Depression and Follow-up Plan | 88.93 | 71.46 |
| ACO-19 | Colorectal Cancer Screening | 42.67 | 72.59 |
| ACO-20 | Breast Cancer Screening | 51.64 | 74.05 |
| ACO-42 | Statin Therapy for the Prevention and Treatment of Cardiovascular Disease | 79.43 | 83.37 |
| | | | |
| ACO-27 | Diabetes Mellitus: Hemoglobin A1c Poor Control | 22.30 | 14.70 |

| | | | |
|--------|---|-------|-------|
| ACO-28 | Hypertension (HTN): Controlling High Blood Pressure | 61.69 | 72.87 |
|--------|---|-------|-------|

Please note, the ACO-40 Depression Remission at 12 months quality measure is not included in public reporting due to low sample size. The Centers for Medicare & Medicaid Services (CMS) also waived the requirement for ACOs to field a CAHPS for ACOs survey for PY 2020 through the Physician Fee Schedule Final Rule for Calendar Year 2021. Additionally, CMS reverted ACO-8 Risk-Standardized, All Condition Readmission and ACO-38 Risk-Standardized Acute Admission Rates for Patients with Multiple Chronic Conditions to pay-for-reporting, given the impact of the coronavirus disease 2019 (COVID-19) public health emergency (PHE) on these measures. For Previous Years' Financial and Quality Performance Results, Please Visit data.cms.gov.