## **ACO Name and Location**

Accountable Care Coalition of Georgia, LLC. 1668 S. Garfield Ave 2<sup>nd</sup> FL Alhambra, CA 91801

# **ACO Primary Contact**

Karen Holt 855-236-9820 Karen.Holt@astranahealth.com

# **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
Curtis V. Cooper Primary Health Care Inc	N
Palmetto Health Council, Inc	N
Primary Health Care Center Of Dade, Inc	N
MedCura Health 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 Medical Center, Inc	N
Oconee Valley Healthcare, Inc.	N
Careconnect Health Inc	N
North Georgia Health Center Inc	N
Meridian Education Resource Group, Inc.	N

## **ACO Governing Body:**

Member First Name	Member Last Name	Member Title/Position	Member's Voting Power( Expressed as a percentage)	Membership Type	ACO Participant Legal Business Name, if applicable
Amy	Tanner	Voting Member	23%	Other: ACO Affiliate (CHS) Representative	Collaborative Health Systems
Steven	Miracle	Chair, Voting Member	12.5%	ACO participant representative	Georgia Mountains Health Services, Inc.
Theresa	Jacobs, M.D.	Voting Member	12.5%	ACO participant representative	MedCura Health Inc
John	Rhodes	Voting Member	2%	Medicare Beneficiary Representative	N/A – (Medicare Beneficiary)
Raulnina	Uzzle, M.D.	Voting Member	12.5%	ACO participant representative	MedCura Health Inc
Sarah	Lang	Voting Member	12.5%	ACO participant representative	Valley Healthcare System, Inc.
Dave	Ringer	Voting Member	12.5%	ACO participant representative	Oconee Valley Healthcare
Albert	Grandy	Voting Member	12.5%	ACO participant representative	Curtis V. Cooper Primary Health Care Inc.
Ajay	Gehlot	Voting Member	12.5%	ACO participant representative	Care Connect Health

# **Key ACO Clinical and Administrative Leadership:**

ACO Executive: Karen Holt

Medical Director: Theresa Jacobs, MD

Compliance Officer: Khurrum Shah

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 2023, \$ 670,244
  - Performance Year 2022, \$ 4,910,737
  - Performance Year 2021, \$ 1,467,186
  - Performance Year 2020, \$ 1,430,738
  - o 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
  - o Performance Year 2018, \$0
  - Performance Year 2017, \$0
  - o 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 2023
    - Proportion invested in infrastructure: 70%

- Proportion invested in redesigned care processes/resources: 0%
- Proportion of distribution to ACO participants: 30%

#### > Performance Year 2022

- Proportion invested in infrastructure: 29.65%
- Proportion invested in redesigned care processes/resources: 37.59%
- Proportion of distribution to ACO participants: 32.77%

#### Performance Year 2021

- Proportion invested in infrastructure: 26%
- Proportion invested in redesigned care processes/resources: 48%
- Proportion of distribution to ACO participants: 26%

#### 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**

## 2023 Quality Performance Results:

Quality performance results are based on the CMS Web Interface Measure Set collection type.

Measure #	Measure Name	Collection Type	Reported Performancd Rate	Current Year Mean Performance Rate (SSP ACOs)
001	Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%)	CMS Web Interface	12.30	9.84
134	Preventive Care and Screening: Screening for Depression and Follow-up Plan	CMS Web Interface	92.77	80.97
236	Controlling High Blood Pressure	CMS Web Interface	79.57	77.80
318	Falls: Screening for Future Fall Risk	CMS Web Interface	94.48	89.42
110	Preventive Care and Screening: Influenza Immunization	CMS Web Interface	43.86	70.76
226	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	CMS Web Interface	95.83	79.29
113	Colorectal Cancer Screening	CMS Web Interface	62.59	77.14
112	Breast Cancer Screening	CMS Web Interface	66.42	80.36
438	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	CMS Web Interface	88.10	87.05
370	Depression Remission at Twelve Months	CMS Web Interface	33.33	16.58
321	CAHPS for MIPS	CAHPS for MIPS Survey	5.28	6.25
CAHPS-1	Getting Timely Care, Appointments, and Information	CAHPS for MIPS Survey	84.67	83.68
CAHPS-2	How Well Providers Communicate	CAHPS for MIPS Survey	91.34	93.69
CAHPS-3	Patient's Rating of Provider	CAHPS for MIPS Survey	90.79	92.14

CAHPS-4	Access to Specialists	CAHPS for MIPS Survey	80.48	75.97
CAHPS-5	Health Promotion and Education	CAHPS for MIPS Survey	65.48	63.93
CAHPS-6	Shared Decision Making	CAHPS for MIPS Survey	59.53	61. 60
CAHPS-7	Health Status and Functional Status	CAHPS for MIPS Survey	69.02	74.12
CAHPS-8	Care Coordination	CAHPS for MIPS Survey	84.75	85.77
CAHPS-9	Courteous and Helpful Office Staff	CAHPS for MIPS Survey	92.17	92.31
CAHPS- 11	Stewardship of Patient Resources	CAHPS for MIPS Survey	22.91	26. 69
479	Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Eligible Clinician Groups	Administrative Claims	0.1625	0.1553
484	Clinician and Clinician Group Risk- standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions	Administrative Claims		35.39

For previous years' Financial and Quality Performance Results, please visit <u>data.cms.gov</u>.