# **SHARED SAVINGS PROGRAM PUBLIC REPORTING**

#### **ACO** Name and Location

Southern Kentucky Health Care Alliance 121 College Street Smiths Grove, KY 42171

#### **ACO Primary Contact**

Gary Albers 502-386-4944 garyalbers@imperiumhealth.com

# **Organizational Information**

## ACO Participants:

ACO Participants	ACO Participant in Joint Venture
BULLITT COUNTY FAMILY PRACTITIONERS, PSC	Ν
CHARLES S. GILES MD, PSC	Ν
CLIFTON CENTREVILLE MEDICAL ASSOCIATES	Ν
GILBERT BARBEE MOORE & MCILVOY, PSC	Ν
QUALITY INTERNAL MEDICINE, PLLC	Ν
TESSA CHOLMONDELEY MD PC	Ν

### 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	
PRAVIN	AVULA	VOTING MEMBER	19%	ACO PARTICIPANT	GILBERT BARBEE MOORE & MCILVOY PSC	
KAMAL	SINGH	VOTING MEMBER	19%	ACO PARTICIPANT	GILBERT BARBEE MOORE & MCILVOY PSC	
PRAVEEN	ARLA	CEO/VOTING MEMBER	19%	ACO PARTICIPANT	BULLIT COUNTY FAMILY PRACTITIONERS	
ANSON	HSEIH	VOTING MEMBER	19%	ACO PARTICIPANT	GILBERT BARBEE MOOR & MCILVOY PSC	
GARY	ALBERS	BOARD MEMBER	19%	OTHER	N/A	
MIKE	HUMBLE	MEDICARE BENEFICIARY	5%	MEDICARE BENEFICIARY REPRESENTATIVE	N/A	

## Key ACO Clinical and Administrative Leadership:

ACO Executive: Praveen Arla MD Medical Director: Praveen Arla MD Compliance Officer: Amanda Waid Quality Assurance/Improvement Officer: Angela Farley

#### Associated Committees and Committee Leadership:

Committee Name	Committee Leader Name and Position
Finance Committee	Pravin Avula, MD, Chair
Quality Committee	Kamal Singh, MD, Chair

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

Network of Individual Practices

# **Shared Savings and Losses**

#### Amount of Shared Savings/Losses:

- Third Agreement Period
  - o Performance Year 2023, \$7,967,119
  - o Performance Year 2022, \$7,678,348
  - o Performance Year 2021, \$7,312,195
  - o Performance Year 2020, \$5,907,195
  - o Performance Year 2019, \$6,237,059
- Second Agreement Period
  - o Performance Year 2019, \$6,237,059
  - Performance Year 2018, \$0
  - o Performance Year 2017, \$0
  - o Performance Year 2016, \$5,337,821
- First Agreement Period
  - o Performance Year 2015, \$6,366,990
  - o Performance Year 2014, \$2,554,879
  - o Performance Year 2013, \$2,761,951

Note: Our ACO participated in multiple performance years during Calendar Year 2019. The 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.

## Shared Savings Distribution:

- Third Agreement Period
  - Performance Year 2023
    - Proportion invested in infrastructure: 15%
    - Proportion invested in redesigned care processes/resources: 10%
    - Proportion of distribution to ACO participants: 75%
  - Performance Year 2022
    - Proportion invested in infrastructure: 15%
    - Proportion invested in redesigned care processes/resources: 10%
    - Proportion of distribution to ACO participants: 75%
  - o Performance Year 2021
    - Proportion invested in infrastructure: 15%
    - Proportion invested in redesigned care processes/resources: 10%
    - Proportion of distribution to ACO participants: 75%
  - Performance Year 2020
    - Proportion invested in infrastructure: 15%
    - Proportion invested in redesigned care processes/resources: 10%

- Proportion of distribution to ACO participants: 75%
- o Performance Year 2019
  - Proportion invested in infrastructure: 15%
  - Proportion invested in redesigned care processes/resources: 10%
  - Proportion of distribution to ACO participants: 75%
- Second Agreement Period
  - Performance Year 2019
    - Proportion invested in infrastructure: 15%
    - Proportion invested in redesigned care processes/resources: 10%
    - Proportion of distribution to ACO participants: 75%
  - o Performance Year 2018
    - Proportion invested in infrastructure: 15%
    - Proportion invested in redesigned care processes/resources: 10%
    - Proportion of distribution to ACO participants: 75%
  - o Performance Year 2017
    - Proportion invested in infrastructure: 15%
    - Proportion invested in redesigned care processes/resources: 10%
    - Proportion of distribution to ACO participants: 75%
  - Performance Year 2016
    - Proportion invested in infrastructure: 15%
    - Proportion invested in redesigned care processes/resources: 10%
    - Proportion of distribution to ACO participants: 75%
- First Agreement Period
  - Performance Year 2015
    - Proportion invested in infrastructure: 15%
    - Proportion invested in redesigned care processes/resources: 10%
    - Proportion of distribution to ACO participants: 75%
  - Performance Year 2014
    - Proportion invested in infrastructure: 15%
    - Proportion invested in redesigned care processes/resources: 10%
    - Proportion of distribution to ACO participants: 75%
  - o Performance Year 2013
    - Proportion invested in infrastructure: 15%
    - Proportion invested in redesigned care processes/resources: 10%
    - Proportion of distribution to ACO participants: 75%

# **Quality Performance Results**

# 2023 Quality Performance Results:

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

Measure #	Measure Name	Collection Type	Rate	ACO Mean
Quality ID# 001	Diabetes: Hemoglobin A1c (HbA1c) Poor Control	CMS Web Interface	7.46	9.84
Quality ID# 134	Preventative Care and Screening: Screening for Depression and Follow-up Plan	CMS Web Interface	82.99	80.97
Quality ID# 236	Controlling High Blood Pressure	CMS Web Interface	83.60	77.80
Quality ID# 318	Falls: Screening for Future Fall Risk	CMS Web Interface	96.05	89.42
Quality ID# 110	Preventative Care and Screening: Influenza Immunization	CMS Web Interface	74.14	70.76
Quality ID# 226	Preventative Care and Screening: Tobacco Use: Screening and Cessation Intervention	CMS Web Interface	74.63	79.29
Quality ID# 113	Colorectal Cancer Screening	CMS Web Interface	81.83	77.14
Quality ID# 112	Breast Cancer Screening	CMS Web Interface	81.56	80.36
Quality ID# 438	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	CMS Web Interface	90.43	87.05
Quality ID# 370	Depression Remission at Twelve Months	CMS Web Interface	10.42	16.58
Measure# 479	Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Groups	Administrative Claims	0.1588	0.1553
Measure# 484	Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions	Administrative Claims		35.39
Quality ID#: 321	CAHPS for MIPS	CAHPS for MIPS Survey	3.93	6.25
CAHPS-1	Getting Timely Care, Appointments, and Information	CAHPS for MIPS Survey	83.91	83.68
CAHPS-2	How Well Providers Communicate	CAHPS for MIPS Survey	91.88	93.69
CAHPS-3	Patient's Rating of Provider	CAHPS for MIPS Survey	91.96	92.14
CAHPS-4	Access to Specialists	CAHPS for MIPS Survey	73.37	75.97
CAHPS-5	Health Promotion and Education	CAHPS for MIPS Survey	53.09	63.93
CAHPS-6	Shared Decision Making	CAHPS for MIPS Survey	51.51	61.60
CAHPS-7	Health Status and Functional Status	CAHPS for MIPS Survey	74.69	74.12
CAHPS-8	Care Coordination	CAHPS for MIPS Survey	83.28	85.77
CAHPS-9	Courteous and Helpful Office Staff	CAHPS for MIPS Survey	91.62	92.31
CAHPS-11	Stewardship of Patient Resources	CAHPS for MIPS Survey	28.93	26.69

For previous years' Financial and Quality Performance Results, please visit: data.cms.gov