SHARED SAVINGS PROGRAM PUBLIC REPORTING TEMPLATE

Version 7 | August 2023

ACO Name and Location

BJC HealthCare ACO, LLC 660 Mason Ridge Center Drive Suite 300 St. Louis, MO 63141

ACO Primary Contact

Primary Contact Name	Nancy Kadlec-Patterson
Primary Contact Phone Number	314-996-7733
Primary Contact Email Address	Nancy.Kadlec-Patterson@bjc.org

Organizational Information

ACO Participants:

ACO Participants	ACO Participant in Joint Venture
Barnes-Jewish Hospital	Ν
Fairview Heights Medical Group, S.C.	Ν
PROTESTANT MEMORIAL MEDICAL CENTER, INC.	Ν
Alton Memorial Hospital	Ν
Progress West HealthCare Center	Ν
Missouri Baptist Medical Center	Ν
BOONSLICK MEDICAL GROUP INC	Ν
Parkland Health Center	Ν
BJC Home Care Services	Ν
Barnes-Jewish St. Peters Hospital, Inc.	Ν
Missouri Baptist Hospital of Sullivan	Ν
Barnes-Jewish West County Hospital	Ν
Physician Groups, LC	Ν
Christopher M. Perry DO PC	Ν
Christian Hospital Northeast-Northwest	Ν
ALTON MEMORIAL PHYSICIAN BILLING SERVICES LLC	Ν
WASHINGTON UNIVERSITY CLINICAL ASSOCIATES - MARYLAND MEDICAL	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
Joan	Magruder	Chair, BJC Group President	1	Other	
Douglas	Pogue	ACO President, President, BJC Medical Group	1	ACO Participant Representative	Physician Groups LC d/b/a BJC Medical Group
Nancy	Kadlec- Patterson	ACO Chief Administrative Officer; BJC Medical Group CNO		Other	Physician Groups LC d/b/a BJC Medical Group
Ann	Abad	President, Missouri Baptist Medical Center	1	ACO Participant Representative	Missouri Baptist Medical Center
Rick	Stevens	President, Christian Hospital	1	ACO Participant Representative	Christian Hospital Northeast Northwest
Stacy	Olinger	VP, BJC Home Care Services	1	ACO Participant Representative	BJC Home Care
Annette	Schnabel	President, Parkland Health Center	1	ACO Participant Representative	Parkland Health Center
Gina	Calder	President, Barnes-Jewish St. Peters Hospital and Progress West Hospital	1	ACO Participant Representative	Barnes-Jewish St. Peters Hospital and Progress West Hospital
Tracy	Norfleet	Practicing Physician, BJC Medical Group	1	ACO Participant Representative	Physician Groups LC d/b/a BJC Medical Group
Scott	Groesch	Practicing Physician, Maryland Medical Group (WUCA)	1	ACO Participant Representative	Washington University Clinical Associates (WUCA) – Maryland Medical
Nathan	Moore	ACO Medical Director; Practicing Physician, BJC Medical Group	1	ACO Participant Representative	Physician Groups LC d/b/a BJC Medical Group
John	Lynch	VP, Chief Medical Officer, Barnes Jewish Hospital	1	ACO Participant Representative	Barnes Jewish Hospital
Hans	Moosa	Medical Director, Memorial Medical Group	1	ACO Participant Representative	Physician Groups LC d/b/a BJC Medical Group
Judy	Mange	Medicare Beneficiary Representative	1	Medicare Beneficiary Representative	

Key ACO Clinical and Administrative Leadership:

ACO Executive: Douglas Pogue, M.D. Medical Director: Nathan Moore, M.D. Compliance Officer: Steven Bernstetter Quality Assurance/Improvement Officer: Nathan Moore, M.D.

Associated Committees and Committee Leadership:

Committee Name	Committee Leader Name and Position
Quality Assurance and Improvement Committee	Dr. Nathan Moore, ACO Medical Director, Practicing Physician BJC Medical Group
Nominating Committee	Dr. Douglas Pogue, ACO Executive; President BJC Medical Group
Network Committee	Nancy Kadlec-Patterson, Chief Administrative Officer, BJC Medical Group CNO

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

- Hospital employing ACO professionals
- Rural Health Clinic (RHC)

Shared Savings and Losses

Amount of Shared Savings/Losses:

- Third Agreement Period
 - o Performance Year 2022, \$6,372,485
 - o Performance Year 2021, \$7,930,285
 - Performance Year 2020, \$9,387,016
 - Performance Year 2019, \$2,967,196
- Second Agreement Period
 - Performance Year 2018, \$0
 - o Performance Year 2017, \$8,988,067
 - o Performance Year 2016, \$0
- First Agreement Period
 - o Performance Year 2015, \$0
 - o Performance Year 2014, \$0
 - o Performance Year 2013, \$0

Shared Savings Distribution:

- Third Agreement Period
 - Performance Year 2022
 - Proportion invested in infrastructure: 30%
 - Proportion invested in redesigned care processes/resources: 26%
 - Proportion of distribution to ACO participants: 44%
 - Performance Year 2021
 - Proportion invested in infrastructure: 20%
 - Proportion invested in redesigned care processes/resources: 22%
 - Proportion of distribution to ACO participants: 58%
 - Performance Year 2020
 - Proportion invested in infrastructure: 20%
 - Proportion invested in redesigned care processes/resources: 27%
 - Proportion of distribution to ACO participants: 53%
 - Performance Year 2019
 - Proportion invested in infrastructure: 20%
 - Proportion invested in redesigned care processes/resources: 31%
 - Proportion of distribution to ACO participants: 49%
- Second Agreement Period
 - 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: 20%
 - Proportion invested in redesigned care processes/resources: 13%
 - Proportion of distribution to ACO participants: 67%
 - 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

2022 Quality Performance Results:

Quality performance results are based on CAHPS for MIPS, CMS Web Interface, and Administrative Claims Measure Sets

Measure #	Measure Name	Collection Type	Rate	ACO Mean
CAHPS-1	Getting Timely Care, Appointments, and Information	CAHPS for MIPS Survey	83.39	83.96
CAHPS-2	How Well Providers Communicate	CAHPS for MIPS Survey	94.65	93.47
CAHPS-3	Patient's Rating of Provider	CAHPS for MIPS Survey	93.39	92.06
CAHPS-4	Access to Specialists	CAHPS for MIPS Survey	79.38	77.00
CAHPS-5	Health Promotion and Education	CAHPS for MIPS Survey		62.68
CAHPS-6	Shared Decision Making CAHPS for MIPS Survey		62.16	60.97
CAHPS-7	Health Status and Functional Status	CAHPS for MIPS Survey	71.56	73.06
CAHPS-8	Care Coordination	CAHPS for MIPS Survey	86.89	85.46
CAHPS-9	Courteous and Helpful Office Staff	CAHPS for MIPS Survey	92.99	91.97
CAHPS-11	Stewardship of Patient Resources	CAHPS for MIPS Survey	21.37	25.62
001	Diabetes: Hemoglobin A1c (HbA1c) Poor Control ¹	CMS Web Interface	8.52	10.71
134	Preventative Care and Screening: Screening for Depression and Follow-up Plan	CMS Web Interface	92.51	76.97
236	Controlling High Blood Pressure	CMS Web Interface	82.56	76.16
318	Falls: Screening for Future Fall Risk	CMS Web Interface	97.78	87.83
110	Preventative Care and Screening: Influenza Immunization	CMS Web Interface	94.14	77.34
226	Preventative Care and Screening: Tobacco Use: Screening and Cessation Intervention	CMS Web Interface	96.67	79.27

113	Colorectal Cancer Screening	CMS Web Interface	86.75	75.32
112	Breast Cancer Screening	CMS Web Interface	88.30	78.07
438	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease ²	CMS Web Interface	85.64	86.37
370	Depression Remission at Twelve Months ²	CMS Web Interface	10.42	16.03
321	CAHPS for MIPS ³	N/A	N/A	N/A
479	Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Groups ¹	Administrative Claims	0.1517	0.1510
484	Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions ¹	Administrative Claims	34.30	30.97

[1] A lower performance rate corresponds to higher quality.

[2] For PY 2022, the CMS Web Interface measures Quality ID #438 and Quality ID #370 do not have benchmarks, and therefore, we re not scored.

[3] CAHPS for MIPS is a composite measure, so numerator, denominator, and performance rate values are not applicable (N/A).

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

Payment Rule Waivers

- Skilled Nursing Facility (SNF) 3-Day Rule Waiver:
 - Our ACO uses the SNF 3-Day Rule Waiver, pursuant to 42 CFR § 425.612.
- Waiver for Payment for Telehealth Services:
 - Our ACO clinicians provide telehealth services using the flexibilities under 42 CFR § 425.612(f) and 42 CFR § 425.613.