Shared Savings Program Public Reporting

Version 6.1 | September 2022

ACO Name and Location

BJC HealthCare ACO, LLC 670 Mason Ridge Center Drive Suite 300 St. Louis, MO 63141

ACO Primary Contact

Primary Contact Name	Nancy Kadlec-Patterson
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Organizational Information

ACO Participants:

ACO Participants	ACO Participant in Joint Venture (Enter Y or N)
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
AUBRA HOUCHIN	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/DBA, 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	1	Medicare	
	_	Beneficiary		Beneficiary	
		Representative		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
 - 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
 - Performance Year 2017, \$8,988,067
 - Performance Year 2016, \$0
- First Agreement Period
 - Performance Year 2015, \$0
 - o Performance Year 2014, \$0
 - Performance Year 2013, \$0

Shared Savings Distribution:

- Third Agreement Period
 - 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

2021 Quality Performance Results:

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

Measure #	Measure Name	Rate	ACO Mean
CAHPS-1	Getting Timely Care, Appointments, and Information	84.06	84.67
CAHPS-2	How Well Providers Communicate	93.55	93.56
CAHPS-3	Patient's Rating of Provider	91.68	92.19
CAHPS-4	Access to Specialists	76.42	78.80
CAHPS-5	Health Promotion and Education	62.62	61.61
CAHPS-6	Shared Decision Making	69.23	60.89
CAHPS-7	Health Status and Functional Status	71.12	71.78
CAHPS-8	Care Coordination	84.77	85.66
CAHPS-9	Courteous and Helpful Office Staff	91.77	91.88
CAHPS-11	Stewardship of Patient Resources	27.28	24.71
001	Diabetes: Hemoglobin A1c (HbA1c) Poor Control ²	9.47	12.46
134	Preventative Care and Screening: Screening for Depression and Follow-up Plan ¹	91.32	74.38
236	Controlling High Blood Pressure	83.17	74.87
318	Falls: Screening for Future Fall Risk	98.89	87.03
110	Preventative Care and Screening: Influenza Immunization	91.86	80.52
226	Preventative Care and Screening: Tobacco Use: Screening and Cessation Intervention	100.00	80.97
113	Colorectal Cancer Screening	87.60	73.63

112	Breast Cancer Screening	83.40	75.11
438	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease ¹	86.52	84.24
370	Depression Remission at Twelve Months ¹	5.56	15.50
321	CAHPS for MIPS ³	N/A	N/A
479	Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Groups ²	0.1579	0.1540
MCC1	All-Cause Unplanned Admissions for Patients with Multiple Chronic Conditions for ACOs (MCC) ²	34.22	33.99

[1] For PY 2021, measures #134, #438, and #370 do not have CMS Web Interface benchmarks and are not scored as a result.

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

[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.