

# SHARED SAVINGS PROGRAM PUBLIC REPORTING

## ACO Name and Location

Cumberland Center for Healthcare Innovation, LLC

Trade Name/DBA: Cumberland Center for Healthcare Innovation

1135 S Walnut Avenue, Cookeville, TN, 38501, U.S.A.

## ACO Primary Contact

Amanda Randolph

9314000011

amanda.randolph@cchi-tn.com

## Organizational Information

### ACO Participants:

| ACO Participants                        | ACO Participant in Joint Venture |
|---|----------------------------------|
| 493 INTERNAL MEDICINE PLLC              | No                               |
| Armadillo Medical Services PC           | No                               |
| Brett Ferrell                           | No                               |
| BROWNSVILLE FAMILY MEDICINE, PA         | No                               |
| C.S. Sewell, MD, PC                     | No                               |
| CALLIE MEDICAL GROUP LLC                | No                               |
| CANNON COUNTY HEALTHCARE PC             | No                               |
| Christopher P Dill Md PLLC              | No                               |
| Cornerstone Family Medicine LLC         | No                               |
| CRYSTAL ENGLISH                         | No                               |
| Cumberland Adult Medicine PLLC          | No                               |
| Cumberland Family Care, PC              | No                               |
| Dannie Glover                           | No                               |
| Family Medical PC                       | No                               |
| Family Practice Center of Tullahoma LLC | Yes                              |
| Frix-Jennings Clinic PC                 | Yes                              |
| GIGI DAVIS                              | No                               |
| INNOVATIVE FAMILY CARE, PLLC            | No                               |
| James R Spurlock III DO                 | No                               |
| John R Clough                           | No                               |

|  |    |
|--|----|
| Johnson Family Medicine Llc              | No |
| KENNETH W WOOD MD LLC                    | No |
| Larry Barnes                             | No |
| Livingston Family Healthcare LLC         | No |
| LIVINGSTON FAMILY PRACTICE PLLC          | No |
| Lynchburg Medical Clinic LLC             | No |
| McMinnville Medical Associates PLLC      | No |
| Mutigen LLC                              | No |
| PROVIDENCE FAMILY MEDICINE               | No |
| Seasons Family Medicine PLLC             | No |
| Sequatchie Valley Primary Care           | No |
| SPECTRUM MEDICAL ASSOCIATES              | No |
| STACEY B. CARLTON, M.D., P.C.            | No |
| Staton Southern Medical PLLC             | No |
| TENNESSEE HEALTHCARE PARTNERS LLC        | No |
| Tullahoma Immediate Care PC              | No |
| TWIN OAKS PRIMARY CARE, INC.             | No |
| WOMANS CLINIC A PROFESSIONAL ASSOCIATION | No |

*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 |
|-------------------|------------------|-----------------------|---|-------------------------------------|--|
| Bernard           | Sy               | Voting Member         | 12.5%   | ACO Participant Representative      | Family Medical PC                                  |
| Brent             | Staton           | CEO/Voting Member     | 12.5%   | ACO Participant Representative      | Staton Southern Medical PLLC                       |
| James             | Spurlock         | Chairman              | 12.5%   | ACO Participant Representative      | James R Spurlock III DO                            |
| Jim               | Stafne           | Voting Member         | 12.5%   | Medicare Beneficiary Representative | N/A  |
| John              | Patsimas         | Voting Member         | 12.5%   | ACO Participant Representative      | Family Practice Center of Tullahoma LLC            |
| Karin             | Boeck            | Voting Member         | 12.5%   | ACO Participant Representative      | Sequatchie Valley Primary Care                     |
| Kenneth           | Beaty            | Voting Member         | 12.5%   | ACO Participant Representative      | Livingston Family Healthcare LLC                   |
| Ty                | Webb             | CMO/Voting            | 12.5%   | ACO Participant                     | Cumberland Family Care,                            |

|  |  |        |  |                |    |
|--|--|--------|--|----------------|----|
|  |  | Member |  | Representative | PC |
|--|--|--------|--|----------------|----|

Member's voting power may have been rounded to reflect a total voting power of 100 percent.

*Key ACO Clinical and Administrative Leadership:*

ACO Executive:

Brent Staton MD

Medical Director:

Ty Webb MD

Compliance Officer:

Brent Staton MD

Quality Assurance/Improvement Officer:

Amanda Randolph

*Associated Committees and Committee Leadership:*

| Committee Name                    | Committee Leader Name and Position |
|-----------------------------------|------------------------------------|
| Clinical Transformation Committee | Ty Webb, MD, Chairman              |

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

- Networks of individual practices of ACO professionals
- Rural Health Clinic (RHC)

Shared Savings and Losses

*Amount of Shared Savings/Losses:*

- Fourth Agreement Period
  - Performance Year 2026, N/A
  - Performance Year 2025, N/A
- Third Agreement Period
  - Performance Year 2024, \$6,802,039.78
  - Performance Year 2023, \$7,818,301.35
  - Performance Year 2022, \$8,634,908.00
  - Performance Year 2021, \$7,274,084.04
  - Performance Year 2020, \$8,073,515.51

- Performance Year 2019, \$6,093,148.43
- Second Agreement Period
  - Performance Year 2019, \$6,093,148.43
  - Performance Year 2018, \$2,869,967.67
  - Performance Year 2017, \$3,169,815.69
  - Performance Year 2016, N/A
- First Agreement Period
  - Performance Year 2015, \$1,863,290.00
  - Performance Year 2014, \$326,464.53
  - Performance Year 2013, N/A
  - Performance Year 2012, N/A

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:*

- Fourth Agreement Period
  - Performance Year 2026
    - 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 2025
    - Proportion invested in infrastructure: N/A
    - Proportion invested in redesigned care processes/resources: N/A
    - Proportion of distribution to ACO participants: N/A
- Third Agreement Period
  - Performance Year 2024
    - Proportion invested in infrastructure: 6%
    - Proportion invested in redesigned care processes/resources: 35%
    - Proportion of distribution to ACO participants: 59%
  - Performance Year 2023
    - Proportion invested in infrastructure: 5%
    - Proportion invested in redesigned care processes/resources: 5%
    - Proportion of distribution to ACO participants: 90%
  - Performance Year 2022

- Proportion invested in infrastructure: 9%
- Proportion invested in redesigned care processes/resources: 10%
- Proportion of distribution to ACO participants: 81%
- o Performance Year 2021
  - Proportion invested in infrastructure: 8%
  - Proportion invested in redesigned care processes/resources: 10%
  - Proportion of distribution to ACO participants: 82%
- o Performance Year 2020
  - Proportion invested in infrastructure: 4%
  - Proportion invested in redesigned care processes/resources: 9%
  - Proportion of distribution to ACO participants: 87%
- o Performance Year 2019
  - Proportion invested in infrastructure: 8%
  - Proportion invested in redesigned care processes/resources: 18%
  - Proportion of distribution to ACO participants: 74%
- Second Agreement Period
  - o Performance Year 2019
    - Proportion invested in infrastructure:
    - Proportion invested in redesigned care processes/resources:
    - Proportion of distribution to ACO participants:
  - o Performance Year 2018
    - Proportion invested in infrastructure: 21%
    - Proportion invested in redesigned care processes/resources: 27%
    - Proportion of distribution to ACO participants: 52%
  - o Performance Year 2017
    - Proportion invested in infrastructure: 24%
    - Proportion invested in redesigned care processes/resources: 57%
    - Proportion of distribution to ACO participants: 19%
  - o 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
  - o Performance Year 2015
    - Proportion invested in infrastructure: 20%
    - Proportion invested in redesigned care processes/resources: 25%
    - Proportion of distribution to ACO participants: 55%
  - o Performance Year 2014
    - Proportion invested in infrastructure: 60%

- Proportion invested in redesigned care processes/resources: 40%
- Proportion of distribution to ACO participants: 0%
- o 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
- o Performance Year 2012
  - Proportion invested in infrastructure: N/A
  - Proportion invested in redesigned care processes/resources: N/A
  - Proportion of distribution to ACO participants: N/A

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

## Quality Performance Results

### 2024 Quality Performance Results:

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

| Measure # | Measure Title  | Collection Type       | Performance Rate | Current Year Mean Performance Rate (Shared Savings Program ACOs) |
|-----------|--|-----------------------|------------------|--|
| 321       | CAHPS for MIPS   | CAHPS for MIPS Survey | 9.73             | 6.67   |
| 479*      | Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Groups  | Administrative Claims | 0.1499           | 0.1517   |
| 484*      | Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions (MCC) | Administrative Claims | -                | 37   |
| 318       | Falls: Screening for Future Fall Risk  | CMS Web Interface     | 97.39            | 88.99  |
| 110       | Preventative Care and Screening: Influenza Immunization  | CMS Web Interface     | 90.08            | 68.6   |
| 226       | Preventative Care and Screening: Tobacco Use: Screening and Cessation Intervention   | CMS Web Interface     | 95.92            | 79.98  |
| 113       | Colorectal Cancer Screening  | CMS Web Interface     | 84.8             | 77.81  |
| 112       | Breast Cancer Screening  | CMS Web Interface     | 84.03            | 80.93  |
| 438       | Statin Therapy for the Prevention and Treatment of Cardiovascular Disease  | CMS Web Interface     | 99.13            | 86.5   |
| 370       | Depression Remission at Twelve Months  | CMS Web Interface     | 18.75            | 17.35  |

|          |  |                       |       |       |
|----------|--|-----------------------|-------|-------|
| 001*     | Diabetes: Hemoglobin A1c (HbA1c) Poor Control                                | CMS Web Interface     | 3.43  | 9.44  |
| 134      | Preventative Care and Screening: Screening for Depression and Follow-up Plan | CMS Web Interface     | 94.05 | 81.46 |
| 236      | Controlling High Blood Pressure  | CMS Web Interface     | 91.86 | 79.49 |
| CAHPS-1  | Getting Timely Care, Appointments, and Information                           | CAHPS for MIPS Survey | 91.51 | 83.7  |
| CAHPS-2  | How Well Providers Communicate   | CAHPS for MIPS Survey | 95.43 | 93.96 |
| CAHPS-3  | Patient's Rating of Provider   | CAHPS for MIPS Survey | 94.7  | 92.43 |
| CAHPS-4  | Access to Specialists  | CAHPS for MIPS Survey | 81.53 | 75.76 |
| CAHPS-5  | Health Promotion and Education   | CAHPS for MIPS Survey | 65.06 | 65.48 |
| CAHPS-6  | Shared Decision Making   | CAHPS for MIPS Survey | 67.6  | 62.31 |
| CAHPS-7  | Health Status and Functional Status  | CAHPS for MIPS Survey | 73.37 | 74.14 |
| CAHPS-8  | Care Coordination  | CAHPS for MIPS Survey | 88.39 | 85.89 |
| CAHPS-9  | Courteous and Helpful Office Staff   | CAHPS for MIPS Survey | 94.53 | 92.89 |
| CAHPS-11 | Stewardship of Patient Resources   | CAHPS for MIPS Survey | 35.11 | 26.98 |

**For previous years' Financial and Quality Performance Results, please visit: [Data.cms.gov](https://data.cms.gov)**

\*For Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%) [Quality ID #001], Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Eligible Clinician Groups [Measure #479], and Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions (MCC) [Measure #484], a lower performance rate indicates better measure performance.

\*For Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions (MCC) [Measure #484], patients are excluded if they were attributed to Qualifying Alternative Payment Model (APM) Participants (QPs). Most providers participating in Track E and ENHANCED track ACOs are QPs, and so performance rates for Track E and ENHANCED track ACOs may not be representative of the care provided by these ACOs' providers overall. Additionally, many of these ACOs do not have a performance rate calculated due to not meeting the minimum of 18 beneficiaries attributed to non-QP providers.