

ACO Name and Location

Westchester Medical Group, PLLC

800 Westchester Avenue (Suite N-715), Rye Brook, NY 10573

ACO Primary Contact

Angelica Rivera

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Organizational Information

ACO Participants:

ACO Participants	ACO Participant in Joint Venture
Westchester Medical Group, PLLC	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
Patricia	Calayag	Chair, ACO Executive, Medical Director	14.3%	ACO Participant	Westchester Medical Group, PLLC
Adam	Barrison	Member	14.3%	ACO Participant	Westchester Medical Group, PLLC
Arthur	Forni	Member	14.3%	ACO Participant	Westchester Medical Group, PLLC
Dan	Frogel	Member	14.3%	ACO Participant	Westchester Medical Group, PLLC
Marianne	Monahan	Member	14.3%	ACO Participant	Westchester Medical Group, PLLC
Nicholas L.	Pantaleo	Member	14.3%	ACO Participant	Westchester Medical Group, PLLC
Ashish	Parikh	Member	14.3%	ACO Participant	Westchester Medical Group, PLLC
TBD	TBD	Member	14.3%	ACO Participant	Westchester Medical Group, PLLC

Key ACO Clinical and Administrative Leadership:

ACO Executive: Patricia Calayag, MD

Medical Director: Patricia Calayag, MD

Compliance Officer: Michelle O'Neill

Quality Assurance/Improvement Officer: Anne Garrity, RN, BSN

Associated Committees and Committee Leadership:

Committee Name	Committee Leader Name and Position
N/A	N/A

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

- ACO Professionals in a Group practice arrangement

Shared Savings and Losses

Amount of Shared Savings/Losses:

- Third Agreement Period
 - Performance Year 2022, \$0
 - Performance Year 2021, \$0
 - Performance Year 2020, \$5,559,990.95
 - Performance Year 2019, \$2,631,915.20
- Second Agreement Period
 - Performance Year 2019, \$2,631,915.20
 - Performance Year 2018, \$6,203,325
 - Performance Year 2017, \$5,384,460
 - Performance Year 2016, \$0
- First Agreement Period
 - Performance Year 2015, \$0
 - Performance Year 2014, \$3,266,226
 - Performance Year 2013, \$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.

Shared Savings Distribution:

- **Third Agreement Period**
 - Performance Year 2022
 - 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 2021
 - 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 2020
 - Proportion invested in infrastructure: 30%
 - Proportion invested in redesigned care processes/resources: 50%
 - Proportion of distribution to ACO participants: 20%
 - Performance Year 2019
 - Proportion invested in infrastructure: 30%
 - Proportion invested in redesigned care processes/resources: 50%
 - Proportion of distribution to ACO participants: 20%
- **Second Agreement Period**
 - Performance Year 2019
 - Proportion invested in infrastructure: 30%
 - Proportion invested in redesigned care processes/resources: 50%
 - Proportion of distribution to ACO participants: 20%
 - Performance Year 2018
 - Proportion invested in infrastructure: 30%
 - Proportion invested in redesigned care processes/resources: 50%
 - Proportion of distribution to ACO participants: 20%
 - Performance Year 2017
 - Proportion invested in infrastructure: 30%
 - Proportion invested in redesigned care processes/resources: 50%
 - Proportion of distribution to ACO participants: 20%
 - 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: 30%
 - Proportion invested in redesigned care processes/resources: 50%
 - Proportion of distribution to ACO participants: 20%
 - 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

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.

Quality Performance Results

2022 Quality Performance Results:

Quality performance results are based on eCQM/MIPS CQM Measure Set

Measure #	Measure Name	Collection Type	Rate	ACO Mean
Quality ID# 001	Diabetes: Hemoglobin A1c (HbA1c) Poor Control [1]	eCQM	24.36	33.57
Quality ID# 134	Preventative Care and Screening: Screening for Depression and Follow-up Plan	eCQM	42.27	39.11
Quality ID# 236	Controlling High Blood Pressure	eCQM	76.75	69.64
Quality ID# 321	CAHPS for MIPS [3]	CAHPS	4.74	6.08
Measure# 479	Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Groups [1]	Administrative Claims	0.1518	0.1510
Measure# 484	Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions [1]	Administrative Claims	30.89	30.97
CAHPS-1	Getting Timely Care, Appointments, and Information	CAHPS for MIPS Measures	79.92	83.96
CAHPS-2	How Well Providers Communicate	CAHPS for MIPS Measures	93.99	93.47
CAHPS-3	Patient's Rating of Provider	CAHPS for MIPS Measures	92.70	92.06
CAHPS-4	Access to Specialists	CAHPS for MIPS Measures	71.52	77.00
CAHPS-5	Health Promotion and Education	CAHPS for MIPS Measures	61.59	62.68
CAHPS-6	Shared Decision Making	CAHPS for MIPS Measures	50.53	60.97
CAHPS-7	Health Status and Functional Status	CAHPS for MIPS Measures	77.06	73.06
CAHPS-8	Care Coordination	CAHPS for MIPS Measures	86.89	85.46
CAHPS-9	Courteous and Helpful Office Staff	CAHPS for MIPS Measures	90.05	91.97
CAHPS-11	Stewardship of Patient Resources	CAHPS for MIPS Measures	12.33	25.62

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

[3] CAHPS for MIPS is a composite measure, so numerator and denominator values are not applicable (N/A). A CAHPS for MIPS composite decile score is shown in the performance rate cells and calculated as the average number of points across scored Summary Survey Measures (SSMs) (86 FR 65256). Refer to Table 5 for details on CAHPS for MIPS performance on SSMs. The CAHPS for MIPS overall measure score (i.e., the average SSM decile score, which is scored from 3 to 10), is used to calculate percentile performance thresholds. The 2022 percentile is based on the 2022 performance period and includes CAHPS for MIPS overall measure scores from all participating SSP ACOs, groups, virtual groups, and APM entities. The 30th percentile performance threshold shown here is therefore used as the 30th percentile benchmark that is the threshold for one of the five remaining measures in the APP measure set, as described in footnote [4], and which is used only in the context of the eCQM/MIPS CQM reporting incentive for the quality performance standard, separate from SSM benchmarks.

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.