

## SHARED SAVINGS PROGRAM PUBLIC REPORTING TEMPLATE

### ACO Name and Location

Summit Medical Group, P.A.

1 Diamond Hill Road, Berkeley Heights, NJ 07922

### ACO Primary Contact

Cathi Weinstein

908-977-9499

[wecare@summithealth.com](mailto:wecare@summithealth.com)

### Organizational Information

#### ACO Participants:

ACO Participants	ACO Participant in Joint Venture
Summit Medical Group, P.A.	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
Ashish	Parikh	Chair/Member	16.67%	ACO Participant Representative	Summit Medical Group, P.A.
Adam	Barrison	Member	16.67%	ACO Participant Representative	Summit Medical Group, P.A.
Deborah	Cheung	Member	16.67%	ACO Participant Representative	Summit Medical Group, P.A.

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
Jack	Cappitelli	Member	16.67%	ACO Participant Representative	Summit Medical Group, P.A.
Marie	Nevin	Member	16.67%	ACO Participant Representative	Summit Medical Group, P.A.
Avrim	Eden	Member	16.67%	Medicare Beneficiary Representative	Summit Medical Group, P.A.

*Key ACO Clinical and Administrative Leadership:*

ACO Executive: Ashish Parikh, MD

Medical Director: Ashish Parikh, MD

Compliance Officer: Jasmine Dickerson

Quality Assurance/Improvement Officer: Ashish Parikh, MD

*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:*

- First Agreement Period
  - Performance Year 2023, \$11,874,010.11
  - Performance Year 2022, \$8,303,809.94

### Shared Savings Distribution:

- First Agreement Period
  - Performance Year 2023
    - Proportion invested in infrastructure: 30%
    - Proportion invested in redesigned care processes/resources: 35%
    - Proportion of distribution to ACO participants: 35%
  - Performance Year 2022
    - Proportion invested in infrastructure: 35%
    - Proportion invested in redesigned care processes/resources: 40%
    - Proportion of distribution to ACO participants: 25%

### Quality Performance Results

#### 2023 Quality Performance Results:

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

Measure #	Measure Name	Collection Type	Reported Performance Rate	Current Year Mean Performance Rate (SSP ACOs)
Quality ID #001	Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%) [1]	CMS Web Interface	7.80	9.84
Quality ID #110	Preventive Care and Screening: Influenza Immunization	CMS Web Interface	82.63	70.76
Quality ID#112	Breast Cancer Screening	CMS Web Interface	80.27	80.36
Quality ID #113	Colorectal Cancer Screening	CMS Web Interface	86.96	77.14
Quality ID #134	Preventive Care and Screening: Screening for Depression and Follow-up Plan	CMS Web Interface	94.20	80.97
Quality ID #226	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	CMS Web Interface	100.00	79.29
Quality ID #236	Controlling High Blood Pressure	CMS Web Interface	82.50	77.80
Quality ID #318	Falls: Screening for Future Fall Risk	CMS Web Interface	96.42	89.42

Measure #	Measure Name	Collection Type	Reported Performance Rate	Current Year Mean Performance Rate (SSP ACOs)
Quality ID #321	CAHPS for MIPS [2]	CMS Web Interface	4.73	6.25
Quality ID #370	Depression Remission at Twelve Months	CMS Web Interface	9.88	16.58
Quality ID #438	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	CMS Web Interface	91.13	87.05
Measure #479	Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Groups [1]	Administrative Claims	0.1489	0.1553
Measure# 484	Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions [1]	Administrative Claims	----	35.39
CAHPS-1	Getting Timely Care, Appointments, and Information	CAHPS for MIPS Measures	81.15	83.68
CAHPS-2	How Well Providers Communicate	CAHPS for MIPS Measures	95.22	93.69
CAHPS-3	Patient's Rating of Provider	CAHPS for MIPS Measures	91.59	92.14
CAHPS-4	Access to Specialists	CAHPS for MIPS Measures	74.26	75.97
CAHPS-5	Health Promotion and Education	CAHPS for MIPS Measures	66.64	63.93
CAHPS-6	Shared Decision Making	CAHPS for MIPS Measures	53.19	61.60
CAHPS-7	Health Status and Functional Status	CAHPS for MIPS Measures	76.18	74.12
CAHPS-8	Care Coordination	CAHPS for MIPS Measures	84.70	85.77
CAHPS-9	Courteous and Helpful Office Staff	CAHPS for MIPS Measures	90.63	92.31
CAHPS-11	Stewardship of Patient Resources	CAHPS for MIPS Measures	21.69	26.69

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

[2] CHAPS for MIPS Survey composite score is calculated as the average number of points across scored Summary Survey Measures (SSMs).

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

## Payment Rule Waivers

- Skilled Nursing Facility (SNF) 3-Day Rule Waiver: Yes
  - Our ACO uses the SNF 3-Day Rule Waiver, pursuant to 42 CFR § 425.612.