Shared Savings Program Public Reporting

ACO Name and Location

Summit Medical Group, P.A.

Trade Name/DBA: Summit Health ACO

One Diamond Hill Road, Berkeley Heights, NJ, 07922

ACO Primary Contact

Cathi Weinstein

9089770499

cweinstein@summithealth.com

Organizational Information

ACO Participants:

ACO Participants	ACO Participant in Joint Venture
SUMMIT MEDICAL GROUP PA	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
Adam	Barrison	Chair Voting Member	16.68%	ACO Participant Representative	SUMMIT MEDICAL GROUP PA
Ashish	Parikh	Voting Member	16.68%	ACO Participant Representative	SUMMIT MEDICAL GROUP PA
Avrim	Eden	Beneficiary	16.66%	Medicare Beneficiary Representative	N/A
Deborah	Cheung	Member	16.66%	ACO Participant Representative	SUMMIT MEDICAL GROUP PA
Jack	Cappitelli	Voting Member	16.66%	ACO Participant Representative	SUMMIT MEDICAL GROUP PA
Marie	Nevin	Voting Member	16.66%	ACO Participant Representative	SUMMIT MEDICAL GROUP PA

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:

Adam Barrison

Medical Director:

Adam Barrison

Compliance Officer:

Kimberly Rodrigues

Quality Assurance/Improvement Officer:

Ashish Parikh

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:

- Second Agreement Period
  - Performance Year 2026, N/A
  - Performance Year 2025, N/A
  - Performance Year 2024, $22,409,665.49
- First Agreement Period
  - Performance Year 2023, $11,874,010.11
  - Performance Year 2022, $8,303,810.00

Shared Savings Distribution:

- Second 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

- Performance Year 2024
  - Proportion invested in infrastructure: 30%
  - Proportion invested in redesigned care processes/resources: 35%
  - Proportion of distribution to ACO participants: 35%

- 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

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	5.59	6.67
479*	Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Groups	Administrative Claims	0.1405	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	96.27	88.99
110	Preventative Care and Screening: Influenza Immunization	CMS Web Interface	85.02	68.6
226	Preventative Care and Screening: Tobacco Use: Screening and Cessation Intervention	CMS Web Interface	100	79.98
113	Colorectal Cancer Screening	CMS Web Interface	85.08	77.81
112	Breast Cancer Screening	CMS Web Interface	83.5	80.93
438	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	CMS Web Interface	86.87	86.5
370	Depression Remission at Twelve Months	CMS Web Interface	7.69	17.35

001*	Diabetes: Hemoglobin A1c (HbA1c) Poor Control	CMS Web Interface	5.5	9.44
134	Preventative Care and Screening: Screening for Depression and Follow-up Plan	CMS Web Interface	91.92	81.46
236	Controlling High Blood Pressure	CMS Web Interface	80.99	79.49
CAHPS-1	Getting Timely Care, Appointments, and Information	CAHPS for MIPS Survey	79.65	83.7
CAHPS-2	How Well Providers Communicate	CAHPS for MIPS Survey	94.13	93.96
CAHPS-3	Patient's Rating of Provider	CAHPS for MIPS Survey	92.11	92.43
CAHPS-4	Access to Specialists	CAHPS for MIPS Survey	70.79	75.76
CAHPS-5	Health Promotion and Education	CAHPS for MIPS Survey	69.87	65.48
CAHPS-6	Shared Decision Making	CAHPS for MIPS Survey	60.36	62.31
CAHPS-7	Health Status and Functional Status	CAHPS for MIPS Survey	77.76	74.14
CAHPS-8	Care Coordination	CAHPS for MIPS Survey	86.37	85.89
CAHPS-9	Courteous and Helpful Office Staff	CAHPS for MIPS Survey	90.28	92.89
CAHPS-11	Stewardship of Patient Resources	CAHPS for MIPS Survey	27.06	26.98

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

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.

- Payment for Telehealth Services:
  - Our ACO clinicians provide telehealth services using the flexibilities under 42 CFR § 425.612(f) and 42 CFR § 425.613.