

KNOW YOUR ACO: Alabama Physician Network

ACO NEWSLETTER DECEMBER 2020:

- Vincentian Physician Services Joining ACO
- Medicare ACO Scorecards and Goals
- 2019 Performance
- APN Patient Satisfaction Compared to All ACOs
- Performance-Year 2019 CMS Reports for Alabama Physician Network

APN Participants:

UAB Medicine
Medical West Hospital
Christ Health Center
Cahaba Medical Care

ACO Governing Board: Chair

Tony Jones, MD
UA Health Services Foundation

ACO Executive Director

Don Lilly
UAB Health System

Secretary

Michael Moore, MD
The Healthcare Authority for Medical West

Treasurer

Bob Bourge, MD
UA Health Services Foundation

Quality Chair

Stephen Stair, MD, FACP
UAB Health System

IN FOCUS: WELCOME

VINCENTIAN PHYSICIAN SERVICES JOINING ACO

Vincientian Physician Services LLC is joining our accountable care organization (ACO) starting Jan. 1, 2021. With this addition, the Alabama Physician Network ACO now includes five entities with distinct taxpayer IDs: the University of Alabama Health Services Foundation, the Healthcare Authority for Medical West, Christ Health Center, Cahaba Medical Care, and Vincientian Physician Services LLC.

Effective July 1, 2020, the University of Alabama at Birmingham Health System and Ascension St. Vincent's entered into a formal strategic alliance. The goal was to increase access to high-quality, innovative medical care in Birmingham and across the state. The two entities will maintain their brands and missions but will create a joint operating company to take on the task of improving the health of Alabama's citizens.

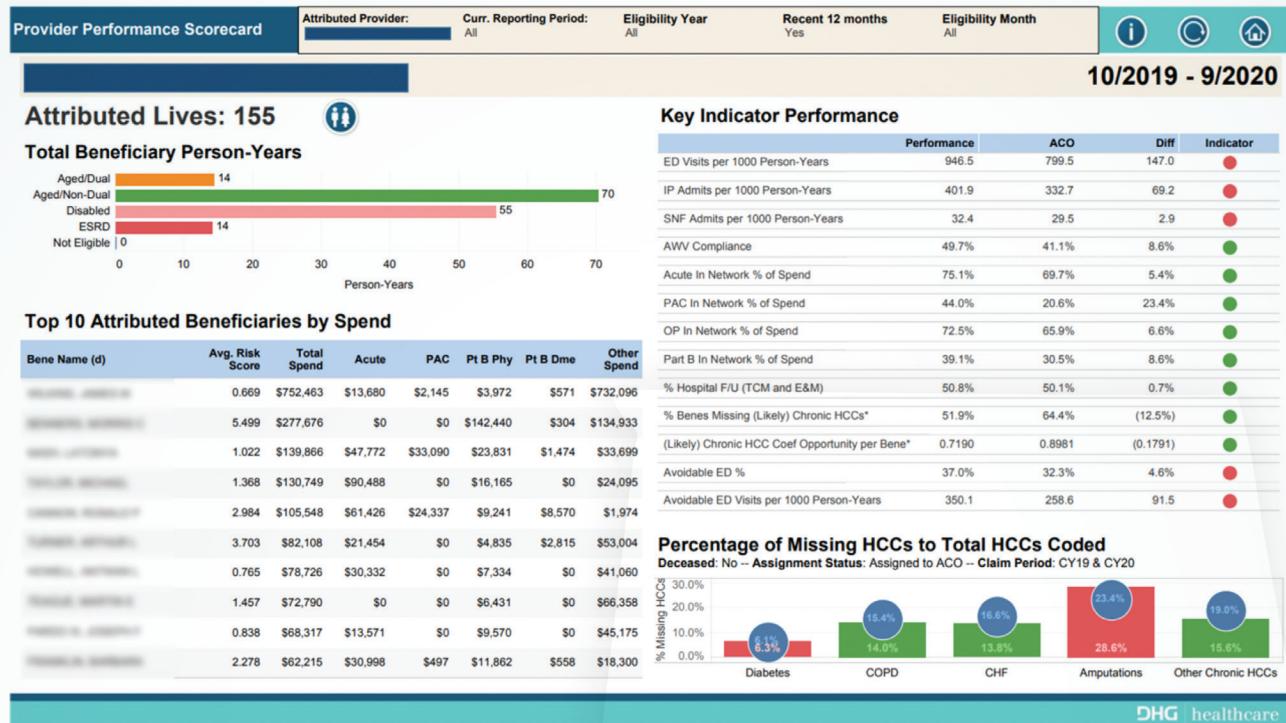
With this new alliance, the Vincientian Physician Services group of St. Vincent's providers is joining our ACO, bringing 52 providers in various specialties, approximately 3,300 beneficiaries, and 12 medical practice offices in Alabama. Be sure to welcome Vincientian Physician Services as we continue to transform quality, access, and the patient experience across the communities served by the Alabama Physician Network (APN).

MEDICARE ACO SCORECARDS AND GOALS

This year, we implemented a new analytics platform developed by Dixon Hughes Goodman (DHG). It allowed us to develop and send monthly scorecards to each of the primary care providers in our ACO. We hope this look into individual practices and clinics will help providers better manage care for our ACO patients.

Tips on reading the scorecard: As pictured in the image below, on the left are indicators for the breakdown of disabled/Medicaid/Medicare-only/ESRD patients, as well as your top 10 patients regarding Medicare spending. The performance metrics on the right show your patients compared to the rest of the ACO group concerning ED utilization, annual wellness visits, in-network percentage of services, and chronic condition coding compared to the previous year.

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Beneficiary lists are available for all of our providers, showing risk scores and services that will be provided. We also have resources to help manage the high ED utilizers in your practice, and we will be reaching out to those of you with high-volume ED patients.

Goals for the upcoming calendar year: Our priorities for 2021 include focusing on completing wellness visits and updating ALL of the patients' active chronic conditions (hierarchical condition category, or HCC codes) in the note.

2019 PERFORMANCE

Below are the APN patient satisfaction and key utilization metrics from 2019. The patient satisfaction survey measures are compared with ACO aggregates. We are scoring higher in all but three categories: shared decision-making about medications, self-rated health, and beneficiary's functional status. These three categories represent opportunities for improvement. Notable high ratings for patient satisfaction include health promotion and education, which is approximately nine points higher, and mental health promotion and education, which is 12 points higher than ACO aggregates.

Regarding the 2019 performance year utilization metrics, there are some great successes and areas that need improvement. ED visits are down, as are hospital discharges compared to 2018 and 2017. We are 1.8% off our performance benchmark for 2019, putting us close to meeting our goal to achieve Medicare savings. Working against that benchmark goal is the fact that our total expenditures are increasing. The APN, on average, has a greater mix of ESRD and disabled patients. If we continue to focus on annual wellness visits, improving our documentation for HCC coding, and working to impact ED utilization, we may see better performance for 2020. Keep up the good work!

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APN PATIENT SATISFACTION COMPARED TO ALL ACOS

| Survey Category | APN | All ACO's |
|-------------------------------------|----------------|----------------|
| Getting Timely Care, Appts, Info | 89.03 | 85.86 |
| Provider Communication | 96.2 | 94.11 |
| Patient's Rating of Provider | 93.42 | 92.69 |
| Access to Specialists | 84.97 | 81.54 |
| Health Promotion & Edu | 69.01 | 60.44 |
| General Health Promotion/Edu | 72.49 | 67.05 |
| Mental Health Promotio/Edu | 65.52 | 53.83 |
| Shared Decision Making- Health Info | 45.16 | 39.09 |
| Shared Decision Making-Meds | 81.96 | 86.43 |
| Health Status & Functional Status | 74.11 | 73.79 |
| Self Rated Health | 52.17 | 54.08 |
| Self Rated Mental Health | 68.06 | 66.19 |
| Cognitive Functioning | 90.27 | 87.67 |
| Beneficiaries w/o Chronic Cond | 63.17 | 62.14 |
| Beneficiaries Functional Status | 79.67 | 80.05 |
| Stewardship of Patient Resources | 29.97 | 26.17 |
| Courteous & Helpful Office Staff | 93.57 | 92.84 |
| Care Coordination | 89.5 | 86.89 |
| Grand Total | 1338.25 | 1290.86 |

APN PATIENT SATISFACTION COMPARED TO ALL ACOS

| CMS PY19' Report Performance Measures | Performance Year | | | | |
|--|------------------|--------------|--------------|--------------|--------------|
| | 2015 | 2016 | 2017 | 2018 | 2019 |
| Total Expenditure/ Beneficiary | \$ 11,213.00 | \$ 11,127.00 | \$ 12,830.00 | \$ 12,927.00 | \$ 13,344.00 |
| Hospital Outpatient Dept Expenditure/Beneficiary | \$ 2,471.00 | \$ 2,624.00 | \$ 3,001.00 | \$ 3,081.00 | \$ 3,216.00 |
| Inpatient Hosp Component Expenditure/Beneficiary | \$ 3,653.00 | \$ 3,648.00 | \$ 4,382.00 | \$ 4,288.00 | \$ 4,458.00 |
| Outpt Facility Component Expenditure/Beneficiary | \$ 3,087.00 | \$ 3,208.00 | \$ 3,723.00 | \$ 3,820.00 | \$ 4,004.00 |
| ER visits/1000 person | 863 | 858 | 1014 | 978 | 911 |
| Hospital Discharge/1000 person | 416 | 409 | 467 | 441 | 422 |
| Primary Care Services (APP/PA/CNS)/1000 person | 727 | 932 | 1208 | 1489 | 1616 |
| Primary Care Services (PCP)/1000 person | 3393 | 3253 | 3115 | 3021 | 2787 |