Shared Savings Program Public Reporting Template

ACO Name and Location

Lifespan Health Alliance, LLC 167 Point Street Providence, RI 02903

ACO Primary Contact

Daniel Moynihan
401-444-3649
Dmoynihan1@Llfespan.org

Organizational Information

ACO Participants:

| ACO Participants | ACO Participant in Joint Venture |
|-----------------------------------|----------------------------------|
| Anchor Medical Associates | Y |
| Brown Medicine | Υ |
| Coastal Medical Physicians, Inc. | Υ |
| David Steigman | Υ |
| Lifespan Physician Group, Inc. | Υ |
| Medical Associates of RI, Inc. | Υ |
| Richard J. Ruggieri, MD, Inc. | Υ |
| The Miriam Hospital | Υ |
| University Internal Medicine Inc. | Υ |
| Women's Internal Medicine Inc. | Υ |

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 |
|----------------------|---------------------|--------------------------|---|-------------------------|--|
| Nathan | Beraha, MD | Chair | 12.5 | ACO Participant | Anchor Medical Group |
| Peter | Hollmann, MD | Member | 12.5 | ACO Participant | Brown Medicine |
| Babar | Khokhar, MD | Member | 12.5 | ACO Participant | Lifespan Physician Group, Inc. |
| Peter | Markell | Member | 12.5 | ACO Participant | The Miriam Hospital |
| Edward | McGookin, MD | Member | 12.5 | ACO Participant | Coastal Medical |
| Leslie | Mohlman, MD | Member | 12.5 | ACO Participant | Medical Associates of Rhode Island |
| Lawrence | Sadwin | Member | 12.5 | Medicare Beneficiary | N/A |

| Diane | Siedlecki, MD | Member | 12.5 | ACO Participant | Anchor Medical Group |
|-------|---------------|--------|------|--------------------|-------------------------|
|-------|---------------|--------|------|--------------------|-------------------------|

Key ACO Clinical and Administrative Leadership:

ACO Executive: Daniel Moynihan Medical Director: Peter Hollmann, MD

Compliance Officer: Donna Schneider, RN. MBA, CPHQ, CPC-P, CHC, CPCO, CHPC

Quality Assurance/Improvement Officer: Peter Hollmann, MD

Associated Committees and Committee Leadership:

| Committee Name | Committee Leader Name and Position |
|---------------------------|------------------------------------|
| Clinical Quality | Peter Hollmann, MD, Chair |
| Compliance Committee | Edward McGookin, MD, Chair |
| Finance Committee | Peter Markell, Chair |
| Data Governance Committee | Nathan Beraha, MD, Chair |

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

Partnerships or joint venture arrangements between hospitals and ACO professionals

Shared Savings and Losses

Amount of Shared Savings/Losses:

- Second Agreement Period
- Performance Year 2022 \$0.00
- Performance Year 2021 \$0.00
- Performance Year 2020 \$0.00

Shared Savings Distribution:

- Second 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: N/A
 - Proportion invested in redesigned care processes/resources: N/A
 - Proportion of distribution to ACO participants: N/A
- First Agreement Period
 - Performance Year 2019
 - Proportion invested in infrastructure: 45%
 - Proportion invested in redesigned care processes/resources: 27%
 - Proportion of distribution to ACO participants: 28%

-

- o Performance Year 2018
 - 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 2017
 - Proportion invested in infrastructure: N/A
 - Proportion invested in redesigned care processes/resources: N/A
 - Proportion of distribution to ACO participants: N/A

Quality Performance Results

2022 Quality Performance Results:

Quality performance results are based on CMS Web Interface

| Measure # | Measure Name | Rate | ACO Mean |
|-----------|---|-------|----------|
| 001 | Diabetes: Hemoglobin A1c (HbA1c) Poor Control | 6.40 | 10.71 |
| 134 | Preventative Care and Screening: Screening for Depression and Follow- up Plan | 83.87 | 76.97 |
| 236 | Controlling High Blood Pressure | 81.97 | 76.16 |
| 318 | Falls: Screening for Future Fall Risk | 92.86 | 87.83 |
| 110 | Preventative Care and Screening: Influenza Immunization | 74.30 | 77.34 |
| 226 | Preventative Care and Screening: Tobacco Use: Screening and Cessation Intervention | 90.91 | 79.27 |

| 113 | Colorectal Cancer Screening | 85.52 | 75.32 |
|---------|---|--------|--------|
| 112 | Breast Cancer Screening | 89.26 | 78.07 |
| 438 | Statin Therapy for the Prevention and Treatment of Cardiovascular Disease | 88.51 | 86.37 |
| 370 | Depression Remission at Twelve Months | 25.42 | 16.03 |
| 479 | Hospital-Wide, 30 Day, All-Care Unplanned Readmission (HWR) Rate for MIPS Groups | 0.1578 | 0.1510 |
| 484 | Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions | 30.07 | 30.97 |
| CAHPS 1 | Getting Timely Care, Appointments, and Information | 86.86 | 83.96 |
| CAHPS-2 | How Well Providers Communicate | 95.53 | 93.47 |
| CAHPS-3 | Patient's Rating of Provider | 94.59 | 92.06 |
| CAHPS-4 | Access to Specialists | 79.97 | 77.00 |

| CAHPS-5 | Health Promotion and Education | 73.42 | 62.68 |
|----------|--|-------|-------|
| CAHPS -6 | Shared Decision Making | 58.60 | 60.97 |
| CAHPS-7 | Health Status and Functional Status | 74.62 | 73.06 |
| CAHPS-8 | Care Coordination | 87.42 | 85.46 |
| CAHPS-9 | Courteous and Helpful Office Staff | 93.36 | 91.97 |
| CAHPS-11 | Stewardship of Patient Resources | 15.97 | 25.62 |

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.