Shared Savings Program Public Reporting

ACO Name and Location

Adirondacks ACO, LLC

75 Beekman Street, Plattsburgh, NY, 12901, U.S.A.

ACO Primary Contact

Karen Ashline

518-314-3663

kashline@ahihealth.org

Organizational Information

ACO Participants:

ACO Participants	ACO Participant in Joint Venture
No Records found	

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
Ann Marie	Hatch	Senior Director	16.667%	ACO Participant Representative	Glens Falls Hospital, Inc.
Brittany	Silvestri	COO	0%	Other	N/A
Christopher	Hickey	Senior Advisor	16.667%	ACO Participant Representative	CHAMPLAIN VALLEY PHYSICIANS HOSPITAL MEDICAL CENTER
Craig	Letourneau	Comptroller	16.666%	ACO Participant Representative	Glens Falls Hospital, Inc.
Dan	Hill	COO	16.666%	ACO Participant Representative	Adirondack Medical Center
David	Beguin	MD	0%	Community Stakeholder Representative	N/A
Karen	Ashline	CEO	0%	Other	N/A
Kelly	Champeny	Vice President	16.667%	ACO Participant Representative	CHAMPLAIN VALLEY PHYSICIANS HOSPITAL MEDICAL CENTER
Kevin	Gallagher	MD	0%	Other	N/A
Kristin	Ambler	MD	0%	Community Stakeholder Representative	N/A

Michelle	Mannion	MD	16.667%	ACO Participant Representative	Adirondack Medical Center
Paul	Wilke	Retiree	0%	Medicare Beneficiary Representative	N/A
Paul	Filion	MD	0%	Other	N/A

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:

Karen Ashline

Medical Director:

Matthew Siket

Compliance Officer:

Jeff Hiscox

Quality Assurance/Improvement Officer:

Jeremy Powers

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
- Networks of individual practices of ACO professionals
- Hospital employing ACO professionals
- Critical Access Hospital (CAH) billing under Method II
- Federally Qualified Health Center (FQHC)

Shared Savings and Losses

Amount of Shared Savings/Losses:

- Fourth Agreement Period
  - Performance Year 2026, N/A
  - Performance Year 2025, N/A
- Third Agreement Period

    - Performance Year 2024, N/A
    - Performance Year 2023, $2,492,660.16
    - Performance Year 2022, $2,617,943.00
    - Performance Year 2021, $3,382,438.08
    - Performance Year 2020, $3,062,968.50
- Second Agreement Period
    - Performance Year 2019, $0.00
    - Performance Year 2018, $0.00
    - Performance Year 2017, N/A
- First Agreement Period
    - Performance Year 2016, N/A
    - Performance Year 2015, N/A
    - Performance Year 2014, N/A

Shared Savings Distribution:

- Fourth 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
- Third Agreement Period
    - Performance Year 2024
        - 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 2023
        - Proportion invested in infrastructure:
        - Proportion invested in redesigned care processes/resources:
        - Proportion of distribution to ACO participants:
    - Performance Year 2022
        - Proportion invested in infrastructure:

        - Proportion invested in redesigned care processes/resources:
        - Proportion of distribution to ACO participants:
    - Performance Year 2021
        - Proportion invested in infrastructure:
        - Proportion invested in redesigned care processes/resources:
        - Proportion of distribution to ACO participants:
    - Performance Year 2020
        - Proportion invested in infrastructure:
        - Proportion invested in redesigned care processes/resources:
        - Proportion of distribution to ACO participants:
- Second Agreement Period
    - Performance Year 2019
        - 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 2018
        - 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 2017
        - 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 2016
        - 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 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: N/A
        - Proportion invested in redesigned care processes/resources: N/A
        - Proportion of distribution to ACO participants: N/A

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	5.5	6.67
479*	Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Groups	Administrative Claims	0.161	0.1517
484*	Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions (MCC)	Administrative Claims	43.29	37
318	Falls: Screening for Future Fall Risk	CMS Web Interface	73.43	88.99
110	Preventative Care and Screening: Influenza Immunization	CMS Web Interface	42.74	68.6
226	Preventative Care and Screening: Tobacco Use: Screening and Cessation Intervention	CMS Web Interface	69.09	79.98
113	Colorectal Cancer Screening	CMS Web Interface	75.79	77.81
112	Breast Cancer Screening	CMS Web Interface	78.8	80.93
438	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	CMS Web Interface	86.63	86.5
370	Depression Remission at Twelve Months	CMS Web Interface	9.09	17.35
001*	Diabetes: Hemoglobin A1c (HbA1c) Poor Control	CMS Web Interface	8.28	9.44
134	Preventative Care and Screening: Screening for Depression and Follow-up Plan	CMS Web Interface	81.74	81.46
236	Controlling High Blood Pressure	CMS Web Interface	79.06	79.49
CAHPS-1	Getting Timely Care, Appointments, and Information	CAHPS for MIPS Survey	82.59	83.7
CAHPS-2	How Well Providers Communicate	CAHPS for MIPS Survey	94.89	93.96
CAHPS-3	Patient's Rating of Provider	CAHPS for MIPS Survey	91.54	92.43
CAHPS-4	Access to Specialists	CAHPS for MIPS Survey	71.04	75.76
CAHPS-5	Health Promotion and Education	CAHPS for MIPS Survey	67.32	65.48
CAHPS-6	Shared Decision Making	CAHPS for MIPS Survey	62.65	62.31

CAHPS-7	Health Status and Functional Status	CAHPS for MIPS Survey	73.94	74.14
CAHPS-8	Care Coordination	CAHPS for MIPS Survey	83.69	85.89
CAHPS-9	Courteous and Helpful Office Staff	CAHPS for MIPS Survey	93.02	92.89
CAHPS-11	Stewardship of Patient Resources	CAHPS for MIPS Survey	18.41	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.