

SHARED SAVINGS PROGRAM PUBLIC REPORTING

ACO Name and Location

Lehigh Valley Health Network Accountable Care Organization, LLC

707 Hamilton Street, Allentown, PA, 18101, U.S.A.

ACO Primary Contact

Dr. Robert Murphy

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Organizational Information

ACO Participants:

ACO Participants	ACO Participant in Joint Venture
LEHIGH VALLEY PHYSICIAN GROUP	No
MAUREEN C. PERSIN DO PC	No
POCONO ADULT & PEDIATRIC MEDICAL GROUP LLC	No
VALLEY HEALTH PARTNERS COMMUNITY HEALTH CENTER	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
Beth	Careyva	Voting member	9.09%	ACO Participant Representative	LEHIGH VALLEY PHYSICIAN GROUP
James	Freeman	Voting member	9.09%	ACO Participant Representative	LEHIGH VALLEY PHYSICIAN GROUP
Jennifer	Stephens	Voting member	9.09%	ACO Participant Representative	LEHIGH VALLEY PHYSICIAN GROUP
John	Stoeckle	Voting member	9.09%	ACO Participant Representative	LEHIGH VALLEY PHYSICIAN GROUP
Joseph	Yozviak	Voting member	9.09%	ACO Participant Representative	VALLEY HEALTH PARTNERS COMMUNITY HEALTH CENTER
Kevin	McNeill	voting member	9.09%	ACO Participant Representative	LEHIGH VALLEY PHYSICIAN GROUP
Matthew	McCambridge	Voting member	9.09%	ACO Participant Representative	LEHIGH VALLEY PHYSICIAN GROUP

Michael	Rossi	Voting member	9.09%	Medicare Beneficiary Representative	N/A
Neti	Vora	Voting member	9.09%	ACO Participant Representative	LEHIGH VALLEY PHYSICIAN GROUP
Robert	Murphy	Voting member and chairman	9.1%	ACO Participant Representative	LEHIGH VALLEY PHYSICIAN GROUP
Stephen	Molitoris	Voting member	9.09%	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:

Robert Murphy

Medical Director:

Kevin McNeill

Compliance Officer:

Victor Shutack

Quality Assurance/Improvement Officer:

Kevin McNeill

Associated Committees and Committee Leadership:

Committee Name	Committee Leader Name and Position
Compliance Committee	Victor Shutack Compliance Officer, Director of Compliance, LVHN – Committee Chair
Finance Committee	Mike Weiss, Administrator Health Informatics – Committee Chair
Patient Engagement Committee	Margaret Kornuszko-Story, PhD Population Health Strategist, Senior Segment – Committee Chair
Quality Committee	Kevin McNeill, MD, Medical Director, LVHN ACO – Committee Chair

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

Shared Savings and Losses

Amount of Shared Savings/Losses:

- Fifth Agreement Period

- Performance Year 2026, N/A
- Fourth Agreement Period
 - Performance Year 2025, N/A
- Third Agreement Period
 - Performance Year 2024, N/A
 - Performance Year 2023, \$0.00
 - Performance Year 2022, \$0.00
- Second Agreement Period
 - Performance Year 2021, \$0.00
 - Performance Year 2020, \$0.00
 - Performance Year 2019, \$0.00
 - Performance Year 2018, \$0.00
- First Agreement Period
 - Performance Year 2017, N/A
 - Performance Year 2016, N/A
 - Performance Year 2015, \$5,469,475.00

Shared Savings Distribution:

- Fifth 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
- Fourth Agreement Period
 - 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: N/A
- Proportion invested in redesigned care processes/resources: N/A
- Proportion of distribution to ACO participants: N/A
- o 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
- Second Agreement Period
 - o 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
 - o 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
 - o 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
 - 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
- First Agreement Period
 - 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
 - o 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
 - o Performance Year 2015
 - Proportion invested in infrastructure: 75%
 - Proportion invested in redesigned care processes/resources: 12%
 - Proportion of distribution to ACO participants: 13%

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	8.28	6.67
479*	Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Groups	Administrative Claims	0.1624	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	95.38	88.99
110	Preventative Care and Screening: Influenza Immunization	CMS Web Interface	85.82	68.6
226	Preventative Care and Screening: Tobacco Use: Screening and Cessation Intervention	CMS Web Interface	89.36	79.98
113	Colorectal Cancer Screening	CMS Web Interface	82.54	77.81
112	Breast Cancer Screening	CMS Web Interface	89.64	80.93
438	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	CMS Web Interface	84.28	86.5
370	Depression Remission at Twelve Months	CMS Web Interface	21.59	17.35
001*	Diabetes: Hemoglobin A1c (HbA1c) Poor Control	CMS Web Interface	6.53	9.44
134	Preventative Care and Screening: Screening for Depression and Follow-up Plan	CMS Web Interface	87.56	81.46
236	Controlling High Blood Pressure	CMS Web Interface	81.6	79.49
CAHPS-1	Getting Timely Care, Appointments, and Information	CAHPS for MIPS Survey	85.04	83.7
CAHPS-2	How Well Providers Communicate	CAHPS for MIPS Survey	95.39	93.96
CAHPS-3	Patient's Rating of Provider	CAHPS for MIPS Survey	94.23	92.43
CAHPS-4	Access to Specialists	CAHPS for MIPS Survey	73.25	75.76
CAHPS-5	Health Promotion and Education	CAHPS for MIPS Survey	70.27	65.48

CAHPS-6	Shared Decision Making	CAHPS for MIPS Survey	67.67	62.31
CAHPS-7	Health Status and Functional Status	CAHPS for MIPS Survey	76.53	74.14
CAHPS-8	Care Coordination	CAHPS for MIPS Survey	86.53	85.89
CAHPS-9	Courteous and Helpful Office Staff	CAHPS for MIPS Survey	95.39	92.89
CAHPS-11	Stewardship of Patient Resources	CAHPS for MIPS Survey	27.55	26.98

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