

2022 Central Virginia Accountable Care Collaborative Public Report

ACO Name and Location

Central Virginia Accountable Care Collaborative, LLC
 1901 Tate Springs Rd.
 Lynchburg, VA 24504

ACO Primary Contact

Susan F. Brown, MSN, RN
 434.200.4947
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Organizational Information

ACO Participants:

ACO Participants	ACO Participant in Joint Venture
<ul style="list-style-type: none"> • Brian D. Buchanan MD • Brian D. Buchanan, MD, Inc. • Centra Medical Group LLC • Pris, Plc. • Brenda Waller, MD • Radiology Consultants of Lynchburg • Pathology Consultants of Central Virginia, Inc • Lynchburg Pulmonary Associates • Central Virginia Imaging, LLC 	<p>No Participants are involved in a joint venture between ACO Professionals and hospitals.</p>

ACO Governing Body:

Member Last Name	Member First Name	Member Title/Position	Member's Voting Power (Expressed as a percentage or number)	Membership Type	ACO Participant Legal Business Name and D/B/A, if applicable
Rennyson	Stephen	MD, Voting Board Member	11.1%	ACO Participant Representative	Centra Medical Group, LLC
Nigro	Darlene	DO, Voting Board Member	11.1%	ACO Participant Representative	Centra Medical Group, LLC
Pruitt	David	MD, Voting Board Member	11.1%	ACO Participant Representative	Centra Medical Group, LLC

Allega	Giuliana	MD, Voting Board Member	11.2%	ACO Participant Representative	Centra Medical Group, LLC
Gayle	William	Retired MD, non-Voting Board Member	11.1%	Medicare Beneficiary Representative	N/A
Patrick	Brown	MD, Voting Board Member	11.1%	ACO Participant Representative	Centra Medical Group, LLC
Dani	Madril	MD, Voting Board Member	11.1%	ACO Participant Representative	Centra Medical Group, LLC
Caesar	Gonzales	MD, Voting Board Member	11.1%	ACO Participant Representative	Centra Medical Group, LLC
Cook	Beth	MD, Voting Board Member	11.1%	Community Stakeholder Representative	N/A

Key ACO Clinical and Administrative Leadership:

ACO Executive: Doug Davenport, SVP & CFO

Medical Director: Dr. Giuliana Allega, MD

Compliance Officer: Mr. Jeffery Wiggins

Quality Assurance/Improvement Officer: Susan F. Brown, MSN, RN

Associated Committees and Committee Leadership:

Committee Name	Committee Leader Name and Position
Governance	Chris Lewis, MD, SVP & CCO - Chair
Health IT	Patrick Brown, MD, VP & CMIO - Chair
Primary Care Committee	Giuliana Allega, MD - Chair
Quality	Susan F. Brown, MSN, RN, Dir. Population Health - Chair

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

- 1. ACO professionals in a group practice arrangement
- 2. Network of individual practices of ACO professionals
- 3. Partnership or joint venture arrangement between hospitals and ACO professionals

Shared Savings and Losses

Amount of Shared Savings/Losses:

- Second Agreement Period
 - N/A
- First Agreement Period
 - Performance Year 2018, N/A
 - Performance Year 2019, N/A

- Performance Year 2020, \$0.00

Shared Savings Distribution:

- Second Agreement Period
 - N/A
- First Agreement Period
 - Performance Year: 2018
 - Proportion invested in infrastructure: 0%
 - Proportion invested in redesigned care processes/resources: 0%
 - Proportion of distribution to ACO participants: 0%
 - Performance Year: 2019
 - Proportion invested in infrastructure: 0%
 - Proportion invested in redesigned care processes/resources: 0%
 - Proportion of distribution to ACO participants: 0%
 - Performance Year: 2020
 - Proportion invested in infrastructure: 0%
 - Proportion invested in redesigned care processes/resources: 0%
 - Proportion of distribution to ACO participants: 0%

Quality Performance Results

2020 Quality Performance Results:

ACO Quality Measure Number	Measure Name	Rate	ACO Mean
Care Coordination/Patient Safety			
ACO-8	Risk Standardized: All Condition Readmission	14.50	15.07
ACO-38	Risk-Standardized Acute Admission Rates for Patients with Multiple Chronic Conditions	55.46	49.50
ACO-43	Ambulatory Sensitive Condition (AHRQ Prevention Quality Indicator – PQI 91)	0.68	0.95
ACO-13	Falls: Screening for Future Fall Risks	96.66	84.97

Preventative Health			
ACO-14	Preventative Care & Screening: Influenza Immunization	44.87	76.03
ACO-17	Preventative Care & Screening: Tobacco Use Screening and Cessation Intervention	55.10	81.67
ACO-18	Preventative Care & Screening: Screening for Clinical Depression & Follow-up Plan	94.97	71.46
ACO-19	Colorectal Cancer Screening	72.10	72.59
ACO-20	Breast Cancer Screening	72.06	74.05
ACO-42	Statin Therapy for Prevention & Treatment of Cardiovascular Disease	86.76	83.37
At-Risk Population			
ACO-27	Diabetes Mellitus: Hemoglobin A1c Poor Control	14.48	14.70
ACO-28	Hypertension: Controlling High Blood Pressure	69.71	72.87

“Please note, the ACO-40 Depression Remission at 12 months quality measure is not included in public reporting due to low sample size. The Centers for Medicare & Medicaid Services (CMS) also waived the requirement for ACOs to field a CAHPS for ACOs survey for PY 2020 through the Physician Fee Schedule Final Rule for Calendar Year 2021. Additionally, CMS reverted ACO-8 Risk-Standardized, All Condition Readmission and ACO-38 Risk-Standardized Acute Admission Rates for Patients with Multiple Chronic Conditions to pay-for-reporting, given the impact of the coronavirus disease 2019 (COVID-19) public health emergency (PHE) on these measures.”

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

Fraud and Abuse Waivers

- **ACO Pre-Participation Waiver:**

The following information describes each arrangement for which our ACO seeks protection under the ACO Pre-Participation Waiver, including any material amendment or modification to a disclosed arrangement.

[For each arrangement, provide the following information:

- *Parties to the arrangement:* N/A
- *Date of arrangement:* N/A
- *Items, services, goods, or facility provided:* N/A
- *Date and nature of any amendments to the arrangement, if applicable:* N/A

- **ACO Participation Waiver:**

The following information describes each arrangement for which our ACO seeks protection under the ACO Participation Waiver, including any material amendment or modification to a disclosed arrangement.

[For each arrangement, provide the following information:

- *Parties to the arrangement:* N/A
- *Date of arrangement:* N/A
- *Items, services, goods, or facility provided:* N/A
- *Date and nature of any amendments to the arrangement, if applicable:* N/A