

Shared Savings Program Public Reporting Template

ACO Name and Location

Duke Connected Care, LLC
Previous Names: N/A
3100 Tower Blvd, Ste 110
Box 104301
Durham, NC 27707

ACO Primary Contact

| | |
|--------------------------------------|--------------------------------|
| <i>Primary Contact Name</i> | Devdutta Sangvai, M.D., M.B.A. |
| <i>Primary Contact Phone Number</i> | 919.613.9719 |
| <i>Primary Contact Email Address</i> | devdutta.sangvai@duke.edu |

Organizational Information

ACO Participants:

| ACO Participants | ACO Participant in Joint Venture (Enter Y or N) |
|--|--|
| Beckford Avenue Medical Center, PA | N |
| Blue Ridge Dermatology Associates | N |
| Carolina Family Health Centers, Inc | N |
| Cary Children's Clinic PC | N |
| DLP Maria Parham Medical Center, LLC | N |
| DLP Maria Parham Physician Practices, LLC | N |
| DLP Wilson Physician Practices, LLC | N |
| Duke University Affiliated Physicians, Inc | N |
| Duke University Health System, Inc | N |
| Impact Healthcare, PA | N |
| Lincoln Community Health Center, Inc. | N |
| North State Medical Center, PA | N |
| Person Family Medical Center, Inc | N |
| Primary Medical Care | N |
| Private Diagnostic Clinic, PLLC | N |
| Roxboro Internal Medicine & Pediatrics, PA | N |

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|---|---|
| Roxboro Medical Associates, PA | N |
| Sundar Internal Medicine Associates, PA | N |
| Triangle Community Physicians, PA | N |
| Triangle Primary Care Associates, PLLC | N |
| Vance Family Medicine, PA | N |

ACO Governing Body:

| Member | | | Member's Voting Power –Expressed as a number | Membership Type - | ACO Participant Legal Business Name/DBA, if Applicable |
|------------|------------|----------------|--|--------------------------------|--|
| Last Name | First Name | Title/Position | | | |
| Sangvai | Devdutta | Chair | 1 | ACO participant representative | N/A |
| Kevin | Shah | Member | 1 | ACO participant representative | Duke University Affiliated Physicians Inc |
| Adia | Ross | Member | 1 | ACO participant representative | Duke University Health System Inc |
| Blake | Cameron | Member | 1 | ACO participant representative | Private Diagnostic Clinic, PLLC |
| Lipkin | Michael | Member | 1 | ACO participant representative | Private Diagnostic Clinic, PLLC |
| Aniekwensi | Francis | Member | 1 | ACO participant representative | Beckford Avenue Medical Center, P.A. |
| Klein | Kombiz | Member | 1 | ACO participant representative | Triangle Community Physicians, PA |

In lieu of a Medicare beneficiary representative on its Governing Body, Duke Connected Care (DCC) received permission from CMS to create a separate Beneficiary Representative Committee (BRC) consisting at least three Medicare beneficiaries served by DCC. The BRC is responsible for making recommendations to the Governing Body regarding several key functions and areas, including establishing physician participation standards; endorsing a quality assurance and improvement plan; endorsing a patient engagement plan; and endorsing a clinical performance incentive plan, which includes a means of ensuring the meaningful commitment of participants and providers and the distribution of any shared savings to participants. All BRC recommendations are made directly to the Governing Body for its review and comment.

Key ACO Clinical and Administrative Leadership:

| | |
|---------------------------|------------------|
| Devdutta Sangvai, MD, MBA | ACO Executive |
| John Yeatts, MD, MPH | Medical Director |

| | |
|---------------------|---------------------------------------|
| Colleen Shannon, JD | Compliance Officer |
| John Paat, MD | Quality Assurance/Improvement Officer |

Associated Committees and Committee Leadership:

| Committee Name | Committee Leader Name and Position |
|--|------------------------------------|
| Operating Committee | John Anderson, MD, MPH, Chair |
| Beneficiary Representative Committee | Aaron West, Chair |
| Performance Improvement Subcommittee | John Paat, MD, Chair |
| Payer Strategy & Contracting Subcommittee | Bill Schiff, MHA, Chair |
| CIN Development & Credentialing Subcommittee | Harry Phillips, MD, Chair |

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

- Federally Qualified Health Center (FQHC)
- ACO professionals in a group practice arrangement
- Hospital employing ACO professionals
- Networks of individual practices of ACO professionals
- Rural Health Clinic (RHC)

Shared Savings and Losses

Amount of Shared Savings/Losses:

- Second Agreement Period
 - Performance Year 2021: NA
 - Performance Year 2020: \$23,006,864
 - Performance Year 2019: \$19,217,065
 - Performance Year 2018: \$0
 - Performance Year 2017: \$9,483,194
- First Agreement Period
 - Performance Year 2016: \$0
 - Performance Year 2015: \$0
 - Performance Year 2014: \$0

Shared Savings Distribution:

- Second Agreement Period
 - Performance Year 2021: NA
 - Performance Year 2020
 - Proportion invested in infrastructure: 0%

- Proportion invested in redesigned care processes/resources: 25%
 - Proportion of distribution to ACO participants: 75%
 - Performance Year 2019
 - Proportion invested in infrastructure: 0%
 - Proportion invested in redesigned care processes/resources: 25%
 - Proportion of distribution to ACO participants: 75%
 - 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: 0%
 - Proportion invested in redesigned care processes/resources: 25%
 - Proportion of distribution to ACO participants: 75%
- 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

2021 Quality Performance Results:

| ACO# | Measure Name | Rate | ACO Mean |
|-------|---|-------|----------|
| ACO-1 | CAHPS: Getting Timely Care, Appointments, and Information | 86.37 | 84.67 |
| ACO-2 | CAHPS: How Well Your Providers Communicate | 92.9 | 93.56 |
| ACO-3 | CAHPS: Patients' Rating of Provider | 90.94 | 92.19 |
| ACO-4 | CAHPS: Access to Specialists | 80.77 | 78.8 |

| | | | |
|--------|---|--------|-------|
| ACO-5 | CAHPS: Health Promotion and Education | 62.42 | 61.61 |
| ACO-6 | CAHPS: Shared Decision Making | 58.81 | 60.89 |
| ACO-7 | CAHPS: Health Status/Functional Status | 72.73 | 71.78 |
| ACO-34 | CAHPS: Stewardship of Patient Resources | 24.69 | 24.71 |
| ACO-13 | Falls: Screening for Future Fall Risk | 97.3 | 87.04 |
| ACO-14 | Preventive Care and Screening: Influenza Immunization | 91.24 | 80.56 |
| ACO-17 | Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention | 90.91 | 80.93 |
| ACO-18 | Preventive Care and Screening: Screening for Clinical Depression and Follow-up Plan | 70.7 | 74.36 |
| ACO-19 | Colorectal Cancer Screening | 75.0 | 73.74 |
| ACO-20 | Breast Cancer Screening | 83.33 | 75.22 |
| ACO-42 | Statin Therapy for the Prevention and Treatment of Cardiovascular Disease | 88.76 | 84.27 |
| ACO-27 | Diabetes Mellitus: Hemoglobin A1c Poor Control | 12.25* | 12.44 |
| ACO-28 | Hypertension (HTN): Controlling High Blood Pressure | 73.78 | 74.87 |
| ACO-45 | CAHPS: Courteous and Helpful Office Staff | 93.54 | 91.88 |
| ACO-46 | CAHPS: Care Coordination | 86.84 | 85.66 |

For Previous Years' Financial and Quality Performance Results, Please Visit data.cms.gov.

** For the following measures, a lower performance rate is indicative of better performance: ACO-8, ACO-27, ACO-38, ACO-43*

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.