

SHARED SAVINGS PROGRAM PUBLIC REPORTING

ACO Name and Location

Dartmouth Health Performance Network, LLC

1 Medical Center Drive, Lebanon, NH, 03756

ACO Primary Contact

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Organizational Information

ACO Participants:

ACO Participants	ACO Participant in Joint Venture
ALICE PECK DAY MEMORIAL HOSPITAL	No
CHESHIRE MEDICAL CENTER	No
DARTMOUTH-HITCHCOCK CLINIC	No
MARY HITCHCOCK MEMORIAL HOSPITAL	No
THE NEW LONDON HOSPITAL ASSOCIATION INC	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
Craig	Beck	Board Member	10 %	ACO Participant Representative	DARTMOUTH-HITCHCOCK CLINIC
Deanna	Howard	Board Member	10 %	Medicare Beneficiary Representative	N/A
Edward	Merrens MD	Board Member	10 %	ACO Participant Representative	DARTMOUTH-HITCHCOCK CLINIC
Joseph	Perras MD	Board Member	10 %	ACO Participant Representative	CHESHIRE MEDICAL CENTER
Lauren	Wirth MD	Board Member	10 %	ACO Participant Representative	THE NEW LONDON HOSPITAL ASSOCIATION INC
Maria	Padin MD	Board Member	10 %	ACO Participant Representative	DARTMOUTH-HITCHCOCK CLINIC
Martin	Manion	Board Member	10 %	ACO Participant Representative	MARY HITCHCOCK MEMORIAL HOSPITAL
Michael	Lynch MD	Board Member	10 %	ACO Participant Representative	ALICE PECK DAY MEMORIAL HOSPITAL

Tamara	Rockwell	Board Member	10 %	AGO Participant Representative	DARTMOUTH-HITCHCOCK CLINIC
Wendy	Fielding	Board Member	10 %	AGO Participant Representative	MARY HITCHCOCK MEMORIAL HOSPITAL

Member's voting power may have been rounded to reflect a total voting power of 100 percent.

Key AGO Clinical and Administrative Leadership:

ACO Executive:

Lynn Guillette

Medical Director:

Maria Padin

Compliance Officer:

David Haig

Quality Assurance/Improvement Officer:

Abigail Machanic

Associated Committees and Committee Leadership:

Committee Name	Committee Leader Name and Position
N/A	N/A

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

- ACO professionals in a group practice arrangement
- Hospital employing ACO professionals
- Critical Access Hospital (CAH) billing under Method II
- Rural Health Clinic (RHC)

Shared Savings and Losses

Amount of Shared Savings/Losses:

Our ACO has not yet received financial reconciliation results; therefore, this section is not applicable at this time.

Shared Savings Distribution:

Our ACO has not yet received financial reconciliation results; therefore, this section is not applicable at this time.

Quality Performance Results

2024 Quality Performance Results:

Quality performance results are based on the eCQMs/MIPS CQMs/Medicare CQMs 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	3.86	6.67
479*	Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Groups	Administrative Claims	0.152	0.1517
484*	Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions (MCC)	Administrative Claims	38.54	37
318	Falls: Screening for Future Fall Risk	CMS Web Interface		
110	Preventative Care and Screening: Influenza Immunization	CMS Web Interface		
226	Preventative Care and Screening: Tobacco Use: Screening and Cessation Intervention	CMS Web Interface		
113	Colorectal Cancer Screening	CMS Web Interface		
112	Breast Cancer Screening	CMS Web Interface		
438	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	CMS Web Interface		
370	Depression Remission at Twelve Months	CMS Web Interface		
001*	Diabetes: Hemoglobin A1c (HbA1c) Poor Control	eCQM	29.27	28.16
134	Preventative Care and Screening: Screening for Depression and Follow-up Plan	eCQM	46.16	54.68
236	Controlling High Blood Pressure	eCQM	64.71	71.39
CAHPS-1	Getting Timely Care, Appointments, and Information	CAHPS for MIPS Survey	82.42	83.7
CAHPS-2	How Well Providers Communicate	CAHPS for MIPS Survey	91.92	93.96
CAHPS-3	Patient's Rating of Provider	CAHPS for MIPS Survey	90.96	92.43
CAHPS-4	Access to Specialists	CAHPS for MIPS Survey	72.61	75.76
CAHPS-5	Health Promotion and Education	CAHPS for MIPS Survey	64.45	65.48
CAHPS-6	Shared Decision Making	CAHPS for MIPS Survey	54.35	62.31
CAHPS-7	Health Status and Functional Status	CAHPS for MIPS Survey	75.07	74.14

CAHPS-8	Care Coordination	CAHPS for MIPS Survey	82.99	85.89
CAHPS-9	Courteous and Helpful Office Staff	CAHPS for MIPS Survey	92.27	92.89
CAHPS-11	Stewardship of Patient Resources	CAHPS for MIPS Survey	22.55	26.98

For previous years' Financial and Quality Performance Results, please visit: [Data.ems.gov](https://data.ems.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-OP providers.