

## ACO Name and Location

IHC Quality Partners, LLC  
Previous Names: Integrated Health Collaborative, LLC  
c/o Aultman Health Foundation  
2600 Sixth Street SW  
Canton, OH 44710

## ACO Primary Contact

Michelle Cain  
330-363-6349  
[ihc@aultman.com](mailto:ihc@aultman.com)

## Organizational Information

*ACO Participants:*

ACO Participants	ACO Participant in Joint Venture
<b>Astute Medical Associates Inc</b>	N
<b>Aultman North Canton Medical Group</b>	N
<b>Family Medicine Inc</b>	N
<b>Internal Medicine Clinic, Ltd</b>	N
<b>Jackson Family Practice, Inc.</b>	N
<b>Little Flower Family Practice</b>	N
<b>Millersburg Clinic, Inc.</b>	N
<b>Orrville Hospital Foundation</b>	N
<b>Partners In Family Practice</b>	N
<b>Premier Health Associates, Inc.</b>	N
<b>Stark County Physicians, LLC</b>	N

*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
Ashraf	Ahmed	Treasurer	9.091	ACO Participant	Premier Health Associates Inc
Julia	Fiorentino	Voting Member	9.091	ACO Participant	Aultman North Canton Medical Group
Susan	Hake	Voting Member	9.091	ACO Participant	Aultman North Canton Medical Group
James	Johns	Vice-Chair	9.091	ACO Participant	Little Flower Family Practice
Butros	Latouf	Voting Member	9.091	ACO Participant	Millersburg Clinic Inc
Melanie	Mirande	Chair	9.091	ACO Participant	Family Medicine Inc
Steve	Nam	Voting Member	9.090	ACO Participant	Stark County Physicians, LLC

Kevin	Pete	Voting Member	9.091	ACO Participant	Aultman North Canton Medical Group
Tiffany	Good Witmer	Voting Member	9.091	Other	N/A
Thomas	Robinson	Voting Member	9.091	Medicare Beneficiary Representative	N/A
Joey	Romar	Voting Member	9.091	ACO Participant	Orrville Hospital Foundation
Julie	Oberly	Medical Director of Quality	0	Other	N/A
Matt	Ritzert	Vice President IHC Quality Partners	0	Other	N/A

*Key ACO Clinical and Administrative Leadership:*

ACO Executive: Steve Nam, MD

Medical Director: Julie Oberly, MD

Vice President: Matt Ritzert

Compliance Officer: Karen Wulff, RHIA

Quality Assurance/Improvement Officer: Julie Oberly, MD

*Associated Committees and Committee Leadership:*

Committee Name	Committee Leader Name and Position
Performance Improvement & Quality	<b>James Johns, MD, Chair</b>
Finance & Contracting	<b>Ashraf Ahmed, MD, Chair</b>
Credentialing & Professional Standards	<b>Melanie Mirande, MD, Chair</b>
Nominating Committee	<b>James Johns, MD, Chair</b>

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

- Hospital employing ACO professionals
- Partnerships or joint venture arrangements between hospitals and ACO professionals
- Networks of individual practices of ACO professionals

**Shared Savings and Losses**

*Amount of Shared Savings/Losses:*

- Second Agreement Period
  - Performance Year 2023, \$0
  - Performance Year 2022, \$990,392.74
  - Performance Year 2021, \$0
  - Performance Year 2020, \$0
  - Performance Year 2019, \$0
- First Agreement Period
  - Performance Year 2019, \$0

- Performance Year 2018, \$0
- Performance Year 2017, \$0
- Performance Year 2016, \$0

### **Shared Savings Distribution:**

- Second Agreement Period
  - 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
  - Performance Year 2022
    - Proportion invested in infrastructure: 12.5%
    - Proportion invested in redesigned care processes/resources: 12.5%
    - Proportion of distribution to ACO participants: 75%
  - 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
  - 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
  - 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
- First 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
  - 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

## Quality Performance Results

### 2023 Quality Performance Results:

Quality performance results are based on CMS Web Interface

Measure #	Measure Name	Collection Type	Reported Performance Rate	Current Year Mean Performance Rate (SSP ACOs)
<b>Quality ID#: 001</b>	Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%) [1]	CMS Web Interface	4.79	9.84
<b>Quality ID#: 134</b>	Preventive Care and Screening: Screening for Depression and Follow-up Plan	CMS Web Interface	94.12	80.97
<b>Quality ID#: 236</b>	Controlling High Blood Pressure	CMS Web Interface	86.09	77.80
<b>Quality ID#: 318</b>	Falls: Screening for Future Fall Risk	CMS Web Interface	99.51	89.42
<b>Quality ID#: 110</b>	Preventive Care and Screening: Influenza Immunization	CMS Web Interface	90.09	70.76
<b>Quality ID#: 226</b>	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	CMS Web Interface	83.33	79.29
<b>Quality ID#: 113</b>	Colorectal Cancer Screening	CMS Web Interface	90.15	77.14
<b>Quality ID#: 112</b>	Breast Cancer Screening	CMS Web Interface	90.78	80.36
<b>Quality ID#: 438</b>	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	CMS Web Interface	87.79	87.05
<b>Quality ID#: 370</b>	Depression Remission at Twelve Months	CMS Web Interface	11.76	16.58
<b>Quality ID#: 321</b>	CAHPS for MIPS [2]	CMS Web Interface	7.95	6.25
<b>Measure # 479</b>	Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Eligible Clinician Groups [1]	CMS Web Interface	0.1542	0.1553
<b>Measure # 484</b>	Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions [1]	CMS Web Interface	---	35.39
<b>CAHPS-1</b>	Getting Timely Care, Appointments, and Information	CAHPS for MIPS	89.38	83.68
<b>CAHPS-2</b>	How Well Providers Communicate	CAHPS for MIPS	94.63	93.69
<b>CAHPS-3</b>	Patient's Rating of Provider	CAHPS for MIPS	92.75	92.14
<b>CAHPS-4</b>	Access to Specialists	CAHPS for MIPS	76.95	75.97
<b>CAHPS-5</b>	Health Promotion and Education	CAHPS for MIPS	66.80	63.93
<b>CAHPS-6</b>	Shared Decision Making	CAHPS for MIPS	67.74	61.60

<b>CAHPS-7</b>	Health Status and Functional Status	CAHPS for MIPS	74.09	74.12
<b>CAHPS-8</b>	Care Coordination	CAHPS for MIPS	87.14	85.77
<b>CAHPS-9</b>	Courteous and Helpful Office Staff	CAHPS for MIPS	93.94	92.31
<b>CAHPS-11</b>	Stewardship of Patient Resources	CAHPS for MIPS	27.08	26.69

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

### Payment Rule Waivers

- Skilled Nursing Facility (SNF) 3-Day Rule Waiver: N/A
- 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.