

ACO Name and Location

Chrysalis Medical Services, LLC
4888 Loop Central Drive
Suite 700
Houston, Texas 77081

ACO Primary Contact

<i>Primary Contact Name</i>	Adrienne Opalka
<i>Primary Contact Phone Number</i>	914-281-0827
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Organizational Information

ACO participants:

ACO Participants	ACO Participant in Joint Venture (Enter Y or N)
David Gabros	N
Shore Atlantic Geriatrics, LLC	N
Island Medical Professional Association	N
Suketu Nanavati Md Pa	N
Medcom Health Services, PA	N
Frank P. Matteace, MD PA	N
Howard J Sperling MD PC	N
Reliance Medical Group, LLC	N
Arnold S Bacarro Md Pa	N
Richard G. Olarsch, DO PC	N
Southern Ocean Primary Care Associates, LLC	N
Burton Waisbren	N

ACO governing body:

Member			Member's Voting Power	Membership Type	ACO Participant TIN Legal Business Name/DBA, if Applicable
Last Name	First Name	Title/Position			
Bassett	Shawn	Voting Member	23%	Other	N/A
Miller	Walter	Voting Member	15%	ACO participant representative	Southern Ocean Primary Care Associates
Regis	Jon	Voting Member	15%	ACO participant representative	Reliance Medical Group LLC
Waisbren	Burton	Voting Member	15%	ACO participant representative	Burton Waisbren
Nanavati	Suketu	Voting Member	15%	ACO participant representative	Suketu Nanavati Md Pa
Baccaro	Arnold	Voting Member	15%	ACO participant representative	Arnold S Bacarro Md Pa
Pappacio	Vince	Voting Member	2%	Medicare Beneficiary Representative	N/A

Key ACO clinical and administrative leadership:

Adrienne Opalka	ACO Executive
Athanasios Papastamelos	Medical Director
Michael Yount	Compliance Officer
Walter Miller, MD	Quality Assurance/Improvement Officer

Associated committees and committee leadership:

Committee Name	Committee Leader Name and Position
Finance Committee	Athanasios Papastamelos, D.O./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

- First Agreement Period
 - Performance Year 2016, \$0
 - Performance Year 2015, \$0

Shared Savings Distribution

- 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

Quality Performance Results

2016 Quality Performance Results:

ACO#	Measure Name	Rate	ACO Mean
ACO-1	CAHPS: Getting Timely Care, Appointments, and Information	77.93	80.51
ACO-2	CAHPS: How Well Your Providers Communicate	91.56	93.01
ACO-3	CAHPS: Patients' Rating of Provider	90.57	92.25
ACO-4	CAHPS: Access to Specialists	85.72	83.49
ACO-5	CAHPS: Health Promotion and Education	60.81	60.32
ACO-6	CAHPS: Shared Decision Making	75.15	75.40
ACO-7	CAHPS: Health Status/Functional Status	70.98	72.30
ACO-34	CAHPS: Stewardship of Patient Resources	30.46	26.97

ACO-8	Risk Standardized, All Condition Readmission	15.00	14.70
ACO-35	Skilled Nursing Facility 30-day All-Cause Readmission measure (SNFRM)	18.69	18.17
ACO-36	All-Cause Unplanned Admissions for Patients with Diabetes	60.68	53.20
ACO-37	All-Cause Unplanned Admissions for Patients with Heart Failure	80.05	75.23
ACO-38	All-Cause Unplanned Admissions for Patients with Multiple Chronic Conditions	64.50	59.81
ACO-9	Ambulatory Sensitive Condition Admissions: Chronic Obstructive Pulmonary Disease or Asthma in Older Adults (AHRQ Prevention Quality Indicator (PQI) #5)	9.73	9.27
ACO-10	Ambulatory Sensitive Conditions Admissions: Heart Failure (AHRQ Prevention Quality Indicator (PQI) #8)	11.53	14.53
ACO-11	Percent of PCPs who Successfully Meet Meaningful Use Requirements	62.07	82.72
ACO-39	Documentation of Current Medications in the Medical Record	87.42	87.54
ACO-13	Falls: Screening for Future Fall Risk	69.72	64.04
ACO-14	Preventive Care and Screening: Influenza Immunization	78.38	68.32
ACO-15	Pneumonia Vaccination Status for Older Adults	58.36	69.21
ACO-16	Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up	85.34	74.45
ACO-17	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	87.29	90.98
ACO-18	Preventive Care and Screening: Screening for Clinical Depression and Follow-up Plan	64.81	53.63
ACO-19	Colorectal Cancer Screening	43.27	61.52
ACO-20	Breast Cancer Screening	47.72	67.61
ACO-21	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up Documented	75.14	76.79
ACO-42	Statin therapy for the Prevention and Treatment of Cardiovascular Disease	74.19	77.72
ACO-27	Diabetes Mellitus: Hemoglobin A1c Poor Control	27.45	18.24
ACO-41	Diabetes: Eye Exam	32.55	44.94

ACO-28	Hypertension (HTN): Controlling High Blood Pressure	66.55	70.69
ACO-30	Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antithrombotic	82.54	85.05
ACO-31	Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)	97.30	88.67
ACO-33	Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy - for patients with CAD and Diabetes or Left Ventricular Systolic Dysfunction (LVEF<40%)	68.18	79.67

Please note, the ACO-40 Depression Remission at 12 months quality measure is not included in public reporting due to low samples.

- For 2016 Quality Performance Results please visit: <https://data.cms.gov/Special-Programs-Initiatives-Medicare-Shared-Savin/2016-Shared-Savings-Program-SSP-Accountable-Care-O/3jk5-q6dr/data>
- For 2015 Quality Performance Results please visit: <https://data.cms.gov/Special-Programs-Initiatives-Medicare-Shared-Savin/Medicare-Shared-Savings-Program-Accountable-Care-O/x8va-z7cu/data>

Note: In the Quality Performance Results file(s) above, search for “Chrysalis Medical Services, LLC” or “Chrysalis - An Accountable Care Organization” to view the quality performance results. This ACO can also be found by using the ACO ID A47655 in the public use files on data.cms.gov.

Payment Rule Waivers

- No, our ACO does not use the SNF 3-Day Rule Waiver.

Arrangements Disclosed

REQUIRED PUBLIC DISCLOSURE FOR USE OF AN ARRANGEMENT ENTERED INTO UNDER THE ACO PARTICIPATION WAIVER

Chrysalis Medical Services, LLC (the “ACO”) participates in the Medicare Shared Savings Program (“MSSP”) under a contract with the Centers for Medicare & Medicaid Services (“CMS”). The Secretary of the Department of Health and Human Services (“HHS”) by and through CMS and the Office of Inspector General, HHS has provided certain waivers of federal fraud and abuse laws deemed necessary by CMS to carry out the MSSP pursuant to a *Final Waivers in Connection with the Shared Savings Program* dated October 29, 2015, as may be amended, including the ACO Participation Waiver (“Participation Waiver”). On December 26, 2017, the Governing Body of ACO after previous discussions authorized, via unanimous written consent, an arrangement with Laboratory Corporation of America Holdings (“LabCorp”) under which LabCorp will collaborate with ACO to provide ACO with laboratory data and test result values for ACO’s assigned beneficiaries, and jointly develop an outreach program to ACO’s providers/suppliers to provide educational services and information concerning. In addition to educational services, ACO will provide ACO providers/suppliers with, among other things, their applicable test result values and an analysis of such laboratory data so they can improve their patients’ care. Finally, LabCorp will provide a grant of funds to allow ACO to defray a portion of the costs to further develop and implement the program, including investment or modification of ACO’s administrative and clinical systems, and otherwise assisting the ACO’s efforts with respect to the MSSP. Consistent with the requirements of the Participation Waiver, after discussing the proposed arrangement with LabCorp, the Board of Directors made a bona fide determination that an arrangement with LabCorp as described below is reasonably related to the purpose of the MSSP and authorized such arrangement. The collaboration is related to the purposes of the MSSP as it augments ACO’s ability to:

- Promote evidence-based medicine and patient engagement;
- Meet the requirements for reporting quality and cost measures coordinating care;
- Establish clinical and administrative systems;
- Meet the clinical integration requirements of the MSSP;
- Evaluate the health needs of ACO’s aligned population;
- Communicate clinical knowledge and evidence based medicine to Medicare beneficiaries; and
- Develop standards for beneficiary access and communication, including beneficiary access to medical records.

Accordingly, ACO entered into this arrangement having determined that it meets all conditions to enable ACO to avail itself of the Participation Waiver.