

# SHARED SAVINGS PROGRAM PUBLIC REPORTING

## ACO Name and Location

WellMed Texas Medicare ACO, LLC

19500 IH 10 W, San Antonio, TX, 78257

## ACO Primary Contact

Carter Rieser

502-209-9426

carter.rieser@imperiumhealth.com

## Organizational Information

### ACO Participants:

ACO Participants	ACO Participant in Joint Venture
MEDICAL CLINIC OF NORTH TEXAS, PLLC	No
WELLMED MEDICAL GROUP, P.A.	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
CINDY	DR. JOHNSTON	VOTING MEMBER	8.276%	ACO Participant Representative	WELLMED MEDICAL GROUP, P.A.
CLINT	DR. ANDERSON	VOTING MEMBER	8.276%	ACO Participant Representative	WELLMED MEDICAL GROUP, P.A.
DAVID	DR. DE LA LLATA	VOTING MEMBER	8.276%	ACO Participant Representative	WELLMED MEDICAL GROUP, P.A.
FERNANDO	DR. VALDEZ	VOTING MEMBER	8.276%	ACO Participant Representative	WELLMED MEDICAL GROUP, P.A.
GARY	ALBERS	VOTING MEMBER	4.484%	Other	N/A
GUADALUPE	DR. DAVILA	VOTING MEMBER AND VICE CHAIR	8.275%	ACO Participant Representative	WELLMED MEDICAL GROUP, P.A.
JEREMY ALLEN	DR. SMITH	VOTING MEMBER	8.276%	ACO Participant Representative	WELLMED MEDICAL GROUP, P.A.
LORRAINE	COOPER	MEDICARE BENEFICIARY	4.484%	Medicare Beneficiary	N/A

				Representative	
MEGAN	DR. GILLEM	VOTING MEMBER	8.276%	ACO Participant Representative	MEDICAL CLINIC OF NORTH TEXAS, PLLC
RAFAEL	DR. RODRIGUEZ	VOTING MEMBER AND VICE CHAIR	8.275%	ACO Participant Representative	WELLMED MEDICAL GROUP, P.A.
RYAN	DR. JONES	VOTING MEMBER AND CHAIR	8.274%	ACO Participant Representative	MEDICAL CLINIC OF NORTH TEXAS, PLLC
SAMIM	DR. GIOTIS	VOTING MEMBER	8.276%	ACO Participant Representative	MEDICAL CLINIC OF NORTH TEXAS, PLLC
YURI	DR. BERMUDEZ	VOTING MEMBER	8.276%	ACO Participant Representative	WELLMED MEDICAL GROUP, P.A.

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

### *Key ACO Clinical and Administrative Leadership:*

ACO Executive:

Carter Rieser

Medical Director:

Ryan Jones

Compliance Officer:

Karen Wagner

Quality Assurance/Improvement Officer:

Angela Farley

### *Associated Committees and Committee Leadership:*

Committee Name	Committee Leader Name and Position
Compliance Committee	Karen Wagner, Chair
Quality Assurance & Improvement Committee	Angela Farley, Chair

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

- ACO professionals in a group practice arrangement

### *Shared Savings and Losses*

#### *Amount of Shared Savings/Losses:*

- Second Agreement Period

- Performance Year 2026, N/A
- Performance Year 2025, N/A
- First Agreement Period
  - Performance Year 2024, \$2,620,109.90
  - Performance Year 2023, \$9,654,945.83
  - Performance Year 2022, \$10,645,977.00
  - Performance Year 2021, \$7,684,458.65
  - Performance Year 2020, \$14,475,005.55

*Shared Savings Distribution:*

- Second Agreement Period
  - Performance Year 2026
    - 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 2025
    - 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 2024
    - Proportion invested in infrastructure: 13%
    - Proportion invested in redesigned care processes/resources: 14%
    - Proportion of distribution to ACO participants: 73%
  - Performance Year 2023
    - Proportion invested in infrastructure: 14%
    - Proportion invested in redesigned care processes/resources: 7%
    - Proportion of distribution to ACO participants: 79%
  - Performance Year 2022
    - Proportion invested in infrastructure: 14%
    - Proportion invested in redesigned care processes/resources: 6%
    - Proportion of distribution to ACO participants: 80%
  - Performance Year 2021
    - Proportion invested in infrastructure: 14%
    - Proportion invested in redesigned care processes/resources: 9%
    - Proportion of distribution to ACO participants: 77%
  - Performance Year 2020

- Proportion invested in infrastructure: 14%
- Proportion invested in redesigned care processes/resources: 5%
- Proportion of distribution to ACO participants: 81%

## Quality Performance Results

### 2024 Quality Performance Results:

Quality performance results are based on the CMS Web Interface 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	5.79	6.67
479*	Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Groups	Administrative Claims	0.1565	0.1517
484*	Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions (MCC)	Administrative Claims	-	37
318	Falls: Screening for Future Fall Risk	CMS Web Interface	76.39	88.99
110	Preventative Care and Screening: Influenza Immunization	CMS Web Interface	62.2	68.6
226	Preventative Care and Screening: Tobacco Use: Screening and Cessation Intervention	CMS Web Interface	86.96	79.98
113	Colorectal Cancer Screening	CMS Web Interface	75.29	77.81
112	Breast Cancer Screening	CMS Web Interface	82.22	80.93
438	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease	CMS Web Interface	83.5	86.5
370	Depression Remission at Twelve Months	CMS Web Interface	9.76	17.35
001*	Diabetes: Hemoglobin A1c (HbA1c) Poor Control	CMS Web Interface	9.32	9.44
134	Preventative Care and Screening: Screening for Depression and Follow-up Plan	CMS Web Interface	57.2	81.46
236	Controlling High Blood Pressure	CMS Web Interface	84.65	79.49
CAHPS-1	Getting Timely Care, Appointments, and Information	CAHPS for MIPS Survey	84.31	83.7
CAHPS-2	How Well Providers Communicate	CAHPS for MIPS Survey	95.28	93.96
CAHPS-3	Patient's Rating of Provider	CAHPS for	92.51	92.43

		MIPS Survey		
CAHPS-4	Access to Specialists	CAHPS for MIPS Survey	77.51	75.76
CAHPS-5	Health Promotion and Education	CAHPS for MIPS Survey	60.79	65.48
CAHPS-6	Shared Decision Making	CAHPS for MIPS Survey	58.01	62.31
CAHPS-7	Health Status and Functional Status	CAHPS for MIPS Survey	75.28	74.14
CAHPS-8	Care Coordination	CAHPS for MIPS Survey	86.28	85.89
CAHPS-9	Courteous and Helpful Office Staff	CAHPS for MIPS Survey	92.02	92.89
CAHPS-11	Stewardship of Patient Resources	CAHPS for MIPS Survey	21.9	26.98

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