

SHARED SAVINGS PROGRAM PUBLIC REPORTING

ACO Name and Location

Cura Health Network, LLC

Trade Name/DBA: Bluestone ACO

270 Main St N, Suite #300, Stillwater, MN, 55082

ACO Primary Contact

Nate Hunkins

6129164497

nate.hunkins@bluestonemd.com

Organizational Information

ACO Participants:

ACO Participants	ACO Participant in Joint Venture
BLUESTONE PHYSICIAN SERVICES PA	No
BLUESTONE PHYSICIAN SERVICES SOUTHEAST LLC	No
BLUESTONE PHYSICIAN SERVICES WISCONSIN SC	No
HERSELF HEALTH MN PC	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
Andrea	Fuhrmanek Kloubec	VP Corporate Compliance	0%	Other	N/A
Charles	OHare	CMO	10%	ACO Participant Representative	BLUESTONE PHYSICIAN SERVICES PA
Evelyn	Matos	POA Representative	5%	Medicare Beneficiary Representative	N/A
Martha	Jarrett	COO	10%	ACO Participant Representative	BLUESTONE PHYSICIAN SERVICES PA
Mike	Sussman	Business Director Florida	15%	ACO Participant Representative	BLUESTONE PHYSICIAN SERVICES SOUTHEAST LLC
Nate	Hunkins	CEO	10%	ACO Participant	BLUESTONE

				Representative	PHYSICIAN SERVICES PA
Pam	Preston	Business Director Wisconsin	15%	ACO Participant Representative	BLUESTONE PHYSICIAN SERVICES WISCONSIN SC
Ray	Keller	CFO	15%	ACO Participant Representative	BLUESTONE PHYSICIAN SERVICES PA
Sarah	Hildenbrand	Business Director Minnesota	15%	ACO Participant Representative	BLUESTONE PHYSICIAN SERVICES PA
Tonia	Galonska	POA Representative	5%	Medicare Beneficiary Representative	N/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:

Nate Hunkins

Medical Director:

Charles O'Hare

Compliance Officer:

ANDREA FUHRMANNEK-KLOUBEC

Quality Assurance/Improvement Officer:

Nate Hunkins

Associated Committees and Committee Leadership:

Committee Name	Committee Leader Name and Position
ACO Compliance Committee	Andrea Fuhrmannek-Kloubec

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

- Networks of individual practices of ACO professionals

Shared Savings and Losses

Amount of Shared Savings/Losses:

- Second Agreement Period
 - Performance Year 2026, N/A
 - Performance Year 2025, N/A

- Performance Year 2024, \$24,783,621.21
- First Agreement Period
 - Performance Year 2023, \$16,628,257.12
 - Performance Year 2022, \$13,044,239.00
 - Performance Year 2021, \$7,145,172.23
 - Performance Year 2020, \$2,968,632.55

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
 - Performance Year 2024
 - Proportion invested in infrastructure: 50%
 - Proportion invested in redesigned care processes/resources: 50%
 - Proportion of distribution to ACO participants: 0%
- First Agreement Period
 - Performance Year 2023
 - Proportion invested in infrastructure:
 - Proportion invested in redesigned care processes/resources:
 - Proportion of distribution to ACO participants:
 - Performance Year 2022
 - Proportion invested in infrastructure:
 - Proportion invested in redesigned care processes/resources:
 - Proportion of distribution to ACO participants:
 - Performance Year 2021
 - Proportion invested in infrastructure:
 - Proportion invested in redesigned care processes/resources:
 - Proportion of distribution to ACO participants:
 - Performance Year 2020
 - Proportion invested in infrastructure:
 - Proportion invested in redesigned care processes/resources:

- Proportion of distribution to ACO participants:

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	3.4	6.67
479*	Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Groups	Administrative Claims	0.1409	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	-	-
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	19.99	28.16
134	Preventative Care and Screening: Screening for Depression and Follow-up Plan	eCQM	71.1	54.68
236	Controlling High Blood Pressure	eCQM	81.8	71.39
CAHPS-1	Getting Timely Care, Appointments, and Information	CAHPS for MIPS Survey	77.31	83.7
CAHPS-2	How Well Providers Communicate	CAHPS for MIPS Survey	89.08	93.96
CAHPS-3	Patient's Rating of Provider	CAHPS for MIPS Survey	86.03	92.43
CAHPS-4	Access to Specialists	CAHPS for MIPS Survey	69.83	75.76

CAHPS-5	Health Promotion and Education	CAHPS for MIPS Survey	64.09	65.48
CAHPS-6	Shared Decision Making	CAHPS for MIPS Survey	68.41	62.31
CAHPS-7	Health Status and Functional Status	CAHPS for MIPS Survey	56.03	74.14
CAHPS-8	Care Coordination	CAHPS for MIPS Survey	75.04	85.89
CAHPS-9	Courteous and Helpful Office Staff	CAHPS for MIPS Survey	85.09	92.89
CAHPS-11	Stewardship of Patient Resources	CAHPS for MIPS Survey	22.5	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.

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.