

ACO Name and Location

BJC HealthCare ACO, LLC
660 Mason Ridge Center Drive
Suite 300
St. Louis, MO 63141

ACO Primary Contact

Primary Contact Name	Karen Shakiba
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Organizational Information

ACO Participants:

ACO Participants	ACO Participant in Joint Venture
Alton Memorial Hospital	N
ALTON MEMORIAL PHYSICIAN BILLING SERVICES LLC	N
Barnes-Jewish Hospital	N
Barnes-Jewish St. Peters Hospital, Inc.	N
Barnes-Jewish West County Hospital	N
BJC Home Care Services	N
Christian Hospital Northeast-Northwest	N
Fairview Heights Medical Group, S.C.	N
Missouri Baptist Hospital of Sullivan	N
Missouri Baptist Medical Center	N
Parkland Health Center	N
Physician Groups, LC	N
Progress West HealthCare Center	N
PROTESTANT MEMORIAL MEDICAL CENTER, INC.	N
WASHINGTON UNIVERSITY CLINICAL ASSOCIATES - MARYLAND MEDICAL	N

Shared Savings Program Public Reporting Template

Version 10 | November 2025



MEDICARE
SHARED SAVINGS
PROGRAM

ACO Governing Body:

Member First Name	Member Last Name	Member Title/Position	Member's Voting Power*	Membership Type	ACO Participant Legal Business Name, if applicable
Joan	Magruder	Chair, BJC Group President	7.143%	Other	
Douglas	Pogue	ACO President, President, BJC Medical Group	7.143%	ACO Participant Representative	Physician Groups LC d/b/a BJC Medical Group
Matthew	Broom	CMO, BJC Medical Group	7.143%	ACO Participant Representative	Physician Groups LC d/b/a BJC Medical Group
Jayceen	Ensrude	ACO Chief Administrative Officer; Vice President Ambulatory Operations	n/a	n/a	Physician Groups LC d/b/a BJC Medical Group
Ann	Abad	President, Missouri Baptist Medical Center	7.143%	ACO Participant Representative	Missouri Baptist Medical Center
Rick	Stevens	President, Christian Hospital	7.143%	ACO Participant Representative	Christian Hospital Northeast Northwest
Angela	Martin-Davis	President, BJC Home Care & BJC Behavioral Health	7.143%	ACO Participant Representative	BJC Home Care
Annette	Schnabel	President, Parkland Health Center	7.143%	ACO Participant Representative	Parkland Health Center
Deborah	Graves	President, Memorial Hospital Belleville Shiloh	7.143%	ACO Participant Representative	Memorial Hospital Belleville Shiloh
Tracy	Norfleet	Practicing Physician, BJC Medical Group	7.143%	ACO Participant Representative	Physician Groups LC d/b/a BJC Medical Group
Paul	Scheel	Washington University Vice Chancellor for Clinical Affairs & Chief Executive Officer, Faculty Practice Plan	7.143%	ACO Participant Representative	Washington University Vice Chancellor for Clinical Affairs & Chief Executive Officer, Faculty Practice Plan

Member First Name	Member Last Name	Member Title/Position	Member's Voting Power*	Membership Type	ACO Participant Legal Business Name, if applicable
Nathan	Moore	ACO Medical Director; Practicing Physician, BJC Medical Group	7.143%	ACO Participant Representative	Physician Groups LC d/b/a BJC Medical Group
John	Lynch	VP, Chief Medical Officer, Barnes Jewish Hospital	7.143%	ACO Participant Representative	Barnes Jewish Hospital
Hans	Moosa	Medical Director, Memorial Medical Group	7.143%	ACO Participant Representative	Physician Groups LC d/b/a BJC Medical Group
Judy	Mange	Medicare Beneficiary Representative	7.143%	Medicare Beneficiary Representative	

***Due to rounding, "Member's Voting Power" may not equal 100 percent**

Key ACO Clinical and Administrative Leadership:

ACO Executive: Douglas Pogue, M.D.

Medical Director: Nathan Moore, M.D.

Compliance Officer: Steven Bernstetter

Quality Assurance/Improvement Officer: Nathan Moore, M.D.

Associated Committees and Committee Leadership:

Committee Name	Committee Leader Name and Position
Quality Assurance and Improvement Committee	Dr. Nathan Moore, ACO Medical Director, Practicing Physician BJC Medical Group
Nominating Committee	Dr. Douglas Pogue, ACO Executive; President BJC Medical Group
Network Committee	Jayceen Ensruide, ACO Chief Administrative Officer, Vice President Ambulatory Operations BJC Medical Group

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

- Hospital employing ACO professionals
- Rural Health Clinic (RHC)

Shared Savings and Losses

Amount of Shared Savings/Losses:

- Fourth Agreement Period
 - Performance Year 2025, N/A
- Third Agreement Period
 - Performance Year 2024, \$0
 - Performance Year 2023, \$8,146,919.44
 - Performance Year 2022, \$6,372,485.00
 - Performance Year 2021, \$7,930,285.18
 - Performance Year 2020, \$9,387,015.55
 - Performance Year 2019, \$2,967,195.90
- Second Agreement Period
 - Performance Year 2018, \$0
 - Performance Year 2017, \$8,988,066.54
 - Performance Year 2016, N/A
- First Agreement Period
 - Performance Year 2015, N/A
 - Performance Year 2014, N/A
 - Performance Year 2013, N/A
 - Performance Year 2012, N/A

Shared Savings Distribution:

- Fourth Agreement Period
 - Performance Year 2025, N/A
 - Proportion invested in infrastructure: N/A
 - Proportion invested in redesigned care processes/resources: N/A
 - Proportion of distribution to ACO participants: N/A
- Third Agreement Period
 - Performance Year 2024, N/A
 - 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 2023
 - Proportion invested in infrastructure: 38%

- Proportion invested in redesigned care processes/resources: 29%
 - Proportion of distribution to ACO participants: 33%
- Performance Year 2022
 - Proportion invested in infrastructure: 30%
 - Proportion invested in redesigned care processes/resources: 26%
 - Proportion of distribution to ACO participants: 44%
- Performance Year 2021
 - Proportion invested in infrastructure: 20%
 - Proportion invested in redesigned care processes/resources: 22%
 - Proportion of distribution to ACO participants: 58%
- Performance Year 2020
 - Proportion invested in infrastructure: 20%
 - Proportion invested in redesigned care processes/resources: 27%
 - Proportion of distribution to ACO participants: 53%
- Performance Year 2019
 - Proportion invested in infrastructure: 20%
 - Proportion invested in redesigned care processes/resources: 31%
 - Proportion of distribution to ACO participants: 49%
- Second Agreement Period
 - 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: 20%
 - Proportion invested in redesigned care processes/resources: 13%
 - Proportion of distribution to ACO participants: 67%
 - 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
- First Agreement Period
 - 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

- o Performance Year 2014
 - Proportion invested in infrastructure: N/A
 - Proportion invested in redesigned care processes/resources: N/A
 - Proportion of distribution to ACO participants: N/A

- o Performance Year 2013
 - Proportion invested in infrastructure: N/A
 - Proportion invested in redesigned care processes/resources: N/A
 - Proportion of distribution to ACO participants: N/A

Note: Our ACO participated in multiple performance years during Calendar Year 2019. The distribution of shared savings reported for Performance Year 2019 therefore represents the distribution of the net shared savings across all performance years in 2019 and is shown under all agreement periods in which the ACO operated during Calendar Year 2019.

Quality Performance Results

2024 Quality Performance Results:

Quality performance results are based on the CAHPS for MIPS, CMS Web Interface, and Administrative Claims measure set collection types.

Measure #	Measure Name	Collection Type	Reported Performance Rate	Current Year Mean Performance Rate (SSP ACOs)
CAHPS-1	Getting Timely Care, Appointments, and Information	CAHPS for MIPS Survey	81.11	83.70
CAHPS-2	How Well Providers Communicate	CAHPS for MIPS Survey	94.79	93.96
CAHPS-3	Patient's Rating of Provider	CAHPS for MIPS Survey	92.70	92.43
CAHPS-4	Access to Specialists	CAHPS for MIPS Survey	74.34	75.76
CAHPS-5	Health Promotion and Education	CAHPS for MIPS Survey	65.64	65.48
CAHPS-6	Shared Decision Making	CAHPS for MIPS Survey	62.30	62.31
CAHPS-7	Health Status and Functional Status	CAHPS for MIPS Survey	73.21	74.14
CAHPS-8	Care Coordination	CAHPS for MIPS Survey	84.63	85.89
CAHPS-9	Courteous and Helpful Office Staff	CAHPS for MIPS Survey	93.56	92.89
CAHPS-11	Stewardship of Patient Resources	CAHPS for MIPS Survey	30.34	26.98



Measure #	Measure Name	Collection Type	Reported Performance Rate	Current Year Mean Performance Rate (SSP ACOs)
001	Diabetes: Hemoglobin A1c (HbA1c) Poor Control ¹	CMS Web Interface	6.61	9.44
134	Preventative Care and Screening: Screening for Depression and Follow-up Plan	CMS Web Interface	94.44	81.46
236	Controlling High Blood Pressure	CMS Web Interface	82.21	79.49
318	Falls: Screening for Future Fall Risk	CMS Web Interface	98.81	88.99
110	Preventative Care and Screening: Influenza Immunization	CMS Web Interface	93.48	68.60
226	Preventative Care and Screening: Tobacco Use: Screening and Cessation Intervention	CMS Web Interface	90.91	79.98
113	Colorectal Cancer Screening	CMS Web Interface	93.19	77.81
112	Breast Cancer Screening	CMS Web Interface	90.15	80.93
438	Statin Therapy for the Prevention and Treatment of Cardiovascular Disease ²	CMS Web Interface	96.17	86.50
370	Depression Remission at Twelve Months ²	CMS Web Interface	12.90	17.35
321	CAHPS for MIPS ³	N/A	6.79	6.67
479	Hospital-Wide, 30-Day, All-Cause Unplanned Readmission (HWR) Rate for MIPS Groups ¹	Administrative Claims	0.1541	0.1517
484	Clinician and Clinician Group Risk-standardized Hospital Admission Rates for Patients with Multiple Chronic Conditions ¹	Administrative Claims	---	37.00

[1] A lower performance rate corresponds to higher quality.

[2] For PY 2024, the CMS Web Interface measures Quality ID #438 and Quality ID #370 do not have benchmarks, and therefore, were not scored.

[3] CAHPS for MIPS is a composite measure, so numerator, denominator, and performance rate values are not applicable (N/A).

For previous years' Financial and Quality Performance Results, please visit: data.cms.gov

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.

- 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.