

**AMENDMENT 10a TO THE
FIRST AMENDED AND RESTATED RISK BEARING
PARTICIPANT AND PREFERRED PROVIDER AGREEMENT**

WHEREAS, OneCare Vermont Accountable Care Organization, LLC (“ACO”) and Participant or Preferred Provider (collectively “Parties”) are contracted to the First Amended and Restated Risk Bearing Participant and Preferred Provider Agreement (“Agreement”); and

WHEREAS, pursuant to the Agreement the Parties have been working collaboratively in ACO Programs to promote value-based care; and

WHEREAS, the Parties wish to continue this work;

NOW THEREFORE, the Parties agree as follows:

Attachment A to Amendment 10 is hereby amended and restated in its entirety in this Amendment 10a effective January 1, 2025.

This Amendment 10a is, in all other respects, affirmed and all provisions of the Amendment that are not specifically amended herein shall continue in full force and effect.

IN WITNESS WHEREOF, the Parties have caused this Amendment to be executed by the duly authorized officers:

ONECARE VERMONT ACCOUNTABLE CARE ORGANIZATION, LLC

By: _____ Date: _____
Abraham J. Berman
Chief Executive Officer

PARTICIPANT/PREFERRED PROVIDER

By: _____ Date: _____
Authorized Signature

Print Name: _____

Title: _____

Legal Business Name: _____

TIN: _____

ATTACHMENT A PROVIDER ACCOUNTABILITIES

The following are the Provider Accountabilities for Performance Year 2025 as referenced in this Amendment 10a (“OneCare Network Participants” shall refer to all Participants, Preferred Providers, and each of the individuals within each of those organizations performing ACO Activities):

1. Culture Accountabilities – to promote an engaged and aligned network in furtherance of achieving OneCare’s programmatic and strategic goals. All OneCare Network Participants will commit to and use good efforts to meet the Culture Accountabilities set forth below.
 - a. Good OneCare Citizenship – commit to OneCare’s organizational values listed below and use good efforts to act in alignment with them:
 - i. Collaboration – actively build a culture of partnership and teamwork;
 - ii. Excellence – passionately pursue excellence using data-driven results and a quality of focus;
 - iii. Innovation – lead through innovation, use courage to challenge existing systems and act as a catalyst for reform;
 - iv. Equity – seek out and attend to health disparities so that everyone can attain their full health potential; and
 - v. Communication – share information and ideas directly and clearly.
 - b. Engagement – participate in 50% or more of OneCare Value Based Care related meetings annually, to include within the home HSA and ACO wide. Examples include HSA Executive Consultations and HSA Value Based Care Interim Quality and Care Coordination Meetings. A full list will be posted on the provider portal.
 - c. Technology – beginning on or before 1/1/25, implement and utilize an Electronic Health Record that is compatible with CMS 2015 CEHRT standards. Actively pursue advanced interoperability capabilities to support data exchange with OneCare.
2. Health Care Transformation and Innovation Accountabilities – to promote strong performance in health care delivery in furtherance of achieving OneCare’s programmatic and strategic goals. All OneCare Network Participants will use good efforts to embrace and demonstrate innovation in OneCare’s Care Model; Quality Improvement; Health Equity and Total Cost of Care Improvement.
 - a. Care Model and Quality – OneCare will provide TIN and/or practice level performance reporting and a program of performance improvement to support attaining the accountabilities below:
 - i. Actively pursue meeting target in 75% or more of the Population Health Model quality metrics for which the practice qualifies.
 - b. Health Equity
 - i. Incorporate Social Determinants of Health (SDOH) screening into yearly patient visits, utilizing the CMS Health-Related Social Needs

- Screening Tool, and electronic data entry in an Electronic Health Record;
- ii. Make SDOH screening results an essential component of holistic patient care in your practice;
 - iii. Electronically report SDOH screening rates to OneCare using the CMS Health-Related Social Needs Screening Tool, questions one through fifteen; and
 - iv. No later than July 1, 2025, or as otherwise approved by OneCare's CMO, fully implement the plan developed with OneCare in 2024 to systematically address gaps in care related to the needs identified in SDOH screenings.
- c. Total Cost of Care Improvement
- i. At the practice level, perform at or above the OneCare target performance level on follow up after emergency department visits for people with high risk and with multiple chronic conditions (HEDIS FMC).

EXEMPLARY