# HEALTH POLICY COMMISSION NOTICE OF MATERIAL CHANGE FORM

Health Policy Commission Two Boylston Street 6<sup>th</sup> Floor Boston, MA 02116

#### **GENERAL INSTRUCTIONS**

The attached form should be used by a provider or provider organization to provide a notice of material change ("Notice") to the Health Policy Commission ("Commission"), as required under § 13 of M.G.L. c. 6D. To complete the Notice, it is necessary to read and comply with Bulletin 2013-1 issued by the Commission, Interim Guidance for Providers and Provider Organizations Relative to Notice of Material Change to the Health Policy Commission ("Interim Guidance"). The Interim Guidance may be obtained on the Commission's website at <a href="www.mass.gov/hpc">www.mass.gov/hpc</a>. For further assistance, please contact the Health Policy Commission at <a href="https://hpc-notice@state.ma.us">https://hpc-notice@state.ma.us</a>. This form is subject to statutory and regulatory changes that may take place from time to time.

#### WHO NEEDS TO FILE

This Notice should be submitted by any provider or provider organization with \$25,000,000 in net patient service revenue or more in the preceding fiscal year that is proposing a material change, as defined by the Interim Guidance. Notice must be filed with the Commission not less than 60 days before the effective date of the proposed change.

#### SUBMISSION OF NOTICE

One electronic copy of the Notice, in a portable document form (pdf), should be submitted to the following:

Health Policy Commission HPC-Notice@state.ma.us

Office of the Attorney General HCD-6D-NOTICE@state.ma.us

Center for Health Information and Analysis CHIA-Legal@state.ma.us

#### PRELIMINARY REVIEW AND NOTICE OF COST AND MARKET IMPACT REVIEW

If the information provided in the Notice is incomplete or if the Commission determines clarification of the information submitted is needed to make its decision, the Commission may require the notifying organization to submit such supplemental information within 30 days of receipt of the initial Notice.

The Commission will notify each notifying organization of its decision to proceed with a cost and market impact review within 30 days of its receipt of a completed Notice and all necessary supplemental information.

#### PUBLIC DISCLOSURE

Pursuant to Bulletin 2013-1 issued by the Commission, all information collected by the Commission in connection with a Notice shall be deemed to be a public record.

## **NOTICE OF MATERIAL CHANGE**

Date of Notice: July 22, 2013

1.	Name: New Englai	nd Quality	Care Allianc	e, Inc.						
2.	Federal TAX II	:	MA DPH Fa	cility ID#		<u> </u>	NPI	<u>:</u> #:	<u> </u>	
	04-3040427	1 1		Not App	licable			Not Appl	icable	
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. :	Contact Information							352 C 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		
3.	Business Address 1:	32	5 Wood Roa	d, Suite 210				:	:	:
4.	Business Address 2:									
5.	City: Braintree	: ::::::::::::::::::::::::::::::::::::		State:	MA		Zi	o Code:	02184	
5.	Business Website:	www.n	egca.org		:			i	į	·
7.	Contact First Name:	Jeffrey	::::::::::::::::::::::::::::::::::::::		(	Contact Last	Name:	Gross	i. :.:::: !	: :
8.	Title:	Vice Pr	esident, Bus	iness Develo	pment		. T		ti (1)	1 11.
9.	Contact Phone:	978-27	0-1631	FaraFia E		Extension	n:			
10.	Contact Email:	jgross1	@tuftsmedi	calcenter.or	g					
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### Description of Organization

11. Briefly describe your organization.

New England Quality Care Alliance, Inc. ("NEQCA") is a non-profit, Section 501(c)(3) corporation, whose mission is to create a partnership of community and academic physicians dedicated to providing comprehensive, innovative, high-quality and affordable health care that brings value to its patients and the community, and expands the teaching and research mission of NEQCA's affiliate, Tufts Medical Center. The NEQCA network consists of just over 1,000 community physicians and 550 physicians at Tufts Medical Center, including autonomous solo and group practices, independent practice associations and academic physicians who work together to improve health care quality and efficiency. On behalf of its network of affiliated physicians, NEQCA negotiates managed care risk contracts with various payors in furtherance of NEQCA's "Triple Aim" goal to improve the health of a population of patients; improve the patient's experience of care, including quality, access and reliability; and reduce the rate of growth of costs of care.

	Type of Material Change									
12.	Check the box that most accurately describes the proposed material change:									
	<ul> <li>Merger or affiliation with a carrier</li> <li>Acquisition of or acquisition by a carrier</li> <li>Merger with or acquisition of or by a hospital or a hospital system</li> <li>X Any other acquisition, merger, or affiliation between a provider organization and another provider organization where such acquisition, merger, or affiliation would result in an increase in annual net patient service revenue of the provider or provider organization of more than \$10,000,000</li> <li>Any clinical affiliation between a provider or provider organization with another provider or provider organization which itself has an annual net patient service revenue of more than \$25,000,000</li> <li>Formation of a partnership, joint venture, common entity, accountable care organization, or parent corporation created for the purpose of contracting on behalf of more than one provider or provider organizations</li> </ul>									
13.	What is the proposed effective date of the proposed material change?									
	Material Change Narrative									
14.	Briefly describe the nature and objectives of the proposed material change:  Healthcare South, P.C. ("HCS") is an association of approximately 26 physicians practicing in private offices in Cohasset, Hanover, Marshfield, Quincy, Scituate and Weymouth. Pursuant to an agreement signed by NEQCA and HCS on July 18, 2013, HCS's affiliated physicians and mid-level practitioners will become participating providers in NEQCA's network. HCS will participate in NEQCA programs to improve quality, efficiency and patient experience, including but not limited to quality assurance/improvement, risk management, utilization management/medical cost, and peer review programs, and grievance procedures required by NEQCA or an applicable third-party payor. HCS will delegate to NEQCA the authority to negotiate and enter into third-party payor risk contracts on behalf of HCS and its affiliated practitioners, and the parties will work together to support success under the payor risk contracts, including medical management programs, quality programs. and other initiatives aimed at driving meaningful improvements in clinical quality and efficiency of health care services rendered by NEQCA's participating providers.									
15.										
	Briefly describe the anticipated impact of the proposed material change:  The affiliation will allow NEQCA to support HCS as a member of an integrated physician network and to provide support to benefit local healthcare services in HCS's service area. The affiliation will allow HCS to implement the infrastructure that will be necessary for effective and efficient care coordination and transitioning to a population health management model of care. Access to NEQCA's expertise in population health management is expected to improve the delivery of high quality, cost effective health care to the patient population of HCS. According to the Total Medical Expenses Results from 2011 report issued by the Center for Health Information and Analysis in April 2013, NEQCA's TME hovers around the 50 <sup>th</sup> percentile, while South Shore Physician Hospital Organization's TME exceeds the 80 <sup>th</sup> percentile. HCS currently is associated with South Shore Hospital and its affiliated partners, Brigham and Women's Hospital and Boston Children's Hospital. NEQCA and HCS expect to work together to integrate care so that primary and secondary care continue to be provided locally in HCS's service area, and Tufts Medical Center and the Floating Hospital for Children become HCS's preferred tertiary partners, which we anticipate will result in reduced health care costs.									

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16.	Describe an	y other ma	aterial chang	ges you ant	icipate mak	ing in the n	ext 12 mor	iths:	I.II 		
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17.	Indicate the proposed m		· ·				ther mate	rials you h	ave submit	ted regarding	he
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