COLLABORATIVE CLINICAL ENGAGEMENT INCENTIVE PROGRAM EXHIBIT

This Collaborative Clinical Engagement Incentive Program Exhibit (this "***Exhibit***") to the Value Based Program Addendum is effective as of 9/1/2020 ("***Exhibit Effective Date***").

Provider shall be eligible for a population health management stipend ("***Collaborative Clinical Engagement Bonus***") under the Collaborative Clinical Engagement Incentive Program ("***CCE***") and under the terms and conditions as set forth herein for actively engaging with Health Plan and achieving performance improvements for a selected quality based measure as set forth below in Table 1. The parties to this Exhibit agree and acknowledge that compensation paid to Provider under this Progra

action, Plan reserves the right in its sole discretion to withhold, and to cause Provider to forfeit, any amount that would otherwise have been payable as a Collaborative Clinical Engagement Bonus hereunder attributable to that Practitioner.

4. Collaborative Clinical Engagement Bonus.

PMPM. As compensation for Collaborative Clinical Engagement Services furnished by Provider hereunder, Plan shall pay Provider a Collaborative Clinical Engagement Bonus in the total amount of:

$2.00 per Assigned Covered Person per month (itemized below)

a. Engagement Activity. One dollar ($1.00) per Assigned Covered Person per month
    a. Provider must meet with Plan engagement staff the agreed upon engagement frequency Provider selects in Schedule A.
    b. PMPM paid to Provider by the 15th of each month during each Contract Year

b. Quality Measure Outcomes. One dollar ($1.00) per Assigned Covered Person per month
    a. Provider must meet the quality

Funds distributed by Plan to Provider under this Exhibit during each Contract Year, combined with all other Incentive Payments made to Provider by Plan during such Contract Year, may not exceed thirty-three percent (33%) of total claims payments made by Plan to Provider during such Contract Year. Limitations to Incentive Payments for provider to remain under the 33% threshold shall be made in the sole discretion of Plan.

IN WITNESS WHEREOF, the parties hereto have executed this Addendum including Schedule A, effective as of the date first above written.

SHP: S XYZ HEALTH PLA Inc.

Authorized Signature

Printed Name: M Harvey Specter

Title: President & CEO

Signature Date: 09/16/2020

PROVIDER: SC ALLIANCE

Authorized Signature

Printed Name: S Luis Litt

Title: President

Signature Date: 8/26/2020

TIN: 74-12-3456789

COLLABORATIVE CLINICAL ENGAGEMENT
INCENTIVE PROGRAM EXHIBIT

SCHEDULE A

A. Collaborative Clinical Engagement Services may include, but are not limited to:

- Collaborate with Plan to assess current population health practices.
- Provide care coordination services to Covered Persons.
- Agree to meet with Plan engagement team on a regularly scheduled basis to evaluate Quality Measure performance, collaboration opportunities and population health best practices.
- Assist Health Plan with the collection of HEDIS data via medical record information.
- Provide regular reports regarding activities and outreach to Covered Persons.

Choose one Quality Measure set forth below in Table 1, to be evaluated for the quality bonus.

Table 1.

Quality Measure	Goal (Completion Rate = Network Average)	Requirement	Measurement	Provider Selection (Initial 1 Box)
Chronic Care Visits	89.35% (Completion Rate)	Coordinate care for this patient population by ensuring 3 or more visits are completed with a qualified physician	Percent of the provider's panel with one or more dominant chronic conditions that have three or more qualified physician visits	
Well Visit for Infant	67.46% (Completion Rate)	Schedule the patient with this care gap for a visit with their PCP and complete the wellness visit	Percent of provider's eligible panel that received 6 or more pediatric well-visits for infants from birth to 15 months	
Well Visit for Child 3 to 6 Years of Age	71.08% (Completion Rate)	Schedule the patient with this care gap for a visit with their PCP and complete the wellness visit	Percent of provider's eligible panel (children aged 3 to 6 years) that received at least 1 pediatric well-visit within the 12 rolling month period	
Post-Discharge Follow-Up	76.07% (Completion Rate)	Schedule the patient a follow up visit with their PCP within 30 days (preferably within 7 days) after discharge from an inpatient stay	Percent of the provider's panel that visited a physician office within 30 days post-discharge	
PCP Visit	82.05% (Completion Rate)	Ensure patients have at least 1 visit to their assigned PCP annually	Percent of the provider's panel visiting a Primary Care Provider	
Generic Rx	80.86% (Completion Rate)	When appropriate and available, prescribe a generic drug	Percent difference between a physician's expected generic prescription rate and current actual rate of generic drug prescriptions (from all physicians seen by the members)	
Manage PHN and EHN Member Lists	90.00% (Outreach Success Rate for Compliant Members - Minimum 2 Outreach calls per attempt)	Review a list of EHN an PHN members; outreach to these members once a month	Percent of provider's eligible panel placed on a care management plan with a successful outreach (if outreach was not successful, 2 attempts must be made per call as determined by care management plan (if 0 successful outreaches are made in a quarter, then member will be deemed ineligible for the measure)	
Colorectal Cancer Screening	10.73% (Completion Rate)	Review the care gap with your patient and assist in coordinating care; ensure completion of screening	Percent of provider's eligible panel that received colorectal cancer screening (colonoscopy-centric) within the 12 rolling month period	
Breast Cancer Screening	51.39% (Completion Rate)	Review the care gap with your patient and assist in coordinating care; ensure completion of screening	Percent of provider's eligible panel that received a mammogram within the 12 rolling month period	

B. Due to the constraints of COVID-19, virtual visits using a technology platform will substitute for in-person visits through December 31st, 2020.The necessity for virtual visits will be monitored on a monthly basis through the term of this agreement and conclude when deemed safe by the Centers of Disease Control, HHSC or Plan.

Choose one engagement goal set forth below in Table 2, to be evaluated for the Engagement Activity bonus.

Table 2.

Required Engagement Frequency	Engagement Percentage Goal	Time Requirement	Provider Selection (Initial 1 Box)
Virtual visits once a month with weekly calls	90% Visit Compliance 80% Call Compliance	Quarter day (2 hours) observation and half day (4 hours) strategic planning	SA
Virtual visits twice a month with weekly calls	80% Visit Compliance 80% Call Compliance	Quarter day (2 hours) observation and half day (4 hours) strategic planning	
Bi-monthly virtual visits with 2 calls a week (weekly planning and status)	100% Visit Compliance 85% Call Compliance	Half day (4 hours) observation and half day (4 hours) strategic planning	

Signature: 

Email: dummy.email@company.com

Signature:

Email: replacement.email@company.com