Our mission: To improve the health and well-being of people with significant needs by innovating, coordinating, and providing the highest-quality individualized care.

Since our very beginning—roughly 45 years ago!—CCA has been on a mission to improve the health and well-being of people with significant needs. Our mission is more than just words on paper; it’s what we practice every day. What began with a handful of visionary Massachusetts healthcare pioneers is now a fully integrated care system setting the standard for complex care.

From the New York Times Magazine to Forbes to the New England Cable Network, CCA continues to garner significant national attention for our unique and proven approach to care that improves health and quality outcomes while decreasing overall costs of care. And, we are especially proud that, for the fourth consecutive year, our One Care plan was a top-rated Medicare-Medicaid Plan in the country.*

We hope this Annual Report will help you discover more about how CCA’s uncommon care® is improving the lives of individuals with complex health needs. Some highlights from 2019 include:

CCA health plans were among the fastest-growing brands of their kind, ending 2019 with nearly 34,000 members—up 13% from 2018 and 94% since 2015. The organization also continued to develop strong provider partnerships, positioning CCA for geographic health plan expansion in the year ahead.

Revenues grew to $1.546 billion—a 23% increase over 2018—representing +101% growth since 2015. Over these past five years, CCA has made significant strategic investments, from our care management platform, to enterprise data management, to IT infrastructure and corporate initiatives—critical areas that empower our ability to grow and enhance the important work we do.

We also evaluated a series of strategic partnerships within and outside the Commonwealth to care for even more individuals with disabilities and chronic health needs. The Massachusetts Department of Public Health approved our application to expand our mobile integrated health solution (instED) statewide to serve our members and other individuals with complex needs.

With clinical and technological innovation ingrained in our mission, CCA also invested in LifePod, a remote patient monitoring device, and expanded a successful pilot to test its intuitive, proactive voice interface.

Of course, none of this would have been possible without our extraordinary workforce, which grew to 1,335 employees, an increase of nearly 10% from 2018. We are grateful for their dedication to making our mission a daily reality.

Sadly, we lament the passing of healthcare advocacy trailblazer, Robert Restuccia, a founding and long-standing director and former Chair of the CCA Board of Directors, as well as Sergio Goncalves, a CCA board member and Board Chair of our Commonwealth Community Care affiliate. These losses are felt deeply throughout the community and by all of us here at CCA.

We would also be remiss if we did not celebrate the enormous contributions of Board Chairman Thomas Lynch, who reached his 15-year term limit at the end of 2019. We are tremendously grateful for his commitment to our mission and valuable guidance in helping to make CCA the leader it is today.

We believe our great enterprise is well positioned to expand our capacity to improve the lives of people with significant health needs. The future will undoubtedly hold new challenges, but we can be confident that we will succeed … because we’re on a mission.

Robert P. Gittens  
Chairman of the Board

Christopher D. Palmieri  
President and Chief Executive Officer

* Based on the Center for Medicare & Medicaid Service (CMS) annual Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey (2019)
Enterprise Fast Facts

Financial strength

- Total revenue (SM)
  - 2015: $768M
  - 2016: $835M
  - 2017: $1,031M
  - 2018: $1,259M
  - 2019: $1,546M

  23% increase 2019 versus 2018

- Total revenue +101% 2019 vs. 2015

Membership growth

- 2015: 17,453
- 2016: 19,740
- 2017: 24,703
- 2018: 29,937
- Dec 2019: 33,903

  94% increase 2019 versus 2015

Organizational advancement

- Workforce: 1,335 in 2019
  - 62% clinical
  - 81% increase 2019 versus 2015

- Clinical visits
  - 2018: 215,000
  - 2019: 320,000
  - 45% increase

- Over 25,000 providers in the CCA network

- Behavioral Health Providers: 3,266
- Primary Care Physicians: 2,916
- Long Term Care Providers: 178
- Hospitals: 123

- 85% of all licensed providers in MA

Health Plans

- **CCA ONE CARE**
  - A Massachusetts demonstration Medicare-Medicaid Plan (MMP)
  - 22,513*

- **CCA SENIOR CARE OPTIONS**
  - HMO Special Needs Plan
  - 11,390*

Care Delivery

- **COMMONWEALTH COMMUNITY CARE**
  - CCA’s clinical affiliate, a specialized primary care practice with four locations: Boston, Lawrence, Springfield, and MetroWest Worcester
  - 1,400

- **CRISIS STABILIZATION UNITS**
  - CCA’s alternative to psychiatric hospitalization for members, with two locations: Carney Hospital in Dorchester and Marie’s Place in Brighton
  - 529

- **COMPLEX TRANSITIONAL CARE**
  - A one-of-a-kind, collaborative consult service to ensure smooth hospital discharges for our members
  - 1,374

- **PALLIATIVE CARE**
  - Integrated approach to address the special ongoing needs of CCA members with serious or life-limiting illnesses
  - 350

Health Solutions

- **instED**
  - CCA’s innovative and comprehensive mobile integrated health solution that responds to urgent care needs, providing high-intensity care in members’ setting of choice
  - 956

- **AVANTUS HEALTH**
  - Complex care coordination and delivery organization
  - 306

Innovation

- **WINTER STREET VENTURES**
  - CCA’s healthcare investment affiliate that identifies, accelerates and brings to scale innovations

Common Good

- **CENTER TO ADVANCE CONSUMER PARTNERSHIP**
  - Organization fostering authentic consumer partnership throughout the healthcare system

*As of 12/1/2019
uncommon care®
A focus on complex care for high-need individuals
CCA’s model of care is at the core of our mission. It grows out of a culture that values meaningful care partnerships, ensuring that every individual is treated as a whole person, and respecting each person’s dignity, autonomy, voice and choice. And it is based on our deep understanding of what puts people at risk, together with our unmatched ability to find and engage hard-to-reach individuals.

Community focus to ensure the most appropriate site of care
- Address unmet social determinants of health (SDOH), behavioral health and medical needs
- Integrate environmental and community supports
- Coordinate long-term services and supports
- Provide acute care through community paramedicine program
- Engage Crisis Stabilization Units

Seamless integration of care coordination, care delivery and care partnership
- Eliminate gaps in care by coordinating SDOH, transportation, Rx management and more
- Deliver comprehensive medical and behavioral health care
- Partner with members, providers and others across the continuum
- Leverage embedded relationships with external providers
- Provide interdisciplinary team-based care and communication

Innovation to address members’ unmet needs
- Invest in transformative technologies
- Advance predictive analytics for data-powered decision-making
- Augment direct care with virtual care, telehealth, videoconferencing and remote patient monitoring
- Foster a culture of continuous improvement

Trusting partnerships, appropriate utilization, better outcomes
- Reduction in gaps in care
- Decrease in ED visits, admissions and readmissions
- Reduced polypharmacy, improved medication adherence, routine review of safety and effectiveness
- Greater provider and member satisfaction
- Affordability and responsible stewardship of funds
CCA One Care
An integrated approach for those who need it most
A Massachusetts demonstration Medicare-Medicaid Plan (MMP) for individuals between 21 and 64 who are eligible for Medicare and MassHealth Standard or CommonHealth
2019 membership: 22,513*
For a fourth consecutive year, CCA’s One Care program was recognized as a top-rated Medicare-Medicaid Plan in the nation**

Growth and Achievements
Once again, in 2019 Commonwealth Care Alliance One Care was the fastest-growing plan of its kind in Massachusetts, based on net enrollment volume. CCA was also a leader nationally, with the second-highest net enrollment growth among all MMPs, making it the second-largest MMP demonstration plan in the country.*** In Massachusetts, CCA expanded our leadership in the west through an agreement with Valley Medical Group in Hampshire and Franklin Counties, enabling One Care access to their eligible patients in these two rural areas. Expanding in the south, we secured approval from Centers for Medicare and Medicaid Services and the Massachusetts Executive Office of Health and Human Services to fully enter Barnstable County with its first-ever One Care plan. Through our agreement with Cape Cod Health Care system, CCA will begin serving Barnstable’s eligible residents in 2020.

Clinical Results
CCA’s uncommon care® model has demonstrated success in building care partnerships with hard-to-reach members and improving care for people with significant needs, while also lowering the long-term costs of care by reducing avoidable hospital readmissions and institutional care.

| All-cause 30-day readmission rate for CCA One Care members from 2018 to 2019 | ↓7.5% |
| Emergency Department visits for CCA One Care members from 2018 to 2019 | ↓3.1% |
| Acute admissions for CCA One Care members from 2018 to 2019 | ↓1.8% |

*As of 12/1/2019
**Based on the 2016, 2017, 2018 and 2019 Medicare Advantage and Prescription Drug Plan CAHPS surveys conducted by the U.S. Centers for Medicare & Medicaid Services

Who are our members?
75.6% have a physical and/or behavioral health disability
68.8% have severe mental illness, such as schizophrenia, bipolar disorder or severe depression (excluding substance-use disorder)
31.9% have a substance-use disorder (excluding tobacco and nicotine)
9.3% have a major physical disability (such as paralysis, spinal cord injury, multiple sclerosis, muscular dystrophy, cerebral palsy, or ventilator dependency)
7.6% have been documented as homeless during their enrollment
7x the average cost of care required for One Care-eligible population averaged $3,306 per month, seven times the average for MassHealth MCO patients in Massachusetts

One Care member Justin has been receiving care from CCA since 2014
Who are our members?

72.0% of CCA Senior Care Options members are nursing home certifiable, yet are able to live safely and independently at home with our care and support.

68.2% have four or more chronic conditions.

60.7% have a physical and/or behavioral health disability.

59.3% primarily speak a language other than English.

53.9% have diabetes.

10.4% have a major physical disability (paralysis, spinal cord injury, multiple sclerosis, muscular dystrophy, cerebral palsy or ventilator dependency).

CCA Senior Care Options

Helping seniors with chronic health needs live safely at home

A HMO Special Needs Plan for people who are 65 and older and eligible for MassHealth Standard

2019 membership: 11,390*

Growth and Achievements

In 2019, Commonwealth Care Alliance Senior Care Options (SCO) was once again one of the fastest-growing brands of its kind, based on net enrollment volume. Outpacing SCO category growth, CCA grew market share and maintained its dominance in Western Massachusetts. We expanded our partnership with UMass Memorial Health System in Worcester that will enhance our SCO program in Central Massachusetts, adding approximately 200 primary care providers to our SCO network, an essential step for organizational growth in this key region. We also added a SCO contract to our existing South Shore Hospital arrangement, ensuring continued growth and expanded access for members in eastern Norfolk and Plymouth Counties.

Clinical Results

By successfully engaging SCO members in our uncommon care® model, CCA SCO improves their quality of life while also reducing long-term costs attributed to hospital admissions and ambulatory care.

<table>
<thead>
<tr>
<th>Measure</th>
<th>2018</th>
<th>2019</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>30-day hospital readmission rate for CCA SCO members from 2018 to 2019</td>
<td>18.2%</td>
<td>16.4%</td>
<td>↓9.2%</td>
</tr>
<tr>
<td>Acute admissions per 1,000 for CCA SCO members from 2018 to 2019</td>
<td>6.1%</td>
<td>5.5%</td>
<td>↓10.5%</td>
</tr>
<tr>
<td>Inpatient expenses per member per month for CCA SCO members from 2018 to 2019</td>
<td>$18.2%</td>
<td>$16.4%</td>
<td>$16.4%</td>
</tr>
</tbody>
</table>

Who are our members?

72.0% of CCA Senior Care Options members are nursing home certifiable, yet are able to live safely and independently at home with our care and support.

68.2% have four or more chronic conditions.

60.7% have a physical and/or behavioral health disability.

59.3% primarily speak a language other than English.

53.9% have diabetes.

10.4% have a major physical disability (paralysis, spinal cord injury, multiple sclerosis, muscular dystrophy, cerebral palsy or ventilator dependency).

30-day hospital readmission rate for CCA SCO members from 2018 to 2019: 18.2% (↓9.2%)

Acute admissions per 1,000 for CCA SCO members from 2018 to 2019: 6.1% (↓10.5%)

Inpatient expenses per member per month for CCA SCO members from 2018 to 2019: $18.2% (↓16.4%)

* As of 12/1/2019
COMPLEX TRANSITIONAL CARE

When CCA’s high-need members are admitted to a hospital for medical or surgical care, their complex needs require specialized attention—both in the hospital and when they transition back to the community. That is the purpose of CCA’s Complex Transitional Care Program, formerly known as the Hospitalist Program. This one-of-a-kind, collaborative consult service integrates our members’ social needs into medical decision-making, and coordinates with members’ CCA care partners to ensure smooth hospital discharges. In 2019, the Complex Transitional Care program served 1,374 members and intervened on 3,068 hospital visits.* Initial observations demonstrated that the members who were served by the program had reductions in ED visits, in transfer rates to inpatient and observation beds and in readmission rates.

Results

PALLIATIVE CARE

The Palliative Care program was expanded in July 2019 to address the special ongoing needs of CCA members with serious or life-limiting illnesses as they progress from serious illness management to end-of-life care needs. Predictive analytics and artificial intelligence help identify members who may benefit from services offered by the Palliative Care program at an earlier stage of their serious illness. Through the program, these members, their families, caregivers and healthcare providers have access to a range of innovative, high-quality and individualized services that have helped members avoid unnecessary and unwanted inpatient admissions, emergency room visits and improved medication utilization. In 2019, the Palliative Care team, which consists of palliative care–certified physicians, advanced practitioners, nurses and social workers, engaged with over 350 members in over 2,000 encounters across the state.

Results

For end-of-life care, the program had a 5% reduction in unnecessary medical cost per member per month, resulting in approximately $1.5M in savings.

* May–December, 2019 data
Health Solutions

instED

With non-medical emergencies accounting for 35% of emergency department visits, CCA created instED to respond to patients’ urgent care needs by providing high-intensity care outside the ED and in their setting of choice. In 2019, CCA received approval from the Massachusetts Department of Health to expand this innovative and comprehensive mobile integrated health solution statewide, serving not only our own members but also more than 300 participants in Upham’s Corner Health Center’s Program of All-Inclusive Care for the Elderly. This year, instED paramedics completed 1,494 in-home visits in response to the urgent care needs of over 956 patients. This was double our instED visits from 2018.

Results

- 87.6% of visits avoided an emergency department or inpatient admission within 3 days
- $2.4M estimated cost savings to CCA in 2019
- 9.38 out of 10 were likely to recommend instED to family or friends

Individuals with chronic and mental conditions account for 86% of the $2.7 trillion in annual healthcare expenditures.* Avantus Health, a national complex care coordination and delivery organization, leverages CCA’s expertise to help risk-bearing entities improve their performance among these historically challenging populations. Avantus goes beyond conventional care management to deliver the only care model designed—and proven effective—for patients with complex medical, behavioral health and SDOH needs.

Our ongoing collaboration with Partners HealthCare continues to produce outstanding results. In 2019, it grew to include 306 of Partners’ highest-risk patients and CCA’s direct care and care coordination for these patients expanded into Western Massachusetts.

In 2019, CCA invested in LifePod and expanded a pilot to test LifePod’s intuitive proactive voice interface. Members averaged nine interactions per day, demonstrating increased member engagement with care plans and a reduced need for phone calls and in-person visits. In addition, both CCA members and care partners reported high levels of satisfaction.

In April 2019, WSV portfolio company Cityblock Health demonstrated valuable business advancement by raising substantial Series B financing. Cityblock aims to deliver better care to neighborhoods with poor access to health care services by partnering with community-based organizations, health plans, and other risk-bearing providers. Launched in 2017 by two former CCA colleagues, Cityblock now operates in four markets across the US and has contracts with five health insurers.

Winter Street Ventures (WSV) is CCA’s healthcare investment affiliate that identifies, accelerates and brings to scale innovations that advance CCA’s core mission of improving the health and well-being of people with significant needs. Late in 2019, WSV announced the addition of Jonathan Gordon as Managing Director. His 20 years of experience in healthcare, startups and investing further elevates WSV investments and innovations.

In 2019, CCA invested in LifePod and expanded a pilot to test LifePod’s intuitive proactive voice interface. Members averaged nine interactions per day, demonstrating increased member engagement with care plans and a reduced need for phone calls and in-person visits. In addition, both CCA members and care partners reported high levels of satisfaction.

“...

CCA member and LifePod pilot care recipient Joan

Consumer Centricity

THE CONSUMER VOICE ADVISORY COUNCIL
The Consumer Voice Advisory Council was created by CCA’s Board of Directors to ensure that the voice of our consumer is embedded into CCA’s overarching governance structure in a meaningful way. The Council’s goal is to incorporate the experiences of our members, patients and advocates into the design, operation and monitoring of the enterprise in furtherance of its mission to improve the health and well-being of people with significant needs. With members from local and national advisory groups, the Council is reflective of the populations that CCA so proudly serves.

SUPPORT FROM THE ROBERT WOOD JOHNSON FOUNDATION
In late 2019, CCA was awarded a grant of $1.77 million from the Robert Wood Johnson Foundation, nationally renowned for its passionate commitment to improving healthcare in America, especially for those most in need. The grant was awarded to support the work of CCA’s Center to Advance Consumer Partnership through a 30-month Early Adopter Program that includes two beta test organizations beginning in 2020.

CCA members actively participate as consumer partners, translating their lived experiences into insights that improve quality, reduce cost and improve care experience. Through the work of the CACP and the support of the Robert Wood Johnson Foundation, CCA has the opportunity to lead the paradigm shift of healthcare in this nation, collecting evidence that our approach not only reduces costs for the larger healthcare system, but also generates better outcomes for people with complex health needs.  

Christopher D. Palmieri
CCA President and Chief Executive Officer

SOCIAL DETERMINANTS OF HEALTH
In 2019, social determinants of health continued to dominate the national conversation about improving the health of populations. Since the earliest days of our health plans, social determinants have been at the core of our nationally recognized care model, which puts the emphasis on addressing unmet social and behavioral health needs. Depending on each member’s needs, care plans may be individualized to address behavioral health, food and housing security, accessing community resources, crisis support, transportation and more.

<table>
<thead>
<tr>
<th>SDOH Supports</th>
<th>CCA Members Impacted</th>
<th>Total Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transportation</td>
<td>15,905 total number of distinct members who were provided rides</td>
<td>1,026,289 total number of transportation trips provided to members</td>
</tr>
<tr>
<td>Physical Environment</td>
<td>6,209 members provided with home modifications or environmental controls</td>
<td>65,917 total home modifications or environmental controls provided to members (including air conditioners)</td>
</tr>
<tr>
<td>Food</td>
<td>3,088 members helped by meal-delivery program</td>
<td>731,250 medically and non-medically tailored meals</td>
</tr>
<tr>
<td>Health Outreach</td>
<td>4,860 members served through non-traditional supports</td>
<td>47,907 non-traditional care services (includes peer support groups, acupuncture, massage therapy, and in-home behavioral health therapy)</td>
</tr>
</tbody>
</table>

22,385 members received CCA assistance with at least one social support in 2019
Core Values

Integrity
Honor our commitment to our mission and values, holding ourselves to the highest ethical standards of behavior.

Dignity
Respect the inherent value and personal choices of all stakeholders, including patients, members, families, colleagues, providers, advocates and others.

Compassion
Engage all stakeholders with empathy, caring and understanding.

Excellence
Exceed expectations through teamwork and innovation to deliver best-in-class service to the people we care for and the customers and providers we work with.

Stewardship
Manage people and resources responsibly to maximize our contribution to the health of our members, patients, customers and providers.

Community
Advocate and support social change to promote a culture of collaboration, diversity and inclusiveness.

Partnership
Collaborate actively with patients, members and providers to design and improve our care.

Innovation
Invest in creative solutions that improve outcomes for patients, members and providers.

Leadership

Christopher Palmieri, President and Chief Executive Officer
Alfred Enagbare, PhD, Chief People Officer
Lisa Fleming, Chief Legal Officer
Sarah Garrity, Chief Marketing Officer
Robert MacArthur, MD, Chief Medical Officer
Courtney Murphy, Chief Operating Officer
Mihir Shah, Chief Financial Officer

Board of Directors

Robert Gittens, Chair; Executive Director, Cambridge Family & Children’s Service
Carol Raphael, Vice Chair; Special Advisor, Manatt, Phelps & Phillips, LLP
Charles Carr, Legislative Liaison, Disability Policy Consortium, and Principal, Charlie Carr Consulting
Len Fishman, Director, Gerontology Institute, McCormack Graduate School of Policy and Global Studies, UMass Boston
Tejal Gandhi, MD MPH CPPS, Chief Safety and Transformation Officer, Press Ganey Associates LLC
Ira Gottlieb, Senior Advisor, Mazars USA LLP, and Chief Restructuring Officer, United Medical Center
Leslie Kirwan, Dean for Administration and Finance, Faculty of Arts and Sciences, Harvard University
David Klein, MBA, Special Advisor to the Medical Center CEO, Professor of Public Health Sciences, Executive Professor of Health Care Management, University of Rochester
Christopher Koller, President, Milbank Memorial Fund
Joseph Paduda, Principal, Health Strategy Associates, LLC
Christopher Palmieri, President and Chief Executive Officer, Commonwealth Care Alliance
J. Garrett Parker, Jr., Retired; Former Chief Financial Officer, Neighborhood Health Plan
Nancy Turnbull, Senior Associate Dean for Professional Education and Senior Lecturer on Health Policy, Harvard T. H. Chan School of Public Health