

# Mission in Motion

2021 ANNUAL REPORT





## Our mission

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

More than at any time in our history, Commonwealth Care Alliance® (CCA) today is putting its *mission in motion*. Starting here in our home state and expanding nationwide, we've launched a bold, multi-year strategy of mission-aligned expansion and diversification that will help us extend our community-based, individualized care to potentially hundreds of thousands more individuals with complex needs.

Having risen to the myriad challenges of the pandemic, we are deepening our commitment to our members and stakeholders in Massachusetts by broadening our health plan offerings. We have introduced new Medicare Advantage health plans designed to serve those who narrowly miss Medicaid's thresholds for income or assets. For the first time, we stepped outside our Commonwealth borders, introducing our *uncommon care*® model into neighboring Rhode Island via three new health plans serving individuals with significant health needs.

We acquired Vitality Health Plan of California and completed a majority stake acquisition of Reliance Healthcare in Michigan, including its Medicare plans, accountable care organization (ACO), and physician organization, all supporting our goal of bringing expert care to high-need populations. We've also formed a joint venture with SCAN Health Plan to launch myPlace Health, an integrated care delivery organization that will provide personalized care to older adults through the PACE (Program for All-Inclusive Care for the Elderly) model.

The performance metrics for 2021 tell a story of exceptional growth for CCA:

- At year-end CCA was serving nearly 61,000 individuals across four states, representing an increase of 145% over the past five years
- Our \$2.039B in revenues represented a gain of 13% year-on-year and almost 100% since 2017
- Despite the tight labor market, our workforce of more than 1,600—over two-thirds of whom are clinical—grew 13% this year and 50% over the past five years

Yet amid all this extraordinary growth, we never took our eyes off our mission to innovate, coordinate, and provide the highest-quality care:

- In Massachusetts, our Senior Care Options plan was awarded five stars, the highest possible quality rating from the Centers for Medicare and Medicaid Services (CMS)<sup>1</sup>
- For the sixth straight year, CCA One Care (Medicare-Medicaid Plan) received a top rating in the CMS national consumer survey of overall quality<sup>2</sup>
- Our new Medicare Advantage plans in Massachusetts received interim accreditation from the National Committee for Quality Assurance (NCQA)<sup>3</sup>

In 2021 we also continued to build on our outstanding record of partnership with state and local governments. Having provided so much assistance to Massachusetts during the COVID-19 pandemic for vaccinating the homebound and housing the homeless, CCA was once again called upon by the Commonwealth to help create a first-of-its-kind, "low-threshold" temporary housing community for Boston's chronically homeless population.

We're also proud that our company-wide commitment to building an inclusive and diverse culture continues to bear fruit. The Boston Globe ranked CCA #1 on its list of Top Places to Work: Diversity Issue in 2021.

Delivering high-quality care and service while embarking on such bold growth initiatives requires a workforce of exceptional talent, drive, and resourcefulness. We are honored to be leading such an outstanding, dedicated team. They are the ones who are truly putting the CCA *mission in motion* each and every day.

And they are one of the reasons we remain so confident that – as great a year as 2021 was – the best is yet to come for Commonwealth Care Alliance.



*Robert P. Gittens*

**Robert P. Gittens**  
Chair of the Board



*Chris Palmieri*

**Christopher D. Palmieri**  
President and Chief Executive Officer

<sup>1</sup> Every year, Medicare evaluates plans based on a 5-star rating system.

<sup>2</sup> Based on the 2016, 2017, 2018, 2019, 2020, and 2021 Consumer Assessment of Healthcare Providers and Systems (CAHPS) surveys.

<sup>3</sup> NCQA is an independent, non-profit organization dedicated to improving health care quality. At this time, only CCA Massachusetts plans have been assessed and rated.

# Growing our mission nationwide

## In 2021 Commonwealth Care Alliance (CCA) began an aggressive expansion of our proven care model coast to coast

For over four decades CCA has been assembling all the scalable solutions and skill sets needed for successful expansion: outstanding member experience and analytics; high-touch care management and care quality; purpose-built IT and operations systems; state and federal partner engagement; strong leadership and organizational readiness. These expansion moves—which already bring our membership to almost 61,000 and the potential to reach hundreds of thousands more—exemplify our multi-year, mission-driven strategy of geographic diversification and growth to transform the nation’s healthcare for those with the most significant needs.



“

...We believe in our community-based, uncommon approach to care. There is a clear demand for choice in healthcare for individuals who have traditionally been offered extremely limited options, and we are thrilled to bring our pioneering, proven, and perfected care model to individuals in California, Michigan, and Rhode Island for the first time.

Christopher D. Palmieri  
President and Chief Executive Officer



In our home state, where we now serve over 41,000 members, CCA has built a solid foundation for expansion throughout the nation. Our model of *uncommon care* has earned national recognition for its success in improving the care of people with the most significant health needs, including multiple chronic conditions, disabilities, and social determinants of health. Innovating to close critical gaps in care, we have created a tightly integrated set of complex care solutions.



Supporting our mission of bringing our validated care model to more individuals and communities, CCA for the first time began offering a range of Medicare plans in neighboring Rhode Island. Starting in October, we launched two Medicare Advantage plans and a Medicare Special Needs plan. Earlier in 2021 we laid the groundwork for this move by building out a strong provider network, and paved the way with high-impact media announcing, “*uncommon care* is coming.” The plans became effective for enrollment on January 1, 2022.



At year-end, CCA acquired a majority stake in Reliance Healthcare in Michigan—including three Medicare plans, an ACO, and a 600-doctor physician organization. Much like CCA, Reliance has deep provider roots and strives to improve the health of patients by centering health plans around a patient’s relationship with their primary care provider. Leveraging these assets, Reliance served nearly 19,000 high-need individuals in 2021 across six counties in the southeastern part of the state. Additional county expansion was approved for 2022.



CCA also completed its acquisition of Vitality Health Plan of California. Vitality operates two Medicare plans primarily serving northern California—including one plan designed for low-income beneficiaries, aligned with the CCA mission of improving the health and well-being of people with significant needs. The Vitality acquisition is the first of what we anticipate will be multiple opportunities in California, where we expect to work closely with the state’s new Office of Medicare Innovation and Integration to support initiatives aimed at high-need populations.



At the end of 2021, CCA partnered in a joint venture with SCAN Health Plan—another healthcare leader with extensive experience serving low-income and high-needs older adults—to launch myPlace Health, an integrated care delivery organization that will specialize in providing personalized care to those who wish to keep living in their homes and communities for as long as possible. Services will be delivered through the PACE (Program for All-Inclusive Care for the Elderly) model.

# Deepening our roots in Massachusetts

It is our deep and abiding commitment to our mission in Massachusetts that is making it possible for us to extend our care model into more communities nationwide. In 2021, that commitment was manifested in an exceptional record of continued performance and growth here at home, led by new provider partnerships and a strong commitment to the communities we serve.



## We expanded our geographical reach and our health plan portfolio.

This year CCA expanded our One Care plan offering into Berkshire County—a major advance in improving access and health outcomes for residents with significant needs—and opened a regional support center in Wakefield that serves as a home base for CCA clinical and administrative team members in the Boston area. We introduced two new Medicare Advantage plans (MAPD) designed to complement our existing offerings by targeting those with significant needs who narrowly miss Medicaid income or asset thresholds. The plans have received interim accreditation from the National Committee for Quality Assurance (NCQA).

## We broadened access to care in Southeastern Massachusetts with Southcoast® Health.

In October, CCA announced a new provider agreement with Southcoast Health, the largest provider of primary and specialty care serving communities across Southeastern Massachusetts and Rhode Island. The agreement gives CCA plan members access to more than 700 providers at Southcoast's primary care practices and three regional hospitals.

## We achieved outstanding health outcomes in CCA One Care and CCA Senior Care Options.

Despite the significant challenges of the COVID-19 pandemic and its negative impact on people's mental health, such as creating new barriers for those already suffering from behavioral health conditions and substance use disorders, CCA successfully engaged with members over the past year, improving outcomes as we helped them stay safely and independently at home.



<sup>1</sup> Percent of ICO + SCO members weighted together who have at least 1 qualifying touch by a care team member within a given month

<sup>2</sup> Combined CCA One Care and Senior Care Options rate per 1,000 Massachusetts members

## We grew CCA One Care while maintaining top quality ratings

- An integrated approach to care for those who need it most, this Massachusetts demonstration Medicare-Medicaid plan (MMP) is for individuals between 21 and 64 who are eligible for Medicare and MassHealth Standard or CommonHealth.
- In 2021, CCA One Care was once again the fastest-growing plan of its kind by net enrollment volume in Massachusetts and was the #2 MMP plan in the U.S. in total membership.

★ For the sixth consecutive year the plan earned a top rating in the annual consumer survey by the Centers for Medicare & Medicaid Services (CMS).



### Who are our One Care members?

2021 membership: **28,582<sup>2</sup>**

**72.6%**  
have a physical or behavioral health disability

**66.9%**  
have severe mental illness, such as schizophrenia, bipolar disorder, or severe depression (excluding substance-use disorder)

**25.1%**  
have a substance-use disorder (excluding tobacco and nicotine)

**7.5%**  
have a major physical disability (such as paralysis, spinal cord injury, multiple sclerosis, muscular dystrophy, cerebral palsy, or ventilator dependency)

**5.5%**  
have been documented as homeless during their enrollment

**↑10%**  
the average cost of care required for One Care-eligible population averaged \$3,473 per month, 10% higher than the national average for dual eligibles\*



#### VIDEO HIGHLIGHT



### Watch Ray's Story

See how CCA helped this courageous individual overcome serious medical, behavioral, and social issues

[▶ WATCH VIDEO](#)

\* Source: MedPAC data book. Expense data was available for 2019, annual trend of 3% was applied to arrive at 2021 expense.

## We grew CCA Senior Care Options while earning a 5-star rating

- Helping seniors live independently at home despite chronic needs, this HMO Special Needs Plan is for people who are 65 and older and eligible for MassHealth Standard.

★ The Centers for Medicare & Medicaid Services (CMS) awarded the CCA Senior Care Options (SCO) plan 5 stars—its highest possible rating—for 2022.<sup>1</sup>



### Who are our SCO members?

2021 membership: **12,773<sup>2</sup>**

**92.7%**  
of members receiving CCA care and support for at least nine years are still living in their home or community

**70.8%**  
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

**59.0%**  
primarily speak a language other than English

**56.9%**  
have a physical or behavioral health disability

**49.9%**  
have diabetes

**43.6%**  
have four or more chronic conditions

**7.7%**  
have a major physical disability (paralysis, spinal cord injury, multiple sclerosis, muscular dystrophy, cerebral palsy, or ventilator dependency)



<sup>1</sup>Every year, Medicare evaluates plans based on a 5-star rating system  
<sup>2</sup>As of 12/1/2021

# Delivering *uncommon care*

At the core of the CCA mission is our unique and proven *uncommon care* model, which leverages our role as both payer and provider to deliver complex care for high-need members. It's an innovative, fully integrated, consumer-centric approach that improves quality, health outcomes, and member experience while lowering the overall cost of care.

## CCA Primary Care

Because our health plan members have such significant and complex needs, CCA has developed specialized primary care facilities—welcoming environments where patients can receive comprehensive care tailored to people with disabilities, age-related conditions, behavioral health, or social support needs. In 2021 CCA Primary Care served approximately 1,300 patients through 10,920 face-to-face visits, 4,386 virtual visits, and over 50,000 telephonic encounters. In 2022 we will open a new, state-of-the-art Boston facility featuring an engagement center where members can access wellness education and find community and peer support.



## Marie's Place® Crisis Stabilization Unit

Individuals with behavioral health or substance use disorders are often in critical need of a community-based alternative to inpatient admission at a psychiatric facility. That is why CCA pioneered our Marie's Place Crisis Stabilization Unit—the only facility of its kind in Massachusetts—which provides respite care to CCA members in a structured setting where we can maintain patient safety, improve recovery, and promote a safe return to the community. Though ongoing COVID-19 protocols required us to reduce capacity in 2021, Marie's Place provided 2,150 patient days of care to 430 members. In 2022 CCA plans to broaden and enhance the current CSU model to increase patient access to medical and psychiatric services.



### Results



## Palliative Care

The CCA Palliative Care program focuses on reaching members with serious illness early in their care trajectories, to better help them and their caregivers make informed decisions about treatment choices and align their treatment with their goals. The organization also serves as a consultative model for CCA, helping to improve palliative skills across the organization by providing training in how to have quality goals of care conversations—a project for which CCA was nationally recognized by the Center for Advancing Palliative Care. In 2021 CCA Palliative Care program served 670 patients and members through over 8,500 visits and encounters, providing \$2.2 million in cost savings to CCA.



CCA received recognition from the John A. Hartford Foundation's Tipping Point Challenge for improving its approach to advance care planning (ACP). "Promoting Primary Palliative Care Through Education and Standardized Documentation" was integrated into the CCA chronic condition self-management program for congestive heart failure and chronic obstructive pulmonary disease. This solution has supported clinicians in addressing ACP, integrating members' goals of care into their care plans.<sup>1</sup>

## Complex Transitional Care

This hospital-to-home program extends our deep expertise in complex care into the acute care setting by partnering with hospitals to improve member experience, outcomes, and cost of care. We identify CCA members presenting to the emergency department in real time, and once they are admitted, we collaborate with hospital staff to assess unmet medical, behavioral, and social needs. Our multidisciplinary teams of clinicians and community health workers now include behavioral health clinicians, building relationships with emergency service providers and providing a seamless link to the CCA Crisis Stabilization Unit.

### Results

In 2021 the program expanded to cover four of our highest-volume hospitals accounting for more than **14,000** ED visits annually for more than **6,700** patients. A CCA medical economics study demonstrated a reduction in admission rates at two hospitals, resulting in net savings of approximately **\$1 million** annually.

# Extending care into the community

Through nimble and effective partnerships with state and local governments, CCA continued to lead the way in meeting the challenges of the pandemic with programs that extend care beyond our own membership.

## Supporting Low-Threshold Housing for Chronically Homeless Individuals

Like many American urban centers, Boston is experiencing a homelessness and substance use disorder crisis—manifested most dramatically by the encampment at the intersection of Massachusetts Avenue and Melnea Cass Boulevard (“Mass & Cass”). To mitigate this issue, CCA was approached by the Commonwealth to create a first-of-its-kind temporary housing community on the former Shattuck Hospital campus in Jamaica Plain. CCA is collaborating with the city and state to manage 18 cottages (“low-threshold housing”) serving up to 25 guests, providing an array of health and human services with the goal of helping guests transition to permanent housing. This partnership program generated widespread media coverage, a sample of which may be accessed below.

### MEDIA HIGHLIGHT

#### WCVB-TV

Watch CCA President & CEO Chris Palmieri and Lauren Easton, VP Integrative Program Development & Clinical Innovation, discuss our role in this program.

[WATCH NOW](#)



## State-Wide Home-Bound COVID-19 Vaccination Program

In another highly successful collaboration with the Commonwealth of Massachusetts, CCA continued providing COVID-19 vaccinations both for our own members and for other homebound individuals statewide. Through this collaborative effort, CCA teams provided training to more than 10 state agencies, deployed professionals throughout the state, and electronically tracked and supported the program’s extraordinary results:

- 5,400 vaccinations administered across 12 of the 14 counties, including nearly 500 family members of home-bound individuals
- 320 individual cities and towns served by the program
- 130+ clinicians performed vaccinations

### MEDIA HIGHLIGHT

#### Health Payer Intelligence

Read the story about how CCA led the Commonwealth’s mission to vaccinate homebound individuals

[READ NOW](#)



## COVID-19 Isolation & Recovery Centers

In 2020, CCA began a collaboration with the Commonwealth of Massachusetts to develop—and then manage—a program to temporarily house the state’s COVID-positive, marginally housed population in hotel sites that were transformed into COVID-19 Isolation and Recovery Centers. Since then, CCA has served more than 6,000 individuals in these centers, with each guest spending an average of 10 days. After recovering and receiving behavioral health and other services, guests were safely discharged, with more than 92% accessing additional services such as housing and substance use disorder services. Sites closed or re-opened to meet changing demand as case loads fell or rose during the pandemic. All sites closed by April 1, 2022.

## Collaborating with Community Partners to Manage Care During the Pandemic

Heading into the second year of the pandemic, it remained essential for CCA to work closely with our provider partners, health homes, and other community-based organizations to ensure members’ safety and security. Leveraging the trusted relationships they had built with our members, these partners were able to quickly determine member needs, offer support, and secure services. Together we formulated new workflows and protocols to meet evolving challenges, balancing a return to in-person home visits with precautionary safety measures so these valued partners could be there for our members during these trying times. In June 2021, we expanded our Health Homes program to include Eliot Community Human Services, a well-established network provider offering behavioral health and community-based services to vulnerable populations.



# Innovating to close critical gaps in care

Innovation is hard-wired into CCA culture. From our earliest days, we have pushed clinical and technological envelopes to realize our vision of transforming healthcare for those with significant health needs.

## Prioritizing Social Determinants of Health (SDOH)

Long before SDOH became a buzzword in healthcare, CCA recognized that as much as 80% of our members' unmet needs were non-medical. That is why our nationally recognized *uncommon care* model has always focused so strongly on closing social and behavioral gaps in care. Each member's care plan can be individualized to address unmet needs for housing or food security, crisis support, transportation, and more. In 2021 almost 60% of our members received CCA assistance with at least one social support.

### CASE STUDY

## A Community Partnership to House and Care for Complex Patients

**NEJM Catalyst** Homelessness can lead to poor health, especially among older adults. To help members who are experiencing homelessness or housing insecurity gain permanent housing, CCA has partnered with Hearth, a community-based housing organization. CCA provides integrated health and social services, including on-site medical care, and Hearth offers housing resources, knowledge of home safety, and supportive services. More than 300 CCA members have been housed in Hearth facilities since the partnership began in 2004. A study detailing this partnership was published by the *New England Journal of Medicine Catalyst Innovations in Care Delivery* in August 2021.<sup>1</sup>

 **25,055 members received CCA assistance with at least one social support in 2021**

SDOH Supports	CCA Members Impacted	Total Impact
 Transportation	<b>15,626</b> total number of distinct members who were provided rides	<b>767,016</b> total number of transportation trips provided to members
 Physical Environment	<b>6,735</b> members provided with home modifications or environmental controls	<b>76,605</b> total home modifications or environmental controls provided to members (including air conditioners)
 Food	<b>3,281</b> members helped by meal-delivery program	<b>732,746</b> medically and non-medically tailored meals
 Health Outreach	<b>3,053</b> members served through non-traditional supports	<b>51,512</b> non-traditional care services (includes peer support groups, acupuncture, massage therapy, and in-home behavioral health therapy)

## Offering Complex Care Coordination and Delivery

According to CMS, people with one or more chronic diseases account for 75% of all healthcare spending in the U.S.<sup>1</sup> For risk-bearing entities, this increasingly complex population has historically been a challenge to manage. To help these organizations improve performance, CCA leverages its proven expertise among patients with complex medical, behavioral health, and social needs. For the past five years, CCA has partnered with Mass General Brigham (MGB) in a program that has significantly reduced ED and hospital utilization and lowered the overall cost of care. In 2021, we extended this partnership in a program targeting some of MGB's highest-risk Medicare, ACO patients, providing 13,162 encounters (in-person, telehealth, and telephonic) for 410 patients. An academic paper detailing these results has been accepted for publication in the *American Journal of Managed Care* in 2022.

## Avoiding the ED with instED® Mobile Integrated Health



It has been estimated that as many as two-thirds of all emergency department (ED) visits could be better managed—at lower cost—in another urgent care setting.<sup>2</sup> This is the impetus behind instED, CCA's innovative and comprehensive mobile integrated health solution designed to bring urgent care to the patient's home. In fact, a recently published study from the *American Journal of Managed Care* found that instED patients reported more satisfaction than patients who received care in an ED.<sup>3</sup> For the year, instED paramedics completed 4,400 in-home visits in response to the urgent care needs of 2,520 patients. In early 2022, the instED service became available to Rhode Island CCA members.



<sup>1</sup>This references CCA Massachusetts One Care and Senior Care Options members.

<sup>1</sup>NEJM Catalyst Innovations in Care Delivery, Vol. 2 No. 8, August 2021 <https://catalyst.nejm.org/doi/full/10.1056/CAT.21.0158>

<sup>1</sup>[https://www.fightchronicdisease.org/sites/default/files/docs/PFCD\\_ChronDisease\\_FactSheet3Final.pdf](https://www.fightchronicdisease.org/sites/default/files/docs/PFCD_ChronDisease_FactSheet3Final.pdf)

<sup>2</sup>Stanton, M. W., & Rutherford, M. K. (2005). The high concentration of U.S. health care expenditures. Agency for Healthcare Research and Quality, 19, 06-0060. Retrieved from <http://archive.ahrq.gov/research/findings/factsheets/costs/expriach/>

<sup>3</sup>The American Journal of Managed Care, April 2022, Volume 28, Issue 4

# Embracing corporate social responsibility

## Community engagement and philanthropic support

Reducing health disparities and increasing health equity remained a key focus of philanthropic activities at CCA in 2021.

- **Massachusetts:** In every county we serve in the Commonwealth, CCA outreach teams coordinated a total of more than 1,100 health and education events in collaboration with over 200 local community-based organizations. CCA also teamed up with federally qualified health center partners to distribute food to more than 500 Massachusetts families each month.
- **Rhode Island:** Although CCA was relatively new to Rhode Island in 2021, we made community engagement a top priority. We were proud to donate nearly \$60,000 in support of local non-profit organizations addressing food insecurity and health inequity in Rhode Island.

## CCA employees' volunteer efforts

All year long, in communities throughout Massachusetts and Rhode Island, CCA employees gave generously of their time in volunteer activities to benefit those in need.

*CCA employees regularly keep our mission in motion by volunteering their time through the CCA Community Service program.*



## Promoting the Common Good, Nationwide



Founded by CCA, the Center to Advance Consumer Partnership (CACP) is a breakthrough innovation in healthcare design, delivery, and evaluation that helps to empower consumers as experts and enduring partners in shaping programs and action. Working with a growing portfolio of forward-looking healthcare and human services organizations, CACP is on track to become a national thought leader and change maker for people with complex health needs. From Washington, DC, to Washington State, CACP provides a range of services to help healthcare leaders develop capabilities, build infrastructure, and cultivate relationships that foster true consumer partnership. For example, in 2021 CACP partnered with three pioneering organizations to launch the Medicaid Innovation Collaborative, engaging six million Medicaid patients across five states to better understand the gaps in quality, access, and equity they face—and how they can be closed.

Through CACP we are partnering with AARP to better understand the disparities faced by older adults who are LGBTQ+, Black, Latinx, and Asian American and Pacific Islander. CACP will support this initiative by working with consumers to better understand the challenges they face when seeking and receiving healthcare and social support services. The effort will focus on improving equity for older adult minorities by identifying gaps impacting access, quality, and consumer experience.

# Promoting diversity and inclusion

## Fostering a diverse and inclusive culture

CCA is committed to weaving diversity, equity, and inclusion into the fabric of our organization—from how we recruit, develop and engage our workforce, to the collaborative spaces we create for employees to express themselves, to the way we serve our members. We understand that the diversity of our staff and their perspectives are essential drivers of innovation, creativity, stewardship, and performance. At all levels of the organization, we prioritize increased awareness and foster an environment where employee contributions are continuously recognized and valued.



## CCA named Top Place to Work for Diversity, Equity, & Inclusion

It's a huge honor to make *The Boston Globe's* list of Top 10 Places to Work: Diversity Issue—so you can imagine how proud we are that this year CCA came in #1 on that list! The award, issued in 2021, is based on organizations' dedication to making their workplaces more equitable. CCA recruits not just Black and Latinx prospects, but LGBTQ candidates and people with disabilities, as well as those with Native American and Middle Eastern heritage. Even our hiring teams are now required to be diverse, both demographically and departmentally, and to watch a video about bias before each interview.



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## Advancing equity in healthcare

CCA was one of the first health plans in the country to tackle the complex task of vaccinating its members against COVID-19. From the onset of the pandemic, our Health Equity team worked with clinical leadership to ensure that fairness was at the center of our vaccination rollout. We fielded a data-driven campaign to identify our most vulnerable members, and as we deployed vaccinators, we observed that Black and Latinx members were resisting vaccination at a higher rate than white and Asian members. We quickly responded by mounting an education campaign in English and Spanish, providing sound, trusted information that empowered members to make informed decisions. Simultaneously, we activated our proprietary Member Voices program, conducting one-on-one interviews with members of color to better understand the kind of information they valued and adjusting our approach to meet them at their level of readiness.

# Leadership

## Leadership

Christopher Palmieri, President and Chief Executive Officer

Courtney Murphy, President of Markets

Alfred Enagbare, PhD, Chief People Officer

Lisa Fleming, Chief Legal Officer

Sarah Garrity, Chief Marketing Officer

Robert MacArthur, MD, Chief Medical Officer

Sesha Mudunuri, Chief Operating Officer

Don Stiffler, Chief Corporate Development Officer

## Board of Directors

Robert Gittens, Chair; Executive Director, Bridges Homeward

David Klein, MBA, Co-Vice Chair; Special Advisor to the Medical Center CEO, Professor of Public Health Sciences, Executive Professor of Health Care Management, University of Rochester

Carol Raphael, Co-Vice Chair; Senior Advisor, Manatt, Phelps & Phillips, LLP

Charles Carr, Legislative Liaison, Disability Policy Consortium, and Principal, Charlie Carr Consulting

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Tejal Gandhi, MD, MPH, CPPS, Chief Safety and Transformation Officer, Press Ganey Associates LLC

Ira Gottlieb, Senior Advisor, Mazars USA LLP and Chief Lead Project Officer, United Medical Center

Rizal Hamdallah, Chief Innovation Officer, Clif Bar and Company

Leslie Kirwan, Retired Dean for Administration and Finance, Faculty of Arts and Sciences, Harvard University

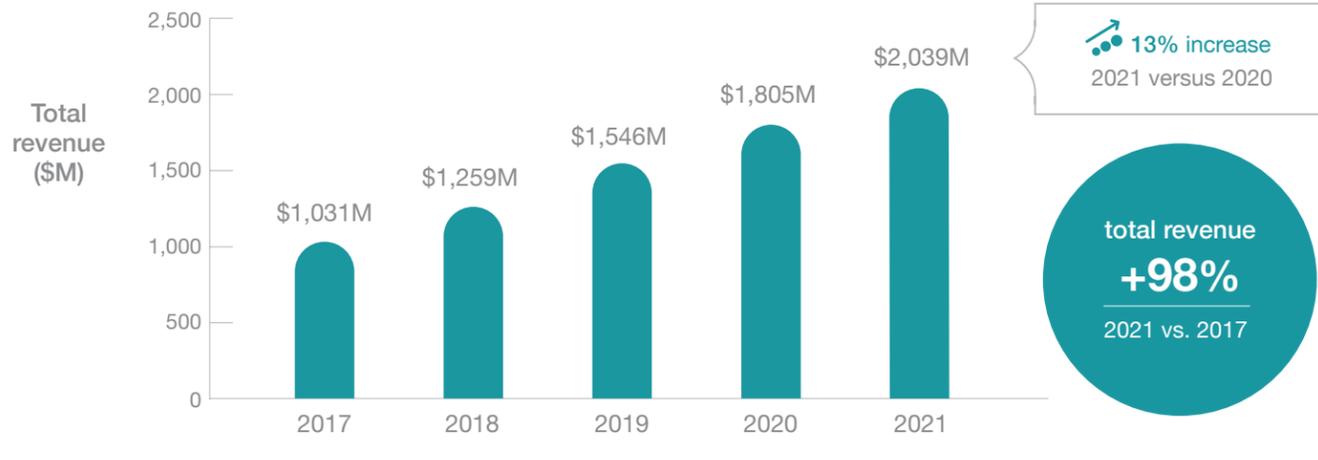
Christopher Koller, President, Milbank Memorial Fund

Joseph Paduda, Principal, Health Strategy Associates, LLC

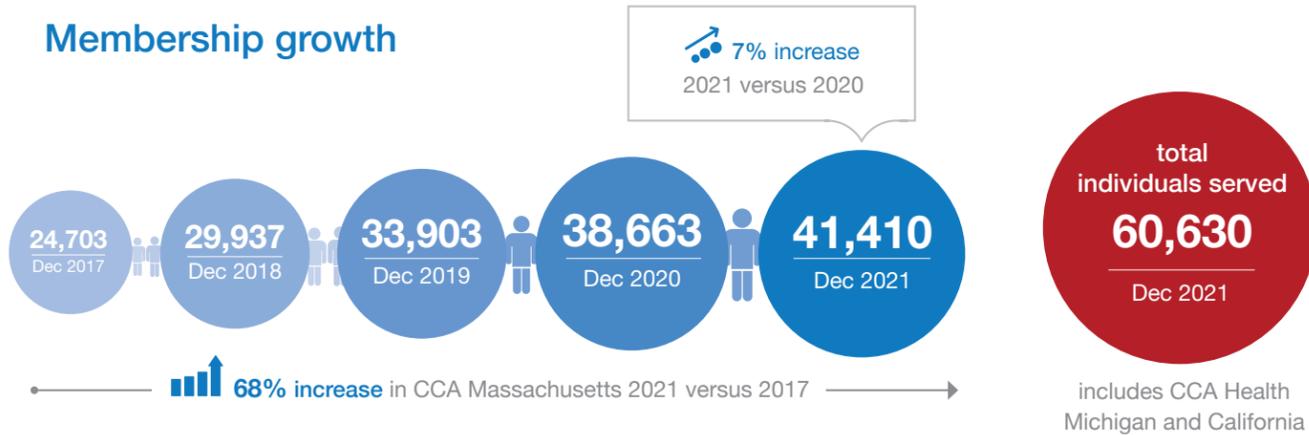
Christopher Palmieri, President and Chief Executive Officer, Commonwealth Care Alliance

# Enterprise Fast Facts

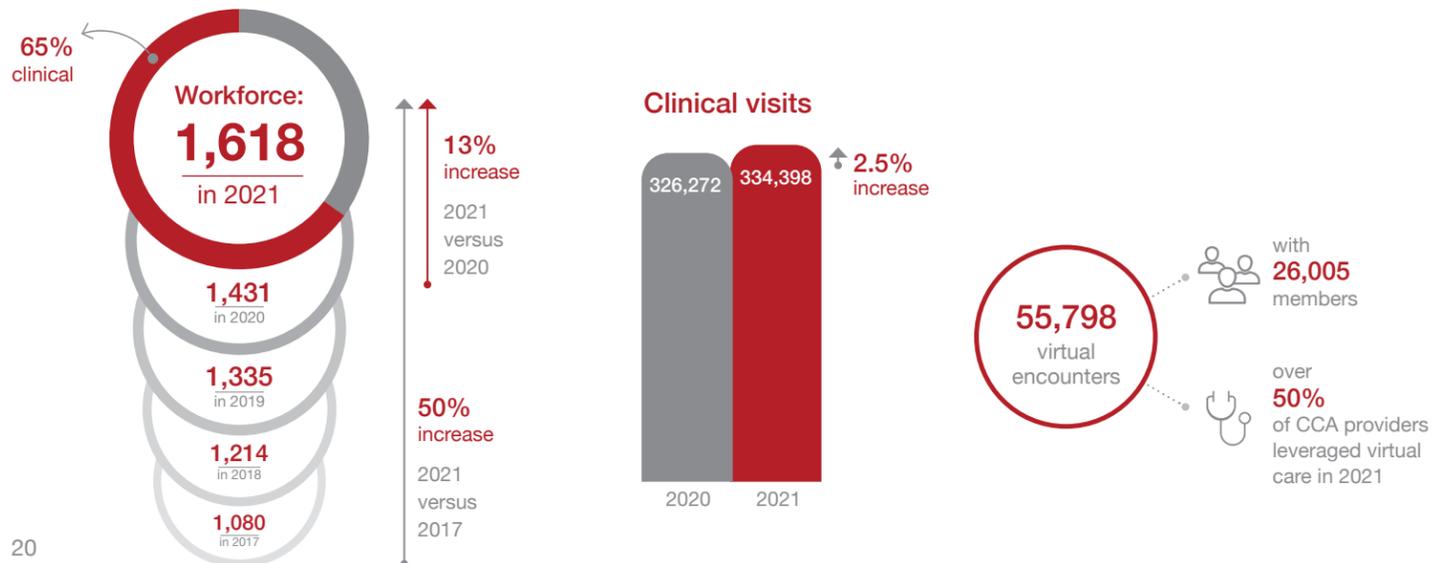
## Financial strength



## Membership growth



## Organizational advancement



## CCA Integrated Care System



### HEALTH PLANS



### CARE DELIVERY



Specialized Primary Care Practice

### HEALTH SOLUTIONS



Mobile Integrated Health

### HEALTH VENTURES



Healthcare Innovation Accelerator



Psychiatric Crisis Stabilization Units



Complex Care Coordination and Delivery

### COMMON GOOD





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