NOTICE OF MATERIAL CHANGE

				Dat	e of Notice:10/	/19/15			
1.	Name: UMass Memorial Accountable Care Organization, Inc.								
2.	F	ederal TAX ID	# MA DPH Facility ID # NPI #			NPI #			
	46-2871359			n/a		n/a			
	1								
1.4K	Contact	Information							
3.	Business	Address 1:	One B	liotech					
4,	Business Address 2;		365 Plantation Street						
5.	City: Worcester		State: MA		Z	ip Code:01605			
5.	Business Website: Umassmemorialhealthcare.org								
7,	Contact First Name:		Kate		Contact Last Name:	Eshghi			
8.	Title:		Senior Vice President and General Counsel						
9.	Contact Phone:		508 334-1700		Extension:				
10.	Contact E	mail:	katharine.eshghi@umassmemorial.org						
			l						
	Descripti	on of Organiz	ation	HORN COLD TO THE					
11,		Briefly describe your organization.							
	UMass Memorial Health Care, Inc. ("UMMHC") established UMass Memorial Accountable Care Organization, Inc. (UMMACO) as a chapter 180 non-profit subsidiary to act as an accountable care organization ("ACO") to participate in the Medicare Shared Savings Program commencing January 1, 2015. UMMACO does not enter into contracts or other arrangements with commercial payers. The UMMACO's mission is to bring together UMass Memorial and independent providers, academic and community based, to form an integrated organization with the distinct goals of providing high quality, comprehensive, innovative health care, improving transparency and communication among providers and patients, improving access to and coordination of care for Medicare patients, as well as providing care in the right setting; resulting in the reduction of the overall cost of providing case. The UMMACO for warmen in the right setting; resulting in the reduction of								
	the overall cost of providing care. The UMMACO focuses on improving patient experience of care, including quality and patient satisfaction. The ACO design principles include reliability (right care at the right place), customization (consideration of individual patient needs, values and preferences), access (ensuring ease of access to care, to information, and to knowledge-sharing), and coordination (coordination of care among all providers). The UMMACO is overseen by an independent governing board composed of representatives from UMass Memorial Health Care entities and independent community-based providers who have contracted to participate with the UMMACO as well as a Medicare beneficiary representative. UMMACO is part of the UMass Memorial Health Care System which is Central Massachusetts' largest not-for-profit health care delivery system with 1,125 beds and bassinets and approximately 12,000 employees. The system covers								

the health care continuum including UMass Memorial Medical Center, member and affiliated community hospitals, a large physician group including primary care and specialist services, ambulatory outpatient clinics, and substance

abuse and mental health services.

Type of Material Change							
Check the box that most accurately descr	ibes the proposed material change:						
Merger with or acquisition of or by a Any other acquisition, merger, or affi where such acquisition, merger, or a provider or provider organization of a X Any clinical affiliation between a pro- which itself has an annual net patient ser- Formation of a partnership, joint ventu	hospital or a hospital system liation between a provider organization and another provider organization filiation would result in an increase in annual net patient service revenue of the more than \$10,000,000 vider or provider organization with another provider or provider organization						
What is the proposed effective date of the proposed material change?	January 1, 2016						
Material Change Narrative							
Briefly describe the nature and objectives of the proposed material change: UMMACO began participation in the Medicare Shared Savings Program effective January 1, 2015 with an initial group of provider participants. Since that time, additional providers have expressed an interest in participating in the UMMACO beginning January 1, 2016. As of this time, the anticipated additional UMMACO provider participants whose annual net patient service revenue may exceed \$25 million include: Sturdy Memorial Associates, Inc. Community Health Connections, Inc. Community Health Connections, Inc. Community Health Center of Worcester, Inc. Holyoke Medical Center, Inc. Sturdy Memorial Hospital, Inc. Please note that the UMass Memorial ACO does not have access to the internal financial statements of the independent entities that are being added as participants of the ACO. The ACO is adding a number of smaller provider groups and individual providers to the ACO that are not listed above, none of which we expect have net patient service revenue							
Briefly describe the anticipated impact of the proposed material change:							
 Improved overall care and patient experience for Medicare beneficiaries in Central Massachusetts and neighboring regions Improved health of the Medicare populations in Central Massachusetts and neighboring regions through proactive, preventive health care and care coordination. Reduction in the overall cost of care associated with the Medicare population. The addition of new participants to the UMMACO extends existing quality and performance improvement resources across a broader Medicare population to extend the benefits to more Medicare beneficiaries across the region. 							
	Check the box that most accurately described Merger or affiliation with a carrier Acquisition of or acquisition by a carrier Acquisition of or acquisition by a carrier Acquisition of or by a Any other acquisition, merger, or affiliation, merger, or affiliation between a provider or provider or ganization of the provider or patient service of the proposed of a partnership, joint ventual created for the purpose of contracting on the proposed material change? What is the proposed effective date of the proposed material change? Material Change Narrative Briefly describe the nature and objectives UMMACO began participation in the Mediprovider participants. Since that time, additional exceed \$25 million include: Sturdy Memorial Associates, Inc. Community Health Connections, Inc. Community Health Connections, Inc. Community Health Connections, Inc. Community Health Center of Worcester, Inc. Holyoke Medical Center, Inc. Sturdy Memorial Hospital, Inc. Please note that the UMass Memorial ACC entities that are being added as participar individual providers to the ACO that are nexceeding \$25 million. Briefly describe the anticipated impact of the UMMACO Aims include: Improved overall care and patient expregions Improved health of the Medicare pop preventive health care and care coordinates and						

It is not anticipated that the addition of new participants to the UMMACO will have a material impact on UMass Memorial's overall market share, referral patterns, payer mix, service area or prices.						

Development of the Material Change					
Describe any other material changes you anticipate making in the next 12 months:					
In our ongoing efforts to provide seamless access to care in the lowest cost settings, we are evaluating the development of a new ambulatory service center, in partnership with other entities, to meet the changing needs of patients in our community. The Department of Public Health recently granted a Determination of Need for this proposed ASC.					
Indicate the date and nature of any applications, forms, notices or other materials you have submitted regarding the proposed material change to any other state or federal agency:					
UMass Memorial ACO has submitted all necessary documentation to the Centers for Medicare and Medicaid for addition of the new participants. We expect to have final approval from CMS accepting these new participants into the ACO by November 30, 2015.					

Affidavit of Truthfulness and Proper Submission

I, the undersigned, certify that:

- I have read the Health Policy Commission Bulletin 2013-1, Interim Guidance for Providers and Provider
 Organizations Relative to Notice of Material Change to the Health Policy Commission.
- 2. I have read this Notice of Material Change and the information contained therein is accurate and true.
- 3. I have submitted the required copies of this Notice to the Health Policy Commission and to all relevant agencies (see below*) as required.

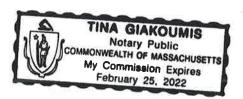
Signed on the _19th__ day of __October, 2015____, under the pains and penalties of perjury.

Signature: Lintz Syc.

Name: _____Katharine Bolland Eshghi _____

Title: _____Senior Vice President and General Counsel, UMass Memorial Health Care_____

FORM MUST BE NOTARIZED IN THE SPACE PROVIDED BELOW!



Tha Hechans
Notary Signature

Copies of this application have been submitted electronically as follows:

Office of the Attorney General (1)

Center for Health Information and Analysis (1)