

Advocate Physician Partners Accountable Care, Inc. Fraud and Abuse Waiver Website Disclosures

Pursuant to Section 1899(f) of the Social Security Act (42 U.S.C. § 1395jjj) the Secretary of the Department of Health and Human Services (“HHS”) has made available certain waivers of federal fraud and abuse laws in connection with the operation of accountable care organizations (“ACOs”) that have entered into a participation agreement, as defined under 42 C.F.R. § 425.20, under the Medicare Shared Savings Program (“MSSP”) with the Centers for Medicare & Medicaid Services (“CMS”).

Advocate Physician Partners Accountable Care, Inc. (“APP Accountable Care, Inc.”) has entered into such a participation agreement with CMS and is in good standing thereunder, pursuant to which APP Accountable Care, Inc. is participating in the MSSP.

2025 Incentive Distribution Methodology

The 2025 Incentive Distribution Methodology specifies that shared savings and ACO operating expenses will be allocated to ACO Participants on a state-by-state basis and will be deducted from the state’s shared savings. The new methodology takes into account scenarios when a state does not generate enough shared savings to cover expenses and what happens in the event a state takes on losses.

APP Accountable Care, Inc.’s Board of Directors has made a bona fide determination that the 2025 Incentive Distribution Methodology is reasonably related to the purposes of the MSSP, as required by applicable waivers, including, specifically, promoting accountability for the quality, cost, and overall care for a Medicare population; managing and coordinating care for Medicare fee-for-service beneficiaries through the APP Accountable Care, Inc.; and encouraging investments in infrastructure and redesigning care processes for high-quality and efficient service delivery for patients, including Medicare beneficiaries. The Advocate ACO Board of Directors approved the Arrangement on October 1, 2025 and APP Accountable Care, Inc. is in the process of effectuating the Arrangement.”

Electronic Health Record Software Arrangement

APP Accountable Care, Inc. and its affiliates, Advocate Health and Hospital Corporation (“AHHC”) and Advocate Physician Partners (“APP”), desire to establish an arrangement (the “Arrangement”) pursuant to which APP Accountable Care, Inc. will make available electronic health record technology, third-party software, interfaces, training and services (the “Technology”) to APP for APP to provide the Technology to APP participating providers. All APP Accountable Care, Inc. Participants and ACO providers/suppliers are participants in APP’s clinically integrated network.

APP Accountable Care, Inc.’s Board of Directors has made a bona fide determination that the Arrangement is reasonably related to the purposes of the MSSP, as required by applicable waivers, including, specifically, promoting accountability for the quality, cost, and overall care for a Medicare population; managing and coordinating care for Medicare fee-for-service beneficiaries through the APP Accountable Care, Inc.; and encouraging investments in infrastructure and

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redesigning care processes for high-quality and efficient service delivery for patients, including Medicare beneficiaries.

The Advocate ACO Board of Directors approved the Arrangement on February 2, 2019 and reauthorized it in January 2021 and December 2021 and Advocate ACO is now in the process of effectuating the Arrangement, pursuant to the terms and conditions of a set of related written agreements between APP, Advocate ACO, and individual practices. APP is also retaining the services of practices to advise on the implementation of the EPIC software in exchange for a fair market value fee.

Fit Test Support Arrangement

Advocate ACO and its affiliate, Advocate Physician Partners (“APP”), desire to establish an arrangement (the “FIT Test Arrangement”) under which Advocate ACO will assist APP physicians to identify patients who have not received medically necessary colorectal cancer screenings within the timeframe outlined in the measure , if ordered by physicians, facilitate the shipping and handling of fecal immunochemical testing (“FIT”) to patients and from patients to labs, in order to assist patients who wish to obtain medically necessary colorectal cancer screening.

Advocate ACO’s Board of Directors has made a bona fide determination that the Arrangement is reasonably related to the purposes of the MSSP, as required by all applicable waivers, including, specifically, promoting accountability for the quality, cost, and overall care for a Medicare population; managing and coordinating care for Medicare fee-for-service beneficiaries through the Advocate ACO; and encouraging investment in infrastructure and redesigning care processes for high-quality and efficient service delivery for patients, including Medicare beneficiaries.

The Advocate ACO Board of Directors approved the Arrangement on September 15, 2020, and Advocate ACO is now in the process of effectuating the Arrangement, subject to terms and conditions to be adopted by Advocate ACO and its applicable affiliates.