



PRESS RELEASE

For Immediate Release

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agilon health, a New Healthcare Services and Technology Company, Formed at the Forefront of Value-Based Healthcare

PARTNERING WITH PHYSICIAN-CENTRIC ORGANIZATIONS TO IMPLEMENT NEXT GENERATION VALUE-BASED CARE DELIVERY SYSTEMS THAT IMPROVE CARE QUALITY AND SYSTEM-WIDE ECONOMICS

PLATFORM CURRENTLY MANAGING OVER 475,000 PATIENTS IN MULTIPLE GEOGRAPHIES EXPECTS TO EXPAND NATIONALLY SUPPORTING MEDICAID, MEDICARE AND COMMERCIAL POPULATIONS

MANAGEMENT TEAM INCLUDES WORLD CLASS HEALTHCARE OPERATING TALENT

Long Beach, Calif., October 4, 2016 – agilon health, a healthcare services and technology company aiming to accelerate the conversion to value-based healthcare, announced its formation today. The company brings together established value-based healthcare delivery systems, physician risk enabling infrastructure, and proven operating talent from across healthcare. The combination of these capabilities and a unique partnership-centric approach offers providers on a national basis the opportunity to successfully transition to risk-based business models.

agilon health empowers physicians and other providers with the clinical, technological and administrative capabilities to function effectively in a healthcare system undergoing a structural shift to a compensation model based on outcomes, rather than traditional fee-for-service, and to capture the inherent opportunity in bearing global financial risk associated with improving patient outcomes and lowering system costs. agilon health, through its value-based delivery systems, has a strong track record operating in multiple capitated markets, currently managing more than 475,000 patients through a network of more than 1,500 primary care physicians and 8,000 specialists. agilon health's partnership solution includes information and support systems, data analytics and

sophisticated medical management infrastructure to support physicians across the risk spectrum, from professional capitation to full capitation. Ronald A. Williams, former chairman and chief executive officer of Aetna, is agilon health's chairman.

“Our mission is to be a great partner with physicians, whose pivotal role in improving care quality and efficiency puts them on the front lines of the transition to value-centric healthcare,” said Mr. Williams. “We have the specialized capabilities and clinical, administrative and technological infrastructure necessary to help providers navigate this transition.”

“We believe our innovative model improves quality, reduces cost, satisfies providers and engages patients, adding up to a system of care that any of us would want for our family and friends, all while transforming the physician economic model,” said Dr. Stuart Levine, Chief Medical and Innovation Officer for agilon health.

“In a very real way, agilon health is helping to revive the joy of practicing medicine by providing physicians with the opportunity to participate in a next generation care delivery system that allows them to focus more on quality of care and less on volume of activity,” said Dr. Manoj Mathew, agilon health's National Medical Director.

Core to the company's relationships with physicians are its integrated clinical, administrative and financial solutions, specifically built for the delegated physician risk market. Initially developed in 1996 by Gerry Ibanez, who remains a senior executive at agilon health, the company's proprietary technology platform currently includes products for Medicare's STARS program, burden of illness management (HCC), Pay for Performance (P4P), care management and a fully integrated administrative platform that includes claims payment, and is particularly tailored for managing the growing Medicaid, Medicare, Expansion and Duals populations, which agilon health currently serves directly in California and Hawaii. The technology platform, which is highly portable to new markets, also supports the management of more than 1.3 million patients for numerous well-known third-party providers and health plans across the country.

In California, agilon health has made a significant investment in supporting and enhancing the quality of care delivery in the rapidly growing Medi-Cal market (California's version of Medicaid). agilon health operates a leading Management Services Organization (MSO) that, along

with its affiliated Independent Provider Associations (IPAs), services a patient base of more than 450,000 primarily Medi-Cal members in Riverside, San Bernardino, San Diego, Fresno, and Los Angeles. agilon health's largest affiliated IPA, Vantage Medical Group (formed in 1993), is the largest independent Medi-Cal IPA in the Inland Empire (Riverside and San Bernardino counties), one of the largest and fastest growing Medicaid communities in the country.

In Hawaii, agilon health is delegated for professional and institutional risk, taking full risk for the management of approximately 24,000 Medicare Advantage patients in exchange for a percentage of the CMS premium. The full risk model developed by agilon health is the first of its kind in the Hawaii market, which has historically been defined by traditional, fragmented and more expensive fee-for-service healthcare. agilon health has been operating in Hawaii since 2003, and, as of today, more than 800 primary care physicians and 2,000 specialists are a part of the agilon health network in Hawaii. agilon health's unique MSO model relies on its own proprietary clinical and administrative technology applications to support its management of delegated risk.

"I am excited to team up with a strong financial partner like Clayton, Dubilier & Rice (CD&R) and a growing group of operating talent to accelerate investment in the technology platform and unique physician risk infrastructure we have developed to expand our footprint and help transform care delivery nationally at a critical time in healthcare," said Mr. Ibanez.

"We are in the process of expanding to other geographies based on agilon health's unique physician-centric partnership model tailored for local market needs. The growth in risk-based models driven by reimbursement changes, growth in government lives, and growing physician dissatisfaction is creating an opportunity to re-invent local healthcare delivery markets through creative strategic partnerships with providers." said Mr. Williams.

About agilon health

agilon health serves as a partner to physicians and other providers so that they can be more productive and effective in providing high-quality, value-based care. The company is both a management services organization serving more than 475,000 patients through a network of more than 9,500 physicians and a proprietary technology platform that both supports the management of agilon health's delegated patients and is also offered to third-party provider organizations and

payers. The company's unique mix of technology-based services and clinical capabilities supports physicians serving a diverse mix of patients across multiple geographies, with differentiated expertise managing underserved Medicaid and Medicare Advantage patients. agilon health is also an important partner to payers, other providers and communities, positively impacting access, quality and cost of care for patients. agilon health was initially formed through the combination of leading MSO and technology businesses in California and Hawaii, facilitated by Clayton, Dubilier & Rice (CD&R), an investment firm. Mr. Williams is an Operating Advisor to CD&R's funds. www.agilonhealth.com.