

# NOTICE OF MATERIAL CHANGE

Date of Notice: August 16, 2024

1. Name: New England Orthopedic Surgeons, Inc.

2. Federal TAX ID #	MA DPH Facility ID #	NPI #
04-2521996	N/A	1760416630

## Contact Information

3. Business Address 1: 300 Birnie Avenue

4. Business Address 2: Suite 201

5. City: Springfield State: MA Zip Code: 01107

6. Business Website: neortho.com

7. Contact First Name: Anthony Contact Last Name: Rino

8. Title: Executive Director

9. Contact Phone: 413-233-1101 Extension:

10. Contact Email: anthony.rino@neortho.com

## Description of Organization

11. Briefly describe your organization.

New England Orthopedic Surgeons, Inc. ("NEOS") is an MA professional corporation that provides orthopedic and related medical services as a group practice. NEOS is owned by physicians and governed by a board of directors comprised of physicians.

## Type of Material Change

12. Check the box that most accurately describes the proposed Material Change involving a Provider or Provider Organization:

- A Merger or affiliation with, or Acquisition of or by, a Carrier;
- A Merger with or Acquisition of or by a Hospital or a hospital system;
- Any other Acquisition, Merger, or affiliation (such as a Corporate Affiliation, Contracting Affiliation, or employment of Health Care Professionals) of, by, or with another Provider, Providers (such as multiple Health Care Professionals from the same Provider or Provider Organization), or Provider Organization that would result in an increase in annual Net Patient Service Revenue of the Provider or Provider Organization of ten million dollars or more, or in the Provider or Provider Organization having a near-majority of market share in a given service or region;
- Any Clinical Affiliation between two or more Providers or Provider Organizations that each had annual Net Patient Service Revenue of \$25 million or more in the preceding fiscal year; provided that this shall not include a Clinical Affiliation solely for the purpose of collaborating on clinical trials or graduate medical education programs; and
- Any formation of a partnership, joint venture, accountable care organization, parent corporation, management services organization, or other organization created for administering contracts with Carriers or third-party administrators or current or future contracting on behalf of one or more Providers or Provider Organizations.

13. What is the proposed effective date of the proposed Material Change? October 16, 2024.

## Material Change Narrative

14. *Briefly* describe the nature and objectives of the proposed Material Change, including any exchange of funds between the parties (such as any arrangement in which one party agrees to furnish the other party with a discount, rebate, or any other type of refund or remuneration in exchange for, or in any way related to, the provision of Health Care Services) and whether any changes in Health Care Services are anticipated in connection with the proposed Material Change:

NEOS will combine its providers and operations with the following orthopedic practices in Massachusetts to form a single group practice, Northeast Orthopaedic Alliance, PLLC (“NOA”): Boston Sports and Shoulder Center, LLC, EONE Medical, PLLC, and EONE Medical Subsidiary, PLLC (NEOS and each practice, a “Legacy Practice”). The Legacy Practices are contributing current operations to NOA and will cease operations only after care has been transitioned to NOA so that patients will not experience any disruption. NOA will consolidate the governance and operations of the Legacy Practices to create administrative efficiencies and reduce overhead. Additionally, the unification will enable NOA to contract with payors directly through a physician owned and managed entity. The change will improve continuity of

15. *Briefly* describe the anticipated impact of the proposed Material Change, including but not limited to any anticipated impact on reimbursement rates, care referral patterns, access to needed services, and/or quality of care:

NOA is negotiating payor contracts that it anticipates will be comparable with existing and current market rates. NEOS, as part of NOA, will shift sites of service to ambulatory surgery centers, in-office, and other lower cost settings, which will improve patient access to needed services. NEOS, as party of NOA, will create infrastructure to support value-based care model development on top of existing fee for service contracts with the aim of driving improved health outcomes and enhancing patient care in the community. Notwithstanding the foregoing, NEOS, as part of NOA, will continue to support community hospitals and will maintain existing hospital privileges and services arrangements without disrupting existing referral relationships. Economic considerations include cost of living adjustments where

## Development of the Material Change

16. Describe any other Material Changes you anticipate making in the next 12 months:

None.

17. 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:

None.

## Supplemental Materials

18. Submit the following materials, if applicable, under separate cover to [HPC-Notice@mass.gov](mailto:HPC-Notice@mass.gov).

The Health Policy Commission shall keep confidential all nonpublic information, as requested by the parties, in accordance with M.G.L. c. 6D, § 13(c), as amended by 2013 Mass. Acts, c. 38, § 20 (July 12, 2013).

- a. Copies of all current agreement(s) (with accompanying appendices and exhibits) governing the proposed Material Change (e.g., definitive agreements, affiliation agreements);
- b. A current organizational chart of your organization; and
- c. Any analytic support for your responses to Questions 14 and 15 above.

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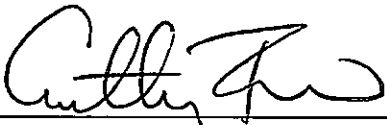
This signed and notarized Affidavit of Truthfulness and Proper Submission is required for a complete submission.

**Affidavit of Truthfulness and Proper Submission**

I, the undersigned, certify that:

1. I have read 958 CMR 7.00, Notices of Material Change and Cost and Market Impact Reviews.
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, the Office of the Attorney General, and the Center for Health Information and Analysis as required.

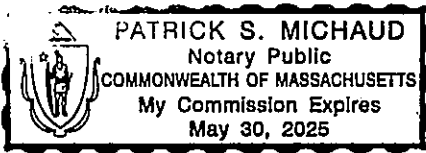
Signed on the 16 day of August, 2024, under the pains and penalties of perjury.

Signature: 

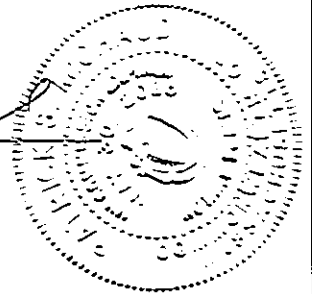
Name: New England Orthopedic Surgeons, Inc.

Title: Executive Director

FORM MUST BE NOTARIZED IN THE SPACE PROVIDED BELOW:



  
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)