

**Summary of Changes to the Terms of Certification Governing the Certificate of Public Advantage Issued to Ballad Health Pursuant to the Master Affiliation Agreement and Plan of Integration By and Between Wellmont Health System and Mountain States Health Alliance**

Effective July 1, 2025, the Tennessee Department of Health and the Tennessee Attorney General's Office has published the "Sixth Amended and Restated Terms of Certification Governing the Certificate of Public Advantage Issued to Ballad Health Pursuant to the Master Affiliation Agreement and Plan of Integration By and Between Wellmont Health System and Mountain States Health Alliance." Substantive changes to this version of the Terms of Certification are outlined below.

<b>Section Reference</b>	<b>Summary of the Change</b>
Throughout the Document	Editorial changes to conform the document to the "Sixth Restatement of the Terms of Certification."
Throughout the Document	Formatting changes to references for page and section numbers that were not intended to alter the substance nor content of the Terms of Certification.
Section 5.08	Revised language regarding the scope and process of Final Offer Arbitration between Ballad and any Payors.
Section 5.09	Revised language to include the additional sub-index part covering Capital levels.
Section 7.01	Added language clarifying the calculation of an Index Score and including a potential adjustment for any Capital Spending Points.
Addendum 1, Section 1.1. See Section 7.1	Added a definition of "Compliance Processes" to distinguish from the existing term "Audit Processes."
Addendum 1, Section 1.1 and Section 3.2	Replaced the definition of "Standard Payor Acknowledgement" with "Standard Payor Annual Report" and conforming changes throughout Addendum 1.
Addendum 1, Section 2.1(b). Section new Section 7.1(c)	Clarified language requiring a Ballad certification of Exempt Payors in Ballad's Annual Report.
Addendum 1, Section 2.2(b)	Clarified language requiring a Ballad certification of Value-Based Payors in Ballad's Annual Report.
Addendum 1, Section 3.1(b)(ii); (f)(i) and Part 4	Revised language to clarify Cumulative Inflation Adjustment consideration in Standard Payor contracts.
Addendum 1, Part VIII. See also new Section 10.7	Inserted and revised language regarding Managed Care Contracts, lump sum payments; and periodic review of the application and operation of Addendum 1.
Addendum 1, Appendix 3	Addition of a new format for Standard Payor Annual Report.
Exhibit I	Addition of an Economic Sub-Index part II regarding calculation of a potential adjustment for any Capital Spending Points.
Exhibit J	Addition of further steps to account for a potential adjustment for any Capital Spending Points.