

**Charter of the Compliance and Quality Committee
of the Board of Directors of
agilon health, inc.**

As Amended and Restated, and Adopted by the Board of Directors,

Effective as of December 29, 2025

This Charter sets forth, among other things, the purpose, membership, and responsibilities of the Compliance and Quality Committee (“Committee”) of the Board of Directors (the “Board”) of agilon health, inc. (“Corporation”). The Board hereby adopts this Compliance and Quality Committee Charter (“Charter”) to establish the governing principles of the Committee.

1. Purpose

The Committee assists the Board in overseeing: (a) the integrity and effectiveness of the Corporation’s operational, healthcare, and regulatory compliance programs, including those relating to Medicare, patient confidentiality, and other healthcare laws and regulations; (b) the Corporation’s quality management and patient safety programs; (c) the Corporation’s operational risk management framework, including oversight of cybersecurity, data privacy, and information security risks as they relate to healthcare operations and regulatory compliance (including, without limitation, HIPAA), in coordination with other Board committees; (d) the Corporation’s compliance training, education, and reporting systems; and (e) the Corporation’s sustainability initiatives and reporting as they relate to operational and healthcare compliance, in coordination with other Board committees.

For purposes of this Charter, “compliance” means adherence to all laws, regulations, and policies applicable to, and principally intended to regulate, the day-to-day operations of the Corporation’s businesses (such as Medicare, patient confidentiality, health care, and antitrust matters). Responsibility for oversight with respect to Board-level compliance matters of a more general nature (such as corporate, securities, tax, pension, and financial reporting matters), or not principally related to day-to-day operations, resides with the Audit Committee of the Board (“Audit Committee”) or such other Board committee(s) as may be assigned.

2. Membership

The Committee shall consist of at least three directors. The members of the Committee shall be appointed by the Board on the recommendation of the Nominating and Governance Committee of the Board (“Nominating and Governance Committee”), which shall recommend for Committee membership such directors as it believes are qualified, subject to the terms of the Stockholders Agreement, dated April 16, 2021, between the Corporation and CD&R Vector Holdings, L.P. (the “Stockholders Agreement”). Members of the Committee shall serve at the pleasure of the Board and for such term or terms as the Board may determine and may be removed

by the Board in accordance with the Corporation's Amended and Restated By-laws (as may be further amended or restated, the "By-laws") and the Stockholders Agreement.

3. Structure and Operations

The Board shall appoint one member of the Committee as chairperson, who shall supervise meetings and have such other responsibilities as set forth herein or as determined by the Committee. The chairperson, with input from management and the Board, will set the agenda for each meeting. Each Committee member shall have one vote and the affirmative vote of a majority of members present at a meeting at which a quorum is present is required to adopt any resolution. The Committee may create subcommittees and may delegate any of its responsibilities to them at its discretion.

The Committee shall meet at least four times per year, at times and places determined by the chairperson, with additional meetings as needed. Members may participate by conference call, virtual meeting, or similar communications arrangements. The Committee may request any officer, employee, outside counsel, independent auditor, or other advisor of the Corporation to attend meetings or provide information as deemed necessary. The meetings and other actions of the Committee shall be governed by the By-laws applicable to Board committees.

4. Responsibilities

The Committee's responsibilities shall include each of the items enumerated in this Section 4 and such other matters as may from time to time be delegated to the Committee by the Board.

The Committee shall:

Integrity & Effectiveness of Compliance Programs

(a) Oversee the integrity and effectiveness of the Corporation's compliance programs, including but not limited to, those related to the False Claims Act, the Anti-Kickback Statute, Stark Law, HIPAA, and Medicare Advantage and ACO REACH program requirements.

(b) Oversee operational regulatory compliance, including matters related to federal health care program requirements, to promote effectiveness of compliance-related controls.

(c) Oversee the implementation and operation of the Corporation's compliance program and recommend any revisions as appropriate.

(d) Annually review the effectiveness of the compliance program according to compliance program guidance documents published by the Office of Inspector General and evaluate whether the compliance program is meeting the expectations espoused by the U.S. Department of Health and Human Services and the U.S. Sentencing Commission.

(e) Review and approve compliance related policies and procedures, including oversight and periodic review of the Code of Financial Ethics, Code of Conduct and the whistleblower policy contained in the Code of Conduct.

(f) Review and assess policies and procedures aimed at ensuring that the Corporation's subsidiaries and/or affiliates as well as all of the Corporation's vendors maintain effective compliance programs, follow ethical business policies and are in compliance with applicable laws and regulations.

(g) Remain reasonably knowledgeable of laws, regulations and policies related to the operation of the Corporation including those related to fraud and abuse and relationships with health care providers who are referral sources.

Quality Management and Patient Safety Programs

(h) Oversee the Corporation's quality management system, including the development, implementation, and periodic review of quality assurance and performance improvement programs; review and monitor clinical quality and patient safety metrics (including benchmarking against industry standards and regulatory requirements); and assess the effectiveness of related policies and procedures.

(i) Receive and review regular reports from management regarding patient safety events, adverse event trends, root cause analyses, corrective action plans, and quality-related risk management activities (including malpractice claims, litigation trends, and risk mitigation strategies).

(j) Oversee the Corporation's processes for identifying, reporting, investigating, and remediating patient safety incidents, including sentinel events and near misses, and monitor infection prevention and control programs (including compliance with CDC and state guidelines).

(k) Monitor compliance with applicable federal and state quality reporting requirements (e.g., CMS, NCQA, HEDIS, Medicare Stars, CAHPS), and review the results of external quality audits, accreditation surveys, and regulatory inspections, including management's response and remediation efforts.

(l) Oversee the Corporation's credentialing, privileging, and peer review processes for physicians and other licensed healthcare professionals.

(m) Oversee patient experience, satisfaction, and engagement initiatives, including review of survey results and related action plans.

(n) Review and assess the adequacy of resources allocated to quality management and patient safety functions, and discuss with management as appropriate.

(o) Periodically review and recommend to the Board any changes to the Corporation's quality and patient safety policies, programs, or objectives.

Risk Oversight

(p) Assist the Board in its oversight of cybersecurity risks, including information systems, data privacy and information security, as such risks relate to the Corporation's healthcare operations and regulatory compliance obligations (including, without limitation, HIPAA), in coordination with the Audit Committee, which has primary oversight of cybersecurity risk.

Compliance Training, Education and Reporting Systems

(q) Review compliance program effectiveness measures relating to education, training and program auditing to assess the degree to which operations are consistent with regulatory policies and guidelines.

(r) Assess at least annually the adequacy of resources allocated to the compliance program, whether such resources are sufficient to achieve operational compliance, and discuss with management the allocation of resources as appropriate.

(s) Oversee the information, procedures and reporting systems the Corporation has in place, including pursuant to the Code of Conduct, to provide reasonable assurance that (i) the operations of the Corporation comply with applicable laws and regulations, and (ii) the Corporation acts in accordance with appropriate ethical standards.

(t) Meet regularly with the Chief Compliance Officer (“CCO”) to receive reports on compliance matters including any complaints received, evidence of the effectiveness of the compliance program and the activities of the CCO and other compliance personnel.

(u) Establish and maintain procedures for the receipt, retention and treatment of complaints received by the Corporation regarding compliance matters.

Sustainability Initiatives and Reporting

(v) Oversee the Corporation’s sustainability initiatives and reporting as they relate to operational and healthcare compliance, in coordination with other Board committees.

(w) Review and monitor the Corporation’s policies, practices, and disclosures regarding sustainability matters that impact compliance, quality, and patient safety.

Reports to Board; Review of Committee Performance and Charter

(x) Maintain minutes or other records of its meetings and shall regularly report to the Board, including presenting, as appropriate, such measures and recommend such actions as may be necessary or desirable to assist the Corporation in conducting its activities in compliance with all applicable laws, regulations and policies. Reports to the Board may take the form of oral reports by the chairperson or any other member of the Committee designated by the Committee to give such report.

(y) Report compliance issues that may have significant financial implications to the Corporation’s Audit Committee and otherwise assist the Audit Committee in the discharge of such committee’s obligations related to such compliance issues.

(z) Undertake and review with the Board an annual performance evaluation of the Committee, based on the process developed by the Nominating and Governance Committee, which shall compare the performance of the Committee with the requirements of this Charter and set forth the goals and objectives of the Committee for the upcoming year. The report to the Board may take the form of an oral report by the chairperson or any other member of the Committee designated by the Committee to make this report.

(aa) Annually review and reassess the adequacy of this Charter and recommend any proposed changes to the Board for approval.

(bb) Perform such other functions as may be assigned to the Committee from time to time by the Board.

5. Authority and Resources

The Committee may, without further Board approval, retain outside accounting, legal, or other advisors (including for special audits, reviews, or procedures) as it deems necessary or advisable to fulfill its responsibilities. Such advisors may, but need not, be the same firms otherwise engaged by the Corporation. The Committee has authority to set and direct payment of their compensation. At the request of the Committee, the Corporation shall provide the Committee with an appropriate level of staff and support to allow the Committee to function appropriately.

The Corporation shall pay all compensation, expenses, and charges for any advisor or staff retained or hired by the Committee, as well as the Committee's ordinary administrative expenses, as determined by the Committee.

The Committee has the authority to conduct or authorize any investigation into any matters within the scope of its responsibilities as it deems necessary or appropriate to fulfill its responsibilities.

6. Reliance; Standard of Care; No Expansion of Duties

The Committee's responsibilities are primarily of an oversight nature. The Corporation's management is responsible for establishing, implementing, and maintaining the Corporation's compliance and quality programs and systems, including those designed to ensure compliance with applicable healthcare laws, regulations, and standards of clinical care. The Committee's role is to oversee and review these matters in accordance with the responsibilities set forth in this Charter.

In carrying out its responsibilities, the Committee is entitled to rely in good faith on the integrity, expertise, reports, representations and opinions of management, internal audit, legal counsel, compliance officers, quality assurance personnel, and other advisors, as well as on the accuracy of information provided by such persons.

Nothing in this Charter is intended to expand applicable standards of liability under statutory or regulatory requirements for directors or members of the Committee. This Charter is intended to serve as a flexible framework to assist the Committee in the discharge of its responsibilities; it does not create by itself any legally binding obligations on the part of the Committee, the Board, or the Corporation.

The Committee may adopt additional procedures as needed and will act consistently with the Corporation's Corporate Governance Guidelines.