



Nebraska Total Care Overview

*Better Health Outcomes, Lower Costs.*TM



Corporate Overview



WHO WE ARE



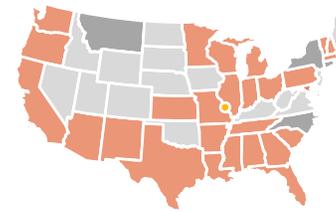
Nebraska Total Care is a subsidiary of Centene Corporation, a St. Louis based company founded in Milwaukee in 1984.

28,000 employees

#124
on the
Fortune 500 list

#4
Fortune's Fastest
Growing Companies (2015)

WHAT WE DO



28 states

with government sponsored
healthcare programs

Medicaid
(24 states)

Exchanges
(15 States)

MA SNP
(12 States)

Correctional
(8 States)



2 international markets

11.5 million members

Includes 2.8 million TRICARE eligibles

~290

Product / Market
Solutions

Corporate Leadership



BOARD OF DIRECTORS

Michael F. Neidorff

Chairman and CEO – *Centene Corporation*

Orlando Ayala*

Corporate Vice President, Chairman Emerging Markets, Chief Strategist, National Competitiveness – *Microsoft Corporation*

Robert K. Ditmore*

Former President & COO – *United Healthcare Corporation*

Frederick H. Eppinger*

President & CEO – *The Hanover Insurance Group, Inc.*

Vicki B. Escarra*

CEO – *Opportunity International*

Hon. Richard A. Gephardt*

CEO – *Gephardt and Associates*, Former Majority Leader of the U.S. House of Representatives

John R. Roberts*

Retired Regional Managing Partner – *Arthur Andersen, LLP*

David L. Steward*

Chairman of the Board – *World Wide Technology, Inc.*

Hon. Tommy G. Thompson*

Former Health & Human Services Secretary
Former Governor of Wisconsin

* *Independent Director*

Our Philosophy



LOCAL APPROACH & JOB CREATION

Centene's core philosophy is that quality healthcare is best delivered locally. Our local approach enables us to provide accessible, high quality and culturally sensitive healthcare services to our members. Our care coordination model utilizes integrated programs that can only be delivered effectively by a local staff, resulting in meaningful job creation within the communities we serve.



CARE COORDINATION

Our proprietary care management programs promote a medical home for each member and enable Centene to partner with its trusted providers to ensure members receive the right care, in the right place, at the right time.



HEALTHCARE COMPLIANCE

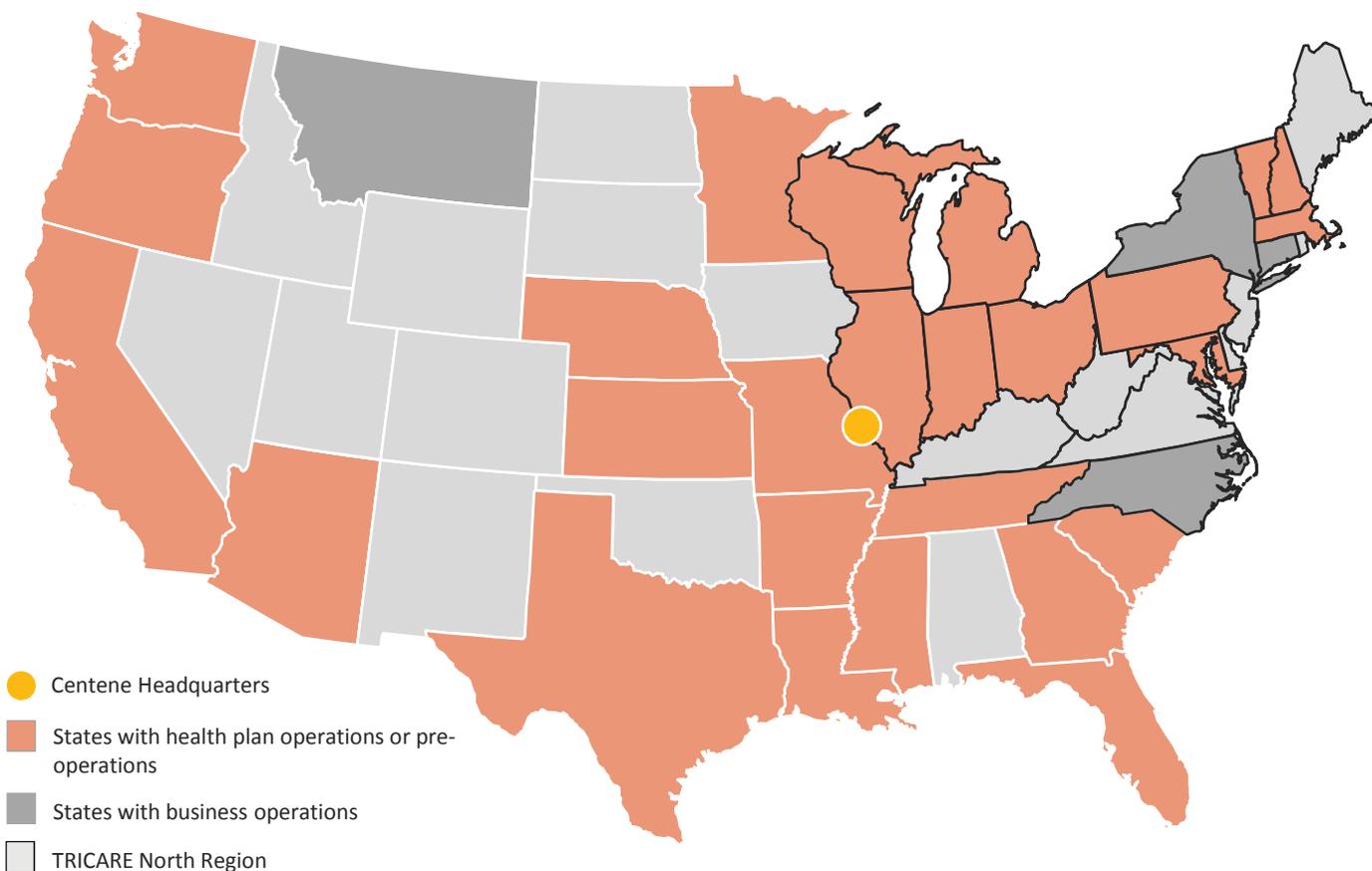
State and Healthcare Effectiveness Data and Information Set (HEDIS) reporting constitutes the core of the information base that drives our clinical quality performance efforts. This reporting is monitored by Plan Quality Improvement Committees and our corporate medical management team.



CULTURAL SENSITIVITY

We successfully coordinate care for our diverse membership by recognizing the significance of the many different cultures our members represent and by forming partnerships in communities that bridge social, ethnic and economic gaps.

Centene's Operations



- Centene Headquarters
- States with health plan operations or pre-operations
- States with business operations
- TRICARE North Region

Notes:

- *Nebraska and Pennsylvania Medicaid operations expected to commence January 1, 2017*
- *New Mexico correctional operations expected to commence in June 2016*
- *Maryland Medicaid operations anticipated to commence July 1, 2017*

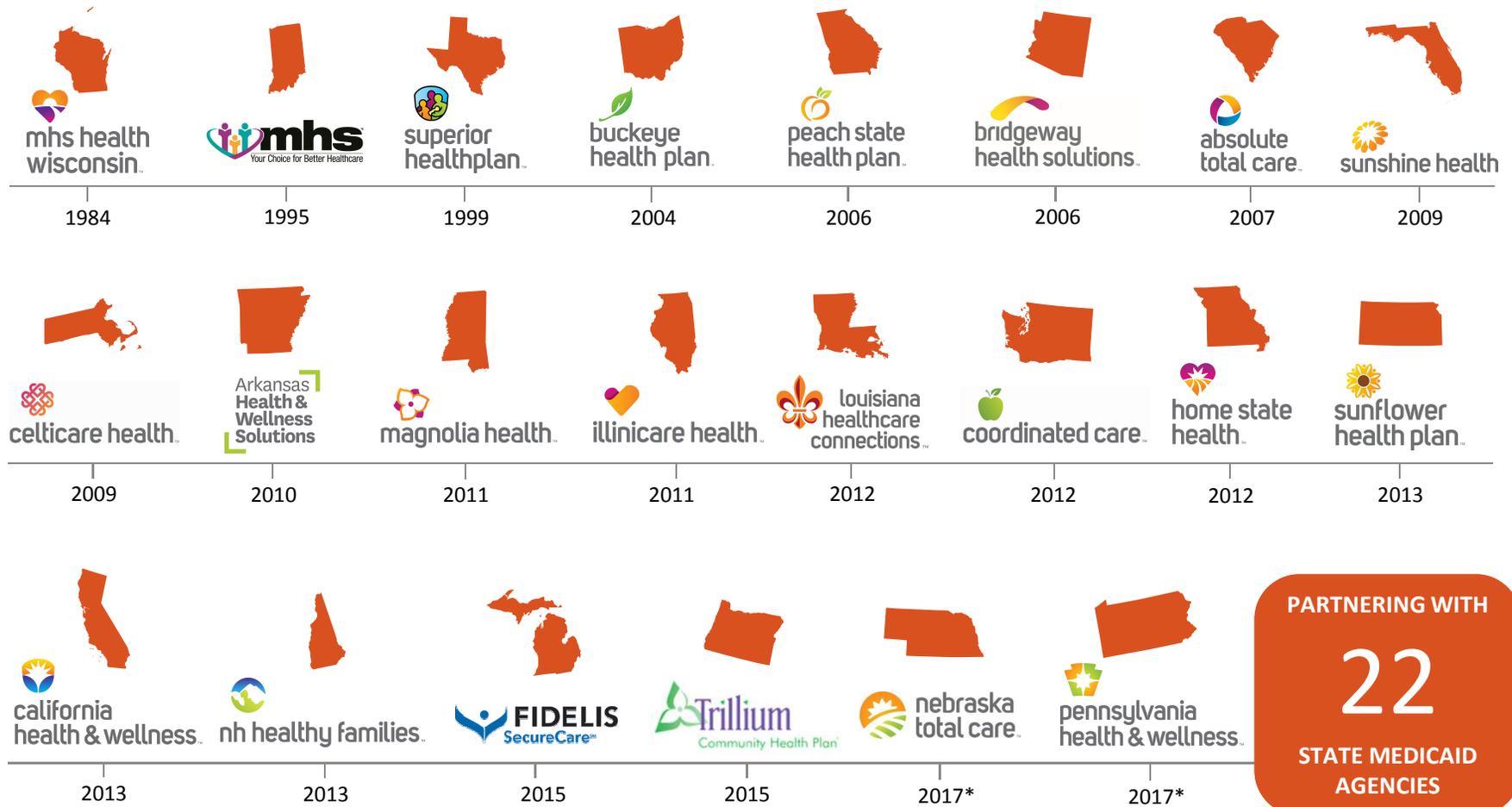
Current Membership

Arizona	_____	607,000
Arkansas	_____	50,700
California	_____	3,125,400
Florida	_____	660,800
Georgia	_____	495,500
Illinois	_____	239,100
Indiana	_____	290,300
Kansas	_____	141,100
Louisiana	_____	381,200
Maryland	_____	TBD
Massachusetts	_____	52,400
Michigan	_____	2,600
Minnesota	_____	9,500
Mississippi	_____	328,300
Missouri	_____	100,000
Nebraska	_____	TBD
New Hampshire	_____	81,500
New Mexico	_____	TBD
Ohio	_____	314,000
Oregon	_____	209,000
Pennsylvania	_____	TBD
South Carolina	_____	107,700
Tennessee	_____	20,100
Texas	_____	1,036,700
Vermont	_____	1,500
Washington	_____	226,500
Wisconsin	_____	78,400
TRICARE North	_____	2,819,700

Medicaid Leadership



BRINGING EXPERIENCE TO NEW MARKETS



PARTNERING WITH
22
STATE MEDICAID AGENCIES

¹ Nebraska and Pennsylvania operations expected to commence January 1, 2017.

Specialty Services Provided by Centene



Specialty Health Solutions	AZ	AR	CA	FL	GA	IL	IN	KS	LA	MA	MI	MN	MS	MO	NE ²	NH	OH	OR	PA ²	SC	TN	TX	VT	WA	WI
Pharmacy Benefits	•	•	•	•	•	•	•	•	•	•	•		•		•	•	•		•	•		•		•	
Behavioral & Specialty Therapies	•	•	•	•	•	•	•	•	•	•	•		•	•	•	•	•			•		•		•	•
Life & Health Management	•	•	•	•	•	•	•	•	•	•	•		•	•	•	•	•		•	•	•	•		•	•
Primary Care Solutions for Complex Populations				•		•	•	•						•			•					•		•	•
Managed Vision	•	•	•	•	•	•	•	•	•	•	•		•	•	•	•	•		•	•		•		•	•
Dental Benefits ¹	•	•		•	•	•		•		•	•		•	•			•		•			•			•
Telehealth (Nurse Triage and Education Line)	•	•	•	•	•	•	•	•	•	•	•		•	•	•	•	•		•	•		•		•	•

¹ Centene is in process of transitioning dental services from external vendors to our new dental benefit management subsidiary.

² Nebraska and Pennsylvania operations expected to commence January 1, 2017.

Accreditations

OUR GOAL IS TO ENSURE EACH HEALTH PLAN AND AFFILIATED COMPANY BECOMES ACCREDITED



- Absolute Total Care (SC)
- Granite State Health Plan (NH)
- Managed Health Services (IN)
- Managed Health Services (WI)
- Peach State Health Plan (GA)
- Superior Healthplan (TX)



- Cenpatico



- Nurtur



- Arkansas Health & Wellness (AR)
- Buckeye Community Health Plan (OH)
- CeltiCare Health Plan (MA)
- Coordinated Care (WA)
- Home State Health Plan (MO)
- IlliniCare Health Plan (IL)
- Louisiana Healthcare Connections (LA)
- Magnolia Health Plan (MS)
- Sunflower Health Plan (KS)
- Sunshine Health (FL)
- Trillium Community Health Plan



- OptiCare



- Nurtur



ACCREDITED
HEALTH PLAN

- Cenpatico (TX)



ACCREDITED
HEALTH UTILIZATION
MANAGEMENT

- Cenpatico (AZ)
- AR Health & Wellness



ACCREDITED
CASE MANAGEMENT

- AR Health & Wellness



ACCREDITED
DISEASE MANAGEMENT

- Nurtur



ACCREDITED
HEALTH CALL CENTER

- NurseWise



ACCREDITED
PHARMACY BENEFIT
MANAGEMENT

- AcariaHealth
- US Script

LifeShare Acquisition



- Founded in 1996 by Josh and Rachel Boynton
- Josh and Rachel supported a gentleman named Ron in Keene, NH
- Created a “personalized services contract” to meet Ron’s needs

- The services were effective, leading to a greater quality of life.
- 100% Community Based
- Competitive Employment & Community Day Programs (No Sheltered Workshops)
- **FOSTER CARE** – 15 years – Provider, Crisis Services, Case Management, Trauma, Ind. & Family Therapy, etc.



The IDD Nebraska Total Care Model



IDD Acute Care Managers

- Experience working with individuals with various disabilities
- Nurses with DD backgrounds
- Licensed SW with DD backgrounds
- Field based positions
- Will coordinate health care needs with the PRIMARY case manager using ONE Person Centered Plan

IDD Liaison

- A central point of contact for training, specialized health education to individuals their families, and their support staff.
- Bridge for IDD provider questions and Nebraska Total Care

Care Model



VISIBLE PRESENCE — “BOOTS ON THE GROUND”

Bring Coordination of Care to Individuals & IDD Providers

- Face-to-Face interactions
- Field Teams and Co-located Teams in provider sites
- Case Manager, Program Specialist, MemberConnections representatives

Care Management Teams

- Identify barriers to following treatment plans and healthcare goals
- Facilitate communication across medical, BH, and Developmental Disability Providers
- Coordinate healthcare needs and services, including transportation and referrals to specialty services

MemberConnections Representatives

- Explain benefits, provide health education, including how to access care (ex. appropriate Emergency Room utilization)
- Community events and partnerships with local community agencies, churches and high volume provider offices to promote healthy living and preventive care
- Able to change Members’ beliefs and behaviors because they are hired from within the community

Hired from Local Community, Know the Area, Know the Membership

Our Goals



Link Individual to the Services that they Need

Provide Local Infrastructure:

- Case Management
- Connections Representatives
- Disease Management
- Call Center
- Member Services
- Provider Relations
- Provider Services



Ensure that Medicaid Recipients get the Care They Need in the Most Appropriate Setting

- *Increase* primary care visits and *reduce* unnecessary Emergency Room visits

Significantly Improve the Quality of Life for Individuals with Disabilities

- Identify and facilitate treatment for secondary conditions
- Coordinate care to reduce duplication and waste
- Reduce barriers to care

Questions????