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Introduction

Health Net Access has submitted a transition plan to AHCCCS detailing the acquisition of Health Net, Inc. by Centene Corporation and a resulting change of ownership of Health Net Access. The following implementation structure will guide the successful transition of operations consistent with the transition plan filed with AHCCCS in September 2015.

The project scope includes all activities related to implementation and readiness with goals of:

- Establishing all business and operational people, process and systems for transitioned Health Net Access consistent with the six identified materials changes after the close of the Transaction:
 - Organizational Changes
 - Board Composition
 - System Migration
 - Claims Administration
 - Call Center
 - Prior Authorization
- Submitting all required deliverables to the State of Arizona (AHCCCS) and completing any required reviews
- Assuring a smooth transition demonstrated through contract compliance, frequent communication, and performance reports

Overview of Project Methodology

Our implementation team will follow a project management approach highlighted by:

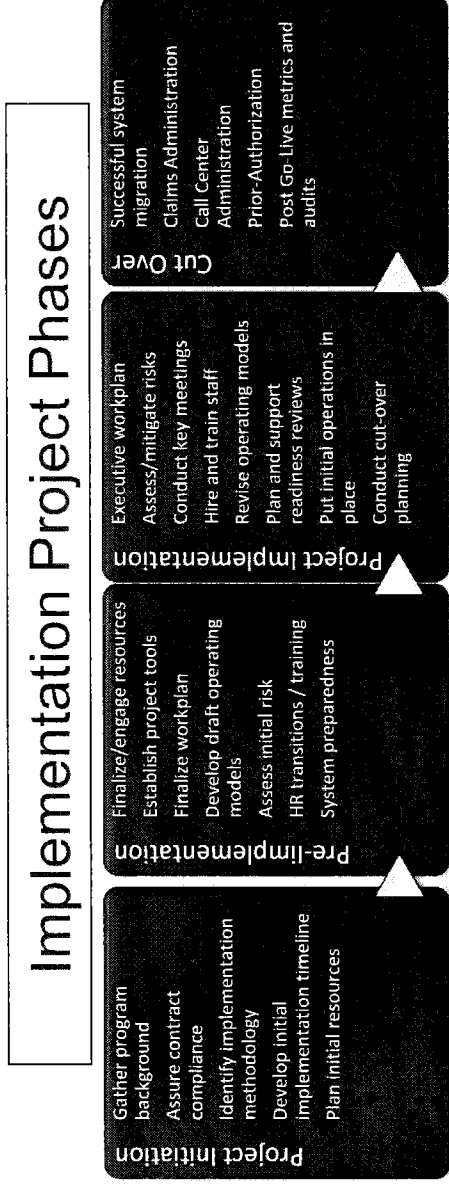
- Project lifecycle methodology with defined stages and activities to ensure progress
- Proactive review of implementation progress, issue identification/assessment, alternatives analysis and resolution
- Co-management of the project blending the market expertise and leadership of the Bridgeway, and Health Net Access team supported by Centene corporate resources
- Consistent communication between implementation participants
- A set of industry standard and proprietary tools to define accountability, track progress, and identify and mitigate risks to implementing the contract

Our project lifecycle methodology provides a solid framework for managing key project implementation activities according to a defined set of standards. This methodology provides the same framework as a typical "Project Office" in which resources and tools are deployed in a standard

manner. However, this approach enables us to more effectively meet tight timeframes, manage cross-functional activities, and establish clear expectations with all stakeholders and participants of the activities needed to assure a successful business implementation. In this manner, projects are managed consistently by:

- Initial assessment of needs and assignment of resources
- Assigning key milestones and deliverables to each phase with specific ownership
- Reporting weekly status to key stakeholders
- Continuous assessment for risk and development of risk mitigation strategies
- Clarifying escalation paths at the beginning of each project to facilitate timely response and priority

This project life cycle is categorized by four distinct phases encompassing multiple activities to help assure consistent and appropriate resource support from launch to full operations. The following diagram illustrates these phases and highlights some of the key activities of each phase:



Bridgeway uses a set of industry standard and proprietary tools to define accountability, track progress and identify and mitigate risks to transitioning Health Net Access. We use recognized tools such as Microsoft Project and SharePoint, an online project management tool, to document and track project deliverables and timing and ensure consistent communication and single points of access to information for all implementation team members.

Implementation Program Roles & Responsibilities

We have established a health plan implementation structure that leverages knowledge and expertise of Bridgeway and Health Net Access in Arizona supported by Centene corporate resources. We have dedicated a local project management leader, Valerie Eaton to lead the transition efforts. We are augmenting her leadership with Centene corporate implementation resources to leverage best practice continuity and efficiencies of experienced corporate resources. To meet the objectives of the Health Net Access transition, the team will draw upon their broad experience and functional expertise across the entire organization.

Specific roles and responsibilities of the Implementation Leadership Team:

Paul Barnes, Plan President and CEO – As the Executive Champion and CEO, Paul Barnes is responsible for the overall project to assure its success. As part of this role, the Executive Champion will make key decisions, such as budget allocations, major project activities, and identification/approval of resources for the project. The Executive Champion reports into the Enterprise Implementation Steering Committee.

Keith Hibbard, VP of Information Technology – Keith the lead executive for the system transitions is Keith Hibbard, VP, Information Technology. Mr. Hibbard is a senior IT executive with over 25 years of experience in health care technology. He has been the identified IT lead for Arizona for the past 8+ years and was the senior IT executive in the Cenpatco Integrated Care implementation. In the Health Net Access system transition, Mr. Hibbard will be accountable for all IT activities related to medical management, member/provider call centers, Centene's web presence (Public and Secure portals), enrollment/billing/eligibility management, and related business/vendor partner collaborations.

Jean Wilms, VP of Business Development – Supports the Executive Champion according to the defined scope, schedule, and timeline. Ms. Wilms will assure project compliance with corporate policies and procedures and will work with the implementation director to promote open communication and project integration.

Rob Duchild, Project Lead System Implementation – Oversees the IT system migration project scope, timeline and deliverables. Rob will lead and manage the IT work group teams. Will partner with Health Plan leadership and deliver application and infrastructure

functionality in member/provider call center, enrollment, benefits and pricing configuration, claims processing and provider payments, medical management, and web portal functionality.

Valerie Eaton, Implementation Director - As Implementation Director, Valerie Eaton will be fully dedicated to manage the day-to-day implementation activities with support from the corporate implementation team. Ms. Eaton will be responsible for overseeing and coordinating the setup of project tools and resources, managing the project according to the defined scope, schedule, and timeline, assure project compliance with State requirements, facilitate communication across all levels of the organization and monitor implementation status and results.

Karen Richardson, Implementation Director – Karen is located in Centene's corporate office. She will be the corporate liaison for the project by providing best practices from prior implementations, engaging corporate resources, and readiness review assistance. Karen was the lead implementation director in the Centpatico Integrated Care implementation.

The implementation team will support the operational transition teams and workgroups throughout all phases of the implementation. They will direct day-to-day implementation activities, including coordination, reporting, and team management.

Implementation Committee Structure

We have established a health plan implementation structure that leverages Arizona market leadership with dedicated support by Centene specialty and corporate resources. The following Committee structure assures successful transition.

The **Enterprise Implementation Steering Committee** is a team of corporate senior executives and local market leadership that focuses on project priorities, necessary resources and successful implementation of contracts. The Committee meets weekly.

The **Arizona Steering Committee** meets weekly and is led by Paul Barnes. The team consists of local Bridgeway/ Health Net leadership to discuss market strategies and business decisions.

The **Integrated Lead Committee** meets weekly and is led by the Implementation Director, Valerie Eaton. The team is comprised of Centene/Health Net integrated representatives from each functional area, as well as representatives from project leadership and management teams. This committee regularly monitors and reports market updates, work group status, milestones, identifies risks and interdependencies to manage the overall implementation plan.

Various **Functional Work Groups** are formed to develop and implement people, processes and systems needed to transition the Health Net Access business. The specific work groups identified for the Health Net Access Medicaid migration are listed below.

Functional Work Groups

Business Leads - Each project team's Business Lead is accountable for the team's timeline and quality of deliverables. The Business Lead will schedule, track, and monitor the team's progress and will provide updates to the Project Management Team and Executive Champion.

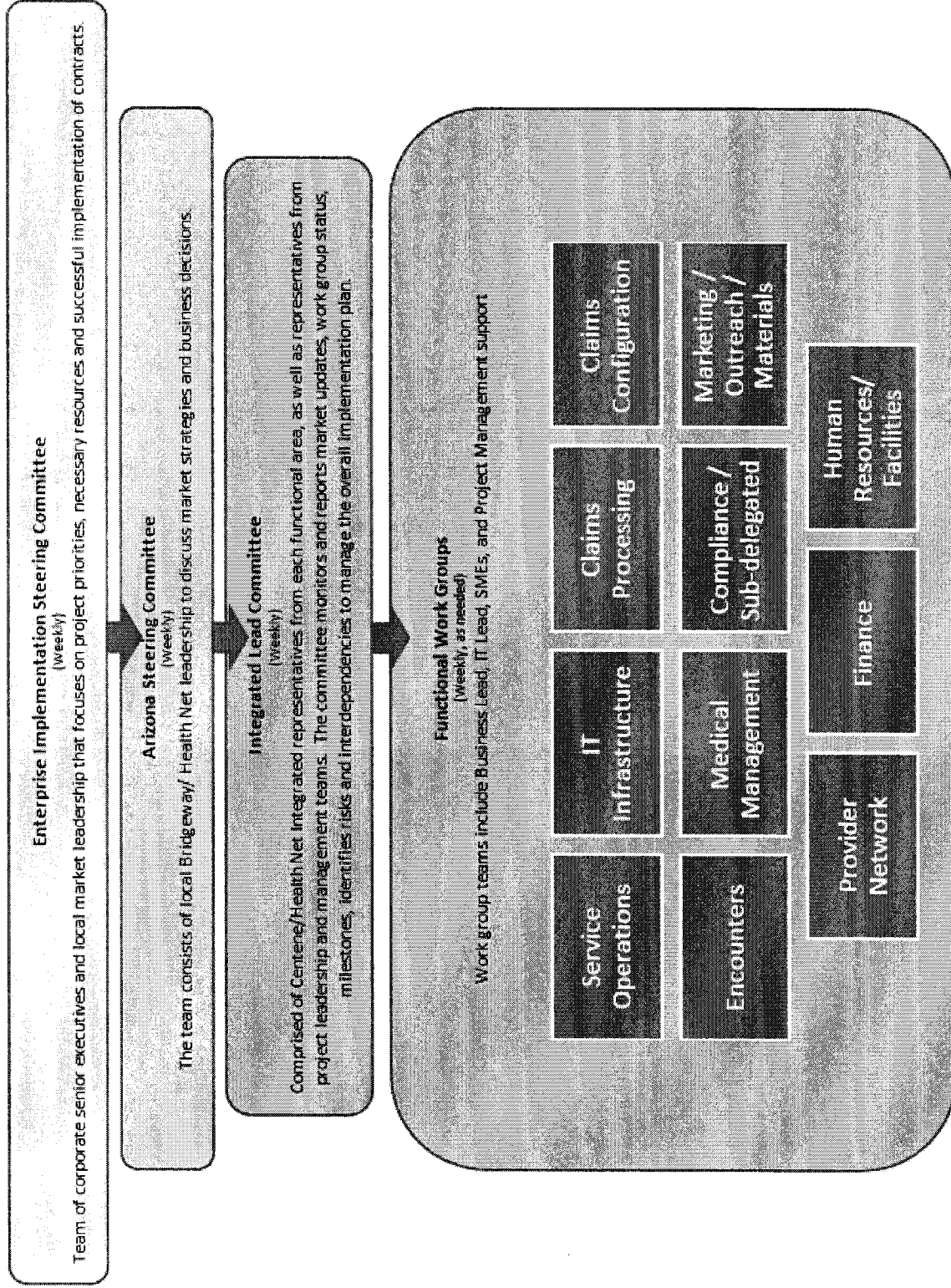
IT Leads – Each project team will include an IT Lead to ensure system migration requirements are aligning with business needs. IT system migration project scope, timeline and deliverables will be managed by the IT Project Lead, Rob Duchild.

Work Group Members - Work group members will consist of Subject Matter Experts from Corporate Centene, Bridgeway and Health Net to provide knowledge and expertise in each functional area of the project.

Project Management Support - Each project team will have a designated support person to provide assistance in developing and completing deliverables. The project management support person will work closely with the Business Lead.

The Project Management Team supports all of the project teams and workgroups to assure timely and on schedule implementation deliverables. The Implementation Manager as well as other project team members will meet regularly with project teams to support, assist, and help address any identified risks, barriers, or other issues as they arise.

Implementation Governance Structure



Attachment C

Functional Work Group Teams

Implementation Lead	Valerie Eaton
IT Lead	Rob Duchild
Corp Implementation Manager	Karen Richardson
Corp Implementation PM	Sara Ferguson

Integrated Area	Functional Areas of Accountability	Bridgeway	Health Net	Centene Corporate
Service Ops	1. Call Center (Member and Provider) 2. CRM 3. IVR	Jeff Adams, Nancy Maurer	Daniel Salearriata, Susan Gilkey, Lori Lin	Mitchell Bushnell, Tim Broeker, Denny Henson, Aiden Werner (IVR)
		Cheyenne Ross, Maria Cobb	Michele Stankowski	Shari Rothwell, Andrew Dietrich, Chris Gladden Leslie Dickerson
		Mary Hendrix, Mike Tullo	Kay Ziegler, Mike Flynn, Nyall London	Mike Donahue
IT Infrastructure	1. IT Infrastructure	Nancy Maurer	Kay Ziegler	Rob Duchild
Claims	1. Claims Processing 2. EDI	Nancy Maurer, Tricia Todaro	Ted Wilkinson, Kay Ziegler, William Suggs	Amy Hartman, Tammie Scullin, Jeff Cline, Kevin Gilbert
		Nancy Maurer, Tricia Todaro	Kay Ziegler, William Suggs	Alexander Meyer, Jeff Cline, Amy Hartmann, Thomas Zenk (finance)
Claims Configuration	1. Claims Configuration 2. Provider Payclasses 3. Benefits	Nancy Maurer	Kay Zeigler, William Suggs, HP CIA	Amy Hartmann, Tammie Scullin, Alexander Meyer, Nancy Evers

Functional Work Group Teams (cont.)

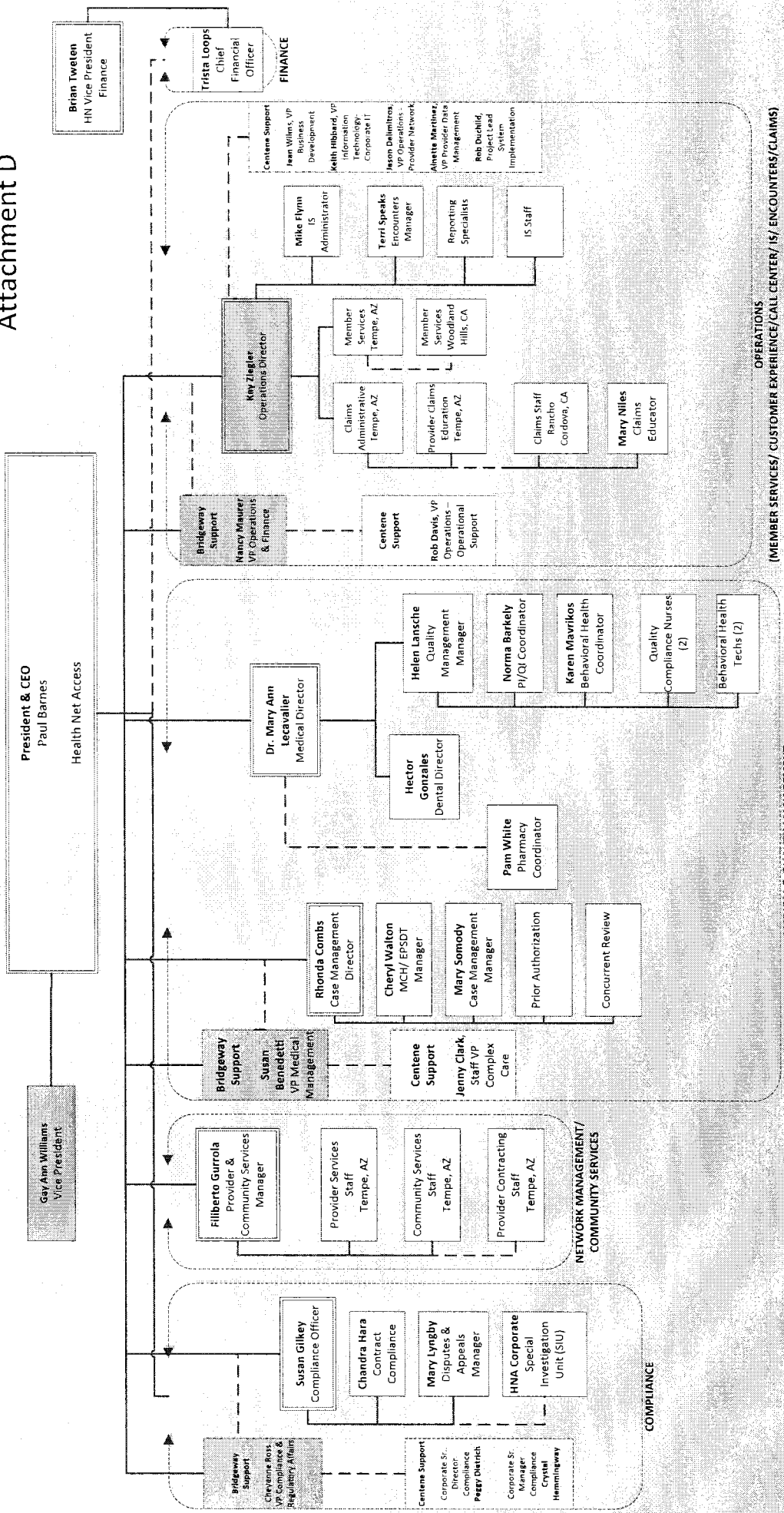
Integrated Area	Functional Areas of Accountability	Bridgeway	Health Net	Centene Corporate
Medical Management	<ol style="list-style-type: none"> Case Management Utilization Management Quality, Pharmacy TruCare/ARQ Set up; letters, Predictive Modeling/Risk Stratification 	Susan Benedetti	Helen Lansch, Rhonda Combs	Jenny Clark, Carol Kwiatkowski, Valarie Page, Darren Issak, US Scripts
Encounters	<ol style="list-style-type: none"> Encounters 	Jeff Adams, Nancy Maurer	Terry Speaks, William Suggs	Jessica Silver, Kristin Tunis
Finance	<ol style="list-style-type: none"> Budget / Forecast Claims Payable Remittance Reconciliation Capitation / Admin Fee 	Nancy Maurer, Mike Tullo	Trista Loops, Brian Tweten, Kay Zeigler	Darren Meyer, Thomas Zenk, Patricia Murray
Compliance / Sub-delegated	<ol style="list-style-type: none"> Compliance Specialty / Vendor Companies Transition Plan Delegated Submissions & vendor oversight Transition Submissions Appeals and Grievances Regulatory Reporting 	Cheyenne Ross	Susan Gilkey	Peggy Dietrich, Crystal Hemmenway
Marketing / Outreach / Materials	<ol style="list-style-type: none"> Community Outreach Member Materials / ID Cards (Marketing will get approved, Eligibility will issue Provider Materials 	Maria Cobb, Ken Yergey	Filiberto Gurrrola, Kay Ziegler	Cindy Jansky
Provider Network	<ol style="list-style-type: none"> Provider Data Management / Credentialing Pricing and Rates (payclass config above) Provider Materials / Outreach 	Julie McLeod, Jeff Adams	Filiberto Gurrrola, Kay Ziegler	Ainette Martinez
Human Resources / Facilities	<ol style="list-style-type: none"> Staffing Strategy HR Recruitment, Hiring, Training, Benefits Facilities 	Paul Barnes, Karen Brady, Lisa Erdely	Debra Taylor, Dennis Bell	Bob Sanders, Stephanie Hall, Brad Bucholz, Mike Bohm

IT Team Leads

Work Team	IT Lead Name	Lead Function
<u>Service Operations</u>	Jamie Beer	CRM
	Brandie Prosser	IVR
	Suneetha Kindapaneni	Web Member and Provider Portals
	Scott Corey	Membership Eligibility
<u>Infrastructure</u>	Brad Buchholz	Facilities
	Angela Griffin	IT Security
	Linda Patient	Enterprise Delivery
	Christine Hoffman	EDW data Integration
<u>Claims Processing</u>	Jeffrey Cline	Claims Processing / Amisys
	Kevin Gilbert	EDI / EDIFECs
	Jeffrey Cline	Claim Payments (Provider Payments)
	Michelle Hayden	Payment Integrity Claims Xten, HCI
	Dee Dee Walsh	Payment Integrity Claims Router Post Pay
	Vicki Smith	AWD Automated Work Distributor/Process for check runs
<u>Claims Configuration</u>	Alexander Myer	Claims Configuration
	Paul Brown	Clinical Web Development
<u>Medical Management</u>	Kathy Atchley	Medical Management TruCare
	Rhonda Tucker	CDMS
	Steve Johnson	Medical Management Reporting
	Michael Anders	SafeLink / Connections Plus
<u>Encounters</u>	Alison Higginbotham	Encounters
<u>Finance</u>	Jeffrey Cline	Claim Payments (Provider Payments)
	CaSonya Thompson	Compliance Reporting
<u>Compliance Reporting</u>	Frank Yoder	QSI
	Scott Corey	Member ID cards
<u>Marketing/Outreach/Materials</u>	Scott Corey	Member ID cards
<u>Provider Network</u>	Sandra Galleher	Provider Data Management / Portico
	Mark Miller	HR Systems

Centene Corporation & Health Net Access Acquisition
Transition Organizational Chart

Attachment D



Attachment E

Arizona Service Center Training Program

Member & Provider Solutions Training, Centene Corporation

Our overarching goal is to provide eligible members with information about Medicaid that is accurate and easily understandable. To achieve this goal, health plan staff that interface with members will be trained and provided with appropriate tools and resources to ensure they are well positioned to assist eligible members and their providers with questions about their covered benefits, appeals and grievance rights and responsibilities under Medicaid, and other topics and issues that are relevant to members and providers.

It is our standard operating procedure for all service center staff to participate in an initial and on-going training specific to their job functions and responsibilities and subjects relevant to the populations and services covered by the health plans supported at the service center. In addition to the targeted training, staff will have access to resources such as training manuals, policies and procedures and job aids to support them in addressing the unique needs and issues facing the dual eligible population.

The following is an overview of how service center employees are trained to assist health plan members. Included below is an overview of our training program that encompasses methods for educating staff, proposed dual eligible specific training curriculum, and processes to assess training effectiveness.

Methods for Educating Staff

Service Center staff require a combination of classroom, on-the-job, self-tutorial, and preceptor training. In addition to initial training, ongoing training and education is provided for all employees to maintain expertise, to increase proficiency and job knowledge, and to disseminate new information.

INITIAL TRAINING- The six-week training program includes four weeks in the classroom and two weeks of hands-on training. The Trainer conducts training in a classroom setting, supplemented by interactive, online modules in connection with Ongoing Training.

The classroom portion consists of three phases:

- **Fundamentals** which focuses on the common tools, techniques, and resources available to all staff members of the department.
- **Programs** which provides a comprehensive review of covered services, program descriptions and specific roles and responsibilities of staff and introduces supervised, hands-on training.
- **Job Functions** which reviews department and individual performance goals for all staff members, specific roles and responsibilities, and related policies, procedures, and workflows.

Near the conclusion of the Job Functions phase, the Trainer will introduce hands-on training through involvement in real-life and real-time situations for our Customer Care Professionals (CCPs). Senior staff will conduct shadowing, during which they observe the new staff member's technique and competence and provide guidance and coaching. The duration of shadowing will depend on the skills and confidence of each new staff member, who must demonstrate proficiency prior to graduating from the program and independently performing his or her job.

During this final phase of training, the Trainer and Quality Specialist will begin call monitoring of CCPs via our Uptivity application, which records calls and captures screen navigation to evaluate the effectiveness of the interaction, efficiency of the CCP's system navigation to obtain and document information, and cultural appropriateness.

Centene also requires all staff to complete our **Cultural Competency Training Program** upon hire and annually thereafter. This program is based on the National Standards for Culturally and Linguistically Appropriate Services in Health Care (CLAS Standards). Centene affiliates follow all 14 CLAS Standards. The training reviews daily challenges facing many Members such as poverty, Limited English Proficiency

Arizona Service Center Training Program

Member & Provider Solutions Training, Centene Corporation

(LEP), low literacy, limited mobility, behavioral health conditions, and lack of shelter, food, childcare, and social supports.

We will require staff to participate in **annual recertification training which is based on CLAS Standards**, and uses role-playing, presentations, and case discussions, with emphasis on developing skills to communicate appropriately and address members' linguistic and disability related needs and cultural differences. Health plan staff will receive training on listening for members' needs and anxieties, and identifying potential life stressors that may affect how they do or do not access care. We also will require biannual refresher training for staff with member contact. Staff will be trained on disability sensitivity, using People First Language.

ONGOING TRAINING- The Arizona Service Center uses Centene University, a corporate wide learning management system, complete with online courses available to all affiliates, to enhance our classroom training. The tutorials provide on-demand, anytime learning, at a pace set by each individual. Examples of course content applicable to addressing the unique needs of dual eligible members include coordination of benefits, appeals and grievances policies and procedures.

The Centene University technology is flexible and intuitive and allows the Service Center to develop course content, incorporate videos from external sources, create flexible scheduling including parameters around frequency, duration, and our own required completion dates. In addition, courses may include a real-time assessment with guided corrections as well as post-tests to evaluate staff understanding of course content. The system provides a variety of management tools and individual employee files containing certificates of completion, all of which aid in maintaining current, individualized educational development plans for staff.

With Centene University, on an ongoing basis, our Trainers develop and deploy continuing education modules such as on cultural competency, quality improvement programs and initiatives, new health plan requirements, and a variety of other topics. The Service Center management team may require ongoing training sessions regarding department wide emerging issues, trends, and health plan program requirement changes in advance of their implementation. Centene University issues department notifications of upcoming training to all staff, and provides management with electronic notices to confirm that employees who are required to participate have in fact participated in the training within the timeframe indicated, along with the results of any related test.

In addition, Centene uses Count 5's Q Mindshare change management tool to assist the Service Center leaders in getting the correct information to the right agents at the appropriate time. This application *pushes* appropriate information directly to selected agents' desktops. Agents receive a notification that new information needs to be reviewed. Content can be created within the application or accessed externally, such as from Centene's Cornerstone Learning Management System (LMS). Reporting is a key feature of the Q Mindshare application, and Supervisors are able to view their team's participation rates, see their scores on assessments and use feedback as an opportunity to engage with their agents. Agents have the ability to provide feedback in the form of both ratings and comments. In addition, agents are able to access the information at a later time for reinforcement, if needed.