

Transforming the Health of the Community, One Person at a Time

By delivering better health outcomes at lower costs

Centene Corporation, a Fortune 500[®] company, is a leading healthcare enterprise that is committed to helping people live healthier lives. Through our portfolio of government-sponsored and commercial healthcare programs, Centene provides affordable and high-quality products to nearly 1 to 15 individuals across the nation.

Centene's core philosophy is that quality healthcare is best delivered locally. Through local brands and local teams, we provide fully integrated, high-quality, and cost-effective services to Medicaid and Medicare members (including Medicare Prescription Drug Plans) as well as individuals and families serviced by the Health Insurance Marketplace and the TRICARE program.

LOCAL APPROACH WITH CULTURAL SENSITIVITY

We employ approximately 74,300* people, many of whom work in our local health plan organizations across the United States. Our hiring practices reflect the composition of our membership and the local community. Equally important, our staff training focuses on the impact of culture on healthcare decisions, the impact of poverty on health, and the importance of providing appropriate resources for members with disabilities or linguistic barriers.

CLINICAL INTERVENTIONS AND PROGRAMS

Centene utilizes evidence-based clinical programs that target specific conditions and disease states such as diabetes, asthma, heart disease, and obesity. In addition, Centene develops solutions that respond to the complex health needs of a diverse range of individuals, including lower-income pregnant women, newborns, persons with intellectual and developmental disabilities, children in foster care, and migrant workers.

CENTENE'S SUCCESS IS DRIVEN BY OUR COMMITMENT TO:



Focus on the Individual



Whole Health



Active Local Involvement

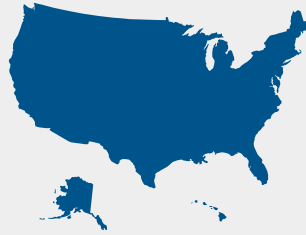
HEALTHCARE SOLUTIONS FOR:

- Temporary Assistance for Needy Families (TANF)
- Medicaid Expansion
- Children's Health Insurance Program (CHIP)
- Aged, Blind and Disabled (ABD)
- Long-Term Services and Supports (LTSS)
- Dual Demonstrations
- Intellectually/Developmentally Disabled (IDD)
- Foster Care
- Medicare Advantage
- Medicare Special Needs Plan
- Medicare Supplement
- Medicare Prescription Drug Plan (PDP)
- Health Insurance Marketplace
- Commercial Insurance
- Federal Services
- Behavioral Health Services

*As of December 31, 2022



27.1
million members*



1 in 15 Individuals across all 50 states

Centene offers affordable and high-quality products to nearly 1 in 15 individuals across the nation, including Medicaid and Medicare members (including Medicare Prescription Drug Plans) as well as individuals and families served by the Health Insurance Marketplace and the TRICARE program.

Today, **Centene is the largest Medicaid managed care organization** in the country, and a leader in California, Florida, New York, and Texas, four of the largest Medicaid states. Centene is also the national leader in managed LTSS and managed care services for the foster care population.

#1 carrier in the nation
on Health Insurance Marketplace

\$30.3B

in cash and investments*

\$144.5B

2022 total revenues

74,300

employees*

#26

FORTUNE
500® (2022)

#66

FORTUNE GLOBAL
500® (2022)

ADDRESSING MEMBER NEEDS THROUGH INNOVATION



Advanced Technology Systems and Tools

Centene's leading-edge technology and modern digital infrastructure is designed to help close the gap between health and care to deliver real-time results. Our state-of-the-art systems provide members, healthcare providers, and caregivers secure access to health information and treatment history. This includes prescription drug use, immunization history, reported allergies, past doctor visits, behavioral health history, laboratory tests, and vital signs.



Personal Member Outreach and Support

Centene's commitment to whole health is guided by industry-leading insights into the social, behavioral, and environmental drivers that impact the health of the most vulnerable populations. Our data-driven approach is designed to empower members to make more well-informed decisions along their care journeys. Personalized outreach programs like MemberConnections® help members navigate the healthcare system and access valuable community-based resources.



Incentives for Healthier Living

Incentive programs like My Health Pays® encourage healthy activities, such as regular check-ups and routine screenings, to strengthen the relationships between members and their providers while promoting personal healthcare responsibility.



Helping Mothers and their Babies

Start Smart for Your Baby® is an extensive, award-winning education, care management, and outreach program for pregnant members, new moms, and their babies — helping to lower the risks of premature births and admissions to neonatal intensive care units.

QUALITY means going above and beyond to make sure our members get appropriate preventive care to stay healthy, and that they receive the right care in the right place. As a part of our commitment to the highest quality care for our members, we pursue accreditation by independent organizations such as URAC and the National Committee for Quality Assurance (NCQA) for our programs and health plans across the country, wherever eligible.

URAC ACCREDITATIONS

CASE MANAGEMENT, DISEASE MANAGEMENT, HEALTH UTILIZATION MANAGEMENT, HEALTH NETWORK, PHARMACY BENEFIT MANAGEMENT, SPECIALTY PHARMACY, TELEMEDICINE

NCQA ACCREDITATIONS

CREDENTIALS VERIFICATION ORGANIZATION CERTIFICATION, HEALTH PLAN, LTSS DISTINCTION, MEDICAID MODULE, MULTICULTURAL HEALTH CARE/ HEALTH EQUITY, UTILIZATION MANAGEMENT, CREDENTIALING, MANAGED BEHAVIORAL HEALTHCARE ORGANIZATION

For more information on our programs, partnerships, accreditations and awards, please visit: [centene.com](https://www.centene.com)

*As of December 31, 2022

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