

Provider Introduction AmeriHealth Caritas Florida Family of Health Plans

Provider Network Management

June 2022



Delivering the Next
Generation
of Health Care

Overview

- Who we are
- Join our Provider Network
- AmeriHealth Caritas Florida
- AmeriHealth Caritas VIP Care
- AmeriHealth Caritas Next
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- Medical management
- Quality assurance
- Value-based programs
- How to reach us

Who We Are



Who we are



We are a leader in Health Care Solutions

- AmeriHealth Caritas is one of the nation's leaders in health care solutions for those most in need. Operating in 12 states and the District of Columbia.
- AmeriHealth Caritas serves approximately 5 million Medicaid, Medicare, Children's Health Insurance Program (CHIP), and Health Insurance Marketplace® members through its integrated managed care products, pharmaceutical benefit management and specialty pharmacy services, and behavioral health services.
- Headquartered in Philadelphia, AmeriHealth Caritas is a mission-driven organization with nearly 40 years of experience serving low-income and chronically ill populations. For more information, visit www.amerihealthcaritas.com

Our mission

To help people get care, stay well, and build healthy communities. We have special concern for those who are poor.

Services and Products



Full-risk Medicaid managed care services

AmeriHealth Caritas has a variety of programs and capabilities to meet the medical and social needs of underserved populations. Current capabilities include management and administrative services necessary to operate a state-of-the-art Medicaid managed care organization.

Dual eligible products

AmeriHealth Caritas offers specialized Medicare Advantage dual eligible special needs plans (D-SNPs) and Medicare-Medicaid plans (MMPs). Our approach integrates proven, established care management, preventive services, and other programs that effectively coordinate care for aged, blind, and disabled individuals.

Health Insurance Marketplace

AmeriHealth Caritas Next offers affordable health plans on and off the Exchange to connect members with whole-person care for today, tomorrow, and whatever comes next. **To learn more, visit www.amerihealthcaritasnext.com.**

Services and Products

Behavioral health services

Founded in 1995, PerformCare is a national behavioral health managed care organization that helps health plans and customers provide comprehensive behavioral health management strategies and solutions to optimize clinical outcomes, maximize efficiency, and integrate services. **For more information, visit www.performcare.org.**

Pharmacy benefit management

PerformRx LLC, a clinically focused pharmacy benefit manager, has provided best-in-class pharmacy benefit management services since 1999, including formulary development, drug therapy management, and rebate management, and in 2014 launched a full-service specialty pharmacy, PerformSpecialty. PerformSpecialty is PerformRx's wholly owned and integrated specialty pharmacy. **For more information, visit [www. performrx.com](http://www.performrx.com).**

Specialty pharmacy

PerformSpecialty LLC is a full-service specialty pharmacy dedicated to providing complete pharmaceutical care throughout the patient journey. PerformSpecialty's approach provides high-touch care and programs to help patients achieve the best outcomes. PerformSpecialty is licensed nationwide. **For more information, visit [www. performspecialty.com](http://www.performspecialty.com).**



Corporate History

1983 to 1999

- Established as Mercy Health Plan, a voluntary Medicaid HMO owned by Mercy Health System.
- Master Services Agreement (MSA) with Horizon Blue Cross Blue Shield (Horizon New Jersey Health).
- Mercy Health System joined forces with Independence Blue Cross to form AmeriHealth Mercy Family of Companies (AMFC).
- Mercy Health Plan became Keystone Mercy Health Plan in the Philadelphia region and AmeriHealth Mercy elsewhere.
- Third-Party Administrator (TPA) Services Agreement in Kentucky with University Healthcare (Passport Health Plan).
- Pharmacy benefits management (PBM) services through PerformRxSM.
- Full-risk Medicaid operations in South Carolina (First Choice by Select Health of South Carolina).

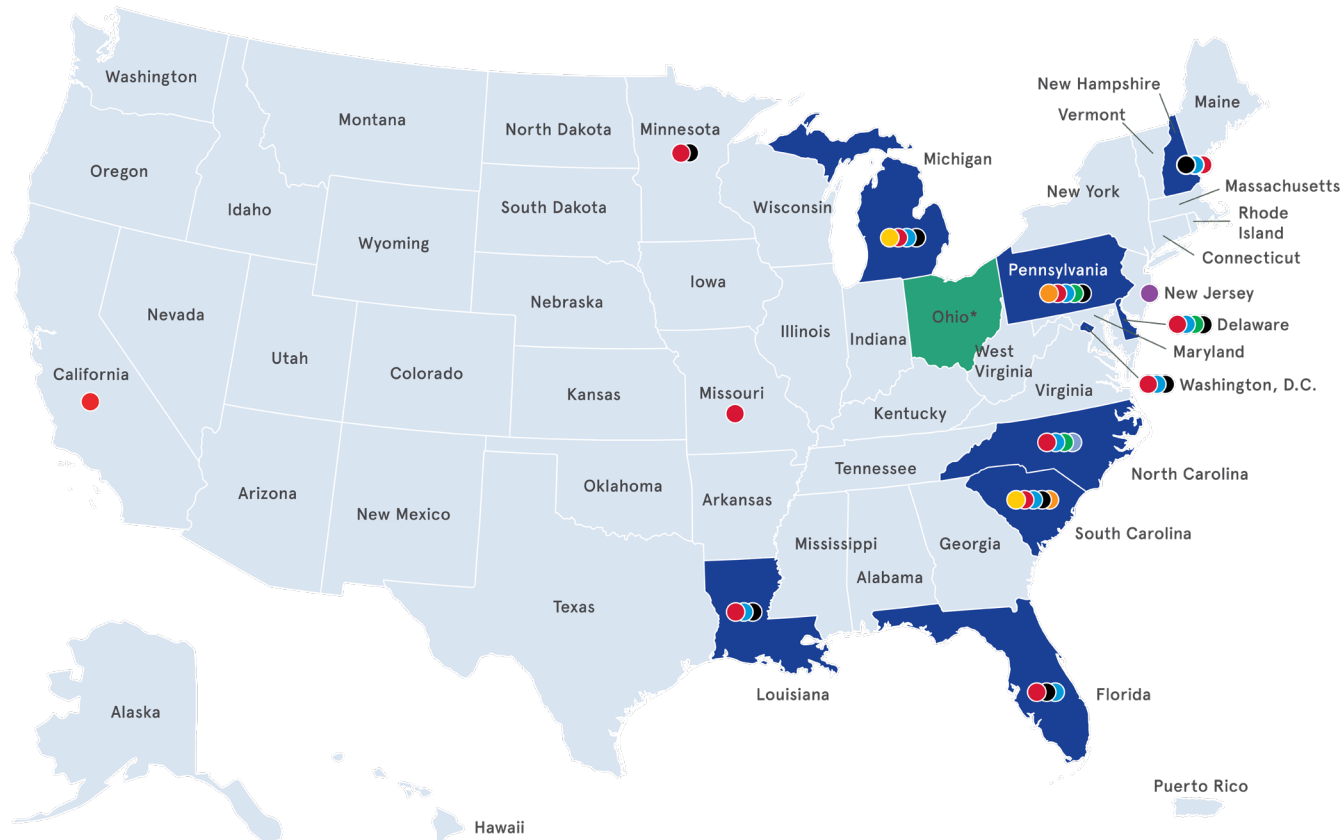
2000 to 2012

- Full-risk Medicaid operations in Indiana with MDwise Inc. (Hoosier Alliance).
- Behavioral health services through PerformCare®.
- AmeriHealth Mercy Family of Companies recapitalized by Independence Blue Cross and Blue Cross Blue Shield of Michigan.
- Full-risk Medicaid operations in Louisiana (AmeriHealth Caritas Louisiana).
- Full-risk Medicaid operations in Nebraska (Arbor Health Plan).

2013 to 2022

- Expansion into the Pennsylvania New East Zone (AmeriHealth Caritas Northeast) and into the New West Zone (AmeriHealth Caritas Pennsylvania).
- AmeriHealth Mercy became AmeriHealth Caritas and Keystone Mercy became Keystone First.
- Medicare D-SNP operations in Pennsylvania (Keystone First VIP Choice).
- Full-risk Medicaid operations in Florida with Florida Blue (Florida True Health).
- Full-risk operations in District of Columbia (AmeriHealth Caritas District of Columbia). Acquired D.C. Chartered Health Plan.
- Administrative Services agreement (ASA) in Michigan with Blue Cross Complete of Michigan.
- Management Services agreement (MSA) in Florida with Prestige Health Choice.
- Specialty pharmacy services through PerformSpecialty®.
- First Choice VIP Care Plus began serving dual eligible residents in South Carolina.
- AmeriHealth Caritas VIP Care Plus began serving dual eligible residents in Michigan.
- AmeriHealth Caritas Iowa selected to participate in Iowa Medicaid managed care program.
- Blue Cross Complete of Michigan expanded to 29 additional counties.
- Awarded contracts for AmeriHealth Caritas Delaware and AmeriHealth Caritas Pennsylvania Long-Term Services and Supports Community HealthChoices.
- Established "Care Crew" national employee volunteer program.
- Acquired 100% ownership interest in Florida True Health.
- Awarded contract for Keystone First Community Health Choices in Southeastern Pennsylvania.
- Awarded contracts for AmeriHealth Caritas New Hampshire, AmeriHealth Caritas North Carolina, and AmeriHealth Caritas Ohio.
- Prestige Health Choice rebranded to AmeriHealth Caritas Florida.
- AmeriHealth Caritas Next begins serving Health Insurance Marketplace members in North Carolina; First Choice VIP Care (D-SNP) begins serving dual-eligible residents in South Carolina.

Where we are



Blue states Existing AmeriHealth Caritas Medicaid health plan markets **Green state** New AmeriHealth Caritas Medicaid health plan market in 2022

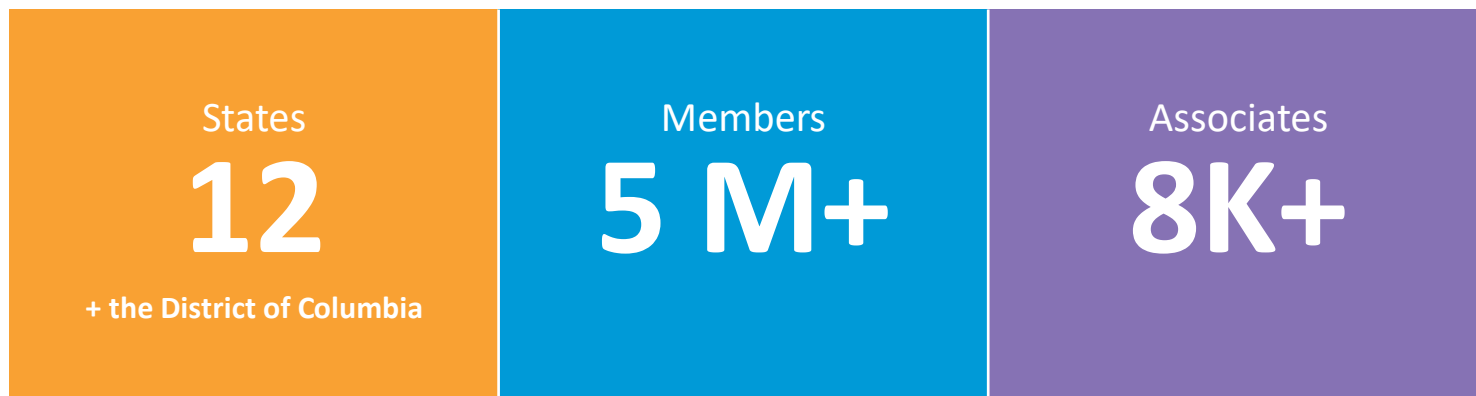
- Dual eligible special needs plan (D-SNP)
 ● Medicare-Medicaid plan (MMP)
 ● Behavioral health managed care
 ● Specialty pharmacy
- Long-term services and supports (LTSS) experience
 ● Pharmacy benefit management
 ● System of Care Administration
 ● Health Insurance Marketplace

*Selected by Ohio Department of Medicaid (ODM) to provide Medicaid managed care services; anticipated go-live July 2022.

Leading managed care organization

Our mission:

We help people get care, stay well,
and build healthy communities.



Join Our Provider Network

Join a provider network where Care is the Heart of Our Work®



Join our Provider Network



Medicaid Expansion in 2025

AmeriHealth Caritas Florida is currently contracted with the Agency for Health Care Administration (AHCA) as a participant in Florida's Statewide Medicaid Managed Care (SMMC) program in regions 9 and 11. As a Florida-based company, AmeriHealth Caritas Florida is dedicated to serving the needs of Floridians enrolled in the SMMC program.

We are developing an expanded network of hospital, physicians and ancillary healthcare Medicaid providers in order to qualify for the SMMC program in 2025. We intend to respond to the Invitation to Negotiate (ITN) for the SMMC that we anticipate will be released in the fourth quarter of this year. Our goal is to work with AHCA to arrange for the delivery of health services, including Long Term Care (LTC) in a larger service area. We want to work with dedicated providers like you to deliver high-quality, coordinated, and integrated health care services to underserved populations throughout Florida.

Join our Provider Network



Effective January 1, 2023, The AmeriHealth Caritas Florida Family of Health Plans will be offering two new health plans:

- **AmeriHealth Caritas VIP Care** is a Medicare Advantage Dual Eligible Special Needs (D-SNP) plan, for individuals entitled to Medicare Part A, enrolled in Medicare Part B, and receiving Medical assistance for certain categories of aid. This plan offers enhanced benefits that are not normally provided under traditional Medicare.
- **AmeriHealth Caritas Next**, a Qualified Health Plan, which will be offered on the Florida Health Insurance Market place to continue to serve our members who are no longer eligible for Medicaid, and to serve other enrollees who are unable to obtain health insurance through their employer, Medicaid, or Medicare.

AmeriHealth Caritas VIP Care



AmeriHealth Caritas VIP Care



Medicare Advantage Dual-Eligible Special Needs Plan (D-SNP)

The dual-eligible special needs Medicare Advantage plan, AmeriHealth Caritas VIP Care, was created to offer Medicare and Medicaid eligible beneficiaries the opportunity to receive coordinated benefits and efficiently and effectively manage their care.

AmeriHealth Caritas VIP Care provides coverage for:

- Medicare Parts A and B.
- Medicare Part D prescription drug benefits.
- Supplemental benefits.
- Coordination of the care of members who are receiving Medicaid benefits from the state.

D-SNP plans coordinate benefits across Medicaid and Medicare, and typically enrollees will have very little cost sharing responsibilities.

The Model of Care

The Model of Care is a high-quality, patient-centric medical care delivery system for dual eligible Medicare-Medicaid members. It brings together multiple disciplines as an interdisciplinary team to provide input and expertise for a member's individualized care plan. This plan is designed to maintain the member's health and encourage their involvement in their health care.

The development of this team begins with a group of Care Connectors and Care Managers who gather information on members and help members modify their behavior and how they access health care.

AmeriHealth Caritas VIP Care – Model of Care

Why is the Model of Care for dual eligibles so important?

Dual eligibles are:

- Three times more likely to live with a disabling condition than the general Medicare population.
- More likely to have greater limitations in activities of daily living, such as bathing and dressing.
- More likely than non-dual eligibles to suffer cognitive impairment and mental disorders.
- Prone to higher rates of pulmonary disease, diabetes, stroke, and Alzheimer's disease.
- Often in need of in-home care providers, plus a range of doctors and other health care and social services providers, as a result of these more serious health conditions.

AmeriHealth Caritas Next

The information regarding AmeriHealth Caritas next applies to AmeriHealth Caritas Next individual health insurance products both on and off the exchange.



AmeriHealth Caritas Next



A product of AmeriHealth Caritas Florida, Inc.

Health Insurance Marketplace®

AmeriHealth Caritas Next will be available on the Florida Health Insurance Marketplace for residents in select counties. AmeriHealth Caritas Next will offer affordable health plans for eligible individuals or families who do not have coverage through their employer, and do not qualify for Medicare or Medicaid.

Participating in the Health Insurance Marketplace aligns with our vision to empower those in need across their full life journey, by providing a health insurance option for those who otherwise would have no access to health insurance coverage. It allows you, the provider, to continue to work with your patients under a commercial reimbursement arrangement, once they are no longer eligible for Medicaid.

Health insurance marketplace plans are offered in standardized 'metal tiers', with the most popular 'silver' tier offering roughly 70% AV (i.e., on average, members will pay 30% of healthcare costs for covered essential health benefits out of pocket). Preventive care is typically fully covered by the plan and the Affordable Care Act (ACA) offers premium subsidies based upon a household's size and income.

Why AmeriHealth Caritas?



Why Amerihealth Caritas?

In 2021, AmeriHealth Caritas' corporate systems and centers:

- Handled over 2.5 million member and provider calls in our 24/7 call centers.
- Facilitated an average of 2.4 million inquiries monthly through our robust web-based provider portal.
- Processed an 50.4 million claims in 2021.
- Received more than 97.4% of provider claims electronically with an automatic adjudication rate of over 90.1%

How we can support you

Our goal is to support providers with the tools and technology necessary to streamline administrative processes so that providers have more time to deliver member care. We pride ourselves in maintaining the flexibility to customize our systems to accommodate the unique requirements of every market with:

- Dedicated local staff.
- Electronic solutions.
- Population health programs.
- PerformPlus® value-based programs.

Dedicated local staff

When you join AmeriHealth Caritas, a local and knowledgeable Provider Network Management Account Executive who is well-versed in both physical and behavioral health care will be assigned to your area.

To support our shared initiatives and programs, we will also have some Account Executives with specialty backgrounds (e.g., in substance use disorder), to participate in our Recovery Care Team or other collaborative programs.

Your dedicated Account Executive will routinely meet with you to provide orientations, review education needs, and provide assistance with any questions you may have.



Electronic solutions to ease administration

Our e-Solutions can help you optimize productivity through:

- Claim status inquiry.
- Efficient claims submission.
- Accurate, timely, and secure reimbursement.
- Earlier detection of claim errors.
- Faster claim and billing reconciliation.
- Reduced paper workload for your organization.
- Lower administrative, postage, and handling costs.

Electronic solutions to support patient care management

Our secure provider portal offers web-based solutions that allow providers and health plans to share critical administrative, financial, and clinical data in one place. This tool can help you manage patient care with quick access to:

Member eligibility and benefits information.

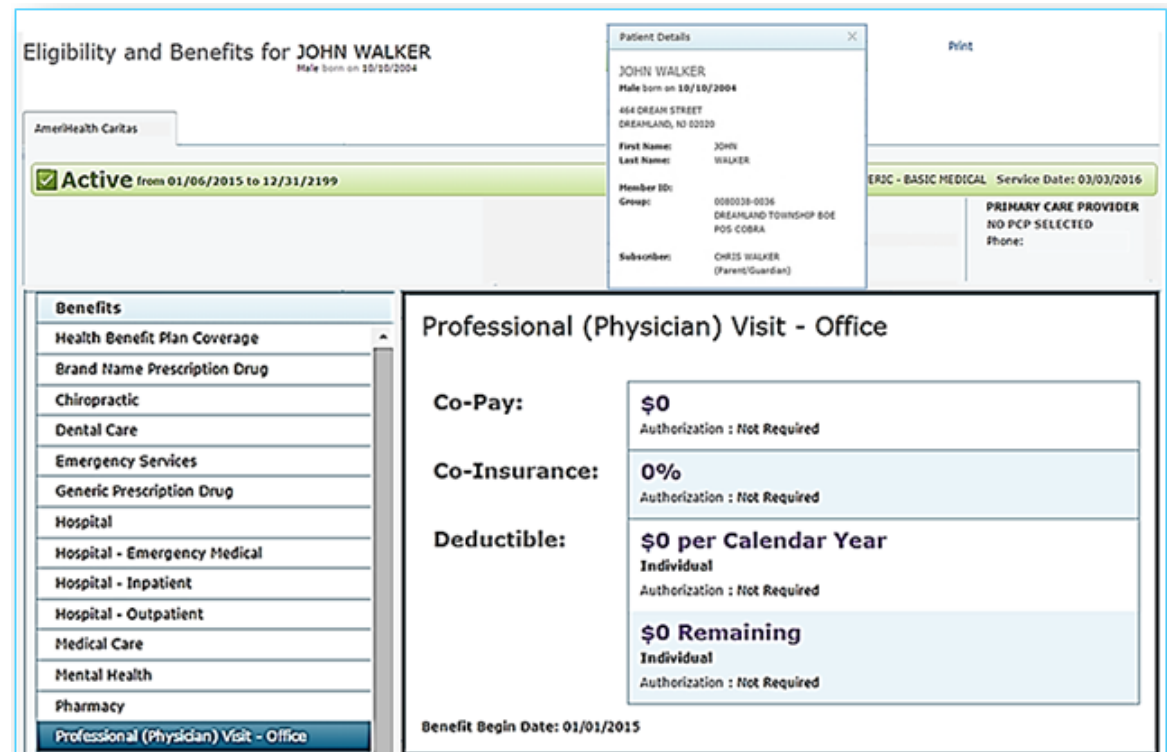
Panel roster reports.

Care gap reports to identify needed services.

Member clinical summaries.

Admission and discharge reports.

Medical and pharmacy claims data.



The screenshot displays the 'Eligibility and Benefits for JOHN WALKER' page. At the top, it shows the patient's name, date of birth (10/10/2004), and address (464 DREAM STREET, DREAMLAND, NJ 08020). A green bar indicates the member is 'Active' from 01/06/2015 to 12/31/2199. A 'Patient Details' pop-up window shows the first and last names (JOHN WALKER), member ID (000000-0036), group (DREAMLAND TOWNSHIP BOE POS COBRA), and subscriber (CHRIS WALKER, Parent/Guardian). The 'Benefits' section on the left lists various services, with 'Professional (Physician) Visit - Office' selected. The right side shows the details for this benefit: Co-Pay is \$0, Co-Insurance is 0%, and the Deductible is \$0 per Calendar Year. The benefit begins on 01/01/2015.

| Eligibility and Benefits for JOHN WALKER | |
|--|--|
| Male born on 10/10/2004 | |
| AmeriHealth Caritas | |
| <input checked="" type="checkbox"/> Active from 01/06/2015 to 12/31/2199 | |
| Benefits | Professional (Physician) Visit - Office |
| Health Benefit Plan Coverage | Co-Pay: \$0 |
| Brand Name Prescription Drug | Authorization : Not Required |
| Chiropractic | Co-Insurance: 0% |
| Dental Care | Authorization : Not Required |
| Emergency Services | Deductible: \$0 per Calendar Year |
| Generic Prescription Drug | Individual |
| Hospital | Authorization : Not Required |
| Hospital - Emergency Medical | \$0 Remaining |
| Hospital - Inpatient | Individual |
| Hospital - Outpatient | Authorization : Not Required |
| Medical Care | |
| Mental Health | |
| Pharmacy | |

Image is for illustrative purposes and does not contain actual patient or provider data.

Provider resources

The AmeriHealth Caritas Florida Family of Health Plans are dedicated to supporting our participating providers and making the information they need available at their fingertips. We keep you informed through the following communication methods:

- Online Provider Manual.
- Timely notification of Plan updates.
- Dedicated provider website section.
- Provider education.
- Regular visits from your assigned local Account Executive.

Excellent provider communication and service are organization-wide priorities.

Searchable online tools:

- Online provider directory.
- Drug formularies.

Medical Management



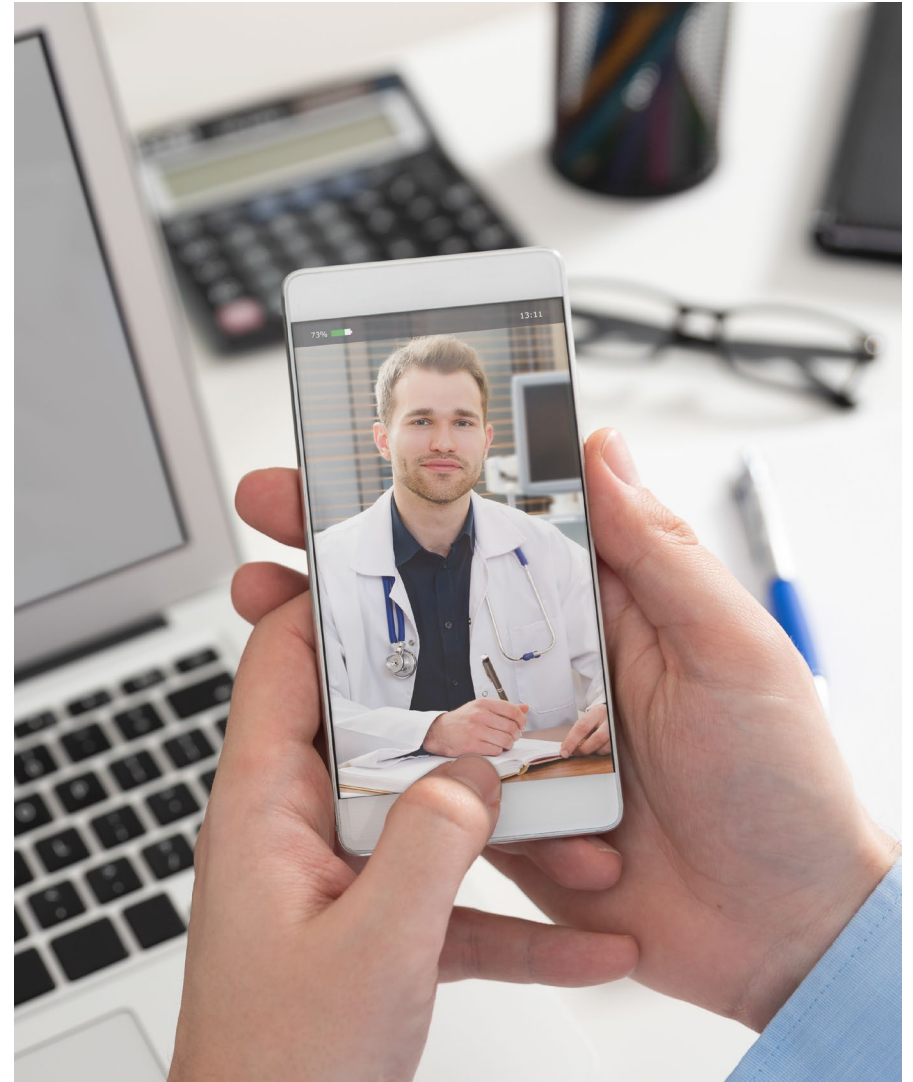
Medical Management

Our multifaceted approach addresses the needs of our members, connecting them with the health care and services they need to get well and stay well. Our approach includes:

- Engaging, educating, and empowering members to actively participate in improving their health outcomes.
- Providing members with the information they need when they need it through our use of technology and member portals.
- Involving members, parents or guardians, care team members, providers, behavioral care providers, social services, and community group representatives in the care planning and management process.
- Using community-based services to avoid or delay institutional care, supporting members who desire to remain in a home- and community-based setting.

Telemedicine

To expand access to care, AmeriHealth Caritas members have access to telemedicine and telehealth services. Virtual visits allow members to see a physician or qualified health care provider in a distant location without going to that location.



Quality Assurance



Quality Assurance

The AmeriHealth Caritas Quality Assessment Performance Improvement (QAPI) program provides a framework for evaluating the delivery of health care and services provided to members.

Develops:

- Goals and strategies considering applicable state and federal laws and regulations and other regulatory requirements, National Committee for Quality Assurance (NCQA) accreditation standards, evidence-based guidelines established by medical specialty boards and societies, public health goals, and national medical criteria.
- Preventive health and clinical guidelines using criteria established by nationally recognized professional organizations and input from AmeriHealth Caritas clinical experts.
- Uses performance measures such as Healthcare Effectiveness Data and Information Set (HEDIS®), consumer and provider surveys, and available results of the External Quality Review Organization (EQRO), as part of its QAPI program.

Attaining excellence – NCQA and URAC



NCQA Health Plan Accreditation

- AmeriHealth Caritas Pennsylvania (since 2001)
- Keystone First (since 2001)
- Select Health of South Carolina (since 2010 — previous URAC certification)
- AmeriHealth District of Columbia (since 2014)
- AmeriHealth Caritas Louisiana (since 2015)
- Blue Cross Complete of Michigan (since 2015)
- AmeriHealth Caritas Florida (since 2018)
- AmeriHealth Caritas Delaware (since 2020)
- AmeriHealth Caritas New Hampshire (since 2020)

NCQA Multicultural Health Care Distinction

- AmeriHealth Caritas Pennsylvania (since 2010).
- Keystone First (since 2010).
- First Choice by Select Health of South Carolina (since 2010).
- Blue Cross Complete of Michigan (since 2015).
- AmeriHealth Caritas Louisiana (since 2017).
- AmeriHealth Caritas District of Columbia (since 2019).

URAC Pharmacy Benefit Management, Drug Therapy Management, and Specialty Pharmacy Accreditations

- PerformRx.
- PerformSpecialty.

NCQA Managed Behavioral Healthcare Organization Accreditation

- PerformCare.

NCQA Utilization Management Accreditation

PerformRx.

NCQA Credentialing Verification Organization (CVO) Accreditation

- AmeriHealth Caritas Family Of Companies

AmeriHealth Caritas health plans were three of the first seven plans to receive NCQA's Multicultural Health Care Distinction.

Value Based Programs Currently Implemented for our Medicaid Plans



AmeriHealth Caritas Value-Based Strategy

Goal

Build effective collaborations with health care providers to help individuals access care, stay well, and build healthy communities.

Innovative provider
partnership and payment
models

Practice support and
resources

Specialized programs to
improve health outcomes

Local Joint Operating
Committees

Key components of a successful strategy.

Tailored value-based
reimbursement
programs

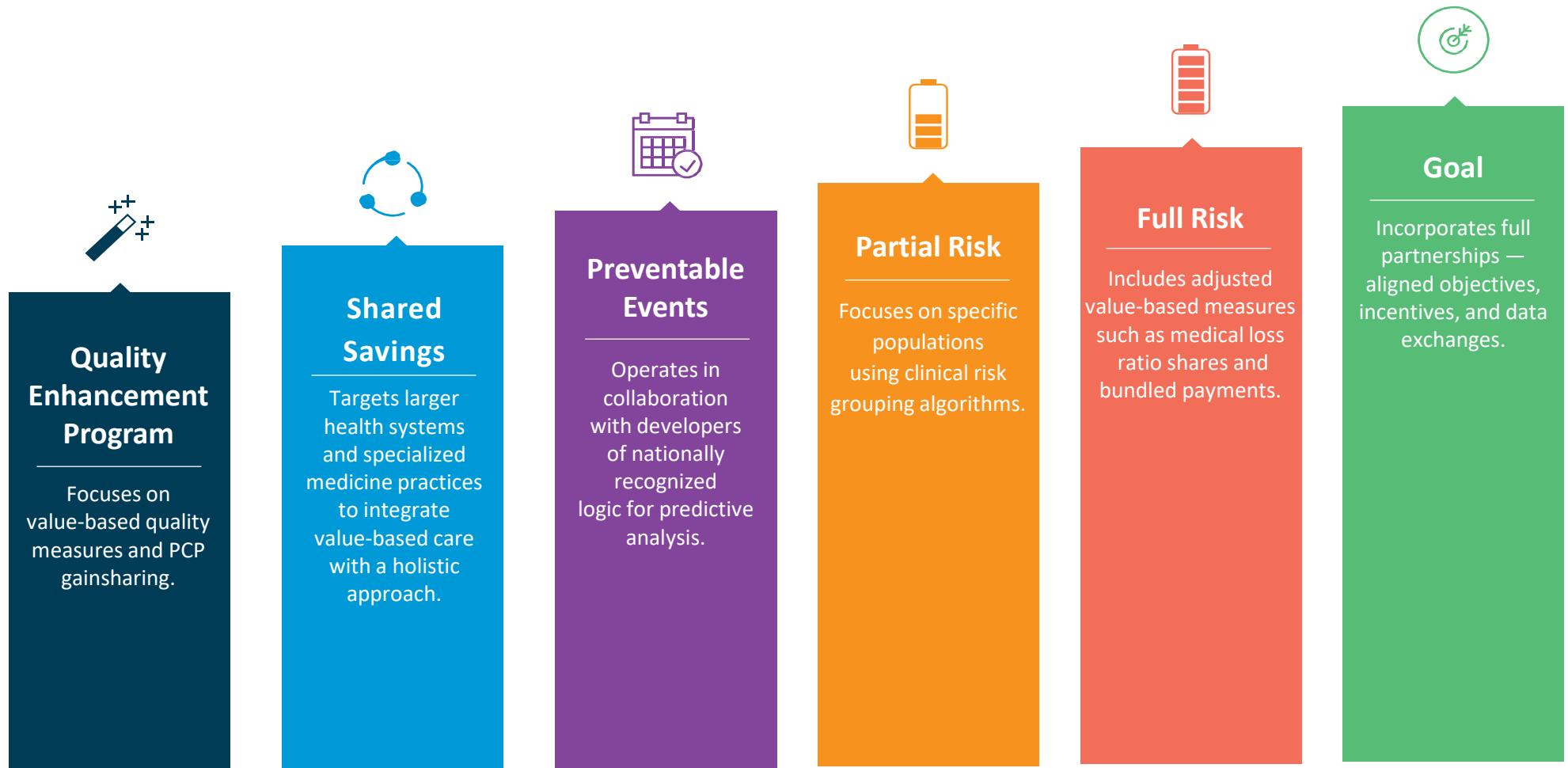
Market-specific
practice transformation
support

Timely and actionable
data at point of care

Multi-stakeholder
engagement



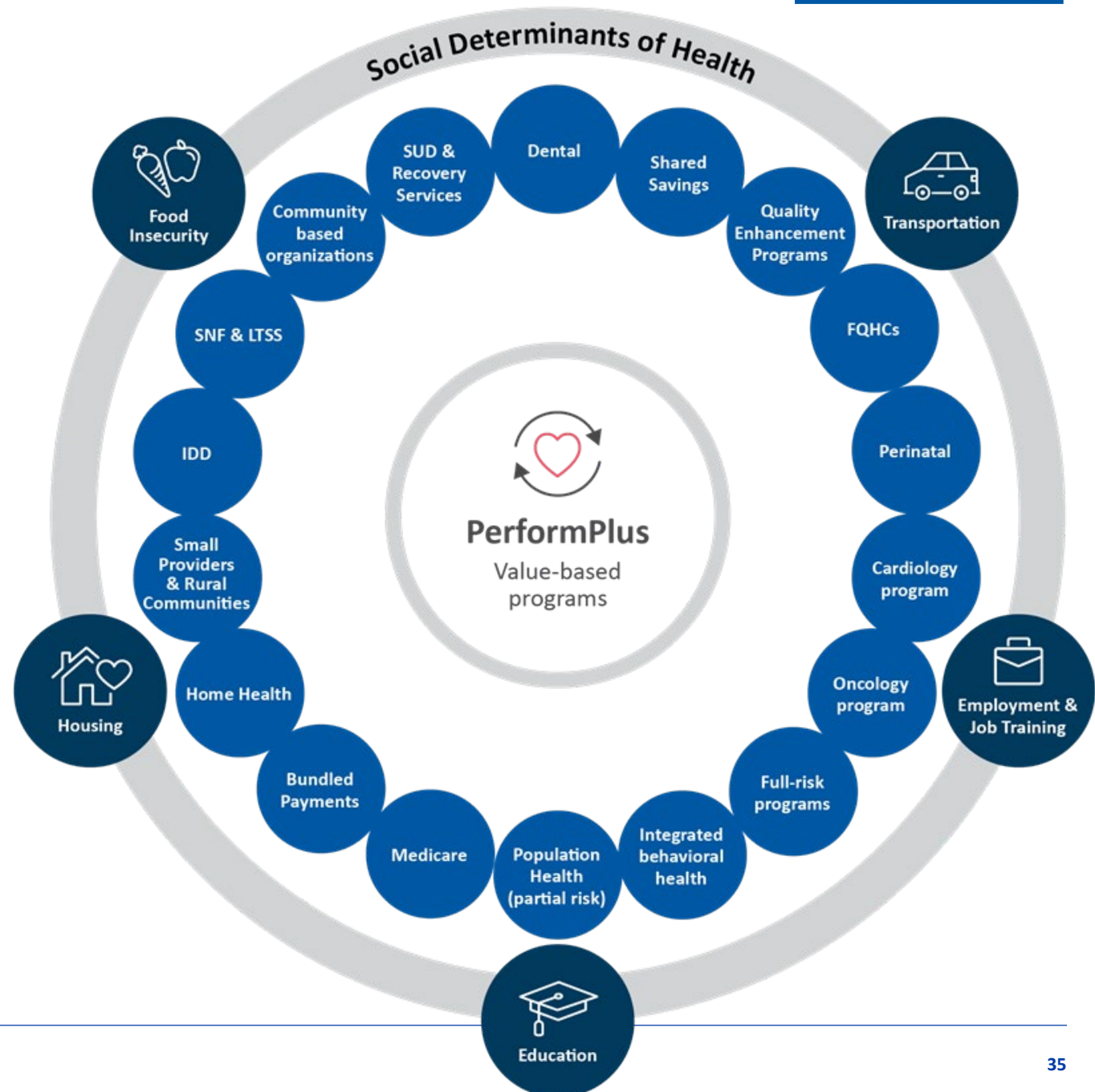
Transitioning to a value-based system



PerformPlus® Portfolio of Programs

AmeriHealth Caritas PerformPlus® value-based portfolio is designed to advance our company's vision for quality.

Our suite of value-based programs offers a wide array of value-based programs focused on partnering with health care providers for quality improvement.



Achieving growth in our value-based programs

MEMBERS attributed to/cared for by all providers across all Medicaid health plans in the AmeriHealth Caritas Family of Companies:

2,504,709*

ACTIVE members that are attributed to/treated by providers in Value Based programs:

2,130,371*

PERCENT ACTIVE members that are attributed to/treated by providers in Value Based programs:

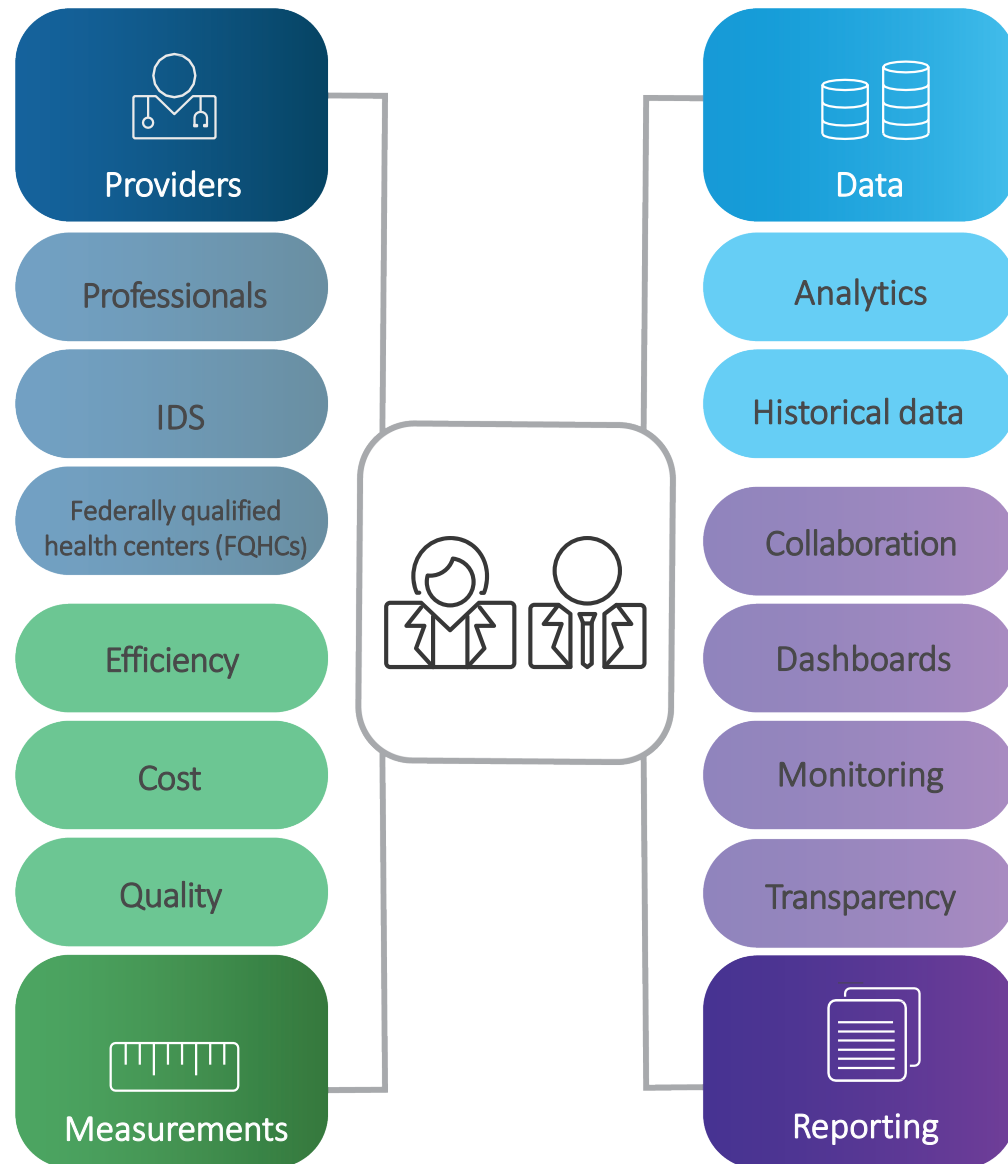
85.05%*



*As of October 2021

Tailoring Programs to Align with State and Practice Needs

Our adaptable, customized solutions are easily transferrable between markets and maintain our ability to augment our value-based programs for state-specific initiatives.



Increasing access to data and reports

Data transparency through reporting PerformPlus delivers on AmeriHealth Caritas' strategic goal to increase access to and use of actionable data through our interactive web-based dashboards available on a secure portal. These dashboards are available for most PerformPlus programs and provide participants with a greater range of facility and member-level health care data such as potentially preventable events, HEDIS[®] quality measures, social determinants of health (SDOH), and patient experience

Unique provider groups with web based access to value based performance metrics and reports:

2545*

Dashboards developed to share essential data and reports with providers participating in value based arrangements. Thirty different dashboards under development.

members that are attributed to/treated by providers in Value Based programs:

79*

*As of January 2022

How to Reach Us



How to reach us



Contact your Provider Network Management representative or

By phone: 1-800-617-5727

By email: PNM_Inquiries@amerihealthcaritasfl.com

Questions?

