### A Executive Summary

#### **REQUIREMENT: RFP Section 60.7.A**

Provide an Executive Summary that summarizes the Vendor's proposed staffing and organizational structure, technical approach, and implementation plan. The Executive Summary must include a statement of understanding and fully document the Vendor's ability, understanding and capability to provide the full scope of work. Address the following, at a minimum:

- 1. The Vendor's statement of understanding of the healthcare environment in the Commonwealth, the Kentucky Medicaid program and vision for this procurement, and needs of Medicaid Enrollees.
- 2. An overview of the Vendor's proposed organization to provide coordinated services under the Contract.
- 3. A summary of the Vendor's strategy and approach for administering services for Enrollees.
- 4. A summary of the Vendor's strategy and approach for establishing a comprehensive provider network.
- 5. A summary of innovations and initiatives the Vendor proposes to implement to achieve improved health outcomes for Enrollees in a cost effective manner. Include a discussion of challenges the Vendor anticipates and how the Vendor will work to address such challenges.

As a government programs-focused MCO, Kentucky's Enrollees and providers will see the Molina difference from Day 1—from consumer-focused education and concierge-level services to provider and community partnerships, Molina Healthcare of Kentucky, Inc., will deliver results that matter.

The Commonwealth of Kentucky, Cabinet for Health and Family Services (CHFS), Department for Medicaid Services (Department) desires a partner who can deliver high-quality care, enhanced services, and improved individual and population health outcomes for Enrollees in a cost-efficient and effective manner to enhance the Commonwealth's existing Medicaid managed care system. With our demonstrated commitment to Enrollee well-being and our strong track record of delivering results across a diverse group of states, Molina is that partner.

Our *Medicaid-focused approach* is built upon our whole-person, locally based care philosophy of meeting Enrollees where they are—whether we are serving mothers and children or disabled adults in urban or rural settings. What this means is *the Commonwealth, Enrollees, providers, and Kentucky stakeholders will not suffer from enterprise-wide decisions made for commercial lines of business*. Kentucky will witness how Molina's grassroots approach to becoming local experts benefits everyone we touch as we build and expand on robust partnerships with local community-based organizations (CBOs) and educational systems—including early childhood, K–12, and colleges, and universities—and collaborate with the Commonwealth, other MCOs, and providers to create innovative, targeted solutions for all areas of Kentucky.

Molina's values, our guiding principles, will be reflected in our approach to service delivery: We believe we must demonstrate *integrity always* in an *Enrollee- and community-focused* way. Every Molina employee understands that to *improve the health and lives of our Enrollees*, we must live *absolute accountability*, practice *honest and open communication*, and create a *supportive teamwork* environment every day. It is because of our organization's strong values, demonstrated through each interaction we have at the corporate and health plan levels, that we are proud to state *we have never left a state during a contract*. Rather, Molina's history is one of strong partnerships with every state in which we operate, ensuring that Medicaid Enrollees can access the high-quality services they need to live healthy, productive lives.

#### **1. UNDERSTANDING KENTUCKY'S HEALTHCARE ENVIRONMENT**

#### COMMONWEALTH HEALTHCARE ENVIRONMENT

Since the Affordable Care Act became fully effective, Kentucky has been a national leader in reducing its uninsured rate, and the Commonwealth's successful Medicaid expansion has been a core driver of this achievement. Having laid the foundation for population-level health improvements by dramatically

increasing coverage rates, Kentucky is poised to capitalize on the many opportunities to improve the individual and population health of Kentuckians. With an overall health ranking and several key population health metrics that rank near the bottom nationally (e.g., childhood obesity, drug overdose death rate, life expectancy)<sup>1</sup>, the Commonwealth has a strong incentive to consider new MCOs with demonstrated track records of delivering holistic models of care and innovative solutions and that recognize a one-size-fits-all approach does not work in Kentucky.

We understand Kentucky's needs are driven by the unique needs and opportunities present in each Region, and we are particularly committed to addressing the health disparities that exist across the Commonwealth. *We share the Commonwealth's passion and commitment to meeting Kentucky health challenges head on*, bringing all stakeholders together to identify and address root causes of these disparities and collaborate on targeted programs and initiatives to drive better Enrollee health outcomes.

Medicaid is a vital part of the Kentucky healthcare ecosystem, with nearly one-third of Kentuckians enrolled in or eligible for the program; however, the healthcare environment in the Commonwealth is challenged by its current healthcare system, which suffers from provider shortages and access challenges—particularly in rural and underserved areas. For example, the Commonwealth continues to suffer from high health morbidities, limited access to care in rural locations and demonstrated access challenges in underserved urban areas, and a substance use disorder (SUD) epidemic (based on a recent Centers for Disease Control and Prevention [CDC] study) that puts nearly half of all counties in the Commonwealth at risk for an HIV or hepatitis C outbreak.

In addition, the Department for Public Health is looking to MCOs to collaborate on efforts to improve population health outcomes for issues such as tobacco use, infant mortality, low birth weights, and preventable hospitalizations, as well as support for Enrollees with chronic diseases (e.g., asthma, diabetes, cardiovascular disease, lung cancer), wellness and prevention needs (e.g., childhood obesity), behavioral health needs, and SUDs. Molina's documented history of such population health work makes us an ideal partner to help drive the public health improvements the Commonwealth seeks.

#### KENTUCKY MEDICAID PROGRAM AND VISION FOR THIS PROCUREMENT

While Kentucky's Medicaid program enrollment has remained relatively constant over the past several years, the increasing share of the Commonwealth's budget devoted to Medicaid creates a heightened need-and opportunity-for MCO partners that can deliver high-quality care in a cost-effective manner. Through this procurement, the Commonwealth seeks MCO partners to collaborate across the healthcare ecosystem to improve health outcomes, enhance the Medicaid managed care system, focus on enhanced access and higher quality while simultaneously implementing cost-efficient and effective operations, and craft innovative, targeted solutions to address Kentuckians' most pressing issues.

#### Connecting Kids to Coverage: Region 8 Application Assister Program

Molina understands medical coverage is foundational to health, particularly among children. To that end, Molina has provided financial support to expand the Kentucky Primary Care Association's (KPCA) Connecting Kids to Coverage: Region 8 Application Assister Program to assist with Medicaid enrollment and help children receive covered healthcare screenings.

We support the administration's goal of ensuring all Kentucky families, especially Kentucky children, have health coverage and receive the benefits they need.

#### **NEEDS OF MEDICAID ENROLLEES**

While health insurance is a necessary precondition for individual and population well-being, the evidence is clear that health outcomes are also driven by factors outside the traditional healthcare system. Molina's expertise and demonstrated success in partnering with stakeholders to address the social determinants of

<sup>&</sup>lt;sup>1</sup> As reported by The Commonwealth Fund and the Kaiser Family Foundation

health make us well-positioned to help the Commonwealth drive both improvements in health outcomes and reductions in health disparities that exist across regions, socioeconomic status, gender, and racial and ethnic groups. In addition, Molina has a deep history of improving access to care for Medicaid members and is committed to leveraging that expertise to ensure Kentucky Enrollees can get the care they need. *To achieve these outcomes, Molina will offer targeted solutions in partnership with stakeholders to address Enrollees' needs.* 

**Social Determinants of Health.** Social determinants of health include basic human needs such as access to food, housing, income, employment, transportation, and education. When challenges to these basic human needs exist, like they do throughout Kentucky, disease morbidity and mortality increases and health outcomes suffer.

Molina has already begun to partner with CBOs across the Commonwealth to address Enrollees' social determinants of health needs, engaging a network of stakeholders to create a foundation on which we can build to deliver improved health outcomes for Enrollees. Collaborating with CBOs that align with our charge to help the underserved, including Feeding America Kentucky's Heartland, Dare to Care Food Bank, The Boys & Girls Club of Bowling Green, Louisville Urban League, God's Pantry Food Bank, Audubon Area Community Services, United Way of Northeast Kentucky, Home of the Innocents, Good Industries of Kentucky, and Family Scholar House, *we have provided \$525,000 in financial contributions to these organizations to address Enrollees' needs, such as food insecurity, housing needs, health screenings for children, and transportation challenges in rural communities.* 

**Working to Reduce Food Insecurity.** One highlight of these partnerships has been our collaboration with Feeding Kentucky to address food insecurity among Kentuckians. Through our work with Feeding Kentucky, we know that 15.8% of Kentucky households (399,590 residents) report food insecurity; 11 Kentucky counties have childhood food insecurity rates of 30% or higher; and 29.8% of Kentuckians in food-insecure households have incomes above 185% of the poverty line, making many ineligible for most federal nutrition assistance programs. Food insecurity negatively impacts Enrollee health; for example, low-income adults who are food insecure are twice as likely to have diabetes as low-income, food-secure adults. Addressing this insecurity requires ensuring Enrollees have access to regular sources of nutrient-rich food, thereby enabling them to successfully address their healthcare needs.

In Mississippi, our affiliated health plan partnered with Alcorn State Extension and Foot Print Farms, traveling to various communities throughout the state to distribute fresh fruit and vegetables to members. They found members were receptive to those efforts and appreciated the fresh food provided at no cost to them.

**Community Health Workers.** Molina is particularly proud of our Molina Community Health Worker program, a proven initiative that connects Enrollees with the healthcare and other resources they need by partnering with trusted community members to serve as liaisons and navigators. Molina Community Health Workers will become a vital part of the Kentucky healthcare system by supporting and facilitating Enrollee access to the right services at the right time in the right location. Beyond healthcare services, our Molina Community Health Workers will assist Enrollees with housing, food, clothing, and transportation needs, scheduling appointments, and more.

#### Member Success Story: Housing Assistance

In our Ohio affiliate, a 46-year-old member with two children and a history of chronic homelessness was living in a shelter and could not find Section 8 housing in the community. She also struggled with depression and issues with past traumas. The Ohio plan housing specialist met with the member to discuss options for housing, contacted landlords in the community, and located one who would accept a housing choice voucher. The housing specialist also ensured the situation would meet the member's needs, and the member and her children moved into their new home.

Health Disparities. Health disparities, or preventable inequalities experienced by socially disadvantaged populations, exist across the Commonwealth and include disparities among urban and rural populations, racial and ethnic groups, genders and sexual orientations, housing status, and others. Health disparities result from a variety of factors such as poverty, access to healthcare, environmental threats, and inequities in education. For Enrollees experiencing a combination of food insecurity, housing needs, and transportation challenges along with extreme poverty and limited options to receive basic healthcare services, disease rates increase, leading to significant decreases in quality of life and life expectancy.

For example, 29 of the 100 poorest counties in the U.S. are in southeastern Kentucky, and residents in these Appalachian counties have limited provider options for both primary care and

#### **Expungement and Reintegration**

Molina understands the barriers the formerly incarcerated face in fully reintegrating into communities contribute to difficulties in improving health among this population. To help address these barriers, Molina is supporting Louisville Urban League to promote their free expungement clinics that address a variety of unique barriers Enrollees experience as they reenter the community.

In addition, we are partnering with Goodwill Industries of Kentucky to expand their RISE program into Lexington. RISE helps Enrollees overcome barriers to entering the workforce by providing coursework and workshops. For example, Enrollees can learn communication skills, take courses on financial literacy, become a certified forklift operator, and participate in mock job interviews, among many other topics.

specialists, lower incomes, lower education levels, and higher health problems. Unsurprisingly, these areas also have reduced access to options for physical activity, healthy foods, clean drinking water, and tobacco-free environments. Health disparities exist both within and among counties; for example, within Jefferson County, life expectancy correlates closely to neighborhood and zip code, ranging from 69.64 to 82.21 years across the county. And, across the Commonwealth, life expectancy at birth ranges from an average high of 79 years in Oldham County in Region 3 to an average low of 70 years in counties like Breathitt, Perry, and Wolfe in Region 8. *Such disparities are inherently inequitable, and it is Molina's mission to partner with stakeholders to address the factors that drive these disparities.* 

To help address Enrollees' health disparities, we will collaborate with leading organizations, including the Foundation for a Healthy Kentucky, Kentucky Voices for Health, Kentucky Youth Advocates, KPCA, and many others to address unmet health needs, improve access to care, reduce health disparities, and promote health equity. From embedding care managers in primary care provider (PCP) sites, to engaging Enrollees and providing them with education and assistance, to developing a provider network that includes telehealth, mobile clinics, and bordering state providers, to offering our Care Connections program that delivers in-home visits via Molina nurse practitioners when access is an issue, Molina will tackle health disparities head on.

Access to Care. A main goal of the Healthy Kentuckians 2020 initiative continues to be improving access to comprehensive, quality healthcare services, including dental health services. With more than 1.16 million Kentuckians residing in a Health Professional Shortage Area, Kentucky ranks 42nd nationally in the number of providers per 100,000 residents.

Understanding Kentucky's challenges related to Medicaid network access and adequacy, especially in rural and Health Provider Shortage Areas, we have built a provider network to expand Enrollees' access to care. Molina will:

- Offer telehealth as a tool for facilitating access to needed services in a clinically appropriate manner that are not available within our network
- Augment and increase Enrollee access to our network by supporting traditionally underserved and non-urban communities with pop-up clinics and mobile health delivery via Molina's Care Connections nurse practitioners
- Support Enrollees' access to services using Molina Community Health Workers who, acting as extensions of our Care Management team, will assist Enrollees in navigating their healthcare needs and connecting them to community-based resources, education, advocacy, and social supports
- Deliver teledentistry services through our subcontractor Avesis' dental network providers
- Partner with Project ECHO to increase capacity in Kentucky's rural areas

#### **Partnerships with Local Detention Centers**

In 2014, our Ohio affiliate launched a program for justice-involved individuals. Working with the Ohio Department of Rehabilitation and Correction, health plan care managers initiated contact with members while incarcerated, performed an assessment, and identified key factors needed to support the member upon release. They coordinated both physical health and behavioral health needs, identified and addressed social determinants of health, and promoted medication adherence.

Molina Healthcare of Ohio's participation in this program has resulted in a **reduced recidivism rate from 57%** before the program to 14% because of their interventions. Additionally, they have seen a **reduction in emergency department (ED) use of 64%** by these members compared to other justice-involved members who did not participate in the program.

To help address and mitigate the significant workforce shortage challenge of behavioral health professionals, particularly in rural and underserved areas, we are pursuing several strategies with key partners, including using licensed associates, bachelors-level trained behavioral health staff, peers, and community health workers. Our agency-level credentialing will allow providers to use a range of behavioral health-trained staff beyond licensed professionals, including community-based staff who are local and able to outreach to Enrollees who are not able to travel to clinics. Molina will also work to support initiatives that direct behavioral health resources toward rural and underserved areas.

Together with the Commonwealth, we can ensure all Enrollees—regardless of location, education level, or other socioeconomic factors—have improved access to needed care.

#### 2. MOLINA'S PROPOSED ORGANIZATION

The Molina enterprise has a simple mission: *to improve the health and lives of our members by delivering high-quality healthcare*. Our mission has seen us grow from a single clinic in 1980 to a healthcare company of national scope today. And, our mission aligns perfectly with the vision and goals of Kentucky Medicaid—a whole-person approach to Medicaid is your focus and ours, too.

#### **OUR LOCAL HEALTH PLAN MODEL**

Our local health plan model, which will be staffed and led by Kentucky residents, will ensure we understand Enrollee needs, engage and support our providers, and deliver on program requirements. Because we do not subcontract our core care management services for both physical health and behavioral health needs, our functional structure is built on the principles of true physical health /

#### **Commitment to West Louisville**

Molina's commitment is to locate our health plan staff and headquarters in West Louisville, subject to availability of space.

behavioral health integration with an emphasis on whole-person care. For Enrollees, this means streamlined, easily accessible, coordinated care without the frustrations and lag times other MCOs may impose. We will support Enrollees, caregivers, families, and the Commonwealth throughout Kentucky using a two-part local model consisting of a health plan office and Molina One-Stop Help Centers.

#### **Kentuckians Serving Kentuckians**

We have used our high-touch staffing model—tested and proven in Molina's affiliated health plans across the country—to determine we need approximately 445 Molina employees across the Commonwealth, assuming a membership of 300,000 Enrollees, to support the Kentucky Medicaid program within the health plan office and Molina One-Stop Help Centers located throughout the Commonwealth. *Molina's commitment is to locate our health plan staff and headquarters in West Louisville, subject to availability of space.* 

Molina's organizational structure centers on two key strategies to support whole-person integrated care, population health, and overall improvement of health outcomes in a cost-effective manner. First, we will integrate community-based teams and staff to enable us to directly and personally connect with Enrollees and providers. Second, in contrast to many MCOs, we will deploy a fully integrated care management model in which we directly administer behavioral health services without use of a subcontractor or affiliate.

Our fully integrated model will benefit Enrollees by improving relationships through trusted, close coordination with a consistent team of Molina supports and will provide information in real-time that allows for informed, timely, and whole-person care.

#### Medicaid-exclusive Kentucky Implementation Team

Molina's Kentucky health plan Implementation team will be led by three tenured professionals who will serve on an interim basis: *Chief Executive Officer (CEO) Dwayne Sansone, Medical Director Dr. Jason Dees, and Behavioral Health Director Dr. LaTonia Sweet*. As a lifelong Kentuckian who received her MD from the University of Kentucky, Dr. Sweet is Board Certified in Psychiatry and Addiction Medicine and will help ensure we hire the right individuals with the right combination of clinical expertise to work with Kentucky's most vulnerable population.

We have also engaged Emily Whelan Parento, JD, LLM, to assist in developing an implementation strategy that is fully synergistic with the goals of the Commonwealth and its managed care program. A native Kentuckian and current Louisville resident, Ms. Parento has previously served in a leadership role at CHFS: executive director of the Office of Health Policy from 2013–2015.

The Implementation team will work across the organization and with the Molina recruiting team to select and onboard candidates who meet or exceed the Commonwealth's high standards as well as our own stringent experience requirements, ensuring an in-place staff that is trained and ready for successful operations. *Those selected for the permanent executive team and key staff roles, all of whom are subject to approval by the Commonwealth, will be solely dedicated to the Kentucky Medicaid program for the duration of the Contract.* Under the direction of Mr. Sansone, an executive leader with more than 20 years of experience across various industries, including healthcare insurance and technology, our Implementation team will hire locally based and appropriately licensed candidates. Mr. Sansone, Dr. Dees, and Dr. Sweet will collaborate to select and onboard our team before the Contract start date.

#### Community-based Staff

Molina has structured our Kentucky Medicaid organization to foster close relationships with our Enrollees, providers, and other stakeholders such as CBOs because we have witnessed the benefits of high-touch Enrollee outreach by specialized individuals trained to target specific Enrollee needs.

In support of this approach, our organizational structure features the following community-based positions demonstrated in Table A.1.

Role	Responsibilities
Care Connections Nurse Practitioners	Care Connections nurse practitioners will be <i>co-located at high-volume provider offices, in CBOs, or in the community providing in-home services</i> . These nurse practitioners will deliver an array of care and services Enrollees need, such as postpartum checkups, A1c screenings, and eye exams, to better support Enrollees' health and help them obtain services. Our Care Connections program has proven to improve access to care by removing barriers Enrollees may experience.
Molina Community Health Workers	Molina Community Health Workers will support Enrollee access to the right healthcare services in the right place at the right time and help Enrollees navigate the healthcare system. They will assist with housing, food, clothing, and transportation needs, scheduling appointments, and more. We hire Molina Community Health Workers directly from the communities they serve to ensure they understand the local culture and available resources.
Housing Specialists	Housing specialists will partner with local homeless shelters and other CBOs throughout the Commonwealth that address housing insecurity. Molina's housing specialists will have expertise in working with individuals with mental health needs and SUDs. Working with a variety of complementary services—like The Healing Place, Center for Women and Families, and New Direction Housing—housing specialists will connect Enrollees with available housing and related supports, helping Enrollees focus on their health.
SUD Navigators	SUD navigators will continually engage Enrollees with SUDs, including Enrollees struggling with opioid use disorder, and encourage treatment adherence. Our SUD navigators are care managers whose specialty is serving Enrollees with SUDs. Because SUD navigators have lived experience with SUD, they will be able to engage with Enrollees, offering a level of understanding and support that others could not provide.
Peer Support Specialists	Peer support specialists will help our Enrollees with either mental health or SUD diagnoses. They have a lived experience in recovery and formal training to deliver services that promote self-care, increased motivation, and improved overall health.
Transition of Care Coaches	Molina will deploy transition of care coaches in targeted communities, including embedding them in high-volume facilities. Working closely with facility discharge staff, transition of care coaches will support Enrollees for 30 days after discharge.
Embedded Care Managers	We will embed Molina care managers in PCP sites and other key care sites to engage Enrollees and provide education and assistance. Molina care managers will engage with Enrollees, providers, and provider office staff to identify and address Enrollee needs and barriers, including understanding their health and ability to navigate the healthcare system.

#### Table A.1. Specialized, Community-based Molina Staff

Role	Responsibilities
Enrollee Locator Teams	Our Enrollee Locator Teams will deliver specialized support in locating difficult-to-reach Enrollees, like those experiencing homelessness. Our local team will know where homeless individuals tend to sleep and congregate, and will contact shelters, the Salvation Army, Community Mental Health Centers, and CBOs.

The breadth and depth of our community-based teams will enable Molina to engage and connect Enrollees with the care and services they need to improve health outcomes while also fostering productive provider partnerships that will enhance their ability to achieve Department goals. Indeed, Molina has demonstrated the success of this holistic approach to Medicaid members in other states and will customize this approach to achieve results in Kentucky.

#### Molina One-Stop Help Centers

It was clear through our outreach to Commonwealth officials, providers, and Enrollees that each Medicaid region has unique needs and challenges. To ensure our Enrollees benefit from local healthcare, resources, and supports, Molina *will establish up to six Molina One-Stop Help Centers* across Kentucky to promote Enrollee and provider walk-ins and serve as community resource centers focused on assisting with any Enrollee and provider healthcare-related need.

These regional centers will provide space for training and education and serve as meeting places for committees and CBO events. *Based on what we learned from our Enrollee focus* groups, these centers will offer services Enrollees really want: convenient, face-to-face access to get answers regarding other government services, help obtaining job information and filling out job applications, resume writing assistance, free Wi-Fi, meeting room(s), computer access, translation services, and full telehealth capabilities, all available in facilities that are fully Americans with Disabilities Act (ADA) compliant.



Molina One-Stop Help Centers will aid providers, too. Providers can call or stop by a regional center to ask questions face-to-face; register complaints; receive training, education, and documentation; and attend meetings, as needed.

# 3. MOLINA'S STRATEGY AND APPROACH FOR ADMINISTERING SERVICES FOR ENROLLEES

Our process began by ensuring the Commonwealth's specific population health challenges and goals were accurately incorporated into our identification and stratification tools. We then analyzed Kentucky-specific data to determine any unique characteristics and nuances that may impact the needs of Kentucky's Medicaid populations, so we are informed about how to address these prevalent challenges.

Understanding the Commonwealth's challenges, we will provide person-centered care that focuses on the specific needs of each individual Enrollee. Molina will continually align our efforts with those of the Commonwealth, including the focus areas of SUDs, smoking, obesity, adverse childhood experiences, and integration of health access outlined in the Kentucky State Health Improvement Plan 2017 – 2022.

Since 2017, we have been on the ground in Kentucky meeting with providers and community organizations to gain a first-hand understanding of the unique needs of the Commonwealth and your Enrollees and providers. We have met with more than 110 CBOs and provider associations to deepen our knowledge of the Commonwealth and build partnerships with deep ties to Kentucky and Medicaid Enrollees.

We met with and listened to the people with first-hand experience: Kentucky Medicaid providers and Enrollees. We sought help from a Louisville-based consulting firm to organize focus groups across the Commonwealth to help us become fluent in the healthcare experiences, needs, and challenges of Kentuckians in the Medicaid program. Molina staff attended these on-site meetings and listened to provider and Enrollee feedback through multiple sessions.



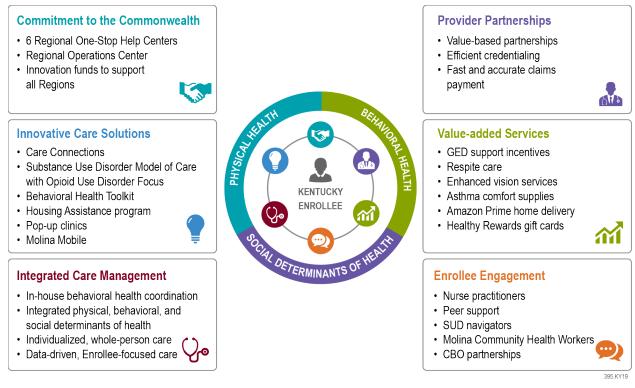
Molina has already conducted numerous focus groups with providers and Enrollees across Kentucky (both in urban and rural communities) to guide quality improvement planning.

We listened to the needs and concerns of Kentucky providers in Louisville, Pikeville/Auxier, and Owensboro. Organizations such as Home of the Innocents, Big Sandy Healthcare, Wendell Foster, and Friend for Life Cancer Support Network also participated in these forums. We learned providers hoped for more visible, community-based support from provider services representatives and more provider-friendly approaches to claims, utilization management decisions, and credentialing.

**To better understand the concerns of Medicaid Enrollees,** we facilitated sessions across the Commonwealth, including in the urban regions of Louisville and Lexington as well as in Pikeville/Auxier and Owensboro. In each session, we specifically sought feedback on the challenges of accessing care in underserved and/or rural areas. In those meetings, Enrollees expressed interest in high-touch care management and solutions to provider access issues, including use of telemedicine; frustration regarding the ability to get correct answers from their plan's call centers; interest in financial incentives for meeting certain goals or successfully completing targeted health improvement programs; and interest in programs, real support, and targeted incentives to enable Enrollees to achieve their health and personal goals.

Molina is ready to demonstrate our understanding of the healthcare environment, the Medicaid program, and the Department's vision. We are ready to *bring the solutions* that will make us the partner of choice for the Department and the plan of choice for providers and Enrollees.

In addition to providing robust access to all Medicaid covered services, *Exhibit A-1 highlights the key tenets of our Kentucky solution to encourage Enrollees to engage in their healthcare and improve their health outcomes*. We developed this model based on the goals for this procurement, our understanding of the Commonwealth's population health and care coordination needs, and discussions in the market with Medicaid beneficiaries, providers, and CBOs.



#### Exhibit A-1. Summary of Molina's Kentucky Solutions

#### **OUR INTEGRATED MODEL**

A key tenet of our technical approach is true integration of physical health and behavioral health, including SUDs and social determinants of health. We directly integrate physical health and behavioral health management services, coordinating the holistic needs of members—a proven model that differentiates Molina from nearly every other MCO. With a completely integrated approach, we truly look at the whole person with every encounter, review, and outreach because Enrollees do not experience physical health or behavioral health issues in a vacuum. Having a completely integrated system allows us to understand how each of these areas of health and wellness influence each other and how to best serve Enrollees. By looking at Enrollees' holistic needs, we can anticipate possible issues or concerns Enrollees may have before they get a diagnosis or poor outcome. For example, through truly integrated care management, Enrollees will benefit from improved quality of life due to addressing gaps in care, comorbidities, and complexities of their illness; having access to providers practicing collaborative care and integrated programs that lead to a personalized experience; simplifying how they navigate the system; and improving their healthcare literacy. While Molina's Integrated Model of Care highlights the operational elements of Enrollee care, we strive to achieve strategic excellence in aligning our partnerships between our parent company and affiliated health plans to identify, promote, and coordinate strategies that will in turn improve the quality of life of all Molina members.

For example, in 2018, our Washington affiliate implemented their transition to Integrated Managed Care—an integrated care approach that includes a single point of contact who coordinates the exchange of information across the continuum and a "no wrong door" structure. Positive results from this approach include:

- 15% reduction in inpatient admissions since the beginning of the program
- 17% reduction in ED visits since the start of managed care
- 47% penetration rate for behavioral health services for Washington members with an identified need
- 41% engagement rate in SUD treatment for Washington members with an identified SUD

#### Integrating Behavioral Health and SUDs

The Commonwealth has identified SUDs as a priority public health concern. Specifically, opioid use disorder (OUD) continues to have a destructive impact on lives and communities. According to the National Institute on Drug Abuse, in 2017, Kentucky had the eighth-highest opioid-involved overdose deaths and the fifth-highest all drug overdose death rate in the U.S. *But the matter goes far beyond Kentucky's borders, extending to all Molina affiliated health plans. To respond to this nationwide emergency, we have developed an enhanced SUD Model of Care with an OUD Focus.* 

Drawing on recommendations from the American Society of Addiction Medicine and the National Institute on Drug Abuse, as well as on research throughout the healthcare industry and the experiences of our 14 affiliated Medicaid health plans, we formalized these best practices to identify and engage Enrollees earlier, decrease costs, and increase training and knowledge both of our own staff and among providers and other community partners.

As part of our model, SUD navigators will ensure inclusion of behavioral health goals/milestones as a part of the Enrollee's care plan when behavioral health issues are identified, including coordinating wraparound services like peer recovery centers, healthcare education, and legal and financial services. *We will have full-time SUD navigators in Kentucky who will be care managers trained in SUD treatment and dedicated solely to members with SUDs.* Our navigators will be well versed in coordinating the most appropriate care for Enrollees, including traditional treatments for SUDs or pain management, as well as non-pharmacological treatments for pain (such as acupuncture, mindfulness/meditation, or massage).

Our referral process will promote earlier identification of Enrollees who are in or at risk for crisis. We will train our staff and providers how to identify and treat SUDs. We will determine program success using a combination of in-process and outcomes metrics (e.g., number of referrals, percentage of Enrollees with decreased substance/opioid use) that will allow us to track progress and shape new provider incentives.

#### **PROVIDERS AND CBOs**

To jump start our provider network build, we met with numerous providers across the Commonwealth to introduce Molina and describe how our Medicaidfocused approach benefits providers and CBOs through a collaborative style to problem-solving. Given *we already have commitments from* 

#### Technology-enabled Value-based Model

Through our partnership with KPCA, we will support telehealth services in schools in rural and underserved areas with provider shortages.

*numerous providers willing to serve Enrollees,* we believe these partners recognized a new collaboration opportunity based on our experience in efficient credentialing, fast and accurate payment of claims, and innovative approaches to reimbursement strategies. Our commitment to avoiding provider abrasion will continue through implementation and final operation of the program.

Additionally, supporting the ability of Enrollees to fully engage in their healthcare is critical for the Commonwealth to achieve long-term improvements in the health of Kentucky citizens and improved fiscal health for the Commonwealth. We know it will take innovative *community-based solutions* to strengthen relationships with Enrollees and providers, enabling us to connect more personally with them to influence the system and the behavioral changes necessary to achieve significant quality advances.

#### QUALITY

Molina's locally and data-driven Quality Assurance and Performance Improvement (QAPI) program will actively engage providers and Enrollees, promote measurable gains in performance metrics, adapt best practices that have demonstrated success in 15, and support the Commonwealth in transforming the Kentucky Medicaid program to improve health outcomes for its Enrollees. Emphasizing a community-based, regional approach to quality, a *Molina Quality Improvement (QI) intervention specialist will be assigned to each Kentucky region and will cultivate a deep understanding of regional data trends, including understanding Enrollee demographics, culture, public health statistics, and concerns.* 

We will drive quality gains by partnering with key providers to capitalize on existing system transformation initiatives that are already underway in Kentucky. For example, we are partnering with KPCA in an innovative, technology-enabled value-based model. KPCA currently serves about 20% of Kentucky Medicaid Enrollees and includes Federally Qualified Health Centers, rural health clinics, and school-based sites, delivering care through more than 1,500 providers. As these providers enhance and expand their own QI initiatives, Molina and KPCA will integrate our QI efforts to optimize efficient use of resources and foster a collaborative approach to QAPI activities.

#### PHARMACY

Molina is aware of the Department's increased focus on and scrutiny of PBMs and the critical need to achieve their full compliance with Senate Bill 5. From greater transparency in pricing to protecting the interests of independent pharmacies, every issue warrants deliberate action, and Molina has moved proactively. Our



Among our Medicaid affiliates in NCQA's Quality Compass U.S. South Central Region Medicaid (that includes Kentucky):

**75%** exceeded the 90th percentile for CAHPS Advising Smokers to Quit

50% for CAHPS Discussing Cessation Medications

**50%** for CAHPS Discussing Cessation Strategies

pharmacy program has sustainable policies and processes to address PBM accountability.

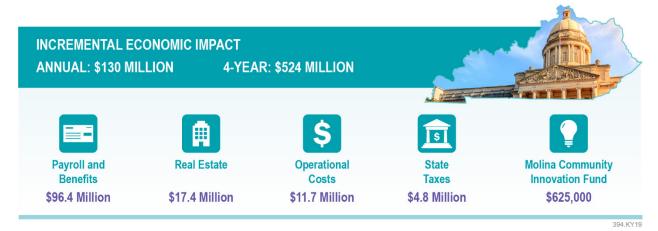
Molina embraces the Kentucky Medicaid program requirements of pharmacy pass-through pricing, and we are confident in our ability to implement this pricing model because it mirrors our current business practice in our 14 affiliated Medicaid health plans. We also bring experience in pharmacy lock-in and solutions for the opioid crisis that Kentucky is facing. We will show our support of rural, independent pharmacies by offering enhanced pharmacy reimbursement. We will reimburse select independent pharmacies in rural areas an additional \$1.25 per paid pharmacy claim to help ensure Enrollees have appropriate access to care and services.

# REGIONAL OPERATIONS CENTER: BRINGING NEW JOBS TO THE COMMONWEALTH

To show our commitment to the Commonwealth, we will establish a *Regional Operations Center in Kentucky* that will house approximately 700 additional staff—for a total of approximately 1,100+ new jobs between our Kentucky headquarters and the Regional Operations Center. Our Regional Operations Center will support the Kentucky health plan and Molina affiliated health plans in the Eastern Time Zone. Staff at the Regional Operations Center will perform claims processing, encounters, Enrollee and provider Call Center services, and appeals and grievances functions. It will also include a dedicated technical presence able to address local as well as corporate system support. Molina is committed to locating our Regional Operations Center in an area where it can strongly promote economic development, spurring additional job growth and enhanced opportunity for communities.

Our Regional Operations Center will create new positions and employment opportunities, providing trained Molina resources to support Kentucky's Medicaid program and adding to Kentucky's state revenue. *In addition, as a commitment to communities we serve, Molina will recruit from diverse and underserved communities, which will better enable us to serve our Enrollees.* 

As shown in Exhibit A-2, this impact will include:



#### Exhibit A-2. Molina Will Contribute \$130 Million Annually to Kentucky's Economy

In addition, we are creating a *Molina Community Innovation Fund in Kentucky that will provide* \$625,000 per year for the first 4 years of the Contract term—up to \$2.5 million cumulatively—to support innovative pilots and programs that increase access to health and health-related services for *Kentucky Enrollees*, including community-based partnerships, CBO and/or provider-led initiatives, and healthcare start-ups that address whole-person care, remove access barriers, and improve population health. *Together with the economic impact of our Regional Operations Center, Molina will contribute more than* \$524 million over a 4-year period to Kentucky's economy.

### 4. MOLINA'S STRATEGY AND APPROACH FOR ESTABLISHING A COMPREHENSIVE PROVIDER NETWORK

Understanding Kentucky's challenges related to Medicaid network access and adequacy, especially in rural and Health Provider Shortage Areas, provider concerns, and other administrative issues, allows us to bring a tailored, dedicated approach to ensure the development of a strong and robust provider network vital to the success of the Kentucky Medicaid program.

We have listened to providers and Enrollees and considered the goals of the Department in developing our robust Kentucky Medicaid provider network. Our Kentucky experience informs our network strategy, as we develop collaborative relationships with diverse independent providers, health systems, provider groups, and provider associations.

To establish our provider network, we began with identifying where we needed providers based on



- Primary care / family planning / advanced practice registered nurses / nurse practitioners
- Behavioral health / substance use disorder / psychiatry
- Community Mental Health Centers
- Federally Qualified Health Centers / birthing centers / home health / rural health clinics
- Diagnostic / imaging / laboratory / mammography
- Pharmacy / durable medical equipment
- Dental
- Vision / audiology
- Specialist network
- Other specialties and provider types

Enrollees' dispersion across the Commonwealth. We then started identifying providers to join our network to meet our Enrollees' diverse physical health, behavioral health, and special healthcare needs.

Over the past year, we have considered provider and Enrollee geographic locations, distance and travel time, and our Enrollees' cultural, ethnic, language, and other special healthcare needs, including expected utilization of services. *We have recruited providers who express their desire to deliver quality care to* 

Enrollees; partner with us to improve Enrollee health outcomes; minimize administrative costs by submitting claims and other data electronically; and want to collaborate with us to identify and implement access / care management solutions.

Kentucky desires a partner with a proven, comprehensive, and innovative approach to provider network development to support a system-wide focus on quality. Our approach includes:

- Locally based provider contracting representatives who provide in-person, one-on-one assistance to facilitate contracting credentialing
- Comprehensive, continuous assessment of network access, availability, quality and alignment with Enrollees' needs
- Extensive national experience developing and implementing value-based payment (VBP) programs that reward providers based on high-quality and cost-efficient and effective care
- Innovative technology-enabled collaborations to support and promote population health in both urban and rural geographies
- In-person meetings between providers and senior health plan leaders to discuss our partnership, including operations and quality performance

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Examples of strategic provider partners in our Kentucky network include KPCA and its member organizations, LifePoint, Methodist Hospital, Ephraim McDowell Health, Quorum Health Corporation, Jennie Stuart Health (Fairview Physician Network), Norton Healthcare, Southern Ohio Medical Center, the University of Louisville (teaching hospital), St. Elizabeth Healthcare, and the University of Kentucky (teaching hospital). Our network includes Fresinius, which will provide coverage for dialysis services across the Commonwealth. Ongoing discussions continue with Baptist Health and other providers.

Our partnership with KPCA includes terms of delegated credentialing, data-sharing, and other terms of a care coordination partnership. *Our relationship with KPCA will be critical to meeting the needs of Enrollees in traditionally underserved and non-urban communities.* 

**Telehealth.** Molina will use telehealth as a tool for facilitating access to needed services in a clinically appropriate manner that are not available within our network following KRS 205.559 and KRS 205.5591. Our telehealth offering will include access to physical health, behavioral health, and select specialty services. Molina affiliated health plans have effectively used telehealth to facilitate access to needed services, reducing costs by providing an alternative option to expensive urgent care and ED visits. Our telehealth strategy is described below in our response to Section C. Telehealth.

**Pop-up Clinics and Mobile Health.** We will augment and increase Enrollee access to our network by supporting traditionally underserved and non-urban communities with pop-up clinics and mobile health delivery via Molina's Care Connections program. Care Connections contributes to the Molina mission by expanding access to quality care by "meeting Enrollees where they are" including home visits, mobile clinics, pop-up clinics, and virtual visits. The Care Connections program will be proud to provide Enrollees with the right care, at the right time, in the right setting. Care Connections is established in all our affiliated Medicaid health plans, *offering services such as Medicaid annual comprehensive exams, comprehensive diabetic care, well-child visits, and "Mothers of Molina" postpartum visits.* 

#### 5. INNOVATIONS AND INITIATIVES TO ACHIEVE IMPROVED HEALTH OUTCOMES FOR ENROLLEES IN A COST-EFFECTIVE MANNER

Strong provider collaborations, support of community organization services, strong Enrollee outreach and engagement, reduction in barriers to seeking care, and a commitment to quality outcomes are all needed to improve health outcomes in Kentucky. Molina is excited to bring to Kentucky the following additional innovative solutions, which we have grouped into three major themes:

- 1. Multifaceted, locally based approach to address Enrollees' social determinants of health needs;
- 2. Comprehensive approach to address Enrollee physical health and behavioral health needs, engagement, and interaction—from community-based, face-to-face solutions to digitally enabled access on-the-go; and
- 3. Integrated, nuanced approaches to provider partnerships and care with targeted solutions for unique areas and populations.

#### Table A-2. Multifaceted, Locally Based Innovations and Initiatives to Address Enrollees' Needs

(1) Social Determinants of Health Solutions	
Social Determinants of Health Innovation Center	To expand member engagement and support, Molina will launch a National Molina Healthcare Social Determinants of Health Innovation Center in Columbus, Ohio in Q1 2020. The Innovation Center will drive the company's social determinants of health strategy. The Innovation Center will manage program design and measurement, collecting and analyzing data to help improve Enrollee health outcomes in a cost-effective manner. This robust initiative will allow Molina to maximize our resources to support improved Enrollee health outcomes across the Commonwealth. <b>Anticipated Challenges:</b> None
	Molina's "Homeless to Home" Housing Assistance program will specialize in assessing housing needs and connecting Enrollees with the resources necessary to secure safe and affordable housing. Based on similar successful programs in our Illinois and Ohio affiliates, our housing specialists will assess Enrollees for factors such as their current living situation, urgency of the housing need, safety concerns, income, and any barriers to housing and connect Enrollee with CBOs that can help with applications for housing and funding assistance, help with utility payment disputes, and intervene with landlords regarding rent disputes.
	Anticipated Challenges:
Housing Assistance	<ul> <li>Enrollee awareness of program, especially for Enrollees recently released from incarceration</li> </ul>
Program	Housing supply shortage
	To address these potential challenges, we will:
	<ul> <li>Promote and leverage our Molina One-Stop Help Centers through marketing and Enrollee communications as a way for Enrollees to receive immediate, face-to-face resolution for their questions and a place to obtain help with a variety of needs</li> </ul>
	<ul> <li>Use our data analytics tools to ensure we have community resources in the right location and in needed quantities to engage Enrollees</li> </ul>
	<ul> <li>Partner with local shelters and CBOs such as Catholic Charities of Louisville, Volunteers of America, New Direction Housing, and Beacon of Hope Emergency Shelter</li> </ul>

(1) Social Determinants of Health Solutions	
Food Insecurity	Our Mississippi affiliate designed a program to address food insecurity and promote healthy eating by offering healthier food options to their members. The plan has partnered with Alcorn State Extension and Foot Print Farms, traveling to various communities throughout the state to distribute fresh fruit and vegetables to members. Adult members can receive one bag of fresh groceries per household. Members have been receptive to these efforts and appreciate the fresh food provided at no cost to them. In Kentucky, we will offer similar initiatives partnering with CBOs including Dare to Care, Kentucky's Heartland, and God's Pantry Food Bank. <b>Anticipated Challenges:</b> Enrollee awareness of program, especially for Enrollees recently released from incarceration To address this potential challenge, we will:
	• Promote and leverage our Molina One-Stop Help Centers through marketing and Enrollee communications as a way for Enrollees to receive immediate, face-to-face resolution for their questions and a place to obtain help with a variety of needs
	<ul> <li>Use our data analytics tools to ensure we have community resources in the right location and in needed quantities to engage Enrollees</li> </ul>
	<ul> <li>Partner with food shelves and CBOs such as Family Scholar House, Dare to Care Food Bank, God's Pantry Food Bank, and Kentucky Heartland Food Bank</li> </ul>
	As a value-added service, Molina will help reduce transportation barriers to healthy food and health-related supplies by offering a 90-day Amazon Prime home delivery subscription at no cost to Molina Enrollees.
	Additionally, to help caregivers address their needs, we will offer respite care as a value- added service to allow an Enrollee's caregiver self-care time to recharge and rejuvenate.
	Anticipated Challenges:
Value-added Services	<ul> <li>Enrollee awareness of program, especially for Enrollees recently released from incarceration</li> </ul>
	To address this potential challenge, we will:
	• Promote and leverage our Molina One-Stop Help Centers through marketing and Enrollee communications as a way for Enrollees to receive immediate, face-to-face resolution for their questions and a place to obtain help with a variety of needs
	<ul> <li>Use our data analytics tools to ensure we have community resources in the right location and in needed quantities to engage Enrollees</li> </ul>

In addition to the Regional Operations Center, Molina will also establish up Stop Help Centers for Enrollees and providers in areas accessible by publ We will establish the Molina One-Stop Help Centers in cities across the Co including Louisville, Covington, Bowling Green, Hazard, Lexington, and Ov enrollment of at least 300,000) to address rural needs and historically under communities in <b>a cost-effective manner</b> by offering easy-to-access health other services.	ic transportation. ommonwealth, wensboro (assuming erserved
Anticipated Challenges:	
Molina One- Stop Help • Enrollee awareness of program, especially for Enrollees recently release incarceration	sed from
• Language, childcare, and transportation barriers	
To address these potential challenges, we will:	
Promote and leverage our Molina One-Stop Help Centers as a way for immediate, face-to-face resolution for their questions and a place to ob variety of needs, including access to the Internet, job boards, and addre determinants of health needs	tain help with a
Provide bilingual/multilingual staff or access to interpretation services a Help Centers	t Molina One-Stop
Work with CBOs to arrange for Enrollee childcare and transportation	
Care ConnectionsOur Care Connections program will address social determinants of health, healthcare due to transportation challenges and housing instability, by exp quality care by meeting Enrollees where they are—in their homes, at mobi or on virtual visits. Delivered by a team of nurse practitioners working throu enterprise who will concentrate on providing care in non-traditional settings have difficulty accessing care in facilities, Care Connections will provide w preventive care services and "boots on the ground" to determine whether a play a role in Enrollees' health challenges, leading to improved health ou effective manner.	anding access to ile or pop-up clinics, ughout the s to Enrollees who ellness and social determinants
Anticipated Challenges:	
Language barriers	
To address this potential challenge, we will:	
Provide bilingual/multilingual staff or access to interpretation services	
SUD Model of Care with OUD FocusMolina's SUD Model of Care with OUD Focus is designed to improve factor access, education, appropriateness of treatment, collaboration, engagement awareness, improving Enrollee health outcomes in a cost-effective manner SUD Model of Care with OUD Focus will be enhanced educational offering guideline-compliant provider prescribing behavior. We will offer provider en management based on the CDC 2016 prescribing guidelines, buprenorphi well as co-prescribing Naloxone for Enrollees on daily opioids.Anticipated Challenges:	ent, and internal r. In addition to our gs to improve ducation on pain
None	

(2) Enrollee	Physical Health and Behavioral Health Needs, Engagement, and Interaction
New Enrollee Welcome Videos	<ul> <li>Our experience enterprise wide shows that members do not always access written materials and prefer a variety of means to access information about their healthcare. New for our Kentucky Medicaid program, Molina will introduce "Welcome to Molina" videos. Enrollees will be able to watch these short videos on their mobile devices when and where they want. Enrollees will learn about covered services, benefits, value-added services, and programs (including Molina's Population Health Management program) available to them. They will also learn about how they can select and change their PCP, access care, and the many ways they can contact Molina Mobile app.</li> <li>Anticipated Challenges:</li> <li>Limited broadband access in certain parts of the Commonwealth</li> <li>Accuracy of Enrollee contact information</li> <li>Obtaining Enrollee communication preferences</li> <li>To address these potential challenges, we will:</li> <li>Promote and leverage our Molina One-Stop Help Centers as a way for Enrollees to receive immediate, face-to-face resolution for their questions and a place to obtain help with a variety of needs, including access to the Internet</li> <li>Implement salesforce.com customer relationship management software to address multichannel access needs of Enrollees and maintain an accurate database of Enrollee preferences</li> <li>Provide bilingual/multilingual staff or access to interpretation services at Molina One-Stop Help Centers</li> </ul>
High-Risk OB Program	<ul> <li>All our affiliated health plans across the country have successfully integrated our High-Risk OB and NICU Model of Care to deliver pregnancy screening, risk-specific education, and care management interventions targeted towards improving pregnancy outcomes by engaging women early in their pregnancy.</li> <li>To identify Enrollees with high-risk pregnancies, we have partnered with Lucina Analytics, a Louisville, Kentucky-based maternity data analytics firm that will use data from sources such as claims, pharmacy, and so forth, and deliver a daily report with a prioritized list of our most urgent high-risk OB cases.</li> <li>Anticipated Challenges: <ul> <li>Language, childcare, and transportation barriers</li> <li>Provide bilingual/multilingual staff or access to interpretation services</li> <li>Work with CBOs to arrange for Enrollee childcare and transportation</li> </ul> </li> </ul>

(2) Enrollee	Physical Health and Behavioral Health Needs, Engagement, and Interaction
Peer Support Specialists	Molina's certified peer support specialists have a lived experience in recovery and formal training to deliver services that promote self-care, increased motivation, and improved overall health. Peer support specialists in Kentucky will participate in Enrollees' care teams and assist Enrollees with setting and pursuing recovery goals. Peer support specialists will travel hundreds of miles each month to meet with Enrollees, many of whom are in remote areas. They will communicate with foster youths and with Enrollees who are not currently in treatment for behavioral health needs but might benefit from it. Because of a shared experience in SUD recovery, peer support specialists will be able to relate and develop trust with Enrollees and overcome communication barriers.
	<ul> <li>Enrollee awareness of program, especially for Enrollees recently released from incarceration</li> </ul>
	To address this potential challenge, we will:
	• Promote and leverage our Molina One-Stop Help Centers through marketing and Enrollee communications as a way for Enrollees to receive immediate, face-to-face resolution for their questions and a place to obtain help with a variety of needs
	<ul> <li>Use our data analytics tools to ensure we have community resources in the right location and in needed quantities to engage Enrollees</li> </ul>
	We will address Enrollees' access to care, augmenting and increasing their access to our network by supporting traditionally underserved and non-urban communities with pop-up clinics and mobile health delivery via Molina's Care Connections program—a significant need in Region 8. We will look to partner with our dental and vision vendors to participate in our pop-up clinics. For example, Avesis, our dental vendor, has a strong network of mobile and portable providers, along with operational policies to ensure consistent access to care, that can be leveraged to support pop-up clinics. Mobile/portable oral health providers are best positioned to serve their patients when they collaborate with brick-and-mortar dental offices.
Pop-up	Anticipated Challenges:
Clinics and	Limited broadband access in certain parts of the Commonwealth
Mobile Health	Language, childcare, and transportation barriers
	To address these potential challenges, we will:
	• Promote and leverage our Molina One-Stop Help Centers as a way for Enrollees to receive immediate, face-to-face resolution for their questions and a place to obtain help with a variety of needs, including access to the Internet
	<ul> <li>Provide bilingual/multilingual staff or access to interpretation services at Molina One-Stop Help Centers</li> </ul>
	Work with CBOs to arrange for Enrollee childcare and transportation

(2) Enrollee	Physical Health and Behavioral Health Needs, Engagement, and Interaction
Regional Quality and	Kentucky has diverse healthcare needs and unique region-to-region health disparities. To address these diverse needs across Kentucky, Molina will establish regional QMACs. As the healthcare landscape, available resources, demographics, and social determinants of health vary dramatically among Kentucky regions, regional QMACs will enable us to capture Enrollee feedback and recommendations that reflect the nuances of each region. Our regional QMACs will align with our local Molina One-Stop Help Centers in Louisville, Covington, Lexington, Hazard, Bowling Green, and Owensboro.
	Anticipated Challenges:
Member	Accuracy of Enrollee contact information
Access	Obtaining Enrollee communication preferences
Committees	Language, childcare, and transportation barriers
(QMACs)	To address these potential challenges, we will:
	<ul> <li>Implement salesforce.com customer relationship management software to address multichannel access needs of Enrollees and maintain an accurate database of Enrollee preferences</li> </ul>
	Provide bilingual/multilingual staff or access to interpretation services
	Work with CBOs to arrange for Enrollee childcare and transportation

(3) Provider Partnerships	
It Matters to Molina	Through our focus groups with providers, we identified high provider frustration with current MCOs' service. We will deploy our innovative It Matters to Molina provider outreach program in Kentucky. It Matters to Molina offers several easy ways for providers to give feedback, including a postage-paid card that we make available at provider offices, a dedicated It Matters to Molina email box, soliciting feedback during face-to-face meetings/training sessions, a link on our provider Web portal, seminars, and association meetings. Our affiliated health plans have implemented several improvements based on the feedback received from providers, including enhancements to our provider Web portal and eligibility documents. This enhanced commitment to excellent service and collaboration will help ensure provider retention and the stability of our network, so providers can focus on <b>improving Enrollee health outcomes</b> .
	Anticipated Challenges:
	• Providers may not be accustomed to close collaboration with an MCO and may be hesitant to engage with us fully until we have proven we deliver on our promises
	To address this potential challenge, we will:
	• Promote and leverage our Molina One-Stop Help Centers as a way for providers to receive immediate, face-to-face resolution for their questions and a place to work with us on targeted, innovative solutions
Preferred	As an integral part of our It Matters to Molina program, we will address the frustration we heard from many Kentucky providers regarding the administrative burden placed on hospital systems and provider groups, particularly as it relates to prior authorization. Molina will incorporate a Preferred Provider PA Program in partnership with Kentucky's highest functioning health systems and provider groups that have demonstrated quality outcomes in identifying certain codes that create administrative burden to providers.
Provider Prior	Anticipated Challenges:
Authorization (PA) Program	• Easing administrative burden may not occur as quickly as providers would like as we would be a new entrant to the Commonwealth and need to establish relationships with providers and gather data about performance
	To address this potential challenge, we will:
	• Use our leading payment integrity and fraud, waste, and abuse vendors who look at our claims both at the provider and Enrollee level to ensure accurate billing and payment

(3) Provider Partnerships	
Behavioral Health Provider Toolkit	The Behavioral Health Provider Toolkit addresses several mental health and SUD categories that are often related to social determinants of health and can be used to assess and treat behavioral health conditions in the primary care setting. The Toolkit includes screening tools, diagnostic criteria, clinical guidelines, interventions, links to additional clinical resources, and guidance on how and when to refer an Enrollee for treatment with a behavioral health provider. The Toolkit is yet another way we will ensure effective whole-person care while helping to <b>improve Enrollee health outcomes</b> . <b>Anticipated Challenges:</b> None
Value-based Payment (VBP) Programs	<ul> <li>With the state of Ohio facing many similar behavioral health challenges as Kentucky, including high rates of opioid abuse, overdoses, related ED visits, and drug-related deaths, our Ohio affiliate has taken a lead role in developing behavioral health-focused VBP models that can also be leveraged for the Kentucky Medicaid program including:</li> <li>Pay-for-performance. In partnership with its key community mental health providers, our Ohio affiliate offers a pay-for-performance program rewarding providers for completing needed 7- and 30-day HEDIS follow-up visits following hospital discharge to <i>reduce healthcare issues and costs associated with avoidable readmissions</i>.</li> <li>Patient-centered medical homes (PCMHs). Provider participation in PCMHs is voluntary; however, practices that participate receive quarterly PMPM payments and are eligible for annual shared-savings payments. Participating providers are held to minimum activity requirements with annually increasing thresholds in 20 HEDIS quality measures across areas of practices serving adults, women, pediatric members, and those with behavioral health needs, as well as four efficiency metrics.</li> </ul>
Value-based Payment (VBP) Programs (cont)	<ul> <li>Episodes of Care. The Episodes of Care program offers contracted episodic payments to primary and specialty providers across adult, women, pediatric health, and behavioral health practices, providing 30 distinct services, including COPD, asthma, perinatal/neonatal care, joint replacement, urinary tract infection, attention deficit / hyperactivity disorder, upper respiratory infection, and percutaneous coronary intervention.</li> <li>Behavioral Health Excellence Program. Molina's Behavioral Health Excellence Program improves quality, increases collaboration between facilities and Molina, and increases Enrollee and facility satisfaction by guiding and rewarding inpatient psychiatric care facilities for delivering services efficiently and effectively.</li> <li>Anticipated Challenges:         <ul> <li>Prioritizing efforts among numerous disparate needs may slow some efforts while we implement more pressing initiatives</li> <li>Create and customize reports providers need, proactively contacting providers when we have noticed provider patterns that may indicate they could use additional data we can access</li> </ul> </li> </ul>

Molina stands by our commitments, and we are ready to *partner with the Department*, develop *collaborative initiatives*, address critical needs, and *enhance* the Medicaid program to *accelerate* healthcare performance improvement by increasing access and improving individual and population health outcomes. Through engaging Enrollees where they are in their healthcare journey, we look forward to serving Kentucky's most vulnerable populations.

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