

2. Corporate Information

a. Provide required 42 CFR 455.100-107 disclosures:

“(1) The name and address of any person (individual or corporation) with an ownership or control interest in the disclosing entity, fiscal agent, or managed care entity. The address for corporate entities must include as applicable primary business address, every business location, and P.O. Box address.

The following table depicts the names and addresses of the corporations with ownership/control interest in the disclosing entity, UnitedHealthcare of Kentucky, Ltd.

Ownership Structure				
Owner Name	Address	Ownership Type	Amount	Ownership Percentage
United HealthCare Services, Inc.	9900 Bren Road East, Minnetonka, MN 55343	General Partnership Share	236.817	89.7656
United HealthCare Services, Inc.	9900 Bren Road East, Minnetonka, MN 55343	Limited Partnership Unit	199.5	100.0
UnitedHealthcare, Inc.	9800 Health Care Lane, Minnetonka, MN 55343	General Partnership Share	27.0	10.2344

(2) Date of birth and Social Security Number (in the case of an individual).

Not applicable.

(3) Other tax identification number (in the case of a corporation) with an ownership or control interest in the disclosing entity (or fiscal agent or managed care entity) or in any subcontractor in which the disclosing entity (or fiscal agent or managed care entity) has a 5 percent or more interest.

United HealthCare Services, Inc.’s federal tax identification number is [REDACTED].

UnitedHealthcare, Inc.’s federal tax identification number is [REDACTED].

(ii.) Whether the person (individual or corporation) with an ownership or control interest in the disclosing entity (or fiscal agent or managed care entity) is related to another person with ownership or control interest in the disclosing entity as a spouse, parent, child, or sibling; or whether the person (individual or corporation) with an ownership or control interest in any subcontractor in which the disclosing entity (or fiscal agent or managed care entity) has a 5 percent or more interest is related to another person with ownership or control interest in the disclosing entity as a spouse, parent, child, or sibling.

Not applicable.

(iii.) The name of any other disclosing entity (or fiscal agent or managed care entity) in which an owner of the disclosing entity (or fiscal agent or managed care entity) has an ownership or control interest.

The following is a list of other Kentucky-licensed companies in which United HealthCare Services, Inc. and/or UnitedHealthcare, Inc. also has an ownership or control interest in:

Company Name	Kentucky License
Care Improvement Plus South Central Insurance Company	Insurance Co.
*Optum Insurance of Ohio, Inc.	Insurance Co.
PacifiCare Life and Health Insurance Company	Insurance Co.
*Procura Management, Inc.	MCO

Company Name	Kentucky License
Sierra Health and Life Insurance Company, Inc.	Insurance Co.
Symphonix Health Insurance, Inc.	Insurance Co.
*Unimerica Insurance Company	Insurance Co.
*UnitedHealthcare Insurance Company	Insurance Co.
*UnitedHealthcare Insurance Company of the River Valley	Insurance Co.
UnitedHealthcare of Ohio, Inc.	HMO
UnitedHealthcare of Wisconsin, Inc.	HMO

* Indirect ownership

(iv.) The name, address, date of birth, and Social Security Number of any managing employee of the disclosing entity (or fiscal agent or managed care entity)."

Please refer to Att. B.2.a.iv Managing Employees.

b. Indicate the Vendor's form of business (e.g., corporation, nonprofit corporation, partnership, etc.) and provide the following information:

UnitedHealthcare of Kentucky, Ltd. is a limited partnership and is domiciled in Kentucky with its main administrative offices in Lexington. It was licensed as an HMO in 1986 and remains in good standing. Our executive leadership team will have full governing authority of the UnitedHealthcare Medicaid program. In addition, we will establish a Medicaid Advisory Board to advise the executive team to make sure that the voices of our community, providers and stakeholders are heard and their feedback incorporated is into our operations.

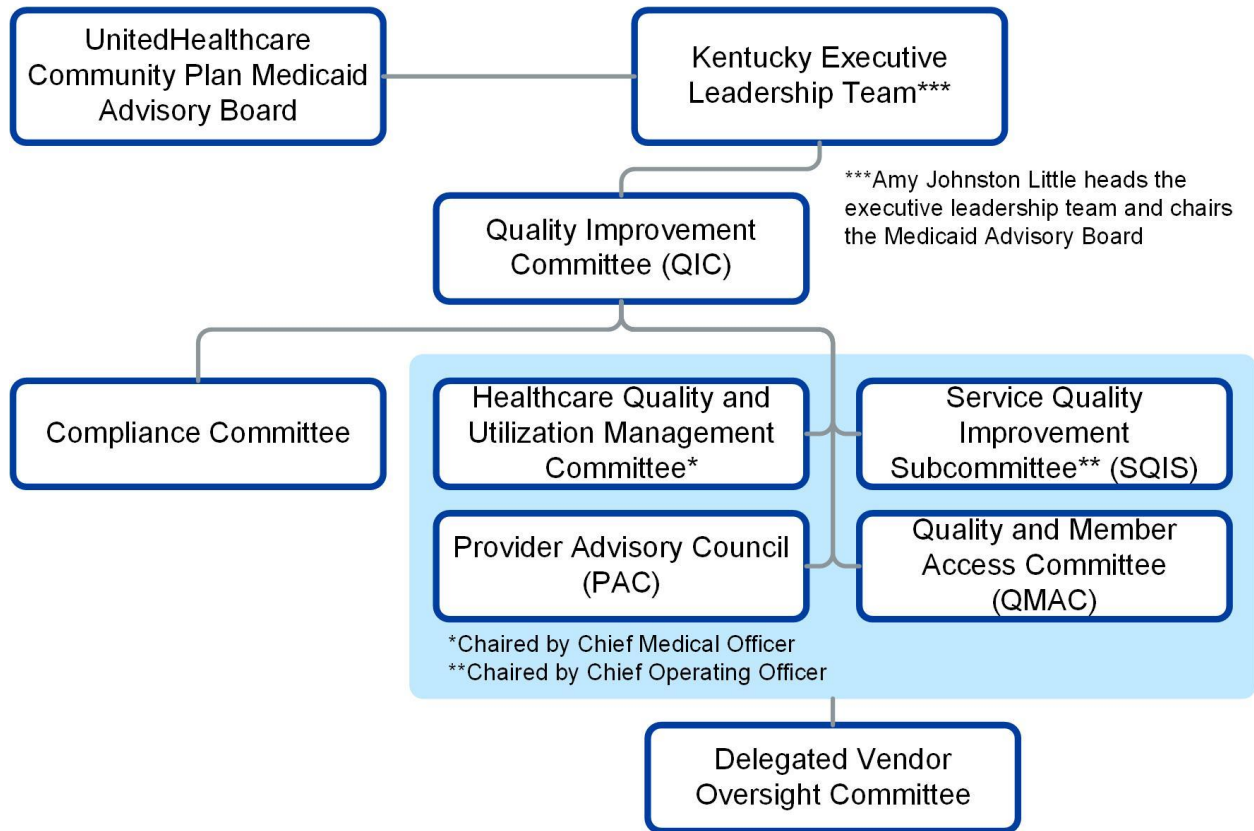


Figure 1. Our governance structure is led by our executive leadership team with input from plan functional areas and an advisory board made up of external stakeholders.

i. Names and contact information for all officers, directors, and partners.

UnitedHealthcare of Kentucky, Ltd. officers are provided in the following chart (there are no directors):

Name	Title	Contact Information
Kimberly Kathleen Sonerholm	President and Chief Executive Officer	317-405-3873 kim.k.sonerholm@uhc.com; 7440 Woodland Dr. Indianapolis, IN 46278
Amy Lynn Johnston Little	Chief Executive Officer, Government Programs	502-318-0120; amy_johnston-little@uhc.com 9100 Shelbyville Road, Louisville, KY 40222
Deborah Jean English	Chief Financial Officer	952-202-0858; deborah_j_english@uhc.com P.O. Box 9472, Minneapolis, MN 55440-9472
David Keith Hill	Secretary	312-453-0600; david_k_hill@uhc.com 200 E Randolph - Suite 5300, Chicago, IL 60601
Peter Marshall Gill	Treasurer	952-936-3203; peter.gill@uhg.com 9900 Bren Road East, Minnetonka, MN 55343
Heather Anastasia Lang	Assistant Secretary	952-936-6662; heather.lang@uhg.com 9900 Bren Road East, Minnetonka, MN 55343
Jessica Leigh Zuba	Assistant Secretary	952-979-6772; jessica_l_zuba@uhc.com 9700 Health Care Lane, Minnetonka, MN 55343
Nyle Brent Cottington	Vice President	952-979-6133; brent_cottington@uhc.com 9800 Health Care Lane, Minnetonka, MN 55343

Name	Title	Contact Information
Richard Gordon Dunlop	Vice President	614-698-3771; rick_dunlop@uhc.com 5900 Parkwood Place, Dublin, OH 43016

UnitedHealthcare of Kentucky, Ltd.'s corporate partners are United HealthCare Services and UnitedHealthcare, Inc.:

Name	Contact Information
United HealthCare Services, Inc.	Tarrant Jeffrey Putnam; 952-936-7341; jeff_putnam@uhg.com; 9900 Bren Road East, Minnetonka, MN 55343
UnitedHealthcare, Inc.	Timothy John Noel; 952-931-4172; timothy_j_noel@uhc.com; 9800 Health Care Lane, Minnetonka MN 55343

ii. Relationship to parent, affiliated and/or related business entities and copies of management agreements with parent organizations.

UnitedHealthcare of Kentucky, Ltd. is part of the UnitedHealth Group, Inc. family of companies.

Relationship to Parent: United HealthCare Services, Inc. is the majority owner (89.76%) of UnitedHealthcare of Kentucky, Ltd. UnitedHealthcare, Inc. owns the remaining 10.23%.

Relationship to Affiliated and Related Business Entities: Our affiliated entities are part of the UnitedHealth Group family of companies:

- Health plans in 31 states plus the District of Columbia operating programs under Medicaid and D-SNP contracts
- Business entities that provide subcontracted services to UnitedHealthcare of Kentucky, Ltd. and to our affiliated health plans in other states:
 - Dental Benefit Providers, Inc.
 - MARCH® Vision Care Group, Incorporated
 - OptumHealth Care Solutions, LLC
 - OptumInsight, Inc.
 - OptumRx, Inc.
 - United Behavioral Health under the brand name Optum behavioral health services
 - United HealthCare Services, Inc.

Management Agreement: Please see Attachment B.2.b.iii-1 Parent Management Agreement for our parent organization. Please see Attachment B.2.b.iii-2 (a-g) Affiliate Subcontractor Management Agreements for our affiliate subcontractor agreements.

iii. Provide copies of the Vendor's articles of incorporation, bylaws, partnership agreements, or similar business entity documents, including any legal entity having an ownership interest of five percent (5%) or more.

Please see Attachment B.2.b.iv UnitedHealthcare of Kentucky Business Entity Documents and Attachment B.2.b.iv UnitedHealthcare of Kentucky Parent Business Entity Documents.

iv. Provide the Vendor's Uniform Certificate of Authority or application for the Uniform Certificate of Authority, as well as copies of reports filed with the Kentucky Department of Insurance during the prior twelve (12) months, if applicable.

Please see Attachment B.2.b.v-1 UnitedHealthcare of Kentucky Uniform Certificate of Authority.

Please see Attachment B.2.b.v-2 Kentucky Department of Insurance Reports.

c. Demonstrate financial viability for the Vendor and each Subcontractor, as evidenced by sustained bottom line profitability and no current areas of significant financial risk for the past three (3) calendar years or the Vendor or Subcontractor's fiscal years. For the Vendor and each Subcontractor, provide copies of financial statements from the most recently completed and audited year.

Our **financial viability** is evidenced by the sustained bottom line profitability of our ultimate parent company, UnitedHealth Group. We have no current areas of significant financial risk for the past 3 calendar years, as demonstrated by our 2018 audited financial statements. Please see Attachment B.2.c-1 UnitedHealth Group Audited Financial Statements, which provides audited financial statements for calendar years 2018, 2017 and 2016. These statements cover UnitedHealthcare of Kentucky, Ltd. and the following affiliate subcontractors: Dental Benefit Providers, Inc.; MARCH Vision Care Group, Incorporated; OptumHealth Care Solutions, LLC; OptumInsight, Inc.; OptumRx, Inc.; United Behavioral Health; and United HealthCare Services, Inc.

For our external subcontractors, please see the following attachments, which provide evidence of these companies' sustained bottom line profitability and demonstrate no current areas of significant financial risk for the past 3 calendar or fiscal years. Alorica, Inc.; CirrusMD, Inc.; Healthify, Inc.; and Vivify Health, Inc. are early stage companies that may not be reflecting a profit, but they have sufficient financial support from their investors to capitalize the business adequately and to fund their growth objectives sufficiently. While hesitant to provide extensive financial information, if there are any concerns over financial viability, they are willing to engage in discussions.

- Attachment B.2.c-2 Alorica, Inc. Audited Financial Statements
- Attachment B.2.c-3 CareCore National, LLC Audited Financial Statements
- Attachment B.2.c-4 CirrusMD, Inc. Audited Financial Statements
- Attachment B.2.c-5 DialAmerica, Inc. Audited Financial Statements
- Attachment B.2.c-6 Healthify, Inc. Audited Financial Statements
- Attachment B.2.c-7 Schoeneckers, Inc. Audited Financial Statements
- Attachment B.2.c-8 SilverLink Communications, LLC Audited Financial Statements
- Attachment B.2.c-9 Vivify Health, Inc. Audited Financial Statements

d. Provide a statement of whether there is any past (within the last ten (10) years or pending litigation against the Vendor or sanctions, including but not limited to the following:

i. Litigation involving the Vendor's failure to provide timely, adequate, or quality Covered Services. If any litigation listed, include damages sought or awarded or the extent to which adverse judgment is/would be covered by insurance or reserves set aside for this purpose. Include an opinion of counsel as to the degree of risk presented by any pending litigation and whether the pending or recent litigation will impair your organization's performance in a Kentucky Medicaid Managed Care Contract.

Statement of Litigation

Like all insurers, UnitedHealthcare of Kentucky, Ltd. and our parent company and affiliates are subject to litigation in the normal course of business. To the best of our knowledge and based upon a thorough review of our available data, the following represents relevant litigation matters within the past 10 years:

UnitedHealthcare of Kentucky, Ltd. has only one pending and three prior litigation matters in the last 10 years involving claim disputes. As it pertains to our parent, subsidiaries, affiliates and subcontractors please see Attachment B.2.d.i Litigation Matters for complete details of these litigation matters.

Opinion of Counsel

Although the outcomes of any such legal actions cannot be predicted with certainty, the opinion of our legal counsel is that there are no actions, suits, proceedings or investigations of any kind pending or, to our knowledge of, threatened against UnitedHealthcare of Kentucky, Ltd., its parent company or any of its affiliates before any court, tribunal or administrative agency or board that, if adversely determined, might, either in any case or in the aggregate, impair its performance in a Kentucky Medicaid Managed Care Contract.

Regarding damages sought or awarded, UnitedHealthcare of Kentucky, Ltd. and its affiliates maintain professional liability insurance in connection with claims made against the organization. Reserves for these pending matters have been established as appropriate under standard reserving and risk management procedures.

ii. Sanctions for deficiencies in performance of contractual requirements related to an agreement with any federal or state regulatory entity. Include monetary sanctions the Vendor has incurred pursuant to contract enforcement from any state, federal, or private entity, including the date, amount of sanction, and a brief description of such enforcement, corrective action, and resolution.

UnitedHealthcare of Kentucky, Ltd. has not had any sanctions for deficiencies in performance of contractual requirements related to an agreement with any federal or state regulatory entity in the past 10 years. Our parent organization, affiliates and subsidiaries are regulated at federal, state and local levels. They have been and are currently involved in various audits and reviews, which, from time to time, can result in findings of noncompliance and the assessment of damages, civil fines or penalties, or other sanctions, in the regular course of business. Related to any findings of noncompliance, UnitedHealthcare of Kentucky, Ltd. does not expect any impact or impairment on our ability to perform under the Kentucky Medicaid MCO program.

To the best of our knowledge and based upon a thorough review of our available data, Attachment B.2.d.ii UnitedHealthcare of Kentucky and Parent/Affiliate Sanctions. represents UnitedHealthcare of Kentucky, Ltd. and its parent's, affiliates'/subsidiaries' warnings, sanctions imposed for deficiencies in performance of contractual requirements related to an agreement with any federal or state regulatory entity. UnitedHealthcare of Kentucky, Ltd.'s commercial line of business, our affiliate subcontractors — OptumRx, Optum behavioral health services, OptumHealth Care Solutions and Optum Insight — have not had any sanctions for deficiencies in performance of contractual requirements. For all the attached circumstances, we are confident that there will be no impairment to successful implementation and operation of a contract for the MCO program.

iii. Any Securities Exchange Commission (SEC) filings discussing any pending or recent litigation. Include information for Parent Company, affiliates, and subsidiaries. The Vendor may exclude workers' compensation cases.

Please see the following attachments for SEC filings, which discuss any pending or recent litigation for UnitedHealthcare of Kentucky, Ltd., our parent company and our affiliates/subsidiaries:

- Attachment B.2.d.iii-1 UnitedHealth Group Form 10-Q for Q1 2019
- Attachment B.2.d.iii-2 UnitedHealth Group Form 10-Q for Q2 2019
- Attachment B.2.d.iii-3 UnitedHealth Group Form 10-Q for Q3 2019
- Attachment B.2.c-1a UnitedHealth Group 2018 Audited Financial Statement
- Attachment B.2.c-1b UnitedHealth Group 2017 Audited Financial Statement

e. For the Vendor, Parent Company, subsidiaries and all Subcontractors list and describe any Protected Health Information (PHI) breaches (within the past five years) that have occurred and the response. Do not include items excluded per 45 CFR 164.402.

Please see Attachment B.2.e PHI Breaches for UnitedHealthcare of Kentucky, which also covers our parent company/subsidiaries and our affiliated subcontractors. Our nonaffiliated subcontractors have no PHI breaches to report.

f. Has the Vendor ever had its accreditation status (e.g., National Committee on Quality Assurance (NCQA), Utilization Review Accreditation Commission (URAC), or Accreditation Association for Ambulatory Health Care (AAAHC)) in any state for any product line adjusted down, suspended, or revoked (within the past five years)? If so, identify the state and product line and provide an explanation. Include information for the Vendor's Parent Company and subsidiaries.

Neither the vendor nor companies under the parent have ever had an accreditation status suspended or revoked. Companies under the parent have had the accreditation status awarded by the NCQA adjusted both upward and downward. The adjustments are a result of NCQA's annual re-evaluation of accreditation status based upon HEDIS and CAHPS results. Of the over 200 health plans participating in NCQA accreditation, in the last 5 years plans in the states listed in the attachment have had downward adjustments. Please see Attachment B.2.f NCQA Accreditation Downward Adjustments.

g. Provide a listing of Medicaid managed care contracts held in the past ten (10) years for which the Vendor, Vendor's Parent Company, and subsidiaries has:

- i. Voluntarily terminated all or part of the contract under which it provided health care services as the licensed entity.
- ii. Had such a contract partially or fully terminated before the contract end date (with or without cause).
- iii. Had a contract not renewed.
- iv. Withdrawn from a contracted service area.
- v. Had a reduction of enrollment levels imposed?

UnitedHealthcare of Kentucky, Ltd. has ***never had a Medicaid managed care contract terminated, not renewed, withdrawn or enrollment level*** reduction imposed.

The table details instances where our affiliated health plans in other states have experienced these situations in the past 10 years.

Legal Entity	State Entity/Client
UnitedHealthcare Plan of the River Valley, Inc.	Iowa Department of Human Services
Date of Departure: June 30, 2019. Reason: Nonrenewal due to disagreement on capitation rates.	
UnitedHealthcare Community Plan of California, Inc.	California Department of Health Care Services
Date of Departure: Nov. 1, 2018. Reason: Early termination due to unique market dynamics in Sacramento County; plan was not able to sustainably meet the needs of the state, members and business in Sacramento, and decided to terminate its contract in that county with California Department of Health Care Services.	
UnitedHealthcare of New Mexico, Inc.	New Mexico Human Services Department
Date of Departure: Sept. 1, 2018. Reason: With state approval, the New Mexico Community Plan sold all of its rights under its Medicaid Contract to Presbyterian Health Plan, Inc. (an unrelated third party), pursuant to an Asset Purchase Agreement. The State, the plan and the purchaser entered into a separate agreement, which, among other things, terminated the Medicaid Agreement 4 months early, effective Sept. 1, 2018.	
Care Improvement Plus of Texas Insurance Co.	CMS (Medicare D-SNP in New Mexico)
Date of Departure: Dec. 31, 2015. Reason: Business decision to voluntarily terminate.	

Legal Entity	State Entity/Client
UnitedHealthcare of Florida, Inc.	Florida Healthy Kids Corporation
Date of Departure: Oct. 1, 2015 (Service area withdrawal) Reason: The enrollment level reduction was the result of a state regulatory competitive bidding process. On being awarded seven counties, membership and catchment area were set per contractual standards. This retraction was an intentional decision made based upon a combination of rates and member utilization patterns. This was not related to health plan performance.	
UnitedHealthcare of South Carolina, Inc.	South Carolina Department of Health & Human Services
Date of Departure: Jan. 31, 2013. Reason: The stock of UnitedHealthcare of South Carolina, Inc. was purchased by The WellCare Management Group, Inc. in October 2012.	
UnitedHealthcare of Wisconsin, Inc.	Wisconsin Department of Health Services
Date of Departure: Jan. 1, 2013. Reason: Exited BadgerCare Plus coverage in Southeast Wisconsin counties due to insufficient rate funding. Re-entered the following calendar year after cap-funding rates were adjusted in the Medicaid program.	
United Behavioral Health	Oklahoma Health Care Authority
Date of Departure: Dec. 30, 2011. Reason: Mutual agreement based upon system incompatibilities; continued performance and payment was not in either party's best interest.	
UnitedHealthcare of Pennsylvania, Inc.	Pennsylvania Insurance Department
Date of Departure: Dec. 28, 2011. Reason: Due to lack of funding, program was discontinued for all contractors.	
UnitedHealthcare Insurance Company	Georgia Department of Community Health
Date of Departure: Oct. 1, 2010. Reason: Program terminated due to funding and program was discontinued.	
Unison Health Plan of Delaware, Inc.	Delaware Department of Health and Social Services
Medicaid managed care contract was not renewed at the end of 2017 after competitive procurement process.	
AmeriChoice of New Jersey, Inc.	NJ Department of Human Services
AmeriChoice agreed to temporarily suspend new member enrollments effective 11-15-2019.	
UnitedHealthcare of FL, Inc. and other affiliates	CMS (DSNP plan in multiple markets)
Business decision to terminate or consolidate various DSNP contracts in multiple markets.	
Unison Health Plan of the Capital Area	DC Health Families and Alliance
Existing contract expired; voluntarily withdrew Medicaid RFP response before the awardees were announced in 2013.	
Care Improvement Plus South Central Insurance Company	CMS (MA-PD Plan)
Company agreed to enrollment cap for 2020 due to not meeting the Medical Loss Ratio threshold.	