

Centene and Quartet Health expand partnership nationwide to help ensure members have access to critical behavioral health care during COVID-19 pandemic and beyond - Jul 16, 2020

Quartet's national network of locally-based behavioral health providers will help members access care rapidly, with a focus on virtual care options

ST. LOUIS and NEW YORK, July 16, 2020 [/PRNewswire/](#) -- Centene Corporation (NYSE: CNC) and Quartet Health today announced a nationwide expansion of their existing partnership to help members quickly and easily access the behavioral health care they need.

Centene and Quartet first began their partnership in June 2019, launching in Illinois and Louisiana. The nationwide expansion will enable members to seamlessly access quality behavioral health care from providers located in their areas who serve their unique clinical needs. To support members who want access to care from their homes during the COVID-19 pandemic, all scheduled appointments will be with providers who support virtual care.

Across the United States, behavioral health care needs are on the rise. In March, more than [two-thirds](#) of Americans reported feeling anxious or depressed, according to a survey by McKinsey & Company. The following month, [three times](#) as many adults reported psychological distress as they did two years prior.

"During this difficult time of a worldwide pandemic, we are seeing a dramatic rise in behavioral health needs for our members," said Michael F. Neidorff, Chairman, President, and CEO of Centene. "Centene is pleased to partner with Quartet to leverage its national network of locally-based behavioral health providers, allowing our members to quickly be matched to the care they need in a setting that is comfortable for them."

Quartet's national network of care options includes virtual tele-psychiatry and tele-therapy, enabling members to access the care they need safely from their homes during the COVID-19 pandemic. Virtual care can also lower the stigma associated with accessing behavioral health care services in person. In May 2020, nearly 80% of the appointments that Quartet scheduled for patients were for virtual care.

"COVID-19 has highlighted and exacerbated our mental health care crisis. Quartet is excited to partner with Centene to meet their members where they are in these unprecedented times. We've been working tirelessly to help people with mental health conditions quickly and easily get access to the right high-quality mental health care," said David Wennberg, MD, MPH, CEO of Quartet. "Our partnership will help ensure that Centene's millions of members will get the behavioral health care they need through a network of mental health providers that have virtual care capabilities, and are local to their area."

Quartet's HIPAA-compliant technology platform will integrate with Centene's population health software, making it simple for Care Managers and Utilization Managers to refer members to Quartet for behavioral health care, track member progress, and collaborate with the referred behavioral health providers -- all within their existing workflows.

"We are pleased to expand our partnership with Quartet and further equip Centene's Care Managers with the resources they need to support our members' whole health," said Brett Hart, Chief Behavioral Health Officer of Centene Corporation. "In Illinois and Louisiana, we have seen success with Care Managers using the Quartet platform to help members get the behavioral health care they need, including cutting down the time it takes for members to attend a behavioral health appointment by 41%."

About Centene Corporation

Centene Corporation, a Fortune 50 company, is a leading multi-national healthcare enterprise that is committed to helping people live healthier lives. The Company takes a local approach – with local brands and local teams - to provide fully integrated, high-quality, and cost-effective services to government-sponsored and commercial healthcare programs, focusing on under-insured and uninsured individuals. Centene offers affordable and high-quality products to nearly 1 in 15 individuals across the nation, including Medicaid and Medicare members (including Medicare Prescription Drug Plans) as well as individuals and families served by the Health Insurance Marketplace, the TRICARE program, and individuals in correctional facilities. The Company also serves several international markets, and contracts with other healthcare and commercial organizations to provide a variety of specialty services focused on treating the whole person. Centene focuses on long-term growth and the development of its people, systems and capabilities so that it can better serve its members, providers, local communities, and government partners.

About Quartet Health

Quartet Health is a healthcare technology and services company on a mission to improve the lives of people with mental health conditions. We connect people to the right care at the right time. Our collaborative technology and range of services bring together physicians, mental health providers, and insurance companies to effectively improve patients' health and drive down healthcare costs. Backed by \$160.5MM in venture funding from top investors like Oak HC/FT, GV (formerly Google Ventures), F-Prime Capital Partners, Polaris Partners, Deerfield Management, Centene Corporation, and Echo Health Ventures, Quartet is headquartered in NYC and is currently operating in several markets across the United States —

Pennsylvania, Washington, Northern California, New Jersey, North Carolina, Louisiana, and Illinois.

Forward-Looking Statements

All statements, other than statements of current or historical fact, contained in this press release are forward-looking statements. Without limiting the foregoing, forward-looking statements often use words such as "believe," "anticipate," "plan," "expect," "estimate," "intend," "seek," "target," "goal," "may," "will," "would," "could," "should," "can," "continue" and other similar words or expressions (and the negative thereof). Centene (the Company, our, or we) intends such forward-looking statements to be covered by the safe-harbor provisions for forward-looking statements contained in the Private Securities Litigation Reform Act of 1995, and we are including this statement for purposes of complying with these safe-harbor provisions. In particular, these statements include, without limitation, statements about our future operating or financial performance, market opportunity, growth strategy, competition, expected activities in completed and future acquisitions, including statements about the impact of our recently completed acquisition (the WellCare Acquisition) of WellCare Health Plans, Inc. (WellCare), other recent and future acquisitions, investments and the adequacy of our available cash resources. These forward-looking statements reflect our current views with respect to future events and are based on numerous assumptions and assessments made by us in light of our experience and perception of historical trends, current conditions, business strategies, operating environments, future developments and other factors we believe appropriate. By their nature, forward-looking statements involve known and unknown risks and uncertainties and are subject to change because they relate to events and depend on circumstances that will occur in the future, including economic, regulatory, competitive and other factors that may cause our or our industry's actual results, levels of activity, performance or achievements to be materially different from any future results, levels of activity, performance or achievements expressed or implied by these forward-looking statements. These statements are not guarantees of future performance and are subject to risks, uncertainties and assumptions. All forward-looking statements included in this press release are based on information available to us on the date hereof. Except as may be otherwise required by law, we undertake no obligation to update or revise the forward-looking statements included in this press release, whether as a result of new information, future events or otherwise, after the date hereof. You should not place undue reliance on any forward-looking statements, as actual results may differ materially from projections, estimates, or other forward-looking statements due to a variety of important factors, variables and events including but not limited to: the impact of COVID-19 on global markets, economic conditions and the healthcare industry and our results of operations, which is unknown; uncertainty as to our expected financial performance following completion and integration of the WellCare Acquisition; the possibility that the expected synergies and value creation from the WellCare Acquisition will not be realized, or will not be realized within the expected time period; the risk that unexpected costs will be incurred in connection with the integration of the WellCare Acquisition or that the integration of WellCare will be more difficult or time consuming than expected; unexpected costs, charges or expenses resulting from the WellCare Acquisition; the inability to retain key personnel; disruption from the completion of the WellCare Acquisition, including potential adverse reactions or changes to business relationships with customers, employees, suppliers or regulators, making it more difficult to maintain business and operational relationships; the risk that we may not be able to effectively manage our expanded operations; our ability to accurately predict and effectively manage health benefits and other operating expenses and reserves; competition; membership and revenue declines or unexpected trends; changes in healthcare practices, new technologies, and advances in medicine; increased healthcare costs; changes in economic, political or market conditions; changes in federal or state laws or regulations, including changes with respect to income tax reform or government healthcare programs as well as changes with respect to the Patient Protection and Affordable Care Act and the Health Care and Education Affordability Reconciliation Act, collectively referred to as the Affordable Care Act (ACA) and any regulations enacted thereunder that may result from changing political conditions or judicial actions, including the ultimate outcome in "Texas v. United States of America" regarding the constitutionality of the ACA; rate cuts or other payment reductions or delays by governmental payors and other risks and uncertainties affecting our government businesses; our ability to adequately price products on the Health Insurance Marketplaces and other commercial and Medicare products; tax matters; disasters or major epidemics; the outcome of legal and regulatory proceedings; changes in expected contract start dates; provider, state, federal and other contract changes and timing of regulatory approval of contracts; the expiration, suspension, or termination of our contracts with federal or state governments (including but not limited to Medicaid, Medicare, TRICARE or other customers); the difficulty of predicting the timing or outcome of pending or future litigation or government investigations; challenges to our contract awards; cyber-attacks or other privacy or data security incidents; the possibility that the expected synergies and value creation from acquired businesses, including businesses we may acquire in the future, will not be realized, or will not be realized within the expected time period; the exertion of management's time and our resources, and other expenses incurred and business changes required in connection with complying with the undertakings in connection with any regulatory, governmental or third party consents or approvals for acquisitions; disruption caused by significant completed and pending acquisitions, including, among others, the WellCare Acquisition, making it more difficult to maintain business and operational relationships; the risk that unexpected costs will be incurred in connection with the completion and/or integration of acquisition transactions; changes in expected closing dates,

estimated purchase price and accretion for acquisitions; the risk that acquired businesses will not be integrated successfully; the risk that we may not be able to effectively manage our operations as they have expanded as a result of the WellCare Acquisition; restrictions and limitations in connection with our indebtedness; our ability to maintain or achieve improvement in the Centers for Medicare and Medicaid Services (CMS) Star ratings and maintain or achieve improvement in other quality scores in each case that can impact revenue and future growth; availability of debt and equity financing, on terms that are favorable to us; inflation; foreign currency fluctuations; delays in costs associated with development and occupancy of our new East Coast headquarters in Charlotte; economic conditions in the Charlotte metropolitan area and risks and uncertainties discussed in the reports that Centene has filed with the Securities and Exchange Commission. This list of important factors is not intended to be exhaustive. We discuss certain of these matters more fully, as well as certain other factors that may affect our business operations, financial condition and results of operations, in our filings with the Securities and Exchange Commission (SEC), including our annual report on Form 10-K, quarterly reports on Form 10-Q and current reports on Form 8-K. Due to these important factors and risks, we cannot give assurances with respect to our future performance, including without limitation our ability to maintain adequate premium levels or our ability to control our future medical and selling, general and administrative costs.

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