



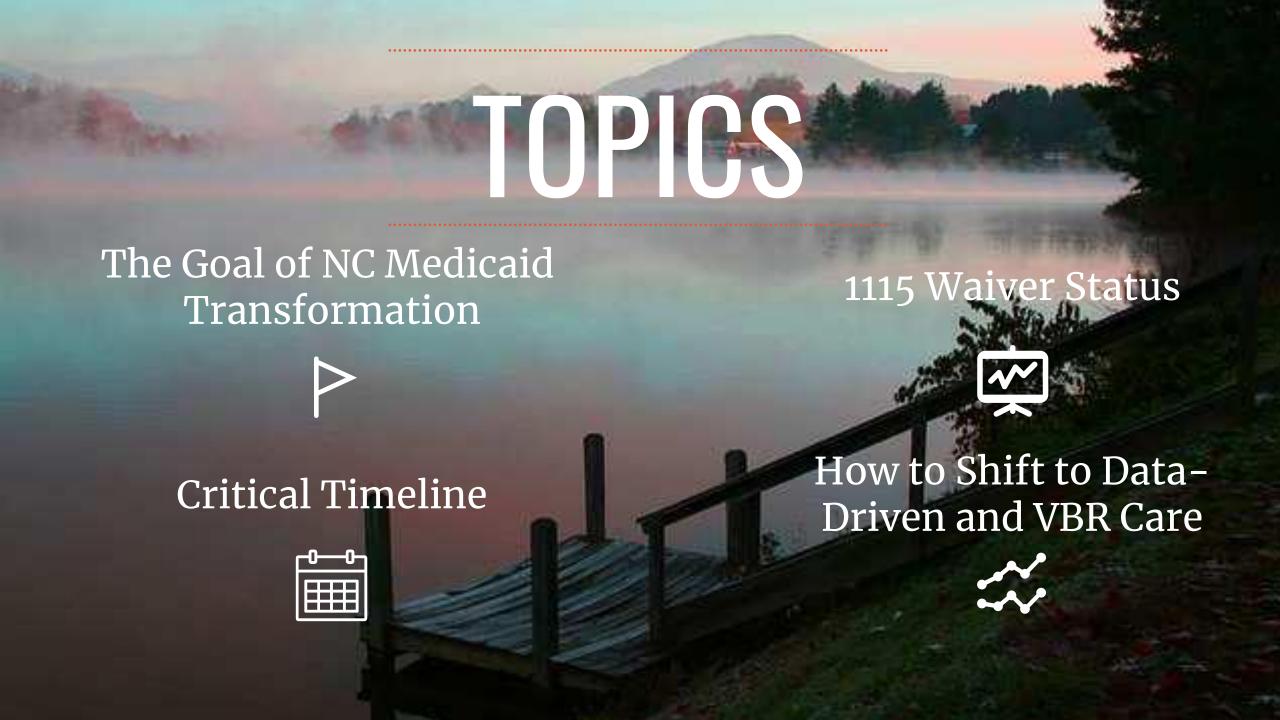
Consolidate 2 Integrate

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Raleigh, North Carolina

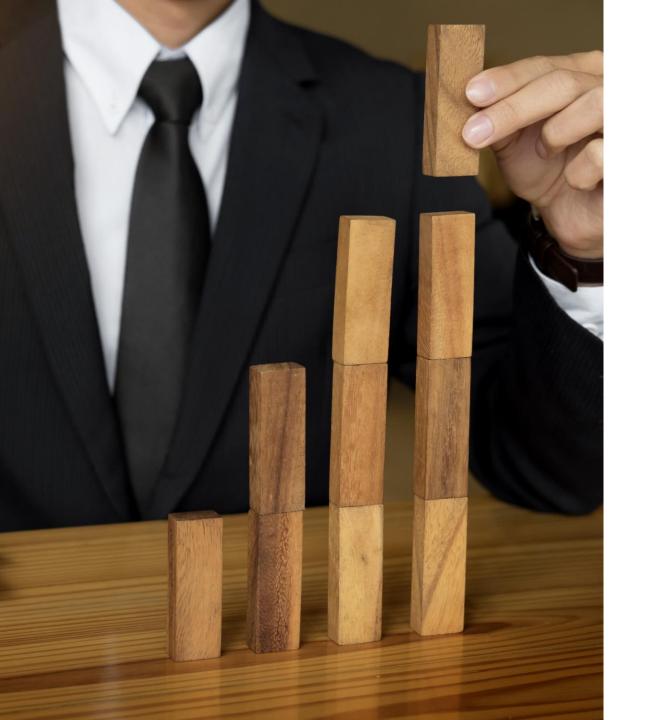
COLLABORATING for CHANGE



North Carolina's Goals for Medicaid Transformation

- Maximizing Value
- Improving Health
- Increasing Access to Whole Person
 Care





Maximizing Value

- Legislative Focus on Budget Predictability
- Departmental Focus on Access, Quality, and Value as evidenced by Concept Papers
- Provider Health Plans (PHPs) Focus on improving health, ensuring quality with efficiency, and achieving a positive bottom line
- Value-Based Payments with ability to incentivize providers

Improving Health

- Concept Paper (Issued March 20, 2018) on Provider Health Plan Quality Performance and Accountability
- "The Department's goal is to improve the health of North Carolinians through an innovative, whole-person centered and well-coordinated system of care, which addresses both medical and non-medical drivers of health."
- "...central to these efforts is a commitment to the delivery of high-quality health care through the development of a datadriven, outcomes-based, continuous quality improvement process that focuses on rigorous measurement against relevant targets, and appropriately rewards PHPs and providers for advancing quality goals."





Increasing Access to Whole Person Care

- Removing the silos of care to understand the Whole Person
- Enhancing coordination among providers of care
- Sharing of health information and data among providers to enhance proven best practices
- Considering and Addressing Social Determinants of Health

The Status of North Carolina's Medicaid Transformation

- Departmental Concept Papers
- Awaiting Approval of the 1115 waiver and other issues
- Legislative Action to address 1115 waiver and other issues
- Department's issuance of a Request for Proposal

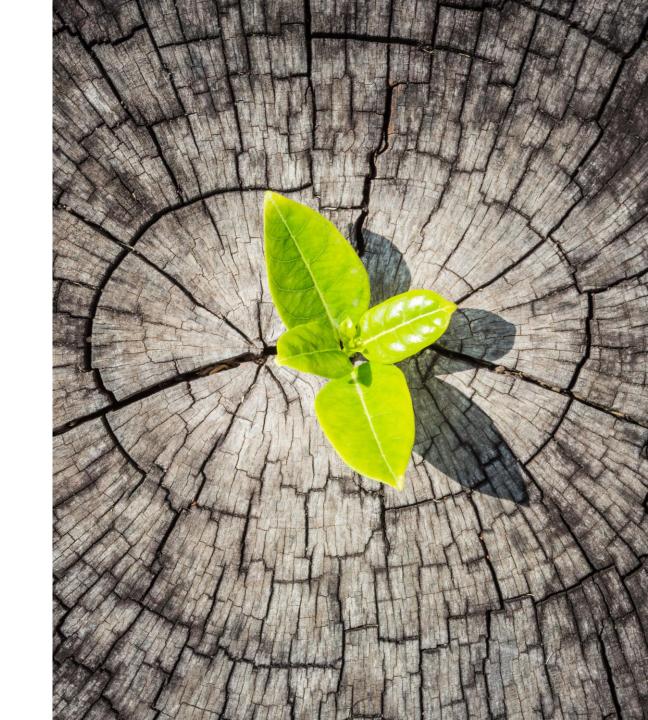




Overview of Critical Timelines for Care Providers

- General Transformation Implementation Date
- Temporary service and eligibility classification carveouts
- State requirements for participation in Health Information Exchange (HIE)

challenges and opportunities around the shift to data driven whole person care and value-based reimbursement



TOPICS

Consolidation Factors



Make It Tight



Know Your Landscape



Consolidation Options



Q+A





Understand Your Landscape Well





What Are The Factors That Will Likely Impact You?

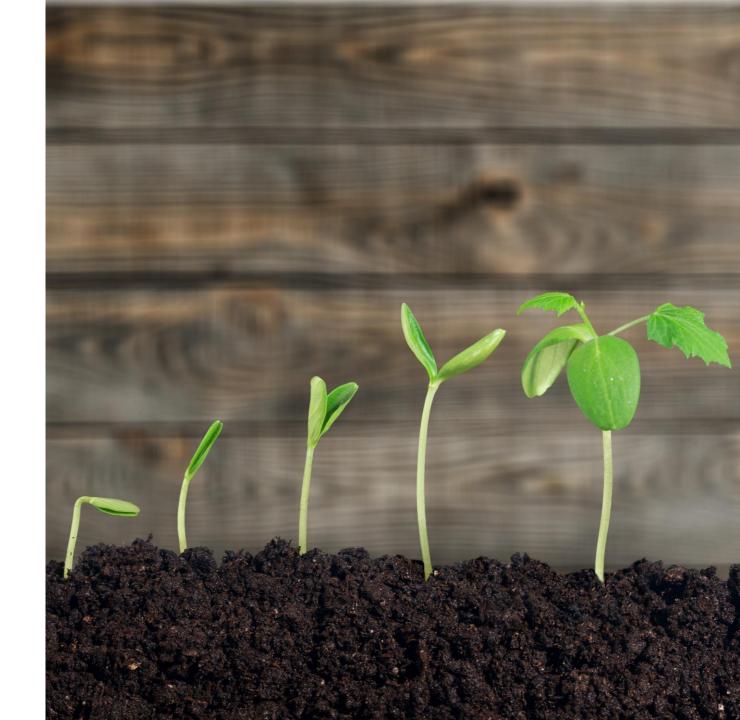
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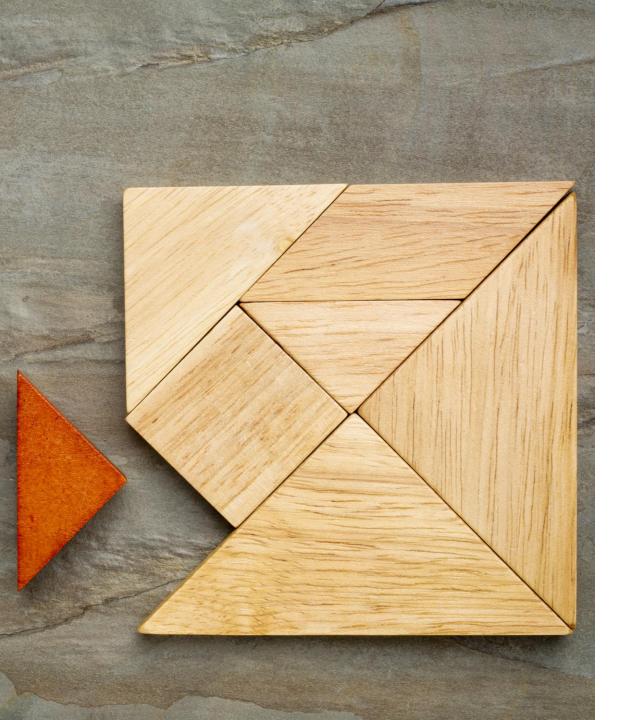


Make It Tight Internally To Increase Options

ORGANIC GROWTH

Makes sense when opportunities + resources are present





DIVESTITURE

Makes sense when you are stagnant, losing \$\$, or not aligned with vision

AFFILIATION

Makes sense when you are new to a market, working with limited resources, or exploring a relationship



Affiliation (General Agreement)

PROS

- Easy to initiate
- Can be done verbally
- Individual brand maintained
- Often inexpensive
- Easiest to walk away from

- Usually limited resource allocation
- Limited capital formation
- Difficult to add others to the mix
- Limited flexibility and agility
- Tough to compete with other models

Joint Venture (Project-Specific Agreement)

PROS

- Limited risks and investment
- Focused with limited scope
- Method to build care continuum
- Can be starting plan for more substantial integration

- Need to negotiate control
- Limited scope can limit innovation
- Can detract from individual brand
- How do you liquidate?

Partnership (Legally Binding Agreement)

PROS

- Greater potential for synergies
- Broader opportunity to expand business activity
- Share in profit/risk specified
- Can be testing stage for more significant integration

- Greater risk for conflict cultural and operational
- Usually requires significant revenue commitment
- May dilute partner's brand
- Can lead to major liabilities



ABSORPTION

Makes sense when you don't have to pay much, target wants out, and it fits

Absorption (Assets Subsumed)

PROS

- Can lead to significant asset acquisition at little or no cost (esp. nonprofits)
- Little question of dominant culture
- Continuation of mission and community service
- Can increase reimbursement depending on parent rates/ contracts

- Likelihood of inheriting headaches and hidden liabilities
- Cultural conflicts
- Usually requires quick action
- Can drain parent organization

MERGER

Makes sense when you have alignment, cultural match, and boards are in sync

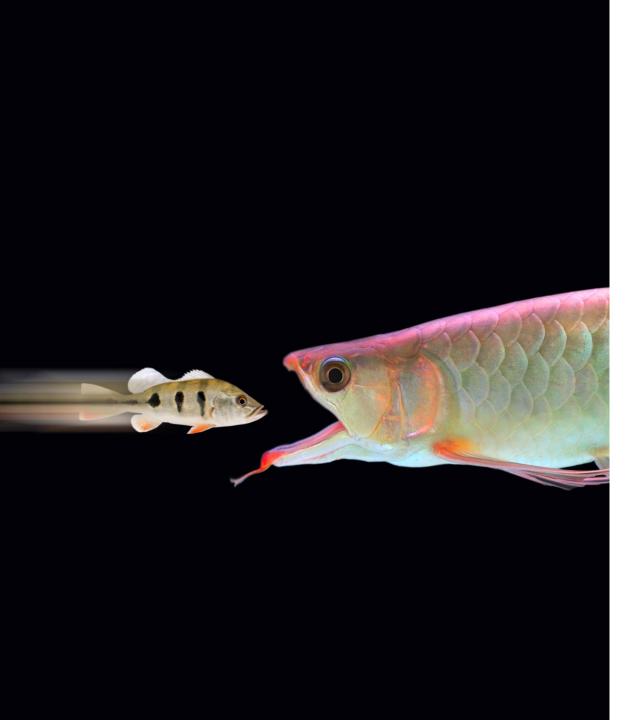


Merger (Separate Entities Merged Operationally and Legally)

PROS

- Mutual benefit if done well
- Can expand/deepen a care continuum
- Resources for expansion (external)
- Resources for sophistication (internal)

- Loss of perceived autonomy and cultural identity
- Challenges in Board integration
- Loss of one brand
- Risk of choosing the wrong partner



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ACQUISITION

Makes sense when it fits, you have the resources, and it can strengthen or accelerate your strategy

Acquisition (Stock/Assets Purchased)

PROS

- Clarity of management structure
- Control of all operations and ability to make changes
- Ability to align leadership for strategic action
- Brand fidelity

- Risk associated with purchase price
- Key management may walk
- Disconnection between M+A and integration of operations
- Lack of alignment with strategic direction of acquirer

Differences In Nonprofit and For Profit M+A

NONPROFIT

- Typically mission-driven
- Long-term orientation
- Community focus and donations
- Easy to put a positive spin
- M+A often with modest transaction expense

FOR PROFIT

- Typically economics-driven
- Short to long-term orientation
- Profit without donations/tax benefits
- Can be viewed negatively
- M+A includes purchase price and significant expense

