FOR IMMEDIATE RELEASE

Centene, NMQF Partner to Study Impact of COVID-19 on Racial Minorities and Underserved Communities

Research to address health disparities, inform public health response in communities of color

ST. LOUIS and WASHINGTON, D.C. (June 8, 2020) – As the U.S. continues to face the COVID-19 pandemic, which has disproportionately impacted communities of color, Centene Corporation (NYSE: CNC), a leading multi-national healthcare enterprise, and the National Minority Quality Forum (NMQF), an independent research and educational organization dedicated to ensuring high-risk racial and ethnic populations receive optimal healthcare, announced today a research partnership for the “Minority and Rural Health Coronavirus Study (MRCS)” to assess the impact of COVID-19 on racial minorities and underserved communities across the country.

Racial Minorities, Underserved Populations Disproportionately Impacted by COVID-19

While the effects of the pandemic are still emerging, current data suggests certain populations are more vulnerable than others. In addition to those age 65 and older, recent data suggests the virus is having a disproportionate impact on communities of color.

According to a recent study from APM Research Lab, African Americans are dying from the virus at nearly three times the rate of white Americans. Further, in 42 states plus Washington D.C., Hispanics/Latinos make up a greater share of confirmed cases than their share of the population. In eight states, it's more than four times greater. And in states that categorize Native Americans in demographic results, early data indicates dramatically disproportionate rates of infection and death. In New Mexico, for example, Native Americans make up less than 10% of the population but over one-third of coronavirus cases.

“Over the past few months, we have experienced a world upended by a global pandemic and a country faced with civil unrest,” said Michael F. Neidoff, Chairman, President and CEO of Centene. “As a company providing health coverage to one in 15 Americans, we remain committed to taking action and playing a vital role in protecting the health of our members and local communities by identifying healthcare solutions to help address health disparities impacting our most vulnerable citizens.”

“The pandemic has shined a bright light on what we have known for decades: throughout our nation’s history, racial minorities have experienced reduced access to healthcare, higher rates of chronic conditions and, ultimately, higher rates of mortality across a range of health conditions,” said Gary Puckrein, President and CEO of NMQF. “With so many minority populations serving in essential roles on the front lines of this pandemic, we have an urgent need to provide them with accessible, equitable healthcare.”

A Focus on Testing and Research to Raise Awareness, Increase Access
MRCS is a prospective longitudinal study of the risk factors associated with the disproportionate impact that coronavirus is having on racial minorities and rural communities. Beginning in June, Centene, NMQF, and a range of other public and private healthcare entities including Quest Diagnostics, will conduct COVID-19 PCR testing (to confirm current COVID-19 infection) and antibody testing (to confirm previous COVID-19 infection) at federally qualified health centers (FQHCs) in five states across the country. Quest will also contribute its Health Trends data to support the research.

Testing will be available to the general public at no cost. All testing locations were pre-identified based on various demographic characteristics, including a high proportion of African American deaths in proportion to the overall state population and a presence of communities of color that have been disproportionately impacted by COVID-19.

The MRCS will utilize a phased-in approach to follow a volunteer cohort of 5,000 racial and ethnic minority participants for five years to examine the impact of COVID-19 on them and their families. Those who test positive for COVID-19 will receive monitoring kits and a daily call from providers for the first 14 days to provide medical advice and help monitor any progression of symptoms, followed by once-per-week calls for one month.

Centene and NMQF have convened researchers and academics from across the country to analyze and translate survey data, and, based on the findings, provide valuable data and evidence-based solutions to inform the public health response and help reduce healthcare disparities among underserved populations. Members of the research team include:

- **Suja M. Mathew, MD, FACP** - Chair of Medicine, Cook County Health and Hospitals System (Principal Investigator)
- **Richard Beswick, PhD, MBA** – Vice President of Research & Chief Research Officer, Cottage Health Research Institute, Cottage Health
- **Vin Gupta, MD, MPA, MSc** – Affiliate Assistant Professor of Health Metrics Sciences Institute for Health Metrics and Evaluation, University of Washington
- **Latrice Landry, PhD, MMSc** – Fellow, Brigham and Women’s Hospital, Dana Farber Cancer Institute, and Harvard Medical School
- **Thomas LaVeist, PhD** – Dean of the School of Public Health and Tropical Medicine, Tulane University
- **Salaheddin Mahmud, MD, PhD, FRCPC** – Professor and Director of the Department of Community Health Sciences, University of Manitoba
- **William A. Meyer, PhD** – Medical Science Liaison Director, Quest Diagnostics
- **Alan Morgan** – Chief Executive Officer, National Rural Health Association (Patient Advocate)
- **Elizabeth Ofili, MD, MPH, FACC** – Morehouse College of Medicine, Professor Medicine, Director & Senior Associate Dean, Clinical Research Center & Clinical and Translational Research
- **Gary Puckrein, PhD** – President, National Minority Quality Forum (Patient Advocate)
- **Gloria Wilder, MD, MPH** – Vice President, Innovation and Health Transformation, Centene Corporation

**Communities Together in Health**
The MCRS research partnership falls under Centene’s broader Communities Together in Health, an initiative led by Centene to help raise awareness around health disparities. Amid the COVID-19 pandemic Communities Together in Health is working to engage key healthcare stakeholders – including members, providers, community leaders, nonprofit organizations, tribal governments and government officials – to
help address disparities in the healthcare system, while recommending evidence-based solutions and policies to further address health disparities across the country.

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**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.

Centene uses its investor relations website to publish important information about the company, including information that may be deemed material to investors. Financial and other information about Centene is routinely posted and is accessible on Centene's investor relations website, [http://www.centene.com/investors](http://www.centene.com/investors).

**About the National Minority Quality Forum**

The National Minority Quality Forum assists health care providers, professionals, administrators, researchers, policymakers, and community and faith-based organizations in delivering appropriate health care to minority communities. This assistance is based on providing the evidence in the form of science, research, and analysis that will lead to the effective organization and management of system resources to improve the quality and safety of health care for the entire U.S. population, including minorities.

**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; 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.