UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM 8-K

Current Report

Pursuant to Section 13 or 15(d) of The Securities Exchange Act of 1934

Date of Report (Date of earliest event reported): January 7, 2019 (January 7, 2019)

MOLINA HEALTHCARE, INC.

(Exact name of registrant as specified in its charter)

Delaware (State or other jurisdiction of incorporation)

☐ Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)

1-31719 (Commission File Number) 13-4204626 (I.R.S. Employer Identification No.)

200 Oceangate, Suite 100, Long Beach, California 90802 (Address of principal executive offices)

Registrant's telephone number, including area code: (562) 435-3666

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions:

Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)
Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))
Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))
Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§240.12b-2 of this chapter)
Emerging growth company

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act.

Item 7.01. Regulation FD Disclosure.

On Monday, January 7, 2019, the Company's management gave a presentation followed by a question and answer session at the 37th Annual J.P. Morgan Healthcare Conference in San Francisco, California. During the presentation, the Company presented and webcast certain slides. A copy of the Company's complete slide presentation is included as Exhibit 99.1 to this report. An audio and slide replay of the Company's presentation will be available for 30 days from the date of the presentation on the Company's website www.molinahealthcare.com.

The information furnished herewith pursuant to Item 7.01 of this current report shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934, as amended (the "Exchange Act") or otherwise subject to the liabilities of that section, and shall not be incorporated by reference into any registration statement or other document filed by the Company under the Securities Act of 1933, as amended, or the Exchange Act, except as shall be expressly set forth by specific reference in such filing.

Item 9.01. Financial Statements and Exhibits.

(d) Exhibits:

Exhibit

No. Descriptio

99.1 Slide presentation in connection with the Company's presentation at the 37th Annual J.P. Morgan Healthcare Conference on January 7, 2019.

SIGNATURE

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

MOLINA HEALTHCARE, INC.

January 7, 2019

Date:

By: /s/Jeff D. Barlow

Jeff D. Barlow

Chief Legal Officer and Secretary

EXHIBIT INDEX

Exhibit No.

Description

99.1 Slide presentation in connection with the Company's presentation at the 37th Annual J.P. Morgan Healthcare Conference on January 7, 2019.



Molina Healthcare, Inc. J.P. Morgan Healthcare Conference

Joe Zubretsky
President & Chief Executive Officer
January 7, 2019

Cautionary Statement

Safe Harbor Statement under the Private Securities Litigation Reform Act of 1995:

This slide presentation and our accompanying oral remarks contain forward-looking statements regarding, without limitation, our business, operations, turnaround, plans, guidance, projections, and longer-term outlook within the meaning of Section 27A of the Securities Act of 1933, or Securities Act, and Section 21E of the Securities Exchange Act of 1934, or Securities Exchange Act. We intend 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 such safe harbor provisions. All statements, other than statements of historical facts, included in this presentation may be deemed to be forward-looking statements for purposes of the Securities Act and the Securities Exchange Act. Without limiting the foregoing, we use the words "anticipate(s)," "are confident," "believe(s)," "estimate(s)," "expect(s)," "guidance," "intend(s)," "may," "outlook," "plan(s)," "project(s) or "projection(s)," "will," "would," "could," "should," and similar expressions to identify forward-looking statements, although not all forward-looking statements contain these identifying words. We cannot guarantee that we will actually achieve the plans, intentions, outlook, or expectations disclosed in our forward-looking statements and, accordingly, you should not place undue reliance on our forward-looking statements. Anyone viewing or listening to this presentation is urged to read the risk factors and cautionary statements found under Item 1A in our Form 10-K annual report, as well as the risk factors and cautionary statements in our quarterly reports and in our other reports and filings with the Securities and Exchange Commission and available for viewing on its website at sec.gov. Except to the extent otherwise required by federal securities laws, we caution you that we do not undertake any obligation to update forward-looking statements made by us.

MOLINA

Today's Agenda

Today's presentation will provide management's perspective on the following market misperceptions:

Misperception 1: Much of the profit improvement previously disclosed by Molina has been harvested in 2018

Misperception 2: At 2.4%, Molina's after-tax Medicaid margins have peaked

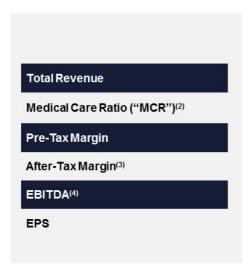
Misperception 3: Because Molina's current Marketplace margins are unsustainable, Marketplace profit declines are inevitable

Misperception 4: Once Molina's margins are restored and sustained, the company will be challenged to grow revenues

MOLINA HEALTHCARE

Molina: A Solid Start in 2018; Significant Opportunity for Future Growth

High quality 2018 earnings create a solid baseline for growth





- All amounts are estimates; actual results may differ materially. See the Company's risk factors as discussed in its 2017 Form 10-K and other reports and filings with the Securities and Exchange Commission, and the statements in this presentation after the heading "Safe Harbor Statement under the Private Securities Litigation Reform Act of 1995" Medical Care Ratio represents medical care costs as a percentage of premium revenue
 After-Tax margin represents net income as a percentage of total revenue
 See reconciliation of non-GAAP financial measures at the end of this presentation





Profit Improvement Opportunity

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Profit Improvement Opportunity

Misperception 1: Much of the profit improvement previously disclosed by Molina has been harvested in 2018

Reality

2018 earnings benefited from early identifiable initiatives focusing on managed care fundamentals

Most of the more complex initiatives with high value are still in process

We have increased many of our initial profit improvement estimates

We are highly confident in our ability to harvest additional profit improvement



Profit Improvement Opportunity

Pre-tax improvement amount has significantly expanded, even with approximately \$200M already harvested





Misperception 2: At 2.4%, Molina's after-tax Medicaid margins have peaked

Reality

Our Medicaid MCRs are 100 to 200 basis points higher than "best in class"

Some of our operating metrics in many of our plans are still "under market"

The remaining profit improvement described previously inures primarily to Medicaid

We assume a continued stable rate environment where rates are slightly lower than the medical cost trend



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There is substantial room for improvement to bring our current operating metrics in line with "best in class"







★ Third-Party Partnerships Announced

Metrics We Have Targeted For Improvement





Utilization

- Hospital Admissions
- ER Usage
- High-cost Outlier Cases
- Short Stays
- Observation Days





Pharmacy *



- Members - Specialty Rx Trend
- Formulary Management





At-Risk Revenue *

- Risk Score Data Capture
- Quality Scores
- HEDIS



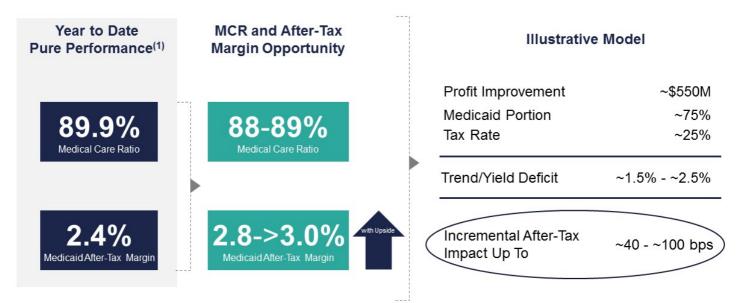


Payment Integrity

- Claim Editing
 - Cost Avoidance
 - Enhanced COB
 - Post Payment Recovery



By approaching "best in class" operating metrics, Molina's Medicaid MCR can improve by 100 - 200 basis points



Pure performance excludes the impact of the retroactive California risk corridor adjustment





Recent ACA Court Ruling

Company perspective following the ruling

- ACA will remain in effect for 2019, and we expect that through appeals process ACA will remain in effect in its present form thereafter
- Given strong consensus that recent ruling will not survive on appeal, it is premature to comment on potential impacts to our business
- The ruling does not change our previously outlined strategy

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Misperception 3: Because Molina's current Marketplace margins are unsustainable, Marketplace profit declines are inevitable

Reality

For Molina, the adjustment to our reported MCR for federal purposes is securely above the minimum

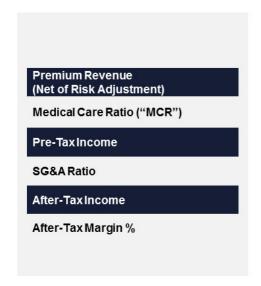
Our future profitable years do not rely on prior unprofitable years to protect their MCR floor

A margin decline, if one occurs at all, will be due to competitive pressures and growth, not the MCR floor

Marketplace profit dollars can grow off the 2018 base on revenue gains over the next number of years

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Illustrative full year 2018 Marketplace pure performance financial metrics





Full Year Pure Performance

Our Marketplace is Unique

- 5th largest Marketplace plan
- ~30% of full year EBITDA
- Extension of Medicaid
- Network priced off Medicaid rates
- Specialized broker channel serving working poor
- ~20% full subsidy
- ~70% partial subsidy
- ~5% market share



Pure performance excludes the impact of the 2017 Marketplace risk adjustment and CSR subsidies Excludes the impact of the Health Insurance Fee (HIF) and utilizes a tax rate of ~25% for comparative purposes

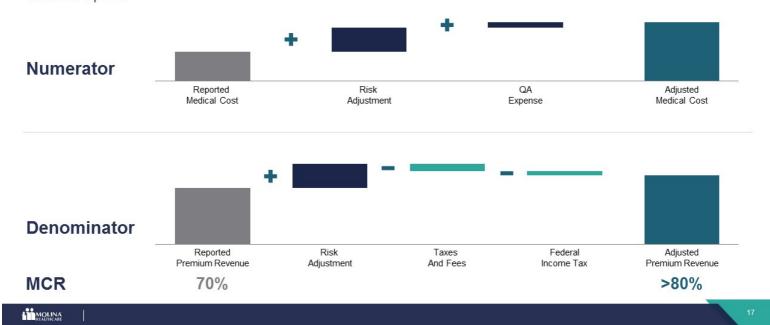
Our reported MCR for federal purposes is securely above the 80% federal minimum



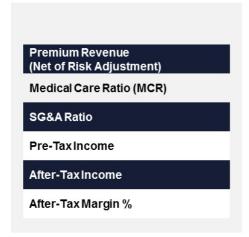


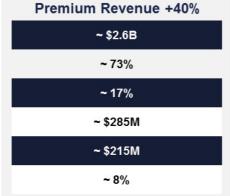
MOLINA HEALTHCARE

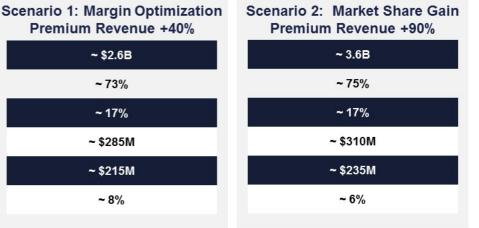
Federally prescribed adjustments to reported amounts place us securely above the minimum with room to spare



Marketplace earnings growth scenario analysis (pure performance)







2018 After-Tax Income ~\$180M



2019 Marketplace Membership Update

We remain very competitive with an excellent foundation for future growth despite our conservative rating strategy

Marketplace Enrollment

Year End 2018



January 2019⁽¹⁾

~375K

- Filed rates in April 2018, before the profitability of the 2018 business was certain
- Conservatively filed a 4% rate increase on average and on top of profitable 2018 rates; margin over membership
- We remain competitive in most geographies
- We expect the business to grow off this base in 2020

l. Approximate enrollment as of January 4, 2018. California open enrollment continues through January 15, 2019 and the payment grace period may cause this number to changi





Misperception 4: Once Molina's margins are restored and sustained, the company will be challenged to grow revenues

Reality

The existing business portfolio is ripe with near term revenue opportunities ready to harvest

The longer term growth engine is currently being built

The new management team has bid successfully in the last three procurements

The growth potential in our product segments is significant and we have the ability to maintain and expand market share

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Near-term growth opportunities in existing portfolio create more than \$1.0 billion of revenue lift into 2019



Mississippi Medicaid startup, full year membership and CHIP award



Ohio
Full year behavioral
health carve-in



Illinois
Full year membership from statewide expansion and competitor enrollment freeze



Washington
Membership reprocurement
growth, offset by Rx carveout, and BH carve-in



Idaho
Fully Integrated
Dual Eligible (FIDE) SNP
membership growth as
program expands



Utah and WisconsinRe-entry into the
Marketplaces



Florida
Retention of regions and continued Medicaid presence worth ~\$500 million



Puerto Rico Received top score in islandwide reprocurement



RFP capture abilities are being built and enhanced for longer-term opportunities



RFP Process

- Hired new RFP leadership in late 2018
- Redesigned entire RFP process
- Deeply engaged executive management team at all phases of the RFP process
- Recent successes: Washington, Puerto Rico, Mississippi CHIP
- Pending awards: Texas STAR PLUS, STAR and CHIP (high degree of confidence)



Business Development

- Highly skilled new health plan leadership team in place
- New business development leader hire in process
- Local "ground game" being strategically developed in prospective RFP markets
- Developing deep, targeted insights into priorities and issues in key target markets



Government segments are the largest and fastest growing within healthcare

Government Sector Managed Care Spending Growth (2016 - 2021 CAGR)

Medicaid Duals

8.0% 7.0%

Medicare Marketplace

8.5% 4.0%

Source: NHE, Medicaid OACT, Medicaid.gov, Medicare Trustees, CMS, CBO, AHIP, MedPAC, NAIC

Drivers of Government Sector Growth

Medicaid

- Underlying population growth
- Medicaid expansion growth and increasing coverage/benefits

Duals

- Growing aging population
- Increased Medicaid coverage and integration between Medicaid and Medicare

Medicare

- Growing aging population
- Enhanced product value driven by strong government support

Marketplace

- Government subsidies
- Relative cost effectiveness of alternatives



Longer term, there are significant embedded opportunities within our existing portfolio



Core Drivers

- Underpenetrated state market share in Medicaid
- Redetermination and reenrollment management
- Launch additional products in over 400 Medicaid only counties
- \$30 billion of Medicaid revenue is expected to be procured in next 3 years

Opportunities

- TX STAR PLUS and DSNP
- Marketplace and/or Medicare expansion in IL, SC, MS, and PR
- Medicaid expansion in MS, UT
- IL, and OH LTSS carve-in
- MI BH opportunity



Key Takeaways from Today's Presentation

- 1 Significant profit improvement opportunities remain post 2018 performance
- We have a path to achieve after-tax Medicaid margins in the 2.5 to 3.0% range with upside
- Our Marketplace business has multiple paths to allow us to achieve growth in profits
- Molina's near and long term revenue opportunities are attractive and we are well-positioned to pursue them

MOLINA HEALTHCARE



Thank you



Appendix

Appendix

Non-GAAP Reconciliation of EBITDA

2018 Guidance

(in millions)	Low End	High End
Net Income	\$585	\$600
Adjustments:		
Depreciation, and amortization of intangible assets and capitalized software	120	120
Interest Expense	115	115
Income Tax Expense	285	290
EBITDA	1,105M	1,125M

