Better Care, Lower Costs

What’s Your Theory of Change?

NRHI Affordability Summit

Dr. Lewis G. Sandy
Executive Vice President
Clinical Advancement
UnitedHealth Group
UNITEDHEALTH GROUP®
Helping people live healthier lives and helping make the health system work better for everyone

Foundational Competencies
Clinical Insight   Technology   Data & Information

Our United Culture
Integrity   +   Compassion   +   Relationships   +   Innovation   +   Performance
Health Benefits

Health care coverage and benefits:
• Employer & Individual
• Medicare & Retirement
• Community & State
• Global

Health Services

Information and technology-enabled health services:
• Data and Analytics
• Pharmacy Care Services
• Population Health Management
• Health Care Delivery
• Health Care Operations
Optum: Market Leader

Providing services to:

~124M individuals
4 of 5 U.S. hospitals
>67K pharmacies
>100K physicians, practices & other health care facilities
~200 health plans

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250K
UnitedHealthcare plan sponsors

141M
consumers

1.3M
UnitedHealthcare network care providers

300K
workforce

>866K
clinical professionals

supported by

including
~1 Trillion
digital transactions processed annually

~$3.3B
invested annually in technology & innovation
Why we do what we do

All of these actions support the commitment we’ve made to our customers, consumers, and care providers that we call the **Triple Aim**

Better Care  Better Health  Lower Cost
It starts with strategy and business objectives.

Align your health benefits strategy with your objectives and culture. Motivating Health Ownership is all about helping people achieve better health by making more informed health care decisions, which over time can lead to lower cost and better business performance.
The Consumer Activation Index™ (CAI)

1. Improve the effectiveness of employer health benefit plans
   - Consumers account for 50% of their health care status/costs
   - CDC on health factors

2. Engage providers to improve adherence to evidence-based medicine

3. The goal
   - An activated consumer
     - Healthier
     - Better user of resources
     - Lower cost
     - More satisfied

MOTIVATING HEALTH OWNERSHIP
Health Plan Manager Overview

• A purpose-built application to measure the efficiency and efficacy of the Modernized Plan for Health
  – A best-in-class data visualization tool leveraging Optum Data Management’s proprietary BI engine
  – A scalable, high-performance and cohesive customer-facing platform
  – A member-centric, data-rich platform to support consultative engagement models
  – An extendable platform to increase content sharing and collaboration

• An integrated platform to provide visual insight across multiple domains in support of Population Health Management
  – Cost & Utilization
  – Health Management (Wellness, Case and Disease Mgmt.)
  – Risk Based Segmentation & Profiling
  – Race/Ethnicity/Language/Geographic
  – Normative Benchmarks
Large ASO Customer: opportunity of up to 10% in TCOC savings

<table>
<thead>
<tr>
<th>Benefits Design</th>
<th>Customer</th>
<th>Peer Norm</th>
<th>Proposed</th>
<th>Opportunities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cost Share (Value-Based)</td>
<td></td>
<td></td>
<td></td>
<td>Already leading vs peer.</td>
</tr>
<tr>
<td>Network Design</td>
<td></td>
<td></td>
<td></td>
<td>Up 7% Savings (ACOs, Narrow, COEs, Tiering)</td>
</tr>
<tr>
<td>Quality and Transparency</td>
<td></td>
<td></td>
<td></td>
<td>2-3% Savings Health HUB</td>
</tr>
<tr>
<td>Clinical Resources (Med, Rx, BH)</td>
<td></td>
<td></td>
<td></td>
<td>Unified experience and higher engagement in clinical and well-being</td>
</tr>
<tr>
<td>Rewards, Well-being</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Engagement</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

Current UHC covered population
By the Numbers: Social Determinants and Health

- **20%** of health outcomes can be directly attributed to clinical care.
- **80%** of health and well being is tied to social and economic factors, physical environment and health behaviors.

- **15 year** life expectancy difference between the most advantaged and disadvantaged Americans.
- **162,000** deaths annually due to low social support.

- **85%** of physicians report that unmet social needs lead to poorer health outcomes.
- **20%** of physicians are confident in their ability to address unmet social needs.

Sources: Robert Wood Johnson Foundation, Kaiser Family Foundation, New England Journal of Medicine, American College of Physicians
By building an infrastructure around social determinants of health, we can…

- Redefine health to consider the whole person – not just medical care
- Remove barriers that limit access to care and address health disparities
- Improve overall health and well being of all vulnerable populations
UnitedHealthcare's SDoH Infrastructure: How it Works

Turning disparate data into actionable information to support our members' social determinates of health.

**ICD-10 Diagnosis Code Set Categories**
- Counseling
- Economic Stability
- Education
- Employment
- Health/Health Care
- Personal Care
- Respite Care
- Social/Community

**Data Standardization**
- Various Data Sources
  - Clinical Systems
  - Member Navigators
  - Point of Care
  - Self-reported Data
  - HSA
  - HouseCalls
  - Claims Data
  - Rx

**Social Value to Member – Imputed Market Price (IMP)™**

**Reporting, Analysis and Clinical Outcomes:**
- Identification data
- Referral data
- Fulfillment data

**UHC Customer Advocates**
- M&R Advocate
- C&S Advocate

**Clinical Profile**

**Transportation Vendors**

**Social Referral Sources**

**Network Provider Profile**

Member
Clinician
Physician

**UnitedHealthcare Strategic Community Partnerships. Proprietary and confidential. Do not use without express written consent.**
## What We’ve Accomplished to Date

**Data source:** National Strategic Partnerships (NSP), June 2019.

**Proprietary and confidential. Do not use without express written consent.**

<table>
<thead>
<tr>
<th>Total membership</th>
<th>Medicare membership</th>
<th>Medicaid Membership</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong># of members who identified at least 1 SDoH</strong></td>
<td><strong># of members referred</strong></td>
<td><strong># of referrals provided</strong></td>
</tr>
<tr>
<td>1.65M+</td>
<td>740K</td>
<td>944K</td>
</tr>
<tr>
<td>1.34M+</td>
<td>629K</td>
<td>794K</td>
</tr>
<tr>
<td>315K</td>
<td>110K</td>
<td>150K</td>
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</tbody>
</table>

Data from 1/1/2017 (inception) – 8/31/2019

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What’s Changing

We proposed **23 new SDoH codes** to the ICD-10 governing committee.

**April-May 2019:** Comment period

**Nov. 2019:** Committee decision, next steps

**Nov. 2020:** If approved, new codes available

Coding authorities revised rules to expand coding privileges to **all clinicians** involved in patient care.

**Provider segment encouraged to:**

- Support the use of self-reported data. (AHA Coding Clinic will be recommending use to the ICD-10 Committee in August 2019)
- Document known social determinants of health (SDoH)
- Communicate this change to your organizations and billing staff

**Supporting Industry Partners:**

UnitedHealthcare

*“Clinicians” has been loosely defined according to the AHA. 2018 American Hospital Association | April 2018 www.aha.org

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**HYZAAR:** This medication is COVERED by the patient’s prescription benefit plan.

<table>
<thead>
<tr>
<th>Medication</th>
<th>Pharmacy Name / Type</th>
<th>Duration (days)</th>
<th>Patient Cost</th>
<th>Select</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hyzaar tablet</td>
<td>Retail Pharmacy</td>
<td>30</td>
<td>$50.00</td>
<td></td>
</tr>
<tr>
<td>Micardis/HCT tablet</td>
<td>Retail Pharmacy</td>
<td>30</td>
<td>$10.00</td>
<td></td>
</tr>
<tr>
<td>Avalide tablet</td>
<td>Retail Pharmacy</td>
<td>30</td>
<td>$10.00</td>
<td></td>
</tr>
</tbody>
</table>

Please consider prescribing one of the alternative medications listed below:

This is an estimated cost, so the actual pricing may vary. Because drug prices are subject to change, and the cost provided is an approximation based upon claims and medical information currently available, the actual cost at the pharmacy may differ.
Your Progress

Goal

Sign up for your goal now!

Employer Rewards

Rally for Health Rewards

2 activities completed

View Details

Your Coins

Featured Rewards

Recommendations

My HSA Dollars: $150 of $600
Mobile Enablement for the Patient

Search

Quick Care
Convenience and Urgent Care

People
Doctors, medical groups and other professionals by specialty

Places
Hospitals, clinics, labs, imaging centers

Pharmacies
Find nearby pharmacies

Estimate Drug Cost
Find drugs and compare prices

Estimate Care Cost
Professional for services & treatments

Home Search Messages Contact

Diabetes Screening
16 Care Paths Found
Zip Code: 55426

Fasting Blood Glucose Test
This test measures the blood level of glucose (sugar) after not eating for at least eight hours.
Local Average: $6
Out-of-Pocket: $6

Hemoglobin A1c Test
This test is used to provide a measure of your blood sugar (glucose) control for the previous 2 to 3 months.
Local Average: $15
Out-of-Pocket: $15

Insulin Test
This test measures the level of insulin in the blood after not eating for at least eight hours.
Local Average: $17
Out-of-Pocket: $17

Get Help With This Screen

Virtual Visits

About Virtual Visits
Real doctors. Real care. Right now.
See and speak to a doctor online anytime from your mobile device or computer.

Good for:
- Bladder/Urinary Tract Infection
- Cough/Cold/Flu
- Migraines/Headaches
- Rash

Not good for:
- Anything requiring an exam or test
- Chronic or Complex Conditions
- International Visits
- Sprains/Broken bones or injuries requiring bandages

If you’re having a medical emergency, call 911 or seek other appropriate emergency medical assistance.

Frequently Asked Questions
Q: What virtual visit services are covered under my health plan?
Individual Health Records (IHR)
Theories of Change: Driving Quality and Affordability

- Health Care: tends to be insular, reactive
- Easy: Getting agreement on high level aims
- Not so easy: changing resource allocations, power structures, business models
- Disruption is required!
- The Barbell paradox
Weightlifting Shapes Aviano Soldier’s Career and Olympic Aspirations

Source:
THANK YOU

Lewis G. Sandy MD
Executive Vice President, Clinical Advancement
UnitedHealth Group
(952) 936-1828
Lewis_g_sandy@uhg.com

www.unitedhealthgroup.com