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UnitedHealth Group, one of the largest health care companies in America, is among the fastest growing and most diversified in the industry and a force for positive change in health care in the United States and worldwide. UnitedHealthcare, our health benefits platform, is providing practical innovations in health benefits plans to improve the health of individual consumers of care, while supporting the population health and financial goals for plan sponsors of every variety. Optum, our health services platform, is engaging consumers in making better decisions about their health and health care, and supporting care providers in improving the efficiency, effective delivery and affordability of care.
Performance Highlights

Following a strong finish in 2014, UnitedHealth Group is moving into 2015, 2016 and beyond with better forward momentum, more growth opportunities and fewer headwinds than we have experienced in a number of years. Our 2014 performance was highlighted by diversified growth, continuing advances in service, innovation and enabling technology and strong operating and medical cost management. Today, UnitedHealth Group is positioned to better respond to the demands of our evolving health care system and help improve the lives of the people we are privileged to serve.

Here are just a few examples:

• In 2014, we expanded in existing and new state Medicaid programs to serve the health needs of 1 million additional underserved children, young families and vulnerable people with complex medical conditions. Our footprint in the Medicaid market continues to grow, now reaching states where nearly 60 percent of the Medicaid community resides, serving people through more than 100 separate state programs.

• We provide millions of people with information and incentives to make better choices and manage their health costs, along with the help they need in finding the right care at the right place. We are in the process of on-boarding 30 million people to Optum’s new Rally consumer health platform and rapidly deploying across UnitedHealthcare’s businesses Advocate4Me – the single point of contact to address all of a member’s health care needs. And our app for mobile devices, Health4Me, brings more information and convenience to users than ever before, along with transparency in health care quality and costs and the ease of mobile payments to health care providers.

• Our nurses are providing home visits – more than 1 million in 2014 – to help the elderly and people with chronic conditions monitor their health and build more consistent care regimens to get healthy and stay healthy.

• Our Optum business is now advancing the direct delivery of quality care to 2 million people through our own growing network of physician practices. During 2014, we continued our efforts to help physicians deliver better health outcomes more affordably, while simplifying their work so more time can be spent with patients.

Nearly 400,000 physicians are now using Optum’s cloud-based Link service in their practices with a goal to reach 600,000 by the end of 2015.

• UnitedHealthcare’s total value-based payments to physicians and hospitals tied directly to quality, better patient outcomes and lowering the overall cost of care have nearly tripled in the last three years to $37 billion and are expected to nearly double again to $65 billion by the end of 2018. We have more than 500 accountable care programs active today and expect to create as many as 250 new accountable care program relationships in 2015, fostering deeper, more collaborative approaches with physicians and hospitals across the United States.

• We continued to help improve the operating performance of Healthcare.gov and a number of state health insurance exchanges for uninsured and underinsured Americans.

• In 2015, we are offering products in 23 state exchanges that are home to 54 percent of the U.S. exchange market population. This includes eight of the 10 largest exchange market states, and 15 states where we also offer Medicaid plans. UnitedHealthcare benefit plans have been chosen by more than half a million Americans already in 2015.

These advances illustrate our broad-based efforts to more effectively serve and to help enable a more efficient, more responsible and more modern health care system. For shareholders the results are clear: Revenues grew 7 percent in 2014 and are expected to rise 8 percent in 2015. Earnings per share are growing, and in June 2014 we raised our dividend by 34 percent to an annual rate of $1.50 per share.

The more than 180,000 people of UnitedHealth Group, Optum and UnitedHealthcare remain dedicated to our values and our mission. Their hard work and consistent execution in 2014 have set the stage for continued growth in 2015 and beyond. We have yet to reach the full potential of this enterprise and are constantly focused on further improving our performance. We have the opportunity of a lifetime for our combined efforts to positively impact the future of health care in the United States and worldwide.
Revenues grew 7 percent in 2014 and are expected to rise 8 percent in 2015.

In 2014, we raised our dividend 34 percent. We repurchased $4 billion in UnitedHealth Group shares and return on equity once again exceeded 17 percent.
Innovative, practical solutions for today’s health care challenges

For more than 30 years, UnitedHealth Group has pursued its mission to help people live healthier lives and make the health system work better for everyone. The people of this enterprise apply vast experience in clinical care management, unmatched data and analysis and cutting-edge information technology to help resolve some of the biggest challenges facing health care today.

As consumers begin to take greater responsibility for their health care decisions, physicians are asked to take on more financial risk for population health, care delivery shifts to a pay-for-performance model and governments respond to social demands for better health care for more people, UnitedHealth Group consistently offers innovative, practical solutions to improve health care quality, to make care simpler and easier to access and to help lower costs for more affordable care.

Our company is comprised of two business platforms offering distinct, yet complementary capabilities. UnitedHealthcare offers a full spectrum of health benefits for every stage of life from newborns to senior citizens, for a wide variety of markets and benefit sponsors: employers of every size, public and private exchanges, state and federal government programs – like Medicare and Medicaid – and the U.S. military. Optum is a leader in health services, engaging health care consumers to be more active participants in making care decisions, aligning care delivery to improve effectiveness and quality and modernizing the health system infrastructure itself to make it more efficient, connected and lower cost.

Both independently and working together, UnitedHealthcare and Optum offer a patient-centered approach to care that helps enhance the performance of care providers, supports the physician/patient relationship and empowers people with the information, guidance and tools they need to make personal health decisions. These unique capabilities and the diversity of our businesses position UnitedHealth Group for continuing growth in 2015 and beyond.
UnitedHealth Group’s performance in 2014 was highlighted by diversified growth, strong operating and medical cost management, and continuing advances in service, innovation and enabling technology. UnitedHealthcare and Optum enter 2015 with momentum from a strong 2014 finish and more growth opportunities than ever.

UnitedHealthcare

UnitedHealthcare has grown organically by more than 8 million people in the past five years and is expecting to grow to serve as many as 1 million or more people in 2015, continuing its record as the fastest growing health benefits company in the nation.

Optum

Optum’s revenues grew by 25 percent, operating margins expanded to 6.9 percent and earnings grew by 32 percent in 2014.
Helping people live healthier lives

UnitedHealthcare combines modern benefit design, strong consumer engagement, targeted clinical management and a modernized care delivery system to provide higher quality, more accessible and affordable care for more people. The company recognizes that there is no single solution, so this business is continually adapting and innovating to meet the diverse and changing needs of the consumers and customers it serves. Today, UnitedHealthcare serves nearly 45 million people domestically and internationally through its market-facing businesses.

UnitedHealthcare Community & State provides health care products and services for the economically disadvantaged and the medically underserved in 24 states and the District of Columbia, serving more than 5 million beneficiaries of Medicaid plans, the Children’s Health Insurance Program (CHIP), Special Needs Plans, integrated Medicare-Medicaid plans and other federal and state health care programs.

UnitedHealthcare Employer & Individual offers a comprehensive array of consumer-oriented health benefit plans and services nationwide for large national employers, public sector employers, mid-sized employers, small businesses and individuals, currently serving the health benefits needs of nearly 26 million people.

UnitedHealthcare Medicare & Retirement is dedicated to the health and well-being needs of people over the age of 50, serving nearly one in five U.S. seniors. This business is the market leader in Medicare Advantage plans, the largest provider of Medicare supplement plans and the nation’s leader in Medicare Part D prescription drug plans.

UnitedHealthcare Military & Veterans is proud to serve approximately 3 million active duty and retired members of the military and their families in the West Region of the Department of Defense’s TRICARE program, supporting access to high quality, affordable, effective health care.

UnitedHealthcare Global serves more than 4 million people with medical benefits, principally through Amil, the largest health care company in Brazil. In addition, this business offers a broad range of tools and techniques to improve the efficiency and quality of health care delivery systems in a variety of settings worldwide.
More than 11 million people are now accessing care from providers compensated by UnitedHealthcare based on quality, better patient outcomes and lowering the overall cost of care.

UnitedHealthcare’s value-based payments have nearly tripled in the last three years to $37 billion and are expected to nearly double again to $65 billion by the end of 2018.

UnitedHealthcare has more than 500 accountable care programs active today and expects to create as many as 250 new accountable care programs in 2015.

UnitedHealthcare arranges for access to care through networks that include more than 850,000 physicians and other care professionals and approximately 6,100 hospitals and other facilities nationwide.

Leading the Shift to Value-Based Care

- More than 11 million people are now accessing care from providers compensated by UnitedHealthcare based on quality, better patient outcomes and lowering the overall cost of care.
- UnitedHealthcare’s value-based payments have nearly tripled in the last three years to $37 billion and are expected to nearly double again to $65 billion by the end of 2018.
- UnitedHealthcare has more than 500 accountable care programs active today and expects to create as many as 250 new accountable care programs in 2015.
Helping make the health system work better for everyone

Optum’s health services businesses are leading positive change across the health system by engaging consumers more deeply in their health and health care; aligning care delivery and clinical and pharmacy management; and modernizing the health system itself. Optum’s businesses have the privilege of serving virtually all participants in health care:

- **Those who pay for care.** Optum serves approximately half the Fortune 500, and 300 health plans and government agencies across 36 states and the District of Columbia.

- **Those who provide care.** Optum works with more than 67,000 pharmacies, four out of five U.S. hospitals and nearly 88,000 physician practices and other health care facilities to support the best possible patient care and experiences.

- **Those who need care.** Optum serves more than 63 million individuals who need the right support, information, resources and products to achieve their health goals.

**OptumHealth** simplifies and supports consumer health management and collaborative care delivery through programs offered by employers, payers, government entities and, increasingly, directly with the care delivery system. OptumHealth helps people by offering products and services focused on improving the quality of care delivery, patient satisfaction and clinical outcomes, while lowering costs through two business groups.

**Collaborative Care** works with physicians serving patients at a local market level, improving the health of patient populations and the overall efficacy and efficiency of their care. The **Consumer Solutions Group** serves people and organizations through its population health management services, health exchange capabilities and financial services products.

**OptumInsight** is one of the largest health care information, technology, operational services and consulting companies in the world. This business provides technology and related services to major participants in the health care industry. The people who work in hospital systems, physician practices, commercial health plans, government agencies, life sciences companies and other health-related organizations depend on OptumInsight to help them reduce costs, meet compliance mandates, improve clinical performance, achieve efficiency and modernize core operating systems to meet the changing needs of the health system.

**OptumRx** has more than 20 years of experience and is one of the largest pharmacy benefit managers in the United States. This business serves individuals by providing nearly 600 million adjusted retail, home delivery and specialty drug prescriptions annually and serves their plan sponsors by managing more than $40 billion per year in pharmaceutical spend. OptumRx serves more than 30 million Americans, providing a full spectrum of pharmacy services to improve health outcomes and reduce health care costs, all rooted in evidence-based clinical information and technological innovation.
Optum is leveraging investments made in simplifying operations, integrating solutions and developing client relationships across our core businesses to deliver double-digit revenue and earnings growth.

3.1 MILLION
CONSUMER HEALTH CARE ACCOUNTS

Optum Financial Services manages approximately 3.1 million consumer health care accounts, including investment accounts and retiree accounts.

BEHAVIORAL HEALTH

OptumHealth directs one of the largest behavioral health networks in the United States, including nearly 144,000 clinicians across nearly 8,700 locations.

144,000
CLINICIANS

Nearly 47 million individuals – nearly 8 million of whom are Medicare and Medicaid beneficiaries – have access to Optum managed behavioral health services today.

8,700
LOCATIONS

OPTUM LABS

Optum Labs, the health care research and innovation center co-founded by Optum and Mayo Clinic, currently collaborates with 20 other health care leaders to drive advances that work to improve patient care and value for patients. AARP, Boston Scientific, Merck, Harvard Medical School and Johns Hopkins Bloomberg School of Public Health are among the organizations collaborating with Optum Labs.
Driving Health Care Forward

UnitedHealth Group is driving practical innovation to build a simpler, more intelligent and cost-effective health care system for everyone and to help the people we serve live healthier lives.

Better, more comprehensive information and services engage consumers in making smarter decisions about their health and care. Leveraging data with advanced technology better connects patients and their doctors and aligns the coordination and delivery of care to improve outcomes. Innovation is critical to solving the challenges facing health care today and in the future. UnitedHealth Group, Optum and UnitedHealthcare are committed to leading the search for innovative, transformative change.

Innovation is deeply embedded in our DNA; it’s both discipline and vision, inspiring us to explore and test new ideas to advance health care and make it perform better for everyone we serve.
Making health care simpler with myClaims Manager

“The pace of my life is really busy. I work full time and I also compete in open water swimming,” says Melissa Kegler, a UnitedHealthcare benefits plan member from Seattle, Washington. “My favorite place to swim is Alki Beach on Puget Sound. Looking over the mountains and the backdrop of Seattle and the Space Needle, it’s absolutely beautiful. I love open water swimming. It’s my passion.”

When Melissa suffered her first sports injury, she was unsure where to turn. Her application to swim the English Channel had been approved and she worried her dream could be destroyed if she didn’t immediately address her medical issue and its financial consequences.

With the help of myuhc.com, UnitedHealthcare’s comprehensive consumer website, Melissa was able to find a physical therapist close to her home. But her Channel swim entailed extra expenses and her work schedule didn’t allow much time to track medical bills and payments she owed.

The myuhc.com website again provided the help she needed through its myClaims Manager tool. Yasmine Winkler, chief marketing, product and innovation officer, UnitedHealthcare, explains: “myClaims Manager is a tool we launched to make it easy for people to look up their claims online, track them and pay their portion. Knowing that you can take care of something so easily gives you peace of mind.”

UnitedHealthcare is the only national health plan to offer its plan participants payment capabilities integrated with claims and benefit information.

Melissa says, “The myClaims Manager feature was really the saving grace to managing my finances. I can go online and know exactly what I’m going to pay and not be surprised by any copays or lab bills. I love the website. It makes me feel like UnitedHealthcare values me. They want to help me with my goals, my health, my success and my open water swimming.”

myClaims Manager made it easy for Melissa Kegler to manage her medical bills so she could focus on her dream to swim the English Channel.
Link: The next generation cloud-based care provider experience

“With a lot of competing priorities today, our biggest challenge is taking waste out of the health care system,” says Mona Reims, director of Revenue Services for Orthopedics Northeast in Fort Wayne, Indiana, a clinic specializing in orthopedics and pain management. “With Link we are able to take out a lot of the administrative costs and apply those resources to patient care.”

Link is a cloud-based administrative platform that enables care providers to process the daily transactions that underlie health care delivery – benefit eligibility and patient copays, claims, appeals and much more – in a way that is convenient for them and fits how they want to do business. Link’s cloud-based technology is designed to be simple, easily accessible, efficient, high quality and open to multiple payers, not just UnitedHealthcare.

Mona and Orthopedics Northeast are early adopters of Link, reporting a savings of about 25 percent of their staff time on claims follow-up and appeals management with the system. “We are able to get a lot more eligibility data,” says Mona. “For instance, we can tell if a patient has physical therapy benefits, what their maximum out-of-pocket is, whether or not they have eligibility for in-patient, out-patient or even mental health benefits. We’re not getting on the phone and then getting a fax and then getting online. Everything is in one place and one modality.”

Jim Becker, executive vice president, Benefit Operations, UnitedHealthcare, says, “One of the things that excites me most about Link is that it is going to be the care provider self-service application for the future. We continue to work closely with Link users – application developers, administrators, physicians and other health professionals – to make it even more responsive to their needs. The goal is to enable users to combine applications, data, analytics and services to their own specifications to improve patient and population health while improving efficiency and reducing costs. This is just the beginning, not an end-point.”

Mona agrees, “One of the unique features of Link is that it provides a collaborative opportunity between care providers and health plans. By innovating together, we’re able to move the needle a whole lot faster, reducing the costs of health care.”
Rally: An interactive product that makes managing health easy and fun

Rally combines technology, gaming and social media to help people find personalized ways to eat better, move more, become more informed and improve their health. Based on each consumer’s self-reported and digitally captured data, Rally provides multiple layers of engagement through rewards, coaching, tools, communities and content that promote healthy lifestyle behaviors.

Vanessa Weathers, a UnitedHealthcare member from New Hampshire, got to know Rally beginning with a simple survey that put her health in context by comparing her health risks with her chronological age. Vanessa was surprised how “young” she was. “Completing the health survey was easy and took no time at all,” she says. “I was excited to learn that my Rally Age was three years younger than I actually am.”

Based on data from the survey, Rally offered Vanessa a selection of “Missions.” One she chose was walking several times a week to get more exercise. “I enjoy hiking because I can be outside, and it’s almost like it’s not exercise at all. It’s a great way to stay active and get your heart rate up, but it’s not as boring as walking on a treadmill.”

Rally also offers communities of people who share their experiences. Vanessa says, “An issue I’ve struggled with is getting restful sleep. I found a community on Rally focused on sleep health. They share what’s worked for them and that way you learn new techniques.”

Vanessa likes the incentives Rally awards her for healthier behaviors and how easy it is to use, especially Rally’s mobile app for people on the go. “I think Rally will help me create healthy routines and behaviors that are sustainable for the rest of my life and not just short-term fixes.” As a result of Rally’s intuitive interface and personalization capabilities, its consumer engagement rate is 10 times the industry standard.

Grant Verstandig, founder and CEO of Rally Health, says, “If we can get consumers to use our product every day and change their behavior, decrease their risk of disease, help them manage how they eat and sleep and feel, we can really help people live healthier lives. The secret to making healthy changes is to do it in small, easy steps and we’ll be there every step of the way.”
Living up to our responsibilities as a good corporate citizen and steward of better health care

Everyone at UnitedHealth Group, Optum and UnitedHealthcare take very seriously our responsibilities to our shareholders, business associates, customers, consumers and the communities where we operate. We constantly strive to live up to the expectations people have for us as a health care company and the high standards of performance and behavior we have set for ourselves. We are honored to have been recognized for our continuing commitment to excellence.

Outstanding Business Performance
• UnitedHealth Group was the top ranking company in the insurance and managed care sector on Fortune’s 2015 “World’s Most Admired Companies” list. This is the fifth straight year UnitedHealth Group ranked No.1 overall in its sector and the sixth consecutive year the company ranked No.1 in its sector for innovation.
• Fortune magazine ranked UnitedHealth Group No. 14 in the 2014 rankings of the 500 largest U.S. corporations based on 2013 revenues.
• Fortune magazine ranked UnitedHealth Group No. 39 on its 2014 Global 500, a list of the world’s largest corporations based on 2013 revenues.
• UnitedHealth Group was named to the Dow Jones Industrial Average, a blue chip group of 30 companies deemed industry leaders, in 2012.

Supporting Our Employees
• UnitedHealth Group earned a top rating of 100 percent on the 2015 Corporate Equality Index from the Human Rights Campaign.
• For the fourth consecutive year, the National Business Group on Health honored UnitedHealth Group with a Platinum award for being named one of the “Best Employers for Healthy Lifestyles” in 2014.
• UnitedHealth Group was named to Profiles in Diversity Journal’s list of the “25 Most Influential Companies for Veteran Hiring” in 2014.
• UnitedHealth Group was named a 2015 Top 100 Military Friendly Employer and a 2015 Military Spouse Friendly Employer by Victory Media, the publisher of G.I. Jobs and Military Spouse magazines.
• U.S. Veterans magazine named UnitedHealth Group one of its Best of the Best companies for U.S. veteran hiring in 2014.

Supporting the Communities Where We Live and Work
• UnitedHealth Group was recognized as one of America’s 50 most community-minded companies for 2014 in the Civic 50, and ranked first in the health care industry for the second consecutive year.
• UnitedHealth Group received the 2014 Best Corporate Steward – Large Business award from the U.S. Chamber of Commerce Foundation’s Corporate Citizenship Center.
• Points of Light recognized UnitedHealth Group with the 2014 Corporate Engagement Award of Excellence for outstanding employee volunteer programs that engage workers and improve communities.
• The Typhoon Yolanda relief effort coordinated by Project HOPE and underwritten exclusively by UnitedHealth Group and its employees, was recognized with the Unsung Heroes award from the Philippines Department of Health in 2014.
• UnitedHealth Group received the Project Sunshine Award for Corporate Philanthropic Leadership in 2014. Project Sunshine provides free educational, recreational and social programs to children and families living with medical challenges.

Protecting the Environment
• UnitedHealth Group has been listed in the Dow Jones Sustainability World Index and Dow Jones North America Index annually since 1999.
• In 2014, UnitedHealth Group was again recognized as a leader among S&P 500 companies by the environmental nonprofit Carbon Disclosure Project (CDP). Within the health care industry category, UnitedHealth Group was one of only three companies earning a position on the CDP Climate Disclosure Leadership Index, earning a score of 99 out of 100.
• UnitedHealth Group received a Bronze Class Sustainability Award in RobecoSAM’s 2014 Corporate Sustainability Assessment. RobecoSAM assesses the sustainability performance of more than 2,000 companies across 58 sectors.
Our Culture

The people of this company are aligned around basic values that inspire our behavior as individuals and as an institution:

**Integrity.** We are dedicated to the highest levels of personal and institutional integrity. We make honest commitments and work to consistently honor those commitments. We do not compromise ethics. We strive to deliver on our promises and we have the courage to acknowledge mistakes and do whatever is needed to address them.

**Compassion.** We try to walk in the shoes of the people we serve and the people we work with across the health care community. Our job is to listen with empathy and then respond appropriately and quickly with service and advocacy for each individual, each group or community and for society as a whole. We celebrate our role in serving people and society in an area so vitally human as their health.

**Relationships.** We build trust through cultivating relationships and working in productive collaboration with government, employers, physicians, nurses and other health care professionals, hospitals and the individual consumers of health care. Trust is earned and preserved through truthfulness, integrity, active engagement and collaboration with our colleagues and clients. We encourage the variety of thoughts and perspectives that reflect the diversity of our markets, customers and workforce.

**Innovation.** We pursue a course of continuous, positive and practical innovation, using our deep experience in health care to be thoughtful advocates of change and to use the insights we gain to invent a better future that will make the health care environment work and serve everyone more fairly, productively and consistently.

**Performance.** We are committed to deliver and demonstrate excellence in everything we do. We will be accountable and responsible for consistently delivering high-quality and superior results that make a difference in the lives of the people we touch. We continue to challenge ourselves to strive for even better outcomes in all key performance areas.

Our Mission

Our mission is to help people live healthier lives and to help make the health system work better for everyone.

- We seek to enhance the performance of the health system and improve the overall health and well-being of the people we serve and their communities.
- We work with health care professionals and other key partners to expand access to quality health care so people get the care they need at an affordable price.
- We support the physician/patient relationship and empower people with the information, guidance and tools they need to make personal health choices and decisions.
Our Leadership

Executive Officers and Leaders

Stephen J. Hemsley
Chief Executive Officer

Cory Alexander
Executive Vice President,
External Affairs

Edson Bueno, M.D.
Founder and Chief Executive Officer,
Amil

Terry Clark
Senior Vice President,
Marketing and Brand

Dirk McMahon
Executive Vice President,
Chief of Enterprise Operations

Richard Migliori, M.D.
Executive Vice President,
Medical Affairs and
Chief Medical Officer

William A. Munsell
Executive Vice President

Don Nathan
Senior Vice President and
Chief Communications Officer

John S. Penshorn
Senior Vice President,
Capital Markets Communications
and Strategy

Eric S. Rangen
Senior Vice President
and Chief Accounting Officer

Larry C. Renfro
Vice Chairman,
UnitedHealth Group and
Chief Executive Officer,
Optum

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Marianne D. Short
Executive Vice President
and Chief Legal Officer

Anthony Welters
Executive Vice President

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President and
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and Chief Financial Officer,
Johnson & Johnson

Stephen J. Hemsley
Chief Executive Officer,
UnitedHealth Group

Michele J. Hooper
President and Chief Executive Officer,
The Directors’ Council, a company
focused on improving the governance
processes of corporate boards

Rodger A. Lawson
Chairman,
E*TRADE Financial Corporation
and Retired President
and Chief Executive Officer,
Fidelity Investments —
Financial Services

Douglas W. Leatherdale
Retired Chairman
and Chief Executive Officer,
The St. Paul Companies, Inc.
(currently known as Travelers
Companies, Inc.)

Glenn M. Renwick
Chairman, President and
Chief Executive Officer,
The Progressive Corporation

Kenneth I. Shine, M.D.
Special Advisor to the Chancellor
for Health Affairs,
The University of Texas System

Gail R. Wilensky, Ph.D.
Senior Fellow,
Project HOPE, an international
health foundation

Audit Committee
Glenn M. Renwick, Chair
Robert J. Darretta
Michele J. Hooper

Nominating and Corporate
Governance Committee
Michele J. Hooper, Chair
William C. Ballard, Jr.
Douglas W. Leatherdale

Compensation and
Human Resources Committee
Rodger A. Lawson, Chair
William C. Ballard, Jr.
Gail R. Wilensky, Ph.D.

Public Policy Strategies
and Responsibility Committee
Gail R. Wilensky, Ph.D., Chair
Edson Bueno, M.D.
Kenneth I. Shine, M.D.
You can find more information about UnitedHealth Group and its businesses by visiting our website: www.unitedhealthgroup.com.

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