

Optum Health

Fast Facts

100M

Consumers served in 2021

>2M

People served under fully accountable arrangements

>60K

Employed/aligned physicians

>2,000

Primary, specialty, urgent and surgical sites

>100

Optum Health payer partners

~2M

Evaluations through HouseCalls performed in 2021

>\$18B

Assets under management for consumers

Optum Health is an integrated direct care delivery platform. We provide high-quality, accessible and equitable care, with better experiences, improved outcomes and reduced total cost of care. We proactively engage people in managing their health and well-being through in-person, in-home, virtual and digital clinical platforms.

We provide care to patients through:

- **Medical Groups and Independent Practice Associations.** Delivering primary, urgent and multispecialty care with ancillary capabilities through an integrated national care delivery network.
- **National Virtual Medical Group.** Offering integrated primary, urgent and behavioral health care solutions virtually, 24/7 in all 50 states in 2022, as an extension of our physical care delivery locations.
- **Ambulatory Surgical Care and Specialty Care.** Partnering with specialists to grow practices and outpatient surgery centers, we optimize site of service and align incentives to offer high-value ambulatory services.
- **Home and Community Platform.** Home care delivery capabilities with expertise in serving patients with complex medical, behavioral and social needs including:
 - **Post-Acute Care.** Providing post-acute care planning and coordination to improve an individual's transition from hospital to home by bringing together physician advisory services, hospital medicine, emergency medicine and transition care to help individuals recover faster.
 - **HouseCalls.** Providing comprehensive clinical health and wellness assessments by advanced practice clinicians to patients in their homes to identify health conditions and close gaps in care.
 - **In-Home Longitudinal and Urgent Care.** Delivering integrated medical and behavioral care for individuals with multiple chronic or complex medical conditions in institutional, home and community settings.
- **Population Health.** Building and delivering superior integrated navigation, engagement and complex clinical and risk management services for payers and employers.
- **Behavioral.** Supporting and proactively engaging people with mental health and substance use conditions through performance-tiered behavioral health networks and on-demand clinical capabilities, as well as digital self-care tools designed to accommodate lower-acuity behavioral needs.

We engage people proactively in their health, well-being and decision-making through:

- **Lifestyle and Prevention.** Improving the health of consumers and preventing future medical expenses through digital wellness services, coaching and employee assistance programs.
- **Optum Financial.** Offering a simplified payment experience for individuals, payers and providers leveraging a smart digital care payment gateway, health savings and spending accounts, advanced financial education tools and consumer engagement and payment services.
- **Optum Serve.** Partnering with the U.S. Department of Defense, Health and Human Services, Veterans Affairs and other federal, state and local health care agencies to provide the full capabilities of UnitedHealth Group to individuals and communities.

Optum Health

Accelerating the transition to a value-based system

Optum Health is positioned to help accelerate the shift to value-based care across the health system. We believe value-based care is the path to achieving better quality outcomes for patients and lowering the total cost of care. Our patient-centered model allows Optum Health to assume greater clinical and financial accountability for a population, drive greater alignment across payers and providers, and deliver the highest-quality patient care and health outcomes.

Across our Optum Care business, we continue to expand and integrate primary, ambulatory, specialty and pharmacy care services in new geographies, grow our relationships with existing and new payers, and build a strong reputation in the Medicare, Medicaid and commercial markets. Primary care physicians are the anchor point for all patient care. Our approach strengthens the critical provider-patient relationship by empowering our primary care physicians with the latest information, insights and best practices to help them efficiently coordinate all patient care, manage referrals and identify higher-quality, lower-cost options.

An example is our Point of Care Assist solution that allows care providers to confirm in real time member eligibility and out-of-pocket costs, locate the highest-quality care providers to refer patients, and receive member-specific recommendations to address gaps in care. Additionally, the Center for Advanced Clinical Solutions offers practical tools and resources, including a value-based care clinical library and solutions that integrate electronic medical records across vendors, to support clinical practitioners and minimize administrative activities.

We are also helping create a better patient experience by reducing friction and complexity in the health system by enabling the smoother flow of information and transactions, and empowering organizations with cohesive health care intelligence across clinical, financial, operational

and administrative functions. Our solutions work together to automate processes, digitally connect systems, and ensure eligibility and benefit coverage in the clinical setting elevate the patient and clinical practitioner experience.

Seamless care experience for patients on their terms

We strive to offer a near seamless experience between virtual and traditional primary, behavioral, specialty and urgent care. We are blending virtual and in-person health care services in a way that enables patients to receive care that best meets their needs, whether it's in a primary care clinic, at home with an advanced care practitioner, or consulting with their behavioral health therapist virtually.

We are investing in virtual telemedicine capabilities and advanced remote and home monitoring technologies to enable the real-time flow of accurate information between providers and patients, with an intense focus on serving high-need, chronic patients. These capabilities include the new Optum Virtual Care platform that enables precision navigation and matching tools connecting patients to their own provider.

Another example of our collective strengths together at scale is our ability to deploy HouseCalls and post-acute care to meet the care needs of a patient in their home. Through HouseCalls, advanced practice clinicians engage Medicare Advantage patients in their homes to increase visibility into members' diagnoses, medications and general health. Our post-acute care business will serve nearly 10 million people by year-end 2021, providing them with care planning and coordination for their transition from hospital to home.

These programs enable more personalized care that delivers enhanced value in the comfort of an individual's own home, while caring for their physical, mental and social needs.

Quality and timely access to integrated behavioral care

Optum Behavioral Health is one of the largest behavioral health networks in the country with more than 300,000 providers serving 37 million individuals. We are focused on improving access to behavioral health services, providing timely high-quality treatments and resources to meet people's needs. Our behavioral health offerings are expanding, driving deeper integration between medical and behavioral, with a primary objective of providing value-based care. Our care delivery platform includes high-quality digital solutions for consumers, behavioral health support for medical providers through our telepsychiatry platform, and integration of care management through community pharmacies. For example, psychiatric nurse practitioners are fully embedded into our Dual Special Needs Plan (DSNP) team to deliver behavioral health consultation and virtual medication management as needed.

Simpler and more convenient health care payments

Optum sees an opportunity to help improve the health payments sector by delivering end-to-end integrated banking and payment experience, creating a seamless payment system for patients, providers and payers. As a financial institution and a health care company, we have a 20-year foundation of managing more than 8 million health banking accounts with over \$18 billion in assets under management. We've developed deep relationships with over 2 million care providers and expect to process nearly \$260 billion in payments

for 2021. Using proprietary insights and technology, Optum Financial is helping health care providers get paid faster and reduce their administrative burden through information and technology-enabled, secure and highly configurable multi-payer provider payments and innovative financing solutions. For consumers, we are helping make health payments easier, more convenient and affordable by bringing together multiple rewards and benefits to a single card solution that we will be launching in 2022.

Optum Health growth outlook

Our investments in the Optum Health portfolio allow us to meet the unique aspects of a patient's journey in a differentiated way. We have deep knowledge and experience from scaling markets like Texas, Florida and Southern California — all of which position us for accelerated growth. Alongside geographic and population expansion, Optum Health expects to drive growth through the continued shift from fee-for-service and shared savings arrangements to full risk. Optum Health is targeting double-digit percentage revenue growth on average and sustainable operating margins in the 8% to 10% range as we continue to invest in our existing products and services and new platforms and markets through de novo development and strategic acquisitions.