

## UnitedHealthcare Medicare & Retirement

### Fast Facts

**\$1.3T**

Projected U.S. Medicare spending in 2025

**>10K**

Baby boomers aging into Medicare daily

**~13%**

CAGR in Medicare Advantage membership since 2016

**~1 in 5**

Seniors in the nation served through UnitedHealthcare Medicare plans

**~2M**

In-home clinical assessments expected to be performed enterprisewide in 2021

**UnitedHealthcare Medicare & Retirement** is dedicated to serving the growing health and well-being needs of seniors and other Medicare beneficiaries. Through a comprehensive and diversified array of products and services, we help over 13 million people manage their health.

This business offers products, services and programs designed to meet the needs of individuals, as well as their families, providers and communities. Our portfolio of products includes:

- **Medicare Advantage Plans.** UnitedHealthcare Medicare & Retirement serves 6.5 million people through a variety of Medicare Advantage plans and a full scope of value-added services and clinical programs. Our simple, affordable plans are supported by industry-leading customer service, delivering outstanding value to consumers and making UnitedHealthcare indispensable to the health, well-being and peace of mind of our members.
- **Medicare Part D Plans.** We also offer stand-alone Medicare prescription drug benefits, serving 3.7 million people throughout the U.S. and its territories. UnitedHealthcare Part D plans cover thousands of brand-name and generic prescription drugs that are most commonly used by people on Medicare, resulting in access, savings, stability and peace of mind for seniors.
- **Medicare Supplement.** Under a long-standing relationship with AARP, we serve 4.4 million people through various Medicare Supplement and other supplemental coverage for people age 50 and older.
- **Retiree Services.** UnitedHealthcare Retiree Solutions provides employers with high-quality, affordable health care solutions for 2.1 million retirees. Group plans include Medicare Advantage, Senior Supplement and Medicare Part D.

## UnitedHealthcare Medicare & Retirement

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### Market characteristics and growth opportunities

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UnitedHealthcare Medicare & Retirement offers the most comprehensive portfolio of products in the industry. Including our DSNPs, we serve 7.4 million people in Medicare Advantage today, having grown by nearly 4 million people since 2015. With over 10,000 baby boomers aging into Medicare daily, the number of people enrolled in Medicare is projected to reach 70 million by 2025, up from 63 million today. Medicare spending is expected to approach \$1.3 trillion by 2025, up from \$920 billion in 2021. With highly competitive offerings available in nearly all geographies, we are well positioned as a market leader trusted by seniors.

Medicare Advantage continues to be a popular choice, serving approximately 44% of individuals eligible for Medicare today, up from 25% in 2010. Over the past five years, UnitedHealthcare Medicare Advantage enrollment has an average annual growth rate of 13%. As the Medicare Advantage value proposition continues to improve, we believe more seniors will choose these plans to meet their unique needs.

The diversity of our Medicare portfolio differentiates us in the market by supporting coverage and care needs across many populations. UnitedHealthcare continues to lead the Medicare Supplement market, serving more seniors through our AARP-branded plans than any other carrier offering similar plans.

As more commercial and public sector employer groups seek cost-effective, value-added solutions for their retirees, we are expanding group retiree offerings with coverage that supports stronger links between our active commercial and retiree businesses. In doing so, we are developing new relationships with employers, labor organizations, health care providers and nonprofit associations.

We see opportunities to continue being good stewards of the Medicare program for the federal government to foster more cost-effective, higher-quality and more efficient health care for all Medicare beneficiaries. Our distinct competencies in data analytics, care coordination, in-home care delivery, post-acute transitions and consumer-level health engagement should serve us well as we position our business to be seniors' plan of choice and strive to be the government's partner of choice.

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### Helping Medicare members achieve better health and manage their health conditions

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All of those we serve are supported by our navigation and advocacy services. Navigators help people work through a health episode with heightened one-on-one clinical and service support during these times. And our advocates are deepening their specialization in specific communities and among specific populations, allowing for better localized support, referrals and connections to help individuals.

The integration of population health technology and data infrastructure with our navigational support programs reinforces member engagement and adherence to our personalized care pathways. For example, more than 75% of those engaged with our remote patient monitoring platform are using it to manage their health every single day. Over 4.5 million alerts have been generated this year, allowing clinicians to respond in real time and prevent adverse health events before they occur.

We are enabling people to receive care from high-performing and trusted care providers through a long history of engaging in value-based care. Nearly 80% of our Medicare Advantage membership is served by care providers who participate in some type of value-based arrangement. In addition, our partnership with Optum Care is an important part of our value-based care strategy delivering high-quality care to millions of our Medicare Advantage members.

We also partner with Optum when those we serve are most vulnerable, such as when they are transitioning out of the hospital. We surround people with the care and support they need to safely get back home and stay there. For our members at greatest risk and in need of more clinical support, our national palliative and high-risk care management programs provided by Optum deliver in-home care support to members with serious illness through a high-touch, home-based care model.

We continue to partner with other high-performing care providers through aligned value-based care programs that incentivize behaviors that will drive better outcomes and reduce the total cost of care. We provide technologies and tools that use artificial intelligence and machine learning to match patients with providers by identifying and recommending members to the highest-performing specialists or primary care physicians available to them — all with the goal of delivering higher-quality care at a lower cost.

Our in-home and community programs continue to evolve with expanding clinical and technology capabilities in our effort to personalize the health care experience for people we serve and support them at every point along the continuum. Members are supported at home with high-quality clinical care, testing for preventable chronic conditions and referrals to critical services such as behavioral health and social support.

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## **Innovative next-generation care provider models**

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UnitedHealthcare and care providers share a common goal to improve people's health and make health care more accessible and affordable for everyone. We believe value-based care is essential to achieve these goals and we will continue to advance next-generation care provider models that pay for better outcomes and performance.

We continue to see higher-quality member outcomes through value-based, incentive relationships with providers compared to those who do not participate in incentive programs. For example, Medicare Advantage seniors in ACOs see their primary care providers nearly 70% more often for annual care visits.

UnitedHealthcare enables care providers to take on increasing levels of risk by providing actionable data, clinical analytics, cloud-based technology applications, care management education and tools, risk management support and infrastructure payments. We're strengthening engagement with care providers by arming them with data and digital tools to help them make more informed decisions around patient care. Today, through our Point of Care Assist solution, more than 650,000 care providers have access to real-time insights on patient care benefits, directly integrated into their workflow, enabling them to connect members to high-quality, cost-effective care options and help identify opportunities to close care gaps.

Further, we are looking to materially expand our specialist incentives to promote increased ambulatory surgery alternatives where appropriate, as a complement to our emerging site of service approaches that help people get the right care, at the right time, in the most affordable care setting. Over the coming years, we will look to accelerate physician enablement under these incentive programs for both primary care providers and specialists.

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## The value of Medicare Advantage

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Medicare Advantage delivers significantly lower out-of-pocket costs and provides more comprehensive and coordinated benefits and better health outcomes, while serving a more diverse, lower-income and clinically complex population compared to fee-for-service Medicare. Medicare Advantage costs the federal government less, and seniors who choose Medicare Advantage save 40% in out-of-pocket costs compared to fee-for-service Medicare. Overall, studies suggest that Medicare Advantage achieves as much as 12% savings to the health system when combining both members' and government savings. In addition, Medicare Advantage offers a wide array of supplemental benefits not offered in fee-for-service Medicare. For example, nearly 90% of plans offer wellness, dental, vision or hearing coverage and nearly 70% of plans offer all four benefits.

Medicare Advantage has an established track record of delivering better health outcomes for people compared to those in fee-for-service Medicare, with a more than 40% lower rate of avoidable hospitalizations. Medicare Advantage beneficiaries with diabetes experience a more than 50% lower rate of any complications and a more than 70% lower rate of serious complications compared to those in fee-for-service. Foundational elements of Medicare Advantage, such as in-home clinical care through programs like HouseCalls, enable better outcomes while also addressing social determinants of health. As Medicare Advantage's value continues to improve, it is critical we ensure the stability of this proven program on which 28 million people rely.