

# UnitedHealthcare Community & State

Medicaid is the largest health insurance program in the nation, serving a highly diverse population, including nearly 50% of U.S. children, with projected spend of more than \$1.1 trillion by 2030. UnitedHealthcare Community & State offers diversified health care benefit products and services that provide care for nearly 8.1 million people who are economically disadvantaged, medically underserved and without access to employer-funded health care coverage.

## The value of managed Medicaid

Approximately 40% of the total Medicaid spend nationally is not currently in a managed care program, providing a large opportunity for us to deliver better care and outcomes through managed care. Growth opportunities include an active Medicaid pipeline of both reprocurements and new business, including the transition of higher-acuity populations into managed care.

We work with states and community partners to help create a more sustainable care system and empower Medicaid beneficiaries. Alongside these partners, we are creating local solutions to improve access and quality of care while addressing core health needs and inequities across populations. We utilize our enterprise strengths to create a more seamless and integrated member experience for people with the most complex health care needs. As states resume Medicaid eligibility redeterminations, we are engaging with affected individuals to help them navigate coverage disruptions and connect them to affordable coverage options.

**>\$1.1T**

Projected U.S. Medicaid spending  
by 2030

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**~40%**

U.S. Medicaid spend not currently  
in managed care

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**>12%**

UnitedHealthcare Community & State  
revenue CAGR from 2016 to 2023

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**~8.1M**

People served by UnitedHealthcare  
Community & State Medicaid  
and Dual Special Needs Plans

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**32**

States and the District of Columbia  
served by UnitedHealthcare  
Community & State

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**>100**

Specific state programs served by  
UnitedHealthcare

### Caring for individuals with complex conditions

Individuals with complex conditions benefit from our customized, high-touch models that integrate medical, behavioral, pharmacy and social care management based on a comprehensive view of each person's needs.

Optum at Home serves our most complex members enrolled in Dual Special Needs Plans with holistic home care based on individualized care plans. We help reduce hospitalizations by 12% and improve patient and caregiver satisfaction, while lowering total cost of care.

We also coordinate providers and community partners delivering personalized, value-based care that empowers our members to live independently. We assess and test the feasibility of caregiver support to reduce caregiver burdens and improve outcomes for people. In partnership with our in-home care delivery partners, we have activated a 24/7 member support model that has led to a reduction of inpatient admissions and adverse health events.

### Addressing social drivers of health

Approximately 80% of a person's health is driven by social, behavioral and environmental factors like their education, income and ethnicity. To address the social drivers of health, we partner with members, care providers and local communities to:

- Screen members for social needs to better understand their barriers to better health.
- Connect people to our programs and vital community resources.
- Analyze the pattern of needs, as well as our ability to address those needs at a population level by geography, race/ethnicity and clinical condition.
- Expand communities' capacities to foster health and promote health equity.

UnitedHealthcare has built an industry-leading approach to identify and address health-related social needs, supported by a sophisticated data strategy. We blend health and social data with input from community partners to identify health disparities and co-develop specific health interventions, actions and measured outcomes. Data is applied to improve the way we serve people with unmet social needs and inform our community impact strategy. In 2023, we are on track to screen more than 5.5 million people for social needs.

# 860K

**people we referred to support services in 2023**

We meet people's social needs by helping enroll them in benefits for which they are eligible, connect them to internal programming and refer them to local, community-based organizations. We continue to develop and expand a variety of services and partnerships that provide access to healthy meals, transportation to doctor visits, digital technology (inclusive of cell phones and tablets), digital literacy strategies to improve technology adoption, social isolation solutions, workforce development opportunities and affordable housing, among others.

Food and housing insecurity remain key issues for the people we serve. We have referred more than 245,000 people to community resources who identified food as a need. Our support can come from government food programs or through connections to community-based organizations, food deliveries or local food banks. To help combat housing insecurity and homelessness, we focus on personalized housing navigation services; community capacity housing investments; and collaboration across medical and behavioral providers, housing partners and community-based organizations to integrate health and social services systems.

Acknowledging the critical role the community plays in individual health, we work with diverse sector partners to expand the capacity of communities to address gaps in services that contribute to health inequities.