

OVERVIEW

Helping people live healthier lives and helping make the health system work better for everyone



UNITEDHEALTH GROUP

About UnitedHealth Group

UnitedHealth Group helps drive positive change in health care in the United States and worldwide, with an unmatched combination of health care benefits and health care services capabilities. Our mission:

Helping People Live Healthier Lives and Helping Make the Health System Work Better for Everyone

The breadth and scope of our diversified enterprise help consistently improve health care quality, access and affordability. Our ability to analyze complex data and apply deep health care expertise and insights allows us to serve care providers, individuals, vulnerable populations, businesses, communities, and governments with more innovative products and complete, end-to-end offerings for many of the biggest challenges facing health care today. In total, no other health care company is able to offer what we can.

Every day, the men and women of UnitedHealth Group come to work ready to help improve health outcomes for those we serve and build healthier communities in the United States and around the globe. We believe that when nearly 260,000 people are dedicated to improving the health of 134 million individuals worldwide, everything is possible.

UnitedHealth Group Fast Facts



UnitedHealthcare and Optum serve people residing in **all 50 states in the United States** and **more than 125 other countries**.



\$3.2B UnitedHealth Group invests **nearly \$3.2 billion annually** in technology and innovation.



30K

UnitedHealth Group has **30,000 physicians and nurses** on staff, focused on delivering care, coordinating care, researching care – helping people live healthier lives.

- No.1 company in the insurance and managed care sector on *Fortune's* 2016 "**World's Most Admired Companies**" list for the sixth straight year. Ranked No.1 in its sector for innovation for the seventh consecutive year.
- Ranked No.6 on the 2016 *Fortune* **500** list of the largest U.S. corporations based on 2015 revenues.
- Ranked No.17 in *Fortune's* 2016 *Global 500* list of the world's largest corporations based on 2015 revenues.
- Member of the **Dow Jones Industrial Average**, a blue chip group of 30 companies deemed industry leaders.
- Listed in the **Dow Jones Sustainability World Index** and **Dow Jones North America Index** annually since 1999.
- Received **Best Marketing Sustainability** award for "Say No to Childhood Obesity," Amil's initiative to change the lives of thousands of Brazilian children.

A Distinctively Diversified Enterprise

HEALTH BENEFITS



- Provides broad access to high-quality, cost-effective health care locally.
- Offers health benefit programs for individuals, employers, Medicare and Medicaid beneficiaries and the military.

HEALTH SERVICES



- A leading information and technology-enabled health services business.
- Delivers integrated, intelligent solutions that work to modernize the health system and improve overall population health.

FOUNDATIONAL COMPETENCIES

Clinical Insight

Deep practical know-how in clinical care management, coordination and delivery, integrated with skills in consumer engagement and connectivity.

Technology

Enables a variety of interactions at enormous scale and complexity, helping connect all participants in health care.

Data & Information

The capacity to translate massive stores of data into intelligent insights and action at the point where critical decisions on health care are made.

Our United Culture

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

Integrity

Honor commitments. Never compromise ethics.

Compassion

Walk in the shoes of people we serve and those with whom we work.

Relationships

Build trust through collaboration.

Innovation

Invent the future and learn from the past.

Performance

Demonstrate excellence in everything we do.

About UnitedHealthcare

UnitedHealthcare is dedicated to helping people live healthier lives. The company offers the full spectrum of health benefit programs through market-facing businesses that serve individuals and employers worldwide, Medicare beneficiaries and retirees, state Medicaid and community programs, and military service members, retirees and their families.

4 Distinctive Capabilities

UnitedHealthcare delivers value to customers and consumers by aligning and integrating four distinctive capabilities to strengthen the most important relationships in health care:

Modern Benefits

Our consumer-centric products, responsive to local needs, reward personal engagement and wellness.

Consumer Empowerment

Versatile tools and personalized, transparent information help consumers actively manage their health.

Clinical Engagement

Our clinical models close gaps in care, supported by integrated data to inform decision-making and improve outcomes and quality.

Delivery System Modernization

Our suite of value-based incentives and our accountable care platform support clinical integration, help improve quality, lower costs and deliver a better health care experience.

Transforming Health Care With Value-Based Relationships

UnitedHealthcare supports value-based care programs to improve patient health and reward care providers for higher quality and better outcomes



15M

people access care from providers in value-based arrangements across commercial, Medicare and Medicaid plans

>800

value-based care arrangements in place with care providers



Results show up to 12% lower medical costs among top-performing care providers in UnitedHealthcare's value-based programs

The people we serve through value-based care programs with our partners in accountable care organizations (ACO) are receiving higher quality health care.

Commercial

11% higher breast cancer screening compliance

9% decrease in ER escalations to inpatient admissions

Medicare

67% better performance against quality metrics

12% fewer ER visits among mature Medicare ACOs

Medicaid

5% higher rate of well child visits in first 15 months of life

16% lower freestanding lab usage

The Shift to Value-Based Care

By the end of 2018, UnitedHealthcare expects total payments to physicians and hospitals tied to value-based arrangements to reach \$65 billion.

\$65B
2018

\$28B
2013

Advancing the Consumer Movement in Health Care

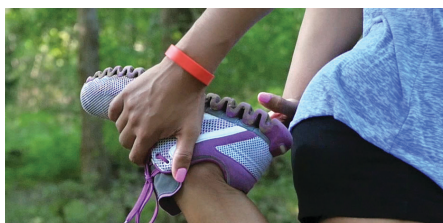
UnitedHealthcare is positively impacting consumers' overall quality of life with tools to engage them in their health and well-being.



Advocate4Me

Customer care that provides people with a single point of contact to address various health needs. Participants are more engaged in their health, more effective in health care decision-making and more satisfied.

- 200,000 appointments scheduled annually
- 95% customer satisfaction rate



Rally

Health and wellness portal that combines technology, gaming and social media to motivate and empower people to take ownership of their health.

- Accessible to nearly 29 million people, with steady advances in daily active use
- Increased engagement in selecting primary care physicians
- Better use of urgent care over emergency care
- Higher adoption of personal health and condition management programs



Real Appeal

Personalized, interactive, online program to help manage weight and reduce the onset of diabetes.

- 38% of participants achieve a meaningful reduction of 5% or more of their body weight
- Average weight loss of 10 pounds per person
- 5% weight loss reduces the conversion to diabetes by nearly 60%, based on NIH studies

Improving Quality of Care for Seniors: HouseCalls

In-home clinical visits for seniors in Medicare Advantage combine sophisticated technology and targeted health education to engage people and identify and close gaps in care.

>1 million
HouseCalls
completed
annually



Patient
Satisfaction

Results of a RAND study, "HouseCalls Impact on Health Care Utilization," published in the Dec. 2015 *Health Affairs*:

- 6%** decrease in hospital admissions*
- 3%** increase in physician office visits*
- 35%** decrease in risk of long-term care stays
(0.28% vs. 0.43%)*

*Results are for community Medicare Advantage Plans' (MAP) (i.e., non-Chronic Special Needs Plans) participation in the HouseCalls program, in comparison to nonparticipating MAPs.

About Optum

Optum is a leading information and technology-enabled health services business dedicated to modernizing the system and improving the health of people and communities. Optum builds innovative partnerships, provides technology and tools that enable unprecedented collaboration and efficiency and taps into valuable health care data to uncover insights that lead to better care at lower cost. Optum is comprised of three core business segments:

OptumHealth

A leader in population health management and collaborative care delivery, serving the physical, mental and financial needs of individuals and organizations.

OptumInsight

One of the largest providers of health information, technology, services and consulting to participants in the health care industry.

OptumRx

A leading pharmacy care services company serving commercial, Medicare, Medicaid and other government health plans, employers and unions.

Connecting and Serving the Whole Health System

To make the health system work better for everyone, all participants must be more integrated in their actions, connected to reliable, consistent information and aligned around clear incentives for better outcomes. Optum has the privilege of supporting:



Those who need care.

The participant with the greatest stake in a better-performing health system is a more engaged, empowered consumer. Optum serves individuals with the right support, information, resources and products to achieve their health goals.



Those who provide care.

Optum works with more than 67,000 pharmacies, four out of five U.S. hospitals and more than 100,000 physicians, practices and other health care facilities to support the best possible patient care and experiences.



Those who pay for care.

Optum serves four out of five of the *Fortune 100*, approximately 300 health plans and government agencies across 35 states and the District of Columbia, ensuring the populations they sponsor receive high-quality care delivered efficiently.



Those who innovate for care.

Optum collaborates with global life sciences organizations dedicated to developing more effective approaches, technology and medicines that improve health outcomes.

Powering Modern Health Care to Create a Healthier World

Optum capabilities are modernizing infrastructure, advancing care and empowering consumers.

OptumRx

Delivering market differentiation through a medical Synchronization model that lowers total health care costs by improving medication adherence, reducing gaps in care and delivering better health outcomes.



Per member per month medical cost savings on average through synchronized approach.

Optum360

A leading provider of strategic revenue management services and technology, streamlining the administration of health care and improving productivity.

- Named No. 1 in the Black Book Rankings for revenue cycle management software and outsourcing services.
- Received Category Leader award from KLAS for computer-assisted coding.



OptumLabs

The health care industry's first open, collaborative big-data research and development center. A growing base of nearly 30 major research partners such as the Mayo Clinic, AARP, Boston Scientific, Pfizer and Harvard Medical School are leveraging OptumLabs' clinical insight, health information and research expertise to drive innovation that benefits care providers and patients.



- Projects in the current research pipeline include:
- Establishing new personalized heart failure pathways
 - Redefining community health with vital signs measures
 - Predicting Alzheimer's disease 10 years earlier

OptumCare

A physician-centric, integrated care delivery business serving 8.5 million patients through 80 payer relationships.

OptumCare's multi-payer model ensures broad access to care:

- 90% of members in four-star plans in 2017
- National recognition for performance in accountable care initiatives, including Monarch in Southern California and ProHealth in New York.

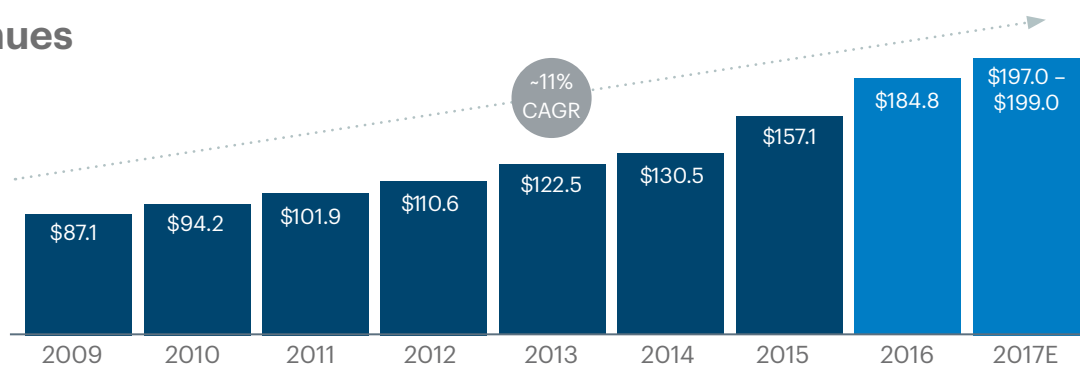


OptumCare's MedExpress operates nearly 200 neighborhood care centers, providing high-quality, affordable, walk-in urgent care and a variety of other medical services.

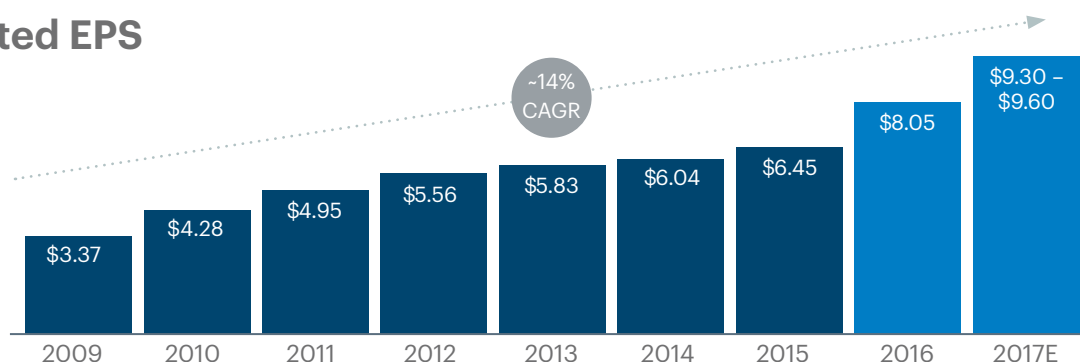
- Urgent care visit averages only 10% of the cost of an ER visit
- Net Promoter Score of ~70

UnitedHealth Group Performance Highlights

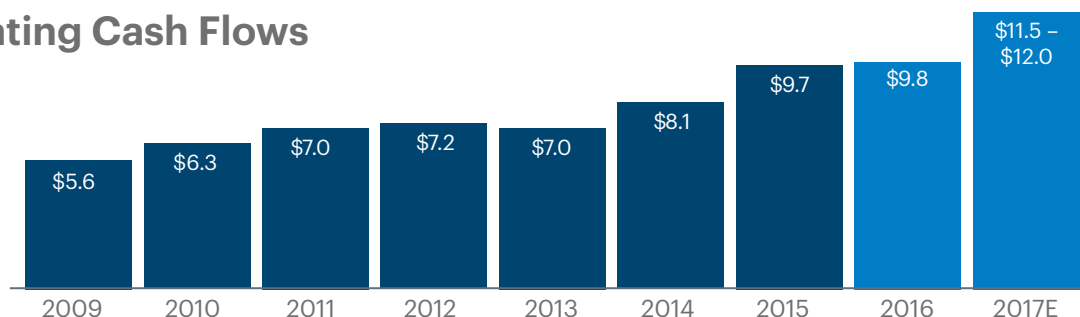
Revenues



Adjusted EPS



Operating Cash Flows



\$ in billions, except Adjusted EPS.

Adjusted EPS adds back intangible amortization expense, net of tax, to GAAP EPS.

Projections as of UnitedHealth Group earnings release dated Jan. 17, 2017.

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The projections, estimates, guidance and other statements in these materials contain forward-looking statements and we caution that actual results could differ materially from those in the forward-looking statements due to the performance of the company and the factors, risks and uncertainties described in our current and periodic filings with the SEC that can be accessed through the Investor pages of our company website.

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