



First Quarter 2017

First Quarter 2017 Company Information

About the Business

UnitedHealthcare Community & State is a health benefits company dedicated to providing diversified solutions to states that care for the economically disadvantaged, the medically underserved and those without benefit of employer-funded health care coverage.

UnitedHealthcare Community & State participates in programs in 25 states plus Washington D.C. serving over six million beneficiaries of acute and long-term care Medicaid plans, the Children's Health Insurance Program (CHIP), Special Needs Plans and other federal and state health care programs. UnitedHealthcare Community & State's health plans and care programs are uniquely designed to address the complex needs of the populations they serve, including the chronically ill, those with disabilities and people with higher risk medical, behavioral and social conditions.

Community & State is one of four businesses of UnitedHealthcare, the health benefits company of UnitedHealth Group. Community & State's approach leverages the national capabilities of UnitedHealth Group and delivers them at the local market level to support effective care management, strong regulatory partnerships, greater administrative efficiency, improved clinical outcomes and the ability to adapt to a changing market environment.

UnitedHealthcare Community & State believes that compassion and respect are essential components of a successful health care company. We contract with community-based networks and employ a diverse workforce with varied backgrounds and extensive practical experience that gives us a better understanding of our members and their needs.

Our detailed knowledge of our members and our service areas, the application of cutting-edge technology and the commitment of our employees have made UnitedHealthcare Community & State the leading choice for quality public sector health care.

(Continued>>>)



UnitedHealthcare Community & State is dedicated to providing diversified solutions to states that care for the economically disadvantaged, the medically underserved and those without benefit of employer-funded health care coverage.

Our Values

We serve people through a value and performance culture based on:

Integrity - We will honor commitments. We will never compromise ethics. We will be known for living to the highest forms and standards of ethical behavior. We will make honest commitments and consistently honor those commitments.

Compassion - We will walk in the shoes of people we serve and those with whom we work. We celebrate our role in serving people and society in an area so vitally human as their health. We must be truly compassionate and genuinely understand, feel and identify with their needs.

Relationships - We will build trust through collaboration in order to take action and find solutions. We understand that relationships are critical to help people work together, even when their interests are not fully aligned or fulfilled. We realize relationships bind people and organizations through trust. Trust is earned and preserved through truthfulness, integrity, active engagement and collaboration with our colleagues and clients.

Innovation - We will learn from experiences of the past and use those insights to invent a better future to make the health care environment work and serve everyone more fairly, productively and consistently.

Performance - We are committed to delivering and demonstrating excellence in everything we do.

Markets

Community & State currently serves its beneficiaries through participating in full risk program offerings in 25 states plus Washington D.C.

Arizona	Iowa	Nebraska	Rhode Island
Colorado	Kansas	Nevada	Tennessee
Delaware	Louisiana	New Jersey	Texas
District of Columbia	Maryland	New Mexico	Washington
Florida	Massachusetts	New York	Wisconsin
Georgia	Michigan	Ohio	
Hawaii	Mississippi	Pennsylvania	

Quality

The National Committee for Quality Assurance (NCQA) releases ratings annually for Medicaid, Medicare and Commercial health plans that measure specific treatments, preventive care services and consumer satisfaction. Health plans voluntarily choose to participate in NCQA's yearly ratings and publicly share their data, underscoring a strong commitment to transparency and open dialogue about health plan performance and improvement. Plans are rated from 0 to 5 stars in half point increments. For 2016-2017, 86 percent of our Medicaid membership is in plans that received three or more stars in the NCQA Health Insurance Plan Ratings. Our top rated Medicaid plan is Rhode Island at 4.5 stars, while Michigan, Nebraska and New York are rated at 4 stars.

(Continued>>>)

UnitedHealthcare Community & State's health plans and care programs are uniquely designed to address the complex needs of the populations they serve, including the chronically ill, those with disabilities and people with high-risk medical, behavioral and social conditions.

We are driving quality improvement through innovative programs that help engage and empower people to become more active participants in their own health, and by collaborating with physicians and other health care professionals to close gaps in care. We leverage best-in class technology to support effective management of internal and external teams. Additionally, we offer custom programs at the regional and local level, recognizing the unique needs of members in specific markets.

For example, our Whole Person Care Model provides integrated physical, behavioral and social services, coordinating care across multi-disciplinary teams to achieve better care, better long-term health and lower costs. Engagement programs like Baby Blocks support expectant mothers and new parents with customized wellness tips, information about what to expect at provider visits, and rewards for completing appointments during a newborn's first 15 months. Outreach initiatives such as 4-H Food Smart Families are helping families make healthy habits a greater part of their everyday lives. Through these and other quality improvements and investments, we are continuing to make the health care experience more personal, accessible and affordable.

Services

UnitedHealthcare Community & State offers government agencies tools to help them administer their health care delivery systems, including clinical care management and consulting, disease and conditions management and administrative and technological services.

Products

We manage health care benefits for beneficiaries of more than 70 different health care programs, including Medicaid, CHIP and various programs for the uninsured. The primary categories of eligibility and our participation are:

- **Temporary Assistance to Needy Families (TANF)** - Provided to 23 markets to serve primarily young women and children, programs for families and children focused on high-prevalence and chronic illnesses.
- **Children's Health Insurance Programs (CHIP)** - Provided to 22 markets for children not covered by commercial insurance and not eligible for Medicaid.
- **Aged, Blind and Disabled (ABD)** - Medical assistance programs for individuals who are age 65 years or older, blind or disabled. Provided in 19 markets.
- **Special Needs Plans (SNP)** - Services for those with multiple chronic conditions, limited incomes and living in nursing facilities. Dual SNPs are individuals enrolled in both Medicare and Medicaid. Medicare DSNP is provided in 20 markets, while Fully Integrated SNP (FIDESNP) is provided in 3 (Arizona, New Jersey, and Massachusetts) markets.
- **Long-Term Care (LTC)** - Provided in 13 markets, Medicaid programs for the long-term care population including nursing home costs and other long-term care programs.
- **Medicaid Medicare Program (MMP)** - Program provided in 2 markets (Ohio and Texas) for individuals who are enrolled in both Medicaid and Medicare.
- **Childless Adults & Programs for the Uninsured** - Program developed by the state for adults and families not covered by commercial insurance and not eligible for Medicaid or Medicare. Provided in 2 markets (New York and Wisconsin).

(Continued>>>)

- **Management Services Organization (MSO)** - Disease management and other health care services for individuals with chronic conditions provided to the California market.
- **Administrative Services Organization (ASO)** - Coordination of services for high-risk populations provided to the Colorado market. ASOs help states manage costs, but do not assume medical and financial risk for the covered population.

Organization

Chief Executive Officer: Austin Pittman

Headquarters: Minnetonka, Minnesota

Locations: 86 locations across the country (including retail sites)

Employees: 10,678**

Members: 6.2 million members*, including 2.9 million children*

Network: 3,632 hospitals and 648,726 providers*

Website: www.uhccommunityplan.com

Company Contact

Steve Cragle

952-931-4450

cs_communications@uhc.com

Company Snapshot

UnitedHealthcare Community & State provides innovative Medicaid managed-care solutions to states that care for the economically disadvantaged, the medically underserved and those without the benefit of employer-funded health care coverage, in exchange for a monthly premium per member. UnitedHealth Group (NYSE: UNH) is a diversified health and well-being company dedicated to helping people live healthier lives and making the health system work better for everyone. UnitedHealth Group offers a broad spectrum of products and services through two distinct platforms: UnitedHealthcare, which provides health care coverage and benefits services; and Optum, which provides information and technology-enabled health services. For more information, visit UnitedHealth Group at www.unitedhealthgroup.com or follow @UnitedHealthGrp on Twitter.

* = Approximate

** = Includes C&S Employees, C&S Operations Employees, and C&S IT Employees

