

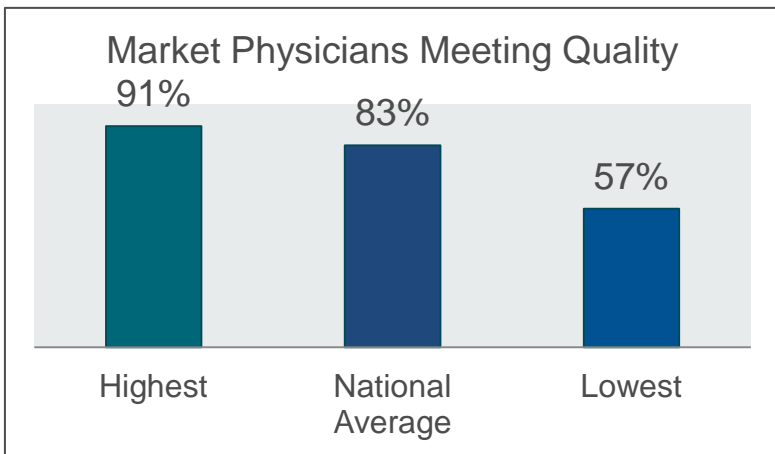
UnitedHealth Premium Quality of Care and Outcomes



Quality measured first.

Assessed using national standardized measures from organizations such as the National Quality Forum (NQF) and the National Committee for Quality Assurance (NCQA).

Preventive care	Cancer screening and other indicated screening interventions.
Evidence-based care	Follows evidence-based guidelines for use of medications and diagnostic tests.
Chronic disease care	Monitoring for control, progression and complications.
Patient safety	Avoiding duplicate testing or adverse drug interactions.
Sequencing of care	Diagnostic tests and procedures, treatment and monitoring.
Effectiveness of procedures	Lack of failed therapy and complications.



- ### Highest Quality Markets
- (Over 90% of Eligible Physicians)
- Fairfield County, Connecticut
 - Greater Milwaukee, Wisconsin
 - Northeast Wisconsin
 - Northern Illinois
 - Raleigh/Triangle, North Carolina
 - Rhode Island

CARE VARIATION

Global Cesarean

Premium Care Physicians
with global cesarean
delivery procedure
episodes had:

16%

lower average complication
rates than others who are not
Premium care.

Quality Measure Type and Source Examples

- **Preventive Care:** National Committee for Quality Assurance (NCQA) endorsed preventive measures for chlamydia screening.
- **Evidence-Based Care:** NCQA endorsed measure regarding non-recommended cervical cancer screening in adolescents.
- **Chronic Disease Care:** Pharmacy Quality Alliance endorsed measures for medication prescribing and adherence for diabetics.
- **Patient Safety:** Expert panel measures assessing whether or not a patient had a complication such as hemorrhage, pneumonia, and/or wound infection post hysterectomy or C-section.
- **Sequencing of Care:** NCQA endorsed measures for prenatal and post-partum care.
- **Effectiveness of Procedures:** Expert panel endorsed measure regarding major restudies post excision of ovary or ovarian duct.

2018 UnitedHealthcare Network (Par) Commercial Claims analysis for 16 specialties and 169 markets. Rates are based on historical information and are not a guarantee of future outcomes. Average savings per patient/episode based only on claims for conditions and procedures directly used in the determination of physician designations.

UnitedHealth Premium Quality Results and Outcomes - Cardiology



CARE VARIATION

Stents

Premium Care Physicians
with cardiology stent
procedure episodes had:

10%

lower average
complication
rates.

17%

fewer average
redo
procedures.

Quality Measure Type and Source Examples

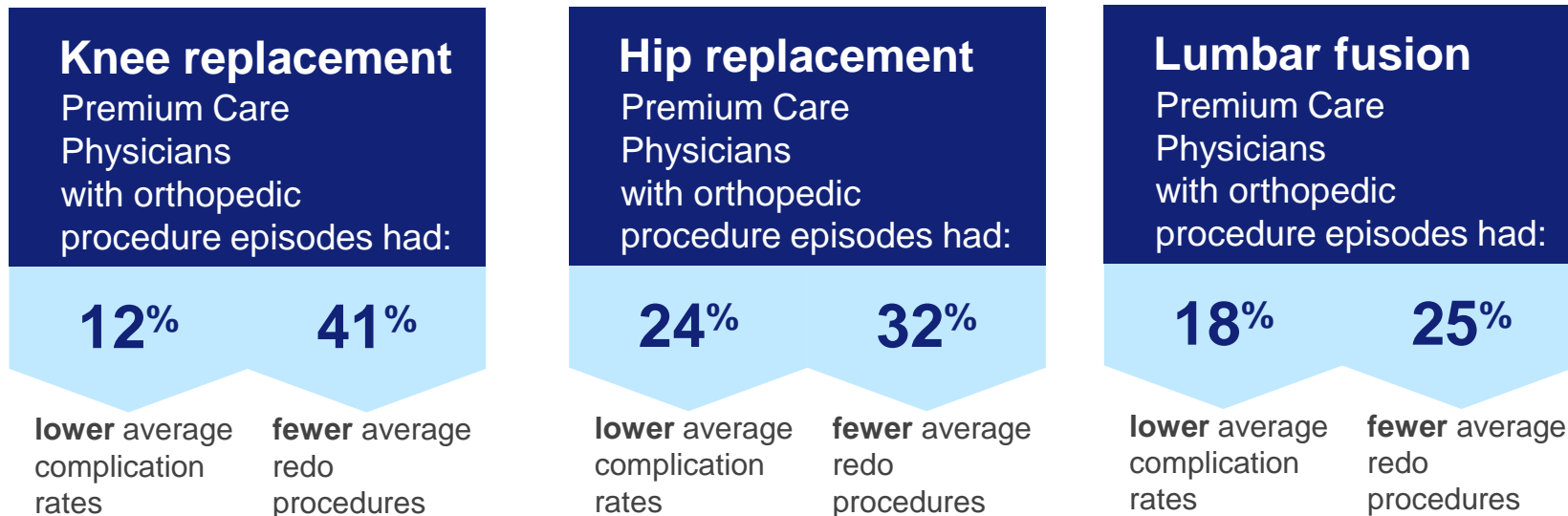
- **Chronic disease care:** NCQA endorsed measure regarding statin therapy for patients with cardiovascular disease.
- **Patient Safety:** NQF endorsed medication safety monitoring measures to ensure that patients are not taking medications that are contraindicated by another condition, such as elderly patients with chronic kidney disease avoiding NSAIDs.
- **Sequencing of Care:** NQF endorsed measure for beta-blocker usage to ensure patients are on a beta-blocker for 6 months after a hospitalization for acute myocardial infarction.
- **Effectiveness of Procedures:** Expert panel measure measuring whether patients had a redo procedure following coronary artery catheterization with drug stent.

Savings estimates based on 2018 UnitedHealthcare Network (Par) Commercial Claims analysis for 16 specialties and 169 markets. Figures are based on book-of-business results and represent the national average expected cost differential between Premium Care Physicians and non-Premium Care Physicians for entire episodes of care. Actual savings achieved will vary by customer depending on geographic availability and customer-specific service mix. All figures and estimated savings represent historical performance and are not a guarantee of future savings.

UnitedHealth Premium Quality Results and Outcomes - Orthopedics



CARE VARIATION



Quality Measure Type and Source Examples

- **Sequencing of Care:** Expert panel endorsed measure for knee replacement includes measure to determine if the procedure was performed within 30 days of the initial diagnosis (to avoid rush to surgery), as well as physical therapy post-surgery.
- **Effectiveness of Procedures:** Expert panel endorsed measures for decompression of a herniated disk include measures for appropriate timing of pre-surgical imaging, physical therapy as well as whether or not the patient had a redo procedure or post-surgical complications (hemorrhage, pneumonia, mechanical, wound infection, pulmonary embolism, or iatrogenic complications).

Savings estimates based on 2018 UnitedHealthcare Network (Par) Commercial Claims analysis for 16 specialties and 169 markets. Figures are based on book-of-business results and represent the national average expected cost differential between Premium Care Physicians and non-Premium Care Physicians for entire episodes of care. Actual savings achieved will vary by customer depending on geographic availability and customer-specific service mix. All figures and estimated savings represent historical performance and are not a guarantee of future savings.