

UnitedHealthcare Community & State

UnitedHealthcare Community & State offers diversified health care benefit products and services that provide care for the economically disadvantaged, the medically underserved and those without access to employer-funded health care coverage.

Approximately 40% of the total Medicaid spend nationally is currently not in a managed care program, offering a strong growth opportunity to deliver better care and outcomes to those served by Medicaid.

Growth opportunities include an active Medicaid pipeline of both reprocurements and new business – including the move of higher-acuity populations into managed care.

We participate in:

Temporary Assistance to Needy Families (TANF). Primarily provided to women, children and families with a high prevalence of chronic illnesses.

Children’s Health Insurance Program (CHIP). Provided to children not covered by commercial insurance and in families with incomes too high to qualify for Medicaid.

Aged, Blind and Disabled (ABD). Medical assistance programs for individuals who are age 65 or older, blind or disabled.

Long-Term Services and Supports (LTSS). Medicaid programs for the long-term care population, including home- and community-based services to support living outside a nursing facility.

Medicaid Expansion. Participating in Medicaid expansion under the Affordable Care Act (ACA).

Medicare and Medicaid Plans (MMP). Provided for individuals who are enrolled in both Medicaid and Medicare.

Dual Special Needs Plans (DSNP). Services for individuals who often have multiple chronic conditions and limited incomes and are eligible for Medicare and Medicaid.

Individuals with Intellectual/Developmental Disabilities (I/DD). Provided to individuals with limitations in intellectual functioning and adaptive behavior to cover many everyday social and practical skills.

Fast facts

~\$880B

Projected U.S. Medicaid spending in 2025

~40%

U.S. Medicaid spend not currently in managed care

>11%

UnitedHealthcare Community & State revenue CAGR from 2016 to 2022

>8M

People served by Medicaid and Dual Special Needs Plans

32

States and the District of Columbia served by Community & State

>100

Specific state programs served by UnitedHealthcare

Highlights

Caring for individuals with complex conditions

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

Optum at Home serves our DSNP members with holistic in-home care, with a team of clinicians and care team members who support our most complex members based on individualized care plans. Improving access to care and coordinating patient care across providers and care settings helps us achieve better health outcomes and lower costs, and improves patient satisfaction.

Addressing social determinants of health

Medical care accounts for an estimated 20% of the modifiable – or nongenetic – contributors to health outcomes. The remaining 80% are social conditions like education, employment, income, family and social support and community safety. We also know 65% of health care spending is driven by 10% of the population – patients who are high users of the health care system and who often have multiple chronic conditions, take multiple medications and often have unmet social needs.

To better support these social needs, 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.

We have a comprehensive approach to identifying and screening our members for social needs, referring them to appropriate social support resources and confirming they successfully received the services. In 2023, we expect to screen 1.7 million Medicaid members for social needs.

~\$800M
invested in affordable housing by UnitedHealth Group

~19K
new homes built for individuals and families in need

We are making affordable housing investments that focus exclusively on projects that integrate health or social services and we partner with organizations that track residents’ health and well-being over time. We recently committed \$200 million from our Health & Housing Fund, in partnership with leading community housing organizations, to help build affordable homes for families and seniors facing housing insecurity. We also committed more than \$2 million to launch or enhance social services on-site at the housing developments.

Additionally, we recently invested \$25 million in the Healthy Neighborhoods Equity Fund II in New England. The fund, launched by Conservation Law Foundation and Massachusetts Housing Investment Corporation, was created to finance inclusive mixed-use affordable housing developments near public transportation that offer retail, housing and social services to support the infrastructure of healthier communities more comprehensively.

Advancing health equity with community partners

We are focused on building healthier communities and addressing social factors that impact health, and enabling communities to reduce barriers to care and obtain the resources and support to advance health equity at the ground level.

Using a data-driven community-based model, we convene health care providers, public housing authorities and community-based organizations to positively impact community health needs.

Highlights

We screen members for health-related social needs and refer them to nutritional, financial and transportation service providers.

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. We have reached more than 1.6 million members in 28 states across the country with plans to progress toward realized outcomes and sustainable partnerships in the next 18 months.

We are proactively screening members for health-related social needs and referring them to service providers to address nutritional, financial and transportation needs. And in 2022, we introduced a new social health initiative in three cities that brings together community partners, private employers and other stakeholders to drive infrastructure and environmental improvements and investments that create long-term advancements in health equity in communities.

The impact of redeterminations

Medicaid enrollment has continued to increase due to the continued renewal of the COVID-19 Public Health Emergency (PHE) and the temporary suspension of redeterminations. While the exact end date of the PHE and resumption of redeterminations remains uncertain, we are committed to maintaining continuity of coverage for all Medicaid members – not just our own. We are focused on being the consumer-preferred company for all Medicaid members through efforts that support uninterrupted access to coverage when the PHE ends.

We plan to help members retain coverage within Community & State, while also using this as an opportunity to help UnitedHealthcare grow overall. We will accomplish this through ambitious outreach to members and by working with state partners and employers to transition individuals to other UnitedHealthcare lines of business, including individual and family and employer-sponsored plans.

These efforts reinforce our long-held belief that the existing portfolio of public and private options can provide universal coverage to all Americans and help sustain the current record-high number of people with health benefits coverage in the United States.

