

Advocate4Me®

Elevating the care journey with our most sophisticated level of support for your employees

United Healthcare



Advocacy that looks out for employees



Proactive Guidance

Our data and insights help us look ahead and guide members to the most optimal choices, helping them avoid unnecessary costs.

Program Features

- Dashboard with real-time analytics
- Personalized recommendations based on data, eligibility, and interactions
- · Proactive outbound messaging
- Active steerage at all interaction points
- Focus on high-need populations



Compassionate Service

Knowing that someone is looking out for members in every interaction, combining valuable support with empathy and a personal touch.

Program Features

- Compassionate advocates
- First-contact resolution
- Benefit navigation
- Social Drivers of Health (SDoH) connections for members in need
- 1:1 relationship for complex needs leveraging Family Engagement Center®



Simplified Experience

Members have the confidence we're looking out for them, because we can connect the dots across the health care ecosystem to streamline the benefits experience at every touchpoint.

Program Features

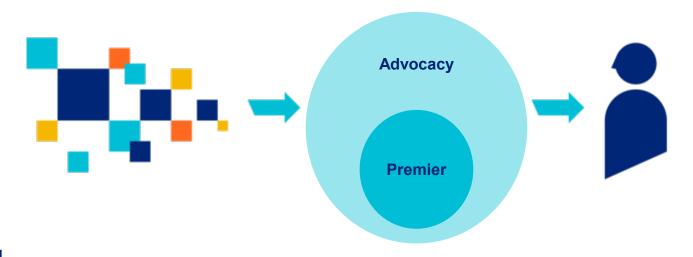
- Digital connection to benefit ecosystem including third party vendors
- Advocate view of member contact history
- Self-enroll in eligible clinical programs
- Integrated clinical management
- Consistent data views across audiences





As part of our Advocacy solutions, our Premier model elevates support to a new level for your employees.

Designed for better outcomes and lower costs, this service connects your employees with Advocates who help guide them throughout the health care journey to make informed decisions. Members get someone in their corner to provide insight and help make the right decisions.





Going above and beyond customer service

Premier Advocacy provides wholeperson, proactive guidance across a broad range of health care needs. Key features include:

- ✓ 1 program that integrates multiple service areas
- ✓ Data and insights to proactively identify solutions
- ✓ 1 collaborative team of experts to guide employees and their families



Premier Advocacy clinical engagement

Advocacy and clinical working together for better health choices and outcomes









Designated Lead Medical Director, Lead Operations Director and Clinical Affordability Director	Interdisciplinary rounds/Enhanced Care Management Model	Client-specific ID stratification with deeper/earlier triggers
Integration with Inpatient Care Management/Clinical Coverage Review	Provider to provider outreach	Review and monitoring of high-cost claimants
Employer population health analysis with focus on implementing strategies to mitigate spend	RN proactive member outreach for denied prior authorizations (based on select codes)	Multi-faceted ER Diversion Strategy
Predictive: optimizing real time data (incl. pre-adj claims, prior auth) and holistic value-driver monetization	Personal nurse in the family is at the core of the model	Digital engagement with connected nurse outreach and chat
100+ conditions seamlessly coordinated across solutions	Behavioral Health support and connection to resources	Connected to Pharmacy and other third- party solutions





Provider outreach at key points to optimize outcomes

Timely collaboration between providers and the Premier team may help to:









Employees

Employee* reaches out and predictive personalization helps Advocate better understand their personal and family history for greater insight into reason for contact.

Available platforms:

- Phone
- myuhc.com®
- Mobile app
- Click to chat
- * Refers to employees and their covered family members. Family-based discussions subject to appropriate authorization.
- ** With OptumRx carved in
- *** Includes gender affirming care support



Advocates

Employee routed to Advocate whose expertise is best aligned with employee need.

HealthAdvocate

Customer service and claims expertise plus enhanced financial advocacy and elevated issue resolution

Super Advocate

Real-time, simple and complex claims adjustments, proactive outreach, and gender identity family support

Nurse Advocate

Health education and decision support expert — licensed nurse (RN)



Specialists

Speak directly with employee or serve as a behind-the-scenes resource for the Advocate.

- Behavioral
- Pharmacists (when integrated with Optum Rx)
- Pharmacy claims**
- Program nurses
- Specialty needs***and more

Highly designated or dedicated Advocates and Super Advocates

Customized team, including a designated medical director, organized around you Continuous analysis, feedback and changes for your population

Phone and digital inquiries are addressed by highly designated or dedicated team





Highly trained, integrated team providing members with comprehensive, proactive, white-glove support



¹ 2019-2020 UHC employer study including 387 clients, 4.8M members and \$19.2B in medical spend. Analysis completed on a continuous medical enrollment basis. Medical costs risk adjusted for age and gender. Value impact based on comparing clients by the adoption platform features vs not (e.g. enhanced vs core advocacy). Actual client results may vary based on specific clinical programs the client has or maturity of implementation.

² 2023 Combined Enhanced Advocacy performance reporting for Program Acceptance Rate; ³ 2021 E&I Operations Performance Reporting, comparing enhanced advocacy members (Elite/Premier) to Advocate4Me members.



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Member experience

AI/Machine Learning Initiatives

We are leveraging the latest technology and advanced analytics to deliver a more personalized and proactive member experience, driving value and enabling better member engagement.

	Initiatives	Description
	Advocacy voice analytics suite	Multiple capabilities around voice analytics to drive enhanced insights around member sentiment and advocate performance, which will improve execution and enable us to know our members at a deeper level
	Advocate tools	 Predictive modeling to route members to the most appropriate level of advocate based on natural language and claim history Advocate Virtual Assistant simplifies member benefit search with updated deductible and accumulator information plus ability to send summary via SMS or email, specific to the member Enhanced advocate training module leveraging real time feedback based on real scenarios and interactions ChatBot tools to help provide relevant benefit information based on member needs, prevent issue escalations, improve advocate performance Real-time call summary for advocates to drive efficiency and improve documentation to support responses in the event of a follow-up or escalation (2nd half of 2024)
G	Personalization	Advocacy integration with smart offerings such as a reinforcement learning model to enable next-best action and enable member personalization
©	Out-of-network (OON) predictive model	Demographic and claims history are analyzed to estimate a member's propensity to utilize OON services for future non-emergencies that result in more targeted campaigns and encourages changes in member behavior
	Member digital tools	 24/7/365 Virtual Assistant for provider search, claims and Rx status, ID card and benefit details Enhanced Find Care sort with scoring concept using five key categories of quality, benefit, convenience, personal fit (gender, language preferences) and provider data quality (2nd half of 2024)



AI/Machine Learning Initiatives

Technology that helps improve Advocate performance and simplify the member experience

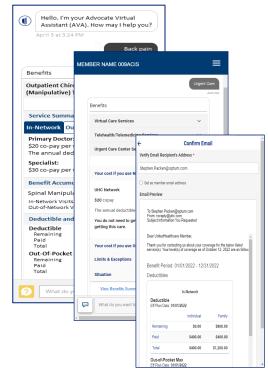
Al Coach for Advocates

Advocate Virtual
Assistant (AVA)

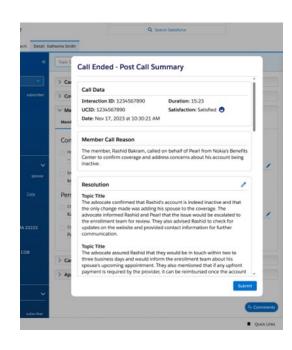
Digital Virtual Assistant

Real-Time Auto Call Documentation/Summary













Gender affirming care support

Individuals with gender affirming health care and benefit needs have access to skilled Advocates who help provide comprehensive support.

- Builds the relationship with the employee — no need to start over for each call
- Takes responsibility for each inquiry and will follow through to resolution
- Addresses the needs of the person, not just those related to gender affirming support
- Is hired, trained and assessed to provide compassionate, empathetic and effective support; specific empathy training provided

- Helps members find providers with expertise in gender affirming care
- Helps members understand prerequisites and coverage for gender confirmation surgery
- Provides communications based on member preference
- Connects members with behavioral health, financial and community support
- Expanded LGBTQIA+ support tools through pride365plus.com







Family Engagement Center

The Family Engagement Center (FEC) addresses the needs of special and complex members with one-on-one support from a Care Advisor.



Identified members are connected to an assigned Care Advisor who can:

- Help members navigate the health care system.
- Serve as a single point of contact for covered family members with direct extension and voicemail.
- Help make connections to clinical, behavioral health and SDOH resources, including enhanced support for members in a diagnostic odyssey or with a rare disease.

Referrals are accepted.

Support is available for:



Families of children with special needs

Complex claims/prior authorization support and connections to provider partnerships within pediatric care centers for children ages 0–17

222K

engaged members since 2017

same call issue resolution



Adults with complex needs

Support from a multi-disciplinary team for complex cases and escalations

95%

member satisfaction score

89%

86%

same call issue resolution



LGBTQIA+*

Provider search expertise and focus on benefit management for gender affirming care

3,000+

89%

engaged members since 2023

same call issue resolution

*1:1 support provided by Super-Advocate within our Premier Advocacy model.

Source: 2023 C3 and SNI Product Dashboard





Addressing social barriers to help improve health

Life factors affecting members can be just as important in determining their health as medical-specific issues. That's why Advocacy looks at the whole person, including **Social Drivers of Health (SDoH)** such as:

Access to food

Transportation

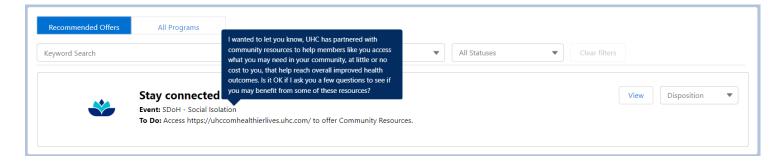
Housing

Financial stability

Advocates work to:

- Proactively identify member needs
- Refer members to helpful resources





Impact

+28_K

members accepted advocate's offer for help or clicked a digital offer

76% telephonic offer acceptance rate

Source: UHC internal operational data, full-year 2023



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Member journey: Road to approval



Kevin

- Male, 33 years old
- New dad with newborn, Lily, in neonatal intensive care unit (NICU)
- Lily needs approval of feeding tube before discharge



Kevin needs help expediting the approval of his newborn's feeding tube and reaches out to an Advocate 2

The Advocate confirms the authorization of the feeding tube was submitted as urgent, but there has been no approval

3

The Advocate confers with a Super Advocate who determines more action is needed

4

The Super Advocate contacts the Medical Director to express urgency for a decision 5

The Medical
Director reviews the
case and takes
action to get the
feeding tube
approved the
same day

6

The Medical
Director contacts
the Super Advocate
to notify them that
feeding tube has
been approved

7

The Super Advocate informs the Advocate of the approval

8

The Advocate follows up with Kevin to inform him of the approval and shares other resources; she provides her direct number in case he needs further assistance

Above example for illustrative purposes only. Individual results may vary.





Member journey: Addressing social issues for better health support

This is John's story as he experiences the support of an Advocate who proactively connects him to resources for help with food, utilities and financial insecurities.





Discuss: Address the initial inquiry and go deeper

- John calls with a claims question about out-of-pocket costs
- Advocate answers his question, then probes to see if he may need additional support

2

Identify: Determine if John could benefit from further assistance

- Advocate learns John has financial stress with food and utility costs
- Advocate lets John know there may be resources available
- Advocate administers screening questions

3

Educate: Inform John of resources and how to access them

- Based on John's responses, the Advocate informs him about available support
- Advocate tells him how to access this support, sending him resources via text
- Advocate offers to transfer John to one of the identified resources and asks if he would like a follow-up call

4

Follow up: Ensure John has all the support he needs

- At his request, John receives a follow-up phone call from the Advocate to see if he received help
- Advocate learns John has made connections with the community resources that were provided

Example is for illustrative purposes only to show how the Advocate4Me process is designed to work.





Member journey: Support for pain and stress



Michael

- 42-year-old investment consultant
- Sacramento, California
- Back problems and increased stress

1

Michael contacts an Advocate regarding back pain, stress and benefits questions 2

The Advocate assures Michael there are resources to help him 3

The Advocate reviews his benefits and locates a list of network providers and walks Michael through the health care cost estimator tool

4

After reviewing
Michael's
dashboard,
the Advocate
identifies additional
resources that
may help improve
his well-being,
including speaking
to a nurse

5

The Advocate connects
Michael with a registered nurse case manager

6

Michael and the nurse work together to determine questions to discuss with his doctor and set a plan to address his back problem and stress 7

The nurse identifies that Michael is ready to make some lifestyle changes; he starts using the digital platform and tools to stay on track by educating himself and checking in with the nurse

8

Michael improves his stress management, gets his back pain under control and now has the confidence that he is securely on the right path to maintaining a healthier life

Above example for illustrative purposes only. Individual results may vary.



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How it works for the member: CMO (MD) case review and intervention



17-year-old female. History includes:

- Migraine
- Chronic sinusitis

- Asthma
- Suspected diagnosis of bipolar disorder
- Abdominal pain
- Menstrual issues

 Multiple emergency room (ER) visits in last 12 months

1

The member's health journey is explored in Premier Advocacy's medical rounds due to her high frequency use of the ER. The Premier medical director will engage the member's primary care provider (PCP) to understand the member's needs.

2

Member's PCP is contacted, and the PCP confirms patient had recently suffered:

- Non-cyclical female bleeding
- Chronic ovarian cysts
- Chronic appendicitis
- H. pylori, which can cause intestinal ulcers

The Premier medical director evaluates member's case with the PCP and learns that untreated behavioral health (BH) issues might be a

factor in the

member's health.

PCP confirms that the member exhibits symptoms of bipolar disorder, but there is no formal diagnosis.

The PCP relates that the family is looking for support and needs help identifying and accessing the appropriate BH supports.

The Premier medical director connects with the Premier BH specialist team and asks the team to reach

out to the family.

The Premier BH specialist reaches out to family and connects to the member's mother. The specialist collects the member's BH history.

The specialist and the member's mother discuss the member's need to be evaluated for a diagnosis, so they can engage the

The specialist offers to find available appointments with a psychiatrist and psychologist for evaluation and treatment.

right supports.

The member's mother agrees and asks the specialist to text with the available appointments to her. The specialist locates multiple appointments and texts the member's mother.

The specialist also tells the member's mother they will call in a couple of days to make sure the family was able to schedule the appointments.

When the specialist calls 2 days later, the member's mother confirms that the member is scheduled

for follow up with

a psychologist

ER visits.

and psychiatrist.

Since connecting with the right providers, the member has not had further inappropriate

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