City and County of San Francisco

Care Management / Navigation / Advocacy August 8, 2019



City Plan





Personal Health Support 2.0

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Consumers make less-than-optimal health care decisions 53% of the time.¹ We engage members to help them proactively address their health and reduce health care costs.

¹ UnitedHealthcare Consumer Activation Index, 2017.



Helping identify early indicators of potential health risks.

Personal Health Support 2.0 is a proactive care management solution designed to increase employee health and drive down costs. By addressing 50+ conditions and providing outreach to 100% of members with gaps in care, we identify risks using data from:

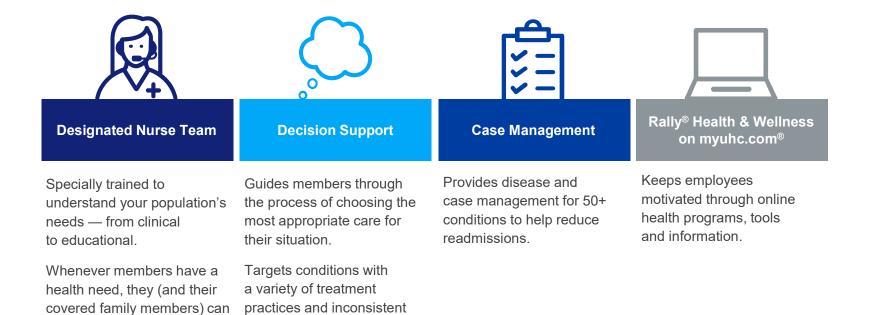
	Medical claims	
	Lab results	
	Pharmacy data	
îp	Biometric screenings	
4 :::	Health assessments	
Ĵ-o	Network utilization	
		5



speak with the same nurse.

outcomes.

Supporting members across the care continuum.





Providing continuous engagement to help produce behavior change.

HealtheNotes

Health messages sent to members and their providers that highlight gaps in care.

HealtheNote Reminders

Preventive care reminders sent to members.



Clinical Programs

- Maternity Programs
- Transplant Resource Services
- Congenital Heart Disease Resource Center

Comprehensive Solutions

Integration with other UnitedHealthcare clinical programs, network and behavioral health offerings.



Proactive care designed to help produce better results.

By screening 100% of members to identify avoidable health risks and costs, Personal Health Support 2.0 helps:







Decision Support

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Decision Support

Help empower employees to make informed decisions about their care and treatment options.



- Evidence-based, objective information.
- Proactive guidance.

Decision Support helps avoid unnecessary care, which may lead to significant savings for both you and your employees.



Clinical support tailored to each employee.

Decision Support is integrated across clinical touch points including:



Nurse Advocates.



NurseLine.



Condition management programs.

Our services help:







HealtheNotes and HealtheNote Reminders

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HealtheNotes and HealtheNote Reminders

HealtheNotes: Helping close important (and costly) gaps in care.

HealtheNotes cover **24 conditions** and are sent to members and their physicians to:

- Identify opportunities in 8 categories, including disease management, medication adherence, drug interactions and more.
- Provide outreach through personalized messages.
- Encourage members to close gaps themselves or talk with their doctor to create a plan.
- Report and measure gaps-in-care messaging.

HealtheNotes target **14–18% of the population,** compared to only 3–5% for traditional disease management programs.

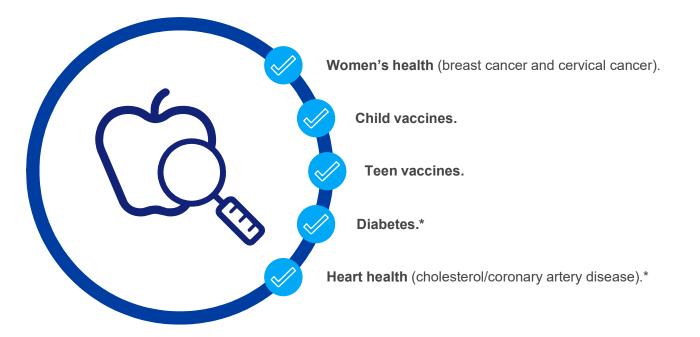




HealtheNotes and HealtheNote Reminders

HealtheNote Reminders: Helping identify preventive care opportunities.

HealtheNote Reminders are personalized messages sent to members who have been identified with gaps in one of five preventive care areas:



* To avoid duplication, diabetes and heart messaging will be covered by the HealtheNotes program when client has both HealtheNotes and HealtheNote Reminders.





Advocate4Me®

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Providing proactive, highly personalized support, 1 person at a time.

With Advocate4Me, each employee and their covered family members can connect simply with an expert empowered to:

- · Listen empathetically to understand.
- Draw on data-driven insights to anticipate needs.
- Find solutions that may surpass expectations.

Employees, and their family, may feel supported and more confident in their ability to make informed health decisions which may lead to improved outcomes and lower cost—and it is included in your UnitedHealthcare health plan.

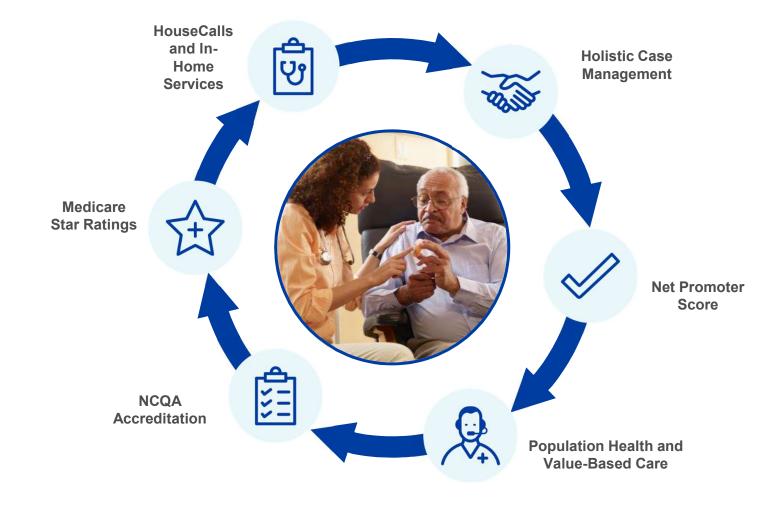


MAPD PPO

UnitedHealthcare Retiree Solutions



UnitedHealthcare Medicare Advantage



Helping retirees with value-added clinical programs and services



Stay healthy	Return to health	Live better with illness	End of life
Prevention and Wellness Programs	Utilization Management Programs	Group Retiree Care Management Programs	Specialty Programs
 HouseCalls Health Risk Assessment Preventive Care Reminders Member Rewards Program Diabetes Outreach Program for low- and moderate-risk diabetics Renew Online NurseLine (24/7) Fitness Benefit Solutions For Caregivers hi HealthInnovations Hearing Aid Discounts Virtual Visits 	 Clinical Intake: Inpatient/ Outpatient Services Post-Acute Transition Support Medication Therapy Management Behavioral Health 	 Transitional care management High-Risk Care Management for multi- morbidity conditions Heart Failure Management Program Diabetes Management Program for high-risk members Chronic kidney disease 	 Advanced Illness Case Management End Stage Renal Disease Transplant Resources and Care Management

We continuously monitor your retiree population for opportunities to engage your retirees in the right clinical programs to improve their health

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Wellness support



When & where the retiree wants it

