



A group health plan for you and your retirees



The UnitedHealthcare® Group Medicare Advantage (PPO) plan provides value and flexibility to help meet the needs of your organization and your retirees. The plan is customizable and designed to deliver the best possible experience to them and significant savings to you.

**United
Healthcare**

Designed for better results

You'll have access to smart, customized solutions so you can offer similar benefits at a lower cost.



National network

Access to Medicare Advantage's largest national provider network¹ in the industry along with a dedicated Group Medicare Advantage business model



Gap closure and accurate coding

Our decades of Medicare plan experience coupled with our innovative clinical management have helped lead to nearly 10.8M gaps in care closed²



America's most chosen Group Medicare Advantage plans

With plans designed for all styles, stages and ages of Medicare, more people count on UnitedHealthcare for their Group Medicare Advantage plans³

How the plan works

Our national Group Medicare Advantage PPO plan is popular thanks to its unique design, featuring:

- A truly national service area
- Same benefits in and out-of-network
- Access to any willing Medicare providers
- Customizable benefit design
- Simplified member experience

A better experience

Our concierge service helps give your retirees a greater level of ease and satisfaction with their health care. Plus, an integrated approach helps your retirees enjoy a simplified experience.

1 ID card

1 call center

1 Explanation of Benefits

1 set of member materials

Care by the numbers

1.8M+

Group Medicare Advantage members⁴

943K+

Medicare-participating providers⁵

2.5M

HouseCalls visits since 2014⁶

100%

of the UnitedHealthcare Group Medicare Advantage (PPO) members are in plans rated 4.5 Stars or higher since 2018⁷

95%

of members have a primary care provider⁸

976K

annual wellness visits completed⁹

658K

wellness rewards redeemed¹⁰

Personalized service

Advocate4Me[®] is a simplified way for consumers and their families to manage coverage, starting with proactive identification of gaps in care.

Take it further with **Navigate4Me**[™]—a program that provides a single point of contact to help members work their way through health issues, including coordinating care, support for claims, answering questions and more.

Our advocates take the time with each member to build a connection and help ensure first-call resolution to most issues.

Combining technology and human interaction allows our advocate resources to deliver better service to our members such as:

- Proactive identification of gaps in care
- Help scheduling appointments for HouseCalls, doctor visits and screenings
- Social advocacy connecting to local resources
- Up to 14 next-best action suggestions
- No limit on handle time
- Outbound provider inquiry calls
- Financial advocacy and local resources

A path to better health

Our comprehensive plans provide more opportunities for preventive wellness, delivering higher quality and better outcomes for patients.



Improved quality and engagement

Member retiree groups typically experience the following engagement and outcomes in year one of the plan:¹¹

- More breast cancer screenings
- More colon cancer screenings
- More flu vaccinations
- Fewer people unnecessarily readmitted to the hospital
- HouseCalls completed and incentive rewards received
- Annual care visits completed and incentive rewards received

Plus, diabetics can work 1-on-1 with a nurse or dietitian, and all retirees have the opportunity to receive support during a transition in care.

Committed to quality

Our programs and performance have helped us maintain our ratings so that 100% of our Group Medicare Advantage (PPO) members are in 4.5 Star plans in 2024.⁷ A Medicare plan's Star Rating is important because it demonstrates a plan's commitment to quality care and service for its members. A 4 or better Star Rating helps ensure your retirees have access to a health plan designed for better health outcomes and member satisfaction.

Improved value over traditional approaches

As the single primary plan, Group Medicare Advantage plans invest in more² clinical and wellness programs compared to traditional approaches, improving member health¹² and lowering overall costs.

	Traditional approach	Group Medicare Advantage PPO approach	
	\$\$\$ Original Medicare + Secondary plan cost	\$\$ Single plan cost: Year 1	\$ Single plan cost: Year 2 and beyond
Structure of plan	Medicare + Secondary	Single plan	Single plan
Clinical support		✓	↑
HouseCalls		✓	↑
Proactive closure of gaps in care		✓	↑
Rewards for health and wellness		✓	↑
Star program performance		✓	↑
		Typical savings +50%...	...with increased savings over time ¹²

[Learn more](#)

Contact your UnitedHealthcare representative for more information

**United
Healthcare**

¹ Provider network may vary in local market. Provider network size based on Zelis Network360, May 2023.

² UnitedHealth Group internal operations data, 2014 to present.

³ Most chosen based on total plan enrollment from CMS Enrollment Data, May 2023.

⁴ UnitedHealthcare internal membership data and Centers for Medicare and Medicaid Services Monthly Enrollment by Plan data; January 2023, cms.gov.

⁵ Network Data and Analytics Report (NDAR), 2023.

⁶ Optum HouseCalls Finance Report, 2014-2023.

⁷ Every year, Medicare evaluates plans based on a 5 Star rating system.

⁸ UnitedHealth Group, 2023 internal data.

⁹ UnitedHealth Group, 2022 internal data.

¹⁰ UnitedHealth Group, Renew Rewards internal data, 2021 to present.

¹¹ United Retiree Solutions BoB data and Centers for Medicare and Medicaid FFS Medicare 30 Day Readmission Rate PUF.

¹² Based on actual results from conversions to Group Medicare Advantage members using UnitedHealthcare and customer-provided current cost data.

Network size varies by plan and by market.

Benefits, features and/or devices vary by plan/area. Limitations, exclusions and/or network restrictions may apply.

Out-of-network/non-contracted providers are under no obligation to treat Plan members, except in emergency situations. Please call our Customer Service number or see your Evidence of Coverage for more information.

HouseCalls may not be available in all areas.

Reward offerings may vary by plan and are not available in all plans. Reward program Terms of Service apply. Rewards are earned for completing health-related activities.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or their affiliates. Not for distribution to retirees or beneficiaries.