



## Tap into our industry knowledge



### UMR's roots run deep

With a legacy spanning over **75 years**, UMR has established itself as one of the leading medical third-party administrators (TPA) in the country, thanks to our dedication to member service and our role as a trusted partner.

Serving more than **4,500 customers** and **7.4 million members**, UMR leverages expertise, best practices and enterprise resources to configure benefit plans based on an employers' needs. This ability to customize provides the option to build a plan using integrated solutions or by leveraging a customer's existing vendor relationships.

### Solutions to support any objective

- Medical administration
- Care management
- Pharmacy benefits administration
- Stop loss solutions
- Dental administration
- Network administration
- COBRA administration
- Consumer-driven health plans
- Specialty solutions
- Advocacy solutions
- Vendor interface
- Hybrid/unique service models



### Specialized market expertise

- Coalitions & captives
- Hospitals & health care system
- Labor trusts
- Native American tribal-sponsored
- Public sector

### UMR offers:



#### Flexibility

Unique plan designs and implementation process



#### Modularity

Carve-outs/non-integrated solutions



#### Customization

Custom delivery systems



#### Service

Service model emphasis



#### Niches

Target market segments



#### Pricing

Non-integrated price points

# Look to UMR

TPA expertise to support your most customized benefit plan requirements

- 1

**UnitedHealthcare networks & resources**

  - Largest national network
  - Premium designation program promotes selection of high-quality, cost-effective providers and services
  - Ability to wrap networks
- 2

**Industry-leading stop loss relationships**

  - Plan mirroring (mitigates gaps in coverage)
  - Acceptance of UMR medical director's determination
  - Preferred pricing and advanced funding available
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**Access to real-time reporting**

  - InfoPort, 24/7 access to plan data
  - Simplified plan performance analysis
  - Risk stratification population-management reporting powered by Verisk
- 4

**One team, your team service model**

  - Service team pays claims and answers calls
  - Designated team who knows your plan and culture
  - Complimentary 24/7 service
  - Dedicated claim and call service with over 90% first-call resolution
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**Integrated population health management**

  - Single platform for chronic and acute conditions, as well as member lifestyle
  - Nurses and health coaches can access all data (including pharmacy)
  - Specialized health products for hospitals based on their resources
- 6

**Simplified member experience**

  - Benefit information how, when and where members want it
  - Reliable resources via service teams and digital tools
  - Find care and get questions answered