

UNITEDHEALTH GROUP

Our Mission in Action

2022 Sustainability Report





Contents

Introduction

- 3 A message from our Chief Executive Officer (CEO)
- 4 A message from our Chief Sustainability Officer (CSO)
- 5 About UnitedHealth Group
- 7 Sustainability at UnitedHealth Group
- 11 2022 sustainability highlights
- 12 Our commitments

13 Building a modern, high-performing health system

- 16 Advancing health equity
- 18 Accelerating the transition to value-based care
- 20 Expanding in-home clinical care
- 23 Expanding access to care by lowering the cost of prescription drugs
- 25 Enhancing consumer-oriented benefits
- 27 Personalized care coordination when it matters most
- 29 Building healthier communities

34 Healthy environment

- 36 Charting our path to net-zero
- 41 Managing weather-related risks
- 42 Reducing waste, water and paper

44 Our people and culture

- 46 Advancing diversity, equity and inclusion
- 51 Employee health and well-being
- 56 Developing and growing our talent

59 Responsible business practices

- 61 Corporate governance
- 63 Data privacy and security
- 66 Responsible use of artificial intelligence and machine learning
- 67 Supply chain management
- 70 Supplier diversity
- 72 Public policy
- 74 Compliance and ethics

Appendices

- 79 Performance data
- 87 Sustainability Accounting Standards Board Index
- 90 About this report

A message from our CEO

UnitedHealth Group was founded on the simple premise that consumers deserved better options for their health care. As we've grown to serve the needs of more than 150 million people around the world, so has the scale of our mission: *To help people live healthier lives and help make the health system work better for everyone.*

Across Optum and UnitedHealthcare, we're working to fulfill that mission by integrating our deep clinical expertise with data and analytics capabilities to build health benefits, pharmacy, technology and financial services businesses that drive innovation in the system. Our comprehensive, value-based care delivery network – connecting primary, specialty and surgical care with behavioral and pharmacy services – now reaches more than 100 million people.

Yet as far as we've come, we recognize we have more to do. Consumers deserve even better. More choice. More simplicity. More value. Better outcomes. Lower costs. Greater value – for everyone.

We often say sustainability is core to our mission, to our culture and our strategy. In fact, in looking across each of our five growth priorities, it's inextricable from our long-term ambitions.

A systemwide transition to value-based care provides higher-quality outcomes for patients, more fulfilling experiences for physicians and lower costs throughout the system. Making health benefits simpler, more accessible and affordable includes expanding coverage to more people and looking after the unique social needs of our most vulnerable. Integrating pharmacy care with behavioral health improves outcomes for people with complex conditions. Advancements in health technology and financial services strengthen trust between care providers and payers, creating greater ease and convenience for consumers.

But that alone, is not enough. As you'll see throughout this report, we believe we have a greater leadership role to play.

We understand the linkage between a healthy society and a healthy planet. We are making real progress toward reducing our carbon footprint, identifying alternative energy sources and transitioning to net-zero. We are reimagining our processes to take as much paper as possible out of our system – helping to minimize resource consumption, while improving the consumer experience.

We know one of the first steps to creating a more equitable system is to help build a health workforce that not only understands, but reflects the people and communities it serves – a challenge we are addressing head on, both within and beyond our walls.

And we are doubling down on our most valuable resource – our people – by investing in new opportunities for training, skill-building and leadership development at every level of the company, providing new benefits, creating greater workplace flexibility and building a culture of inclusion where diversity is not only celebrated and embraced, but considered one of the greatest strengths of our company.

My colleagues – the people of UnitedHealth Group – are incredibly proud of the work reflected in this report. But we also know just how much more is still undone. We feel a profound responsibility to strive each day to make our health system work better for everyone.



Andrew Witty
Chief Executive Officer,
UnitedHealth Group

A message from our CSO

The mark of any sustainable company is progress – an unwavering focus on addressing society’s most complex challenges with a steadfast adherence to a core mission. As one of the world’s leading health care companies, we have a long history of operating with one objective: to help people live healthier lives and help make the health system work better for everyone.

A path to a healthier future

Our company has made significant progress to advance our sustainability priorities by continuing to deliver on our long-term commitments, supported by decades of strong and effective corporate governance.

We carried our momentum into 2023 by closing 141 million gaps in care and connecting 862,000 people to services to address social determinants of health. We provided in-home clinical assessments to more than 2.2 million people, a quarter of whom had a condition they didn’t know about.

We are building a workforce reflective of the diverse people and communities we serve. Women now represent 40% of top management positions at our company and 33% of our Board of Directors, and we remain dedicated to increasing racial and ethnic representation in our company’s leadership. Last year we saw an 81% membership increase in our Employee Resource Groups.

The U.S. health care sector accounts for 8.5% of national carbon emissions. By establishing a roadmap to decrease our scope 1, 2 and 3 emissions, we are charting a path to dramatically reduce our carbon footprint over the next several decades to positively impact human health.

Progress rooted in equity

Health equity remains one of the great challenges facing health care, and one of the most significant opportunities we have as a company.

We are addressing health disparities every day across our company. Community pharmacies are delivering better

outcomes for complex chronic conditions and behavioral health patients. A \$100 million investment is building a pipeline of diverse health care talent over the next decade, helping more people across the country access culturally competent care.

Our impact shows up in the daily interactions we have with real people – in the rural home of someone on the verge of a heart attack or the person whose health depends on a meal and a ride to their next medical appointment. Our opportunity lies in those single interactions, multiplied millions of times each day, to help close the gaps we see today and anticipate the challenges of tomorrow.

Our mission in action, benefiting real people

Our persistent commitment to sustainability serves as the foundation of our strategic growth priorities, designed to not just serve more people, but serve them better, more comprehensively and with higher-quality, more affordable care. While we have plenty of work ahead of us, the progress we’ve made to date will form the bedrock for the future.

Our mission comes to life in the pages of this report with real words from real members, patients and employees who have joined this company because they are drawn to our mission and the opportunity to make a difference in people’s lives.

I am proud to be a part of this endeavor each day, and I’m excited for the progress we can make in the years to come.



Patricia L. Lewis

Chief Sustainability Officer,
UnitedHealth Group

About UnitedHealth Group

our mission

Help people live healthier lives and help make the health system work better for everyone.

UNITEDHEALTH GROUP

A health care and well-being company with two distinct and complementary businesses working to help build a modern, high-performing health system.

Optum

Combines clinical expertise, technology and data to empower people, partners and providers with the guidance and tools they need to achieve better health.

Optum Health

Value-based care

Optum Rx

Pharmacy care services

Optum Insight

Technology-enabled services



UnitedHealthcare®

Offering a full range of health benefits, enabling affordable coverage, simplifying the health care experience and delivering access to high-quality care.

Medicare & Retirement

Serving older people

Employer & Individual

Consumer-oriented benefit offerings

Community & State

Caring for medically underserved

~400K

employees worldwide.

150M

unique individuals served.

>\$320B

total revenues.

Our core values

Integrity

Honor commitments.
Never compromise ethics.

Compassion

Walk in the shoes of the
people we serve and
those with whom we work.

Relationships

Build trust through collaboration.

Innovation

Invent the future
and learn from the past.

Performance

Demonstrate excellence
in everything we do.

Who we serve

- Consumers
- Employers
- Governments
- Care providers
- Patients
- Health plans

Our strategic growth priorities



Value-based care

With more than 70,000 employed or aligned physicians serving over 20 million people – including more than 3 million in fully accountable value-based arrangements – our integrated care delivery capabilities are strongly positioned to help providers and payers transition from fee-for-service to more effective models helping to achieve higher-quality outcomes and better experiences, at lower costs. We continue to integrate and broaden our in-clinic, in-home, behavioral, virtual and other capabilities to serve more people, more comprehensively.



Health benefits

We serve more than 51 million people in commercial and government health benefit programs. We continue to look for opportunities to deliver better care and outcomes for all customers and consumers. We are building on proven coverage offerings with new simple, affordable and innovative benefits. We continue to prioritize coverage facilitating high-quality care at a lower cost, which in turn drives growth in the number of people we are able to serve.



Health technology

We are uniquely positioned to continue to bring greater transparency, efficiency and quality to health care. We use clinical data and intelligence to help redesign, automate and deploy new technologies and approaches to simplify administrative processes and clinical decision-making – thus enabling physicians and health systems to operate more efficiently and effectively, as well as better serve their patients. We are continuing to expand our portfolio of comprehensive market-level health system partnerships with tools to improve claims accuracy and administrative efficiency.



Health financial services

Streamlining payment processes to provide greater convenience and reliability for consumers and providers is essential to modernizing the health system. Our work to integrate the end-to-end health banking and payments experience will help care providers get paid more accurately, faster and with less administrative burden – making payments simpler, more convenient and affordable for consumers.



Pharmacy services

As the most common touch point in health care, pharmacy services are vital to improving patient outcomes and reducing total cost of care throughout the health system. We continue to innovate as a care provider and pharmacy benefit manager, strengthening our direct-to-consumer offerings, capturing greater share of the growing life sciences market and seamlessly integrating our medical, pharmacy, behavioral and community health capabilities.

Sustainability at UnitedHealth Group

Sustainability is an inspiration for growth – a foundation to fulfill our mission and deepen our societal impact by improving the health and well-being of the people we serve.

At UnitedHealth Group, sustainability is our ambition for strategic, long-term growth, embedded in our businesses and intrinsically linked by a common mission to help people live healthier lives and help make the health system work better for everyone.

Our four sustainability priorities are informed by our stakeholders and reflect contemporary challenges, including social inequities, climate change and access to affordable, high-quality medical care. These priorities align with our five growth pillars – value-based care; health benefits; health technology; health financial services; and pharmacy services – representing the ways we can seek to help every person who interacts with the health care system every day.

The ultimate success of our company is the creation of enduring, long-term value for both our shareholders and society at large. It's an ambition influenced by the people who work here, the workplace culture we build, our impact on the planet, strong corporate governance and our ability to help build a health system capable of responding to the needs of the people it serves.



Our sustainability priorities

Helping to build a modern, high-performing health system

Our core business is committed to building a simpler, more consumer-oriented health system to help ensure everyone has access to high-quality, affordable health care. Through partnerships and our core growth strategies, we are working to deliver a more sustainable health system for this generation and the next.

Healthy environment

Recognizing the impact climate change has on human health, we are working to minimize our footprint to help people live healthier lives. Our commitment to net-zero reflects our belief in a healthy planet as the foundation of a healthy society.

Our people and culture

The people who come to work at UnitedHealth Group are drawn to our mission and dedicated to building a modern, high-performing health system to better serve society. Our ability to build a diverse, equitable and inclusive culture is critical to our success as a company where innovation and compassion fuel our impact on the people and communities we serve.

Responsible business practices

Our more than 40-year history of strong and effective corporate governance is foundational to our ability to grow and operate ethically as we work to improve the health and well-being of those we serve. Our ability to protect data and privacy, effectively manage our supply chain and help ensure the responsible use of artificial intelligence and machine learning are foundational to our ambitions as a leading health care company.



Sustainability governance

UnitedHealth Group has a long-standing commitment to sustainability supported by our senior leaders and Board of Directors.

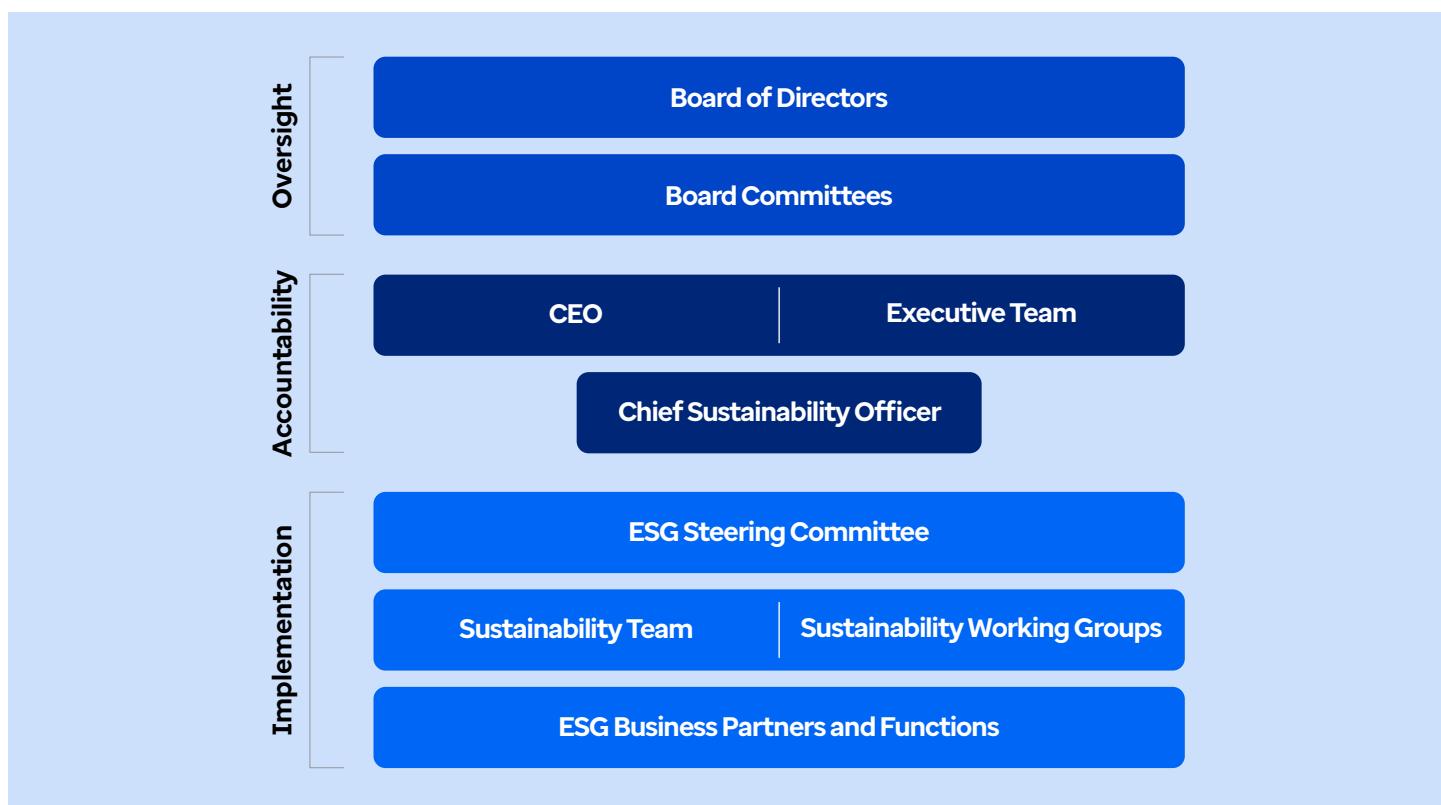
Our Board of Directors – including its four committees – provides formal oversight and strategic direction for our environmental, social and governance (ESG) agenda, including review and approval of key sustainability priorities, policies, performance and annual reports.

Our Governance Committee oversees overall strategy of the company's ESG policies and practices, including overseeing the process of identifying key ESG topics, ensuring appropriate board or committee oversight of key ESG topics, and reviewing the company's ESG and sustainability reports. Other committees provide subject matter expertise. For example, the Audit and Finance Committee participates in oversight of investment criteria, the Health and Clinical Practice Policies Committee oversees efforts to expand access to health care and related matters, and the Compensation and Human Resources Committee reviews programs related to people management and diversity, equity, and inclusion.

The CEO and executive team, including the chief sustainability officer, functions as a decision-making body, approving sustainability priorities, policies and practices, and monitoring performance. The CSO is accountable for ESG initiatives and performance and provides regular updates to the CEO and the board.

In 2022, we established an ESG Steering Committee, a cross-enterprise group chaired by the CSO and composed of key business and functional leaders. The ESG Steering Committee serves in an advisory role regarding ESG strategy and objectives, supports execution and results, and disseminates information.

Sustainability working groups have a special focus on specific ESG focus areas, with representation across business and functional areas. Additionally, ESG priorities are supported by teams across the enterprise, including Optum, UnitedHealthcare, Operations and Facilities Management, Sourcing and Procurement, Clinical, the People Organization, Finance, Compliance and Privacy, Legal and Risk Management, Compliance and Regulatory Affairs, Communications, and Enterprise Resiliency and Response.



Stakeholder engagement

We continued to proactively engage with stakeholders in 2022 through various forums, one-on-one discussions, surveys, active listening and regular touch points. These engagements provide a diverse group of key stakeholders the opportunity to provide direct and indirect feedback and engage in robust dialogue on our ongoing efforts to achieve our commitments.

We value each stakeholder's unique perspective and use them to inform our evolving sustainability strategy. We continue to enhance our engagement efforts to meet the needs and expectations of our stakeholders and integrate feedback into the way we operate.

Stakeholder	Our engagement
Consumers and patients	<ul style="list-style-type: none"> Active listening with a broad and diverse mix of consumers to improve our products and meet emerging needs. Net Promoter Score, including broad and targeted surveys. Ongoing tracking to understand brand awareness and affinity, and sentiments on key consumer health care needs. Ethnographic research, including in-person interviews, social media listening and focused listening with key diverse audiences.
Employees	<ul style="list-style-type: none"> Recurring employee sentiment analysis. Formal surveys to understand employee work experience. Regular all-company forums.
Customers	<ul style="list-style-type: none"> Recurring outreach with key customers to understand how to work together more effectively. One-on-one meetings with leaders from UnitedHealth Group, Optum and UnitedHealthcare. Periodic customer forums and advisory councils.
Health care professionals	<ul style="list-style-type: none"> External conferences and local advisory councils. Recurring engagement through nearly 50 medical, specialty and industry societies. Monthly forums on health plan topics.
Peer companies	<ul style="list-style-type: none"> Ongoing collaboration through trade associations and industry partnerships. Recurring engagement through the National Academy of Medicine's Action Collaborative on Decarbonizing the U.S. Health Sector.
Suppliers	<ul style="list-style-type: none"> Annual Supplier ESG Summit to facilitate discussions and collaboration with suppliers. Supplier benchmarking sessions to share best practices and key learnings. Annual ESG assessments.
Policy stakeholders	<ul style="list-style-type: none"> Meetings with federal, state and international policymakers and their staff. Advocacy activities. Participation in key trade associations.
Shareholders	<ul style="list-style-type: none"> Annual Investor Conference, including ESG seminar and published materials. Quarterly financial updates and earnings reports. Investor conferences and events attended by management. Recurring one-on-one engagement meetings attended by management and board members.
Community-based partners	<ul style="list-style-type: none"> Recurring one-on-one and small group meetings with partners. Grant-making. Volunteer efforts.

2022 sustainability highlights

Building a modern, high-performing health system

\$0

copays initiated for five lifesaving drugs for fully insured commercial plan members.

\$100M

scholarship program launched to help build a diverse health workforce.

2.2M

in-home health assessments provided to older adults, including 670,000 in low-income communities.

Our people and culture

40%

of top management positions are held by women.

39K

employees participated in Employee Resource Groups, up 17,500 from 2021.

75%

positive employee experience score, up from 72% in 2021.

Healthy environment

Committed

to the Science Based Targets initiative (SBTi) Net-Zero Standard.

Completed

our first assessment of scope 3 emissions.

24%

reduction in inbound paper.

Responsible business practices

\$569M

in employee wages supported through our supplier diversity program.

33%

female independent directors on our board.

Conducted

our first Human Rights Impact Assessment.

Recognition*

Named to the **Dow Jones Sustainability World and North America Indices** since 1999.

Named to **Fortune's 2023 "World's Most Admired Companies"** list for the 13th consecutive year.

One of **Fortune's Most Innovative Companies** for 2023.

Named to **Forbes' list of America's 500 Best Large Employers** for 2022.

[*More recognition](#)

Our commitments

Supported by our strategic growth priorities, our long-term commitments represent specific, measurable targets within our broader efforts to help build a modern, high-performing health system, advance health equity and contribute toward a healthy environment. As we measure and report our progress on each specific commitment, we are continuously evaluating new commitments that can further support our sustainability priorities and advance our mission.

Building a modern, high-performing health system

Invest \$100 million to create a new philanthropic program and partnerships that will measurably advance a diverse health workforce by 2033.



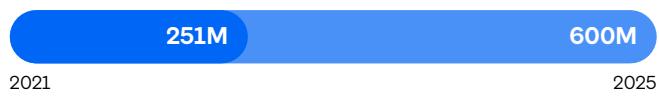
55%+ of our outpatient surgeries and radiology services will be delivered at high-quality, cost-efficient sites of care by 2030.



85% of our members will receive preventive care services annually by 2030.



600 million gaps in care will be closed for our members by the end of 2025.



Healthy environment

Achieve a 60% reduction in scope 1 and scope 2 emissions by 2030. Reach operational net-zero by 2035.



Invest and source 100% of our global electricity demand with renewable sources by 2030.



Commit to the Science Based Targets initiative (SBTi) Net-Zero Standard.



Building a modern, high-performing health system



UnitedHealth Group and our distinct and complementary businesses of Optum and UnitedHealthcare are helping to create a consumer-first health system, connecting people to high-quality, affordable care to deliver the best possible outcomes.



>3M

people served under fully accountable value-based care arrangements in 2022.

8M

people served by Medicaid and Dual Special Needs Plans.

>2.2M

HouseCalls completed in 2022.

43M

people access behavioral health services through our network.

What we're focused on

- **Advancing health equity** by focusing on six core areas where we can reduce widespread health disparities.
- **Accelerating the transition to value-based care** that delivers better health outcomes at a lower overall cost.
- **Expanding in-home clinical care** to better support people with complex medical, behavioral and social needs.
- **Expanding access to care** by lowering the cost of prescription drugs, including lifesaving medications like insulin.
- **Enhancing consumer-oriented benefits** with transparent pricing, choice and simplicity.
- **Personalized care coordination** that helps people navigate the health system and deliver higher satisfaction, particularly for those with specialized or rare diseases.
- **Building healthier communities** across the U.S. through grant-making, commercial programs, employee volunteering and charitable contributions.

Building a modern, high-performing health system is the foundation of our business – a system that is more connected, personal and equitable, revolving around the consumer.

We have made significant strides by expanding access to high-quality, affordable care. In 2022, we served approximately 1 million more members in fully accountable value-based care models, delivering better outcomes for patients with chronic conditions and older adults in Medicare Advantage. New innovative health benefits, like our Surest health plans, eliminated deductibles and reduced out-of-pocket costs. Our clinical decision support tools seamlessly integrated health technology for providers at the point of care, allowing them to spend more time with their patients. We accelerated our investment in health financial services, introducing an integrated benefits card to help older adults pay for prescriptions, food or utilities. And we expanded the number of community pharmacies helping to improve outcomes for people with HIV and behavioral health conditions.

At the same time, we also know people accessing the health system face high costs, wide disparities and – for many – a fragmented, disjointed experience impacting their ability to live a healthy, fulfilling life.

We can reach more people by creating an equitable system of care and delivering on our mission to help people live healthier lives and help make the health system work better for everyone – for the [150 million people](#) our company serves and anyone else who touches it.

Advancing health equity

From our clinical policies, to the organizations we partner with across the country, to a more diverse and inclusive health workforce well beyond our own walls – our commitment to health equity is part of who we are and how we operate.

Our commitment

Invest \$100 million to create a new philanthropic program and partnerships that will measurably advance a diverse health workforce by 2033

About our commitment

In 2022, the United Health Foundation committed to investing \$100 million over 10 years to deepen and scale our efforts in health workforce diversity. Through this commitment, we will provide scholarships and support to 10,000 underrepresented current and future clinicians, which will help support meaningful and sustained progress in addressing health disparities and advancing health equity.

Our progress

We are on track to welcome more than 1,000 current and future health professionals into the program in 2023 and expect to commit more than \$12 million by the end of 2023.

Why this is important to us

Research shows care provided by culturally competent clinicians who understand diverse languages, beliefs and attitudes builds trusting patient-provider relationships and helps reduce disparities in health conditions, experience and outcomes.

How we're delivering on our commitment

Since announcing our commitment, the United Health Foundation has formally launched the Diversity in Health Care Scholarship program and provided scholarships to an initial cohort of diverse health professionals who are working to advance their clinical skills and credentials. We have initiated partnerships with [eight nonprofit organizations](#) to provide scholarships and support to future clinicians seeking careers as doctors, nurses and other clinical professionals.



Our six focus areas

In 2022, we deepened our focus on connecting resources and expertise across the enterprise, aligning around six strategic health equity focus areas based on national public health trends and listening sessions with patients and care providers. These areas address the widest health disparities – influenced by deep societal challenges – where we see the biggest opportunity to make a difference in people's lives. In 2023, we are working to identify measurements of success to evaluate the impact of ongoing programs and scale promising new solutions in each area.

Care experience and workforce

Emphasis on increasing workforce diversity and reducing institutional bias in the delivery of care

The U.S. health care system is facing a [shortage](#) of health care professionals over the next decade. Furthermore, racial bias and a lack of culturally competent care leads to poorer experiences and outcomes. In 2022, we committed \$100 million to accelerate this effort to help build a pipeline of diverse health care talent and address the projected health workforce shortage.

Socioeconomic challenges

Emphasis on social determinants of health and health literacy

[As much as 80%](#) of health outcomes are tied to social and economic conditions. In 2022, we screened nearly 5 million members for social services and connected more than 862,000 people to better support their social needs. We are using data and analytics to proactively identify those who need support, as well as in-home clinical assessments to connect older adults and those with multiple chronic conditions to needed social services like housing or transportation. Since 2011, we have invested about [\\$800 million](#) to create 19,000 new homes, while targeted investments like [Invest Appalachia](#) are focused on supporting community-specific issues related to housing, poverty and food insecurity.

Care access and affordability

Emphasis on rural and underserved populations

[About 40%](#) of Americans say they or a family member have delayed recommended medical care due to costs. Our HouseCalls program provides more than 2 million in-home clinical services each year to address the medical, pharmacy, behavioral and social needs of older adults, leading to 6% more specialist visits. In 2022, we provided in-home assessments to nearly 670,000 people in low-income communities and nearly 400,000 in rural counties. Meanwhile, 11 of our state Medicaid health plans have achieved a [Health Equity Accreditation](#) from the National Committee for Quality Assurance (NCQA).

Behavioral and mental health

Emphasis on youth, older adults and LGBTQ+ communities

Nearly [1 in 5 adults](#) live with a mental health condition. Our integrated approach combines pharmacy, behavioral and medical care to treat the whole person both in person and virtually. We care for millions of people with behavioral health conditions through a network of 375,000 behavioral care professionals, a staff of nearly 4,500 employed clinicians and about 700 community pharmacies.

Chronic condition management

Emphasis on asthma, hypertension, obesity, diabetes, sickle cell disease, breast cancer and colon cancer

[Four in 10](#) American adults have two or more chronic conditions, and wide disparities exist within specific conditions. With more than 140,000 clinical professionals and more than 70,000 aligned, contracted or employed physicians – serving patients in nearly 3,000 sites of care across Optum, from ambulatory surgical centers to community pharmacies – our deep breadth of clinical knowledge helps drive evidence-based decision-making toward better overall care. Our value-based care models emphasize coordinated, comprehensive care while connecting patients with chronic disease to the right specialists to address conditions early.

Mortality and life expectancy

Emphasis on maternal care

Maternal mortality in the U.S. reached its [highest level in 60 years](#) and Black women are still [three times more likely](#) to die during childbirth compared to white women. For people in Medicaid – who represent nearly half of all births in the U.S. – we are working to expand access to [doulas](#), a professional labor assistant for the mother, which has been shown to be one of the most effective ways to improve labor and delivery outcomes. We are also identifying home-based and digital tools to enhance maternal care, including a partnership with the Morehouse School of Medicine to research “near miss” maternal care experiences.

Accelerating the transition to value-based care

Transitioning to a value-based system in which health care providers are paid to deliver high-quality, coordinated care can help identify and close gaps in care and deliver preventive services, leading to better patient outcomes at a lower overall cost.

Our commitment

Close 600 million gaps in care for our members by the end of 2025

About our commitment

Gaps in care occur when there is a discrepancy between clinically recommended care and the actual care delivered. Common gaps include missed wellness visits, vaccinations or screenings, and medication non-adherence.¹

Our progress

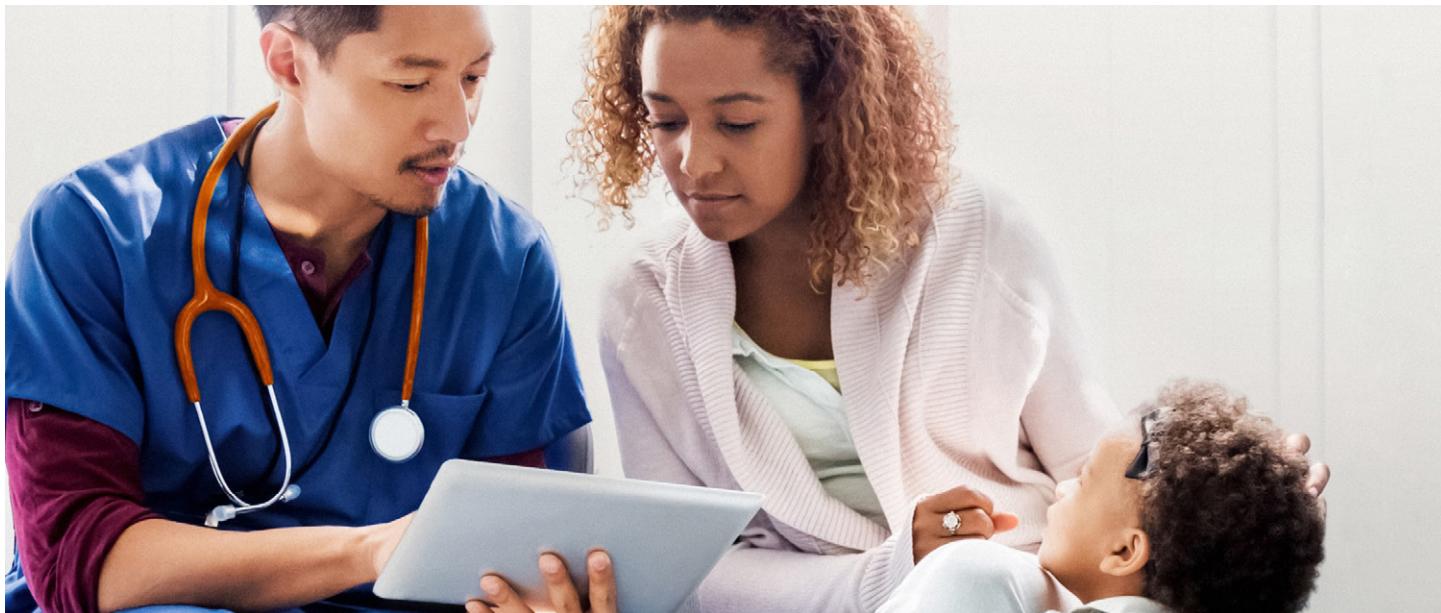
In 2022, we closed approximately 141 million gaps in care toward our commitment to close 600 million gaps from 2021 through 2025. We have closed 251 million gaps in care since making our commitment in 2021.

Why this is important to us

Nearly [900,000 Americans](#) die prematurely each year from causes like heart disease, cancer and chronic lower respiratory disease, but up to 40% of those deaths could be prevented. While preventable deaths are attributed to a number of behavioral and social factors, research also shows closing gaps in care can lead to better health outcomes and lower health care costs by reducing the risk of hospitalization and improving early identification of potentially fatal disease.

How we're delivering on our commitment

Gaps in care can manifest in a variety of ways including missed screenings and annual wellness visits, medication adherence and access to food or transportation. We are working to close gaps in care through in-home assessments delivered to older adults through our HouseCalls program, value-based payment models helping to deliver timely, high-quality care, and care coordination models providing patients with complex illnesses with a single point of contact to help navigate the health system.



1. The 600 million gap closure target was based on the 2019 Healthcare Effectiveness Data and Information Set (HEDIS) measures established by the National Committee for Quality Assurance (NCQA).

For more than a decade, UnitedHealth Group has been a national leader in driving the expansion and adoption of value-based care models, which incentivize care coordination instead of traditional fee-for-service arrangements focused on the volume of services provided. We reach people through more than 2,200 sites of care and serve more than 3 million people in fully accountable value-based care models² – the most comprehensive and effective type of value-based arrangement.

Supported by value-based care arrangements, Medicare Advantage plans help more than half of older adults in the U.S. save 40% on out-of-pocket costs – or \$2,000 a year on average. Lower costs are particularly meaningful to an increasingly diverse, clinically complex population, nearly half of whom live on less than \$25,000 a year.

Serving more than 7 million Medicare Advantage members, we foster cost-effective, high-quality health care through care coordination, in-home care delivery and innovative consumer products to help those members pay for healthy food and utility bills. Optum Medicare Advantage patients experience better outcomes than people in Medicare Advantage plans who receive care from other providers. Optum patients are 14% more likely to control their hypertension and 7% more likely to control their diabetes compared to those who receive care from other providers.

Optum [Kelsey-Seybold Clinic](#) in Houston has been integrating value-based accountable care into its practice for the last 15 years. With more than 65 specialties and nearly 700 providers, the clinic delivers personalized, high-quality care to meet patients' needs. For example, we are helping diabetes patients who need to avoid complications related to higher A1c levels, which measures average blood sugar levels. Through a coordinated approach to patient care, 73% of diabetes patients in KelseyCare's accountable care health plans have good control of their A1c, compared to a national health plan average of 51%.



“With complex patients, we’ve seen quality go up and the cost come down. That’s our textbook definition of what we’ve all been searching for in value-based care.”

Tony Lin, CEO, Kelsey-Seybold

>3M

people served under fully accountable value-based care arrangements in 2022.

24%

higher rates of annual wellness visits among Medicare Advantage patients in Optum value-based care vs. fee-for-service.

44%

fewer inpatient admissions for COPD and asthma among Medicare Advantage patients in Optum value-based care vs. Medicare fee-for-service patients.

Kelsey-Seybold outcomes

40%

fewer bed days.

30%

lower emergency department utilization.

2. Fully accountable value-based care models are payment arrangements in which care providers assume full clinical and financial risk, and are responsible for the quality and total cost of care for each patient. This usually results in better health outcomes and lower costs for individuals, while giving providers more time to understand the holistic health needs of their patients.

Expanding in-home clinical care

Our in-home care team is essential to delivering more equitable and accessible health care for patients with complex medical, behavioral and social needs – particularly for the 85% of older adults with at least one chronic condition who benefit from preventive care.

Our commitment

85% of our members will receive preventive care services annually by 2030

About our commitment

Increasing the number of members receiving preventive care services – including wellness visits, health screenings and vaccinations – can help improve long-term health by detecting and preventing diseases and health risks.

Our progress

In 2022, 70% of our members received preventative care services, compared to 69% in 2021.

Why this is important to us

Research shows access to preventive care can help identify and prevent diseases, including cancer, diabetes and cardiovascular disease. Preventive care is critical to the shift toward value-based care models where care teams are incentivized to prioritize early disease treatment.

How we're delivering on our commitment

Following disruptions caused by the COVID-19 pandemic, we are working to ensure members are able to access preventive services through home screenings and virtual care, and by increasing incentive payments, particularly for Medicaid providers. Many of our commercial benefit offerings provide no- or low-cost preventive care coverage and our fully accountable value-based care models prioritize preventive care.



Through our HouseCalls program, we are connecting people in Medicare Advantage to social services and providing vaccines and screenings for under-diagnosed conditions. In 2022, nearly 1 in 4 people screened by a HouseCalls clinician had a condition they didn't know about – including diabetes, prediabetes, hepatitis C and colon cancer. By identifying those conditions, we are able to help connect people to the right services to get the care they need sooner.

For low-income Americans enrolled in both Medicare and Medicaid who often have disabilities or multiple health conditions, our Dual Special Needs Plans (D-SNPs) provide holistic in-home care through Optum at Home. A team of clinicians and dedicated care experts support our most complex members based on individualized care plans. Our coordinated approach to caring for D-SNP patients is helping reduce hospitalizations by 12%, with an NPS of nearly 80.

Convenient tools like medication home delivery, home infusions and virtual care further expand our ability to care for people in their home. Our home delivery services include multi-dose packaging capabilities for people with multiple conditions, providing a safe, convenient and cost-effective alternative to a retail pharmacy for consumers to receive their medications, as well as better medication adherence compared to retail pharmacies.



“We view home health as one of the new frontiers of value-based health care because it improves access while providing a more convenient experience for people, like special needs patients and those in rural areas who often have a very difficult time leaving their home to get care.”

Kristy Duffey, MS, APRN-BC, FAAN
Chief Nursing Officer, Optum Health
Chief Operating Officer, Optum Home & Community Care

>2.2M

HouseCalls completed in 2022.

~1M

members tested in 2022 for under-diagnosed conditions; approximately 25% screened positive.

~75%

of members had an in-office visit within 90 days of a HouseCalls visit.

190M+

adjusted prescriptions³ delivered to consumers' homes annually.

³ Includes an adjustment to convert 90-day prescriptions to three 30-day prescriptions.

Meeting older adults at home

Jack's story

The UnitedHealthcare® HouseCalls® program is designed to meet older adults in their homes to assess and address their medical, social and behavioral health needs in an hour-long annual in-home visit with a licensed health care practitioner. During one routine HouseCalls visit, nurse practitioner Heather found her patient Jack's blood pressure was dangerously high and took swift action to get him to an emergency department, resulting in Jack having a stent placed in his heart to help prevent a massive heart attack.

"I live in a little country town and I have approximately 11 deer. I get up every morning and feed those deer.

"One day, I got through feeding the deer and I was breathing a little hard, and when I got in, that's when it all started. My blood pressure was 217 over 110.

"When Heather came, she said, 'There's something going on.' And she said, 'I'm going to treat you like my daddy; if my daddy was like this, he would go to the emergency room.'

"If Heather hadn't come all the way out here, I wouldn't have gone to the doctor. She knew what she was doing, and if she thought I needed to go, I was going to go. They found my widow-maker was 97% stopped up.

"By her coming all the way out here and checking me that day, it saved my life."



"If it wasn't for my guardian angel, the doctor said I wouldn't be here."

Expanding access to care by lowering the cost of prescription drugs

Research shows as many as 1.3 million people ration insulin each year due to high costs, with higher rates among Black Americans and those without health coverage. Affordability challenges often extend to other lifesaving drugs, including epinephrine for severe allergic attacks and albuterol used to treat acute asthma attacks.

For those who rely on these critical drugs, high costs can have life-threatening consequences. We are taking action to help ensure patients have reliable, consistent and affordable access to medications, including insulin, allowing them to adhere to their medications as prescribed.

\$0 copay drugs

- Insulin – diabetes management
- Epinephrine – severe allergic reactions
- Glucagon – hypoglycemia
- Naloxone – opioid overdoses
- Albuterol – acute asthma attacks

Beginning in 2023, UnitedHealthcare members in fully insured commercial plans – including UnitedHealth Group employees – will pay \$0 for five lifesaving medications. By eliminating all out-of-pocket expenses for these critical medications, members are less burdened by medical costs and

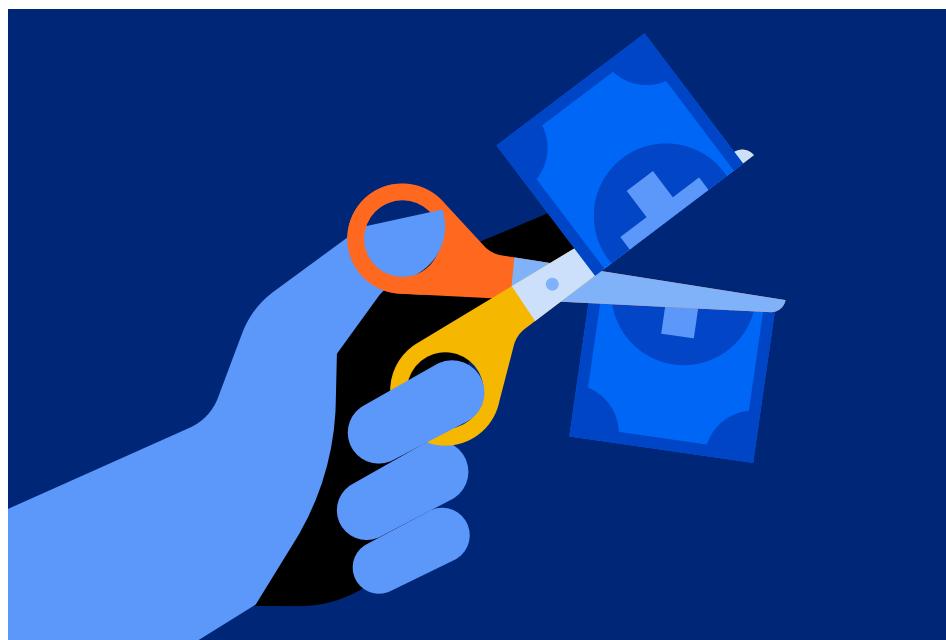
are better equipped to take their medications as prescribed, reducing the risk of complications and expensive hospitalizations. For uninsured patients, we also made low-cost insulin available through the Optum Store, including an option for home delivery.

\$22

average monthly cost of insulin for 1.7 million customers.

8M+

UnitedHealthcare members have access to \$0 copays for five lifesaving drugs throughout 2023.



Beyond improving the affordability of lifesaving medications, we are working to reduce the cost of biologic drugs, which are sometimes the only treatment option for debilitating, chronic illnesses such as cancers or autoimmune disorders. But this comes at a significant cost to patients and the health care system. Specialty biologics represent less than 2% of prescriptions, yet they account for about 43% of drug spend, with continued growth anticipated.

We are leading the way in embracing biosimilar medications, which are lower-cost functionally equivalent alternative versions of brand-name biologic medications that could save an estimated \$42 billion over the next several years. In 2023, UnitedHealthcare began covering three anti-inflammatory biosimilars (adalimumab) as part of our commitment to further drive competition, improve choice for providers and patients, and lower net and out-of-pocket drug costs.

41%

average savings for employers using UnitedHealthcare biosimilar management strategies.

A weight lifted

Kimberly's story

Kimberly Clark was 19 when she was first diagnosed with Type 1 diabetes. Over the next five years, as she tried to manage her health, she would go into diabetic ketoacidosis – a serious and sometimes life-threatening complication – more than 10 times. At the same time, she and her husband often stressed about managing the rising and sometimes out-of-reach cost of insulin she needed to survive.

"Early in my marriage, money was tight, and we were paying hundreds of dollars for this drug I needed to live. I remember begging physicians to give us sample vials just to get by.

"And I knew I wasn't the only one in a situation like this. More than 34 million Americans have diabetes, and 15 million more are diagnosed every year. When UnitedHealthcare announced it was eliminating out-of-pocket costs for insulin, it was a game-changer for my family. And it also just makes me so happy for the people who are in the situation I was in not that long ago."



"For people like me, insulin is lifesaving. If you're trying to get by without it because you can't afford it, your life is at risk. That's why this change is so important."

Enhancing consumer-oriented benefits

Rising health care costs have left Americans spending more than [\\$433 billion](#) out of pocket on health care each year. Consumers want simple, transparent health benefits and the ability to easily access high-quality, cost-efficient sites of care.

Our commitment

55%+ of outpatient surgeries and radiology services among our members will be delivered at high-quality, cost-efficient sites of care by 2030

About our commitment

Care provided at high-quality, cost-efficient sites – including ambulatory surgery centers and stand-alone imaging centers – can lead to better outcomes at a lower overall cost to the consumer and the health system.

Our progress

In 2022, we delivered approximately 49% of outpatient surgeries and radiology services at high-quality, cost-efficient sites of care.

Why this is important to us

Medical care costs vary widely depending on where it is delivered. Total costs for orthopedic surgeries at ambulatory surgery centers (ASCs) are about 25% less than hospitals. Moving half of joint replacement surgeries from hospitals to ASCs would save the health system [\\$3 billion per year](#). Similarly, shifting routine diagnostic testing from a hospital to a stand-alone imaging center or a physician's office could save consumers [more than \\$300 per test](#).

How we're delivering on our commitment

We are focused on reducing cost barriers for our members by providing geographic-specific site of care information to providers as they are making patient referrals, including data identifying which ASCs and stand-alone imaging centers meet quality and efficiency standards. Through Point of Care Assist, providers can access cost and quality information directly in their electronic medical record, helping them make informed patient care recommendations.

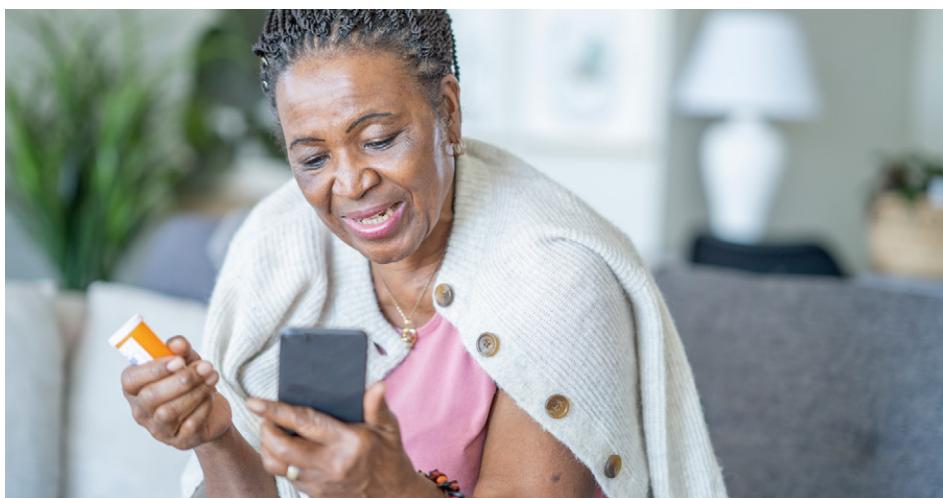


Serving more than 150 employers in the U.S., the UnitedHealthcare Surest plan is among the fastest growing commercial plans due to its transparency and simplicity, allowing members to easily search for care and see clear, upfront pricing information. Members with Surest plans don't have a deductible or coinsurance and they have the option to add coverage for a planned medical procedure. A digital app lets members search the broad UnitedHealthcare network by provider, specialty, procedure or geography and compare their all-in costs for more than 490 services, ranging from primary care to specialty care and behavioral health visits.

Clear pricing, choice and affordable benefits help remove financial barriers, meaning fewer people delay necessary care. As a result, Surest members are 23% less likely to have inpatient hospital surgery and 10 times more likely to access virtual care compared to 2021 commercial benchmarks, and Surest members' NPS⁴ is 56 points higher than those with alternative plans.

In addition to innovative benefits, we are helping the 4 in 10 Americans who forgo medical treatment due to cost by helping them manage drug and medical expenses through financial support and transparency tools, including a preloaded fee-free debit card that helps consumers pay for certain out-of-pocket medical expenses. Our capabilities are designed to help people pay for care with health savings and spending accounts, advanced financial education tools and consumer engagement and payment services, along with self-service tools to make it easier to manage and save money.

Launched in 2022, the UnitedHealthcare integrated benefits card simplifies care for older adults by linking their health plan, pharmacy benefits, rewards and gym memberships to a single ID card. Because the benefits card can identify items at the SKU level, older adults can easily pay for items covered by their health benefits, including groceries, over-the-counter medications, and even utility bills, without using cash or saving a receipt. More than 12 million people across multiple health plans will have access to the integrated card in 2023.



70%
of Surest members spend less than \$500 in out-of-pocket costs annually.

82%
of the time, Surest members choose the most cost-effective treatment option.

46%
lower monthly out-of-pocket costs for Surest members compared to other commercial plans.

92%
of Americans live within 5 miles of a participating integrated benefits card store.

\$1.7B
spent by D-SNP members on food and over-the-counter products.

4. The Net Promoter System (NPS) is a proven operating discipline used by most Fortune 1,000 companies that enables us to measure affinity for our products and services, indicating consumer, broker, employer, provider and employee loyalty. It is based on a single survey question asking respondents to rate the likelihood they would recommend a company, product, or a service, and measured on a scale from -100 to +100. Top performing NPS companies range from +40 to +70.

Personalized care coordination when it matters most

Advocates across UnitedHealthcare help members navigate the health system every day using personalized member information, social determinants of health, point-of-care support, custom management for high-needs patients and real-time guidance to help patients and physicians make the right choices to optimize patient care, lower the cost of care and deliver higher satisfaction.

Working with more than 875 hospitals and 16,000 providers across the U.S., our care coordinators help patients and caregivers navigate the post-acute care journey from hospital admission to discharge, averaging fewer admissions to post-acute care facilities by helping to identify, address and close gaps in care. Those who are admitted spend about 2.5 fewer days in post-acute facilities, trading higher-cost and less-comfortable inpatient stays for high-quality virtual and in-home care instead.

The cost and complexity of the health system can be especially challenging for those with a rare disease or a special need, which often require coordination with multiple specialists.

Nearly 30 million Americans are affected by more than 7,000 rare diseases, 90% of which currently do not have an FDA-approved treatment. Many people with a rare disease face challenges in diagnosing and treating their illness, often seeing multiple doctors over the course of several years and spending nearly \$29,000 more than those without a rare disease.

Our rare disease pharmacy business is one of three entities to hold both distinctions: the Accreditation Commission for Health Care (ACHC) Distinction in Orphan Drugs and the URAC Rare Disease Pharmacy Center of Excellence, and in 2022, we doubled the number of orphan drugs we manage. Optum rare disease pharmacists work with patients directly, partner collaboratively with clinical care teams, and educate stakeholders who participate in supporting care delivery and therapy access to address the complex challenges within the rare disease community.

~10M

Medicare Advantage lives served by care coordinators.

10%

improvement in NPS with UnitedHealthcare advocacy programs for employers, providers and members.

~10K

patients served in 7 rare disease programs since December 2020.



Navigating the complexities of the health system is particularly challenging for the 1 in 5 children in the U.S. who have a special health care need requiring six times more care with 12 times higher costs than children without special needs.

Since 2017, the UnitedHealthcare Special Needs Initiative (SNI) has provided families and children with special needs with personalized one-on-one assistance from an advisor who can help the family access the care they need while tracking the associated costs. By providing payment assistance, care coordination, social needs assessments and access to specialty care, the SNI program has helped more than 150,000 families ease the stress of tracking claims and facilitating medical care.

\$1.5K

reduction in out-of-pocket costs per child for families in SNI.

76

point average NPS improvement for SNI families.

Navigating a diagnostic odyssey

The Merchant family's story

For her first 18 months of life, Adelyn Merchant was like any other happy, healthy baby. Then it became clear something was wrong. Her parents – Spencer and Erin – noticed she was falling more and was no longer able to say the words she once knew. Soon, she was unable to eat. Eventually, they turned to the UnitedHealthcare Special Needs Initiative, which connected the family to specialists who helped diagnose Adelyn with the rare disease NMDA anti-receptor encephalitis. Following the diagnosis, UnitedHealthcare helped the Merchant family develop a treatment plan and connected them to transportation, support groups and a family advisor to assist with day-to-day needs.

"Adelyn was a healthy little girl. She was meeting all her milestones. Then at 18 months, she got very, very sick. We saw her decline very quickly. Within about a month she had lost just about all of her abilities."

"It is the hardest journey we've ever been on. You follow the doctors the best you can. They suggest something and you go with that, you chase something else. You get to the point where you say, I hope that's it."

"One day we got a phone call from a nurse who talked about something called the diagnostic odyssey. We were connected with a team that just swarmed around us and we knew we were going to get an answer. It took very little time."

"Adelyn is now fully disabled and requires 24/7 care. But it's a relief to know we don't have to take care of it all by ourselves. The mentality of 'it takes a village' becomes tenfold when you have a special needs kid. Having the multiple programs offered through UnitedHealthcare has been integral to the success of our parenting."

"Even though she can't talk anymore, she still smiles; she still laughs. Every day for Adelyn is a new challenge and it pushes our family to be the best we can be."



"Adelyn gets what she needs when she needs it because the teams are working together."

Building healthier communities

Partnering with leading organizations to support communities around the world.

To build healthier communities, we are:

- Providing philanthropic grants and support to communities and employees in need.
- Publishing public health insights to better understand emerging health trends.
- Supporting employees who volunteer their time and resources to important causes.

Achieving better health outcomes requires a deep understanding of the diverse health needs of communities and breaking down barriers to help ensure care is provided to those who need it most. Through our foundations and our businesses, we combine our knowledge, experience and passion to improve health quality and outcomes in the communities where we live and work.

Recognition

Named one of [America's most community-minded companies](#) by Points of Light, based on the Civic 50 survey, every year since 2012, and the sector leader for health care for three consecutive years.

The United Health Foundation is recognized as a Healthy People 2030 ChampionSM by the U.S. Department of Health and Human Services' Office of Disease Prevention and Health Promotion.⁵

\$1.3B

in charitable donations since 2000.

\$95.8M

contributed in 2022.

20K

charitable organizations supported globally in 2022.

4.1M*

employee volunteer hours in 2022.

*Volunteer hours are calculated using employee survey responses and giving site participation data.

5. Healthy People 2030 Champion is a service mark of the U.S. Department of Health and Human Services. Used with permission. Participation by the United Health Foundation does not imply endorsement by HHS/ODPHP.

Our impact on communities

Our social responsibility efforts in 2022 continued to enhance the well-being of our communities by increasing access to integrated behavioral and medical care, addressing key health disparities and social needs for mothers, infants and older adults, and building a diverse and dynamic health workforce. Together with our grant partners, we are investing in solutions to address some of the nation's most pressing health challenges.

Improving behavioral health care for our nation's youth

Today's youth are facing an unprecedented mental health crisis with a growing rate of [depression and anxiety](#). To address this alarming trend, we are investing in programs and partnerships in 19 states, connecting over 32,000 young people and their families with care and services to increase access and improve behavioral health outcomes. Some specific examples include [Florida](#), [Minnesota](#), [North Carolina](#) and [Wisconsin](#) and the [District of Columbia](#).

Valle del Sol Community Health

(Arizona) A [\\$3 million](#) grant over three years has helped mobile medical teams provide primary care, psychiatry and behavioral health services to middle and high school-age children in underserved communities throughout Phoenix, leading to an 8% decrease in anxiety symptoms.

2K

students in the greater Phoenix metro area received health services.

Reducing disparities to achieve better health outcomes

Americans continue to face wide health disparities, contributing to the sharpest increase in premature deaths over a single year between [2019 and 2020](#). For example, the prevalence of Americans with multiple chronic health conditions has worsened since prior to the pandemic and frequent mental distress is 2.5 times higher among those with incomes less than \$25,000. In 2022, we invested in partnerships in 25 states and the District of Columbia, serving over 50,000 people with programs designed to reduce health disparities.

Indian Health Care Resource Center of Tulsa

(Oklahoma) A [\\$1.8 million](#) investment over three years has helped build a comprehensive, culturally competent program addressing the unique health needs of more than 5,400 Native Americans age 65 and over.

90%

of Native American patients enrolled in programs in Tulsa, Oklahoma, report controlled blood sugar.

Improving maternal and infant health outcomes

Long-standing disparities in maternal mortality and morbidity continue to disproportionately affect Black and American Indian/Alaska Native mothers, according to *America's Health Rankings 2022 Health of Women and Children Report*. To address maternal and infant health issues, we are investing in programs in 13 states, including [Indiana](#) and [Texas](#), to help improve maternal and infant health outcomes by targeting at-risk populations, with a focus on prenatal and perinatal health, infant health, workforce development, and mental and behavioral health. More than 5,200 women have received support through these programs.

CAMBA

(New York) A [\\$3 million](#) investment over three years has helped improve access to prenatal care for underserved and homeless women in Brooklyn, including screenings, food and nutrition referrals, breastfeeding support and newborn care services.

64%

of women enrolled in the program have been connected to a doula or midwife.

Building and shaping the health workforce

An aging population and growing rates of clinician burnout are contributing to a projected health workforce shortage in the coming years. Additionally, the current health workforce lacks the diversity to better serve an increasingly diverse patient population. Beyond our [10-year, \\$100 million](#) investment to build a pipeline of diverse health talent, we are investing in multiple initiatives nationwide to [advance diversity](#) and [cultural competency](#), support provider [health](#) and [well-being](#) and improve existing [workforce capacity](#).

Health Care Center for the Homeless

(Florida) We invested [\\$1.7 million](#) over three years to support a new clinical fellowship program that provides on-the-job training for post-graduate nurse practitioners with a focus on complex care management, providing care to 4,500 patients.

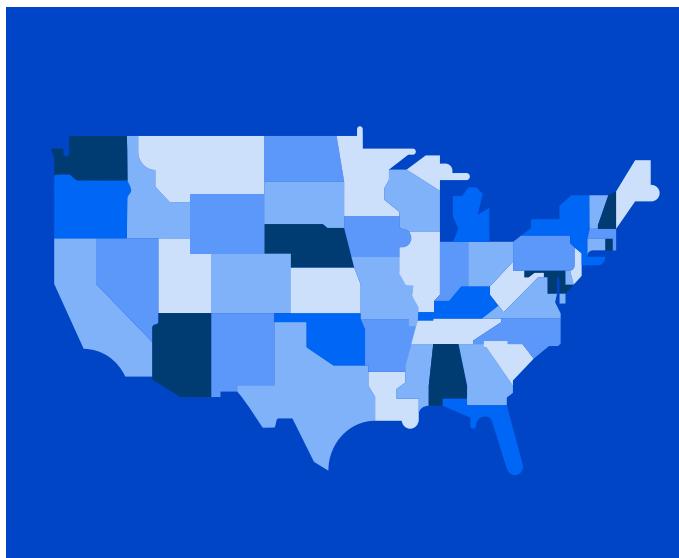
80%

of patients at diabetes management clinics showed improvement in diabetes scores.

Insights to improve our nation's health

[America's Health Rankings](#), produced by the United Health Foundation, is the longest-running state-by-state analysis of the nation's health, providing important insights into the health of various populations, including [older adults](#), [women and children](#), and [veterans](#). In partnership with the American Public Health Association and the CDC Foundation, this distinctive online platform engaged with nearly 1.3 million users in 2022. Policymakers, health officials and researchers use these reports to better understand the specific health concerns in their communities. The data also informs UnitedHealth Group's own programs and community investments.

The [2022 Annual Report](#) represents the platform's broadest portrait to date of the COVID-19 pandemic's impact, including findings from an in-depth survey on COVID-19, which identified concerning health disparities by race and ethnicity across nearly all areas of health and well-being.



“Health is like the foundation of your house. When it’s cracked, everything else is in jeopardy. What America’s *Health Rankings* gives us is the landscape of those cracks in our foundation; where they are, how bad they are, and then what we need to do to fix them.”

**Brian Castrucci, President and CEO,
de Beaumont Foundation**

Making a difference in communities around the world

We support our employees by providing dedicated opportunities for team members to make a tangible impact, either through employee giving or volunteering.

We match employee contributions – dollar for dollar – to the eligible community organizations of their choice, and we reward employee community volunteer service by awarding employees who volunteer 30 hours per year with a \$500 grant to the community organizations of their choice.

We are also dedicated to supporting communities around the world during times of need. The United Health Foundation donated \$1 million to help residents of Florida recover and rebuild following Hurricane Ian, and \$200,000 to help residents of Puerto Rico by providing emergency medical supplies and supporting health clinics following Hurricane Fiona.

Recovering from Hurricane Ian

Kim's story

Through our employee assistance fund, United for Each Other, our employees helped over 400 of their colleagues, like Optum employee Kim Donato, recover from a natural disaster or other qualifying catastrophic event in 2022. Kim received support after Hurricane Ian struck Florida in September, forcing her to evacuate due to significant flooding.

"The hurricane forced our family of five and all of our animals to evacuate for a month. When we finally returned, our home needed major repairs. The walls, windows, doors, flooring, bathrooms, kitchen, appliances, roofing, air conditioning, fencing and electrical wiring all had significant damage and needed to be repaired or replaced. We slept on air mattresses while our home was repaired.

"At a time when we needed support the most, United for Each Other helped us with immediate and emergency needs like clothing, pillows, blankets, food and financial assistance.

"The good news is our home will be completed soon – hopefully before the next hurricane season – which will be a dream come true for the entire family."



"I was taken aback by the generosity and felt extremely proud to work for such a caring organization."

Healthy environment

A close-up, low-angle shot of a young girl with dark hair tied back, wearing a grey hoodie and light blue pants with black polka dots. She is crouching in a sunlit grassy field, pouring water from a clear plastic bottle onto a small cluster of green plants growing in the grass. Her hair is blowing slightly in the wind. The background is blurred green grass.

A healthy planet is the foundation for a healthy society. We are working to keep the communities around us sustainable, viable and healthy.

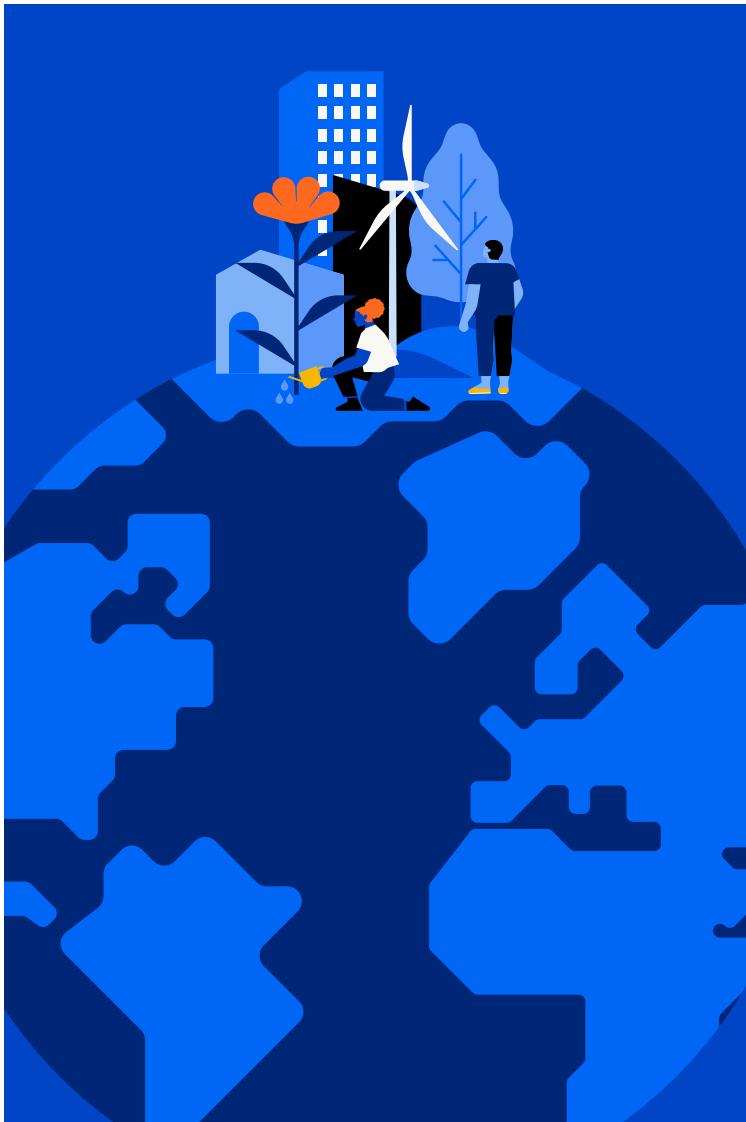
What we're focused on

- Accelerating our path to net-zero.
- Managing weather-related risks.
- Reducing waste, water and paper.

Climate change has clear public health implications. Research shows a changing climate heightens exposure to extreme heat, poor air quality and extreme weather events. Such environmental conditions increase health risks like respiratory infections, heart disease and mental health disorders.

While every person is impacted by the health of our environment, communities of color, low-income populations, children and older adults are among those most likely to live in poor environmental conditions, which cause or worsen negative health effects – exacerbating existing health inequities.

Our company's [strategic growth priorities](#) are intrinsically tied to the well-being of the population and the planet. Preventing disease and improving health outcomes can help reduce energy, waste and water-intensive hospital care. Deploying technologies to modernize, streamline and simplify the health system can reduce the use of paper and improve efficiency. We strive to build a modern, high-performing health system for the benefit of not only the people we care for but also the world we live in.



Charting our path to net-zero

Recognizing the effect climate change has on human health, we are minimizing our environmental impact with long-term commitments designed to reduce our carbon footprint over the next several decades.

In 2022, our overall emissions increased, due largely to the operations and square footage of acquired businesses. We also saw an increase in employees returning to work sites, which drove on-site electricity usage. We are considering both areas as we implement our decarbonization strategy. As part of our net-zero commitment, we intend to support the development of additional renewable energy sources, as well as directly generate renewable energy to power our operations, when possible. Simultaneously, we are initiating energy efficiency improvements at key sites within our footprint. We expect gradual reductions in total emissions while these actions are being implemented.

Our commitment

Operational net-zero by 2035, with 60% scope 1 and 2 reduction and 100% renewable energy by 2030

About our commitment

We are committed to reducing scope 1 (direct emissions; e.g., fuel burned from company vehicles) and scope 2 (indirect emissions; e.g., purchased electricity) emissions by 60% against our 2021 baseline by 2030. Operational net-zero involves reducing these emissions to as close to zero as possible, with minimal use of offsets. Achieving 100% renewable energy involves implementing solutions to source renewable energy for our entire operations.

Our progress

We have seen a 4.7% increase in emissions in 2022 due to growth, largely through mergers and acquisitions, and increased site occupancy post-pandemic. We have focused on building a roadmap to increase energy efficiency and pursue generation of new renewable energy.

Why this is important to us

Rising levels of greenhouse gas (GHG) emissions can cause or exacerbate a wide range of health problems, including heart and kidney disease, respiratory illness, injuries and premature death related to extreme weather events, threats to mental health, changes in the distribution of food and infectious disease. These health effects disproportionately affect those who are most vulnerable and disadvantaged.

How we're delivering on our commitment

Our strategy relies on direct mitigation of global emissions. This approach prioritizes reducing energy consumption within our operations while improving energy efficiency and transitioning to renewable energy sources.



The growing threat of climate change drives our focus on reducing our carbon footprint as we work toward net-zero.

In June 2022, we committed to the Science Based Targets initiative (SBTi) Net-Zero Standard, a set of criteria based on the need to limit global warming to 1.5 degrees Celsius. As part of our commitment (including our scope 1, 2 and 3 emissions), we are assessing carbon sources and measuring the most significant emissions contributors, identifying opportunities and strategies to increase energy efficiency, shifting to renewable energy sources, and addressing emissions in our value chain.

The full impact of any organization's GHG footprint goes beyond what the organization itself produces. This is now reflected in our scope 3 assessment, which measures emissions from upstream sources such as purchased goods and services and downstream sources such as our investments. Measuring scope 3 emissions provides a more complete picture of our GHG emissions across the full scope of our business and informs our approach to net-zero emissions through our external partnerships as well as our internal operations.

Though numerous energy efficiency, renewable energy and other emissions reduction efforts are underway, our primary focus areas in 2022 were:

1. Completing measurement of the most significant contributors to our value chain emissions (scope 3) for the first time.
2. Developing plans to strategically enable us to achieve our goals.

Our efforts focused on laying the groundwork for major reductions in our emissions and use of resources in the years ahead. This includes assessing the full breadth of our direct and indirect emissions, supporting the global energy transition, developing new contracting standards, and completing other formative work. While we expect to see increases across many of our environmental metrics over the short term as our company grows, the approaches we are formulating today are being designed to dramatically reduce our environmental footprint over the next seven to 20 years.



Advancing energy efficiency

Our first step to net-zero is reducing our energy use, recognizing the cleanest energy is the energy we don't use. This in turn reduces the volume of energy we require. We are scaling solutions that reduce energy consumption in our entire real estate footprint – ranging from data centers and pharmaceutical distribution centers to clinical care facilities. This approach includes new construction projects, renovations, collaboration with landlords and employee behavior programs.

In 2022:

- We initiated a Building Management System (BMS) pilot to support the diverse and extensive network of properties in our portfolio. Where deployed, this BMS has the potential to reduce energy consumption by up to 20% over previous systems and provide enhanced operational reporting to drive future energy reduction.
- In San Antonio, we are pursuing WELL certification for our two-building, 352,000-square-foot WellMed campus, where the first building is now complete. WELL is a performance-based system for measuring, certifying and monitoring features of the built environment that impact human health and well-being.
- In our Ireland office, we decreased internal nighttime lighting, which is expected to save 5,000 kWh per year.
- We continued to invest in energy efficiency projects, including LED fixture upgrades and HVAC system replacements.

We are working to establish global sustainability standards, which can be used to guide leasing, renovation and new builds.

Transitioning to renewable energy

In 2022, we honed our roadmap for identifying and scaling our transition to renewable energy sources so we could most effectively decrease our GHG emissions and help improve the health of the communities where we operate.

At our Optum headquarters in Minnesota, we are installing on-site solar panels, with project completion expected in summer 2024. Once operational, this project is expected to meet approximately 50% of the site's energy needs.

To introduce renewable energy across our broader portfolio, we have actively been exploring virtual power purchase agreements (VPPAs), which would allow us to apply renewable energy credits across our portfolio while also supporting the generation of new sources of renewable energy. Our company's ability to guarantee demand for renewable energy makes it possible to justify the construction of additional renewable energy projects that can begin operating quickly, which in turn helps accelerate development of the green energy industry and increases the availability of renewable energy on the grid. We are considering the use of VPPAs as a key component of our zero-carbon strategy, since a significant portion of our real estate is leased and therefore cannot be retrofitted.

After our initial work to optimize energy efficiency, generate renewable power on-site and execute our first VPPAs in the U.S., we plan to continue exploring other renewable energy procurement options globally.

Piloting electric vehicles

Although our fleet is a small part of our overall emissions footprint, we are working to identify and support opportunities for electrification wherever possible. Our vehicles are commonly used to deliver medications, conduct wellness visits with Medicare members, transport members to medical appointments and maintain our facilities.

As a first step, we initiated a pilot study to test the feasibility of issuing electric vehicles to clinicians who travel to patient homes as part of their work. Learnings from this study will help us clarify infrastructure needs, procurement considerations, operational impacts and additional expansion opportunities as we move forward.



“Our work in 2022 paves the way for us to deliver on our net-zero commitment and transition our company to renewable sources of energy – setting us on a path to better protect our environment and promote the health of communities where we live and do business.”

Dave Black, VP of Facilities and Operations, Real Estate Services, UnitedHealth Group

Assessing value chain emissions

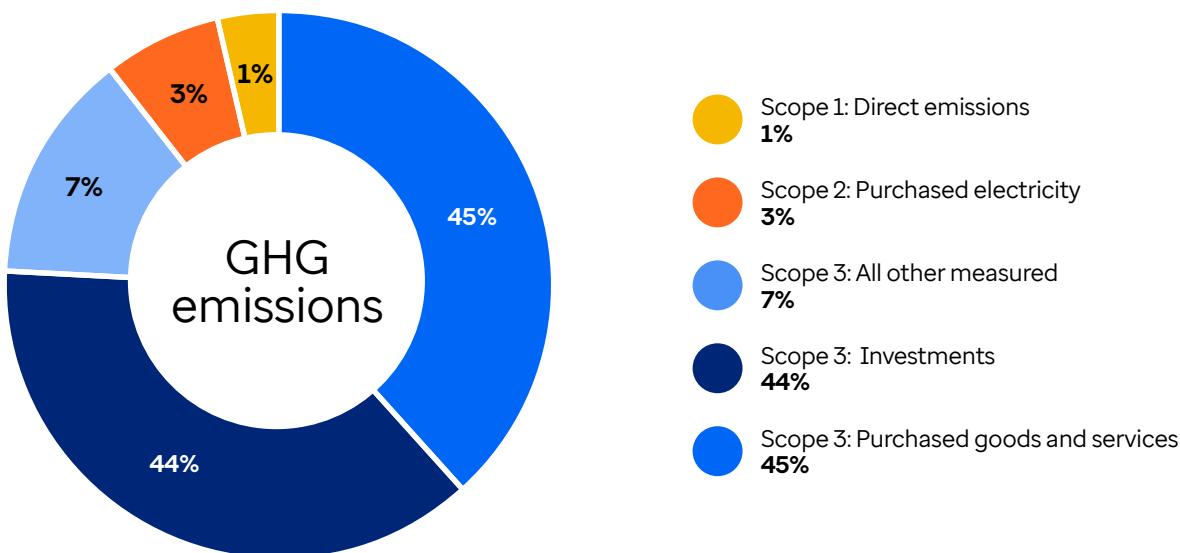
Because scope 3 emissions represent the bulk of our emissions, it is imperative for us to better understand and evaluate the emissions in this category. In 2022, we completed our first-ever scope 3 assessment, which identified the most significant categories of emissions from both upstream sources – such as purchased goods and services, waste generated in operations and employee commuting – and downstream sources, such as investments.

Our assessment showed two areas of emissions account for the vast majority of our GHG footprint:

- Purchased goods and services
- Investments

With this scope 3 assessment, we are now better able to prioritize opportunities for action and work toward an SBTi-approved emissions target, which will be reviewed by SBTi and shared in our 2023 Sustainability Report.

To see our complete inventory of emissions, please see our Performance Data, starting on [page 83](#).



Engaging our suppliers

To better understand the emissions impact of our purchased goods and services, we piloted the CDP Supply Chain program (formerly Carbon Disclosure Project), which supports companies' disclosure of their environmental impact. We requested CDP Climate Change Assessments from some of our largest suppliers to learn more about their sustainability efforts. We had an overall response rate of 83%, with 81% reporting emissions-related goals.

In 2023, we will be:

- Requesting select suppliers (representing 80%-85% of our 2021 baseline supply chain emissions) complete the CDP Climate Change Assessment, which will help us improve our emissions calculation and assess supplier performance when making procurement decisions.
- Engaging targeted suppliers to track, report and commit to reducing their carbon footprint.
- Updating procurement policies, employee and supplier trainings, and other procurement practices to reflect our ambitions.

See the [supply chain management](#) section for more information on risk management and strategy development.

Assessing our financed emissions

Using the Partnership for Carbon Accounting Financials (PCAF) methodology, we measured our financed emissions for certain asset classes such as corporate bonds, loans, equities and sovereign debt. Generally, the PCAF methodology aims to derive a financial attribution factor for each in-scope investment in UnitedHealth Group's portfolio. The attribution factor is then multiplied by the specific in-scope investee's reported or estimated emissions to determine UnitedHealth Group's financed emissions. Our financed emissions are largely tied to holdings in the energy, industrials and utilities sectors.

Our diverse, high-quality investment portfolio is well-positioned to see declines in our financed emissions in the coming years.

In 2023, we will be:

- Developing temperature rating targets and a power intensity target for in-scope assets aimed to achieve a glide path to net-zero, including determining a specific target year.
- Reducing financed emissions guided by an active approach with investment managers to invest in companies committed to emission reductions without compromising portfolio diversification, liquidity and performance. We do not intend to adopt exclusionary provisions limiting investments in sectors.
- Identifying attractive direct investments in renewable energy projects to supplement our investment portfolio and to more directly support renewable energy projects on a larger scale.
- Reviewing and updating our investment policy guidelines.

The target-setting process will combine multiple strategies to achieve net-zero in a balanced way as we continue to prioritize the preservation of capital and earn appropriate risk-adjusted returns.

Leading collective action to decarbonize the health system

We recognize the critical need to reduce the carbon footprint of the U.S. health care system, which is responsible for 8.5% of U.S. carbon emissions. We are helping to lead collective action through the [National Academy of Medicine's Action Collaborative on Decarbonizing the U.S. Health Sector](#), which is co-chaired by our CEO. This public-private collaborative seeks to address the health sector's environmental impact while strengthening its sustainability and resilience.

Managing weather-related risks

Our integrated, multidisciplinary process helps us to identify, assess and manage risk and ultimately minimize disruption for the people who count on us.

In 2023, we aim to deepen our analysis of climate risks and develop scenarios to assess the impact of risks over the short, medium and long term.

Managing operational impacts

Our weather risk mitigation plan stretches across all our businesses and includes operational redundancies to help ensure continuity of our business operations. We have also identified critical sites most susceptible to utility outages and weather-related impacts and have put in place backup emergency systems.

Providing support during extreme weather events

Extreme weather events can directly impact our customers, members, employees and providers. Depending on the event, our response may include:

- Allowing early refills of prescription medication.
- Easing restrictions on use of out-of-network providers.
- Facilitating early replacement of durable medical equipment.
- Making the Optum Crisis Counseling line available to the community.
- Arranging for evacuation of members who are especially vulnerable due to disease or frailty.



When Hurricane Ian struck in late September 2022, we took immediate action to help ensure the safety and well-being of affected communities.

- Within 96 hours of the event, we coordinated with state and local partners to stand up nine mobile response units in the hardest-hit, lowest-resourced communities. These trailers provided medical care, distributed food and water, and offered Wi-Fi access, which was otherwise unavailable. Thanks to support from the WellMed Charitable Foundation, these services were open to anyone at no cost. To further improve access to medication, we also provided Genoa Pharmacy with an additional unit for use as a mobile pharmacy after their facility incurred damage during the storm.
- Our clinicians and nurses went door to door to provide care for those who were unable to get to a care center.
- Employees who experienced personal hardship received financial support through the company's United for Each Other program.

Reducing waste, water and paper

Minimizing our resource utilization and waste production is a fundamental aspect of good environmental stewardship.

We are working to reduce our footprint by transitioning to a digital-first health system with less paper usage, piloting new and innovative approaches to long-term waste management and prevention, and reducing our water usage in water-stressed regions of the world.

Reducing paper through modernization

As we continue to modernize our processes and technologies to create simple, seamless consumer experiences, we have made significant progress toward our goal of reducing paper usage across the health system.

We started by identifying simple changes with an immediate impact, such as shifting provider groups to digital rather than paper-based communications for activities like prior authorizations and claims decisions, as well as eliminating unnecessary print marketing materials. As one example, we have typically included an envelope with every pharmacy order we sent out. A newly developed system automatically identifies and includes an envelope only on orders where there is an invoice with a balance due. The result: more than a 90% reduction in the volume of envelopes used, which is estimated to save more than 35 million envelopes in 2023.

Beyond the environmental impact, reducing paper usage has also improved the speed and simplicity of our communications with consumers and providers by replacing paper-based communications with digital tools. In 2022, 91 types of member and provider transactions were digitized or enhanced, leading to faster turnaround times and reductions in wait times for some claims reimbursements from 10 days to 24 hours. In addition, provider digital document delivery was up 200% over 2021, with over 1.6 million providers enrolled in e-delivery. About 98% of total claims on our core platforms were submitted digitally.

We will continue to build on these efforts in the years ahead and work with a diverse set of stakeholders, including employers, consumers, providers, health equity advocates and other players in the health care industry. We are focused on addressing regulatory requirements, which currently account for roughly 40% of our paper use. We are working toward providing even more (and better) paperless experiences for consumers and providers – a dual-purpose goal designed to minimize use of energy, water and raw materials while creating a better consumer experience.

1B
pieces of paper saved in 2022.

24M
envelopes saved in 2022.

24%
reduction in inbound paper volume
(e.g., claims appeals, payments, etc.).

Reducing waste

We are dedicated to managing and preventing waste by piloting new, innovative solutions designed for long-term waste reduction. We take a multidimensional approach to minimizing our environmental impact through ongoing management of our various waste streams, including municipal, construction, electronic, hazardous and regulated medical and pharmaceutical waste. Our 2022 scope 3 assessment included an enterprise-wide, waste-associated inventory, which will help inform our waste management and reduction strategy in 2023 and beyond.

In 2022, we implemented several new pilots to reduce waste and improve patient care.

- We converted prescriptions to larger pack sizes, which reduced our plastic bottle usage by approximately 546,000 bottles in 2022.
- We used insulated mailers to ship medications requiring refrigeration, which in turn reduced our gel pack usage by eliminating 489,000 unnecessary coolers.
- Eight sites in India established on-site composting of organic material, which has diverted 129,254 pounds of waste so far.
- We established a zero-landfill project in two 150-bed hospitals in Brazil.

In 2023, we plan to implement new solutions to improve efficiency and reduce waste, including reducing single-use plastic, exploring opportunities to expand composting and recycling services, evaluating design and construction processes, and continuing to improve waste data collection.

Conserving water

We are working to reduce excess water consumption – a critical and increasingly worrisome global health issue – by taking steps to help ensure our facilities use water as efficiently as possible, which is particularly important for water-stressed and water-sensitive locations across the globe.

We continue to advance plumbing and irrigation projects and sustainable landscape projects aimed at reducing our water usage. After implementing a holistic water-tracking program for our India real estate portfolio in 2021 to remotely measure, monitor and influence water usage, we found about 47% of total water usage is currently treated/recycled water instead of fresh water. In 2022, we expanded this effort to add water meters in our five sites in the Philippines.

In 2023, we plan to create a holistic approach to water conservation across the enterprise, including creating design guidelines for water efficiency and water quality.

1.2M

gel packs eliminated in 2022
through the use of insulated mailers.

1.7M lbs

of waste diverted by recycling
electronics like laptops and PCs.

68%

of sites⁶ have a Water Use Intensity rating below EPA guidelines.

6. Includes integrated sites where water is tracked on utility bills.

Our people and culture



Building an innovative, diverse and inclusive culture to support our people and attract the best talent.

What we're focused on

- Advancing an inclusive culture where team members are empowered to do their best work, where diversity fuels performance, and where we leverage our collective power to create greater impact.
- Enabling employees to be their best in an office, a clinic or at home by offering robust resources and programs designed to improve holistic well-being through a unified enterprise approach.
- Developing and growing our talent through a human-centered approach by incorporating employee listening, leader development learning, and career growth and mobility.

We are a global team – including doctors, nurses, technologists, data scientists, care advocates, administrators, researchers and more – united in our collective power to make an impact and focused on caring, connecting and growing together. We know the extraordinary happens when we value, include and learn from diverse people and perspectives.

To help ensure our people flourish, in 2022 we advanced our approach to attracting, developing and retaining the world's best diverse talent to effectively support our [strategic growth priorities](#). Our ability to expand value-based care models and build innovative health benefits relies on diverse clinical perspectives to help address health disparities in underserved populations. Supporting the well-being of our workforce builds a culture where people feel empowered to innovate, creating new health technology solutions to drive a modern, high-performing health system and a healthier environment.

100%

rating in the Human Rights Campaign Foundation's 2022 Corporate Equality Index.

39K

employees participating in Employee Resource Groups (an increase of 17,500 from 2021).

Recognition

Forbes' list of America's 500 Best Large Employers for 2022.

Named one of the best places to work for disability inclusion in 2022 by the Disability Equality Index® (three consecutive years).

2022 Military Friendly® Employers list (seventh in the U.S.) and a Top Ten 2022 Military Spouse Friendly® Employer.

2022 Business Group on Health Best Employers Award for Excellence in Health and Well-being (11 consecutive years).

Advancing diversity, equity and inclusion

Creating an inclusive culture that celebrates our people, ideas and experiences.

Our team must reflect the diverse communities we serve, and our commitment to diversity, equity and inclusion (DEI) is inspired by and grounded in our company values. By hiring and retaining the best talent with diverse and innovative perspectives and creating a culture of belonging and inclusion, we can grow our business and better serve our customers' needs.

In 2022, we focused on three strategic objectives to advance DEI in our leadership, systems and culture:

- Increasing the diversity of our workforce, especially among the senior levels of our organization.
- Understanding the lived experiences of our employees, particularly where there are differences, so we can learn how to better support their work and experience.
- Equipping and educating leaders and employees with tools to create and contribute to a more inclusive environment.



“DEI is business critical. When we embrace a range of people and perspectives, our individual and collective contributions are magnified.”

Joy Fitzgerald, Chief DEI Officer, UnitedHealth Group

Increasing the diversity of our workforce

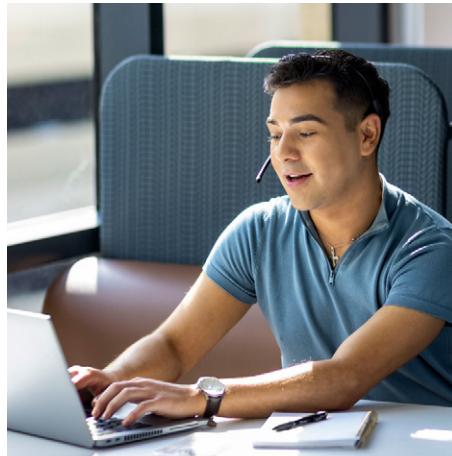
We approach diversity, equity and inclusion as a business priority. To date, we have achieved 40% representation for women in top management and are working to increase racial representation in leadership. Black/African American, Hispanic/Latino and Asian employees are key areas of focus in our future talent strategies as we work toward increasing racial representation.

We engaged in an independent third-party assessment of our workforce policies, practices, leadership and systems to help us better understand the experiences of women, Black, Asian and Latino employees within the organization, identify potential gaps, and provide recommendations to better serve these groups. While we have more to do, 2022 employment data show people of color constitute 45% of our workforce and 31% of our management positions.

The Global Diversity, Equity and Inclusion Office leads the enterprise DEI strategies, prioritizing diversity, understanding employee experiences, educating leaders, engaging employees and increasing psychological safety.

To increase diversity in our workforce, we established a dedicated DEI recruiting function to help ensure women, people of color and members of other underrepresented groups – including LGBTQ+ individuals, military members and veterans, and persons with disabilities – are represented in candidate talent pools, the selection process and interview panels. These and other cross-functional DEI efforts helped us achieve our highest recruiting numbers for diverse demographics, with 1,500 interested individuals joining UnitedHealth Group.

We also launched the Diversity, Equity and Inclusion Executive Sponsorship program, an effort to increase the diversity of our underrepresented groups by offering experiential learning opportunities and help them build relationships in the organization. Achieving a 96% retention rate in its first year, the program gives participants the opportunity to learn and shadow how executives make decisions and lead.



Maintaining pay equity

We are committed to and continue to prioritize [pay equity](#) for all employees. Fair and equitable compensation practices within a pay-for-performance framework support our culture and are critical to achieving our mission.

We continue to work with independent, third-party experts to perform reviews of our compensation practices and evaluate pay equity in several respects, including by gender, ethnicity and race. The most recent review of our integrated workforce completed in 2022 – including our global operations – continues to indicate women earn \$1 for every \$1 men earn when performing similar work at similar levels. In addition, employees of color in the U.S. continue to earn \$1 for every \$1 white employees earn when performing similar work at similar levels.

To prevent pay inequities at hire, we do not ask candidates in the U.S. about salary history during the hiring process. This practice helps us remove any bias that can come from crafting initial compensation packages based on salary history.

Understanding employee experiences

We strive to understand the lived experiences of our employees to better support their work experience. Our DEI Employee Experience Research Initiative partners with a research think tank to provide a deeper understanding of employee experiences and insights as well as identify meaningful solutions to advance DEI through stakeholder interviews, focus groups, employee journaling, and quantitative and qualitative surveys.

In June 2022, we hosted our first-ever DEI Innovation Lab, an enterprise-wide, design-thinking experience seeking to better understand the experiences of our employees. More than 100 employees participated in this opportunity to provide insights and create solutions. The event resulted in ideas for increasing leadership accountability, improving psychological safety in the workplace, making talent management work for everyone, and adding enhancements to help our employees feel valued, seen and rewarded.

Our Inclusion Index – embedded into our employee surveys – helps us better measure and understand employee sentiment related to fairness, affirmation, safety, identity and connection. We leverage insights to improve recruiting, talent development and employee retention. Additionally, our DEI Employee Research helps us better understand opportunities to improve, learn and grow.

We are transforming and empowering our Employee Resource Groups (ERGs). We relaunched our ERGs to play a more vital role in talent strategy, provide insights into diverse communities and collaborate on solutions to challenging business problems. We also saw membership of our ERGs grow 81% over 2021, with record attendance at events. We continue to see growing engagement in ERGs in 2023.

We are advancing and empowering our leaders. In 2022, we launched eight enterprise-wide Leader Advisory Councils (LACs), connecting more than 200 diverse leaders across the enterprise. This included leaders from the Women, African American, Hispanic/Latino, Asian, LGBTQ+, Disability Inclusion, and Military, Veteran & Spouses workforce segments. We will launch a Global LAC in 2023. The LACs support talent engagement, provide mentorship, and create enterprise collaboration and community.

39K

employees participating in Employee Resource Groups in 2022 (an increase of 17,500 from 2021).

Building an inclusive and innovative environment

Our comprehensive Diversity, Equity and Inclusion Learning Strategy elevates DEI as a core tenet and capability to advance a culture of inclusion and belonging where everyone can be themselves and do their best work. We provide education for our leaders and our workforce on how to create and contribute to an even more inclusive environment. From immersive digital and community learning experiences to podcasts, webinars and a monthly DEI newsletter, these learning opportunities are designed to build inclusive leadership behaviors, develop personal awareness, examine bias, promote allyship, and grow resilience and resourcefulness. We promote education, ongoing dialogue, connection and awareness to mitigate the effects of bias.

We launched a program to targeted employee groups to deliver expert-curated DEI learning paths, as well as the option to create a customized learning program offering DEI foundational knowledge.

7.8K+

employees participated in live learning sessions on core values, leadership, well-being, and diversity, equity and inclusion.

Partnering to support diversity

In 2022, we expanded our DEI strategy to include more than 25 national partners. This broad range of partners helps support the development and mentorship of diverse talent pipelines and connects new sources of talent to career opportunities in our workforce.

We support and cultivate future talent success through our partnerships:

- Atlanta University Center Consortium (AUCC) Data Science gives graduate and undergraduate students attending historically Black colleges opportunities to achieve their career goals.
- Disability Blender Consulting Services helps people at all experience levels find a career in which they can thrive.
- Hispanic Serving Institution Collaborative (HSI) provides pathways for career success to underserved university students.
- Out For Undergrad helps LGBTQ+ undergraduates kick-start their career journey.
- Rewriting the Code supports women in tech, especially Black and Latina women.

We continue to strengthen and build our relationships with early career DEI organizations and minority-serving institutes to meet, engage and hire talented college students.

Other DEI partnerships

- Association of Latino Professionals For America (ALPFA)
- Black Enterprise Executive Leadership Council (ELC)
- HBCU Initiative – Morehouse School of Medicine
- INROADS
- National Black MBA Association (NBMBAA)
- National Association of Asian American Professionals (NAAAP)
- National Black Nurses Association (NBNA)
- National Association of Hispanic Nurses (NAHN)

We recruit transitioning service members, veterans and military spouses through programs such as the UnitedHealth Group Military Fellowship Program (MFP), which provides career skills, training and workforce reintegration in partnership with the Department of Defense SkillBridge program. The MFP has resulted in a 68% conversion rate from fellow to full-time employee and an 86% retention rate. About half of the full-time employee conversions are from underrepresented populations. This program has helped cultivate a sense of community and belonging, which supports our enterprise DEI strategy.

Through this program and enterprise leadership engagement, UnitedHealth Group has been recognized for three consecutive years as a Top 10 Military Friendly Employer and made the Forbes list of America's Best Employers for Veterans for the first time.

Creating a sense of belonging

Dr. Poole's story

As chair of the African American ERG, Dr. Kenneth Poole is championing the voices of African American employees to promote a culture of inclusion and belonging and help UnitedHealth Group achieve its mission. As UnitedHealth Group's chief medical officer for clinician and provider experience, he is focused on fostering clinician connectedness – which provides him with a unique perspective around building community, culture and professional fulfillment.

"When people are in any type of minority group within a large organization, finding a place of belonging is difficult, but it's something that is needed for people to be comfortable enough to do their best work. In that sense, ERGs are an essential function of the business. They give a group of people – who have traditionally been on the outside of corporate spaces – a sense of inclusion and an opportunity to build cross-enterprise connections."

"If you look at representation, outcomes and disparities, everything is interrelated. For a health care organization like ours, we need to reflect our communities. Leading an ERG is my opportunity to share the lessons and expertise I've gained to positively impact professional and leadership growth for the African American population within our company. That's where I'm really hoping to move the needle – in creating opportunities and spaces for ongoing development – so we can continue to effectively meet the needs of the people we serve."



"ERGs are an important resource for our company as a whole, and we are better for their existence."

Employee health and well-being⁷

Investing in our employees by creating a culture where they are energized and empowered to reach their full potential.

An integrated approach to well-being

Healthier lives and a better health system start with our own employees. We aim to make healthy living easier by helping to ensure employees have the information and resources they need to take control of their total well-being both at work and at home.

Enhancing financial security

In the past year, we have significantly invested in compensation and benefit programs to reward and recognize employees.

- As part of our continued efforts to enhance our health benefit offerings, we increased the amount of incentive dollars available to employees enrolled in eligible medical plans in 2022 and have made several program enhancements in both 2022 and 2023 to make it easier to earn those dollars. Also, despite increasing health care costs, we did not increase premiums for UnitedHealth Group medical, dental and vision plans offered to employees in 2023.
- We eliminated out-of-pocket costs for several preferred prescription drugs – including insulin and others used to treat emergencies such as severe allergic reactions, hypoglycemia, opioid overdoses and acute asthma attacks – for U.S. employees enrolled in many of our medical plans.
- We made it possible for employees to meet with financial coaches as often as needed to tackle everyday financial challenges or to discuss investments and retirement planning.



⁷The employee benefits described are available to certain U.S.-based employees depending on their legal employer, business unit, geographic location and job classification, among other factors.

Supporting healthy families

In 2022, we began offering a new maternity and infant care program providing personalized care and support for pregnancy, postpartum and return-to-work needs. It also includes 24/7 access to a dedicated care advocate and more than 30 types of specialists.

Our expanded mental health support for families with children ages 1-17 provides a whole-person, whole-family approach to mental health and includes access to a specialized benefit, offering a combination of coaching, therapy and medication. Practitioners work in multidisciplinary teams, using a virtual-first approach, to address the unique needs of each child/teen and family.

We offer adoption assistance, including reimbursement of up to \$10,000 for full-time employees and \$5,000 for part-time employees for eligible expenses for each adopted child.

Our expanded paid parental leave provides both primary and non-primary caregivers up to six consecutive weeks of paid leave upon the birth of a child or the placement of a child for adoption or foster care. This benefit can be used flexibly to support a continuous full-time leave, supplement a short-term disability claim, allow a reduced work schedule, and/or extend a leave beyond Family and Medical Leave Act (FMLA) requirements.

Paid caregiver leave offers two weeks of paid time off to care for a child, parent, spouse or domestic partner who has a serious mental or physical health condition.

We offer part-time working options for UnitedHealth Group employees, including when returning from leave.

We provide support for nursing mothers, including access to private lactation spaces while on-site, time off during the day to pump, and no-cost access to Milk Stork, a service provided for mothers traveling on company business.

Family support benefits include Back-Up Care, which helps employees confidently balance work and family responsibilities via high-quality center and home-based child care or adult/elder care (subsidized by UnitedHealth Group) to use when regular care arrangements fall through or are unavailable while employees work.

On-site employee clinic services offer convenient health and wellness care at many locations. Many employees and their families also have access to virtual same-day urgent and primary care through our medical benefits.

1.3K

employees enrolled in our maternity and infant care program in the first four months after launch.

78%

of those enrolled in the program received care during their pregnancy.

Personalized care for what matters most

Dominique's story

During her second pregnancy, Dominique Donaldson, LVN, a service coordinator with UnitedHealthcare, was anxious about adding a second child. Her first child was 19 months old, and she wondered how a new baby would impact the family's dynamics and her mental health. She turned to a maternity and infant care program available to UnitedHealth Group employees enrolled in eligible medical plans.

"Being able to speak to mental health providers has been very helpful in preparing my mind for what is about to happen and how to communicate those feelings. I also utilized maternity and infant care resources to speak with an OB-GYN, a birth-planning specialist and a doula, both as an individual and also as a couple with my husband."

"The mobile app has equipped me with the tools and information needed to speak with my provider about my concerns. I feel empowered and confident when discussing my concerns and options available for our care."

"The fact that I can access providers – typically the same day – face to face and ask questions that are important to me has been such a blessing. I am so grateful to have this available for myself and my family."



"The providers have been amazing, patient and understanding. I wish this program had been available during my first pregnancy."

Focusing on employee balance and resilience

Our way of working includes three models – hybrid, telecommute and on-site – to promote a collaborative and inclusive culture while balancing the needs of the business with employee choice and the increased preference for flexible working arrangements.

We expanded our employee assistance program (EAP) to provide even more ways to access services – including up to 10 face-to-face counseling sessions and a new mobile app. Our EAP provides a wide range of support, including 24/7 access to a life coach and a variety of online resources. EAP services include parenting resources, work/life concierge, backup child and elder care, access to a money coach and free in-person counseling sessions. In the four months after increasing the number of free EAP visits, cases were 34% higher compared with the same time frame during the previous year.

Accessing care in convenient and flexible ways is important to our employees, so we added new programs like virtual primary care, virtual behavioral health coaching, at-home biometric screenings, virtual physical therapy, and a digital second medical opinion option to our medical plans.

Addressing burnout

We have a group of leaders from across the enterprise to combat the important issue of employee burnout. This work has increased discussions about the drivers of burnout as well as opportunities to mitigate burnout and its effects. Pilot programs include leader trainings, tool/platform enhancements and employee appreciation opportunities. While we are early in the journey, we are seeing improvements. In 2022, 78% of employees globally reported they are not experiencing symptoms of burnout – a 5.6 percentage point increase year over year.

We also launched the Clinical Burnout Insights (CBI) portal, an AI-based platform that provides medical directors and people partners with consistent data and benchmarking on clinician well-being. The CBI portal has led to more robust conversations about well-being and early identification of our provider employees experiencing burnout.

We offer additional clinician support through programs created by the Center for Clinician Advancement, with the goal of promoting a healthy and happy work environment.

13K

clinicians engaged with programs aimed to promote a healthy and happy work environment, up 50% over 2021.

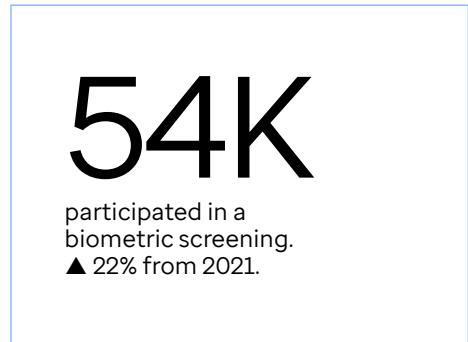
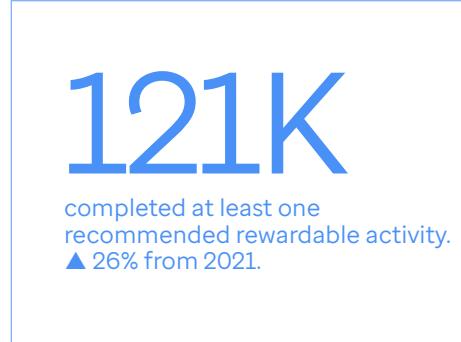


Rewarding healthy actions

Our Rewards for Health program offers personalized recommendations based on an employee's unique health indicators, allowing our employees and their families to earn incentives designed to improve their health and well-being.

In 2022, we increased the amount employees can earn and introduced new ways to earn rewards, making it easier for employees to get the full incentive, resulting in a 147% increase in the average dollars earned compared to 2021. Rewards can be used to offset medical premiums, or deposited into either a health savings account or a Rewards Account to be used for health and well-being purchases. Some employees can earn enough rewards to cover their entire premiums for the year.

Over the past year, 86% of employees agreed UnitedHealth Group cares about their health and well-being. We aim to provide an environment where employees are empowered to be their best, and we continue to see ongoing engagement with the Rewards for Health program resources we provide.



Developing and growing our talent

Achieving our mission and business objectives starts with innovative strategies to support career growth.

From the time someone joins our company, they are exposed to various development opportunities. Purposeful development planning, including experiential learning, formal training and talent mobility, provide a solid foundation that supports continual career growth. Additionally, people leaders have robust learning and development opportunities so they can support their team members and drive our strategic growth priorities.

Evolving how we listen

We are listening to employees more effectively and accurately, using behavioral data – such as turnover, retention and productivity insights – as well as emotional data to better address employee needs and actions. Inclusion and psychological safety scores heavily influence our Employee Experience (EXI) survey results, and we work with leadership to assess pain points and areas for improvement and opportunity. We do this by sharing employee results with designated managers along with a toolkit to help them interpret data, share insights with employees, and create action plans for addressing survey findings on topics like burnout, employee enablement and inclusion.

In 2022, we conducted two EXI surveys to address employee needs and work satisfaction, with a 76% participation rate on average. The strongest and most positive survey responses revolved around inclusion and manager effectiveness across UnitedHealth Group.

We are constantly looking for ways to innovate and improve the way we listen. In 2022, we launched targeted surveys and focus groups, and conducted analysis and precision listening to address employee feedback, improve people's experiences and simplify the way we work. Through our EXI surveys, we can improve employee engagement and experience using real-time feedback and action plans. In our recent EXI surveys, employees reported they are treated fairly at work, leaders care about their well-being, and their ideas and suggestions matter. These strengths align with our work toward enhancing diversity, equity and inclusion across the organization and contributed to the improvement of our score.

253K

employees responded to each Employee Experience survey.

75%

positive employee experience score, up from 72% in 2021.

Developing leaders

Managers and leaders are a critical part of our workforce and are key to driving strategic alignment and building a culture in which employees can thrive. In 2022, we focused on developing programs to equip our people leaders with tools, resources and an aligned vision for more meaningful and productive conversations – which in turn help their team members engage, perform at a high level and advance their own development.

- More than 4,500 leaders participated in a dedicated program focused on preparing and developing diverse talent for future leadership roles, marking an 86% increase in participation compared to 2021.
- Nearly 1,300 new leaders participated in a program created to help newly promoted, hired or integrated people leaders enhance their leadership skills by connecting with other leaders.
- Over 4,000 people were selected for a virtual learning program that challenges our high-potential leaders to immerse themselves in self-directed learning, on-the-job application, enterprise networking and more – a 110% participation increase compared to 2021.
- To enhance leadership development, we dedicated over 83,000 hours of development programming to nearly 20,000 leaders to improve our leadership culture. Over 12,000 leaders graduated from a development program in 2022.
- Our 18-month leadership development experience, designed to prepare a diverse mix of leaders to drive transformative changes in health care, had a total of 50 participants this year – 80% were women and 60% were people of color.
- To provide development opportunities and increase the diversity of underrepresented groups in leadership, we launched the Diversity, Equity and Inclusion Executive Sponsorship program, where participants are exposed to rich networking opportunities, have greater employee visibility and can shadow executive leadership.



Employee growth and talent mobility

Our talent management initiatives support a workplace where employees have a clear understanding of their strengths and capabilities to guide their career journeys. We continued to enhance technology platforms to organize talent data, working across teams and stimulating mobility across the enterprise.

In 2022, we increased employee career mobility through development planning, talent reviews, more frequent discussions to identify high-potential talent, and succession planning to facilitate movement and development experiences for our people across the company.

Our talent management programs continue to expand to broader employee populations to promote a culture invested in and accountable for building a diverse workforce by helping to ensure diverse talent is identified and included in all succession plans. Our approach helped 37,000 employees achieve a promotion in 2022.

- We expanded our tuition reimbursement policy to allow eligible U.S. employees to take classes related to any role across UnitedHealth Group, not just their current one, and receive reimbursement beginning Jan. 1, 2023.
- A total of 2,280 clinicians participated in our mentorship program, which aims to improve retention and engagement, enhance mentor and manager support of career goals, and identify available career paths for clinicians.
- We offer a series of learning opportunities covering topics such as networking, interviewing and resume writing to assist internal employees in their career development. We answer questions, help employees navigate available resources and offer suggestions to help employees succeed in their next career move.
- We offer internal career coaching resources to help employees reach their goals with the help of an internal confidential thinking partner. The coaches encourage employees to reflect upon and discover their own goals, barriers, opportunities and insights.
- In October 2022, we established a learning and development program with its first cohort of high-performing front-line employees from diverse backgrounds. The program team interviewed 122 applicants and 60 were offered placement in the cohort. Sixty percent of the cohort are people of color, 90% are women, and the population spans across 19 states.



Responsible business practices



UnitedHealth Group's governance practices support our mission and serve the needs of the communities in which we live and work.

What we're focused on

- Maintaining strong and effective corporate governance to drive sustained value and respond to the interests of our stakeholders.
- Adhering to our values through compliance and ethics principles, which guide our behavior and help us remain a trusted partner.
- Partnering with suppliers to maximize value in our supply chain and help ensure we buy the right goods and services from the right suppliers for the right price, all in a timely manner.
- Committing to supplier diversity by developing a supplier base reflecting the communities and customers we are privileged to serve.
- Following a framework to help ensure technology, including artificial intelligence and machine learning, is developed, deployed and monitored ethically and responsibly in alignment with our mission.

Our management structure and responsible business practices enable us to help build a modern, high-performing health system. Our principles of ethics and corporate governance outline specific behaviors and responsibilities, which provide the foundation for our actions, influence how we protect entrusted data, guide our responsible use of artificial intelligence and machine learning, and provide the expectations we set for our suppliers. These practices help ensure we are working to achieve our mission with consistency and in alignment with our values and the values of society at large.

Our approach to governance guides and supports [our strategic growth priorities](#). For example, as we deploy new technologies to better serve patients and providers, we are continually evaluating our policies and procedures to help ensure safety, privacy and equity. Similarly, we also review our supplier risk and performance management processes to help ensure our suppliers can meet our sustainability standards and deliver on our values.



Corporate governance

Strong and effective governance practices provide the foundation for our actions and help drive long-term value.

UnitedHealth Group is committed to best-in-class governance practices, which are embodied in our corporate governance policies. Our board has enhanced these policies over time to align with evolving best practices, which drive sustained value and help us respond to the interests of our stakeholders.

Our Governance Committee reviews corporate governance practices at least once per year and recommends modifications for the board's approval to strengthen and contemporize our approach. Additional information on our corporate governance – including policies, board committees and approaches to enterprise-wide risk management – is available in our [proxy statement](#) and on our [Corporate Governance webpage](#).

Board composition

We believe an effective board consists of a diverse group of individuals who bring a variety of complementary skills and a range of both personal and business experiences to their positions. The collective experience of our directors covers a wide range of geographies and industries, including health care and clinical practice, insurance, consumer products, technology, capital markets and financial services, along with roles in academia, corporate governance, government, inter-governmental organizations and business leadership.

The board's diversity is considered in the director nomination process and assessed annually when the board evaluates its overall effectiveness. The board's ongoing review of its composition and succession planning has resulted in substantial refreshment of its members in recent years, including an increase in their diversity of skills, attributes and perspectives. We are committed to actively seeking director candidates from underrepresented communities.

33%

female independent directors
on our board

Upon the election of the 2023 director nominees, our board includes 33% female independent directors and 33% racially/ethnically diverse independent directors. To promote optimal board oversight and to help ensure our board members have adequate time to fulfill their duties as UnitedHealth Group directors, they may serve on no more than three other public company boards, and our CEO may serve on no more than one other public company board.

We strive to maintain a balance of tenure on the board. Long-serving directors bring valuable experience with our company and familiarity with the successes and challenges the enterprise has faced over the years, while newer directors contribute fresh perspectives. Upon the election of our 2023 director nominees, the average tenure of our board members will be less than seven years.

Independent board leadership is another important component of our governance structure. We separate the positions of CEO and chair, and our bylaws require the company to have either an independent chair of the board or a lead independent director. The duties for our lead independent director are outlined in our Principles of Governance. Michele Hooper, a nationally recognized corporate governance expert, has served as our lead independent director since October 2021.

Shareholder rights

We value and respect the rights of our shareholders and have implemented strong shareholder practices. Our directors are elected annually by a majority vote of our shareholders. Each share of common stock is entitled to one vote, and UnitedHealth Group has no dual-class share structure and no supermajority shareholder approval provisions.

We do not allow shareholders the right to purchase additional shares at a discount in the event of a takeover attempt. Shareholders can call a special meeting and act by written consent. Our bylaws also contain proxy access with standard market provisions. Directors are subject to a conflicts of interest policy and tender an irrevocable offer to resign if they do not receive majority support. If majority support is not achieved, the board will accept, absent a compelling reason.

Say on Pay

Shareholders provided strong support of our Say on Pay proposal in connection with our 2022 annual meeting, with 94% of shares voting in favor of this proposal. In subsequent engagements, we continue to hear shareholders indicate their strong support for the overall design of our executive compensation program as well as our overall pay-for-performance philosophy.



Data privacy and security

Implementing policies and programs to protect the sensitive data entrusted to us.

As part of our day-to-day business activities, UnitedHealth Group receives personal information from or about individuals, such as health plan members, patients, customers, employees or other persons whose information is provided to or received by UnitedHealth Group or its business partners. While health care data and personal information are critical for our ability to serve our customers and the health system, we recognize this information is highly sensitive and subject to increasing cybersecurity threats.

We believe a culture of transparency is essential to building and maintaining the trust and confidence of our customers and stakeholders.



Governance

UnitedHealth Group's chief compliance and ethics officer, chief privacy officer and chief information security officer are responsible for administering our data privacy and security programs at the executive management level. The Audit and Finance Committee of the Board of Directors reviews and assesses the effectiveness of our policies, procedures and resource commitments in the areas of compliance, ethics, privacy and information security. The committee, which is responsible for assisting the board in overseeing cybersecurity compliance, receives regular updates covering critical issues related to one or more of the following topics: our information security risks, cybersecurity strategy, supplier risk and business continuity capabilities.

UnitedHealth Group manages cybersecurity and data protection through a continuously evolving framework, providing our team members with training and resources. The framework supports their day-to-day activities, assesses the risks our company faces, and establishes policies and safeguards to protect our systems and the information of those we serve.

Programs and resources

UnitedHealth Group, including all lines of business and subsidiaries, is required to handle data in accordance with data privacy and information security policies, privacy notices and applicable laws. These expectations extend to our third-party partners and contractors.

We use and collect a minimum amount of personal information and retain it in accordance with legal and contractual requirements. We obtain consent in compliance with applicable law and communicate opportunities to limit or opt out of data collection. We observe the rights individuals have over their personal information, including the right to access information we maintain about them and request a correction to those records. Our data privacy policies are informed by our values and further define our privacy responsibilities.

Our [Code of Conduct](#) outlines our commitment to protecting the information entrusted to us. Supported by a comprehensive set of principles, our policies and programs describe appropriate uses of data and the safeguards that protect the confidentiality and integrity of our systems, including:

- Enterprise information security policies.
- An enterprise resiliency and response program.
- An incident management program encompassing cybersecurity, privacy and compliance obligations.
- Privacy and data protection policies, including guidance on information handling.
- An enterprise data governance program, including related policies.
- Enterprise risk management and information risk analysis programs.
- Mandatory privacy and security training for all employees.
- Enterprise vulnerability management programs.

UnitedHealth Group continues to monitor cyber threats and invest accordingly across our systems. In 2022, the level of global cyber threats continued to increase, and we invested and continue to invest in new capabilities to help ensure rapid response and recovery from potential attacks, including system rebuild and recovery protocols so key systems are restored fully and quickly – a step beyond the current protocols of data center failover. Business continuity exercises are prioritized and focused on technology interruption due to ransomware. Finally, we also have a robust incident response program that manages any incident that occurs and remediates vulnerabilities and the effects on those we serve.

Program evaluation

We regularly evaluate the maturity of our security systems. This includes vulnerability assessments and penetration tests conducted by our internal team and qualified external independent assessors. These efforts allow us to identify operational and design risks and vulnerabilities in our systems. We use these tests, along with lessons learned from actual security breaches, to help us identify opportunities to address emerging security threats and improve system security as we work to enhance our ability to protect information and data.

UnitedHealth Group's IT infrastructure and information security management systems were audited by internal and external auditors in the last fiscal year. These audits have resulted in certifications from industry-recognized certifying organizations such as HITRUST, International Organization for Standardization, System and Organization Controls and the Payment Card Industry.

UnitedHealth Group has established information security risk management and privacy programs, which improve our ability to make risk-informed decisions by conducting systematic and structured reviews of information security and data privacy risks. Our protocols are based on industry practices and applicable regulatory obligations such as the Health Insurance Portability and Accountability Act, Gramm-Leach-Bliley Act, European Union General Data Protection Regulation, California Consumer Privacy Act and other requirements decreed by state, federal and international authorities.

Our Internal Audit team is engaged to advise on strengthening compliance with applicable laws and regulations. The team leverages a combination of auditing and security frameworks to evaluate how best practices are applied throughout our enterprise. This approach gives us the ability to address risk from multiple perspectives and implement layered remediation strategies. Furthermore, our Internal Audit team independently assesses security controls against enterprise policies to evaluate whether compliance is maintained. The results of internal audits are communicated to executive leadership and presented to the Audit and Finance Committee of the Board of Directors quarterly.

Audit findings are tracked in the form of action plans and managed within an enterprise governance, risk and compliance tool. Owners are assigned, remediation timelines are established and progress is regularly reported to senior management.

We partner with an industry-leading cybersecurity firm to assess our cybersecurity program across both Enterprise Information Security and the broader Optum Technology teams. This assessment complements our other assessment work by evaluating our cybersecurity program as a whole.

Risk assessment

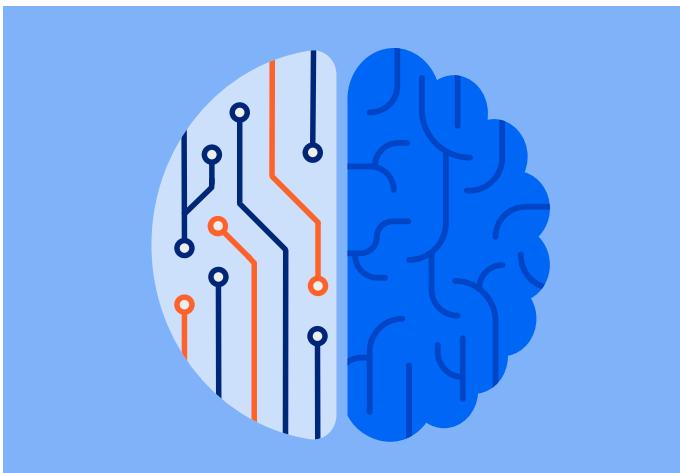
We conduct an annual enterprise information risk assessment (EIRA) in conjunction with our overall enterprise risk management assessment. In the EIRA, we complete a comprehensive review of internal and external threats and evaluate changes to the information risk landscape to inform the investments and program enhancements we will make in the coming year.

There continues to be heightened risk caused by sophisticated enhancements to ransomware and the creation of criminal networks and affiliates to extend the reach and skill of attackers. We continue to engage with our suppliers and internal development teams to remediate known vulnerabilities and are monitoring upgrades, which can be leveraged to mitigate future risk. We also engage our most critical suppliers to help ensure they employ appropriate and effective security controls and business continuity planning.

Responsible use of artificial intelligence and machine learning

Committed to responsibly and ethically harnessing the potential of artificial intelligence and machine learning.

When developed and used responsibly, artificial intelligence (AI) and machine learning (ML) can empower people with the information they need to make personal health choices, provide physicians with insights to assist their decision-making and streamline the performance of the health care system. As these solutions continue to evolve in the health care industry, we are committed to assessing and improving our AI/ML practices continuously, based on our own learnings, industry best practices and regulatory guidance.



Governance

Our governance structure – consisting of clinical, technology, privacy and legal leaders across UnitedHealth Group, Optum and UnitedHealthcare – provides oversight on our strategic development and investments in AI/ML.

Our Responsible Use of AI program, which includes the Machine Learning Review Board, supports all analytics teams with a holistic, structured and cross-discipline review of AI. In 2022, the board reviewed all AI/ML models with the highest potential for risk of harm and established review processes for vendor-acquired AI. In 2023, the board will complete a review of all AI/ML in the organization.

Continuous improvement

We continue to help advance responsible AI/ML guidance and learning across the enterprise and with our partners. These efforts build on our work with key industry stakeholders and a health equity-focused external advisory board from the broader enterprise community. The board conducted a thorough review of our key program components, guidance documents and frameworks. We also seek to root out errors in data sources, addressing systemic biases and other issues potentially impacting our efforts to improve the health outcomes of all individuals. As new AI/ML technologies – including generative AI systems like ChatGPT – continue to emerge and evolve, our Responsible Use of AI program provides ongoing guidance on how they can be responsibly deployed across the UnitedHealth Group enterprise.

In 2023, we will build on this work with an external advisory board dedicated to the Responsible Use of AI program. To continue to evolve with the best available practices, we will also engage in external forums to cross-share our experiences with industry leaders.

Supply chain management

Supporting a sustainable supply chain to help build healthier, more equitable communities.

At UnitedHealth Group, we recognize the importance of advancing responsible environmental and social sustainability practices across our supply chain. Together with our suppliers, we work to support healthier communities and improve the environment. Our extensive supplier network consists of direct suppliers, from whom we purchase pharmaceuticals and health care products, and our indirect suppliers, who provide other important goods and services.

Our suppliers are held to standards reflecting our values and our intent to build a more sustainable and equitable supply chain. Our suppliers are expected to comply with our [Supplier Code of Conduct](#), which was updated to reflect our broader ESG ambitions within our standard procurement contract language. Additionally, because UnitedHealth Group is entrusted with the protection of individuals' most sensitive and personal health data, we place the utmost importance on protecting our data and information systems. We require suppliers with access to our information systems, customer data or health plan member data to have the appropriate security controls when doing business with us, including maintaining their HITRUST certification or an acceptable third-party validated assessment.

Our procurement departments collaborate with our business segments to identify, engage and manage our supplier base to meet business objectives, enable growth and mitigate risk for UnitedHealth Group and the individuals we serve. We maximize value in our supply chain by creating competitive markets for our internal business needs to obtain the right goods and services from the right suppliers for the right price, all in a timely manner.



Risk management

UnitedHealth Group's enterprise-wide Supplier Risk Management Program is governed by an Enterprise Vendor Risk Council. This group oversees the Supplier Risk Management Program with common standards, including regulatory and compliance requirements, applicable to suppliers participating in the health care value chain.

To mitigate against supply chain disruptions, we engage in resiliency planning, including the identification of suppliers critical to our business functions, specifically in patient care and customer commitments. We also developed a process for coordinating critical supplier assessments, which are integrated into a comprehensive supplier profile and status report and can be shared across the organization, further helping us mitigate risks.



Sustainable procurement

Our sustainable procurement strategy is informed by a supply chain ESG risk assessment, which includes broad-based ESG and modern-day slavery criteria. The assessment, conducted by a third party, strengthens collaboration with key suppliers and helps us manage sustainability risks.

Mitigating climate risk is a key component of our ongoing sustainable procurement strategy. Our suppliers will play an integral role in helping us reduce our environmental footprint. We are engaging a targeted group of our suppliers, representing 80% of our 2021 base year emissions, to gather qualitative and GHG emissions data to supplement our current spend-based emissions data. The data will be captured through CDP (formerly the Carbon Disclosure Project) and leveraged to further inform our engagement approach to more effectively address supply chain climate risks and opportunities moving forward.

Measuring supplier performance

To help ensure key suppliers meet our performance expectations, we utilize a systematic Supplier Performance Management Program to monitor compliance with our Code of Conduct and monthly performance of contractual Service Level Agreements related to service delivery, quality and value delivery. Suppliers are asked to self-report performance against contractual service level agreements and key risk indicators on a monthly basis to allow business leaders to make informed decisions regarding sourcing initiatives.

Data-driven supplier performance score cards are shared quarterly with business leaders, risk colleagues and category managers to identify performance trends and areas of opportunity to drive improvement plans for underperforming suppliers. Suppliers are evaluated on criteria such as financial stability, cybersecurity and regulatory compliance, organization resiliency, diversity participation, sustainability progress and Net Promoter Score.

Annually, we review the sustainability practices of critical suppliers to identify policies, practices and goals for waste and carbon reduction, recycling and other sustainability measurements. In 2022, we reviewed suppliers' sustainability performance, which represented approximately 45% of our Enterprise Sourcing & Procurement program spend. Through these reviews we were able to gather primary GHG data among our suppliers, as well as feedback on how we can further collaborate to reduce our environmental impact, from setting decarbonization goals to using compostable products. We were also able to gain a more informed understanding of our suppliers' efforts to promote human rights and supplier diversity within their own networks.

For more information, please refer to the Healthy environment section on [page 34](#).



“Our purpose-driven approach to supply chain management leverages the expertise of our supply partners to help deliver extraordinary results to our customers while improving environmental and social outcomes in the communities we serve.”

Darren Harmon, Senior Director of Supplier Diversity & Sustainability, UnitedHealth Group

Supplier diversity

Building a more inclusive society by integrating businesses from diverse and underrepresented communities.

By promoting job creation and income generation for people in underserved communities, UnitedHealth Group's supplier diversity program strengthens our supplier network while extending our societal impact beyond our members and customers.

Supplier diversity partnerships and recognized certifications

- National Minority Supplier Development Council and 23 regional affiliates
- Women's Business Enterprise National Council and 14 regional partner organizations
- U.S. Department of Veterans Affairs
- National Veteran Business Development Council
- Disability:IN
- National LGBT Chamber of Commerce
- National Association of Women Business Owners
- Diversity Alliance for Science
- Metropolitan Economic Development Association

To better understand how our efforts are supporting local communities, we conduct an annual community impact assessment of our diverse supplier spending.

In 2022, UnitedHealth Group initiated a partnership with the Metropolitan Economic Development Association (MEDA), a Minnesota-based Community Development Funding Institution providing integrated support services and capital funding to local BIPOC businesses. We are engaged in MEDA's Ascend Twin Cities program, an ecosystem of partners delivering business education and contracting relationships for BIPOC businesses. As an anchor company for the Ascend program, we will provide technical assistance and support to help potential vendors successfully navigate procurement processes and delivery.

\$4.8B
spent with diverse suppliers over the past decade.

In 2022, our supplier diversity program supported

77K+
local community jobs.

\$569M
in employee wages.

Our process

We recognize the importance of supplier diversity and are committed to ensuring diversity is an integral part of our strategic sourcing and procurement processes. We are committed to doing more to improve the program.

For every request for proposal (RFP), we target the inclusion of at least one diverse supplier, when available. We evaluate RFPs through a balanced score card, which considers diversity alongside other key factors, including cost, quality and service delivery.

In 2022, we increased our engagement with prime suppliers participating in our Tier 2 program. Targeted prime suppliers are expected to incorporate supplier diversity into their own sourcing practices and provide diverse vendors with opportunities to participate in subcontracts awarded in connection with UnitedHealth Group. Our identified Tier 2 spending increased 17% year over year in 2022.

Supplier definitions

Tier 1 (prime supplier)

Submits invoices to the final customer, e.g., major corporation or government agency.

Tier 2 (subcontractor)

Submits invoices to the prime supplier.

Building capacity of diverse suppliers

To further our commitment to supplier diversity and sustainability, UnitedHealth Group will host a Sustainable Procurement Summit in the second half of 2023, bringing together key executives representing our core business functions along with some of our top suppliers. The event will provide our suppliers with valuable insights on UnitedHealth Group's strategic priorities and the role they play in achieving them.

Our pro bono accelerator model, developed in partnership with our Optum Social Responsibility team, helps build the capacity of diverse suppliers to grow their business with us and other companies. By pairing diverse suppliers with experts within UnitedHealth Group, we aim to provide in-depth knowledge and guidance catered to the needs of each partner business. Since piloting the program in 2020, we have worked with numerous diverse suppliers in providing technical assistance and training to position them for sustainable success. In 2022, we worked with a minority-owned business and a disability-owned business enterprise, supporting a website redesign project and helping professionalize human resources capabilities.



“Optum’s volunteers lent us their digital expertise, resulting in a website revamp and increased sales leads. We collaborated for several months and could only have achieved our goals with the Optum team’s guidance.”

Denene Jonielle Rodney, CEO and Founder, Zebra Strategies

Public policy

Working to inform public policy decisions to help ensure all people have access to high-quality, affordable health care and to build an improved, simplified experience for patients and providers.

Our engagement

Our public policy engagement is focused on advancing solutions to expand access to care, improve health care affordability and enhance health care outcomes. Public policy efforts are led by the UnitedHealth Group External Affairs organization, with partnership from leaders across UnitedHealth Group businesses.

We engage government officials at the federal, state and international levels, serving as a trusted and solutions-oriented voice in the important discussions about health care reform and modernization

Our key areas of focus include:

- Developing and advancing public policy solutions.
- Conducting internally generated research to provide key insights on the most pressing issues facing the health system.
- Partnering with leading academic institutions to work jointly on health care research and data analysis efforts.
- Advocating with policymakers to advance the company's public policy priorities.
- Fostering strategic partnerships with key stakeholders on policy and advocacy initiatives.

Our priorities

We are committed to a future where every person has access to high-quality, affordable health care and a modern, high-performing health system helping to reduce disparities, improve outcomes and lessen the burden of disease.

We outline a set of comprehensive and actionable policy solutions to advance these priorities in [A Path Forward](#). Our U.S. public policy solutions include:

- Achieving universal coverage by ensuring continuity of coverage for those currently insured, enrolling people in the coverage for which they are currently eligible, completing Medicaid expansion and providing more affordable coverage options.
- Improving health care affordability by accelerating value-based care systemwide, using cost-efficient sites of service, making prescription drugs more affordable, and ending wasteful administrative spending to make health care more affordable for consumers and employers and more sustainable for all levels of government.
- Enhancing the health care experience by focusing on equity and reducing disparities, expanding and diversifying the health care workforce, empowering consumers with actionable information, and enabling clinicians to focus on patient care.

Political contributions

Public policies impacting the people and communities we serve are always being considered in Washington, D.C., and in all 50 states. We believe it is our responsibility – on behalf of our customers, employees, the company and shareholders – to engage in the public policy arena. Our engagement – which includes making bipartisan political contributions in the U.S. – is focused on advancing solutions to expand access to care, improve health care affordability and enhance the health care experience.

The company's political action committee, the UnitedHealth Group PAC, is funded by voluntary, personal contributions from eligible employees and individuals. The PAC makes contributions to federal and state candidates and political committees on a bipartisan basis. All PAC contributions are disclosed regularly to the Federal Election Commission (FEC) and appropriate state agencies. In addition to filing regular disclosure reports with the FEC and applicable state agencies, we also disclose political contributions via [semiannual reports on our website](#), in accordance with our [Political Contributions Policy](#). Our bipartisan political giving comes with the understanding we may not agree with every position taken by each recipient of political contributions from the company on the many issues considered by policymakers and candidates for public office.

Trade association membership

We are committed to engaging trade association partners as we work to advance our mission and public policy priorities. Our participation in select industry trade associations comes with the understanding we might not always agree with all positions held by the organizations, and we are committed to communicating and aligning on our priority public policy positions. We list our key trade association memberships in our [Political Contributions & Related Activity Report](#).

Governance

Strong and effective governance practices are essential to our engagement in the policymaking process. The Governance Committee of the UnitedHealth Group Board of Directors has oversight of public policy engagement and political contributions. Its responsibilities include reviewing and recommending to the board any changes to the [Political Contributions Policy](#).

UnitedHealth Group files [federal lobbying disclosure reports](#) quarterly with the U.S. Congress and state lobbying disclosure reports with the appropriate state governing agencies and in compliance with applicable laws.

Compliance and ethics

Guided by our ethics and values to support our employees and the millions of people we serve.

By adhering to our values – integrity, compassion, relationships, innovation and performance – we are well-positioned to achieve our mission to help people live healthier lives and help make the health system work better for everyone.



Our [Code of Conduct](#) provides guidelines to help us sustain the highest possible standards of ethical behavior. The code is available to employees in one of the official languages of every location where we operate, including Brazilian Portuguese, Spanish and English, and sets expectations for ethical conduct across our company, including but not limited to:

- Integrity
- Accountability
- Fair Competition and Fair Dealing
- Privacy and Information Security
- Our Assets and the Environment
- Government Interactions
- Communications and Marketing
- A Safe and Supportive Working Environment

Our policy is to provide a respectful work environment free from all forms of harassment, including sexual harassment. The expectations set forth in our Code of Conduct provide a clear guide for our employees to navigate potentially challenging ethical situations, including corruption and bribery, discrimination, maintaining confidentiality of information, avoiding conflicts of interest, and anti-competitive practices. The code describes how to report misconduct, applicable legal protections for whistleblowers, confidentiality in the reporting process, Help Center contact information, how the company treats code violations (including termination and possible legal action), non-retaliation principles, fair dealing expectations, and the protection and proper use of customer/member personal information and company assets.

The Code of Conduct applies to all employees, directors, contractors and subsidiaries. Our entire global workforce, including independent contractors and part-time employees, receives periodic training on our code and other key compliance policies. About 99% of employees⁸ attest annually to the Code of Conduct. New team members complete training on the code as part of their onboarding, and all employees confirm periodically they have read the code and adhere to its principles.

⁸ Includes corporate services integrated business only. Corporate services non-integrated businesses are excluded. See definitions on [page 90, About this report](#).

Governance

Senior leadership oversees our Compliance and Ethics program and provides regular reports detailing performance on key compliance and ethics indicators to the Audit Committee of the UnitedHealth Group Board of Directors. UnitedHealth Group's Internal Audit department provides objective audit and advisory services to identify and help mitigate risks throughout the company, including periodic audits of the Compliance and Ethics program. The Compliance and Ethics Office maintains our Code of Conduct, reviewing it regularly to show our commitment to integrity and good corporate conduct.

Approximately 95% of employees⁹ agreed the compliance and ethics training provided them with adequate information to operate in compliance with the policies, laws and regulations associated with their job. We continuously work to update and improve our training with the input of subject matter experts and feedback from employees.

95%

Compliance and ethics policies and related documents

Periodically, UnitedHealth Group engages external consultants to assess the enterprise Compliance and Ethics program against government compliance guidance, regulatory expectations and industry practices, to evaluate its effectiveness.

In addition, UnitedHealth Group, Optum and UnitedHealthcare conduct regular assessments, leveraging technology to collect and aggregate insights from a wide group of leaders throughout the enterprise, consistent with the U.S. Department of Health and Human Services Office of Inspector General and Centers for Medicare & Medicaid Services requirements, Department of Justice guidance, and other applicable regulatory requirements.

UnitedHealth Group maintains internal policies at the enterprise, business segment and department levels, which provide more specific direction beyond the core elements of the Code of Conduct.

Examples of key compliance and ethics policies include:

- Anti-Corruption Policy
- Anti-Kickback Policy
- Antitrust Policy
- Conflicts of Interest Policy
- Economic Sanctions and Sanctions Monitoring Policy
- False Claims Acts Compliance Policy
- Gifts and Entertainment Policy
- [Human Rights Policy](#)
- [Environmental Policy](#)
- Insider Trading Policy
- Interactions with Pharmaceutical, Medical Device or Biotech Manufacturers, Wholesalers or Distributors
- Non-Discrimination Policy
- Non-Retaliation Policy
- Personal Information Privacy and Data Protection
- Reporting Misconduct
- [Political Contributions Policy](#)
- Outside Directorships Policy
- [Related-Person Transactions Approval](#)
- Social Media Policy and Guidelines
- [Statement of Ethical Marketing](#)
- Travel and Expense Management Policy
- U.S. Federal Government Contracting Policy

9. Includes corporate services integrated business only. Corporate services non-integrated businesses are excluded. See definitions on [page 90, About this report](#).

Human rights

We are committed to a company culture embracing inclusion, diversity, innovation and growth while upholding the highest ethical standards in how we operate both internally and externally. One way we demonstrate this commitment is by requiring all employees to complete either a manager or employee training course covering sexual and other harassment and discrimination.

In keeping with the spirit of the United Nations Guiding Principles on Business and Human Rights and the International Labour Organization's Declaration on Fundamental Principles and Rights at Work, our commitment extends to respecting the human rights of all those with whom we engage and employ.

We engaged a third party to conduct a Human Rights Impact Assessment in 2022. This work helped us understand the human rights impact associated with our operations, value chain and business relationships. We also engaged stakeholders to prioritize our impact and develop plans for ongoing monitoring.

Read more about our approach to human rights and the impact assessment in our [Human Rights Policy](#).

Whistleblower protection

We strongly and broadly encourage employees to raise compliance and ethics concerns, including concerns about accounting, internal controls, auditing, and ethical, legal, regulatory and policy matters. We offer several channels for employees and third parties to report compliance and ethics concerns or incidents, including contacting a reporting manager and compliance officers, and dedicated phone lines and email addresses controlled by our Compliance and Ethics Office and our Compliance and Ethics HelpCenter (EthicsPoint).

Individuals may choose to remain anonymous in jurisdictions where anonymous reporting is permissible. Once an investigation concludes, the Compliance, business, People Organization and Legal leads associated with the case discuss potential disciplinary actions, if necessary, to determine whether they are consistent with similar cases across the enterprise and achieve uniformity in disciplinary decisions.

We prohibit retaliatory action against any individual who, in good faith, raises concerns or questions regarding compliance and ethics matters, reports suspected violations or cooperates in an investigation. We train all employees annually, and periodically remind them of how they may report possible ethics or compliance issues, as well as their affirmative responsibility to report any issues.



Third party due diligence

Due diligence is required prior to engaging third parties providing goods or services to UnitedHealth Group outside the U.S. The level of due diligence required will depend on the risks presented by each third party. The following reviews are performed for all prospective third parties providing goods or services to UnitedHealth Group outside the U.S.:

- All third parties are screened through an online tool leveraging one of the premier global databases for risk profiles on individuals and entities to determine if there is a match with a person or entity who is subject to government sanctions, involved in various regulatory or legal enforcement actions, or presents other compliance risks.
- Positive matches within the database for an entity or individual trigger additional review to address the potential issues posed by High Risk Third Parties.

The following additional requirements apply to High Risk Third Parties:

- UnitedHealth Group Compliance and Ethics determines whether the third party being considered is a High Risk Third Party. When making its determination, UnitedHealth Group Compliance and Ethics may consider other available information, such as the nature and value of the services or products to be provided and the reputation for corruption or bribery of the country in which the services or products will be provided.
- The engagement of the third party cannot proceed without the written approval of UnitedHealth Group Compliance and Ethics. This approval may include conditions upon which the engagement may proceed.

Ethical marketing and communications

Our communications with customers, members, employees, clinicians and other stakeholders reflect our values and commitment to high standards of personal and institutional integrity. Our sales and marketing activities serve our business objectives, foster enduring relationships with our stakeholders and build trust one person at a time. Our reputation stands upon the relationships we maintain with the public, the media and those who interact with our company.

We review all marketing materials to help ensure accuracy, clarity and compliance with applicable laws and regulations, such as the Medicare Communications and Marketing Guidelines established by the U.S. Centers for Medicare & Medicaid Services. These materials seek to provide straightforward descriptions of services offered so our members can make informed decisions about their health care.

Performance data



Performance data¹

The following data tables provide an additional level of detail to fully describe UnitedHealth Group's sustainability performance. We continue to expand the number of key performance indicators (KPIs) we report, demonstrating our commitment to transparency.

Our people and culture

		2020	2021	2022
Global Workforce	Global Workforce ³	330,000	350,000	400,000
	Employee Experience ^{*3,4}	76%	72%	75%
	Employee Volunteer Hours ^{2,5}	2.6M	3.7M	4.1M
	Hours of Training per Employee ^{*2,6}	19	29	34
	Spend on Training and Development per Employee ^{*2,7}	\$950	\$1,000	\$1,120
Workforce Diversity *	% Female (Global Workforce) ³	70%	70%	71%
	% Female (U.S. Workforce) ³	75%	75%	76%
	% People of Color (U.S. Workforce) ²	41%	42%	45%
Gender Leadership Diversity (Global Workforce)*2,8	% Female in Management Positions	56%	57%	59%
	% Female in Junior Management Positions	62%	64%	67%
	% Female in Top Management Positions	37%	38%	40%
	% Female in Revenue-Generating Positions	63%	65%	66%

* Denotes metrics that have been externally assured for the year ended December 31, 2022. Please see our [2022 Assurance Statement](#).

1. Our social indicators (e.g., our people and culture data) and environmental indicators (e.g., our healthy environment data) cover over 75% of our revenue. Use of estimates and estimation uncertainties: The Company bases its estimates and methodologies on historical experience, available information and various other assumptions that it believes to be reasonable. Emissions data presented are subject to measurement uncertainties resulting from limitations inherent in the nature and the methods used for determining such data. The selection of different but acceptable measurement techniques can result in materially different measurements. The precision of different measurement techniques may also vary.

2. Includes corporate services integrated business only. Corporate services non-integrated businesses are excluded. See definitions on [page 90, About this report](#).

3. Includes corporate services integrated business and corporate services non-integrated businesses. See definitions on [page 90, About this report](#).

4. Measures the outcomes of employee commitment (employees' emotional connection to the vision and mission of the company) and employee belonging/effort (employees' daily experiences with their role, tasks and work environment) through employee surveys / self-reported data.

5. Volunteer hours are calculated using employee survey responses and giving site participation data.

6. Duration for all completed training divided by the annual average global employee count.

7. Total general ledger training and development spend plus internal staff costs for training and development-related job codes divided by the annual average global employee count.

8. Management: all people leaders. Junior Management: first levels of management. Top Management: maximum three levels away from the CEO or comparable positions. Revenue-Generating: people managers who are in direct revenue-generating functions (e.g., sales); excludes support functions such as HR, IT, Legal, etc.

		2020	2021	2022
People of Color Leadership Diversity (U.S. Workforce)*1,2	% People of Color in Management Positions	29%	29%	31%
	% Asian	9%	9%	10%
	% Black/African American	8%	8%	8%
	% Hispanic/Latino	9%	9%	10%
	% Two or More Ethnic Groups	2%	2%	2%
	% All Other Races	1%	1%	1%
	% People of Color in Junior Management Positions	36%	37%	39%
	% Asian	5%	5%	5%
	% Black/African American	13%	13%	13%
	% Hispanic/Latino	14%	15%	17%
	% Two or More Ethnic Groups	3%	3%	3%
	% All Other Races	1%	1%	1%
	% People of Color in Top Management Positions	11%	16%	17%
	% Asian	6%	8%	9%
	% Black/African American	2%	4%	4%
	% Hispanic/Latino	2%	3%	3%
	% Two or More Ethnic Groups	1%	1%	1%
	% All Other Races	<1%	<1%	<1%
	% People of Color in Revenue-Generating Positions	28%	29%	33%
	% Asian	6%	6%	7%
	% Black/African American	9%	9%	10%
	% Hispanic/Latino	10%	11%	12%
	% Two or More Ethnic Groups	2%	2%	3%
	% All Other Races	1%	1%	1%
Workforce Generational Diversity (Global Workforce)*1	% Traditionalists (Before 1943)	<1%	<1%	<1%
	% Baby Boomers (1943-1960)	8%	7%	6%
	% Generation X (1961-1981)	45%	43%	41%
	% Generation Y (1982-2000)	47%	49%	52%
	% Generation Z (2001+)	<1%	<1%	1%

* Denotes metrics that have been externally assured for the year ended December 31, 2022. Please see our [2022 Assurance Statement](#).

1. Includes corporate services integrated business only. Corporate services non-integrated businesses are excluded. See definitions on [page 90, About this report](#).

2. Management: all people leaders. Junior Management: first levels of management. Top Management: maximum three levels away from the CEO or comparable positions. Revenue-Generating: people managers who are in direct revenue-generating functions (e.g., sales); excludes support functions such as HR, IT, Legal, etc.

		2020	2021	2022
Hiring and Turnover*¹	Total Number of New External Employees Hired (Global Workforce)	45,621	68,565	93,934
	% External Female Hired (U.S. Workforce)	74%	76%	77%
	% External People of Color Hired (U.S. Workforce)	52%	54%	59%
	% Asian	7%	8%	9%
	% Black/African American	20%	22%	25%
	% Hispanic/Latino	20%	19%	20%
	% Two or More Ethnic Groups	4%	4%	4%
	% All Other Races	1%	1%	1%
	% Open Positions Filled by Internal Candidates (Global Workforce)	24%	27%	26%
	% Total Voluntary Turnover (Global Workforce)	12%	18%	18%
	% Total Turnover (Global Workforce)	13%	20%	20%
Retention* ¹	% Female Retained (U.S. Workforce)	87%	81%	82%
	% People of Color Retained (U.S. Workforce)	85%	79%	79%
	% Asian	91%	87%	87%
	% Black/African American	83%	74%	74%
	% Hispanic/Latino	85%	77%	79%
	% Two or More Ethnic Groups	82%	75%	76%
	% All Other Races	85%	81%	81%
Promotion (U.S. Workforce)*^{1,2}	% Female Promoted	7%	12%	14%
	% People of Color Promoted	8%	12%	13%
	% Asian	8%	13%	13%
	% Black/African American	7%	10%	12%
	% Hispanic/Latino	8%	12%	14%
	% Two or More Ethnic Groups	9%	14%	15%
	% All Other Races	7%	11%	13%

Our most recently filed Federal Employer Information Report [EEO-1](#), representing U.S.-based integrated employees as of December 2022 is available for download.

* Denotes metrics that have been externally assured for the year ended December 31, 2022. Please see our [2022 Assurance Statement](#).

1. Includes corporate services integrated business only. Corporate services non-integrated businesses are excluded. See definitions on [page 90, About this report](#).

2. Reflects employees obtaining a job with greater responsibility and a job record change with an action of 'promotion' during a 12-month period as a function of the average population. Measures the % of employees promoted by category.

Responsible business practices

			2020	2021	2022
Corporate Governance	One Share One Vote		Yes	Yes	Yes
	Proxy Access		Yes	Yes	Yes
	Say on Pay Frequency		Annual	Annual	Annual ¹
	Directors on Board	10	10	10	9
	Independent Directors	8	8	8	7
	Female Directors	3	3	3	3
	Racially & Ethnically Diverse Directors	2	3	3	3
	Average Director Tenure	13.1	12.6	<7	
	Separate CEO/Chair	Yes	Yes	Yes	Yes
	Lead Independent Director or Chair	Yes	Yes	Yes	Yes
Supplier Diversity	Majority Voting for Directors	Yes	Yes	Yes	Yes
	Tier 1 ²	Diverse Suppliers	627	510	464
		Average Spend/Diverse Supplier	\$894K	\$1M	\$1.8M
		Total Spend with Diverse Suppliers	\$561M	\$659M	\$823M
	Tier 2 ³	Participating Suppliers	78	98	98
		Total Spend with Diverse Suppliers	\$156M	\$212M	\$249M
Supplier Sustainability	Economic Impact ⁴	Jobs Created and Sustained through our Supplier Diversity Program	8,221	6,872	7,748
	Supplier Assessments Performed for Sustainability Programs & Practices		491	443	498

1. This will be voted on at the Annual Shareholder Meeting on June 5th, 2023.

2. Prime supplier - submits invoices to the final customer, e.g., major corporation or government agency.

3. Subcontractor - submits invoices to the prime supplier.

4. Applies to tier 1 diverse supplier spend only. Economic impact modeling developed by Supplier.IO, based on an analysis of data provided by UnitedHealth Group and information from additional sources: [US Government Revenues](#); [IMPLAN](#); [United States GDP](#); [RIM II User Guide - An essential tool for regional developers and planners](#); [Input-Output Models for Impact Analysis: Suggestions for Practitioners Using RIMS II Multipliers](#). 2020 modeling based off government data published in 2018; 2021 and 2022 modeling based off government data published in 2021 which includes impacts from the pandemic.

Healthy environment¹

Explanation of our energy and emissions data: When we committed to net-zero operations in late 2021, we communicated an intent to support the generation of new renewable energy. This translates to slow progress initially due to the time it takes to set up and integrate new solutions. Increases in energy and carbon emissions metrics are primarily due to company growth, largely through mergers and acquisitions of more energy intensive spaces (e.g., care delivery) and increases in building occupancy due to employees returning to offices. As we transition to higher-quality emissions reductions solutions, such as a virtual power purchase agreement (VPPA) and direct investment in renewable energy, we plan to rely less on some carbon reduction levers, including unbundled renewable energy credits (RECs), leading to short-term carbon emissions increases.

In 2022, we performed our first comprehensive assessment of our scope 3 emissions footprint. Climate issues, including progress toward decarbonization, are on the agenda of the Board of Directors quarterly.

See [page 36](#) for more information about our path to net-zero.

		2019	2020	2021	2022
Energy (MWh)^{1,2}	Total Energy Consumption ³	375,673	381,692	1,436,753	1,584,441
	Coverage Reported (%)	25.99%	28.31%	100%	100%
	Coverage Reported (M sq. ft)	13.1	14.6	60.2	60.2
	Non-Renewable Energy Use ³	367,457	362,045	1,353,651	1,584,441
	Renewable Energy Use ⁴	8,216	19,647	83,102	0
	Self-Generated Renewable Energy Use	0	0	0	0
	Change in Energy Consumption ⁵	+2.9%	+1.6%	+276.4%	+10.3%
	Energy Intensity (per USD revenue, billions) ⁶	1,551.37	1,484.37	4,995.72	4,887.81

* Denotes metrics that have been externally assured for the year ended December 31, 2022. Please see our [2022 Assurance Statement](#).

1. In 2021, we reported for the first time all energy and all associated scope 1 and 2 emissions within our operational control. Excluded operations include joint ventures in Peru and the US. The reporting methodology was updated in 2021 to shift assets previously reported under scope 3, category 8 – upstream leased assets to scope 1 and scope 2. All greenhouse gas emissions are calculated in accordance with the guidance set out by [The Greenhouse Gas Protocol](#), developed by the World Resources Institute (WRI) and the World Business Council for Sustainable Development (WBCSD).

2. In 2022, we aligned to the “fixed base year” and “all-year” approach for recalculating historical emissions, which includes acquisitions and divestitures. 2021 base year energy and associated scope 1 and 2 emissions have been updated to reflect these changes. Prior years not updated.

3. In 2019, total energy use and non-renewable energy use was calculated from natural gas, diesel, jet fuel, sulphur free gas oil (SFGO), propane and grid purchased electricity. In 2020, fuel oil no. 2 was added. In 2021 and 2022, liquid petroleum gas (LPG), sustainable aviation fuel and gasoline are included.

4. In 2019, unbundled renewable energy credits (RECs) through energy supply contracts supplied (16) facilities in the U.S. portfolio (including administrative, integrated clinic, data center and pharmaceutical). In 2020, unbundled RECs through energy supply contracts supplied (41) facilities in the U.S. portfolio. In 2021, unbundled RECs through energy supply contracts supplied (57) facilities in the U.S. portfolio; and Guarantees of Origin (GO) were purchased for the Portugal portfolio. Starting in 2022, as we transition to higher quality emissions reductions solutions, such as a virtual power purchase agreement (VPPA) and direct investment in renewable energy, we plan to rely less on some carbon reduction levers, including unbundled RECs.

5. In 2020, the year-over-year increase for all energy reported is the result of (1) M&A activity; and (2) change in boundary to incorporate India business operations and reporting of integrated clinical operations in the U.S. In 2021, the year-over-year increase for all energy reported is the result of (1) M&A activity; (2) change in boundary to incorporate all U.S. portfolio, Portugal, Brazil, Chile, and Colombia business operations, and global vehicle fleets; and (3) change in reporting methodology shifted assets previously reported under scope 3, category 8 – upstream leased assets to scope 1 and 2. In 2022, the year-over-year increase for all energy reported is the result of (1) M&A activity; and (2) increased administrative site occupancy post-pandemic.

6. The denominator for intensity metrics is total revenue as published in the annual UnitedHealth Group United States Securities and Exchange Commission Form 10-K.

		2019	2020	2021	2022
Carbon Emissions - Scope 1 & 2 (mtCO₂e)^{1,2}	Scope 1 ³	17,709	24,487	121,572	122,356
	Scope 2				
	Location-Based ⁴	153,004	156,751	362,038	383,896
	Market-Based ⁵	149,418	148,741	334,277	383,896
	Total Scope 1 + Scope 2 Location-Based	170,713	181,238	483,610	506,252
	Coverage Reported (%)	25.99%	28.31%	100%	100%
	Coverage Reported (M sq. ft)	13.1	14.6	60.2	60.2
	Emissions Intensity (Scope 1 + Scope 2 Location-Based) (per USD revenue, billions) ⁶	704.97	704.82	1,681.55	1,561.72
	Change in Emissions (Scope 1 + Scope 2 Location-Based) (%) ⁷	+1.8%	+6.2%	+166.8%	+4.7%

* Denotes metrics that have been externally assured for the year ended December 31, 2022. Please see our [2022 Assurance Statement](#).

1. In 2021, we reported for the first time all energy and all associated scope 1 and 2 emissions within our operational control. Excluded operations include joint ventures in Peru and the US. The reporting methodology was updated in 2021 to shift assets previously reported under scope 3, category 8 – upstream leased assets to scope 1 and scope 2. All greenhouse gas emissions are calculated in accordance with the guidance set out by [The Greenhouse Gas Protocol](#), developed by the World Resources Institute (WRI) and the World Business Council for Sustainable Development (WBCSD).

2. In 2022, we aligned to the “fixed base year” and “all-year” approach for recalculating historical emissions, which includes acquisitions and divestitures. 2021 base year energy and associated scope 1 and 2 emissions have been updated to reflect these changes. Prior years not updated.

3. In 2019, scope 1 emissions were calculated from sources of stationary combustion (natural gas, diesel, sulphur free gas oil (SFGO), propane; mobile emissions (jet fuel), and fugitive emissions (refrigerant leakage). In 2020, we added sources of stationary combustion (fuel oil no. 2). In 2021 and 2022, sources of stationary combustion (liquefied petroleum gas (LPG)); mobile emissions (sustainable aviation fuel, gasoline); and fugitive emissions (anesthetic gases and medical gases) were added.

4. Scope 2 (location-based) emissions sources include grid purchased electricity. In 2019, U.S. portfolio emissions were calculated using eGRID2018 (released 1/28/2020 revised 3/9/2020) emissions factors. United Kingdom portfolio emissions were calculated using DEFRA 2020 emissions factors. Ireland portfolio emissions were calculated using SEAI emissions factors. In 2020, U.S. portfolio emissions were calculated using eGRID2018 (released 1/28/2020, revised 3/9/2020) emissions factors. Republic of Ireland, United Kingdom, India, and Philippines portfolio emissions were calculated using IEA 2018 Emissions factors. In 2021, U.S. portfolio emissions were calculated using eGRID2019 (released 2/23/2021) emission factors. Republic of Ireland, Portugal, United Kingdom, India, Philippines, Brazil, Chile, and Colombia portfolio emissions were calculated using IEA 2018 emissions factors. Non-U.S. portfolio emissions were calculated using IEA 2021 emissions factors.

5. Scope 2 market-based emissions include scope 2 location-based emissions less purchased or self-generated renewable energy. In 2019 and 2020, U.S. portfolio emissions were calculated using 2019 Green-e® Residual Mix Emissions Rates (2017 Data). In 2021, U.S. portfolio emissions were calculated using 2021 Green-e® Residual Mix Emissions Rates (2019 Data). In 2022, we relied less on some carbon reduction levers, including unbundled RECs; therefore, market-based and location-based scope 2 emissions are the same.

6. The denominator for intensity metrics is total revenue as published in the annual UnitedHealth Group United States Securities and Exchange Commission Form 10-K.

7. In 2020, the year-over-year increase for emissions reported is the result of (1) M&A activity; and (2) change in boundary to incorporate India business operations and reporting of integrated clinical operations in the U.S. In 2021, the year-over-year increase for emissions reported is the result of (1) M&A activity; (2) change in boundary to incorporate all U.S. portfolio, Portugal, Brazil, Chile, and Colombia business operations, and global vehicle fleets; and (3) change in reporting methodology shifted assets previously reported under scope 3, category 8 – upstream leased assets to scope 1 and 2. In 2022, the year-over-year increase for emissions reported is the result of (1) M&A activity; and (2) increased administrative site occupancy post-pandemic.

		2019	2020	2021	2022
Carbon Emissions - Scope 3 & Offsets (mtCO2e)*	Scope 3 Reported ¹	429,812	213,495	12,491,631	13,788,578
	Category 1 - Purchased Goods and Services ²	NR ⁹	NR ⁹	6,196,306	6,529,413
	Category 2 - Capital Goods ²	NR ⁹	NR ⁹	227,225	209,092
	Category 4 - Upstream Transportation and Distribution ²	NR ⁹	NR ⁹	556,008	552,094
	Category 5 - Waste Generated in Operations ⁵	25,934	24,354	32,684	51,757
	Category 6 - Business Travel ⁴	63,006	21,653	22,238	56,118
	Category 7 - Employee Commuting ⁵	252,683	65,007	33,543	146,411
	Category 8 - Upstream Leased Assets ⁶	88,189	102,481	0	0
	Category 15 - Investments ⁷	NR ⁹	NR ⁹	5,423,627	6,243,693
	Total Emissions (Scope 1 + Scope 2 Location-Based + Scope 3)	600,525	394,733	12,975,241	14,294,830
	Carbon Offsets ⁸	0	0	3,596	7,947

* Denotes metrics that have been externally assured for the year ended December 31, 2022. Please see our [2022 Assurance Statement](#).

1. We completed our first-ever full assessment of scope 3 in 2022 using the “pro-rata” approach for recalculating historical emissions, which includes acquisitions and divestitures. All significant sources of greenhouse gas emissions are calculated in accordance with the guidance set out by [The Greenhouse Gas Protocol](#), developed by the World Resources Institute (WRI) and the World Business Council for Sustainable Development (WBCSD).

2. Includes corporate services integrated business and corporate services non-integrated businesses. See definitions on [page 90 About this report](#). Calculated using a spend-based methodology where total spend and categorizations were sourced from the general ledger on an accrual accounting basis. Expenses related to the provisioning of care through health insurance plans (e.g., claims and reimbursements, including retail pharmaceutical spend) are not included due to a lack of guidance on how to attribute emissions related to the facilitated emissions for health insurance.

3. The 2019 and 2020 waste datasets represent U.S. administrative, integrated clinic, data center, and pharmaceutical-based municipal waste where primary data sources (e.g., invoices) are available. Excludes sources of medical, pharmaceutical, and electronic waste. In 2021, we added India and Philippines business operations. In 2022, we add all remaining U.S., Republic of Ireland, Portugal, United Kingdom, Brazil, Chile, and Colombia business operations including municipal, construction, electronic, hazardous and regulated medical and pharmaceutical waste. The datasets for municipal and construction waste include estimations (70%) where primary data sources were unavailable. Only primary data sources were utilized for electronic, hazardous and regulated medical and pharmaceutical waste.

4. The 2019 datasets represent business travel (commercial air travel, rental cars, and rail) for integrated U.S. based employees. The 2020 through 2022 dataset adds integrated non-U.S. employees. See definitions on [page 90 About this report](#).

5. The 2019 through 2022 datasets represent employee commuting for integrated U.S. based employees. Estimation based on all vehicles being an average sedan.

6. In 2020, total upstream leased assets emissions were recalculated using eGRID2018 (released 1/28/2020, revised 3/9/2020) emissions factors. In 2021, a change in reporting methodology shifted assets previously reported under scope 3, category 8 - upstream leased assets to scope 1 and 2 to reflect emissions within our operational control.

7. In line with the Partnership for Carbon Accounting Financials (PCAF) standard, estimated emissions are composed of asset classes such as corporate bonds, loans, equities, and sovereign debt. Reported asset classes cover 39% of the total portfolio in 2021 and 2022.

8. We purchased the following offsets: In 2021, 1) 1,000 mtCO2e forestry (UPM Blandin); 2) 1,500 mtCO2e forestry (Minnesota); 3) 996 mtCO2e forestry (Mai Ndombe REDD+ Project); and 4) 100 mtCO2e cook stoves (Rwanda). In 2022, 1) 5,000 mtCO2e forestry (UPM Blandin); and 2) 2,947 mtCO2e forestry (Pungo River Forest Conservation Project).

9. Not Reported (NR) datapoint indicates metric was not reported in the identified year.

		2019	2020	2021	2022
Water (Mio. m³)*	Municipal Water Use ¹	.65	.56	1.25	1.81
	Coverage Reported (%)	13.51%	15.32%	24.78%	27.67%
	Coverage Reported (M sq. ft)	6.8	7.9	14.9	16.7
	Municipal Water Intensity (per USD revenue, billions) ²	0.002678	0.002167	0.004356	0.005598
	Total Water Discharged ³	NR ⁷	0.018012	1.040776	1.382586
	Coverage Reported (%)	NR ⁷	NR ⁷	18.06%	20.49%
	Coverage Reported (M sq. ft)	NR ⁷	NR ⁷	10.9	12.3
Waste (Metric Tonnes)**	Waste Disposed	7,398	7,658	10,478	87,452
	Waste Recycled	7,964	6,709	7,099	12,575
	Confidential Paper Recycling (U.S. tons) ⁵	6,415	4,888	4,854	9,009
	Total Waste Coverage Reported (%)	1704%	16.99%	24.09%	100%
	Total Waste Coverage Reported (M sq. ft)	8.6	8.8	14.5	60.2
Environmental Operations⁶ (Square Feet, millions)	LEED Certified Facilities*	2.1	2.7	2.7	3.2

* Denotes metrics that have been externally assured for the year ended December 31, 2022. Please see our [2022 Assurance Statement](#).

1. Municipal water sources include indoor water (e.g., plumbing), fire line (e.g., emergency sprinkler systems), and irrigation (e.g., landscaping) from primary data sources (e.g., invoices). The 2019 municipal water data represents U.S. administrative, integrated clinic, data center, and pharmaceutical business operations. In 2020, we added Republic of Ireland business operations. In 2021 and 2022, we added India and Philippines business operations. 2021 municipal water use – coverage reported % and M sq. ft. has been restated in this report from the 2021 Environmental Impact Statement to reflect a calculation correction. In 2022, the year-over-year increase in municipal water use is the result of a 1.74M sq. ft. increase in coverage reported.

2. The denominator for intensity metrics is total revenue as published in the annual UnitedHealth Group United States Securities and Exchange Commission Form 10-K.

3. Water discharge sources include sites where storm water and wastewater flows are provided by the local utility provider. The 2020 through 2022 water datasets represent U.S. administrative, integrated clinic, data center, and pharmaceutical business operations.

4. The 2019 and 2020 waste datasets represent U.S. administrative, integrated clinic, data center, and pharmaceutical-based municipal waste where primary data sources (e.g., invoices) are available. Excludes sources of medical, pharmaceutical, and electronic waste. In 2021, we added India and Philippines business operations. In 2022, we add all remaining U.S., Republic of Ireland, Portugal, United Kingdom, Brazil, Chile, and Colombia business operations including municipal, construction, electronic, hazardous and regulated medical and pharmaceutical waste. The datasets for municipal and construction waste include estimations (70%) where primary data sources were unavailable. Only primary data sources were utilized for electronic, hazardous and regulated medical and pharmaceutical waste.

5. Paper recycling includes confidential paper shredding. The 2019 through 2021 datasets represent integrated U.S. administrative, clinic, data center, and pharmaceutical. In 2022 we added non-integrated U.S. business operations. See definitions on [page 90, About this report](#).

6. The 2019 LEED datasets represent U.S. administrative, integrated clinic, data center, and pharmaceutical, India, and Philippines business operations. In 2020, we added Puerto Rico business operations.

7. Not Reported (NR) datapoint indicates metric was not reported in the identified year.

Sustainability Accounting Standards Board (SASB) Index

The Sustainability Accounting Standards Board (SASB) is an independent, standards-setting organization that has developed voluntary industry-specific standards for companies to disclose consistent and decision-useful environmental, social and governance (ESG) information for investors.

The table below is UnitedHealth Group's SASB Index, which includes disclosures in the three SASB industry standards that are most relevant to our business: Managed Care, Health Care Delivery, and Professional and Commercial Services.

Managed Care

Topic	Code/metric	UnitedHealth Group disclosure		
Activity Metric	HC-MC-000.A Number of enrollees by plan type			
		Form 10-K		
		Table summarizes the number of individuals (in thousands) served by our UnitedHealthcare businesses as of December 21, 2022, by major market segment and funding arrangement, page 31.		
		Commercial	Risk-based	8,045
			Fee-based	18,640
			Total	26,685
		Medicare Advantage		7,105
		Medicaid		8,170
		Medicare Supplement (Standardized)		4,375
			Total Community and Senior	19,650
			Total UnitedHealthcare – Domestic Medical	46,335
		Commercial - Global		5,360
			Total UnitedHealthcare – Medical	51,695
		Supplemental Data	Medicare Part D Standalone	3,295
Customer Privacy and Technology Standards	HC-MC-230a.1 Description of policies and practices to secure customers' protected health information (PHI) records and other personally identifiable information (PII)	<ul style="list-style-type: none"> 2022 Sustainability Report: Responsible Business Practices – Data privacy and security, Page 63. Code of Conduct. Form 10-K Privacy, Security and Data Standards Regulation, pages 5-6. Audit and Finance Committee Charter. 		
	HC-MC-230a.2 (1) Number of data breaches, (2) percentage involving (a) personally identifiable information (PII) only and (b) protected health information (PHI), (3) number of customers affected in each category, (a) PII only and (b) PHI	<ul style="list-style-type: none"> We promptly investigate data privacy complaints and report required data breaches to the U.S. Department of Health & Human Services (HHS) – Office for Civil Rights (OCR). Refer to the U.S. Department of Health & Human Services – Office for Civil Rights website. 		
Access to Coverage	HC-MC-240a.1 Medical Loss Ratio (MLR)	<ul style="list-style-type: none"> Form 10-K Denoted as "Medical Care Ratio," page 25. 82.0% for the 12 months ending December 31, 2022. 		

Improved Outcomes	HC-MC-260a.2 Total coverage for preventive health services with no cost sharing for the enrollees, total coverage for preventive health services requiring cost sharing by the enrollee, percentage of enrollees receiving Initial Preventive Physical Examinations (IPEE) or Annual Wellness Visits (AWV)	<p>UnitedHealthcare covers certain medical services under the preventive care services benefit. The federal Patient Protection and Affordable Care Act (PPACA) requires non-grandfathered health plans to cover certain “recommended preventive services” as identified by PPACA under the preventive care services benefit, without cost sharing to members when provided by network providers.</p> <p>Non-grandfathered plans</p> <ul style="list-style-type: none"> Non-grandfathered plans provide coverage for preventive care services with no member cost sharing when services are obtained from a network provider. Under PPACA, services obtained from an out-of-network provider are not required to be covered under a plan's preventive benefit and may be subject to member cost sharing. Refer to the member-specific benefit plan document for out-of-network benefit information, if any. <p>Grandfathered plans</p> <ul style="list-style-type: none"> Plans that maintain grandfathered status under PPACA are not required by law to provide coverage for these preventive services without member cost sharing, although a grandfathered plan may choose to voluntarily amend its plan document to include these preventive benefits. Except where there are state mandates, a grandfathered plan might include member cost sharing, or exclude some of the preventive care services identified under PPACA. 2022 Sustainability Report: A modern, high-performing health system – Preventive Services Long-Term Commitment, page 20. <p>Approximately 70% of our members received preventive services in 2022.¹</p>
	HC-MC-260a.3 Number of customers receiving care from Accountable Care Organizations or enrolled in Patient-Centered Medical Home programs	<ul style="list-style-type: none"> >3M people served under fully accountable value-based care arrangements. 2022 Sustainability Report: A modern, high-performing health system - Accelerating the transition to value-based care, page 18.
Climate Change Impacts on Human Health	HC-MC-450a.1 Discussion of the strategy to address the effects of climate change on business operations and how specific risks presented by changes in the geographic incidence, morbidity, and mortality of illnesses and diseases are incorporated into risk models	<ul style="list-style-type: none"> CDP 2022 Questionnaire: Section C2.2 Process(es) for identifying, assessing and responding to climate-related risks and opportunities, pages 9-12; Section C2.3a Risks identified with the potential to have a substantive financial or strategic impact on the business, pages 12-15; Section C2.4a Opportunities identified with the potential to have a substantive financial or strategic impact on the business, pages 15-17. 2022 Sustainability Report: Healthy environment, page 34.

1. Preventive health services defined in accordance with AMA guidelines as required by the PPACA, including wellness visits, preventive visits and vaccinations.

Health Care Delivery

Topic	Code/metric	UnitedHealth Group disclosure
Energy Management	HC-DY-130a.1 (1) Total energy consumed, (2) percentage grid electricity, (3) percentage renewable	<ul style="list-style-type: none"> 2022 Sustainability Report: Performance data (Total energy consumption, and non-renewable and renewable energy use [MWh]), page 83. CDP 2022 Questionnaire: Section C8 Energy, pages 63-79.
Patient Privacy and Electronic Health Records	HC-DY-230a.2 Description of policies and practices to secure customers' protected health information (PHI) records and other personally identifiable information (PII)	<ul style="list-style-type: none"> 2022 Sustainability Report: Responsible business practices – Data privacy and security, page 63. Code of Conduct. Form 10-K Privacy, Security and Data Standards Regulation, pages 5-6. Audit and Finance Committee Charter.

Professional and Commercial Services

Topic	Code/metric	UnitedHealth Group disclosure
Data Security	SV-PS-230a.1 Description of approach to identifying and addressing data security risks	<ul style="list-style-type: none"> 2022 Sustainability Report: Responsible business practices – Data privacy and security, page 63.
	SV-PS-230a.2 Description of policies and practices relating to collection, usage and retention of customer information	<ul style="list-style-type: none"> 2022 Sustainability Report: Responsible business practices – Data privacy and security, page 63. Code of Conduct. Form 10-K Privacy, Security and Data Standards Regulation, pages 5-6. Audit and Finance Committee Charter.
Workforce Diversity and Engagement	SV-PS-330a.1 Percentage of gender and racial/ethnic group representation for (1) executive management and (2) all other employees	<ul style="list-style-type: none"> 2022 Sustainability Report: Performance data, page 78.
	SV-PS-330a.2 (1) Voluntary and (2) involuntary turnover rate for employees	<ul style="list-style-type: none"> 2022 Sustainability Report: Performance data, page 78.
	SV-PS-330a.3 Employee engagement as a percentage	<ul style="list-style-type: none"> 2022 Sustainability Report: Performance data, page 78.
Professional Integrity	SV-PS-510a.1 Description of approach to ensuring professional integrity	<ul style="list-style-type: none"> 2022 Sustainability Report: Responsible business practices – Compliance and ethics, page 74.

About this report

UnitedHealth Group's Sustainability Report provides an overview of our sustainability approach and commitments, as well as progress against certain key ESG targets. The structure of this report reflects our sustainability framework, which consists of four areas that are the highest priority for our business, align with our mission and create shared value. Our four sustainability priorities are (1) Helping to build a modern, high-performing health system, (2) Healthy environment, (3) Our people and culture, and (4) Responsible business practices.

Boundary and scope

Boundaries for this report extend to all global operations, with a focus on our U.S. operations. The terms "we," "us," "our," and "the company" refer to UnitedHealth Group and the two distinct but complementary businesses Optum and UnitedHealthcare.

Data contained in this report covers activities that occurred in fiscal year 2022 (January 1–December 31, 2022), unless otherwise noted.

Corporate services integrated businesses – businesses integrated into UnitedHealth Group, Optum, or UnitedHealthcare's corporate service ecosystem across key policies, processes, systems, practices and functions.

Corporate services nonintegrated businesses – businesses generally operating with separate and distinct business functions, processes, or systems that are not interconnected or integrated with UnitedHealth Group, Optum or UnitedHealthcare.

Disclosure and assurance

The metrics and goals in this report are established through a rigorous review process involving internal subject matter experts, finance functions and leadership. The report was submitted to the Governance Committee of the Board of Directors for review, and was reviewed and approved by members of UnitedHealth Group's senior management.

The report also includes a Sustainability Accounting Standards Board (SASB) Index, providing disclosures against relevant SASB Standards.

Select environmental and social data for 2022 were reviewed by independent certified public accountants in accordance with internationally recognized attestation standards established by the American Institute of Certified Public Accountants for the year ended December 31, 2022. Select environmental and social data for 2021 and prior years was externally verified by Upstream Sustainability Services, Jones Lang LaSalle IP, Inc.

Third-party links

This report may contain links to third-party websites and resources on the internet. UnitedHealth Group has no control over the content on such sites and makes no warranties or representations of any kind regarding the information or content provided through third-party hyperlinks contained throughout this report.

Feedback

This report is intended to enhance lines of communication with our stakeholders, creating opportunities to better respond to emerging areas of interest. Please reach out to us at sustainability@UHG.com with any thoughts, feedback or questions.

Forward-looking statements

Forward-looking comments will also be provided to help show the trajectory of our work. All statements in this report that are not historical – including goals, projections of future results, the expected execution and effect of our sustainability strategies and initiatives, and the amounts and timing of their expected impact – constitute forward-looking statements that are based on current societal, market, competitive and regulatory expectations. These forward-looking statements are not guarantees of future performance and are subject to risks, uncertainties and assumptions, known or unknown, which could cause actual results to vary. These statements speak only as of the date they are made and UnitedHealth Group undertakes no obligation to update publicly any forward-looking statement included in this report, whether as a result of new information, future events, changes in assumptions or otherwise. Please see UnitedHealth Group's latest Form 10-K and subsequent SEC filings for a discussion of risk factors as they relate to forward-looking statements.