



Health Action Council

Community Health Data: Improving
Employer Investment in Overall Employee Health

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Employers know that the health and well-being of their employees is essential to delivering on their corporate objectives and commitments. The challenge is to understand their population's unique needs and the varied factors that influence their health and health outcomes. These include:

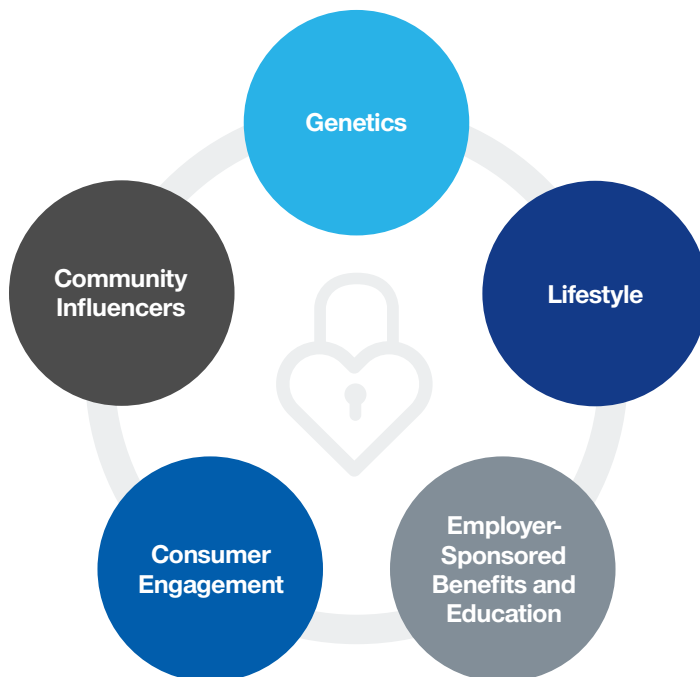
Genetics — The impact of heredity and the variation of inherited characteristics that make up a population.

Lifestyle — The personal choices each employee makes that enhances or undermines their health.

Employer-Sponsored Benefits and Education — The access employees have to quality care and their motivation and ability to use it effectively.

Consumer Engagement — The depth of interaction a population has with its health resources.

Community Influencers — The geographically specific issues and attributes that contribute to health challenges.



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The X-factor: Community Influencers.

Employers recognize the effect Community Influencers have on their key performance metrics. Increasingly, they are seeking data and analytics to help them identify the health interventions, based on their community, that can deliver the greatest return on investment (ROI) to improve their employees' health.

What can your community tell you about your employee population? A lot. And the more you know, the more you can enhance your population's health.

The statistics below reflect an overview of employee populations within Health Action Council's member communities nationwide.

The copy that follows provides a much more advanced viewpoint designed to deliver essential insights that can advance your population health strategies and growth planning.

Health Action Council Member Demographics.

292,975 members.

54% of members live in Ohio, California, Texas, Florida and Illinois.

45.2 is the average employee's age.

46.1% of employees are in an "older family" life stage.*

Health Continuum.

45.2% of members are well (8.3% of spend).

27.1% of members are at risk (24.7% of spend).

22.7% of members are living with a chronic condition (42.3% of spend).

1.6% of members are in a complex health state (23.2% of spend).

Consumer Engagement.

58% of the time, members are making positive/optimal decisions regarding their health.

6.2% of members representing 43.7% of spend are actively engaged in a clinical program.

38.8% of the time, a UnitedHealth Premium® Tier 1 provider is utilized.

Where your employees live influences your outcomes.

Gaining a clear understanding of the communities where your employees live helps provide a wealth of information about the barriers they may face in maintaining or improving their health and well-being. These barriers can translate into diminished outcomes for your organization.

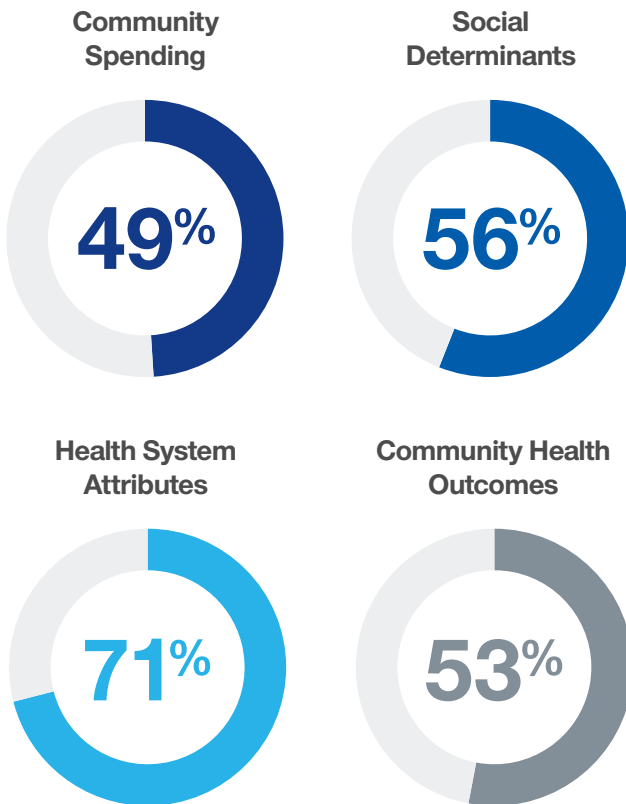
Research conducted using the proprietary Optum® CommunityHealth dataset identified four primary domains that influence employee health. They are:

- **Community Spending** — The high costs of health services can burden communities and create financial hardship for individuals. This domain identifies and ranks a community's overall spend.
- **Social Determinants** — A community's resources and attitudes can have a large impact on individual health. Measurement factors include: community engagement, health literacy, individual engagement, addictive behavior, healthy communities, insurance levels and obesity prevalence.
- **Health System Attributes** — Affordable and quality health care requires a health system prepared to supply it. System attributes include: health information technology adoption, integration, payment incentives and access to care.
- **Community Health Outcomes** — The path to health can be measured by looking at the treatments people received to see if care was appropriate and necessary. Indicators include: life expectancy, well-being, avoidable utilization, care-match patient goals, evidence-based care and preventive services.

*Employee over the age of 40.

These are the average national percentiles of more than 100 million patients within the four domains.* The higher the percentile, the more advantaged the community is and the more likely an employee population is to enjoy greater health and well-being.

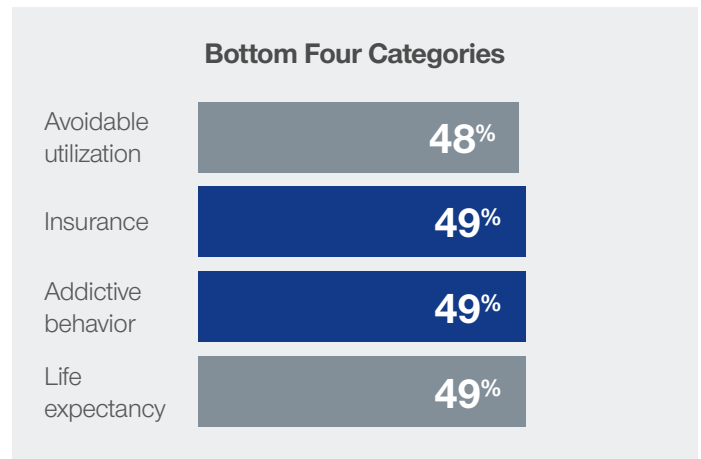
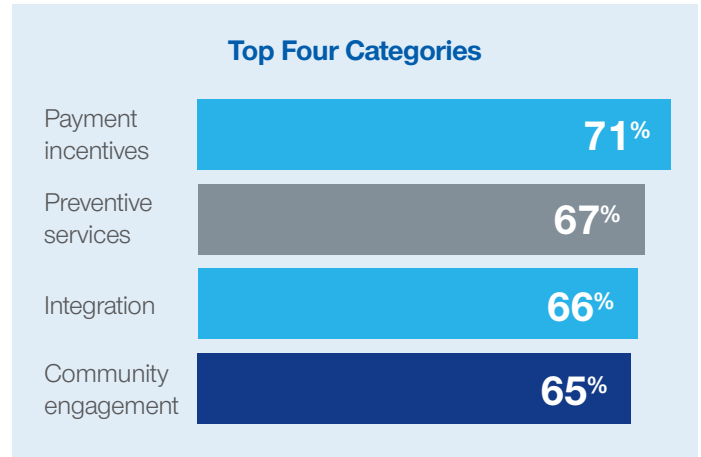
Each of these domains contribute to the actuation of per member per month (PMPM) costs, claim risk scores, emergency room visits and other consequences. The true value of this data is that it identifies the best- and-worst performing measures for a specific community, revealing both opportunities and challenges.



*Based on 16 data sources from 2013-2014.

Variations by community yield actionable insights.

Within each of the four primary domains that influence employee health are subset health metrics identifying the best- and worst-performing measures. The best and worst nationally are shown here.



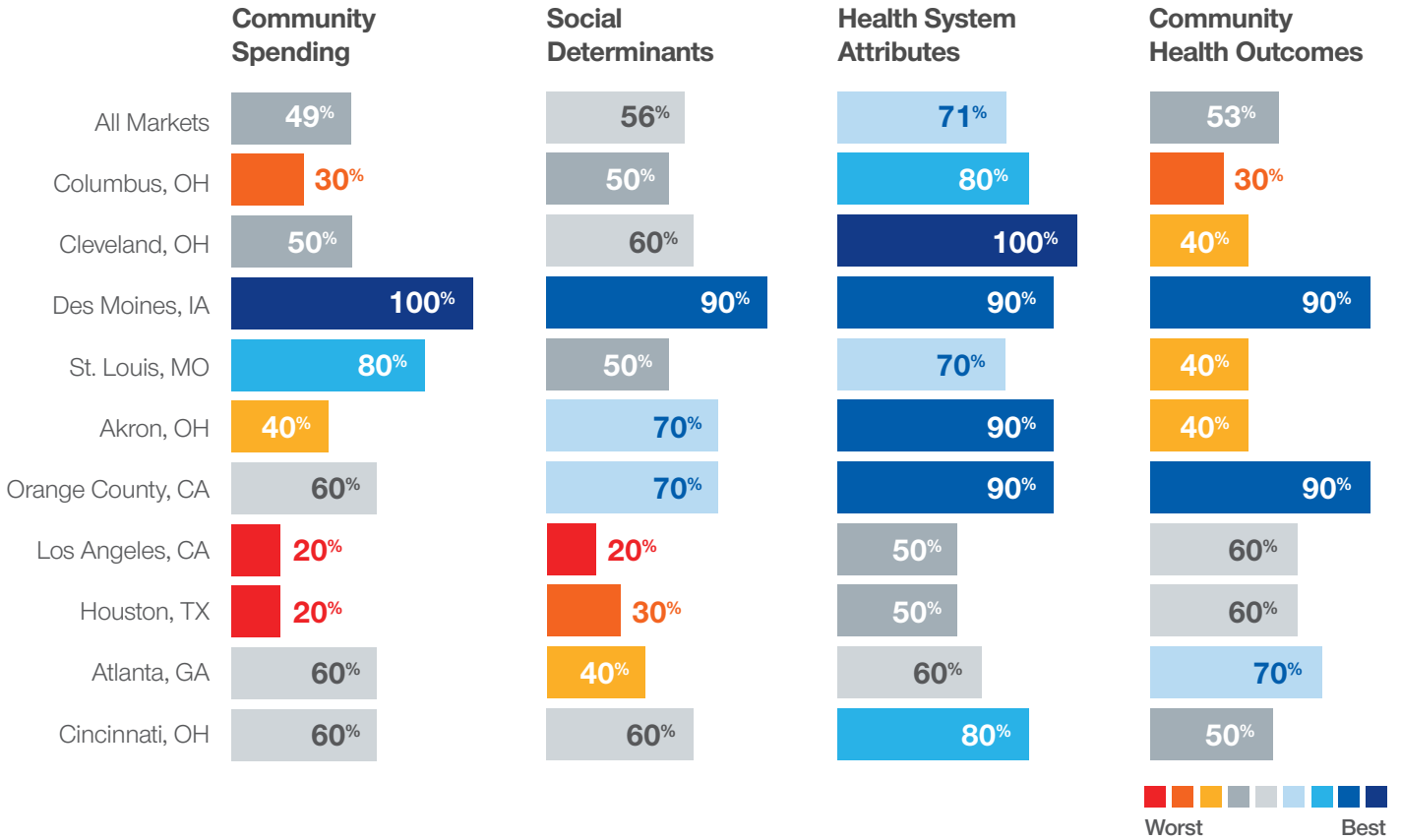
- Community Spending
- Health System Attributes
- Social Determinants
- Community Health Outcomes

How we know what we know: Optum CommunityHealth.

The Optum CommunityHealth framework is a dataset that enables us to understand how local factors — social determinants, community outcomes, health system attributes — influence the health of particular populations. It tracks close to **100** health metrics in more than **300** communities nationwide, enabling researchers to quickly visualize and understand key differences and similarities across markets.

The proprietary dataset provides researchers with information from more than **100 million** patients. All data is anonymized to ensure patient privacy.

By understanding these best vs. worst variations, you can identify a population's unique needs. This helps employers determine which interventions can deliver the greatest ROI to improve your employees' health.



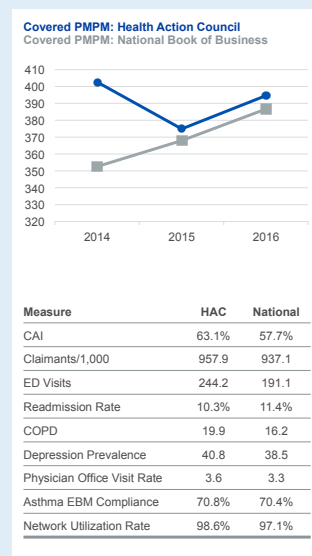
Getting granular with market-specific analysis.

The Optum CommunityHealth dataset delivers a range of metrics for a particular community. In each dataset:

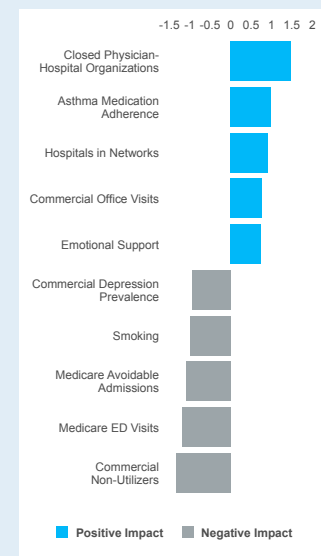
The left section provides the measurements — the vital signs — that make up the four domains.

Vital Signs Category	Rank
Community Spending	
Population Spending Burden	30 th
Social Determinants	
Addictive Behavior	20 th
Obesity	30 th
Insurance	30 th
Healthy Communities	60 th
Individual Engagement	70 th
Health Literacy	80 th
Community Engagement	80 th
Health System Attributes	
Care Access	50 th
HIT Adoption	70 th
Payment Incentives	70 th
Integration	80 th
Community Health Outcomes	
Life Expectancy	20 th
Avoidable Utilization	30 th
Well-Being	50 th
Care Match Patient Goals	50 th
Evidence-Based Care	60 th
Preventive Services	70 th

The middle section denotes Health Action Council-specific metrics for that community compared to national data.



The right section identifies the top and bottom five measures specific to a community.

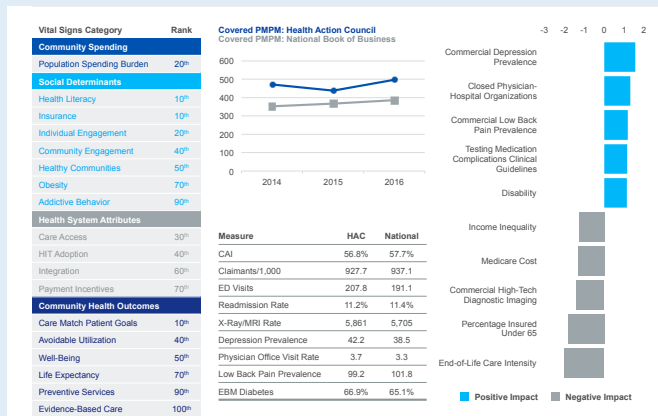


Three communities, three different challenges and opportunities.

In this comparison, there are contrasts between Houston, Columbus and Des Moines. For example:

- Health care is affordable in Des Moines; the cost of care is burdensome in Houston and Columbus.
- Houston ranks poorly in health literacy and individual engagement compared to Columbus and Des Moines.
- Non-utilization of health care services is a challenge in Columbus and Des Moines.

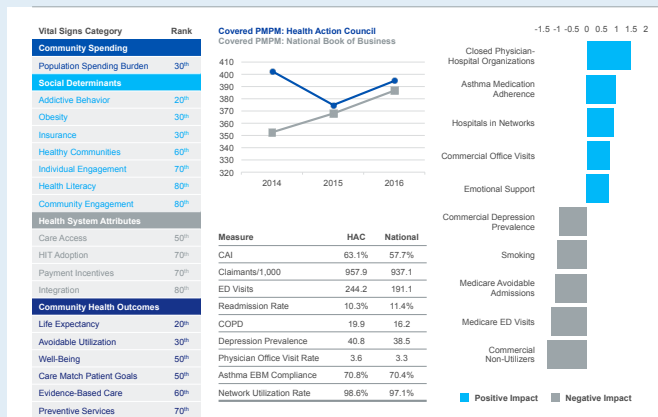
There are also specific insights for each community.



Houston, TX: 40th percentile.

For Houston, the Optum CommunityHealth dataset reveals a higher cost of care reflected in Health Action Council-covered costs.

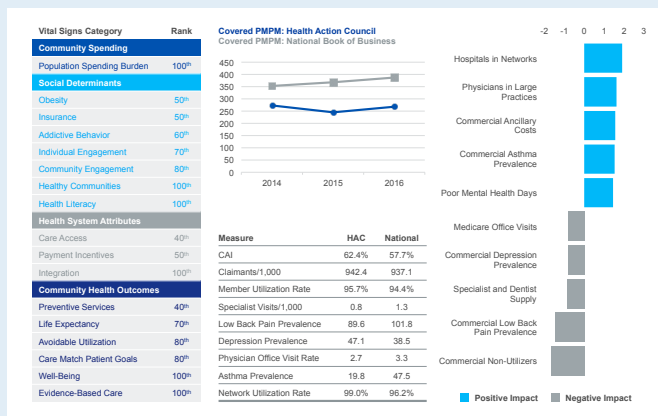
The higher rate of emergency department visits identified here could be impacted by multiple determinants (health literacy, care access, individual engagement, etc.).



Columbus, OH: 48th percentile.

For Columbus, the high-ranking individual engagement determinant is corroborated by the Health Action Council consumer engagement score.

High chronic obstructive pulmonary disease (COPD) rates among Health Action Council member communities could be driven by the poor addictive behavior rank.



Des Moines, IA: 93rd percentile.

For Des Moines, the low cost of care is reflected in Health Action Council-covered costs and a strong health literacy ranking coinciding with high consumer engagement scores.

In addition, the insights reveal extremely low asthma prevalence in this market, an advantage for employee health and employer growth strategies.

Large images of these datasets and those for Cleveland, St. Louis, Akron, Orange County, Los Angeles, Atlanta and Cincinnati are available online at healthactioncouncil.org.

Turning community health data into action.

For Health Action Council's member communities, these data points lead to several key findings.

As community measures become more favorable:

- Markets with higher rates of college graduates and median household incomes demonstrate stronger consumer engagement in health care decisions.
- Markets with lower median household incomes and higher poor mental health days demonstrate higher rates of emergency room use.



Medical costs decline.



Emergency room utilization declines.



Population risk declines.



Health engagement increases.

Additional correlations exist between:

- Poor mental health days in a community and consumer engagement in health.
- Median household income and compliance with evidence-based medicine for diabetes.
- Smoking rates and claim risk.
- Obesity rates and claim risk.

These insights, together with the dataset for your employee community, provide leading indicators that can deliver a starting point for strategies to improve population health. They will also help your organization to determine new areas for growth by answering questions such as:

Where will your investment have the most impact?

What headwinds do your employees face in improving their health and, ultimately, their productivity?

What communities are more suitable than others for expansion?

With new data analytics, these questions and others can be answered with greater clarity.

Conclusion.

Your community can tell you more than you might have imagined about your employee population. Health Action Council, working with Optum CommunityHealth analytics, hopes these insights will help you understand, anticipate and improve your employee population's health.



About the Health Action Council.

Health Action Council is a not-for-profit organization representing large employers that enhances human and economic health through thought leadership, innovative services and collaboration. We provide value to our members by facilitating projects that improve quality, lower costs and enhance individual experiences, and by collaborating with key stakeholders to build a culture of health.

About Optum.

Optum is a leading information and technology-enabled health services business dedicated to helping make the health system work better for everyone. With more than 100,000 people worldwide, Optum delivers intelligent, integrated solutions that help to modernize the health system and improve overall population health. Optum is part of UnitedHealth Group (NYSE:UNH). For more information, visit optum.com.

About UnitedHealthcare.

UnitedHealthcare is dedicated to helping people nationwide live healthier lives by simplifying the health care experience, meeting consumer health and wellness needs, and sustaining trusted relationships with care providers. The company offers the full spectrum of health benefit programs for individuals, employers, military service members, retirees and their families, and Medicare and Medicaid beneficiaries, and contracts directly with more than 1 million physicians and care professionals and 6,000 hospitals and other care facilities nationwide. UnitedHealthcare is one of the businesses of UnitedHealth Group (NYSE: UNH), a diversified Fortune 50 health and well-being company.

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