

Optum Performance Analytics An integrated enterprise analytics platform for health plans

Health plans today face pressure on many fronts, from rising medical costs, regulatory changes, the transition to value-based care and public health events. Succeeding in the current environment of persistent change and uncertainty requires in-depth knowledge of how analytics can provide a holistic view of membership and deliver insights that enable leaders to take the right action quickly.

Unlike point solutions for claims data analytics, Optum[®] Performance Analytics is an integrated enterprise analytics platform that serves multiple use cases across claims and clinical analytics. It provides a single, consistent line of sight across current state and future risk for providers, employers and individual members. The result is greater efficiency and lower total cost of ownership.



Optum Performance Analytics allows health plans to:

- Increase analytic impact and efficiency with an integrated view of cost, quality and risk
- Coordinate care management proactively through advanced identification and stratification (ID Strat), social determinants of health (SDOH) and care workflow system integration
- Enhance provider collaboration with improved network analytics
- Streamline data sharing for reporting and quality programs, minimizing cost and administrative burden



Precision resourcing: Bringing the right resource at the right time

• SDOH

• AI/ML

Specialty analytics talent

Actuarial

IT services

Strategy

BI solutions

X

Optum has a proven track record in health care data and analytics

Frost and Sullivan:

Population Health Management Company of the Year (2021)

IDC: Leader in U.S. Population Health Analytics MarketScape (2022)

Everest Group: PEAK

Matrix[®] Assessment Leader in Healthcare Analytics Services (2022)

Avasant: Leader in Healthcare Payor Digital Services (2022)

Fortune: World's Most Admired Health Care Company in Insurance and Managed Care (awarded to Optum parent company, UnitedHealth Group, 2011-2019)

What you can do with Optum Performance Analytics

Health plans use Optum Performance Analytics to improve efficiency and effectiveness in four critical competencies for value-based care: medical economics, impactful care management, provider network strategy and employer group reporting.



Medical economics

The risk management solution used by over 70% of health plans

- Analyze drivers of trend: Unit cost, utilization, risk and more
- Benchmark plan results vs. national averages
- Predict future costs with validated risk models



Impactful care management

A longitudinal whole-person analytic view

- Identify members with rising risk, including those at risk for emergency department and inpatient utilization
- Match members to appropriate care
 management programs
- Incorporate SDOH and behavioral health in targeting
- Identify gaps in care and noncompliance with clinical standards

Provider network strategy

The industry-standard solution for retrospective network analysis

- Analyze provider performance, practice pattern variation and drivers of network efficiency
- Identify highest quality and most cost-efficient specialists and primary care providers
- Distribute provider reporting and scorecards
- Pinpoint trends in service leakage and opportunities to bring necessary services in-network



Employer group reporting

A reinforcement of your brand promise using data on value delivered

- Understand employer group performance with interactive dashboards and print-ready reports
- Track changes in per member per month (PMPM) costs and trends by service category, condition, contract and more
- · Analyze opportunities in benefit design



To learn more about how Optum Performance Analytics can help you manage clinical and financial performance and improve the health of your membership:

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