

UNITEDHEALTH GROUP

Our Mission in Action

2024 Sustainability Report



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Welcome

There are few things as vital to the human condition as good health. Every day, millions of people count on UnitedHealth Group not just to care for them when they are sick, but to help keep them healthy and well at every stage of their lives.

Our patients, members, customers and partners want what everyone wants: better health outcomes, lower costs and a more connected, more personal, more compassionate experience within every dimension of care.

Our mission is to help people live healthier lives and help make the health system work better for everyone. Drawing on our deep clinical expertise and distinct capabilities, we're applying private capital to accomplish lasting public good and societal value. This report is intended to show how the people of UnitedHealthcare and Optum are bringing our mission to life and working to ensure the sustainability of our health system for decades to come.

These efforts are rooted in the work we are doing to accelerate the essential evolution of American health care from a transactional, fee-for-service model to value-based care – which delivers better health outcomes and does so at lower cost. By incentivizing doctors to get ahead of disease, we can help more people experience more years of good health and spend less time navigating health care.

We believe AI and other technologies must play a vital role in this transition, helping empower people with smarter, more connected experiences. By reducing administrative work and providing powerful insights, we are helping clinicians apply their expertise with greater impact and more proactively manage their patients' health journeys.

Our goal is to be a good steward – of our business, of the broader health system and of the planet. It means holding ourselves accountable to the tenets of our mission that have been there from the very beginning.

We do this by empowering the next generation of clinical leaders, purposefully and responsibly embracing emerging technologies with safety and security in mind, strengthening the integrity of the data entrusted with us and the data you'll see in this report, and – above all – keeping the patient at the center.

It's a responsibility we take seriously as we adapt to a constantly evolving health system, knowing that when we deliver on our mission, we positively impact the people and communities we serve.

About UnitedHealth Group

Our mission is to 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

Delivers care aided by technology and data, empowering people, partners and providers with the guidance and tools they need to achieve better health.

Optum Health

Care delivery

Optum Insight

Technology-enabled services

Optum Rx

Pharmacy care services



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

Employer & Individual

Supporting working-age individuals and families

Medicare & Retirement

Serving older adults

Community & State

Caring for economically disadvantaged individuals

Our core values

Integrity

We do the right thing and follow through on our shared commitment to quality.

Inclusion

We welcome, value, respect and hear all voices and diverse points of view.

Compassion

We listen, advocate and act with urgency for those we serve and our colleagues.

Relationships

We work together to deepen connections and collaboration for better outcomes.

Innovation

We invent a better future by learning from the past.

Performance

We strive for high-quality results in everything we do.

Who we serve

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

Sustainability at UnitedHealth Group

Sustainability is our inspiration for long-term 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 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. The ultimate success of our company is the creation of enduring, long-term value for both our shareholders and society at large.

Our four sustainability priorities are informed by our stakeholders and reflect contemporary challenges, including access to affordable, high-quality medical care. These priorities align with our five growth pillars, representing the ways we seek to help every person who interacts with the health care system every day.



Our strategic growth priorities

- Value-based care
- Health benefits
- Pharmacy services
- Health technology
- Health financial services

Our sustainability priorities

- Helping to build a modern, high-performing health system
- Healthy environment
- Our people and culture
- Responsible business practices

Our strategic growth priorities

Value-based care

Integrating care in the clinic, in home and virtually to comprehensively serve more people in ways that achieve higher-quality outcomes at a lower cost.

Health benefits

Building on proven coverage options with innovative benefits that prioritize simplicity, affordability and better health outcomes.

Pharmacy services

Lowering the cost of drugs while integrating direct-to-consumer offerings with medical, pharmacy and community health capabilities.

Health technology

Using clinical data and AI to simplify administrative processes, support clinical decision-making, and improve transparency, efficiency and quality across the health system.

Health financial services

Streamlining payment processes to improve accuracy and the experience for providers, while making payments simpler, more convenient and affordable for consumers.

Our sustainability priorities

Building 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 commitment to building an 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 commitments to protect data and privacy, effectively manage our supply chain and help ensure the responsible use of artificial intelligence are foundational to our ambitions as a leading health care company.

2024 sustainability highlights



Building a modern, high-performing health system

575M

gaps in care closed since 2021

4.7M

patients served in value-based care models

>2.4K

current and future clinicians supported through our scholarship program



Healthy environment

Committed

to net zero across our value chain by 2050

\$15M

alternative investment in a clean energy solutions fund

~392K

gallons of water saved due to measures implemented at one of our principal offices



Our people and culture

24.6K

charities supported by employees through United for Giving

14.1M

courses completed since launching a personalized career learning platform

~38K

employees moved to a new internal position



Responsible business practices

Updated

our AI governance structure

~90%

of board members have expertise in technology and business processes

Added

a leading cybersecurity incident response firm to advise on cybersecurity matters

Helping people live healthier lives

Helping the health system work better for everyone

Building a modern, high-performing health system





Helping to simplify health care and deliver high-quality outcomes, better experiences and lower costs.

UnitedHealth Group is built on the belief that there is nothing more vital to the human condition than health care. We are committed to working with partners across every dimension of our system to bring value-based care to more people and make it easier for consumers to access the care they need.

Transitioning to value-based care

We believe in moving health care from a volume-oriented, transaction-based system to one that rewards high-quality, comprehensive and coordinated care – and delivers better outcomes at a lower cost. Enabling more people to benefit from value-based care is core to our mission and the foundation of our long-term ambition.

Empowering consumers

We are working to meet rising consumer expectations for simplicity, connectivity, accountability and transparency in health care. Through digital tools, trusted information, innovative benefit designs and payment technology, we are making it easier for consumers to find, shop and pay for their care.

Our long-term commitments

Supported by our strategic growth priorities, our long-term commitments represent specific, measurable targets, which are meant to advance our broader efforts to expand access to care, improve health outcomes and reduce costs. Initially established in 2021, our commitments are intended to hold ourselves accountable to specific markers designed to improve the long-term health of the people we serve.

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



We are on track to meet or exceed our gaps-in-care commitment. Gaps in care occur when there is a discrepancy between clinically recommended care and the actual care delivered. Closing gaps in care helps clinicians identify diseases earlier, connects patients to necessary follow-up care and leads to better long-term health outcomes. In 2024, we successfully closed more than 161 million gaps in care by caring for patients in their home, performing early interventions supported by value-based care and coordinating care for members with complex conditions. For example, we closed more than 44 million gaps in care through cancer screenings, more than 12 million through adult immunizations and more than 10 million through diabetic monitoring.

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



Since 2021, we have made consistent progress toward our preventive care commitment, helping more people access routine wellness visits, cancer screenings, vaccinations and chronic disease management support on an annual basis. We continue to see progress in older adults and those with chronic conditions, and our strategic focus on value-based care continues to support preventive care and early intervention.

Deliver 55% of our outpatient surgeries and radiology services at high-quality, cost-efficient sites of care by 2030



The cost of radiology services, like X-rays and MRIs, and common surgical procedures vary greatly across different settings. Our commitment is intended to reduce overall costs for the health system and out-of-pocket costs for consumers. We have seen notable progress over the last several years in our commercial businesses, due in part to transparent, innovative benefit designs to give consumers more choice by clearly showing the cost and quality of specific services and providers. Although regulatory changes have impacted progress within our government plans, network expansion and lower out-of-pocket costs have helped shift care to ambulatory surgery centers and freestanding radiology centers.

Invest \$100 million in philanthropic programs and partnerships to measurably advance and grow the health care workforce by 2033



The United Health Foundation has invested \$15 million into our Health Care Scholars United program since 2022, supporting more than 2,400 scholars seeking to pursue or advance health care careers through partnerships with nonprofits.

Helping people live healthier lives

Advancing value-based care for a sustainable health system that supports long-term health and well-being.

UnitedHealth Group's ambition – through Optum and UnitedHealthcare – is to help lead the transition to a health system where the needs of every patient, care provider and payer are fully aligned to deliver more-coordinated, seamless care to every person where and when they need it.

We believe moving from a transactional health system rooted in episodic patient interactions to one that prioritizes preventive, holistic care over the longer term will deliver better outcomes to the people who use it, at a lower overall cost. Working with more than 100 health plans, our integrated care model consistently delivers differentiated clinical quality through evidence-based medicine, proactive patient engagement and deeply coordinated care. Our model starts with early engagement to deliver the right preventive care, quickly detect conditions and delay disease progression. Staffed with dedicated

physicians committed to delivering patient-centered care, our Optum Health practices outperform both hospital-based and other physician-owned practices when it comes to [cost and quality](#).

We serve nearly 5 million people in value-based care models, which span dozens of geographies and serve older adults as well as those in Medicaid and commercial health plans. Many people in these care models have lower incomes and live in rural parts of the country where access to medical care can be challenging. Others are managing multiple chronic and complex conditions, making care coordination even more critical for their long-term health. The people served by Optum Health's value-based care models are more likely to receive preventive screenings, less likely to be admitted or readmitted to the hospital, and have better control of diabetes and hypertension than people in fee-for-service models.



Medicare Advantage patients served by value-based care models have better health outcomes than those in fee-for-service models.

8%–22%

fewer hospital admissions among those with COPD, asthma and other chronic conditions¹

9%

fewer overall hospital admissions¹

70%

of diabetic patients under our care have control of their A1c levels, up 7 percentage points year over year

15%

less likely to use high-risk medications that can cause adverse effects¹

~75%

of Medicare Advantage patients in our value-based care models were screened for breast cancer and colorectal cancer

18%

fewer hospital admissions for those with hypertension¹

>90%

of our Medicare Advantage hypertension patients adhere to medication recommendations

Meet Dr. Felicia

Dr. Felicia has been a physician for more than 14 years. As a child, she aspired to be a nurse, following in the footsteps of her grandmother and aunt. However, in sixth grade, a guidance counselor encouraged her to consider becoming a doctor, which planted the seed for her future career.

The sudden death of her mother when Dr. Felicia was 12 years old further cemented her ambition. The tragic event, coupled with her mother's mistrust of the medical profession, motivated her to pursue a career in medicine. She wanted to prevent similar tragedies in other families and ensure that patients received the care and trust they deserved.

Today, Dr. Felicia specializes in internal medicine, serving patients in value-based care arrangements at a multispecialty practice in Houston. Value-based care allows her to focus on preventive care and building strong, trusting relationships with her patients. It also gives her more quality time with her patients to understand their needs and barriers to care.

“The more I know about a patient and their family, the better I can connect with them on a personal level. This connection builds trust, which is essential for effective care. To me, value-based care means delivering high-quality patient care at the right time to achieve better health outcomes.”



¹ Cohen KR, Vabson B, Podulka J, et al. Medicare Risk Arrangement and Use and Outcomes Among Physician Groups. JAMA Netw Open. 2025;8(1):e2456074. doi:10.1001/jamanetworkopen.2024.56074

This year, we are releasing a Health Disparities Report. It highlights disparities that have been identified among our Medicare Advantage customers based on specific quality measures by demographic. Our business leverages this reporting to evaluate the cause and effect of disparities and to develop programs to reduce them. We are committed to transparency by reporting health disparities, the capabilities we implement to address them and the results of our efforts. This report contains data we report to the Centers for Medicare and Medicaid Services (CMS), which is used, in part, to evaluate Medicare Advantage plans performance. The race and ethnicity data are consistent with the data provided to NCQA as part of health plan accreditation which includes evaluation of health plan processes to identify and address health disparities.

Read the full [Health Disparities Report here](#).

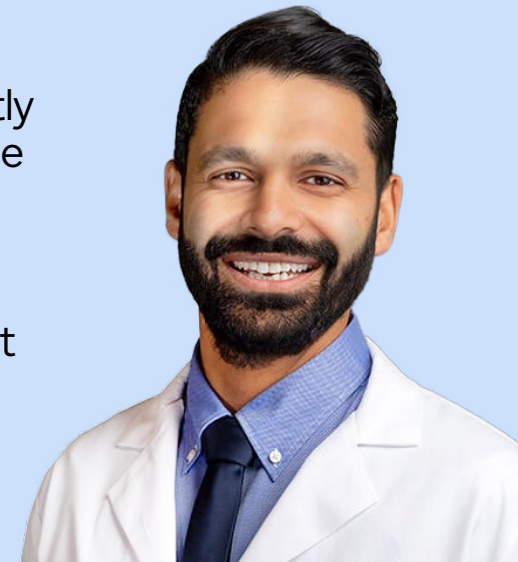


Meet Dr. Rohan

Dr. Rohan's journey to becoming a doctor was greatly influenced by his mother, a community college biology and anatomy teacher. Her passion for the subject sparked his curiosity and interest in medicine at a young age. When he started medical school, he developed a love for cardiology specifically, inspired by one of his mentors. Nearly two decades later, he's now a cardiologist in Southeast Texas, serving patients with a range of conditions from heart failure to diabetes.

Value-based care allows him to use his medical expertise creatively to address patient concerns. Unlike a fee-for-service system, he has time with patients to better understand the challenges they face in maintaining good health and come up with interventions that fit their lifestyle. It also allows him to think outside the box to provide holistic care at the right time and place, rather than addressing a single condition. He can utilize a team of clinicians - nurse practitioners, physician assistants and nurses - to help ensure his patients don't fall through the cracks.

“Value-based care is the closest to mimicking exactly why you went into medicine in the first place. It gives you that freedom to think creatively, think outside the box and put the patient at the front and build the system around them.”



Delivering a better consumer experience

We know nothing is more personal than health care and we are taking important steps to streamline and modernize how care is delivered to ensure people have access to quality, supported care when they need it.

Part of our efforts are focused on prior authorization, a pre-service check used to verify a procedure, prescription or other clinical service is safe, medically appropriate and will be covered by the member's health plan. Prior authorization also helps ensure members don't pay out of pocket for care they don't need. Over 99% of the time, our members either do not need prior approval or the approval is quickly obtained.

In 2023, UnitedHealthcare removed about 20% of its total prior authorization volume. These prior authorizations include services that already demonstrate consistent adherence to evidence-based clinical guidelines and are almost always approved. We plan to regularly evaluate codes requiring prior authorization and identify instances where it is no longer needed to ensure patient safety, quality and affordability.

In 2024, we also introduced a first-of-its-kind national Gold Card Program, which recognizes and awards provider groups who consistently adhere to evidence-based care guidelines by reducing their total prior authorization request volume.

Additionally, most Americans never go through the experience of having a claim denied. Health insurers and plan sponsors – employers, the Centers for Medicare & Medicaid Services (CMS)

and state governments – are keenly aware that access to care is critically important to the people enrolled in their plans, so they design their plans accordingly.

We ultimately pay 98% of all claims received that are for eligible members, when submitted in a timely manner with complete, non-duplicate information. For the 2% of claims that are not approved, the majority are instances where the services did not meet the benefit criteria established by the plan sponsor. Only 0.5% of claims are not approved based on clinical evidence and patient safety.

We are launching new initiatives over the next 18 months that will enable real-time, seamless engagement with providers at the point of entry to help ensure prior authorizations and claims are submitted accurately the first time. As these initiatives progress, patients and providers alike can expect a smoother, more efficient and more transparent experience that brings the focus where it belongs: delivering the high-quality care patients deserve.



99%

of the time, our members either do not need prior authorization or the approval is quickly obtained

98%

of all claims are paid for eligible members, when submitted in a timely manner with complete, non-duplicate information

~20%

reduction in prior authorization volume in 2023

Reimagining health coverage

Through innovative health benefits, we are delivering affordable, simple experiences while helping people effectively manage their health. We are focused on helping people maintain health benefits with coverage options that fit their needs, whether through their employers, individual exchanges, Medicaid or Medicare Advantage.



>50M

people served by
UnitedHealthcare

7.4M

people covered through
Medicaid plans

29.7M

consumers served in the U.S. in
employer and individual plans

30

states where we provide individual
exchange coverage in 2025

94%

of Medicare eligibles have access
to a \$0 premium UnitedHealthcare
Medicare Advantage plan in 2025

30

UnitedHealthcare plans have received
NCQA Health Equity Accreditation

We continue to prioritize stable benefits for Medicare Advantage consumers, with a particular focus on helping the most vulnerable individuals with the greatest needs. We serve as a critical safety net for those who do not have employer-sponsored health benefits and don't qualify for Medicaid. In 2025, we expanded our footprint of individual exchange plans to 30 states, which provides additional options to those seeking coverage.

Surest™, our innovative, technology-driven health plan, provides clear, up-front cost and coverage information, eliminates deductibles and coinsurance and allows people to shop for health care services before any medical visit. This transparency allows consumers to compare their options in advance and make informed decisions about their health care, ensuring they have access to high-value, in-network care providers for various needs, from wellness visits to surgeries. By simplifying the health care experience and offering peace of mind, these innovative benefits empower families to manage their health care more effectively and affordably.

For example, one company switched to our zero-deductible health plans for its employees beginning in 2019 and saw a 60% decrease in out-of-pocket spending for employees compared to traditional plans. Equipped with cost and quality information, employees accessed a primary care physician and a physical therapist more often, and were twice as likely to use telehealth.

Surest testimonials

“My wife used to have osteoporosis, but she gets a shot twice a year. ... It gives you the prices rather than waiting for the bill. It used to cost us \$1,400 out of pocket twice a year. With Surest, it costs us \$400 twice a year. That’s \$2,000 less.”

Freeman

“I think of Surest as a technology product. Being a developer myself, I am amazed with their product.”

Ambi

“With four kids, the expenses just don’t stop. ... Surest makes my life simpler. I can schedule an appointment or find a doctor right before school or while I’m waiting in the parking lot. With Surest, you are completely in control of what you’re doing.”

Katie

Compared to individuals in other commercial plans, Surest enrollees spend less and access necessary medical services more frequently.²

54%

average lower out-of-pocket costs

34%

more screening colonoscopies

>\$400

annual total cost-of-care savings per person

15%

more screening mammograms

² Data based on service dates in 2022.

Lowering the cost of prescription drugs

The pharmacy is one of the most frequent touchpoints in health care. By integrating pharmacy, medical and behavioral care, Optum Rx is providing a full spectrum of pharmacy services and benefits to 62 million consumers. Our tools and programs are helping to ensure individuals can access affordable prescription medications and therapies, comprehensively manage their complex care needs, and leverage a better, more transparent digital pharmacy experience.

In addition to capping out-of-pocket costs on 290 lifesaving medications, over the last decade we have brought down the cost of insulin so our consumers now pay less than \$18 per month, on average.

This year we made several important announcements to make the pharmacy experience more transparent and simpler for consumers, customers and pharmacies.

- Committed to pass 100% of rebates and discounts negotiated by our pharmacy benefit manager to customers by 2028. We currently pass through 98% of rebates.
- Committed to eliminate up to 25% of reauthorizations for 140 prescription drugs – equal to more than 10% of overall pharmacy prior authorizations.
- Aligned pharmacy payment models more closely to the costs pharmacies may face due to manufacturer pricing actions. This change will positively impact Optum Rx nonaffiliated network pharmacies, including the more than 24,000 independent, community pharmacies we serve.

~62M

people served through
Optum Rx

>\$2K

annual drug savings delivered
to our customers

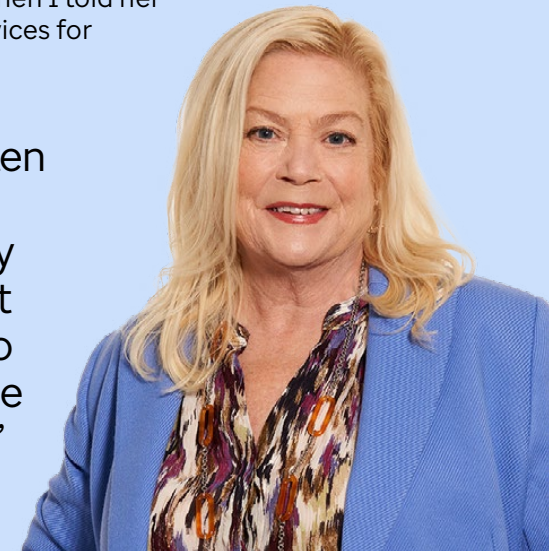
Meet Joanie

In the wake of COVID-19, Joanie found herself seeking a new career. She found one as a member advocate at UnitedHealthcare, where she has “felt at home” for over three years.

After completing 14 weeks of intensive advocacy training, Joanie dedicated herself to serving Medicaid members and patients. She is often their first point of contact, and they are met with a friendly, helpful voice on the other side of the phone ready to tackle anything from connecting them to transportation services to finding a provider or making appointments. She listens attentively and reads between the lines to understand their needs beyond their immediate benefit questions and requests.

During a recent call, a mom asked general questions about her child’s upcoming appointment. Joanie learned the woman couldn’t drive and her husband had to take time off work to bring their children to appointments. “She started crying when I told her we could provide transportation services for her family,” Joanie said.

“People who call in are often dealing with a difficult situation and I believe my easy demeanor helps put them at ease. I’m there to help them and put a smile on their face when I can.”



Price negotiation:

Pharmacy benefit managers play a vital role in holding down drug prices by negotiating directly with drug companies. We are committed to passing 100% of negotiated rebates and discounts to customers by 2028. We will encourage our clients to pass those savings directly to patients at the point of sale, which we currently do within our fully insured employer offerings.

Real-time price information and proactive alerts:

Our pharmacy app automatically scans drug prices to provide real-time price information and ensure consumers get the best price for their medications. Our automatic price scanning tool – accessible to more than 9 million people – notifies consumers when there are lower-cost options, saving an average of \$58 per prescription.

Specialty pharmacies:

Our specialty services focus on patients with complex and rare conditions, delivering integrated, high-quality care and connecting them to available financial resources. For instance, by switching patients from brand-name drugs to generics, we save clients and patients more than \$5,000 per drug.

\$134B

customer savings annually through Optum Rx PBM

~\$1B

consumer savings in 2024 through price scanning and proactive alerts

\$2.5B

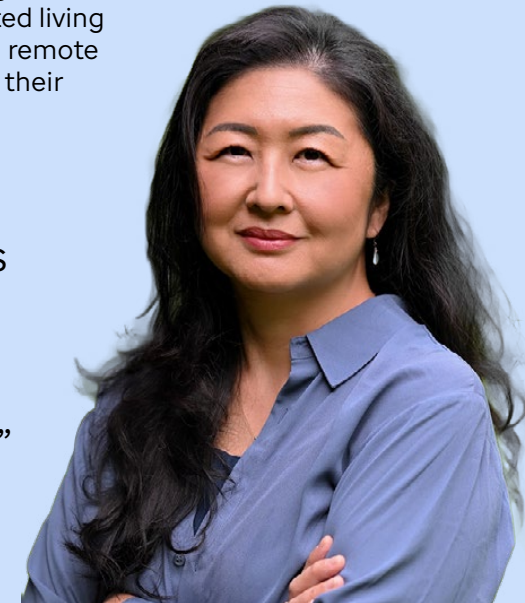
consumer out-of-pocket savings on specialty drugs through 2024

Meet Yunga

Yunga joined Optum Rx in 2014 as a pharmacist, tasked with opening the first community pharmacy site in Anchorage, Alaska, providing hands-on, personal pharmacy services to people living with behavioral health disorders and other complex conditions. Yunga’s own experience with her family’s mental health challenges has made her even more determined to help the people she serves. Over the past 10 years, Yunga has played a crucial role in managing medications for patients, particularly for behavioral health patients and elderly patients who need assistance with their primary care medications.

When a large long-term care pharmacy unexpectedly closed in 2024, Yunga stepped up to help ensure continuity of care for over 1,000 new consumers. Yunga’s leadership was instrumental in addressing the concerns of providers and families, ensuring patients continued to receive necessary medications. Yunga and her team now serve additional assisted living homes, as well as individuals living in remote parts of Alaska, which has expanded their focus into primary care.

“It’s incredibly fulfilling. Having a purpose drives you to work harder, especially when the goal is better health outcomes for everyone.”



High-quality home-based care

Today, there are nearly 13 million people dually eligible for Medicare and Medicaid, many of whom are struggling with extraordinary challenges. Nearly half of this population needs support with mental health; 1 in 4 has been diagnosed with at least five or more chronic diseases; and nearly 9 in 10 live on an annual income below \$20,000. Many live in disproportionately underserved and rural parts of the country, where access to care can be a challenge.

Home care is a key element of our value-based care approach. It is essential to delivering more equitable and accessible care to effectively address a patient's complex conditions, medication adherence, and behavioral health challenges while simultaneously addressing other critical elements of a healthy life, such as nutritious food, stable housing and reliable transportation.



~16M

home visits in 2024

>75%

of HouseCalls visits result in a primary care visit within 90 days

288K

emergent conditions detected by HouseCalls clinicians in 2024

>1.6K

rural communities supported through HouseCalls, serving 84% of rural counties in the US

Our home care models are designed to engage people who are most in need and otherwise have limited access to care. Caring for patients in their home keeps them healthy, out of the hospital, and surrounded by a team of physicians, nurse practitioners, social workers, pharmacists and others.

Meet Antonio

Almost three years ago, Antonio was struggling with multiple chronic conditions, which kept him from leaving his apartment, eating properly, or taking his medications. Optum at Home intervened with comprehensive care for high-risk patients.

Antonio now has a care navigator who ensures he attends appointments and connects him to community services. A nurse visits his home for assessments, and another nurse manages his case monthly.

Today, Antonio is 80 pounds lighter, fully compliant with his medications, regularly checks his blood sugar and attends all his appointments.



“They treat you like family. If you don’t understand something, they’re not going to stop until you understand.”

Meet Lauren

Lauren joined Optum Health in 2020 as a hospice registered nurse case manager, working with terminally ill patients and their families to provide end-of-life care. Helping people navigate one of the most challenging and delicate points in life is a privilege she holds dear. She views it not as a time of loss, but as an opportunity to offer comfort, dignity and peace.

In many cases, it means helping patients pass in the comfort of their home. In 2023, Lauren had a patient with no family, friends or caregivers to help him as he entered hospice. Complicating matters, his home was not a safe place for him to live. Lauren organized cleaning services, found an exterminator for the home, and lined up a professional caregiver, food delivery and chaplain services.

“I feel good knowing I put forth my best work every day and can go to bed knowing that I made a difference. I can lay down knowing that was achieved and that I’ll take whatever comes tomorrow.”



Supporting the health care workforce

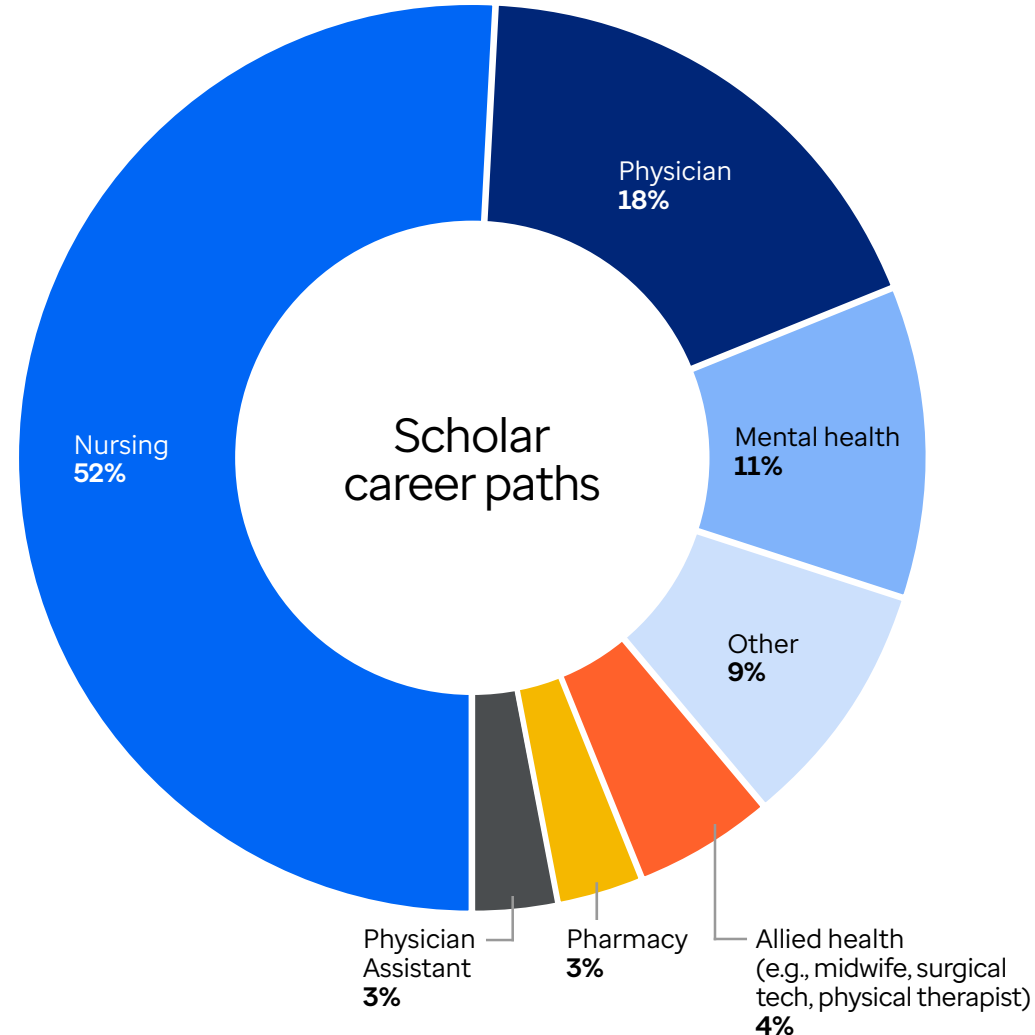
Health Care Scholars United, funded by the United Health Foundation, provides scholarships to current and future health care professionals who want to obtain or grow their clinical skills and credentials. Our goal through this program is to support 10,000 current and future clinicians by 2033 and ultimately help improve health care access, experiences and outcomes for all.

>2.4K

scholars supported via the Health Care Scholars United program through 2024

>\$15M

total amount paid to nonprofit partners through 2024 to support scholarships



Building the workforce of the future

Building a pharmacy pipeline

In 2023, through a partnership with Florida Agricultural and Mechanical University, we established a scholarship to support students in the school's College of Pharmacy and Pharmaceutical Sciences/Institute of Public Health, with a goal of increasing pharmacists in the field. A \$95,000 donation will fund more than 15 students each academic year.

Increasing community health capacity

In 2024, UnitedHealth Group and Goodwill Industries International initiated development of a national health care career pathway program to increase capacity and promote care access. This training for two career pathways (community health workers and doulas), is addressing a critical market gap in early community-based health care roles.

Addressing nurse burnout

A \$3.1 million United Health Foundation partnership with the American Nurses Foundation is helping to address nurse burnout by removing the stigma associated with seeking mental health support. It offers nurses a new peer support and leadership model to help them use mental health resources earlier and more effectively. A 28% decrease in burnout was reported by nurses after six months in a pilot implementation at four hospitals. The full program is now available for nurses across the U.S.



Helping the health system work better for everyone

Empowering consumers by delivering simpler health care experiences and easier access to care to reduce complexity and lower overall costs.



At UnitedHealth Group, we are committed to improving health care for all individuals, not just a select few. U.S. consumers have a significant impact on health care spending, directly influencing more than \$2 trillion. They expect seamless, intuitive digital experiences integrated effortlessly into their daily lives, and they want to be able to do it all from the palm of their hand.

Ultimately, consumers want a health system that works better – one that is less confusing, less complex and less costly. We recognize there are inherent challenges to simplifying health care, but we are committed to fundamentally changing the way people engage with the health system by building on its unique strengths to ensure services are accessible anytime, anywhere. We are working to meet rising consumer expectations for simplicity, connectivity and transparency in health care. Through digital tools, innovative benefit products and integrated, real-time payments, we are driving toward a consumer-centric and modernized health system.

122%

year-over-year increase in UnitedHealthcare app visits

20%

year-over-year reduction in follow-ups after an initial member call

2x

increase in app usage in 2024

4.3B

pieces of paper saved since 2022

Digitizing the health care experience

Reducing the health system's reliance on paper is a significant step forward in modernizing health care transactions to enhance efficiency, reduce costs and improve patient care. This shift helps reduce the environmental impact and plays an important role in enhancing the overall health care experience for both providers and patients.

Research shows simple, fast communications accessible at any time are the top reasons consumers consider switching to paperless delivery, with nearly two-thirds indicating they are most motivated by the ability to quickly receive communication digitally rather than waiting for it in the mail. Our shift to paperless communication has also saved more than \$235 million since 2022.

2.7B

pieces of paper saved in 2024

26%

decrease in inbound paper since 2021

35%

increase in digital submissions from providers since 2022

Meet Marta

Marta started her career at UnitedHealthcare as an intern more than 10 years ago. Now, she leads work within our Consumer Product Office to enhance digital tools, including the UnitedHealthcare app. Her team's efforts have led to significant improvements, including expanding app eligibility for new members and creating a seamless in-app scheduling experience for transportation benefits. Marta and her team are dedicated to staying ahead of industry trends and incorporating AI within the app in partnership with the chatbot team to further enhance the user experience and help consumers get answers to their questions faster and easier.

“It's not just about adding new features; it's about making health care more accessible and less stressful for everyone. Seeing our members benefit from the work we do drives me to keep pushing boundaries and innovating.”



Addressing social drivers of health

In collaboration with our partners, we continuously work to identify and address various social drivers of health, such as food security, housing stability and access to health care. We use health and social data with input from consumers, physicians and community partners, and we apply predictive analytics to identify those at risk for social barriers and connect people to community resources to close gaps.

Nearly 9 million of our UnitedHealthcare members were screened for health-related social needs in 2024. We referred more than 1.1 million people to support services. Housing instability, nutrition and utilities continue to be high-priority needs, and we continue to expand our support strategies.

Affordable housing

Data shows people experiencing homelessness are less likely to access preventive care and more likely to visit the emergency department or be admitted to the hospital. More than 20% of the housing developments we have invested in are built with on-site or near-site health and social services made available to residents.

\$1.2B

committed to housing investments since 2011

>32K

homes created across 33 states and the District of Columbia since 2011

Among residents with on-site services:

85%

have an established relationship with a health care provider

95%

had a checkup in the past year



To help combat housing insecurity and drive better health outcomes, we provide personalized housing navigation, invest in housing capacity, and integrate health and social service systems.

In Atlanta, Georgia, we partnered with affordable housing and community organizations to make an \$18 million investment toward a \$24 million redevelopment project of a property that has been vacant since 2004. The new building opened in 2024 with 88 affordable one- and two-bedroom apartments for families earning between \$30,000 and \$40,000 annually, and services to promote health care access and workforce readiness training.

Nutrition and utilities

Older adults increasingly expect consumer-friendly resources to simplify and personalize their health care experience. We are investing in product innovations and capabilities to simplify, coordinate and personalize consumer interactions, while also addressing social drivers of health like food and transportation.

Nearly 7 million people in Medicare Advantage use an all-in-one integrated card that combines the member ID with payment technology to purchase food, pay utility bills, spend earned rewards and receive the most value from their benefits. In 2025, we will expand card access to group retiree Medicare Advantage members, while integrating new features to drive engagement, satisfaction and benefit use.

Our innovative transportation experience helps older adults with mobility challenges access care, allowing them to schedule rides to medical appointments. Today, more than 2.1 million Medicare Advantage members have access to our transportation platform.

3.8M

rides to a medical appointment
provided in 2024



Community-based care

Our population health models – coordinated through our businesses and the United Health Foundation – are developed through direct engagement with communities to identify specific needs.

UnitedHealthcare has community-based interventions established in more than 20 locations, half of which are focused on chronic condition management, including diabetes, hypertension and obesity. As a result, since 2021, we have seen a 63% reduction in A1c levels and a 56% reduction in blood pressure among patients participating in programs focused on diabetes prevention and maintenance.

In 2024, the United Health Foundation had initiatives in 18 states and the District of Columbia, including disaster relief efforts and partnerships to help people in underserved communities manage chronic disease and access preventive screenings and behavioral health services.

>\$105M

philanthropic support in 2024

Cancer screening
A \$2.3 million grant partnership with the United Health Foundation and Mary Bird Perkins Cancer Center developed and scaled a cancer prevention and detection program aimed at addressing disparities in prostate and colorectal cancer through education and no-cost prostate cancer screenings for underserved, at-risk communities.
>4K community members engaged since 2023
2.2K prostate and colon cancer screenings provided to at-risk individuals to date

Maternal and infant health
In partnership with Samuel U. Rodgers Health Center and local community-based organizations, we have increased access to pre- and post-natal care, behavioral health screenings, dental visits, and resource navigation for women in Missouri.
50% of participants increased postpartum care engagement
66% reduction in low birth weight prevalence

Diabetes prevention
Partnering with organizations throughout St. Paul, Minnesota, we are addressing food insecurity and chronic conditions through education, food resource navigation, and access to locally grown medically- and culturally-tailored meals.
68% of participants had a decrease in A1c
55% had a decrease in blood pressure
A \$3 million grant partnership with the United Health Foundation and the Hispanic Federation focuses on preventing diabetes in Atlanta, Dallas and Houston by encouraging physical activity and other healthy habits.
>2K patients served since 2023
9% no longer considered prediabetic

Reducing pediatric disparities

A \$3 million grant partnership between the United Health Foundation and Children's Minnesota is addressing pediatric disparities in the Twin Cities around asthma, vaccinations and mental health.

>30K screenings provided for health-related social needs since 2023



Managing chronic disease

In partnership with health centers and community organizations, we are providing diabetes education and access to fresh, healthy foods for patients in Hawaii living with chronic disease and experiencing food insecurity.

>3.7K pounds of food delivered to communities in need

69% of patients had a decrease in A1c, and 76% had a decrease in blood pressure

A \$1.8 million grant partnership between the United Health Foundation and the Indian Health Care Resource Center of Tulsa developed a comprehensive program to support older Native American adults and their caregivers, featuring diabetes management and screening for high blood pressure and dementia.

38% reduction in the percentage of patients with uncontrolled diabetes since 2021

In partnership with the University of Tennessee Health Science Center, we are providing community-based health coaches to help people improve lifestyle behaviors.

86% of patients received comprehensive screening for hypertension, diabetes and obesity

54% of participants saw a reduction in systolic blood pressure



Behavioral health care

A \$2.9 million United Health Foundation grant with the National Health Care for the Homeless Council is incorporating new behavioral health services into short-term residential care for people experiencing homelessness across Florida, Minnesota and North Carolina. The partnership has helped expand access to behavioral health for rural and urban populations experiencing homelessness.

~800 patients served since 2022

46% of patients connected to mental health services

A \$3.2 million grant partnership with East Carolina University and the United Health Foundation is expanding a statewide telepsychiatry program to support the mental health and well-being of youth in North Carolina. The grant has embedded behavioral health providers at community pediatric care clinics and helped fund the development of a virtual reality video game to educate children and families about mental health and well-being.

27K children screened for behavioral health concerns to date since 2023



Building trusted patient relationships

Trust is the foundation of a patient’s relationship with their care provider. Helping patients connect and build a relationship with a doctor they trust is incredibly important for patients’ health outcomes and satisfaction, as well as a clinic’s financial health. Trust extends to care advocates, navigators, in-home clinicians and dozens of other people invested in supporting any one individual.

Additionally, patients want greater personalization in health care. They are looking for care customized to their preferences, based on who they are and how they want to experience the health system. Using data and insights to identify care disparities and patient preferences, we are helping build stronger patient-provider relationships and creating an environment where people feel comfortable with anyone involved in their care.

92%

satisfaction rating for our customer care advocacy programs

99%

satisfaction rating for our HouseCalls program

Optum Match

Around 80% of patients looking for a new doctor do so due to incompatibility, leading to an estimated \$1.8 billion in annual patient attrition costs. Launched in New Mexico in 2024, Optum Match uses a survey and algorithm to connect patients with compatible clinicians whose communication style, clinical services and ability to provide care is aligned with patients’ values, culture and needs. Optum Match guides clinics toward the types of person-centered care they can invest in to better meet patients’ needs and build stronger, longer-lasting relationships. Ninety-one percent of Optum Match patients rated their experience as satisfying, and the program is planned to launch to over 2,500 clinicians across the United States in 2025.

Complex Health Advocacy

Our Complex Health Advocacy program has supported approximately 350,000 families through reduced administrative and clinical barriers, with specific attention paid to children with special needs. These families – facing challenges such as sickle cell anemia and rare genetic diseases – often require frequent medical care and are part of underserved populations. The program’s dedicated single point of contact has led to a 94% satisfaction rate, an 89% issue resolution rate and better health outcomes.

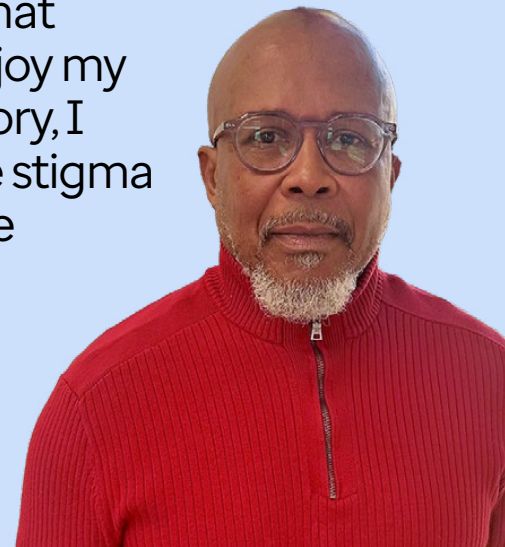
Meet Anthony

Anthony, a retired clinical social worker, has always been passionate about helping others. When he was diagnosed with prostate cancer at the age of 60, he found himself looking for help of his own.

At Mary Bird Perkins Cancer Center (MBPCC) in Baton Rouge, Louisiana, Anthony found support and positivity from the care team and a brotherhood among fellow cancer patients.

Through a \$2.3 million grant from the United Health Foundation, MBPCC offers additional prostate and colorectal cancer education, screening and support for historically underserved individuals across Louisiana. The partnership has increased the number of prostate and colorectal cancer screenings provided through MBPCC’s no-cost screening program by nearly 50% in 2024. Now a cancer survivor, Anthony has been instrumental in spreading awareness about prevention and early detection.

“I’m grateful every day that I’m still here and can enjoy my family. By sharing my story, I hope to break down the stigma associated with prostate cancer screenings and encourage others to take proactive steps toward their health.”



Using AI to make health care work smarter

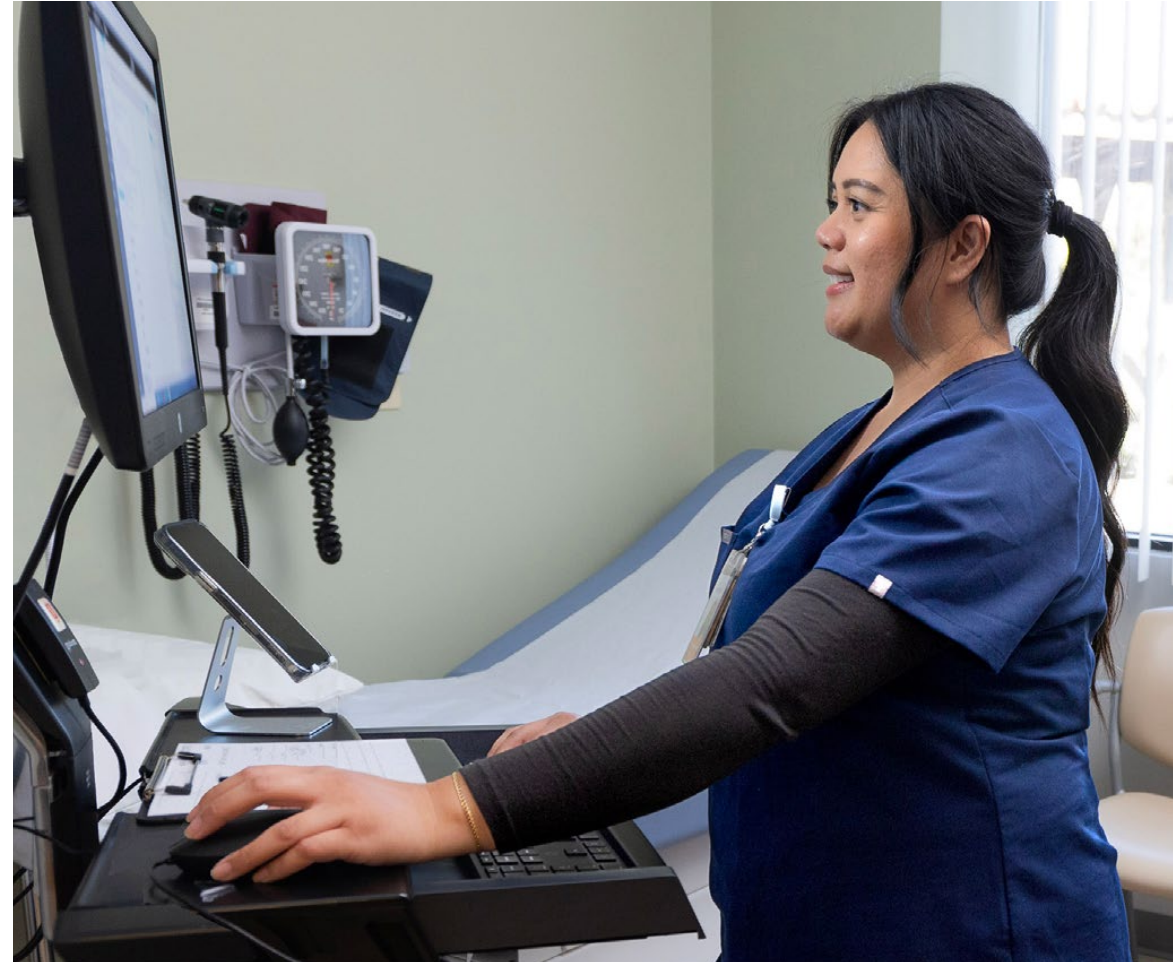
We are focused on developing and deploying tools to empower people with better insights, more timely information and better experiences, while also keeping safety, privacy and transparency at the forefront of our thinking. We seek to ensure artificial intelligence (AI) models are used safely and responsibly to enable and support – but not replace – critical human decision-making.

Consumer and customer experience:

AI powered more than 50 million consumer interactions across UnitedHealth Group in 2024. The AI-powered provider search capabilities are now being used millions of times each month, helping people find the care they need more simply and intuitively. AI chat and voice capabilities have been fully scaled, enabling consumers to get easy questions about coverage answered quickly without needing to connect with a person, which has led to a 5% reduction in overall call volumes, a 15% decrease in average resolution times, and a 20% increase in consumer digital NPS year over year.

Administrative simplification: We are using AI to automate and streamline administrative tasks, like digitizing benefits information, which aims to reduce administrative waste, improve coding accuracy and cut clinical documentation review times in half. This expansion is supported by a tenfold increase in engineers using generative AI software development tools compared to the previous year.

Clinical and medical insights: AI-powered transcription capabilities are being rolled out to physicians and front-line nurses across our care delivery organization. These capabilities allow clinicians to be fully present with patients, reducing the time spent on administrative tasks and improving the quality of patient care. AI-generated summaries of patients' medical histories are also being used to support nurses making HouseCalls visits.



Using data to improve our nation's health

For the past 35 years, *America's Health Rankings*® has served as the longest-running state-by-state analysis of the nation's health. In addition to the *America's Health Rankings Annual Report*, we publish detailed analyses on the health of specific populations (including women and children, older adults and others) as well as a deep dive into health disparities across the country.

These findings inform our business and investment strategies, including grantmaking and community partnerships. Public health policymakers, researchers, academics and media members also rely on these reports to inform health initiatives. This data – in conjunction with analyses of our own members – provides a comprehensive view of national health benchmarks, state rankings and population-specific disparities.

The *America's Health Rankings 2024 Annual Report* data shows frequent mental distress among adults increased by 32% between 2011 and 2023, drug deaths rose by 170% between 2007 and 2022, and diabetes and obesity have become more prevalent.

- Our network of behavioral health professionals care for more than 48 million people, including through convenient virtual and digital tools.
- We have invested in partnerships with organizations such as Native American Connections and the National Health Care for the Homeless Council to better serve patients with behavioral health issues and chronic disease.
- Optum Behavioral Health offers virtual coaching for mild depression, stress and anxiety.
- We're using predictive analytics to identify and address social drivers of health, screening millions of members and connecting them to community resources.

The *America's Health Rankings 2024 Health of Women and Children Report* shows maternal mortality increased 34% between 2014-2018 and 2018-2022. Child mortality has also increased 14% between 2017-2019 and 2020-2022.

- The United Health Foundation has committed approximately \$20 million in investments directed toward youth and maternal and infant care, including partnerships dedicated to improving access to pediatric care and a maternal health cohort designed to improve prenatal and postnatal care as well as grow and support the doula workforce.

In 2024, we continued to invest in our maternal and infant health offerings to support our Medicaid and commercially covered mothers, babies and pregnant individuals each step of the way by implementing and expanding the following:

- **Doula reimbursement:** We manage perinatal doula benefits for 22 Medicaid community plans. High-risk Medicaid members who used a doula saw a 38% lower NICU rate and a 28% reduction in the rate of low birth weights than their peers who did not use a doula. Commercial fully insured plans will have access to doula reimbursement programs in all 50 states by 2027.
- **Virtual care:** By the end of 2024, 2.6 million commercial members had access to comprehensive, personalized

virtual pregnancy and postpartum support, including 24/7 access to 30+ types of specialty counselors providing personalized support for pregnancy, postpartum, return-to-work and more.

- **Value-based care:** We implemented reimbursement models, where applicable, to improve outcomes and quality of care for our pregnant and postpartum members.

Creating a healthier planet for a healthier society
Decarbonizing our operations for a healthier environment
Conserving resources
Our path to net zero



Healthy environment

Creating a healthier planet for a healthier society

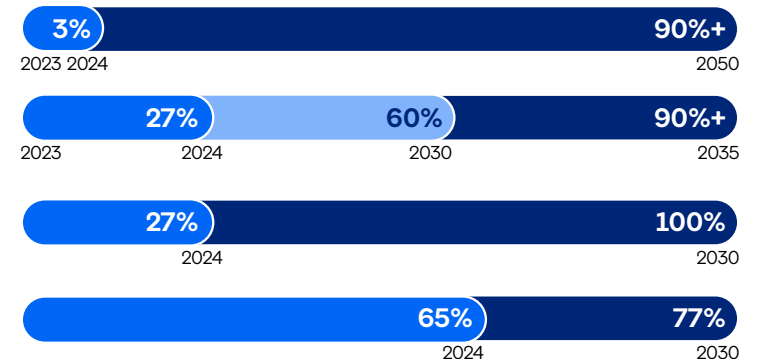
Extreme weather events are increasing in frequency and intensity.³ In addition to physical destruction and the displacement of people, wildfires, floods and hurricanes can make it difficult to access essential health care. Prolonged periods of intense heat, unhealthy air quality and contaminated drinking water pose health risks, particularly for communities with fewer resources to manage the impacts of climate change.

The health care sector contributes as much as [10% of U.S. greenhouse gas emissions](#). UnitedHealth Group is committed to reducing our emissions, including achieving operational net zero by 2035 and net zero across our value chain by 2050.

We are working to build a more resilient health system – one that can address the growing environmental challenges facing our members and their communities. This includes near-term adaptive solutions like offering telehealth behavioral health consultations, as well as long-term commitments to help mitigate the impact of our carbon emissions.

Our commitments⁴

- Achieve net zero across the value chain by 2050
- Achieve a 60% reduction in Scope 1 and Scope 2 emissions by 2030*. Reach operational net zero by 2035
- Source 100% of our global electricity demand with renewable sources by 2030⁵
- Have 77% of suppliers (by Category 1 and 4 emissions) set science-based targets by 2030*



*Validated by the Science Based Targets initiative (SBTi)

³ [Intergovernmental Panel on Climate Change \(IPCC\), Climate Change 2023: Synthesis Report](#)

⁴ Following the Greenhouse Gas Protocol's advised approach for recalculating base year emissions, as well as guidance from the Science Based Targets initiative (SBTi), we have updated our base year to 2023, as it better reflects our current operations and footprint. This change applies to all targets.

⁵ For UHG's 100% renewable electricity commitment, we will match our annual electrical usage with renewable energy from a portfolio of sources.

Decarbonizing our operations for a healthier environment

Reduce

Decreasing consumption and emissions

In 2024, UnitedHealth Group completed energy efficiency project work resulting in a reduction of 1,185 metric tons of carbon dioxide equivalent (MTCO₂e), which included retrofitted lighting in one of our principal offices to replace 30,000 fluorescent light bulbs with LED bulbs. This resulted in a 17% reduction in the electrical load compared to 2022 and expected annual energy and maintenance savings of over \$350,000. We also expect a reduction of 1,342 MTCO₂e from in-progress and future energy efficiency projects, equivalent to taking 313 cars off the road each year.

We have fully developed sustainable design standards for renovations and

new construction. The standards focus on energy efficiency strategies, including lighting fixtures, HVAC and water heater upgrades and solar readiness. We expect reduced emissions and annual utility savings of 29%-46% or more at sites where the standards are applied.

We deployed 22 Building Management Systems (BMS) in our real estate portfolio in 2024, in addition to 12 BMS in 2023. These systems reduce energy consumption and provide enhanced operational reporting. We have seven BMS deployments scheduled for 2025 and will also be piloting a heating and cooling system fault detection platform at three of our sites.

Replace

Switching to lower-emission alternatives like renewable energy

The Mockingbird Solar Center came online in Texas in November 2024. We invested in this solar project in 2023 with a virtual power purchase agreement for 250 megawatts (MW) of renewable electricity – more than half of the project's 468 MW available capacity. Tres Bahias, another 2023 investment in renewable solar energy in Texas, also came online in 2024.

We completed construction of our own solar project at one of our principal offices, which is expected to generate enough electricity to meet 50% of the site's needs. The system will begin producing power in 2025.

Remove

Purchasing carbon removals

We will purchase carbon removals to address the remaining 10% or less of emissions to help us reach net zero.⁶

⁶ Though carbon removals are not a cornerstone of our plan, we will employ them as one lever of our net-zero strategy to address emissions we are unable to eliminate.

Decarbonizing our supply chain

Making progress toward net zero means engaging partners beyond our walls.

We have always viewed our suppliers as partners in our journey toward net zero. We now have a validated science-based target in place to hold ourselves accountable and ensure their progress is aligned with climate science. By 2030, we expect 77% of our suppliers by emissions covering purchased goods and services and upstream transportation and distribution will have set their own science-based targets. This is a critical step toward reducing Scope 3 emissions – the largest portion of our carbon footprint – and achieving net zero.

- Our updated [Supplier Code of Conduct](#) encourages suppliers to track, report and minimize their emissions, set science-based reduction targets aligned with limiting global warming to 1.5°C above preindustrial levels and engage with their own value chain partners on sustainability and climate-related issues. We also ask suppliers to disclose complete assured emissions data through CDP (formerly Carbon Disclosure Project).
- In 2024, UnitedHealth Group was approved to join Energize as a program sponsor. Launched by global leaders in the pharmaceutical industry in collaboration with Schneider Electric in 2021, Energize is helping to decarbonize the pharmaceutical supply chain by engaging suppliers through trainings and opportunities to contract on renewables projects.

Investing in a healthier future

Our regulated insurance companies require significant capital to support our core health insurance offerings. Our investment portfolio is made up of a diversified fixed income portfolio. The main objective of our investing strategy is to protect capital and earn an attractive risk-adjusted return. We do not apply exclusionary principles to our investment processes. We measure the temperature score of our investments and have set targets to reduce this over time.

We are working with our external asset managers to help ensure our investment strategy supports our sustainability goals. Integrating environmental data into our investment decisions not only supports our sustainability goals, but it also enhances returns by mitigating risks associated with climate change.

We measure financed emissions that are derived from our investments that support our health insurance business using the Partnership for Carbon Accounting Financials framework. In 2024, we introduced science-aligned targets for reducing these emissions. These targets will guide our efforts in addressing this part of our carbon footprint, ultimately ensuring we achieve net zero across our value chain.

In 2024, we made a \$15 million investment in a climate-focused fund, the Aligned Climate Fund II. The fund invests in early-stage clean energy technology solutions, including efficient buildings, electric transport and sustainable land use to reduce emissions. Some of the underlying investments of Aligned Climate Fund II include companies that provide clean energy solutions to the health care system.

Meet Bryan

Bryan, the vice president of supply chain and engineering at Optum Rx, has been instrumental in driving sustainability initiatives within the organization. His efforts include piloting the use of reusable coolers, which allow patients to return their medication containers for reuse, significantly reducing waste. Additionally, he led an initiative to reduce plastic bottles in Optum Rx pharmacies, saving over 980,000 pill bottles in a year. Bryan's commitment to sustainability is evident in his continuous pursuit of innovative solutions that benefit both the environment and the business.

“We never settle. My team believes that there is always a better way to do things and we are dedicated to finding it.”



Conserving resources

Waste reduction

Reducing waste reduces emissions and will help us reach net zero. In 2024, we made progress toward our zero-waste goal at two of our largest administrative campuses in Minnesota. We advanced our efforts around promoting reusable dishware, adding compost collection and encouraging proper waste sorting. We will continue to collaborate with our onsite partners to eliminate waste where possible and increase our landfill diversion.

Our global sites are also part of this effort. In Ireland, one of our sites is pursuing zero-waste certification. In India, we piloted a waste management project, ensuring 95% of total waste generated was recycled, with only 3% to 5% going to landfills. This successful pilot was expanded to include 17 sites in India, earning an iNFHRA award for Solid Waste Management. Gurugram was also recognized with an iNFHRA award for Workplace Excellence in Sustainability – Healthiest Workplace.



Eliminating paper

We eliminated over 2.7 billion pieces of paper in 2024 through our enterprise paperless initiative. We have saved more than 4.3 billion pieces of paper since establishing our paperless initiative in 2022. This initiative not only helps us reduce our Scope 3 emissions from paper production and disposal, it also helps us operate more efficiently as a business – with cumulative cost savings of about \$235 million since its inception. Learn more about this in our [Building a modern, high-performing health system](#) section.

Water conservation

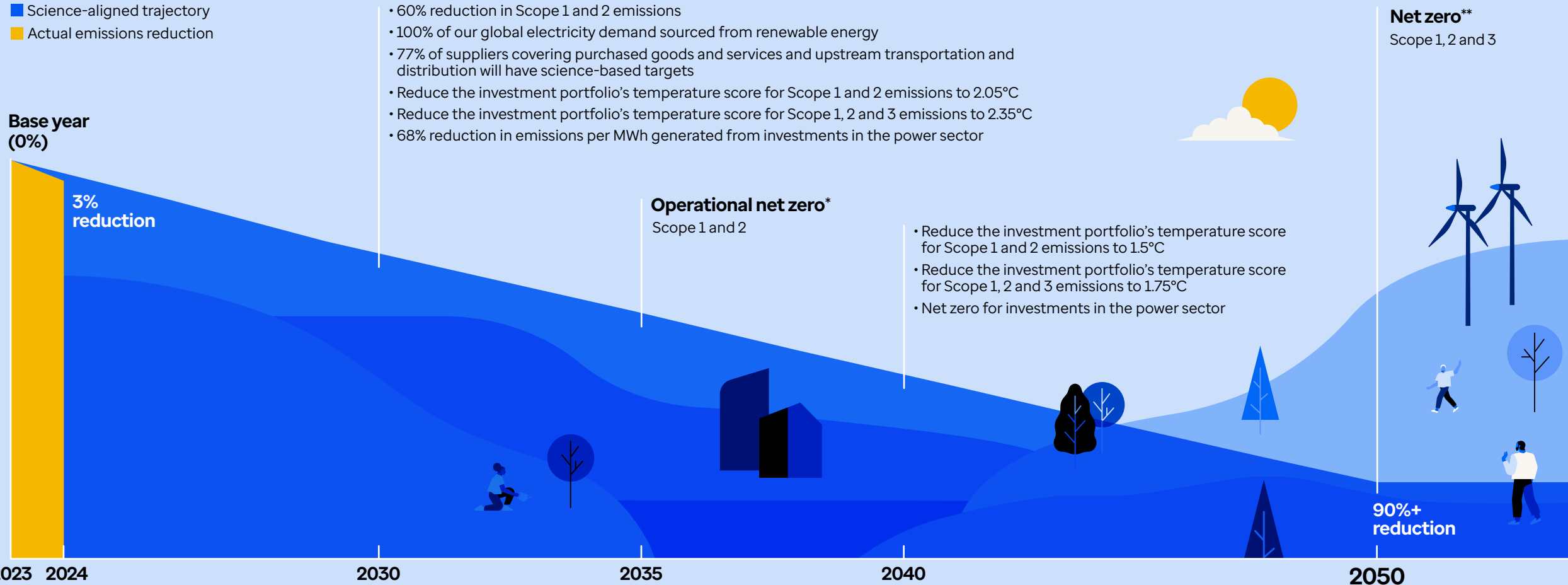
In 2024, we conducted a comprehensive water audit of one of our principal offices. The audit identified several cost-effective measures which we implemented, including faucet retrofits and showerhead replacements, saving an estimated 392,000 gallons of water annually.



Our path to net zero

Helping people live healthier lives while minimizing our own climate impact as we work toward a net-zero future.

- Science-aligned trajectory
- Actual emissions reduction



- 60% reduction in Scope 1 and 2 emissions
- 100% of our global electricity demand sourced from renewable energy
- 77% of suppliers covering purchased goods and services and upstream transportation and distribution will have science-based targets
- Reduce the investment portfolio's temperature score for Scope 1 and 2 emissions to 2.05°C
- Reduce the investment portfolio's temperature score for Scope 1, 2 and 3 emissions to 2.35°C
- 68% reduction in emissions per MWh generated from investments in the power sector

- Reduce the investment portfolio's temperature score for Scope 1 and 2 emissions to 1.5°C
- Reduce the investment portfolio's temperature score for Scope 1, 2 and 3 emissions to 1.75°C
- Net zero for investments in the power sector

*Absolute Scope 1 and 2 emissions reduced 90%+ from 2023 base year, with the remaining 10% or less addressed with high-quality carbon removals.
 **Absolute Scope 1, 2 and 3 emissions reduced 90%+ from 2023 base year, with the remaining 10% or less addressed with high-quality carbon removals.

Caring
Connecting
Growing together
Building healthier communities

Our people and culture





Every day, the people of UnitedHealth Group are driven to deliver on our mission – to help people live healthier lives and help make the health system work better for everyone.

With the combined skill, expertise, innovative thinking and compassion of our nearly 400,000 team members, no one is better positioned to transform the health care experience than UnitedHealth Group.

Our Employee Value Proposition ensures that when people join UnitedHealth Group, they will have experiences that show our commitment to caring, connecting and growing together.

Guided by our values of integrity, compassion, inclusion, relationships, innovation and performance, our people are committed to making a meaningful difference in the lives of those we are honored to serve.

Awards and recognitions

We are pleased to have earned numerous recognitions for the impact of our people and workplace culture in 2024

Forbes: America's Best Large Employers, World's Best Employers

LinkedIn Top Companies List, No. 6

Newsweek: America's Greatest Workplaces, America's Greatest Workplaces for Parents and Families

Business Group on Health Best Employers: Excellence in Health & Well-being, Mental Health and Health Inclusion

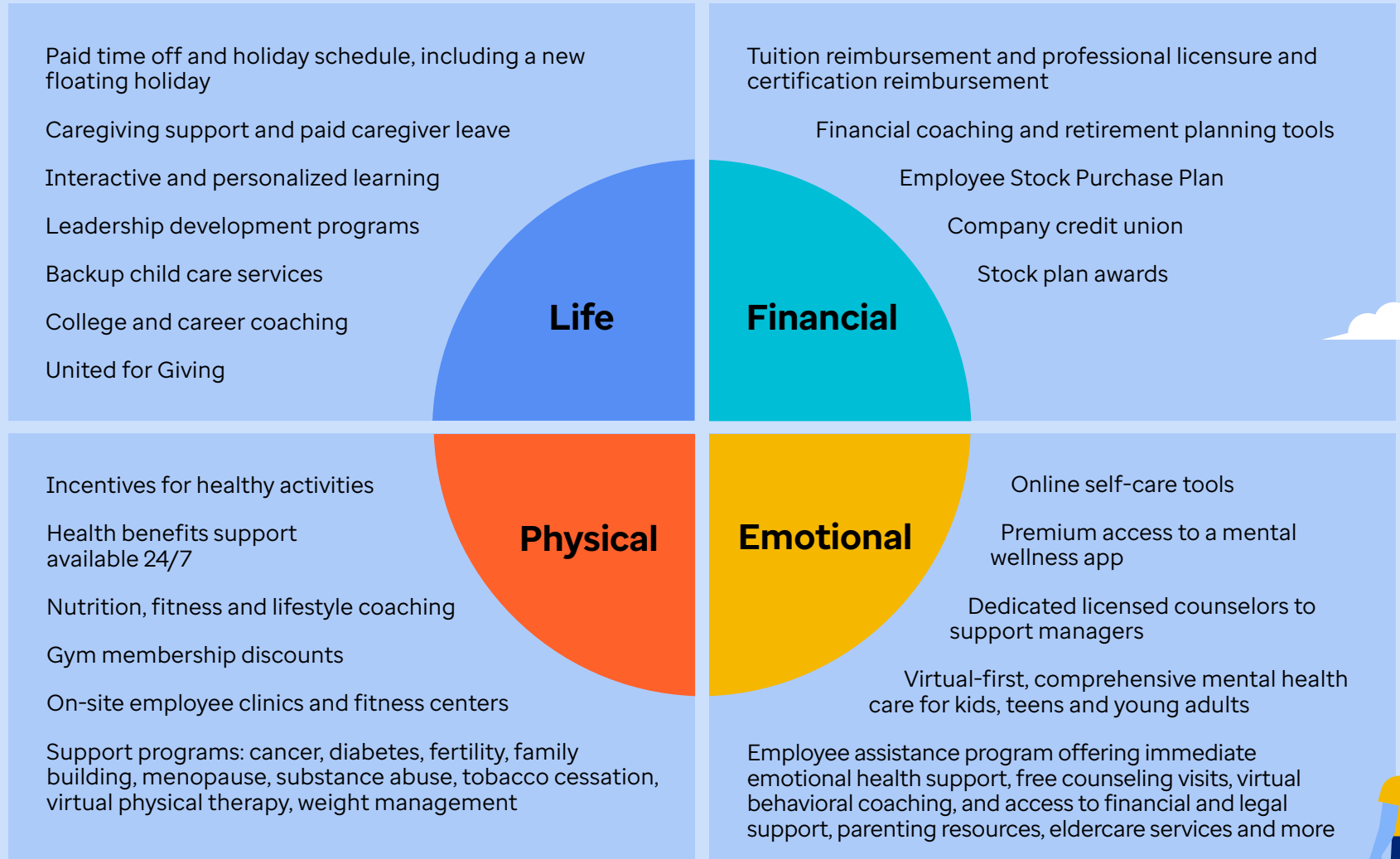
FlexJobs Top 100 Companies for Hybrid Jobs

2024 Military Friendly®; Employers and Spouse Employers (top 10)

Caring

We support our employees through a broad, ever-evolving suite of resources and benefits so they can better care for themselves, their loved ones and the people we serve. Our priority is to help employees make the most of their benefits as they navigate their personalized health and well-being journeys.

In addition to our core benefits, these are some of our new, innovative offerings that resonate with our employees. You can find a full list of our benefits and well-being resources at UnitedWellbeing.uhg.com.



Employee testimonials

“The company is truly invested in people’s well-being, and it’s been transformational for me. I have three young kids, so being active is me being more engaged with them.”



Rick, a UnitedHealth Group employee who lost more than 90 pounds through a company fitness program

“The process of caring for my parents has been so stressful and utilizing this free program has really helped alleviate some of that stress. Having less anxiety and knowing so many resources are available helps me focus on being a better employee.”



Michelle, a UnitedHealthcare employee who benefited from a company care-giving support program

2024 highlights

97K

engagements in well-being events

6K

employees participated in our Maximizing Your Benefits pilot program, which is set to expand in 2025

50

states where our virtual Medical Weight Loss program is now available to employees



Expanding emotional support for our people and their families

As part of our emphasis on enabling whole-person health, we continue to expand our tools, resources and programs to support the emotional well-being of our employees, while also increasing their awareness and understanding of what's available to them and their loved ones.

Free access to an industry-leading mental wellness app

In 2024, we provided all eligible employees and their families free premium access to a mental wellness app to help them manage stress, get better sleep and feel more present in life. We had 24,000 employees register for access to the app within the first week, and hundreds of employees have voiced positive feedback about this benefit.

Employee testimonial

“Access to resources like a mental wellness app not only encourages me to prioritize self-care but also reassures me that my employer cares about my holistic well-being.”



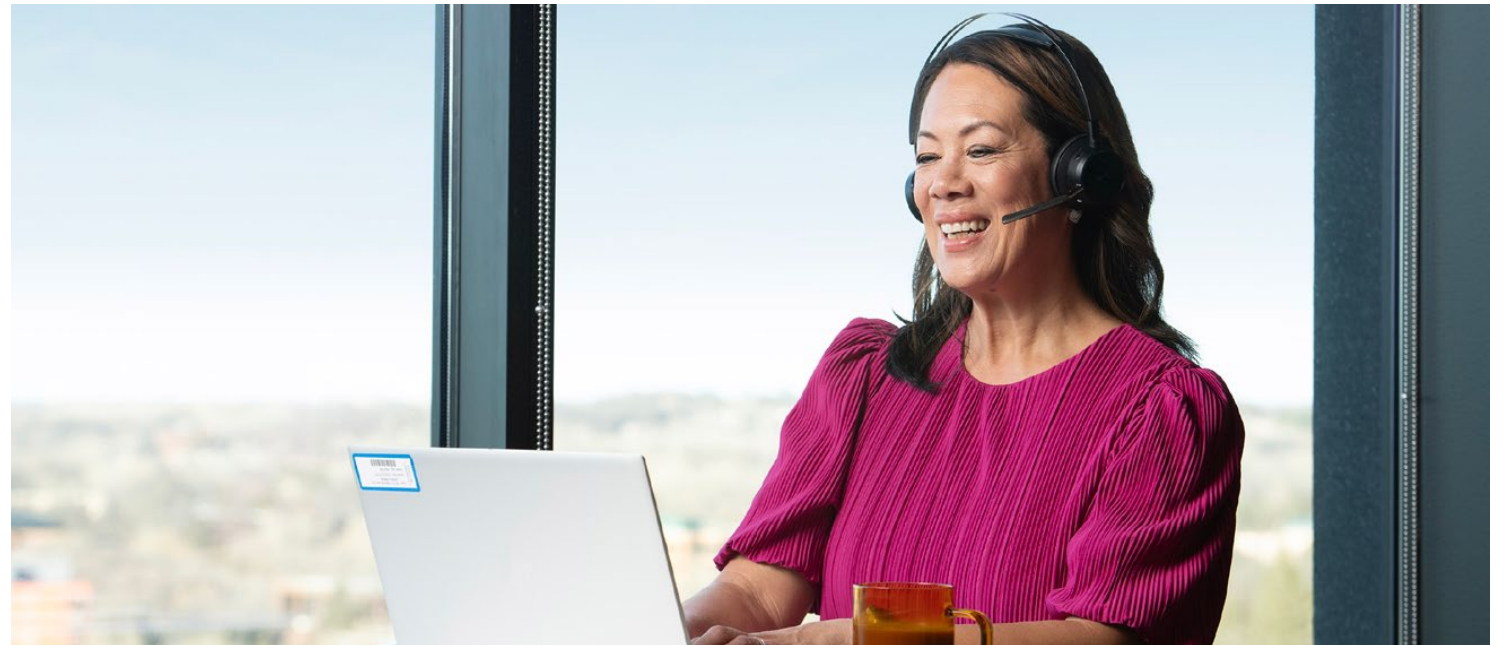
Leah
Optum employee

Increased support for our Employee Assistance Program (EAP)

The EAP is our employees' go-to resource for immediate, unlimited telephonic help from experts who connect them with counseling, financial and legal support, child and elder care referrals, mental health services, and household support. Employees and their family members are eligible for 10 free in-person or virtual counseling sessions per person, per issue, per year with a licensed counselor.

Recognizing the growing need for responsive mental health support, we launched an enterprise-wide crisis support action plan in 2024. Key initiatives include:

- Two new dedicated EAP clinicians: focused on supporting people leaders and their teams, including on-site support at select locations.
- Faster access to EAP: enabled direct access to the program through several communication channels, including Sparq, our employee intranet site.
- Enhanced EAP call greeting: providing quicker access to clinicians, especially for callers in crisis.
- Virtual emotional health group sessions: focused on resilience, stress management and grief support.
- Mental health first-aid training and certification: empowering our employees and leaders with essential skills.



Strengthening women’s well-being⁷

About 72%* of UnitedHealth Group’s workforce is female. What’s more, research shows women make about 80% of the health care decisions for their families. Our employees have access to comprehensive support designed for them and their families at every stage of life – from wellness, to fertility and family building, to menopause and beyond.

Women’s Health Summit

In 2024, we held a Women’s Health Summit, bringing health experts, industry leaders and more than 7,400 attendees together to create a deeper understanding of women’s health challenges, showcasing our strategic commitment to prioritizing women’s health and bringing awareness to our women’s health resources.

Providing greater access to care

Our integrated health solutions help identify health risk factors, educate mothers and families, improve birth weights and reduce

complications. Employees and their family members participating in our maternity and infant care program experienced a 29% reduction in NICU admissions. In addition, 26% of participants reported improved mental health and 81% felt more productive.

This year, we made the Optum Obstetrics Homecare program more accessible by making it easier for providers to order services directly to patients’ homes if they experience pregnancy complications like nausea or diabetes. We also made it simpler for employees to access our fertility solutions by removing the requirement for an infertility diagnosis.

Offering financial planning resources

We offered a financial webinar, which had more than 9,000 attendees. Topics included budgeting, debt management, saving strategies, retirement planning, managing student loans and investment basics.

*Denotes metric has been externally assured for the year ended December 31, 2024. Please see our [2024 Assurance Statement](#). Includes corporate services integrated and non-integrated businesses. See definitions on [page 87, About this report](#).

⁷“Women’s health” is a broader term used to describe conditions, services or supportive programs and resources, not to describe those we support. We provide supportive resources for all eligible individuals.

Employee testimonials

“I so appreciate the panel sharing their personal stories. That vulnerability is amazing – and helps me as a woman feel better about my own experiences!”



Sandy
Women’s Health Summit participant, UnitedHealthcare employee



Encouraging steps for a healthier life

Our Rewards for Health program gives each employee personalized recommendations based on their unique health indicators and allows them – and their family members – to earn incentives for improving their well-being. Rewards can be used to offset medical premiums or deposited into a health savings account (HSA) if the member is enrolled in an HSA-eligible plan. In 2024:

- More than 135,000 employees earned rewards
- Eligible employees earned an average of \$515, a 6% year-over-year increase from 2023
- 4,700 employees achieved a \$0 premium for their medical plans

Promoting workplace health and safety

At UnitedHealth Group, we are committed to creating and maintaining safe and healthy working environments for our patients, employees and the environments in which we operate globally. We align our programs with industry best practices while adhering to environmental, occupational health, and safety (EOHS) rules and regulations. Our EOHS program enhances risk management processes, supports regulatory compliance, and reduces adverse impacts on our employees and the communities we serve. We remain focused on refining our approach using highly regarded frameworks to continue advancing health and safety across the enterprise.

93%

of eligible employees earned reward dollars

84%

of employees agreed UnitedHealth Group cares about their well-being

39%

of employees earned their full reward, up 6% from last year



Connecting

We are dedicated to making our organization a place where people feel welcomed, valued, heard and respected.

When people can bring their authentic selves to work – their experiences, stories, talents and more – it makes our collective impact even stronger and brings our value of inclusion to life.

Cultivating a culture where everyone belongs

Our framework for fostering an inclusive culture, and driving organizational success and belonging, is anchored on three key pillars that are essential to making a positive impact on our communities, our team members and our businesses.

People

We build a workforce that delivers on our mission to make the health system work better for everyone.

Workplace

We create an inclusive environment where everyone can do their best work.

Marketplace

We integrate innovative strategies that fuel our business and support the communities we serve.



Bringing our people together

Sharing experiences through Employee Resource Groups

Our Employee Resource Groups (ERGs) are voluntary, employee-led groups open to all individuals, providing a deeper sense of belonging and community across the organization. ERGs foster collaboration and connections, enabling team members to be heard, supported and valued for their unique contributions.

2024 saw the launch of ERGs internationally. These expanded ERGs with region-specific leaders and sponsors are an exciting step in developing an even more inclusive, connected culture for our colleagues in today's global workforce.

“Living out our value of inclusion requires all of us. It is incredibly inspiring to see so many colleagues coming together to share their stories and perspectives and supporting each other every step of the way.”

Darwin, UnitedHealthcare employee

62%

increase in ERG membership in 2024

~5K

women joined India's Women LEAD ERG within the first two months of launch



The Women LEAD ERG in the Philippines

Disability Inclusion ERG for American Sign Language

Feedback from the Disability Inclusion ERG led to the inclusion of American Sign Language (ASL) interpreters at companywide meetings. This initiative ensures that employees who are deaf or hard of hearing can fully participate in important discussions and events, making these meetings more accessible, inclusive and impactful for all employees. The presence of ASL interpreters at town halls, fireside chats and other enterprise meetings is a testament to the ERG's commitment to creating an inclusive environment where everyone can thrive.

Equal pay

We are committed to, and continue to prioritize, fair and equal pay for equal work for all employees. Fair and equal pay practices within a pay-for-performance framework support our culture and are critical to achieving our mission.

To further support our commitment to fair and equal pay for equal work, effective January 1, 2025, we began publishing pay ranges on all internal and external U.S. job postings. To prevent unfair pay disparities at hire, we do not ask candidates in the U.S. about salary history during the hiring process.

“Inclusion is about identifying and eliminating barriers that separate and limit us. I am excited to cultivate an environment in which everyone can learn, connect and be empowered.”

Nodlaig, Disability Inclusion ERG chair, Ireland and the U.K.



Meet Tania

Recognizing the need for an inclusive space where colleagues can build connections and gain a deeper understanding of our business, Tania, along with a committee, created opportunities where team members can share experiences and grow professionally.

Her commitment to creating a culture of continuous learning and development also informs her work as co-chair of our Unidos ERG. Crediting her own career success to the power of collaboration and education, she now serves as a development consultant to equip team members with the resources, tools and networks they need to grow their careers.

“Creating spaces where everyone feels included and connected helps us strive for excellence in our respective roles.”



Growing together

Career growth is essential to helping all team members play a role in achieving our mission.

Team members are empowered to own their career journeys. We are here to support them with tools and resources that promote ongoing learning and development, coaching and goal-setting, and career mobility.

Listening to understand

Growing together starts by listening. We continue to uncover new ways to understand our employees' needs, increase their job satisfaction and engagement and respond to their feedback.

Our team members can share their experiences and drive meaningful change through leader listening sessions, employee experience surveys, crowdsourcing activities and more.

~79%
participation in employee
experience surveys in 2024

>180
listening sessions in 2024

72%*
positive employee
experience score



*Denotes metric has been externally assured for the year ended December 31, 2024. Please see our [2024 Assurance Statement](#). Includes corporate services integrated and non-integrated businesses. See definitions on [page 87, About this report](#). 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 voluntarily self-reported data/employee surveys administered multiple times a year to UHG employees. Employee experience results calculated by taking % of responses with a positive score divided by total number of eligible scores. Employees must have answered at least half of the index items to have an eligible index score.

Learning and skill building

Our culture of continuous learning and development encourages employees to refine current skills and expand new ones. Our programs are designed to help us upskill our people and onboard customers, partners and new employees. Last year, we spent more than \$1,000* per employee on training and development.

Driving a culture of quality

The Quality Academy is a skill-building initiative aimed at nurturing a culture of quality for every employee across UnitedHealth Group. Since its launch, more than 200,000 learning modules have been completed, while academy content has garnered almost 40,000 followers. Participants have reported a deeper understanding of quality principles and expressed a commitment to improving systems for better patient safety and consumer experiences.

Making learning simpler and available to all

Our new MyLearning platform, designed to support individual career paths, offers a personalized, interactive social learning experience, with over 10,000 courses available to all employees. In addition to providing access to required training, MyLearning offers AI-enabled learning recommendations and allows employees to explore their career aspirations and skill interests.

Employee testimonial

“What I appreciate most is the ability to gain knowledge and experience at my own pace, on my own time. And the course options are endless! MyLearning prepares me for the next step in my career, as well as provides me with a deeper understanding of what to expect when moving on to that next step.”



Nathifa
UnitedHealth Group employee

2024 awards and recognition for learning initiatives

Galaxy Award for Excellence in Holistic Learning and Experience - Cornerstone

Silver Award for Excellence, Best Leadership Program Category - Brandon Hall Group™ HCM Excellence Awards

14.1M

learning completions since the launch of MyLearning, an increase of 3.6x compared to prelaunch completions

100%

of businesses have used MyLearning

*Denotes metric has been externally assured for the year ended December 31, 2024. Please see our [2024 Assurance Statement](#). Includes corporate services integrated business only. Corporate services non-integrated businesses are excluded. See definitions on [page 87>About this report](#). Calculated by taking total training and development spend plus internal staff costs for training and development-related job codes divided by the annual average integrated employee count.

Developing health care leaders of tomorrow

To ensure we have a workforce prepared to tackle the greatest health care challenges of today and tomorrow, we offer programs to help build leadership skills at all levels – from aspiring leaders to first-time supervisors to experienced management.

- The Leadership Academy is open to everyone interested in leadership development through coaching, self-guided courses and instructor-led programs. This year, leaders were 14% more confident and 10% more prepared for their next role after taking the course, and 27% more prepared for leading teams and 53% more prepared for leading businesses. Graduates demonstrated improved application of skills, and tracking shows better leader retention and favorable mobility 12 months post-program. Participating leaders exhibited better retention, up to 11%, and improved mobility of 7% compared to nonparticipating peers.

- First Level Leader, a six- to 12-month course required for newly hired or promoted people leaders, focuses on business acumen and helps build the foundational skills needed for successful, trustworthy and adaptable leadership. More than 3,500 leaders participated in our First Level Leader program in 2024 with a Net Promoter Score (NPS) of 82.
- Leadership Edge is our new six-month program for senior directors and new vice presidents to develop key big-picture capabilities, such as holistic leadership thinking and self-awareness, expanded business acumen and financial understanding, and visual storytelling communication strategies.
- The Manager Development Conference (MDC) is a twice-yearly virtual leadership development event for anyone looking to build their leadership skills. Keynote speakers, candid panel discussions and interactive workshops connect people leaders from across the organization.

“I enjoyed everything about MDC. The transparency [and] the open and honest comments from the speakers was amazing. I [walked] away from the conference knowing I matter as an employee and I work for a company that [cares.]”

MDC survey respondent

24K

new employee connections made during MDC

77

average NPS for enterprise learning programs

~18K

employees who attended the biannual MDC in 2024



Preparing future clinicians

The Clinician Workforce Transformation initiative creates a pipeline of health care professionals prepared for future roles and continued clinician development within UnitedHealth Group. This includes apprenticeship programs for medical assistants, medical coders and other roles, as well as intern to full-time programs for nursing, pharmacy and behavioral therapy.

Participants in our nursing internship and pharmacy internship programs can network with skilled professionals while contributing to efforts that improve patient care in a variety of care settings. These full-time, 10-week paid summer internships include enrichment opportunities at our facilities.

Awards and recognition for building tomorrow's health care workforce

2024 Campus Forward Award
- RippleMatch (Enterprise Early Career Program)

2024 Best Employers for New Grads - Forbes

2024 Early Talent Awards,
Top Employer for Gen Z Careers - Handshake

Launching early careers

Part of building the health care workforce of tomorrow is hiring and developing early-career individuals through full-time, internship, apprenticeship and co-op programs worldwide. Our early careers initiatives include:

- A robust intern-to-hire pipeline, with 865 participating interns and an 89% full-time employment acceptance rate as of 2024.
- IGNITION, a four-day immersive experience, which provides customized development, networking, applied learning breakout sessions, senior leadership engagement and societal impact activities.

“It was great to hear so many leaders be so supportive of the early career programs. I would not have had a chance to hear that messaging had I not been at IGNITION.”

IGNITION survey respondent



Empowering performance and growth

This year, we introduced MyGPS, a digital platform that encourages goal setting, continuous feedback, quarterly check-in conversations and year-end reviews – all in a simple, centralized location. This shift to continuous development conversations allows employees to easily adjust performance, create more connections with their managers and make their career aspirations known.

We continued to prioritize employee retention. Last year, total turnover of our global workforce was 15%* and voluntary turnover was 13%*.

A commitment to career mobility

In addition to our learning and performance management resources, we also offer CareerCare sessions – a series of online presentations with open Q&A for employees as they explore internal opportunities. Topics include resume writing, practicing for interviews and internal networking.

What's next

Building on these investments, work is underway to introduce a high-touch and comprehensive career center in 2025. The career center will make it easy for team members to connect with resources – including career coaches, peers, skills-based learning and personalized support – to help navigate learning, development and career opportunities. AI-powered technology will help align the skills and aspirations of our team members to career growth and development opportunities through recommended roles, projects and learning courses.

*Denotes metrics have been externally assured for the year ended December 31, 2024. Please see our [2024 Assurance Statement](#). Includes corporate services integrated business only. Corporate services non-integrated businesses are excluded. See definitions on [page 87, About this report](#).



1.1M

goals created in MyGPS

284K

check-in conversations between managers and employees

~26K

employees attended CareerCare sessions

~38K

employees moved to a new internal position

Every career path matters

Every career journey is unique, and at UnitedHealth Group, we want employees to feel empowered to fuel their growth from within, explore new ideas and reach their full potential.

Amber UnitedHealthcare employee

Career journey: Needed help finding her niche and opportunities that correlated to her interests and strengths. Took advantage of the CareerCare resources available to her.

Advice to others: Network, network, network!

Role: Currently in UnitedHealthcare; previous role was in Optum Care Solutions.



“The push to network gave me the confidence to start deep diving into possible connections I could make since the role I was pursuing was outside of my current department.”

Brenda “Bren” UnitedHealthcare employee

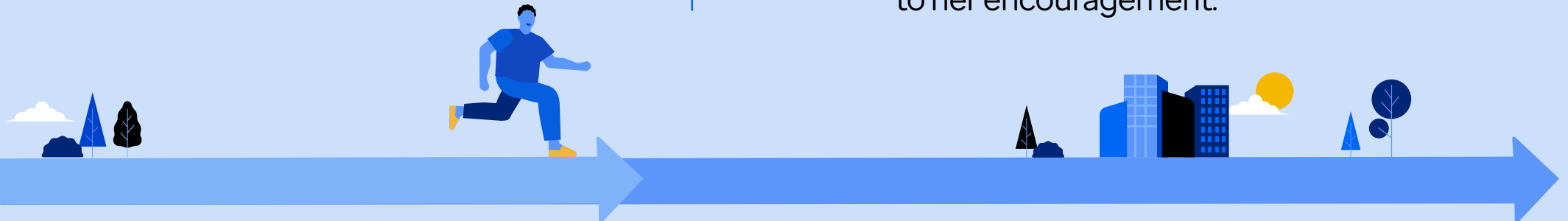
Career journey: Wondered if UnitedHealth Group and her role were the right fit. Had a leader who believed in her and pushed her to grow her career. Having that discussion helped her identify where to go next.

Advice to others: Connect with your leader for help.

Role: Current and previous roles are both in UnitedHealthcare.



“Conversations with my leader helped me discover my strengths and opportunities for growth. She believed in me every step of the way, and I owe a significant part of my progress to her encouragement.”



Building healthier communities

Helping employees care for their communities and create a positive impact through giving and volunteering.

Helping communities heal

We offer support to our employees, members, providers and communities during times of need. We also strive to ensure our members and providers have access to essential services and resources. This includes charitable donations to organizations that provide community support and aid in recovery efforts, such as:

- **A \$1.5 million donation** from the United Health Foundation to the American Red Cross and the Florida Disaster Fund to assist communities affected by Hurricanes Helene and Milton last year.
- **\$1.7 million in care management payments** from UnitedHealthcare to support providers in western North Carolina as the community recovered from Hurricane Helene.
- **A \$1.5 million contribution** from the United Health Foundation to Direct Relief and the California Community Foundation's Wildfire Recovery Fund in early 2025 to address Southern California wildfire recovery.

Caring for employees in need

United for Each Other, our employee assistance fund, gives employees the chance to help colleagues recover from natural disasters and other qualifying catastrophic events.

Meet Melony

Melony joined UnitedHealthcare as a customer service professional in 2023 and quickly noted the incredible compassion and supportive nature of her co-workers – traits she experienced firsthand during a time of need.

In July 2024, Hurricane Beryl struck, impacting Melony and her family in Texas. Although they were fortunate not to sustain any structural damage to their home, they lost power for 65 hours, resulting in the loss of \$700 worth of food and the need to replace their refrigerator. The experience was mentally and physically taxing, exacerbating Melony's weather-related PTSD from a storm three years prior.

Melony received financial assistance through United for Each Other, which helped her replace her refrigerator and buy food for her family. More than 3,700 employees like Melony across 27 states and Puerto Rico were supported by United for Each Other in 2024.

“The support we received from United for Each Other was immediate and crucial. We wouldn't have gotten through Hurricane Beryl without it. This program shows there's still humanity out there, and there's compassion within our company.”



Employee giving and volunteerism

Our United for Giving program provides employees with opportunities to double their impact when donating time or money to the causes and communities they care about. It includes:

- **A \$1:\$1 match** on employee donations to eligible organizations
- **\$10 in rewards** for each tracked volunteer hour, up to 50 hours
- **\$10 for new hires** to donate to eligible organizations

Connected by service

Our Employee Community Council (ECC) and Connected Cities (CC) programs bring together employees in nearby locations to plan and execute community service projects.

Military Community Employee Resource Group members and UnitedHealth Group colleagues partnered with nonprofit organization 9/11 Day to help pack shelf-stable meals for community food banks across the U.S.



The Charlotte, North Carolina, Connected Cities program held more than 20 events in 2024, including creating care packages for foster kids, meal-packing activities and back-to-school drives.



\$50.2M

donated through United for Giving

3.5M

employee hours volunteered⁸

24.6K

charities supported through United for Giving

>2K

more organizations supported in 2024 compared to 2023

⁸Volunteer hours are calculated using employee survey responses and giving site participation data.

Responsible business practices

- Corporate governance
- Data privacy and information security
- Responsible artificial intelligence
- Supply chain management
- Supplier engagement
- Public policy
- Compliance and ethics





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

Our focus

- Strong and effective corporate governance
- Data privacy and information security
- Responsible artificial intelligence
- Supply chain management
- Supplier engagement
- Public policy
- Compliance and ethics

Our management structure and responsible business practices provide the foundation for our work and outline specific behaviors and responsibilities. These practices help ensure our actions and decisions are consistent and aligned with our values and the values of society at large.

Our governance approach also 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 and privacy. Similarly, we review our supplier risk and performance management processes to ensure our suppliers meet our sustainability standards and deliver on our values.

Corporate governance

Strong and effective governance practices guide our actions to deliver long-term value.

The UnitedHealth Group corporate governance policies embody our commitment to implementing industry-leading governance practices. Our board has enhanced corporate governance policies over time to align with best practices, drive sustained shareholder value and respond to the interests of our stakeholders.

Our Governance Committee reviews corporate governance practices at least once per year and proposes 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 personal and business experiences to their positions. The board's diversity of talent, background, experience and perspectives is considered in the director nomination process and assessed annually when the board evaluates its overall effectiveness.

Our Governance Committee strives to maintain a balance of tenure on the board. Long-serving directors bring valuable experience to our company, familiarity with the successes and challenges the enterprise has faced over the years, while newer directors contribute fresh perspectives.

Our Board of Directors believes having independent board leadership is an important component of our governance structure because independent leadership is vital in considering the needs of our business and long-term interests of our shareholders objectively. As such, our bylaws require the company to have either an independent chair of the board or lead independent director.

Director nominees by skills and experience:

	Baker	Flynn	Garcia	Gil	Hemsley	Hooper	McNabb III	Montgomery Rice, M.D.	Noseworthy, M.D.
Corporate governance	●	●	●		●	●	●		●
Finance	●	●	●	●	●	●	●		
Health care industry	●				●	●		●	●
Direct consumer markets		●	●	●			●		●
Social media/marketing	●			●			●		●
Large complex organizations	●	●	●	●	●	●	●	●	●
Technology/business processes	●	●	●	●	●	●	●		●
Clinical practice								●	●
Political/health care policy/regulatory	●	●			●	●	●	●	●
Capital markets	●	●	●		●		●		

Shareholder rights

A shareholder or group of shareholders who have owned at least 3% of our common stock for at least three years, and who comply with specified procedural and disclosure requirements, may include in our proxy materials shareholder-nominated director candidates representing up to 20% of the board.

Our directors are elected annually by a majority vote of our shareholders. Each of our director nominees tenders an irrevocable offer to resign in case they do not receive a majority vote from shareholders, which the board must accept absent a compelling reason.

- The company does not have a dual-class share structure. Each share of the company common stock is entitled to one vote.
- No supermajority shareholder approval requirements.
- Shareholders hold the right to call a special meeting and to act by written consent.

Say-on-Pay

Shareholders expressed strong support for our executive compensation program at our 2024 Annual Meeting of Shareholders, with 96% of the votes cast in favor of our Say-on-Pay proposal. Shareholders also approved the company's 2025 Say-on-Pay proposal.

Read more about our approach to corporate governance in the 2025 Proxy.



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 sustainability agenda, including review and approval of key sustainability priorities, policies, performance and annual reports.

Board of Directors

Governance Committee

Oversight: Sustainability policies and practices, climate change initiatives and corporate citizenship.

Audit and Finance Committee

Oversight: Sustainability investment criteria and disclosures.

Health and Clinical Practice Policies Committee

Oversight: Initiatives to improve health care access, affordability, equity and quality and safety.

Compensation and Human Resources Committee

Oversight: Human capital strategies.

Executive Team

Decision-making body for sustainability priorities, policies and practices. Monitors performance against goals.

Sustainability Steering Committee

Advises on sustainability strategy and overall enterprise objectives.

Sustainability Team and Sustainability Working Groups

Supports day-to-day sustainability agenda in partnership with businesses.

Business Partners and Functions

Partners to implement sustainability priorities.

Stakeholder engagement

We value our stakeholders' unique perspectives and use them to inform our evolving sustainability strategy. In 2024, we continued to enhance our efforts to engage a diverse group of key stakeholders. These engagements provide our stakeholders with the opportunity to share feedback and participate in robust dialogue on our ongoing efforts to achieve our commitments.

Stakeholder	Our engagement	Select examples from 2024
Consumers and patients	<ul style="list-style-type: none"> Net Promoter Score, including broad and targeted surveys. Active listening, surveys and ongoing tracking to understand emerging needs and sentiment. Ethnographic research to observe firsthand how customers live and interact to influence product design, marketing, strategy. 	<ul style="list-style-type: none"> Collected consumer feedback through Net Promoter Score surveys across Optum and UnitedHealthcare consumers and patients to improve customer experiences. Gathered feedback to influence Commercial & Medicare plan design, value-added benefits, ancillary benefits and Optum products. Consistently monitored UHC and Optum brand health to influence marketing and strategy.
Employees	<ul style="list-style-type: none"> Recurring employee sentiment analysis. Formal employee work experience surveys, with ~79% participation rate in 2024. Employee engagement and outreach programming. 	<ul style="list-style-type: none"> Hosted our first summit focused on women's health issues, attended by more than 7,400 participants. Launched Employee Resource Groups internationally. Engaged employees at one of our principal offices in our newly launched compost program, helping to divert compostable materials from the landfill.
Customers	<ul style="list-style-type: none"> Ongoing outreach to key customers through forums and advisory councils. One-on-one meetings with various leaders. 	<ul style="list-style-type: none"> Engaged customers using our annual sustainability report and responded to customer sustainability inquiries and requests. Developed a sustainability discussion tool to facilitate conversations with key customers.
Health care professionals	<ul style="list-style-type: none"> External conferences and local advisory councils. Internal roundtables with Optum clinicians. 	<ul style="list-style-type: none"> Conducted sustainability engagement sessions with early career health professionals, including pharmacy and nursing interns. Participated in the American Public Health Association Annual Meeting and Expo and engaged with public health leader attendees.
Suppliers	<ul style="list-style-type: none"> Conferences and outreach events. Training and capacity building initiatives. Annual supplier surveys. 	<ul style="list-style-type: none"> Participated in ~25 outreach events with suppliers and nongovernmental organizations. Advanced UnitedHealth Group's supplier mentorship activities and facilitated multiple environmental sustainability training sessions.
Policy stakeholders	<ul style="list-style-type: none"> Meetings with federal, state and international policymakers and their staff. Advocacy activities. Engaging with third-party groups. 	<ul style="list-style-type: none"> Continued to advocate for policy solutions outlined in A Path Forward, aiming to ensure every person has access to high-quality, affordable health care.
Shareholders	<ul style="list-style-type: none"> Investor conferences and events attended by management. Quarterly financial updates and earnings reports. Recurring one-on-one engagement meetings attended by management. 	<ul style="list-style-type: none"> Hosted annual UnitedHealth Group Sustainability Investor Event with major international and domestic shareholders. Year-round engagement by senior management with investors to discuss shared priorities.
Community-based partners	<ul style="list-style-type: none"> Recurring one-on-one and small-group meetings with partners. Volunteer efforts. 	<ul style="list-style-type: none"> Hosted a roundtable discussion to address key findings related to chronic conditions from the <i>America's Health Rankings® 2023 Annual Report</i>. Hosted a convening with nonprofit partners who provide multiyear scholarships through the Health Care Scholars United program.

Data privacy and information security

Prioritizing data stewardship to maintain trust and deliver quality to those we serve.

One of the ways UnitedHealth Group delivers quality to our health plan members, patients, customers, employees and other stakeholders is by adopting measures intended to protect the information they provide our company and business partners. Health care data and personal information are critical in our ability to serve our customers and the health system.

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

Governance

Our cybersecurity program is managed by our chief digital and technology officer and chief security officer. Our privacy program is administered by the UnitedHealth Group chief compliance and ethics officer. The Audit and Finance Committee of the Board of Directors has oversight of these programs and is responsible for reviewing and assessing the company's cybersecurity and data protection policies, procedures and resource commitments, including key risk areas and mitigation strategies. As part of this process, the Audit and Finance Committee receives regular updates from the chief digital and technology officer and chief security officer on critical issues related to our information security risks, cybersecurity strategy, supplier risk and business continuity capabilities as well as updates on the effectiveness of our policies, procedures and resource commitments for the privacy program from the UnitedHealth Group chief compliance and ethics officer. The Audit and Finance Committee works with a leading cybersecurity incident and response firm to serve as its advisor on cybersecurity matters.



Information security

UnitedHealth Group manages cybersecurity and data protection through a continuously evolving framework. The framework allows us to identify, assess and mitigate the risks we face, and assists in establishing policies and safeguards to protect our systems and the information of those we serve.

The company's framework includes an incident management and response program that continuously monitors the company's information systems for vulnerabilities, threats and incidents; manages and takes action to contain incidents that occur; remediates vulnerabilities; and communicates the details of threats and incidents to management, including the chief digital and technology officer and chief security officer, as deemed necessary or appropriate. Pursuant to the company's incident response plan, incidents are reported to the Audit and Finance Committee, appropriate government agencies and other authorities, as deemed necessary or appropriate, considering the actual or potential impact, significance and scope.

Audits, risk assessments and certifications

To ensure our program is designed and operating effectively, our infrastructure and information systems are audited periodically by internal and external auditors. We have obtained various certifications from industry-recognized certifying organizations as a result of certain external audits. We also perform regular vulnerability assessments and penetration tests to improve system security and address emerging security threats. Our internal audit team independently assesses security controls against our enterprise policies to evaluate compliance and leverage a combination of auditing and security frameworks to evaluate how leading practices are applied throughout our enterprise. Audit results and remediation progress are reported to and monitored by senior management and the Audit and Finance Committee. We periodically partner with industry-leading cybersecurity firms to assess our cybersecurity program. These assessments complement our other assessment work by evaluating our cybersecurity program as a whole.

We complete an enterprise information risk assessment as part of our overall enterprise information security risk management assessment, which is overseen by our chief security officer. This risk assessment is a review of internal and external threats that evaluates changes to the information risk landscape to inform the investments and program enhancements to be made in the future to rapidly respond and recover from potential attacks, including rebuild and recovery protocols for key systems. We evaluate our enterprise information security risk to address unexpected or unforeseen changes in the risk environment or our systems, and the resulting impacts are communicated to the company's overall enterprise risk management program.

Third-party partners

We work to require our third-party partners and contractors to handle data in accordance with our data privacy and information security requirements and applicable laws. We regularly engage with our suppliers, partners, contractors, service providers and internal development teams to identify and remediate vulnerabilities in a timely manner, monitor system upgrades

to mitigate future risk and ensure they employ appropriate and effective controls and continuity plans for their systems and operations.

Employee security and privacy training and awareness

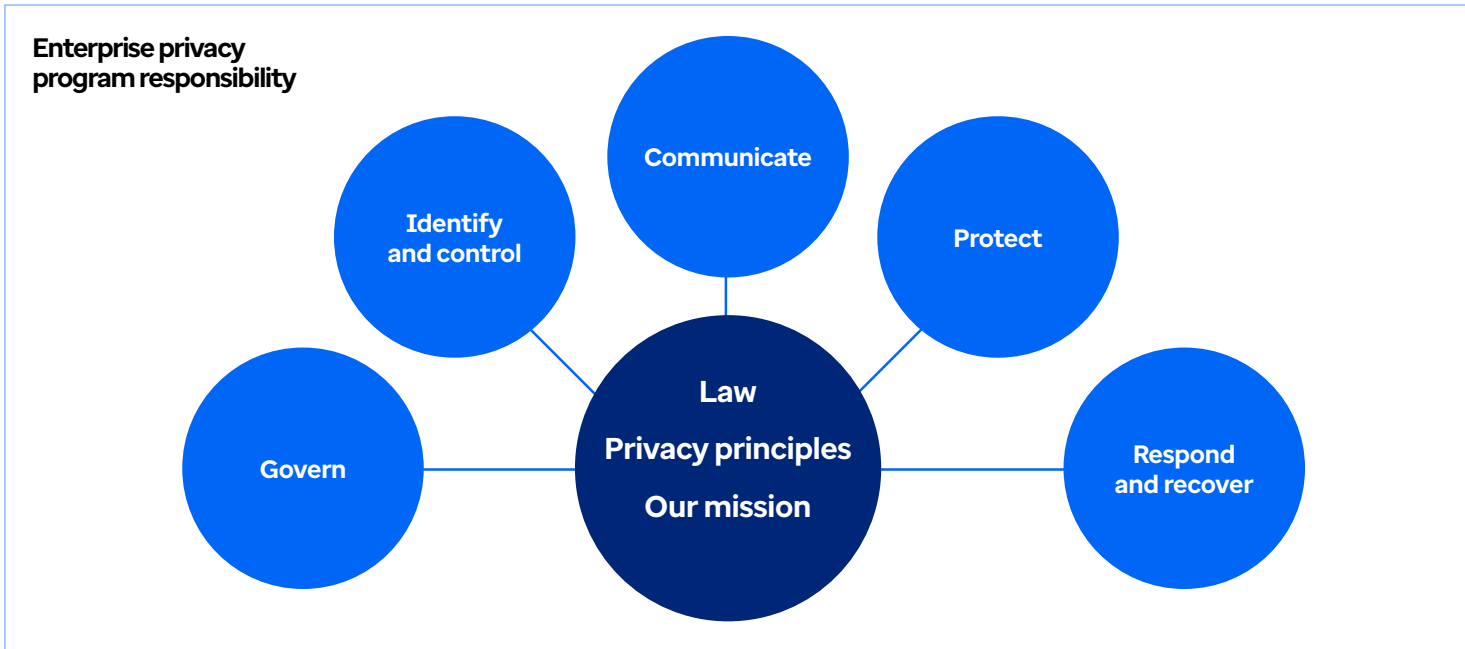
Mandatory cybersecurity and privacy training is provided to all employees upon hire and administered annually thereafter. Training materials are regularly updated to include information on how to protect against emerging threats. Our SAFE With Me program is an enterprise-wide cybersecurity training and awareness resource for our employees, including employees from recent acquisitions as they integrate into our enterprise environments.

In addition to formal online training, cybersecurity and privacy awareness materials are published in multiple formats. We operate security compliance programs with our employees to assess their understanding of our requirements and, if necessary, direct our employees to complete additional training.

Privacy

Our [Code of Conduct](#) outlines our commitment to protecting the information provided to us. Our Enterprise Privacy Office leverages privacy frameworks, including the National Institute of Standards and Technology (NIST), and is responsible for developing policies and training informed by our values. The Enterprise Privacy Office also defines our privacy responsibilities, which include information handling, incident reporting obligations and programs to monitor compliance.

We strive to use and collect the minimum necessary amount of personal information, and we retain and delete personal information in accordance with legal and contractual requirements. We notify customers about how their information may be used, obtain consent in compliance with applicable laws and communicate opportunities to opt in, 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, request a correction to those records and request deletion of their data.



Meet Jeniece

For more than 10 years, Jeniece has devoted her career to protecting the rights of our consumers. She leads the Programmatic and Individual Rights functions for UnitedHealth Group, working with her team to provide guidance and advice. Jeniece emphasizes education, both internally and externally, to demystify privacy rights and ensure everyone understands their obligations and entitlements. Her compassionate approach ensures consumers receive the support they need, fostering trust and transparency.

“We strive to make every interaction positive, ensuring our members and patients feel valued and understood.”



Responsible artificial intelligence

A fair, safe and ethical approach to AI.

As AI technologies continue to evolve, our AI approach focuses on a comprehensive governance structure to ensure solutions are designed fairly, used ethically and deployed safely.

The AI environment

We use AI solutions in a variety of ways. In 2024, some of our most prevalent AI use cases included operational tools for assisting call center agents, payment integrity and anti-fraud tools to identify waste and abuse, and health management modeling to reach members who may benefit from additional services or information. Our use of generative AI in 2024 primarily focused on cautious design and testing of solutions that make information more accessible to members and internal employees, helping streamline administrative processes.

While AI technologies are important and can positively impact health care, we believe they must be safe, explainable, reliable, trustworthy and used responsibly; ensure patient privacy and security; and be informed by human oversight and input from clinicians, industry experts and academic partners.

AI governance

AI governance is overseen by our Legal and Compliance function. This approach allows more separation between the teams who build AI tools and those who are tasked with AI oversight. Our governance structure oversees all AI developments and investments. This governance structure includes operational groups in our business teams and is advised by internal and external bodies of multidisciplinary experts and is accountable to the Board of Directors or an appropriate committee of the Board of Directors.

The Artificial Intelligence Review Board (AIRB) – an internal group composed of technologists, clinicians, medical ethicists, data scientists, security experts, privacy and legal professionals and member advocates – serves as a key control in our overall AI governance program. The AIRB has the authority to approve AI models or remove AI models from production use, either temporarily or permanently.



The Internal Executive Advisory Council and the External Executive Advisory Board support the overall alignment of the Responsible AI (RAI) program with our mission, enable representation of cross-functional perspectives across the enterprise, contribute AI expertise and health care community perspectives and help ensure our AI policies and practices align with industry standards.

The RAI Program Office maintains our AI-model inventory in addition to policies and procedures that support the development, review and ongoing governance of AI. The RAI program ensures all relevant models are reviewed by the Artificial Intelligence Review Board and that approved AI use cases maintain full compliance with all AI governance practices.

There are three foundational policies that shape our AI governance program at the level of operations: (1) the Responsible AI Policy, (2) the Responsible AI Guiding Principles Policy and (3) the Responsible Generative AI Policy. These policies establish detailed procedures and requirements designed to mitigate potential risks associated with AI and promote high-performing AI tools for their intended purposes.

Our responsible development efforts – guided by our enterprise principles and policies, compliance standards, Code of Conduct and processes overseen by the Responsible AI program – apply to internally and externally developed AI models and AI services.

Our AI governance structure

Executive Team

Functions as a decision-making body for AI priorities, policies and practices and monitors performance against goals. Includes chief executive officer, chief technology officer and other key executives.

Internal Executive Advisory Council

Supports RAI program alignment to our mission and brings cross-functional perspectives and expertise from across the enterprise. Includes internal clinicians and business and operations leaders with analytics, technical, legal, compliance, regulatory and privacy expertise.

External Executive Advisory Board

Contributes AI expert and health care community perspectives to ensure our policies and practices align with industry standards. Provides input and alignment on best practices in our usage, ethics and governance of the RAI program. Also provides recommendations for improvements to help the company build trust with the external stakeholder community through transparency and accountability. Includes key industry and academic leaders.

AI Review Board

Serves as a foundation to ensure our AI solutions are designed, developed, used and maintained following consistent standards.

Responsible AI Program Office

Partners with Chief AI Officer and organizational leaders to uphold and steward responsible AI policies and procedures.

Guiding principles

Underpinning our AI policies, governance structure and practices are a set of guiding principles. These principles – reliability and quality, fairness, accountability, transparency and compliance, privacy and security and continuous improvement – provide rigorous criteria against which our AI models and use cases are measured.

Reliability and quality: We believe AI solutions should perform reliably and operate safely. We will employ methods to test and monitor integrity, reliability and performance, with a focus on oversight, designed to ensure that AI solutions meet quality expectations and fulfill their intended uses.

Fairness: We believe AI solutions should treat people fairly. We are committed to proactively assessing the performance of our AI solutions for potential bias and disparate impact on vulnerable groups and those who may be at risk of exclusion from the health system and we are committed to addressing issues found with our AI solutions.

Accountability: We are accountable for the AI solutions we implement. We will establish and execute processes, governance and monitoring of our AI solutions that will enable swift remediation of emerging issues or unforeseen adverse outcomes. The AI solutions that we implement will follow relevant industry best practices and be consistent with applicable laws and regulations. AI solutions implemented will not replace clinical judgment.

Transparency and compliance: We believe that transparency and explainability enable the responsible use of AI and foster improved public confidence in AI. We will monitor our use of AI across the enterprise to understand how our AI solutions are used and how they operate. We are committed to implementing transparent processes consistent with relevant laws, regulations and industry best practices.

Privacy and security: We will safeguard data privacy and security interests in the design, deployment, and use of AI solutions. We will incorporate our organization's rigorous, longstanding privacy and security practices consistent with applicable laws, regulations and policy requirements.

Continuous improvement: We recognize the rapidly evolving AI landscape and will continuously improve our processes, including the application of industry best practices and regulatory guidance.

Privacy and security

AI solutions are subject to the same rigorous privacy and security requirements that apply to our software and information assets. Privacy and security are important components of an overall solution and are reviewed and verified as part of our overall AI governance process. Our AI Review Board includes privacy experts and information security specialists.

Assessment and continuous improvement

We remain committed to tracking the rapid development of generative AI tools, noting their cross-industry effects and their impact on scaling business operations. The rise of generative AI led us to revise and update our generative AI policies and governance, with a special focus on strengthening post-implementation processes, enabling continuous risk mitigation and updating our operating model to improve scalability and efficiency.

Throughout 2024, we used findings from our last independent assessment to strengthen our AI policies, procedures, accountability and execution. These elements acted as key building blocks for growing AI capabilities and ensured the future success of the program. For example, in 2024, we added patient and member advocacy representatives into our AI Review Board.

We continue to identify, implement and shape best practices as the AI landscape evolves, helping ensure our AI program is transparent, forward-looking and accountable, while contributing knowledge and expertise to help address challenges and promote responsible AI, harnessing the potential of AI in a way that is safe, ethical and equitable.

Supply chain management

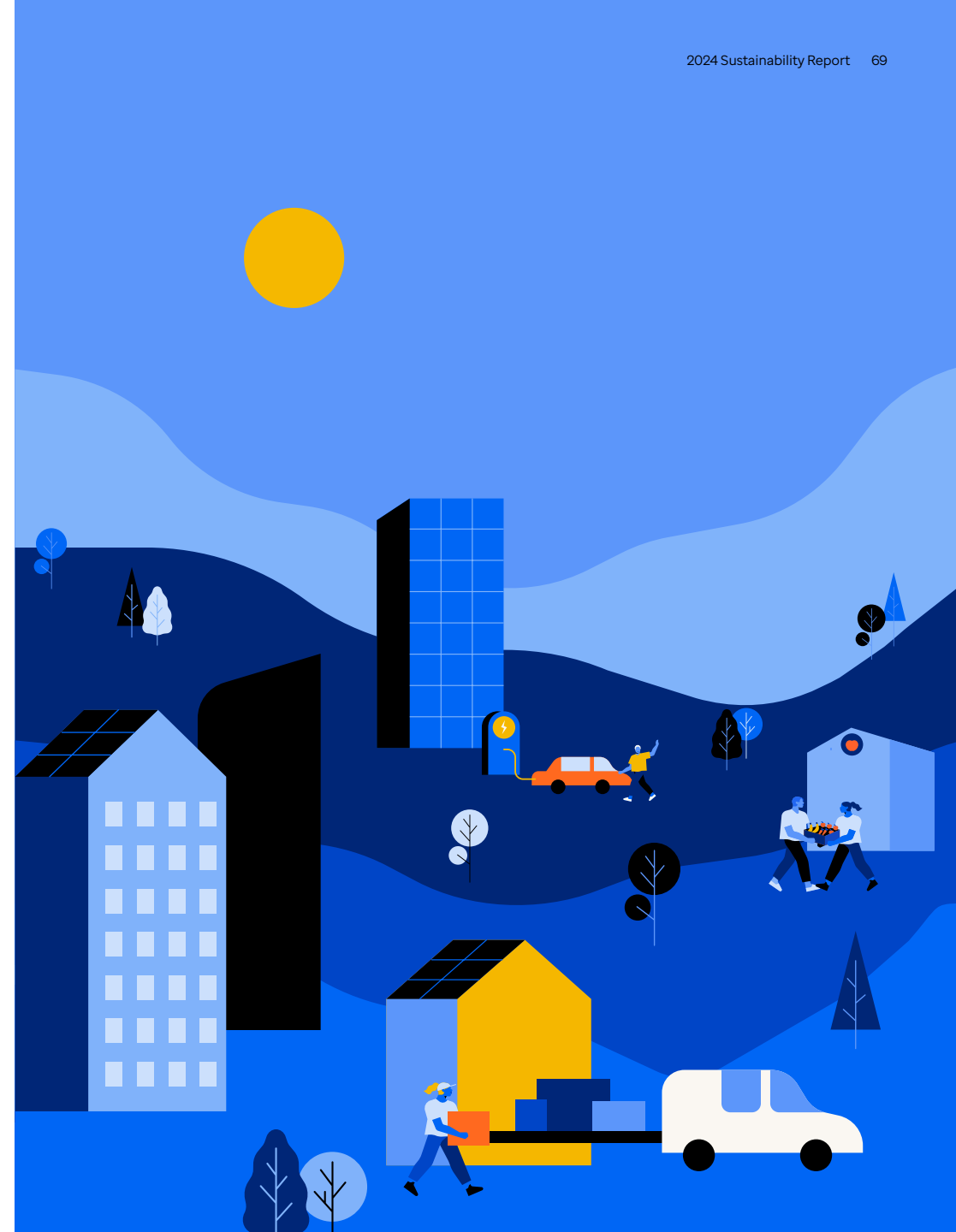
Working to integrate and advance sustainable practices across our supply chain.

We work with our suppliers to support healthier communities and advance sustainable practices across our supply chain. UnitedHealth Group suppliers are held to standards that affirm our values and mission. All suppliers are expected to comply with our [Supplier Code of Conduct](#) and work closely with us to meet sustainability objectives, enable growth and mitigate risk for those we serve.

Sustainable procurement

Partnerships across our supply chain help us advance our sustainability priorities. Our purpose driven sustainable procurement program builds resilience within our supply chain and minimizes our environmental impact.

A third-party supply-chain sustainability risk assessment informs the way we manage our impact. This risk assessment includes sector-, country- and commodity-specific risks. Our Sustainable Procurement Council consists of executive leaders across the enterprise who help support the integration of sustainable procurement practices across our global business units.



Supplier performance

We monitor the performance of our suppliers through our Supplier Performance Management Program, which helps us assess and review each supplier's level of adherence with critical performance indicators, including requirements in our Supplier Code of Conduct. We also perform reviews of contractual agreements based on quality, value and service, allowing our business leaders to make informed decisions about sourcing.

Supplier risk and performance scorecards are used to evaluate financial stability, cybersecurity, regulatory compliance, organizational resiliency, sustainability progress and customer satisfaction. Scorecards are shared and discussed with stakeholders to review trends and create improvement plans for suppliers who are not meeting performance standards.

Each year, we assess key suppliers on sustainability criteria, including policies, practices, waste and carbon-reduction goals. In 2024, we reviewed our suppliers' sustainability-performance metrics, which corresponded with approximately 53% of our Enterprise Procurement program spend. These reviews helped us gather primary data to inform potential collaboration opportunities, reduce our environmental impact and monitor our suppliers' commitments to human rights.

Science-based emissions reduction targets

To help mitigate our climate impact, one of our top priorities is to engage at least 77% of suppliers covering purchased goods and services and upstream transportation and distribution to set science-based targets. We engage with suppliers in several ways to set such targets:

- **CDP Supply Chain Program.** We used the CDP climate change questionnaire to gather a variety of actionable data – including emissions data, which supplements our internal emissions-based calculations. Enrolling suppliers in the CDP program also helps them measure their climate impact and manage their emissions, while helping us measure our Scope 3 footprint, allowing us to improve upon our current spend-based method of measurement. In 2024, we included new suppliers who had not previously completed the CDP questionnaire, and we hosted a supplier-training event to help suppliers set science-based targets. Read more about our climate work on [page 35](#).
- **Supplier feedback and training.** We developed and shared scorecards with all CDP participating suppliers on their climate performance using a 0-10 scale.

We also engaged with high-emission suppliers to discuss our shared ambition to measure emissions and set science-based reduction targets. We hosted webinars with our CDP partners to teach suppliers how to set science-based targets. We also agreed to join the Energize program as a corporate sponsor with full supplier rollout early in 2025. Learn more about the Energize program on [page 35](#).

- **Contractual language and RFPs.** In 2024, we updated contract language for targeted suppliers, asking them to measure their footprint and set science-based targets. Suppliers' climate performance is assessed as part of our broader evaluation process during RFP's, helping inform our understanding of their alignment with our sustainability expectations.

Risk management

The Enterprise Supplier Risk Council provides oversight and direction to the company's enterprise-wide Supplier Risk Management Program. The program addresses regulatory and compliance requirements to monitor risk among suppliers participating in the health care value chain.

As a health and well-being company, protecting our data and information systems is one of our highest priorities. As part of the

Supplier Risk Management Program, the Supplier Information Risk Governance team is accountable for assessing, monitoring and reporting the information security risk of our supply chain, including alignment with industry certification standards such as HITRUST.

To protect against supply chain disruptions, we engage in resilience 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, further helping us to mitigate risks.

In 2024, the Enterprise Risk and Performance Management team invested in new applications to further delve into the cybersecurity and financial health of our most critical suppliers. Use of these applications will continue to develop and expand in 2025. The Supplier Risk Management team also developed a heat map and automated dashboard to monitor the end-to-end risk landscape of our enterprise-critical suppliers.

Supplier engagement

Creating opportunities and supporting engagement with suppliers and their communities.

Increasing engagement in our sourcing, procurement and supply chain initiatives helps UnitedHealth Group tap into unique offerings and insights that strengthen our supply chain while helping to lower costs and improve quality in the health system. For us, engagement is about connecting with a wide range of individuals and communities, offering development opportunities to our partners and employees and, essentially, helping others grow their businesses while we improve ours.

In 2025, we aim to deepen our community engagement, strengthen efforts to reduce the environmental impact of our supply chain, and broaden our support for the communities and partners we serve. A key priority is expanding our procurement practices by building meaningful, collaborative relationships with qualified small businesses across all categories, in alignment with U.S. Small Business Administration guidelines.

Best-of-the-Best for inclusion recognition

Our progress in supplier engagement led to recognition by the National Business Inclusion Consortium, that awarded us Best-of-the-Best as one of the top 50 U.S. companies with a commitment to representing a broad range of backgrounds, bringing a variety of voices to the conversation and understanding that businesses built on a diverse spectrum of experiences are able to endure and thrive.



Our focus on engagement and building strong relationships guides us not only in fueling innovation and bringing fresh perspectives to the table – it also helps us reach new markets, foster economic growth and reduce operational risk during market fluctuations. In 2024, we made meaningful progress in several key areas:

- Using our Supplier Mentorship Program to increase capital and educational resources for small businesses, which helps them manage higher volumes, achieve critical business goals and close care gaps in their communities.
- Participating in external events and outreach activities – including pitch competitions, procurement councils, opportunity exchanges and panel discussions – connecting with communities and partners to help expand their scope and impact.
- Engaging more often with employees, global teams and internal groups across the UnitedHealth Group enterprise.



Jean Drummond President and CEO, HCD International

HCD International (HCDI) uses data-driven solutions to improve health care outcomes by closing gaps in care and developing community-based initiatives. In collaboration with UnitedHealthcare, HCDI focuses on intensive member outreach to help them overcome barriers to accessing care. This includes encouraging physician appointments, completing more first-trimester OB/GYN visits and completing health risk assessments.

Standardized performance measures used to assess care quality demonstrate HCDI's positive impact on communities. In 2024, HCDI met more than 106% of its targets for 20- to 44-year-olds and more than 103% of targets for 45- to 64-year-olds, helping more individuals receive health counseling and support for managing chronic conditions.

“Leading with passion and empathy, HCDI’s proven performance supports plans to achieve improved clinical outcomes and ROI.”



Public policy

Informing public policy decisions to improve the health care system and drive better outcomes.

Our priorities and engagement

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 public policy efforts are led by the External Affairs organization, with partnership from leaders across the UnitedHealth Group businesses. We engage government officials at the federal, state and international levels, serving as a trusted and solution-oriented voice in important discussions about health care reform and modernization.

Our focus areas

- 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.
- Engaging with policymakers to advance the company's public policy priorities.
- Fostering strategic partnerships with key stakeholders on policy and advocacy initiatives.

Political contributions

Public policies have the potential to impact the people and communities we serve. We believe it is our responsibility to engage and inform policymakers, offering solutions to accelerate value-based care, expand access to care, improve health care, improve health care affordability and enhance the health care experience for beneficiaries and providers.

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 and appropriate 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 believe participating in industry and trade associations is important to advancing our mission and is in the best interest of the people and communities we serve, including our employees, shareholders and businesses.

We are committed to engaging our key trade association partners as we work to advance our public policy priorities. Our participation in these associations comes with the understanding that we might not always agree with all positions held by the organizations and that we are committed to communicating and aligning, as appropriate, on our public policy positions outlined in A Path Forward. We routinely evaluate the effectiveness of our memberships. We list our key trade association memberships in our annual [Political Contributions & Related Activity Report](#).

Governance

Strong and effective governance practices are essential to our engagement in the policymaking process. The Governance Committee 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 and overseeing the company's memberships in trade associations.

In compliance with applicable laws, UnitedHealth Group files quarterly federal lobbying disclosure reports with the U.S. Congress and state lobbying disclosure reports with the appropriate state governing agencies.



Compliance and ethics

Advancing our mission through our values.

Our Compliance and Ethics program is based on our company values – integrity, compassion, inclusion, relationships, innovation and performance. We are committed to fostering an environment where our employees consistently act with integrity and in the best interests of those we serve.

The Code of Conduct (Code) is available to employees in English, Spanish and at least one of the official languages of every location in which we have substantial operations. The Code, adopted by the UnitedHealth Group Board of Directors, sets expectations for ethical conduct across our company, including but not limited to:

- Integrity
- Accountability
- A safe and supportive working environment
- Fair competition and fair dealing

- Privacy and information security
- Our assets and the environment
- Government interactions
- Communications and marketing

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, confidentiality of information, conflicts of interest, and anticompetitive practices. As the Code makes clear, UnitedHealth Group is dedicated to creating an inclusive environment, free of bias, discrimination, and all forms of harassment, including sexual harassment. The Code also describes the process to report potential misconduct, whistleblower protections, non-retaliation policies and principles, confidentiality in the reporting process, Compliance & Ethics HelpCenter contact information,

the repercussions for violation of the Code (including termination and possible legal action), fair dealing expectations, and the protection and proper use of personal information and company assets. The Code is available on the company's website.

Any waiver of the Code for the company's executive officers, senior financial officers or directors may be made only by the board or a committee of the board. We publish amendments to the Code, as well as any waivers of the Code for an executive officer or director, on our website.

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. In 2024, 99.4% of employees⁹

attested to the Code of Conduct, and new team members complete training on the Code as part of their onboarding.

UnitedHealth Group periodically engages external consultants to assess aspects of the enterprise Compliance and Ethics program against government guidance, regulatory expectations and industry practices, helping us to evaluate the Compliance and Ethics program's effectiveness.

In addition, UnitedHealth Group, Optum and UnitedHealthcare conduct regular risk assessments, collecting and aggregating insights from a wide group of leaders throughout the enterprise. This is 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

In addition to ongoing compliance communications and training, our annual Compliance and Ethics week engages employees on compliance related topics, ethical behavior and company policies. Employees are encouraged to participate in activities that reinforce the principles outlined in our Code of Conduct and to review available compliance and ethics resources. This initiative is designed to equip our employees with the tools they need to make ethical decisions in their respective roles.

⁹Includes corporate services integrated business only. Corporate services non-integrated businesses are excluded. See definitions on [page 87, 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 and Finance Committee of the Board of Directors. The UnitedHealth Group internal audit team 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.

Compliance and ethics policies and related documents

UnitedHealth Group maintains internal policies at the enterprise, business segment and department levels that 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
- Environmental and Occupational Health & Safety Statement
- 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
- Nondiscrimination Policy
- Non-retaliation Policy
- Personal Information Privacy and Data Protection
- Professional Boundaries Between Employees and Consumers
- Reporting Misconduct
- [Political Contributions Policy](#)
- Outside Directorships Policy
- Responsible AI Policy
- Responsible Generative AI Policy
- [Related-Person Transactions Approval](#)
- Sexual and Other Harassment Policy
- Social Media Policy and Guidelines
- [Statement of Ethical Marketing](#)
- Travel and Expense Management Policy
- U.S. Federal Government Contracting Policy
- Use of Personal Communications Tools for Company Communications

Approximately 95% of employees¹⁰ agreed the Compliance and Ethics training provided them with adequate information to operate in compliance with the policies, laws and regulations associated with their jobs. We continuously work to update and improve our training with the input of subject matter experts and feedback from employees.

95%



¹⁰ Includes corporate services integrated business only. Corporate services non-integrated businesses are excluded. See definitions on [page 87 About this report](#).

Human rights

Our company culture embraces inclusion and innovation while upholding the highest ethical standards in how we operate both internally and externally. We demonstrate this commitment 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, as well as the International Labour Organization's Declaration on Fundamental Principles and Rights at Work, our commitment extends to respecting the human rights of all individuals with whom we engage and employ. Our previously conducted Human Rights Impact assessment provides the foundation for our human rights work.

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

Whistleblower protection

We strongly and broadly encourage and train employees to raise ethics and compliance concerns, including concerns about accounting, internal controls, auditing, legal, regulatory or other policy matters. We offer several channels for employees and third parties to report ethics and compliance concerns or incidents, including by telephone or online. We also have dedicated phone lines and email addresses controlled by our Compliance and Ethics Office and our Compliance & Ethics HelpCenter to receive reports of suspected retaliation. Individuals may choose to remain anonymous in jurisdictions where anonymous reporting is permissible.

We prohibit retaliation against anyone who, in good faith, raises concerns or questions regarding ethics and compliance matters, reports suspected violations or cooperates in an investigation. We educate all employees regarding how they may report possible ethics or compliance issues, whistleblower protections and their affirmative responsibility to report possible issues. All employees undergo annual training and are periodically reminded of their responsibility to report potential ethics or compliance issues, our non-retaliation policy and information on how and where to report possible 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.:

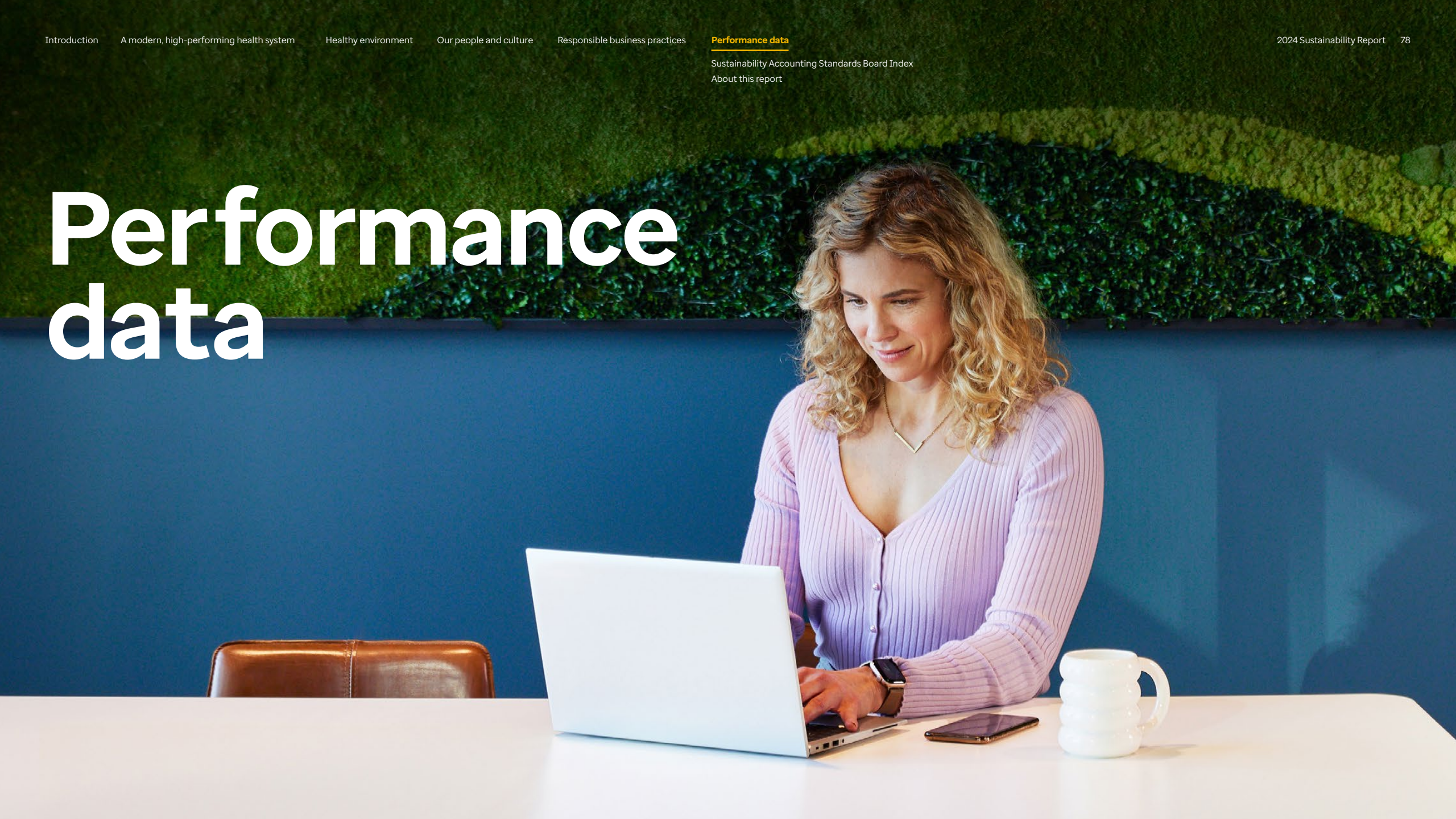
- All third parties are screened through an online tool leveraging a global database of risk profiles on individuals and entities to determine if there is a match with a person or entity who is subject to government sanctions, involved in various regulatory or legal enforcement actions, or presents other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

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 patients, customers, providers, regulators and other stakeholders.

Marketing materials are reviewed 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 describe UnitedHealth Group’s sustainability performance. See definitions on [page 87, About this report](#).

Responsible business practices

Corporate Governance	2022	2023	2024
One Share One Vote	Yes	Yes	Yes
Proxy Access	Yes	Yes	Yes
Say on Pay Frequency	Annual	Annual	Annual
Directors on Board	9	10	10
Independent Directors	7	8	8
Separate CEO/Chair	Yes	Yes	Yes
Lead Independent Director or Chair	Yes	Yes	Yes
Majority Voting for Directors	Yes	Yes	Yes
Supplier Sustainability			
Supplier Assessments Performed for Sustainability Programs and Practices	498	504	635

¹ 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.

Healthy environment

With the announcement of our new science-aligned climate targets, we have re-established all climate targets and recasted the following values with a 2023 base year. In accordance with the GHG Protocol Corporate Accounting and Reporting Standard, Scope 3 Standard and the Science Based Targets initiative's Corporate Near-Term Criteria, these base year values will be subject to recalculation in subsequent reporting if significant changes occur to UnitedHealth Group's operating structure or calculation methodologies.

Energy (MWh)*1,2	2021	2022	2023	2024
Total Energy Consumption ³	1,563,275	1,656,619	1,445,466	1,437,092
Coverage Reported (%)	100%	100%	100%	100%
Coverage Reported (M sq. ft.)	63.9	63.9	49.4	46.0
Change in Energy Consumption	309.6%	6.0%	(12.75)%	(0.6)%
Non-Renewable Energy Use ³	1,509,979	1,656,619	1,440,908	1,174,930
Renewable Energy Use ⁴	53,296	0	4,558	262,161
Self-Generated Renewable Energy Use	0	0	0	0
Energy Intensity (per USD revenue, billions) ⁵	5,435.64	5,110.47	3,889.61	3,590.23

* Denotes 2024 metrics that have been externally assured for the year ended December 31, 2024. Please see our [2024 Assurance Statement](#).

- 1 Energy and emissions data is calculated and reported in accordance with the Greenhouse Gas Protocol using the operational control organizational boundary, which generally excludes joint ventures. UHG's calculations and reporting account for CO₂, N₂O, and CH₄ gases in addition to HFCs and HCFCs from refrigerants. PFC, NF₃, and SF₆ gases are not applicable to UHG's inventory. UHG uses a small amount of Sustainable Aviation Fuel (SAF) that is not disclosed separately due to immateriality in the context of the inventory. Relevant Scope 1, 2, and 3 metrics are calculated utilizing Global Warming Potential (GWP) values from the IPCC's 4th Assessment Report (AR4).
- 2 We use the "fixed base year" and "all-year" approach for recalculating historical emissions, which includes acquisitions and divestitures. Energy and emissions values for 2024 and 2023 have been updated to reflect these changes.
- 3 Non-renewable energy use includes natural gas, diesel, jet fuel, sulfur free gas oil (SFGO), propane, purchased grid electricity, fuel oil No. 2, liquid petroleum gas (LPG), sustainable aviation fuel, and gasoline. As a result of recasting metrics with a 2023 base year, Total Energy Consumption and Non-Renewable Energy Use for 2023 decreased 337,380 MWhs and 341,938 MWhs, respectively, from previously reported amounts primarily due to divestiture activity.
- 4 UHG uses renewable electricity from a portfolio of sources, which primarily includes a virtual power purchase agreement (VPPA) and direct investments in renewable energy.
- 5 The denominator for intensity metrics is total revenues as reported in UnitedHealth Group's Form 10-K.

Carbon Emissions - Scope 1 & 2 (MTCO_{2e})*1,2	2021	2022	2023	2024
Scope 1 ³	131,593	134,165	119,163	105,782
Scope 2 ⁴				
Location-Based ⁵	389,057	383,084	352,198	352,988
Market-Based ⁶	367,756	383,084	389,609	265,661
Total Scope 1+2 Emissions (location-based)	520,650	517,250	471,361	458,770
Total Scope 1+2 Emissions (market-based)	499,349	517,250	508,772	371,443
Coverage Reported (%)	100%	100%	100%	100%
Coverage Reported (M sq. ft.)	63.9	63.9	49.4	46.0
Emissions Intensity (per USD revenue, billions) ⁷	1,810.35	1,595.65	1,369.06	927.96
Change in Emissions	NR ⁸	3.6%	(1.6)%	(27.0)%

* Denotes 2024 metrics that have been externally assured for the year ended December 31, 2024. Please see our [2024 Assurance Statement](#).

1 Energy and emissions data is calculated and reported in accordance with the Greenhouse Gas Protocol using the operational control organizational boundary, which generally excludes joint ventures. UHG's calculations and reporting account for CO₂, N₂O, and CH₄ gases in addition to HFCs and HCFCs from refrigerants. PFC, NF₃, and SF₆ gases are not applicable to UHG's inventory. UHG uses a small amount of Sustainable Aviation Fuel (SAF) that is not disclosed separately due to immateriality in the context of the inventory. Relevant Scope 1, 2, and 3 metrics are calculated utilizing Global Warming Potential (GWP) values from the IPCC's 4th Assessment Report (AR4). As a result of recasting metrics with a 2023 base year, Scope 1, Scope 2 Location-Based and Scope 2 Market-Based emissions for 2023 decreased 20,198 MTCO_{2e}, 60,903 MTCO_{2e}, and 23,492 MTCO_{2e}, respectively, from previously reported amounts primarily due to divestiture activity.

2 We use the "fixed base year" and "all-year" approach for recalculating historical emissions, which includes acquisitions and divestitures. Energy and emissions values for 2024 and 2023 have been updated to reflect these changes.

3 Non-renewable energy use includes natural gas, diesel, jet fuel, sulphur free gas oil (SFGO), propane, purchased grid electricity, fuel oil No. 2, liquid petroleum gas (LPG), sustainable aviation fuel, and gasoline.

4 Where primary Scope 2 consumption data is unavailable, estimation values are generated in accordance with data sets published in the EPA's 2018 Commercial Buildings Energy Consumption survey reports. Estimation values may be carried into the future utilizing a last-available-month primary data average consumption methodology.

5 The location-based method reflects the average emissions intensity of grids on which electricity consumption occurs.

6 The market-based method reflects emissions from electricity that companies have purposefully chosen, including purchased or self generated renewable energy. UHG's market-based emissions calculation utilizes emission factors from renewable energy certificates, utility providers, and Green-e[®] residual mix emissions rates.

7 The denominator for intensity metrics is total revenues as reported in UnitedHealth Group's Form 10-K.

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

Carbon Emissions - Scope 3 (MTCO₂e)*1,2	2021	2022	2023	2024
Scope 3	12,491,631	13,811,453	18,454,142	17,977,601
Category 1 - Purchased Goods and Services ³	6,196,306	6,529,413	7,064,475	7,778,601
Category 2 - Capital Goods ³	227,225	209,092	224,507	216,192
Category 3 - Fuel- and Energy-Related Activities ⁴	NR ¹¹	NR ¹¹	46,557	46,315
Category 4 - Upstream Transportation and Distribution ³	556,008	552,094	683,913	521,337
Category 5 - Waste Generated in Operations ⁵	32,684	51,757	41,879	34,540
Category 6 - Business Travel ⁶	22,238	56,118	96,207	76,640
Category 7 - Employee Commuting ⁷	33,543	169,286	174,340	144,949
Category 11 - Use of Sold Products ⁸	NR ¹¹	NR ¹¹	55,903	57,088
Category 15 - Investments ⁹	5,423,627	6,243,693	10,066,361	9,101,939
Total Scope 1+2+3 emissions (location-based)	13,012,281	14,328,702	18,925,503	18,436,371
Total Scope 1+2+3 emissions (market-based)	12,990,980	14,328,702	18,962,914	18,349,044
Change in Emissions	NR ¹¹	10.3%	32.3%	(3.2)%
Carbon Credits ¹⁰	3,596	7,947	7,699	8,636

* Denotes 2024 metrics that have been externally assured for the year ended December 31, 2024. Please see our [2024 Assurance Statement](#).

1 Energy and emissions data is calculated and reported in accordance with the Greenhouse Gas Protocol using the operational control organizational boundary, which generally excludes joint ventures. UHG's calculations and reporting account for CO₂, N₂O, and CH₄ gases in addition to HFCs and HCFCs from refrigerants. PFC, NF₃, and SF₆ gases are not applicable to UHG's inventory. UHG uses a small amount of Sustainable Aviation Fuel (SAF) that is not disclosed separately due to immateriality in the context of the inventory. Relevant Scope 1, 2, and 3 metrics are calculated utilizing Global Warming Potential (GWP) values from the IPCC's 4th Assessment Report (AR4). Any excluded GHG Scope 3 categories were found to be insignificant and not applicable to our total emissions analysis and are considered immaterial to report.

2 We use the "fixed base year" and "all-year" approach for recalculating historical emissions, which includes acquisitions and divestitures. Energy and emissions values for 2024 and 2023 have been updated to reflect these changes.

3 Includes corporate services integrated and non-integrated businesses. Calculated using a spend-based methodology with application of relevant secondary emissions factors and supplier survey results where available. Expenses related to the provisioning of care through health insurance plans (e.g., claims and reimbursements, including retail pharmaceutical spend) are not included as these are external retailers claim reimbursements and not inventory purchases.

4 This category of emissions includes the upstream emissions of all purchased fuels (natural gas, propane, fuel oil No. 2, liquid petroleum gas, sulphur free gas oil, stationary diesel, transport diesel, transport gasoline, jet fuel, and sustainable aviation fuel (SAF) blends), the upstream emissions of all purchased electricity, and applicable transmission & distribution losses. Emissions are calculated using the average-data method.

5 Includes emissions from global municipal, construction, electronic, hazardous and regulated medical, and pharmaceutical waste. The datasets for municipal and construction waste include estimations where primary data sources are unavailable. Only primary data sources are utilized for electronic, hazardous and regulated medical, and pharmaceutical waste. Calculations use the waste-type-specific method.

6 Represents business travel (commercial air travel, rental cars, and rail travel) for integrated U.S. and integrated non-U.S. employees. Emissions associated with commercial air and rail travel are calculated using the distance-based method and emissions associated with rental car travel are calculated using a hybrid approach that employs both the distance-based and fuel-based methods. As of 2023, all values are updated to include full lifecycle/well-to-wheel emissions.

7 Represents employee commuting for integrated U.S. based employees, estimated using an average sedan. As of 2023, all values are updated to include full lifecycle/well-to-wheel emissions.

8 Includes direct use-phase emissions primarily from products sold by UHG's retail pharmacy operations.

9 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 and asset emission calculations specified in PCAF. Reported asset classes covered 47% in 2024, 44% in 2023, and 39% in 2022 and 2021.

10 Please see [UHG's California Assembly Bill 1305 Disclosure](#) for additional information.

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

Water (Mio. m3)*¹	2021	2022	2023	2024
Municipal Water Use ²	1.25	1.81	0.94	1.22
Coverage Reported (%)	24.78%	27.67%	27.25%	32.39%
Coverage Reported (M sq. ft.)	14.9	16.7	13.5	14.9
Municipal Water Intensity (per USD revenue, billions) ³	0.0044	0.0056	0.0025	0.0031
Total Water Discharged ⁴	0.4060	0.4973	0.3886	0.6331
Coverage Reported (%)	18.06%	20.49%	21.13%	26.15%
Coverage Reported (M sq. ft.)	10.9	12.3	10.4	12.0

Waste (Metric Tonnes)⁵

Waste Landfilled or Incinerated*	10,478	87,452	72,172	58,787
Waste Recycled or Composted*	7,099	12,575	13,738	14,020
Confidential Paper Recycling (U.S. tons)* ⁶	4,854	9,009	9,269	8,647
Coverage Reported (%)*	24%	100%	100%	100%
Coverage Reported (M sq. ft.)*	14.5	60.2	58.3	46.0
Waste Diverted by Recycling Electronics	917	759	989	938

Environmental Operations⁷ (Square Feet, millions)

LEED Certified Facilities*	2.7	3.2	5.0	4.9
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* Denotes 2024 metrics that have been externally assured for the year ended December 31, 2024. Please see our [2024 Assurance Statement](#).

1 2023 Water metrics have been recast in the 2024 Sustainability Report to reflect improved data accuracy.

2 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) at U.S., Republic of Ireland, India, and Philippines sites.

3 The denominator for intensity metrics is total revenues as reported in UnitedHealth Group's Form 10-K.

4 Water discharge sources include U.S. sites where stormwater and wastewater (sewer) flows are provided by the local utility company (e.g., invoices).

5 Includes global municipal, construction, electronic, hazardous and regulated medical and pharmaceutical waste. The datasets for municipal and construction waste include estimations where primary data sources were unavailable. Only primary data sources were utilized for electronic, hazardous and regulated medical, and pharmaceutical waste.

6 Paper recycling includes confidential paper shredding.

7 Created by the U.S. Green Building Council (USGBC), LEED (Leadership in Energy and Environmental Design) is the world's most widely used green building rating system.

Healthy Environment Commitments	2023	2024
Achieve net zero across the value chain by 2050. ¹	-	3%
Achieve a 60% reduction in Scope 1 and Scope 2 emissions by 2030.* Reach operational net zero by 2035. ²	-	27%
Source 100% of our global electricity demand from renewable energy by 2030 (% renewable). ³	<1%	27%
Have 77% of suppliers (by Category 1 and 4 emissions) set science-based targets by 2030.*	66%	65%
Reduce the investment portfolio's temperature score for Scope 1 and 2 emissions to 2.05°C by 2030 and 1.5°C by 2040 (°C).	2.51	2.43
Reduce the investment portfolio's temperature score for Scope 1, 2 and 3 emissions to 2.35°C by 2030 and 1.75°C by 2040 (°C).	2.78	2.98
Reduce emissions from investments in the power sector by 68% per MWh generated by 2030 and to net zero by 2040.	-	8%

* Denotes target is validated by the Science Based Targets initiative (SBTi).

1 The % change from the 2023 base year's total Scope 1, Scope 2 (market-based) and Scope 3 emissions. Net zero is defined as a 90%+ reduction.

2 The % change from the 2023 base year's total Scope 1 and Scope 2 (market-based) emissions. Operational net zero is defined as a 90%+ reduction.

3 For UHG's 100% renewable electricity commitment, we will match our annual electrical usage with renewable energy from a portfolio of sources.

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 sustainability 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 31, 2024, by major market segment and funding arrangement, page 29.
	Commercial - domestic	Risk-based 8,845
		Fee-based 20,885
		Total 29,730
	Medicare Advantage	7,845
	Medicaid	7,435
	Medicare Supplement	(Standardized) 4,335
		Total Community and Senior 19,615
		Total UnitedHealthcare - Domestic Medical 49,345
	Commercial-Global	1,330
		Total UnitedHealthcare - Medical 50,675
	Supplemental Data	Medicare Part D Standalone 3,050

Topic	Code/metric	UnitedHealth Group disclosure
Customer Privacy and Technology Standards	HC-MC-230a.1 Description of policies and practices to secure customers' personal health data records and other personal data	<ul style="list-style-type: none"> 2024 Sustainability Report: Responsible business practices – Data privacy and information 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) personal data only and (b) personal health data, (3) number of customers affected in each category, (a) personal data only and (b) personal health data	<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 Percentage of total health care insurance premiums spent directly on medical claims and efforts to improve the quality of care	<ul style="list-style-type: none"> Form 10-K Denoted as “Medical Care Ratio,” page 27. 85.5% for the 12 months ending December 31, 2024.
Improved Outcomes	HC-MC-260a.4. Discussion of initiatives and programmes to maintain and improve enrollee health	<ul style="list-style-type: none"> 4.7M people served under fully accountable value-based care arrangements. 2024 Sustainability Report: Building a modern, high-performing health system, page 8.
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 geographical incidence, morbidity, and mortality of illnesses and diseases are incorporated into risk models	<ul style="list-style-type: none"> CDP 2024 Questionnaire: Section C2.2.1 Process for identifying, assessing, and managing environmental risks and/or opportunities (pages 18–21); Section C.2.2.2 Process for identifying, assessing, and managing environmental dependencies, impacts, risks, and/or opportunities (pages 18–21); Section C2.4 Define substantive effects on your organization (page 28); C.2.2.4 process for identifying, assessing, and managing environmental dependencies and/or impacts related to your portfolio activities (page 21) 2024 Sustainability Report: Healthy environment, page 80.

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"> 2024 Sustainability Report: Performance data (Total energy consumption, and non-renewable and renewable energy use [MWh]), page 80. CDP 2024 Questionnaire. See sections: C 730.1 (page 345) and C710.1 (page 136).
Patient Privacy and Electronic Health Records	HC-DY-230a.2 Description of policies and practices to secure customers' personal health data records and other personal data	<ul style="list-style-type: none"> 2024 Sustainability Report: Responsible business practices – Data privacy and information 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"> 2024 Sustainability Report: Responsible business practices – Data privacy and information security, page 63. Form 10-K Privacy, Security and Data Standards Regulation, pages 5-6.
	SV-PS-230a.2 Description of policies and practices relating to collection, usage and retention of customer information	<ul style="list-style-type: none"> 2024 Sustainability Report: Responsible business practices – Data privacy and information security, page 63. Code of Conduct. Form 10-K Privacy, Security and Data Standards Regulation, pages 5-6. Audit and Finance Committee Charter.
Professional Integrity	SV-PS-510a.1 Description of approach to ensuring professional integrity	<ul style="list-style-type: none"> 2024 Sustainability Report: Responsible business practices – Compliance and ethics, page 75.

About this report

UnitedHealth Group's Sustainability Report provides an overview of our sustainability approach and commitments as well as progress against certain key 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) Building 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. 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. Data contained in this report covers activities that occurred in fiscal year 2024 (Jan. 1-Dec.31, 2024), unless otherwise noted.

Non-integrated entity refers to an organization that operates with separate and distinct business functions, processes, or systems that are not interconnected or integrated with UnitedHealth Group, Optum or UnitedHealthcare. Our Performance data indicates via footnote when it excludes non-integrated entities.

Disclosure and assurance

The metrics and goals in this report are established through a 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 2024 environmental and social data has been externally assured by Deloitte & Touche, LLP as called out in the performance table or individual metric's footnotes.

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.