

April 10, 2025

PRIVILEGED AND CONFIDENTIAL

VIA E-MAIL

Sarah Bartelmann
Cost Programs Manager
Oregon Health Authority

Anthony Swisher
Partner
TEL: 202.639.7843
anthony.swisher@bakerbotts.com

Re: Two-Year Follow-Up Review – 003 United-LHC

Dear Ms. Bartelmann,

I write in response to the Oregon Health Authority's February 25, 2025, Request for Information in the above-referenced matter. Below you will find the OHA requests and UnitedHealth Group's corresponding responses.¹

1. Please complete the attached data request workbook. Further instructions are provided in the workbook. Note that three new tables have been added: Locations, HH referral sources, and Hospice referral sources.

Please see the completed workbook at Appendix A. Please note that these materials are confidential pursuant to ORS § 415.501(13)(c).

2. List all UHG-owned home health and hospice agency locations in Oregon as of February 25, 2025, including name, primary practice address, organizational NPI, license number, and federal tax ID number.

Please see the list of locations at Appendix B.

3. For each UHG-owned home health and hospice agency location included Appendix B (submitted as part of the March 2024 RFI Responses), please identify and describe any changes since April 30, 2024 in the following:

- a. Addresses/locations (including any closures).**
- b. Names (including DBA names).**
- c. License numbers.**

¹ The responses and materials attached hereto include non-privileged responsive information. UHG is not waiving attorney-client, attorney work product, or any other legally applicable privilege, and to the extent this response includes any information or documents subject to any such privilege, the production is inadvertent, and the parties reserve all rights to request sequestration and or return of the materials.

d. Federal tax ID numbers.

Please see the list of changes at Appendix C.

4. For each change identified in response to Request No. 3, provide:**a. The effective date of the change.****b. The reason(s) for the change.****c. Any activities undertaken to inform patients, caregivers, and other parties in Oregon of the change.**

The effective dates and reasons for each change are listed in Appendix C. Patients, caregivers, and other parties in Oregon were informed of the Baker City agency relocation in several ways. Patients and referral partners were directly contacted via promotional flyers and postcards. The previous location featured a sign posted through May 31, 2024, notifying anyone arriving at the location that the agency had moved to the new address. The local post office was notified of the change of address. Finally, the new building displayed a large banner advertising the relocation while awaiting sign installation.

d. For any address changes:**i. Indicate whether the service area of the agency changed as a result of the address change.****ii. If the service area changed, identify the geographic areas (e.g., zip codes) removed or added to the agency's service area.****iii. If the service area changed, describe any impacts for patients whose residence address was no longer in the service area.**

No service areas changed because of any closure or relocation.

5. Describe any efforts, initiated since UHG compiled the March 2024 RFI Responses, to further integrate LHC into Optum, including but limited to:**a. Electronic Health Records systems integration and interoperability.****b. Clinical care quality standards and protocols.****c. Administrative processes and systems.****d. Billing processes and systems.****e. Payer contracting.****f. Human resources (including hiring and compensation).****g. Third-party vendors and sourcing.**

LHC continues to operate substantially in the same ways as before the close of the transaction. LHC continues to use the same electronic health record (EHR) systems and enterprise resource planning (ERP) systems, including all systems for accounting, payroll, finance,

management reporting, decision support, customer relationship management (CRM), and billing. LHC has, however, adopted Optum's data and technology security standards, which require higher standards for data security. This has resulted in increased security for patient and other confidential information.

In the two years since the transaction closed, LHC has made no significant changes to how patient care is managed, delivered, and monitored in any of LHC's lines of business. This includes clinical care quality standards and protocols, billing processes and systems, payer contracting, and human resources.

Regarding administrative processes and systems, [REDACTED]

Regarding third-party vendors and sourcing, [REDACTED]

6. Describe *any* service or operational changes, including "ordinary course changes," impacting the LHC locations in Oregon since UHG compiled the March 2024 RFI Responses. Specifically, please detail any changes in the following areas (addressing each area separately):

- a. Number or composition of clinical staff.**
- b. Number or composition of administrative staff.**
- c. Staff compensation or employment terms.**
- d. Patient care practices.**
- e. Patient enrollment practices.**
- f. Patient discharge practices.**
- g. Patient referral sources or practices.**
- h. Hours of operation.**
- i. Range of services offered.**
- j. Forms of insurance accepted.**
- k. Billing and payment practices.**
- l. Financial assistance or charity care.**
- m. Availability of translation or interpretation services.**
- n. Suppliers of products or services**

There have been no service or operational changes impacting the LHC locations in Oregon since the close of the transaction relating to staff compensation or employment terms, patient care practices, patient enrollment practices, patient discharge practices, patient referral sources or practices, range of services offered, forms of insurance accepted, billing and payment practices, or financial assistance or charity care.

The ordinary course clinical and administrative staffing changes that have occurred at the Oregon locations since UHG compiled the March 2024 RFI Responses can be found in Appendix D. Please note that these materials are confidential pursuant to ORS § 415.501(13)(c).

Regarding changes in hours of operations, Heart N' Home Hospice and Palliative Care in Bend, Oregon changed Office Hours to 8:00-4:30 AM to align with other agencies. The effective date for this change was June 26, 2024. Regarding availability of translation or interpretation services, LHC continues to provide translation and interpretation services but switched vendors in 2024 to an Optum-approved vendor. Regarding changes in suppliers of products or services, LHC has changed providers of promotional products, broad-line medical supplies, document retention and destruction, and office supplies as discussed above in response to Request for Information No. 5.

7. Provide copies of all policies governing UHG-owned home health and hospice locations in Oregon in effect as of January 1, 2025, relating:

- a. Clinical staffing, e.g., number or type of staff providing various services, allocation of staff to patients, guidelines for in-person visit duration or frequency.**
- b. Employee compensation (including clinical, administrative, and management employees).**
- c. Patient care.**
- d. Patient enrollment.**
- e. Patient discharge, including live discharge “for cause.”**
- f. Patient referrals.**
- g. Billing and payment.**
- h. Financial assistance and charity care.**
- i. Translation and interpretation services.**

Please see Appendix E for all relevant policies in effect as of January 1, 2025. Please note that these materials are confidential pursuant to ORS § 415.501(13)(c).

8. Please complete the table below listing all Oregon commercial health insurance plans and companies contracted with Optum or LHC for home health or hospice services as of January 1, 2025.

Carrier/Company	Insurance product / line of business	Contracted services (e.g., home health, hospice)	Contracted locations	Network tier/status

Please see the completed table at Appendix F. The listed commercial health insurance plans and companies are contracted for all LHC locations in Oregon. Please note that these materials are confidential pursuant to ORS § 415.501(13)(c).

9. Identify each instance in which, since the close of the transaction, LHC, Optum, or any of its subsidiaries renegotiated a contract with a health plan for home health or hospice services in Oregon. For each instance, please identify:

- a. Payer and plan name.**
- b. Line of business (e.g., commercial, Medicare Advantage, etc.).**
- c. Contracted services (e.g., home health, hospice, or both).**
- d. Which party (Optum/LHC or the health plan) initiated the negotiation.**
- e. Proposal(s) and counterproposal(s) made by Optum/LHC.**
- f. Proposal(s) and counterproposal(s) made by the health plan.**
- g. Final outcome of the negotiations, including a summary of any changes in reimbursement rates or terms.**
- h. Effective date of any resulting changes to contractual terms.**

Contract renegotiations between LHC and health plans generally are not specific to Oregon but instead occur on either a national or regional basis. In most cases when LHC proposes renegotiating a contract with a health plan, the health plan either does not respond or declines to negotiate. LHC does not track all such cases where a proposed renegotiation never progressed. The cases in which contract renegotiations did progress are listed Appendix G. The proposals and counterproposals made by the parties are not always tracked and therefore are not available in all cases. A contract negotiation with a health plan can involve multiple rounds of proposals and counterproposals with detailed discussions of reimbursement rates and multiple other provisions. Identifying all proposed terms by either party over the course of the documents would require manual review of extensive collections of emails and associated documents. This information is provided in Appendix G where it is available.

10. Please complete the table below listing all home health and hospice providers serving patients in Oregon that were contracted with UnitedHealthcare's commercial health insurance plans as of January 1, 2025.

Provider Name	NPI	Contracted services (e.g., home health, hospice)	UnitedHealthcare insurance product/line of business

Please see Appendix H for a completed table listing all home health and hospice providers serving patients in Oregon that were contracted with UnitedHealthcare's commercial health insurance plans as of January 1, 2025. Please note that these materials are confidential pursuant to ORS § 415.501(13)(c).

11. Provide copies of all agreements between UHG or its subsidiaries and institutional facilities in Oregon (including long-term care, skilled nursing, and other residential facilities) relating to referrals for home health or hospice services.

UHG and its subsidiaries have no such agreements with facilities in Oregon.

* * *

This letter and its attachments and appendices contain confidential business and financial information that qualifies as trade secrets as identified in the enclosed confidentiality log that is provided pursuant to ORS 415.501 and ORS 192.345(2).

BAKER BOTTS LLP

Sarah Bartelmann

- 7 -

April 10, 2025

Sincerely,

/s/ Anthony Swisher

Counsel to UnitedHealth Group Incorporated