

April 30, 2024

VIA E-MAIL

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Jenny Grunditz
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Re: Request for Information – 003 United-LHC One-Year Follow-Up Review

Dear Jenny,

I write in response to the Oregon Health Authority's March 15, 2024, 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.

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 LHC locations in Oregon as of February 2024, 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 LHC hospice and home agency location included in the NPI table submitted to OHA on August 2, 2022, please identify and describe any changes to date in the following:

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

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.

- c. License numbers.
- 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. In each case, the relocating agency notified patients directly of the change during patient visits and revised the booklets given to patients. LHC Group account executives also notified the referral sources they work with of each change.

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 changes in direct or indirect management, oversight, and governance of LHC since the close of the transaction.

Following the close of the transaction, LHC Group ceased to be a publicly traded company and became a wholly owned subsidiary of UnitedHealth Group Incorporated. Josh Proffitt, who previously was President and Chief Operating Officer of LHC Group, became LHC Group President and Chief Executive Officer. Mr. Proffitt now reports to Dr. Amar Desai, who is Chief Executive Officer of Optum Health.

6. Describe any efforts initiated since the close of the transaction to integrate LHC into Optum, including but not 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 year 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]

[REDACTED] Further information regarding these changes is provided in Appendix D. Please note that these materials are confidential pursuant to ORS § 415.501(13)(c).

Regarding third-party vendors and sourcing, [REDACTED]

7. Describe any service or operational changes impacting the LHC locations in Oregon since the close of the transaction. Specifically, describe any changes related to:

- 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. How (by what means or at what times) patients or their caregivers can contact staff.**
- o. Suppliers of products or services.**

There have been no significant service or operational changes impacting the LHC locations in Oregon since the close of the transaction, including regarding the topics identified above. Regarding the number or composition of clinical or administrative staff at LHC's locations in Oregon, LHC has not made any changes that resulted from the transaction. The ordinary course staffing changes that have occurred at the Oregon locations since the close of the transaction are provided in Appendix E. Please note that these materials are confidential pursuant to ORS § 415.501(13)(c).

8. Provide copies of all policies governing LHC locations in Oregon in effect as of January 1, 2023, relating to:

- 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 F for all relevant policies in effect as of January 1, 2023. Please note that these materials are confidential pursuant to ORS § 415.501(13)(c).

9. Provide copies of all policies governing LHC locations in Oregon in effect as of January 1, 2024, relating to the areas listed Request No. 8.a. through 8.i. above.

Please see Appendix F for all relevant policies in effect as of January 1, 2024. Please note that these materials are confidential pursuant to ORS § 415.501(13)(c).

10. Provide copies of all UHG or Optum policies currently in effect governing Oregon patient referrals by Optum-employed or affiliated physicians to home health or hospice care.

Please see Appendix G for all relevant policies. Please note that these materials are confidential pursuant to ORS § 415.501(13)(c).

11. Describe any efforts by UHG since the close of the transaction to address health equity for people in Oregon as it relates to home health and hospice services. Please include (as applicable) information on:

- a. Culturally appropriate home health or hospice service delivery.**
- b. Translation and interpretation services.**
- c. Efforts targeted to improve service access or quality for communities or groups that historically have experienced worse health outcomes or been underrepresented among home health and hospice patients.**

Since the close of the transaction, LHC has continued its previous efforts in the areas listed above, including training employees on culturally appropriate home health and hospice service deliveries, providing interpretation services telephonically by use of a vendor wherever needed, and ensuring its home health and hospice services are broadly available to any patients who need them, including in most cases lower income patients reliant on Medicare or Medicaid to pay for their services. Please also see UHG’s response to Item 22 in its April 30, 2024, response in the comprehensive review of the Amedisys transaction (014 UHG-Amedisys) for further detail regarding LHC’s efforts to improve service access and quality regarding specialized clinical programs, nursing staff utilization, and the development of value-based care models.

12. Please complete the table below listing all Oregon commercial health insurance plans and companies contracted with LHC for home health or hospice services as of January 1, 2023.

Carrier/Company	Insurance product/line of business	Contracted LHC Services	Contracted LHC locations	LHC network tier/status

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

13. Please complete the table below listing all Oregon commercial health insurance plans and companies contracted with LHC for home health or hospice services as of January 1, 2024.

Carrier/Company	Insurance product/line of business	Contracted LHC Services	Contracted LHC locations	LHC network tier/status

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

14. Please complete the table below listing all home health or hospice providers serving patients in Oregon that were contracted with UnitedHealthcare’s commercial health insurance plans as of January 1, 2023.

Provider Name	NPI	Contracted Services	UnitedHealthcare Insurance product/line of business	Network tier/status

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

15. Please complete the table below listing all home health or hospice providers serving patients in Oregon that were contracted with UnitedHealthcare’s commercial health insurance plans as of January 1, 2024.

Provider Name	NPI	Contracted Services	UnitedHealthcare Insurance product/line of business	Network tier/status

Please see the completed table at Appendix I listing the additional providers with contracts that became effective after January 1, 2023. Please note that these materials are confidential pursuant to ORS § 415.501(13)(c).

16. Identify all mergers and acquisitions UHG (or a subsidiary of UHG) has completed nationwide since the close of the transaction on February 22, 2023, where the target included hospice or home health operations/assets. For each transaction identified, please provide:

- a. Transaction closing date.**
- b. All parties to the transaction.**
- c. Nature and objectives of transaction, including type of transaction (e.g., merger, acquisition, affiliation).**
- d. Transaction Consideration.**

Please see the list of LHC Group acquisitions at Appendix J. Please note that these materials are confidential pursuant to ORS § 415.501(13)(c). No other responsive acquisitions have been completed by UHG or its other subsidiaries since the close of the transaction.

* * *

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).

Sincerely,

/s/ Anthony Swisher

Counsel to UnitedHealth Group Incorporated