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UnitedHealthcare Choice Plus Repricing Results
Wednesday, February 25, 2026

Key Considerations

This repricing analysis is intended to provide UnitedHealthcare's best approximation of future customer discounts and costs based upon the current mix of providers and services. Additional cost savings are achieved by UHC's clinical and cost management services and should be taken into consideration. This summary is a best estimate, but does not represent a discount guarantee. Key considerations for this report are:

- UHC's discount calculation is 1- (Allowed Charges/Eligible Charges).
- UHC Expected Allowed has been determined using discounts based upon provider TIN, type of service, product, and expected trend. A credibility limit has been established for each type of service (TOS). In cases where a TIN/TOS combination falls below this credibility level, a zip 3 average discount is used.
- There is no consideration for network development activities that would result in better future overall discounts due to higher % of in-network reimbursement.
- Invalid Records and Rx have not been repriced.
- For all out of network claims, Naviguard expected cost savings has been applied.

Repricing Methodologies

Provider Specific Repricing

The provider specific repricing methodology applies discounts by Tax Identification Number (TIN) and type of service (inpatient, outpatient, or non-facility). Known and expected contract changes are reflected in the projected discounts applied. The analysis considers the group's specific provider utilization and mix of services, and adjusts for contract fluctuations. When a provider specific discount is not available, a zip-3 discount is applied. The summary shows the current and projected discounts.

Zip Repricing

In this methodology, discounts are applied based on zip-3 and type of service. The zip discounts reflect utilization based on the UHC book of business rather than the group itself. Provider TINs are not taken into consideration. The summary shows the current and projected discounts.

Output Summary

Total Submitted Charges

An ideal repricing starts with an eligible billed amount. This is a dollar amount that removes any ineligible/not covered amount, such as duplicate or denied charges. However, this amount is taken directly from the claims file and may not represent eligible charges. Should allowed or paid charges be supplied in the claims file, repricing with these charges will result in understated discounts being reported, given the incumbent's discounts have already been applied.

Charges Not Processed

All records that have not been included in the repricing analysis are located in the Excluded section of the summary. Exclusions include, but are not limited to pharmacy claims and invalid records. Large amounts of exclusions may indicate poor claims data, such as records with insufficient TIN or zip detail.

INN (Par Providers)

Par records are determined from the disruption file. All records except those found in the Excluded and NoMatch (OON) have been included in the INN repricing. A provider specific repricing is performed where applicable. For those records where this cannot be achieved a zip-3 repricing is performed.   The Repricing Methodology graph shows the percentage of providers repriced via TIN vs. zip-3 discounts. The greater the TIN match, the more the repricing results reflect the customer's specific provider mix.

OON (Non Par Providers)

Records showing a match source of NoMatch on the disruption analysis are deemed to be out of network. The repricing methodology for OON records reflects estimated savings for the Naviguard program. Non par claims are repriced with a market level savings factor by type of service. The footnote section in the Repricing Summary states the non-par methodology that was applied in each specific analysis.

Total All Providers

This is a summary of all repriced records. This includes all INN (Par Providers) and OON (Non Par Providers).

Service Mix Analysis Graph

This shows the client's distribution of spend by service type compared to United's book of business. Any large variances should be reviewed. Aggregate discounts will vary based on the concentration of charges by service type.

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2026 Projected Discount Summary

	Eligible	% of Total	TIN Allowed $	TIN Discount %	Zip Allowed $	Zip Discount %
In-Network	$69,252,130	98.4%	$25,289,470	63.5%	$24,904,757	64.0%
Inpatient	*$12,740,411*	*18.4%*	*$4,665,649*	*63.4%*	*$4,809,729*	*62.2%*
Outpatient	*$34,996,093*	*50.5%*	*$12,472,788*	*64.4%*	*$11,018,485*	*68.5%*
Physician	*$21,515,626*	*31.1%*	*$8,151,033*	*62.1%*	*$9,076,544*	*57.8%*
Out-of-Network	$1,044,548	1.5%	$219,203	79.0%	$219,203	79.0%
Excluded	$63,725	0.1%				
Total	**$70,360,403**	**100.0%**	**$25,508,673**	**63.7%**	**$25,123,960**	**64.3%**

2025 Discount Summary

	Eligible	% of Total	TIN Allowed $	TIN Discount %	Zip Allowed $	Zip Discount %
In-Network	$69,252,130	98.4%	$25,822,044	62.7%	$25,121,381	63.7%
Inpatient	*$12,740,411*	*18.4%*	*$4,699,230*	*63.1%*	*$4,805,284*	*62.3%*
Outpatient	*$34,996,093*	*50.5%*	*$12,754,562*	*63.6%*	*$11,154,404*	*68.1%*
Physician	*$21,515,626*	*31.1%*	*$8,368,252*	*61.1%*	*$9,161,692*	*57.4%*
Out-of-Network	$1,044,548	1.5%	$219,203	79.0%	$219,203	79.0%
Excluded	$63,725	0.1%				
Total	**$70,360,403**	**100.0%**	**$26,041,247**	**63.0%**	**$25,340,584**	**64.0%**

1. This is an estimate only. Actual costs and discounts may vary based on a number of factors including member utilization and provider mix.

2. UHC's discount calculation is 1- (Allowed Charges/Eligible Charges).

3. UHC Expected Allowed has been determined using discounts based upon provider TIN, type of service, product, and expected trend. A credibility limit has been established for each type of service (TOS). In cases where a TIN/TOS combination falls below this credibility level, a zip 3 average discount is used.

4. There is no consideration for network development activities that would result in better future overall discounts due to higher % of in-network reimbursement.

5. Invalid Records and Rx records have not been repriced.

6. For all out of network claims Naviguard expected cost savings has been applied.

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Methodology & UHC Book-of-Business

	2026 TIN Discount %	Repriced Weight %	UHC BoB Weight %
Inpatient	63.4%	18.4%	22.1%
Outpatient	64.4%	50.5%	49.9%
Physician	62.1%	31.1%	28.1%
In-Network Total	**63.5%**