

Table of contents

Letter from the President and CEO	3
Who we are	4
Our network	8
Wellness and health promotion	14
Health management	18
Work productivity	22
Customer service	26
People we serve	30
In our community	40
About our company	44
Financial report	46
Division leadership	47
Board lists	49
Network hospitals	50
Our mission and values	52

Visit www.upmchealthplan.com
to view our interactive online
version of this annual report.

Produced by
UPMC Health Plan
Marketing & Communications
Department
Michelle Garraux, Creative Director
Karen Snyder, Writer/Editor
Cristina Kulik, Art Director
Brian Miller, Graphic Designer
Brent Pierce, Production Manager

Testimonial Photography
by Jim Judkis

UPMC Insurance Services Division
One Chatham Center
112 Washington Place
Pittsburgh, PA 15219
1-888-876-2756



UPMC Insurance Services Division

The UPMC Insurance Services Division is part of UPMC. UPMC is an integrated global health enterprise that also comprises a leading nonprofit health system and an actively expanding international and commercial services division. The integrated partner companies of the Division include the following.

UPMC Health Plan, the second-largest health insurer in western Pennsylvania, which offers a full range of commercial group health insurance, including PPO, EPO, HMO, EAPOS, consumer-directed, and FSA products and services; as well as government programs, including:

UPMC for Life, a suite of Medicare HMO and PPO plans and a prescription drug program, as well as health and disease management programs.

UPMC for Life Specialty Plan (HMO), which provides benefits and services for those eligible for both Medicare and Medicaid; 6th largest Special Needs Plan in the U.S.

UPMC for You, which provides benefits and services to those eligible for Medical Assistance; largest MA program in western Pennsylvania.

UPMC for Kids™, a Children's Health Insurance Program (CHIP), which covers uninsured children who do not qualify for Medical Assistance.

Community Care Behavioral Health, the largest nonprofit behavioral health managed care company in the U.S., which supports Pennsylvania's HealthChoices program by managing behavioral health services for Medical Assistance recipients in 35 counties. Additionally, through integrated services, Community Care provides behavioral health management for UPMC Health Plan's commercial and Medicare members.

UPMC Work Partners, which offers a comprehensive suite of programs and technology to promote health and productivity to the region's employers, including health management, employee assistance, workers' compensation, family and medical leave, disability, consulting, data analytics, and return-to-work programs and services.

LifeSolutions®, which provides employers with a comprehensive and proactive employee assistance program (EAP).

Askesis Development Group, which designs and implements innovative software solutions that support behavioral health care services and products.

EBenefits Solutions, a subsidiary of UPMC that provides superior HR and benefits administration and enrollment services through an innovative Web-based system.

UPMC HEALTH PLAN

UPMC *for Life*
UPMC Health Plan Medicare Program

UPMC *for Life*
Specialty Plan (HMO SNP)
UPMC Health Plan Medicare Program

UPMC *for You*
Affiliate of UPMC Health Plan

UPMC *for Kids*™
A Product of UPMC Health Plan

 LifeSolutions®

UPMC
**work
partners**


E BENEFITS®
Solutions

 **COMMUNITY CARE**
Behavioral Health Organization

 **ASKESIS**
Development Group, Inc.

Letter from the President and CEO



*Diane P. Holder
Executive Vice President
UPMC*

*President
UPMC Insurance Services Division*

*President and Chief Executive Officer
UPMC Health Plan*

What do you value?

Good health? Quality of life? Peace of mind? Affordable solutions? How about having the ability to provide all these benefits?

For many people, 2009 came with unprecedented challenges. As a result, we challenged ourselves at UPMC Insurance Services Division to provide our customers with unprecedented value.

For example, consider the value that comes with having choices. UPMC Health Plan members can choose from over 125 hospitals, more than 11,500 doctors, over 14,200 total clinicians, including doctors, and nearly 40,000 independent pharmacies. And consider the value to our Medicare members, who receive affordable options and personalized concierge service.

There's also value in living well. That's why we added new worksite programs like "Coach on Call," which gives members immediate access to assistance from a health coach. And our MyHealth wellness programs help members and their families manage their stress, weight, and nutrition as well as quit smoking. Because the disease that's easiest to treat is the one you never get.

And there's value in informed consumers. Members can call their concierge or use our online tools. With our wide range of web tools, members can refill prescriptions, track their health, find a doctor, or chat live online with a representative — all from the comfort of wherever they choose.

In this report, you'll find information on all our health insurance options, including UPMC Health Plan, UPMC *for Life* Medicare plans, and UPMC *for You* Medical Assistance. You'll see how we're improving the region through services like our Community Care Behavioral Health. And you'll learn how we're helping organizations with programs like UPMC Work Partners. Throughout it all, there's one common thread — providing members with real value.

A handwritten signature in black ink, appearing to read "Diane P. Holder". The signature is fluid and cursive, written in a professional style.



Who we are



Health, productivity, readiness, resilience

These are strengths our members value for themselves and their families. They're also strengths our employers value for their employees.

People with these strengths are enjoying the best possible health, have lifestyle behaviors that minimize risk, and have any chronic conditions under good control. They're able to make their finest contribution, whether it's toward achieving their own personal or family goals, or their workplace's mission. They're ready to respond to the ever-changing pace of daily life — and the ups and downs of day-to-day business. And their resilience equips them to rebound from life's disappointments and challenges as well as from workplace setbacks and stressors.

Through the programs and services we provide, we are proud to create opportunities for all of our members to have these key strengths for themselves — and for our employers to have them for their workforce.

Our values

At UPMC Insurance Services Division, we seek to offer unmatched quality and value to our members and our community. To do this, we continually analyze and improve our products, programs, and services based on our customers' needs and the most up-to-date research.

People with these strengths are enjoying the best possible health, have lifestyle behaviors that minimize risk, and have any chronic conditions under good control. Our commitment is to provide these advantages to every customer.

Quality. UPMC Insurance Services is part of UPMC, an integrated global health enterprise. In 2009, UPMC received national recognition from *U.S. News & World Report* for its clinical programs and made its 10th appearance on the Honor Roll of "America's Best Hospitals." UPMC ranked 13th in a national field of more than 4,800 eligible hospitals.

As part of UPMC, UPMC Insurance Services works closely with the world-class hospitals and physicians in the UPMC health care system. Our wellness and disease management programs are developed by UPMC experts in the fields of exercise, nutrition, and chronic care, incorporating the latest research findings, best-practice preventive care and disease management protocols, and state-of-the-art technologies.

All of our health plans are highly ranked nationally. We maintain "Excellent" accreditation from the National Committee for Quality Assurance (NCQA) for our commercial HMO and POS, our Medical Assistance plan, and our Medicare Advantage plan.

Access. Our provider network includes the world-class academic, advanced care, and specialty hospitals of UPMC, as well as excellent community hospitals, cancer centers, physician practices, and long-term care facilities. Our network of more than 125 hospitals, over 11,500 doctors, and more than 14,200 total clinicians, including doctors, constitutes one of the most comprehensive teams of providers in the region.

For members who live or work outside of western Pennsylvania, we offer access to an extensive national network of more than 500,000 physicians and nearly 5,000 facilities. Members also have access to the services of our global travel assistance partner, Assist America®. Our national pharmacy network includes more than 40,000 independent pharmacies and retail chain locations.

Choice. UPMC Insurance Services provides a wide selection of commercial and public products and services to meet the needs of people in every segment of the community. UPMC Health Plan offers commercial group health insurance, Medicare, Medical Assistance, Special Needs, adultBasic, and Children's Health Insurance Program benefit plans.

Our portfolio of commercial plans includes choices for small, mid-size, and large companies. These choices include PPO, EPO, POS, HMO, consumer-directed health plans, and individual plans, as well as custom plans. Through UPMC Work Partners, we also offer a full suite of wellness, employee assistance, workplace productivity, and leave management programs and services.

Service. Our service is second to none. Our highly trained and knowledgeable call center representatives have as their goal the resolution of each member's request on the first call. Our claims turnaround speed is far faster than the national average. In addition, each client group, regardless of size, is serviced by an account executive and a team of support personnel. We provide account executives to serve the physician practices in our network. We also offer extensive online customer service and a full array of online health and wellness tools and information sources.

Value. The quality, access, choice, and service that we provide to every customer every day add up to an outstanding value in health care benefits. Our goal is to offer our clients all of these advantages at an affordable price.



Our portfolio of commercial plans includes choices for small, mid-size and large companies. Through UPMC Work Partners, we also offer a full suite of wellness, employee assistance, workplace productivity, and leave management programs and services.



Who we are

"As one of 17 companies recognized this year for their employee health and wellness programs, UPMC is at the vanguard of a national movement to promote a system-wide culture of health emphasizing prevention, exercise, and eating right. More than ever, a healthy workforce is critical to helping America's large employers compete in the global marketplace. UPMC and UPMC Health Plan are to be applauded for making health and wellness an integral part of their workplace."

Helen Darling, President of the National Business Group on Health

On UPMC and UPMC Health Plan's Platinum-level recognition from the NBGH for the MyHealth program.



Giving you the advantage of the best

Because we are part of UPMC, UPMC Insurance Services Division has access to the resources of the region's premier hospitals, doctors, and a behavioral health organization. This enables us to offer access to health care of the highest quality and the greatest value to our members and employers. We also offer award-winning, nationally recognized health and wellness programs for all our members.

Ongoing attention to quality, performance, and value

UPMC Health Plan's quality mission is to improve population health, enhance member experiences with care and services, and promote effective and efficient care — in short, deliver health care of the highest value — to our members and the community.

Our Quality Improvement Program, in collaboration with practitioners in the Health Plan network, operates according to guidelines established by the National Committee for Quality Assurance (NCQA) and in compliance with federal and state regulatory requirements. We focus our energies on clinical and operational improvement, credentialing and recredentialing of physicians and other providers, utilization management, member rights and responsibilities, health management and complex case management, and preventive health care.

In the past year, more of our members received the recommended care for heart disease, diabetes, respiratory conditions, pediatric care, women's health, and behavioral health, leading to improved health and lower costs. The Health Plan received high scores for many measures,

notably children's immunizations, follow-up after inpatient mental health stays, and timeliness of prenatal care.

To continuously improve our products, programs, and services for our customers, we have instituted Six Sigma process improvement initiatives. Six Sigma projects were selected to improve and enhance quality of care, service and perception, financial and operating performance, and organizational growth and development. We estimate that these initiatives have achieved efficiencies totaling nearly \$5 million per year, lowering our administrative costs and enhancing the value to our members. Nearly 60 staff members have participated in our Six Sigma Green Belt and Black Belt training programs.

The highest level of service

UPMC Health Plan is committed to delivering the highest quality of service to our customers. As part of this commitment, a Member Advocate or a Health Care Concierge provides personalized service to each member who calls. We are also the first health plan in western Pennsylvania to implement live "chat" with members, using the latest technologies to give members the best customer experience.

J.D. Power and Associates has recognized UPMC Health Plan's call center for providing "an outstanding customer service experience." J.D. Power and Associates awards this certification for call center operation customer service excellence, and the Health Plan is one of a select group to receive such recognition. (For J.D. Power and Associates 2009 Certified Call Center ProgramSM information, visit www.jdpower.com.)



UPMC Health Plan maintains an "Excellent" accreditation from the National Committee for Quality Assurance (NCQA) for our commercial HMO, POS, and PPO plans, our Medical Assistance plans, and our Medicare Advantage HMO and PPO plans.

A leader in promoting healthy lifestyles

UPMC Health Plan and UPMC were among only 17 employers nationwide to earn "Platinum-level" recognition from the National Business Group on Health (NBGH) for the UPMC MyHealth program.

MyHealth is a healthy workplace program created by UPMC and UPMC Health Plan. This innovative program helps to develop a culture of health throughout the workplace and encourages employees and their families to actively manage their health by taking steps to adopt a healthier lifestyle.

MyHealth encourages all UPMC employees to take advantage of healthier cafeteria food choices, wellness and fitness programs, educational opportunities, and community-oriented support groups. The Health Plan first implemented MyHealth with UPMC's 50,000 employees. The program is now also in place with several large employers throughout the region.

Quality and cost transparency

UPMC Health Plan encourages members to learn about the quality and cost of their health care in order to make informed health care decisions and get the greatest value from their health plan. On our website, www.upmchealthplan.com, we make available a number of tools that help consumers compare the cost and quality of health care services:

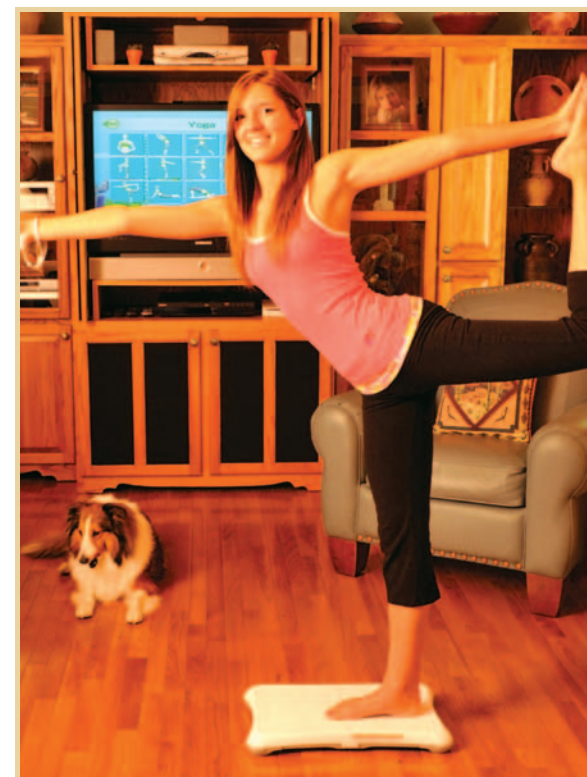
Hospital Quality — The Hospital Advisor allows users to compare the quality of hospitals for specific procedures and conditions. Hospitals are ranked and rated based on complication and mortality outcomes that are adjusted for condition severity.

Hospital Accreditation Status — Our online provider directory lists the accreditation status of network hospitals.

Physician Quality — Our online provider directory lists network doctors who are board certified and have achieved special certification, such as NCQA's physician designation for select conditions, including diabetes and stroke.

Treatment Cost Advisor — This tool allows the user to estimate costs for hundreds of common conditions and procedures.

Prescription Drug Cost — The "Price a Drug" feature displays comparative drug prices, enabling members to save money by using lower-cost drugs or home delivery.



Miranda Bender, UPMC Health Plan Member

A two-way win for better health

Miranda Bender, 17, was one of five young UPMC Health Plan members to win a Nintendo Wii in a Quality initiative designed to encourage our younger members to have checkups. All members ages 12-21 who had a routine checkup with their doctor between August and December of 2009 were entered into a drawing to win the popular computer game.

Miranda thoroughly enjoys her prize and finds it has boosted her activity level. Her new Wii will be the first thing she packs as she prepares to go away to college.



**Wishwa Kapoor, MD, Chief of Medicine at the
Division of General Internal Medicine at UPMC,
and Don McCormick, UPMC Health Plan Member**

Health Plan, doctors, and staff team up to create “medical homes”

When you have a medical problem or need a check-up, what do you hope for from your doctor's office? A timely appointment? A doctor who will take the time to listen? Excellent care? Support in managing your health problem?

Wishwa Kapoor, MD, and his team of medical professionals at the General Internal Medicine (GIM) practice at UPMC Montefiore are committed to providing all this and more. Dr. Kapoor and his staff participate in “Partners in Excellence” — a collaboration with UPMC Health Plan that adds exceptional value to the primary care experience by putting the patient at the center of a team effort to support the doctor-patient relationship and improve care and health outcomes.

“Our goal is to provide the best quality of care,” says Dr. Kapoor. “To me, that means providing easy access in a timely fashion, offering excellent medical care, and addressing the concerns and questions of each patient. It also means empowering patients through self-management and education to deal with health problems. This is the way we can be more effective.”

These goals represent the foundation of the patient-centered medical home, a concept that seeks to integrate all aspects of the health care system at the level of the primary care practice, with the patient and the patient’s family at the center. The GIM practice achieved the highest level (level 3) recognition from the National Committee for Quality Assurance (NCQA) as a patient-centered medical home. GIM is one of only 97 practices in the U.S. recognized at this level.

Don McCormick has been Dr. Kapoor’s patient for 20-some years. “Dr. Kapoor is the greatest,” exclaims Don. “He’s always kind, always takes his time with me. Any experience my wife, Dorothy, and I have had with the practice has been positive. When I had a health problem, the staff took time and care to explain everything to me and answer my questions.”

In addition to being Chief of Medicine at GIM, Dr. Kapoor is also Falk Professor of Medicine, Chief of the Division of General Internal Medicine, and Vice Chair of the Department of Medicine at the University of Pittsburgh.

“UPMC Health Plan has been an important partner for us,” continues Dr. Kapoor. “They provide us with resources and technology to manage patients and help patients manage themselves. The Health Plan’s care managers and health coaches support us in caring for patients with complex conditions and multiple needs.”

Lisa Lilley is a UPMC Health Plan practice-based care manager who works on-site with patients and medical staff at GIM. “The Partners in Excellence program enables us to see the patient as a ‘whole being,’” says Lisa. “Working as a team, we have more impact. I definitely see an increase in patient engagement with us and with their own care.” Lisa is backed by a team of clinicians and care support professionals at the Health Plan. “They built the infrastructure and offer day-to-day support,” she says. “They make what I do possible.”

Partners in Excellence — committed to delivering value through integrated patient care

The UPMC Partners in Excellence program is a collaboration between UPMC Health Plan and physician practices, such as GIM, in our network. The three key components of this program are the patient-centered medical home concept, comprehensive care management and support, and the integration of all aspects of the health care system, with the patient and the patient’s family at the center.

The program includes a team of providers, researchers, and other stakeholders from UPMC and designated physician practices. All Health Plan members at each practice are included in the program. A practice-based care manager is assigned to each practice site. A care support team located at the Health Plan works with the practice-based care manager to support care coordination for the Health Plan members at that practice. The support team also links the member to community resources when appropriate.

Support for both members and physicians

A designated practice-based care manager, a physician account executive, and the entire patient-centered medical home team at the Health Plan support physician practices in redesigning their office processes to accommodate the medical home concept. The Health Plan and the practice share data about the practice’s patients as a group, as well as about individual Health Plan members who are patients, in order to better coordinate care. Currently, there are 21 practice sites in the program, serving 26,138 members. We expect the program growth to result in close to 85,000 members in 2010.

Our goals for the program include:

- Improving access to care
- Establishing patient-centered medical homes within our provider network
- Developing a new model of care management for chronic illness
- Improving care coordination for our members
- Improving quality of care scores
- Integrating behavioral health and physical health services



Through our connection to the clinical expertise of UPMC’s physicians, we can offer our members wellness and health management programs that have demonstrated proven results — both in improving health and controlling costs.



Our network

The value of a strong local network with a worldwide reach

As a regional health plan, we are proud of our western Pennsylvania roots and our longstanding involvement in the local community. UPMC's integrated health care system brings value to this region through its worldwide reputation for excellence and state-of-the-art medical technology. Its network of health care providers extends across the country and around the world.

Our comprehensive network of more than 125 hospitals and other facilities includes the academic, advanced care, and specialty hospitals of UPMC as well as community hospitals, cancer centers, physician practices, behavioral health programs, and long-term care facilities.

Our network of over 11,500 primary care physicians and specialists and more than 14,200 total clinicians, including doctors, makes up one of the region's largest and most diverse teams of health care professionals. The physicians in our regional network include outstanding UPMC and community health professionals representing every medical specialty. Network physicians, hospitals, and ancillary providers are carefully selected based on rigorous credentialing standards.

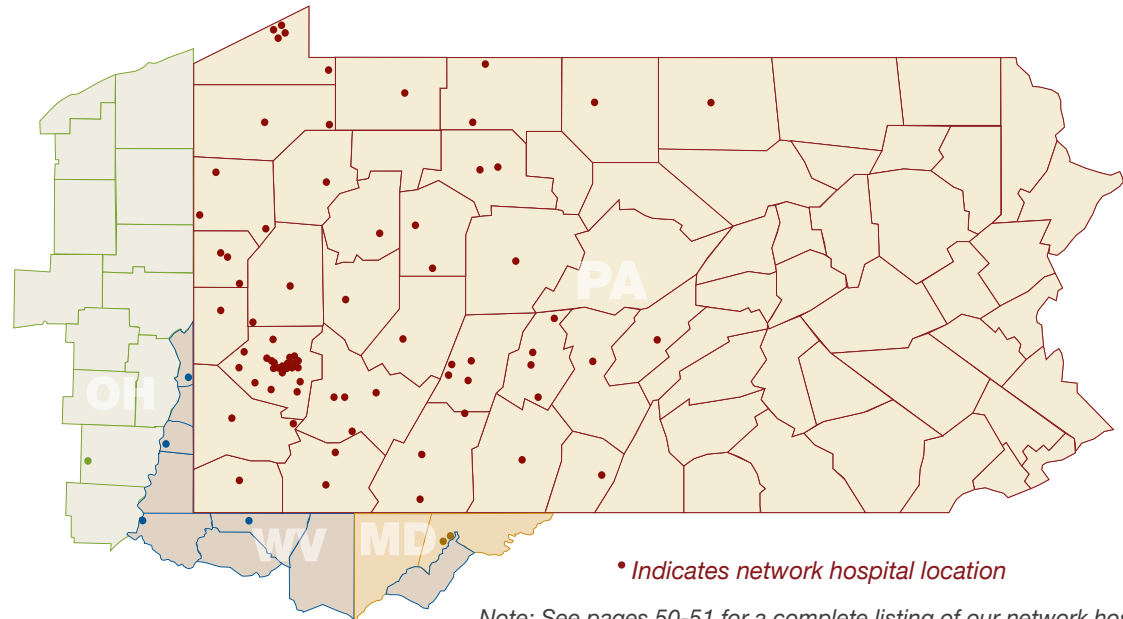
Drawing on academic expertise

Through our connection to the clinical expertise of UPMC's physicians, we can offer our members wellness and health management programs that have proven results — both in improving health and controlling costs.



The patient-centered medical home concept places the patient and patient's family at the center of a team effort that serves to support the doctor-patient relationship. Pictured are physicians and staff members of the General Internal Medicine practice, one of just 97 practices nationwide to earn the NCQA's highest level of recognition (level 3) as a patient-centered medical home.

Our regional network, which now extends into central and eastern Pennsylvania, includes more than 125 hospitals and 11,500 physicians.



• Indicates network hospital location

Note: See pages 50-51 for a complete listing of our network hospitals.

And, unlike other health plans, which typically contract with outside agencies to provide their members with these services, our own clinical professionals conduct our disease management programs on-site.

Our in-house staff includes health coaches who have training and expertise in one or more fields, including nutrition, weight management, exercise physiology, tobacco cessation, chronic health condition management, and counseling. Many are registered nurses or certified diabetes educators; others are registered dietitians, exercise physiologists, or certified health education specialists. These professionals have one-on-one contact with our members, offering support that is immediate and personal.

Our network includes **2,934** PCPs,
631 pediatricians,
and **7,399** **641** ob-gyns,
specialists.



Grant Shevchik, MD

The doctor is “e”

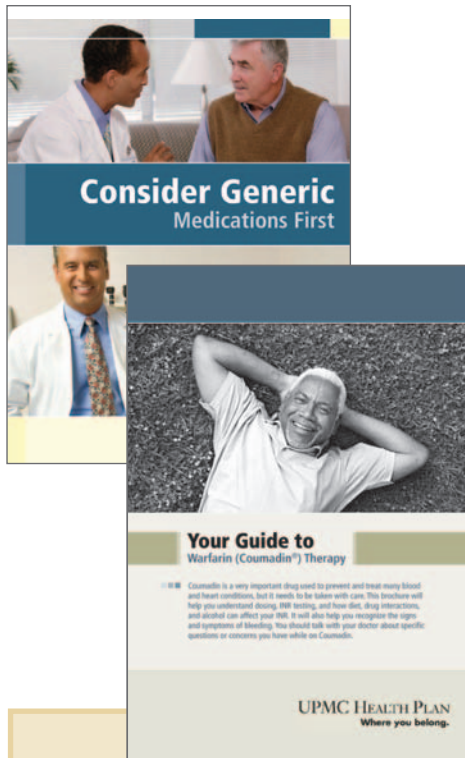
You’re feeling sick, but the last thing you want to do is get dressed and drive to your PCP’s office. Wouldn’t it be great if you could e-mail your concerns to the doctor and get a response?

Grant Shevchik, MD, thinks so. Dr. Shevchik enthusiastically espouses the use of e-visits, a technology that helps him to care for certain patients efficiently and effectively. Dr. Shevchik is a primary care physician with Partners in Health — UPMC Family Practice, which has offices in Level Green, Murrys ville, and Delmont.

“Our patients really embrace the e-visit concept,” says Dr. Shevchik. “It’s a very convenient option for people who feel too sick to go out or who don’t want to take time off from work to come in to the office. They can go into their HealthTrak account online, answer a questionnaire about their symptoms, and e-mail it to the doctor.” It’s convenient for doctors as well, since “they are not limited as to where they can be.” UPMC Health Plan actively supports e-visits. Dr. Shevchik credits the Health Plan for encouraging this innovative practice and making it feasible for doctors to implement it.



Our network



UPMC Health Plan's Pharmacy Department develops clear, easy-to-use educational materials for both providers and members. Among these are a brochure encouraging doctors to prescribe generic medications and a flier explaining Coumadin therapy to members with heart disease.

Seamless service across the nation...

Our goal is to offer exceptional value, access, and services to all our members, wherever they are. We provide the same seamless access to quality care to members who work for a Pennsylvania employer that has branches in other states, or who have business that takes them outside the region. These members have access to more than 500,000 physicians and 5,000 facilities nationwide.

...and around the globe

UPMC Health Plan members traveling 100 miles or more from home have travel assistance through Assist America® as part of their health plan membership. Assist America provides connections to doctors, hospitals, pharmacies, and other services, including evacuation, repatriation, and more.



Members have access to our national network of more than half a million physicians and nearly 5,000 hospitals. Our national pharmacy network includes 40,000 chain store and independent retail locations.

High-quality, high-value pharmacy services

UPMC Health Plan offers comprehensive pharmacy services and innovative solutions that maintain a high level of care, quality, service, and value while managing pharmacy costs. Health Plan physicians and pharmacists and our Pharmacy and Therapeutics Committee, which includes world-class UPMC physicians, community physicians, and pharmacists, collaboratively develop our formulary, or list of covered drugs.

The result is a high-quality, high-value, cost-effective formulary that includes both generic and brand-name drugs. As the number of brand-name drugs that have a generic version increases over the next several years, the Health Plan will leverage its pharmacy, clinical, and benefit management strategies to promote the use of affordable, high-quality generics that save our members and clients money.

A comprehensive network of pharmacies to serve members

Our extensive pharmacy network gives our members access, choice, and value. Nearly 40,000 independent pharmacies and retail chain locations, such as CVS, Giant Eagle, Kmart, Rite Aid, Sam's Club, Target, Walgreen's, and Wal-Mart, are available across the country, with some locations open 7 days a week, 24 hours a day.

Members can also use our mail-order service to have their maintenance or specialty medications delivered directly to their home or doctor's office and often save on their copayment as well.

Helping members use medications safely

To promote safe, appropriate, and cost-effective drug therapy for our members, Health Plan pharmacists conduct ongoing reviews of claims data as part of our Medication Therapy Management (MTM) Program. They look for potential problems such as medication non-adherence, duplication of therapy, and drug interactions and then collaborate with care managers and physicians to determine appropriate interventions for both the patient and the provider. Integrating pharmacy and medical claims data helps us to obtain the best outcomes for our members.

Helping members save money

Our website, www.upmchealthplan.com, provides members with the latest health and pharmacy information as well as tools that can help them make informed health care decisions. Through MyHealth OnLine, members can estimate and compare pharmacy costs, review the drug formulary and any generic drug alternatives, and check copayment levels. In addition, members can renew mail-order prescriptions, view their personal medication history, locate a pharmacy, and obtain drug information, including information on generic and specialty drugs.

Generic drugs made up
72% of prescriptions
 filled for members in 2009.



Carmen Goodnight, PharmD, UPMC Health Plan Pharmacist, answers questions on National Senior Health & Fitness Day.

Just ask a pharmacist

How long should I take this medicine? What is the maximum dosage? What are common side effects? People often have questions about their medications that they didn't think to ask at the doctor's office. Or, questions may come up after they've been taking a drug for a while.

Our "Ask a Pharmacist" program provides members and others with an easy way to get their drug questions answered at a number of community events. Our pharmacists staff booths at health fairs; neighborhood meetings sponsored by UPMC for Life, our Medicare

program; and other events. Carmen Goodnight, a UPMC Health Plan pharmacist, enjoys participating in these events.

"People can feel free to take their time asking me questions, and I can take time answering them," she says. "They don't feel pressured, as they might in a medical setting." Carmen recently answered seniors' questions at the National Senior Health & Fitness Day event at the Pittsburgh Zoo & PPG Aquarium.



**Ray Boettner, UPMC Health Plan
Member, and daughter, Samantha**

The sky's the limit for father of pilot-in-training

Ray Boettner's primary reason for wanting to lose weight was "loftier" than most — he wanted to be able to fit into the back seat of a Cessna 172. Ray's 17-year-old daughter, Samantha, is a Civil Air Patrol cadet. Once she solos this year, father and daughter are looking forward to a cross-country flight. "Weighing what I did, I would never have been able to climb into that seat," says Ray, who has lost 101 pounds so far.

Samantha, a student at Serra Catholic High School, plans to major in aerospace engineering at Penn State. She has been with the Civil Air Patrol since age 12 and is looking forward to getting her pilot's license.

Ray, an employee of UPMC Passavant in the Engineering and Maintenance Department, knew he needed to lose weight. He had developed arthritis in his knees and feet and was deemed too heavy for a prescribed treadmill stress test. After hearing other employees' weight loss success stories, Ray decided it was time to seek assistance from a health coach at UPMC Health Plan.

“I started the UPMC Health Plan Weight Management Program in April of 2009, and at the end of one year, I had met my 100-pound goal!” exclaims Ray. Ray credits his success to a combination of personalized weight-loss tools and interaction with UPMC Health Plan health coach Kasey Danforth. “Kasey was lots of fun to work with,” he reports. “She kept me on track and provided me with tools that truly made this a life-changing process. I never realized how much I ate — especially fat — before working with her. I couldn’t have done it without her.”

One of the tools Kasey gave Ray was a daily food log. Ray is now very conscientious about keeping track of what he eats and tries not to go beyond the daily calorie limit he set with Kasey’s help. “The number one thing is, you have to write down everything. No cheating! Overestimate calories, don’t underestimate — it keeps you on track,” Ray notes. He also closely monitors his weight and gets on the scale daily. “You have to buy a good scale and weigh yourself regularly,” he advises. And he’s started using the treadmill he’s owned for 10 years.

Ray counts many benefits from his weight loss. He feels better and has more energy. His family has been especially supportive, and now they eat healthier too. In addition, “My heart doesn’t pound the way it did even when I was sitting still, and I don’t get out of breath as easily. I can reach down to tie my shoes and climb a ladder, things I found difficult to do before,” says Ray.

But for Ray, the benefit he values most is that he now can get into the Cessna with Samantha. When she flies across the country for the first time, Ray will be right there with her.

Participant
satisfaction exceeds **95%**
for all of the **MyHealth** programs.

Working together for good health

We know that good business leaders care deeply about the health, well-being, and productivity of their employees. Our award-winning wellness programs give our clients the resources they need to protect their most valuable resource — their employees.

Knowing that workers come with a range of talents — and a range of health conditions that may affect their performance on the job — we personalize our programs and tools to the needs of companies and the individuals who work for them. By working in a collaborative partnership, with defined, measurable goals and objectives, we help employers implement strategies to support worksite wellness initiatives that can reduce health risk factors, increase productivity, improve morale, and, ultimately, decrease health care cost trend.

Innovating to promote healthy behaviors

In consultation with national experts at UPMC and the University of Pittsburgh, UPMC Health Plan has created a suite of wellness programs and tools called UPMC MyHealth. MyHealth is an aggressive, proactive approach to helping members manage both chronic conditions and lifestyle issues.

No matter the personal goal — to lose weight, quit smoking, get more exercise, eat better, or reduce stress — the MyHealth program enables employees to track their health, set goals, and get personalized assistance. We designed this spectrum of education, support, and care — over the phone, online, in print, and face-to-face — to help all of our members achieve optimal health and well-being. Participation in the MyHealth program can make members aware of early signs of a chronic health condition and help them take preventive steps to avoid more serious complications later.



“My goal was to be down 100 pounds by the end of one year. I made it, with one pound to spare!”

– Ray Boettner,
UPMC Health Plan Member

Wellness and health promotion



Training workplace wellness champions

UPMC Health Plan conducted an on-site workshop called the *MyHealthy WorkPlace Certificate Program*. The workshop attracted more than 80 wellness committee members from throughout UPMC as well as several major clients who are wellness champions for their organizations. Attendees learned the fine points of building a workplace culture of health and received a Certificate of Completion at the end of the program.

The certificate recognizes the recipient as a wellness program coordinator and as a leader in the development, implementation, and assessment of initiatives designed to engage employees in adopting healthy behaviors that lower their health risks, maximize productivity, and contribute to a healthy work environment.

Getting started — health assessment and screening

The Health Plan recommends that worksite wellness programs begin with two assessments: an online health risk assessment and a biometric health screening. These can identify risk factors in an employee population and assess employees' willingness to change. Employees who attend a *MyHealth* screening receive easy-to-read color-coded printouts of their results along with health education to help them interpret the results, follow up with their primary care physicians, and take steps to a healthy lifestyle.

Health coaching for lifelong improvement

Our health coaches are experienced, professional motivators who are knowledgeable about the best, most effective ways to help people not only make important changes to improve their health but also sustain these changes over the long term. Our health coaches are trained in health education, counseling, nutrition, exercise physiology, and/or diabetes education.

Health coaches provide telephone support and guidance, working with members to set goals and design action plans that will offer ongoing motivation while overcoming barriers to maintaining healthy habits and behaviors. These coaches are part of the Health Plan's health management team and complement the treatment members receive from their physicians.

New "Coach on Call" program

We now offer all of our members a new program designed to deliver health coaching for specific health improvements and wellness challenges on an as-needed basis. The program is called UPMC *MyHealth* Coach on Call. Coach on Call expands

on our popular health coaching program by offering highly targeted intervention that responds immediately to a member's needs.

Coach on Call is aimed at members who are ready to make a lifestyle change, but may not be able to make a commitment to a full program. A member can call and have a conversation with a health coach about a specific question or concern. After the call, the health coach sends the member a follow-up e-mail enabling the member to access printable online tip sheets with useful information that supports healthy behavior change.

Telephone interactions and tip sheets are available for 42 specific topics in the categories of physical activity, stress management, weight management, nutrition, and tobacco cessation. Examples include "Building Flexibility," "Getting Ready to Quit Tobacco," and "Healthy Dining Out."



In 2009 UPMC employees lost more than 10 tons in the 12-week *MyHealth* Weight Race.

Teaming up to win better health

The MyHealth Weight Race is a lifestyle improvement challenge that invites employees who want to manage their weight to team up with co-workers. This 12-week program emphasizes healthy eating and increased physical activity. It also fosters a worksite environment that encourages personal lifestyle improvement. The program includes ongoing communications that provide nutrition, exercise, and behavior change tools and tips.

For three consecutive years, employees of UPMC and the University of Pittsburgh have enjoyed participating in MyHealth Weight Races.

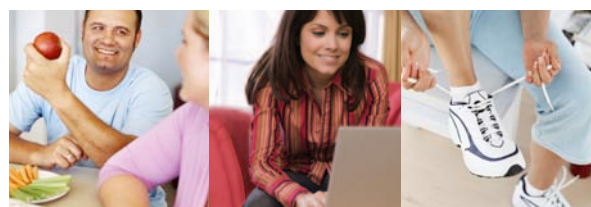
Encouraging other lifestyle changes

Other MyHealth worksite programs and resources designed to promote healthy living include:

- MyHealth OnLine interactive tools and programs.
- Dining Smart, which provides assessments and nutrition criteria for offering healthy food choices in company cafeterias and vending machines.
- On-site classes on weight management, healthy eating, physical activity, and stress management.
- Lunch-and-learn presentations by UPMC wellness experts on various health-related topics.
- An exclusive discount program that enables members to save money at fitness centers, dance studios, sporting goods stores, cultural and recreation facilities, and more.

An inclusive strategy

UPMC Health Plan gives employers who offer our benefit plans the option of providing MyHealth wellness programs to all employees, including those who do not have UPMC Health Plan coverage. These employees, called “Wellness Members,” receive the same wellness-related programs and tools as members with Health Plan coverage.



MyHealth OnLine interactive tools are a tremendous value to our members. More than 160 Health Topics, a Symptom Checker, and interactive programs for weight management, stress management, smoking cessation, nutrition, and physical activity are available at no additional cost, 24/7.



Stepping up to good health

During its annual Take a Healthy Step campaign, UPMC promotes an array of services — the MyHealth Questionnaire health risk assessment, biometric screening, health coaching programs for weight or stress management or smoking cessation, and a wide variety of other “healthy steps” that UPMC employees can use to maintain and improve their health. Employees who complete these steps accumulate points for their efforts, receive a deductible credit, and qualify for entry in drawings for cash prizes.

The Take a Healthy Step platform is able to be customized to meet employers’ specific needs in supporting employee health.



Debra Snipe,
UPMC Health Plan Member

I want to live a long and healthy life

Debra Snipe's 40th birthday was both a celebration and a wake-up call. Debra had been diagnosed as pre-hypertensive — meaning she was a likely candidate for high blood pressure. She was experiencing symptoms that worried her — severe headaches, neck pain, and blurred vision.

Debra's mother, who also suffered from high blood pressure, had passed away at age 60. Debra realized that if she did not begin to take better care of her health, her life might now be more than half over.

"I wanted to live, and to live a long life," says Debra, as she holds a treasured photograph of herself with her beloved mother, to whom she was very close.

Debra scheduled an appointment with her primary care physician, Barbara Kevish, MD, to have her symptoms checked. Debra's blood pressure reading was unusually high, and Dr. Kevish made a change in Debra's medication. The physician assistant arranged for Cathy Grove, a practice-based care manager who works closely with Dr. Kevish's practice, to talk with Debra on the phone.

Within two business days, Debra received a free kit from Cathy that included a user-friendly blood pressure cuff, information on high blood pressure and online programs offered by the Health Plan, a medication dispenser case, and Cathy's contact information. The goal was to assist Debra in monitoring her blood pressure at home and to support her in making healthy lifestyle adjustments to keep her blood pressure under control.

Debra and Cathy had several phone sessions that gave Debra a good foundation for managing her blood pressure. For the next six months, Cathy checked in regularly with Debra to see how she was doing. Debra continues to use the educational information and healthy living tips she received from Cathy to help her manage her blood pressure. She has also taken advantage of other Health Plan programs, including lunch-and-learn sessions on various wellness topics and automatic online health updates.

Debra had accepted her position as a disability specialist for UPMC Work Partners in July of 2008 in part because friends had told her about the impressive package of programs and benefits offered by the Health Plan. The care and support she has received since then have more than met her expectations. "I'm proud to have UPMC Health Plan insurance. And I'm proud of the people in my circle that are keeping me on track for a healthy lifestyle." Debra is also delighted that she can now be a role model to help others become healthier.

At her most recent check-up, Debra's blood pressure was well-controlled and her doctor noted no problems or issues. "I feel great and am looking forward to a long and healthy life," says Debra. "I would encourage anyone with health concerns to take advantage of the programs the Health Plan offers. The services are priceless."

Improving quality of life

UPMC Health Plan provides a spectrum of education, support, and care that meets each member where he or she is and supports the member in striving for the best possible quality of life and health. Our programs serve members who want to maintain their health, those at risk, the chronically ill, and those suffering from a complex illness or injury or multiple conditions. The Health Plan's health management function includes a comprehensive team of health professionals who serve members' needs where and when that service is most effective.

Wellness programs. MyHealth, our comprehensive suite of wellness programs and services, includes an online survey that gives users immediate feedback on any health risks identified by the survey, a biometric screening, telephone health coaching for positive lifestyle changes, worksite seminars, physical activity programs, an array of interactive online programs, health trackers, and a library of information on health and wellness.

Condition and case management. Clinical health coaches staff the Health Plan's clinical call center, reaching out to members who have a chronic disease such as diabetes, asthma, or heart failure or a complex medical condition. These coaches help members manage their condition by following their doctor's plan of care. They provide members with educational materials and support them in obtaining the skills and knowledge necessary for self-management.

Practice-based care management. As part of our Partners in Excellence program, practice-based care managers spend time in physicians' offices, working with doctors to identify members who might benefit from health management services. These clinical professionals also serve as health coaches — they meet with patients who have a chronic illness or a complex condition, educate them on their condition, and refer them to appropriate resources.



"Never before have I had health insurance that offered so many programs that support members in maintaining a healthy lifestyle."

**– Debra Snipe,
UPMC Health Plan Member**

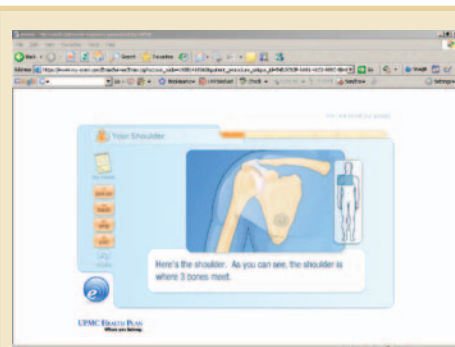


Health management



Round-the-clock health care advice is available to all members through the MyHealth Advice Line. Through this program, experienced registered nurses provide prompt and efficient service over the phone.

20



Emmi®, an interactive online tool available at www.upmchealthplan.com, provides basic information about asthma, diabetes, coronary artery disease, hypertension, and other chronic illnesses as well as about dozens of life-saving and elective surgeries.

Hospital-based case management. Health Plan case managers work on-site at network hospitals to review member admissions to make sure they meet medical necessity criteria. They help to streamline care delivery and to facilitate a safe, high-quality inpatient experience. They also help to plan and arrange discharge services, providing authorization for appropriate services, disease management programs, complex case management, social work services, and prevention and health promotion services.

Skilled facility-based case management. Health Plan case managers work on-site at skilled facilities in our network to assist with care transitions. They educate members about their condition and medications and assist with developing a self-management plan as needed. On discharge, they notify the member's physician and help transition the member back to the Health Plan for continuation in case and health management programs as appropriate.

Mobile care management. The Health Plan's care management team also includes mobile care managers who serve members in designated areas of Pennsylvania, Ohio, and West Virginia. These members may reside in rural areas and need support in accessing medical care. Care managers may visit members about to be discharged from the hospital or visit a member at home after discharge to assess the member's medical condition and coordinate further care as needed. They may transition members to a Health Plan health management program, help them get to follow-up doctor appointments, or assist them in obtaining other services within the community.

Innovative programs for unique needs

In partnership with medical researchers and experts at the University of Pittsburgh and UPMC, the Health Plan continues to develop and implement leading-edge clinical programs and medical support technology.

Care management technology. UPMC Health Plan clinical staff use HealthPlaNET, a robust claims-based record and care management system that supports high-quality care and resource utilization as well as prevention and wellness programs. The Health Plan designed HealthPlaNET to support multidisciplinary teams of clinicians in delivering effective member care.

Heart monitor program. The Health Plan partners with UPMC/Jefferson Regional Home Health in a comprehensive program for UPMC *for Life* (Medicare) members who have been diagnosed with heart failure. Members receive a telemonitor in their home that records their blood pressure, pulse, and weight and transmits this data to UPMC Home Health for "real-time" intervention. The purpose of this program is to improve healthy behaviors, provide education on self-management skills, reduce the frequency of emergency room visits and inpatient hospitalization, and ultimately improve the quality of life for our members and their families.

Wound care program. The UPMC Wound Care Program is designed to facilitate state-of-the-art treatment for chronic wounds in a home care setting. The program employs a team-oriented approach in which wound care specialists and a Health Plan wound care case manager collaborate with each patient's primary care physician.

Tending to body and mind

The Health Plan offers behavioral health treatment for members of all ages for all types of mental health and substance abuse problems. We are sensitive to the fact that some people with chronic medical conditions also develop depression. The Health Plan's health management programs screen participants to see if they could benefit from our depression management program. Primary care physicians, who are often the first contact for patients with depression, also make referrals. We provide telephone outreach and ongoing support as well as educational materials, appropriate referrals, and care coordination.



Kristen Carothers, UPMC Health Plan Member

Personalized help for first-time mom

When Kristen Carothers received a call from UPMC Health Plan maternity health coach Allison Ridilla inviting her to join our maternity program, she was surprised and pleased. As part of the program, Allison would call Kristen each month during her pregnancy to see how she was doing and whether she needed help with anything.

Kristen, a first-time mother-to-be, found Allison to be "incredibly helpful" in answering questions about pregnancy, childbirth, and caring for a newborn.

"It's good to have someone to ask the questions you may not think of in the doctor's office," she notes.

Since Kristen will be going back to work after her maternity leave, Allison connected her to *LifeSolutions*, our EAP service, to help her find convenient options for daycare. Kristin was pleased that, within 24 hours, she had the names of several daycare facilities near both her workplace and home.



Members of Port Authority of Allegheny County Workers' Compensation Department:
Janet Wyratt, Joan Mediate, Michelle Hanna, Todd Stoker, and Janet Yenchik

Keeping workers healthy and on the move

In 2009, the Port Authority of Allegheny County's 2,700 employees connected over 67 million passengers to their destinations over a 775-square-mile service area.

"When medical costs and wages are rising, but your workers' comp costs have gone down over the past 12 years — when your program is saving money — that's the kind of value we appreciate," says Port Authority Claims Director Todd Stoker. "That's what we are seeing, thanks to our partnership with UPMC Work Partners."

Since 1998, the Port Authority has collaborated with Work Partners to manage its workers' compensation program. Recently the relationship was extended with a new multi-year agreement.

“Work Partners is very effective in communicating and cooperating with us,” Todd adds. “We take a very aggressive approach; we are constantly looking to improve the program, and Work Partners is very involved in that. Their customer service is second to none.”

“Our partnership with the Port Authority was the first program in the region designed to integrate the administrative and technological strengths of Work Partners with the medical expertise of the UPMC health care delivery system,” says David M. Weir, President of UPMC Work Partners. “We built a program specifically to handle the Port Authority’s complex and geographically dispersed population.”

Port Authority employees appreciate that they have access to prompt, quality care at UPMC treatment centers close to their work locations. “Employees seek care faster, stay healthier, cost less to insure, and are more productive when care is fast and easy to access,” notes David. “We are extremely pleased with the success of the program and with the collaboration of our two organizations. We are proud to provide this kind of value to our clients.”

“Work Partners is our valued partner,” Todd continues. “By helping our employees to stay healthy and productive, they are helping us accomplish our goals.”

In the past
4 years alone,
UPMC Work Partners
has saved its clients over
\$100 million
in direct costs
and future liabilities.

Healthy solutions for businesses

UPMC Work Partners, part of the UPMC Insurance Services Division, provides health and productivity solutions to businesses throughout the region. Both studies and experience have demonstrated that properly designed and implemented health and medical solutions in the workplace lead not only to healthier employees — but also to greater employee productivity and better cost control.

Work Partners collaborates with each employer to assess needs and help build an effective health and productivity strategy, which may include any or all of the following:

Absence management services, including medical and third-party administrator services for workers’ compensation, leave management (FMLA, military, and other employer-sponsored leaves), and disability management.

Consulting and data analysis services for health, wellness, and productivity initiatives, as well as wellness committee development and safety consulting.

Employee assistance services, delivered through *LifeSolutions*.

On-site services, including worksite clinics, screenings, and immunizations.

Health management services, including health risk assessments, screenings, wellness programs, and condition management programs.



“The Gateway Engineers, Inc., chose *LifeSolutions* for its coaching and counseling services, and also for the valuable work-life balance and stress relief programs that *LifeSolutions* is able to provide at our annual Wellness Day and Benefits Fair.”

– Kim Kyriakis, Human Resources Manager,
The Gateway Engineers, Inc.



Work productivity



Working together: Total Health Management

Total Health Management is a strategic solution that integrates all aspects of an organization's health and productivity. Employers appreciate the compounded value of absence, medical, and consulting solutions from Work Partners; award-winning health and wellness programs from MyHealth; behavioral and personal need solutions through LifeSolutions; the user-friendly technology platform provided by EBenefits; and high-value insurance products from UPMC Health Plan. Together, these services combine to build strong solutions that result in healthier, happier employees and better organizational performance.

Comprehensive services for employers and employees

Work Partners uses proprietary health and productivity management technology to identify individuals at high risk for costly medical conditions. We then use proprietary behavior modification engagements to shift those individuals to a low-risk state. It's a valuable one-two proprietary punch that provides our clients with an unprecedented — and extremely appreciated — ability to manage their employee health costs.

Many other Work Partners services add value and reduce costs. Among Work Partners' new product initiatives for 2009 was the development of on-site clinics for three U.S. Steel plants in western Pennsylvania. In 2010, Work Partners continues to expand its scope of services to help the region's employers make the transformation to strategic health and productivity management, including the debut of a new workers' compensation product for fully insured companies in Pennsylvania.

LifeSolutions

Part of UPMC Work Partners, LifeSolutions has been providing employee assistance programs and services to area employers for over 30 years.

Many studies have shown that the majority of employee leaves are due to family and personal issues, not employee illness. Evidence also shows that the cost of productivity losses due to employees' being present at their jobs but not fully engaged may be four times the cost of their medical care. LifeSolutions addresses the behavioral health and personal needs of employees, helping to reduce absenteeism

and presenteeism, increase productivity, and reduce costs. LifeSolutions continues to develop new programs and services to help employees and their household members. Services are confidential and include:

Personal coaching and counseling

for behavioral health needs such as anxiety or depression, family and marital issues, workplace problems, financial concerns, and career counseling.

Chemical dependency triage, referral, and management.

WorkLife balance resources, accessible via phone or web, to provide information and solutions for day-to-day life issues including child care, elder care, legal and financial questions, consumer purchases, and more.

Disability and leave management support programs for employees on disability or family medical leave.

Workplace trauma support services for traumatic incidents or personal tragedy.

Manager/supervisor support services for organizational and employee-related issues, including performance management support, leadership training, and stress management.

Education and training to maximize interpersonal relationships at work.

EBenefits Solutions

EBenefits Solutions is a UPMC Work Partners affiliate owned by UPMC that offers employers a state-of-the-art human resources and benefits administration platform and services.

EBenefits provides employees with a simple way of handling benefits administration and other human resources functions. It also frees human resources teams from those administrative tasks so they can focus on strategic programs and initiatives.

Our dedicated, highly specialized staff work with clients to create seamless and customized solutions to meet each employer's needs. The result is a unique combination of software, human resources consulting services, and training solutions that improves service to employees, enhances employee communications, and substantially lowers operating costs.

Every EBenefits client has achieved greater than 100% return on initial investment, with most clients seeing a return of greater than 200% from direct and indirect cost savings. Dedicated account management, IT staff, and customer service representatives provide best-in-class service to clients. New features and functionality added in the past year include the capability to seamlessly provide COBRA administration, flexible spending account administration, and billing reconciliation for employers.



Donna Bumbas, UPMC Health Plan Member

Enjoying good health

Employers recognize that having their workforce maintain a healthy weight means lower medical and pharmacy claims for such conditions as heart disease, diabetes, and back injury. Employees appreciate their employers' support in offering workplace programs that enable employees to improve their health by building healthy new lifestyles with regard to nutrition, physical activity, tobacco use, and stress management. And employees also appreciate the value of feeling good, looking good...and enjoying life's little pleasures.

For Donna Bumbas, one of those pleasures is shopping for and enjoying fashionable clothes. When shopping at Kohl's, her favorite store,

in the fall of 2009, Donna was dismayed to find she could no longer fit comfortably into regular-size jeans. "I refused to buy plus-size clothes!" she exclaims. So Donna, who works for UPMC/Jefferson Regional Home Health, joined a UPMC Health Plan weight management group. The UPMC MyHealth Weigh to Wellness™ program helped Donna learn about portion sizes, counting calories and fat grams, and the importance of an active lifestyle. So far, she has lost 32 pounds.

"Now it's a thrill to find an outfit I love and know I'll be able to fit into it," exclaims Donna. "And I appreciate that I'm improving my health along with my silhouette."



Customer service



**Mark Henderson,
Health Care Concierge,
and Dolores McIlvain,
UPMC for Life Member**

UPMC *for Life* member gets custom care from Health Care Concierge

Dolores McIlvain loves the service she gets from UPMC Health Plan. And now, to her delight, she can put a name and a face on that service — Mark Henderson. “Mark is just amazing...he’s a keeper,” says Dolores.

Dolores recently joined UPMC *for Life*, UPMC Health Plan’s Medicare Advantage plan. Mark is the Health Care Concierge who helped her navigate the sometimes confusing world of Medicare coverage.

The service Mark provided to Dolores is a good example of the value we offer our members every day, in terms of service that is dedicated, personal, and efficient.

For many years, Dolores worked as office manager for a physician practice. “I loved my job. I loved working with people,” she says. In her position, Dolores was responsible for hiring staff. “I knew what it meant to try to find someone with good people skills. Mark has everything I would look for in an employee, and more.”

Because she was still working and had health care coverage from her employer, Dolores did not immediately sign up for Medicare when she became eligible. She was unaware, however, that she was automatically assigned to a plan by the federal Medicare program. This caused some paperwork problems when she attempted to sign up for UPMC *for Life*, the Health Plan’s Medicare Advantage plan.

When Dolores called UPMC Health Plan’s call center for help, it was Mark who answered the phone. “Mark was unbelievable,” says Dolores. “He went above and beyond. He researched my situation and checked with his supervisor when he needed more information. During the time we worked together on my problem, he never left me hanging, wondering what was going on. He called me and kept me informed of the status.”

“When I saw Mrs. McIlvain’s address, it caught my interest,” says Mark. “We discovered we both had a connection to the neighborhood where I grew up. It helps if you can find something you and the member have in common — you establish a rapport.”

Mark’s persistence in pursuing the facts of her case eventually resulted in a clearing up of the paperwork for Dolores. Dolores and her husband signed up as UPMC *for Life* members in December of 2009 and have been satisfied ever since.

“I trust UPMC,” states Dolores. “I would never go anywhere else.”

Exceptional, high-value service

We view exceptional service to all customers as a critical differentiator. UPMC Health Plan is committed to providing customers with fast, accurate, efficient service every time.

We make it a priority to go beyond our customers’ expectations in servicing our accounts and responding to inquiries and requests.

As a result of our dedication to excellent service, UPMC Health Plan’s call center has been recognized by J.D. Power and Associates for providing “an outstanding customer service experience.” This certification is awarded for call center operation customer service excellence, and the Health Plan is one of a select group to receive such recognition.

This certification included successfully completing an audit and exceeding a national benchmark for satisfaction on a survey of our members. Our members evaluated our performance for these factors: courtesy, knowledge, concern for the customers, usefulness of the information provided, convenience of operating hours, ease of reaching a representative, and timely resolution. (For J.D. Power and Associates 2009 Certified Call Center ProgramSM information, visit www.jdpower.com.)

Service with a personal touch

Every member has access to a personal representative — a Member Advocate for our commercial, Medical Assistance, and CHIP members, and a Health Care Concierge for our Medicare and Specialty Plan members. These special representatives call members to welcome them. They contact members at various times throughout the year to inform them of benefit changes, address any questions or concerns, and make sure they are satisfied with our service. These representatives also help link members to other Health Plan specialists, such as health coaches.



UPMC Health Plan’s call center has been recognized by J.D. Power and Associates for providing “an outstanding customer service experience.”



Customer service

2009 UPMC Health Plan Call Answering and Claim Payment

Measure	Actual	Industry Standard
Average speed of answer	18 seconds	30 seconds
% of calls answered in 30 seconds or less	85%	80%
First-call resolution	96%	65%
Claims payment turnaround	5 days	15 days
Claims requiring an adjustment	<1%	5%

28

"In achieving certification, UPMC Health Plan has demonstrated a commitment to deliver high-quality service to customers contacting its center. Call center customers are particularly pleased with the customer service representatives, especially for their courtesy and knowledge."

J.D. Power and Associates

On UPMC Health Plan Member Services' designation as a Certified J.D. Power and Associates Call Center.

Striving for best in class

Our call center and claims departments exceed industry standards in every measure related to call answering and claims payment. We provide an individual level of assistance to members so they can better understand and manage their health care benefits, either online or by speaking with customer service representatives.

Not satisfied with exceeding industry standards, we strive to be "best in class" when it comes to serving customers. When a customer survey identified opportunities for improvement in resolving claims issues, our Member Services Department implemented a process to "close the loop" in this area. With this process, when a member calls about a claim, a representative calls back to inform the member that the claim was adjusted and to see if the customer still has any concerns. The result has been a 20% reduction in calls about claim adjustments. Member Services also works with our Claims Department to troubleshoot specific claims problems.

Members can reach us 'round the clock

Telephone. During hours when representatives are not available, our Interactive Voice Response system helps members reach us 24 hours a day, 7 days a week. Members can leave a message and a representative will call them back on the next business day. Members can also use this automatic phone service to order ID cards or check on the status of a claim.

Online message center. Our online service center, MyHealth OnLine, offers a secure Member Message Center that provides a safe, easy way to ask questions about benefits and programs. Within one business day, a representative personally responds to the member's inquiry through the Message Center.

Online chat. A new way for UPMC Health Plan commercial members to contact UPMC Health Plan Member Services — online chat — has been added to MyHealth OnLine. The online chat feature connects members directly to a Member Advocate without their having to pick up the phone or send a secure message through the Message Center.

Through an easy-to-use Web interface, members can chat online in real-time with a Member Advocate about the same concerns for which they would place a phone call. Online chat is accessible from My Home, My Benefits, My Claims, and the Provider Search on MyHealth OnLine and is available during normal Member Services hours. Members can also complete a satisfaction survey about their chat experience and print a copy of the chat session to keep for their records.

Better service solutions through technology

"Smart" ID cards. The Health Plan developed state-of-the-art member ID cards that physician office personnel can swipe to gain instant access to the member's eligibility, benefits, and



We are the first health plan in western Pennsylvania to implement live online chat between members and Member Services.

copayment levels. In the near future, the cards will allow access to the member's personal health record (with the member's permission) and doctors will be alerted to any gaps in the patient's care.

Personal health record. The MyHealth Record, the Health Plan's online health management tool, enables members to access claims information, including office visits, medications, and lab and health screening results in a secure and confidential environment. Members can enter additional information about immunizations, allergies, over-the-counter medications, and supplements to maintain an accurate health history. MyHealth Record also provides reminders to members regarding important medical visits. Members can easily print the record and share the results with their personal physician.

In 2009, our call center received more than **1 million calls.**
Our claims department processed more than **12 million claims.**

Retaining the best of the best

To keep our commitment to provide world-class customer service, it is important that we retain our best customer service employees. UPMC Health Plan has developed a formal career development program designed to attract and retain the best employees. Customer service staff who are willing to learn, have a positive attitude about their job and the company, and serve as a good example to their co-workers have the opportunity to advance.



Kimberly Lehnhardt, UPMC Health Plan Member

"How do you feel?"

When Kimberly Lehnhardt experienced a serious health problem during the past year, she was alarmed to discover there was a lapse between her UPMC Health Plan benefits and her COBRA coverage.

She called UPMC Health Plan Member Services and explained her situation to Member Advocate Natalie Sifuentes. Kimberly had never been so glad to hear the words "I'll be happy to assist you."

Since Kimberly needed immediate medical attention, Natalie called 911 and Kimberly's family members as well as the COBRA administrator. Natalie had Kimberly stay on the line so she would realize things were under control.

"Natalie solved the problem that day!" exclaims Kimberly. "She stepped in and took care of everything. And, after I was discharged from the hospital a few days later, she called me back just to ask me, 'How do you feel?' That really touched me."



Jan and Karl Groh,
UPMC Health Plan Members

Husband and wife say “Adios” to smoking and “Hola” to an extra week in Mexico

What could you do with the money you would save by giving up cigarettes? For Jan and Karl Groh, the answer was more rewarding than anything they could have imagined when they first decided to quit smoking. Just a few months after quitting in December 2009, the couple had saved enough money to add an additional week to their yearly vacation in Mexico.

Jan admits she started smoking at age 12, and Karl at age 18. “He was a late bloomer,” she jokes. “In those days, everybody smoked — our friends, their parents, everybody. Of the people I knew, only my parents didn’t smoke. They were the exception.”

“We got the postcard in the mail from UPMC, and I said, ‘That’s it!’” Jan continues. “I was tired of the cigarette odor in the house, the furniture, our clothes, everything. And every morning Karl had a horrible cough.”

Karl, who works for the U.S. Postal Service, gets UPMC Health Plan benefits for himself and Jan through the Federal Employees Health Benefits Program. The postcard the couple received explained the UPMC MyHealth Ready to Quit™ Program, which offers members reimbursement for 12 weeks of prescription drug therapy for smoking cessation and free health coaching sessions over the phone.

Jan had tried to quit several times, but she always went back. Karl had never seriously tried to quit. “I asked Karl if he wanted to do it with me. I made him make the call. He waited until the very last date on the postcard,” says Jan.

Jan and Karl both planned their quit dates for right after their son’s wedding in December. At the wedding reception, Jan grabbed her cigarettes, intending to join Karl and the other smokers outside. “I opened the door and the 18-degree air hit me. I knew I’d have to be crazy to go out there just to smoke. That was it for me — I didn’t smoke that day and haven’t smoked since.”

Medication coupled with counseling is often best. Jan and Karl followed their physician’s directions exactly and neither had any side effects. Within three days, Karl’s severe morning cough was completely gone. Jan and Karl began to notice that when they came home from an evening out with friends who smoked, they had to hang their coats outside to air out.

The couple enjoyed working with UPMC Health Plan health coach Jennifer Cornforth to support their decision to quit. “Jennifer was wonderful. And the MyHealth workbook was very beneficial,” says Karl.

“Jennifer insisted we should reward ourselves for quitting. So we decided to add a week to our vacation in Mexico, something we both love,” says Jan. “We’re really looking forward to the extra week!” says Karl. “And we won’t have to worry about not being able to smoke at the airport, on the plane, or anywhere. We can just go.”

A plan for everyone in the communities we serve

One of our most important goals is to serve all members of the community — young and old, healthy and sick, affluent and disadvantaged, urban and rural. Our comprehensive and innovative array of products and services includes:

UPMC Health Plan Commercial Products

Small Business Advantage – Suite of benefit plans for companies with 2 to 99 employees

Business Advantage – Suite of benefit plans for companies with 100 or more employees

UPMC Consumer Advantage® – High-deductible plan coupled with tax-advantaged funding source

HMO – Member’s care is coordinated by a PCP

EAPOS – Member is encouraged to have a PCP, but can self-direct care

PPO – Member can go to provider of choice in or out of network

EPO – Member can receive care from any network provider

Individual Advantage – Member gets benefits without group enrollment

Flexible Spending Account – Member saves on health and family expenses

UPMC Work Partners

Health Promotion – Educational and wellness programs encouraging healthy lifestyles

LifeSolutions® – Counseling, consultation, and referral services for employees

Consulting Services – Safety and productivity consulting, plus expert data analysis services

Workers’ Compensation – Clinical and administrative disability management services

Short-Term Disability – Claims management service and return-to-work program

EBenefits – Online human resources benefits administration

Government Programs

UPMC for You – Medical Assistance

UPMC for Life – Medicare HMO or PPO with or without Rx; Prescription Drug Plan

UPMC for Life Specialty Plan (SNP) – For people eligible for both Medical Assistance and Medicare

UPMC for Kids™ (CHIP) – For uninsured children not eligible for Medical Assistance

Community Care Behavioral Health

Commercial – Identified services for UPMC Health Plan commercial members

Medicare – Identified services for UPMC for Life Medicare members

Medical Assistance – Behavioral health coverage for

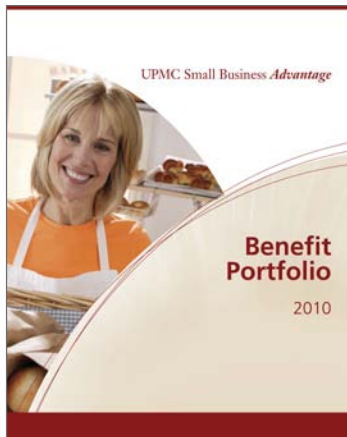
PA HealthChoices Medical

Assistance members





People we serve



32

Both of our *Business Advantage* plans include a rich portfolio of benefits:

- EPO, PPO, EAPOS, and consumer-directed plans
- MyHealth wellness services
- Online health risk assessment
- Smoking cessation program
- Employee assistance program
- Vision discount network
- Dedicated account management and member services
- Health management programs
- Global emergency services
- Online tools and resources

Commercial plans:

value at all levels, for all customers

UPMC Health Plan's portfolio of benefit plans includes a new product for individual members and an all-electronic product for the convenience of our clients and their employees and the health of our environment.

These new products complement our integrated suite of commercial products, which is designed to improve members' health, control costs, and maintain competitive rates. We continue to offer employers innovative products with cost trends well below the national average, a quality network that includes national and global access to services, and best-in-class service.

Health insurance for individual needs

Our new UPMC Individual *Advantage* plans are designed to meet the needs of recent college graduates and other adults in transition. These plans offer a "safety net" to people who are temporarily without group health coverage. Individual *Advantage* is available in 6- or 12-month terms at a variety of deductible levels. It covers all the basics — preventive and emergency care, women's care, diagnostic and behavioral health services, and generic prescriptions.

option — saving money, saving paper, eliminating headaches

We are always looking for ways to use technology to make health care delivery more efficient and affordable. , our new all-electronic option, does just that...eliminating paper to save money, time, and effort. In short, increasing the value we provide our customers. Through , business decision-makers can electronically access price quotes, enrollment applications, employee status

updates, and a bill payment system. Members can access welcome materials and explanations of benefits. This option can be incorporated into most of our other benefit plans. It has the added benefit of reducing paper use and administrative requirements as well as cost.

Healthy advantages for businesses

Through our two *Business Advantage* programs, employers can offer employees a full array of benefit options that provide flexibility, comprehensive benefits, and competitive premiums.

Business Advantage. Our *Business Advantage* suite of benefits plans for employers with 100 or more employees helps companies manage costs while offering a full spectrum of benefit designs. We can offer multiple plans within the same employer group so employees can select a plan based on their individual and family needs. We also provide *Business Advantage* clients with stable pricing and multiple ways to finance their health insurance benefit.

Small Business Advantage. UPMC Health Plan's *Small Business Advantage* plan specifically addresses the needs of companies with fewer than 100 employees and makes it possible for them to offer a more robust benefit package, with little effect on cost. *Small Business Advantage* includes a choice of medical, pharmacy, and vision coverage coupled with a comprehensive suite of value-added services.

Consumer Advantage. An option for our *Business Advantage* and *Small Business Advantage* clients, UPMC *Consumer Advantage*® offers a portfolio of consumer-directed health plans. These high-deductible plans are coupled

In 2009, UPMC Health Plan's
retention^{levels}
exceeded **92%.**

with a tax-advantaged source to fund some, or all, of the plan's deductible. UPMC Consumer *Advantage* provides the best in health care coverage to consumers who want to take a more active role in their own health care decision-making. For employers, it provides lower group premiums and a means to offer wellness initiatives and incentives for employees as part of the benefit plan.

Flexible spending account with dynamic ID card

MyFlex Advantage® is a unique product that links the member's dynamic ID card to a flexible spending account (FSA). It is a cost-effective way for business owners to enhance their benefits package and make it more competitive while, at the same time, reducing their payroll taxes, including Social Security and Medicare taxes. Employees can use their tax-free savings to pay for expenses their health insurance does not cover, like pharmacy and physician office copayments.

Dynamic ID card. *MyFlex Advantage* member identification cards have an encoded magnetic stripe on the back. Members can have their ID cards swiped at their doctor's office and do not have to verbally confirm their personal information in a busy public area. Doctors' office staff can save time by swiping the card

and immediately confirming a patient's eligibility, benefits, and copayment amount. This one card serves as a member ID card and an FSA debit card.

Flexible spending account. A flexible spending account (FSA) is an IRS-approved plan that allows employees to pay for eligible medical, dental, vision, and dependent care expenses for themselves and their families with a portion of their salary that is not taxed. Employees and their eligible dependents are all qualified to use our FSA, *MyFlex Advantage*. Employers can offer any one of these three options or any combination: health care FSA, dependent care FSA, commuter parking account.

Outstanding customer service

UPMC Health Plan prides itself on superior account management capabilities. All clients, regardless of size, receive a designated account executive to serve as their consultant and partner. From initial implementation to regular communication throughout the year, our account executives provide streamlined service and ease of administration — in person, via phone, and through Employer OnLine, our Internet-based service center that allows employers to easily access and modify account details.

Members have phone access to a personal Member Advocate, who will call to welcome them to the program, help them understand coverage, provide preventive care reminders, and notify them of special events related to their health benefits.



Shellie Yeung,
UPMC Health Plan Health Coach

Support for a healthy lifestyle

A number of UPMC Health Plan members credit their success in reaching their weight loss goals to Shellie Yeung. Shellie, a Health Plan health coach, uses UPMC *MyHealth Weigh to Wellness*™ program materials and tools, shown in the photo above, to support members who want to learn to manage their weight. Shellie was instrumental in helping member Donna Bumbas achieve her goal (see page 25).

Health coaches engage members in both lifestyle improvement and condition management programs.



People we serve



A special day — “fit” for our special seniors

Hundreds of UPMC *for Life* members enjoyed fitness demonstrations, organized walks, and health screenings — all part of the third annual National Senior Health & Fitness Day. UPMC *for Life* was the Pennsylvania state sponsor of the event for the third year in a row. Special activities were held at the Pittsburgh Zoo & PPG Aquarium, Penn State Altoona Campus, and Lake Erie College of Osteopathic Medicine’s Medical Fitness and Wellness Center.

In 2009, more than
700 members
used Resources
for Life, and **97%** were
satisfied with the services
they received.

Medicare: Healthy programs and services for seniors

UPMC *for Life*, our Medicare program, offers a variety of products and services, including a \$0 premium plan, prescription drug benefits, and personalized customer care. Our comprehensive suite of Medicare offerings includes plans with and without prescription drug coverage that are available both to individuals and to employers that wish to offer retirement benefits.

Extraordinary membership growth

More than 14,400 new HMO and PPO members joined UPMC *for Life* in January 2010 — our largest ever Medicare membership increase — bringing our Medicare total to more than 73,000 members.

In addition, we retained approximately 96% of individual plan members. Our excellent growth and member retention can be credited to our outstanding service, the value we provide, and our innovative programs. As part of our service, we hold community meetings in the spring and fall for new and existing members to make sure they are aware of all the benefits and services their UPMC *for Life* membership includes. This helps members put a “face” on the Health Plan, and our members respond very positively to these meetings.

Outstanding personalized service

Health Care Concierges. Our Medicare members have a personal representative specifically assigned to them to welcome them to the program, inform them about any new benefits, answer their questions, and help them make decisions about coverage. Members can call their concierge anytime with questions or concerns about their benefits. Like all of the representatives in our call center, our Medicare concierges aim for “one-call resolution” of a customer’s question or concern.

Our Health Care Concierges attend UPMC *for Life* information seminars at neighborhood locations throughout our Medicare service area. This gives members the opportunity to meet in person the concierge they talk to on the phone. Both members and concierges have responded enthusiastically to this interaction. At the seminars, members also have the chance to meet and talk with UPMC Health Plan health coaches and pharmacists.

UPMC Resources for Life. Our Health Care Concierge services include our UPMC Resources *for Life* program, staffed by LifeSolutions® counseling professionals. Concierges can refer members to Resources *for Life* to obtain telephone counseling for caregiver support, family and marital issues, and personal concerns. Members can receive referrals to legal and financial services, wellness and health management options, and many other life and home services. Members can also visit our interactive website for information on a variety of topics and online resources and tools.

Healthy activities for seniors

Staying active is an important part of maintaining a healthy lifestyle at any age. Our Silver&Fit® program for UPMC *for Life* members offers a range of health and fitness activities at no additional charge, including access to online information, membership at local fitness centers, and an at-home exercise program. We also promote healthy community activities for these members.

Improving brain fitness too

Brain health is important because it affects what matters most — quality of life, emotional health, relationships, and everyday tasks. UPMC *for Life* is the first health plan in this region to provide members with a brain health and fitness software program. Our Medicare members can receive this new computer program, called InSight™, at no additional cost. The InSight program, with its suite of five game-like computer exercises, engages the brain's natural plasticity to improve visual processing, attention, memory, and quality of life measures.

Nationally recognized clinical programs

Our health management team of nurses, physicians, pharmacists, social workers, and behavioral specialists works closely with members, their families, and their physicians to deliver optimal clinical support and educational services. Clinical health coaches emphasize the importance of self-care and the physician-patient relationship and work with physicians to implement a plan of care.

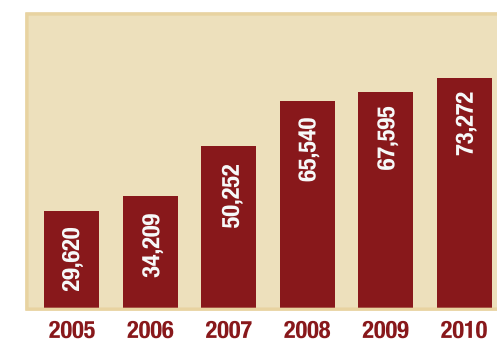
In 2009, the Centers for Medicare & Medicaid Services (CMS) hired a research firm to review our chronic and complex care program for Medicare members. In its Evaluation of Care and Disease Management report, the research firm acknowledged UPMC Health Plan, along with Kaiser Permanente Southern California and Tufts, for these “best practices”:

- Effective engagement and collaboration
- Care management teams integrated with primary care practices, allowing for population-based management and continuous individual care planning at the local and team levels
- Systems support for identification of gaps and processes for closing them, focusing on individual patient care

Self-care for caregivers

In collaboration with the UPMC Institute on Aging, UPMC *for Life* offers “Powerful Tools for Caregivers,” a 6-week education program to help family caregivers practice self-care while managing caregiving responsibilities. More than 20 Health Plan staff members have been specially trained to be class leaders and to present the program to groups of caregivers in the communities we serve.

UPMC *for Life* Membership Growth

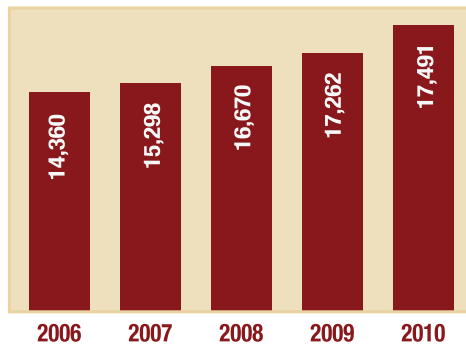


UPMC *for Life* was the **only Medicare plan in western Pennsylvania**, and one of only 22 Medicare plans nationally, to be recognized for the excellence of its website — in content, connectivity, design, and privacy assurance — by HealthMetrix Research Inc.

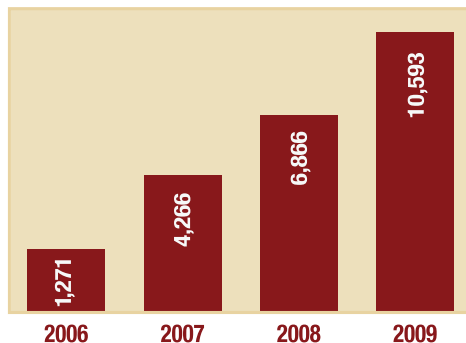


People we serve

UPMC for Life Specialty Plan Membership Growth



UPMC for Kids Membership Growth



UPMC for Life Specialty Plan Healthy options for special members

UPMC for Life Specialty Plan, our no-cost Special Needs Plan (SNP), combines the coverage and protection of Medicare and Medical Assistance for members who are eligible for both programs. With more than 17,000 members, the UPMC for Life Specialty Plan is the sixth-largest Special Needs Plan in the country.

Our SNP members receive comprehensive benefits, including coverage for health care and wellness programs as well as vision and dental services. Members have a \$0 copayment for generic prescription drugs up to a certain total cost. After that they pay \$0 or a minimal copayment, depending on income.

Providing excellent care and service

In 2009, the National Committee for Quality Assurance (NCQA) sponsored an audit of the Structure and Process of Medicare Special Needs Plans. The UPMC for Life Specialty Plan Structure and Process audit earned 100% scores in all elements due to a team effort that produced excellent results.

The elements audited by NCQA included:

- Managing transitions of care
- Coordinating Medicare and Medicaid coverage
- Improving member satisfaction
- Improving clinical quality

Integrating physical and behavioral health care

In July 2009, we implemented a new program called Connected Care™ to help Medicaid and Special Needs Plan members who have been diagnosed with serious mental illness. Connected Care is based on the patient-centered medical home model, with an integrated care team and a care plan for each member. The program is a collaborative effort with the Center for Health Care Strategies, the Department of Public Welfare, UPMC for You, Community Care Behavioral Health, and the Allegheny County Department of Human Services.

Through the Connected Care program, Community Care and UPMC Health Plan staff meet weekly to establish integrated care plans for members with complex needs. They also share information with each other and with members' providers so that care can be coordinated.

UPMC for Kids Covering all children

The Children's Health Insurance Program (CHIP) of Pennsylvania makes health insurance available for every child in the state under age 19. Regardless of family income, children can qualify for CHIP if they are not covered by employer-sponsored health insurance and are not eligible

UPMC for Life
Specialty Plan is the
6th largest full dual
Special Needs Plan
in the U.S.

for Medical Assistance. UPMC *for Kids*™, the Health Plan's CHIP program, offers three levels of coverage, depending on household income — no-cost, low-cost, and full-cost CHIP — to families whose children might not otherwise have health insurance.

UPMC *for Kids* provides a wide range of benefits, including preventive care and doctor visits, behavioral health care, emergency and hospital care, prescription drug coverage, and dental and vision care. Enhanced services include orthodontia when medically necessary, nutritional counseling, tobacco cessation counseling, doula services during pregnancy, and Web-based tools and resources.

Reaching out to kids in our communities

Our UPMC *for Kids* Community Outreach staff present child-oriented health and wellness activities and educational materials at a wide range of community-based events and programs, including ones at area schools. In 2009, staff members were present at more than 120 community events throughout our CHIP service area, attended by some 327,000 people.

In 2009, UPMC *for Kids* expanded on community partnerships with the Pittsburgh Zoo & PPG Aquarium, Manchester Craftmen's Guild, Carnegie Library of Pittsburgh, We Can!® (Ways to Enhance Children's Activity and Nutrition) program in Armstrong County, and various UPMC hospitals.

UPMC *for Kids*™
membership
grew more than
50% in 2009.

Streamlined membership renewals

To make it easier for families to re-enroll children in UPMC *for Kids*, we have developed pre-populated renewal forms along with reminder notices. Families can review the pre-populated form and complete any missing information or indicate changes directly on the form. Families can also renew over the phone during business hours. This simplifies the process for busy working families.

Expanded service area

UPMC *for Kids* has expanded its service area by four counties in central and eastern Pennsylvania. New counties include Berks, Lehigh, Huntingdon, and Northampton.



Natalie Sifuentes,
UPMC Health Plan Member Advocate

Personalized service — with a smile

Natalie Sifuentes, a Member Advocate for members in our commercial, CHIP, and Medical Assistance benefit plans until her recent promotion to Quality Auditor II Representative, genuinely cares about each Health Plan member she speaks with. And, she believes in doing everything possible to address each member's request for help on the first call. Natalie helped member Kimberly Lehnhardt solve a coverage issue, get immediate medical help, and notify family members (see page 29).

Personalized, efficient service for all members is a hallmark of UPMC Health Plan.



People we serve

38

UPMC for You's award-winning doula program offers non-medical emotional and informational support to women before, during, and after childbirth. UPMC for You partners with The Birth Circle Doula Agency to provide doula services and with key obstetrical care providers to identify women who may benefit from these services. This benefit is available to members who have UPMC for You, UPMC for Kids, or UPMC for Life Specialty Plan. The doula program includes 20 participating maternity practices. The program served 605 women in 2009.

UPMC for You

Caring for those in need

In keeping with UPMC's commitment to inclusion and to serving communities with diverse populations, we have expanded our Medical Assistance plan — UPMC for You — into Central and Eastern Pennsylvania, areas that have a large Latino population. UPMC for You is now available in 10 additional Pennsylvania counties: Adams, Berks, Cumberland, Dauphin, Lancaster, Lebanon, Lehigh, Northampton, Perry, and York.

Caring for moms and families

Our UPMC for a New Beginning maternity program encourages members to obtain services that promote the birth of a healthy baby. Mothers who seek early prenatal care and keep all their doctor appointments receive a baby car seat at no cost.

We offer eligible members a variety of additional services that support our maternity program: a doula program that provides support to women before, during, and after childbirth; a maternal depression program that helps pregnant women and mothers with children under the age of one; and a neonatal intensive care (NICU) program that supports parents of NICU babies.

Care for foster children

UPMC for You was one of 11 organizations chosen by the Center for Health Care Strategies to participate in a national collaborative effort to improve access to physical and behavioral health care for children in the child welfare system. The grant began in January 2007, was extended

UPMC for You **#1**
is ranked the
Medicaid Plan in PA
per U.S. News & World Report
Best Health Plans.

through December 2009, and has served some 800 children. In 2009, the UPMC for You Foster Care Program created electronic health records for each newly placed child.

Working to remedy disparities in care

UPMC for You partnered with the Center for Healthy Hearts and Souls (CHHS) to assist African Americans with diabetes. As part of this program, UPMC for You members learned about managing diabetes, had lab screenings, received results, and learned what the results mean in relation to managing their diabetes.

Support after a hospital stay

Our "Going Home" program uses the services of specially trained EMTs and paramedics to help members make a successful transition from hospital to home. Following discharge, the EMT reviews medications and assesses other needs. The EMT shares this information with a Health Plan health coach, who assists in coordinating any additional services for the member.

Community Care Behavioral Health

Serving behavioral health care needs

Community Care Behavioral Health, part of the UPMC Insurance Services Division, manages mental health and substance abuse services for members of Medicaid, Medicare, Children's Health Insurance Program (CHIP), and commercial health plans. Community Care is the largest nonprofit behavioral health managed care organization in the country. It supports Pennsylvania's HealthChoices program by providing access to behavioral health services to Medical Assistance members in more than half of the counties in Pennsylvania.

Innovative recovery program

Community Care has integrated a recovery-oriented program called "Personal Medicine" into a number of its contracted provider sites. The program was developed by Pat Deegan, PhD, a nationally renowned leader in recovery programming. This focus on recovery is unique for behavioral health managed care organizations, and Community Care is a national leader in implementing recovery initiatives from a health benefits perspective. To facilitate this work, we have created a learning collaborative that includes 50 agencies across the 35 counties in which we work.

School-based program for children

Community Care implemented a School Based Behavioral Health Services program that coordinates these services for all children within one school building. The program began

with three school districts in our northeast Pennsylvania service area and will be expanded to several additional districts in that area as well as in north central Pennsylvania. The program identifies and treats children in school and home settings and seeks to ensure that all care is coordinated and aimed toward consistent outcomes. The ultimate goal is to keep children in the community by successful interventions in the school.

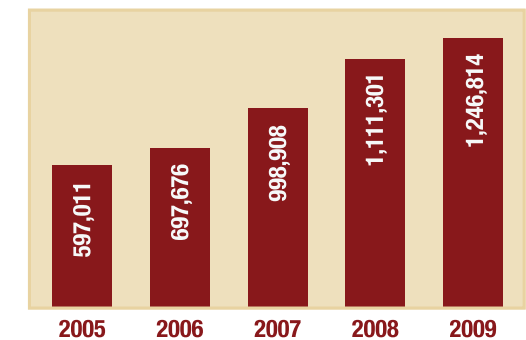
Caring for the whole person

Community Care is collaborating with UPMC *for You*, UPMC Health Plan's Medicaid plan, in a program called Connected Care™. The goal of this program is to engage people with serious mental illness to ensure that they get good care for their physical health as well as their behavioral health concerns.

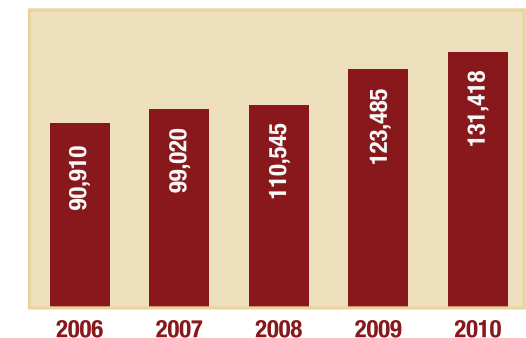
Askesis Development Group: Behavioral health software

Askesis Development Group, part of the UPMC Insurance Services Division, designs and implements software solutions that support behavioral health practice management. Askesis has sold its software to behavioral health providers in over 25 states. The software solution helps customers optimize staff productivity, decrease administrative errors, and demonstrate the favorable outcomes that prove clinical services are effective. In 2009, Askesis released version 6.0 of its flagship PsychConsult® provider software.

Community Care Membership Growth



UPMC for You Membership Growth



Community Care held
308 recovery training
events in 2009,
providing training to nearly
8,000 people.



Patty and Carl Prince,
UPMC *for Life* Members

Lions and tigers and bears... and fitness!

Carl and Patty Prince are “regulars” at the UPMC *for Life* walks at the Pittsburgh Zoo & PPG Aquarium. The zoo walks take place every other week from April through October and are one more way we add value to the lives of our Medicare members. In addition to comprehensive, high-quality medical coverage, UPMC *for Life* provides members with multiple opportunities to stay healthy, active, and fit throughout their lives.

“We saw that the walks were offered and knew it was something we’d enjoy. We’ve been to every walk so far this year. We like the change of scenery at the zoo — it’s a great place to walk,” says Patty.

The Princes, who are committed to staying active in retirement, walk together every day. “In winter we walk at the mall. The only day we missed was the time of the big snow,” says Patty. Carl and Patty recently enrolled in UPMC *for Life* and look forward to participating in other activities offered by the plan. “We are very satisfied with all of the benefits we get with UPMC *for Life*,” adds Patty.

UPMC *for Life* members who attend the zoo walks receive complimentary admission for themselves and a Medicare-eligible guest. Most weeks, Kristi Festa, a UPMC *for Life* Community Relations Coordinator, greets members as they enter the zoo, offers them a bottle of water, and then leads them on the walk. Members are free to walk with the group or on their own. After the walk, members and their guests may stay at the zoo to enjoy the exhibits.

“Many of the regulars know me and greet me by name,” says Kristi. “It’s nice to develop personal relationships with the people who come on these walks. If a scheduling conflict keeps me from attending a walk — which rarely happens — I really miss it.”

Kristi has attended the UPMC *for Life* zoo walks since they began three years ago, and she has seen participation grow each year. “The number of regular walkers has increased, as well as the total number of participants,” she explains. “We average 60 to 70 walkers each week.

“So many of our members comment on how much they enjoy these walks and how much they appreciate this opportunity,” continues Kristi. “They say it gives them a reason to get up and get moving.”

On some weeks, the zoo offers the group special “behind-the-scenes” events. Walk participants may get to meet the lion keeper or the penguin keeper or take a guided tour of the Tropical Forest.

On other weeks, representatives from Silver&Fit™, the fitness program offered by UPMC *for Life*, lead the group in exercises or join the walk and answer questions about the benefits Silver&Fit membership provides. Through the Silver&Fit program, our UPMC *for Life* members receive free membership at select fitness facilities, including participation in classes and social activities, or the option of a home fitness program.

UPMC *for Life* is dedicated to providing high value to our Medicare members by offering a range of product options and extra benefits that help improve health, fitness, and quality of life.

We bring value to our community

The UPMC Insurance Services Division is committed to bringing value not only to our members, but also to all others in the communities we serve.

We know that building and maintaining good health and a healthy community doesn’t happen just in the doctor’s office or a medical facility — it also happens in schools, community organizations, and public parks. Through community activities, educational initiatives, and partnerships with community leaders, we help people take positive steps toward better health and wellness. We also provide charitable support to hundreds of non-profit organizations that address issues of health, education, hunger, literacy, violence, social services, disease, and more.

We partner on projects that promote good health

These projects include:

Heritage Valley LifeSmart, an adult diabetes prevention project in collaboration with physicians.

HEALTHY Armstrong, an award-winning, community-wide childhood obesity prevention project.

Emergency Department Diversion Grant project with UPMC McKeesport, UPMC Community Medicine, University of Pittsburgh Physicians, and the Pennsylvania Department of Public Welfare to encourage patients to get the proper care at the proper time.

We Can! (Ways to Enhance Children’s Activity & Nutrition), a national movement of families and communities to promote healthy weight in children ages 8-13 through improved food choices, increased physical activity, and reduced screen time.



UPMC Health Plan collaborates with area hospitals, schools, and community organizations on programs that deliver value by improving children’s health, reducing the incidence of chronic illness, and addressing other health issues.



In our community



Maria Rexroad, Heritage Valley Preferred Health Plan Member (plan administered by UPMC Health Plan)

“I can climb a mountain now”

After a 10-mile hike in the mountains, Maria Rexroad looked down on Bryce Canyon. “The view was magnificent! Without the LifeSmart program, I wouldn’t have been able to do that hike, and I would have missed that view,” she says.

Maria, a pediatric nurse at Heritage Valley Health System, had been overweight and had high blood pressure and high cholesterol. “I asked my doctor to give me a chance to get my numbers down before he put me on medication,” says Maria.

Maria joined LifeSmart, a program offered through a UPMC Health Plan–Heritage Valley Health System partnership. She lost 40 pounds and walks 3 to 5 miles daily. “LifeSmart changed me from a person who said *I can’t* to a person who says *I can*,” says Maria.

We help communities thrive

UPMC Insurance Services participates in several community projects through the Pennsylvania Department of Community and Economic Development (DCED). These programs — which improve the lives of those in distress, foster high-quality education, and support neighborhoods in being self-sustaining — are all designed to improve the overall quality of life while helping manage health care costs.

Improving lives. Through DCED, we contribute to the Neighborhood Assistance Program (NAP). NAP creates effective partnerships between community-based organizations and the business and corporate community — partnerships to help improve the lives of low-income people in distressed neighborhoods.

Support goes to the Greater Pittsburgh Community Food Bank, Bethlehem Haven, Manchester Craftsmen’s Guild, and Carnegie Library of Pittsburgh’s Hill District, East Liberty, and North Side branches.

Supporting education. Because education in all forms can foster an understanding of elements that affect and improve health, we support traditional educational programs as well as health education, literacy, music education, and more. As participants in the DCED’s Educational Improvement Tax Credit Program (EITC) for the last five years, we have contributed to scholarship organizations, educational improvement organizations, and pre-kindergarten scholarship organizations to help individuals in our community receive high-quality education.

Groups that received our support include the Children’s Museum, Greater Pittsburgh Literacy Council, MCG Jazz, and Pittsburgh Zoo & PPG Aquarium.

Empowering neighborhoods. Workforce and neighborhood development programs empower our neighbors to be self-sustaining. Through the Neighborhood Partnership Program, we provide support to Oakland Planning and Development Corporation, South Side Local Development Corporation, and the McKees Rocks Community Development Corporation.

We promote preventive care for all ages

UPMC Insurance Services delivers value to the community by supporting community-oriented programs that directly relate to preventive health care. The best way to promote the health of a community is to support people in taking steps to prevent illness and maintain healthy lifestyles.

Minority Outreach for Diabetes Education

is a project with The Washington Hospital for a community-based diabetes education program. Compared with the rate of diabetes among Caucasians (7.6%), rates among both African Americans (10.6%) and Latinos (8.9%) are significantly higher. The diabetes death rate for African Americans is nearly 37% higher than for Caucasians.

More than **150** Insurance Services employees participated in the March of Dimes **March for Babies.**

The program makes free diabetes education available to the minority population by offering classes to those with diabetes, pre-diabetes, or a family history of diabetes, and their family members. The classes focus on making lifestyle modifications to control diabetes and promote good health. Enthusiastic instructors seek to help each person achieve maximum wellness through education, diet, and exercise.

Helping Families Raise Healthy Children

is a Pittsburgh-based maternal and child health care collaborative that has undertaken a unique and innovative initiative to help families face the challenges of parental depression and early childhood developmental delays. This initiative tracks young children in families where parental depression may exist for developmental delays. A three-year, \$500,000 matching grant from the Robert Wood Johnson Foundation Local Funding Partnerships program supports this initiative. The grant was awarded to Community Care Behavioral Health, which is part of the UPMC Insurance Services Division.

Member incentive programs promote appropriate health care utilization for the Medicaid population. These programs have encouraged members to get medically advised testing and preventive care, such as mammograms, Pap tests, and annual visits to the doctor.

The doula program supports at-risk mothers and helps them to deliver healthy babies. Mothers-to-be enjoy visits, advice, and health coaching from a doula — an educated and compassionate professional who understands their challenges and helps the women to overcome high-risk odds.



Kittanning High School students Cassandra Kelly, Marlee Atwood, Jake Burdett, and Jordan Ford; UPMC Health Plan Health Promotion Specialists Tonya Shell and Diane Chuckro; and Kittanning High School teacher Judy Coven

Taking wellness on the road

Kittanning High School students had fun using UPMC Health Plan's engaging health promotion materials to learn more about the benefits of good nutrition, exercise, and other healthy activities. The Health Plan's Health Promotion Community Outreach team presented this information at the school's annual Spring Health Fair.

Players who correctly answered questions about various health topics on our Nutrition Wheel won a prize. Fair attendees could also

pick up free recipe cards, exercise trackers, and other informative aids to good health. Kittanning High School also participates in the HEALTHY Armstrong initiative to combat childhood obesity.

Our outreach team presents health and wellness activities and educational materials at a wide range of community-based events and programs in addition to area school functions.



**Chatham University staff members and UPMC Health Plan Wellness Members
Krista Terpack and Robert Lettan exercise in the Chatham pool.**

An A+ success story

Chatham University's Fit for the Future[®] wellness program for faculty and staff is a remarkable example of how a partnership with UPMC Health Plan can result in improved health for an organization motivated to invest in its most valuable resource — its employees.

Chatham's Fit for the Future, supported by the programs and services of UPMC MyHealth, offers a "Wellness Degree" to participants who complete certain healthy activities outlined in a "course syllabus." Fit for the Future saw healthy results in 2009: Significant numbers of employees took advantage of our health coaching services to quit smoking, lose weight, and increase their knowledge about good nutrition.

Chatham University is one of a number of organizations in the area that have engaged the Health Plan to assist them in motivating and supporting employees in adopting healthier lifestyles and enhancing work productivity.

Overview

As a world-class integrated health enterprise, UPMC brings together a seamless end-to-end continuum of care to meet the full spectrum of health care needs. UPMC clinical services and facilities include academic, community, and specialty hospitals, affiliated physician practices, outpatient rehabilitation services, cancer centers, senior living facilities, and imaging services, among others.

As part of this integrated system, the UPMC Insurance Services Division provides a diverse portfolio of health and well-being services related to health benefits, health promotion, and compensation to the employers and the communities of western Pennsylvania.

The Division comprises a variety of health maintenance organizations, preferred provider organizations, and health-related technology and benefit management companies offering an array of commercial and governmental health insurance and health-related products.

UPMC Health Plan offers commercial and Medicare HMO products while also providing the administrative, personnel, and financial services required by most entities in the Division.

The nonprofit UPMC *for You*, Inc., offers HMO benefits to Medical Assistance beneficiaries.

Community Care Behavioral Health provides behavioral health programs for members of UPMC Health Plan, as well as separately contracted services delivered under Pennsylvania's HealthChoices Medical Assistance program.

UPMC Work Partners provides health and wellness, employee assistance, and workers' compensation and disability programs and services.

UPMC Insurance Services Division companies include:

UPMC Health Plan, Inc. — a Pennsylvania non-profit HMO offering commercial, Medicare, Special Needs, and CHIP products.

UPMC Health Benefits, Inc. — a PPO offering Medicare Select products.

UPMC Health Network, Inc. — a PPO offering commercial and Medicare PPO products.

UPMC for You, Inc. — a Pennsylvania non-profit HMO offering a Medicaid product.

IS Technology Services, LLC — an entity offering ASP hosting and other technology services.

LifeSolutions® — a product line offering employee assistance programs.

UPMC Benefit Management Services, Inc. — d/b/a UPMC Work Partners — a subsidiary of UPMC offering a full range of workers' compensation and short-term disability benefit services, as well as health and wellness services, to western Pennsylvania employers, and administrative services to self-insured employers.

Community Care Behavioral Health Organization — a PPO offering both commercial and governmental behavioral health products.

EBenefits Solutions, LLC — an advanced HR and employee benefits technology platform service.

Askesis Development Group, Inc. — an entity engaged in the development and sale of behavioral health technology products.



Employers who offer UPMC Health Plan's benefit plans have the option of providing MyHealth wellness programs to all of their employees. Their employees who do not have UPMC Health Plan coverage are called "Wellness Members" and receive the same valuable wellness-related programs and tools as members with Health Plan coverage.

About our company

Financial report

UPMC Insurance Services Division financial highlights reflect the combined operating results and financial position among UPMC health insurance subsidiaries.

Calendar year 2009 represented another strong year of growth, with Division revenue increasing by \$246 million (8.8%) to \$3.1 billion. Division operating margins were \$51 million (1.7% of revenue) in 2009, compared to \$84 million (3.0%) in 2008.

A highly disciplined focus on product line management as well as the application of innovative technology solutions helped to achieve optimal clinical outcomes for our members while achieving strong operating performance. Administrative costs were approximately 7.44% of premium revenue in 2009, an industry best practice performance. This illustrates our commitment to cost containment as well as efficiency.

The Health Plan also received SAS70 certification from its independent auditor for its claims-processing internal controls environment, providing additional independent quality assurance for our self-insured customers.

UPMC is strongly committed to best-in-class governance and organizational transparency standards. In 2006, UPMC, including the UPMC Insurance Services Division, became the first nonprofit health enterprise to fully adopt Sarbanes-Oxley, including the stringent

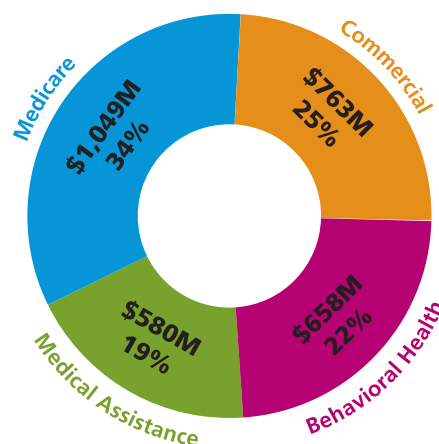
requirements of section 404. Sarbanes-Oxley certification has been received annually since adoption in 2006.

The Division, along with UPMC, has also adopted industry-leading public financial disclosure practices for both quarterly (unaudited) and annual (audited) results, allowing our community stakeholders to review our progress and fiscal health. UPMC's financial reporting can be found at UPMC's corporate website, www.upmc.com.

2009 Insurance Services Division Revenue Distribution by Product

(in millions of dollars)

Revenue for all product lines increased in 2009, while the mix remained consistent with 2008.



UPMC Insurance Services Combined Statement of Revenue and Expenses

For the year ended December 31 (in millions)

	2009	2008
Total Revenue	\$3,050	\$2,804
Operating Expenses	\$2,999	\$2,720
Operating Margin	\$51	\$84
Operating Margin %	1.7%	3.0%
Investment Income	\$27	(\$9)
Interest Expense	\$3	\$4
Income Taxes	\$11	\$22
Net Income	\$64	\$49

UPMC Insurance Services Combined Balance Sheet Highlights

For the year ended December 31 (in millions)

	2009	2008
Cash and Investments	\$513	\$421
Current Receivables	\$205	\$203
Other Assets	\$19	\$23
Total Assets	\$737	\$647
Health Claims Payable	\$230	\$200
Other Current Liabilities	\$89	\$93
Surplus Notes	\$103	\$103
Common Shareholder Equity	\$315	\$251
Total Liabilities and Equity	\$737	\$647

UPMC Insurance Services Division Leadership Group

Diane P. Holder

Executive Vice President, UPMC
President, Insurance Services Division
President and Chief Executive Officer
UPMC Health Plan

Scott Lammie

Sr. Vice President
Insurance Services Division
Chief Financial Officer, UPMC Health Plan

Catherine Batteer

Vice President, Medicare

Anthony Benevento

Vice President, Commercial Products

Michael Culyba, MD

Vice President, Medical Affairs

Sharon Czyzewski

Vice President, Human Resources

Anne Docimo, MD

Chief Medical Officer, UPMC Health Plan

John Galley

President, EBenefits Solutions, LLC

James Gavin

President and Chief Executive Officer,
Community Care Behavioral Health

Gordon Gebbens

Vice President, Finance, and Division Controller

William Gedman

Vice President, Quality Audit, Fraud and Abuse

Sharon Hicks

President and Chief Executive Officer, ADG
Chief Information Officer
Community Care Behavioral Health

Mary Beth Jenkins

Chief Operating Officer
UPMC Health Plan and UPMC Work Partners

John Lovelace

President, UPMC *for You*, Inc.
Vice President
Children's Health Insurance
Medicare Special Needs Plan

Chronis Manolis, RPh

Vice President, Pharmacy

Sandra McAnallen

Vice President, Network Performance
Quality Improvement, and Clinical Administration

Edward McCallister

Chief Information Officer

Jeffrey Nelson

Vice President, Marketing, Communications
and Product Development

Pamela Peele, PhD

Vice President, Health Economics

Daniel Vukmer, Esq.

Vice President and General Counsel
Chief Compliance Officer

David M. Weir

President, UPMC Work Partners



About our company

Quality Improvement Committee

Daniel Brooks, MD
Margaret Bruno
Salim Chowdhury, MD
Kenneth Ciesielka, MD
Michael Culyba, MD
Jessica Daw, PharmD
Roseann DeGrazia
Nicholas DeGregorio, MD
Angelo DeMezza, MD
William Fera, MD
John Fisch, MD
Juliet Jegasothy, MD
S. Ramalingam, MD
James Schuster, MD
Lalith Kumar Solai, MD
Dennis Stull, MD
Jalit Tuchinda, MD
Colleen Walsh
Jay Ziegler, MD

Behavioral Health

Bernard Bernacki, DO
Salim Chowdhury, MD
Roseann DeGrazia
Karen DePasquale
Michele Farabaugh, PhD
Timothy Gaul, DO
Frank Ghinassi, PhD

S. Ramalingam, MD
Eric Rodriguez, MD
James Schuster, MD
Debra Rose Smyers
Sabato Stile, MD
Lisa Wallace
Colleen Walsh

Pharmacy and Therapeutics

Salim Chowdhury, MD
Shelby Corman, PharmD
Anne Docimo, MD
Eileen Engel, MD
Margaret Hrinya, RPh
Susan Hunt, MD
Michael Jacobs, PharmD
Juliet Jegasothy, MD
Mary Korytkowski, MD
Thomas Laton, MD
Jorge Lindenbaum, MD
Chronis Manolis, RPh
Eric Rodriguez, MD
Paul Rowland, MD
Mark Schmidhofer, MD
James Schuster, MD
Scott Stephens, RPh
Sabato Stile, MD
Audrey Zelkovic, MD

UPMC Insurance Services Division Committee

2009-2010 Directors

William Pietragallo II, Chairperson
Robert G. Lovett, Esq., Vice Chairperson
Howard W. Hanna III
D. James Heatherington
Mark J. Laskow
Eric K. Mann
Loren H. Roth, MD (Ad hoc)

UPMC Health Plan Board

Mark Laskow, Chairperson
G. Nicholas Beckwith III
James W. Boyle, MD
J. Eric Bruce
Edward J. Donnelly, MD
Peter Eisenbrandt
Kimberly Tillotson Fleming
Diane P. Holder
George Huber, JD
William Kottner, MD
Scott Lammie
Robert G. Lovett, Esq.
Norman Mitry
Joseph Molinero
Deb Moon
Gregory Peaslee
William Pietragallo II
Arthur Ramicone
Loren Roth, MD
Telford Thomas
Thomas Timcho

UPMC for You Board

Diane P. Holder, Chairperson
Michael Culyba, MD
Paula Garafola
George Huber, JD
John Lovelace
Christina Mikolay

**Community Care
Behavioral Health Board**

Diane P. Holder, Chairperson
Sheila Fine
Michael Flaherty, PhD
George Huber, JD
David Kupfer, MD
Scott Lammie
Douglas Muetzel
Laurie Mulvey
Kenneth Nash, MD
Nikki Nordenberg
Wilford Payne
Claudia Roth, PhD
Father Regis Ryan
Jeannette South-Paul, MD
Laura Thomas



About our company

UPMC Health Plan Commercial Network Hospitals

ALLEGHENY

Children's Hospital of Pittsburgh
of UPMC
Eye & Ear Institute
Heritage Valley Health System
Heritage Valley Sewickley
Jefferson Regional Medical Center
Kindred Hospital Pittsburgh
Kindred Hospital Pittsburgh–
North Shore
LifeCare Hospitals of Pittsburgh
Main Campus
North Campus
Magee-Womens Hospital of UPMC
Ohio Valley General Hospital
St. Clair Memorial Hospital
The Children's Home of Pittsburgh
The Children's Institute
UPMC Cancer Centers
UPMC McKeesport
UPMC Mercy
UPMC Montefiore
UPMC Passavant
McCandless Campus
UPMC Presbyterian
UPMC Shadyside
UPMC Sports Medicine
UPMC St. Margaret
Western Psychiatric Institute and
Clinic of UPMC

ARMSTRONG

Armstrong County Memorial Hospital

BEAVER

Heritage Valley Health System
Heritage Valley Beaver
Kindred Hospital at Heritage Valley

BEDFORD

UPMC Bedford Memorial

BERKS

St. Joseph Medical Center
The Reading Hospital and
Medical Center

BLAIR

Altoona Regional Health System
Altoona Hospital Campus
Bon Secours Hospital Campus
Nason Hospital
Tyrone Hospital

BUTLER

Butler Memorial Hospital
UPMC Passavant
Cranberry Campus

CAMBRIA

Conemaugh Health System
Memorial Medical Center
Lee Campus
Main Campus
Miners Medical Center
Select Specialty Hospital–Johnstown

CENTRE

Mount Nittany Medical Center

CLARION

Clarion Hospital

CLEARFIELD

Clearfield Hospital
DuBois Regional Medical Center

CRAWFORD

Meadville Medical Center
Titusville Area Hospital

ELK

Elk Regional Health Center
St. Marys Health Center Campus

ERIE

Corry Memorial Hospital
Hamot Medical Center
Millcreek Community Hospital
Saint Vincent Health Center
Select Specialty Hospital–Erie

FAYETTE

Highlands Hospital
Uniontown Hospital

FULTON

Fulton County Medical Center

GREENE

Southwest Regional Medical Center

HUNTINGDON

J.C. Blair Memorial Hospital

INDIANA

Indiana Regional Medical Center

JEFFERSON

Brookville Hospital
Punxsutawney Area Hospital

LANCASTER

Ephrata Community Hospital
Lancaster General Hospital
Lancaster General Women &
Babies Hospital

LAWRENCE

Ellwood City Hospital
Jameson Health System
North Campus
South Campus

LEHIGH

Sacred Heart Hospital

McKEAN

Bradford Regional Medical Center
Kane Community Hospital

MERCER

Grove City Medical Center
UPMC Horizon
Greenville Campus
Shenango Campus

MIFFLIN

Lewistown Hospital

POTTER

Charles Cole Memorial Hospital

SCHUYLKILL

Schuylkill Medical Center
East Norwegian Street
South Jackson Street

SOMERSET

Meyersdale Medical Center
Somerset Hospital
Windber Medical Center

TIOGA

Soldiers + Sailors Memorial Hospital

VENANGO

UPMC Northwest

WARREN

Warren General Hospital

WASHINGTON

Monongahela Valley Hospital
The Washington Hospital

WESTMORELAND

Excelsa Health Frick Hospital
Excelsa Health Latrobe Hospital
Excelsa Health Westmoreland Hospital
Select Specialty Hospital–Laurel Highlands

OUTSIDE PENNSYLVANIA

Western Maryland Regional Medical
Center (Maryland)
Monongalia General Hospital (West Virginia)
Weirton Medical Center (West Virginia)
Wetzel County Hospital (West Virginia)
Wheeling Hospital (West Virginia)



UPMC Insurance Services Division employees walk in the most recent March for Babies on Pittsburgh's North Shore

Marching for a healthy cause

The UPMC Insurance Services Division sponsors and encourages staff participation in events that both help the community and provide an opportunity for healthy physical activity, such as the March of Dimes March for Babies, the Cystic Fibrosis Great Strides Walk, and the Rainbow Kitchen Walk and Ride Against Hunger.

This year, 159 employees joined the March for Babies, which began on Pittsburgh's North Shore. Overall, 3,549 marchers from around the region participated.

The March of Dimes is dedicated to improving the health of babies by preventing birth defects, premature birth, and infant mortality.

Diane Holder, President of UPMC Insurance Services Division, was Honorary Chair of the 2010 March for Babies. Mary Beth Jenkins, Chief Operating Officer for UPMC Health Plan, serves on the March of Dimes Board. The Health Plan has been involved in supporting the March of Dimes on a company-wide basis for the past 8 years.

PARTNERSHIP

We believe positive partnerships and teamwork improve results.

Our Mission

UPMC Health Plan employees are committed to improving the health of our members by offering innovative products, cost-effective solutions, and service excellence through our unique partnerships with our health system, our members, the community providers, and our purchasers.

PRIIDES

RESPECT

We treat others as we want to be treated.

INTEGRITY INNOVATION

We do what is right.

We create products and services for current and future success.

DEVELOPMENT

We invest in our staff members' continued growth and satisfaction.

EXCELLENCE

We strive for "best-in-class" practices and outcomes.

SERVICE

We view exceptional service to all customers as a critical differentiator.

