

Drive industry-leading discounts through transplant network access

Optum® Transplant Resource Services (TRS) is built upon a network of high-quality Centers of Excellence (COE). We invest more resources than any organization in the country to identify and qualify the programs that deliver superior outcomes. Once a program is qualified clinically, we leverage unparalleled purchasing power to drive deep contractual savings.

Transplant Centers of Excellence Network

With the Transplant Centers of Excellence (COE) network, clients access our most aggressive and predictable contracting. These savings are in addition to the cost avoidance achieved through statistically better clinical outcomes realized at COE network programs.

Transplant Access Program Network

As an adjunct to the Centers of Excellence network, the Transplant Access Program (TAP) network provides expanded access. This additional network improves national coverage.



Optum average savings per transplant¹

58% commercial

67% Medicare

70% Medicaid

Benefits of working with Optum

- 1. Industry-leading discounts** – Purchasing power and scale that drive substantial savings for payers.
- 2. Access for all lines of business** – Negotiated discounts for solid organ and bone marrow transplants across commercial, Medicare and Medicaid lines of business.
- 3. Superior contract structure** – Optimal contract structure that addresses the total financial risk, anchored on case rates. Key features include:
 - Contractual protection spanning all phases of the transplant episode – evaluation through 365 days post-discharge
 - 90 days post-transplant (Phase IV) included in case rate (any readmit during this period is covered up to a set number of days included in the base payment rate)
 - Rates include hospital, physician and organ procurement/blood and marrow harvest
 - A rate methodology that manages exposure to percentage of charge (per diems, case rates, physician fee schedules, DRG)
 - Chagemaster protection that limits exposure to charge increases
 - Ability to support needs through single-case agreements
- 4. Fee-based model** – Access fee-based model that can be used exclusively, as a wrap or alongside agreements held by payer. Fees vary by transplant type and are commensurate with expected savings. Access fees are only paid when savings are realized.
- 5. Online tools for clients** – Cost, quality and access tools that aid in decision-making. These tools provide cost statistics and updated volume and outcome quality data. *Clarity* is a website that lists contracted transplant centers and provides clients the ability to submit online referrals, access claims and pull active patient lists.
- 6. Robust qualification** – Optum selects network medical centers through a process of quality measurement and value-driven contracting that is distinct in the health care industry. Qualification, led by the Optum Clinical Sciences Institute, goes far beyond publicly available volumes and outcomes. Criteria include structure, process and other measures. These are reviewed annually by a panel of industry experts.
- 7. Claims repricing** – Optum manages more than \$11.4 billion in transplant claims annually. We have developed best-in-class processes to accurately and efficiently process repriced claims.

To find out how Optum can help support your unique transplant needs, email us at engage@optum.com.



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15,542 total payer groups relying on Optum for their transplant network access

1 in 3 Americans have access to the Optum Transplant Network²



Almost **1** transplant every hour and about **4** referrals every hour³



\$446K in average savings per commercially paid transplant

\$11.4B in transplant claims processed annually⁴



188 transplant COE facilities (203 when including TAP facilities)⁵

1,117 transplant COE programs (1,418 when including TAP programs)⁵

187 public sector facilities



Optum COEs can improve survival rates for solid organ transplant patients by up to **9%**⁶ and can reduce hospital stay lengths by an average of **19%**.⁷

1. Donovan B. Repriced claims data. CMC Facets. 2022. Medicaid average savings based on adult transplants.

2. 2022 year-end UHC membership plus estimated external membership as of August 2023.

3. Donovan B. Count of 2022 cases created in CMC Facets. August 2023.

4. Flies D. Optum total billed charges for 2022 claims.

5. Flies D. Optum transplant network status as of December 2022.

6. HRSA. [srrtr.transplant.hrsa.gov/annual-reports/2021-ADR_Preview.aspx](https://www.hrsa.gov/annual-reports/2021-ADR_Preview.aspx). January 4, 2021.

7. Length of stay from 2020 Optum claims data compared to 2020. [millimanmilliman.com/en/Insight/2020-us-organ-and-tissue-transplants](https://www.millimanmilliman.com/en/Insight/2020-us-organ-and-tissue-transplants).