



5 health care experiences ripe for transformation



From health plan confusion to high costs, the health care landscape is poised for transformation

More than 60% of Americans surveyed say dealing with the U.S. health care system is a hassle.¹ What's more, those health care experiences are causing some to defer care, leading to a decline in their health and productivity.¹

That's why UnitedHealthcare is working to help make it easier for people to navigate the health system and create a better overall member experience. Employers may also take action by ensuring their benefits package delivers on what matters to employees today.

Member and employer data reveal 5 areas of focus that are ripe for transformation:

1 Making health care more affordable

Health care spending has begun to outpace overall economic growth and will eventually represent nearly 20% of GDP by 2031.² These high costs have created headaches for many employees, with 48% of insured adults surveyed saying they worry about affording their monthly health insurance.³ Many employers are monitoring this closely, too, with 82% of those surveyed saying they're concerned about rising health care costs impacting their organization's competitiveness.⁴

These high costs are prompting carriers to develop strategies to help reduce the cost of care for employers and employees. One approach involves redesigning health plans to provide more value right from the start, including \$0 copays for certain essential services—like primary care, urgent care and virtual visits—and **vital medications** like insulin and epinephrine. This structure may help employees more easily access care without worrying about immediate costs and may encourage them to seek timely medical attention before issues require more complex and expensive treatments.

And with the cost of pharmacy care—especially specialty drugs—threatening both employer and employee wallets, the demand for more effective care management has become a key to making health care more affordable. As such, employers may want to consider **integrating their medical and pharmacy benefits**. When these benefits are managed together, it may enable a more seamless and connected care experience and help ensure that members receive more appropriate and lower-cost medication options.

Additionally, employers may look at solutions designed to help employees manage unexpected health care costs. This could include a preloaded debit card, health savings account (HSA), flexible spending account (FSA) or health reimbursement account (HRA) to use on certain health-related expenses, as well as supplemental and financial protection benefits to help ease the financial impact of challenging health and life events or out-of-network bill management programs.

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2 Enabling more informed health care decisions with increased transparency

Recent surveys revealed that many Americans are confused by their health benefits. In fact, 65% of Americans surveyed said they don't feel insurance companies are transparent about what they cover.¹

That means that there is a significant opportunity for carriers to make health benefits more understandable with clearer choices and trusted support that is accessible when and how employees want it.

UnitedHealthcare, for instance, is working to provide employees with more **visibility into health care costs** before they receive care through cost estimation tools on the **UnitedHealthcare® app** and **myuhc.com®**.

Copay-driven plans like **Surest®**, which allow members to compare care options and see their full costs in advance, are built around the idea of demystifying costs. That way, employees may make informed decisions that align with their financial and health needs.

Even still, there are steps employers can take to help ensure employees understand how to make more informed health care decisions.

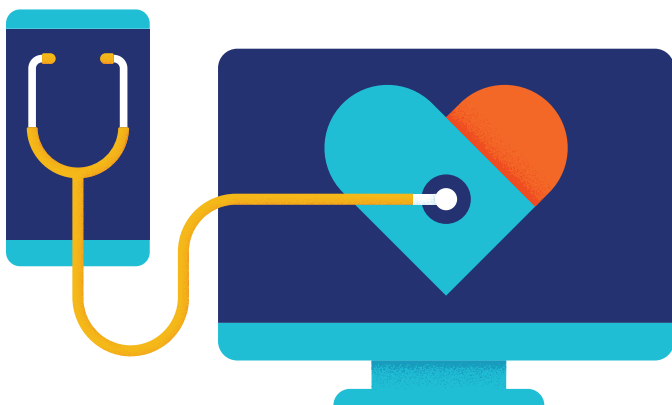
“More and more employers are growing in their awareness that, for instance, going to an ambulatory surgical center for a tonsillectomy is going to cost you 50% of what the outpatient hospital is going to cost you,” says Craig Kurtzweil, chief data and analytics officer for UnitedHealthcare Employer & Individual, adding that, even though their doctors might send them to the hospital.

In addition to the communication and marketing efforts led by carriers to help navigate members to more cost-effective options or care settings, employers may help educate and **boost engagement** by sending employees targeted communications, personalized onboarding videos and resources.



65%

of Americans surveyed said they don't feel insurance companies are transparent about what they cover¹



3 Making it easier for members to manage their care digitally

Increasingly, employees want their experiences with health care to mimic their retail-like experiences. To that end, carriers are working to evolve their digital experience to be simpler and more connected, personalized and predictable while also driving adoption of the advances they've made.

At UnitedHealthcare, personalization via the **UnitedHealthcare app** or **myuhc.com** gives employees clear indicators about which facilities and providers are in the network, as well as ones that are recognized for quality and cost-efficiency. Beyond that, members also want their digital experiences with health care to account for their personal preferences.

"We're seeing that Millennials and Generation Z members don't necessarily want 20 options when it comes to choosing a provider. That's why we've built our digital experience to surface personalized recommendations based off insights from our data and their preferences," Kurtzweil says.

The concept also extends to other aspects of the UnitedHealthcare digital platform in an effort to unite all aspects of health care and create a more cohesive and integrated experience. At UnitedHealthcare, members have a single point of entry via the **UnitedHealthcare app** and **myuhc.com** to:

- Access primary, specialty, behavioral and on-demand care as well as vendors available to them via the **UHC Hub™**, which complements existing UnitedHealthcare solutions
- Earn and redeem dollars for completing healthy actions via **UnitedHealthcare Rewards**
- Pay claims using debit, credit or electronic bank transfer
- Access resources and other benefits offered by UnitedHealthcare, such as vision, dental, behavioral health and pharmacy benefits

"By logging into our UHC app or myuhc.com, we've made it easier for members to understand and utilize their health benefits," says Samantha Baker, chief consumer officer for UnitedHealthcare Employer & Individual.

4 Personalizing care to a member's unique needs

Navigating health care may be confusing, time consuming and stressful for employees and their family members. When employees connect with their carrier's customer service representatives and receive difficult-to-understand, unhelpful or conflicting information, stress levels and frustration may rise.

In fact, 89% of consumers surveyed said they think contacting customer service should be easier and more convenient, while 77% of consumers said they like being communicated with in a proactive and personalized way.⁵

It's critical to ensure that service representatives are equipped to handle the many different situations employees may be facing. That's why UnitedHealthcare Advocacy solutions are built to deliver personalized support. These solutions connect employees with compassionate, trained experts called Advocates who provide 1-on-1 guidance.

"We work to understand our members. We want to know the decisions that our members are about to make and the decisions that they don't even know they need to make," says Rebecca Madsen, chief executive officer of Advocacy for UnitedHealthcare Employer & Individual. "With real-time data, we may help steer them to choices that may lead to the best health outcomes at the lowest costs."

For employees with special needs or complex conditions in their families, these Advocates play a more active role. They serve as that employee's or family's single point of contact, providing emotional support and helping them navigate unique health care situations.

"Our insights power everything," Kurtzweil says about the abilities of UnitedHealthcare member data. "Our Advocates may have a conversation about everything from a member's gaps in care to social drivers of health risks and wellness rewards, which are all aimed at getting the best outcome for that member."



"To me, advocacy is all about proactively navigating our members and getting them the care that they need."

Samantha Baker

Chief Consumer Officer

UnitedHealthcare Employer & Individual

5 Helping members navigate network changes

With news about hospital closures,⁶ primary care provider (PCP) shortages⁷ and nursing strikes,⁸ the disruption and changes that are occurring within provider networks are causing widespread concern.

“Employers have been concerned that they’re going to get hit with these significant unit cost increases,” says Kurtzweil. “The good news is that we’re seeing only slight increases in unit costs—not the anticipated crazy spikes.”

But in different pockets of the country, network issues loom larger than in others. Whether it’s a network that limits an employee’s choices or a directory that simply isn’t up to date or accurate, provider networks may be a source of frustration for employees as well.

Actively working to boost the number of value-based providers, while also improving the accuracy of provider directories and network configurations to prevent issues like out-of-network charges—which may significantly inflate health care costs for unsuspecting employees—may help reduce friction. By ensuring that provider information is up to date and accurately reflected, and by designing networks that balance cost and access, UnitedHealthcare helps employees avoid unexpected fees and promotes a more predictable health care spending environment.

“At UnitedHealthcare, we recognize the frustration that members may experience when the network they are in isn’t providing an optimal experience, which is why we are continually reevaluating our network strategies to ensure they are meeting the needs of employers and employees, and working with provider groups to ensure our provider directories are reflecting accurate information,” says Stephanie Alberti, vice president of commercial medical products for UnitedHealthcare Employer & Individual.

These efforts collectively demonstrate an end-to-end approach to making health care more affordable by addressing both the immediate and long-term financial impacts on employers and employees and helping them navigate the health system.



1.7M+

physicians and health care professionals in UnitedHealthcare networks⁹

Learn more

Contact your broker, consultant or UnitedHealthcare representative or visit uhc.com/broker-consultant and uhc.com/employer

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- ¹ Patient Frustration Surges: Americans Struggle with Broken Healthcare System. MDVIP, Feb. 27, 2024. Available: <https://www.pnewswire.com/news-releases/patient-frustration-surges-americans-struggle-with-broken-healthcare-system-302072150.html>.
- ² How much is health spending expected to grow? Peterson KFF, Oct. 11, 2023. Available: <https://www.healthsystemtracker.org/chart-collection/how-much-is-health-spending-expected-to-grow>.
- ³ KFF Health Tracking Poll February 2024: Voters on Two Key Health Care Issues: Affordability and ACA. KFF, Feb. 21, 2024. Available: <https://www.kff.org/affordable-care-act/poll-finding/kff-health-tracking-poll-february-2024-voters-on-two-key-health-care-issues-affordability-and-aca/>.
- ⁴ Pulse of the Purchaser: 2023 Survey. National Alliance of Healthcare Purchaser Coalitions, 2023. Available: <https://www.nationalalliancehealth.org/wp-content/uploads/Pulse-of-the-Purchaser-Fall-2023.pdf>.
- ⁵ The modern age of CX messaging. Kustomer, part of Meta, 2022.
- ⁶ 13 hospital closures in 2024. Beckers Hospital Review, May 30, 2024. Available: <https://www.beckershospitalreview.com/finance/5-hospital-closures-in-2024.html>.
- ⁷ With provider shortage, fewer patients pursue primary care. Healthcare Finance, March 17, 2023. Available: <https://www.healthcarefinancenews.com/news/provider-shortage-fewer-patients-pursue-primary-care>.
- ⁸ Nurse Strike Update: The Latest on Nursing Strikes and Labor Disputes Around the Country. Nurse Journal, Jan. 24, 2024. Available: <https://nursejournal.org/articles/nurse-strike-update/>.
- ⁹ UnitedHealthcare Employer and Individual network statistics, ending Q1 2024.

The UnitedHealthcare plan with Health Savings Account (HSA) is a qualifying high deductible health plan (HDHP) that is designed to comply with IRS requirements so eligible enrollees may open a Health Savings Account (HSA) with a bank of their choice or through Optum Bank, Member FDIC. The HSA refers only and specifically to the Health Savings Account that is provided in conjunction with a particular bank, such as Optum Bank, and not to the associated HDHP.

Flexible spending accounts (FSAs) are administered by UnitedHealthcare and are subject to eligibility and restrictions. A flexible spending account is not insurance. It may also be referred to as a flexible spending arrangement. This communication is not intended as legal or tax advice. Please contact a competent legal or tax professional for personal advice on eligibility, tax treatment, and restrictions. Federal and state laws and regulations are subject to change.

The UnitedHealthcare plan with Health Reimbursement Account (HRA) combines the flexibility of a medical benefit plan with an employer-funded reimbursement account. Health reimbursement accounts (HRAs) are administered by OptumHealth Financial Services, Inc. and are subject to eligibility and plan restrictions. This communication is not intended as legal or tax advice. Please contact a competent legal or tax professional for personal advice on eligibility, tax treatment and restrictions.

The UnitedHealthcare® app is available for download for iPhone® or Android®. iPhone is a registered

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UnitedHealthcare Rewards is a voluntary program. The information provided under this program is for general informational purposes only and is not intended to be nor should be construed as medical advice. You should consult an appropriate health care professional before beginning any exercise program and/or to determine what may be right for you. Receiving an activity tracker, certain credits and/or rewards and/or purchasing an activity tracker with earnings may have tax implications. You should consult with an appropriate tax professional to determine if you have any tax obligations under this program, as applicable. If any fraudulent activity is detected (e.g., misrepresented physical activity), you may be suspended and/or terminated from the program. If you are unable to meet a standard related to health factor to receive a reward under this program, you might qualify for an opportunity to receive the reward by different means. You may call us toll-free at 1-866-230-2505 or at the number on your health plan ID card, and we will work with you (and, if necessary, your doctor) to find another way for you to earn the same reward. Rewards may be limited due to incentive limits under applicable law. Components subject to change. This program is not available for fully insured members in Hawaii, Vermont and Puerto Rico nor available to level funded members in District of Columbia, Hawaii, Vermont and Puerto Rico.

Specialty benefits and programs may not be available in all states or for all group sizes. Components subject to change.

Advocate4Me services should not be used for emergency or urgent care needs. In an emergency, call 911 or go to the nearest emergency room. The information provided through Advocate services is for informational purposes only and provided as part of your health plan. Wellness nurses, coaches and other representatives cannot diagnose problems or recommend treatment and are not a substitute for your doctor's care. Your health information is kept confidential in accordance with the law. Advocate services are not an insurance program and may be discontinued at any time.

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