



Empowering employees to make more informed health care decisions

Employees who understand their health care benefits and have visibility into the options available may be better equipped to help manage their cost of care.

Knowledge is power, but many Americans are lacking when it comes to knowledge about health care, with almost 9 in 10 American adults struggling with health literacy.¹ Health benefits can seem complex or difficult to understand, which may make it challenging for employees to choose the best and most cost-effective path to care. This may lead to choices that cost them and their employers more than may be necessary, while also generating potentially sub-optimal health outcomes.

To help employees get the most out of their benefits, employers may want to consider how they can help empower more informed health care decisions, such as:



Selecting networks and plans designed to help employees choose high-value care



Educating employees about how they can get the most out of their health plan



Providing access to 1-on-1 support and digital tools



There for what matters™



Selecting networks and plans designed to help employees choose high-value care

Employers who want to prioritize cost savings and quality outcomes for their employees can start by choosing the right provider network and health plan design for their workforce.

Networks that take into account the providers' or facilities' quality and cost of care may provide savings for employers and employees. For instance, UnitedHealthcare offers a variety of network options that encourage employees to select suggested network providers or facilities, which have met a certain criteria based on cost efficiency and quality measures.

These network options are bolstered by a strong digital experience designed to make it easier for employees to make more informed provider and site-of-care selections. In fact, the use of physicians recognized for quality and cost-efficiency resulted in UnitedHealthcare members seeing 23% lower costs per member per month, 38% fewer emergency department visits and 46% fewer inpatient hospital admissions.²

Health plans designed to offer **greater visibility** into the cost of care are also becoming more common. The **Surest®** health plan from UnitedHealthcare is a prime example, as it uses a unique plan design that allows employees to check actual costs—not estimates—and compare care options before making an appointment. With Surest, employees can understand how their care selections influence their health outcomes and their wallets—which resulted in an average of 50% lower out-of-pocket spend for members and up to 15% in cost savings for employers.³

"Innovating the way health plans are designed has the potential to better serve employers and employees, and UnitedHealthcare is well-positioned to bring those solutions to market," explains Kelley Nolan-Maccione, chief product officer for UnitedHealthcare Employer & Individual.



Educating employees about how they can get the most out of their health plan

In a survey, 51% of respondents reported some difficulty understanding at least one aspect of their health insurance, which underscores the need to improve workforce health literacy. Personal health literacy refers to the ability to find, understand and use information to inform health care decisions. 5

To overcome health literacy challenges, employers can help **educate employees** about their benefits and how to access them. An effective education campaign uses plain language to provide clear explanations of benefits. Employers can also offer multiple channels for employees to access information about their health care benefits, such as online portals, intranets, phone lines and in-person assistance.

Education can be a powerful tool. For example, communicating to employees about the places they can go for care and the conditions that warrant visiting each site may help enable them to make better decisions. When employees know where to go, they may avoid overpaying for treatment.

Another challenge employers can face is a lack of employee engagement or utilization within their group health insurance plans. If employees aren't taking advantage of their benefits, that may lead to deferred care or not seeking care at all for a condition that may worsen, which may result in potentially higher costs down the road.

Ensuring employees are aware of how to effectively use the health system and their benefits matters. Employers that prioritize employee education and actively engage their workforce may see a bigger return on their investment.







Providing access to 1-on-1 support and digital tools

Health plans that provide access to personalized support can also help employees make more informed decisions along their health care journey. For instance, **UnitedHealthcare** Advocacy programs connect employees to trained health care Advocates, via phone or chat, who can answer questions related to benefits, claims and coverage information; help with searches for covered providers; and make referrals to clinical and complex care support programs, depending on the level of their health plan. Employers who have enhanced Advocacy services, an amplified UnitedHealthcare Advocacy model, have seen 2-4% in medical cost savings.6

For help with real-time care decisions, active member intercept is designed to help members avoid unnecessary costs by providing support that may lead to more informed choices and prevent surprise medical bills. For instance, an employee may receive proactive alerts when they're approaching their benefit limit, or when an eligibility check is received from an out-of-network provider. These alerts can lead employees to make more cost-effective decisions.

Offering digital resources and tools as part of an employer's health plan can also help. This can include a dedicated benefits portal, such as the UnitedHealthcare® app and myuhc.com®. Within a few clicks, UnitedHealthcare members can search for providers, view cost estimates and access clear and concise information about their benefits, including eligibility requirements, coverage details and the status of claims or prior authorizations.

Wearable monitoring devices that provide instant access to personalized health data are also making a difference. With the ability to monitor vital signs, track symptoms and review test results, employees can gain a greater understanding of their health status.

This real-time data enables employees to proactively manage their health, identify potential issues early on and make necessary lifestyle adjustments. Moreover, sharing this data with health care providers becomes easier, which may help foster more effective collaboration and enable them to provide tailored advice and interventions – with the ultimate goal of better health outcomes and lower costs.

"Our UnitedHealthcare app provides simple and transparent access to data so members can make informed cost-effective care decisions that meet their personalized needs."

Samantha Baker

Chief Consumer Officer UnitedHealthcare Employer & Individual



Cost savings at the point of care

Employees aren't the only ones who can use digital tools to lower costs. Ensuring providers have the **tools and information** they need at the point of care can lead them to recommend or prescribe the best, most cost-efficient course of action for their patients based on their unique health needs and coverage.

For example, Point of Care Assist® from UnitedHealthcare integrates real-time patient information—including prior authorization, clinical, pharmacy, lab and cost data—into providers' workflows and electronic medical records (EMRs). This gives providers deeper insight into an employee's health profile, making it easier for them to address their patients' individual needs while also considering the impact their recommendations could have on their patients' cost of care.



Learn more

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



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- ¹ Health Literacy Fact Sheets. Center for Health Care Strategies, March 2024. Available: https://www.chcs.org/resource/health-literacy-fact-sheets/.
- 2 Results based on the utilization of highly efficient Premium Care Physicians versus other same-type surgeons who are not highly efficient Premium Care Physicians. PMPM = Per member per month. Low Premium provider utilization = less than 75% of all eligible charges for Premium providers. High Premium provider utilization = 75% or more of all eligible charges for Premium providers.
- 3 Surest self-funded 2022 book of business plan sponsors with at least 12 months of incurred experience in 2022 and both medical and pharmacy data within our warehouse; compared to matched comparison groups from a nationally representative commercially insured database matched by gender, age, urbanicity, and zip3 code using exact matching. 141_V03.
- 4 KFF Survey Shows Complexity, Red Tape, Denials, Confusion Rivals Affordability as a Problem for Insured Consumers, With Some Saying It Caused Them to Go Without or Delay Care. KFF, June 15, 2023. Available: https://www.kff.org/mental-health/press-release/kff-survey-shows-complexity-red-tape-denials-confusion-rivals-affordability-as-a-problem-for-insured-consumers-with-some-saying-it-caused-them-to-go-without-or-delay-care/.
- 5 What Is Health Literacy? Centers for Disease Control and Prevention. Available: https://www.cdc.gov/healthliteracy/learn/index.html. Accessed: Oct. 4, 2024.
- 6 2019-2020 UnitedHealthcare employer study including 387 clients, 4.8M members and \$19.2B in medical spend. Analysis completed on a continuous medical enrollment basis. Medical costs risk adjusted for age and gender. Value impact based on comparing clients by the adoption platform features vs. not (e.g., enhanced vs. Core advocacy). Actual client results may vary based on specific clinical programs the client has or maturity of implementation. Cost savings and health outcome results identified are not cuaranteed.

UnitedHealth Premium* is a resource for informational purposes only. Designations are displayed in UnitedHealthcare online physician directories at myuhc.com*. You should always visit myuhc.com for the most current information. Premium designations are a guide to choosing a physician and may be used as one of many factors you consider when choosing a physician. If you already have a physician, you may also wish to confer with him or her for advice on selecting other physicians. You should also discuss designations with a physician before choosing him or her. Physician evaluations have a risk of error and should not be the sole basis for selecting a physician. Please visit myuhc.com for detailed program information and methodologies.

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 $The United Health care ^app is available for download for iPhone ^or Android ^e. iPhone is a registered trademark of Apple, Inc. Android is a registered trademark of Google LLC.\\$

All UnitedHealthcare members can access a cost estimate online or on the mobile app. None of the cost estimates are intended to be a guarantee of your costs or benefits. Your actual costs may vary. When accessing a cost estimate, please refer to the Website or Mobile application terms of use under Find Care & Costs section.

Employee benefits including group health plan benefits may be taxable benefits unless they fit into specific exception categories. Please consult with your tax specialist to determine taxability of these offerings.

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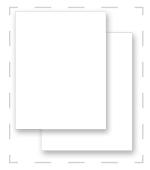
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