



3 ways to help drive effective behavioral health utilization



The solution is not just adding more providers. It's about helping guide employees to available resources designed to address their specific needs.

Demand for mental health support is increasing – and so has the affiliated cost to employers. In fact, between 2024 and 2025 alone, the cost of treating and managing behavioral health issues increased 10.9% for employers, according to the UnitedHealthcare 2026 Health Trends Report.¹

Stress and burnout are contributing to these increases: 66% of surveyed employees experienced burnout in 2025.² Additionally, 60M U.S. adults received mental health counseling or treatment in 2024, versus just 41.4M in 2020.³

The growing demand for and utilization of behavioral health benefits over the years represents the strides made in expanding access to behavioral health care, but it also poses a new challenge: how to drive more effective utilization to help control the affiliated costs.

For employers, it is about ensuring employees and their covered family members feel comfortable seeking support – while also having the tools and guidance needed to help drive more effective utilization without sacrificing quality. This means:



Ensuring employees have access to a continuum of support



Educating employees about available behavioral health benefits



Working with a carrier that helps guide employees and their families to support based on their severity level



Ensuring employees have access to a continuum of support

Not every behavioral health challenge requires the same level of care. It is important that employers also look beyond their network strategies and work to offer alternative means of support.

“We need to expand our perspective on what care looks like and get people comfortable with trying solutions and support that may work just as effectively as talk therapy,” says Trevor Porath, vice president of behavioral health solutions for UnitedHealthcare Employer & Individual. “Solutions designed for lower-severity issues give members immediate, convenient access to care – bypassing provider availability constraints.”

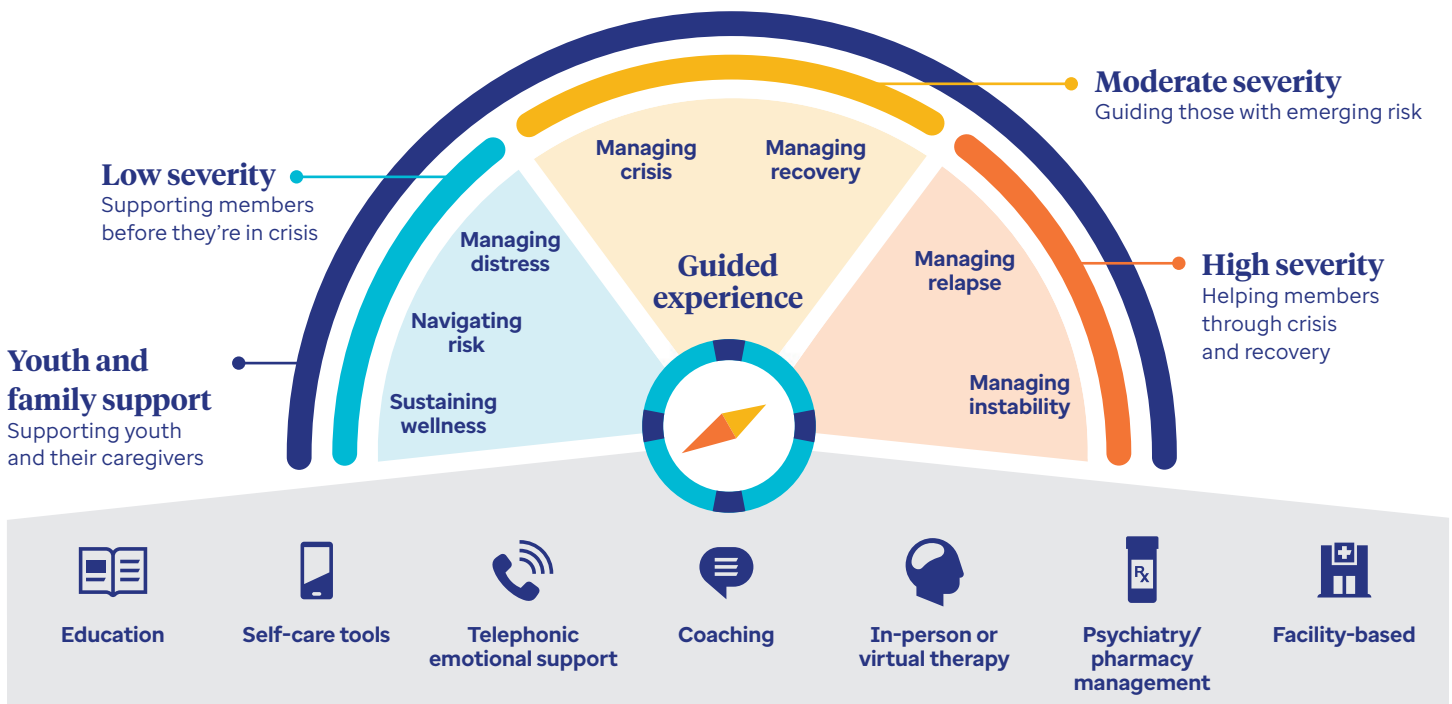
Understanding this, UnitedHealthcare offers a behavioral health continuum that uses clinical knowledge and data analytics to help guide members to care options that best fit their needs and schedules,

ranging from educational resources and self-care tools to coaching, in-person or virtual therapy, psychiatry and facility-based care.

This continuum uses a severity scale from low (preventive) to moderate (emerging risks) to high (crisis and recovery) to provide the most useful behavioral health solutions for employees and their dependents, including **youth and family support**.

And while employers should look to offer solutions that span the full continuum of care needs, the biggest opportunity may be in driving more effective utilization within the low-to-moderate severity categories – especially considering that approximately 90% of UnitedHealthcare commercial members had lower-severity needs that could have been appropriate for the **low-severity solutions**.⁴

UnitedHealthcare behavioral health care continuum



Oftentimes, the support people need may not require traditional talk therapy. Digital self-help tools, **“in-the-moment” telephonic support, behavioral health coaching** and apps like **Calm Health** can be effective alternatives. These options may offer on-demand mental health screenings and support, 24/7 access to master’s-level mental health specialists, clinician-designed personalized programs and a library of mindfulness and self-care resources.

“Historically, a member’s first step into behavioral health has been through a therapist or psychiatrist. What we found is that not all members need that level of care,” says Stacie Grassmuck, director of behavioral health

products and innovation for UnitedHealthcare Employer & Individual. “By offering digital tools like behavioral health coaching and Calm Health, members have access to immediate support and practical coping strategies they can use daily – addressing depression and stress triggers before they reach a point requiring more intensive care.”

Among members who completed 2 or more mental health assessments via Calm Health, nearly 43% of engaged members experienced improvement in both depression and anxiety symptoms.⁵ This highlights the value of engagement with these digital tools and ongoing self-assessment.



Educating employees about available behavioral health benefits

Educating employees about behavioral health benefits is essential for driving utilization and helping ensure those who need support can access it. Despite significant organizational investment in behavioral health coverage, awareness gaps remain the primary barrier to care.

Targeted communications must go beyond annual enrollment materials. Regular touchpoints through email, intranet resources, manager toolkits and onboarding should clearly outline all available services with specific guidance on access, confidentiality and costs.

Identifying mental health champions and well-being committees can help amplify these efforts by creating peer-support networks that normalize seeking support, provide trusted sources of information and help ensure mental health is embedded in workplace culture and policies – from flexible work arrangements to performance management.

However, education alone is insufficient without authentic top-down cultural commitment. When leaders openly discuss mental health, share their own experiences and utilize benefits, they signal that behavioral health is a business priority. This requires:

- Consistent messaging that mental health equals overall health
- Policies that protect employees from discrimination when seeking care
- Leadership accountability for psychological safety

Organizations that integrate mental well-being into core values may see better utilization, improved retention and measurable productivity gains.⁶





Working with a carrier that helps guide employees and their families to support based on their severity level

Access to strong behavioral health benefits means little if employees cannot navigate the system effectively. Without proper navigation, members struggle to find care, leading to under- or over-utilization and higher costs. Guided navigation can help transform this experience by directing members to the right resources based on their specific needs through integrated digital tools and personal advocacy support.

For instance, UnitedHealthcare **provider search capabilities** offer personalized results based on member preferences (e.g., location, language, appointment availability, virtual versus in-office care) while prioritizing providers who meet nationally recognized quality standards and accounting for members' specific benefits and coverage. Members can even view real-time appointment availability and schedule directly within the provider search experience, eliminating extra steps and accelerating access to care. It's all designed to help employees and their family members make more informed care choices.

This guided experience is also supported by **Advocates** who listen for signs of distress during member calls, help explain the differences between licensed mental health professionals and connect members to additional services beyond basic mental health support.

Predictive analytics strengthen this navigation framework by identifying members who may need behavioral health support before they seek it – using diagnostic codes, utilization patterns, social drivers of health (SDOH) and chronic disease prevalence to help segment populations and trigger proactive outreach.

When **behavioral and medical benefits** are administered by the same carrier, these insights become even more impactful. With 11% of UnitedHealthcare members having had comorbid medical and behavioral health conditions – and accounting for 22% of total care costs – more coordinated navigation between those benefits is designed to help support earlier intervention, more connected care experiences and better whole-person health outcomes.⁷



What's next in this utilization puzzle?

Behavioral health utilization continues to rise as stigma diminishes, and access expands through virtual and digital platforms, yet measuring its value is inherently subjective.

A recent study evaluated effectiveness using outcome-focused quality measures that examined whether care helped improve patients' health and functioning, based on patient-reported symptoms, person-centered goals and validated assessments – rather than simply whether patients received care or had access.⁸

As the industry works to better define the effectiveness of behavioral health services, it's vital that employers work with a carrier who has the breadth of offerings and the care navigation strategies that can support employees and help prevent employers from paying more than what's necessary and appropriate.



Learn how UnitedHealthcare supports a whole-person health approach >

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¹ UnitedHealthcare 2026 Health Trends Report: UnitedHealthcare Employer & Individual self-funded and fully insured data based on claims incurred between November 2024-October 2025, paid through January 2026. Catastrophic claims threshold was \$100K or higher.

² Job Burnout at 66% In 2025, New Study Shows. Forbes, Feb. 5, 2025. Available: <https://www.forbes.com/sites/bryanrobinson/2025/02/08/job-burnout-at-66-in-2025-new-study-shows/>.

³ Number of U.S. adults who received mental health treatment or counseling in the past year from 2002 to 2024. Statista, Aug. 2025. Available: https://www.statista.com/statistics/794027/mental-health-treatment-counseling-past-year-us-adults/?srsltid=AfmBOopOeD.J92Ngh_5tyTPYXXdxOAe8JP8DsFYzqAW_5YewZHUxfVi.

⁴ UnitedHealthcare Employer & Individual Fully Insured and ASO Member Segment Summary data analysis (healthy, at-risk, mild to moderate) using 2024 data, as of May 2025.

⁵ UnitedHealthcare Employer & Individual Low Severity Observational Analysis based on Fully Insured and ASO members who downloaded the Calm Health app between Sept. 1, 2024, and Feb. 28, 2025, with 3 or more coverage months. Measurement done via PHQ-9 and GAD-7 screenings.

⁶ Employee Wellbeing: Why it matters and how to improve it? IMD, Feb. 2026. Available: <https://www.imd.org/blog/management/employee-wellbeing>.

⁷ UnitedHealthcare Employer & Individual National Accounts Health Plan Manager 2024 data, April 2025.

⁸ Developing Tools for Measuring Mental Health Outcomes. NIH, Apr. 9, 2025. Available: <https://www.nimh.nih.gov/news/science-updates/developing-tools-for-measuring-mental-health-outcomes>.

When you sign up for Virtual Behavioral Coaching, you will be asked a series of questions to ensure that this program is the right fit for you. You may be directed to another resource if your answers indicate that a different type of program may better suit your needs.

Smart Choice is proprietary to UnitedHealthcare designed to provide members with greater personalization and choice with respect to the provider search experience that considers member preferences quality care, costs, accessibility and convenience. Smart Choice is intended as a guide when selecting care. Smart Choice may rely on personal data. We do not endorse any particular provider or guarantee quality. Scores are generated using artificial intelligence (AI). The AI may not always be error-free and could include incomplete or inaccurate information. Judgement should be used when selecting care.

Advocate 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.

Where available, 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. Please refer to the Website or Mobile application terms of use under Benefits & Cost to access a cost estimate, and under Find Care to search for care. Level Funded and Neighborhood Health Partnership members can access average cost data online or on the mobile app. None of the average costs are intended to be a guarantee of your costs or benefits. Your actual costs may vary. Please refer to the Website or Mobile application terms of use under Benefits & Cost to access average cost data, and under Find Care to search for care.

Participation in the Health Assessment is strictly voluntary. Any health information collected as part of the assessment will be kept confidential in accordance with the Notice of Privacy Practices; be used only for health and wellness recommendations or for payment, treatment or health care operations; and be shared with your health plan, but not with your employer.

Calm Health is not intended to diagnose or treat depression, anxiety, or any other disease or condition. The use of Calm Health is not a substitute for care by a physician or other health care provider. Any questions that you may have regarding the diagnosis, care, or treatment of a medical condition should be directed to your physician or health care provider. Calm Health is a mental wellness product, and is not intended to make any mental health recommendations or give clinical advice. Calm Health is not available to UnitedHealthcare E&I Fully Insured customers/members in New Jersey due to regulatory filings. 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. Images provided for illustrative purposes only. Members must be 13 years or older to use the services, unless a parent or legal guardian agrees to Calm "Terms." The parent or legal guardian of a user under the age of 13 is subject to the "Terms" and responsible for their child's activity on the services.

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 the taxability of these offerings.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or their affiliates.