



Managing cost trend while delivering quality benefits

From employers facing more high-cost claims, to employees delaying care due to costs, access to more affordable care is critical to everyone. Infusing cost management strategies into every benefits package and service we deliver, UnitedHealthcare is working to help make everyone's health care dollars go further.



An end-to-end approach to managing benefits costs



Network and plan design

- Help employers and their employees get the most out of their benefits
- Reduce out-of-network use and associated costs
- Offer access to providers and sites of care that deliver quality care and cost-efficiency



Clinical and care management

- Proactively identify and manage costly conditions
- Help employees understand next-best health actions
- Deliver personalized care plans that work to enable better health outcomes at lower costs



Financial integrity

- Empower more informed care recommendations and decisions
- Streamline processes to help reduce unnecessary care or costs
- Help ensure payment and spend accuracy at each stage of a claim's lifecycle

CHALLENGE

1 in 3 adults said that they skipped or delayed health care due to cost¹

29% of total employer health care spend is attributed to chronic conditions⁴

25% of all health care spending is considered wasteful or unnecessary⁶

SOLUTION

Consider the Surest[®] health plan, which provides upfront copays – not estimates – with lower copays for higher-value care providers, broad network access and no deductibles or coinsurance:

Offer employees access to condition-specific programs with a goal of better health outcomes and lower costs:

Work with a carrier that is committed to helping ensure cost accuracy and efficiency:

10% average employer savings with Surest²

↑57% higher likelihood that members choose higher-value providers with Surest than those who don't comparison shop³

≈\$9.5K average annual employer savings across all Cancer Support Program participants⁵

38% average contractual savings from the Cancer Support Program⁵

98% of all claims received for eligible members are paid out by UnitedHealthcare⁷

\$30–\$35 average PMPM savings for employers with UnitedHealthcare Payment Integrity solutions⁸

PMPY = Per member per year.
PMPM = Per member per month.

Proof is greater than promises

Big cost challenges demand bigger thinking. Going beyond upfront network discounts, UnitedHealthcare uses tested cost management strategies to help employers get more from their health benefits.



Proven results

+11% lower total cost of care

compared to national benchmarks according to independent actuarial analysis commissioned by UnitedHealthcare and completed by Milliman⁹



Quality providers

↓23% PMPM

lower risk-adjusted costs for members who used physicians recognized for effective and efficient quality care, compared to those who didn't¹⁰



Payment integrity

\$6.8B

in medical cost savings due to Payment Integrity interventions on 49.6M claims¹¹



Learn how UnitedHealthcare is working to reduce health care costs >

UnitedHealthcare®

¹ Americans' Challenges with Health Care Costs. Kaiser Family Foundation, Jul. 11, 2025. Available: <https://www.kff.org/health-costs/issue-brief/americans-challenges-with-health-care-costs/>.

² Surest Actuarial Results through 2025.

³ 2024 Surest book-of-business analysis comparing outcomes of shoppers, non-shoppers, and a norm. Norm based on non-Surest, traditional plans.

⁴ UnitedHealthcare Employer & Individual book-of-business data, Dec. 2023. Excludes Alaska, Hawaii, Puerto Rico and the U.S. Virgin Islands.

⁵ Optum book of business survey results, 2021.

⁶ Shrank, W. et al. Waste in the U.S. Health Care System: Estimated Costs and Potential Savings. JAMA Network, Oct. 7, 2019. Available: <https://jamanetwork.com/journals/jama/article-abstract/2752664>. Accessed: Feb. 18, 2025.

⁷ UnitedHealthcare 2023 medical claims data.

⁸ Based on UnitedHealthcare FI and ASO commercial book of business 2023 claims reporting.

⁹ Milliman Analysis of Total Cost of Care Benchmarks, March 2026. Based on UnitedHealthcare allowed medical claims and enrollment data using 2022 service dates compared to Merative® MarketScan® industry benchmarks across 50 U.S. regions, adjusted for difference in health status, demographics, geographic mix and excess large claims. Actual results may vary. Full white paper available: <https://www.milliman.com/en/insight/total-cost-care-benchmarks-ppo-health-claim-costs>.

¹⁰ 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. 2023 UnitedHealthcare Network (Par) Commercial Claims analysis for 172 markets. Rates are based on historical information and are not a guarantee of future outcomes.

¹¹ Based on UnitedHealthcare FI and ASO commercial book of business 2023 claims reporting. 250 million claims were processed/adjudicated in 2023, all of which were subject to review by the Payment Integrity suite of solutions.

Cancer Support Program is a program, not insurance. Availability may vary on a location-by-location basis and is subject to change with written notice. UnitedHealthcare does not guarantee availability of programs in all service areas and provider participation may vary. Certain items may be excluded from coverage and other requirements or restrictions may apply. Please check with your UnitedHealthcare representative.

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.

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