



Redefining behavioral health access in employer plans



Helping employees understand their care choices and feel safe asking for support may help improve behavioral health access.

As behavioral health challenges continue, helping ensure employees have meaningful access to care and support through their employer-sponsored plans has become a critical priority. Research has shown that nearly 1 in 4 U.S. adults struggled with their mental health in 2024,¹ while 122M+ people lived in areas with a shortage of mental health professionals.²

These numbers reflect a structural imbalance, not a cyclical spike. And while the conversation often centers on provider shortages, the challenge employers face runs deeper. Expanding access to behavioral health care is not simply a matter of adding more providers to a network. It requires designing a system that supports access across a continuum of mental health support options. It also requires creating a workplace culture where employees feel safe using it.

Employers can help address these challenges by focusing on 3 interconnected areas:

- 1 The strength and reach of their behavioral health network
- 2 How effectively that network helps members understand available support
- 3 How workplace culture shapes whether employees seek support

Selecting a network with scale, reach and diversity

The foundation of behavioral health access is network design. A well-structured network gives employees more choice in how care is delivered, who delivers it and how quickly they can access it.

For instance, UnitedHealthcare expanded its national behavioral health network to include 496K+ providers, an increase of over 116% from 2020.³ That total included 275K+ virtual providers³ – giving members greater access to care regardless of where they lived, which is especially important for employees in rural areas or communities with limited in-person options.

Network breadth matters, but so does diversity within that network. Providers should reflect a range of specializations,

care modalities, languages and backgrounds. Research suggests that shared demographic characteristics between individuals and providers have been associated with stronger communication and engagement in care for some.⁴ Employers evaluating carrier options should consider not just how large the network is, but how well it reflects the needs of their workforce.

“When we think about our behavioral health network strategy, we are building in ways to improve quality, provide greater value and increase access for our members,” says Stacie Grassmuck, director of behavioral health product and innovation for UnitedHealthcare Employer & Individual.

Matching the level of support to the level of need

A larger network is only part of the solution – how members are supported through that network matters just as much.

Despite common belief, traditional therapy or psychiatry may not always be the first or only step. **Coaching**, self-help tools, telephonic in-the-moment support and digital resources can often address needs more quickly and at lower cost. In fact, more than 90% of members experienced low-severity needs.⁵ And in most cases, they reduced the wait times associated with in-person care. Costs for solutions like these are typically lower than other types of behavioral health care, which may be important to be mindful of – especially considering that treatment costs for mental health continued a decade long rise, increasing 10.9% from 2024-2025.⁶

“Today, we see that many members prefer the convenience of virtual appointments or telephonic support. Virtually connecting with a provider reduces the time employees must spend away from work, commuting or in the waiting room,” says Trevor Porath, vice president of behavioral health solutions for UnitedHealthcare Employer & Individual. “By removing those obstacles, members can get the mental health care and support they need, when they need it.”

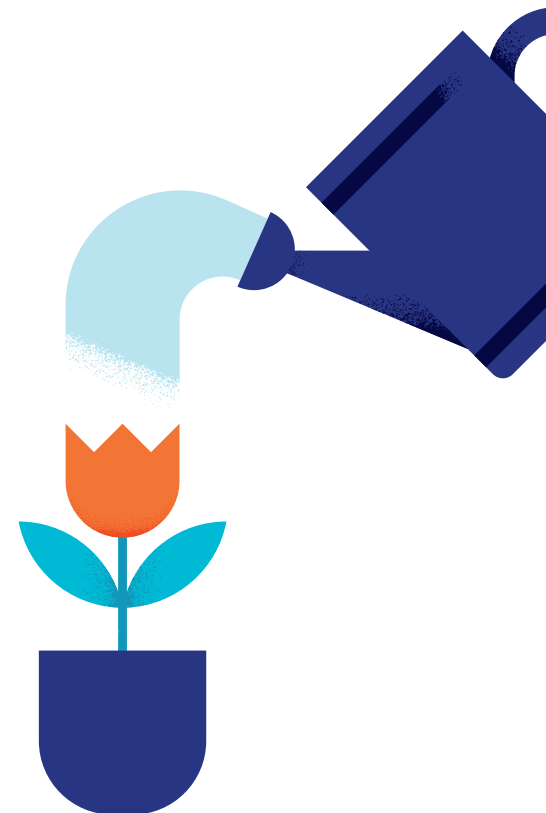
When members are equipped with information to help them find an appropriate level of support, outcomes may improve. For instance, those who used **Calm Health** experienced about a 43% improvement in depression and anxiety symptoms after 2 or more assessments.⁷

“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 Grassmuck. “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.”

This kind of guided navigation – connecting members to the right level of support based on their needs – may help preserve clinical capacity for those who need it most while extending access to a broader population.

+90%
of members experienced
low-severity needs⁵

43%
of individuals
who called wanted
in-the-moment support⁸



“In-the-moment support was there when we needed them, when it mattered to us. And for my daughter it, frankly, might have saved her life.”

Michelle

[Watch Michelle’s story >](#)

Creating a culture designed to help employees feel safe seeking support

Even with a strong network and thoughtful navigation, access gaps persist. According to the 2024 National Survey on Drug Use and Health, approximately 52.1% of adults with a mental illness received mental health treatment in that year.⁹ That means half did not – despite the availability of care.

That gap cannot be explained by provider shortages alone. Additional research indicates that 67% of U.S. workers were either unaware or only aware of the mental health resources their employer offered.¹⁰ When employees do not know what's available, even well-designed benefits go unused.

But awareness alone is not enough. Employees also need to feel that seeking support is safe – that it will not affect how they are perceived at work. That sense of psychological safety does not come from a benefits guide. It comes from leadership. Managers set the tone in how they talk about mental health. Senior leaders influence whether help-seeking is normalized. Consistent communication about available resources shapes whether employees engage with their benefits. Identifying well-being champions, committees or employee resource groups (ERGs) within the workforce can also help create a more inviting and supportive culture.

For employers, this means treating benefit communication as an ongoing practice, not an annual enrollment event. It means equipping managers with a language they can use. It also means recognizing that utilization – not just coverage – is what matters.



A systems approach to behavioral health access

Addressing behavioral health access requires more than expanding provider capacity. It requires pairing that capacity with **navigation strategies** that help guide members to available resources – and a workplace environment that makes it easier for employees to take that first step. Employers may benefit from working with their carrier to better connect network design, guided navigation and member engagement into a more coordinated approach to access.

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¹ The State of Mental Health in America 2025, Mental Health America. Available: <https://mhanational.org/the-state-of-mental-health-in-america/>.

² Mental Health Providers, County Health Rankings. Available: <https://www.countyhealthrankings.org/health-data/community-conditions/health-infrastructure/clinical-care/mental-health-providers?year=2025>. Accessed: March 2026.

³ SURE Network Summary Dashboard, Commercial E&I and Commercial non-E&I Q3 2025 (January 15, 2026, data); Robin Marsh January 2026.

⁴ Moore, C. et al. "It's Important to Work with People that Look Like Me": Black Patients' Preferences for Patient-Provider Race Concordance. National Library of Medicine, Nov. 7, 2022. Available: www.ncbi.nlm.nih.gov/pmc/articles/PMC9640880/. Accessed: April 7, 2026.

⁵ UnitedHealthcare Employer & Individual Member Segment Summary 2024 data for Fully Insured and ASO book of business, May 2025.

⁶ 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.

⁷ UHC Commercial Fully Insured (FI) and ASO members, downloaded app between Sept. 1, 2024-Feb. 28, 2025, 3 or more coverage months. Measurement done via PHQ-9 and GAD-7 screenings.

⁸ Optum analysis of EAP Book of Business NPS Survey (2024 data); Katrina Puskala Hamel, April 2025.

⁹ National Survey on Drug Use and Health (NSDUH), 2024. Substance Abuse and Mental Health Services Administration (SAMHSA). Available: www.samhsa.gov/data/report/2024-nsduh-annual-national-report. Accessed: Jan. 2026.

¹⁰ Stanchak, J. A Guide to Advanced Mental Health Benefits at Work. SHRM Business, May 23, 2024. Available: <https://www.shrm.org/enterprise-solutions/insights/advanced-mental-health-benefits-at-work-guide>. Accessed: April 7, 2026.

Calm Health is not intended to diagnose or treat depression, anxiety, or any other disease or condition. If participants feel their condition is severe and needs attention, they are instructed to contact their treating provider or mental health therapist for help. This program 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.

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.

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