



Empowering employees to make informed health care choices

Employees who grasp their health care benefits and have clear insight into available options may be better prepared to manage their care costs.

Knowledge is power, but nearly 9 in 10 Americans are lacking when it comes to knowledge about health care.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



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, compared to non-engaged members, 50% of UnitedHealthcare members who engaged with a **PCP** had improved decision-making, better treatment adherence and lower claims trends.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 an innovative, consumer-driven 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 – leading to proven savings.³

“The drivers of emerging plan design will certainly be about finding a balance between consumer-friendly plan designs and plans that help employers manage their costs,” says Craig Kurtzweil, chief data & analytics officer for UnitedHealthcare Employer & Individual.



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

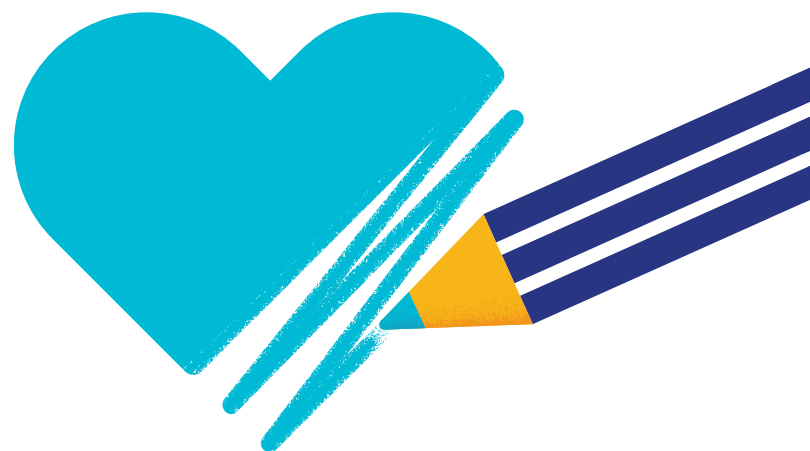
When asked, 1 in 4 employees reported feeling “a little” or “not at all” informed about their benefits.⁴

To address health literacy challenges – meaning the ability to find, understand and use information to make informed health care decisions⁵ – 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®**.

UnitedHealthcare enhances the digital experience by offering a personalized member experience that guides individuals to care and programs tailored to their specific needs. Whether it's through the Smart Choice provider search with prioritized results, or by surfacing available clinical, behavioral and wellness programs – advanced technology plays a key role.

It integrates quick chat capabilities for immediate answers and sends notifications about prior authorization and claims status. This helps ensure members stay informed and supported every step of the way.

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 Growth Officer
UnitedHealthcare Employer & Individual

6.6M

members impacted
by providers using the
Point of Care Assist tool⁷

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 Optum 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 how UnitedHealthcare is working for more affordable care >

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¹ Talking Points About Health Literacy. Centers for Disease Control & Prevention, Oct. 16, 2024. Available: <https://www.cdc.gov/health-literacy/php/about/tell-others.html>.

² UnitedHealthcare Employer & Individual book-of-business internal analysis of claims incurred Jan. 2022–Dec. 2022 and paid through Feb. 2023.

³ Surest Actuarial Results through 2025.

⁴ Study Finds Most Participants Don't Understand Their Benefits. Plan Sponsor Council of America, Sept. 24, 2024. Available: <https://www.pasca.org/news/psca-news/2024/9/study-finds-most-participants-dont-understand-their-benefits/>.

⁵ What Is Health Literacy? Centers for Disease Control and Prevention, Oct. 16, 2024. Available: <https://www.cdc.gov/health-literacy/php/about/index.html>.

⁶ 2022–2023 UnitedHealthcare employer study analysis of 617 customers migrating from Core in 2022 to enhanced advocacy confirmed the estimated savings that were reported in an early study (2019–2020). 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).

⁷ UnitedHealthcare internal analytics, YE 2023.

UnitedHealth Premium® is proprietary to UnitedHealthcare. UnitedHealth Premium evaluates physicians based on safe, timely, effective and efficient quality care criteria to help members make more informed choices for their health care. **It's intended only as a guide and should not be the sole factor considered when selecting a physician. Designations have a risk of error and members should discuss designations with a physician before choosing one. If a member already has a physician, they should also consult with them for advice on selecting other physicians.** The fact that a physician does not have a Premium Care Physician designation does not mean that the physician does not provide quality health care services. All physicians in the UnitedHealthcare network have met certain minimum credentialing requirements (separate from the UnitedHealth Premium criteria). Please visit the medical care directory specific to the member's benefit plan for physician designations and detailed information about UnitedHealth Premium and the evaluation methodology.

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.

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

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