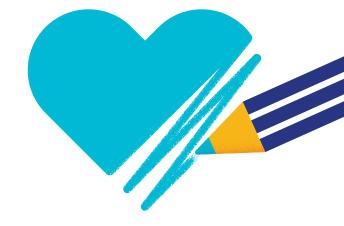# Easing administrative burdens benefits the entire health care ecosystem

Helping members live healthier lives and making the health system work better for everyone means reducing the steps required for members to get the care they need, when they need it.

How can we achieve this? By mapping out the member journey and identifying opportunities to increase efficiencies that have the greatest potential impact on members.

"At UnitedHealthcare, we understand the challenges people face when navigating the health care system," says Samantha Baker, chief consumer officer for UnitedHealthcare Employer & Individual. "Efforts to reduce administrative burden and improve efficiencies are critical to supporting consumers and evolving the overall health care experience."

And while the focus of these efforts should always remain first and foremost on the member, stakeholders throughout the health care ecosystem can all benefit from reimagining their respective ways of working. At UnitedHealthcare, this includes:

- Reducing or eliminating prior authorizations for certain services or treatments

- Better connecting and integrating patient data into provider workflows to enable more informed decisions

- Simplifying the process of selecting and purchasing benefit vendors for employers

- Improving the quoting, enrollment and ongoing health plan administration experience for benefits administrators

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United Healthcare®

Reducing or eliminating prior authorizations for certain services or treatments

While prior authorizations are an important checkpoint to ensure a service or procedure is safe and medically appropriate — and to help ensure employees don't pay out-of-pocket for care they don't need — they can sometimes be viewed as red tape that gets in the way of a member receiving care in a timely manner.

Understanding the hurdles prior authorizations can cause providers and members, UnitedHealthcare has continued to streamline its prior authorization process and has even eliminated this step for some common services and procedures, when and where appropriate.

In fact, when UnitedHealthcare members seek care, over 98% of the time there is no prior authorization needed.[1] This helps prevent care from being delayed, leading to a better member experience.

UnitedHealthcare also launched its Gold Card

Program in October 2024, which recognizes provider groups who consistently adhere to evidence-based care guidelines by reducing their total prior authorization request volume.

Streamlining the prior authorization process not only reduces back-end tasks for providers but also creates a simpler experience for employees. This has the potential to benefit employers by leading to a healthier and more satisfied workforce.

+98%

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Better connecting and integrating patient data into provider workflows to enable more informed decisions

Providers also spend a significant amount of time working with patients' Electronic Medical Records (EMRs). In fact, one report showed that providers spend 45% of their time working in EMRs — half of that time while providing direct patient care.[2]

Applying innovation to this situation looks like better connecting and integrating patient data into a provider's workflow. By leveraging clinical data and intelligence, UnitedHealthcare is working to simplify administrative processes and improve efficiency and quality across the health care system.

For instance, PreCheck MyScript®, through Optum, provides information to providers — including

access to a member's Prescription Drug List (PDL), lower-cost alternatives and prior authorization guidelines. This can help inform better pharmacy decisions, further streamline prior authorizations and improve member affordability through recommendations for lower-cost alternatives and improved medication adherence.

Point of Care Assist®, through Optum, is another tool that equips providers with real-time health plan information, such as claims information that helps providers understand gaps in care that could be addressed before, during and after patient encounters.

Simplifying the selection and purchasing process with benefit vendors

As employee expectations for their benefits expand beyond traditional health care to include **behavioral health**, **financial wellness** and other holistic, whole-person health options — employers may find themselves faced with myriad vendor and solution choices.

By bringing vendors onto a single platform, the **UHC Hub™** from UnitedHealthcare aims to enable a more seamless experience and save employers from having to navigate what can often feel like a disconnected system, especially when it comes to selecting and purchasing vendors for their employees.

The benefits of UHC Hub also support employees by giving them access to solutions that can better meet their health and well-being needs, offering choices in managing various health conditions and enhancing their understanding of how to use their health care benefits and services.

What's more, this helps reduce the administrative load for those who support employers. Since the platform provides employers a self-service option and may mean less hands-on assistance, brokers and consultants can spend more time focusing on other issues that matter to their clients.

Introducing the UHC Store

In 2025, UnitedHealthcare will launch a consumer-centric shopping experience that will allow employees to choose from a variety of discounted health and wellness solutions within the UnitedHealthcare digital experience on the **UnitedHealthcare® app** or **myuhc.com®**.

Improving the quoting, enrollment and ongoing health plan administration experience

In addition to streamlining processes for the entire ecosystem, it's also important to reduce the amount of time and resources spent on manual tasks by those who assist employers with onboarding and health plan management.

Enter **UnitedHealthcare Benefit Ecosystem™**. External stakeholders can access vital benefit plan data via the UnitedHealthcare Application Programming interface (API Marketplace). These API assets enable leading multi-carrier benefit administration technologies to increase automation of routine tasks and launch new product features for employers and employees.

This secure digital interface works to improve the benefit administration experience and streamline the enrollment, eligibility and renewal process using real-time integration and automation. This includes automating the steps involved in building a client profile and managing a group's enrollment and eligibility. It also facilitates direct, real-time communication between benefits administrators and UnitedHealthcare.

"We've established a team to improve how the full portfolio of UnitedHealthcare group products show up in the broader employer benefit ecosystem," explains Dan Cole, vice president of strategy for UnitedHealthcare Benefit Ecosystem within UnitedHealthcare Employer & Individual.

"We're focused on developing strategic alliances with tech-forward and consumer-centric solutions," Cole says. "These collaborations aim to improve the enrollment and administration experience for all shared stakeholders."

1.38M

Benefit Ecosystem users — a more than 50% increase since December 2023[3]

UnitedHealthcare continues to focus on bringing solutions to market that help people live healthier lives and help make the health system work better for everyone. Core to that mission is finding innovative ways to reduce friction in the system, putting employees at the center, while listening and responding to the needs of today's employers, brokers, consultants and providers.

Learn how UnitedHealthcare is working to transform the future of health care >

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