



Clarity, personalization and on-demand support may be critical to delivering the kind of simpler experience in health care that employees have come to expect in just about every other aspect of their lives.

Working for simpler, more supportive health care experiences



What's driving consumer buying trends in 2024? Nearly 50% of surveyed consumers said the quality of customer service or support influenced their purchases, and 30% said that an easy-to-navigate digital experience was a key factor.¹ In other words, the experience matters.

With fewer than 2 in 5 surveyed consumers reporting feeling satisfied with their health care experience, it's clear that the industry still has work to do to deliver an experience that lives up to what consumers are accustomed to in other aspects of their lives.²

**What do consumers want
from their health care experience?**

 Personalization	 Simplicity	 Efficiency
 Connectedness	 Transparency	 Support

“We’re committed to creating a more seamless health care experience to help members navigate the health system with ease and efficiency.”

Samantha Baker

Chief Consumer Officer
UnitedHealthcare Employer & Individual

It's a tall order, one that requires bringing together all the different parts of health care, from benefit and network design to advocacy, clinical support and cost management. But it's essential: Research shows that about 6 in 10 insured adults reported experiencing a problem with their health insurance over a 12-month period.³ That poor experience may reflect on their employer.

In fact, 43% of employees surveyed said that they left a job because they felt their benefits weren't good enough.⁴ The quality of benefits may play into those decisions, but so does an employee's frustration with accessing their benefits and navigating the health system.

Employers who want to attract and retain top talent – and get the most out of the benefits they're offering – should care about fostering a better employee health care experience, which may include:

- A retail-inspired digital experience
- Compassionate, knowledgeable support
- Solutions designed for cost clarity and financial support
- Rewards and incentive programs



5 actions employers can take

- 1 Work with a carrier or vendor that invests in its member experience, especially its digital experience
- 2 Invest in advocacy programs that have the potential to reduce costs, improve health outcomes and simplify experiences
- 3 Consider opportunities to make the cost of health care more transparent and affordable for employees
- 4 Ensure your carrier offers a network that prioritizes quality providers, broad access and cost efficiency
- 5 Offer rewards and incentive programs designed to help move the needle on health outcomes

“If members are having an outstanding health care experience, that reflects well on the employer first and foremost.”

Dr. Gerald Hautman

Chief Medical Officer
UnitedHealthcare National Accounts

A retail-inspired digital experience

Since digital engagement can lead to more engaged employees overall, it's important to work with a carrier that invests in a strong digital experience.

“Consumer expectations have changed, and health care needs to continue to meet members where they are. The fact is that, for many of the services they use each day, people are opting for digital experiences and expecting personalization from those experiences,” says Samantha Baker, chief consumer officer for UnitedHealthcare Employer & Individual.

In fact, just over 71% of consumers surveyed said they expect personalization from the companies they purchase from – and 76% said they grow frustrated without it.⁵ In another survey, about 4 out of 5 consumers said they want to use a digital health platform to manage both their care and benefits.⁶

With Millennials making up 42% of today's workforce and Generation Z beginning to enter the workforce,⁷ employers need a health benefits strategy that works for them, as well as other **generations** within their workforce.

Increasingly, all generations are demanding more personalized and immediate interactions in health care, including apps that contain all their health and benefits information. And although younger generations tend to be digitally savvy, data shows that they still may not always make the most informed health care decisions.⁸

- Millennials have the highest emergency room (ER) utilization, which may mean they're not using lower-cost, more appropriate sites of care when available
- Almost 1 in 10 Millennial men have not had a medical or pharmacy claim in the past 2 years, which may mean they're not getting recommended preventive care or screenings

That's where **advanced analytics** can make a difference: When a member's digital experience includes personalized prompts that encourage “next-best actions,” members may be more likely to make a follow-up appointment, enroll in a health and well-being program or choose a more fitting **site of care**.

Digital optimizations can also be designed to help members find a provider.

“When consumers go out to shop for a car, they typically do more evidence-based research and price comparisons than they do when finding a doctor,” says Dr. Gerald Hautman, chief medical officer for UnitedHealthcare National Accounts.

A digital experience that enables members to see a list of suggested providers based on a member's personal benefits package and preferences can help improve that process.



Compassionate, knowledgeable support

Up to
2-4%

in medical total cost of care savings for employers with enhanced UnitedHealthcare Advocacy¹⁰

A simpler digital experience is critical to providing a better member experience overall, but some health situations may require more hands-on support, especially since the health system can be difficult to navigate.

A recent survey found that all consumers struggled to some degree to understand their benefits or find care⁹—and those struggles can cause employees to either delay care or choose care that may not be appropriate for their conditions. Those challenges may be amplified when employees are dealing with a complex or vulnerable health situation for either themselves or a covered dependent. That's when human interaction is key.

“Our advocacy programs are focused on making sure that we're meeting members where they are, proactively addressing their questions and helping them navigate the health system to make the most of their benefits regardless of how they choose to interact with us,” says Baker.

Advocacy programs may help simplify the experience for employees, especially during times of vulnerability, by offering 1-on-1 support in navigating their benefits and resolving any issues they may be experiencing.

Take, for instance, the case of an employee who has recently visited an ER for a heart issue. When an advocate calls to check up on that individual, they can

also offer recommendations about next steps and may help schedule a follow-up appointment with a cardiologist or a consultation with a behavioral health care provider.

Not only can this help streamline a member's experience during a harrowing health experience, but it may also help them find care for their situation and avoid another costly trip to the ER. Studies showed that 4.5-8% of patients revisit the ER 4 times a year, accounting for 21-28% of all ER visits.¹¹

Plus, employers may see that advocacy efforts yield reduced costs, better health outcomes and more satisfied employees.

“By personalizing the care people receive and demonstrating compassion as they navigate the health care system, employees know that their employers and their health care partners are looking out for them,” says Rebecca Madsen, chief executive officer of Advocacy for UnitedHealthcare Employer & Individual.



Solutions designed for cost clarity and financial support

“When members are able to check and compare costs prior to making an appointment, they may make better choices that may lead to reduced costs for themselves, their families and also potentially their employer.”

Samantha Baker

Chief Consumer Officer
UnitedHealthcare Employer & Individual

The Surest® health plan from UnitedHealthcare, which provides members upfront costs before making an appointment, delivered:¹⁴

↓11% lower costs for mental health, including mood disorders

↓18% lower costs for back pain

↓17% lower costs for diabetes

View the findings from a third-party study, which found that Surest plans experienced \$400+ lower claims costs per member per year, plus improved spend and utilization¹⁴

Health care costs continue to climb, creating tight and sometimes even unsustainable financial situations for employers and employees. A little less than 75% of surveyed adults said they are either “very” or “somewhat” worried about being able to afford unexpected medical bills or the cost of health care services for themselves and their families.¹³

“What we’re hearing from employers is that they are concerned their employees are avoiding care not only because health care is expensive but also because everything in their lives has become expensive,” Hautman says.

Helping members find and choose quality care options that may be more affordable is critical – but empowering them to make more informed decisions requires giving them access to that information and making it easier for them to understand.

“That’s where carriers and health plan designs that provide upfront price information can make a difference,” says Baker.

Employers may also opt to provide employees with the financial support and tools designed to help make care more affordable. For instance, **preloaded debit cards** or **savings accounts** that can be used toward qualified medical expenses, such as a health savings account (HSA), flexible spending account (FSA) or health reimbursement account (HRA), can all help to make out-of-pocket expenses a little less daunting.

But unexpected bills can be more challenging for employees to budget and save for. The reality is illnesses, accidents, hospitalizations and long-term absences or leaves from work are often unpredictable, unplanned and costly.

And, when it comes time to pay for care related to those situations or to support their family while away from work, many employees are left struggling, leading to significant financial stress, which can consequently impact on-the-job productivity. In fact, U.S. employees surveyed admitted to spending upwards of 4 hours a week managing their personal finances during work hours,¹⁵ so it’s no surprise that nearly 60% of employers surveyed have indicated they are concerned that financial stress is affecting their workplace.¹⁶

“Financial stress and economic hardships impact the overall health and well-being of employees. Employers that include financial wellness programs in their health plan demonstrate a commitment to achieving whole-person health,” says Tom Wiffler, chief executive officer for UnitedHealthcare Specialty Benefits.

With 56% of Americans indicating that they would be unable to cover an unexpected bill of \$1,000 or more,¹⁷ it’s important that employers offer their workforce financial support benefits that can help provide relief, as well as programs that can assist members in dealing with unplanned expenses, such as **out-of-network bill resolution management programs**.



Did you know that when employees make more informed, cost-effective decisions, better health outcomes, lower costs and higher satisfaction with the employer’s health plan may follow? [Learn more →](#)

Rewards and incentive programs

“When employers work closely with their account management and clinical teams to look at how benefit design can help drive more activation, that’s where the magic happens — and improved outcomes, a better experience and lower costs can be the result.”

Dr. Rhonda Randall

Chief Medical Officer
UnitedHealthcare Employer & Individual

Ninety-one percent of surveyed consumers expressed interest in health care incentive programs and indicated they would change their health care behavior for as little as a \$25 incentive.¹⁸

Changing health behaviors may make an outside difference. **Chronic diseases** are among the top cost drivers for employees and employers and account for 8 of the top 10 causes of death.¹⁹

The good news is that they may be better managed or even prevented through behavior changes such as eating healthier, staying physically fit, completing health screenings, abstaining from tobacco and limiting alcohol use.²⁰

Still, finding the motivation to develop healthier habits can be challenging — and that’s where rewards and incentive programs come in.

Whether these programs target weight management, smoking cessation or overall healthy living, they can be helpful in adopting and maintaining healthy behaviors and getting employees more engaged in their overall health and well-being. Activation is key to seeing meaningful change.

What does a simpler, more supportive and personalized member experience look like moving forward?



Working to create an easier and more intuitive claims submission experience



Giving members the ability to text with an advocate



Recommending providers matched to members’ unique preferences



Welcoming new and returning members with tips to help them prepare for their new plan year



Enabling members to give caregivers access to their account to help manage their care



Did you know that healthy habits can make a big difference in employees’ overall well-being?
[Learn more about wellness programs and solutions at UnitedHealthcare →](#)

Learn more

Contact your broker, consultant or UnitedHealthcare representative or visit uhc.com/broker-consultant and uhc.com/employer

United Healthcare

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- ⁷ Based on 2023 UnitedHealthcare Book of Business Employees by Generation and Industry.
- ⁸ Claims incurred between January 1, 2022 to December 31, 2023, and paid through January 31, 2024. Members continuously enrolled January 1, 2022 to December 31, 2023. Percentage of members with no medical claims based on the members with only medical coverage. Percentage of members with no medical or pharmacy claims based on the members with both medical and pharmacy coverage.
- ⁹ Driving growth through consumer centricity in healthcare. McKinsey & Company, March 14, 2023. Available: <https://www.mckinsey.com/industries/healthcare/our-insights/driving-growth-through-consumer-centricity-in-healthcare>.
- ¹⁰ 2019-2020 UHC employer study including 387 clients, 4.8M members and \$19.2B in medical spend. 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). Actual client results may vary based on specific clinical programs the client has or maturity of implementation.
- ¹¹ Characteristics of Frequent Users of Three Hospital Emergency Departments. Agency for Healthcare Research and Quality, July 2017. Available: <https://www.ahrq.gov/patient-safety/settings/emergency-dept/frequent-use.html>. Accessed: June 11, 2024.
- ¹² UnitedHealthcare Services, performance reporting, 2023. Results not guaranteed.
- ¹³ Americans' Challenges with Health Care Costs. KFF, March 1, 2024. Available: <https://www.kff.org/health-costs/issue-brief/americans-challenges-with-health-care-costs/>.
- ¹⁴ Aon's actuarial analysis compared a cohort of Surest members (derived from Surest's 2021 and 2022 self-funded and fully insured book of business with complete medical and pharmacy data, plus three months of run-out, and who were not excluded by certain normalizing eligibility and experience restrictions) against a control group (derived from a multi-employer database with matching demographics, geographics, diagnoses, and health comorbidities for the same time period), and utilized Aon's member-level Cost Efficiency Measurement (CEM) methods. Claim reduction figures apply to the 2022 plan year.
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- ¹⁸ New Research Reveals What Health Plan Members Think About Shopping Incentive Programs. Kyruus Health, March 17, 2020. Available: <https://kyruushealth.com/new-research-what-health-plan-members-think-about-shopping-incentive-programs/>. Accessed: April 30, 2024.
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The UnitedHealthcare plan with Health Savings Account (HSA) is a qualifying high deductible health plan (HDHP) that is designed to comply with IRS requirements so eligible enrollees may open a Health Savings Account (HSA) with a bank of their choice or through Optum Bank, Member FDIC. The HSA refers only and specifically to the Health Savings Account that is provided in conjunction with a particular bank, such as Optum Bank, and not to the associated HDHP.

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