

The next frontier in group health insurance plan designs

In today's economic environment, carriers and employers are exploring health plan designs that aim to reduce costs and provide a better employee experience.

To understand where health plan designs are headed in the future, it's important to look back.

Employer health care costs aren't slowing – with experts projecting that costs will rise up to 8% throughout 2025.¹

Costs aren't the only thing that has trended up. Expectations around health care have too. About 2 out of 3 employers and employees rank employer-sponsored health insurance as the most important benefit,² but they want those benefits characterized by affordability, quality, transparency and ease.³

That means delivering easier-to-navigate health care through a consumer-centric digital experience. It also means providing personalized advocacy services when and where they're needed.

That's why many employers are reevaluating their health plan strategy.

In fact, about two-thirds of surveyed employers indicated they are looking to switch carriers over the next few years to find health plans that both reduce costs and improve member experience.³ Old strategies such as passing costs onto employees through high deductible health plans (HDHPs), removing specialty benefits or reducing health plan options may not work anymore.

To achieve this balancing act, employers may see more health plan options that are designed to offer:

- More choice with reduced financial responsibility for members
- Broader access to quality care that's more affordable and convenient
- Upfront pricing for health care services
- Simpler digital experiences

"The drivers of emerging plan design will certainly be about finding a balance between consumerfriendly plan designs and plans that help employers manage their costs."

Craig Kurtzweil

Chief Data & Analytics Officer UnitedHealthcare Employer & Individual



Health plans are arranged along a continuum, ranging from plans with broad open access to those with more focused access. Within that spectrum, there are 3 overarching trends, which include plans that:

- Offer more coverage and lower upfront costs
- Provide greater visibility into cost and quality
- Tailor coverage to specific employee populations

Broad access

Focused access

Broad open access Employees have direct access to any network provider				Open access			Broad with ACO	Provider aligned
				Employees have direct access to many providers in a slightly scaled down network			Integrates value-based ACO contracts with value-based employee benefits	e e e e e e e e e e e e e e e e e e e
Options PPO	Choice and Choice Plus	Surest [®]	Select and Select Plus	Core and Core Essential	UnitedHealthcare Navigate® (May be broad in select markets)	UnitedHealthcare Charter®	NexusACO [®]	Doctors Plan

Offering more coverage and lower upfront costs

Employers are concerned about the way inflation is affecting their employees' finances. Perhaps this is why 83% of surveyed employers plan to implement at least one of the following strategies to improve plan affordability for their employees in 2025:⁴

- Design pharmacy benefits to improve affordability, such as preventive medications and non-preventive generics for \$0
- Offer a health plan with lower deductibles or coinsurance
- Implement wage-based cost-sharing with lower premiums, deductibles or out-of-pocket limits

UnitedHealthcare is working to support large self-funded employers in that goal by offering the groundbreaking Vital Medication Program. This program offers eligible members \$0 drugs like epinephrine for allergic reactions, naloxone for opioid overuse and albuterol for asthma, to help ensure that employees and covered family members have access to the drugs they need. Plan designs that offer \$0 copays for designated services or that are void of deductibles or coinsurance may help employees feel like they are getting more out of their health plan. The **Surest® health plan** from UnitedHealthcare fits the bill. As a copay-only plan, Surest is designed to help reduce some of the confusion many members have around deductibles and coinsurance. As a result, members can feel more confident about what their care will actually cost, because they don't have to factor in those other cost elements.



Providing greater visibility into cost and quality

About 9 in 10 Americans lack the health literacy necessary to navigate the health care system.⁵ To reduce confusion and frustration, it's critical to give employees more insight into the cost of care. When lower costs are aligned with quality providers, members may make more informed decisions around their health care.

For instance, UnitedHealthcare uses standardized quality care criteria for effectiveness and efficiency to help members make more informed choices for their medical care. Whether they're searching for the costs of a certain provider or care setting, members can find the information they need via the **UnitedHealthcare® app** or **myuhc.com**[®].

"Consumers want their health care experience to match their other retail experiences – easy to navigate, transparent pricing, easy-to-access reviews, secure purchasing and quick delivery," says Samantha Baker, chief consumer officer for UnitedHealthcare Employer & Individual. "During a time where costs are rising everywhere and there are many options, UnitedHealthcare is focused on delivering transparency, choice and value to consumers."

The Surest plan also enables members to check costs before making an appointment, giving them more visibility into and control over their health care experience and their costs, which has garnered:

- 54% lower average out-of-pocket costs⁶
- Up to 15% lower employer costs on average⁶
- Claims costs that are more than \$400 lower per member per year, according to a third-party study⁷

Those savings are perhaps why 1 in 4 large employers with UnitedHealthcare will offer Surest in 2025,⁸ while 55% are considering copay-only plans like Surest for the future.⁹



lower average out-of-pocket costs for Surest members⁶

Up to 15%

lower employer costs on average with Surest⁶



"Innovating the way health plans are designed has the potential to better serve employers and employees, and UnitedHealthcare is well positioned to bring different players across the health system together to bring those solutions to market."



Kelley Nolan-Maccione

Chief Product Officer UnitedHealthcare Employer & Individual

Tailoring coverage to specific employee populations

Because health needs vary greatly from community to community, employers may find it difficult to select a plan design that meets the needs of their entire employee population. As a result, UnitedHealthcare is looking at communities or pockets across the country that may be experiencing worse health outcomes, higher costs or more barriers to care than others, and designing health plans that aim to help specific populations.

To help manage high costs in Colorado and offer a better member experience, UnitedHealthcare teamed up with 2 major health systems to build a new health plan called SelectColorado. This health plan is designed to give members better access to quality network providers across 14 counties, with \$0 copays for 24/7 Virtual Visits, primary care office visits, urgent care visits and behavioral health visits.

Health plans like these exist across the country. In fact, in many cases, carriers pilot different health plan designs within specific markets to determine whether it has the potential to be effective for a broader population. At UnitedHealthcare, examples of this include:

- UnitedHealthcare Charter plans offered in Chicago, Houston and Dallas – requiring members to select a primary care provider (PCP) to coordinate their care
- NexusACO plans offered in Chicago, Louisiana, Oregon, Texas, Virginia and Washington – integrating contracts with Accountable Care Organizations (ACOs) dedicated to higher-quality care and lower costs and value-based employee benefits without requiring them to go through a PCP
- Doctors Plan offered in Arizona, Colorado, Northern California and Washington – integrating contracts with ACOs dedicated to higher-quality care and lower costs within a focused network

"My colleagues and I often discuss how our regions approach health care in different ways. Yes, there are many common denominators, but it's the differences that we aim to address within our overall overarching framework. Those differences could be influenced by cultural diversity, economic factors or even access to care," explains Seung Baick, vice president of product for UnitedHealthcare Employer & Individual.

Learn how UnitedHealthcare is transforming the future of health care

United Healthcare

¹ Medical cost trend: Behind the numbers 2025. PricewaterhouseCoopers. Available: https://www.pwc.com/us/en/industries/health-industries/library/behind-the-numbers.html.

- ² Best Employee Benefits in 2024. Forbes Advisor, Oct. 30, 2024. Available: https://www.forbes.com/advisor/business/best-employee-benefits/.
- ³ The State of Workplace Health. OneMedical, 2024. Available: https://go.onemedical.com/report-the-annual-state-of-workplace-health-24.
- 4 2025 Employer Health Care Strategy Survey, Business Group on Health, August 2024.
- ⁵ An Introduction to Health Literacy. National Library of Medicine, Aug. 2, 2024. Available: https://www.nnlm.gov/guides/intro-health-literacy.
- ⁶ Surest self-funded 2022 book of business plan sponsors with at least 12 months of incurred experience in 2022 and both medical and pharmacy data within our warehouse; compared to matched comparison groups from a nationally representative commercially insured database matched by gender, age, urbanicity, and zip3 code using exact matching. 141_V03.
- ⁷ 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.
- 8 2025 UHC National Account Client Strategy Documentation Project, Preliminary Data.
- 9 UHC National Accounts Salesforce tool, 2024.

24/7 Virtual Visits is a service available with a Designated Virtual Network Provider via video, or audio-only where permitted under state law. Unless otherwise required, benefits are available only when services are delivered through a Designated Virtual Network Provider. 24/7 Virtual Visits are not intended to address emergency or life-threatening medical conditions and should not be used in those circumstances. Services may not be available at all times, or in all locations, or for all members. Check your benefit plan to determine if these services are available.

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.

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