

# The future of health care is here.

Have you ever visited a restaurant that had certain menu items listed as “market price”? How did that impact your decision of what to order? Did you avoid ordering what might have been your first preference?

If you did order a “market priced” item, what sense of stress or anxiety did you feel not knowing what your total bill would be at the end of the meal?

Why do we have the same pricing structure within health care? Too often, we receive health care services without a clear understanding of costs. Uncertainty, anxiety, and stress are all part of a broken system that has, unfortunately, become standard in the health care experience.

## Addressing health care’s biggest challenges.



**In a 2021 survey, 70% of respondents**

said — after receiving health care treatment, test, or procedure — they were unsure what it was going to cost.<sup>1</sup>



**In that same survey, nearly 65% of respondents**

said they weren’t sure how much of the cost would be covered by their health insurance.<sup>2</sup>



**Because of this fear of unknown costs,**

more than half of all respondents said they skipped or delayed care. This is especially concerning given nearly half of Americans are managing at least one chronic condition.<sup>3</sup>

But what happens if you address the root causes of these roadblocks? What happens if you design a health plan that eliminates “market pricing” and instead gives members information to make informed decisions? A health plan that eliminates deductibles, eliminates confusion, and gives members the opportunity to check prices and compare options before receiving the bill? And even better, what happens if members make decisions based on quality and value rather than what’s simply available?

You get the Surest health plan. You get engaged consumers. And you get results.

**When members can check prices and compare options — with doctors evaluated as high-value typically priced lower — they’re more likely to shop and choose differently.**

## Savings for employers, without cost-shifting:

**11%**

**lower** total cost per member, per month.<sup>4</sup>

**5%**

Year-over-year medical trend was **less than 5%** sustained across 3 years.<sup>5</sup>

Surest builds trust — no more “market pricing” — and creates engaged consumers who become empowered consumers; consumers who are helping redefine what the health care experience can, and should, be.

**Members’ annual out-of-pocket costs are 54% lower than the national average.<sup>7</sup>**

**More members scheduled preventive visits — and less surgeries.**

**34%**

**increase** in preventive colonoscopies.<sup>8</sup>

**15%**

**increase** in preventive mammograms.<sup>9</sup>

**9%**

**increase** in preventive physical exams.<sup>10</sup>

**5%**

**reduction** in overall surgeries.<sup>11</sup>

A benefit plan that aligns cost and value, and allows members an easy way to access information to make decisions on their care, is a win-win for employees AND employers.

1,2. “Healthcare Affordability: Results from a national survey,” Conducted for the Robert Wood Johnson Foundation. 2021.  
3. Chronic Diseases in America. Centers for Disease Control and Prevention. 2022.  
4. Combination of modeled and actual results across Surest prospects and clients; independently developed benchmark based on a database containing health care claims from 80 million U.S. lives risk-adjusted for demographics, geography, and disease burden. 13\_V02.  
5. Surest book of business 2019 – 2022 (medical only). 159\_V02.  
6. Surest 2022 book of business plan sponsors with both medical and pharmacy data within our warehouse; industry 2022 commercial benchmarks and risk adjustment methodology. Risk adjusted for demographics, geography, and disease burden. 56\_V04.  
7. Surest 2022 book of business.  
8, 9, 10. Comparison of members identified as having 12 months enrollment in a UHC plan in 2021, and 12 months enrollment in a Surest plan in 2022. 167\_V01.  
11. Surest 2022 book of business; Independently developed 2022 benchmark based on a database containing healthcare claims from 80 million U.S. lives risk adjusted for demographics, geography, and disease burden.  
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