



# Leading the way to less wasteful spending



UnitedHealthcare payment integrity approach drives a greater financial value over its competitors<sup>1</sup>

Total health care spending in the U.S. is expected to rise from \$4.3T in 2021<sup>2</sup> to \$6.8T by 2030.<sup>3</sup> And approximately 25% of that spending is considered wasteful.<sup>4</sup>

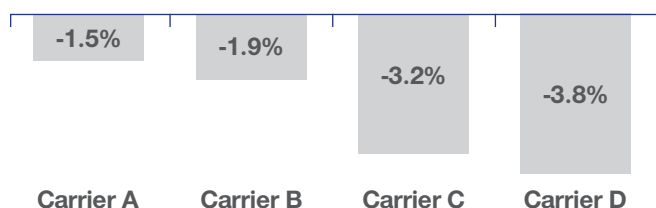
On the front lines of claims management, carriers like UnitedHealthcare are uniquely positioned to take on wasteful spending with payment integrity programs designed to ensure a health claim is paid by the responsible party according to contractual terms and policy—minimizing errors, duplication, fraud and abuse.

## Recognized for driving the highest savings

To measure the effectiveness of different payment integrity programs, in 2022, UnitedHealthcare commissioned ZS Associates—a third-party consulting firm—to survey providers and carriers.

ZS Associates found that UnitedHealthcare payment integrity solutions drive 1.5% to 3.8% higher total cost of care savings than other top national health insurance carriers. Another conclusion from the survey was that providers do consider payment integrity when contracting with payers, with 85% indicating they would be willing to offer a higher discount, or a reduction in their contracted rates, in exchange for a more flexible approach to payment integrity.<sup>1</sup>

Competitors' total cost of care savings from payment integrity solutions relative to UnitedHealthcare<sup>5</sup>



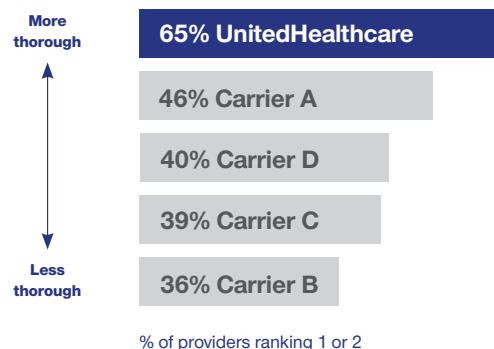
## An end-to-end approach

Fully integrated with Optum, UnitedHealthcare payment integrity solutions span all stages of a claim's lifecycle—from before a claim is even made to recovery of a claim that was incorrectly paid—encompassing:

- Provider education
- Prior authorizations and coordination of benefits verification
- Integration of health benefits information into a member's medical record
- Suspicious claim identification using algorithmic pattern combinations and AI
- Manual reviews designed to catch inaccuracies
- Resolution of overpaid or inaccurate claims and the recovery of benefits paid when a third party should have been responsible

According to this research, UnitedHealthcare takes the most thorough approach to payment integrity compared to other major health insurance carriers.

Ranking of carrier payment integrity by thoroughness<sup>6</sup>





## About the study

This Q4 2022 study was conducted by ZS Associates to identify the thoroughness of different carriers' payment integrity programs, estimate the high-level revenue impact, understand relative strengths and weaknesses and gather provider perspectives.

**“UnitedHealthcare is very focused on solving the root cause of why a claim hasn't paid correctly.”**

**– National Health System**

**Learn more**

Contact your broker, consultant or UnitedHealthcare representative

<sup>1</sup> Affordability Program Landscape: Payment Integrity Study, ZS Associates, Dec. 2022.

<sup>2</sup> Centers for Medicare & Medicaid Services. National Health Expenditure Projections 2021–2030. April 27, 2022. Available: <https://www.cms.gov/files/document/nhe-projections-forecast-summary.pdf>. Accessed: Nov. 1, 2022.

<sup>3</sup> UnitedHealth Group sustainability report, 2021.

<sup>4</sup> Shrank WH, et al. Waste in the U.S. Health Care System: Estimated Costs and Potential Savings. JAMA. 2019.

<sup>5</sup> Survey Question: Overall, what is the write-off percentage of billed charges that each of the following health plans receive due to their Payment integrity programs? Affordability Program Landscape: Payment Integrity Study, ZS Associates, Dec. 2022.

<sup>6</sup> Survey Question: Please rank the following health plans' payment integrity solutions across each stage of the claims submission & payment review process based on total volume of denials raised in each phase, with '1' being the highest volume of denials. Affordability Program Landscape: Payment Integrity Study, ZS Associates, Dec. 2022.

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