

MYTHS

VS

FACTS

THE TRUTH ABOUT SUREST:

Debunking myths with facts.

Your clients and employees count on you to separate fact from fiction when it comes to health plan options. With Surest, there may be a few misconceptions that can cloud the conversation. This quick myth-vs-fact guide is designed to help you confidently address concerns, highlight the plan's value, and support informed decision-making for clients and employees.



MYTH FACT

The Surest health plan is only for the young and healthy.

The plan demonstrates savings across ages, conditions, and comorbidities with **5–10% lower** total cost of care across all Surest age groups.¹ The average age of our members is 42.6.²

1. Aon's Cost Efficiency Measurement of Surest 2021–2022, March 2024. Results from 2022 only.
2. Surest 2022 book of business results. 124_V03.

5–10% total cost of care across all Surest age groups.¹

MYTH FACT

Surest is just a point solution.

Surest is a comprehensive medical health plan—not an add-on or niche plan. It provides access to the large, national network of UnitedHealthcare and Optum Behavioral Health providers and a host of virtual care options.

MYTH FACT

Surest isn't good for rural areas.

Surest offers more options—not fewer. Members can access low- or no-cost virtual care and compare prices for nearby in-network providers. **72%** of rural members use the app to find care¹, and **98%** of Surest members are within 10 miles of a low-cost primary care doctor.²

1. 2024 Surest Book of Business rural shopping and engagement analysis.
2. Surest analysis of member access to providers across the book of business, based on 2022 provider pricing.

72% of rural members use the app to find care¹

MYTH FACT

Surest is only for the tech savvy, it won't work for employees who aren't comfortable with technology.

The app is simple and familiar—like shopping online. 98% of Americans own a cell phone,¹ and **78%** of Surest members register after enrolling.²

1. <https://www.pewresearch.org/internet/fact-sheet/mobile/>
2. Surest 2022 book of business results. 22_V04, 133_V03.

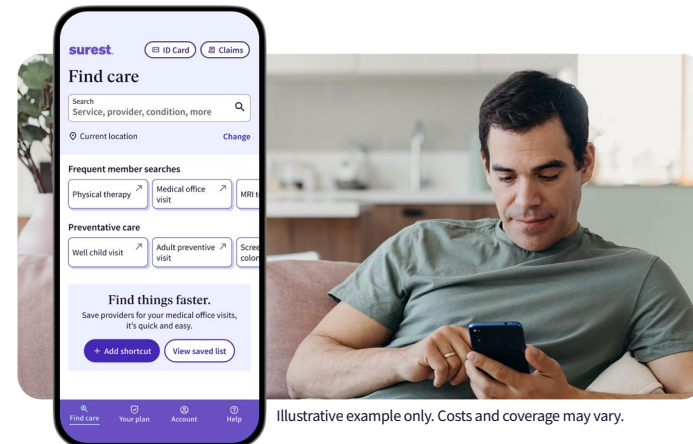
78% of Surest members register after enrolling.¹

MYTH FACT

A health plan can't really change behavior long-term.

Surest members are **57% more likely** to choose high-value providers¹ when they shop and compare care options, often leading to better outcomes and lower costs. Surest members chose high-value providers 17% more compared to traditional plans.²

1. Surest 2024 Book of Business, YTD.
2. Study comparing Surest financial and utilization outcomes to a matched control group composed of non-Surest members from the same employers, using the same network. Members were matched on age, gender, geography, and chronic conditions.



Illustrative example only. Costs and coverage may vary.

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FACT

Surest must be affordable because of a limited provider network.

We utilize the national UnitedHealthcare Choice Plus network, one of the largest in the U.S., with **1.7 million providers** and 5,000+ hospitals.¹

1. UnitedHealthcare Employer and Individual network statistics, ending Q3 2024.

MYTH

FACT

Surest is just a flashy trend, it doesn't have staying power.

As of May of 2025, there were nearly **one million members** with the Surest plan. It has consistently maintained a year-over-year medical trend of less than 5% for four consecutive years, demonstrating its reliability and effectiveness in managing health care costs.¹

1. The Surest book of business demographic adjusted compound annual growth rate from 2019 to 2023 was 4.6%.

MYTH

FACT

Surest is too complicated to explain and understand. Employees won't "get" it.

Employees likely don't understand the plan they're on now. Surest is designed to be simple and straightforward using an e-commerce-like experience. With the Surest app, members can shop for care, compare options, and choose care that fits their health need, lifestyle, and budget. In fact, **79% of Surest members** said they "understand" or "really understand" their plan.¹

1. The proportion of Surest members enrolled in 2022 who re-enrolled in 2023 with January 1 plan year start dates.

79% of Surest members said they "understand" or "really understand" their plan.¹

	Peter Thorpe, MD Dermatology	\$20	View
	Stacy Jensen, MD Dermatology	\$25	View
	Jesse Nelson, MD Dermatology	\$45	View



Illustrative example only. Costs and coverage may vary.

MYTH

FACT

It's too risky and too much work to change health plans.

Most people don't like change, but status quo doesn't always mean it's right. Surest members **saved, on average, 44%** on their out-of-pocket costs¹—a powerful reason to take a closer look.

1. 2024 Surest ASO financials matched control study vs traditional plans.

44% Surest members saved, on average, 44% on their out-of-pocket costs¹

MYTH

FACT

Employees will miss their health savings account (HSA), which is part of a high-deductible health plan.

High deductibles can actually discourage care because of higher out-of-pocket responsibility. In fact, approximately 50 percent of adults are worried about affording their deductible.¹ Surest has **no deductible and provides actual copays** (not estimates), helping members use their dollars wisely today.

1. "Americans' Challenges with Health Care Costs," Kaiser Family Foundation, December 2023.

Self-Funded: Administrative services provided by United HealthCare Services, Inc. or its affiliates.

Fully Insured: Insurance coverage provided by UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or its affiliates.

Level-Funded: Administrative services provided by United HealthCare Services, Inc. or its affiliates, including United HealthCare Service LLC in NY. Stop-loss insurance underwritten by UnitedHealthcare Insurance Company or its affiliates, including UnitedHealthcare Life Insurance Company in NJ, and UnitedHealthcare Insurance Company of New York in NY.

All Fully Insured Plans in California: If medically appropriate care from a qualified provider cannot be provided within the Network, we will arrange for the required care with an available and accessible out-of-Network provider. You will only be responsible for paying the cost sharing in an amount equal to the cost sharing you would have otherwise paid for that service or a similar service if you had received the Covered Health Care Service from a Network provider.

Surest Fully Insured Plans in California: A complete Network and timely access to care may only be available by obtaining treatment through providers available at the maximum Copayment shown for each service at the lowest cost-sharing tier. While some network providers are available at lower Copayments (reduced cost-sharing rates), there is no guarantee of a complete Network or timely access to care at any specific reduced cost-sharing rate.

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