

NEWS RELEASE

New National Survey by Curative Reveals Astonishing Failures of Traditional Employer-Sponsored Health Insurance Plans

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On average, out-of-pocket expenses are unaffordable for about one out of three insured Americans

Lack of understanding and inability to navigate coverage leads to delayed care, increased absenteeism due to health-related issues, and heightened anxiety

AUSTIN, Texas--(BUSINESS WIRE)-- **Curative Insurance Company** recently unveiled the findings of a nationwide survey involving 2,500 Americans who are enrolled in employer-sponsored insurance plans*. The findings highlight a concerning fact that a significant number of employed and insured Americans are not utilizing their health benefits due to worries about affordability. When forced to seek medical care, many are then burdened with overwhelming medical debt caused by deductibles, copays, and co-insurance. These concerns are even more pronounced for employees enrolled in high-deductible health plans. Overall, these data underscore a health crisis for working Americans whose traditional, employer-sponsored plans fail to provide fundamental healthcare coverage. The findings also highlight how employers are not receiving value for their ever-increasing premium payments. As a result, most employees are left with only catastrophic coverage, leading to delayed or avoided care, increased absenteeism and lower productivity due to health-related issues and a staggering rise in medical debt.

The primary aim of this survey was to gain insights into the challenges individuals face with traditional health insurance plans. The focus of the research, conducted in collaboration with **The Health Analytics and Insights Group**, was to understand the impact of out-of-pocket (OOP) costs (including deductibles, copays, and co-insurance) on the overall health and well-being of those covered and how those costs impact healthcare utilization and behaviors overall.

The survey results of only individuals with employer-provided health insurance found that:

- Four in 10 working insured find their OOP costs so expensive they're dipping into their savings or taking on personal debt at staggering rates.
- 35% have deferred seeking medical care within the past year due to concerns about their ability to cover the associated costs, while,
- 50% of those with high deductible health plans reported instances in just the past three months where they needed healthcare but didn't receive it due to cost.
- 31% of respondents said they have some form of outstanding debt from their medical expenses (money that they owed for health care services they could not afford at the time), with 46% experiencing debt if their deductible is greater than \$1,000.
- 44% report their personal health has impacted their work performance; that statistic jumps to 65% for those in high deductible health plans.

This lack of affordability results in notable financial stress and increased health issues as employees forgo needed medical care. In addition, the findings highlight the difficulty respondents have in understanding their benefits, what is covered, and anticipating their OOP costs, resulting in deferred or avoided care.

Additional results:

- 46% report having trouble anticipating what they will pay for healthcare services, often leading to delayed or avoided care.
- 42% have skipped their preventive health services, including yearly check-ups, routine medical tests, and treatments because they were concerned about the OOP cost.
- 42% also did not take their medications as directed due to concerns over OOP costs.
- 53% of respondents said the main reason it is difficult to afford their healthcare OOP expenses is because their deductible is too high.
- Notably, Hispanic Americans (63%) and members of the LGBTQ+ community (69%) are more likely to have avoided seeking medical care because it poses a financial burden.

"The results from our recent survey reveal that both employers and employees are not getting the value they deserve from their current health insurance plans. With the Curative health plan, members can confidently access their benefits whenever they need care, without financial stress or worry," said Fred Turner, CEO and co-founder of Curative. "With \$0 copays, \$0 deductibles, and \$0 drug options for nearly every condition**, Curative's health insurance offers a plan that our members can trust and rely upon at any time. Our approach makes more sense and saves everyone money in the long run. Members get care when they need it, preventing smaller problems from

turning into bigger, more costly health issues down the road."

Curative's unique \$0 copay, \$0 deductible plan** is a progressive solution to traditional health plans and gives members affordable access to high-quality health care. With the enhanced access to care and dedicated support of Curative's clinical and service teams, patients have already begun to report better health outcomes, resulting in a reduction in associated costs. The Curative plan is now available to large employers with 51 or more employees headquartered in select regions*** of Texas and across Florida. These companies can provide this innovative coverage to all of their employees nationwide, offering access to almost one million providers in all 50 states and providing comprehensive coverage for their workforce. With its innovative health insurance plan launched this past year, Curative is solidifying its position as a leader in transforming the healthcare landscape.

The Curative health plan offers comprehensive coverage, encompassing wellness, preventive care, behavioral health services, primary and specialty care, office and hospital visits, prescription drugs, and telemedicine, all accessible through a high-quality PPO network. To continue to qualify for the extensive list of benefits without OOP costs, members simply need to complete a baseline visit within 120 days of the plan's effective date, granting them \$0 copays and \$0 deductibles for all in-network healthcare services.

To **download a report on the survey** or learn more about Curative's revolutionary health insurance plan and how it can benefit employers and employees alike, visit <https://curative.com/>.

*To ensure the representation of key demographic variables, quotas were applied when selecting the sample, and the final data was weighted using the latest Census data through a post-stratification, RIM weighting methodology across demographic variables. The sample included 2,500 insured adults aged 18 years and above residing in major urban areas across the United States MSA who voluntarily participated in the survey.

**Every Curative member qualifies for the \$0 deductible, \$0 copay for in-network care and preferred prescriptions by completing a Baseline Visit within 120 days of the plan effective date. See <https://curative.com> to learn more. Curative Insurance Company PPO.

***Companies in Texas are available for fully insured coverage with 51 or more employees in 34 counties, including the Austin, Dallas, El Paso, Houston & San Antonio regions. Level-funded coverage is available in all Texas counties.

About Curative

Curative is a leading healthcare services company that has created and launched a first-of-its-kind employer-based health insurance plan with an AM-Best rating of A-. Co-founded by CEO Fred Turner and CTO Isaac Turner (no relation) in 2020, Curative is reengineering health insurance by providing unmatched simplicity and cost

transparency with a competitive monthly premium and zero additional costs**. Curative is remaking our healthcare system into one that works for and supports members' whole health and well-being through every step of their personal health journey. Previously, Curative and its managed medical entities were national leaders bringing COVID-19 testing and vaccine-administration resources to bear in response to the pandemic. For more information on Curative, visit <https://curative.com/> or follow us on **Facebook**, **Instagram**, **Twitter**, or **LinkedIn**.

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Source: Curative Insurance Company