

THE PROBLEM

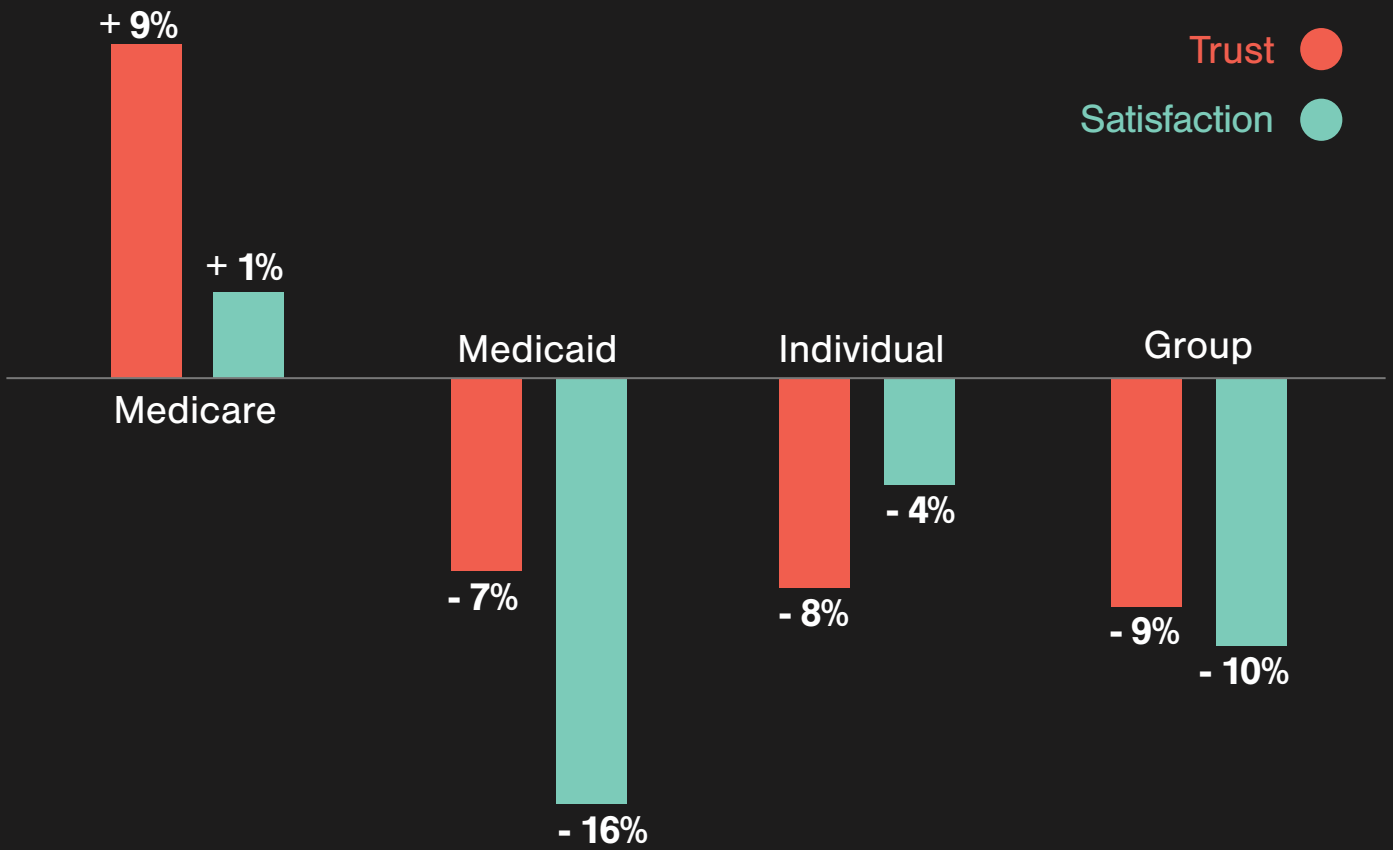
Health plans function as a means for individuals and families to gain affordable access to the doctors, hospitals, medicines and healing tools they desire/need to keep themselves healthy. Unfortunately, beyond the initial membership process (which can be confusing and frustrating itself), many significant interactions between members and insurers involves a process that actually keeps them from their healthcare. There is nothing more frustrating than paying money to access providers and care only to be kept from it. This explains

why health insurance is for many a negative interest service which frustrates and confounds even those in the healthcare industry.

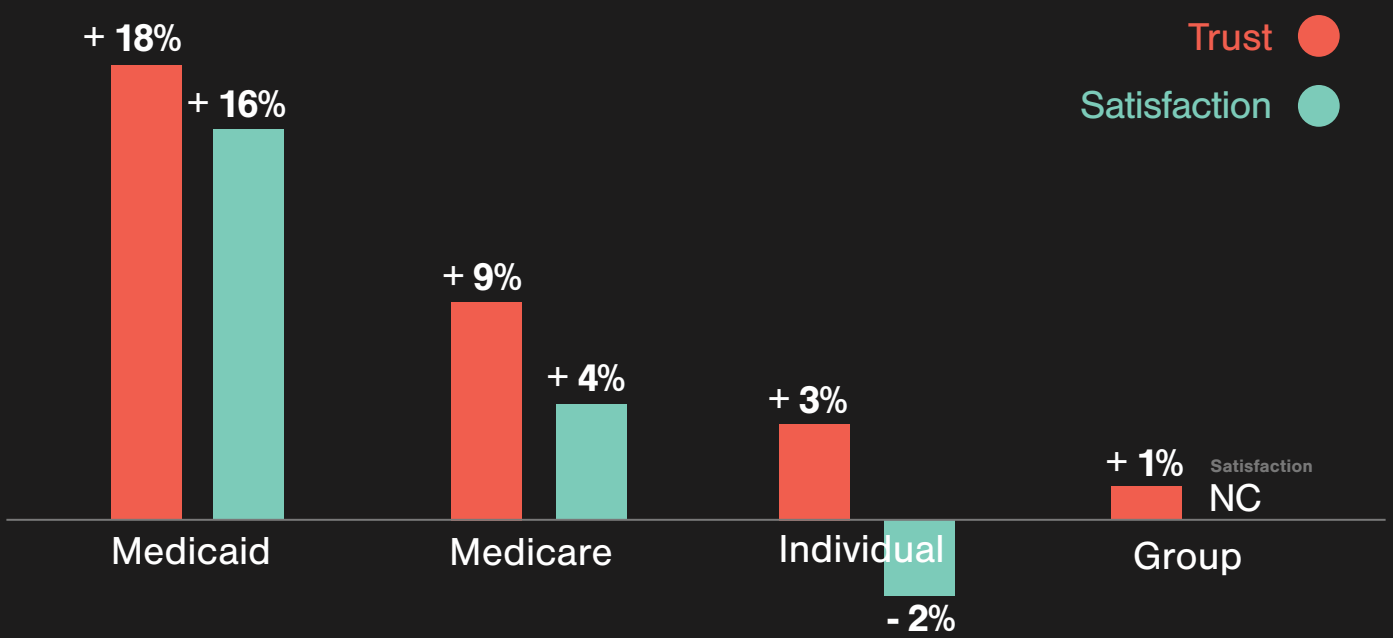
THE FACTS

Net satisfaction and trust for insurance companies has declined for all groups except Medicare. This growing contextual mistrust is a critical variable that insurers need to address.

Trending Sentiment in Health Insurance Companies



Trending Sentiment in My Health Plan



THE SOLVE

Health plan consumers are craving honesty, responsibility and helpfulness from their health insurance companies and building provider-sponsored plans that focus on these or related core human values is a competitive advantage that can pull share from national and regional competitors.

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