DELIVERING AFFORDABLE HEALTH BENEFITS

Health coverage every employer can *actually* afford.

Zuniga Health builds level-funded benefits for employers with as few as 25 employees — a full suite of MEC, MVP, PPO, and HDHP plans, backed by national and regional provider networks in all 50 states, at premiums that typically run 15–20% below fully insured carriers.

15–20%	50	25–2,000+	9 hrs
Lower premiums than fully insured carriers	States covered, coast to coast	Employees per group, any size business	Saved weekly on HR benefits tasks by our AI tool

Four plans. One ladder to the right fit.

Coverage climbs from ACA-compliant essentials to comprehensive, HSA-ready protection — employers pick where their employees live, and multiple plan options can be used by the same employer group.

MEC

Minimum Essential Coverage

The compliance foundation

- ACA-required essential health coverage
- Preventive care & wellness screenings at no added cost
- Addresses Employer Shared Responsibility Penalty A

MVP

Minimum Value Plan

Real protection, real events

- Covers 60%+ of expected costs for a standard population
- Extends to hospital & physician services
- Addresses Employer Shared Responsibility Penalty B

PPO

Preferred Provider Organization

Choice-driven, no surprises

- Bronze, Silver & Gold tiers via Advocate Health Care, national and regional providers in all 50 states
- Zero balance-billing risk for employees

HDHP

High-Deductible Health Plan

Lean premiums, HSA-ready

- 7 HDHP plan options
- Pairs with HSA savings for cost-conscious groups
- Lower monthly cost, predictable structure

SIGNATURE MODEL

Pay-per-need, not one-size-fits-all

Instead of forcing every employee into the same plan, Zuniga's level-funded design lets each person choose the doctor and lab visits they realistically expect to use each year — and pay accordingly.

- **A healthy 28-year-old** who visits twice a year stops subsidizing a plan built for monthly care.
- **An employee managing a chronic condition** selects an allowance that matches their real needs.
- **Employers** get predictable, level-funded costs — with savings back if claims run lower than projected.

FEATURED PARTNERSHIP

Exclusive partnership with Advocate Health Care

Part of Advocate Health — the 3rd largest nonprofit integrated health system in the U.S. Together, we co-developed 3 PPO plans and 7 HDHP level-funded medical plans, giving employees access to one of the largest primary and specialty networks in metro Chicago.

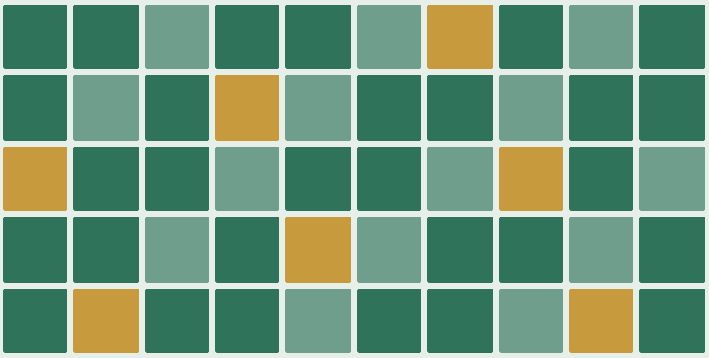
3 PPO Plans
Bronze, Silver, Gold — via Advocate Health Care

7 HDHP Plans
Co-developed medical benefit options

Telehealth Included
Urgent care, primary care & select specialties

Coverage that travels with your team.

National and regional provider networks reach into all 50 states, so employees can find in-network care wherever they live, work, or travel.



50 STATES · NATIONAL + REGIONAL NETWORKS

Built for multi-state employers

Whether a client has one office or a workforce spread across the country, Zuniga Health plans draw on national carrier networks layered with strong regional coverage — including hundreds of Advocate Health Care providers in the Chicago area.

Hospitals · Primary Care · Specialists · Ancillary Services · Telehealth

AI

An AI benefits assistant, on call for every employee

Employees get instant, accurate answers about benefits, providers, copays, and coverage — no waiting on hold, no guesswork. It's built into every Zuniga Health plan.

9 hrs
saved per week on benefits-related HR tasks, on average

Why employers and brokers choose Zuniga

Zero Balance-Billing Risk

A clean PPO experience

No surprise bills for employees, and none of the reference-based-pricing headaches that damage broker relationships.

Money-Back Design

Rebates return to the employer

PBM rebates flow into the client's claim account, and 100% of any balance remaining at contract end belongs to the employer.

Bilingual, High-Touch Service

Real human support

A dedicated customer service team supports employees in the language they prefer, backed by the AI assistant for instant answers.

Stronger Renewal Position

A better story than a premium hike

Brokers walk into renewal with a refund-check story and real cost-trend data instead of defending 30–40% premium increases.

100%

That's the value of level-funded. Premiums are set and predictable month to month, but unlike a fully insured plan, employers see the upside when claims come in lower than projected — and 100% of any leftover balance at contract end belongs to the employer, not the carrier.

FOR MORE INFORMATION, CALL
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Let's talk.

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