Important news and updates from your benefits professionals

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This Issue

Health Benefits Provide Value

Studies reveal the value of employer sponsored health plans.

Vaccine Mandates

As if a worker shortage wasn't enough.

We Are What We Eat

Home cooking can make you healthier.

Level Funding

One option keeping small businesses competitive.

Trends, News, Updates and More Inside!

Quality Health Benefits Can Be Affordable



Last Fall, COVID-19 was weighing so heavily on our minds that simply keeping health benefits available during the Pandemic was the top priority. Today, with many people needing medical care they may have postponed and pressure to maintain sufficient staffing, keeping your health plan both effective and affordable is a must.

The fact is that after a year unlike any other, your organization needs to huddle with its broker/advisor and TPA to do all it can to fight back against rising healthcare costs. Remember that your organization transitioned to self-funding to take control of rising costs and gain the flexibility needed to compete successfully in a rapidly changing world. So, with 2022 right around the corner, let's revisit a few steps that could keep your organization on the path to high quality, affordable healthcare.

Question Everything – For self-funded employer groups, there are no off the shelf plan designs. When a plan year was successful, we want our clients to know what made

the difference. If claims were higher than expected, we help you understand where your healthcare dollars went and what your plan can do to bend the curve.

Be a Disruptor – Annual rate increases of 5 to 7 percent should never be accepted as being par for the course. Solutions to rising costs are in your claims data and the right advisors can help you explore new options. Carve-outs for Specialty Pharmacy and Referenced Based Pricing are just two of the ways we're helping health plans achieve significant savings.

Blocking & Tackling – Monitoring claims and utilization data day in and day out takes industry-leading technology and skilled claims analysts. Digging deeper into claims will help your plan uncover billing errors and find hidden revenue in your health plan.

Communicate, Educate, Advocate – Because managing the cost and quality of employee healthcare is a year-round responsibility, we do our best to keep employers, plan members and broker advisors informed and supported throughout the year. This is especially critical given the costs associated with chronic healthcare conditions and the rising frequency of high-dollar claims.

These measures may not be new, but when implemented consistently, they will produce significant savings, not only for your health plan but also for the members your business depends on.



Is Your Health Plan Delivering Value?

The American Benefits Council reports that employer-sponsored healthcare plans deliver a healthy return on investment for U.S. taxpayers. In fact, the Bureau of Economic Analysis and Joint Committee on Taxation say in 2019, every dollar U.S. companies saved due to tax exemptions resulted in \$5.34 spent on employee healthcare.

For plan sponsors, there is no question that their plan members receive value. Virtually all health plans provide much stronger benefits than members could afford on their own. What about your plan? Are there steps you can take to achieve greater value for your organization and your people?

Time for Examination

While COVID is still concerning, this is a good time for close examination. One strategy yielding cost savings and quality outcomes for many self-funded plans is the use of Centers of Excellence (COE). These programs, often focused on specialized care such as joint replacement surgeries, cardiovascular procedures and maternity care, may prove very valuable as people pursue screenings and treatments that were delayed during the pandemic. You don't have to be a Fortune 500 company to pursue a COE program. Knowledge of the local provider landscape and value-based claims expertise enable your TPA to pursue these and other opportunities on your behalf.

Responding to Vaccine Mandates

Pursuant to the Covid-19 Action Plan announced by the President on September 9th, OSHA published its new Emergency Temporary Standard (ETS) on November 10, 2021. Under the ETS, employers are required to establish, implement, and enforce a written policy allowing employees to choose between vaccination for Covid-19 or provide proof of regular testing and wearing a face covering in the workplace. While parttime and temporary or seasonal workers count toward the total, those who work fully remote or exclusively outdoors and do not report to a workplace where other individuals are present are not subject to the ETS. Covered employers must implement all aspects of the ETS, except testing, by December 5, 2021. The standard's testing requirements must be implemented by January 4, 2022.

Record Keeping

Employers must collect acceptable written proof of vaccination records from employees. Based on provided information, covered employers must prepare and retain an employee roster listing each employee and their respective vaccination status – whether each is fully vaccinated, partially vaccinated, not fully vaccinated because of a medical or religious accommodation or not fully vaccinated because they have not provided acceptable proof of vaccination status.

Records and rosters must be maintained for the duration of the ETS (at least 6 months). For more information about evaluating requests for reasonable accommodation, visit the EEOC website:



https://www.eeoc.gov/wysk/what-you-should-know-about-covid-19-and-ada-rehabilitation-act-and-other-eeo-laws.

Employee Support

OSHA also requires employers to provide up to 4 hours of paid leave for employees to get vaccinated. If employees voluntarily get the vaccine on their own time, no additional pay is required. Employers must also provide up to two days of paid leave for employees who need time to recover from side effects of each dose of the vaccine.

While groups have filed suits challenging the new law's constitutionality, the compliance clock is ticking. Considering the far-reaching nature of the new Covid-19 standard, covered employers should consult counsel to make sure they are prepared to implement the requirements and avoid potential penalties in the future.

Trends Latest Happenings in Today's World

The Cost of COVID

FAIR Health estimates that the average cost of care for an individual requiring hospitalization to



treat COVID-19 is \$29,000. For patients requiring a ventilator and treatment in Intensive Care, the average cost soars to \$156,000.

Telehealth Slows

According to a survey of healthcare professionals by Klas Research, telehealth visits have leveled off at about 20% of all healthcare appointments. While telehealth services are still used frequently for primary care and behavioral health, the percentage of telehealth visits is considerably lower than it was during the early phase of Covid-19.

Mental Health Goes Retail

While it might seem surprising that people would receive behavioral health counseling in a public setting like a Walmart store or CVS pharmacy, it is happening with increasing frequency. CVS has begun placing licensed clinical social workers at 13 pharmacies in 3 states and is in the process of adding 20 more locations.

More Confusion About HIPAA

The HIPAA privacy law, signed into law by President Clinton 25 years ago, has often been the subject of misinterpretation. Proof of vaccinations has added fuel to the fire as many individuals, including a member of the House of Representatives, have referenced HIPAA as a reason to avoid answering questions about their vaccine status.

Legal experts confirm that employers are not only within their rights to require employees to be vaccinated, but also to ask employees to provide proof of vaccination. In fact, any organization can ask any employee, customer or relevant third party whether or not they have been vaccinated against COVID-19 without violating HIPAA. Experts advise organizations to have a prepared response for individuals who refuse to answer the question or answer no to the question.

CMS Grants Partial Reprieve to Insurers

Even though hospitals and health systems were unsuccessful in attempts to delay the rule requiring them to disclose prices, health insurers have been granted a six-month delay in enforcement of many provisions contained in insured price transparency laws. While the law will still take effect on January 1, 2022, enforcement of rules requiring health plans and issuers to disclose information about in-network and out-of-network billed charges for plan years will be delayed until July 1, 2022.

Requirements that plans and issuers submit information about drug costs and pharmacy information have not been extended. While legal action has been taken by the pharmaceutical industry, CMS has told plans and issuers to begin reporting this information for 2020 and 2021 plan years by the end of this year.



Help for Smaller Groups

An analysis released by the Urban Institute and the Robert Wood Johnson Foundation shows that even though small businesses were hardest hit by the pandemic, the vast majority of those that survived were able to maintain health benefits. Nonetheless, maintaining health benefit programs has been increasingly difficult for small employers, especially in industries such as travel and hospitality.

One option that small groups continue to find workable is level funding, which offers self-funded features like lower premium taxes, plan design flexibility and access to valuable claims data. By including stop-loss insurance, level funded plan sponsors can establish a monthly budget for health benefits. Stop loss reimburses the plan when claims exceed employer funding but in contrast to fully insured options, the plan retains the savings when claims are lower than anticipated. If your organization is searching for a way to attract and retain workers in a tough job market, talk to us to learn more about level funding.

Self-Funding Continues to Dominate

The International Foundation of Employee Benefit Plans (IFEBP) reports that self-funded health plans continued to be offered by a large majority of U.S. corporations last year. Here's a look at some of the findings from their 2020 Employee Benefits Survey.

Healthcare Plan Funding	Corporations	Public Employers	Multiemployer Plans
Totally Self-Funded	6.4%	8.3%	28.3%
With Aggregate Stop-Loss	7.9%	13.3%	13.3%
With Specific Stop-Loss	18.7%	21.7%	20.8%
With Both Aggregate & Specific Stop-Loss	29.3%	28.3%	22.5%

Overall, self-funding or partial self-funding was used by 62% of corporations, 72% of public employers and 85% of multiemployer plans in 2020.

More Resignations

With Covid-19 having changed the way millions of people work and a huge number of job openings still unfilled, many workers are weighing their options. In a June survey by search company Monster, 32% of respondents said they would consider a change to escape the burnout experienced in the past year. Burnout was an even greater concern in research by employee

experience software company Limeade. Monster Worldwide lists flexibility, remote work options and mental health as keys to retaining people in an overheated job market.

Digital Covid-19 Tests

A project funded by the National Institutes of Health will soon offer a web and mobile app that asks users a series of questions relating to Covid-19 symptoms and then inputs answers into an algorithm to determine the likelihood of having the virus. An at-home test will be shipped to users who are flagged. Depending on location, test kits may arrive within a few hours with results being available within 10 minutes.

Dog Days of Fall

According to recent research at the University of Minnesota Carlson School

of Management, many employers are adopting pet-friendly policies as a way of encouraging workers to return to the office. With nearly 2/3 of new pet owners concerned about how to make a pet part of their workday, it's no surprise that half of surveyed employers are planning to allow pets in the workplace on designated days.

Did You Know? New Ideas for Healthy Consumers

Keep Moving. Be Happy.

A survey by the Business Group on health reveals that more than 124 million Americans over the age of 18 suffer from muskuloskeletal medical conditions. Unfortunately, common causes such as prolonged sitting and a lack of physical activity have become even a bigger problem during the recent shift to remote work. To help, more than two-thirds of responding employers say they plan to offer a corporate program in the next year or two.

Rather than intense workouts or weightlifting, many programs are expected to focus on the basic movements people make in their daily lives, such as standing up from an office chair or lifting small children at home. The great thing is that so many simple movements like stretching can be done right in the workspace, requiring little more than a 10 to 15 minute guided break. Cleveland Clinic reminds us that moving regularly can improve heart health, build stronger muscles and bones, help manage our weight, lower the risks of diabetes, insulin resistance and cancer and make us happier. That's right. Research shows that those who are even slightly active are more than 20 percent more likely to be happy!

Booster Shots Begin



While initial recommendations from the Centers for Disease Control and Prevention were somewhat confusing, the Covid-19 vaccine from Pfizer and BioNTech SE are now being administered to adults 65 and over and others who are 12 years and older with weakened immune systems.

The Moderna Inc. vaccine booster was also recommended for those who are immunocompromised and 18 years

and older. CDC officials said that those who are eligible would not require any documentation or prescriptions and could receive the booster from their physician or at any site where vaccines are administered. The FDA said other fully vaccinated individuals are sufficiently protected and don't need an additional dose of a Covid-19 vaccine.

Work Less, Live More

A study reviewed by the Cleveland Clinic reports that more than 40 percent of Americans work more than 50 hours a week. The study showed that in addition to diminishing levels of productivity, working long hours has been shown to increase risk of health problems including heavy drinking, depression and heart disease.

On the flipside, putting boundaries on your work hours and keeping a balance between work and the rest of your life can benefit your heart. Spending time with family and friends, exercising and relaxing will keep you refreshed, more energetic and ready to be productive in the morning.

Nothing Like Home

Researchers at Ohio State University's College of Public Health found that adults who reported never watching television or videos during family meals had significantly lower odds of obesity. Home cooking also makes a positive difference according to Dr. Allen Mikhail of Advocate Aurora Health. The bariatric surgeon says that cooking meals at home enables us to control what we're eating by using less fat, sugar and salt. Over time, this will translate to fewer calories consumed and ultimately a lower risk of obesity. Dr. Mikhail also believes that conversation adds structure and social interaction to meals and helps us enjoy eating more.

Please Contact Us: This newsletter is not intended as a substitute for personal medical or employee benefits advice. Please consult your physician before making decisions that may impact your personal health. Talk to your benefits administrator before implementing strategies that may impact your organization's employee benefit objectives.



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