Every August, Business Group on Health buzzes with excitement. This month marks the release of our annual Large Employers Health Care Strategy and Plan Design Survey, highly anticipated among those in the field. The survey offers a preview of employer approaches to health care and benefits for the year ahead. This year's survey revealed how companies are designing their health and well-being strategy to meet the challenges posed by the ongoing pandemic. With me today to discuss those findings is Brenna Shebel, a vice president at Business Group on Health. Brenna leads our center for data driven insights, spearheading our survey and benchmarking initiatives. The data she gleans from our surveys, along with the perspectives and anecdote she gains from conversations with our members are instrumental in offering a window into the leading ways employers are solving modern health care problems.

Ellen Kelsay:

I'm Ellen Kelsay, and this is the Business Group on Health podcast: conversations with experts on the most relevant health and well-being issues facing employers today. In this episode, we discuss key findings from our *Health Care Strategy and Plan Design Survey*, including what was affirming and surprising along with key topics to watch.

Ellen Kelsay:

Brenna, welcome, and thank you so much for joining me for this important conversation.

Brenna Shebel:

Great. Thank you, Ellen. I'm happy to be here.

Ellen Kelsay: Well, great. Well, let's get right into it. And for our listeners in the audience out there, can you share a little bit about our *Health Care Strategy and Plan Design Survey*? What is it? And what's so special about it?

Brenna Shebel:

Sure. So it's our annual survey that we do every year among our large employer members and our members are self-funded employers. So it's really interesting to be able to hear from them about what they are thinking about doing with their benefit plans and their health care programs for the coming year. So this year we were able to get the benefit plans and the strategies from 122 of our large employer members. And that represented about over 9 million lives covered by those large employers.

Brenna Shebel:

And so as part of this online survey, what we're really looking to glean is what their perspectives are when it comes to the health care landscape both this year, and sort of looking forward to the future in the next two to three years, we also want to see how they're going to be changing their benefit plans. So are they looking to change the type of plans that they offer? The cost sharing that they have with their employees? Some of the programs that they may be thinking about offering for the first time in the coming year? And so it really, for us as, as researchers of what large employers do, it helps inform Business Group on Health strategy, as far as what we're going to research in the coming year. But more importantly, it helps other large employers understand what their peers will be focusing on for the coming year.

Great, thank you, Brenna, it's such a massive body of work. I know you and your team spend many, many months compiling the questionnaire, fielding the survey, and then writing the report. And certainly, you mentioned the benefits of it for our employer members. And we also know that it is very useful for other stakeholders in the industry because it signals to them what employers are focused on and how they might need to evolve or adapt their solutions and strategies and support of the employers. So I know that many across the industry and among our members, but then also more generally speaking, find a lot of value and utility in the survey findings. So great job to you and your team for yet another great year with that survey project. And I know we'll be referencing it a lot throughout this conversation and certainly in the months and year ahead as well, but let's talk about the findings more specifically, you know, I know you and your team and a number of us at the Business Group, talk to members every single day across an array of issues. And there are many things that we hear anecdotally that were affirmed in the survey findings. Can you speak to what some of those things are that you saw in the survey findings that were affirmed?

Brenna Shebel:

Yeah, and I think we're going to hear, you know, today that theme of a lot of things that we have observed this year, and of course the COVID-19 pandemic played a huge role in strategy. We're going to sort of see that carry out in the survey, which is really affirming, right? We want to be able to see the direction employers are planning to take and based on what we have heard, how they're going to progress forward. So one of the things that's kind of goes back to those perspective questions is really what is the role of health care and well-being within a corporation's overall workforce strategy? And the way that we approach this question is we really want to know what type of role does it play- is your health care strategy completely separate from the way you manage and, and plan for workforce issues? Is it a part of it? Is it an integral part of it? And I think what was really interesting this year, and as we sort of talked through our conversation, this will become more apparent, some of the tactics, is that there is a growing importance of health care within the workforce strategy that employers are really starting to focus on the way that they structure their benefit plans and the type of programs that they offer, knowing that it has very much of a bearing on the outcomes related to their workforce strategy. I'd say also there are two other areas that we found was very interesting. And Ellen, of course, I'd like to get your take on this too, since you have such a great breadth of interest and knowledge in this area, but also we saw it, as we expected an uptick in the amount and interest in virtual care and virtual care can mean lots of different things.

Brenna Shebel:

It can mean telemedicine or tele-visits through your community provider that you would see normally, maybe face to face. But due to the nature of the pandemic, some of us had to go virtual with some of our appointments that we would normally see physicians within in the community. So there's sort of that there's also telemedicine and telehealth providers that either work directly with employers or they may be offering telehealth services through an employee's insurance. And so that is an area that we saw a lot of growth in. And we'll talk a little bit more about that later. We also see tele-mental health, being able to work with a counselor and get support for mental health struggles through sort of either phone or video and being able to access it that way. So there's sort of this theme of virtual health played a major role in this year survey.

Brenna Shebel:

I can't completely direct it back to the pandemic, although I think it had a major role, but we actually saw that trend on the upwards anyways. So as we have been doing this research year over year, we have seen a growing interest and emphasis on virtual care. And then next I will also spend a lot of time talking about this- and it's time that is absolutely due because it's a topic that a lot of employers are focused on and that's mental health. And this again is not a new topic. This is something that employers have been focused on for many, many years, but I'd say the past four or five years, we've seen a huge shift in the data around employers, just more commonly offering programs to address mental health. And those can be programs from culture and access all the way to benefit plans. So how they're sort of structuring the types of benefits that are being offered around mental health. So we've been hearing a lot about these things from our employer members and it's certainly played out in the data. And I think 2021 will be a very interesting year when we see some of these things actually come into fruition.

Ellen Kelsay:

You mentioned several really great things there, and I know we're going to pick up and speak about those in a bit more detail, but, certainly relative to the virtual care and mental health, Brenna, you recall they were two of our five trends to watch at the beginning of the year and certainly the pandemic put them even under a greater spotlight. And certainly the survey findings also reiterate those points. So not surprising necessarily to see them there and, and really, I think great to see that employers continue to invest in resourcing in both of those areas to support their employees and covered family members. So we'll certainly circle back to those in a bit, but I also wanted to ask you about any findings related to specific conditions. You know, many of our employers struggle with high cost claims and we ask them every year in the survey, what are some of those conditions that are the primary drivers of the underlying costs within their plans? What did the survey show us this year?

Brenna Shebel:

You know, this year was also interesting. I think we saw a lot of similarities between this year's data and last year's and two condition groups really pop out to us in this survey. And I'd say, it pops out to us in ways that we know these two condition groups drive costs. And we know there are ways that employers can influence the cost and the quality of treatment using a variety of different methods that we actually covered in the survey. So the first is all the different conditions that kind of fall under musculoskeletal care. And when we ask employers, we sort of list out a bunch of diseases, different conditions, and diseases. And we ask them, okay, tell us your top three conditions that are really driving your costs last year. And this year musculoskeletal was number one, and there are a lot of different conditions that fall under this group.

Brenna Shebel:

But we know for employers and specifically some very specific industries that musculoskeletal care drives a lot of their health care costs and really sort of plagues them as well as their employees, is trying to get employees to high quality care so they can get some of these issues resolved. We know musculoskeletal conditions really affect an employee's life, and their ability to work and their comfort level. And so for a lot of employers, I think they're very focused on how to resolve this from both a cost and quality of life issue for their employees. The other area that should be no surprise to anyone, but it's

certainly something a lot of employers are focused on is cancer and like musculoskeletal cancer as an umbrella encompasses a lot of different conditions and diseases. And so cancer came in as number two driver of health care costs, according to our employer members. It did so as well last year. And so I think as we start to think through some of the data that we saw in the survey you will see musculoskeletal and cancer pop up in other areas of our findings, sort of how employers are addressing the quality and the delivery of care, maybe some virtual point solutions that they may be offering to employees to expand access and maybe reach a broader audience that they may not be reaching through a centers of excellence program or some of those more developed delivery methods. And so you know, I think we're going to continue monitoring these two conditions fully knowing how impactful they can be to an employer's benefit plan, but also knowing that they have very long-term impacts to an employee's quality of life, which employers are very invested in and interested in improving

Ellen Kelsay:

Let's shift gears a little bit and talk about delivery reform efforts. And certainly this is something that we organizationally have been focused on for a number of years on behalf of our members and many other stakeholders are a party to that conversation and have a vested interest in it as well. And we saw some interesting findings and this year's survey related to employers' prioritization and really efforts related to delivery reform. Can you share for the audience a little bit about what came out in the survey?

Brenna Shebel:

Sure. So this was one of the areas that we want to keep a very close eye on when it came to the effect of the pandemic. So we know for employers who are really embarking on an advanced delivery reform approach, it takes a certain amount of planning, work with providers or work with health plans. And it's a very well thought out process and impressive process, to be honest, but what we heard anecdotally, before we launched this survey is that for some employers, they were really pulled away from some of those approaches or planning for delivery reform, because they had to really focus their concentration on how to assure a safe workplace and helping employees during the COVID-19 pandemic. And so some examples that we heard around where employers maybe couldn't drive some of their attention to delivery reform, obviously some programs like a centers of excellence program in which an employee maybe would travel outside of their community to get higher quality care that an employee, because of the pandemic had to sort of sit tight and sit at home and wasn't able to travel.

Brenna Shebel:

And so some of those procedures may have been done elsewhere or may have been delayed due to the pandemic. Another area is, you know, some employers are actually working directly with physician groups to create these advanced delivery care models, and the health care workers have been absolutely on the front lines during this pandemic and had to, again, turn their attention elsewhere and serve employees in this emergency situation and their patients. So weren't really able to work through some of those new joint ventures with employers, but what I think we're going to see in the coming months and next year, and Ellen, I'd be very curious of your thoughts on this is that those things will return. We will resume a lot of our delivery reform efforts and work. And hopefully when the pandemic's over employers will be able to go ahead and proceed with that.

Ellen Kelsay:

Yeah, no, I absolutely agree with you Brenna, I think this is a momentary pause because of the need to prioritize all the things that you just mentioned. And if anything, we all knew well before the pandemic that the current state delivery model was not working and there were many, many challenges within it and many stakeholders across the industry working really hard to move away from fee for service, to alternative payment models and alternative delivery models. And so I do agree that this is probably something that will resume once employers are able to re-prioritize their focus on these efforts. And as you said, they are significant efforts that do take a lot of conversations over many, many months and years, with a variety of partners on the health system and health plan side to affect, you know, changes in delivery reform. So I absolutely agree that the pandemic has just maybe put a momentary pause on these efforts, but if anything, I personally believe that it's also underscored the need to move, perhaps even more aggressively outside of pandemic on the other side of it to move much more rapidly to a delivery reform and alternative models. So, well, we'll have to see what next year's survey says, and if we're proven, right, I suspect we will be, but we'll have to see what the survey says this time next year. Okay. Well maybe we can start talking about some of the findings that were surprising. We just spent a lot of time talking about things that were affirmed and, you know, really validated what we've been hearing about from our members for many, many months. But I know that there were several things that came out in the survey that were not entirely expected. So let's talk about those. What are some of the top line things that you would note as a bit surprising?

Brenna Shebel:

I think one of the areas that we really wanted to, we were eager to see the outcomes of is around what type of onsite services would an employer be offering in the coming years. So if we sort of think through what we've been through in the last six months, employees have had to shift from maybe a work site to working from home, they maybe wouldn't have been able to access some of the onsite medical clinics that employers were offering or made available to their employees. And so we had heard sort of a few different schools of thought around this. Some employers wanted to continue offering services onsite, some were questioning if they should in the long-term beyond just the pandemic. And so what was interesting around our survey data is that we actually saw that onsite clinic offerings will be sustained and they're actually going to grow.

Brenna Shebel:

So next year, we're going to see a high percent of large employers offering onsite clinics. And then actually in two years, we're going to see even more growth. So that was really interesting to see. And I think really plays out to show how employers are still very much invested in that work site. And for some employers who have actually had employees at a work site the entire time during the pandemic, they were able to really look at their onsite and medical clinical staff and repurpose them for different uses related to the COVID-19 pandemic. So we heard from a lot of employers that they were tapping into their onsite medical clinic to help with screening as employees are coming into the work site and asking them if they had been symptomatic or been exposed, also the onsite clinic staff were able to really pivot very quickly.

Brenna Shebel:

So I think there's kind of some interesting examples, right? We know that we're coming upon flu season and employers have always played a big role in offering flu shots right at the workplace. And so we're

hearing of some employers who were actually thinking of doing flu shots, you know, outside in tents to be able to bring folks in, but be socially distanced. And those are just some ways that I think employers are being really creative with some onsite services. And of course, during the pandemic, as some employees had to pivot, you know, working from home and not coming into the workplace for employers that have counseling and mental health services right on the work site, they were able to ask those folks to maybe turn into more of a virtual counselor and provide some virtual counseling to those employees. So I think it's been interesting to see how onsite services have changed through the pandemic, but also even more interesting that they are going to continue having a major role within employer health care.

Ellen Kelsay:

I think it's so interesting and just, I think encouraging to see how nimble employers have been with these clinics and how adaptable the clinic resourcing has become. You know, as you said, there are many employers for whom their workforce has never left: they're manufacturers or they're health systems and other essential workforces that had continuity of those programming throughout the pandemic. And then there are other environments in industries where perhaps they don't have everybody on site now, but there'll be reintroducing people back into the work site over some period of time over the coming year or two years. And so how they think about supporting employees, you know, across those different types of models is important. And I think it's important to picking back up from the virtual theme earlier. Virtual has been wonderful, and it's certainly been a great type of modality and alternative in an environment where people could not go to see their doctor and employers have done a lot to expand the virtual offerings.

Ellen Kelsay:

And it's not a complete shift away from brick and mortar. I think sometimes when we talk about virtual it's at the exclusion of brick and mortar or at the exclusion of onsite services. And I think as most of our members think about all that they do for their employees, it's really a spectrum of solutions. Some that are fully virtual, some that are fully brick and mortar, and then some that are in between and the onsite services are certainly a part of that care continuum and array of solutions that they're deploying to support their workforce in a myriad of different ways in a myriad of different locations as well. So lots of encouraging developments in terms of the services and the way that they're supporting employees through those onsite clinics as well.

Brenna Shebel:

Now, Ellen, I'm curious. So as get past the COVID-19 pandemic, what are really your views on how you think onsite services will be changing after that?

Ellen Kelsay:

Yeah, I mean, I think some of it is carrying on trends that we had seen before and during the pandemic of onsite clinics, really deploying many different types of services. It's not the old occupational health clinic and it's not even just primary care. Many clinics have evolved to provide immunizations. You were mentioning flu shots earlier, perhaps they'll be a location where employees can go to get vaccine for COVID. You had also mentioned behavioral health early in your comments. Many of these clinics have developed resources and have brought counselors and therapists on site to support employees from an

emotional behavioral health perspective. Musculoskeletal, maybe some of them will start to have PT services available or maybe they'll support PT virtually through capability deployed out of the clinic. And then certainly we've seen related to return to work. But I think some of the tenants and examples that were brought forth from the return to work effort about workplace safety and testing or helping employees, you know, if they need to quarantine have, you know, a safe place within the building, within the clinic for things like that to occur.

Ellen Kelsay:

So really thinking differently about the physical footprint of the clinic, how you might structure things a bit differently to provide some of those emerging needs within the work site, and then working much more closely with safety folks within the organization. So I think historically many of those groups did not interact as regularly as they have had to throughout the pandemic. And I think we'll continue to see a stronger collaboration between clinic staff and safety staff within employers as well. So I was going to ask you Brenna, another thing that we saw in the survey that maybe it wasn't surprising, but it's a bit of a quagmire is related to costs. And certainly that is something I know you have tracked every single year for many, many years for our members. And we ask them about, you know, trend for the coming year and cost increases that they're expecting. And we got a little bit of some, you know, interesting findings, in this year's survey. Could you share a bit more on that?

Brenna Shebel:

Sure. So just as background for the audience every year, we, we ask employers to share what they projected to be their median is sort of increase in health care costs and we tracked on this many years. And so year over year, recently, what we have seen is when we ask employers before you make any type of plan design changes what do you project your increase in costs will be? And it's been around 6% that they have projected for the coming years. And then when we say, okay, then when you sort of overlay what you are planning to do with your plan design, some of the different strategies that are planning to do with, with your benefit plans then sort of make that same projection and that tends to come at 5% year over year. So that's what we've seen in recent years.

Brenna Shebel:

We didn't really know what to expect looking forward to the coming year. And I do really attribute this back to again, the circumstances that employers and their employees were put under, due to the pandemic where we know that health care utilization has declined in some areas because employees were staying at home, the provider offices may not have been fully up and running and, and may have been serving, you know, emergency purposes. So we know that health care has been disrupted through the pandemic, and so we weren't quite sure how that would play out as you think about health care costs in the future. And so when we asked employers to think about what their projections would be for 2020 this year in 2021 it was, it was interesting, right? We, we saw our 2020 projections come in the same: 6 and 5%, and it will be interesting next year to see what those actual costs were.

Brenna Shebel:

After employers are able to, to see a lot of that, their claims adjudicated but what we saw for the coming years, there's just a very slight uptick, very small amount in which employers may be expecting a little bit higher of increases, but I think what we saw is that it stayed pretty steady. So that tells me as a,

as a researcher in this areas that this- being able to make projections on health care costs is something almost employers are doing month to month because of the impact that pandemic is having on health care utilization. Employers may see their costs increased slightly towards the end of the year. They may see no impact until we get to 2021. It really depends on how health care utilization will pick up and then where, or, or the type of procedures and conditions that will be treated during that pickup in utilization.

Ellen Kelsay:

Yeah. You mentioned a lot in there and you're right. It is going to be really interesting to see how it all plays out and unfolds over the next year or so, and all understandably right. Hindsight's 2020 when you kind of walk through all those things. It's very understandable why this is really hard to nail down and pinpoint this year. And as self-insured employers, you know, these employers are used to volatility and they're used to assuming the risk, but certainly this is a year of even, you know, increased volatility and perhaps increased risk. And not really knowing how that utilization may rebound or what the prolonged impacts of COVID are across other health conditions is still yet to be seen. And, just a lot to keep our eye on relative to these costs, which makes certainly near term budgeting and forecasting, rate setting, very, very challenging and difficult., so lots of things to keep an eye on and to stay close to. And you said monthly budgeting is definitely happening. And I suspect for some employers, they're probably getting asked to do it even more frequently than monthly. Alright. I wanted to ask you about, you know, what really stood out in the survey as something that we collectively need to keep our eye on, or really need to redouble our efforts around.

Brenna Shebel:

So we heard anecdotally Ellen again, I don't mean to sort of keep going back to the impact of the pandemic on, on some of these benefit plans, but clearly it had a huge role in what employers were able to do. We have heard anecdotally from our members that some of their strategies regarding pharmacy benefit plans were, were also put on hold. Although we know that addressing high-cost therapies within benefit plans is the top priority for large employers. And that was actually the same as last year. So that finding wasn't such a surprise necessarily, but what we want to keep our eyes on is how that prioritization will take place and play out within an employer strategy and their benefit plans. So high-cost therapies you could say treatments or medications that cost generally over a million dollars, so very expensive therapies and very needed therapies.

Brenna Shebel:

These treatments play a huge role in, in the lives of, of employees and their patients who need the treatments. So from an employer's perspective where they are focused on when it comes to high cost, therapies is power. How are they going to pay for these medications? They can be very expensive. And if you have an employee or dependent, multiple employees, independents that have this specific condition or need this therapy, an employer does have to really think about how they are going to finance or pay for some of these things.

Ellen Kelsay: Gosh, there's a lot there too, that we could really kind of peel back the layers of the onion on absolutely pharmacy is a huge head scratcher issue for employers. That's a huge cost driver has been for many, many years in the specialty side of things. And then you overlay these newer high costs, million-dollar plus therapies and put them into the mix. And it just really has astronomically raised the

alarm on prescription drug pricing within the employer's plan. You know, you mentioned obviously these therapies are needed and there's certainly no debate from any employer that for a patient who needs these drugs, they should have them. The biggest challenge though, is as you said, the financing of them and the affordability of the plan at large, to be able to continue to cover these types of therapies. And right now they have been isolated to just a few therapies that are in the market.

Ellen Kelsay:

We had a couple years ago, Luxturna for blindness. And then last year we had Zolgensma for spinal muscular atrophy, but, you know, the FDA pipeline has dozens more in the queue for approval. And some of those treat much more common ailments, which could certainly be much more applicable to a broader population on a plan. So when an employer begins to add all that up, it could quickly overwhelm and really crush the overall affordability of the plan. So they are really grappling with the financing of it to your point. But I think what is also really important to mention is that it just goes to underscore what we in the Business Group have been talking about and certainly with a number of our members and other partners is just the underlying challenges within the overall pharmaceutical supply chain. And also the underlying challenges of drug pricing to begin with of what is a rational price for a drug when it comes to market.

Ellen Kelsay:

So certainly near term challenges related to financing and coverage, but then also I think bigger issues that are certainly harder to solve for related to the supply chain. And I know we've, we've asked this question that many of our members have indicated an increased willingness for the government to help intervene with some sort of price controls and parameters around, you know, financing and affordability and pricing of these drugs. So that will be another thing to watch. And certainly we have seen the administration make some moves in that space recently, but certainly a big, big area of focus for many of our members as well.

Brenna Shebel:

Absolutely. And I would say also employers, yeah, employers are focused on a potential government role within high cost therapies and the pricing of these medications. They are also exploring other ways to address the expense of these medications within their plans and creative, right? Some of these strategies we've seen in other areas of insurance in the past, but maybe not necessarily on specific medications. So I'm offering or looking at placing stop loss insurance on a specific drug. I'm looking at indication or outcomes-based pricing arrangements for specific medications and even a drug financing model. So it's sort of being on a payment plan, to pay for some of these medications that an employee needs. So I think we need to keep an eye on those different strategies because not a lot of employers are doing them today, but what we saw in the survey data is actually in the next two to three years, we're going to see, we could potentially see a big increase in the number of employers who are entertaining or executing those types of strategies. And I'm betting that a lot of them are keeping an eye on the pipeline to know how those strategies will play out because they are so drug-specific, it is something that is very targeted, a specific medication.

Yeah, no, I'm glad you mentioned that because there are definitely a lot of strategies that they are either already undertaking or will be in the next year to two to really try and get their arms around this challenge. You know, I think even though with the strategies, it's still what I call the band-aid on the bigger problem of the drug pricing. So I think we'll also see many more employers become more vocal on stakeholders within the supply chain and pricing of drugs. And certainly we're all anticipating eagerly a vaccine for COVID and hopefully that is priced at a rational and sustainable level. Everybody certainly needs it and employers are eager for it to be here, but again, it cannot financially crush and devastate the overall plan. So just another thing for us all, to keep an eye on, as we hopefully have a vaccine in the not too distant future here. So, Brenna, I know you talk to employers essentially every single day and you hear from them across an array of issues, challenges, things that they are working on. And what have you been hearing really in the past month or two from HR and benefit leaders as the things that they are keeping on their radar or actively working to address?

Brenna Shebel:

Yes, this is, I have to, I'm glad you asked this question cause it's, it's, I would say the favorite part of my job and that is talking to employers about what they're actually working on that week or that month. And I've been part of a team that has been running a series of round table calls with employers, weekly, every other week, focused on COVID-19 and what they are doing to meet the needs of their employees in a variety of different ways. So what we have been talking about recently has been how to really best support employees at this point in the pandemic. And I think for me in a lot of maybe your listeners as, as kids are heading back to virtual school employers are trying to think of the best way to support employees who are working parents. And we've heard a lot around child care, the basics of providing care and oversight for employees, children, as well as some more interesting creative methods like providing tutoring services or having a staff with it under the employer provide some educational resources.

Brenna Shebel:

So some pretty, pretty interesting things that employers are doing. So they're definitely focused on that because of the timing of the year heading into the school season, and then also, an area that this survey did not cover, but we certainly have a lot of data in this area is around paid time off related to the pandemic, as well as different time off that would be needed to support an employee. And we're hearing a lot from employers on that, I think when the pandemic first started, and employers were putting some new leave programs into place, I don't think a lot of people thought it was going to extend this long, certainly not until 2021. And so for many employers they're really revisiting their leave programs, making sure they're meeting the needs of employees and, and the business and making, making adjustments as needed.

Ellen Kelsay:

I was going to chime in on the childcare challenges and, you know, certainly the purview of employers has really ballooned in terms of having to support employees in new and different ways. And this one, when you talk about one of the themes you mentioned earlier on, you know, health and well-being on workforce strategy, and when you think about the well-being of an employee and their family and how

they're trying to navigate this, you know, very fluid child care schooling situation, both at the end of the year, then for the summer and camps and daycare closures, and now, you know, return to schooling and a virtual or an hybrid environment for many families, you know, employers have really had to think about things differently and think about how either they provide new resources and solutions or think about schedules and flexibilities. You said it yourself, you hear from employers all day long.

Ellen Kelsay:

They're really trying to be thoughtful in their approaches and do right by their employees, but it is just such a, you know, a challenge that nobody really ever anticipated would be upon us all, so really encouraging to see what they have done. And it's going to be interesting to see over the course of the next several months in the next year, how other employers adapt and adjust their programming and flexibilities in support of that issue. So sorry to interrupt, but I couldn't agree with you any more. I mean, that is just, I think probably top of mind issue right now, certainly as we are at the end of the summer and the school year is resuming that many, many employers are very keenly focused on that right now.

Brenna Shebel:

Yeah. And I think, you know, you have a complete valid point. I think, you know, partially all brings it back to what we started talking out in the beginning is around mental health and entering into the school year is stressful for parents and kids under normal circumstances. But given that we're sort of in this unprecedented virtual schooling and, and sort of interesting time that many of us are facing, employers I think are really looking at these different creative strategies to support employees, but also fully knowing that the more support they can provide to employees and show that they are valued as employees, they will see some of the fruits of those labors play out and the amount of work and the happiness of the workforce and, and sort of making that connection. So another area that employers are still focused on, and they've been focused on since the beginning, is really around employee resilience, how they're faring through the pandemic maintaining their stress levels, any supports that they would need, whether it's sort of their day to day work, life balance well as supports that they may need for specific mental health conditions and really trying to continue to support them in the ways that, that they are needed to, as this pandemic charges on and with the similar strength of benefits that they started with in the beginning of the pandemic.

Ellen Kelsay:

Absolutely. Couldn't agree with you more, well said. Well, let's talk about open enrollment. This is the time of year when many individuals and families are making decisions about their elections and coverage for the upcoming year. Many employers do a lot of planning for many, many months throughout the year to think about their strategies and offerings and what they might be rolling out for the upcoming year. And many employers often, you know, historically used to have health fairs and flu shots and other things happen in the fall related to open enrollment. Tell us a little bit about what you're envisioning open enrollment to look like this year from an employee or a perspective and what maybe members and families should expect.

Brenna Shebel:

Sure. So what we have heard from employers, when they're thinking about specifically the type of benefit plans that they're offering, maybe the pricing, premium prices, we've heard a desire from

employers to try to keep these offerings very steady and similar from 2020. And I think the main reason behind that is that we've all gone through so much in 2020, it's been quite a year that a lot of these changes that employees have had to go through- if employers have one way to keep things steady and keep things constant, they're going to try to do it. And so I think when it comes to benefit plans and employees, we'll probably see a lot of the similar plans that they had from this year. As far as the actual open enrollment experience, I think what will be interesting is we've heard from some employers who are going to try to make that a virtual experience, so not able to do some of the traditional onsite services, but being able to provide some benefit offerings, maybe some different virtual programs in sort of a virtual communication setting, we've heard that some employers are trying to still create an experience for employees so they can learn about all the different benefits that they have offered to them and help them select the benefits that are best for them and their families.

Ellen Kelsay:

Trying not to rock the boat too much, keeping things as steady as possible, thinking about more of a virtual open enrollment experience, and then also I know deploying perhaps some, you know, new and expanded solutions as we saw. And you mentioned earlier in particular related to virtual services, as well as mental, behavioral health and resiliency services. So I think that's all great. And I think we'll be welcomed by many employees as well.

Brenna Shebel:

Yeah, I think, you know, employees could keep an eye out for some different at base programs, different virtual offerings around specific conditions or areas that they would like to improve their health. And that's an area that if we do project any change for the coming year, employees may see more of those offerings that they may not have had access to in the past. So virtual physical therapy maybe stress reduction or resiliency program. So if I was an employee, I would, I would recommend really looking out to some of those different programs because they can make a real impact on one's health and overall quality of life.

Ellen Kelsay:

Great, Brenna, I've got one final question for you and it is what are the findings from the survey that make you feel positive and optimistic about the future for employer-sponsored health care?

Brenna Shebel:

There's a lot that we have in our survey data that I could say, but I'll pinpoint it to one thing. I think what's been really exciting to see for our members is that HR and benefits leaders have so much more of an expansive important role in workforce strategy, sort of the key point that I started off with in the beginning of the podcast. And so they've always had a seat at the table, right. But I feel like they have a slightly bigger seat now because through the pandemic many sort of figured out that, oh yes, HR and benefits can have such a positive impact on employee experience and productivity. And so I'm excited to see in the coming years that our members will continue to have such a huge role, and I've been completely impressed by their agility and their commitment to seeing employees through this pandemic. They played a huge role and being able to provide flexibility and, and support the workforce as they are needed during this time.

Great. Well, Brenna, thank you so much for joining me in this important conversation and sharing your insights with us.

Brenna Shebel:

You're welcome, Ellen. And thank you so much.

Ellen Kelsay:

I've been speaking with Brenna Shebel of the Business Group about our 2021 Large Employers Health Care Strategy and Plan Design Survey now available for download on our website. I'm Ellen Kelsay, and this is a Business Group on Health Podcast: conversations with experts on the most relevant health and well-being issues facing employers today.