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A DEFINITIVE GUIDE TO

HEALTH CASH PLANS

THE ALL-INCLUSIVE EMPLOYEE BENEFIT

PLUS //

The latest employee and employer insights
Interviews with intermediaries & provider experts



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THE ALL-INCLUSIVE BENEFIT

It's no longer sufficient to put in place an off-the-shelf employee benefits programme, tick the duty of care box and then consider the job done. Today's competitive environment demands that employers provide more for less.

Carefully structured employee benefit programmes can help in this regard but only if they are used and valued by employees. And therein lies the rub. Whilst benefits usage is desirable for employees it can also have the knock-on effect of potentially ramping up premiums - depending on the product - for employers.

Health cash plans are no exception to this rule. However, their low cost in comparison to some other health and wellbeing products means that any premium increases due to usage might be offset by savings generated as a result of supporting employee health and happiness.

So what's the secret to benefits usage? In simplest terms, ensure buy-in from both the business and employees by tailoring benefits to the needs of both parties. Of course, that's no easy task considering all the nuances involved, for example: the multigenerational nature and needs of the workforce; the need to demonstrate return on investment; budget restrictions; ongoing outcomes assessment.

In this guide, we confront all of these aspects. We aim to provide intermediaries with valuable information on employer and employee trends, gained from the latest research commissioned by Simplyhealth and carried out by ResearchNow and YouGov. In addition of course to the annual CIPD and Simplyhealth Absence Management survey.

We also interview the provider's Director of Corporate Pam Whelan (page 6) to investigate what intermediaries should look out for when comparing products, such as the level of mental health support and access to GP services.

Employees are apparently happier to talk about sex than mental health, according to a survey by Time to Change. Plus a recent poll commissioned by GP service Doctaly found that 42% of employees lost work hours last year to attend GP appointments.

The case for cost effective and tailored benefits that support employers in these key areas - and more - creating a more engaged workforce and providing a multitude of benefits to the business, cannot be ignored. **11**



David Sawers
Editor
Health Insurance Daily

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CASH PLANS: THE BENEFITS SHAPE-SHIFTER

Health and wellbeing strategies might be slowly becoming the norm for corporate clients, but do they really reflect the needs and wants of diverse workforces? The lowdown on all-encompassing health and wellbeing for the many, by **Colin Perry, Head of Corporate Marketing at Simplyhealth**

It's telling that four fifths (81%) of organisations claim to have a health and wellbeing strategy in place, yet just under three fifths (56%) of employee benefit professionals say they 'don't know' what the top health and wellbeing priorities are for their employees¹.

What's more, in spite of the fact that 40% of the UK's long-term absence is caused by stress and mental health problems, only a small minority of organisations (5%) has a standalone mental health policy, although a further

29% do include mental health as part of another policy (generally wellbeing), according to the CIPD Absence Management Survey 2016, in partnership with Simplyhealth².

These results highlight the importance of communication between employees, managers and leadership teams. Understanding the needs and wants of the workforce and having leadership backup means companies can tailor their strategy to suit their people as well as their

specific business objectives. A good result all round.

Cue the independent adviser and an ideal opportunity to further show their mettle, working in partnership with employers, insurers and wellbeing service providers to help tailor packages to individual workforce needs and budgets, whilst also providing support to measure return on investment: the latter representing the key to leadership backup.

Here to stay

There is no doubt that health and wellbeing is now firmly on the agenda of UK employers. Research by Simplyhealth for the latest Health and Wellbeing Benefits Guide¹ found an increase of six percentage points from 75% to 81% in those organisations that claimed to have a suitable strategy in place.

This is largely driven – albeit somewhat inadvertently – by government and the ongoing withdrawal of state benefits. But

EMPLOYERS' TOP HEALTH AND WELLBEING PRIORITIES FOR THEIR EMPLOYEES

56% Don't Know

46% reducing absence

40% increasing the number of employee benefits offered to staff

35% making sure all aspects of wellbeing are covered

33% employee health and wellbeing is not a priority

Source: *Health and Wellbeing Benefits Guide, Simplyhealth*

also more directly by the fact that employers are under pressure to deliver more for less.

Change drivers

There's now an improved level of understanding in society of the importance of good physical and mental health. This is largely driven by the fact that we're all living longer. And with increased longevity comes a greater need to save for the future, potentially more healthcare requirements and a growing number of people juggling work and caring responsibilities: for elderly relatives as well as children in many cases.

This brings with it a higher level of expectation with regards to reward and benefits.

There's also less of a distinction between home and work life these days. Employers are now much more cognisant of the impact that one has on the other and the knock-on effect for engagement and productivity.

What's more, Millennials will soon outnumber their older peers in the workplace and come with their own unique set of expectations and requirements.

The upshot? Attracting and retaining the right people for the job is costly and challenging. Employee benefits can, however, go a long way towards ensuring a competitive package that meets diverse needs.

Preventative or corrective?

It's generally a given that a prevention over cure approach

“Millennials will soon outnumber their older peers in the workplace and come with their own unique set of expectations”

makes the most sense. Helping to keep employees healthy and happy not only brings productivity and corporate reputation benefits but also helps to avoid the costs associated with a corrective approach, which can include sickness absence or increased management intervention.

That said, the favoured route for the majority (42%) of employers is to focus on a dual strategy, according to Simplyhealth's Health and Wellbeing Benefits Guide. Whilst prevention is the ideal, it's often necessary to provide corrective support to employees who already have long-term conditions.

Starting point

A vital first step before introducing any employee benefits – yet so often missed by employers – is to speak to employees to find out what they would use and value. (Find out more in the feature on page 10 of this guide).

In addition, it's worth considering flexible benefit options to allow employees to pick and choose benefits to suit their needs. These

can now be offered via a range of funding mechanisms to help limit costs for employers.

Employee feedback should be used to help add further valuable insights alongside a thorough review of employee benefits, usage and claims data: information that can be used to help inform the design of an appropriate package and help build the business case.

Objective setting and communication to help ensure usage comes next, as outlined further in other sections of this guide. Ultimately impact is the most important element. The success of an organisation's health and wellbeing strategy will be measured by the impact it's having on the business and its employees, regardless of demographic. ¹¹

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¹ Health and Wellbeing Benefits Guide 2017, Simplyhealth. Research commissioned by Simplyhealth and carried out by ResearchNow (sample: 512 employee benefits experts within UK companies) and YouGov (sample: 2,308 employees) in Q1 2017.

² Absence Management 2016, CIPD & Simplyhealth (Nov 2016)



Suzanne Clarkson talks all-encompassing health and wellbeing with Simplyhealth's Director of Corporate **Pam Whelan**

Health cash plans seem as popular and applicable today as they did when they were first established over 100 years ago. But can they really be properly tailored to meet diverse employee needs?

Pam explains that understanding workforce demographics is key to the success of an employee benefits programme, and that's as relevant to health cash plans as it is to any other product or service.

"If you don't truly understand workforce demographics, you're just giving the employer an out-of-the-box solution," says Pam.

"You need to look at the work environment and whether job types are physical or desk-based. Is it a high stress environment? What's the nature of unplanned leave? And what would employees find useful and valuable?"

"Once you've developed a full picture of a company, you can help tailor benefits accordingly, applying different levels of cover as appropriate. And then provide targeted communications support to help maximise usage.

"Health cash plans now offer everything from traditional dental and optical cover – benefits that support employers to meet their duty of care obligations – to mental health support and fast access to GP services via webcam. We're finding that the latter is particularly attractive to younger employees, especially as we're seeing more of a blend these days between work time and personal time. Early access to diagnostic support will hopefully prevent more costly problems down the line."

Whilst analysis of absence and claims data can help employers identify usage and impact, in order to maximise workforce engagement with benefits it's now understood that this data must be supplemented with information on what employees want and need. Are employers becoming more receptive to this idea? "No company these days wants a vanilla product.

They'll generally have varying degrees of data and we, along with their intermediary, can help them develop it over time with a view to identifying issues and tailoring solutions."

So what kind of trends has Simplyhealth noticed over recent years?

"Mental health is in the media every day and this is slowly having the effect of normalising it. Certain companies are now investigating the effect of mental health problems on presenteeism as well as absence. There's also now a growing understanding of the link between mental health and physical health. It's one of the reasons that Simplyhealth is now a sponsor of the Great Run series.

"The biggest impact will be felt when cultures are created that encourage an open dialogue around mental health. This will be largely achieved through equipping line managers to handle situations and signpost to appropriate services."

We're hearing a lot about changing employment practices such as the growth in the number of contract workers, gig workers, the self-employed. Are health cash plans well structured to help?

"It's beneficial to offer access to a corporate health cash plan, albeit self-funded, to people whatever their contractual arrangement.

"A corporate plan is quite different to an individual plan. For a start it costs less. Plus it's more suited to a company arena and therefore more appropriate to contracted individuals."

The government is now tentatively encouraging employers to report publicly on wellbeing. In what way will this help?

"In any competitive environment, people should be prioritised. People are still our biggest asset and companies are taking more ownership in this regard in a bid to get ahead." 

THE BARE NECESSITIES

Colin Perry, Head of Corporate Marketing at Simplyhealth, explores the link between fit and healthy employees, workplace productivity and corporate reputation: all the elements that a company simply cannot survive without. So why are many senior managers still wrangling over return on investment? And how can intermediaries help?



It's generally understood that good employee health and wellbeing equates to good productivity. Vast amounts of column inches and research reports are dedicated to the subject. Equations, statistics and case studies abound. Yet the endless search for meaningful measures still places a barrier in the way of some companies putting in place much-needed initiatives.

This is not only having a negative knock-on effect on employee health, happiness and productivity, it also puts companies at risk of damage to reputation and that may cost them a whole lot more in the long run. Gone are the days when companies defined their own brand and image, it is now bestowed upon them by employees, thanks largely to the

popularity of employer review sites like Glassdoor. In other words, a focus on employee health pays in both financial and reputational terms.

Is ROI too generic?

The problem is, although there is lots of evidence out there on the link between health and productivity, it's largely meaningless when applied to individual companies due to all their various nuances. It could be argued that 'efficiency' measures of productivity (the traditional input / output equation) need to be used in conjunction with 'effectiveness' measures.

In other words, those that take into account output quality, employee and customer satisfaction, training or resources

used and the demand for a product or service. For example, despite organisations as a whole striving to achieve high level goals and objectives, the functions that make up an organisation will each operate to achieve their own relative goals. With this in mind, work quality is often as important, if not more so, than quantity – particularly given the increase in globalisation and consumer demand for value.

The same goes for employee benefits. Return on investment (ROI) might give you an industry standard figure but what does it tell you about quality? Outcome measures can be much more tailored to individual corporate need.

For example, you wouldn't put in place management training

and then measure success in monetary terms. Instead you'd assess whether your managers were performing well and teams were happy.

Likewise, if you identified a need in the workplace for physiotherapy and osteopathy services to help tackle short-term absences due to musculoskeletal issues, it makes more sense to put those services in place with a clear idea of what you are trying to achieve (the outcome) and then assess whether they're helping to reduce short term absence over time.

As opposed to the current trend of having to prove ROI before senior leaders will even sign off the initiative. The Simplyhealth Health and Wellbeing Guide 2017 found that the responsibility for approving employee benefit packages sat with the CEO / Managing Director in the majority (45%) of instances, whilst 32% said HR Director / Manager and in 21% of cases the Finance Director held final sign off responsibility.

"A focus on employee health pays in both financial and reputational terms"

Perhaps if those same senior leaders were presented with more evidence of need and clearly defined and tailored outcome measures, this hurdle could be overcome.

Whilst this might not be an area that many intermediaries are familiar with, it's a rapidly growing requirement as more companies seek to define and implement a wellbeing strategy. And it's worth noting that providers are ready, willing and able to help.

Price & obligations

It's telling that the majority of companies (45%) still choose what benefits they offer staff based on value for money

considerations as opposed to something that will be used regularly by employees (33%), according to Simplyhealth's research¹.

Legal obligations obviously dictate the types of benefits included too. For example, employers have a duty to assess the risk of stress-related illnesses in the workplace and take reasonable measures to control it. Plus if employees work with display screen equipment, their work areas should be assessed for risks and training must be provided. Employees are also entitled to request the full cost for an eye test and a basic pair of prescription glasses as regularly as an optician recommends.

However, these are minimum legal obligations and employers would be well advised to go above and beyond this by introducing a robust employee benefits package.

Understand employee needs

In order to ensure employees are engaged with benefits, using them and valuing them – and, hence, the business is also reaping the rewards - it's vital that employee needs and opinions are taken into account. This seems obvious but is so often missed. Almost half (43%) of HR professionals currently base their employee benefits research on simple web searches, according to Simplyhealth's research¹.

A good benefits provider will work with intermediaries and clients to help structure a benefits package suited to needs. They will help with internal benchmarking, putting a stake in the ground before the benefits are introduced and help companies define their goals so that outcomes measures are clear. They'll also offer insight

into performance over time. This could include management information such as the number of sign ups and level of usage broken down by individual benefit, plus qualitative feedback from employees.

All of this will help to provide a clear picture of the ongoing success of a company's health and wellbeing strategy, which can be fed back to the leadership team. This information can also help clients to build further business cases to introduce additional measures or extra employee benefits.

Act now

Wellbeing is not legislated at present but it's not beyond the realms of possibility that we get to a stage where companies are legally bound to report publicly on employee wellbeing. Government is reportedly mulling over such an eventuality.

In the meantime, forward-thinking companies are pre-empting things

and doing it anyway. And why not? It shows to shareholders that the company cares about its staff. That, in turn, helps keep a lid on the high costs of recruitment and retention, helping ensure that staff are healthy and happy with the obvious knock-on effect on both productivity and corporate reputation.

Whilst it's difficult to make a direct correlation between all of that and profit figures, it's telling that the FTSE 100 companies that include reference to 'mental health' or 'wellbeing' more than twice in their annual reports enjoyed a mean profit of three times as much as those that didn't include such phrases².

In short, employee health and wellbeing is no longer a nice-to-have, it's now a corporate essential. ¹¹¹

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¹ Health and Wellbeing Guide 2017, Simplyhealth (2017)

² Profits rack up for FTSE 100 firms with eye on mental health, study finds, The Telegraph (Oct 2017)



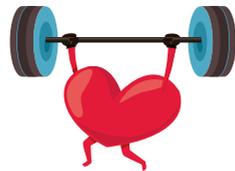
HOW HEALTH IMPACTS PRODUCTIVITY

There's a strong relationship between being healthy and being productive at work, according to research. In fact, engaging in just one unhealthy behavior can lead to a decrease in productivity. Here's a look, by the numbers:



66%

Reduced productivity among employees with **poor diets** versus those who regularly eat whole grains, fruits, and veggies



50%

Reduced productivity among employees who **only exercise occasionally** versus those who exercise regularly



28%

Reduced productivity among **employees who smoke** versus non smokers



77%

Percent of productivity loss that is attributable to **health-related factors**



\$63.2bn

Estimated annual cost to U.S. businesses for lost productivity attributed to **sleep deprivation** alone



90%

Number of business leaders who agree that **wellness directly impacts** employee performance and productivity

Source: ZeroCater

TOP TIPS FOR COMMUNICATING BENEFITS

Employers can have the best employee benefits package in the world, but if it isn't communicated well, employees won't use or benefit from it. **Camilla Shaw, Head of Corporate Services at Simplyhealth**, explores the best ways intermediaries can support businesses to engage with their employees and build a positive workplace culture

Communicating benefits to ensure employees know they exist, use and value them seems like such an obvious thing to do, yet so often overlooked or just given cursory attention via an off-the-shelf brochure or employee handbook.

As with all things in life, what sparks the interest of one person won't do a jot for another. So it is with communications. The most

important aspect is to understand the audience, what interests and motivates them. Only then can communications be tailored to suit.

This is no mean feat for employers considering the multigenerational needs and interests of today's workforce, as highlighted in the article on pages 4-6 of this guide. But with many providers now offering communication tools and support, there is much that

intermediaries can do to help their clients in this regard.

The starting point is to work with HR to help segment the workforce so communications can match where employees are in their life journey.

Next consider the communications media – or channels – that are available to a particular employer to help get those messages across. For example, Instagram

WHAT CAN EMPLOYERS DO TO HELP EMPLOYEES FIND THEIR WAY?



IDENTIFY: Distinguish the different groups within your workforce and understand their financial needs and priorities.



DESIGN: Review the current benefits programme. Does it match employee needs? Can you redesign it to deliver better value for money and more engagement?



PERSONALISATION: Reshape existing budgets to offer more personal choice and flexibility for employees to prioritise and address different financial objectives throughout their careers, from those leaving university through to individuals approaching retirement.



ENGAGEMENT: Segment, personalise and tailor communications to engage and support employees at the right time, with the right messages, and target the short, medium and long-term financial goals and saving opportunities.

Source: Willis Towers Watson's 2015/16 Global benefit attitudes survey, published in February 2016

channels to allow employees to pick and choose.

Consider the timings of communications too. For example, employees might be more receptive to communications about finance and savings in January when the bills hit and after shock of Christmas takes hold. Consider also timing communications to coincide with various national awareness days, thereby riding the wave of national media campaigns to help get the message across. See the information below for the vast array of national awareness days that might be relevant to the workplace and employees.

Branding is also important. The communications need to be representative of the employer. Again, providers can - more often than not - help in this regard with employer-branded material.

campaigns can prove popular among younger workforces as can tools such as video, while printed communications that employees can take home to look at and

discuss with their families can help to engage families with children. Everyone is different though, so the most important aspect is to offer the information via various

Finally, seek out and listen to employee feedback to get an idea of what communications are working and how they can be evolved. **HI**



2018

EMPLOYEE COMMUNICATIONS CALENDAR

Source: www.awarenessdays.com

JANUARY

Dry January

FEBRUARY

- 9: National toothache day
- 17: Random acts of kindness day
- 27: Eating disorders awareness week

MARCH

- 12: Nutrition and hydration week
- 20: World oral health day
- 20: International day of happiness
- 26: World autism awareness week
- 30: World bipolar day

APRIL

IBS awareness month
Stress awareness month

- 6: Walk to work day
- 7: World health day
- 23: Family safety week
- 28: World day for safety and health at work
- 30: National gardening week

MAY

- 1: World asthma day
- 7: Red Cross week
- 11: Eat what you want day
- 14: Learning at work week
- 14: Mental health awareness week
- 14: Coeliac disease awareness week
- 15: National smile month
- 17: World hypertension day

- 21: Dementia awareness week
- 29: World digestive health day

JUNE

- 2: March for men
- 11: Men's health week
- 11: Carers week
- 11: Diabetes awareness week
- 12: Cervical screening awareness week
- 14: World blood donor day

SEPTEMBER

- Blood cancer awareness month**
- Childhood cancer awareness month**
- Vascular disease awareness month**
- 10: World suicide prevention day

- 11: Sexual health week
- 17: National eczema week
- 18: European health & neck cancer awareness week
- 18: National eye health week
- 21: World Alzheimer's day
- 29: World's biggest coffee morning

OCTOBER

- Breast cancer awareness month**
- 2: National work / life week
- 6: World smile day
- 10: World mental health day
- 12: World sight day

NOVEMBER

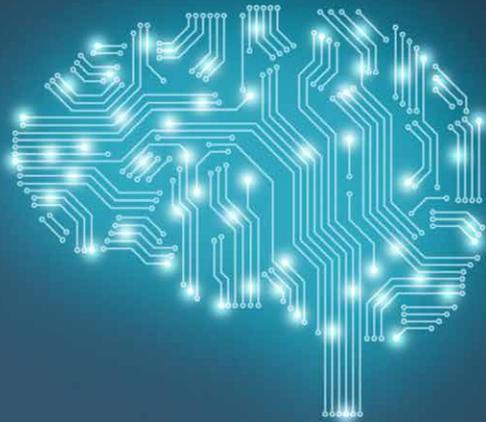
- Lung cancer awareness month**
- November – men's health**

awareness month
Mouth cancer action month

- 13: World kindness day
- 13: Alcohol awareness week
- 13: Self care week
- 13: Financial capability week
- 14: World diabetes day
- 15: Blue Wednesday
- 17: Children in need
- 24: Carers' rights day

DECEMBER

- 1: World AIDS day
- 1: Anger awareness week
- 1: Decembeard
- 3: International day of persons with disabilities
- 5: International volunteers day



THE SILENT CAUSE OF ABSENTEEISM

Mental health issues, caused by workplace stress, are increasingly being identified as a concern to employers and research shows it is the largest cause of long-term employee absence. **Camilla Shaw, Head of Corporate Services at Simplyhealth**, discusses how intermediaries can help employers to address this problem

Workplace stress seems to have reached epidemic proportions. And if reports of a teenage mental health crisis are anything to go by, the situation is not going to get any better when the next generation reach working age. It's no wonder then that the government is trying to encourage more employers to help foster a culture of good mental health in the workplace.

Stress is the most common cause of long-term absence and is the second most common cause of short-term absence after minor illness, according to the most recent Chartered Institute of Personnel & Development (CIPD) Absence Management survey, in association with Simplyhealth¹.

What's more, nearly a third of respondents to this survey reported that stress-related absence in their organisation had increased over the preceding year.

Added to this is the growing problem facing today's teenagers. The Independent² reported on a survey by family support organisation Parent Zone, which found that rates of depression and anxiety have increased by 70% in the past 25 years.

Employer responsibilities

To help stem this rising tide, the government is encouraging employers to think proactively and prevention through the use of education, awareness and early intervention.

The recently published Stevenson Farmer review *Thriving at work*³, commissioned earlier this year by the Prime Minister, included useful recommendations – namely the six 'mental health core standards' to help employers build good mental health into the fabric of their organisation. It also went as far as to say that large employers and the public sector should demonstrate best practice through external reporting and designated leadership responsibility.

This follows calls on the government last year by the CIPD⁴ to establish human capital management reporting standards for companies. Such standards, embedded into annual reporting, would

A DISCONNECT PERSISTS BETWEEN THE VISION FOR WORKPLACE MENTAL HEALTH AND THE REALITY



91% of managers agree that what they do affects the wellbeing of their staff



84% of managers accept that employee wellbeing is their responsibility



Only 58% of employees feel that their line manager is genuinely concerned about their wellbeing



Less than a quarter (24%) of managers have received any training in mental health...



...and 49% of managers would welcome some specific basic training in mental health

Source: Mental Health at Work Report 2017, BITC

“The government is encouraging employers to think proactivity and prevention”

measure, report and benchmark the health and wellbeing of employees. It also called on employers to shift from one-off wellbeing initiatives to a proactive employee wellbeing programme.

The payback

Indeed, around a quarter of FTSE 100 companies are already doing this, according to an article in The Telegraph⁵. And it seems to be paying dividend, with the quarter that

include reference to ‘mental health’ or ‘wellbeing’ more than twice in their annual reports enjoying a mean profit of three times as much as the three quarters that didn’t include such phrases.

And it’s not just the biggest companies that can reap the rewards from a focus on wellbeing and prevention. When you consider that absence costs £522 per employee, per year, according to figures from the CIPD Absence Management survey, it’s easy to see that much smaller – and often more cash strapped – companies would benefit too.

The business case seems clear. Why is it then that many employers are still resistant to putting in place the benefits and services that might help?

Part of the problem is due to a lack, in many cases, of senior management buy-in. According to a survey entitled Wellbeing in the Workplace, published by HR publication Reward Guide earlier this year, 89% of respondents said their senior management team was committed to the wellbeing of staff. Yet at the same time, the biggest barriers to building a wellbeing strategy were found to be ‘justifying return on investment’ (57%) and ‘lack of senior management commitment’ (31%).

Added to this dichotomy is the stigma that surrounds mental health, meaning that it can be difficult to identify the problem, let alone tailor appropriate solutions. Business in the Community’s Mental Health at Work Report 2017 revealed that less than a quarter (24%) of line managers have received any training in mental health. Just 13% of employees felt able to disclose a mental health issue to their line manager. Of those that did disclose a mental health issue, 15% were subject to disciplinary procedures, demotion or dismissal.

“Stress is the most common cause of long-term absence”

“Large employers and the public sector should demonstrate best practice through external reporting”

So how can intermediaries help?

Gain leadership buy-in

Senior leaders need to see results in monetary terms so return on investment (ROI) is essential. Employee benefit providers can help in this regard, working in partnership with intermediaries and clients to design early intervention and prevention systems, supported by management information based on analysis of benefit and service usage – a counselling helpline or virtual GP service, for example – and claims data, along with staff feedback.

Reduce the stigma

Help companies foster a culture of openness and understanding via support

in education and awareness services and campaigns. Providers can help in this regard and should be leveraged wherever possible.

Focus on prevention

Investigate ways to ensure that clients provide employees with ready access to preventative benefits and services, such as access to a GP on demand, telephone or face to face counselling sessions or financial advice, money back on healthcare bills, such as eye tests, dental treatment, physiotherapy or osteopathy.⁶

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- ⁵ Profits rack up for FTSE 100 firms with eye on mental health, study finds, The Telegraph (Oct 2017)

A STEP-BY-STEP GUIDE TO BUILDING THE BUSINESS CASE

1. UNDERSTAND THE CLIENT’S MOTIVATIONS

It’s one thing to be cognisant of the fact that a focus on employee mental health simply makes good business sense, but another to really get to grips with what motivates an individual company. Before doing anything else, understand your client’s business objectives. Then you can put the need into terms that will easily translate.

2. ESTABLISH THE NEED

In order to ensure a benefits package that’s fit for purpose and backed by the leadership team - because more often than not, they’re the ones signing it off - it’s vital to first assess employee need. This should ideally be done via a combination of data - in the shape of claims information from the employer’s existing health insurance, income protection or health cash plan providers - plus feedback from employees themselves gained via both quantitative (surveys) and qualitative (focus group) means.

3. IDENTIFY THE GAPS

Where there are gaps between the services in place and employee and business needs, help the client put together a robust plan of action with the necessary evidence in place and make it clear how this supports business strategy (i.e. reducing absence, building and maintaining corporate reputation). It’s crucial that this includes an indication of what outcomes are expected as a result of the initiatives suggested and how this will be measured. For example, if mental health awareness training is an identified need for line managers, the outcome might be increased understanding and awareness. This can be measured via feedback after the event and in 6 months’ time, plus via an assessment of whether teams are more happy and absence and presenteeism reduced.



ROB WHEATER

New Business & Technical Development Manager,
Chase Templeton

Q: What do you look for when comparing health cash plan products and providers?

A: Wellbeing offerings are key as there is very little difference between each provider's pricing structure and core benefits. Whilst cost is still a determining factor, we're now keen to see what added value benefits are on offer. The most popular of these is currently access to GP services, although this tends to be quite geographically biased to companies in London and the South East in particular.

Sustainability of pricing also has to be a key consideration when you consider that an employer may be subject to benefit and/or pricing changes at renewal, with some providers moving towards a claims rated model rather than the traditional community rated structure. Providers have to be more innovative and this is achieved by adding wellbeing benefits into the mix. It allows us to demonstrate to clients the added value they are getting when faced with unexpected increases in cost and HR are very receptive to this.

Q: Is it becoming more common for senior leaders to get involved in the decision making process around benefits?

A: In our experience, it's still typically HR – or HRD – driven. Initially, they mainly want to look at price and core benefits only. But we try to be as helpful as possible by proactively bringing other ideas to the table, providing them with valuable information to help populate a business plan, such as here's how the benefits will add value and this is the expected impact on the workforce. This kind of discussion is very well received by HR.

Q: Are you noticing an increased demand for mental health focused products and services?

A: We're not seeing an increasing demand as such as there are sufficient products out there packaged within benefits such as life insurance, income protection and private medical insurance in the form of Employee Assistance Programmes. In many instances, however, such products aren't communicated well or might not be available to the wider workforce. HR likes to provide mental health support – it's a nice to have – as long as it's a core benefit. But, given the option, cost is important too so its 50:50 whether they'd choose to include it as an add-on, or distribute to a certain workforce population to avoid duplicating the benefits elsewhere.

Q: Do you ever get involved in helping clients with benefit communications?

A: We proactively encourage it. Employees need to be crystal clear on how a policy works and what's included in order to avoid any misunderstandings and potential disappointment. For example, the claims process for health cash plans is sometimes seen as complicated but it really isn't. As an intermediary, we are often reliant on our contact within a business to communicate the processes effectively, and this isn't always possible. That's why we go to great lengths to help employers ensure a good understanding amongst the workforce, primarily through tailored briefing papers and employee seminars. Getting the message across clearly and concisely is paramount.



TRACEY GATES

Healthcare Consultant,
Stackhouse Poland Limited

Q: Are you finding that an increasing number of smaller companies are using your services these days?

A: Definitely, with employee benefits being so important these days we are seeing smaller companies seeking a cost effective healthcare benefit.

Q: Do you get involved in designing employee benefits according to employee need? Or do clients mainly ask you to negotiate deals and special rates?

A: Our clients' main concern at present appears to be premiums and best value. However some clients do require more structure around benefits to suit employee needs so we tailor benefits to meet their business needs & budget.

Q: Do you find that companies are becoming more proactive with regards to wellbeing strategy? Or responding to isolated issues?

A: Absolutely, wellbeing strategies are a big topic for companies. Wellbeing days and events promoting healthy living bring benefits to both employer and employee. Wellbeing events also target isolated issues such as smoking cessation, anxiety or stress.

Health cash plans can complement a wellbeing strategy as they allow employees fast access to a selection of treatments like physiotherapy or alternative therapies: treatment that employees would maybe not have fast access to otherwise.

Q: Has the interest in health cash plans grown? If so, why do you think that is?

A: The interest in health cash plans has most definitely grown in the last few years. Cash plans are a popular, affordable healthcare benefit, which employers can offer to all employees.

Q: Do clients tend to want bespoke or off-the-shelf health cash plans?

A: Cash plan providers offer a wide variety of benefit choice so most employers can find the best solution for their needs with an off-the-shelf option.

Q: What are employers' priorities - in general - when considering health cash plans?

A: Dental and optical cash back has always been a high priority as these benefits are two of the most valuable and most popular with employees.

Q: Are clients generally receptive to the added value wellbeing benefits now included (either as core or add-on) to health cash plans, such as mental health support and GP services?

A: Clients are much more receptive to the support services covered with cash plans, especially things like an employee assistance programme and the 24/7 counselling and support afforded. Plus, with the increase in waiting times for a GP appointment, access to GP services via a cash plan is becoming very popular.

SELF CARE MATTERS

The juggling act of work and caring responsibilities is having a rising negative impact on employees, particularly on their work life. It could pay dividend for employers to provide help and support for this burgeoning group, says **Pam Whelan, Director of Corporate at Simplyhealth**

Consistently, a third of total respondents to Simplyhealth's quarterly Everyday Health Tracker¹ state they have looked after others in the last three months. What isn't consistent, however, is the impact this is having on their health and wellbeing, family life and home life.

Over half of those who look after others report a negative effect on their own lives: 53% say it has affected their family life; 55% say it has affected their work life; and 55% say it impacts their health and wellbeing. These responses – particularly with regards to work life – have risen sharply in each of the previous two waves of the tracker.

A closer look at who is actually being cared for reveals that the

majority of respondents (16%) have the responsibility for looking after their partner, 13% for children and 9% for a parent.

This situation will only increase, according to charity Carers Trust, which estimates there are around seven million carers in the UK – that is one in ten people. According to the charity, by 2030 the number of carers will increase by 3.4 million (around 60%).

Employer support

So what can employers realistically do to help? Allowing flexibility in working patterns could represent a good starting point. As could, putting in place the tools employees need to help ensure they take care of their own health and wellbeing, not just that of the person in their care.

With the general understanding that responsibility for health falls on the individual (88% responding to this effect), there doesn't seem to be any place for paternalism in the workplace. Instead, it makes sense to put the tools, information and guidance in place to allow employees to make confident self-care choices.

For example, a counselling support line might be valued by carers, both the ability to speak with a trained counsellor if stress is an issue, and also the access to legal, finance and tax experts. Plus easy access and financial support to things like gym membership, bearing in mind that the physical and psychological are intrinsically linked. Also support for day-to-day health and wellbeing needs, such as visits to the dentist and optician,

IMPACT OF TAKING CARE OF OTHER PEOPLE'S HEALTH NEEDS

	HEALTH AND WELLBEING*	FAMILY LIFE*	WORK LIFE**
Yes, to a significant extent	15%	12%	17%
Yes, to some extent	40%	41%	38%
No, it hasn't really affected my own health and wellbeing	38%	36%	31%
Not sure/rather not say/not applicable	7%	11%	12%

Base: *673 UK adults aged 18+ who are involved in taking care of others; **389 adults aged 18+ who are working and are involved in taking care of others

Source: YouGov Reports Health Tracker Survey (12-15 September 2017)

could prove valuable to a carer, not to mention their dependants.

Are these the type of health services that employers actually provide? Apparently not, if Simplyhealth's Everyday Health Tracker is anything to go by. It found that the widest provided benefit is cycle to work schemes, at 24%, while 19% have a counselling service in their place of work and 14% are offered flu jabs and discounted gym membership by their employer. Just 13% are offered private health insurance and 4% a health cash plan.

Provision of workplace health services has not changed significantly across the 10 waves – so there has been no improvement in provision since May 2015 when the tracker began.

The employee view

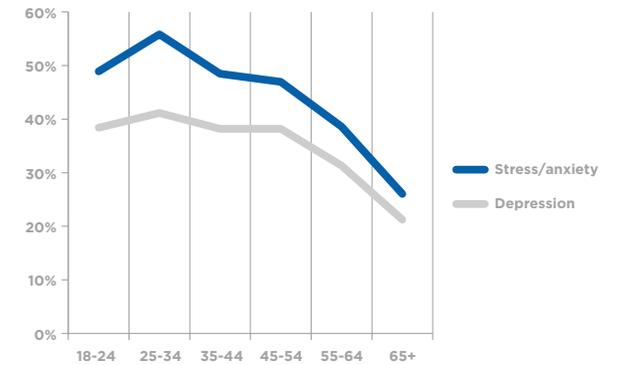
The upshot? Only 17% of full time employees rate their employer as 4 or 5 (out of 5) in terms of supporting their health and wellbeing. 20% say their employer doesn't do anything and should do more.

Overall though employees remain divided on this issue. 39% don't wish to see any change.

Future health concerns

The top future health concerns of respondents in this latest wave of the tracker were cancer, stress

PERCENTAGE RATING CONCERN FOR MENTAL HEALTH PROBLEMS AS 7+ (OUT OF 10), BY AGE



Base: 1,974 nationally representative UK adults aged 18+

Source: YouGov Reports Health Tracker Survey (12-15 September 2017)

/ anxiety and arthritis / joint pain, each scoring 43% of people rating them at 7 or higher out of 10.

Women express higher levels of concern than men across all 13 of the health problems listed, with those under 40 showing the highest levels of concern over both stress / anxiety (60% rate it as 7+) and depression (44% rate it as 7+).

Meanwhile, concerns about physical ailments tend to rise in middle age and beyond, but it is interesting to note that these concerns tend to level out or drop after the age of 65.

The health concerns with the biggest age differential are arthritis / joint pain (rated as 7+

by 25% of 18 – 24s and 49% of over 65s), strokes (16% and 37% respectively) and high cholesterol (12% and 33% respectively).

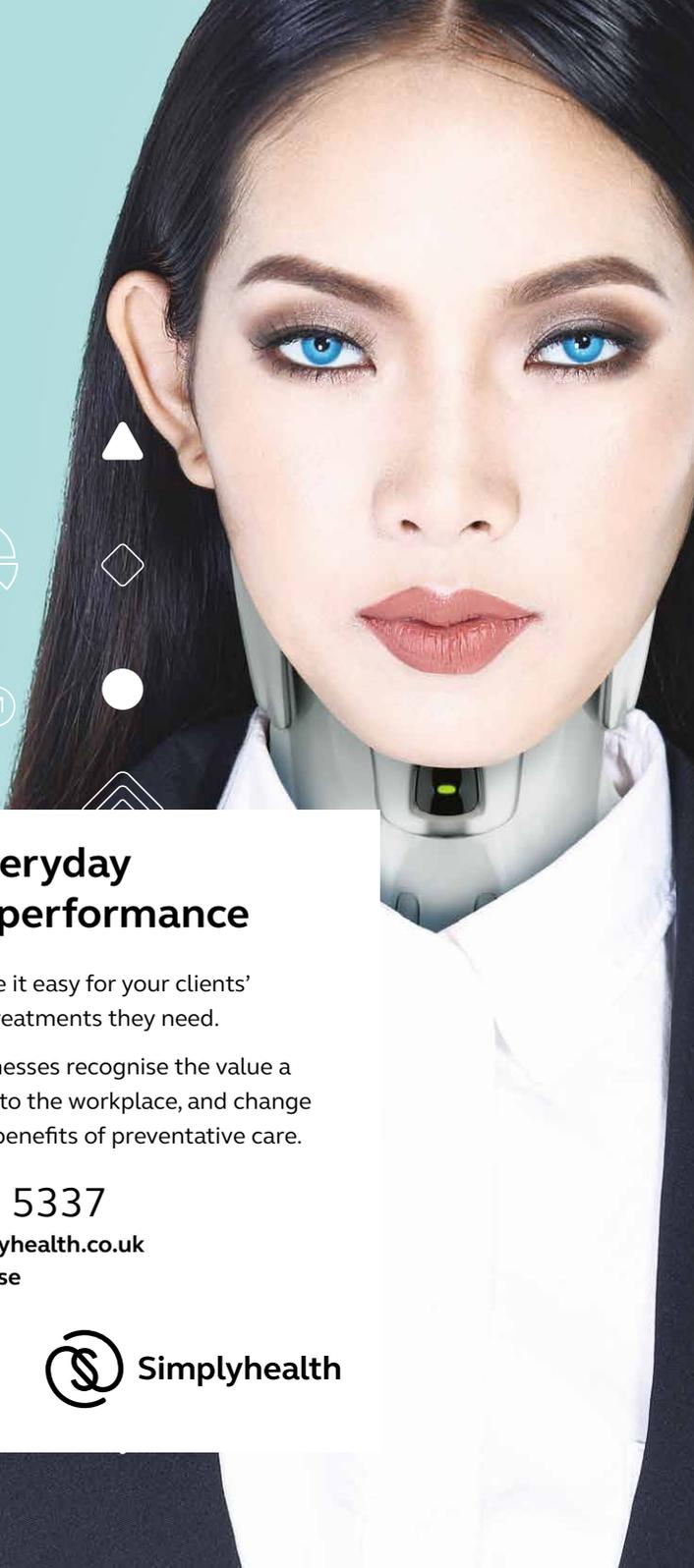
Meanwhile, concerns over mental health problems are high up to age 54 (peaking in the 25-34 age group), falling swiftly thereafter, particularly among over-65s.

Future health concerns and the impact of caring responsibilities provide useful indicators to help steer the general direction of employee benefit programmes, supplemented of course by tailored information based on each individual workforce's needs. This type of market intelligence should stand brokers in good stead to help employers structure robust and meaningful programmes. ^(H)

REFERENCES

¹ Everyday Health Tracker, Wave 10, Simplyhealth / YouGov, research carried out amongst a nationally representative sample of 1,974 UK adults aged 18+ (Sept 2017)

“Over half of those who look after others report a negative effect on their own lives”



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