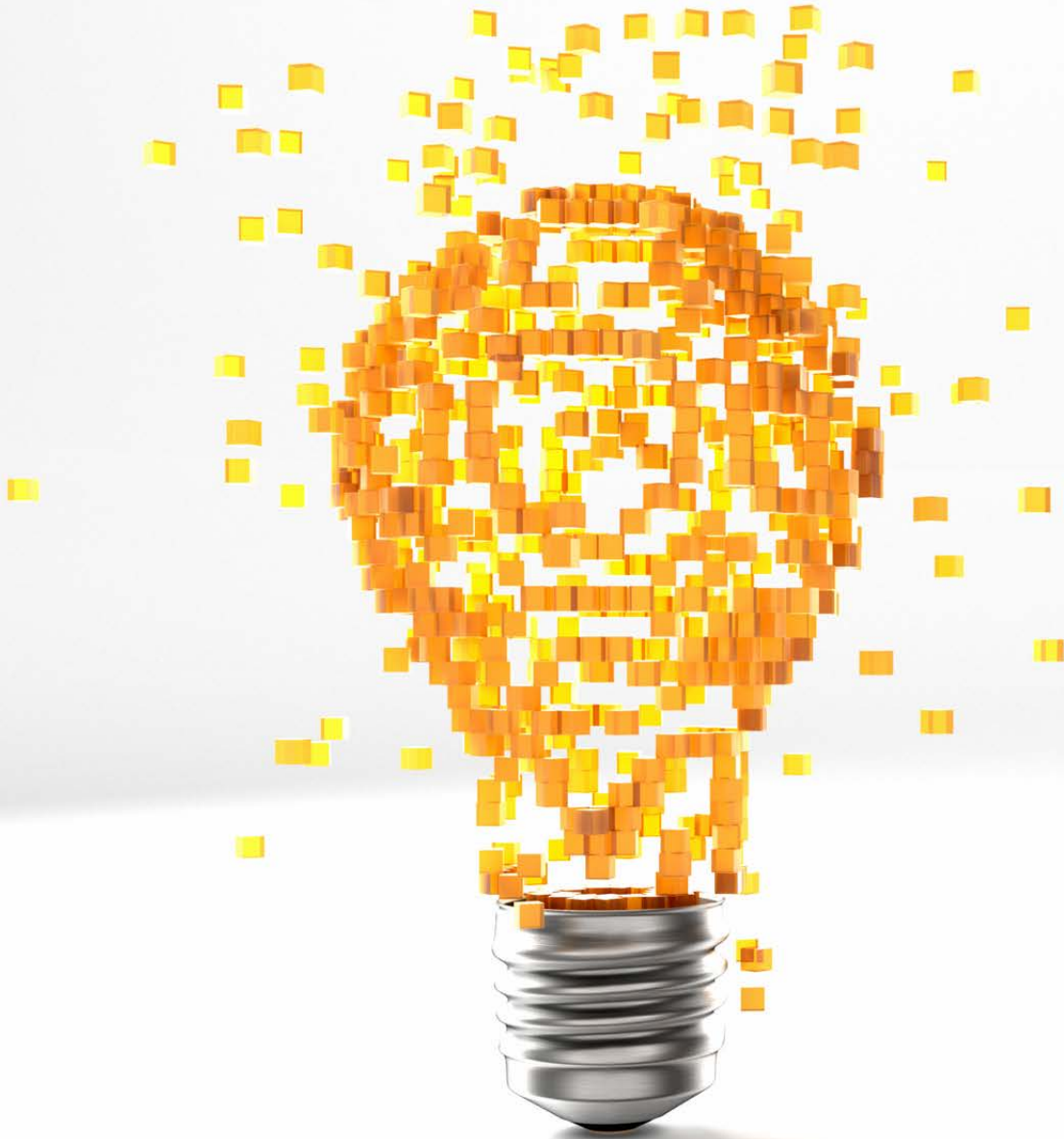


Benefits
INSIDER
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SURVEY 2023



BENEFITS IN A NEW LIGHT

**PERSPECTIVES TO HELP CRYSTALIZE AND
COMMUNICATE THE VALUE OF HEALTH BENEFITS**

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LIGHTBULB MOMENTS



Jennifer Paterson
Editor
BENEFITS CANADA

Putting a spotlight on opportunities has always been a primary goal of the *Benefits Canada Healthcare Survey*, now in its 26th year. The 2023 edition does not disappoint.

A small sampling of “aha” moments that stood out for me during two intense meetings of our multi-stakeholder advisory board include:

- The untapped and growing potential of (and desire for) navigation support, including direct, targeted (and AI-assisted) communications to plan members;
- Plan sponsors’ growing awareness of chronic disease in the workforce;
- The high incidence of chronic pain and the challenges of treatment;
- How better sleep has climbed the list of desired lifestyle changes for plan members, aligning with a high level of interest among plan sponsors; and
- A call to action for new reporting on plan members who reach coverage maximums.

Plan members’ increased appreciation of their health benefits plan was an overarching finding of the survey. While the pandemic likely served as a timely reminder of the plan’s value, the actions of plan sponsors during the pandemic to improve health benefits and wellness offerings were equally important. The survey backs up employers’ efforts to better meet members’ needs and improve access to health-care services, particularly in mental health.

The looming question is whether plan sponsors can keep it up. Sustainability has long been a concern, even more so now in the face of high inflation. Our advisory board repeatedly emphasized that strategy – with dedicated internal resourcing – must become the order of the day to protect and build upon the strides of recent years. We sincerely hope this year’s survey results help light your way forward.

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DIAMOND



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TAKING STOCK OF MENTAL HEALTH

More plan members than ever reported high levels of daily stress and almost one in five described their mental health as generally poor. Better sleep vies with more physical activity as a desired goal for improved health. Just over half of plan members currently live with a diagnosed chronic condition and a mental-health condition was the most common diagnosis. One in five experienced a major injury and/or illness in the past year. One-third of plan members received health-care services virtually over the past year, increasing significantly among those with a major injury or certain chronic conditions.

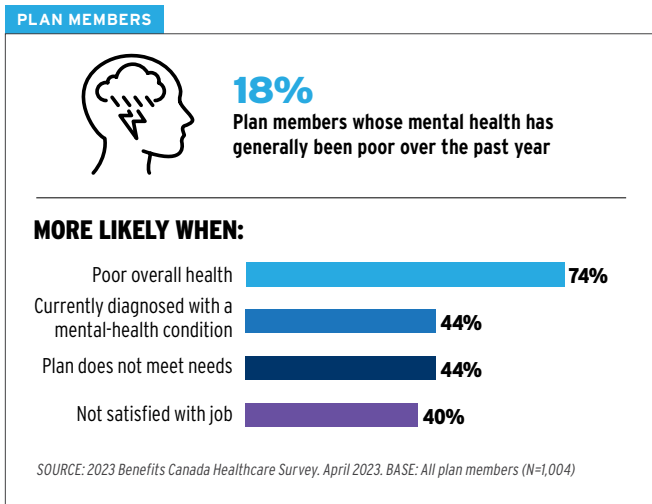
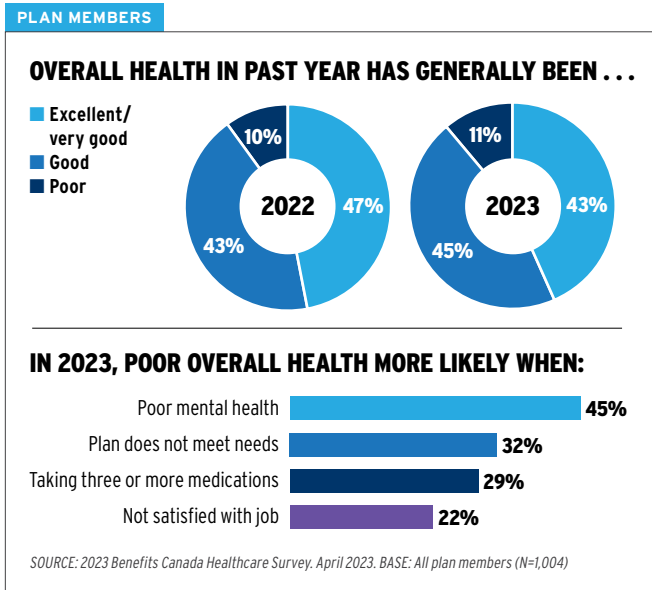
IN THIS SECTION	• HEALTH OF BODY	• CHRONIC CONDITIONS	• LIFESTYLE CHANGES
	• HEALTH OF MIND	• CLOSER LOOK AT CHRONIC PAIN	• TREATMENT
	• STRESS	• MAJOR INJURY AND ILLNESS	• VIRTUAL CARE

HEALTH OF BODY

- Nine out of 10 (89%) plan members reported their health was generally good (45%), very good (32%) or excellent (11%) over the past year.
- Consistent with previous years, reports of poor health in 2023 (11%) were higher among plan members who also described their mental health as poor (45%), felt their health benefits plan does not meet their needs (32%) and who were not satisfied with their job (22%).
- For the most part, these results have been consistent since 2018, when the question was first asked. The biggest change in reported health status occurred in 2021, during year two of the COVID-19 pandemic, when 13% of members described their health as poor, increasing from 8% in 2020.

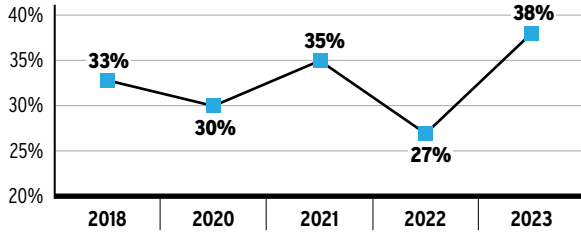
HEALTH OF MIND

- Almost one in five (18%) plan members self-reported their mental health was generally poor over the past year, compared to 22% in 2022. This surged to 74% among those who also described their overall health as poor.
- Eighteen per cent currently have a diagnosed mental-health condition such as depression or anxiety. Note that the repeated result of 18% is coincidental (i.e., members with self-described poor mental health may not be diagnosed with a condition or conversely, members with a diagnosis may describe their current mental health as good).
- Plan members with a diagnosed mental-health condition were much more likely to describe their mental health as generally poor in the past year (44%).
- As with overall health, perceptions of poor mental health were higher among members who felt their benefits plan does not meet their needs (44%) and who were not satisfied with their job (40%).



PLAN MEMBERS

EXTREME OR HIGH STRESS LEVELS OVER PAST THREE MONTHS



SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004)

PLAN MEMBERS

TOP 10 SOURCES OF STRESS, 2020 (PRE-PANDEMIC) VERSUS 2023

2020 (pre-pandemic)		Rank	2023	
Personal finances	39%	1	Personal finances	38%
Workload	34%	2	Workload	32%
Work-life balance	32%	3	Work-life balance	30%
Interactions with people at work	27%	4	Health concerns (personal or family)	26%
Personal relationships	23%	5	Personal relationships	25%
Health concerns (personal or family)	22%	6	Interactions with people at work	20%
Other work-related issues (e.g., job security)	20%	7	Other work-related issues (i.e., job security)	20%
Commuting to work	16%	8	Parenting	15%
Parenting	13%	9	Commuting to work	12%
Caring for parents/elderly family members	12%	10	Caring for parents/elderly family members	11%

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (2020 N=1,500; 2023 N=1,004)

“” ANNA FISHER FLIGHT CENTRE TRAVEL GROUP AMERICAS

“One thing that rings true is the higher baseline of stress people are experiencing. We need to operate on the assumption that our employees are at a higher risk of mental-health issues. Leadership training and supportive work environments – so employees know they can take extra breaks, for example – are more important than ever.”

MORE STRESSED OUT

- Almost two in five (38%) plan members said they experienced a high level of stress on a typical day over the past three months, up from 27% in 2022 and exceeding the previous high mark recorded in 2021 (35%).
- Members in poor mental health (65%) and poor overall health (63%) were far more likely to report high levels of stress, as were those with caregiving responsibilities (57%) or who had had a major injury or illness in the past 12 months (53%).
- The top three sources of stress – personal finances (38%), workload (32%) and work-life balance (30%) – have not changed since the question was first asked in 2018. Interactions with people at work (20%) continue to be less of a factor in causing stress, ranking sixth in 2023 compared to fourth in early 2020, before the start of the pandemic.

CHRONIC CONDITIONS IN THE PICTURE

- Fifty-four per cent of plan members currently live with at least one diagnosed chronic health condition and 59% have been diagnosed at some point in their lives.
- Plan sponsors estimated that 43% of their workforce has a chronic condition, the closest they have come to the plan members’ result since first asked in 2016, when they estimated that 32% of their workforce had a condition versus the 59% of plan members who reported ever having one. Last year, the results were 35% and 58%, respectively.

★ KEY TAKEAWAYS ★

1. Poor overall health may be a precursor to poor mental health and vice versa. The interplay between physical and mental health cannot be overstated, emphasized members of the Benefits Canada Healthcare Survey advisory board.
2. Almost one in five plan members self-reported poor mental health during the past year.
3. Reports of poor overall or mental health increased among members who also felt their health benefits plan did not meet their needs, which suggests the plan is falling short for those who need it most – or that members are not aware of what’s in the plan.
4. High levels of daily stress hit a new high and were significantly elevated among those with poor overall health or poor mental health. Moreover, the pandemic raised the baseline for what could be considered high levels of daily stress, agreed members of the board.
5. Personal finances and workload remained the top two main sources of stress.

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“ VALERIE FERNANDEZ BENEVA

“The closing gap between plan members and plan sponsors about chronic disease is good news. It also correlates with the requests we’re seeing from plan sponsors that want to better understand employees’ health and provide support to meet their specific needs. When implementing programs, we encourage employers to reach out to partners and seek best practice expertise in workplace health and wellness programs.”

PLAN MEMBERS PLAN SPONSORS

54%
Plan members who currently have at least one diagnosed chronic condition



43%
Plan sponsors’ estimate of percentage of workforce with a chronic condition

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: Plan members split sample (n=515); All plan sponsors (N=721)

PLAN MEMBERS

MOST COMMON CURRENT CHRONIC CONDITIONS*

 18% Depression, anxiety or other mental-health condition	 12% High cholesterol	 12% Arthritis
 10% High blood pressure	 10% Chronic pain	 10% Diabetes
 8% Asthma or lung disease	 8% Obesity	 6% Eczema

*Results under 5% not shown
SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: Plan members split sample (n=515)

“ BRAD LEPP CANADIAN CHIROPRACTIC ASSOCIATION

“This new data reinforces that chronic pain has a significant impact on employees and is closely associated with mental health. Chronic pain is one of the top five chronic conditions and a reliance on pharmaceutical treatment carries the risk of opioid use disorder. Put that together and we’ve really framed out a conversation about why supports for musculoskeletal health need to be a more deliberate part of health benefits plans.”

★ KEY TAKEAWAYS ★

- The gap has narrowed between plan sponsors’ estimation of chronic conditions in their workforce and the number of employees diagnosed with a condition.
- Plan members with certain conditions (e.g., chronic pain) were far more likely to report poor overall health and/or poor mental health.
- A mental-health condition, such as anxiety, is the No. 1 diagnosis for plan members currently living with a chronic health condition.
- Obesity was likely underreported due to a low rate of formal diagnosis – yet it’s the only chronic condition for which medications are not readily covered by drug plans, noted members of the board.

- The top current diagnoses were a mental-health condition such as depression or anxiety (18%), high cholesterol (12%), arthritis (12%), hypertension (10%), chronic pain (10%) and diabetes (10%) (see chart for full list).
- Just one per cent of plan members reported a current diagnosis of post-COVID-19 (also known as long COVID).
- Plan members currently diagnosed with certain conditions – i.e., chronic pain, a mental-health condition, arthritis, obesity or a lung condition such as asthma – were far more likely to also report poor overall health and poor mental health (see chart on page 9).

WHAT A PAIN

- Ten per cent of plan members reported a current official diagnosis of chronic pain, defined as pain that persists for three or more months or that flares up from time to time (e.g., migraine headaches, lower back pain). The result increases to 14% among members aged 55 and older (versus 6% for 18- to 34-year-olds).
- From 2019 to 2022, the survey asked plan members to self-report pain that “never really goes away” or flares up from time to time. The result was consistently above two-fifths of respondents (41% in 2022).
- When plan members with a current diagnosis were asked how often their pain makes it harder to get things done, the largest proportion (33%) reported this to be their daily experience. One in four (22%) said this was the case once or twice a week and 23% said a couple of times a month.
- When their pain is especially bad, most (59%) members do not take any time off work. One in four (26%) said they typically need a couple of days off, 13% require a couple of hours and 3% need a week or more.
- Members with chronic pain are far more likely to describe their overall (39%) and mental (36%) health as poor.
- The survey asked all plan members whether their work environment contributes to aches and pains such as sore

Breaking down barriers for mental-health support



Annette Kingsley
Vice-president, colleague experience
AMERICAN EXPRESS CANADA

Employees seeking support for their mental-health

challenges can face numerous roadblocks, including stigma, long wait lists for therapists and the difficulty of finding a professional whose approach works for them.

To ensure employees get help sooner, American Express Canada introduced an onsite counsellor in its Toronto head office this year. “We are constantly looking at what our colleagues need,” says Annette Kingsley, the company’s vice-president of colleague experience. “The pandemic has given us a clear direction that we need to prioritize mental health. We want to remove the stigma of asking for help or counselling.”

Adding a registered psychotherapist onsite was part of the organization’s recent refresh of its mental-health offerings and a broader focus on employee mental health. Other initiatives over the past two years include: working with its employee assistance program vendor to increase the number of covered sessions available to employees to 10 each; extending coverage to plan members’ families; introducing an app through which members can access resources and tools to help them self-manage minor mental-health issues; and adding free digital mental-health resources for employees.

The onsite counsellor, who employees can speak with at no cost, is meant to augment the American Express Canada’s paramedical coverage for mental-health practitioners and EAP program.

The company has historically offered in-office health resources and other amenities for employees. For example, the head office has an onsite wellness centre with a nurse who employees can turn to if they’re feeling unwell. The nurse runs wellness clinics with voluntary biometric, blood and other testing, flu shot clinics and performs coronavirus tests.

“The pandemic has given us a clear direction that we need to prioritize mental health. We want to remove the stigma of asking for help or counselling.”

The head office also has a multi-faith meditation room and a fitness centre in partnership with a Canadian health club company for which American Express Canada reimburses part of employees’ memberships every year. This year, the company also introduced food stipends for employees and availability of fruit and healthy snacks in the office.

The in-house psychotherapist isn’t just available to staff working at the head office; remote employees also have the option to book a virtual appointment. “Some colleagues may be at home, but they need support for an issue with their spouse or personal life, so they can meet with her while they are in the office,” says Kingsley. “Or some people would rather speak to her from home. It’s to really give colleagues that avenue to find the comfort of reaching out whatever way they need to.”

In-house counselling began in the spring and Kingsley’s team is currently focused on making employees aware of this additional option available to them. The counsellor is being introduced around the office, is hosting sessions to discuss resilience and well-being and has already been well-received by employees.

Kingsley’s team is ensuring employees know their privacy is protected and feel comfortable reaching out by emphasizing that the counsellor’s office is located in a very private area of the health centre and that American Express Canada will never have access to data on who attends a session.

“The feedback we have received so far has been positive,” she says. “The journey to removing the stigma attached to mental health is a continuous dialogue and reinforcing that it’s OK to say, ‘I’m not OK,’ has and will continue to be a priority for us.”

PLAN MEMBERS

POOR OVERALL HEALTH AND POOR MENTAL HEALTH, WITHOUT CHRONIC CONDITIONS OR WITH SELECTED CURRENTLY DIAGNOSED CONDITIONS

Poor overall health		Poor mental health	
No chronic condition	4%	No chronic condition	10%
Asthma/lung condition	18%	Arthritis	25%
Arthritis	27%	Obesity	30%
Obesity	27%	Asthma/lung condition	35%
Mental-health condition	28%	Chronic pain	36%
Chronic pain	39%	Mental-health condition	44%

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004)

PLAN MEMBERS



33%

Plan members whose chronic pain makes it harder to get things done on a daily basis

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: Plan members with chronic pain (n=58)

muscles or stiff joints: 65% agreed, increasing to 78% among those currently diagnosed with chronic pain.

- Plan members aged 18 to 34 were more likely to state their work environment contributes to aches and pains (76%), as were those who work in physically demanding jobs such as manufacturing and construction (76%).

★ KEY TAKEAWAYS ★

- Chronic pain was the third most common condition among plan members and it affects the daily functionality of approximately one in three who have been diagnosed.
- Fear of stigma causes people to internalize and normalize “invisible” chronic conditions, such as anxiety or pain, rather than seek treatment, observed the board.
- The incidence of a major injury was higher in plan members aged 18 to 34, a result that can be used to help educate this age group of the value of disability benefits, suggested board members.



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ACUTE MATTERS

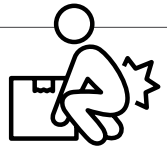
- Fifteen per cent of plan members experienced a major injury that required rehabilitation in the past 12 months. Of them, 40% had to have surgery.
- The incidence of injury was highest in the sectors of health/social services (25%) and manufacturing/construction/skilled trades (20%).
- Six per cent of members suffered a major illness that required a significant time off work in the past 12 months.
- Combined, 19% of plan members had suffered a major injury and/or a major illness in the past 12 months.

DESIRED LIFESTYLE CHANGES

- Almost all (94%) plan members would like to improve upon at least one thing to be healthier.
- The top five areas for self-improvement were physical activity (46%), sleep (41%), healthy eating (38%), weight reduction (34%) and stress management (33%) (see chart on next page for full list).
- Not unexpectedly, members with a diagnosed mental health condition felt more strongly about improved stress management (50%) or mental health (55%). Those with chronic pain were also more likely to cite stress management (49%) and those with obesity were more likely to cite mental health (41%).

PLAN MEMBERS

65%
Plan members who agreed their work environment contributes to general aches and pains



MORE LIKELY WHEN:



SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004)

PLAN MEMBERS



15%

Plan members who experienced a major injury over the past year



6%

Plan members who suffered a major illness over the past year

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004)



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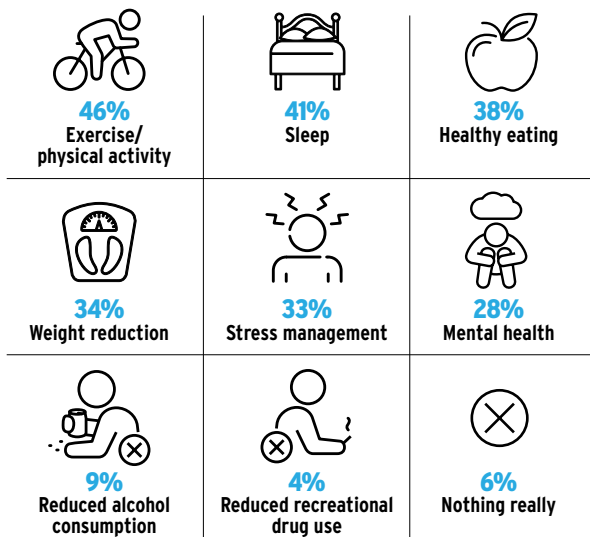
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STEVE LABERGE GREENSHIELD

“Employee assistance programs are evolving to capitalize on virtual care and support mental health sooner, to prevent crises. But they’re generally underutilized. Then the next frontier is integrating the EAP with other health-related services, including benefits plans, so plan members can seamlessly transition between the services. That will go a long way to improve access and enable continuity of care.”

PLAN MEMBERS

MAIN THINGS MEMBERS WOULD LIKE TO IMPROVE UPON TO BE HEALTHIER



SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004)

PLAN MEMBERS

MEMBERS WHO TAKE THREE OR MORE MEDICATIONS REGULARLY



SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004)

CARLEE BARTHOLOMEW RBC INSURANCE

“It’s encouraging to see the proportion of people using benefits for mental-health counselling as part of their treatment for a chronic condition, an illness or an injury. They recognize they need support both physically and mentally. This also really shows the value of providing that dual level of coverage.”

- Results in Alberta stood out in three areas: sleep (a high of 50% versus a low of 30% in Quebec), mental health (40% versus 20% in B.C.) and reduced alcohol consumption (16% versus 4% in Quebec).

TREATMENT OPTIONS

- Among plan members with a current chronic condition, 79% take at least one medication on a regular basis; 32% take three or more medications (compared to 20% of all plan members).
- The top components of treatment for members with a chronic condition were medication (47%), healthier eating (38%) and more physical activity (35%). Mental-health counselling (16%) and paramedical services (15%) followed at some distance.
- Almost one in five (18%) are not doing anything currently to treat their conditions.
- When asked what they’d like to do more of as part of treatment, members most often cited healthier eating (43%) and physical activity (42%), followed at some distance by medication (26%) and paramedical services (21%).
- Results differed somewhat for members with a major injury. Treatment modalities were more evenly spread out and paramedical services topped the list of what members would like to do more of (see chart on page 13).



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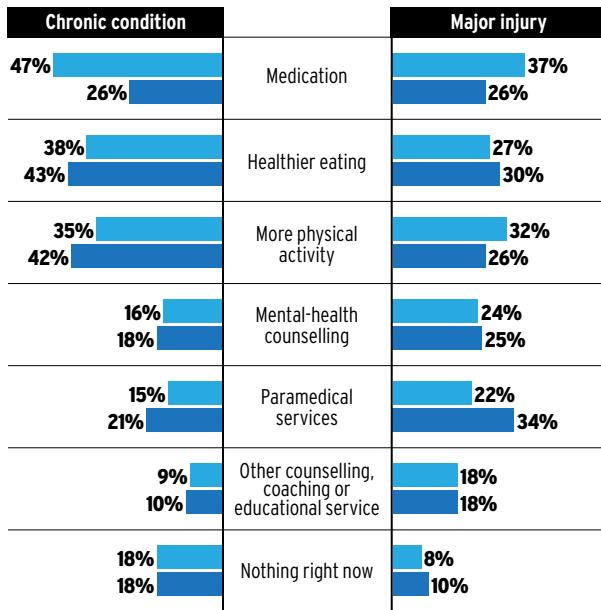


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PLAN MEMBERS

WHAT MEMBERS CURRENTLY DO AND WHAT THEY'D LIKE TO DO MORE OF TO TREAT THEIR CONDITIONS

■ Currently do ■ Would like to do more of



SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: Plan members with current chronic condition (n=298); plan members with major injury (n=125)

WHAT'S UP WITH VIRTUAL CARE

- One-third (34%) of plan members received health-care services virtually (by phone or computer) over the past year, down from 41% in 2022 and 43% in 2021 during the height of the pandemic.
- Members recovering from a major injury (68%) were much more likely to have used virtual care. As well, those who described their mental health as poor (43%), with caregiving responsibilities (45%) and those with children under the age of 18 (44%) were more likely.
- Among members currently diagnosed with a chronic condition, the use of virtual care was highest among those with a mental-health condition (50%), a lung condition such as asthma (49%) and chronic pain (48%).

★ KEY TAKEAWAYS ★

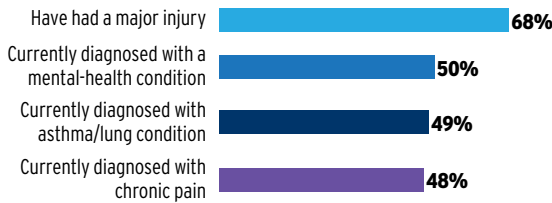
13. Four out of five plan members with a chronic condition regularly take at least one medication; almost one in three take three or more.
14. After exercise, better sleep is the top priority for plan members who would like to improve their health. Members of the advisory board noted sleep greatly benefits both mental and physical health.
15. Plan members with a major injury were more likely than those with a chronic condition to include mental-health counselling, paramedical services and other counselling or coaching services as part of treatment.
16. For both chronic conditions and major injuries, plan members would like to use more paramedical services than they currently do, which raises the question about whether current coverage levels are enough, observed the board.
17. Plan members with a major injury, a mental-health condition, asthma and chronic pain were more likely to have accessed health-care services virtually.
18. Given the connection between physical and mental health, as well as plan members' desire to use multiple treatment modalities and improve lifestyle behaviours, navigation support or the coordination of care can be regarded as vital to achieve best possible health outcomes, summarized the board.

PLAN MEMBERS



34%
Plan members who used virtual health-care services in the past year

MORE LIKELY WHEN:



SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004)

VICKY LEE TELUS HEALTH

“Plan members want to make lifestyle changes and use more non-pharmacological treatments. And evidence shows that preventative care can avoid negative outcomes and offset some of the spend on the drug side. While behaviour change can also be very difficult, these results remind us that efforts to support it are a step in the right direction.”

Multi-faceted strategy boosts appreciation of benefits



Sarika Gundu

Director, Canadian health and welfare benefits
BANK OF MONTREAL

“We wanted to make sure what we were going to offer was inclusive, flexible and designed with employees in mind.”

It has been a significant year for BMO, with the organization making major enhancements to its Canadian group benefits plan to recognize and accommodate the unique needs of employees.

In 2023, BMO boosted its coverage for fertility drugs to a \$20,000 lifetime maximum, up from \$15,000; added a \$20,000 lifetime maximum for fertility treatments and services, including egg storage and freezing, genetic testing and in-vitro fertilization; and financial assistance up to \$20,000 each for surrogacy and adoption costs.

“It was important for us to recognize there are different paths to becoming a parent,” says Sarika Gundu, BMO’s director of Canadian health and welfare benefits. “We wanted to make sure what we were going to offer was inclusive, flexible and designed with employees in mind.”

BMO also introduced gender affirmation supports, ranging between a \$25,000 and \$50,000 lifetime maximum depending on which of the five benefits options employees choose during the selection process. Part-time employees can receive up to a \$10,000 lifetime maximum. The benefit covers surgical procedures not offered under provincial health care, such as Adam’s apple reduction, laser hair removal, vocal surgery and facial feminization or masculinization.

The company’s third major change was to boost its annual mental-health coverage to \$7,000 for employees and their eligible family members, up from \$3,000 previously. “We recognize that having that financial assistance is so important. When you’re trying to access mental-health services, sessions with a psychologist can be \$200 per session, maybe more,” says Gundu. “It’s important that regardless of which medical option you choose, you still have [that financial support].”

The enhancements – which also included a host of other

new benefits at no cost to employees such as virtual health care, virtual tutoring, internet-based cognitive behavioural therapy and access to the Headspace app – were a result of a review of the Canadian benefits landscape, as well as listening to what employees were looking for from their plans.

To ensure employees are confident about their benefits choices and understand the new offerings, BMO paired its roll-outs with a comprehensive communications strategy. Gundu’s team hosted webinars, created short videos for annual enrolment and completely redesigned its benefits guide to ensure it was “simplified and super approachable,” so employees had multiple ways to access information. Her team also partnered with BMO’s human resources team to ensure they understood the offerings and could help amplify the messaging.

In May, the bank also introduced a mental-health guide for employees in Canada and the U.S., which serves as a one-stop shop of both internal and external mental-health resources, including information on how to manage their own mental health, how to support children and what warning signs to watch for, as well as information on where to find professionals to speak with. The guide is available on BMO’s online wellness hub.

“We can give them [more coverage], but we don’t want them to have to Google where to go,” says Gundu. “Financial assistance is important, but so is access.”


The changes are still new, but she says BMO is already seeing employees start to use the new fertility benefits and feedback across the board has been positive. “What we’ve been hearing across the board . . . is that employees feel cared for. Having that suite of flexible and inclusive offerings is giving them a proof point that we care about their well-being.”

DOUBLE-EDGED SWORD OF PANDEMIC

Plan members think more highly of their health benefits plan than they did before the pandemic; on the other hand, plan sponsors were most concerned about inflation’s impact on the effectiveness of their health benefits plan and felt that increased coverage levels to keep pace with inflation would be the most important improvement to their plan. Indeed, half of plan members reported the coverage level of at least one benefit fell short and limited their ability to get treatment.

IN THIS SECTION	<ul style="list-style-type: none"> • EVALUATION • BENEFITS OR CASH? • TOP CONCERNS • CLOSER LOOK AT COSTS • SPECIALTY DRUGS • BENCHMARKING 	<ul style="list-style-type: none"> • CHANGES TO PLANS • COMPONENTS OF PLAN • VIRTUAL CARE • SPENDING ACCOUNTS • UTILIZATION • COVERAGE LEVELS 	<ul style="list-style-type: none"> • OUT-OF-POCKET EXPENDITURES • DESIRED BENEFITS • UNDERSTANDING OF BENEFITS • COMMUNICATIONS • TARGETED COMMUNICATIONS
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PLAN MEMBERS



72% Plan members who agreed they appreciate their health benefits plan more today than before the pandemic

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004)

PLAN MEMBERS

77% Plan members who described the quality of their health benefits plan as excellent or good

HIGHS+LOWS

86% Virtual care included in plan	Virtual care not included	70%
85% Mental health excellent/very good	Mental health poor	66%
83% Understand plan extremely/very well	Do not understand plan	57%
81% Workplace wellness culture	No workplace wellness culture	60%
81% Satisfied with job	Not satisfied with job	55%

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004)

“” **DUSTIN HUNT** | IA GROUPE FINANCIER

“Many plan sponsors really stepped up during COVID, introducing virtual care and more benefits for mental-health and preventative care. Yet many are now struggling with growing financial pressures. The next few years will focus on finding the right balance between maintaining a value proposition for employees and financial sustainability.”

- A PANDEMIC SILVER LINING**
- Almost three out of four (72%) plan members agreed they appreciate their health benefits plan more today than they did before the pandemic.
 - This result is generally consistent across all cross tabulations. The biggest variation occurs regionally, with a high of 85% in Atlantic Canada.
 - This “pandemic effect” similarly appears to be in evidence when plan members were asked to describe the quality of their health benefits plan: 77% said it was excellent or good in each of 2023 and 2022, up from 68% in each of 2021 and 2020. In both 2022 and 2023, the gains came from fewer plan members describing the plan as adequate.
 - Only 4% described their plan as poor, consistent with previous years.
 - Plan members who understand their plan extremely or very well (83%) were much more likely to describe the plan as excellent or good than those who do not understand their plan (57%). Mental-health status and other factors also influenced results (see chart).
 - Plan sponsors, meanwhile, appear to be less positive: 72% described their benefits plan as excellent or good, down from 80% in 2022 and in 2020.
 - Plan sponsors with a plan that includes virtual care (81%) were more likely to describe their plan as excellent or good, as were those that believe they have a wellness culture (76% versus 50% without a wellness culture).
 - Sixty per cent of plan members said their plan meets their personal needs extremely or very well, similar to last year (61%) and within a few points, up or down, since 2018 (62%).
 - Again, level of understanding affects results: 74% of members who understand their plan extremely or very well said it meets their needs extremely or very well, compared to 47% among those who somewhat understand and 38% among those who do not understand their plan.

MEGHAN VALLIS EQUITABLE LIFE

“It’s great to see plan members appreciate their benefits more, but it’s also interesting that more would give it all up for cash. This likely reflects that people don’t think about the value of their benefits plan as insurance or the premium cost. Communication is so important. Employers have an opportunity to not only communicate the benefits available, but also the financial value of the plan.”

★ KEY TAKEAWAYS ★

1. The pandemic appears to have improved plan members’ appreciation of their health benefits plan.
2. Plan members who did not fully understand their plan were much less likely to report it met their needs.
3. For the first time, plan sponsors were less positive than plan members about the quality of their benefits plan.
4. More efforts to support mental health and new virtual health-care services likely drove members’ appreciation levels, agreed the advisory board.
5. Plan sponsors’ efforts to provide value pushed up against mounting financial concerns. Their top concern was the impact of inflation.

BENEFITS OR CASH?

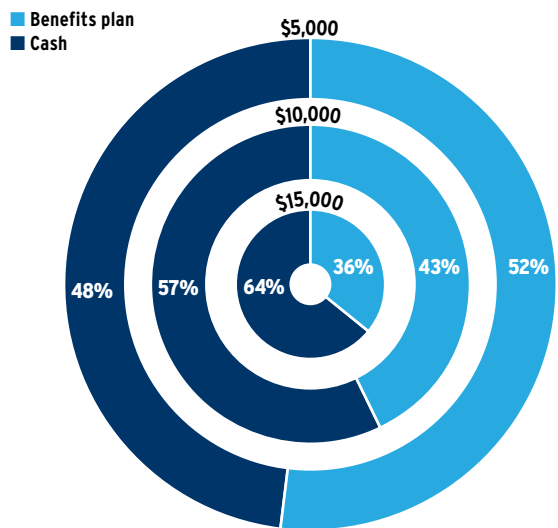
- When plan members were asked to choose between extra annual cash or their health benefits plan, \$5,000 appears to be the tipping point: 52% opted for the plan and 48% for the \$5,000.
- In 2003, when the question was first asked, 65% chose the plan and 33% the cash. This breakdown was generally consistent until 2020.
- Plan members aged 55 and older were more likely to opt for the plan (65% versus 42% for 18- to 34-year-olds), as were heavy users of the drug plan (61% versus 48% for light or non-users).
- At the higher amounts of \$10,000 and \$15,000, plan members overall were more likely to opt for the extra cash (57% and 64%, respectively), although older members (47% and 55%) and heavy users of the drug plan (49% and 54%) were less likely to do so.

INFLATION THE TOP CONCERN

- Eighty-five per cent of plan sponsors reported having at least one major concern about their health benefits plan.
- This year’s list of possible concerns was expanded to include the impact of inflation on the effectiveness of

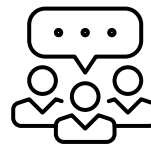
PLAN MEMBERS

PREFERENCES FOR BENEFITS PLAN OR CASH



SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: Plan members split sample: (\$15,000 n=333; \$10,000 n=329; \$5,000 n=342)

PLAN SPONSORS



85%
Plan sponsors with at least one major concern about their health benefits plan

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors (N=721)

THEIR MAJOR CONCERNS:

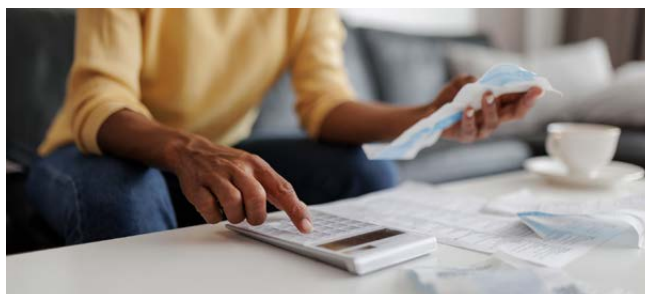
1	Impact of inflation	36%
2	Competitiveness	33%
3	Sustainability of dental plan	31%
4	Sustainability of drug plan	26%
5	Overall sustainability of plan	25%
6	Levels of absence and disability	22%
7	Benefits fraud/misuse of benefits	20%
8	Growing number of appeals or complaints	15%
9	Inability to make major changes due to collective bargaining agreements	14%
10	Use of paramedical services	13%
11	Lack of time for long-term strategy, opportunities, etc.	12%

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: Plan sponsors with at least one major concern (n=616)

★ KEY TAKEAWAYS ★

6. For the first time, plan sponsors were more concerned about the sustainability of their dental plan than their drug plan. Plan members were also most likely to say coverage fell short for dental services.
7. These findings validate plan sponsors' overarching concern that inflation is eroding the value of benefits maximums, noted the advisory board.
8. The board also observed that the consumption of dental services increased in the past year or so, a consequence of delayed or missed appointments during the pandemic.
9. As well, the federal government's upcoming Canadian Dental Care Plan has seeded the idea of eliminating or reducing private dental coverage.
10. Considering all of these factors, perhaps it's time to put dental-care providers under a cost-management lens similar to what has long been the case for pharmacies and drug-plan claims, suggested the board.

- the plan, which ended up topping the list among plan sponsors with concerns (36%).
- Rounding out the top five concerns were competitiveness of the plan (33%), new to the list last year, sustainability of the dental plan (31%), sustainability of the drug plan (26%) and overall sustainability of the plan (25%) (see chart on previous page for full list).
 - Utilization of paramedical services (13%) appears to be less of a concern. After ranking fourth or fifth from 2018 until 2022, it dropped to tenth position this year (or eighth after removing the two new answer options).
 - In separate questions focused on disability benefits, 44% of plan sponsors with a short-term disability plan were concerned about its utilization level, down from 56% in 2022. The same number (44%) were concerned about their long-term disability plan, down from 51% in 2022.



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- Plan sponsors with 500 or more employees were far more concerned about short-term (51%) and long-term (58%) disability than those with fewer than 50 employees (31% and 24%, respectively).

★ KEY TAKEAWAYS ★

- Fewer plan sponsors were concerned about the utilization levels of disability benefits.
- While this is to be expected given actual drops in utilization for many plan sponsors, members of the advisory board warned the trend will reverse due to the ramifications of delayed diagnoses and treatments during the pandemic.
- The board also surmised that plan sponsors may be less concerned about their disability benefits because the No. 1 accommodation, before the pandemic, was working from home. Today's hybrid work environment has lessened that pain point for employers.

CLOSER LOOK AT COSTS

- Three-fifths (60%) of plan sponsors reported the costs of their health benefits plan increased in the past three years, down from 66% when the question was last asked in 2016 and unchanged from 2015 (60%). Only 3% indicated costs decreased and 5% did not know.
- Mid-sized employers (50 to 499 employees) were more likely (70%) to report higher costs than employers with up to 49 employees (53%).
- Among eight possible causes of increased costs, plan sponsors most often selected the increased overall cost of drugs (52%), as they did in 2016 (54%). In fact, the top-five ranking did not change at all (see chart).
- Increased claims for biologics and other higher-cost specialty drugs ranked last (9%), down from seventh position in 2016 (18%).

A-OK ABOUT SPECIALTY DRUGS . . . SORT OF

- Seventy-eight per cent of plan sponsors agreed (32% strongly) they are satisfied with how their insurance carrier is responding to claims for higher-cost specialty drugs, unchanged from when this question was first asked in 2015 (79%).
- That said, 85% agreed (33% strongly) they would like their carrier to provide additional coverage options to plan members, up from 78% in 2015.
- Seventy-seven per cent also agreed (27% strongly) they are concerned about their plan's ability to continue covering higher-cost drugs.
- Finally, almost nine out of 10 (88%) agreed (36% strongly) more needs to be done to reduce the cost burden of these drugs on private drug plans (e.g., more coverage by public plans).

“” MATT GAUDRY CANADA LIFE

“The health-care system is still catching up from the delayed diagnosing that occurred during the pandemic. Some of the predicted disability experience has not hit yet, but based on trends we're seeing in mental health and other conditions, it's coming.”

PLAN SPONSORS



60%

Plan sponsors reporting the costs of their health benefits plan increased in the past three years

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors (N=721)

THEIR MAIN CAUSES OF INCREASED COSTS:

1	Overall cost of drugs	52%
2	Claims for prescription drugs	37%
3	Providers' management fees	30%
4	Dental claims	26%
5	Use of other parts of plan (e.g., paramedical services)	22%
6	Disability claims	16%
7	Declined health status of plan members	12%
8	Claims for biologics and other higher-cost specialty drugs	9%

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: Plan sponsors who reported increased costs (n=428)

PLAN SPONSORS



88%

Plan sponsors that agreed more needs to be done to reduce the cost burden of specialty drugs on private drug plans

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors (N=721)

“” JEFF BOUTILIER REXALL

“While insurers leverage existing mechanisms such as prior authorization to help manage claims for high-cost drugs, the pipeline of specialty medications is robust. In particular, the pipeline for medications to treat rare diseases is one to closely monitor. With the upcoming national strategy for drugs for rare diseases, it will be equally interesting to see how these life-changing medications will be funded.”



**22% OF
EMPLOYEES
SAY THEY
WANT MORE...**

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★ KEY TAKEAWAYS ★

- 14. Most plan sponsors were satisfied with how their insurance carriers are handling claims for high-cost specialty drugs.
- 15. However, an even greater number wanted more coverage options and felt private payers should bear less of the cost of these drugs.
- 16. A biosimilar switching or substitution policy is an example of a coverage option that has been successful in several provinces in recent years, noted the advisory board.
- 17. Meanwhile, plan sponsors are wise to continue to focus on managing the drug spend for traditional medications – for example, with a mandatory generic substitution policy – to create capacity for new higher-cost drugs, advised the board.

THE PULSE ON BENCHMARKING

- Plan sponsors benchmark their health benefits plan to check its competitiveness every 2.1 years on average, including 9% that never benchmark. The 91% that do benchmark is unchanged from 2017 (91%) and up from 2014 (87%).
- Those that benchmark indicated doing so once every 2.4 years on average, compared to three years in 2017 and 2.6 years in 2014.
- When asked when they did in fact last benchmark, the result was again 2.4 years on average. More than a third (38%) did so in the past year and almost half (45%) did so within the past two to three years. The remaining 17% benchmarked four or more years ago.

CHANGES MOSTLY FOR THE BETTER

- Twenty-eight per cent of plan sponsors added or improved current benefits or coverage levels in the past year, similar to 2022 (30%) and well ahead of 2021 (11%).
- However, 14% reported removing or reducing benefits or coverage levels, double the result from 2022 (7%). That leaves 59% of sponsors that made no changes, compared to 62% a year ago.
- Plan sponsors with flex plans (38%) were more likely to make improvements than those with traditional plans (22%), as were employers in Atlantic Canada (37%) and mid-size employers (50 to 249 employees, 34%).
- When presented a list of eight options to improve their health benefits plan, half (49%) of plan sponsors indicated the most important would be increased coverage levels to keep pace with inflation, followed at some distance by improved coverage options for higher-cost specialty drugs (29%) and more benefits/services to manage chronic diseases (28%). Only 5% responded that none were important (see chart on previous page for full list).

PLAN SPONSORS



2.4

Years since plan sponsors last benchmarked the competitiveness of their health benefits plan

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: Plan sponsors that benchmark (n=630)

“” SHANNON DARVILL PEOPLE CORPORATION

“We’re doing more benchmarking than ever before. Not only to validate the competitiveness of the plan but also to act as a tool for people leaders to be able to present the gaps and the opportunities for improvement internally to executive teams, both for attraction and retention. It has definitely become an important tool for decision-making.”

PLAN SPONSORS

CHANGES TO BENEFITS PLANS, 2021 - 2023

- Added a benefit(s) or improved coverage levels
- Removed a benefit(s) or reduced coverage levels
- No changes

2021	11%	28%	60%
2022	30%	7%	62%
2023	28%	14%	59%

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors (2021 N=524; 2022 N=553; 2023 N=721)

PLAN SPONSORS

MOST IMPORTANT THINGS TO IMPROVE HEALTH BENEFITS PLAN

1	Increased coverage levels to keep pace with inflation	49%
2	Improved coverage options for specialty drugs	29%
3	More benefits/services to manage chronic diseases	28%
4	More benefits/services to prevent illness	24%
5	Improved disability management	22%
6	Reduced coverage options for specialty drugs to free up funds for other benefits	19%
7	More measures to prevent/detect fraud	14%
8	Targeted benefits to support diversity, equity, inclusion and accessibility	13%
9	None of the above are important	5%

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors (N=721)

Five-step framework guides well-being strategy



Anna Fisher
Director, health and wellness
FLIGHT CENTRE TRAVEL GROUP AMERICAS

“It’s helping leaders feel more supported and not feel like they have to handle mental-health issues like a counsellor on top of their day job.”

Flight Centre Travel Group Americas is taking a holistic approach to employee health, with educational resources, assessment tools and leadership training that emphasize the five ways to well-being.

The five ways of well-being, a framework that was developed by a U.K. government mental well-being task force, includes: connecting with others, being active, savouring the moment, continued learning and helping others. Anna Fisher, Flight Centre’s health and wellness director, says the company has focused on incorporating the framework into its health and well-being resources over the past few years as a “preventative way to keep employees’ mental-health challenges in check.”

During the coronavirus pandemic, Fisher began running Healthy Teams, a series of monthly educational workshops on a variety of health and wellness topics, such as how food affects mood, sleep strategies, motivation, meditation and stretching, winter immunity and more. She polls employees to determine their interests and attends team meetings across the organization to give the talk. More than 200 employees attend the sessions each month.

“During the pandemic, our frontline staff, in particular, were just hammered with refunds. They weren’t taking any time for themselves. . . . So just having 30 minutes a month to focus on something not related to work – the feedback told us it was the right move. It was a much-needed break where people could refocus.”

Employees can also take advantage of an initiative called the Hour of Power, which provides them with one hour per week to work on their “power” during their shift. With 263 staff members signing up for the program to date, some examples include working on their physical power by going for a walk or fitness class and working on their emotional or mental power with meditation, yoga or a massage. “You choose whatever power needs a bit of a boost week

on week,” says Fisher. “You don’t need to tell your leader what you’re doing, you just tell them you’re off.”

Flight Centre also created a perceived stress test that allows employees to determine their current stress levels – and provides the company’s health and wellness team with a population-level overview of how employees are doing – with travel-related assessment results. Employees who have a low level of mental stress are at cruising altitude, those who are experiencing mild to moderate stress are experiencing turbulence and should put their seatbelts on and those who have severe stress receive a message that the oxygen masks are coming down.

The quiz results direct employees struggling with some level of stress to resources such as videos on meditation and breathing, PDFs on managing stress and more. “That can get people back to the cruising altitude level again and help with their immediate stress,” says Fisher.

Flight Centre also recently began offering mental-health leadership training for managers. During the 90-minute workshop-style sessions, Fisher and a colleague from the human resources team teach leaders how to create supportive environments for employees, how to talk with their direct reports about mental-health challenges and offer accommodations or support and the supports they can refer people to if necessary.

The first part of the mental-health leadership training saw good uptake, she says, noting her team is rolling out a second part, which focuses on reviewing the five ways to well-being, with particular focus on the skills of taking notice and demonstrating empathy.

“It’s helping leaders feel more supported and not feel like they have to handle mental-health issues like a counsellor on top of their day job. They know where the resources are and staff can work well and know they’re supported.”

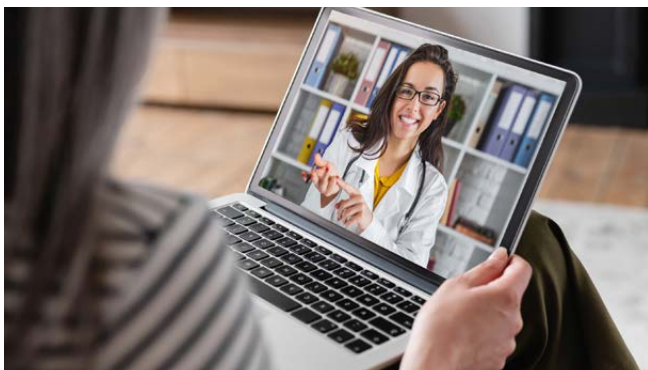
- In 2020, when this question was last asked, increased coverage in response to inflation was not included as an option. The three most important improvements at that time were better coverage options for specialty drugs (43%), more benefits for chronic diseases (43%) and more benefits/services to prevent illness (40%).

MORE PLANS SHOWING FLEXIBILITY

- Almost two in five (39%) plan sponsors provide a flex plan, up from 29% in 2022 and 19% when first asked in 2017. The remaining provide a traditional plan (60%) or do not know (1%).
- Plan members were aligned, with 36% indicating they have flex plans and 64% traditional.
- Forty-six per cent of plan sponsors with 500 or more employees have a flex plan, compared to 27% among those with fewer than 50 employees. Regionally, flex plans were more likely in Quebec (50%) and less likely in Manitoba and Saskatchewan (28%).
- Almost half (48%) of plan sponsors have a long-term disability plan and 43% have a short-term disability plan. Large employers (500+ employees) were more likely (49%) than small employers (under 50 employees, 39%) to provide STD coverage.
- Two-fifths (43%) offer an employee assistance program, ranging from 51% for large employers to 38% for small employers (see chart for more on selected components of health benefits plans).

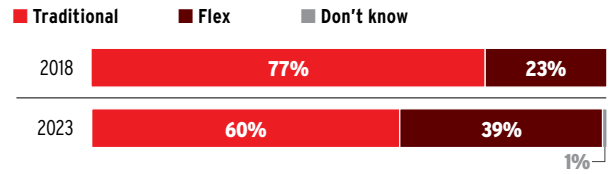
VIRTUAL CARE HOLDS STEADY

- Twenty-nine per cent of plan sponsors include a virtual health-care service in their health benefits plan, unchanged from 2022 (29%) and down from 2021 (41%).
- Results differed very little by size of organization: 27% for fewer than 50 employees, 28% for 50 to 499 employees and 31% for 500 or more employees.
- Among plan members, 33% indicated their plan offered virtual services and 34% did not know.
- Two-thirds (68%) said they would likely use virtual health care if it was part of their benefits plan, jumping to 97% among heavy users of benefits for mental-health therapy. Members with a recent major injury (83%), with children under the age of 18 (80%) and those aged 18 to 34 (79%) were also more likely to access health care virtually.



PLAN SPONSORS

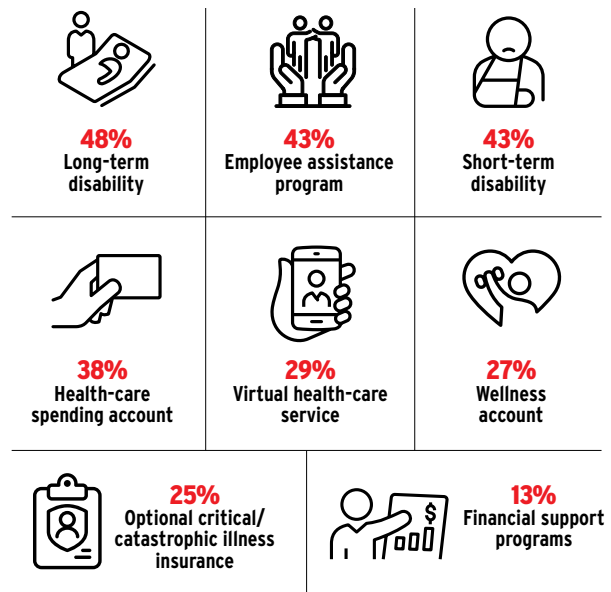
TYPE OF BENEFITS PLAN, 2023 VERSUS 2018



SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors (N=721)

PLAN SPONSORS

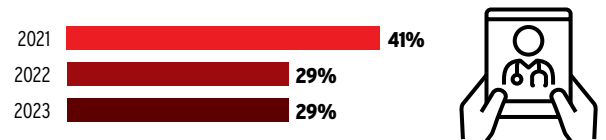
PLANS WITH THE FOLLOWING COMPONENTS



SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors (N=721)

PLAN SPONSORS

PLANS WITH VIRTUAL HEALTH-CARE SERVICES



SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors (N=721)

“” **ANDREA BELVEDERE** SUN LIFE

“While the general awareness of virtual care in benefits plans appears low, the perception of the value of virtual care – and ultimately the plan – continues to grow as more people use it. This suggests we’re only beginning to see the true benefits for both employees and employers.”

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★ KEY TAKEAWAYS ★

- 18. Close to a third of health benefits plans included access to virtual health-care services.

- 19. Small employers were as likely as large employers to include virtual care in their plan.

- 20. Most plan members would use virtual health care if it was a part of their plan; however, one-third did not know if it was currently in their plan.

- 21. Interest was highest among members who regularly use mental-health therapy, are recovering from a major injury, have dependent children or are aged 18 to 34.

- 22. Employee feedback on virtual health care has been very positive, agreed members of the advisory board, although not all plan sponsors experienced notable reductions in absence levels.

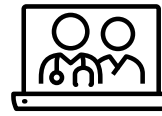
- 23. One strategy to improve awareness and utilization is advance registration, suggested a plan sponsor on the board.

- 24. Virtual care is also closing gaps in access to consistent care in the disability space, which may enable employees to return to work sooner, added the board.

THE SCOOP ON SPENDING ACCOUNTS

- Thirty-eight per cent of plan sponsors reported offering a health-care spending account, down from 2022 (48%) and comparable to 2021 (39%). Large employers were more likely (43%) than small (31%) to offer HCSAs.
- For their part, 46% of plan members reported having an HCSA, comparable to one year ago (49%).
- Wellness accounts are part of the plan for 27% of plan sponsors (30% for large and 21% for small employers), compared to 30% last year and 19% in 2021. Plan members were aligned for this year, at 26%, while they were less likely than plan sponsors to report wellness accounts in 2022 (21%).
- Only 3% of plan members with an HCSA did not use it at all during their last benefits year, down from 14% in 2017 when the question was last asked. Among those who did, they reported using an average of 62% of the funds available, compared to 70% in 2017.
- Members with household incomes below \$60,000 used less of their HCSA (56%) than those with incomes of \$150,000 or more (71%) and those taking three or more medications (70%).
- Not unexpectedly, the level of use was higher among members who are heavy users of paramedical services (see chart).

PLAN MEMBERS



68%

Plan members who would likely use a virtual health-care service if it was part of their health benefits plan

MORE LIKELY WHEN:



SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004)

PLAN MEMBERS

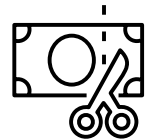


97%

Plan members who used their health-care spending account during the past benefits year

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: Plan members with a health-care spending account (n=433)

62%
How much of the health-care spending account they used



HIGHER AMONG HEAVY USERS OF . . .



SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: Plan members who used health-care spending account (n=420)

“GORD HART SELECTPATH BENEFITS & FINANCIAL INC.

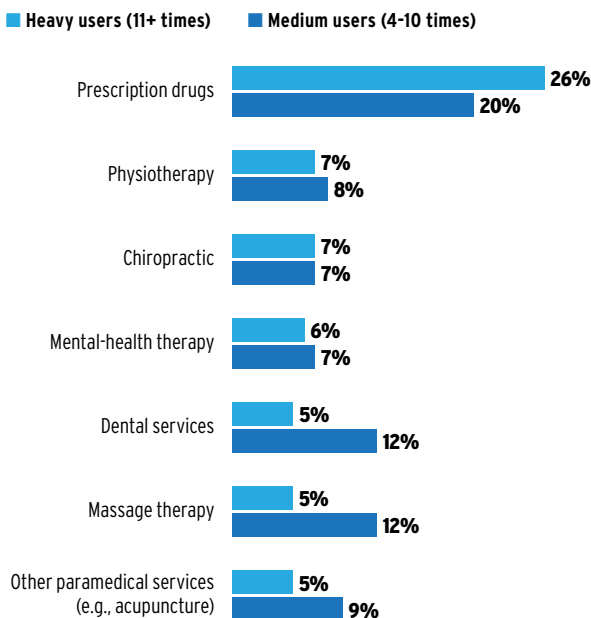
“Insurance companies, providers, employers and advisors – we need to find ways to better collaborate and position health benefits from a preventative lens. This means greater plan member education and engagement. Additionally, we need to stop relying on the public system as a backstop because, by the time plan members source care, we’re fully into reactive mode.”

“” **ANDREA FRANKEL** SANOFI CANADA

“The drug plan is the most utilized health benefit, but rates of nonadherence to some high-volume medications are high, which may reduce their effectiveness and lead to additional drugs that may have been avoidable. Plan sponsors that take the time to engage with their insurance carriers to develop, execute and effectively communicate wellness strategies, including programs that support adherence, will get better value from their drug plans.”

PLAN MEMBERS

HEAVY AND MEDIUM USERS OF THE FOLLOWING BENEFITS



SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004)

“” **DR. AYLA AZAD** CANADIAN CHIROPRACTIC ASSOCIATION

“I see so many chiropractic patients stop treatment because their coverage runs out, then they get bumped to another paramedical practitioner until coverage runs out again. There is no continuity of care. Some pay out of pocket to keep going, but most wait until benefits kick in again. The results are more chronic pain, more mental-health issues, more medications. It's a vicious cycle and we need to rethink how to do right by these patients.”

- Just 4% of members with a wellness account did not use it during their last benefits year. Average utilization was 62% of available funds among those who used it, increasing to 70% among those with household incomes of \$150,000 or more and decreasing to 56% with incomes below \$60,000.

★ KEY TAKEAWAYS ★

25. Just over a third of plans included a health-care spending account and almost all plan members with an HCSA used it at least once.
26. Members used about three-fifths of their HCSA, which is just below typical pricing projections, noted the advisory board. The unused funds represent an opportunity to remind plan members that the HCSA can augment maximums in the health benefits plan.
27. Plan sponsors and advisors on the board observed that a poor user experience may be a barrier to using the HCSA. They commended providers that have eliminated a two-step claiming process by integrating HCSA claims within the health benefits plan.

UTILIZATION OF BENEFITS

- The survey asked plan members to estimate how often they used certain benefits in the past year. Regarding the prescription drug plan, 26% were categorized as heavy users (11 times or more) and 20% were medium users (four to 10 times). Between one in eight and one in 14 were medium users of paramedical services (see chart).
- Seventeen per cent of members were heavy (5%) or medium (12%) users of the dental plan.
- A comparison of heavy users among 18- to 34-year-olds and those aged 55 or older yielded the following variations: 23% versus 34% for prescription drugs, 11% versus 1% for mental-health therapy, 9% versus 3% for dental services and 8% versus 1% for other paramedical services (e.g., acupuncture).
- After removing members who did not use the benefit, plan members most often used their prescription drug plan (8.7 times on average), followed by chiropractic (6.9), mental-health therapy (6.7), physiotherapy (6.4), other paramedical services (5.8) and massage therapy (5.4). Dental services (3.6) were used least often.
- Plan members aged 18 to 34 (6.9) and those aged 35 to 54 (6.8) used mental-health therapy more often on average than those aged 55 and older (4.8).
- Heavy use of one paramedical service tended to carry over into the heavy use of the other listed paramedical services. For example, while 7% of members were heavy users of chiropractic, this jumps to 48% among heavy users of massage therapy, 35% among heavy users of mental-health therapy and 31% among heavy users of physiotherapy.

Broader EAP boosts use of mental-health services



Crystal Arnold
Senior manager, wellness,
retirement and group benefits
LIFELABS

Employee assistance programs tend to be available for the short-term and acute counselling needs of plan members.

But for Canadian medical diagnostic testing company LifeLabs, it was important to enhance its EAP to cover the full spectrum of mental-health needs for its dedicated employees serving the health-care needs of millions of Canadians each year.

In 2020, the organization started covering a sub-program within its EAP that's aimed at helping plan members with moderate or severe depression whose needs fall outside of the scope of the regular EAP. Employees who call the EAP line and are assessed by a counsellor to meet the clinical criteria are offered access to the program, which is fully covered by LifeLabs. Plan members who accept are referred to a consulting psychiatrist who prepares a treatment plan and monitors progress as the employee goes through treatment.

"The idea behind it was making sure we're supporting employees through the entire continuum of care," says Crystal Arnold, the organization's senior manager of wellness, retirement and group benefits. "We recognize that the wait times for specialists were especially high coming out of the pandemic and we want to ensure there is support for our team members earlier on. By doing so, hopefully we're avoiding more complex issues down the road."

In 2021, LifeLabs introduced a one-stop-shop digital platform with thousands of mental-health and wellness resources that employees can access 24/7 from their personal or work device. The digital platform holds more than 1,800 self-serve tools and resources, including self-directed programs for stress, addiction, grief, work-life balance and more. It also hosts a health risk assessment for the four pillars of wellness – physical, emotional, financial and social – that plan members can go through to receive a score and targeted resources.

"It was about providing proactive care for our team members, as sometimes they might be able to access something earlier to curb what they're going through."

"We always had benefits coverage [for mental-health practitioners] and short-term clinical counselling, but how do we get in front of people who want self-serve tools prior to accessing professional support?" says Arnold. "It was about providing proactive care for our team members, as sometimes they might be able to access something earlier to curb what they're going through. And if what people are searching on the platform indicates to them that they do need help, then they'll seek it earlier."

Since LifeLabs implemented the changes, 17 per cent of employees are using counselling services through its EAP, higher than the industry average of between 12 and 14 per cent. Roughly a third (33 per cent) of employees are using the digital platform, in line with the benchmarking data LifeLabs receives from its provider.

The EAP changes are part of a broader focus on enhancing flexibility and access during an update to its benefits plan and wellness programs, says Arnold. LifeLabs has an employee base with a range of working arrangements – from staff members who work from home or in one of its 382 locations across the country to employees who are out in the field every day with no access to a personal work computer – so the company has been investing in solutions that plan members can have at the tip of their fingers.

"Throughout the pandemic, what we saw in our employee surveys was that employees were feeling disconnected, burnt out and interested in more tools to manage all areas of health and wellness," says Roy Saad, the organization's senior manager of culture and communications.

LifeLabs also introduced telemedicine in May 2022 to ensure employees had quick, round the clock access to a doctor if they needed it. "When we look at anecdotal feedback from follow-up surveys, it's a game changer for employees," says Saad.

PLAN MEMBERS

HOW OFTEN THE FOLLOWING BENEFITS WERE USED IN THE PAST YEAR



8.7
Prescription drugs



6.9
Chiropractic



6.7
Mental-health therapy



6.4
Physiotherapy



5.8
Other paramedical services



5.4
Massage therapy



3.6
Dental services

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: Plan members who used individual benefit (Dental n=805; Prescription drugs n=773; Massage therapy n=414; Physiotherapy n=348; Other paramedical services n=295; Chiropractic n=292; Mental health therapy n=289)

★ KEY TAKEAWAYS ★

- 28. One-quarter of plan members can be described as heavy users of the prescription drug plan.
- 29. Fewer than one in 10 were heavy users of individual paramedical services, as expected given coverage maximums. As a result, some members jump from one service to another as they reach maximums to avoid out-of-pocket costs, noted the advisory board.
- 30. Among claimants for paramedical services, utilization was highest for chiropractic, mental-health therapy and physiotherapy.



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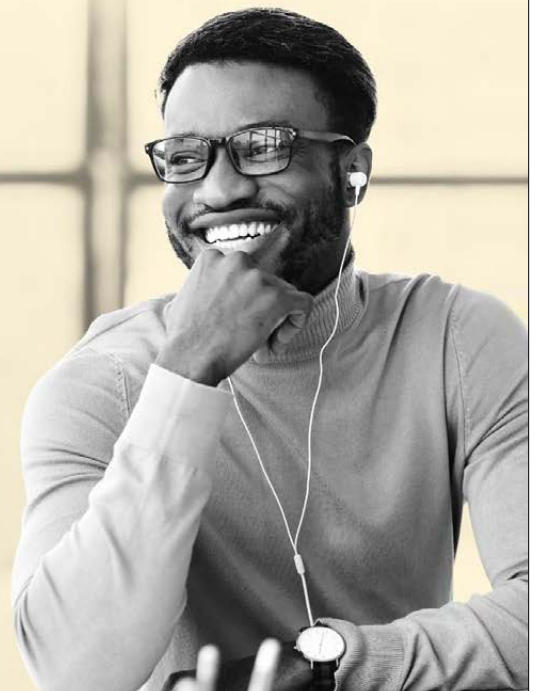
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Group Benefits and Retirement Solutions



WHERE COVERAGE FALLS SHORT

- Half (51%) of plan members reported the coverage levels of at least one of seven listed health benefits limited their ability to seek necessary treatment, jumping to 84% among those with a major injury in the past 12 months.
- This result also increased significantly among heavy users of mental-health therapy (82%), massage therapy (82%), physiotherapy (78%) and chiropractic (75%).
- When the benefits were considered separately, coverage most often fell short for dental services (25%) and massage therapy (19%), followed by prescription drugs (16%), mental-health therapy (14%) and physiotherapy (13%).
- When asked to estimate how much they personally spent on these benefits during the past benefits year, beyond what was covered by their health benefits plan, the average out-of-pocket expenditure was \$3,515.
- The highest single average out-of-pocket expenditure was for mental-health therapy (\$1,739), followed by dental services (\$1,383) and other paramedical services (\$1,136). The lowest average out-of-pocket expenditure was for massage therapy (\$937).
- For all seven benefits, plan members aged 18 to 34 had higher average out-of-pocket expenditures (see chart on following page).

★ KEY TAKEAWAYS ★

31. Half of plan members stated coverage levels limited their ability to get treatment, increasing to four out of five when there has been a major injury.
32. Across all members, coverage most often fell short for dental services.
33. Members' highest out-of-pocket payment was for mental-health therapy.
34. Reporting on the percentage of plan members who have hit coverage maximums would help guide decisions on plan design, recommended the advisory board.
35. What is the appropriate balance between coverage and out-of-pocket costs, between removing financial barriers and engendering a consumerist approach to the use of benefits? The survey results demonstrated the need for this debate to resurface, keeping in mind the primary goal of ensuring sufficient coverage for those most in need.
36. Higher maximums for paramedical services may reduce or prevent the need for prescription drugs, added some board members.

“” **SANDRA LENNON** STARBUCKS COFFEE CANADA

“I absolutely love the idea of reporting on the percentage of plan members reaching coverage maximums. That would really help us get more specific on what opportunities we can explore further. And we would have better information to answer the question of where the employer’s responsibility starts and where it finishes.”

PLAN MEMBERS



51%

Plan members for whom the coverage level of at least one benefit limited their ability to seek necessary treatment

MORE LIKELY WHEN:

Major injury **84%**

OR A HEAVY USER OF:

Mental-health therapy **82%**
 Massage therapy **82%**
 Physiotherapy **78%**
 Chiropractic **75%**

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004)

PLAN MEMBERS

BENEFITS FOR WHICH COVERAGE LEVELS FELL SHORT IN THE PAST YEAR

1	Dental services	25%
2	Massage therapy	19%
3	Prescription drugs	16%
4	Mental-health therapy	14%
5	Physiotherapy	13%
6	Chiropractic	9%
7	Other paramedical services	6%

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004)

“” **BARB MARTINEZ** CANADA LIFE

“There are so many benefits and details about benefits, it’s easy to see how plan members can be confused. As carriers, we have an opportunity to help plan members understand which tools and solutions their plan sponsors have made available. It helps the member access their benefits more fully and relieves some of the burden from the plan sponsor.”

PLAN MEMBERS

ESTIMATED OUT-OF-POCKET EXPENDITURES IN THE PAST YEAR

Overall 18 to 34 years old



\$1,739 / \$2,035
Mental-health therapy



\$1,383 / \$1,798
Dental services



\$1,136 / \$1,452
Other paramedical services



\$1,131 / \$1,628
Prescription drugs



\$1,089 / \$1,432
Physiotherapy



\$1,040 / \$1,516
Chiropractic



\$927 / \$1,273
Massage therapy



\$3,515 / \$5,158
Total average

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004)

DESIRED BENEFITS

- When presented with a list of eight new or lesser-known benefits, plan members most often indicated they or their family members would use a health-care system navigation service (28%), followed closely by genetic testing to determine personal risk for certain diseases (26%).
- The number of members choosing navigation has climbed steadily, from 15% in 2021 (tied with four other benefits and ranking ninth out of 16) to 24% in 2022 (fourth out of 11) and 28% in 2023 (first out of eight).
- Regionally, the interest level for navigation support was highest in Alberta (39%) and lowest in Quebec (20%, ranking second after genetic testing).

SUNIL HIRJEE BENEVA

“The patient experience can feel compartmentalized because it’s challenging to navigate our complex health-care system. Employers focused on employee well-being can fill this gap by helping members understand all of the resources available, both through public health care and private group benefits plans to treat their condition. This is a growing expectation by employees and employers have an important role to play.”

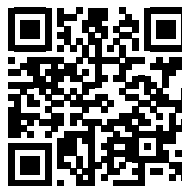


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- The desire for navigation support increased among members with a recent major injury (38%) or illness (40%). Among members with current chronic conditions, results were highest for those with chronic pain (45%), diabetes (38%) and obesity (35%).
- Among plan sponsors, 33% reported already covering services for health-care system navigation and another 33% were interested in doing so.
- Of the eight options, plan sponsors were most likely to already be covering services to help reduce substance use (39%), navigation (33%) and meditation apps (24%).
- Plan sponsors were most interested in covering genetic testing for diseases (39%), genetic testing for prescribing or drugs – also known as pharmacogenomic testing (35%) – and services to help care for aging parents (35%).
- One in three (31%) plan sponsors were not interested in covering any of the eight listed benefits.

★ KEY TAKEAWAYS ★

- 37.** In three years, navigation support has climbed to the top of the list of new or lesser-known benefits that plan members would use if available.
-
- 38.** The survey defined navigation support as help to coordinate treatment after diagnosis of a serious condition, such as cancer or diabetes.
-
- 39.** An overburdened public health-care system, including shortages of family physicians, has likely fuelled plan members’ growing desire – and need – for help, noted the advisory board.
-
- 40.** Plan sponsors may be well-served taking on a leadership role in health-care navigation as another way to optimize productivity and mitigate stress in the workforce, keeping in mind the service would also be valued by employees who are caregivers.
-
- 41.** Plan sponsors can differentiate themselves further by guiding plan members through their workplace health benefits plan as well as assisting with access to the public health-care system.

AWARENESS COULD BE BETTER

- Fifty-one per cent of plan members said they understand their health benefits plan extremely or very well, down from 65% in 2018 when this question was last asked. Just over a third (38%) understand it somewhat well and 11% do not understand their plan.
- As detailed on page 15, members with lower levels of understanding were less positive about the plan’s quality.
- Eighty-eight per cent of plan sponsors felt they effectively communicate what is covered by their health benefits plan, comparable to 2018 (89%). However, they were more likely to say their communication was somewhat

PLAN MEMBERS PLAN SPONSORS

PRODUCTS OR SERVICES THAT:

- plan members would use if added to their health benefits plan*
- plan sponsors already offer
- plan sponsors are interested in covering

Product or service	Plan members:	Plan sponsors:	
	Would use	Already cover	Are interested in covering
Health-care system navigation (i.e., to help coordinate treatment after diagnosis of a serious condition such as cancer, diabetes)	28%	33%	33%
Genetic testing to help determine personal risks for certain diseases (e.g., certain types of cancer)	26%	19%	39%
Genetic testing to help determine which drug to prescribe (also known as pharmacogenomic testing)	22%	22%	35%
Services to assist with caring for aging parents	21%	22%	35%
Meditation/mindfulness app	20%	24%	31%
Services to help reduce substance use (e.g., alcohol consumption)	9%	39%	26%
Fertility treatments	7%	19%	34%
Gender affirmation	3%	19%	32%

*Some of these items would have to be made available under health-care spending or wellness accounts. SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004); all plan sponsors (N=721)

“” **ANDREJKA MASSICOTTE** RBC INSURANCE

“Plan members often don’t think about what’s available until they need it. They may be anxious about their diagnosis and not know where to even start. An optimal plan of care includes providing ongoing communication and clear navigation so members know where to go and understand how they can best utilize their benefits plan and the public health-care system.”



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effective (31%, up from 26% in 2018) and less likely to say it was very effective (57%, down from 63%).

- When asked to rank their top-three sources for information about their benefits plan, members most often cited going to a website (69%), followed at some distance by a printed booklet (45%) and a smartphone app (43%).
- Categorized by first choice, the top-three options were a website (32%), an app (17%) and a printed booklet (12%), although results varied significantly by age (see chart).
- Plan sponsors most often used email to communicate what's covered by their health benefits plan (50%), followed by their insurance carrier's website (38%), a printed booklet (38%) and in-person group meetings (27%) (see chart on next page for full list).
- When asked what is effective for communications, plan sponsors most often indicated email (45%), a printed booklet (45%) and the insurer's website (39%) as part of the top-three options.

★ KEY TAKEAWAYS ★

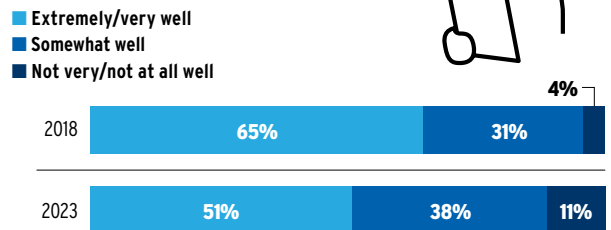
- 42. Fewer plan members understood their health benefits plan very well compared to five years ago.
- 43. A website was the go-to source of information about health benefits; that said, a smartphone app was as popular for members aged 18 to 34.
- 44. Plan sponsors most often used email to communicate about their plan and reported that email and a printed booklet were most effective for communications.
- 45. Members of the board strongly recommended against a reliance on email and disagreed about its effectiveness. Such emails are bypassed in busy inboxes or set aside for a later read that never happens.
- 46. Instant messaging is proving to be more effective and popular than emails for internal communications, noted a plan sponsor on the board.
- 47. While marketing tactics were not captured in the survey, the board agreed plan sponsors have more success when their mindset is one of marketing rather than communicating.
- 48. Humour, storytelling and interactivity capture attention and encourage retention of information, as do brief on-demand videos.
- 49. Marketing that is targeted to new Canadians may also be effective given high levels of immigration in recent years, suggested the board.

“” ERIK LAROSE DESJARDINS INSURANCE

“We have to put ourselves in the end user's shoes and how we like to receive communications. We likely won't read a lengthy email with many attachments. At the end of the day, employees don't really want communications, they want resources at the time of need. Perhaps the most important thing we can communicate – in simple, fun and creative ways – is where to go for those resources.”

PLAN MEMBERS

LEVEL OF UNDERSTANDING OF HEALTH BENEFITS PLAN



SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004)

PLAN MEMBERS

WHERE YOUNGEST AND OLDEST MEMBERS GO FIRST FOR INFORMATION ABOUT THEIR PLAN

18 to 34 years old		Rank	55 and older	
Smartphone app	25%	1	Website	43%
Website	23%	2	Toll-free number	17%
Human resources	12%	3	Printed booklet	14%
Printed booklet	11%	4	Human resources	10%
Toll-free number	9%	5	Smartphone app	5%




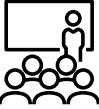





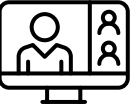


SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: Plan members aged 18 to 34 (n=258); Plan members aged 55 or older (n=349)

“” KONSTANTIN TSKHAY TOP HAT

“Communication, for me, is summed up in one word: relevance. Soon, we'll start using AI to help people find what they need faster. Using AI and predictive analytics on benefits data will allow us to tailor solutions relevant to people's needs. And we must communicate to our teams how we design benefits solutions of the future, building trust and engagement.”

PLAN SPONSORS

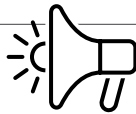
METHODS USED TO COMMUNICATE WHAT'S COVERED

 50% Email	 38% Insurer's website	 38% Printed booklet
 27% In-person group meetings	 19% Intranet	 16% Toll-free number
 15% Mail	 13% Smartphone app	 12% Text messaging
 11% Virtual group meetings	 9% On-demand videos/webinars	 5% Automated phone calls

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors (N=721)

PLAN SPONSORS

OPINIONS ON TOP THREE MOST EFFECTIVE WAYS TO COMMUNICATE WHAT'S COVERED



1	Email	45%
2	Printed booklet	45%
3	Insurer's website	39%
4	In-person group meetings	31%
5	Intranet	23%
6	Mail	17%
7	Smartphone app	17%
8	Virtual group meetings	14%
9	Toll-free number	13%
10	Text messaging	13%
11	On-demand videos/webinars	10%
12	Automated phone calls	5%

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors (N=721)

- Results are similar when narrowed down according to their top-choice rankings: email (20%), a printed booklet (18%) and a tie between the insurer's website and in-person group meetings (both 13%).

OPEN TO "PUSH" COMMUNICATIONS

- Sixty-four per cent of plan members would agree to receive health information based on their personal use of benefits from the insurer that manages their benefits plan. This result has been generally consistent through the years (2018: 66%; 2019: 65%; 2020: 62%).
- One in five (20%) don't know if they would agree to receive such information, leaving 17% who would not agree.
- Members with a recent major injury (80%) or high daily stress (71%) were more likely to agree. Knowledge was also a factor: 70% of members who understand their plan extremely or very well would agree, versus 45% among those who do not understand their plan.

★ KEY TAKEAWAYS ★

50. Most plan members would agree to receive health information from their benefits plan's insurance carrier, based on personal claims data.

51. Members would most like to receive recommendations for services covered by their benefits plan. While personal savings likely factor into this result, it also aligns with members' desire for navigation support (page 29).

52. Personalized communication paves the way for timely utilization of ancillary benefits such as health-care spending accounts, the employee assistance program and paramedical services, noted the advisory board.

53. The board also observed that the pandemic appears to have increased plan sponsors' support for personalized communications, again with a focus on raising awareness of benefits that can improve health outcomes.

54. Board members agreed artificial intelligence has a role to play to ensure the delivery of information that is most relevant for the plan member.

55. However, plan members' data is fragmented between benefits providers. Until insurance carriers have secure access to all data points, their ability to push out personalized information and recommendations is limited.

- Consenting plan members would most like to receive recommendations for services covered by their health benefits plan (45%), information on how to be healthy (40%) and how to manage their health condition (37%) (see chart for full list).
- Members with the following current chronic conditions are more interested in receiving recommendations for nearby health-care professionals or experts: obesity (51%), arthritis (50%), chronic pain (50%), diabetes (47%), anxiety, depression or other mental-health condition (45%), asthma or lung disease (44%).

DOUG BRYCE MANULIFE

“As member needs evolve and grow in complexity, they’re looking to us for just-in-time, personalized health information. These results show that members trust us to help not only educate them on their benefits, but also to provide recommendations for their coverage and care. Plan sponsors are also increasingly open to us connecting with their members to give this individual support.”

PLAN MEMBERS



64%

Plan members who would agree to receive health information based on their use of benefits

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004)

WHAT INFORMATION WOULD BE OF INTEREST TO THEM

1	Recommendations for services covered by health benefits plan	45%
2	General information on how to be healthy	40%
3	How to manage their health condition	37%
4	Information about current medications	34%
5	Recommendations for nearby health-care professionals or experts to help with condition	34%
6	Reminders for activities related to health (e.g., take blood pressure)	27%
7	Other resources, such as websites and support groups	21%
8	Reminders to take medications	17%

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: Plan members who agreed to receive targeted health information (n=623)



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THUMBS UP ON BOTH SIDES

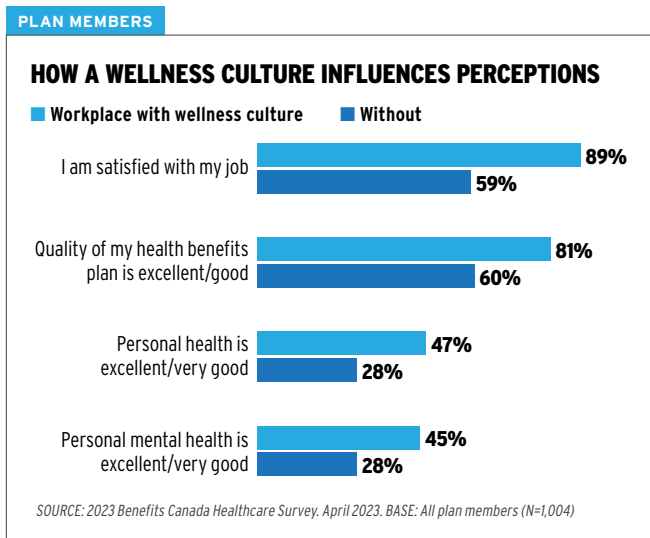
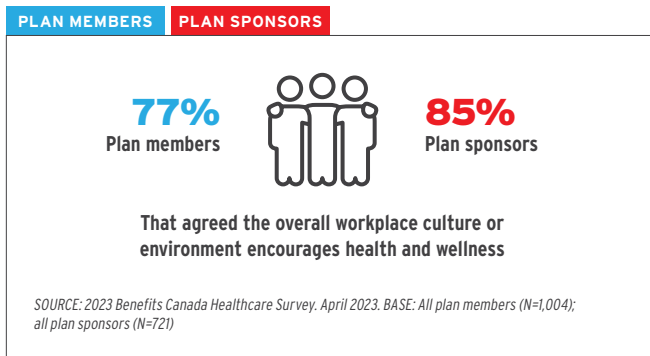
Most plan members agreed their workplace culture encourages health and wellness and four out of five plan sponsors offered at least one wellness program, with mental-health initiatives topping the list. Among possible new programs, plan sponsors are most interested in doing more to support healthy sleeping habits. Plan members felt their employer supports mental health better at the worksite than remotely, although age is a determining factor. Most plan sponsors felt their work environment supports musculoskeletal health, but almost the same number of plan members said their environment contributes to aches and pains.

- IN THIS SECTION

- WELLNESS CULTURE
 - WELLNESS PROGRAMS
 - JOB SATISFACTION

- MENTAL-HEALTH SUPPORTS
 - MENTAL-HEALTH TRAINING
 - MENTAL-HEALTH COVERAGE

- MUSCULOSKELETAL HEALTH
 - WELLNESS INVESTMENTS
 - IMPACT OF REMOTE WORK



THUMBS UP FOR WELLNESS CULTURE

- Seventy-seven per cent of plan members agreed (21% strongly) their overall workplace culture or environment encourages health and wellness, a result that has not changed by more than a percentage point since it was first asked in 2019 (77%).
- Members' positivity was even higher when virtual care is part of their health benefits plan (85%), when the plan meets their personal needs (84%) and when they understand what's in their plan (84%).
- Among plan sponsors, over the past five years, between 85% (2023 and 2019) and 90% (2021) agreed their workplace culture or environment encourages health and wellness. In 2023, 33% strongly agreed.
- Like plan members, plan sponsors that offer virtual health-care services were more likely (93%) to be positive about their workplace culture.
- As in previous years, a wellness culture appears to have influenced results in other key areas, including personal health status, job satisfaction and perceptions of the health benefits plan (see chart).
- From a list of 15 possible factors, plan sponsors most often selected a safe work environment (48%) as one way their workplace culture encourages health and wellness, followed by good relationships between co-workers (44%), a positive work environment (44%), reasonable work hours or workloads (40%) and a good relationship with the immediate supervisor/manager (40%) (see chart on next page for full list).

SARIKA GUNDU BANK OF MONTREAL

“Whether the work environment is hybrid or not, employees need to experience a culture of well-being. Wellness in the workplace cannot be a campaign or a stand-alone initiative. It needs to be in the walls. To do this, organizations should align their health and wellness strategy to their business values and ensure they have a dedicated team to manage the organizational health of their workforce.”

★ KEY TAKEAWAYS ★

1. Most plan members agreed their workplace environment encourages health and wellness, especially when virtual care is part of their health benefits plan.
2. Year after year, a wellness culture positively influences perceptions of personal health status and job satisfaction.
3. The advisory board cautioned against complacency in response to the positive results for a healthy work environment, which may be more a reflection of awareness rather than engagement in workplace wellness initiatives.
4. In their experience, few plan sponsors have a documented strategy for wellness in the workplace, which is essential for true engagement and, ultimately, positive returns for the business.
5. Senior leadership buy-in, dedicated staffing and constant evaluation (including employee input) are among the components of a wellness strategy.

MENTAL HEALTH TOPS PROGRAMS

- Four out of five (79%) plan sponsors offered at least one out of nine possible wellness programs.
- Almost half (48%) offered a mental-health initiative, increasing to 61% after removing plan sponsors that did not offer any programs.
- The second and third most common programs are immunizations at work (46%) and fitness challenges (33%) (see chart on next page for full list).
- Organizations with 50 or more employees (85%) were more likely than those with fewer than 50 employees (62%) to offer at least one wellness program.
- When asked what they are interested in offering from a list of nine options, excluding those they already offer, interest levels were highest for programs to support sleep (45%), healthy weight management (41%) and smoking cessation (40%) (see chart for full list).
- Twenty-one per cent of plan sponsors were not interested in offering any of the listed wellness programs.



PLAN SPONSORS

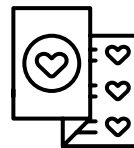


IN WHAT WAYS THE WORKPLACE CULTURE ENCOURAGES HEALTH AND WELLNESS

1	Safe work environment	48%
2	Good relationships with co-workers	44%
3	Positive work environment	44%
4	Reasonable workloads/work hours	40%
5	Good relationship with immediate supervisor/manager	40%
6	HR policies (e.g., vacation policy, paid personal days off, etc.)	38%
7	Recognition at work (respect, equity, etc.)	37%
8	Good leadership from senior executives/owners	36%
9	Areas to take breaks, socialize	35%
10	Flexible work arrangements	33%
11	Well-designed workspaces (e.g., ergonomic design)	27%
12	Social activities at work or outside of work	26%
13	Employee autonomy regarding how they do their job	23%
14	Official wellness programs (e.g., fitness challenges)	18%
15	Healthy foods/snacks in cafeteria, vending machines, at meetings, etc.	16%

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: Plan sponsors with a workplace culture that encourages health and wellness (n=612)

PLAN SPONSORS



79%
Plan sponsors that offer at least one wellness program

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors (N=721)

PLAN SPONSORS

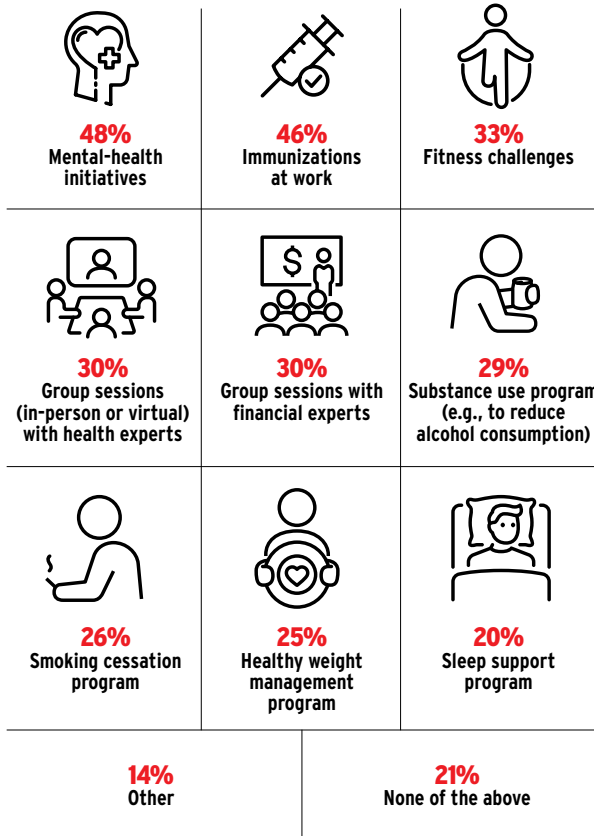
INTEREST LEVELS FOR WELLNESS PROGRAMS NOT CURRENTLY OFFERED

1	Sleep support program	45%
2	Healthy weight management program	41%
3	Smoking cessation program	40%
4	Group sessions with financial experts	38%
5	Substance use program (e.g., to reduce alcohol consumption)	37%
6	Fitness challenges	37%
7	Group sessions (in-person or virtual) with health experts	35%
8	Mental-health initiatives	30%
9	Immunizations at work	28%
10	Other	23%
11	None of the above	21%

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors (N=721)

PLAN SPONSORS

WELLNESS PROGRAMS OFFERED



SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors (N=721)

STILL SATISFIED

- Four out of five (83%) plan members were satisfied with their jobs, unchanged from 2022 (83%) and consistent with results since 2018 (80%).
- Several work-related factors, such as a wellness culture and a health benefits plan that meets personal needs, influenced feelings of job satisfaction (see chart).
- Plan members in Alberta were less likely (67%) to be satisfied, compared to a high of 89% among members in B.C.
- Members who described their mental health as excellent or very good were much more likely (92%) to be satisfied with their jobs than those in poor mental health (62%).

★ KEY TAKEAWAYS ★

6. Four out of five plan sponsors offered at least one out of nine possible wellness programs.
7. A mental-health initiative was the No. 1 offering, followed by onsite immunizations and fitness challenges.
8. Outside of current offerings, plan sponsors were most interested in programs for sleep, weight management and smoking cessation.
9. The board also spoke of growing interest in one-on-one coaching that would integrate and coordinate wellness supports that are relevant to the plan member. Some employee assistance programs are evolving in this way.
10. Again, a wellness strategy is essential to guide the ship on program offerings, emphasized the board.

LOOKING GOOD FOR MENTAL-HEALTH SUPPORTS

- Seventy-three per cent of plan members agreed (22% strongly) their workplace environment supports mental wellness, close to last year's result (75%).
- The result increased to 86% among those who also reported a workplace wellness culture, compared to just 30% for those without a wellness culture.
- As with a wellness culture (page 35), a workplace that supports mental wellness may influence results in other key areas, including members' perceptions of the quality of their health benefits plan (see chart on next page).
- Out of 14 possible ways for the workplace to support mental wellness, plan members most often selected good relationships with co-workers (47%), a positive work environment (43%) and a good relationship with their immediate supervisor (42%). For plan sponsors, the top three were good relationships with co-workers (45%), a reasonable workload (42%) and, tied for third, a good relationship with their immediate supervisor (38%) and recognition at work (38%) (see chart on page 39 for top 10 ways).

PLAN MEMBERS

83%
Plan members who were satisfied with their jobs



HIGHS+LOWS

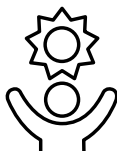
90%	Workplace supports mental wellness	Does not support mental wellness	62%
89%	Workplace culture supports health and wellness	Does not support health and wellness	59%
88%	Benefits plan meets needs	Does not meet needs	46%

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004)

PLAN MEMBERS

PLAN SPONSORS

73%
Plan members



83%
Plan sponsors

That agreed their workplace environment supports mental wellness

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004); all plan sponsors (N=721)



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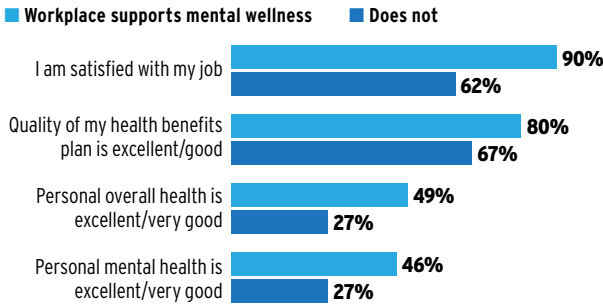
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PLAN MEMBERS

HOW SUPPORT FOR MENTAL WELLNESS INFLUENCES PERCEPTIONS



SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan members (N=1,004)

PLAN MEMBERS PLAN SPONSORS

TOP 10 WAYS IN WHICH WORKPLACE ENVIRONMENT SUPPORTS MENTAL WELLNESS

Plan members	Rank	Plan sponsors
Good relationship with co-workers (47%)	1	Good relationship with co-workers (45%)
Positive work environment (43%)	2	Reasonable workload/hours (42%)
Good relationship with immediate supervisor/manager (42%)	3	Good relationship with immediate supervisor/manager (38%)
Reasonable workload/hours (36%)	4	Recognition at work (38%)
HR policies (e.g., vacation policy) (34%)	5	HR policies (e.g., vacation policy) (36%)
Coverage for mental-health counselling (33%)	6	Relaxed atmosphere at work (35%)
Recognition at work (32%)	7	Coverage for mental-health counselling (35%)
Flexible work arrangements (31%)	8	Areas to take breaks, socialize (34%)
Areas to take breaks, socialize (29%)	9	Flexible work arrangements (33%)
Good communications within organization (29%)	10	Good senior leadership (32%)

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: Plan members who agreed workplace supports mental wellness (n=740); plan sponsors with work environment that supports mental wellness (n=589)

PLAN SPONSORS

55% Plan sponsors with mental-health training programs for managers and/or employees



↕ HIGHS • LOWS

68% Flex plan	Traditional plan	46%
67% 500 or more employees	Fewer than 50 employees	29%
67% Quebec	Manitoba and Saskatchewan (combined)	33%

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors (N=721)

JUDY PLOTKIN PEOPLE CORPORATION

“We’ll also see more emphasis put on psychologically healthy and safe workplaces. Mental-health benefits are important, absolutely, but they won’t be successful if we’re putting healthy fish back in a polluted pond. Organizational health is fundamental to the creation of a psychologically safe workplace.”

HAS TRAINING PLATEAUED?

- Fifty-five per cent of plan sponsors have training programs for managers and/or employees to help them recognize and respond to signs of depression or other mental-health conditions.
- In 2018, when the question was first asked, 37% had one or both types of training. Since 2019, the result has hovered at around half of surveyed plan sponsors, with a high of 58% in 2022.
- Training was far more likely to be available in organizations with 500 or more employees (67%) than in those with fewer than 50 employees (29%). Regionally, Quebec was at the forefront (67%) while Manitoba and Saskatchewan were the least likely (33%) to have training available.
- When the types of training are separated, 39% of plan sponsors provided training for managers and 35% for all employees. In 2018, the results were 28% and 27%, respectively.

★ KEY TAKEAWAYS ★

11. For five years, the percentage of plan sponsors with mental-health training programs for managers and/or staff has hovered at around half. These programs were defined as helping people recognize and respond to mental-health conditions.
12. Training has evolved and expanded beyond initial programs that were more reactive, noted the board. Today the focus is on mindful leadership to support psychologically safe and healthy teams.
13. Such leadership training is most successful when mandatory, added the board.
14. The Mental Health Commission of Canada’s National Standard for Psychological Health and Safety in the Workplace provides an excellent template for leadership training and a mental-health strategy, for all sizes of employer, suggested a plan sponsor on the board.

Instant messaging propels engagement in well-being strategy



Konstantin Tskhay
Former vice-president,
organizational effectiveness
TOP HAT

Every day, the wellness channel in Top Hat's workplace

Slack instant-messaging community sees a consistent stream of chatter, with employees participating in wellness bingo and quizzes or sharing how they prioritize their well-being, from meditating to going for a walk to spending time with their families.

More than half of the Toronto-based educational technology company's employees actively participate in the Slack channel, says Konstantin Tskhay, the company's former vice-president of organizational effectiveness, noting the channel is part of its employee mental health and well-being strategy, which began two years ago around Bell Let's Talk Day.

While Top Hat's people team sent out a standard message to employees expressing care for their mental health, they realized it was not enough. "What are we doing for the rest of the year?" he recalls asking. "That helped us streamline our wellness strategy, creating programs and events that beat the drum on wellness consistently throughout the year."

Now, Top Hat has frequent events in its bustling Slack channel and organizes a full calendar of events and activities related to mental health and wellness during Mental Health Awareness Month in May, as well as throughout the year.

In May 2023, the organization dedicated its five mental health-themed webinars to sleep wellness, personal resiliency, navigating work without worries, the organization's accessibility efforts and student mental health. The latter webinar was included to help employees understand the wellness challenges of Top Hat's customers, says Tskhay. For employees who can't participate live in the webinars, Top Hat circulates a summary with links to the recording, which they can listen to at leisure.

"Our wellness strategy focuses on mental, physical, social, and financial health, so throughout the year, we aim to have several sessions on each."

"Our wellness strategy focuses on mental, physical, social and financial health, so throughout the year, we aim to have several sessions on each."

The company also has a program called 'Joe Fridays,' named after its chief executive officer Joe Rohrllich, which allows employees to take off the Friday before each long weekend throughout the year to properly disconnect and not feel pressured to overwork in the lead-up to a shorter week.

Another key component of Top Hat's wellness strategy is providing employees with several volunteering days throughout the year to give back to their communities. Roughly 85 per cent of the company's staff in Canada and the U.S. participated in the last volunteer day, with some volunteering to be event captains who select an activity to lead, such as serving meals in a local community or cleaning up a beach or a park, and employees choosing which event to take part in.

It also asked employees to participate in an alt-text challenge on Global Accessibility Awareness Week in May. Employees were given images and asked to describe what they saw, which were included in the company's dynamic courseware to improve its accessibility for visually impaired students.

Top Hat is seeing the fruits of its labour, says Tskhay. The company tracks employees' perceptions of their work-life balance and workload alongside traditional employee engagement scores. It sees both high-perceived balance and strong engagement with wellness programming and with the company itself.

"Top Hatters know we care about wellness because we talk about it consistently. They're not asking us, 'What will you do about wellness and mental health for the rest of the year?' Instead, they ask, 'What's coming up? How can I help?' Naturally, that not only creates wellness for our staff, but it also creates other business outcomes – more engagement, more connection, better customer experience and higher organizational performance."

CRYSTAL ARNOLD LIFELABS

“The training piece is huge, especially for leaders. And it’s even beyond mental-health training – it’s more mindful leadership development. You’ll need a budget for the training, but you’ll see a huge return on the investment. As the first point of contact for employees, our leaders can really influence how employees move along their journey when going through mental-health issues.”

PLAN SPONSORS



\$1,864
Average annual maximum for coverage of mental-health counselling

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors offering coverage for mental-health counselling (n=601)

PLAN SPONSORS



34%
Plan sponsors that plan to increase their annual maximum for mental-health counselling

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors (N=721)

PLAN SPONSORS

44%
Plan sponsors that felt their benefits plan provides enough coverage for mental-health counselling

HIGHS • LOWS		
54% Quebec and Alberta (tied)	Manitoba and Saskatchewan (combined)	27%
52% Flex plan	Traditional plan	39%
50% 500 or more employees	Fewer than 50 employees	35%

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors (N=721)

BILL PAPADIMITRIOU DESJARDINS INSURANCE

“Employers and insurers have great programs in place for mental-health support. Awareness has significantly increased and stigma has diminished. Yet basic coverage maximums haven’t changed much and fall short of the number of visits recommended for therapy. Some plans still limit coverage to psychologists when there are other clinicians dedicated to more preventative mental-health care. These disconnects need to be addressed.”

UPS AND DOWNS OF COVERAGE

- About one in 10 (12%) plan sponsors reported they do not provide any coverage for mental-health counselling, up slightly from 2022 (9%) and unchanged from 2020 (12%) when the question was first asked.
- Of the remaining plan sponsors, about a quarter provide employees with an annual coverage maximum of up to \$500 (28%), between \$501 and \$1,000 (25%) or between \$1,001 and \$5,000 (23%). That leaves 7% of plan sponsors with an annual maximum exceeding \$5,000 and 5% that did not answer (and may not know).
- From 2020 to 2023, between 16% (2023) and 24% (2022) of plan sponsors recently increased their annual maximum. As well, between 18% (2021) and 28% (2022) had planned to increase their maximum.
- The average reported annual maximum was \$1,627, down from \$2,006 in 2022 and \$1,865 in 2020.
- When plan sponsors that do not provide any coverage or that did not answer are removed, the average annual maximum was \$1,864 in 2023, compared to \$2,202 in 2022.
- The average annual maximum was \$2,150 in flex plans, compared to \$1,651 in traditional plans.
- This year, 34% of plan sponsors said they plan to increase their annual maximum for mental-health counselling, up from 28% in 2022 and the highest number recorded over the four years this question has been asked.
- The survey presented the following scenario to plan sponsors: “There is growing clinical evidence that the sooner a person with mental-health challenges is able to receive mental-health counselling and the more they



are able to get it as often as they feel it's required, the more likely they are to recover. They also may not require the ongoing use of prescription medications." With this in mind, 44% of plan sponsors felt their benefits plan provides enough coverage for mental-health counselling. Thirty-five per cent felt it does not and 20% did not know.

- Echoing the results for mental-health training, plan sponsors in Quebec (54%), with a flex plan (52%) or 500 or more employees (50%) were more likely to feel they provide enough coverage (see chart). As well, the results were higher for those that offered a wellness account (56%), virtual health-care services (55%) and a health-care spending account (50%).

★ KEY TAKEAWAYS ★

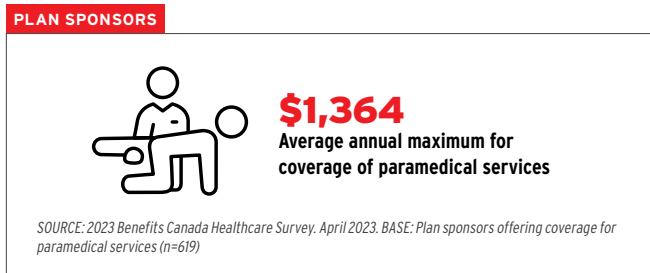
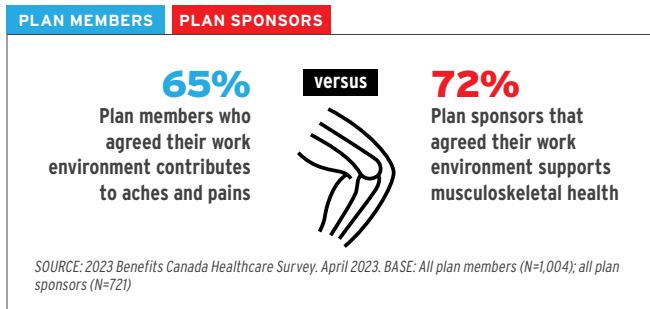
15. The average annual coverage maximum for mental-health counselling was lower than it was in 2020 – even though at least one in six plan sponsors reportedly increased coverage levels every year over the past four years.
16. This year, one-third of plan sponsors planned to increase their annual maximum.
17. When weighed against the impact of mental illness, a leading cause of disability leaves, members of the board agreed significantly higher – even limitless – annual maximums for counselling are prudent.
18. Equally important is expanding the list of eligible mental-health practitioners (e.g., social workers) to reduce wait times and increase the range of services.
19. Enabling all eligible mental-health practitioners to bill directly to the plan members' health benefits plan also removes the barrier of upfront out-of-pocket payments.

CLOSER LOOK AT MUSCULOSKELETAL HEALTH

- Seventy-two per cent of plan sponsors agreed (21% strongly) their work environment supports musculoskeletal health.
- However, as noted on page 7, 65% of plan members agreed their work environment contributes to aches and pains.
- When asked what amount of their annual maximum is for coverage of paramedical services, 11% of plan sponsors said they did not provide any coverage, while 4% did not know.
- Twenty-nine per cent reported an annual maximum of up to \$500; 27% from \$502 to \$1,000; 23% from \$1,001 to \$5,000; and 7%, more than \$5,000. This translates into an average of \$1,215. Removing those that did not provide coverage, the average increases to \$1,364.

“” ALEXANDRA LAFLAMME-SANDERS SUN LIFE

“The fact that mental health is coming up so strongly across the survey is excellent. It shows we’re continuing to break down the stigma that exists. The next opportunity is to think about health holistically, looking at mental health in conjunction to physical health, such as cardiac disease, obesity, pain, etc. We know co-morbidity exists across the health spectrum.”



“” MARC DUPLESSIS TOYOTA MOTOR MANUFACTURING CANADA

“I’m not surprised so many employees say their workplace is a source of aches and pains. Support goes far beyond appropriate coverage levels for paramedicals. Ergonomic work environments are also a must for employees to perform at their best. For employees with chronic pain, we recently began offering treatment onsite and workplace injuries dropped quite a bit.”



★ KEY TAKEAWAYS ★

20. For the first time, the survey included musculoskeletal health as an area of focus for workplace wellness supports.

21. Most plan members agreed their work environment contributes to aches and pains; however, most plan sponsors felt their environment supports musculoskeletal health.

22. When provided with details about the impact of musculoskeletal conditions, more than a third of plan sponsors felt their benefits plan did not provide enough coverage and one in four did not know.

23. Musculoskeletal conditions are on the rise across all age groups, in part due to remote work environments that are not ergonomic, noted the advisory board.

- The overall average annual maximum for organizations with fewer than 50 employees was \$757, compared to \$1,371 for organizations with more staff. Flex plans also had higher annual maximums (\$1,424) than traditional plans (\$1,066).
- Regionally, Manitoba and Saskatchewan (\$680) and Alberta (\$729) had the lowest annual maximums for paramedical services, while Atlantic Canada (\$1,690) and Ontario (\$1,513) had the highest.
- The survey presented the following scenario to plan sponsors: "Musculoskeletal conditions . . . are responsible for one-third of all lost time at work. There is growing clinical evidence that the sooner a person with musculoskeletal conditions is able to receive specialized treatments and the more they are able to get it as often as they feel it's required, the more likely they are to recover and return to work faster. They also may not require the ongoing use of prescription medications." With this in mind, 34% of plan sponsors felt their benefits plan provides enough coverage for musculoskeletal care and treatment. Thirty-nine per cent felt it does not and 26% did not know.



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can help drive retention.

77% of employees would consider changing jobs for better wellbeing support.*

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*Source: Morneau Shepell (2020).

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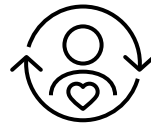
WELLNESS INVESTMENTS

- Seventy-four per cent of plan sponsors anticipated they will dedicate funds and/or staff resources to support employee wellness in at least one of six ways, outside of the health benefits plan. This is consistent with last year (75%) and results before the pandemic (71% in 2019, 75% in early 2020). In 2021, the result dipped to 67%.
- Sixty-three per cent of small employers (fewer than 50 employees) plan to invest in at least one wellness area, up from 51% in 2022 and 45% in 2021, and closing the gap compared to employers with 500 or more employees (see chart).
- Plan sponsors with a flex plan (84%) were more likely than those with a traditional plan (67%) to invest in wellness areas outside of the health benefits plan.
- Investments in mental or emotional health remained the top priority (44%), followed by physical fitness (33%) and then, in quick succession, social health (e.g., volunteerism, 27%), the prevention of illness and/or management of chronic conditions (26%) and financial health (26%).
- Musculoskeletal health is new to the list this year. Sixteen per cent of plan sponsors reported planning to invest in this area of wellness.
- Eighty-six per cent of plan sponsors agreed (33% strongly) employers should take on greater responsibility to prevent rather than just treat disease, illness and injury.
- In 2017, when this question was last asked, 73% agreed and, in 2013, when it was first asked, 91% agreed (48% strongly).

★ **KEY TAKEAWAYS** ★

24. Three in four plan sponsors remain committed to investing in at least one of six areas of wellness over the next three years.
25. Supports for emotional or mental health remain the top priority.
26. However, the remaining wellness areas all contribute to mental health, noted the board, which suggests investments in mental health may see better returns if the total investment is more equally distributed across all areas.
27. At the very least, plan sponsors should perhaps give more priority to supporting financial health, given it's the No. 1 source of high levels of stress.
28. The advisory board also strongly recommended carving out funds for navigation support between all wellness areas, perhaps through enhanced employee assistance programs.
29. Finally, the board reminded plan sponsors to put a wellness strategy in place before investing in any of the six wellness areas.

PLAN SPONSORS

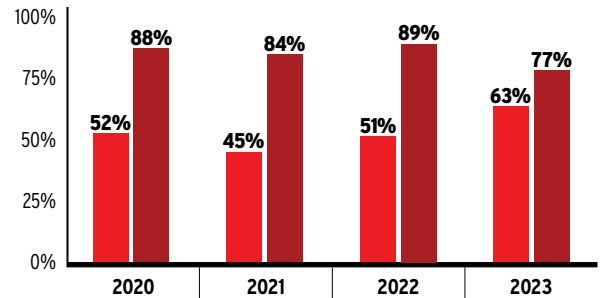


74%

Plan sponsors that anticipated dedicating funds and/or staff resources in the next three years to at least one wellness area outside of the health benefits plan

BY SIZE OF ORGANIZATION

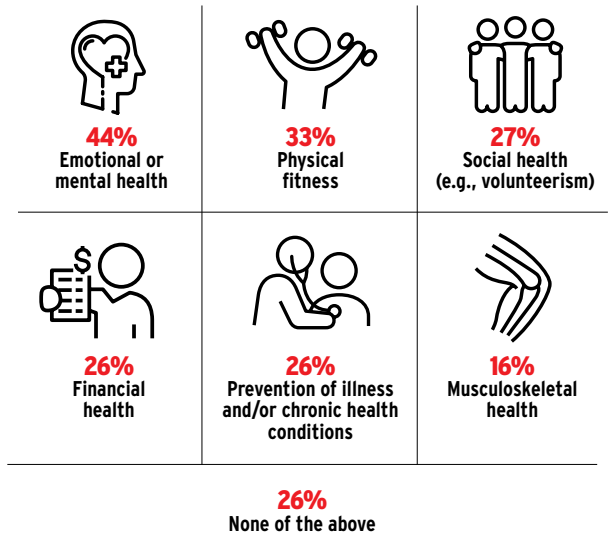
■ Fewer than 50 employees ■ 500 or more employees



SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors (2020 N=516; 2021 N=524; 2022 N=553; 2023 N=721)

PLAN SPONSORS

ANTICIPATED INVESTMENTS IN SIX WELLNESS AREAS

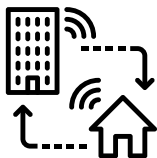


SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors (N=721);

NADEEM RAJABALI PACIFIC BLUE CROSS

“Plan sponsors remain committed to investing in wellness, which is encouraging. Let’s marry that with another big takeaway from this year’s survey: the growing need for help with navigation. Going forward, let’s make sure to include the right communication and navigation support when re-sourcing for wellness, so everyone can access and benefit fully from these investments.”

PLAN SPONSORS



68%
Plan sponsors that agreed it has become harder to influence a workplace culture to encourage wellness and mental health due to more employees working remotely

SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: All plan sponsors (N=721)

PLAN MEMBERS

EMPLOYERS SUPPORT EMPLOYEES' MENTAL HEALTH ...

- Better at the work site
- Equally well at work site or when working from home/remotely
- Better when working from home/remotely

OVERALL



BY USE OF BENEFITS FOR MENTAL-HEALTH THERAPY

Light users (0-3 times in past year)



Heavy users (11 or more times)



BY AGE

18 to 34 years old



55 and older



SOURCE: 2023 Benefits Canada Healthcare Survey, April 2023. BASE: Plan members who work from home/remotely (n=432)

REMOTE WORK ADDS CHALLENGES

- Forty-six per cent of plan members reported working from home or remotely, jumping to 81% among those working in professional services/high-tech sectors.
- Members with a major injury were also more likely (65%) to be working from home, as were medium (64%) or heavy (63%) users of benefits for mental-health therapy.
- Plan members worked from home or remotely for an average of 3.2 days per week.
- Of those who did not work from home or remotely (54%), fewer than one in 10 (8%) indicated it was because their employer does not allow them to do so.
- Plan sponsors reported that 49% of their workforce worked from home or remotely during the past year at least partially, down from 58% in both 2022 and 2021. Only 5% indicated that none of their workforce did so.
- Plan sponsors estimated that work-from-home employees did so 57% of the time during the past year, or about 2.9 days a week, down from 65% (3.3 days) in 2022.
- Two out of three (68%) plan sponsors agreed (23% strongly) the increased number of employees working remotely has made it harder to influence a workplace culture that encourages wellness and mental health.
- Organizations with 500 or more employees (74%) were more likely than those with fewer than 50 employees (56%) to feel it has become harder to influence the workplace culture.
- Among plan members who worked at home or remotely, 41% agreed their employer supported their mental health better at their work site, 37% felt supported equally well at home or at the work site and 22% felt better supported at home.
- Opinions shifted based on members' utilization of benefits for mental-health therapy, with heavy users much more likely (72%) to feel better supported at the work site. Age was also a determining factor, with younger employees feeling better supported at the work site (52%). See chart for details.

★ KEY TAKEAWAYS ★

30. Members of the board were divided about whether a hybrid work environment makes it more difficult to maintain a workplace culture that encourages health and wellness.
31. The challenges of a wellness culture in hybrid environments are similar to pre-pandemic challenges associated with multiple worksites, remote workers and shift workers, noted the board.
32. In all scenarios, the key is intentionality, which hinges on a wellness strategy that is embedded in an organization's mission and values. The strategy must be marketed and measured and evolve with input and leadership from all levels of staff, summarized the board.



We are family: creating a caring workplace culture



Marc Duplessis
Senior manager, total rewards
TOYOTA MOTOR MANUFACTURING CANADA

Transgender Day of Visibility was an emotional day at Toyota Motor Manufacturing Canada this year.

On March 31, the automobile manufacturer hosted a lunch-and-learn webinar session in partnership with its Spectrum employee resource group and Oxford Pride. The session included a personal story from an Oxford Pride board member who had transitioned and an educational clip from a podcast about the value of gender-affirming care. A member of TMMC's senior management team also read a letter from an anonymous employee about their experience transitioning.

Those learning opportunities led to the company introducing a significant new gender affirmation benefit, which took effect on June 1. The benefit offers a lifetime \$10,000 towards procedures not covered by provincial health care for any employee or covered family member.

"We started to look at our plan to ensure it was very inclusive and not missing anything and this is one benefit that our benchmark indicated would be good to add," says Marc Duplessis, senior manager of total rewards at TMMC.

Employees who attended the lunch and learn were in tears listening to their colleague's letter, he adds. "It really drove home that [gender affirmation coverage] isn't a nice to have. It's a need to have."

Duplessis says the benefit speaks to one of TMMC's and its parent company's core philosophies of respect for people and a mandate to improve its internal safety culture that dates back to 2018. While the company was initially focused on occupational safety, it realized a safe workplace wasn't just about physical safety and well-being, but the holistic wellness of employees. It calls its strategy 'mendomi,' a Japanese word that speaks to the idea of an employer caring about and understanding the needs of employees on a deeper level than just the workplace.

"It's [about] getting to know them and understanding more about them," says Duplessis. "So not just having

"Talk to employees as individuals and understand what their needs and wants [are] and what's concerning them."

an employer-employee relationship, but treating them like family."

Mendomi has numerous dimensions, he says, including supporting employees' mental and physical health. In 2022, the company trained 265 supervisors on how to identify mental-health challenges among their employees, how to talk with them about it and then how to refer them to the company's employee assistance program if necessary.

"That's actually something we've requested supervisors do on a daily basis – talk to employees as individuals and understand what their needs and wants [are] and what's concerning them," he says.

TMMC also has onsite wellness centres throughout its plants that team members can go to for early intervention and treatment of musculoskeletal issues, which Duplessis says is common given the manual nature of auto workers' jobs. The wellness centres are staffed with kinesiologists, occupational therapists and other professionals who can offer quick assessments and rehabilitation sessions or refer out. Last year, the company also hosted voluntary biometric screening, recognizing that many employees may not have seen a doctor since the onset of the pandemic, which more than 400 staff participated in.

"If we get at conditions early, onsite or through an external referral, that means they're better able to manage [the condition] and the treatment plan can be that much quicker," he says.

Jes Crawford, senior analyst of compensation and benefits at TMMC, says the company's mendomi initiative and other changes to its benefits, including removing gender reference from its benefits booklet in 2022, have yielded tangible results.

"We got questions from team members about how they update their [transitioning] child's name and gender. Team members are feeling safe enough to reach out and ask questions."

5 TALKING POINTS

FROM THE 2023 BENEFITS CANADA HEALTHCARE SURVEY

1. MORE THAN MENTAL HEALTH



The interplay between physical and mental health cannot be overstated. A mental-health condition, the No. 1 current diagnosis among plan members, may also be a secondary diagnosis for people with chronic conditions such as chronic pain, obesity and arthritis. The survey also confirmed the links between personal health, job satisfaction and the health benefits plan. This body-mind-work connection validates the employer's potential to influence, for better or worse, the health and productivity of employees.

Considering the heightened risks of mental illness and substance use disorder connected with chronic pain (tied for third as the most diagnosed condition), do plan sponsors and providers need to rethink how health benefits and wellness programs support members with chronic pain?

As well, when benefits are considered separately, coverage most often fell short for dental services in the past year. In related news, plan members with health-care spending accounts on average left more than a third of the funds unused, suggesting one avenue for supplementary coverage. However, almost two-thirds of plans do not include HCSAs.

2. APPRECIATION UP, AWARENESS DOWN

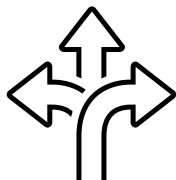


A solid majority of plan members stated they appreciate their health benefits plan more today than they did before the pandemic. They were also more likely to describe the quality of their plan as excellent or good rather than adequate. The better they understood what was in their plan, the more positive they were.

Yet the survey also found overall levels of understanding have declined significantly since 2018. This suggests improved communications can boost members' positive opinions – and likely utilization as well.

While some plan sponsors may argue navigation support is the responsibility

3. HELP THEM FIND THEIR WAY

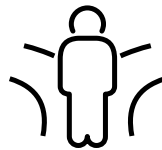


In three years, support to navigate the health-care system has climbed to the top of the list of new or lesser-known benefits plan members would use if available. The impact of inflation sat at the top of the list, followed by competitiveness and sustainability. The next few years will focus on finding the right balance between value and viability.

of government, others agree a reliance on the public system, especially today as it struggles to recover from the pandemic, hurts employers due to delayed diagnoses and treatments. The private sector is also in a better position to adopt new technologies to facilitate access – for example, virtual care.

Furthermore, insurance carriers are increasingly equipped to facilitate navigation through targeted, one-on-one communications with plan members based on their use of health benefits. Since 2018, close to two-thirds of plan members would consent to receive such communications.

4. HOW MUCH IS ENOUGH COVERAGE?



Half of plan members agreed the coverage level of at least one benefit limited their ability to get treatment – jumping to three out of four or more among plan members who have had a major injury or are heavy users of mental-health therapy or paramedical services.

As well, when benefits are considered separately, coverage most often fell short for dental services in the past year.

In related news, plan members with health-care spending accounts on average left more than a third of the funds unused, suggesting one avenue for supplementary coverage. However, almost two-thirds of plans do not include HCSAs.

5. COMMITMENT VERSUS CONCERNS



Three out of four plan members gave a thumbs up when asked if their workplace environment encourages health and wellness, as well as mental wellness specifically. The same proportion of plan sponsors stated they plan to invest in at least one wellness area in the next three years, with mental health at the forefront.

Yet more than four out of five plan sponsors had at least one major concern about their health benefits plan. The impact of inflation sat at the top of the list, followed by competitiveness and sustainability. The next few years will focus on finding the right balance between value and viability.



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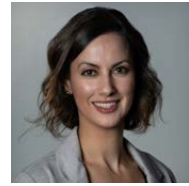
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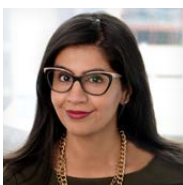
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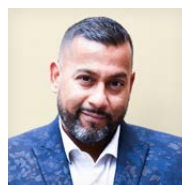
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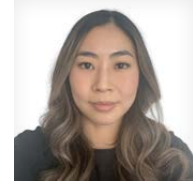
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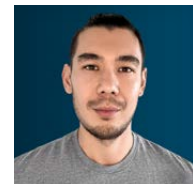
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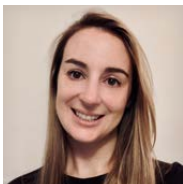
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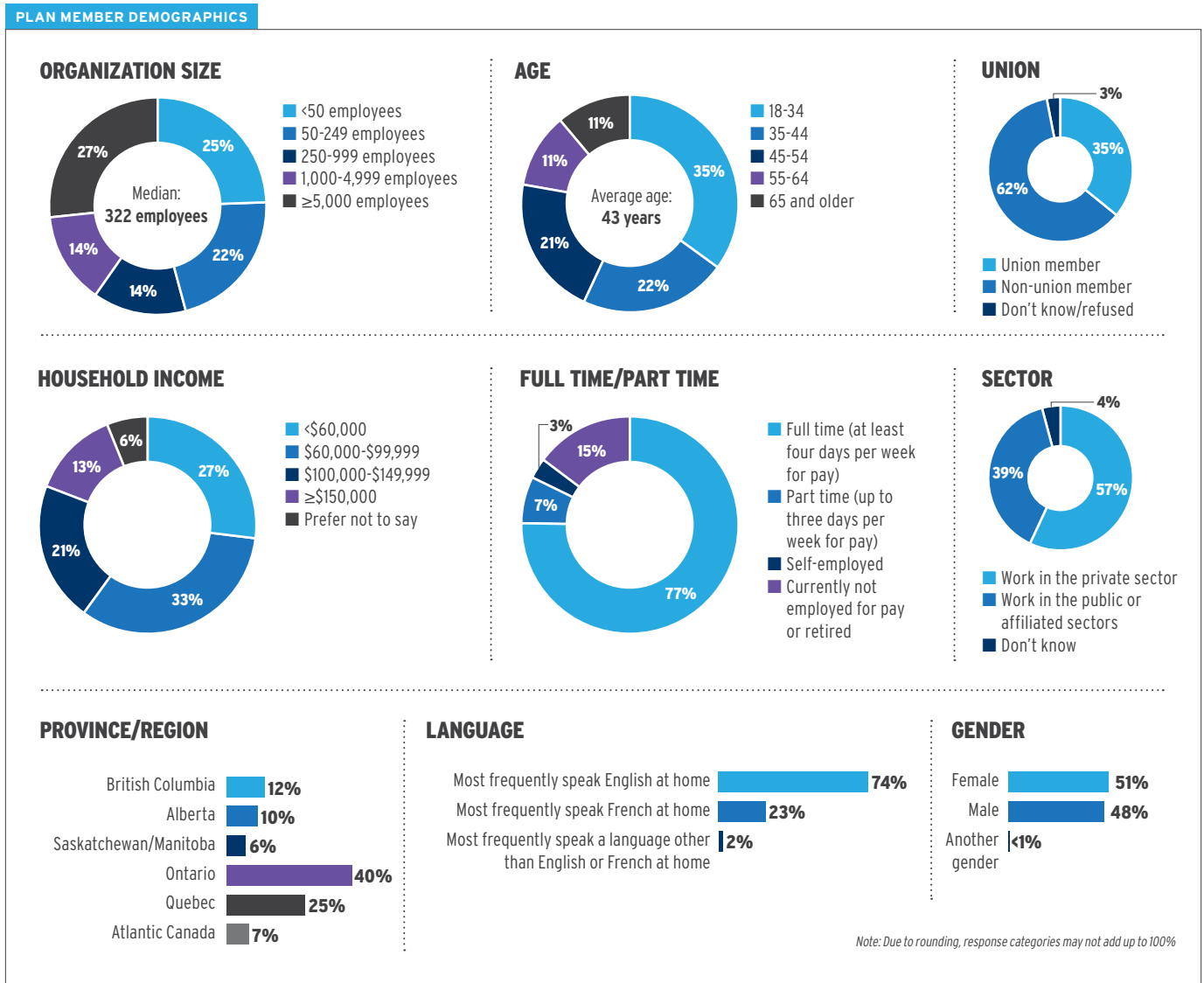


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Group sales vice-president, Western Canada
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METHODOLOGY

The plan member survey was fielded by Ipsos on behalf of Contex Group using an online (Internet survey) methodology between March 28 and April 4, 2023. In total, a national sample of 1,004 primary holders of group health benefits plans completed the study. At the time of each interview, these adults were the primary holders of employee plans with a health benefits portion. The online completes were conducted using a random sample drawn from the 200,000+ members of the Ipsos Canadian i-Say Panel. The total results of a probability sample of this size would be considered accurate to within +/- 3.1%, with 95% certainty of what they would have been had the entire population of Canadian plan members been polled. It is important to note, though, that the margin of error for smaller sub-sample respondent groups would be higher. The data has been statistically weighted to ensure the age, gender and regional composition of the sample reflects those of the adult working population according to the 2020 Census data. Additionally, some response categories in this report do not add up to 100% – this is due either to the rounding of numbers or questions that allowed plan members to provide multiple responses.

In addition, a separate online survey was fielded by Maru/Blue for Contex Group research with 721 benefits plan sponsor decision-makers from across the country responding between April 3 and 10, 2023. The data was statistically weighted to accurately reflect the geographic distribution of business and business size according to Industry Canada.





The 2023 *Benefits Canada Healthcare Survey* is published by Context Group Inc.

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