

EMPLOYEE BENEFITS - OUT OF CONTROL FEI VANCOUVER CHAPTER

3 NOVEMBER 2011





Overview

- Current landscape issues and trends
- Mathematics of employee compensation
- Benefit plan trends
- Proactive benefit plan management
- Educate you????
- Scare you???
- Prepare you????

Current Landscape – Issues and Trends It used to be simple...

- Fringe benefit
- Affordable and predictable
- Light to moderate utilization
- One size fits all



Current Landscape – Issues and Trends Not anymore...

- Significant and unpredictable cost
- High utilization rates driving inflation
- No relief in sight
- Diverse workforce one size does not fit all
- Broadened scope of benefit programs

Not strategically managed – for the most part

Benefits are anything but simple!



Current Landscape – Issues and Trends Economic reality and the pressure to manage benefit plan costs

- Uncertainty is the new reality requires a delicate balancing act
- Human capital imperative is real with higher costs to attract and retain
- Higher value placed on health care, post employment benefits, disability, critical illness, long-term care
- Benefit plan costs will continue to increase at rates higher than general inflation
- Chronic disease likely to increase
- Cost of post-retirement benefits will only increase



Current Landscape – Issues and Trends Changing demographics and workforce diversity

- Our population is aging
 - Only three workers per retired Canadian in 2030
- Our health is a concern
 - Obesity rates ballooning
 - Chronic disease is 70% of all health care costs (9 million Canadians)
 - Mental health issues affect many but most health issues today are preventable and manageable
- Four generations in the workforce with different needs
- Increasing cultural diversity
 - By 2025, all labour market growth will come from immigration
- The definition of family is changing

Sources: Health Canada: Statistics Canada



Current Landscape – Issues and Trends Canada's evolving health care system

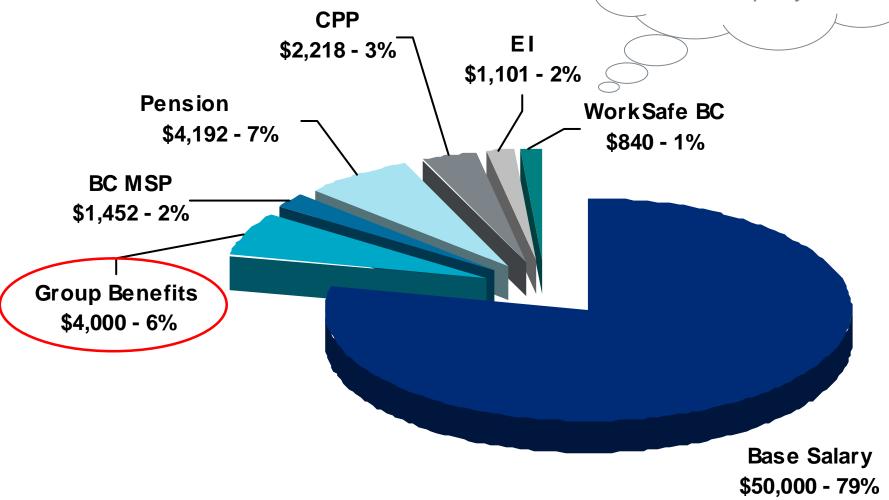
- Unsustainable
 - \$170+ billion spent each year: up 60% over last 10 years
- Access to health care is a complex story
 - Benchmark wait times are largely being met, yet
 - 1 in 6 Canadians report difficulties in accessing routine care
- The age of biologic drugs is upon us
- Governments will:
 - Manage drug expenditures
 - Shift costs to plan sponsors
- Health care access issues may result in greater demand for queue jumping



Mathematics of Employee Compensation Salary is just the beginning

2011 - Total Compensation - \$63,803

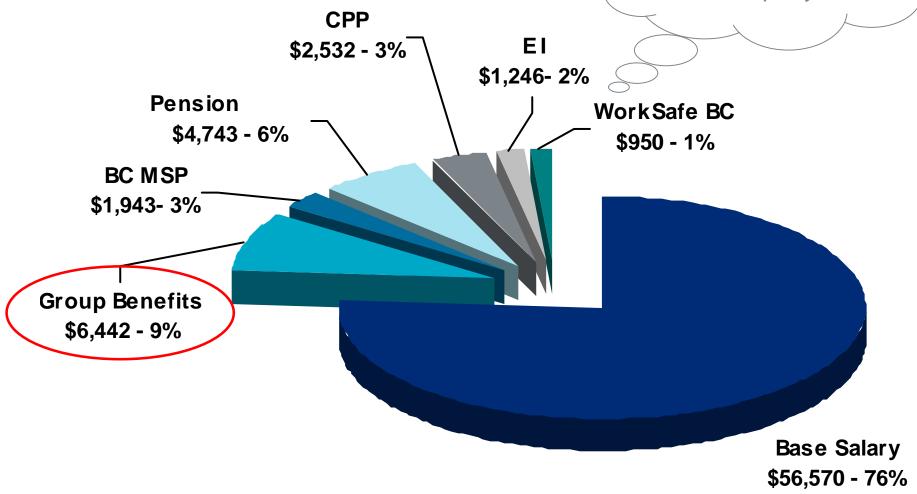
How much does it cost to pay an employee a salary of \$50,000 per year?



Mathematics of Employee Compensation Benefit costs are growing faster than salaries

2016 - Total Compensation - \$74,427

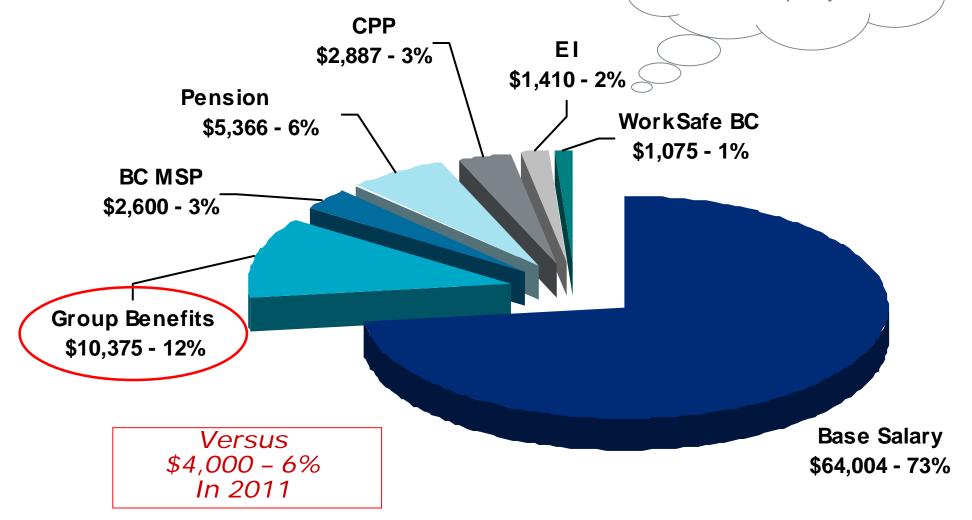
How much does it cost to pay an employee a salary of \$50,000 per year?



Mathematics of Employee Compensation Are benefits sustainable in their current form?

2021 - Total Compensation - \$87,718

How much does it cost to pay an employee a salary of \$50,000 per year?

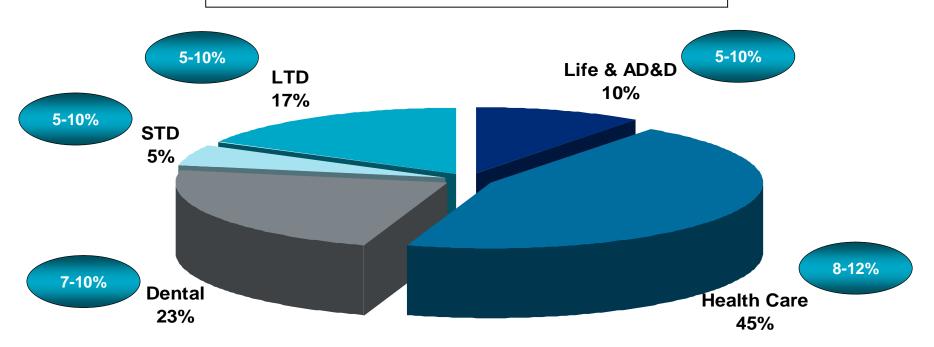


Benefit Plan Trends

Significant and growing cost ... but not strategically managed

- From 3.5% of payroll to 7.5% of payroll in 10 years*
- Increasing, in aggregate, at 3 to 5 times the rate of regular inflation (CPI) but increases vary significantly by benefit

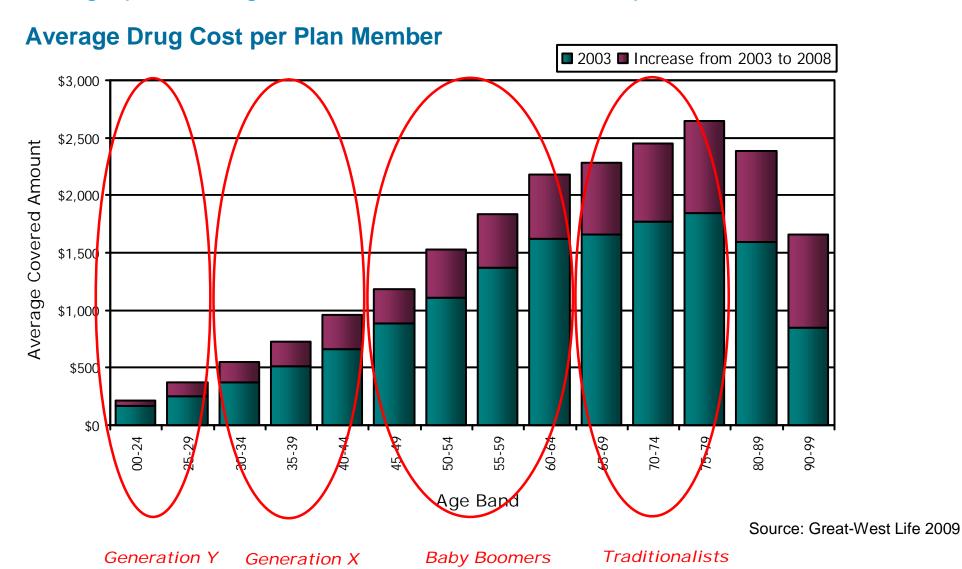
Typical Benefit Plan Cost Distribution and Trend Factors by Benefit



Source: Group Universe Report, Fraser Group

Benefit Plan Trends

Demographic changes can drive costs ... but also perceived value

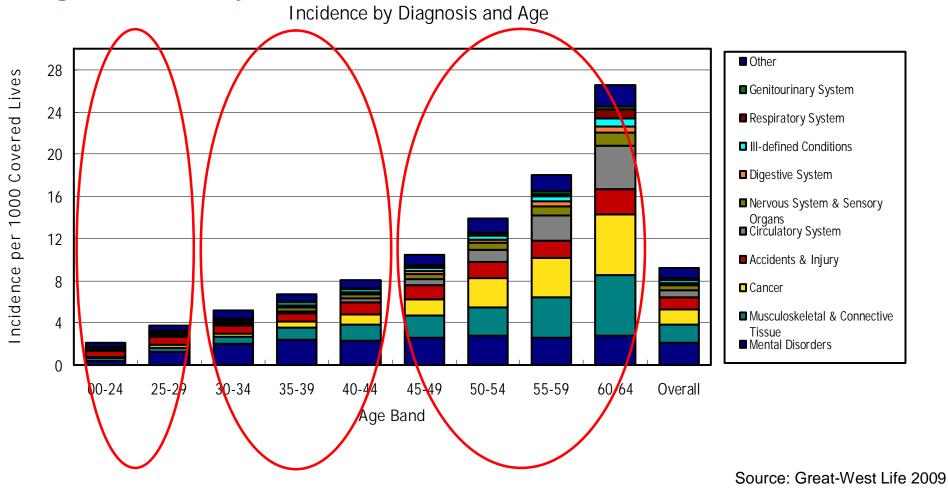


Benefit Plan Trends

Generation Y

Demographic changes can drive costs ... but also perceived value

Long Term Disability – Incidence



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Generation X

Baby Boomers

Benefit Plan Trends Position for recovery and growth ... with expectations on new strategies

- Based on Mercer's Global Snapshot Survey: Leading through unprecedented times (2009), 63% of participants indicated they had or were somewhat to very likely to increase employee contributions for health coverage
- However, most organizations refrained from making significant changes to benefits while they focused on surviving the economic downturn
 - There was pressure instead to increase productivity and more proactively manage current benefit plan costs
- As the economic downturn fades, plan sponsors seem to be making some small efforts to restrain increases in benefit costs with some surgical plan adjustments, as per 2010-2011 trends in *Mercer's Plan Design Database*:
 - Decline in percentage of plans with 100% co-pay on drugs continues
 - Trend to introduce a dispensing fee maximum continues, as does the shift to a higher maximum
 - Reduction in the percentage of plans with 100% coinsurance on basic dental
 - Downward shift in the percentage of traditional plans that are 100% employer paid

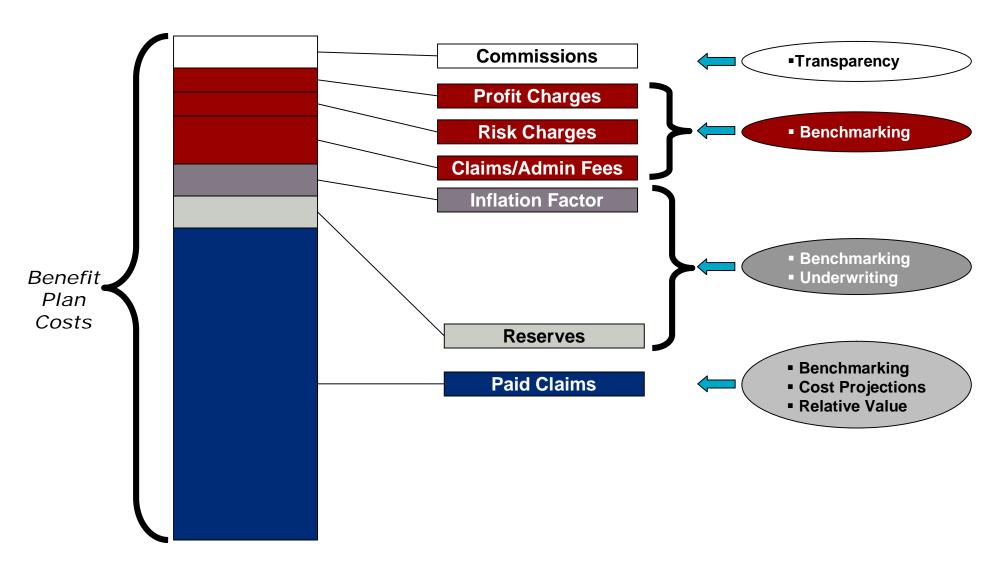
Benefit Plan Trends Position for recovery and growth ... but employees are disengaged!!

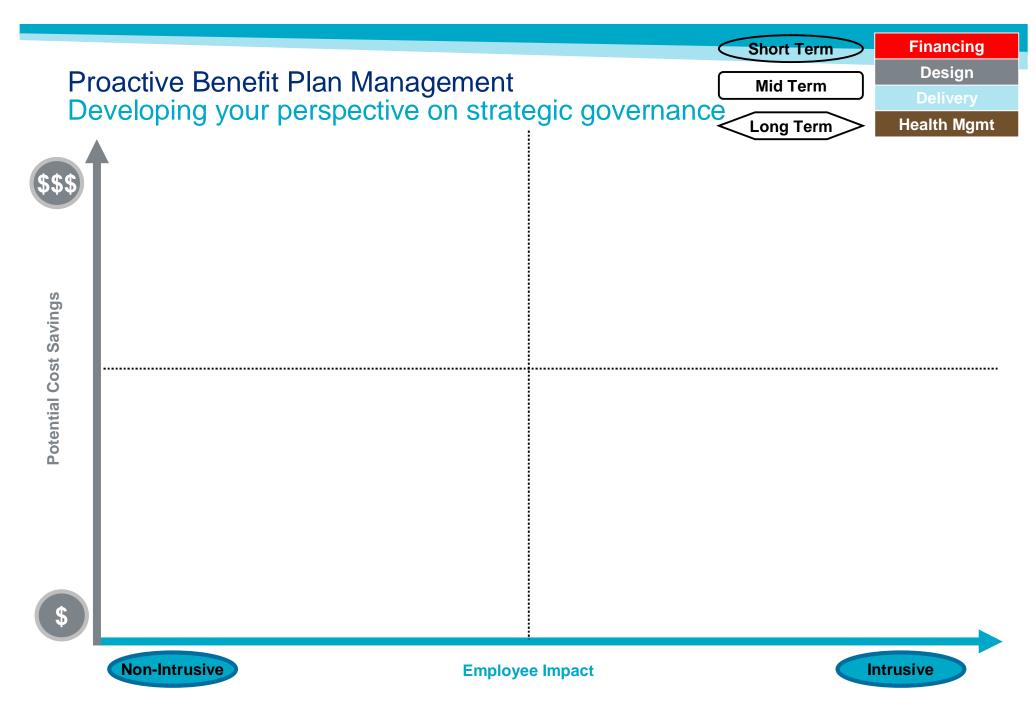
- Mercer's What's Working Survey (June 2011) shows Canadian employees are less committed and less satisfied with many aspects of their work experience
 - One in three (1/3) is seriously considering leaving their organization
 - Another one in five (1/5) is ambivalent about whether to stay or go
 - One of the highest levels of disengagement globally
- Two primary factors are behind this shift in employee sentiment:
 - An evolving (redefined) employment deal viewed as a series of takeaways
 - Responses to the economic downturn (i.e., pay freezes, cuts, etc.)
- An engaged workforce is more necessary than ever but, at the same time, more difficult to achieve due in part to ongoing financial pressures
- Specific to benefits, about 48% agree that they play a significant role in their decision to continue to work for an organization
 - 57% of employees say their benefits meet their needs, likely since benefits were largely not modified during the economic downturn
 - However, 43% want more choice and control and 41% say they would be willing to use their own money for improved or new benefits

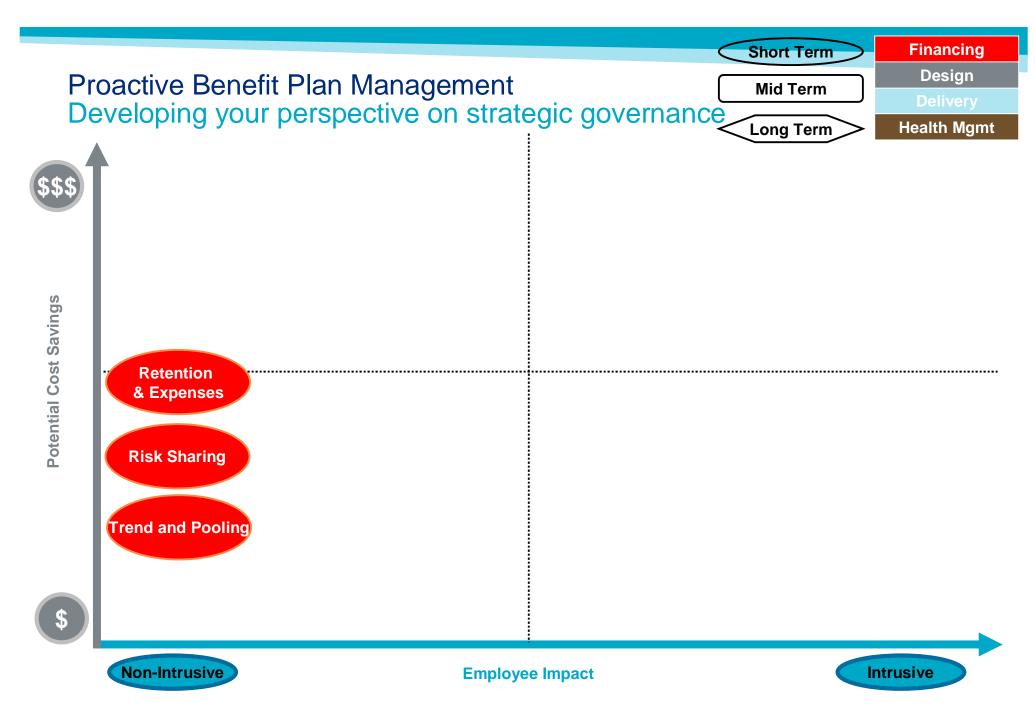
Benefit Plan Trends Fewer options for plan sponsors ... the "old standbys" no longer work

- Marketing the benefit plan
 - Reduced number of carriers in Canada
 - Renewed focus on profitability
 - Adversely affected by the economic downturn
 - Reluctance to assume insured risks
 - Adverse reaction to recurring marketings ("blacklist")
 - Inconvenience to plan administrators and employees / dependents
 - Loss of annual and lifetime plan maximums
 - "Whiplash" when "marketing discounts" disappear
 - No longer provides effective nor sustainable cost management
- Expanding traditional cost containment initiatives
 - Review scope of coverage
 - Revise plan deductibles, coinsurance, maximums, etc.
 - Assess premium cost sharing
 - Limit employer contributions
 - Exhausts employee cost sharing and strains fiduciary responsibilities

Proactive Benefit Plan Management Understanding what is in the benefit plan costs

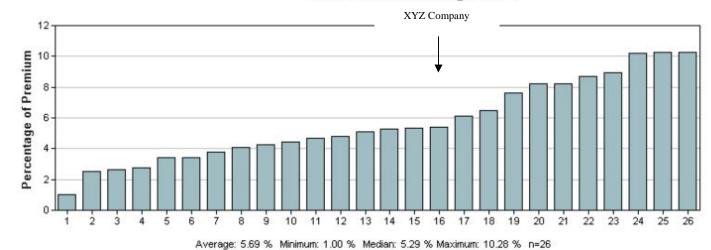




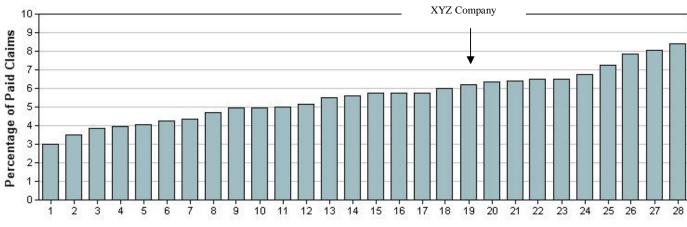


Proactive Benefit Plan Management Benchmark retention and expense charges

LTD Retention Comparison



Health Retention Comparison



Average: 5.59 % Minimum: 3.02 % Median: 5.75 % Maximum: 8.40 % n=28

Proactive Benefit Plan Management Evaluate risk sharing alternatives

Insured

Non-Refund Accounting

Refund Accounting

Advantages

- Stable costs during the year
- No "deficits" to repay

- Stable costs during the year
- Employer keeps "surpluses"
- May walk away from a "deficit" depending on the financial agreement

Self-Insured

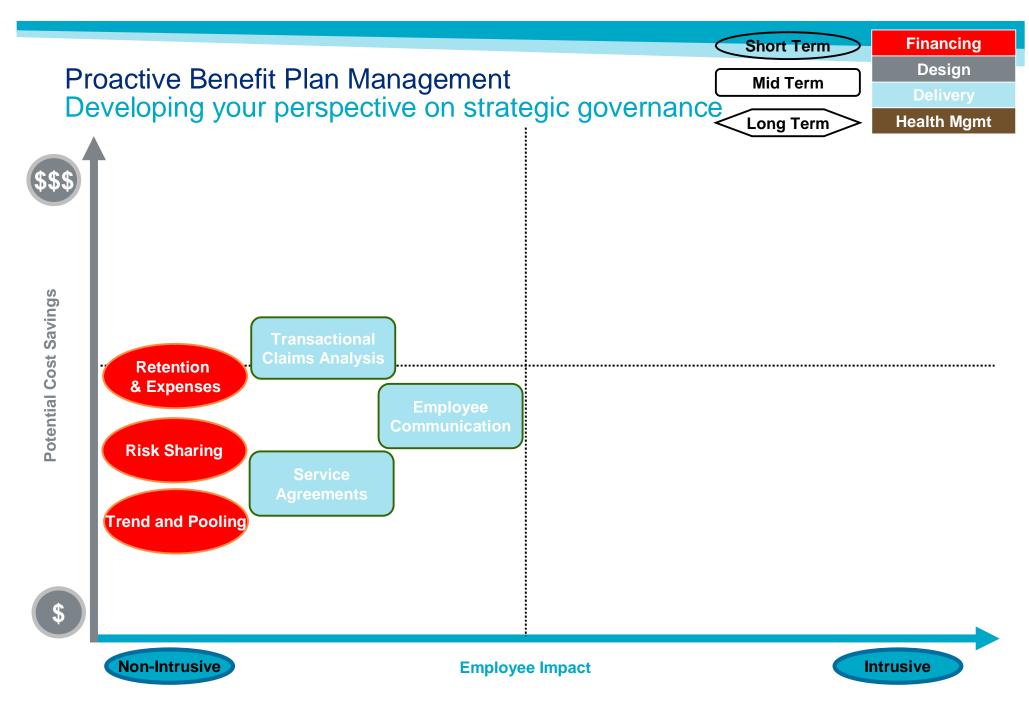
Administrative Services Only - ASO

- Added flexibility
- Employer keeps "surpluses"
- No risk charges
- Added negotiability
- Control of funding
- No premium tax (some Provinces)

Disadvantages

- Insurer keeps "surpluses"
- Least financially negotiable
- Limited claim exceptions
- Expected to repay "deficits" over time
- Risk charges

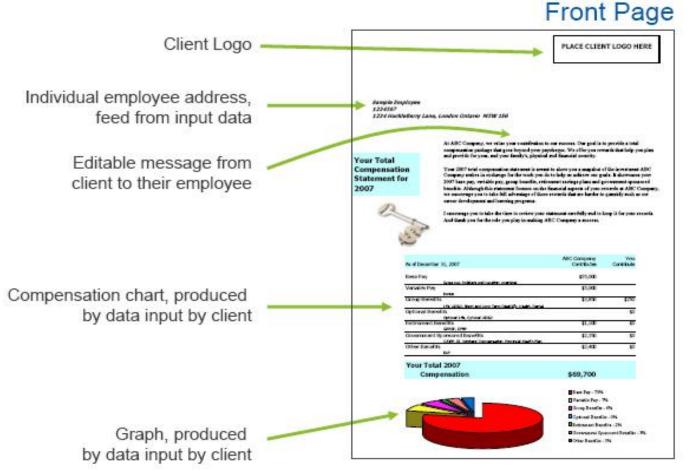
- Must repay "deficits" as incurred/negotiated
- Legal liability
- Fluctuations in cash flows

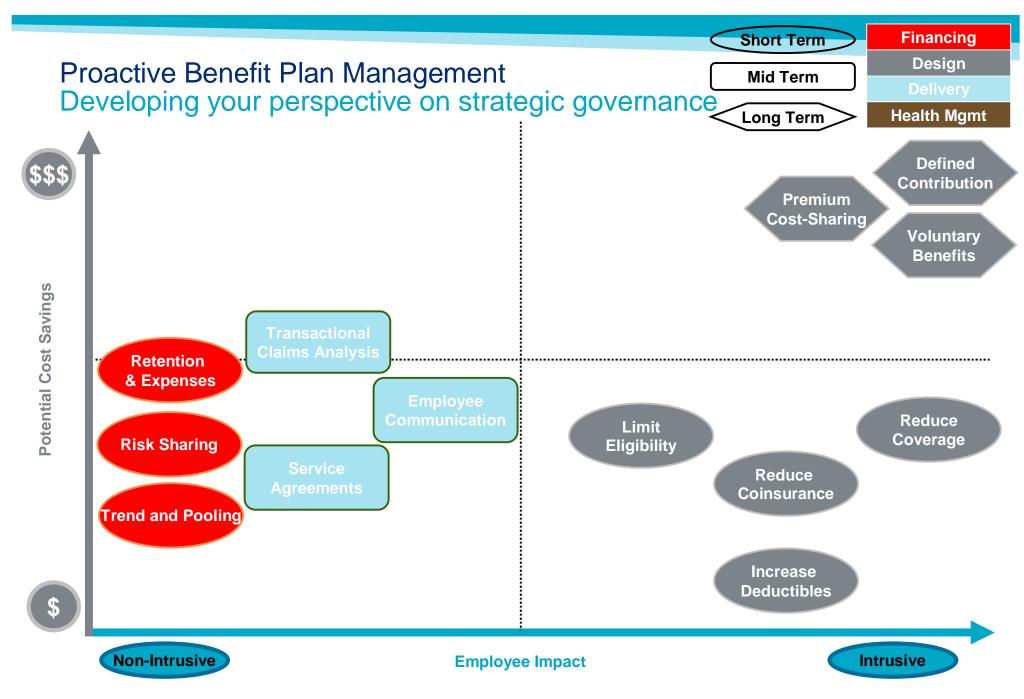


Proactive Benefit Plan Management Enhance employee communication

Mercer Total Compensation Statement Template

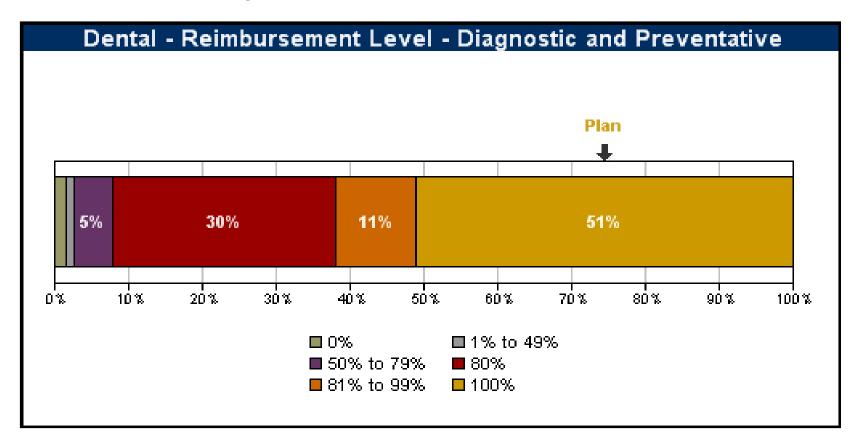
- Strong benefits communication can help drive the following competitive advantages
 - Decreased turnover
 - Enhanced recruiting
 - More engaged and loyal employees
 - Improved productivity
 - Reduced benefits administration





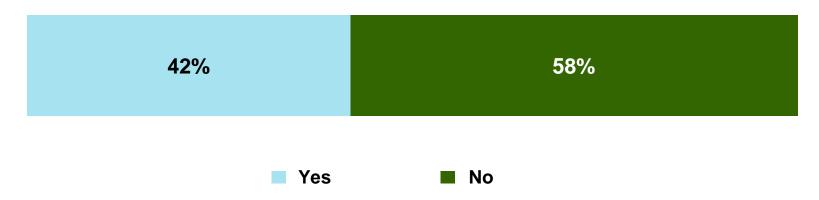
Proactive Benefit Plan Management Benchmarking benefit plan design

- Access a comprehensive database with relevant plan sponsors and benefit plans
- Benchmark against market/comparator plan design provisions to identify competitive positioning



Extended health plans have deductibles – MYTH – The reality is that more than half (58%) of extended health plans do not have a deductible. For those plans with a deductible, the most prevalent deductible value is \$25 – an amount that has not changed in decades.

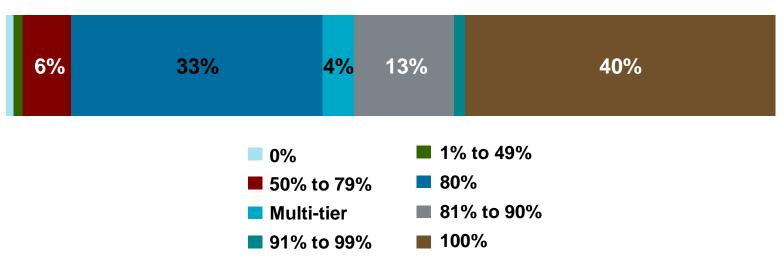
Single/Family Annual Deductible for Health



Source: Mercer Plan Design Database: health and benefits N=2407

Most drug programs are cost-shared with claimants through coinsurance – MYTH – The most common co-insurance percentage for the reimbursement of drug expenses is 100%.

Health – Drugs – Coinsurance



Source: Mercer Plan Design Database: health and benefits

N = 3007

In light of increasing drug costs, per-prescription deductibles are the norm – MYTH – Actually, only 17% of plans in the Mercer database have implemented a per-prescription deductible.

Health – Drug – Per Prescription Deductible - Prevalence

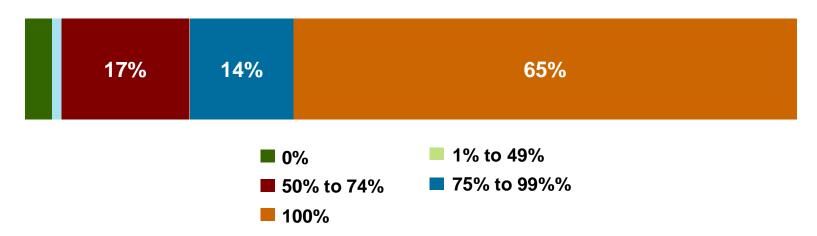


Source: Mercer Plan Design Database: health and benefits

N = 2558

Extended health coverage is often cost-shared – MYTH - 65% of employers still pay for 100% of the cost of extended health coverage.

Health – Employer Cost Sharing Summary - Traditional Plans Only

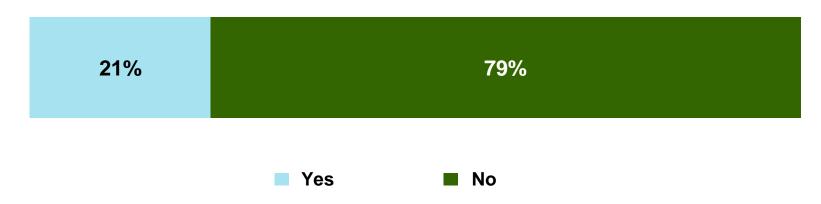


Source: Mercer Plan Design Database: health and benefits

N=2779

Dental plans have deductibles – MYTH – For dental, the story is similar – only 21% of plans have a deductible with the most prevalent deductible being \$25 per single and \$50 per family. Similar to extended health, these levels have not changed in decades.

Dental – Single/Family Annual Deductible



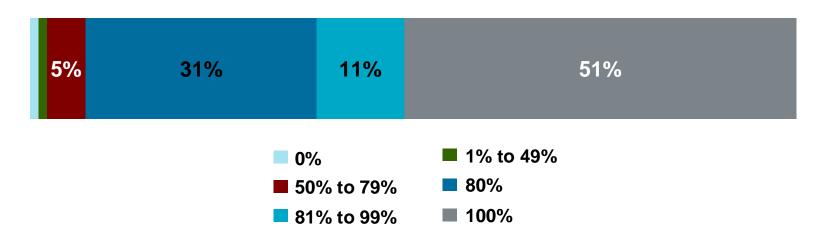
Source: Mercer Plan Design Database: health and benefits

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N=2177

Routine dental expenses are generally reimbursed at less than 100% co-insurance – MYTH – The most common co-insurance percentage for the reimbursement of routine or basic dental expenses is 100%.

Dental – Routine – Coinsurance

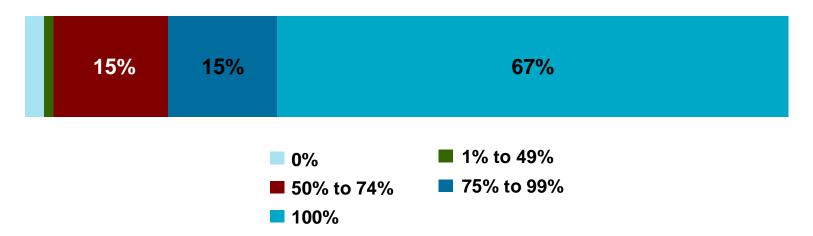


Source: Mercer Plan Design Database: health and benefits

N = 2779

Dental coverage is often cost-shared— MYTH – It might be growing but at a low rate – 67% of plan sponsors still pay 100% of the cost of dental coverage.

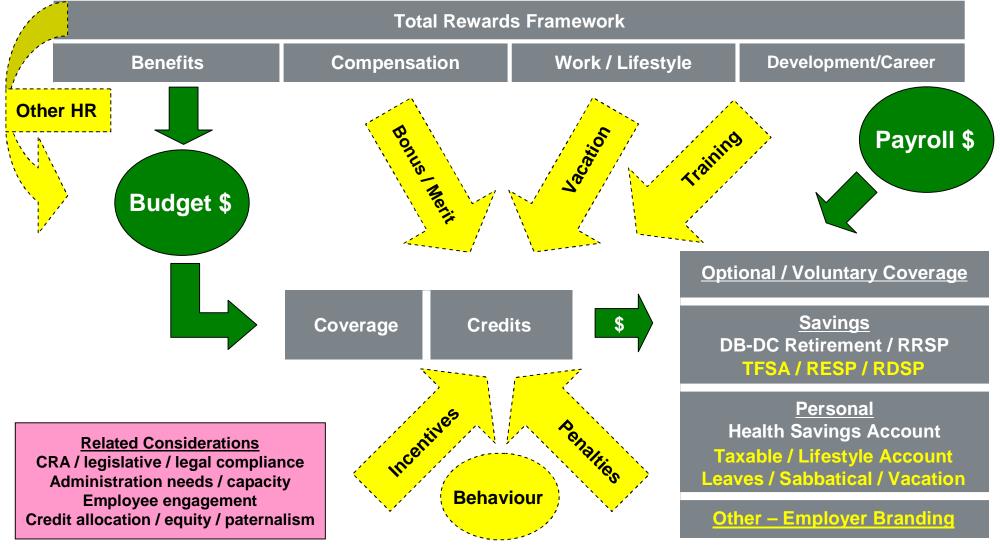
Dental – Employer Cost Sharing Summary – Traditional Plans Only

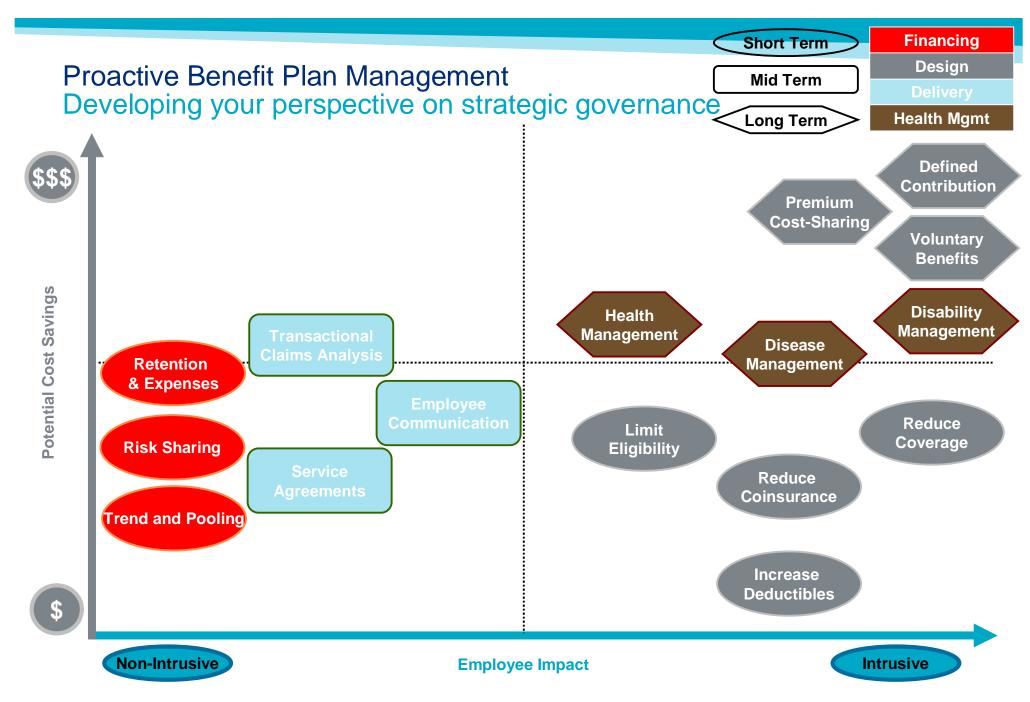


Source: Mercer Plan Design Database: health and benefits

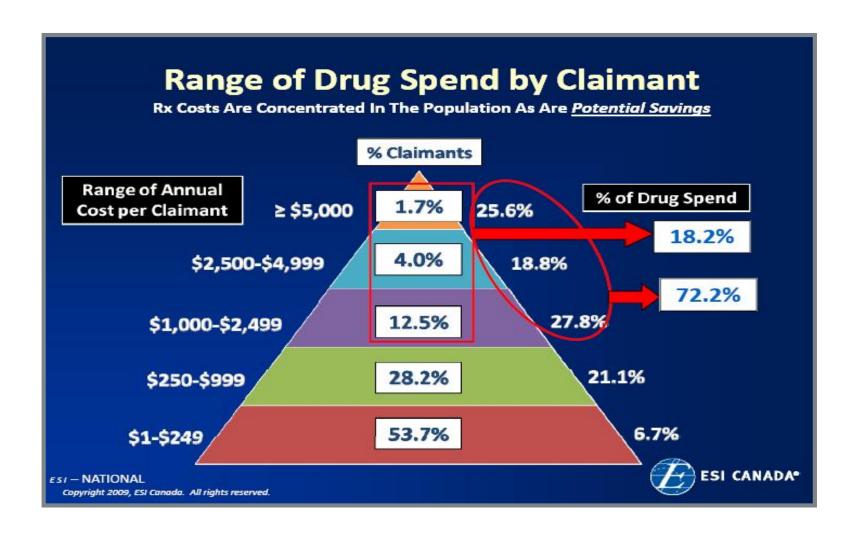
N=2173

Proactive Benefit Plan Management The future - additional flexibility and choice in benefits plans

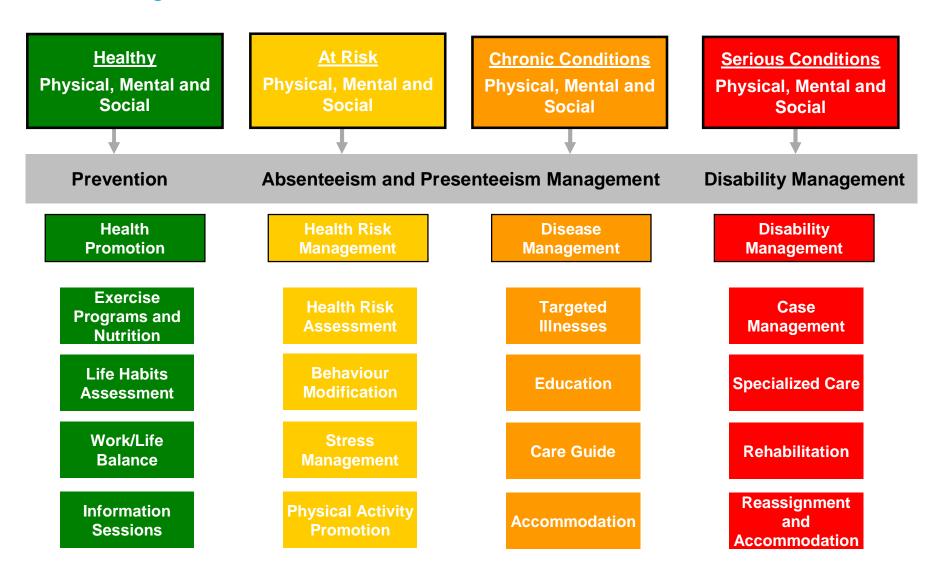


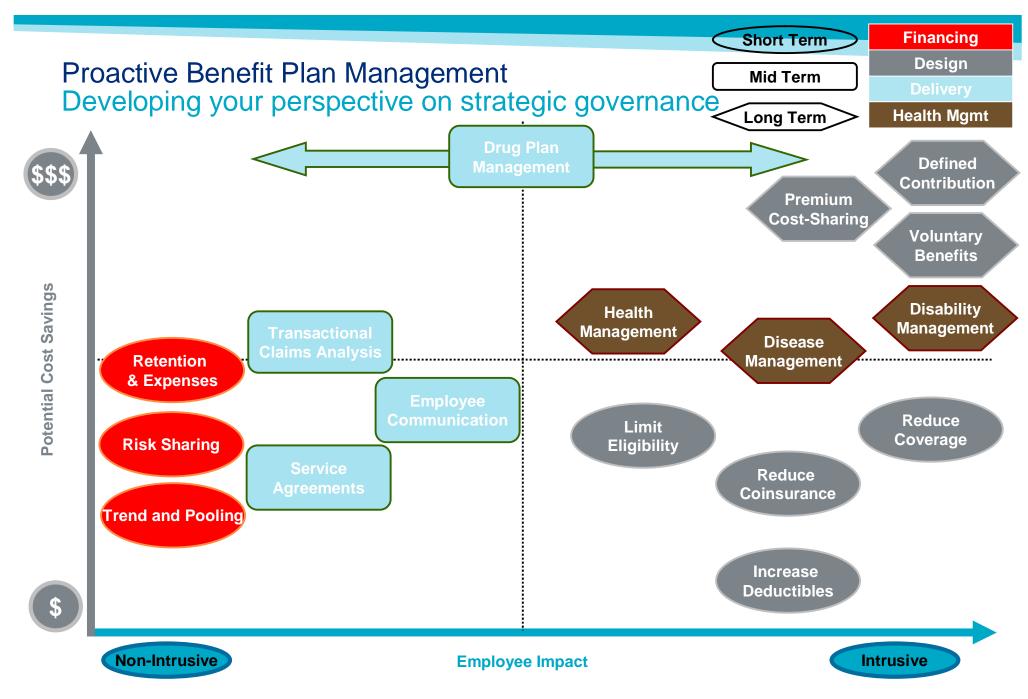


Proactive Benefit Plan Management 80/20 Rule – 80 per cent of claims / 20 per cent of population



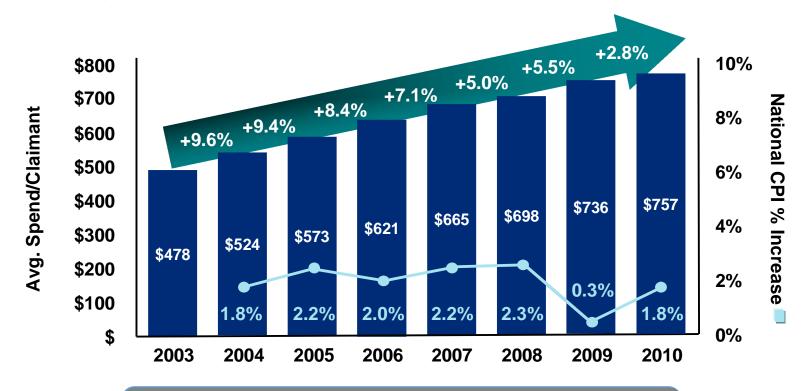
Proactive Benefit Plan Management Focus on organizational health continuum





Proactive Benefit Plan Management Looking ahead – drug costs are still the biggest concern

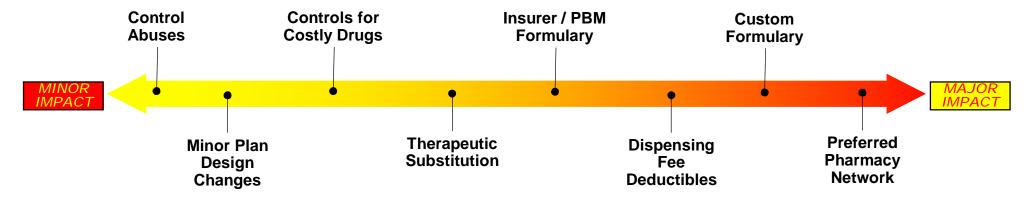
Annual Drug Spend Per Claimant



- Drug spend up; however percent increases cooling
- Still outpaces annual inflation rate

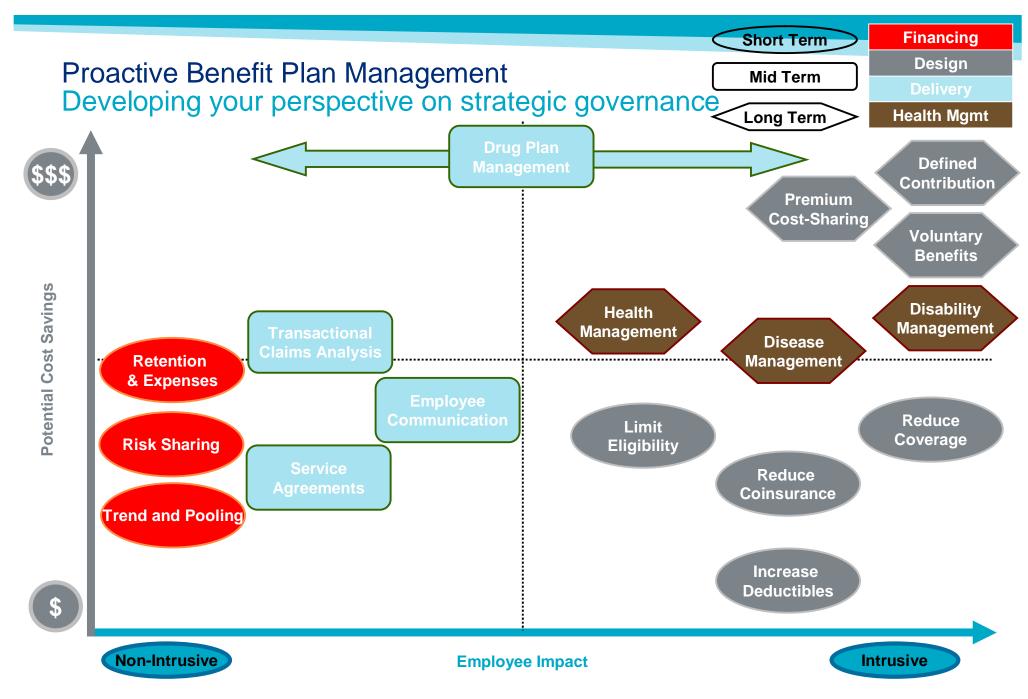
Source: ESI Canada

Proactive Benefit Plan Management Assess drug plan management strategies



PLAN SPONSOR CONSIDERATIONS

Current and future drug utilization
Pipeline of new and costly drugs under development
"Patent cliff" on brand name drugs
Government regulatory reform and private plan impact
Current versus future role of pharmacies
Role of drug card in pharmacy management
Employee education and communication (consumerism)
Role of health management



Summary And Questions ...

- Stay on top of issues and trends in the market
- Understand the realities of your current plan
- Develop strategies that address both your plan-specific issues and broader market trends
- Take a long term perspective



About Dan Eisner Principal – Health & Benefits Business, Vancouver

- Dan applies his experience as a human resource consultant and employee benefits specialist, and his skills as a Chartered Accountant to partner with organizations to maximize the value and ensure the sustainability and relevance of their benefits strategies.
- His passion is facilitating the dialogue between human resource and finance professionals to develop employee benefits strategies that recognize the increasing financial complexity of benefits and their integration into the broader business strategy.
- Dan regularly speaks at industry events, most recently focusing on workforce strategies to enhance the level of employee choice and flexibility, to implement proactive benefit plan management strategies, and to address issues related to the aging workforce.



 Dan has been very active in the community and is a past President of the Alzheimer Society of BC and a past director of the Alzheimer Society of Canada. In 2003 he received H.R.H. Queen Elizabeth's Golden Jubilee Award for public service in Canada, in 2006 he was recognized with a Community Service Award from the Institute of Chartered Accountants of British Columbia, and in 2007 he received the Clyde and Lanny Slade Leadership Award from the Alzheimer Society of BC.

