

2021 **BENEFITS CANADA**
HEALTHCARE
SURVEY 



WHERE WE GO FROM HERE

Frontline views to help understand COVID-19's impact on health benefits, wellness supports and the work environment

BROUGHT TO YOU BY

Benefits
CANADA

-
- 3 Opening message
-

STATE OF HEALTH

- 4 Personal health
 - 6 COVID-19
 - 8 Chronic conditions
 - 10 Mental health
 - 12 Health care
 - 15 Plan sponsor profile: Canada Goose
 - 16 Workplace supports
 - 19 Plan sponsor profile: Fraser Health Authority
-

VIEWS ABOUT HEALTH BENEFITS

- 20 Evaluation
 - 22 Plan sponsor profile: First Nations Health Authority
 - 24 Utilization
 - 26 Future benefits
 - 29 Plan sponsor profile: Cenovus-Husky
 - 30 Plan sponsors' concerns
-

WORK ENVIRONMENT

- 32 Pandemic times
 - 35 Plan sponsor profile: Shopify
 - 36 After the pandemic
-

- 40 In summary
-

- 41 Advisory board
-

- 42 Methodology
-

2021 BENEFITS CANADA HEALTHCARE SURVEY

GROUP PUBLISHER
Alison Webb

DIRECTOR OF SALES
Francesca Allman

EDITOR
Jennifer Paterson

SENIOR MANAGER CONTENT RESEARCH
Justin Graham

ART DIRECTOR
Shawn Samson, TwoCreative

WRITERS
Alison MacAlpine
Karen Welds

PROJECT MANAGER
Christine Kinoshita

HOW TO REACH US
EDITORIAL:
jennifer.paterson@contexgroup.ca

SPONSORSHIP:
francesca.allman@contexgroup.ca
alison.webb@contexgroup.ca

BROUGHT TO YOU BY

Benefits
CANADA

PUBLISHED BY
CONTEX content +
experience

1100 René Lévesque West, 24th floor,
Montreal, Quebec H3B 4X9

CONTROLLER
Jean-Sébastien Haché

PRESIDENT
Contex Group Inc.
Pierre Marcoux

Moving forward



Jennifer Paterson
Editor
BENEFITS CANADA

The COVID-19 pandemic has thrown us into a constant state of nerve-racking change and uncertainty on the one hand and innovation and uplifting collaboration on the other. With so much happening for so long, it can be difficult to know where we go from here.

Benefits Canada is proud to present the inaugural Benefits Canada Healthcare Survey, formerly the Sanofi Canada Healthcare Survey, which we hope will help you find your way.

The Benefits Canada Healthcare Survey maps out key findings – including alignments and gaps between plan members and plan sponsors – in the key subject areas of personal health, health benefits plans and the work environment. While the emphasis is on the impacts of the pandemic, this report draws

upon more than two decades of past data (when Sanofi Canada produced the benchmark survey in partnership with *Benefits Canada*).

One important takeaway that came through loud and clear during our advisory board meeting to discuss the survey results was the ability for all stakeholders in the benefits industry to act quickly together in response to both the exigencies and opportunities of the pandemic. Crisis may be a catalyst, but the pandemic demonstrated how collaboration truly fuels innovation.

As we continue to navigate the months and years ahead, that ability to collaborate – channelled by frontline research findings, including the Benefits Canada Healthcare Survey – may prove to be our most important guide.

THANK YOU TO OUR SPONSORS

DIAMOND



PLATINUM



FOUNDER



Health takes a hit

More plan members are in poor health and many report negative changes in behaviour that could lead to serious, ongoing health concerns

POOR HEALTH MORE LIKELY

- Almost one in eight plan members (13%) said their health was poor in the past year, up from 8% a year ago and the first notable increase since this question was first asked in 2018. This jumped to 23% among those experiencing high levels of stress.
- Job satisfaction and stress appear to influence results and, as expected, poor health is more likely among those taking three or more medications (see chart).
- Twenty-one per cent of plan members in poor health indicated their health benefits plan does not meet their needs, up from 13% a year ago; only 46% said it meets their needs extremely or very well, compared to 69% among those in good health.

HEALTHY HABITS FALTER

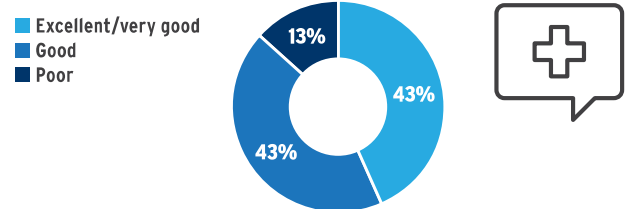
- About one in three plan members reported decreased physical fitness (34%) and/or poorer eating habits (31%) in the past year. Fifteen per cent increased alcohol consumption and 7% increased recreational drug use.
- Plan sponsor respondents, most of whom are in management positions, and plan members who are first responders or working in a health-care environment were more likely to report these negative changes in behaviour (see chart).
- Plan members aged 18 to 34 were more likely to report poorer eating habits (39%).
- A closer look at physical activity reveals that 38% of all members were less active in the past year, while 32% maintained and 30% increased their activity levels.
- Sixty-four per cent of members took fewer vacation days in the past year, jumping to 78% among plan sponsor respondents. The results were also higher among plan members in B.C. (72%), members who worked almost exclusively from home (71%) and those with caregiving responsibilities (70%).

WEIGHT GAIN AMONG THE OUTCOMES

- Plan members experienced a range of outcomes that can lead to or worsen physical or mental-health issues. For example, 41% of plan members gained weight in the past year, increasing to 48% among those aged 45 to 54.
- Thirty-six per cent reported increased feelings of anxiety or sadness/depression, climbing to 45% among females and 41% among 18- to 34-year-olds.

PLAN MEMBERS

DESCRIPTION OF PERSONAL HEALTH OVER THE PAST YEAR



POOR HEALTH MORE LIKELY WHEN:



SOURCE: The Benefits Canada Healthcare Survey, May 2021. BASE: All plan members (N=1,000)

PLAN MEMBERS

PLAN SPONSORS

NEGATIVE BEHAVIOUR CHANGES OR HEALTH-RELATED ISSUES EXPERIENCED IN THE PAST YEAR

	All plan members	Health-care environment/first responders	Plan sponsors
BEHAVIOUR CHANGES			
Decreased physical fitness	34%	31%	40%
Poorer eating habits	31%	42%	30%
Increased alcohol consumption	15%	19%	21%
Increased use of recreational drugs	7%	11%	6%
HEALTH-RELATED ISSUES			
Gained weight	41%	38%	42%
Increased feelings of anxiety or sadness/depression	36%	43%	37%
Increased trouble sleeping	29%	37%	39%
Increased physical pain or tension	22%	30%	27%
Poorer interpersonal relationships	21%	22%	25%
Poorer work-life balance	20%	24%	35%
Decreased ability to concentrate or focus on work	19%	27%	32%

SOURCE: 2021 Benefits Canada Healthcare Survey, May-June 2021. BASE: All plan members (N=1,000); All plan sponsors (N=524); Work in health-care/first responder (N=148)

★★★ KEY TAKEAWAYS

1. The proportion of plan members in poor health increased after years of no change, especially among those experiencing high levels of stress.
 2. Plan members reported weight gain, increased anxiety or sadness/depression and/or increased trouble sleeping – outcomes that can lead to or exacerbate chronic medical conditions.
 3. The increased consumption of alcohol is likely underreported, noted members of the 2021 *Benefits Canada Healthcare Survey* advisory board. What's particularly concerning is the risk of addiction to a substance that many plan members likely viewed as a temporary coping strategy.
 4. Plan sponsors appear not to be leading by example regarding work-life balance and vacation days. While this may have been unavoidable during the early months of the pandemic, the results suggest the need for managers to recalibrate their commitment to a healthy balance between work and personal lives.
 5. Employers on the advisory board reported a see-saw effect in vacation days, with deferrals in 2020 as employees bided their time and a sharp upswing in 2021 as the pandemic endured. Clear, constant communications are necessary to encourage the use of vacation days and clarify policy around deferrals (including a possible amendment to mitigate requests for payouts for unused days).
- Some plan members also reported increased trouble sleeping (29%), increased pain/tension (22%), poorer interpersonal relationships (21%), poorer work-life balance (20%) and decreased ability to concentrate or focus on work (19%).
 - Plan members who cannot work from home were more likely to report increased feelings of anxiety or sadness (41% versus 33% among those who can work at home), more trouble sleeping (36% versus 26%) and increased physical pain/tension (27% versus 19%).
 - Plan sponsor respondents were much more likely to report increased trouble sleeping (39%), a poorer work-life balance (35%) and a decreased ability to focus on work (32%).

How long do you think your team could go without having a drink?

If you wish the answer were *'I shouldn't have to know that'*, ALAViDA can help.

21% of employees will experience challenges with substance use, but only 1 in 10 will get help - when it becomes a crisis. ALAViDA is a modern approach for any level of Substance Use Disorder – alcohol and drugs. No awkward conversations, no shame and it's 100% confidential. With the help of medical doctors, technology and a therapeutic team that work together, your employees access on-demand care right from their smartphone.

Over 95% of employees being treated by ALAViDA continue to stay at work. Your team deserves proactive care. Support them with a pre-disability and return-to-work substance use program that well... works.

ALAViDA

Learn more at ALAViDA.co

Vaccination is top of mind

Plan members worry about working with people who are not vaccinated, so it's a good thing that almost all have been or plan to get vaccinated - or so they said at the time of the survey

WHO'S HAD IT?

- As of May 2021, 2% of plan members reported being diagnosed with COVID-19.
- Half of plan sponsors (50%) indicated that, to the best of their knowledge, at least one of their employees had tested positive.
- Seventy-two per cent of members were anxious that they or a family member would contract COVID-19; 35% were extremely (13%) or very (22%) anxious.
- Members with caregiving responsibilities were much more likely to be extremely/very anxious (44%) than those who are not caregivers (29%).

VIEWS ON VACCINATIONS

- When surveyed in May, 71% of plan members reported having received a COVID-19 vaccine. Sixty per cent got it as soon as they became eligible, while 11% were hesitant and said it took some time to make the decision to get vaccinated.
- An additional 19% of plan members stated they plan to get vaccinated as soon as they become eligible, resulting in nine in 10 plan members who are, or plan to be, vaccinated.
- Eight per cent have decided not to get the vaccination and 3% will not get it due to health or religious reasons.
- Thirty-eight per cent of members who currently work from home are concerned about interacting with people who are not vaccinated when they return to their workplace (ranking third out of nine possible concerns, [page 36](#)).
- Among plan members who are not working at home, working with people who are not vaccinated is their top concern (34%) about their workplace.
- Among plan sponsors that agreed (55%) there would be different health and wellness challenges post-pandemic, 65% cited anxiety among employees who are returning to the workplace due to not knowing who has been vaccinated (ranking second out of seven possible challenges, [page 38](#)).

PLAN MEMBERS

2%

Plan members diagnosed with COVID-19

SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: All plan members (N=1,000)



PLAN MEMBERS

POSITIONS ON GETTING VACCINATED AGAINST COVID-19

I got my vaccination as soon as I became eligible	60%
I plan to get vaccinated as soon as I become eligible	19%
I have been vaccinated, but I took time to make the decision	11%
I have decided not to get vaccinated	8%
I will not get vaccinated for health or religious reasons	3%

SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: All plan members (N=1,000)

★ ★ ★ KEY TAKEAWAYS

1. In May 2021, nine out of 10 plan members were committed to getting vaccinated against COVID-19. Actual results bode well: as of Sept. 18, 86% of Canadians aged 12 and older had received at least one dose, according to the Public Health Agency of Canada. Eighty per cent were fully vaccinated.
2. The advisory board predicted increased incentivization from public health and the private sector as Canada approaches – and possibly struggles to complete – the “last mile” in vaccination uptake. For example, travel insurance may take vaccination status into account.
3. Plan members' concerns about working with people who are not vaccinated reinforce the need for employers to develop and communicate plans to provide a safe work environment.
4. Onsite rapid testing could become an increasingly important part of workplace safety measures in light of the Delta variant's ability to cause breakthrough infections in fully vaccinated people.



Improving the health &
wellbeing of **1** in **5** Canadians

The reality of chronic disease

Almost three out of four plan members live with a chronic condition and/or chronic pain; on the plus side, for some the ability to work from home has reduced the impact on productivity

INCIDENCE OF CHRONIC DISEASE

- Sixty per cent of plan members reported having been diagnosed with at least one chronic condition; however, plan sponsors estimated that just 34% of their workforce has a chronic condition.
- The incidence of 60% among plan members is comparable to last year (58%) and previous years. It climbs to 79% among those in poor health and 76% among members who are 55 and older.
- The top conditions are mental-health issues (21%), high blood pressure (14%), high cholesterol (14%), arthritis (12%), asthma/lung disease (10%), eczema (8%) and diabetes (7%).

ADDING PAIN TO THE EQUATION

- Forty-five per cent of members reported chronic pain (i.e., pain that never really goes away, lasts for months or “flares up” from time to time), comparable to 48% in 2020.
- Chronic pain is more likely for plan members who have arthritis (82%), a mental-health condition (61%) or lung disease (60%). It is also more likely among those experiencing high levels of stress (59%).
- When combined with other chronic conditions, 72% of plan members have a chronic condition and/or chronic pain.

IMPACT ON PRODUCTIVITY

- Forty-seven per cent of plan members agreed that their chronic condition and/or chronic pain has caused them to miss work and/or made it harder to do their job, down from 58% in 2020. Age, job satisfaction and mental health influence those results (see chart).
- Sixty per cent of plan members with chronic pain reported that it has caused them to miss work and/or made it harder to do their job.
- The ability to work from home appears to make a difference: 77% of impacted members agreed that working from home has meant they missed less work due to their chronic condition and/or chronic pain. Thirty-four per cent said it definitely helped. The home environment is especially beneficial for those with arthritis (93%) or chronic pain (83%).
- Members with a mental-health issue are somewhat less likely (68%) to say working from home has meant they've missed less work due to their condition.

ANDREA FRANKEL SANOFI CANADA



“For many people with chronic conditions, the pandemic has exacerbated their conditions due to delayed treatments, reduced physical activity and increased anxiety, among other factors. The sick are getting sicker. The value of workplace supports, starting with a comprehensive benefits plan, has never been greater.”

PLAN MEMBERS PLAN SPONSORS

60%
Plan members who have been diagnosed with at least one chronic condition



34%
Plan sponsors' estimate of percentage of workforce with a chronic condition

SOURCE: 2021 Benefits Canada Healthcare Survey, May-June 2021. BASE: All plan members (N=1,000); All plan sponsors (N=524)

PLAN MEMBERS

72%
Plan members with a chronic condition and/or chronic pain



SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: All plan members (N=1,000)

MEGHAN VALLIS EQUITABLE LIFE

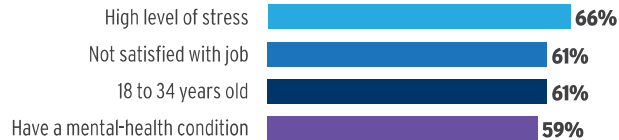


“It makes sense that employees can better manage their health conditions when they work from home. This finding reminds us that we can do better at the worksite so employees feel more comfortable and confident about being able to manage their health when at work. Convenience and privacy are important factors.”

PLAN MEMBERS

**47%**

Plan members with a chronic condition/pain who missed work and/or found it harder to do their job due to their condition and/or pain

MORE LIKELY WHEN:

SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: Plan members with a chronic condition and/or chronic pain (n=727)

PLAN MEMBERS

**77%**

Plan members with a chronic condition and/or chronic pain who agreed that working from home has meant less work missed due to their condition and/or pain

SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: Plan members with a chronic condition and/or chronic pain who work from home and have missed work due to their condition (n=98)

★★★ KEY TAKEAWAYS

1. The comforts of home are a boon for plan members with chronic conditions, who can better manage symptoms and are more productive as a result. Members of the advisory board pointed out that reduced feelings of stigma contribute to improved self-care.
2. However, the board cautioned against concluding that the home environment is better for everyone with a chronic condition since the isolation or limitations of a household may contribute to mental-health concerns.
3. The abrupt transition to working from home has seen more claims for back pain, due to poor ergonomics and mental-health conditions, noted insurers on the advisory board.
4. Year after year, plan sponsors underestimate the presence of chronic conditions and/or chronic pain in their workforce, suggesting the need for better information on their impact on productivity and profitability.



**MAKING IT EASIER FOR PEOPLE
TO LIVE THEIR HEALTHIEST LIVES**

greenshield.ca

@GSC_1957

Pandemic changes picture, somewhat

Top stressors have shifted to reflect new work environments, although finances remain at the forefront; and the younger the plan member, the higher the rate of mental-health issues

SHIFTS IN CAUSES OF STRESS

- Thirty-five per cent of plan members described their stress level for the past three months as high or extremely high, up slightly from 2020 (30%) and comparable to 2018 (33%).
- Members in poor health (61%) were more likely to report high or extremely high levels of stress, as were members who are not satisfied with their jobs (49%), who care for children (45%) or are aged 18 to 34 (42%).
- The main sources of stress are personal finances (36%), workload (34%), personal relationships (31%), health concerns including COVID-19 (31%) and work-life balance (30%).
- The top two reasons – personal finances and workload – are unchanged from results gathered in January 2020. However, rankings shifted in the areas of personal relationships, health-care concerns, work-life balance and interactions with people at work (see chart).
- The top-five rankings also differed for the 25% of members caring for children: work-life balance (42%) is at the top, followed by parenting (41%), personal finances (40%), personal relationships (39%) and workload (33%).
- Rankings also differed somewhat for plan members aged 18 to 34: personal finances (41%) ranked more solidly as a main source of stress, followed in quick succession by personal relationships (33%), work-life balance (32%) and workload (31%), leaving health concerns in fifth position (27%).

CLOSER LOOK AT MENTAL HEALTH

- Mental-health conditions are the top chronic condition reported by plan members (page 8), with 21% having had a diagnosis of depression, anxiety or another mental-health condition. This is unchanged from the 2020 results, collected before the pandemic (20%).
- Members working in health care (30%) or education (36%) reported much higher rates of diagnosis, as did females (26% compared to 15% of males).
- When considered by age, members aged 18 to 34 (26%) were more likely to report a mental-health condition (see chart).
- As noted on page 4, 36% of plan members reported increased feelings of anxiety or sadness/depression in the past year, climbing to 45% among females and 41% among 18- to 34-year-olds.

GORDON HART SELECTPATH BENEFITS & FINANCIAL/BENEFITS DIRECT



“Working from home may be a fantastic outcome of the pandemic for some, but not so much for younger employees.

Mental-health issues are a bigger concern because they are more likely to be living alone and in smaller quarters. We’ve also historically struggled to reach this group with traditional methods. We need to be innovative in how we can help this cohort navigate themselves out of this pandemic.”

PLAN MEMBERS



35%

Plan members who experienced high or extremely high levels of stress in past three months

MORE LIKELY WHEN:



SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: All plan members (N=1,000)

PLAN MEMBERS

TOP 5 MAIN SOURCES OF STRESS, 2021 VERSUS 2020

2021		Rank	2020	
Personal finances	36%	1	Personal finances	39%
Workload	34%	2	Workload	34%
Personal relationships	31%	3	Work-life balance	32%
Health concerns (personal or family)	31%	4	Interactions with people at work	27%
Work-life balance	30%	5	Personal relationships	23%

SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: All plan members (N=1,000)

ELLIOT STONE ALAVIDA



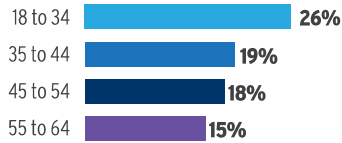
“Evidence-based mental-health training is vital to identify and eliminate stereotypes, especially surrounding substance use, which represents over 30 per cent of mental-health issues. Structural stigma is baked into the workplace and it prevents people from accessing the help they need pre-disability. If we learn to communicate with empathy and encouragement instead of judging and placing excessive burdens, the better the outcomes we will see.”

PLAN MEMBERS



21%
Plan members who have been diagnosed with a mental-health condition

BY AGE:



SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: All plan members (N=1,000)

★★★ KEY TAKEAWAYS

1. Plan members aged 18 to 34 are more likely to experience high levels of stress and be diagnosed with a mental-health condition.
2. Personal relationships have overtaken co-worker interactions as a main source of stress, reflecting the shift to home-based workspaces for many plan members (page 32).
3. Year after year, personal finances consistently rank at the top of the list for main sources of stress. This highlights the importance of a holistic approach to supporting mental health, including financial health (from debt repayment to retirement savings).
4. For information on what plan sponsors are doing to support mental health, see page 17.



<p>DRUG PLAN</p> <p>Save on your drug plan costs while supporting employees</p>	<p>SPECIALTY CARE</p> <p>Control the fastest growing part of your drug plan</p>	<p>MEDICAL CANNABIS</p> <p>Support the proper use of medical cannabis</p>	<p>HEALTH COACHING</p> <p>Help prevent and manage chronic conditions and overall wellbeing</p>	<p>MENTAL HEALTH</p> <p>Improve & sustain employee mental health with SilverCloud™</p>	<p>VIRTUAL CARE</p> <p>Access to non-urgent medical and healthcare needs</p>
--	--	--	---	---	---

High-value Drug Plan and Health Management solutions from a name Canadians trust
Better health outcomes are within reach

Visit morewaystobenefit.ca or e-mail saleshealthsolutions@shoppersdrugmart.ca

©/™ 911979 Alberta Ltd. Used under license. ©2021 Shoppers Drug Mart Inc.

Virtual care makes its mark

Workplace virtual-care offerings score high marks; however, many plan members delayed seeking treatment during the pandemic, especially among those in poor health

ACCESS VERSUS TREATMENT

- Forty-six per cent of plan members described the quality of Canada's health-care system as excellent or very good, consistent with 2020 (47%) and a continuation of a steady upward trend since the question was first asked in 1997 (36%).
- Fifty-one per cent also described their overall access to health-care services as excellent or very good, comparable to last year (49%) and significantly improved over results in 2009 (31%) when this question was first asked.
- However, 48% of members delayed seeking treatment or going to a health-care provider during the pandemic. Delayed treatment is more likely among the following groups: caregivers for ageing parents (64%), those with high stress levels (63%), members in poor health (58%).

DIGITAL TOOLS AND VIRTUAL CARE

- Forty-five per cent of plan members reported using a digital device or online app in the past 12 months to help with health or fitness goals, down from 53% in 2020, though still well ahead of the 32% first reported in 2015.
- The most popular tools were a personal fitness tracking device (22%), a free health or fitness app (19%) and a free app for meditation/mindfulness (11%).
- Since the start of the pandemic, 43% of members received care virtually (by phone or computer) from a health-care provider, increasing to 57% among those in poor health, 52% among those with caregiver responsibilities (for children and/or parents) and 51% among those with a chronic condition and/or chronic pain.
- The majority of members (76%) received virtual care from their usual family physician. One in four (27%) received it from another usual provider (i.e., pharmacist, physiotherapist, etc.) and 13% accessed it through their workplace health benefits plan. Availability through workplace benefits was highest for members who normally work in an office setting (20%) and lowest in an educational or daycare setting (6%).
- Plan members were most positive about the quality of care received from virtual care accessed through their benefits plan: 88% described it as excellent or very good, compared to 73% who said the same for virtual care from their usual family physician.

SUSAN BELMORE-VERMES HEALTH ASSOCIATION NOVA SCOTIA



"In 2020, everybody rallied, worked hard and did what had to be done. Now, people are done; they are exhausted. On top of that are the delays in surgeries, in blood work, in diagnosis and treatment. This is the 'shadow pandemic' and we all need to be very concerned about the mental-health issues that will come out of it."

PLAN MEMBERS



48%

Plan members who delayed seeking treatment or going to a health-care provider during the pandemic.

MORE LIKELY WHEN:



SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: All plan members (N=1,000)

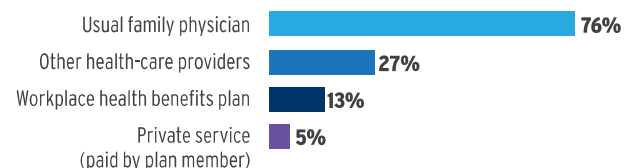
PLAN MEMBERS



43%

Plan members who received health-care services virtually since the start of the pandemic

VIRTUAL CARE PROVIDED BY:



SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: Plan members who used virtual health services (n=431)

JENNIFER CURZON IA FINANCIAL GROUP



“Our experience with virtual care reminds us that sometimes change may be more readily accepted when there is no choice. People may not realize what their preferences are until they try something new. That’s an interesting factor to keep in mind as we seek out ways to encourage plan members to be better consumers of health products and services.”

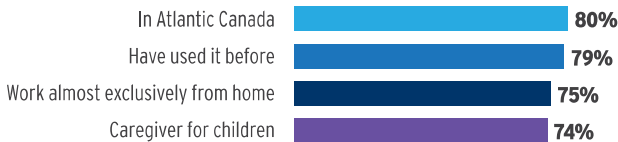
PLAN MEMBERS



68%

After the pandemic, plan members who would be willing to receive health-care services virtually

MORE LIKELY WHEN:

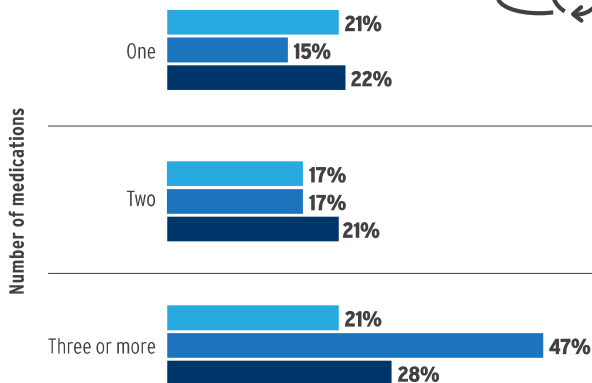


SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: Plan members who used virtual health services (n=431)

PLAN MEMBERS

USE OF MEDICATIONS ON A REGULAR BASIS

- All plan members
- In poor health
- With chronic condition and/or chronic pain



SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: All plan members (N=1,000)

- Members were more likely to use virtual care for help with a new illness or symptoms (53%) rather than for a chronic condition (33%). However, age is very much a factor: 70% of those aged 18 to 34 used it for a new illness, compared to 26% among those aged 55.
- Two out of three plan members (68%) indicated that, once the pandemic is over, they would be willing to receive health-care services virtually; 24% said they would be very willing. Willingness is consistent across all age groups and highest among Atlantic Canadians (80%), those who have already used virtual care (79%), those working almost exclusively from home (75%) and caregivers for children (74%).

VIRTUAL PHARMACY, NOT SO MUCH

- Sixty per cent of plan members use at least one medication on a regular basis, increasing to 79% among members in poor health and 71% among those with a chronic condition and/or chronic pain.
- Forty-seven per cent of members in poor health and 28% of those with a chronic condition and/or chronic pain take three or more medications.
- Within disease states, 69% of members with diabetes take three or more medications. Members with arthritis (53%), cardiovascular disease (46%) and cancer (43%) were also more likely to be taking three or more medications.

★★★ KEY TAKEAWAYS

1. The fact that half of plan members – and even more among those in poor health – delayed getting treatment during the pandemic can have serious repercussions. For example, members of the advisory board have started to see more new claims to treat cancer diagnosed at a later stage.
2. First responders and other essential workers are especially susceptible to sick days in 2021 due to delayed treatments as well as burnout, noted the advisory board.
3. Plan members appear ready to embrace virtual health-care services for non-emergency situations – particularly when available through their workplace benefits plan, which ranked highest in terms of quality assessments.
4. Members seem less willing to get their prescriptions from an online pharmacy; however, this could reflect the fact that pharmacies remained opened throughout the pandemic. As a result, members were not “forced” to use a virtual pharmacy in the same way that they were forced to access physicians virtually.

- When asked how they obtained their prescriptions during the last year, 89% of plan members most often picked them up in person from a local pharmacy. Eleven per cent ordered them from a local pharmacy and picked them up curbside or had them delivered at least once. Five per cent ordered from an online pharmacy and had their prescriptions delivered.
- Once the pandemic is over, 37% of members indicated they would be likely to order their prescriptions online and have them delivered. Age is a huge determining factor: 51% of 18- to 34-year-old members would likely do so, versus just 15% of 55- to 64-year-old members. Those with caregiving responsibilities (46%) and living in Quebec (45%) were also more likely.

JULIE GAUDRY RBC INSURANCE



“The population that could most benefit from virtual care – plan members with chronic conditions – indicate a greater willingness to use it. That’s a good news story and something to build upon as we navigate the ‘shadow pandemic’ that’s driven by backlogs in medical care.”

SHERRY HNATYSHYN CAREPATH



“About one in five employees aged 55 to 64 are caregivers for ageing parents. The demands on their time can be sudden and all-consuming and can negatively affect their own health and productivity. Employers that identify and understand this challenge can build support into their benefits programs and make a huge difference for these employees, who often hold senior positions.”

PLAN MEMBERS

37%

After the pandemic, plan members who would be likely to order prescriptions online and have them delivered



MORE LIKELY WHEN:



SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: All plan members (N=1,000)

WHEN EXPERTISE MATTERS

A benefit plan with
iA Financial Group
- for peace of mind



ia.ca



PLAN SPONSOR PROFILE: CANADA GOOSE

A purpose-driven response to pandemic



Kara MacKillop
Chief of staff and executive vice-president
CANADA GOOSE

“It was important for us to help fight COVID-19, while maintaining our work culture and employee engagement and morale despite uncertainty.”

As COVID-19 spread around the world in early 2020, Canada Goose took swift action, prioritizing health and safety by closing its stores, offices and factories and shifting to a digital workforce before it was mandated. Then Kara MacKillop, chief of staff and executive vice-president, turned her attention to the impact of those closures on the company's thousands of employees.

For example, it created an employee support fund “as soon as we realized many of our employees weren't going to get immediate access to government programs,” she says.

The company's chief executive officer, executive team and board of directors took salary reductions to kickstart funding for the initiative. As word got out, “other employees who were still working started voluntarily contributing parts of their salary to the fund to help support colleagues who were impacted,” says MacKillop.

After alleviating the financial pressures on employees who couldn't work remotely, the company focussed on what more could be done for employees' mental and physical well-being. Initiatives include 24/7 access to mental-health counselling services and the launch of two employee-led advisory councils: one on inclusiveness, one on wellness. These councils “amplify employee voices and increase opportunities for authentic connection,” says MacKillop.

Canada Goose offered employees paid leave to get vaccinated and ran a vaccination clinic to improve access to employees who remained at or eventually returned to the workplace. The company also added virtual care to its health benefits plan.

“It was important for us to help fight COVID-19, while maintaining our work culture and employee engagement and morale despite uncertainty,” MacKillop says.

Critical to her team's efficient response to an unprecedented, evolving situation was a set of guiding principles to unite all facets of the business. Its HUMANATURE purpose platform revolves around the promise to “keep the planet cold and the people on it warm.”

Work on this platform had begun before the pandemic and the project took on greater meaning with each passing month during the public health crisis. Even before its release in November 2020, the platform's values were shaping Canada Goose's internal and external efforts.

“Quick, decisive action was important,” says MacKillop, recalling the moment it became clear that the company needed to look outward and act to help its communities. “We immediately reached out to the necessary levels of government to express our desire to help and our ability to retrofit our factories to produce medical supplies. In tandem, without a government contract in place, we began manufacturing personal protective equipment.”

Through the Canada Goose Response Program, equipment that once made the company's signature coats started churning out thousands of gowns and scrubs for donation. After federal government support came through, the organization manufactured a total of 2.5 million units of PPE, delivered at cost. The program also provided meaningful jobs for 900 employees who chose to participate and who would otherwise have been off work.

“Beyond it being the right thing to do, the Canada Goose Response Program was and has been a huge source of pride for our teams around the world,” says MacKillop. “We're proud to have united our team for good in hard times.”

Mental health tops priorities

Plan sponsors are focused squarely on doing more to support mental health, although the commitment to mental-health training programs appears to have plateaued

PANDEMIC BOOSTED POSITIVE OPINIONS

- Two-thirds of plan members (67%) agreed that their opinion of their organization has improved due to its actions during the pandemic.
- Members were more likely to agree if their workplace culture promoted health and wellness (77%) and if they were working almost exclusively from home (73%). On the other hand, agreement was much lower among those who worked in an educational or daycare setting (48%) and somewhat lower in a health-care environment (61%).

WELLNESS CULTURE WIELDS INFLUENCE

- Seventy-six per cent of plan members agreed that the overall culture or environment of their workplace encourages health and wellness, unchanged from the past two years (77% in 2020 and 2019). Year after year, a wellness culture appears to influence results in other areas, including personal health and job satisfaction (see chart).
- Members working in smaller organizations (less than 50 employees) were more likely to indicate they have a workplace wellness culture (87%).
- Plan sponsors (90%) were more likely to agree their culture encourages health and wellness, consistent across all sizes of organization. This trend is consistent with previous years (88% in 2020 and 85% in 2019).
- Plan sponsors with a wellness culture are more likely to invest in wellness areas outside of the health benefits plan, such as emotional/mental health (52% versus 38% among employers without a wellness culture) and physical fitness (29% versus 15%).
- Fifty-nine per cent of plan members agreed that their employer really cares about their health and well-being, unchanged from 2009 (59%) and increasing to 71% among those with a wellness culture.
- Eighty per cent of plan members are satisfied with their jobs, consistent with recent years. Satisfaction is highest among those who agreed their employer really cares about their health and well-being (92%), whose opinions of their organization improved in light of the pandemic (90%) and among those with a wellness culture (89%).

ALLISON GORDON TELADOC HEALTH



“Organizations that have invested in a wellness culture fared much better during the pandemic. It’s no surprise we’re seeing employers become smarter shoppers for wellness tools and resources, in part due to digital solutions that reduce costs and appeal to employees and their families for accessibility and ease of use.”

PLAN MEMBERS



67%

Plan members whose opinion of their organization improved due to its actions during the pandemic

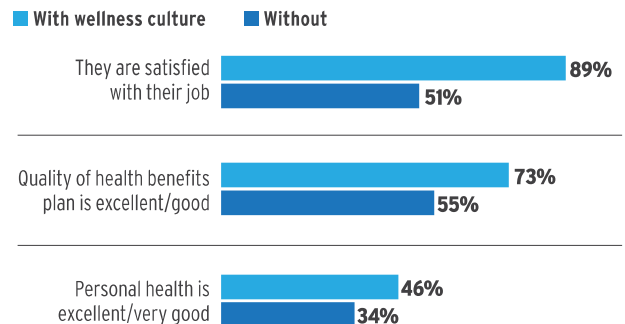
MORE LIKELY WHEN:



SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: All plan members (N=1,000)

PLAN MEMBERS

HOW A WELLNESS CULTURE INFLUENCES PLAN MEMBERS' PERCEPTIONS THAT:



SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: All plan members (N=1,000)

PLAN SPONSORS



67%
Plan sponsors that plan to invest in wellness areas outside of the health benefits plan in next three years

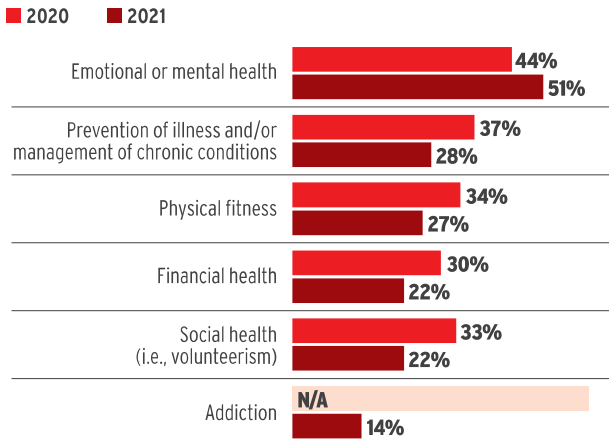
HIGHS • LOWS

84%	500 or more employees	Fewer than 50 employees	45%
81%	With flex plan	With traditional plan	63%
78%	Unionized workforce	No union	61%
72%	In public sector	In private sector	65%

SOURCE: 2021 Benefits Canada Healthcare Survey, May-June 2021. BASE: All plan sponsors (N=524)

PLAN SPONSORS

WELLNESS AREAS OF INVESTMENT, 2021 VERSUS 2020



SOURCE: 2021 Benefits Canada Healthcare Survey, May-June 2021. BASE: All plan sponsors (N=524)

PLAN SPONSORS



48%
Plan sponsors with mental-health training programs for managers and/or staff

SOURCE: 2021 Benefits Canada Healthcare Survey, May-June 2021. BASE: All plan sponsors (N=524)

BARBARA MARTINEZ CANADA LIFE



“Plan sponsors help employees manage stress, but the majority don’t have training programs to help leaders recognize the signs of mental-health issues in the workforce. So if employees don’t come forward, they’re less likely to benefit from the help available. That’s a big disconnect. As insurers, we can do more to promote the management training programs that we provide and at no cost.”

WHAT’S PLANNED FOR WELLNESS

- In the next three years, 67% of plan sponsors reported they anticipate investing money and/or staff resources in wellness areas outside of the health benefits plan, down somewhat from 75% in 2020 and 71% in 2019.
- Several factors appear to influence plans for wellness investments, including the size of the organization (see chart).
- In 2021, plan sponsors’ focus for future wellness investments is in the area of emotional or mental health (51%) by far. While this has always been the No. 1 priority, investments in this and other areas, such as physical fitness and chronic disease management, were more evenly distributed in previous years (see chart).
- The financial impact of the pandemic does not appear to be a factor in future wellness investments: 67% of plan sponsors that experienced a negative impact still expect to invest in wellness areas, comparable to 73% among those that saw a positive financial impact.
- For the first time, the survey asked plan sponsors if they anticipated investing resources to help members with addiction. Fourteen per cent said they would, increasing to 23% among those with a unionized workforce and 23% in organizations with more than 500 employees.

MORE ON MENTAL HEALTH

- Seventy-four per cent of plan sponsors indicated they effectively help employees manage stress, unchanged from 2020 (74%) and up significantly from 58% in 2011, when the question was first asked. This increased to 82% among plan sponsors with a flex plan (versus 71% among those with a traditional plan).
- About half (48%) of plan sponsors have a training program for managers (40%) or employees (34%) to help them recognize and respond to signs of depression or other mental-health concerns, comparable to the past two years (51% in both 2020 and 2019).
- Mental-health training was more likely among the following plan sponsors: with a flex plan (61%), with more than 500 employees (71% versus just 19% among those with fewer than 50 employees), with a unionized workforce (70%) and in the public sector (66%).
- One in five (19%) plan sponsors recently increased their maximum coverage level for mental-health counselling services, unchanged from 2020 (18%). Those with 500 or more employees (30%) were more likely to have done so, as were those for whom the pandemic had a positive financial impact (28%) and those with unionized workforces (27%).
- Eighteen per cent of plan sponsors said they plan to increase their maximum, down from 25% in 2020.
- The current median maximum coverage level for mental-health counselling is \$750. Twenty-one per cent of plan sponsors have a maximum between \$1,001 and \$5,000 and 7% have a maximum greater than \$5,000.

★★★ KEY TAKEAWAYS

1. Plan members' improved opinions of their employers reflect the value of a wellness culture that effectively communicates "we care about your health."
2. Strong leadership is the single most important factor for a wellness culture, stressed employers on the advisory board.
3. While most plan sponsors feel they effectively help employees manage stress, less than half provide mental-health training programs to help managers recognize and respond to signs of mental-health issues.
4. Insurers on the advisory board confirmed that more employers are decoupling mental health from other paramedical benefits to enable a separate maximum for coverage. As well, an expanded list of eligible providers to include, for example, social workers, has increased uptake of mental health-related services.
5. While better mental-health supports were already on the radar for many plan sponsors, the pandemic galvanized more decisive, strategic actions, observed the board.

LAURA HEWITT SUN LIFE

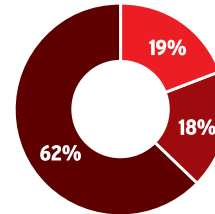


"We're seeing increases in the drug spend for mental health but we aren't seeing the same increasing trend for mental health paramedicals. Plan maximums for psychologist support don't go very far, so plan members start with medications. Optimal treatment needs a better balance between drug and paramedical coverage to ensure plan members can access the care they need."

PLAN SPONSORS

RECENTLY INCREASED THEIR COVERAGE MAXIMUM FOR MENTAL-HEALTH COUNSELLING

- Yes
- No put plan to
- No



SOURCE: 2021 Benefits Canada Healthcare Survey, May-June 2021.
BASE: All plan sponsors (N=524)

\$750
Median coverage level for mental-health counselling



We're here because we want to help our customers succeed. It's as simple as that.

Lean on us for innovative tools and services that make access to health care easy. We're delivering flexible and convenient solutions that keep the well-being of your employees top of mind.

Experience the Benefits of People.



peoplecorporation.com

PLAN SPONSOR PROFILE: FRASER HEALTH AUTHORITY

Early intervention mitigates disability costs



Leslie Allan-Reed
Director of absence and disability management
FRASER HEALTH AUTHORITY

“We inform employees about personal sick use, educate them on the importance of their sick days as short-term disability coverage and offer supports to improve overall health and well-being.”

Fraser Health Authority’s new approach to absence and disability management has dramatically improved return-to-work and long-term disability numbers.

Annual LTD claims per 100 covered lives decreased from 7.57 in January 2018 to 7.08 in January 2021. During the same timeframe, new LTD claims per 100 covered lives declined from 2.32 to 1.84. These decreases resulted in the prevention of an estimated \$3.7 million in LTD direct costs to the health authority.

Another key performance metric is return to work prior to 150 days (i.e., before LTD). “At baseline in January 2018, 54 per cent of employees returned to work before LTD was required. That has slowly improved with our new approach and has consistently been above 70 per cent since January 2020,” says Leslie Allan-Reed, director of absence and disability management at Fraser Health.

Three major changes made these results possible. First, the team shifted to dedicate specific disability management employees to different stages of the disability process. Second, it added an employer-paid direct referral process that quickly connects employees to early intervention services.

Last, but not least, attendance ‘management’ was transformed into attendance ‘support.’ “We inform employees about personal sick use, educate them on the importance of their sick days as short-term disability coverage and offer supports to improve overall health and well-being,” says Allan-Reed.

“Historically, disability management was viewed as secondary prevention. We were the ‘after you get hurt or sick’ people. Moving upstream to also focus on individuals struggling at work with attendance challenges, but not yet off work, provided an opportunity to offer support at an earlier stage of disability, potentially changing their overall disability trajectory. That is exciting for us.”

With a successful foundation in place, the team is working to expand direct referral and virtual services. “Virtual health care has expanded in a way we never anticipated

had there not been a pandemic,” says Allan-Reed. “The additional strain of the pandemic on health-care workers functioning in a 24/7 operation has expedited the need for mental-health resources to be available anytime, anywhere. Virtual services provide this access.”

Shortly before COVID-19, Fraser Health began offering a confidential, internet-based cognitive behavioural therapy program. An evaluation showed participants experienced statistically significant improvements in anxiety and functional scores related to daily activities, finances and relationships. More than 80 per cent reported they would recommend the program to others.

Fraser Health also recently participated in a federally funded research study focused on early intervention for substance use. Seventy-nine per cent of participants reported increased control over their substance use and 86 per cent reported reduced consumption. These results prompted the implementation of a contract with the provider to continue employee access to the program and support positive changes to mitigate the potential for substance misuse.

The impact of COVID-19 on health care has been significant. Fraser Health has experienced a 30 per cent increase in overall disability cases and a 40 per cent increase in cases where the primary diagnosis is associated with mental health. Despite the increasing volume of claims, the redesigned disability management system continues to succeed, maintaining return-to-work results pre-LTD and positively impacting LTD claim rates.

While supporting employees with disability through early intervention mitigates the disability burden on an organization and enables sustainment of comprehensive benefits plans, Allan-Reed emphasizes that “our true goal is to reduce the impact of disability on the individual. Supporting a timely recovery back to normal function mitigates the personal financial impact of disability and reduces the potential to develop secondary issues.”

Benefits stay the course

Plan members remain generally happy about their health benefits plans and more plan sponsors appear to be getting claims data analyses to help with decision-making

GENERALLY HAPPY, WITH EXCEPTIONS

- Almost half of plan members (47%) described the quality of their health benefits plan as excellent (13%) or very good (34%), unchanged from 2020. In comparison, in 2006 when the question was first asked, the result was 59%.
- Ten per cent described the quality of their plan as poor, up from 7% in 2020 and 4% in 2006.
- Asked in a slightly different way, with the option of a more neutral mid-point response (i.e., “adequate”), the results are as follows: 22% described their plan as excellent, 46% as good, 26% as adequate (neither good nor poor) and 5% as poor/very poor. These results are unchanged from 2020. Health status, a wellness culture and job satisfaction appear to influence results (see chart).
- Regionally, members in Atlantic Canada (84%) were most likely to describe the quality as excellent or good, versus a low of 62% in Manitoba and Saskatchewan.
- Plan sponsors are somewhat more positive than plan members, but less so than in 2020: 74% described the quality of their health benefits plan as excellent (22%) or good (52%), down from 80% in January 2020.
- Employers with more than 500 employees were more likely to describe their plan as excellent/good (79% versus 65% with less than 50 employees), as were those with a wellness culture (76% versus 50%).
- Fifty-seven per cent of members stated their benefits plan meets their needs extremely or very well, unchanged from 2020 and consistent with results since 2012. In 1999, when this question was first asked, the result was 73%.
- Ten per cent said their plan does not meet their needs. Personal health, workplace setting and job satisfaction are among the factors that influence results (see chart).

CLEARER SENSE OF PURPOSE

- Plan sponsors’ understanding about the main purpose of their health benefits plan appears to have become more clear-cut. When first asked in 2014 to choose out of a possible list of nine options, the broad concept of “peace of mind for employees” was most cited as the reason for offering a plan (67%). In 2021, the more sharply defined response “to provide coverage so that employees are not placed under undue financial burden” ranked first (60%) while peace of mind slipped to fourth position (51%).

HEIDI WORTHINGTON PACIFIC BLUE CROSS



“The pandemic has put a spotlight on health benefits in that people appreciate them more – not just the employees, but also the executive teams. Plan sponsors are taking time to evaluate the effectiveness of their plans based on benefits usage and shifts in care delivery models.”

PLAN MEMBERS

68%

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



HIGHS + LOWS

84%	Atlantic Canada	Manitoba and Saskatchewan	62%
76%	Personal health excellent/very good	Personal health poor	54%
73%	Workplace wellness culture	No workplace wellness culture	55%
72%	Satisfied with job	Not satisfied with job	54%

SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: All plan members (N=1,000)

PLAN MEMBERS

10%

Plan members who said their health benefits plan does not meet their needs



HIGHS + LOWS

24%	Not satisfied with job	Satisfied with job	6%
21%	Personal health poor	Personal health excellent/very good	5%
18%	No workplace wellness culture	Workplace wellness culture	7%
17%	Education/daycare setting	Office setting	6%
15%	Quebec	Atlantic Canada	5%
14%	Unionized workforce	No union	8%

SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: All plan members (N=1,000)

PLAN SPONSORS

TOP 5 MAIN REASONS FOR OFFERING A HEALTH BENEFITS PLAN, 2021 VERSUS 2014

2021	Rank	2014
So employees are not placed under undue financial burden	60%	1 To provide peace of mind to employees 67%
To attract and retain employees	57%	2 To attract and retain employees 57%
To keep employees healthy and productive	56%	3 To keep employees healthy and productive 52%
To provide peace of mind to employees	51%	4 So employees are not placed under undue financial burden 50%
To provide coverage for routine medical needs	41%	5 To reduce absenteeism and disability claims 45%

SOURCE: 2021 Benefits Canada Healthcare Survey, May-June 2021. BASE: All plan sponsors (2021 N=524; 2014 N=500)

ERIK LAROSE DESJARDINS INSURANCE



“Benefits programs appear to be shifting from offering commodities to helping ensure that overall health needs are covered. That includes more convenient access, with options like virtual care and navigating the health system. It’s falling more on private entities to fill these voids until public systems catch up – otherwise, we’ll be hit hard in long-term disability.”

PLAN SPONSORS

RECEIVE CLAIMS DATA ANALYSES THAT IDENTIFY THE MAIN DISEASE STATES IN THEIR WORKFORCE



SOURCE: 2021 Benefits Canada Healthcare Survey, May-June 2021. BASE: All plan sponsors (N=524; 2018 N=502)

SHANNON DARVILL PEOPLE CORPORATION



“The upward trend in reporting on disease states is encouraging. Top advisors are meeting with clients more often with a continued focus on also having quality discussions. Digging deeper into claiming patterns for disability, paramedical and drugs to understand trends while ensuring access to mental health-care resources creates a more holistic approach to benefits programs and disease management.”

- The second- and third-ranked reasons are unchanged: to attract and retain employees (57% in 2021, 57% in 2014) and to keep employees healthy and productive (56% in 2021, 52% in 2014).

MORE NUMBER CRUNCHING

- More plan sponsors indicated receiving claims data analyses from their insurance provider or benefits consultant/advisor that identify the main disease states in their workforce: 74%, up from 69% in 2020 and a significant improvement over 58% in 2018, when this question was first asked.
- Employers with 500 or more employees were much more likely to get this information (89% compared to 54% among those with less than 50 employees).
- One in three (31%) plan sponsors received these analyses regularly, up from 22% in 2020 and 19% in 2018.
- Among the 26% of plan sponsors that did not receive this type of reporting, almost half (46%) would like to.
- Consistent with previous years, plan sponsors that receive this reporting were more likely to describe the quality of their health benefits plan as excellent or good (80% versus 56% among those without this reporting) or to invest funding or other resources in wellness areas in the next three years (76% versus 41%).

★★★ **KEY TAKEAWAYS**

1. Most plan members are positive about their health benefits plan, a perception that did not waver during the pandemic.
2. However, plan members in poor health remained much more likely to state their plan does not meet their needs.
3. As part of efforts to protect the health and safety of employees during the pandemic, plan sponsors were more proactive and/or receptive regarding discussions and updates about their health benefits plan, noted insurers and advisors on the advisory board.
4. The fact that more plan sponsors are receiving claims analyses to identify top disease states is a positive sign and again reflects increased engagement.
5. Bite-size, actionable information is essential for decision-making. Plan sponsors should seek out advisors for whom claims data analyses is standard practice, stressed the board.

PLAN SPONSOR PROFILE: FIRST NATIONS HEALTH AUTHORITY

Benefits built on cultural safety and humility



The First Nations Health Authority and Pacific Blue Cross are partners on a journey to improve access to culturally safe health benefits for First Nations people in British Columbia.

The FNHA is the first and only provincial First Nations health authority in Canada, guided by the First Nations Perspective on Health and Wellness and grounded in the principles of cultural safety and humility. Its journey to transform health benefits started in 2011, when First Nations leaders signed an agreement with federal and provincial partners that paved the way to transfer responsibility for First Nations health programming in B.C. from the federal government to the FNHA.

“The FNHA is accountable to First Nations in B.C. for the delivery of health benefits, based on a shared vision for healthy, self-determining and vibrant B.C. First Nations children, families and communities,” says Richard Jock, chief executive officer of the FNHA.

In 2017, the federal government’s non-insured health benefits program (NIHB) began a phased transfer of administrative responsibilities to the FNHA. The prescription drug plan moved over first, followed by dental, vision and medical supplies and equipment benefits. In 2018, with the objective of improving access to programs

and services under the extended health benefits plan, the FNHA conducted focus groups in 98 First Nations communities.

Participants shared their experiences with slow pre-approval and claims processes, discrimination based on Indian Status and being refused services altogether. “Some dentists won’t see clients because of the amount of paperwork and because they won’t get the rate they normally charge,” said one participant. People also shared painful memories of racism and trauma endured in residential schools and the B.C. health-care system, which made them fearful of seeking treatment that was not culturally safe.

In 2019, through a competitive bid process, the FNHA selected PBC to administer the new health benefits plan. PBC signed a declaration of commitment to cultural safety and humility as part of a traditional ceremony to recognize the partnership. “We were not simply looking for a benefits administrator, but a partner who shared our perspective,” says John Mah, the FNHA’s vice-president of health benefits and services. Since the signing, all PBC employees are required to complete four eLearning modules on diversity, bias, gender and Indigenous awareness, and more than 40%, including call center staff, have completed San’yas Indigenous cultural safety training.

The new benefits plan, launched in September 2019, eliminated pre-approvals for many services, including standard prescription eyewear, and expanded coverage for fillings, dentures, hearing aids, eye exams and eyewear. It also aligned dental reimbursement rates with PBC’s dental fee guide, increasing coverage for preventive services. Importantly, FNHA clients can now submit claims for most services online or using a mobile phone and no longer have to show their Indian Status card to make a claim.

To date, 147,000 First Nations members from more than 200 communities across B.C. have joined the plan, representing nearly 1.5 million claims annually for dental, vision and medical supplies. With more than 80 per cent of claims submitted electronically by health-care providers, most members can access services without paying out of pocket and waiting for reimbursement. Also, to support continuous quality improvement, the FNHA provides a confidential phone line for members to give feedback or report incidents of racism or discrimination within the BC healthcare system without fear of retribution or impact on quality of care.



Portable
Benefits go
where your
members go

Help your members prepare for life's what-if moments with optional coverage that goes with them if they leave your group plan.

- Portable life
- Portable critical illness
- Portable accidental death and dismemberment (AD&D)

It includes no administrative work or cost for you.

Learn more canlife.co/portben

More ups than downs

The pandemic galvanized the addition of virtual-care services to workplace benefits plans and almost half of plan sponsors reported lower than expected benefits costs due to the pandemic

SNAPSHOT OF PLAN DESIGN

- Three-quarters (78%) of surveyed plan sponsors provide a traditional benefits plan; the remaining 22% provide a flexible plan that allows employees to choose levels of coverage.
- Sixty-two per cent of this year's plan sponsors offer an employee assistance program (EAP), 39% provide a health-care spending account and 19% provide a wellness spending account.
- For the first time, the survey asked plan sponsors if they offer financial health support programs, such as debt repayment and savings vehicles such as a tax-free savings account: 19% said they do.

VIRTUAL CARE STAKES ITS CLAIM

- Forty-one per cent of plan sponsors reported offering virtual health-care services through their health benefits plan. Plan design and size were among the factors influencing these results (see chart).
- Within this group, 33% indicated paying extra to add virtual care to their plan, leaving 67% that stated it was a part of their standard plan at no extra cost.
- Three out of four (74%) plan sponsors were satisfied with the virtual services available through their plan, including 32% that were very satisfied. However, 21% were unsure (see page 12 for plan members' views on and utilization of virtual care).

BENEFITS WHEN LAID OFF

- Twenty per cent of plan members reported being laid off temporarily (17%) or permanently (3%) as a direct result of the pandemic. The results were highest in the retail setting (37%) and among 18- to 34-year-olds (27%).
- Seventy-five per cent of those temporarily and 39% of those permanently laid off could still get coverage from their workplace health benefits plan (for a limited period of time, in the latter case).

UTILIZATION DURING PANDEMIC

- Among plan sponsors with an EAP, 40% reported increased utilization in the last year versus just 7% that reported a decrease, for a net number of 33% that reported an increase.
- After the EAP, the highest net increases occurred for

PLAN SPONSORS

HEALTH BENEFITS PLANS WITH THE FOLLOWING COMPONENTS:



62%

Employee assistance program



41%

Virtual health-care service



39%

Health-care spending account



19%

Financial support programs



19%

Wellness spending account

SOURCE: 2021 Benefits Canada Healthcare Survey, May-June 2021. BASE: All plan sponsors (N=524)

PLAN SPONSORS

41%

Plan sponsors that offer virtual health-care services through their health benefits plan



HIGHS • LOWS

51%	Flex plan	Traditional plan	39%
48%	50 to 499 employees	Fewer than 50 employees	35%
46%	Receive analyses on top disease states	Do not receive analyses	28%
43%	Workplace wellness culture	No wellness culture	30%

SOURCE: 2021 Benefits Canada Healthcare Survey, May-June 2021. BASE: All plan sponsors (N=524)

RACHEL NCNEILL-THOMPSON SUN LIFE



“We knew Canadians were struggling with their mental health before the pandemic and COVID-19 has amplified the crisis. Plan sponsors want to know what they need to do differently to address rising disability claims and create mentally healthy workplaces. This requires long-term commitment. The good news is there are resources available right now to develop strategies and offer solutions.”

PLAN SPONSORS

NET NUMBER REPORTING INCREASED OR DECREASED UTILIZATION OF BENEFITS OVER LAST YEAR

Employee assistance program	+33%
Services from mental health-care providers	+31%
Prescription drugs	+31%
Wellness or personal spending accounts	+26%
Financial support programs	+17%
Health-care spending accounts	+16%
Services from physical health-care providers other than doctors (i.e., physiotherapists)	+7%
Vision care	+5%
Dental services	-2%

SOURCE: The 2021 Benefits Canada Healthcare Survey, May-June 2021. BASE: Plan sponsors providing coverage of benefit (EAP n=416; mental health n=486, prescription drugs n=506; wellness accounts n=275; financial support n=262; health-care spending accounts n=321; paramedicals n=499; vision n=461; dental n=504)

PLAN SPONSORS

47%

Plan sponsors that experienced lower than expected health benefits costs due to the impacts of the pandemic



HIGHS • LOWS

62% Administrative services only plan	Insured plan	40%
58% Public sector	Private sector	43%
63% Unionized workforce	No union	40%
60% 500 or more employees	Fewer than 50 employees	30%

SOURCE: The 2021 Benefits Canada Healthcare Survey, May-June 2021. BASE: All plan sponsors (N=524)

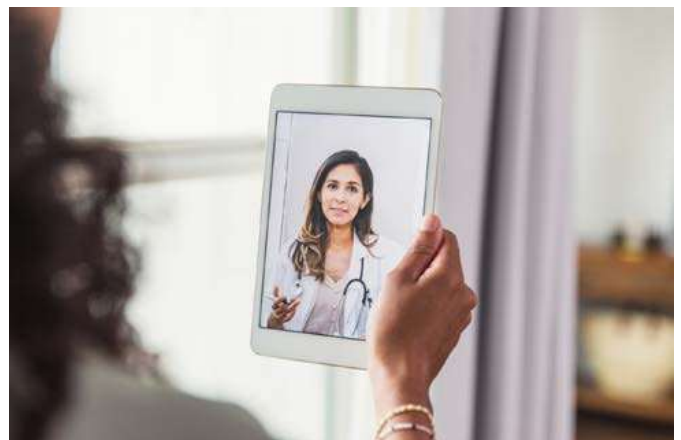
- mental-health services (31%), prescription drugs (31%) and wellness or personal spending accounts (26%).
- Only one benefit, dental services, saw a net negative result of 2% (comprised of 22% of plan sponsors that reported an increase and 24% that reported a decrease).

NEW INVESTMENTS FROM REDUCED COSTS

- Forty-seven per cent of plan sponsors indicated lower than expected health benefits costs in the past year due to the impacts of the pandemic. The public sector and a unionized workforce were among the factors influencing these results (see chart).
- Thirteen per cent reported higher than expected benefits costs.
- Among those that experienced lower than expected costs, 47% took this as an opportunity to invest in other health benefits such as a virtual care program (19%), an EAP (14%) and/or in other ways (25%). Those for whom the financial impact of the pandemic was positive (68%) were far more likely to invest than those who were negatively impacted (34%).

KEY TAKEAWAYS

- Virtual care, a rare offering before the pandemic, has leaptfrogged on to benefits plans. The advisory board predicted its availability will rival that of EAPs in the next few years.
- Flexibility may be the watchword for plan design in 2021 and beyond, given the uncertainties and possible limitations exposed by the pandemic, as well as changes in utilization and needs among plan members.
- Benefits advisors on the board reported an accelerated implementation of flex plans and spending accounts so far in 2021.



Differences of opinion

More coverage for major dental services continues to top plan members' wish list; when it comes to new benefits, members mainly want to get back into shape

BIG PICTURE PREFERENCES

- Eight-five per cent of plan members would like more coverage, based on their personal needs, for one of seven listed benefits if they could get it. Topping the wish list was increased coverage for major dental services (21%). This was also No. 1 in 2020 (22%) and 2017 (25%), though direct comparisons between the numbers can't be made due to the growing list of options since the question was first asked.
- Increased coverage for paramedical services (16%) and vision care (16%) tied for second place.
- Last year's survey separated out mental-health services from the paramedical bucket and it ranked fourth this year (11% versus 9% in 2020), followed closely by basic dental services (10%).
- The rankings change when comparisons are made between the youngest and oldest members, with mental-health services and vision care shifting the most (see chart).
- Fifteen per cent of members indicated their current levels of coverage are enough to meet their personal needs, ranging from a low of 9% among 18- to 34-year-olds to a high of 23% among 55- to 64-year-olds.

GAPS BETWEEN MEMBERS AND SPONSORS

- When presented with 16 possible new benefits offerings, some of which would be covered by health-care spending or wellness accounts, plan members and plan sponsors are less aligned than they were a year ago.
- In early 2020, before the pandemic, immunizations against infectious diseases were the most popular pick for both members (in terms of use if added to their benefits plan) and sponsors (in terms of their interest in covering). This year, immunizations ranked fifth and second, respectively.
- Members were all about fitness in 2021: fitness classes (30%) ranked first, a personal fitness trainer (29%) ranked second and a fitness tracking device (25%) ranked fourth. 24-hour virtual care (26%) and immunizations (25%) rounded out their top-five list.
- Plan sponsors, on the other hand, were most interested in 24-hour virtual care (31%) followed by immunizations (23%) and health risk screenings with health-care professionals (23%). Fitness classes (19%) ranked fourth, while coverage for a fitness tracking device (13%) was ninth and a personal trainer (11%) did not even make their top 10.
- New to the list is health-care system navigation (i.e., help to coordinate treatment of a serious condition such as cancer):

MICHAEL BRADIE GREEN SHIELD CANADA



“When planning for the future it’s good to keep in mind the different perspectives of plan sponsors and plan members. For example, we see it here in attitudes about where to invest additional benefit dollars. It will be really important to get this balance right – delivering the value and outcomes that plan sponsors are looking for while also ensuring those investments resonate with their members.”

PLAN MEMBERS

PREFERENCES FOR INCREASED COVERAGE OF A SINGLE BENEFIT, 18 TO 34 YEARS OLD VERSUS 55 TO 64 YEARS OLD

18 to 34 years old	Rank	55 to 64 years old
Major dental services	1	Major dental services
Mental-health services	2	Vision care
Vision care	3	Paramedical services
Paramedical services	4	Basic dental services
Basic dental services	5	Prescription drugs
Prescription drugs	6	Mental-health services
Virtual health-care services	7	Virtual health-care services

SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: Plan members 18-34 (n=296); 55-64 (n=187)

CHRISTINE KORCZAK BAYSHORE HEALTHCARE



“Health care has become more complicated, with delays in treatments and surgeries and people having to access services virtually. The demand for health-care navigators, also known as nurse case managers, is growing. Nurse case managers act as an ongoing resource from diagnosis through treatment and recovery, providing education and helping people navigate the health-care system.”

Expert navigation, elevated care.



"Our job is to empower members with the information they need to know, while providing constant guidance and support throughout their treatment."

CAREPATH NURSE CASE MANAGER

A leader in virtual care, Carepath is an innovative health care navigation service that provides comprehensive and personalized support to patients and their loved ones in the event of illness or other health crises. Available as a group benefit, Carepath has collaborated with employers for over 15 years to create enhanced benefits plans for over a million Canadians.

**For more information, connect with
our Carepath team at ckorczak@bayshore.ca**



it ranked fifth for plan sponsors (19%) and fell just short of making the top 10 list for plan members (15%). This jumped to 32% and a second-place ranking (after immunizations at 36%) among the small cohort of members who have been diagnosed with cancer.

- Services to help care for ageing parents are also new to the list: it ranked tenth for members overall (15%), surging to first position (41%) among members who were caring for parents.

★★★ KEY TAKEAWAYS

1. Over a period of five years, plan members consistently expressed a desire for increased coverage for major dental services.
2. Plan members' emphasis on physical fitness when it comes to possible new benefits reinforces the potential value of wellness or personal spending accounts for taxable, health-related items.
3. The advisory board predicted heightened interest in health-care system navigation as a new benefit, spurred in part by delays in diagnoses and treatments due to COVID-19.

PLAN MEMBERS | PLAN SPONSORS

TOP 10 PRODUCTS/SERVICES THAT:

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

Plan members		Rank	Plan sponsors	
Fitness classes	30%	1	24-hour virtual care	31%
Personal fitness trainer	29%	2	Immunizations for infectious diseases	23%
24-hour virtual care	26%	3	Health risk screenings with health-care professionals	23%
Fitness tracking device	25%	4	Fitness classes	19%
Immunizations for infectious diseases	25%	5	Health-care system navigation	19%
Health risk screenings with health-care professionals	24%	6	Health-care apps	18%
Genetic testing to determine risk for certain diseases	22%	7	Meditation apps	17%
Genetic testing to determine which drug works best for the individual	17%	8	For those with chronic diseases, one-on-one education with health-care expert	16%
Meditation apps	15%	9	Fitness tracking device	13%
Services to assist with care for ageing parents	15%	10	Genetic testing to determine which drug works best for the individual	13%

*Some of these items would have to be made available under health-care or wellness spending accounts. SOURCE: 2021 Benefits Canada Healthcare Survey, May-June 2021. BASE: All plan members (N=1000); all plan sponsors (N=524)



Employee health and wellbeing is our top priority

We help protect you and your employees

Our full suite of programs promote physical, emotional and financial health.

We care deeply about the plan member experience

We provide easy access to a range of state-of-the-art services.

We are here for you

Our dedicated Group Benefit Solutions team delivers one-on-one plan sponsor support.

Talk to your Group Benefits Advisor, call RBC Insurance® at 1-855-264-2174 or visit rbcinsurance.com/groupbenefits.



Insurance

® / ™ Trademark(s) of Royal Bank of Canada. Used under licence.

PLAN SPONSOR PROFILE: **CENOVUS-HUSKY**

Combining of companies opens door to re-imagining the benefits plan



Corinne Rozon
Manager of pension and benefits
CENOVUS

“Just because our plans are different doesn’t mean one’s wrong or right. In some cases, we didn’t choose one or the other. We collaborated on the best approach going forward.”

Corporate mergers are complex at the best of times – add a global pandemic and a market going through tough times and the need for careful planning and confident execution is even more critical. That was the situation for Cenovus Energy Inc. and Husky Energy in October 2020, when the two companies announced their decision to combine to create a new integrated oil and natural gas company.

The merger of their benefits plans was an important part of the process. Both companies had comprehensive, well-liked plans and Husky and Cenovus were quick to allay any initial concerns their combined workforce of about 5,000 employees may have.

“The biggest challenge is that there was so much to do all at once . . . but the benefits we provide were on employees’ minds. People want certainty and the sooner you can get to that certainty in a merger, the better,” says Corinne Rozon, manager of pension and benefits at Cenovus. “We communicated fairly early on that the legacy plan enrolments would proceed as usual for the July 1, 2021 to June 30, 2022 benefit year and committed to updating employees on the go-forward programs in Q3 2021.”

The new plan is expected to launch in mid 2022. Rozon and Steve Sproule, the leader of Husky’s pension and benefits group at the time, knew they had to take the time to do it right. Before they could even begin to compare plans, Sproule says the team engaged in important foundational work, discussing philosophies, objectives and desired outcomes.

Broadly speaking, they agreed the new organization’s benefits plan would strengthen both companies’ commitment to environmental, social and governance performance by helping ensure that employees felt physically and psychologically safe at work. “The alignment of principles was critical. It set the stage,” Sproule says. “It was fortunate that both legacy teams came together with an open mind.

We had respect for one another.”

“We also reviewed our legacy plans in the context of what our peers were doing and best practice so that our plan was competitive,” Rozon adds.

A detailed chart was then used to compare benefits in the two plans. “Just because our plans are different doesn’t mean one’s wrong or right. In some cases, we didn’t choose one or the other. We collaborated on the best approach going forward,” says Sproule.

Cenovus’s legacy benefits plan offers a high level of flexibility, including flex dollars that allow members to customize their medical and dental coverage, enhance insurance, accumulate funds in a health-care spending account, buy critical illness insurance and – a highly popular option – purchase up to 80 hours of extra vacation time.

As well, in 2019 Cenovus significantly boosted coverage for mental-health services to an annual maximum of \$6,000 (from \$1,000) in its basic plan and \$10,000 (from \$1,200) in its enhanced plan.

In recent years, Husky had also prioritized mental health, which it considered closely tied to safety in the field. It expanded services for plan members with depression through its employee assistance program. It had also increased its coverage level for mental-health services, though not to the same degree as Cenovus.

“The go-forward plan will continue to prioritize mental health and have the elements of flexibility that employees already enjoy,” says Rozon.

Doing this work during a stressful period for the energy industry and a global pandemic was unquestionably difficult – but the key was to stay focused on the purpose of the plan, she emphasizes. “These programs are here to elevate our people and that’s where we make a difference. It’s about what’s best for them.”

One word: sustainability

Most plan sponsors worry about COVID-19's long-term cost impact on health benefits, especially on claims for mental-health issues

FINANCIAL IMPACT OF PANDEMIC

- Forty per cent of surveyed plan sponsors reported that the COVID-19 pandemic had a negative financial impact on their organizations. Those in manufacturing/skilled trades (49%), arts and "other" sectors (46%) and retail/services (43%) were the hardest hit.
- Almost the same number of sponsors (41%) said the impact was neutral and 18% reported a positive financial impact.

SUSTAINABILITY THE TOP CONCERN

- Two out of three (68%) plan sponsors reported having at least one major concern about their health benefits plan, down from 79% in 2020, with higher levels among large and public sector employers (see chart).
- Among those with concerns, the top five were the sustainability of the drug plan (39%), the overall sustainability of the health benefits plan (38%), levels of absence and disability (35%), the sustainability of the dental plan (29%) and the use of benefits for paramedical services (24%). These results are consistent with the top concerns in early 2020, before the pandemic (except for overall sustainability, which is new to this year's survey).
- For plan sponsors with unionized workforces (39%) and in the public sector (33%), the inability to make major changes due to labour agreements was among the top five concerns, ranking third and fourth, respectively.

BUMPY RIDE FOR RENEWALS

- Almost half (46%) of plan sponsors agreed the most recent renewal of their benefits plan was more difficult compared to before the pandemic.
- This result did not differ significantly between ASO (48%) and insured (46%) plans.
- Employers in the public sector (53%) were more likely than private sector employers (43%) to have had more difficulty, as were those with more than 500 employees (53% versus 36% among those with fewer than 50 employees).
- Employers in the retail/services sector (53%) were also somewhat more likely to have experienced more difficult renewals.

BILL PAPADIMITRIOU DESJARDINS INSURANCE



"Two years of backlogged surgeries in the system have extended long-term disability durations for people, which can in turn lead to more secondary diagnoses of depression and anxiety. This adds significant pressure on organizations at a time when their people are already stressed. The implications are also significant from an underwriting perspective. LTD management needs to be top of mind for all stakeholders."

PLAN SPONSORS

68%

Plan sponsors with major concerns about their health benefits plan



HIGHS • LOWS

85%	Unionized workforce	No union	63%
84%	500 or more employees	Fewer than 50 employees	54%
82%	Public sector	Private sector	66%
80%	Administrative services only plan	Insured plan	67%
77%	Negative financial impact due to COVID-19	Neutral or positive financial impact	66%

SOURCE: 2021 Benefits Canada Healthcare Survey, May-June 2021. BASE: All plan sponsors (N=524)

PLAN SPONSORS

MAJOR CONCERNS ABOUT THEIR HEALTH BENEFITS PLAN

1	Sustainability of the drug plan	39%
2	Overall sustainability of the health benefits plan	38%
3	Levels of absence and disability	35%
4	Sustainability of the dental plan	29%
5	Use of benefits for paramedical services	24%
6	Inability to make major changes due to collective bargaining agreements	20%
7	Lack of time for long-term strategy, opportunities, etc.	19%
8	Growing number of appeals or complaints	14%
9	Benefits fraud/misuse	14%

SOURCE: 2021 Benefits Canada Healthcare Survey, May-June 2021. BASE: Plan sponsors with major concerns about their health benefits plan (n=384)

PLAN SPONSORS

VIEWS ON WHERE COVID-19 WILL HAVE THE LARGEST IMPACT ON BENEFITS COSTS OVER THE NEXT FIVE YEARS

Claims for:

Mental-health issues among employees, excluding those who were sick with COVID-19	64%
Mental-health issues among employees' dependants	47%
Serious diseases or chronic conditions that may have worsened due to delayed diagnoses and/or treatments	43%
Chronic conditions that may have been caused or worsened due to pandemic-related factors (i.e., lack of exercise, increased alcohol consumption)	37%
All physical and mental-health issues for members who contracted COVID-19	25%

SOURCE: 2021 Benefits Canada Healthcare Survey, May-June 2021. BASE: Plan sponsors that feel COVID-19 will impact health benefits costs over next five years (n=406)

ALAINA MACKENZIE MEDAVIE BLUE CROSS



“Employers today are increasingly concerned about workforce planning. One of the impacts with disability management is to ensure that all the parties - employer, employee and disability manager - are around the table and understand their role and responsibility to effectively manage the program. Disability managers are well positioned to help employers influence effective return to work.”

★★★ **KEY TAKEAWAYS**

1. Concerns over sustainability is a recurring theme for plan sponsors, exacerbated by the majority opinion among plan sponsors that COVID-19 will have long-term negative impact on health benefits costs.
2. Long-term disability will be a growing concern and challenge on multiple levels, noted the advisory board. Delayed surgeries and other treatments have extended the duration of leaves and may trigger or exacerbate mental-health issues as a secondary diagnosis.
3. As a result, the evolution of disability program management is a growing priority, fuelled by improved data analysis, new approaches in case management and new tools such as virtual care and pharmacogenomic testing.

MORE ON COVID-19

- Seventy-one per cent of plan sponsors were concerned about the long-term impact of COVID-19 on the cost of their health benefits plan; 23% were very concerned.
- Similarly, 77% of sponsors indicated that the pandemic will have a large impact on costs for certain benefits over the next five years. This level of concern increases to 84% among those that receive claims data analyses on their top disease states, compared to 57% among those that do not get this type of reporting.
- Within this group, respondents felt the biggest impact would be in claims for mental-health issues among employees, excluding those who were sick with COVID-19 (64%). This is followed by mental-health issues among employees' dependants (47%) and claims for serious diseases and chronic conditions that may have worsened due to delayed diagnoses or treatments (43%). One-quarter (25%) felt that the biggest impact would be the various claims for those who had contracted COVID-19.
- Twenty-three per cent of plan sponsors felt there would be no big impact over the next five years, increasing to 44% among those with fewer than 50 employees.



Making new connections

Abrupt shift to the home environment yields pros and cons; opinions are divided on where employees are most productive

SETTING THE STAGE

- The biggest share of plan members (40%) indicated an office is or was their regular work environment before the pandemic.
- Just under half (45%) were somewhat evenly divided between the following non-office settings: health care/hospital/first responder (15%), warehouse/manufacturing (10%), education/daycare (10%) and retail (10%). Remaining respondents worked primarily outside, for example in construction (6%), while 2% worked in outside sales and 7% indicated "other."
- One-third (35%) of plan members indicated that they could not work from home, when asked if they were working from home more often since the start of the pandemic. Of those, 74% said they were considered essential workers during the pandemic (26% of all respondents), increasing to 94% among respondents in health-care, hospital or first-responder settings (33% of all respondents).

WORKING FROM HOME

- Among plan members who could work from home, 63% agreed they were doing so more often.
- About half (52%) worked from home almost exclusively. Expressed as a proportion, on average, plan members worked from home about two-thirds (68%) of the time.
- This ranged from a high of 72% in Ontario, where public health measures were more stringent, to 59% in Manitoba/Saskatchewan and the Atlantic provinces.
- Plan sponsors estimated that 58% of their workforce worked from home during the past year, increasing to 78% among those in the traditional "white collar" group of professional/business services, finance and high tech.

DOWNSIDES OF THE PAST YEAR

- Among all plan members, regardless of where they worked, 66% agreed they have felt less connected to their co-workers and organization over the past year. This increases to 76% both for members working almost exclusively from home and for those working in education or daycare. Poor health and job satisfaction are also factors (see chart).
- Almost as many (59%) plan sponsor respondents agreed that they have personally felt less connected to their co-workers and organization.

CAROL CRAIG TELUS



"Before the pandemic about 75 per cent of our workforce was mobile - this has grown to 95 per cent. Mobile work gives our team the flexibility to work when and where they are most effective so they can focus on supporting exceptional business outcomes. And team members love it – the program has consistently scored satisfaction rates between 90 and 100 per cent."

PLAN MEMBERS



66%

Plan members who felt less connected to co-workers and organization over the past year

MORE LIKELY WHEN:



SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: All plan members (N=1000)

LORETTA KULCHYCKI CANADA LIFE



"A hybrid workforce absolutely is not going to be one size fits all. Flexibility is key for employees to bring their best to work every day. Access to both in-person and virtual care benefits options and mental-health supports will continue to be important to support employees as the work environment continues to evolve."

Keeping your best interests in mind



People-focused and innovative, our approach to group plans promotes wellness and helps your employees:

- Develop healthy habits
- Get guidance and support
- Achieve their goals at every stage of life

Because health and financial wellness go hand in hand.

Learn more at
desjardinslifeinsurance.com/businesses



DESJARDINS INSURANCE refers to Desjardins Financial Security Life Assurance Company.
200, rue des Commandeurs, Lévis (QC) G6V 6R2 / 1-866-647-5013
DESJARDINS, DESJARDINS INSURANCE and related trademarks are trademarks of the Fédération des caisses Desjardins du Québec used under licence by Desjardins Financial Security Life Assurance Company.

- When presented with a list of possible disadvantages of working from home, plan members most often chose the lack of separation between the work and home environment (46%) and too much sitting/inactivity (46%).
- Other frequently cited disadvantages included feelings of isolation (41%), too much screen time (39%) and longer work hours (28%). See chart for full list.
- Just 10% indicated that there are no disadvantages to working from home.

JURY OUT ON PRODUCTIVITY?

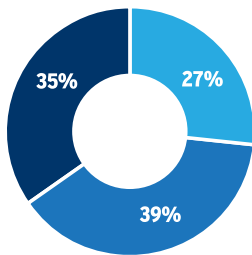
- Plan members appeared to be somewhat evenly divided on where they feel they work most productively: 39% said they are equally productive at home or at the workplace, 35% feel more productive at the workplace and 27% believe they are more productive at home.
- Men (44%) were more likely than women (34%) to report they are equally productive in both locations, while women felt more strongly about being most productive at home (33% versus 20% for men).
- Members experiencing high levels of stress were much more likely to report being more productive at the workplace (49%) than at home (23%), as were those who are caregivers for children (41% versus 24%) or ageing parents (38% versus 19%).
- Plan sponsors were somewhat more conclusive: 45% felt their employees were most productive at the workplace, 24% felt they were equally productive at work or home and 31% that they were most productive at home. Fifteen per cent of plan sponsors did not answer this question.

PLAN MEMBERS **PLAN SPONSORS**

OPINIONS ON WHERE THEY/EMPLOYEES ARE MOST PRODUCTIVE

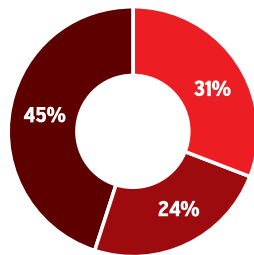
PLAN MEMBERS

- At home
- Equally productive at home or workplace
- At workplace



PLAN SPONSORS

- At home
- Equally productive at home or workplace
- At workplace



SOURCE: 2021 Benefits Canada Healthcare Survey, May-June 2021. BASE: Plan members working from home at least partially (n=593); plan sponsors that answered question (n=443)

PLAN MEMBERS

MAIN DISADVANTAGES OF WORKING FROM HOME

No separation between work and home environment	46%
Too much sitting/inactivity	46%
Feelings of isolation from co-workers	41%
Too much screen time	39%
Working more hours	28%
Not set up to work from home	26%
Poorer eating habits	26%
Working outside usual hours	25%
Poorer work-life balance	25%
No disadvantages	10%

SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: Plan members working from home at least partially (n=593)

KEY TAKEAWAYS

1. Strong leadership and new approaches to team-building are essential to lessen feelings of isolation and maintain a wellness culture among all employees, whether working onsite or at home.
2. Results regarding productivity while working at home are encouraging, especially considering the trying circumstances of a global pandemic. Going forward, it's important to keep in mind that productivity is more a factor of successful working relationships and efficient processes than it is a factor of place.
3. Having said that, younger employees may be less likely to have home environments conducive to work – and less likely to express concerns given their “junior” status, noted members of the advisory board. The increased prevalence of mental-health concerns among younger employees further warrants the need to pay closer attention to this age group.
4. Plan sponsors on the board agreed that adding funds to a wellness account to include home office-related items, such as ergonomically designed office chairs, is an efficient, cost-effective and impactful way to support employees.
5. A side benefit of remote work is the reduced transmission of common infectious illnesses such as the cold or influenza, resulting in fewer incidental sick days. On a related note, among employees still going to a workplace, COVID-19 has demonstrated the importance of remaining at home if ill, which again protects productivity across the workforce.

PLAN SPONSOR PROFILE: SHOPIFY

Pulling out stops for mental health



Kelly Dawson

Global disability and leaves specialist
SHOPIFY

The strength of the Shopify's program for mental health allowed the company to "pivot and focus more on specialized, unique and trauma-focused initiatives" in response to the pandemic.

It's probably fair to say that no one can be entirely ready for the mental-health impact COVID-19 is having on workplaces across Canada. Kelly Dawson, global disability and leaves specialist at Shopify, feels fortunate to be better prepared than most.

Timing had a lot to do with it: in late 2019, Shopify began significantly enhancing the organization's mental-health benefits after data showed that mental-health issues were driving rising disability incidence rates.

"Mental-health benefits should be a foundational piece of everyone's benefits plan," Dawson says, noting that having strong mental-health programs already in place "set us up for success through 2020 and the pandemic and gave us the time and space to focus on all these other COVID-specific initiatives we were able to roll out. Without that, we probably would have been scrambling just to put the basics in place."

By early 2020, Shopify had carved out a separate \$2,500 cap for mental health-related paramedical services, available to all employees in Canada. It had launched Best Doctors, including the mental-health navigator, to help people find specialists and access the help they needed. They had trained leaders across the organization on the many other wellness programs available to their teams. And they had committed to amplifying communication about mental health and wellness to further raise awareness.

The strength of the existing program, says Dawson, "allowed Shopify to pivot and focus more on specialized, unique and trauma-focused initiatives" in response to the pandemic.

Very soon after lockdowns began, all staff received an allowance of \$2,200 they could use for anything needed for

remote work – from office equipment to groceries to toys and books to keep their kids occupied at home. They also had access to an online "furniture essentials" store and ergonomic assessments.

In May 2020, the company decided employees would not have to return to the office and to remain "digital by design." Later in the year, the company offered home design consultations run by the in-house real estate team to help people enhance their living and working environment.

In response to heightened levels of stress reported by many employees in employee surveys, Shopify gave caregivers flexibility to temporarily reduce their hours or step away from work altogether. The organization offered therapist-led, peer-to-peer support circles that tackled issues such as coping with COVID-19 and racism. It launched an online wellness hub packed with resources to help people stay mentally healthy. And in July and August 2020, everyone took Fridays off as R&R days for eight weeks – an initiative that was so popular it was brought back in 2021.

One employee wrote in response, "Thank you so much for your continued support. It is clear that Shopify holds the mental and physical well-being of its employees at a high regard and I am so grateful to be able to call myself a member of this community."

Shopify has also seen a positive impact on the health benefits plan, as the percentage of claims related to mental health and disability decreased in 2020. However, the team's hard work goes on.

"Our metrics are improving, but that doesn't mean we pull up or reduce the mental-health support. We're still going full speed ahead," says Dawson.

Commute time a big concern

Plan members want to keep working from home, while plan sponsors are conflicted between wanting to accommodate employees and needing to mandate them back to work

PREFERENCES FOR WORKING FROM HOME

- Among plan members who can work from home, 41% indicated they would like to work from home two to four days a week and 28% said they would like to work almost exclusively from home (approximately five days a week). These results are essentially flipped from those for the past year, when 22% reported working from home two to four days a week and 52% did so approximately five days a week.
- Only 7% indicated not wanting to work from home at all after the pandemic.
- Expressed as a proportion, members would like to work at home, on average, 57% of the time after the pandemic, compared to an average of 68% during the pandemic.
- Results are consistent when considered by gender, age or caregiving responsibilities.
- Plan sponsors reported that their organization would like 45% of their workforce to continue to work from home after the pandemic, down from their estimate of 58%, on average, who were working from home during the past year.

CONCERNS ABOUT RETURNING

- Four out of five (83%) plan members who were working from home had at least one concern about returning to the workplace after the pandemic. Among them, the top three concerns were the time lost due to commuting (44%), people not following public health safety measures (42%) and working/interacting with people who are not vaccinated against COVID-19 (38%).
- Two-thirds (68%) of plan sponsors had at least one concern about home-based employees returning to the workplace, increasing to 86% among employers with 500 or more employees. These plan sponsors' top-three concerns were re-establishing the workplace culture (37%), balancing the needs of a hybrid workforce (33%) and employees not following public health safety measures (25%).
- Levels of concern were deeper for large (500 or more employees) versus small (less than 50 employees) employers: 48% versus 24% for re-establishing the workplace culture and 47% versus 16% for balancing the needs of a hybrid workforce.

BRONWYN OTT UNILEVER CANADA



"When we look at the work environment and culture through the lens of diversity, equity and inclusion, it's about being able to work when, where and how you are most productive. Hybrid work arrangements allow for optimal flexibility and accessibility, sustained by guidelines that foster teamwork and in-person collaboration."

PLAN MEMBERS

PROPORTION OF THE WORK WEEK AT HOME IN PAST YEAR AND PREFERENCES AFTER THE PANDEMIC

- None (0%)
- One day a week (1-20%)
- Two days (21-40%)
- Three or four days (41-80%)
- Five days (81-100%)

Over the past year what proportion of your work week, on average, has been from home?



Average proportion of time working from home: **68%**

After the pandemic, what proportion of your work week would you prefer to work from home?



Average proportion of time working from home: **57%**

SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: Plan members who could work from home (n=646); plan members working from home at least partially (n=593)

PLAN SPONSORS

58%
Plan sponsors' estimate for proportion of workforce working from home during past year



45%
Proportion of workforce that plan sponsors would like to continue to work from home after the pandemic

SOURCE: 2021 Benefits Canada Healthcare Survey, June-July 2021. BASE: Plan sponsors that answered questions (n=423; n=319)



Sun Life Real Health Solutions, powered by Lumino Health

Whether your employees are healthy, experiencing symptoms or recovering, we're here to support them. And we'll work with you to develop a plan to make your workplace thrive.

Discover how we can help your employees find real health.

sunlife.ca/realhealth



TO MANDATE OR NOT TO MANDATE

- Even though employees can be mandated to work at the workplace, 66% of plan sponsors agreed they will do their best to accommodate those who prefer to work from home; 23% strongly agreed. Employers in the professional/business services/finance/high tech sector were most likely to agree (80%).
- One in five (19%) disagreed with this statement. Sixteen per cent did not answer, suggesting the difficulty of this decision to be made by plan sponsors in the near future.
- Having said that, 51% of sponsors agreed they will eventually have to mandate more employees to return to the workplace, increasing to 64% for public sector employers. One-third (34%) disagreed and 16% again did not answer.
- Fifty-two per cent of plan sponsors were concerned about the impact on attraction and retention if they mandated employees to return to work, increasing to 69% among larger employers (500 or more employees). One-third (33%) disagreed and 15% did not answer.

HEALTH AND WELLNESS CHALLENGES

- Just over half (55%) of plan sponsors agreed that they anticipate different health and wellness challenges due to more employees working from home. Sponsors with fewer than 50 employees (34%) were much less concerned than those with 500 or more employees (69%).
- When asked to describe the different challenges, plan sponsors most often gravitated to select the three options related to mental health. Musculoskeletal issues due to poor ergonomics also ranked highly (see chart).

PLAN SPONSORS

ANTICIPATED HEALTH AND WELLNESS CHALLENGES DUE TO MORE EMPLOYEES WORKING FROM HOME

Mental-health claims from stress/isolation	68%
Anxiety among employees returning to the workplace because they are unsure who has been vaccinated	65%
Identifying employees struggling with mental-health issues	62%
Musculoskeletal issues from poor ergonomics	51%
Increased obesity	40%
Equality of programs/services for hybrid workforce	38%
Chronic pain	28%

SOURCE: 2021 Benefits Canada Healthcare Survey, May-June 2021. BASE: Plan sponsors anticipating different health and wellness challenges due to more employees working from home (n=285)

BARBARA CARNEGIE SHOPPERS DRUG MART



“Many employers were already adopting a workplace culture that puts more emphasis on personal well-being. The pandemic really kickstarted and accelerated that journey. It also demonstrated that a strong wellness culture can thrive outside of the traditional work setting.”

PLAN MEMBERS

CONCERNS ABOUT RETURNING TO THE WORKPLACE AFTER THE PANDEMIC



Time lost due to commuting	44%
People not following public health safety measures	42%
Working/interacting with people who are not vaccinated against COVID-19	38%
Crowds in the workplace	29%
Having to be at work at a certain time	25%
Having to go back to workplace dress code	25%
Commuting by public transit	23%
Loss of control over work hours	17%
Not easily available for members of household	17%
No concerns	17%

SOURCE: 2021 Benefits Canada Healthcare Survey, May 2021. BASE: Plan members working from home at least partially (n=593)

PLAN SPONSORS

66%
Plan sponsors that will do their best to accommodate employees who prefer to work from home

51%
Plan sponsors that will eventually have to mandate more employees to return to the workplace



SOURCE: 2021 Benefits Canada Healthcare Survey, May-June 2021. BASE: All plan sponsors (N=524)

JASON TRAIETTO ROGERS COMMUNICATIONS



“Perhaps the most frequent feedback we are getting about returning to the office is, ‘Don’t do it too fast.’ There is still so much uncertainty and people want to be able to ease into their return. Employers can also provide an extra layer of protection through rapid testing. It’s an extra expense, but hugely appreciated.”

KEY TAKEAWAYS

1. A hybrid work environment is here to stay – and was likely the way of the future even before the pandemic, agreed members of the advisory board. Employees’ ability to work when, where and how they are most productive is increasingly important for attraction and retention.
2. However, employees’ forced exodus due to COVID-19 necessitates a careful plan to accommodate all staff. Employee feedback, steady communications and adaptability are essential.
3. Plan sponsors on the board have found it effective to lay the groundwork by determining the base amount of time required for office staff to be at the workplace and leaving the details of scheduling to individual teams. This could result in partial days, i.e., to attend a team meeting only.
4. A gradual approach is also recommended, i.e., full-time at-home employees could return to the workplace 20% of the time to start.
5. Additional leadership training may be required to mitigate conflicts, including discrimination; i.e., women are more likely to want to work from home, possibly leading to gender discrimination due to less visibility in the office.
6. Onsite vaccinations and rapid antigen testing kits, both available at no cost through the federal government, may help allay concerns about working with employees who are not vaccinated against COVID-19. Participation in both is largely voluntary at this point, underscoring the need for vigilant monitoring of what’s happening in public health and constant, transparent communications to employees.
7. Plan sponsors appear to be conflicted about mandating employees to return to the workplace. Most want to accommodate those who wish to stay at home; however, a slim majority believe they will have to mandate more employees to return.

When a fever disrupts a daily routine or the results of a diagnostic test disrupt your everything, we’re here to help.

From episodic illnesses to the most complex and costly medical conditions, Teladoc Health is transforming how people access healthcare.

In 2002, we set out to find a better way to connect doctors and patients. Today, Teladoc Health is the global virtual care leader, helping millions of people resolve their healthcare needs with confidence. With an award-winning user experience and scalable technology platform, Teladoc Health provides access to high-quality care for millions of people around the globe.



TeladocHealth.ca |
cancommercial@teladochealth.com

409286962 | 10142019 © 2019 Teladoc Health, Inc. All rights reserved.

Teladoc
HEALTH

5 talking points

from the 2021 Benefits Canada Healthcare Survey

1. CENTRE STAGE, MENTAL HEALTH



Plan sponsors' intended investments in mental health shifted into high gear, perhaps at the expense of other wellness areas such as physical fitness, chronic disease management and financial health. Time will tell if those investments include more mental-health training programs, where availability appears to have plateaued at about half of plan sponsors for the past three years.

Among plan members, mental-health issues solidified their position as the top chronic health condition, with the highest prevalence among those aged 18 to 34.

2. IN POORER HEALTH



The number of plan members who describe their health as poor increased for the first time since the question was first asked in 2018. Significant numbers reported poorer eating habits, less physical activity, weight gain and more trouble sleeping over the past year. About half delayed seeking treatment or going to a health-care provider. These results don't bode well for the incidence and possible impact of chronic health conditions, which affect six out of 10 plan members.

On the plus side, fewer members with chronic conditions reported that their condition caused them to miss work and/or made it harder to do their jobs. Among those who were working from home, the majority agreed that the home environment has meant they've missed less work due to their condition.

3. VIRTUAL CARE MAKES A SPLASH



Approximately two in five plan members received health care virtually since the start of the pandemic and over two-thirds would be willing to receive care virtually after the pandemic. While most of the virtual care happened within the public health-care system, plan members were most positive about the quality of virtual care from a workplace-provided program. About two in five plan sponsors have

benefits plans that offer virtual health-care services, comparable to the number with health-care spending accounts.

4. BENEFITS PLANS A-OK



Overall, plan members' opinions of their workplace health benefits plan were generally positive, and neither improved nor worsened during the pandemic. However, more plan members in poor health indicated their plan didn't meet their needs.

Plan sponsors were more positive than plan members about the quality of their health benefits plans, but less positive than they were before the pandemic. More of them – about three out of four – reported receiving claims data analyses of the top disease states in their workforce. Consistent with previous years, their top concerns centred on sustainability and levels of disability/absence.

When asked to consider possible future benefits, preferences diverged compared to last year. Plan members were primarily focused on physical fitness, while plan sponsors' top interests were wide-ranging and included virtual care, immunizations and health risk screenings.

5. THE FUTURE OF WORK



Among plan members who can work from home, less than one in 10 indicated they don't want to work from home at all after the pandemic. The rest would like to work at home just over half of the time. Plan sponsors, meanwhile, would like just under half their workforce to work from home at least part of the time after the pandemic.

A top concern of members returning to the workplace is working with people who aren't vaccinated against COVID-19. Plan sponsors also anticipate that anxiety regarding other people's vaccination status will be a new health and wellness challenge. When surveyed in May, just under one in 10 plan members indicated they had decided not to get vaccinated.

Advisory board



Susan Belmore-Vermes
Director, group benefits solutions
HEALTH ASSOCIATION
NOVA SCOTIA



Michael Bradie
Vice-president, growth and client
service, group benefits team
GREEN SHIELD CANADA



Barbara Carnegie
Vice-president, payor partnerships
SHOPPERS DRUG MART



Carol Craig
Director, pensions and benefits
TELUS



Jennifer Curzon
Regional director, sales and service,
Western Canada distribution, group
benefits and retirement solutions
IA FINANCIAL GROUP



Shannon Darvill
Senior Benefits Consultant
PEOPLE CORPORATION



Andrea Frankel
Lead, private payer
SANOFI CANADA



Julie Gaudry
Head of group insurance
RBC INSURANCE



Allison Gordon
Vice-president, sales
TELADOC HEALTH



Gordon Hart
President and chief executive officer
SELECTPATH BENEFITS
& FINANCIAL/BENEFITS DIRECT



Laura Hewitt
Assistant vice-president,
pharmaceutical benefits and
innovation, group benefits
SUN LIFE



Sherry Hnatyshyn
Managing director
CAREPATH



Christine Korczak
National director, corporate
accounts and strategic partnerships
BAYSHORE HEALTHCARE



Loretta Kulchyski
Vice-president product,
AI and digital strategy
CANADA LIFE



Erik Larose
Regional vice-president,
business development
(Quebec and Atlantic)
DESJARDINS INSURANCE



Alaina MacKenzie
Regional vice-president,
business development
MEDAVIE BLUE CROSS



Barb Martinez
National practice leader,
drug solutions
CANADA LIFE



Rachel McNeill-Thompson
Assistant vice-president, marketing,
communications and client
experience, group benefits
SUN LIFE



Bronwyn Ott
Benefits, wellbeing, inclusion,
people and culture leader
UNILEVER CANADA



Bill Papadimitriou
Regional vice-president,
business development (Ontario)
DESJARDINS INSURANCE



Elliot Stone
Chief executive officer
and co-founder
ALAVIDA



Jason Traetto
Director, benefits, wealth and
recognition programs
ROGERS COMMUNICATIONS



Meghan Vallis
Group sales, vice-president,
Western Canada
EQUITABLE LIFE



Heidi Worthington
Senior vice-president
and chief revenue officer
PACIFIC BLUE CROSS

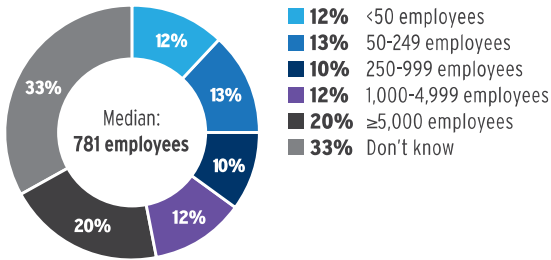
Methodology

Ipsos fielded the plan member survey on behalf of Contex Group using an online (Internet survey) methodology from May 19 to May 28, 2021. In total, a national sample of 1,000 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 is higher among sub-sample respondent groups. The data has been statistically weighted to ensure that the age, gender and regional composition of the sample reflect those of the adult working population according to the 2016 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.

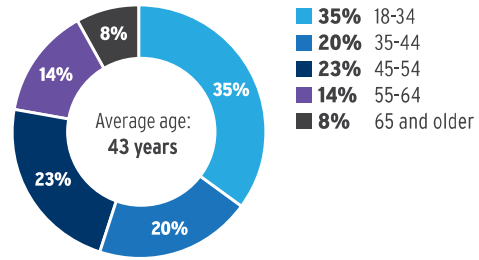
In addition, Contex Group and Maru/Blue fielded a separate online survey for Contex Group research with 524 benefit plan sponsor decision-makers from across the country, from May 31 to June 30, 2021. The data was statistically weighted to accurately reflect the geographic distribution of business and business size according to Industry Canada.

PLAN MEMBER DEMOGRAPHICS

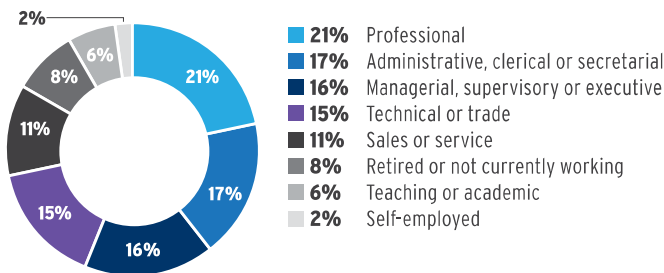
ORGANIZATION SIZE



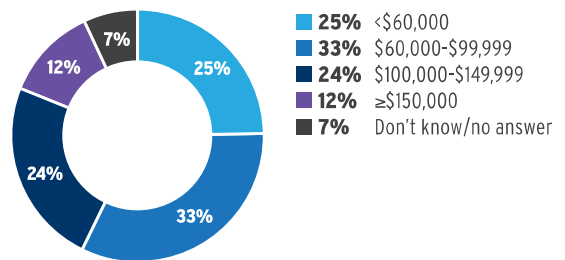
AGE



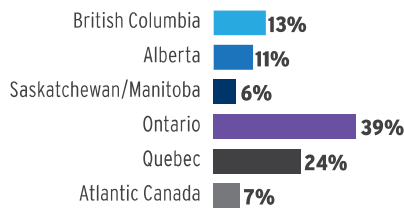
POSITION



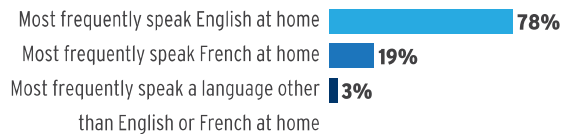
HOUSEHOLD INCOME



PROVINCE/REGION



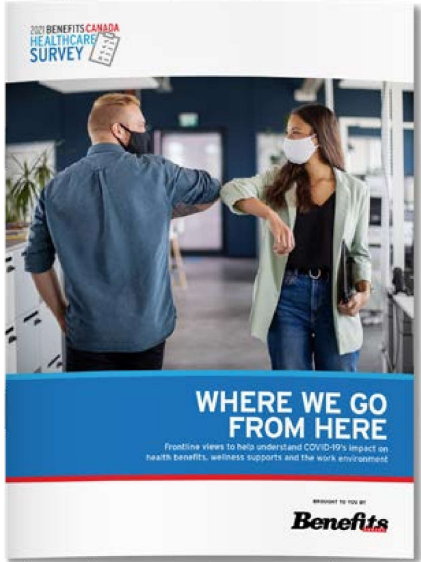
LANGUAGE



GENDER



Note: Due to rounding, response categories may not add up to 100%



The 2021 *Benefits Canada Healthcare Survey* is published by Contex Group Inc.

BROUGHT TO YOU BY
Benefits
CANADA