

corporate adviser

R O U N D T A B L E



WORKPLACE WELLBEING AND PROTECTION

- GROUP PROTECTION ON THE FRONT FOOT
- COST CHALLENGE FOR THE PROTECTION MARKET

IN
ASSOCIATION
WITH

canada  life™

 Simplyhealth

Certified

Corporation

1.2 million working days are missed due to dental issues each year*.

Toothfairy provides instant access to advice, guidance and prescriptions, all from the comfort of home.

+ Find out more at www.canadalife.co.uk/toothfairy

Toothfairy

noun

Award-winning dental app now available with all workplace protection policies



Smile with Confidence

toothfairy

canada  life™

Toothfairy is provided to Canada Life Limited customers by Toothfairy Healthcare Limited. This service is non-contractual and does not form part of your insurance contract with us. If our partnership with Toothfairy Healthcare Limited ends, the service can be withdrawn at any time. Canada Life Limited, registered in England and Wales no. 973271. Registered office: Canada Life Place, Potters Bar, Hertfordshire EN6 5BA. CLFIS (UK) Limited, registered in England and Wales no. 04356028 is an associate company of Canada Life Limited. Registered Office: Canada Life Place, Potters Bar, Hertfordshire EN6 5BA. Canada Life Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Canada Life and design are trademarks of The Canada Life Assurance Company. 10061287 - 524R/B
Terms apply. *The Oral Health Foundation

EFFICIENCY THROUGH SIMPLIFICATION

Untangling an increasingly complex benefits landscape has never been more important

John Greenwood

john.greenwood@definitearticlemedia.com



Rising demand and rising usage usually mean rising costs. This, in essence, is the dynamic the workplace protection and wellbeing sector is facing today.

The Covid-19 crisis turned the world of work on its head and supercharged usage of technologies delivering services and treatments remotely.

This is of course a great success, but we are now reaping unforeseen consequences, with advisers at the round table covered in this special supplement reporting increased product complexity as increasingly commoditised add-on services are bolted on to products of all types.

The vastly increased access to online triage or early stage treatment is also fuelling medical inflation – with industry players reporting sometimes unnecessary referral to PMI, challenging service standards and sending premiums through the roof in some cases. Premium hikes of 300 per cent have been cited by some advisers, something that few employers are going to be able to stomach for long. This not only highlights the importance of preparing businesses for these costs and promoting efficient healthcare usage to avoid further price hikes – it also demands collaboration among insurers, employers, and advisers if we are to create sustainable, accessible solutions.

Advisers have also called for collaboration around the complexity of group risk, cash plan, and PMI products, which they say is exacerbated by frequent updates and

the proliferation of added-value services. Intermediaries report challenges in comparing propositions and the confusion this causes for employers and employees alike, and want a more streamlined, menu-based approach to benefits, allowing consultants to customize services to client needs. This would simplify offerings and reduce unnecessary duplication, particularly in large corporates, where multiple EAP or virtual GP services can confuse employees and drive up costs.

The good news is that demand for the protection, health and wellbeing services the industry offers via the workplace has never been greater, with all product lines – group risk, group PMI, cash plans and standalone wellbeing services – reaching new heights in terms of coverage.

The new Labour government presents an opportunity to revisit the financial constraints on employers through potential legislative proposals, such as lowering Insurance Premium Tax (IPT) and amending P11D policies, measures which could alleviate costs and make it easier for businesses to provide comprehensive employee benefits, particularly in mental health support. Industry success in pushing its agenda may have been limited in the past, but a new government may take a different approach.

In the meantime, the increasingly complex workplace health, protection and wellbeing agenda means the value of expert consulting has never been greater.

INSIDE

REPORT

18 GROUP PROTECTION ON THE FRONT FOOT

The good news is that all workplace protection product lines are in growth mode. But product complexity and added-value features are creating an increasingly complex landscape.

Emma Simon reports

22 COST CHALLENGE FOR THE PROTECTION MARKET

Premiums are rising across the industry. But can more efficient pathways and better use of tech keep price hikes under control? Muna Abdi reports





WORKPLACE WELLBEING AND PROTECTION

GROUP PROTECTION ON THE FRONT FOOT

The good news is that all workplace protection product lines are in growth mode. But product complexity and added-value features are creating an increasingly complex landscape. **Emma Simon reports**

The group protection market looks in rude health, with continued strong sales growth across all major product lines despite ongoing economic headwinds.

At a recent roundtable event at the House of Lords, consultants and providers discussed the findings of Corporate Adviser's latest Workplace Protection and Wellbeing Report. They were upbeat about the progress that had been made but not complacent about the challenges ahead.

Many commented on how group risk, cash plan and PMI products have rapidly evolved in recent years, offering digital

access in the wake of the Covid pandemic and an ever-growing range of wellbeing support services.

However, consultants attending the event were concerned that the proliferation of these added-value services was over-complicating propositions.

Titan Wealth Management senior corporate benefits consultant Karen Gittings said this was a major problem for consultants. "As an intermediary, it can be a real minefield, particularly when it comes to comparing different propositions or switching schemes."

She said that this complexity is getting worse, in part due to frequent product updates. For example, she said some group risk providers offer these 'free' benefits to all employees, regardless of whether they are covered by the main insurance policy. Others only offer these services to insured members, while some now extend these services to the whole workforce but only if 90 per cent are covered by the policy. There may also be differences between the exact support services offered, whether they extend to family members, and how 'family members' are defined.

"You have to keep your wits about you when switching schemes to ensure employees maintain the same level of benefits," she said.

First Actuarial group protection consultant Suzie Nedza said that this complexity wasn't just an issue for advisers. "It is hard enough for consultants to navigate these different product options. But the main problem is this creates confusion and complexity for employers and their employees."

Gallagher benefits consulting team leader Anders Lewis pointed out that this is a particular issue for larger corporates who are likely to offer a range of employee

benefits. “You don’t need five different EAP or virtual GP services. It is completely unnecessary.” He said not only is this contributing to rampant price inflation across the sector (see next article) but it is muddying the water for both employers and employees when it comes to using these products, potentially impacting how they are valued in the workplace.

“You just don’t need all this different information getting through to the end employee,” he said. “Even if it doesn’t reduce the cost, it would be good to turn off some of these services.”

Suzanne Summerfield, wellbeing solutions consultant at PIB Employee Benefits, said even within the same product there may be different apps for different services. As a result, many may get overlooked and employees might not be taking advantage of the wellbeing support offered.

Pick ‘n mix approach

Those attending the event wanted providers to address this issue. Many would like to see insurers and cash plan providers move to a more menu-based approach, giving consultants the ability to effectively ‘turn off’ certain services.

“We’d like to buy a basic product and then get the option to purchase the added-value services the client actually needs,” Gittings said.



Allyson Gayle

“This would enable providers like Canada Life to offer unique benefits like their Toothfairy service,” said Lewis. He said this virtual dental service had proved popular with clients. “But there would be the option to remove services that are widely duplicated elsewhere. This would simplify products for clients.”

However, consultants acknowledged there were different challenges for those advising the SME market. Roy McLoughlin, director of strategic partnerships at Cavendish Ware, said these support services are an attractive feature of group risk and cash plan products, with many of these firms not offering extensive benefits to employees. Duplication was far less of an issue here, although it was still important these benefits were clearly communicated, he said, so employees knew what services were available and how to access them.

Many would like to see better use of technology across the industry. Beckett Financial Services director of employee benefits Tracey Gloyne said benefit platforms can help employers navigate different protection products and the embedded range of support services. ▶

"These platforms are invaluable, but we need to see more innovation at the SME end of the market to bring benefits together and give better oversight of these products."

Consultancy firms that serve the larger corporate market, such as Gallagher, offer their own platform. Lewis pointed out that this was one of the reasons the firm acquired Buck; it now uses the benefit platform it developed with clients.

Other advisers in the room said their SME clients would like to access platforms like this, but unfortunately, they often lack the budget. "With AI you would think there would be a way to do this cost-effectively," McLoughlin said. "But to date, this hasn't happened."

He said some benefit providers have tried to target this market with a lower-cost solution. But while popular with clients, he said this did not appear to be profitable at present, with at least one of these firms subsequently going out of business.

Data challenge

Benefits platforms can also help generate valuable data, which is useful for employers and consultants when looking to tailor benefits solutions.

A number of consultants pointed out that there is often no single oversight of how employees are using the range of services available on protection and healthcare products. Summerfield said: "We might know the proportion of employees using the GP service offered through a PMI policy, for example, but we don't know if they've used other pathways. If we want to have real meaningful data we need to start being more joined up."

She pointed out that the data that was available was inevitably backwards-looking, failing to take into account many of the health problems heading our way, for example, rising levels of obesity and potential problems arising from delays for treatment in the NHS.

Isio's director of reward and benefits Allyson Gayle said better data can also help underscore the business case for protection products in the workplace. "Better data can help clients understand how these different products and support services help when it comes to retention, recruitment, managing absence and building a happier more productive workforce."

Gloyne said in an ideal world she'd like to see an industry-wide solution, akin to the pensions dashboard. Others suggested that rather than have a plethora of apps from different insurers and third-party providers, it would be simpler if there was a 'universal app' that clients could offer their employees.



(Left to right) Macarena Staudenmaier, Suzanne Summerfield, Matt Pincott and Camilla Murphy

Communication challenge

Neither option looks likely to happen anytime soon though. In the meantime, consultants said there was a need for better communication and education. This is twofold: on the one hand, it is to ensure consultants can help employers understand the value of the product, and the potential benefits it can deliver.

But this communication strategy also needs to extend through to employees, so they have a clearer picture of what services are offered and how they access them.

Summerfield said it is important to communicate in terms employees understand. "No employee is thinking 'I'll go and look at what wellbeing services might be available under a group income protection policy'. They don't think like that. They are thinking 'I need a GP appointment', or 'I'm having financial difficulties is there anyone I can talk to'. We have to go back to this end user and think like a consumer, and engineer platforms so it's easy to access help when it is needed."

Towergate's principal health and wellbeing consultant Paul Bridges said communicating the value of these protection benefits to employers can be a challenge, particularly with costs rising. "It can be very challenging for businesses themselves to really understand these benefits and the value they deliver."



Roy McLoughlin

"Consultants have an educational role in current conditions, helping clients understand that making products more accessible is going to drive up costs, so they need to prepare for that and increase budgets accordingly."

Policy evolution

Many on the panel agreed that protection policies were evolving in new ways. This goes beyond the range of digital support services now available.

Insurance and healthcare products have evolved, in part due to the difficulties people have had accessing NHS and primary healthcare services in recent years.



Tina Kennedy



Tracey Gloyne



Karen Gittings and Suzie Nedza

Summerfield pointed out that PMI products didn't previously cover chronic conditions but these are now available on some policies.

Canada Life head of sales, protection Matt Pincott said that insurance products are also evolving. "Across the risk and healthcare industry, we are taking a more holistic approach, particularly when it comes to prevention."

Keeping employees healthy is an important element of delivering a return on investment for employers, as well as providing a range of services for when people fall ill, added Canada Life marketing manager Camilla Murphy. Insurers are also becoming more targeted with treatment



Paul Bridges

pathways for common conditions, be it musculoskeletal problems or mental health. "This approach can deliver more cost-effective solutions, but also better outcomes for members," said Pincott.

"The question is what is next for the industry, how can we up our game in terms of prevention, and how can we scale up those solutions without having a negative impact on future pricing?"

Simplyhealth product director Tina Kennedy agreed that prevention was important, but she also made some important distinctions as to where group protection and healthcare policies can help.

"In the clinical world, you have primary prevention, which is about ensuring healthy people don't get sick. Then there's secondary prevention, which I think is potentially a big issue in the workplace. This is where an employee has a problem, but you don't want it to get worse."

She gave the example of an employee with a back problem, where timely access to specialist help can prevent this from becoming a more serious issue necessitating prolonged absence or leaving the workforce altogether.

Cash plans have historically largely been involved in primary prevention, offering contributions to 'everyday' healthcare services, such as dentists and opticians. Simplyhealth is evolving its product to offer a degree of help in this

'secondary prevention' space. It is not offering insurance cover for medical treatment, as you would get on a PMI policy, but instead using its position in this market to help people navigate the self-pay market, and potentially offering discounts on treatment.

Kennedy said: "There has been a huge rise in the number of people paying for private medical consultations, treatment and procedures. Last year, the self-pay market stood at £2.7bn."

Kennedy said Simplyhealth plans will provide a "directional" service, guiding members towards clinically validated self-pay services. "This is about helping people access this market with more confidence, not an insurance solution," she added. But given Simplyhealth's ability to bulk-buy services, it says it hopes to be able to offer discounts on some of these treatments.

Kennedy said the plan is to launch this new service later this year. Advisers were broadly supportive of this initiative, with most saying they didn't see a direct threat to their business, despite the provider communicating directly with members.

Gayle said such an approach is likely to resonate in the mid-cap market. "This sector of the market has its own challenges but the end user, the employee, ultimately benefits from the employer, consultant and providers all working more closely together." ■

WORKPLACE WELLBEING AND PROTECTION

COST CHALLENGE FOR THE PROTECTION MARKET

Premiums are rising across the industry. But can more efficient pathways and better use of tech keep price hikes under control? Muna Abdi reports

The group protection market is grappling with rising costs, with significant premium hikes seen across all product lines, particularly in healthcare policies. The increases are driven by high medical inflation as well as a surge in usage and claims on these products.

Delegates, at a recent workplace protection & wellbeing round table event held by Corporate Adviser at the House of Lords, discussed the need for more efficient pathways, better data utilisation, and collaborative digital solutions to mitigate cost, enhance accessibility, and engagement for both employers and employees. Collaboration among insurers, employers, and brokers was seen as crucial for creating streamlined, accessible solutions for both large and small companies.

Drivers

Delegates highlighted that healthcare premiums are significantly rising, impacting costs for both employers and insurers. Increased usage, compounded by challenges such as the cost-of-living and NHS crises, was identified as a key driver of these increases.

Beckett Financial Services employee benefit director Tracey Gloyne reported a 300 per cent premium increase in one client's group PMI.

She said: "Healthcare premiums have increased significantly. Working with clients, we aim to keep those costs contained. We're looking at options like income protection and using mental health services instead of private medical insurance, which will then further impact costs. As advisers, we understand those complexities, whereas clients often do not."

Delegates agreed that businesses need to prepare for increased costs while advocating for pricing models that encourage usage without burdening customers. Meanwhile, insurers are urged to focus on genuine healthcare needs through integrated pathways and promote comprehensive

healthcare journeys to reduce reliance on NHS services that are already overloaded.

Towergate principal health & wellbeing consultant Paul Bridges noted: "Businesses should realise that making products much more accessible is going to drive up cost. Prepare for those increased costs and increase your budget accordingly. I think that's an education piece, that is a challenge. But until we can do that, helping them to navigate systems is useful. We still have to invest more to make sure these products are sustainable in the long term."

Canada Life head of sales Matt Pincott expressed concerns over how current insurance models balance utilisation and rising demand. He underlined the necessity for a pricing model that encourages more usage without passing on costs to customers.

Pincott proposed a more modular strategy and innovation in service delivery to handle rising demand while meeting market needs in the long run.

He said: "We want usage to increase. We want to support more and more people. I don't think any insurer would say anything different, but we need to think about, if we just keep bolting on more services and adding more and more things in, is that cost-effective for the long term and is it relevant for everyone?"

"How can we make policies more relevant? How can we promote usage without any fear of any kind of future cap or future price increase coming in? We've just got to think a bit more creatively from our side."

Gallagher benefits consulting team leader Anders Lewis stressed the need for efficient healthcare usage to avoid costs potentially doubling every four years, advocating for streamlined pathways to reduce unnecessary expenses. He said the challenge lies in presenting these cost-saving measures to clients without diminishing their perceived value.

He said: "The cost of healthcare will double every four years if it carries on like



Allyson Gayle



Suzie Nedza



Camilla Murphy



Matt Pincott



Anders Lewis

Suzanne
Summerfield

this with the number of people needing and using it. We need to make sure people are using it correctly. We need to take data and then find a pathway to cutting out needless expenses. That's what needs to happen."

Simplyhealth head of clinical product & operations Dr Macarena Staudenmaier underscored the need to address genuine healthcare needs over expanding benefits or partnerships, highlighting insurers' duty to prevent NHS overload and promote integrated GP-led diagnostic pathways.

She said: "We need to build more end-to-end journeys for people so that we can solve the real needs they have. If you're going to see a GP, then a lot of the referrals that we see, for example, are for diagnostic scans. We're going to make your specialist referral. If you have discounted scans then maybe you don't need to go into the NHS and you don't need to wait and you can get a scan privately, and then you can go back to that same virtual GP to see whether you really need a referral or if this can be managed within primary care."

Delegates agreed that consultants play an important role in explaining these cost increases to businesses, highlighting not only the financial impact but also the strategic importance of the issues they face around recruitment and retention of staff.

Isio director Allyson Gayle discussed how some companies faced challenges with private medical insurance costs, prompting them to consider pulling coverage. But through consulting and analysing claims data, they found ways to mitigate the cost increases by adjusting workforce strategies and demonstrating future trend expectations to insurers.

Benefit impact

There was also discussion around whether rising costs will deter employers from considering additional benefits like wellbeing services, impacting overall employee support.

According to PIB Employee Benefits wellbeing consultant Suzanne Summerfield, there's an increasing number of people

caring for elders rather than children, creating a balanced shift in caregiving responsibilities. She said this shift, along with significant premium increases, is distorting the wellbeing landscape.

She explained that budgets meant for initiatives like diversity, elder care, and menopause support are being consumed by soaring private medical costs, limiting the implementation of other wellbeing programmes.

Summerfield emphasised that wellbeing initiatives should align with business objectives.

She said: "We're not doing wellbeing just because it's a nice thing to do. If the market's going to mature and get more credibility, we need to be able to support the people that we're working with to sit at the top table and talk business objectives, whether that is retention, whether that is attraction, which are two massive things, whether that's about productivity or engagement.

"However you try to measure these things, the ultimate reason that we're doing this is because we want people to be in work. We want them to be engaged, we want them to be productive, and we don't want to pay loads of money on changing staff over all the time."

Data transparency

The improvement of data transparency and the utilisation of it could be key in helping employers understand and manage the reasons behind rising costs according to Gayle. She mentioned the need for data to help businesses understand rising costs and its impact, noting that leveraging data can help businesses improve retention, recruitment, and workforce satisfaction by identifying areas for improvement and managing cost increases effectively.

She said: "The major missing link is data. I think we do have a rising cost in insurance premiums because of incidents and I think that is a challenge for clients and employers. I think if you can drive the data to help them understand why costs are rising, that pain point of cost then becomes more palatable."

According to Lewis, insurers aim to use their data to guide patients to the most effective specialists and treatments, reducing reliance on GP referrals and promoting cost-effective outcomes.

He said: "The learning is in what the insurer knows through their data, what the best outcome is, who the right specialist consultants for that certain condition are that charge within what they deem reasonable and then just making sure people use ▶



(Left to right) Tina Kennedy, Allyson Gayle, Macarena Staudenmaier and Suzanne Summerfield

those pathways. They want to use their own data to get to the right outcome.”

Mergers

Delegates also analysed the ongoing impact of mergers and acquisitions in the group risk sector, particularly highlighting the Aviva/AIG merger. Concerns were raised about possible premium increases post-merger, underscoring the consultant’s role in clarifying value propositions to employers amidst uncertainties about communication and employer reactions.

Gayle said: “Aviva is clearly in the driver’s seat here. I’ve seen their communications about what’s coming next, and for our Aviva clients, things seem pretty stable as long as it doesn’t impact service and the quality of the proposition. However, there’s some nervousness among the small pool of clients we have with AIG, and that’s more about the service plummeting right after the announcement.

“I feel the morale within the business is low.

“So the only thing that’s keeping things together, the saving grace for me, is that clients are saying, ‘Okay, cool, I’m going to Aviva, a bigger entity.’ So there’s hopefully some light at the end of the tunnel, but it seems to be quite a clunky transition.”

Gloyne highlighted that AIG, which had a tech-focused insurance offering, provided basic and cheap coverage whereas Aviva has more of a value proposition. She anticipates significant discounts from AIG as they navigate their strategy forward.

She explained: “Pricing-wise, AIG were a tech business. It was done online, as long as you didn’t need to actually engage with anybody physically, it did what it said on the tin.

“It was a cheap proposition and it provided some basic coverage. You’re not going to get that with Aviva. You won’t get the pricing, it’s one or the other: it is the lower cost premium or a more valued proposition.”

Political influence

Some delegates said they would like to see legislative changes, such as lowering Insurance Premium Tax (IPT) or amending PIID policies, which could relieve financial pressures on both employers and employees.

Gloyne mentioned the impact of high taxes on some plans, which may be up to 72 per cent depending on income, making it difficult for clients to implement cost-effective alternatives. She stated that reducing these tax barriers could be helpful, suggesting giving more

responsibility to corporations to provide services while addressing the tax implications on PIID forms.

Gloyne also underlined the pressing need for enhanced mental health support, pointing out the gap in care when compared to physical health conditions such as stroke or cancer. She mentioned the long waiting lists for mental health care and emphasised the necessity of prevention and appropriate support given the prevalence of mental health issues in society.

She noted: “It was top of my list to say, mental health support, focusing on prevention. You’ll be put on a waiting list for three months, six months, or eight months. It doesn’t correlate with the amount of mental health problems there are in society at the moment. So it really needs to be a focus.”

Meanwhile, Pincott endorsed Labour’s stance on tackling double taxation issues relating to flexible benefits, emphasising continued industry efforts to address this long-standing matter.

He emphasised the importance of mental health in relation to income protection but proposed evaluating the inclusion of life insurance alongside pension schemes, similar to the auto-enrolment approach, to improve employee benefits comprehensively and consistently across all firms. ■



Revolutionise your business with the Health Plan Evolution

Improve recruitment, retention and productivity with a Simplyhealth Plan.

Supporting the whole workforce to ensure they get the healthcare they need sooner, is critical for your business' health. We believe access to everyday healthcare treatments should be affordable, inclusive and above all else, simple.



Discover more at
[simplyhealth.co.uk/intermediaries](https://www.simplyhealth.co.uk/intermediaries)



OPINION

HOW INSURERS CAN FILL THE GAP IN DENTAL HEALTHCARE

» **Katie Andrew** strategic account manager, group protection, Canada Life



We know that when it comes to our oral health, prevention is better than cure. However, our research shows that there are many barriers preventing people from accessing dental health care in the UK. In fact, a fifth of UK adults – equivalent to 9.4 million people – have performed a dental procedure on themselves¹.

A growing need for dental support in the UK

The press has been dominated with headlines of a dental crisis with the cost of care increasing by 45 per cent in the past decade². Our recent research has also identified that 6.5 million people admit to not having seen a dentist for more than five years, despite NHS guidance recommending individuals visit every two years³. Nearly half of UK adults admit that they've been put off going to the dentist with 13 per cent saying they simply couldn't afford it. And despite oral health being integral to overall health, hygiene and wellbeing, 18 per cent of adults in the UK aren't registered with a dentist and a further 12 per cent have been removed from their NHS waiting list in the last year.

Now more than ever there is a need for support and guidance when it comes to oral health. And while these statistics clearly highlight this need, we must also address the impact that this can have on the health and wellbeing of employees in the workplace. While we don't know how long it will take to solve the dentistry crisis, we can begin to fill the gap through the workplace benefits that we offer.

A unique dentistry solution for all workplace protection customers

In April 2023, we became the first provider to offer the Toothfairy™ app free of charge

to 2.8 million members and thousands of businesses across the UK. Toothfairy™ is the UK's first health-regulated, smart dental app. The award-winning app has been created by two industry-leading dentists and uses patent-pending technology to solve a number of common issues including accessibility, availability, and affordability of dental care.

All workplace protection customers have unlimited access to guidance and advice from

And with 1.2 million working days lost to dental problems each year⁵, Toothfairy™ can also prevent the need to visit a dentist in person, improving absenteeism in the workplace

real UK dentists, signposting and help to find a local clinic or appointment, and private prescriptions issued in 24 hours.

At a time when many are struggling to access dental care, Toothfairy™ aims to fill the gap, connecting patients to dentists in minutes through award-winning technology. Over the past quarter, the services requested on Toothfairy™ comprised of 30.5 per cent for a virtual exam, 29.1 per cent for urgent dental enquires and 21.7 per cent for general dental inquiries, saving employees time and money, as well as providing the support they

need immediately⁴. And it's easy to get started, employees simply download Toothfairy™, complete their profile, provide the requested information and enter their access code to start using the services immediately.

Through Toothfairy™ we wanted to provide all employers and their employees with a support service to complement our existing suite of health and wellbeing services and address a growing need amongst our customers.

And with 1.2 million working days lost to dental problems each year⁵, Toothfairy™ can also prevent the need to visit a dentist in person, improving absenteeism in the workplace.

Standing out in a competitive employment market

With good people hard to retain in businesses due to competition, the benefits on offer from employers are becoming increasingly important. Our research shows that over a third (34 per cent) of UK workers, equivalent to 10.8m people, have been swayed to accept a job because of a competitive benefit, perk or company policy⁶. This shows that Toothfairy™ not only helps to reduce absenteeism and presenteeism within the workplace but also significantly enhances employers' propositions. ■

canada **life**™

¹Survey conducted by Opinium among a nat rep sample of 2000 UK adults between 8-12 March 2024. ²The guardian - Patients foot the bill for cuts as NHS dental charges rise 45% in a decade | Dentists | The Guardian. ³NHS Dental Check up. ⁴Toothfairy. ⁵Oral Health Foundation via UK Parliament - <https://post.parliament.uk/water-fluoridation-and-dental-health/>

⁶Survey conducted by Opinium among 2000 UK adults between 11 - 15 August 2023

OPINION

MOVING BEYOND TRADITIONAL HEALTH PLANS: A COMPREHENSIVE APPROACH TO HEALTHCARE

» Camilla Brooke head of corporate, SME and intermediary sales, Simplyhealth



How Simplyhealth is revolutionising the market to improve access to healthcare for all in the UK

Until now, cash plans were only solving how to pay for private healthcare. But with 7.6 million people on waiting lists according to the NHS, and 2.83 million people in long-term ill health, people need a low-cost option that goes above and beyond. However, Simplyhealth strives to move beyond this, providing members with seamless access to a wider range of services.

Accessing healthcare can be daunting, with many unsure where to begin. We help members navigate the healthcare landscape with ease, offering proactive solutions for general health such as physiotherapy, optical, dental and other wellness services. Individuals are finally able to take preventive measures, reducing the likelihood of severe health issues down the line.

All members deserve to access the care that they need. Our partnerships put members in touch with a network of clinically-validated organisations and diagnostic service providers. Essential scans at a discounted rate are available through our plans without long waiting times. This timely access to diagnostic services can lead to earlier detection and treatment of health issues, significantly improving health outcomes. High costs remain a significant barrier which is why we offer discounted services through partnerships. These discounts make it more affordable for members to access qualified dermatologists, discounted eye tests and glasses and a discounted network of physiotherapy clinics.

Workforce health is paramount to the success of any organisation. By implementing a comprehensive health plan, companies can support their employees through navigation, access and cost. Navigating the complex healthcare system is simplified through guidance and support services. Employees

are empowered to take charge of their own health, knowing exactly where to go for various healthcare needs. By providing easier access, we reduce the barriers that often lead to neglected health issues. This proactive approach ensures that employees receive timely care, reducing absenteeism and improving overall productivity. The financial burden of healthcare is lessened

All members deserve to access the care that they need. Our partnerships put members in touch with a network of clinically-validated organisations and diagnostic service providers

through discounted services, making it feasible for employees to manage their health with less worries. This not only enhances their wellbeing but also fosters a healthier, more engaged workforce.

Employers have a duty to safeguard the health and wellbeing of their employees. New research from Simplyhealth that sampled 2,000 employees and 500 HR decision makers has revealed that businesses in the UK are feeling the effects of the workplace sickness crisis with HR professionals saying that rising numbers of sick days are the biggest challenge they're facing. A massive 70 per cent said they now feel more responsible for the health of their employees due to the NHS crisis. A well-implemented health plan encourages employees to prioritise

their health, leading to a healthier and more resilient workforce.

In a competitive job market, attracting and retaining talent is crucial. Offering a well-rounded benefits package that includes a comprehensive health plan can set a company apart. Prospective employees are increasingly looking for employers who invest in their health and wellbeing. Of employees who do have access to a health plan, three in five (60 per cent) say it's the most valuable benefit on offer to them and 52 per cent say this benefit is what attracted them to join their company.

A robust package not only attracts top talent but also improves employee loyalty and retention. When employees feel valued and supported in their health needs, they are more likely to remain with the company, with 72 per cent saying it incentivises them to stay with their current employer. Consequently, one benefit scheme can reduce turnover rates and the associated costs of recruitment and training. A healthy workforce is more productive, reducing the indirect costs associated with sick leave and decreased productivity. Mental health support services get colleagues back to work sooner, with 27.3 per cent of Simplyhealth's staff who are off sick for mental health back to work by the end of their counselling sessions.

Moving beyond the typical health plan, our approach focuses on providing comprehensive healthcare solutions that bridge the gap between public and private services. By removing barriers we hope to create healthier, more productive workforces, driving both individual and organisational success across the UK. ■



corporate adviser

R O U N D T A B L E



IN
ASSOCIATION
WITH

canada *life*™

 Simplyhealth

Certified

Corporation