

GENERAL

## June 22, 2020 FOR IMMEDIATE RELEASE

## **COVID-19: 2021 Strategic Considerations**

As employers begin opening physical offices / worksites and planning next year's health & welfare strategy, we wanted to share some critical questions and discussion topics we believe HR teams should address with their brokers, consultants, and health & welfare carriers.



## **Self-Insured Medical Cost Impact**

- If my claims have gone down due to limited access to care, how should I work with finance to ensure our budget for the rest of the year is not prematurely reduced?
- What are the latest thoughts around the ultimate impact of COVID-19 on medical / Rx costs for 2020 and 2021?
- What are expected medical and Rx trends for 2021?
- Should I start my stop-loss marketing earlier this year?
  - Given the potential for a second wave of infection and postponement of elective surgeries / procedures, should I consider adding aggregate stop-loss to my contract?
  - Are there any plan provisions that stop-loss carriers have added to reduce their liability associated with COVID-19?
  - Are renewal trends expected to be higher or lower this year vs. previous years?



## **Benefit Considerations**

- Given the recent work at home challenges people have faced, including a sense of loss and isolation, as well as
  potential concerns around returning to work, how can I promote my EAP program and mental health services available
  through the medical plan?
  - Should I complement the EAP offering by adding mental health (including virtual) resources through another vendor?
- When the office reopens, how should I handle benefits eligibility for employees who cannot return to the office due to potential COVID-19 infection concerns, but also are unable to work remotely?
  - Should eligibility provisions on my benefit plans be adjusted?
  - · Do I need to update their status on my enrollment file?
- Are there any voluntary benefits that would be especially useful for my employees that I should consider adding?
- In an effort to control costs, do you anticipate any significant changes to plans that employers will subsidize (e.g., dental and disability)?
- Should I look into any additional payment assistance programs or resources for my lower paid employees, such as Rx specialty coupon / patient assistance programs, Medicaid resources, etc.?
- Should I add any sort of incentive for my employees to complete testing on their own, or revamp my wellness plan to include a benefit for COVID-19 testing?
- Given that the standard approval process for prescription drugs that combat COVID-19 could be a little different than standard protocols, should I be assessing my prescription drug plan provisions?
- For individuals with disability and life insurance benefits tied to commissions, should I adjust salary definitions so employees aren't adversely impacted in the future (e.g., loss of commission salary for an employee on disability that is calculated based on the average of the past 12 months)?

