



At-A-Glance Guide from
Empyrean Benefit Solutions

May 2019

2019 Benefit Trends Report



EMPYREAN

CONTENTS

1 Core Benefits **Pg. 4**

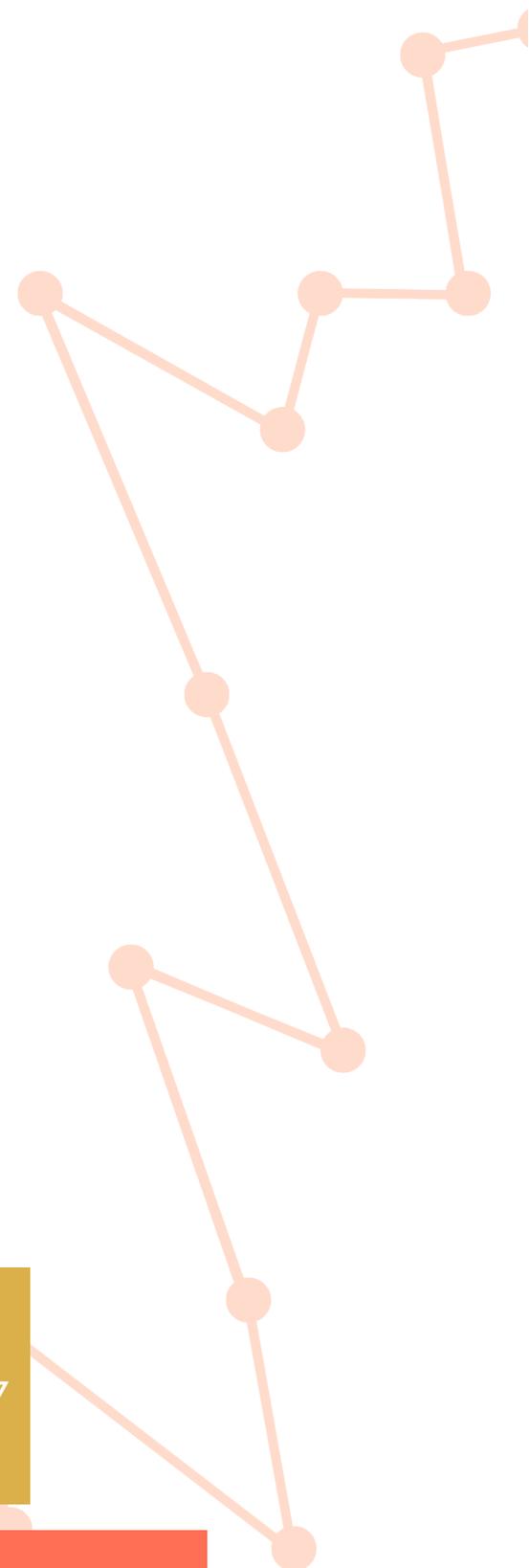
2 Decision Support **Pg. 9**

3 Voluntary & Supplemental **Pg. 15**

4 Wealth & Wellness **Pg. 19**

5 Verification & Surcharges **Pg. 27**

6 About the Study **Pg. 33**



1

Core Benefits



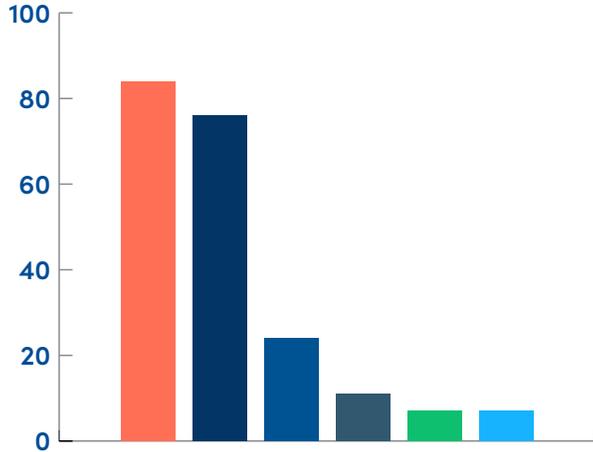
1 | CORE BENEFITS

Highlights at a Glance:

- Preferred Provider Organizations (PPOs) and High Deductible Health Plans (HDHPs) remain the most popular medical plans: **97% of employers surveyed offer at least one of these two types of plans while 64% of employers offer both an HDHP and PPO** – signaling that many employers continue to focus on offering a variety of coverage choices to meet the needs of their generationally diverse workforces.
- Despite the buzz surrounding HDHPs, **PPOs have grown in popularity** over the last year while HDHP growth has remained stagnant. Today, **84% of employers offer a PPO** to their employees, compared to 76% in 2018.
- Of the 76% of employers that offer HDHPs, **only 8% utilize a full-replacement (HDHP-only) strategy**, down significantly from 14% in 2018. This suggests that while employers are still focused on managing medical coverage spending, some businesses may find the tradeoffs from a full-replacement strategy too taxing on other factors, such as talent attraction and employee satisfaction.
- **Manufacturing** remains the leading industry in full-replacement strategy adoption.
- **One-fifth of employers pay the full cost of medical coverage for their employees**, with Services and Energy & Utilities industries leading this approach.
- **More employers are choosing to eliminate medical coverage waiting periods for new employees**, with 40% now offering coverage immediately starting on an employee's date of hire – **a 9% increase** over 2018. Additionally, **over a quarter of employers** surveyed now offer coverage effective on the first day of the month *following* an employee's date of hire – **another 9% increase** over last year's findings.

1 | CORE BENEFITS (CONT.)

HEALTH PLAN TYPES OFFERED BY EMPLOYER†



- 84%** Preferred Provider Organization (PPO)
- 76%** High Deductible Health Plan (HDHP)
- 24%** Health Maintenance Organization (HMO)
- 11%** Exclusive Provider Organization (EPO)
- 7%** Point-of-Service Plan
- 7%** Other*

†Multiple responses were selected where applicable, enabling total percentages to exceed 100%.

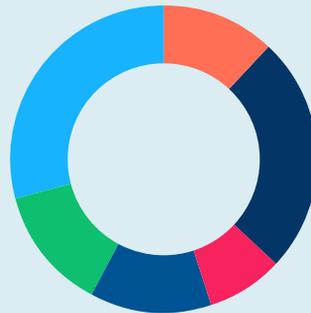
*Includes Health Reimbursement Arrangement (HRA) plans, on-site clinic plans, Medicare supplements, and indemnity plans.

EMPLOYERS PAYING 100% OF THE EMPLOYEE-ONLY COST OF MEDICAL COVERAGE

20 %
Pay Total Cost

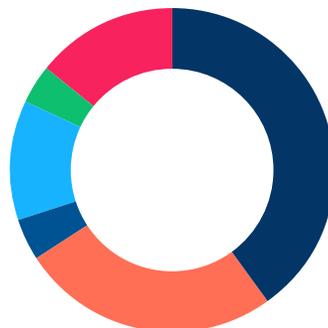
80 %
Do Not Pay Total Cost

EMPLOYERS PAYING 100% OF THE EMPLOYEE-ONLY COST OF MEDICAL COVERAGE, BY INDUSTRY



- 12%** Education
- 25%** Energy & Utilities
- 8%** Government
- 13%** Healthcare
- 13%** Manufacturing/Industrial
- 29%** Services

EMPLOYERS' WAITING PERIODS FOR MEDICAL COVERAGE



- 40%** Coverage Effective Date of Hire
- 26%** Coverage Effective First Day of the Month Following Date of Hire
- 4%** 30/31-Day Waiting Period
- 12%** 60-Day Waiting Period
- 4%** 90-Day Waiting Period
- 14%** Waiting Period Varies by Population

1 | CORE BENEFITS (CONT.)

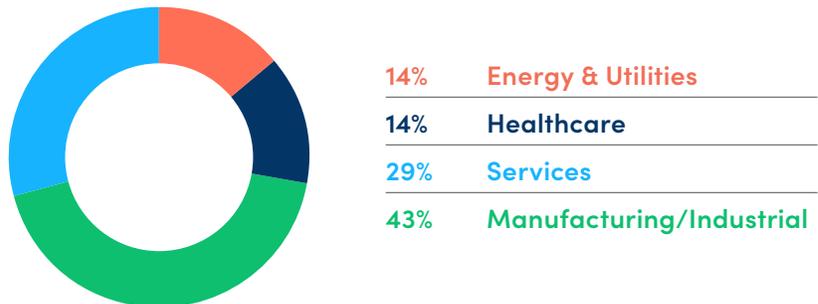
HDHP or PPO: Which Plan is Right for your Business?

High deductible health plans (HDHPs) and preferred provider organizations (PPOs) are the two most widely available medical coverage options for employees. Yet while HDHPs have garnered a lot of attention in recent years, their growth has remained static over the past year – suggesting employers have slowed down their adoption of HDHPs. In fact, **only 8% of employers utilize a full-replacement strategy** (where HDHPs are the only coverage options available). On the other hand, the availability of PPOs – a traditional and typically more expensive plan – **has grown by 8%**.

EMPLOYERS UTILIZING A FULL-REPLACEMENT (HDHP-ONLY) STRATEGY



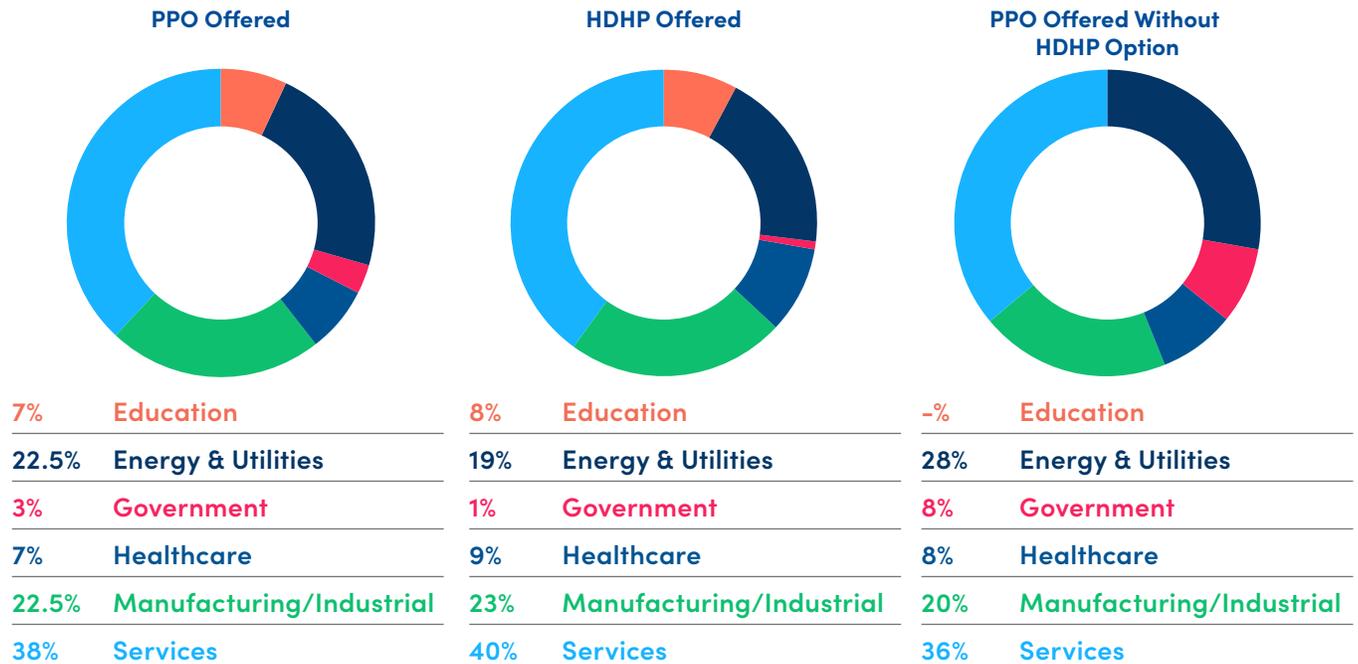
FULL-REPLACEMENT STRATEGY ADOPTION BY INDUSTRY



Determining the right plan options for your participants, business, and budget can be challenging – especially with up to five generations in today’s workforce.¹ Each generation has unique demands, expectations, and priorities depending on their stage of life. Retirees and pre-retirees may have health concerns, and may be used to traditional health plans that require co-pays or percentages of costs for care throughout the year. Younger employees may be relatively healthy and accustomed to consumer-driven plans, but they might also face financial hurdles – such as student loan debt – that make an HDHP’s upfront costs of care difficult to manage.

1 | CORE BENEFITS (CONT.)

BREAKDOWN: PPO & HDHP OFFERINGS BY INDUSTRY



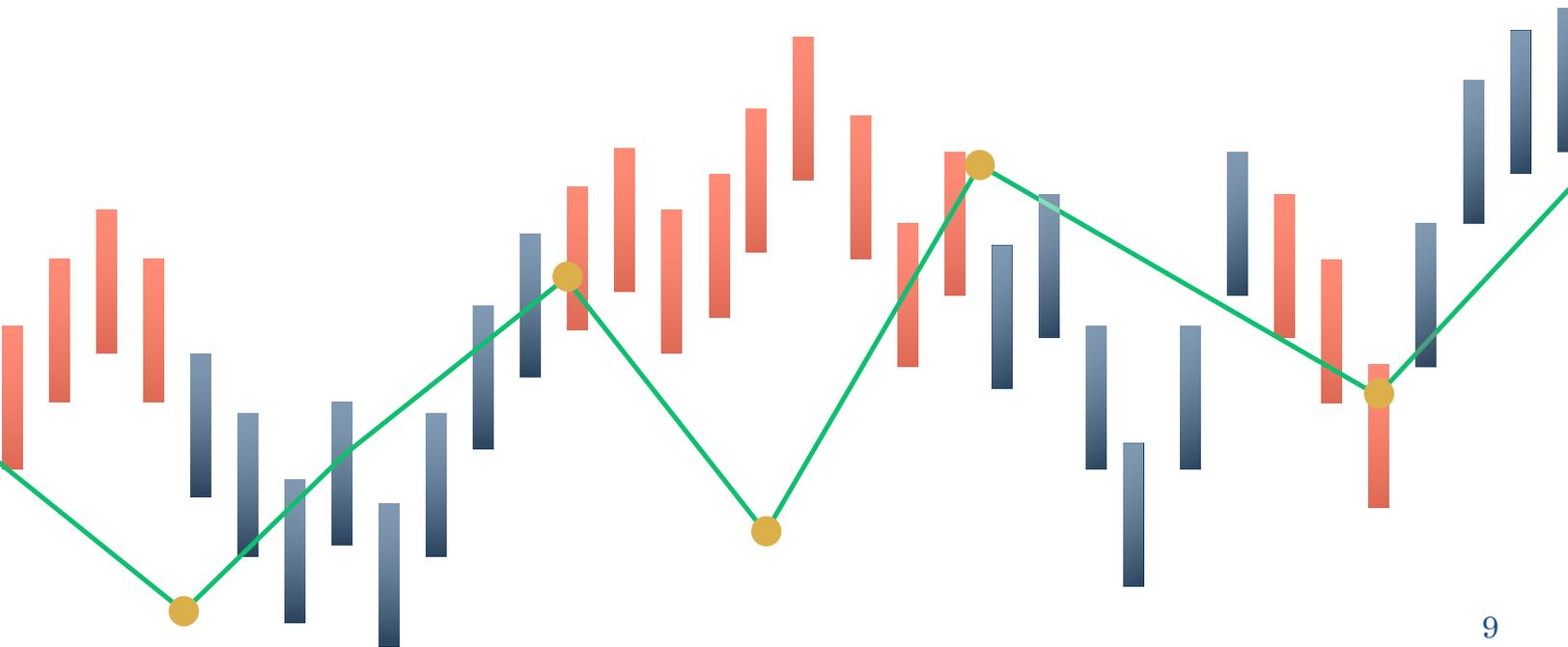
Each type of plan comes with its own unique pros and cons. Although HDHPs are a viable and popular coverage option, they consistently require more engagement on the part of both benefit teams and employees. To effectively utilize this type of plan and minimize the risk of dissatisfaction or frustration, HDHP participants must be aware of the cost responsibilities they will need to balance prior to meeting their deductible and out-of-pocket maximum.

In addition, HDHP participants should be educated on how to open, contribute to, and use a health savings account (HSA), and also learn how to become smarter consumers of their coverage and care. This includes learning how to leverage online tools and resources (such as in-network provider locator tools, cost-of-care estimation tools, and telehealth options) to ensure employees receive the best value while minimizing unpleasant surprises or compromising care when needed, in order for employers to keep claim costs down.

Instead of choosing between one plan or the other, **64% of employers offer both PPO and HDHP plans simultaneously**, a slight uptick from 62% in 2018. For these employers, offering choice to their workforce is the best option - but it's important that employees are equipped with the right tools and support to make the right coverage decisions.

2

Decision Support



2 | DECISION SUPPORT

Highlights at a Glance

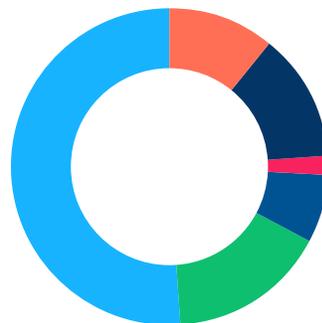
- **Over one-third** of organizations surveyed have decision support tools available to their employees during enrollment.
- The **services industry** leads in decision support availability by a wide margin.
- The most popular decision support tool is the **recommendation engine**, which is utilized at over half of organizations.
- **70% of employers** utilize Empyrean to provide Service Center assistance for their employees both during annual enrollment (AE) and throughout the year.

DECISION SUPPORT AVAILABILITY

37 %
Available

63 %
Not Available

DECISION SUPPORT AVAILABILITY BY INDUSTRY



11%	Education
13%	Energy & Utilities
2%	Government
7%	Healthcare
16%	Manufacturing/Industrial
51%	Services

2 | DECISION SUPPORT (CONT.)

The Right Decision Support and Guidance Make Enrollment Easier for Employees

Although benefits are one of the most important perks of being an employee, it's no secret that employees hardly look forward to benefits enrollment: A recent study found that **over 40% of employees** find researching and reviewing their benefit options more unpleasant than picking up after their dog.²

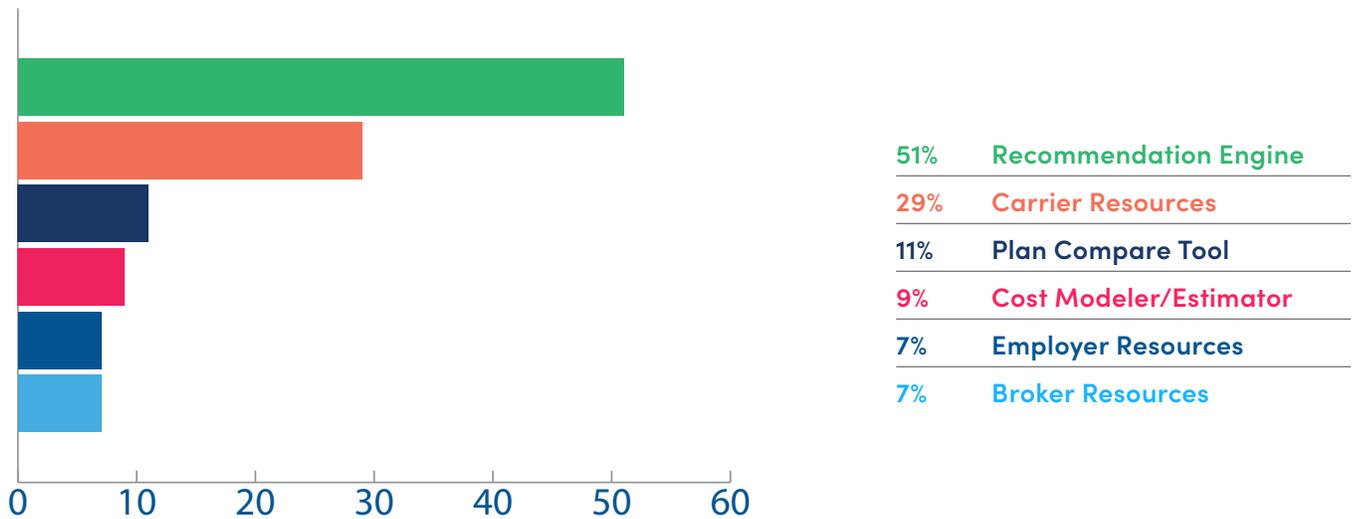
Part of what makes enrollment such a distasteful, stressful and confusing task is the complexity and jargon surrounding benefits. Nearly **one-fifth of employees don't feel confident** that they completely understood all of their elected plans and policies during enrollment, while **21% of employees want simpler language** when it comes to researching their benefits.²

Despite – *or because of* – all of the confusion surrounding benefits enrollment, **over 50% of employees spent less than 30 minutes researching their benefits options** during enrollment – and almost one-fifth made their benefits elections *without* doing any research at all.²

Employees want – *and need* – access to easier ways to research, compare, and enroll in their benefits. When employees elect the right coverage, companies are able to reap the rewards of more satisfied employees, more predictable spending and claims data, and more positive outcomes for all.

2 | DECISION SUPPORT (CONT.)

TYPES OF DECISION SUPPORT UTILIZED†



†Multiple responses were selected where applicable, enabling total percentages to exceed 100%.

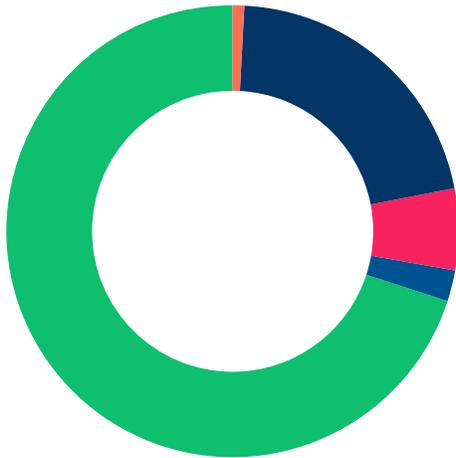
The **recommendation engine** is the most popular decision support tool, offered at **51% of organizations** surveyed. An ideal recommendation engine takes employees through a series of questions to understand employees’ individual and family needs, risk tolerance, and financial preparedness in order to find the best plan options for their unique set of circumstances.

However, not all recommendation engines offer the same intuitive experience or ease of use. The average employee spent **just 32 minutes** looking over their benefit choices² – so participants need decision support tools that allow them to quickly and easily determine their best options without increasing complexity, confusion, or time.

Some recommendation engines require employees to navigate to third-party websites that are separate from the actual enrollment experience, or force employees to churn through long, frivolous, and narrated scripts in an effort to seem approachable or engaging. At first glance, these decision support solutions can seem appealing (and even humorous). But for the majority of employees looking to complete their benefits enrollment as quickly as possible, this approach can try their patience and become unnecessarily more tedious after just a very short time, especially if their third-party selections are not automatically integrated into the actual enrollment process.

2 | DECISION SUPPORT (CONT.)

SERVICE CENTER SUPPORT



70% Empyrean - AE & Ongoing

21% Client

6% Broker or Other Vendor

2% None

1% Empyrean - AE Only

Compare the enrollment experience to filing your taxes: While common, easy-to-understand language is appreciated when using tax-filing software, the experience might become more frustrating if it included narration and animations that were meant to be entertaining – but only lengthened the process.

For some employees, speaking with a live benefits professional provides the one-on-one reassurance and assistance they need to navigate enrollment and gain confidence in their decision-making. In fact, 48% of employees want the opportunity to speak with a benefits expert about their benefits.³ **98% of employers** surveyed offer Service Center help to their employees, and **70% of employers** use Empyrean to provide this service both during and beyond enrollment.

Delivering Service Center guidance doesn't have to drain your team's resources, and outsourcing doesn't have to compromise on service quality. Your benefits administration partner should provide expert service through knowledgeable, client-dedicated, and 100% US-based and in-house teams, to help support your employees at every step of enrollment as well as during the year.

Look to your benefits enrollment and administration partner to provide the tools and service your employees need to easily identify, compare, and enroll in the plans that best match their priorities. With a quick and easily accessible recommendation engine *directly within the enrollment experience*, alongside dedicated service, your employees can get the guidance they need to make better benefit choices and build year-round satisfaction.

For more on decision support tools, download Empyrean's At-A-Glance Guide: "Drive Smart Enrollment with Decision Support Tools."

3

Voluntary &
Supplemental
Benefits



3 | VOLUNTARY & SUPPLEMENTAL BENEFITS

Voluntary benefits have become a big point of differentiation when it comes to benefits and remaining competitive yet cost-conscious.

Highlights at a Glance

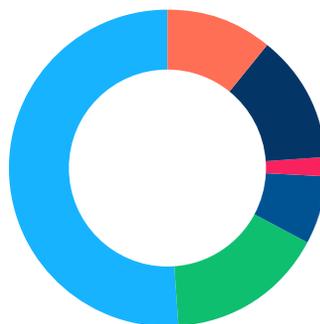
- **Over three-fourths** of employers offer voluntary benefits to their employees, such as accident, critical illness, and pet coverage.
- **100%** of employers surveyed offer supplemental benefits such as basic life, short-term and long-term disability and buy-up plans, and basic accidental death and dismemberment coverage.
- **Accident and critical illness** are the most popular voluntary benefits. Of employers that offer voluntary benefits, 75% offer at least one of these plans. **62% of these employers offer both accident and critical illness** coverage to their employees.

EMPLOYERS OFFERING VOLUNTARY BENEFITS

78 %
Offer

22 %
Do Not Offer

EMPLOYERS OFFERING VOLUNTARY BENEFITS BY INDUSTRY



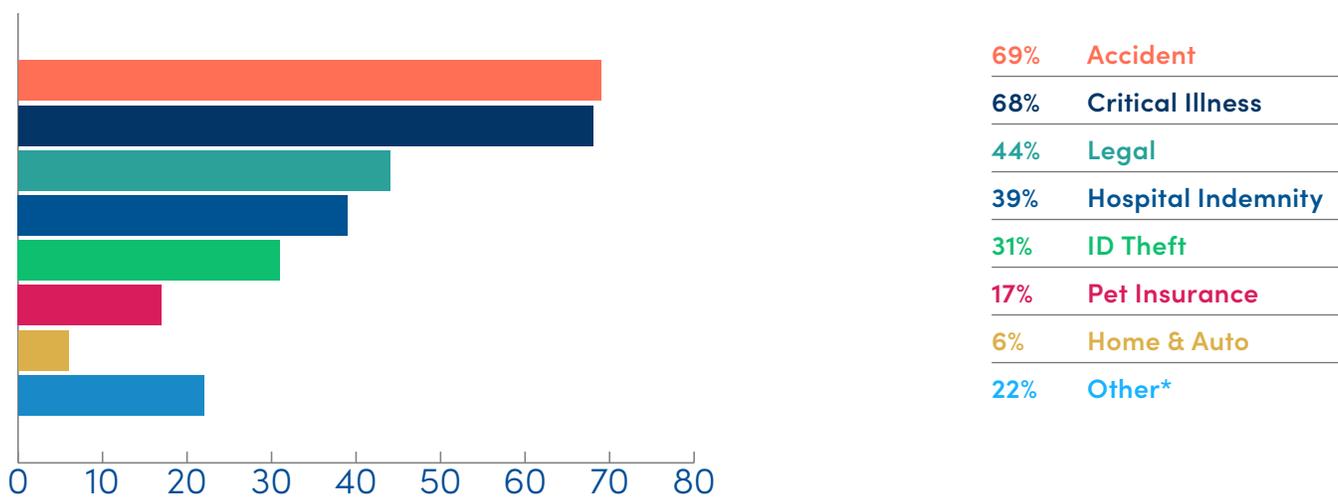
6%	Education
14%	Energy & Utilities
3%	Government
10%	Healthcare
26%	Manufacturing/Industrial
41%	Services

3 | VOLUNTARY & SUPPLEMENTAL BENEFITS (CONT.)

Driving Value with Voluntary Benefits

Voluntary benefits are becoming a must-have for many employers looking to broaden their benefit choices to accommodate evolving employee demands. These benefits go beyond traditionally employer-covered options (such as basic life, short- and long-term disability coverage, and related buy-up plans) to include legal insurance, pet insurance, home and auto coverage, and ID theft protection.

VOLUNTARY BENEFITS OFFERED†



†Multiple responses were selected where applicable, enabling total percentages to exceed 100%.

*Other benefits include, health coaching, travel accident insurance, and renter's insurance.

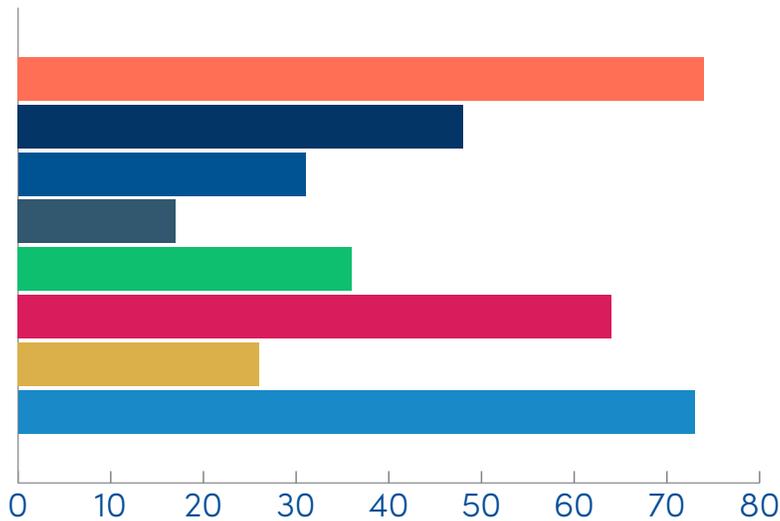
Voluntary benefits provide employers with cost-effective opportunities to offer coverage options without adding to their benefits spend – and these benefits work holistically with employees' core coverage as well.

With the rise of HDHPs as one of the most popular employer-sponsored health plans, voluntary benefits like accident and critical illness coverage have become smart choices to help employees prepare for the unexpected.

3 | VOLUNTARY & SUPPLEMENTAL BENEFITS (CONT.)

Employees electing an HDHP must be prepared to cover their high deductibles in the event of an unexpected or especially costly medical need. Even with the minimum high deductible set by the IRS, employees are still responsible for meeting at least a \$1,350 deductible and greater out-of-pocket maximum. However, **31% of employees admit they would not be able to pay more than \$500** in the event of a sudden medical bill, and **58% would be unable to pay over \$1,000.**² Accident and critical illness coverage offer employees increased protection and peace-of-mind, especially for those enrolled in HDHPs.

ADDITIONAL BENEFITS OFFERED BY EMPLOYERS†



74% Basic Life - Multiplied by an Increment of Pay (ex: 1x Salary, 2x Salary, Etc.)

48% Basic Life & Accidental Death & Dismemberment (AD&D) - Flat \$ Amount

31% Long-Term Disability (LTD) Buy-Up Plan

17% Short-Term Disability (STD) Buy-Up Plan

36% Long-Term Disability (LTD) - Employee Paid

64% Long-Term Disability (LTD) - 100% Employer Paid

26% Short-Term Disability (STD) - Employee Paid

73% Short-Term Disability (STD) - 100% Employer Paid

†Multiple responses were selected where applicable, enabling total percentages to exceed 100%.

4

Wealth &
Wellness



4 | WEALTH & WELLNESS

Highlights at a Glance

- **Less than one-fourth** of employers offer a Health Reimbursement Account (HRA), down just slightly from 27% in 2018.
- **Nearly all employers** who offer an HDHP plan also offer their employees a health savings account (HSA). However, **nearly a quarter** of these same employers **do not provide a contribution to employees' HSA accounts**.
- **53% of employers** now provide eligible employees with an **annual lump-sum HSA contribution**, up from 47% last year.
- Employers' employee-only HSA contribution amounts have remained fairly stable over the past year, with the majority of employers offering **\$500 to \$750 for single employees**. More employers have increased their family HSA contributions to within the **\$1,001 to \$1,999 range**.
- **Less than half of employers offer employees a dedicated wellness program**, and three-fourths of these employees implemented their wellness programs within the past three years or more. **More than 50%** of these employers include biometric screenings as part of their wellness program.
- **84% offer an associated incentive** to encourage program participation.
- Although financial wellness is becoming a buzzworthy topic in the benefits industry, **only 2% of employers have implemented a financial wellness program**.

4 | WEALTH & WELLNESS (CONT.)

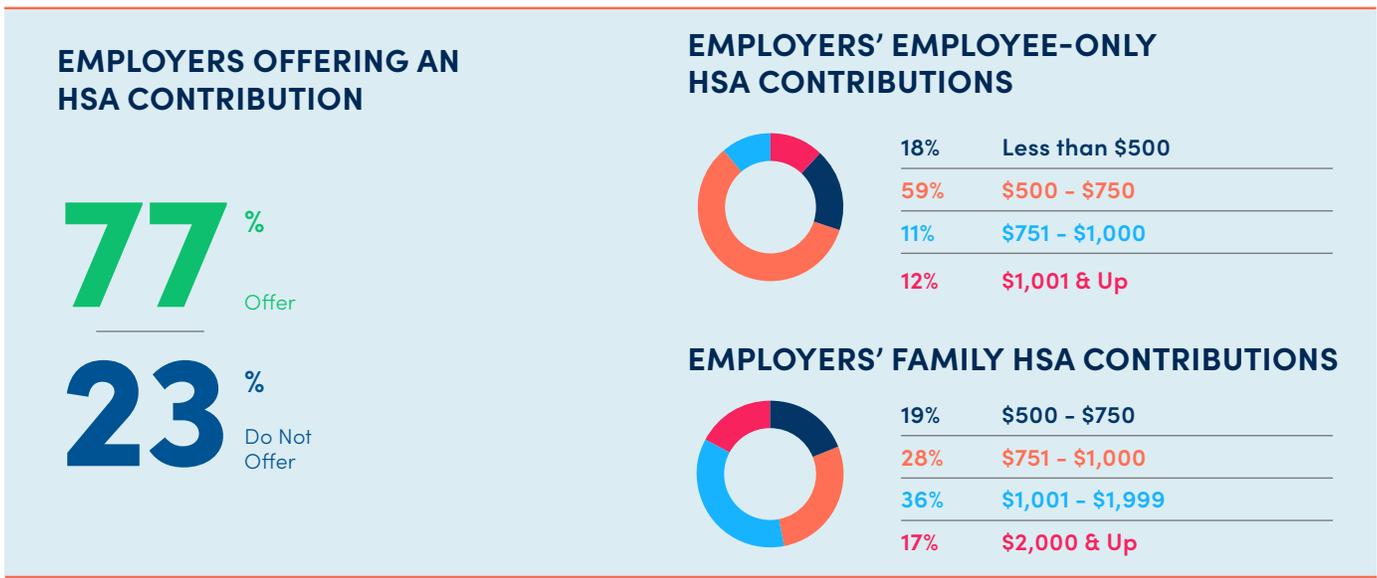
**EMPLOYERS OFFERING A
HEALTH REIMBURSEMENT
ACCOUNT (HRA)****24** %
Offer**76** %
Do Not Offer**EMPLOYERS OFFERING A HEALTH
SAVINGS ACCOUNT (HSA) FOR
HDHP PARTICIPANTS****93** %
Offer**7** %
Do Not Offer***About Health Savings Accounts (HSAs)***

Health savings accounts (HSAs) are a must-have for HDHP participants to maximize the benefits of their health plan. HSAs provide employees with a designated savings account for eligible medical expenses – one that can often be fueled by automatic deposits right from their paycheck, which can help lower their taxable income.

One of the many benefits of adopting an HDHP – in addition to the typically lower premiums compared to traditional medical plans – is gaining the exclusive ability to open and contribute to an HSA. Employees who are properly educated on how their HSA works are well-poised to make the most of both their health plan and their associated savings account.

4 | WEALTH & WELLNESS (CONT.)

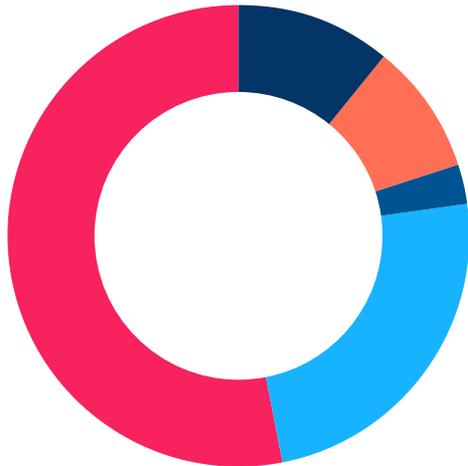
For example, employees may not be aware of the wide variety of expenses that HSA funds can cover – including prescriptions, dental procedures, and eyeglasses or contacts. And unlike flexible spending accounts (FSAs) or health reimbursement accounts (HRAs), HSA contributions *never expire*, and funds may still be used by an employee even if they change employers or elect a different type of medical coverage down the road. Employees may choose to utilize HSA funds to pay for immediate eligible expenses, or they can use their HSA as a secondary retirement account to save (and potentially invest and grow) their funds to prepare for health-related expenses during retirement.



Though HSAs boast some impressive benefits, employees may require an incentive to take steps to actually open an account. Today, **more than three-fourths of employers** offer HDHP participants an HSA contribution. Employers' HSA contributions not only encourage employees to open an HSA account and take advantage of these funds, but also allow employers to help offset the high deductibles their participants will face every year.

4 | WEALTH & WELLNESS (CONT.)

EMPLOYER HSA CONTRIBUTION SCHEDULES



53%	One-Time
24%	Per-Pay-Period
11%	Other
9%	Quarterly
3%	Semi-Annual

While employer contributions vary, **53% of employers** offer an annual lump-sum HSA contribution for HDHP participants. Offering a lump-sum contribution allows employees to recognize the immediate impact that your contribution will have on their deductible.

For example, an employee with a \$1,350 deductible may receive a \$500, lump-sum annual contribution from their employer at the start of each year. With those funds automatically deposited into their HSA, this contribution effectively lowers the employee's out-of-pocket deductible cost down to \$850, bringing this number closer to the deductible amount of traditional plans.

However, some employers choose to spread their HSA contributions out over the course of the year due to budget constraints or risk concerns: Employers that offer a lump-sum contribution may lose out on the benefits of this investment if an employee leaves the company soon after receiving their annual funds.

Regardless of an employer's contribution amount or contribution schedule, the key factor when it comes to HSA accounts is getting employees to open and engage with this benefit in the first place. **Offering HSA access through your benefits enrollment and engagement experience** is the easiest way to drive education and utilization through one centralized point-of-access.

4 | WEALTH & WELLNESS (CONT.)

After opening their HSA account, employees should be able to easily adjust their paycheck deduction amount from the same portal where they manage the rest of their benefits: Integrating the HSA experience within your employee benefits portal makes it easy for employees to access and take control of their health and wealth through their HSA. This also helps strengthen participants' understanding of how their benefits selection, savings tools, and your financial contribution (if offered) work together to keep them covered. Leveraging pre-established partnerships between your benefits administration provider and best-in-class HSA vendors make it cost-effective and easier than ever to encourage HSA utilization and establish your benefits portal as the one-stop benefits shop your employees want and need.

Wellness in the Workplace

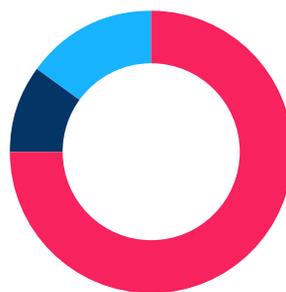
42% of employers offer a health-related wellness program to their employees. These types of programs may bring a host of benefits, including healthier habits, reduced stress, and lower medical bills.

EMPLOYERS OFFERING WELLNESS PROGRAMS

42%
Offer Program

58%
Do Not Offer Program

EMPLOYERS' WELLNESS PROGRAM IMPLEMENTATION



75% Within the Past Three Years or More

10% Within the Past Two Years

15% Within the Past Year

4 | WEALTH & WELLNESS (CONT.)

To get employees interested in wellness programs – and to help them stay motivated – **84% of employers** also offer an incentive related to program participation. Though employees may seek to make lifestyle changes related to weight, sleep, stress, and other factors, making lasting changes can prove difficult. Offering an incentive – especially a financial one – gives employees an attainable goal outside of their own personal goals, which can help keep them on track.

There are a wide variety of wellness program providers available to employers – but the employee experience is key to reaping the best results. Choosing a best-in-class wellness program that is accessible from within employees' benefits portal will make it easier for participants to engage with their wellness program by providing one-stop-shop access. This eliminates the hurdles of multiple sites, logins, and passwords while encouraging engagement with their other benefits at the same time.

EMPLOYERS UTILIZING INCENTIVES AS PART OF THEIR WELLNESS PROGRAM

84 %
Utilize Incentives

16 %
Do Not Utilize Incentives

EMPLOYERS INCLUDING BIOMETRIC SCREENINGS AS PART OF THEIR WELLNESS STRATEGY

51 %
Include Screening

49 %
Do Not Include Screening

Biometric screenings are also becoming a popular element of employer wellness, with over half of employers including screenings as part of their programs. This preventive care option provides employees with a snapshot of their current health metrics and can deliver important indicators to keep employees proactive about their wellbeing. Some employers now hold on-site biometric screening events, which provides an easy opportunity for employees to get checked out – especially those with busy schedules or that struggle to find time to complete a screening at a clinic.

Recently, financial wellness programs have been the subject of increased interest – although **only 2% of employers** surveyed currently offer this kind of program. Financial counseling to meet specific goals, 401k and retirement guidance, and money management workshops are among some of the wellness efforts that can be offered by employers.

Financial wellbeing is a near-universal concept: Younger employees may benefit from assistance when paying back student loans, saving up for a home, or looking to start a family, while older employees may appreciate help as they navigate or prepare to enter retirement. Despite the interest in financial wellness, the majority of employers may be waiting to determine the most effective means of implementing and offering this kind of program to their employees.

For more on wellness programs, check out the At-A-Glance Guide: “Wellness at Work.”

5

Verification & Surcharges



5 | VERIFICATIONS & SURCHARGES

Highlights at a Glance

- **Tobacco surcharges for medical coverage have remained stable over the past year**, but fewer employers overall are adding discounts for life insurance or applying discounts for non-smokers.
- 70% of employers' tobacco surcharge for life insurance **varies by age**, with all other surcharges varying by carrier rates or other factors.
- **Over 90% of employers do not certify tobacco usage or spousal coverage**, relying instead on employees to willingly provide this information.
- Significantly fewer employers add a spousal surcharge to the cost of medical coverage as compared to last year's data: **22% add a spousal surcharge today** versus 33% in 2018.
- The most common spousal surcharge remains in the **\$1,001 to \$1,499 range**, while **8% fewer** employers charge upwards of \$1,500 as compared to last year.
- Certifying spousal coverage can be difficult, which may explain why **only 7% of employers utilize a vendor to certify spousal medical coverage**.
- **67% of employers require dependent verification**, and nearly half of all employers surveyed utilize Empyrean for dependent verification where required. Dependent verification remains a key part of ensuring employers are not overpaying for ineligible dependents.

5 | VERIFICATION & SURCHARGE (CONT.)

EMPLOYERS ADDING TOBACCO SURCHARGE TO THE COST OF MEDICAL COVERAGE

72 %
Do Not Add Surcharge

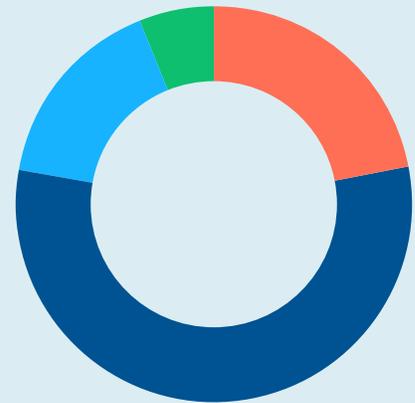
28 %
Add Surcharge

EMPLOYERS ADDING TOBACCO SURCHARGE TO THE COST OF LIFE INSURANCE

92 %
Do Not Add Surcharge

8 %
Add Surcharge

ANNUAL TOBACCO SURCHARGE ADDED TO THE COST OF MEDICAL COVERAGE



22% **Less Than \$500**

56% **\$500 to \$1,000**

16% **\$1,001 to \$1,499**

6% **\$1,500 & Up**

EMPLOYERS ADDING A DISCOUNT FOR NON-TOBACCO USERS

12 %
Do Not Add Surcharge

88 %
Add Discount

EMPLOYERS' METHOD TO CERTIFY TOBACCO USAGE

7 %
Use Vendor

93 %
No Vendor (Honor System)

5 | VERIFICATION & SURCHARGE (CONT.)

Eligibility and Verification for Spouses and Dependents

Significantly fewer employers are imposing spousal surcharges, an **11% decrease** over last year. Part of this may be due to the difficulty of spousal coverage verification, especially throughout the year (if, for example, a spouse is a part time or seasonal employee, changes jobs, etc.). Employers that implement spousal exclusion and surcharges also run a risk of dissatisfaction among employees.

EMPLOYERS ADDING A SPOUSAL SURCHARGE TO THE COST OF MEDICAL COVERAGE

78 %
Do Not Add Surcharge

22 %
Add Surcharge

EMPLOYER METHODS TO CERTIFY SPOUSAL COVERAGE

7 %
Use Vendor

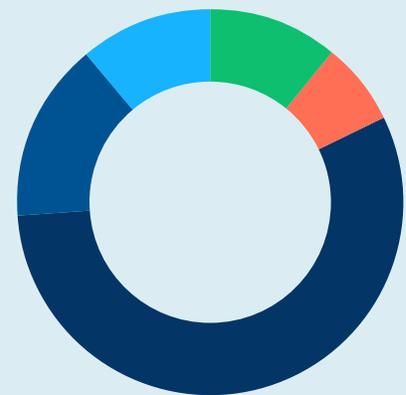
93 %
No Verification (Honor System)

EMPLOYERS DENYING MEDICAL COVERAGE ELIGIBILITY TO SPOUSES THAT ARE ELIGIBLE UNDER ANOTHER EMPLOYERS' PLAN

11 %
Deny Eligibility

89 %
Do Not Deny Eligibility

ANNUAL SPOUSAL SURCHARGE ADDED TO THE COST OF MEDICAL COVERAGE

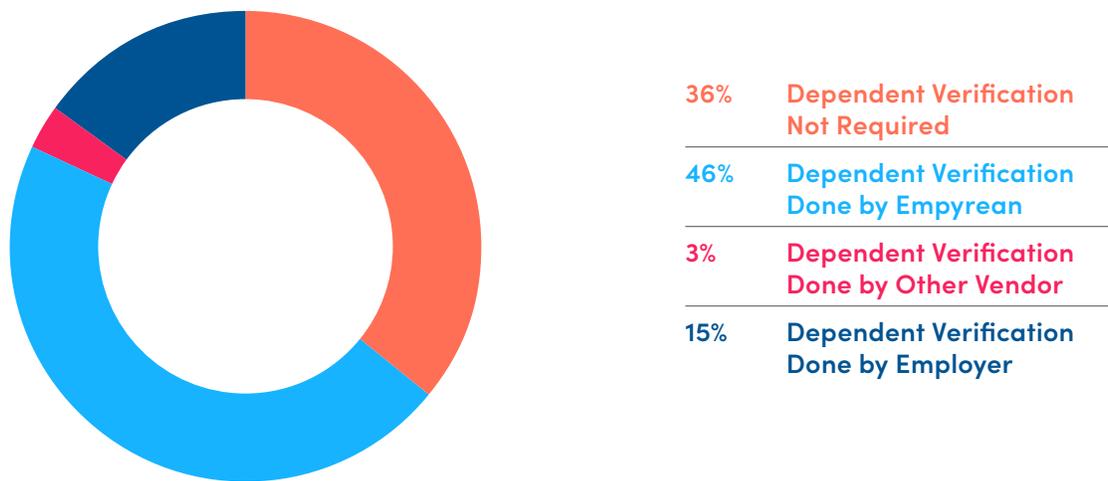


11%	Less Than \$500
7%	\$500 to \$1,000
56%	\$1,001 to \$1,499
15%	\$1,500 & Up
11%	Varies

5 | VERIFICATION & SURCHARGE (CONT.)

Dependent verification remains an important part of employers' budget strategies. Ineligible dependents can rack up costs, lead to inaccurate data, and cause headaches and confusion for both benefit teams and participants. **64% of employers require dependent verification**, in line with last year's findings.

EMPLOYERS REQUIRING DEPENDENT VERIFICATION



However, dependent verification can be a burdensome task for benefit teams to tackle on their own, and the verification process can be stressful and irritating for employees if not managed properly. **Nearly half of employers** surveyed trust Empyrean to manage the dependent verification process to keep their data clean, employees happy, and risks mitigated without impacting their teams' efficiency.

CONCLUSION

Across this year's findings, education, interconnectivity, and a holistic, people-centric approach stand out as some of the most important takeaways for benefits success.

While employers navigate territory such as voluntary benefits, financial and health wellness programs, a new generation of workers, and more – strong partnerships are proving invaluable to executing strategies, delivering engaging experiences, and remaining nimble and adaptive to master what is on the horizon.

How do your experiences and strategy compare? What's next for your business and industry? And how will your benefit partners be prepared to help guide you as your needs shift?

Benefit leaders may not be able to predict the future – but with the right technology, accurate data, and knowledgeable support, you can be sure you're proactive and ready to tackle whatever comes next.

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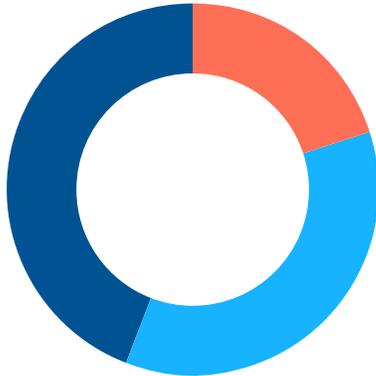
About the Report



6 | ABOUT THE REPORT

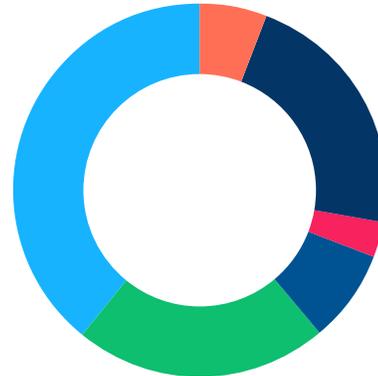
This report was compiled from data collected in January 2019 across 121 Empyrean employer clients. The breakdown of employer demographics is as follows.

EMPLOYER SIZES



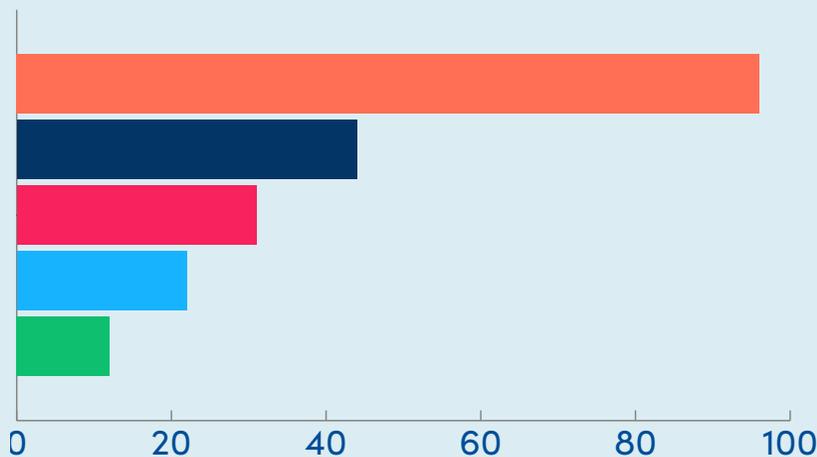
36%	500 to 1,999 Lives
44%	2,000 to 9,999 Lives
20%	10,000 Lives & Up

EMPLOYER INDUSTRIES



6%	Education
22%	Energy & Utilities
3%	Government
8%	Healthcare
22%	Manufacturing/Industrial
39%	Services

EMPLOYER POPULATIONS†



93%	Active Employees
44%	Retirees
31%	Union
22%	Expatriates
12%	Other*

†Multiple responses were selected where applicable, enabling total percentages to exceed 100%.

*Other populations include seasonal hires, interns, part-time and temporary employees, survivors, COBRA, recipients, and employees on disability or leave.

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Empyrean Benefit Solutions manages employee health and welfare benefits programs, combining the industry's most modern, client-adaptive, and configurable benefits technology platform with expert, responsive service to deliver Hi-Touch Benefits Administration.

Empyrean provides market-leading enrollment, eligibility management, ACA reporting, and other plan administration services that empower employers, insurance brokers, and healthcare exchanges to meet ever-evolving benefit challenges.

Founded in 2006, Empyrean's integrated platform serves over three million annual participants across a wide spectrum of sizes, industries, and complexities

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